



Annual Report:  
Institutional Response to Sexual  
and Gender-Based Misconduct

July 1, 2018 - June 30, 2019

Office for Institutional Equity  
October 30, 2019



October 30, 2019

To Members of the University of Michigan-Dearborn Community:

This is the first report from the Office for Institutional Equity (“OIE”) outlining the number of sexual misconduct reports brought to the University’s attention the previous year and how they were addressed. OIE is providing this information in order to be transparent, to acknowledge that these behaviors occur within our community, and to share how the University responds to sexual misconduct.

The information in this report represents the collaborative effort of many campus partners working together to effectively address reports of sexual misconduct. Although this report is intended to provide insight into how the reports were handled, in composing the report, OIE has been mindful of its responsibility to balance the educational benefit of sharing as much information as is appropriate about these matters, while at the same time respecting the privacy of those involved.

Sexual misconduct has no place here, and we encourage every member of our community who has concerns about sexual misconduct to reach out, whether by contacting a [confidential resource](#) for support and other services, the [Office for Institutional Equity](#) for information about resources and the University’s policies and processes for addressing sexual misconduct, the [Department of Police & Public Safety](#) for a response from the criminal justice system, or a combination of these options.

Thank you for reading this report and for your attention to this important issue.

Sincerely,

Pamela Heatlie  
Director of the Office for Institutional Equity

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## Executive Summary

This first annual report issued by the Office for Institutional Equity (“OIE”) details action taken in response to reports of sexual misconduct by students, faculty, staff and third parties that were received between July 1, 2018 and June 30, 2019. During this period, the University received 34 reports: 18 reports about faculty, staff and third parties and 16 reports about students.

Every report was carefully assessed and appropriate action was taken. With respect to the 18 reports about faculty, staff and third parties:

- In nine instances, the University was unable to proceed further either because (1) the respondent’s identity was not disclosed or was not known, (2) the respondent’s identity was known, but that individual was not affiliated with the University, and/or (3) the behavior was not reported as having occurred on campus or in affiliation with a University program or activity.
- In five matters, the University needed additional information and conducted a pre-investigation review to determine if the reported behavior could constitute a violation of University policy or if the individual against whom the allegations were made was associated with the University or a University program or activity. In each instance, the reported behavior either did not constitute a potential violation of University policy or the individual was not affiliated with the University or participating in a University program or activity.
- One matter was proceeding to investigation, but the potential respondent ended their association with the University and it was appropriate to suspend further review under the particular circumstances.
- Three matters proceeded to investigation. There were no findings that the *Sexual Harassment* policy had been violated, but the University engaged in educational measures intended to prevent a recurrence of the behaviors prompting the reports.

With respect to the 16 reports about students:

- There were two instances in which the University was unable to identify the complainant.
- There were 10 reports in which either more information was needed in order to proceed (e.g., respondent’s identity, what behavior occurred, etc.) or the complainant requested that the University not take further action and that request was honored because there were no superseding safety concerns.
- Two matters were investigated or in the process of investigation when the parties voluntarily requested not to proceed further. In both instances, the request was granted because there were no superseding safety concerns.
- One matter was resolved through voluntary adaptable resolution.
- One matter was addressed through institutional intervention and no investigation or adaptable resolution was requested.

OIE and campus partners also offered a variety of educational programming on sexual misconduct issues during the past year.

## Introduction and Applicable Policies

The University has three policies that are used to address reports of sexual misconduct by faculty, staff, third parties and students:

- The [\*Sexual Harassment\*](#) policy (SPG 201.89) is used to address reports of unwelcome conduct of a sexual nature by faculty, staff and third parties, including sexual harassment, sexual assault and most forms of stalking. This policy also prohibits retaliation.
- The [\*Violence in the University Community\*](#) policy (SPG 601.18) is used to address reports of intimate partner violence and forms of stalking that do not fall within the *Sexual Harassment* policy (i.e., have no basis in romantic or sexual interest) by faculty, staff and third parties.
- The [\*Interim Policy and Procedures on Student Sexual and Gender-Based Misconduct and Other Forms of Interpersonal Violence\*](#) (the “*Student Policy*”) is used to address reports of sexual or gender-based harassment, sexual assault, stalking, intimate partner violence, retaliation and violation of protective measures by students.

