



University of Alaska Students' Disclosures of Sexual Misconduct and Sexual Assault Victimization

Brad A. Myrstol and Lindsey Blumenstein

In a recent Alaska Justice Statistical Analysis Center (AJSAC) *Fact Sheet* issue (available at www.uaa.alaska.edu/ajsac) we published initial findings from the *University of Alaska Campus Climate Survey*, a research study funded by the U.S. Department of Justice, Bureau of Justice Statistics. The *University of Alaska Campus Climate Survey* was designed to establish the prevalence of sexual misconduct and sexual assault committed against University of Alaska (UA) students both on and off campus.

The estimates of sexual misconduct and sexual assault published in the *Fact Sheet* were based on the self-reported experiences of 1,982 randomly selected undergraduate and graduate students enrolled at the University of Alaska Anchorage (UAA), the University of Alaska Fairbanks (UAF), and the University of Alaska Southeast (UAS) during spring semester 2016. Results showed that approximately 1 out of every 9 UA students experienced sexual misconduct, sexual assault, or both between January 2015 and spring semester 2016, either on or off campus.

Using data from the *University of Alaska Campus Climate Survey*, this article seeks to answer three basic questions: (1) How often did UA students who experienced sexual violence between January 2015 and spring semester 2016, either on or off campus, disclose their victimization to others? (2) For those UA students who did experience sexual violence victimization and who chose

to disclose their victimization to others, with whom did they share their experiences? (3) Did the likelihood of sexual violence disclosure vary significantly according to UA students' demographic characteristics (age, race/ethnicity, sex/gender)?

This article uses the data collected for the University of Alaska Campus Climate Survey to explore how often UA students who experienced sexual violence, either on or off campus, disclosed their victimizations to others. (Sexual violence is defined as sexual misconduct, sexual assault, or both.)

Survey Definitions of Sexual Misconduct and Sexual Assault

Sexual misconduct refers to unwanted, uninvited, or coerced touching of a sexual nature, or unwanted or uninvited sexual nature commentary. Survey respondents were asked, "Since January 2015, has someone attempted or succeeded in having unwanted, uninvited, or coerced touching of a sexual nature or unwanted/uninvited sexual commentary with you under any circumstances (on or off campus), or do you suspect someone did?"

Every survey respondent was provided the following examples of *sexual misconduct*: kissing without permission; forced kissing; touching of body or private parts in a sexual way without permission; grabbing, fondling, or rubbing up against a person in a sexual way (even if over clothing); taking a sexual experience further than wanted even if consent was given for minor sexual contact such as kissing or touching, without it leading to intercourse; and, lewd or blatant sexual comments that make a person feel uncomfortable, uneasy, or unsafe.

Sexual assault refers to nonconsensual or unwanted sexual contact with penetration, even if consent was given for minor sexual contact such as kissing or touching. Survey respondents were asked, "Since January

2015, has someone attempted or succeeded in having nonconsensual or unwanted sexual contact with you under any circumstances (on or off campus), or do you suspect someone did?"

Every survey respondent was provided the following examples of *sexual assault*: sexual penetration with a finger or object (someone putting their finger or an object in the vagina or anus); oral sex (someone's mouth or tongue making contact with genitals); anal sex (someone's penis being put into an anus); and sexual intercourse (someone's penis being put into a vagina).

Disclosure and Reporting of Sexual Violence Victimization

This article makes use of two terms to discuss sexual violence victims' efforts to make their victimizations known to others: *disclose* and *report*. These two terms are distinguished by the recipient of the information. *Disclosure* includes all the victims' discussions with others, but *reports* only includes the victims' discussions with officials such as university or law enforcement representatives.

Nondisclosure of Sexual Violence Victimization

Within the realm of criminal offenses, sexual violence is among the most *underreported*. Table 1 (page 11) presents findings from the 2014 National Crime Victimization Survey (an annual nationwide survey conducted by the U.S. Department of Justice, Bureau of Justice Statistics), which asks crime victims if they reported their victimization to police. Overall, less than half (46.0%) of all violent crime incidents were reported to police. **Among the violent crimes examined, sexual assault/rape victimizations were the least likely to be**

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Senate Bill 91: Summary of Policy Reforms

SB91: Omnibus Criminal Law & Procedure; Corrections Act was signed into law on July 11, 2016. This article highlights provisions of SB91 related to the recommendations made by the Alaska Criminal Justice Commission. The Commission was established by then Governor Sean Parnell in 2014 with the mission of evaluating and making recommendations “for improving criminal sentencing practices and criminal justice practices, including rehabilitation and restitution.”

The bipartisan, statewide Commission includes the following representatives: Gregory P. Razo, Chair (Anchorage), CIRI, Alaska Native Community; Justice Alexander O. Bryner (Ret.) (Anchorage), Designee of the Alaska Supreme Court Chief Justice; Senator John Coghill (North Pole), Non-voting; Attorney General Jahna Lindemuth, Department of Law (Juneau); Jeff L. Jessee, CEO, Alaska Mental Health Trust Authority (Anchorage); Representative Wesley C. Keller (Wasilla), Non-voting; Commissioner Walt Monegan, Department of Public Safety (Anchorage); District Court Judge Stephanie Rhoades (Anchorage), 3rd Judicial District; Lt. Kristie Sell, Juneau Police Department (Juneau); Brenda Stanfill, Executive Director, Interior Alaska Center for Non-Violent Living (Fairbanks); Alaska Public Defender Quinlan Steiner (Anchorage); Superior Court Judge Trevor N. Stephens (Ketchikan), 1st Judicial District; and Commissioner Dean Williams, Department of Corrections (Anchorage).

The Commission reached a number of consensus recommendations including:

Implementing evidence-based pretrial practices by making changes to bail practices to focus pretrial release decisions more on risk than on ability to pay, and expanding law enforcement’s discretion to use citations in lieu of arrest for lower-level nonviolent offenders.

Focusing prison beds on serious and violent offenders by diverting nonviolent misdemeanor offenders to alternatives; revising drug crime penalties to focus the most severe punishments on higher-level drug dealers; raising the felony theft threshold and indexing it to inflation; realigning sentence ranges in statute; expanding and streamlining the use of discretionary parole; and implementing a specialty parole option for the oldest cohort of prisoners.

Strengthening probation and parole supervision by standardizing sanctions for violations of probation and parole conditions to ensure they are swift, certain, and

proportional; establishing incentives to comply with conditions; focusing treatment resources on high-needs offenders; and extending good time eligibility to offenders serving sentences on electronic monitoring.

Improving reentry programming by ensuring that individuals exiting prison have the resources they need to remain crime-free and become contributing members of society.

Ensuring oversight and accountability by requiring collection of key performance measures and establishing an oversight council.

Reinvesting in programs proven to reduce recidivism and protect public safety by directing funds over the next six years into evidence-based pretrial supervision; in-prison and community-based alcohol and substance abuse treatment; transitional support for offenders returning to the community; and victims’ services and violence prevention programming.

Following are highlights of the provisions of SB91 that stem from recommendations of the Alaska Criminal Justice Commission. *These highlights do not include every measure in the bill.*

Recommendation: Implement Evidence-based Pretrial Practices

SB91 adopts a number of evidence-based pretrial reforms designed to improve public safety and pretrial outcomes:

Risk-Based Release Decision-Making

Release decisions will now be made based on a defendant’s risk, as assessed by a validated pretrial risk instrument, and alleged offense. Defendants will fall into three potential categories:

Required release on personal recognition or unsecured bond: Low- and moderate-risk defendants charged with non-violent, non-DUI misdemeanors; low-risk defendants charged with non-violent, non-DUI class C felonies.

Presumption of release on personal recognition or unsecured bond, which can be overcome if the judge finds that monetary bail is the only way to reasonably assure court appearance and public safety: Defendants charged with DUI; low- and moderate-risk defendants charged with failure to appear or violation of release conditions; high-risk defendants charged with a non-violent misdemeanor; moderate- and high-risk defendants charged with a non-violent class C felony; and all other defendants

assessed as low-risk for pretrial failure.

Monetary bail may be ordered: All other defendants, which includes any moderate- and high-risk defendant charged with a person, DV [domestic violence], or sex offense or higher-level felony. In all cases, the courts may order additional, non-monetary release conditions, including complying with pretrial supervision, so long as they are the least restrictive conditions necessary to assure court appearance and public safety.

Pretrial Supervision

SB91 establishes a pretrial services program at the Department of Corrections to conduct pretrial risk assessments using an objective, data-based, validated pretrial risk assessment tool; make recommendations to the court regarding release decisions and conditions; and supervise pretrial defendants who are released. The use of third-party custodians will be restricted to only those cases where pretrial supervision is not available and no secured monetary bond is ordered. Additionally, the courts will be required to send court date reminders to defendants to help improve court appearance rates.

Arrest Procedures

Peace officers will now be permitted (but not required) to issue a citation for class C felony offenses, unless the person is a danger to others or the offense involves violence or harm to another person or to property.

Failure to Appear (FTA) and Violation of Conditions of Release (VCOR)

Failure to Appear (FTA): FTA is now an arrestable violation, unless the defendant fails to appear for more than 30 days or in order to avoid prosecution (in which case it remains a misdemeanor or Class C Felony).

Violation of Conditions of Release (VCOR): VCOR is now an arrestable violation. Under SB91, FTA and VCOR are responded to by arresting the defendant, revoking bail, conducting a new pretrial risk assessment, and then either detaining the individual in prison or releasing the person with greater restrictions or conditions.

Recommendation: Focus Prison Beds on Serious and Violent Offenders

Evidence suggests that for many offenders, incarceration is not more effective at reducing recidivism than non-custodial sanctions—and a growing body of research shows that for many low-level offenders, prison terms may increase rather than reduce recidivism. Further, the most rigorous

research in the field shows that longer prison stays do not reduce recidivism any more than shorter prison stays.

SB91 adopts a number of reforms designed to focus expensive prison beds on serious and violent offenders, including:

Misdemeanor Sentencing and Classification

Senate Bill 91 includes the following changes to misdemeanor sentencing and classification:

Class B Misdemeanors: Sets the maximum term of imprisonment for a Class B Misdemeanor to ten days, except if the offense is distribution of explicit images. Sets a maximum term for disorderly conduct of 24 hours. Reclassifies certain Class B misdemeanors as violations.

Class A Misdemeanors: Provides for a presumptive range of zero to thirty days for Class A Misdemeanors, with exceptions for offenses with mandatory minimums of thirty days or above, for cases in which the conduct was among the most serious included in the definition of the offense, for defendants with similar past convictions, and for assault in the fourth degree, sexual assault in the fourth degree, sexual abuse of a minor in the fourth degree, indecent exposure in the second degree if the victim is under 15, and harassment in the first degree.

