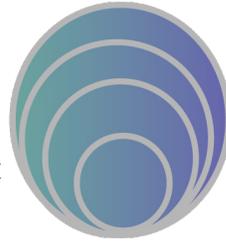


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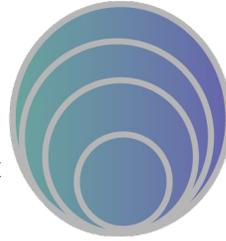


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Preventing Interpersonal  
Violence in  
Community Colleges:  
Themes From The Literature and  
Implications for Practice

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**CAMPUS**  
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# Literature Review On Preventing Interpersonal Violence in Community Colleges:

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## Background

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Community Colleges across the United States embrace a bold mission of creating open access to education. The American Association of Community Colleges (AACC) defines their broad mission as “ensuring that millions of diverse and often underserved students attain high-quality college education” (<https://www.aacc.nche.edu>). Community colleges fulfill this mission by offering free/affordable tuition, open enrollment policies, flexible scheduling, and a multitude of courses. Through such efforts, they are successful at reaching a wide variety of students; community college students within the US system of 1,108 public, independent and tribal colleges represent 41% of all U.S. (AACC, 2017).

Community colleges have an incredibly diverse student population comprised of students of all races and ethnicities as well as non-traditional students, workers, parents, caregivers, veterans, and students with disabilities. Women comprise a slight majority of the community college student population (56% of students are women, 44% are men). The AACC further estimates that 54% of students are white, 23% are Hispanic, 13% are Black, 6% are Asian/Pacific Islanders, 3% identify as multi-racial, and 1% are Native American. In line with national demographic trends, community colleges have grown more diverse over time, with the proportions of Black and Hispanic/Latino students steadily increasing each year (The Century Foundation, 2013). Indeed, community colleges are the predominant entry point for postsecondary instruction among students of color (Miller, Pope, & Steinmann, 2004; Perrakis, A.I., 2008).

Community colleges also serve a large number of non-traditional students. The AACC estimates that the average age of community college students is 28, and that nearly half of students are 22 or older (AACC, 2017). Moreover, the AACC estimates 17% are parents, 12% have a disability, 7% are non-U.S. citizens, 7% have a prior bachelor’s degree, and 4% are veterans. The National Center for Education Statistics (NCES) further estimates that 69% of community college students work while attending school, with one third of these students working 35 or more hours per week (Radwin, D., Wine, J., Siegel, P., & Bryan, M., 2013). Thus, community college students often juggle multiple responsibilities, which compete for their time and attention as they complete their education (Lovell, 2014; Ocean, Hawkins, & Chopra, 2014).

Although the average age of community college students tends to be older, there is evidence that the proportion of younger, traditional-aged students is growing over time (Miller et al., 2004; Mullin, 2012). This is perhaps due, in part, to programs which allow high school students to take courses for college credit. Such programs are often targeted at first generation college students, people of color, and English language learners (Mullin, 2012). Increased efforts to recruit first generation students have also been successful; the AACC estimates that 36% of community college students are first generation college students (AACC, 2017). Additionally, community colleges are successful at providing opportunity to students of low socio-economic status; the AACC estimates that more than half of community college students qualify for or receive some type of financial aid (AACC, 2017). The National Center for Education Statistics (NCES) found that community colleges enrolled 41% of all undergraduate students living in poverty in 2007 – 2008 (NCES, 2011). Thus, as they serve their students, community colleges must meet a diverse array of student needs.

Preventing interpersonal violence among their students is just one of their myriad responsibilities. Both Title IX and the Clery Act require that colleges are prepared to respond to incidents of interpersonal violence, notify students of crimes that occur on campus, and implement campus-wide prevention programs. These requirements are the same for both two-year and four-year colleges despite the fact that the two contexts are very different from one another. Community colleges are dedicated to creating open access for students and in fulfilling their mission, succeed at enrolling a more diverse student population than many of their four-year counterparts. Therefore, community college students differ from their four-year student counterparts in a number of ways, including demographics and health behavior patterns. The two campus environments also differ. However, despite the notable differences between community colleges and four-year colleges, they are held to the same standards and expectations for Title IX and Clery Act compliance.

To better understand community colleges' assets and needs in meeting prevention requirements, Alteristic conducted focus groups and key informant interviews with community college personnel. Equipped with findings from the focus groups, we then conducted a search of the literature to identify a set of best practices for interpersonal violence prevention within the community college context. This report summarizes the results and themes of our research activities and suggests implications for prevention efforts. We then used the findings presented in this report to create an accompanying toolkit that community colleges can use to enhance their efforts to prevent interpersonal violence.

# FOCUS GROUP & KEY INFORMANT INTERVIEW FINDINGS

In 2014 and 2016, Alteristic conducted focus groups and key informant interviews with community college grantees of the OVW Campus Program to explore strengths they possess and limitations they have faced in implementing violence prevention programs on their campuses. In total, twelve community colleges across the United States participated in focus groups and key informant interviews. The twelve community colleges represented had between 5,000 and 25,000 students with locations in the South, Midwest, Northeast, and Western regions of the United States. They represented a mix of urban, suburban, and rural settings, with most campuses reporting multiple campus locations, each with distinct characteristics.

## Student Characteristics

Participants reported that their student populations were more heterogeneous than those at four-year colleges, with large numbers of non-traditional students, including parents and workers. Participants commonly commented that their students maintain families and jobs throughout their educational experiences. Such familial and career obligations typically take place off-campus, limiting the amount of time that students are able to spend on campus outside of attending classes or exams.

Almost all participants reported that the majority of their students are of low socio-economic status. Additionally, many respondents commented that they serve students with what they described as “specialized needs” such as veterans, displaced workers, caregivers, differently abled students, and students experiencing homelessness. Despite these competing needs, respondents acknowledged the importance of violence prevention, partially because so many of their students have experienced interpersonal or systemic violence at some point in their lives. One respondent remarked:

*People say ‘domestic violence’ is not our issue because it doesn’t happen here. It happens off campus...it’s the local police’s job...I think the largest challenge isn’t the red tape; it is changing mindsets. You can see unilaterally that the administration are looking at this as a personal issue, not a college issue. We all have a responsibility in this as a community.*

Another affirmed, “*We care. We have a strong team that is committed,*” illustrating the perceived importance of this issue among community college grantees. Indeed, the immense care that community college staff have for their students was a dominant theme of the focus groups and key informant interviews. Such commitment is a major asset to their violence prevention efforts.

## **Current Interpersonal Violence Prevention Efforts**

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Focus group participants described their current efforts at interpersonal violence prevention as “piecemeal.” The majority of respondents reported having more than one interpersonal violence prevention program in place. Participants commonly reported that they struggle to engage commuter students who have family and career obligations outside of school. Many participants remarked that male engagement in current interpersonal violence prevention programming is particularly low. To maintain their current interpersonal violence prevention efforts, community colleges commonly reported that strong connections with community agencies serve as the cornerstone of their violence prevention efforts. Several colleges used Memoranda of Understanding (MOU) to engage part-time advocates from local violence prevention agencies in delivering prevention education and providing advocacy to students affected by violence.

## **Strengths and Assets**

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Given their mission of creating open access to education for all, community colleges excel at stakeholder engagement, partnership, and coalition-building. Unsurprisingly, nearly all of the respondents spoke about the importance of community partnerships to their interpersonal violence prevention and response efforts. These comments led Dr. Vicky Banyard (who conducted the 2016 key informant interviews) to conclude:

*Community links and partnerships are a real foundation for this work for community colleges, perhaps more so than for other campuses. Community colleges are not islands. Their work is bound to that of community partners in a way that we may see less with other campuses.*

In addition to engaging community partners, the community college campus grantees interviewed talked about linking programming to regular classroom activities, annual trainings, and other well-attended events. Several participants talked about relationship-building with well-liked faculty to link violence prevention content with coursework. For example, one participant remarked, “*Involving faculty and staff is crucial to guarantee time in class to access and engage students.*” Others spoke about folding violence prevention content into general education courses, orientation sessions, and community tabling events.

Community colleges’ collaborative orientation and rich tapestry of active partnerships are tremendous assets for violence prevention from which community colleges can build as they seek to deepen their prevention efforts over time.

## **Challenges and Needs**

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In addition to the strengths and assets summarized above, the professionals who participated articulated a number of challenges, including limited resources, limited

readiness/capacity, few points of access to students, and a lack of prevention programming tailored for their use.

