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**A review of evidence for
bystander intervention to
prevent sexual and domestic
violence in universities**

Commissioned by Public Health England

Dr Rachel Anne Fenton
Dr Helen L Mott
Dr Kieran McCartan
Professor Philip N S Rumney

University of the West of England
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Introduction

We are all bystanders, all the time. We witness events unfolding around us constantly. Sometimes we recognise events as being problematic. When this happens, we make a decision to do or say something (and become an active bystander), or to simply let it go (and remain a passive bystander). There are many factors which will influence why we decide to intervene or not but when we do decide to intervene we are sending a clear message to the wrongdoer that their behaviour is socially unacceptable. Social norms determine the rules of behaviour for given social groups or given social situations and so, if messages about the unacceptability of certain behaviour are constantly sent and reinforced within a community or group, then the boundaries of what is considered normal, acceptable behaviour will shift. Shifting the social norm to exclude undesirable behaviours can therefore be achieved by empowering people to become active, as opposed to passive, bystanders.

This account of achieving behaviour change through social means is both intuitive and neat. It is also underpinned by sophisticated and multi-layered, multi-disciplinary theories, producing a potentially powerful tool for prevention in the area of sexual and domestic violence¹. Bystander intervention programmes, supported by a growing international evidence base, have been gaining traction in this field over the last two decades. Such programmes are so potentially important and promising (Ricardo, Eads and Barker, 2011) that in the US sexual assault prevention on college campuses now often focuses on training students to be prosocial bystanders (Brown, Banyard and Moynihan, 2014; DeGue *et al.*, 2014; DeGue, 2014) and the US Department of Justice's Office on Violence Against Women has required the inclusion of evidence-based bystander programming as a condition of obtaining funding since 2012 (DeGue, 2014).

Alongside these developments in the field, in this decade UK universities have come under increasingly intense scrutiny as specific sites where the pervasive production of sexual and domestic violence constitutes a significant human rights and public health problem which is not necessarily challenged, prevented or fairly dealt with. Against this backdrop, Public Health England commissioned the University of the West of England to undertake a review of the literature, identifying the strongest evidence and best practice from which to then develop a public health intervention toolkit specifically for the prevention of sexual coercion and domestic violence in university and higher education settings. The product of this research is *The Intervention Initiative* programme and toolkit which is available at <http://www.uwe.ac.uk/interventioninitiative>.

¹ See Section 1.1 for a discussion of terms.

This literature review builds on the review published in 2011 (Powell, 2011) which summarised the evidence-based features for effective bystander approaches in support of preventing violence against women. There are three aims of this review:

- to set out the rationale for using a bystander approach in sexual and domestic violence prevention work at English universities;
- to verify that all current evidence for best practice has been assimilated in the preparation of *The Intervention Initiative* toolkit for English universities, commissioned by Public Health England and developed by the research team undertaking the review;
- to bring interested parties up to date with the most recent research relating to bystander intervention methods for addressing sexual and domestic violence in university settings.

This review is intended to be useful to a range of audiences. Interested university administrators will find that the main points are summarised in the Executive Summary. Part One sets out the context for the literature review and accompanying toolkit. Part Two describes the theoretical underpinnings of the bystander approach to the prevention of domestic and sexual violence in university populations and the associated implications for universities. Part Three consists of a detailed review of the literature and evidence base for bystander intervention programmes in university settings. Part Four describes the development of *The Intervention Initiative* prevention programme and toolkit. Part Five concludes the review with recommendations for the future.

Executive Summary

- i. Violence against women is a critical concern for public health and human rights. There is a growing body of evidence from UK universities adding to the international evidence base documenting that universities are significant sites for violence against women. Universities in the UK are increasingly motivated to seek effective long-term solutions.
- ii. A gendered understanding of sexual and domestic violence in universities is necessary for effective prevention. A bystander intervention framework grounded in a gendered approach is inclusive of all, regardless of gender or other characteristics, and can also address related forms of violence.
- iii. The growing research base indicates that a bystander intervention approach is showing particular aptitude for addressing the primary prevention of sexual and domestic violence in university settings. Bystander interventions have the potential to engage men, as well as women, positively in ending violence against women.
- iv. Bystander programmes with a social norms component and which are embedded in all students' timetables, supported by a visible institutional culture against violence and abuse, are likely to be maximally effective for violence prevention if they meet the following criteria. They must: be comprehensive; be of sufficient length and duration; be underpinned by theory; foster positive relationships; be delivered at the right time; be socioculturally relevant; be evaluated for effectiveness (including monitoring for unintended backlash effects); be administered by well-trained staff.
- v. Effective programmes must allow participants to pass through every stage required to change their behaviour, including deep behavioural learning (developing and rehearsing skills for intervening).
- vi. There are significant additional positive benefits for students from participating in a bystander programme. These relate to graduate employability, the student experience and education for sustainable development.
- vii. Bystander programmes are complex models. They increase participants' likelihood of intervening, as is their main stated function. They also function strategically to deliver a range of potential changes to a number of the attitudes, beliefs, social and cultural norms and peer group relationships that may affect conditions of perpetration and victimisation.
- viii. The process of achieving behaviour change is complex, encompassing multiple levels or stages and requiring time. This cannot be expected to be

achieved, nor can prevalence be expected to be reduced, by short one-off interventions.

- ix. The current evidence base is largely from the US. Rigorous evidence (e.g. randomised control trials) is limited especially in regard to data concerning the primary outcome of violence reduction, which is an outcome that is extremely difficult to measure. However, more evidence is available for positive changes both in bystander behaviour and risk factors for sexual violence perpetration and victimisation as well as across a range of other outcome variables.
- x. Positive changes are reported across behavioural, cognitive and attitudinal measures. Statistically significant changes have been reported for participants in bystander intervention programmes in the following areas ('violence' is used here as a term to encompass any form of sexual and or domestic violence):
 - Decreased perpetration of violence;
 - Decreased likelihood of perpetrating violence;
 - Decreased violence victimisation;
 - Decreased incidence of community violence (perpetration);
 - Decreased incidence of community violence (victimisation);
 - Increased knowledge about violence (consent, prevalence, definitions);
 - Decreased rape myth acceptance;
 - Decreased sexist attitudes;
 - Increased empathy towards rape survivors;
 - Decreased perception of peer sexist attitudes;
 - Increased bystander interventions made;
 - Increased responsibility to make interventions;
 - Decreased denial of violence as a problem;
 - Increased confidence to intervene;
 - Increased intention to intervene.
- xi. Studies show the ability of bystander programmes to address the complex aetiology of violence as situated in the individual within the context of their wider social environment, indicating a strong probability that community incidence of violence can be diminished through enhanced primary, secondary and tertiary prevention.
- xii. In order to progress the research, new, rigorously developed and tested standard measures that are distributed across multiple sites and over a longitudinal timescale are needed. These should be agreed and adopted by universities.

Part One: Context for the literature review and toolkit

1.1 Violence against women

The commission from Public Health England for this review and toolkit adopted the specific phrases “sexual coercion and domestic violence” and “sexual and domestic violence”, recognising that the majority of publications to date use these terms. These terms are also widely used in the public domain and are familiar to university administrators. Therefore, the title of this review reflects this language and it is used throughout to refer to violence and abuse against women, with a particular, but not exclusive, focus upon sexual assault, rape, harassment, stalking and intimate partner violence as reported in student surveys and bystander programme literature.

Violence and abuse against women is both a human rights issue - recognised in national and international treaties and conventions - and a public health issue. The prevention of violence against women is a priority for the United Nations (e.g. CEDAW: UN, 1979), the European Union (e.g. the Istanbul Convention: Council of Europe, 2011) and the UK government (HM Government, 2010). Tackling sexual and domestic violence requires an appreciation that they are forms of behaviour which are rooted in gender relations and the social policing of gender roles in our society (Hester and Lilley, 2014). Boys and men can be and are victims, and abuse can and does happen within same-sex relationships as well as within family relationships and against trans men and trans women. Nevertheless, in terms of the scale of the social problem, perpetrators tend overwhelmingly to be male and victims are mainly female. It is important to acknowledge that sexual and domestic violence are part of a social pattern of all forms of violence against women and are both a cause and a consequence of gender inequality. This does not diminish the impact of abuse on other victims nor the usefulness of prevention programmes, designed to address violence against women, for addressing related forms of violence.

1.2 Public health

As a public health issue, sexual and domestic violence impacts severely upon individuals and communities (WHO, 2013; NICE, 2014). It causes the consumption of a range of health, social care and criminal justice resources. Indeed, NICE guidelines state: “The cost, in both human and economic terms, is so significant that even marginally effective interventions are cost effective” (NICE, 2014, p. 6).

In terms of the health of university students, a multi-site study of students at English campus universities found that 100 per cent of those who had experienced sexual

violence reported a negative psychological, emotional or physical health based impact. 27 per cent contemplated suicide or self-harm, 15 per cent developed an eating disorder, 15 per cent abused alcohol or drugs and 12 per cent reported becoming more prone to, and frequent absence from university due to, illness (Stenning, Mitra-Kahn and Gunby, 2012). Furthermore, 50 per cent of those who reported being sexually assaulted indicated having experienced a negative impact on their academic performance and 11 per cent indicated that the progress of their studies was delayed (Stenning, Mitra-Kahn and Gunby, 2012).

1.3 Prevalence

Universities as institutions are acknowledged internationally as significant sites for violence against women and therefore important sites for prevention (DeGue *et al.*, 2014). Over 40 per cent of young people in England enter higher education by age 19 (UCAS, 2014). National crime statistics consistently show female students are at high risk of being a victim of a sexual offence: Sexual offenders target women aged 16-19 and students more than any other age or occupation group (MOJ/HO/ONS, 2013). Women aged 16 – 24 years also have higher risk of experiencing domestic violence than any other group (ONS, 2013; ONS, 2015; both table 1.03).

It is beyond the scope of this review to explore in depth why it is that students are a high risk population but factors include being away from supervision of parents and carers in an environment of intense social interaction compounded for some by alcohol and substance use. Criminological theory in relation to risk will be discussed later in this review.

- 25 per cent of women students reported experiencing sexual assault and 7 per cent were classified as serious sexual assault (NUS, 2011);
- 28.5 per cent of students reported experiencing sexual assault (CUSU, 2014);
- 3 per cent of students reported experiencing assault by penetration (CUSU, 2014);
- 1 per cent of students (male and female) reported having been raped (Goldhill and Bingham, 2015);
- 68.6 per cent of women students reported having experienced at least once incident of sexual harassment (Stenning, Mitra-Kahn and Gunby, 2012);
- 30 per cent of women students reported having experienced at least once incident of stalking (Stenning, Mitra-Kahn and Gunby, 2012);

- 31 per cent of women students reported experiencing inappropriate touching or groping (Goldhill and Bingham, 2015);
- LGBT students were 12 per cent more likely to report experiences of sexual harassment compared to non-LGBT respondents (83 per cent compared to 71 per cent) (YUSU, 2012);
- 85 per cent of students who had experienced rape, sexual assault, violence or stalking reported a negative impact on their mental health and 69 per cent reported a negative impact on their ability to study (CUSU, 2014);
- 29 per cent of women students who had experienced sexual violence reported that it affected their academic performance. 34 per cent reported that they had interrupted their studies as a result of the violence (Stenning, Mitra-Kahn and Gunby, 2012).

There are no obligations upon universities to collect data and nor are there guidelines for systematic data collection. Nonetheless, a number of interested parties have conducted surveys in UK universities in recent years. These studies constitute a growing body of evidence indicating that the extent of sexual harassment, sexual coercion, rape and abuse in student populations across England is a serious problem to be addressed².

The UK survey data converge with similar results from university data sets in other countries such as the US and Canada. For example Fisher, Cullen and Turner (2000) reported on a randomised national sample of college women in the US using a methodology designed to capture all experiences meeting the legal definition of rape (unlike some other studies which ask for subjective accounts of rape). They estimated a rape rate of female college students of 3.5 per cent per year. Over 50 per cent of the respondents whose experience met the definition of rape said that they did not consider the experience to be rape, or did not know whether it was. Therefore using subjective definitions of rape would approximately halve the annual incidence rate. In a report for the US National Institute of Justice, Krebs *et al.* (2007) reported a college prevalence rate for completed sexual assault of 3.7 per cent for men and 13.7 per cent for women.

1.4 'Lad culture'

In addition to survey data, a number of high profile popular media reports have documented the kind of behaviour among (some) students that attracts the label 'lad culture'. There is an associated body of sociological research and interest from the

² These studies have used a variety of data collection methods and definitional terms across a variety of student populations so that it is not possible to produce reliably exact prevalence figures: general issues with data collection are addressed in section 3.3.1.4.

