

Risk Research Bulletin: Student Affairs

# Training Resident Assistants to Prevent Student Injuries

Most student injuries which occur in residence halls and lead to claims against higher education institutions result from defective premises or risky student behavior. This publication focuses on injuries from risky behavior that resident assistants (RAs)—who are often the first to observe the conduct—might be able to prevent. It does not address injuries from defective premises.

The most common actions that result in student injuries in residence halls are sexual assaults, physical assaults, slips and falls, self-inflicted harm, and use of alcohol and drugs, according to a United Educators (UE) study of more than 350 claims. For each behavior, this bulletin examines the claims data and recommends RA training based on lessons learned from the claims and interviews of residence life professionals. In addition, the bulletin includes role playing exercises to teach RAs how to respond to behaviors likely to cause injury.

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## Overview of UE's Claims Study

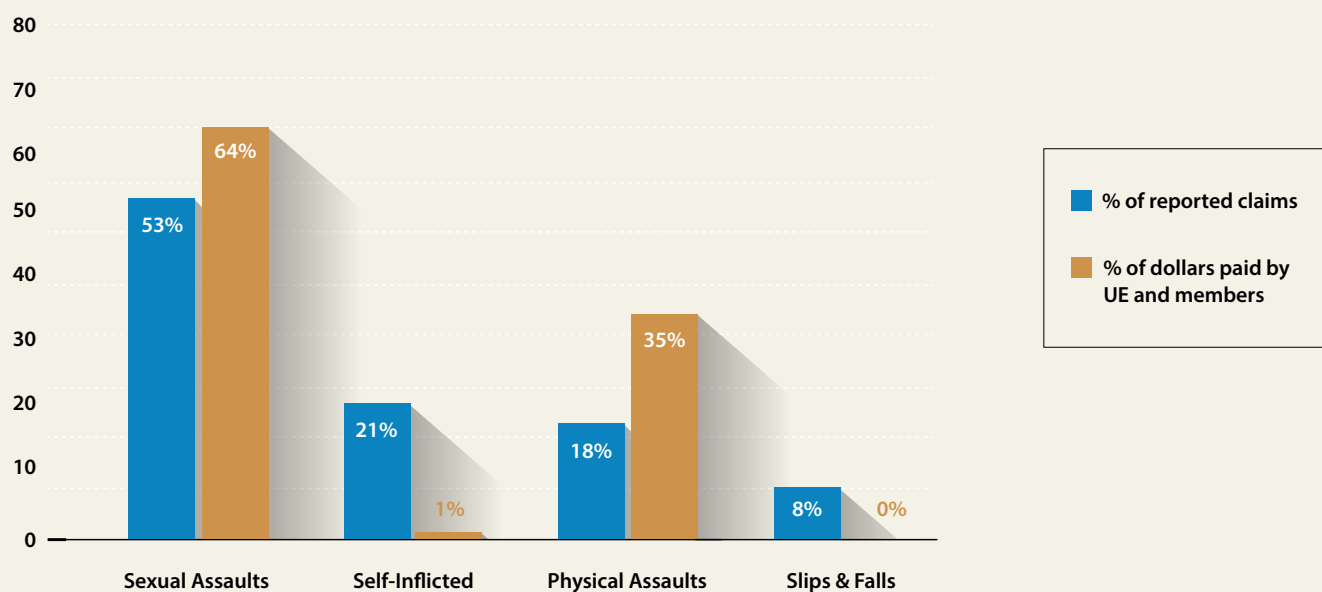
UE studied 350 claims that occurred in residence halls from 2005 to 2009. In many of these claims, UE paid part of the costs, and members paid part through their deductible or self-insured retention (SIR). UE and its members spent more than \$2.5 million in defense costs and payments to students or their families to resolve these claims.<sup>1</sup>

**Figure 1** shows the primary cause of injury among the 350 claims. While alcohol and drug use is not reflected on the chart, it was a contributing factor in almost half of the claims studied. The blue columns show the percentage of residence hall claims caused by each behavior. The orange columns indicate the percentage of the \$2.5 million UE and its members spent on each type of claim.



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Figure 1: Residence Hall Claims



<sup>1</sup> This study only includes losses from claims in which the total cost exceeded the institution's self-insured retention (SIR) or deductible. UE does not have sufficient data to analyze claims covered by an institution's SIR. However, all cost data reflected in this report include SIR amounts.

