



D. Getting Started Promoting Prevention

TABLE OF CONTENTS

Introduction	2
D1. Explanation of Key Terms	3
D2. Prevention Principles	4
Public Health and Violence Prevention.....	5
Continuum for the Prevention of Violence	6
Levels of Prevention.....	6
Directed Prevention Strategies.....	7
Impact of Primary Prevention on Interpersonal Violence	7
Risk and Protective Factors.....	7
Socio-Ecological Approach to Violence Prevention	8
Promoting Protective Factors	10
D3. Prevention Programming	12
Characteristics of Effective Prevention Programs.....	12
A Comprehensive Prevention Approach.....	13
Prevention as Part of Comprehensive Campus Response	14
Planning Your Programming Approach	15
Who is Your Target Audience?.....	17
Instructional Methods Tailored to Your Audience and Goals	18
Types and Topics: Prevention Activities	20
Emerging Promising Practices	25
D4. Primer on Bystander Intervention	27
Background.....	27
Types of Bystanders	28
Obstacles to Response	29
Options for Responding.....	29
Safety First.....	30
Features of Effective Bystander Intervention Programs.....	30
References	31

INTRODUCTION

Colleges have significant responsibilities related to proactively dealing with the complex problem of interpersonal violence on their campuses. With the growing recognition of the pervasiveness of sexual assault, dating and domestic violence and stalking, college administrators have had to come face-to-face with the reality that their campuses are not safe havens from these types of violence. This reality can make it difficult for admissions staff to promote their institutions to potential students and parents and potentially influence student retention. In recent decades, federal legislation has required colleges to increasingly account for violence on their campuses, implement effective responses when violence occurs and take preventative measures. Colleges expose themselves to liability risk if they don't comply with these legal mandates or otherwise fail to adequately address the problem. (Paragraph drawn in part from Langford, 2004.)

Unfortunately, there are no easy answers to address this multi-faceted problem. It cannot be solved by a one-time program, nor is there a one size-fits-all blueprint for change (Langford, 2004). In fact, to foster zero-tolerance for interpersonal violence on a college campus, it is becoming clear that a comprehensive approach that supports the broader institutional mission (e.g., to create an environment conducive to student learning and growth) is necessary (Langford, 2004). Both effective intervention and prevention of the violence are integral to such a comprehensive strategy. In *C. Responding to Disclosures*, interventions were explored. This chapter focuses on facilitating interpersonal violence prevention on college campuses.

Townsend (2009) pointed out that violence prevention is a slow process—it requires long-term commitment and vision as well as an awareness that the long-term goal (e.g., cultural values and social norms and actions that support zero tolerance for interpersonal violence) must be broken down into incremental steps. Incorporating evaluation into the process allows you to know if you are making process towards the intermediate steps and the ultimate goal. Townsend also noted that cultural values and social norms that support interpersonal violence and other forms of oppression are entrenched in our society. It's important that you recognize that moving towards zero tolerance will not happen overnight but requires a long-term plan of getting the prevention message out repeatedly in multiple settings until it “sticks.” Also recognize that you cannot do prevention promotion in isolation. Instead, you need to reach out to potential allies on your campus and in the community to promulgate the prevention message across systems and settings and maintain the positive changes facilitated through your programming.

Campus SaVe Prevention Programming Requirements

Over the last 20 years or so, colleges have been a venue for the development of interpersonal violence prevention programming, particularly around sexual violence (Gibbon, 2013). One of the most recent and compelling reasons for colleges to engage in interpersonal violence prevention programming is the fact that federal law mandates it. Specifically, the Campus Sexual Violence Elimination Act (**Campus SaVE Act**) of the Clery Act requires colleges to explain in their annual security reports their policies related to prevention and promoting awareness of domestic violence, dating violence, sexual assault and stalking. Under this

legislation, **colleges must have primary prevention and awareness programs for incoming students and new employees, and ongoing prevention and awareness programs for students and faculty.** At the least, these programs should make clear:

- ✓ The **institution prohibits these offenses**;
- ✓ **Jurisdictional definitions**—domestic violence, dating violence, sexual assault and stalking;
- ✓ The **definition of consent** in reference to sexual activity;
- ✓ Safe and positive **options for bystander intervention**; and
- ✓ Information on **risk reduction** to recognize warning signs of abusive behavior.

In recognition of your role in facilitating interpersonal violence prevention programming for your campus, *D. Getting Started Promoting Prevention* offers basic information on prevention principles and college prevention programming issues and options. Note that while a handful of specific program examples are mentioned in this chapter, *F. Resources* provides more comprehensive information and links.



As indicated in *B. What You Need to Know*, **the term interpersonal violence may be used interchangeably with the terms gender-based violence or power-based personal violence.** While each views the violence slightly differently, **all involve violence used against a person using power, control and/or intimidation to harm another.** To promote prevention, it is important to use terms and approaches that are inclusive of all who may experience or perpetrate these types of violent acts, while recognizing that specific populations are more likely to experience the violence (e.g., women, students with disabilities, etc.) and specific populations are more likely to be the perpetrators (e.g., men).



Seek out research, publications and programs related to interpersonal violence prevention. **VAWnet** offers links and special collections. A few examples: [Domestic Violence Prevention](#), [Sexual Violence Prevention](#), [Special Collection: Sexual Violence in Lesbian, Gay, Bisexual, Transgender, Intersex, or Queer \(LGBTIQ\) Communities](#), [Special Collection: Preventing and Responding to Domestic Violence in Lesbian, Gay, Bisexual, Transgender, or Queer \(LGBTQ\) Communities](#), [Special Collection: Violence in the Lives of the Deaf or Hard of Hearing](#), [Men and Boys: Preventing Sexual and Intimate Partner Violence](#), and [Special Collection: Safety & Privacy in a Digital World](#). The **MINCAVA Electronic Clearinghouse** offers links to articles on [sexual violence on college campuses](#). The **National Sexual Violence Resource Center (NSVRC)** offers links to [campus sexual violence resources](#).



Acquiring new knowledge and putting it into practice is a process. You are not expected to “know” the information in the toolkit all at once. Instead, you can **work through toolkit sections at your own pace, building your knowledge base as you go.**

D1. EXPLANATION OF KEY TERMS

It is helpful to be familiar with a few prevention terms in advance (listed in the order they are introduced in this chapter, with references cited in upcoming sections):

Public health: Activities that society undertakes to assure the conditions in which people can be healthy, including organized efforts to “prevent, identify and counter threats to the health and safety of the public.”

Prevention: In the public health field, violence prevention is a systematic strategy or approach that reduces the likelihood of risk of victimization or perpetration, delays the onset of adverse health problems, or reduces the harm resulting from conditions or behaviors.

Levels of prevention: Prevention efforts exist on a continuum—primary, secondary and tertiary prevention. **Primary prevention** approaches seek to prevent violence before it occurs.

Secondary prevention approaches seek to identify those who are already affected by violence and reduce the severity of the impact. **Tertiary prevention** approaches take place after a violent event that aim to lessen its long-term effects and reduce the chances of reoccurrence. Together, these efforts seek to bring about change in individuals, relationships, communities and society by promoting factors that buffer against violence.

Directed prevention interventions categorize approaches by the targeted audience.

Universal prevention interventions are directed at groups or the general population regardless of individual risk for violence perpetration or victimization. **Selected prevention interventions** target those who are thought to have a heightened risk for violence perpetration or victimization. **Indicated prevention interventions** are directed at those who have already perpetrated violence or have been victimized.

Socio-ecological model of violence prevention: This model explains the occurrence of violence and helps identify potential prevention strategies on four levels: individual, relationship, community and societal. A fifth level may also be considered: institutional. Factors at one level are often influenced by factors at other levels. Primary prevention strategies simultaneously address multiple levels of the model.

Risk factors: Characteristics that increase the likelihood of a person becoming a victim or perpetrator of violence. **Protective factors:** Those factors that decrease the likelihood of a person becoming a victim or perpetrator of violence, as they provide a buffer against risk.

Bystander intervention: A strategy in the prevention field to mobilize bystanders to intervene when they see acts of violence or situations that are likely to escalate to violence. Such interventions can help redirect the peer pressure toward healthy and respectful social norms.

D2. PREVENTION PRINCIPLES

(This section was adapted from several other WV FRIS toolkits and training modules.)

Three key principles discussed in this section are critical when doing interpersonal violence prevention work (adapted from [VetoViolence](#)):

- ✓ **A public health approach** to help you move from the problem of interpersonal violence to the potential solutions;

- ✓ **A focus on primary prevention**—strategies to stop violence before it initially occurs—to reduce the factors that put students at risk for experiencing and perpetrating violence and increase the factors that buffer students from risk; and
- ✓ **A social-ecological model** to explain the complex web of factors that may contribute to or buffer against violence and to develop more comprehensive campus programming strategies.

Public Health and Violence Prevention

A **public health approach** offers those who promote prevention of interpersonal violence on college campuses **a foundation for framing the problem that draws upon knowledge from many disciplines and for recommending effective prevention strategies.**

Public health is described as “the science of protecting and improving the health of communities through education, promotion of healthy lifestyles and research for disease and injury prevention” (Association of Schools of Public Health). **Rather than focusing on one individual at a time, it addresses the health of the whole population** (PREVENT, 2005b). Public health involves an organized effort to “prevent, identify and counter threats to the health and safety of the public” (Turnock, 1997). Unquestionably, interpersonal violence is one of those threats.