NUS in tackling 'lad culture' (e.g. Phipps and Young, 2012; 2015a; 2015b). The most recent report from the Chief Executive of the Office of the Independent Adjudicator in Higher Education for England and Wales (OIA, 2014) made reference to the prevalence of 'lads' culture' (p. 20). Whilst what exactly constitutes 'lad culture' is open to discussion, there is certainly evidence of some problematic group behaviour in some universities, contributing to a context which facilitates sexual and domestic violence. Although 'lad culture' is not the only contributor to a conducive context (Lonsway, 1996) for violence against women in universities, any prevention strategy will need to address the phenomenon.

1.5 The readiness of universities to change

Edwards' community-readiness model indicates that the time of most effectiveness for prevention strategies will be when communities transition from 'no' or 'little awareness' of the problem, to addressing the issue and subsequently making it permanent (Edwards *et al.*, 2000; Banyard, Plante and Moynihan, 2004). In the last two years there have been campaigns by the NUS (NUS, 2015), the Telegraph, the End Violence Against Women Coalition (EVAW, 2015) and a test legal case (*R. (on the application of Ramey) v University of Oxford*, 2015). With the heightened awareness of the university sector as a significant site for action, pressure has been placed on universities to acknowledge, prevent and respond fairly to violence against women. Over the course of an ongoing mapping exercise conducted by the current authors since 2014, the interest expressed by English universities in tackling sexual and domestic violence has increased. While there may be an increasing willingness to take action, prior to 2014 there were no resources developed nationally to support universities and other higher education settings to meet their legal and moral duties to prevent sexual or domestic violence. Existing measures have tended to be *ad hoc* and involve such things as poster campaigns, awareness campaigns (led locally by students or sponsored by the NUS), the distribution of rape alarms, and leafleting. Such measures have not necessarily been designed to change underlying attitudes or behaviours and have generally not sought to actively involve male and female students in comprehensive sexual and domestic violence prevention strategies.

Whilst there may be university receptivity to change at the current time, caution must be exercised in determining how change is to be achieved. The need to (be seen to) do something should not be confused with making a considered long-term evidence-based plan for change (see section 2.6 of this review). Whilst investing in 'quick-fix' or one-off individual-level interventions is tempting to universities, there are no shortcuts. As the White House Task Force Report explains, "...continuing to invest scarce resources in low- or no- impact strategies detracts from potential investments in more effective approaches and may be counter-productive" (DeGue, 2014, p. 8).

1.6 The emergence of bystander programmes as a vehicle for change

Violence against women, in terms of its sheer scale, is understood theoretically as a cause and a consequence of gender inequality, across communities and society. Effective violence prevention strategies will aim to change wider community and societal attitudes and behaviours rooted in gender inequality (Banyard, Plante and Moynihan, 2004). Over recent decades, the field of violence prevention has expanded from a traditional focus on victims and perpetrators in recognition of the fact that “prevention approaches must go beyond changing individuals to changing the system that creates and maintains sexual abuse” (Swift and Ryan-Finn, 1995, p. 20, cited in Banyard, Plante and Moynihan, 2004). Primary prevention strategies now focus on the role and responsibility of members of the community as a whole (Jewkes, Flood and Lang, 2014; Tabachnick, 2008) and that is the essence of a bystander programme.

Many of the bystander prevention programmes and associated research have been undertaken with student populations. It is notable that academics specialising in violence prevention (theory, practice and evaluation) favour bystander programmes (see DeGue, 2014, for a summary of the variety of programmes in US universities and note the lack of evaluation and evidence relating to non-bystander interventions). The growing research base indicates the bystander approach is showing particular aptitude for addressing the primary prevention of sexual and domestic violence in university settings.

Part Two: Theory of bystander intervention approaches to violence prevention in universities

This part of the review summarises the intersecting theories and concepts that have influenced the development of bystander programmes. The following will be discussed in turn:

- 2.1 Criminological theory;
- 2.2 Bystander theory;
- 2.3 Social norms theory;
- 2.4 Bystander programmes as complex models;
- 2.5 Men's role in prevention;
- 2.6 Effective prevention;
- 2.7 Implications for universities.

A number of publications are helpful to readers wishing to extend or deepen their understanding of the theoretical underpinnings of bystander intervention programmes in the context of violence against women (Banyard, 2011; Banyard, Eckstein and Moynihan, 2010; Banyard, Plante and Moynihan, 2004, Paul and Gray, 2011; Powell, 2011; Powell, 2014).

2.1 Introduction to criminological theory

Bystander programmes are not perpetrator programmes. They are not designed to change the behaviour of very high risk mentally disordered committed perpetrators of violence, for whom intensive specialist therapy or incarceration would be required to prevent their offending. Such dedicated perpetrators are likely to be persistent in creating opportunities for offending which may be impossible to prevent using a bystander intervention model. However, while such dedicated perpetrators may offend prolifically as individuals (Lisak and Miller, 2002; Lisak, 2011), they constitute a minority of sex offenders (most sex offenders do not have a major mental illness (Gordon and Grubin, 2004)). As such, the committed offenders will still be responsible for a low proportion of the endemic violence and abuse that the data reveal to be occurring in universities. Nevertheless, when students are informed of the warning signs for abusive and violent behaviour and given the tools and confidence to report violence - which are elements of any good bystander

intervention programme - high risk offenders may be identified and stopped sooner in any pattern of offending.

In terms of the application of criminological theory to bystander intervention programmes, Powell (2011) identifies two criminological theories of particular relevance to the prevention of violence against women. Firstly, Routine Activity Theory (RAT) (Cohen and Felson, 1979) identifies the requirement of:

- a (vulnerable/suitable) victim or target;
- a motivated offender; and
- the absence of capable guardianship, for the commission of a crime.

Schwartz *et al.* (2001) discuss Schwartz and Pitts' (1995) concept of *criminogenic convergence* in relation to the high prevalence of violence in universities, identifying that, "there are male students who are motivated to assault women sexually; available...female targets are present and capable guardians willing to intervene are absent"(p. 628). Powell notes that in the case of violence against women, strategies focussing on changing the availability of a suitable victim are seen as problematic: "it is not appropriate to suggest that women should bear the responsibility of protecting themselves from sexual or intimate partner violence" (p. 17). Rather, an ecological approach which changes the motivations of the potential offender and strengthens guardianship across society is endorsed. Theoretical 'risk factors' (as motivating factors) will be discussed later in this review.

Secondly, the application of Rational Choice Theory, in its focus on offender decision-making as a subcategory of offender motivation, suggests that violence will be prevented, "by both increasing the risks of being reported and charged, but also taking into account the social normative risks and rewards for violent behaviours" (Powell, 2011, p.17). We suggest that the theoretical strength of a bystander intervention programme lies in its coverage of each of these conditions which will be discussed in Section 2.4.

2.2 Bystander theory

A bystander is someone who witnesses an event but is not directly involved in the event itself. Prosocial bystanders are those who intervene when they witness a problematic event between a perpetrator and victim, whereas passive bystanders do nothing. Bystander theory emerged from the fields of social psychology and criminology (for a review see Powell, 2011) and seeks to theorise the motivations behind bystander intervention or non-intervention.

The main organising framework for understanding bystander behaviour (Latané and Darley, 1970) identified the different stages bystanders go through in moving from inaction to action. A bystander must notice the event and understand it as a problem

requiring intervention, decide that they are part of the solution and so assume responsibility, and finally, have the capacity and skill set to intervene (Berkowitz, 2009; Banyard, 2011; Powell, 2011) (see Figure 1).

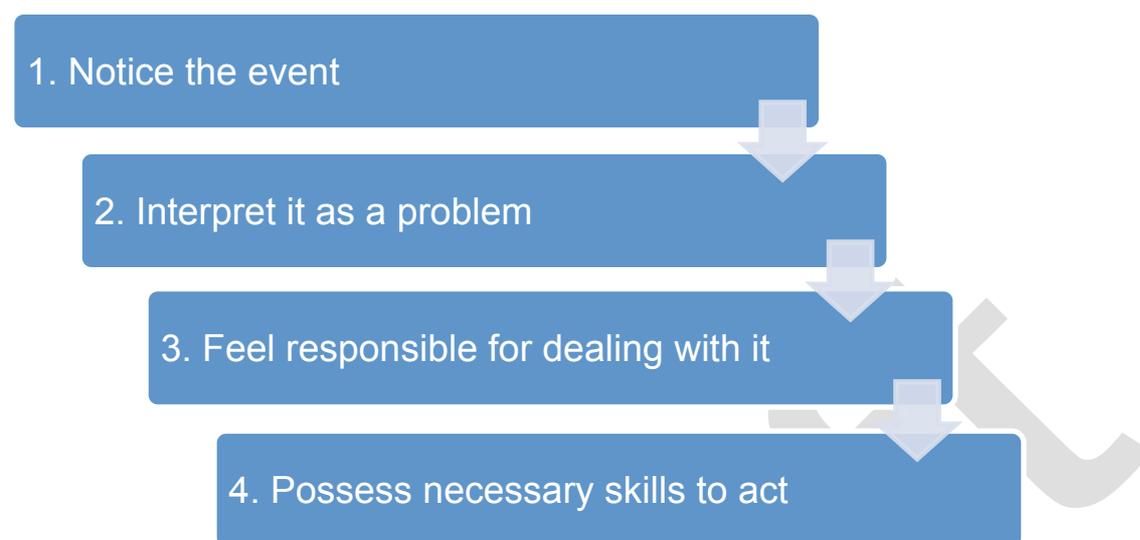


Figure 1. Four stages to becoming a prosocial bystander
(Adapted from Berkowitz, 2009, p.10)

2.2.1 Noticing the problem: Knowledge

In order to notice an event and identify it as a problem, it is necessary to have sufficient knowledge. It follows that a bystander education and training programme to prevent violence against women will equip participants with the requisite facts and knowledge to enable participants to recognise:

- risk factors (of victimisation and perpetration);
- negative impact on victims;
- behaviours along the continuum of sexual violence, such as sexism, hostile attitudes towards women, rape myth acceptance, victim-blaming;
- early warning signs of domestic abuse; and
- potentially dangerous violent situations as they occur.

(Banyard, Plante and Moynihan, 2004; Banyard, 2011; Brown, Banyard and Moynihan, 2014; DeGue, 2014; DeGue *et al.*, 2014; Powell, 2011; Powell, 2014).

The accumulation of relevant knowledge is only the first step towards behaviour change (i.e. making an intervention as a bystander). It is important to note that although increased knowledge is a necessary precondition for bystander intervention to prevent violence, it has not been shown to affect rates of *perpetration* of sexual violence *per se* (Breitenbecher, 2000; DeGue *et al.*, 2014). This is explored further in Section 3.3.2.2. Neither is knowledge by itself a sufficient condition for increased bystander intervention rates in the absence of motivation to act. Ultimately,

knowledge is required as a necessary ingredient in any programme to prevent violence against women but, “changing attitudes, with the aim of ultimately changing behaviour, requires further education measures and deeper, long-term engagement” (Heisecke, 2014, p. 11).

2.2.2 Feeling responsible

Bystander programmes go much further than the transmission of knowledge or the raising of awareness concerning sexual violence. They also address other (manipulable) necessary or additional conditions or variables that have been shown to increase the likelihood of intervening. There are a considerable number of these, including, at the individual level, participants’ sense of responsibility (e.g. Banyard and Moynihan, 2011). Additional steps to assuming responsibility to act as prosocial bystanders include increasing participants’ empathy for victims and/or addressing their own attitudes towards violence against women (e.g. McMahon, 2011).

However, even if bystanders are apprised of all the reasons they should act, without confidence and skills they are unlikely to be able to make safe interventions, if at all.

2.2.3 Skills for intervening

Accordingly, a bystander intervention programme will also equip participants with the necessary skills to be confident that they can interrupt, speak out and help when violence-supportive behaviours are witnessed (Banyard and Moynihan, 2011). A comprehensive programme recognises that different interventions require the development of different knowledge and skill sets given the difference between a time-critical intervention ‘in the moment’, or an intervention involving primary, secondary or tertiary prevention (Powell, 2014). Supportive interventions with victim/survivors require very different skills from challenge interventions with (potential) perpetrators.

