Differences Between Students of Color and White Students in Prevalence and Trauma Effects of Sexual Assault

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Abstract: Sexual assault is a public health issue, particularly among college students. College students have a risk of perpetrating sexual assault and being victimized. Students of color are at an increased risk of experiencing sexual assault and are more likely to have worse outcomes due to the trauma compared to White students. However, very little research has sought to understand the differences in prevalence and negative trauma outcomes. The following secondary data analysis sought to find out if there are differences in rates of sexual violence, where those differences are, and whether students of color have different outcomes. Results showed significant differences in the prevalence of sexual assaults and the effects of trauma for students of color, with students of color consistently demonstrating higher risk.

Keywords: Sexual violence, racial identity, racial differences and sexual assault, race and trauma, race and violence outcomes

Twenty to 25% of women attending college or a university report experiencing a sexual assault (Conley et al., 2017; Sutherland & Hutchinson, 2018). Further, college-aged men have a relatively high likelihood of committing sexual assault, with recent studies demonstrating a perpetration rate between 23% (Zinzow & Thompson, 2015) and 45% (Malamuth et al., 2018). Sexual assault has a unique and profound impact on survivors, including physical and mental health concerns (Beaujolais, 2023). For college students, it detracts from the quality of their college experience (Fisher & Cullen, 2013). Survivors may have difficulty resuming their regular daily activities, perform poorly academically (Banyard et al., 2020), and may not be able to carry a full course load (Molstad et al., 2023). They are more likely to drop classes, have lower institutional commitment, and have higher stress (Banyard et al., 2020). The higher likelihood of not finishing college also means a potential reduction of lifetime income earnings (Hershbein & Kearney, 2014). College students who experience sexual assault are also at an increased risk for developing an eating disorder or posttraumatic stress disorder (Dubosc et al., 2012), at an increased likelihood of participating in risky sexual behavior (Kaufman et al., 2019), at an increased risk of developing anxiety and depression (Goodarzi et al., 2020); and are more likely to have suicidal ideation or attempt suicide (Dworkin et al., 2020).

Among undergraduate college students, individuals of color have a higher risk of experiencing gender-based violence, including sexual assault (Gill, 2018). Current studies report that women of color have higher rates of sexual assault compared to White women (US Department of Justice, 2013). Students of color are even more vulnerable to the negative effects of sexual violence (Klein & Martin, 2021; Sigurvinsddottir & Ullman, 2016). For example, one study demonstrated that survivors of color were more likely to

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screen positive for posttraumatic stress and have more symptoms of depression (Lindquist et al., 2013). However, there are few studies on differences in the prevalence of sexual violence and its effects on the survivor based on racial identity. It is important to explore how racial identity impacts a person's risk of victimization, and the types of trauma effects survivors experience after an assault. Historically, marginalized communities have been excluded from sexual assault prevention programming that typically center the experiences of White straight cisgender women (Karunaratne & Harris, 2022).

The studies that examine the effect of race and sexual assault primarily focus on the race of research participants rather than the race of survivors. For example, previous research has explored the role of the race of the study participant in adherence to rape myths, with previous studies demonstrating that persons of color are less likely to adhere to rape myths (Baldwin-White & Elias-Lambert, 2016). Previous studies have also demonstrated the link between the race of someone and their empathy toward survivors; with a previous study indicating that White participants were less likely to have empathy toward a survivor who is a person of color (Franklin & Garza, 2021).

Research that does explore the influence and role of racial identity is limited in number and scope. For example, there is research that examines the role of race in bystander behaviors. Previous research has shown that women have more empathy for rape survivors of their same race, with one study finding that White women had more positive attitudes towards White victims (Jimenez & Abreu, 2003). Participants are also more likely to blame the perpetrator when victims are White (Gravelin et al., 2019). One study demonstrated that White women who had more prejudiced beliefs were less likely to intervene to prevent a sexual assault of a person of color (Katz et al., 2017). Although this research is important, it does not provide the larger picture of the risk of experiencing sexual assault and its effects if you are a Person of Color compared to a White student. This information is needed to better inform prevention and intervention efforts that address the unique experiences of students of color.