The public health perspective asks foundational questions: Where does the problem begin? How could we prevent it from occurring in the first place? (Centers for Disease Control and Prevention or CDC). **To answer these questions, it relies on solid evidence**, drawing upon knowledge from many disciplines including medicine, epidemiology, sociology, psychology, criminology, education and economics (World Health Organization & London School of Hygiene and Tropical Medicine, 2010). The evidence gathered can then be used to identify the extent of the problem, determine the factors that need to be addressed to reduce the occurrence and severity of the problem, and guide program and policy development (PREVENT, 2005b). Public health **emphasizes a culturally appropriate response to health problems**—recognizing that cultural practices and beliefs influence the way data on the problem should be collected and how prevention programs should be developed and disseminated (PREVENT, 2005b).

From the public health perspective, interpersonal violence is viewed as a preventable problem. Data indicates it is caused by the interplay of multiple factors, rather than due to a single factor. Notably, this approach does not identify actions of victims as a cause of violence.

In summary, **steps in the public health approach to interpersonal violence prevention** include (CDC):

1. **Define the problem**—collect data to determine who, what, where, when and how.
2. **Identify risk and protective factors**—scientific research methods are used to identify the factors that increase the risk for interpersonal violence. Factors that may buffer against these risk factors are also identified. The goal of violence prevention is to decrease risk factors and increase protective factors. (See *D. Risk and Protective Factors*)
3. **Develop and test prevention strategies.**
4. **Strategies shown to be effective are disseminated and implemented broadly.**



Because violence is a multi-faceted problem, violence prevention requires an equally multi-faceted response involving many sectors of society (World Health

Organization & London School of Hygiene and Tropical Medicine, 2010). Many communities are moving toward multidisciplinary collaboration to not only intervene when violence occurs, but to collectively consider how to best prevent it from occurring. Key players in this response include community-based organizations, criminal and civil justice systems, state and local health departments, schools, health care systems, social services, media, policy-making bodies and workplaces (PREVENT, 2005b).



Public health is rooted in science and medicine, while sexual and domestic violence have been viewed more as social justice issues related to the oppression of women. However, both the public health and anti-violence against women fields have “strong underpinnings in social equity.” Clearly, sexual violence, domestic violence, dating violence and stalking are public health problems. **Partnerships between the public health field and those working to end interpersonal violence make sense** given the limited resources available for research, intervention and prevention, and the great potential for maximizing effectiveness of prevention through collaboration. (Paragraph adapted from Chamberlain, 2008.)

Continuum for the Prevention of Violence

LEVELS OF PREVENTION

From a public health perspective, there are **three levels on the prevention continuum** that focus on **WHEN** an intervention has an effect on a specific problem (PREVENT, 2005a):

1. **Primary prevention** includes approaches that take place **BEFORE** violence has occurred to prevent initial perpetration or victimization. Examples include activities to prevent interpersonal violence that teach students about healthy relationships and healthy sexuality, teach them to intervene when they see situations that are likely to escalate to violence, and encourage college administrators to develop school policies that support these behaviors and include consequences for noncompliance (adapted from Valle et al., 2007).
2. **Secondary prevention** includes immediate responses **AFTER** violence has occurred to deal with the short-term consequences. Examples related to sexual violence might include crisis intervention, advocacy and medical care for a victim, SANE (sexual assault nurse examiner) programs to improve the collection of forensic evidence, and the development of SARTs (sexual assault response teams) to create a collaborative multidisciplinary response.
3. **Tertiary prevention** includes long-term responses **AFTER** violence to deal with the lasting consequences, with the goal of lessening the long-term effects and reducing the chances of reoccurrence. Tertiary prevention is designed to address problems through policies, programs and services for people who have already experienced a problem (e.g., those who have been victimized by interpersonal violence). Examples are counseling services and self-defense classes for survivors of interpersonal violence and sex offender treatment/batterer intervention programs.

DIRECTED PREVENTION STRATEGIES

The continuum of violence prevention interventions can also be divided into the following **three categories**, based on **WHO is at risk for victimization or perpetration and to whom primary prevention efforts should be directed** (CDC, 2004; PREVENT, 2005a):

1. **Universal interventions** are directed at groups or the general population regardless of individual risk for violence perpetration or victimization. Examples of universal interventions might include public awareness campaigns about violence, bystander intervention programs and reducing media violence. In universal interventions, everyone is protected whether they experience increased risk factors. Everyone shares the burden of the intervention.
2. **Selected interventions** target those who are thought to have a heightened risk for violence perpetration or victimization. Selected interventions might include activities for students who use drugs and/or alcohol, sexuality education for persons with intellectual disabilities and college programs addressing high-risk components of Greek life.
3. **Indicated interventions** are directed at those who have already perpetrated violence or have been victimized. Examples of indicated interventions might be counseling services and crisis intervention for victims, incarceration of and treatment for perpetrators, or campus-wide discussions following a sexual assault of a student.

Primary prevention targets universal and selected approaches, since its focus is to stop violence before it occurs (PREVENT, 2005a). The differentiation between universal and selected approaches speaks to the dilemma of viewing interpersonal violence as a problem facing all members of society while acknowledging that specific populations are more at risk for being victims or perpetrators.

Impact of Primary Prevention on Interpersonal Violence

“There is an often quoted parable that tells of a man and woman fishing downstream. Suddenly a person comes down the river struggling for life. The fisherfolk pull her out. Then another comes who must be rescued. This happens all afternoon and the fisherfolk are getting very tired from constantly pulling people from the river.

When they go upstream, they find that people are drawn to the edge to look at the river, but there is no safe way to do this. Many of them fall. The fisherfolk go to the community leaders and report the number of people who have fallen into the river. They also report that this is due to the lack of a protective barrier on the cliff. Community leaders build a wall behind which people may safely view the water. Some still fall, but there are many fewer victims to rescue.”(CDC, 2004; PREVENT, 2005a)

The community above employed a primary prevention strategy to stop the problem from happening in the first place, instead of expending all resources and energy on rescuing people who have fallen into the river (PREVENT, 2005a).

RISK AND PROTECTIVE FACTORS

A primary prevention approach typically employs a variety of strategies to counteract the root causes of a specific problem (PREVENT, 2005a), addressing related risk factors and promoting protective factors:

- ✓ **A risk factor** is a behavior or condition that increases vulnerability to a specific condition.
- ✓ **A protective factor** is a behavior, social influence or policy that reduces vulnerability to a specific condition or other behaviors. In an earlier example of primary prevention activities that focused on reducing risk for interpersonal violence, healthy relationships and healthy sexuality were protective factors which the programming was promoting.

In the parable above, the community devised a protective barrier to prevent people who get too close to the cliff's edge from accidentally falling into the river (the root problem). Other primary prevention strategies they might employ include posting warning signs near the cliff and publicizing related safety tips.



The presence of a risk factor associated with interpersonal violence does not mean that a person will always experience violence or always become a perpetrator. Similarly, a single protective factor does not necessarily prevent violence. However, **the presence of multiple protective factors can decrease the chance of victimization and/or perpetration** (Perry).

Socio-Ecological Approach to Violence Prevention

(Also see the CDC's [The Socio-Ecological Method: A Framework for Violence Prevention](#).)

The public health approach to violence prevention is driven by a **socio-ecological model** that **outlines how an individual's health status is influenced not just by that individual's attitudes and practices, but also by personal relationships and community and societal factors** (PREVENT, 2005c). The World Health Organization (WHO) (Krug et al., 2002), used a variation of this model to discuss violence prevention. Based on this WHO discussion, the CDC delineated specific **risk factors for perpetration of violence**. Levels include (CDC, 2004):

- 1. Individual level**—biological and personal history factors that increase the likelihood of becoming a perpetrator. Risk factors include but are not limited to alcohol and/or drug use, attitudes and beliefs that support interpersonal violence, impulsive and other antisocial tendencies, preference for impersonal sex, hostility towards women and childhood history of sexual abuse or witnessing family violence (Krug et al., 2002). An individual may also be influenced by demographic factors such as age, income and education (PREVENT, 2005c).
- 2. Relationship level**—factors that increase risk because of relationships with peers, intimate partners and family members. These relationships can shape an individual's behavior and range of experiences (Krug et al., 2002).
- 3. Community level**—settings in which social interactions occur (e.g., schools, churches, neighborhoods and workplaces) and characteristics of these settings that are associated

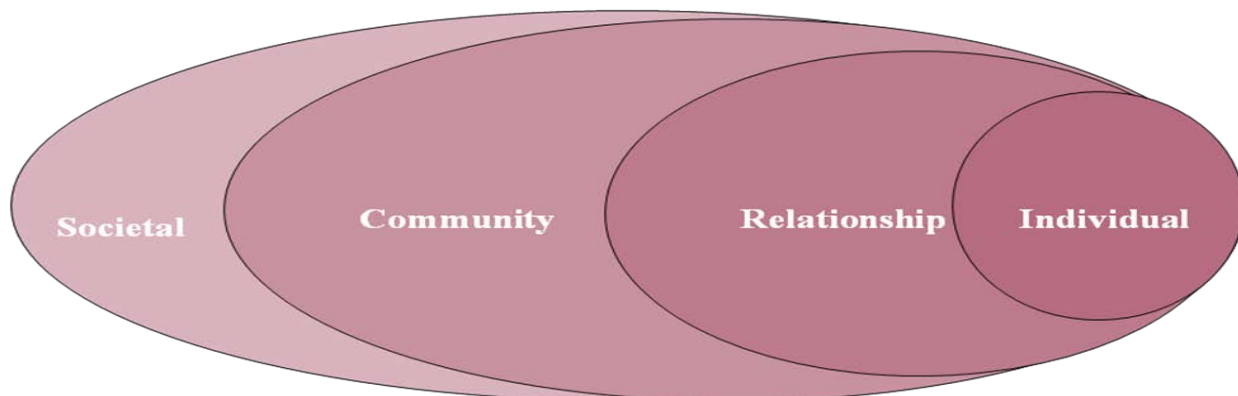
with becoming perpetrators. For example, a lack of enforced campus policies on sexual harassment can send a message that this type of violence is tolerated.

