



DAKOTA COLLEGE AT  
**BOTTINEAU**

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**Drug-Free Schools and Campuses Regulations [EDGAR Part 86]  
Biennial Review: 2024**

Hannah Hoffert, MS – Mental Health Coordinator  
Corey Gorder, MS, LPCC – Counselor and Associate Dean of Student Services  
Student Services Division  
December 2024



**Alcohol and Other Drug Prevention Certification Signed by Chief Executive Officer**

The undersigned certifies that it has adopted and implemented an alcohol and other drug prevention program for its students and employees that, at a minimum, includes –

- 1. The annual distribution to each employee, and to each student who is taking one or more classes of any kind of academic credit except for continuing education units, regardless of the length of the student’s program of study, of:**
  - a. Standards of conduct that clearly prohibit, at a minimum, the unlawful possession, use or distribution of illicit drugs and alcohol by students and employees on its property or as a part of any of its activities.
  - b. A description of the applicable legal sanctions under local, State, or Federal law for the unlawful possession or distribution of illicit drugs and alcohol.
  - c. A description of the health risks associated with the use of illicit drugs and the abuse of alcohol.
  - d. A description of any alcohol or drug counseling, treatment or rehabilitation or re-entry programs that are available to employees and students.
  - e. A clear statement that the institution will impose disciplinary sanctions on students and employees (consistent with State and Federal law), and a description of those sanctions, up to and including expulsion or termination of employment and referral for prosecution, for violations of the standards of conduct. A disciplinary sanction may include the completion of an appropriate rehabilitation program.
  
- 2. A biennial review by the institution of its alcohol and other drug prevention comprehensive program to:**
  - a. Determine its effectiveness and implement changes to its comprehensive alcohol and other drug prevention programs and policies if they are needed.
  - b. Ensure that its disciplinary sanctions are consistently enforced.

Dakota College at Bottineau  
Name of College

105 Simrall BLVD Bottineau, ND 58318  
Address of College

Dr. Carmen M. Simone  
Typed Name of Dean/CEO

45-6002445  
IRS Employer Identification Number

*Carmen M Simone*  
Signature of the Dean/CEO

701.228.5403  
Telephone Number

**Table of Contents**

- I. Introduction / Overview ..... 5**
- II. Biennial Review Process ..... 5**
- III. Annual Policy Notification Process ..... 6**
- IV. Alcohol and Other Drug (AOD) Prevalence Rate,  
Incident Rate, Needs Assessment, and Trend Data ..... 7**
- V. AOD Policy, Enforcement, and Compliance Inventory..... 7**
  - A. Policies
  - B. Oversight of Policy
  - C. Enforcement
  - D. Record of Violations
- VI. AOD Comprehensive Program / Intervention Inventory  
& Related Process and Outcomes Data..... 8**
  - A. Community Activities/Initiatives
  - B. College/University Activities/Initiatives
  - C. Programs for Special Populations
  - D. Individual Based Programs/Initiatives
  - E. Group Based Programs/Initiatives
  - F. Universal or Entire Population Based Programs/Interventions
  - G. Environmental/Socio-Ecological Based Programs
- VII. Alcohol and Other Drug Comprehensive  
Program Goals and Objectives for Biennium..... 10**
- VIII. AOD Strengths and Weaknesses ..... 10**
- IX. Conclusion ..... 13**
- X. Appendices ..... 14-316**
  - A. Appendix A: Drug Free Campus Policy – Faculty and Staff
  - B. Appendix B: EDGAR Part 86 Worksheet
  - C. Appendix C: Resident Life Handbook
  - D. Appendix D: Housing Violations and Sanctions
  - E. Appendix E: Student Athlete Handbook
  - F. Appendix F: Annual Security and Fire Safety Report 2023-2024
  - G. Appendix G: Sexual Harassment, Discrimination, and Sexual Misconduct Policy
  - H. Appendix H: Smoking, Tobacco-Free Campus DCB Policy.917
  - I. Appendix I: American College Health Association-National College Health  
Assessment Spring 2024 Data Report

## **I. Introduction / Overview**

Dakota College at Bottineau is committed to an environment that supports the academic success and health of our staff and students and has an Alcohol and Drug-Free Campus Policy that serves to provide the campus with activities and services designed to encourage a healthy and drug-free lifestyle.

In keeping with the requirements of the Drug-Free Schools and Campuses Regulations [EDGAR Part 86], Dakota College at Bottineau has a Smoking, Tobacco-Free Campus Policy that describes standards of conduct that clearly prohibit the unlawful possession, use, or distribution of illicit drugs and alcohol by students and employees on Dakota College at Bottineau property or as part of any Dakota College at Bottineau sponsored activities. The policy includes the following:

1. A description of legal sanctions under federal, state, or local law for the unlawful possession use or distribution of illicit drugs and alcohol.
2. A clear statement of disciplinary sanctions that Dakota College at Bottineau will impose on students and employees for violations of the standards of conduct.
3. A description of the health risks associated with the use of illicit drugs and the abuse of alcohol.
4. A description of the drug and alcohol counseling and treatment resources available to students and employees.

As outlined in the “Complying with the Drug-Free Schools and Campuses Regulations” (EDGAR Part 86), the policy is distributed to all students and employees as part of our Drug-Free Campus Program. This required biennial review has the following two objectives. First, to determine the effectiveness of, and to implement necessary changes to, the AOD/ATOD Prevention Program. Secondly, to ensure that campuses enforce disciplinary sanctions for violating standards of conduct consistently.

## **II. Biennial Review Process**

This Review covers the period of 2022-2024. Specifically, it covers the start of the fall 2022 semester through the summer of 2024.

### **A. Biennial Review Committee:**

- a. Hannah Hoffert, MS – Mental Health Coordinator
  - i. The full-time Mental Health Coordinator includes 80%-time allocation for direct involvement in facilitating and coordinating mental health efforts on campus; facilitating the Behavior Intervention Team (BIT); working with student services for monthly themes; producing informational sheets to have around campus; and working with the NDUS task force.
- b. Corey Gorder, MS, LPCC – Associate Dean of Student Services
- c. Bridget Gustafson – Director of Student Services and Housing Director

### **B. Location of Biennial Review**

- a. All documentation pertaining to the DCB Alcohol and Drug Policy is available for public review. A physical copy of the Biennial Review can be found in Mental Health Services (Thatcher Hall 1109) and the library (Thatcher Hall).
- b. The Dakota College at Bottineau Website under Health Services ([www.dakotacollege.edu/student-life/health-services](http://www.dakotacollege.edu/student-life/health-services))
- c. The Biennial Review Report is kept for 2 years, as this document will be updated in Winter of 2026.

- d. Questions regarding the Biennial Review Report can be directed to:  
Hannah Hoffert, MS – Mental Health Coordinator  
Thatcher Hall 1109  
105 Simrall Blvd  
Bottineau, ND 58318  
701.228.5636 | [hannah.hoffert@dakotacollege.edu](mailto:hannah.hoffert@dakotacollege.edu)

### III. Annual Policy Notification Process

- A. Content of Alcohol/Drug Abuse Prevention Statement
  - a. Please see Appendix A – Drug Free Campus Policy – Faculty and Staff
  - b. The Policy can also be found at
    - i. <https://www.dakotacollege.edu/faculty-and-staff/policies?keywords=drug&search=>
- B. Notification Process for Employees
  - a. At the beginning of employment, each new employee of Dakota College at Bottineau must complete an onboarding process. During this process, each employee is required to read through the Dakota College at Bottineau Policy Documents. Upon completion of this task, it is required to acknowledge and agree. Amongst the Policy Documents is the Drug Free Campus Policy – Faculty and Staff.
  - b. All part-time and full-time staff and faculty are provided with a DCB e-mail address, which is the official means of communication for the campus. All staff/faculty are required to complete the annual training each fall semester, in which the policy is explained in full detail.
  - c. Upon policy update, all faculty/staff part time and full time receive an email with the updated policy explained in full detail, as well as a link of where to access the update policy.
- C. Notification Process for Students
  - a. When students enroll at Dakota College at Bottineau, they are provided with a DCB e-mail address, which is the official means of communication for the campus. Providing their cell phone information for emergency notification.
  - b. Students are defined to include those that take part in full-time enrollment, part-time enrollment, and those that take part in Dual Credit courses through their high school system.
  - c. At the beginning of each semester, students on-campus and off-campus are notified of the policies and expectations of their behavior. Amongst the policies and expectations, the students are notified of each update to policies.
  - d. On-campus students are presented with the Resident Handbook – see Appendix C. Student Athletes are also required to read and sign the Student Athlete Handbook – See Appendix E. Each of these handbooks outlines the expectations and policies that must be followed.
  - e. All residents on campus are notified of the policy at the beginning of the semester, as well as mandatory hall meetings. The policy is posted throughout each of the Residence Halls to serve as a reminder.
  - f. Individuals that are part of the continuing education program are not formally informed of the Smoking, Tobacco-Free Campus Policy; however, the policy is posted publicly on our website, as well as placement in the Annual Security and Fire Safety Report.

#### **IV. Alcohol and Other Drug (AOD) Prevalence Rate, Incidence Rate, Needs Assessment, and Trend Data**

- A. Assessment of the AOD Prevalence Rate
  - a. During the semester of Spring of 2024, Dakota College at Bottineau gathered data from approximately 39 students in a survey known as the American College Health Association - National College Health Assessment III (ACHA-NCHA). This survey provides colleges with insight into the lives of the students and their habits.
  - b. In the ACHA-NCHA data (see Appendix I), 15 out of the 28 responses indicates they had tried tobacco in their life; 25 out of the 38 responses indicates they had tried alcohol in their life; 9 out of the 38 responses indicated they had tried cannabis in their life.
  - c. In the ACHA-NCHA data (see Appendix I), focusing on the previous three months, 9 out of the 15 responses indicated that they had utilized tobacco; 24 out of the 25 responses indicated they had utilized alcohol; and 6 out of the 9 responses indicated they had utilized cannabis.
- B. Incident Rate
  - a. The number of drug and alcohol-related incidents at Dakota College at Bottineau is equal to zero.
  - b. The number of drug and alcohol-related fatalities at Dakota College at Bottineau is equal to zero.
  - c. The number of drug and alcohol-related ambulance transports at Dakota College at Bottineau are equal to zero.
  - d. The number of drug related sanctions written at Dakota College at Bottineau in the years of Fall of 2022 to Summer of 2024 are equal to two.
  - e. The number of alcohol-related sanctions written/non-arrests written at Dakota College at Bottineau in the years of Fall of 2022 to Summer of 2024 are equal to seventy-eight.
  - f. The number of alcohol-related legal arrests at Dakota College at Bottineau in the years of Fall of 2022 to Summer of 2024 are equal to three.
  - g. The above statistics can be found in Appendix F – Page 16.
- C. Needs Assessment
  - a. Based primarily on the data above and found in Appendix I, Dakota College at Bottineau holds an obligation to the students at Dakota College at Bottineau to present with a united front and hold students accountable for their actions and use of alcohol and other drugs on campus. It is essential that Dakota College at Bottineau create multiple options for students to remain free of AOD.

#### **V. AOD Policy, Enforcement, and Compliance Inventory**

- A. Policies
  - a. Drug Free Campus Policy – Faculty and Staff (see Appendix A)
    - i. Housed online at <https://www.dakotacollege.edu/faculty-and-staff/policies?keywords=drug&search=>
  - b. Smoking, Tobacco-Free Campus DCB Policy.917 (see Appendix H)
    - i. Housed online at <https://www.dakotacollege.edu/handbook/>
  - c. Student Athlete Alcohol, Tobacco, and Illegal Drug Policy and Athletic Alcohol and other Drug Screening Policy (see Appendix E)
    - i. Housed online at [https://www.dcbjacks.com/general/Student-Athlete\\_Handbook\\_8\\_29\\_2024-1-.pdf](https://www.dcbjacks.com/general/Student-Athlete_Handbook_8_29_2024-1-.pdf)

- d. Alcohol, Drugs, and Smoking Regulations (see Appendix C).
  - i. Housed online at <https://www.dakotacollege.edu/flipbooks/residence-life/>
- e. Alcohol/Drug Abuse Policy (see Appendix J)
  - i. Housed online at <https://www.dakotacollege.edu/handbook/36/>
- B. Oversight of Policy
  - a. Policies involving employees (faculty/staff) fall under the responsibility of Human Resources – Sandy Hageness.
  - b. Policies involving students (on-campus and off-campus) fall under the responsibility of Director of Student Services and Housing Director – Bridget Gustafson.
  - c. Policies involving athletes fall under the responsibility of the Athletic Director – Carolyn Rygg.
  - d. Policies are updated annually and sent out to the appropriate individuals by each person responsible for those that must abide by the set policy.
  - e. Sanctions are set under each appropriate policy – please see Appendix D.
- C. Enforcement
  - a. Due to the size and population of Dakota College at Bottineau, there is a group of individuals who are trained to be security and encouraged to ensure the enforcement of alcohol and other drug policies.
  - b. Dakota College at Bottineau has a signed contract with our local Sheriff's Department that indicates that an officer is to walk through each of the residence halls at a specific time in the night and is to respond with their judgement to any suspicious activity.
  - c. Infractions that take place in housing are reported to Director of Student Services/Housing Director – Bridget Gustafson.
  - d. Campus housing staff include residential assistants, head residents, and the director of housing. Each of these individuals are trained in responding to events involving alcohol and other drugs and are part of enforcement efforts.
- D. Record of Violations
  - a. Please reference Section IV – Subsection B for the number/type of violations observed and reported to the Director of Housing.
  - b. During the span of Fall of 2022 to Summer of 2024, there were zero requests for alcohol sales/serving at any Dakota College at Bottineau events or functions.

**VI. AOD Comprehensive Program /Intervention Inventory & Related Process and Outcomes/Data**

- A. Community Activities/Initiatives
 

The following information represents an inventory of community programs and initiatives:

  - a. United Parish Methodist Church in Bottineau, ND hosts a weekly Alcohol Anonymous on Wednesdays, which is used as a resource for students, employees, or faculty who are in need of community services.
  - b. Essential Family Solutions, located in Bottineau, ND, is a mental health and substance abuse clinic. Offering family, couples, and individual services to those in the community who desire/need evaluations and/or outpatient services.
- B. Dakota College at Bottineau Activities/Initiatives



- a. Dakota College at Bottineau has a campus nurse that is present on-campus every Tuesday. Mary Gorder, Dakota College at Bottineau Nurse, presents and provides several learning opportunities for students to learn about alcohol and other drugs. Alcohol and other Drug Services include presenting information, referring students to outside services, and assisting with a smooth connection to Mental Health Services at Dakota College at Bottineau.
  - b. Dakota College at Bottineau Wellness Committee serves as a group comprised of the Allied Health Director, a student, coaches, and two other staff members. The Wellness Committee provides weekly insights into the wellness of the students, staff, and faculty. Speaking on the effects of alcohol and other drugs on not only physical health, but also mental health.
- C. Programs for Special Populations
  - a. Dakota College at Bottineau Athletic Department utilizes mandatory team meetings as an opportunity to remind students of alcohol and other drug policies.
  - b. Dakota College at Bottineau is home to several international students, who typically come from countries with a legal alcohol age of 18. Information about the legal age and laws to North Dakota are presented in housing meetings, as well as during first year experience and orientation.
  - c. Mandatory residence hall meetings provide an opportunity to remind students of policies, as well as legal limitations of North Dakota.
- D. Individual Based Programs/Interventions
  - a. Dakota College at Bottineau utilizes Safe Colleges, which is an hour-long alcohol-awareness program utilizing quizzes and motivational interviewing to provide students that have violated policies with an opportunity to educate themselves.
  - b. Dakota College at Bottineau utilizes the Electronic Check-up to Go (E-CHUG) as a program for those that struggle with the use of alcohol and other drugs.
  - c. Dakota College at Bottineau utilizes The Village in Minot, ND as a partner for Employee Assistance Program. This provides employees, part-time or full-time, the opportunity to meet with a counselor from The Village for a number of sessions to work on personal concerns.
  - d. Dakota College at Bottineau Mental Health Services provide a number of services on campus, such as athletic team reach out and individual services to focus on a number of issues, addressing alcohol and other drug usage.
  - e. Dakota College at Bottineau utilizes Safe Colleges for violation and infractions of the Alcohol, Smoking, Tobacco, and Other Substances Policies. (see Appendix D).
- E. Group Based Programs/Interventions
  - a. Dakota College at Bottineau offered a Peer Support Group a resource to learn about the consequences of Alcohol and Other Drugs.
- F. Universal or Entire Population Based Programs Programs/Interventions
  - a. Dakota College at Bottineau does not house or utilize any universal based programming or interventions at this time.
- G. Environmental/Socio-Ecological Based Programs
  - a. Dakota College at Bottineau is part of the North Dakota Higher Education Consortium for Substance Abuse Prevention.

- b. All student life events (on-campus and off-campus), including athletic events, that are associated with Dakota College at Bottineau are mandated to follow the Alcohol-Free, and the Smoking, Tobacco, and Drug-Free Policies. These events are promoted through campus channels.
- c. Dakota College at Bottineau on-campus housing is mandated to be alcohol and other drug free. This includes an infraction and fee policy that is in place should an individual go against the policy.
  - a. To ensure that this policy is followed, there are monthly and regular random room checks for alcohol and other drugs.
- d. Dakota College at Bottineau is partnered with Bottineau County, ND Sherriff's Department to encourage a presence and alliance between the college and the sheriff's office. Within this partnership, there is an officer that walks through the halls at a particular time during the night to ensure the safety of the campus and students.

**VII. Alcohol and Other Drug Comprehensive Program Goals and Objectives for Biennium**

In the prior Biennial Review report, the following recommendations that were made for the reported upon biennium, based off of 2022's Review

- A. Recommendation 1:
  - a. Involve students in campus efforts related to drug and alcohol utilization
    - Dakota College at Bottineau Wellness Committee includes a student representative to gather opinions and options to better incorporate students in the wellness of campus.
    - In 2023, the Director of Student Housing constructed a presentation and provided training to Head Resident and Resident Assistants an Opioid Overdose Prevention Training.
- B. Recommendation 2:
  - a. Continue to participate in the North Dakota Higher Education Consortium for Substance Abuse Prevention
    - This goal has been successfully met. Mental Health Services provide a summarization throughout meetings and leave with ideas to utilize on campus.
- C. Recommendation 3:
  - a. Continue to expand drug and alcohol and substance use prevention programming
    - Unfortunately, at this time, this goal has yet to be met.
- D. Recommendation 4:
  - a. Continue to review the alcohol violation policy
    - Dakota College at Bottineau - Director of Student Services has completed this task, as well as continues to review the policy to update fines and fees for those who receive violations.
- E. Recommendation 5:
  - a. Develop a method of rewarding students who choose not to drink or utilize substances
    - Unfortunately, at this time, this goal has not been met.

F. Recommendation 6:

- a. Develop a team to address planning and implementation of events for students, faculty, and staff.
  - The Dakota College at Bottineau Wellness Committee works together with campus representatives to plan and implement events for the students, faculty, and staff.

**VIII. DCB AOD Strengths, Weaknesses, and Recommendations**

Based on the review of the past two years, the DCB Student and Mental Health Services noted several areas as strengths and other areas were noted for needing improvement

**A. Strengths of DCB Alcohol and Other Drug Abuse Prevention Programming**

- a. Dakota College at Bottineau utilizes the tactic of deterrence through posting Alcohol and Drug Free Campus Policies throughout the residence halls, as well as through presence of law enforcement through the partnership with Bottineau County Sherriff's Department. This partnership promotes the presence of law enforcement by doing rounds throughout the night, attending larger student events, and having a visible presence on campus.
- b. Residential Assistants have been trained in noticing the signs of alcohol or other drug utilization by students. Utilizing the tactic of presence and deterrence, residential assistants do multiple rounds throughout the evening and day.
- c. The Dakota College at Bottineau Wellness Committee has created a presence on campus, making themselves visible to those on and off-campus.
  - i. DCB Wellness Committee utilizes e-mail, the primary form of communication, to send out weekly reminders to students to take care of themselves, mind and body.
- d. The Dakota College at Bottineau AOD Policy is in compliance with the Drug Free Schools and Campuses Act.
- e. Late-night programming is available weekly throughout the academic year and extended hours are available in high-traffic areas on campus (Library, Student Center, and Relaxation Room).
- f. Full-time licensed professional clinical counselor and student health services are available to students free of charge.
- g. Student Leadership positions that emphasize responsible decision making and allow students the opportunity to advocate for change (Student Senate, Leader Jacks, and First Year Experience Leaders).

**B. Weaknesses of DCB Alcohol and Other Drug Misuse Prevention Programs**

While Dakota College at Bottineau Alcohol, Tobacco, and Other Drug Prevention Program has strengths, we continue to face challenges in the following areas.

- a. The previous Biennial Review identified the lack of participation throughout the campus to focus on the prevention of substance and alcohol use.
- b. Due to unfortunate turnover on campus, an inconsistency in staff and faculty has caused a gap in communication about the desire for prevention programming.
- c. State and local culture of heavy drinking; youth problems are reflective of issues present in all age groups.
- d. Low student, faculty, and staff direct engagement in alcohol prevention efforts and programming.

- e. Lack of positive media messages regarding low-risk use of alcohol and other drugs.
- f. Lack of available evidence-based prevention strategies and programming in the area due to the rural area.
- g. Increasing trends of vaping and nicotine pouches at Dakota College at Bottineau and nationally and the lack of knowledge of consequences for the use of these products.

**C. Recommendations for Dakota College at Bottineau Alcohol and Other Drug Prevention Program.**

Dakota College at Bottineau Alcohol has made improvements during the past two years in its prevention efforts. However, there are several identified challenges to be addressed during 2024-2026. The following program recommendations have been identified, and progress on these recommendations will be reported within the 2026 Biennial Review.

- a. Recommendation 1:
  - i. The Dakota College at Bottineau Mental Health Services and Wellness Committee will need to secure additional funding for staff and programming efforts.
- b. Recommendation 2:
  - i. The Dakota College at Bottineau Mental Health Services and Wellness Committee will need to implement an education program that entails information about the use of nicotine pouches, vaping, and e-cigarettes.
- c. Recommendation 3:
  - i. The Dakota College at Bottineau Mental Health Services will work to create a monthly to bi-monthly event that promotes the prevention of alcohol and substance use utilizing a well-traveled campus space.
- d. Recommendation 3:
  - i. The Dakota College at Bottineau Mental Health Services will work to identify a positive re-enforcement for students that complete each semester without a violation of the alcohol and other substances policies.
- e. Recommendation 4:
  - i. The Dakota College at Bottineau Mental Health Services will join in efforts with the Dakota College at Bottineau Wellness Committee to organize campus events that promote the well-being of students and prevention of alcohol and substance use.
- f. Recommendation 5:
  - i. The Dakota College at Bottineau Mental Health Services will join in efforts with the Director of Housing to involve student residential assistants in trainings that demonstrate an understanding of what utilization of alcohol and other drugs looks like.
- g. Recommendation 6:
  - i. The Dakota College at Bottineau Mental Health Services offices is recommending a stronger connection with community services that approach the issues with alcohol and other drugs, such as local rehabilitation and counseling services.

## **IX. Conclusion**

Dakota College at Bottineau is committed to the process of continuous improvement of and dedication to their students, faculty, and staff. Throughout the Biennial Review process, it was noticed that there is a lack of promotion and education of consequences related to the use of alcohol and other drugs. DCB works hard to enforce the policies referenced above and will continue to increase efforts towards events and educational programming that promote the decrease in utilization of alcohol and other drugs. The lack of effort toward the previous goals is recognized and it is a priority to increase these efforts. As an institution, the safety and health of our students, faculty and staff is a top priority.

## **Appendix A:**

DRUG FREE CAMPUS POLICY – FACULTY AND STAFF

FS.901.1

EFFECTIVE DATE: NOVEMBER 2019      REVISED: MAY 2020

REFERENCES: [SBHE Policy Manual Section 300 and 600](#)

### **Policy Statement**

Dakota College at Bottineau (DCB) prohibits the unlawful and unauthorized manufacture, distribution, dispense, possession, use or sale of alcoholic beverages, controlled substances and illegal drugs. This campus wide prohibition applies even if the North Dakota Department of Public Health has issued a certificate of registration permitting the individual to possess a limited amount of marijuana for medical purposes; individuals with medical marijuana cards are not permitted to use medical marijuana on campus property, at college sponsored, or hosted events. The impairment by alcohol or drugs of any student or employee while participating in an academic function, or of employees when reporting for work or engaging in work (during normal work hours or other times when required to be at work) is also prohibited. DCB employees and students are required to abide by all federal and state laws, local city ordinances, State Board of Higher Education policies and other related requirements regarding the consumption or possession of alcoholic beverages, controlled substances and illegal drugs.

In accordance with the Drug Free Workplace Act and SBHE Policy 615, the unlawful manufacture, distribution, dispensation, possession or use of a controlled substance in the workplace is prohibited. Every employee is required to abide by applicable law and SBHE Policy 615 as a condition of employment.

### **Reason for Policy**

DCB is responsible for maintaining alcohol and drug policies in compliance with all federal and state laws including, but not limited to; the Jeanne Clery Act (1990), the Drug Free Workplace Act (1988), the Drug-Free Schools and Communities Act (1989 & 1994) and the North Dakota Century Code.

### **Scope of Policy:**

This policy applies to the following members of the campus community:

- President
- Deans, Directors and Department Heads
- Area Managers and Supervisors
- Faculty
- Staff
- Students
- Campus Guests

### **Campus Regulations**

1. A student who possesses or uses intoxicating liquors, alcoholic beverages or illegal drugs on campus is subject to disciplinary action as outlined in the Student Handbook and Residence Life Handbook.
2. All employees of the college are subject to the standards for disciplinary action in accordance with the Code of Conduct, in compliance with SBHE Policy 308.1.

3. Any student who attends class and is visibly under the influence of alcohol or drugs is subject to disciplinary action.
4. Faculty and staff are justified and have a responsibility to contact appropriate law enforcement agencies and/or campus security in the event a student is suspected to be under the influence and demonstrating aggressive or disruptive behaviors.
5. Student organizations, societies and clubs are not allowed to sponsor on or off campus events at which alcohol or illegal drugs are consumed.
6. The sale of alcohol and or drugs by student organizations, societies and clubs is strictly forbidden. This is to include any and all actions that can be construed as profiteering (this includes any action that can be construed as alcohol sale like charging admission to parties, passing the hat, selling empty cups and drink tickets).
7. Alcoholic beverages and/or drugs may not be used as awards or prizes in connection with events or activities sponsored by student organizations, societies and or clubs.
8. Disciplinary action, which can include expulsion from the College, shall follow the procedures and regulations for sanctions that are found in the DCB student handbook under “Student Rights and Responsibilities.” Further, such matters can and will be reported to the authorities when deemed appropriate.
9. Involvement with drugs and or alcohol may be indicative of a larger issue that requires medical and or psychological attention, and as such students may be referred or may refer themselves to counseling or medical services.

Each new employee, at the time of hiring, shall receive a copy of SBHE Policy 615 and this procedure and acknowledge in writing that the employee has received and reviewed the policy and procedure. Institutions and the university system office shall document on an annual basis that each benefited employee has received a copy of SBHE Policy 615 and this procedure. This may be done as part of an annual evaluation, in-service training, electronically, or other appropriate procedure.

**Violation Sanctions:**

Disciplinary action can and will be adjudicated as outlined in the Student Conduct Policy for violation of drugs and alcohol policies. Individuals or organizations found in violation of DCB policy may be subject to one or more of the following disciplinary actions as well as subject to prosecution by the appropriate civil authorities.

- Successful completion of a drug and alcohol awareness program
- Eviction
- Dismissal
- Fines (which can lead to withholding Transcripts and Grades)
- Warning
- Probation
- Suspension
- Expulsion

An employee who is convicted of violation of any federal or state criminal drug law for conduct in the workplace must notify the employee's supervisor of the conviction within five days of the conviction. A conviction means a finding of guilt (including a plea of guilty or *nolo contendere* or its equivalent) or the imposition of a sentence. The supervisor must within 24 hours of receiving notice of a conviction notify the institution's or system's human resource officer.

Any employee who violates SBHE Policy 615 or this procedure is subject to discipline up to and including termination.

#### **North Dakota Law on Alcoholic Beverages:**

1. The state of North Dakota requires that individuals be at least 21 years of age to buy, possess and consume alcoholic beverages.
2. It is illegal to give or sell alcohol to an individual under the age of 21.
3. It is illegal to have an open container of alcohol in any vehicle.
4. It is illegal to serve alcohol to an intoxicated person.
5. It is illegal to sell alcohol of any kind without a license or permit.
6. Organizations are not immune from prosecution for a legal violation. The officers of that group are usually the parties cited, but every group member is liable.
7. Driving while intoxicated (.08 blood alcohol content) is a criminal offense.
8. Being intoxicated is not a legal defense for any charge, including assault, rape, vandalism, slander, manslaughter or accident.
9. If an underage person is involved in a drinking/driving crash after leaving a party, the victim(s) of the crash may sue both the person at fault and those who provided the alcohol.

#### **North Dakota Law on Illegal Drugs:**

North Dakota has adopted the Uniform Controlled Substances Act, which restricts the manufacture, transfer, and possession of narcotic drugs and other drugs that have a potential for abuse or that may lead to physical or psychological dependence.

1. It is a Class A felony to manufacture, deliver, or possess with intent to manufacture or deliver a controlled substance such as methamphetamine or narcotic drugs such as opium or cocaine in North Dakota.
2. Felony Penalties: Class A (up to 20 years imprisonment and/or a \$10,000 fine), Class C (up to five years imprisonment and/or \$5,000 fine).
3. Possession of one-half ounce to one ounce of marijuana is a Class B misdemeanor.
4. Possession of less than one-half ounce (14.175 grams) is a Class B misdemeanor.<sup>1</sup>
5. Inhaling vapors of a volatile chemical in a manner designed to create intoxication, hallucination, or elation is a Class B misdemeanor.
6. Possession of drug paraphernalia for controlled substances other than marijuana is a Class C felony.
7. Possession of drug paraphernalia for marijuana is a Class A misdemeanor.

<sup>1</sup> First time offenders are subject to a fine up to 1,000 USD with no jail time. Individuals can be charged with a misdemeanor if receiving additional infractions in the course of a year.



8. It is a Class A misdemeanor to advertise drug paraphernalia.
9. In accordance with North Dakota Century Code SB 2344 Section 19-24, 1-01 a registered qualifying patient may not be in possession of medical marijuana more than 2.5 oz [70.87 grams] or 2,000 milligrams of tetrahydrocannabinol.

**Misdemeanor penalties:** Class A (up to one-year imprisonment and/or \$2,000 fine), Class B (up to 30 days imprisonment and/or \$1,000 fine).

**Federal Law:** Federal law provides criminal and civil penalties for unlawful possession or distribution of drugs and alcohol. See <http://www.usdoj.gov/dea/agency/penalties.html> for details on federal trafficking penalties for controlled substance violations. Penalties include incarceration, fines, forfeiture of property, ineligibility to own firearms, and becoming ineligible to receive federal benefits such as student loans and grants.

**Health Risks Associated with Alcohol and other substances of abuse:**

**Alcohol:** Alcohol consumption causes a number of impairments including changes in behavior and normal body function. Even low doses significantly impair judgment, coordination and mental function thus increasing the risks of accidents and injuries. Moderate to high doses of alcohol cause marked impairments in higher mental functions, severely altering a person's ability to learn and remember information. Very high doses taken acutely can cause respiratory depression and even death. Statistics show that alcohol use is involved in a majority of violent behaviors on college campuses, including acquaintance rape, vandalism and fights. Additional consequences include DUI arrests and serious or fatal car crashes. Continued abuse may lead to dependency, which can cause permanent damage to vital organs and deterioration of a healthy lifestyle.

**Short-Term Health Risks:** Excessive alcohol use has immediate effects that increase the risk of many harmful health conditions. These are most often the result of binge drinking and include the following:

- Injuries, such as motor vehicle crashes, falls, drownings, and burns.<sup>2</sup>
- Violence, including homicide, suicide, sexual assault, and intimate partner violence.<sup>2,3</sup>
- Alcohol poisoning, a medical emergency that results from high blood alcohol levels.<sup>4</sup>
- Risky sexual behaviors, including unprotected sex or sex with multiple partners. These behaviors can result in unintended pregnancy or sexually transmitted diseases, including HIV.<sup>5</sup>

<sup>2</sup> World Health Organization. [Global status report on alcohol and health—2014](#)External. Geneva, Switzerland: World Health Organization; 2014.

<sup>3</sup> Smith GS, Branas CC, Miller TR. [Fatal nontraffic injuries involving alcohol: a metaanalysis](#)External. *Ann of Emer Med* 1999;33(6):659–668.

Greenfield LA. [Alcohol and Crime: An Analysis of National Data on the Prevalence of Alcohol Involvement in Crime](#) Cdc-pdfExternal [PDF – 229 KB]. Report prepared for the Assistant Attorney General's National Symposium on Alcohol Abuse and Crime. Washington, DC: U.S. Department of Justice, 1998.

Mohler-Kuo M, Dowdall GW, Koss M, Wechsler H. [Correlates of rape while intoxicated in a national sample of college women](#)External. *Journal of Studies on Alcohol* 2004;65(1):37–45.

Abbey A. [Alcohol-related sexual assault: A common problem among college students](#)External. *J Stud Alcohol Suppl* 2002;14:118–128.

<sup>4</sup> Kanny D, Brewer RD, Mesnick JB, Paulozzi LJ, Naimi TS, Lu H. [Vital Signs: Alcohol Poisoning Deaths — United States, 2010–2012](#). *MMWR* 2015;63:1238–1242.

<sup>5</sup> Naimi TS, Lipscomb LE, Brewer RD, Colley BG. [Binge drinking in the preconception period and the risk of unintended pregnancy: Implications for women and their children](#)External. *Pediatrics* 2003;111(5):1136–1141.

- Miscarriage and stillbirth or [fetal alcohol spectrum disorders \(FASDs\)](#) among pregnant women.<sup>2,5,6</sup>

**Long-Term Health Risks:** Over time, excessive alcohol use can lead to the development of chronic diseases and other serious problems including:

- High blood pressure, heart disease, stroke, liver disease, and digestive problems.<sup>2, 7</sup>
- Cancer of the breast, mouth, throat, esophagus, liver, and colon.<sup>2,8</sup>
- Learning and memory problems, including dementia and poor school performance.<sup>2,9</sup>
- Mental health problems, including depression and anxiety.<sup>2, 10</sup>
- Social problems, including lost productivity, family problems, and unemployment.<sup>2,10,11</sup>
- Alcohol dependence, or alcoholism.

**Amphetamines:** Amphetamines can cause a rapid or irregular heartbeat, tremors, convulsions, loss of coordination, collapse, and death. Heavy users are prone to irrational acts.

**Cannabis (Marijuana, Hashish):** The use of marijuana may impair or reduce short-term memory and comprehension, alter sense of time, and reduce coordination and energy level. Users often have a lowered immune system and an increased risk of lung cancer. The active ingredient in marijuana, THC, is stored in the fatty tissues of the brain and reproductive system for a minimum of 28 to 30 days.

**Cocaine/Crack:** Cocaine users often have a stuffy, runny nose and may have a perforated nasal septum. The immediate effects of cocaine use include dilated pupils and elevated blood pressure, heart rate, respiratory rate, and body temperature, followed by depression. Crack, or freebase rock cocaine, is extremely addictive and can cause delirium, hallucinations, blurred vision, severe chest pain, muscle spasms, convulsions, and even death.

**Hallucinogens:** Lysergic acid (LSD), mescaline, and psilocybin cause illusions and hallucinations. The user may experience panic, confusion, suspicion, anxiety, and loss of control. Delayed effects, or flashbacks, can occur even when use has ceased. Phencyclidine (PCP) affects the section of the brain that controls the intellect and keeps instincts in check. Because the drug blocks pain receptors, PCP episodes may result in self-inflicted injuries, violence and aggressive behavior toward others.

Wechsler H, Davenport A, Dowdall G, Moeckens B, Castillo S. [Health and behavioral consequences of binge drinking in collegeExternal](#). *JAMA* 1994;272(21):1672-1677.

<sup>6</sup> Kesmodel U, Wisborg K, Olsen SF, Henriksen TB, Sechler NJ. [Moderate alcohol intake in pregnancy and the risk of spontaneous abortionExternal](#). *Alcohol & Alcoholism* 2002;37(1):87-92.

American Academy of Pediatrics, Committee on Substance Abuse and Committee on Children with Disabilities. 2000. [Fetal alcohol syndrome and alcohol-related neurodevelopmental disordersExternal](#). *Pediatrics* 2000;106:358-361

<sup>7</sup> Rehm J, Baliunas D, Borges GL, Graham K, Irving H, Kehoe T, et al. [The relation between different dimensions of alcohol consumption and burden of disease: an overviewExternal](#). *Addiction*. 2010;105(5):817-43.

<sup>8</sup> International Agency for Research on Cancer. Personal Habits and Indoor Combustions: A Review of Human Carcinogens, Volume 100E 2012. Available from: <http://monographs.iarc.fr/ENG/Monographs/vol100E/index.php>

<sup>9</sup> Miller JW, Naimi TS, Brewer RD, Jones SE. [Binge drinking and associated health risk behaviors among high school studentsExternal](#). *Pediatrics*. 2007;119(1):76-85.

<sup>10</sup> Castaneda R, Sussman N, Westreich L, Levy R, O'Malley M. [A review of the effects of moderate alcohol intake on the treatment of anxiety and mood disordersExternal](#). *J Clin Psychiatry* 1996;57(5):207-212.

<sup>11</sup> Booth BM, Feng W. [The impact of drinking and drinking consequences on short-term employment outcomes in at-risk drinkers in six southern statesExternal](#). *Behavioral Health Services and Research* 2002;29(2):157-166.

Leonard KE, Rothbard JC. [Alcohol and the marriage effectExternal](#). *J Stud Alcohol Suppl* 1999;13:139-146.

**Heroin:** Heroin is an opiate drug that causes the body to have diminished pain reactions. Overdoses of this highly addictive drug can result in coma or death due to respiratory failure or cardiovascular collapse. To find out more about these commonly abused agents and other substances of abuse not listed here go to the Drug Enforcement Administration [http://www.justice.gov/dea/docs/drugs\\_of\\_abuse\\_2011.pdf](http://www.justice.gov/dea/docs/drugs_of_abuse_2011.pdf)

**Where to turn for Help:**

Students, Faculty and Staff may initiate help for themselves or others by contacting any of the following:

**On Campus:**

1. Behavioral Health Counselor, Corey Gorder 701-228-5451 [corey.gorder@ndus.edu](mailto:corey.gorder@ndus.edu)
2. Alcohol and Drug Prevention; Student Nurse 701-228-5460
3. Behavioral and Intervention Team: Laura Halvorson 701-228-5680 [Laura.Halvorson@ndus.edu](mailto:Laura.Halvorson@ndus.edu)

**Community Resources:**

1. “211” –24-hour referral and crisis management hotline for North Dakota
2. Bottineau Family Crisis Center, 701-228-2028.
3. ND Al-Anon Family meeting, United Parish. 801 Main Street (Back door) Thursday’s 8pm

**National Resources:**

1. Substance Abuse and Mental Health Services Administration (SAMHSA) National Helpline: 1-800-662-4357. Website: [www.samhsa.gov/find-help/national-helpline](http://www.samhsa.gov/find-help/national-helpline)
2. [Area 52-North Dakota. Alcoholics Anonymous. https://aanorthdakota.org/](https://aanorthdakota.org/)

**Contacts**

Specific questions regarding the policy direct to:

Campus Judicial  
Officer Campus  
Security Officer  
Dean of Student  
Affairs

**References:**

[US Public Law 101-226](#)

Dakota College at Bottineau 2018-2019 [Student Code of Conduct](#)

North Dakota Public Law, Century Code [Title Five Alcoholic](#)

[Beverages BSC Alcohol and Drug Policy](#)

[Minot State University Campus Free Drug Policy](#)

**Appendix B**

**Dakota College at Bottineau**



**ND University System Part 86 Compliance Checklist**

**Part 86, Drug-Free Schools and Campuses Regulations Compliance Checklist 2024**

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1. **Does the institution maintain a copy of its drug prevention program?** Yes  No   
If yes, where is it located? – Located in The Mental Health Services Office/Online
  
2. **Does the institution provide annually to each employee and each student, who is taking one or more classes for any type of academic credit except for continuing education units, written materials that adequately describe and contain the following?**
  - a. **Standards of conduct that prohibit unlawful possession, use, or distribution of illicit drugs and alcohol on its property or as a part of its activities**  
Students: Yes  No  Staff and Faculty: Yes  No
  
  - b. **A description of the health risks associated with the use of illicit drugs and the abuse of alcohol**  
Students: Yes  No  Staff and Faculty: Yes  No
  
  - c. **A description of applicable legal sanctions under local, state, or federal law**  
Students: Yes  No  Staff and Faculty: Yes  No
  
  - d. **A description of applicable counseling, treatment, or rehabilitation or re-entry programs**  
Students: Yes  No  Staff and Faculty: Yes  No
  
  - e. **A clear statement of the disciplinary sanctions the institution will impose on students and employees, and a description of those sanctions**  
Students: Yes  No  Staff and Faculty: Yes  No

**Any comments or clarifications on items 2 a-e:**
  
3. **Are the above materials distributed to students in one of the following ways?**
  - a. **Mailed to each student (separately or included in another mailing)**  
Yes  No
  
  - b. **Through campus post offices boxes**  
Yes  No
  
  - c. **Class schedules which are mailed to each student**  
Yes  No
  
  - d. **During freshman orientation**  
Yes  No

**e. During new student orientation**

Yes  No

**f. In another manner**

Yes  No

Through the primary mode of communication – e-mails that are provided for students.

**Any comments or clarifications on items 3 a-f:**

**4. Does the means of distribution provide reasonable assurance that each student receives the materials annually?**

Yes  No

**5. Does the institution's distribution plan make provisions for providing these materials to students who enroll at some date after the initial distribution?**

Yes  No

**6. Are the above materials distributed to staff and faculty in one of the following ways?**

**a. Mailed**

Staff: Yes  No  Faculty: Yes  No

**b. Through campus post office boxes**

Staff: Yes  No  Faculty: Yes  No

**c. During new employee orientation**

Staff: Yes  No  Faculty: Yes  No

**d. In another manner** (through e-mail, which is the primary mode of communication of DCB.)

**Any comments or clarifications on items 6 a-d:**

**7. Does the means of distribution provide reasonable assurance that each staff and faculty member receives the materials annually?**

Staff: Yes  No  Faculty: Yes  No

**8. Does the institution's distribution plan make provisions for providing these materials to staff and faculty who are hired after the initial distribution?**

Staff: Yes  No  Faculty: Yes  No

**9. In what ways does the institution conduct biennial reviews of its drug prevention program to determine effectiveness, implement necessary changes, and ensure that disciplinary sanctions are enforced?**

**a. Conduct student alcohol and drug use survey**

Yes  No

**b. Conduct opinion survey of its students, staff, and faculty**

Students: Yes  No  Staff and Faculty: Yes  No

**c. Evaluate comments obtained from a suggestion box**

Students: Yes  No  Staff and Faculty: Yes  No

**d. Conduct focus groups**

Students: Yes  No  Staff and Faculty: Yes  No

**e. Conduct intercept interviews**

Students: Yes  No  Staff and Faculty: Yes  No

**f. Assess effectiveness of documented mandatory drug treatment referrals for students and employees**

Students: Yes  No  Staff and Faculty: Yes  No

**g. Assess effectiveness of documented cases of disciplinary sanctions imposed on students and employees**

Students: Yes  No  Staff and Faculty: Yes  No

**Any comments or clarifications on items 9 a-g:**

In the years of 2022-2024, there were no referrals for students or employees to drug or alcohol treatment programming.

**10. Who is responsible for conducting the biennial reviews?**

Dakota College at Bottineau Mental Health Coordinator

**11. If requested, has the institution made available, to the Secretary and the public, a copy of each requested item in the drug prevention program and the results of the biennial review?**

Yes  No

**12. Where is the biennial review documentation located?**

Name: Hannah Hoffert, MS

Title: Mental Health Coordinator

Department: Dakota College at Bottineau Student Services

Phone: 701-228-5636

Email: [hannah.hoffert@dakotacollege.edu](mailto:hannah.hoffert@dakotacollege.edu)

**13. Comments or clarifications on any above items:**



**Appendix C**



**Residence Life  
Handbook**

**2024-2025**



## Welcome

This Residence Life Handbook is a guide to community living and contains general information concerning daily life in the residence halls. Additional specific information will be posted on housing bulletin boards, in emails to residents, and in specific flyers handed out to residents. You will be accountable for this information and for understanding the contents of this handbook.

The residence halls at Dakota College at Bottineau can house up to approximately 200 students. We are happy that you are coming to live with us! Living in a residence hall is quite unlike any other living experience. Residence halls seem somewhat impersonal...until you move in and discover all the new friends and unique opportunities now open to you. It's the people that make residence hall living so great.

At DCB, students are the most important aspect of our college. Residing in one of our residence halls will put you in a living and learning environment where you can benefit through interaction with a diverse community of people.

Please respect where you live and remember that you are sharing this space with others. Be mindful of behavior that may disturb others. Respect each other's privacy, be tolerant of one another, and be courteous when addressing problems. Following these simple rules will help ensure a comfortable and safe living environment.

We encourage you to become active residents and informed consumers. If you have any questions concerning policies or procedures, or believe you have an unusual circumstance, please contact the Director of Student Life. DCB will make all reasonable efforts to accommodate requests from our residents.

***Please retain this handbook.*** You can refer to throughout the year as an important source of information. You can also help ensure your success as a member of the DCB housing family by knowing and abiding by the handbook regulations. We wish you an enjoyable and memorable stay in our residence halls.

## Introduction and Philosophy

Our Mission is to:

1. Create an atmosphere conducive to learning.
2. Implement and foster programs supporting student learning and provide programs that enhance understanding of cultural, ethnic, physical, racial, sexual orientation, and religious differences.
3. Create and maintain a residence life community in which students take responsibility for comprehending and enriching their environment while respecting the rights and needs of others within the campus community.
4. Provide students with affordable and comfortable on-campus housing accommodations.
5. Provide a disciplinary structure promoting and encouraging student accountability and responsibility.

6. Provide values-based educational programming to raise student awareness of social, emotional, mental, and physical health, substance abuse, and responsible sexual behavior.

The residence halls are designed to provide comfortable living quarters for students while they are enrolled in the college as well as promote the personal and social development of students through group living.

DCB has established rules and regulations which aim to protect college property, protect individual rights, uphold state and federal law, and provide an atmosphere conducive to study, sleep, security, and relaxation. The Director of Student Life is responsible for enforcing the rules and regulations and for managing the residence halls in an orderly and efficient manner. Housing staff assist the Director of Student Life: Head Residents and Student Resident Assistants (RA's).

Please see the Common Housing Violations and Sanctions Handout for disciplinary guidelines.

The unique situations of group living dictate which forms of discipline are appropriate. For this reason, the forms of disciplinary action termed **sanctions (disciplinary action and/or monetary fines)** will be used most often. However, revocation of residence hall privileges because of repeated or serious misconduct usually is accompanied by formal disciplinary probation. The length of the probation will be determined by the Housing Judicial Officer.

The principles of democracy, tolerance, and responsibility apply to DCB's residential community. Students within the residence halls are expected to conduct themselves in a manner that illustrates dignity, and respect toward fellow students, themselves, and the residence hall management and maintenance staff. Living in a residence hall is a privilege, not a right, and if this privilege is abused, students can be removed either temporarily or permanently.

### **Student Responsibilities**

Students in the residence halls are responsible for understanding the terms and conditions of the residence hall contract. In addition, residents need to familiarize themselves with the residence hall handbook, student handbook, the college catalog, and all other information pertinent to residential life. Students are responsible for knowing the regulations and policies that govern them.

### **Self Leadership**

All residents, staff, and students are expected to conduct themselves in a manner that promotes and supports the residence life community. Therefore, the Residence Life Staff reserves the right to confront behavior that is detrimental to the student, infringes on the rights and sensitivities of others, or that has the appearance of impropriety (appears to not be in keeping with accepted college standards of what is right and proper). Residents are expected to assume responsibility for their actions.

### **Roommates**

You will meet many new people at DCB, and most importantly your roommate. Feel free to discuss with your roommate your ideas, feelings, sense of direction or confusion, and family background. Also, it is important that you and your roommate establish mutually agreeable rules for your place of residence. Areas you should discuss are sharing of personal property, visitation guidelines, study hours within the room, and assignment of cleaning duties.

### **Housing Staff**

Each residence hall has a Head Resident and Student Resident Assistants to help you. The Housing staff is responsible for the safety and security of the residence hall students.

### **Non-Compliance with a Reasonable Request**

In the performance of their duties, the Resident Assistants, Head Residents, Director of Student Life, Housing Judicial Officer, Associate Dean of Student Services, or other DCB administrators or staff may make reasonable requests of the residents in order to ensure the safety and security of the community at large. All residents and their guests are expected to comply with such reasonable requests. Failure to comply with a reasonable request or behaving inappropriately towards any staff member may result in sanctions.

### **Director of Student Life**

The residence halls are managed under the auspices of Student Services. The individual who has direct authority and responsibility for administering the residence halls is the Director of Student Life. The Director of Student Life supervises the Head Residents and Resident Assistants and works closely with the Residence Life Staff to ensure that the community is safe and that there are positive living conditions in the residence halls and all facilities. The Residence Life Staff assists with enforcing the rules and regulations of the residence halls. This carries with it the authority to take actions necessary when rule violations occur.

### **Head Resident**

Head Residents are responsible for the hall in which they live, its occupants, and facilities. Each Head Resident supervises the Resident Assistants in their building, serve as a resource for students, and can serve as hearing officers in the judicial system. Head Residents share the responsibility of evening rounds and have responsibility to student safety in all three residence halls.

### **Resident Assistants**

Your RA (Resident Assistant) is a full-time student whose part-time job is to assist with residential living. DCB's primary mission is to aid you in your educational and social development. RA's are peer educators hired and trained to assist you in this development. Their general responsibilities are to advise students on academic, administrative, personal, and social matters within the limits of the RA's experience and capabilities. The RA's also provide programming in many different areas, refer students to appropriate services both on- and off-campus, and help disseminate official College information and explain policies.

RAs will assist and abide by all policies in the DCB Student Life Handbook. The RA's have the authority to monitor the residence halls for rule violations. In the event a policy is violated, it is the duty of the RA to report the violation to the appropriate authority.

### **Maintenance**

Each hall has a custodian who maintains the public areas of the buildings. Students can report any maintenance problems through their RA or the Head Resident. Maintenance staff may enter rooms at any time during the day to perform normal repairs as well as emergency repairs when health and safety issues are involved. Fire, broken water pipes, and other maintenance problems that could lead to structural damage or constitute a threat to the health and safety of students are considered emergencies. Students may be required to assist by removing personal property if it interferes with access to the area to be maintained. Housekeeping, security, professional staff, and maintenance personnel may be on the floors daily at any hour to perform tasks. Please dress accordingly and appropriately.

### **Complaints**

Issues concerning housing and residence life should be brought to the attention of the Resident Assistant (RA), Head Resident or Director of Student Life.

## **Room Changes**

Living in Campus Housing is a great way to meet lifelong friends. Many students will stay in touch with their roommates from college for many years to come. There are however instances where roommates do not want to continue sharing a room or suite. It is expected that the students try to reach an agreement or ask the Head Resident to assist in solving disputes. If the situation cannot be resolved, there are several solutions available to students. If rooms are available with other suitable roommates, new room assignments can be made, providing it is an acceptable arrangement to all students involved. If there is not an acceptable roommate and a single room is available, a student may move into that room, but will assume the added cost of single room versus a double occupancy room. All room changes must be approved by the Director of Student Life, prior to changing rooms. Documentation of the situation may be requested, and final room assignments and changes will be at the discretion of the Director of Student Life. Students who attempt to switch rooms without approval may be subject to sanctions. It is the student's responsibility to discuss the situation with the Head Resident and Director of Student Life.

## **Services**

### **Residence Hall Programs**

The residence halls offer activities for residents. These programs can be planned and implemented by students through the Residence Life staff. Students are encouraged to become actively involved in planning these events and to participate in as many as possible.

### **Wifi/Internet Access**

Each room is equipped with wireless internet. Cable boxes can be leased from the IT department for a small monthly fee upon request. Students whose televisions and computers aren't cable or Internet compatible must purchase their own equipment/adaptors, etc. Each residence hall has a lounge that is equipped with cable television. Internet access is offered at no extra charge to residents.

### **Mail**

Mail is delivered to students' rooms Monday through Friday, excluding holidays. The mail is delivered by 3:00pm by the appropriate Resident Assistant. Students receiving packages will be given a slip and can claim their package at the Business Office window during weekday business hours. Students must show ID to pick up packages. To receive mail properly and without delay, the resident should refer to their address as follows:

Student Name  
Hall Name and Room Number  
Dakota College at Bottineau 105 Simrall Boulevard Bottineau, ND 58318

### **Parking**

There is a parking lot near each residence hall. Parking passes are available at the Business Office for a small fee and residents are required to park in these lots.

- Do not park in posted restricted areas
- Do not block any of the parking lot entrances
- Do not park in any of the designated faculty, staff, visitor, or disability spaces.

**PARKING VIOLATIONS MAY RESULT IN  
VEHICLES BEING TOWED AT**

## **OWNERS/RESIDENTS/STUDENTS EXPENSE**

### **Rest Rooms**

Milligan Hall has bathroom and shower facilities in each suite, Gross Hall has bathrooms on each floor, and Mead Hall in each wing. The use of bathrooms and shower facilities is limited to campus residents.

Guest bathrooms are available in Gross and Mead Hall for visitors. Guests wishing to shower may use the hall bathrooms if they are guests in gender respective halls. Otherwise, guests are welcome to use the showers in the Thatcher Hall locker rooms. For example, a male guest in the men's hall may shower in Mead Hall, but a female guest would need to use the showers in Thacher Hall.

### **Laundry**

Washers and dryers are furnished in the residence halls at no cost to students. Residents must provide their own laundry supplies. Laundry facilities are provided only for on campus residents. Off campus students are not allowed to utilize the laundry facilities and may face sanctions for doing so.

### **Laundry Room Etiquette**

- Residents are responsible for their own belongings in the laundry room.
- Residents should be considerate of the use of the machines as they are shared with all students in that hall.
- Residents should empty the lint traps into the garbage receptacles in the laundry room after each use.
- Any personal items left in the laundry room will be disposed of if not claimed.
- Residents are asked to read machine instructions or ask a staff member for assistance if they do not know how to properly operate the machines.
- Non-residents are not allowed to use residence hall laundry facilities.

### **Trash**

Custodial personnel clean all common/public areas within the residence halls. Students are responsible for purchasing cleaning supplies and equipment for their rooms, and responsible for cleaning their rooms. Students are responsible for bagging and placing all garbage in the trash dumpsters located behind each residence hall. **Do not place room trash in the garbage containers in the lobby or the bathrooms.**

### **Food Service**

The Sodexo Corporation operates DCB's food service. Everyone who lives on campus is required to purchase a meal plan. Identification cards will be issued at the beginning of each semester and students must present their card at each meal. ID cards used for the meal plans cannot be transferred to others. Cards found in the possession of someone other than the owner will be confiscated and disciplinary action will be taken. Refunds are not given for missed meals.

Special dietary requirements should be brought to the attention of the food service director.

The meal times are posted in the Dining Hall located in the Knudson Student Center.

### **Health Services**

Students experiencing health problems may consult with the DCB Nurse. Please visit the Campus Nurse's office for her schedule of availability. In emergency medical situations, the Resident Assistant

or Head Resident should be contacted and the student be provided professional medical treatment as soon as possible. Residents who observe accidents or medical emergencies are to report these incidents immediately.

### **Lost and Found**

Items lost and found by students, guests, visitors, or staff in the residence halls should be turned into the respective Head Resident or the Business Office.

### **Financial Information**

#### **Room and Board Costs (2024-2025)**

	<u>Semester</u>	<u>Yearly</u>
(15 meals per week)	\$2636.00	\$5272.00
(19 meals per week)	\$2967.00	\$5934.00
Mead Hall Double Room	\$1563.00	\$3126.00
Mead Hall Single Room	\$2180.00	\$4360.00
Gross Hall Double Room	\$1563.00	\$3126.00
Gross Hall Single Room	\$2180.00	\$4360.00
Milligan Hall Suite (4)	\$1715.00	\$3430.00
Milligan Hall Remodeled Suite (4 people)	\$1927.50	\$3855.00

Room and board fees for the fall and spring semesters are due at the same time tuition payments are due.

The College reserves the right to change room and board fees at any time upon approval by the North Dakota Board of Higher Education.

### **Cancellation and Refund**

A student who is suspended or withdraws from the college and thereby leaves the residence hall during the semester will receive a refund up to the 60% point of each semester as dated by the Business Office. Refunds are calculated on a weekly pro-rated bases. After the 60% point of the semester meal plans will not be refunded. Students evicted from housing due to disciplinary action will not be given a refund for room or board charges.

A student who vacates his or her room before the end of the contract period, without properly checking out will be held responsible for the entire contract. Students are responsible for properly checking out of the residence halls according to established procedures. Additional charges for damages, missing keys, and cleaning will be assessed when necessary.

### **Contract Release and Refund Policy**

In clearly unusual or extraordinary circumstances, students may petition for early release from their room and board contract.

The Director of Student Life can provide students with a petition to live off campus and will forward it to the Associate Dean for Student Services for approval.

Students who violate the room and board contract may have their registration cancelled or be held liable for charges that remain on the contract. In the latter instance, college policy stipulates that

students who have financial obligations with the college can have their records withheld and be denied permission to register.

## **Occupancy**

### **Eligibility**

Full-time students receive preference for residence halls. If residence hall space is available, part-time students may also reside in campus housing.

### **Housing Policy**

All full-time, unmarried students under the age of 21, and who do not have dependents residing with them are required to live and board in college housing or live with their parents or legal guardians. Commuting students will be required to complete a Housing Exemption form verifying that they are living at home. Dependents are defined as individuals claimed on the most recent federal income tax forms.

### **Exceptions to this policy are as follows:**

- Students who have two previous academic years of full-time enrollment, summers excluded.
- Students who are living with a grandparent, uncle, aunt, brother, or sister who is the head of a household as defined by qualifying for independent status for financial aid purposes (verification form required).
- Discharged military veterans, National Guard and Reserve who have been activated within the last 5 years.
- Students who turn 21 by November 1st for fall semester and March 1st for spring semester.

Students who fail to comply with this policy will be responsible for the cost of a double occupancy room each semester until an exception has been met.

### **Petition to Live Off-Campus**

All first-year students are required to live in campus housing unless they meet Housing Exemption criteria. Students who are required to live in college housing may request an exemption and petition to live offcampus during their sophomore year if they meet the following criteria:

1. Are 21 years of age or older by November 1st of the fall semester.
2. Completed 30 semester credits, 15 of which must have been completed through DCB, (Note: Transferable credits earned while still in high school, including dual credit, AP, etc., will not be counted toward the total.)
3. Have a cumulative GPA of 3.5 or higher, and
4. Have an approved plan of study indicating they will graduate with a degree upon completion of their sophomore year. This plan must be approved by the Associate Dean for Student Services.

### **Housing Fees**

Students must remit a \$50 non-refundable application and reservation fee with the residence hall contract. Room assignments will not be made until the fee is received.

### **Housing Contracts**

The housing contract is agreed upon by submitting the housing application. The contract may be printed from the Housing webpage under “Apply for Housing. This contract is a legal document explaining DCB’s policies as well as its expectations of students. Standards, procedures, and regulations concerning residence hall living are contained in the contract. Students are responsible

for knowing and abiding by the contract's terms and conditions. It is important to retain the document as a source of information. The 2024-2025 Housing Contract may be found here: [www.dakotacollege.edu/admissions-financialaid/housing](http://www.dakotacollege.edu/admissions-financialaid/housing)

### **Contract Period**

All room and board assignments are made on the basis of a full academic year, and students who remain enrolled are expected to continue residence in the hall for the duration of the contract period or follow housing regulations for leaving the hall.

**Room and Hall Assignments/Transfers** Room assignments are made according to the date the application and housing application fee are received.

DCB cannot guarantee that requests for a specific roommate(s) will be honored. However, efforts are made to honor such requests based on the information provided in the housing application.

Room and residence hall assignments are made approximately one month before the beginning of the semester. Students who want to live together need to make their intentions known by listing each other's name(s) on their residence hall contracts.

DCB reserves the right to assign or change room and residence hall accommodations to attain optimum occupancy, to accommodate occupants, to foster efficient management of the residence hall system, or for the purposes of health, discipline, security or energy conservation. DCB also reserves the right to transfer students from one room or hall to another, if such a change is deemed necessary.

First year students can move into the residence hall beginning at 8:00 a.m. on the Friday before fall classes begin. Returning students may move in the Saturday before fall classes start. All students must vacate the residence halls by 7:00 p.m. on the Sunday after commencement or the last day of finals each semester. Students who remain on campus past this deadline without permission from the Director of Student Life will be subject to a \$100 fine plus board charges of \$15/day.

The residence halls are closed over Winter/Christmas break and all students are expected to vacate their rooms. In extenuating circumstances, a student may be allowed to remain on campus, however meals will not be provided. Students with extenuating circumstances wishing to remain on campus over break must have permission from the Director of Student Life.

Reservations for rooms not occupied by the first day of classes are subject to cancellation unless the Director of Student Life is notified when the applicant will be accepting their room. DCB reserves the right to refuse an assignment to any applicant and to make all final decisions on room and residence hall assignments. Room and roommate assignments are made for the entire academic year; however, room changes can be requested at any time. Students need to contact the Director of Student Life if they wish to request a different room, hall or roommate.

### **Room Contents and Size**

Residence hall rooms are equipped with study desks, chairs, built-in lights, closet/drawers, twin beds with mattresses, window coverings, and mirrors.

Gross Hall – Rooms are 12'x 16' Mead Hall – Rooms are 12'x 14'

Milligan Hall – Main Living Area is 22'x9'

### **Check In/Check Out**

The first thing to do when you arrive at the residence hall is check into your room. Once that is completed, you are responsible for the care of the room and its contents and liable for any damages.



Students are financially responsible for the general condition of their room, and the campus owned furnishings within the room. The college expects the room and furnishings to be in as good condition at check out as they were at check in, normal wear and tear excluded.

Students are encouraged to follow the procedures listed below when checking out of the residence hall.

1. Thoroughly clean your room. You will be assessed a \$50 fee if extra cleaning is necessary. 2. Remove all items brought into the room (furniture, bookcases, etc.). Any personal belongings left in rooms after check out will be discarded or donated after 30 days.

3. A Resident Assistant or Head Resident must check your room for cleanliness, damages, and good order.

4. Return key and fob into Housing staff.

5. Students who do not check out of the residence halls properly will be subject to a \$100 fine.

After you have been checked out of your room, you may not spend another night in there.

### **Single Rooms**

Single rooms may be available depending upon the occupancy rate in each residence hall. These rooms are assigned by a priority system.

Students who become single occupants of a room because their assigned roommate is no longer residing in the room or did not check in at the beginning of a semester have the following options:

1. Find a roommate; or

2. Move into a room with another student(s) assigned by the Director of Student Life.

3. Upgrade to a single room if available.

Typically, if a student becomes the single occupant of a room, they will have 48 hours to find a new roommate or be assigned one.

If a new roommate is not available, students will not be charged the single room rate, but at any time during the semester may be assigned a roommate.

### **Semester/Holiday Breaks**

Residence halls and food service close during semester break and students must vacate their rooms by 7:00 p.m. on Sunday following the last day of class. Students will be allowed back into the hall at 10:00 AM on the day before classes resume. With permission from the Director of Student Life, students may be allowed to be in residence halls during break, on a limited basis, to fulfill requirements of an extracurricular activity that is credit generating.

Students remaining on campus with permission over winter or summer break are not allowed daytime visitors or overnight guests without permission from the Director of Student Life or a Head Resident. Failure to comply with rules over winter or summer break will result in the student having to vacate the hall until it reopens.

For safety and health reasons, whenever residents leave the residence halls for semester/holiday breaks, it is in the best interest of the student to adhere to the following procedures:

- Turn off the lights
- Empty all garbage receptacles in the appropriate dumpster
- Close and lock all windows
- Close and lock room/suite door
- Empty fridge of any perishable items

### **Alternate Housing Accommodations**

DCB's Residence halls are designated as men's, women's and co-ed. However, DCB Housing will make reasonable attempts to accommodate alternate requests. If an accommodation request cannot be met, the requesting student will be allowed to live off campus without consequence. Please contact the Director of Student Life with any questions regarding alternate accommodations.

Director of Student Life: Bridget Gustafson  
(701) 228-5657  
Email: [bridget.gustafson@dakotacollege.edu](mailto:bridget.gustafson@dakotacollege.edu)

### **Room Contents and Uses**

#### **What to Bring**

- Clothes, including heavy coats, gloves, hats boots (both warm and cold weather items).
- Pillows, sheets (regular twin), and blanket for a regular twin size bed. The College does not provide linens, mattress covers, pillows, blankets, or towels.
- Soap, shampoo, and personal toiletries
- First-aid items and prescribed medications
- Desk lamp, alarm clock, surge protectors, and flashlight.
- Waste baskets, garbage bags, and cleaning supplies.
- Hangers, laundry basket/bag, laundry soap (HE), fabric softener sheets or liquid.
- Snacks, other food desired
- Driver's license or non-driver ID

#### **Additional Things you may want to bring**

- Pictures of family and friends
- Cell phone
- PC or laptop/iPad/tablet, printer
- Microwave, small refrigerator, or small coffee maker. Kitchen appliances are allowed to be stored in the student kitchens but are not allowed to be stored or used in students rooms.
- Plates, bowls, mugs and utensils.
- Car (please apply for a parking permit)
- Bicycle (bike racks are provided around campus, please bring your own lock and chain). Bicycles are also available for students to use at no cost.
- Television
- Stereo, radio, CD or mp3 player.
- Small fan
- Backpack
- Sports gear

**NOTE: Candles, incense, wax burners, or other items with an open flame are not allowed in residence hall rooms, not even for decorative purposes.**

#### **Personal Property**

The college assumes no responsibility for loss or damage to residents' personal property. Residents should consider purchasing renter's insurance or an extension of their parent's home owner's

insurance to cover loss or damage of personal property. This includes firearms storage. **All rooms should be locked if they are not occupied.**

### **Bedding/Mattresses**

Bedding (sheets, blankets, etc.) is required in the residence halls and students must bring their own bedding. Mattresses must remain on the bed to which they are assigned. Sleeping bags may not be used in lieu of regular bedding. It is the student's responsibility to launder their own sheets and bedding regularly.

### **Room/Lounge Furniture**

Room and lounge furniture may not be exchanged between rooms or residence halls. Beds and mattresses cannot be removed from the rooms even if the room only has one occupant. Lounge furniture may not be taken from the lounge for personal use. Violations of this regulation will result in sanctions. Furniture, paneling, or other decorative objects and materials that students request to bring into their rooms will not be allowed if in the judgment of the Head Resident it creates a fire hazard or it infringes upon the general living area within the room. If residents are found in violation of this policy, there will be a written warning and the resident(s) will be required to remove the items.

### **Cleanliness**

Residents are responsible for the routine cleaning of their rooms. Students are responsible for purchasing or borrowing cleaning supplies and equipment. Trash is to be placed in the outside trash dumpsters. If during routine room checks it is determined that a room needs cleaning, a written warning will be given. After a second check, if the room is still not clean, maintenance personnel may clean it and the room occupants will be assessed a cleaning fee. Continued issues may result in sanctions.

### **Room Inspections**

The Student Health nurse and Housing staff make routine room inspections to:

1. Ensure the health, sanitary, and safety condition of the rooms.
2. Ensure that college property is cared for properly and to assess damage.
3. Remove electrical equipment or other items not in compliance with residence hall regulations.
4. Ensure students are not violating residence hall rules and policies.

Room inspections will be held throughout the semester as frequently as every two weeks and will be done at least monthly. Room inspections may be chosen at random, may include entire halls, and may be more frequent for students who have consistent violations. Room inspections will also be conducted during

Thanksgiving break in November, semester break in December, and Spring break. While room inspections do not need to be announced, students may be sent reminders of possible upcoming inspections. Room inspections include: checking the fridge and microwave for cleanliness, smoke detector function, windows and screens, unreported damage to the furniture or fixtures, garbage accumulation and overall room cleanliness. Closets and drawers will not be searched unless the situation warrants it and the student is present. However, housing staff reserve the right to search without the student present in extenuating circumstances.

### **Entry and Search of Student Rooms**

College policy on the privacy of student rooms stipulates that search and entry will be restricted to the following instances:

- a. The Dakota College at Bottineau housing contract stipulates that housing staff reserves the right to inspect rooms at any time for purposes of administering the housing contract. Rooms may be inspected for maintenance, fire prevention, safety, and rule enforcement
- b. When college officials reasonably fear danger to health, safety, life or property.

- c. When college officials have just cause to suspect a violation of housing regulations.
- d. The college reserves the right to confiscate any prohibited materials found during an entry or search, and impose sanctions as laid out in the handbook.

The guidelines listed above will restrict arbitrary room inspections or searches. Housing staff will announce their presence before entering.

### **Bunk Beds/Lofts/Alterations**

Student constructed bunk beds or lofts or other structural changes to rooms are not allowed. Altering electrical connections or fixtures is not allowed. Room furniture is not to be dismantled.

### **Appliances**

The use and possession of electrical appliances in rooms are limited to the following devices: coffee makers, small microwaves, computers, clocks, fans, small refrigerators, sewing machines, electric shavers, hand-held hair dryers, radios, lamps, curling irons, DVD/Blue-Ray players, televisions, and CD players/stereos, small ice makers, and blenders. **Electric heaters, sun lamps, air conditioners, freezers, toaster ovens, air fryers, slow cookers, pressure cookers, are not permitted or any other cooking appliance.** Violators will have unauthorized equipment confiscated and are subject to sanctions. Rooms in Mead Hall and Gross Hall are limited to one fridge and one microwave per room. Suites in Milligan Hall are limited to two fridges and two microwaves per room.

Small fridges and microwaves are available for students to rent for the school year; Fall and Spring Semesters.

**Cube Fridge (small) \$25/year**

**Fridge (medium) \$50/year**

**Microwave \$20/year**

Rental appliances are limited and will be leased out on a first-come-first-choice basis. Small appliance rental forms are available from the Resident Assistants.

### **Hall Kitchen**

Cooking in residence hall rooms is limited to microwave ovens and coffee pots with an automatic shut off. All other forms of cooking appliances are prohibited and will be confiscated. Students may bring their own microwave ovens or refrigerators provided the ovens do not exceed one cubic foot/1100 watts and the refrigerators are not larger than 4.6 cubic feet. For convenience, student kitchens are located in Mead

Hall and Milligan Hall for students to use. Each kitchen has a sink, refrigerator and oven/stove. Shelves are provided for students to store optional cooking appliances and it is recommended that students label their personal small appliances. Small appliances are required to be stored on the shelves provided, and not in the student's room. If a prohibited small appliance is found it will be confiscated for the remainder of the semester and a sanction imposed. All personal dishes, utensils, pots and pans are to be cleaned in the kitchen only, and not in the student's room sinks. Personal kitchen wares (appliances excluded) may be stored in the student's room. A limited number of kitchen wares will be provided for student use in each kitchen. The student kitchens are to be cleaned after every use. Students who use the kitchen and fail to clean it or clean it inadequately may be sanctioned and can result in suspension of kitchen privileges. Cleaning supplies will be provided in each kitchen for students to use. In the event that a hall kitchen is in use, or unavailable, students may use the kitchen in another with the permission of that hall's RA. Students residing in Gross Hall may use either kitchen with RA permission.

### **Open Flames/Flammable Items**

Incense, candles (even for decorative purposes), Bunsen-burner type appliances, oil lamps, torches, stoves, and barbecues/cookers are prohibited in the residence halls. Possession, ignition or

detonation of any explosive device, fireworks, liquid or object which is flammable or which could cause damage by fire or explosion to persons or property are also prohibited.

**Aerials/Antennas, Satellite Dishes** Residents may not erect or construct aerials, antennas, or satellite dishes from their room.

### **Weightlifting Equipment**

Students are not allowed weightlifting equipment in their rooms. The Weight Room facility is located in Thatcher Hall.

### **Pets**

Pets of any kind, with the exception of fish or aquatic animals, are prohibited in the residence hall. Aquariums may not exceed 13" H, 11" W, and 21" L or hold more than 10 gallons of water. Only fish or aquatic animals may be placed in the aquarium – no exotic aquatic or reptile species are allowed. An aquarium in a student room must be mutually acceptable to all roommates. All tanks and aquatic pets must be approved by the Director of Student Life.

Any resident requiring an Emotional Support Animal must contact the Director of Student Life to obtain the policy and proper paperwork prior to the animal living on campus. A committee will review the ESA application and notify the student of the decision.

**Wild Game/Fowl/Fish Cleaning/Dressing Policy** The skinning and cleaning/dressing of wild game, fowl, or fish within the residence halls is strictly prohibited. A game cleaning station is available south of the CENEX store in Bottineau (the store is located on Highway 5 across from Subway). Wild game/fowl/fish must be properly cleaned/dressed and packaged according to North Dakota Game and Fish regulations. Individuals observed/reported violating this policy may face sanctions.

### **Room Personalization**

Within reasonable limits, we encourage students to make their rooms as comfortable and attractive as possible. However, each room must be left at checkout in as good as condition as it was at check-in. For this reason, nails, duct tape, two-sided tape, screws, thumbtacks, or any other sharp objects cannot be used in walls or ceilings. Plasti-tak can be purchased from the bookstore and should be used for posters and pictures. 3M removable strips (Command Strips) are also acceptable.

Stolen property is not permitted in the residence halls.

Light fixtures cannot be covered with any materials. Halogen light bulbs and candles are not permitted. Decorative hangings or tapestries cannot be suspended from light fixtures and must be at least one and onehalf feet from lights. Large and/or continuous tapestries, posters, or other flammable objects hung or placed in residence hall rooms that allow for rapid spread of fire are prohibited.

Empty alcohol containers are not allowed within residence halls. This restriction applies to containers used for decorative purposes, can collections for recycling, furniture made from empty containers (lights, etc.), or containers saved as souvenirs.

In addition, personal property that may damage or contaminate the room or result in a lack of good order is not permitted.

Large rocks or blocks may not be used as door stops.

Residents agree not to hold DCB responsible, and its employees and agents from any claims or damages sustained by residents or others in their room as a result of acts or omissions relating to any changes or modifications made to rooms or furnishings. This makes residents financially responsible to DCB and releases the college in the event of damage or injury.

Damage caused by room personalization techniques will be assessed to the room residents.

### **Repairs to Rooms**

Report immediately to your Head Resident or Resident Assistant any repairs that need to be done or any damage that has occurred in your room. Housing staff will complete a work order form.

### **Windows/Outsides of Buildings**

Windows may not be used for entrance or exit to the building. Residents are not allowed to remove, modify, or tamper with the window and/or screen. If a resident is found violating this policy, sanctions may be assessed. Room occupants are responsible for screen care and window condition.

Dropping, throwing, or in any manner allowing any object, liquid or solid, to be ejected from windows is strictly prohibited. Residents of a room are responsible for any object ejected from their window.

Residents should be aware that leaving windows open during cold weather might cause the pipes in their rooms to freeze and possibly burst. Residents may be held responsible for any damages that result from a window being left open in their room.

Engine heaters or extension cords may not be strung through windows to cars or plugged into outlets on the outside of the building.

### **Bicycles**

Bicycles cannot be stored in the residence halls. There are bicycle racks around campus for storage. Please bring a chain and lock.

**Solicitation/Advertising/Sales/Fundraising** Door-to-door sales within the residence hall are prohibited, as is fundraising, advertising and conducting business. Students representing clubs or organizations on campus will be allowed to fundraise in the halls with permission by the Director of Student Life. Literature to be distributed in the residence hall, including material pertaining to political parties or campaigning, must be approved by the Director of Student Life; it cannot be delivered door-to-door. Organizations or groups wishing to meet with specific individuals must do so in the lounge area of the residence halls.

## **Standard Regulations**

### **Civility Statement**

Living on campus provides a unique experience for students to interact with others from diverse groups and backgrounds. Residents engage in interactions that promote learning and appreciation of each other's individuality. The privilege of living on campus comes with responsibilities for personal behavior towards others in the community.

In order to create a positive living and learning environment, campus residents must be civil with each other. Residents are expected to understand the impact of their individual actions on the community as a whole and change any behavior that does not support our community expectations.

Those expectations include, but may not be limited to:

- Speaking to each other in a civil manner.
- Recognizing how actions and language impact the residence community as a whole.
- Treating residence community members with dignity, consideration, and respect.
- Refraining from displaying items that are disrespectful and hurtful to others.
- Refraining from utilizing technology in a way that is disrespectful and hurtful to others.
- Prejudice, gender violence, oppression, and hatred will not be tolerated.
- Confronting behavior or reporting to staff incidents of incivility and intolerance.

### **Complicity**

Your presence in a location where a violation of the Housing regulations is occurring indicates acceptance of the behavior that is prohibited. Failure to remove yourself from the situation or make a reasonable effort to stop the behavior encourages its persistence.

### **Alcohol**

The use or possession of alcoholic beverages in college housing is prohibited by the State Board of Higher Education. Students in violation of the prohibition of alcohol in the residence halls will be subject to sanctions which may include, but is not limited to; fines, mandatory visits to the campus counselor or an alcohol education class, campus community service and possible dismissal from campus housing.

Residents are responsible for the activity that occurs in the residence halls. Thus, if an alcohol violation is taking place, the resident has the responsibility to report the violation to the Housing staff or vacate the area.

In addition, any student who is under the influence of alcohol and brings attention to themselves by making noise or general disruption or publicly displaying underage intoxication is in violation of this policy and may face sanctions.

Housing staff is aware that in certain situations a resident will not be observed actually consuming alcoholic beverages. Therefore, it is the responsibility of the Housing Staff and Judicial Officer to investigate cases of suspected alcohol, examine the circumstances involved, and arrive at a conclusion. If it is determined that a violation has occurred, a standard course of action will be followed.

Where excessive or extraordinary disruption of residence hall life is caused by use of alcohol, sanctions will be taken to remediate the situation. Residents present in a living area where an alcohol violation has occurred will be held responsible for the conduct in that area until that time when those responsible for the violation are identified.

DCB will not accept intoxication as an excuse for disruptive and disorderly behavior or for property damage. DCB reserves the right to confiscate alcoholic beverages.

Empty alcohol containers are also prohibited within residence halls. This restriction applies to containers used for decorative purposes, can collections for recycling, furniture made from empty containers (lights, etc.), or containers saved as souvenirs.

### **Drugs and Smoking**

No student or their guest may possess, distribute, manufacture, exchange, consume, use, or sell illegal or un-prescribed drugs anywhere on DCB property. Any drug or tobacco smoking paraphernalia (pipes, vape pens, hookahs, rolling papers, etc.) found will be viewed as a violation of the drug policy.

In addition, any student, under the influence of illegal or unprescribed drugs who brings attention to themselves that they are under the influence of drugs is in violation of this policy. Any student present during drug violations is also subject to this policy.

Violators of the drug policy may be reported to local law enforcement officials and the college will fully cooperate. A penalty or punishment dictated by civil courts and authorities will not preclude disciplinary action by the College. Violation of this policy may result in removal from the residence halls.

### **Fighting/Violence and Drug Violations**

Fighting and violence is prohibited and will not be tolerated in any form and may result in removal from the residence halls.

### **Criminal Trespass**

Dakota College at Bottineau's residence halls are not public areas. Residence hall visitors, guests, and all others not paying room and board fees are expected to respect and observe guidelines regarding visitation, usage, and occupancy of the halls. Failure to do so may result in the arrest of an individual(s) for criminal trespass or other appropriate sanctions.

The North Dakota Century Code, Section 12.1-22-03, pertaining to criminal trespass is as follows:

1. A person is guilty of a class C felony if, knowing that he or she is not licensed or privileged to do so, he or she enters or remains in a dwelling or in highly secured premises.
2. A person is guilty of a class A misdemeanor if, knowing that he or she is not licensed or privileged to do so, he or she:
  - a. Enters or remains in any building, occupied structure, or storage structure, or separately secured or occupied portion thereof; or
  - b. Enters or remains in any place so enclosed as manifestly to exclude intruders.
3. A person is guilty of a class B misdemeanor if, knowing that he or she is not licensed or privileged to do so, he or she enters or remains in any place as to which notice against trespass is given by actual communication to the actor by the person in charge of the premises or other authorized person or by posting in a manner reasonably likely to come to the attention of intruders.

### **Conduct of Residents**

Any action intended to annoy, threaten, alarm, or harm any other member of the residence hall and college community is considered a breach of the housing regulations and will not be tolerated. Students may not disturb or infringe on the rights of others, harass, or in any way malign or damage the dignity of a fellow student or the Housing staff. Lewd, obscene, and disorderly conduct is prohibited.

Disagreements and conflicts will occur at times, but it is expected that all residents defuse or handle those disagreements in a mature, non-threatening, and nonviolent manner. They may seek help from staff members or College community members whenever necessary. Fighting in any area of the residence halls or DCB campus will not be tolerated.

Housing staff are responsible for maintaining order and promoting group living conditions that are conducive to the intellectual, social, and cultural development of hall residents. For this reason, students in the residence halls are expected to conform to the rules and regulations published in this handbook.

### **Skateboarding, Skating, Sledding, Snow Fights, Cleats, and Roller Blades**



Skateboarding and use of scooters, skates, etc. are prohibited in the residence halls. Cleats and roller blades are not to be worn in the residence halls.

### **Common Damage Policy**

When responsibility for damage cannot be determined, a common damage policy is instituted. This policy provides that all residents are responsible for damage in specified areas, i.e., roommates will be jointly responsible for damage to a specific room, hall residents will be responsible for damage to public spaces in the hall where they reside.

### **Damage Policy**

Students are financially responsible for damage and loss to residence hall property resulting from negligence or misuse by the student. This includes damage to screens, doors, windows, locks, walls, hallways, and bathrooms.

### **Doors (Entrance and Exit)**

Doors that have been locked by Housing staff are to remain locked and may not be propped open with any device or object. Sanctions will be assessed for propping open doors. Entry and exit is allowed only through the main front doors.

### **Firearms/Explosives/Weapons**

The possession of fireworks, firearms, ammunition, BB guns, stun guns, metal tipped darts, knives and switchblades, self-defense spray items, any kind of martial arts equipment (chukka sticks, throwing stars, etc.), bows and arrows, explosives, war souvenirs, blow darts, slingshots, wrist rockets, cross-bows, pellet guns, paintballs or paintball guns, air soft guns or flammable liquids (kerosene, paint thinner, lighter fluid, etc.), or other potentially dangerous items are not permitted in the DCB residence halls or on-campus.

Firearms may never be stored or physically present in an individual room – even for purposes of cleaning the weapon.

### **Gambling**

Gambling for money is not allowed in the residence halls or Student Center. This includes any games played for money or goods exchanged for money.

### **Dress in Public/Common Areas**

For the comfort and health of all residents, all individuals must wear appropriate clothing, at all times, in the public/common areas such as residence hall lounges, student center, hallways, etc. Appropriate clothing includes, but is not limited to; tops, bottoms, socks, and shoes/slippers. The definition of appropriate clothing is left up to the discretion of the RAs, Head Resident, and the Director of Student Life.

### **Lounge/Common Area Etiquette**

- Residents, guests, and visitors are expected to clean up after themselves when leaving the lounge/common area
- Residents, guests, and visitors are expected to keep the TV volume at a reasonable level and turn off the TV when leaving the lounge/common area
- Personal items are not to be left in the lounge/common areas overnight
- All furniture is to remain in the lounge/common area
- Viewing of pornographic or inappropriate materials on common area televisions or computers is prohibited.

## **Emergency Suspension and Expulsion**

Any person who has information that indicates the continued presence of a student on DCB campus poses a substantial threat should provide the information to a Housing Staff member or Director of Student Life. An Emergency Suspension and Expulsion will be pursued if:

- A student's behavior poses a significant threat of danger and/or injury to self or others,
- A student's behavior poses threat of disruption to the educational process for others and/or
- A student's behavior poses a threat of destruction or property

The BIT Team will meet and follow due process according the Emergency Suspension and Expulsion policy.

## **Visitation/Guest Privileges**

### **General Guidelines**

Dakota College has established visiting hours for the guests of residents. Residence hall students are responsible for the behavior of their guests, for knowing when visitation is permitted and for ensuring that their guests know and follow all housing regulations. Residents must respect the rights of roommates and other when residents while hosting visitors.

A guest/visitor is considered anyone who does not permanently reside in the room/suite they are visiting. Guests/visitors are expected to abide all housing regulations while visiting the residence halls.

Hosting guests is a privilege. Residents who abuse this privilege risk sanctions and/or losing visitation privileges.

Individuals under 18 years of age are not allowed in residence halls unless they are full-time students of Dakota College or members of the resident's immediate family.

**Residents are to NEVER give or loan their fob or key to their guest or visitor, or another resident.**

Residence hall guests are required to be **escorted by their host at all times**. Entry into a residence hall as a guest does not allow the guest access to the entire building – only to those areas to which he or she is escorted by the host.

**NOTE: If residents are observed or reported to be allowing unknown individuals into the residence halls unescorted, they may face sanctions.**

Residents are responsible for the behavior of their guests and will be held liable for loss, damage, or rule violations incurred by the guest.

