Distribution Agreement

In presenting this thesis or dissertation as a partial fulfillment of the requirements for an advanced degree from Emory University, I hereby grant to Emory University and its agents the non-exclusive license to archive, make accessible, and display my thesis or dissertation in whole or in part in all forms of media, now or hereafter known, including display on the world wide web. I understand that I may select some access restrictions as part of the online submission of this thesis or dissertation. I retain all ownership rights to the copyright of the thesis or dissertation. I also retain the right to use in future works (such as articles or books) all or part of this thesis or dissertation.

Signature:

Amanda Fitzpatrick

Date

Examining Global Health Fieldwork Pre-Departure Training on Sexual Harassment and Assault for Students

By

Amanda Fitzpatrick MPH

Hubert Department of Global Health Rollins School of Public Health Emory University

James V. Lavery, PhD, MSc Committee Chair Department of Global Health Rollins School of Public Health Emory University

Rachel Hall-Clifford, PhD, MPH, MSc Committee Member Department of Sociology Emory University

Examining Global Health Fieldwork Pre-Departure Training on Sexual Harassment and Assault for Students

By AMANDA FITZPATRICK

Master of Public Health Department of Global Health Rollins School of Public Health Emory University

Bachelor of Linguistics Washington University in St. Louis 2017

Thesis Committee

James V. Lavery, PhD, MSc Committee Chair

Rachel Hall-Clifford, PhD, MPH, MSc Committee Member

An abstract submitted to the Faculty of the Hubert Department of Global Health Rollins School of Public Health of Emory University in partial fulfillment of the requirements for the degree of Master of Public 2021

Abstract

Examining Global Health Fieldwork Pre-Departure Training on Sexual Harassment and Assault

Global fieldwork can be an important opportunity for global health students to gain research experience and invaluable skills for their future careers. However, many global health students' fieldwork experience is marred by sexual assault and harassment that can have a profound impact on not only the mental health and wellbeing of students but also their career trajectories. An opportunity to mitigate the negative consequences of sexual assault and harassment in the field is a pre-departure training that addresses these topics. The purpose of this study was to describe common pre-departure training practices for global health students conducting fieldwork abroad with emphasis on sexual assault and harassment. A cross-sectional survey was distributed through the Consortium of Universities for Global Health (CUGH) monthly bulletin asking participants to describe the pre-departure training at their institutions. Results were analyzed to identify useful descriptive statistics and common themes. The survey did not achieve a large enough sample size to produce generalizable results, but it did provide insight into the structure of pre-departure training at global health institutions. The data show that pre-departure training programs are developed with the involvement of multiple individuals across the university. Additionally, there are no mechanisms like conferences or newsletters for institutions to easily share information about their pre-departure training with each other, and organizations like CUGH do not foster conversation about sexual assault and harassment in the field. These findings explain why this topic is so challenging to research and why the response rate for this survey was so low. The data from this survey can be used to inform a more thorough study. The survey has been successfully piloted and can be used with different distribution methods to gain generalizable information that could help to improve pre-departure training at global health universities. The improvement of these trainings would positively impact the health and wellbeing of global health students conducting global fieldwork.

> By AMANDA FITZPATRICK

Examining Global Health Fieldwork Pre-Departure Training on Sexual Harassment and Assault for Students

By AMANDA FITZPATRICK

Master of Public Health Department of Global Health Rollins School of Public Health Emory University

Bachelor of Linguistics Washington University in St. Louis 2017

Thesis Committee

James V. Lavery, PhD, MSc Committee Chair

Rachel Hall-Clifford, PhD, MPH, MSc Committee Member

A thesis submitted to the Faculty of the Hubert Department of Global Health Rollins School of Public Health of Emory University in partial fulfillment of the requirements for the degree of Master of Public 2021

Acknowledgements

Many individuals have offered their support and guidance throughout the process of this thesis. I want to thank Dr. James V. Lavery of the Hubert Department of Global Health for his support and guidance throughout the past year of creating this project. I also would like to thank Dr. Rachel Hall-Clifford of Emory University's Sociology Department for her willingness to assist with this project and offer her expertise. I would also like to thank the staff at CUGH for their belief in this project and assistance with the distribution of the survey. I also would like to thank my parents and friends, for all of their encouragement over the last two years.

Table of Contents

Introduction	1
Definition of Terms	2
Background	2
Safety of Researchers	2
Sexual Assault and Harassment in Fieldwork	4
Preparation for the Field	6
Gender and Global Health	9
Paths Forward	10
Methods	11
Population and Sample	11
Procedures	12
Data Analysis	13
Ethical considerations	13
Results	13
Sample	13
Pre-Departure Training	14
Discussion	16
Limitations	19
Conclusion	22
References	23
Appendix: Survey	26

Introduction

Global health field experiences can be an invaluable opportunity for students to learn about global health fieldwork and gain necessary skills for their future careers. For students conducting global health fieldwork, the experience can provide learning opportunities and have positive impacts on the future of their career (Nelson, Rutherford, Hinde, & Clancy, 2017). Unfortunately, for many students, global fieldwork experiences are marred by incidents of sexual assault and harassment that overshadow the experience, cause intense distress, and can affect their choice to continue a career in global health (Clancy, Nelson, Rutherford, & Hinde, 2014; Mathad et al., 2019; McAuliffe, Upshur, Sellen, & Di Ruggiero, 2019a). Individuals who experienced sexual assault and harassment in the field note that better training before entering the field could have more appropriately prepared them for the possibility of gender-based violence in the field (Kloss, 2016; Ridde, Dagenais, & Daigneault, 2019; Sharp & Kremer, 2006). Given that universities often provide pre-departure training for students conducting global fieldwork abroad, there is an opportunity to implement training that can prepare students for sexual assault or harassment they might experience in the field and potentially mitigate some of the negative consequences.

Unfortunately, there is currently a large gap in knowledge about what are current best practices for pre-departure training specific to global health fieldwork. There is little data about what is included in pre-departure training and no information on what resources are used to design a training discussing sexual assault or harassment. Without these data, universities are unable to compare their training to peer institutions and gauge the quality of their training. This study attempted to fill this gap in knowledge by describing common pre-departure training practices for global health students conducting fieldwork abroad with an emphasis on sexual assault and harassment. Filling this gap in knowledge would allow institutions to create better pre-departure training, which would then improve the wellbeing of their students.

Definition of Terms

This study uses the following definitions of sexual assault and sexual harassment. Sexual assault, defined by WomensLaw.Org is "unwanted sexual contact, often committed by force, including rape" ("Sexual Assault/Rape," n.d.). Sexual harassment, defined by the U.S. Equal Employment Opportunity Commission, is "unwelcome sexual advances, requests for sexual favors, and other verbal or physical harassment of a sexual nature" ("Sexual Harassment, n.d.).