2.2.4 Barriers to intervening

Research demonstrates that bystanders can be impeded from intervening by an array of factors (see Figure 2). *Social influence* may indicate to a bystander that there cannot be a problem because no one else is intervening. *Audience inhibition* is a fear of embarrassing oneself in front of others. *Diffusion of responsibility* pertains to the assumption that another will intervene. *Fear of retaliation* may prevent bystanders from intervening because of perceived negative consequences to themselves. *Pluralistic ignorance* occurs when individuals do not understand, or misperceive, the desire of others to intervene which leads them to wrongly believe that their own desire to intervene must be misplaced. Related to pluralistic ignorance is the incorrect belief held by those who engage in problematic (and often highly visible) behaviour that is going unchecked, that others are like oneself when they are not (Berkowitz, 2009; 2013). This is known as false consensus. Pluralistic ignorance and false consensus are mutually reinforcing and it is this mutually reinforcing

interaction between pluralistic ignorance and false consensus that is “fundamental to the theory of social norms and its use as a prevention strategy” (Berkowitz, 2013, p. 18).

Other variables and factors which may influence whether and when bystanders will intervene can be explored with participants in programmes. They include personal characteristics (e.g. gender) and characteristics of the situation at hand requiring intervention (e.g. number of witnesses; relationship between offender and victim; physical setting; perception of danger (Banyard, 2011)).

The integration of social norms theory (section 2.3 below) into bystander intervention programming enables some of the barriers to intervention represented in Figure 2 to be ameliorated.



Figure 2. Potential barriers to intervention
(Adapted from Berkowitz, 2009, p.18)

2.3 Social norms theory

The social norms approach to behaviour change is a theory and evidence-based approach aimed at correcting misperceptions which influence behaviour (Berkowitz, 2013). The crucial point is that, “For a norm to be perpetuated, it is not necessary for the majority to believe it, but only for the majority to believe that the majority believes it” (Berkowitz, 2003, p. 261). As applied to prevention of violence against women, peer norms in society and the community that are supportive of violence may influence both perpetration and bystander behaviour.

2.3.1 Social norms theory for perpetration

Males who have negative gender role attitudes and who also endorse the belief that such violence is acceptable among their peers are more likely to perpetrate violence. Schwartz *et al.* (2001) found significantly higher rates of violence by males on campuses where male peer norm support for the use of emotional and physical partner abuse was present. Adams-Curtis and Forbes (2004) list a number of studies finding that sexually coercive men report socialising with peers supportive of sexual violence. McNaughton Reyes *et al.* (2015), in their study of adolescent boys, also found that traditional gender attitudes were significantly related to physical domestic violence perpetration among boys who endorsed high levels of acceptance of dating violence. However, holding injunctive norms (norms concerning social acceptability) about the unacceptability of dating violence seemed to act as a protective factor or ‘filter’ to prevent those with traditional attitudes from perpetrating violence. Studies such as these provide an analysis of why and how men are motivated to commit violence against women – underscoring that “the presence of ‘motivated’ offenders is assured by the continued presence in society of male peer groups that support such individual behavior” (Schwartz *et al.*, 2001, p. 628). False consensus concerning the acceptability of male violence towards women, then, “may function to facilitate violent behaviour in men (especially among men who are already pre-disposed to sexual assault and domestic violence)” (Berkowitz, 2010, p.12; see also Berkowitz, 2013; Fabiano *et al.*, 2003; Gidycz, Orchowski and Berkowitz, 2011; Loh *et al.*, 2005; Kilmartin *et al.*, 2008 and in relation to partner violence see Neighbors *et al.*, 2010). Furthermore, men’s misperceptions of other men’s sexism, attitudes and behaviours to sexual assault may also act as inhibitors to positive bystander intervention.

2.3.2 Social norms theory for bystander behaviour

The relationship between peer norms and bystander intentions is an important one: peer norms are variables for bystander intervention (Banyard, 2011) and therefore correcting negative misperceptions about peer norms should facilitate increased likelihood of helping.

2.3.3 Peer norms supportive of violence

There are some positive empirical results for social norms interventions in related fields for behaviour change and prevention (such as college drinking behaviour: see Berkowitz, 2013; 2003). In the context of sexual violence prevention, research is limited but there is evidence for a significant relationship between reported peer norms supportive of sexual violence and bystander intentions (Banyard and Moynihan, 2011; Brown and Messman-Moore, 2010). In the study by Brown and Messman-Moore (2010), willingness to intervene was more strongly related to perceived peer norms than to participants’ own reported attitudes towards sexual aggression. The literature does suggest that age, gender and year of study may interact with the relationship between perceived peer norms and bystander intent or

behaviour in as yet unpredictable ways. For example, the study by Banyard and Moynihan (2011) found, surprisingly, that higher reported peer norms in support of sexual coercion were related to higher reported intervention to disrupt sexual and intimate partner violence. This finding was true for first year students but not for students in later years.

2.3.4 Peer norms supportive of helping behaviour

There is also evidence for a relationship between peer norms supportive of helpful interventions against violence, and participants' reported *intention* to intervene (a study by Brown, Banyard and Moynihan, 2014). However, in this study ($N = 232$) the peer norms for helping did not also uniformly positively predict reported actual helping *behaviour* (other than for Black students in at least their second year of college) and they did not negatively predict the amount of missed opportunities to intervene, other than for Black male students. This suggests that the picture is complicated and further investigative research is warranted.

Thus, a potentially effective tool for a comprehensive prevention strategy might be a social norms intervention to reduce misperceptions which facilitate sexual violence such as a misperceived rape-supportive cultural environment (Schwartz *et al.*, 2001), and which are associated with willingness to intervene (Berkowitz, 2010). Such an intervention may also increase guardianship in university settings.

A social norms approach may also be used as part of an ecological approach and indeed a number of college campuses in the US have adopted successful campus-wide social norms marketing campaigns in other fields (Berkowitz, 2010).

2.4 Bystander programmes as complex models

In this section, some of the theoretical and methodological complexity of bystander programmes will be explored. The case will be made for the utility of bystander intervention programmes as a key feature of a successful prevention strategy.

It is useful to make explicit the point that bystander programmes, as delivered in the context of sexual and domestic violence prevention, are fulfilling not one, but two main purposes, in order to deliver the outcome of a reduction in community prevalence of violence. The first purpose as described above is to increase the chances that a bystander who is present will identify and then intervene to prevent an act, situation or course of conduct that is problematic.

The second main purpose fulfilled by bystander intervention programmes is that they function as a strategic vehicle for delivery of a range of potential changes to a number of the attitudes, beliefs, social and cultural norms and peer group relationships among participants that are determinative not only of enhanced active bystander likelihood (see e.g. Baldry and Pagliaro, 2014) but

also of the conditions under which a person may be willing to perpetrate problematic behaviour. In the case of violence against women, these determinants have been recognised to include empathy, gender inequitable attitudes and peer norms supportive of male violence against women (Adams-Curtis and Forbes, 2004; Jewkes, Flood and Lang, 2014; Paul and Gray, 2011; Powell, 2011; Schwartz *et al.*, 2001).

As bystander programmes have multi-faceted prevention capabilities (Banyard, Plante and Moynihan, 2004), some will use measures of attitude change and behaviour change among participants to demonstrate programme success - as a step towards taking responsibility as well as a step towards being able to contribute to more positive social norms. Others go further and seek reports of (reduced) perpetration or victimisation among participants – thus going beyond the primary purpose of a bystander programme. Measures will be explored in Part Three.

2.4.1 Minimising conditions for motivated offenders and increasing conditions for capable guardianship

From a criminological perspective, these determinants for violence map variously onto the *presence of a motivated offender* and *the absence of effective guardianship*, where effective guardianship is understood to be manifest not only literally in the presence of a person or persons intervening (e.g. making a ‘challenge intervention’), but more widely in its residence within an environment that evidences structural deterrents. Evident structural deterrents may include for example: policies against violence; a culture of gender equality; a culture of believing victims; and effective social, criminal and institutional sanctions against violence. In terms of motivation, while every offender is different and some will only be demotivated by the presence of sufficient sanctions (e.g. peer disapproval, institutional sanction, prospect of criminal record) others may be demotivated by an increase in their empathy for others or by a change in their cognitions or attitudes about sex, relationships and gender relations. In particular, the most commonly identified attitudinal risk factor for men’s sexual and domestic violence and coercion against women globally stems from gender inequality (Fulu *et al.*, 2013; Ricardo, Eads and Barker, 2011), namely, a belief in the dominance of men, and their needs or wishes and bodies, over women, who are often also seen as objects of hostility. This is why any successful prevention programme, bystander programmes being no exception, should take an ecological approach in order to address the social norms, systems and relations that sustain gender inequality and violence (Hester and Lilley, 2014; Jewkes, Flood and Lang, 2014; and see the recommendations made by Fulu *et al.*, 2013, in their report on the UN’s multi-country study of men and violence).

Thus, because a necessary step in becoming an active bystander is assuming responsibility (being motivated) to act, bystander programmes incorporate exercises that foster participants’ empathy for victims as well as fostering a critical

understanding of inequitable attitudes and peer norms supportive of male violence against women. The desired outcome is increased responsibility which is a condition for increased likelihood to act as a bystander to prevent violence. However, the literature on prevention suggests that an additional outcome of these cognitive and attitudinal shifts for participants will be a concomitant decrease in their own likelihood to perpetrate violence.

As Figure 3 (below) illustrates, there is a cyclical relationship between interventions, social norms and violence. A direct count of the increased number of interventions made by participants as a result of participating in a bystander programme will underestimate the magnitude of the effect of each intervention – or discussion, or refusal to participate in harmful practices - that contributes to a weakening of the social norms that act as scaffolding for motivated offenders and lack of guardianship (see also Banyard, Plante and Moynihan, 2004).

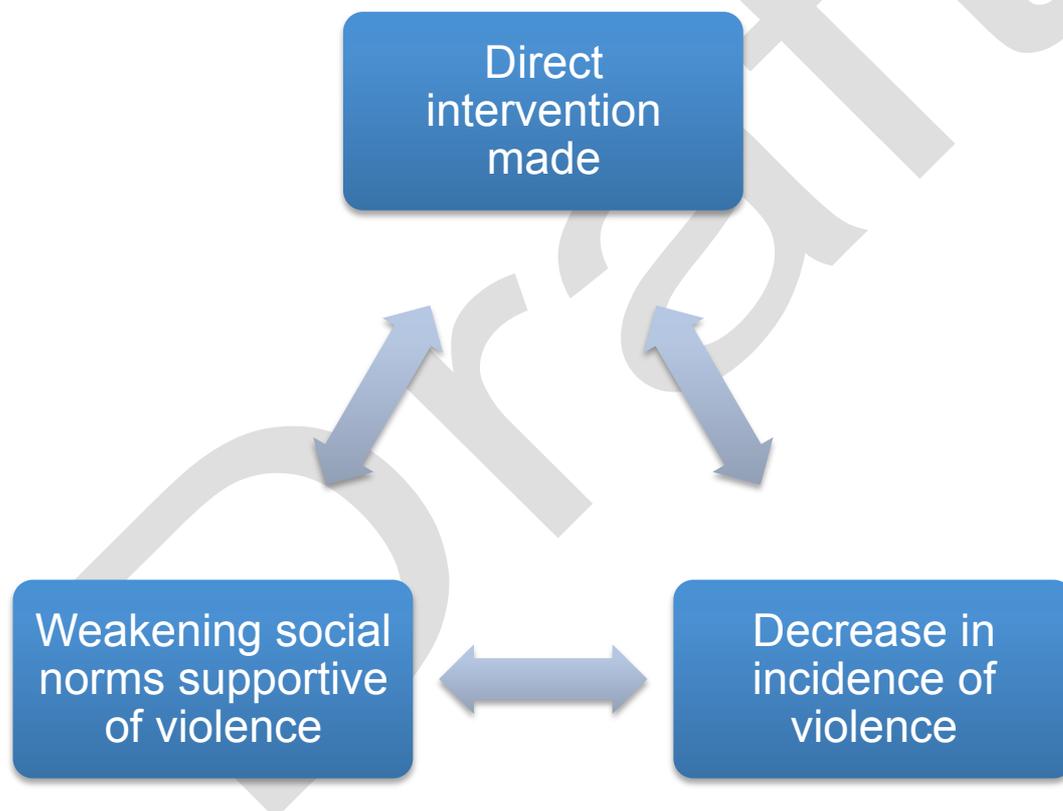


Figure 3. Cycle of change when interventions are made

2.4.1.1 Teaching about law

The relationship between knowing about the law (having cognitive awareness about the law) and changing one's behaviour as a result of this knowledge is not straightforward or indeed persuasively substantiated in the literature. In fact, there is an argument that using law as a "scare tactic" (for example, creating fear of punishment by describing lengthy sentencing) might constitute what Berkowitz

(2013, p. 38) describes as “Health Terrorism” which can produce negative outcomes including the prospect of a reactive backlash effect among participants.