## Sexual Assaults

Sexual assaults accounted for 53 percent of the claims and 64 percent of the dollars UE and members paid. At least 40 percent of the sexual assault claims involved alcohol and/or drugs. For claims that identified the perpetrator, 87 percent involved an acquaintance of the injured student, while 13 percent were strangers. The following is a typical claim:

*A student alleged that another student raped her in their residence hall. The accused student was already on probation because of a history of violent behavior and vandalism of school property when he was drunk. The victim and accused had been friendly but did not have a prior sexual relationship.*



### RA Training

RAs need to know how to handle allegations of sexual assault occurring in residence halls or involving campus residents. Many institutions partner with their on-campus women's center or counseling center to provide training, which typically covers the definition of sexual assault, its frequency on campus, applicable policies or procedures, resources available, and the RA's responsibility after receiving an assault report. Based on lessons learned from UE's claims, a training program could address:

- Responding to a student who reports that he, she, or a friend has been sexually assaulted
- Understanding common concerns and feelings of sexual assault victims
- Encouraging a student to report an assault to appropriate officials
- Decreasing the risk of sexual assaults by enforcing visitation hours and guest policies, and ensuring security measures are in place
- Understanding the role of alcohol in many sexual assaults and explaining that the use of alcohol does not make the victim at fault

## Self-Inflicted Injuries

Self-inflicted injuries accounted for 21 percent of residence hall claims. More than half (55 percent) involved suicides, and 14 percent were attempted suicides. Accidental drug overdoses accounted for 17 percent of claims, and 13 percent involved alcohol poisoning. During the five-year period studied, self-inflicted injury claims only accounted for 1 percent of the dollars UE and members paid. However, in previous time periods, UE members have experienced significant costs from student suicide claims. In more than half of these claims, the use of alcohol or drugs either caused or contributed to the self-inflicted injury. The following is a typical claim:

*A student with a history of depression and a prior suicide attempt killed himself by jumping off a balcony. His parents contended that their son showed signs of severe emotional issues and depression, and that the college should have notified them of his recent difficulties or done more to help.*



### RA Training

A student death or serious injury can be devastating for a residence hall community. To help prepare RAs, institutions typically use their counseling centers to conduct training on warning signs, available resources, emergency situations, and the RA's obligation to report. Training programs could emphasize:

- Recognizing and acting on basic warning signs of depression
- Handling a situation in which a resident comes to ask for help or divulges alarming information about another student
- Recognizing when a resident needs professional help and referring him or her to the appropriate resource
- Handling an emergency situation and knowing whom to contact

**Self-inflicted injuries** accounted for **21 percent** of residence hall claims.



## Civil Assaults

Nearly 20 percent of residence hall claims resulted from physical assaults, a quarter of which involved alcohol and/or drugs. The physical assault claims in this study accounted for 35 percent of what UE and its members paid. In 70 percent of the claims, the assailant was a student or employee of the institution, while 21 percent of the assailants were visitors. In less than 10 percent of the claims, the assailant's status could not be determined from reported information.

In many of these claims, a previous confrontation or ongoing dispute led to the assault. Bullying and continued harassment were common themes. The following is an example of an assault that took place in a residence hall:

*A student who was assaulted by a fellow lacrosse player alleged that the school did not take adequate measures to protect him. The assailant harassed and bullied the student over a four-month period. The victim complained to student life officials, but they allowed the other student to remain on campus. The bully sneaked into the victim's room through a window with a broken lock and hit the victim multiple times with his lacrosse stick. The victim had reported the broken window lock to residence life staff but it was never fixed. The victim withdrew from school because he was traumatized by the assault and the ongoing bullying.*



### RA Training

Institutions can provide conflict mediation training to RAs to help them prevent smaller incidents from escalating.<sup>2</sup> Such training could help RAs to:

- Recognize conflicts that are likely to escalate
- Use a variety of methods to defuse conflicts between residents
- Understand options for referring students to counseling or mediation
- Know whom to contact if a physical altercation occurs in the residence hall
- Mitigate the risks of physical assaults by nonresidents by conducting rounds of the building
- Enforcing visitation hours and guest policies



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<sup>2</sup> For more information on mediation training for resident assistants, see Blimling, Gregory. *The Resident Assistant: Applications and Strategies for Working with College Students in Residence Halls*. Kendall/Hunt Publishing Company. 2003 6th edition. pp. 167–174.

