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## VOICE: Exploring the Experiences of University Students who have Experienced Gender-Based Violence

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A thesis submitted in partial fulfillment of the requirements for the Master of Science degree in Health Promotion

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## Abstract

**Introduction:** The occurrence and severity of gender-based violence (GBV) on Canadian higher education campuses has been a concern for decades. In September 2021, there were multiple reports of GBV at several Canadian universities with Western University being an exceptional case. The goal of this study was to explore: (1) the experiences of students who have experienced GBV during their enrollment at Western University; (2) the impact of GBV on students' academics; and (3) student knowledge and experience with GBV resources.

**Methods:** This cross-sectional, qualitative study used an interpretive description framework and dialogue maps, underpinned by intersectionality. Seventeen undergraduate students were interviewed using a semi-structured interview guide.

**Results:** Undergraduate students struggled to label their experiences as GBV and were unable to avoid contact with their perpetrator, as they both were required on campus. Students identified both short-term and long-term academic consequences of GBV including falling behind academically and needing to rethink future academic goals. Students reported engaging with formal and informal resources following their GBV experience with the most common barriers being related to accessibility and facilitators being related to acceptability of the resource.

**Conclusion:** Students face unique challenges when experiences of GBV occur in the University setting, particularly related to academics and knowledge of available resources. It is important that GBV services and Universities ensure resources are visible, accessible, and acceptable to students.

## Keywords

Gender-based violence, GBV, university students, undergraduates, campus, academics, resources, help-seeking, Canada

## Summary for Lay Audience

Gender-based violence (GBV) occurring on Canadian higher education campuses has been a concern for decades. In September 2021, many Canadian universities reported several GBV cases, with Western University being an exceptional case. On March 2, 2022, the university student council at Western University said that the campus has a gender-based and sexual violence crisis. The goal of this study was to explore: (1) the experiences of students who have experienced GBV while at Western University; (2) the impact of GBV on students' school life; and (3) the knowledge and experience that students have with GBV resources.

Seventeen undergraduate students were individually interviewed. The transcripts were analyzed to determine common themes. Close attention was paid to the identities of the students as they may overlap and affect their post-GBV experience.

Undergraduate students had a difficult time labelling their experiences as GBV and were at risk of coming face to face with their abuser. This is because both were usually students on campus and needed to be present to complete their education. Students experienced short-term and long-term academic impacts like falling behind in school and this caused them to rethink their academic goals. After experiencing GBV, students reached out to resources at their university and in the community, as well as to their friends and family. The majority of students said that lack of accessibility could prevent them from using a resource and the acceptability of a resource could motivate them to use it.

Students face unique challenges when they experience GBV in their school setting. This is particularly true for their academics and knowledge of available resources. It is important that GBV services and Universities ensure GBV resources are visible, accessible, and acceptable to students.

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## Dedication

To my Dada ji, Avtar Singh Nagra, I wish you were still here. I truly believe you would have had a lovely life here in Canada. I think about you often and I miss you every day. You are one of the most kind, thoughtful, and level-headed individuals. I cherish my memories with you.

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May both of you continue to rest in peace.



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## Chapter 1

### 1 Introduction

Gender-based violence (GBV) is rooted in harmful norms and power dynamics, and is any act of violence perpetrated because of someone's gender identity (World Health Organization, 2021a). Gender-based violence includes several forms of abuse, such as physical, sexual, psychological, and/or financial abuse (World Health Organization, 2021a). Analyzing violence from an intersectional framework promotes the recognition of intersecting identities and patterns between different structures of power, as well as the nuances of how GBV affects different groups of people. Gender-based violence is both a human rights and public health issue, which contributes to inequalities in health (Cotter & Savage, 2019; World Health Organization, 2021b).

The 2018 survey by Statistics Canada identified that young adults aged 15 to 24 years experienced the highest rates of intimate partner violence (IPV), the most common form of GBV, when compared to any other age cohort (Cotter, 2021). Within this age cohort, it has been established that post-secondary students (ages 18 to 24 years) experienced higher rates of IPV exposure compared to high school students (Desmarais et al., 2012; Smith et al., 2017). The 116,627 university students who participated in the Student's Voices on Sexual Violence survey in Ontario, reported a high prevalence of sexual violence within post-secondary universities (CCI Research, 2019). Of the university students who responded, 63% disclosed they had been sexually harassed, and 23% disclosed they had experienced a non-consensual sexual experience since the beginning of their academic year (CCI Research, 2019).

Reducing the prevalence rates and increasing support for students who experience GBV on Canadian higher education campuses has been a concern for decades. In 2016, several Canadian provincial governments, including Ontario, passed legislation mandating all post-secondary institutions (PSI; which includes colleges, universities, CEGEP, trade schools) establish sexual violence policies (Possibility Seeds, n.d.). Despite this mandate, GBV continues to occur at alarming rates at PSI (Coulter & Rankin, 2020; Jozkowski &

Wiersma-Mosley, 2017). Further, in September 2021, there were multiple reports of GBV occurring at several Canadian universities, especially at Western University (Arender & Richmond, 2021; Patton, 2021; Ross, 2021). In April 2022, Western University's Action Committee on Gender-Based and Sexual Violence (GBSV), submitted a report with key recommendations for preventing and responding to GBSV. The committee conducted a campus climate survey where one third of participants reported having witnessed or experienced GBV on campus in the past year as well as 1 in 5 undergraduates and 1 in 10 graduate/professional/post-doctoral students reported feeling unsafe on campus (Western University Action Committee on Gender-Based and Sexual Violence, 2022).

The occurrence of GBV on university campuses and as experienced by university students is an ongoing problem that has multilayered consequences for students including changes in health, wellbeing, and social involvement (Rothman et al., 2021). Unique to students who have experienced GBV is the impact on their academics which includes a decline in overall grades as well as a loss of engagement in school and their studies (Brewer et al., 2018; Mengo & Black, 2016; Schrag et al., 2020; Stermac et al., 2020). A mediating effect on the negative consequences associated with experiencing GBV includes both formal and informal resources (Cho & Huang, 2017; DeLoveh & Cattaneo, 2017; Próspero & Vohra-Gupta, 2008; Son et al., 2020). However, barriers to seek help for students who experience GBV include logistics, feelings of guilt, accessibility, being worried about judgement, and the acceptability of resources (DeLoveh & Cattaneo, 2017; Holland & Cortina, 2017; Son et al., 2020; Wood & Stichman, 2018). Notably, further research is required on how students navigate their life after experiencing GBV, including their academics, help-seeking behaviours and attitudes, as well as any changes in how they interact and position themselves in their university community.

## Chapter 2

### 2 Literature Review

#### 2.1 Gender-Based Violence

Gender-based violence refers to any harmful acts directed at an individual on the basis of their gender and has roots in gender inequality, the abuse of power, and harmful norms (United Nations High Commissioner for Refugees, n.d.). Gender-based violence encompasses several forms of abuse, with the most common being IPV (World Health Organization, 2021a). Intimate partner violence can be understood as a pattern of physical, sexual, and/or emotional abuse perpetrated by an intimate partner in the context of coercive control (Tjaden & Thoennes, 2000; United Nations High Commissioner for Refugees, n.d.). Intimate partner violence occurs at staggering rates in every country with global prevalence estimates of lifetime IPV ranging from 20% to 33% (Pandea et al., 2019; Unicef, 2021; World Health Organization, 2021a). In Canada, estimates of IPV are in fact higher than the global prevalence estimate with more than 44% of women and 36% of men experiencing IPV in their lifetime (Cotter, 2021). For many individuals, first exposure to physical and/or sexual violence occurs prior to 25 years of age with approximately 20% of adults reported experiencing abuse by two partners since the age of fifteen (Cotter, 2021; Smith et al., 2017). Gender-based violence is a violation of human rights that impacts many people the world over (Cotter & Savage, 2019).

#### 2.2 Prevalence of GBV in Post-Secondary Institutions

The 2018 Statistics Canada Survey of Safety in Public and Private Spaces on GBV and unwanted sexual behaviour in Canada reported IPV rates were highest among young adults aged 15 to 24 years (Cotter, 2021). Within this age cohort, it has been established that post-secondary students (ages 18 to 24 years) experienced higher rates of IPV exposure compared to high school students (Desmarais et al., 2012; Smith et al., 2017). In 1993, Dekeseredy and Kelly gathered Canadian incidence and prevalence data on the abuse women experienced in university and college dating relationships. Thirty years later, this landmark study is the only incidence and prevalence data of this type, with 78% of women indicating they had experienced psychological abuse, 40% experienced sexual

abuse, and 32% had been physically abused. Since the 1993 study, there have been several studies conducted with Canadian university students, which have collected information on the incidence and prevalence of other forms of GBV. Specifically, studies have captured incidence and prevalence rates of sexual violence, cyber-violence, sexual victimization, sexual assault, harassment, and digital dating abuse (Brownridge, 2006; Colpitts, 2022; Daigle et al., 2019; Dion et al., 2022; Eadie et al., 2008; Phillips & Klest, 2022; Snaychuk & O'Neill, 2020). In a study examining intimate partner sexual violence (IPSV), Jeffrey and Barata (2021) examined women's self-reported IPSV incidence rates (33%) and men's IPSV perpetration incidence rates (16%) in heterosexual relationships. Moreover, a study by Champion and colleagues (2022) examined the frequency of sexual assault among women, with 58% of the 377 women who experienced violence attending one of three large Western Canadian universities. It is important to note that there is a limited number of Canadian studies exploring forms of GBV other than IPV; however, the literature available about IPV (and similar terms such as dating abuse) is more extensive in both published and grey literature. Furthermore, a common critique for the work in this field is a lack of inclusion of gender diverse participants, and lack of nuanced examination of experiences on the continuum of violence (e.g., technology-related violence, sexual violence, intimate partner violence, harassment).

## 2.3 Continuum of Violence and Intersectionality

The concept of the continuum of sexual violence was first developed by Liz Kelly (1987) to highlight women's exposure to violence in several domains of life (private, public, professional), the inter-relationships between different forms of violence, and to challenge the notion of a hierarchy of sexual offences. According to Kelly (1987), this continuum can be understood in two ways: (1) as a continuous series of events that overall intersect, sometimes substitute for one another, and cannot be easily distinguished; and (2) as identifiable common characteristics that underpin and connect forms of violence that might otherwise be seen as separate phenomena. Identifying common characteristics between types of violence is crucial to finding and understanding the appropriate names to describe experiences of violence (Kelly, 1987). The concept of the continuum of violence remains open to development, and Kelly and Gill (2012)

recognized the necessity for the inclusion of an intersectional analysis. Intersectional analysis explores intersecting patterns between different structures of power and how people are simultaneously positioned—and position themselves—in multiple categories, such as gender, class, and race/ethnicity (Phoenix & Pattynama, 2006). It is common for research, policy, and practice to categorize and explore forms of GBV in distinct silos; however, it is imperative to recognize the commonalities and differences with regards to the function, impact, and consequences of GBV.

## 2.4 Period of Emerging Adulthood

There is a need to focus on GBV during post-secondary education as this is both an important time of interpersonal growth and the post-secondary context has several risk factors for GBV. During post-secondary education many people develop intimate friendships and romantic relationships, which helps to set the foundation for later relationships and interpersonal behaviours (Fielder & Carey, 2010; Khalifian et al., 2019). Researchers have noted that during post-secondary education, students are actively developing the skills needed for healthy relationships including emotional regulation, communication skills, assertiveness, problem-solving, and conflict management (Fielder & Carey, 2010; Khalifian et al., 2019). Dating and romantic relationships during adolescence or high school-aged youth are usually brief and tentative, but relationships that develop during this timeframe of emerging adulthood, from the late teens to the early twenties (Arnett, 2000), typically focus on deeper aspects of emotional and physical intimacy (Khalifian et al., 2019). This period of emerging adulthood provides new and expanded opportunities to understand GBV, dating abuse, and relationship experiences, as well as a larger appreciation for the complexity of romantic relationships that may not have existed for younger age cohorts (Khalifian et al., 2019).

Within the post-secondary context several IPV risk factors are present. An IPV risk factor increases the likelihood of an individual experiencing or perpetrating IPV (Centers for Disease Control and Prevention, 2021). While risk factors are not direct causes of experiencing and/or perpetrating IPV, they can contribute to an increased chance of exposure (Hutchins, 2015). IPV risk factors in the post-secondary context include risky sexual behavior, alcohol and substance use, stress, high-risk contexts (i.e.,

intergenerational violence, Greek-life/fraternities/sororities, athletic teams), relationship problems, and poor communication (Dardis et al., 2015; Duval et al., 2020; Niolon et al., 2017; Shorey et al., 2011). While IPV risk factors likely overlap with GBV risk factors, more information is required to better understand the GBV risk factors and how these heightened risks have evolved and impacted several spheres (public, professional, private) in a students' life.

## 2.5 GBV Consequences Among University Students

Gender-based violence, especially IPV, is a pervasive public health concern and the consequences of IPV on health and academics has been well established (Black et al., 2011; Brewer et al., 2018; Devries et al., 2013; Mengo & Black, 2016; Schrag et al., 2020; Stermac et al., 2020; Tremblay et al., 2008; Voth Schrag & Edmond, 2017; World Health Organization, 2021a, 2021b). When IPV is experienced during university, there are a myriad of associated health consequences including worsened physical (e.g., injury to sexual transmitted infections, chronic pain, migraines), mental (e.g., depression, anxiety, PTSD), and financial health problems (e.g., risk of job loss due to employment disruption, cognitive distraction at work) (Black et al., 2011; Devries et al., 2013; Mengo & Black, 2016; Voth Schrag & Edmond, 2017). In a quantitative study of American undergraduates, the relationship between IPV and academic performance was found to be mediated by health issues; as IPV increased the risk of health problems, there was an increased risk of poor academic performance (Brewer et al., 2018). This link between IPV and more broadly GBV, health, and academics further exacerbates the already established public health concern that is GBV, making it important to understand the extent of the layered consequences of GBV for university students while considering the continuum of violence.

### 2.5.1 Academic Disengagement and Performance

Academic disengagement is the level to which students are 'connected' to what is happening in their classes and includes being late for, or missing class, attending class intoxicated, and turning assignments in late (Franklin et al., 1996; Schrag et al., 2020). In the Canadian context, there are two studies in Ontario where researchers examined the

exposure of abuse and violence during postsecondary studies and the impact of academic performance. Tremblay and colleagues (2008) investigated Canadian university and college students' interpersonal conflicts and exposure to abuse and violence during their postsecondary studies and assessed the emotional, social, and academic impact of those experiences among a sample of 1174 undergraduate and graduate students using an online questionnaire with closed-and open-ended questions. Incidences of violence (i.e., sexual assault) were not a primary focus of this study but the researchers found that students reported a moderate negative impact on their academic work and that all incidences of sexual abuse and violence were only reported by students who identified as women. More recently, Stermac and colleagues (2020) conducted an online survey among 934 female-identifying undergraduate students using an abbreviated revised sexual experiences survey and self-reported grade point average. The researchers reported sexual violence was associated with women's deteriorating academic performances. Specifically, women who experienced sexual violence reported they were failing assignments, courses, and exams, they were more likely to not attend class, have thoughts about dropping out, and were intoxicated in class more often than students who did not experience sexual violence. While these studies have created the foundation for understanding GBV in post-secondary education, the nuanced lived experiences of students, including gender diverse students, is largely missing.

## 2.6 GBV Experienced at Canadian Universities

Reducing the prevalence rates and increasing support for students who experience GBV on Canadian higher education campuses has been a concern for decades. In 2016, several Canadian provincial governments, including Ontario, passed legislation mandating all post-secondary institutions (PSI; which includes colleges, universities, CEGEP, trade schools) establish sexual violence policies (Possibility Seeds, n.d.). Despite this mandate, GBV continues to occur at alarming rates at PSI (Coulter & Rankin, 2020; Jozkowski & Wiersma-Mosley, 2017). According to the Ontario Student Voices on Sexual Violence Survey, 63% of Ontario university students reported one or more sexual harassment experiences since the beginning of the academic year (CCI Research, 2019). In September 2021, there were multiple reports of GBV occurring at several Canadian

universities, including Western University (Arender & Richmond, 2021; Patton, 2021; Ross, 2021). Shortly after these reports, the Ontario government directed PSI to make amendments to their current sexual violence and harassment policies by March 2022 in an effort to decrease incidence and prevalence of GBV, and increase safety at PSI (Newsroom Ontario, 2021). On March 2, 2022, Western University's student council unanimously declared gender-based and sexual violence (GBSV) a crisis on campus, urging school officials to follow their lead (Arender & Richmond, 2021; Rivers, 2022). In April 2022, Western University's Action Committee on GBSV submitted a report with key recommendations for preventing and responding to GBSV. The committee conducted a campus climate survey where one third of participants reported having witnessed or experienced GBV on campus in the past year as well as 1 in 5 undergraduates and 1 in 10 graduate/professional/post-doctoral students reported feeling unsafe on campus (Western University Action Committee on Gender-Based and Sexual Violence, 2022).

Understanding the forms of GBV that are experienced on campus and reasons for why students are feeling unsafe can provide further insight on how Western University can work to decrease incidence and prevalence rates and increase campus safety overall and in relation to GBV.

## 2.7 Help-Seeking and Service Use Patterns

Although universities provide services for individuals experiencing GBV, many students have reported not being aware of these resources. In Canada, students' perceptions, understanding, and knowledge of campus sexual assault policies and/or services has been found to be limited (CCI Research, 2019; Quinlan et al., 2016; Sabina et al., 2017; Smith & Freyd, 2014). As per the April 2022 report by Western University's Action Committee on GBSV, students were typically only aware of three out of nineteen campus and community GBV services that were listed in the Campus Climate survey. Additionally, the Action committee asked students how comfortable they felt accessing each of the 19 campus/community services listed in the survey but did not ask for reasons for accessing or not accessing a resource (Western University Action Committee on Gender-Based and Sexual Violence, 2022). Coupled with a student's comfort with a resource, it would also be important to discern their likelihood of accessing the GBV services and service



categories (i.e., on campus, off-campus, in the community, in their network). Further, Western University's annual GBV board report from 2020-2021 recognized that complaints received through the Gender-based Violence and Survivor Support Case Manager office does not reflect the full scope of student GBV experiences as students may have chosen other avenues for help (Western University, 2021). These avenues may not be considered as traditional methods of seeking help. Additionally, the GBV board reports from 2020-2021 and 2021-2022 did not specify service utilization rates for GBV beyond formal complaints and the use of the university's GBV Survivor Support Case Manager (Western University, 2021, 2022). A previous review on the disclosure of help-seeking behaviour by people who experienced IPV found that informal help-seeking (e.g., family members, friends, coworkers, neighbours) was more common than formal help-seeking sources (i.e., reporting methods, service providers, crisis lines, etc.) among university students (Sylaska & Edwards, 2014). The choice to disclose GBV may be related to the level of trust that students have in their PSI to handle their experience with violence. Marques and colleagues (2020) surveyed 250 Canadian university students who identified as women and interviewed 15 women about their knowledge and experience of sexual assault as well as their reporting practices, satisfaction with institutional supports, and perception of the campus environment. The researchers' found students were concerned about the effectiveness of university services, confidentiality, and that the university would not prioritize them over institutional interest. Receiving insight on reasons for students choosing certain help-seeking avenues and GBV services can help PSI understand why knowledge of their service offerings is low and how PSI could work to increase student awareness and access.

## 2.8 Gaps in Literature

The incidence and prevalence of specific forms of GBV (i.e., sexual violence, cyber-violence, sexual victimization, sexual assault, harassment, intimate partner sexual violence, and digital dating abuse) has been reported among female heteronormative university students in Canada (Brownridge, 2006; Champion et al., 2022; Colpitts, 2022; Daigle et al., 2019; DeKeseredy & Kelly, 1993; Dion et al., 2022; Eadie et al., 2008; Jeffrey & Barata, 2021; Phillips & Klest, 2022; Snaychuk & O'Neill, 2020). However,

gaps in the literature remain on Canadian university students' lived experiences of GBV for non-heteronormative students; the continuum of violence (e.g., technology-related violence, sexual violence, intimate partner violence, harassment); a nuanced understanding of the impact on academic performance; the accessibility and acceptability of GBV resources; and changes in how students interact and position themselves in their university community. While reducing the prevalence rates and increasing support for students who experience GBV on Canadian higher education campuses has been a concern for decades (Possibility Seeds, n.d.), there remains much work to be done.

## Chapter 3

### 3 Methods

#### 3.1 Purpose

This study was guided by the following research questions: (1) How do students at Western University make sense of their experiences with GBV; (2) How do university students at Western University describe the impact of GBV on their academics; and (3) What can be learned from Western University students about their knowledge and experience with GBV resources?

Based on these research questions, the three-fold purpose of this study was to explore the: (1) experiences of students who have experienced GBV during their enrollment at Western University; (2) impact of GBV on students' academics; and (3) student knowledge and experience with GBV resources.

#### 3.2 Study Design

This cross-sectional, qualitative study: Exploring the Experiences of UniVersity Students whO have ExperIenCed Gender-BasEd Violence (VOICE) used an interpretive description (ID) framework, dialogue maps, and was underpinned by intersectionality.

Interpretive description aimed to contextualize findings in social, cultural, historical, and political environments (Thorne, 2016). Interpretive description helps researchers generate knowledge relevant to practical contexts, guide and inform disciplinary thought, and produce tangible outcomes with the potential for application in the real world (Thorne, 2016). Interpretive description aligns to a constructivist and naturalistic inquiry approach. This practice-based framework highlights the possibility of multiple perspectives of reality and the importance of the co-construction of knowledge between researchers and participants (Thorne, 2016). It is an approach that encourages the creation of study purposes from three sources: (1) real-world questions, (2) a comprehensive review of the existing empirical evidence, and (3) the theoretical and contextual realm of the target audience (Thorne, 2016). The methodological direction of ID encourages the researcher

to explore what else the data might reveal, after considering both the accumulated knowledge and empirical evidence (Thorne, 2016). Since ID is grounded in action-oriented research, the goal of this analysis was to explore the experiences of GBV as experienced by students enrolled at Western University, and in turn identify any needed changes to practice, specifically in this case of the resources offered/needed at Western University, and in London, Ontario.