### **Visitation Policy**

DCB has an open visitation policy in campus housing. Students who reside in campus housing are allowed overnight visitors any night of the week with RA permission. Overnight visitors must be signed in by an RA by 11:00pm on the night of the visit. All overnight visitors will be required to show photo ID and must be over 18 years of age. Failure to sign in an overnight visitor may result in restriction of visitation privileges. Residents cannot host more than one overnight guest at a time without permission from the Director of Student Life.

There is a 1:00am curfew for all off-campus visitors not approved as an overnight guest.

Students who reside in DCB housing are welcome to visit other halls without curfew.

Residents with roommates need to discuss the visitation policy and mutually agree upon the rules they will use.

Males who are overnight guests in Gross Hall are not allowed to use the shower facilities; they must make arrangements to shower in Mead Hall, Milligan Hall or locker room in Thatcher Hall. Females who are overnight guests in Mead Hall are not allowed to use shower facilities and must make arrangements to shower in Gross Hall, Milligan Hall or the locker room in Thatcher Hall.

Weekend overnight guests are expected to use the guest bathrooms in Mead and Gross Hall.

### **In-Hall Sports**

“In-hall” sports are not permitted. This restriction applies, but is not limited to, hall hockey, Frisbee, water balloons, soccer, golf, skateboarding, whiffle ball, football, roller blading, and water guns.

### **Keys**

When you check into your residence hall you are given keys for your room and a key fob for the outside door. College regulations prohibit the duplication of keys by students and prohibits students from giving or lending their keys to any other individual. Students who lose their keys must report the loss to the Head Resident immediately so the appropriate steps can be taken. A replacement fee is assessed for the keys and lock cylinders of the doors for which the key was lost.

All living quarters should be locked when unoccupied. DCB does not assume responsibility for lost or stolen items.

Residents are responsible for their keys and fobs and required to report them missing immediately. Failure to report missing keys and fobs will result in sanctions.

**Posted Information/Floor Meetings** Residents are responsible for understanding the information and notices posted on bulletin boards. Hall meetings are mandatory for all hall residents.

### **Property Destruction/Theft**

The willful destruction, defacing, or theft of college, private, or public property is prohibited. Violations of this regulation will be subject to sanctions taken by both law enforcement officials and residence hall staff. Students who have lost items in the residence hall should notify an RA, Head Resident or the Director of Student Life immediately.

### **Unclaimed Property**

Unclaimed property is not the responsibility of DCB and will be disposed of or donated after 30 days.

### **Quiet Hours/Noise**

Quiet hours are from 10:30 p.m. to 8:00 a.m. each day. Special quiet hours may be imposed during certain times and all residents are expected to respond to individual or housing staff requests to lower noise levels. During finals week quiet hours are imposed 24 hours every day.

Quiet hours are times set aside for sleeping and studying. During quiet hours, students are expected to keep noise and distractions to a minimum. All room doors should be closed during quiet hours.

Residents are encouraged to approach individuals respectfully who are violating quiet hours or creating a disturbance during normal hours. If this initial approach is not successful, residents then

should contact an RA. Housing staff will enforce quiet hours when necessary and each resident has the responsibility to observe this regulation.

Loud noises at any time are not conducive to a community environment. Resident need to be respectful of others and must use their best judgment regarding how sounds may be affecting others.

Sanctions will be issued for violating DCB's quiet hours/noise policy.

### **Quiet Rooms**

Designated rooms in each hall are designated as Quiet Rooms. In an effort to best serve residents of the floor, the rules and regulations have been determined by the Housing Staff with input from the students living on the floor.

Guidelines:

- 24 hour quiet hours
- One guest per resident at a time
- Removal from floor for noise violations

### **Sound Equipment/Musical Instruments**

In consideration of other residents, stereos, radios, televisions, musical instruments, and other electronic devices should be played at volumes which cannot be heard outside of the resident's living unit. The use of headphones for sound equipment is recommended.

Stereo speakers **ARE NOT ALLOWED** in windows.

If this policy is violated repeatedly, the resident(s) involved may be required to remove the sound equipment from the DCB residence halls or have the equipment confiscated.

### **Roofs/Ceilings/Heating Tunnels**

Residents are not permitted on the roofs of the residence halls, heating tunnels, storerooms, mechanical rooms, or other similar spaces where access is restricted to staff only. Being these areas are considered **life threatening**, behavior and violations of this policy will be handled with the utmost seriousness and sanctions.

### **Smoking**

Smoking is not permitted on campus property. \* **By**

**North Dakota state law, Dakota College is a Tobacco Free Campus.** \* By definition, tobacco violations include the use or possession of any and all tobacco products, including smokeless tobacco, vape pens and e-cigarettes.

### **Judicial Process**

A complaint is filed by a Housing staff member when it is determined that a rule or regulation has been violated.

All incident report forms are forwarded to the Judicial Officer and they will determine the sanction for each student. Students will usually be notified via campus email for Judicial appointments and outcomes.

### **Sanctions**

A sanction is a consequence placed upon a student for violating DCB's rules and regulations.

**Sanctions taken may include, but are not limited to the following:**

- Verbal or written reprimand
- Contacting coaches, parents, or advisors
- Room or hall transfers
- Residence hall or college suspension and expulsion
- Residence hall or college probation
- Required counseling
- Work detail
- Confiscation
- Fines
- Campus Community service
- Revocation of privileges (guests, visiting, using hall equipment, etc.)
- Restitution

Although sanctions will be applied fairly and consistently, specific infractions of a rule or regulation will not be circumscribed by a specific consequence. **Each situation is unique; thus, the forms of disciplinary action may vary.**

### **Guidelines for Common Violations and Sanctions**

The Common Violations and Sanctions Handout will be provided to students upon arrival at DCB and checking in to their residence hall.

### **Appeals**

In most residence hall disciplinary proceedings, the action taken by the Judicial Officer will be final. However, in clearly unique or extraordinary circumstances their action may be appealed to the Residence Hall Appeal Board. The Appeal Board will consist of a Head Resident from a residence hall other than where the infraction occurred, a Resident Assistant from a residence hall other than where the infraction occurred, and a faculty or staff member appointed by the Associate Dean for Student Services. The Associate Dean for Student Services and the Judicial Officer may be ex-officio members of the Residence Hall Appeals Board.

- A) A decision reached by the Housing Staff or a hearing officer may be appealed to the Residence Hall Appeals Board within five school days of the decision. The appeal must be in writing, stating the reason for the appeal, and delivered to the Director of Student Life.
- B) Except as required to explain the basis of new evidence, an appeal is limited to a review of the record of the initial sanction and any documents or evidence, for one or more of the following purposes:
  - 1 To determine if the original sanction was fair and appropriate.
  - 2 To determine if the decision reached regarding the accused student was based on substantial evidence.
  - 3 To consider new evidence sufficient to alter a decision or other relevant facts not brought out in the original sanction.
- C) After reviewing the matter, the Residence Hall Appeals Board may:
  - 1 Deny the appeal and uphold the decision,
  - 2 Resolve the matter by discussing the case with as many individuals as they deem necessary,
  - 3 Allow reconsideration of the original determination and/or sanction(s).
- D) A review of sanctions by the Residence Hall Appeals Board may not result in more severe sanctions for the accused student.

- E) A decision on an appeal will be made within ten school days of the receipt of the appeal.
- F) The imposition of sanctions will normally be deferred during the pendency of appeal proceedings. However, in the interests of the safety of the college community, this stay is at the discretion of the Associate Dean for Student Services.
- G) The decision made by the Residence Hall Appeal Board will be final.

### **Default Proceedings**

A student or organization who fails to appear before a hearing board or administrator on the date set to answer or contest the charges of a violation of college regulations will be treated as being in default. The result will be that the case will be decided on the information available in the absence of the student's statement and the default judgment may be reexamined only upon a showing by the student or organization that the absence was for a good cause.

In the case of the student who has left the college rather than appearing before the hearing board, the effect of the default judgment will be:

- The college informs the student in writing of the complaint as it is known without benefit of hearing and the disciplinary action that has resulted.
- The same information is furnished to anyone designated by the student in connection to the incident.

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### **Judicial Procedures Outline**

If students are found to be in violation of any of the rules and regulations detailed in the Residence Hall Handbook, they will be subject to sanction based on the violation and number of occurrences.

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### **All College Student Conduct Committee**

Membership

Associate Dean for Student Services or their designee (Chair Person), two students, two faculty and one staff member.

### **Conduct Appeals Committee**

Membership

One faculty member, one student member, and one college administrator. The Associate Dean for Student Services, or their designee serves on the committee in a non-voting, advisory role. The Chairperson is elected by the members.

### **Fire, Tornadoes, Personal Safety**

#### **Fire Alarms/Smoke Detectors**

When a fire alarm sounds you should close any open windows, leave the lights on in your room, and proceed to the nearest exit wearing a coat and hardsoled shoes. Before opening any door, you should touch it first to check for heat. DO NOT OPEN ANY DOORS THAT FEEL HOT. You should carry a towel to place over your face in case you encounter smoke. Close your door and calmly leave the building, moving to a point at least 100 yards from the building unless directed by Residence Life to move further away. DO NOT return to your room for any reason until the authorities give instructions to do so. Students should periodically check the smoke detectors in their own rooms.

#### **Fire Drills**

Fire drills will be held in the residence halls. Students are required to cooperate and follow evacuation procedures IMMEDIATELY when the fire alarm sounds. Rooms will be checked during the fire drills to

make certain students have evacuated. Students who do not cooperate during fire drills will be sanctioned.

### **Fire Equipment/Fire Doors**

Students should locate fire exits, fire alarms, and fire extinguishers on the floor where they live.

Tampering with equipment and setting false alarms endangers lives. It is against the law to tamper with fire alarms or equipment. Residents or guests who tamper with the College's fire equipment or set false alarms will be punished according to local, state, and college guidelines.

Fire doors and fire escapes are to be used only in case of fire.

### **Reporting Safety Hazards**

Report any fire or safety hazards to the Head Resident. In the event of a fire, never assume that the fire department has been notified. Pull the fire alarm and call the fire department.

Please familiarize yourself with the following important telephone numbers:

Police.....911  
Fire.....911  
Ambulance.....911 Poison Information.....1-800-222-1222  
*911 calls are tracked to the source telephone*

### **Tornadoes**

A tornado **WATCH** is issued by the National Weather Service. No action is indicated during a tornado watch except to be ready to move if a warning is issued. A tornado **WARNING** is issued when a tornado has been sighted. The City of Bottineau will sound the siren for both a watch and warning. People should move immediately to shelter in a reinforced building. The basements or interior hallways on a lower floor are safest. Upper stories are unsafe. If there is no time to descend, a closet or small room with walls or an inside hallway will give some protection against flying debris. Stay away from windows! AVOID

AUDITORIUMS OR GYMNASIUMS WITH  
LARGE POORLY SUPPORTED CEILINGS AND

ROOFS. If you are in a building, do not go outside to another building, even if you think that building would provide more protection--you are safer indoors. Students in the residence halls should proceed to first floor hallways or basements (when possible) and wait until they are notified that the tornado warning has expired.

### **Severe Winter Weather**

Students, especially those contemplating out-of-town travel, are responsible for making themselves aware of any severe weather conditions that may exist. When traveling in the winter, students are strongly advised to have an Emergency Survival Kit.

For a North Dakota road condition report, call 511 or search ND Road Report.

### **Security**

#### **Camera Policy**

The purpose of the camera policy is to regulate the use of surveillance equipment for security or investigation purposes only. This standard practice applies to all personnel of DCB in the use of surveillance equipment.

## **General principles**

- A. The purpose of surveillance equipment is to deter crime and to assist in protecting the property of the College community.
- B. Any diversion of security technologies and personnel for other purposes would undermine the acceptability of these resources and is therefore prohibited by this policy.
- C. The use of surveillance equipment for security purposes will be conducted in a professional, ethical, and legal manner. Personnel involved will be appropriately trained and supervised in the responsible use of the technology. Violation of the use of surveillance equipment as outlined will result in disciplinary action consistent with the rules and regulation governing students and employees of DCB.
- D. Information obtained through surveillance equipment will be used exclusively for security, risk management investigation purposes, and enforcement of DCB and North Dakota University System policies and procedures and is not intended for the enhancement of personal safety.
- E. The use of any surveillance equipment in public areas will be conducted in a manner consistent with all existing College policies and legal requirements.
- F. The use of surveillance equipment for security purposes at the College is limited to uses that do not violate the reasonable expectations of privacy as defined by law. Surveillance equipment installed for security purposes will not be placed in such a manner that confidential or sensitive information is visible or recorded.
- G. Any data retained for investigations or proceedings will be burned to a DVD and retained for three years.
- H. DCB will post signs stating there is video surveillance on the premises.

## **Examples of surveillance equipment use in public areas**

- A. Protection of buildings and property – Building entrances and exits, parking lots, exercise rooms, etc.
- B. Monitoring building access – Records access to building entrances during non-normal hours.
- C. Criminal investigation – Robbery, destruction of property, assault, etc.
- D. Investigation of an accident, Personal injury, vehicle accident, medical problems, etc.

## **Missing Student Notification Policy**

1. INTRODUCTION: Pursuant to the 2008 reauthorization of the Higher Education Act, students residing in DCB owned and operated facilities have the opportunity to designate an individual to be contacted in the event the student is determined to be missing. The purpose of this policy is to clarify the option available for such designation, and the institution's responsibility for notification in the case of a missing student.
2. DEFINITION: A missing student is defined as a person currently enrolled at DCB, whose whereabouts have been unaccounted for by DCB staff or law enforcement for more than 24 hours.
3. CONTACT INFORMATION: Students residing in DCB owned and operated facilities have the option to designate an individual to be contacted in the event the student is determined by DCB staff or appropriate law enforcement agency to be missing. This contact may be the same or different than the emergency contact information provided in the student's Campus Connection account.
4. REPORTING: A report should be filed with DCB Student Services at the time a student is presumed to be missing. A report may be filed by a DCB employee, friend, roommate, or family member. An investigation will be conducted in an attempt to determine the whereabouts and wellbeing of the student.
5. INITIATE PROCEDURES: When DCB Student Services have been notified and the student becomes the subject of a missing person's report, DCB will initiate the Missing Persons Procedures and Notification in accordance with the student's designation.
6. NOTIFICATION: The student's designated contact person will be notified.



7. MINORS: If the student is under the age of 18, and is not an emancipated adult, DCB is required to notify a custodial parent or guardian, in addition to any contact person specifically designated by the student. Contact will be made no more than 24 hours after the student is determined by DCB student services or other appropriate law enforcement agency to be missing.

8. FAILURE TO DESIGNATE CONTACT: in the event a student residing in a college owned and operated facility, is determined by DCB staff or other law enforcement to be missing, and has not previously identified a missing persons contact, DCB will notify the individual identified in the student's Campus Connection account as the emergency contact.

## Security

- Don't take your safety for granted.
- Be alert and aware of your surroundings.
- Trust your instincts. If you feel uncomfortable in a place or situation, leave.
- Report IMMEDIATELY any suspicious persons or activities and make note of physical details regarding the persons or vehicles involved.

WHEN IN DOUBT, REPORT IT!

- STAY SOBER.
- It is always good policy to walk or study on campus or anywhere else with a group or with someone you know.
- Carry your purse close to your body and keep a firm grip on it. Carry a wallet in an inside coat or side pants pocket, not in a rear pants pocket.
- When walking, plan the safest route to your destination, choose well-lit areas, and avoid vacant lots, alleys, or other deserted areas.
- Lock your vehicle.
- Always check the rear seat of your vehicle for intruders before entering.
- Report to the Director of Student Life, Head Resident or Resident Assistant areas of campus that might be dimly lit or obscured by shrubbery or other sight-blockers. Also report lights that are not working.
- Do not prop open doors. If you see a door that should be closed and locked that is propped open, tell your Resident Assistant or Head Resident. If you can't find them, or if the occurrence is after visiting hours, close the door yourself.
- Lock your residence hall room door when the room isn't occupied and when you are sleeping.
- Never loan your residence hall keys to anyone, and report lost keys.
- Do not put your name or address on your keys.
- Have your car or residence key in hand as you approach your vehicle or room/house. It can be used as a weapon in the event of an attack.
- Draw blinds or curtains after dark and/or when dressing.
- When jogging, vary your route and schedule.
- Never hitchhike or pick up hitchhikers. Don't accept rides from strangers.
- If you suspect someone is following you on foot, don't panic. Go to the nearest well lit, populated area. If a car pulls up near you, cross the street or turn in the opposite direction.
- Do not leave in plain view valuable items like computers, stereo equipment, clothing, or credit cards. Do not flaunt expensive items or valuables like jewelry.
- The college does not assume responsibility for lost or stolen items; therefore, purchase insurance for the valuables you have in your room and the firearm you may have stored in the campus gun safe.
- Students should mark all of their property and keep a list of serial numbers of the items they have brought with them into the residence hall room.
- Know the evacuation routes that are posted in each residence hall that are to be followed in case of fire.
- If you have any ideas or concerns about campus security, contact your Resident Director, or the Housing Director.

## Current Replacement Costs

Current replacement costs will be assessed to students in cases of damage beyond normal use. Residents are held responsible for their own living areas and are expected to report damage within twenty-four hours. The Common Damage Policy is invoked for damage to public areas within the residence hall where individual liability cannot be determined.

Listed below and in the next column is a chart that will give you an idea of what replacement costs are.

This information is provided as a GUIDE ONLY!

AMOUNTS ASSESSED WILL BE BASED ON ACTUAL REPLACEMENT COSTS.

Glass in entry doors .....	\$240-\$300	
Entry door frames .....	\$180	
Room doors .....	\$300	
Windows .....	\$48-\$300	
Wastebasket .....	\$15	
Fire extinguisher recharge .....	\$50	
Mattress .....	\$250	
Lost keys .....	\$25	
Light globes .....	\$50-\$75	
Window screens .....	\$100	
Tack, nail, screw holes in walls, doors, or ceilings .....	\$25/hr to repair	
Floor tiles .....	\$25/hr	
Shower head .....	\$25	
Bathroom toilet .....	\$150-\$200 Stained bathroom tiles or fixtures from pouring things down the drain (ex. Hair dye) .....	\$25/hr Replacement costs of tiles .....
	\$100/sq.ft.	
Towel bars .....	\$20	
Cleaning charge – dirty room .....	\$25/hr Room chairs .....	
	\$60	
Labor to repair damage .....	\$20/hr	
Bed Frames .....	\$250	
Door lock assembly .....	\$350	
Chests/dressers (Gross Hall, Milligan Hall) .....	\$220	
Re-pin door locks .....	\$50	
Closet doors .....	\$120	
Mini-blinds/Curtains .....	\$30-\$100	
Repaint entire room .....	\$300	
Thermostat .....	\$90	
Washer .....	\$720	
Dryer .....	\$550	
Lounge sofa .....	\$1200	
Lounge end table .....	\$120	
Lamp shades .....	\$40	
Upholstered lounge chair .....	\$600	
Carpet .....	\$50/sq yd	
Sink .....	\$120	
Ceiling tiles .....	\$25/hr + cost of ceiling tiles	
Shower curtain .....	\$40	
Theater DVD player .....	\$100	
Microwave .....	\$100	

Smoke alarm .....	\$100
Mirror .....	\$100
Lounge Television .....	\$300
Towel hooks .....	\$20
Soap dish .....	\$20
Wardrobes/closets .....	\$750

**Except where noted, PRICES DO NOT INCLUDE THE COSTS OF LABOR. Prices are also subject to change as the cost of material and labor change.**

**Any personal items left in the rooms 30 days after the end of the semester or upon check out, will be discarded or donated. A reasonable attempt to contact the student will be made prior to discarding items. This includes but is not limited to: clothing, shoes, food, dishes, cutlery, bedding, furniture, decorations, electronics, rugs, shower accessories, microwave, refrigerator, coffee makers, TV's, valuables, etc. DCB is not responsible for lost or damaged items left in residence hall rooms. DCB is not responsible for boxing or storing personal belongings.**

- **Gross Hall – first floor hallway or basement. If time, hall personnel will direct residents to go to basement in Milligan**
- **Milligan Hall – go to basement level.**

**YOUR SAFETY IS OUR CONCERN!**

**For Your Information - City of Bottineau Sirens**



1. 12:00 Noon & 10:00 P.M. Daily – A

one-time only siren goes off to remind community residents what time of day it is. 😊 **No action required.**



2. Fire Alarm – A continual and repeating

up and down pitched siren that sounds until enough volunteer firefighters arrive at the Fire station.

**ACTION – Watch out for speeding firefighters on their way to the Fire station!** This siren is tested at noon on the first Monday of every month.



3. Tornado Watch/Warning – A continual

one-tone pitched siren (indicating that conditions exist that could create a tornado or that an actual tornado has been sighted). **ACTION – If a tornado watch has been issued, no action necessary**

**except to be prepared to move if the watch becomes a warning. If a Tornado Warning is issued, proceed to the basement of your building and heed instruction of housing staff. GET OUT OF ANY ROOM THAT HAS WINDOWS!!! All residents are required to follow severe weather procedures.**

**Safe areas in residence halls.**

- **Mead Hall – Go to basement level**

**Appendix D**

**Dakota College at Bottineau – Housing – Common Violations and Fines**

<b>Infraction</b>	<b>1<sup>st</sup> Violation</b>	<b>2<sup>nd</sup> Violation</b>	<b>3<sup>rd</sup> Violation</b>	<b>4<sup>th</sup> Violation</b>	<b>5<sup>th</sup> Violation</b>
Late Sign in of Visitor	Warning	\$10	\$10	\$10	\$10
Visitation Violation No Escort	Warning	\$25	\$50 + one month suspension of visitation privileges	\$75 + semester suspension of visitation privileges	\$100 + eviction from residence halls
Unauthorized Entry	Warning	\$25	\$50	\$75	Eviction from Residence Halls
Garbage left in public space and removed by student	Warning	\$25	\$50	\$75	\$100
Garbage left in public space and removed by staff	\$25	\$50	\$75	\$100	Eviction from Residence Halls
Foul odor from room	Warning	\$25	\$50	\$75	Eviction from Residence Halls
Alcohol	\$50 and Alcohol Education Course	\$100 and Two Hours Campus Community Service	\$200 and Four Hours Campus Community Services	\$350 and 10 Hours Campus Community Service	Eviction from Residence Halls
Drug, Marijuana, Paraphernalia	\$100 Two hours Campus Community Service	\$250 Four hours Campus Community Service	Eviction from Residence Halls		
Noise Violation	Warning	\$25	\$50	\$75	\$100
Candles/Open Flame	Warning + confiscation	\$25 + confiscation	\$50+ confiscation	\$75+ confiscation	\$100+ confiscation
Prohibited Appliance	\$25 per appliance and confiscation	\$50 per appliance and confiscation	\$75 per Appliance and confiscation	Eviction from Residence Halls	
Door Propping	\$25	\$50	\$75	\$100	\$150
Smoking	\$50	\$100	\$150	\$200	\$250
Window Screen Removal/Damage Climbing on the roof or ledges	\$100	\$150	\$175	\$200	\$300

Smoke Detector Tampering	\$50	\$100	\$150	\$200	Eviction from Residence Halls
Room Checks	Warning	\$25	\$50	\$75	Eviction from Residence Halls
Common Damage	\$50/hr + materials	\$50 + \$50/hr	\$100 + \$50/hr + Eviction		
Theft	Full Restitution And 10 Hours Campus Community Service	Eviction from Residence Halls			
Kitchen Cleaning	\$25	\$50	\$100	Suspension of Kitchen Privileges	Eviction from Residence Hall
Unauthorized Storage	\$50	After 30 Days – Disposal/Donation			
Unauthorized Animal, Fish Tank or Aquatic Pet	\$100	\$250	Eviction from Residence Halls		
Unauthorized Room Changes	\$100	\$200	Eviction from Residence Halls		
Improper Check Out/ Room Cleaning	\$100+\$25 Key/Fob Replacement				
Dish Washing in Room Sink	\$25 (\$100 for clog removal)	\$50 (\$100 for clog removal)	\$75 (\$100 for clog removal)	\$100 (\$100 for clog removal)	+\$50/hr for maintenance if necessary
On Campus without Permission/Late Stay	\$100+\$15/day	Eviction			
Loaning Out Key Fob	\$10	\$25	\$50	\$75	\$100
Damaged Pool Cue Damaged Ping Pong Paddle	\$50 \$15				
Ignoring Fire Alarm	\$50	\$100			
Laundry Violations	\$25	\$50	\$100	Visitation Ban	
Open Window Violation	\$25	\$50			
Failure to Use Guest Bathroom	One Month Visitation Suspension	Semester Visitation Suspension	Eviction		

## **Violation Description**

**Late Sign In** – requesting an RA or Head Resident to sign-in an overnight visitor after 11pm.

**Visitation Violation** – resident has a guest in their room outside of visiting hours that has not been signed in by an RA or

Head Resident. Residents are allowed one guest overnight at a time, and two guests until curfew. A violation will be in effect for more guests than allowed. All off campus overnight guests will be required to show photo identification.

**Unauthorized Entry** – gaining entry to a vacant room without permission and occupying it for an indeterminate amount of time. (throwing a party, eating a meal, hanging out, sleeping, using it as a guest room, etc.) It is a violation if the room is locked or unlocked. Unauthorized entry also applies to entering a residence hall where the student does not reside without escort or by means of coercion or deceit.

**Garbage left in public space and removed by student** – garbage left in the hall, lobby or other public space by the student and later removed by the student after being asked to by housing staff or security.

**Garbage left in public space and removed by staff** – garbage left in the hall, lobby or other public space by a student who is not home or not reachable by staff and is therefore removed by staff or security.

**Foul Odor from room** – a strong unpleasant odor emanating from a student's room into the hall or building.

**Alcohol** – possession of alcohol on the student's person, in their room or on campus. Found during room routine room checks, or during an incident recorded by housing staff or security. Applies if the student is clearly intoxicated in the residence halls, causing a scene, or bothering other residents or staff. Campus Community Service will include tasks and jobs assigned to the residence halls or public campus building.

**Drugs, Marijuana and/or paraphernalia** – drugs or paraphernalia found during routine room checks, or during an incident as recorded by housing staff or security. Campus Community Service will include tasks and jobs assigned to the residence halls or public campus building.

**Noise Violation** – complaints of loud music, voices, running in halls, sports in halls, etc, after or during quiet hours. Quiet hours are 10:30pm to 8:00am.

**Candles/Open Flame** – no candles or open flames of any kind are allowed on campus or in the residence halls, not even as decoration. First offense will be a warning and confiscation of item. Subsequent offense will result in a monetary fine and confiscation.

**Prohibited Appliance** – a small appliance found in a student's room that they have not received permission to have.

Students are responsible for any damages incurred due to small appliances. Prohibited appliances include: toaster ovens, hot plates, air fryers, slow cookers, rice cookers, quesadilla makers, Foreman grills, flat top grills, etc; anything

that 'heats', and could potentially be a fire hazard. Prohibited appliances will be confiscated and returned at the end of the spring semester. Students are allowed to use and store personal appliances in the student kitchens in Milligan and Mead Hall.

**Door Propping** – propping a 'fob' active door open on any DCB building when it is supposed to be locked, or propping open any residence hall door without permission.

**Smoking** – smoking and possessing cigarettes, cigars or vaping products on campus grounds.

**Window Screen Removal** – removing or tampering with the window screens on the windows in the residence halls. Any student caught climbing on to the roof of any building, or exterior ledge will be sanctioned.

**Smoke Detectors** – covering or tampering with the smoke detectors in the residence halls or residence hall rooms.

**Room Checks** – if during routine room checks the student's room was found to have an excessive amount of garbage, foul odor, appliance in need of cleaning or posing a fire hazard. Follow up required in writing to each room check warning.

**Common Damage** – it is discovered that there has been damage done to any part of the student's room, common area, or bathroom. This also includes damage to any public area of the campus, residence halls or grounds. Damages are paid at \$20/hour for repair plus materials, or the cost of replacement for damaged property. Common damage may apply to a student who causes damage to college property while visiting a residence hall, or damage caused by a campus visitor; assessed to the resident they were visiting.

**Theft** – if it is unequivocally determined that a student has stolen belongings or property from another student, and a complaint has been filed, the student who committed theft will return all items, pay restitution if appropriate and will complete campus community service. If a second offense occurs, the student who committed theft will be evicted from the residence halls. No refunds will be given for housing or meal plans.

**Kitchen Cleaning** – Kitchens are provided in Milligan Hall and Mead Hall for student use. Students using the kitchens are responsible for cleaning it after use. Failure to clean up after use will result in a cleaning fine. Repetitive abuse of the kitchen will result in suspension of privileges. Gross Hall residents are permitted to use either kitchen with RA permission.

**Unauthorized Storage** – students who leave belongings in the residence halls over summer break without permission will be charged a \$50 storage fee. If arrangements are not made to remove the items, they will be discarded or donated after 30 days.

**Unauthorized Animal** – students found in possession of an unauthorized animal or pet will be fined and immediate arrangements for the animal must be made. After the third infraction the student will be evicted from the residence hall.

**Eviction** – students evicted from the residence hall due to repeated rule violations will not receive a refund for room or board charges.

**Room Changes** – students who move to another room without authorization from the Director of Student Life will be assessed a fine. They may be asked to return to their assigned room or may be allowed to remain in the new room if the circumstances warrant it.

**Improper Check Out/Room Cleaning** – students who vacate the residence halls without checking out of their room with an RA are subject to a fine. If a student did not return their key or fob they are subject to an additional \$25 replacement fee. Students will be fined for not properly cleaning their room upon check out. Proper cleaning includes; sweeping, mopping, wiping all surfaces, leaving furniture in its original place, removing all personal belongings and garbage.

**Dish Washing in Room Sinks** – rooms in Gross Hall and Milligan have bathroom sinks. Dishes and cooking utensils are not to be washed in these sinks and can lead to plumbing obstructions. Food, oil, grease and crumbs are not to be rinsed down bathroom sinks. Sinks plugged due to washing inappropriate items in the sink and down the drain will result in a \$100 fine to remove the clog and additional hourly maintenance charge if a commercial service is required.

**On Campus without Permission/Late Stay** – Students are required to vacate the halls and properly check out of their rooms at the end of the spring semester. Students are required to vacate the halls no later than 5:00pm Sunday following graduation. Students who require an extended period must get approval from the Director of Student Life

prior to graduation day and sign a Summer Housing Contract. Students found in the halls past 5:00pm Sunday without permission will be subject to a fine. Students will be charged \$15/day for extended approved stays.

The Residence Halls close over winter break, and students are not allowed to remain in the halls without permission.

Students found in the halls without permission after the halls close are subject to a fine and immediate removal from the halls for the duration of the break. Daytime visitors and overnight guests are not allowed in the halls over winter or

summer break without permission from the Director of Student Life or Head Resident. Students caught with unapproved visitors or guests will be asked to vacate the halls for the remainder of the break and be assessed a visitation violation sanction.

**Loaning out Key Fob** – students are not allowed to loan out their key or fob to another person. Any students caught using another person’s key and fob, and/or loaning them out will be fined.

**Damaged Pool Cue or Ping Pong Paddle** – a student will be responsible for the replacement cost of a pool cue or ping pong paddle if they are found to have damaged or broken the cue from improper or irresponsible use. Students will be responsible for the cost of all damaged game equipment if not specifically listed, or more in store than what is listed.

**Fire Alarm** – failure to respond appropriately and timely to a fire alarm. Students are required to vacate all buildings during a fire alarm. Students who remain in their rooms or refuse to leave the building will be subject to a monetary fine.

**Laundry Violation** – Laundry machines are provided at no cost to DCB students who reside on campus. Off campus students and guests are not allowed to use laundry facilities. Off campus students will be sanctioned, residents will be sanctioned for allowing guests to use facilities.

**Window Violation** – open window during winter.

**Failure to Use Guest Bathrooms** – Guest bathrooms are available for visitor use in each hall. Guests and visitors of the opposite sex are prohibited from using Hall bathrooms. Residents found allowing a guest of the opposite sex to use hall bathroom will face disciplinary action. Men cannot use the hall bathrooms in Gross Hall, women cannot use the hall bathrooms in Mead Hall. Milligan Hall is exempt from this rule. Overnight visitors are welcome to shower in the locker rooms in Thatcher Hall.

***All students residing on campus are responsible for knowing and understanding the rules and regulations. They are responsible for their visitors and ensuring they adhere to campus rules and regulations.***





# Student – Athlete Handbook



2024-2025

Revision August 2024

## Table of Contents

	Page
Welcome	2
Dakota College Mission	3
Dakota College Vision	3
Dakota College Core Values	3
DCB Athletic Dept Mission	3
NJCAA Mission	3
MonDak Mission	3
ACHA Mission	3
Philosophy Statement	3
Definitions	4
Student-Athlete	
Non-Discrimination Statement	5
Eligibility of Competition	6
Sports Medicine Mission	6
Sports Medicine Policy	6
Student-Athlete Conduct and Appeal Procedures	6
Team Travel Policy	8
Code of Conduct	9
Hazing Policy	9
Alcohol, Tobacco, and Illegal Drug Use Policy	10
Use	
Health Risks	
Testing Procedures	
Disciplinary Action	
Appeal Procedures	
Appendix	12
Banned Drugs	
Concussion Safety Protocol	
Campus Policy Links	
Drug Testing Form	
Refusal Form	
Urine Collection Guidelines	
Prospective/current Student-Athlete,	

Welcome to Dakota College at Bottineau (DCB) Athletics. This handbook has been created for you, the student-athlete, as a way to provide important information regarding our respective athletic programs and the expectation of being a DCB student-athlete. The information contained in this handbook will serve as a guide to your success both in the classroom and within your sport. Abiding by these guidelines and policies you will play an important role on our campus as a student-athlete, an ambassador for the school, and a role model within the community. I trust you will represent DCB, our athletic department and yourself with the utmost courtesy and respect.

Respectfully,

Carolyn Rygg  
Athletic Director  
carolyn.j.rygg@dakotacollege.edu

**Dakota College at Bottineau Mission:**

Dakota College at Bottineau provides a quality education in a caring environment.

**Dakota College at Bottineau Vision:**

Dakota College at Bottineau adapts to the changing educational landscape to empower students and impact communities.

**Dakota College at Bottineau Core Values:**

Dakota College at Bottineau is student-focused and community-centered. We value: Integrity, Engagement, Inclusion, and Passion.

**Athletic Department Mission**

The Dakota College at Bottineau Athletic Department provides an opportunity for student-athletes to continue their athletic careers while working on their higher learning. The athletic department values each student-athlete's future while upholding the campus mission, vision, and core values.

**National Junior College Athletic Association Mission**

It is the mission of the NJCAA to foster a national program of athletic participation in an environment that supports equitable opportunities consistent with the educational objectives of member colleges.

The NJCAA's mission is to promote and foster two-year college athletics. Unlawful discrimination is incompatible with this mission and detracts from the organization's goal of promoting healthy and fair competition. The NJCAA prohibits unlawful discrimination based on sex, race, color, national origin, ancestry, disability, religion, creed, sexual orientation, age or any other characteristic protected by applicable law in the NJCAA's governance, programs, regulations and employment practices.

**Mon-Dak Athletic Conference Mission**

The Mon-Dak Athletic Conference is an alliance of eight state, community, and technical colleges located in North Dakota and Montana. The mission is to provide an intercollegiate athletic experience for student-athletes that is consistent with the purpose of higher education.

**American Collegiate Hockey Association Mission**

The American Collegiate Hockey Association's (ACHA) primary mission is to support the growth of collegiate hockey programs nationwide. The ACHA identifies standards, which serve to unite and regulate teams at the collegiate level.

The ACHA shall emphasize academic performance, institutional sanction, eligibility criteria, standards of play, and opportunities for national competition.

The ACHA promotes all aspects of collegiate hockey stressing the personal development of individual athletes as well as national recognition for member organizations.

**Philosophy Statement of Dakota College at Bottineau Athletic Department**

Intercollegiate athletics provides an important element to the educational process for many students at Dakota College at Bottineau. As a department, we adhere to and support the mission of the college. It is the mission of the Athletic Department to provide student-

athletes with an opportunity to compete successfully in an intercollegiate athletic program that is an integral part of their educational experience.

Dakota College at Bottineau is committed to providing our student-athletes with the opportunity for the best possible athletic and educational experience we can offer. We have an obligation to provide essential leadership by employing coaches who believe in the benefit of the game for the participants and whose interest is for their development as people as well as athletes. This includes a concern for the academic progress of student athletes, providing the opportunity to reveal their potential contribution for the team, and nurturing their values. Win or lose, student-athletes are encouraged to provide a winning effort, display sportsmanship, and demonstrate respect for all.

The student-athlete has the responsibilities to the athletic program and the college. The athletes must participate according to NJCAA as well as ACHA rules, regulations, policies, and also display loyalty and respect to their teammates, coaches, college, and community. They must comply with college and departmental policies, meet academic requirements, compete with honesty and good sportsmanship, and contribute to the best of their ability to the success of the team. It is the responsibility of all parties involved, including the studentathletes, coaches, and other administrators to ensure the continued quality of athletic programs at Dakota College at Bottineau.

#### **Definitions**

Student-Athlete will be defined as any current member of any intercollegiate program. Members of a program include but are not limited to varsity, red shirt, academically ineligible, injured, students receiving athletic related aid and/or using athletic-related services, and transfer student-athletes. A list of all team members of programs will be kept on file with the Athletic Director and varsity coach of their respective program.

## Non-Discrimination Statement

Dakota College at Bottineau (DCB) does not engage in discrimination or harassment against any person because of race, color, religion or creed, sex, gender, gender identity, pregnancy, national or ethnic origin, disability, age, ancestry, marital status, sexual orientation, veteran status, political beliefs or affiliations, or information protected by the Genetic Information Nondiscrimination Act (GINA); and complies with all federal and state non-discrimination, equal opportunity and affirmative action laws, orders and regulations, including remaining compliant and consistent with the Civil Rights Act, the Americans with Disabilities Act, the Rehabilitation Act of 1973, and Title IX of the Education Amendments of 1972. This policy on nondiscrimination applies to admissions, enrollment, scholarships, loan programs, participation in college activities, employment, and access to participation in, and treatment in all college programs and activities.

DCB prohibits retaliation against any individual or group who exercises its rights or responsibilities protected under the provisions of state law, federal law and/or DCB policy. Employees or students who violate this policy may face disciplinary action up to and including separation from DCB. Third parties who commit discrimination or harassment may have their relationships with DCB terminated and/or their privileges of being on college premises withdrawn.

Questions, comments, or complaints regarding sexual discrimination or sexual harassment may be directed to the Title IX Office. All other forms of discrimination or harassment may be directed to the appropriate associate dean or director of human resources. Complaints may also be filed with the U.S. Department of Education, Office for Civil Rights.

Laura Halvorson  
Title IX Coordinator  
Thatcher Hall 1124  
105 Simrall BLVD  
Bottineau, ND 58318  
701-228-5680  
[laura.halvorson@dakotacollege.edu](mailto:laura.halvorson@dakotacollege.edu)

[Corey Gorder](#)  
Associate Dean for Student Services  
Thatcher 123  
105 Simrall BLVD  
Bottineau, ND 58318  
701-228-5451  
[corey.gorder@dakotacollege.edu](mailto:corey.gorder@dakotacollege.edu)

Kayla O'Toole  
Associate Dean for Academic Affairs  
Nelson Science Center 102  
105 Simrall BLVD  
Bottineau, ND 58318  
701-228-5479  
[kayla.otoole@dakotacollege.edu](mailto:kayla.otoole@dakotacollege.edu)

Sara Abrahamson  
Director, Human Resources  
500 University Ave W  
Minot, ND 58707  
701-858-4610  
[hr@minotstateu.edu](mailto:hr@minotstateu.edu) or  
[sara.abrahamson@minotstateu.edu](mailto:sara.abrahamson@minotstateu.edu)

The Office for Civil Rights/Chicago  
U.S. Department of Education, Citigroup Center  
John C. Kluczynski Federal Building  
230 South Dearborn Street, 37<sup>th</sup> Floor, Chicago, IL 60604  
Telephone (312) 730-1560, FAX: (312) 730-1576  
TDD: (800) 877-8339, email: [OCR.Chicago@ed.gov](mailto:OCR.Chicago@ed.gov), website: [ed.gov/ocr](http://ed.gov/ocr)

## Eligibility for Competition

<https://www.njcaa.org/compete/faqs>

[https://www.achahockey.org/wp-content/uploads/sites/2/2021/07/ACHA\\_Manual-2020-21-Revised7\\_22\\_20\\_OFFICIAL.pdf](https://www.achahockey.org/wp-content/uploads/sites/2/2021/07/ACHA_Manual-2020-21-Revised7_22_20_OFFICIAL.pdf)

### Sports Medicine Mission

Sports medicine coverage for the student-athletes of Dakota College at Bottineau via injury/illness prevention and wellness promotion, examination, assessment, and diagnosis, immediate and emergency care, therapeutic intervention, and healthcare administration and professional responsibilities in order to give the Lumberjack's and Ladyjack's medical care. The athletic trainer is also a resource to further education of the domains for the entire college community.

### Sports Medicine Policies

A certified athletic trainer provides services for DCB student-athletes through Trinity Health Sports Medicine. Trinity Health Sports Medicine is the medical provider of DCB athletics. The following information is needed prior to the beginning of participation of Dakota College at Bottineau athletics. Failure to have this information on file with the Athletic Department will delay the student-athlete from participating. For liability reason, the student-athlete will not be allowed to participate without a complete file.

#### Physicals

The NJCAA requires all student-athletes to have an athletic physical exam each year of participation. This is to be completed after the national championship of the previous year of the respective sport and before the first practice of the respective sport. A **complete physical signed** by a physician, physician assistant, or nurse practitioner. These forms can be found on the Dakota College at Bottineau website. [dcbjacks.com] **Medical History**

A medical history form must be filled out each year prior to the athletic season. First year studentathletes will need family medical history as well as personal medical history including dates of major injuries and surgeries. An updated form will be used after the first year to document any injuries that have occurred during the previous years.

#### Insurance Information

Student-athletes at DCB must have medical or health insurance prior to the start of practices and throughout the duration of the academic year in which they participate or workout. Documentation of medical or health insurance must be updated annually and must include provider, policy number, group number, and policy holder. Proof of medical or health insurance will be kept on file. Use the following link for international student insurance.

<https://www.dakotacollege.edu/admissions-financial-aid/international-students/international-insurance>

*For out-of-state athletes the use of Medicaid or Medicare or an affiliate is not usable here, most states are not approved to be used in North Dakota. So, if you are currently on either of these coverage plans you will need to make prior arrangements.*

### Student-Athlete Conduct and Appeal Procedures

Any student-athlete or student associated with the athletic department that believes they have been unjustly accused of allegations or violations resulting in suspension and/or dismissal from an athletic team has the right to file an appeal with the Athletic Director. Upon review of the appeal, the Athletic Director shall determine if the appeal is legitimate and if further action is appropriate. If the appeal is legitimate and further action is

appropriate, the Athletic Director shall notify the Athletic Department Student Conduct Appeals

Committee. This committee provides a student with the right of due process. The Athletic Department Student Conduct Appeals Committee shall be composed of the Athletic Director, two head coaches, one faculty representative, and two students (one male and one female; one athlete and one non-athlete) as chosen by the Athletic Director. The head coaches serving on this committee cannot be directly involved with the sport for which the appealing student was a member. Likewise, the student-athlete serving on this committee may not be involved the sport for which the appealing student was a member. This committee will be formed and activated by the Athletic Director as needed.

An athlete that believes they have been unjustly suspended or dismissed should make every attempt to resolve the dispute with the head coach. If the two parties cannot resolve their differences, the following procedure shall be followed.

Step 1: The student-athlete will meet with the Athletic Director to file a formal written appeal. Step 2: If possible, the Athletic Director will do everything within their power to resolve the dispute. If the dispute cannot be resolved and the Athletic Director determines that the student-athlete has a legitimate appeal, the Athletic Director shall inform the head coach and Athletic Department Student Conduct Appeals Committee of the appeal.

Step 3: Within three days after being notified of the appeal, the head coach will submit to the Athletic Director a statement providing evidence supporting their decision for the suspension/dismissal. A copy of this statement will be provided to the appealing student-athlete and to each member of the Athletic Department Student Conduct Appeals Committee.

Step 4: On behalf of the Athletic Department Student Conduct Appeals Committee, the Athletic Director shall determine a date/time to hold a hearing that conducive to all parties involved. The Athletic Director shall preside over the appeal hearing but is a non-voting member in the committee's ruling.

Step 5: The head coach will meet with the Athletic Department Student Conduct Appeals Committee to formally present the reason(s) for the suspension or dismissal.

Step 6: Following the head coach, the appealing student-athlete will meet the Athletic Department Student Conduct Appeals Committee to formally present the reason(s) why they should not have been suspended or dismissed.

Step 7: Upon formally hearing both sides of the dispute and reviewing all evidence in the case, the Athletic Department Student Conduct Appeals Committee shall make a ruling on the appeal by casting a secret ballot. The committee's final ruling shall be determined by a majority vote.

Step 8: The ruling of the Athletic Department Student Conduct Appeals Committee shall be presented to the Athletic Director. Upon receiving and reviewing the final ruling of the Athletic Department Student Conduct Appeals Committee, the Athletic Director shall make the final decision on the appeal.



### **Team Travel Policy**

Due to the location of DCB and their ACHA and NJCAA affiliation, our athletic teams are required to travel extensively during the respective sports season. During the time a team is away from campus, all college rules and policies apply since it is a DCB sanctioned event. In addition, coaches are responsible for the safety and conduct of the student-athlete and all team members. Unless there is justification for doing otherwise (with prior approval of the Athletic Director), the following policies will be adhered to:

1. When a team travels by bus or in a single vehicle which carries the team, a coach will ride that bus or vehicle to provide control and assistance should any situation occur which requires action by a college employee.
2. When there is a caravan of two or more vehicles leaving a common site at the same time, those vehicles will travel together to the destination in order to provide assistance, if needed and safety for the group.
3. Student-athletes will accompany the team to and from athletic events unless the coach is informed by a parent or guardian that said student-athlete will be with parents or guardians.
4. Student-athletes shall not make long distance calls or any other purchases that may be billed to their hotel/motel rooms. According to NJCAA regulations the college is not permitted to pay for these charges.
5. Head coaches will identify their rules and expectation for road trips to team members at the beginning of the respective sport season.
6. Student-athletes are not allowed to have persons not associated with DCB into their rooms without permission from their respective Head Coach.

If there are questions or situations which may be specific to a particular team, they should be discussed with the Athletic Director.

## **Code of Conduct**

Student-athletes enrolled at DCB are expected to uphold courtesy and respect that reflects well upon themselves, their families, and DCB. Student-athletes are expected to abide by the guidelines and laws of DCB, and the NJCAA or ACHA. Failure to do so can result in suspension from their team and/or the college. Studentathletes on scholarship risk having part or all of their scholarship monies revoked for any code of conduct infraction.

Each coach at DCB has a set of team training/conduct rules. DCB administration and the athletic department fully supports these, and any disciplinary action taken by a coach. Situations involved local law enforcement will be evaluated on a case-by-case basis. Final determination of an individual will be impending court/university action.

In addition, student-athletes are expected to uphold the code of conduct for their specific association.

## **Hazing Policy**

DCB is an institution of higher education committed to excellence in education, and of the people in the community, state, and nation. A part of that mission is fulfilled by the college's commitment to the development of students through academic, co-curricular and extracurricular activities. In keeping with the commitment to a positive academic and social environment, and in accordance with the North Dakota University System and State Board of Higher Education, DCB unconditionally opposes any hazing. DCB's goals is that every student on campus would be free from the humiliation and danger of hazing.

DCB interprets hazing as any willful act done by one or more individuals whether physical, mental, emotional or psychological, which subjects another person, voluntarily or involuntarily to anything that may abuse, mistreat, degrade, humiliate, harass, ridicule, intimidate, or endanger them, or which may in any fashion compromise their inherent dignity as a person. Such activities and situations included, but are not limited to: 1. Physical punishment, contact, exercise, or sleep deprivation which causes excessive fatigue and/or physical and psychological shock

2. Coerced or forced consumption of food, drink, alcohol, tobacco, and/or illegal drugs
3. Coerced or forced transporting of individuals
4. Public humiliation, ridicule, or indecent exposure
5. Coercing or forcing illegal acts
6. Coercing or forcing acts that are immoral and/or unethical
7. Blocking an individual's academic, athletic, health, or personal success
8. Personal servitude
9. Mental harassment
10. Sexual harassment
11. Deception
12. Threat of social exclusion
13. Any activity that involves the use of alcohol or any controlled substance in accordance with Dakota College at Bottineau's policy on alcohol, tobacco, or drugs
14. Any activity that is not in accordance with Dakota College at Bottineau's established policies

Typically, hazing has occurred in connection with initiation activities. Even if an initiation activity is optional, an individual may not feel empowered to refuse participation. Should hazing occur in connection with any team or individual initiation activity, disciplinary action may be taken by the athletic department as well as the college. This action will be determined by the same members comprising the Athletic Department Alcohol, Tobacco, and Illegal Drug Policy Committee. Established procedures will be

followed in this disciplinary action. If a student-athlete chooses to file a grievance against an individual or group, it should be reported to the Athletic Director or to the Associate Dean of Student Services. If requested, every effort will be made to protect the identity of the person(s) reporting the grievance. It is possible that a student may initially voluntarily agree to participate in an initiation activity that they may later decide was an unacceptable hazing activity, and, therefore, that student still has the right to file a complaint. It should be noted that a grievance need not be filed for disciplinary action to occur.

It is also a person's responsibility to report anticipated hazing activities to the Head Coach or Athletic Director to avoid potential problems.

#### **Alcohol, Tobacco, and Illegal Drug Use Policy**

The DCB Athletic Department recognizes the use of alcohol, tobacco, and illegal drugs as a significant problem on college campuses, and for many student-athletes, resulting in negative effects on behavior, relationships, academic performance, and the overall learning environment. The use and misuse of these substances also affect athletic performance as well as team morale. Although we realize the problems with alcohol and other drugs are not confined to student-athletes, they are special concern to us because of the high visibility and additional social pressures athletes often face as representatives of our institution.

The DCB alcohol, tobacco, and illegal drug use policy applies to all student-athletes throughout the academic year as written in the college handbook. Violations will be handled by the college according to DCB policy and discretion of the Athletic Director along with the Head Coach who have the right to impose additional penalties if deemed appropriate.

Because athletes have a responsibility to themselves and their teammates to report to practice and competition and participation at 100%, the following policy pertains:

- Absolutely no use of illegal drugs or controlled substances at any time on or off campus during the season or out of season
- No alcoholic beverages are allowed at practice, games, or during travel when representing Dakota College at Bottineau
- Excessive use of alcohol at any time is strongly discouraged
- Coaches have the discretion to establish more stringent team policies regarding alcohol and use
- Student-athletes must also follow all local, state, and federal laws regarding the use of alcohol, tobacco, and controlled substances
- The use of tobacco, in any form, is strongly discouraged
- No tobacco is allowed at practice, games, or during travel when representing the College

Other situations that may exist within the athletic program where athletes are expected to act responsibly throughout the academic year. Among these are:

- There can be no use of alcohol, tobacco, or other drugs at team meetings, dinners, or banquets
- No alcohol, tobacco, or other drugs can be provided to or made available to recruits and prospective students
- Alcohol related concerns and testing is a case by case basis. Athletic department staff reserve the right to test for alcohol if they are concerned for a student-athlete's safety or well-being of those around them including but not limited to

fellow teammates and other team members. - Alcohol infractions on campus will be determined by the residence life staff.

### Health Risks related to the use of Alcohol, Tobacco, and Illegal Drugs

Many known health risks are associated with the use of drugs and alcohol. Health risks range from motor coordination and decreased reaction time to more severe risks of cancer, heart attacks, and even death. This is not a limited statement regarding the health risks of alcohol, tobacco, and illegal drugs.

Use is defined as:

- Arrest for an alcohol or drug related charges offense
- Possession of illegal substances or paraphernalia on or off campus
- Illegal use of legal substances (i.e. use of prescription medications not prescribed specifically to the user or the sharing of prescription medications). Student-athletes must be able to produce proof of prescription
- Verifiable knowledge of use or possession of illegal substances or NJCAA Banned Ergogenic aids presented by/to any coach, athletic trainer, or athletic director
- Any student-athlete whose ability to practice and to compete has been impaired as a result of consumption of alcohol or substances, in the opinion of their coach
- Positive rapid one-step screening test and laboratory confirmation of random, reasonable suspicion, and/or mandatory drug screening.

Prevention:

- Randomized drug screening will be scheduled for student-athletes each semester. **By signing the consent form at the end of this policy, the student-athlete understands that they may be required to submit to random and/or unannounced drug tests. Refusal to submit, which includes failing to provide a sample, failing to cooperate with any part of the testing procedure, or leaving the testing site early, will be considered an immediate offense and will result in disciplinary action. The consent form will be signed and return to the office of the Athletic Director. No student-athlete will be allowed to practice or compete until the consent form is signed.**

### Testing Procedures

- 10% of each team will be tested each semester
- Student-athlete will be notified within 24 hours of their analysis
- Appendix C shows step by step procedure
- DCB Athletic Director and respective athletic team Head Coach will be notified of all results
- Student-athlete who has tested positive will be notified of results by AD and/or coach

### Disciplinary Action

*First offense:* There will be a suspension of 10% of the season's games. Upon return the student-athlete must submit a negative drug test. Further penalties may be warranted by student-athlete in-season Head Coach or Athletic Director.

*Second offense:* There will be a suspension of 25% of the season's games. Upon return the student-athlete must submit a negative drug test. A penalty of loss of scholarship (prorated to date of suspension). Further penalties may be warranted by student-athletes in-season Head Coach or Athletic Director.

*Third offense:* dismissal from the team and loss of any and all athletic related scholarship(s). Student-athletes at Dakota College at Bottineau are expected to know and follow ALL applicable law and policy. This policy represents a minimum requirement by the athletic department, it is not meant to limit standards that coaches may have within their respective programs. *\*All positive tests will be billed to student-athlete*

Appeal Procedures can be found under the Student Conduct policy above.

**I have read and understand the Code of Conduct, the Alcohol, Tobacco, and Illegal Drug Use Policy, and the Hazing Policy of Dakota College at Bottineau and agree to abide by these policies and report any violation or anticipated violation of these guidelines to the Athletic Director or Associate Dean of Student Services.**

**Student-Athlete's name:** \_\_\_\_\_ **Sport:** \_\_\_\_\_

**Student-Athlete's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Appendix

### Concussion Safety Protocol

A copy of the concussion safety policy can be found in the office of the Certified Athletic Trainer (Thatcher 158). The policy can also be found on the Dakota College at Bottineau website (dcbjacks.com).

#### Return to Play Guidelines by Trinity Health Sports Medicine

1. No Activity/Symptom limited Activity
  - a. Symptom limited activity and cognitive rest
  - b. Patient must be 24 hours symptom free or return to baseline prior to progressing
2. Light Aerobic exercise
  - a. Walking, swimming, and stationary cycling
  - b. Keeping intensity less than 70% maximum permitted heart rate
  - c. No resistance training
3. Sport-specific exercise
  - a. Drills specific to designated sport that do not include head impact activities
4. Non-contact training drills
  - a. Progress to more complex training drills specific to sport
  - b. May start progressive resistance training
5. Full-contact practice
  - a. Following medical clearance, participate in normal training activities
6. Return to sport
  - a. Normal game play Campus Related

Links <http://www.dakotacollege.edu/handbook/>

<https://www.dakotacollege.edu/student-life/safety/title-ix>

<https://www.dakotacollege.edu/flipbooks/residence-life/>

<https://www.dakotacollege.edu/application/files/2415/7566/6336/FS.901.1.pdf>

#### Banned Drugs

The NJCAA has partnered with Drug Free Sport alongside but not limited to NCAA and NAIA. The following classes are within the ban:

1. Stimulants
2. Anabolic agents
3. Alcohol and beta blockers (banned for rifle only)
4. Diuretics and masking agents
5. Narcotics
6. Cannabinoids
7. Peptide hormones, growth factors, related substances, and mimetics
8. Hormone and metabolic modulators (anti-estrogens)
9. Beta-2 agonists

#### Substances and Methods Subject to Restrictions

1. Blood and gene doping
2. Local anesthetics (permitted under some conditions)
3. Manipulation of urine samples
4. Beta-2 agonists (permitted only inhalation with prescription)

5. Tampering of urine samples

*It is the student-athlete's responsibility to check with the appropriate or designated athletics staff before using any substance.*

Dakota College at Bottineau  
Drug Test Results

Student-athlete name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender: Male \_\_\_\_ Female \_\_\_\_

Head Coach: \_\_\_\_\_

Address:

\_\_\_\_\_

Phone number: \_\_\_\_\_

Medications and supplements currently taken:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Student Signature \_\_\_\_\_

Test	Normal	Result
Temperature	90-100F	
Specific Gravity	1.003 – 1.025	
Nitrogen	0mg/dL – 20 mg/dL	
Marijuana (THC)	Negative	
Cocaine (COC)	Negative	
Amphetamines (AMP)	Negative	
Opiates (OPI)	Negative	
Methamphetamines (mAMP)	Negative	
Benzodiazepines (BZO)	Negative	

Signature of Institutional Collector \_\_\_\_\_ Date \_\_\_\_\_

Signature of Institutional Processor \_\_\_\_\_ Date \_\_\_\_\_



Dakota College at Bottineau  
Refusal of Drug Testing Form

I, \_\_\_\_\_, refuse drug testing. I understand that refusing to drug test will result in a violation of the Dakota College at Bottineau Substance Abuse Policy for student-athletes and that disciplinary actions will be taken for my refusal. I understand that I may appeal these actions as defined in the appeal process of the Dakota College at Bottineau Substance Abuse Policy.

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Witnessed By: \_\_\_\_\_ Date \_\_\_\_\_

## Appendix C

### Urine Collection Guidelines

1. Only those persons authorized by the institution will be allowed in the collection room.
2. When arriving to the collection room, the student-athlete will provide photo identification. The institutional collector will then print his or her name and arrival time on the Roster Sign-in form.
3. The student-athlete will select a specimen collection container from a supply of such then be escorted by the collector to the restroom to provide a specimen.
4. The student-athlete will be responsible for keeping the collection container closed and controlled.
5. Fluids given to the student-athlete who has difficulty voiding must be from sealed containers (approved and given by the institutional collector) and will be opened and consumed in the collection area.
6. If the specimen is incomplete, the student-athlete must remain in the collection room until the sample is completed. During this period, the student-athlete is responsible for keeping the collection container close and controlled.
7. If the specimen is incomplete and the student-athlete must leave the collection room for a reason approved by the institutional collector, the specimen must be discarded.
8. Upon return to the collection room (within 1 hour) the student-athlete will begin the collection procedure again.
9. The institutional processor will secure the cap of the specimen container. Then he/she will date and initial the security seal and place it over the cap. The institutional processor will peel off the label to reveal the results. Adulteration results must be read within 2-5 minutes from voiding/collection of the sample. The test results must be read within 5 minutes after collection.
10. Once an adequate volume specimen is provided; the institutional collector will escort the student-athlete to the specimen processing table.
11. The urine specimen temperature will be read within 2-4 minutes after the student-athlete voided by the institutional processor. If any of the testing guidelines are outside the normal range, no value will be recorded, the specimen will be discarded by the student-athlete with the institutional collector observing. The student-athlete must remain in the collection room until another specimen provided.
12. Once the specimen processor has determined the specimen has an appropriate temperature and specific gravity the sample will be processed.
13. The specimen process must then collect all necessary signatures and dates/times where indicated on the result report form.
14. The student-athlete is released by the institutional collector.
15. If the student-athlete does not comply with the collection process, the institutional collector will notify the appropriate institutional administrator(s).



DAKOTA COLLEGE AT  
BOTTINEAU



## Annual Security and Fire Safety Report 2023-2024

2023-2024 Annual Security and Fire Safety Report – Dakota College Student Housing Department

## Table of Contents

Quick Reference and Contact Information - 4
Crime/Emergency Reporting and Campus Response - 4
Response to Reports - 5
Responsibilities of the DCB Community for their own personal safety and security and the safety and security of others - 7
Statistical Disclosure of Reported Incidents -
Reporting a Crime to the DCB Security Department and/or Bottineau County Sheriff's Office -7
DCB Security Authority and Jurisdiction -7
Security of and Access to Campus Facilities -8
DCB's Working Relationship with the Bottineau County Sheriff's Office- 9
Campus Map- 10
DCB Safety Training -10
Timely Warning Notices – Notifying the DCB Campus Community about crimes- 10
Daily Crime and Fire Log- 12
Preparation of Annual Disclosure of Crime Statistics and Clery Compliance- 12
Campus Crime Statistics for DCB- 15, 16
Emergency Response and Evacuation Procedures- 17
Emergency/Immediate Notifications- 20
Alcohol/Drug Policies- 22
Alcohol and Other Drugs (AOD) Education and Outreach- 22
DCB's Response to Sexual and Gender Based Harassment and Interpersonal Violence- ( <i>including Title IX</i> ) 24
Sex Offender Registry and Access to Related Information- 64
Residence Life and Housing Safety Policies- 65
Training of Residence Hall Staff- 70
Firearms and Weapons Policy- 70
Missing Student Notification Procedures and Policies- 71
Emergency Medical Response Procedures- 72
Crime Prevention, Fire Safety, and Safety Awareness Programming- 72
North Dakota Hazing Law- 73
Annual Fire Safety Report- 73
Emergency Building Evacuation Drills- 77
Fire Safety Systems – Residence Halls- 77

## Dakota College at Bottineau 2023-2024 Annual Security and Fire Safety Report

Dakota College at Bottineau and its Housing Department are committed to ensuring a safe and secure campus for all students, staff and faculty.

Dakota College at Bottineau is student-focused and community centered. DCB values Integrity, Engagement, Inclusion and Passion. DCB provides a quality education in a caring environment and adapts to the changing educational landscape to empower students and impact communities. DCB first opened its doors in 1906 as the North Dakota School of Forestry. DCB is fully accredited by the Higher Learning Commission and offers over 30 Career and Technical Education programs, as well as Liberal Arts and Transfer Programs.

DCB prioritizes creating a safe learning and working environment for our campus community. DCB Housing Department and Plant Services Department are primarily responsible for overall safety and security on campus. Our offices work closely with local law enforcement at the Bottineau County Sheriff's Office to ensure we are proactive in providing a safe environment on campus. We ask all students, staff and faculty to be observant and report any safety related concerns to DCB Housing or Plant Services.

The Annual Security Report provides a detailed summary DCB's efforts to keep our campus safe and provides information regarding resources available to students and employees. The information in the Annual Security Report provides details regarding campus criminal activity for each of the last three years.

If you have any questions, concerns or suggestions regarding this publication, please contact DCB Housing at (701) 228-5657.

Sincerely,

Bridget Gustafson

Director of Student Life and Housing

## Quick Reference Contact Information

# In Case of Emergency – Call 911

## On Campus Student Help (Non-Emergency)– (701) 480-9262

Bottineau County Sheriff’s Office (non-emergency) – (701) 228-2740

DCB Housing and Student Life – Bridget Gustafson – (701) 228-5657 – Thatcher Hall Student Services

Title IX Office – Laura Halvorson – (701) 228-5680 – Thatcher Hall Library

DCB Athletic Director and Athletic Trainer – Carolyn Rygg – (701) 228-5620 – Thatcher Hall 158

DCB Plant Services Director (Facilities Management)– Christopher Nero – (701) 228-5461 – Arntzen Building

Bottineau Family Crisis Center (701) 228-2028 – 509 Main Street, Bottineau, ND. 58318

SMP Health Center/St. Andrew’s Clinic – (701) 228-9400 – 314 Ohmer Street, Bottineau, ND. 58318

Pyramid Health and Walk-In Clinic – (701) 534-0109 – 516 Main Street, Bottineau, ND. 58318

ND Helpline, Suicide Prevention and Crisis Referral (800) 472-911

or dial 211 ND Poison Control (800) 222-1222

## Crime/Emergency Reporting and Campus Response

### Reporting Crimes and Other Emergencies

Campus community members – students, staff, faculty and visitors are encouraged to report all criminal actions, emergencies, suspicious behavior, or other public safety related incidents occurring within DCB’s Clery geography to the DCB Housing or Plant Services Departments in an accurate, prompt and timely manner. DCB’s Clery geography includes:

- On campus property including residence halls, buildings, and/or facilities.
- Designated non-campus properties and facilities.
- All public property including sidewalks, streets, parking facilities and city parks that are within the campus or immediately adjacent to and accessible from the campus or on-campus property/facilities.

DCB Housing and DCB Plant Services have been recognized as the official offices for campus crime and emergency reporting. DCB strongly encourages the accurate and prompt reporting of crimes.

Accurate and prompt reporting ensures DCB Housing and DCB Plant Services can evaluate, consider, and send timely warning notices, disclose crimes through ongoing disclosure processes such as the posting of crimes in the Daily Crime Log and accurately documenting reportable crimes in its annual statistical disclosure. DCB further encourages accurate and prompt reporting to DCB Housing and/or the BCSO when the victim of a crime elects to or is unable to make such a report.

This publication focuses on DCB Housing and DCB Plant Services because they have primary responsibility for patrolling the DCB campus and have been designated as the institution’s primary reporting structure

for crimes and emergencies. However, criminal incidents or incidents off campus can be reported to the Bottineau County Sheriff's Office. Additionally, DCB has identified a list of primary campus security authorities (CSA) to whom crimes or allegations of crimes can be reported.

### Primary Campus Security Authorities (CSA)

- Contact DCB Student Help at (701) 480-9262
- Report crimes and/or incidents in person to DCB Housing in Thatcher Hall – Student Services, Title IX Office – Thatcher Hall Library or DCB Plant Services – Arntzen Building. Dakota College at Bottineau – 105 Simrall Blvd, Bottineau, ND. 58318.
- Crimes or emergency situations can also be reported to the Bottineau County Sheriff's Office by calling 911 or dialing (701) 228-2740 for dispatch.
- Title IX report forms can be found on our website: <https://www.dakotacollege.edu/student-life/title-ix>
- DCB Housing/Security Incident forms can be found on our website: <https://www.dakotacollege.edu/faculty-andstaff/forms> (this form is for non-emergency or non-urgent reporting purposes)

### Response to Reports

DCB Housing Personnel are available 24/7 including holidays and periodic closures during severe storms or other unforeseen circumstances. DCB Housing Personnel are not available when the residence halls are closed for winter and summer breaks, and the halls have been vacated of all students. DCB Housing carries a department issued cell phone (701-480-9262) at all times to immediately respond to a call for service. DCB Housing Personnel will immediately respond or if appropriate contact the Bottineau County Sheriff's Office (BCSO) for response to campus. All reported crimes will be investigated by DCB unless a crime of violence against a person occurs. If appropriate, these crimes will be immediately referred to the BCSO for investigation. All criminal information and evidence obtained by DCB will be forwarded to BCSO. DCB Housing works closely with local law enforcement assuring a complete and timely response to all emergency calls. Priority is given to crimes against persons and personal injuries. Crime victims are provided with on and off campus resource information as necessary and appropriate. DCB Housing and DCB Plant Services responds to and investigates all reports of crime and/or emergencies that occur within the campus Clery geography.

To obtain general information, campus community members should call DCB Housing or the Student Helpline at (701) 4809262. For emergency assistance community members should contact the Bottineau County Sheriff's department by dialing 911. All crimes should be reported to DCB Housing to ensure inclusion in the annual crime statistics and to aid in providing timely warning Campus Safety Alert notices to the community, when appropriate.

### Responsibilities of the DCB Community for their own personal safety and security and the safety and security of others

Members of the DCB community must assume responsibility for their own personal safety and the security of their personal property and are encouraged to assist others. The following precautions provide guidance:

- Report all suspicious activity to DCB Housing or DCB Plant Services personnel immediately.
- Never take personal safety for granted.
- Try to avoid walking alone at night.

- Limit alcohol consumption, and leave social functions that get too loud, too crowded, or that have too many people drinking excessively. Remember to call DCB Housing personnel or the DCB Student Helpline at the first signs of concern.
- Carry only small amounts of cash.
- Never leave valuables unattended or in an unlocked room.
- Always carry your keys and never lend them out to anyone.
- Lock bicycles and motorcycles, lock car doors and windows when leaving your car.
- Always lock the door to your residence hall room when you leave, and when you are sleeping at night and that windows are closed and locked. Do not prop interior or exterior residence hall doors.
- Do not leave valuables in your car, especially if they can be easily noticed.
- Inventory personal property and insure it appropriately with personal insurance coverage.

## How to Report a Crime

DCB encourages anyone who is the victim or witness to a crime to promptly report the incident to the appropriate authority. Timely reporting of a crime allows DCB to take immediate steps to prevent a similar crime and determine if notification should be made to the campus community. Community members, students, staff and faculty are encouraged to report all crimes and any public safety related incidents in a timely manner to DCB Housing or local law enforcement.

Where to report a crime:

- DCB Student Helpline – (701) 480-9262 available 24/7
- Bottineau County Sheriff’s Office 911 or call (701) 228-2740 for dispatch

## Limited Voluntary Confidential Reporting

DCB encourages anyone who is the victim or witness to any crime to promptly report the incident. Because many reports are public records under state law, DCB cannot hold reports of crime in confidence. Anonymous reports may be filed for statistical reporting purposes. A student’s privacy concerns are weighed against the needs of DCB to respond to certain incidents and crimes. To the greatest extent possible, all reports will remain private. In compelling situations, DCB reserves the right to take reasonable action in response to any crime report, and information may be shared with appropriate departments and agencies under a need-to-know basis when it pertains to investigative needs and safety concerns of the campus community.

The Memorandum of Understanding with the Bottineau County Sheriff’ office stipulates DCB will notify BCSO of all crimes occurring on campus or other Clery reportable geography unless state law allows anonymity.

## Confidential Reporting

If you are the victim or witness of a crime, and do not wish to pursue action within the campus or criminal justice systems, you should still consider making a confidential report. With your permission, a CSA may file a report that documents the details of the crime without revealing your identity. With this information, DCB can keep accurate records of crimes for inclusion in the Annual Security Report, and better identify crime trends. Students may make confidential reports to DCB’s Counselor assigned to the DCB Student Mental Health. Counselors, when acting in their capacity and function as DCB counselors, do not make identifiable reports of incidents to the Official On-Campus Resources unless the student specifically requests them to do so; however, DCB encourages counselors, if and when they deem it appropriate, to inform students they can report incidents of crime to a DCB CSA, which can be done directly or anonymously.



DCB Mental Health Counselor: An employee of an institution whose official responsibilities include providing psychological counseling to members of the institution's community, and who is functioning within the scope of his or her license or certification. A counselor may be considered a Campus Security Authority (CSA) if, while not acting as a counselor, a crime is reported to them.

### Anonymous Reporting

DCB Housing and/or DCB Plant Services, unless otherwise prescribed by law or as set forth within this Annual Security and Fire Safety Report, does not report anonymous incident reports. The only exception to this policy is addressed below.

*Facilitated Anonymous Reporting:* Students may request a DCB Counselor from Student Mental Health to facilitate anonymous reporting using an internal form designed to capture general details about the incident (date, time, location, and brief description of the incident type) to ensure a statistical disclosure in the college's Annual Security and Fire Safety report. DCB Counselors are not Clery Campus Security Authorities and are not required to report crimes if information about a crime is received while performing their official duties as a counselor.

### Statistical Disclosure of Reported Incidents

Incidents reported to DCB that fall into one of the required reporting classifications as defined by the Clery Act and North Dakota Uniform Crime Reporting (UCR) Act that occur within DCB's Clery geography will be disclosed as a statistic in the appropriate crime table within this annual security and fire safety report published by DCB Housing.

### Reporting a Crime to DCB Housing and/or DCB Plant Services and/or Bottineau County Sheriff's Department (BCSO)

A person reporting a crime to DCB has the right to report the crime to the BCSO by calling 911. DCB housing personnel regularly discuss this option with the victim of a crime and will assist the victim with that process.

### Off-Campus Crime

If the BCSO is contacted about criminal activity off-campus involving DCB students, the police may notify DCB Housing and/or DCB Plant Services. Students in these cases may be subject to arrest by the local police and the student may be held accountable in college disciplinary proceedings.

### Monitoring and Recording Criminal Activity at Non-Campus Locations of Student Organizations

In the 2023-2024 Academic year DCB did not have any non-campus locations of Student Organizations.

### DCB Housing Safety Authority and Jurisdiction

DCB Housing and DCB Plant Services are recognized as the primary campus departments responsible for providing safety and security for students, faculty, staff, and campus visitors. DCB Housing personnel are available 24/7 and is comprised of four Head Residents that live and work on campus. Head Residents are not licensed police officers and do not possess the power of arrest as defined by the North Dakota Century Code. DCB's jurisdiction encompasses its Clery geography which includes its main campus, including campus residence halls, buildings, and/or facilities. DCB Housing or DCB Plant Services Personnel will respond immediately, or as soon as possible, to any call for service. DCB Housing and DCB Plant Services personnel have been granted the authority by the college to enforce its policies, consistent with federal, state, or local law. DCB Housing personnel patrol the campus grounds via foot

and conduct regular interior and exterior checks of academic, administrative and residential buildings and respond to incidents occurring anywhere within the DCB's Clery geography.

### Primary Law Enforcement Agency

The Bottineau County Sheriff's Office (BCSO) is the primary law enforcement agency responsible for sworn police services for DCB. DCB and the BCSO have developed a Memorandum of Understanding that provides for immediate notification and response to all crimes, emergencies, or requests for service to campus. DCB Housing personnel and DCB Plant Services can respond to and investigate all reports of crimes and/or emergencies that occur on or near campus. Priority response is given to crimes against persons and personal injuries. It is the policy of DCB to report all criminal activity to the BCSO. We ask that all campus community members report any criminal activity to DCB Housing or DCB Plant Services, or

BCSO. To obtain general information or request any security or safety services, campus community members should call DCB Housing personnel at (701) 480-9262. For emergency assistance campus community members should call 911. When placing an emergency call, remember to stay on the line and wait for the dispatcher to end the call. If a sexual assault should occur on campus, DCB will offer the victim a wide variety of resources and services. This publication contains information about on and off-campus resources and services and is made available to the DCB campus community. The information regarding "resources" is not provided to infer that those resources are "crime reporting entities" for DCB. As mentioned, crimes should be reported to DCB Housing or DCB Plant Services to ensure inclusion in the annual crime statistics and to aid in providing timely warning Campus Safety Alert notices to the community, when appropriate. Security and Access to Campus Facilities

### Academic and Administrative Buildings

During normal business hours, the DCB campus is generally open and accessible to students, faculty, staff, and visitors. Most academic and administrative buildings are open during normal business hours (typically Monday through Friday, from 8 am to 5 pm, except holidays) and are secured at the designated closing time. Some highly utilized buildings are open on weekends to accommodate student's needs, depending upon class schedules, special campus event scheduling, and community usage. Individuals who wish to access DCB buildings or property during non-business hours or for special events should contact DCB Plant Services at (701) 228-5441 to schedule an event. Some Buildings have unique normal operating hours which may vary at different times of the year. In these cases, the building will be secured according to the schedules developed by DCB in coordination with the academic department utilizing the building. DCB Housing personnel patrol the campus grounds on foot and conduct regular interior and exterior checks of academic, administrative and residential buildings and respond to incidents occurring anywhere within the college's Clery geography. DCB Housing personnel can provide safety services when requested for students. To maintain the safety of DCB facilities, all access device holders (including employees, and students and personnel living in on-campus housing) are required to follow established security standards. The term "access device" refers to keys, fobs, and any other present or future device used on any approved access system at DCB. All access devices are the property of DCB and can be confiscated at any time. DCB Plant Services and Information Technology have the authority to change, add to, or alter any DCB approved and installed access system. This includes the installation of a hasp or padlock or privately supplied locking devices. These devices will be removed and the department or individual responsible will be charged for all costs incurred. DCB Housing personnel patrol the exterior and interior of each Thatcher Hall, the residence halls, Student Center and outdoor areas (parking lots) throughout the night. The campus video system allows for continuous monitoring in real time. The video system has a record and playback capability.

### Residence Halls

DCB Housing personnel live in assigned residence halls and apartments and are on call on a weekly rotating schedule, 24 hours a day. All DCB Housing personnel undergo annual comprehensive training in enforcing residence life policies. All residence hall entrance doors are locked 24 hours a day. Access to residence halls is restricted to DCB students and authorized staff, and the halls are secured by key and fob systems 24/7. Students who are residents of a specific residence hall have building access by use of key fob swipe system. Both on-campus and off-campus guests that are not residents of a specific residence hall must be escorted by a resident of that hall. Guests must register with the appropriate housing personnel. DCB Housing personnel and student resident assistants (support personnel) routinely patrol the interior common areas, spaces, and hallways of buildings equipped with such common spaces and regularly patrol the exteriors of all campus residence halls. DCB Housing and support personnel also enforce campus policies and security measures within the residence halls to achieve a community respectful of individual and group rights and responsibilities.

### Academic Break Housing

During the academic year, DCB is open during the holiday breaks. The residence halls may remain open to those students wishing to stay on campus, and with approval from DCB Housing. Students must turn off all lights, turn off alarms, empty wastebaskets, close and lock windows, and lock doors. Residence hall staff and college maintenance personnel may enter your room without notification during break times. Students are notified in the Residence Life Handbook that staff will enter rooms during academic breaks for room checks. Room checks are done by a minimum of two people to check for safety concerns such as open windows, activated smoke alarms, plumbing issues, and adequate room temperature. Policy violations are the responsibility of the assigned resident of each room. Students are encouraged to notify DCB Housing personnel if they are staying in a residence hall during an academic break. This allows efficient notification of any emergency.

### Safety Considerations Used in the Maintenance of Campus Facilities

DCB facilities and landscape are maintained in a manner that minimizes hazardous and unsafe conditions. The following guideline are used to maximize safety for all and still provide convenient access to buildings:

- Keys and fobs are issued to authorized staff, faculty and students.
- Exterior building doors are prohibited from being propped when the doors are locked.
- Building evacuation is mandatory for all fire alarms.
- Video security cameras are positioned to monitor all exterior doors and parking lots.
- Lighting on campus is continuously evaluated for safety purposes and more added when needed.
- Parking lots and pathways are illuminated with lighting.
- Head Resident and Student Resident Assistant evening rounds.
- Evening patrol by the Bottineau County Sheriff's Office.
- Staff, faculty and students who encounter persons who behave in a suspicious manner or are involved in suspicious activity should immediately report a description of the person and their location to DCB Housing personnel at (701) 480-9262.
- Campus community members can report hazards to DCB Plant Services through the online Minor Repair Order found on our website: <https://www.dakotacollege.edu/faculty-and-staff/forms>

DCB safety is supplemented by a variety of technological systems including electronic access to buildings, interior and exterior cameras, fire detection and monitoring systems. Members of the campus community are encouraged to immediately report equipment issues to DCB Plant Services at (701) 228-5441.

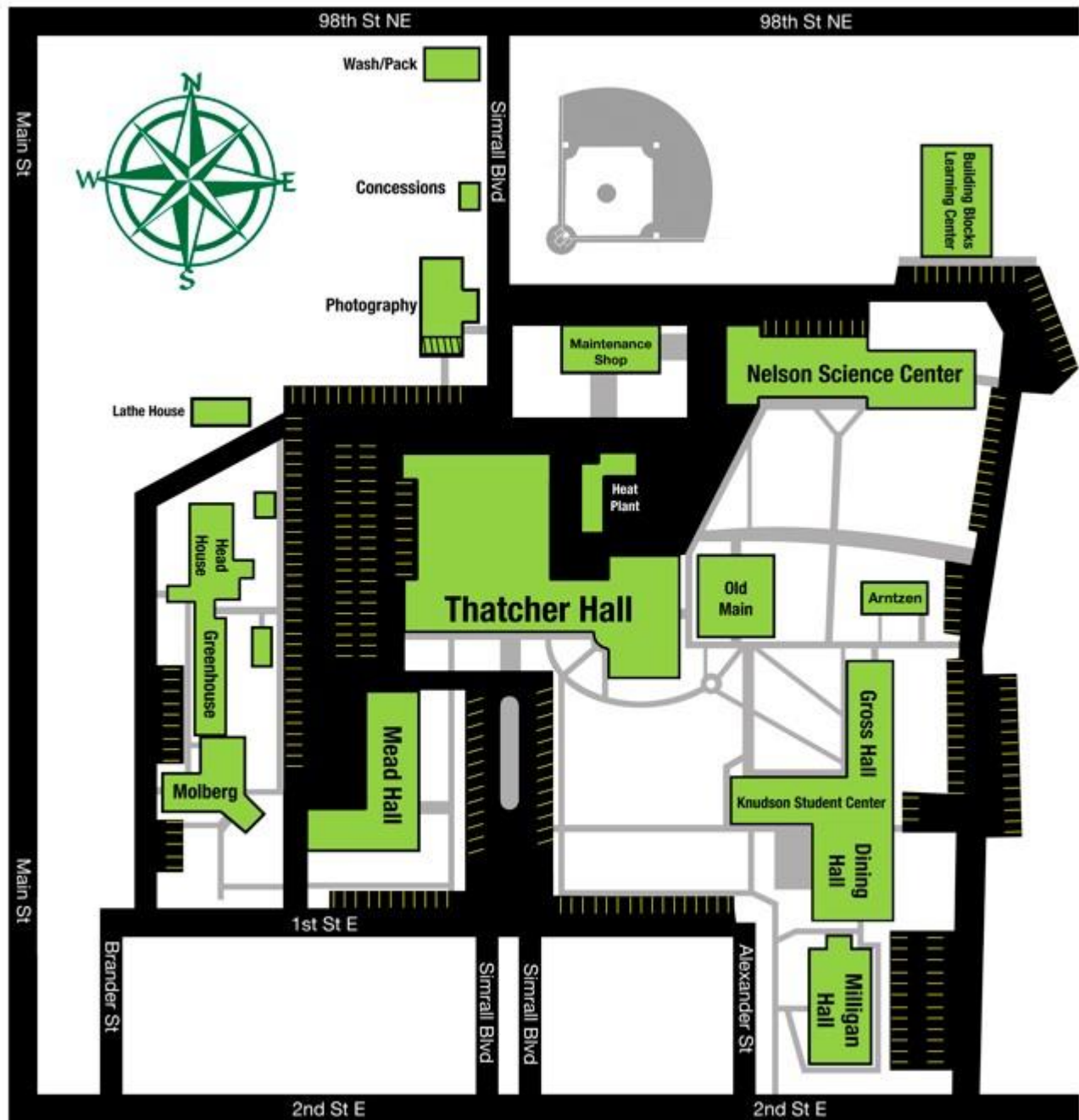
## DCB's Working Relationship with Local Law Enforcement

DCB maintains a close working relationship with the Bottineau County Sheriff's Office (BCSO). The DCB Housing Director holds collaborative meetings with BCSO to review issues and incidents occurring on campus and campus adjacent. DCB is comfortable with and capable of reaching out to this responsive law enforcement entity for support and assistance as it relates to the DCB safety of the campus community. DCB Housing and Plant Services personnel and local law enforcement officers communicate on the scene of incidents that occur in and around the campus area. DCB Housing and Plant Services Personnel work closely with local law enforcement investigators when incidents arise that require joint communication efforts.

## Memorandum of Understanding

A Memorandum of Understanding between DCB and BCSO assumes a direct working relationship. The Memorandum of Understanding allows for the cooperation and coordination of investigation activities of alleged criminal offenses. In addition to investigations, BCSO will respond to campus to make criminal arrests or perform other law enforcement functions.

## Campus Map – Clery Geography



### Safety Training

DCB Housing and DCB Plant Services provide in-house and practical training annually to personnel. Training topics include the DCB Student Handbook, Staff and Faculty Handbook, Residence Life Handbook, Clery CSA Training, Title IX Training, Avigilon Camera System, Fire Alarm and Monitoring systems and procedures, electronic access control, report writing and submissions, Mental Health Resources, CPR and Health and Safety training for emergency medical situations.

### Timely Warning Notices – Notifying the DCB Campus Community about Crimes

To provide timely notice to the DCB community in the event of a criminal situation that, in the judgment of DCB Housing,

Plant Services or Dean's Office, or designee, may pose a serious or continuing threat to members of the campus community, a Timely Warning notice will be issued. Timely Warning notices will be distributed as

soon as pertinent information is available, in a manner that is timely, that withholds the names of victims as confidential, and with the goal of increasing the safety of the campus community by aiding in the prevention of similar crimes or occurrences. Timely warning notices are primarily distributed by the emergency notification system (Assurance NM) to all students and employees on campus as soon as pertinent information is available. Alerts can also be sent/communicated via a variety of other notification methods, as outlined in the Emergency/Immediate Notification section of this Annual Report and highlighted below. The intent of a Timely Warning notice is to warn the campus regarding a criminal incident, providing individuals an opportunity to take reasonable precautions to protect themselves. Timely warning notices are generally written by the DCB Housing Director, Plant Services Director, or designee, and they are routinely reviewed and approved by the campus Dean and Campus Policy Committee. The campus Dean has the authority to issue a Timely Warning notice without such consultation if consultation time is not available. The campus Dean's office and Plant Services Director is responsible for activating the Assurance NM emergency notification system and coordinating with the DCB Housing Director for further notifications to students, staff and faculty. Should the campus Dean be directly impacted and involved in an incident response or otherwise unavailable, the DCB Plant Services Director will write and send a Timely Warning notice. Timely warning notices are sent to the campus community to notify members of the community about specific Clery Act crimes (as described below) that have been reported to DCB Housing and DCB Plant Services and that have occurred on or within the campus Clery geography (on-campus, non-campus, or public property), where after review and assessment it is determined that the incident may pose a serious or continuing threat to members of the campus community. Updates to the campus community when deemed necessary, about any case resulting in a Timely Warning notice may be distributed via the Assurance NM emergency notification system, phone, text message, email, posted on the official university website, press release, local media, and/or social media.