Because women of color have higher rates of sexual violence compared to White women (Decker et al., 2019), the context of someone's experience is needed to identify and address the needs of those who have experienced this violence (Gill, 2018). The negative consequences of sexual violence, including negative mental health and physical outcomes, are heightened due to racism and oppression (Hope et al., 2018). Research has shown that people of color experience disproportionate adverse mental health problems when they experience a sexual assault (Turchik & Wilson, 2010). In addition, research demonstrates that race plays a role in the intensity of the mental health effects of sexual assault, with Black women being at a higher risk of experiencing mental health issues after experiencing sexual trauma (Bryant-Davis et al., 2009). People of color may experience racism and bias when they contact individuals for support or report an assault to law enforcement due to systemic racism and bias (Burton & Guidry, 2021). Therefore, they may not seek help when they experience a sexual assault because they fear they will not be taken seriously (Guidry et al., 2020); leaving them at higher risk of having detrimental mental health outcomes due to trauma (Fogle et al., 2020).

Current Study

There is an emerging need to address the differential experiences of individuals because of their racial identity. It is imperative to consider how racial differences affect the perpetration of sexual assault and how survivors are able to cope with trauma. There is a history of both racial and gender discrimination that have impacted people's individual and institutional experiences after a sexual assault (Decker et al., 2019). Oppressions are interconnected (Crenshaw, 1990); gendered violence is intertwined with other forms of oppression, including racism (Shahrokh, 2015). But to begin to understand how these oppressive systems and individual beliefs affect students of color, there needs to be more foundational information to provide a sense of the prevalence of sexual assault and its effects on people of color. The purpose of this study is to explore if there are potentially any differences in experiences of sexual violence and trauma effects based on race. This study seeks to begin to provide information to help understand the experiences of students with marginalized racial identities. This study sought to answer the following research questions:

1. Are there differences in the prevalence of sexual violence among college students based on racial identity?
2. Are there differences in the effects of sexual violence on mental health, relationships, and academics based on racial identity?

Methods

This study is a secondary data analysis using data that were collected in the first semester of the first year of college from Fall 2011 to Fall 2017 (across 5 cohorts) as part of a larger longitudinal campus-wide project, Spit for Science (Dick et al., 2014). This project sought to understand the behavioral and psychological health of undergraduate students. Approximately two weeks before first-year students were scheduled to arrive on campus, Spit for Science mailed information about the study to all incoming first-year students and (separately) their parents. The week before Welcome Week, first-year students aged 18 or older received an email inviting them to participate in the project. Survey reminders were sent weekly for the first 4 weeks and intermittently for the remaining 6 weeks. Students turning 18 during data collection were invited to participate after their birthdays. The invitation email contained a link to an approximately 30-minute online survey with questions about health behaviors, mental well-being, and substance use. All students who initiated the survey were led through a consent process that further explained the study and their participation. Upon completing the survey, students went to a central site at the university to collect monetary compensation and a free "Spit for Science" t-shirt. Study data were collected and managed using REDCap, an electronic data capture tool (Harris et al., 2009). The institutional IRB approved this study.

Measures

Demographics

Students were asked demographic questions (see Table 1). They were asked about their gender (e.g., male, female), racial identity (e.g., American Indian/Native Alaskan, Asian, Black/African American, Hispanic/Latino, More than one race, Native Hawaiian, Unknown, and White), and gender identity (e.g., cisgender woman, cisgender man, transgender woman, transgender man, genderqueer, questioning or I choose not to answer).

Sexual Assault

Students were asked two questions from the life events checklist (Gray et al., 2004). The first question was whether, in the past 12 months, they had experienced sexual assault (rape, attempted rape, made to perform any type of sexual act through force or threat of harm), with "yes" or "no" as response options. Students were also asked if, in the past 12 months, they had experienced other unwanted or uncomfortable sexual experiences, with "yes" or "no" response options.

Effects of Sexual Assault

Students were asked questions from the National Intimate Partner and Sexual Violence Survey (Centers for Disease Control and Prevention, 2015). They were asked to identify "yes" or "no" to whether they had experienced certain things as a result of the sexual assault, including fearfulness or fearing about safety, missed days of work or school, need for medical care, need for advocacy services, need for legal services, suicidal thoughts, and self-injurious behavior. Additionally, questions about PTSD symptoms included identifying "yes" or "no," whether they experienced avoiding situations that remind you of it, were constantly on guard, watchful, or easily startled, and felt numb or detached from others, activities, or your surroundings (Prins et al., 2016).

Support

To assess the level of support students had, they were asked questions from the Medical Outcomes Study social support measure (Sherbourne & Stewart, 1991). They were asked on a 4-point scale from "none of the time" to "all of the time" how often they had someone available to give good advice about a crisis, get together for relaxation, or confide in or talk about problems.