They also discussed some of the challenges they have faced in their attempts to implement prevention programming with this population. In trying to balance competing personal and professional priorities, they reported that their students spend little time on campus outside of class. Participants also discussed difference in campus setting and shared that their campuses did not have residence halls, student unions, or other gathering spaces. The following three illustrative quotes speak to these challenges:

*Access to students is quite challenging. There are no easy access points like residence halls at larger schools. We also have a huge population of single parents, so the ability to attend an all-day bystander training is almost impossible for most students."*

*We don't have res halls. Points of entry are hard.*

*Because of the non-traditional student population—they have outside lives—jobs, families, etc. It's hard to get students to stay on campus past actual class time. They have other places and people to get to.*

Given these unique characteristics, participants shared their skepticism that programs designed for four-year colleges would work on their campuses. They expressed a desire for interpersonal violence prevention programming that has been tailored especially for community colleges. As one participant stated, *"Programming must be able to be tailored for community colleges. Could not be a program in a box."* Given the void of interpersonal violence prevention programs designed specifically for community colleges, community colleges may benefit from tools and training in adapting and tailoring existing programs and strategies to meet the needs of their target population.

In addition to articulating a need for tailored programming, several participants also reflected that rules, regulations, and OVW Campus Grantee guidelines could be better tailored for the community college context. As one participant noted, *"A lot of these federal regulations are important because they address the issue but fail to value the infrastructure. Our structure is much different. We wear many hats."* In failing to account for community colleges' unique structures, many participants expressed that they felt overburdened with work. One participant stated, *"It is tasking us with this enormous responsibility."* Another commented, *"We are supportive of each other, but we can't handle the amount of work."* For this reason, community college personnel have relied on partnerships to expand their capacity.

However, even with strong partnerships in place, community college personnel have few resources and limited capacity to implement effective prevention programming. Participants commonly reported a lack of dedicated staffing, with multiple staff members wearing different professional hats. One participant commented, *“Psych counseling is what they pay me for and that comes first. They don’t pay me or anyone else to do prevention work.”* Thus, many participants articulated a need for greater leadership buy-in and resource provision (including human resources) for prevention efforts.

## Implications

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Both sets of findings generated a common set of strengths and needs. Strengths include community colleges’ immense skill at stakeholder engagement and coalition-building, commitment to students, and ingenuity in bridging these assets to provide prevention programming despite having few resources. Needs identified include programming that has been tailored for the community college context and/or guidance for adapting and tailoring existing prevention curricula, additional resources for prevention, and leadership buy-in for interpersonal violence prevention.

The results of the focus groups served as an important piece of formative research for this literature review. Equipped with these qualitative data, we continued our inquiry by conducting a search of the literature to identify best practices for interpersonal violence prevention within the community college context. We sought to understand how community colleges strive to meet federal mandates—including programs used, evaluation data collected, and lessons learned—in order to provide broad prevention guidance for Campus Grantees. However, a search of the peer-reviewed literature revealed only a small number of articles devoted to this topic. Thus, we reached to the broader literature on health promotion (interventions designed to help people increase control over their health) in the community college context to provide insight into best practices. Below, we provide a summary of our methods, results, and the implications that these results have for providing quality interpersonal violence prevention programming in the community college context.

## LITERATURE REVIEW METHODS

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We conducted a systematic literature search in two phases. During the first phase, we searched relevant databases and publications focused on community colleges to answer the question: “What are best practices for preventing dating/domestic violence, sexual assault, and stalking within the community college context?” During the second phase, we reviewed articles that focused on health promotion and public health more generally as well as articles culled from the bibliographies of the sources reviewed in phase one. From there an iterative process followed, whereby we identified and reviewed sources cited that might inform our central research question. In total, we included 30 articles in this review.

# CROSS-CUTTING THEMES & IMPLICATIONS FOR PRACTICE

Based on the literature, we identified several key themes from our review. The first is that there is a scarcity of research about community colleges, interpersonal violence prevention, and health promotion practices within this context. The review also highlighted the unique characteristics of community college students and the ways in which their health behavior patterns differ from their traditional, four-year student counterparts. In addition, our review illuminated the barriers that community colleges face in providing prevention programming, including limited resources, lack of dedicated staffing, lack of access to students, lack of administrative buy-in, and large size. Lastly, our review highlighted possible dissemination points for interpersonal violence prevention messages and programming. These include using classrooms, online platforms and tools, and utilizing partnerships and collaborations with community organizations to leverage resources and meet student needs. Each of these themes is discussed in detail below along with implications for practice that correspond to each theme.

## **Theme #1: There is a scarcity of research about community colleges and interpersonal violence prevention practices within this context.**

### THEME #1 KEY FINDINGS

- There is a lack of research about interpersonal violence prevention within the community college context.
- This gap extends to the broader literature on health promotion, with few studies about efforts to promote sexual health, responsible use of alcohol and other drugs, and general student wellness to serve as guideposts for interpersonal violence prevention efforts.
- This research scarcity makes it difficult to identify best practices and develop research-informed strategies to prevent interpersonal violence on community college campuses.
- The lack of available research also makes it difficult for prevention practitioners at community colleges to illustrate the impact of their work in order to get buy-in and additional resource provision from their administrators.

A primary finding of this literature review is that there is a lack of research about interpersonal violence prevention within the community college context. Moreover, this gap extends to health promotion and community colleges more generally, with few peer-reviewed articles evaluating the effects of health promotion programs (e.g. alcohol and other drugs, sexual health programming) and few health surveys with

community college student samples. Such research gaps make it difficult to discern best practices in preventing harm and promoting student health and quality of life.

A general lack of research about community colleges has been documented. Townsend and colleagues conducted two content analyses of peer-reviewed journals focused on higher education and community colleges. In their first analysis, they examined patterns of authorship in academic and practitioner-focused higher education journals and found that the majority of authors in both types of journals were male and worked in traditional, four-year universities (Townsend, Donaldson, & Wilson, 2009). In their second analysis, they examined eight predominant higher education journals and found that of the more than 2,000 articles published between 1990 – 2003, only 8% (187 articles) focused on community colleges (Townsend et al., 2009). Their findings indicate that voices of academics working in community colleges and the community college context as a whole are underrepresented in the literature.

It's not surprising then that this research gap extends to interpersonal violence prevention. Lee (2017) notes that, "Within the literature, there is scant information pertaining specifically to community colleges and the Clery Act. As a whole, the discussion surrounding the Clery Act is general and broadly applied to higher education as a sector." The author further notes that despite vast differences in context and capacity to comply, institutions are universally held to the same standards of compliance. This disparity places community colleges at a distinct disadvantage to fulfill federal mandates to which they are held (Lee, 2017). In their 2017 review of sexual health literature, Habel, et al., (2017) similarly concluded: "Part of the difficulty in approaching how to provide better sexual and reproductive health care to this population is that community colleges are often overlooked and understudied... In general, available data on colleges and their students overwhelmingly represent those attending 4-year colleges, presenting a large research gap." They assert that more research is needed to uncover sexual health risks and the unique characteristics of community colleges that may mediate or mitigate such risks (Habel, Becasen, Kachur, Eastman-Mueller, & Dittus, 2017).

Katz and Davidson (2014) attempted to amend the research gap by conducting a comparative analysis of survey data from a national college student health survey. The results of their analysis reveal differences in student mental health and resource provision at community colleges. Given this, the authors assert that community college students are particularly in need of mental health resources. They also conclude that more research on mental health in the community college context is needed (Katz & Davison, 2014).

Crumb, et al., (2017) also attempted to shore up the research gap by training student leaders to recognize warning signs of sexual assault and follow reporting protocols. Their goal was to encourage awareness of sexual assault policies and increase reports of sexual misconduct. To assess the training's effects, they conducted a one group, post-test only study with a convenience sample of community college students.

Although the methods they used limit the generalizability of their findings, their results suggest that formalized training about sexual misconduct may increase the knowledge base and aid community colleges in providing programming (Crumb et al., 2017)

In addition, our literature search yielded a handful of studies and reviews related to preventing student abuse of alcohol and other drugs in the community college context. Because use of alcohol and other drugs may influence the incidence of sexual assault on college campuses, lessons learned from this field may be valuable in uncovering intersecting best practices for interpersonal violence prevention. Eren and Keeton (2015) conducted a literature review with the sole purpose of illuminating the deficiencies in research about community colleges, particularly as it related to student alcohol and substance use on these campuses. Their search did indeed uncover a limited body of research; as such, they assert that more research, both quantitative and qualitative, is needed to ascertain community college students' unique experiences and needs (Eren & Keeton, 2015). Cremeens-Matthews and Chaney (2016) also acknowledge that a lack of research on drinking behavior among community college students motivated them to conduct a survey to compare the behavior of two-year and four-year college students. They conclude that more research is needed to understand the specific behaviors and needs of community college students (Cremeens-Matthews & Chaney, 2016).