Background

This study focused on a specific problem that involves the combination of several factors: global health fieldwork, students, gender, pre-departure training, and sexual harassment. Very little published literature addresses the intersection of all these factors, so to gain an understanding of the current ideas and discussions surrounding this topic, other resources including personal testimony and commentaries must be consulted. Through the triangulation of these different perspectives, an incomplete but still illuminating picture can be formed about women in global health, student research in global health, and sexual assault and harassment of researchers. The comparison of existing sources also highlights a clear gap in knowledge about pre-departure training and prevention of sexual assault and harassment for university students participating in global fieldwork, particularly that there is no knowledge about what is currently used in training and what sexual assault and harassment training is most effective.

Safety of Researchers

While this study is specific to gender-based harassment and sexual assault of students in the field, it is part of a larger conversation about the safety of fieldworkers in general and the ethics of conducting research in the field. This conversation includes how individuals of different marginalized identities are impacted by the fieldwork environment, and what can to be done to support every individual during fieldwork experiences.

Fieldwork experience for graduate students can be damaging to an individual's mental health, and certain individuals are at even greater risk based on factors like their race, gender, sexuality, and religion. Global health research in general can cause secondary trauma, moral distress, and compassion fatigue from both direct and indirect exposure to traumatic or distressing information (McAuliffe et al., 2019a). In an article about the distress that accompanies participatory action research specifically, Klocker described a researcher who transcribed qualitative interviews about child domestic workers. These interviews contained distressing information about young children experiencing assault while participating in domestic work. Even though this researcher was not conducting the interview and did not directly interact with a traumatized research participant, it was still very difficult for them to hear the accounts, which greatly affected their mental wellbeing (Klocker, 2015). Conducting global health research can have a significant impact on fieldworkers' mental health.

Researchers who are marginalized for different reasons, including race/ethnicity, sexual orientation, disability, gender, or religion, could experience harassment while conducting fieldwork of any discipline (Demery & Pipkin, 2020). At Imperial College London, students studying for a master's degree in petroleum geoscience used to be required to take a field course in Oman, a country where same-sex relations are criminalized. After students pushed the department to create an experience that was safe for all researchers, the department replaced the trip with a classroom course (Viglione, 2020). In this instance, the university was able to address the concerns of the students, but students should not have been worried about their safety in the

first place (Viglione, 2020). Researchers working in their home countries can face safety risks as well, as Deja Perkins an ecologist at North Carolina State University described to Giuliana Viglione for an article in *Nature* (Viglione, 2020). Perkins explained that as a Black woman, she faced catcalls and harassment while in the field but did not feel comfortable calling the police if she was in a dangerous situation (Viglione, 2020). Amelia-Juliette Demery and Monique Pipkin, an evolutionary biologist and ecologist respectively at Cornell University, created their own guidelines (cf. Demery & Pipkin, 2020) to protect at-risk individuals from identity-based harassment. These guidelines are an important start to ensure safe fieldwork experiences for all researchers, but further research and awareness work must be done.

Sexual Assault and Harassment in Fieldwork

While few studies about sexual assault and harassment in fieldwork are published, there are several key articles that provide evidence of the scope and prevalence of the problem. Published in 2014, the "Survey of Academic Field Experience (SAFE): Trainees Report Harassment and Assault," conducted by Clancy et al. is a key research project that demonstrates the high prevalence of assault among researchers in the field. 64% of participants had personally experienced inappropriate comments, and over 20% had personally experienced sexual assault. Overwhelmingly, most of those who experienced assault were trainees or employees, indicating that this problem is tied to power dynamics at worksites (Clancy et al., 2014). This study shows that sexual assault and harassment are an all-too-common experience for fieldworkers.

The threat of sexual assault and harassment can cause serious impacts on the field experience and have longer term career implications. Positive experiences in the field can have positive impacts on an individual's career, while a negative field experience can harm career trajectories (Nelson et al., 2017). Women working in the field are deeply concerned about the impact sexual orientation, gender discrimination, and assault can have on research, and the experience of sexual assault or harassment can overshadow the entire field work experience. (McAuliffe, Upshur, Sellen, & Di Ruggiero, 2019b; Pollard, 2009). When women do take steps for their personal safety or are unable to completely immerse themselves in the community for fear of sexual violence, data collection can be affected (Ross, 2015). For women in the field, mental energy is spent on concerns about assault and harassment, distracting from their work.

The research process itself can be dangerous for researchers. Studies have been conducted examining how commonly held beliefs about proper research techniques are putting fieldworkers in danger, particularly women (Hanson & Richards, 2017; Harries, 2016). A qualitative study conducted by Hanson and Richards demonstrated how researchers feel obligated to make riskier choices for that sake of their data. Study participants discussed how they thought solitary research was necessary for high quality data, and one participant described feeling as if she was comprising her study by asking male friends to accompany her on data collection when she felt unsafe (Hanson & Richards, 2017). Participants also described prioritizing intimacy between themselves and the subject, which they believed would produce better data, even if that meant meeting with subjects outside of working hours, which could put the researcher at risk (Hanson & Richards, 2017). Recalling her own experience with fieldwork, Sharp described how she would interview men alone in rural areas to protect the participants' confidentiality without thought to how the isolation of the interview could pose risks to herself (Sharp & Kremer, 2006). The nature of social science research means that subjects and their comfort are prioritized, sometimes at the risk of the researcher (Sharp & Kremer, 2006). The methods taught to many social scientists for qualitative data collection, including establishing

intimacy and putting the subject at ease, can pose serious threats to the researcher's safety, but many researchers believe they are necessary for high quality data.

The aftermath of sexual violence can also be extremely difficult to work through, and when speaking up about incidents, survivors can be made to believe that it was their fault. A graduate student interviewed for Hanson and Richards's study who was verbally harassed by one of her participants said that when she reported the incident, she was told she "should have expected it" because she was spending time with the subject late in the evening to create intimacy, something she had been taught to do in order to record high quality data (Hanson & Richards, 2017). In an Op-Ed for the *Health and Human Rights Journal*, Hall-Clifford described harassment and assault from community members while living abroad and conducting fieldwork. When she shared her experience with colleagues, she was met with questions about what she did protect herself and why she did not take more precautions. As she explains, "these questions seemed to indicate a larger point being lost. My technique and skill as a fieldworker was being questioned in light of gender-based violence-not our paradigms of conducting fieldwork or assessing its successful completion" (Hall-Clifford, 2019). Cultural shifts must take place to ensure that when survivors report or share their experience they are not made to feel that it was their fault. Making this shift can help survivors feel supported and can begin conversations that are necessary to make lasting change.