Analysis

Crosstabs with chi-square or odds ratio analyses were completed to examine racial differences in experiences of sexual violence and the effects of sexual assault. Analysis of variance (ANOVA) or independent *t*-tests were used to examine racial differences in social support. Racial differences were examined using two methods. The "race" variable was used as the original variable with 8 categories and collapsed into a variable with 2 options: people of color (POC; all racial identities not White) and White. Table 1 describes the gender and racial identity of the samples used for the analysis.

Table 1. *Demographics*

		n (%)
Gender Identity (n=2,131)[a]	Cisgender Woman	1603 (65.9%)
	Cisgender Men	759 (31.2%)
	Transgender Woman	2 (0.1%)
	Transgender Man	16 (0.7%)
	Gender queer	47 (1.9%)
	Questioning	36 (1.5%)
	Choose not to answer	41 (1.7%)
Gender (n=10,653)[b]	Female	6036 (61.5%)
	Male	3777 (38.5%)
Racial Identity (n=10,653)	American Indian/Native Alaskan	63 (0.5%)
	Asian	2056 (16.9%)
	Black/African American	2384 (19.6%)
	Hispanic/Latine	813 (6.7%)
	More than one race	814 (6.7%)
	Native Hawaiian	84 (0.7%)
	Unknown	41 (0.3%)
	White	5924 (48.6%)

Notes: All variables were collected in the first semester, first year of college; [a] Gender identity was collected in cohort 5 (n= 2,131); [b] Gender and Racial identify were collected in cohorts 1-5 (n=10,653)

Results

Sexual Assault

Overall, results showed that there are racial differences in experiences of sexual violence. See Table 2. Of the 247 students who stated they had experienced a sexual assault in the previous 12 months, 45% were students of color: 3 were American Indian, 17 identified as Asian, 54 identified as Black, 17 identified as Latine (i.e., Hispanic/Latino), 16 identified as more than one race, and 4 identified as Pacific Islander or Native Hawaiian. There were similar patterns when responding to the question of whether they had experienced another unwanted or uncomfortable sexual experience. Of the 921 who responded yes, 41% were students of color: 6 were American Indian, 107 identified as Asian, 132 identified as Black, 57 identified as Latine (Hispanic/Latino), 78 identified as more than one race, and 5 were Pacific Islander/Native Hawaiian.

Results of the chi-square analysis with all eight categories demonstrated there are significant differences in the number of sexual assaults students experienced based on their racial identification $p=.002$. There were also significant differences in other unwanted sexual experiences based on racial identification, $p<.001$. Using the collapsed person of color variable, an odds ratio analysis was also completed to understand how likely it would be for a person of color to experience sexual violence compared to a White person. There was not a significant difference in the odds of being sexually assaulted as a person of color compared to a White person. However, there was a significant difference in the odds of experiencing unwanted or uncomfortable sexual experiences as a person of color compared to a white person (*OR*=1.42 95% *CI* [1.248, 1.643].