The dearth of research has also been highlighted within the broader literature on health promotion efforts at community colleges (Ocean et al., 2014). Floyd (2003) conducted a literature review to explore how community colleges have attempted to address student health. The author found that despite findings from the 1995 national College Health Risk Behavior Survey, which indicated that community college students reported worse health outcomes than those at 4-year colleges, little has been done to promote student health. The authors further report that in 1996, the AACC did its own study about health and found that most health promotion was done in the classroom setting by faculty, and that outside of the classroom, treatment of health issues (including sexual assault) was less systematic and thorough. Despite the existence of such health surveys, community colleges did not include student health among their top priorities (Floyd, 2003).

For example, the U.S. New Expeditions Project of 1998 did not mention student health in its recommendations for the future of community colleges (Floyd, 2003). In 2000 the AACC surveyed its members and asked about health promotion, indicating a budding interest. However, the survey suffered from a low response rate of 37% (Ottenritter, 2002). In fact, health promotion, including interpersonal violence prevention, were absent from a major 2012 report that was released by the AACC's 21<sup>st</sup> Century Commission on the Future of Community Colleges. The report, entitled, *Reclaiming the American Dream: Community Colleges and the Nation's Future*, focused solely on increasing degree completion, preserving access, enhancing quality, and eradicating attainment gaps, without reference to interpersonal violence (AACC,

2012). Interpersonal violence prevention and health promotion were similarly absent from the 2014 Implementation Guide that the Commission released (AACC, 2014), indicating a lack of buy-in and administrative support for these issues.

The scarcity of research about the community college context, generally and with regard to interpersonal violence prevention and health promotion has important practical implications. Such research gaps may make it difficult for program creators to develop research-informed interpersonal violence prevention strategies. Moreover, the research scarcity may make it difficult for community college practitioners to discern best practices in preventing harm and promoting student health and quality of life. Without data to guide them and quantify the outcomes of their efforts, practitioners may struggle to gain administrative buy-in for violence prevention efforts.



## Implication #1: Address the research gap.

### THEME #1 IMPLICATIONS IN BRIEF:

- Given the lack of research about community colleges and interpersonal violence prevention, more research is needed.
- Qualitative research is needed to explore:
  - ▶ Current efforts to prevent interpersonal violence and perceptions about the efficacy of these efforts
  - ▶ Community college student experiences, needs, and suggestions for how their colleges can meet their needs
- Quantitative research is needed to measure the reach and effectiveness of current prevention programming.
- Community college practitioners should prioritize evaluation (both process and outcome evaluation) as they plan interpersonal violence prevention initiatives; technical assistance may be needed to support them in this endeavor.
- Having such data on hand will enable community college prevention practitioners to:
  - ▶ Track prevention goals and objectives;
  - ▶ Improve implementation and associated outcomes over time;
  - ▶ Engage administrators, community partners, and funders; and
  - ▶ Analyze data and publish findings, thus contributing to the broader evidence base.
- On a broader scale, concerted effort is needed to engage important groups such as the American Association of Community Colleges, National Community College Advisory Council, and the American College Health Association in dialogue about the importance of interpersonal violence in the community college context.
- Engaging these groups may increase buy-in, improve technical assistance, and increase resource provision for interpersonal violence prevention at community colleges.

Given scholarly consensus that there is a lack of research about community colleges generally, as well as interpersonal violence prevention and health promotion within this context, we conclude that more research is needed. This includes research about community colleges, their students, current prevention efforts (strengths and limitations), and insights about improving programs or delivery mechanisms.

Qualitative research is needed to better understand current efforts to prevent interpersonal violence at community colleges and practitioner perceptions of the efficacy of these efforts. In addition, qualitative research is especially needed to explore community college student experiences, their needs, and suggestions they have for how campuses can meet their needs. Quantitative research is needed to measure the reach and effectiveness of current prevention programming. This need is especially acute with regard to interpersonal violence prevention given the fact that we were able to uncover only a handful of published works that specifically addressed this topic, and those that we reviewed were focused on fostering awareness of response protocols rather than preventing interpersonal violence before it occurs.

Thus, we recommend that community college practitioners prioritize evaluation as they plan interpersonal violence prevention initiatives. Practitioners should consider both process evaluation measures (ways of measuring program reach) and outcome evaluation measures (ways of measuring program effectiveness) as they plan prevention efforts. Process measures may include: number of educational sessions/materials provided, number of students reached, dose (e.g. length of educational session, depth of content covered, amount of skills-practice), and assessment of how programs/products were delivered. Outcome measures may include: participant satisfaction, attitude change, behavior change, and number of incidents of interpersonal violence. Often, measures like these are easy to collect and track using process evaluation forms, spreadsheets, and even free survey platforms, which are widely available.

Having this information will give practitioners a sense of whether or not they are meeting their goals and objectives. It also enables practitioners to make changes to improve their processes and outcomes over time. Process and outcome data can also re-energize prevention practitioners, which only enhances their efforts. In addition, key stakeholders such as administrators, community partners, foundations, and other funders often rely on data to prioritize initiatives and allocate funding. Reliably collecting and sharing process and outcome data thus may enhance resource provision, addressing a key barrier that community colleges face in providing interpersonal violence prevention. Moreover, collecting these data on an ongoing basis creates a large dataset that could be used by investigators to conduct statistical analyses from which they may publish findings, thus contributing to the broader evidence base.

On a broader scale, national and industry priorities often set the tone for resource provision and research funding. Our findings indicate that a concerted effort is needed to engage important groups such as the American Association of Community Colleges, National Community College Advisory Council, and the American College Health Association in dialogue about the importance of interpersonal violence in the community college context. As stated in this review, current national priorities are centered on academic achievement, retention, and degree completion. A

strategy for getting institutional buy-in may be to examine how student experiences of interpersonal violence impact student retention, achievement, and degree completion. Such an examination was beyond the purview of this review.

The OVW Campus Grantee Program is well positioned to assist community colleges as they implement these recommendations. For example, OVW Campus Grantee TA Providers could provide grantees with guidance about program planning models, sample process and outcome evaluation tools, and guidance about best practices for data management. In addition, OVW could commission a literature review about the effects of interpersonal violence on student performance and use its findings to engage stakeholders within the broader higher education sector.



## Theme #2: There are important differences between community college students and traditional 4-year college students.

### THEME #2 KEY FINDINGS

- The community college context is unique and differs in many ways from the traditional four-year college context.
- Community colleges serve a broader, more diverse population of learners; their students tend to be older and primarily identify as workers, parents, and community members rather than as college students.
  - ▶ When they have a problem or need resources, they are more likely to seek help from family members or community-based organizations than classmates or campus-based resources.
  - ▶ To balance their responsibilities as students, parents, and workers, community college students spend little time on campus outside of attending classes.
- Predictably, their life experiences and health behavior patterns differ from their younger four-year college counterparts.
  - ▶ Community college students have had greater exposure to interpersonal violence and systemic violence than their four-year counterparts.
  - ▶ They also have different patterns of substance use (though the data are mixed as to the direction and magnitude of these differences).
- The literature suggests that it may not be possible or advisable to create universal college strategies.
- However, despite these meaningful differences, existing policies and guidance created to aid community colleges in meeting requirements have neither been sufficiently tailored to their needs nor their capacity to fulfill them.
- Perhaps as an extension of this, few (if any) interpersonal violence prevention programs have been created or evaluated specifically for community colleges.
- Given the enormous number of students that community colleges serve, this represents a failure of existing interpersonal violence prevention programming and an important opportunity for content creation, program tailoring, evaluation, and technical assistance efforts that are specifically tailored to the community college context.

Many of the articles reviewed explored the differences between community college students and their traditional, 4-year student counterparts, including prior exposure to violence, substance use, sexual health behaviors, mental health conditions, and

general health behaviors. Many of the articles also explored the unique characteristics of community college students. Indeed, nearly every article reviewed gave a profile of community colleges and noted that their students are typically older and more racially and ethnically diverse than their counterparts at four-year institutions. Moreover, several articles noted that the majority of community college students are women, that nearly all community college students work, and that many of them are parents and caregivers.

These unique characteristics have important implications for prevention programming. However, despite these differences, very few (if any) health promotion programs, including interpersonal violence prevention programs, have been tailored for community colleges. Often, programming, strategies, and requirements created for traditional, four-year colleges have been overlaid on community colleges without adaptation. However, the significant differences between these two student populations suggest that for maximum effectiveness, prevention programming, strategies, and requirements must be tailored specifically for each target student population. Below, we explore the distinct behavior patterns and identities of community college students, and the possible implications that they may have on interpersonal violence prevention program development.