Dialogues maps were utilized in this study in conjunction with qualitative content analysis. Dialogues maps were chosen for its ability to organize the positions of each participant and the types of support they identified, help the researcher identify the similarities and differences among participant experiences, and reveal the issues and ideas that are key to help-seeking and accessing resources (Yamaguchi et al., 2018). In other words, dialogue mapping starts with a question, then ideas (answers to the question) are linked to the corresponding question using a dendritic network, and then the justifications (pros/facilitators and cons/barriers) are connected which qualify the possible answers (Conklin, 2005). The purpose of content analysis is to describe the phenomenon under study by examining what was said, to whom it was said, and to what extent (Bloor & Wood, 2006). Content analysis employs a systematic classification process to help the researchers identify codes, themes, and patterns from textual data (Hsieh & Shannon, 2005). More specifically, a summative content analysis was used to identify and interpret the contextual use of specific words (resources, barriers, and facilitators) and the overall text (Hsieh & Shannon, 2005). Along with the use of quotations from participants, the findings of the content analysis were summarized and depicted using dialogue mapping. Dialogue mapping was chosen because it distinguishes social and technical complexities so that the similarities and differences of the positions surrounding an issue become coherent (Conklin, 2005; Yamaguchi et al., 2018).

An intersectional framework (IF) was used to guide the design and analysis of this study. Intersectionality considers the range of diverse identities and differences that exist within social categories (McCall, 2005). According to Crenshaw (1992), an IF is a lens to view inequality and how different forms of inequality can exist concurrently and exacerbate one another. Intersectionality allows the researcher to examine the unique ways a

participants' various roles overlap and connect with their experiences of race, health and ability, sexual orientation, ethnicity, housing status, and other identities (Gill, 2018). Qualitative studies underpinned by intersectionality have sought to uncover and address inequity and power imbalances (Hankivsky et al., 2014). An IF was ideal as this study aimed to explore the GBV experiences among university students through the examination of the complexities of the various roles participants hold including as students, partners, individuals, and help-seekers. Intersectionality paired well with the ID methodology because it recognizes the power dynamics that exist within participants lives as well as between the "researcher" and the "researched." The methodologies of content analysis and an IF complement each other because both aim to provide a coherent and nuanced understanding of the context, dimensions, and issues in the study. Research conducted using ID, content analysis, and IF works to further contextualize a phenomenon under study, in this case the experiences of GBV within the context of being a student at Western University. Together these methodologies and theoretical framework will enable the exploration of the lived experiences of students across many social positions/locations with the goal of highlighting the differences as well as similarities between and across students (Hankivsky et al., 2014). Intersectionality also informs the implications of this study because they were applicable to the real-world and addressed any structural, cultural, and political factors that may have contributed to the inequitable experience of violence in this population (Hankivsky & Cormier, 2009).

### 3.3 Sampling, Eligibility, and Recruitment

The VOICE study received ethics approval from Western University's Non-Medical Research Ethics Board (NMREB) in February 2023 and recruitment began shortly thereafter (NMREB #122125; see Appendix A for NMREB Ethics Approval Certificate).

#### 3.3.1 Eligibility Criteria

Eligibility criteria included: (a) had experienced GBV while enrolled at Western University; (b) currently enrolled as a full-time student (undergraduate or graduate) at Western University; (c) at least 18 years old; (d) the ability to speak/read English; and (e) willing to be audio-recorded during an interview. All eligibility questions were asked as

yes/no questions. The inclusion of undergraduate and graduate students was selected because there was evidence that both groups of students have experienced GBV. Western University was selected as the Canadian campus for this study as over the last few years there have been multiple reports of GBV, an Action Committee on GBSV was formed, and the institution's student council unanimously declared gender-based and sexual violence a crisis on campus on March 2, 2022 (Arender & Richmond, 2021; Rivers, 2022; Western University Action Committee on Gender-Based and Sexual Violence, 2022). Participation was limited to those who were over 18 years of age, due to reporting obligations of minors as put forth by ethics. Interviews were audio-recorded and transcribed verbatim, for analysis purposes. If a participant answered "no" to any of the eligibility questions, they were excluded from the study. There were no additional exclusion criteria for this study.

### 3.3.2 Sampling and Recruitment

Purposeful sampling was used to identify participants who have experienced the phenomenon of interest, namely GBV (Palinkas et al., 2015; Patton, 2015). Of the 16 strategies under the broad umbrella of purposeful sampling, criterion and snowball sampling were implemented (Patton, 2015) to recruit 17 undergraduate students enrolled at Western University. Criterion sampling involved interviewing all the participants who met the stated eligibility criteria (Patton, 2015). Snowball sampling was a recruitment strategy where the research team requested the participants to share the information about the study with other eligible participants (Patton, 2015). To determine an adequate sample size for this study, the researcher examined qualitative ID studies that investigated the experiences of students more generally and other populations who had experienced GBV and found sample sizes ranging between 10-27 participants (Burd et al., 2022; Garipey, 2021; Lapum et al., 2022; Mantler, Burd, et al., 2022; Ryan & McAllister, 2019).

Recruitment occurred over 8 weeks (late February 2023 to early April 2023) and employed a wide range of recruitment strategies including the following: (1) Western-affiliated social media postings on accounts and platforms relevant to undergraduate and graduate students (such as faculty-specific and student school clubs); (2) postings on

social media using the personal and professional accounts of the research team; (3) contacting Western-affiliated and London-affiliated GBV groups and services; and (4) contacting Professors to ask if they would share the recruitment information on their OWL course pages (see Appendix B for recruitment poster; see Appendix C for the request to upload the recruitment poster on OWL; see Appendix D for the summary of recruitment outreach).

### 3.3.3 Recruitment Challenges

The intended sample size for the VOICE study was between 10-27 participants, with the goal of including a minimum of 10 full-time undergraduate students and 5 full-time graduate students. The difference in recruitment numbers of undergraduate to graduate students was determined based on the host institution's enrollment, such that the number of undergraduate students was higher than graduate students (25,991 verses 6100, respectively; Western University Office of Institutional Planning & Budgeting, 2021). It would have been ideal to recruit a ratio of undergraduate and graduate students that was reflective of the host institution's enrollment numbers; however, the research team was unable to recruit graduate students for this study. This was likely partly due to the sensitive nature of the topic under investigation. Another reason for a lack of engagement from the graduate student population is because the MSc researcher is a fellow peer and graduate student. The main recruitment method to target graduate students was to contact the graduate social groups and extracurricular clubs. There was an overwhelmingly positive response from the undergraduate student population and the research team interviewed anyone who expressed interest in the study and met the eligibility criteria.

#### 3.3.3.1 Ineligible Participants

Recruitment challenges arose wherein ineligible individuals were expressing interest in the study and purposefully misleading the research team in terms of their enrollment at Western University and/or experiences of GBV. Ineligible individuals were able to do this as the eligibility criteria was listed on the recruitment advertisements, so individuals were aware of which information needed to be altered to meet the criteria. We were able to ascertain that ineligible individuals were misrepresenting their information as

individuals would answer “no” to an eligibility question, but then, using the same IP address, completed the Qualtrics survey 3-6 times with different answers until they were able to submit one completed response that made them eligible for the study.

### 3.3.3.2 Bots

In addition to individuals falsifying their personal information to fit the eligibility criteria for this study, the survey would receive 20-50 nearly identical responses per day, minutes part, sometimes in the middle of the night, from fake email addresses that were formatted in a similar manner (firstnamelastname#####@gmail.com). These bots used the same IP addresses to complete these mass responses, but unlike the ineligible participants, the bots only had eligible and complete responses. This continuous influx of responses made it difficult to parse out which participants were legitimate verses which were ineligible individuals/research bots. The research team did not follow up on responses that were clearly ineligible or were from bots. When it was unclear if the response was legitimate, the research team reached out, and the email either bounced back or no response was received from the individual when asked to schedule an interview. These repeated survey responses by ineligible participants and bots may have occurred because this study offered an honorarium for partaking in the interview.

## 3.4 Procedures

After seeing recruitment posters or being told about the study by another study participant, students could express their interest in the study in two ways: (1) contact the research team via email or (2) fill out the Qualtrics survey (see Appendix E for the Qualtrics survey). Both options, direct contact via email or filling out a survey, were provided so that participants could choose the option that felt the safest and easiest for them. Participants who emailed the research team directly were screened for eligibility (see Appendix F for eligibility screening email), provided the letter of information for the study if it was safe for them to receive the letter (see Appendix G for letter of information), and then consent to participate was asked. If the participant used the Qualtrics survey, the eligibility questions, letter of information, and consent questions were embedded throughout the survey. After the consent was received (via email or in



the Qualtrics survey), a mutually convenient time for a 60-minute in-depth semi-structured interview was arranged. The interview either took place via Zoom (2023), over the phone, or in-person (on campus) depending on the preference of the participant and the current COVID-19 physical distancing guidelines from the Ontario Government and the host institution. In recognition of their time, each participant was offered an honorarium in the form of a \$20 Amazon e-gift card. Participants could choose not to receive the honorarium if they did not believe it was safe to do so. If they opted to receive the honorarium, the researcher confirmed the preferred form of communication (i.e., email address or text message). After the interview was completed, all recordings were transcribed verbatim and de-identified by the MSc researcher. Participants were assigned pseudonyms that were gender-neutral and related to botanicals.

## 3.5 Safety Protocol

### 3.5.1 Before the Interview

The Qualtrics survey had instructions about safe browsing and an exit button on each page of the survey that the potential participant could click at any point, redirecting their webpage to [www.google.com](http://www.google.com). Prior to the start of all interviews, the researcher co-created a safety plan with the participant in the case their safety was compromised during the interview. The safety plan included a safe word that would terminate the interview as well as instructions, from the participant, as to what to do if the interview was interrupted (i.e., end the session, talk about a major assignment coming up, or other) or suddenly terminated (i.e., call back, call police, wait for student to call back; see Appendix H for template of safety plan). The safety plan also included determining a “false identity” for the interviewer (e.g., “This is Anna from work or a group project from class”). Various iterations of this safety plan has been used successfully in Canadian research with individuals experiencing GBV for over 25 years (Ford-Gilboe et al., 2006).

### 3.5.2 During the Interview

The researcher confirmed the pre-determined safety plan with the participant which also allowed the participant an opportunity to alter the plan if needed. If the participant

seemed to be experiencing strong emotions during the interview, the researcher would offer to skip the question, pause the interview, or terminate the interview.

### 3.5.3 After the Interview

At the end of each interview, the researcher followed a debriefing protocol (see Appendix I for debriefing instructions). The protocol included a step-by-step guide based on the interview method that was selected by the participant (i.e., in-person, over zoom, over the phone). A list and brief description of the GBV support services available at Western University and in London, Ontario was prepared by the research team and provided to the participant at the end of the interview (see Appendix J for the list of GBV support services as of February 2023). The researcher was prepared to explain any of the resources if the participant asked for more information, and only one participant asked for further information. If an interview was particularly impactful for the MSc researcher, she ensured to contact the principal investigator to set up a conversation to debrief.

## 3.6 Data Collection

Data collection for the VOICE study consisted of an online eligibility survey (via Qualtrics or email) as well as an audio-recorded 60-minute in-depth semi-structured interview which included a demographics survey and semi-structured interview questions.

### 3.6.1 Participant IDs

A master contact list was used by the research team which contained the participant names and contact information. This master list was used to (1) track the distribution of the honorariums, (2) contact the participant if the research team had any follow-up questions after the interview, and (3) identify the interview transcript if the participant wished to withdraw from the study. The master list linked identifiers/identifiable information (name, email address, phone number, interview date, and time) to a unique participant pseudonym. Only the principal investigator, co-investigators, and master student had access to the master list.

### 3.6.2 Demographics

After verbal consent was received (see Appendix K for verbal consent script), a short demographic survey was completed during the interview (see Appendix L for demographic questions). Demographics were collected in three sections: 1) information about the participant (i.e., age, gender, sex, sexuality, ethnicity, employment status, financial strain, possible children); 2) information pertaining to university (i.e., undergraduate/graduate, year of study, program, enrolment status, campus affiliation, living arrangement); and 3) information about the participants' marital status, relationship length, experiences of GBV, and the gender of their current/former partner(s)/person(s) who perpetrated GBV.

### 3.6.3 Semi-Structured Interview

An audio-recorded 60-minute in-depth semi-structured interview was utilized (see Appendix M for semi-structured interview guide). A semi-structured interview was selected as it allowed the interview to be focused, while still giving participants the freedom to express their views as well as the researcher the autonomy to explore ideas and answers that may arise over the course of the interview (Adams, 2015). All questions were open-ended and related to at least one of the three purposes (see Table 1 for the mapping of the questions to the study purposes).

**Table 1***Mapping the Semi-Structured Interview Questions to the Study Purposes*

<b>Purpose</b>	<b>Questions</b>
<b>#1: Explore the experiences of students who have experienced GBV during their enrollment at Western</b>	Do you mind telling me a bit about your experiences of GBV while enrolled at Western?
	What impact has your experience with GBV had on your school life?
	What impact has your experience with GBV had on your personal life?
	What impact has your experience with GBV had on your health?
	Is there anything else that you wanted to talk about that we didn't have the chance to discuss before I conclude the interview?
<b>#1: Explore the experiences of students who have experienced GBV during their enrollment at Western &amp; #2: Explore the impact of GBV on students' academics</b>	How have your changes in health impacted your school and/or personal life?
<b>#2: Explore the impact of GBV on students' academics</b>	What impact has your experience with GBV had on your academic performance?
<b>#3: Explore student knowledge and experience with GBV resources</b>	What resources do you know about that are offered at Western that would apply to your experience?
	What resources do you know about offered by the city of London or another municipality that would apply to your experience?
	Are there any informal supports that you are receiving?
	Are there any resources (formal or informal, offered by Western, a municipality, in your personal life, or otherwise) that you could not find, that you would like to be offered, and/or you wanted to use but could not access?
	Are there any other ways that you are receiving support regarding your experience with GBV that we have not discussed today?

Intersectionality was woven throughout the interview as research participants were encouraged to discuss their experiences with power, resilience, struggle, and discrimination. Further within the data collection process, the use of a preamble was designed to create a safe and non-judgmental space for the participant to answer (ex., “I want you to know there are no right or wrong answers, we are simply interested in what is true for you. Your participation in this interview is voluntary, and all information will be de-identified”; see Appendix N for full pre-recording preamble). Moreover, in an effort to democratize the power relations that are present between the interviewer and participant, probes and mirroring were used to ask for more depth (i.e., Tell me more about; It sounds like; How did this make you feel; etc.), and respond empathetically to validate the participant and show compassion (Karnieli-Miller et al., 2009).

#### 3.6.4 Reflexive Journal

Throughout the study, the MSc researcher kept a reflexive journal to document and examine any personal conceptual lens, explicit and implicit assumptions, preconceptions and values, and how these all affected the research decisions made in every phase of the VOICE study (Korstjens & Moser, 2017). During the interview, the reflexive journal was used to document key words and phrases that stood out during the interview which helped the MSc researcher to stay focused and engaged with the participant. After each interview, the MSc researcher spent 10-20 minutes reflecting on the interview in the form of key words, field notes, summaries, and memos (see Table 2 for guided questions and statements used to encourage reflection; see Appendix O for field notes and summaries created during and after the interview).

**Table 2***Guided Questions and Statements to Encourage Reflection*

How did it make you feel? How did your emotions change?
Was there something that stood out, any long pauses, and why?
Identify key words/themes.
Associate your personal emotions to key ideas throughout the interview.
Be aware of your biases and judgements and your initial impression of the interview.
Assess the framing of the questions and how well the participant understood them.
Do you need to speak to your Principal Investigator about any difficulties?
Write a few sentences to summarize this interview and the participant.

## 3.7 Data Analysis

### 3.7.1 Sample Composition

Demographics were analyzed using measures of central tendency or frequencies as well as dispersion for the socio-demographic measures of age, gender, sex, sexuality, ethnicity, identifying as indigenous to Canada, employment status, financial strain, number of children, undergraduate/graduate student, year of study, program, enrolment status, campus affiliation, living arrangement, marital status, relationship length, experiences of GBV, and gender of the current/former partner(s)/person(s) who perpetrated GBV.

### 3.7.2 Qualitative Analysis

#### 3.7.2.1 Interpretative Description

Interpretive description was used to address the first two purposes of the study and required the researcher to consistently ponder, question, and try and make sense of the themes from the data (Thorne, 2016). Four overall steps were used in the ID coding: (1) comprehending the data; (2) synthesizing meaning from the data; (3) theorizing relationships; and (4) recontextualizing the data into findings. The first step was to read each interview transcript 2 to 3 times to become familiar with the data set as well as noting down initial impressions and biases in the researcher's reflexive journal. Throughout data analysis and coding, the MSc researcher wrote down her initial impressions and biases of the entire set of transcripts. This was also a suitable time to read the initial memos and field notes that were written in the journal after each interview

so that additional context was established. The second step was to identify each component of the presented data and determine how they existed individually and how they worked together; this process continued until there was a sense of clarity rather than an organizational structure (Thorne, 2016). This was achieved through open coding, the process of taking apart the data and examining the discrete parts for similarities and differences, and to identify and define major themes from the interviews. Once this was completed, the third step involved axial coding, which was the process of examining the relationship between the emerging themes. This yielded insight into the logic and flow of the findings (Thorne, 2016). This was also where the research team decided which relationships could be linked through causation or correlation. Finally, in the process of examining the relationships, multiple iterations of coding were conducted, and necessary changes to themes and definitions were made until the data was fully analyzed and recontextualized into findings within the broader literature. As multiple iterations of coding were conducted, themes were finalized, and meaning was being abstracted, the MSc researcher wrote memos to record the considerations, thoughts, and biases behind every decision. Memoing was the process of recording any thoughts, insights, or interpretations during data analysis with the aim to further analysis, generate new ideas, and communicate findings (Birks et al., 2008).

### 3.7.2.2 Content Analysis

Content analysis was employed by the researcher when analyzing the third purpose of the study, exploring student knowledge and experience with GBV resources (Hsieh & Shannon, 2005). This type of qualitative analysis aimed to provide an understanding of a phenomenon under study typically using a systematic classification process to identify codes, themes, and patterns from the transcripts and text data (Hsieh & Shannon, 2005). Of note, content analysis goes beyond a counting process, aiming to link the results of the classification process to the context and situation from which it was produced (Downe-Wamboldt, 1992). Specifically, a summative content analysis was used in this study which involved counting and comparing the types of support accessed by participants, coupled with an examination of the context in which these types of supports were identified (i.e., accessed vs. not accessed, reasons for accessing, usefulness, barriers,

facilitators). Four overall steps were used in the content analysis coding process: (1) decontextualization; (2) recontextualization; (3) categorization; and (4) compilation (Bengtsson, 2016). The first step involved reading the interview transcripts several times to increase familiarity with the data and conducting open coding. The process of open coding yielded a list of codes and definitions related to the third purpose of the study. Once the codes were identified, the second step was to recontextualize the data. This meant that the researcher re-read the transcripts alongside the near final list of codes to determine if there were any aspects of the text that had not been considered in relation to the study purpose. Step three was the division of the codes into themes, categories, and sub-categories based on the questions asked in the interview (i.e., by resource type, access, usefulness, barriers, facilitators). This step could generate several categories and themes, but the number was reduced until the data and aim of the study was reasonably and adequately explained. The fourth and last step was the compilation and presentation of the data. When presenting the themes, categories, and subcategories, the researcher used quotes from the participants to provide meaning and context. In addition to this, the summary of themes, categories, and subcategories were visually depicted using tables and figures to provide a quick overview of the results. The combination of quotes (qualitative) with tables/figures to depict the systematic classification (quantitative) increases the clarity of the phenomena under study (Bengtsson, 2016). In this study, dialogue mapping was chosen as it clearly captured the participants logic and reasoning when deciding to access resources as well as convey their overall experience when seeking help from other organizations and individuals in their community (Conklin, 2005). Through the analysis, multiple iterations of coding, memoing, and consultations with the principle investigator were conducted to improve the clarity of the analysis, create new ideas, and enhance the value of the findings (Bengtsson, 2016).

### 3.7.3 Data Trustworthiness

To increase data trustworthiness, the following criteria were utilized throughout the VOICE study and include: credibility, transferability, dependability, and confirmability (Lincoln & Guba, 1985).



Credibility refers to the confidence that can be placed in the truth of the research findings (Lincoln & Guba, 1985). It establishes whether the research findings were a plausible interpretation of the participants' original views (Korstjens & Moser, 2017). There were three strategies used to ensure credibility: (1) prolonged engagement, (2) peer-debriefing, and (3) member-checking. Prolonged engagement is understood as the extended presence or time invested with participants or the data (Korstjens & Moser, 2017). For the VOICE study, the interviews were conducted and transcribed verbatim by the MSc researcher, which helped to increase credibility as a significant amount of time had been spent with the data and the participants, compared to just reading the transcripts once. Peer debriefing increased credibility as it involved engaging with colleagues about methodology and data interpretation (Lincoln & Guba, 1985). The principal investigator served as a qualified, impartial colleague that the MSc researcher could share her thoughts, biases, and data interpretation with. Frequent member checking during the interview – restating the key message of a response – by the interviewer helped to maintain credibility as it provided an opportunity to confirm the interpretations and conclusions drawn from the participant responses (Lincoln & Guba, 1985).

Transferability is the degree to which the findings can be applied to other contexts (Lincoln & Guba, 1985). Transferability was established through the use of thick and rich description which describes the behaviour, experiences, and context in enough detail that the conclusions drawn can be transferred to other settings and situations (Korstjens & Moser, 2017; Lincoln & Guba, 1985). Implementing ID, content analysis, and IF may mean that the findings could be understood to represent full-time undergraduate students who have experienced GBV while enrolled at Western University. Since demographic data was also collected, some elements of the findings may be representative of undergraduate students experiencing GBV. Ultimately, the thick descriptions used for the findings presented are to ensure the appropriate transferability of the results as the research team cannot fully determine every context and site that may transfer the findings of the study.

