Behind Closed Doors

SCENARIOS FOR RESIDENCE LIFE TRAINING



MISSION

to promote safe and inclusive school, campus, and organizational environments through research, resource sharing, and the development of data-driven strategies for hazing prevention and the promotion of positive and inclusive group climates.





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Prerequisite Information

Recommended Facilitation Style:

- Ensure that all necessary materials (duty/response manual, campus policies, reporting procedures)
 have already been reviewed.
- Include important policies and procedures from the appropriate manuals to accompany each scenario
 for easy reference for the facilitators and the participants.
- Hazing is a form of interpersonal violence, and as such, can cause physical and psychological harm.
 For this reason, we recommend that at the outset of this training, facilitators acknowledge that hazing is a serious issue and many experience abuse and are harmed, but some may not get the help they need to heal. Example language might include:
- "Since we know that hazing occurs in high school and college, some students participating in BCDs
 may have experienced abuse from hazing and may find it difficult to discuss. If you, or someone you
 care about has been harmed by hazing, and needs support, we recommend contacting [INSERT
 RESOURCES AT INSTITUTION (i.e., counseling center)]. Please take care of yourself during this section
 of training."

Recommended Training Materials:

- Duty/Response manual for reference.
- Prior Responsible Employee training.
- Prior hazing prevention training (these scenarios should not be used without hazing prevention training), including:
 - The Spectrum of Hazing (Allan & Kerschner, 2020)
 - The <u>definition of hazing</u> (e.g., 3 core components, including "regardless of willingness to participate").
 - Understanding of the warning signs of hazing
 - Using this graphic as a reference.
 - Bystander Intervention Guide for Hazing
 - For additional resources, consider "Don't Wait, Act Now."
 - Campus hazing policy and hazing definition
 - Reporting options
 - Support resources

Scenario 1 - Intimidation: RA

Actors Required: 3 minimum, 4 maximum (2 residents and up to two practicing staff)

Tell the RA(s): You have noticed some tension with the roommates of this room but no one has come to you with any concerns. You walk by this room and hear what sounds like an argument between the two roommates. You hear, very loudly, "I don't think this is healthy."

What the actors know:

Resident 1 and Resident 2 moved to campus early, one for marching band and the other for a research learning experience. They were a random roommate match and did not know each other prior to moving in together. This scenario begins just before the academic year officially starts.

- Resident 1 is a dedicated and serious student, spending most of their free-time studying. Most of their friends are in their classes and study groups, but they spend much of their time in their room. Resident 1 has an early morning class every day and they go to bed at 10 PM every night, following a very strict schedule. They notice that their roommate (Resident 2) is acting strange after the first few weeks of being a part of the marching band, and they have tried to have a conversation about what's bothering Resident 2 for the last couple of weeks.
- **Resident 2** is a part of the marching band on campus and is very dedicated to their music career. Since they spend so much of their time practicing their instrument, they sometimes go back to your room late at night. They don't talk to their roommate (Resident 1) due to an on-going conflict of them coming back to the room late, turning the light on when Resident 1 is trying to sleep, and making a lot of noise trying to bring the instrument into the room. Resident 1 has been prying about their involvement in the marching band, and has been for days now.

Scenario to read to the actors

Resident 1 is getting ready to go to bed at around 9:45 PM to stay on their strict schedule, and Resident 2 comes into the room, causing a ruckus trying to get their instrument into the room. Resident 1 notices that Resident 2 is carrying a small stuffed animal that Resident 1 has never seen before and that Resident 2 has a paper taped to their back with the word "LOSER" written on it. Resident 1 has been voicing concerns to Resident 2 about Resident 2's decline in enthusiasm for the marching band for a couple of weeks now, but this has crossed a line. Resident 1 starts to question Resident 2 about the stuffed animal that they are carrying, and Resident 2 gets defensive and says it's no big deal.

Scenario for practicing staff

When you, as the RA, are doing rounds, you hear the two bickering down the hallway. By the time you knock on the door, you can hear Resident 2 crying.

Processing Questions:

- How would you respond to this situation?
- What are some warning signs that this situation may involve hazing?
- What campus/department resources could you refer the students to?
- Do you need to write an incident report for this? Or just a verbal follow up with your supervisor?
 - If you write an incident report, what report(s) do you need to file?
- What policies apply in this scenario?
- · What sort of follow up is appropriate?