Felony Sentencing

Reduces the presumptive sentencing range for non-sex felony offenses (see Table 1 for details).

Controlled Substances

Senate Bill 91 includes the following policy changes related to controlled substances:

Possession: Reduces the classification of possession offenses for all controlled substances except GHB [gamma-hydroxybutyric acid] to a Class A Misdemeanor and eliminates the imposition of active imprisonment time for the first two misdemeanor possession offenses.

Commercial: Reduces the penalty for com-

mercial offenses relating to less than 1 gram of a IA substance or 2.5 grams of IIA or IIIA controlled substances to a Class C Felony, and more than 1 gram of a IA controlled substance to a Class B Felony.

Theft

Senate Bill 91 includes the following policy changes related to theft:

Felony Theft Threshold: Increases the threshold value for theft related offenses from \$750 to \$1,000 and requires the level to be adjusted every five years to account for inflation.

Shoplifting: Eliminates use of incarceration as a sanction for theft under \$250 (first two offenses), and limits the use of incarceration to 5 days suspended imprisonment and six months of probation for subsequent shoplifting offenses.

Traffic Offenses

Senate Bill 91 includes the following policy changes related to traffic offenses:

DUI-Related DWLS: Removes the mandatory minimum for first time DUI-related DWLS [Driving With License Suspend] offenders and reduces the mandatory minimum for second time DUI-related DWLS offenders to 10 days.

Non-DUI Related DWLS: Reduces the penalty for non-DUI-related DWLS offenses from a misdemeanor to an infraction.

First-time DUI: Requires first-time DUI offenders to serve a mandatory term of electronic monitoring. If this is unavailable, imprisonment is determined by the Department of Corrections.

Suspended Entry of Judgment

Establishes a sentencing option that allows a court to suspend entering a judgment of guilt in some cases and allow the person to serve time on probation. If the person successfully completes probation, the court would then discharge the person and dismiss the case.

Administrative Parole

Creates an administrative parole option, which grants parole without a hearing, for first-time non-violent, non-sex misdemeanor and Class B or C felony offenders who have completed the requirements of their case plan, followed institutional rules, and in cases where a victim has not requested a parole hearing.

Discretionary Parole

Senate Bill 91 makes the following changes to discretionary parole:

Eligibility: Expands eligibility for discretionary parole to all offenders except unclassified sex offenders. For other sex offenders, eligibility for discretionary parole starts once they have served 50% of their sentence.

Process: Streamlines the hearing process for discretionary parole by requiring the parole board to hold hearings for all prisoners who are eligible, rather than wait for prisoners to determine eligibility and prepare an application prior to a hearing.

Geriatric Parole

Expands eligibility for discretionary parole to inmates who are over the age of 60, have served at least 10 years of their sentence, and have not been convicted of an unclassified or sexual felony.

Recommendation: Strengthen Probation and Parole Supervision

Research has identified a number of key strategies to increase success rates for those supervised in the community, including identifying and focusing resources on higher risk offenders; using swift, certain, and proportional sanctions; incorporating rewards and incentives; frontloading resources in the first weeks and months of supervision; and integrating treatment into supervision. SB91 requires Alaska to adopt these evidence-based community supervision strategies, including:

Administrative Sanctions and Incentives

Requires the Department of Corrections to establish an administrative sanction and incentive program to facilitate a prompt and effective response to compliance with or violations of conditions of probation or parole.

Cap Technical Violation Stays

Limits the maximum sentence for technical violations of probation or parole for offenders who are not in the PACE [Probation Accountability and Certain Enforcement] program to 3 days for the first revocation, 5 days for the second revocation, 10 days for

Please see **SB91**, page 4

Table 1. Felony Presumptive Sentencing Comparison

Class	First	Second	Third	Exceptions
A	3–6 years (was 5–8)	8–12 years (was 10–14)	13–20 years (was 15–20)	Use of dangerous weapon/offense directed at first responder: 5–9 years for first offense
B	0–2 years (was 1–3)	2–5 years (was 4–7)	4–10 years (was 6–10)	Criminally negligent homicide: of a child, 2–4 years for a first offense; of an adult, 1–3 years for a first offense
C	0–18 months (suspended) (was 0–2 years)	1–3 years (was 2–4)	2–5 years (was 3–5)	First-time DUI: 120–239 days; second-time DUI: 240–359 days; third and subsequent DUI: 360 days to two years

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the third revocation, and up to the remainder of the suspended sentence for the fourth or subsequent revocation. The maximum sentence for absconding is limited to 30 days. Arrests for new criminal conduct, failing to complete batterer's intervention or sex offender treatment, or failing to comply with special sex offender conditions of release are not considered technical violations. [The PACE program focuses on offenders with drug or alcohol offenses who are on probation and operates in Anchorage, Bethel, Fairbanks, Juneau, Kenai, and Palmer.]

Earned Compliance Credits

Requires the commissioner to establish a program that allows probationers and parolees to earn a credit of 30 days for each 30 day period served in which the person has complied with conditions of supervision.

Early Discharge

Requires probation or parole officers to recommend early discharge for any probationer/parolee who has served at least one year (Class C Felonies) or two years (Class A and B Felonies), completed any required treatment, and has not been found in violation of their conditions of probation for at least one year, with an exception for offenders convicted of an unclassified or sex felony offenses, or a crime involving domestic violence.

Maximum Probation Terms

Limits probation terms to 15 years for a sex offense; ten years for a non-sex unclassified felony; five years for other felony offenses; three years for a misdemeanor assault, domestic violence, or sex offense; two years for a second-time misdemeanor DUI; and one year for any other offense.

Good Time on Electronic Monitoring

Extends good time credit to individuals on electronic monitoring.

CRCs

Requires CRCs [Community Residential Centers—housing for offenders] to provide treatment, reduce mixing of low and high risk offenders, and adopt quality assurance measures, including standards for assessing risk levels.

Alcohol Safety Action Program [ASAP]

Restricts ASAP referrals to persons who have been referred by a court for a DUI-related offense, and requires the ASAP program to screen for criminogenic risk and monitor based on risk level.

Community Work Service

Prevents the court from converting community work service into a sentence of imprisonment. Increases the value of an hour of community work from three dollars to the state minimum wage.

Recommendation: Improve Reentry Programming

Almost everyone incarcerated in Alaska will eventually be released to the community. SB91 included reforms designed to improve the re-entry process—and, in doing so, improve public safety by reducing recidivism.

Reentry Planning

Requires the Department of Corrections to work with prisoners to prepare a reentry plan, beginning 90 days before the date of release. The department must partner with one or more community nonprofits to assist in the reentry process, and must identify resources available to the prisoner in the community. Finally, the department must assist prisoners with obtaining state identification prior to release.

Food Stamps

Lifts the restriction on eligibility for food stamps for persons convicted of drug felonies, provided the individual is compliant with conditions of probation and has completed treatment or is still working toward rehabilitation.

Driver's Licenses

Requires the DMV [Department of Motor Vehicles] to restore a person's driver's license if all charges have been dismissed or if the person has been acquitted of DUI. Authorizes the court to grant limited license privileges for felony DUI offenders if the person has completed a court-ordered treatment program, has proof of insurance and has installed an ignition interlock device.

Recommendation: Ensure Oversight and Accountability

The reforms to Alaska's correctional and criminal justice systems will require careful implementation and oversight. To ensure that reforms are monitored for fidelity and efficacy, SB91 requires:

Oversight Commission

Extends the life of the Alaska Criminal Justice Commission and requires the Commission to review and analyze the implementation of the legislation and annually make recommendations on how savings from reforms should be reinvested to reduce recidivism.

Reporting of performance measures

Requires state agencies to collect and report data on key performance measures, and requires the Commission to use that data to monitor the reforms and, if necessary, recommend additional reforms in the future.

Recommendation: Reinvest in Practices Proven to Reduce Recidivism and Protect Public Safety

Using a portion of the savings and 50 percent of the state's new revenue from marijuana tax receipts, Alaska will reinvest an estimated \$98 million over the next six years into treatment in prison and in the community, reentry support services for inmates returning to the community from prison, pretrial services and supervision, violence prevention programming, and crime victims' services. (This reinvestment component is found both in the bill itself and in the bill's fiscal note.)

The full text of SB91 is available on the Alaska State Legislature website (http://www.legis.state.ak.us/basis/get_bill.asp?session=29&bill=SB91).

This article was excerpted from "Senate Bill 91: Alaska's Justice Reinvestment Reforms" available at the Alaska Criminal Justice Commission website (<http://www.ajc.state.ak.us/acjc/resources.html>).

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Editor: Barbara Armstrong
 Editorial Board: Allan Barnes, Lindsey Blumenstein, Jason Brandeis, Sharon Chamard, Ron Everett, Ryan Fortson, Kristin Knudsen, Cory R. Lepage, Brad Myrstor, Khristy Parker, Troy Payne, Deborah Periman, Marny Rivera, André Rosay
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André Rosay, Director, Justice Center
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Justice Center
 College of Health
 University of Alaska Anchorage
 3211 Providence Drive
 Anchorage, AK 99508
 (907) 786-1810
 (907) 786-7777 fax
uaa_justice@uaa.alaska.edu
<http://www.uaa.alaska.edu/justice/>

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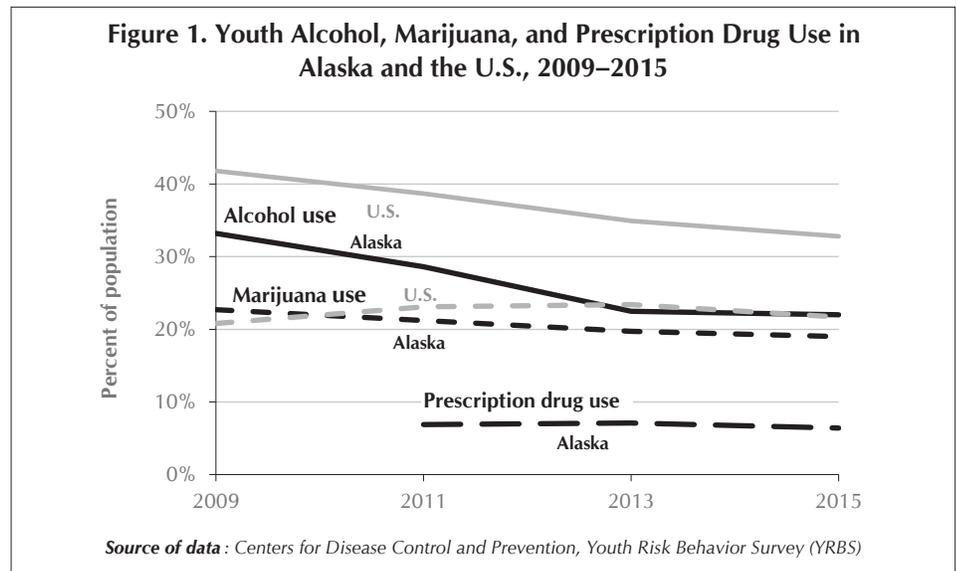
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Youth Marijuana and Prescription Drug Abuse in Anchorage

Marny Rivera and Cory R. Lepage

Although alcohol use by youth under 21 years of age remains a concern both in Alaska and nationwide, growing attention has focused on the problems of youth marijuana use and youth non-medical use of prescription drugs. (All references hereafter in this article to prescription drug use by youth refer to *non-medical use*. See “Definition of Non-Medical Prescription Drug Use,” below.) The problem of youth substance use involves both the illegal consumption of these substances and the harmful consequences resulting from their use. The legalization of marijuana in Alaska—as well as in Colorado, Washington, Oregon, and Washington, D.C.—has heightened the focus on youth marijuana use and concern about its potentially harmful effects. In addition, there has been a spike in prescription drug use and abuse across the nation according to a 2016 Centers for Disease Control (CDC) study. The reported all-time high number of drug overdose deaths in the U.S. in 2014 has spurred a closer look at prescription drug use by youth, particularly because prescription opioid pain relievers were involved in most of the overdose deaths. In order to better understand youth access to and use of marijuana and prescription drugs, including the role adults play, this article focuses on the results of a survey about what adults, both parents and non-parents, think about *underage marijuana use and prescription drug use*, and what their concerns are.