Timely warning notices may also be posted through target communication – poster, letters, group meetings, etc. by DCB Housing in campus buildings when deemed necessary. DCB personnel are informed of their responsibility to share timely warning notice information with their sponsored visitors and/or guests. The sponsoring DCB department of an event, or conference organizer, is responsible to inform attendees, and/or leaders about notices and notice posters that may be posted in areas where conference attendees are visiting and/or occupying.

Timely warning notices are typically issued for the following Uniform Crime Reporting Program (UCR)/National Incident Based Reporting System (NIBRS) crime classifications:

- Murder/Non-Negligent Manslaughter
- Aggravated Assault (cases involving assaults among known parties, such as two roommates fighting which results in an aggravated injury, will be evaluated on a case-by-case basis to determine if the individual is believed to be an ongoing threat to the larger DCB community)
- Robbery involving force or violence (cases including pick pocketing and purse snatching will typically not result in the issuance of a Timely Warning Notice, but will be assessed on a case-by-case basis)
- Sexual Assault (considered on a case-by-case basis depending on the facts of the case, when and where the incident occurred, when it was reported, and the amount of information known by the MSU Security Chief or designee). In cases involving sexual assault, that is reported long after the incident occurred, there is no ability to distribute a “timely” warning notice to the community. All cases of sexual assault, including stranger and non-stranger/acquaintance cases, will be assessed for potential issuance of a timely warning notice.
- Major incidents of Arson

- Other Clery crimes as determined necessary by the DCB Housing or Plant Services Directors or designees.

Typically, notices are not issued for any incidents reported that are older than ten (10) days from the date of occurrence, as such a delay in reporting has not afforded the campus an opportunity to react or respond in a timely manner.

The DCB Housing Director and Plant Services Director will confer with the DCB Dean's office during the response to a crime to ensure a proper review of all Clery crimes (and other criminal incidents, as deemed appropriate) to determine if there is a serious or continuing threat to the community and if the distribution of a timely warning notice is warranted. Campus officials not subject to the timely reporting requirement are those with significant counseling responsibilities who were providing confidential assistance to a crime victim. This exemption only applies to the DCB Mental Health Counselors who are performing that specific function and role as their primary employment with the college.

### Safety Alert and/or Emergency Notification

A Safety Alert will be issued when an event or set of circumstances exist on or near campus that pose (or could potentially pose) a threat to the health or safety of the campus community. Safety Alerts may include but are not limited to information regarding suspicious people, sex offenders on or near campus, suspected criminal activity on or near campus, severe weather, hazardous material incidents, or any other situation affecting the safety of campus residents. A Safety Alert may include a Clery-reportable crime if it occurred within a close geographical proximity to the DCB campus, but not within DCB's Clery-reportable geography. If warranted, a Safety Alert may be issued for a Clery Act crime that occurred at a previous point in time and was not reported to DCB in a timely manner. The Dean's Office or Plant Services Director or any designee may issue a Safety Alert. The Safety Alert will be disseminated primarily through Assurance NM. Updates to the campus community, when deemed necessary, about any case resulting in a Safety Alert may be distributed via the Assurance NM emergency notification system, phone, text message and email. Safety Alert notices may also be posted through target communication – posters, letters, group meetings, etc. by DCB Housing in campus buildings when deemed necessary.

### Daily Crime and Fire Log

DCB Housing maintains a Daily Crime Log in cooperation with the Bottineau County Sheriff's Office. DCB Plant Services maintains a daily Fire Log. DCB Housing makes the Daily Crime Log open to public inspection upon request via email, phone or in writing. All confirmed fires occurring within or on all on-campus residential facilities will also be included in the Daily Crime and Fire Log. The information in the crime log typically includes the incident number, crime classification, date reported, date occurred, general location of crime, and disposition of each reported crime. Faculty, staff, and students are encouraged to review these logs periodically to become more familiar with the types and locations of criminal incidents that may impact the campus community. The names of crime victims will not be listed on the Daily Crime Log. Unless the disclosure is prohibited by law or would jeopardize the confidentiality of the victim, newly reported crimes/incidents within the campus's Clery geography and updated information regarding previously reported crimes are entered into the Daily Crime within two business days of it being reported to DCB Housing from the Bottineau County Sheriff's Office.

### Preparation of Annual Disclosure of Crime Statistics and Clery Compliance

The following information provides context for the crime statistics reported as part of compliance with the Clery Act. The DCB Housing Department is primarily responsible for preparing the Annual Security and Fire Safety Report. This responsibility is specifically designated to the DCB Director of Student Life and Housing. The procedures for preparing the annual disclosure of crime statistics include reporting statistics to the campus community obtained from the following sources: DCB Housing department and

Judicial office, Bottineau County Sheriff's Office, Title IX Office and Human Resources Department are key offices from which drug, liquor, and weapon offense referral data is obtained along with sexual offenses and potential reports of other Clery crimes. A written request for statistical information is made at least on a semester basis to all Campus Security Authorities or CSAs (as defined by federal law). CSAs are also informed in writing and/or through training to report crimes to DCB Housing or DCB Plant Services in a timely manner so those crimes can be evaluated for timely warning purposes. A Campus Security Authority or CSA is a Clery-specific term that encompasses four groups of individuals and organizations associated with an institution:

- DCB Housing Personnel including Head Residents and Student Resident Assistants.
- Any individual or organization specified as an individual or organization to which students and employees should report criminal offenses.
- An official of an institution who has significant responsibility for student and campus activities, including, but not limited to, student housing, student discipline, and campus judicial proceedings, clubs and organizations.

An Official is defined as any person who has the authority and the duty to act or respond to particular issues on behalf of the institution. Crime reports can be made to the following individuals who have been designated by DCB as Campus Security Authorities (CSAs) due to their significant responsibility over students and student activities on campus:

Associate Dean for Student Services – Corey Gorder – (701) 228-5451

Director of Student Life and Housing, Judicial Officer – Bridget Gustafson – (701) 228-5657

Plant Services Director – Christopher Nero – (701) 228-5461

Athletic Director – Carolyn Rygg – (701) 228- 5620

Title IX Coordinator – Laura Halvorson – (701) 228-5680

Head Residents and Student Resident Assistants

Head Coaches and Assistant Coaches

Faculty and Staff Advisors for Clubs and

Organizations Staff Supervisors of Student

Workers

## Counselors

Statistical information is not requested from, nor is it provided by, Student Mental Health who are performing that function and role as their employment with DCB. Counselors are not required by law to provide statistics for this compliance document. Counseling Professionals, as defined by the Federal law, who act in such capacities, have been advised that, while they are not obligated to report crimes for the purpose of compiling these statistics, they are encouraged, when they deem it appropriate, to inform the persons they are counseling of their ability to report any crimes to DCB Housing and/or Plant Services for inclusion in the annual statistics. The Mental Health Center counselor may facilitate anonymous reporting, as outlined earlier in this Annual Security and Fire Safety Report. All statistics are gathered, compiled, and reported to the campus community via this report, entitled the "Annual Security and Fire Safety Report," which is published by DCB Housing no later than October 1st of each year. DCB Housing



submits the annual crime statistics published in this brochure via a Web-based reporting system to the Department of Education (ED). The statistical information gathered by the Department of Education is available to the public through their website. Table One of the crime statistics satisfies the reporting requirements outlined by the Clery Act.

### Annual Security Report Availability

DCB Housing sends an email to every enrolled student and current employee on an annual basis informing them of the availability of the Annual Security and Fire Safety Report. The email includes a summary of the contents of this report. The email includes the address for the DCB Safety website where the Annual Security and Fire Safety Report (ASFSR) can be found online, and notification that a physical copy may be obtained by making a request to DCB Housing; Student Services, Thatcher Hall, 105 Simrall Blvd. Bottineau ND. 58318 or (701) 228-5657.

### Specific Information about Classifying Crime Statistics

The statistics in this brochure are published in accordance with the definitions and many of the standards and guidelines used by the FBI Uniform Crime Reporting (UCR) Handbook, National Incident-Based Reporting System (NIBRS), relevant Federal law (the Clery Act), and applicable State law (North Dakota Century Code).

### Clery Act Reporting

For Clery Act reporting purposes, the number of victims involved in a particular incident is indicated in the statistics column for the following crime classifications: Murder/Non-Negligent Manslaughter, Manslaughter by Negligence, Sex Offenses, and Aggravated Assault. For example, if an aggravated assault occurs and there are three victims, this would be counted as three aggravated assaults in the crime statistics chart. The number reflected in the statistics for the following crime categories includes one offense per distinct operation: Robbery, Burglary, Larceny, Vandalism, and Arson. For example, if five students are walking across campus together and they are robbed, this would count as one instance of robbery in the crime statistics chart. In cases of Motor Vehicle Theft, each vehicle stolen is counted as a statistic. In cases involving Liquor Law, Drug Law, and Illegal Weapons Law violations, the statistics indicate the number of people arrested by law enforcement or referred to Human Resources for possible disciplinary action for violations of those specific laws. Hate crimes are reported in narrative form and are separated by category of prejudice. A hate crime is not a separate, distinct crime, but is the commission of a criminal offense that was motivated by the offender's bias. For example, if a subject assaults a victim it is a crime. If the facts of the case indicate that the offender was motivated to commit the offense because of their bias against the victim's race, sexual orientation, gender, religion, ethnicity, national origin, gender identity, or disability, the assault is then also classified as a hate crime. For Clery Act Purposes, Hate Crimes include any of the following offenses that are motivated by the offender's bias: Murder and Non-negligent Manslaughter, Sexual Offenses (rape, fondling, incest and statutory rape), Robbery, Aggravated Assault, Burglary, Motor Vehicle Theft, Arson, LarcenyTheft, Simple Assault, Intimidation, and Destruction/Damage/ Vandalism of Property. Campus Save was signed into law on March 7, 2013, as part of the reauthorization of the Violence Against Women Act (VAWA); it covers students and staff of institutions of higher education and amends the Jeanne Clery Act to include new reporting requirements for Domestic Violence, Dating Violence, and Stalking and additional policy statements and training requirements.

### Geography Definitions from the Clery Act

On-Campus defined as: (1) Any building or property owned or controlled by an institution within the same reasonably contiguous geographic area and used by the institution in direct support of or in a manner related to the institution's educational purposes, including residence halls; and (2) Any building

or property that is within or reasonably contiguous to the area identified in paragraph (1), that is owned by the institution but controlled by another person, is frequently used by students, and supports institutional purposes (such as a food or retail vendor). Non-Campus Building or Property defined as: (1) Any building or property owned or controlled by a student organization that is officially recognized by the institution; or (2) Any building or property owned or controlled by an institution that is used in direct support of or in relation to the institution’s educational purposes, is frequently used by students, and is not within the same reasonably contiguous geographic area of the institution. The Non-Campus geography definition includes buildings or properties under temporary control during institutionally sponsored short-stay-away domestic or international trips for students of more than one night, or buildings or properties under temporary control during institutionally sponsored domestic or international trips for students to repeated locations.

- For example, students in the Agriculture club take a trip to Washington, D.C. and stay at the same hotel every year. In this example, the institution must include in their Clery Act crime statistics any Clery Act crimes that occur in the rooms used by the students and any common areas used to access those rooms, including the lobby, elevator, and staircases.

Public Property defined as: All public property, including thoroughfares, streets, sidewalks, and parking facilities, that is within the campus or immediately adjacent to and accessible from the campus or on-campus property/facilities. The DCB crime statistics do not include crimes that occur in privately-owned homes or businesses within or adjacent to the campus boundaries. On-campus Student Housing Facility defined as: Any student housing facility that is owned or controlled by the institution or is located on property that is owned or controlled by the institution and is within the reasonably contiguous geographic area that makes up the campus is considered an on-campus student housing facility. This category is considered a subset of the On- Campus category. Reasonably Contiguous is defined in as: Any building or property an institution owns or controls that is in a location that students consider to be, and treat as, part of the “campus.” DCB considers locations within half a mile from the core or main campus border to be reasonably contiguous with the campus.

### Established Clery Reportable Geography

According to The Handbook for Campus Safety and Security Reporting (Handbook), which explains the Department of Education’s requirements under the Clery Act, the 2023-2024 reportable geography of Dakota College at Bottineau includes the following locations:

- 105 Simrall Blvd, Bottineau, ND. 58318 (Main Campus) – includes all Campus Buildings and Residence Halls
- Unfounded Crimes

If a Clery Act crime is reported as occurring in any of DCB’s Clery Act geographic categories and the reported crime is investigated by law enforcement authorities and found to be false or baseless, the crime is considered to be "unfounded." Only sworn or commissioned law enforcement personnel may unfound a crime after a thorough investigative process.

## CAMPUS CRIME STATISTICS FOR Dakota College at Bottineau

CRIMINAL OFFENSE	YEAR	CAMPUS	CAMPUS RESIDENCE	NONCAMPUS	PUBLIC	TOTAL
<b>Aggravated Assault</b>	<b>2021</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>2022</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>2023</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>Arson</b>	<b>2021</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
	<b>2022</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>

	2023	0	0	0	0	0
Negligent Manslaughter	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Burglary (Total)	2021	0	0	0	0	0
Burglary (Total) Forcible Burglary *	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Forcible Burglary * Non- Forcible Burglary *	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Non-Forcible Burglary * Attempted Burglary *	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Attempted Burglary * Motor Vehicle Theft	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Motor Vehicle Theft Murder/Non-Negligent Manslaughter	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Murder/Non-Negligent Manslaughter Robbery	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Robbery	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Sexual Offenses (Total) Rape *	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Rape *	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Fondling*	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Incest*	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Statutory Rape*	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Stalking*	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Domestic Violence*	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Dating Violence*	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0

Arrests – Liquor Law Violations	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	3	3	0	0	3
Arrests – Drug Abuse Violations	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Arrests – Weapons: carrying, possessing	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Non-Arrests/Campus Referrals Liquor Law Violations	2021	18	18	0	0	18
	2022	45	45	0	0	45
	2023	33	33	0	0	33
Non-Arrests/Campus Referrals Drug Abuse Violations	2021	0	2	0	0	2
	2022	0	0	0	0	0
	2023	0	0	0	0	0
Non-Arrests/Campus Referrals Weapons: Carrying, possessing, etc	2021	0	0	0	0	0
	2022	0	0	0	0	0
	2023	0	0	0	0	0

During the 2021, 2022 and 2023 years, none of the statistics above were reported or determined to meet the definition of a hate crime as defined by the FBI Uniform Crime Reporting Hate Crime Data Collection Guidelines.

\*These categories were new for the 2013 reporting period and were not required to be reported in this manner in 2012.

Statistics for

2012, where available, have been provided for your information. NOTE: Sodomy and sexual assault with an object are included in the rape category.

By definition any occurrence in the ‘campus residence’ category also occurs in the ‘campus’ category. On campus Residence crimes are included in the on-campus numbers.

## Emergency Response and Evacuation

### Emergency Preparedness

Emergency operations planning at DCB means preventing, preparing for, responding to, and recovering from all emergencies that could affect the college and local Bottineau community. Emergency preparedness at DCB is managed by the Emergency Management Committee with oversight by the Directors of Housing and Plant Services. The emergency response and evacuation protocols and procedures outlined within this Annual Report are reflective for on-campus buildings, facilities, and residence halls.

### Emergency Response

Emergencies occurring on campus should be reported to DCB Plant Services by dialing (701) 228-5461 or by dialing 911 for outside emergency responders. In conjunction with other emergency agencies, the college conducts emergency response drills and exercises each year, such as tabletop exercises, field exercises, and tests of the emergency notification systems on campus. These tests, which may be announced or unannounced are designed to assess and evaluate the emergency plans and capabilities of the institution. After-action reviews will be conducted following each test and/or exercise that documents the test/exercise, provides a description for each test/exercise, the date, time, whether the test was announced or unannounced, and an assessment of the lessons learned from the exercise.

## Emergency Evacuation

General Building Evacuation Procedures: When the building fire alarm sounds, or when directed by a campus official to evacuate, all occupants will leave the building through the nearest exit. Designated DCB staff or Facilities personnel may remain behind for the purpose of assisting other occupants or emergency responders.

### Actions to Take for Individuals Involved

In the event of an emergency or dangerous situation, DCB will direct students, faculty, staff, and guests to evacuate a building, several buildings, a portion of the campus, or the entire campus. Due to the unpredictability of these situations, affected parts of the campus will be provided directions on how to proceed while the event is happening or immediately after the event. The campus community will be asked to follow building and campus evacuation protocols and to obey directions from DCB and on-scene emergency responders (if present). Certain events, like a hazardous materials release or an active shooter, may require the DCB community and the public to shelter-in-place to prevent exposure to harmful elements.

### Evacuation Procedure

If a building must be evacuated, all employees must proceed immediately upon that announcement to the nearest possible exit. To be prepared for an emergency, you should:

- Know at least two ways out of the building.
- Know the evacuation locations for your building (if a specific location is to be used, the location to be used will be determined and disseminated at the time of evacuation).

Make sure all members of your department evacuate the area by quickly checking nearby restrooms, storage rooms, as you exit.

1. Use the nearest stairway – Building elevators should never be utilized in a fire emergency or situation where electrical service may be interrupted (severe weather).
2. Accompany and assist those with disabilities.
3. Shut all doors behind you as you go.
4. Evacuate as quickly as possible, but in an orderly manner. Do not push or shove.
5. Once outside, proceed to the area designated by OSS or other emergency personnel and follow any other instructions given. Stay away from building entrances.

### Possible Evacuation Locations

REMEMBER: Each building has multiple evacuation routes/locations. Situations will dictate which one is used. Locations may be subject to change due to unforeseen circumstances.

- Any adjacent building upwind from disaster.
- Evacuees may also gather directly outside the building if the situation does not pose an immediate threat to those near the building.

### Evacuation if Disable Persons

Always consult with the person in the chair regarding how best to assist them.

- Assist and accompany to evacuation site if possible.

- Use a sturdy chair (or one with wheels) to move the person.
- Help carry the individual to safety if possible or use an evacuation chair (stair chair) (see section 9.3.5 below).
- Utilize rescue chairs where available to navigate stairs.
- If unable to assist a person with mobility impairment, notify emergency responders.

To evacuate people using wheelchairs:

- Consult the individual before moving them.
- Individuals at ground floor locations may be able to exit without help.
- Utilize evacuation chairs (stair chairs) where available to navigate stairs.

To assist people with visual impairment:

- Announce the type of emergency.
- Take directions from the individual about how best to guide them.
- Tell the person where you are going and what obstacles you encounter.
- When you reach safety, ask if further help is needed.

To alert people who are deaf or hard of hearing:

- Turn lights on/off to gain their attention.
- Indicate directions with gestures.
- If time permits, write a note with evacuation directions.
- Escort the person out of the building if requested to do so.
- When you reach safety, ask if further help is needed.

To assist people with service animals:

- A service animal may become hesitant or confused during an emergency. Discuss how to best assist them if this should occur.

### Basic “Shelter-in-place” Guidance

If an incident occurs and the building you are in is not damaged, stay inside an interior room until you are told it is safe to come out. If your building is damaged, take your personal belonging (purse, wallet, access card, etc.) and follow the evacuation procedures for your building (close your door, proceed to the nearest exit, and use the stairs instead of the elevators). Once you have evacuated, seek shelter at the nearest campus building quickly. If police or fire department personnel are on the scene, follow their directions.

### How to “Shelter-in-place”

No matter where you are, the basic steps of shelter-in-place will generally remain the same. Should the need ever arise, follow these steps, unless instructed otherwise by local emergency personnel:

- If you are inside, stay where you are. Collect any emergency shelter-in-place supplies and a telephone to be used in case of emergency. If you are outdoors, proceed into the closest building quickly or follow instructions from emergency personnel on the scene.

- Locate a room to shelter inside. It should be: – An interior room. – Above ground level; and – Without windows or with the least number of windows. If there is a large group of people inside a particular building, several rooms may be necessary.
- Shut and lock all windows (tighter seal) and close exterior doors.
- Turn off air conditioners, heaters, and fans.
- Close vents to ventilation systems as you are able. DCB staff will turn off the ventilation as quickly as possible.
- Make a list of the people with you and ask someone (hall staff, faculty, or other staff) to call the list in to DCB Student Helpline so they know where you are sheltering. If only students are present, one of the students should call in the list.
- Turn on a radio or TV and listen for further instructions.
- Make yourself comfortable.

### Off-Campus Emergencies

DCB Plant Services may receive emergency information from the Bottineau County Sheriff's Office regarding incidents in Bottineau County that could imminently impact the safety of the DCB community. When appropriate, DCB Plant Services notifies the campus community of off-campus threats that could also represent a threat to the health or safety of students or employees.

### Emergency/Immediate Notification

DCB has developed a process to notify the campus community in cases of emergency. While it is impossible to predict every significant emergency or dangerous situation that may occur on campus, the following identified situations are examples which may warrant an emergency (immediate) notification after confirmation: armed/hostile intruder; bomb/explosives (threat); communicable disease outbreak; severe weather; terrorist incident; civil unrest; natural disaster; hazardous materials incident and structural fire. Emergencies occurring on or within any of DCB's Clery geography (as defined in the "Geography Definitions" elsewhere in this Annual Report) should be reported to DCB Plant Services (701) 228-5461 or by dialing 911 for outside emergency responders. In the event of an emergency, an effective Campuswide communications process is vital in order to provide the greatest safety possible for the DCB campus community. As part of its Emergency Management Operations, DCB has adopted a formalized procedure for issuing emergency/immediate notifications to the campus community. DCB will immediately notify the campus community upon confirmation of a significant emergency or dangerous situation occurring on or near the campus that involves an immediate threat to the health or safety of students or employees. A threat is imminent when the need for action is instant, overwhelming, and leaves no moment for deliberation. Such situations would include, but are not limited to, a hazardous materials incident requiring shelter-in-place or evacuation, an armed intruder on or near campus, an approaching tornado, or a fire actively raging in a campus building. DCB will, without delay, and considering the safety of the community, determine the content of the notification and initiate the notification system to the appropriate segment or segments of the campus community, unless issuing a notification will, in the professional judgment of responsible authorities, compromise efforts to assist a victim or to contain, respond to, or otherwise mitigate an emergency. Immediate notification to the campus can be accomplished through a variety of communications methods. Notification will be made by using some or all of the following multi-modal notification methods depending on the type of emergency: Assurance NM, email, cell phone text, voice message alert; fire alarm (where available). If any of these systems fail or DCB deems it appropriate, in person communication may be used to communicate an emergency. Confirmation of the existence of an

emergency typically involves the response and assessment by DCB Plant Services, DCB Housing or the DCB Dean's Office, local police and first responders and/or the national weather center. When DCB personnel become aware of a situation that may warrant the issuing of an immediate notification, the DCB Plant Services Director or Dean's Office confirms (through response, investigation, or collaboration with emergency responders) that there is a significant emergency they evaluate the situation to determine if an alert is warranted, develops the content of the notification message, and then identifies the appropriate segment or segments of the campus community who will receive the notification. The DCB Plant Services Director or Campus Dean's Office, or Designee has the ability and authority to issue an alert without delay and without further consultation with any other campus official. Notification message content is determined based on the type of incident, the context with which it is occurring, and the immediate danger or threat to the campus community and the need to advise campus community members to act. DCB will endeavor to make such notification sufficiently specific to enable recipients to take an appropriate response to the threat. In situations lacking the presence of an imminent threat, DCB Plant Services or DCB Housing, consults with the Campus Dean's Office prior to an alert being issued. Follow-up notices/communications will be provided as necessary during an active incident and may be provided. When a threat is neutralized or effectively removed, campus community members will be appropriately informed via all or some of the described communications methods. Additionally, updates regarding a prolonged and ongoing emergency such as a health emergency (norovirus, serious illness, pandemic, etc.) can be provided by creating a banner (webpage) at the top of DCB's homepage that would contain specific status update information along with links to public health agencies (for example) or other relevant entities. When Assurance NM is activated, email, and cell phone text/voice messaging, college officials will notify campus community members of the emergency, its exact location, and will most likely request community members to protect themselves by evacuating the affected area if it is safe to do so and/or by employing the "shelter-in-place" concept. If there is an immediate threat to the health or safety of students or employees occurring on campus, an institution must follow its emergency notification procedures. An institution that follows its emergency notification procedures is not required to issue a timely warning based on the same circumstances; however, the institution must provide adequate follow-up information to the community as needed.

### Emergency Notification System Testing and Registration

DCB utilizes the Assurance NM emergency notification system. Assurance NM will notify the campus community through voice, text, and email. The Assurance NM system will be tested at least each calendar year to ensure that all systems are working properly. These tests will also be educational moments for the campus community to remind them that this system does exist, and that it is a working and functioning system that they can rely upon. In conjunction with at least one of the annual test notifications, information is shared with the campus community related to the campus' emergency response and evacuation procedures. Students, staff, and faculty are informed of DCB's Assurance NM emergency notification system and evacuation processes annually during training and through written notification. This includes dissemination of information about how to respond during the activation of the Assurance NM system in response to a significant incident on campus or within the immediate area of the campus that potentially directly impacts the safety of campus community members. These information sessions have been built into staff and faculty in service trainings, Housing personnel staff training, and new employee/faculty orientations. The Assurance NM procedural processes are tested annually – including the activation of cell phone, work or home phone, email account, voice mail, text messaging systems. These tests are usually announced tests but may be unannounced. Available student cell phone numbers are loaded into the Assurance NM system upon registration for classes.

Faculty and Staff participation is mandatory. Faculty and Staff are required to annually update their emergency notification information by:



- Log into your NDUS Employee Self Service, Personal Details, my preferences and under “contact details” add your cell-phone number (with area code )by clicking on the +(Add Phone) and click “Save.”
- If you do not currently receive the Assurance NM notification, it shows you are not in the system and should contact DCB Plant Services if you want to receive future notifications.
- Users should keep in mind that changes may take a few days to take effect.

DCB’s primary and secondary means of communicating during an emergency include those addressed above. The following, although not all methods are employed – modalities include primary, secondary and tertiary methods of notification that are decided upon based on the segment or segments of the campus community that require notification and the best method(s) determined to maximize that notification.

The communications method used would depend on the type of emergency:

- Cell phone Text/Voice Messaging
- All Campus Email Alerts
- Voicemail
- Safety Website
- Fire Alarm System Notification
- Flyers posted throughout Campus.
- Direct On-foot and In-person Notifications

#### Additional Procedures for Disseminating Emergency Information to the Larger Community

DCB’s website ([www.dakotacollege.edu](http://www.dakotacollege.edu)) and flyers posted throughout campus serve as primary distribution systems to disseminate emergency information to the larger community.

#### Alcohol/Drug Policies

In accordance with the federal Drug-Free Workplace Act of 1988, the federal Drug-Free Schools, and Communities Act (DFSCA) of 1989, and State policies on Alcohol and Other Drugs, DCB prohibits the unlawful or unauthorized possession, use, sale, manufacture, distribution, or dispensation of alcohol and other drugs by employees and students in the workplace or when representing DCB in a working capacity off campus. Responsible use of alcohol at DCB related social events (e.g., Alumni Dinner, Holiday Party, Athletic Events, etc.) or during designated social hours at conferences, seminars, etc. is exempt. Employee or student violators are subject to disciplinary action, up to and including termination of employment and expulsion. DCB Housing reports violations of law to the appropriate campus department and works in collaboration with the local police, on enforcing the laws of the State of North Dakota, including laws relative to the possession, use, and sale of alcoholic beverages. This includes the enforcement of State underage drinking laws and Federal and State drug laws. Student violations of the policies and guidelines pertaining to alcohol and drugs specified in the DCB Student Handbook and Residence Life Handbook will result in sanctions appropriate to the degree of the violation. Sanctions will increase in severity for repeated violations. Student sanctions will include, but are not limited to, fines, education, loss of privileges, referrals for counseling, probations, residence hall separation, or suspension or expulsion from the college. North Dakota Century Code states that individuals be at least 21 years of age to buy, possess and consume alcoholic beverages. It is illegal to give or sell alcohol to an individual under the age of 21. It is illegal to have an open container of alcohol in any vehicle. It is illegal to serve

alcohol to an intoxicated person. It is illegal to sell alcohol of any kind without a license or permit. Organizations are not immune from prosecution for a legal violation. The officers of that group are usually the parties cited, but every group member is liable. Driving while intoxicated (.08 blood alcohol content) is a criminal offense.

Being intoxicated is not a legal defense for any charge, including assault, rape, vandalism, slander, manslaughter, or accident. If an underage person is involved in a drinking/driving crash after leaving a party, the victim(s) of the crash may sue both the person at fault and those who provided the alcohol. There are also serious legal repercussions for driving under the influence of alcohol. Drivers under the age of 21 with a BAC of .02 or higher will be charged with Driving Under the Influence. Drivers 21 and over with a BAC of .08 or higher will be charged with Driving Under the Influence. The use of narcotics and controlled substances without a prescription on campus premises, as elsewhere, is illegal. Illegal possession, use, and/or sale of drugs or narcotics by students, employees, or guests constitutes unacceptable and illegal conduct. DCB Housing reports violations of law to the appropriate DCB department and works in collaboration with state and federal law enforcement and local police, on for enforcing the laws of the State of North Dakota, including laws relative to the possession, use, and sale of narcotics and controlled substances.

### Drug Free Schools and Communities Act (DFSCA) Compliance

A copy of the most current Drug Abuse and Alcohol Prevention Program (DAAPP) can be reviewed and obtained by contacting the Student Nurse or Mental Health counselor. Information related to alcohol and other drug use can be found in the Residence Life Handbook as well as additional alcohol and drug policies, standards of conduct, applicable disciplinary sanctions, health risks and counseling and treatment.

### Alcohol and Other Drugs Education and Outreach

- A student who brings or uses intoxicating liquors, alcoholic beverages or illegal drugs on campus is subject to disciplinary action.
- A student who attends class under the influence of alcohol or illegal drugs is subject to disciplinary action.
- Faculty and staff are justified in contacting appropriate law enforcement authorities and/or DCB Housing in the event a student is under the influence.
- Students who are involved in illegal drug usage, off the premises of the campus, may also face disciplinary action.
- Student organizations and clubs are not allowed to sponsor on-campus or off-campus events at which alcohol or illegal drugs are consumed.
- Sale of alcoholic beverages and/or drugs by student organizations and clubs is strictly forbidden. (This is to include any action that can be remotely construed as alcohol sale such as charging admission to parties, passing the hat, selling empty cups, selling drink tickets, etc.)
- Alcoholic beverages and/or drugs may not be used as awards or prizes in connection with events or activities sponsored by student organizations and clubs.
- Advertisements for alcohol sales and bars are not allowed to be posted on campus.
- These advertisements will also not be allowed electronically or printed in DCB publications. There could be an exclusion for community events as determined by the Campus Dean.

- Disciplinary action, which may include expulsion from DCB, shall follow the procedures and regulations for disciplinary action that are found in the DCB Student Handbook. In addition, such matters may be reported by the college to the appropriate law enforcement authorities.
- Since involvement with drugs may be associated with medical and/or psychological problems, students may be referred or may refer themselves to counseling or medical services.

### Where to turn for help

Students may initiate help for themselves or others by contacting any of the following:

#### On Campus

Mental Health Counselor – Corey Gorder – (701) 228-5451

Student Health Nurse – Mary Gorder – (701) 228-5460

Director of Student Life and Housing – Bridget Gustafson (701) 228-5657

Title IX Coordinator – Laura Halvorson – (701) 228-5680

Athletic Director and Athletic Trainer – Carolyn Rygg – (701) 228-5620

#### Community Resources

St. Andrews Clinic – (701) 228-9400

Pyramid Health – (701) 534-0109

Family Crisis Center – (701) 228-2028

#### National Numbers

The National Drug & Alcohol Hotline: 1-800-711-6375 or 1-800-711-6402

#### Alcohol Education

DCB offers Alcohol Education courses for students through an annual subscription to Safe Colleges.

#### Dakota College's Response to Sexual and Gender Based Harassment and Interpersonal Violence

DCB prohibits the offenses of domestic violence, dating violence, sexual assault, and stalking (as defined by the Clery Act) and is committed to providing a workplace and educational environment, as well as other benefits, programs, and activities that are free from sexual harassment and retaliation. DCB values and upholds the equal dignity of all members of its community and strives to balance the rights of the parties in the grievance process during what is often a difficult time for all those involved. To ensure compliance with federal and state civil rights laws and regulations, and to affirm its commitment to promoting the goals of fairness and equity in all aspects of the educational program or activity, DCB has developed policies and procedures that provide a prompt, fair, and impartial process for those involved in an allegation of sexual harassment and retaliation. DCB's Title IX Sexual Harassment Policy can be found on the DCB Website: <https://www.dakotacollege.edu/student-life/title-ix>

#### Policy Statement

DCB's Title IX Sexual Harassment Policy is designed to address conduct that falls within Title IX of the Education Amendments of 1972 and other federal and state laws and regulations. Additionally, the Policy is designed to address sexual misconduct that falls outside the jurisdiction of the Title IX. DCB adheres to all federal, state, and local civil rights laws prohibiting sex-based harassment in employment and education. DCB does not discriminate in its admissions practices (except as permitted by law), in its employment practices, or in its educational programs or activities on the basis of sex/gender. As a recipient of federal financial assistance for education activities, DCB is required by Title IX of the Education Amendments of 1972 to ensure that all of its education programs and activities do not discriminate on the basis of sex/gender. Sex includes sex, sex stereotypes, gender identity, gender expression, sexual orientation, and pregnancy or parenting status. DCB also prohibits retaliation against any person opposing sexual harassment or participating in any investigation or complaint process internal or external to the institution. Sexual harassment, sexual assault, dating and domestic violence, and stalking are forms of sexual harassment, which are prohibited under Title IX and DCB policy. Any member of the campus community, guest, or visitor who acts to deny, deprive, or limit the educational, employment, residential, or social access, opportunities and/or benefits of any member of the campus community on the basis of sex is in violation of the Sexual Harassment Policy. Any person may report sex-based harassment (whether or not the person reporting is the person alleged to have experienced the conduct), in person, by mail, by telephone, by video, or by email, using the contact information listed for the Title IX Coordinator (below). A report may be made at any time (including during non-business hours). Complaints or notice of alleged policy violations, or inquiries about or concerns regarding this policy and procedures, may be made internally to:

Laura Halvorson; Title IX Coordinator

Office: located in the Library of Thatcher Hall

Dakota College at Bottineau, 105 Simrall, Blvd. 58318

(701) 228-5680

[Laura.halvorson@dakotacollege.edu](mailto:Laura.halvorson@dakotacollege.edu)

## Definitions

The following definitions are given in the proposed rule on the Violence Against Women Act, drafted by the Department of Education and published in Vol. 79, No. 119 of the Federal Register on June 20, 2014.

The Clery Act defines the crimes of domestic violence, dating violence, sexual assault and stalking as follows:

1. Domestic Violence:
  - i. A Felony or misdemeanor crime of violence committed by—
    - a. a current or former spouse or intimate partner of the victim;
    - b. a person with whom the victim shares a child in common;
    - c. a person who is cohabitating with, or has cohabitated with, the victim as a spouse or intimate partner;

- d. a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction in which the crime of violence occurred; or
  - e. any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction in which the crime of violence occurred.
    - ii. For the purposes of complying with the requirements of this section and §668.41, any incident meeting this definition is considered a crime for the purposes of Clery Act reporting.
2. Dating Violence: Violence committed by a person who is or has been in a social relationship of a romantic or intimate nature with the victim.
- i. The existence of such a relationship shall be based on the reporting party's statement and with consideration of the length of the relationship, the type of relationship, and the frequency of interaction between the persons involved in the relationship. ii. For the purposes of this definition—
    - a. Dating Violence includes, but is not limited to, sexual or physical abuse or the threat of such abuse.
    - b. Dating violence does not include acts covered under the definition of domestic violence
- iii. For the purposes of complying with the requirements of this section and §668.41, any incident meeting this definition is considered a crime for the purposes of Clery Act reporting.
3. Sexual Assault: An offense that meets the definition of rape, fondling, incest, or statutory rape as used in the FBI's Uniform Crime Reporting (UCR) program. Per the National Incident-Based Reporting System User Manual from the FBI UCR Program, a sex offense is "any sexual act directed against another person, without the consent of the victim, including instances where the victim is incapable of giving consent."
- i. Rape is defined as the penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim.
  - ii. Fondling is defined as the touching of the private parts of another person for the purposes of sexual gratification, without the consent of the victim, including instances where the victim is incapable of giving consent because of their age or because of their temporary or permanent mental incapacity.
  - iii. Incest is defined as sexual intercourse between persons who are related to each other within the degrees wherein marriage is prohibited by law.
  - iv. Statutory Rape is defined as sexual intercourse with a person who is under the statutory age of consent.
4. Stalking:
- i. Engaging in a course of conduct directed at a specific person that would cause a reasonable person to—
    - a. Fear for the person's safety or the safety of others; or,
  - b. Suffer substantial emotional distress.
    - ii. For the purposes of this definition—

- a. Course of Conduct means two or more acts, including, but not limited to, acts which the stalker directly, indirectly, or through third parties, by any action, method, device, or means follows, monitors, observes, surveils, threatens, or communicates to or about, a person, or interferes with a person's property.
  - b. Reasonable Person means a reasonable person under similar circumstances and with similar identities to the victim.
  - c. Substantial Emotional Distress means significant mental suffering or anguish that may, but does not necessarily, require medical or other professional treatment or counseling.
- iii. For the purposes of complying with the requirements of this section and section 668.41, any incident meeting this definition is considered a crime for the purposes of Clery Act reporting.

## JURISDICTIONAL DEFINITIONS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, AND STALKING

This section offers an overview of North Dakota's statutes on Domestic Violence, Dating Violence, Sexual Assault, and Stalking.

1. Domestic Violence (:NDCC 12.1-17-01.2). In North Dakota state law, domestic violence is defined as,

i. For purposes of this section "family or household member" means family or household member as defined in section 14-07.1-01.

ii. A person is guilty of an offense if that person willfully causes:

- a. Bodily injury to the actor's family or household member.
- b. Substantial bodily injury to the actor's family or household member; or
- c. Serious bodily injury to the actor's family or household member

iii. The offense is: 26

a. A class B misdemeanor for the first offense under subdivision a of subsection 2 and a class A misdemeanor for a second or subsequent offense under this section or sections 12.1-17-01, 12.1-17- 01.1, or 12.1-17-02 involving the commission of domestic violence, as defined in section 14-07.1-01. For purposes of this subdivision, a prior conviction includes a conviction of any assault offense in which a finding of domestic violence was made under a law or ordinance of another state which is equivalent to this section.

b. A class A misdemeanor for an offense under subdivision b of subsection 2 and a class C felony for an offense under subdivision c of subsection 2.

c. A class B felony for an offense under subdivision b or c of subsection 2 if the victim is under twelve years of age.

iv. A person charged with an offense under this section must be prosecuted in district court.

2. Dating Violence: The state of North Dakota does not have a definition on Dating Violence.

3. Sexual Assault (NDCC 12.1-20-07). In North Dakota state law, sexual assault is defined as a person who knowingly has sexual contact with another person, or who causes another person to have sexual contact with that person, is guilty of an offense if:

- a. That person knows or has reasonable cause to believe that the contact is offensive to the other person.
- b. That person knows or has reasonable cause to believe that the other person suffers from a mental disease or defect which renders that other person incapable of understanding the nature of that other person's conduct.
- c. That person or someone with that person's knowledge has substantially impaired the victim's power to appraise or control the victim's conduct, by administering or employing without the victim's knowledge intoxicants, a controlled substance as defined in chapter 19-03.1, or other means for the purpose of preventing resistance.
- d. The other person is in official custody or detained in a hospital, prison, or other institution and the actor has supervisory or disciplinary authority over that other person.
- e. The other person is a minor, fifteen years of age or older, and the actor is the other person's parent,

guardian, or is otherwise responsible for general supervision of the other person's welfare; or

- f. The other person is a minor, fifteen years of age or older, and the actor is an adult.

In North Dakota state law, sexual assault can be referred as Gross Sexual Imposition (NDCC 12.1-20-03), Sexual Imposition (NDCC 12.1-20-04), and Incest (NDCC 12.1-20-11), and are not included in this definition and are considered separate crimes.

Further, under Clery and Uniform Crime Reporting (UCR) definitions, the North Dakota Criminal Code (NDCC) sections relating to Gross Sexual Imposition (NDCC 12.1-20-03), and Sexual Imposition (12.1-20-04) are considered rape for the purposes of Clery reporting.

4. Stalking (NDCC 12.1-17-07.1). In North Dakota state law, stalking is defined as:

- i. As used in this section: a. "Course of conduct" means a pattern of conduct consisting of two or more acts evidencing a continuity of purpose. The term does not include constitutionally protected activity.
- b. "Immediate family" means a spouse, parent, child, or sibling. The term also includes any other individual who regularly resides in the household or who within the prior six months regularly resided in the household.

c. "Stalk" means:

- 1) To engage in an intentional course of conduct directed at a specific person which frightens, intimidates, or harasses that person and which serves no legitimate purpose. The course of conduct may be directed toward that person or a member of that person's immediate family and must cause a reasonable person to experience fear, intimidation, or harassment; or
- 2) The unauthorized tracking of the person's movements or location through the use of a global positioning system or other electronic means that would cause a reasonable person to be frightened, intimidated, or harassed

and which serves no legitimate purpose. ii. A person may not intentionally stalk another person.

iii. In any prosecution under this section, it is not a defense that the actor was not given actual notice that the person did not want the actor to contact or follow the person; nor is it a defense that the actor did not intend to frighten, intimidate, or harass the person. An attempt to contact or follow a person after being given actual notice that the person does not want to be contacted or followed is prima facie evidence that the actor 27 intends to stalk that person.

iv. In any prosecution under this section, it is a defense that a private investigator licensed under chapter 43-30, or a peace officer licensed under chapter 12-63 was acting within the scope of employment.

v. If a person claims to have been engaged in a constitutionally protected activity, the court shall determine the validity of the claim as a matter of law and, if found valid, shall exclude evidence of the activity. vi. a. A person who violates this section is guilty of a class C felony if:

1) The person previously has been convicted of violating section NDCC 12.1-17-01, 12.1-17-01.1, 12.1-17-01.2, 12.1-17-02, 12.1-17-04, 12.1-17-05, or 12.1-17-07, or a similar offense from another court in North Dakota, a court of record in the United States, or a tribal court, involving the victim of the stalking.

2) The stalking violates a court order issued under chapter 14-07.1 protecting the victim of the stalking, if the person had notice of the court order; or

3) The person previously has been convicted of violating this section.

b. If subdivision a does not apply, a person who violates this section is guilty of a class A misdemeanor.

5. Consent: The state of North Dakota does not explicitly define consent; however, according to North Dakota Century Code § 12.1-20-01, the age of consent is 18 years old. person under the age of 15 cannot legally consent to sexual activity under any circumstances; a person between the ages of 15 – 17 is legally able to consent to sexual activity if the partner is less than three years older. For example, a 16-year-old can legally consent to engage in sexual activity with a partner who is 18 years old, but not a partner who is 19 years old. o The state does provide descriptors commonly associated with Consent when describing the offenses of Sexual Assault (NDCC 12.1-20-07), Gross Sexual Imposition (NDCC 12.1-20-03), Sexual Imposition (12.1-20-04).

### Dakota College's Sexual Harassment Policy Definitions

Title IX Sexual Harassment "Title IX Sexual Harassment" is a subset of Prohibited Conduct. Under Department of Education regulations (see 34 C.F.R., Part 106) issued in 2020 to implement Title IX of the Education Amendments of 1972, 20 U.S.C. Section 1681 et seq., DCB is required to prohibit certain forms of sexual harassment as defined in those regulations. Title IX Sexual Harassment is Prohibited Conduct of the following types committed by or against Students and/or Employees in an education program or activity of the University, in the United States. Prohibited Conduct meets the definition of Title IX Sexual Harassment when:



1. An Employee conditions the provision of an aid, a benefit, or a service on another Employee's or a Student's participation in unwelcome sexual conduct (i.e., Quid Pro Quo sexual harassment); or
2. A Student, Employee, or Third Party (to the extent applicable) engages in unwelcome conduct on the basis of sex that would be determined by a reasonable person to be so severe, pervasive, and objectively offensive that it effectively denies another person equal access to the University's programs or activities; or
3. A Student, Employee, or Third Party engages in Sexual Assault, Domestic Violence, Dating Violence, or Sexual and/or Gender-based Stalking as defined below; and a. The alleged conduct was perpetrated against a person in the United States; and b. The conduct took place within the University's programs and activities. Conduct takes place within the "University's programs and activities" when that conduct occurs: (1) in a location, at an event, or in a circumstance where the University exercises substantial control over both the respondent and the context in which the conduct occurs; or (2) in any building owned or controlled by a student organization recognized by the University. Events that occur off campus or in locations with no connection to the University are unlikely to be considered a college program or activity.

Definition of Consent as it Relates to Sexual Activity is as follows:

Consent is:

- knowing, and
- voluntary, and
- clear permission
- by word or action
- to engage in sexual activity.

Individuals may experience the same interaction in different ways; therefore it is the responsibility of each party to determine that the other has consented before engaging in the activity. If consent is not clearly provided prior to engaging in the activity, consent may be ratified by word or action at some point during the interaction or thereafter, but clear communication from the outset is strongly encouraged. For consent to be valid, there must be a clear expression in words or actions that the other individual consented to that specific sexual conduct. Reasonable reciprocation can be implied. For example, if someone kisses you, you can kiss them back (if you want to) without the need to explicitly obtain their consent to being kissed back. Consent can also be withdrawn once given, as long as the withdrawal is clearly communicated. If consent is withdrawn, that sexual activity should cease. Consent to some sexual contact (such as kissing or fondling) cannot be presumed to be consent for other sexual activity (such as intercourse). A current or previous intimate relationship is not sufficient to constitute consent. Proof of consent or non-consent is not a burden placed on either party involved in an incident. Instead, the burden remains on DCB to determine whether its policy has been violated. The existence of consent is based on the totality of the circumstances evaluated from the perspective of a reasonable person in the same or similar circumstances, including the context in which the alleged incident occurred and any similar, previous patterns that may be evidenced.

How To Be An Active Bystander

The Bystander Intervention prevention model supports individuals in group settings to recognize unwelcome conduct, identify points of escalation, and safely support peers with strategies that prevent further harm. This evidence-based approach can have a life-changing impact for individuals and whole communities.

### What is Bystander Intervention?

Bystander Intervention refers to a type of response to situations we may interpret as potentially harmful to another person or people. It requires that we recognize the potential for harm, contemplate our role in responding, and take some form of action. Bystander intervention means safe and positive options that may be carried out by an individual or individuals to prevent harm or intervene when there is a risk of dating violence, domestic violence, sexual assault, or stalking. Bystander intervention includes recognizing situations of potential harm, understanding institutional structures and cultural conditions that facilitate violence, overcoming barriers to intervening, identifying safe and effective intervention options, and taking action to intervene.

### Why might individuals not intervene?

There are several reasons why bystanders may not actively respond. Research on bystander behavior indicates:

- Individuals may not recognize that something is wrong in the first place, especially when certain problematic situations or behaviors are treated as normal.
- Individuals question whether helping out is their responsibility. This concept, called diffusion of responsibility, means that if several people are present, an individual is much less likely to help, believing someone else will.
- Individuals may not intervene if the situation feels ambiguous and the bystander is worried about misjudging the situation. Fearing consequences, social stigma, embarrassment, it can be difficult for an individual to determine how and when to intervene.
- Bystanders may also have to make quick judgments about whether it is safe to intervene. Bystanders often cite that they are less likely to intervene if there is a threat to their safety.

### What can I do?

Active bystander intervention encourages people to watch for behaviors and situations that are harmful to others, and to step in when they can. These are all examples of being an active bystander.

- Watch out for your friends and fellow students/employees. If you see someone who looks like they could be in trouble or need help, ask if they are ok.
- Be direct, delegate responsibility, or cause a distraction when you see a person secludes, hits on, tries to make out with, or has sex with people who are incapacitated.
- Intervene when someone discusses plans to take sexual advantage of another person.
- Believe someone who discloses sexual assault, abusive behavior, or experience with stalking.
- Refer people to on- or off-campus resources listed in this document for support in health, counseling, or with legal assistance.

### Strategies for Intervention

1. Recognize – If you observe or hear of incidents that might constitute or contribute to sexual or gender-based harassment, you have options. If a situation appears to involve unwanted sexual attention or advances, or gender discrimination, ask yourself if anyone involved may need help.
2. Recruit – Seeking the perspective of a friend or colleague may help you to avoid acting on unconscious biases. If you notice a situation and are unsure whether to take action, you can ask for another bystander’s viewpoint to better understand context. Together, you can navigate available options.
3. Respond – If it is safe to do so, you may try to:
  - Directly respond to the potentially harmful behavior
  - Delegate to someone in a trained role, such as an event host, supervisor, or Title IX Coordinator
  - Distract or divert attention such as interrupting the incident or conversation to ask for assistance
  - Delay your exit from the space and simply be present with the other person
4. Remove – If you are able to connect with the person who is potentially being harmed, check in to see what they may need. If the person wishes to remove themselves from the situation, you may offer to connect them with a trusted colleague, friend, or supportive resources.
5. Repeat – Remember, every time you choose to be an active bystander, you are modeling a positive approach for others. Being an active bystander not only helps one person— it sets the tone for the entire Community and can improve the climate around you.

#### Personal Safety: Risk Reduction

People of all identities and backgrounds experience sexual and gender-based harassment. While the responsibility for harassment lies with the individuals who enact the harm, and the systems that have historically supported such harm, we can reduce our own exposure to harm by remaining informed about our rights and resources. Thus, the information below is not mutually exclusive of other forms of prevention but is included to enhance personal safety wherever possible. It is important to remember that everyone has different needs, perspectives, and experiences, so choosing steps that work for you individually is essential. You are encouraged to select among or add to, the following considerations. (Rape, Abuse, & Incest National Network, [www.rainn.org](http://www.rainn.org))

- Be aware of your surroundings. Knowing where you are and who is around you may help you to find a way to get out of a bad situation.
- Try to avoid isolated areas. It is more difficult to get help if no one is around. • Walk with purpose. Even if you don’t know where you are going, act like you do.
- Trust your instincts. If a situation or location feels unsafe or uncomfortable, it probably isn’t the best place to be.
- Make sure your cell phone is with you and charged and that you have cab money and/or an on-demand driver app loaded.
- Don't allow yourself to be isolated with someone you don’t trust or someone you don’t know.
- Avoid putting music headphones in both ears so that you can be more aware of your surroundings, especially if you are walking alone.
- When you go to a social gathering, go with a group of friends. Arrive together, check in with each other throughout the evening, and leave together. Knowing where you are and who is around you may help you to find a way out of a bad situation.
- Don't leave your drink unattended while talking, dancing, using the restroom, or making a phone call. If you’ve
  - left your drink alone, just get a new one.

- Don't accept drinks from people you don't know or trust. If you choose to accept a drink, go with the person to the bar to order it, watch it being poured, and carry it yourself. At parties, don't drink from the punch bowls or other large, common open containers.
- Watch out for your friends, and vice versa. If a friend seems out of it, is too intoxicated for the amount of alcohol they've had, or is acting out of character, get them to a safe place immediately.
- If you suspect you or a friend has been drugged, contact law enforcement immediately (local authorities can be reached by calling 911 in most areas of the U.S.). Be explicit with doctors so they can give you the correct tests (you will need a urine test and possibly others).
- If you need to get out of an uncomfortable or scary situation, here are some things that you can try:
  - a. Remember that being in this situation is not your fault. You did not do anything wrong; it is the person who is making you uncomfortable that is to blame.
  - b. Be true to yourself. Don't feel obligated to do anything you don't want to do. "I don't want to" is always a good enough reason. Do what feels right to you and what you are comfortable with.
  - c. Have a code word with your friends or family so that if you don't feel comfortable you can call them and communicate your discomfort without the person you are with knowing. Your friends or family can then come to get you or make up an excuse for you to leave.
  - d. Lie. If you don't want to hurt the person's feelings it is better to lie and make up a reason to leave than to stay and be uncomfortable, scared, or worse. Some excuses you could use are; needing to take care of a friend or family member, not feeling well, having somewhere else that you need to be, etc.
- Try to think of an escape route. How would you try to get out of the room? Where are the doors? Windows? Are there people around who might be able to help you? Is there an emergency phone nearby?
- If you and/or the other person have been drinking, you can say that you would rather wait until you both have your full judgment before doing anything you may regret later.

Call for Help. If you or someone you know is feeling uncomfortable, scared, or pressured, you can call for help any time. You can contact professionals you trust, which may include the Student Help Line at 701-480-9262. You may also contact the Bottineau County Sheriff's Office or 911 if you need an immediate response.

### Prevention and Awareness Programs and Campaigns

DCB engages in comprehensive, intentional, and integrated programming, initiatives, strategies, and campaigns intended to end dating violence, domestic violence, sexual assault, and stalking that:

- Are culturally relevant, inclusive of diverse communities and identities, sustainable, responsive to community needs, and informed by research, or assessed for value, effectiveness, or outcome; and
- Consider environmental risk and protective factors as they occur on the individual, relationship, institutional, community and societal levels.

DCB's educational programming consists of primary prevention and awareness programs for all incoming students and new employees and ongoing awareness and prevention campaigns for students that:

- Clearly communicate that the institution prohibits the crimes of domestic violence, dating violence, sexual assault, and stalking (as defined by the Clery Act);
- Provide the definitions of domestic violence, dating violence, sexual assault, and stalking according to any applicable jurisdictional definitions of these terms;
- Define consent and describe what behaviors and actions constitute consent, in reference to sexual activity as defined by the student and employee codes of conduct;
- Provide a description of safe and positive options for bystander intervention. Bystander intervention means safe and positive options that may be carried out by an individual or individuals to prevent harm or intervene when there is a risk of dating violence, domestic violence, sexual assault, or stalking. Bystander intervention includes recognizing situations of potential harm, understanding institutional structures and cultural conditions that facilitate violence, overcoming barriers to intervening, identifying safe and effective intervention options, and taking action to intervene.
- Provide information on risk reduction. Risk reduction means options designed to decrease perpetration and bystander inaction, and to increase empowerment for victims in order to promote safety and to help individuals and communities address conditions that facilitate violence.
- Provide an overview of information contained in the Annual Security and Fire Safety Report in compliance with the Clery Act.
- Provide information regarding:
  - a. procedures victims should follow if a crime of domestic violence, dating violence, sexual assault, or stalking occurs (as described in "Procedures Victims Should Follow if a Crime of Domestic Violence, Dating Violence, Sexual

Assault and Stalking Occurs" elsewhere in this Annual Report);

- b. how the institution will protect the confidentiality of victims and other necessary parties (as described in

"Assistance for Victims: Rights and Options" elsewhere in this Annual Report);

- c. existing counseling, health, mental health, victim advocacy, student financial aid, and other services available for victims, both in the institution and in the community (as described in "Assistance for Victims: Rights and Options" elsewhere in this Annual Report); and
- d. options for, available assistance in, and how to request changes to academic, living, transportation, and working situations or protective measures (as described in "Assistance for Victims: Rights and Options" elsewhere in this

Annual Report);

- e. procedures for institutional disciplinary action in cases of alleged dating violence, domestic violence, sexual assault, or stalking (as described in "Adjudication of Violations" elsewhere in this Annual Report).

DCB provides primary prevention and awareness programs to all incoming students and employees that involves the distribution of educational materials to new students, participating in and presenting information and materials during new student and employee orientations, providing programs by invitation at staff meetings or academic programs, and requiring incoming first-year students and

returning upper-class students to take online courses related to sexual harassment and high risk drinking awareness and education. These trainings include:

- Clearly articulated statements that DCB prohibits the crimes of domestic violence, dating violence, sexual assault and stalking.
- The Federal and State definitions of domestic violence, dating violence, sexual assault and stalking;
- The University and State definitions of consent;
- A description of safe and positive options for bystander intervention.
- Information on specific risk reduction strategies.

#### Ongoing Training Initiatives

DCB provides an annual educational campaign for all students and employees designed to provide ongoing education and programming around issues of sexual violence – including sexual assault, domestic violence, dating violence, and stalking. Campaign strategies employed include face-to-face presentations, online training programs, printed materials, selfdefense programming, tabling displays, and related lectures. Ongoing prevention and awareness campaigns include selfdefense programming; domestic violence month events and activities; sexual assault and awareness month, which may include presentations regarding bystander intervention programming; programming specific to developing healthy relationships; and regular student conversations related to sexual assault and relationship violence.

The following are some specific examples of current programs currently offered by DCB. This list is not all inclusive:

- DCB Title IX and DCB Safety webpages contain safety related information about the prevention of sexual violence
- Online Education: All employees and students complete mandatory online training from ?? on an annual basis to promote healthier and a safer campus environment for everyone. The training includes information on sexual misconduct, stalking, and relationship violence as required by the “Campus Save Act”. The DCB Title IX office conducts presentations during staff and faculty in-service in the fall regarding mandatory reporting requirements and support measures.
- comprehensive training is provided to Residence Hall Head Residents and Student Assistants regarding Title IX requirements and proper procedures to follow in Title IX related complaints.
- students can participate in campus awareness events and activities throughout the academic year
- DCB’s Title IX web page is intended to provide student, faculty, and staff with information required under regulations and guidance issued by the US Department of Education Office for Civil Rights. This includes but not limited to nondiscrimination statement, Title IX Coordinator information, training materials used to train the Title IX Team, and 32 grievance procedure.

After an incident of sexual assault, dating violence, or domestic violence, the victim should consider seeking medical attention as soon as possible at St. Andrews or Pyramid Health. Sexual Assault Nurse Examiners are trained and certified in physical evidentiary recovery kit collection. Evidence may be collected, even if the victim chooses not to make a report to law enforcement

The State of North Dakota, which includes the DCB Campus and surrounding area, has established the following reporting options for victims of sexual assault.

1. Immediate Investigation

- The victim reports the details of the sexual assault to law enforcement at the time of the forensic medical exam.

## 2. Delayed Investigation

- The victim does not immediately participate with law enforcement at the time of the forensic medical exam.

*In accordance with NDCC 43-17-41 health care professionals are required to report sexual assaults to law enforcement. The forensic kit with the victim's name and address may be kept by the law enforcement agency in the jurisdiction where the sexual assault occurred for a minimum of seven years or until the victim turns twenty-two, whichever occurs later.*

If a sexual assault victim does not currently wish to involve police, there is still an option to have the forensic evidence collected in a timely manner. As time passes, evidence may dissipate or become lost or unavailable, thereby making investigation, possible prosecution, disciplinary proceedings, or obtaining protection from abuse orders related to the incident more difficult. By providing victims with the opportunity to preserve evidence, gather information, solidify their support system, and establish rapport with first responders, the campus hopes to create an environment that encourages reporting, even for those victims who initially feel unable, unwilling, or unsure about doing so. If the victim so chooses, campus authorities may assist them in notifying and involving law enforcement authorities and campus authorities. It is important that a victim of sexual assault not bathe, douche, smoke, change clothing or clean the bed/linen/area where they were assaulted if the offense occurred within the past 96 hours, so that evidence may be preserved that may assist in proving that the alleged criminal offense occurred/or is occurring, or may be helpful in obtaining a protection order. In circumstances of sexual assault, if victims do not opt for forensic evidence collection, health care providers can still treat injuries and take steps to address concerns of pregnancy and/or sexually transmitted infections. Victims of sexual assault, domestic violence, stalking, and dating violence are encouraged to also preserve evidence by saving text messages, instant messages, social networking pages, other communications, and keeping pictures, logs, or other copies of documents, if they have any, that would be useful to DCB adjudicators/investigators or local police.

### Involvement of Law Enforcement and Campus Authorities

Although DCB strongly encourages all members of its community to report violations of this policy to DCB Housing or DCB Plant Services and/or the Bottineau County Sheriff's Department, it is the victim's choice whether to make such a report.

Furthermore, victims have the right to decline to notify law enforcement. Reporting Incidents of Domestic Violence, Dating Violence, Sexual Assault, and Stalking If you have been the victim of domestic violence, dating violence, sexual assault, or stalking, you should report the incident promptly to the Title IX Coordinator (Laura Halvorson, Title IX Coordinator, Office: Thatcher Hall Library, (701) 228-5460: [Laura.Halvorson@dakotacollege.edu](mailto:Laura.Halvorson@dakotacollege.edu)). Reports of all domestic violence, dating violence, sexual assault, and stalking made to DCB Housing or DCB Plant Services will automatically be referred to the Title IX Coordinator for review.

### Reporting Incidents of Domestic Violence, Dating Violence, Sexual Assault, and Stalking

If you have been the victim of domestic violence, dating violence, sexual assault, or stalking, you should report the incident promptly to the Title IX Coordinator (Laura Halvorson, Thatcher Hall Library – [laura.halvorson@dakotacollege.edu](mailto:laura.halvorson@dakotacollege.edu)). Reports of all domestic violence, dating violence, sexual assault, and stalking made to DCB Housing Staff will automatically be referred to the Title IX Coordinator for review.

## PROCEDURES THE UNIVERSITY WILL FOLLOW WHEN A CRIME OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT, OR STALKING IS REPORTED

DCB has procedures in place that serve to be sensitive to victims who report sexual assault, domestic violence, dating violence, and stalking, including informing individuals about their right to file criminal charges; as well as additional remedies to prevent contact between a complainant and an accused party, such as housing, academic, and working accommodations, if reasonably available. DCB will make such accommodations, if the victim requests them and if they are reasonably available, regardless of whether the victim chooses to report the crime to local law enforcement. Students and employees should contact the Title IX Coordinator for student cases and the DCB Human Resource Office for employee cases.

### Facilitated Anonymous Reporting through DCB Counselors

Counselors at DCB are confidential resources and do not report incidents. In their capacity and function, they do not make identifiable reports of incidents to the official on-campus resources unless the student specifically requests them to do so; however, DCB encourages counselors to inform students that they assist in making an anonymous crime report. Students may request to anonymously report general details about the incident (date, time, location, and brief description of the incident type) for inclusion in the DCB Annual Security and Fire Safety Report.

### Employee Assistance Program

DCB also provides an Employee Assistance Program (EAP) for use by employees. The EAP is available to provide full-time employees assistance with such problems as sexual or physical abuse, depression, marital and relationship conflict, stress, grief, critical incident stress, anxiety, and other personal matters. All full-time employees, regardless of performance, are eligible. All information relating to an employee's EAP participation is strictly confidential. Only the EAP provider maintains EAP records. The EAP provider does not release specific information about an employee's use of EAP services unless the employee gives their advance written consent. The EAP does not report incidents to any Official On-Campus Resources unless the employee specifically gives them permission to do so.

### Assistance for Victims: Rights and Options

Regardless of whether a victim elects to pursue a criminal complaint or whether the offense is alleged to have occurred on or off campus, DCB will assist victims of sexual assault, domestic violence, dating violence, and stalking and will provide each victim with a written explanation of their rights and options.

Such written information will include:

- the procedures victims should follow if a crime of dating violence, domestic violence, sexual assault, or stalking has occurred.
- information about how the institution will protect the confidentiality of victims and other necessary parties.
- a statement that the institution will provide written notification to students and employees about victim services in the institution and in the community.
- a statement regarding the institution's provisions about options for, available assistance in, and how to request accommodations and protective measures; and
- an explanation of the procedures for institutional disciplinary action



Orders of Protection, No-Contact Orders, Restraining Orders, or Similar Lawful Orders Issued by a Criminal, Civil, or Tribal Court or by DCB

DCB complies with North Dakota State law in recognizing orders of protection. Any person who obtains an order of protection from North Dakota or any reciprocal state should provide a copy to DCB Housing, DCB Plant Services or the DCB Dean's Office and the Title IX Coordinator. A complainant may then meet with DCB Staff and Title IX Coordinator to develop a Safety Action Plan, which is a plan DCB Staff and the victim to reduce the risk of harm while on campus or coming and going from campus. This plan may include, but is not limited to: escorts, special parking arrangements, changing classroom/work site location, or working with Academic Advising on alternative class possibilities, allowing a student to complete assignments from home, allowing an employee to develop a flexible work schedule, etc. DCB cannot apply for a legal order of protection, No Contact order, or restraining order for a victim from the applicable jurisdiction(s).

In North Dakota, a victim of domestic violence, dating violence, sexual assault, or stalking has the right to file a petition with the courts requesting protection through Domestic Violence Protection Orders, Sexual Assault Restraining Orders, Emergency Protection Orders, Temporary Protection Orders, Disorderly Conduct Restraining Orders, and/or Out-of-State or Tribal Court Protection Orders, which could include the following:

- An order restraining the abuser from further acts of abuse.
- Orders the abuser to avoid the conduct or have no contact with the applicant
- An order directing the abuser to leave the victim's household/place of residence.
- An order directing the abuser to refrain from stalking or harassing the victim or other designated persons.
- Protection Order

According to NDCC 14-07.1.02 a protection order restrains one person from:

- Threatening;
- Molesting;
- Injuring;
- Harassing;
- Or having any contact with another person.

A protection order is issued by a court. According to North Dakota Supreme Court Administrative Rule 34, Certified Domestic Violence Advocates may assist people in completing the necessary forms and may appear with them at protection order hearings and other protections based on issues related to cohabitation, residency, employment, and child custody.

Domestic Violence Protection Order (DVPO)

A spouse or former spouse; a family member; a parent; a child; a person related by blood or marriage; a person presently residing with the abusing person or who has resided with that person in the past; a person who has a child in common with the abusing person; persons who are in a dating relationship; or any other person with sufficient relationship to the abusing person as determined by the Judge or Judicial Referee may file a petition with the courts for a DVPO. A protection order is issued by a court. According to North Dakota Supreme Court Administrative Rule 34, Certified Domestic Violence Advocates may assist people in completing the necessary forms and may appear with them at protection order hearings.

## Sexual Assault Restraining Order (SARO)

Any adult individual who is a victim of sexual assault; or the parent, step-parent, or guardian of a minor child (under 18 years of age) who the parent, step-parent, or guardian reasonably believes is a victim of sexual assault may file a petition with the courts requesting a SARO.

## Disorderly Conduct Restraining Order (DCRO)

An adult individual who is a victim of disorderly conduct; or an adult individual who is the parent or guardian of a minor who is a victim of disorderly conduct may file a petition with the courts for a DCRO.

"Disorderly conduct" means intrusive or unwanted acts, words, or gestures that are intended to adversely affect the safety, security, or privacy of another person. For the purposes of this section, disorderly conduct includes human trafficking or attempted human trafficking as defined in this title. Disorderly conduct does not include constitutionally protected activity. Both DVPOs and SAROs prohibit an offender from having any contact with the victim. Protections can include preventing the offender from entering the victim's home, workplace, or school. Both orders can also be expanded to prevent intimidation/ contact from a third party on behalf of the offender, or extend protection to related parties, such as parents, siblings, or children of the victim. A Judge or Judicial Referee will sign the Domestic Violence Protection Order and specify the length. Both Sexual Assault and Disorderly Conduct Restraining Orders may not exceed 2 years. DCB Housing and/or DCB Plant Services will help put victims who are interested in pursuing a DVPO, SARO, or DCRO in contact with local courts or the local advocacy center. Any student who obtains a protection order from the State of North Dakota or any reciprocal State should provide a copy to DCB Housing or DCB Plant Services. DCB Housing and/or DCB Plant Services will file charges of violations of DVPO, SARO, DCRO with the State Attorney's Office.

## No Contact Order

While not the same as a state-mandated protection order, DCB can issue a No Contact order. The No Contact Order may be issued if an abuser is released from custody on bond before an arraignment or trial. In the case of Domestic Violence law enforcement may make a probable cause arrest if a No Contact Order is violated by an abuser. The No Contact Order includes, but is not limited to, communication that is written, verbal, or physical. Written communication is understood to include all electronic means of communication, including, but not limited to email, instant messaging, and text messaging. Verbal communication is understood to include phone calls and voice mail messages. A No Contact order may include additional restrictions and terms. If DCB receives a report that such an institutional No Contact order has been violated, DCB will initiate disciplinary proceedings appropriate to the status of the accused (student, employee, etc.) and will impose sanctions if the accused is found responsible for violating the No Contact order.

## Supportive Measures

Upon receipt of a report of domestic violence, dating violence, sexual assault, or stalking, DCB will provide written notification to students and employees about accommodations available to them, including academic, living, transportation, and working situations. The written notification will include information regarding the accommodation options, available assistance in requesting accommodations, and how to request accommodations and protective measures (i.e., the notification will include the name and contact information for the individual or office that should be contacted to request the accommodations). At the victim's request, and to the extent of the victim's cooperation and consent, DCB offices will work cooperatively to assist the victim in obtaining accommodations. If reasonably available, a victim may be offered changes to academic, living, working, or transportation situations regardless of whether the victim chooses to report the crime to law enforcement. Any supportive or protective measures will be maintained as confidential as provided to the victim, to the extent that maintaining

such confidentiality would not impair the ability of the institution to provide the supportive or protective measures. Examples of options for a potential change to the academic situation may be to transfer to a different section of a class, withdraw and take a class at another time if there is no option for moving to a different section, etc. Potential changes to living situations may include moving to a different room or residence hall. Possible changes to work situations may include changing working hours. Possible changes in transportation may include having the student or employee park in a different location, assisting the student or employee with a safety escort, etc.

To request changes to academic, living, transportation, and/or working situations, or protective measures, a victim should:

- Students: Contact the Title IX Coordinator for assistance.
- Employees: Contact the Title IX Office for assistance in initiating support measures for employees

If the victim wishes to receive assistance in requesting these accommodations, the victim should contact the Title IX Coordinator.

#### Statewide Automated Victim Information Notification System (SaVin)

The Statewide Automated Victim Information Notification system can provide electronic notifications by email, text message or phone calls and can include the following:

- Offender Incarceration
- Offender Criminal Case Information regarding case status and disposition
- Offender Parole and Probation – change of address, offender absconded or returned, revocation status and expiration or discharge
- Protection and Restraining Orders – Service of Orders, hearing schedule and changes, order status, and expiration SaVin Registration by Telephone: call 1-866-631-8463 and then press 1-1-0 to speak to an operator.

#### Confidentiality

DCB does not publish the name of crime victims or other identifiable information regarding victims in the Daily Crime and

Fire Log or in the annual crime statistics that are disclosed in compliance with the Jeanne Clery Disclosure of Campus Security Policy. Furthermore, if a timely warning notice is issued based on a report of domestic violence, dating violence, sexual assault, or stalking, the name of the victim and other personally identifiable information about the victim will be withheld; this could include the specific location where an incident is reported to have occurred when reporting the location could inadvertently identify the victim.

#### On- and Off-campus Services for Victims

Upon receipt of a report of domestic violence, dating violence, sexual assault, or stalking, the DCB Title IX office will assist and/or provide information regarding resources and services, including counseling, health, mental health, victim advocacy, legal assistance, student financial aid, and assistance in notifying appropriate local law enforcement. If a sexual assault or rape should occur on campus, staff on-scene, will offer the victim a wide variety of services. This information regarding “resources” is not provided to infer that those resources are “crime reporting entities” for DCB.

On Campus	Employees	Students
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Counseling/Mental Health	Access online resources at <a href="http://villageeap.com">http://villageeap.com</a> or call 1-800-6278220. (Emotional Health, Drug and Alcohol, Workplace Issues, Financial Issues, Legal, and Health and Wellness educational programs)	DCB Counseling and Mental Health Corey Gorder – Thatcher Hall Student Services (701) 228-5451 Corey.gorder@dakotacollege.edu
Title IX Coordinator Sexual Misconduct Victim Advocacy	Laura Halvorson Thatcher Hall Library (701) 228-5680 Laura.halvorson@dakotacollege.edu	Laura Halvorson Thatcher Hall Library (701) 228-5680 Laura.halvorson@dakotacollege.edu
Student Financial Aid	Lisa Anderson – Thatcher Hall (701) 228-5427 Lisa.anderson.2@dakotacollege.edu Jalee Lynnes – Thatcher Hall (701) 228-5440 Jalee.lynnes@dakotacollege.edu	Lisa Anderson – Thatcher Hall (701) 228-5427 Lisa.anderson.2@dakotacollege.edu Jalee Lynnes – Thatcher Hall (701) 228-5440 Jalee.lynnes@dakotacollege.edu
DCB Housing	Director of Student Life and Housing Bridget Gustafson Thatcher Hall – Student Services (701) 228-5657 Bridget.gustafson@dakotacollege.edu	Director of Student Life and Housing Bridget Gustafson Thatcher Hall – Student Services (701) 228-5657 Bridget.gustafson@dakotacollege.edu
Sheriff's Department	Bottineau County Sheriff's Department 314 5 <sup>th</sup> St W Bottineau, ND. 58318 (701) 228-2740 Emergency - 911	Bottineau County Sheriff's Department 314 5 <sup>th</sup> St W Bottineau, ND. 58318 (701) 228-2740 Emergency - 911
Off Campus	Employees	Students
Victim Advocacy	Bottineau Family Crisis Center 509 Main Street Bottineau, ND 58318 (701) 228-2028  National Domestic Violence Hotline 1-800-799-7233 Text: 88788 www.thehotline.org	Bottineau Family Crisis Center 509 Main Street Bottineau, ND 58318 (701) 228-2028  National Domestic Violence Hotline 1-800-799-7233 Text: 88788 www.thehotline.org
Public Health	First District Health Unit	First District Health Unit
	314 5 <sup>th</sup> St W #7 Bottineau, ND. 58318 (701) 228-3101	314 5 <sup>th</sup> St W #7 Bottineau, ND. 58318 (701) 228-3101
Social Services	Bottineau County Social Services 314 5 <sup>th</sup> St W Bottineau, ND. 58318 (701) 228-3613	Bottineau County Social Services 314 5 <sup>th</sup> St W Bottineau, ND. 58318 (701) 228-3613

Legal Assistance	Legal Services of North Dakota Age less than 60: 1-800-634-5463 Age 60+: 1-866-621-9886 www.legalassist.org	
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Other resources available to persons who report being the victim of sexual assault, domestic violence, dating violence, or stalking, include:

- Rape, Abuse and Incest National Network - <http://www.rainn.org>
- Department of Justice - <https://www.justice.gov/ovw/sexual-assault>
- Department of Education, Office of Civil Rights - <http://www2.ed.gov/about/offices/list/ocr/index.html>

## RESOLUTION PROCESS FOR ALLEGED VIOLATIONS OF THE SEXUAL HARASSMENT

### POLICY Overview

DCB will act on any formal or informal notice/complaint of violation of the policy that is received by the Title IX

Coordinator (or designee) by applying these procedures. The procedures below apply to qualifying allegations of Title IX sexual Harassment (including sexual assault, dating violence, domestic violence, and stalking, as defined in the Policy) involving students, staff, administrators, or faculty members. A set of technical dismissal requirements within the Title IX regulations may apply as described below, but when a technical dismissal under the Title IX allegations is required, any remaining allegations will proceed using these same grievance procedures, clarifying which policies above are applicable. Although the effect of the Title IX regulations can be confusing, these grievance procedures apply to all policies above.

### Notice/Complaint

Upon receipt of a complaint or notice to the Title IX Coordinator (or designee) of an alleged violation of the Policy, the University initiates a prompt initial assessment to determine next steps taken. DCB will initiate at least one of three responses:

1. Offering supportive measures because the Complainant does not want to proceed formally; and/or
2. An informal resolution (upon submission of a Formal Complaint); and/or
3. A formal Grievance Process including an investigation and a hearing (upon submission of a Formal Complaint).

- A Formal Grievance Process will determine whether or not the Policy has been violated. If so, DCB will promptly implement effective remedies designed to ensure that it is not deliberately indifferent to harassment or misconduct, their potential recurrence, or their effects.

### Initial Assessment

Following receipt of notice or a formal complaint of an alleged violation of this Policy, the Title IX Coordinator (or designee) engages in an initial assessment, which is typically one to five business days in duration. The steps in an initial assessment can include:

1. The Title IX Coordinator (or designee) seeks to determine if the person impacted wishes to make a Formal Complaint, and will assist them to do so, if desired. If they do not wish to do so, the Title IX Coordinator (or designee) determines whether to initiate a complaint themselves because a violence risk assessment indicates a compelling threat to health and/or safety.
2. If a formal complaint is received, the Title IX Coordinator (or designee) assesses its sufficiency and works with the Complainant to make sure it is correctly completed.
3. The Title IX Coordinator (or designee) reaches out to the Complainant to offer supportive measures.
4. The Title IX Coordinator (or designee) works with the Complainant to ensure they are aware of the right to have an Advisor.
5. The Title IX Coordinator (or designee) works with the Complainant to determine whether the Complainant prefers a supportive and remedial response, an informal resolution option, or a formal investigation and grievance process.
6. If a supportive and remedial response is preferred, the Title IX Coordinator (or designee) works with the Complainant to

identify their desired supportive measures and then seeks to facilitate implementation, if appropriate. No Formal Grievance Process is initiated, though the Complainant can elect to initiate one later, if desired.

7. If an informal resolution option is preferred, the Title IX Coordinator (or designee) assesses whether informal resolution of the complaint is permissible and may seek to determine if the Respondent is also willing to engage in informal resolution.
8. If a Formal Grievance Process is preferred, the Title IX Coordinator (or designee) determines if the misconduct alleged falls within the scope of Title IX: a. If it does, the Title IX Coordinator (or designee) will initiate the formal investigation and grievance process, directing the investigation to address:
  - i. an incident, and/or ii. a pattern of alleged misconduct, and/or iii. a culture/climate issue, based on the nature of the complaint.
9. If it does not, the Title IX Coordinator (or designee) determines that Title IX does not apply (and will dismiss that aspect of the complaint, if any), assesses which policies may apply, and will refer the matter accordingly (i.e. Student Conduct Policy; Human Resource Policy; Academic Affairs Policy). Please note that dismissing a complaint under Title IX is just procedural and does not limit DCB's authority to address a complaint with an appropriate process and remedies.

#### Violence Risk Assessment

In some cases, the Title IX Coordinator (or designee) may determine that a Violence Risk Assessment (VRA) should be conducted by the Behavioral Intervention Team (BIT) as part of the initial assessment. A VRA can aid in critical and/or required determinations, including:

- Emergency removal of a Respondent on the basis of immediate threat to physical health/safety;
- Whether the Title IX Coordinator (or designee) should pursue/sign a formal complaint absent a willing/able

Complainant;

- Whether to put the investigation on the footing of incident and/or pattern and/or climate;

- To help identify potential predatory conduct and/or grooming behaviors;
- Whether it is reasonable to try to resolve a complaint through informal resolution, and what modality may be most successful;
- Whether to permit a voluntary withdrawal from the University by the Respondent;
- Whether to impose transcript notation or communicate with a transfer Recipient about a Respondent;
- Assessment of appropriate sanctions/remedies (to be applied post-hearing);and/or
- Whether a Clery Act Timely Warning/Trespass order/Persona-non-grata is needed.

Threat assessment is the process of evaluating the legitimacy of the threat of violence by an individual against another person or group following the issuance of a direct or conditional threat. A VRA is a broader term used to assess any potential violence or danger, regardless of the presence of a vague, conditional, or direct threat. VRAs require specific training and are typically conducted by the BIT team members. A VRA authorized by the Title IX Coordinator (or designee) should occur in collaboration with the BIT. Where a VRA is required by the Title IX Coordinator (or designee), a Respondent refusing to cooperate may result in a charge of failure to comply within the appropriate student or employee conduct process. A VRA is not a psychological or mental health assessment. A VRA assesses the legitimate risk of violence, often with a focus on targeted/predatory escalations, and is supported by research.

#### Dismissal (34 CFR Part 106.45)

DCB must dismiss a formal complaint under Title IX or any allegations therein if, at any time during the investigation or hearing, it is determined that:

1. The conduct alleged in the formal complaint would not constitute sexual harassment as defined in this Policy, even if proved; and/or
2. The conduct did not occur in an educational program or activity controlled by DCB (including buildings or property controlled by recognized student organizations); and/or
3. The conduct did not occur against a person in the United States; and/or
4. At the time of filing a formal complaint, a complainant is not participating in or attempting to participate in the education program or activity of the recipient.

DCB may dismiss a formal complaint under Title IX or any allegations therein if, at any time during the investigation or hearing:

1. A Complainant notifies the Title IX Coordinator (or designee) in writing that the Complainant would like to withdraw the formal complaint or any allegations therein; or
2. The Respondent is no longer enrolled in or employed by the recipient; or
3. Specific circumstances prevent the University from gathering evidence sufficient to reach a determination as to the formal complaint or allegations therein.

Upon any dismissal, DCB will promptly send written notice of the dismissal and the rationale for doing so simultaneously to the parties. This dismissal decision is appealable by any party under the procedures for appeal below. A Complainant who decides to withdraw a complaint may later request to reinstate it or refile it.

#### Counterclaims

DCB is obligated to ensure that the grievance process is not abused for retaliatory purposes. DCB permits the filing of counterclaims but uses an initial assessment, described above, to assess whether the allegations in the counterclaim are made in good faith. Counterclaims by the Respondent may be made in good faith, but are, on occasion, also made for purposes of retaliation. Counterclaims made with retaliatory intent will not be permitted. Counterclaims determined to have been reported in good faith will be processed using the grievance procedures below. Investigation of such claims may take place after resolution of the underlying initial allegation, in which case a delay may occur. Counterclaims may also be resolved through the same investigation as the underlying allegation, at the discretion of the Title IX Coordinator (or designee). When counterclaims are not made in good faith, they will be considered retaliatory and may constitute a violation of this policy.

#### Right to an Advisor

The parties may each have an Advisor of their choice present with them for all meetings and interviews within the resolution process, if they so choose. The parties may select whoever they wish to serve as their Advisor as long as the Advisor is eligible and available. This could include an attorney, advocate, or support person. The law permits one Advisor for each party (witnesses are not entitled to Advisors within the process, though they can be advised externally). The University may permit parties to have more than one Advisor upon special request to the Title IX Coordinator (or designee). The decision to grant this request is at the sole discretion of the Title IX Coordinator (or designee) and will be granted equitably to all parties.

#### Advisors

The Advisor may be a friend, mentor, family member, attorney, or any other individual a party chooses to advise, support, and/or consult with them throughout the resolution process. The parties may choose Advisors from inside or outside of the DCB campus community. Institutions are not required to provide attorneys to parties to act as advisor. However, the Title IX Coordinator (or designee) will offer to assign a trained Advisor for any party if the party so chooses. If the parties choose an Advisor from the pool available from the University, the Advisor will be trained and be familiar with the University's resolution process. If the parties choose an Advisor from outside the University pool, the Advisor may not have been trained and may not be familiar with DCB policies and procedures. Institutions are not required to attempt to create equality of advisors between that parties, particularly where one party selects an outside advisor, but should endeavor to seek parity of advisors the institution provides advisor to both parties. Parties also have the right to choose not to have an Advisor in the initial stages of the resolution process, prior to a hearing.

#### Advisors in Hearings

Under U.S. Department of Education regulations applicable to Title IX, cross-examination is required during the hearing, but must be conducted by the parties' Advisors. The parties are not permitted to directly cross-examine each other or any witnesses. If a party does not have an Advisor for a hearing, the University will appoint a trained Advisor for the limited purpose of conducting any cross-examination. A party may reject this appointment and choose their own Advisor, but they may not proceed without an Advisor. If the party's Advisor will not conduct cross-examination, DCB will appoint an Advisor who will do so thoroughly, regardless of the participation or non-participation of the advised party in the hearing itself. Extensive questioning of the parties and witnesses will also be conducted by the Decision-maker(s) during the hearing.

#### Advisor's Role

The parties may be accompanied by their Advisor in all meetings and interviews at which the party is entitled to be present, including intake and interviews. Advisors should help the parties prepare for each



meeting and are expected to advise ethically, with integrity, and in good faith. The University cannot guarantee equality in Advisors, meaning that if one party selects an Advisor who is an attorney, but the other party does not or cannot afford an attorney, the University is not obligated to provide an attorney.

#### Pre-Interview Meetings

Advisors may request to meet with the administrative officials conducting interviews/meetings in advance of these interviews or meetings. This pre-meeting allows Advisors to clarify and understand their role and DCB's policies and procedures

#### Advisor Violations of DCB Policy

All Advisors are subject to the same DCB policies and procedures, whether they are attorneys or not. Advisors are expected to advise their advisees without disrupting proceedings. Advisors should not address DCB officials in a meeting or interview unless invited to (e.g., asking procedural questions). The Advisor may not make a presentation or represent their advisee during any meeting or proceeding and may not speak on behalf of the advisee to the Investigator(s) or other Decisionmaker(s) except during a hearing proceeding, during cross-examination. The parties are expected to ask and respond to questions on their own behalf throughout the investigation phase of the resolution process. Although the Advisor generally may not speak on behalf of their advisee, the Advisor may consult with their advisee, either privately as needed, or by conferring or passing notes during any resolution process meeting or interview. For longer or more involved discussions, the parties and their Advisors should ask for breaks to allow for private consultation. Any Advisor who oversteps their role as defined by this policy will be warned only once. If the Advisor continues to disrupt or otherwise fails to respect the limits of the Advisor role, the meeting will be ended, or other appropriate measures implemented, possibly including removing the Advisor from the meeting. Subsequently, the Title IX Coordinator (or designee) will determine how to address the Advisor's non-compliance and future role.

#### Sharing Information with the Advisor

DCB expects that the parties may wish to have them share documentation and evidence related to the allegations with their Advisors. Parties may share this information directly with their Advisor or other individuals if they wish. Doing so may help the parties participate more meaningfully in the resolution process. The University also provides a consent form that authorizes DCB to share such information directly with their Advisor. The parties must either complete and submit this form to the Title IX Coordinator (or designee) or provide similar documentation demonstrating consent to a release of information to the Advisor before the University is able to share records with an Advisor. If a party requests that all communication be made through their attorney Advisor, DCB will comply with that request.