However, teaching about law in a prevention programme need not be done in a castigatory way, such as by framing participants as potential perpetrators who should be deterred from offending. Law has what may be described as an educative or declaratory function – which can be framed positively: the Sexual Offences Act 2003 upholds and reinforces the boundary between acceptable and unacceptable sexual (sexually violent) behaviour and communicates it to the public (Ashworth and Horder, 2013; Chalmers and Leverick, 2008; Home Office, 2000). Consent is constructed positively in law, as a freely chosen agreement, suggesting mutual communication, where both parties are able to make that choice (“...a person consents if he agrees by choice, and has the freedom and capacity to make that choice”, s.74 SOA 2003) and this positive construction is useful. Discussing the law can be an appropriate springboard for discussing issues such as consent and rape myths in society at large.

Viewed through the lens of criminological theory there is reason to suppose that providing information about the law, e.g. behaviour that constitutes offences – such as unwanted groping constituting a sexual assault (s.3 SOA 2003) - and the seriousness with which those offences are regarded, can increase conditions for decreased motivation and increased capable guardianship. Some participants may learn that behaviours they had not recognised as problematic are in fact unlawful. In this case their increased understanding about law and punishment may prompt behaviour change for perpetration in addition to raising the probability of victim/third party reporting to authorities (see, for example, Withey, 2010).

2.4.2 Minimising conditions for presence of vulnerable/suitable victims

As Powell (2011) noted, the third criminological variable in Routine Activity Theory – the presence of a vulnerable victim or target - has the potential to be problematic if applied in a prevention framework. If the presence of a vulnerable victim is to be addressed in violence prevention in order to minimise the conditions for perpetration, it should only be done in a way that is consistent with women’s human rights and social equality, and consistent with the empowerment of women to assert their equal human rights and their social equality. In other words a prevention programme should not – inadvertently or otherwise - punish women for men’s violence by counselling restrictions on women’s freedom of movement and association, by counselling that women should unilaterally change their social habits or by conveying unilateral expectations upon women to identify risky situations. In addition to being unreasonable, such strategies can only be ‘sticking-plaster’ solutions to the problem of male violence against women. That is, they do not address the issue at its root by reducing the number of actual or potential perpetrators in the population at large

(DeGue, Simon *et al.*, 2012; DeGue *et al.*, 2014; Lonsway, 1996; Schewe and O'Donohue, 1993; Schwartz *et al.*, 2001). Further, and crucially, such strategies reflect and reinforce the self-same inequitable social norms – including the idea that male violence is normative - that contribute to the motivation of offenders and to the lack of capable guardianship of victim/survivors. In other words, attempts to *reduce incidence* by addressing the presence of victims may have the effect of *increasing incidence* by promoting motivated offending and reducing capable guardianship. Thus, efforts to prevent violence at primary, secondary and tertiary levels can ultimately be compromised by non-ecological approaches to addressing victim vulnerability. As Schwartz *et al.* have noted: “A lack of capable guardianship can be presumed in a society that trains women to blame themselves for being forcible rape victims” (2001, p. 630). An advantage of bystander programmes is that they can provide a positive, inclusive and empowering framework for prevention that acknowledges and educates participants about warning signs and situations of heightened risk for violence without making women-as-victims the gatekeepers who by extension may be perceived to hold some responsibility for that violence.

2.4.3 Additional positive social returns from delivering bystander programmes

There are additional benefits to delivering prevention programmes through a bystander intervention model. Bystander programmes enrich the student experience, and express the UNESCO characteristics for education for sustainable development (UNESCO, n.d.). Further benefits include the development of participants' critical, analytical, communication and leadership skills. Universities now acknowledge the importance of preparing students for employment and meeting employers' demands for graduates who are competent communicators and team players (CBI and NUS, 2011; Milburn, 2012). Delivering bystander programmes in universities can help students to develop their employability skills and capabilities. Participants in *The Intervention Initiative* in 2015 reported consistently very high ratings across the board at the end of the programme. The group of 213 participants rated the improvement of their communication and leadership skills for the future at an average of 4.07 on a scale of 1-5 (from negative to positive). Asked whether they would recommend the course to others, they responded with an average of 4.38 on a scale of 1-5 (Fenton and Mott, 2015).

2.5 Men's role in preventing violence against women

2.5.1 Engaging men

Engaging men represents a particular challenge in violence prevention because of the tension between identifying the role of gender/masculinity in the aetiology of

violence and identifying men as agents *against* violence. Indeed, Casey *et al.* (2012) note that, “WHO (2007) concluded that programs with the strongest impacts on men’s behavior and beliefs were those that explicitly addressed gender and masculinity-related norms” (p. 230). Yet, the problem remains that, “critically exploring traditional masculinity and its associated privileges generates one of the fundamental tensions inherent in engaging men in antiviolence work...” (pp. 230-231). Casey *et al.* also identify an emergent literature demonstrating that men may perceive gender-based prevention efforts as inherently antagonistic toward, and blaming of, men. In fact, traditionally, prevention efforts have been framed within the dynamic of men as potential perpetrators and women as potential victims (Tabachnick, 2008; Banyard, Plante and Moynihan, 2005). Unsurprisingly then, “prevention messages can be heard by some men as defining all men as perpetrators *only* and women *only* as victims” (Powell, 2011, p. 34). As individuals become defensive they inadvertently increase their levels of resistance which inhibits their receptiveness to hearing prevention messages (Banyard, Plante and Moynihan, 2004). By framing violence as an issue for everyone (Tabachnick, 2008), a bystander approach situates responsibility for prevention within the community, focussing on positivity, inclusivity and empowerment (Berkowitz, 2013). Men are thus appropriately conceptualised and positioned as positive, prosocial bystanders as opposed to (potential) perpetrators. Thus, the potential of bystander interventions to work with, and engage, men positively as “social justice allies” (Fabiano *et al.*, 2003) in ending violence against women is of particular significance.

Furthermore, a bystander approach foregrounds a *shared social identity* among students as prosocial bystanders. With this umbrella theme acting as the dominant discourse, legitimate spaces are opened for the participants to reflect – in their role as bystanders – on issues such as masculinity and sexism. This critical distance lessens the potential scope for the programme to trigger feelings of defensiveness, hostility and resistance – which are barriers to learning and to attitude change – among programme participants. This approach is appropriate for men given that most men do not perpetrate and are in a position therefore to prevent perpetration by other men (Gidycz, Orchowski and Berkowitz, 2011).

2.5.2 Voluntary versus compulsory programmes

One of the questions that educators face in their desire to engage men in prevention is whether to instigate voluntary or compulsory programmes. Voluntary programmes have been shown to be relatively unlikely to be attended by male students - and “many men who need to hear the message may strategically avoid these classes” (Rich *et al.*, 2010, p. 274). Equally, compulsory attendance may result in resistance so that “many men feel defensive and angry before presentations on violence against women even begin” (Rich *et al.*, p. 283). Bystander programmes do have the capacity for engaging men positively as outlined above, with men’s role in prevention being framed as ‘part of the solution’ (Berkowitz, 2009). Bystander programmes are

also, as we have suggested above, legitimately presented as courses that build skills for adult working life including communication, leadership and negotiation skills. The preferred approach in order to have the greatest reach may be to introduce a compulsory, timetabled programme which is carefully framed in these positive terms.

2.5.3 Backlash and monitoring

Educators should also be mindful that some prevention efforts, however well-intentioned, can actually be harmful (Flood, 2006; Hilton *et al.*, 1998; Hilton, 2000). In other words, some interventions may have the opposite effect to that intended and lead to poorer outcomes and ultimately, a potential increase, rather than a decrease, in violence against women. As Hilton (2000, p. 221) has observed in this regard, “trying to persuade people to change their attitudes in one direction can lead instead to people taking more extreme versions of their existing attitudes.” Examples within the literature include Winkel and de Kleuver’s (1997) study which found an increase in boys’ self-reported acceptance of rape myths, coerced sex and macho behaviour after a video presentation of sexual assault showing undesirable consequences for the male perpetrator. Male undergraduates in a study by Berg, Lonsway and Fitzgerald (1999) reported increased likelihood to engage in rape-supportive behaviours after listening to the account of a female rape victim.

Presenting information about peer norms may also contribute to backlash. For example, presenting information about *descriptive* norms (i.e. the high rate of campus sexual assault) may in fact lead to an increased perception among some people that sexual assault is normative behaviour on campus. However, presenting information about *injunctive* norms (the strength of social disapproval of sexual assault) is likely to be more effective (see Paul and Gray, 2011, for a discussion).

It is important that interventions are developed with strong theoretical underpinnings (Paul and Gray, 2011), then piloted and evaluated at pilot stage for potential backlash effects.

2.6 Effective prevention

Universities are in the business of providing education and therefore will have a familiarity with good pedagogical practice. Good pedagogy is key to achieving learning outcomes successfully and there is a considerable degree of overlap between good pedagogy and good practice in prevention programming, as discussed below. Nation *et al.* (2003) produced a set of principles for effective behaviour change, established over years of behavioural research. Their criteria are acknowledged by reviewers including Powell (2011) and DeGue *et al.* (2014) as being of key importance. The principles set out by Nation *et al.* (2003) comprise three categories: the characteristics of effective prevention programmes; the principles related to matching a programme with the target population; and the

principles related to implementation and evaluation. These are set out in Table 1 below. A number of the principles will be familiar to educationalists and are echoed by experts in adult education (e.g. Knowles, Holton and Swanson, 2011).

Reviews across the field of violence prevention (e.g. Anderson and Whiston, 2005; Powell, 2011; DeGue, 2014) concur that the criteria developed by Nation *et al.* map onto programme success. Additionally, where individual studies have compared outcomes using these criteria as variables, there is also support. For example, in the context of bystander prevention, longer programmes appear to have more impact (Banyard, Moynihan and Plante, 2007). Of particular import in the context of universities, there is debate in some circles about the relative merits of peer-led versus professional facilitation/teaching in prevention programming. One review (Flores and Hartlaub, 1998) highlighted the benefit of peer educators for prevention on the grounds of their credibility and connection with students, and Banyard and colleagues (e.g. Banyard, Plante and Moynihan, 2004) point to the value of peer facilitators as role models for appropriate behaviour. However, the review by Anderson and Whiston (2005) supported the use of professional, skilled and highly trained facilitators in preference to peer or graduate student facilitators. Similarly, Lee *et al.* (2007) note that prevention information should “be delivered by prepared, competent facilitators who are able to foresee potential controversies and strategically create learning opportunities” (p. 16). The significant investment in intensive training required to prepare peer educators for their role facilitating workshops was documented by Cissner in her detailed evaluation report to the U.S. Department of Education (Cissner, 2009). There are clearly arguments on both sides. We question how much training would be ‘enough’ to equip inexperienced students with the skills they need to deliver complex interventions and navigate sensitive social environments. The risks they face include encountering resistance and dealing with students who want to participate despite trigger warnings and who may become upset. Even more importantly, we question whether it can ever be fair to student facilitators to expose them to the clear risks of experiencing traumatic disclosures made to them as a result of their taking on the role of facilitator. We therefore advocate that the appropriate *university-led* response to violence prevention (regardless of student-led initiatives which may be contemporaneous) requires programming that uses trained and experienced facilitators who may or may not be university staff members and who have undergone disclosure training.

Administrators and others should be informed by the work of Nation *et al.* (2003) concerning the characteristics of successful violence prevention programmes for universities. They should ask the following questions:

- Is your proposed course of action **comprehensive** – will students be exposed to an ecological approach evidencing multiple interventions across multiple settings? (I.e. from the classroom to the social

environment; from policy to social marketing to reporting pathways – see DeGue, 2014, p. 3)

- Are **varied teaching methods** being used including skills development? (E.g. intervention skills for becoming an active bystander)
- Is the intervention being provided in **sufficient dosage**?
- Is your proposed course of action **theory driven**? (Can you justify the pedagogy of delivery and the theory of change?)
- Is your programme grounded in **positivity** – not setting participants against each other or against the institution / facilitators?
- Are you reaching participants at the **right time** in their university career?
- Is your planned intervention **socioculturally relevant**? (E.g. does it speak to the experience of your students and their social norms?)
- Have you made provision for **evaluation** (not just feedback)?
- Are your **staff / facilitators** well-trained, supported and supervised?