### **Differences in Exposure to Violence and Health Behavior Patterns among College Students**

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Only one of the articles reviewed explored differences in rates of interpersonal violence. Edman et al. (2016) conducted a survey with an ethnically diverse sample of community college students. They found high rates of interpersonal violence among both female and male students within this population. They further discovered that Black and Latino students reported higher rates of interpersonal violence than White students, indicating increased risk for these populations. The authors also noted that commuter students may live with abusive families of origin where they are chronically exposed to violence. Because previous studies have linked trauma to poor academic performance, the authors suggest that community colleges should strive to prevent interpersonal violence to reduce student trauma and improve academic performance (Edman, Watson, & Patron, 2016).

Flannery and Quinn-Leering (2000) conducted a literature review to explore college students' exposure to violence. They discovered that rates of property and violent crimes at two-year colleges were lower than at other post-secondary institutions. However, their review did not enable them to disentangle distinct forms of violence or explore the reasons that violent crime rates differ (Flannery, D., Quinn-Leering, K., 2000).

The literature on alcohol and drug use also reveals differences between two-year and four-year college students. Sheffield et al., (2005) and Wall et al., (2012) analyzed survey data and found higher rates of binge drinking among community college students relative to students attending traditional four-year colleges (Sheffield, Darkes, Del Boca, & Goldman, 2005; Wall, BaileyShea, & McIntosh, 2012). Cremeens-Matthews and Chaney (2016) conducted a survey and found that students at the two-year college had lower rates of past-30-day alcohol use and binge drinking, which differs from the previous studies cited, possibly indicating changes in alcohol and drug use patterns over time (Cremeens-Matthews & Chaney, 2016). Despite the nuances of these findings, differences in consumption patterns among 2-year and 4-year students were a common theme.

Differences such as these led Sheffield et al., (2005) to conclude: "The differences between community colleges and more traditional institutions suggest that factors associated with problem behavior in these two types of settings may be quite different." They further suggest that these differences "have implications for the design and delivery of effective prevention and intervention efforts in community college venues" (Sheffield et al., 2005). Eren & Keeton (2015) echoed this sentiment at the conclusion of their literature review comparing substance use and abuse on college campuses. They conclude:

*The research described here suggests that as student enrollment in community colleges has grown substantially, so too has the need to devise contextualized prevention programs specifically for two-year colleges. Because the literature is substantially targeted towards four-year colleges, the default has been to adapt four-year college prevention methods to two-year colleges. Disparities and differences between four-year colleges and two-year colleges make it increasingly difficult to apply methods for alcohol/substance use/abuse prevention from four-year to two-year colleges. These disparities require that additional attention be paid to two-year colleges to ensure that the needs of their students are adequately addressed.*

Although the review addressed student use of alcohol and other drugs, their conclusions may well apply to interpersonal violence prevention as well.

In a literature review to explore how community colleges have attempted to address student health, Floyd (2003) found that two-year college students are more likely than their 4-year counterparts to be overweight, smoke, use substances, have had 6+ sexual partners in their lifetime, not use condoms, and to have been raped. These experiences may be an artifact of their older age, but they warrant further consideration (Floyd, 2003).

Katz and Davidson (2014) conducted a comparative analysis of survey data from the American College Health Association's National College Health Assessment. This

national survey compares health indicators of both traditional and two-year college students. The results of their analysis indicate that community college students have more severe psychological concerns and fewer institutional resources than their traditional, four-year counterparts. Given this, the authors assert that community college students are particularly in need of mental health resources, including those that address risk and protective factors for sexual assault and relationship violence (Katz & Davison, 2014).

A major theme across the literature reviewed was that meaningful differences exist among two-year and four-year college contexts and that it may not be possible to develop universal college strategies. Cremeens-Matthews and Chaney (2016) stated:

*While this technical report was largely targeting four-year institutions, research studies need to test these recommended strategies in community college settings to determine their effectiveness. The campus environment at a two-year institution varies greatly from a four-year institution, and it cannot be assumed that because such strategies have proven to be effective or have shown promise at a four-year institution that implementing them in a two-year institution will have similar results.*

Given the differences in college context, authors commonly recommended more program development, testing, evaluation, and tailoring for community colleges.

### **Students are Parents, Caregivers, and Family Members**

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As noted in the introduction to this review, 17% of community college students are parents (AACC, 2017). Community college students are also often commuters, in close proximity to their families and communities of origin. Thus, community college students often conceptualize themselves and prioritize their role as parents and members of families rather than as students (Ocean et al., 2014). The literature reviewed reflects this.

For example, in their pilot study of an online program to address alcohol and other drug use and sexual assault, Donovan et al., (2012) interviewed students about help-seeking to inform the creation of an online training program. The students they interviewed commonly reported that they were as likely to seek health information online for a family member as they were for themselves. The authors stated: “These findings suggest that attention to the student as part of a family— rather than part of a traditional, first-year college student living situation, such as a dormitory— may be important” (Donovan, Chiauzzi, Floyd, Bond, & Wood, 2012). These results suggest that framing resource provision in terms of family needs may be a promising practice.

Similarly, Miller et al., (2004) conducted a student needs assessment at six community colleges. They found that when asked about coping skills, these students stated that consulting with family members was the highest rated coping mechanism. They

further found that community college students did not have significant interaction with their peers or college personnel because they commuted to campus and typically studied at home. They concluded that “Without encounters with peers and professionals, students were more dependent upon individuals who may be more accessible and knowledgeable of their concerns—family members.” They suggested that programming should acknowledge the supportive role that families play in students’ lives and that community colleges should strive to build bridges between their students and college personnel (Miller et al., 2004).

Eren and Keeton (2015) conducted a literature review exploring disparities in college alcohol and other drugs research. They note the importance of acknowledging parenthood when developing programming, noting that the positive effects of prevention programming may be felt for generations to come. Given that many community college students may have already been exposed to violence in their personal lives before enrolling as students (Flannery, D., Quinn-Leering, K., 2000), the positive effects of prevention program may be even broader. Additionally, in their literature review, Flannery and Quinn-Leering (2000) found that while community college campuses are relatively safe, the communities in which they are located typically experience 10 times the rate of violent crime as the campuses themselves. Thus, they conclude that violence prevention programming is critical.

In addition, two studies examined best practices for implementing welfare-to-work programs at community colleges. In their narrative description of a successful welfare-to-work program Higgins et al., (2001) noted the importance of providing childcare for program participants. Due to limited resources, the program relied on a partnership with a local Child Care Council to provide childcare. Melendez et al., (2004) conducted a literature review and interviewed personnel from a variety of community colleges about welfare-to-work program best practices. They also identified providing childcare as a best practice that other community colleges should adopt when implementing similar welfare-to-work initiatives.

Together, these findings suggest that students’ identities as parents and members of family units must be considered when developing prevention programming. Our findings suggest that interpersonal violence prevention programs should acknowledge the supportive role that families play in community college students’ lives and should not rely solely on peer influence as a motivator for behavior and norms change. Our findings further suggest that prevention programs should take family dynamics into account by accommodating family schedules, providing childcare, and even providing complimentary programs for children concurrent to adult programming.

### **Students Are Workers**

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As stated earlier, the NCES estimates that 69% of community college students work while attending school, with one third of these students working 35 or more hours

per week (Radwin, D., Wine, J., Siegel, P., & Bryan, M., 2013). Perhaps for this reason, several of the studies reviewed found that community college students are more likely to identify as workers than as students. The sources reviewed suggest that students' roles as workers may limit their time on campus and compete with programming that happens outside of the classroom.

For example, Donovan et al., (2012) found that community college students who work are not often on campus. In a research brief that summarized findings from the National Study on Community College Health, Ottenritter (2002) further found that:

*Many students are employed full-time, juggling myriad responsibilities, and consequently come to campus only for classes. Many do not participate in student activities such as health fairs, special presentations, or student life activities, even though 84% of responding colleges indicated that they conduct such activities (Ottenritter, 2002).*

These findings suggest that for health promotion activities to be successful, they may need to take advantage of the times and venues in which students are already on campus to disseminate programming and information.

Other studies found that students' identities as workers limited the effectiveness of peer-norms campaigns. For example, Sheffield et al., (2005) conducted a survey about patterns of alcohol and drug use and perceived norms at community colleges. They found that unlike research conducted with traditional, four-year college students, perceptions of peer alcohol use did not greatly inform consumption patterns at community colleges. Thus, they concluded that, "Perceived social norms thought to be a major contributor to drinking on traditional campuses may be less likely to influence community college students, who spend much less time in campus venues, and who are probably less likely to view themselves as 'college students' than as workers, parents, or simply residents of a specific town or neighborhood" (Sheffield et al., 2005). Similarly, Chiauzzi et al., (2011) interviewed administrators from 100 community colleges across the United States about their concerns regarding student substance use and their capacity to provide prevention programming. They found that "...commonly used 4-year college alcohol and drug prevention efforts such as social norms marketing were not considered effective by respondents in this survey" (Chiauzzi et al., 2011). They suggest that these findings were due to the fact that community college students are more likely to consider themselves as workers and as such, may not consider their classmates to be valued peers.