#### Privacy of Records Shared with Advisor

Advisors are expected to maintain the privacy of the records shared with them. These records may not be shared with third parties, disclosed publicly, or used for purposes not explicitly authorized by DCB. DCB may seek to restrict the role of any Advisor who does not respect the sensitive nature of the process or who fails to abide by the Recipient's privacy expectations.

#### Expectations of an Advisor

DCB generally expects an Advisor to adjust their schedule to allow them to attend DCB meetings when planned but may change scheduled meetings to accommodate an Advisor's inability to attend, if doing so does not cause an unreasonable delay. DCB may also make reasonable provisions to allow an Advisor who cannot attend in person to attend a meeting by telephone, video conferencing, or other similar technologies as may be convenient and available. Expectations of the Parties with Respect to Advisors A

party may elect to change Advisors during the process and is not obligated to use the same Advisor throughout, with the exception that a party cannot dismiss an Advisor who was appointed by DCB except in the case of bias or conflict of interest. The parties are expected to inform the Investigator(s) of the identity of their Advisor at least two (2) business days before the date of their first meeting with Investigators. The parties are expected to provide timely notice to the Title IX Coordinator (or designee) if they change Advisors at any time. It is assumed that if a party changes Advisors, consent to share information with the previous Advisor is terminated, and a release for the new Advisor must be secured. Parties are expected to inform the Title IX Coordinator (or designee) of the identity of their hearing Advisor at least two (2) business days before the hearing.

## Resolution Processes

Resolution proceedings are private. All persons present at any time during the resolution process are expected to maintain the privacy of the proceedings in accordance with DCB policy. While there is an expectation of privacy around what Investigators share with parties during interviews, the parties have discretion to share their own knowledge and evidence with others if they so choose. DCB encourages parties to discuss this with their Advisors before doing so.

## Informal Resolution

Informal Resolution can include three different approaches:

1. When the Title IX Coordinator(or designee) can resolve the matter informally by providing supportive measures to remedy the situation.
2. When the parties agree to resolve the matter through an alternate resolution mechanism including mediation, restorative practices, etc.;
3. When the Respondent accepts responsibility for violating policy, and desires to accept a sanction and end the resolution process; or

To initiate Informal Resolution, a Complainant needs to submit a formal complaint, as defined above. If a Complainant or Respondent wishes to initiate Informal Resolution, they should contact the Title IX Coordinator (or designee) to so indicate. It is not necessary to pursue Informal Resolution first in order to pursue a Formal Grievance Process, and any party participating in Informal Resolution can stop the process at any time and begin or resume the Formal Grievance Process. Prior to implementing Informal Resolution, DCB will provide the parties with written notice of the reported misconduct and any sanctions or measures that may result from participating in such a process, including information regarding any records that will be maintained or shared by DCB. DCB will obtain voluntary, written confirmation that all parties wish to resolve the matter through Informal Resolution before proceeding and will not pressure the parties to participate in Informal Resolution. The Title IX Coordinator (or designee) may look to the following factors to assess whether Informal Resolution is appropriate:

- The parties' amenability to Informal Resolution;
- Likelihood of potential resolution, taking into account any power dynamics between the parties;
- The parties' motivation to participate;
- Civility of the parties;
- Cleared violence risk assessment/ongoing risk analysis;
- Disciplinary history; • Whether an emergency removal is needed;
- Skill of the facilitator with this type of complaint;

- Complaint complexity;
- Emotional investment/intelligence of the parties;
- Rationality of the parties;
- Goals of the parties;
- Adequate resources to invest in Informal Resolution (time, staff, etc.)

The ultimate determination of whether Informal Resolution is available or successful is to be made by the Title IX Coordinator (or designee). The Title IX Coordinator (or designee) maintains records of any resolution that is reached, and failure to abide by the resolution agreement may result in appropriate responsive/disciplinary actions. Results of complaints resolved by Informal Resolution are not appealable. Informal Resolution is not permitted when it has been alleged that an employee has harassed a student.

#### Respondent Accepts Responsibility for Alleged Violations

The Respondent may accept responsibility for all or part of the alleged policy violations at any point during the resolution process. If the Respondent indicates an intent to accept responsibility for all of the alleged misconduct, the formal process will be paused, and the Title IX Coordinator (or designee) will determine whether Informal Resolution can be used according to the criteria above. If Informal Resolution is applicable, the Title IX Coordinator (or designee) will determine whether all parties and DCB are able to agree on responsibility, sanctions, and/or remedies. If so, the Title IX Coordinator (or designee) implements the accepted finding that the Respondent is in violation of DCB policy and implements agreed-upon sanctions and/or remedies, in coordination with other appropriate administrator(s), as necessary. This result is not subject to appeal once all parties indicate their written assent to all agreed-upon terms of resolution. When the parties cannot agree on all terms of resolution, the Formal Grievance Process will resume at the same point where it was paused. When a resolution is accomplished, the appropriate sanction or responsive actions are promptly implemented in order to effectively stop the harassment or misconduct, prevent its recurrence, and remedy the effects of the discriminatory conduct, both on the Complainant and the community.

#### Formal Grievance Process Pool

The Formal Grievance Process relies on a pool of administrators to carry out the process.

##### A. Pool Member Roles

Members of the Pool are trained at least annually, and can serve in the following roles, at the direction of the Title IX Coordinator (or designee):

- To provide appropriate intake of and initial guidance pertaining to complaints
- To act as an Advisor to the parties
- To serve in a facilitation role in informal resolution if appropriately trained in appropriate resolution modalities (e.g., mediation, restorative practices)
- To investigate complaints
- To serve as a hearing facilitator (process administrator, no decision-making role)
- To serve as a Decision-maker regarding the complaint
- To serve as an Appeal Decision-maker

The Title IX Coordinator (or designee), in consultation with the President, appoints the Pool, which acts with independence and impartiality.

The Pool members receive annual training based on their respective roles. This training includes, but is not limited to:

- The scope of DCB’s Sexual Harassment Policy and Procedures
- How to conduct investigations and hearings that protect the safety of Complainants and Respondents, and promote accountability
- Implicit bias
- Disparate treatment and impact
- Reporting, confidentiality, and privacy requirements
- Applicable laws, regulations, and federal regulatory guidance
- How to implement appropriate and situation-specific remedies
- How to investigate in a thorough, reliable, and impartial manner
- How to uphold fairness, equity, and due process
- How to weigh evidence
- How to conduct questioning
- How to assess credibility
- Impartiality and objectivity
- How to render findings and generate clear, concise, evidence-based rationales
- The definitions of all offenses
- How to apply definitions used by the recipient with respect to consent (or the absence or negation of consent) consistently, impartially, and in accordance with policy
- How to conduct an investigation and grievance process including hearings, appeals, and informal resolution processes
- How to serve impartially by avoiding prejudgment of the facts at issue, conflicts of interest, and bias
- Any technology to be used at a live hearing
- Issues of relevance of questions and evidence
- Issues of relevance to create an investigation report that fairly summarizes relevant evidence
- How to determine appropriate sanctions in reference to all forms of harassment and/or retaliation allegations
- Recordkeeping

#### Formal Grievance Process

The Title IX Coordinator (or designee) will provide written notice of the investigation and allegations (the “NOIA”) to the Respondent upon commencement of the Formal Grievance Process. This facilitates the

Respondent's ability to prepare for the interview and to identify and choose an Advisor to accompany them. The NOIA is also copied to the Complainant, who is to be given advance notice of when the NOIA will be delivered to the Respondent.

The NOIA will include:

- A meaningful summary of all of allegations,
- The identity of the involved parties (if known),
- The precise misconduct being alleged,
- The date and location of the alleged incident(s) (if known),
- The specific policies implicated,
- A description of the applicable procedures,
- A statement of the potential sanctions/responsive actions that could result,
- A statement that DCB presumes the Respondent is not responsible for the reported misconduct unless and until the evidence supports a different determination,
- A statement that determinations of responsibility are made at the conclusion of the process and that the parties will be given an opportunity to inspect and review all directly related and/or relevant evidence obtained during the review and comment period,
- A statement about the University's policy on retaliation,
- Information about the privacy of the process,
- Information on the need for each party to have an Advisor of their choosing and suggestions for ways to identify an Advisor,
- A statement informing the parties that the DCB's Policy prohibits knowingly making false statements, including knowingly submitting false information during the resolution process,
- The name(s) of the Investigator(s), along with a process to identify, in advance of the interview process, to the Title IX Coordinator(or designee) any conflict of interest that the Investigator(s) may have, and
- An instruction to preserve any evidence that is directly related to the allegations.

Amendments and updates to the NOIA may be made as the investigation progresses and more information becomes available regarding the addition or dismissal of various charges.

Notice will be made in writing and may be delivered by one or more of the following methods: in person, mailed to the local or permanent address (es) of the parties as indicated in official DCB records, or emailed to the parties' campus issued email or designated accounts. Once mailed, emailed, and/or received in-person, notice will be presumptively delivered.

#### Resolution Timeline

DCB will make a good faith effort to complete the resolution process within a 60 to 90 business- day time period, including appeal, which can be extended as necessary for appropriate cause by the Title IX Coordinator (or designee), who will provide notice and rationale for any extensions or delays to the parties as appropriate, as well as an estimate of how much additional time will be needed to complete the process.

#### Appointment of Investigators

Once the decision to commence a formal investigation is made, the Title IX Coordinator (or designee) appoints Pool members to conduct the investigation (typically using a team of two Investigators), usually within two (2) business days of determining that an investigation should proceed.

#### Ensuring Impartiality

Any individual materially involved in the administration of the resolution process [including the Title IX Coordinator (or designee), Investigator(s), and Decision-maker(s)] may neither have nor demonstrate a conflict of interest or bias for

Complainants or Respondents generally, or for a specific party. The Title IX Coordinator (or designee) will vet the assigned Investigator(s) to ensure impartiality by ensuring there are no actual or apparent conflicts of interest or disqualifying biases. The parties may, at any time during the resolution process, raise a concern regarding bias or conflict of interest, and the Title IX Coordinator (or designee) will determine whether the concern is reasonable and supportable. If so, another Pool member will be assigned and the impact of the bias or conflict, if any, will be remedied. If the source of the conflict of interest or bias is the Title IX Coordinator (or designee), concerns should be raised with the DCB's Associate Dean for Student Services. The Formal Grievance Process involves an objective evaluation of all relevant evidence obtained, including evidence which supports that the Respondent engaged in a policy violation and evidence which supports that the Respondent did not engage in a policy violation. Credibility determinations may not be based solely on an individual's status or participation as a Complainant, Respondent, or witness. DCB operates with the presumption that the Respondent is not responsible for the reported mis- conduct unless and until the Respondent is determined to be responsible for a policy violation by the applicable standard of proof.

#### Investigation Timeline

Investigations are completed expeditiously, normally within thirty (30) calendar days, though some investigations may take weeks or even months, depending on the nature, extent, and complexity of the allegations, availability of witnesses, police involvement, etc. DCB will make a good faith effort to complete investigations as promptly as circumstances permit and will communicate regularly with the parties to update them on the progress and timing of the investigation. Delays in the Investigation Process and Interactions with Law Enforcement DCB may undertake a short delay in its investigation (several days to a few weeks) if circumstances require. Such circumstances include but are not limited to: a request from law enforcement to temporarily delay the investigation, the need for language assistance, the absence of parties and/or witnesses, and/or accommodations for disabilities or health conditions.

DCB will communicate in writing the anticipated duration of the delay and reason to the parties and provide the parties with status updates if necessary. DCB will promptly resume its investigation and resolution process as soon as feasible. During such a delay, DCB will implement supportive measures as deemed appropriate.

DCB's action(s) are not typically altered or precluded on the grounds that civil or criminal charges involving the underlying incident(s) have been filed or that criminal charges have been dismissed or reduced.

#### Investigation Process Steps

All investigations are thorough, reliable, impartial, prompt, and fair. Investigations involve interviews with all relevant parties and witnesses; obtaining available, relevant evidence; and identifying sources of expert information, as necessary. All parties have a full and fair opportunity, through the investigation process, to suggest witnesses and questions, to provide evidence and expert witnesses, and to fully review and respond to all evidence on the record.

The Investigator(s) typically take(s) the following steps, if not already completed (not necessarily in this order):

- Determine the identity and contact information of the Complainant
- Identify all policies implicated by the alleged misconduct and notify the Complainant and Respondent of all of the specific policies implicated
- Assist the Title IX Coordinator (or designee), if needed, with conducting a prompt initial assessment to determine if the allegations indicate a potential policy violation
- Commence a thorough, reliable, and impartial investigation by identifying issues and developing a strategic investigation plan, including a witness list, evidence list, intended investigation timeframe, and order of interviews for the parties and witnesses
- Meet with the Complainant to finalize their interview/statement, if necessary
- Work with the Title IX Coordinator ( or designee), as necessary, to prepare the initial Notice of Investigation and

Allegations (NOIA). The NOIA may be amended with any additional or dismissed allegations

o Notice should inform the parties of their right to have the assistance of an Advisor, who could be a member of the Pool or an Advisor of their choosing present for all meetings attended by the party

- Provide each interviewed party and witness an opportunity to review and verify the Investigator's summary notes (or transcript) of the relevant evidence/testimony from their respective interviews and meetings
- Make good faith efforts to notify each party of any meeting or interview involving another party, in advance when possible
- When participation of a party is expected, provide that party with written notice of the date, time, and location of the meeting, as well as the expected participants and purpose
- Interview all available, relevant witnesses and conduct follow-up interviews as necessary
- Allow each party the opportunity to suggest witnesses and questions they wish the Investigator(s) to ask of another party and/or witnesses, and document in the report which questions were asked, with a rationale for any changes or omissions
- Complete the investigation promptly and without unreasonable deviation from the intended timeline
- Provide regular status updates to the parties throughout the investigation
- Prior to the conclusion of the investigation, provide the parties and their respective Advisors (if so desired by the parties) with a list of witnesses whose information will be used to render a finding
- Write a comprehensive investigation report fully summarizing the investigation, all witness interviews, and addressing all relevant evidence. Appendices including relevant physical or documentary evidence will be included
- Gather, assess, and synthesize evidence, but make no conclusions, engage in no policy analysis, and render no recommendations as part of their report
- Prior to the conclusion of the investigation, provide the parties and their respective Advisors (if so desired by the parties) a secured electronic or hard copy of the draft investigation report as well as an opportunity to inspect and review all of the evidence obtained as part of the investigation that is

directly related to the reported misconduct, including evidence upon which the University does not intend to rely in reaching a determination, for a ten (10) business-day review and comment period so that each party may meaningfully respond to the evidence. The parties may elect to waive the full ten (10) days. • Elect to respond in writing in the investigation report to the parties' submitted responses and/or to share the responses between the parties for additional responses

- Incorporate relevant elements of the parties' written responses into the final investigation report, include any additional relevant evidence, make any necessary revisions, and finalize the report. The Investigator(s) should document all rationales for any changes made after the review and comment period.
- Share the report with the Title IX Coordinator and/or legal counsel for their review and feedback.
- Incorporate any relevant feedback and share the final report with all parties and their Advisors through secure electronic transmission or hard copy at least ten (10) business days prior to a hearing. The parties and Advisors are also provided with a file of any directly related evidence that was not included in the report

#### Witnesses Role and Participation in the Investigation

Witnesses (as distinguished from the parties) who are employees of DCB are expected to cooperate with and participate in DCB's investigation and resolution process. While in-person interviews for parties and all potential witnesses are ideal, circumstances (e.g., study abroad, summer break) may require individuals to be interviewed remotely. Skype, Zoom, FaceTime, or similar technologies may be used for interviews if the Investigator(s) determine that timeliness or efficiency dictate a need for remote interviewing. The Investigator(s) will take appropriate steps to reasonably ensure the security/privacy of remote interviews.

#### Recording of Interviews

No unauthorized audio or video recording of any kind is permitted during investigation meetings. If Investigator(s) elect to audio and/or video record interviews, all involved parties must be made aware of audio and/or video recording.

#### Evidentiary Considerations in the Investigation

The investigation does not consider: 1) incidents not directly related to the possible violation, unless they evidence a pattern; 2) the character of the parties; or 3) questions and evidence about the Complainant's sexual predisposition or prior sexual behavior, unless such questions and evidence about the Complainant's prior sexual behavior are offered to prove that someone other than the Respondent committed the conduct alleged by the Complainant, or if the questions and evidence concern specific incidents of the Complainant's prior sexual behavior with respect to the Respondent and are offered to prove consent.

#### Referral for Hearing

Provided that the complaint is not resolved through Informal Resolution, once the final investigation report is shared with the parties, the Title IX Coordinator (or designee) will refer the matter for a hearing. The hearing cannot be less than ten (10) business days from the conclusion of the investigation—when the final investigation report is transmitted to the parties and the Decision-maker(s)—unless all parties and the Decision-maker(s) agree to an expedited timeline. The Title IX Coordinator (or designee) will select an appropriate Decision-maker(s) from the Pool depending on whether the Respondent is an employee or a student. Allegations involving student-employees will be directed to the appropriate Decisionmaker(s) depending on the context of the alleged misconduct.



## Hearing Decision-maker Structure

DCB will designate a single Decision-maker or a three-member panel from the Pool, at the discretion of the Title IX Coordinator (or designee). The single Decision-maker will also Chair the hearing. With a panel, one of the three members will be appointed as Chair by the Title IX Coordinator (or designee).

The Decision-maker(s) will not have had any previous involvement with the investigation. The Title IX Coordinator (or designee) may elect to have an alternate from the Pool sit in throughout the resolution process in the event that a substitute is needed for any reason.

Those who have served as Investigators will be witnesses in the hearing and therefore may not serve as Decision-makers.

Those who are serving as Advisors for any party may not serve as Decision-makers in that matter. The Title IX Coordinator (or designee) may not serve as a Decision-maker or Chair in the matter but may serve as an administrative facilitator of the hearing if their previous role(s) in the matter do not create a conflict of interest. Otherwise, a designee may fulfill this role. The hearing will convene at a time determined by the Title IX Coordinator or designee.

## Evidentiary Considerations

Neither the investigation nor the hearing will consider: 1) incidents not directly related to the possible violation(s), unless they evidence a pattern; or 2) questions and evidence about the Complainant's sexual predisposition or prior sexual behavior, unless such questions and evidence about the Complainant's prior sexual behavior are offered to prove that someone other than the Respondent committed the conduct alleged by the Complainant, or if the questions and evidence concern specific incidents of the Complainant's prior sexual behavior with respect to the Respondent and are offered to prove consent. Previous disciplinary action of any kind involving the Respondent may be considered in determining an appropriate sanction upon a determination of responsibility, assuming DCB uses a progressive discipline system. This information is only considered at the sanction stage of the process. The parties may each submit a written impact statement prior to the hearing for the consideration of the Decision-maker(s) at the sanction stage of the process when a determination of responsibility is reached. 48 After post-hearing deliberation, the Decision-maker(s) renders a determination based on the preponderance of the evidence; whether it is more likely than not that the Respondent violated the Policy as alleged.

## Notice of Hearing

No less than ten (10) business days prior to the hearing, the Title IX Coordinator (or designee) or the Chair will send notice of the hearing to the parties. Once mailed, emailed, and/or received in-person, notice will be presumptively delivered.

The notice will contain:

- A description of the alleged violation(s), a list of all policies allegedly violated, a description of the applicable procedures, and a statement of the potential sanctions/responsive actions that could result.
- The time, date, and location of the hearing and a reminder that attendance is mandatory, superseding all other campus activities.
- Any technology that will be used to facilitate the hearing.
- Information about the option for the live hearing to occur with the parties located in separate rooms using technology that enables the Decision-maker(s) and parties to see and hear a party or witness

answering questions. Such a request must be raised with the Title IX Coordinator (or designee) at least five (5) business days prior to the hearing.

- A list of all those who will attend the hearing, along with an invitation to object to any Decision-maker(s) on the basis of demonstrated bias. This must be raised with the Title IX Coordinator (or designee) at least two (2) business days prior to the hearing.
- Information on how the hearing will be recorded and on access to the recording for the parties after the hearing.
- A statement that if any party or witness does not appear at the scheduled hearing, the hearing may be held in their absence, and the party's or witness's testimony and any statements given prior to the hearing will not be considered by the Decision-maker(s). For compelling reasons, the Title IX Coordinator may reschedule the hearing.
- Notification that the parties may have the assistance of an Advisor of their choosing at the hearing and will be required to have one present for any questions they may desire to ask. The party must notify the Title IX Coordinator (or designee) if they do not have an Advisor, and the Recipient will appoint one. Each party must have an Advisor present. There are no exceptions.
- A copy of all the materials provided to the Decision-maker(s) about the matter, unless they have been provided already.
- An invitation to each party to submit to the Chair an impact statement pre-hearing that the Decision-maker(s) will review during any sanction determination.
- An invitation to contact the Title IX Coordinator (or designee) to arrange any disability accommodations, language assistance, and/or interpretation services that may be needed at the hearing, at least seven (7) business days prior to the hearing.
- Parties cannot bring mobile phones/devices into the hearing.

Hearings for possible violations that occur near or after the end of an academic term (assuming the Respondent is still subject to this Policy) and are unable to be resolved prior to the end of term will typically be held immediately after the end of the term or during the summer, as needed, to meet the resolution timeline followed by DCB and remain within the 60-90 calendar day goal for resolution. In these cases, if the Respondent is a graduating student, a hold may be placed on graduation and/or official transcripts until the matter is fully resolved (including any appeal). A student facing charges under this Policy is not in good standing to graduate.

#### Alternative Hearing Participation

Options If a party or parties prefer not to attend or cannot attend the hearing in person, the party should request alternative arrangements from the Title IX Coordinator (or designee) at least five (5) business days prior to the hearing.

The Title IX Coordinator (or designee) can arrange to use technology to allow remote testimony without compromising the fairness of the hearing. Remote options may also be needed for witnesses who cannot appear in person. Any witness who cannot attend in person should let the Title IX Coordinator (or designee) know at least five (5) business days prior to the hearing so that appropriate arrangements can be made.

#### Pre-Hearing Preparation

The Chair, after any necessary consultation with the parties, Investigator(s) and/or Title IX Coordinator (or designee), will provide the names of persons who will be participating in the hearing, all pertinent

documentary evidence, and the final investigation report to the parties at least ten (10) business days prior to the hearing. 49 Any witness scheduled to participate in the hearing must have been first interviewed by the Investigator(s), unless all parties and the Chair assent to the witness's participation in the hearing. The same holds for any evidence that is first offered at the hearing. If the parties and Chair do not assent to the admission of evidence newly offered at the hearing, the Chair will delay the hearing and instruct that the investigation needs to be re-opened to consider that evidence.

The parties will be given a list of the names of the Decision-maker(s) at least five (5) business days in advance of the hearing. All objections to any Decision-maker(s) must be raised in writing, detailing the rationale for the objection, and must be submitted to the Title IX Coordinator(or designee) as soon as possible and no later than two (2) days prior to the hearing. Decisionmaker(s) will only be removed if the Title IX Coordinator (or designee) concludes that their bias or conflict of interest precludes an impartial hearing of the allegation(s).

The Title IX Coordinator (or designee) will give the Decision-maker(s) a list of the names of all parties, witnesses, and Advisors at least five (5) business days in advance of the hearing. Any Decision-maker who cannot make an objective determination must recuse themselves from the proceedings when notified of the identity of the parties, witnesses, and Advisors in advance of the hearing. If a Decision-maker is unsure of whether a bias or conflict of interest exists, they must raise the concern to the Title IX Coordinator (or designee) as soon as possible.

During the ten (10) business day period prior to the hearing, the parties have the opportunity for continued review and comment on the final investigation report and available evidence. That review and comment can be shared with the Chair at the pre-hearing meeting or at the hearing and will be exchanged between each party by the Chair.

#### Pre-Hearing Meetings

The Chair may convene a pre-hearing meeting(s) with the parties and their Advisors to invite them to submit the questions or topics they (the parties and their Advisors) wish to ask or discuss at the hearing, so that the Chair can rule on their relevance ahead of time to avoid any improper evidentiary introduction in the hearing or provide recommendations for more appropriate phrasing. However, this advance review opportunity does not preclude the Advisors from asking at the hearing for a reconsideration based on any new information or testimony offered at the hearing. The Chair must document and share their rationale for any exclusion or inclusion at this pre-hearing meeting.

The Chair, only with full agreement of the parties, may decide in advance of the hearing that certain witnesses do not need to be present if their testimony can be adequately summarized by the Investigator(s) in the investigation report or during the hearing.

At each pre-hearing meeting with a party and their Advisor, the Chair will consider arguments that evidence identified in the final investigation report as relevant is, in fact, not relevant. Similarly, evidence identified as directly related but not relevant by the Investigator(s) may be argued to be relevant. The Chair may rule on these arguments pre-hearing and will exchange those rulings between the parties prior to the hearing to assist in preparation for the hearing. The Chair may consult with legal counsel and/or the Title IX Coordinator (or designee) or ask either or both to attend pre-hearing meetings.

The pre-hearing meeting(s) will not be recorded.

#### Hearing Procedures

At the hearing, the Decision-maker(s) has the authority to hear and make determinations on all allegations of sexual misconduct, sexual harassment, and/or retaliation and may also hear and make

determinations on any additional alleged policy violations that have occurred in concert with the misconduct, harassment, and/or retaliation, even though those collateral allegations may not specifically fall within the policy.

Participants at the hearing will include the Chair, any additional panelists, the Investigator(s) who conducted the investigation, the parties, Advisors to the parties, any called witnesses, Title IX Coordinator (or designee) may act as the administrative facilitator of the hearing or will designate an individual to act as the facilitator, and anyone providing authorized accommodations or assistive services.

The Chair will answer all questions of procedure. Anyone appearing at the hearing to provide information will respond to questions on their own behalf.

The Chair will allow witnesses who have relevant information to appear at a portion of the hearing in order to respond to 50 specific questions from the Decision-maker(s) and the parties and will then be excused.

#### Joint Hearings

In hearings involving more than one Respondent or Complainants that arise out of the same facts or circumstances, the default procedure will be to hear the allegations jointly. However, the Title IX Coordinator (or designee) may permit the investigation and/or hearings pertinent to each Respondent to be conducted separately if there is a compelling reason to do so. In joint hearings, separate determinations of responsibility will be made for each Respondent with respect to each alleged policy violation.

#### The Order of the Hearing — Introductions and Explanation of Procedure

The Chair explains the procedures and introduces the participants. This may include a final opportunity for challenge or recusal of the Decision-maker(s) on the basis of bias or conflict of interest. The Chair will rule on any such challenge unless the Chair is the individual who is the subject of the challenge, in which case the Title IX Coordinator (or designee) will review and decide the challenge. The hearing facilitator may attend to: logistics of rooms for various parties/witnesses as they wait; flow of parties/witnesses in and out of the hearing space; ensuring recording and/or virtual conferencing technology is working as intended; copying and distributing materials to participants, as appropriate, etc.

#### Investigator Presents the Final Investigation Report

The Investigator(s) will then present a summary of the final investigation report, including items that are contested and those that are not, and will be subject to questioning by the Decision-maker(s) and the parties (through their Advisors).

The Investigator(s) may be present during the entire hearing, but not during deliberations. If the parties do not object, the Chair may dismiss the Investigator(s) after their testimony and cross-examination. Neither the parties nor the Decisionmaker(s) should ask the Investigator(s) their opinions on credibility, recommended findings, or determinations, and the Investigators, Advisors, and parties will refrain from discussion of or questions about these assessments. If such information is introduced, the Chair will direct that it be disregarded.

#### Testimony and Questioning

Once the Investigator(s) present their report and are questioned, the parties and witnesses may provide relevant information in turn, beginning with the Complainant, and then in the order determined by the Chair. The parties/witnesses will submit to questioning by the Decision-maker(s) and then by the parties through their Advisors (“cross-examination”).

All questions are subject to a relevance determination by the Chair. The Advisor, who will remain seated during questioning, will pose the proposed question orally, electronically, or in writing (orally is the default, but other means of submission may be permitted by the Chair upon request or agreed to by the parties and the Chair), the proceeding will pause to allow the Chair to consider it, and the Chair will determine whether the question will be permitted, disallowed, or rephrased.

The Chair may invite explanations or persuasive statements regarding relevance with the Advisors if the Chair so chooses. The Chair will then state their decision on the question for the record and advise the party/witness to whom the question was directed, accordingly. The Chair will explain any decision to exclude a question as not relevant, or to reframe it for relevance.

The Chair will limit or disallow questions on the basis that they are irrelevant, unduly repetitious (and thus irrelevant), or abusive. The Chair has final say on all questions and determinations of relevance, subject to any appeal. The Chair may consult with legal counsel on any questions of admissibility. The Chair may ask advisors to frame why a question is or is not relevant from their perspective but will not entertain argument from the advisors on relevance once the Chair has ruled on a question.

If the parties raise an issue of bias or conflict of interest of an Investigator or Decision-maker at the hearing, the Chair may elect to address those issues, consult with legal counsel, and/or refer them to the Title IX Coordinator (or designee), and/or preserve them for appeal. If bias is not in issue at the hearing, the Chair should not permit irrelevant questions that probe for bias.

#### Refusal to Submit to Questioning; Inferences

Any party or witness may choose not to offer evidence and/or answer questions at the hearing, either because they do not attend the hearing, or because they attend but refuse to participate in some or all questioning. The Decision-maker(s) can only rely on whatever relevant evidence is available through the investigation and hearing in making the ultimate determination of responsibility. The Decision-maker(s) may not draw any inference solely from a party's or witness's absence from the hearing or refusal to submit to cross-examination or answer other questions.

#### Hearing Recordings

Hearings (but not deliberations) are recorded by the University for the purpose of review in the event of an appeal. The parties may not record the proceedings and no other unauthorized recordings are permitted. The Decision-maker(s), the parties, their Advisors, and appropriate administrators of DCB will be permitted to listen to the recording in a controlled environment determined by the Title IX Coordinator (or designee). No person will be given or be allowed to make a copy of the recording without permission of the Title IX Coordinator (or designee).

#### Deliberation, Decision-making, and Standard of Proof

The Decision-maker(s) will deliberate in closed session to determine whether the Respondent is responsible or not responsible for the policy violation(s) in question. If a panel is used, a simple majority vote is required to determine the finding. The preponderance of the evidence standard of proof is used, which means the evidence must show that it is more likely than not that the Respondent committed the conduct as alleged. The hearing facilitator may be invited to attend the deliberation by the Chair, but is there only to facilitate procedurally, not to address the substance of the allegations.

When there is a finding of responsibility on one or more of the allegations, the Decision-maker(s) may then consider the previously submitted party impact statements in determining appropriate sanction(s). The Chair will ensure that each of the parties has an opportunity to review any submitted impact and/or mitigation statement(s) once they are submitted.

The Decision-maker(s) will review any pertinent conduct history provided by the Title IX Coordinator (or designee) and will recommend the appropriate sanction(s) in consultation with other appropriate administrators, as required.

The Chair will then prepare a written statement detailing all findings and final determinations, the rationale(s) explaining the decision(s), the evidence used in support of the determination(s), the evidence not relied upon in the determination(s), any credibility assessments, and any sanction(s) and rationales explaining the sanction(s) and will deliver the statement to the Title IX Coordinator.

This report must be submitted to the Title IX Coordinator (or designee) within seven (7) business days of the end of deliberations, unless the Title IX Coordinator (or designee) grants an extension. If an extension is granted, the Title IX Coordinator (or designee) will notify the parties.

#### Notice of Outcome

Using the deliberation statement, the Title IX Coordinator (or designee) will work with the Chair to prepare a Notice of Outcome. The Notice of Outcome may then be reviewed by legal counsel. The Title IX Coordinator (or designee) will then share the letter, including the final determination, rationale, and any applicable sanction(s) with the parties and their Advisors within seven (7) business days of receiving the Decision-maker(s)' deliberation statement.

The Notice of Outcome will then be shared with the parties simultaneously. Notification will be made in writing and may be delivered by one or more of the following methods: in person, mailed to the local or permanent address of the parties as indicated in official DCB records, or emailed to the parties' University-issued email or otherwise approved account. Once mailed, emailed, and/or received in-person, notice will be presumptively delivered.

The Notice of Outcome will articulate the specific alleged policy violation(s), including the relevant policy section(s), and will contain a description of the procedural steps taken by the University from the receipt of the misconduct report to the determination, including any and all notifications to the parties, interviews with parties and witnesses, site visits, methods used to obtain evidence, and hearings held.

The Notice of Outcome will specify the finding on each alleged policy violation; the findings of fact that support the determination; conclusions regarding the application of the relevant policy to the facts at issue; a statement of, and rationale for, the result of each allegation to the extent DCB is permitted to share such information under state or federal law; any sanctions issued which DCB is permitted to share according to state or federal law; and any remedies provided to the Complainant designed to ensure access to DCB's educational or employment program or activity.

The Notice of Outcome will also include information on when the results are considered final by DCB, will note any changes to the outcome and/or sanction(s) that occur prior to finalization, and the relevant procedures and basis for appeal.

#### Sanctions

Factors considered when determining a sanction/responsive action may include, but are not limited to:

- The nature, severity of, and circumstances surrounding the violation(s)
- The Respondent's disciplinary history
- The need for sanctions/responsive actions to bring an end to the misconduct, harassment, and/or retaliation
- The need for sanctions/responsive actions to prevent the future recurrence of misconduct, harassment, and/or retaliation

- The need to remedy the effects of the misconduct, harassment, and/or retaliation on the Complainant and the community
- The impact on the parties
- Any other information deemed relevant by the Decision-maker(s)

The sanctions will be implemented as soon as is feasible, either upon the outcome of any appeal or the expiration of the window to appeal without an appeal being requested.

The sanctions described in this policy are not exclusive of, and may be in addition to, other actions taken or sanctions imposed by external authorities.

### Student Sanctions

The following are sanctions that may be imposed upon students or organizations singly or in combination:

1. **Warning:** A formal statement that the conduct was unacceptable and a warning that further violation of any University policy, procedure, or directive will result in more severe sanctions/responsive actions.
2. **Required Counseling:** A mandate to meet with and engage in either University-sponsored or external counseling to better comprehend the misconduct and its effects.
3. **Probation:** A written reprimand for violation of institutional policy, providing for more severe disciplinary sanctions in the event that the student or organization is found in violation of any institutional policy, procedure, or directive within a specified period of time. Terms of the probation will be articulated and may include denial of specified social privileges, exclusion from co-curricular activities, exclusion from designated areas of campus, no- contact orders, and/or other measures deemed appropriate.
4. **Suspension:** Termination of student status for a definite period of time not to exceed two years and/or until specific criteria are met. Students who return from suspension are automatically placed on probation through the remainder of their tenure as a student at the University.
5. **Expulsion:** Permanent termination of student status and revocation of rights to be on campus for any reason or to
6. attend campus-sponsored events.
7. **Withholding Diploma:** DCB may withhold a student's diploma for a specified period of time and/or deny a student participation in commencement activities as a sanction if the student is found responsible for violating policy.
8. **Revocation of Degree:** DCB reserves the right to revoke a degree previously awarded from DCB for fraud, misrepresentation, and/or other violation of campus policies, procedures, or directives in obtaining the degree, or for other serious violations committed by a student prior to graduation.
9. **Other Actions:** In addition to or in place of the above sanctions, DCB may assign any other sanctions as deemed appropriate

### Employee Sanctions

Responsive actions for an employee include:

1. Warning (Written or Verbal)
2. Performance Improvement Plan
3. Required Counseling
4. Required Training or Education
5. Probation

6. Demotion
7. Reduction in Pay
8. Loss of annual pay increase
9. Loss of Oversight or Supervisory Responsibility
10. Delay of Tenure Track Progress
11. Suspension/Administrative Leave with pay
12. Suspension/Administrative Leave without pay
13. Termination
14. Other Actions: In addition to or in place of the above sanctions, DCB may assign any other sanctions as deemed appropriate.

#### Privacy

Every effort is made by DCB to preserve the privacy of reports. DCB will not share the identity of any individual who has made a report or complaint of harassment or retaliation; any Complainant, any individual who has been reported to be the perpetrator of harassment, any Respondent, or any witness, except as permitted by the Family Educational Rights and Privacy Act (FERPA), 20 U.S.C. 1232g; FERPA regulations, 34 CFR part 99; or as required by law; or to carry out the purposes of 34 CFR Part 106, including the conducting of any investigation, hearing, or grievance proceeding arising under these policies and procedures. DCB reserves the right to designate which campus officials have a legitimate educational interest in being informed about incidents that fall within this policy, pursuant to FERPA. Only a small group of officials who need to know will typically be told about the complaint. Information will be shared as necessary with Investigators, Hearing Panel members/Decision-makers, witnesses, and the parties. The circle of people with this knowledge will be kept as tight as possible to preserve the parties' rights and privacy. DCB may contact parents/guardians to inform them of situations in which there is a significant and articulable health and/or safety risk but will usually consult with the student first before doing so.

#### Mandated Reporting

All DCB employees (faculty, staff, contracted staff, and administrators) are expected to report actual or suspected sexual harassment to appropriate officials immediately, though there are some limited exceptions. In order to make informed choices, it is important to be aware of confidentiality and mandatory reporting requirements when consulting campus resources. On campus, some resources may maintain confidentiality and are not required to report actual or suspected misconduct or harassment. They may offer options and resources without any obligation to inform an outside agency or campus official unless a Complainant has requested the information be shared.

#### Investigation of Reports of Sexual Misconduct Not Covered Under Title IX Grievance Process (Student Sexual Misconduct Policy)

The Sexual Misconduct Grievance process will be used in cases where a student engaged in sexual misconduct that does not fall within the sexual harassment definition under Title IX. For allegations where a faculty member or employee engaged in sexual misconduct that does not fall within the sexual harassment definition under Title IX, the Employee Standards of Conduct will be used. After the Complainant meets with the Title IX Coordinator to learn about their procedural options and what supportive/interim measures are available to them, the Complainant can decide to move forward with an investigation of the reported behavior. For the investigation to proceed the Complainant will need to provide to DCB a signed formal complaint. During the investigative process, all parties will have an opportunity to review the draft investigative report prior to it going to the Title IX Coordinator. The parties will have ten (10) calendar days to review the draft of the investigative report and submit in writing comments about content, requests for additional meetings with the investigator to conduct



further investigation or questions. The draft of the investigative report will be able to be reviewed, however the parties will not be able to take the draft of the investigative report with them during the draft period. This information will be included in the final documents that will be reviewed by the Title IX Coordinator and adjudicator(s), if applicable. If the student wishes to participate in a police investigation, DCB may wait a reasonable amount of time (usually 7 to 10 business days) to allow the police to conduct initial fact finding and the gathering of evidence in the criminal investigation. The DCB Dean's Office or designee may regularly confer on the status of an active investigation to ensure compliance with federal requirements while maintaining the integrity of any active criminal process.

DCB has a written Memorandum of Understanding (MOU) with the Bottineau County Sheriff's Office regarding the criminal and administrative investigation of incidents of sexual violence and the distribution of timely warning notices or campus safety alerts and immediate or emergency notifications. DCB will conduct a prompt, fair, impartial investigation in a timely manner designed to provide all parties with resolution. However, there may be times where the process may take longer and DCB will communicate on an on-going basis with the parties a realistic timeline, and the circumstances regarding the same. In every investigation conducted under this policy, the burden is on DCB—not on the parties—to gather sufficient evidence to reach a fair, impartial determination as to whether sexual misconduct has occurred and, if so, whether a hostile environment has been created that must be redressed. Investigations will be conducted by one or more of the following: DCB Judicial, the Title IX Coordinator, a trained Title IX investigator, or a trained Title IX investigator from another North Dakota University System institution. This designee may be an employee of DCB, an employee of a NDUS institution, or both. All reasonable efforts will be made to keep information private during DCB's investigation and adjudication of a complaint. Investigators receive annual training on the issues related to dating violence, domestic violence, sexual assault, and stalking and on how to conduct an objective and impartial investigation and hearing processing that protects the safety of victims, promotes accountability, and ensures investigative techniques do not apply sex stereotypes and generalizations. Should a complainant or respondent feel that the investigator assigned to the report would not be able to be objective or impartial throughout the investigation, they must contact the Title IX Coordinator to request a different investigator be assigned to the report. The Title IX Coordinator will determine based on the concerns from the complainant or the respondent, if there is enough cause to have a different investigator assigned to the report. The investigation is designed to provide a fair and reliable gathering of the facts. The investigation will be thorough, impartial, and fair. As described in the Confidentiality section of this Policy, the investigation will be conducted in a manner that is respectful of individual privacy concerns. The investigation is a process that involves obtaining and evaluating information given by persons having personal knowledge of the events or circumstances concerning the reported incident. This may include the collection of all statements (both oral and written), pertinent facts, and/or evidence. This process will be exhaustive and is likely to include the interviewing and re-interviewing of involved parties to ensure as much clarity around conflicting or differing statements as may be possible. The Title IX Coordinator, or their designees may refer an investigative report back to the investigator for further follow-up pending the availability of new information, for additional clarity regarding conflicting or inconsistent information/reports, or for any other reason necessary to ensure further clarity or strengthen the final report. At the conclusion of the investigation, the investigator will prepare a report setting forth the facts gathered. The report will provide the scope of the reported incident, statements from the parties involved in the incident, evidence provided to the investigator by the parties involved, and an overview of facts in agreement and facts in contention.

#### Interim Measures and Supportive Measures Overview

During the investigation and prior to the final determination, DCB may take appropriate interim measures to protect the parties involved; after a fair assessment to determine the need for such interim measures.

Interim measures will be individualized an appropriate based on the initial information gathered by the Title IX Coordinator. A Complainant or Respondent may request a supportive measure, or DCB may impose interim measures at its discretion to ensure the safety of all parties, the University community, and/or the integrity of the process. Interim and Supportive measures will be individualized and appropriate based on the information gathered by the Title IX Coordinator. These actions are not a presumption of responsibility for violation of the Sexual Harassment Policy. Interim and Supportive measures may be imposed whether or not formal disciplinary action is sought by the Complainant or DCB. Interim measures may prevent a student from attending class and other campus activities. The Title IX Coordinator or designee will communicate with a student's faculty instructors and/or advisors at the request of the student to determine if alternate arrangements can be made to support a student's completion of academic assignments. DCB will try to provide academic support where necessary. Academic support means that the Title IX Coordinator will communicate with faculty on a student's behalf.

Services offered as appropriate (as reasonable available) and without fee or charge to the complainant or respondent.

#### Types of Interim and Supportive Measures

DCB will offer and implement appropriate and reasonable supportive measures to the parties upon notice of alleged sexual harassment and or retaliation.

Supportive measures are non-disciplinary, non-punitive individualized services offered as appropriate, as reasonably available, and without fee or charge to the Complainant or the Respondent. They are designed to restore equal access to DCB's educational program or activity without unreasonably burdening the other party.

*Interim residential relocation:* A student may be separated temporarily from campus housing or temporarily reassigned to another residential location on campus. Their original housing location will be held until the process is over. It can be determined that residential relocation is a sanction when appropriate, and at that time the student will move permanently into a location determined by DCB Housing.

*Class schedule changes:* Changes to a student's class schedule may be made on a temporary basis in the event it is deemed appropriate by the Title IX Coordinator or their designee. Students may be sanctioned to a permanent change(s) through the normal adjudication process.

*Restrictions from Campus activities and/or facilities:* A student may be denied, on a temporary basis, participation in a university activity or privilege for which they may be otherwise eligible as determined to be appropriate. Students may also be prohibited from certain facilities including, but not limited to, academic buildings, athletic facilities and/or practice and competition spaces, and transportation services. Students may be sanctioned to a permanent restriction(s) through the normal adjudication process.

*Counseling services:* DCB Mental Health provides brief counseling for all students, including crisis counseling.

*Academic Support Services:* DCB Student Success helps with DCB courses at no cost to currently enrolled DCB students. On-campus and virtual tutoring is available.

*No-Contact Directive.* DCB may impose a No Contact Directive in cases where an agreement cannot be reached or is not applicable. Generally, No Contact is defined as having no direct or indirect contact with another party or parties at any time. This includes, but is not limited to, communication that is written, verbal, or physical. Written communication is understood to include all electronic means of

communication; including, but not limited to, email, instant messaging text messaging, and all forms of social media. Verbal communication is understood to include phone calls and voice mail messages. A No Contact Directive may include additional restrictions and terms. Violations of the No-Contact Directive will result in disciplinary action.

*Emergency Removal:* If there is an immediate threat to the physical health or safety of any student or other individual arising from an allegation of sexual harassment, DCB is permitted to remove the Respondent from the campus community. For an emergency removal to take place DCB assesses the information that they have available to complete an individualized safety and risk analysis. This analysis includes determining if there is an immediate threat to the physical health and safety of an individual. Emotional or mental harm to a Complainant is not enough to warrant an emergency removal and supportive measures can be provided to the Complainant. If the Respondent threatens their own physical health, that does warrant the ability to institute an emergency removal.

#### Informal Resolution for Sexual Misconduct Grievance Process

Resolution proceedings are private. All persons present at any time during the resolution process are expected to maintain the privacy of the proceedings in accordance with campus policy. While there is an expectation of privacy around what Investigators share with parties during interviews, the parties have discretion to share their own knowledge and evidence with 56 others if they so choose. DCB encourages parties to discuss this with their Advisors before doing so.

#### Informal Resolution

Informal Resolution can include three different approaches:

- When the Title IX Coordinator(or designee) can resolve the matter informally by providing supportive measures to remedy the situation;
- When the parties agree to resolve the matter through an alternate resolution mechanism including mediation, restorative practices, etc.;
- When the Respondent accepts responsibility for violating policy, and desires to accept a sanction and end the resolution process; or

To initiate Informal Resolution, a Complainant needs to submit a formal complaint, as defined above. If a Complainant or Respondent wishes to initiate Informal Resolution, they should contact the Title IX Coordinator (or designee) to so indicate.

It is not necessary to pursue Informal Resolution first in order to pursue a Formal Grievance Process, and any party participating in Informal Resolution can stop the process at any time and begin or resume the Formal Grievance Process

Prior to implementing Informal Resolution, DCB will provide the parties with written notice of the reported misconduct and any sanctions or measures that may result from participating in such a process, including information regarding any records that will be maintained or shared by DCB. DCB will obtain voluntary, written confirmation that all parties wish to resolve the matter through Informal Resolution before proceeding and will not pressure the parties to participate in Informal Resolution. The Title IX Coordinator (or designee) may look to the following factors to assess whether Informal Resolution is appropriate:

- The parties' amenability to Informal Resolution;
- Likelihood of potential resolution, taking into account any power dynamics between the parties;
- The parties' motivation to participate;

- Civility of the parties;
- Cleared violence risk assessment/ongoing risk analysis;
- Disciplinary history; • Whether an emergency removal is needed;
- Skill of the facilitator with this type of complaint;
- Complaint complexity;
- Emotional investment/intelligence of the parties;
- Rationality of the parties;
- Goals of the parties;
- Adequate resources to invest in Informal Resolution (time, staff, etc.)

The ultimate determination of whether Informal Resolution is available or successful is to be made by the Title IX Coordinator (or designee). The Title IX Coordinator (or designee) maintains records of any resolution that is reached, and failure to abide by the resolution agreement may result in appropriate responsive/disciplinary actions. Results of complaints resolved by Informal Resolution are not appealable.

Informal Resolution is not permitted when it has been alleged that an employee has harassed a student.

#### Election of Formal Resolution

DCB, Complainant, or the Respondent may, at any time prior to the conclusion of the Informal Resolution, elect to end such proceedings and initiate Formal Resolution instead. In such cases, statements or disclosures made by the parties in the course of the Informal Resolution may be considered in the subsequent Formal Resolution.

#### Formal Resolution for Sexual Misconduct Grievance Process

DCB will ensure an investigation, process and proceeding that is balanced, impartial, and fair and provides a guarantee of fundamental fairness to all parties involved without a presumption of responsibility until the completion of an administrative process or hearing. This fairness includes advanced notification of the allegations and charges, notice of all rights and responsibilities under a proceeding, and advanced and equal access to all material evidence and information.

#### Appeals

Any party may file a Request for Appeal, but it must be submitted in writing to the Title IX Coordinator (or designee) within five (5) business days of the delivery of the Notice of Outcome when the sanction does not involve student suspension, expulsion, or dismissal from employment.

Additional specified timelines include the following:

- Within twenty (20) calendar days for faculty when the sanction is dismissal from employment. (SBHE Policy 605.4)
- Within five (5) working days for staff when the sanction is dismissal from employment. (NDUS HR Policy 27.2)
- Within one (1) year for students when the sanction includes suspension or expulsion. (SBHE Policy 514)

The appeal decision maker(s) will be designated by the Title IX Coordinator (or designee). No appeal panelists will have been involved in the process previously, including any dismissal appeal that may have been heard earlier in the process.

The Request for Appeal will be forwarded to the Appeal Chair for consideration to determine if the request meets the grounds for appeal (a Review for Standing). This review is not a review of the merits of the appeal, but solely a determination as to whether the request meets the grounds and is timely filed.

#### Grounds for Appeal

Appeals are limited to the following grounds:

- Procedural irregularity that affected the outcome of the matter;
- New evidence that was not reasonably available at the time the determination regarding responsibility or dismissal was made, that could affect the outcome of the matter; and
- The Title IX Coordinator (or designee), Investigator(s), or Decision-maker(s) had a conflict of interest or bias for or against Complainants or Respondents generally or the specific Complainant or Respondent that affected the outcome of the matter.

If any of the grounds in the Request for Appeal do not meet the grounds in this Policy, that request will be denied and the parties and their Advisors will be notified in writing of the denial and the rationale. If any of the grounds in the Request for Appeal meet the grounds in this Policy, then the Appeal Chair will notify the other party(ies) and their Advisors, the Title IX Coordinator(or designee), and, when appropriate, the Investigator(s) and/or the original Decision-maker(s).

All other party(ies) and their Advisors, the Title IX Coordinator(or designee), and, when appropriate, the Investigator(s) and/or the original Decision-maker(s) will be emailed a copy of the request with the approved grounds and then be given three (3) business days to submit a response to the portion of the appeal that was approved and involves them. All responses will be forwarded by the Chair to all parties for review and comment.

The non-appealing party (if any) may also choose to raise a new ground for appeal at this time. If so, that will be reviewed for standing by the Appeal Chair and either denied or approved. If approved, it will be forwarded to the party who initially requested an appeal, the Investigator(s) and/or original Decision-maker(s), as necessary, who will submit their responses in three (3) business days, which will be circulated for review and comment by all parties.

Neither party may submit any new requests for appeal after this time period. The Appeal Chair will collect any additional information needed and all documentation regarding the approved grounds and the subsequent responses will be shared with the Appeal Panel, and the Panel will render a decision in no more than three (3) business days, barring exigent circumstances. All decisions are by majority vote and apply the preponderance of the evidence standard.

A Notice of Appeal Outcome will be sent to all parties simultaneously including the decision on each approved ground and rationale for each decision. The Notice of Appeal Outcome will specify the finding on each ground for appeal, any specific instructions for remand or reconsideration, any sanctions that may result which DCB is permitted to share according to state or federal law, and the rationale supporting the essential findings to the extent the University is permitted to share under state or federal law.

Notification will be made in writing and may be delivered by one or more of the following methods: in person, mailed to the local or permanent address of the parties as indicated in official institutional records, or emailed to the parties' campus issued email or otherwise approved account. Once mailed, emailed and/or received in-person, notice will be presumptively delivered.

## Sanctions Status During the Appeal

Any sanctions imposed as a result of the hearing are stayed during the appeal process. Supportive measures may be reinstated, subject to the same supportive measure procedures above.

If any of the sanctions are to be implemented immediately post-hearing, but pre-appeal, then the emergency removal procedures (detailed above) for a hearing on the justification for doing so must be permitted within 48 hours of implementation.

DCB may still place holds on official transcripts, diplomas, graduations, and course registration pending the outcome of an appeal when the original sanctions included separation.

## Appeal Considerations

- Appeals are not intended to provide for a full re-hearing of the allegation(s). In most cases, appeals are confined to a review of the written documentation or record of the original hearing and pertinent documentation regarding the specific grounds for appeal.
- Decisions on appeal are to be deferential to the original decision, making changes to the finding only when there is clear error and to the sanction(s)/responsive action(s) only if there is a compelling justification to do so.
- An appeal is not an opportunity for Appeal Decision-makers to substitute their judgment for that of the original Decisionmaker(s) merely because they disagree with the finding and/or sanction(s).
- The Appeal Chair/Panel may consult with the Title IX Coordinator (or designee) and/or legal counsel on questions of procedure or rationale, for clarification, if needed. Documentation of all such consultation will be maintained.
- Appeals granted should normally be remanded to the original Investigator(s) and/or Decision-maker(s) for reconsideration.
- Once an appeal is decided, the outcome is final: further appeals are not permitted, even if a decision or sanction is changed on remand (except in the case of a new hearing).
- In rare cases where a procedural error cannot be cured by the original Decision-maker(s) (as in cases of bias), the Appeal Chair/Panel may order a new investigation and/or a new hearing with a new Pool members serving in the Investigator and Decision-maker roles.
- The results of a new hearing can be appealed, once, on any of the three available appeal grounds.
- In cases that result in reinstatement to the University or resumption of privileges, all reasonable attempts will be made to restore the Respondent to their prior status, recognizing that some opportunities lost may be irreparable in the short term.

## Notification of Victims of Crimes of Violence

In accordance with the Higher Education Opportunity Act (HEOA), DCB will, upon written request, disclose to the alleged victim of a crime of violence or a non-forcible sex offense the report on the results of any disciplinary proceeding conducted by the University against a student or employee who is the alleged perpetrator of such crime or offense. If the alleged victim is deceased as the result of such crime or offense, the next of kin of such victim shall be treated as the alleged victim for purposes of this paragraph.

## SEX OFFENDER REGISTRY AND ACCESS TO RELATED INFORMATION

The Adam Walsh Child Protection and Safety Act of 2006 (AWCPSA) is a federal law that provides for the registration and tracking of convicted sex offenders. The AWCPSA requires state law enforcement agencies (in North Dakota, it is the North Dakota Bureau of Criminal Investigations) to provide DCB with a list of registered sex offenders who have indicated that they are either enrolled or employed with DCB. This information is provided in compliance with the AWCPSA and the North Dakota Offender Registration requirements established by NDCC, section 12.1-32-15. Colleges and universities are required to disclose where to obtain information about registered sex offenders who are either students or employees at the institution. Convicted sex offenders must register with the local law enforcement agency in the jurisdiction where the offender resides. Out-of-state sex offenders are required to register with the local North Dakota law enforcement agency if they work or attend school in North Dakota. Each time the offender moves or changes jobs, the offender must notify the local law enforcement agency.

#### Employment of Sex Offenders

Registered sex offenders are not barred from employment at DCB. Limitations and restrictions on employment must be reasonable, job related, and directly related to areas of potential risk.

#### Public Access to Sex Offender Information

The North Dakota Sex Offender website identifying all registered sex offenders in the state of North Dakota is available via Internet pursuant to North Dakota Century Code (NDCC) Section 12.1-32-15. The North Dakota Office of Attorney General is responsible for maintaining the online North Dakota Sex Offender Registry.

#### RESIDENCE LIFE AND HOUSING SAFETY POLICIES

##### Residence Life and Student's Rights

DCB Housing has developed the following governing principles to ensure a courteous living and learning community on campus.

- The right to read and study without interference, unreasonable noises and other distractions.
- The right to sleep without undue disturbance.
- The right of all residents to have personal privacy and safety in their rooms.
- The right to live in a clean environment.
- The right to have free access to one's room and facilities.
- The right of a resident to sleep or study supersedes the right of another person to entertain.
- The right to be free of fear or intimidation and physical or emotional harm.

##### Residence Life Safety

Residence Life Staff live in the residence halls and apartments and are on call 24 hours a day. All Residence Life Staff members undergo comprehensive training in enforcing residence life policies. All residence's entrance doors are locked 24 hours a day through an automatic locking system, and only students who are residents of the hall have access through their DCB key fobs. The cooperation and involvement of students themselves in maintaining campus safety is absolutely necessary. You must assume responsibility for your own personal safety and the security of your personal belongings by taking simple precautions.

## Student Responsibilities

- Lock the door to your room/apartment when you are alone, especially at night or when sleeping. Lock your room/apartment when you are not home.
- Do not let strangers into your building or your room/apartment. If someone tries to force their way into your space, notify a DCB Head Resident (701-480-9262), or a Residence Life Staff member immediately.
- Do not give your name or phone number to strangers.
- Keys, fobs and student ID cards should always be carried on your person and never lent to others.
- When going out, let your roommate or a friend know where you are going and what time you expect to return.
- Lock the door to your room/suite every time you leave (even for a few minutes).
- Close and fasten your windows when you leave your room. This protects you from theft and inclement weather.
- DCB does not carry insurance to protect student property, therefore, you are encouraged to provide your own insurance against loss of or damage to personal possessions.
- Keep a record of the serial numbers of all your belongings so that if something that has been lost or stolen is found, the police will be able to identify it.
- Do not advertise your valuables or keep large sums of money in your room.
- If you would like an escort on campus at night contact a Head Resident (701-480-9262)
- Under no circumstances should you prop open any exterior door, nor should you hold a door open to let an unknown person into the building. Everyone entering must be either a resident that gains access through swiping their fob, or a guest being escorted by a current resident.
- You should report any suspicious individuals who you feel do not belong in your residence, or any unusual incident in and around the building, to the residence life staff, Head Resident on call (701-480-9262), or the Bottineau County Sheriff's Department (911 or 701-228-2740).
- Do not store any gasoline-powered vehicles or equipment (mopeds, motorcycles, barbecue grills, etc.) in an on-campus residence
- Individual smoke detectors are placed in every room. Do not remove or disconnect these because they are placed there for your own protection. Please notify either a Residence Life Staff member immediately if your smoke detector is malfunctioning or missing.
- Never go up on the roof of a building or out on a window ledge.
- Refrain from horseplay and practical jokes. They may seem harmless, but they could cause unforeseen damage or injury.
- Fireworks, firearms, and other weapons are not allowed in on-campus residence halls.
- The fire extinguishers are available for your safety. Do not tamper with them.
- If the fire alarm sounds, leave the building immediately. Do not use an elevator. Do not pull the fire alarm unless there is a fire or smoke visibly verified in the building. If you smell smoke or any other foreign odor, please contact a Head Resident (701-480-9262) immediately so the situation can be assessed. Tampering with the fire alarm system (false alarm) is illegal.



- Notify a Residence Life Staff member if you receive an obscene phone call. Do not talk to the caller. Hang up immediately.
- During severe weather, be alert for a tornado warning. If a warning is sounded, you should immediately take cover in a sheltered area.
- Do not attempt to remodel your room. If you have plumbing, electrical, or structural problems in your room, notify your Residence Life Staff member immediately.
- If you or someone you know gets sick, let a Residence Life Staff member know about it.
- If you observe any hazardous conditions in your residence hall, notify a Residence Life Staff member.
- All students have the opportunity to request changes in room assignments, which are accommodated as quickly as possible based upon available facilities.
- Valuable items should be marked with engraving instruments.
- Vehicles should be parked in assigned parking lots and doors should be locked.
- Winter Care: occasionally, Facilities Management will ask you to remove your car from the parking lot for snow removal. Please be aware of the presence of snow removal equipment as you are walking and driving on campus. Please take precautions to protect your personal safety from slips and falls.

#### Firearms/Weapons

Firearms, explosives (including fireworks), ammunition, bows and arrows, knives with blades longer than five inches, guns, paintball guns, airsoft guns, nerf guns, BB guns, num-chuks, brass knuckles, and any other fighting materials or objects that can be used or viewed as a weapon are prohibited on campus. A violation of this policy may result in eviction, restitution and damages, and other disciplinary action to be determined by the Housing Director.

#### Gambling

Gambling of any form is not permitted in the residence halls.

#### Hall Sports

The common areas are not designed for sporting activities and may not be used for any sporting activities. All sport related activities should be held outside, or in the gym. You are not allowed to rollerblade in the building and are expected to carry your skates to/from the building doors. Students playing sports outside the buildings may be asked to move or cease if they are causing disturbance to those within the building or if their behavior may result in damage to person or property. Water fights (often beginning with squirt guns) are not allowed in the residence halls.

#### Health and Safety

You are responsible for the care and cleaning of your room. The residence hall staff perform routine health and safety checks. During this time, they are looking for over-loaded outlets, unhygienic living environments, as well as anything that would be considered a violation of the Fire Hazard Policy. Any other policy violations that are found during this time will be dealt with accordingly.

#### Keys

Residence hall security starts with responsible use of keys. Duplicating of keys, allowing someone else to use your keys, or using another resident's keys or fob to gain access to a building or room are not permitted. You are expected to report the loss of your keys immediately to your Head Resident, RA or Housing Director. If you are locked out of your room, contact an RA or your Head Resident.

## Leaving for Breaks

Whenever you leave your room for vacation periods, you must turn off all lights, unplug all appliances not in use, turn off alarms, empty your wastebasket, close and lock windows, and lock your door. Residence hall staff and DCB maintenance personnel may enter your room without notification during break times. Staff will be looking for safety concerns such as, smoke detectors activated, water problems, open windows, temperature, etc. Any policy violations that are found during this time will be the responsibility of the resident(s) of the room.

## Lockouts

It is important that students keep their room key and key fob with them at all times. If locked out residents can contact a Residence Life staff member.

## Lounge Furniture

Lounge furniture (including garbage bins) is not allowed in resident rooms.

## Meetings/Solicitation

No person or organization, whether or not affiliated with DCB, may advertise, sell, conduct a business, campaign, hold meetings or programs, or raise funds in campus residences without receiving permission from the Housing Director.

## Noise

Residents and staff are responsible for maintaining an atmosphere conducive to study and sleep. Noise which is disruptive to other residents is prohibited, as courtesy and consideration of others is expected at all times. Excessive noise at any hour is not acceptable and at no time should amplified sound or yelling be directed out your window or at other residents' windows. Noise may be deemed disruptive if it can be heard through a closed door or window. You are expected to respond positively to requests to reduce noise and should be able to feel comfortable approaching others with requests for noise reduction.

## Pets

Health policies do not permit pets in the on-campus housing, except for fish in a tank no larger than ten gallons.

## Rollerblades

Wearing rollerblades is prohibited in on-campus residences.

## Room Entry Policy

DCB Housing and Residence Life staff may enter an on-campus residence without permission for the following reasons:

- To provide routine maintenance and to ensure that residents are following health, fire, and safety regulations.
- To respond to emergency situations; i.e., situations which threaten the health and/or safety of room occupants and situations which require immediate maintenance to prevent property damage.

- Authorization to enter a student's room under this policy does not constitute authorization to conduct a search of the room.

Authorized personnel indicated above include:

- Full-time members of the Residence Life and Housing staff, including maintenance and custodial personnel and members
- Full-time members of the IT department, including approved part-time staff members
- Fire Marshall

Master key protocol:

- No student room should be entered without knocking, regardless of whether the door is locked, unlocked, or open. The only situations in which staff are not required to knock are emergencies.
- Before using the master key, campus personnel attempting to enter a room should identify themselves and state the reason for entry. In addition, they should request that the door be opened.
- If the door is not opened and authorized personnel deem it necessary, the master key will be used to enter the student's room for one or more of the reasons listed above.

Room Personalization

Personalizing your room is permitted. However, you must not alter or damage the condition of the room. Tacks, nails, and duct tape should not be used on the doors and walls (blue painters tape, Command strips or sticky tack may be used.) Walls and fixtures within your room should not be painted and plant hangers are not permitted in the ceiling. Posters, pictures, etc. hung on the outside of your door must be in good taste and not offensive to other residents or guests. Lofting of beds is not allowed. Waterbeds are not allowed. All carpeting in the room should be jute-backed and not attached to the floor with tape.

Service Animals and Emotional Support Policy

DCB allows Service Animals and Emotional Support animals in our housing facilities. Please email [bridget.gustafson@dakotacollege.edu](mailto:bridget.gustafson@dakotacollege.edu) for an accommodation request.

Safety and Security

Residence halls are locked on a 24-hour basis. You are strongly encouraged to lock your room and suite doors whenever you are sleeping or leave your room. Carry your keys with you at all times. You should never prop locked building doors open or permit entry to persons you do not know. Doing so may jeopardize the safety of all residents.

Screen Removal

Removal of screens is not permitted. A fine of \$100 will be assessed for the removal and/or damage of any screen. In addition, any fees for the repair or replacement of a damaged window screen in a residence hall room will be the responsibility of the student(s) living in that room.

Tobacco Policy

DCB is a tobacco free campus. Smoking on campus property, indoors or outdoors is prohibited at all times, including residential buildings. For purposes of this policy, "tobacco use" means the personal use of any tobacco product, whether intended to be lit or not, which shall include smoking, as well as the use of:

- An electronic cigarette or any other device intended to simulate smoking
- Use of smokeless tobacco, including snuff, chewing tobacco, smokeless pouches, and any other form

- The use of unlit cigarettes, cigars, and pipe tobacco
- Any other device intended to be used to simulate smoking

#### RESIDENCE LIFE ALCOHOL AND DRUG POLICY

DCB is a federally funded institution and hence follows federal law before state law. In accordance with state and federal laws, and with the necessary regulations and shared responsibilities of community living in mind, DCB Housing has established the following priorities:

- To discourage and prohibit illicit and illegal drug usage.
- To discourage and prohibit underage drinking.
- To prevent problem behavior and to educate against alcohol and drug abuse.
- To provide prevention, intervention information, and education for all residents, including information about confidential and effective guidance and counseling services for those with special concerns or needs regarding alcohol and drug use and/or abuse.

#### Residence Hall Alcohol Policy

DCB has declared all residence halls drug and alcohol free. Violations of this policy include but are not limited to:

- Drinking alcoholic beverages in the residence halls
- Being in possession of alcohol in the residence halls
- Using or possessing illegal drugs or prescription drugs that are not prescribed to the student in possession • Abusing prescription drugs
- Being in possession of items that may be reasonably considered drug paraphernalia
- Selling and/or distributing alcohol or other drugs from any location on campus • Entering a residence hall while dangerously intoxicated
- Committing a separate policy violation while intoxicated (i.e. vandalism violation, noise violation, etc.)
- Displaying or possessing alcohol containers, full or empty for decoration

#### Medical Amnesty

In order to encourage those who may be in danger from alcohol/drug poisoning or alcohol/drug related injuries to seek proper assistance, no student seeking medical treatment for his/her alcohol or drug-related overdose, or assisting another student in obtaining such treatment, will be subject to campus discipline for that Alcohol Violation. The incident will be documented for health and safety purposes.

#### DCB Parental Notification Policy

DCB has a responsibility to help students whenever campus personnel believe the student is in need of assistance. This responsibility extends to “notification of parents,” which is permitted under the 1998 Amendments to the Family Educational Rights and Privacy Act (FERPA). Therefore, parental notification may occur at DCB after any violation or serious offense where alcohol/drugs is involved if the student is under the age of 21.

#### RESIDENCE LIFE GUESTS/VISITORS POLICY

We are all responsible for the safety of our residence halls. Visitors/Guests are the responsibility of the resident hosting them at all times. Guests must follow all DCB and Housing policies. Residents should not allow visitors into the building if they are not assuming personal responsibility for them. A resident that hosts a guest assumes responsibility for any policy or regulation infractions committed by his/her guest(s). Visitation is a privilege and the Housing Office can remove visitation privileges for any reason at any time. The right of a student to reasonably sleep, study, and feel safe in their unit supersedes the right to have a guest. There is no time restriction as to when a guest can visit (open 24-hours), however, roommates/suitemates should be in agreement on how they host guests. A resident's right to visitation does not supersede another's right to safety and privacy. All overnight guests are required to be signed in by the on-call Resident Assistant. Cohabitation is not permitted. Only contracted residents of the building may hold residence in their assigned room. The right of a student to reasonably sleep, study, and feel safe in their unit supersedes the right to have a guest.

#### TRAINING OF RESIDENCE HALL STAFF

DCB Housing provides annual security and life safety training. This training minimally includes: introduction of local law enforcement officers, description of services offered, instruction on fire safety hazards and building evacuation, instruction on the emergency operations plan and emergency notification system, training related to the Clery Act and Campus Security Authorities (CSA), Title IX Awareness training, and general information on requesting emergency assistance from Public Safety.

#### FIREARMS AND WEAPONS POLICY

The possession, display, storage or use of firearms or dangerous weapons on campus owned or leased property, and at DCB sponsored events is prohibited. This shall apply to all faculty, staff and students of DCB and all visitors on DCB property.

"Firearms" include any device which expels or is readily capable of expelling a projectile by the action of an explosive and includes any such device, loaded or unloaded, Commonly referred to as: bazooka, machine gun, cannon, revolver, gun, rifle, pistol, shotgun.

DCB also prohibits the possession of replicas (firearms) and the use of black powder rifles, pistols, and shotguns.

"Dangerous weapons" include but are not limited to: billy clubs (any type), knife with blade 5", sap, bow and arrow (more 12.7 cm), scimitar, blackjack, machete, slingshot, bludgeon, martial arts weapons, spear, crossbow, metal knuckles, stiletto, cudgel, nunchaku, switchblade, dagger, throwing star (any type), sword, gravity knife, sand club, projectile tasers.

DCB also considers any weapon that will expel, or is readily capable of expelling a projectile by the action of a spring, compressed air, or compressed gas, including any such weapon loaded or unloaded, commonly referred to as a BB gun, air rifle, or CO2 gun; any projector of a bomb; any object containing or capable of producing and emitting any noxious liquid, gas, or substance as a dangerous weapon.

"Dangerous weapon" does not include a spray or aerosol containing CS, also known as ortho-chlorobenzamalonitrile (commonly known as pepper spray); CN, also known as alpha-chloroacetophenone (commonly known as mace); or other irritating agents intended for use in the defense of an individual.

Concealed weapons permits are not valid on DCB property or at sanctioned events per North Dakota Century Code 62.102-05. 5. Other items may be considered weapons when those items are used to inflict bodily injury or to threaten the infliction of bodily injury to others.

Enforcement

This policy does not apply to legally sworn law enforcement officers/officials.

- Employees: Employees will be subject to disciplinary action (for staff—NDUS Human Resource Policy 25. Job Discipline/Dismissal, for faculty—SBHE Policy 605.3 Nonrenewal, Termination or dismissal of Faculty).
- Students: Students will be subject to disciplinary action.

#### DCB Housing Complaints

All complaints will be taken seriously and thoroughly investigated. Where possible, the complaining party will be notified of the outcome of the complaint. Feedback may be used as part of the Department's operations and strategic planning process.

### MISSING STUDENT NOTIFICATION PROCEDURES AND POLICIES

#### Policy

This policy, with its accompanying procedures, establishes a framework for cooperation among members of the campus community aimed at locating and assisting currently enrolled students who reside in campus housing and are reported missing (as required by the 2008 reauthorization of the Higher Education Opportunity Act). A student shall be deemed missing when he or she is absent from the campus and/or has been reported missing by another individual without any known reason. All reports of missing students shall be directed to DCB Housing which shall investigate each report. All students shall have the opportunity to identify an individual to be contacted by the campus in case a student is determined to be missing. If a missing student is under 18 years of age and not an emancipated adult, DCB Housing is required to notify the parent or guardian of the missing student no later than 24 hours after the determination by DCB Housing that the student is missing.

#### Procedure

- Anyone who suspects a student may be missing should notify DCB Housing (701-228-5657), Head Resident (701-48029262).
- When a student is reported missing DCB Housing shall initiate an investigation to determine the validity of the missing person report. If the report proves to be valid DCB Housing shall:
  - If the missing student is under the age of 18 or not an emancipated adult, notify the student's custodial parent or guardian as contained in the records of the campus within 24 hours of the determination that the student is missing.
  - Notify the individual identified by the missing student as the emergency contact within 24 hours of making the determination that the student is missing.
  - Notify the Bottineau County Sheriff's Office within 24 hours after determining that the student is missing.
  - The Associate Dean for Student Services shall initiate whatever action he or she deems appropriate under the circumstances in the best interest of the missing student.
  - DCB Housing may also contact the student's instructors if necessary or beneficial in the situation to the student and/or the instructors.

#### Student Contact Information

Students are given the opportunity to confidentially designate emergency contact information when filing a housing application. This information is part of the college registration and is protected under FERPA. This information is accessible by DCB Housing and DCB Student Services.

#### Student Notification of This Policy

- Included on the DCB Housing and Safety website.
- Included in the annual Campus Security Report.

#### EMERGENCY MEDICAL RESPONSE PROCEDURES

Students, faculty, staff, and guests should report any emergency medical situations to the Bottineau County Sheriff's Office by dialing 911 or (701) 228-2740. DCB Head Residents are CPR and First Aid Certified.

#### CRIME PREVENTION, FIRE SAFETY, AND SAFETY AWARENESS PROGRAMMING

DCB offers many programs designed to inform students and employees about campus safety and security procedures and practices and the prevention of crimes. A common theme of all awareness and crime prevention programs is to encourage students and employees to be responsible for their own safety and for the safety of others on campus. Crime prevention programs on personal safety and security are sponsored by various campus organizations throughout the year. These programs include general crime prevention and security awareness programs, such as safety education forums, programs, and discussions about topics such as alcohol abuse, sexual assault awareness and prevention, relationship violence awareness and prevention, bystander intervention, fire safety, emergency response and evacuation procedures, crime and risk reduction strategies and theft prevention. New employee orientation includes the distribution of crime prevention and fire safety materials to all new employees. Crime prevention, security awareness and fire prevention programming occur throughout the academic year with an average of four programs per year – this includes in-person programming, online programming, community-policing programming, and tabling events. The following are some specific examples of annual programs currently offered by the university. This list is not all inclusive:

##### Crime Awareness Programming

- Campus Security Authority Training: Training provided to CSA's regarding responsibilities under the Clery Act. Annual employee and student employee programming.

##### Fire Safety Awareness Programming

- Fire Safety Training: Head Residents and student RA's participate in live exercises to include the use of fire extinguishers to extinguish a fire.
- Yearly Fire Drill and evacuations Annual employee and student employee programming.
- Severe weather drills and other drills are held periodically to train students and employees for various emergency situations.

##### Safety Awareness Programming

- CPR/First Aid & AED Classes, Naloxone: Annual housing staff programming

#### NORTH DAKOTA HAZING LAW

A person is guilty of an offense when, during another person's initiation into or affiliation with any organization, the person willfully engages in conduct that creates a substantial risk of physical injury to

that other person or a third person. As used in this section, "conduct" means any treatment or forced physical activity that is likely to adversely affect the physical health or safety of that other person or a third person, or which subjects that other person or third person to extreme mental stress, and may include extended deprivation of sleep or rest or extended isolation, whipping, beating, branding, forced calisthenics, overexposure to the weather, and forced consumption of any food, liquor, beverage, drug, or other substance. The offense is a class A misdemeanor if the actor's conduct causes physical injury, otherwise the offense is a class B misdemeanor.

## ANNUAL FIRE SAFETY REPORT (2024)

### Fire Safety Report Overview

The Higher Education Opportunity Act of 2008 (HEOA) requires all academic institutions with on-campus student residential facilities to develop and publish an annual fire safety report. The following report includes the information required by the HEOA, as it relates to the DCB campus. DCB publishes this Fire Safety Report as part of its annual Clery Act Compliance document, via this annual report, which contains information with respect to the fire safety practices and standards for DCB. This report includes statistics concerning the number of fires within on-campus residential facilities, the cause of each fire, the number of injuries and deaths related to a fire, and the value of the property damage caused by a fire.

### General Residence Hall Fire Safety

All residential student housing facilities have hard-wired addressable fire alarm systems, which are monitored twenty-four hours a day, seven days a week by private communications center. In addition, on-campus residential facilities have the following life safety systems: portable fire extinguishers, emergency lighting, emergency exit signs and doors. A quality control program ensures that each building is inspected by trained building inspectors on a regular basis to ensure that these systems are in working condition and includes a yearly fire alarm system test and inspection. Each resident has access to the Residence Life Handbook. This Handbook includes information on fire safety and appropriate actions to take during a fire alarm or fire emergency. Fire drills are conducted annually during Fall semester.

### Reporting a Fire for Inclusion in the Fire Statistics

If a fire occurs in a MDCB owned, rented, leased, or otherwise controlled building, community members should immediately notify the local fire department by dialing 911. Upon confirmation of a fire, the fire monitoring company or DCB Plant Services will immediately notify the Bottineau County Fire Department for assistance. Fires should be immediately reported to DCB Plant Services. If a member of the DCB community finds evidence of a fire that has been extinguished, and the person is not sure whether campus staff have already responded, the community member should immediately notify DCB Plant Services to investigate and document the incident. Fire alarms alert community members of potential hazards, and community members are required to heed their warning and evacuate buildings immediately upon hearing a fire alarm in a facility. Use the nearest stairwell and/or exit to leave the building immediately. Community members should familiarize themselves with the exits in each building. Do not use the elevator. When a fire alarm is activated, the elevators in most buildings will stop automatically. Occupants should use the stairs to evacuate the building.

### Fire Investigations – Arson

Every fire that is not known to be accidental (such as a cooking fire) is investigated. Fires determined through investigation to be willfully or maliciously set are classified as arson for Clery reporting purposes.



## Procedures for Students and Employees in the Event of a Fire

Find nearest pull station and sound central alarm, or call 911

- Shut all doors and windows in the vicinity of the fire.
- If the fire is small, use fire extinguishers to put it out.
- Exit by nearest safe stairway.
- Do not use the elevators.
- Do not run.
- If there is smoke in the room, keep low to the floor.
- Try to exit the room, feel the doorknob. o If it is hot, do not open the door. If the doorknob is not hot, brace yourself against the door and crack it open. If there is heat or heavy smoke, close the door and stay in your room.
- Don't panic.
- Seal up the cracks under the door with sheets, or towels.
- If there is smoke in the room, crack the windows at the bottom and at the top, if possible, to allow for ventilation
- Hang a sheet or towel from the window to announce that you are in your room.
- Call 911; be sure to give your room number and your location.
- If you can exit the room, put on shoes (and if necessary a coat). If smoke is evident, get a wet towel to cover your face.
- Close all doors.
- If in exiting the building you are blocked by fire, go to the safest fire-free area, or stairwell. If a phone is available call 911; or find a window, and signal that you are still in the building.

## Student Residence Hall Fire Evacuation Procedures in Case of a Fire

- The fire alarm system may be used to evacuate a building(s) if there is a potential threat to the health and safety of that segment of the community.
- Activate the building fire alarm if it is not already sounding. Pull a fire alarm station on the way out.
- Leave the building by using the nearest exit.
- Crawl if there is smoke. Cleaner, cooler air will be near the floor. Get Low and Go.
- Before opening any doors, feel the metal knob. If it is hot, do not open the door. If it is cool, brace yourself against the door, open it slightly, and if heat or heavy smoke are present, close the door and stay out of the room.
- Go to the nearest exit or stairway. If the nearest exit is blocked by fire, heat, or smoke, go to another exit.

- Always use an exit stairway, not an elevator. Elevator shafts may fill with smoke, or the power may fail, leaving you trapped.
- Close as many doors as possible as you leave. This helps to confine the fire. Stairway fire doors will keep out fire and smoke, if they are closed, and will protect you until you get outside.
- Total and immediate evacuation is safest. Only use a fire extinguisher if the fire is very small and you know how to do it safely.
- Do not delay calling emergency responders or activating the building fire alarm.
- If you cannot put out the fire, leave immediately. Make sure the fire department is called—even if you think the fire is out.
- If you get trapped, keep the doors closed. Place cloth material (wet, if possible) around and under door to prevent smoke from entering.
- Be prepared to signal your presence from a window.
- Signal for help. Hang an object at the window (jacket, shirt) to attract the fire department’s attention. If there is a phone in the room, call 911, and report that you are trapped. Be sure to give your room number and location. If all exits from a floor are blocked, go back to your room, close the door, seal cracks, open the windows if safe, wave something out the window, and shout or phone for help.
- If you are on fire, stop, drop and roll, wherever you are. Rolling smothers fire.
- Cool burns. Use cool tap water on burns immediately. Don’t use ointments. If skin is blistered or charred, call an ambulance.
- Be aware of obstacles. Storage of any items in the corridors, such as bicycles, chairs, desks, and other items is prohibited in all exit ways, including stairwells. Blocked exits and obstacles impede evacuation, especially during dark and smoky conditions.
- If you are a person with a disability (even temporarily), you should do the following:
  - o Learn about fire safety.
  - o Plan for fire emergencies
  - o Be aware of your own capabilities and limitations.

#### Plans for Future Improvements in Fire Safety

DCB strives to constantly improve and expand on our in-service training sessions for all DCB staff, faculty and students. This training includes basic fire safety topics and hands-on fire extinguisher training courses. DCB continues to assess and upgrade fire safety equipment as an ongoing process, to ensure that all equipment meets National Fire Safety standards. Future improvements will be made as needed as part of the ongoing assessment, budget, and strategic planning process.

#### Safety Inspections and Violations

DCB Plant Services leads an inspection team that conducts a fire safety inspection in approximately one academic/business building on campus monthly. The purpose of the inspection is to identify and eliminate fire hazards within the classrooms and office areas. The inspections include, but are not limited to, a visual examination of electrical cords, sprinkler heads, smoke detectors, fire extinguishers, and other life safety systems. In addition, each room will be examined for the presence of prohibited items (e.g., sources of open flames, such as candles; non-surge protected extension cords; halogen lamps etc. DCB

Housing staff conduct regular inspections of residential hall areas throughout the academic year. Full-scale building/hall inspections are announced. Not all common area inspections are announced. The Safety inspections are primarily designed to find and eliminate safety violations. Students are required to read and comply with the Residential guidelines, which include life and fire safety rules and regulations for residential buildings. The inspections include, but are not limited to, a visual examination of electrical cords, sprinkler heads, smoke detectors, fire extinguishers, and other life safety systems. In addition, each room will be examined for the presence of prohibited items (e.g., sources of open flames, such as candles; non-surge protected extension cords; halogen lamps; portable cooking appliances in non-kitchen areas; etc.) or prohibited activity (e.g., smoking in the room, tampering with life safety equipment, possession of pets, etc.). This inspection will also include a general assessment of food and waste storage and cleanliness of the room.

#### Prohibited Items and Prohibited Conduct

If a student's behavior does not meet campus community expectations or is in violation of the policies outlined in the Residence Hall Housing License Agreement or the Residence Life Handbook, they may expect additional training and if needed, progressive disciplinary procedures to help students understand the need for following safety protocols. Students are responsible for the items contained in their rooms and the events that occur in their rooms. Special surveillance resources may be utilized by DCB when conduct issues become chronic or disruptive.

#### Prohibited Items

The following actions/items are prohibited in residence halls:

- Overloaded electrical outlets, damaged or non-UL approved cords, unsafe placement of cords or improper use of electrical items
- Only 1 power strip is permitted per resident.
- Damaging or tampering with fire safety equipment (smoke detectors, fire extinguishers)
- Obstruction of room door/windows
- Use of any open flame device, (candles, etc.); burning of incense; Scentsy pots; possession/use of fireworks or other explosives; possession/storage of gasoline or other fuels/flammable chemicals
- Lamps generate heat such as Lava lamps, Halogen lamps, and halogen bulbs 300 watts or more.
- Space heaters
- A/C units requiring external ventilation.
- Appliances without automatic shutoffs (e.g., air fryers, toaster ovens, grills)
- Non-LED holiday lights
- Cloth and/or paper items hung near lights/lamps.
- Blocking open or otherwise interfering with the intended smoke barrier purpose of fire doors •  
Blocking hallways or building exits
- Failure to evacuate according to designated procedures during a building alarm and/or failure to follow instructions of campus or fire safety personnel.
- False report of fire or other dangerous condition (bomb threats, etc.)

- Activating false alarms will result in disciplinary action and possible removal from the residence hall.
- Hanging items from the ceiling Smoke Detectors

Each room is equipped with a smoke detector for your protection. The light on the detector indicates it is in working order. The detectors must be tested at the beginning of each year and can be tested monthly. If the light is not on, report it to your Head Resident.

#### Residence Hall Kitchens/Cooking

Fire regulations forbid cooking in your room except with a microwave. Kitchen facilities are available as well as microwaves and toasters, are provided for resident use only. You must stay with your food while cooking. Kitchens may be closed if residents neglect to clean up after using the facilities.

#### Fire Drills

Fire drills will be held periodically in order to ensure the building will be vacated in an orderly fashion should an emergency occur. Everyone must vacate the building regardless of whether they are in bed, on the phone, etc. Familiarize yourself with the fire exits in your building. DCB Plant Services and DCB Housing conduct all official fire drills.

#### EMERGENCY BUILDING EVACUATION DRILLS

Fire/emergency building evacuation drills are conducted annually for residence halls, academic, and administrative facilities. Emergency Building Evacuation Drills are conducted to familiarize occupants with emergency egress from a building and to establish conduct of the drill to a matter of routine. Drills will include suitable procedures, such as potential room-to-room checks, to ensure that all persons subject to the drill participate. Any person who fails to participate in a drill will be subject to disciplinary action by the appropriate authority. In the conduct of drills, emphasis shall be placed on orderly evacuation rather than speed. Participants shall relocate to a safe location outside the building and remain at such location until a recall signal is given or further instruction.