The characteristics of successful prevention programmes as outlined by Nation *et al.* (2003) in essence constitute scaffolding – a plan for change existing *externally* of individual participants. It is of course also necessary to theorise the *internal* plan for change – the ‘theory of change’ for each individual participant in a programme. Behaviour change itself (when it is ongoing and significant, such as giving up smoking or becoming an active bystander against violence) is a result of a number of internal processes operating at the level of the individual. For bystander intervention, the internal theory of change as represented by Latané and Darley (1970) in their concept of stages has been discussed above in Section 2.2 and is reproduced in Figure 1. It is notable that the stages for becoming an active bystander map exceptionally well, more generally, onto theories of behaviour change. Table 1 reproduces the ten processes of change identified by Prochaska and DiClemente (1983, 1984, 1986) in their Transtheoretical Theory of Change Model (TTM). For a detailed discussion of the application of the TTM to violence prevention and bystander intervention programmes see Banyard, Eckstein and Moynihan (2010). Administrators and others preparing an intervention should seek evidence that each of the complex, multi-level change processes for behaviour change denoted by the TTM has been addressed within their proposed intervention.

Table 1. Criteria for effective prevention programming

Nation <i>et al.</i> (2003)	“What works in prevention: characteristics of effective prevention programs”	
Characteristics of effective prevention programmes:	Comprehensive	Multiple interventions across multiple settings.
	Varied teaching methods	Focus on increased understanding and awareness with active skills-based component.
	Sufficient dosage	Expose participants to enough intervention as to have effects and support impact with booster or follow up intervention.
	Theory driven	Theory-driven interventions based in research. In particular aetiological theories on causes of the problem and empirically tested intervention theories which change aetiological risks.
	Positive relationships	Positive outcomes are associated with fostering strong relationships between participants and peers and others.
Principles matching programme to target population:	Appropriate timing	Timing of programmes to ensure maximal impact on the developmental trajectory of problematic behaviours and tailored to the developmental needs of participants.
	Socioculturally relevant	Relevance to cultural and community norms to achieve retention and receptiveness of participants. Involve target population in design and implementation to tailor to participant needs.
Principles related to implementation and evaluation:	Outcome evaluation	Evaluate programmes to ensure effectiveness.
	Well trained staff	Carefully selected, well-trained, supported and supervised staff enhance the effectiveness of interventions.

Prochaska and DiClemente (1983/1984/1986)	Ten Processes of Change in the Transtheoretical Theory of Change
Consciousness raising	Seeking out information about the subject.
Self-liberation	Belief in ability to carry out prevention behaviour.
Social liberation	Noticing that it would be liberating to prevent / be free of the problematic behaviour.
Self-reevaluation	Being disappointed in oneself for not preventing the behaviour.
Environmental reevaluation	Thinking about the harms caused in the environment by the problematic behaviour.
Counterconditioning	Wanting to find other ways to achieve perceived benefits of the problematic behaviour.
Stimulus control	Understanding it is helpful to avoid or interrupt cues for the behaviour.
Reinforcement management	Social rewards for prevention behaviour.
Dramatic relief	Emotionally moved by warnings about the dangers of the problematic behaviour.
Helping relationships	Access to social support for preventing the behaviour.

2.7 Implications: Effective prevention for universities

Whilst single-session interventions may be useful as one element of a comprehensive strategy to prevent violence, as the White House Task Force report (DeGue, 2014) has asserted, they “are not effective at changing behavior in the long term” (p. 1). One-off approaches are “not likely to have any impact on rates of violence if implemented as a standalone strategy or as a primary component of a prevention plan” (DeGue, 2014, p. 1). The process of achieving behaviour change is complex, encompassing multiple levels or stages and requiring time.

The evidence is sufficiently strong and sufficiently clear that we would argue the following: any institution embarking upon a strategy to tackle sexual violence, where that strategy consists solely or mainly of individual-level interventions such as one-off workshops, can not expect to make an impact on prevalence of sexual violence and may therefore *with some justification be accused of paying lip-service to the goal of reducing sexual violence.*

Bystander programmes with a social norms component and which are embedded in all students’ timetables, are likely to be maximally effective for violence prevention if they meet each of the requirements set out by Nation *et al.* (2003) and Prochaska and DiClemente (1983, 1984, 1986) as set out in Table 1.

The importance of promoting a visible culture against sexual violence cannot be overstated. A strategy based upon individual-level interventions is likely to fail in its aims unless work is done simultaneously to develop and promote effective accessible policies, to train staff, to run social marketing campaigns and to repeat messages with sufficient regularity to produce lasting attitude change and behaviour change.

Draft

Part Three: Literature review

3.1 Review Methodology

This review has utilised a narrative literature review method incorporating systematic elements, based upon the nature, aims and scope of the study as well as the time scale and costs involved. The *Review of bystander approaches in support of preventing violence against women* (Powell, 2011) was used as a starting point for the literature search as recommended by Public Health England. The research fellow, in conjunction with the wider research team and utilising UK-based research and practice networks, identified and systematically investigated:

- Key search terms (i.e. bystander intervention, public health, violence against women, sexual violence, sexual coercion, domestic abuse, pro-social, rape, prevention, education)³;
- Key databases (including JSTOR; IBSS; Heinonline; PsycINFO; Social Sciences Citation Index; Westlaw UK);
- Key websites (including Home Office; Ministry of Justice; Public Health England, Department of Health; NSPCC; Rape Crisis England and Wales; End Violence Against Women Coalition; US National Sexual Violence Resource Centre; VAWNET)⁴;
- Key publishers (including Polity Press; Routledge; Palgrave; Wiley);
- Key authors (including Berkowitz, A.; Banyard, V. L.; Brown, A. L.; Gidycz, C. A.; Katz, J.; Moynihan, M. M.; McMahon, S.; Plante, E. G.; Potter, S.)⁵.

The search results were cross-referenced against a pre-existing database of published work developed during the initial scoping of the project in order to test and reinforce the validity of the method. In conjunction with this the team also mapped existing bystander intervention programmes in the UK and reviewed the literature sources referenced in those programmes.

Criteria for exclusion from the review were developed in consideration of the aims of the review. Exclusion criteria comprised literature:

³ These search terms were combined in a number of iterations to expand and refine the literature search.

⁴ The lists provided here describe the key search terms and sites systematically investigated. Other terms and sites were also investigated.

⁵ These authors were identified as key authors in the field of bystander intervention through peer recommendation, volume and impact of output and quality of research. Searches by author were used to identify authors' own publications, and also to identify additional cross-referenced work.

- Not published in the English Language⁶;
- Not focusing on college/university students;
- Not focusing on violence;
- Focussing on genocide;
- Where attitudes or behaviour towards bystanders was a focus rather than the attitude or behaviour of bystanders;
- With a publication date prior to 2011 (cross-referenced against the Powell report).

Systematic data gathering concluded in May 2014 although references to significant publications since that time and up to March 2015 have been included where the authors felt it would be of benefit.

3.2 Availability of evidence

There is no published peer-reviewed evidence base for or against the efficacy of bystander intervention projects to address domestic violence or sexual coercion in UK universities or higher education settings. This is a reflection of the fact that the very few programmes which do exist are skeletally funded and relatively new (e.g. *The Intervention Initiative* at the University of the West of England (Fenton *et al.*, 2014); *Get SAVI* with Forum Theatre at the University of Lincoln; *You the Man* workshops at the University of Birmingham), and no large grants have been made to develop, implement or evaluate such programmes. A small grant was made by Public Health England and the University of the West of England for an evaluation of *The Intervention Initiative* which is in progress.

In contrast, in the US, large-scale funding at national, governmental and local levels together with federal law requiring educational establishments to provide education and awareness programmes have together resulted in a proliferation of sexual assault prevention programmes of which a growing number are using bystander intervention as a key component. Bystander programmes are recognised as good practice (Ricardo, Eads and Barker, 2011). The growing consensus in support of bystander programmes is reflected, for example, in the text of the proposed 2013 Campus Sexual Violence Elimination Act before Congress, explicitly requiring prevention programmes to include bystander intervention training (Coker *et al.*, 2014). Since 2012 the US Department of Justice Office on Violence Against Women has required bystander programming to be included in all the work it funds (DeGue, 2014). However, rigorous evaluation of programmes is expensive. It is also difficult to

⁶ We searched for evidence of bystander intervention work conducted in non-English speaking countries by examining the author affiliations in the papers published in leading international journals. There was no indication of a significant body of research published in languages other than English. However, the timeframe and funding scale of this project determined that only literature published in the English language was reviewed.

conduct evaluation over the longer term, as required when assessing the impact of bystander programmes, because they aim to change peer norms and institutional cultures over time. The Centers for Disease Control and Prevention have funded a number of evaluations of university prevention programmes via their Division of Violence Prevention (DeGue *et al.*, 2014).

The White House Task Force to Protect Students from Sexual Assault commissioned a review and report (DeGue, 2014) which referred to bystander programmes as among the most promising of prevention strategies for universities. The report highlighted two bystander programmes (*Bringing in the Bystander*: e.g. Banyard, Plante and Moynihan, 2004; 2005; and *Green Dot*: e.g. Coker *et al.*, 2011) for promising practice. These programmes were categorised as promising rather than effective on the basis of strict evidential criteria for primary prevention (preventing violence before it occurs), requiring outcome measures to demonstrate a significant reduction in *incidence of sexual violence perpetration*. Proxy measures and related measures will be discussed below. DeGue and colleagues (DeGue *et al.*, 2014) also published a systematic review of 140 outcome evaluations of primary prevention strategies for sexual violence perpetration, citing *Bringing in the Bystander* as a strategy with “substantial potential for impacting sexually violent behavior if subjected to rigorous evaluation on those outcomes” (p. 359) and anticipating the publication of evaluations of *Green Dot*. Since publication of the reviews by DeGue and colleagues, a rigorous evaluation of *Green Dot* has now been published and the findings are reported on below.

For ease of reading a narrative style is used in this review to describe the results from a number of studies. Large scale studies or those with findings that are key are reported in more detail with sample/population sizes (“*n*”/“*N*”) and significance values (“*p*” represents the statistical probability of a finding of difference being due to chance alone – so if *p* is less than 0.05 it means that there is at least a 95 per cent probability that the finding reflects a true difference or change brought about by the programme or intervention being investigated).

3.3 Findings

This section reviews the data for outcome measures (bystander interventions, violence and their correlates) as reported in published evaluations of bystander programmes. The analysis is themed by outcome measure as opposed to being themed by programme because programmes cannot be compared like for like. There is a wide variation between different bystander programmes in the methods and means used to address outcome variables. For example, *The Intervention Initiative* addresses students’ *lack of confidence to intervene* through a series of workshops in which, over time, students spend at least 3 hours engaging in roleplay and acting out intervention situations. Other programmes may offer much shorter workshop training

(e.g. Men Can Stop Rape's *Where Do You Stand?* bystander programme) or involve discussion rather than roleplay (e.g. some versions of the *Mentors in Violence Prevention* programme). There can also be variation between and within programmes as to how and when they are implemented. The measures available to record increases in interventions are too blunt, and the variables too numerous, to capture fine detail about comparative efficacy of programmes. Nevertheless, most bystander programmes which have resulted in the production of published evaluations are well grounded in theory. The weight of evidence, reported below, suggests that these programmes do empower participants to make interventions against violence.

3.3.1 Data on reported incidence of sexual violence as an outcome variable

As DeGue and colleagues have discussed, at the time of their reviews no published data existed that met the ideal criteria for measuring bystander programme effectiveness, i.e. where a decrease in incidence of violence in the community has been measured. Two studies had described reductions in *perpetration* as reported by participants in their bystander programmes. It appears that some of the shifts in participant psychology that are achieved through taking part in some bystander programmes act as protective factors which produce the outcome of a reduction in participants' own self-reported perpetration of violence. In this section reported perpetration of sexual violence among bystander programme participants will be examined. We also examine reported likelihood to commit violence and reported incidence of victimisation among bystander programme participants. We then go on to examine measures associated with violence perpetration.

3.3.1.1 Perpetration of violence by participants

Gidycz, Orchowski and Berkowitz (2011) reported on a controlled trial with college men of a 1.5-hour bystander and social norms programme with a 1-hour booster session 4 months later. The programme was unsuccessful in its aims of encouraging participants to be more likely to intervene. Given the short length and duration of the programme this is not unexpected. The authors did, however, find significant effects for reported perpetration of sexual aggression 4 months after the initial session (before the booster). Taking part in the programme had resulted in a significant decrease in the participants' own reported engagement in sexually aggressive acts. However, there was no significant difference in reported perpetration between the programme and control groups 7 months afterwards (and 3 months after receiving the booster session). One interpretation of their data, in line with observations made in general reviews and meta-analyses of attenuation over time in college prevention programmes (Anderson and Whiston, 2005; Brecklin and Forde, 2001; Paul and Gray, 2011), is that the effects of the programme did not last because the external environment was not supportive enough of participants' newly formed positive social norms or behaviours. An ecological model of violence prevention (Banyard, Plante

and Moynihan, 2004; Heise, 1998) requires change in social norms at the community level which in this case was not achieved, either through social marketing campaigns or through participants being successfully encouraged to challenge the behaviour of others.