These findings suggest that students' identities as workers must be considered when developing prevention programming. Prevention practitioners may need to reach beyond traditional peer norms campaigns to alter norms within the community college context. Furthermore, prevention interventions may need to either take place when and where community college students are already on campus (i.e., during class time) or within the community context in order to achieve maximum effectiveness.

## Implication #2: Tailor interpersonal violence prevention programming specifically for the community college context.

### THEME #2 IMPLICATIONS IN BRIEF:

- Community college prevention practitioners must tailor existing programming to their unique context and student population; technical assistance may be needed.
- Depending on student characteristics, this may involve:
  - ▶ Providing interpersonal violence prevention programming in community settings;
  - ▶ Providing childcare and/or concurrent programming for children and adults;
  - ▶ Identifying events, times, and locations in which large numbers of students reliably show up and using them as dissemination points for interpersonal violence prevention messaging and programming;
  - ▶ Harnessing technology to provide online prevention programming; and/or
  - ▶ Tailoring interpersonal violence prevention messages and programs for the multiple intersecting identities of community college students.
- Refraining from using peer norms campaigns, which have proven ineffective within the community college context; norms campaigns may be more effective if they reference student identities as parents, workers, and community members

The literature makes it evident that community colleges significantly differ from their traditional, four-year counterparts and that community college students possess unique characteristics that warrant attention when developing health promotion programming, including interpersonal violence prevention strategies. Different patterns of sexual health behaviors, substance use, and past experiences with violence exist between two-year and four-year students. Community college students are also more likely to identify as parents, caregivers, members of families, workers, or residents of a particular city/town rather than as students. Too often in the past, strategies designed for use on traditional four-year college campuses have been imposed on community colleges without regard to differences between the two populations. However, our findings indicate that it may not be possible or advisable to create universal college strategies. Thus, our primary recommendation is that practitioners ensure that prevention program content and delivery are tailored to the community college context and the unique qualities of community college students. Technical assistance may be needed to aid them in this endeavor.

## **Considerations for Students Who Identify as Parents, Caregivers, or Family Members**

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This review found that because community college students have strong family ties, they are as likely to seek resources for family members as they are themselves. When they do seek help for themselves, they most often reach out to family members or community-based organizations rather than college personnel. Qualitative studies with single mothers attending community college indicate that being a role model for their children is a significant motivator for such students (Lovell, 2014). Therefore, we recommend that interpersonal violence prevention programs should seek to engage families—including children—in programming. This may manifest in a variety of ways including accommodating family schedules, providing tips for identifying the earliest possible warning signs of harm among family members, inviting families to attend programming, providing childcare during programming, or providing simultaneous programming for children and adults. To achieve this, community college practitioners may need to collaborate with community partners.

## **Considerations for Students Who Identify as Workers**

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Because community college students often hold part- or full-time jobs as they attend school, they are not often on campus. Many students come to campus only to attend class and do not participate in extracurricular or student life activities. As such, we recommend that community college staff identify the times and places when and where large #s of students reliably show up. This may be on campus (e.g., classrooms, dining halls, libraries), online (i.e. student orientation), or off-campus (e.g. workplaces or community sites). Once these times and locations are identified, we recommend that community college practitioners use them as dissemination points for prevention messages and programming. OVW TA Providers should assist Campus Grantees with this process.

## **Considerations for Other Identities**

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Within this review, we have placed the greatest focus on student identities as parents, caregivers, family members, and workers. This reflects the focus of the literature reviewed. However, it is important to acknowledge that community college students may identify in other ways. For example, given the racial and ethnic diversity of community college students, it is likely that these students may identify strongly with their race or culture. Likewise, given the numbers of veterans enrolled in community colleges, students may strongly identify with their military experience. Similarly, community colleges enroll a large proportion of students with disabilities and their shared experiences may influence their identity. These are just a handful of the possible identities that community college students may embrace.

It is entirely possible (indeed, it is probable) that community college students embrace multiple identities. For example, they may strongly identify as a worker, a parent,

and a contributing member of a community. They may also embrace multiple other identities such as gender, sexuality, race, or ethnicity. It is crucial that prevention efforts acknowledge and reflect intersecting identities so that every learner feels invited and included in prevention efforts. TA providers should consider creating tools that aid community college practitioners in tailoring the content of prevention programming and social marketing messages so that they reflect the lived experiences of their students.

Lastly, because community college students do not often identify primarily as students, we recommend that community colleges refrain from using social norms campaigns that target peer norms. Such norms campaigns may be more effective if they target students as parents, family members, workers, or community members. This underscores the case for embedding prevention efforts within the broader communities in which community college students live.

### **Theme #3: Community colleges face unique barriers to providing prevention programming.**

#### **THEME #3 KEY FINDINGS**

- Although community colleges do an extraordinary job at meeting the diverse needs of their students with few resources, they face a number of unique barriers to providing effective interpersonal violence prevention programming to their students.
- Such barriers include:
  - ▶ Limited resources (including funding and dedicated staffing)
  - ▶ Large size (often geographically dispersed with multiple locations to meet students where they are)
  - ▶ High rates of student turnover (which makes tracking their reach difficult)
  - ▶ Limited points of access to students on campus
  - ▶ Lack of national prioritization of this issue by the AACC and other guiding institutions
- The literature suggests that community colleges should forge partnerships to leverage resources and overcome these barriers.

The majority of articles reviewed acknowledge the myriad barriers that community colleges face in providing health promotion programming. The barriers discussed include limited resources, large size (often spread over multiple campuses), lack of dedicated staff, high rates of student turnover, and limited points of access to students. A small number of articles also suggest that national priorities for community colleges are mostly focused on student retention and academic success, and do not include

student health and wellbeing. The lack of national prioritization may contribute to lack of administrator buy-in for programs that address public health issues such as sexual assault.

In her literature review exploring strategies for fostering inclusion at community colleges, Eddy (2017) acknowledges that community colleges have made slow progress on fulfilling policy mandates regarding sexual assault (i.e., Title IX and the Clery Act) because of their limited resources and large size. Indeed, when considering programming options and target audience for a sexual harassment program, Ramson (2006) elected to focus on community college staff and administrators due to limited budget and time constraints. With insufficient resources to provide programming to all staff and students, they reasoned that community college leaders play a driving role in setting behavioral standards for the entire campus community and thus focused their efforts on this population.

DeJong (2006) found that resource limitations posed a barrier to community college efforts to deliver alcohol and other drugs programming. He notes that more than half of community college funding comes from state and local governmental sources, funding streams that are highly susceptible to economic recession. Budget constraints particularly effect student affairs departments. Therefore, the author suggests that increasing student fees could be a vehicle for enhancing prevention resources, but cautions that raising fees may create barriers to open enrollment, thus violating the broader mission of the community college (DeJong, 2006).

In addition to funding, a lack of dedicated staff is one of the major resource limitations that community colleges face. In their comparative analysis of student substance use data, Cremeens-Matthews and Chaney (2016) note that the differences between two-year and four-year colleges warrants deeper consideration of the practicality of prevention efforts. They state that "With resources being limited at institutions across the country, two-year institutions do not have the same infrastructure as four-year institutions, which often have someone dedicated to such prevention efforts. At a two-year institution, it would most likely be an additional task to someone's job description." Given the lack of dedicated staff, they consider whether it is even cost effective to focus on alcohol prevention efforts (Cremeens-Matthews & Chaney, 2016). Although their work focused on substance abuse prevention, these same constraints likely apply to interpersonal violence prevention.

Moreover, Chiauuzzi et al., (2011) surveyed 100 community college administrators and found that funding limitations and staffing limit their ability to address student substance abuse. The administrators surveyed also reported that students do not spend enough time on campus and that there are limited incentives for students to participate in health programming, making it difficult to effectively reach students with the limited resources they have. In addition, those surveyed reported a lack of support from institutional leaders, faculty, and administrators on campus. Lenk et al.

(2015) replicated the survey with additional questions about programming and found that many of the same factors limited administrators' ability to provide screening and prevention programming. A lack of resources coupled with insufficient institutional support often makes it impossible to provide prevention programming. Given these limitations, investigators such as Mrad et al., (2014) marveled at how many mental health services that community colleges provide.