#### FIRE SAFETY SYSTEMS – RESIDENTIAL FACILITIES

##### FIRE SAFETY SYSTEMS IN DCB ON-CAMPUS RESIDENTIAL FACILITIES

Residence Hall	Gross Hall	Mead Hall	Milligan Hall
Year Built	1968	1968	1971
Sprinkler System	No	No	No
Building Fire Alarm	Yes	Yes	Yes
Smoke Detection	Yes	Yes	Yes
Pull Station	Yes	Yes	Yes
Remote Alarm Monitoring	Yes	Yes	Yes
Fire Extinguisher	Yes	Yes	Yes
# of Annual Fire Drills	1	1	1

#### ANNUAL FIRE SAFETY REPORT/FIRE STATISTICS ON-CAMPUS RESIDENTIAL FACILITIES (2023, 2022, 2021) 2023

Location	Total Fires	Date	Time	Cause	Injured	Deaths	Property Value	Fire Drill
Gross Hall	0	n/a	n/a	n/a	n/a	0	n/a	09/18/2023

Mead Hall	0	n/a	n/a	n/a	n/a	0	n/a	09/18/2023
Milligan Hall	0	n/a	n/a	n/a	n/a	0	n/a	09/18/2023

## 2022

Location	Total Fires	Date	Time	Cause	Injured	Deaths	Property Value	Fire Drill
Gross Hall	0	n/a	n/a	n/a	n/a	0	n/a	09/18/2022
Mead Hall	0	n/a	n/a	n/a	n/a	0	n/a	09/18/2022
Milligan Hall	0	n/a	n/a	n/a	n/a	0	n/a	09/18/2022

## 2021

Location	Total Fires	Date	Time	Cause	Injured	Deaths	Property Value	Fire Drill
Gross Hall	0	n/a	n/a	n/a	n/a	0	n/a	09/18/2021
Mead Hall	0	n/a	n/a	n/a	n/a	0	n/a	09/18/2021
Milligan Hall	0	n/a	n/a	n/a	n/a	0	n/a	09/18/2021

## CRIME DEFINITIONS

The following definitions are to be used for reporting the crimes listed in the Clery Act, in accordance with the Federal Bureau of Investigation's Uniform Crime Reporting (UCR) Program.

- The definitions of murder/non-manslaughter by negligence, rape, robbery, aggravated assault, burglary, motor vehicle theft, weapons: carrying, possessing, etc., law violations, drug abuse violations, and liquor law violations are from the "Summary Reporting System (SRS) User Manual" from the FBI's UCR Program.
- The definitions of fondling, incest, and statutory rape are excerpted from the "National Incident-Based Reporting System (NIBRS) User Manual" from the FBI's UCR Program.
- The definitions of larceny-theft (except motor vehicle theft), simple assault, intimidation, and destruction/damage/vandalism of property are from the "Hate Crime Data Collection Guidelines and Training Manual" from the FBI's UCR Program.

## CRIME DEFINITIONS FROM THE SUMMARY REPORTING SYSTEM (SRS) USER MANUAL FROM THE FBI'S UCR PROGRAM

**Arson:** Any willful or malicious burning or attempt to burn, with or without intent to defraud, a dwelling house, public building, motor vehicle or aircraft, personal property of another, etc.

**Criminal Homicide—Manslaughter by Negligence:** The killing of another person through gross negligence.

**Criminal Homicide—Murder and Nonnegligent Manslaughter:** The willful (nonnegligent) killing of one human being by another.

Rape: The penetration, no matter how slight, of the vagina or anus with any body part or object, or oral penetration by a sex organ of another person, without the consent of the victim.

Robbery: The taking or attempting to take anything of value from the care, custody, or control of a person or persons by force or threat of force or violence and/or by putting the victim in fear.

Aggravated Assault: An unlawful attack by one person upon another for the purpose of inflicting severe or aggravated bodily injury. This type of assault usually is accompanied by the use of a weapon or by means likely to produce death or great bodily harm. (It is not necessary that injury result from an aggravated assault when a gun, knife, or other weapon is used which could and probably would result in serious personal injury if the crime were successfully completed.)

Burglary: The unlawful entry of a structure to commit a felony or a theft. For reporting purposes this definition includes unlawful entry with intent to commit a larceny or felony; breaking and entering with intent to commit a larceny; housebreaking; safecracking; and all attempts to commit any of the aforementioned.

Motor Vehicle Theft: The theft or attempted theft of a motor vehicle. (Classify as motor vehicle theft all cases where automobiles are taken by persons not having lawful access even though the vehicles are later abandoned—including joyriding.)

Weapons—Carrying, Possessing, Etc.: The violation of laws or ordinances prohibiting the manufacture, sale, purchase, transportation, possession, concealment, or use of firearms, cutting instruments, explosives, incendiary devices, or other deadly weapons.

Drug Abuse Violations: The violation of laws prohibiting the production, distribution, and/or use of certain controlled substances and the equipment or devices utilized in their preparation and/or use. The unlawful cultivation, manufacture, distribution, sale, purchase, use, possession, transportation, or importation of any controlled drug or narcotic substance. Arrests for violations of State and local laws, specifically those relating to the unlawful possession, sale, use, growing, manufacturing, and making of narcotic drugs.

Liquor Law Violations: The violation of State or local laws or ordinances prohibiting the manufacture, sale, purchase, transportation, possession, or use of alcoholic beverages, not including driving under the influence and drunkenness.

Unfounded Crime Reports: According to Uniform Crime Report (UCR) guidelines, a reported offense can be cleared as unfounded by a sworn law enforcement authority “if the investigation shows that no offense occurred nor was attempted.”

These cases thus remain as official crime reports and are included in the departmental statistics; however, they are explicitly labeled as “unfounded” cases within UCR reports on the various index crimes. According to UCR guidelines, the statistics on unfounded cases should include crime reports that are either: False or Baseless.

#### CRIME DEFINITIONS FROM THE NATIONAL INCIDENT-BASED REPORTING SYSTEM (NIBRS) USER MANUAL FROM THE FBI'S UCR PROGRAM SEX OFFENSES

Any sexual act directed against another person, without the consent of the victim, including instances where the victim is incapable of giving consent.

A. Fondling: The touching of the private body parts of another person for the purpose of sexual gratification, without the consent of the victim, including instances where the victim is incapable of giving consent because of their age or because of their temporary or permanent mental incapacity.

B. Incest: Sexual intercourse between persons who are related to each other within the degrees wherein marriage is prohibited by law.

C. Statutory Rape: Sexual intercourse with a person who is under the statutory age of consent.

#### CRIME DEFINITIONS FROM THE HATE CRIME DATA COLLECTION GUIDELINES AND TRAINING MANUAL FROM THE FBI'S UCR PROGRAM

Hate Crimes: any of the above offenses, and any other crime involving bodily injury, reported to local police agencies or campus security authority that manifest evidence that the victim was intentionally selected because of the perpetrator's bias, or the perpetrator perceived the person to be in one of the protected group categories. Additionally, on August 14, 2008, the Clery Act was amended to include larceny/simple assault, intimidation, and destruction/damage/vandalism (except arson) as reportable categories of hate crimes. These new reporting categories are only reported if motivated by bias as determined by one of the designated bias categories. The types of bias categories include: race, gender, religion, sexual orientation, ethnicity, national origin, gender identity, and disability.

Hate Crime Definitions: To ensure uniformity in reporting nationwide, the following definitions have been adopted for use in hate crime reporting:

Bias: a preformed negative opinion or attitude toward a group of persons based on their race, religion, disability, sexual orientation, or ethnicity/national origin.

Bias Crime: a criminal offense committed against a person or property that is motivated, in whole or in part, by the offender's bias against a race, religion, disability, sexual orientation, or ethnicity/national origin; also known as Hate Crime. Note: Even if the offender was mistaken in their perception that the victim was a member of the group the offender was acting against, the offense is still a bias crime because the offender was motivated by bias against the group.

Larceny-Theft (Except Motor Vehicle Theft): The unlawful taking, carrying, leading, or riding away of property from the possession or constructive possession of another. Attempted larcenies are included. Embezzlement, confidence games, forgery, worthless checks, etc., are excluded.

Simple Assault: An unlawful physical attack by one person upon another where neither the offender displays a weapon, nor the victim suffers obvious severe or aggravated bodily injury involving apparent broken bones, loss of teeth, possible internal injury, severe laceration, or loss of consciousness.

Intimidation: To unlawfully place another person in reasonable fear of bodily harm through the use of threatening words and/or other conduct, but without displaying a weapon or subjecting the victim to actual physical attack.

Destruction/Damage/Vandalism of Property: To willfully or maliciously destroy, damage, deface, or otherwise injure real or personal property without the consent of the owner or the person having custody or control of it.

Unfounded Crime Reports: According to Uniform Crime Report (UCR) guidelines, a reported offense can be cleared as unfounded by a sworn law enforcement authority "if the investigation shows that no offense occurred nor was attempted."

These cases thus remain as official crime reports and are included in the departmental statistics; however, they are explicitly labeled as "unfounded" cases within UCR reports on the various index crimes. According to UCR guidelines, the statistics on unfounded cases should include crime reports that are either: False or Baseless.

## DOMESTIC VIOLENCE, DATING VIOLENCE, AND STALKING ADDITIONS FROM THE 2014 VAWA NEGOTIATED RULEMAKING FINAL CONSENSUS LANGUAGE

The Federal definition (from VAWA) of Domestic Violence: a felony or misdemeanor crime of violence committed:

- by a current or former spouse or intimate partner of the victim;
- by a person with whom the victim shares a child in common;
- by a person who is cohabitating with, or has cohabitated with, the victim as a spouse or intimate partner;
- by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction in which the crime of violence occurred; or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction in which the crime of violence occurred.

The Federal definition (from VAWA) of Dating Violence: the term "dating violence" means violence committed by a person:

- who is or has been in a social relationship of a romantic or intimate nature with the victim; and
- The existence of such a relationship shall be determined based on the reporting party's statement with consideration of: o the length of the relationship; o the type of relationship; o the frequency of interaction between the persons involved in the relationship.
- Dating violence includes, but is not limited to, sexual or physical abuse or the threat of such abuse.
- Dating violence does not include acts covered under the definition of domestic violence.

The Federal definition (from VAWA) of Stalking: engaging in a course of conduct directed at a specific person that would cause a reasonable person to:

- fear for the person's safety or the safety of others; or
- suffer substantial emotional distress for the purposes of this definition:
- Course of Conduct: means two or more acts, including, but not limited to, acts which the stalker directly, indirectly, or through third parties, by any action, method, device, or means follows, monitors, observes, surveils, threatens, or communicates to or about, a person, or interferes with a person's property
- Reasonable Person: means a reasonable person under similar circumstances and with similar identities to the victim.
- Substantial Emotional Distress: means significant mental suffering or anguish that may, but does not necessarily, require medical or other professional treatment or counseling.

## UNIFORM CRIME REPORTING (UCR)/NATIONAL INCIDENT-BASED REPORTING SYSTEM (NIBRS) DEFINITIONS

The Bureau of Criminal Investigation manages the state Uniform Crime Reporting (UCR) program, which involves the collection and analysis of crime statistics reported by local law enforcement agencies in North Dakota.

The Bottineau County Sheriff's Office is required to report crime statistics as defined by the Uniform Crime Reporting Program for the following crimes if the crimes are reported and occur on the property owned, controlled, leased, recognized, or operated by DCB. DCB Housing through a written Memorandum of Understanding, reports all crime occurring on campus to the BCSO for reporting



purposes. The Uniform Crime Reporting (UCR) program divides offenses into two groups, Part I and Part II crimes.

#### GROUP "A" OFFENSES

**Animal Cruelty:** Intentionally, knowingly, or recklessly taking an action that mistreats or kills any animal without just cause, such as torturing, tormenting, mutilation, maiming, poisoning, or abandonment. Included are instances of duty to provide care, e.g., shelter, food, water, care if sick or injured; transporting or confining an animal in a manner likely to cause injury or death; causing an animal to fight with another; inflicting excessive or repeated unnecessary pain or suffering, e.g., uses objects to beat or injure an animal. This definition does not include proper maintenance of animals for show or sport; use of animals for food, lawful hunting, fishing, or trapping.

**Arson:** To unlawfully and intentionally damage, or attempt to damage, any real or personal property by fire or incendiary device.

**Assault – Aggravated:** An unlawful attack by one person upon another wherein the offender uses or displays a weapon in a threatening manner, or the victim suffers obvious severe or aggravated bodily injury involving apparent broken bones, loss of teeth, possible internal injury, severe laceration, or loss of consciousness.

**Assault – Simple:** An unlawful physical attack by one person upon another where neither the offender displays a weapon, nor the victim suffers obvious severe or aggravated bodily injury involving apparent broken bones, loss of teeth, possible internal injury, severe laceration, or loss of consciousness.

**Assault – Intimidation:** To unlawfully place another person in reasonable fear of bodily harm through the use of threatening words and/or other conduct, but without displaying a weapon or subjecting the victim to actual physical attack.

**Assault – Stalking:** To engage in an intentional pattern of conduct consisting of two or more acts directed at a specific person which frightens, intimidates, or harasses that person, and which serves no legitimate purpose. The course of conduct must be such as would cause a reasonable person to experience fear, intimidation, or harassment.

**Bribery (Except Sports Bribery):** The offering, giving, receiving, or soliciting of anything of value (i.e., a bribe, gratuity, or kickback) to sway the judgment or action of a person in a position of trust or influence.

**Burglary/Breaking and Entering:** The unlawful entry into a building or other structure with the intent to commit a felony or a theft.

**Counterfeiting/Forgery:** The altering, copying, or imitation of something, without authority or right, with the intent to deceive or defraud by passing the copy or thing altered or imitated as that which is original or genuine; or the selling, buying, or possession of an altered, copied, or imitated thing with the intent to deceive or defraud.

**Destruction/Damage/Vandalism of Property:** To willfully or maliciously destroy, damage, deface, or otherwise injure real or personal property without the consent of the owner or the person having custody or control of it.

**Drug/Narcotic Violations (Except "DUI"):** The unlawful cultivation, manufacture, distribution, sale, purchase, use, possession, transportation or importation of any controlled drug or narcotic substance.

**Drug Equipment Violations:** The unlawful manufacture, sale, purchase, possession, or transportation of equipment or devices utilized in preparing or using drugs or narcotics.

**Embezzlement** The unlawful misappropriation by an offender to their own use or purpose of money, property, or some other thing of value entrusted to their care, custody, or control.

**Extortion/Blackmail:** To unlawfully obtain money, property, or any other thing of value, either tangible or intangible, through the use or threat of force, misuse of authority, threat of criminal prosecution, threat of destruction of reputation or social standing, or through other coercive means.

**Fraud – False Pretenses/Swindle/Confidence Game:** The intentional misrepresentation of existing fact or condition, or the use of some other deceptive scheme or device, to obtain money, goods, or other things of value.

**Fraud – Credit Card/Automatic Teller Machine Fraud:** The unlawful use of a credit (or debit) card or automatic teller machine or fraudulent purposes.

**Fraud – Hacking/Computer Invasion:** Wrongfully gaining access to another person's or institution's computer software, hardware, or network without authorized permissions or security clearances.

**Fraud – Identity Theft:** Wrongfully obtaining and using another person's personal data (e.g., name, date of birth, Social Security Number, driver's license number, credit card number).

**Fraud – Impersonation:** Falsely representing one's identity or position and acting in the character or position thus unlawfully assumed, to deceive others and thereby gain a profit or advantage, enjoy some right or privilege, or subject another person or entity to an expense, charge, or liability that would not have otherwise been incurred.

**Fraud – Welfare Fraud:** The use of deceitful statements, practices, or devices to unlawfully obtain welfare benefits.

**Fraud – Wire Fraud:** The use of an electric or electronic communications facility to intentionally transmit a false and/or deceptive message in furtherance of a fraudulent activity.

**Gambling – Betting/Wagering:** To unlawfully stake money or something else of value on the happening of an uncertain event or on the ascertainment of a fact in dispute.

**Gambling – Operating/Promoting/Assisting Gambling:** To unlawfully operate, promote, or assist in the operation of a game of chance, lottery, or other gambling activity.

**Gambling – Gambling Equipment Violations:** To unlawfully manufacture, sell, buy, possess, or transport equipment, devices, and/or goods used for gambling purposes.

**Gambling – Sports Tampering:** To unlawfully alter, meddle in, or otherwise interfere with a sporting contest or event for the purpose of gaining a gambling advantage.

**Homicide – Murder And Non-Negligent Manslaughter:** The willful (non-negligent) killing of one human being by another. **Homicide – Negligent Manslaughter:** The killing of another person through negligence. The offense does not include "Vehicular Manslaughter".

**Homicide – Justifiable Homicide:** The killing of a perpetrator of a serious criminal offense by a peace officer in the line of duty; or the killing, during commission of a serious criminal offense, of the perpetrator by a private individual.

**Homicide – Suicide (Attempted/Completed):** The taking of, or attempted taking of, one's own life.

**Homicide – Vehicular Manslaughter:** Recklessly causing the death of an individual while operating a motor vehicle.

Human Trafficking – Commercial Sex Acts: Inducing a person by force, fraud, or coercion to participate in commercial sex acts, or in which the person induced to perform such act(s) has not attained 18 years of age.

Human Trafficking – Involuntary Servitude: The obtaining of person(s) through recruitment, harboring, transportation, or provision, and subjecting such persons by force, fraud, or coercion into involuntary servitude, peonage, debt bondage, or slavery (not to include commercial sex acts).

Kidnapping/Abduction: The unlawful seizure, transportation, and/or detention of a person against their will, or of a minor without the consent of their custodial parent(s) or legal guardian(s).

Larceny/Theft – Pocket-Picking: The theft of articles from another person’s physical possession by stealth where the victim usually does not become immediately aware of the theft.

Larceny/Theft – Purse-Snatching: The grabbing or snatching of a purse, handbag, etc., from the physical possession of another person.

Larceny/Theft – Shoplifting: The theft, by someone other than an employee of the victim, of goods or merchandise exposed for sale.

Larceny/Theft – Theft from Building: A theft from within a building which is either open to the general public or to which the offender has legal access.

Larceny/Theft – Theft from Coin-Operated Machine or Device: A theft from a machine or device that is operated or activated by the use of coins.

Larceny/Theft – Theft from Motor Vehicle: The theft of articles from a motor vehicle, whether locked or unlocked. Larceny/Theft – Theft of Motor Vehicle Parts or Accessories: The theft of any part or accessory affixed to the interior or exterior of a motor vehicle in a manner which would make the item an attachment of the vehicle or necessary for its operation.

Larceny/Theft – All Other Larceny: All thefts that do not fit any of the definitions of the specific subcategories of Larceny/Theft listed above.

Motor Vehicle Theft: The theft of a motor vehicle, including automobiles, buses, recreational vehicles, trucks, and other motor vehicles.

Pornography/Obscene Material: The violation of laws or ordinances prohibiting the manufacture, publishing, sale, purchase, or possession of sexually explicit material, e.g., literature, photographs, etc.

Prostitution: To unlawfully engage in sexual relations for profit.

Prostitution – Assisting or Promoting: To solicit customers or transport persons for prostitution purposes; to own, manage, or operate a dwelling or other establishment for the purpose of providing a place where prostitution is performed; or to otherwise assist or promote prostitution.

Prostitution – Purchasing: To purchase or trade anything of value for commercial sex acts. Robbery: The taking or attempting to take anything of value under confrontational circumstances from the control, custody, or care of another person by force or threat of force or violence and/or by putting the victim in fear of immediate harm.

Sex Offenses – Rape (Except “Statutory Rape”): The carnal knowledge of a person, without the consent of the victim, including instances where the victim is incapable of giving consent because of their age or because of their temporary or permanent mental or physical incapacity.

Sex Offenses – Sodomy: Oral or anal sexual intercourse with another person, without the consent of the victim, including instances where the victim is incapable of giving consent because of their age or

because of their temporary or permanent mental or physical incapacity. (This includes members of the same sex.)

Sex Offenses – Sexual Assault with an Object: To use an object or instrument to unlawfully penetrate, however slightly, the genital or anal opening of the body of another person, without the consent of the victim, including instances where the victim is incapable of giving consent because of their age or because of their temporary or permanent mental or physical incapacity.

Sex Offenses – Fondling: The touching of the private body parts of another person for the purpose of sexual gratification, without consent of the victim including instances where the victim is incapable of giving consent because of their age or because of their temporary or permanent mental or physical incapacity.

Sex Offenses, Non-Forcible – Incest: Non-forcible sexual intercourse between persons who are related to each other within the degrees wherein marriage is prohibited by law.

Sex Offenses, Non-Forcible – Statutory Rape: Non-forcible sexual intercourse with a person who is under the statutory age of consent. “With the consent of the victim” is an element of Statutory Rape. In addition, there is no force or coercion used in Statutory Rape; the act is not an attack.

Stolen Property Offenses: Receiving, buying, selling, possessing, concealing, or transporting any property with the knowledge that it has been unlawfully taken, as by Burglary, Embezzlement, Fraud, Larceny/Theft, Robbery, etc.

Weapon Law Violations: The violation of laws or ordinances prohibiting the manufacture, sale, purchase, transportation, possession, concealment, or use of firearms, cutting instruments, explosives, incendiary devices or other deadly weapons.

#### GROUP “B” OFFENSES

Bad Checks (Except counterfeited or forged checks): Knowingly and intentionally writing and/or negotiating checks drawn against insufficient or nonexistent funds.

Curfew/Loitering/Vagrancy: The violation of a court order, regulation, ordinance, or law requiring the withdrawal of persons from the streets of other specified areas; prohibiting persons from remaining in an area or place in an idle or aimless manner; or prohibiting persons from going from place to place without visible means of support.

Disorderly Conduct: Any behavior that tends to disturb the public peace or decorum, scandalize the community, or shock the public sense of morality.

Driving Under The Influence: Driving or operating a motor vehicle or common carrier while mentally or physically impaired as the result of consuming an alcoholic beverage or using a drug or narcotic. This offense includes being in “Actual Physical Control.”

Drunkennes (Except DUI) (This is not a crime in ND): To drink alcoholic beverages to the extent that one’s mental faculties and physical coordination are substantially impaired.

Family Offense, Non-Violent: Unlawful, nonviolent acts by a family member (or legal guardian) that threaten the physical, mental, or economic well-being or morals of another family member, and that are not classifiable as other offenses, such as Assault, Incest, Statutory Rape, etc. This offense includes: Abandonment; Desertion; Neglect; Nonsupport; Nonviolent Abuse; or Non-Violent Cruelty to other family members. It also includes the nonpayment of court-ordered alimony, as long as it is not considered

Contempt of Court within the reporting jurisdiction. Does not include victims of these offenses who are taken into custody for their own protection.

Liquor Law Violations (Except DUI and Drunkenness): The violation of laws or ordinances prohibiting the manufacture, sale, purchase, transportation, possession, or use of alcoholic beverages.

Peeping Tom: To secretly look through a window, doorway, keyhole, or other aperture for the purpose of voyeurism.

Trespassing on Real Property: To unlawfully enter land, a dwelling, or other real property.

#### ALL OTHER OFFENSES

All crimes that are not Group "A" offenses and not included in one of the specifically named Group "B" crime categories listed above. (Traffic offenses, except for Hit and Run, are excluded). This information is provided as a part of DCB's continuing commitment to safety and security on campus in compliance with the North Dakota Uniform Crime Reporting Act and the Jeanne Clery Act. Concerns, questions, or complaints related to this document or the applicable statutes should be directed to DCB Housing – Bridget Gustafson – (701) 228-5657, [bridget.gustafson@dakotacollege.edu](mailto:bridget.gustafson@dakotacollege.edu)

# Sexual Harassment, Discrimination, and Sexual Misconduct Policy



# Title IX Compliance

This policy manual seeks to combine and implement the legal, regulatory, and policy requirements regarding sexual discrimination contained within:

- a. Titles IV and VII of the Civil Rights Act of 1964
- b. Title IX of the Education Amendments Act of 1972
- c. Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act of 1990 (Clery Act)
- d. The Violence Against Women Act of 2013
- e. NDCC 15-10-56. Disciplinary Proceedings – Right to Counsel for Students and Organizations - Appeals
- f. NDCC 34-06.1-03. Prohibition of Discrimination
- g. NDCC 54-06-38. Harassment Policies
- h. ND SBHE Policies 514. Due Process Requirements (for students)
- i. ND SBHE 603.1. Harassment (for employees)
- j. ND SBHE 603.2. Equal Employment Opportunity
- k. ND SBHE 605.3. Nonrenewal, Termination or Dismissal of Faculty
- l. ND SBHE 605.4. Hearing and Appeals
- m. ND SBHE 605.5. Mediation
- n. ND SBHE 612. Faculty Grievances
- o. NDUS HR Policies 25. Job Discipline/Dismissal
- p. NDUS HR Policies 26. Termination Procedure
- q. NDUS HR Policies 27. Appeals Procedures

To simplify Dakota College at Bottineau’s policy and procedures, the following index is provided to help the reader locate the specific topic of interest more easily. Some language from one section may be repeated in another section to assist the reader.

- |   |  |
|---|--|
| 1. Non-Discrimination                   | 18. Resources                                    |
| 2. Purpose                              | 19. Prevention Education                         |
| 3. Policy Statement/Overview            | 20. Training                                     |
| 4. Definitions                          | 21. Clery Act Reporting                          |
| 5. Admissions/Financial Aid             | 22. Federal Timely warning Reporting Obligations |
| 6. Athletics                            | 23. Revision                                     |
| 7. Employment                           |  |
| 8. Consensual Relationships             |  |
| 9. Sexual Misconduct/Violence           |  |
| 10. Reporting Sexual Discrimination     |  |
| 11. Confidential Resource and Reporting |  |
| 12. Responding to Reports               |  |
| 13. Pre-grievance Process               |  |
| 14. Grievance Process                   |  |
| 15. Appeal Process                      |  |
| 16. Retaliation                         |  |
| 17. Discipline/Sanctions                |  |

## **Non-Discrimination Statement**

Dakota College at Bottineau (DCB) does not engage in discrimination or harassment against any person because of race, color, religion or creed, sex, gender, gender identity, pregnancy, national or ethnic origin, disability, age, ancestry, marital status, sexual orientation, veteran status, political beliefs or affiliations, or information protected by the Genetic Information Nondiscrimination Act (GINA); and complies with all federal and state non-discrimination, equal opportunity and affirmative action laws, orders and regulations, including remaining compliant and consistent with the Civil Rights Act, the Americans with Disabilities Act, the Rehabilitation Act of 1973, and Title IX of the Education Amendments of 1972. This policy on non-discrimination applies to admissions, enrollment, scholarships, loan programs, participation in college activities, employment, and access to participation in, and treatment in all college programs and activities.

DCB prohibits retaliation against any individual or group who exercises its rights or responsibilities protected under the provisions of state law, federal law and/or DCB policy. Employees or students who violate this policy may face disciplinary action up to and including separation from DCB. Third parties who commit discrimination or harassment may have their relationships with DCB terminated and/or their privileges of being on college premises withdrawn.

Questions, comments, or complaints regarding sexual discrimination or sexual harassment may be directed to the Title IX Office. All other forms of discrimination or harassment may be directed to the appropriate associate dean or director of human resources. Complaints may also be filed with the U.S. Department of Education, Office for Civil Rights.

Laura Halvorson  
Title IX Coordinator  
Thatcher Hall 1104  
105 Simrall BLVD  
Bottineau, ND 58318 701-228-5680  
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Sara Abrahamson  
Director, Human Resources  
500 University Ave W  
Minot, ND 58707 701-858-4610  
[hr@minotstateu.edu](mailto:hr@minotstateu.edu) or [sara.abrahamson@minotstateu.edu](mailto:sara.abrahamson@minotstateu.edu)

The Office for Civil Rights/Chicago  
U.S. Department of Education, Citigroup Center  
John C. Kluczynski Federal Building  
230 South Dearborn Street, 37<sup>th</sup> Floor, Chicago, IL 60604  
Telephone (312) 730-1560, FAX: (312) 730-1576  
TDD: (800) 877-8339, email: [OCR.Chicago@ed.gov](mailto:OCR.Chicago@ed.gov), website: [ed.gov/ocr](http://ed.gov/ocr)

## **PURPOSE**

To establish Dakota College at Bottineau policy prohibiting discrimination, harassment in all forms, sexual misconduct, relationship violence, and retaliation related to reports of such conduct. These procedures apply to complaints alleging all forms of sex discrimination (including sexual or gender-based harassment, assault and violence) against employees, students, and third parties. These apply to all College programs and activities, including those conducted off-campus.

## **POLICY STATEMENT/OVERVIEW**

Dakota College at Bottineau strives to provide an educational environment where all members of the campus community are expected to conduct themselves in a manner that enhances the well-being of the community. Members of the college community, guests, and visitors have the right to be free from all forms of sexual harassment, discrimination, and sexual misconduct ("Prohibited Conduct"). This policy covers student, faculty, and staff-related matters of Prohibited Conduct, regardless of whether the alleged conduct occurred on or off campus, and regardless of whether the alleged Respondent is a student, faculty member, staff member, or third party. Examples include acts of sexual violence (including sexual assault and rape), any harassment based on sex or gender, domestic violence, dating violence, and stalking.

Dakota College at Bottineau will not tolerate incidents of harassment, discrimination, or sexual misconduct occurring on or off campus, where relevant, whether there is a hostile environment on campus, or in an off-campus education program or activity.

If the off-campus misconduct did not occur within the context of a College program or activity, the college will consider the effects of off-campus conduct when evaluating whether there is a hostile environment on campus, or in an off-campus education program or activity.

When such an allegation is reported to an appropriate Dakota College official, protective and supportive measures will be used. Such measures are to reasonably ensure such conduct ends, the conduct is not repeated, and the effects on the Complainant and community are remedied. Measures by the College may include serious sanctions (up to and including termination, suspension, or expulsion, if circumstances warrant) when a Respondent is found to have violated this policy. Students and employees who retaliate against individuals who report Prohibited Conduct may be subject to disciplinary action.

Employees are required, and students and are strongly encouraged, to report any and all incidents of sexual discrimination, harassment, or sexual misconduct to the Dakota College at Bottineau Title IX Coordinator, or any Title IX Investigator/Deputy. When an allegation of misconduct is brought to an appropriate College official, Dakota College at Bottineau will respond promptly, equitably, and thoroughly.

This policy manual is written to address the many issues and varying aspects of sexual discrimination. While there are many laws, regulations, policies, and other such sources written

for the purpose of preventing or responding to sexual discrimination, the explanation that it takes to satisfy and comply with all of the standards and requirements is a somewhat difficult task. The amount of information in this manual may seem overwhelming, so we've attempted to organize it so the reader may easily find and understand the particular aspect that is relevant. If the answer sought does not seem readily available, or needs further clarification, please do not hesitate to contact the Title IX Coordinator.

## **DEFINITIONS**

For the purposes of this Policy, the listed terms shall have the following definitions:

- a. **Actual Knowledge.** Notice of sexual harassment or allegations of sexual harassment to an institution's Title IX Coordinator or any institution official with authority to institute corrective measures on the institution's behalf.
- b. **Campus Security Authority (CSA).** Any College employee whose responsibilities fall under any of the following conditions:
  - a. A campus security department of an institution
  - b. Any individual or individuals who have responsibility for campus security but who do not constitute a campus security department
  - c. Any individual or organization specified in an institution's statement of campus security policy as an individual or organization to which students and employees should report criminal offenses
  - d. An official of an institution who has significant responsibility for student and campus activities, including, but not limited to, student housing, student discipline, and campus judicial proceedings. An official is defined as any person who has the authority and the duty to take action or respond to particular issues on behalf of the institution

CSAs are required by the Clery Act to report certain crimes for statistical purposes.

- c. **Coercion.** Coercion is unreasonable pressure for sexual activity. When someone makes clear to you that they do not want sex, that they want to stop, or that they do not want to go past a certain point of sexual interaction, continued pressure beyond that point can be considered coercive.
- d. **Complainant.** An individual who is alleged to be the victim of conduct which could, after investigation, constitute sexual harassment.
- e. **Consent.** Consent is an affirmative decision to engage in mutually acceptable sexual activity given by clear actions or words. (Further discussion of consent and North Dakota law is found in the section of "Sexual Misconduct/Violence.")
- f. **Dating Violence.** Violence committed by the respondent:

- i. Who is or has been in a romantic or intimate relationship with the complainant; and
  - ii. Where the existence of such a relationship shall be determined by considering the length of the relationship, the type of relationship, and the frequency of interactions between the complainant and respondent.
- g. **Deliberate Indifference.** When an institution's response to sexual harassment is clearly unreasonable in light of the information known to the institution at the time.
- h. **Domestic Violence.** Violence committed by the respondent, who is:
  - i. a current or former spouse or intimate partner of the complainant;
  - ii. a person with whom the complainant shares a child in common;
  - iii. cohabiting with or has cohabited with the victim as a spouse or intimate partner;
  - iv. similarly situated to a spouse of the complainant; or
  - v. any person against whose acts the complainant is protected by N.D.C.C. ch. 14-07.1.
- i. **Education program or activity.** Includes locations, events, or circumstances over which an institution exercises substantial control over both the respondent and the context in which the sexual harassment occurs, as well as in any building owned or controlled by a student organization that is officially recognized by an institution.
- j. **False Complaint.** A false complaint is an allegation made with knowledge that the allegation is wholly or substantially untrue.
- k. **Force.** Force is the use of physical violence and/or imposing on someone physically to gain sexual access. Force also includes threats, intimidation (implied threats) and coercion that overcome resistance or produce consent. (Further discussion of force is found in the section of "Sexual Misconduct/Violence.")
- l. **Fondling.** The touching of the private body parts of another person for the purpose of sexual gratification, without the consent of the victim, including instances where the victim is incapable of giving consent because of his/her age or because of his/her temporary or permanent mental incapacity.
- m. **Formal Complaint.** A document filed by a complainant (which either contains the complainant's signature or indicates that the complainant is the one filing the complaint) or signed by the Title IX Coordinator alleging sexual harassment against a respondent and requesting that the institution investigate.
- n. **Incest.** Sexual intercourse between persons who are related to each other within the degrees wherein marriage is prohibited by law.

o. **Preponderance of the Evidence.** Preponderance of the Evidence is the standard by which a determination will be made regarding violations of this policy. It means the decision will be based on whether it is more likely than not that the discrimination occurred.

p. **Rape.** Penetration, no matter how slight, of the vagina or anus of the complainant with any body part or object by the respondent, or oral penetration of the complainant by a sex organ of the respondent, without the consent of the complainant.

q. **Respondent.** An individual who has been reported to be the perpetrator of conduct that could constitute sexual harassment.

r. **Sexual Assault.** Either rape, fondling, incest, statutory rape, or any of the sexual offenses listed in N.D.C.C. ch. 12.1-20 or by the FBI's Uniform Crime Reporting system.

s. **Sexual Harassment.** Conduct, on the basis of sex, constituting one (or more) of the following:

- i. An employee of the institution conditioning the provision of an aid, benefit, or service of the institution on an individual's participation in unwelcome sexual conduct;
- ii. Unwelcome conduct determined by a reasonable person to be so severe, pervasive, and objectively offensive that it effectively denies a person equal access to the institution's education program or activity; or
- iii. Sexual assault, dating violence, domestic violence, or stalking, as defined in this section.

t. **Stalking.** Engaging in a course of conduct directed at a specific person that would cause a reasonable person to (a) fear for his or her safety or the safety of others; or (b) suffer substantial emotional distress.

u. **Statutory Rape.** Sexual intercourse with a person who is under the statutory age of consent.

v. **Supportive Measures.** Non-disciplinary, non-punitive individualized services offered as appropriate (as reasonably available) and without fee or charge to the complainant or respondent.

## **ADMISSIONS/FINANCIAL AID**

No person shall be discriminated against because of sex, gender, or genderorientation during the application and admissions processes, or the awarding of financial aid.

## **ATHLETICS**

The DCB Athletic Department realizes that gender equity is a key component in a successful athletics program. Since the inception of Title IX, there is the misconception that gender equity is simply meeting one of the three prongs of the Three-Part Test:

1. Provide participation opportunities for women and men that are substantially proportionate to their respective rates of enrollment as full-time undergraduate students.
2. Demonstrate a history and continuing practice of program expansion for the underrepresented sex.
3. Fully and effectively accommodate the interests and abilities of the underrepresented sex.

Beyond these prongs, gender equity stretches through every program and every student-athlete. It is our goal to provide equitable opportunities for ALL studentathletes to succeed, through various avenues, such as participation, scholarships, and other benefits. These avenues include (but are not limited to) the following:

- provision of equipment and supplies;
- scheduling;
- travel;
- tutoring;
- coaching;
- locker rooms;
- facilities;
- medical and training facilities and services;
- publicity;
- recruiting; and
- support services.

Within the Athletics Department, the Gender Equity/Minority Issues Committee plans to evaluate the Gender Equity Plan on an ongoing basis to ensure progress is made and other issues that may surface are identified and addressed.

## **EMPLOYMENT**

DCB prohibits discrimination on the basis of sex or gender when making decisions regarding employment unless a bona fide occupational qualification exists (BFOQ). This includes (but is not limited to) decisions for hiring, promotion, transfers, and salary administration. A BFOQ would exist if the duties of the position reasonably necessitate the choice of one sex or gender over the other.

All regular staff and faculty are considered mandated reporters and are obligated to report cases of sexual discrimination of which they are aware. Employees must report such cases to

the Title IX Coordinator, and that office will coordinate the College's response. Employees are not to conduct their own investigations of such cases.

### **CONSENSUAL RELATIONSHIPS**

There are inherent risks in any romantic or sexual relationship between individuals in unequal positions (such as teacher and student, supervisor and employee). These relationships may be less consensual than perceived by the individual whose position confers power. The relationship may also be viewed in different ways by each of the parties, particularly in retrospect. Furthermore, circumstances may change, and conduct that was previously welcome may become unwelcome. The College does not wish to interfere with private choices regarding personal relationships when these relationships do not interfere with the goals and policies of the College. For the personal protection of members of this community, relationships in which power differentials are inherent (such as faculty-student, staff-student, and administrator-student) are generally discouraged.

Consensual romantic or sexual relationships in which one party maintains a direct supervisory or evaluative role over the other party are unethical. Therefore, persons with direct supervisory or evaluative responsibilities who are involved in such relationships must bring those relationships to the timely attention of their supervisor or the Title IX Coordinator, and will likely result in the necessity to either remove the employee from the supervisory or evaluative responsibilities, or shift the other party out of being supervised or evaluated by someone with whom they have established a consensual relationship. This includes resident advisors and students over whom they have direct responsibility. While no relationships are prohibited by this policy, failure to self-report such relationships to a supervisor as required can result in disciplinary action for an employee.

### **SEXUAL MISCONDUCT/VIOLENCE**

Sexual misconduct, whether involving violence or not, is a form a sexual discrimination that is prohibited by this policy. Misconduct offenses include, but are not limited to, the following:

#### **1. SEXUAL HARASSMENT is:**

- a. An employee of the institution conditioning the provision of an aid, benefit, or service of the institution on an individual's participation in unwelcome sexual conduct;
- b. Unwelcome conduct determined by a reasonable person to be so severe, pervasive, and objectively offensive that it effectively denies a person equal access to the institution's education program or activity; or
- c. Sexual assault, dating violence, domestic violence, or stalking, as defined in this section.

Examples include: an attempt to coerce an unwilling person into a sexual relationship; to repeatedly subject a person to egregious, unwelcome sexual attention; to punish a refusal to comply with a sexual based request; to condition a benefit on submitting to sexual advances; sexual violence; intimate partner violence, stalking; gender-based bullying.

## 2. Consent

- a. Consent is an informed decision made freely and actively by all parties. Relying solely upon nonverbal communication can lead to miscommunication. It is important not to make assumptions; if confusion or ambiguity on the issue of consent arises anytime during a sexual interaction, it is essential that each participant stops and clarifies, verbally, willingness to continue.
- b. Individuals should understand that consent may not be inferred from silence, passivity, or lack of active resistance alone. Furthermore, a current or previous dating or sexual relationship is not sufficient to constitute consent, and consent to one form of sexual activity does not imply consent to other forms of sexual activity.
- c. Conduct will be considered "without consent" if no clear consent, verbal or nonverbal, is given. The perspective of a reasonable person will be the basis for determining whether a Respondent knew, or reasonably should have known, whether consent was given. However, being intoxicated or incapacitated does not diminish one's responsibility to obtain consent and will not be an excuse for sexual misconduct.
- d. In some situations, an individual may not be able to freely consent. Examples include, but are not limited to, when an individual is incapacitated due to alcohol or other drugs, unconsciousness, intimidation, coercion, mental or physical impaired disability, isolation, or confinement. The perspective of a reasonable person will be the basis for determining whether the Respondent knew, or reasonably should have known, whether the Complainant was capable of providing consent.
- e. In order to give effective consent, one must be of legal age. According to the North Dakota Century Code:
  - i. The "age of consent" is 18 years old in North Dakota.
  - ii. A person under the age of 15 cannot legally consent to sexual activity under any circumstances.
  - iii. A person between the ages of 15–17 is legally able to consent to sexual activity if the partner is less than three years older. For example, a 16-year-old can legally consent to engage in sexual activity with a partner who is 18 years old, but not a partner who is 19 years old.

There is no requirement that a party resist the sexual advance or request, but resistance is a clear demonstration of non-consent.



## **REPORTING SEXUAL DISCRIMINATION**

All regular college employees (faculty, staff, and administrators) have an obligation to report actual or suspected discrimination or harassment to the Title IX Coordinator though there are some limited exceptions. In order to make informed choices, it is important to be aware of confidentiality and mandatory reporting requirements when consulting campus resources. On campus, some resources may maintain confidentiality, meaning they are not required to report actual or suspected discrimination or harassment to appropriate College officials, thereby offering options and advice without any obligation to inform the Title IX Coordinator unless you have requested information to be shared. Other resources exist for the Complainant to report policy violations and these resources will take action when the Complainant reports victimization to them. The following describes the two reporting options:

### **Confidential Resources and Reporting**

The following describes the confidential reporting options:

- Campus mental health counselor, • Campus health nurse,
- Off campus:
- Licensed Professional Counselors
- Domestic Violence Crisis Center counselors,
- On or off-campus members of the clergy/chaplains

The College will seek to balance a complainant's request for anonymity or not to participate in an investigation with its broader obligation to campus safety. **In cases indicating pattern, predation, threats, weapons, and/or violence, Dakota College may be unable to honor a request for confidentiality.** If the complainant asks that their name not be disclosed to the Respondent, or that no investigation be pursued, it may limit the scope of the College's response.

### **Reporting**

The College's primary concern is the safety of its students, faculty and staff, and to encourage reporting of Prohibited Conduct. All College employees have a duty to report actual or suspected sexual discrimination or harassment to the Title IX Coordinator though there are some limited exceptions for those that fall under "confidential reporting." A Complainant may want to consider carefully whether they share personally identifiable details with employees who have a duty to report, as those details must be shared by the employee with the Title IX Coordinator and/or Deputy Title IX Coordinator(s). To be clear, employees with a duty to report must share all details of the reports they receive.

Failure of a non-confidential employee, as described in this section, to report an incident of sexual discrimination of which they become aware, is a violation of College policy and is subject to disciplinary action ranging from a warning up to and including termination of employment.

### **1. Complainant may request confidentiality.**

If complainant does not wish for their name to be shared, does not wish for an investigation to take place, or does not want a formal resolution to be pursued, the Complainant may make such request to the Title IX Coordinator and/or Deputy Title IX Coordinator(s)/(Investigators), who will evaluate that request in order to ensure the safety of the campus, in compliance with federal law. In cases indicating pattern, predation, threat, weapons and/or violence, the College may be unable to honor a request for confidentiality. In cases where the Complainant requests confidentiality and the circumstances allow the College to honor that request, the College will offer supportive measures and measures to the Complainant but will not otherwise pursue formal action.

### **2. Complainants will have their complaints promptly and thoroughly investigated.**

A Complainant has the right to have complaints taken seriously by the College when reported, and to have those incidents investigated thoroughly and properly resolved through the procedures set forth below. The College will promptly act on any complaint or notice of violation of this Policy when received by the Title IX Coordinator or any College official with authority to institute corrective measures on the College's behalf. DCB will investigate each complaint thoroughly to determine whether the alleged violation has occurred. The outcome of an allegation will be determined based on the preponderance of the evidence. This means that violations of this policy will be based on whether it is more likely than not that the conduct occurred.

### **3. Dakota College at Bottineau will conduct an investigation; however, it will be separate from a criminal investigation, though communication with law enforcement may be maintained.**

DCB's responsibility to enforce this policy is not part of the criminal judicial system. Complainants may pursue a complaint with the College and local law enforcement simultaneously. The College may need to briefly suspend the fact-finding aspect of a Title IX investigation at the request of law enforcement while the law enforcement agency is in the process of gathering evidence. In the event, the College will maintain regular contact with law enforcement to determine when it may begin or resume its investigation. The College will promptly resume its investigation as soon as notified by the law enforcement agency that it has completed the evidence gathering process, or sooner if the College determines that the evidence gathering process will be lengthy or delayed. The College will not delay its investigation until the ultimate outcome of the criminal investigation; however, the College reserves the right to implement appropriate supportive measures during any law enforcement agency's investigative period when the College has temporarily deferred its investigation, to assist and protect the safety of the complainant(s) and the campus community and to prevent retaliation.

DCB's response to a report will be more effective if the report is made soon after the incident. In cases where the Respondent is no longer affiliated with the DCB campus,

DCB will provide support for the Complainant and will attempt to investigate for the purpose of sanctioning the Respondent. However, the more time passes after the incident, the more difficult it may be for DCB to respond.

Anonymous reports can be made by Complainant and/or third parties using the online reporting form posted on the DCB website. Note that these anonymous reports may prompt a need for DCB to investigate.

Reports to the Title IX Coordinator can be made via email, phone, or in person at the contact information below:

**Laura Halvorson**  
**Title IX Coordinator**  
**Director of Student Success**  
**Library**  
**Thatcher Hall Room 1124 701-228-5680**  
[laura.halvorson@dakotacollege.edu](mailto:laura.halvorson@dakotacollege.edu)

**Hattie Albertson**  
**Title IX Investigator**  
**Education Faculty**  
**Thatcher Hall 203 701-228-5454**  
[hattie.albertson@dakotacollege.edu](mailto:hattie.albertson@dakotacollege.edu) **Erin Williams**  
**Title IX Investigator/Deputy Coordinator**  
**Nursing Faculty**  
**Thatcher Hall Room 213 701-228-5444**  
[erin.beth.williams@dakotacollege.edu](mailto:erin.beth.williams@dakotacollege.edu)

**Corey Gorder**  
**Title IX Investigator**  
**Mental Health Counselor**  
**Thatcher Hall Room 123 701-228-5451**  
[corey.gorder@dakotacollege.edu](mailto:corey.gorder@dakotacollege.edu)

### **Amnesty**

The health and safety of students is of primary concern at Dakota College at Bottineau. Fear of punishment for violation of the Dakota College at Bottineau Student Code of Conduct regarding drugs and alcohol should not prevent students from seeking help for an individual who has been assaulted.

While the student seeking help is not exempt from facing disciplinary action under the Dakota College at Bottineau Code of Student Conduct, all efforts made by students to positively impact the health and safety of others will be taken into consideration and may lessen possible disciplinary outcomes.

The amnesty does not apply to other prohibited conduct, including (but not limited to) assault, violence, property damage, or the distribution of dangerous substances, whether legal or illegal.

## **RESPONDING TO REPORTS**

### **Equitable Treatment**

At all times, DCB will treat complainants and respondents equitably by following a grievance process which complies with this Policy before the imposition of disciplinary sanctions, and by providing remedies to a complainant if a respondent is found to be responsible for sexual harassment.

### **Pre-Grievance Process**

- a. Timing.** DCB will strive to complete the grievance process within sixty (60) days, including time frames for filing and resolving appeals, and for informal resolution processes if offered. Notwithstanding, temporary delays or extensions of the time frames will be offered for good cause, with written notice to the parties setting forth the cause for the action.
  - i. *Good cause.* May include considerations such as the absence of a party, a party's advisor, or a witness; concurrent law enforcement activity; or the need for accommodations for language or disability.
  
- b. Actual Knowledge of Sexual Harassment.** With or without the filing of a formal complaint, once DCB has actual knowledge of sexual harassment within its educational program or activity in the United States, the institution must respond promptly and without deliberate indifference pursuant to this Policy and any applicable institutional policies.
  - i. Once the institution has actual knowledge of sexual harassment, the Title IX Coordinator or designee must contact the complainant and:
    - a) Discuss the availability of supportive measures;
    - b) Consider the complainant's wishes regarding supportive measures;

- c) Inform the complainant that supportive measures are available with or without the filing of a formal complaint; and
- d) Explain the process of filing a formal complaint. ii. No disciplinary sanctions or other actions which are not supportive measures may be imposed against a respondent prior to the conclusion of the grievance process.

**c. Supportive Measures.** The College will take prompt and effective steps to end the sexual or gender-based harassment, assault and violence; eliminate any hostile environment; prevent its recurrence; and remedy the discriminatory effects on the victims and others as appropriate. The college reserves the right to take whatever measures it deems necessary in response to an allegation of sexual discrimination in order to protect a person's rights and personal safety. When warranted by the circumstances surrounding a complaint of sexual misconduct, the College may implement supportive measures until its investigation is concluded. Violation of these supportive measures may be considered grounds for additional complaints of sexual misconduct or as retaliation for the ongoing investigation of sexual misconduct. Requests can be made by the complainant or respondent.

- i. Potential supportive measures include, but are not limited to:
  - a) Providing an escort to the Complainant or Respondent so they may move safely on campus;
  - b) Increased security or monitoring locations;
  - c) Issuing a no-contact order to the parties, which prohibits any contact between them;
  - d) Moving the Complainant and/or Respondent to different oncampus housing;
  - e) Altering the class schedule of the parties so they do not attend the same classes;
  - f) Extensions of deadlines or other course related adjustments;
  - g) Providing counseling services;
  - h) Providing academic support services;
- ii. The institution must maintain confidentiality with respect to supportive measures unless disclosure is required to implement the supportive measures.
- iii. The Title IX Coordinator shall coordinate the effective implementation of supportive measures. iv. Supportive measures may not restrict any party's rights under the United States Constitution.

**d. Emergency Removal.** The institution may remove a respondent from the education program or activity on an emergency basis, provided that the institution determines, based on an individualized safety and risk analysis completed the Title IX

Coordinator, that an immediate threat to the physical health or safety of any student or other individual arising from the allegations of sexual harassment justifies removal.

- i. The institution must provide the respondent with notice and an opportunity to challenge the decision immediately following the removal.
- ii. An appeal may be requested in writing to the Title IX Coordinator within three (3) business days of the emergency removal. The written request must include an explanation of the reason for the appeal.

**e. Administrative Leave.** The institution may place a non-student employee respondent on administrative leave during the pendency of a grievance process.

## **Grievance Process**

### **a. Formal Complaint and Notice of Allegations.**

- i. Once a formal complaint is received by the institution, the institution will provide the following written notice to the known parties:
  - a) Notice of the grievance process, including any informal resolution process;
  - b) Notice of the allegations of sexual harassment, including:
    - v. Sufficient details known at the time and with sufficient time to prepare a response, including, but not limited to, the names of the parties, the conduct allegedly constituting sexual harassment, and the date and location of the alleged conduct.
  - c) A statement that the respondent is presumed not responsible for the alleged conduct and that a determination regarding responsibility is made at the conclusion of the grievance process.
  - d) A statement that the parties may have an advisor of their choice, who may be an attorney, and may inspect and review evidence. The statement should also indicate that if the party does not have an advisor of choice, the institution will appoint an advisor to assist with cross-examination for the live hearing.
  - e) Notice of any provisions in the institution's code of conduct that prohibits knowingly making false statements or knowingly submitting false information during the grievance process.
- iii. If during the course of the grievance process, additional allegations are added to the investigation which were not included in the initial notice, the institution must provide notice of the additional allegations to the parties.

**b. Advisors.**

- i. Parties to a grievance proceeding must be afforded the opportunity to select the advisor of their choice to assist them during the proceeding, including during the live hearing.
- ii. If a party does not choose an advisor, the institution will provide the party with an advisor free of charge to conduct the party's crossexamination at the live hearing.
- iii. DCB is not required to provide attorneys to parties to act as advisors, but appointed advisors will be provided with access to appropriate training to ensure an understanding of the grievance process, though the same training provided to Title IX Coordinators, decision-makers, and investigators is not required.
- iv. DCB is not required to attempt to create equality of advisors between the parties, particularly where one party selects an outside advisor, but should endeavor to seek parity of advisors where the institution provides advisors to both parties.

**c. Investigation.**

- i. DCB is required to investigate every filed formal complaint unless the complaint is subject to dismissal, as explained below.
- ii. At all times, the burden of proof and the burden of gathering evidence sufficient to make a determination regarding responsibility rests on the institution, and the institution may not seek to shift that burden to the parties.
  - a) Notwithstanding, DCB may not restrict the parties' ability to discuss the allegations or to gather or present relevant evidence.
- iii. At all times, the institution shall observe a presumption that respondent is not responsible for the alleged conduct until and unless there is a determination of responsibility at the conclusion of the grievance process.
- iv. The Institution may not access, consider, disclose, or otherwise use a party's medical records made or maintained in connection with the provision of treatment to the party, unless voluntary, written consent to do so is provided by the party (or the party's parent, if the party is not eligible to provide consent).
- v. The Institution may not require, allow, rely upon, or otherwise use evidence that constitutes, or questions that seek disclosure of, information protected under a legally-recognized privilege, unless that privilege is waived.

- vi. The Institution must provide to the parties written notice of the date, time, location, participation, and purpose of all hearings, investigative interviews, or other meetings, with sufficient time for the party to prepare.
- vii. The parties must be afforded an equal opportunity to have others present during any grievance proceeding, including their advisor, though the institution may establish restrictions regarding the extent to which the advisor may participate in the proceedings, so long as the restrictions apply equally to both parties and comply with this Policy.
- viii. Both parties must have an equal opportunity to inspect and review any evidence obtained as part of the investigation related to the allegations raised in a formal complaint, including any evidence upon which the institution does not intend to rely in reaching a determination of responsibility and any inculpatory or exculpatory evidence, from whatever source.
- ix. At least ten(10) days prior to the preparation of the investigative report, the institution must provide each party and the party's advisor the evidence obtained in the investigation in an electronic format or hard copy. The parties may submit a written response to the evidence, which the investigator shall consider prior to completion of the investigative report.
- x. At the conclusion of the investigation, the investigator must create an investigative report that fairly summarizes the relevant evidence. At least ten(10) days prior to the hearing, the investigator must send a copy of the investigative report to each party and the party's advisor, if any, for review and written response.

**d. Dismissal.**

- i. Mandatory Dismissal.
  - a) The institution must dismiss the formal complaint if, at any time during the investigation or hearing:
    - 1) The conduct alleged would not constitute sexual harassment as defined in this Policy even if proved;
    - 2) The conduct alleged did not occur in the education program or activity; or
    - 3) The conduct alleged did not occur against a person in the United States.



b) If the formal complaint is subject to mandatory dismissal, the institution may take action under another provision of the code of conduct without that action constituting retaliation under this Policy.

ii. Permissive Dismissal.

a) The institution may dismiss the formal complaint if, at any time during the investigation or hearing:

- 1) A complainant notifies the Title IX Coordinator, in writing, that the complainant would like to the withdraw the formal complaint or any allegations contained in the formal complaint;
- 2) The respondent is no longer enrolled or employed by the institution;  
or
- 3) Specific circumstances prevent the institution from gathering evidence sufficient to reach a determination as to the formal complaint or allegations in the formal complaint.

b) In the event that a formal complaint is permissively dismissed, DCB will consult with its legal counsel prior to taking action under another provision of its code of conduct to avoid taking actions constituting retaliation.

iii. Notice of Dismissal. Upon a dismissal pursuant to this section, the institution must promptly send written notice of the dismissal and reasons therefore to both parties simultaneously.

**e. Consolidation of Formal Complaints.** Dakota College at Bottineau may consolidate formal complaints against more than one respondent, by more than one complainant against one or more respondents, or by one party against the other party, where the allegations of sexual harassment arise out of the same facts or circumstances.

**f. Live Hearing.**

- i. The grievance process must provide for a live hearing after the completion of the investigative report. All evidence obtained by the investigator as part of the investigative process must be made available to the parties and the decision-maker at the live hearing.
- ii. The live hearing will be presided over by the decision-maker, who will be appointed by the Title IX Coordinator.
- iii. At the request of either party, the hearing must be conducted with the parties located in separate rooms with technology enabling the decision-maker and

parties to simultaneously see and hear the party or witness answering questions. Hearings may be conducted with all parties physically present in the same geographic location, or, any parties, witnesses, and other participants may appear at the live hearing virtually, so long as the participants are able to simultaneously see and hear each other.

- iv. At the live hearing, the decision-maker must permit each party's advisor to ask the other party and any witnesses all relevant questions and follow-up questions, including those questioning credibility. This cross-examination must be conducted directly (the questions may not be asked by the decision-maker), orally, and in real time by the party's advisor and never by a party personally.
  - a) Prior to a party or witness answering a question, the decisionmaker must rule on the relevance of the question and explain any decision to exclude a question as not relevant.
  - b) Decision-makers may request, but may not require, that questions by the parties be submitted in advance, to permit the decisionmaker to rule on the relevance of questions.
  - c) The institution may otherwise limit the extent to which the party's advisor may participate in the hearing by institution policy, but should consult with legal counsel prior to imposing any significant limitations.
  
- v. *Rape Shield*. Questions and evidence about the complainant's sexual predisposition or sexual history are not relevant, unless such questions are offered to prove that someone other than the respondent committed the alleged conduct, or regard specific incidents of the prior sexual behavior with respect to the respondent, and are offered to prove consent.
  
- vi. *Cross-Examination*. If a party or witness does not submit to crossexamination at the live hearing, the decision-maker must not rely on any statement of that party or witness in reaching a determination regarding responsibility. Decision-makers may not draw an inference about the determination regarding responsibility based solely on a party's or witness's absence or refusal to answer cross-examination or other questions. There are no exceptions to this exclusion as there are in legal proceedings.
  
- vii. *Hearing Decorum*. Decision-makers may enforce rules to ensure hearing decorum, such as requiring respectful treatment, specifying any objection process, governing timing of hearing and length of breaks, etc.
  
- viii. The institution will create an audio or audiovisual recording, or transcript, of any live hearing and make it available to the parties for inspection and review.
  
- g. Determination Regarding Responsibility.**

- i. *Standard of Evidence.* All decisions in grievance processes under Title IX shall require a determination of responsibility based on the preponderance of the evidence.
- ii. After the conclusion of the live hearing, the decision-maker must issue a written determination regarding responsibility, which must include:
  - a) Identification of the allegations potentially constituting sexual harassment;
  - b) Description of the procedural steps taken from the receipt of the formal complaint through the determination, including any notifications to the parties, interviews with parties and witnesses, site visits, methods used to gather evidence, and hearings held;
  - c) Findings of fact supporting the determination;
  - d) Conclusions regarding the application of the institution's code of conduct to the facts;
  - e) A statement of, and rationale for, the result as to each allegation, including a determination regarding responsibility, any disciplinary sanctions to be imposed on the respondent, and whether remedies will be provided to the complainant; and
  - f) The procedures, timelines, and permissible bases for the complainant and respondent to appeal.
- iii. The written determination must be provided to the parties simultaneously. The determination regarding responsibility becomes final either on the date that notice of the result of any appeal is provided to the parties, if an appeal is filed, or if an appeal is not filed, the date on which an appeal would no longer be considered timely.
- iv. The Title IX Coordinator shall be responsible to implement any remedies provided by the written determination.

**APPEAL PROCESS**

- a. Both parties must be offered the opportunity to appeal from a determination regarding responsibility or from the dismissal of a formal complaint (or any allegations within the formal complaint). The following may form the basis for an appeal:
  - i. Procedural irregularity that affected the outcome of the grievance process;
  - ii. New evidence that was not reasonably available at the time the determination regarding responsibility or dismissal was made that could have affected the outcome of the matter; or
  - iii. The Title IX Coordinator, investigator(s), or decision-maker(s) had a conflict of interest or bias for or against complainants or respondents generally or for or against the individual complainant or respondent, that affected the outcome of the grievance process.

- b. Upon filing of an appeal, the institution must:
  - i. Notify the non-appealing party in writing when an appeal is filed and implement appeal procedures equally for both parties.
  - ii. The appeal's decision maker will be appointed by the Title IX Coordinator.
  - iii. Give both parties a reasonable, equal opportunity to submit a written statement in support of, or challenging, the outcome;
  - iv. Issue a written decision describing the result of the appeal and the rationale for the result; and
  - v. Provide the written decision simultaneously to both parties.
  
- c. In the event that a disciplinary sanction of suspension or expulsion is imposed by the decision-maker, the institution shall provide a method of reviewing an appeal from a determination regarding responsibility or dismissal for a period of at least one year following the original decision. The Institution may set a shorter deadline for appeals from lesser discipline or for appeals filed by the complainant.

When the appeal is based on new evidence, the Title IX Coordinator will return the case to the assigned investigator(s) for reconsideration. The investigator(s) will supplement the previous investigation, which may include recalling witnesses, and issue a revised report. The Title IX Coordinator, Deputy Title IX Coordinators, and/or Title IX investigators not directly involved in the case will review the revised report to determine if the original finding should stand or be reversed.

When the appeal is based on a procedural error or a sanction substantially disproportionate to the severity of the violation, the Title IX Coordinator and Deputy Title IX Coordinators(Investigators) not directly involved in the case will review the appeal to determine if the original finding should stand, be modified, or be reversed.

At the discretion of the appeal decision maker, implementation of sanctions may be stayed pending review of an appeal.

Once the final result of an appeal is determined, notices of the appeal outcome will be sent to the Complainant and the Respondent

## **RETALIATION**

- a. Neither DCB or any person may intimidate, threaten, coerce, or discriminate against any individual for the purpose of interfering with any right or privilege secured by title IX or this policy, or because the individual has made a report or complaint, testified, assisted, or participated or refused to participate in any manner in an investigation, proceeding, or hearing under this part.
- b. Intimidation, threats, coercion, or discrimination, including charges against an individual for code of conduct violations that do not involve sex discrimination or sexual

harassment, but arise out of the same facts or circumstances as a report or complaint of sex discrimination, or a report or formal complaint of sexual harassment, for the purpose of interfering with any right or privilege secured by title IX or this policy, constitutes retaliation.

- c. The exercise of rights protected under the First Amendment does not constitute retaliation.
- d. Charging an individual with a code of conduct violation for making a materially false statement in bad faith in the course of a grievance proceeding does not constitute retaliation, although a determination regarding responsibility, alone, is not sufficient to conclude that any party made a materially false statement in bad faith.
- e. Complaints alleging retaliation may be filed pursuant to the grievance procedures for sex discrimination under Title IX.

## **DISCIPLINE/SANCTIONS**

Not all forms of sexual discrimination will be deemed to be equally serious offenses, and the College reserves the right to impose different sanctions, ranging from warning to expulsion or termination, depending on the severity of the offense. The College will consider the concerns and rights of both the Complainant and the Respondent.

The following lists of sanctions may be imposed upon current members of the campus community found to have violated this policy.

Sanctions for current students may include, but are not limited to:

1. Written Warning: The Respondent may be warned that such conduct is not acceptable under college standards and that similar future conduct will result in further, more severe sanctions.
2. Educational Intervention: Requiring the Respondent to participate in online and/or physical classes addressing issues such as dating or domestic violence, stalking, and sex/gender-based violence. This may include facilitating a program, creating educational posters regarding institutional policies and student conduct, or writing a paper.
3. Referral for Assessment or Counseling: Requiring the Respondent to meet with a staff member of Dakota College at Bottineau Counseling Services to have an assessment of their mental health. The Dakota College at Bottineau Counseling Services may also recommend further evaluation and participation in counseling services, which may be at an on or off campus health/counseling center.
4. Community Service: Requiring the Respondent to perform a certain number of service hours either on campus or in the community.
5. Probation: A status that indicates either serious misconduct not warranting suspension, expulsion, or removal of institutional privileges, or repetition of misconduct after a warning has been imposed.
6. Residential Reassignment: Removal of the Respondent from current residence and reassignment to a new residence. Specific restrictions on access to one's previous residence may be imposed.

7. Changes in Academic Schedule: Requiring the Respondent to make changes in class schedule to ensure that no classes are shared with the Complainant.
8. Removal of College Privileges: Restrictions on the Respondent's access to certain locations, functions, organizations, teams, and/or activities; does not preclude the student from continuing their academic program.
9. Termination of Residency: Loss of on-campus housing, without refund, and/or dining privileges, permanently or for a specified period of time.
10. Restitution/Fines: The individual may be required to make a payment to the institution and/or another person or group for damages incurred as a result of the violation.
11. Removal or Non-Renewal of Scholarships: Institutionally-administered scholarships may be cancelled or not renewed to students that have violated this policy.
12. Withholding of Degree: The institution maintains the right to withhold the awarding of a degree otherwise earned until the completion of any imposed sanctions.
13. Suspension: A temporary separation from the institution that involves denial of all student privileges, including entrance to campus premises, and may include conditions for reinstatement, such as successful completion of a counseling or treatment program. A suspension may be imposed if counseling or treatment is not successfully completed.
14. Expulsion: A permanent separation from institution that involves denial of all student privileges, including entrance to the institution premises and matriculation.

Sanctions for current college employees include:

1. Warning (Written or Verbal)
2. Performance Improvement Plan
3. Required Counseling
4. Required Training or Education
5. Demotion
6. Reduction in Pay
7. Loss of intended pay increase
8. Suspension with pay
9. Suspension without pay
10. Termination

## **RESOURCES**

The following are many of the resources are available on campus and in the community.

Bottineau Police Department: 701-228-3422

• **911** for emergency situations.

Campus Safety & Security: 701-228-5621

Family Crisis Center: 701-228-2028\*

DCB Student Health Nurse: 701-228-5460\*

St. Andrew's Hospital: 701-228-9400

DCB Mental Health Counselor: 701-228-5451\*

Bottineau Ministry: 701-228-3021\*  
Title IX Coordinator: 701-228-5680

\*Confidential support services

## **PREVENTION AND EDUCATION**

Dakota College at Bottineau is committed to the prevention of sexual harassment through educational and awareness programs. Prevention and education programs include an overview of the College's policy and procedures; relevant definitions, including prohibited conduct; the impact of alcohol and illegal drug use; effective consent; safe and positive options for bystander intervention; and information about risk reduction, resources, and reporting options.

Incoming first-year students and new employees will receive primary prevention and awareness programming as part of their orientation. Returning students and employees will receive ongoing training on a periodic basis.

## **TRAINING**

- a. All persons involved in the grievance process, including, but not necessarily limited to, Title IX Coordinators, investigators, decision-makers, and any person who facilitates an informal resolution process, must receive training on the following areas:
  - i. The definition of sexual harassment;
  - ii. The scope of the education program or activity;
  - iii. How to conduct an investigation and grievance process, including hearings, appeals, and informal resolution processes, as applicable;
  - iv. How to serve impartially, including by avoiding prejudgment of the facts at issue; conflicts of interest, and bias.
- b. Additionally, decision-makers must receive training on the following areas:
  - i. Any technology to be used at a live hearing;
  - ii. Issues of relevance or questions and evidence, including when questions about the complainant's sexual predisposition or prior sexual behavior are not relevant;
- c. Investigators must also be trained on issues of relevance to create an investigative report that fairly summarizes relevant evidence.
- d. All materials used to train the foregoing individuals must not rely on sex stereotypes and must promote impartial investigations and adjudications of formal complaints.
- e. All training materials used to train the foregoing individuals must be made available to the public by posting on DCB's website.
- f. Students/Employees who do not complete training within 60 days will be provided comprehensive Title IX resources via their DCB email. Students/Employees with questions regarding training options should contact DCB's Title IX Coordinator.

## **CLERY ACT REPORTING**

Certain campus officials have a duty to report sexual assault, domestic violence, dating violence and stalking for federal statistical reporting purposes in compliance with the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act ("Clery Act"). All personally identifiable information can be kept confidential, but statistical information must be reported to Campus Security regarding the type of incident and its general location (e.g., on or off campus, but no addresses are given or reported) for publication in the College's Annual Security and Fire Safety Report. This report helps to provide the community with a clear picture of the extent and nature of campus crimes in order to ensure greater community safety.

Mandated federal reporters, also known as Campus Security Authorities (CSA), may include (but are not limited to) the following: student affairs staff, campus safety & security, coaches, athletic directors, residence life staff, student activities staff, human resources staff, advisors to student organizations, and any other official with significant responsibility for student and campus activities. The information to be shared includes the date, time, location of the incident, and the incident details. This reporting allows for anonymous reporting if the Complainant wishes to remain anonymous.

## **FEDERAL TIMELY WARNING REPORTING OBLIGATIONS**

Victims of sexual misconduct should be aware that College officials must issue timely warnings for incidents reported to them that pose a serious or ongoing threat to students and employees. The College will make every effort to ensure that a victim's name and other identifying information is not disclosed, while still providing enough information for community members to make safety decisions in light of the threat/danger.

## **REVISION**

This policy and procedures will be reviewed and updated at a minimum annually by the Title IX Coordinator and Deputy Title IX Coordinators. Procedures may also vary with notice (on the institutional web site with appropriate date of effect identified) upon determining that changes to law or regulation require policy or procedural modifications. If government regulations change in a way that impacts this policy, this policy will be construed to comply with regulations in their most recent form.



## Appendix H:



### Policy

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SMOKING, TOBACCO-FREE CAMPUS  
EFFECTIVE DATE: OCTOBER 2017

DCB.917  
REVIEWED: SEPTEMBER 2024

### Policy

The health hazards of tobacco use have been well established. The use of tobacco products is the leading cause of preventable death and disability in North Dakota. DCB is committed to promoting healthier education, work, and living environments. DCB recognizes the serious health risks associated with the use of tobacco products, both to users and non-users alike, and believes that the use of tobacco products is detrimental to the health and safety of students, staff, and visitors.

This tobacco-free policy is established to:

- Reduce the high incidence of tobacco use in North Dakota.
- Protect the health and safety of all students, staff, and the general public.
- Establish a standard of healthy, tobacco-free behavior.

To support and model a healthy lifestyle for our students, staff and community, DCB establishes the following tobacco-free policy.

### Definitions

**College/University** means Dakota College at Bottineau (DCB)

**Campus Property** includes all property, both indoor and outdoor, that is owned, operated, leased, occupied or controlled by DCB including, but not limited to, all buildings, green spaces, athletic fields, parking lots, sidewalks, walkways and vehicles.

**Off-Campus School-sponsored Event** means any event sponsored by DCB that does not take place on campus property.

**Staff** means any person employed by DCB in a full- or part-time capacity or any positions contracted for or otherwise employed, with direct or indirect monetary wages or profits paid by DCB, or any person working on campus property on a volunteer basis. The term includes, but is not limited to, faculty, administrator, personnel, contractor, consultants and vendors.

**Student** means any person enrolled in any educational course or program offered by DCB.

**Tobacco Products** includes any product that contains tobacco, is derived from tobacco or contains nicotine or other similar substances that is intended for human consumption, or is likely to be consumed, whether smoked, vaped, heated, inhaled, chewed, absorbed, dissolved, or ingested by any other means. The term tobacco products include e-cigarettes and other electronic smoking devices, pipes and rolling papers, but does not include any product approved by the United States Food and Drug Administration (USDA) for legal sale as tobacco cessation products and is being marketed and sold solely for the approved purpose.

**E-cigarette** means any electronic oral device, such as one composed of a heating element, battery or electronic circuit, or both, which provides a vapor of nicotine or any other substance, and the use or inhalation of which simulates smoking. The term includes any such device, whether manufactured, distributed, marketed, or sold as an e-cigarette, e-cigar, and e-pipe or under any other product name or descriptor. e-cigarette also includes any component part of such a product whether or not sold separately. e-cigarette does not include any product approved by the USDA for legal sale as a tobacco cessation product and is being marketed and sold solely for the approved purpose.

**Tobacco Use** means the use of any tobacco product in any form. Tobacco use includes, but is not limited to smoking, vaping, heating, inhaling, chewing, absorbing, dissolving or ingesting any tobacco product.

**Smoking** means inhaling, exhaling, burning, or carrying any lighted or heated cigar, cigarette, pipe or hookah, or any other lighted or heated tobacco or plant product intended for inhalation, in any manner or in any form. Smoking also includes the use of an e-cigarette or other alternative smoking device. Vaping is prohibited under this policy.

**Visitor** means any person who is not a student, faculty, or staff.

### **Prohibition of Tobacco Use, Advertising and Sales**

- a. **Tobacco Use:** DCB prohibits the use of all forms of tobacco products on campus property and at all off-campus, school-sponsored events at all times. This includes, but is not limited to, the use of tobacco products by students, staff and visitors to DCB.

This tobacco-free policy includes all events held on campus property, whether or not such events are sponsored by, or associated with, DCB, and all off-campus, school-sponsored events.

Whenever DCB does not have jurisdiction over adjoining streets, sidewalks, parking lots or other common areas, students, staff and visitors are encouraged to comply with the spirit of the policy.

- b. **Advertising and Sponsorship:** DCB prohibits all advertising of tobacco products, whether formal or informal, on campus property, at DCB functions, and in all DCB publications. This includes all signs that contain a logo of, advertisement for, or reference to, any tobacco product.

DCB will not accept any form of contribution including, but not limited to, financial support, gifts (such as curriculum, book covers, speakers, etc.) or in-kind support from the tobacco industry for the sponsorship or promotion of any event or activity affiliated in any manner with DCB or located on campus property.

**Sales:** DCB prohibits the sale or free sampling of tobacco products on campus property and at off-campus, school-sponsored events.

#### **Exceptions:**

- It is not a violation of this policy for an adult Native American to use tobacco as part of a traditional Native American spiritual or cultural ceremony. A Native American is a person who is an enrolled member of a federally recognized tribe.
- It is not a violation of this policy for tobacco products to be included in instructional or work-related activities on Campus Property if the activity is conducted by a staff member or an approved visitor and is approved by the Campus Dean. Work-related activities may include, but are not limited to, research studies intended to assess any harms that may be caused by tobacco use.

#### **Communicating the Policy to Students, Staff, and Public**

DCB shall post signs indicating that the campus property is tobacco-free in all locations and in the manner identified in NDCC 23-12-10.4.1(a) and (b). In addition, notices should be posted in other highly visible places on campus property including, but not limited to, walkways, athletic fields, parking lots and at all off-campus, school-sponsored events. Students, faculty and staff will be notified of this policy in writing and, when feasible, through verbal announcements at school-sponsored events. In addition, the local media will be asked to communicate this tobacco free policy communitywide.

**Enforcement**

All individuals on campus property or at an off-campus, school-sponsored event share in the responsibility for adhering to and enforcing this policy. All members of the DCB community are expected to support this policy and cooperate in its implementation and enforcement. Students, staff and visitors violating this policy should be reminded of the policy and asked to comply.

Violations of this policy by students may be cause for disciplinary action in accordance with student code of conduct contained in the student handbook.

Violations of the tobacco-free policy by staff and faculty will be handled in accordance with written personnel policies. Penalties may include verbal warnings, written reprimands, or termination.

Visitors violating this tobacco-free policy will be asked to refrain from using tobacco products while on campus property or to leave the premises. Law enforcement officers may be contacted to escort visitors off the campus property or to cite the visitor for trespassing if the person refuses to leave the campus property.

DCB shall develop regulations for the enforcement and implementation of this policy and such regulations.

**Tobacco Cessation Services**

All students and staff found in violation of this policy, and any other individual requesting assistance with tobacco cessation services, will be referred to NDQuits, the NDDH multi-media tobacco cessation program. This is a free cessation service provided to anyone currently residing in North Dakota.

Appendix I



American College Health Association **National College Health Assessment**

# DAKOTA COLLEGE AT BOTTINEAU

## Data Report Spring 2024

### American College Health Association

## National College Health Assessment III

### ACHA-NCHA III

The ACHA-NCHA III supports the health of the campus community by fulfilling the academic mission, supporting short- and long-term healthy behaviors, and gaining a current profile of health trends within the campus community.



AMERICAN COLLEGE HEALTH ASSOCIATION

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**We need to draw your attention to an important change in your ACHA-NCHA Report documents. Beginning in Spring 2021, responses for transgender and gender-nonconforming students are readily available directly in the report documents. This represents an important change in the way we have been reporting ACHA-NCHA results. We've prepared the following information to better explain the specific changes, our reasoning for doing so, and tips for using these redesigned report documents.**

#### **I. What we've done to date**

The ACHA-NCHA has asked respondents about their gender identity for 12 years.

Data on transgender and gender-nonconforming (TGNC) students was available in the data file, but not displayed explicitly in the report documents in an effort to protect the privacy of TGNC students, particularly those students in smaller campus environments and at schools that publicly shared their ACHA-NCHA report documents.

We have been trying to find the right balance between protecting students' privacy and making the results accessible to campus surveyors who may not use the statistical software that would be required to extract this information directly from the data files. Until now, we've erred on the side of protecting student privacy.

#### **II. Why change?**

The number of TGNC students in our samples has been increasing over the years. Between 2008 and 2015, the number of students identifying as TGNC was very small (less than 0.05%). We've learned over the years that gender identity is complex and fluid. To better capture this complexity, we began asking separate questions about sex at birth and gender identity in Fall 2015. Now TGNC students tend to represent 3- 4% of the overall sample.

With greater number of students identifying as TGNC on the ACHA-NCHA in recent years, we have a better opportunity to understand their needs and behaviors than we have in years past.

- A number of health disparities between TGNC students and their cisgender peers have been well documented[1], and schools need readily available access to this data in order to better address the needs of TGNC students.

#### **III. What's different about the way we are reporting?**

First – a note about how we have been reporting ACHA-NCHA results to date. RSEX is a variable we create based on the responses to the questions on sex at birth, whether or not a student identifies as transgender, and their gender identity. The RSEX variable had allowed us to sort respondents into 4 groups for reporting purposes: male, female, non-binary, and missing. (Details about this variable can be found in all report documents.)

The value labels for RSEX have been revised to better represent gender identity rather than sex. A value of "1" has been changed from "Male" to "Cis Men[2]." A "2" has been changed from "Female" to "Cis Women[3]." The value "3" has been changed from "non-binary" to "Transgender and Gender-Nonconforming" (TGNC), as it's a more accurate and inclusive term. The value "4" on RSEX remains "missing/unknown" and is used for students who do not answer all three questions.

- The "missing/unknown" column in the Data Report document has been replaced with a "Trans/Gender-Nonconforming" column. Because space limitations in the report prevent us from displaying all 4 categories plus a total column in the same document, it's now the "missing/unknown" column that is not displayed. Now when the Total of any given row is higher than the sum of the cis men, cis women, and TGNC respondents, the difference can be attributed to "missing/unknown" respondents that selected the response option presented in that row.

- A column for "Trans/Gender-Nonconforming" has been added the Executive Summary Report document.

#### **IV. Important considerations with this new format**

Percentages in the Executive Summary may represent a very small number of TGNC students and can limit the generalizability of a particular finding. To assist with the interpretation of the percentages displayed in the Executive Summary, the total sample size for each group has been added to every page. We encourage ACHA-NCHA surveyors to carefully review their report documents, particularly among the student demographic variables, and consider students who may be inadvertently identified in the results based on a unique combination of the demographic characteristics before sharing the documents widely or publicly. This is especially true for very small schools, as well as schools that lack diversity in the student population.

Think about the implication of working with and documenting very small samples – from the perspective of making meaningful interpretations, as well as the privacy of respondents. This is true of all demographic variables, and not limited to gender identity. You may consider a minimum cell size or another threshold by which you make decisions about making your Institutional Data Report publicly available. It is less of a concern in your Institutional Executive Summary as we only display the percentages with the overall sample size.

**Questions about this report? Please reach out to Christine Kukich at [Ckukich@acha.org](mailto:Ckukich@acha.org)**

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[1] Greathouse M, BrckaLorenz A, Hoban M, Huseman R, Rankin S, Stolzenberg EB. (2018). Queer-spectrum and trans-spectrum student experiences in American higher education: The analysis of national survey findings. New Brunswick, NJ: Tyler Clementi Center, Rutgers University.

[2] Cisgender refers to people whose gender identity matches their sex assigned at birth. Cis men is short for "cisgender men" and is a term used to describe persons who identify as men and were assigned male at birth.

[3] Cis women is short for "cisgender women" and is a term used to describe persons who identify as women and were assigned female at birth.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

Frequency tables are presented for every multiple choice and select all that apply questions from the survey. The mean, median, standard deviation, minimum, and maximum values are provided for the variables that are continuous, as well as those scales within the survey that produce a score.

Space for value labels associated with each response option is limited in this document and are often abbreviated for brevity. Furthermore, response options are listed in numeric order within the frequency tables, which may differ from the way they appear to students in the survey. Please always refer to the survey codebook rather than this report document for the exact wording of survey questions and the associated response options.

### A note about the use of sex and gender in this report:

Survey results are reported by sex based on the responses to questions 67A, 67B, and 67C. The responses to these questions are used to create a new variable called RSEX. RSEX is used for organizing results in the ACHA-NCHA report documents. Respondents are reported as cis men or cis women only when their responses to 67A, 67B, and 67C are consistent with one another. If gender identity is consistent with sex at birth AND "no" is selected for transgender, then respondents are designated as either cis men or cis women in RSEX. If respondents select "yes" for transgender OR their sex at birth is not consistent with their gender identity, then they are designated as transgender/gender non-conforming in RSEX. A respondent that selects "intersex" for sex at birth, "no" for transgender, and man or woman for gender identity are designated as cis men or cis women in RSEX. A respondent that selects "intersex" for sex at birth, "yes" for transgender, or selects a gender identity other than man or woman are designated as transgender/gender non-conforming in RSEX. A respondent that selects "another identity" on 67C is designated missing in RSEX. A respondent that skips any of the three questions is designated as missing in RSEX. Totals displayed in this report include missing responses. Please see the ACHA-NCHA III survey codebook for more information about how data on sex and gender are coded.

Please note: if your data contain a small number of transgender and gender non-conforming students, we advise you to take caution in sharing this report, as these students' responses may make it possible to identify who they are.

### 1) How would you describe your overall health?

	Trans/Gender		Cis Women		Non-conforming		Total	
	Cis Men Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Excellent	1	11	2	8	0	0	3	8.3
2 Very good	5	56	11	44	0	0	18	50.0
3 Good	2	22	8	32	0	0	10	27.8
4 Fair	1	11	4	16	0	0	5	13.9
5 Poor	0	0	0	0	0	0	0	0.0
Valid responses =	9	25	25	69	0	0	36	92.3

Invalid responses include no response.

### 2A) I feel that I belong at my college/university.

	Trans/Gender		Cis Women		Non-conforming		Total	
	Cis Men Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Strongly disagree	0	0	1	4	0	0	1	2.6
2 Disagree	0	0	0	0	0	0	0	0.0
3 Somewhat disagree	1	10	0	0	0	0	2	5.1
4 Somewhat agree	1	10	2	8	0	0	3	7.7
5 Agree	3	30	19	73	0	0	23	59.0
6 Strongly agree	5	50	4	15	0	0	10	25.6
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

### R2B) I feel that students' health and well-being is a priority of my college/university.

Cis Men	Trans/Gender		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Strongly disagree	1	10	1	4	0	0	2	5.1
2 Disagree	0	0	0	0	0	0	0	0.0
3 Somewhat disagree	0	0	0	0	0	0	2	5.1
4 Somewhat agree	4	40	10	39	0	0	15	38.5
5 Agree	3	30	11	42	0	0	14	35.9
6 Strongly agree	2	20	4	15	0	0	6	15.4
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

### R2C) I feel that the climate of my college/university encourages free and open discussion about students' health and well-being.

Cis Men	Trans/Gender		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Strongly disagree	0	0	1	4	0	0	1	2.6
2 Disagree	0	0	0	0	0	0	0	0.0
3 Somewhat disagree	1	10	1	4	0	0	4	10.3
4 Somewhat agree	0	0	5	19	0	0	5	12.8
5 Agree	6	60	15	58	0	0	22	56.4
6 Strongly agree	3	30	4	15	0	0	7	17.9
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.



**R2D) We are a college/university where we look out for each other.**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Strongly disagree	0	0	2	8	0	0	2	5.1
2 Disagree	0	0	0	0	0	0	0	0.0
3 Somewhat disagree	1	10	1	4	0	0	3	7.7
4 Somewhat agree	2	20	6	23	0	0	8	20.5
5 Agree	2	20	13	50	0	0	15	38.5
6 Strongly agree	5	50	4	15	0	0	11	28.2
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

**3A) How many hours do you spend in a typical week (7 days) on the following activities?**

**Attending classes, discussion sections, or labs**

**Trans/Gender**

**Cis Men**

	Cis Women		Non-conforming			Total Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Pct.		
1 0 hours	0	0	0	0	0	0	0.0
2 1-5 hours	2	20	4	15	0	7	17.9
3 6-10 hours	3	30	8	31	0	11	28.2
4 11-15 hours	3	30	7	27	0	10	25.6
5 16-20 hours	0	0	5	19	0	7	17.9
6 21-25 hours	1	10	0	0	0	1	2.6
7 26-30 hours	0	0	0	0	0	0	0.0
8 More than 30 hours	1	10	2	8	0	3	7.7
Valid responses =	10	26	26	67	0	39	100.0

Invalid responses include no response.

**3B) How many hours do you spend in a typical week (7 days) on the following activities? Studying**

**and other academic activities outside of class**

**Trans/Gender**

**Cis Men**

	Cis Women		Non-conforming			Total Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Pct.		
1 0 hours	0	0	2	8	0	2	5.1
2 1-5 hours	2	20	13	50	0	15	38.5
3 6-10 hours	4	40	5	19	0	11	28.2
4 11-15 hours	0	0	1	4	0	1	2.6
5 16-20 hours	1	10	2	8	0	4	10.3
6 21-25 hours	0	0	1	4	0	1	2.6
7 26-30 hours	1	10	1	4	0	2	5.1
8 More than 30 hours	2	20	1	4	0	3	7.7
Valid responses =	10	26	26	67	0	39	100.0

Invalid responses include no response.