The behaviors prohibited by these three policies are collectively referred to as “sexual misconduct” in this report.

OIE is responsible for addressing matters arising under the *Sexual Harassment* policy and the *Student Policy*, while Human Resources (“HR”) is generally responsible for addressing matters arising under the *Violence in the University Community* policy. Where the reported behavior implicates both policies, OIE and HR work collaboratively to resolve the concerns.

## Number and Type of Reports Received

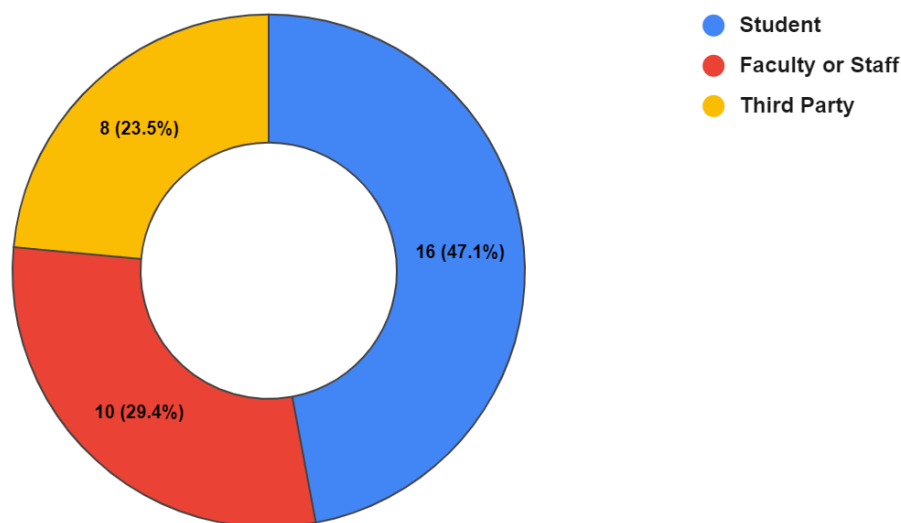
This year, OIE received 34 reports of possible sexual misconduct by faculty, staff, third parties and students.<sup>1</sup>

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<sup>1</sup> This report identifies the total number of sexual misconduct concerns that were reported during the past fiscal year, and is likely to differ from statistics provided in the University’s [Annual Security Report and Annual Fire Safety Report](#). As required by the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (Clery Act), the Annual Security Report contains the reported number of certain types of crimes, as defined by the FBI Uniform Crime Reporting (UCR) Program, that occurred in particular geographic locations during the calendar year. Some of the incidents referenced in this report, while falling under the definitions contained in applicable University policies, do not fall within the federal definitions used for the purposes of reporting in the Annual Security Report, which results in a disparity between the data reported in this report and the Annual Security Report. Further, the numbers will differ because the two reports contain information from different time periods (i.e., this report encompasses the 2019 fiscal year while this year’s Annual Security Report reflects the 2018 calendar year).

## Reports by Respondent Type

(34 Reports)



The University encourages every member of our campus community to report sexual misconduct. A report may be made by a person who has experienced, witnessed, heard about or otherwise has knowledge of possible sexual misconduct. We encourage reporting because it allows the University to provide for the safety and well-being of both individual community members and the overall campus community. It also allows us to provide resources and support for those impacted by the reported misconduct. There are a variety of ways to report concerns about sexual misconduct, including [online](#) or directly to OIE at (313) 436-9194 or [InstitutionalEquityDearborn@umich.edu](mailto:InstitutionalEquityDearborn@umich.edu).