Suggested Conversation Points and Actions

Background: This scenario involves hazing through intimidation, involving the use of demeaning names and the requirement to keep specific items in one's possession or worn at all times.

Immediate Safety and Separation:

- Separate both residents to deescalate tensions and ensure safety.
- Ask both residents what has been going on and assess each individual's physical and emotional wellbeing.

Policy & Education:

- Clearly explain/reference your institution's hazing policy, including definitions.
- Reinforce that all students have a right to feel safe and supported on campus.
- Emphasize that participating in groups should be an opportunity to build healthy relationships, develop skills, and engage in positive, supportive experiences.

Resource Referrals:

- Refer impacted individuals to appropriate campus resources such as:
 - Counseling or mental health services
 - Student Conduct
 - Victims Advocate Office
 - Bias Response Team

Reporting Protocols:

- Follow your institution's Residence Life protocol for incident reports and notifying supervisory or residential staff regarding the situation.
- Follow campus protocols for hazing-specific reports.

Scenario 2 - Harassment: RA

Actors Required: 2 minimum, 4 maximum (at least one resident and at least one practicing staff)

Tell the RA(s): A resident initiates a conversation with you, their RA, about concerns regarding one of their friends, another resident. Their friend has been wearing a banana costume consistently, in and out of the residence hall. The resident expressed concern that this behavior may not be voluntary, possibly connected to a student organization.

What the actors know:

Residents 1 and 2 are both rushing different social Greek-letter organizations. They were friends in high school and know each other very well. They would hang out on the floor regularly until rush started, as they both got too busy with their top-choice organizations after getting their bids.

- Resident 1 has been wearing a banana costume to class, the dining hall, and around the residence hall. They received a bid from their top choice organization and have been a member of this social Greek Life organization for a little over a week now. They have been avoiding their friends and always seem to dismiss concerns about the banana costume. They thought wearing the costume was funny at first, but they have been in this costume for almost a full week now and are getting tired of the questions.
- **Resident 2's** friend (Resident 1) has been socially withdrawn and withdraws more every time someone asks about the banana costume. Resident 2 is used to seeing their friend in more formal attire (such as polos and khakis) but for the past week they have only worn the banana costume. When they ask Resident 1 about it, they say that "it's part of the fun" or "it's fine, I agreed with it", but Resident 2 thinks Resident 1 might be masking pressure or coercion. They go to their RA after four days of Resident 1 wearing the costume.

Scenario to read to the actors

You (the RA) are sitting in your room doing homework when Resident 2 knocks on your door. They tell you that they are concerned about the well-being of their friend (Resident 1), and explain that rush just recently ended and since their friend got their top choice organization, they have been acting strange. They don't know how to help and want to know that their friend is okay since they have been avoiding them.

Processing Questions:

- How would you respond to this situation?
- · What are some warning signs that this situation may constitute hazing?
- What campus/department resources can you use to refer the students?
- Do you need to write an incident report for this? Or just a verbal follow-up with your supervisor?
 - If you write an incident report, what report(s) do you need to file?
- What policies apply in this scenario?
- · What sort of follow-up is appropriate?

Suggested Conversation Points and Actions

Background: This scenario involves hazing through harassment, specifically requiring new members to wear embarrassing attire.

Immediate Safety and Assessing the Situation:

• Check in with residents to see what has been going on and assess each individual's physical and emotional wellbeing.

Policy & Education:

- Clearly explain/reference your institution's hazing policy, including definitions.
- Reinforce that all students have a right to feel safe and supported on campus.
- Emphasize that participating in groups should be an opportunity to build healthy relationships, develop skills, and engage in positive, supportive experiences.

Resource Referrals:

- Refer impacted individuals to appropriate campus resources such as:
 - Counseling or mental health services
 - Student Conduct
 - Victims Advocate Office
 - Bias Response Team

Reporting Protocols:

- Follow your institution's Residence Life protocol for incident reports and notifying supervisory or residential staff regarding the situation.
- Follow campus protocols for hazing-specific reports.

Scenario 3 - Violence: RA

Actors Required: 2 minimum, 3 maximum (one resident and up to two practicing staff) – base the amount of staff on how many RAs do rounds in one building in a night.

Tell the RA(s): A resident in your resident hall is in the bathroom when you are doing your rounds. You can hear them throwing up in the bathroom. After knocking for a couple of minutes, they open the door to talk to you. The resident is presumably intoxicated.