**3C) How many hours do you spend in a typical week (7 days) on the following activities?**

**Attending cultural events, movies, concerts, sports or other entertainment with others**

**Trans/Gender**

**Cis Men**

	Cis Women		Non-conforming			Total Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Pct.		
1 0 hours	1	10	3	12	0	5	12.8
2 1-5 hours	4	40	14	54	0	19	48.7
3 6-10 hours	1	10	4	15	0	5	12.8
4 11-15 hours	1	10	1	4	0	2	5.1
5 16-20 hours	1	10	1	4	0	3	7.7
6 21-25 hours	1	10	2	8	0	3	7.7
7 26-30 hours	0	0	0	0	0	0	0.0
8 More than 30 hours	1	10	1	4	0	2	5.1
Valid responses =	10	26	26	67	0	39	100.0

Invalid responses include no response.

**3D) How many hours do you spend in a typical week (7 days) on the following activities?**

**Performing community service or volunteer activities**

**Trans/Gender**

**Cis Men**

	Cis Women		Non-conforming			Total Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Pct.		
1 0 hours	2	20	10	39	0	14	35.9
2 1-5 hours	4	40	11	42	0	15	38.5
3 6-10 hours	1	10	0	0	0	1	2.6
4 11-15 hours	0	0	3	12	0	3	7.7
5 16-20 hours	1	10	1	4	0	3	7.7
6 21-25 hours	0	0	0	0	0	0	0.0
7 26-30 hours	0	0	0	0	0	0	0.0
8 More than 30 hours	2	20	1	4	0	3	7.7
Valid responses =	10	26	26	67	0	39	100.0

Invalid responses include no response.



3E) How many hours do you spend in a typical week (7 days) on the following activities? Participating in physical exercise, team sports, recreational sports, or physically active hobbies

Table with columns: Trans/Gender, Cis Men, Cis Women, Non-conforming, Total, Freq., Pct. Rows include activity durations from 0 to 30+ hours and a total valid responses row.

Invalid responses include no response.

3F) How many hours do you spend in a typical week (7 days) on the following activities? Participating in spiritual or religious activities

Table with columns: Trans/Gender, Cis Men, Cis Women, Non-conforming, Total, Freq., Pct. Rows include activity durations from 0 to 30+ hours and a total valid responses row.

Invalid responses include no response.

3G) How many hours do you spend in a typical week (7 days) on the following activities? Participating in student clubs or organizations

Table with columns: Trans/Gender, Cis Men, Cis Women, Non-conforming, Total, Freq., Pct. Rows include activity durations from 0 to 30+ hours and a total valid responses row.

Invalid responses include no response.

3H) How many hours do you spend in a typical week (7 days) on the following activities? Socializing with friends

Table with columns: Trans/Gender, Cis Men, Cis Women, Non-conforming, Total, Freq., Pct. Rows include activity durations from 0 to 30+ hours and a total valid responses row.

Invalid responses include no response.

3I) How many hours do you spend in a typical week (7 days) on the following activities? Partying

Table with columns: Trans/Gender, Cis Men, Cis Women, Non-conforming, Total, Freq., Pct. Rows include activity durations from 0 to 30+ hours and a total valid responses row.

Invalid responses include no response.





3J) How many hours do you spend in a typical week (7 days) on the following activities? Spending time with family

Trans/Gender

Cis Men

	Cis Women		Non-conforming			Total Freq.	Pct.	
	Freq.	Pct.	Freq.	Freq.	Pct.			
1 0 hours	3	33	6	23	0	0	11	28.9
2 1-5 hours	0	0	12	46	0	0	12	31.6
3 6-10 hours	0	0	5	19	0	0	5	13.2
4 11-15 hours	1	11	0	0	0	0	1	2.6
5 16-20 hours	2	22	0	0	0	0	3	7.9
6 21-25 hours	1	11	1	4	0	0	2	5.3
7 26-30 hours	1	11	2	8	0	0	3	7.9
8 More than 30 hours	1	11	0	0	0	0	1	2.6
Valid responses =	9	24	26	68	0	0	38	97.4

Invalid responses include no response.

3K) How many hours do you spend in a typical week (7 days) on the following activities? Watching TV, streaming movies/TV, or other media for entertainment

Trans/Gender

Cis Men

	Cis Women		Non-conforming			Total Freq.	Pct.	
	Freq.	Pct.	Freq.	Freq.	Pct.			
1 0 hours	1	10	2	8	0	0	3	7.7
2 1-5 hours	2	20	11	42	0	0	15	38.5
3 6-10 hours	1	10	2	8	0	0	3	7.7
4 11-15 hours	3	30	3	12	0	0	6	15.4
5 16-20 hours	1	10	4	15	0	0	6	15.4
6 21-25 hours	1	10	1	4	0	0	2	5.1
7 26-30 hours	0	0	2	8	0	0	2	5.1
8 More than 30 hours	1	10	1	4	0	0	2	5.1
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

3L) How many hours do you spend in a typical week (7 days) on the following activities? Gaming

Trans/Gender

Cis Men

	Cis Women		Non-conforming			Total Freq.	Pct.	
	Freq.	Pct.	Freq.	Freq.	Pct.			
1 0 hours	2	22	21	81	0	0	24	63.2
2 1-5 hours	2	22	0	0	0	0	3	7.9
3 6-10 hours	0	0	3	12	0	0	3	7.9
4 11-15 hours	0	0	2	8	0	0	2	5.3
5 16-20 hours	2	22	0	0	0	0	3	7.9
6 21-25 hours	2	22	0	0	0	0	2	5.3
7 26-30 hours	0	0	0	0	0	0	0	0.0
8 More than 30 hours	1	11	0	0	0	0	1	2.6
Valid responses =	9	24	26	68	0	0	38	97.4

Invalid responses include no response.

3M) How many hours do you spend in a typical week (7 days) on the following activities? Using social media

Trans/Gender

Cis Men

	Cis Women		Non-conforming			Total Freq.	Pct.	
	Freq.	Pct.	Freq.	Freq.	Pct.			
1 0 hours	0	0	1	4	0	0	1	2.6
2 1-5 hours	2	20	7	28	0	0	11	28.9
3 6-10 hours	4	40	5	20	0	0	9	23.7
4 11-15 hours	3	30	3	12	0	0	6	15.8
5 16-20 hours	0	0	3	12	0	0	4	10.5
6 21-25 hours	1	10	2	8	0	0	3	7.9
7 26-30 hours	0	0	1	4	0	0	1	2.6
8 More than 30 hours	0	0	3	12	0	0	3	7.9
Valid responses =	10	26	25	66	0	0	38	97.4

Invalid responses include no response.

3N) How many hours do you spend in a typical week (7 days) on the following activities? Commuting to school and/or to work

Trans/Gender

Cis Men

	Cis Women		Non-conforming			Total Freq.	Pct.	
	Freq.	Pct.	Freq.	Freq.	Pct.			
1 0 hours	3	30	13	50	0	0	18	46.2
2 1-5 hours	4	40	8	31	0	0	12	30.8
3 6-10 hours	2	20	1	4	0	0	3	7.7
4 11-15 hours	0	0	2	8	0	0	2	5.1
5 16-20 hours	1	10	0	0	0	0	2	5.1
6 21-25 hours	0	0	0	0	0	0	0	0.0
7 26-30 hours	0	0	1	4	0	0	1	2.6
8 More than 30 hours	0	0	1	4	0	0	1	2.6
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

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DAKOTA COLLEGE AT

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(410) 859-1500

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### 3O) How many hours do you spend in a typical week (7 days) on the following activities? Working for pay

Trans/Gender	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
Cis Men								
1 0 hours	4	40	9	36	0	0	15	39.5
2 1-5 hours	3	30	6	24	0	0	9	23.7
3 6-10 hours	2	20	4	16	0	0	6	15.8
4 11-15 hours	1	10	2	8	0	0	3	7.9
5 16-20 hours	0	0	2	8	0	0	3	7.9
6 21-25 hours	0	0	0	0	0	0	0	0.0
7 26-30 hours	0	0	1	4	0	0	1	2.6
8 More than 30 hours	0	0	1	4	0	0	1	2.6
Valid responses =	10	26	25	66	0	0	38	97.4

### 3P) How many hours do you spend in a typical week (7 days) on the following activities? Participating in meditation or meditative activities

Trans/Gender	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
Cis Men								
1 0 hours	4	40	19	73	0	0	25	64.1
2 1-5 hours	4	40	4	15	0	0	8	20.5
3 6-10 hours	0	0	1	4	0	0	1	2.6
4 11-15 hours	1	10	1	4	0	0	2	5.1
5 16-20 hours	1	10	1	4	0	0	3	7.7
6 21-25 hours	0	0	0	0	0	0	0	0.0
7 26-30 hours	0	0	0	0	0	0	0	0.0
8 More than 30 hours	0	0	0	0	0	0	0	0.0
Valid responses =	10	26	26	67	0	0	39	100.0

### 3Q) How many hours do you spend in a typical week (7 days) on the following activities? Performing unpaid household responsibilities

Trans/Gender	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
Cis Men								
1 0 hours	0	0	8	31	0	0	10	25.6
2 1-5 hours	7	70	11	42	0	0	18	46.2
3 6-10 hours	1	10	3	12	0	0	4	10.3
4 11-15 hours	0	0	1	4	0	0	1	2.6
5 16-20 hours	1	10	3	12	0	0	5	12.8
6 21-25 hours	0	0	0	0	0	0	0	0.0
7 26-30 hours	1	10	0	0	0	0	1	2.6
8 More than 30 hours	0	0	0	0	0	0	0	0.0
Valid responses =	10	26	26	67	0	0	39	100.0

### 3R) How many hours do you spend in a typical week (7 days) on the following activities? Taking care of children or other family members (unpaid)

Trans/Gender	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
Cis Men								
1 0 hours	6	60	22	85	0	0	30	76.9
2 1-5 hours	3	30	2	8	0	0	5	12.8
3 6-10 hours	0	0	0	0	0	0	0	0.0
4 11-15 hours	0	0	0	0	0	0	0	0.0
5 16-20 hours	0	0	0	0	0	0	1	2.6
6 21-25 hours	0	0	2	8	0	0	2	5.1
7 26-30 hours	0	0	0	0	0	0	0	0.0
8 More than 30 hours	1	10	0	0	0	0	1	2.6
Valid responses =	10	26	26	67	0	0	39	100.0

### 4) How do you describe your weight?

Trans/Gender	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
Cis Men								
1 Very underweight	0	0	1	4	0	0	1	2.6
2 Slightly underweight	2	20	1	4	0	0	3	7.7
3 About the right weight	4	40	16	62	0	0	22	56.4
4 Slightly overweight	4	40	8	31	0	0	12	30.8
5 Very overweight	0	0	0	0	0	0	1	2.6
Valid responses =	10	26	26	67	0	0	39	100.0



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## 5) Are you trying to do any of the following about your weight?

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Not trying anything about my weight	3	30	5	19	0	0	9	23.1
2 Stay the same weight	3	30	6	23	0	0	9	23.1
3 Lose weight	1	10	14	54	0	0	16	41.0
4 Gain weight	3	30	1	4	0	0	5	12.8
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

## 6) In the last 7 days, how many (total) minutes did you spend doing moderate physical activity?

Examples: brisk walking, dancing, or household chores.

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 0 Minutes	0	0	2	8	0	0	2	5.1
1 1 to 149 Minutes	5	50	14	54	0	0	21	53.8
2 150 to 299 Minutes	3	30	5	19	0	0	9	23.1
3 300 or More Minutes	2	20	5	19	0	0	7	17.9
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

	Mean	Median	Std Dev	Min	Max
Cis Men	266.00	140.00	320.6	60	1000
Cis Women	175.77	120.00	168.41	0	600
Trans/Gender Non-conforming	.	.	.	.	.
Overall	191.79	120.00	214.7	0	1000

## 7) In the last 7 days, how many (total) minutes did you spend doing vigorous physical activity?

Examples: running, swimming laps, or hiking.

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 0 Minutes	0	0	8	31	0	0	8	21.1
1 1 to 74 Minutes	4	44	4	15	0	0	9	23.7
2 75 to 149 Minutes	1	11	1	4	0	0	3	7.9
3 150 or More Minutes	4	44	13	50	0	0	18	47.4
Valid responses =	9	24	26	68	0	0	38	97.4

Invalid responses include no response.

	Mean	Median	Std Dev	Min	Max
Cis Men	246.11	90.00	264.29	10	700
Cis Women	273.46	200.00	297.09	0	840
Trans/Gender Non-conforming	.	.	.	.	.
Overall	255.39	110.00	276.77	0	840

## 8) In the last 7 days, on how many days did you do exercises to strengthen or tone your muscles?

Examples: push ups, sit ups, or weightlifting/training.

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 0 days	2	20	8	31	0	0	11	28.2
1 1 day	0	0	1	4	0	0	1	2.6
2 2 days	2	20	5	19	0	0	8	20.5
3 3 days	1	10	5	19	0	0	7	17.9
4 4 days	1	10	0	0	0	0	1	2.6
5 5 days	0	0	4	15	0	0	4	10.3
6 6 days	2	20	1	4	0	0	3	7.7
7 7 days	2	20	2	8	0	0	4	10.3
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.



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## 9A) In the last 7 days, how many servings of sugar-sweetened beverages did you drink on average per day?

One serving is 12 oz of soda; 8 oz of sugar-sweetened, flavored water or sports drink; 6 oz of sugar-sweetened coffee, tea, or juice. If you do not drink sugar-sweetened beverages, please enter 0.

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 0 servings	3	30	6	23	0	0	10	25.6
2 1 serving	3	30	4	15	0	0	7	17.9
3 2 servings	1	10	4	15	0	0	5	12.8
4 3 servings	0	0	1	4	0	0	1	2.6
5 4 servings	0	0	3	12	0	0	3	7.7
6 5 servings	1	10	1	4	0	0	3	7.7
7 6 servings	1	10	0	0	0	0	1	2.6
8 7 servings	0	0	4	15	0	0	4	10.3
9 8 servings	1	10	0	0	0	0	1	2.6
10 9 or more servings	0	0	3	12	0	0	4	10.3
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

Mean

Cis Men

Cis Women

Trans/Gender Non-conforming

Overall

Mean	Median	Std Dev	Min	Max
2.40	1.00	2.88	0	8
4.08	2.00	4.8	0	17
.	.	.	.	.
3.85	2.00	4.63	0	17

## 9B) In the past 30 days, on how many days did you drink energy drinks or energy shots?

(for example: Red Bull, Monster, Full Throttle, 5 Hour Energy, Rockstar Energy Shot, or Full Throttle Energy Shot, etc.)

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 0 days	4	40	12	46	0	0	16	41.0
2 1-2 days	0	0	5	19	0	0	6	15.4
3 3-4 days	1	10	5	19	0	0	7	17.9
4 5-10 days	3	30	1	4	0	0	4	10.3
5 11-15 days	1	10	2	8	0	0	4	10.3
6 16-20 days	0	0	0	0	0	0	0	0.0
7 21-25 days	0	0	0	0	0	0	0	0.0
8 26-30 days	1	10	1	4	0	0	2	5.1
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

Cis Men

Cis Women

Trans/Gender Non-conforming

Overall

Mean	Median	Std Dev	Min	Max
6.20	4.00	8.68	0	27
3.58	1.00	6.87	0	30
.	.	.	.	.
4.49	2.00	7.3	0	30

## 10) In the last 7 days, how many servings of fruit did you eat on average per day?

One serving is a medium piece of fresh fruit; 1/2 cup of fresh, frozen, or canned fruit; 1/4 cup of dried fruit; or 3/4 cup of 100% fresh fruit juice

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 0 servings per day	0	0	4	15	0	0	4	10.5
2 1-2 servings per day	9	90	17	65	0	0	27	71.1
3 3-4 servings per day	1	10	5	19	0	0	6	15.8
4 5-6 servings per day	0	0	0	0	0	0	1	2.6
5 More than 6 servings per day	0	0	0	0	0	0	0	0.0
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

## 11) In the last 7 days, how many servings of vegetables did you eat on average per day?

One serving is 1/2 cup of fresh, frozen, or canned vegetables; 3/4 cup 100% vegetable juice; or 1 cup salad greens

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 0 servings per day	2	20	2	8	0	0	4	10.5
2 1-2 servings per day	8	80	19	73	0	0	28	73.7
3 3-4 servings per day	0	0	5	19	0	0	5	13.2
4 5-6 servings per day	0	0	0	0	0	0	1	2.6
5 More than 6 servings per day	0	0	0	0	0	0	0	0.0
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.



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12A) For the following statements, please say whether the statement was often true, sometimes true, or never true for you in the last 30 days. The food that I bought just didn't last, and I didn't have money to get more

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 Never True	3	30	15	58	0	0	19	51.4
1 Sometimes True	6	60	9	35	0	0	15	40.5
2 Often True	1	10	2	8	0	0	3	8.1
Valid responses =	10	27	26	70	0	0	37	94.9

Invalid responses include no response.

12B) For the following statements, please say whether the statement was often true, sometimes true, or never true for you in the last 30 days. I couldn't afford to eat balanced meals.

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 Never True	2	22	11	42	0	0	15	40.5
1 Sometimes True	7	78	9	35	0	0	16	43.2
2 Often True	0	0	6	23	0	0	6	16.2
Valid responses =	9	24	26	70	0	0	37	94.9

Invalid responses include no response.

12C) In the last 30 days, did you ever cut the size of your meals or skip meals because there wasn't enough money for food?

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 No	6	60	20	77	0	0	27	71.1
1 Only 1 or 2 days	0	0	3	12	0	0	4	10.5
2 Yes, some days, but not every day	2	20	2	8	0	0	4	10.5
3 Yes, almost every day	2	20	1	4	0	0	3	7.9
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

12D) In the last 30 days, did you ever eat less than you felt you should because there wasn't enough money for food?

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 No	8	80	23	89	0	0	32	84.2
1 Yes	2	20	3	12	0	0	6	15.8
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

12E) In the last 30 days, were you ever hungry but didn't eat because there wasn't enough money for food?

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 No	8	80	22	85	0	0	32	84.2
1 Yes	2	20	4	15	0	0	6	15.8
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

13) How long does it usually take for you to fall asleep at night once you close your eyes?

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Under 5 minutes	0	0	2	8	0	0	2	5.3
2 5-15 minutes	4	40	5	19	0	0	9	23.7
3 16-30 minutes	5	50	8	31	0	0	15	39.5
4 31 minutes - 1 hour	1	10	7	27	0	0	8	21.1
5 over 1 hour	0	0	4	15	0	0	4	10.5
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

14) Over the last 2 weeks, what is the average amount of sleep you have gotten on a weeknight (excluding naps)? (Please select the response closest to your answer)

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Less than 4 hours	0	0	1	4	0	0	1	2.6
2 4 hours	1	10	0	0	0	0	1	2.6
3 5 hours	1	10	2	8	0	0	3	7.9
4 6 hours	3	30	8	31	0	0	12	31.6
5 7 hours	4	40	8	31	0	0	13	34.2
6 8 hours	0	0	6	23	0	0	6	15.8
7 9 hours	1	10	0	0	0	0	1	2.6
8 10 or more hours	0	0	1	4	0	0	1	2.6
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.



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### 15) Over the last 2 weeks, what is the average amount of sleep you have gotten on a weekend night (excluding naps)? (Please select the response closest to your answer)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Less than 4 hours	0	0	1	4	0	0	2	5.3
2 4 hours	2	20	0	0	0	0	2	5.3
3 5 hours	2	20	1	4	0	0	3	7.9
4 6 hours	1	10	5	19	0	0	6	15.8
5 7 hours	1	10	3	12	0	0	4	10.5
6 8 hours	2	20	8	31	0	0	10	26.3
7 9 hours	0	0	6	23	0	0	7	18.4
8 10 or more hours	2	20	2	8	0	0	4	10.5
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

### 16A) On how many of the last 7 days did you: Wake up too early in the morning and couldn't get back to sleep?

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 0 days	6	60	9	35	0	0	16	42.1
2 1 day	1	10	4	15	0	0	5	13.2
3 2 days	1	10	7	27	0	0	8	21.1
4 3 days	1	10	2	8	0	0	4	10.5
5 4 days	1	10	1	4	0	0	2	5.3
6 5 days	0	0	1	4	0	0	1	2.6
7 6 days	0	0	1	4	0	0	1	2.6
8 7 days	0	0	1	4	0	0	1	2.6
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

### 16B) On how many of the last 7 days did you: Feel tired or sleepy during the day?

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 0 days	1	10	0	0	0	0	1	2.6
2 1 day	1	10	0	0	0	0	1	2.6
3 2 days	1	10	3	12	0	0	4	10.5
4 3 days	4	40	6	23	0	0	11	28.9
5 4 days	0	0	4	15	0	0	5	13.2
6 5 days	1	10	5	19	0	0	6	15.8
7 6 days	0	0	2	8	0	0	2	5.3
8 7 days	2	20	6	23	0	0	8	21.1
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

### 16C) On how many of the last 7 days did you: Have an extremely hard time falling asleep?

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 0 days	1	10	3	12	0	0	4	10.5
2 1 day	2	20	8	31	0	0	11	28.9
3 2 days	4	40	3	12	0	0	7	18.4
4 3 days	1	10	2	8	0	0	4	10.5
5 4 days	2	20	3	12	0	0	5	13.2
6 5 days	0	0	5	19	0	0	5	13.2
7 6 days	0	0	0	0	0	0	0	0.0
8 7 days	0	0	2	8	0	0	2	5.3
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

### 16D) On how many of the last 7 days did you: Get enough sleep so that you felt rested?

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 0 days	1	10	3	12	0	0	5	13.2
2 1 day	0	0	9	35	0	0	9	23.7
3 2 days	2	20	1	4	0	0	3	7.9
4 3 days	2	20	2	8	0	0	4	10.5
5 4 days	3	30	6	23	0	0	10	26.3
6 5 days	0	0	0	0	0	0	0	0.0
7 6 days	1	10	3	12	0	0	4	10.5
8 7 days	1	10	2	8	0	0	3	7.9
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.



**16E) On how many of the last 7 days did you: Take a nap?**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 0 days	2	20	6	23	0	0	9	23.7
2 1 day	0	0	6	23	0	0	6	15.8
3 2 days	4	40	4	15	0	0	8	21.1
4 3 days	0	0	2	8	0	0	2	5.3
5 4 days	1	10	1	4	0	0	3	7.9
6 5 days	2	20	5	19	0	0	7	18.4
7 6 days	0	0	2	8	0	0	2	5.3
8 7 days	1	10	0	0	0	0	1	2.6
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

**16F) On average, how long are your naps? (only includes students who napped 1-7 days)**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Less than 30 minutes	3	38	1	5	0	0	4	14.3
2 Between 30 and 59 minutes	4	50	8	40	0	0	12	42.9
3 Between 60 and 119 minutes	0	0	10	50	0	0	10	35.7
4 2 hours or more	1	13	1	5	0	0	2	7.1
Valid responses =	8	29	20	71	0	0	28	71.8

Invalid responses include no response.

**17A) Within the last 12 months, how often did you: Wear a helmet when you rode a bicycle?**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Did not do this activity	9	90	15	58	0	0	24	64.9
2 Never	0	0	7	27	0	0	8	21.6
3 Rarely	0	0	2	8	0	0	2	5.4
4 Sometimes	0	0	1	4	0	0	1	2.7
5 Most of the time	0	0	0	0	0	0	0	0.0
6 Always	1	10	1	4	0	0	2	5.4
Valid responses =	10	27	26	70	0	0	37	94.9

Invalid responses include no response.

**17B) Within the last 12 months, how often did you: Wear a helmet when you rode a motorcycle/motor scooter?**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Did not do this activity	9	100	25	96	0	0	36	97.3
2 Never	0	0	1	4	0	0	1	2.7
3 Rarely	0	0	0	0	0	0	0	0.0
4 Sometimes	0	0	0	0	0	0	0	0.0
5 Most of the time	0	0	0	0	0	0	0	0.0
6 Always	0	0	0	0	0	0	0	0.0
Valid responses =	9	24	26	70	0	0	37	94.9

Invalid responses include no response.

**17C) Within the last 12 months, how often did you: Wear a helmet when you were skateboarding?**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Did not do this activity	10	100	23	89	0	0	34	91.9
2 Never	0	0	3	12	0	0	3	8.1
3 Rarely	0	0	0	0	0	0	0	0.0
4 Sometimes	0	0	0	0	0	0	0	0.0
5 Most of the time	0	0	0	0	0	0	0	0.0
6 Always	0	0	0	0	0	0	0	0.0
Valid responses =	10	27	26	70	0	0	37	94.9

Invalid responses include no response.

**18A) When, if ever, was the last time you drove a car or other vehicle?**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Never	1	10	2	8	0	0	3	7.9
2 Within the last 2 weeks	5	50	24	92	0	0	30	78.9
3 More than 2 weeks but within 30 days	0	0	0	0	0	0	0	0.0
4 More than 30 days but within 3 months	2	20	0	0	0	0	3	7.9
5 More than 3 months but within 12 months	1	10	0	0	0	0	1	2.6
6 More than 12 months ago	1	10	0	0	0	0	1	2.6
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

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### 18B) Within the last 2 weeks, on how many days did you drive a car or other vehicle? (only includes students that drove in the last 2 weeks)

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
0 0 Days	1	20	0	0	0	0	1	3.3
1 1 to 4 Days	0	0	6	25	0	0	6	20.0
2 5 to 10 Days	1	20	6	25	0	0	7	23.3
3 11 to 14 Days	3	60	12	50	0	0	16	53.3
Valid responses =	5	17	24	80	0	0	30	76.9
Invalid responses include no response.								
	Mean	Median	Std Dev	Min	Max			
Cis Men	8.60	12.00	5.9	0	14			
Cis Women	9.17	11.00	4.58	1	14			
Trans/Gender Non-conforming	.	.	.	.	.			
Overall	9.23	12.00	4.72	0	14			

### 18C) Within the last 2 weeks, on how many days did you manually operate a device to text, email, video chat, or use the internet or apps while driving a car or other vehicle?

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
0 0 Days	0	0	12	50	0	0	13	43.3
1 1 to 4 Days	3	60	6	25	0	0	9	30.0
2 5 to 10 Days	1	20	1	4	0	0	2	6.7
3 11 to 14 Days	1	20	5	21	0	0	6	20.0
Valid responses =	5	17	24	80	0	0	30	76.9
Invalid responses include no response.								
	Mean	Median	Std Dev	Min	Max			
Cis Men	5.80	4.00	3.49	4	12			
Cis Women	3.71	1.00	5.23	0	14			
Trans/Gender Non-conforming	.	.	.	.	.			
Overall	3.93	3.00	4.95	0	14			

### 18D) Within the last 12 months, how many times have you been involved in an accident when you drove a car or other vehicle?

Trans/Gender	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
Cis Men	7	88	21	88	29	85.3
1 No accidents	0	0	3	13	3	8.8
2 One accident	0	0	0	0	1	2.9
3 Two accidents	1	13	0	0	1	2.9
4 Three or more accidents	8	24	24	71	34	87.2
Valid responses =						
Invalid responses include no response.						

### 19A) Within the last 12 months, did you experience any of the following in an intimate (coupled/partnered) relationship? A partner called me names, insulted me, or put me down to make me feel bad.

Cis Men	Trans/Gender						Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	9	90	22	85	0	0	32	84.2
2 Yes	1	10	4	15	0	0	6	15.8
Valid responses =	10	26	26	68	0	0	38	97.4
Invalid responses include no response.								

### 19B) Within the last 12 months, did you experience any of the following in an intimate (coupled/partnered) relationship? A partner often insisted on knowing who I was with and where I was or tried to limit my contact with family or friends.

Cis Men	Trans/Gender						Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	9	90	24	92	0	0	35	92.1
2 Yes	1	10	2	8	0	0	3	7.9
Valid responses =	10	26	26	68	0	0	38	97.4
Invalid responses include no response.								

### 19C) Within the last 12 months, did you experience any of the following in an intimate (coupled/partnered) relationship? A partner pushed, grabbed, shoved, slapped, kicked, bit, choked, or hit me without my consent.

Cis Men	Trans/Gender						Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	9	90	26	100	0	0	36	94.7
2 Yes	1	10	0	0	0	0	2	5.3
Valid responses =	10	26	26	68	0	0	38	97.4
Invalid responses include no response.								





# AMERICAN COLLEGE HEALTH ASSOCIATION

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19D) Within the last 12 months, did you experience any of the following in an intimate (coupled/partnered) relationship? A partner forced me into unwanted sexual contact by holding me down or hurting me in some way.

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 No	8	89	25	96	0	0	34	91.9
2 Yes	1	11	1	4	0	0	3	8.1
Valid responses =	9	24	26	70	0	0	37	94.9

Invalid responses include no response.

19E) Within the last 12 months, did you experience any of the following in an intimate (coupled/partnered) relationship? A partner pressured me into unwanted sexual contact by threatening me, coercing me, or using alcohol or other drugs.

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 No	9	90	25	96	0	0	36	94.7
2 Yes	1	10	1	4	0	0	2	5.3
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

20A) Within the last 12 months, did you experience any of the following? Do not include intimate relationships. I was in a physical fight.

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 No	8	80	26	100	0	0	35	92.1
2 Yes	2	20	0	0	0	0	3	7.9
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

20B) Within the last 12 months, did you experience any of the following? Do not include intimate relationships. I was physically assaulted (do not include sexual assault).

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 No	9	90	25	100	0	0	35	94.6
2 Yes	1	10	0	0	0	0	2	5.4
Valid responses =	10	27	25	68	0	0	37	94.9

Invalid responses include no response.

20C) Within the last 12 months, did you experience any of the following? Do not include intimate relationships. I was verbally threatened.

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 No	8	80	25	96	0	0	35	92.1
2 Yes	2	20	1	4	0	0	3	7.9
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

20D) Within the last 12 months, did you experience any of the following? Do not include intimate relationships. I was sexually touched without my consent.

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 No	9	90	25	96	0	0	36	94.7
2 Yes	1	10	1	4	0	0	2	5.3
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

20E) Within the last 12 months, did you experience any of the following? Do not include intimate relationships. Sexual penetration (vaginal, anal, oral) was attempted on me without my consent.

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 No	9	100	25	100	0	0	35	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	9	26	25	71	0	0	35	89.7

Invalid responses include no response.

20F) Within the last 12 months, did you experience any of the following? Do not include intimate relationships. I was sexually penetrated (vaginal, anal, oral), or made to penetrate someone without my consent.

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 No	9	90	25	96	0	0	35	92.1
2 Yes	1	10	1	4	0	0	3	7.9
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

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20G) Within the last 12 months, did you experience any of the following? Do not include intimate relationships.

I was a victim of stalking (for example: waiting for me outside my classroom, residence, or office; or repeated emails/phone calls).

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	9	90	26	100	0	0	37	97.4
2 Yes	1	10	0	0	0	0	1	2.6
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

R21A) How safe do you feel: On my campus (daytime)?

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Not safe at all	0	0	0	0	0	0	1	2.6
2 Somewhat unsafe	0	0	0	0	0	0	0	0.0
3 Somewhat safe	2	20	1	4	0	0	3	7.9
4 Very safe	8	80	23	89	0	0	32	84.2
5 Does not apply	0	0	2	8	0	0	2	5.3
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

R21B) How safe do you feel: On my campus (nighttime)?

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Not safe at all	0	0	0	0	0	0	0	0.0
2 Somewhat unsafe	0	0	1	4	0	0	2	5.4
3 Somewhat safe	3	33	11	42	0	0	15	40.5
4 Very safe	5	56	12	46	0	0	17	45.9
5 Does not apply	1	11	2	8	0	0	3	8.1
Valid responses =	9	24	26	70	0	0	37	94.9

Invalid responses include no response.

R21C) How safe do you feel: In the community surrounding my campus (daytime)?

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Not safe at all	0	0	0	0	0	0	0	0.0
2 Somewhat unsafe	0	0	0	0	0	0	0	0.0
3 Somewhat safe	1	11	5	19	0	0	7	18.9
4 Very safe	8	89	19	73	0	0	28	75.7
5 Does not apply	0	0	2	8	0	0	2	5.4
Valid responses =	9	24	26	70	0	0	37	94.9

Invalid responses include no response.

R21D) How safe do you feel: In the community surrounding my campus (nighttime)?

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Not safe at all	0	0	0	0	0	0	0	0.0
2 Somewhat unsafe	0	0	2	8	0	0	3	8.1
3 Somewhat safe	4	44	13	50	0	0	17	45.9
4 Very safe	5	56	8	31	0	0	14	37.8
5 Does not apply	0	0	3	12	0	0	3	8.1
Valid responses =	9	24	26	70	0	0	37	94.9

Invalid responses include no response.

22A1) In your life, which of the following substances have you ever used?

For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause, or taking them more often or at higher doses than prescribed.

Tobacco or nicotine delivery products (cigarettes, e-cigarettes, Juul or other vape products, water pipe or hookah, chewing tobacco, cigars, etc.)

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	6	60	16	62	0	0	23	60.5
3 Yes	4	40	10	39	0	0	15	39.5
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.



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## 22A2) In your life, which of the following substances have you ever used?

For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause, or taking them more often or at higher doses than prescribed.

### Alcoholic beverages (beer, wine, liquor, etc.)

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	2	20	11	42	0	0	13	34.2
3 Yes	8	80	15	58	0	0	25	65.8
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

## 22A3) In your life, which of the following substances have you ever used?

For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause, or taking them more often or at higher doses than prescribed.

### Cannabis (marijuana, weed, hash, edibles, vaped cannabis, etc.) [Please report nonmedical use only.]

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	7	70	21	81	0	0	29	76.3
3 Yes	3	30	5	19	0	0	9	23.7
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

## 22A4) In your life, which of the following substances have you ever used?

For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause, or taking them more often or at higher doses than prescribed.

### Cocaine (coke, crack, etc.)

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	9	90	25	96	0	0	35	92.1
3 Yes	1	10	1	4	0	0	3	7.9
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

## 22A5) In your life, which of the following substances have you ever used?

For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause, or taking them more often or at higher doses than prescribed.

### Prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.) [Please report nonmedical use only.]

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	10	100	24	92	0	0	35	92.1
3 Yes	0	0	2	8	0	0	3	7.9
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

## 22A6) In your life, which of the following substances have you ever used?

For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause, or taking them more often or at higher doses than prescribed.

### Methamphetamine (speed, crystal meth, ice, etc.)

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	9	90	25	100	0	0	35	94.6
3 Yes	1	10	0	0	0	0	2	5.4
Valid responses =	10	27	25	68	0	0	37	94.9

Invalid responses include no response.

## 22A7) In your life, which of the following substances have you ever used?

For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause, or taking them more often or at higher doses than prescribed.

### Inhalants (poppers, nitrous, glue, gas, paint thinner, etc.)

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	9	90	26	100	0	0	36	94.7
3 Yes	1	10	0	0	0	0	2	5.3
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
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Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

22A8) In your life, which of the following substances have you ever used?

For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause, or taking them more often or at higher doses than prescribed.

Sedatives or Sleeping Pills (Valium, Ativan, Xanax, Klonopin, Librium, Rohypnol, GHB, etc.) [Please report nonmedical use only.]

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 No	9	90	26	100	0	0	36	94.7
3 Yes	1	10	0	0	0	0	2	5.3
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

22A9) In your life, which of the following substances have you ever used?

For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause, or taking them more often or at higher doses than prescribed.

Hallucinogens (Ecstasy, MDMA, Molly, LSD, acid, mushrooms, PCP, Special K, etc.)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 No	9	90	25	96	0	0	35	92.1
3 Yes	1	10	1	4	0	0	3	7.9
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

22A10) In your life, which of the following substances have you ever used?

For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause, or taking them more often or at higher doses than prescribed.

Heroin

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 No	10	100	25	100	0	0	36	97.3
3 Yes	0	0	0	0	0	0	1	2.7
Valid responses =	10	27	25	68	0	0	37	94.9

Invalid responses include no response.

22A11) In your life, which of the following substances have you ever used?

For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause, or taking them more often or at higher doses than prescribed.

Prescription opioids (morphine, codeine, fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine [Suboxone], etc.) [Please report nonmedical use only.]

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 No	9	90	25	96	0	0	35	92.1
3 Yes	1	10	1	4	0	0	3	7.9
Valid responses =	10	26	26	68	0	0	38	97.4

Invalid responses include no response.

22A12) In your life, which of the following substances have you ever used?

For prescription medications, please report nonmedical use only. "Nonmedical use" means taking prescription drugs just for the feeling or experience they cause, or taking them more often or at higher doses than prescribed.

Other

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 No	7	88	19	100	0	0	27	93.1
3 Yes	1	13	0	0	0	0	2	6.9
Valid responses =	8	28	19	66	0	0	29	74.4

Invalid responses include no response.

22B1) In the past 3 months, how often have you used the substance(s) you mentioned? (only includes students who have ever used this substance)

Tobacco or nicotine delivery products (cigarettes, e-cigarettes, Juul or other vape products, water pipe or hookah, chewing tobacco, cigars, etc.)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Never	1	25	4	40	0	0	6	40.0
2 Once or twice	1	25	4	40	0	0	5	33.3
3 Monthly	0	0	0	0	0	0	0	0.0
4 Weekly	1	25	1	10	0	0	2	13.3
6 Daily or almost daily	1	25	1	10	0	0	2	13.3
Valid responses =	4	27	10	67	0	0	15	38.5

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

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DAKOTA COLLEGE AT

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**22B2) In the past 3 months, how often have you used the substance(s) you mentioned? (only includes students who have ever used this substance)**  
**Alcoholic beverages (beer, wine, liquor, etc.)**

	Cis Men	Trans/Gender				Total
		Cis Women		Non-conforming		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	1	13	0	0	1	4.0
2 Once or twice	2	25	5	33	8	32.0
3 Monthly	1	13	7	47	9	36.0
4 Weekly	3	38	3	20	6	24.0
6 Daily or almost daily	1	13	0	0	1	4.0
Valid responses =	8	32	15	60	25	64.1

Invalid responses include no response.

**22B3) In the past 3 months, how often have you used the substance(s) you mentioned? (only includes students who have ever used this substance)**  
**Cannabis (marijuana, weed, hash, edibles, vaped cannabis, etc.) [Please report nonmedical use only.]**

	Cis Men	Trans/Gender				Total
		Cis Women		Non-conforming		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	3	60	3	33.3
2 Once or twice	2	67	1	20	3	33.3
3 Monthly	0	0	1	20	2	22.2
4 Weekly	1	33	0	0	1	11.1
6 Daily or almost daily	0	0	0	0	0	0.0
Valid responses =	3	33	5	56	9	23.1

Invalid responses include no response.

**22B4) In the past 3 months, how often have you used the substance(s) you mentioned? (only includes students who have ever used this substance)**  
**Cocaine (coke, crack, etc.)**

	Cis Men	Trans/Gender				Total
		Cis Women		Non-conforming		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	1	100	0	0	1	33.3
2 Once or twice	0	0	1	100	1	33.3
3 Monthly	0	0	0	0	0	0.0
4 Weekly	0	0	0	0	1	33.3
6 Daily or almost daily	0	0	0	0	0	0.0
Valid responses =	1	33	1	33	3	7.7

Invalid responses include no response.

**22B5) In the past 3 months, how often have you used the substance(s) you mentioned? (only includes students who have ever used this substance)**  
**Prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.) [Please report nonmedical use only.]**

	Cis Men	Trans/Gender				Total
		Cis Women		Non-conforming		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	2	100	2	66.7
2 Once or twice	0	0	0	0	0	0.0
3 Monthly	0	0	0	0	1	33.3
4 Weekly	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0.0
Valid responses =	0	0	2	67	3	7.7

Invalid responses include no response.

**22B6) In the past 3 months, how often have you used the substance(s) you mentioned? (only includes students who have ever used this substance)**  
**Methamphetamine (speed, crystal meth, ice, etc.)**

	Cis Men	Trans/Gender				Total
		Cis Women		Non-conforming		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	1	100	0	0	1	50.0
2 Once or twice	0	0	0	0	1	50.0
3 Monthly	0	0	0	0	0	0.0
4 Weekly	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0.0
Valid responses =	1	50	0	0	2	5.1

Invalid responses include no response.

**22B7) In the past 3 months, how often have you used the substance(s) you mentioned? (only includes students who have ever used this substance)**  
**Inhalants (poppers, nitrous, glue, gas, paint thinner, etc.)**

	Cis Men	Trans/Gender				Total
		Cis Women		Non-conforming		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	1	100	0	0	2	100.0
2 Once or twice	0	0	0	0	0	0.0
3 Monthly	0	0	0	0	0	0.0
4 Weekly	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0.0
Valid responses =	1	50	0	0	2	5.1

Invalid responses include no response.



**22B8) In the past 3 months, how often have you used the substance(s) you mentioned? (only includes students who have ever used this substance)**

**Sedatives or Sleeping Pills (Valium, Ativan, Xanax, Klonopin, Librium, Rohypnol, GHB, etc.) [Please report nonmedical use only.]**

**Trans/Gender**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Never	1	100	0	0	0	0	1	50.0
2 Once or twice	0	0	0	0	0	0	1	50.0
3 Monthly	0	0	0	0	0	0	0	0.0
4 Weekly	0	0	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	0	0	0	0	2	5.1

Invalid responses include no response.

**22B9) In the past 3 months, how often have you used the substance(s) you mentioned? (only includes students who have ever used this substance)**

**Hallucinogens (Ecstasy, MDMA, Molly, LSD, acid, mushrooms, PCP, Special K, etc.)**

**Trans/Gender**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Never	1	100	0	0	0	0	1	33.3
2 Once or twice	0	0	1	100	0	0	1	33.3
3 Monthly	0	0	0	0	0	0	1	33.3
4 Weekly	0	0	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	1	33	1	33	0	0	3	7.7

Invalid responses include no response.

**22B10) In the past 3 months, how often have you used the substance(s) you mentioned? (only includes students who have ever used this substance)**

**Heroin**

**Trans/Gender**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
2 Once or twice	0	0	0	0	0	0	0	0.0
3 Monthly	0	0	0	0	0	0	0	0.0
4 Weekly	0	0	0	0	0	0	1	100.0
6 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	1	2.6

Invalid responses include no response.

**22B11) In the past 3 months, how often have you used the substance(s) you mentioned? (only includes students who have ever used this substance)**

**Prescription opioids (morphine, codeine, fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine [Suboxone], etc.) [Please report nonmedical use only.]**

**Trans/Gender**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Never	1	100	1	100	0	0	3	100.0
2 Once or twice	0	0	0	0	0	0	0	0.0
3 Monthly	0	0	0	0	0	0	0	0.0
4 Weekly	0	0	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	1	33	1	33	0	0	3	7.7

Invalid responses include no response.

**22B12) In the past 3 months, how often have you used the substance(s) you mentioned? (only includes students who have ever used this substance) Other**

**Trans/Gender**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
2 Once or twice	0	0	0	0	0	0	0	0.0
3 Monthly	0	0	0	0	0	0	0	0.0
4 Weekly	1	100	0	0	0	0	2	100.0
6 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	0	0	0	0	2	5.1

Invalid responses include no response.

**22E) Regarding your use of prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.) in the past 3 months, was it prescribed for you?**

**(only includes students who have used this substance within the last 3 months)**

**Trans/Gender**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 No	0	0	0	0	0	0	0	0.0
1 Yes	0	0	0	0	0	0	0	0.0
99 Don't know	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



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## 22F1) Regarding your use of prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.) in the past 3 months:

**(only includes students who were prescribed this substance)**

Do you ever use MORE of your stimulant medication, that is, take a higher dosage, than is prescribed for you?

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	0	0	0	0	0	0.0
1 Yes	0	0	0	0	0	0.0
99 Don't know	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0.0

Invalid responses include no response.

## 22F2) Regarding your use of prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.) in the past 3 months:

**(only includes students who were prescribed this substance)**

Do you ever use your stimulant medication MORE OFTEN, that is, shorten the time between dosages, than is prescribed for you?

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	0	0	0	0	0	0.0
1 Yes	0	0	0	0	0	0.0
99 Don't know	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0.0

Invalid responses include no response.

## 22G) Regarding your use of prescription sedatives or sleeping pills (Valium, Ativan, Xanax, Klonopin, Librium, Rohypnol, GHB, etc.) in the past 3 months, was it prescribed for you? **(only includes students who have used this substance within the last 3 months)**

**(only includes students who have used this substance within the last 3 months)**

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	0	0	0	0	0	0.0
1 Yes	0	0	0	0	0	0.0
99 Don't know	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0.0

Invalid responses include no response.

## 22H1) Regarding your use of prescription sedatives or sleeping pills (Valium, Ativan, Xanax, Klonopin, Librium, Rohypnol, GHB, etc.) in the past 3 months:

**(only includes students who were prescribed this substance)**

Do you ever use MORE of your sedatives or sleeping pills, that is, take a higher dosage, than is prescribed for you?

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	0	0	0	0	0	0.0
1 Yes	0	0	0	0	0	0.0
99 Don't know	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0.0

Invalid responses include no response.

## 22H2) Regarding your use of prescription sedatives or sleeping pills (Valium, Ativan, Xanax, Klonopin, Librium, Rohypnol, GHB, etc.) in the past 3 months:

**(only includes students who were prescribed this substance)**

Do you ever use your sedatives or sleeping pills MORE OFTEN, that is, shorten the time between dosages, than is prescribed for you?

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	0	0	0	0	0	0.0
1 Yes	0	0	0	0	0	0.0
99 Don't know	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0.0

Invalid responses include no response.

## 22I) Regarding your use of prescription opioids (morphine, codeine, fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine [Suboxone], etc.) in the past 3 months, was it prescribed for you? **(only includes students who have used this substance within the last 3 months)**

**(only includes students who have used this substance within the last 3 months)**

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	0	0	0	0	0	0.0
1 Yes	0	0	0	0	0	0.0
99 Don't know	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0.0

Invalid responses include no response.

## 22J1) Regarding your use of prescription opioids (morphine, codeine, fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine [Suboxone], etc.) in the past 3 months: **(only includes students who were prescribed this substance)**

**(only includes students who were prescribed this substance)**

Do you ever use MORE of your opioid medication, that is, take a higher dosage, than is prescribed for you?

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	0	0	0	0	0	0.0
1 Yes	0	0	0	0	0	0.0
99 Don't know	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0.0

Invalid responses include no response.



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**22J2) Regarding your use of prescription opioids (morphine, codeine, fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine [Suboxone], etc.) in the past 3 months: (only includes students who were prescribed this substance)**

Do you ever use your opioid medication MORE OFTEN, that is, shorten the time between dosages, than is prescribed for you?

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No	0	0	0	0	0	0	0	0.0
1 Yes	0	0	0	0	0	0	0	0.0
99 Don't know	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22K1) During the past 3 months, how often have you had a strong desire or urge to use the following substance(s)?**

(only includes students who have used this substance within the last 3 months)

Tobacco or nicotine delivery products (cigarettes, e-cigarettes, Juul or other vape products, water pipe or hookah, chewing tobacco, cigars, etc.)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	1	20	0	0	1	12.5
3 Once or twice	1	33	2	40	0	0	3	37.5
4 Monthly	0	0	0	0	0	0	0	0.0
5 Weekly	1	33	1	20	0	0	2	25.0
6 Daily or almost daily	1	33	1	20	0	0	2	25.0
Valid responses =	3	38	5	63	0	0	8	20.5

Invalid responses include no response.

**22K2) During the past 3 months, how often have you had a strong desire or urge to use the following substance(s)?**

(only includes students who have used this substance within the last 3 months)

Alcoholic beverages (beer, wine, liquor, etc.)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	2	29	3	21	0	0	6	27.3
3 Once or twice	3	43	8	57	0	0	11	50.0
4 Monthly	0	0	1	7	0	0	1	4.5
5 Weekly	1	14	2	14	0	0	3	13.6
6 Daily or almost daily	1	14	0	0	0	0	1	4.5
Valid responses =	7	32	14	64	0	0	22	56.4

Invalid responses include no response.

**22K3) During the past 3 months, how often have you had a strong desire or urge to use the following substance(s)?**

(only includes students who have used this substance within the last 3 months)

Cannabis (marijuana, weed, hash, edibles, vaped cannabis, etc.) [Please report nonmedical use only.]

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	2	67	0	0	0	0	2	40.0
3 Once or twice	1	33	2	100	0	0	3	60.0
4 Monthly	0	0	0	0	0	0	0	0.0
5 Weekly	0	0	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	3	60	2	40	0	0	5	12.8

Invalid responses include no response.

**22K4) During the past 3 months, how often have you had a strong desire or urge to use the following substance(s)?**

(only includes students who have used this substance within the last 3 months)

Cocaine (coke, crack, etc.)

Cis Men

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	1	100	0	0	1	100.0
3 Once or twice	0	0	0	0	0	0	0	0.0
4 Monthly	0	0	0	0	0	0	0	0.0
5 Weekly	0	0	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.





# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

**22K5) During the past 3 months, how often have you had a strong desire or urge to use the following substance(s)?**

**(only includes students who have used this substance within the last 3 months)**

**Prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.) [Please report nonmedical use only.]**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
3 Once or twice	0	0	0	0	0	0	0	0.0
4 Monthly	0	0	0	0	0	0	0	0.0
5 Weekly	0	0	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22K6) During the past 3 months, how often have you had a strong desire or urge to use the following substance(s)?**

**(only includes students who have used this substance within the last 3 months)**

**Methamphetamine (speed, crystal meth, ice, etc.)**

Cis Men

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
3 Once or twice	0	0	0	0	0	0	0	0.0
4 Monthly	0	0	0	0	0	0	0	0.0
5 Weekly	0	0	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22K7) During the past 3 months, how often have you had a strong desire or urge to use the following substance(s)?**

**(only includes students who have used this substance within the last 3 months)**

**Inhalants (poppers, nitrous, glue, gas, paint thinner, etc.)**

Cis Men

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
3 Once or twice	0	0	0	0	0	0	0	0.0
4 Monthly	0	0	0	0	0	0	0	0.0
5 Weekly	0	0	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22K8) During the past 3 months, how often have you had a strong desire or urge to use the following substance(s)?**

**(only includes students who have used this substance within the last 3 months)**

**Sedatives or Sleeping Pills (Valium, Ativan, Xanax, Klonopin, Librium, Rohypnol, GHB, etc.) [Please report nonmedical use only.]**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
3 Once or twice	0	0	0	0	0	0	0	0.0
4 Monthly	0	0	0	0	0	0	0	0.0
5 Weekly	0	0	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22K9) During the past 3 months, how often have you had a strong desire or urge to use the following substance(s)?**

**(only includes students who have used this substance within the last 3 months)**

**Hallucinogens (Ecstasy, MDMA, Molly, LSD, acid, mushrooms, PCP, Special K, etc.)**

Cis Men

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	1	100	0	0	1	100.0
3 Once or twice	0	0	0	0	0	0	0	0.0
4 Monthly	0	0	0	0	0	0	0	0.0
5 Weekly	0	0	0	0	0	0	0	0.0
6 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

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American College Health Association  
8455 Colesville Road, Suite 740 Silver  
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DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

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(410) 859-1500

[www.acha.org](http://www.acha.org)

22K10) During the past 3 months, how often have you had a strong desire or urge to use the following substance(s)? (only includes students who have used this substance within the last 3 months)

Heroin

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Never	0	0	0	0	0	0	0	0.0	
3 Once or twice	0	0	0	0	0	0	0	0.0	
4 Monthly	0	0	0	0	0	0	0	0.0	
5 Weekly	0	0	0	0	0	0	0	0.0	
6 Daily or almost daily	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

22K11) During the past 3 months, how often have you had a strong desire or urge to use the following substance(s)? (only includes students who have used this substance within the last 3 months)

Prescription opioids (morphine, codeine, fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine [Suboxone], etc.)  
[Please report nonmedical use only.]

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Never	0	0	0	0	0	0	0	0.0	
3 Once or twice	0	0	0	0	0	0	0	0.0	
4 Monthly	0	0	0	0	0	0	0	0.0	
5 Weekly	0	0	0	0	0	0	0	0.0	
6 Daily or almost daily	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

22K12) During the past 3 months, how often have you had a strong desire or urge to use the following substance(s)? (only includes students who have used this substance within the last 3 months)

Other

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Never	0	0	0	0	0	0	0	0.0	
3 Once or twice	1	100	0	0	0	0	1	100.0	
4 Monthly	0	0	0	0	0	0	0	0.0	
5 Weekly	0	0	0	0	0	0	0	0.0	
6 Daily or almost daily	0	0	0	0	0	0	0	0.0	
Valid responses =	1	100	0	0	0	0	1	2.6	

Invalid responses include no response.

22L1) During the past 3 months, how often has your use of the following substance(s) led to health, social, legal, or financial problems? (only includes students who have used this substance within the last 3 months)

Tobacco or nicotine delivery products (cigarettes, e-cigarettes, Juul or other vape products, water pipe or hookah, chewing tobacco, cigars, etc.)

Trans/Gender

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Never	2	67	6	100	0	0	8	88.9	
4 Once or twice	1	33	0	0	0	0	1	11.1	
5 Monthly	0	0	0	0	0	0	0	0.0	
6 Weekly	0	0	0	0	0	0	0	0.0	
7 Daily or almost daily	0	0	0	0	0	0	0	0.0	
Valid responses =	3	33	6	67	0	0	9	23.1	

Invalid responses include no response.

22L2) During the past 3 months, how often has your use of the following substance(s) led to health, social, legal, or financial problems? (only includes students who have used this substance within the last 3 months)

Alcoholic beverages (beer, wine, liquor, etc.)

Trans/Gender

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Never	3	43	15	100	0	0	19	82.6	
4 Once or twice	1	14	0	0	0	0	1	4.3	
5 Monthly	1	14	0	0	0	0	1	4.3	
6 Weekly	1	14	0	0	0	0	1	4.3	
7 Daily or almost daily	1	14	0	0	0	0	1	4.3	
Valid responses =	7	30	15	65	0	0	23	59.0	

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

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DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

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(410) 859-1500

[www.acha.org](http://www.acha.org)

**22L3) During the past 3 months, how often has your use of the following substance(s) led to health, social, legal, or financial problems?**

**(only includes students who have used this substance within the last 3 months)**

**Cannabis (marijuana, weed, hash, edibles, vaped cannabis, etc.) [Please report nonmedical use only.]**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
0 Never	2	67	2	100	0	0	4	80.0
4 Once or twice	1	33	0	0	0	0	1	20.0
5 Monthly	0	0	0	0	0	0	0	0.0
6 Weekly	0	0	0	0	0	0	0	0.0
7 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	3	60	2	40	0	0	5	12.8

Invalid responses include no response.

**22L4) During the past 3 months, how often has your use of the following substance(s) led to health, social, legal, or financial problems?**

**(only includes students who have used this substance within the last 3 months)**

**Cocaine (coke, crack, etc.)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
0 Never	0	0	1	100	0	0	1	100.0
4 Once or twice	0	0	0	0	0	0	0	0.0
5 Monthly	0	0	0	0	0	0	0	0.0
6 Weekly	0	0	0	0	0	0	0	0.0
7 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**22L5) During the past 3 months, how often has your use of the following substance(s) led to health, social, legal, or financial problems?**

**(only includes students who have used this substance within the last 3 months)**

**Prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.) [Please report nonmedical use only.]**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
4 Once or twice	0	0	0	0	0	0	0	0.0
5 Monthly	0	0	0	0	0	0	0	0.0
6 Weekly	0	0	0	0	0	0	0	0.0
7 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22L6) During the past 3 months, how often has your use of the following substance(s) led to health, social, legal, or financial problems?**

**(only includes students who have used this substance within the last 3 months)**

**Methamphetamine (speed, crystal meth, ice, etc.)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
4 Once or twice	0	0	0	0	0	0	0	0.0
5 Monthly	0	0	0	0	0	0	0	0.0
6 Weekly	0	0	0	0	0	0	0	0.0
7 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22L7) During the past 3 months, how often has your use of the following substance(s) led to health, social, legal, or financial problems?**

**(only includes students who have used this substance within the last 3 months)**

**Inhalants (poppers, nitrous, glue, gas, paint thinner, etc.)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
4 Once or twice	0	0	0	0	0	0	0	0.0
5 Monthly	0	0	0	0	0	0	0	0.0
6 Weekly	0	0	0	0	0	0	0	0.0
7 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

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22L8) During the past 3 months, how often has your use of the following substance(s) led to health, social, legal, or financial problems?

(only includes students who have used this substance within the last 3 months)

Sedatives or Sleeping Pills (Valium, Ativan, Xanax, Klonopin, Librium, Rohypnol, GHB, etc.) [Please report nonmedical use only.]

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
4 Once or twice	0	0	0	0	0	0	0	0.0
5 Monthly	0	0	0	0	0	0	0	0.0
6 Weekly	0	0	0	0	0	0	0	0.0
7 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

22L9) During the past 3 months, how often has your use of the following substance(s) led to health, social, legal, or financial problems?

(only includes students who have used this substance within the last 3 months)

Hallucinogens (Ecstasy, MDMA, Molly, LSD, acid, mushrooms, PCP, Special K, etc.)

Cis Men

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	1	100	0	0	1	100.0
4 Once or twice	0	0	0	0	0	0	0	0.0
5 Monthly	0	0	0	0	0	0	0	0.0
6 Weekly	0	0	0	0	0	0	0	0.0
7 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

22L10) During the past 3 months, how often has your use of the following substance(s) led to health, social, legal, or financial problems?

(only includes students who have used this substance within the last 3 months)

Heroin

Cis Men

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
4 Once or twice	0	0	0	0	0	0	0	0.0
5 Monthly	0	0	0	0	0	0	0	0.0
6 Weekly	0	0	0	0	0	0	0	0.0
7 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

22L11) During the past 3 months, how often has your use of the following substance(s) led to health, social, legal, or financial problems?

(only includes students who have used this substance within the last 3 months)

Prescription opioids (morphine, codeine, fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine [Suboxone], etc.)

[Please report nonmedical use only.]

Cis Men

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
4 Once or twice	0	0	0	0	0	0	0	0.0
5 Monthly	0	0	0	0	0	0	0	0.0
6 Weekly	0	0	0	0	0	0	0	0.0
7 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

22L12) During the past 3 months, how often has your use of the following substance(s) led to health, social, legal, or financial problems?

(only includes students who have used this substance within the last 3 months)

Other

Cis Men

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	1	100	0	0	0	0	1	100.0
4 Once or twice	0	0	0	0	0	0	0	0.0
5 Monthly	0	0	0	0	0	0	0	0.0
6 Weekly	0	0	0	0	0	0	0	0.0
7 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.



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**22M2) During the past 3 months, how often have you failed to do what was normally expected of you because of your use of the following substance(s)?**  
**(only includes students who have used this substance within the last 3 months)**

**Alcoholic beverages (beer, wine, liquor, etc.)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 Never	5	71	14	93	0	0	20	87.0
5 Once or twice	2	29	1	7	0	0	3	13.0
6 Monthly	0	0	0	0	0	0	0	0.0
7 Weekly	0	0	0	0	0	0	0	0.0
8 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	7	30	15	65	0	0	23	59.0

Invalid responses include no response.

**22M3) During the past 3 months, how often have you failed to do what was normally expected of you because of your use of the following substance(s)?**  
**(only includes students who have used this substance within the last 3 months)**

**Cannabis (marijuana, weed, hash, edibles, vaped cannabis, etc.) [Please report nonmedical use only.]**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 Never	2	67	2	100	0	0	4	80.0
5 Once or twice	1	33	0	0	0	0	1	20.0
6 Monthly	0	0	0	0	0	0	0	0.0
7 Weekly	0	0	0	0	0	0	0	0.0
8 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	3	60	2	40	0	0	5	12.8

Invalid responses include no response.

**22M4) During the past 3 months, how often have you failed to do what was normally expected of you because of your use of the following substance(s)?**  
**(only includes students who have used this substance within the last 3 months)**

**Cocaine (coke, crack, etc.)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 Never	0	0	1	100	0	0	1	100.0
5 Once or twice	0	0	0	0	0	0	0	0.0
6 Monthly	0	0	0	0	0	0	0	0.0
7 Weekly	0	0	0	0	0	0	0	0.0
8 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**22M5) During the past 3 months, how often have you failed to do what was normally expected of you because of your use of the following substance(s)?**  
**(only includes students who have used this substance within the last 3 months)**

**Prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.) [Please report nonmedical use only.]**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 Never	0	0	0	0	0	0	0	0.0
5 Once or twice	0	0	0	0	0	0	0	0.0
6 Monthly	0	0	0	0	0	0	0	0.0
7 Weekly	0	0	0	0	0	0	0	0.0
8 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22M6) During the past 3 months, how often have you failed to do what was normally expected of you because of your use of the following substance(s)?**  
**(only includes students who have used this substance within the last 3 months)**

**Methamphetamine (speed, crystal meth, ice, etc.)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 Never	0	0	0	0	0	0	0	0.0
5 Once or twice	0	0	0	0	0	0	0	0.0
6 Monthly	0	0	0	0	0	0	0	0.0
7 Weekly	0	0	0	0	0	0	0	0.0
8 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

**22M7) During the past 3 months, how often have you failed to do what was normally expected of you because of your use of the following substance(s)?**  
**(only includes students who have used this substance within the last 3 months)**  
**Inhalants (poppers, nitrous, glue, gas, paint thinner, etc.)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
5 Once or twice	0	0	0	0	0	0	0	0.0
6 Monthly	0	0	0	0	0	0	0	0.0
7 Weekly	0	0	0	0	0	0	0	0.0
8 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22M8) During the past 3 months, how often have you failed to do what was normally expected of you because of your use of the following substance(s)?**  
**(only includes students who have used this substance within the last 3 months)**  
**Sedatives or Sleeping Pills (Valium, Ativan, Xanax, Klonopin, Librium, Rohypnol, GHB, etc.) [Please report nonmedical use only.]**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
5 Once or twice	0	0	0	0	0	0	0	0.0
6 Monthly	0	0	0	0	0	0	0	0.0
7 Weekly	0	0	0	0	0	0	0	0.0
8 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22M9) During the past 3 months, how often have you failed to do what was normally expected of you because of your use of the following substance(s)?**  
**(only includes students who have used this substance within the last 3 months)**  
**Hallucinogens (Ecstasy, MDMA, Molly, LSD, acid, mushrooms, PCP, Special K, etc.)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Never	0	0	1	100	0	0	1	100.0
5 Once or twice	0	0	0	0	0	0	0	0.0
6 Monthly	0	0	0	0	0	0	0	0.0
7 Weekly	0	0	0	0	0	0	0	0.0
8 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**22M10) During the past 3 months, how often have you failed to do what was normally expected of you because of your use of the following substance(s)?**  
**(only includes students who have used this substance within the last 3 months)**  
**Heroin**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
5 Once or twice	0	0	0	0	0	0	0	0.0
6 Monthly	0	0	0	0	0	0	0	0.0
7 Weekly	0	0	0	0	0	0	0	0.0
8 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22M11) During the past 3 months, how often have you failed to do what was normally expected of you because of your use of the following substance(s)?**  
**(only includes students who have used this substance within the last 3 months)**  
**Prescription opioids (morphine, codeine, fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine [Suboxone], etc.)**

**[Please report nonmedical use only.]**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
5 Once or twice	0	0	0	0	0	0	0	0.0
6 Monthly	0	0	0	0	0	0	0	0.0
7 Weekly	0	0	0	0	0	0	0	0.0
8 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

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American College Health Association  
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DAKOTA COLLEGE AT

February 28, 2024

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(410) 859-1500

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**22M12) During the past 3 months, how often have you failed to do what was normally expected of you because of your use of the following substance(s)? of you because of your use of the following substance(s)? (only includes students who have used this substance in the last 3 months)**  
**Other**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	0	0	0	0	0	0	0	0.0
5 Once or twice	1	100	0	0	0	0	1	100.0
6 Monthly	0	0	0	0	0	0	0	0.0
7 Weekly	0	0	0	0	0	0	0	0.0
8 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

**22N1) Has a friend or relative or anyone else ever expressed concern about your use of the following substance(s)?**

**(only includes students who have ever used this substance)**

**Tobacco or nicotine delivery products (cigarettes, e-cigarettes, Juul or other vape products, water pipe or hookah, chewing tobacco, cigars, etc.)**

**Trans/Gender**

	Trans/Gender						Total		
	Cis Men		Cis Women		Non-conforming		Freq.	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
0 No, Never	3	75	9	90	0	0	12	85.7	
3 Yes, not in the past 3 months	0	0	1	10	0	0	1	7.1	
6 Yes, in the past 3 months	1	25	0	0	0	0	1	7.1	
Valid responses =	4	29	10	71	0	0	14	35.9	

Invalid responses include no response.

**22N2) Has a friend or relative or anyone else ever expressed concern about your use of the following substance(s)?**

**(only includes students who have ever used this substance)**

**Alcoholic beverages (beer, wine, liquor, etc.)**

**Trans/Gender**

	Trans/Gender						Total		
	Cis Men		Cis Women		Non-conforming		Freq.	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
0 No, Never	6	75	13	87	0	0	20	83.3	
3 Yes, not in the past 3 months	1	13	0	0	0	0	1	4.2	
6 Yes, in the past 3 months	1	13	2	13	0	0	3	12.5	
Valid responses =	8	33	15	63	0	0	24	61.5	

Invalid responses include no response.

**22N3) Has a friend or relative or anyone else ever expressed concern about your use of the following substance(s)?**

**(only includes students who have ever used this substance)**

**Cannabis (marijuana, weed, hash, edibles, vaped cannabis, etc.) [Please report nonmedical use only.]**

**Trans/Gender**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No, Never	2	67	5	100	0	0	7	87.5
3 Yes, not in the past 3 months	1	33	0	0	0	0	1	12.5
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	3	38	5	63	0	0	8	20.5

Invalid responses include no response.

**22N4) Has a friend or relative or anyone else ever expressed concern about your use of the following substance(s)?**

**(only includes students who have ever used this substance)**

**Cocaine (coke, crack, etc.)**

**Trans/Gender**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No, Never	1	100	0	0	0	0	1	50.0
3 Yes, not in the past 3 months	0	0	0	0	0	0	0	0.0
6 Yes, in the past 3 months	0	0	1	100	0	0	1	50.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.

**22N5) Has a friend or relative or anyone else ever expressed concern about your use of the following substance(s)?**

**(only includes students who have ever used this substance)**

**Prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.) [Please report nonmedical use only.]**

**Trans/Gender**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No, Never	0	0	2	100	0	0	2	100.0
3 Yes, not in the past 3 months	0	0	0	0	0	0	0	0.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	2	100	0	0	2	5.1

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

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DAKOTA COLLEGE AT

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**22N6) Has a friend or relative or anyone else ever expressed concern about your use of the following substance(s)?**

**(only includes students who have ever used this substance)**

**Methamphetamine (speed, crystal meth, ice, etc.)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 No, Never	1	100	0	0	0	0	1	100.0
3 Yes, not in the past 3 months	0	0	0	0	0	0	0	0.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

**22N7) Has a friend or relative or anyone else ever expressed concern about your use of the following substance(s)?**

**(only includes students who have ever used this substance)**

**Inhalants (poppers, nitrous, glue, gas, paint thinner, etc.)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 No, Never	1	100	0	0	0	0	1	100.0
3 Yes, not in the past 3 months	0	0	0	0	0	0	0	0.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

**22N8) Has a friend or relative or anyone else ever expressed concern about your use of the following substance(s)?**

**(only includes students who have ever used this substance)**

**Sedatives or Sleeping Pills (Valium, Ativan, Xanax, Klonopin, Librium, Rohypnol, GHB, etc.) [Please report nonmedical use only.]**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 No, Never	1	100	0	0	0	0	1	100.0
3 Yes, not in the past 3 months	0	0	0	0	0	0	0	0.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

**22N9) Has a friend or relative or anyone else ever expressed concern about your use of the following substance(s)?**

**(only includes students who have ever used this substance)**

**Hallucinogens (Ecstasy, MDMA, Molly, LSD, acid, mushrooms, PCP, Special K, etc.)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 No, Never	1	100	1	100	0	0	2	100.0
3 Yes, not in the past 3 months	0	0	0	0	0	0	0	0.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.

**22N10) Has a friend or relative or anyone else ever expressed concern about your use of the following substance(s)?**

**(only includes students who have ever used this substance)**

**Heroin**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 No, Never	0	0	0	0	0	0	0	0.0
3 Yes, not in the past 3 months	0	0	0	0	0	0	0	0.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22N11) Has a friend or relative or anyone else ever expressed concern about your use of the following substance(s)?**

**(only includes students who have ever used this substance)**

**Prescription opioids (morphine, codeine, fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine [Suboxone], etc.)**

**[Please report nonmedical use only.]**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 No, Never	0	0	1	100	0	0	1	50.0
3 Yes, not in the past 3 months	1	100	0	0	0	0	1	50.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.





# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

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DAKOTA COLLEGE AT

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## 22N12) Has a friend or relative or anyone else ever expressed concern about your use of the following substance(s)?

(only includes students who have ever used this substance)

Other

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 No, Never	1	100	0	0	0	0	1	100.0
3 Yes, not in the past 3 months	0	0	0	0	0	0	0	0.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

## 22O1) Have you ever tried and failed to control, cut down or stop using the following substance(s)? (only includes students who have ever used this substance)

Tobacco or nicotine delivery products (cigarettes, e-cigarettes, Juul or other vape products, water pipe or hookah, chewing tobacco, cigars, etc.)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 No, Never	2	50	8	80	0	0	10	71.4
3 Yes, not in the past 3 months	1	25	1	10	0	0	2	14.3
6 Yes, in the past 3 months	1	25	1	10	0	0	2	14.3
Valid responses =	4	29	10	71	0	0	14	35.9

Invalid responses include no response.

## 22O2) Have you ever tried and failed to control, cut down or stop using the following substance(s)? (only includes students who have ever used this substance)

Alcoholic beverages (beer, wine, liquor, etc.)

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 No, Never	6	75	14	93	0	0	21	87.5
3 Yes, not in the past 3 months	1	13	0	0	0	0	1	4.2
6 Yes, in the past 3 months	1	13	1	7	0	0	2	8.3
Valid responses =	8	33	15	63	0	0	24	61.5

Invalid responses include no response.

## 22O3) Have you ever tried and failed to control, cut down or stop using the following substance(s)? (only includes students who have ever used this substance)

Cannabis (marijuana, weed, hash, edibles, vaped cannabis, etc.) [Please report nonmedical use only.]

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 No, Never	2	67	5	100	0	0	7	87.5
3 Yes, not in the past 3 months	1	33	0	0	0	0	1	12.5
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	3	38	5	63	0	0	8	20.5

Invalid responses include no response.

## 22O4) Have you ever tried and failed to control, cut down or stop using the following substance(s)? (only includes students who have ever used this substance)

Cocaine (coke, crack, etc.)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 No, Never	0	0	1	100	0	0	1	50.0
3 Yes, not in the past 3 months	1	100	0	0	0	0	1	50.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.

## 22O5) Have you ever tried and failed to control, cut down or stop using the following substance(s)? (only includes students who have ever used this substance)

Prescription stimulants (Ritalin, Concerta, Dexedrine, Adderall, diet pills, etc.) [Please report nonmedical use only.]

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 No, Never	0	0	2	100	0	0	2	100.0
3 Yes, not in the past 3 months	0	0	0	0	0	0	0	0.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	2	100	0	0	2	5.1

Invalid responses include no response.

## 22O6) Have you ever tried and failed to control, cut down or stop using the following substance(s)? (only includes students who have ever used this substance)

Methamphetamine (speed, crystal meth, ice, etc.)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 No, Never	0	0	0	0	0	0	0	0.0
3 Yes, not in the past 3 months	1	100	0	0	0	0	1	100.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.



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**2207) Have you ever tried and failed to control, cut down or stop using the following substance(s)? (only includes students who have ever used this substance)**

**Inhalants (poppers, nitrous, glue, gas, paint thinner, etc.)**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 No, Never	0	0	0	0	0	0	0	0.0
3 Yes, not in the past 3 months	1	100	0	0	0	0	1	100.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

**2208) Have you ever tried and failed to control, cut down or stop using the following substance(s)? (only includes students who have ever used this substance)**

**Sedatives or Sleeping Pills (Valium, Ativan, Xanax, Klonopin, Librium, Rohypnol, GHB, etc.) [Please report nonmedical use only.]**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 No, Never	0	0	0	0	0	0	0	0.0
3 Yes, not in the past 3 months	1	100	0	0	0	0	1	100.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

**2209) Have you ever tried and failed to control, cut down or stop using the following substance(s)? (only includes students who have ever used this substance) Hallucinogens**

**(Ecstasy, MDMA, Molly, LSD, acid, mushrooms, PCP, Special K, etc.)**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 No, Never	0	0	1	100	0	0	1	50.0
3 Yes, not in the past 3 months	1	100	0	0	0	0	1	50.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.

**22010) Have you ever tried and failed to control, cut down or stop using the following substance(s)? (only includes students who have ever used this substance)**

**Heroin**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 No, Never	0	0	0	0	0	0	0	0.0
3 Yes, not in the past 3 months	0	0	0	0	0	0	0	0.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**22011) Have you ever tried and failed to control, cut down or stop using the following substance(s)? (only includes students who have ever used this substance)**

**Prescription opioids (morphine, codeine, fentanyl, oxycodone [OxyContin, Percocet], hydrocodone [Vicodin], methadone, buprenorphine [Suboxone], etc.) [Please report nonmedical use only.]**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 No, Never	0	0	1	100	0	0	1	50.0
3 Yes, not in the past 3 months	1	100	0	0	0	0	1	50.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.

**22012) Have you ever tried and failed to control, cut down or stop using the following substance(s)? (only includes students who have ever used this substance)**

**Other**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 No, Never	1	100	0	0	0	0	1	100.0
3 Yes, not in the past 3 months	0	0	0	0	0	0	0	0.0
6 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

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American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

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FREQUENCY REPORT

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(410) 859-1500

[www.acha.org](http://www.acha.org)

## 22P) Have you ever used any drug by injection? [RECREATIONAL or NON-MEDICAL USE ONLY] (only includes students who have ever used any substance)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 No, Never	8	100	15	100	0	0	24	100.0
1 Yes, not in the past 3 months	0	0	0	0	0	0	0	0.0
2 Yes, in the past 3 months	0	0	0	0	0	0	0	0.0
Valid responses =	8	33	15	63	0	0	24	61.5

Invalid responses include no response.

## 22Q) In the past 3 months, how often have you injected drugs? [RECREATIONAL or NON-MEDICAL USE ONLY] (only includes students who have used drugs by injection within the last 3 months)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
0 Once per week or less	0	0	0	0	0	0	0	0.0
1 More than once per week	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 23A) Within the last 3 months, which tobacco products have you used? (only includes students who have used tobacco or nicotine in the last 3 months)

Cigarettes

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	2	67	5	83	0	0	7	77.8
2 Yes	1	33	1	17	0	0	2	22.2
Valid responses =	3	33	6	67	0	0	9	23.1

Invalid responses include no response.

## 23B) Within the last 3 months, which tobacco products have you used? (only includes students who have used tobacco or nicotine in the last 3 months)

E-cigarettes or other vape products (for example: Juul, etc.)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	1	33	2	33	0	0	3	33.3
2 Yes	2	67	4	67	0	0	6	66.7
Valid responses =	3	33	6	67	0	0	9	23.1

Invalid responses include no response.

## 23C) Within the last 3 months, which tobacco products have you used? (only includes students who have used tobacco or nicotine in the last 3 months)

Water pipe or hookah

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	3	100	6	100	0	0	9	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	3	33	6	67	0	0	9	23.1

Invalid responses include no response.

## 23D) Within the last 3 months, which tobacco products have you used? (only includes students who have used tobacco or nicotine in the last 3 months)

Chewing or smokeless tobacco

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	2	67	6	100	0	0	8	88.9
2 Yes	1	33	0	0	0	0	1	11.1
Valid responses =	3	33	6	67	0	0	9	23.1

Invalid responses include no response.

## 23E) Within the last 3 months, which tobacco products have you used? (only includes students who have used tobacco or nicotine in the last 3 months)

Cigars or little cigars

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	3	100	6	100	0	0	9	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	3	33	6	67	0	0	9	23.1

Invalid responses include no response.

## 23F) Within the last 3 months, which tobacco products have you used? (only includes students who have used tobacco or nicotine in the last 3 months)

Other

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	3	100	5	100	0	0	8	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	3	38	5	63	0	0	8	20.5

Invalid responses include no response.



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## 24) When, if ever, was the last time you used cannabis/marijuana? Please include medical and non-medical use.

### Trans/Gender

#### Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 Never	4	40	17	65	0	0	22	59.5
2 Within the last 2 weeks	2	20	2	8	0	0	4	10.8
3 More than 2 weeks but within 30 days	0	0	0	0	0	0	0	0.0
4 More than 30 days but within 3 months	0	0	1	4	0	0	1	2.7
5 More than 3 months but within 12 months	2	20	2	8	0	0	4	10.8
6 More than 12 months ago	2	20	4	15	0	0	6	16.2
Valid responses =	10	27	26	70	0	0	37	94.9

Invalid responses include no response.

## 25A) When, if ever, was the last time you drank alcohol?

	Cis Men		Cis Women		Non-conforming		Total	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.			
1 Never	3	30	8	31	0	0	11	29.7	
2 Within the last 2 weeks	4	40	8	31	0	0	12	32.4	
3 More than 2 weeks but within 30 days	1	10	2	8	0	0	3	8.1	
4 More than 30 days but within 3 months	0	0	6	23	0	0	7	18.9	
5 More than 3 months but within 12 months	1	10	2	8	0	0	3	8.1	
6 More than 12 months ago	1	10	0	0	0	0	1	2.7	
Valid responses =	10	27	26	70	0	0	37	94.9	

Invalid responses include no response.

## 25B1) The last time you drank alcohol: (only includes students who drank alcohol within the last 3 months)

### Did you get drunk?

	Cis Men		Cis Women		Non-conforming		Total	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.			
1 No	3	60	11	69	0	0	15	68.2	
2 Yes	2	40	5	31	0	0	7	31.8	
Valid responses =	5	23	16	73	0	0	22	56.4	

Invalid responses include no response.

## 25B2) The last time you drank alcohol: (only includes students who drank alcohol within the last 3 months)

### Did you intend to get drunk?

	Cis Men		Cis Women		Non-conforming		Total	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.			
1 No	3	60	10	63	0	0	14	63.6	
2 Yes	2	40	6	38	0	0	8	36.4	
Valid responses =	5	23	16	73	0	0	22	56.4	

Invalid responses include no response.

## 26) One drink of alcohol is defined as a 12 oz. can or bottle of beer or wine cooler, a 4 oz. glass of wine, or a shot of liquor straight or in a mixed drink.

(only includes students who drank alcohol within the last 3 months)

### The last time you drank alcohol in a social setting, how many drinks of alcohol did you have?

	Cis Men		Cis Women		Non-conforming		Total	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.			
0 0 Drinks	0	0	0	0	0	0	0	0.0	
1 1 to 2 Drinks	1	20	3	19	0	0	5	22.7	
2 3 to 4 Drinks	3	60	5	31	0	0	8	36.4	
3 5 to 6 Drinks	0	0	2	13	0	0	2	9.1	
4 7 to 8 Drinks	1	20	4	25	0	0	5	22.7	
5 9 to 10 Drinks	0	0	2	13	0	0	2	9.1	
6 11 or More Drinks	0	0	0	0	0	0	0	0.0	
Total	5	23	16	73	0	0	22	56.4	

Invalid responses include no response.

	Mean	Median	Std Dev	Min	Max
Cis Men	4.40	4.00	2.19	2	8
Cis Women	5.31	5.00	2.8	1	10
Trans/Gender Non-conforming	.	.	.	.	.
Overall	4.91	4.00	2.72	1	10



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27) One drink of alcohol is defined as a 12 oz. can or bottle of beer or wine cooler, a 4 oz. glass of wine, or a shot of liquor straight or in a mixed drink.

(only includes students who drank alcohol within the last 3 months)

The last time you drank alcohol in a social setting, over how many hours did you drink alcohol?

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.			
0 0 Hours	0	0	0	0	0	0	0.0
1 1 to 2 Hours	1	20	1	6	2	9.1	
2 3 to 4 Hours	3	60	7	44	10	45.5	
3 5 to 6 Hours	1	20	7	44	9	40.9	
4 7 to 8 Hours	0	0	0	0	0	0.0	
5 9 to 10 Hours	0	0	1	6	1	4.5	
6 11 or More Hours	0	0	0	0	0	0.0	
Total	5	23	16	73	22	56.4	

Invalid responses include no response.

Mean

	Mean	Median	Std Dev	Min	Max
Cis Men	3.40	3.00	1.14	2	5
Cis Women	4.75	5.00	1.73	2	10
Trans/Gender Non-conforming	.	.	.	.	.
Overall	4.45	4.00	1.65	2	10

28) Over the last two weeks, how many times have you had five or more drinks (males) or four or more drinks (females) containing any kind of alcohol at a sitting?

(only includes students who drank alcohol within the last 2 weeks)

	Cis Men		Cis Women		Non-conforming		Total	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.			
1 None	1	25	3	38	0	0	4	33.3	
2 1 time	2	50	4	50	0	0	6	50.0	
3 2 times	0	0	1	13	0	0	1	8.3	
4 3 times	0	0	0	0	0	0	0	0.0	
5 4 times	0	0	0	0	0	0	0	0.0	
6 5 times	1	25	0	0	0	0	1	8.3	
7 6 times	0	0	0	0	0	0	0	0.0	
8 7 times	0	0	0	0	0	0	0	0.0	
9 8 times	0	0	0	0	0	0	0	0.0	
10 9 times	0	0	0	0	0	0	0	0.0	
11 10 or more times	0	0	0	0	0	0	0	0.0	
Total	4	33	8	67	0	0	12	30.8	

Invalid responses include no response.

29A) Within the last 12 months, have you experienced any of the following when drinking alcohol? (only includes students who drank alcohol within the last 12 months) Did something I later regretted

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.		
	Freq.	Pct.	Freq.	Pct.					
1 No	5	83	17	94	0	0	23	92.0	
2 Yes	1	17	1	6	0	0	2	8.0	
Valid responses =	6	24	18	72	0	0	25	64.1	

Invalid responses include no response.

29B) Within the last 12 months, have you experienced any of the following when drinking alcohol? (only includes students who drank alcohol within the last 12 months) Blackout (forgot where I was or what I did for a large period of time and cannot remember, even when someone reminds me)

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.		
	Freq.	Pct.	Freq.	Pct.					
1 No	5	83	15	83	0	0	21	84.0	
2 Yes	1	17	3	17	0	0	4	16.0	
Valid responses =	6	24	18	72	0	0	25	64.1	

Invalid responses include no response.

29C) Within the last 12 months, have you experienced any of the following when drinking alcohol? (only includes students who drank alcohol within the last 12 months) Brownout (forgot where I was or what I did for short periods of time, but can remember once someone reminds me)

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.		
	Freq.	Pct.	Freq.	Pct.					
1 No	6	100	13	72	0	0	20	80.0	
2 Yes	0	0	5	28	0	0	5	20.0	
Valid responses =	6	24	18	72	0	0	25	64.1	

Invalid responses include no response.

29D) Within the last 12 months, have you experienced any of the following when drinking alcohol? (only includes students who drank alcohol within the last 12 months) Got in trouble with the police

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.		
	Freq.	Pct.	Freq.	Pct.					
1 No	5	83	17	94	0	0	23	92.0	
2 Yes	1	17	1	6	0	0	2	8.0	
Valid responses =	6	24	18	72	0	0	25	64.1	

Invalid responses include no response.



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**29E) Within the last 12 months, have you experienced any of the following when drinking alcohol? (only includes students who drank alcohol within the last 12 months) Got in trouble with college/university authorities**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		5	83	16	89	0	0	22	88.0
2 Yes		1	17	2	11	0	0	3	12.0
Valid responses =		6	24	18	72	0	0	25	64.1

Invalid responses include no response.

**29F) Within the last 12 months, have you experienced any of the following when drinking alcohol? (only includes students who drank alcohol within the last 12 months) Someone had sex with me without my consent**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		6	100	18	100	0	0	25	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		6	24	18	72	0	0	25	64.1

Invalid responses include no response.

**29G) Within the last 12 months, have you experienced any of the following when drinking alcohol? (only includes students who drank alcohol within the last 12 months) Had sex with someone without their consent**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		6	100	18	100	0	0	25	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		6	24	18	72	0	0	25	64.1

Invalid responses include no response.

**29H) Within the last 12 months, have you experienced any of the following when drinking alcohol? (only includes students who drank alcohol within the last 12 months) Had unprotected sex**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		5	83	15	83	0	0	21	84.0
2 Yes		1	17	3	17	0	0	4	16.0
Valid responses =		6	24	18	72	0	0	25	64.1

Invalid responses include no response.

**29I) Within the last 12 months, have you experienced any of the following when drinking alcohol? (only includes students who drank alcohol within the last 12 months) Physically injured myself**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		4	67	17	94	0	0	22	88.0
2 Yes		2	33	1	6	0	0	3	12.0
Valid responses =		6	24	18	72	0	0	25	64.1

Invalid responses include no response.

**29J) Within the last 12 months, have you experienced any of the following when drinking alcohol? (only includes students who drank alcohol within the last 12 months) Physically injured another person**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		5	83	18	100	0	0	24	96.0
2 Yes		1	17	0	0	0	0	1	4.0
Valid responses =		6	24	18	72	0	0	25	64.1

Invalid responses include no response.

**29K) Within the last 12 months, have you experienced any of the following when drinking alcohol? (only includes students who drank alcohol within the last 12 months) Seriously considered suicide**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		6	100	18	100	0	0	25	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		6	24	18	72	0	0	25	64.1

Invalid responses include no response.

**29L) Within the last 12 months, have you experienced any of the following when drinking alcohol? (only includes students who drank alcohol within the last 12 months) Needed medical help**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		5	83	18	100	0	0	24	96.0
2 Yes		1	17	0	0	0	0	1	4.0
Valid responses =		6	24	18	72	0	0	25	64.1

Invalid responses include no response.



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### 30A) Within the last 30 days, did you drive after drinking any alcohol at all?