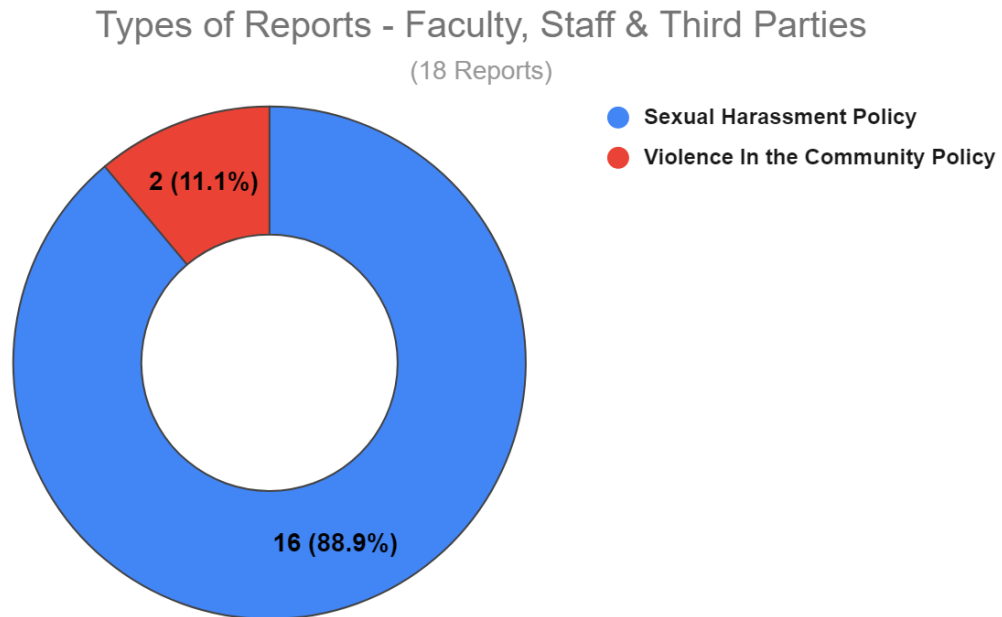
### a. Reports with Faculty, Staff or Third Party Respondents

Of the 34 reports received this past fiscal year, ten raised concerns about a faculty or staff member and eight raised concerns about a third party.<sup>2</sup> As noted above, reports of sexual harassment (including sexual assault and most forms of stalking) by faculty, staff and third parties are addressed under the *Sexual Harassment* policy and reports of intimate partner violence and other forms of stalking are addressed under the *Violence in the University Community* policy. Of the 18 reports received this past fiscal year:

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<sup>2</sup> In some instances, OIE was unable to determine the identity of the respondent and whether that person had any connection to the University or a University program or activity. In those instances, the matter was categorized as a report against a third party.

- 16 involved behavior that potentially fell under the *Sexual Harassment* policy
- 2 involved behavior that potentially fell under the *Violence in the University Community* policy.



#### **b. Reports with Student Respondents**

OIE received 16 reports involving student respondents, all of which fell under the *Student Policy*. The 16 reports represented 17 possible policy violations, as follows:<sup>3</sup>

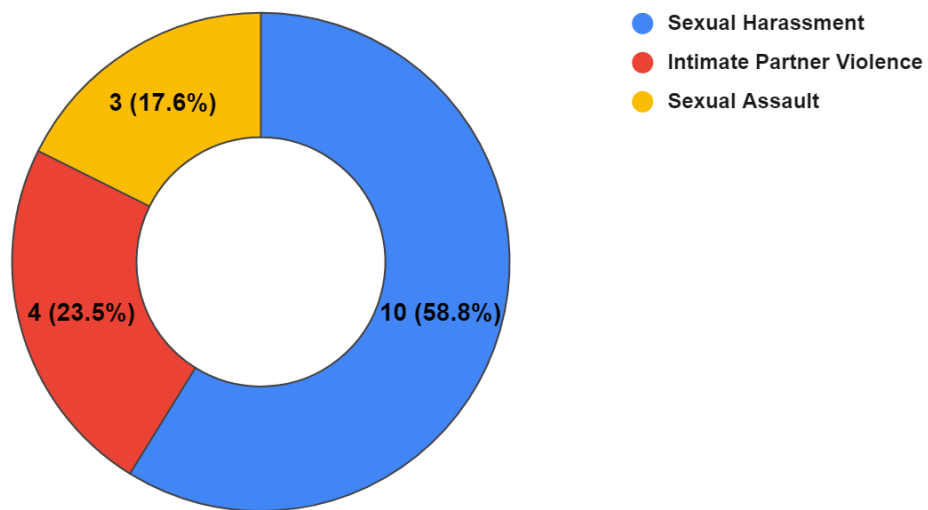
- 10 reports of sexual harassment
- 4 reports of intimate partner violence
- 3 reports of sexual assault
- 0 reports of stalking
- 0 reports of retaliation
- 0 reports of violation of interim measures

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<sup>3</sup> One of the reports described behavior that could constitute more one type of sexual misconduct by the same person, meaning that although 16 reports were received, 17 possible policy violations were reported.