Because parents and non-parenting adults play such an important role in whether youth are involved in substance use and abuse, Healthy Voices Healthy Choices, a coalition of Volunteers of America Alaska with support from the Anchorage Collaborative Coalitions, asked the University of Alaska Anchorage Justice Center to conduct a survey to gather information about the knowledge, attitudes, and behaviors of adults in Anchorage regarding youth substance use



and abuse in our community. The survey, the *Adult Perceptions of Anchorage Youth: 2015 Survey (APAYS)*, was designed to replicate a 2010 survey, the *Adult Underage Drinking Survey (AUDS)*, but with an expanded focus that gathered adult perceptions regarding youth use of marijuana and prescription drugs, as well as other youth behavioral health problems. The survey findings show that adults in Anchorage report definite concern about youth marijuana and prescription drug use. The views of parents differed from the views of other adults regarding youth use of marijuana. Parents expressed greater concern than non-parenting adults about youth marijuana abuse and its consequences. Parents and non-parents had relatively similar views regarding youth use of prescription drugs. Parents and other adults expressed greater concern about youth prescription drug use and its consequences than about youth marijuana use. This recognition of the problem indicates a degree of community readiness to address the issue. According to substance use prevention research on community readiness, clear recognition of the problem is an important sign of a com-

munity’s readiness to be part of solutions designed to prevent and address the problem of youth substance abuse. Furthermore, prevention strategies are more likely to be effective in communities that are ready to adopt them.

Adults and parents should be an integral component of solutions for controlling youth substance use and abuse. There are a number of known risk and protective factors that can be addressed in efforts to help prevent youth substance use and abuse. The likelihood of youth substance use and abuse is influenced by characteristics of individuals, as well as characteristics of communities, schools, peers, and families. Adults, including parents, play an instrumental role in youth substance use with regard to influencing youth access to substances. Parents and caregivers play an especially important role in affecting the likelihood that youth will abuse substances based on the extent to which their parenting practices cultivate known risk and protective factors for youth substance use.

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Definition of Non-Medical Prescription Drug Use

The term, “prescription drug use” as it is used in this article is limited to the *non-medical use of prescription or psychotherapeutic drugs*. Non-medical use of prescription drugs—NMUPD—excludes legitimate uses of prescription drugs, and also excludes use of over-the-counter medications that do not require a prescription to purchase.

Non-medical use refers to prescription drug use without a doctor’s orders (e.g., a prescription), use of a drug by non-patients for the feeling of its effects such as getting high, and the use of the drug in unintended amounts or ways (e.g., exceeding the recommended

dosage). The categories and types of prescription drugs used in the *Adult Perceptions of Anchorage Youth: 2015 Survey (APAYS)* and in this article mirror the types of drugs referred to in large-scale national surveys such as the Monitoring the Future (MTF) Survey, the National Survey on Drug Use and Health (NSDUH), and the Youth Risk Behavior Survey (YRBS). The prescription drugs commonly referred to in those surveys include pain relievers (e.g., OxyContin, Percocet, Vicodin, and codeine), depressants (e.g., Xanax, Valium and other drugs that relieve anxiety or sleeplessness), and stimulants (e.g., Ritalin and Adderall).

Glossary

CDC—Centers for Disease Control and Prevention. The CDC conducts health research and disseminates information on public health issues, and is responsible for a wide number of regular public health reports and publications. The role of the CDC includes “detecting and responding to new and emerging health threats” and “promoting health and safe behaviors, communities, and environment.” <http://www.cdc.gov/>

MTF—Monitoring the Future. The Monitoring the Future (MTF) Survey is an annual “ongoing study of the behaviors, attitudes, and values of American secondary school students, college students, and young adults.” The survey is funded by NIDA and conducted by the University of Michigan. <http://www.monitoringthefuture.org/>

NSDUH—National Survey on Drug Use and Health. This annual survey “provides national and state-level data on the use of tobacco, alcohol, illicit drugs (including non-medical use of prescription drugs) and mental health in the United States.” The survey is sent to a sample population of individu-

als aged 12 years and older. The survey is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services (DHHS) <https://nsduhweb.rti.org/respweb/homepage.cfm>

NIH NIDA—National Institutes of Health (NIH), National Institute on Drug Abuse (NIDA). NIDA is responsible for research on the “causes and consequences of drug use and addiction.” The agency works with research partners to develop drug prevention strategies and treatment options for persons with substance use disorders. NIDA releases regular research reports. <https://www.nih.gov/about-nih/what-we-do/nih-almanac/national-institute-drug-abuse-nida>

YRBS (also called YRBSS)—Youth Risk Behavior Surveillance System. YRBS includes a nationwide high school-based survey conducted by the CDC biennially that collects data on six types of health-risk behaviors that contribute to youth mortality and injury. <http://www.cdc.gov/healthyyouth/data/yrbs/overview.htm>

Youth drug use

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Youth Substance Use

Prevalence rates of youth substance use in Alaska indicate that youth use of alcohol has declined, use of marijuana has declined slightly, and prescription drug use has remained relatively stable. The percentage of youth using alcohol and marijuana is lower in Alaska than in the U.S. as a whole (see Figure 1, page 5). Nonetheless, the risk of harm to youth who do use these substances remains a concern.

Alcohol is the substance that is most frequently consumed by youth based on self-reported data. According to the 2015 Youth Risk Behavior Surveillance (YRBS) survey, 22 percent of youth in Alaska reported using alcohol in the past 30 days. Nineteen percent of Alaska youth reported using marijuana in the past 30 days. Considering the different factors that impact youth access, such as legality of the substance, it is interesting that there is only a three percentage point difference between prevalence rates of past month youth alcohol use and past month marijuana use.

Youth alcohol use in Alaska has decreased by 33 percent since 2009. The percentage of youth who report current alcohol use has decreased over the same time period for the nation as a whole, though the decrease has been less dramatic (down 17 percent between 2009 and 2015). Other youth alcohol consumption indicators (binge drinking and first use of alcohol before turning 13) have also improved over the same time period in both Alaska and nationwide. Reported rates of past month marijuana use among youth stayed relatively stable and

have decreased only slightly in Alaska during 2009 to 2015—going from 23 percent to 19 percent. Rates of marijuana use by youth nationwide have increased slightly from 21 percent in 2009 to 23 percent in 2015.

Data from the Alaska Youth Risk Behavior Surveillance (YRBS) survey for 2011, 2013, and 2015, show far fewer youth reported using prescription drugs than reported using alcohol or marijuana. Less than seven percent of youth in Alaska reported current (past month) use of prescription drugs in each of the last three YRBS surveys. (National YRBS past month current prescription drug use data are not available.) The 2014 National Survey on Drug Use and Health (NSDUH) reported a past month prescription drug use rate of 2.2 percent for 12 to 17 year-old youth. While the YRBS figures for Alaska show more youth reported using prescription drugs monthly than the NSDUH figures, it is important to keep in mind that these surveys collect data from different samples of youth. YRBS is a survey of *high school students* ages 14 to 18 years old and NSDUH is a *household* survey that includes 12 to 17-year-old youth. According to these surveys, youth prescription drug use is the most frequently used drug category after alcohol and marijuana. More youth reported current prescription drug use than reported using cocaine, heroin, or methamphetamine. In fact, according to 2014 NSDUH data, one-third of all new prescription drug users in the past year were youth between the ages of 12 and 17.

National Data on Youth Access to Substances

While youth access to alcohol, marijuana, and prescription drugs varies based on sev-

eral factors, most often it is adults, including parents, who provide youth with access to these substances—either intentionally or unintentionally. According to the national 2014 Monitoring the Future (MTF) Survey, 81 percent of high school seniors said it was fairly easy or very easy for them to get marijuana if they wanted it. The substances for which a greater percentage of high school seniors report they can access fairly or very easily (alcohol, marijuana, and prescription drugs) are the substances with the highest youth and adult use prevalence rates. (The changing landscape of marijuana legalization, regulation, and sale will make marijuana accessibility more like alcohol and may impact prevalence rates)

Data from several national surveys present information on how youth are accessing substances. One of these, the Monitoring the Future (MTF) Survey, noted earlier, is an ongoing survey of youth’s lifestyles and values conducted by the University of Michigan and funded by the National Institute on Drug Abuse (NIDA). The MTF reports annually on the behaviors and attitudes of adolescents in the U.S. According to a 2014 report by the National Institutes of Health, MTF data show that youth are most likely to access prescription drugs through: (1) friends or relatives who give them the drugs (59%); (2) through friends or relatives who sell them their prescription drugs (38%); and (3) through prescriptions from a doctor for legitimate purposes but the drugs are then used in an unintended manner (33%). (Drug sources are not mutually exclusive and do not sum to 100%.)

Parents may be less likely to provide prescription drugs to youth for the purpose of getting high in the way that they may provide

their children and their children’s friends with alcohol. However, while some parents may attempt to control their children’s access to alcohol at home because they are familiar with youth sneaking alcohol from home, these parents may be less likely to control access to the medicine cabinet. Similarly, other relatives, including grandparents, may have prescription drugs in their homes that youth can access.