Table 2. *Racial Identity by Sexual Violence and Effects*

Item Area	Question	American Indian/ Native Alaskan			Asian			Black/African-American			Hispanic/Latino		
		Yes	No	Total	Yes	No	Total	Yes	No	Total	Yes	No	Total
Sexual Assault (n=10,653)[a]	Sexual Assault	3 (6%)	47 (94%)	50	17 (1.1%)	1584 (98.9%)	1601	54 (3%)	1766 (97%)	1820	17 (2.6%)	633 (97.4%)	650
	Uncomfortable Sexual Experience	6 (12.2%)	43 (87.8%)	49	107 (6.7%)	1492 (93.3%)	1599	132 (7.3%)	1679 (92.7%)	1811	57 (8.8%)	591 (91.2%)	648
Effects of Sexual Assault (n=3,985)[b]	Fear for Safety	3 (18.8%)	13 (81.3%)	16	44 (10.2%)	388 (89.8%)	432	44 (9.2%)	435 (90.8%)	479	32 (15.4%)	176 (84.6%)	208
	Missed School	1 (6.3%)	15 (93.8%)	16	9 (2.1%)	423 (97.9%)	432	9 (1.9%)	470 (98.1%)	479	9 (4.3%)	199 (95.7%)	208
	Medical Care	0 (0%)	16 (100%)	16	5 (1.2%)	427 (98.8%)	432	4 (0.8%)	475 (99.2%)	479	5 (2.4%)	203 (97.6%)	208
	Advocacy	1 (6.3%)	15 (93.8%)	16	2 (0.5%)	430 (99.5%)	432	4 (0.8%)	475 (99.2%)	479	3 (1.4%)	205 (98.6%)	208
	Legal Services	0 (0%)	16 (100%)	16	6 (1.4%)	426 (98.6%)	432	2 (0.4%)	477 (99.6%)	479	4 (1.9%)	204 (98.1%)	208
	Suicidal Thoughts	1 (6.3%)	15 (93.8%)	16	19 (4.4%)	413 (95.6%)	432	18 (3.8%)	461 (96.2%)	479	17 (8.2%)	191 (91.8%)	208
	Thoughts-Self Injury	2 (12.5%)	14 (87.5%)	16	15 (3.5%)	417 (96.5%)	432	8 (1.7%)	471 (98.3%)	479	14 (6.7%)	194 (93.3%)	208
PTSD Symptoms (n= 1,854)[c]	Avoidant	1 (16.7%)	5 (83.3%)	6	76 (38.8%)	120 (61.2%)	196	69 (33.3%)	138 (66.7%)	207	27 (35.1%)	50 (64.9%)	77
	On Guard	4 (57.1%)	3 (42.9%)	7	70 (35.7%)	126 (64.3%)	196	61 (29.5%)	146 (70.5%)	207	24 (31.2%)	53 (68.8%)	77
	Numb or Detached	2 (33.3%)	4 (66.7%)	6	49 (24.9%)	148 (75.1%)	197	46 (22%)	163 (78%)	209	20 (25.6%)	58 (74.4%)	78

Note: All items were collected in the first semester, first year of college; [a] collected in cohorts 1-5 (n=10,653); [b] collected in cohorts 4 and 5 (n=3,985); [c] collected in cohort 4 (n= 1,854).

Item Area	Question	More Than One Race			Native Hawaiian & Other Pacific Islander			White			All Racial Identities		
		Yes	No	Total	Yes	No	Total	Yes	No	Total	Yes	No	Total
Sexual Assault (n=10,653)[a]	Sexual Assault	16 (2.6%)	605 (97.4%)	621	4 (6.3%)	60 (93.8%)	64	136 (2.8%)	4679 (97.2%)	4815	247 (2.6%)	9374 (97.4%)	9621
	Uncomfortable Sexual Experience	78 (12.6%)	543 (87.4%)	621	5 (7.8%)	59 (92.2%)	64	536 (11.1%)	4284 (88.9%)	4820	921 (9.6%)	8691 (90.4%)	9612
Effects of Sexual Assault (n=3,985)[b]	Fear for Safety	36 (18.5%)	159 (81.5%)	195	3 (15.8%)	16 (84.2%)	19	284 (25.5%)	831 (74.5%)	1115	446 (18.1%)	2018 (81.9%)	2464
	Missed School	9 (4.6%)	186 (95.4%)	195	0 (0%)	19 (100%)	19	69 (6.2%)	1046 (93.8%)	1115	106 (4.3%)	2358 (95.7%)	2464
	Medical Care	6 (3.1%)	189 (96.9%)	195	0 (0%)	19 (100%)	19	19 (1.7%)	1096 (98.3%)	1115	39 (1.6%)	2425 (98.4%)	2464
	Advocacy	6 (3.1%)	189 (96.9%)	195	0 (0%)	19 (100%)	19	37 (3.3%)	1078 (96.7%)	1115	53 (2.2%)	2411 (97.8%)	2464
	Legal Services	1 (0.5%)	194 (99.5%)	195	1 (5.3%)	18 (94.7%)	19	28 (2.5%)	1087 (97.5%)	1115	42 (1.7%)	2422 (98.3%)	2464
	Suicidal Thoughts	17 (8.7%)	178 (91.3%)	195	1 (5.3%)	18 (94.7%)	19	141 (12.6%)	974 (87.4%)	1115	214 (8.7%)	2250 (91.3%)	2464
	Thoughts-Self Injury	13 (6.7%)	182 (93.3%)	195	1 (5.3%)	18 (94.7%)	19	128 (11.5%)	987 (88.5%)	1115	181 (7.3%)	2283 (92.7%)	2464
PTSD Symptoms (n= 1,854)[c]	Avoidant	27 (32.5%)	56 (67.5%)	83	5 (55.6%)	4 (44.4%)	9	244 (36.3%)	428 (63.7%)	672	449 (35.9%)	801 (64.1%)	1250
	On Guard	25 (30.9%)	56 (69.1%)	81	4 (44.4%)	5 (55.6%)	9	235 (35%)	436 (65%)	671	423 (33.9%)	825 (66.1%)	1248
	Numb or Detached	18 (22.5%)	62 (77.5%)	80	2 (25%)	6 (75%)	8	203 (30.2%)	469 (69.8%)	672	340 (27.2%)	910 (72.8%)	1250