## Types of Reports - Student Respondents

(17 Possible Policy Violations)



## Handling of Reports with Faculty, Staff and Third Party Respondents

### a. Initial Response and Interim Measures

One of the first steps the University takes when a sexual misconduct concern is raised is to offer the complainant and respondent resources and support, including information about confidential resources. The [Department of Public Safety & Security](#) (“DPSS”) is also informed of sexual misconduct reports that are criminal in nature.

As part of its support, the University offers “interim measures.” Interim measures are steps taken to provide for the safety and well-being of the parties and/or the campus community, and can include a variety of actions taken by numerous offices on campus. This year, the University arranged interim measures in three of the 18 matters in which a faculty member, staff member or a third party was the respondent.<sup>4</sup> All three interim measures involved some form of separating the parties.

When interim measures are undertaken, no assumptions are made as to whether the respondent engaged in sexual misconduct; rather, the assessment of whether and what interim measures are appropriate focuses on safety and preventing the possibility of harm while the investigation or other institutional action is pending. In addition, steps are taken to reduce the impact interim measures might have on the parties.

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<sup>4</sup> Confidential resources may also arrange for some interim measures. This report will not account for those interim measures unless the complainant also elected to report their concerns to OIE.



## **b. Matters Closed Because the University Could Not Proceed Further**

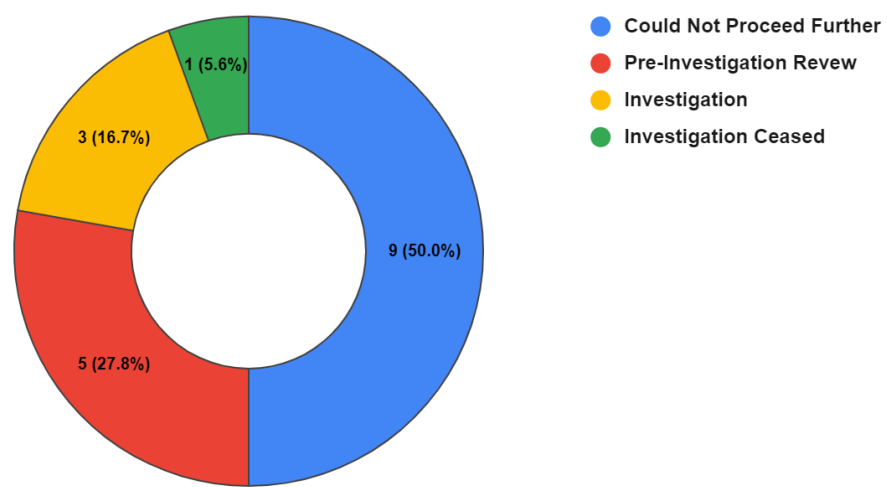
Nine of the 18 reports with faculty, staff or third party respondents were closed because either (1) the respondent's identity was not disclosed/known/could not be determined, (2) the respondent's identity was known, but that individual was not affiliated with the University, and/or (3) the behavior was not reported as having occurred on campus or in affiliation with a University program or activity. For these reasons, the University's policies did not apply or it was unable to proceed further; however, in those cases in which the University is unable to proceed because the respondent was not or could not be identified, the University will assess appropriate next steps if and when that information becomes available.

## **c. Pre-Investigation Reviews**

Five of the 18 reports underwent a "pre-investigation review," because the information available to the University was insufficient to determine an appropriate response. For example, sometimes more information is needed to understand if the behavior at issue could constitute a policy violation. If the pre-investigation review indicates that relevant evidence of a possible policy violation is likely available to the investigator, the matter generally proceeds to investigation. If that does not occur, a different action may be taken or the matter may be closed pending receipt of additional information.