4. **Societal level**—broad societal factors that help create a climate in which violence is encouraged or inhibited. Risk factors include but are not limited to gender inequality, religious or cultural belief systems, societal norms and economic or social policies that create or sustain gaps and tensions between groups of people. A society may choose to legislate behavior (public policy), affecting norms indirectly, or develop interventions that influence social norms directly—an example of the latter would be to determine the social norms that contribute to a rape culture and identify strategies for changing those norms (Washington Coalition of Sexual Assault Programs, 2007).

A variation of this model adds an institutional level, recognizing that people spend one third to one half of their time in institutional settings, particularly schools and workplaces. In the four-level model above, the majority of interventions included at an institutional level are included in the community or societal levels. (Paragraph from the Washington Coalition of Sexual Assault Programs, 2007).

How do the levels work together to influence culture and behavior?

Below is a graphic illustration of the socio-ecological model, as found in Chapter 1 (p. 12) of the WHO report.



In this “nested” illustration, **risk factors work together to influence culture and behaviors related to the perpetration of violence** (CDC, 2004). The illustration highlights the **pivotal role that societal factors play in influencing behaviors and interactions between people and entities** (PREVENT, 2005c). (*B. What You Need to Know: Risk Factors for Sexual and Domestic Violence Perpetration* illustrates this model in chart form.) Curtis and Love (2009) offered an analogy for this model and the importance of societal-level prevention efforts:

“Tree roots distribute nourishment to the trunk, branches and leaves. The **societal level issues** of oppression and norms that support inequality **correspond to the roots** because they influence every other level. In this case, the roots send information and expectations to the other parts of the tree. Additionally, these norms hold in place factors and behaviors at the other levels, just as roots anchor a tree. The other levels of the

ecological model correspond to the different pieces of the tree as follows: the **community level to the trunk**, the **relationship level to the branches** and the **individual level to the leaves** of the tree.

If we think about the process of creating lasting change, we can see how **treating the whole system through the roots is more effective than focusing on the leaves or branches**. If only the leaves, branches or trunk are treated, then the tree may still be unhealthy. **We must become prevention gardeners and tend to the roots of the tree**. We can work for change at the root level by addressing issues of oppression and creating equity across all groups. **If we make the roots healthy, the tree will take care of the trunk, branches and leaves.**”

Promoting Protective Factors

As mentioned earlier, **promoting protective factors that influence culture and behaviors related to violence can buffer against the risk of interpersonal violence victimization or perpetration** (CDC, 2009). For example, protective factors that guard against youth violence and substance abuse which can be encouraged through prevention programming include (Hawkins, Catalano & Miller, 1992; Lang, Rosati, Jones & Garcia, 1996; National Center for Mental Health Promotion and Youth Violence Prevention, 2004):

Individual Protective Factors

- ✓ Resilient temperament;
- ✓ Positive social orientation;
- ✓ Positive relationships that promote close bonds and encourage a young person's competence; and
- ✓ Healthy beliefs and clear standards.

Family Protective Factors

- ✓ Positive bonding among family members;
- ✓ Parenting that includes high levels of warmth, avoids severe criticism and provides a sense of basic trust and clear and consistent expectations, including children's participation in family decisions and responsibilities; and
- ✓ Emotionally supportive parents/family.

School Protective Factors

- ✓ High expectations for youth;
- ✓ Clear standards and rules for appropriate behavior; and
- ✓ Opportunities for youth participation in after-school activities.

Community Protective Factors

- ✓ High expectations for youth;
- ✓ Opportunities for youth participation in community activities; and
- ✓ Community norms and laws unfavorable to violence or substance abuse.

Those doing college interpersonal violence prevention work should be aware of both the risk factors for perpetration and victimization of interpersonal violence and the protective factors that guard against interpersonal violence. Campus prevention programming should promote these factors. **Ideally, multiple prevention activities simultaneously occur to promote protective factors at the different levels of the socio-ecological model** (see the examples below). The key is to recognize that different levels of the model reinforce various aspects of the prevention message.



Examples of approaches to sexual violence prevention based on the socio-ecological model and promotion of protective factors ([*The Social Ecological Model*](#), Washington Coalition of Sexual Assault Programs):

- ✓ **Individual level programming** that promotes healthy beliefs and rejection of social norms that support oppression—educational sessions that encourage individuals to challenge violence, sexism, racism, homophobia, etc. Comprehensive sexuality curricula that promote healthy sexual relationships.
- ✓ **Relationship level programming** that builds skills to interrupt and address inappropriate comments and behaviors that support violence—peer or bystander programs that give students tools to change the climate of their social circles by rejecting or intervening when they hear or witness behaviors that support violence or sexism.
- ✓ **Community/institutional level programming** that reinforces the college’s expectation of student conduct—a social marketing campaign on campus that promotes consent and safe practices in sexual relationships. Corresponding workgroup that proposes a student bill of sexual rights.
- ✓ **Societal level programming** that targets law makers to increase funding for prevention activities at colleges and to assist campus administrators in enforcing zero-tolerance for interpersonal violence—a program that provides state law makers with reasons to promote college-based interpersonal violence prevention. An initiative that reaches out to college leadership to offer assistance in implementing the prevention stipulations of the Campus SaVE Act.



The Sexuality Information and Education Council of the United States (2004) offers examples of **levels of the socio-ecological model if healthy sexuality were a successful part of sexual violence prevention** (National Sexual Violence Resource Center, 2012):

- ✓ Individuals would know that the human development process includes sexual development, which may or may not include reproduction or sexual experience;
 - ✓ Relationships would be based on honest communication, respect and consensual sexual interactions;
 - ✓ Individuals would express their sexuality while respecting other’s rights;
 - ✓ Communities would work to prevent sexual violence by advocating for legislation that was in line with their values related to sexuality; and
 - ✓ Society would promote access to age-appropriate and accurate information on sexuality and work to enhance individuals’ ability to create and maintain healthy relationships.
-

D3. PREVENTION PROGRAMMING

To prepare to choose among programming options and implement a programming plan, this section discusses characteristics associated with effective prevention programs and provides a framework for developing a comprehensive, multi-level primary prevention approach that is well coordinated with the overall campus response to interpersonal violence. It offers tools to assist in planning, explanations about audiences, types and topics for activities, and related emerging promising practices.

Characteristics of Effective Prevention Programs

In *What Works in Prevention: Principles of Effective Prevention Programs* (Nation et al., 2003), the below **characteristics were consistently associated with effective prevention programs**:

1. **Comprehensive**: Strategies should include multiple components and affect multiple settings to address a wide range of risk and protective factors of the target problem.
2. **Varied teaching methods**: Strategies should include multiple teaching methods, including some type of active, skills-based component.
3. **Sufficient dosage**: Participants need to be exposed to enough of the activity for it to have an effect.
4. **Theory driven**: Preventive strategies should have a scientific justification or logical rationale.
5. **Positive relationships**: Programs should foster strong, stable, positive relationships between children and adults (for the college population, between students and mentors/authority figures as well as among students).
6. **Appropriately timed**: Program activities should happen at a developmental stage in a participant's life that can have maximal impact;
7. **Socio-culturally relevant**: Programs should be tailored to fit within cultural beliefs and practices of specific groups as well as local community norms.
8. **Outcome evaluation**: A systematic outcome evaluation is necessary to determine whether a program or strategy worked.
9. **Well-trained staff**: Programs need to be implemented by staff members who are sensitive, competent and have received sufficient training, support and supervision.

Berkowitz (2004) similarly suggested that effective prevention programs have a number of characteristics that are independent of particular issues or topical areas. In particular, effective campus prevention programs should be:

- ✓ **Comprehensive** (all relevant campus community members or systems should be involved and have clearly defined roles and responsibilities);
- ✓ **Intensive** (offer learning opportunities that are interactive and sustained over time with active rather than passive participation);
- ✓ **Relevant to the audience** (tailored to the age, culture and socioeconomic status of the campus community and take into consideration an individual's peer group experience); and

- ✓ **Deliver positive messages** (build on participants' values and predisposition to act in a positive manner).

A Comprehensive Prevention Approach

(Section adapted from Cohen & Chehimi; Chamberlain, 2008)

How do you begin to craft a comprehensive approach to violence prevention for your campus? The “**spectrum of prevention**” below offers a framework for developing effective, **multi-level primary prevention programs** that is aligned with the socio-ecological model. The framework for the [spectrum of prevention](#) was originally developed by L. Cohen of the Prevention Institute, based on the clinical work of M. Swift in treating developmental disabilities.

