

## Experimentally Testing the Effectiveness of a Campus-based Bystander Intervention Model Using Peer Education and Theater

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This study compared level of exposure to a peer education-based bystander intervention program (*SCREAM Theater*) and its impact on a range of bystander-related outcomes in situations involving sexual violence with incoming undergraduate college students. Students were assessed on these outcomes a total of six times over an 18-month period. Participants were randomly assigned to one of three groups, including those students who received one-dose only, those who received three doses, and those who received three doses plus a booster.

### The Program

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### Methods

Incoming first year undergraduate students were recruited to participate in the study. Students were invited to participate in a pretest at New Student Orientation, and then five online post-tests over the next 18 months. A number of validated measures were used to assess outcomes such as bystander intentions, bystander behavior, bystander efficacy, perceptions of peer bystander norms, and rape myth acceptance. Additionally, a number of demographic variables were collected including gender and race. A total of 1390 students were included in the final analytic sample.

### Key Findings

Overall, this study demonstrated that the *SCREAM Theater* intervention resulted in a number of positive outcomes for students who participated.

Students in the one session, three session, and booster groups all presented some positive changes over time. For many outcomes, increased dosage resulted in better outcomes, although these findings varied and revealed a complex relationship among outcomes.

***The program positively impacted bystander behaviors.***

Analyses indicated a significant increase in bystander behaviors for both the one and three dose groups in the short and long-term, as well as a positive indirect impact of the intervention on bystander behaviors through its effects on bystander intentions and bystander efficacy. This finding is especially important for both programmatic and analytic reasons.

Programmatically, demonstrating a positive increase in actual behaviors is significant. Many bystander programs only measure attitudes or intentions rather than actual behaviors. The fact that participation in *SCREAM Theater* showed behavioral impact is promising.

Additionally, the analysis was able to demonstrate the complex relationship among variables and outcomes. For example, while bystander behaviors were not directly related to the dosage of the intervention, they were related through the program's impact on bystander intentions and efficacy, and their relationship with one another.

According to our findings, participation in the three dose group had a small but significant impact on bystander intentions, bystander efficacy, and ultimately on bystander behaviors. These findings suggest that the relationship among bystander outcomes are quite complex.

***The program positively impacted bystander intentions, especially in the short term.***

The study found a significant increase in behavioral intentions after one dose of SCREAM. The three-dose group had significantly higher behavioral intention scores for the first three months after receiving the intervention. However, in the long term (11 and 15 months after the three-dose group received additional doses), these increases were not sustained for both groups.

The effects of the booster session were complicated. The booster session did not sustain the initial positive changes in bystander outcomes. However, further analysis showed that the relationship between positive bystander intentions at 11 months predicting positive bystander intentions at 15 months was strongest for those who received a booster.

Together, these findings paint a complex picture of bystander intentions over time. It appears that SCREAM was most effective in positively impacting short term bystander intentions (up to six months from the first dose), but less effective in sustaining the changes over time. Further research is needed to better determine how to sustain changes over the long term, and to explore the best potential design and implementation of booster sessions.

***The program successfully lowered some rape myths-but not others.***

While many studies look at “rape myths” as one scale, the current study recognized the importance of looking at different types of rape myths for a more nuanced approach.

Short-term results indicated that one dose of intervention was effective in decreasing rape myth beliefs for three subscales: *She asked for it*, *He did not mean to*, and *She lied*.

Longer-term analysis indicates a significant decrease in those same three areas for both the group that received one dose and the group that received three doses of the intervention. However, a small effect was found showing the three dose group had a greater decrease in rape myths overall when considering a broader interpretation of significance. Those receiving the booster session did not appear to have significantly better outcomes.

It is unclear why certain rape myths decreased but others did not. Those subscales that did not decrease are “It was not really rape” and “He did not mean to-intoxicated”. These findings suggest that students may need further education and discussion on issues related to understanding what constitutes sexual assault and how alcohol is related. In particular, there may be the belief that perpetrators are not as accountable if they are intoxicated.

Many times, sexual violence prevention programs treat rape myths as a monolithic construct. These findings suggest that a more nuanced approach is needed to understand the various types of rape myths, as certain types may be more challenging to change. This may also vary based on a particular campus or community culture, and therefore it is important to discern which types of rape myths are most prevalent and entrenched so that programs can be tailored.

***For many outcomes, dosage is related to better outcomes.***

Our analyses indicated that for a number of outcomes related to bystander intervention and attitudes about sexual violence, those that received more doses fared better. Long-term structural equation modeling analyses indicated that booster sessions were effective in strengthening gains in bystander intentions, efficacy, and behaviors over time as well as improving the effect of bystander intentions on bystander behaviors over time.

This supports previous findings that exposure to ongoing bystander education results in stronger bystander outcomes (Coker et al, 2011; Katz & Moore, 2013). However, these findings were not universal; for example, the booster sessions did not impact rape myths. Further work should explore those areas that did not seem to be impacted by dosage.

## Conclusion & Further Directions

This study provides critical information for those interested in addressing and preventing sexual assault on college campuses. With increased demands from policy makers, university administrators, and the general public to provide students with safe campus settings, programs like *SCREAM Theater* provide evidenced-based prevention strategies to engage students on these campuses to be active bystanders. Results indicated that this peer-led theater education program improves attitudes about rape and enhances the intentions of students to become active bystanders when given the opportunity to intervene, as well as resulting in actual increases in bystander behavior. Additionally, one dose of this program works; additional doses strengthen the effects of the program.

There are a number of questions still remaining about the study that will be examined in future analyses. For example, it is important to consider whether the program worked in the same way based on a number of other variables, including race, knowing someone sexually assaulted, and perpetration history. This study also lays the foundation for future research to examine key questions that are important to the field. Further work is needed to compare different bystander intervention education modalities. For example, comparing the impact of peer education theater with lecture format and online methods would provide useful information for universities and colleges who are looking to implement effective bystander intervention programs. Comparing the effectiveness of peer education theater and other modalities across campuses provides another important potential line of inquiry.

Given the recent national focus on preventing campus sexual assault, there is a need to determine what programs are effective nationwide. Campus cultures vary and therefore cross-campus studies would be beneficial.

On the other hand, it is also important to explore whether various types of bystander intervention are equally effective for the many sub-groups and communities that exist on college campuses such as LGBT populations, fraternity and sorority members, and student athletes. Addressing sexual violence on campus belongs to the community that lives and works on these campuses. Engaging students to become active bystanders to step in when sexually inappropriate behaviors are exhibited is one critical step to engaging the whole community to respond and react to sexual violence.

Implementing at least one or more doses of *SCREAM Theater* would be a solid step towards providing a safer campus and addressing concerns raised by policy makers and the general public.

## Collaborators

This research occurred through a collaborative effort between the PI, Dr. Sarah McMahon, and Co-PI, Dr. Judy L. Postmus, along with the Center on Violence against Women and Children (VAWC) at the Rutgers School of Social Work, and the Office for Violence Prevention and Victim Assistance (VPVA), under the leadership of Ruth Anne Koenick at Rutgers. VPVA is a campus based program that provides crisis intervention, counseling and advocacy for victims/ survivors of sexual and relationship violence stalking and peer harassment. It is also responsible for providing a range of programs including its primary prevention program, SCREAMing to Prevent Violence and other Bystander Intervention programming. An Advisory Board was created to help guide the entire research process, and was comprised of representatives from VAWC, VPVA, as well as a student representative and consultants for the grant (including Dr. N. Andrew Peterson from Rutgers, and Dr. Victoria L. Banyard from the University of New Hampshire).

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