The other programme to report a positive change in reported sexual aggression was *The Men's Program* (Foubert, Newberry and Tatum, 2007) which is a prevention programme for men, grounded in Belief Systems Theory, designed to encourage participants to think about themselves as potential helpers and not potential rapists - but with the aim of decreasing participants' engagement in violence rather than increasing their bystander activity. *The Men's Program*, as reported in this study, had nevertheless introduced a bystander intervention component because a previous evaluation had indicated that the addition of a specific bystander intervention module significantly improved a number of outcome measures for the programme compared with the addition of a consent education module which was less effective (Foubert and Newberry, 2006). Foubert, Newberry and Tatum (2007) found that first year college men who joined fraternities (but not those who did not join fraternities) reported significantly less perpetration of sexual coercion than those who had not taken part in the 1-hour programme, at 7 months post-programme.

Again, the outcomes of decreased rape myth acceptance and increased empathy, variables related by the authors to decreased perpetration of sexually coercive acts, are also intermediate outcomes pursued in bystander programmes for the promotion of increased positive bystander behaviour. These and other intermediate / proxy measures are discussed in later subsections.

3.3.1.2 Self-reports of likelihood to perpetrate

Self-reported *likelihood* to perpetrate rape or sexual aggression in the future is associated with a history of self-reported perpetration of sexual aggression (Breitenbecher, 2000). Likelihood to perpetrate can be used as a measure when programmes do not have provision for long-term follow up but do have capacity to report on immediate post-programme results.

Foubert and Newberry (2006), in the study referred to above, found that men who had taken part in *The Men's Program* for sexual violence prevention reported significantly less likelihood of committing sexual assault than at pre-test. This was true whether or not a bystander intervention element was included in the programme. In other words, an empathy and social identity based prevention programme with a consent education module - and the same programme with a bystander intervention module in place of the consent education module - were both equally successful in reducing participants' reported likelihood to commit sexual assault. Scores for likelihood of raping were not significantly different from pre-test although the trend was also in the expected direction.

3.3.1.3 Self-reports of victimisation

As noted above, bystander programmes have as their focus the concept of developing skills for helping others. They avoid placing responsibility or blame for violence on victims themselves. Nevertheless, they share a number of the features of feminist self-defence programming to reduce victimisation (Gidycz and Dardis, 2014) including education for enhanced ability to assess situations for risk and enhanced communication skills for challenging violence. For tertiary prevention, bystander programmes also include education about help and support pathways for victims. Each of these features can be hypothesised to have a positive effect on programme participants' future victimisation risk by empowering them to identify risk, avoid and prevent their own victimisation. We found only one bystander study in the literature that reported on participants' victimisation rates and indeed, that study (Coker *et al.*, 2014) identified significantly reduced victimisation rates among programme participants with a particularly strong effect for female participants. The authors reported a 13 per cent lower total violent victimisation rate ($p = .008$) over 9 months among female students who had received intensive training in the *Green Dot* bystander programme ($n = 326$), relative to those who had received none ($n = 3,070$). While conceptually or technically a reduction in participant victimisation may be seen as a secondary outcome of a bystander programme, the social value of this outcome is clear. Coker *et al.* (2014) use a diffusion of innovation strategy, delivering training to Peer Opinion Leaders and encouraging the spread of bystander behaviours through their social networks. If future research confirms the strength of these findings, then the benefit of delivering bystander training to as many participants as possible is indicated.

3.3.1.4 Incidence of violence in the community – perpetration and victimisation

Despite the fact that the key outcome for the ultimate success of bystander programmes is a reduction in community-level incidence of violence, this is rarely measured. The issue of accurate quantitative measurement of violence against women in individuals or their communities is beset by methodological problems in addition to the common and general problem of attracting sufficient funding for robust evaluation. Some specific issues, some of which are intractable, are set out in the box below.

As Gibbons (2013) has pointed out, the engagement of campus communities in violence prevention can create a climate of safety where victims feel more empowered to speak out. Reporting of violence against women to institutional record-keepers such as police, local rape crisis organisations or campus student welfare officers is very low relative to incidence (e.g. 10-20 per cent in the study by Stenning *et al.*, 2012). Accordingly, an increase in confidence to report may readily lead to a corresponding increase - rather than decrease - in institution-level measures of reported violence, regardless of whether incidence is in itself declining.

Moreover, in addition to being inaccurate, such measures are often unreliable in any case across time or institutions (*The Intervention Initiative* Expert Advisory Group unpublished minutes, 2014). In the UK we are further limited by a lack of any legislation or guidelines requiring institutions to record or monitor domestic and sexual violence against students as a group. Universities in the US will be required by law to report data on domestic violence from July 2015 in addition to existing requirements for sexual violence, but there are no standardised measures (McCallion and Feder, 2014).

Issues with accurately measuring rates of sexual and domestic violence in university populations

There is no study or survey in the literature that suggests there is anything other than an unacceptable prevalence of sexual harassment, rape or sexual assault in student populations. What does vary from survey to survey is the estimated percentage of students affected, even when comparing ostensibly similar populations over equivalent time frames. For example in the EU-funded study by Stenning, Mitra-Kahn and Gunby (2012), in the first wave of their research 30 per cent of female students at one English campus university reported having experienced at least one incident of stalking during their time at university (p. 20). In the second wave of research with female students at three English campus universities, the proportion reporting having experienced at least one incident of stalking during their time at university was 58.2 per cent (p. 32). This is a particularly striking example of the issue at hand. Clearly, whether incidence is assumed to be 30 per cent or 60 per cent, it is unacceptably high, but variation of this order does raise questions about validity and reliability of measures.

Self-report measures are vulnerable to a number of influences. Factors such as: whether a survey is administered online or face to face; whether definitions are couched in informal or behaviour-specific language; whether legal or emotionally-laden terminology is employed; or other seemingly small changes in wording, can have sizeable effects on self-reporting (see Fisher, Cullen and Turner, 2000; Adams-Curtis and Forbes, 2004; Hamby, 2014 for more detail). This is not to say that there is a 'right' or 'wrong' way to define a term or present a question, but researchers must be clear that the choices they make will affect the results they obtain. Hamby (2014) illustrates this with reference to gender, describing massive differences in fear ratings between males and females for interpersonal violence – but not other forms of violence - in one study, and describing how, in another study, a slight change in wording on a questionnaire resulted in completely reversed gender differences in reporting of interpersonal violence victimisation in a split sample of college students.

Inadequate return rates (very common in student surveys) and self-selection bias are also likely to skew results in unpredictable ways.

Using databases held by authorities such as the police or campus counselling services will only provide data concerning the minority of students who ever report their experience.

Finally, demand characteristics (unconsciously anticipating what a researcher would be pleased to hear, and then obliging) as well as recall bias (differences in ability to remember and report experiences) are also inevitably at play in self-report studies of violence.

New, rigorously developed and tested standard measures that are distributed across multiple sites and over a longitudinal timescale are needed. These should be agreed and adopted by universities. In the meantime, validated measures should be used, with caution and always in the context of comparison across time and/or site. Practical and emotional support pathways must be in place for survey respondents and signposted.

We identified only two bystander programme evaluations that described data collection for campus-wide (community level) reports of violence. Cissner's (2009) evaluation of the *MVP Programme* at Syracuse University recorded a 20 per cent decline in the number of sexual assaults reported to their R.A.P.E. Center after two years of the programme (from 44 to 35 incidents). However, this figure was not subjected to statistical analysis and confounding factors were recognised. Cissner also reported on data collection for violations of the Code of Student Conduct. There were no statistically significant changes attributable to the programme but the validity and reliability of the data were in any case questionable.

Coker *et al.* (2014) used self-report measures to collect campus-level data on victimisation and perpetration. They found that a randomised stratified sample of students attending the campus where the *Green Dot* bystander programme was implemented ($n = 2,768$) reported lower rates of violence victimisation and perpetration than a comparable randomised sample from two college campuses without bystander intervention training ($n = 4,258$). Sexual harassment and stalking rates were 11 per cent lower for victimisation and 19 per cent lower for perpetration ($p \leq .01$) in the intervention campus and significantly lower for males. Total violent victimisation was 9 per cent lower ($p \leq .01$). The relatively small mean difference in total unwanted sex victimisation reached significance at $p = .03$ although within this category the adjusted least square means for having "unwanted sexual activities with someone because you were too drunk or high on drugs to stop them" were 17.2 per cent lower in the intervention campus ($p = .01$).

The *Green Dot* programme was in its third consecutive year on the University of Kentucky campus at the time of data collection for this study, long enough to have

become a feature of campus culture. The results from Coker *et al.*'s study (2014) provide compelling evidence for the effectiveness of a bystander programme in reducing the perpetration and victimisation levels of violence against women in universities, at the community level.

3.3.2 Other correlates, indicators or proxy measures of violence against women among participants

In earlier sections of this review, commentary has been provided on the matrix, or cluster, of risk and protective factors that are generally agreed to be related to sexual and domestic violence victimisation and perpetration. Additionally, it has been noted that in order to be an effective bystander one must meet certain goals having passed through certain stages. Hence there are two reasons why evaluations of bystander programmes include indirect or proxy measures. The first is to evaluate violence prevention likelihood using measures that are known to correlate with violence incidence, where it is difficult or impossible to measure incidence or prevalence satisfactorily. The second is to evaluate whether programmes are working and in what way they are working for bystanders by addressing whether participants appear to have passed through the stages for becoming active prosocial bystanders.

3.3.2.1 Data on proxy, indirect and related variables for violence

In the study by Gidycz, Orchowski and Berkowitz (2011), intermediate outcome measures related to changes in participants' reported sexual aggression were reported in a significant time (pre-test; 4 months post-test; 7 months post-test) x group (control; intervention) interaction ($p < .01$) including:

- increased estimation of other men's likelihood to intervene (which would have a theoretical deterrent effect on perpetration);
- less reported exposure to explicit materials and less sense of reinforcement for engaging in sexually aggressive behaviour (behaviour change resulting from changes in perceived norms following correction of misperceptions, and/or from increased empathy);
- increased recognition of coercion as nonconsensual (facilitating empathy which is a protective factor for sexual aggression, and/or producing a reasoned action deterrent to perpetration).

Each of these outcomes reported above, and associated in the study with a decrease in reported sexual aggression, are also related more or less strongly to intermediate outcomes for becoming an active bystander (Banyard, 2011; Brown, Banyard and Moynihan, 2014) illustrating our argument for the effectiveness of bystander programmes through addressing prevention at multiple levels.

3.3.2.2 Knowledge

As stated earlier, there is no evidence that the accumulation of knowledge about violence against women *per se* (e.g. learning about law on sexual consent, or about prevalence) directly affects incidence of violence at the level of the community or the individual. However, knowledge is theorised as a factor for violence prevention and specifically for bystander intervention. In support of this, Banyard *et al.* (2014) found that lack of awareness about sexual and relationship abuse was related to lower self-reported bystander behaviour for interpersonal and sexual violence.

The following bystander studies have reported on knowledge accumulation measures:

- Banyard, Plante and Moynihan (2005) – knowledge of facts about sexual violence (consent, prevalence, definitions) and knowledge about helpful bystander behaviours, increased significantly for programme participants including at 12 months post-test. Knowledge was correlated both with improvement in attitudes and with increased reported helping behaviours;
- Cares *et al.* (2015) – some significant increase in knowledge about sexual assault was recorded post-intervention;
- Gidycz, Orchowski and Berkowitz (2011) – significantly increased ability to correctly identify one of two rape scenarios as nonconsensual, 7 months after completion of the programme;
- Lynch and Fleming (2005, reported in Mitchell and Freitag, 2011) - significantly increased understanding of the content and issues presented through the *SAVE Forum Theatre for Bystanders* programme.

3.3.2.3 Attitudes and beliefs

Various measures are used throughout the literature to capture participants' reported attitudes towards gender equality and gender roles, attitudes towards violence against women, attitudes towards those who use violence against women, attitudes towards those who are subjected to violence against women, and beliefs about the severity of violence against women. (We use beliefs here to mean cognitive elements of attitudes to violence against women, in contrast to 'knowledge' as reported above which refers to being aware of facts). Each of these 'subsets' of attitude may have a different pathway in any theoretical model of change, yet they are frequently analysed summatively. Adams-Curtis and Forbes (2004) reported on a number of studies investigating relationships between reported attitudes, cognitions and sexual coercion. They argued that the factor of affective (emotional) hostility towards women accounts for most of the correlation between measures of sexism, rape myth acceptance or adversarial sexual beliefs with perpetration: "In other words, simply holding rape-supportive beliefs, in the absence of the affective component of hostility, may not contribute to sexual coercion. Thus, a focus on

challenging cognitive beliefs regarding sexual coercion would prove ineffective in reducing the incidence of sexual coercion” (p. 104). As we have discussed, however, attitudes and cognitions are related in the literature to additional variables of interest (beyond perpetration rates) in a bystander intervention model because they may be related to improvements in primary, secondary or tertiary bystander intervention behaviour.