Level of Spectrum	Definition	Example
1. Strengthening individual knowledge and skills	Enhancing an individual's capacity to prevent injury and promote safety	<ul style="list-style-type: none"> ✓ Bystander intervention programs ✓ Freshmen orientation education on campus intervention and prevention policies. ✓ Programs that teach healthy sexuality and healthy relationship skills.
2. Promoting community education	Reaching groups of people with information and resources to promote health and safety	<ul style="list-style-type: none"> ✓ Campus awareness campaigns and plays that reinforce positive norms and models of bystander action ✓ Awards program recognizing campus and community leaders working to prevent interpersonal violence
3. Educating providers	Informing providers who will transmit skills and knowledge to others	<ul style="list-style-type: none"> ✓ Training for faculty/staff to interrupt inappropriate comments and behaviors that promote a climate condoning violence
4. Fostering coalitions and networks	Bringing together groups and individuals for broader goals and greater impact	<ul style="list-style-type: none"> ✓ Partnerships with local rape crisis centers and domestic violence programs in prevention programming and public awareness efforts
5. Changing organizational practices	Adopting regulations and shaping norms to improve health and safety	<ul style="list-style-type: none"> ✓ Implementation and enforcement of campus violence prevention policies
6. Influencing policy and legislation	Developing strategies to change laws and policies to influence outcomes	<ul style="list-style-type: none"> ✓ Creation of campus policies to provide sexual and domestic violence prevention curricula to students

The spectrum of prevention is a useful planning tool to develop broad initiatives for preventing interpersonal violence. The six levels of the spectrum allow practitioners to identify a variety of areas in which prevention can be implemented. When used together, each level reinforces the others, leading to greater effectiveness. Some programming may involve several different levels on the spectrum. For example, a bystander intervention program may not only include educational sessions for students and college personnel, but also a media campaign.



See *Spectrum of Prevention: Towards a Community Solution* (Davis, Fujie Parks & Cohen, 2006) for a fuller discussion on applying the spectrum to sexual violence prevention. Also see [Fact Sheet: Sexual Violence and the Spectrum of Prevention](#) (NSVRC, 2011), which is based on the work of Cohen and Swift (1999).

Prevention as Part of Comprehensive Campus Response

You need to know not only how to comprehensively promote prevention of interpersonal violence on your campus, but also how to encourage strong campus interventions at the policy level and in individual cases of violence. Significantly reducing perpetration requires intervention strategies that reflect intolerance for interpersonal violence paired with a multi-layered prevention effort. Below are a few suggestions for campuses to **move toward a comprehensive response to interpersonal violence**:

- ✓ **Develop comprehensive intervention and prevention policies for each type of interpersonal violence.** The policies should encompass the multiple campus departments and local agencies that need to coordinate efforts to intervene in and/or prevent the violence. Both intervention and prevention components are essential to address the problem. Specific policy goals are necessary to direct and enforce the policies.
- ✓ **To develop and implement policies that involve coordination between colleges and communities, colleges will need to partner with their local community**—rape crisis centers, domestic violence programs, medical and counseling providers, law enforcement, prosecution, courts and with existing coordinating entities such as a sexual assault response team (SART). ([WV FRIS](#) offers information on [SARTS](#), as well as an online course on collaboration through its online Sexual Assault Services Training Academy (SASTA).)
- ✓ **Work to ensure college policies and practices are in line with all relevant federal and state requirements.** (See *C. Responding to Disclosures: State Requirements and Key Federal Legislation Influencing Campus Response*.)
- ✓ **Provide training on each type of interpersonal violence for campus personnel and outside agencies involved in intervention and/or prevention.** Make sure the information presented is accurate and tailored to the roles of involved departments and agencies. Contact WV FRIS for suggestions on developing training programs for campus departments.
- ✓ **To appropriately respond to students who disclose interpersonal violence, provide campus staff and paraprofessionals** with information on where to make a criminal report and how to report a violation of campus policies, specific campus staff who are first responders in such cases, and on- and off-campus programs which can offer confidential information and assistance to victims of interpersonal violence.

- ✓ **Educate students, their parents and the community about the college’s intervention procedures and prevention efforts.** Present accurate information that is specific to college student populations. For example, Fisher, Cullen and Turner (2000) found that many colleges they surveyed did not include information about acquaintance rape in their prevention programs, in spite of the fact that most rapes that occur on campuses are perpetrated by acquaintances. Without information about acquaintance rape, students may have the misconception that most rapes are perpetrated by strangers. When an acquaintance rape does occur, they may not understand that what they experienced was rape.
- ✓ **Gather statistics about each type of interpersonal violence specific to your campus,** so that college administrators can understand the need for campus intervention and prevention efforts, collaboration with local agencies, training for personnel, education for students, etc.
- ✓ **Take measures to promote student reporting of interpersonal violence.** For example, Karjane, Fisher and Cullen (2005) identified several campus policies and practices that may prevent some students from reporting, such as policies on drug and alcohol use, requirements for victims to participate in adjudication, and messages that overemphasize students’ responsibility to avoid interpersonal violence while de-emphasizing offender accountability and bystander intervention strategies. Colleges should consider how they can remove such barriers for students seeking help after victimization.

A comprehensive approach at the college level will be even more effective if is preceded with similar approaches in K-12 schools and supplemented with similar approaches in workplaces, professional organizations and more broadly in the community. The prevention strategies in each of these situations need to be relevant to the audience and linked to services for those who disclose victimization or perpetration (adapted from Michigan Sexual Assault Systems Response Task Force, 2001).



Some states’ college systems and colleges have **written policies and/or plans to guide their comprehensive response to interpersonal violence.** For example: [A Safer Campus: A Guidebook for Prevention and Response to Sexual and Intimate Partner Violence and Stalking for Ohio Campuses](#); and [California State University, Northridge Campus Plan to Prevent Sexual and Domestic Violence](#). A more general **resource for college administrators to enhance and evaluate their safety programs** is *Creating and Maintaining Safe College Campuses: A Sourcebook for Evaluating and Enhancing Safety Programs* (Jackson et al., 2007).

Planning Your Programming Approach

Violence prevention is not a one-time program or event, one skill-building session or one protocol. **Violence prevention is** an ongoing, multi-faceted process, requiring investment of the whole campus and integration into the campus community infrastructure.

Below are preliminary issues to consider—in checklist and chart form—as you plan your overall programming approach and individual activities and initiatives.

Issues to Consider for Your Overall Approach

(You can also use and/or adapt the chart below to assist you in your planning.)

- Over the course of an academic year, what are interpersonal prevention programming goals and objectives? (On the below chart, the goals are aligned with those on Cohen's spectrum of prevention.) What about a longer-term plan (e.g., three to five years)?
- What activities are you planning to implement your goals and objectives?
- How do activities you have selected address the different levels of the spectrum of prevention and socio-ecological model? How will the various activities serve to reinforce or supplement each other?
- Identify any issues and challenges that might influence which activities are selected.
- Create a timeline for the implementation of activities.
- What can you do to support the campus in being prepared to respond to an increase in reports of interpersonal violence as a result of prevention programming?

Goals for Year 1	Objectives	Activities	Timeline
Strengthen individual knowledge and skills			
Promote community education			
Educate providers			
Foster coalitions and networks			
Change organizational practices			
Influence policy and legislation			

Issues to Consider for Each Programming Activity

(You can also use and/or adapt the chart below to assist you in your planning.)

Think about the characteristics of the activity in terms of (1) comprehensiveness, (2) dosage, (3) teaching methods, (4) theory-driven, (5) nurturing positive relationships, (6) timing, (7) socio-cultural relevance, (8) outcome evaluation and (9) staffing (Nation et al., 2003).

- What activity are you planning (see the upcoming *Types of Activities*)?
- How will this activity fit into and reinforce the overall prevention message?
- Who is the target audience? How can you make the activity most relevant to this audience?
- What topics do you want to address through the activity?
- What are the desired outcomes?
- What is the planned format, timing and dosage? What teaching methods will be used? Will this instructional approach get the message across effectively for this audience?
- What strategies can you use to increase the effectiveness of the activity in achieving the desired outcomes and reinforcing the prevention message?

- Who should be involved in the coordination of this activity?
- If it is a specific event, who would you like to involve as presenters, facilitators and/or staff?
Do they have the experience and training to effectively deliver this activity to this audience?
- How will you evaluate the effectiveness of the activity in achieving the desired outcomes?
What will you do with the evaluation results?
- What are the logistics of coordinating the event? Consider as applicable: timing, location, room arrangements, publicity, presenters and facilitators, other staffing, security issues, agenda, handouts, name tags, audio-visual equipment, beverages and food needs, accommodations (wheelchair accessible, sign language interpreter, etc.), etc.
- What supports will be in place in the event that a participant discloses victimization?
- What materials and other resources are available to you to implement this activity?

Planning an Activity to Promote Interpersonal Violence Prevention	
Activity	
Time/Location	
Target Audience	
Desired Outcomes	
Topics to Cover	
Teaching Methods	
Format/Dosage	
Evaluation Strategies	
Logistics Tasks and Responsible Parties for Each Task	
Supports to Respond to Disclosures	
Issues, Challenges and Solutions	

Also see Townsend (2009) for a checklist on primary prevention options (pages 41-44).



Townsend (2009) **urges paying close attention in your program planning and implementation to ensuring that all forms of interpersonal violence that are the focus of an activity are explicitly addressed and any unique dynamics are explored.** She cautions that if this attention is not paid, necessary skill building may be overlooked. She offers the example of a bystander prevention program that addresses both physical and sexual violence. Using intervention skills in situations potentially leading to sexual violence requires that the bystander recognize sexual assault and rape culture for what they

are. A bystander intervention program that only uses examples of physical violence may leave participants unable to recognize sexual coercion or expressions of rape culture.

WHO IS YOUR TARGET AUDIENCE?

Identify the intended audience for each activity (think about which programs are best suited to a specific population). Consider:

- **Universal population** (the entire campus community, all students, all faculty and staff, etc.);
- **Mixed-gender audiences;**
- **Single gender audiences;**
- **Selected populations at heightened risk for interpersonal violence perpetration or victimization**—e.g., freshman, athletes, students with disabilities, fraternity members, sorority members, international students or students studying abroad;
- **Populations who have already experienced victimization or perpetrated violence;** and
- **Those who can be trained to promote the college’s prevention message in their work** (e.g., the college’s governing body, faculty, staff, student leaders and local professionals).