The Role of Adults and Parents in Youth Substance Use

Researcher Jill Ryan and her colleagues have noted that throughout the research literature, parental knowledge and monitoring of children’s activities have been found to be protective factors consistently associated with a reduced likelihood of youth substance use of alcohol or marijuana. Studies by scholars Candice Donaldson and J.E. Nargiso and others have examined the use of prescription drugs by youth and also found parental monitoring to be a protective factor associated with lower rates of youth prescription drug use. The association between parental monitoring and youth substance use likely involves a combination of multiple protective parenting practices including effective parent-child communication, knowledge of the child’s friends and activities, parental disapproval of substance use, and parental warmth.

About the Survey

The *Adult Perceptions of Anchorage Youth: 2015 Survey (APAYS)* was mailed to a random sample of 2,237 Municipality of Anchorage adult residents. The sample contained 369 undeliverable addresses which were removed, resulting in a sample of 1,868 residents. A two-dollar bill was included

with each survey as an incentive to complete and return the survey. Respondents also had the option of completing the survey online. From the random sample, 648 residents returned a completed survey—either by mail or online—resulting in a 34.7 percent response rate.

The survey included questions about underage substance use (alcohol, marijuana, prescription drugs); adult influences on underage substance use; substance use by the respondent; knowledge of behavioral health issues, including bullying and suicide; and level of personal engagement with Anchorage youth.

Survey data were weighted to align with Anchorage population totals. Weighting procedures adjusted results based on the likelihood of being selected into the sample and to correspond to demographic characteristics of adults in Anchorage based on 2014 U.S. Census Bureau estimates. Results presented in this article are based on weighted survey data representing the views of 220,203 adults in Anchorage, whose parenting status was available, including 68,526 parents (31.1%) and 151,677 non-parenting adults (68.9%).

All of the associations between parenting status (currently parenting a youth or young adult aged 12–24 or not) and views regarding youth substance abuse were statistically significant; this may be due to the large size of the population represented in the weighted data. Though significant, the majority of associations between parenting status and views regarding youth use of prescription drug use were weak. The effect sizes for the majority of associations between parenting status and views of youth marijuana use ranged from moderate to moderately strong. Parents and non-parenting adults had differing views regarding youth use of marijuana.

However, parents and non-parenting adults had relatively similar views on youth use of prescription drugs.

Concern about Marijuana and Prescription Drug Use

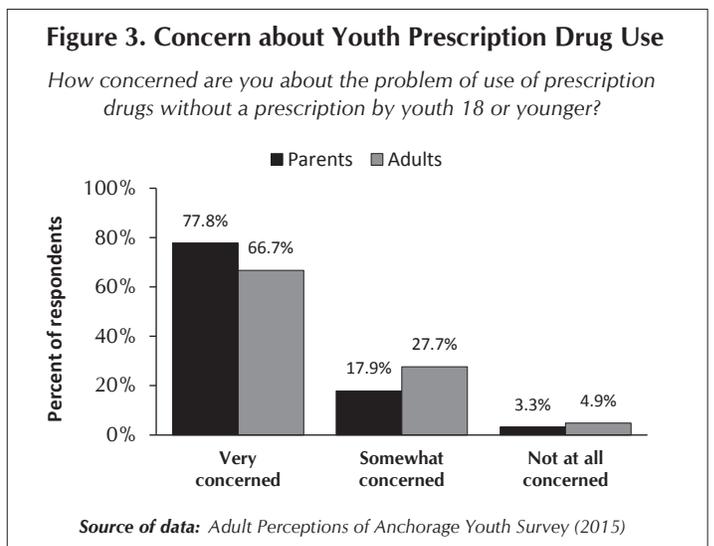
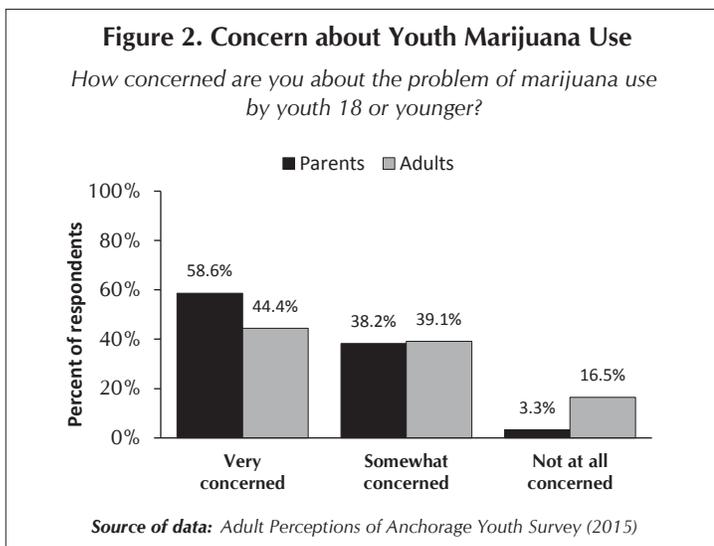
Adults in Anchorage were asked how concerned they were about the problems of youth marijuana and prescription drug use. Both parents and other adults in Anchorage are greatly concerned about youth marijuana use. Significantly more parents (59%) than other adults (44%) are very concerned about the problem of youth marijuana use (see Figure 2). More non-parenting adults (17%) than parents (3%) are not at all concerned about youth marijuana use.

Parents and other adults in Anchorage are concerned about youth prescription drug use. More parents (78%) than other adults (67%) are very concerned about the problem of youth (under 18) using prescription drugs (see Figure 3). Only three percent of parents and five percent of other adults are not at all concerned about the problem of youth use of prescription drugs.

Relative Safety of Various Substances

Parents and other adults were asked about the relative safety of various substances used by youth. Figure 4 (page 8) shows the perceptions of parents and other adults regarding the safety of youth alcohol use relative to youth marijuana use. When parents and other adults were asked their level of agreement regarding whether youth marijuana use was safer than youth alcohol use, only one-third of parents (33%) and just over half of other adults (51%) agreed that youth marijuana use was safer than youth alcohol use.

Please see *Youth drug use*, page 8



Youth drug use (continued from page 7)

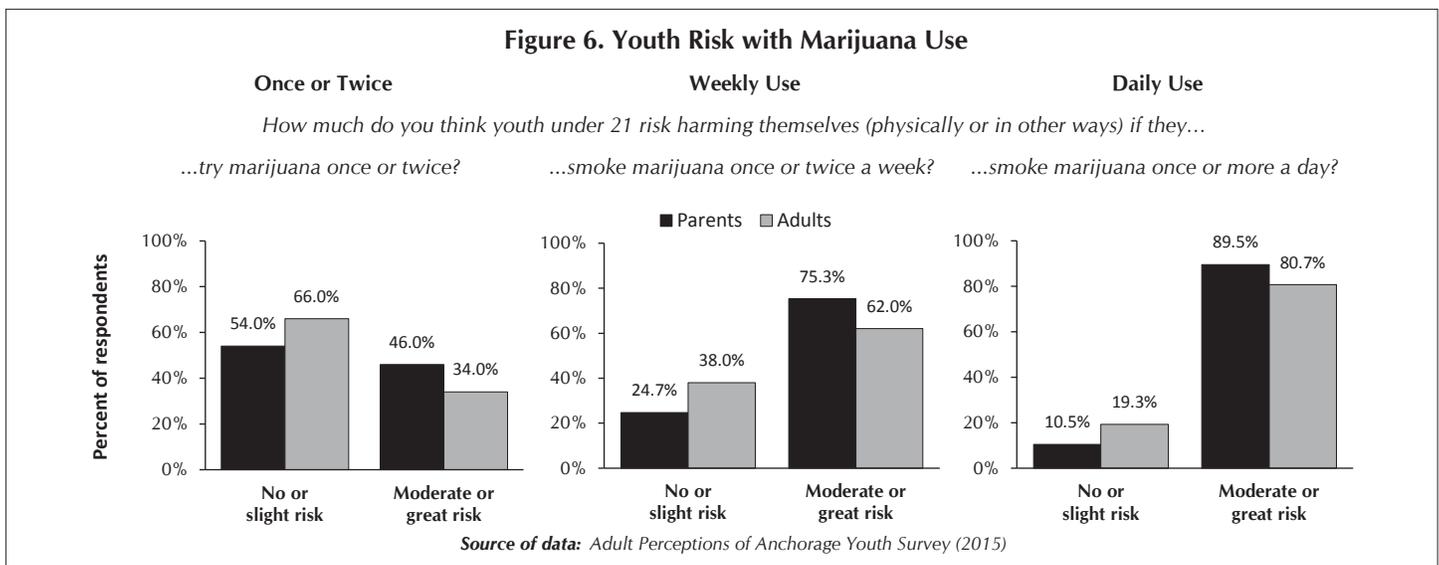
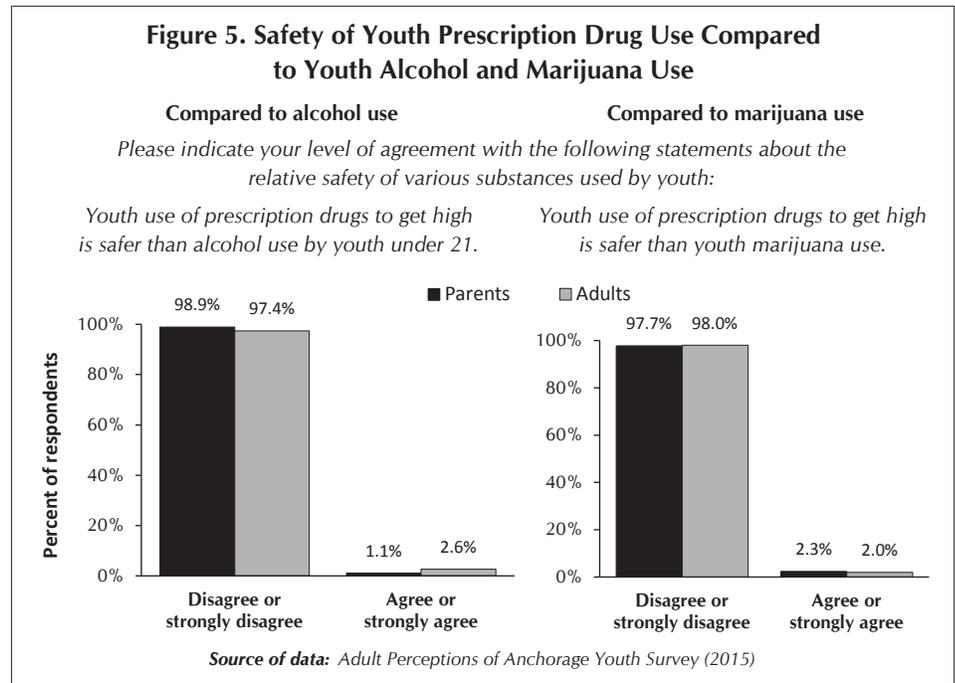
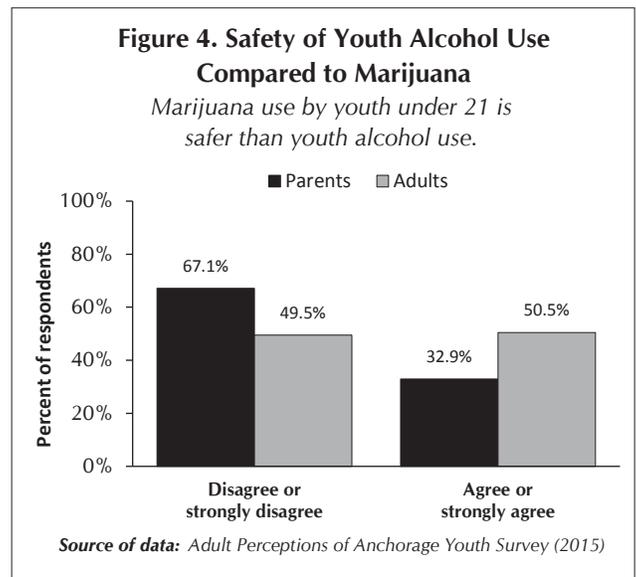
Parents and other adults were asked their level of agreement regarding whether youth use of *prescription drugs* to get high was safer than alcohol use (see Figure 5). Both parents (99%) and other adults (97%) overwhelmingly disagreed that youth prescription drug use was safer than youth alcohol use. When asked about their level of agreement regarding whether youth use of prescription drug use to get high was safer than marijuana use, again both parents and other adults (98% each) overwhelmingly disagreed that prescription drug use was safer.