In each of the five pre-investigation reviews conducted this year, the additional information gathered indicated that the reported behavior either did not constitute a potential violation of University policy or the respondent was not affiliated with the University or participating in a University program or activity. These matters did not proceed to investigation.

Response to Reports - Faculty, Staff Third Party Respondents  
(18 Reports)



#### **d. Investigations, Findings and Corrective Action**

Three matters proceeded to investigation. A fourth matter was proceeding to investigation, but the respondent ended their association with the University and it was appropriate to suspend further investigation under the circumstances.

The three investigations were conducted under the [Procedural Guidelines](#) associated with the *Sexual Harassment* policy. OIE's investigation process is outlined in more detail in Information Sheets provided to [complainants](#), [respondents](#) and witnesses. The [flowchart in Appendix A](#) also outlines the investigation process.

Under the *Sexual Harassment* policy, OIE investigations may result in one of the following four findings:

- A policy violation – Unwelcome conduct of a sexual nature occurred and was sufficiently severe, persistent or pervasive as to create a hostile environment
- A finding of inappropriate behavior – Unwelcome conduct of a sexual nature occurred and was inappropriate, but not sufficiently severe, persistent or pervasive as to have created a hostile environment
- No policy violation – Either there was insufficient evidence to conclude the behavior occurred, the behavior was not sexual in nature or the behavior was not otherwise inappropriate when looking at the totality of the circumstances
- The behavior did not occur as reported

In making a finding, OIE uses the “preponderance of the evidence” standard set forth in the *Sexual Harassment* policy. Under this standard, individuals are presumed not to have engaged in the alleged conduct unless a preponderance of the evidence supports a finding that the conduct occurred. The preponderance of the evidence standard requires that the evidence supporting each finding be greater than the evidence obtained in opposition to it.

Of the three investigations conducted by OIE this year, none resulted in a finding that the *Sexual Harassment* policy had been violated.<sup>5</sup> In all three matters, the University took educational measures intended to prevent a recurrence of the behaviors prompting the reports.

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<sup>5</sup> In those instances in which there is a finding that the *Sexual Harassment* or *Violence in the University Community* policy was violated or that inappropriate behavior occurred, the relevant administrator takes appropriate corrective action intended to address the behavior at issue, remedy any harm the behavior may have caused, and ensure that the behavior does not recur. Corrective action is tailored to the specific circumstances of each case. When corrective action is taken, the faculty or staff member may grieve the corrective action using the appropriate grievance procedure. As noted above, this year no such corrective action was taken.

#### **e. Matters Addressed under Collective Bargaining Agreements**

When concerns are raised about union employees, the terms of the collective bargaining agreement between the University and the union outline whether the matter is addressed using procedures in the collective bargaining agreement or the matter is referred to OIE. When matters are addressed using processes in the collective bargaining agreement, the matter is handled by Human Resources.

This year, none of the 10 reports against University employees fell under collective bargaining agreement procedures.

#### **f. Referrals/Other Measures**

Some reports may be addressed appropriately without a pre-investigation review or an investigation. For example, a supervisor may contact OIE about a concern that a long-term employee told a sexual joke in the workplace. If the employee does not have a history of such behavior and no other concerns have been raised, this matter can usually be resolved through action taken by the supervisor and HR, if appropriate to the particular circumstances. In this example, the matter would be documented by OIE in the event there is a recurrence.

None of the 18 reports received this year were handled through such referrals or other measures.

### **Handling of Reports with Student Respondents**

As noted on [page 5](#), during the past year, OIE received 16 reports of possible sexual misconduct by students, representing 17 possible policy violations.

#### **a. Initial Response and Interim Measures**

The University's initial response when a report is received about a student is the same as when a report is received about an employee or third party: to offer the complainant and respondent resources and support, including information about confidential resources. The [Department of Public Safety & Security](#) ("DPSS") is also informed of sexual misconduct reports that are criminal in nature.

As part of its support, the University offers interim measures. Examples of interim measures include changes to academic schedules, safety escorts, "no contact" directives, interim suspension, etc. Interim measures are determined on a case-by-case basis, depending upon the

needs of the parties involved, whether the matter is proceeding to investigative resolution,<sup>6</sup> and the nature of the reported behavior.