Dependability is demonstrating that the findings are consistent, repeatable, and stable over time (Lincoln & Guba, 1985). It can be difficult to ensure this criterion in ID

research as the MSc researcher's understanding and perspective of GBV may create biases which could influence the results. Throughout the study, the MSc researcher noted any biases in a reflexive journal and consulted with the principal investigator regularly regarding data analysis, interpretations, and the identified biases. The MSc researcher also ensured to accurately and transparently describe the research steps taken from the conception of the project to the development and reporting of the findings so that the work could be reproduced (Korstjens & Moser, 2017; Lincoln & Guba, 1985). The process of consulting with someone, also known as external auditing, was achieved via meetings with the MSc researcher's committee members who examined both the process and product of the research study (Lincoln & Guba, 1985).

Confirmability is the last component of trustworthiness and it is focused on establishing that the interpretations of the findings were derived from the data, and not researcher bias, motivation, or interest (Korstjens & Moser, 2017; Lincoln & Guba, 1985). Guba & Lincoln (1985) argued that confirmability is established when credibility, transferability, and dependability are achieved. As previously described, external auditing and memoing also helped to enhance confirmability. In qualitative research, it can be difficult to remain objective when conducting data analysis. To maintain objectiveness and confirmability of the data, the MSc researcher kept a reflexive journal so that she could document and examine her own conceptual lens, explicit and implicit assumptions, preconceptions and values, and how these all affected the research decisions made in every phase of the VOICE study (Korstjens & Moser, 2017).

### 3.8 Declaration of Self

In my undergraduate studies, I completed a specialization in health sciences and ageing. Throughout my four-year degree, I learned about the overall process of aging, from birth to death, as well as from a mental, social, physical, emotional, and societal lens. Societal issues included but were not limited to health services, infrastructure, healthcare law, and policy. In the ageing program, there was a larger emphasis on the needs of the older adult population and how governments and health care services can be better tailored to meet their needs.

What I did not get to focus on during my undergraduate studies were the influences of more specific phenomena such as GBV and IPV. It was not until my fourth year of my undergraduate career that I began to explore this topic and decided it was a research interest of mine. Through some reflection about my own personal experiences with GBV during my university career, and the experiences of close family and friends, I have a personal interest in studying and learning more about the different forms of GBV. My personal experiences and my knowledge from my undergraduate degree play a role in my current interest of exploring GBV in the context of post-secondary education.

During my undergraduate studies, I learned about the life course perspective, which looks at how chronological age, relationships, common life transitions, and social change shapes people's lives from birth to death (Hutchison, 2019). During the life course, individuals experience several transitions, which are changes in roles, statuses, or departures from prior roles and statuses (Hutchison, 2019). Starting post-secondary education is an example of a major transition. I know that from my own personal experience, I am not the same person I was when I first started university. I also know that my experiences with GBV during university have greatly impacted many spheres of my life (academic, social, mental) and have also contributed to who I am today.

I am aware that my experiences with GBV and what I have learned from close friends and family may cause me to have certain unconscious biases when studying this topic. I must remain as objective as possible about the data as I analyze it and try my best to mitigate any confirmation biases that may start to form. One way that I tend to mitigate my biases is by keeping a reflexive journal throughout my thesis so that I can document my thoughts, feelings, process, and key decisions.

## Chapter 4

### 4 Results

This chapter provides an overview of the results of this study including (1) demographic characteristics, (2) students' GBV experiences during their enrollment at Western University; (3) perceived impact of GBV on students' academics; and (4) student knowledge and experience with GBV resources. Pseudonyms have been created for each participant.

#### 4.1 Demographic Characteristics

Seventeen undergraduate students, ranging from 18 to 27 years of age ( $M_{age} = 20$  years;  $SD = 2.03$ ) participated in this study. All participants were full-time students, affiliated with main campus, had no children, did not identify as a person who was transgender, and were no longer experiencing GBV at the time of the interview. Most students identified as women ( $n = 15$ , 82%), female ( $n = 16$ , 94.1%), straight ( $n = 12$ , 70.6%), and single ( $n = 11$ , 64.7%). The majority of students ( $n = 11$ , 64.7%) identified as part of a racial or ethnic minority group. While employment status varied, approximately half of the students ( $n = 10$ , 58.8%) found it was not difficult to live on their current income.

For year of study, 11.8% ( $n = 2$ ) of students were in first year, 29.4% ( $n = 5$ ) in second year, 35.3% ( $n = 6$ ) in third year, and 23.5% ( $n = 4$ ) in their fourth year. The majority of students ( $n = 14$ , 82%) belonged to a science-focused faculty (i.e., Science, Medical Science, Health Science, Social Science) and lived off-campus with roommates ( $n = 11$ , 64.7%). Full demographic characteristics can be found in Table 3.

**Table 3***Demographics Characteristics*

<b>Participant Characteristics (<i>n</i> = 17 students)</b>	<b><i>n</i></b>	<b>%</b>
<b>Gender</b>		
Man	1	5.9
Non-Binary	1	5.9
Woman	15	88.2
<b>Sex</b>		
Female	16	94.1
Male	1	5.9
<b>Sexual Identity/Orientation</b>		
Bisexual	3	17.6
Pansexual	1	5.9
Queer	1	5.9
Straight	12	70.6
<b>Indigenous to Canada</b>		
Yes	1	5.9
No	16	94.1
<b>Ethnicity</b>		
East Asian	4	23.5
Black	1	5.9
White	6	35.3
Multiple Ethnic Backgrounds	3	17.6
Middle Eastern	1	5.9
Hispanic/Latin	2	11.9
<b>Employment Status</b>		
Employed part-time	3	17.6
Unemployed	7	41.2
Casual	1	5.9
Seasonal	5	29.4
Intern	1	5.9
<b>Difficulty Living on Current Income</b>		
Not very difficult	2	11.8
Not difficult	10	58.8
Neither difficult nor easy	2	11.8
Somewhat difficult	3	17.6
<b>Year of Degree/Study</b>		
First	2	11.8
Second	5	29.4
Third	6	35.3
Fourth	4	23.5

<b>Participant Characteristics (<i>n</i> = 17 students)</b>	<b><i>n</i></b>	<b>%</b>
<b>Faculty</b>		
Science	3	17.6
Social Science	4	23.5
Health Science	7	41.2
Medical Science	3	17.6
<b>Living Arrangement</b>		
On-campus	3	17.6
Off-campus by myself, with relatives, or with spouse/partner	3	17.6
Off-campus with roommates	11	64.7
<b>Marital Status</b>		
Single	11	64.7
In a relationship, but not married/common law/engaged	6	35.3

#### 4.1.1 GBV & Relationship History

Participants experienced multiple instances of violence, over the course of their lives; however, when answering questions related to their histories of violence, participants referred to their self-identified most impactful experience which tended to be the most recent. The majority of the participants identified their perpetrators as men ( $n = 15$ , 88.2%) and the types of GBV experienced included a combination of the following (with students experiencing multiple forms of GBV): sexual violence ( $n = 16$ ), emotional violence ( $n = 15$ ), IPV ( $n = 14$ ), sexual harassment ( $n = 12$ ), psychological violence ( $n = 12$ ), stalking ( $n = 5$ ), physical violence ( $n = 4$ ), and cyber violence ( $n = 3$ ). GBV was typically experienced during the first or second year of university ( $n = 13$ , 76.4%). The length of the relationship with the violent partner ranged from one night to more than one year. Most of the relationships had ended one year or less prior to the interview ( $n = 13$ , 76.4%). Relationship history of the participants can be found in Table 4.

**Table 4***Participant Relationship History*

<b>Participant Relationship History</b>	<i>n</i>	%
<b>Gender of Perpetrator of Gender-Based Violence</b>		
Man	15	88.2
Non-Binary	1	5.9
Woman	1	5.9
<b>Length of the relationship with the previous person/partner who perpetrated GBV</b>		
1 night	2	11.8
1 to 4 weeks	4	23.5
2 to 6 months	4	23.5
6 months to a year	4	23.5
More than one year	3	17.6
<b>Length of time since the relationship ended</b>		
Same night	1	5.9
6 months or less	6	35.3
1 year	6	35.3
More than one year	4	23.5

## 4.2 Students' GBV Experiences during their Enrollment at Western University

Student experiences of GBV are described using three overarching themes: (1) first time acknowledging the GBV experience, (2) coping mechanisms, and (3) contact with the perpetrator after the GBV experience.

### 4.2.1 First Time Acknowledging the GBV Experience

Students had difficulty realizing their reality of having experienced GBV. Some students were in denial and attempted to reframe their experience as normal with the context of love. One student, Ivy, explained the denial and confusion they felt after experiencing GBV in their first relationship saying:

I was still processing [the GBV] ... I want to say I was in a denial stage. I didn't want to believe what [GBV] was happening because it was my first relationship. I was like this is what love is and this is how it should be. This is like the caveat. Love is hard.

For other students, the label of GBV was difficult as they were not sure if their experience ‘counted.’ The uncertainty about if their experience could be classified as GBV stemmed from difficulty recognizing and labelling their experience. Many students, including Olive, who responded to the advertisement to participate provided a preface to the interviewer, “if it doesn’t qualify as GBV just let me know.” Students discomfort in acknowledging their experience of violence was also exemplified through avoidant language during the interview like when Aspen referenced their GBV experience as, “then it happened.” Regardless of the difficulty in acknowledging their experience or if their experience of GBV ‘counted,’ students, like Rose, consistently described a “gut feeling” of knowing that what they experienced was wrong and not okay.

For some students, the step toward acknowledging experiencing violence was an epiphany. Rue described “a moment where it all [experience of GBV] ...clicked.” This moment usually occurred in conversation with a trusted individual like a friend, residence advisor, or therapist. For example, Ivy shared, “I reached out to one of my friends and they very much assured me that [GBV] was not normal and that something had to be done.” Another student, Aspen, described coming to the realization on their own as after the experience with GBV, they had hidden the outfit they had worn in their closet in an attempt to forget. A month later when Aspen went to wash the article of clothing, it was “the first time I had to acknowledge it and the first time I felt kind of upset...I cried about it.” It was after these realizations that students would begin ruminating about their GBV experience.

#### 4.2.2 Coping Mechanisms

After experiencing GBV, students navigated their life through the adoption of coping mechanisms. Coping mechanisms can be understood as thoughts and behaviours used to manage both internal and external stressful situations (Algorani & Gupta, 2023). Students identified several coping mechanisms which are commonly identified in existing literature among people who experience GBV, such as, hypersexuality, avoidance, alcohol and substance use, self-competence, isolation, and social support (García Montes et al., 2021; Pérez-Tarrés et al., 2017). Beyond these coping strategies, students in the VOICE study also utilized: (1) academic validation, (2) physical activity, and (3)



journaling. Using academic validation as a coping mechanism meant that after experiencing GBV, students shifted to attributing their self-worth to their grades. Clove described why positioning their self-worth in their grades was important saying, “I wanted to prove to myself that I was worth of... I don’t know just everything...I wanted to find some sort of validation and I chose academic validation...I’ve always been a good student.” For students, finding this validation in their academics gave them one place in their life that they felt they had control over and that they could excel at when for most of them it felt like the rest of their world was falling apart.

Physical activity was used by students as it offered a means to self-regulate. Ivy described finding “joy” in physical activity. This was important as many students described feelings that were consistent with depression after the experience of GBV and struggled to find any joy in their lives. For other students, physical activity offered a means to increase their strength, which was important to them as they were trying to prepare in case there were other instances of violence. Students described using the experience of GBV as a motivator to develop the capacity to defend themselves to ensure they would never be put in this position again.

Journaling was an outlet students used to channel their minds when they were ruminating in their experience of violence. Students created timelines of the GBV experience to compare how their feelings evolved. Students used this coping mechanism to help them self-identify changes they were experiencing as they processed the violence. For example, Parker reflected, “I’m less sad and more angry, just a little angry. My feelings are not as strong for him anymore. I’m less romanticizing the whole thing too.” For students, having a tangible record that things were getting better was important as often these changes were small which meant they could be missed in the day-to-day. The unique coping mechanisms described by students – academic validation, physical activity, and journaling – all offered students anchors to reality in different ways. Academic validation was an anchor to their self-worth, physical activity to their joy and sense of safety, and journaling to their progress post-GBV. These coping mechanisms helped students to feel connected in a time of great disconnect from themselves, their bodies, and their futures.

### 4.2.3 Contact with Perpetrator After GBV

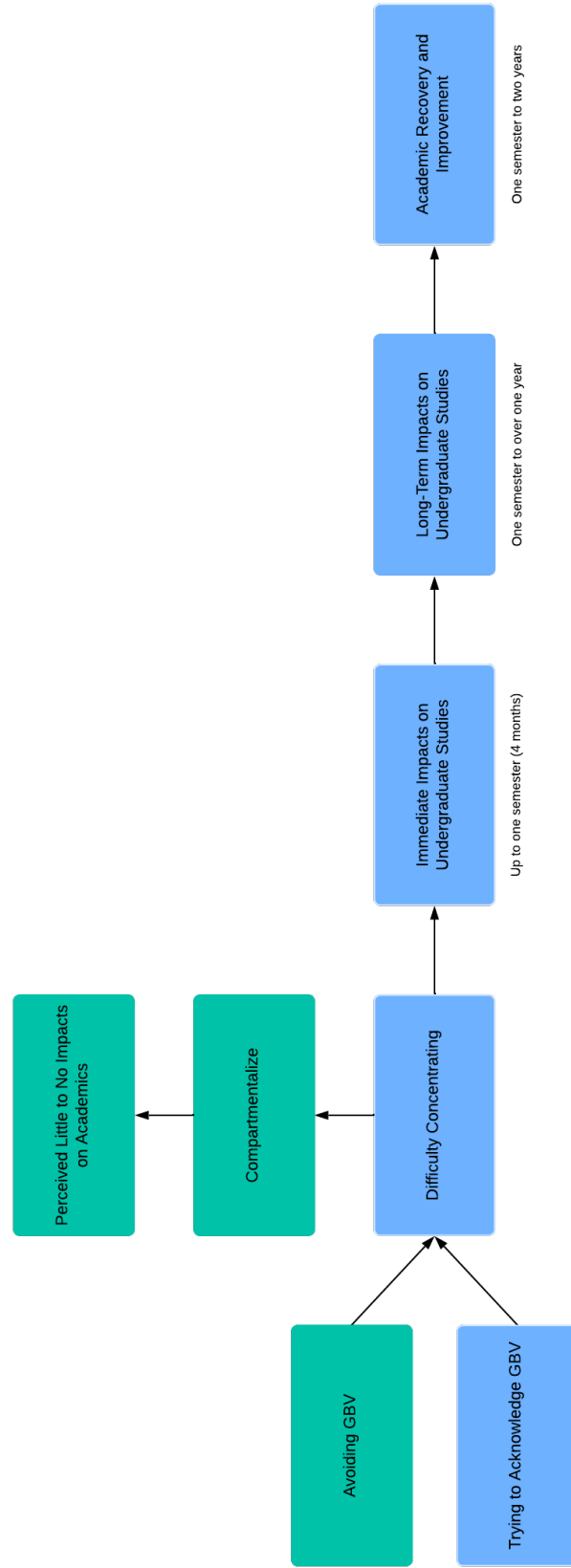
After the GBV experience, all students cut contact with their perpetrator, usually by blocking or deleting the perpetrator's phone number or social media accounts. Despite withdrawing contact, unique to the student population is the reality that the person who experienced GBV and the perpetrator of GBV were typically both students at Western University. The identity of being a student meant that contact with the perpetrator was not completely avoidable as both would have reason to be on campus and could be involved in similar circles (e.g., clubs, classes, academic programs/fields, residences, and the overall campus). The possibility of encountering the perpetrator on campus created a significant amount of fear, anxiety, and discomfort for students while on campus. Olive shared that "they [perpetrator] are in the same program field as I am so I do see them around on campus a lot...we're not in the same classes, but they have classes before me, so I constantly have this fear that they're going to come up to me and try to talk to me." This caused students to not only be hypervigilant and feel on edge when on campus, but for many turned into them attempting to conceal their identity, when possible, with one student, Rue, describing, "I would try to always wear my [medical] mask even when I was outside, sometimes I would have a hood up. At one point, I considered getting a new backpack and new coat. I was so paranoid about seeing that person." Students described wanting to be invisible. This desire led to students limiting their time and activities on campus by skipping class, choosing early morning classes instead of evening classes, avoiding campus when it was busy, avoiding campus at night, as well as dropping out of school activities (e.g., socials, extracurriculars, and sports). Regardless of students' best efforts to be invisible, there were times when this was not possible, specifically during midterms and finals, as well as when students lived in the same campus residence as the perpetrator. When students were in likely situations where they could run into their perpetrator, they described using avoidance strategies. Terra shared that living in the same residence as the perpetrator changed how she lived saying, "This person [perpetrator] does live here...I try to avoid [residence], I just come to eat, sleep." Experiencing GBV while enrolled at university meant that students were often put in situations, despite their best efforts, where they were likely to come face to face with their perpetrator. This reality is unique to students who experience GBV while attending

university and left many students trying to minimize their existence and not fully partake in the student experience as the only option was to avoid their perpetrator.

### 4.3 Perceived Impact of GBV on Students' Academics

The perceived impact of GBV on academics depended on whether students acknowledged their experience of violence. If they avoided acknowledging their experience, they tended to compartmentalize and perceived little to no impact on their academics. Conversely, if they chose to acknowledge the GBV experience, students discussed the impacts in terms of how their undergraduate studies were affected (1) immediately, (2) in the long-term, as well as (3) their academic recovery and improvement (see Figure 1 for a timeline). Each theme will be discussed in turn.

**Figure 1**  
Timeline of the Perceived Impact of GBV on Students' Academics



### 4.3.1 Little to No Impacts on Academics

Students who did not perceive an impact on their academics chose to consciously set aside or compartmentalize their GBV experience so they could focus on their academics. One student, Ivy said, "...school is the priority...so do school first, and then deal with that [GBV] later." The compartmentalization allowed students to avoid thinking about the GBV that was experienced. Students described throwing themselves into their schoolwork to stay preoccupied so there was no time to think about their violent experience. Terra explained, "I would say I'm much more focused with school...I just try not to think of these things [GBV]." Setting aside their experience of violence was a strategy some students felt was the only way available to deal with their experience while being a student.

### 4.3.2 Immediate Impacts on Undergraduate Studies

For students who were acknowledging their GBV experience, when describing the immediate effects on their academics, students identified a cascading impact beginning with (1) increased difficulty concentrating on schoolwork, (2) avoidance of schoolwork/classes/campus, and eventually, (3) decreases in academic achievement. Each of which will be discussed in turn.

#### 4.3.2.1 Increased Difficulty Concentrating on Schoolwork

Experiencing GBV impacted students' ability to concentrate on their schoolwork. Students attributed this challenge of focusing on schoolwork to them ruminating in their experience which resulted in emotional distress. Terra described, "...I was just thinking of what happened. I was emotionally distressed... it took away my focus from school." For students, acknowledging their experience required significant mental resources leading to exhaustion and fatigue which meant students had very little energy to focus on schoolwork, as explained by Rue:

After it happened, I just, my focus was completely off. And this was also at a time where I didn't really understand what had happened... And so, when I'm mentally exhausted, there's not much left- there's not much energy left for school.

Students highlighted that despite valuing and wanting to prioritize their academics, it was incredibly difficult, with Ivy saying, "...it does become hard to focus. And I do get unmotivated...My academics is something I take very seriously. So, it definitely takes a toll there." Many students described that acknowledging the experience of violence required significant space in their lives – leaving little emotional and mental capacity for academics.

#### 4.3.2.2 Avoidance of Schoolwork/Classes/Campus

Students shared that the emotional distress of experiencing GBV meant they started to miss classes and/or only completed the minimum amount of schoolwork. One student, Clove, explained, "I barely went to class. I did not do much schoolwork beyond the bare necessary." This avoidance of campus and classes resulted in heightened levels of stress for students. With students avoiding classes, often stress would magnify as they knew they were falling behind academically. As explained by Willow, "...along with avoiding specific places, I tend to avoid other things that would stress me out. So, my schoolwork would stress me out, I would just avoid it because I'm already, I'm feeling so much, I push everything to the side." This stress associated with missed schoolwork would compound with the existing stress from their GBV experience, leading to a pattern of further avoidance of schoolwork.

#### 4.3.2.3 Decreases in Academic Achievement

The avoidance of schoolwork and heightened stress levels culminated in marked decreases in school performance on assignments and exams. For instance, Indigo said, "...the first semester of second year, I could not concentrate very well on my studies, on my exam. So, I failed terribly just because I could not concentrate, I could not do as I am supposed to." The loss of concentration, the avoidance, and the absenteeism created a compounding effect for students who had experienced GBV, which was particularly detrimental on their grades during heavily weighted assessments, such as midterms and exams. Eventually, the repeated low marks on these assessments led to overall course and semester averages decreasing and for some students culminated in academic probation or no longer being eligible for their program of study.

### 4.3.3 Long-Term Impacts on Undergraduate Studies

When students discussed the long-term impacts on their undergraduate studies, the following themes emerged: (1) lower overall academic standing; (2) crossroads and decisions; and (3) reclaiming academic careers. Students found that their course grades began to decline which led to a lower overall academic standing. At this point, students described being at a crossroads and having to decide how to continue successfully in their undergraduate career. Students also detailed the path to reclaiming their academic standing. Each theme will be discussed in turn.

#### 4.3.3.1 Lower Overall Academic Standing

Students described how their experiences of violence impacted their overall academic standing. Aspen explained how her grades went from honour roll status to no longer being competitive for her desired program, "...the first semester I had an 80 average, maybe just above that. And after that, my average tanked to about a 69. Which...pretty much ruined my chances to get into a program that I wanted to next year." These drastic changes in course grades from being a previously high achieving student generally led to students doubting themselves and their place at university, as articulated by Clove:

It was kind of like everything was hitting rock bottom all at once. I had almost nothing to cling on in a way. I've always been a good student, so I always was like I'm good at this [school], and then with the [GBV] incident, and then the diminished academic performance, I just felt a sense of worthlessness.

It was evident that students' sense of worth and self-esteem were connected to their academic performance, and when their overall academic performance deteriorated, this influenced their identity of being a 'good' student. Further, the drop in academic performance had very real implications for their futures, which was an additional stress for students.