Risk of Harm from Marijuana and Prescription Drugs

Parents and other adults were asked to indicate how much youth under 21 risk harming themselves, physically or in other ways, if they tried various substances or used them regularly. Parents and other adults in Anchorage agreed that youth are at moderate to great risk of harm from substance use (see Figure 6). More parents than other adults agreed that youth were at moderate to great risk of harm from marijuana use of any frequency (once or twice, weekly, and daily use). Nearly half (46%) of parents agreed that youth are at moderate or great risk of harm from trying marijuana once or twice, while one-third (34%) of other adults agreed that there is moderate or great risk of harm. A little over half (54%) of parents agreed that trying marijuana once or twice posed no or slight risk to youth compared to two-thirds of other adults (66%) who agreed that there is no or slight risk.

Both parents and other adults agreed that there is increased risk of harm for youth

who use marijuana on a weekly basis. Three out of four parents (75%) agreed that weekly use of marijuana use by youth posed a moderate or great risk of harm to youth while six out of ten other adults (62%) agreed that there is moderate or great risk of harm with weekly marijuana use. Only one quarter (25%) of parents and over one-third (38%) of other adults agreed that weekly marijuana use posed no or slight risk of harm to youth. Anchorage residents, especially parents, reported agreement that there is moderate or great



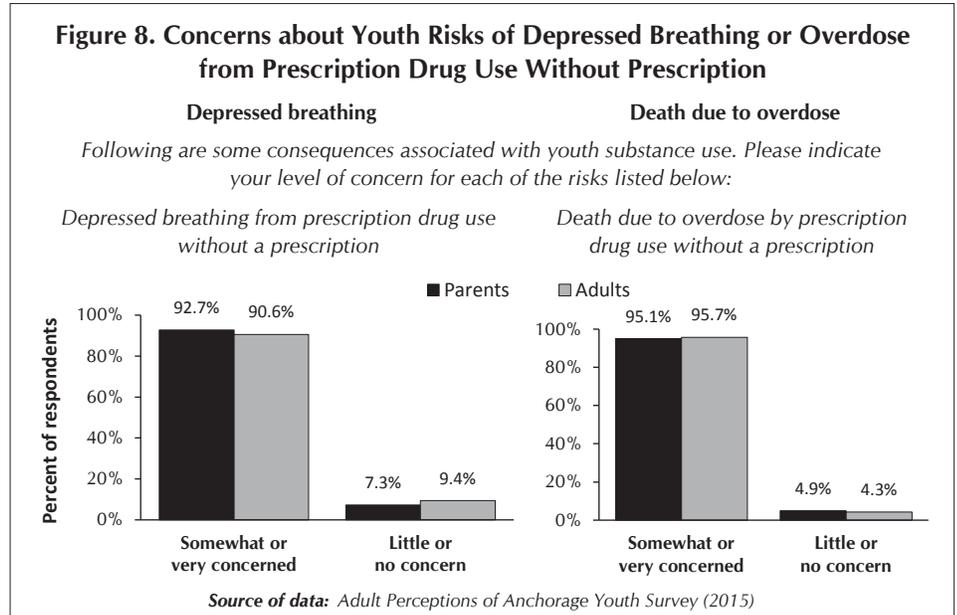
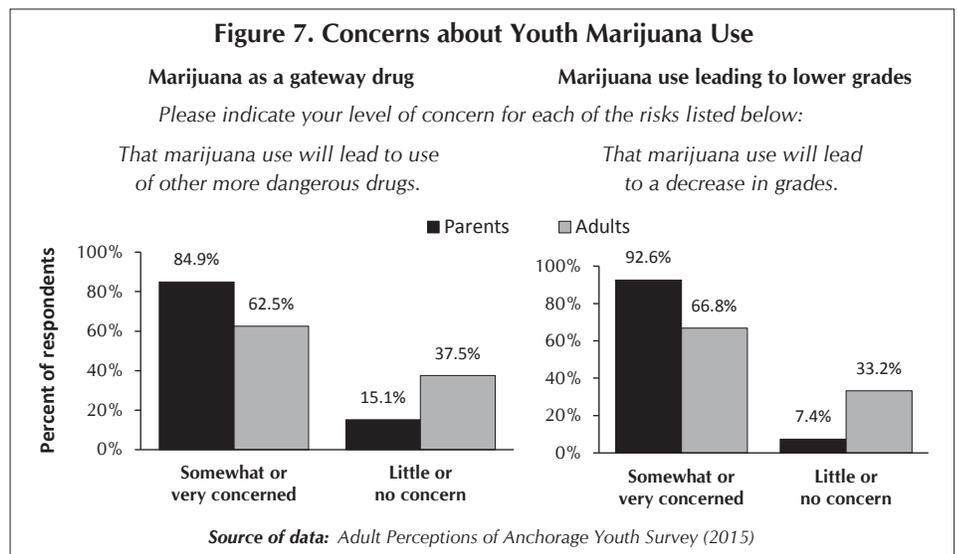
risk of harm for youth who use marijuana once or more a day. Nine out of 10 parents (90%) and 8 out of 10 of other adults (81%) agreed that marijuana use once or more a day by youth posed moderate or great risk of harm. Eleven percent of parents and 19 percent of other adults perceived marijuana use once or more a day as posing no or slight risk of harm.

Both parents and other adults agreed that youth were at risk of harming themselves, physically or in other ways, if they tried prescription drugs (painkillers, sedatives, stimulants, etc.) that were not prescribed to them. The perception by both parents and other adults of the risk of youth harming themselves by using prescription drugs changed as the frequency of youth prescription drug use increased. Eighty-seven percent of parents and 81 percent of other adults perceived that youth face moderate or great risk of harm from trying prescription drugs once or twice. When the frequency increased to monthly youth prescription drug use, 9 out of 10 parents (91%) and other adults (90%), perceived moderate or great risk of youth harming themselves (results not shown).

Consequences of Marijuana and Prescription Drug Use

The survey asked about consequences associated with youth substance use. Parents and other adults provided their perceptions on two consequences associated with youth marijuana use: marijuana as a gateway drug leading to use of other more dangerous drugs, and marijuana use resulting in lower grades in school (see Figure 7). More parents (85%) than other adults reported being somewhat or very concerned (63%) that marijuana use would lead to youth using other more dangerous drugs. Fewer parents (15%) than other adults (38%) reported having little or no concern about youth marijuana use leading to other more dangerous drug use. More than 9 out of 10 parents (93%) compared to more than 6 out of 10 other adults (67%) reported being somewhat or very concerned that youth marijuana use could result in lower grades. Considerably fewer parents (7%) reported little or no concern that youth marijuana use would lead to lower grades than did other adults (33%).

Parents and other adults expressed great concern regarding the consequences associated with youth prescription drug use (see Figure 8). Ninety-three percent of parents and 91 percent of other adults reported that they were somewhat or very concerned about depressed breathing from youth prescription drug use while only seven percent



of parents and nine percent of other adults reported little or no concern. Ninety-five percent of parents and 96 percent of other adults reported that they were somewhat or very concerned about youth prescription drug use leading to overdose death while only five percent of parents and four percent of other adults reported little or no concern about overdose death.

Youth Access to Prescription Drugs

Parents and other adults were asked about their personal knowledge of youth access to prescription drugs. Specifically, adults in Anchorage were asked whether youth under 21 that they know would be able to access the adult's personal prescription drugs without the parent or other adult knowing about it. More parents (30%) than other adults (12%) reported that youth would be able to access the parent or other adult's prescription drugs without their knowledge.

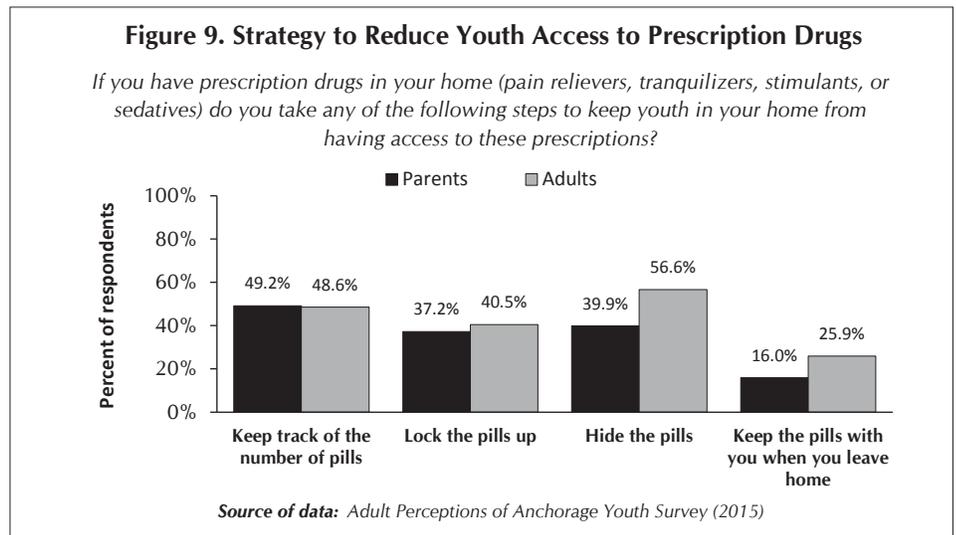
However, the majority of both parents and other adults (70% and 88% respectively) reported that youth under 21 would not be able to access their personal prescription drugs without the parent or other adult knowing about it (results not shown).