Some emerging data indicates that certain types of prevention activities might be better suited to certain types of audiences (see the upcoming *Emerging Promising Practices*).

INSTRUCTIONAL METHODS TAILORED TO YOUR AUDIENCE AND GOALS

(Drawn from Fisher, Lang and Wheaton, 2010)

Adult Learning Principles

When doing interpersonal violence prevention work in the college environment, it is useful to understand and apply **basic principles of adult learning**. Knowles (1998) indicated that **adult learners retain** 20 percent of what they hear, 30 percent of what they see, 50 percent of what they see and hear, 70 percent of what they see, hear and say (e.g., discuss and explain to others), and **90 percent of what they see, hear, say and do** (Fisher, Lang & Wheaton, 2010; National Cancer Institute, 2007). Thus, **programming that engages students at multiple levels and using a variety of teaching methods is critical**. Consider the following **ways to maximize student learning** when doing interpersonal violence prevention programming (adapted from Fisher, Lang & Wheaton, 2010; National Cancer Institute, 2007):

- ✓ Design learning experiences to be **more active than passive**;
- ✓ Focus on **building knowledge and skills and changing attitudes**;
- ✓ Design learning experiences to **tie program concepts to participants’ immediate needs**;
- ✓ The **older the audience, the more likely they will accept responsibility for their own learning**, so make sure the program is relevant to their experiences;
- ✓ The **older the audience, the more self-directed the learning should be**, so involve them to the extent possible in deciding the program content;
- ✓ Design **learning environments to be as conducive to learning as possible** for your specific audience (e.g., safe to share, comfortable and enjoyable);

- ✓ Reinforce teaching by **practicing skills, applying knowledge and providing feedback**;
- ✓ Provide opportunities for learning in **both small and large groups**; and
- ✓ Value, respect and incorporate **learners' contributions and perspectives**.

Teaching Methods that Support Goals

Connect teaching methods to the goals of each specific programming activity. For example, if you are educating student leaders on interpersonal violence, use strategies that reinforce increasing knowledge. If you want them to consider how social norms about violence and gender roles impact tolerance for interpersonal violence, use methods that allow them to explore and shift attitudes. If you want them to learn new skills for identifying and interrupting violence with their peers, use methods designed to teach those skills. Fisher, Lang & Wheaton (2010) connected teaching methods with goals in an easy-to-reference chart. (Paragraph and below chart adapted from Fisher, Lang & Wheaton, 2010.)

Teaching Methods	Knowledge	Attitude	Skill
Lecture and handouts	X		
Film, video, T.V.	X		
Small group discussion	X	X	
Panel presentation (e.g., survivors)	X	X	
Brainstorming	X	X	
Vignette/case study	X	X	X
Simulation/demonstration	X		X
Role play	X	X	X

Presenters and Facilitators

When selecting educators, trainers and facilitators for your prevention programs, consider if the person has (Fisher, Lang & Wheaton, 2010):

- ✓ Firm grounding in primary prevention;
- ✓ Knowledge of, experience in and commitment to the specific content to be presented;
- ✓ Credibility with those they are educating or training, which includes experience, profession, position and language similar to or respected by the participants;
- ✓ Experience delivering content with cultural competence; and
- ✓ Experience dealing with possible disclosures of victimization or perpetration from program participants.



For those presenters and facilitators who are new to doing presentations, Fisher, Lang and Wheaton's [*Training professionals in the primary prevention of sexual and intimate partner violence: A planning guide*](#) offers a tip sheet, *Expert Solutions to the 12 Most Common Training Delivery Problems of Novice Trainers* (pgs. 80-82), which addresses potential presenter problems such as fear, credibility, personal experience, difficult learners, participation, timing, adjusting instruction, questions, feedback, use of media, materials and facilities, opening and closing, and dependence on notes. It is based on the work of Search Institute (2006).

Cultural Relevance

(Fisher, Lang & Wheaton, 2010, based in part on National Cancer Institute (2007) and Guajardo Lucero (2000))

To present programs with cultural relevance, consider the audience and specific cultural needs. Think broadly about culture—gender and gender identity, sexual orientation, age, race, ethnicity, physical abilities, language, extent of acculturation, regional differences, level of education, profession, spiritual beliefs and practices, Greek involvement, etc. Also consider diverse perspectives and influences that individual audience participants bring to prevention programs, such values, roles they assume in groups, their comfort with touching or talking, class and status, etc. Some tips:

- ✓ **Involve diverse learners in the development of your programs.**
- ✓ **Ensure physical and language accessibility.**
- ✓ **Be inclusive**, involving, reaching and empowering all participants.
- ✓ **Be sensitive to the timing and tempo** of the group you are working with, watching for clues as to when individuals are ready to accept new ideas.
- ✓ **Go beyond literal translations of materials**—the translation of material from one culture to others may not capture nuances or concepts in a way that works for other cultures.
- ✓ **Avoid jargon and generalizations.**
- ✓ **Respond to individuals.** Remember that people within a group might share some common traits, but each individual is unique.
- ✓ **Be self-aware.** Recognize your own cultural influences on how you think and act.

TYPES AND TOPICS: PREVENTION ACTIVITIES

A comprehensive campus approach to prevent interpersonal violence should include a variety of types of activities and address a variety of topics. Different activities can be used to teach about a common topic and/or reinforce the same prevention message. Consider the below activities.

Educational Sessions

Lonsway (2009) noted that sexual violence prevention education programs **usually include some combination of the following topics**—most of which apply to other types of interpersonal violence (Gidycz et al., 2002):

- ✓ Defining the violence;
- ✓ Providing statistics on incidence and prevalence;
- ✓ Challenging sex-role stereotypes and prevailing myths that support the violence;
- ✓ Discussing the effects of the violence on victims;
- ✓ Explaining societal pressures and causes;
- ✓ Discussing common attitudes and characteristics of victims and perpetrators;
- ✓ Promoting victim empathy;
- ✓ Teaching risk recognition;
- ✓ Identifying consent versus coercion;
- ✓ Teaching about safe dating behaviors (including healthy relationships and sexuality); and
- ✓ Providing information about victim resources.

Also important to cover during educational programming are the following (see C. *Responding to Disclosures*): sharing information on campus and local policies on responding to interpersonal violence and preventing violence; explaining what to do if victimization occurs in general and in cases where drug-facilitated violence is suspected; and pointing out where this information can be quickly accessed if needed (e.g., campus web site, student handbook, etc.).

In terms of **teaching methods**, most educational programs involve a lecture component, but usually also incorporate other more active strategies, including videos or films followed by a discussion, interactive drama, vignettes, presentations by survivors, interactive and skill-building/reinforcing exercises (adapted from Gidycz et al., 2002; Lonsway, 2009).



The Washington Coalition of Sexual Assault Programs offered a listing and links for curricula that teaches [healthy relationships](#) and [health sexuality](#). See [Smarter Sex](#), a sexual health web site for college students meant to encourage students, educators and parents to discuss and learn about smart sex and healthy relationships. See the National Sexual Violence Resource Center's [Healthy Sexuality: A Guide for Advocates, Counselors and Prevention Educators](#) for guidance and practical tools for discussing healthy sexuality within the context of sexual violence. It explores healthy sexuality across the life span and connects this information with primary prevention tools.

Bystander Intervention Programs

These programs focus on bystanders to change social norms in a peer culture that supports abusive behavior (Lonsway et. al., 2009). This proactive approach discourages victim blaming and shifts responsibility for prevention to both men and women (Tabachnick, 2009). The [Mentors in Violence Prevention \(MVP\) Program](#), created in the early 1990s, was one of the first programs to introduce bystander intervention to the domestic and sexual violence prevention education field. Since then, there have been numerous programs and campaigns developed based on this approach—see Prevent Connect for [Programs that Promote Bystander Intervention](#), as well as the [NSVRC Bystander Resources](#). The NSVRC site describes multiple bystander programs, including [Step Up! Sexual Assault Bystander Intervention](#), [Know Your Power](#), ["Green Dot" campaign](#), [Hollaback!: I've got your back!](#), [Virginia's Red Flag Campaign](#), [University of New Hampshire Bringing in the Bystander Campaign](#), [MVP](#), [Circle of 6](#), [Where Do You Stand? Campaign Guide](#), and the [William and Mary bystander playbook](#). (Also see the upcoming *Primer on Bystander Intervention* and *D. Resources*.)

Risk-Reduction Programs

These programs typically target women, providing information about risk reduction techniques, the impact of the violence on victims and local resources (Gidycz et al., 2002). One type of risk-reduction activity, **self-defense programs**, teaches students, usually women, how active resistance strategies can deter the completion of an attempted sexual assault. (Paragraph from Lonsway et al., 2009).

It is important that risk reduction activities unequivocally make it clear that offenders bear the full blame for their violence. Risk reduction activities focus on what individuals can do to protect themselves from sexual assault, domestic violence, dating violence and stalking. While such activities do have merit (e.g., enhancing individual's sense of control and safety and providing practical tips), they also can inadvertently send a message to the college community that these types of violence are just facts of life and it is up to individuals to avoid victimization (by defending themselves if attacked, not drinking at a party, staying with friends, etc.). And because these programs teach individuals to protect themselves from offenders, it is not uncommon for people to blame victims for their own victimization. It must be clear that participation in risk reduction activities does not transfer any liability to a student participant who becomes a victim. Risk reduction activities should be offered in combination with a range of programs that include education on myths and facts about interpersonal violence and social norms that support violence, campus policies and jurisdictional laws, men's roles in preventing violence against women, ways that women and men can intervene to stop potential violence, the promotion of campus policies and practices that support zero tolerance for interpersonal violence, and collaboration across campus and the community to support strong prevention and intervention efforts. (Paragraph drawn from the California Coalition Against Sexual Assault (CALCASA).)