## Slips & Falls

Slips & falls caused 8 percent of claims, which included falling down stairs, out of windows, off of fire escapes, and out of bunk beds and lofts. Nearly 90 percent of these claims involved use of alcohol and/or drugs, which may explain why only one of the injured students filed a lawsuit. The following is a typical claim:

*A student fell from the top bunk bed in his dorm room, suffering a broken jaw, a serious back injury, and minor paralysis in his hands. He had been drinking alcohol off campus earlier in the evening, which was a suspected factor in the fall.*



### RA Training

Training usually covers enforcement of residence hall safety rules, emergency response after a fall, and establishment of safety expectations among students. The goal of this training is to help RAs:

- Identify and enforce policies relating to student safety, such as a residence hall loft policy
- Reinforce safety procedures in the residence hall, such as keeping doors with roof access locked
- Report any violations of safety rules for potential disciplinary action
- Know how to respond and whom to contact in an emergency situation



## Alcohol & Other Drugs

Across all student claims involving significant injuries, alcohol and drug use is a prevalent contributing factor to the behaviors discussed above. At least 44 percent of the claims in this study involved alcohol and/or drugs, and these claims accounted for nearly half of the dollars UE and members paid. Because the use of alcohol and drugs is not always known or included in initial claim reports, we believe these numbers are probably higher.



### RA Training

Alcohol and drug use is common on many campuses but difficult to regulate, which puts RAs in a challenging position. If residents perceive them as “narcs” who report all violations, they may have difficulty establishing close relationships. On the other hand, if RAs routinely overlook violations, injuries can result in tragedy. Consequently, RAs need focused training. Typical topics include relevant policies and procedures, enforcement and reporting expectations, and emergency response protocols. Institutions can team up with their alcohol and drug coordinator or counseling center to develop programs for RAs on the dangers of dependency and the possible warning signs of such a problem. Some institutions use local or campus law enforcement personnel to discuss consequences for possession of illegal substances and paraphernalia. The training could help RAs:

- Recognize signs of substance dependency or abuse
- Refer students to on-campus resources for help with an alcohol or drug problem
- Organize available resources to help address this issue within their residence hall
- Be aware of their role in identifying and enforcing policies relating to student consumption, suspected parties, and medical amnesty for students who report a dangerous situation
- Identify signs of alcohol poisoning and know whom to contact
- Identify drug paraphernalia and know whom to contact if it is found

## Conclusion

RA training is good preparation for the difficult role RAs fill on campus and can also help reduce student injuries in residence halls and resulting claims. Focusing on the five areas identified and the competencies within each enables institutions to give RAs the knowledge, skills, and confidence to make a significant impact. Furthermore, institutions can provide year-round training to keep skills fresh and address new issues as they arise.



## Role-Playing Training Exercises

Many institutions use role-playing exercises with realistic scenarios to help RAs develop problem-solving skills. Colleges often call this training “Behind Closed Doors” because the RA does not know what situation he or she will encounter after knocking on a room door. UE has developed five scenarios that address the student behaviors most likely to result in injury. Each scenario includes questions designed to promote group discussion and lead to takeaways for the facilitator to emphasize.



### Running the Exercises

- Divide new RAs into small groups. For each exercise, select one of the RAs to participate in the roleplaying exercise. The others will discuss how the new RA handled the situation, analyzing what he or she did well or could have done differently.
- Use an experienced RA to portray a student who is confronting the new RA with a problem. Give the RA actor information about the “part” in advance so he or she can decide how to perform the situation. In addition, give the actors permission to improvise to make the situation as realistic as possible—without going overboard—for dramatic effect.
- The facilitator, who should be a professional student affairs administrator, must keep the proceedings on track, raise questions for discussion, and emphasize the takeaways. In addition, the facilitator should read the background information to the new RAs just before the scenario starts.

# Sexual Assaults

## Information to be read to the new RA

It's 2:30 a.m. and you just fell asleep 40 minutes ago after a long and tedious study session for an early morning exam. You are awakened by a frantic knock on your door and the sounds of a distressed student.

## Questions for Discussion

- The student asked that the RA not tell anyone about the incident. Can the RA keep this situation confidential?
- If the RA cannot keep this confidential, to whom should he or she report it?
- Since it is the middle of the night, can the RA wait until the morning to report this incident?

- Could the student's consumption of alcohol make her at fault?
- How can the RA show empathy without knowing the full story of what occurred?
- Should the RA try to determine the facts and investigate whether a sexual assault occurred?

## Takeaways

- ✓ Never promise confidentiality.
- ✓ Know to whom you should report situations requiring urgent attention.
- ✓ Understand the urgency of the situation, and always report a situation sooner rather than later.
- ✓ Consumption of alcohol or drugs does not make a victim of sexual assault at fault.
- ✓ Do not try to investigate the allegation of sexual assault. These investigations are handled by professionals.

## Information provided only to the actor

You are playing a student who was sexually assaulted by a guy you met at a party. You go to your RA for help when you get back to the residence hall at 2:30 a.m. You are very upset and not entirely coherent. You are not old enough to drink, but you had a number of drinks at the party. Consequently, you beg the RA not to tell anyone because you do not want to get in trouble for underage drinking.