Parents and other adults were asked whether they had prescription drugs such pain relievers, tranquilizers, stimulants, or sedatives in the home. Nearly three quarters of parents (73%) and other adults (72%) reported that they had prescription drugs in their home (results not shown). Parents and other adults were asked generally whether it is necessary for parents or guardians to take steps to keep children and youth from having access to prescription drugs in the home. The majority of both parents and other adults (84% and 89% respectively) agreed that it is necessary for parents and guardians to take some type of precautions to control youth

Please see *Youth drug use*, page 10

Youth drug use (continued from page 9)

access to prescription drugs in the home. Those parents and other adults who had prescription drugs in their home were also asked whether they took specific steps to keep youth in their home from having access to those prescription drugs (see Figure 9). About half of both parents and other adults reported keeping track of the number of pills. Over one-third reported locking up the prescription pills (37% of parents and 41% of other adults) to keep youth in the home from having access to the prescription drugs. More non-parenting adults than parents reported taking the following steps to keep youth in the home from having access to their prescription drugs: hiding the pills (57% of other adults and 40% of parents) or keeping the pills with them when leave home (26% of other adults and 16% of parents). In other words, although more parents than other adults acknowledged that youth in their home could access their prescription drugs without their knowledge, fewer parents than other adults took steps to



reduce youth access to prescription drugs by hiding them or taking them with them when they left home.

Conclusion

The goal of the *Adult Perceptions of Anchorage Youth: 2015 Survey (APAYS)*

was to measure parents' and other adults' knowledge, attitudes, and behaviors regarding the problem of youth substance abuse. Survey results clearly show that adults in Anchorage are concerned about the problems of youth prescription drug abuse and youth marijuana abuse. Parents expressed greater concern than non-parenting adults

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about youth marijuana abuse and its consequences. Parents and other adults expressed greater concern about youth prescription drug abuse and its consequences than about youth marijuana abuse.

CDC data show that from 2009 to 2015 in Alaska, youth alcohol use has declined substantially, youth marijuana use has declined slightly, and prescription drug use has remained stable. Nonetheless, very real risks of harm remain for those youth who abuse these substances. The concern of parents and other adults in Anchorage suggests that they may be particularly ready to be part of solutions designed to prevent youth substance abuse and its harmful consequences. The community readiness—of parents and other adults—is important because if they do not perceive youth

substance use and abuse as a problem, they are unlikely to promote or become involved in community programs or services designed to prevent or combat the problem. Substance use prevention programs and services should be multifaceted and include youth, adults, schools, and families. Adults in Anchorage could benefit from information on how to reduce youth access to substances including alcohol, marijuana, and prescription drugs. Parents and other adults who interact with youth could also benefit from resources to use when they sense that there is a problem. Parents especially could be helped by having information on effective techniques for monitoring youth and young adults, including communicating with youth about where they are when they are away from home, who they are with, and what they are

doing. Families with youth could gain from information on how to keep conversations going when youth begin to spend more time outside the home and with friends than at home with parents. It is especially important to provide parents with specific guidance on how to talk with youth about the “tough stuff,” including substance use and abuse and other risk behaviors such as dating violence, sexual behavior, driving while texting, or driving after drinking. Parents and other adults are highly influential in the decisions youth make and must be part of solutions to problems experienced by youth in Anchorage and the rest of Alaska.

Marny Rivera is an associate professor in the Justice Center. Cory R. Lepage is an assistant professor in the Justice Center.

UA students

(continued from page 1)

reported to police—only about one-third (33.6%) of these types of victimizations were reported. As seen in Table 1, the percentage of sexual assault/rape victimizations reported to law enforcement is much lower than for other violent crimes, as well as for most other property crimes with the exception of theft.

Reporting to police or other authorities occurs even less frequently when sexual violence victims are college/university students. A recent national study of sexual violence committed against U.S. college/university students led by Bonnie Fisher of the University of Cincinnati School of Criminal Justice found that only 2 percent of sexual violence victims reported their victimization to campus or other police, and just 4 percent reported their victimization to any college/university officials at all (including campus police).

While it is imperative for researchers, university officials, criminal justice professionals, and victim service providers to always respect a victim’s choice to not disclose their victimization to others, it is also important to recognize that nondisclosure may produce unintended negative consequences. Nondisclosure to police rules out the possibility that the person responsible for the sexual violence victimization—the offender—will be arrested or prosecuted. Nondisclosure of sexual violence victimization may prevent victims from learning about or receiving beneficial services and social supports. Nondisclosure means that victims cannot apply for or receive crime victim compensation funds to which they may be entitled. The choice to not disclose to

college/university officials also means that victims may not be able to access on-campus victim advocacy, medical, counseling, and other support services; receive referrals to additional off-campus resources; or seek administrative remedies or other forms of redress provided for in college/university policy. Finally, in the aggregate, high rates of nondisclosure may have the unintended effect of encouraging an overreliance on official sources of data (e.g., Clery Act and/or Uniform Crime Reporting (UCR) Program, see page 12) to (1) estimate the prevalence of sexual violence among students, and (2) to gauge the level of resources needed to develop robust prevention, intervention, and restoration programming.

UA Students’ Sexual Misconduct and Sexual Assault Victimization Disclosures

Within the framework of the *University of Alaska Campus Climate Survey*, UA students who indicated one or more sexual misconduct and/or sexual assault victimizations, either on or off campus, between January 2015 and spring semester 2016 were asked additional follow-up questions. Among the follow-up questions presented to UA student respondents was one asking if they *disclosed* their victimization experiences to anyone, and *to whom* they did (if they reported disclosure). Specifically, students were asked if they disclosed their sexual misconduct and/or sexual assault victimizations to: a roommate, a close friend (other than roommate), a romantic partner, a parent or guardian, a family member (other than parent or guardian), a counselor, a campus sexual assault advocate, a university faculty or staff member, residential hall staff, police (university/college or other), or some other individual or

Table 1. Percent of Victimization Reported to Police, by Type of Offense, 2014

Type of offense	Percent of victimizations reported to police
Violent crime	46.0 %
Sexual assault/rape	33.6
Robbery	60.9
Assault	44.6
Simple assault	40.0
Aggravated assault	58.4
Domestic violence	56.1
Intimate partner violence	57.9
Property crime	37.0 %
Burglary	60.0
Motor vehicle theft	83.3
Theft	29.0

Source: Reproduced from: J.L. Truman & L. Langton, (2015). "Criminal Victimization, 2014" (NCJ 248973), U.S. Department of Justice, Bureau of Justice Statistics, <http://www.bjs.gov/content/pub/pdf/cv14.pdf>

organization. This was a multiple-response question, so survey participants could select any that applied. Results to these questions are presented in Table 2 (page 12).

In Table 2 are shown the specific percentages of UA students who experienced *sexual misconduct*, either on- or off-campus, and who disclosed to a friend (not roommate), a romantic partner, a roommate, a parent/guardian, some other family member, a counselor, university faculty/staff, residence hall staff, a coworker, police, a campus sexual assault advocate, or other persons/organizations. Students were most likely to

Please see UA students, page 12

UA students

(continued from page 11)

disclose sexual misconduct victimization to either a friend (45.3%) or a romantic partner (25.2%). It was much less likely for students who experienced sexual misconduct victimization to disclose to other intimates such as parents/guardians (6.4%), other family members (6.5%), or roommates (6.4%). With the exception of university faculty/staff (6.7%), students who experienced sexual misconduct were even less likely to disclose victimization through more formal help-seeking channels such as campus sexual assault advocates (0.5%), residence hall staff (0.5%), counselors (2.9%), or police (3.1%). An estimated 3.6 percent of UA students who experienced sexual misconduct victimization disclosed their experience to other persons/organizations. Finally, it was extremely rare that UA students who experienced sexual misconduct victimizations disclosed their experience to coworkers (0.2%).

Students who experienced *sexual misconduct* in the preceding year were more likely to disclose than students who experienced one or more *sexual assault* victimizations. Slightly more than two thirds (68.3%) of UA students who experienced one or more *sexual misconduct* victimizations (alone, or in combination with one or more sexual assaults) disclosed their experience to someone. In contrast, less than half (48.0%) of UA students who experienced one or more *sexual assault* victimizations (alone, or in combination with one or more incidents

Table 2. Percentage of Sexual Misconduct and Sexual Assault Victims that Disclosed to Others, by Individual/Organization Type

Individual/organization	% sexual misconduct victims that disclosed to:	% sexual assault victims that disclosed to:
Friend (not roommate)	45.3 %	28.0 %
Romantic partner	25.2	14.1
Roommate	6.4	11.2
Parent/guardian	6.4	9.5
Other family member	6.5	4.4
Counselor	2.9	3.3
Faculty/staff	6.7	0.4
Residence hall staff	0.5	1.1
Coworker	0.2	<0.1
Police	3.1	<0.1
Campus SA advocate	0.5	0.4
Other person/organization	3.6	<0.1
ANY disclosure	68.3 %	48.0 %

Note: Percentages do not total to 100.0% because survey participants could select multiple individuals/ organizations to whom they disclosed sexual misconduct and/or sexual assault experiences.

Source of data: Blumenstein & Myrskog, *University of Alaska Campus Climate Survey* (2016).

Clery Act

The Crime Awareness and Campus Security Act of 1990 was passed in large part due to the efforts of Connie and Howard Clery and applies to all colleges and universities that receive federal funding. The act was renamed the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act in 1998 in memory of their daughter, and is usually referred to as the Clery Act. Jeanne Clery was a 19-year old freshman student who was raped and murdered in her Lehigh University dorm room in 1986 by another Lehigh student.

The Clerys believed that better campus security policies and procedures and reporting of campus crime could have helped prevent the death of their daughter. They lobbied in Washington D.C. for mandatory provisions for colleges and universities nationwide to implement campus security measures, campus alert procedures, and to collect and report data on campus crime. The Clery Act took effect in 1991.

The Clery Act was later amended in 1992, 1998, and 2000, and most recently by the Higher Education Opportunity Act (HEOA) in 2008. Colleges and universities are required to have in place campus security policies and procedures, including crime reporting procedures, an emergency alert system, and processes for collecting and reporting of crime statistics by the institution annually to the U.S. Department of Education. These reports must be made

available to the public.

As outlined in the U.S. Department of Education *Handbook for Campus Safety and Security Reporting*, statistics for specific types of crimes occurring in specific locations must be collected and reported. The crimes falling under the Clery Act requirements for reporting by the institution include three general categories: (1) criminal offenses – based on UCR definitions (see “Uniform Crime Reporting (UCR) Program,” below), (2) hate crimes, and (3) arrests and referrals for disciplinary action—weapons, drug and liquor law violations.