#### 4.3.3.2 Crossroads and Decisions

These academic consequences of the violence put many students at a crossroads for their future academic options. Students often needed to take a step back from their academics

to process their experiences of violence so it would no longer negatively impact their academic achievement. At this crossroads, students described adjusting their workloads in terms of the number of courses they were taking, transferring to less competitive programs, or taking a gap year. Fern explained their choice to adjust their course workload and retake courses saying, “So, at that point, I was just tired, I ended up just settling for, dropping two of my courses from second semester and then retaking them in the summer.” Other students either voluntarily or were forced to switch programs because they no longer met the grade requirements. Hazel reluctantly switched programs saying:

“So, I was in [program name] for the first two years but then I switched to [new program]. I feel like part of the reason was because my grades weren’t so good in first and second year. I felt like I wasn’t enough for that program.”

Another student, Viola, shared their decision to take a gap year saying, “After I got out of that relationship, I dropped out of school a year later. I took a gap year.” This gap year offered students the opportunity to process their experience without the pressure of schoolwork; however, many students were frustrated and disappointed that they had to take a gap year, when prior to the violence this would have never been needed. Students articulated this loss of a year as another consequence of violence. A longer-term consequence of GBV was that students had to rethink, adjust, and at times, completely change the trajectory of their academic careers.

#### 4.3.3.3 Reclaiming Academic Careers

In striving to reclaim their academic careers in the long-term, students described (1) motivations for improving their academic performance, and (2) reflecting on the progress made to reclaim their academics. Each of which will be discussed in turn.

##### 4.3.3.3.1 Motivations for Improving Academic Performance

As overwhelming as the academic consequences were for students, the anger towards the perpetrator was commonly used by students as motivation to improve their academic performance. Clove explained:



And then for some reason in second year it [the GBV] became like an odd motivation to do well. So, it kind of became like one extreme to the next. I was just hyper-focused on school, so after that my grades went back up...I wanted to prove to myself that I was worthy of I don't know just like everything.

The desire to reclaim and refocus their academics was often fueled by fear of failing out of university which turned into anger which students used to improve their academics. Fern expressed this saying, "...I do not want to be kicked out. I did not fight so hard for a semester to be kicked out...the moment you [the perpetrator] affect my academics, that's when I get mad." Students used this anger to help change their academic trajectory. Students used their anger towards the perpetrator or from the GBV experience to motivate themselves to create and stick to a plan to improve their academic performance.

#### 4.3.3.3.2 Reflecting on Progress Made to Reclaim Academics

Academic recovery required considerable effort and planning to stay on track. Students desired to continue aiming for their original career and program aspirations; however, some students had become more realistic and created back-up plans given their current academic standing. As students reflected on the years following their experiences of violence, they shared that their grades had improved. Clove explained how her grades improved following her experiences of GBV in the first year of university saying, "I've done pretty well in my past few years...my grades have been a lot better than first year." Students who adjusted their original plans also found their academic standing improved once the decision and change had been made. For Hazel, this switch brought about peace with her saying, "I'm doing well with the program now so I'm really glad I made the switch." University is academically rigorous, and students are under pressure to succeed. For those who have experienced GBV, academic setbacks are, for most, a reality. However, among those that have experienced violence, students shared that to reclaim their academic futures this involved an immense amount of work and at times changing their academic program.

## 4.4 Student Knowledge and Experience with GBV Resources

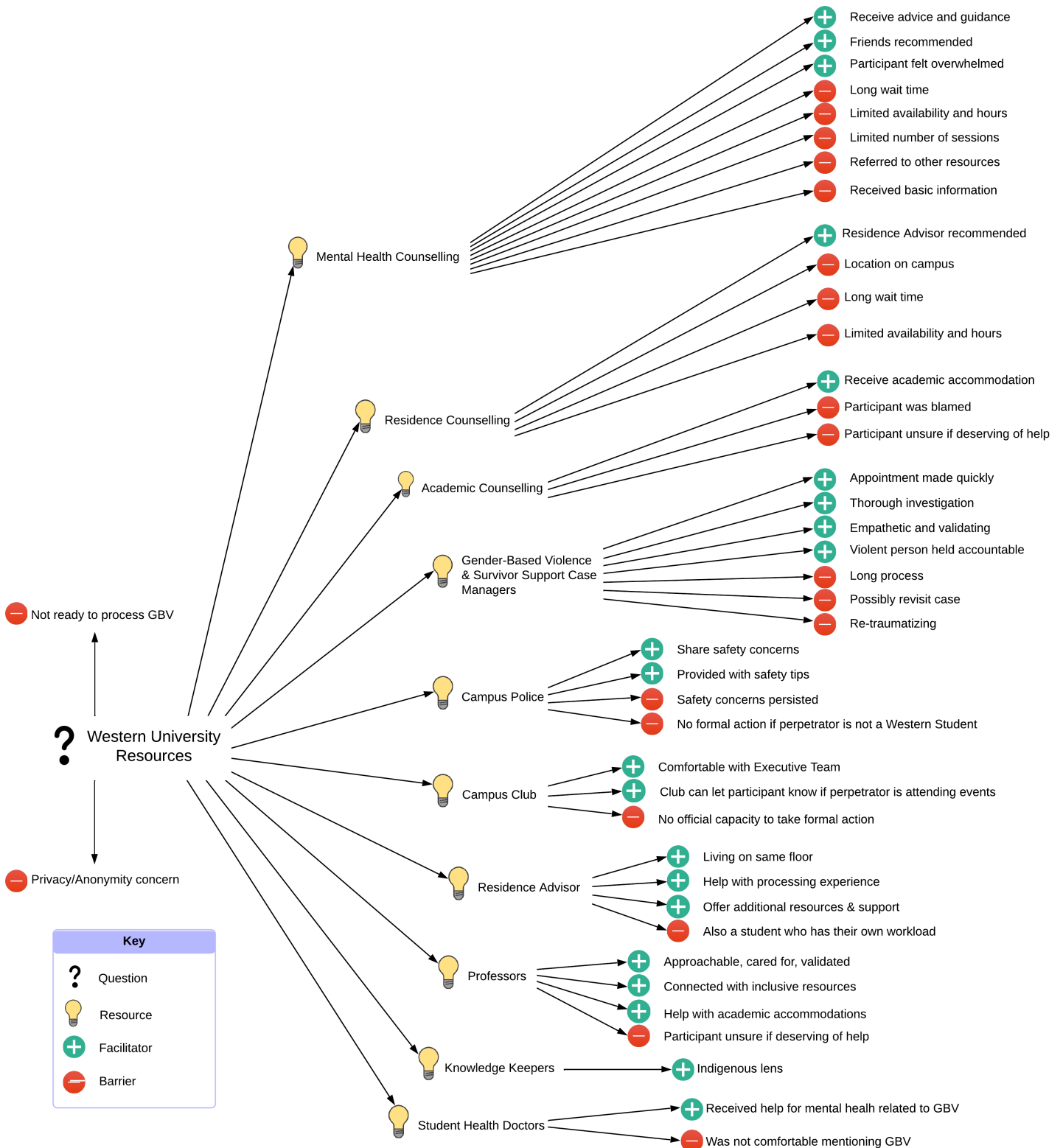
Students identified a variety of resources including at (1) Western University, in the (2) community (i.e., London or their hometown), and (3) from informal resources (e.g., parents, siblings, friends). For every resource identified, students shared their reasons for accessing or not accessing the resource as well as whether the resource of useful or not useful. Barriers and facilitators for each resource were also explored. Each will be discussed in turn.

### 4.4.1 Resources Identified at Western University

Students identified 10 different GBV resources when asked about their knowledge and experience with resources offered at Western University. Figure 2 is a dialogue map of the student-identified resources available at Western University. Overall, the most common resource identified and accessed by students were the counselling options (i.e., mental health, residence, academic). A detailed list of the identified Western University resources for GBV can be found in Table 5.

**Figure 2**

Dialogue Map of Student-Identified GBV Resources at Western University



**Table 5***Student-Identified GBV Resources Available at Western University*

Identified Resource	Type	Identified		Accessed		Did Not Access	
		<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Mental Health Counselling	Counselling	12	70.6	7	58.3	5	41.7
Residence Counselling	Counselling	3	17.6	2	66.7	1	33.3
Academic Counselling	Counselling	2	11.9	2	100	0	0
Gender-Based Violence & Survivor Support Case Managers	Reporting	3	17.6	3	100	0	0
Campus Police	Reporting	1	5.9	1	100	0	0
Campus Club	Reporting	2	11.9	2	100	0	0
Residence Advisor	Individual	2	11.9	2	100	0	0
Professors	Individual	3	17.6	3	100	0	0
Knowledge Keepers	Individual	1	5.9	0	0	1	100
Student Health Doctors	Medical	1	5.9	1	100	0	0

#### 4.4.1.1 Counselling Options

At Western University, the counselling options were most frequently identified and accessed by students which included mental health, residence, and academic counselling. Each will be discussed in turn.

Western University mental health counselling was most identified ( $n = 12$ ) and accessed ( $n = 7$ ) by participants. Students typically reached out at the recommendation of a friend, because they felt overwhelmed by their GBV experience. Students' goal when accessing this service was to receive advice on how to cope. However, students who accessed this resource cited barriers like long wait times, limited appointment availability due to the hours of operations being during school hours, and the limited number of sessions available to students as reasons for being dissatisfied with the resource. After engaging

with the service, many students reported that the mental health counselling did not meet their needs and as such using this service was not a good use of their time. Olive explained, “I went one time, and they [counsellor] basically told me anything that I could easily Google off the internet. Like, things I already knew. So that was a big waste of my time.” Another student, Willow, explained that when engaging with the counsellor, being referred to other resources that could provide more comprehensive help made the student feel like their issue was too large to be dealt with, saying:

...she [counsellor] almost told me that I had said too much and couldn't help me. That was my first experience trying to get help on campus, so after that I just didn't seek any other place. It's just anything that I said, she replied with, I can't help you with that. You have to go to this person, or you have to go to that person...but even the people that she was listing, it's not like she was referring me to anyone specific. She just told me to look for groups that do this or look for groups that do that...it's just frustrating because I was going to her [counsellor] because I was overwhelmed and then to do this [directed to other resources], it got too much.

When students reached out for help and were directed elsewhere, this undermined the utility of the resource as the process of help-seeking the first time was plenty difficult. The thought of having to connect with someone else felt beyond the scope of what students' already busy schedules would allow. Going elsewhere was also unappealing for students as the prospect of having to retell their stories often outweighed their desire for help.

Participants used residence counselling at the recommendation of their Residence Advisor. Residence Advisors are upper year students who live in campus residence and help support, listen, and provide resources to students who are living on the same floor. However, neither participant ( $n = 2$ ) who used residence counselling were satisfied with their experience. Both students cited long wait times as well as limited availability and hours which was explained by Rose who stated, “Appointments had to be booked one, two months in advance. I had a total of two appointments the entire year. And I think I got

flagged in January or so. I should have had a few every week or two. But it was just so backlogged.” The students also expressed that the location of residence counselling was also a barrier as it was located on the opposite side of campus and travelling was time consuming. Students agreed with the sentiments expressed by Clove, who found that the session was too short, they were not able to “get through a lot,” and that “it felt like she [counsellor] didn’t care in a way, like I was just another number on a piece of paper.” Students who sought counselling had a desire for more frequent, flexible, and accommodating appointments which exemplified that they needed more long-term and repeated help acknowledging and identifying their experiences with GBV.

Academic Counselling is offered by the student’s home faculty and helps students to manage their academics. This resource can advise students on academics and support students in receiving academic considerations for assessments and exams. Despite the academic consequences of GBV being experienced by the majority of students, only two students reached out to academic counselling. The students who accessed this resource had different experiences depending on the counsellor and their understanding of GBV. Hazel acknowledged that their “grades definitely weren’t as good” following the GBV but was initially hesitant to reach out for academic consideration because they blamed themselves for the experience and did not feel deserving of help. Ultimately, Hazel did cautiously connect with academic counselling for GBV but only when they also felt they had a more valid reason to require an extension and successfully received academic consideration. Conversely, Fern shared that “she [counsellor] basically insinuated that it was my fault that I’m in this situation.” This participant felt blamed for their experience with GBV and had to advocate for their needs to the academic counsellor. Whether students chose mental health, residence, or academic counselling at Western, the list of barriers outweighed the facilitators. Overall, participants were largely unsatisfied with the guidance they received from the resources that provided counselling despite wanting to receive help acknowledging and identifying their new reality.

#### 4.4.1.2 Reporting Options

The reporting options identified at Western University included the Gender-Based Violence and Survivor Support Case Managers (GBV Case Managers), campus police, and campus clubs. Each of which will be discussed in turn.

The GBV Case Managers at Western University works to support members of the Western community who have experienced GBV. This resource is available regardless of if the GBV was experienced on- or off-campus, or before coming to Western. The service is described as providing a case manager who will listen and, with consent, offer resources within the University and the community, explain reporting options, assist with safety planning, and navigate academic and other accommodations. Students ( $n = 3$ ) shared that they reached out to the GBV case managers because like Rue, they “wanted to see this person [the perpetrator] be held accountable.” Students appreciated that their anonymity was maintained, the appointment was made quickly, and a thorough investigation was conducted. Juniper expressed how at ease, validating, and empathetic the case manager was by saying:

I was comfortable and it wasn't like [she was] trying to coddle me or [treat me like] I was now a little victim...incapable of saving myself or helping myself. I was respected, I was an equal, and also validated when I was describing my own insecurities.

However, the reporting process was long, arduous, and often re-traumatizing for students with Rue explaining, “The entire process of reporting, it lasted...a long time. To kind of always have this [GBV experience] on my mind, it was at times, it did feel re-traumatizing.” In addition to this, after the case had been investigated, some students received an email that Rue described as “heartbreaking” because their case was being revisited. Having to re-tell and thereby re-live their experience was also re-traumatizing, invalidating, and left participants like Rue doubting themselves because they started to wonder, “Did you [the case managers] not trust me the first time?” When asked if this resource was useful, the responses were mixed. While the case manager was incredibly helpful, the consequences for the perpetrator felt lenient and the possible re-opening of

cases increased the self-doubt that students felt about their experience and their desire to report.

Hazel reached out to campus police to report their experience with GBV and shared their safety concerns because this resource was easily accessed on campus and available in-person. Although campus police provided Hazel with tips on how to keep themselves safe, Hazel reported that there was not much campus police were able to do as, “[the perpetrator] wasn’t a campus student.” Despite sharing the safety concerns with campus police, Hazel’s safety concerns about campus persisted as formal action could not be taken by campus police. For students, reaching out to a service and realizing that the support they were seeking was beyond the scope of the service was difficult.

At first, students believed that reporting their GBV experiences to campus clubs when both they and the perpetrator were members was a good avenue as it could address their feelings of unsafety. Although this resource is not a formal reporting option, students shared that they reported and confided in the executive teams of campus clubs. The campus club could connect the student with the University Student Council resources. Although students were informed that the campus club and executive team could not take action in an “official capacity” (Clove), the club decided to let them “know if [the perpetrator] plans on coming to an event” (Hazel). This way, the participant could keep themselves safe in an environment where the perpetrator was likely to attend as well as avoid events and locations if needed. While campus clubs were not able to act in a formal and official capacity against acts of GBV that were shared with them, students found the “personal favour” (Hazel) of the executive team notifying them of the perpetrator’s whereabouts to be of great relief when navigating campus and social events.

#### 4.4.1.3 Individuals at Western University

Students chose to share their experiences of GBV with trusted individuals in the Western community which included Residence Advisors (RAs), Professors, and Knowledge Keepers. Since RAs live in residence, they would check-in daily with the students who had shared their GBV experience and ensured to connect the students with resources when they were ready. Terra shared how grateful they were that their RA ensured they



were in control of their choices and story by saying, “She [RA] was very understanding. She didn’t force me to talk, right? And tell her what happened. None of that. She was just trying to get supports to me.” However, RAs are also students, and their help does have limits. Students acknowledged that they understood their RA, “is a student as well. And her job, as much as it is to support us [students in campus residence], she’s not a therapist in that way. She can’t be there for me whenever I needed her” (Clove). Residence Advisors are a trusted individual who are easily accessible for students who live in a campus residence; however, the RAs are also students who have their own obligations and schedules, which can understandably limit their availability. Accordingly, students living in campus residence still felt increasing levels of isolation and loneliness after experiencing violence.

For students who reached out to professors, they were able to receive a list of inclusive and tailored resources. For instance, Rose was connected with “groups where I could talk to queer non-binary people” as their program was not very diverse, and they needed to expand their support circle outside of their academic peers. Although students had their doubts on whether they were deserving of help, they found that overall, professors whom they trusted and reached out to were approachable, receptive, and validated their experiences. It is important to note that not all students felt comfortable reaching out to professors, and the suitability of this resource is based on the connection the student has with each individual professor.

One student identified an Indigenous resource at Western which are Knowledge Keepers. Knowledge Keepers are those people who may not be considered an elder but carry traditional Indigenous knowledge and expertise in different spiritual and cultural areas. Although Viola had not accessed this resource, they shared that the Knowledge Keepers “primarily speak to cultural trauma or structural violence from an Indigenous lens point.” The student expressed the importance of having resources at Western that are specific to particular communities as it demonstrated inclusivity and understanding that one person has many overlapping identities.

#### 4.4.1.4 No Resources Accessed

Some participants did not access any Western resources, as they did not perceive the available resources to be helpful. Willow explained, “I don't really think there's any resource on campus that I have tried or that I have like seen and was like, oh this might be helpful.” For students, a service being perceived as not helpful was attributed to prioritizing their privacy/anonymity or needing a more personalized option available to suit their specific needs. This was expressed by Aspen who said, “I'm sort of a very private person and I deal with things in a very specific manner that I don't think could be addressed by them [Western].” Furthermore, students who were already connected with supports outside of Western did not report using Western services as their existing relationship with another resource in the community (i.e., psychologist, therapist, friend, counselling) meant they did not need the Western service.

#### 4.4.2 Resources Identified in the Community

Across all interviews, a total of seven different GBV resources in the community were identified by the participants (see Figure 3). Of the seven resources that were identified by participants, only three resources were accessed including psychologist/therapist, crisis support, and psychiatrist. When compared to the number of identified and accessed resources available through Western University, there was less knowledge of community-based resources. A detailed list of the identified community-based resources can be found in Table 6.

**Figure 3**

Dialogue Map of Student-Identified GBV Resources in the Community



**Table 6***Student-Identified GBV Resources Available in the Community*

Identified Resource	Type	Identified by		Accessed		Did Not Access	
		<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Psychologist/Therapist	Counselling	10	58.9	10	100	0	0
Crisis Support	Counselling	5	29.4	2	40	3	60
Psychiatrist	Medical	2	11.9	2	100	0	0
Community-Based Women's Shelter	Support Centres	3	17.6	0	0	3	100
Community-Based Centre for Sex Workers, Allies, Women, and Gender Non-Conforming	Support Centres	2	11.9	0	0	2	100
Queer Support Groups	Social Groups	1	5.9	0	0	1	100
Feminist Mixers	Social Groups	1	5.9	0	0	1	100

#### 4.4.2.1 Counselling Options

The community-based resources for counselling options that were identified by students included psychologist/therapist and crisis support. Each will be discussed in turn.

Students described a psychologist or therapist as useful resources. Accessing a psychologist/therapist in the community helped students cultivate coping strategies that were tailored to them. Among students who used this resource, many had an existing rapport with a psychologist/therapist which made sharing the GBV experience easier. However, for those that did not have an existing rapport, it was tiring embarking on the journey of finding a psychologist/therapist that was compatible because it was not only expensive, but it required opening up repeatedly to different providers in hopes of finding a suitable match. This exhausting search was described by Lily who said:

It felt like she [therapist] wasn't really listening to me...I always thought therapy would be good and I've always wanted to be able to find the therapist that was good for me, but it's just, it's so expensive. It's so exhausting. It's so draining. So, I kind of gave up on that.

Further, despite counselling being widely used by participants, Olive shared that they found psychologists/therapists expertise was “limited to heteronormative situations” and dynamics, which made it difficult for them to receive the appropriate strategies and guidance as a person who identifies as non-binary and queer. For the majority of students, accessing a psychologist or therapist was seen as useful for acknowledging and coping with the experience of GBV. Although there are significant barriers such as cost and compatibility (e.g., being comfortable with vulnerability, being heard, and nuanced expertise), students expressed that this was an ideal resource that they would like to use after experiencing violence.

The types of crisis support identified by students were helplines and crisis centres. The majority of the students simply cited the names of 2-3 helplines or the nearest crisis centre but had not accessed them. Among students who did use helplines, Olive described their experience as, “Somewhat useful...I think if someone is isolated, and they quickly need someone to bounce their ideas off or for someone to just listen to them. But for providing any sort of help, aid, next steps, I don’t think it was useful.” The crisis supports, whether via a helpline or in person at a crisis centre were found to be useful since they did not need an appointment and the staff listened to students’ concerns without judgement; however, beyond listening, students did not see the utility of helplines.

Beyond counselling options, students identified but had not accessed the community-based women’s shelter and the community-based centre for sex workers, allies, women, and gender non-confirming folx. Although they were aware of these resources, Clove expressed their hesitation when they learned that only group sessions were offered, saying, “I was still coming to an understanding about what had happened [GBV], I was barely admitting it to myself, let alone admitting it to a group.” Another student did not feel a need to reach out to the counselling options offered because they already had an established rapport with a therapist in the area.

#### 4.4.2.2 Social Groups

Although seeking counselling was a common choice among students, some students felt that they could benefit from enhancing their social circles. One student identified two community resources which include queer support groups and feminist mixers. These social groups were appealing because being in discussion with like-minded individuals can offer a safe space. Rose shared that these social groups helped them to validate their experiences with GBV because “I hear more stories like my own instead of the media stories.” However, it was difficult to attend with a busy school schedule and the limited availability of these events.