Preparation for the Field

In addition to questioning research methods and responses to survivors, how researchers are prepared for the field must be critically examined. Many individuals who have shared testimonies or op-eds about their experience with sexual assault or harassment while conducting fieldwork note that they were not given any preparation for how to keep themselves safe in the

Page 6

field (Kloss, 2016; Ridde et al., 2019; Sharp & Kremer, 2006). In her article analyzing neglected aspects of social science research, Kloss concluded that "to prepare and empower particularly early-career researchers anthropological training has to address the issue of gendered and sexual(ized) violence" (Kloss, 2016). In considering the preparation for fieldwork, Sharp and Kremer, in a 2006 literature review supplemented by their own experience, explain that, "no one prepared researchers for what they would encounter. Researchers were left on their own to develop safety measures and had no training from their departments or universities on safety during field work" (Sharp & Kremer, 2006). Studies with a wider population have concluded that the lack of preparation for sexual assault or harassment is not isolated to a few individuals (Hanson & Richards, 2017). University policies must be examined to understand the extent to which sexual assault and harassment are or are not being incorporated into pre-departure training for global fieldwork.

The lack of preparation is particularly troubling given that sexual assault and harassment is more likely to negatively affect a student's career trajectory than when directed toward faculty (Clancy et al., 2014). Pre-departure training provided by universities are relatively common for students participating in global health work, but research rarely specifically addresses sexual assault or harassment. Systematic reviews and commentaries have been published analyzing different pre-departure training programs and making recommendations for improvement, but none mention sexual assault (Bessette & Camden, 2017; Kalbarczyk, Nagourney, Martin, Chen, & Hansoti, 2019; Kung, 2018; Purkey & Hollaar, 2016; Wallace & Webb, 2014). Studies confirm that pre-departure training in general can be effective and what topics are most useful to students, but again none of these studies mention assault or harassment (Chan, Liu, Fung, Tsang, & Yuen, 2018; Kironji et al., 2018). The lack of peer-reviewed literature on sexual assault and

harassment training specifically can make it difficult for anyone wanting to improve this portion of an institution's training, since literature provides no guidance.

While few schools make public the content from their pre-departure training, several recommendations and handbooks have been published as guidelines. At Johns Hopkins University School of Medicine, a handbook was published combining other published literature and known best practices, which is not meant to replace pre-departure training but is meant to be used by anyone participating in a global health experience to prepare for the research (Chen & Edwardson, 2014). The handbook provides a very broad overview of how to prepare for the global experience and a general timeline for preparation, but only a brief mention of anything related to sexual assault or harassment. The discussion of "gender issues" includes only the following recommendation: "Consider the potentially different gender roles as you plan your work in a different culture" (Chen & Edwardson, 2014). The Berman Institute of Bioethics at Johns Hopkins University also created a case series with Stanford University that "introduces trainees and others involved in global health research and service to ethical issues that may arise during short-term training experiences abroad." This case series includes only three vignettes on personal safety, all of which involve a male at risk for tuberculosis infection, and do not address the gendered risks that can arise during fieldwork (Barry, Sugarman, DeCamp, Richardson, & Rodriguez). A publicly available report from 2017 for the University of Washington titled "Preventing Harassment in Fieldwork Situations," provides five areas for the school to take action to address the problem, including adding training to prepare individuals for harassment in the field (Woodgate et al., 2018). These three resources provide insight into what is included in pre-departure training and how frequently sexual assault and harassment are left out.

Gender and Global Health

In addition to understanding harassment of fieldworkers, a thorough background of this topic also includes an understanding of gender in the global health field broadly. While the percent of organizations and governing bodies with at least a third of senior management roles occupied by women has risen from 56% to 65% from 2018 to 2020, the rate of this increase means that gender parity in these roles will not be achieved until 2074 (*The Global Health 50/50 Report 2020: Power, Privilege, and Priorities*, 2020). Additionally, only 27% and 32% of CEOs and board chairs respectively were women (*The Global Health 50/50 Report 2020: Power, Privilege, and Priorities*, 2020).

The lack of women in leadership positions can partly be attributed to barriers that women face in order to conduct effective work and advance their careers as well as unpaid work women take on. Women have challenges related to their gender including work-life balance, gender discrimination, and sexual assault or harassment (Mathad et al., 2019). Additionally, women conduct more unpaid labor than men in global health. This includes how women are overrepresented in unpaid community health work, the fact that women are taking more unpaid and underpaid internships, and the unpaid intellectual labor and service women academics contribute (McBride, Mitra, Kondo, Elmi, & Kamal, 2018). Unpaid internships in particular can create a dynamic where women are financially dependent on others and are unable to leave an unhealthy situation, whether that is a work environment that includes sexual harassment or an abusive relationship (McBride et al., 2018). Women often do not report the unsafe work environments or incidents of harassment because they worry that their careers will be impacted, which results in feelings of fear and resignation (Mathad et al., 2019). These barriers can keep women from advancing in leadership at organizations, resulting in the lack of gender equality at the highest levels of global health.

While preventing harassment can improve career trajectories for women, everyone who works in global health must commit to both gender equity and the prevention of sexual assault and harassment. It is not solely the responsibility of women to prevent gender-based violence. A safe work environment and field site requires work from everyone to protect all genders. Additionally, while the data above only discusses cisgender women, equity in the global health field and safety while conducting global health work must be ensured for those who are not cisgender as well. Preventing sexual assault and harassment in global health fieldwork is an essential step to promoting equality of all genders in the entire field of global health.

Paths Forward

Given the many varied factors that result in sexual assault and harassment of fieldworkers, particularly students, there are many different discussions about how to address the problem from researchers, institutional experts, and individuals who have been directly affected. Suggestions include better training prior to entering the field (Colaninno, Lambert, Beahm, & Drexler, 2020; "#MeToo Meets Global Health: A Call to Action," 2019; Ridde et al., 2019), better institutional support for researchers in the field (Colaninno et al., 2020; "#MeToo Meets Global Health: A Call to Action," 2019), and changes to institutional and worksite hierarchies and structure (Colaninno et al., 2020; Johnson, Widnall, & Benya, 2018; Nelson et al., 2017; Ridde et al., 2019).

Preventing sexual assault and harassment of fieldworkers will require an approach that incorporates all of these strategies, but pre-departure training for university students is an important place to start. As demonstrated above, students are particularly vulnerable to sexual assault and harassment, and pre-departure training is an opportunity to better prepare students for the field, which is a commonly recommended step to take. A proper training that addresses sexual assault and harassment can mitigate the impacts on students' wellbeing and careers. Additionally, improving pre-departure training can be done quickly and address a population where there is great need. However, a lack of information exists on best practices for predeparture training related to sexual assault and harassment. Filling this gap in knowledge is an important step before substantial changes can be made to pre-departure training at universities.