Crimes occurring at the following locations fall under the Clery Act requirements for reporting by the institution: “(1) on campus, (2) on public property within or immediately adjacent to the campus, and (3) in or on noncampus buildings or property that [the] institution owns or controls.”

For more detailed information on Clery Act requirements see the following:

The Handbook for Campus Safety and Security Reporting (2011), U.S. Department of Education (<http://www2.ed.gov/admins/lead/safety/campus.html#handbook>).

U.S. Department of Education, Campus Security website (<http://www2.ed.gov/admins/lead/safety/campus.html>).

Uniform Crime Reporting (UCR) Program

The Uniform Crime Reporting (UCR) Program collects monthly information from more than 18,000 city, university and college, county, state, tribal, and federal law enforcement agencies that voluntarily report data on crimes reported to them. Data is collected, disseminated, and archived by the FBI.

The UCR records data for eight serious crimes (called Part I offenses) and more than twenty less serious offenses (called Part II offenses). Part I offenses include four violent crimes—murder

and nonnegligent manslaughter (homicide), forcible rape, robbery, and aggravated assault—and four property crimes—burglary, larceny-theft, motor vehicle theft, and arson. In 2012, UCR data was reported by law enforcement agencies representing 98.1 percent of the total U.S. population.

Excerpted from *Alaska Justice Statistical Analysis Center (AJSAC) Fact Sheets*.

of sexual misconduct) disclosed their experiences to anyone.

Like victims of sexual misconduct, UA students who experienced *sexual assault* victimization, either on or off campus, were most likely to disclose their experiences to either a friend (28.0%) or a romantic partner (14.1%). However, UA students who experienced sexual assault victimization were slightly more likely than victims of sexual misconduct to disclose to a roommate (11.2%) or a parent/guardian (9.5%). An estimated 4.4 percent of sexual assault victims disclosed to family members other than parents/guardians. Disclosure of sexual assault victimization to other individuals and organizations was exceedingly infrequent. An estimated 3.3 percent of UA students who were sexually assaulted disclosed to a counselor; an estimated 1.1 percent disclosed to residence hall staff; and only 0.4 percent disclosed to a campus sexual assault advocate. None of the students who participated in the survey, and who were sexually assaulted, reported any disclosures to police, coworkers, or other individuals/organizations. While we know that incidents of sexual assault are disclosed to police, coworkers, and other individuals/organizations, such disclosures occur so rarely that none of the UA students who participated in the survey reported any.

Demographic Factors Related to Disclosure

Research shows that sexual violence victim demographics influence the likelihood of sexual violence disclosure. In this article, we examine the impact three demographic characteristics have on UA students' disclosures of sexual violence victimization: student age, student race/ethnicity, and student sex/gender.

Age

Student age was measured using a single self-report item in the *University of Alaska Campus Climate Survey*. Respondents were asked, "What is your age?" (Note: The survey was limited to UA students age 18 years of age and older.) Table 3 presents the age distribution for the analysis sample. Less than half (44.8%) of survey participants were between the ages of 18 and 24; slightly less than one-third (31.5%) were between the ages of 25 and 34 years of age. The remainder of the sample—nearly 1 out of every 4 survey respondents—was at least 35 years old. The average age of UA students who participated in the *University of Alaska Campus Climate Survey* was 29.4 years old.

Our analysis revealed that UA student age was related to the likelihood of sexual

violence disclosure in a very specific way. Members of a single age group—UA students between the ages of 35 and 44—were least likely to disclose sexual violence victimization to others (see Figure 1). Fewer than 1 out of every 5 (18.4%) sexual violence victims in this age group disclosed to any individual or organization. UA students between the ages of 55 and 64 had the second lowest sexual violence disclosure rate (37.7%), followed by 18–24 year olds (65.8%), 45–54 year olds (71.7%), and finally 25–34 year olds (76.9%). Among all of the differences in disclosure rates that were observed, only three were statistically significant. UA students between the ages of 35 and 44 were significantly less likely to disclose sexual violence victimization than students between the ages of 18 and 24, students between the ages of 25 and 34, and students between the ages of 45 and 54.

Race/Ethnicity

The *University of Alaska Campus Climate Survey* measured respondent race/ethnicity with a set of multiple-response items that allowed respondents to record all of their racial/ethnic group memberships. Approximately 87 percent of survey participants reported one and only one racial/ethnic group membership. An additional

Table 3. Student Age Distribution of Respondents: University of Alaska Campus Climate Survey

Age category	Survey sample	
	Number	Percentage
18 to 24 years	888	44.8 %
25 to 34 years	624	31.5
35 to 44 years	220	11.1
45 to 54 years	136	6.9
55 to 64 years	73	3.7
65 years and older	28	1.4
Missing/unknown	13	0.6
Total	1,982	100.0 %
Average age	29.4	years

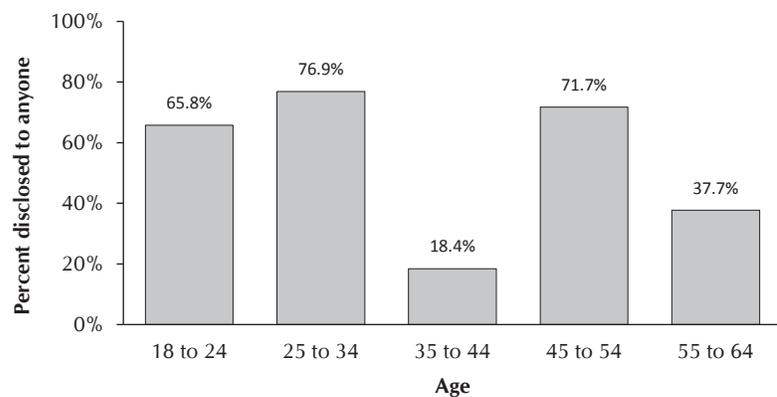
Source of data: Blumenstein & Myrskog, *University of Alaska Campus Climate Survey* (2016).

10.7 percent indicated membership in two or more racial/ethnic communities. Slightly more than 2 percent of respondents did not report a racial or ethnic identity (see Table 4, page 14).

In Table 4 is presented the racial/ethnic distribution of the *University of Alaska Campus Climate Survey* sample. Nearly 7 out of every 10 participants (69.2%) identi-

Please see UA students, page 14

Figure 1. Percent of University of Alaska Sexual Misconduct and/or Sexual Assault Student Victims who Disclosed Past-Year Victimization to Others, by Student Age^a



- a. Due to small sub-sample size, sexual misconduct and/or sexual assault disclosure rates could not be estimated for students ages 65 and over.
- b. Observed difference in rates of sexual misconduct and/or sexual assault victimization disclosure for students 35 to 44 years of age and students 55 to 64 years of age was not statistically significant ($F = 0.38$; $p = .540$). Observed difference in rates of sexual misconduct and/or sexual assault victimization disclosure for students 35 to 44 years of age and students 18 to 24 years of age was statistically significant ($F = 12.51$; $p = .000$). Observed difference in rates of sexual misconduct and/or sexual assault victimization disclosure for students 35 to 44 years of age and students 25 to 34 years of age was statistically significant ($F = 17.39$; $p = .000$). Observed difference in rates of sexual misconduct and/or sexual assault victimization disclosure for students 35 to 44 years of age and students 45 to 54 years of age was statistically significant ($F = 4.08$; $p = .045$).

Source of data: Blumenstein & Myrskog, *University of Alaska Campus Climate Survey* (2016).

UA students

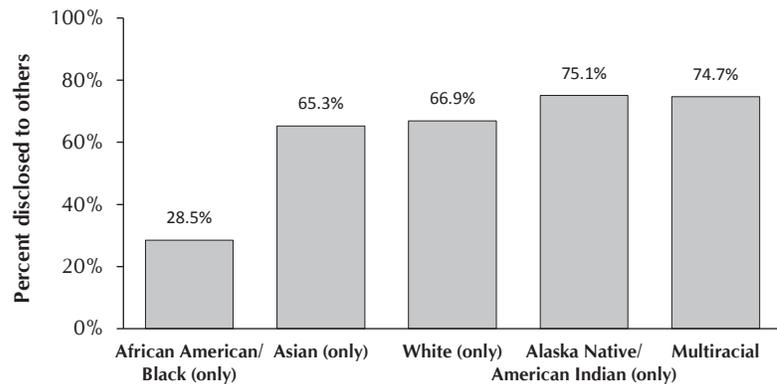
(continued from page 13)

fied as White (only). The second largest single-race/single-ethnicity group in the sample was Alaska Native/American Indian (only) (6.2%). Just under 5 percent of the sample identified as Asian (only); approximately 2 percent identified as either African American/Black (only) or Hispanic/Latino/a (only); and less than 1 percent identified as Native Hawaiian or Other Pacific Islander (only). Two percent of the sample identified as members of some other racial or ethnic group (only). In excess of 10 percent of the sample reported membership in two or more racial and/or ethnic groups. Finally, 2.4 percent of the sample did not report a racial or ethnic identity.

Results of our race/ethnicity analysis are presented in Figure 2. Due to small sub-sample sizes, data are not presented for Native Hawaiian or Other Pacific Islander, Hispanic/Latino/a students, or students who reported their racial/ethnic identities as Other.

As can be seen in Figure 2, the sexual violence victimization disclosure rate for one group—UA students who identified as African American/Black (only)—stood out from the other racial/ethnic groups. Just over a quarter of African American/Black students who experienced sexual violence disclosed their victimizations to others. In contrast, approximately two-thirds of Asian (only) and White (only) students who experienced sexual violence disclosed their victimizations to one or more parties. Even

Figure 2. Percent of University of Alaska Sexual Misconduct and/or Sexual Assault Student Victims Who Disclosed Past-Year Victimization to Others, by Student Race/Ethnicity^a



- a. Due to small sub-sample sizes, sexual misconduct and/or sexual assault disclosure rates could not be estimated for students whose self-reported racial/ethnic identities were: Native Hawaiian or other Pacific Islander, Hispanic/Latino/a, and Other race/ethnicity.
- b. Observed difference in rates of sexual misconduct and/or sexual assault victimization disclosure for African American/Black (only) and Asian (only) students was not statistically significant ($F = 2.43$; $p = .121$). Observed difference in rates of sexual misconduct and/or sexual assault victimization disclosure for African American/Black and White students was statistically significant ($F = 4.97$; $p = .027$). Observed difference in rates of sexual misconduct and/or sexual assault victimization disclosure for African American/Black and Alaska Native/American Indian students was statistically significant ($F = 4.36$; $p = .038$). Observed difference in rates of sexual misconduct and/or sexual assault victimization disclosure for African American/Black and multiracial students was statistically significant ($F = 5.60$; $p = .019$).