In their comparative analysis of national student health data, Katz and Davidson (2014) found that community college students desire mental health and wellness information (including information on sexual assault and relationship violence), but that they do not receive enough of it. Moreover, they found that community college students report greater information deficits than their four-year student counterparts. The authors suggest that community colleges should fill this gap but acknowledge the limitations they face in doing so. Given such differences between two-year and four-year colleges, Eisenberg et al., (2012) concluded that: "Research is needed to delve into health resources at a wide array of colleges to identify gaps and recommend services and features that could be implemented even at institutions with relatively little health infrastructure." Habel et al., (2017) concludes that given the lack of resources, community colleges may need to implement creative solutions to provide sexual health resources to their students.

Efforts to research prevention efforts and health promotion within the community college context may be facilitated by reflecting these issues within national priorities such as those generated by the New Expeditions Project of 1998 and the AACC's 21<sup>st</sup> Century Commission on the Future of Community Colleges in 2012 (AACC, 2012; AACC, 2014; Floyd, 2003; Ottenritter, 2002). Health promotion, including interpersonal violence prevention, were absent from consideration within each of these efforts, making it difficult for community college prevention practitioners to obtain administrative buy-in and adequate resources to ensure student safety.

### **Implication #3: Increase capacity and leverage resources through partnerships and collaboration.**

#### **THEME #3 IMPLICATIONS IN BRIEF:**

- Eliminate barriers by leveraging resources for interpersonal violence prevention through partnerships and collaboration (already a major existing strength of community college practitioners)
- To deepen existing partnerships, community colleges should consider:
  - ▶ Increasing and formalizing communication between internal and external partners
  - ▶ Formalizing partnerships through the use of MOUs/MOAs
- To aid in identify new partners, community colleges should consider mapping community assets and resources; such an effort could be done collaboratively with existing partners and members of the campus community, including students
- To elevate the importance of interpersonal violence prevention among administrators and governing bodies, community colleges should begin thinking about how to make the case for interpersonal violence prevention to their leadership; this may include:
  - ▶ Documenting their current efforts to prevent interpersonal violence and the barriers they face in providing prevention programming
  - ▶ Creating a sample job description for dedicated prevention staff that can be used to make specific resource requests of key stakeholders and funders
  - ▶ Connecting the importance of interpersonal violence prevention to community colleges' missions of open access, student retention, academic success, and degree completion

A central finding of this literature review is the importance of fostering partnerships and collaboration in preventing interpersonal violence on community college campuses. Almost every article reviewed underscored the importance of both internal and external partnerships in meeting policy mandates to ensure student safety. This emphasis, coupled with the unique characteristics and identities of community college students discussed above, leads us to recommend that prevention program developers and community college practitioners embed interpersonal violence prevention efforts within broader community strategies. In such a scenario, a community college may be one stakeholder within a broader community prevention effort. Embedding prevention programming in the broader community has many potential benefits including increasing capacity, extending limited resources, and more effectively reaching students where they are. To do this, community college

practitioners need tools for enhancing internal/external communication, identifying and securing community partnerships, and mapping assets.

Effective communication is an essential ingredient to successful collaboration. Therefore, we recommend that community colleges devote energy to increasing internal and external communication. Given that community college staff wear many different hats and that staff from multiple departments may be tasked with interpersonal violence prevention, having formal channels for regular communication is critical. So too is creating formal communication channels with community partners, satellite campuses, and local four-year colleges. Community coalitions or advisory boards may be fitting vehicles for this purpose. OVW TA Providers are well poised to provide campus grantees with guidance about forming advisory boards, including membership, meeting frequency, board structure, and strategic planning.

As community college prevention practitioners begin identifying community partners or seek to deepen the engagement of existing partnerships around violence prevention, they may need tools for coalition building and formalizing partnerships. OVW Campus TA Providers may be able to offer campus grantees templates for drafting Memoranda of Understanding/ Agreement (MOUs/MOAs) with community partners. Additionally, TA providers should also consider providing community colleges with tools for mapping resources in their communities. Asset mapping, a process where community resources are inventoried and mapped, may be a helpful resource (McKnight, J., & Kretzmann, J., 1993; McKnight, J.L. & Kretzmann, J.P., 1997). Asset mapping is designed to build linkages between local people, institutions, and organizations in order to mobilize them to use their strengths to solve problems.

Community college campus grantees could use these tools at the outset of planning or with collaborations that are already in place. Using these tools on the ground floor of prevention planning, would aid community colleges in identifying community partners to engage in prevention efforts as well as possible referral resources to share with students, faculty, and staff. Using asset mapping tools within existing collaborations would allow each member of the collaboration to contribute and would likely expand the number of partners at the table. Having a variety of community assets focused on preventing violence among community college students would likely increase awareness of local resources, expand the capacity of each individual collaborator, and facilitate resource-sharing.

Because community college students rely on their colleges for resource-sharing and referral rather than for direct service, we recommend that community college prevention practitioners compile and share lists of resources, both those obtained through the asset mapping process as well as low-cost or free national resources. To this end, we suggest that OVW Campus TA Providers share a list of free or low-cost national resources for interpersonal violence prevention, intervention, and response.

However, while embedding prevention initiatives within broader community initiatives may use existing prevention resources most judiciously, more resources are needed to effectively prevent the incidence of interpersonal violence among community college students. In particular, dedicated staffing is an urgent need. Having someone who is dedicated to interpersonal violence prevention and/or health promotion would free up time to build community relationships, foster collaboration, increase regular communication, research promising programs and strategies, tailor messages, request funding, and evaluate outcomes. Therefore, it may be helpful for OVW TA providers to compile sample job descriptions and salary requirements based on similar positions at four-year colleges or community-based organizations. Having a job description will aid community college prevention practitioners in making specific asks of key stakeholders.

In order to increase resources such as dedicated staffing, greater administrative buy-in is likely needed at many schools. This may be achieved in a number of ways. The first is by providing training to faculty, staff, and administrators about violence prevention and response. We suggest that OVW Campus TA Providers provide guidelines and suggestions for content to include in such trainings. As already mentioned in earlier sections of this report, the second and more distal strategy for increasing capacity and resource provision is to identify interpersonal violence prevention as national and local community college priorities. Key stakeholders and industry leaders often set institutional priorities and determine how resources are allocated. To obtain more resources, including funding for dedicated staffing, the OVW Campus Grantee Program and its community college grantees must convince community college leaders that preventing violence is inherently connected to their broader mission of open access, student retention, academic success, and degree completion.



## **Theme #4: There are promising points of access and strategies for engaging community college students in interpersonal violence prevention.**

### **THEME #4 KEY FINDINGS**

- Despite the barriers discussed in the previous theme, community colleges possess a number of assets that will bolster their prevention efforts.
- Most notably, community colleges excel at coalition building, fostering partnerships, and collaborating to fulfill their bold mission of creating open access to education for all people.
- These assets will serve them well in utilizing the promising points of access and strategies uncovered in the literature, which include:
  - ▶ Utilizing collaborative partnerships to maximize resources and deliver interpersonal violence prevention programming in the places where students live, work, worship, and play
  - ▶ Creating effective team communication to facilitate collaboration and meet student needs
  - ▶ Using such partnerships to eliminate barriers to attending programming (e.g., providing childcare, integrating programming into existing classes)
  - ▶ Using such partnerships to maximize resources, through resource-sharing and collaborative grant-seeking
  - ▶ Continuing to leverage technology to meet students where they are and provide interpersonal violence prevention programming that transcends campus boundaries and that can be accessed at any time
  - ▶ Working with governing bodies such as the AACCC to establish a set of standards for interpersonal violence prevention that are specific to the community college context.

Although the number of studies reviewed is limited, with only a handful of articles explicitly focusing on interpersonal violence prevention, the articles consulted for this review do shed some light on promising practices for prevention. These practices include using collaborative partnerships to leverage resources and meet student needs, using online platforms and classrooms as dissemination points, ensuring the campus is aware of policies that address interpersonal violence, and providing professional training to staff. Below, we explore each of these practices at greater length.

## Collaborative Partnerships

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Throughout the literature reviewed, collaborative partnerships were identified as a promising solution for maximizing resources and meeting community college students where they are. Such collaborative partnerships include greater communication and partnership with nearby four-year colleges as well as collaboration with community-based organizations. Given that community colleges already excel at using collaborative partnerships to leverage resources, we believe that community colleges are well poised to apply their expertise to violence prevention.