During this past year, interim measures and resources were made available when the identity of one or more of the parties was known. Of the 16 reports involving student respondents, the University was able to identify the complainant in 14 instances. In those 14 instances, the offer of interim measures was accepted once. The University issued a no contact directive in that matter.

When interim measures are undertaken, no assumptions are made as to whether the respondent engaged in sexual misconduct; rather, the assessment of whether and what interim measures are appropriate focuses on safety and preventing the possibility of harm while the investigation or other institutional action is pending. In addition, steps are taken to reduce any negative impact interim measures might have on the parties.

#### **b. Matters Closed Because the University Could Not Proceed Further or Upon Complainant's Request**

In 12 of the 16 reports, OIE could not take further action. In two instances, this happened because OIE was unable to identify the complainant. In the remaining 10, the matter was closed either because the University did not have necessary relevant information (e.g., the respondent's identity, what behavior occurred, etc.) or the complainant requested that the University not take further action.

The University recognizes that individuals have varied reasons for choosing whether and how to pursue resolution of their concerns. The University seeks to honor and respect the wishes of each individual complainant, while still meeting its obligations to the campus community as a whole. In those instances in which the complainant requests that the University not take further action, OIE, in consultation with the Dean of Students and the Department of Police & Public Safety, assesses that request by balancing it against the following safety considerations:

- The nature and scope of the alleged conduct, including whether the reported behavior involves the use of a weapon;
- The respective ages and roles of the Complainant and the Respondent;
- The risk posed to any individual or to the campus community by not proceeding, including the risk of additional violence;
- Whether there have been other reports of Prohibited Conduct or other misconduct by the Respondent;

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<sup>6</sup> Under the *Student Policy*, interim measures that directly impact the respondent may only be put in place when an investigative resolution occurs. Interim measures that only impact the complainant – referred to as Supportive Measures – are available regardless of how the complainant chooses to proceed.

- Whether the report reveals a pattern of misconduct related to Prohibited Conduct (e.g., via illicit use of drugs or alcohol) at a given location or by a particular group;
- The Complainant's interest not to pursue an investigation or disciplinary action and the impact of such actions on the Complainant;
- Whether the University possesses other means to obtain relevant evidence;
- Due process considerations for both the Complainant and the Respondent;
- The University's obligation to provide a safe and non-discriminatory environment; and
- Any other available and relevant information.

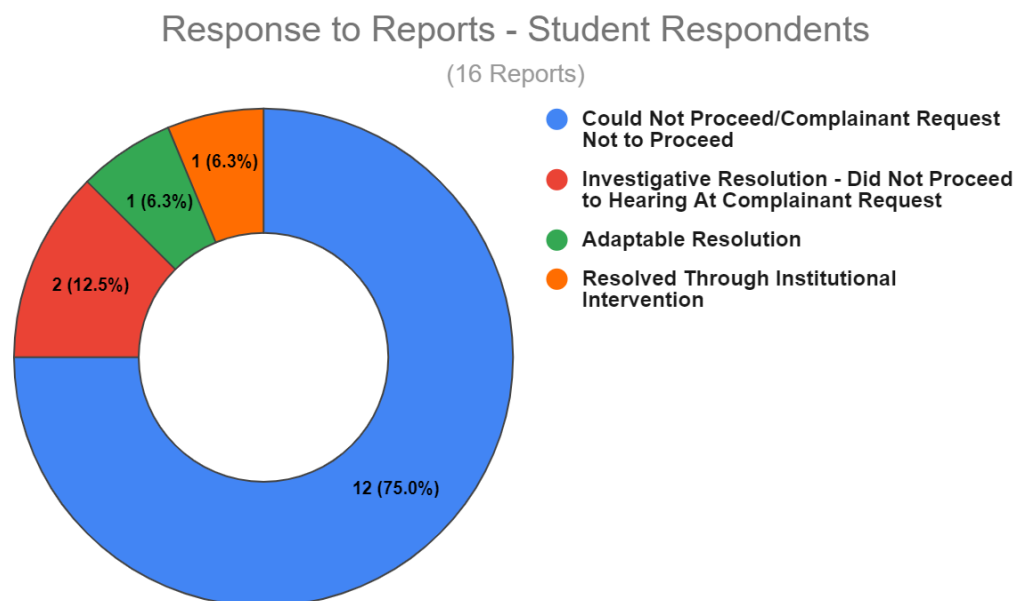
See [Student Policy](#), pages 22-23.