#### 4.4.2.3 No Resources Accessed

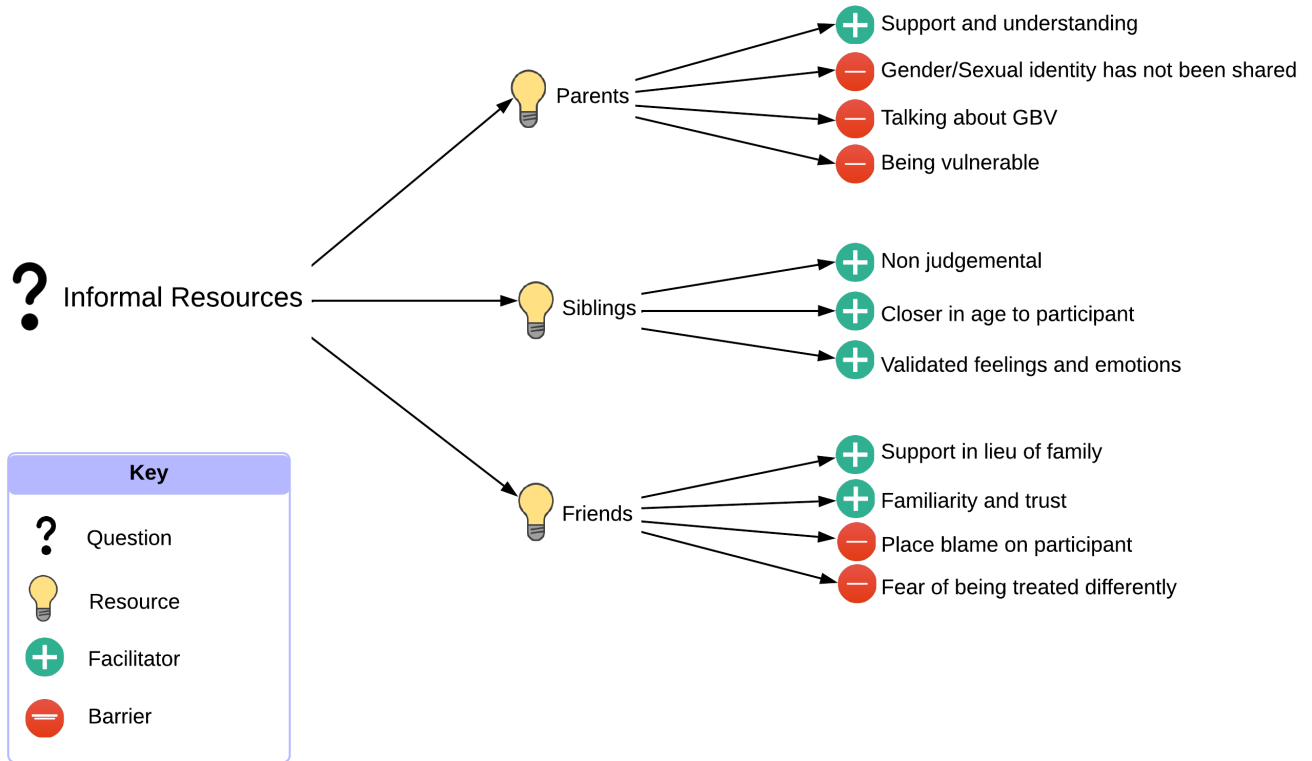
Five of the participants did not know of any resources in the community, with Parker saying, “Oh, I’m not from London so I actually don’t know of any.” Despite the majority of the participants having lived in London for approximately 2 to 3 years, the knowledge of resources in the community was very limited. This could be due to the disconnect that students experience by living in a university ‘bubble,’ where they are more heavily involved in the student life, which can carry on without travelling into or connecting with the city where their university resides. The majority of these students also had their university experience impacted by COVID, having to move between their hometowns and their university as the rules around the lockdown changed. This constant moving made it harder for students to connect and learn about community resources.

#### 4.4.3 Informal Resources

The informal resources that students used were their (1) parents/siblings (family) and (2) friends (see Figure 4). There were similarities in the level of comfort, vulnerability, and helpfulness that students were provided by these individuals/resources. A detailed list of the identified informal resources can be found in Table 7.

**Figure 4**

Dialogue Map of Student-Identified Informal Resources



**Table 7**

*Student-Identified Informal Resources*

Identified Resource	Type	Identified by		Accessed		Did Not Access	
		<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Parents	Family	14	82.3	4	28.5	10	71.4
Siblings	Family	6	35.2	6	100	0	0
Friends	Friends	17	100	16	94.1	1	5.9

4.4.3.1 Parents and Siblings

When students talked about their family, they specifically referenced their parents and siblings. For the majority of students, they either did not tell their parents, or only told one. For one student in particular, their decision to only tell one parent was due to only that parent knowing their identity as non-binary and queer. Since Olive’s GBV experience was not heteronormative, they shared:

I'm not out to my [parent #2] and only my [parent #1] knows what happened with my GBV experience because a part of it is if I were to you know tell my [parent #2] then...like...how much...do I have to come out to [parent #2] on top of it [GBV]. Not exactly the best [situation], it's like a double whammy.

A student's decision to confide in their parents was complicated and based on several factors. Students withheld their GBV experience from their parents for a few reasons including comfortability talking about sex and sexuality, previous experiences with being blamed for GBV, not wanting to cause worry, as well as feeling guilt and shame. For students that did reach out to their parents, they expressed that it was the support, non-judgement, and love that motivated them to be vulnerable. In lieu of telling their parents, students gravitated towards confiding in their siblings. Students felt their siblings provided a listening ear, were non-judgemental, and validated the feelings and emotions of the participants. For instance, Willow described the types of thoughts she shared with her sister, saying:

Now anytime that anything happens, I'll send it to like my sister...and I'll follow it with: Am I overreacting, was this my fault?... I feel like just anytime something happens and it's a little bit messed up, like, I know she's also going to think it's pretty messed up. So, I just kind of tell her to get that kind of validation.

Due to the closeness in age, students found it was easier to confide in their siblings and be vulnerable with them about their anxieties and doubts surrounding their relationships, academics, and well-being. Unfortunately, for some students like Rose, their "family support is just nonexistent." In these cases, students would turn to their friends to receive informal support with their experience with GBV.

#### 4.4.3.2 Friends

The friends that a student had could be their close friends, roommates, and people in their on-campus residence. There was little distinction between close friends and roommates as for the majority of participants, their roommates, through time and proximity, became very close. Friends for the most part, were a resource that participants were incredibly



comfortable with being vulnerable around. For example, Aspen shared how their friends stayed with them when they had a stressful encounter on campus, “When I saw him [the perpetrator], I had a panic attack after that. I called them [friends] and they stayed on the phone with me until I calmed down and then to make sure I drove home safe.” Receiving immediate emotional support, a desire expressed by many participants, was easy to receive from friends. Participants also set boundaries with their friends that they developed as a result of the GBV, as Hazel shared “They’re aware that I have very strong boundaries. If I don’t want to be touched, they understand why.” When choosing to confide in their friends, students found an increased level of familiarity and trust that their friends would be there to provide support and be empathetic to their needs.

However, not all friends were as supportive of the student. Due to the confusing narratives around what ‘counts’ as GBV, some participants found that some of their roommates blamed them for the experience or were very dismissive when the participant reached out for help. For instance, Rose described their roommate saying, “Oh Rose was really drunk. Maybe she [Rose] actually consented and didn’t remember it. And I [Rose] was like, okay, well I remember being uncomfortable and saying no.” The doubt cast onto participants by their friends they had once considered close made them question the validity of their GBV experience and if it ‘truly counted.’

Several students also expressed their worry about being seen in a different light by their friends after sharing their GBV experience, with Clove saying “It’s not that I think people are going to treat me differently. If I do tell them it’s, I feel like they see me differently.” The main concern in these instances is that the participant would be coddled and pitied by their friends, and the GBV experience became the only instance that defined the student. Instead, students appreciated a subtle check-in occasionally, especially in a large social setting, but for the most part wanted to be in control of when the GBV experience was talked about or referenced.

Support for GBV experiences was received in a variety of forms as well as from different organizations, institutions, and individuals. Overall, the majority of students reported accessing a psychologist or therapist with great success. While many accessed the mental

health counselling at Western and crisis supports in the community, it was largely perceived as not useful for students. Across all services, the strongest facilitators for use were flexible appointment formats and short wait times, when the student felt overwhelmed, if the resource was recommended by someone in the student's network, as well as receiving empathy and validation. The most consistent barriers were long wait times, limited appointments and availability, privacy concerns, being uncomfortable with being vulnerable, and not receiving validation for the GBV experiences.

## Chapter 5

### 5 Discussion

In the VOICE study, students had difficulty identifying whether they had experienced GBV, particularly if what had happened to them ‘counted.’ Experiencing GBV while enrolled at university put students in situations where they were likely to come face to face with their perpetrator, despite their best avoidance tactics. To cope with the potential of ongoing contact with perpetrators on campus, students minimized their presence and elected to not fully partake in the student experience. Moreover, students experienced short-term academic consequences stemming from GBV in the form of increased difficulty concentrating on schoolwork, avoidance of schoolwork, and decreased academic achievements. This created long-term consequences such as lower overall academic standing which put many students at a crossroads for their future academic options.

Furthermore, in relation to supports, students in the VOICE study reported engaging with formal (at Western University and in the community) and informal resources following their GBV experience. The majority of students in this study reported accessing a psychologist or therapist with great success. While many accessed the mental health counselling at Western and crisis supports in the community, these supports were largely perceived as not useful for students. Across all services that were used, the strongest facilitators were flexible appointment formats, short wait times, recommendation of the resources by someone in the student’s network, as well as receiving empathy and validation from the accessed resource. The most consistent barriers to resource use were long wait times, limited appointments, privacy concerns, comfortability with being vulnerable, and not receiving validation for the GBV experience. The VOICE study provided insight into how students engaged with resources, and what aspects of resources facilitated and detracted from use.

## 5.1 Students' Post-GBV Experiences

In the VOICE study, undergraduate students shared that they had difficulty identifying they had experienced GBV and were coming to terms with this reality. Similarly, Sinko and colleagues (2019) found that internalized normalization of sexual violence often contributed to a decreased ability to label personal experiences as violent. It was posited that this stemmed from students trying to nuance what 'counts' as a violent versus non-violent relationship (Sinko et al., 2019). The label of violence, assigned to a given act of GBV, can have a significant impact on the perception of the experience (Sasson & Paul, 2014). Research has underscored the importance of identifying that a relationship is violent, as through this label individuals may alter the way they describe their experiences when they disclose to others, which in turn, may influence the label assigned to it by those who receive the disclosure (Nordin, 2021). Therefore, it is important to understand the ways in which acts of GBV are labelled by undergraduate students as well as the factors that may affect the use of a particular label. The VOICE study illuminated that labels are difficult for undergraduate students, with many students often questioning whether their experiences counted as GBV.

This hesitancy to use labels within a vulnerable group, such as the undergraduate population, may be because the terminology is associated with trauma (Harris, 2011) or that the violence experienced by the student may differ from the stereotypical experience. Understanding the reasons for such hesitancy is critical for increasing the access and use of support services (Kunkel & Guthrie, 2016). Previous research conducted on the terminology used among college students only looked at the perceptions of specific terms such as IPV terminology, the perception of college women specifically, and acts of sexual violence in non-student populations (Beyer et al., 2022; Nordin, 2021; Sasson & Paul, 2014). In the VOICE study, it was clear that undergraduate students at university had difficulty recognizing and labelling their experiences in the umbrella term that is GBV which could, and did, delay when students accessed GBV resources. For some undergraduate students, similar to non-student populations, there was an unwillingness to frame the experience as violent. Some students were in denial and attempted to reframe their experience as normal within the context of love. This can be problematic as it can

further contribute to students not recognizing that they have experienced violence, increase their tolerance for violence in relationships, and prevent help-seeking. The labelling of violence was also especially difficult for students in the VOICE study that did not identify as cis women in heterosexual relationships. Students in the VOICE study expressed that the majority of their peers did not understand the dynamics of non-heteronormative relationships or when the perpetrator was a woman. Studies on gender diverse students have found that many of the available resources followed a heteronormative model which decreased acceptability for students in non-heteronormative relationships (Klein et al., 2023). It is important to ensure that resources use GBV descriptions and terminology that encapsulate a variety of experiences of GBV to ensure applicability to all students.

Consistent with the findings of García Montes and colleagues (2021) as well as Pérez-Tarrés and colleagues (2017), undergraduate students in this study shared both changes in their mental health and wellbeing as well as identified common coping mechanisms such as hypersexuality, avoidance, alcohol and substance use, isolation, and relying on social support following the GBV experience. Experiencing difficulties with mental health after GBV is well-established in the literature for student and non-student populations (Carey et al., 2018; Jaconis et al., 2019; Mantler, Shillington, et al., 2022; Rothman et al., 2021; Safar et al., 2023). Unique to this study was the identification of coping mechanisms specific to students including academic validation, physical activity, and journaling. Students reported using these coping mechanisms as anchors in their lives. Academic validation was an anchor to their self-worth, physical activity to their joy and sense of safety, and journaling to their acknowledgment of the violence. Previous literature has highlighted the importance of academic validation more generally, not in the context of GBV, in the lives of students as a measure of their self-worth (Rosenberg & McCullough, 1981; Schlossberg, 1989; Swanson & Cole, 2022) and academic success (O'Shea & Delahunty, 2018). In the context of the VOICE study, when students experienced GBV, their perceptions of self-worth, value, and success significantly declined. However, the coping mechanism of academic validation helped them to affirm their worth and value while also motivating them to succeed academically after experiencing GBV.

In terms of the use of physical activity as a coping strategy, there is a plethora of literature solidifying the physical and mental health benefits of regular physical activity and exercise for non-student and undergraduate student populations (Herbert et al., 2020; Rodríguez-Romo et al., 2022; Taylor et al., 1985; Zhang et al., 2022). It is also well known that university students report high levels of perceived stress and cognitive workload (Brown, 2018). However, previous literature has identified that students with high levels of stress partake in less physical activity than their less-stressed counterparts (Mahmoud et al., 2012; Nguyen-Michel et al., 2006) which may be due to students' highly demanding learning schedules. Interestingly in the VOICE study, several students identified that despite their high stress levels due to having experienced GBV and their ongoing academic demands, they found that physical activity and exercise helped them to regulate their mental health, find joy, and feel safer. It is also important to note that students in the VOICE study used physical activity as a way to increase their strength and prepare for future instances of violence. While learning basic self-defense is important for an individual's general safety, this desire to develop and maintain this skill emphasizes the high level of fear and unsafety that students feel on campus and in their university community post-GBV.

Journaling has been documented in the literature as an intervention in research studies on sexual violence (Creely, 2018; Ikonopoulou et al., 2017; Vadaq & Widyatno, 2022); however, there is currently no evidence in the literature of its use as a coping mechanism for undergraduate students who have experienced violence. More broadly, previous research does support the use of journaling as a general coping mechanism among students, who have not experienced GBV, as it increased their self-awareness and helped students to understand their habits (Hensley & Munn, 2020; Lohner & Aprea, 2021). The VOICE study provides a unique contribution by highlighting the coping mechanism of journaling as specific to the student context when having experienced GBV. These specific coping mechanisms offered students in the VOICE study anchors to reality, a way to regulate their emotions, process their experiences, and regain a sense of control in their lives. Previous literature has found that the student's feelings on regaining control may be an indicator of improvement post-GBV and could lead to positive outcomes (Ranjbar & Speer, 2013). This study not only confirmed the common coping

mechanisms, but also provided context around unique coping mechanisms that students gravitated towards.

The perpetrators of GBV in the undergraduate population have ongoing access to the students who experienced GBV. Despite desiring to withdraw contact, the person who experienced GBV and their perpetrator were typically both students at Western University. The VOICE study highlighted that the identity of being a student meant that contact with the perpetrator was not completely avoidable as both would have reason to be on campus and could be involved in similar social groups (e.g., clubs, classes, academic programs/fields, residences, and the overall campus). Furthermore, the possibility of encountering the perpetrator on campus fostered fear, anxiety, and discomfort for undergraduate students while on campus. Students would go to great lengths to conceal their identity while on campus and minimize their existence which included reducing their extracurriculars, quitting activities and sports, and not fully partaking in the student experience all in an attempt to feel safe. Understanding the reasons for why students felt unsafe provides further insight on how the university can work to increase safety. In a paper published on the constructions of campus safety among university students and administrators (Orchard, 2023), students identified several impediments to campus safety including walking on campus alone at night, the dimly lit areas of campus (i.e., recreation centre), fraternity houses, lack of safe spaces, as well as gender-related services and communications. While the students in the study by Orchard (2023) were speaking to campus safety more broadly, these impediments were also referenced by the undergraduate students in the VOICE study in relation to their experiences with GBV. Further to this, a university administrator in Orchard's study (2023) wondered if the GBSV at Western University was being overestimated, aligning with an alarmist perspective. In contrast to this belief, the VOICE study was able to recruit 17 participants in less than 8 weeks, which far exceeds typical recruitment timelines in GBV studies in non-student populations (typically 4 to 6 months; Burd et al., 2023; Mantler, Jackson, et al., 2022; Mantler, Shillington, et al., 2022; Safar et al., 2023). Despite students expressing that they felt unsafe on campus and would actively try to minimize their presence, they were highly interested in sharing their experiences of GBV in the VOICE study. Some students shared that the interview provided them with a safe

space to share their story, express the changes they would like to see at Western University, and ultimately have their 'VOICE' heard (referencing the title for this study). This demonstrated that the issue of GBV is very much prevalent at Western University.

## 5.2 Students' Academics and GBV

Students in the VOICE study largely experienced negative academic impacts in the form of lower grades, decreased quality of work, missed classes, withdrawing from courses, and an overall decrease in their academic standing which aligned with previous research (Baker et al., 2016; Banyard et al., 2020; Brewer et al., 2018; Jordan et al., 2014; Mengo & Black, 2016; Schrag et al., 2020; Stermac et al., 2020). These academic impacts appeared to be the consequences of an impaired ability to focus while studying due to students having to simultaneously process their GBV experience and balance school responsibilities. These consequences occurred despite students sharing they had established study routines that supported their academic success. The previous literature also largely focused on IPV and the academic consequences (Black et al., 2011; Brewer et al., 2018; Devries et al., 2013; Mengo & Black, 2016; Schrag et al., 2020; Stermac et al., 2020; Tremblay et al., 2008; Voth Schrag & Edmond, 2017). During the interviews and analysis of the VOICE study, a timeline emerged which provided unique insight into the trajectory and the extent of the consequences that the continuum of violence has on students' academics. These are important findings as they demonstrate the struggle students may endure following their experience of GBV, despite their best efforts to be academically successful. Similarly, it is important to consider how the stress of GBV impacts students and further contributes to the multitude of stressors students already experience during post-secondary education. This emphasized the importance of ensuring that academic environments protect all students from violence and develop readily accessible formal supports to prevent and mitigate the impacts of GBV. When the students in the VOICE study set academic goals, it helped to develop hope, and that there is a future waiting for them beyond being a person who experienced GBV.



### 5.3 Students' Experience with GBV Resources

Students identified a variety of resources including at (1) Western University, in the (2) community (i.e., London or their hometown), and (3) from informal resources (e.g., parents, siblings, friends). For every resource identified, students described their reasons for accessing or not accessing as well as whether the resource was useful or not. While the VOICE study provided new insight into the reasons, lived experiences, and the likelihood of students accessing services, it was clear that student knowledge of GBV services was limited, especially beyond Western University. This limited knowledge of GBV services is in line with previous literature (CCI Research, 2019; Quinlan et al., 2016; Sabina et al., 2017; Son et al., 2020; Western University Action Committee on Gender-Based and Sexual Violence, 2022).

Overall, students identified ten GBV resources when asked about their knowledge and experience with resources offered at Western University. The most common resource identified and accessed by students was counselling (i.e., mental health, residence, academic). On average, students identified three to five resources each which was consistent with the April 2022 report by Western's Action Committee on GBSV, where students typically were only aware of three out of nineteen campus and community GBV services. Across all interviews, a total of seven different GBV resources were identified in the community. Of the seven resources that were identified by students, only three resources were accessed including psychologist/therapist, crisis supports, and psychiatrist. The students who chose to use formal resources provided by the university reported having mixed experiences. Participants' willingness to use university-provided resources appeared to be influenced by their knowledge of available resources, their personal beliefs about how the violence impacted them, and their ability to manage the aftermath of the violence independently. Although Western University offers several forms of counselling, the majority of students did not have a satisfactory experience and would ultimately attempt to reach out to a mental health resource in the community. However, students expressed that they would prefer using a Western resource as well as having a long-term counselling option developed.

In line with previously established literature, students in the VOICE study who identified barriers for using formal resources had either never used or significantly delayed using these resources (Fleming et al., 2021; Seon et al., 2021; Son et al., 2020; Wood & Stichman, 2018). During the interviews for the VOICE study, students shared several barriers that they encountered including the fear of not being believed, their doubts on whether their experience ‘counted’ and was severe enough to warrant help, as well as not wanting to re-live and re-traumatize themselves when disclosing their experiences. While these barriers are consistent with the existing literature, their identification within the VOICE study allowed for the application of an intersectional lens in the consideration of how the identities of a student may contribute to the resource barriers. For instance, living in a patriarchal society where men have predominant power and heteronormative experiences are prioritized may contribute to the fear that students have about their GBV experiences being discounted due to their gender, sex, sexuality, and young age. Recognizing different identities and the intersectionality of students who have experienced violence can help institutions and these formal resources to create a safer environment to access resources and engage with individuals who need or want help.

Consistent with previous literature on help-seeking attitudes, it has been commonly supported that for a student to use a formal resource, they need to both know that the resource is available and feel that it is acceptable for them to use it (DeLoveh & Cattaneo, 2017; Fleming et al., 2021). In the VOICE study, the facilitators for formal resources were specifically identified so that academic institutions could better understand the strengths of a certain GBV resource. The strongest facilitators for use were flexible appointment formats and short wait times, when the student felt overwhelmed, if the resource was recommended by someone in the student’s network, as well as receiving empathy and validation.