Mobilization of Men to Take an Active Role in Stopping Violence

Lonsway (2009) noted that programs designed specifically for men focus on men taking responsibility for their own behaviors and confronting abusive behaviors in other men (Gidycz, Rich, & Marioni, 2002). These programs often include presentations and discussions, live or taped discussions of survivors and behavioral interventions such as interactive videos, guided imagery exercises, and/or theatrical vignettes. This type of programming can create a safe environment for men to discuss and challenge each other with respect to information and attitudes about men's violence (Berkowitz, 2004). The National Center on Sexual and Domestic Violence (NCSADV) offers a [listing and links to various men's groups and initiatives that work to end gender-based violence](#), with several offered or created at the college level.

Programming that mobilizes men is not intended to put men on the defensive. Rather, Berkowitz (2004) noted a number of underlying principles of effective violence prevention for men:

- ✓ Men should assume responsibility for preventing men's violence against women.
- ✓ Men should be approached as partners in solving the problem rather than as perpetrators.
- ✓ Workshops and other activities are more effective when conducted by peers in small, all-male groups due to the immense influence that men have on each other and because of the safety all-male groups can provide.
- ✓ Discussions need to be interactive and encourage sharing of feelings, ideas and beliefs.
- ✓ Opportunities need to be created to discuss and critique prevailing understandings of masculinity and men's discomfort with them, as well as men's misperceptions of other men's attitudes and behavior.
- ✓ Positive anti-violence values and healthy aspects of men's experience must be strengthened, including teaching men to intervene in other men's behavior.

- ✓ Work with men should be in collaboration with and accountable to women working as advocates, educators and prevention specialists.

Berkowitz (2004) found that the literature suggested that these programs can produce short-term change in men's attitudes linked with a proclivity for violence, encourage men to intervene when abusive behavior occurs, and reduce men's future violence.

Public Awareness and Media Campaigns

Public awareness and media campaigns—both stand alone and those that are part of a broader strategy—can help achieve change in community norms, awareness and/or behavior. These campaigns may be particularly effective when those in the prevention field partner with experts in changing attitudes and behaviors. An example is the domestic violence television advertisements that were developed by the [Family Violence Prevention Fund in collaboration with the Advertising Council](#). (Paragraph from Lonsway, 2009.) Colleges must consider how they can best utilize not only traditional media outlets but also social media to extend the impact of their efforts.



See the NCSDV for [a listing and links to various public awareness campaigns](#). Also see the NSVRC for [examples of public awareness events and media campaigns employed by state sexual assault coalitions during sexual assault awareness month](#). In addition, several [Prevent Connect e-courses](#) address using media and technology in sexual and domestic violence prevention efforts. Also see CALCASA's [Media Advocacy Guide](#).

Staff and Faculty Training

Those doing interpersonal violence prevention work in the college environment usually do not have enough resources, time or avenues to reach all constituents. However, they can reach out to college faculty and staff as well as professionals in the community with whom students interact. They can educate them on the topic and on campus and local policies. They can also ask for their help in incorporating prevention messages into their own work (into training for resident assistants, judicial peer educators and other student leaders, as a topical discussion in a sociology class, into public safety literature, etc.). Training those professionals to be aware of the complexity of the issue and to incorporate interpersonal violence prevention into their existing work can increase the impact. (Paragraph adapted from Fisher, Lang & Wheaton's [Training professionals in the primary prevention of sexual and intimate partner violence: A planning guide](#). Note this publication can be a resource when you do this type of programming.)

Note also that a component of some primary prevention programs, in addition to educating students and media campaigns, is training college personnel to engage more allies in supporting a prevention message.

Mobilization of the Campus around Violence Prevention

Examples of activities that mobilize the campus might include rallies, candlelight vigils, marches and walks (e.g., [Take Back the Night](#) events), or a series of initiatives during a specific month or week (e.g., [sexual assault awareness month](#), [campus safety awareness month](#), [stalking awareness month](#)). These kind of activities encourage the members of a college community to come together, speak out against different types of interpersonal violence and take initiative in promoting prevention.

Collaboration with Community Groups

College violence prevention can be enhanced when the college participates in broad-based coalitions that further the goal of prevention (e.g., the college could hold a series of prevention activities for students and the public with the local sexual and domestic violence programs during a week designated by a national organization). Individual community agencies can also partner with colleges to reach out to promote violence prevention among the college population (e.g., see the brochures that the San Diego Police Department developed in collaboration with Community Policing Associates and students from local colleges—[What College Men Should Know about Sexual Assault, Rape and Sexual Battery](#) and [What College Women Should Know about Sexual Assault, Rape and Sexual Battery](#)). Colleges frequently reach out to the local rape crisis centers and domestic violence agencies for assistance with developing and presenting educational programs.

Promotion of Policy Change

Activities can be designed to promote policy change to support appropriate campus intervention and prevention of interpersonal violence (e.g., organizing a petition or coming up with recommendations and seeking meetings with campus leaders to promote policy adoption and implementation). Tools are available regarding the content of such policies—e.g., [SAFER](#) (Students Active For Ending Rape) offers resources on what should be covered in a campus policy, tips for changing policies and policy examples from colleges around the country. The NCHERM (National Center for Higher Education Risk Management) Group, Ltd. offers a number of [free model protocols and policies](#).

SAFER's [Moving Beyond Blue Lights and Buddy Systems: A National Study of Student Anti-Rape Activists](#) revealed that students activists identified college campus policy as a key tool in addressing sexual violence. Also see SAFER & V-Day's 2013 [Making the Grade? Findings from the Campus Accountability Project on Sexual Assault Policies](#), which recommends increased availability and accessibility of survivor resources; increased primary prevention efforts and the creation of more opportunities for students to engage meaningfully in primary prevention activities; sexual assault policies that are accessible to students; amnesty clauses to encourage reporting by survivors who may have been in violation of other school policies at the time of their assault; and the creation of more opportunities for students to participate in policy decisions.



Awareness, risk reduction or primary prevention? Curtis and Love (2009) noted that activities that raise **awareness** of interpersonal violence (e.g., a media campaign) **can help build support for primary prevention efforts**. However, awareness itself does not create the changes in attitudes or behaviors that lead to violence. **Risk reduction** focuses on helping potential victims change their behaviors to avoid being victimized or to stop an incident in progress (self-defense classes, campaigns to inform the public about drug-facilitated sexual assault and how to reduce the likelihood of being drugged at a party or bar, etc.). Whereas risk reduction programs address the violence itself, **primary prevention seeks to change the conditions** (e.g., aggression or lack of empathy) **that influence a potential offender's decision to rape, assault, stalk, threaten or harass**.

EMERGING PROMISING PRACTICES

As was mentioned earlier, there is a need for research-based evidence is needed about what is most effective in college interpersonal violence prevention programming. However, some data is emerging that can be used to guide your program choices. As Gibbons (2013) noted, while sexual violence has been the focus of incidence studies and prevention programming at the college level for much of the last 20 years, the future of campus prevention programming seems to be evolving toward a more comprehensive approach that encompasses other forms of gender-based violence as well, such as dating violence and stalking.

Gibbon (2013) identified the following themes after reviewing the literature related to the **evaluation of campus-based sexual violence**:

- ✓ Campus-based programs have been **effective at increasing knowledge and decreasing rape supportive attitudes**, especially in the short term.
- ✓ Although mixed-gender audiences have shown improvements in desired outcomes, **the effect of interventions is greater with single-gender audiences** (an **exception is bystander programs**).
- ✓ The effectiveness of anti-violence programming is greatly reduced over time, but **booster sessions can help to maintain positive changes**.
- ✓ **Longer and more frequent exposures to interventions** result in greater outcomes.
- ✓ **Complex discussions of gender roles and myths that support a climate of silence and shame** are key elements of programs that seek to change attitudes about sexual violence.
- ✓ Effective programs require **well-trained prevention practitioners**.
- ✓ **Bystander programs have demonstrated a link between change in attitudes and change in behavior**.
- ✓ **Bystander models show clear promise** as effective violence prevention programs (in both single and mixed-gender groups), but more evaluation is needed.
- ✓ **Risk reduction/resistance strategy models for women and empathy-based programs for men show promise**, but more evaluation is needed.

[The ICASA Project: Best Practices for School-Based Sexual Assault Prevention Programming](#) (Illinois Coalition Against Sexual Assault & Schewe) looks at numerous characteristics as it

identified the **best practices among high school-based sexual assault prevention efforts in 2001-2002 of its state's rape crisis centers**. For example:

Characteristics of Prevention Programs Associated with Success

- ✓ More sessions are better than fewer;
- ✓ Shorter sessions are better than longer sessions;
- ✓ A male/female team of prevention educators produces the overall best results for both male and female students; and
- ✓ Younger students change more than older students.

Content of Prevention Programs Associated with Success

- ✓ Discussing how to help a friend who has been assaulted;
- ✓ Describing what you should do if you are victimized;
- ✓ Addressing healthy relationship skills;
- ✓ Identifying rape myths and presenting factual information;
- ✓ Discussing gender roles;
- ✓ Describing the school's sexual harassment policy (especially for "high risk" students); and
- ✓ Discussing drugs that facilitate sexual assault.