The following bystander studies have reported on attitude and belief measures:

- Banyard, Moynihan and Plante (2007) reported significantly improved IRMA (Illinois Rape Myth Acceptance Scale) scores as well as College Date Rape Attitude scores from pre-test to post-test and to 2 months post-test among participants in a one-session programme and a three-session programme of *Bringing in the Bystander*. With some reservations, these improvements appeared to persist at 12 months ($n = 389$; $n = 17 - 137$);
- In an evaluation of the 2-day *Mentors in Violence Prevention* programme with undergraduates, Cissner (2009) reported a significant reduction from pre-test to post-test in responses to a “gender violence” scale described in her report as revealing sexist attitudes / assessing attitudes towards violence against women. The reduction was significant among workshop participants ($n = 321$; $p < .001$) and peer educators who received an extra 5 hours training ($n = 103$; $p < .001$). The change was also significant relative to a comparison group ($n = 395$, $p < .001$). Examination of the items used (pp. 69-70) suggests that a number of potentially distinctive constructs were present in the 16-item scale including victim-blaming, gender role stereotyping or benevolent sexism, hostile sexism, attitudes about controlling behaviour and attitudes about rape;
- Gidycz, Orchowski and Berkowitz (2011) (*The Men’s Project* – short 2.5 hour programme) found no significant change in either rape myth acceptance or in hypergender ideology scale scores;
- Amar, Sutherland and Kesler (2012) reported on a modified delivery of the *Bringing in the Bystander* programme. Using summed scores on the IRMA scale they found a significant difference in scores between pre-test and post-test ($n = 142$, $p < .001$);
- A number of other studies found improvements in IRMA scores from pre-test to post-test and beyond including Banyard, Moynihan and Crossman (2009); Cares *et al.* (2015) (both *Bringing in the Bystander*); Coker *et al.* (2011) (*Green Dot SEEDS* training); Foubert and Newberry (2006); Langhinrichsen-Rohling *et al.* (2011) (both *The Men’s Program*); and Stewart (2014) (*The Men’s Project* – 22 hour programme). Stewart (2014) also measured significant reductions in hostile sexism and benevolent sexism scores ($n = 36$, $p < .05$).

3.3.2.4 Empathy

Empathy with (potential) victims of violence has theoretical importance, both as a protective factor for perpetration and a motivating factor for bystander intervention (Banyard, Plante and Moynihan 2004; Casey and Lindhorst, 2009; Deitz *et al.*, 1982; Powell, 2011). Despite this, as Paul and Gray (2011) have pointed out, few prevention studies have attempted to measure empathy. We found only one study of prevention programmes involving bystander training that measured and reported empathy. Foubert and Newberry (2006) (*The Men's Program*) used Deitz *et al.*'s (1982) Rape Empathy Scale. This requires participants to rate their attributions concerning rape on a scale between two paired oppositional statements concerning rape. A number of these statements pair sympathy for rapists against sympathy for rape victims and a number concern rape myths and/or hostile sexism. Foubert and Newberry found that programme participants reported significantly more empathy towards female rape survivors at post-test than the control group as measured by this scale ($p < .05$).

The evidence is strong for the effectiveness of bystander programmes in bringing about positive changes in participants' attitudes (beliefs and feelings) about violence against women and towards victims. As Paul and Gray (2011) among others have observed, the wider positive benefits of attitude change – over and above any relation to incidence of violence – are many and include a more accepting, supportive environment for victims whether at disclosure, in the wider working or studying context or indeed within the criminal justice and trial by jury systems.

3.3.2.5 Data on peer norm perceptions

While the literature as described above provides theoretical and limited empirical evidence for associations between perceptions of peer norms and bystander intentions or behaviour, it is rare for studies to report on the impact of bystander programmes on peer norm perceptions.

Two bystander studies have reported on peer norm perceptions:

- Gidycz, Orchowski and Berkowitz (2011) reported no significant effect of their programme on perceptions of peer disapproval for sexually aggressive behaviour. They reported mixed results for perception of peer likelihood to intervene, concluding overall that the men in their social norms and bystander intervention programme reported increased perceptions that their peers would intervene from pre-test to post-test in comparison with the control group;
- Cissner (2009) reported that students perceived their peers to hold more sexist attitudes than themselves at pre-test, and that this measure significantly decreased for workshop participants at post-test. However,

the peer educators who were trained by adult staff trainers did not significantly change their perceptions of sexist peer norms.

3.3.3 Increased reporting of interventions made, as a variable

As outlined above, while the distal or long-term outcome for all violence prevention programmes is to reduce the incidence of violence occurring in the community, a primary outcome for any bystander intervention programme will be an increase in the number of interventions made by programme participants to prevent violence.

However, accurate and reliable measurement of this outcome is far from assured. It has long been acknowledged in behavioural science that behaviour is not necessarily predicted well by related reported attitudes (LaPiere, 1934; Fazio, 1986) or intentions (Sheeran, 2002) which means that measures of reported *intention* to intervene – which will be reported in the next section - may not predict actual intervention rates. For this reason, some researchers may aspire to measure reports of ‘actual’ interventions made over a given period of time, as opposed to reported attitudes or intent to make interventions. Yet while the commitment to measure (reported) behaviour may be an attempt to increase accuracy, there is in fact no evidence to support the accuracy of participants’ recall of intervention behaviours or of opportunities to intervene. Three decades ago, Bernard *et al.* (1984) reviewed research in the field of retrospective recall of behaviour. The authors made a convincing case for the extreme unreliability of such measures, concluding that “on average, about half of what informants report is probably incorrect in some way” (p. 503). Nevertheless retrospective recall of behaviour continues to be measured and reported widely in research.

Notwithstanding the potential for recall bias and other demand characteristics, it may be broadly useful to record changes in reported intervention from pre-test to post-test and in comparison with control groups.

We found only two published studies (both pertaining to the same dataset) where reports of actual bystander behaviours were elicited:

- Banyard, Moynihan and Plante (2007) found increased reporting of bystander behaviours at two months post-test but not at 12 months for both one-session plus booster and three-session plus booster groups. At 4 months only the one-session group’s reported intervention rate was significantly different from pre-test. In fact, reported bystander behaviour also differed significantly from pre-test to post-test for the control group and the authors note that the pre-test to post-test correlation for the control group, which should have been high, was only 0.38;
- Qualitative analysis of focus groups conducted with the same participants (Banyard, Plante and Moynihan, 2005) revealed that participants had an excellent memory of their bystander planning. While

male participants reported higher awareness than before, they were less likely to report having made positive interventions than the female participants who tended to say that they were intervening more, and were able to give examples.

It is worth noting that social conditions may influence the number of opportunities to intervene and that it is useful to consider interventions made as a proportion of perceived opportunities to intervene presented (Brown, Banyard and Moynihan, 2014).

3.3.4 Data on steps towards intervening

Banyard and colleagues (e.g. Banyard, Plante and Moynihan, 2005; Banyard, Eckstein and Moynihan, 2010; Banyard *et al.*, 2014) have used theories of behaviour change to inform the development and use of a number of measures to assess variables and factors contributing to increased likelihood of intervention. These measures are useful to researchers who wish to examine the potential differential effect of prevention programmes on participants commencing programmes at different stages of preparedness to intervene (see Banyard, 2014; Brown, Banyard and Moynihan, 2014). While no measure has a defined ‘tipping point’ for intervention, the measures are also useful for monitoring baseline and post-intervention preparedness for action and for demonstrating progress towards being an active bystander. A detailed analysis of these variables is outside the scope of this review but key points are summarised below.

3.3.4.1 Taking responsibility as a step towards being an active bystander:

- Banyard, Plante and Moynihan (2005) (*Bringing in the Bystander*) found significant ($p \leq .001$) increases across measures of “contemplation” (taking responsibility) as a measure of readiness to change (later renamed readiness to help) for both the one-session group ($n = 128-129$) and more strongly for the three-session group ($n = 123-124$) with no change in the control group ($n = 108-110$);
- Moynihan *et al.* (2011) (*Bringing in the Bystander*) found that sorority members ($n = 28$) reported a greater sense of bystander responsibility from pre-test to post-test ($p < .023$) where there was no significant improvement for the control group ($n = 18$);
- Amar, Sutherland and Kesler (2012) (*Bringing in the Bystander*) reported a significantly increased sense of responsibility for helping among participants from pre-test to post-test ($n = 148$; $p < .001$).

3.3.4.2 Denial of there being a problem as a barrier to being an active bystander:

- Banyard, Plante and Moynihan (2005) (*Bringing in the Bystander*) found significant ($p \leq .001$) decreases across measures of “precontemplation” (level of denial) as a measure of readiness to change (later renamed readiness to help) for both the one-session group ($n = 128-129$) and more strongly for the three-session group ($n = 123-124$) with no change in the control group ($n = 108-110$);
- Amar, Sutherland and Kesler (2012) (*Bringing in the Bystander*) reported a significantly decreased level of denial of violence being a problem on campus from pre-test to post-test ($n = 153$; $p < .001$);
- Moynihan *et al.* (2011) (*Bringing in the Bystander*) found no difference between the control and programme participants in their reported denial scores between pre-test and 6 weeks post-test although in both cases the denial scores decreased;
- Cares *et al.* (2015) (*Bringing in the Bystander*) measured denial (precontemplation) scores across two campuses. Denial scores decreased significantly from pre-test to post-test ($n = 289-293$; $p < .001$) and remained significantly lower at 12 months ($n = 154-158$; $p < .01$) for students who had been exposed to a social marketing campaign in addition to the programme, whereas denial scores were no different for participants in the control group ($n = 294-301$) or the group who received only the social marketing campaign ($n = 180-188$).

3.3.4.3 Decisional balance in favour of intervention as a personal decision, weighed against factors mitigating against intervention, as a step towards being an active bystander:

- Banyard, Moynihan and Plante (2007) (*Bringing in the Bystander*) reported significantly increased decisional balance scores from pre-test to post-test for the one-session group ($n = 128-129$) and the three-session group ($n = 123-124$; $p < .001$). Scores were also significantly increased at 2 months (one session: $n = 92-93$; $p < .05$) (three sessions: $n = 96-97$; $p < .001$). There was no significant increase in the control group at 2 months although there was a significant *decrease* in the control group from pre-test to post-test ($n = 108-110$; $p < .01$). More detail on the same study data is available in Banyard, Plante and Moynihan (2005);
- Banyard, Moynihan and Crossman (2009) (*Bringing in the Bystander*) reported that decisional balance scores were not significantly different from pre-test to 6 weeks post-test ($n = 185$). This is owing to significant increases in participants’ agreement with the pros (positives) of being an

active bystander as well as significant increases in their agreement with the cons (risks, or downsides);

- Ahrens, Rich and Ullman (2011) (*InterACT Theatre performance*) found no effect of their programme on perceived personal benefits of intervening.

3.3.4.4 Perceiving bystander interventions as helpful as a step towards becoming an active bystander:

- Ahrens, Rich and Ullman (2011) (*InterACT Theatre performance*) reported that students significantly increased their perception of bystander interventions as being helpful from pre-test to post-test and sustained at 3-months follow-up.

3.3.4.5 Confidence to intervene (self-efficacy) as a step towards being an active bystander:

- Lynch and Fleming (2005, reported in Mitchell and Freitag, 2011) (*SAVE Forum Theatre*) reportedly found that students' perceptions that they would be able to engage in ethical interventions increased significantly from pre-test to post-test;
- Banyard, Moynihan and Plante (2007) (*Bringing in the Bystander*) reported significantly increased efficacy scores from pre-test to post-test and from pre-test to 2 month follow-up for both the one-session group ($n = 92-129$) and the three-session group ($n = 96-124$) ($p < .001$). There was no significant increase in the control group. More detail on the same study data is available in Banyard, Plante and Moynihan (2005);
- Banyard, Moynihan and Crossman (2009) (*Bringing in the Bystander*) reported significantly increased efficacy scores from pre-test to post-test ($n = 193$; $p = .000$);
- Cissner (2009) (*Mentors in Violence Prevention*) reported a significantly improved sense of self-efficacy from pre-test to post-test among both workshop participants ($n = 321$, $p < .001$) and peer educators ($n = 103$, $p < .001$);
- Langhinrichsen-Rohling *et al.* (2011) (*The Men's Program*) reported significantly increased self-efficacy scores for programme participants ($n = 85$) compared to controls ($n = 92$) from pre-test to post-test ($p < .001$);
- Moynihan *et al.* (2011) (*Bringing in the Bystander*) found that sorority members ($n = 28$) showed improved confidence as bystanders from pre-test to 6 weeks post-test ($p < .003$) where there was no significant improvement for the control group ($n = 18$);
- Cares *et al.* (2015) (*Bringing in the Bystander*) found that self-efficacy measures increased significantly from pre-test to post-test ($n = 289-293$;

$p < .001$) while they *decreased* significantly in the control group ($n = 78-80$; $p < .05$). Efficacy measures remained significantly improved at 12 months ($n = 154-158$; $p < .01$) where participants had been exposed to the programme plus a social marketing campaign, whereas there was no significant increase for participants who only received a social marketing campaign ($n = 180-188$). Results were stronger for women than for men and on the rural, primarily residential campus where the programme had run for longer, compared with an urban, primarily commuter campus that was new to the programme.