It is important to contextualize the findings of the VOICE study in the ongoing work being done at Western University in relation to GBV. In April 2022, Western University’s Action Committee on GBSV, submitted a report with key recommendations for preventing and responding to GBSV. The committee conducted a campus climate survey where one third of participants reported having witnessed or experienced GBV on

campus in the past year and 1 in 5 undergraduates students felt unsafe on campus (Western University Action Committee on Gender-Based and Sexual Violence, 2022). It is important to note that the students in the VOICE study had either experienced GBV before or immediately after the publication of the 2022 report and subsequent recommendations, with the majority of students continuing to be impacted by their violent experiences. Since this report, there have been news articles and opinion pieces published by the student newspaper on further incidences of GBV and related high-risk GBV contexts such as Greek Life and athletics (Alper, 2023; Goodison & Reddy, 2023; Kim & Persaud, 2023; Schiefler, 2023). Although work to address and prevent GBV has been underway, this study provides insight into the reality that this campus-wide crisis continues to be an issue that requires ongoing attention.

Students also identified the use of informal supports in relation to their GBV experience. Although all students had disclosed to an informal support prior to participating in the study, their reasons for disclosing were varied. The findings in the VOICE study supported the research of Campbell and colleagues (2015), who described peers as the “true first responders”, which highlights that peers received a substantial higher number of disclosures of violence in comparison to any other individual. The study by Dworkin and colleagues (2016) also identified several factors that people who experienced violence considered when disclosing to their peers such as the relationship status with the peer, if the peer would keep the information private instead of sharing with mutual friends, and the gender of the peer. In the VOICE study, some students chose to disclose because they felt the need to, or they knew that their informal support had similar experiences. Other students disclosed unintentionally as they had still not acknowledged they had experienced GBV, but through a conversation with a trusted friend, their friend suggested that their experience fit the definition of GBV. Positive experiences with disclosing to informal resources, such as friends, supported students in their recovery and assisted some of the students in connecting with formal resources. Students in the VOICE study identified that informal supports were an asset to their recognition and identification of their GBV experience, and positive receptions from informal supports was evidence of ongoing work that is being done to raise awareness of GBV.

## 5.4 Limitations

Findings from the VOICE study should be considered within the context of the limitations, which include the lack of sample representativeness, the type of sampling, and recruitment difficulties. Although the sample was not entirely representative of the undergraduate university population, there was gender and sexual diversity represented in the sample. While the in-depth interview provided insight into the breadth of experiences, the results still only reflect the experiences of 17 students. The recruitment of this sample was largely recruited using online methods, which meant it was possible that students experiencing ongoing forms of GBV did not participate because the increased abuse and coercive control prevented them from safely accessing electronic devices. The eligibility criteria for this study included full time undergraduate or graduate students at Western University; however, graduate students did not reach out to participate in the study. This does not mean that graduate students do not experience GBV, as seen in the campus climate survey conducted by Western University's Action Committee on GBSV (Western University Action Committee on Gender-Based and Sexual Violence, 2022). Given the increased workload and schedule of graduate students, they may not have had the time to participate in the study. Further, the main contact for the study was a graduate student, which could have also negatively impacted other graduate students' decision to participate, as talking to a fellow peer/classmate about GBV can be very difficult to do. Exploring this cohorts' perspectives is an area of research that should be prioritized.

This study also included methodological limitations such as recruitment difficulties which should be considered when interpreting the results. While recruitment occurred quickly, there was nonetheless many bots expressing interest in participating who falsely claimed to be eligible for the study. Future research should explore ways of reducing bot interference in studies including other locations and sites to recruit participants (e.g., at sports clubs, community centres, school newsletters), and integrating online detection features for bots (i.e., CAPTCHA, requesting a signature, preventing multiple submissions).

## Chapter 6

### 6 Conclusion

To the best of the research team's knowledge, this was the first qualitative study to explore the lived experiences of undergraduate students who experienced any form of GBV and gain insight into their overall university experience, academic journeys, and use of formal and informal resources in Canada. The students in the VOICE study shared the different ways in which GBV negatively impacted their academics. While students used both formal and informal resources, informal resources were critical for participants disclosure, acknowledgement of the experience, and connection with formal supports. When students used formal resources, the experiences varied greatly depending on accessibility and the providers response to the disclosure.

The findings of this study have implications for academic institutions and the greater community. This study highlights the perceived academic impact of GBV for students in the form of a timeline. Additionally, the barriers and facilitators for numerous resources have been mapped. Similar to how there are specific times and events that are known to increase the risk of GBV (i.e., emerging period of adulthood, the transition to university, high-risk contexts, etc.), there are specific times, events, and circumstances where an undergraduate student who has experienced GBV may ask or require help balancing their everyday life as a student with the reality of acknowledging their violent experience. Understanding this timeline and the needs of students who require help is important for academic institutions such as Western University so that they can effectively and constructively address GBV against student populations within the legal, education, and service-oriented domains. As the crisis of GBV persists on university campuses, it is important for policies to be continually revised and updated to meet the ongoing and changing needs of the student population.

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# Appendices

## Appendix A

### NMREB Ethics Approval Certificate



**Date:** 21 February 2023

**To:** Dr. Tara Mantler

**Project ID:** 122125

**Study Title:** VOICE: Exploring the Experiences of University Students who have Experienced Gender-Based Violence

**Short Title:** VOICE

**Application Type:** NMREB Initial Application

**Review Type:** Delegated

**Meeting Date:** 13/Jan/2023 12:30

**Date Approval Issued:** 21/Feb/2023 11:57

**REB Approval Expiry Date:** 21/Feb/2024

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Dear Dr. Tara Mantler

The Western University Non-Medical Research Ethics Board (NMREB) has reviewed and approved the WREM application form for the above mentioned study, as of the date noted above. NMREB approval for this study remains valid until the expiry date noted above, conditional to timely submission and acceptance of NMREB Continuing Ethics Review.

This research study is to be conducted by the investigator noted above. **All other required institutional approvals and mandated training must also be obtained prior to the conduct of the study.**

**Documents Approved:**

<b>Document Name</b>	<b>Document Type</b>	<b>Document Date</b>	<b>Document Version</b>
Mantler NMREB 122125 Demographic Questions (Other Instruments) Jan27_2023	Other Data Collection Instruments	27/Jan/2023	
Mantler NMREB 122125 Qualtrics Eligibility_LOI_Consent Survey Feb21_2023	Online Survey	21/Feb/2023	1
Mantler NMREB 122125 Interview Guide Students Feb21_2023	Interview Guide	21/Feb/2023	1
Mantler NMREB 122125 Debriefing Instructions for Interviewer Feb21_2023	Debriefing document	21/Feb/2023	1
Mantler NMREB 122125 Poster_Flyer_Recruitment Feb21_2023	Recruitment Materials	21/Feb/2023	1
Mantler NMREB 122125 Mass Email Recruitment Feb21_2023	Recruitment Materials	21/Feb/2023	1
Mantler NMREB 122125 In Class and Course Instructor Scripts Feb21_2023	Oral Script	21/Feb/2023	1

Document Name	Document Type	Document Date	Document Version
Mantler NMREB 122125 Verbal Consent Script Feb21_2023	Verbal Consent/Assent	21/Feb/2023	1
Mantler NMREB 122125 Letter of Information Feb21_2023	Verbal Consent/Assent	21/Feb/2023	1
Mantler NMREB 122125 Qualtrics Eligibility_LOI_Consent Survey Feb21_2023	Implied Consent/Assent	21/Feb/2023	1

**Documents Acknowledged:**

Document Name	Document Type	Document Date	Document Version
Mantler NMREB 122125 List of Support Services Nov27_2022	Other Materials	27/Nov/2022	1
Mantler NMREB 122125 Eligibility Screening Email Script Feb21_2023	Screening Form/Questionnaire	21/Feb/2023	1
Mantler NMREB 122125 Common Signs of a Stress Reaction Feb21_2023	Other Materials	21/Feb/2023	1

The Western University NMREB operates in compliance with the Tri-Council Policy Statement Ethical Conduct for Research Involving Humans (TCPS2), the Ontario Personal Health Information Protection Act (PHIPA, 2004), and the applicable laws and regulations of Ontario. Members of the NMREB who are named as Investigators in research studies do not participate in discussions related to, nor vote on such studies when they are presented to the REB. The NMREB is registered with the U.S. Department of Health & Human Services under the IRB registration number IRB 00000941.

Please do not hesitate to contact us if you have any questions.

Sincerely,

Ms. Katelyn Harris , Research Ethics Officer on behalf of Dr. Randal Graham, NMREB Chair

*Note: This correspondence includes an electronic signature (validation and approval via an online system that is compliant with all regulations).*



## Appendix B

### VOICE Study Recruitment Poster



For more information please contact:



## Exploring the Experiences of University Students Who Have Experienced Gender-Based Violence: VOICE

- Have you experienced gender-based violence while at Western?
- Are you currently a full-time student at Western University?
- Are you an undergraduate or graduate student?
- Are you at least 18 years old?
- Are you able to speak/read English?
- Do you have access to a safe computer and telephone number?
- Willing to participate in a 60-minute audio recorded interview?

**FOLLOW THE LINK:**

<https://tinyurl.com/bdhpjbe>

**OR**



**SCAN HERE!**



**Participants receive a \$20 e-gift card**



## Appendix C

### Request to Upload VOICE Study Recruitment Poster to OWL

Dear [professor/organization],

My name is Rabani Nagra and I am a second year Masters student in Health and Rehabilitation Sciences. My supervisor, Dr. Tara Mantler, and I are interested in exploring the experiences of students who have experienced gender-based violence (GBV), the impact of GBV on students' academics, and the types of support accessed by students. To explore this, we are conducting a cross-sectional qualitative study and inviting students with GBV experiences to participate in a 60-minute semi-structured interview via Zoom, over the phone, or in-person.

I am emailing to inquire about recruiting for our study. Our team would greatly appreciate it if you could post the attached recruitment poster and information (below) as an announcement on your OWL course site so that students who might be interested do not have to worry about outing themselves as individuals who have experienced GBV, but rather can respond to the advertisement in private.

#### **Message for OWL announcement:**

You are being invited to participate in a study exploring the experiences of students who have experienced gender-based violence (GBV) during their enrollment at Western University, the impact of GBV on students' academics, and the types of support accessed by students. We are looking for current full-time undergraduate and graduate students who have experienced GBV while enrolled at Western University, who are at least 18 years old, are able to speak/read English, and are willing to be audio-recorded.

In this study, you will be asked to complete a 60-minute individual interview over Zoom, in-person, or over the phone. We will be providing each participant with a \$20 Amazon e-gift card to acknowledge your time and contribution to the research. If you are interested in participating or have any questions, please contact the student investigator [REDACTED] or the principal investigator [REDACTED]. Please click the link below and/or share this with others who might be interested if it safe to do so. Please note, your participation is voluntary. Please be advised that phone number and email are not secure forms of communication.

Link: [https://uwo.eu.qualtrics.com/jfe/form/SV\\_cGwIScPTO6I62GO](https://uwo.eu.qualtrics.com/jfe/form/SV_cGwIScPTO6I62GO)

Thank you for your time!

Warmly,

Rabani

## Appendix D

### Summary of Recruitment Outreach

The following course subjects/fields were contacted: Health Studies, Kinesiology, Nursing, Political Sciences, Science, Medical Science, Women and Gender Studies, Psychology, Sociology, Indigenous Studies, Classics, Geography, English, and Food Nutrition. The number of courses contacted, by year, and their responses are listed below.

Courses Contacted ( <i>n</i> )		Responded Yes	Responded No	No Response
Number of first year courses	10	3	2	5
Number of second year courses	46	11	3	32
Number of third year courses	35	9	0	26
Number of fourth year courses	19	6	0	13

The number of student clubs contacted at Western University to share the VOICE recruitment poster was 194. The number of student clubs that responded “yes” was 22, with the remainder of the clubs having not viewed the message. This is likely due to the Instagram and email filtering systems where messages from new pages (like the one created for the VOICE study), or unknown individuals will be in the ‘requests’ or ‘spam’ section instead of the primary inbox.

Western University Student Clubs Contacted			
Name of Club	Platform	Campus	Contacted
Women in Science	Instagram	Western	02-Mar-23
Western Sign Language Club	Instagram	Western	02-Mar-23
Empower	Instagram	Western	02-Mar-23
Western Women in Politics	Instagram	Western	02-Mar-23
Western Student Research Conference	Instagram	Western	02-Mar-23
Women's Health Network Western	Instagram	Western	02-Mar-23
Exercise is Medicine Western Graduate Chapter	Instagram	Western	02-Mar-23
Western Indo-Canadian Students' Association	Instagram	Western	15-Mar-23
Western Hindu Student Association	Instagram	Western	15-Mar-23
SNAP	Instagram	Brescia	16-Mar-23
Brescia Psychology Association	Instagram	Brescia	16-Mar-23
Student Human Ecology Association	Instagram	Brescia	16-Mar-23
Jack.Org	Instagram	Kings	16-Mar-23
Jack.Org	Instagram	Western	16-Mar-23
King's Political Science Student Association	Instagram	Kings	16-Mar-23

<b>Western University Student Clubs Contacted</b>			
<b>Name of Club</b>	<b>Platform</b>	<b>Campus</b>	<b>Contacted</b>
Social Justice and Peace Club	Instagram	Kings	16-Mar-23
Pride Project	Instagram	Kings	16-Mar-23
Developing Communities Everywhere	Instagram	Kings	16-Mar-23
Huron Black Student's Association	Instagram	Huron	16-Mar-23
Huron Indian Cultural Association	Instagram	Huron	16-Mar-23
Huron History Society	Instagram	Huron	16-Mar-23
Western Public Health Association	Instagram	Western	17-Mar-23
Purple Hands Western	Instagram	Western	20-Mar-23
Active Minds Western	Instagram	Western	20-Mar-23
Actuarial and Statistical Undergraduate Association	Instagram	Western	20-Mar-23
Advancements in Medicine Society	Instagram	Western	20-Mar-23
African Student Fellowship	Instagram	Western	20-Mar-23
African Student Association	Instagram	Western	20-Mar-23
ALS Western	Instagram	Western	20-Mar-23
Alzheimer's Western Club	Instagram	Western	20-Mar-23
Anthropology Society	Instagram	Western	20-Mar-23
Arab Students Association	Instagram	Western	20-Mar-23
Asian Christian Fellowship	Instagram	Western	20-Mar-23
Association of Role Players	Instagram	Western	20-Mar-23
Autism Awareness Western	Instagram	Western	20-Mar-23
Bangladeshi Students' Association	Instagram	Western	20-Mar-23
Best Buddies Western	Instagram	Western	20-Mar-23
Beyond the Books	Instagram	Western	20-Mar-23
Black Future Lawyers Western	Instagram	Western	20-Mar-23
Black in STEM	Instagram	Western	20-Mar-23
Black Students Association	Instagram	Western	20-Mar-23
Calligraphers of Western	Instagram	Western	20-Mar-23
Campfire Circle Western	Instagram	Western	20-Mar-23
Canadian Asian International Students Association	Instagram	Western	20-Mar-23
Canadian Black Nurses Alliance - Western University	Instagram	Western	20-Mar-23
Canadian Feed the Children	Instagram	Western	20-Mar-23
Canadian-Italian Appreciation Organization	Instagram	Western	20-Mar-23
Cancer Awareness Society	Instagram	Western	20-Mar-23
Capital Markets	Instagram	Western	20-Mar-23
Caribbean Students Organization	Instagram	Western	20-Mar-23
Chamber Music	Instagram	Western	20-Mar-23
Charity Chords	Instagram	Western	20-Mar-23
GradCast Radio and Podcast	Email	Western	20-Mar-23
Rotaract	Instagram	Western	20-Mar-23
Smart Solutions	Instagram	Western	20-Mar-23
Western Women in Leadership	Instagram	Western	20-Mar-23
Western's 3D Printing Club	Instagram	Western	20-Mar-23
The Butterfly Effect	Instagram	Western	20-Mar-23
Women in Fitness	Instagram	Western	20-Mar-23
Women in STEM	Instagram	Western	20-Mar-23

<b>Western University Student Clubs Contacted</b>			
<b>Name of Club</b>	<b>Platform</b>	<b>Campus</b>	<b>Contacted</b>
Chinese Students Association	Instagram	Western	21-Mar-23
Christian Students at Western	Instagram	Western	21-Mar-23
Criminology Students' Society	Instagram	Western	21-Mar-23
Croatian Club	Instagram	Western	21-Mar-23
DAN Management Students' Association	Instagram	Western	21-Mar-23
Dance Force - UWO	Instagram	Western	21-Mar-23
Duke of Edinburgh's Club	Instagram	Western	21-Mar-23
Dumbledore's Army	Instagram	Western	21-Mar-23
Envelope for Joy	Instagram	Western	21-Mar-23
Western Esports & Gaming Association	Instagram	Western	21-Mar-23
Exercise is Medicine Undergraduate Chapter	Instagram	Western	21-Mar-23
Fashion and Lifestyle Society	Instagram	Western	21-Mar-23
French Club	Instagram	Western	21-Mar-23
Gujarati Students' Association	Instagram	Western	21-Mar-23
Habitat for Humanity UWO	Instagram	Western	21-Mar-23
Health Occupation Students of America Western	Instagram	Western	21-Mar-23
Heart & Stroke Western	Instagram	Western	21-Mar-23
Hellenic Society	Instagram	Western	21-Mar-23
Hillel Western	Instagram	Western	21-Mar-23
Hip Hop Western	Instagram	Western	21-Mar-23
History Society	Instagram	Western	21-Mar-23
Indigenous Student Association (First Nations)	Instagram	Western	21-Mar-23
Ismaili Student Association	Instagram	Western	21-Mar-23
Japanese Student Association	Instagram	Western	21-Mar-23
K-pop Western	Instagram	Western	21-Mar-23
Korean Students Association	Instagram	Western	21-Mar-23
Learning Disabilities Awareness Club	Instagram	Western	21-Mar-23
Makeup Inspiring Student Self-Esteem	Instagram	Western	21-Mar-23
Model United Nations Society	Instagram	Western	21-Mar-23
Society of Mature Students	Instagram	Western	21-Mar-23
UWO Party Life	Instagram	Western	21-Mar-23
UWO Debate Society	Instagram	Western	21-Mar-23
Love Western	Instagram	Western	21-Mar-23
Multiple Sclerosis Western	Instagram	Western	21-Mar-23
Muslim Students' Association	Instagram	Western	21-Mar-23
Nail'd it! Western Art Club	Instagram	Western	21-Mar-23
New Democratic Party Western	Instagram	Western	21-Mar-23
Pakistani Students Association	Instagram	Western	21-Mar-23
Palestinian Cultural Club	Instagram	Western	21-Mar-23
Paper Art Club	Instagram	Western	21-Mar-23
Penning by Western	Instagram	Western	21-Mar-23
Pharmacology Club	Instagram	Western	21-Mar-23
Polish Students' Union	Instagram	Western	21-Mar-23
Political Science Association	Instagram	Western	21-Mar-23
Power to Change	Instagram	Western	21-Mar-23

<b>Western University Student Clubs Contacted</b>			
<b>Name of Club</b>	<b>Platform</b>	<b>Campus</b>	<b>Contacted</b>
Pre-Business Students' Network	Instagram	Western	21-Mar-23
Pre-Dental Society	Instagram	Western	21-Mar-23
Pre-Law Society	Instagram	Western	21-Mar-23
Pre-Medical Society	Instagram	Western	21-Mar-23
Pre-Optometry Club	Instagram	Western	21-Mar-23
Purple Spur Society	Instagram	Western	21-Mar-23
Purple Yogis	Instagram	Western	21-Mar-23
Romanian Students Association	Instagram	Western	21-Mar-23
Run With Us	Instagram	Western	21-Mar-23
SALSA - Spanish American and Latin Student Association	Instagram	Western	21-Mar-23
Space Society of London	Instagram	Western	21-Mar-23
Stem Cell Club	Instagram	Western	21-Mar-23
The Western Undergraduate Research Journal of Health and Natural Sciences	Instagram	Western	21-Mar-23
Western Young Liberals	Instagram	Western	21-Mar-23
Western Stem Cell Club	Instagram	Western	21-Mar-23
Spectrum UWO	Instagram	Western	21-Mar-23
Sri Lankan Students' Alliance	Instagram	Western	21-Mar-23
Student Energy at Western University	Instagram	Western	21-Mar-23
Students Fight Parkinson's	Instagram	Western	21-Mar-23
Taiwanese Association at Western	Instagram	Western	21-Mar-23
Tamil Students' Association at Western	Instagram	Western	21-Mar-23
Western COBWEB	Instagram	Western	21-Mar-23
UWO Ski and Snowboard Club	Instagram	Western	22-Mar-23
Ukrainian Students Club	Instagram	Western	22-Mar-23
UNICEF at Western	Instagram	Western	22-Mar-23
UWO Hong Kong Student Association	Instagram	Western	22-Mar-23
UWO Choir	Instagram	Western	22-Mar-23
UWO Humanitarian Society	Instagram	Western	22-Mar-23
Vegan Society	Instagram	Western	22-Mar-23
Vietnamese Students Association	Instagram	Western	22-Mar-23
WaterAid Western	Instagram	Western	22-Mar-23
Western Accounting Association	Instagram	Western	22-Mar-23
Western AI	Instagram	Western	22-Mar-23
Western Algorithmic Trading Club	Instagram	Western	22-Mar-23
Western Anime Club (Anime Video Explosion)	Instagram	Western	22-Mar-23
Western Art Club	Instagram	Western	22-Mar-23
Western Aviation Association	Instagram	Western	22-Mar-23
Western Climbing Club	Instagram	Western	22-Mar-23
Western Console Gaming League	Instagram	Western	22-Mar-23
Operation Smile UWO	Instagram	Western	22-Mar-23
Western Crafting for a Cure	Instagram	Western	22-Mar-23
Western Environmental Business	Instagram	Western	22-Mar-23
Western Foodies	Instagram	Western	22-Mar-23
Western for the Elderly	Instagram	Western	22-Mar-23

<b>Western University Student Clubs Contacted</b>			
<b>Name of Club</b>	<b>Platform</b>	<b>Campus</b>	<b>Contacted</b>
Western Founders Network	Instagram	Western	22-Mar-23
Western Investment Club	Instagram	Western	22-Mar-23
Biological Undergraduate Society	Instagram	Western	23-Mar-23
Gender Studies Student Collective	Email	Western	23-Mar-23
Western Mahjong Club	Instagram	Western	25-Mar-23
Western FoodX	Instagram	Western	25-Mar-23
Western Mooting Society	Instagram	Western	25-Mar-23
Western One Health Club	Instagram	Western	25-Mar-23
Western Ontario Organizations of Filipinos	Instagram	Western	25-Mar-23
Western Photography Club	Instagram	Western	25-Mar-23
Western Psychology Association	Instagram	Western	25-Mar-23
Western Punjabi Association	Instagram	Western	25-Mar-23
Western Real Estate Club	Instagram	Western	25-Mar-23
Western Rehab Club	Instagram	Western	25-Mar-23
Western Sikh Students Association	Instagram	Western	25-Mar-23
Western Sport Business Club	Instagram	Western	25-Mar-23
Western Sports Analytics Club	Instagram	Western	25-Mar-23
Western Strength	Instagram	Western	25-Mar-23
Western University Lebanese Students' Association	Instagram	Western	25-Mar-23
Western University Technology Review	Instagram	Western	25-Mar-23
Western Wildlife Conservation Society	Instagram	Western	25-Mar-23
Western Egyptian Student Association	Instagram	Western	25-Mar-23
Western's Future Black Physicians	Instagram	Western	25-Mar-23
Western's Marketing Association	Instagram	Western	25-Mar-23
Western's Schizophrenia Club	Instagram	Western	25-Mar-23
World University Service of Canada	Instagram	Western	25-Mar-23
Ivey HBAA	Instagram	Western	25-Mar-23
Ivey Health Sector Club	Instagram	Western	25-Mar-23
Ivey Pride Club	Instagram	Western	25-Mar-23
Ivey Social Impact Club	Instagram	Western	25-Mar-23
Ivey Women in Management	Instagram	Western	25-Mar-23
Huron's WUSC Local Committee	Instagram	Huron	25-Mar-23
Brescia Crochet Club	Instagram	Brescia	25-Mar-23
The Musings at Brescia	Instagram	Brescia	25-Mar-23
The Coterie Undergraduate English Society	Instagram	Western	25-Mar-23
Gender Equality Network USC	Instagram	Western	25-Mar-23
EDI@Ivey	Instagram	Western	25-Mar-23
Western Microbiology and Immunology Student Association	Instagram	Western	25-Mar-23
O-Tech, Occupational Therapy Technology Club	Instagram	Western	25-Mar-23
Ivey MSc Students' Life	Instagram	Western	25-Mar-23
Pro Bone Analytics & Strategy Collective	Instagram	Western	25-Mar-23
MSc Ivey Finance & Tech Club	Instagram	Western	25-Mar-23
Ivey MSc Women in Management	Instagram	Western	25-Mar-23
Ivey MSc Entrepreneurship Club (IMEC)	Instagram	Western	25-Mar-23
Ivey MSc Product Management Club	Instagram	Western	25-Mar-23

The number of student councils and societies contacted at Western University to share the VOICE recruitment poster was 19. Three groups responded “yes,” one group responded “no,” and the remaining have not seen the message.