Note: All items were collected in the first semester, first year of college; [a] collected in cohorts 1-5 (n=10,653); [b] collected in cohorts 4 and 5 (n=3,985); [c] collected in cohort 4 (n= 1,854).

Effects of Sexual Assault

An odds ratio analysis was also done with the two groups to see if there were differences in the likelihood of experiencing certain effects of trauma. There were significant differences in the odds of having fear for your safety as a person of color compared to a White student (OR=2.54 95% CI [2.025, 3.097]), with students of color at a higher risk. There were also significant differences in the odds of exhibiting self-injurious behavior (OR=3.171 95% CI [2.278, 4.414]) and suicidal thoughts (OR=2.530 95% CI [1.885, 3.397]) with White students less likely to participate in self-injury or suicidal thoughts. There were significant differences in the odds of needing advocacy services (OR=2.860 95% CI [1.582, 5.168]) and legal services (OR=2.456 95% CI [1.287, 4.689], with students of color more likely to need advocacy and legal services. There were significant differences in the odds of missing school, with students of color more likely to miss school [OR=2.339 95% CI [1.556, 3.516]. There were not any significant differences in the odds of avoiding situations that reminded them of the assault, feeling numb or detached from others, activities, or surroundings, or seeking medical care.

Table 3. *Support by Racial Identity*

Support by Racial Identity	Total	None of the time	Some of the time	Most of the time	All of the time
Someone to give advice about a crisis					
American Indian/Native Alaskan	28	1 (3.6%)	5 (17.9%)	10 (35.7%)	12 (42.9%)
Asian	873	39 (4.5%)	225 (25.8%)	278 (31.8%)	331 (37.9%)
Black/ African American	1068	45 (4.2%)	200 (18.7%)	340 (31.8%)	483 (45.2%)
Hispanic/ Latino	351	10 (2.8%)	73 (20.8%)	110 (31.3%)	158 (45%)
More than one race	338	17 (5%)	60 (17.8%)	115 (34%)	146 (43.2%)
Native Hawaiian & Other Pacific Islander	40	3 (7.5%)	4 (10%)	13 (32.5%)	20 (50%)
White	2970	61 (2.1%)	512 (17.2%)	989 (33.3%)	1408 (47.4%)
All	5668	176 (3.1%)	1079 (19%)	1855 (32.7%)	2558 (45.1%)
Someone available to get together for relaxation					
American Indian/Native Alaskan	28	3 (10.7%)	1 (3.6%)	14 (50%)	10 (35.7%)
Asian	901	41 (4.6%)	225 (25%)	318 (35.3%)	317 (35.2%)
Black/African American	1078	65 (6%)	253 (23.5%)	370 (34.3%)	390 (36.2%)
Hispanic/Latino	353	12 (3.4%)	83 (23.5%)	118 (33.4%)	140 (39.7%)
More than one race	342	10 (2.9%)	84 (24.6%)	123 (36%)	125 (36.5%)
Native Hawaiian & Other Pacific Islander	41	0 (0%)	9 (22%)	16 (39%)	16 (39%)
White	2994	73 (2.4%)	576 (19.2%)	1085 (36.2%)	1260 (42.1%)
All	5737	204 (3.6%)	1231 (21.5%)	2044 (35.6%)	2258 (39.4%)
Someone available to talk to confide in your problems					
American Indian/Native Alaskan	28	2 (7.1%)	5 (17.9%)	8 (28.6%)	13 (46.4%)
Asian	903	43 (4.8%)	216 (23.9%)	268 (29.7%)	376 (41.6%)
Black/African American	1090	63 (5.8%)	228 (20.9%)	314 (28.8%)	485 (44.5%)
Hispanic/Latino	350	14 (4%)	69 (19.7%)	89 (25.4%)	178 (50.9%)
More than one race	344	15 (4.4%)	59 (17.2%)	107 (31.1%)	163 (47.4%)
Native Hawaiian & Other Pacific Islander	41	1 (2.4%)	6 (14.6%)	13 (31.7%)	21 (51.2%)
White	2995	67 (2.2%)	491 (16.4%)	867 (28.9%)	1570 (52.4%)
All	5751	205 (3.6%)	1074 (18.7%)	1666 (29%)	2806 (48.8%)

Note: Support items were collected first semester, first year of college in cohorts 1-3 (n=6,111).