What the actors know:

Resident 1 is a club tennis player. During pre-season, there are multiple opportunities for team bonding led by the senior players, typically without coaches/advisors present.

• **Resident 1** visited the house that many of the club tennis team members live in, and they played hotseat– a game where freshmen had to reveal sensitive information about themselves or take a shot of liquor. When they returned to the residence hall, they felt sick.

Scenario to read to the actors

You are the RA on call, making your second set of rounds through the building, and notice a locked bathroom door. As you prepare to call campus police to unlock a bathroom door, you manage to speak with the resident inside. The resident is incoherent, slurring their words, but they mention something about playing a game called Hotseat.

Processing Questions:

- How would you respond to this situation?
- · What are some warning signs that this situation may constitute hazing?
- Who do you call to respond to the situation?
- What campus/department resources can you use to refer the students?
- Do you need to write an incident report for this? Or just a verbal follow up with your supervisor?
 - If you write an incident report, what report(s) do you need to file?
- What policies apply in this scenario?
- · What sort of follow up is appropriate?

Suggested Conversation Points and Actions

Background: This scenario involves hazing through violence, specifically including forced intoxication and actions that place individuals in personal danger.

Immediate Safety and Assessing the Situation:

• Check in with residents to see what has been going on and assess each individual's physical and emotional well-being.

Policy & Education:

- Clearly explain/reference your institution's hazing policy, including definitions.
- Reinforce that all students have a right to feel safe and supported on campus.
- Emphasize that participating in groups should be an opportunity to build healthy relationships, develop skills, and engage in positive, supportive experiences.

Resource Referrals:

- Refer impacted individuals to appropriate campus resources such as:
 - Counseling or mental health services
 - Student Conduct
 - Victims Advocate Office
 - Bias Response Team

Reporting Protocols:

- Follow your institution's Residence Life protocol for incident reports and notifying supervisory or residential staff regarding the situation.
- Follow campus protocols for hazing-specific reports.

Scenario 1 - Intimidation: GRAD/AHD

Actors Required: 3 minimum, 4 maximum (2 residents and up to two practicing staff)

Tell the Grad(s): Your RA comes to you with concerns that one of their residents is being hazed during their initial weeks of marching band. The RA is unsure whether the situation constitutes hazing or if it should be reported.

What the actors know:

Resident 1 and Resident 2 moved to campus early, one for marching band and the other for an academic reason. They were a random roommate match and did not know each other prior to moving in together. This scenario is starting right before the academic year officially starts.

- Resident 1 is a dedicated and serious student, spending most of their free-time studying. Most of their friends are in their classes and study groups, but they spend much of their time in their room. Resident 1 has an early morning class every day and they go to bed at 10 PM every night, following a very strict schedule. They notice that their roommate (Resident 2) is acting strange after the first few weeks of being a part of the marching band, and they have tried to have a conversation about what's bothering Resident 2 for the last couple of weeks.
- **Resident 2** is a part of the marching band on campus and is very dedicated to their music career. Since they spend so much of their time practicing their instrument, they sometimes go back to your room late at night. They don't talk to their roommate (**Resident 1**) due to an on-going conflict of them coming back to the room late, turning the light on when Resident 1 is trying to sleep, and making a lot of noise trying to bring the instrument into the room. Resident 1 has been prying about their involvement in the marching band, and has been for days now.

Processing Questions:

- · How would you respond to this situation?
- · What are some warning signs that this situation may constitute hazing?
- What campus/department resources can you use to refer to the RA to give to the residents?
- Should a report be filed? If so, what types?
- · What policies apply in this scenario?
- What sort of follow up is appropriate? Do you follow up or does the RA?
- How involved do you get in this situation as a supervisor?

Suggested Conversation Points and Actions

Background: This scenario involves hazing through intimidation, involving the use of demeaning names and the requirement to keep specific items in one's possession or worn at all times.

Policy & Education:

• Clearly explain/reference your institution's hazing policy, including definitions to RA.

Resource Referrals:

- Remind RA to refer impacted individuals to appropriate campus resources such as:
 - Counseling or mental health services
 - Student Conduct
 - Victims Advocate Office
 - Bias Response Team

Reporting Protocols:

- Guide RA in writing a thorough incident report.
- Follow campus protocols for hazing-specific reports, CARE report forms, etc, with RA.