During the past year, in each instance in which the complainant requested that the University not take further action, OIE, after consultation and consideration of the specific circumstances, was able to honor the complaint's request.

Even in those instances in which the ultimate decision is not to proceed to investigative or alternative resolution, the University may take other action, such as providing resources, interim measures, education and training to the respondent or a particular organization. In addition, investigative or adaptable resolution may occur at a later date if more information becomes available or the complainant subsequently decides to participate in such a resolution. Finally, even if no investigative or adaptable resolution ensues, reported conduct that could be criminal in nature is reported to DPPS.

### c. Institutional Intervention

In one case, the University took action appropriate to the circumstances as the concern arose. The complainants did not subsequently request investigative or adaptable resolution.



#### **d. Investigative Resolution**

Two matters proceeded to investigative resolution. Investigative resolution is conducted consistent with the procedures outlined in pages 24-40 of the [Student Policy](#). The investigation process is also outlined in Information Sheets provided to [complainants](#), [respondents](#) and witnesses, and the [flowchart in Appendix B](#).

In both matters that were investigated, the complainants requested that the matter not proceed to a hearing and they indicated they likewise were not interested in adaptable resolution. After an assessment and consultation with the Dean of Students and DPPS (similar to the [process described above](#) in which safety concerns are considered), OIE determined that the matters could be closed.

#### **e. Adaptable Resolution**

Under the *Student Policy*, the parties may request adaptable resolution. Adaptable resolution, which is described in detail on [pages 40-44 of the Student Policy](#), allows the respondent to accept responsibility for their actions and for repairing the harm caused, to the extent possible. Adaptable resolution does not result in formal disciplinary action against the respondent and is not available in cases of penetrative sexual assault or when not approved by OIE. If the parties reach a tentative agreement during the adaptable resolution process, the agreement must be approved by the University. The parties may withdraw from the adaptable resolution process and proceed to an investigative resolution at any time before an adaptable resolution agreement is approved.

During the past year, one matter was resolved through adaptable resolution.

### **Education and Prevention Measures**

In addition to the University's commitment to respond promptly and appropriately to reports of sexual misconduct, the University continues to focus on educational measures intended to prevent sexual misconduct and ensure that those who are experiencing it have information about resources and reporting options.

Over the past two years, OIE and Student Affairs have partnered to provide in-person sexual violence prevention education to all incoming first year and transfer students. In addition, all undergraduate and graduate students participate in a comprehensive online educational program on this issue.

This year, the University introduced an online educational program for faculty and staff entitled *Cultivating a Culture of Respect: Sexual Harassment and Misconduct Awareness*. Faculty and staff are required to complete this program by the end of December 2019.

OIE, working with campus partners, is engaged in ongoing efforts to increase education and awareness programs for our community and create additional helpful resources, such as the [Our Community Matters](#) resource guide, which provides crucial information to individuals in our community who have experienced sexual misconduct. This academic year, the University [plans to adopt an umbrella sexual misconduct policy and related procedures](#) that will apply to faculty, staff, students and third parties, versus the separate policies currently in place. OIE will engage in efforts to inform our community about the policy when it is implemented and reinforce the resources and options available to those who report sexual misconduct and/or are involved in an investigation process.

## Conclusion

Sexual misconduct happens in every community, including our community. OIE and other offices across the University are engaged in continued efforts to prevent sexual misconduct and respond in a prompt and appropriate manner when it is reported. Additional information about University policies, procedures and resources is available on [OIE's website](#).