Many of these characteristics have relevance for college-level programming.



Acknowledging myths that contribute to interpersonal violence and gender discrimination is stressed in the studies above. Discussion on myths and facts like the ones below can be integrated into programming.

Myth: Rape is an impulsive, uncontrollable act of sexual gratification.

Fact: Most rapes are planned and motivated by aggression and a desire for dominance.

Myth: Women in college do not have to worry about becoming victims of domestic violence.

Fact: For traditionally-aged college students, dating violence is a problem and often an indication of abuse in subsequent relationships. Also, colleges today have significant populations of nontraditional-aged students who are at risk for dating and domestic violence.

Myth: If a person is being stalked and she/he just ignores the unwanted behavior, it will go away.

Fact: Stalking behavior rarely just goes away on its own without appropriate interventions.

Myth: Rapists are strangers who hide in dark alleys waiting to attack women late at night.

Fact: Most rapists are someone the victim knows. Rape can occur at any hour of the day.

Myth: Battered women can always leave their abusers.

Fact: It may be difficult to leave a partner. Individuals stay in violent relationships for both emotional and practical reasons, including love, economic dependence, fear of reprisals, social isolation and shame.

Myth: People are to blame for putting themselves into situations that lead to sexual assault, such as staying out late, drinking, using drugs, going out alone and/or talking to strangers.

Fact: Most victims of sexual assault are assaulted in places they thought were safe, by someone they thought they could trust. Perpetrators are solely responsible for their assaults.

Myth: Sexual harassment is usually just harmless flirtation or a way to compliment someone.

Fact: Sexual harassment is unwelcome sexual advances, conduct of a sexual nature and requests for sexual favors that make the individuals targeted feel uncomfortable, humiliated, distressed and/or fearful for their safety. It can adversely affect a person's work or school experience. It is unacceptable on college campuses and can be illegal.

(Adapted from the California Coalition Against Sexual Assault and based on information from the web sites of the Santa Barbara Rape Crisis Center, Los Angeles Unified School District, Minnesota Coalition Against Sexual Assault, and the National Resource Center on Domestic Violence's *Organizing College Campuses Against Dating Abuse* (1999).)

D4. PRIMER ON BYSTANDER INTERVENTION

As mentioned earlier, one of the more promising directions in sexual and domestic violence prevention in recent years is to focus on men and women as bystanders to change social norms that support abusive behavior. A primary component of bystander intervention involves enhancing the responsibility of men and women to intervene proactively with their peers to deter potential abusive incidents. (Paragraph from Lonsway et al., 2009.)

Because of its relative newness as a prevention programming option, this chapter includes this primer on bystander intervention. Having this information can help you determine how to fit this type of activity into your overall programming approach.

Bystander intervention is a philosophy and strategy to prevent various types of interpersonal violence. It is based on the fact that people make decisions and continue behaviors based on reactions they get from others. For instance, commonly-asked questions in bystander intervention trainings are: Why don't we pick our noses in public? Why don't we eat hot dogs for breakfast? The answers examine social expectations and cultural conditioning and norms taught to us through reactions from others. (Paragraph from Prevent Connect [Bystander Intervention](#)).



See Prevent Connect's 2012 podcast [Why and How We Teach/Facilitate Bystander Intervention](#) (based on a presentation L. Langford offered at the Bystander Intervention: From Its Roots to the Road Ahead Conference).

Background

(Drawn from Tabachnick, 2009; Powell, 2011; Prevent Connect)

In [Engaging Bystanders in Sexual Violence Prevention](#) (2009), Tabachnick wrote:

“In 1964, the rape and murder of Kitty Genovese shocked Americans from coast to coast. While a man attacked, raped and eventually killed this young woman for over half an hour, 38 men and women witnessed the assault and did nothing to help. The shock and confusion surrounding this single event captured the country’s attention and launched a substantial debate into how caring people could watch such an attack, and yet do nothing.

This one event launched new research and programs about the ‘bystander effect.’ This one event also marked the beginning of an approach by programs and researchers to move bystanders to act more responsibly. People in a bystander role often describe feeling scared, alone and afraid to say or do something in the face of violence. They say that they fear making someone angry, possibly misunderstanding the situation or even triggering further violence. Yet over the years, the bystander intervention approach has recognized that saying or doing something is not necessarily a single event by a single hero. In fact, in many situations, there are a variety of opportunities and numerous people who can choose to intervene.”

In the wake of the Genovese case, researchers Darley and Latane (1968) theorized that, in group settings, **the responsibility for intervening was diffused among the bystanders**, such that individuals were less likely to feel responsible for taking action and more likely to think that somebody else may intervene or had already called for help. They introduced **five steps that bystanders move through before they are able to take action**:

1. Notice the event as something that falls along the continuum of behaviors that lead to violence;
2. Interpret the event as requiring intervention;
3. Decide to assume responsibility to act;
4. Choose how to help; and
5. Are confident in their capacity to intervene (and can do it safely).

Given the complexity of most interpersonal violence situations, bystanders often find these steps overwhelming and choose to do nothing. Several decades of research has detailed situational factors that may affect a person’s willingness to act. These include: the presence and number of other witnesses, the uncertainty of the situation, the perceived level of urgency or danger for the victim, and the setting of the event. Bystanders’ behaviors may also be influenced by their relationship to the victim and/or perpetrator, their attitudes and beliefs, their perception of social norms, their perception of the potential personal costs of their action, and their intention to act.

Types of Bystanders

In bystander theory, there are **passive bystanders** who do nothing in the face of a potentially dangerous situation and **active bystanders** who do something to decrease the likelihood that something bad will occur or get worse. Bystander intervention addresses the behaviors of others that surround an act or pattern of violence, offering an opportunity to address behaviors BEFORE violence has been perpetrated.

If bystanders are to be active and intervene, they need to feel good about identifying potentially risky behaviors. They need to **understand the five steps to intervention** listed above. It's important that they **take an honest look at themselves and what keeps them from acting**. We all have walked away from situations or failed to “check things out” when our gut has alerted us to something concerning. What keeps bystanders silent? They need to **identify their obstacles and learn to work around them**.

Obstacles to Response

Bystander dynamics can create obstacles to action:

- ✓ **Diffusion of responsibility:** As previously mentioned, bystanders are more likely to help in a potentially abusive situation if they are by themselves and less likely to help when more people are around because responsibility literally diffuses.
- ✓ **Evaluation apprehension:** Bystanders risk embarrassment if they act and the situation turns out not to be an emergency or if a bystander does something wrong. Fear of getting embarrassed can dramatically decrease the chance bystanders will do anything.
- ✓ **Pluralistic ignorance:** If the bystander is not sure if the situation is an emergency, they may look around to others and see how they are responding. If they aren't, bystanders don't.
- ✓ **Cause of misfortune:** Bystanders are less likely to help if they perceive the person to be responsible for his/her own misfortune.
- ✓ **Other:** Bystanders may face other obstacles, such as peer influence or personal issues (shyness, fear of confrontation, safety concerns, feeling like it is not their business, etc.).

But, here is the key: **if bystanders see someone else modeling a helping behavior, they are more likely to step up and provide assistance themselves.**

Options for Responding

The [Green Dot Bystander Intervention Program](#) uses the “3 Ds” for responding, giving bystanders **options for how they can intervene**:

1. **Direct:** directly interacting with the people involved and addressing your concerns. It may be a confrontation “Hey—what are you doing?” or it may just be checking in with a friend, “Are you OK?”
2. **Distract:** diverting the attention of the people in the situation. If you see a situation and can think of a way to divert the attention of the people in the situation, distraction is the perfect option. Sometimes all a situation needs to diffuse is a small diversion.
3. **Delegate:** recognizing a potentially high-risk situation where you may be uncomfortable saying something yourself or feeling like someone else is better suited to handle it (e.g., a friend, police or bartender). The action can be just as effective if you get someone else to do it. It also has the additional benefit of making someone else aware of what is going on and that something needs to be done.



Example of the 3 Ds: You are at a party and you see a female student who is intoxicated being pulled up the stairs toward the 'designated' bedroom by a male student. Given your obstacles, what are you most likely to do?

Distract: Go up to them and say you are about to throw up and you need the woman to help you in the bathroom.

Direct: Go up to the guy and ask him what he is doing. Or go up to the woman and tell her you want to talk to her in private.

Delegate: Tell the woman's friend and suggest that she go get her.

Safety First

Safety is increasingly an issue for bystanders the closer they are to a situation, the fewer people that are around and the more imminent the violence. Bystanders need to consider:

- ✓ How can I keep myself safe?
- ✓ Are there others I may call upon for help?
- ✓ What are my available options?
- ✓ What are the benefits/costs for taking action?

Those facilitating bystander intervention programs should take the time to brainstorm with participants how to keep in mind and address their own safety when intervening. Creating a plan for their own safety may increase the likelihood they will feel more confident about intervening in these situations.