3.3.5 Data on intention to make increased interventions

Intention to intervene can be used as a measure when programmes do not have provision for long-term follow up but do have capacity to report on immediate post-programme results.

- Banyard, Moynihan and Plante (2007) (*Bringing in the Bystander*) reported significantly increased intention to intervene scores from pre-test to post-test and from pre-test to 2 month follow-up for both the one-session group ($n = 92-129$) and the three-session group ($n = 96-124$) ($p < .001$). There was no significant increase in the control group. More detail on the same study data is available in Banyard, Plante and Moynihan (2005);
- Banyard, Moynihan and Crossman (2009) (*Bringing in the Bystander*) reported significantly increased willingness to help scores from pre-test to post-test ($n = 191$; $p = .000$);
- Cissner (2009) (*Mentors in Violence Prevention*) reported that all participants had a significantly increased sense that they could intervene from pre-test to post-test ($n = 424$; $p < .001$);
- Ahrens, Rich and Ullman (2011) (*InterACT Theatre performance*) reported significantly increased self-reported likelihood of engaging in bystander interventions from pre-test to post-test, and from post-test to follow-up at 3 months for those who had tended at baseline to have lower initial beliefs about the helpfulness of bystander interventions ($n = 509$; $p < .05$);
- Langhinrichsen-Rohling *et al.* (2011) (*The Men's Program*) reported significantly increased willingness to help scores for programme participants ($n = 85$) compared to controls ($n = 92$) from pre-test to post-test ($p < .001$) although the pre-test to post-test increase for the comparison group was also significant ($p < .001$). However, at pre-test the difference in scores between the programme participants and control group was not significant while it was significant (programme participants having significantly higher scores) at post-test ($p < .001$);

- Moynihan *et al.* (2011) (*Bringing in the Bystander*) found that sorority members ($n = 28$) reported increased intent to help from pre-test to 6 weeks post-test ($p < .012$) where there was no significant improvement for the control group ($n = 18$);
- Amar, Sutherland and Kesler (2012) (*Bringing in the Bystander*) reported a significant increase in bystander intention to help from pre-test to post-test ($N = 153$; $p < .001$);
- Cares *et al.* (2015) (*Bringing in the Bystander*) found significantly increased scores for intent to help friends ($n = 289-293$; $p < .01$) and intent to help strangers ($p < .001$) from pre-test to post-test although these effects did not endure at 12 months for programme participants. They also found some anomalous results (significant decrease at $p < .001$ for intent to help friends in the control group and at 12 months for those only exposed to the social marketing campaign).

3.3.6 Data on effectiveness of interventions

It is of note that whilst a number of studies report on interventions made, there appears to be no method developed for assessing the effectiveness of interventions made.

3.4 Conclusions from the research data

Studies reporting on the effectiveness of bystander intervention programmes use a variety of variables as outcome measures. The evidence base reveals consistently positive outcomes across a range of variables.

There are difficulties with measuring community-level changes in violence. There are also difficulties with measuring bystander interventions: in addition to issues of recall and effectiveness, opportunities for bystander interventions are likely to decrease over time when a successful programme is in place (social norms are changed in a positive direction so there is less problematic behaviour in evidence in the community).

Imperfect though the measures are, there are clear and positive changes reported consistently within the literature for participants in bystander programmes. These positive changes are behavioural, cognitive and attitudinal. Statistically significant changes have been reported for participants in bystander intervention programmes in the following areas (we use 'violence' as a term to encompass any form of sexual and or domestic violence):

- Decreased perpetration of violence;
- Decreased likelihood of perpetrating violence;
- Decreased violence victimisation;
- Decreased incidence of community violence (perpetration);

- Decreased incidence of community violence (victimisation);
- Increased knowledge about violence (consent, prevalence, definitions);
- Decreased rape myth acceptance;
- Decreased sexist attitudes;
- Increased empathy towards rape survivors;
- Decreased perception of peer sexist attitudes;
- Increased bystander interventions made;
- Increased responsibility to make interventions;
- Decreased denial of violence as a problem;
- Increased confidence to intervene;
- Increased intention to intervene.

In conclusion, since the review by Powell (2011) there has been increased interest from the public health and academic communities regarding the power of bystander intervention programmes to be effective in the prevention of sexual and domestic violence against women. A number of new studies – building on existing programmes – have extended the evidence base, testing more variables with increased methodological sophistication and rigour. Studies show the ability of bystander programmes to address the complex aetiology of violence as situated in the individual within the context of their wider social environment, indicating a strong probability that community incidence of violence can be diminished through enhanced primary, secondary and tertiary prevention.

Part Four: Development of *The Intervention Initiative*

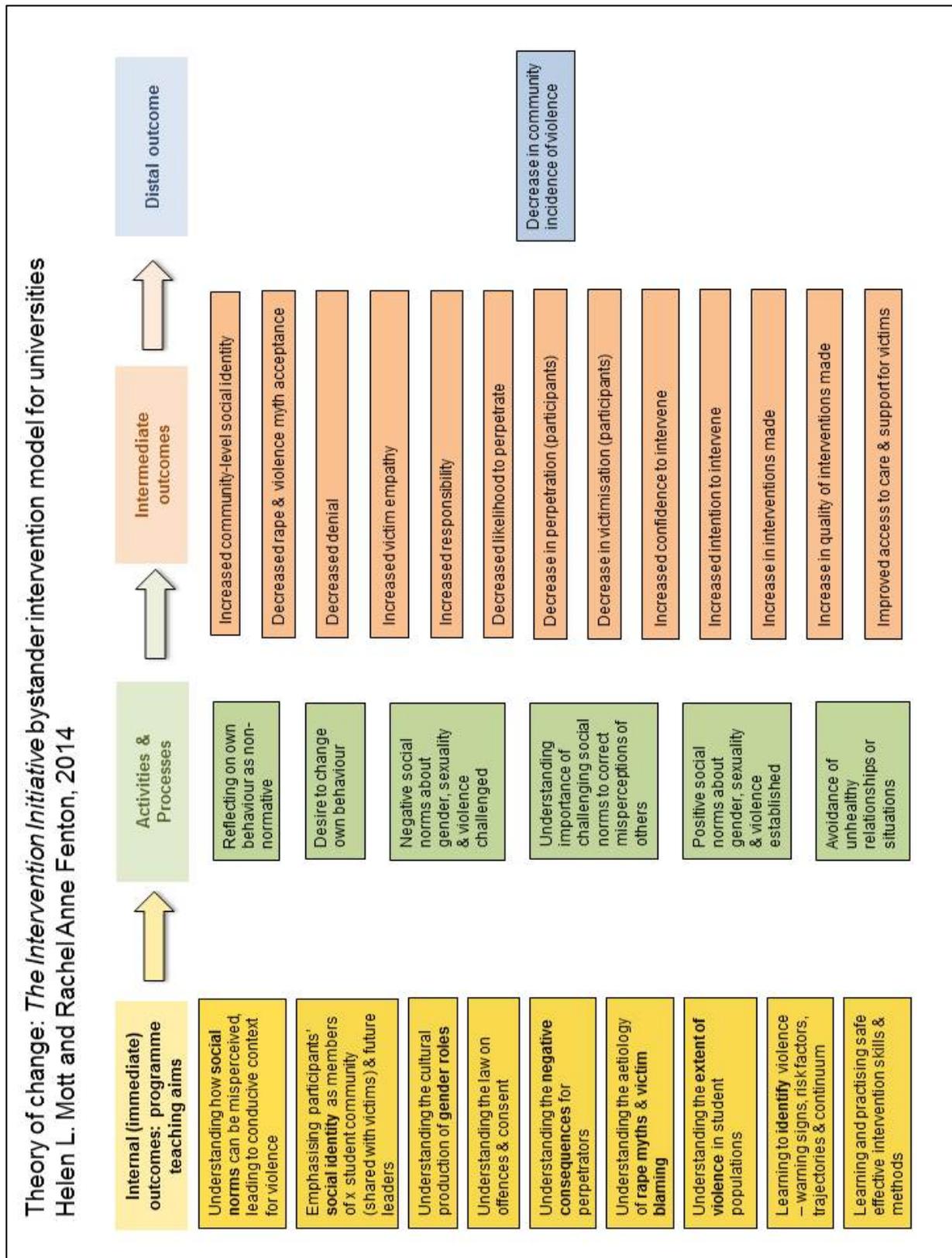
This literature review was commissioned by Public Health England as the precursor to the development of a bespoke prevention programme for English universities.

In our consideration of the evidence for the elements that constitute the most effective - or “Rolls Royce” (Mountstevens, 2014) of prevention programmes for university settings we conclude that bystander intervention programmes represent the best alignment in theory and practice to achieve a reduction in the incidence of sexual and domestic violence against women in universities.

Having analysed theories of prevention (Part Two; Table 1) and theories (Part Two) underpinning and supporting demonstrably effective bystander models (Part Three), we created a theory of change model to guide development of the toolkit commissioned by Public Health England. The theory of change is represented in Figure 4, below.

The resulting toolkit is *The Intervention Initiative*, available at www.uwe.ac.uk/interventioninitiative. We produced a theoretical rationale to accompany the toolkit which follows the timeline of the intervention, explaining the pedagogical reasoning behind each interlinked element of the intervention (Fenton, Mott and Rumney, 2014).

Table 2. Theory of change model



Part Five: Concluding remarks and future directions

The role of universities in our society is to create future citizens and future leaders, and to support every student through academic and pastoral care to reach their full potential in life. = Universities are concerned with equipping students not only with intellectual knowledge but also with professional and real world skills and abilities for citizenship and leadership.

The cost of domestic and sexual violence to the UK economy at the current time is counted in the billions (Walby, 2004; 2009). Government, big business and employers of all sizes, together with Public Health agencies, are all major stakeholders alongside universities and the Higher Education sector, in preventing violence against women and promoting skills for life. A concerted strategic approach is required.

Evidence-based bystander intervention programmes work to prevent violence against women, are valued by students, and provide additional social returns. This is in contrast to the unproven impact of short-term initiatives or programmes that have not been developed in accordance with a sound theoretical and pedagogical framework, or evaluated rigorously. These may well have a supporting role but do not constitute a sufficient university-led prevention approach. We recommend that UK universities implement and evaluate bystander intervention programmes, in accordance with the principles set out in this review, embedded within a well-defined multilevel strategic approach. To do so should not only disrupt individual and community wide incidence of sexual and domestic violence within the immediate university culture but also – in accordance with the ecological model of violence prevention - extend over time to have wider social impact.

There are no standardised measures of the prevalence and incidence of sexual and domestic violence and other forms of violence against women in UK universities, nor is there evidence that universities are collecting data in any systematic manner. The absence of an agreed set of valid, reliable measures capable of indicating differences within and between universities, and within and between student groups participating in prevention programmes, is a serious obstacle to research. We recommend that attention is urgently paid to the development of new, rigorously developed and tested standard measures that can be distributed across multiple sites and over a longitudinal timescale. These should be agreed and adopted by universities. They should be designed to capture information about all forms of violence against women, including sexual coercion and domestic abuse as well as even more under-documented forms of prevalent violence such as so-called honour

based violence and the sexual exploitation of students. In the meantime, existing validated measures (see Hamby, 2014, for a critique) should be used, with caution, and always in the context of comparison across time and/or site. It is imperative that practical and emotional support pathways must be in place and signposted for students in advance of the administration of surveys.

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Centre for Legal Research

**Director: Professor Phil Rumney
University of the West of England
Frenchay Campus
Coldharbour Lane
Frenchay
Bristol BS16 1QY**

Telephone 0117 32 82899

Facsimile 0117 32 82268

www.uwe.ac.uk



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