Methods

This project attempted to contribute to the gap in published knowledge about predeparture training for global health students conducting global health fieldwork, particularly how pre-departure training addresses sexual assault or harassment students might experience. The purpose of this study was to describe common pre-departure training practices for global health students conducting fieldwork abroad with emphasis on sexual assault and harassment.

Population and Sample

The population of the study was individuals who work at universities that have global health fieldwork programs for students. Individuals affiliated with these universities that receive the Consortium of Universities for Global Health (CUGH) monthly bulletin were sampled to answer the survey about their university's pre-departure training policies. This population was selected to facilitate quick data collection while still recruiting a diverse sample. The CUGH bulletin reaches a large number of individuals who are affiliated with many different kinds of institutions which researchers hoped would provide insight into practices across different universities. The survey sample included four individuals who held different positions at their respective universities. The survey was conducted virtually through REDCap.

Procedures

This study was a cross-sectional survey that included quantitative and qualitative questions. The survey was meant to assess the most common features of pre-departure training for global fieldwork with a focus on sexual assault and harassment in fieldwork. Before the survey was written, a literature review was conducted to confirm that there are not existing publications on pre-departure training specific to sexual assault. Research was also done into publicly available pre-departure training materials from different universities. This research informed the scope and questions of the survey. For example, publicly available pre-departure training materials showed that training is often separated into modules by topic, and this information guided the creation of questions that discussed training modules. The survey was created through several rounds of revision and edits by the research team, including extensive input from Professor Jim Lavery and Professor Rachel Hall-Clifford of Emory University. Professor Hall-Clifford has expertise in design of global fieldwork pre-departure training about sexual assault and harassment. The survey was initially piloted with four individuals. The pilot group was selected for several key similarities to the study's sample population: a relative unfamiliarity with the study, affiliation with a higher education institutions, knowledge of global field experiences, and a high level of survey literacy. Once the pilot was complete, a final round of revisions incorporating feedback from the pilot group was performed. The complete survey is included in the Appendix.

Once the survey was created and piloted, it was distributed via a link to the REDCap survey. The link was shared with participants through the CUGH February bulletin, and the survey was open for three weeks.

Data Analysis

Researchers cleaned the quantitative data and input it into Excel. While viewing each response in full, the researcher identified patterns within each participant's data, such as consistently thorough responses for the entire survey or sparse responses in certain sections. With all the data in Excel, analysis was conducted across participants. Descriptive statistics were calculated for all variables and the most relevant statistics were identified for further discussion. The data gained from open response questions were reviewed and analyzed in REDCap. Important themes were identified and noted by the researcher.

Ethical considerations

This study posed minimal risks to participants. All forced choice questions in the survey did not reveal identifying information about the participant. Any data from open response questions was de-identified for analysis and reporting. To ensure anonymity, participants were not asked to identify their institution. This decision was made to protect participants and to encourage more participation. REDCap was chosen as the survey platform because it provides data protection and privacy. No identifying information was collected about the participants and all answers were anonymous. This project was approved by the Institutional Review Board of Emory University in the United States (IRB00001950).

Results

Sample

Four respondents completed the survey. They each represented a different aspect of higher education: department head, student, administrative staff, and faculty. The student was not involved with the creation or administration of the training, but the other three respondents did play a role. One assisted with the design and development of the training, one was primarily

responsible for the creation and implementation of the training, and one was both responsible for the creation of the training and had the administrative and budgetary authority to implement the training.

The sample also represented different institutions. Two were primarily located in North America, one in Asia, and one in Africa. Three of the institutions offered undergraduate, graduate, and professional degrees, while the fourth only offered undergraduate and graduate degrees. Three of the institutions provided students with the opportunity to participate in global field work, but none of the institutions required global fieldwork as a part of any of the offered degree programs.

Pre-Departure Training

One of the four respondents did not have a pre-departure training at their institution. Two of the three institutions that did having training required it for all students going abroad in all degree programs. The final respondent did not know if students in degree programs other than public health and medical students were required to attend a pre-departure training. At only one institution did students receive credit hours (one credit hour for both public health master's students and public health doctoral students). One pre-departure training includes information that is specific to the country of fieldwork. This involved meetings between students and faculty who provide country specific information including details about history, safety risk, the healthcare system, and disease prevention. All the three institutions that did have a pre-departure training also had a debriefing process for students when they returned from the field. Included in these debriefings are follow up surveys, individual reflection or writing assignments, and a one-on-one discussion with a faculty member.

After general questions about pre-departure training, respondents were asked about the incorporation of sexual assault and harassment in the survey. Of the three institutions that had pre-departure training for students, two addressed sexual assault and harassment in that training. The two respondents that did report having a sexual assault or harassment training said that this information was communicated in a separate module from other information, and these modules made up less than 25% of the total training. Respondents reported that the training provides guidance for what students can do to mitigate sexual assault and what steps to take if they do experience assault or harassment. This guidance includes the discussion of emergency services available to students abroad and what confidentiality measures apply to reporting of incidents. The respondents also reported that the training addresses the intersectionality of students' identities by discussing sexual orientation, gender identity, and race, and how these aspects of identity might affect the experience of sexual assault or harassment.

The survey also asked respondents to report on the supports their institutions provide for students conducting global fieldwork. Only one of the four respondents reported that students had at least one designated faculty member with whom they can speak about concerns prior to departure. The options for the students were the director of global health programs, the Title IX coordinator, or the faculty leader of their abroad program. Three of the respondents did not know what reporting mechanisms were available for students if they did experience an incident of sexual assault or harassment in the field, while the fourth respondent reported that students were told to use the reporting mechanism at the institution required by Title IX. The way to report through this mechanism was told to students during the training and was available on a website for students. Two of the respondents reported that students conducting global field work abroad were able to access on-campus mental health services that were included with tuition, while the

other two respondents did not know what mental health services were available. As far as longterm supports for students once they returned from the field, one respondent reported that students were connected to long-term advisors, another reported that students received information on reverse culture shock, and the final two respondents did not know.

The concluding portion of the survey allowed respondents to provide their own view on their institution's pre-departure training. Respondents whose institution included pre-departure training were asked to rank their institution's training. Regarding the sexual assault and harassment component of the training, on a scale of 1 (worst) to 5 (excellent), rankings were 1, 3, and 4. The respondent that reported a 3, explained their reasoning saying that "faculty are trained well. What is lacking is country specific information and resources." Regarding how students' identities were incorporated into the training, the rankings were 1, 2, and 4. The final ranking asked respondents about the training as a whole, with responses 2, 4, and 4. What respondents felt their institutions were doing well was the compliance from students on completing the training and including separate faculty to teach each module in their expertise area. Respondents cited cultural intelligence and ethics as areas that were lacking in their training, as well as struggles to keep content up to date. Finally, respondents reported a desire to have "a community of institutions and global health educators that shares resources and information" regarding pre-departure training as well as opportunities at conferences to discuss best practices.