In their 2017 literature reviews, both Lee and Eddy discussed the importance of a team approach in fulfilling Title IX and Clery Act requirements. Lee (2017) concludes:

*A team approach to effectively and efficiently enforce the act remains critical. First, interinstitutional communication is required given how much students swirl enrollment among colleges. A student infraction at one college may not be documented upon enrollment in a new college. Second, intra-institutional coordination is required to support the work of multiple offices charged with protecting the well-being of students against gender violence.*

The cross-cutting theme of Lee's recommendation is communication—both internal and external. This suggests that creating clear channels of communication may be a necessary step in fostering collaborative partnerships. Eddy (2017) echoes this recommendation, noting that community colleges should “leverage programming with community partners and other educational institutions to provide needed services at a lower cost.” She suggests that by leveraging resources in this way, colleges may ease cost burdens, expand their network, and plant the seeds for future collaborative projects. Thus, an early step in violence prevention planning should be identifying community and institutional partners, executing MOUs or other agreements, and creating a clear communications protocol to ensure that all collaborators are on the same page.

Eisenberg et al., (2012) surveyed students at five Minnesota colleges and asked them to lead her staff to sexual health resources on their campuses in “go-along interviews.” Unlike students at traditional colleges, who often identified university health clinics as a source of sexual health information, the community college students interviewed were more likely to mention referrals to community resources as their mechanism for retrieving this information. The authors note: “Several students commented that their college was helpful in referring them to off-campus resources and named a knowledgeable individual who was instrumental in directing them to other services.” Community college students surveyed commonly expressed that providing health services was unfeasible for community colleges and expressed satisfaction with referrals to community clinics and organizations. They recommended that rather than having a health services office, community colleges should widely publicize

community resources through a variety of communication channels (Eisenberg, Garcia, Frerich, Lechner, & Lust, 2012). Habel et al., (2017) underscored the importance of referral systems like the ones that students spoke of in the study above. The authors suggest that relying on local experts to deliver programming may be a promising practice. The authors further note: "Colleges may need technical assistance developing memoranda of agreement or understanding with such partners" (Habel et al., 2017). Community colleges may also use this strategy for violence prevention and response, partnering with local violence prevention and intervention organizations to deliver prevention programming and help students who have been hurt.

Investigators focused on alcohol and other drugs programming also commented on the importance of collaborations in promoting healthy substance use. Blowers (2009) recommended that community colleges partner with others to promote health using the American College Health Association's Standards of Practice. The author (2009) contends that "Change is never accomplished by a single source and it remains clear that invoking a shared responsibility is a powerful means of meeting mutual challenges." Blowers (2009) also speculates that partnerships enable community colleges to secure a greater amount of grant funds and have broader reach into the community.

Similar to this, in their survey of community college administrators, Chiauzzi et al., (2011) found that community colleges with dedicated funding or staffing for alcohol and other drug abuse prevention report a greater number of collaborations. They suggest that "campus-community coalitions may be a place for growth as student enrollment continues to increase." Indeed, devoting resources to staff time would enable community colleges to foster relationships with key stakeholders and possible collaborators.

In their secondary analysis of the Core Alcohol and Other Drugs Survey, Wall et al., (2012) highlighted the importance of tailoring interventions and utilizing community-level interventions rather than those created for traditional four-year colleges (Task Force on the National Advisory Council on Alcohol Abuse and Alcoholism, 2002). Wall et al. (2012) suggest: "At this level, community colleges can cooperatively engage with their community and surrounding institutions of higher education to visibly and actively intervene with off-campus locations where community college students may be most at risk of heavy consumption." They further note that community-level interventions might be particularly effective when community colleges participate in community coalitions, and that such collaborations may expand resources for everyone involved (Wall et al., 2012). Given that community colleges are expert collaborators, we anticipate that they can harness their expertise to deepen the scope and reach of their prevention programming.

Other articles reviewed highlighted effective characteristics and promising practices of programs targeting a wide variety of public health issues. Mrad et al., (2014) profiled a community college in the Ozarks that partnered with a nearby psychology

training program to provide mental health services to their students. The resulting collaborative partnership met student mental health needs and enhanced the preparation of students enrolled in the training program. Floyd (2003) profiled a community college in Appalachia that partnered with a local health system to initiate and staff a student health clinic. The clinic was fully sustainable soon after its inception. The collaboration led the authors to conclude that “Only by engaging partners does a community college increase the probability of funding support from foundations, state and federal legislative bodies, private gifts, and contracts from the private sector.” Both articles highlight the tendency of collaborations to extend resources, expand reach, and promote continued financial sustainability over time.

Similarly, in their profiles of successful welfare-to-work programs at community colleges, Higgins et al., (2001) and Melendez et al., (2004) underscore the importance of internal and external partnerships in making such efforts successful. Higgins et al., (2001) found that partnerships enabled community colleges to provide childcare, extend program hours, and more effectively case manage program participants. Moreover, Melendez et al., (2004) noted that “partnerships with community-based organizations and local service agencies can play a pivotal role in sustaining programs serving disadvantaged populations.” They suggest that campuses create advisory boards to adapt programming and foster additional beneficial partnerships.

## **Online**

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Given the fact that the majority of community college students are commuters and workers who spend little time on campus outside of the classroom, several of the articles reviewed suggested that online interventions may be a promising vehicle for promoting student health. When piloting and studying the feasibility of an online health promotion program, Donovan et al., (2012) found that community college students spend little time on campus and typically find out about health services through flyers and posters on campus or by simply searching online. The practitioners they interviewed to inform the creation of an online prevention training reported that they are often successful in reaching students online. In addition, after reviewing their online training prototype, “students reported that they would be interested in using an online health program, that it would be relevant to their needs, and that it would be easy to regularly access the program.” Thus, they conclude that online interventions may eliminate some of the practical barriers that community colleges face when offering health education to students (Donovan, Chiauzzi, et al., 2012).

Ramson (2006) combined an online course with a classroom-based multimedia workshop to prevent sexual harassment at a community college. Although their methods were not rigorous enough to verify its effectiveness, they note that the program was “suited to the college’s education, budget, and legal parameters.” The authors also tout the flexibility that such programs offer, allowing students to peruse content at a time that works best for them.

Using online platforms to deliver content is becoming a common practice among educators. For example, Ottenritter (2002) found that community college professionals who completed the National Survey on College Health commonly reported that college operations and teaching are becoming more technology dependent and for this reason, they suggested using technology to reach students—chat rooms, websites, email messages, online syllabi, and distance learning courses. In his update about alcohol and other drug prevention, DeJong (2006) identifies community colleges as leaders in creating online education programs and suggests that their strength in this area is a facilitator for creating prevention programming using online course platforms.

Wall et al., (2012) suggests that tailored strategies “must be developed with an appreciation of the fact that community college students (in contrast to students at 4-year colleges) are more likely to commute to school, work, and come from a more diverse ethnic or socioeconomic background.” They recommend that community colleges employ strategies using computer-based technologies so that students can access them at any time and suggest that this may be more effective than only targeting students on campus. They suggest using social marketing, messages on campus computers, and web-based education modules to promote healthy consumption of alcohol and other drugs (Wall et al., 2012).

Although the studies cited here focus on general health and wellness or alcohol and other drugs, their results suggest that utilizing online platforms to deliver interpersonal violence prevention may be a promising practice for community colleges to employ.

## **Policy**

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A number of the sources reviewed highlighted the importance of campus policies and procedures in setting norms and preventing harmful behavior (Crumb et al., 2017; Lugg, 2000; Ottenritter, 2002). The consensus across articles reviewed was that policies must be widely shared in order to be effective. For example, Ramson (2006) noted that policy is an essential foundation for prevention, but that “...if policies and procedures are not effectively broadcast, they remain ineffectual.” With regard to consumption of alcohol and other drugs, Wall et al., (2012) similarly noted that “students who know about policy and programs within an institution are less likely to consume heavily and experience harm.” Blowers (2009) echoed this, concluding that policies are strong predictors of campus environments. This suggests that making students, faculty, staff, and administrators aware of policies and programming may be an important foundational step in reducing harm on community college campuses.

In a literature review about sexual health promotion, Habel et al., (2017) noted that few community colleges are members of the American College Health Association, perhaps because associations like this cater to traditional, four-year colleges. Thus, the authors recommend that “a minimum set of standards for appropriate and

quality sexual health services could be created to guide 2-year colleges” (Habel et al., 2017). Although the authors were broadly focused on sexual health promotion, their conclusions may apply to interpersonal violence prevention as well. Indeed, governing bodies such as the AACCC may want to consider creating a set of standards for interpersonal violence prevention that are specific to the community college context.

## **Classrooms**

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Due to the fact that most community college students do not spend a great deal of time on campus, several investigators suggested that the classroom may be an appropriate venue to disseminate public health-related information.