OIE welcomes feedback on how it might make this document more helpful, easier to understand, or otherwise improve its content. Please provide any feedback to the Office for Institutional Equity:

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1114 Administration Building  
4901 Evergreen Road, Dearborn, MI 48128-5204  
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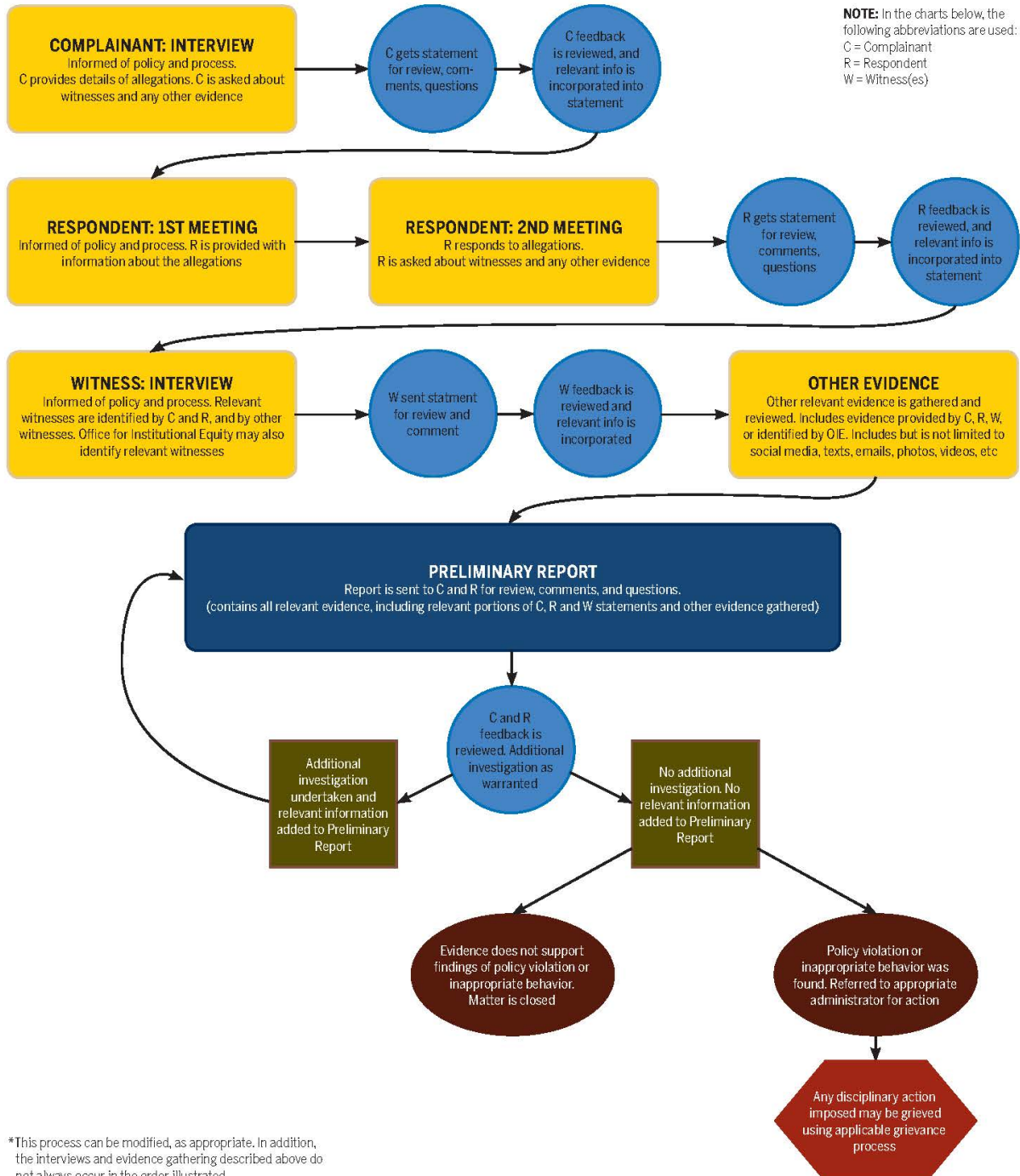


## Appendix A



SPG 201.89 AND 201.89-1

### FACULTY AND STAFF INVESTIGATION FLOWCHART\*



\*This process can be modified, as appropriate. In addition, the interviews and evidence gathering described above do not always occur in the order illustrated.



## Appendix B



### POLICY & PROCEDURES STUDENT INVESTIGATIVE RESOLUTION