Source of data: Blumenstein & Myrstol, *University of Alaska Campus Climate Survey* (2016).

higher percentages—roughly three-quarters—of Alaska Native/American Indian (only) and multi-racial/multi-ethnic students who experienced sexual violence disclosed their victimizations to others. Three of the observed disclosure rate differences were statistically significant. African American/Black (only) students were significantly less likely to disclose sexual violence victimization than Alaska Native/American Indian (only) students, White (only) students, and multi-racial/ multi-ethnic students.

Sex/Gender

The *University of Alaska Campus Climate Survey* measured sex/gender with a single item. Respondents were asked, “What is your current gender identity?” Response categories included female, male, transgender female, transgender male, gender queer/gender non-conforming, and other (specify). Because the sampling protocol and weighting procedures used for the survey relied upon UA sex/gender definitions (which

are limited to two categories—female and male), the analysis that follows is restricted to only those respondents who self-identified as female or male. (Note: As shown in Table 5, 96.7 percent of sample members identified as female or male; 1.4 percent of sample members identified as transgender female, transgender male, gender queer/gender non-conforming, or some other gender identity; and 1.9 percent of sample members did not report a gender identity.)

The results of our sex/gender analysis are presented in Figure 3. Overall, female victims of sexual violence were much more likely than male victims of sexual violence to disclose their victimization. An estimated

Table 4. Self-Reported Racial/Ethnic Group Identity of Respondents: University of Alaska Campus Climate Survey

Race/ethnicity	Number	Percentage
One race/ethnicity		
Alaska Native/American Indian (only)	122	6.2 %
Asian (only)	96	4.8
African American/Black (only)	38	1.9
Native Hawaiian or Other Pacific Islander (only)	17	0.9
Hispanic/Latino/a (only)	37	1.9
White (only)	1,372	69.2
Other (only)	40	2.0
Two or more races/ethnicities		
Multi-racial/multi-ethnic	213	10.7 %
Missing/unknown	47	2.4
Total	1,982	100.0 %

Note: A comparison with the UA sampling frame is not presented because student race/ethnicity information was not included in the study’s sampling design, nor was it included in the UA sampling frame data.

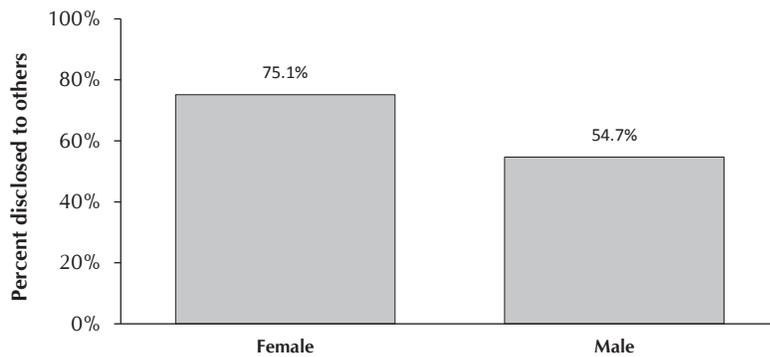
Source of data: Blumenstein & Myrstol, *University of Alaska Campus Climate Survey* (2016).

Table 5. Student Sex/Gender Distribution of Respondents: University of Alaska Campus Climate Survey

Sex/gender	Survey sample	
	Number	Percentage
Female	1,060	53.5 %
Male	857	43.2
All other	28	1.4
Missing/unknown	37	1.9
Total	1,982	100.0 %

Source of data: Blumenstein & Myrstol, *University of Alaska Campus Climate Survey* (2016).

Figure 3. Percent of University of Alaska Sexual Misconduct and/or Sexual Assault Student Victims Who Disclosed Past-Year Victimization to Others, by Student Sex/Gender



Note: Observed difference in rates of sexual misconduct and/or sexual assault victimization disclosure for female and male students was statistically significant ($F = 4.81$; $p = .029$).

Source of data: Blumenstein & Myrskog,
University of Alaska Campus Climate Survey (2016).

75.1 percent of female UA students who experienced one or more instances of sexual violence disclosed their victimization. In contrast, an estimated 54.7 percent of male UA students who experienced one or more instances of sexual violence disclosed their victimization. This observed difference was statistically significant.

Discussion

Using data from the *University of Alaska Campus Climate Survey*, this article sought to answer three basic questions: (1) How often did UA students who experienced sexual violence between January 2015 and spring semester 2016, either on or off campus, disclose their victimization to others? (2) For those UA students who did experience sexual violence victimization and who chose to disclose their victimization to others, with whom did they share their experiences? (3) Did the likelihood of sexual violence disclosure vary significantly according to UA students' demographic characteristics (age, race/ethnicity, sex/gender)?

Our analyses indicate that a majority (66.7%) of UA students who experience one or more sexual violence victimizations, either on or off campus, will disclose their victimization to *someone*. However, this finding comes with two important caveats. The first of these is that the likelihood of sexual violence victimization disclosure is heavily dependent on the *type of sexual violence victimization* that UA students experience. Students who experience *sexual misconduct* victimization are more likely to disclose to someone than students who experience *sexual assault* victimization. The second caveat is that regardless of the type of sexual violence victimization a UA student experiences, they are *highly*

unlikely to share what happened to them with university representatives or other authorities—particularly campus police, other law enforcement officials, or campus sexual assault advocates.

Both of these caveats are important for the development and advancement of university policies, procedures, and programs for addressing sexual violence victimization among students. With respect to the former, it is important for university representatives—administration, staff, faculty, and other employees—to understand that the most egregious and damaging forms of sexual violence are the least likely to be disclosed to anyone.

The low likelihood of a student disclosing victimization to a university representative or authority is particularly salient because it highlights the extent to which sexual violence committed against UA students (both on and off campus) is *underreported to authorities*. This gap between actual prevalence and estimated prevalence is commonly referred to as the “dark figure” of crime, and this gap exists irrespective of the source of data or particular measures used. However, the dark figure of crime tends to be more pronounced when estimates are derived from official data sources, and is especially pronounced when it comes to sexual violence. The low rates of sexual violence victimization disclosure presented in this article highlight the danger of relying on official data sources to establish the prevalence of sexual violence victimization among UA students, as well as to identify the specific programmatic needs of sexual violence victims. Put simply, reliance on official data sources will dramatically underestimate how often sexual misconduct and sexual assault is committed against UA students, and reliance on official

data sources will provide an incomplete and inaccurate understanding of the array of services and other administrative remedies student victims of sexual violence require.

In addition, from a programmatic development standpoint, it is critical to understand that when students disclose sexual victimization, they are overwhelmingly more likely to disclose to their peers (i.e., friends, roommates, and romantic partners) and *not* to campus authorities, counselors, or advocates. This finding is essential, in that it can inform the creation and development of sexual violence prevention and intervention education and services. More specifically, this finding indicates there is a critical need for peer-centered prevention and intervention techniques. Examples might include peer educators, hotlines run by peers, and even bystander intervention techniques that are specific to helping students understand how and what to do once a peer discloses a sexual victimization to them. If students are more comfortable disclosing to peers, providing options for peer assistance for victims could be an important tool in socio-emotional support services for students.

This study also shows that the demographic characteristics of UA student victims of sexual violence are associated with the likelihood of sexual violence victimization disclosure. Statistically significant relationships were discovered for each of the three demographic variables examined: age, race/ethnicity, and sex/gender. Importantly, however, the relationships are quite specific and nuanced.

For example, while student age is related to the likelihood of sexual violence victimization disclosure, the relationship is not linear. Rather than the likelihood of sexual violence victimization disclosure simply increasing or decreasing in a linear fashion with age, our findings revealed that UA students between the ages of 35 and 44 are significantly less likely to disclose sexual violence victimization than student victims in other age groups. Only 18.4 percent of UA students between the ages of 35 and 44 who experienced sexual violence disclosed to anyone. In contrast, 65.8 percent of students between the ages of 18 and 24, 76.9 percent of students between the ages of 25 and 34, 71.7 percent of students between the ages of 45 and 54, and 37.7 percent of students between the ages of 55 and 64 disclosed their sexual violence victimization to someone.

The relationship between student racial/ethnic identity and the likelihood of sexual violence victimization disclosure was similarly nuanced. Our analyses did not uncover a simple White–non-White contrast, nor was



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UA students

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there a discernable gradation in disclosure likelihood among differing racial/ethnic groups. Instead, we found that UA students who self-identified as African American/Black (only) were much less likely to disclose sexual violence victimization than students who self-identified as members of other racial/ethnic groups.

The most straightforward (and perhaps the least surprising) finding was for sex/gender. Our analysis clearly shows that female UA students who experienced sexual violence victimization are much more likely than their male counterparts to disclose their experiences to someone. Whereas three-quarters of female students disclosed to at least one individual or organization, only slightly more than half of male students did so.

In order to be maximally effective, university efforts to improve sexual violence reporting rates and access to victim resources need to be tailored to specific subgroups of students, most notably male students, African American/Black students, and older students. It is unsurprising that male students are significantly less likely to disclose given the social stigma attached to males and sexual victimization. Targeted efforts may help reduce the social stigma and encourage male students to seek resources and assistance. It is important that culturally sensitive and appropriate prevention education, intervention,

and victim services, especially for African American/Black students, are accessible. Lastly, it appears that older students are less likely to disclose sexual victimization. Targeted efforts to reach nontraditional students may include increasing students' awareness and knowledge of resources and support.

In conclusion, our findings show that it is highly unlikely that college/university students who experience sexual violence victimization will disclose to university representatives, or seek assistance through other formal help-seeking channels. This is fully consistent with research that has been conducted at other colleges and universities in the U.S. When they do share their sexual violence victimization experiences with others, college/university students are most likely to confide in friends, romantic partners, or other family members. In addition, the likelihood of disclosure is highly

influenced by age, race, and gender. Efforts to enhance victim services need to account for both of these findings.

Brad A. Myrstell is a faculty member in the Justice Center and director of the Alaska Justice Statistical Analysis Center. Lindsey Blumenstein is a faculty member in the Justice Center.

New Staff

Elaine Main has joined the staff of the Justice Center as Academic Program Specialist. Most recently, Ms. Main worked for the University of Alaska Statewide Office of the Vice President for Finance and Administration in Fairbanks as Executive Assistant to the Chief Financial Officer.

New Look and Web Addresses for the Justice Center

The Justice Center, the Alaska Justice Statistical Analysis Center (AJSAC), and the Alaska Justice Information Center (AJIC), have new web addresses and a new look to their web pages as part of the new UAA website redesign.

Justice Center—www.uaa.alaska.edu/justice

Alaska Justice Statistical Analysis Center—www.uaa.alaska.edu/ajsac

Alaska Justice Information Center—www.uaa.alaska.edu/ajic