## Role-Playing Training Scenario 2

# Self-Inflicted Injury

### Information to be read to the new RA

One of your residents tells you that he is concerned about his roommate's recent behavior. According to the resident, his roommate has been drinking by himself at night and sleeping most of the day since he broke up with his girlfriend two weeks ago. He has been skipping class, eating very little, and has stopped socializing with others on the hall. You decide to go talk to the student.

### Questions for Discussion

- What questions should the RA ask to probe deeper?
- Where can the RA find guidance?
- Whom could the RA contact in this situation? Does the contact person change if it is an emergency?
- What should the RA do if he or she is not sure whether the student is suffering from depression?
- What should the RA do if he or she determines the student is not showing signs of depression?

### Takeaways

- ✓ Know how to recognize possible signs of concern and when to probe deeper.
- ✓ Recognize that an RA is not a mental health professional, and know whom to call for help.
- ✓ When in doubt, err on the side of caution.
- ✓ If you decide not to escalate the situation, know how to document the incident and whom you should inform.



**Information provided only to the actor**

You were treated for depression in high school but don't want anyone to know about it. You recently broke up with your girlfriend and are feeling down, but you think you will get over it soon. You don't like people prying into your private affairs and are trying to make a fresh start in college.



# Civil Assaults

## Information to be read to the new RA

You overhear one of your residents talking on his phone saying, "If my roommate doesn't leave me alone, I'm going to tell him I have a gun." You decide to confront the student and find out what is going on.

## Questions for Discussion

- Should the RA investigate by talking to the other roommate and other residents, or should the RA report the situation to someone higher up and ask for help?
- If the RA decides to investigate, how can the RA verify what really occurred and whether the student actually has a gun?
- If the RA decides to obtain help, what campus resources are available to help resolve disagreements between students?
- What should the RA do if a bully or harasser does not see anything wrong with his behavior?
- Should the RA recommend switching the roommates to defuse the situation?

## Takeaways

- ✓ Physical assaults are often preceded by a pattern of harassment or bullying.
- ✓ When in doubt, RAs should find ways to resolve conflicts before they escalate.
- ✓ Know what resources are available for help before you decide whether to handle the situation yourself or report it.
- ✓ When trying to resolve a dispute, be sure to get both sides of the story and verify as many facts as possible.

## Information provided only to the actor

You think your roommate is going too far with his "practical jokes." He has smeared shaving cream all over your sheets and hid your room key, making you late to class. He also took a picture of you in your underwear and emailed the picture to his friends with the tagline "my dorky roommate." You have told him to stop, but he says you don't have a sense of humor and called you a "baby."

# Slips & Falls

## Information to be read to the new RA

### Part 1

While talking to a resident in his room, you notice that the safety rails are not on the bunk bed, which is mandated by institutional policy. You need to tell him to put the rails in place but still try to preserve your relationship.

### Part 2

After a couple of weeks, you return to the room and see that the safety rails are not in place again. You are upset and need to decide what to do.

## Questions for Discussion

- What did the RA do right and wrong in Part 1? Part 2?
- Should the RA give the student a second chance to comply?
- If the RA gives the student a second chance, how should this be documented?
- Whom should the RA contact if students don't comply with safety rules?

## Takeaways

- ✓ Always enforce safety rules and regulations.
- ✓ Act promptly to resolve any safety issues and document your actions.
- ✓ Follow up to ensure compliance.
- ✓ Report any students who refuse to comply with safety regulations.

## Information provided only to the actor

### Part 1

Your RA is a stickler for rules and is not happy that you do not have your bunk bed safety rail in place, which she says is required by institutional policy. You know that many students in other residence halls do not have safety rails on their bunk beds, but their RAs are not as strict. Eventually, you agree to put the rails on, but then you forget.

### Part 2

About two weeks later the RA comes back and notices that you don't have the rail up. She is very upset with you, but you think she is being totally unreasonable and making a big deal about a small issue.

# Use of Alcohol & Other Drugs

## Information to be read to the new RA

You notice that Dave, a resident of yours, has increasingly been showing signs of intoxication several days a week. You have seen him stumble down stairs and have heard him make loud noises late at night, and you know he has missed morning classes. One morning, you find vandalism in the hallway and, as you ask around, it becomes clear that Dave probably had something to do with it. You decide to go talk with Dave.

## Questions for Discussion

- Should the vandalism be handled as a separate issue from the potential alcohol problem?
- Has Dave exhibited enough signs that it's appropriate to intervene?
- If the RA decides to intervene, what's the best approach to take?
- Where can the RA go to get Dave help or for assistance in making a decision?

## Takeaways

- ✓ Student health and safety are the top priorities.
- ✓ The alcohol and drug policy must be enforced.
- ✓ Recognize when to call for help or backup.
- ✓ Know what resources are available for students of concern.



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