<b>Western University Student Councils and Societies Contacted</b>			
<b>Name of Council/Society</b>	<b>Platform</b>	<b>Campus</b>	<b>Contacted</b>
PhysPharm Grad Student Council	Instagram	Western	02-Mar-23
UWO HRS Grad Student Society	Instagram	Western	02-Mar-23
Arts and Humanities Students Council	Instagram	Western	02-Mar-23
Health Studies Student Association	Instagram	Western	02-Mar-23
Education Students' Council	Instagram	Western	25-Mar-23
Faculty of Health Sciences Students' Council	Instagram	Western	25-Mar-23
Kinesiology Students' Association	Instagram	Western	21-Mar-23
Faculty of Music Students Council	Instagram	Western	25-Mar-23
Faculty of Social Science Students' Council	Instagram	Western	25-Mar-23
Faculty of Science Students' Council	Instagram	Western	25-Mar-23
Faculty of Information and Media Studies Students' Council	Instagram	Western	25-Mar-23
Sociology Students Association	Instagram	Western	25-Mar-23
Master of Library and Information Science Students' Council	Instagram	Western	25-Mar-23
Kinesiology Graduate Student Association (KGSA)	Instagram	Western	25-Mar-23
Graduate Health Information Science Student Association	Instagram	Western	25-Mar-23
Ivey MSc Association	Instagram	Western	25-Mar-23
Western Anthropology Graduate Society (WAGS)	Instagram	Western	25-Mar-23
Student Legal Society (Law School)	Email	Western	21-Mar-23
Graduate English Society	Instagram	Western	25-Mar-23



I created and managed a professional Instagram account for the VOICE study where the recruitment poster was uploaded. I also posted the recruitment poster to my own personal LinkedIn page. In addition to these two sites, I requested to post the VOICE recruitment poster in 21 social media pages/groups. It was posted/approved in a total of 16 pages/groups.

<b>Personal/Professional and Other Social Platforms (Facebook, LinkedIn, Discord)</b>				
<b>Name of Social Media Page/Group</b>	<b>Platform</b>	<b>Campus</b>	<b>Posted</b>	<b>Approved</b>
VOICE Study @the_voice_study – Created for this study	Instagram	N/A	01-Mar-23	N/A
University of Western Ontario	Discord	Western	01-Mar-23	N/A
Rabani's LinkedIn Page	LinkedIn	N/A	22-Feb-23	N/A
UWO Free and For Sale	Facebook	Western	02-Mar-23	N/A
"Must Knows" for courses at UWO	Facebook	Western	04-Mar-23	08-Mar-23
Western University Class of 2023	Facebook	Western	13-Mar-23	N/A
SOGS Virtual Grad Space	Discord	Western	20-Mar-23	N/A
Western Graduate Health and Rehabilitation Sciences (HRS)	Facebook	Western	20-Mar-23	N/A
University of Western Ontario (UWO) - Current Students	Facebook	Western	20-Mar-23	N/A
UWO Psychology Graduate Student's Association (PGSA)	Facebook	Western	20-Mar-23	N/A
UWO Free and For Sale	Facebook	Western	21-Mar-23	N/A
"Must Knows" for courses at UWO	Facebook	Western	23-Mar-23	24-Mar-23
OPSA - Western University's Out of Province Student Association	Facebook	Western	23-Mar-23	Pending
UWO Off-Campus Housing Student Run/Unofficial	Facebook	Western	23-Mar-23	Pending
UWO Medical Sciences + Science ALL years	Facebook	Western	23-Mar-23	Pending
UWO Black Students' Association	Facebook	Western	23-Mar-23	N/A
UWO Biological and Medical Sciences	Facebook	Western	23-Mar-23	N/A
UWO Students for PIH Canada	Facebook	Western	23-Mar-23	N/A
Must Knows (UWO) - Environment, Sustainability, and Conservation	Facebook	Western	23-Mar-23	Pending
Linguistics Society @UWO	Facebook	Western	23-Mar-23	Pending
Western Student Housing - London	Facebook	Western	01-Apr-23	N/A
University of Western Ontario (UWO) - Current Students	Facebook	Western	01-Apr-23	N/A
Western University Nursing Class of 2025	Facebook	Western	02-Apr-23	N/A

## Appendix E

Qualtrics Survey



### Safe Browsing Block

Thank you for expressing interest in **VOICE**: Exploring the Experiences of Uni**V**ersity Students Wh**O** Have Exper**i**en**C**ed Gender-Bas**E**d Violence

Before confirming your **eligibility and participation** in this study, please read the following:

#### Safe Browsing Protocol

We are concerned about your safety as the person who perpetrated gender-based violence may be upset that you are taking part in this study. Below are some steps you can take to keep your participation in this study private:

- A) Use a safe computer or device
- B) Use 'In-Private', 'Private', or 'Incognito' browsing
- C) Delete your history once you close the window.

At the bottom of each page of the survey there is an 'Exit Survey' button that will take you to google.com. If you use this button you may want to delete your browsing history when it is safe to do so. If you need additional help, simply

search 'Private Browsing' along with the name of your browser (for example, chrome, Safari) in your search engine.

## **Eligibility Block**

Have you experienced any form(s) of gender-based violence while enrolled at Western University?

First, we would like to provide you with a definition of gender-based violence. Gender-based violence refers to harmful acts directed at an individual on the basis of their gender and has roots in gender inequality, the abuse of power, and harmful norms. Gender-based violence is an overarching term for several forms of abuse and violence including intimate partner violence, dating abuse, sexual, physical, cyber, societal, psychological, emotion, and economic violence, child marriage, female genital mutilation, and threats of violence, coercion, and manipulation.

Please note that this is not an exhaustive list – your

experience with GBV may not be included in this definition.  
We want to know what is true for you.

- Yes
- No

Are you currently a full-time student (undergraduate or graduate) enrolled at Western University?

- Yes
- No

Are you at least 18 years old?

- Yes
- No

Can you speak/read the English language?

- Yes
- No



Are you willing to be audio-recorded during an interview with the researcher?

- Yes
- No

## **Letter of Information and Consent Block**

### **Letter of Information**

**Title:** Exploring the Experiences of Uni**V**ersity Students Who Have Exper**I**en**C**ed Gender-Bas**E**d Violence (**VOICE**)

#### **Research Team:**

Tara Mantler, PhD, Assistant Professor, Western University  
(PI)

Rabani Nagra, BHSc, MSc Student, Western University

Kimberley T. Jackson, RN, PhD, Assistant Professor, Western University

Marnie Wedlake, PhD, RP, Assistant Professor, Western University

#### **Invitation to Participate and Study Purpose**

You invited to participate in VOICE; a study that will explore:

1) The experiences of students who have experienced

gender-based violence (GBV) during their enrollment at Western University;

- 2) The impact of GBV on students' academics; and
- 3) The types of support accessed by students

### **Purpose of the Letter**

The purpose of this letter is to provide you with information required for you to make an informed decision regarding participation in this research study.

### **Eligibility**

To be eligible for this study, you must:

- (a) Have experienced GBV while enrolled at Western University
- (b) Be currently enrolled at Western University as a full-time student (undergraduate or graduate)
- (c) At least 18 years old
- (d) Be able to speak/read English
- (e) Be willing to be audio-recorded during an interview

### **Safety**

Prior to the start of all interviews, the researcher will co-create a safety plan with the participant in the case their safety is compromised during the interview. The safety plan includes a safe word that would terminate the interview as well as instructions for what to do if the interview was interrupted (i.e., end the session, talk about a major



assignment coming up, or other) or suddenly terminated (i.e., call back, call police, wait for student to call back). The safety plan also includes determining a "false identity" ahead of time for the interviewer (e.g., "This is Anna from work or a group assignment from class").

### **Study Procedures**

If you consent to participate in this study, you will be asked to complete an audio-recorded interview via Zoom(TM), telephone, or in person (on campus) depending on your comfortability and the current COVID-19 physical distancing guidelines from the Ontario Government and Western University. The interview will take approximately 60 minutes at a time that works for you. If you decide to participate in the interview, we will ask you to provide us with a safe email address or phone number as well as some general days of the week and times that would work for you in order to take part in the interview. A research assistant will then contact you (via your preferred method) to set up a time that works for you. Please be aware that phone number and email are not secure forms of communication. For the interview, we will provide a zoom video-link via email or text a secure meeting ID and password or telephone number for the interview as well as a list of topics that will be covered during the interview. If the interview takes place on campus, a research team member will email or text you the campus location details.

We will also provide you a list of topics that will be covered during the interview.

At the start of the interview, we will read you the letter of information and you will have the opportunity to have all your questions answered. You will be asked to provide your verbal consent to participant, which will be audio-recorded. You will also be asked some demographic questions. During the interview, you will be asked questions pertaining to your experience(s) with GBV while enrolled at Western University.

### **Potential Benefits**

By completing this interview, you will be contributing to our efforts to explore the experiences of students who have experienced GBV, the impact it has had on their academics, and the types of support accessed by students. The information gathered in this study may help us to better address GBV concerns in the future. However, it is possible that you may not directly benefit from participating in this research.

### **Potential Risks**

There are risks to consider when taking part in this study. It is possible that you may find it distressing to respond to questions about your experiences with GBV. While all identifiable information will be kept confidential, please be



aware that there is always a risk for a privacy breach. There is also the risk that your abuser/partner/person who perpetrates GBV will see or hear you completing the interview which may put you at increased risk. If this occurs, we encourage you to connect with Anova's 24-Hour Crisis and Support Line at [REDACTED] or Toll free at [REDACTED]  
[REDACTED]

The use of this third-party platform, Qualtrics, is being used to collect your consent and contact information. To address privacy concerns, Qualtrics stores Western University's survey data in Ireland. Please note that while Qualtrics is a secure platform, it is not guaranteed that information collected over the internet is 100% safe. This is the link to Qualtrics' privacy policy:

<https://www.qualtrics.com/privacy-statement/>

### **Compensation**

A \$20 Amazon e-gift card will be provided in recognition of your time and contributions. The e-gift card will be sent to your preferred email.

### **Voluntary Participation**

Participation in this study is completely voluntary. If you feel hesitant or uncomfortable answering any of the questions, you can refuse to answer those specific questions or end the interview at any time. You can also choose to take a

break at any time during the interview. It is important to note that a record of your participation must remain with the study, and as such, the researchers may not be able to destroy your consent documentation, or your name on the master list. However, any data may be withdrawn upon your request. You may withdraw from the study at any time prior to the completion of the interview. You may request to withdraw your data by asking the interviewer during the interview. You may also request to withdraw your data from this research after the interview by emailing the research team at [REDACTED] or [REDACTED]. Once the study has been published, we will not be able to withdraw your information.

### **Confidentiality**

All information collected for the study will be de-identified. You will be asked to provide your name when you consent to participate in the study. This information will be de-identified upon being transcribed. A master contact list containing participants' names and contact information will be used. The master list links identifiers/identifiable information (name, email address, phone number, interview date, and time) to a unique participant code (pseudonym). Only the principal investigator, co-investigators, and master student will have access to the master list. Please be aware that participants' voices are considered identifiers in the audio files, so there is a link



between the data and participants while the audio files are retained. All identifiable information will be kept confidential and de-identified in the results. Interviews will be audio-recorded in order to accurately capture your experiences. If you do not wish to be recorded, the interview will not take place. All potentially identifying information will be removed. We advise that you limit any identifying information shared during the interview, including names and locations.

No information that can identify you will be used in any publication or presentation of the study results. If direct quotes are used to highlight certain findings, any potentially identifying information will be removed. Unless you decide to disclose, only the interviewer will know that you have completed the interview. Only summarized findings will be shared in publications/presentations. Participants will be identified in study results by assigned pseudonyms.

Transcript and audio files will be saved on a secure password-protected server at Western University. Only members of the research team will have access to the data. All data will be securely stored and then destroyed after 7 years. Delegated institutional representatives of Western University and its Non-Medical Research Ethics Board may require access to your study-related records to

monitor the conduct of the research in accordance with regulatory requirements.

### **Contacts for Further Information**

If you require any further information regarding this research project or your participant in the study, you may contact Rabani Nagra [REDACTED] or Dr. Tara Mantler [REDACTED]

If you have any questions about your rights as a research participant or the conduct of this study, you may contact The Office of Human Research Ethics [REDACTED]. For non-local participants you may contact: [REDACTED] email: [REDACTED]

Please consider retaining a copy of this Letter of Information/Consent for your own records, if you feel it is safe to do so. Please Note: You do not waive any legal right by consenting to this study.

I have read and agree to the Letter of Information outlined above and consent to participate in the study.

- Yes, I consent
- No, I do not consent

**Contact Information Block**

Please provide a method of safely contacting you. You can provide an email address OR a phone number. (All contact information will be kept confidential.)



## Appendix F

### Eligibility Screening Email/Confirmation

This is the email script that will be used by the research team to confirm the eligibility of participants if they have chosen to express interest to the research team via email.

#### **Email Script:**

Thank you for expressing interest in the VOICE study. We would like to confirm your eligibility for this study. Please be advised that email is not a secure form of communication.

Please respond to this email with your answers to the following questions:

1. Have you experienced any form(s) of gender-based violence while enrolled at Western University?

First, we would like to provide you with a definition of gender-based violence. Gender-based violence refers to harmful acts directed at an individual on the basis of their gender and has roots in gender inequality, the abuse of power, and harmful norms. Gender-based violence is an overarching term for several forms of abuse and violence including intimate partner violence, dating abuse, sexual, physical, cyber, societal, psychological, emotion, and economic violence, child marriage, female genital mutilation, and threats of violence, coercion, and manipulation.

Please note that this is not an exhaustive list - your experience with GBV may not be included in this definition. We want to know what is true for you.

- a. Yes
  - b. No
2. Are you currently a full-time student (undergraduate or graduate) enrolled at Western University?
  - a. Yes
  - b. No
3. Are you at least 18 years old?
  - a. Yes
  - b. No
4. Can you speak/read the English Language?
  - a. Yes
  - b. No

5. Are you willing to be audio-recorded during an interview with the researcher?
  - a. Yes
  - b. No

If you have any questions, please do not hesitate to contact the research team. If you meet the eligibility criteria, our team will follow-up with you to provide more information about the study (letter of information and consent). Please let us know if it is safe for you to receive the letter via email. After receiving consent, we can arrange a time for the interview to take place. Thank you again for expressing interest!

Kind regards,

[EMAIL SIGNATURE]

*On behalf of the VOICE research team*

## Appendix G

### Letter of Information

**Title:** Exploring the Experiences of UniVersity Students WhO Have ExperIenCed Gender BasEd Voice (**VOICE**)

#### **Research Team:**

Tara Mantler, PhD, Assistant Professor, Western University (PI)  
Rabani Nagra, BHSc, MSc Student, Western University  
Kimberley T. Jackson, RN, PhD, Assistant Professor, Western University  
Marnie Wedlake, PhD, RP, Assistant Professor, Western University

#### **Invitation to Participate and Study Purpose**

You invited to participate in VOICE; a study that will explore:

- 1) The experiences of students who have experienced gender-based violence (GBV) during their enrollment at Western University;
- 2) The impact of GBV on students' academics; and
- 3) The types of support accessed by students.

#### **Purpose of the Letter**

The purpose of this letter is to provide you with information required for you to make an informed decision regarding participation in this research study.

#### **Eligibility**

To be eligible for this study, you must:

- (a) Have experienced GBV while enrolled at Western University
- (b) Be currently enrolled at Western University as a full-time student (undergraduate or graduate)
- (c) Be at least 18 years old
- (d) Be able to speak/read English
- (e) Be willing to be audio-recorded during an interview

#### **Safety**

Prior to the start of all interviews, the researcher will co-create a safety plan with the participant in the case their safety is compromised during the interview. The safety plan includes a safe word that would terminate the interview as well as instructions for what do to if the interview was interrupted (i.e., end the session, talk about a major assignment coming up, or other) or suddenly terminated (i.e., call back, call police, wait for student to call back). The safety plan also includes determining a "false identity" ahead of time for the interviewer (e.g., "This is Anna from work or a group assignment from class").

#### **Study Procedures**

If you consent to participate in this study, you will be asked to complete an audio-recorded interview via Zoom™, telephone, or in person (on campus) depending on your comfortability and the current COVID-19 physical distancing guidelines from the Ontario



Government and Western University. The interview will take approximately 60 minutes at a time that works for you. If you decide to participate in the interview, we will ask you to provide us with a safe email address or phone number as well as some general days of the week and times that would work for you in order to take part in the interview. A research assistant will then contact you (via your preferred method) to set up a time that works for you. Please be aware that phone number and email are not secure forms of communication. For the interview, we will provide a zoom video-link via email or text a secure meeting ID and password or telephone number for the interview as well as a list of topics that will be covered during the interview. If the interview takes place on campus, a research team member will email or text you the campus location details. We will also provide you a list of topics that will be covered during the interview.

At the start of the interview, we will read you the letter of information and you will have the opportunity to have all your questions answered. You will be asked to provide your verbal consent to participant, which will be audio-recorded. You will also be asked some demographic questions. During the interview, you will be asked questions pertaining to your experience(s) with GBV while enrolled at Western University.

### **Potential Benefits**

By completing this interview, you will be contributing to our efforts to explore the experiences of students who have experienced GBV, the impact it has had on their academics, and the types of support accessed by students. The information gathered in this study may help us to better address GBV concerns in the future. However, it is possible that you may not directly benefit from participating in this research.

### **Potential Risks**

There are risks to consider when taking part in this study. It is possible that you may find it distressing to respond to questions about your experiences with GBV. While all identifiable information will be kept confidential, please be aware that there is always a risk for a privacy breach. There is also the risk that your abuser/partner/person who perpetrates GBV will see or hear you completing the interview which may put you at increased risk. If this occurs, we encourage you to connect with Anova's 24-Hour Crisis and Support Line at [REDACTED] or Toll free at [REDACTED]

The use of this third-party platform, Qualtrics, is being used to collect your consent and contact information. To address privacy concerns, Qualtrics stores Western University's survey data in Ireland. Please note that while Qualtrics is a secure platform, it is not guaranteed that information collected over the internet is 100% safe. This is the link to Qualtrics' privacy policy: <https://www.qualtrics.com/privacy-statement/>

### **Compensation**

A \$20 Amazon e-gift card will be provided in recognition of your time and contributions. The e-gift card will be sent to your preferred email.

### **Voluntary Participation**

Participation in this study is completely voluntary. If you feel hesitant or uncomfortable answering any of the questions, you can refuse to answer those specific questions or end the interview at any time. You can also choose to take a break at any time during the interview. It is important to note that a record of your participation must remain with the study, and as such, the researchers may not be able to destroy your consent documentation, or your name on the master list. However, any data may be withdrawn upon your request. You may withdraw from the study at any time prior to the completion of the interview. You may request to withdraw your data by asking the interviewer during the interview. You may also request to withdraw your data from this research after the interview by emailing the research team at [REDACTED] or [REDACTED]. Once the study has been published, we will not be able to withdraw your information.

### **Confidentiality**

All information collected for the study will be de-identified. You will be asked to provide your name when you consent to participate in the study. This information will be de-identified upon being transcribed. A master contact list containing participants' names and contact information will be used. The master list links identifiers/identifiable information (name, email address, phone number, interview date, and time) to a unique participant code (pseudonym). Only the principal investigator, co-investigators, and master student will have access to the master list. Please be aware that participants' voices are considered identifiers in the audio files, so there is a link between the data and participants while the audio files are retained. All identifiable information will be kept confidential and de-identified in the results. Interviews will be audio-recorded in order to accurately capture your experiences. If you do not wish to be recorded, the interview will not take place. All potentially identifying information will be removed. We advise that you limit any identifying information shared during the interview, including names and locations.