Discussion

While there were few respondents, the data that was collected still show several key insights into the design and implementation of pre-departure training. Primarily, the data demonstrate that there is not a single individual responsible for the pre-departure training. This is seen in the data from the multiple-choice questions of the survey, where one respondent is able

to provide information on certain aspects of the training but responds "I don't know" for others. Only one of the three respondents whose institutions had pre-departure training was able to provide answers for every question. This respondent still explained in the open response questions that they were not responsible for the design of certain sections and were assuming that the responsible party had included the necessary detail. Additionally, Title IX of the Educational Amendments of 1972, which protects people from sexual discrimination in educational programs at institutions that receive federal funds from the Department of Education, affects many aspects of institutional response to sexual assault and harassment ("Title IX: Prohibited Conduct," n.d.). Respondents confirmed that Title IX affects pre-departure training as well. One respondent reported that the Title IX Coordinator was responsible for designing the portions of the predeparture training that address sexual assault and harassment. These data demonstrate a decentralization of the creation and implementation of pre-departure training at higher education institutions.

This decentralization could have effects on the design and implementation of predeparture training. The issue of sexual assault and harassment in fieldwork is also not commonly discussed and there is no published data to guide the creation of training specific to sexual assault and harassment. Individuals who have not been affected by sexual assault and harassment in the field might not know the extent of the problem and so do not know to prioritize training modules on the topic. The fact that one individual is not creating every part of the pre-departure training also means institutions might not realize this aspect of the training has not been given appropriate time. If someone wants to make improvements to the training, the process could be long and complicated if there is not one obvious point person or if the changes need to be outsourced. This decentralization in the creation of pre-departure training could make it very

easy for sexual assault and harassment to not be included even if the institution is not purposefully leaving out the topic.

This decentralization is also present between institutions. One respondent specifically mentioned a desire for discussion of sexual assault and harassment pre-departure training at conferences. This would allow institutions to learn from each other and improve training. It would also begin important conversations that would critically examine global health fieldwork and the safety of students involved. Institutions are not collaborating or researching the creation of training, which results in a gap in knowledge about best practices. There is no published research on how many institutions include sexual assault and harassment in pre-departure training, and if it were included, what would be the most effective way. The only resources from which to draw for creating a training on this topic are sexual assault and harassment training materials for office settings, which are insufficient for discussing the specific challenges that come with global health fieldwork. Larger organizations that work to create standards for global health research are not currently providing guidance for universities and institutions to address sexual assault and harassment in global health fieldwork.

This lack of organization for global health associations like CUGH regarding this topic contributes to a lack of awareness and fewer conversations, both between and within institutions. This makes it harder for students to come forward with their experiences and seek help or support. It can also keep students from being fully prepared for the field and professors from being able to support their students. As described in the background section, many individuals who experience sexual assault or harassment feel uncomfortable speaking about their experience, and when they do, their colleagues or supervisors, even well-meaning ones, make them feel that the harassment or assault was their fault. Addressing this stigma and culture will take many

difficult conversations and a lot of work from individuals and institutions as a whole. Organized conversations that take place at conferences would be an important step to beginning the process of making fieldwork safe for all students. Associations of global health institutions are not currently providing structure for addressing the problem of sexual assault and harassment in global fieldwork, which can lead to a lack of awareness and stigma, making it difficult for students who are experiencing sexual assault and harassment in the field.

This lack of centralization not only further perpetuates the problem but also makes it difficult to research this topic. As discussed in more detail in the limitations, identifying a sampling frame for this study was difficult. There is not a list of individuals who are responsible for the implementation of the pre-departure training, which would be an ideal sampling frame for this study. Respondents are not able to fully answer the survey because their knowledge does not cover the entire training. Individuals might also have been deterred from participating in the study because they did not think their knowledge was useful.

Limitations

This study was limited by both the quantity and quality of responses, since most respondents who completed the survey did not answer every question, particularly the open response ones. This can be attributed to several different causes. First, the study was on a short timeline due to thesis requirements. This meant that there was no opportunity for a second round of data collection when the first round had few responses. A longer study timeline with the ability to conduct multiple rounds of data collection and to try different distribution methods would have been likely to collect a larger quantity of data. Second, a single individual does not have responsibility for the entirety of a pre-departure training at one institution, so potential participants involved in the training might have not completed the survey because they did not

feel that they could provide all the necessary information. A lack of awareness of this topic in higher educational institutions also could have contributed to individuals not understanding the need for the study and therefore choosing not to participate.

The analysis was also limited by the fact that the respondents that did complete the survey did not yield very rich data. Respondents either did not know the answer to many of the questions or chose not to complete the open response questions. This could be because the survey was quite long and intensive, which might have overwhelmed participants. Some participants might have experienced fatigue towards the end and not taken the time to answer to the open response questions, the majority of which were in the conclusion section of the survey. The sample of the population also included participants who while involved with pre-departure training at their institution did not have a detailed knowledge of it. These participants were only able to answer surface level questions and not give insight into the decision making around and design of the training. It is apparent that multiple individuals are involved in the creation of each pre-departure training to varying degrees, so a single individual is unable to complete the entire survey thoroughly for their institution.

The low response rate and lack of rich data provide insight into the structure of higher education and the design of pre-departure training. The results indicate that the design and implementation of pre-departure training is spread across multiple different individuals. This could prevent one individual from being able to provide comprehensive information on all aspects of the training, resulting in a lack of detailed information on the survey. Individuals could also have chosen not to complete the survey because they did not feel they were the correct person at the university to participate in the study. Additionally, people could have chosen not to participate because they did not think they had enough information on the topic to share. This demonstrates a lack of conversations around this topic in higher education. Further discussion of sexual assault and harassment of students conducting global fieldwork would provide more context to the individuals recruited to take the survey and might increase participation.

While the sampling frame chosen produced a low response rate and sparse data, this is still the best sampling frame available. Sampling individuals who are known to have an involvement in pre-departure training would have produced richer data, and directly contacting individuals would likely have resulted in more responses. However, there is no list or index of these individuals on a national scale. Using the CUGH bulletin meant the survey was distributed widely since the organization has a broad reach. Discussions with CUGH about distributing the survey also demonstrated that the organization is invested in improving pre-departure training and protecting students in the field. Additionally, other distribution methods, such as targeting certain individuals, might have produced more responses, but gaining a list of those individuals would have been difficult and time consuming. For these reasons, despite its low response rate, the sampling frame and distribution strategy of using the CUGH bulletin was the best option.