Ottenritter (2002) found that community college professionals who responded to the National Study on College Health stated that they distribute sexual health information through a variety of channels, including posters, flyers, personal counseling, special programs, health centers, newspapers, new student orientation, and both credit and non-credit courses. They also observed that community colleges routinely host health fairs, special presentations, and student life activities despite the fact that the majority of students do not attend. Thus, the authors concluded that one of the most effective ways to reach community college students is through the classroom itself. They further suggest that service learning opportunities may be especially promising. They suggest that community colleges involve students and faculty in creating for-credit curriculum-based service-learning opportunities to educate students about important health issues. This way, students learn about health topics as they contribute service and obtain course credit necessary for graduating or transferring to a traditional college or university (Ottenritter, 2002).

Investigators focused on student use of alcohol and other drugs have also identified the classroom as a promising venue for health education. Sheffield et al., (2005) suggests that faculty consider how to incorporate health-related information into their curriculum, where possible. They also suggest that administrators should consider including prevention programming within their student orientation curriculum or basic life skills training courses. In addition to these classroom-specific suggestions, the authors also suggest that community colleges conduct outreach in high traffic areas such as food courts, hallways, and libraries where students commonly gather between classes. Chiauzzi et al., (2011) noted that, “Most students spend less than 7 hours a week on campus outside of classes,” and suggested that offering programs in centralized locations such as the classroom may be most appropriate.

## **Professional Training for Faculty, Staff, and Administrators**

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A handful of the articles reviewed discussed the importance of training community college faculty, staff and administrators. Investigators commonly noted the influence that this population has on the campus climate and suggested that garnering buy-in is crucial to the success of prevention programming.

Flannery and Quinn-Leering (2000) discussed the fact that faculty and staff are in the best position to observe student behavior. Because students often only come to campus to attend class, faculty are often in a unique position to recognize changes in behavior and intervene. Thus, they argue that it is important for faculty and staff to be prepared to identify students who may act in a violent or aggressive manner. Edman et al. (2016) echo this recommendation, suggesting that faculty and staff may be especially well poised to identify trauma and intervene. Engaging faculty and staff was a major theme of the focus groups and key informant interviews that we conducted with community college personnel, suggesting that existing campus grantees are well-poised to partner with faculty to integrate interpersonal violence prevention within the classroom setting.

Lugg (2000) and Ramson (2006) placed greater focus on the role that community college leaders play in setting standards for the entire campus community. They suggest that with limited resources, community colleges should focus on this most influential group. Katz and Davidson (2014) also underscored the influence of administrators in meeting the mental health needs of students. Often, administrator buy-in opens doors to partnerships.

Chiauszi et al., (2011) linked administrator buy-in to the acquisition of dedicated staff to provide alcohol and drug abuse prevention programming. They noted that, "Respondents at colleges with a staff person designated for alcohol or drug prevention reported implementing significantly more health programs, including health clinic programs, volunteer activities, speaking to campus groups, staff training, health awareness programming, counseling programs, and support and intervention services, compared to respondents at colleges without designated prevention staff." Such increases in program provision indicate the importance of college administrations that value the health and welfare of its students and that back up that value with resource provision such as dedicated staffing.

## **Social Norms Campaigns**

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As stated earlier, the articles reviewed offered mixed reviews of social and peer norms campaigns to alter student behavior. Chiauzzi et al., (2011) found that community college students were more likely to identify as workers than as students and suggested that traditional peer norms campaigns may not be effective to reduce alcohol and drug consumption. Sheffield et al., (2005) reiterated this conclusion in their student survey of student alcohol and drug use.

Donovan et al., (2012) also expressed concerns about social norms interventions in their pilot study of an online program to reduce sexual violence and promote student health. They stated:

*Social norms interventions are based on the assumption that students identify with other students, and they may have misperceptions about other*

*students' behavior. However, two factors should be considered when creating these types of interventions for community college students. First, community college students are typically less integrated into the campus community than four-year college students; they may, therefore, have less identification with other students simply because they are seldom on campus at the same time. Second, there is more diversity amongst community college students, so students may identify with some students (e.g., students of the same age), but not others. When we asked students who they most identified with, they endorsed a range of groups.*

For this reason, the authors call for further research to determine how to create social norms campaigns for this population (Donovan, Hernandez, et al., 2012). It may be that community college students identify more with other adults in their communities rather than those with which they attend classes.

**Implication #4: Use the promising points of access and strategies identified in this review to plan, implement, and/or improve intimate partner violence prevention efforts.**

**THEME #4 IMPLICATIONS IN BRIEF:**

- In addition to using collaborative partnerships to leverage resources and meeting interpersonal violence prevention needs, community college prevention practitioners should consider using the promising points of access identified in this literature review:
  - ▶ Using classrooms as dissemination points (providing faculty and staff training about interpersonal violence prevention may be a preliminary preparatory step)
  - ▶ Using online platforms as dissemination points
  - ▶ Hosting programming in the community setting, and providing childcare or complimentary youth programming

Although our source material was limited in number and scope, the literature reviewed suggest possible points of access and strategies for reaching community college students. These include using collaborative partnerships to leverage resources and meet student needs, using online platforms and classrooms as dissemination points, ensuring the campus is aware of policies that address interpersonal violence, providing professional training to staff, and evaluating programming to contribute to the knowledge base.

Almost all of these strategies have already been explored within the implications section of this report, with the exception of using online platforms and classrooms as dissemination points. Because online platforms are commonly used to teach

course material and orient community college students to campus, we recommend that community college prevention practitioners utilize such platforms to share interpersonal violence prevention tips, resources, and policy information. Because students reliably come to campus for classes, we recommend that community college prevention practitioners reach out to faculty to explore how violence prevention programming might be embedded in existing course content. OVW Campus TA Providers could aid community college practitioners in doing this by providing suggested online and classroom content that practitioners who wear multiple hats can easily integrate into existing platforms and lesson plans.

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## ACCOMPANYING TOOLKIT

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Both the key themes and associated implications for practice echo some of the key considerations that community college leaders and administrators have already identified. For example, in their *21<sup>st</sup> Century Report*, the AACC outlines their roadmap for reclaiming the American dream. The authors note:

*The report emphasized several dozen issues, including the need to reexamine the role, scope, and mission of the community college; the existence of an 'achievement gap' and need for 'scalable proven practices' to respond; the use of data metrics emphasizing transparency, inclusion, and accountability; and the need for strategic partnerships with the business world, local communities, and K–12 and baccalaureate institutions (AACC, 2012).*

Although the report focuses on improving student retention and academic success, the same observation applies to interpersonal violence prevention within the community college context.

We, too, argue that community colleges leaders need to re-examine their role, scope, and mission to include interpersonal violence prevention. Moreover, the themes and implications we discuss in this report, support the use of scalable proven prevention practices, the use of data metrics to evaluate prevention program processes and outcomes, and a need for strategic partnerships to increase community colleges' capacity to prevent acts of harm before they occur. Although the end goal of preventing interpersonal violence differs from the goal of increasing student retention and academic success, we think it is complimentary. Simply stated, we believe that preventing interpersonal violence among community college students may have a positive impact on retention and success. By applying the same methods to this issue, we hope that prevention practitioners at community colleges may raise the importance of interpersonal violence prevention to leaders in charge of strategically planning future priorities.

To this end, we have provided a companion toolkit to this review. The toolkit has been adapted from a community-based planning framework created by the Association for Community Health Improvement (<http://www.healthycommunities.org/Resources/toolkit.shtml#.WhTnqLaZM0o>). Although the toolkit was originally created to help communities assess traditional health issues, we have applied the model to interpersonal violence prevention. The resulting toolkit contains nine planning steps and accompanying tools that community colleges can use to plan, implement, and evaluate prevention programming on their campuses. The steps and tools can be followed and used in order, or as they are relevant for each campus. By providing community college prevention practitioners with tools, we hope that they will increase their capacity to meet federal and grant requirements and reduce rates of interpersonal violence among their students.

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## LIMITATIONS

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*One of the key findings of this review is that there is a scarcity of research about community colleges themselves as well as interpersonal violence prevention efforts and health promotion within this setting. The results, key themes, and implications reported in this literature review are thus based on a limited body of research and must be interpreted with caution. Only a handful of reviewed articles focused on interpersonal violence. Many of the scientific articles reviewed employed small sample sizes and non-statistical sampling, making interpretations of causality and generalizability limited. The remaining articles reviewed were narratives or literature reviews that are subject to authors' biases. Furthermore, our decision to include articles focused on health promotion efforts such as preventing abuse of alcohol and other drugs or promoting sexual health further limits the strength of our findings. Although best practices from these fields may have relevance for interpersonal violence prevention, this is a topical leap. As prevention practitioners apply best practices from these fields to interpersonal violence prevention, we recommend that they evaluate their efforts and share their findings so that we may uncover a set of prevention best practices specifically for interpersonal violence prevention in the community college context.*

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