No information that can identify you will be used in any publication or presentation of the study results. If direct quotes are used to highlight certain findings, any potentially identifying information will be removed. Unless you decide to disclose, only the interviewer will know that you have completed the interview. Only summarized findings will be shared in publications/presentations. Participants will be identified in study results by assigned pseudonyms.

Transcript and audio files will be saved on a secure password-protected server at Western University. Only members of the research team will have access to the data. All data will be securely stored and then destroyed after 7 years. Delegated institutional representatives of Western University and its Non-Medical Research Ethics Board may require access to your study-related records to monitor the conduct of the research in accordance with regulatory requirements.

### **Contacts for Further Information**

If you require any further information regarding this research project or your participant in the study, you may contact **Rabani Nagra** [REDACTED] or **Dr. Tara Mantler** [REDACTED]

If you have any questions about your rights as a research participant or the conduct of this study, you may contact The Office of Human Research Ethics [REDACTED]. For non-local participants you may contact: [REDACTED], email: [REDACTED].

Please consider retaining a copy of this Letter of Information/Consent for your own records, if you feel it is safe to do so. Please Note: You do not waive any legal right by consenting to this study.

## Appendix H

### Template of Safety Protocol

I would like to confirm the safety plan that we have in place in the case that your safety is compromised during this interview. The safety plan includes a safe word that would terminate the interview as well as instructions for what do to if the interview was interrupted or suddenly terminated.

To confirm:

- If the interview is interrupted, I (the interviewer) should...
  - Options include: end the session, talk about a major assignment, or other
- If the interview is suddenly terminated, I (the interviewer) should...
  - Options include: call back, call police, wait for student to call back, or other
- My identity is that I am:
  - Example of false identity: "This is Anna from work or a group assignment from class"

## Appendix I

### Debriefing Instructions

At the end of the interview, the interviewer will provide the participant with a list of GBV resources and services that are offered by Western or the City of London. The interviewer will be prepared to discuss any of the resources/services with the participant if the participant asks.

1. If the interview was in person:

- the participant may take the list of resources with them if it safe to do (they can refuse)
- the interviewer will ask if the participant would like to discuss any of the resources (the participant can refuse)
- the participant may receive an email copy of the document (if it is safe to do so, but they can also refuse)
- the participant will be advised that email is not a secure form of communication

2. If the interview was conducted over zoom:

- the interviewer will briefly mention the resources/services and ask the participant if they would like to discuss any of the resources (the participant can refuse)
- the participant may receive an email copy of the document (if it is safe to do so, but they can also refuse)
- the participant will be advised that email is not a secure form of communication

3. If the interview was conducted over the phone:

- the interviewer will briefly mention the resources/services and ask the participant if they would like to discuss any of the resources (the participant can refuse)
- the participant may receive an email copy of the document (if it is safe to do so, but they can also refuse)
- the participant will be advised that phone and email communication are not secure forms of communication

## Appendix J

List of GBV Support Services in London, Ontario, Canada as of February 2023

### 1. Gender-Based Violence & Survivor Support Case Manager

Phone Number: [REDACTED]

Email: [REDACTED]

The Gender-based Violence & Survivor Support Case Managers at Western University work closely to support survivors of gender-based and sexual violence. This support is available regardless of if you were subjected to gender-based violence on- or off-campus, or before you came to Western. The Case Manager will listen and, with your consent, connect you to resources within the University and the community, explain reporting options, assist with safety planning and navigate academic and other accommodations. At no point, will you be required or pressured to follow a specific path.

### 2. Western Special Constable Services (WSCS)

From a campus phone: call [REDACTED] (non-emergency line)

From a cell phone: call [REDACTED]

For reports of GBV, WSCS will connect you with the local police service

### 3. Residence Counselling

Email: [REDACTED]

Residence Counselling offers free counselling services to students who live in a Main Campus Residence. We provide short-term confidential counselling to help students manage a variety of mental/emotional challenges and promote healthy living.

### 4. Western's Human Rights Office

Phone Number: [REDACTED] (non-emergencies only)

Email: [REDACTED]

Western's Human Rights Office provides information on the University's discrimination and harassment policies and other human rights-related issues. We are here to help you, whether you are a student, staff or faculty member.

### 5. Anova (formerly Sexual Assault Centre of London)

24-hour crisis & support line: [REDACTED]

Anova provides safe places, shelter, support, counselling, and resources for women experiencing abuse, their children, and all oppressed individuals to find a new start.

### 6. Regional Sexual Assault and Domestic Violence Treatment Program

[REDACTED]  
Phone Number: [REDACTED]

At the Regional Sexual Assault and Domestic Violence Treatment Centre, our team of specialized nurses, doctors and social workers provide care to people of any age, gender or sexual identity experiencing sexual assault and/or domestic violence living in Oxford, Elgin, Huron-Perth and Middlesex counties. There is no cost to the patient/client.

#### 7. CMHA Crisis Centre & Reach Out

[REDACTED]  
In person: [REDACTED]

Phone: [REDACTED]

Webchat: [REDACTED]

The Crisis Centre provides walk in support for individuals experiencing a mental health and/or addictions crisis who do not require hospital or emergency services (911). No referral is needed. A mental health and/or addictions crisis can include: a serious, immediate mental health or addictions problem, a situational crisis, psychosis, risk of self-harm or harm to others, emotional trauma, agitation (or inability to sleep resulting from agitation), severe depression or anxiety, symptoms of moderate withdrawal, or suicidal thoughts.

#### 8. Independent Legal Advice for Individuals Who Have Experienced Sexual Assault

Website: <https://www.ontario.ca/page/independent-legal-advice-survivors-sexual-assault>

Individuals who have experienced sexual assault may be eligible for up to four hours of free, confidential legal advice through the Government of Ontario. This program is available to all eligible women, men, trans and gender-diverse people. You can access the program if: you are at least 16 years of age, you live in Ontario, the sexual assault happened in Ontario

#### 9. Call [REDACTED]

## Appendix K

### Verbal Consent Script

#### Pre-recording:

- Ask participant how they are doing, talk about weather, small talk
- Thank you so for taking the time for this interview today. As a reminder of this study's purpose: I am looking to explore the experiences of university students who have experienced GBV during their enrollment at Western University, the impact of GBV on students' academics, and the types of support accessed by students.
- I want you to know that there are no right or wrong answers, we are simply interested in what is true for you. Your participation in this interview is voluntary and all information will be de-identified.
- You can also refuse to answer any question or take a break at any time.
- I'm going to start the recording momentarily, and I will ask you a few questions to receive your consent for this study, but before I start, I want to let you know that I will be saying a little blurb to make the research identifiable. (e.g. "This is interview with participant 1 on September 29<sup>th</sup>, 2022"). I will also be taking notes, just so I can remember things.

#### Safety Protocol

I would like to confirm the safety plan that we have in place in the case that your safety is compromised during this interview. The safety plan includes a safe word that would terminate the interview as well as instructions for what do to if the interview was interrupted or suddenly terminated.

To confirm:

- If the interview is interrupted, I (the interviewer) should...
  - Options include: end the session, talk about a major assignment, or other
- If the interview is suddenly terminated, I (the interviewer) should...
  - Options include: call back, call police, wait for student to call back, or other
- My identity is that I am:
  - Example of false identity: "This is Anna from work or a group assignment from class"

#### Start Recording – *Consent*

Have you read the letter of information and had any questions about the study, or your participation answered?  YES  NO

Do you agree to participate?  YES  NO

Do you agree to be audio-recorded?  YES  NO



Do you consent to me taking notes during the interview?  YES  NO

Do you consent to the use of unidentified quotes obtained during the study in the dissemination of this research?  YES  NO

Do you consent to a follow up phone or zoom call, if I have additional questions after data analysis? Please be advised that phone number and email are not secure forms of communication.

YES  NO

I am also required to tell you that if you disclose that you are a harm to yourself, a harm to others and/or child in danger – I am legally required to report this. However, if this were to happen, I would talk to you about it before proceeding.

**Proceed to Demographic Questions**

**Then Begin Interview** – *“This is interview with participant 1 on September 29<sup>th</sup>, 2022”*

## Appendix L

### Demographic Questions

The next sets of questions are to gather some information about you. There are no right or wrong answers, we are only looking for the answer that is true for you. If you would like to skip any of the questions asked, please let me know.

#### Section 1: About the Participant/You

1. What is your current age in years? \_\_\_\_\_
2. What is your gender? (*Note: This may be different from the sex assigned at birth and from what is indicated on legal documents*)
  - Man
  - Non-binary
  - Transgender woman | Trans woman
  - Transgender man | Trans man
  - Two-Spirit
  - Woman
  - None of these options describes me. I identify as: \_\_\_\_\_.
  - Prefer not to answer
3. Do you have lived experience as a trans person (meaning your gender identity does not align with your gender assigned at birth)?
  - Yes
  - No
  - Prefer not to answer
4. How would you describe your sex?
  - Female
  - Intersex
  - Male
  - Not listed \_\_\_\_\_
  - Prefer not to answer
5. What is your sexual identity/orientation? \_\_\_\_\_
6. Do you identify as Indigenous to Canada? (Aboriginal, First Nations, Metis, Inuit)
  - Yes
  - No
  - Prefer not to answer
7. What is your ethnicity?
8. What is your employment status?
  - Employed full-time
  - Employed part-time

- Unemployed
  - Casual
  - Seasonal
  - My employment status is not listed: \_\_\_\_\_
  - I prefer not to answer
9. How difficult is it to live on your current income?
- Not very difficult
  - Not difficult
  - Neither difficult nor easy
  - Somewhat difficult
  - Very difficult
10. Do you have any children?
- a. *If yes: what is/are the age(s) of the child(ren)?*
  - b. *If yes, what is/are the gender of the child(ren)?*
  - c. *If yes, what is/are the living situations of the child(ren)?*
  - d. No
  - e. I prefer not to answer

#### Section 2: Questions pertaining to university

11. Are you an undergraduate or graduate student? \_\_\_\_\_
12. What year of your degree are you in? \_\_\_\_\_  
*First, Second, Third, Fourth, Fifth, etc*
13. What Faculty/faculties does your program belong to? \_\_\_\_\_
14. Please indicate your enrolment status
- Full-time
  - Part-time
15. Please indicate which campus you are affiliated with
- Main Campus
  - Huron University College
  - Brescia University College
  - King's University College
16. What is your place of residence/living arrangement?
- On-campus (i.e., residence)
  - Off-campus by myself
  - Off-campus with roommates
  - Off-campus with relatives
  - Off-campus with spouse/partner
  - Not listed \_\_\_\_\_

- I prefer not to answer

Section 3: About relationship(s)/partner(s)

17. What is/are the genders of the person/partner who perpetrated GBV?

- Transgender woman | Trans woman  
 Transgender man | Trans man  
 Non-binary  
 Two-Spirit  
 Woman  
 Man  
 None of these options describes them. They identify as: \_\_\_\_\_.  
 Prefer not to answer

18. What was the length of the relationship with the previous person/partner who perpetrated GBV?

19. Are you currently experiencing GBV?

- a. Yes  
b. No

20. If no, how long ago did the relationship end?

21. What is your marital status?

- Single  
 In a relationship, but not married/common law/engaged  
 Married, common law, or engaged  
 Divorced or separated  
 Widowed  
 My marital status is not listed: \_\_\_\_\_  
 I prefer not to answer

## Appendix M

### Semi-Structured Interview Guide

**Title:** Exploring the Experiences of UniVersity Students WhO Have ExperIenCed Gender-BasED Violence (**VOICE**)

1. How are you doing? How are things going for you?
2. Thanks for taking part in this study. Do you mind telling me a bit about your experiences of gender-based violence (which I will refer to as GBV from now on) while enrolled at Western? (If student uses a particular term right from the start, sub that in)  
*If relationship during COVID, ask how COVID has played a role*
3. What impact has your experience with GBV had on your school life?
  - a. with campus life/community
  - b. Interaction with campus opportunities
4. What impact has your experience with GBV had on your academic performance?
5. What impact has your experience with GBV had on your personal life?
  - a. Family
  - b. Friends
  - c. Hobbies/Passions/Interests
6. What impact has your experience with GBV had on your health?
  - a. Physically
  - b. Mentally
  - c. Socially
  - d. Well-being
7. (If applicable) How have your changes in health impacted your school and/or personal life?
8. What resources do you know about that are offered at Western that would apply to your experience?
  - a. Did you access any of these resources? (Yes/No)
    - i. If yes, why did you access this resource?
    - ii. If no, why did you not access this resource?
  - b. Was it useful? (Ask for each resource)
    - i. If yes, what about this resource was useful
    - ii. If no, what about this resource was not useful
  - c. What are some barriers to accessing these resources?
  - d. What are some facilitators that enabled you to use these resources?

9. What resources do you know about offered by the city of London or another municipality that would apply to your experience?
  - a. Did you access any of these resources? (Yes/No)
    - i. If yes, why did you access this resource?
    - ii. If no, why did you not access this resource?
  - b. Was it useful? (Ask for each resource)
    - i. If yes, what about this resource was useful?
    - ii. If no, what about this resource was not useful?
  - c. What are some barriers to accessing these resources?
  - d. What are some facilitators that enabled you to use these resources?

Thank you for telling me about your experiences with formal services. I'd now like to ask you about informal supports. Informal supports can include family members, relatives, close friends, casual acquaintances, neighbours, co-workers, and members of a faith community as opposed to formal support, that is provided through agencies or larger systems.

10. Are there any informal supports that you are receiving? (Below are probes)
  - a. If yes, what reasons do you have for choosing this type of support?
  - b. If no, what reason do you have for not choosing this type of support?
  - c. What it useful?
    - a. If yes, what about this resource was useful?
    - b. If no, what about this resource was not useful?
  - d. What are some barriers to accessing these resources?
  - e. What are some facilitators that enabled you to use these resources?
11. Are there any resources (formal or informal, offered by Western, a municipality, in your personal life, or otherwise) that:
  - a. You could not find
  - b. That you would like to be offered
  - c. You wanted to use but could not access
12. Are there any other ways that you are receiving support or help regarding your experience with GBV that we have not discussed today?

I think that's all the questions that I have for you. Is there anything else that you wanted to talk about that we didn't have a chance to discuss before I conclude this interview?

If you know of any other students who are eligible and interested in participating in this study, our team would greatly appreciate it if you could let them know about the study, if it safe for you to share the information, and safe for them to receive the information. Please note that this is completely voluntary.

-----

At the end of the interview, the interviewer will provide the participant with a list of GBV resources and services that are offered by Western or the City of London. The interviewer will be prepared to discuss any of the resources/services with the participant if the participant asks.

1. If the interview was in person:

- the participant may take the list of resources with them if it safe to do (they can refuse)
- the interviewer will ask if the participant would like to discuss any of the resources (the participant can refuse)
- the participant may receive an email copy of the document (if it is safe to do so, but they can also refuse)
- the participant will be advised that email is not a secure form of communication

2. If the interview was conducted over zoom:

- the interviewer will briefly mention the resources/services and ask the participant if they would like to discuss any of the resources (the participant can refuse)
- the participant may receive an email copy of the document (if it is safe to do so, but they can also refuse)
- the participant will be advised that email is not a secure form of communication

3. If the interview was conducted over the phone:

- the interviewer will briefly mention the resources/services and ask the participant if they would like to discuss any of the resources (the participant can refuse)
- the participant may receive an email copy of the document (if it is safe to do so, but they can also refuse)
- the participant will be advised that phone and email communication are not secure forms of communication

-----  
Thank you once again for taking the time to answer my questions and for taking part in this study.

We would like to thank you for your time in the form of a \$20 Amazon e-giftcard. You may choose not to receive the honorarium if you do not believe it is safe to do so. If you would like to receive the e-gift card, what is your preferred email address?

### **Probes**

- SILENCE IS YOUR FRIEND!!!
- Tell me more about...
- Say more about...
- What might be an example of...
- It sounds like...
- What I'm hearing is...

- To summarize what you've said... Does that sound accurate? I don't want to put words in your mouth.
- How did this make you feel?

**Empathetic Responses:**

- I don't even know what to say right now, I'm just so glad you told me
- That sounds really challenging
- I can see how that would be difficult
- I can't imagine going through that
- It sounds like you did the best you could in that situation
- *Validate what they're saying (e.g., "That's awful", "You have been through a lot")*



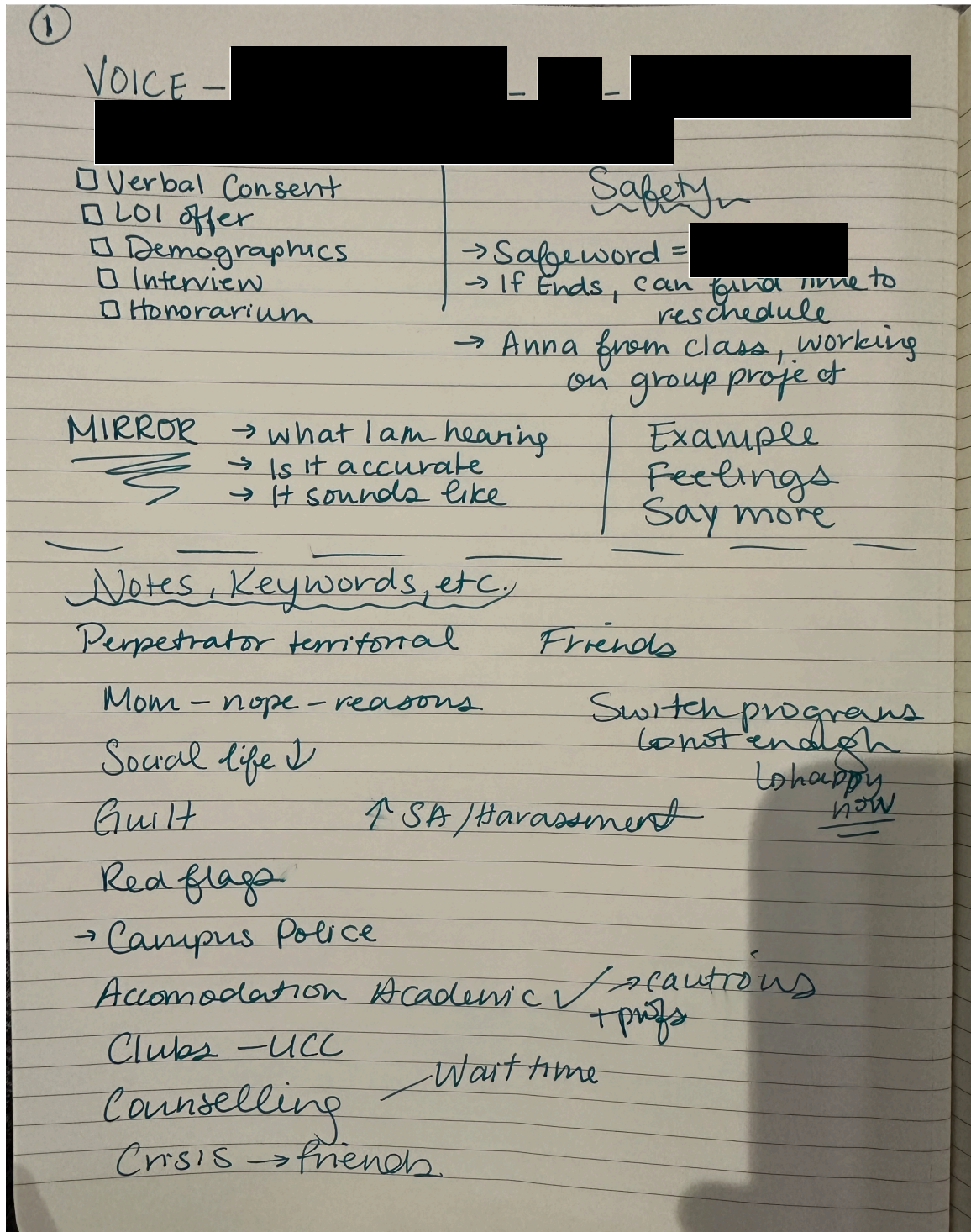
## Appendix N

### Pre-Recording Preamble

- Ask participant how they are doing, talk about weather, small talk
- Thank you so for taking the time for this interview today. As a reminder of this study's purpose: I am looking to explore the experiences of university students who have experienced GBV during their enrollment at Western University, the impact of GBV on students' academics, and the types of support accessed by students.
- I want you to know that there are no right or wrong answers, we are simply interested in what is true for you. Your participation in this interview is voluntary and all information will be de-identified.
- You can also refuse to answer any question or take a break at any time.
- I'm going to start the recording momentarily, and I will ask you a few questions to receive your consent for this study, but before I start, I want to let you know that I will be saying a little blurb to make the research identifiable. (e.g. "This is interview with participant 1 on September 29<sup>th</sup>, 2022"). I will also be taking notes, just so I can remember things.

Appendix O

Example of Field Notes and Summaries During and After an Interview





## After Interview - My feelings & thoughts

- I felt that I could relate to some of the feelings they were experiencing
  - I feel good about this interview. I think there were some spots where I could have probed more
  - there were long pauses → so that they could think & then respond. Silence is good.
  - I didn't feel a drastic change in my emotions  
↳ no need to debrief w/ supervisor - feeling ok
  - What stood out: recurring ABV interactions  
↳ changing programs, feelings of guilt, not being able to talk to parent, academic impact
- 
- I was a little nervous before the interview  
↳ always worried someone might not show up.
  - I tripped down a flight of stairs so I felt a bit rattled but got some water & was fine when interview started.
  - Was sweating under my mask

## Curriculum Vitae

**Name:** Rabani Nagra

**Post-secondary Education and Degrees:** Western University  
London, Ontario, Canada  
2017-2021 B.HSc Hons. Spec. Health and Aging

**Honours and Awards:** Dean's Honour Roll  
2020-2021, 2019-2020

**Related Work Experience**

Analyst  
Women and Gender Equality Canada  
2022 – Present

Graduate Teaching Assistant  
Western University  
2021-2022

Undergraduate Student Research Internship (USRI)  
Western University  
2021