The limitations of this study make it impossible to generalize the data. However, important lessons were learned about what barriers there are to conducting a study like this. The lack of conversation around this topic in higher education as well as the decentralized design and implementation of pre-departure training make it very difficult to find an ideal sampling frame. The CUGH newsletter was the best available option. Further conversation and discussion of this topic is necessary to provide more context to this survey. While this conversation is pushed forward, a replication of this study might yield more detailed and generalizable results in the future. Given these limitations, this study should be treated as a pilot of the survey. The information discussed above can inform a more thorough future study. The survey has shown that it can provide useful data, but it does require more participants. A study with a longer time

period for individuals to take the survey, as well as the ability to spend time targeting individuals for recruitment based on their involvement with the pre-departure training, could return better results. The context needed for the survey could also be partnered with a special report or issue of a journal that discusses the current gaps in pre-departure training, providing more context to individuals who might not know why the study is being administered.

Conclusion

Despite these limitations, this study has found that the structure of higher education institutions makes it very challenging to research pre-departure training of global health students. It also was able to provide valuable insight into what should be done to successfully gather this information. This study can be viewed as a pilot of the survey, which was successful at gaining data when completed but did not have enough participants for generalizable results. A study with better participation would have more broadly relevant results. Publishing these generalizable results would be invaluable for evaluating and improving training programs. Improved predeparture training at global health institutions would better prepare global health students for sexual assault and harassment in the field, which would have positive impacts on their wellbeing, their fieldwork experiences, and career trajectories.

References

- Barry, M., Sugarman, J., DeCamp, M., Richardson, G., & Rodriguez, J. Ethical Challenges in Short-Term Global Health Training. Retrieved from http://ethicsandglobalhealth.org/index.shtml
- Bessette, J., & Camden, C. (2017). Pre-Departure Training for Student Global Health Experiences: A Scoping Review. *Physiotherapy Canada. Physiotherapie Canada*, 69(4), 343-350. doi:10.3138/ptc.2015-86GH
- Chan, E. A., Liu, J. Y. W., Fung, K. H. K., Tsang, P. L., & Yuen, J. (2018). Pre-departure preparation and co-curricular activities for Students' intercultural exchange: A mixedmethods study. *Nurse Education Today*, 63, 43-49. doi:https://doi.org/10.1016/j.nedt.2018.01.020
- Chen, C. C. G., & Edwardson, J. (2014). *Pre-Departure Preparation for Global Health Clinical and Research Experiences: A Handbook for Health Professionals and Trainees*: Johns Hopkins School of Medicine.
- Clancy, K. B. H., Nelson, R. G., Rutherford, J. N., & Hinde, K. (2014). Survey of Academic Field Experiences (SAFE): Trainees Report Harassment and Assault. *PLoS One*, 9(7), e102172. doi:10.1371/journal.pone.0102172
- Colaninno, C. E., Lambert, S. P., Beahm, E. L., & Drexler, C. G. (2020). Creating and Supporting a Harassment- and Assault-Free Field School. Advances in Archaeological Practice, 8(2), 111-122. doi:10.1017/aap.2020.8
- Demery, A.-J. C., & Pipkin, M. A. (2020). Safe fieldwork strategies for at-risk individuals, their supervisors and institutions. *Nature Ecology & Evolution*. doi:10.1038/s41559-020-01328-5
- The Global Health 50/50 Report 2020: Power, Privilege, and Priorities. (2020). Retrieved from
- Hall-Clifford, R. (2019). Where There Is No Hashtag: Considering Gender-Based Violence in Global Health Fieldwork in the Time of #MeToo. *Health and Human Rights*, 21(1), 129-132. Retrieved from https://pubmed.ncbi.nlm.nih.gov/31239620
- Hanson, R., & Richards, P. (2017). Sexual Harassment and the Construction of Ethnographic Knowledge. *Sociological Forum*, *32*(3), 587-609. doi:https://doi.org/10.1111/socf.12350
- Harries, B. (2016). What's sex got to do with it? When a woman asks questions. *Women's Studies International Forum*, 59, 48-57. doi:https://doi.org/10.1016/j.wsif.2016.10.002
- Johnson, P. A., Widnall, S. E., & Benya, F. F. (2018). Sexual Harassment of Women : Climate, Culture, and Consequences in Academic Sciences, Engineering, and Medicine. Washington, DC: National Academies Press.
- Kalbarczyk, A., Nagourney, E., Martin, N. A., Chen, V., & Hansoti, B. (2019). Are you ready? A systematic review of pre-departure resources for global health electives. *BMC Med Educ*, 19(1), 166. doi:10.1186/s12909-019-1586-y
- Kironji, A. G., Cox, J. T., Edwardson, J., Moran, D., Aluri, J., Carroll, B., & Chen, C. C. G. (2018). Pre-departure Training for Healthcare Students Going Abroad: Impact on Preparedness. *Ann Glob Health*, 84(4), 683-691. doi:10.9204/aogh.2378
- Klocker, N. (2015). Participatory action research: The distress of (not) making a difference. *Emotion, Space and Society, 17*, 37-44. doi:https://doi.org/10.1016/j.emospa.2015.06.006
- Kloss, S. T. (2016). Sexual(ized) harassment and ethnographic fieldwork: A silenced aspect of social research. *Ethnography*, *18*(3), 396-414. doi:10.1177/1466138116641958