Support & Follow Up:

• Check in with RA after the initial response to ensure they feel supported and know what ongoing action, if any, is needed.

Scenario 2 - Harassment: GRAD/AHD

Actors Required: 2 minimum, 3 maximum (at least one resident assistant and at least one practicing staff (up to two practicing staff members))

Tell the Grad(s): Your RA comes to you with concerns about one of their residents who has been looking particularly exhausted. They know that the resident joined a new club on campus but is not sure what club it is. Your RA knows that the resident's exhaustion is impacting their ability to go to class, and is concerned about the resident's grades.

• **Resident Assistant:** They have not seen their resident in a couple of days when they usually see this resident at least two to three times a day around the floor. A couple weeks ago they told the RA that they found a club that they wanted to join, and that it is a professional organization. Their roommate has not been around either, but they are a resident that you don't know very well as they are not as social as the resident in question. The RA goes to their supervisor for next steps.

Processing Questions:

- How would you respond to this situation?
- What are some warning signs that this situation may constitute hazing?
- What campus/department resources can you use to refer the students?
- Do you write a report for this? If so, what type(s)?
- · What policies apply in this scenario?
- What sort of follow up with the resident is appropriate? Do you follow up or does the RA?
- · How involved do you get in this situation as a supervisor?

Suggested Conversation Points and Actions

Background: This scenario involves hazing through harassment-based behaviors, specifically using sleep deprivation, with social isolation as a resulting consequence.

• Clearly explain/reference your institution's hazing policy, including definitions to RA.

Resource Referrals:

- Remind RA to refer impacted individuals to appropriate campus resources such as:
 - · Counseling or mental health services
 - Student Conduct
 - Victims Advocate Office
 - Bias Response Team

Reporting Protocols:

- Guide RA in writing a thorough incident report.
- Follow campus protocols for hazing-specific reports, CARE report forms, etc, with RA.

Support & Follow Up:

• Check in with RA after the initial response to ensure they feel supported and know what ongoing action, if any, is needed.

Scenario 3 - Violence: GRAD/AHD

Actors Required: 3 minimum, 4 maximum (at least one RA, one resident and at least one practicing staff)

Tell the Grad(s): A resident in an academic registered student organization university-registered organization is called to the organization's meeting room. They are gone all night and return to the residence hall disoriented and confused. This is during the academic week, and it is not typical for this resident to return to the hall inebriated, much less on a weeknight.

What the confronter needs to know: You are the grad on call and get a call from an RA in a building that is not yours. The RA tells you that there is a resident throwing up in the hallway of their floor. They can't really understand what the resident is trying to tell them, but they have a feeling that there is something wrong besides the suspected intoxication. When you get there, the RA tells you that the resident has talked to them prior and was told the name of the organization, but the resident kept repeating "I don't want to get them in trouble."

- **Resident Assistant:** The RA on call and is trying to talk to a resident throwing up in the hallway. They do not know the resident personally, however they suspect the resident is intoxicated.
- **Resident:** At a university-registered organization meeting, the seniors of the organization made them chug as much rum as they could. Afterwards, the seniors told them to go home. They managed to make it back to their residence hall, but felt disoriented and sick on the way back. The resident was left to get back to their dorm on their own.

Processing Questions:

- How would you respond to this situation?
- What are some warning signs that this situation may constitute hazing?
- How was the resident's health and wellbeing put at risk?
- What campus/department resources can you use to refer the students (both the RA and the resident)?
- Do you write a report for this? If so, what type(s)?
- · What policies apply in this scenario?
- What sort of follow up with the resident is appropriate? Do you follow up or does the RA?
- How involved do you get in this situation as a supervisor?

Suggested Conversation Points and Actions

Background: This scenario involves hazing through violence, specifically including forced intoxication and actions that place individuals in personal danger.

• Clearly explain/reference your institution's hazing policy, including definitions to RA.

Resource Referrals:

- Remind RA to refer impacted individuals to appropriate campus resources such as:
 - Counseling or mental health services
 - Student Conduct
 - Victims Advocate Office
 - Bias Response Team

Reporting Protocols:

- Guide RA in writing a thorough incident report.
- Follow campus protocols for hazing-specific reports, CARE report forms, etc, with RA.

Support & Follow Up:

• Check in with RA after the initial response to ensure they feel supported and know what ongoing action, if any, is needed.