Supports

Table 3 presents the frequencies for the three support variables separately by racial identity. The same mixed results were evident when examining the differences in having a support system. Results of an ANOVA demonstrated there were significant differences in having someone to give good advice during a crisis, $F(7, 5682)=9.696$, $p<.001$, with someone to confide in ($F(7, 5765)=8.855$, $p<.001$), and someone to get together for relaxation ($F(7, 5752)=7.163$, $p<.001$), between Black ($M=3.18$, $SD=.88$; $M=3.12$, $SD=.93$); $M=3.01$, $SD=.92$) and Asian ($M=3.03$, $SD=.90$; $M=3.08$, $SD=.92$; $M=3.01$, $SD=.89$), and White ($M=3.26$, $SD=.81$; $M=3.32$, $SD=.92$; $M=3.32$, $SD=.88$; $M=3.18$, $SD=.82$) and Asian students. Using *t*-tests to compare the two groups, there were significant differences in students of color ($M=3.26$, $SD=.88$) and White students ($M=3.13$, $SD=.89$) having someone available to give good advice about a crisis, $t(5666)=-5.741$), $p<.001$. There were also significant differences in students of color ($M=3.14$, $SD=.92$) and White students ($M=3.32$, $SD=.82$) having someone to confide in $t(5749)=-7.784$), $p<.001$. There were also significant differences in having someone to get together for relaxation $t(5735)=-6.634$, $p<.001$ between students of color (M=3.03, SD=.891) and White students ($M=3.18$, $SD=.82$).

Discussion

The results of this study demonstrate the need to consider the unique experiences of sexual assault and its effects based on racial identity. Overall, this study showed that self-identified race was significantly associated with sexual violence and its effects. This result aligns with the current literature (Coulter & Rankin, 2020).

College students of color may be more vulnerable for multiple reasons. First, there may be cultural norms among people of color that make them more vulnerable to experiencing sexual assault. For example, some say a cultural norm in Latin cultures is machismo, which is the idea that men should be aggressive and dominant (Halim et al., 2016). This may lead male-identifying students to pursue sex even with a non-consenting partner due to a belief that they are entitled to sex. This same idea may lead women to comply with what their partner wants despite their own reservations. This same subordinate social positioning of female-identifying people may exist in other cultures (Applin et al., 2023) that could have similar effects.

Second, racism and oppression may play a role in students of color experiencing both sexual violence and its effects. For example, suppose you have a White student in a socially advantageous position pursuing a student with a marginalized identity. In that case, the student of color may feel pressure to say yes because of their less dominant position. The student of color may also be hesitant to report if an assault happens because of this racial dynamic. Structural racism may also play a role in the higher prevalence of sexual assault among students of color. Sexual assault prevention programming is typically based on the experiences of White women (Karunaratne & Harris, 2022). Therefore, most programming is not culturally informed and sensitive. Students of color are participating in programming that is not responsive to their unique needs, experiences, or cultural norms, and they do not

have the tools to maintain consensual relationships within the context of their beliefs and perceptions.

Racism plays a role in yet another way. As previously mentioned, Black women are less likely to be aided to prevent an assault than White women; people are less likely to be active bystanders with Black women (Katz et al., 2017). Therefore, Black women are at a higher risk of experiencing sexual assault. Because of their shared status as people of color, the same could be assumed for Latine, Asian, Indigenous, and Mixed-race individuals; however, future research needs to be done to confirm this higher risk due to less bystander intervention. Third, students of color may be more likely to have other risk factors that put them at higher risk of experiencing sexual assault, including childhood sexual trauma (Papalia et al., 2021), current or previous poverty (Gillum, 2019), intimate partner or dating violence (Bagwell-Gray, 2021) or homelessness (Santa Maria et al., 2020). Racism and oppression also contribute to these risk factors for sexual violence victimization (Mosley et al., 2021). Therefore, addressing racism and oppression can play an important role in reducing sexual assault in communities of color.