(only includes students who drank alcohol within the last 30 days AND drove a car within the last 30 days)

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.			
1 No	3	75	10	100	0	0	92.9
2 Yes	1	25	0	0	0	0	7.1
Valid responses =	4	29	10	71	0	0	35.9

Invalid responses include no response.

### 30B) Within the last 12 months, to what extent did your alcohol use affect your academic performance? (only includes students who drank alcohol within the last 12 months)

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Alcohol use did not affect academic performance	6	100	18	100	0	0	25	100.0
2 Alcohol use negatively impacted performance in class	0	0	0	0	0	0	0	0.0
3 Alcohol use delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	6	24	18	72	0	0	25	64.1

Invalid responses include no response.

### 31A) Within the last 30 days, did you drive within 6 hours of using cannabis/marijuana?

(only includes students who used cannabis within the last 30 days AND drove a car within the last 30 days)

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.			
1 No	0	0	2	100	0	0	100.0
2 Yes	0	0	0	0	0	0	0.0
Valid responses =	0	0	2	100	0	0	5.1

Invalid responses include no response.

### 31B) Within the last 12 months, to what extent did your cannabis/marijuana use affect your academic performance? (only includes students who used cannabis within the last 12 months)

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Marijuana use did not affect academic performance	3	100	5	100	0	0	8	100.0
2 Marijuana use negatively impacted performance in class	0	0	0	0	0	0	0	0.0
3 Marijuana use delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	3	38	5	63	0	0	8	20.5

Invalid responses include no response.

### 32) Do you identify as a person in recovery from alcohol or other drug use?

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.			
1 No	7	100	18	100	0	0	100.0
2 Yes	0	0	0	0	0	0	0.0
Valid responses =	7	26	18	67	0	0	69.2

Invalid responses include no response.

The following text was displayed to students before this section:

As you answer questions in this section, please include only sexual experiences for which you gave consent and exclude any sexual contact for which you did not consent.

### 33A) When, if ever, was the last time you had:

Oral sex (oral/genital contact)?

	Cis Men		Cis Women		Non-conforming		Total	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.			
1 Never	5	50	12	46	0	0	18	48.6	
2 Within the last 2 weeks	2	20	6	23	0	0	8	21.6	
3 More than 2 weeks but within 30 days	1	10	2	8	0	0	3	8.1	
4 More than 30 days but within 3 months	2	20	2	8	0	0	4	10.8	
5 More than 3 months but within 12 months	0	0	2	8	0	0	2	5.4	
6 More than 12 months ago	0	0	2	8	0	0	2	5.4	
Valid responses =	10	27	26	70	0	0	37	94.9	

Invalid responses include no response.

### 33B) When, if ever, was the last time you had:

Vaginal intercourse (penis in vagina)?

	Cis Men		Cis Women		Non-conforming		Total	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.			
1 Never	5	50	11	42	0	0	17	45.9	
2 Within the last 2 weeks	2	20	9	35	0	0	11	29.7	
3 More than 2 weeks but within 30 days	1	10	1	4	0	0	2	5.4	
4 More than 30 days but within 3 months	2	20	2	8	0	0	4	10.8	
5 More than 3 months but within 12 months	0	0	2	8	0	0	2	5.4	
6 More than 12 months ago	0	0	1	4	0	0	1	2.7	
Valid responses =	10	27	26	70	0	0	37	94.9	

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

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(410) 859-1500

[www.acha.org](http://www.acha.org)

### 33C) When, if ever, was the last time you had:

Anal intercourse (penis in anus)?

	Trans/Gender						Total Freq.	Total Pct.
	Cis Men	Cis Women		Non-conforming		Pct.		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Never	7	70	23	89	0	0	31	83.8
2 Within the last 2 weeks	1	10	0	0	0	0	1	2.7
3 More than 2 weeks but within 30 days	0	0	1	4	0	0	1	2.7
4 More than 30 days but within 3 months	1	10	0	0	0	0	1	2.7
5 More than 3 months but within 12 months	0	0	0	0	0	0	0	0.0
6 More than 12 months ago	1	10	2	8	0	0	3	8.1
Valid responses =	10	27	26	70	0	0	37	94.9

Invalid responses include no response.

### 34) Within the last 12 months, with how many partners have you had oral sex, vaginal intercourse, or anal intercourse?

(only includes students that have had oral sex or vaginal/anal intercourse in the last 12 months)

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women Freq.	Cis Women Pct.	Non-conforming Freq.	Non-conforming Pct.	Freq.	Pct.
0 0 Partners	1	20	0	0	0	0	1	5.3	
1 1 Partner	4	80	11	79	0	0	15	78.9	
2 2 Partners	0	0	2	14	0	0	2	10.5	
3 3 Partners	0	0	1	7	0	0	1	5.3	
4 4 Partners	0	0	0	0	0	0	0	0.0	
5 5 Partners	0	0	0	0	0	0	0	0.0	
6 6 Partners	0	0	0	0	0	0	0	0.0	
7 7 Partners	0	0	0	0	0	0	0	0.0	
8 8 to 10 Partners	0	0	0	0	0	0	0	0.0	
9 11 or More Partners	0	0	0	0	0	0	0	0.0	
Valid responses =	5	26	14	74	0	0	19	48.7	

Invalid responses include no response.

	Mean	Median	Std Dev	Min	Max
Cis Men	0.80	1.00	0.45	0	1
Cis Women	1.29	1.00	0.61	1	3
Trans/Gender Non-conforming	.	.	.	.	.
Overall	1.16	1.00	0.6	0	3

### 35A) Within the last 12 months, did you have sexual partner(s) who were: (only includes students with 1 or more sexual partners in the last 12 months)

Women or females

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women Freq.	Cis Women Pct.	Non-conforming Freq.	Non-conforming Pct.	Freq.	Pct.
1 No	0	0	13	93	0	0	13	72.2	
2 Yes	4	100	1	7	0	0	5	27.8	
Valid responses =	4	22	14	78	0	0	18	46.2	

Invalid responses include no response.

### 35B) Within the last 12 months, did you have sexual partner(s) who were: (only includes students with 1 or more sexual partners in the last 12 months) Men or males

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women Freq.	Cis Women Pct.	Non-conforming Freq.	Non-conforming Pct.	Freq.	Pct.
1 No	4	100	1	7	0	0	5	27.8	
2 Yes	0	0	13	93	0	0	13	72.2	
Valid responses =	4	22	14	78	0	0	18	46.2	

Invalid responses include no response.

### 35C) Within the last 12 months, did you have sexual partner(s) who were: (only includes students with 1 or more sexual partners in the last 12 months)

Trans women

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women Freq.	Cis Women Pct.	Non-conforming Freq.	Non-conforming Pct.	Freq.	Pct.
1 No	4	100	14	100	0	0	18	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	4	22	14	78	0	0	18	46.2	

Invalid responses include no response.

### 35D) Within the last 12 months, did you have sexual partner(s) who were: (only includes students with 1 or more sexual partners in the last 12 months)

Trans men

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women Freq.	Cis Women Pct.	Non-conforming Freq.	Non-conforming Pct.	Freq.	Pct.
1 No	4	100	14	100	0	0	18	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	4	22	14	78	0	0	18	46.2	

Invalid responses include no response.





**35E) Within the last 12 months, did you have sexual partner(s) who were: (only includes students with 1 or more sexual partners in the last 12 months)**

**Genderqueer**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		4	100	14	100	0	0	18	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		4	22	14	78	0	0	18	46.2

Invalid responses include no response.

**35F) Within the last 12 months, did you have sexual partner(s) who were: (only includes students with 1 or more sexual partners in the last 12 months)**

**Person(s) with another identity**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		4	100	14	100	0	0	18	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		4	22	14	78	0	0	18	46.2

Invalid responses include no response.

**36A) Within the last 30 days, how often did you or your partner(s) use a condom or other protective barrier (for example: male condom, female condom, dam, or glove) during: (only includes students that have had oral sex within the last 30 days)**

**Oral sex (oral/genital contact)?**

**Trans/Gender**

Cis Men	Cis Women		Non-conforming		Total			
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Never	3	100	7	88	0	0	10	90.9
2 Rarely	0	0	0	0	0	0	0	0.0
3 Sometimes	0	0	0	0	0	0	0	0.0
4 Most of the time	0	0	0	0	0	0	0	0.0
5 Always	0	0	1	13	0	0	1	9.1
Valid responses =	3	27	8	73	0	0	11	28.2

Invalid responses include no response.

**36B) Within the last 30 days, how often did you or your partner(s) use a condom or other protective barrier (for example: male condom, female condom, dam, or glove) during: (only includes students that have had vaginal intercourse within the last 30 days)**

**Vaginal intercourse (penis in vagina)?**

Cis Men	Trans/Gender				Total			
	Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 Never	2	67	6	60	0	0	8	61.5
2 Rarely	0	0	0	0	0	0	0	0.0
3 Sometimes	1	33	1	10	0	0	2	15.4
4 Most of the time	0	0	2	20	0	0	2	15.4
5 Always	0	0	1	10	0	0	1	7.7
Valid responses =	3	23	10	77	0	0	13	33.3

Invalid responses include no response.

**36C) Within the last 30 days, how often did you or your partner(s) use a condom or other protective barrier (for example: male condom, female condom, dam, or glove) during: (only includes students that have had anal intercourse within the last 30 days)**

**Anal intercourse (penis in anus)?**

Cis Men	Trans/Gender				Total			
	Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 Never	1	100	0	0	0	0	1	50.0
2 Rarely	0	0	0	0	0	0	0	0.0
3 Sometimes	0	0	0	0	0	0	0	0.0
4 Most of the time	0	0	0	0	0	0	0	0.0
5 Always	0	0	1	100	0	0	1	50.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.

**37) Did you or your partner use any method to prevent pregnancy the last time you had vaginal intercourse (penis in vagina)?**

**(only includes students that have had vaginal intercourse within the last 12 months)**

Cis Men	Trans/Gender				Total			
	Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 Yes	4	80	12	86	0	0	16	84.2
2 No, not want prevent pregnancy	0	0	0	0	0	0	0	0.0
3 No, did not use any method	1	20	2	14	0	0	3	15.8
4 Don't know	0	0	0	0	0	0	0	0.0
Valid responses =	5	26	14	74	0	0	19	48.7

Invalid responses include no response.



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**38A) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Birth control pills (monthly or extended cycle)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected	2	50	5	42	0	0	7	43.8
1 Selected	2	50	7	58	0	0	9	56.3
Valid responses =	4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38B) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Birth control shots**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected	4	100	10	83	0	0	14	87.5
1 Selected	0	0	2	17	0	0	2	12.5
Valid responses =	4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38C) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Birth control implants**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected	4	100	12	100	0	0	16	100.0
1 Selected	0	0	0	0	0	0	0	0.0
Valid responses =	4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38D) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Birth control patch**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected	4	100	12	100	0	0	16	100.0
1 Selected	0	0	0	0	0	0	0	0.0
Valid responses =	4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38E) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**The ring**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected	4	100	12	100	0	0	16	100.0
1 Selected	0	0	0	0	0	0	0	0.0
Valid responses =	4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38F) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Emergency contraception ("morning after pill" or "Plan B")**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected	4	100	12	100	0	0	16	100.0
1 Selected	0	0	0	0	0	0	0	0.0
Valid responses =	4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38G) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Intrauterine device (IUD)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected	3	75	9	75	0	0	12	75.0
1 Selected	1	25	3	25	0	0	4	25.0
Valid responses =	4	25	12	75	0	0	16	41.0

Invalid responses include no response.



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**38H) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Male (external) condom**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected		2	50	8	67	0	0	10	62.5
1 Selected		2	50	4	33	0	0	6	37.5
Valid responses =		4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38I) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Female (internal) condom**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected		4	100	12	100	0	0	16	100.0
1 Selected		0	0	0	0	0	0	0	0.0
Valid responses =		4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38J) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Diaphragm or cervical cap**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected		4	100	12	100	0	0	16	100.0
1 Selected		0	0	0	0	0	0	0	0.0
Valid responses =		4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38K) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Contraceptive sponge**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected		4	100	12	100	0	0	16	100.0
1 Selected		0	0	0	0	0	0	0	0.0
Valid responses =		4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38L) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Withdrawal**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected		3	75	9	75	0	0	12	75.0
1 Selected		1	25	3	25	0	0	4	25.0
Valid responses =		4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38M) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Fertility awareness (for example: calendar, mucous, and basal body temperature)**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected		4	100	12	100	0	0	16	100.0
1 Selected		0	0	0	0	0	0	0	0.0
Valid responses =		4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38N) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**  
**Sterilization (for example: hysterectomy, tubes tied, or vasectomy)**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected		4	100	12	100	0	0	16	100.0
1 Selected		0	0	0	0	0	0	0	0.0
Valid responses =		4	25	12	75	0	0	16	41.0

Invalid responses include no response.



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**38O) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**

Don't know

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected	4	100	12	100	0	0	16	100.0
1 Selected	0	0	0	0	0	0	0	0.0
Valid responses =	4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**38P) Please indicate which of the following method(s) you or your partner used to prevent pregnancy the last time you had vaginal intercourse. (Please select ALL that apply) (only includes students who used a method of pregnancy prevention the last time they had vaginal intercourse)**

Other method

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not selected	4	100	12	100	0	0	16	100.0
1 Selected	0	0	0	0	0	0	0	0.0
Valid responses =	4	25	12	75	0	0	16	41.0

Invalid responses include no response.

**39) Within the last 12 months, have you or your partner(s) used emergency contraception ("morning after pill" or "Plan B")?**

(only includes students that have had vaginal intercourse within the last 12 months)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	5	100	14	100	0	0	19	100.0
2 Yes	0	0	0	0	0	0	0	0.0
3 Don't know	0	0	0	0	0	0	0	0.0
4 Not applicable	0	0	0	0	0	0	0	0.0
Valid responses =	5	26	14	74	0	0	19	48.7

Invalid responses include no response.

**40) Within the last 12 months, have you or your partner(s) become pregnant? (only includes students that have had vaginal intercourse within the last 12 months)**

Trans/Gender

Cis Men

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	5	100	14	100	0	0	19	100.0
2 Yes, unintentionally	0	0	0	0	0	0	0	0.0
3 Yes, intentionally	0	0	0	0	0	0	0	0.0
4 Don't know	0	0	0	0	0	0	0	0.0
Valid responses =	5	26	14	74	0	0	19	48.7

Invalid responses include no response.

**40B) Within the last 12 months, to what extent did your pregnancy (or a partner's pregnancy) affect your academic performance?**

(Please select the most serious outcome below) (only includes students or students with partners that have become pregnant in the last 12 months)

Trans/Gender

Cis Men

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 Pregnancy did not affect my academics	0	0	0	0	0	0	0	0.0
2 Pregnancy negatively impacted my performance in a class	0	0	0	0	0	0	0	0.0
3 Pregnancy delayed progress towards my degree	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**41A) Below are 8 statements with which you may agree or disagree.**

Using the scale below, indicate your agreement with each item by indicating that response for each statement. 1 lead a purposeful and meaningful life.

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 Strongly disagree	2	20	1	4	0	0	3	8.1
2 Disagree	0	0	1	4	0	0	1	2.7
3 Slightly disagree	0	0	0	0	0	0	0	0.0
4 Neither agree nor disagree	0	0	1	4	0	0	2	5.4
5 Slightly agree	3	30	5	19	0	0	8	21.6
6 Agree	5	50	13	50	0	0	18	48.6
7 Strongly agree	0	0	5	19	0	0	5	13.5
Valid responses =	10	27	26	70	0	0	37	94.9

Invalid responses include no response.



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41B) Below are 8 statements with which you may agree or disagree.

Using the scale below, indicate your agreement with each item by indicating that response for each statement.

My social relationships are supportive and rewarding.

Trans/Gender

Cis Men

	Cis Women		Non-conforming			Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.	Pct.		
1 Strongly disagree	2	20	1	4	0	3	8.1
2 Disagree	1	10	0	0	0	1	2.7
3 Slightly disagree	0	0	0	0	0	0	0.0
4 Neither agree nor disagree	0	0	1	4	0	2	5.4
5 Slightly agree	4	40	8	31	0	12	32.4
6 Agree	2	20	10	39	0	12	32.4
7 Strongly agree	1	10	6	23	0	7	18.9
Valid responses =	10	27	26	70	0	37	94.9

Invalid responses include no response.

41C) Below are 8 statements with which you may agree or disagree.

Using the scale below, indicate your agreement with each item by indicating that response for each statement. I

am engaged and interested in my daily activities.

Trans/Gender

Cis Men

	Cis Women		Non-conforming			Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.	Pct.		
1 Strongly disagree	2	20	1	4	0	3	8.1
2 Disagree	0	0	0	0	0	0	0.0
3 Slightly disagree	1	10	1	4	0	2	5.4
4 Neither agree nor disagree	0	0	1	4	0	2	5.4
5 Slightly agree	3	30	8	31	0	11	29.7
6 Agree	3	30	12	46	0	15	40.5
7 Strongly agree	1	10	3	12	0	4	10.8
Valid responses =	10	27	26	70	0	37	94.9

Invalid responses include no response.

41D) Below are 8 statements with which you may agree or disagree.

Using the scale below, indicate your agreement with each item by indicating that response for each statement. I

actively contribute to the happiness and well-being of others.

Trans/Gender

Cis Men

	Cis Women		Non-conforming			Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.	Pct.		
1 Strongly disagree	2	20	1	4	0	3	8.1
2 Disagree	0	0	0	0	0	0	0.0
3 Slightly disagree	0	0	1	4	0	1	2.7
4 Neither agree nor disagree	2	20	0	0	0	3	8.1
5 Slightly agree	2	20	6	23	0	8	21.6
6 Agree	4	40	10	39	0	14	37.8
7 Strongly agree	0	0	8	31	0	8	21.6
Valid responses =	10	27	26	70	0	37	94.9

Invalid responses include no response.

41E) Below are 8 statements with which you may agree or disagree.

Using the scale below, indicate your agreement with each item by indicating that response for each statement. I

am competent and capable in the activities that are important to me.

Trans/Gender

Cis Men

	Cis Women		Non-conforming			Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.	Pct.		
1 Strongly disagree	2	20	1	4	0	3	8.3
2 Disagree	0	0	0	0	0	0	0.0
3 Slightly disagree	0	0	0	0	0	0	0.0
4 Neither agree nor disagree	0	0	1	4	0	1	2.8
5 Slightly agree	1	10	6	23	0	7	19.4
6 Agree	4	40	11	42	0	15	41.7
7 Strongly agree	3	30	7	27	0	10	27.8
Valid responses =	10	28	26	72	0	36	92.3

Invalid responses include no response.

41F) Below are 8 statements with which you may agree or disagree.

Using the scale below, indicate your agreement with each item by indicating that response for each statement. I

am a good person and live a good life.

Trans/Gender

Cis Men

	Cis Women		Non-conforming			Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.	Pct.		
1 Strongly disagree	2	20	1	4	0	3	8.3
2 Disagree	0	0	0	0	0	0	0.0
3 Slightly disagree	0	0	1	4	0	1	2.8
4 Neither agree nor disagree	1	10	1	4	0	2	5.6
5 Slightly agree	1	10	4	15	0	5	13.9
6 Agree	4	40	11	42	0	15	41.7
7 Strongly agree	2	20	8	31	0	10	27.8
Valid responses =	10	28	26	72	0	36	92.3

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

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(410) 859-1500

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41G) Below are 8 statements with which you may agree or disagree. Using the scale below, indicate your agreement with each item by indicating that response for each statement. I am optimistic about my future.

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 Strongly disagree	2	20	1	4	0	0	3	8.3
2 Disagree	0	0	0	0	0	0	0	0.0
3 Slightly disagree	2	20	0	0	0	0	2	5.6
4 Neither agree nor disagree	1	10	3	12	0	0	4	11.1
5 Slightly agree	1	10	5	19	0	0	6	16.7
6 Agree	2	20	11	42	0	0	13	36.1
7 Strongly agree	2	20	6	23	0	0	8	22.2
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

41H) Below are 8 statements with which you may agree or disagree. Using the scale below, indicate your agreement with each item by indicating that response for each statement. People respect me.

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 Strongly disagree	2	20	1	4	0	0	3	8.3
2 Disagree	0	0	0	0	0	0	0	0.0
3 Slightly disagree	0	0	0	0	0	0	0	0.0
4 Neither agree nor disagree	3	30	4	15	0	0	7	19.4
5 Slightly agree	1	10	7	27	0	0	8	22.2
6 Agree	2	20	12	46	0	0	14	38.9
7 Strongly agree	2	20	2	8	0	0	4	11.1
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

42A) Please indicate how much you agree with the following statements as they apply to you over the last month. If a particular situation has not occurred recently, answer according to how you think you would have felt. I am able to adapt when changes occur.<sup>1</sup>

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not at all true	1	10	0	0	0	0	1	2.8
1 Rarely true	0	0	0	0	0	0	0	0.0
2 Sometimes true	4	40	6	23	0	0	10	27.8
3 Often true	2	20	12	46	0	0	14	38.9
4 True nearly all the time	3	30	8	31	0	0	11	30.6
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

42B) Please indicate how much you agree with the following statements as they apply to you over the last month. If a particular situation has not occurred recently, answer according to how you think you would have felt. I tend to bounce back after illness, injury, or other hardships.<sup>1</sup>

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
0 Not at all true	1	10	1	4	0	0	2	5.7
1 Rarely true	0	0	1	4	0	0	1	2.9
2 Sometimes true	2	20	4	16	0	0	6	17.1
3 Often true	5	50	10	40	0	0	15	42.9
4 True nearly all the time	2	20	9	36	0	0	11	31.4
Valid responses =	10	29	25	71	0	0	35	89.7

Invalid responses include no response.

43) If in the future you were having a personal problem that was really bothering you, would you consider seeking help from a mental health professional?

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	8	80	9	36	0	0	17	48.6
2 Yes	2	20	16	64	0	0	18	51.4
Valid responses =	10	29	25	71	0	0	35	89.7

Invalid responses include no response.



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44A) The next 6 questions ask about how you have been feeling during the past 30 days.

For each question, please select the response that best describes how often you had this feeling.

During the past 30 days, about how often did you feel nervous?

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 None of the time	0	0	3	12	3	8.3
1 A little of the time	4	40	6	23	10	27.8
2 Some of the time	3	30	8	31	11	30.6
3 Most of the time	2	20	6	23	8	22.2
4 All of the time	1	10	3	12	4	11.1
Valid responses =	10	28	26	72	36	92.3

Invalid responses include no response.

44B) The next 6 questions ask about how you have been feeling during the past 30 days.

For each question, please select the response that best describes how often you had this feeling.

During the past 30 days, about how often did you feel hopeless?

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 None of the time	5	50	12	46	17	47.2
1 A little of the time	2	20	8	31	10	27.8
2 Some of the time	2	20	2	8	4	11.1
3 Most of the time	0	0	3	12	3	8.3
4 All of the time	1	10	1	4	2	5.6
Valid responses =	10	28	26	72	36	92.3

Invalid responses include no response.

44C) The next 6 questions ask about how you have been feeling during the past 30 days.

For each question, please select the response that best describes how often you had this feeling.

During the past 30 days, about how often did you feel restless or fidgety?

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 None of the time	2	20	4	15	6	16.7
1 A little of the time	1	10	7	27	8	22.2
2 Some of the time	5	50	7	27	12	33.3
3 Most of the time	1	10	6	23	7	19.4
4 All of the time	1	10	2	8	3	8.3
Valid responses =	10	28	26	72	36	92.3

Invalid responses include no response.

44D) The next 6 questions ask about how you have been feeling during the past 30 days.

For each question, please select the response that best describes how often you had this feeling.

During the past 30 days, about how often did you feel so sad nothing could cheer you up?

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 None of the time	4	40	9	35	13	36.1
1 A little of the time	2	20	9	35	11	30.6
2 Some of the time	2	20	5	19	7	19.4
3 Most of the time	1	10	2	8	3	8.3
4 All of the time	1	10	1	4	2	5.6
Valid responses =	10	28	26	72	36	92.3

Invalid responses include no response.

44E) The next 6 questions ask about how you have been feeling during the past 30 days.

For each question, please select the response that best describes how often you had this feeling.

During the past 30 days, about how often did you feel that everything was an effort?

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 None of the time	3	30	9	35	12	33.3
1 A little of the time	2	20	7	27	9	25.0
2 Some of the time	3	30	3	12	6	16.7
3 Most of the time	1	10	3	12	4	11.1
4 All of the time	1	10	4	15	5	13.9
Valid responses =	10	28	26	72	36	92.3

Invalid responses include no response.



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**44F) The next 6 questions ask about how you have been feeling during the past 30 days. For each question, please select the response that best describes how often you had this feeling. During the past 30 days, about how often did you feel worthless?**

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
0 None of the time	5	50	12	50	0	0	17	50.0
1 A little of the time	1	10	6	25	0	0	7	20.6
2 Some of the time	3	30	4	17	0	0	7	20.6
3 Most of the time	0	0	1	4	0	0	1	2.9
4 All of the time	1	10	1	4	0	0	2	5.9
Valid responses =	10	29	24	71	0	0	34	87.2

Invalid responses include no response.

**45A) Indicate how often each of the statements below is descriptive of you. How often do you feel that you lack companionship?**

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 Hardly ever	5	50	14	54	0	0	19	52.8
2 Some of the time	3	30	11	42	0	0	14	38.9
3 Often	2	20	1	4	0	0	3	8.3
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**45B) Indicate how often each of the statements below is descriptive of you. How often do you feel left out?**

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 Hardly ever	3	30	4	15	0	0	7	19.4
2 Some of the time	5	50	18	69	0	0	23	63.9
3 Often	2	20	4	15	0	0	6	16.7
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**45C) Indicate how often each of the statements below is descriptive of you. How often do you feel isolated from others?**

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 Hardly ever	2	20	12	46	0	0	14	38.9
2 Some of the time	4	40	10	39	0	0	14	38.9
3 Often	4	40	4	15	0	0	8	22.2
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**46) Within the last 12 months, how often have you intentionally cut, burned, bruised, or otherwise injured yourself?**

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 Never	8	80	23	89	0	0	31	86.1
2 Once or twice	2	20	3	12	0	0	5	13.9
3 Monthly	0	0	0	0	0	0	0	0.0
4 Weekly	0	0	0	0	0	0	0	0.0
5 Daily or almost daily	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**47A1) Within the last 12 months, have you had problems or challenges with any of the following?**

Academics

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 No	7	70	20	77	0	0	27	75.0
2 Yes	3	30	6	23	0	0	9	25.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**47A2) Within the last 12 months, have you had problems or challenges with any of the following?**

Career

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
1 No	8	80	24	92	0	0	32	88.9
2 Yes	2	20	2	8	0	0	4	11.1
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.





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### 47A3) Within the last 12 months, have you had problems or challenges with any of the following?

#### Finances

#### Trans/Gender

#### Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	5	50	16	62	0	0	21	58.3
2 Yes	5	50	10	39	0	0	15	41.7
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 47A4) Within the last 12 months, have you had problems or challenges with any of the following? Procrastination

#### Trans/Gender

#### Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	5	50	11	42	0	0	16	44.4
2 Yes	5	50	15	58	0	0	20	55.6
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 47A5) Within the last 12 months, have you had problems or challenges with any of the following?

#### Faculty

#### Trans/Gender

#### Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	7	70	24	92	0	0	31	86.1
2 Yes	3	30	2	8	0	0	5	13.9
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 47A6) Within the last 12 months, have you had problems or challenges with any of the following?

#### Family

#### Trans/Gender

#### Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	8	80	22	85	0	0	30	83.3
2 Yes	2	20	4	15	0	0	6	16.7
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 47A7) Within the last 12 months, have you had problems or challenges with any of the following?

#### Intimate relationships

#### Trans/Gender

#### Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	7	70	16	64	0	0	23	65.7
2 Yes	3	30	9	36	0	0	12	34.3
Valid responses =	10	29	25	71	0	0	35	89.7

Invalid responses include no response.

### 47A8) Within the last 12 months, have you had problems or challenges with any of the following?

#### Roommate/housemate

#### Trans/Gender

#### Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	7	70	20	77	0	0	27	75.0
2 Yes	3	30	6	23	0	0	9	25.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 47A9) Within the last 12 months, have you had problems or challenges with any of the following?

#### Peers

#### Trans/Gender

#### Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	6	60	18	69	0	0	24	66.7
2 Yes	4	40	8	31	0	0	12	33.3
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 47A10) Within the last 12 months, have you had problems or challenges with any of the following?

#### Personal appearance

#### Trans/Gender

#### Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	5	50	14	54	0	0	19	52.8
2 Yes	5	50	12	46	0	0	17	47.2
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.



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## 47A11) Within the last 12 months, have you had problems or challenges with any of the following?

Health of someone close to me

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	6	60	17	65	0	0	23	63.9
2 Yes	4	40	9	35	0	0	13	36.1
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 47A12) Within the last 12 months, have you had problems or challenges with any of the following?

Death of a family member, friend, or someone close to me

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	9	90	17	65	0	0	26	72.2
2 Yes	1	10	9	35	0	0	10	27.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## R47A13) Within the last 12 months, have you had problems or challenges with any of the following? I

was bullied (threats, rumors, physical or verbal attacks, or being excluded from a group)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	8	80	24	92	0	0	32	88.9
2 Yes	2	20	2	8	0	0	4	11.1
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## R47A14) Within the last 12 months, have you had problems or challenges with any of the following? I

was cyberbullied (technology was used to harass, threaten, embarrass, or target me)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	9	90	24	92	0	0	33	91.7
2 Yes	1	10	2	8	0	0	3	8.3
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## R47A15) Within the last 12 months, have you had problems or challenges with any of the following?

I was hazed (rituals, challenges, and other activities involving harassment, abuse, embarrassment, ridicule, or humiliation were used as a way of initiating me into a group)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	8	80	25	96	0	0	33	91.7
2 Yes	2	20	1	4	0	0	3	8.3
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## R47A16) Within the last 12 months, have you had problems or challenges with any of the following?

I experienced microaggression(s) directed at me (a subtle but offensive comment or action directed at a minority or other non-dominant group, whether intentional or unintentional, that reinforces a stereotype)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	8	80	25	96	0	0	33	91.7
2 Yes	2	20	1	4	0	0	3	8.3
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## R47A17) Within the last 12 months, have you had problems or challenges with any of the following?

I was sexually harassed (unwelcomed sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	8	80	24	92	0	0	32	88.9
2 Yes	2	20	2	8	0	0	4	11.1
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

**R47A18) Within the last 12 months, have you had problems or challenges with any of the following?  
I experienced discrimination directed at me (the unjust or prejudicial treatment of a person based on the group, class, or category to which the person is perceived to belong)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	9	90	26	100	0	0	35	97.2
2 Yes	1	10	0	0	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**47B1) Within the last 12 months, to what extent did the following issue(s) cause you distress? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Academics**

**Trans/Gender**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	0	0	0	0	0	0.0
2 Minimal Distress	0	0	1	17	0	0	1	11.1
3 Moderate Distress	0	0	3	50	0	0	3	33.3
4 High Distress	3	100	2	33	0	0	5	56.6
Valid responses =	3	33	6	67	0	0	9	23.1

Invalid responses include no response.

**47B2) Within the last 12 months, to what extent did the following issue(s) cause you distress? (only includes students that had problems or challenges with this issue within the last 12 months) Career**

**Trans/Gender**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	0	0	0	0	0	0.0
2 Minimal Distress	1	50	0	0	0	0	1	25.0
3 Moderate Distress	0	0	1	50	0	0	1	25.0
4 High Distress	1	50	1	50	0	0	2	50.0
Valid responses =	2	50	2	50	0	0	4	10.3

Invalid responses include no response.

**47B3) Within the last 12 months, to what extent did the following issue(s) cause you distress? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Finances**

**Trans/Gender**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	1	10	0	0	1	6.7
2 Minimal Distress	2	40	4	40	0	0	6	40.0
3 Moderate Distress	2	40	3	30	0	0	5	33.3
4 High Distress	1	20	2	20	0	0	3	20.0
Valid responses =	5	33	10	67	0	0	15	38.5

Invalid responses include no response.

**47B4) Within the last 12 months, to what extent did the following issue(s) cause you distress? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Procrastination**

**Trans/Gender**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	1	7	0	0	1	5.0
2 Minimal Distress	1	20	7	47	0	0	8	40.0
3 Moderate Distress	2	40	4	27	0	0	6	30.0
4 High Distress	2	40	3	20	0	0	5	25.0
Valid responses =	5	25	15	75	0	0	20	51.3

Invalid responses include no response.

**47B5) Within the last 12 months, to what extent did the following issue(s) cause you distress? (only includes students that had problems or challenges with this issue within the last 12 months) Faculty**

**Trans/Gender**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	0	0	0	0	0	0.0
2 Minimal Distress	1	33	1	50	0	0	2	40.0
3 Moderate Distress	1	33	1	50	0	0	2	40.0
4 High Distress	1	33	0	0	0	0	1	20.0
Valid responses =	3	60	2	40	0	0	5	12.8

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

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**47B6) Within the last 12 months, to what extent did the following issue(s) cause you distress? (only includes students that had problems or challenges with this issue within the last 12 months) Family**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	0	0	0	0	0	0.0
2 Minimal Distress	0	0	2	50	0	0	2	33.3
3 Moderate Distress	0	0	1	25	0	0	1	16.7
4 High Distress	2	100	1	25	0	0	3	50.0
Valid responses =	2	33	4	67	0	0	6	15.4

Invalid responses include no response.

**47B7) Within the last 12 months, to what extent did the following issue(s) cause you distress? (only includes students that had problems or challenges with this issue within the last 12 months) Intimate relationships**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	1	11	0	0	1	8.3
2 Minimal Distress	0	0	4	44	0	0	4	33.3
3 Moderate Distress	0	0	2	22	0	0	2	16.7
4 High Distress	3	100	2	22	0	0	5	41.7
Valid responses =	3	25	9	75	0	0	12	30.8

Invalid responses include no response.

**47B8) Within the last 12 months, to what extent did the following issue(s) cause you distress? (only includes students that had problems or challenges with this issue within the last 12 months) Roommate/housemate**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	1	17	0	0	1	11.1
2 Minimal Distress	0	0	3	50	0	0	4	33.3
3 Moderate Distress	0	0	2	33	0	0	2	22.2
4 High Distress	3	100	0	0	0	0	3	33.3
Valid responses =	3	33	6	67	0	0	9	23.1

Invalid responses include no response.

**47B9) Within the last 12 months, to what extent did the following issue(s) cause you distress? (only includes students that had problems or challenges with this issue within the last 12 months) Peers**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	0	0	0	0	0	0.0
2 Minimal Distress	2	50	4	50	0	0	6	50.0
3 Moderate Distress	1	25	3	38	0	0	4	33.3
4 High Distress	1	25	1	13	0	0	2	16.7
Valid responses =	4	33	8	67	0	0	12	30.8

Invalid responses include no response.

**47B10) Within the last 12 months, to what extent did the following issue(s) cause you distress? (only includes students that had problems or challenges with this issue within the last 12 months) Personal appearance**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	1	20	1	8	0	0	2	11.8
2 Minimal Distress	3	60	5	42	0	0	8	47.1
3 Moderate Distress	0	0	4	33	0	0	4	23.5
4 High Distress	1	20	2	17	0	0	3	17.6
Valid responses =	5	29	12	71	0	0	17	43.6

Invalid responses include no response.

**47B11) Within the last 12 months, to what extent did the following issue(s) cause you distress? (only includes students that had problems or challenges with this issue within the last 12 months) Health of someone close to me**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	1	25	0	0	0	0	1	7.7
2 Minimal Distress	1	25	4	44	0	0	5	38.5
3 Moderate Distress	1	25	1	11	0	0	2	15.4
4 High Distress	1	25	4	44	0	0	5	38.5
Valid responses =	4	31	9	69	0	0	13	33.3

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

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**47B12) Within the last 12 months, to what extent did the following issue(s) cause you distress?**

(only includes students that had problems or challenges with this issue within the last 12 months)

Death of a family member, friend, or someone close to me

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	1	11	0	0	1	10.0
2 Minimal Distress	0	0	3	33	0	0	3	30.0
3 Moderate Distress	0	0	1	11	0	0	1	10.0
4 High Distress	1	100	4	44	0	0	5	50.0
Valid responses =	1	10	9	90	0	0	10	25.6

Invalid responses include no response.

**47B13) Within the last 12 months, to what extent did the following issue(s) cause you distress?**

(only includes students that had problems or challenges with this issue within the last 12 months)

Bullying (for example: making threats, spreading rumors, physical or verbal attacks, or excluding someone from a group)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	0	0	0	0	0	0.0
2 Minimal Distress	1	50	1	50	0	0	2	50.0
3 Moderate Distress	0	0	0	0	0	0	0	0.0
4 High Distress	1	50	1	50	0	0	2	50.0
Valid responses =	2	50	2	50	0	0	4	10.3

Invalid responses include no response.

**47B14) Within the last 12 months, to what extent did the following issue(s) cause you distress?**

(only includes students that had problems or challenges with this issue within the last 12 months)

Cyberbullying (use of technology to harass, threaten, embarrass, or target another person)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	0	0	0	0	0	0.0
2 Minimal Distress	0	0	1	50	0	0	1	33.3
3 Moderate Distress	0	0	0	0	0	0	0	0.0
4 High Distress	1	100	1	50	0	0	2	66.7
Valid responses =	1	33	2	67	0	0	3	7.7

Invalid responses include no response.

**47B15) Within the last 12 months, to what extent did the following issue(s) cause you distress?**

(only includes students that had problems or challenges with this issue within the last 12 months)

Hazing (rituals, challenges, and other activities involving harassment, abuse, embarrassment, ridicule, or humiliation used as a way of initiating a person into a group)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	1	50	0	0	0	0	1	33.3
2 Minimal Distress	0	0	1	100	0	0	1	33.3
3 Moderate Distress	0	0	0	0	0	0	0	0.0
4 High Distress	1	50	0	0	0	0	1	33.3
Valid responses =	2	67	1	33	0	0	3	7.7

Invalid responses include no response.

**47B16) Within the last 12 months, to what extent did the following issue(s) cause you distress?**

(only includes students that had problems or challenges with this issue within the last 12 months)

Microaggression (a subtle but offensive comment or action directed at a minority or other non-dominant group, whether intentional or unintentional, that reinforces a stereotype)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	1	50	0	0	0	0	1	33.3
2 Minimal Distress	0	0	0	0	0	0	0	0.0
3 Moderate Distress	0	0	0	0	0	0	0	0.0
4 High Distress	1	50	1	100	0	0	2	66.7
Valid responses =	2	67	1	33	0	0	3	7.7

Invalid responses include no response.

**47B17) Within the last 12 months, to what extent did the following issue(s) cause you distress?**

(only includes students that had problems or challenges with this issue within the last 12 months)

Sexual Harassment (unwelcomed sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	1	50	0	0	0	0	1	25.0
2 Minimal Distress	0	0	0	0	0	0	0	0.0
3 Moderate Distress	0	0	1	50	0	0	1	25.0
4 High Distress	1	50	1	50	0	0	2	50.0
Valid responses =	2	50	2	50	0	0	4	10.3

Invalid responses include no response.



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**47B18) Within the last 12 months, to what extent did the following issue(s) cause you distress?**

(only includes students that had problems or challenges with this issue within the last 12 months)

**Discrimination (the unjust or prejudicial treatment of a person based on the group, class, or category to which the person is perceived to belong**

**Trans/Gender**

**Cis Men**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No Distress	0	0	0	0	0	0	0	0.0
2 Minimal Distress	0	0	0	0	0	0	0	0.0
3 Moderate Distress	0	0	0	0	0	0	0	0.0
4 High Distress	1	100	0	0	0	0	1	100.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

**47C2) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Career**

**Cis Men**

**Trans/Gender**

**Cis Women**

**Non-conforming**

**Total**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not affect academic performance	0	0	1	50	0	0	1	25.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	2	100	1	50	0	0	3	75.0
Valid responses =	2	50	2	50	0	0	4	10.3

Invalid responses include no response.

**47C3) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Finances**

**Cis Men**

**Trans/Gender**

**Cis Women**

**Non-conforming**

**Total**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not affect academic performance	4	80	6	67	0	0	10	71.4
2 Negatively impacted performance in a class	0	0	2	22	0	0	2	14.3
3 Delayed progress towards degree	1	20	1	11	0	0	2	14.3
Valid responses =	5	36	9	64	0	0	14	35.9

Invalid responses include no response.

**47C4) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Procrastination**

**Cis Men**

**Trans/Gender**

**Cis Women**

**Non-conforming**

**Total**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not affect academic performance	0	0	7	47	0	0	7	35.0
2 Negatively impacted performance in a class	4	80	6	40	0	0	10	50.0
3 Delayed progress towards degree	1	20	2	13	0	0	3	15.0
Valid responses =	5	25	15	75	0	0	20	51.3

Invalid responses include no response.

**47C5) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Faculty**

**Cis Men**

**Trans/Gender**

**Cis Women**

**Non-conforming**

**Total**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not affect academic performance	1	33	0	0	0	0	1	25.0
2 Negatively impacted performance in a class	1	33	1	100	0	0	2	50.0
3 Delayed progress towards degree	1	33	0	0	0	0	1	25.0
Valid responses =	3	75	1	25	0	0	4	10.3

Invalid responses include no response.

**47C6) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Family**

**Cis Men**

**Trans/Gender**

**Cis Women**

**Non-conforming**

**Total**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not affect academic performance	0	0	3	75	0	0	3	50.0
2 Negatively impacted performance in a class	1	50	0	0	0	0	1	16.7
3 Delayed progress towards degree	1	50	1	25	0	0	2	33.3
Valid responses =	2	33	4	67	0	0	6	15.4

Invalid responses include no response.



47C7) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)

Intimate relationships

Table with columns: Cis Men, Trans/Gender (Cis Women, Non-conforming), Total. Rows: 1 Did not affect academic performance, 2 Negatively impacted performance in a class, 3 Delayed progress towards degree, Valid responses =.

Invalid responses include no response.

47C8) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months) Roommate/housemate

Table with columns: Cis Men, Trans/Gender (Cis Women, Non-conforming), Total. Rows: 1 Did not affect academic performance, 2 Negatively impacted performance in a class, 3 Delayed progress towards degree, Valid responses =.

Invalid responses include no response.

47C9) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)

Peers

Table with columns: Cis Men, Trans/Gender (Cis Women, Non-conforming), Total. Rows: 1 Did not affect academic performance, 2 Negatively impacted performance in a class, 3 Delayed progress towards degree, Valid responses =.

Invalid responses include no response.

47C10) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)

Personal appearance

Trans/Gender

Table with columns: Cis Men, Cis Women, Non-conforming, Total. Rows: 1 Did not affect academic performance, 2 Negatively impacted performance in a class, 3 Delayed progress towards degree, Valid responses =.

Invalid responses include no response.

47C11) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)

Health of someone close to me

Trans/Gender

Table with columns: Cis Men, Cis Women, Non-conforming, Total. Rows: 1 Did not affect academic performance, 2 Negatively impacted performance in a class, 3 Delayed progress towards degree, Valid responses =.

Invalid responses include no response.

47C12) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)

Death of a family member, friend, or someone close to me

Table with columns: Cis Men, Trans/Gender (Cis Women, Non-conforming), Total. Rows: 1 Did not affect academic performance, 2 Negatively impacted performance in a class, 3 Delayed progress towards degree, Valid responses =.

Invalid responses include no response.



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**47C13) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Bullying (for example: making threats, spreading rumors, physical or verbal attacks, or excluding someone from a group)**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not affect academic performance	1	50	1	50	0	0	2	50.0
2 Negatively impacted performance in a class	0	0	1	50	0	0	1	25.0
3 Delayed progress towards degree	1	50	0	0	0	0	1	25.0
Valid responses =	2	50	2	50	0	0	4	10.3

Invalid responses include no response.

**47C14) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Cyberbullying (use of technology to harass, threaten, embarrass, or target another person)**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not affect academic performance	0	0	0	0	0	0	0	0.0
2 Negatively impacted performance in a class	0	0	1	50	0	0	1	33.3
3 Delayed progress towards degree	1	100	1	50	0	0	2	66.7
Valid responses =	1	33	2	67	0	0	3	7.7

Invalid responses include no response.

**47C15) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Hazing (rituals, challenges, and other activities involving harassment, abuse, embarrassment, ridicule, or humiliation used as a way of initiating a person into a group)**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not affect academic performance	1	50	1	100	0	0	2	66.7
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	1	50	0	0	0	0	1	33.3
Valid responses =	2	67	1	33	0	0	3	7.7

Invalid responses include no response.

**47C16) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Microaggression (a subtle but offensive comment or action directed at a minority or other non-dominant group, whether intentional or unintentional, that reinforces a stereotype) Discrimination (the unjust or prejudicial treatment of a person based on the group, class, or category to which the person is perceived to belong.)**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not affect academic performance	1	50	0	0	0	0	1	33.3
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	1	50	1	100	0	0	2	66.7
Valid responses =	2	67	1	33	0	0	3	7.7

Invalid responses include no response.

**47C17) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Sexual Harassment (unwelcomed sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature)**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not affect academic performance	1	50	2	100	0	0	3	75.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	1	50	0	0	0	0	1	25.0
Valid responses =	2	50	2	50	0	0	4	10.3

Invalid responses include no response.

**47C18) Within the last 12 months, to what extent did the following issue(s) negatively affect your academic performance? (only includes students that had problems or challenges with this issue within the last 12 months)**

**Discrimination**

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not affect academic performance	0	0	0	0	0	0	0	0.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	1	100	0	0	0	0	1	100.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.





# AMERICAN COLLEGE HEALTH ASSOCIATION

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[www.acha.org](http://www.acha.org)

## 48) Within the last 30 days, how would you rate the overall level of stress you have experienced?

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No stress	1	10	1	4	0	0	2	5.6
2 Low	4	40	3	12	0	0	7	19.4
3 Moderate	3	30	15	58	0	0	18	50.0
4 High	2	20	7	27	0	0	9	25.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 49) Have you ever thought about or attempted to kill yourself?

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Never	7	70	21	81	0	0	28	77.8
2 Just a brief passing thought	1	10	4	15	0	0	5	13.9
3 Planned at least once, but did not try to do it	1	10	0	0	0	0	1	2.8
4 Planned at least once, wanted to die	0	0	0	0	0	0	0	0.0
5 Attempted, but did not want to die	1	10	0	0	0	0	1	2.8
6 Attempted, really hoped to die	0	0	1	4	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 50) How often have you thought about killing yourself in the past year?

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Never	8	80	20	77	0	0	28	77.8
2 Rarely (1 time)	1	10	4	15	0	0	5	13.9
3 Sometimes (2 times)	0	0	1	4	0	0	1	2.8
4 Often (3-4 times)	0	0	1	4	0	0	1	2.8
5 Very often (5 or more times)	1	10	0	0	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 51) Have you ever told someone that you were going to commit suicide, or that you might do it?

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	9	90	22	85	0	0	31	86.1
2 Yes, one time, did not want to die	0	0	4	15	0	0	4	11.1
3 Yes, one time, wanted to die	0	0	0	0	0	0	0	0.0
4 Yes, more than once, did not want to do it	0	0	0	0	0	0	0	0.0
5 Yes, more than once, wanted to do it	1	10	0	0	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 52) How likely is it that you will attempt suicide someday?

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Never	9	90	21	81	0	0	30	83.3
1 No chance at all	0	0	4	15	0	0	4	11.1
2 Rather unlikely	0	0	1	4	0	0	1	2.8
3 Unlikely	1	10	0	0	0	0	1	2.8
4 Likely	0	0	0	0	0	0	0	0.0
5 Rather likely	0	0	0	0	0	0	0	0.0
6 Very likely	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 53) Within the last 12 months, have you attempted suicide?

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	10	100	24	96	0	0	34	97.1
2 Yes	0	0	1	4	0	0	1	2.9
Valid responses =	10	29	25	71	0	0	35	89.7

Invalid responses include no response.

## 54A) Have you ever received psychological or mental health services?

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	7	70	17	65	0	0	24	66.7
2 Yes	3	30	9	35	0	0	12	33.3
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.



54B) Within the last 12 months, have you received psychological or mental health services?

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
Freq.	Pct.	Freq.	Pct.	Freq.				
1 No	8	80	22	85	0	0	30	83.3
2 Yes	2	20	4	15	0	0	6	16.7
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

55A) Within the last 12 months, have you visited any medical provider (for example: a nurse practitioner, physician assistant, primary care doctor, or other type of medical doctor) for a check-up or any other medical reasons?

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
Freq.	Pct.	Freq.	Pct.	Freq.				
1 No	4	40	7	27	0	0	11	30.6
2 Yes	6	60	19	73	0	0	25	69.4
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

MH1) Have you ever been prescribed medication for a mental health condition?

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
Freq.	Pct.	Freq.	Pct.	Freq.				
1 No	7	70	20	77	0	0	27	75.0
2 Yes	3	30	6	23	0	0	9	25.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

MH2) When were you first prescribed medication for a mental health condition? (only students that were ever prescribed medication for a mental health condition)

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
Freq.	Pct.	Freq.	Pct.	Freq.				
1 Before starting at your current college/university	3	100	5	83	0	0	8	88.9
2 After starting at your current college/university	0	0	1	17	0	0	1	11.1
Valid responses =	3	33	6	67	0	0	9	23.1

Invalid responses include no response.

MH3) Were you prescribed medication for a mental health condition in the last 12 months? (only students that were ever prescribed medication for a mental health condition)

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
Freq.	Pct.	Freq.	Pct.	Freq.				
1 No	2	67	1	17	0	0	3	33.3
2 Yes	1	33	5	83	0	0	6	66.7
Valid responses =	3	33	6	67	0	0	9	23.1

Invalid responses include no response.

MH4) Have you ever had counseling for a mental health condition?

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
Freq.	Pct.	Freq.	Pct.	Freq.				
1 No	8	80	22	85	0	0	30	83.3
2 Yes	2	20	4	15	0	0	6	16.7
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

MH5) When did you first start counseling for a mental health condition? (only students that have ever had counseling for a mental health condition)

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
Freq.	Pct.	Freq.	Pct.	Freq.				
1 Before starting at your current college/university	2	100	4	100	0	0	6	100.0
2 After starting at your current college/university	0	0	0	0	0	0	0	0.0
Valid responses =	2	33	4	67	0	0	6	15.4

Invalid responses include no response.

MH6) Have you had counseling for a mental health condition in the last 12 months? (only students that have ever had counseling for a mental health condition)

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
Freq.	Pct.	Freq.	Pct.	Freq.				
1 No	2	100	2	50	0	0	4	66.7
2 Yes	0	0	2	50	0	0	2	33.3
Valid responses =	2	33	4	67	0	0	6	15.4

Invalid responses include no response.



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### 56) Have you had a gynecologic visit or exam (for example: contraception, STI testing, pelvic exam, or pap test) with a healthcare provider (for example: OB-GYN, nurse practitioner, or physician assistant)?

Trans/Gender	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
Cis Men								
1 No	8	80	16	62	0	0	24	66.7
2 Yes	0	0	7	27	0	0	7	19.4
3 Don't know	0	0	3	12	0	0	3	8.3
4 Not applicable	2	20	0	0	0	0	2	5.6
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 57) Have you had a dental exam and cleaning in the last 12 months?

Trans/Gender	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
Cis Men								
1 No	5	50	4	15	0	0	9	25.0
2 Yes	5	50	22	85	0	0	27	75.0
3 Don't know	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 58) When you are outdoors in the sun, how often do you wear sunscreen?

Trans/Gender	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
Cis Men								
1 Never	3	30	3	12	0	0	6	16.7
2 Rarely	3	30	4	15	0	0	7	19.4
3 Sometimes	2	20	9	35	0	0	11	30.6
4 Usually	1	10	8	31	0	0	9	25.0
5 Always	1	10	2	8	0	0	3	8.3
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 59A) When you are outdoors in the sun, how often do you do the following to protect your skin from ultraviolet (UV) exposure? Wear a shirt with sleeves

Trans/Gender	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
Cis Men								
1 Never	3	30	3	12	0	0	6	16.7
2 Rarely	2	20	13	50	0	0	15	41.7
3 Sometimes	1	10	6	23	0	0	7	19.4
4 Usually	3	30	3	12	0	0	6	16.7
5 Always	1	10	1	4	0	0	2	5.6
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 59B) When you are outdoors in the sun, how often do you do the following to protect your skin from ultraviolet (UV) exposure? Wear sunglasses

Trans/Gender	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
Cis Men								
1 Never	0	0	3	12	0	0	3	8.3
2 Rarely	3	30	2	8	0	0	5	13.9
3 Sometimes	3	30	4	15	0	0	7	19.4
4 Usually	2	20	11	42	0	0	13	36.1
5 Always	2	20	6	23	0	0	8	22.2
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 59C) When you are outdoors in the sun, how often do you do the following to protect your skin from ultraviolet (UV) exposure? Stay in the shade

Trans/Gender	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
Cis Men								
1 Never	2	20	2	8	0	0	4	11.1
2 Rarely	0	0	3	12	0	0	3	8.3
3 Sometimes	5	50	13	50	0	0	18	50.0
4 Usually	3	30	4	15	0	0	7	19.4
5 Always	0	0	4	15	0	0	4	11.1
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.



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**59D) When you are outdoors in the sun, how often do you do the following to protect your skin from ultraviolet (UV) exposure? Wear a hat**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
1 Never	2	20	5	19	0	0	7	19.4
2 Rarely	0	0	6	23	0	0	6	16.7
3 Sometimes	3	30	10	39	0	0	13	36.1
4 Usually	1	10	4	15	0	0	5	13.9
5 Always	4	40	1	4	0	0	5	13.9
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**60) In the last 12 months, how many times have you spent time outdoors with the intention of getting a tan?**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
0 0 times	4	44	8	31	0	0	12	34.3
1 1 time	1	11	1	4	0	0	2	5.7
2 2 times	0	0	0	0	0	0	0	0.0
3 3 times	1	11	1	4	0	0	2	5.7
4 4 times	1	11	3	12	0	0	4	11.4
5 5 times	0	0	1	4	0	0	1	2.9
6 6 to 10 times	2	22	1	4	0	0	3	8.6
7 11 to 15 times	0	0	1	4	0	0	1	2.9
8 16 to 20 times	0	0	3	12	0	0	3	8.6
9 21 to 49 times	0	0	4	15	0	0	4	11.4
10 50 or More times	0	0	3	12	0	0	3	8.6
Valid responses =	9	26	26	74	0	0	35	89.7

Invalid responses include no response.

	Mean	Median	Std Dev	Min	Max
Cis Men	2.78	1.00	3.63	0	10
Cis Women	15.50	5.00	18.82	0	60
Trans/Gender Non-conforming	.	.	.	.	.
Overall	12.23	4.00	17.19	0	60

**61) The Human Papillomavirus (HPV) vaccine (for example: Gardasil, Silgard, or Cervarix) is recommended, but usually not required, and is given in a series of 2 or 3 shots based on your age. Which of the following best describes your vaccination status for HPV:**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
1 Have not received HPV vaccine	3	30	4	15	0	0	7	19.4
2 Have started, but not completed HPV vaccine	1	10	1	4	0	0	2	5.6
3 Completed HPV vaccine	4	40	9	35	0	0	13	36.1
4 I don't know my HPV vaccination status	2	20	12	46	0	0	14	38.9
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**62) Did you have a flu vaccine within the last 12 months?**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
1 No	4	40	13	50	0	0	17	47.2
2 Yes	6	60	11	42	0	0	17	47.2
3 Don't know	0	0	2	8	0	0	2	5.6
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**COVIDVAXD) Have you received at least one dose of a COVID-19 vaccine?**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
1 No	2	20	6	23	0	0	8	22.2
2 Yes	8	80	19	73	0	0	27	75.0
3 Not sure	0	0	1	4	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**COVIDVAXE) Have you received a COVID-19 vaccine in the last 12 months? (only students that have received at least one dose of a COVID-19 vaccine)**

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
1 No	5	63	12	63	0	0	17	63.0
2 Yes	3	38	5	26	0	0	8	29.6
3 Not sure	0	0	2	11	0	0	2	7.4
Valid responses =	8	30	19	70	0	0	27	69.2

Invalid responses include no response.



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## COVIDINF Have you tested positive for COVID-19 within the last 12 months?

Cis Men

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 No	8	80	21	81	0	0	29	80.6
2 Yes	2	20	5	19	0	0	7	19.4
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 63A1) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following?

Bronchitis

Cis Men

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 63A2) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following?

Chlamydia

Cis Men

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 63A3) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following?

Chicken Pox (Varicella)

Cis Men

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 63A4) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following?

Cold/virus or other respiratory illness (for example: sinus infection, ear infection, strep throat, tonsillitis, pharyngitis, or laryngitis)

Trans/Gender

Cis Men

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 No	6	60	17	65	0	0	23	63.9
2 Yes	4	40	9	35	0	0	13	36.1
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

### 63A5) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following?

#### Concussion

	Cis Men	Trans/Gender						Total		
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.	
		Freq.	Pct.	Freq.	Pct.					
1 No		9	90	23	89	0	0	32	88.9	
2 Yes		1	10	3	12	0	0	4	11.1	
Valid responses =		10	28	26	72	0	0	36	92.3	

Invalid responses include no response.

### 63A6) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following?

#### Gonorrhea

	Cis Men	Trans/Gender						Total		
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.	
		Freq.	Pct.	Freq.	Pct.					
1 No		10	100	26	100	0	0	36	100.0	
2 Yes		0	0	0	0	0	0	0	0.0	
Valid responses =		10	28	26	72	0	0	36	92.3	

Invalid responses include no response.

### 63A7) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following? Flu

#### (influenza) or flu-like illness

	Cis Men	Trans/Gender						Total		
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.	
		Freq.	Pct.	Freq.	Pct.					
1 No		8	80	21	81	0	0	29	80.6	
2 Yes		2	20	5	19	0	0	7	19.4	
Valid responses =		10	28	26	72	0	0	36	92.3	

Invalid responses include no response.

### 63A8) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following? Mumps

	Cis Men	Trans/Gender						Total		
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.	
		Freq.	Pct.	Freq.	Pct.					
1 No		10	100	25	100	0	0	35	100.0	
2 Yes		0	0	0	0	0	0	0	0.0	
Valid responses =		10	29	25	71	0	0	35	89.7	

Invalid responses include no response.

### 63A9) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following?

#### Mononucleosis (mono)

	Cis Men	Trans/Gender						Total		
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.	
		Freq.	Pct.	Freq.	Pct.					
1 No		10	100	26	100	0	0	36	100.0	
2 Yes		0	0	0	0	0	0	0	0.0	
Valid responses =		10	28	26	72	0	0	36	92.3	

Invalid responses include no response.

### 63A10) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following?

#### Orthopedic injury (for example: broken bone, fracture, sprain, bursitis, tendinitis, or ligament injury)

	Cis Men	Trans/Gender						Total		
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.	
		Freq.	Pct.	Freq.	Pct.					
1 No		9	90	21	81	0	0	30	83.3	
2 Yes		1	10	5	19	0	0	6	16.7	
Valid responses =		10	28	26	72	0	0	36	92.3	

Invalid responses include no response.

### 63A11) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following? Pelvic

#### Inflammatory Disease

	Cis Men	Trans/Gender						Total		
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.	
		Freq.	Pct.	Freq.	Pct.					
1 No		10	100	26	100	0	0	36	100.0	
2 Yes		0	0	0	0	0	0	0	0.0	
Valid responses =		10	28	26	72	0	0	36	92.3	

Invalid responses include no response.

### 63A12) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following?

#### Pneumonia

	Cis Men	Trans/Gender						Total		
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.	
		Freq.	Pct.	Freq.	Pct.					
1 No		9	100	25	100	0	0	34	100.0	
2 Yes		0	0	0	0	0	0	0	0.0	
Valid responses =		9	26	25	74	0	0	34	87.2	

Invalid responses include no response.



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### 63A13) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following?

#### Shingles

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 63A14) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following?

#### Stomach or GI virus or bug, food poisoning, or gastritis

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	10	100	25	96	0	0	35	97.2
2 Yes	0	0	1	4	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 63A15) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following?

#### Urinary tract infection

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	10	100	21	81	0	0	31	86.1
2 Yes	0	0	5	19	0	0	5	13.9
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 63A16) Within the last 12 months, have you been diagnosed by a healthcare professional with any of the following? Other

#### short-term, temporary illness not listed above

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	8	89	22	96	0	0	30	93.8
2 Yes	1	11	1	4	0	0	2	6.3
Valid responses =	9	28	23	72	0	0	32	82.1

Invalid responses include no response.

### 63B1) Within the last 12 months, to what extent did the following negatively affect your academic performance?

(only includes students who have been diagnosed within the last 12 months)

#### Bronchitis

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 Did not affect academic performance	0	0	0	0	0	0	0	0.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

### 63B2) Within the last 12 months, to what extent did the following negatively affect your academic performance?

(only includes students who have been diagnosed within the last 12 months)

#### Chlamydia

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 Did not affect academic performance	0	0	0	0	0	0	0	0.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

### 63B3) Within the last 12 months, to what extent did the following negatively affect your academic performance?

(only includes students who have been diagnosed within the last 12 months)

#### Chicken Pox (Varicella)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 Did not affect academic performance	0	0	0	0	0	0	0	0.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



**63B4) Within the last 12 months, to what extent did the following negatively affect your academic performance?**

**(only includes students who have been diagnosed within the last 12 months)**

**Cold/virus or other respiratory illness (for example: sinus infection, ear infection, strep throat, tonsillitis, pharyngitis, or laryngitis)**

**Trans/Gender**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 Did not affect academic performance	3	75	7	78	0	0	10	76.9
2 Negatively impacted performance in a class	1	25	2	22	0	0	3	23.1
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	4	31	9	69	0	0	13	33.3

Invalid responses include no response.

**63B5) Within the last 12 months, to what extent did the following negatively affect your academic performance?**

**(only includes students who have been diagnosed within the last 12 months)**

**Concussion**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 Did not affect academic performance	1	100	0	0	0	0	1	25.0
2 Negatively impacted performance in a class	0	0	3	100	0	0	3	75.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	1	25	3	75	0	0	4	10.3

Invalid responses include no response.

**63B6) Within the last 12 months, to what extent did the following negatively affect your academic performance?**

**(only includes students who have been diagnosed within the last 12 months)**

**Gonorrhea**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 Did not affect academic performance	0	0	0	0	0	0	0	0.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**63B7) Within the last 12 months, to what extent did the following negatively affect your academic performance?**

**(only includes students who have been diagnosed within the last 12 months)**

**Flu (influenza) or flu-like illness**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 Did not affect academic performance	2	100	4	80	0	0	6	85.7
2 Negatively impacted performance in a class	0	0	1	20	0	0	1	14.3
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	2	29	5	71	0	0	7	17.9

Invalid responses include no response.

**63B8) Within the last 12 months, to what extent did the following negatively affect your academic performance?**

**(only includes students who have been diagnosed within the last 12 months)**

**Mumps**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 Did not affect academic performance	0	0	0	0	0	0	0	0.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**63B9) Within the last 12 months, to what extent did the following negatively affect your academic performance?**

**(only includes students who have been diagnosed within the last 12 months)**

**Mononucleosis (mono)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 Did not affect academic performance	0	0	0	0	0	0	0	0.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.





63B10) Within the last 12 months, to what extent did the following negatively affect your academic performance? (only

includes students who have been diagnosed within the last 12 months)

Orthopedic injury (for example: broken bone, fracture, sprain, bursitis, tendinitis, or ligament injury)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 Did not affect academic performance	0	0	5	100	0	0	5	83.3
2 Negatively impacted performance in a class	1	100	0	0	0	0	1	16.7
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	1	17	5	83	0	0	6	15.4

Invalid responses include no response.

63B11) Within the last 12 months, to what extent did the following negatively affect your academic performance? (only

includes students who have been diagnosed within the last 12 months)

Pelvic Inflammatory Disease

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 Did not affect academic performance	0	0	0	0	0	0	0	0.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

63B12) Within the last 12 months, to what extent did the following negatively affect your academic performance? (only

includes students who have been diagnosed within the last 12 months)

Pneumonia

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 Did not affect academic performance	0	0	0	0	0	0	0	0.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

63B13) Within the last 12 months, to what extent did the following negatively affect your academic performance? (only

includes students who have been diagnosed within the last 12 months)

Shingles

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 Did not affect academic performance	0	0	0	0	0	0	0	0.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

63B14) Within the last 12 months, to what extent did the following negatively affect your academic performance? (only

includes students who have been diagnosed within the last 12 months)

Stomach or GI virus or bug, food poisoning, or gastritis

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 Did not affect academic performance	0	0	1	100	0	0	1	100.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

63B15) Within the last 12 months, to what extent did the following negatively affect your academic performance? (only

includes students who have been diagnosed within the last 12 months)

Urinary tract infection

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 Did not affect academic performance	0	0	5	100	0	0	5	100.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	5	100	0	0	5	12.8

Invalid responses include no response.



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**63B16) Within the last 12 months, to what extent did the following negatively affect your academic performance? (only includes students who have been diagnosed within the last 12 months)**  
Other short-term, temporary illness not listed above

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 Did not affect academic performance	1	100	1	100	0	0	2	100.0
2 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
3 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.

**64) Have you ever been tested for HIV?**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 Yes, within the last 12 months	0	0	3	12	0	0	3	8.3
2 Yes, more than 12 months ago	0	0	2	8	0	0	2	5.6
3 No	9	90	17	65	0	0	26	72.2
4 Unsure	1	10	4	15	0	0	5	13.9
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**64B) Are you taking PrEP (Pre-Exposure Prophylaxis) to prevent HIV infection?**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A1) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? Acne**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	7	70	21	81	0	0	28	77.8
2 Yes	3	30	5	19	0	0	8	22.2
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A2) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? ADD/ADHD - Attention Deficit/Hyperactivity Disorder**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	8	80	21	84	0	0	29	82.9
2 Yes	2	20	4	16	0	0	6	17.1
Valid responses =	10	29	25	71	0	0	35	89.7

Invalid responses include no response.

**65A3) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? Alcohol or Other Drug-Related Abuse or Addiction**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A4) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? Allergies - food allergy**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	9	90	22	88	0	0	31	88.6
2 Yes	1	10	3	12	0	0	4	11.4
Valid responses =	10	29	25	71	0	0	35	89.7

Invalid responses include no response.

**65A5) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? Allergies - animals/pets**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	9	90	25	96	0	0	34	94.4
2 Yes	1	10	1	4	0	0	2	5.6
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.



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**65A6) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Allergies - environmental (for example: pollen, grass, dust, mold)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	6	60	21	81	0	0	27	75.0
2 Yes	4	40	5	19	0	0	9	25.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A7) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Anxiety (for example: Generalized Anxiety, Social Anxiety, Panic Disorder, Specific Phobia)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	8	80	21	81	0	0	29	80.6
2 Yes	2	20	5	19	0	0	7	19.4
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A8) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Asthma**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	9	90	21	81	0	0	30	83.3
2 Yes	1	10	5	19	0	0	6	16.7
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A9) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Autism spectrum**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	9	90	24	96	0	0	33	94.3
2 Yes	1	10	1	4	0	0	2	5.7
Valid responses =	10	29	25	71	0	0	35	89.7

Invalid responses include no response.

**65A10) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Bipolar and Related Conditions (for example: Bipolar I, II, Hypomanic Episode)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	9	90	26	100	0	0	35	97.2
2 Yes	1	10	0	0	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A11) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Borderline Personality Disorder (BPD), Avoidant Personality, Dependent Personality, or another personality disorder**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A12) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Cancer**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A13) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Celiac disease**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.



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65A14) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?

Chronic pain (for example: back or joint pain, arthritis, nerve pain)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	8	80	24	92	0	0	32	88.9
2 Yes	2	20	2	8	0	0	4	11.1
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

65A15) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?

Depression (for example: Major depression, persistent depressive disorder, disruptive mood disorder)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	8	80	22	85	0	0	30	83.3
2 Yes	2	20	4	15	0	0	6	16.7
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

65A16) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?

Diabetes or pre-diabetes/insulin resistance

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	9	90	24	92	0	0	33	91.7
2 Yes	1	10	2	8	0	0	3	8.3
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

65A17) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?

Eating Disorders (for example: Anorexia Nervosa, Bulimia Nervosa, Binge-Eating)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	10	100	25	96	0	0	35	97.2
2 Yes	0	0	1	4	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

65A18) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?

Endometriosis

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	10	100	25	96	0	0	35	97.2
2 Yes	0	0	1	4	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

65A19) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?

Gambling Disorder

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

65A20) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?

Genital herpes

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

65A21) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?

Gastroesophageal Reflux Disease (GERD) or acid reflux

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	9	90	26	100	0	0	35	97.2
2 Yes	1	10	0	0	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.



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**65A22) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Heart & vascular disorders (for example: atrial fibrillation or other cardiac arrhythmia, mitral valve prolapse or other valvular heart disease, congenital heart condition)**

Trans/Gender	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A23) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Hepatitis B or C**

Trans/Gender	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A24) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
High blood pressure (hypertension)**

Trans/Gender	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	10	100	25	96	0	0	35	97.2
2 Yes	0	0	1	4	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A25) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
High cholesterol (hyperlipidemia)**

Trans/Gender	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A26) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? HIV or AIDS**

Trans/Gender	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A27) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Human papillomavirus (HPV) or genital warts**

Trans/Gender	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A28) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Insomnia**

Trans/Gender	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	9	90	24	92	0	0	33	91.7
2 Yes	1	10	2	8	0	0	3	8.3
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A29) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Irritable bowel syndrome (spastic colon or spastic bowel)**

Trans/Gender	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	10	100	25	96	0	0	35	97.2
2 Yes	0	0	1	4	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.



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## 65A41) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? Long COVID or having a Post-COVID Condition

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		10	100	26	100	0	0	36	100
2 Yes		0	0	0	0	0	0	0	0
Valid responses =		10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 65A30) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? Migraine headaches

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		9	90	22	85	0	0	31	86.1
2 Yes		1	10	4	15	0	0	5	13.9
Valid responses =		10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 65A31) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? Obsessive-Compulsive and Related Conditions (for example: OCD, Body Dysmorphia, Hoarding, Trichotillomania, other body-focused repetitive behavior disorders)

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		10	100	24	92	0	0	34	94.4
2 Yes		0	0	2	8	0	0	2	5.6
Valid responses =		10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 65A32) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? Polycystic Ovarian Syndrome (PCOS)

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		10	100	24	96	0	0	34	97.1
2 Yes		0	0	1	4	0	0	1	2.9
Valid responses =		10	29	25	71	0	0	35	89.7

Invalid responses include no response.

## 65A33) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? PTSD (Posttraumatic Stress Disorder), Acute Stress Disorder, Adjustment Disorder, or another trauma- or stressor-related condition

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		10	100	25	96	0	0	35	97.2
2 Yes		0	0	1	4	0	0	1	2.8
Valid responses =		10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 65A34) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? Schizophrenia and Other Psychotic Conditions (for example: Schizophrenia, Schizoaffective Disorder, Schizophreniform Disorder, Delusional Disorder)

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		10	100	25	100	0	0	35	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		10	29	25	71	0	0	35	89.7

Invalid responses include no response.

## 65A35) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions? Sleep Apnea

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		9	90	25	96	0	0	34	94.4
2 Yes		1	10	1	4	0	0	2	5.6
Valid responses =		10	28	26	72	0	0	36	92.3

Invalid responses include no response.



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**65A36) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Thyroid condition or disorder**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		10	100	26	100	0	0	36	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A37) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Tourette's or other neurodevelopmental condition not already listed**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		10	100	26	100	0	0	36	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A38) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Traumatic brain injury (TBI)**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		10	100	26	100	0	0	36	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A39) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Urinary system disorder (for example: bladder or kidney disease, urinary reflux, interstitial cystitis)**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		10	100	26	100	0	0	36	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**65A40) Have you ever been diagnosed by a healthcare or mental health professional with any of the following ongoing or chronic conditions?  
Other ongoing or chronic condition not listed above**

	Cis Men	Trans/Gender						Total Freq.	Total Pct.
		Cis Women		Non-conforming					
		Freq.	Pct.	Freq.	Pct.				
1 No		9	100	21	91	0	0	30	93.8
2 Yes		0	0	2	9	0	0	2	6.3
Valid responses =		9	28	23	72	0	0	32	82.1

Invalid responses include no response.

**65B1) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)  
Allergic & immunologic disorder**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		0	0	1	50	0	0	1	50.0
2 Yes		0	0	1	50	0	0	1	50.0
Valid responses =		0	0	2	100	0	0	2	5.1

Invalid responses include no response.

**65B2) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)  
Autoimmune disorder**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No		0	0	2	100	0	0	2	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	2	100	0	0	2	5.1

Invalid responses include no response.



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**65B3) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Blood disorder**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	1	50	0	0	1	50.0	
2 Yes	0	0	1	50	0	0	1	50.0	
Valid responses =	0	0	2	100	0	0	2	5.1	

Invalid responses include no response.

**65B4) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Brain & nervous system disorder**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	2	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	2	100	0	0	2	5.1	

Invalid responses include no response.

**65B5) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Hair, skin, nails disorder**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	2	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	2	100	0	0	2	5.1	

Invalid responses include no response.

**65B6) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Digestive system disorder**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	2	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	2	100	0	0	2	5.1	

Invalid responses include no response.

**65B7) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Endocrine system disorder**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	1	50	0	0	1	50.0	
2 Yes	0	0	1	50	0	0	1	50.0	
Valid responses =	0	0	2	100	0	0	2	5.1	

Invalid responses include no response.

**65B8) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Eye/ear/nose/throat disorder**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	2	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	2	100	0	0	2	5.1	

Invalid responses include no response.

**65B9) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Heart & vascular disorder**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	2	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	2	100	0	0	2	5.1	

Invalid responses include no response.





# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

**65B10) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Infectious disease**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No	0	0	2	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =		0	0	2	100	0	0	2	5.1

Invalid responses include no response.

**65B11) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Mental health/psychological disorder**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No	0	0	1	50	0	0	1	50.0	
2 Yes	0	0	1	50	0	0	1	50.0	
Valid responses =		0	0	2	100	0	0	2	5.1

Invalid responses include no response.

**65B12) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Musculoskeletal disorder**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No	0	0	2	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =		0	0	2	100	0	0	2	5.1

Invalid responses include no response.

**65B13) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Reproductive system disorder**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No	0	0	2	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =		0	0	2	100	0	0	2	5.1

Invalid responses include no response.

**65B14) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Respiratory disorder**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No	0	0	2	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =		0	0	2	100	0	0	2	5.1

Invalid responses include no response.

**65B15) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Sleep-wake disorder**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No	0	0	2	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =		0	0	2	100	0	0	2	5.1

Invalid responses include no response.

**65B16) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an other ongoing or chronic condition not listed above)**  
**Urinary system disorder**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No	0	0	2	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =		0	0	2	100	0	0	2	5.1

Invalid responses include no response.



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**65B17) Please indicate in which of the following categories you have an other ongoing or chronic condition that has been diagnosed by a healthcare or mental health professional. (only includes students that selected having an ongoing or chronic condition not listed above)**  
**Other ongoing or chronic condition not previously reported**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No		0	0	1	50	0	0	1	50.0
2 Yes		0	0	1	50	0	0	1	50.0
Valid responses =		0	0	2	100	0	0	2	5.1

Invalid responses include no response.

**65C1) Have you ever been diagnosed with any of the following ongoing or chronic allergic & immunologic disorders? (only includes students that selected having an ongoing/chronic allergic & immunologic disorder not listed above)**  
**Anaphylaxis**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No		0	0	1	100	0	0	1	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65C2) Have you ever been diagnosed with any of the following ongoing or chronic allergic & immunologic disorders? (only includes students that selected having an ongoing/chronic allergic & immunologic disorder not listed above)**  
**Medication allergy**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	1	100	0	0	1	100.0
Valid responses =		0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65C3) Have you ever been diagnosed with any of the following ongoing or chronic allergic & immunologic disorders? (only includes students that selected having an ongoing/chronic allergic & immunologic disorder not listed above)**  
**Latex allergy**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No		0	0	1	100	0	0	1	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65C4) Have you ever been diagnosed with any of the following ongoing or chronic allergic & immunologic disorders? (only includes students that selected having an ongoing/chronic allergic & immunologic disorder not listed above)**  
**Insect/bee sting allergy**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No		0	0	1	100	0	0	1	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65C5) Have you ever been diagnosed with any of the following ongoing or chronic allergic & immunologic disorders? (only includes students that selected having an ongoing/chronic allergic & immunologic disorder not listed above)**  
**Immune deficiency**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No		0	0	1	100	0	0	1	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65C6) Have you ever been diagnosed with any of the following ongoing or chronic allergic & immunologic disorders? (only includes students that selected having an ongoing/chronic allergic & immunologic disorder not listed above)**  
**Other allergic or immunologic condition not previously reported**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No		0	0	1	100	0	0	1	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	1	100	0	0	1	2.6

Invalid responses include no response.



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**65D1) Have you ever been diagnosed with any of the following ongoing or chronic autoimmune disorders?**  
**(only includes students that selected having an ongoing/chronic autoimmune disorder not listed above)** Other  
 allergic or immunologic condition

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65D2) Have you ever been diagnosed with any of the following ongoing or chronic autoimmune disorders?**  
**(only includes students that selected having an ongoing/chronic autoimmune disorder not listed above)**  
 Rheumatoid Arthritis

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65D3) Have you ever been diagnosed with any of the following ongoing or chronic autoimmune disorders?**  
**(only includes students that selected having an ongoing/chronic autoimmune disorder not listed above)**  
 Scleroderma

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65D4) Have you ever been diagnosed with any of the following ongoing or chronic autoimmune disorders?**  
**(only includes students that selected having an ongoing/chronic autoimmune disorder not listed above)**  
 Systemic Lupus Erythematosus

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65D5) Have you ever been diagnosed with any of the following ongoing or chronic autoimmune disorders?**  
**(only includes students that selected having an ongoing/chronic autoimmune disorder not listed above)** Other  
 autoimmune disorder not previously reported

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65E1) Have you ever been diagnosed with any of the following ongoing or chronic blood disorders?**  
**(only includes students that selected having an ongoing/chronic blood disorder not listed above)**  
 Anemia

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	1	100	0	0	1	100.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65E2) Have you ever been diagnosed with any of the following ongoing or chronic blood disorders?**  
**(only includes students that selected having an ongoing/chronic blood disorder not listed above)**  
 Hemophilia

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	1	100	0	0	1	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.



**65E3) Have you ever been diagnosed with any of the following ongoing or chronic blood disorders?**

**(only includes students that selected having an ongoing/chronic blood disorder not listed above)**

**Hypercoagulable states**

**Trans/Gender**

**Cis Men**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	1	100	0	0	1	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65E4) Have you ever been diagnosed with any of the following ongoing or chronic blood disorders?**

**(only includes students that selected having an ongoing/chronic blood disorder not listed above)**

**Platelet Conditions**

**Trans/Gender**

**Cis Men**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	1	100	0	0	1	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65E5) Have you ever been diagnosed with any of the following ongoing or chronic blood disorders?**

**(only includes students that selected having an ongoing/chronic blood disorder not listed above) Sickle**

**Cell Disease**

**Trans/Gender**

**Cis Men**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	1	100	0	0	1	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65E6) Have you ever been diagnosed with any of the following ongoing or chronic blood disorders?**

**(only includes students that selected having an ongoing/chronic blood disorder not listed above) Other blood condition not previously reported**

**Trans/Gender**

**Cis Men**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	1	100	0	0	1	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65F1) Have you ever been diagnosed with any of the following ongoing or chronic brain & nervous system disorders?**

**(only includes students that selected having an ongoing/chronic brain & nervous system disorder not listed above) Cerebral Palsy**

**Cis Men**

**Trans/Gender**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65F2) Have you ever been diagnosed with any of the following ongoing or chronic brain & nervous system disorders?**

**(only includes students that selected having an ongoing/chronic brain & nervous system disorder not listed above) Epilepsy**

**Cis Men**

**Trans/Gender**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65F3) Have you ever been diagnosed with any of the following ongoing or chronic brain & nervous system disorders?**

**(only includes students that selected having an ongoing/chronic brain & nervous system disorder not listed above) Seizure Conditions**

**Cis Men**

**Trans/Gender**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



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## 65F4) Have you ever been diagnosed with any of the following ongoing or chronic brain & nervous system disorders?

(only includes students that selected having an ongoing/chronic brain & nervous system disorder not listed above)

### Multiple Sclerosis

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 65F5) Have you ever been diagnosed with any of the following ongoing or chronic brain & nervous system disorders?

(only includes students that selected having an ongoing/chronic brain & nervous system disorder not listed above) Other brain or nervous system condition not previously reported

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 65G1) Have you ever been diagnosed with any of the following ongoing or chronic hair, skin, nail disorders?

(only includes students that selected having an ongoing/chronic hair, skin, nail disorder not listed above)

### Alopecia

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 65G2) Have you ever been diagnosed with any of the following ongoing or chronic hair, skin, nail disorders?

(only includes students that selected having an ongoing/chronic hair, skin, nail disorder not listed above)

### Eczema

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 65G3) Have you ever been diagnosed with any of the following ongoing or chronic hair, skin, nail disorders?

(only includes students that selected having an ongoing/chronic hair, skin, nail disorder not listed above)

### Hirsutism

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 65G4) Have you ever been diagnosed with any of the following ongoing or chronic hair, skin, nail disorders?

(only includes students that selected having an ongoing/chronic hair, skin, nail disorder not listed above)

### Hyperhidrosis

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 65G5) Have you ever been diagnosed with any of the following ongoing or chronic hair, skin, nail disorders?

(only includes students that selected having an ongoing/chronic hair, skin, nail disorder not listed above)

### Photodermatitis

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



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## 65G6) Have you ever been diagnosed with any of the following ongoing or chronic hair, skin, nail disorders?

(only includes students that selected having an ongoing/chronic hair, skin, nail disorder not listed above)

### Psoriasis

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 65G7) Have you ever been diagnosed with any of the following ongoing or chronic hair, skin, nail disorders?

(only includes students that selected having an ongoing/chronic hair, skin, nail disorder not listed above)

### Vitiligo

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 65G8) Have you ever been diagnosed with any of the following ongoing or chronic hair, skin, nail disorders?

(only includes students that selected having an ongoing/chronic hair, skin, nail disorder not listed above)

### Other hair, skin, or nail condition not previously reported

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 65H1) Have you ever been diagnosed with any of the following ongoing or chronic digestive system disorders?

(only includes students that selected having an ongoing/chronic digestive system disorder not listed above)

### Crohn's Disease

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 65H2) Have you ever been diagnosed with any of the following ongoing or chronic digestive system disorders?

(only includes students that selected having an ongoing/chronic digestive system disorder not listed above)

### Diverticular Disease

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 65H3) Have you ever been diagnosed with any of the following ongoing or chronic digestive system disorders?

(only includes students that selected having an ongoing/chronic digestive system disorder not listed above)

### Esophageal Disease

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 65H4) Have you ever been diagnosed with any of the following ongoing or chronic digestive system disorders?

(only includes students that selected having an ongoing/chronic digestive system disorder not listed above)

### Gallbladder Disease

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



**65H5) Have you ever been diagnosed with any of the following ongoing or chronic digestive system disorders?**

(only includes students that selected having an ongoing/chronic digestive system disorder not listed above)

**Ulcerative Colitis**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

**65H6) Have you ever been diagnosed with any of the following ongoing or chronic digestive system disorders?**

(only includes students that selected having an ongoing/chronic digestive system disorder not listed above) Other

**digestive system condition not previously reported**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

**65J1) Have you ever been diagnosed with any of the following ongoing or chronic eye, ear, nose, throat disorders?**

(only includes students that selected having an ongoing/chronic eye, ear, nose, throat disorder not listed above)

**Hearing loss**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

**65J2) Have you ever been diagnosed with any of the following ongoing or chronic eye, ear, nose, throat disorders?**

(only includes students that selected having an ongoing/chronic eye, ear, nose, throat disorder not listed above)

**Uveitis**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

**65J3) Have you ever been diagnosed with any of the following ongoing or chronic eye, ear, nose, throat disorders?**

(only includes students that selected having an ongoing/chronic eye, ear, nose, throat disorder not listed above)

**Vertigo**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

**65J4) Have you ever been diagnosed with any of the following ongoing or chronic eye, ear, nose, throat disorders?**

(only includes students that selected having an ongoing/chronic eye, ear, nose, throat disorder not listed above)

**Other eye/ear/nose/throat condition not previously reported**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

**65K1) Have you ever been diagnosed with any of the following ongoing or chronic heart & vascular system disorders?**

(only includes students that selected having an ongoing/chronic heart & vascular system disorder not listed above)

**Cardiac Arrhythmia**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

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8455 Colesville Road, Suite 740 Silver  
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DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

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(410) 859-1500

[www.acha.org](http://www.acha.org)

65K2) Have you ever been diagnosed with any of the following ongoing or chronic heart & vascular system disorders?

(only includes students that selected having an ongoing/chronic heart & vascular system disorder not listed above)

### Coronary Artery Disease

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65K3) Have you ever been diagnosed with any of the following ongoing or chronic heart & vascular system disorders?

(only includes students that selected having an ongoing/chronic heart & vascular system disorder not listed above)

### Congenital Heart Condition

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65K4) Have you ever been diagnosed with any of the following ongoing or chronic heart & vascular system disorders?

(only includes students that selected having an ongoing/chronic heart & vascular system disorder not listed above)

### Congestive Heart Failure

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65K5) Have you ever been diagnosed with any of the following ongoing or chronic heart & vascular system disorders?

(only includes students that selected having an ongoing/chronic heart & vascular system disorder not listed above) Heart

### Murmur

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65K6) Have you ever been diagnosed with any of the following ongoing or chronic heart & vascular system disorders?