- Kung, T. H. (2018). Host physician perspectives to improve pre-departure training for global health electives. *Medical Education*, 52(1), 3-5. doi:https://doi.org/10.1111/medu.13479
- Mathad, J. S., Reif, L. K., Seo, G., Walsh, K. F., McNairy, M. L., Lee, M. H., . . . Downs, J. A. (2019). Female global health leadership: data-driven approaches to close the gender gap. *The Lancet*, 393(10171), 521-523. doi:https://doi.org/10.1016/S0140-6736(19)30203-X
- McAuliffe, C., Upshur, R., Sellen, D. W., & Di Ruggiero, E. (2019a). Critical Reflections on Mental Well-being for Post-Secondary Students Participating in the Field of Global Health. *International Journal of Mental Health and Addiction*, 17(3), 542-554. doi:10.1007/s11469-018-0007-5
- McAuliffe, C., Upshur, R., Sellen, D. W., & Di Ruggiero, E. (2019b). The Lived Experience of Global Public Health Practice: A Phenomenological Account of Women Graduate Students. *Health and Human Rights*, 21(1), 115-128. Retrieved from www.jstor.org/stable/26727076
- McBride, B., Mitra, S., Kondo, V., Elmi, H., & Kamal, M. (2018). Unpaid labour, #MeToo, and young women in global health. *The Lancet*, 391(10136), 2192-2193. doi:https://doi.org/10.1016/S0140-6736(18)30992-9
- #MeToo Meets Global Health: A Call to Action. (2019). *Health and Human Rights*, 21(1), 133-139. Retrieved from https://pubmed.ncbi.nlm.nih.gov/31239621
- Nelson, R. G., Rutherford, J. N., Hinde, K., & Clancy, K. B. H. (2017). Signaling Safety: Characterizing Fieldwork Experiences and Their Implications for Career Trajectories. *American Anthropologist*, 119(4), 710-722. doi:10.1111/aman.12929
- Pollard, A. (2009). Field of screams: difficulty and ethnographic fieldwork. *Anthropology Matters Journal*, 11(2). doi:https://doi.org/10.22582/am.v11i2.10
- Purkey, E., & Hollaar, G. (2016). Developing consensus for postgraduate global health electives: definitions, pre-departure training and post-return debriefing. *BMC Medical Education*, 16(1), 159. doi:10.1186/s12909-016-0675-4
- Ridde, V., Dagenais, C., & Daigneault, I. (2019). It's time to address sexual violence in academic global health. *BMJ global health*, 4(2), e001616-e001616. doi:10.1136/bmjgh-2019-001616
- Ross, K. (2015). "No Sir, She Was Not a Fool in the Field": Gendered Risks and Sexual Violence in Immersed Cross-Cultural Fieldwork. *The Professional Geographer*, 67(2), 180-186. doi:10.1080/00330124.2014.907705
- Sharp, G., & Kremer, E. (2006). The Safety Dance: Confronting Harassment, Intimidation, and Violence in the Field. *Sociological Methodology*, *36*, 317-327. Retrieved from https://www-proquestcom.proxy.library.emory.edu/docview/216129752?accountid=10747
- Sexual Assault/Rape. (n.d.). WomensLaw.Org. Retrieved April 25, 2021, from <u>https://www.womenslaw.org/about-abuse/forms-abuse/sexual-abuse-and-exploitation/sexual-assault-rape/basic-info#:~:text=What%20is%20sexual%20assault%3F,%2C%20age%2C%20or%20sexual%20orientation..</u>
- *Sexual Harassment.* (n.d.). U.S. Equal Employment Opportunity Commission. Retrieved April 25, 2021, from https://www.eeoc.gov/sexual-harassment.
- *Title IX: Prohibited Conduct.* (n.d.). Emory University Office of Diversity, Equity, and Inclusion. Retrieved April 25, 2021, from <u>https://equityandinclusion.emory.edu/title-ix/index.html</u>.

- Viglione, G. (2020, 3 September 2020). Racism and harassment are common in field research scientists are speaking up. *Nature*, 585. Retrieved from https://www.nature.com/articles/d41586-020-02328-y
- Wallace, L., & Webb, A. (2014). Pre-departure training and the social accountability of International Medical Electives. *Education for Health*, 27(2), 143-147. doi:10.4103/1357-6283.143745
- Woodgate, R., Fitzhugh, B., Harrington, S., Litchendorf, T., St John, H., Buick, R., . . . Boget, E. (2018). Preventing Harassment in Fieldwork Situations: Report from the University of Washington's Respect and Equality in Fieldwork (REIF) 2017 Committee. Retrieved from

http://psc.apl.washington.edu/HLD/REIF/RespectandEqualityinFieldwork_Recommendat ionsandReportUW_Jan2018.pdf

Appendix: Survey

Understanding Global Health Fieldwork Pre-Departure Training on Sexual Harassment and Assault

The following survey should take approximately 30 minutes to complete. This survey is part of Amanda Fitzpatrick's Master of Public Health research thesis at Emory University's Rollins School of Public Health. The study is being conducted to better learn how global health universities are handling the topic of sexual assault and harassment in global fieldwork during pre-departure trainings for students.

Informed Consent

Thank you for your interest in our Student Fieldwork Sexual Assault Preparation research study. Please read the following information before beginning the survey. It is entirely your choice to participate in this survey. If you decide to take part, you can change your mind later and exit the survey at any time.

The purpose of this study is to understand how pre-departure training for global health fieldwork addresses sexual assault and harassment students might experience in the field. This survey will take approximately 30 minutes to complete.

Questions in this survey should not cause any harm or discomfort, but there are indirect references to sexual assault and harassment that may make some individuals uncomfortable.

The forced choice questions in this survey will not yield identifying data about the participant. Any identifying data you might provide in open response questions will only be accessed by the study team and will be anonymized for publishing purposes

You will receive no direct benefit from participating in the survey, but your responses may help researchers better understand and improve pre-departure trainings for global health fieldwork.

Study records can be opened by court order. They also may be provided in response to a subpoena or a request for the production of documents. Certain offices and people other than the researchers may look at study records. Emory employees overseeing proper study conduct may look at your study records. Emory will keep any research records we create private to the extent we are required to do so by law.

Your data from this study may be useful for other research being done by investigators at Emory or elsewhere. To help further science, we may provide your deidentified data to other researchers. If we do, we will not include any information that could identify you. If your data are labeled with your study ID, we will not allow the other investigators to link that ID to your identifiable information.

We will use your data only for research. We will not sell them.

Final results will be included in a master's thesis that will be publicly available on Emory University's website.

Contact Information

If you have questions about this study, your part in it, or if you have questions, or concerns about the research you may contact the following:

Amanda Fitzpatrick, Lead Investigator: 901-652-3966, amanda.fitzpatrick@emory.edu

If you have questions about your rights at research participant, complaints about the research or an issue you rather discuss with someone outside the research team, contact the Emory Institutional Review Board at 404-712-0720 or toll-free at 877-503-9797 or by email at irb@emory.edu.

By selecting yes, you confirm that you have read and agree to the above informed consent. \Box Yes

Characteristics of Institution

Other:

The following questions ask about characteristics of the institution where you are based.

- Which of the following best describes your current position?
 Senior Leadership (e.g. Dean, Associate Dean, VP Research)
 Department head
 Faculty
 Administrative staff
- 2. Which of the following best describes your role in pre-departure fieldwork training for students? (select all that apply)

 □I have administrative and budgetary authority to create and implement training
 □Primary creator of the training
 □Assist with the design of the training
 □Responsible for the implementation of the training
 □Not involved
 □Other:
- 3. Which of the following best describes the degrees offered by your institution?
 Undergraduate (BA or BS) exclusively
 Undergraduate and graduate degrees
 Undergraduate, graduate, and professional degrees (MPH, MD, JD, MBA etc.)
 I don't know
 Other:

- 4. Do students at your institution have the opportunity to participate in global health fieldwork abroad during their degree program?
 □Yes
 □No
 □Other:
- 5. Are students required to participate in global fieldwork as part of their degree programs?
 □Yes
 □No

□I don't know

6. If yes, please list the degree programs that require participation in global fieldwork.

Pre-Departure Training for Global Health Fieldwork

This section is referring to any general programming provided by the school in which students participate prior to doing fieldwork abroad.