Students of color are more vulnerable to experiencing uncomfortable or unwanted sexual experiences. Previous studies have demonstrated that after experiencing sexual violence, survivors of color are more likely to disclose to an informal source like a friend prior to or instead of a more formal one (Lindquist et al., 2013; Cusano et al., 2024). Perhaps there are cultural artifacts within these informal sources in communities of color that serve as protective factors against the negative mental health, relationship, and academic effects of experiencing sexual assault. Because of structural racism, communities of color often had to rely on informal resources when experiencing challenges (Comeaux et al., 2021); therefore, those more informal sources may be substantive and provide better support. Future research can explore those factors that may allow these communities to provide social support that may be protective against sexual violence and provide adequate help for survivors.

Results also demonstrated that there are nuanced results when looking at differences among specific racial groups. For example, there were only significant differences among Latine students in fear for their safety and whether they have broken relationships, with Latine students experiencing more fear and more broken relationships. Although this provides information that can be used to inform culturally responsive prevention programming, there is no consistency in the type of trauma effect, with one variable about mental health (i.e., fear of safety) and another about support (i.e., broken relationships). Despite some inconsistencies, some patterns emerged. For example, Asian students were less likely to have mental health or relationship effects or to miss school than other students of color. The average for having support was also the highest for Asian students. Perhaps future research can investigate the specific racial or cultural practices or belief systems that potentially lead Asian student survivors to have better outcomes.

Being culturally responsive and having cultural humility means individuals do not assume expertise in other cultures and do not support the idea that all of those who share a racial identity have a homogenous experience. With that in mind, rather than using this space to make assumptions about why racial differences exist in the prevalence of sexual

assault and other unwanted sexual experiences, it is important to use research to explore the unique cultural beliefs, practices, and perceptions that may increase the risk of sexual assault victimization.

Limitations

There are multiple limitations to this study. First, there is no timeline established, meaning we do not know if the sexual assault occurred prior to the trauma that led to help-seeking behaviors. However, the prompts of the survey do ask respondents to specifically think about the effects of sexual violence. Second is how sexual violence is assessed. The questions used to assess the prevalence of sexual assault are not in line with the most widely used measure of experiences of sexual violence, the Sexual Experiences Survey (Johnson et al., 2017). Using the most widely used validated measure may lead to more accurate results. There may be underreporting of instances of sexual violence because even though what a student experiences is a sexual assault, their definition may not align with what they perceive to be sexual assault. Therefore, it is possible that surveys are not capturing all experiences of sexual violence and its effects. This is one of the limitations of using secondary data; there is a lack of control over how the questions are asked. And because the best survey question was not used, the results may not represent the population. Third, there is a 60% chance of a false positive due to the number of statistical analyses that were performed. The limitations of self-reporting and social desirability also impact the likelihood that the responses reflect college students' beliefs, perspectives, and experiences. Some variables were only available in a subset of the sample rather than the full sample, which may also limit the representativeness of those findings. Even with these limitations, the larger sample can be used to embed protective factors in the larger community that could serve to reduce the risk of sexual assault; this information can benefit more than survivors.

Conclusions

Issues of power and oppression, including race, are not often considered contributing factors to the prevalence of sexual violence and survivor response to trauma. To have a fuller understanding of the issue of sexual violence, an intersectional and social justice approach must be utilized to understand the experiences of minoritized students (Klein et al., 2021). This intersectional approach must also be used in social work education when discussing issues such as gender-based violence and sexism. Because sexual violence is so prevalent and can have such profound effects on mental health, this work also reinforces the need to have more educational content around gender-based violence, with particular emphasis on racial disparities. Social work education must also consider the intersection of race and gender during discussions about developing intervention and prevention strategies. Current sexual violence prevention services do not take an intersectional approach and consider how racial inequity and racialized experiences lead to the perpetuation of violence. Because of this deficit, this study will impact how program developers create comprehensive sexual assault prevention programming and intervention services for survivors. In addition, there are social and cultural norms that impact how

people respond to survivors. Therefore, it is important to consider how racial attitudes can impact how individuals and institutions respond to survivor experiences. The results of this study can be used to better inform culturally sensitive and competent prevention programming in order to address the bias that may contribute to the continued perpetuation of sexual violence and resulting trauma.

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