(only includes students that selected having an ongoing/chronic heart & vascular system disorder not listed above)

### Valvular Heart Disease (for example: Mitral valve prolapse)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65K7) Have you ever been diagnosed with any of the following ongoing or chronic heart & vascular system disorders?

(only includes students that selected having an ongoing/chronic heart & vascular system disorder not listed above) Other

### heart or vascular condition not previously reported

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65L1) Have you ever been diagnosed with any of the following ongoing or chronic infectious diseases?

(only includes students that selected having an ongoing/chronic infectious disease not listed above) Lyme

### Disease

#### Trans/Gender

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.





# AMERICAN COLLEGE HEALTH ASSOCIATION

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DAKOTA COLLEGE AT

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(410) 859-1500

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**65L2) Have you ever been diagnosed with any of the following ongoing or chronic infectious diseases?**  
**(only includes students that selected having an ongoing/chronic infectious disease not listed above)** Other  
infectious disease not previously reported

Trans/Gender

Cis Men

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65N1) Have you ever been diagnosed with any of the following ongoing or chronic musculoskeletal disorders?**  
**(only includes students that selected having an ongoing/chronic musculoskeletal disorders not listed above)** Carpal Tunnel Syndrome

Cis Men

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65N2) Have you ever been diagnosed with any of the following ongoing or chronic musculoskeletal disorders?**  
**(only includes students that selected having an ongoing/chronic musculoskeletal disorders not listed above)** Fibromyalgia

Cis Men

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65N3) Have you ever been diagnosed with any of the following ongoing or chronic musculoskeletal disorders?**  
**(only includes students that selected having an ongoing/chronic musculoskeletal disorders not listed above)** Gout

Cis Men

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65N4) Have you ever been diagnosed with any of the following ongoing or chronic musculoskeletal disorders?**  
**(only includes students that selected having an ongoing/chronic musculoskeletal disorders not listed above)** Muscular Dystrophy

Cis Men

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65N5) Have you ever been diagnosed with any of the following ongoing or chronic musculoskeletal disorders?**  
**(only includes students that selected having an ongoing/chronic musculoskeletal disorders not listed above)** Osteoarthritis

Cis Men

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65N6) Have you ever been diagnosed with any of the following ongoing or chronic musculoskeletal disorders?**  
**(only includes students that selected having an ongoing/chronic musculoskeletal disorders not listed above)** Osteoporosis

Cis Men

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



65N7) Have you ever been diagnosed with any of the following ongoing or chronic musculoskeletal disorders?

(only includes students that selected having an ongoing/chronic musculoskeletal disorders not listed above)

Temporomandibular Joint Dysfunction

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65N8) Have you ever been diagnosed with any of the following ongoing or chronic musculoskeletal disorders?

(only includes students that selected having an ongoing/chronic musculoskeletal disorders not listed above)

Other musculoskeletal condition not previously reported

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65O1) Have you ever been diagnosed with any of the following ongoing or chronic reproductive system disorders?

(only includes students that selected having an ongoing/chronic reproductive system disorders not listed above)

Amenorrhea

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65O2) Have you ever been diagnosed with any of the following ongoing or chronic reproductive system disorders?

(only includes students that selected having an ongoing/chronic reproductive system disorders not listed above)

Cervical Dysplasia

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65O3) Have you ever been diagnosed with any of the following ongoing or chronic reproductive system disorders?

(only includes students that selected having an ongoing/chronic reproductive system disorders not listed above)

Premenstrual Syndrome (PMS), Premenstrual Dysphoric Disorder (PMDD), or painful periods (Dysmenorrhea)

Trans/Gender

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65O4) Have you ever been diagnosed with any of the following ongoing or chronic reproductive system disorders? (only includes students that selected having an ongoing/chronic reproductive system disorders not listed above)

Prostatitis

Trans/Gender

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65O5) Have you ever been diagnosed with any of the following ongoing or chronic reproductive system disorders?

(only includes students that selected having an ongoing/chronic reproductive system disorders not listed above)

Sexual Dysfunction

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

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**65Q6) Have you ever been diagnosed with any of the following ongoing or chronic reproductive system disorders? (only includes students that selected having an ongoing/chronic reproductive system disorders not listed above)**  
**Other reproductive system condition not previously reported**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

**65P1) Have you ever been diagnosed with any of the following ongoing or chronic respiratory system disorders? (only includes students that selected having an ongoing/chronic respiratory system disorders not listed above)** Cystic Fibrosis

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

**65P2) Have you ever been diagnosed with any of the following ongoing or chronic respiratory system disorders? (only includes students that selected having an ongoing/chronic respiratory system disorders not listed above)** Sarcoidosis

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

**65P3) Have you ever been diagnosed with any of the following ongoing or chronic respiratory system disorders? (only includes students that selected having an ongoing/chronic respiratory system disorders not listed above)** Active Tuberculous

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

**65P4) Have you ever been diagnosed with any of the following ongoing or chronic respiratory system disorders? (only includes students that selected having an ongoing/chronic respiratory system disorders not listed above)** Other respiratory system condition not previously reported

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

**65Q1) Have you ever been diagnosed with any of the following ongoing or chronic sleep-wake disorders? (only includes students that selected having an ongoing/chronic sleep-wake disorders not listed above)** Hypersomnolence

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

**65Q2) Have you ever been diagnosed with any of the following ongoing or chronic sleep-wake disorders? (only includes students that selected having an ongoing/chronic sleep-wake disorders not listed above)**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.



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65Q3) Have you ever been diagnosed with any of the following ongoing or chronic sleep-wake disorders?

(only includes students that selected having an ongoing/chronic sleep-wake disorders not listed above)

Restless Leg Syndrome

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65Q4) Have you ever been diagnosed with any of the following ongoing or chronic sleep-wake disorders?

(only includes students that selected having an ongoing/chronic sleep-wake disorders not listed above) Sleep

Paralysis

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65Q5) Have you ever been diagnosed with any of the following ongoing or chronic sleep-wake disorders?

(only includes students that selected having an ongoing/chronic sleep-wake disorders not listed above) Sleep

Terrors (or night terrors)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65Q6) Have you ever been diagnosed with any of the following ongoing or chronic sleep-wake disorders?

(only includes students that selected having an ongoing/chronic sleep-wake disorders not listed above) Sleep

Walking

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65Q7) Have you ever been diagnosed with any of the following ongoing or chronic sleep-wake disorders?

(only includes students that selected having an ongoing/chronic sleep-wake disorders not listed above) Other

sleep-wake condition not previously reported

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65R1) Have you ever been diagnosed with any of the following ongoing or chronic urinary system disorders?

(only includes students that selected having an ongoing/chronic urinary system disorders not listed above)

Bladder disease

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65R2) Have you ever been diagnosed with any of the following ongoing or chronic urinary system disorders?

(only includes students that selected having an ongoing/chronic urinary system disorders not listed above)

Kidney disease

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



65R3) Have you ever been diagnosed with any of the following ongoing or chronic urinary system disorders?

(only includes students that selected having an ongoing/chronic urinary system disorders not listed above)

Kidney stone

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

65R4) Have you ever been diagnosed with any of the following ongoing or chronic urinary system disorders?

(only includes students that selected having an ongoing/chronic urinary system disorders not listed above)

Urinary Incontinence

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

65R5) Have you ever been diagnosed with any of the following ongoing or chronic urinary system disorders?

(only includes students that selected having an ongoing/chronic urinary system disorders not listed above)

Other urinary system condition not previously reported

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.

65S1) You indicated that you had been diagnosed with Diabetes or Pre-Diabetes. Were you told that you had:

(only includes students that have been diagnosed with Diabetes or Pre-Diabetes)

Type 1 Diabetes

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	1	100	1	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	1	50	1	50	0	0	2	5.1	

Invalid responses include no response.

65S2) You indicated that you had been diagnosed with Diabetes or Pre-Diabetes. Were you told that you had:

(only includes students that have been diagnosed with Diabetes or Pre-Diabetes)

Type 2 Diabetes

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	1	100	0	0	1	50.0	
2 Yes	1	100	0	0	0	0	1	50.0	
Valid responses =	1	50	1	50	0	0	2	5.1	

Invalid responses include no response.

65S3) You indicated that you had been diagnosed with Diabetes or Pre-Diabetes. Were you told that you had:

(only includes students that have been diagnosed with Diabetes or Pre-Diabetes)

Pre-diabetes or insulin resistance

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	1	100	0	0	0	0	1	33.3	
2 Yes	0	0	2	100	0	0	2	66.7	
Valid responses =	1	33	2	67	0	0	3	7.7	

Invalid responses include no response.

65S4) You indicated that you had been diagnosed with Diabetes or Pre-Diabetes. Were you told that you had:

(only includes students that have been diagnosed with Diabetes or Pre-Diabetes)

Gestational Diabetes

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 No	1	100	1	100	0	0	2	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	1	50	1	50	0	0	2	5.1	

Invalid responses include no response.



65T1) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Acne

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	2	67	5	100	0	0	7	87.5
2 Yes	1	33	0	0	0	0	1	12.5
Valid responses =	3	38	5	63	0	0	8	20.5

Invalid responses include no response.

65T2) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

ADD/ADHD - Attention Deficit/Hyperactivity Disorder

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	2	100	1	25	0	0	3	50.0
2 Yes	0	0	3	75	0	0	3	50.0
Valid responses =	2	33	4	67	0	0	6	15.4

Invalid responses include no response.

65T3) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Alcohol or Other Drug-Related Abuse or Addiction

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65T4) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Allergies - food allergy

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	1	100	1	33	0	0	2	50.0
2 Yes	0	0	2	67	0	0	2	50.0
Valid responses =	1	25	3	75	0	0	4	10.3

Invalid responses include no response.

65T5) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Allergies - animals/pets

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	1	100	0	0	0	0	1	50.0
2 Yes	0	0	1	100	0	0	1	50.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.

65T6) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Allergies - environmental (for example: pollen, grass, dust, mold)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	3	75	3	60	0	0	6	66.7
2 Yes	1	25	2	40	0	0	3	33.3
Valid responses =	4	44	5	56	0	0	9	23.1

Invalid responses include no response.

65T7) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Anxiety (for example: Generalized Anxiety, Social Anxiety, Panic Disorder, Specific Phobia)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	1	50	1	20	0	0	2	28.6
2 Yes	1	50	4	80	0	0	5	71.4
Valid responses =	2	29	5	71	0	0	7	17.9

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

65T8) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Asthma

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	1	100	3	60	0	0	4	66.7
2 Yes	0	0	2	40	0	0	2	33.3
Valid responses =	1	17	5	83	0	0	6	15.4

Invalid responses include no response.

65T9) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Autism Spectrum

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	1	100	1	100	0	0	2	100.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.

65T10) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Bipolar and Related Conditions (for example: Bipolar I, II, Hypomanic Episode)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	1	100	0	0	0	0	1	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

65T11) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Borderline Personality Disorder (BPD), Avoidant Personality, Dependent Personality, or another personality disorder

Trans/Gender

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65T12) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Cancer

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65T13) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Celiac disease

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65T14) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?

(only includes students that have been diagnosed with this condition)

Chronic pain (for example: back or joint pain, arthritis, nerve pain)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	1	50	0	0	0	0	1	25.0
2 Yes	1	50	2	100	0	0	3	75.0
Valid responses =	2	50	2	50	0	0	4	10.3

Invalid responses include no response.



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**65T15) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Depression (for example: Major depression, persistent depressive disorder, disruptive mood disorder)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	1	50	0	0	0	0	1	16.7
2 Yes	1	100	4	100	0	0	5	83.3
Valid responses =	2	33	4	67	0	0	6	15.4

Invalid responses include no response.

**65T16) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Diabetes or pre-diabetes/insulin resistance**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	1	100	2	100	0	0	3	100.0
Valid responses =	1	33	2	67	0	0	3	7.7

Invalid responses include no response.

**65T17) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Eating Disorders (for example: Anorexia Nervosa, Bulimia Nervosa, Binge-Eating)**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	1	100	0	0	1	100.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65T18) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Endometriosis**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	1	100	0	0	1	100.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65T19) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Gambling Disorder**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65T20) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Genital herpes**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65T21) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Gastroesophageal Reflux Disease (GERD) or acid reflux**

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	1	100	0	0	0	0	1	100.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.





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**65T22) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Heart & vascular disorders (for example: atrial fibrillation or other cardiac arrhythmia, mitral valve prolapse or other valvular heart disease, congenital heart condition)**

**Trans/Gender**

**Cis Men**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65T23) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Hepatitis B or C**

	Cis Men	Trans/Gender				Total	
		Freq.	Pct.	Cis Women	Non-conforming	Freq.	Pct.
1 No	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65T24) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**High blood pressure (hypertension)**

	Cis Men	Trans/Gender				Total	
		Freq.	Pct.	Cis Women	Non-conforming	Freq.	Pct.
1 No	0	0	0	0	0	0	0.0
2 Yes	0	0	1	100	1	100.0	100.0
Valid responses =	0	0	1	100	1	2.6	2.6

Invalid responses include no response.

**65T25) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**High cholesterol (hyperlipidemia)**

	Cis Men	Trans/Gender				Total	
		Freq.	Pct.	Cis Women	Non-conforming	Freq.	Pct.
1 No	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65T26) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**HIV or AIDS**

	Cis Men	Trans/Gender				Total	
		Freq.	Pct.	Cis Women	Non-conforming	Freq.	Pct.
1 No	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65T27) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Human papillomavirus (HPV) or genital warts**

	Cis Men	Trans/Gender				Total	
		Freq.	Pct.	Cis Women	Non-conforming	Freq.	Pct.
1 No	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65T28) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Insomnia**

	Cis Men	Trans/Gender				Total	
		Freq.	Pct.	Cis Women	Non-conforming	Freq.	Pct.
1 No	0	0	0	0	0	0	0.0
2 Yes	1	100	2	100	3	100.0	100.0
Valid responses =	1	33	2	67	3	7.7	7.7

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

**65T29) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

Irritable bowel syndrome (spastic colon or spastic bowel)

	Trans/Gender								
	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	1	100	0	0	1	100.0	
Valid responses =	0	0	1	100	0	0	1	2.6	

Invalid responses include no response.

**65T41) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

Long COVID or having a Post-COVID Condition

	Trans/Gender								
	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	0	0	0	0	0	0	0	0	0
2 Yes	0	0	0	0	0	0	0	0	0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65T30) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

Migraine headaches

	Trans/Gender								
	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	0	0	1	25	0	0	1	20.0	
2 Yes	1	100	3	75	0	0	4	80.0	
Valid responses =	1	20	4	80	0	0	5	12.8	

Invalid responses include no response.

**65T31) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

Obsessive-Compulsive and Related Conditions (for example: OCD, Body Dysmorphia, Hoarding, Trichotillomania and other body-focused repetitive behavior disorders)

Trans/Gender

	Trans/Gender								
	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	0	0	1	50	0	0	1	50.0	
2 Yes	0	0	1	50	0	0	1	50.0	
Valid responses =	0	0	2	100	0	0	2	5.1	

Invalid responses include no response.

**65T32) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

Polycystic Ovarian Syndrome (PCOS)

	Trans/Gender								
	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	1	100	0	0	1	100.0	
Valid responses =	0	0	1	100	0	0	1	2.6	

Invalid responses include no response.

**65T33) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

PTSD (Posttraumatic Stress Disorder), Adjustment Disorder, or another trauma- or stressor-related condition

Trans/Gender

	Trans/Gender								
	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	1	100	0	0	1	100.0	
Valid responses =	0	0	1	100	0	0	1	2.6	

Invalid responses include no response.

**65T34) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

Schizophrenia and Other Psychotic Conditions (for example: Schizophrenia, Schizoaffective Disorder, Schizophreniform Disorder, Delusional Disorder)

Trans/Gender

	Trans/Gender								
	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	0	0	0	0	0	0	0	0.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	0	0	0	0	0	0.0	

Invalid responses include no response.



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**65T35) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Sleep Apnea**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		1	100	0	0	0	0	1	50.0
2 Yes		0	0	1	100	0	0	1	50.0
Valid responses =		1	50	1	50	0	0	2	5.1

Invalid responses include no response.

**65T36) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Thyroid condition or disorder**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65T37) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Tourette's or other neurodevelopmental condition not already listed**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65T38) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Traumatic brain injury (TBI)**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65T39) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Urinary system disorder (for example: bladder or kidney disease, urinary reflux, interstitial cystitis)**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65T40) Have you had an appointment and/or discussion with a healthcare or mental health professional for the following condition(s) within the last 12 months?**

**(only includes students that have been diagnosed with this condition)**

**Other ongoing or chronic condition not listed above**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	1	50	0	0	1	50.0
2 Yes		0	0	1	50	0	0	1	50.0
Valid responses =		0	0	2	100	0	0	2	5.1

Invalid responses include no response.

**65U2) In the last 12 months, what treatment(s), if any, have you used for the following conditions?**

**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**

**ADD/ADHD - Attention Deficit/Hyperactivity Disorder**

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No treatment		0	0	0	0	0	0	0	0.0
2 Medicine only		0	0	3	100	0	0	3	100.0
3 Therapy only		0	0	0	0	0	0	0	0.0
4 Both medicine and therapy		0	0	0	0	0	0	0	0.0
5 Other Treatment		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	3	100	0	0	3	7.7

Invalid responses include no response.



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65U3) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Alcohol or Other Drug-Related Abuse or Addiction

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No treatment	0	0	0	0	0	0	0	0.0
2 Medicine only	0	0	0	0	0	0	0	0.0
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	0	0	0	0	0	0.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65U7) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Anxiety (for example: Generalized Anxiety, Social Anxiety, Panic Disorder, Specific Phobia)

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No treatment	1	100	1	25	0	0	2	40.0
2 Medicine only	0	0	0	0	0	0	0	0.0
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	3	75	0	0	3	60.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	1	20	4	80	0	0	5	12.8

Invalid responses include no response.

65U9) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Autism spectrum

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No treatment	1	100	1	100	0	0	2	100.0
2 Medicine only	0	0	0	0	0	0	0	0.0
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	0	0	0	0	0	0.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.

65U10) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Bipolar and Related Conditions (for example: Bipolar I, II, Hypomanic Episode)

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No treatment	0	0	0	0	0	0	0	0.0
2 Medicine only	0	0	0	0	0	0	0	0.0
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	0	0	0	0	0	0.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65U11) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Borderline Personality Disorder (BPD), Avoidant Personality, Dependent Personality, or another personality disorder

Trans/Gender

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No treatment	0	0	0	0	0	0	0	0.0
2 Medicine only	0	0	0	0	0	0	0	0.0
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	0	0	0	0	0	0.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



65U15) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Depression (for example: Major depression, persistent depressive disorder, disruptive mood disorder)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No treatment	0	0	1	25	0	0	1	20.0
2 Medicine only	1	100	0	0	0	0	1	20.0
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	3	75	0	0	3	60.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	1	20	4	80	0	0	5	12.8

Invalid responses include no response.

65U17) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Eating Disorders (for example: Anorexia Nervosa, Bulimia Nervosa, Binge-Eating)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No treatment	0	0	1	100	0	0	1	100.0
2 Medicine only	0	0	0	0	0	0	0	0.0
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	0	0	0	0	0	0.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

65U19) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Gambling Disorder

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No treatment	0	0	0	0	0	0	0	0.0
2 Medicine only	0	0	0	0	0	0	0	0.0
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	0	0	0	0	0	0.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65U28) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Insomnia

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No treatment	1	100	1	50	0	0	2	66.7
2 Medicine only	0	0	1	50	0	0	1	33.3
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	0	0	0	0	0	0.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	1	33	2	67	0	0	3	7.7

Invalid responses include no response.

65U31) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Obsessive-Compulsive and Related Conditions (for example: OCD, Body Dysmorphia, Hoarding, Trichotillomania and other body-focused repetitive behavior disorders)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No treatment	0	0	1	100	0	0	1	100.0
2 Medicine only	0	0	0	0	0	0	0	0.0
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	0	0	0	0	0	0.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.



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65U33) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

PTSD (Posttraumatic Stress Disorder), Acute Stress Disorder, Adjustment Disorder, or another trauma- or stressor- related condition

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No treatment	0	0	0	0	0	0	0	0.0
2 Medicine only	0	0	0	0	0	0	0	0.0
3 Therapy only	0	0	1	100	0	0	1	100.0
4 Both medicine and therapy	0	0	0	0	0	0	0	0.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

65U34) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Schizophrenia and Other Psychotic Conditions (for example: Schizophrenia, Schizoaffective Disorder, Schizophreniform Disorder, Delusional Disorder)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No treatment	0	0	0	0	0	0	0	0.0
2 Medicine only	0	0	0	0	0	0	0	0.0
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	0	0	0	0	0	0.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65U37) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Tourette's or other neurodevelopmental condition not already listed

Cis Men

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No treatment	0	0	0	0	0	0	0	0.0
2 Medicine only	0	0	0	0	0	0	0	0.0
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	0	0	0	0	0	0.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65U38) In the last 12 months, what treatment(s), if any, have you used for the following conditions?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Traumatic brain injury (TBI)

Cis Men

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No treatment	0	0	0	0	0	0	0	0.0
2 Medicine only	0	0	0	0	0	0	0	0.0
3 Therapy only	0	0	0	0	0	0	0	0.0
4 Both medicine and therapy	0	0	0	0	0	0	0	0.0
5 Other Treatment	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65W1) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Acne

Cis Men

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	1	100	0	0	0	0	1	100.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

65W4) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Allergies - food allergy

Cis Men

Trans/Gender

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	1	50	0	0	1	50.0
2 Yes	0	0	1	50	0	0	1	50.0
Valid responses =	0	0	2	100	0	0	2	5.1

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

**65W5) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Allergies - animals/pets**

	Cis Men	Trans/Gender				Non-conforming	Total		
		Freq.	Pct.	Cis Women Freq.	Pct.		Freq.	Pct.	
1 No		0	0	1	100	0	0	1	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65W6) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Allergies - environmental (for example: pollen, grass, dust, mold)**

	Cis Men	Trans/Gender				Non-conforming	Total		
		Freq.	Pct.	Cis Women Freq.	Pct.		Freq.	Pct.	
1 No		1	100	1	50	0	0	2	66.7
2 Yes		0	0	1	50	0	0	1	33.3
Valid responses =		1	33	2	67	0	0	3	7.7

Invalid responses include no response.

**65W8) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Asthma**

	Cis Men	Trans/Gender				Non-conforming	Total		
		Freq.	Pct.	Cis Women Freq.	Pct.		Freq.	Pct.	
1 No		0	0	1	50	0	0	1	50.0
2 Yes		0	0	1	50	0	0	1	50.0
Valid responses =		0	0	2	100	0	0	2	5.1

Invalid responses include no response.

**65W12) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Cancer**

	Cis Men	Trans/Gender				Non-conforming	Total		
		Freq.	Pct.	Cis Women Freq.	Pct.		Freq.	Pct.	
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65W13) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Celiac disease**

	Cis Men	Trans/Gender				Non-conforming	Total		
		Freq.	Pct.	Cis Women Freq.	Pct.		Freq.	Pct.	
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65W14) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Chronic pain (for example: back or joint pain, arthritis, nerve pain)**

	Cis Men	Trans/Gender				Non-conforming	Total		
		Freq.	Pct.	Cis Women Freq.	Pct.		Freq.	Pct.	
1 No		1	100	0	0	0	0	1	33.3
2 Yes		0	0	2	100	0	0	2	66.7
Valid responses =		1	33	2	67	0	0	3	7.7

Invalid responses include no response.

**65W16) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Diabetes or pre-diabetes/insulin resistance**

	Cis Men	Trans/Gender				Non-conforming	Total		
		Freq.	Pct.	Cis Women Freq.	Pct.		Freq.	Pct.	
1 No		1	100	2	100	0	0	3	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		1	33	2	67	0	0	3	7.7

Invalid responses include no response.



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65W18) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Endometriosis

	Cis Men		Trans/Gender				Total	
			Cis Women		Non-conforming			
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	1	100	0	0	1	100.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

65W20) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Genital herpes

	Cis Men		Trans/Gender				Total	
			Cis Women		Non-conforming			
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65W21) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Gastroesophageal Reflux Disease (GERD) or acid reflux

	Cis Men		Trans/Gender				Total	
			Cis Women		Non-conforming			
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	1	100	0	0	0	0	1	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

65W22) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Heart & vascular disorders (for example: atrial fibrillation or other cardiac arrhythmia, mitral valve prolapse or other valvular heart disease, congenital heart condition)

Trans/Gender

	Cis Men		Trans/Gender				Total	
			Cis Women		Non-conforming			
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65W23) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

Hepatitis B or C

	Cis Men		Trans/Gender				Total	
			Cis Women		Non-conforming			
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65W24) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

High blood pressure (hypertension)

	Cis Men		Trans/Gender				Total	
			Cis Women		Non-conforming			
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	1	100	0	0	1	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

65W25) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?

(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)

High cholesterol (hyperlipidemia)

	Cis Men		Trans/Gender				Total	
			Cis Women		Non-conforming			
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.





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**65W26) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**HIV or AIDS**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65W27) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Human papillomavirus (HPV) or genital warts**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65W29) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Irritable bowel syndrome (spastic colon or spastic bowel)**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	1	100	0	0	1	100.0	2.6
Valid responses =	0	0	1	100	0	0	1	2.6	

Invalid responses include no response.

**65W30) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Migraine headaches**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	1	100	0	0	0	0	1	25.0	
2 Yes	0	0	3	100	0	0	3	75.0	
Valid responses =	1	25	3	75	0	0	4	10.3	

Invalid responses include no response.

**65W32) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Polycystic Ovarian Syndrome (PCOS)**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	1	100	0	0	1	100.0	2.6
Valid responses =	0	0	1	100	0	0	1	2.6	

Invalid responses include no response.

**65W35) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Sleep Apnea**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	1	100	0	0	1	100.0	2.6
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	0	0	1	100	0	0	1	2.6	

Invalid responses include no response.

**65W36) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**  
**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**  
**Thyroid condition or disorder**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
		Freq.	Pct.	Freq.	Pct.				
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



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**65W39) Have you received treatment for the following condition(s) by a healthcare or mental health professional within the last 12 months?**

**(only includes students that have had an appointment/discussion with a healthcare/mental health professional for the condition within the last 12 months)**

**Urinary system disorder (for example: bladder or kidney disease, urinary reflux, interstitial cystitis)**

	Trans/Gender								
	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65X1) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?**

**(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)**

**Acne**

	Trans/Gender								
	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65X2) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?**

**(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months) ADD/ADHD**

**- Attention Deficit/Hyperactivity Disorder**

	Trans/Gender								
	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65X3) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?**

**(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)**

**Alcohol or Other Drug-Related Abuse or Addiction**

	Trans/Gender								
	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	0	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65X4) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?**

**(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)**

**Allergies - food allergy**

	Trans/Gender							
	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	1	100	0	0	1	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65X5) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?**

**(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)**

**Allergies - animals/pets**

	Trans/Gender							
	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	1	100	0	0	1	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65X6) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?**

**(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)**

**Allergies - environmental (for example: pollen, grass, dust, mold)**

	Trans/Gender							
	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	1	100	1	100	0	0	2	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.



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65X7) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?  
(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Anxiety (for example: Generalized Anxiety, Social Anxiety, Panic Disorder, Specific Phobia)

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		1	100	0	0	0	0	1	50.0
2 Yes		0	0	1	100	0	0	1	50.0
Valid responses =		1	50	1	50	0	0	2	5.1

Invalid responses include no response.

65X8) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?  
(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Asthma

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	1	100	0	0	1	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	1	100	0	0	1	2.6

Invalid responses include no response.

65X9) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?  
(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Autism spectrum

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65X10) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?  
(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Bipolar and Related Conditions (for example: Bipolar I, II, Hypomanic Episode)

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65X11) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?  
(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Borderline Personality Disorder (BPD), Avoidant Personality, Dependent Personality, or another personality disorder

Trans/Gender

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65X12) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?  
(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Cancer

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65X13) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?  
(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Celiac disease

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

65X14) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Chronic pain (for example: back or joint pain, arthritis, nerve pain)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	1	100	0	0	0	0	1	100.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

65X15) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Depression (for example: Major depression, persistent depressive disorder, disruptive mood disorder)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	1	100	0	0	1	100.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

65X16) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Diabetes or pre-diabetes/insulin resistance

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	1	50	0	0	1	33.3
2 Yes	1	100	1	50	0	0	2	66.7
Valid responses =	1	33	2	67	0	0	3	7.7

Invalid responses include no response.

65X17) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Eating Disorders (for example: Anorexia Nervosa, Bulimia Nervosa, Binge-Eating)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	1	100	0	0	1	100.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

65X18) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months) Endometriosis

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65X19) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Gambling Disorder

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65X20) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Genital herpes

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



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**65X21) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions? (only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)**  
**Gastroesophageal Reflux Disease (GERD) or acid reflux**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		1	100	0	0	0	0	1	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		1	100	0	0	0	0	1	2.6

Invalid responses include no response.

**65X22) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions? (only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)**  
**Heart & vascular disorders (for example: atrial fibrillation or other cardiac arrhythmia, mitral valve prolapse or other valvular heart disease, congenital heart condition)**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65X23) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions? (only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)**  
**Hepatitis B or C**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65X24) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions? (only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)**  
**High blood pressure (hypertension)**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	1	100	0	0	1	100.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	1	100	0	0	1	2.6

Invalid responses include no response.

**65X25) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions? (only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)**  
**High cholesterol (hyperlipidemia)**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65X26) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions? or that you can stop treatment, for the following conditions? (only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)**  
**HIV or AIDS**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**65X27) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions? or that you can stop treatment, for the following conditions? (only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)**  
**Human papillomavirus (HPV) or genital warts**

	Cis Men	Trans/Gender						Total	
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No		0	0	0	0	0	0	0	0.0
2 Yes		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.



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65X28) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Insomnia

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	1	100	1	100	0	0	2	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.

65X29) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Irritable bowel syndrome (spastic colon or spastic bowel)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65X30) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Migraine headaches

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	1	100	0	0	0	0	1	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

65X31) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Obsessive-Compulsive and Related Conditions (for example: OCD, Body Dysmorphia, Hoarding, Trichotillomania and other body-focused repetitive behavior disorders)

Trans/Gender

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	1	100	0	0	1	100.0
Valid responses =	0	0	1	100	0	0	1	2.6

Invalid responses include no response.

65X32) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Polycystic Ovarian Syndrome (PCOS)

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65X33) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

PTSD (Posttraumatic Stress Disorder), Acute Stress Disorder, Adjustment Disorder, or another trauma- or stressor-related condition

Trans/Gender

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

65X34) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?

(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months) Schizophrenia and Other Psychotic Conditions (for example: Schizophrenia, Schizoaffective Disorder, Schizophreniform Disorder, Delusional Disorder)

Trans/Gender

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.



65X35) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?  
(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Sleep Apnea

	Cis Men	Trans/Gender				Total			
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.	Pct.
1 No	0	0	1	100	0	0	1	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =		0	0	1	100	0	0	1	2.6

Invalid responses include no response.

65X36) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?  
(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Thyroid condition or disorder

	Cis Men	Trans/Gender				Total		
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0.0

Invalid responses include no response.

65X37) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?  
(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Tourette's or other neurodevelopmental condition not already listed

	Cis Men	Trans/Gender				Total		
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0.0

Invalid responses include no response.

65X38) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?  
(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Traumatic brain injury (TBI)

	Cis Men	Trans/Gender				Total		
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0.0

Invalid responses include no response.

65X39) Did a healthcare or mental health professional tell you that you do not need treatment, or that you can stop treatment, for the following conditions?  
(only includes students that have had an appointment/discussion, but have not received treatment for the condition within the last 12 months)

Urinary system disorder (for example: bladder or kidney disease, urinary reflux, interstitial cystitis)

	Cis Men	Trans/Gender				Total		
		Freq.	Pct.	Cis Women Freq.	Pct.	Non-conforming Freq.	Pct.	Freq.
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0.0

Invalid responses include no response.

65Y) Within the last 12 months, to what extent did your ongoing or chronic condition(s) negatively affect your academic performance? (only includes students with an ongoing or chronic condition)

Trans/Gender

	Cis Men	Cis Women		Non-conforming		Total			
		Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Did not affect academic performance	6	86	10	67	0	0	16	72.7	
2 Negatively impacted performance in a class	1	14	4	27	0	0	5	22.7	
3 Delayed progress towards degree	0	0	1	7	0	0	1	4.5	
Valid responses =		7	32	15	68	0	0	22	56.4

Invalid responses include no response.

66A) Within the last 12 months, have any of the following affected your academic performance?

Assault (physical)

Trans/Gender

	Cis Men	Cis Women		Non-conforming		Total			
		Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Did not experience this issue	10	100	26	100	0	0	36	100.0	
2 Did not affect academic performance	0	0	0	0	0	0	0	0.0	
3 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0	
4 Delayed progress towards degree	0	0	0	0	0	0	0	0.0	
Valid responses =		10	28	26	72	0	0	36	92.3

Invalid responses include no response.



66B) Within the last 12 months, have any of the following affected your academic performance?

Assault (sexual)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	10	100	25	96	0	0	35	97.2
2 Did not affect academic performance	0	0	1	4	0	0	1	2.8
3 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
4 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

66C) Within the last 12 months, have any of the following affected your academic performance?

Allergies

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	6	60	21	81	0	0	27	75.0
2 Did not affect academic performance	4	40	5	19	0	0	9	25.0
3 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
4 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

66D) Within the last 12 months, have any of the following affected your academic performance?

Anxiety

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	5	50	11	42	0	0	16	44.4
2 Did not affect academic performance	3	30	10	39	0	0	13	36.1
3 Negatively impacted performance in a class	2	20	4	15	0	0	6	16.7
4 Delayed progress towards degree	0	0	1	4	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

66E) Within the last 12 months, have any of the following affected your academic performance?

Attention-Deficit/Hyperactivity Disorder (ADHD) or Attention-Deficit Disorder (ADD)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	6	60	21	81	0	0	27	75.0
2 Did not affect academic performance	3	30	1	4	0	0	4	11.1
3 Negatively impacted performance in a class	1	10	3	12	0	0	4	11.1
4 Delayed progress towards degree	0	0	1	4	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

66F) Within the last 12 months, have any of the following affected your academic performance?

Concussion or Traumatic Brain Injury (TBI)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	10	100	23	89	0	0	33	91.7
2 Did not affect academic performance	0	0	1	4	0	0	1	2.8
3 Negatively impacted performance in a class	0	0	2	8	0	0	2	5.6
4 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

66S) Within the last 12 months, have any of the following affected your academic performance?

COVID-19

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	9	90	22	85	0	0	31	86.1
2 Did not affect academic performance	1	10	3	12	0	0	4	11.1
3 Negatively impacted performance in a class	0	0	1	4	0	0	1	2.8
4 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.





66G) Within the last 12 months, have any of the following affected your academic performance?

Depression

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	7	70	18	69	25	69.4
2 Did not affect academic performance	2	20	5	19	7	19.4
3 Negatively impacted performance in a class	1	10	2	8	3	8.3
4 Delayed progress towards degree	0	0	1	4	1	2.8
Valid responses =	10	28	26	72	36	92.3

Invalid responses include no response.

66H) Within the last 12 months, have any of the following affected your academic performance?

Eating disorder/problem

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.		
1 Did not experience this issue	10	100	24	92	34	94.4
2 Did not affect academic performance	0	0	2	8	2	5.6
3 Negatively impacted performance in a class	0	0	0	0	0	0.0
4 Delayed progress towards degree	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	36	92.3

Invalid responses include no response.

66I) Within the last 12 months, have any of the following affected your academic performance?

Headaches/migraines

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.		
1 Did not experience this issue	9	90	12	46	21	58.3
2 Did not affect academic performance	1	10	11	42	12	33.3
3 Negatively impacted performance in a class	0	0	2	8	2	5.6
4 Delayed progress towards degree	0	0	1	4	1	2.8
Valid responses =	10	28	26	72	36	92.3

Invalid responses include no response.

66J) Within the last 12 months, have any of the following affected your academic performance?

Influenza or influenza like illness (the flu)

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.		
1 Did not experience this issue	9	90	18	72	27	77.1
2 Did not affect academic performance	1	10	4	16	5	14.3
3 Negatively impacted performance in a class	0	0	3	12	3	8.6
4 Delayed progress towards degree	0	0	0	0	0	0.0
Valid responses =	10	29	25	71	35	89.7

Invalid responses include no response.

66K) Within the last 12 months, have any of the following affected your academic performance?

Injury (for example: burn, sprain, or broken bone) excluding concussion or TBI

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.		
1 Did not experience this issue	9	90	19	73	28	77.8
2 Did not affect academic performance	1	10	7	27	8	22.2
3 Negatively impacted performance in a class	0	0	0	0	0	0.0
4 Delayed progress towards degree	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	36	92.3

Invalid responses include no response.

66L) Within the last 12 months, have any of the following affected your academic performance?

PMS (Premenstrual Syndrome), painful periods, or menstrual cramping

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total Freq.	Total Pct.
	Freq.	Pct.	Freq.	Pct.		
1 Did not experience this issue	10	100	20	77	30	83.3
2 Did not affect academic performance	0	0	6	23	6	16.7
3 Negatively impacted performance in a class	0	0	0	0	0	0.0
4 Delayed progress towards degree	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	36	92.3

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

Institutional Data Report - Spring 2024

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) = 39 Web Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

**66M) Within the last 12 months, have any of the following affected your academic performance?**

**Post Traumatic Stress Disorder (PTSD)**

**Trans/Gender**

**Cis Men**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	10	100	24	96	0	0	34	97.1
2 Did not affect academic performance	0	0	1	4	0	0	1	2.9
3 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
4 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	10	29	25	71	0	0	35	89.7

Invalid responses include no response.

**66N) Within the last 12 months, have any of the following affected your academic performance?**

**Short-term illness, excluding upper respiratory illness and influenza**

**Trans/Gender**

**Cis Men**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	8	80	22	85	0	0	30	83.3
2 Did not affect academic performance	2	20	3	12	0	0	5	13.9
3 Negatively impacted performance in a class	0	0	1	4	0	0	1	2.8
4 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**66O) Within the last 12 months, have any of the following affected your academic performance?**

**Upper respiratory illness (for example: sinus infection, colds, or sore throat, etc.)**

**Trans/Gender**

**Cis Men**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	6	60	17	65	0	0	23	63.9
2 Did not affect academic performance	3	30	8	31	0	0	11	30.6
3 Negatively impacted performance in a class	1	10	1	4	0	0	2	5.6
4 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**66P) Within the last 12 months, have any of the following affected your academic performance?**

**Sleep difficulties**

**Trans/Gender**

**Cis Men**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	7	70	13	50	0	0	20	55.6
2 Did not affect academic performance	1	10	8	31	0	0	9	25.0
3 Negatively impacted performance in a class	2	20	5	19	0	0	7	19.4
4 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**66Q) Within the last 12 months, have any of the following affected your academic performance?**

**Stress**

**Trans/Gender**

**Cis Men**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	6	60	8	31	0	0	14	38.9
2 Did not affect academic performance	2	20	11	42	0	0	13	36.1
3 Negatively impacted performance in a class	2	20	5	19	0	0	7	19.4
4 Delayed progress towards degree	0	0	2	8	0	0	2	5.6
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**66R) Within the last 12 months, have any of the following affected your academic performance?**

**Other issue not previously reported**

**Trans/Gender**

**Cis Men**

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Did not experience this issue	9	100	21	100	0	0	30	100.0
2 Did not affect academic performance	0	0	0	0	0	0	0	0.0
3 Negatively impacted performance in a class	0	0	0	0	0	0	0	0.0
4 Delayed progress towards degree	0	0	0	0	0	0	0	0.0
Valid responses =	9	30	21	70	0	0	30	76.9

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

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## 67A) What sex were you assigned at birth?

	Trans/Gender		Cis Women		Non-conforming		Total	
	Cis Men Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Female	0	0	26	100	0	0	26	72.2
2 Male	10	100	0	0	0	0	10	27.8
3 Intersex	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 67B) Do you identify as transgender?

	Trans/Gender		Cis Women		Non-conforming		Total	
	Cis Men Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 67C) Which term do you use to describe your gender identity?

	Trans/Gender		Cis Women		Non-conforming		Total	
	Cis Men Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Woman or female	0	0	26	100	0	0	26	72.2
2 Man or male	10	100	0	0	0	0	10	27.8
3 Trans woman	0	0	0	0	0	0	0	0.0
4 Trans man	0	0	0	0	0	0	0	0.0
5 Genderqueer	0	0	0	0	0	0	0	0.0
6 My identity is not listed	0	0	0	0	0	0	0	0.0
7 Agender	0	0	0	0	0	0	0	0.0
8 Genderfluid	0	0	0	0	0	0	0	0.0
9 Non-binary	0	0	0	0	0	0	0	0.0
10 Intersex	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 68) What term best describes your sexual orientation?

	Trans/Gender		Cis Women		Non-conforming		Total	
	Cis Men Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Asexual	0	0	0	0	0	0	0	0.0
2 Bisexual	0	0	1	4	0	0	1	2.8
3 Gay	0	0	0	0	0	0	0	0.0
4 Lesbian	0	0	2	8	0	0	2	5.6
5 Pansexual	0	0	0	0	0	0	0	0.0
6 Queer	0	0	0	0	0	0	0	0.0
7 Questioning	0	0	0	0	0	0	0	0.0
9 Straight/Heterosexual	10	100	22	85	0	0	32	88.9
10 My identity not listed above	0	0	1	4	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 69) How old are you?

	Trans/Gender		Cis Women		Non-conforming		Total	
	Cis Men Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 18 Years	2	20	5	19	0	0	7	19.4
2 19 Years	3	30	14	54	0	0	17	47.2
3 20 Years	2	20	2	8	0	0	4	11.1
4 21 Years	1	10	4	15	0	0	5	13.9
5 22 Years	1	10	0	0	0	0	1	2.8
6 23 Years	0	0	0	0	0	0	0	0.0
7 24 Years	0	0	0	0	0	0	0	0.0
8 25 Years	0	0	0	0	0	0	0	0.0
9 26 to 30 Years	0	0	0	0	0	0	0	0.0
10 31 to 40 Years	1	10	1	4	0	0	2	5.6
11 41 or More Years	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

	Mean	Median	Std Dev	Min	Max
Cis Men	20.90	20.00	4.43	18	33
Cis Women	19.73	19.00	2.86	18	33
Trans/Gender Non-conforming	.	.	.	.	.
Overall	20.06	19.00	3.35	18	33



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### 71) What is your weight in pounds?

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 51 to 100 Pounds	0	0	1	4	0	0	1	2.8
2 101 to 150 Pounds	2	20	15	58	0	0	17	47.2
3 151 to 200 Pounds	5	50	10	39	0	0	15	41.7
4 201 to 250 Pounds	3	30	0	0	0	0	3	8.3
5 251 to 300 Pounds	0	0	0	0	0	0	0	0.0
6 301 or More Pounds	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

	Mean	Median	Std Dev	Min	Max
Cis Men	182.00	188.00	32.59	130	230
Cis Women	147.12	147.00	27.28	90	200
Trans/Gender Non-conforming	.	.	.	.	.
Overall	156.81	151.00	32.49	90	230

### 72) What is your year in school?

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 1st year undergraduate	4	40	12	46	0	0	16	44.4
2 2nd year undergraduate	4	40	10	39	0	0	14	38.9
3 3rd year undergraduate	1	10	2	8	0	0	3	8.3
4 4th year undergraduate	1	10	2	8	0	0	3	8.3
5 5th year or more undergraduate	0	0	0	0	0	0	0	0.0
6 Master's (MA, MS, etc.)	0	0	0	0	0	0	0	0.0
7 Doctorate (PhD, EdD, MD, JD, etc.)	0	0	0	0	0	0	0	0.0
8 Not seeking a degree	0	0	0	0	0	0	0	0.0
9 Other (please specify):	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

### 73) What is your enrollment status?

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Full-time	9	90	24	96	0	0	33	94.3
2 Part-time	1	10	1	4	0	0	2	5.7
3 Other	0	0	0	0	0	0	0	0.0
Valid responses =	10	29	25	71	0	0	35	89.7

Invalid responses include no response.

### 73A) I am taking classes this term:

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
1 Entirely in-person	3	30	13	50	0	0	16	44.4	
2 Entirely online	0	0	2	8	0	0	2	5.6	
3 A mix of in-person and online classes	7	70	11	42	0	0	18	50.0	
Valid responses =	10	28	26	72	0	0	36	92.3	

Invalid responses include no response.

### 73B1) How likely is it that you will:

Leave your school before graduating and transfer to another school?

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Very likely	1	10	3	12	0	0	4	11.1
2 Moderately likely	1	10	0	0	0	0	1	2.8
3 Slightly likely	0	0	2	8	0	0	2	5.6
4 Slightly unlikely	0	0	1	4	0	0	1	2.8
5 Moderately unlikely	1	10	0	0	0	0	1	2.8
6 Very unlikely	7	70	20	77	0	0	27	75.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.



**73B2) How likely is it that you will:**

Leave your school before graduating without transferring to another school?

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Very likely	0	0	3	11.5	0	0	3	8.3
2 Moderately likely	0	0	0	0	0	0	0	0.0
3 Slightly likely	0	0	0	0	0	0	0	0.0
4 Slightly unlikely	1	10	1	3.8	0	0	2	5.6
5 Moderately unlikely	1	10	0	0	0	0	1	2.8
6 Very unlikely	8	80	22	85	0	0	30	83.3
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

**73C1) What would be your reason(s) for leaving your current college/university?**

(only students that are very, moderately, or slightly likely to leave their school) Lack of safe and/or affordable housing

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	1	50	5	100	0	0	6	85.7
2 Yes	1	50	0	0	0	0	1	14.3
Valid responses =	2	29	5	71	0	0	7	17.9

Invalid responses include no response.

**73C2) What would be your reason(s) for leaving your current college/university?**

(only students that are very, moderately, or slightly likely to leave their school) Financial concerns other than housing

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	1	50	2	40	0	0	3	42.9
2 Yes	1	50	3	60	0	0	4	57.1
Valid responses =	2	29	5	71	0	0	7	17.9

Invalid responses include no response.

**73C3) What would be your reason(s) for leaving your current college/university?**

(only students that are very, moderately, or slightly likely to leave their school) Need to take care of family members/children

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	4	80	0	0	4	57.1
2 Yes	2	100	1	20	0	0	3	42.9
Valid responses =	2	29	5	71	0	0	7	17.9

Invalid responses include no response.

**73C4) What would be your reason(s) for leaving your current college/university?**

(only students that are very, moderately, or slightly likely to leave their school) Conflicts with work responsibilities/schedule

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	1	50	4	80	0	0	5	71.4
2 Yes	1	50	1	20	0	0	2	28.6
Valid responses =	2	29	5	71	0	0	7	17.9

Invalid responses include no response.

**73C5) What would be your reason(s) for leaving your current college/university?**

(only students that are very, moderately, or slightly likely to leave their school) Ongoing physical and/or mental health issues

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	1	50	3	75	0	0	4	66.7
2 Yes	1	50	1	25	0	0	2	33.3
Valid responses =	2	33	4	67	0	0	6	15.4

Invalid responses include no response.

**73C6) What would be your reason(s) for leaving your current college/university?**

(only students that are very, moderately, or slightly likely to leave their school) Change in my academic plans and/or professional goals (e.g., institution doesn't have the academic program I want; I may not want my chosen degree anymore)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	0	0	3	60	0	0	3	42.9
2 Yes	2	100	2	40	0	0	4	57.1
Valid responses =	2	29	5	71	0	0	7	17.9

Invalid responses include no response.



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## 73C7) What would be your reason(s) for leaving your current college/university?

(only students that are very, moderately, or slightly likely to leave their school) Poor

academic performance

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	2	100	4	80	0	0	6	85.7
2 Yes	0	0	1	20	0	0	1	14.3
Valid responses =	2	29	5	71	0	0	7	17.9

Invalid responses include no response.

## 73C8) What would be your reason(s) for leaving your current college/university?

(only students that are very, moderately, or slightly likely to leave their school) Negative experience at my college/university

Negative experience at my college/university

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	1	50	5	100	0	0	6	85.7
2 Yes	1	50	0	0	0	0	1	14.3
Valid responses =	2	29	5	71	0	0	7	17.9

Invalid responses include no response.

## 73C9) What would be your reason(s) for leaving your current college/university?

(only students that are very, moderately, or slightly likely to leave their school) I don't feel like I fit in at my college/university

I don't feel like I fit in at my college/university

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	2	100	4	80	0	0	6	85.7
2 Yes	0	0	1	20	0	0	1	14.3
Valid responses =	2	29	5	71	0	0	7	17.9

Invalid responses include no response.

## 73C10) What would be your reason(s) for leaving your current college/university?

(only students that are very, moderately, or slightly likely to leave their school) Other (please specify)

Other (please specify)

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	2	100	2	100	0	0	4	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	2	50	2	50	0	0	4	10.3

Invalid responses include no response.

## 74A) Are you studying in the United States this semester/term?

Cis Men

Trans/Gender

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	10	100	26	100	0	0	36	100.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 74B) Do you have a visa (for example: F-1, J-1, or M-1) to study or work in the United States? (only students that are studying in the U.S. this semester/term)

Cis Men

Trans/Gender

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	9	90	15	58	0	0	24	66.7
2 Yes	1	10	11	42	0	0	12	33.3
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 74C) Would you need a visa (for example: F-1, J-1, or M-1) to study or work in the United States? (only students that are NOT studying in the U.S. this semester/term)

Cis Men

Trans/Gender

	Cis Men		Trans/Gender				Total	
	Freq.	Pct.	Cis Women		Non-conforming		Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.		
1 No	0	0	0	0	0	0	0	0.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.

## 75A1) How do you usually describe yourself? (Please select ALL that apply)

American Indian or Native Alaskan

Trans/Gender

Cis Men

	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Not selected	9	90	24	92	0	0	36	92.3
1 Selected	1	10	2	8	0	0	3	7.7
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.



### 75A2) How do you usually describe yourself? (Please select ALL that apply)

#### Asian or Asian American

##### Trans/Gender

##### Cis Men

	Freq.	Pct.	Cis Women		Non-conforming		Total	
			Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Not selected	9	90	26	100	0	0	38	97.4
1 Selected	1	10	0	0	0	0	1	2.6
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

### 75A3) How do you usually describe yourself? (Please select ALL that apply)

#### Black or African American

##### Trans/Gender

##### Cis Men

	Freq.	Pct.	Cis Women		Non-conforming		Total	Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
0 Not selected	10	100	24	92	0	0	37	94.9	
1 Selected	0	0	2	8	0	0	2	5.1	
Valid responses =	10	26	26	67	0	0	39	100.0	

Invalid responses include no response.

### 75A4) How do you usually describe yourself? (Please select ALL that apply)

#### Hispanic or Latino/a/x

##### Trans/Gender

##### Cis Men

	Freq.	Pct.	Cis Women		Non-conforming		Total	Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
0 Not selected	10	100	26	100	0	0	39	100.0	
1 Selected	0	0	0	0	0	0	0	0.0	
Valid responses =	10	26	26	67	0	0	39	100.0	

Invalid responses include no response.

### 75A5) How do you usually describe yourself? (Please select ALL that apply)

#### Middle Eastern/North African (MENA) or Arab Origin

##### Trans/Gender

##### Cis Men

	Freq.	Pct.	Cis Women		Non-conforming		Total	Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
0 Not selected	10	100	26	100	0	0	39	100.0	
1 Selected	0	0	0	0	0	0	0	0.0	
Valid responses =	10	26	26	67	0	0	39	100.0	

Invalid responses include no response.

### 75A6) How do you usually describe yourself? (Please select ALL that apply)

#### Native Hawaiian or Other Pacific Islander Native

##### Trans/Gender

##### Cis Men

	Freq.	Pct.	Cis Women		Non-conforming		Total	Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
0 Not selected	10	100	26	100	0	0	39	100.0	
1 Selected	0	0	0	0	0	0	0	0.0	
Valid responses =	10	26	26	67	0	0	39	100.0	

Invalid responses include no response.

### 75A7) How do you usually describe yourself? (Please select ALL that apply)

#### White

##### Trans/Gender

##### Cis Men

	Freq.	Pct.	Cis Women		Non-conforming		Total	Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
0 Not selected	2	20	5	19	0	0	10	25.6	
1 Selected	8	80	21	81	0	0	29	74.4	
Valid responses =	10	26	26	67	0	0	39	100.0	

Invalid responses include no response.

### 75A8) How do you usually describe yourself? (Please select ALL that apply)

#### Biracial or Multiracial

##### Trans/Gender

##### Cis Men

	Freq.	Pct.	Cis Women		Non-conforming		Total	Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
0 Not selected	8	80	25	96	0	0	36	92.3	
1 Selected	2	20	1	4	0	0	3	7.7	
Valid responses =	10	26	26	67	0	0	39	100.0	

Invalid responses include no response.

### 75A9) How do you usually describe yourself? (Please select ALL that apply)

#### Another Identity

##### Trans/Gender

##### Cis Men

	Freq.	Pct.	Cis Women		Non-conforming		Total	Freq.	Pct.
			Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
0 Not selected	10	100	25	96	0	0	38	97.4	
1 Selected	0	0	1	4	0	0	1	2.6	
Valid responses =	10	26	26	67	0	0	39	100.0	

Invalid responses include no response.



# AMERICAN COLLEGE HEALTH ASSOCIATION

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**75B1) Are you? (Please select ALL that apply) (only includes students that describe themselves as Hispanic or Latino/a/x) Mexican, Mexican American, Chicano**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Not selected		0	0	0	0	0	0	0	0.0
1 Selected		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**75B2) Are you? (Please select ALL that apply) (only includes students that describe themselves as Hispanic or Latino/a/x) Puerto Rican**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Not selected		0	0	0	0	0	0	0	0.0
1 Selected		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**75B3) Are you? (Please select ALL that apply) (only includes students that describe themselves as Hispanic or Latino/a/x) Cuban**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Not selected		0	0	0	0	0	0	0	0.0
1 Selected		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**75B4) Are you? (Please select ALL that apply) (only includes students that describe themselves as Hispanic or Latino/a/x) Another Hispanic, Latino/a/x, or Spanish origin**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Not selected		0	0	0	0	0	0	0	0.0
1 Selected		0	0	0	0	0	0	0	0.0
Valid responses =		0	0	0	0	0	0	0	0.0

Invalid responses include no response.

**75C1) Are you? (Please select ALL that apply) (only includes students that describe themselves as Asian or Asian American) East Asian (for example: Chinese, Japanese, or Korean)**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Not selected		0	0	0	0	0	0	0	0.0
1 Selected		1	100	0	0	1	100.0		
Valid responses =		1	100	0	0	1	2.6		

Invalid responses include no response.

**75C2) Are you? (Please select ALL that apply) (only includes students that describe themselves as Asian or Asian American) Southeast Asian (for example: Cambodian, Vietnamese, Hmong, or Filipino)**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Not selected		1	100	0	0	1	100.0		
1 Selected		0	0	0	0	0	0.0		
Valid responses =		1	100	0	0	1	2.6		

Invalid responses include no response.

**75C3) Are you? (Please select ALL that apply) (only includes students that describe themselves as Asian or Asian American) South Asian (for example: Indian, Pakistani, Nepalese, or Sri Lankan)**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Not selected		1	100	0	0	1	100.0		
1 Selected		0	0	0	0	0	0.0		
Valid responses =		1	100	0	0	1	2.6		

Invalid responses include no response.

**75C4) Are you? (Please select ALL that apply) (only includes students that describe themselves as Asian or Asian American) Other Asian**

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
		Freq.	Pct.	Freq.	Pct.				
0 Not selected		1	100	0	0	1	100.0		
1 Selected		0	0	0	0	0	0.0		
Valid responses =		1	100	0	0	1	2.6		

Invalid responses include no response.





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## 76) What is your relationship status?

	Trans/Gender						Total	
	Cis Men	Cis Women		Non-conforming		Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Not in a relationship	5	50	12	46	0	0	17	47.2
2 In relationship not married/partnered	4	40	12	46	0	0	16	44.4
3 Married/partnered	1	10	2	8	0	0	3	8.3
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 77A) Are you a member of a social fraternity or sorority?

	Cis Men	Trans/Gender				Total		
	Freq.	Pct.	Cis Women	Non-conforming		Freq.	Pct.	
			Freq.	Pct.	Freq.	Pct.		
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 77B) Do you live in a fraternity or sorority residence?

	Cis Men	Trans/Gender				Total		
	Freq.	Pct.	Cis Women	Non-conforming		Freq.	Pct.	
			Freq.	Pct.	Freq.	Pct.		
1 No	10	100	26	100	0	0	36	100.0
2 Yes	0	0	0	0	0	0	0	0.0
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 78) Where do you currently live? (only includes students that do not live in a fraternity/sorority residence)

	Trans/Gender						Total	
	Cis Men	Cis Women		Non-conforming		Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 Campus/university housing	7	70	19	73	0	0	26	72.2
2 Parent/guardian/other family member's home	1	10	3	12	0	0	4	11.1
3 Off-campus/non-university housing	2	20	3	12	0	0	5	13.9
4 Temporarily with relative, friend, couch surfing	0	0	0	0	0	0	0	0.0
5 Don't have a place to live	0	0	0	0	0	0	0	0.0
6 Other (please specify)	0	0	1	4	0	0	1	2.8
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 79\_1) What is your primary source of health insurance? (select all that apply) I have a college/university Student Health Insurance Plan

	Trans/Gender						Total	
	Cis Men	Cis Women		Non-conforming		Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 Not Selected	9	90	26	100	0	0	38	97.4
1 Selected	1	10	0	0	0	0	1	2.6
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

## 79\_2) What is your primary source of health insurance? (select all that apply) I have health insurance through my parent/guardian (or their employer)

	Trans/Gender						Total	
	Cis Men	Cis Women		Non-conforming		Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 Not Selected	3	30	8	30.8	0	0	14	35.9
1 Selected	7	70	18	69.2	0	0	25	64.1
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

## 79\_3) What is your primary source of health insurance? (select all that apply) I have health insurance through my employer (or my spouse/partner's employer)

	Trans/Gender						Total	
	Cis Men	Cis Women		Non-conforming		Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 Not Selected	10	100	25	96.2	0	0	38	97.4
1 Selected	0	0	1	3.8	0	0	1	2.6
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

## 79\_4) What is your primary source of health insurance? (select all that apply) I have health insurance through Medicaid, Medicare, or VA/Tricare

	Trans/Gender						Total	
	Cis Men	Cis Women		Non-conforming		Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
0 Not Selected	9	90	26	100	0	0	38	97.4
1 Selected	1	10	0	0	0	0	1	2.6
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.



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## 79\_5) What is your primary source of health insurance? (select all that apply)

I have health insurance that was purchased from the exchange or an insurance carrier directly

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
0 Not Selected	10	100	24	92.3	0	0	37	94.9
1 Selected	0	0	2	7.7	0	0	2	5.1
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

## 79\_9) What is your primary source of health insurance? (select all that apply)

I have health insurance through an embassy or sponsoring agency for international students

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Not Selected	10	100	26	100	39	100.0
1 Selected	0	0	0	0	0	0.0
Valid responses =	10	26	26	67	39	100.0

Invalid responses include no response.

## 79\_10) What is your primary source of health insurance? (select all that apply) I

have health insurance through another source (please specify)

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Not Selected	10	100	25	96.2	38	97.4
1 Selected	0	0	1	3.8	1	2.6
Valid responses =	10	26	26	67	39	100.0

Invalid responses include no response.

## 79\_8) What is your primary source of health insurance? (select all that apply) I

have health insurance, but I don't know the primary source

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Not Selected	9	90	26	100	38	97.4
1 Selected	1	10	0	0	1	2.6
Valid responses =	10	26	26	67	39	100.0

Invalid responses include no response.

## 79\_6) What is your primary source of health insurance? (select all that apply) I

don't have health insurance

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
0 Not Selected	9	90	25	96.2	0	0	37	94.9
1 Selected	1	10	1	3.8	0	0	2	5.1
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.

## 79\_7) What is your primary source of health insurance? (select all that apply) I

don't know if I have health insurance

Trans/Gender

Cis Men

	Cis Women		Non-conforming		Total	Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.				
0 Not Selected	10	100	23	88.5	0	0	36	92.3
1 Selected	0	0	3	11.5	0	0	3	7.7
Valid responses =	10	26	26	67	0	0	39	100.0

Invalid responses include no response.



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## 80) What is your approximate cumulative grade average?

	Trans/Gender						Total Freq.	Pct.
	Cis Men	Cis Women		Non-conforming		Pct.		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 A+	0	0	2	8	0	0	2	5.6
2 A	6	60	11	42	0	0	17	47.2
3 A-	1	10	4	15	0	0	5	13.9
4 B+	2	20	3	12	0	0	5	13.9
5 B	0	0	3	12	0	0	3	8.3
6 B-	1	10	0	0	0	0	1	2.8
7 C+	0	0	0	0	0	0	0	0.0
8 C	0	0	1	4	0	0	1	2.8
9 C-	0	0	0	0	0	0	0	0.0
10 D+	0	0	0	0	0	0	0	0.0
11 D	0	0	0	0	0	0	0	0.0
12 D-	0	0	0	0	0	0	0	0.0
13 F	0	0	0	0	0	0	0	0.0
14 N/A	0	0	2	8	0	0	2	5.6
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 81A) Do you participate in organized college athletics at any of the following levels? Varsity

	Trans/Gender						Total Freq.	Pct.
	Cis Men	Cis Women		Non-conforming		Pct.		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 No	4	40	8	31	0	0	12	33.3
2 Yes	6	60	18	69	0	0	24	66.7
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 81B) Do you participate in organized college athletics at any of the following levels? Club Sports

	Trans/Gender						Total Freq.	Pct.
	Cis Men	Cis Women		Non-conforming		Pct.		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 No	5	63	21	88	0	0	26	81.3
2 Yes	3	38	3	13	0	0	6	18.8
Valid responses =	8	25	24	75	0	0	32	82.1

Invalid responses include no response.

## 81C) Do you participate in organized college athletics at any of the following levels? Intramurals

	Trans/Gender						Total Freq.	Pct.
	Cis Men	Cis Women		Non-conforming		Pct.		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 No	6	75	21	88	0	0	27	84.4
2 Yes	2	25	3	13	0	0	5	15.6
Valid responses =	8	25	24	75	0	0	32	82.1

Invalid responses include no response.

## 82A) Do you have any of the following? Attention-Deficit/Hyperactivity Disorder (ADD or ADHD)

	Trans/Gender						Total Freq.	Pct.
	Cis Men	Cis Women		Non-conforming		Pct.		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 No	7	70	22	85	0	0	29	80.6
2 Yes	3	30	4	15	0	0	7	19.4
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 82B) Do you have any of the following? Autism Spectrum Disorder

	Trans/Gender						Total Freq.	Pct.
	Cis Men	Cis Women		Non-conforming		Pct.		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 No	9	90	25	96	0	0	34	94.4
2 Yes	1	10	1	4	0	0	2	5.6
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## 82C) Do you have any of the following? Deaf/Hearing loss

	Trans/Gender						Total Freq.	Pct.
	Cis Men	Cis Women		Non-conforming		Pct.		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 No	9	90	25	96	0	0	34	94.4
2 Yes	1	10	1	4	0	0	2	5.6
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.



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### 82D) Do you have any of the following? Learning disability

	Freq.	Cis Mer		Cis Women		Trans/Gender Non-conforming		Total	
		Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	10	100	21	84	0	0	31	88.6	
2 Yes	0	0	4	16	0	0	4	11.4	
Valid responses =	10	29	25	71	0	0	35	89.7	

Invalid responses include no response.

### 82E) Do you have any of the following? Mobility/Dexterity disability

	Freq.	Cis Mer		Cis Women		Trans/Gender Non-conforming		Total	
		Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	10	100	26	100	0	0	36	100.0	
2 Yes	0	0	0	0	0	0	0	0.0	
Valid responses =	10	28	26	72	0	0	36	92.3	

Invalid responses include no response.

### 82F) Do you have any of the following? Blind/Low Vision

	Cis Men	Cis Women		Non-conforming		Total			
		Freq.	Pct.	Freq.	Pct.	Freq.	Pct.		
1 No	10	100	23	89	0	0	33	91.7	
2 Yes	0	0	3	12	0	0	3	8.3	
Valid responses =	10	28	26	72	0	0	36	92.3	

Invalid responses include no response.

### 82G) Do you have any of the following? Speech or language disorder

	Freq.	Cis Mer		Cis Women		Trans/Gender Non-conforming		Total	
		Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No	10	100	25	96	0	0	35	97.2	
2 Yes	0	0	1	4	0	0	1	2.8	
Valid responses =	10	28	26	72	0	0	36	92.3	

Invalid responses include no response.

### 83) Are you currently or have you been a member of the Armed Services?

	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	9	90	26	100	0	0	35	97.2	
2 Yes, have served in area of hazardous duty	0	0	0	0	0	0	0	0.0	
3 Yes, have not served in area hazardous duty	1	10	0	0	0	0	1	2.8	
Valid responses =	10	28	26	72	0	0	36	92.3	

Invalid responses include no response.

### 84) What is the highest level of education completed by either of your parents (or guardians)?

	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 Did not finish high school	1	10	0	0	0	0	1	2.8	
2 High school diploma or GED	2	20	9	35	0	0	11	30.6	
3 Attended college but no degree	2	20	1	4	0	0	3	8.3	
4 Associate's degree	0	0	5	19	0	0	5	13.9	
5 Bachelor's degree	3	30	5	19	0	0	8	22.2	
6 Master's degree	1	10	3	12	0	0	4	11.1	
7 Doctoral or professional degree (PhD, EdD, MD, JD, etc.)	1	10	0	0	0	0	1	2.8	
8 Don't know	0	0	3	12	0	0	3	8.3	
Valid responses =	10	28	26	72	0	0	36	92.3	

Invalid responses include no response.

### 85) Are you a parent of a child under the age of 18 or do you have primary responsibility for someone else's child/children under the age of 18?

	Cis Men		Cis Women		Non-conforming		Total		
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	
1 No	9	90	25	96	0	0	34	94.4	
2 Yes	1	10	1	4	0	0	2	5.6	
Valid responses =	10	28	26	72	0	0	36	92.3	

Invalid responses include no response.



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## HT\_INCH Height in Inches

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 36 or Less Inches	0	0	0	0	0	0	0	0.0
2 37 to 48 Inches	0	0	0	0	0	0	0	0.0
3 49 to 60 Inches	0	0	2	8	0	0	2	5.7
4 61 to 72 Inches	7	78	24	92	0	0	31	88.6
5 73 to 84 Inches	2	22	0	0	0	0	2	5.7
6 85 or More Inches	0	0	0	0	0	0	0	0.0
Valid responses =	9	26	26	74	0	0	35	89.7

Invalid responses include no response.

Due to the improbability of a student surviving a drinking episode resulting in an extremely high BAC, all students with a BAC of .50% or higher are omitted from the BAC figures in this report. BAC is an estimated figure based on the reported number of drinks consumed during the last time they drank alcohol in a social setting, their approximate time of consumption, sex, weight, and the average rate of ethanol metabolism. The BAC variable has only been altered for this report, and remains unchanged in the data file.

## BAC Estimated Blood Alcohol Content

	Mean	Median	Std Dev	Min	Max
Cis Men	0.05	0.03	0.06	0	0.14
Cis Women	0.08	0.06	0.07	0	0.20
Trans/Gender Non-conforming	.	.	.	.	.
Overall	0.07	0.05	0.06	0	0.20

## BAC Estimated Blood Alcohol Content

Trans/Gender	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
Cis Men						
0 0% Alcohol	2	40	1	6	3	14.3
1 .01 to .05% Alcohol	2	40	7	44	9	42.9
2 .06 to .07% Alcohol	0	0	3	19	3	14.3
3 .08 to .09% Alcohol	0	0	1	6	1	4.8
4 .10 to .15% Alcohol	1	20	1	6	2	9.5
5 .16 to .20% Alcohol	0	0	3	19	3	14.3
6 .21 to .25% Alcohol	0	0	0	0	0	0.0
7 .26 to .30% Alcohol	0	0	0	0	0	0.0
8 .31 to .49% Alcohol	0	0	0	0	0	0.0
Valid responses =	5	24	16	76	21	53.8

Invalid responses include no response.

## RBAC1 Recoded Estimated Blood Alcohol Content .08%

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Less than .08%	4	80	11	69	0	0	15	71.4
1 .08% or higher	1	20	5	31	0	0	6	28.6
Valid responses =	5	24	16	76	0	0	21	53.8

Invalid responses include no response.

## RBAC2 Recoded Estimated Blood Alcohol Content .1%

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.	Freq.	Pct.
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
0 Less than .1%	4	80	12	75	0	0	16	76.2
1 .1% or higher	1	20	4	25	0	0	5	23.8
Valid responses =	5	24	16	76	0	0	21	53.8

Invalid responses include no response.

## BMI Body Mass Index

	Mean	Median	Std Dev	Min	Max
Cis Men	26.41	27.00	5.23	17	33
Cis Women	24.74	23.00	4.09	20	37
Trans/Gender Non-conforming	.	.	.	.	.
Overall	25.17	23.00	4.39	17	37

## RBMI Body Mass Index Classifications

Cis Men	Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Underweight (<18.5)	1	11	0	0	1	2.9
2 Desired weight (18.5- 24.9)	3	33	16	62	19	54.3
3 Overweight (25- 29.9)	3	33	7	27	10	28.6
4 Class I obesity (30- 34.9)	2	22	2	8	4	11.4
5 Class II obesity (35- 39.9)	0	0	1	4	1	2.9
6 Class III obesity (>=40)	0	0	0	0	0	0.0
Valid responses =	9	26	26	74	35	89.7

Invalid responses include no response.



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## USDAFI USDA Food Security Score

	Mean	Median	Std Dev	Min	Max
Cis Men	2.33	2.00	1.8	0	5
Cis Women	1.62	1.00	1.88	0	6
Trans/Gender Non-conforming	.	.	.	.	.
Overall	1.75	1.00	1.86	0	6

## RUSDAFI USDA Food Security Category

	Trans/Gender		Cis Women		Non-conforming		Total	
	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Very low food security (5-6)	1	11	4	15	0	0	5	13.9
2 Low food security (2-4)	5	56	5	19	0	0	10	27.8
3 High or marginal food security (0-1)	3	33	17	65	0	0	21	58.3
Valid responses =	9	25	26	72	0	0	36	92.3

Invalid responses include no response.

## KESSLER6 Kessler 6 (K6) Non-Specific Psychological Distress Score

	Mean	Median	Std Dev	Min	Max
Cis Men	8.70	7.00	7.04	1	24
Cis Women	8.17	7.00	5.79	0	24
Trans/Gender Non-conforming	.	.	.	.	.
Overall	8.32	7.00	6.08	0	24

## RKESSLER6 Recoded Kessler 6 (K6) Non-Specific Psychological Distress

Cis Men	Trans/Gender		Cis Women		Non-conforming		Total	
	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 No or low psychological distress (0-12)	8	80	20	83	0	0	2882.4	
3 Serious psychological distress (13-24)	2	20	4	17	0	0	617.6	
Valid responses =	10	29	24	71	0	0	3487.2	

Invalid responses include no response.

## ULS3 UCLA Loneliness Scale Score

	Mean	Median	Std Dev	Min	Max
Cis Men	5.80	6.00	2.1	3	9
Cis Women	5.19	5.00	1.52	3	8
Trans/Gender Non-conforming	.	.	.	.	.
Overall	5.36	5.00	1.69	3	9

## RULS3 Recoded UCLA Loneliness Scale

	Trans/Gender		Cis Women		Non-conforming		Total	
	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Negative for loneliness (3-5)	5	50	16	62	0	0	21	58.3
2 Positive for loneliness (6-9)	5	50	10	39	0	0	15	41.7
Valid responses =	10	28	26	72	0	0	36	92.3

Invalid responses include no response.

## SBQR Suicide Behavior Questionnaire-Revised (SBQR) Screening Score

	Mean	Median	Std Dev	Min	Max
Cis Men	4.60	3.00	3.47	3	14
Cis Women	4.00	3.00	1.88	3	11
Trans/Gender Non-conforming	.	.	.	.	.
Overall	4.17	3.00	2.38	3	14

## RSBQR Recoded Suicide Behavior Questionnaire-Revised (SBQR)

	Trans/Gender		Cis Women		Non-conforming		Total	
	Cis Men		Cis Women		Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Negative for suicidal screening (3-6)	9	90	23	89	0	0	3288.9	
2 Positive for suicidal screening (7-18)	1	10	3	12	0	0	411.1	
Valid responses =	10	28	26	72	0	0	3692.3	

Invalid responses include no response.

## DIENER Diener Flourishing Score

	Mean	Median	Std Dev	Min	Max
Cis Men	36.80	43.00	16.07	8	52
Cis Women	44.88	48.00	9.53	8	56
Trans/Gender Non-conforming	.	.	.	.	.
Overall	42.64	45.00	12.03	8	56

## CDRISC2 Connor-Davidson Resilience Scale 2 (CD-RISC2) Score

	Mean	Median	Std Dev	Min	Max
Cis Men	5.30	6.00	2.36	0	8
Cis Women	6.12	6.00	1.56	2	8
Trans/Gender Non-conforming	.	.	.	.	.
Overall	5.89	6.00	1.83	0	8



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## SSISTOBACCO ASSIST SSIS TOBACCO SCORE

	Mean	Median	Std Dev	Min	Max
Cis Men	11.25	12.00	8.96	0	21
Cis Women	3.89	2.00	5.28	0	16
Trans/Gender Non-conforming	.	.	.	.	.
Overall	6.15	5.00	7.15	0	21

## TOBACCORISK ASSIST Tobacco Risk

	Trans/Gender						Total	
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.
1 Low Risk (0-3)	1	25	5	56	0	0	6	46.2
2 Moderate Risk (4-26)	3	75	4	44	0	0	7	53.8
3 High Risk (27-39)	0	0	0	0	0	0	0	0.0
Valid responses =	4	31	9	69	0	0	13	33.3

Invalid responses include no response.

## SSISALCOHOL ASSIST SSIS ALCOHOL SCORE

	Mean	Median	Std Dev	Min	Max
Cis Men	11.88	12.00	8.18	0	21
Cis Women	7.14	6.00	5.14	2	21
Trans/Gender Non-conforming	.	.	.	.	.
Overall	8.61	6.00	6.6	0	21

## ALCOHOLRISK ASSIST Alcohol Risk

	Cis Men	Trans/Gender						Total	
		Cis Women		Non-conforming		Freq.	Pct.		
1 Low Risk (0-10)	4	50	11	79	0	0	16	69.6	
2 Moderate Risk (11-26)	4	50	3	21	0	0	7	30.4	
3 High Risk (27-39)	0	0	0	0	0	0	0	0.0	
Valid responses =	8	35	14	61	0	0	23	59.0	

Invalid responses include no response.

## SSISCANNABIS ASSIST SSIS CANNABIS SCORE

	Mean	Median	Std Dev	Min	Max
Cis Men	8.67	10.00	6.11	2	14
Cis Women	2.20	0.00	3.03	0	6
Trans/Gender Non-conforming	.	.	.	.	.
Overall	4.63	4.00	5.21	0	14

## CANNABISRISK ASSIST Cannabis Risk

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.		
1 Low Risk (0-3)	1	33	3	60	0	0	4	50.0
2 Moderate Risk (4-26)	2	67	2	40	0	0	4	50.0
3 High Risk (27-39)	0	0	0	0	0	0	0	0.0
Valid responses =	3	38	5	63	0	0	8	20.5

Invalid responses include no response.

## SSISCOCAINE ASSIST SSIS COCAINE SCORE

	Mean	Median	Std Dev	Min	Max
Cis Men	3.00	3.00	.	3	3
Cis Women	8.00	8.00	.	8	8
Trans/Gender Non-conforming	.	.	.	.	.
Overall	5.50	6.00	3.54	3	8

## COCAINERISK ASSIST Cocaine Risk

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.		
1 Low Risk (0-3)	1	100	0	0	0	0	1	100.0
2 Moderate Risk (4-26)	0	0	1	100	0	0	1	100.0
3 High Risk (27-39)	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	1	50	0	0	2	25.1

Invalid responses include no response.

## SSISMETH ASSIST SSIS METHAMPHETAMINE SCORE

	Mean	Median	Std Dev	Min	Max
Cis Men	3.00	3.00	.	3	3
Cis Women	.	.	.	.	.
Trans/Gender Non-conforming	.	.	.	.	.
Overall	3.00	3.00	.	3	3

## METHRISK ASSIST Methamphetamine Risk

Cis Men	Trans/Gender						Total	
	Cis Women		Non-conforming		Freq.	Pct.		
1 Low Risk (0-3)	1	100	0	0	0	0	1	100.0
2 Moderate Risk (4-26)	0	0	0	0	0	0	0	0.0
3 High Risk (27-39)	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.



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## SSISINHALANT ASSIST SSIS INHALANTS SCORE

Mean	Median	Std Dev	Min	Max
Cis Men	3.00	3.00	.	3
Cis Women	.	.	.	.
Trans/Gender Non-conforming	.	.	.	.
Overall	3.00	3.00	.	3

## INHALANTRISK ASSIST Inhalant Risk

	Cis Men		Cis Women		Trans/Gender Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Low Risk (0-3)	1	100	0	0	0	0	1	100.0
2 Moderate Risk (4-26)	0	0	0	0	0	0	0	0.0
3 High Risk (27-39)	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

## SSISRXSTIMULANT ASSIST SSIS ADJUSTED PRESCRIPTION STIMULANT SCORE

Mean	Median	Std Dev	Min	Max
Cis Men	.	.	.	.
Cis Women	0.00	0.00	0	0
Trans/Gender Non-conforming	.	.	.	.
Overall	0.00	0.00	0	0

## RXSTIMULANTRISK ASSIST Prescription Stimulant Risk

	Cis Men		Cis Women		Trans/Gender Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Low Risk (0-3)	0	0	2	100	0	0	2	100.0
2 Moderate Risk (4-26)	0	0	0	0	0	0	0	0.0
3 High Risk (27-39)	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	2	100	0	0	2	5.1

Invalid responses include no response.

## SSISSEDATIVE ASSIST SSIS ADJUSTED SEDATIVE SCORE

Mean	Median	Std Dev	Min	Max
Cis Men	3.00	3.00	.	3
Cis Women	.	.	.	.
Trans/Gender Non-conforming	.	.	.	.
Overall	3.00	3.00	.	3

## SEDATIVERISK ASSIST Sedative Risk

	Cis Men		Cis Women		Trans/Gender Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Low Risk (0-3)	1	100	0	0	0	0	1	100.0
2 Moderate Risk (4-26)	0	0	0	0	0	0	0	0.0
3 High Risk (27-39)	0	0	0	0	0	0	0	0.0
Valid responses =	1	100	0	0	0	0	1	2.6

Invalid responses include no response.

## SSISHALLUCINOGEN ASSIST SSIS HALLUCINOGENS SCORE

Mean	Median	Std Dev	Min	Max
Cis Men	3.00	3.00	.	3
Cis Women	2.00	2.00	.	2
Trans/Gender Non-conforming	.	.	.	.
Overall	2.50	3.00	0.71	2

## HALLUCINOGENRISK ASSIST Hallucinogen Risk

	Cis Men		Cis Women		Trans/Gender Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Low Risk (0-3)	1	100	1	100	0	0	2	100.0
2 Moderate Risk (4-26)	0	0	0	0	0	0	0	0.0
3 High Risk (27-39)	0	0	0	0	0	0	0	0.0
Valid responses =	1	50	1	50	0	0	2	5.1

Invalid responses include no response.

## SSISHEROIN ASSIST SSIS HEROIN SCORE

Mean	Median	Std Dev	Min	Max
Cis Men	.	.	.	.
Cis Women	.	.	.	.
Trans/Gender Non-conforming	.	.	.	.
Overall	.	.	.	.

## HEROINRISK ASSIST Heroin Risk

	Cis Men		Cis Women		Trans/Gender Non-conforming		Total	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
1 Low Risk (0-3)	0	0	0	0	0	0	0	0.0
2 Moderate Risk (4-26)	0	0	0	0	0	0	0	0.0
3 High Risk (27-39)	0	0	0	0	0	0	0	0.0
Valid responses =	0	0	0	0	0	0	0	0.0

Invalid responses include no response.





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## SSISRXOPIOID ASSIST SSIS ADJUSTED PRESCRIPTION OPIOID SCORE

	Mean	Median	Std Dev	Min	Max
Cis Men	6.00	6.00	.	6	6
Cis Women	0.00	0.00	.	0	0
Trans/Gender Non-conforming	.	.	.	.	.
Overall	3.00	3.00	4.24	0	6

## RXOPIOIDRISK ASSIST Opioid Risk

	Trans/Gender						Total		
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.			
1 Low Risk (0-3)	0	0	1	100	0	0	1	50.0	
2 Moderate Risk (4-26)	1	100	0	0	0	0	1	50.0	
3 High Risk (27-39)	0	0	0	0	0	0	0	0.0	
Valid responses =	1	50	1	50	0	0	2	5.1	

Invalid responses include no response.

## SSISOTHER ASSIST SSIS OTHER DRUG SCORE

	Mean	Median	Std Dev	Min	Max
Cis Men	12.00	12.00	.	12	12
Cis Women	.	.	.	.	.
Trans/Gender Non-conforming	.	.	.	.	.
Overall	12.00	12.00	.	12	12

## OTHERSSISRISK ASSIST Other Drug Risk

	Trans/Gender						Total		
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.			
1 Low Risk (0-3)	0	0	0	0	0	0	0.0		
2 Moderate Risk (4-26)	1	100	0	0	0	0	1	100.0	
3 High Risk (27-39)	0	0	0	0	0	0	0.0		
Valid responses =	1	100	0	0	0	0	1	2.6	

Invalid responses include no response.

## PATOTALMOD Total moderate activity minutes/week conversion

	Mean	Median	Std Dev	Min	Max
Cis Men	777.78	360.00	792.35	80	2100
Cis Women	722.69	640.00	623.43	0	1860
Trans/Gender Non-conforming	.	.	.	.	.
Overall	705.26	570.00	643.35	0	2100

## PAAERO Met Weekly PA Guideline for Aerobic Activity ONLY

	Trans/Gender						Total		
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.			
1 No	1	11	9	35	0	0	11	28.9	
2 Yes	8	89	17	65	0	0	27	71.1	
Valid responses =	9	24	26	68	0	0	38	97.4	

Invalid responses include no response.

## PAGUIDE Met Weekly PA Guideline for Aerobic and Muscle-Strengthening Activity

Cis Men	Trans/Gender						Total		
	Cis Women		Non-conforming		Freq.	Pct.			
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.			
1 No	2	22	11	42	0	0	15	39.5	
2 Yes	7	78	15	58	0	0	23	60.5	
Valid responses =	9	24	26	68	0	0	38	97.4	

Invalid responses include no response.

## HAPAGUIDE Met Weekly PA Guideline for HIGHLY ACTIVE Adults

	Trans/Gender						Total		
	Cis Men		Cis Women		Non-conforming		Freq.	Pct.	
	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.			
1 No	4	44	12	46	0	0	19	50.0	
2 Yes	5	56	14	54	0	0	19	50.0	
Valid responses =	9	24	26	68	0	0	38	97.4	

Invalid responses include no response.

## References

<sup>1</sup> Connor KM, Davidson JTR. Development of a new resilience scale: The Connor-Davidson Resilience Scale (CDRISC). Depression and Anxiety. 2003; 18:76-82.



# AMERICAN COLLEGE HEALTH ASSOCIATION

American College Health Association-National College Health Assessment (ACHA-NCHA III)

**Institutional Data Report - Spring 2024**

American College Health Association  
8455 Colesville Road, Suite 740 Silver  
Spring, MD 20910

**DAKOTA COLLEGE AT**

February 28, 2024

FREQUENCY REPORT

Number of Surveys (n) =

39

Web

Surveys

(410) 859-1500

[www.acha.org](http://www.acha.org)

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DAKOTA COLLEGE AT

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FREQUENCY REPORT

**86A) Do you have access to a gun/firearm?**



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DAKOTA COLLEGE AT

February 28, 2024

FREQUENCY REPORT

**Trans/Gender**

Cis Men	Cis Women	Non-conforming	Total		Freq.	Pct.	Freq.	Pct.	Freq.	Pct.	Freq.	Pct.
			Freq.	Pct.								
1 No			7	70	20	77	0	0	27	92.3		
2 Yes			3	30	6	23	0	0	9	30.0		
Valid responses =			10	28	26	72	0	0	36	92.3		

Invalid responses include no response.

**86B) During the last 30 days, on how many days did you carry a gun/firearm on campus?**

Cis Men	Trans/Gender				Cis Women	Non-conforming	Total			
	Freq.	Pct.	Freq.	Pct.				Freq.	Pct.	
1 0 days	10	100	26	100	0	0	36	100.0		
2 1-2 days	0	0	0	0	0	0	0	0.0		
3 3-4 days	0	0	0	0	0	0	0	0.0		
4 5-30 days	0	0	0	0	0	0	0	0.0		
Valid responses =			10	28	26	72	0	0	36	92.3

Invalid responses include no response.

	Mean	Median	Std Dev	Min	Max
Cis Men	0.00	0.00	0	0	0
Cis Female	0.00	0.00	0	0	0
Trans/Gender Non-conforming Overall	0.00	0.00	0	0	0

**86C) To what extent are you concerned about gun violence on campus?**

Cis Men	Trans/Gender				Cis Women	Non-conforming	Total			
	Freq.	Pct.	Freq.	Pct.				Freq.	Pct.	
1 Not at all concerned	9	90	19	73	0	0	28	77.8		
2 Slightly concerned	1	10	4	15	0	0	5	13.9		
3 Moderately concerned	0	0	1	4	0	0	1	2.8		
4 Very concerned	0	0	0	0	0	0	0	0.0		
5 Extremely concerned	0	0	2	8	0	0	2	5.6		
Valid responses =			10	28	26	72	0	0	36	92.3

Invalid responses include no response.