7. Is there a pre-departure training for students at your university who will be doing global health fieldwork?
 □Yes

□ No □I don't know □Other:

8. Is the pre-departure training required for students who go abroad in the following degree programs?

	Yes	No	Degree not offered	I don't know
Public health master's students (MPH, MHA, MS, MHS)				
Public health doctoral students(PhD, DrPh, ScD)				
Medical students (MD)				
Nursing students (BSN, MSN, DNP)				
Master's students in a field other than public				
health				
Doctoral students in a field other than public				
health				
Undergraduate students				

9. How many credit hours, if any, do the students receive for the pre-departure training?

	0	1	2	3	4+	Degree not	Not applicable	I don't know
						offered		
Public health master's students (MPH,								
MHA, MS, MHS)								
Public health doctoral students(PhD,								
DrPh, ScD)								
Medical students (MD)								
Nursing students (BSN, MSN, DNP)								
Master's students in a field other than								
public health								
Doctoral students in a field other than								
public health								
Undergraduate students								

- 10. Is the training, or a portion of the training, specific to the country or region of fieldwork?
 □Yes
 □No
 □I don't know
 □Other:
- 11. If yes, please explain.
- 12. Are there specialized training sessions for students who live and work as a group during fieldwork?
 - □Yes □No □I don't know □Other:
- 13. If yes, please explain.
- 14. Once they complete a global health field experience, do students undergo a debriefing? □Yes
 - □No □I don't know □Other:
- 15. If yes, what is included in the debriefing? (check all that apply) □Follow-up survey

 $\Box One-on-one$ discussion with a staff member

□Individual reflection or writing assignments □Group discussion with multiple returning students □I don't know □Not applicable □Other:

Sexual Assault Education

The questions below discuss any elements of the training focused on sexual assault or harassment. Please refer to the following definitions for sexual assault and harassment.

Sexual assault is unwanted sexual contact or activity, including rape, against an individual's will. (Women's Law, https://www.womenslaw.org/).

Harassment "includes sexual harassment, which is unwelcome sexual advances, requests for sexual favors, and other verbal or physical harassment of a sexual nature and...include[s] offensive remarks about a person's sex." (U.S Equal Employment Opportunity Commission, https://www.eeoc.gov/sexual-harassment).

16. Is there a component of the pre-fieldwork training that directly addresses sexual assault or harassment during fieldwork?

□Yes □No □I don't know □Other:

- 17. Roughly what percent of the total training is spent addressing sexual assault of harassment in the field?
 - □0% □10% or less □11%-25% □26%-50% □51% or greater □I don't know □Other:
- 18. Are the sexual assault and harassment trainings delivered independently from the rest of the training (e.g. in an individual module or a separate day) or are they included with other content (e.g. health and safety)?

□Incorporated within the training

□Separate required module

□Separate elective module

 \Box Not applicable

□Other:

19. If there is a portion of pre-departure training on sexual assault and harassment, are any of the following topics incorporated into that portion of the training?

	0			that portion of a
	Yes	No	I don't	Not
			know	Applicable
Sexual				
Orientation				
Race				
Economic Status				
Gender Identity				

- 20. If there is a portion of pre-departure training on sexual assault and harassment, does it provide practical guidance for students to mitigate their risk of sexual assault or harassment?
 - □Yes □No □I don't know □Not applicable
 - □Other:
- 21. If there is a portion of pre-departure training on sexual assault and harassment, does it provide guidance for what students can do if they experience sexual assault or harassment?
 - □Yes □No □I don't know □Not applicable □Other:
- 22. If training does include guidance for risk mitigation or for what to do if students are assaulted, please provide a brief description.
- 23. Are students provided resources to help them learn about the prevalence and culture of sexual assault in their host communities?
 - □Yes □No □I don't know □Not applicable □Other:
- 24. If yes, please briefly describe what resources are provided to help students learn about the prevalence and culture of sexual assault in their host countries.

Additional Support for Sexual Assault and Harassment

This section includes questions about how your institution provides support for individuals who experience sexual assault and harassment while participating in global health fieldwork.

- 25. Do students have a designated faculty or staff member to speak with about any concerns related to gender-based violence or otherwise before they leave for fieldwork?
 □Yes
 □No
 □I don't know
 □Other:
- 26. If yes, what is that person's position at the institution?
- 27. What options are available for students to report sexual assault or harassment incidents that occur in the field? (select all that apply)
 □Through the reporting mechanism at the institution required by Title IX
 □A separate reporting procedure for students doing global fieldwork
 □I don't know
 □Other:
- 28. If your institution asks students to report using a mechanism in addition to the Title IX process, please briefly explain.
- 29. How are students made aware of your institution's options for reporting a sexual assault or harassment incident that occurs in the field, whether the Title IX process or otherwise? (select all that apply)
 - □Addressed during training
 - □On a general student information website
 - □On a webpage specific to studying and working abroad
 - Email or electronic newsletter
 - □Student handbook
 - □I don't know
 - □Other:
- 30. Does your institution offer to connect students with psychological services when in need of additional support if they experience sexual assault or harassment while they are in the field?
 - □Yes, to on-campus university health services included with tuition
 - □Yes, to an off-campus provider contracted by the university, included with tuition
 - □Yes, referrals are provided, but not included with tuition

□No

- \Box I don't know
- \Box Other:

31. What long-term supports exist, if any, for students who have experienced sexual assault or harassment while in the field once they have returned? (select all that apply) □Support groups □Information on reverse culture shock Designated advisors \Box I don't know □None □Other:

Your Views of Fieldwork Training

This section asks about your views of your institution's pre-departure training for global health fieldwork abroad.

- 32. On a scale of 1 (unsatisfactory) to 5 (excellent), how would you rate your institution's pre-departure training related to sexual assault or harassment students might experience during fieldwork abroad? 1 2 3 4 5
- 33. Please explain your response.
- 34. On a scale of 1 (unsatisfactory) to 5 (excellent), how would you rate your institution's pre-departure training related to the incorporation of various aspects of students' identities (including gender, race, sexual orientation, or economic status) that may impact their fieldwork experience? 1
 - 2 3 4 5
- 35. Please explain your response.
- 36. On a scale of 1 (unsatisfactory) to 5 (excellent), how would you rate your institution's pre-departure training for global health fieldwork abroad overall? 2 4 1 3 5
- 37. Please explain your response.
- 38. What do you feel that your school is doing well regarding pre-departure fieldwork training?
- 39. What are ways you think your school could improve its pre-departure training for global health fieldwork?

Conclusion

40. Is there anything else you would like to share about pre-fieldwork training of global health students?

41. Is there anything else you would like to share about support for students during and after fieldwork?