Features of Effective Bystander Intervention Programs

This list of features of effective bystander intervention programs (Powell, 2011, as cited by Prevent Connect) builds upon the nine characteristics of effective prevention programs (Nation et al., 2003):

- ✓ Bystander strategies will be most effective when they exist as **one component of a broader approach or of a multi-level program in one setting.**
- ✓ There is growing evidence to show the importance of **grounding prevention programs in sound and testable theory** that make clear the link between program activities and intended outcomes.
- ✓ **Involving community members** (college students, faculty and staff in this case) **and organizations** (the college itself and community agencies) as **partners** in identifying targets for change and designing strategies is critical to creating sustainable programs.
- ✓ The **application of gendered analysis** to program design and development will ensure the program strategies and outcomes are appropriate for all genders.
- ✓ There is concern within the broader literature regarding the importance of **tailoring programs to specific contexts and communities**, rather than simply replicating programs in new settings. Prevention strategies must **take into account the localized norms and structures that may be relevant to violence prevention.**

- ✓ **Longer interventions (across multiple sessions)** are more effective than short (one-time) interventions, and **in-depth coverage of a smaller range of topics** is found to be more effective than shallow coverage of a large range of topics.
- ✓ **Professional educators and/or program facilitators are found to be most effective.** Where peer educators are used, it is essential to train and support them in their roles.
- ✓ There is evidence to support **a mixture of single-sex sessions and mixed-sex sessions across education-based programming.** While mixed groups appear to result in greater attitudinal change for women than single-sex groups, single-sex groups appear more effective for changing behavioral intentions. For males, mixed-sex groups appear more effective for changes to their behavior intentions.
- ✓ The literature indicates a concern that the effects of violence prevention programs may fade over time, highlighting the **importance of evaluation at various intervals** before and after participation in prevention programs.

REFERENCES

- Anderson, L. A., & Whiston, S. C. (2005). Sexual assault education programs: A meta-analytic examination of their effectiveness. *Psychology of Women Quarterly*, 29(4), 374-388.
- Association of Schools of Public Health. (n.d.). [*What is public health?*](#) Washington, DC: Author. Retrieved 6/11/14 from <http://aspgh.org>.
- Berkowitz, A. (2004). [*Working with men to prevent violence against women \(Part 1: An Overview and Part 2: Program Modalities and Formats\)*](#). Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence.
- California Coalition Against Sexual Assault (CALCASA). (n.d.). [*Campus violence prevention resource guide*](#). Sacramento, CA: Author. Retrieved 6/12/14 from http://www.calcasa.org/wp-content/uploads/files/calcasa_campus_violence_prevention_resource_guide.pdf.
- CALCASA. (2011). [*Media advocacy guide*](#). Sacramento, CA: Author.
- California State University, Northridge Campus. (2013). [*Plan to prevent sexual and domestic violence*](#). Northridge, CA: Author.
- Centers for Disease Control and Prevention—CDC. (2004). [*Sexual violence prevention: Beginning the dialogue*](#). Atlanta, GA: Author.
- CDC. (2009). [*Sexual violence: Risk and protective factors*](#). Atlanta, GA: Author.
- CDC. [*The public health approach to violence prevention*](#). (n.d.) Atlanta, GA: Author. Retrieved 6/12/14 from http://www.cdc.gov/violenceprevention/pdf/ph_app_violence-a.pdf.

- CDC. [The socio-ecological method: A framework for violence prevention](#). (n.d.) Atlanta, GA: Author. Retrieved 6/12/14 from http://www.cdc.gov/violenceprevention/pdf/sem_framework-a.pdf.
- Chamberlain, L. (2008). [A prevention primer for domestic violence: Terminology, tools, and the public health approach](#). Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence.
- Cohen, L. & Chehimi, S. (n.d.) *The imperative for primary prevention*. A resource provided through Prevent Connect's E-learning course [Levels of prevention](#).
- Cohen, L. & Swift, S. (1999). The spectrum of prevention: Developing a comprehensive approach to injury prevention. *Injury Prevention*, 5, 203-7.
- Curtis, M. & Love, T. (2009). [Tools for change: An introduction to the primary prevention of sexual assault](#). Austin, TX: Texas Association Against Sexual Assault.
- Davis, R., Fujie Parks, L. & Cohen, L. (2006). [Spectrum of prevention: Towards a community solution](#). Enola, PA: National Sexual Violence Resource Center.
- Fisher, B., Cullen, F. & Turner, M. (2000). [The sexual victimization of college women](#). Washington, DC: U.S. Department of Justice.
- Fisher, D., Lang, K. & Wheaton, J. (2010). [Training professionals in the primary prevention of sexual and intimate partner violence: A planning guide](#). Atlanta, GA: CDC.
- Gibbon, R. (2013). [The evaluation of campus-based gender violence prevention programming: What we know about program effectiveness and implications for practitioners](#). Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence.
- Guy, L. (2007). The ecological model of health behavior: An overview for advocates. In [Partners in Change, Spring, 2007](#). Olympia, WA: Washington Coalition of Sexual Assault Programs.
- Illinois Coalition Against Sexual Assault (ICASA) & Schewe, P. [The ICASA project: Best practices for school-based sexual assault prevention programming](#). Springfield, IL: ICASA.
- Jackson, J. et al. (2007). *Creating and maintaining safe college campuses: A sourcebook for evaluating and enhancing safety programs*. Stylus Publishing.
- Knowles, M., Holton, E., & Swanson, R. (1998). *The adult learner: The definitive classic in adult education and human resources development* (4th edition). Houston, TX: Gulf Publishing.
- Karjane, H., Fisher, B. & Cullen, F. (2005). [Sexual assault on campus: What colleges and universities are doing about it](#). Washington, DC: U.S. Department of Justice, Office for Justice Programs, National Institute of Justice.

- Krug, E., Dahlberg, L., Mercy, J., Zwi, A. & Lozano, R. (Eds.) (2002), [World report on violence and health](#). Geneva, Switzerland: World Health Organization, 3-21.
- Langford, L. (2004). [Preventing violence and promoting safety in higher education settings: Overview of a comprehensive approach](#). Newton, MA: U.S. Department of Education, Higher Education Center for Alcohol and Other Drug Abuse and Violence Prevention.
- Lonsway, K. et al. (2009). [Rape prevention and risk reduction: Review of the research literature for practitioners](#). Harrisburg, PA: VAWnet, a project of the National Resource Center on Domestic Violence/Pennsylvania Coalition Against Domestic Violence.
- Michigan Sexual Assault Systems Response Task Force. (2001). [The response to sexual assault: Removing barriers to services and justice](#). MI: Author.
- Nation, M., et al. (2003). What works in prevention: Principles of effective prevention programs. *American Psychologist*, 58, 449-456. Also see Nation, M., Keener, D., Wandersman, A. & DuBois, D. (2005). [Applying the principles of prevention: What do prevention practitioners need to know about what works?](#)
- National Cancer Institute. (2007). *Trainer's guide for cancer education*. Washington, DC: U.S. National Institutes of Health.
- National Sexual Violence Resource Center (NSVRC). (2012). [Healthy sexuality: A guide for advocates, counselors and prevention educators](#). Enola, PA: Author.
- NSVRC. (2011). [Fact sheet: Sexual violence and the spectrum of prevention](#). Enola, PA: Author.
- Ohio Governor's Campus Safety Task Force Committee (2010). [A safer campus: A guidebook for prevention and response to sexual and intimate partner violence and stalking for Ohio campuses](#). Governor's Office for Women's Initiative and Outreach, Ohio Board of Regents and Ohio Department of Health.
- Powell, A. (2011). [Review of bystander approaches in support of promoting violence against women](#). Carlton, Victoria, Australia: Victorian Health Promotion Foundation (VicHealth).
- PREVENT. (2005a). *Orientation to violence prevention. Moving upstream: The story of prevention*. Raleigh, NC: University of North Carolina Injury Prevention Research Center.
- PREVENT. (2005b). *Orientation to violence prevention. The public health approach to violence prevention*. Raleigh, NC: University of North Carolina Injury Prevention Research Center.
- PREVENT. (2005c). *Orientation to violence prevention. The socio-ecological model: A pathway to prevention*. Raleigh, NC: University of North Carolina Injury Prevention Research Center.

- San Diego Police Department. (n.d.) [What college men should know about sexual assault, rape and sexual battery](#) and [What college women should know about sexual assault, rape and sexual battery](#). San Diego: Author.
- Search Institute. (2006). *Getting to outcomes with developmental assets: Ten steps to measuring success in youth programs and initiatives*. Minneapolis, MN: Author.
- Sexuality Information and Education Council of the United States (SIECUS). (2004). *Guidelines for comprehensive sexuality education: Kindergarten through 12th grade* (3rd edition). New York: SIECUS.
- Students Active for Ending Rape (SAFER). (2013). [Moving beyond blue lights and buddy systems: A national study of student anti-rape activists](#). New York: Author.
- SAFER & V-Day (2013). [Making the grade? Findings from the campus accountability project on sexual assault policies](#).
- Tabachnick, J. (2009). [Engaging bystanders in sexual violence prevention](#). Enola, PA: NSVRC.
- Townsend, S. (2009). [Technical assistance guide and resource kit for primary prevention and evaluation](#). Enola, PA: Pennsylvania Coalition Against Rape.
- The Prevention Institute (2007). [Poised for prevention: Advancing promising approaches to primary prevention of intimate partner violence](#).
- Turnock, B. (1997). *Public health: What it is and how it works*. Baltimore, MD: Aspen.
- Valle, L. et al. (2007). *Sexual and intimate partner violence prevention programs evaluation guidebook*. Atlanta, GA: CDC.
- Virginia Sexual and Domestic Violence Action Alliance. (2009). [Virginia's guidelines for the primary prevention of sexual violence and intimate partner violence](#). Richmond, VA.
- Washington Coalition of Sexual Assault Programs. (n.d.) [The social ecological model](#). Olympia, WA: Author. Retrieved 6/12/14 from <http://www.wcsap.org/social-ecological-model>.
- West Virginia Foundation for Rape Information and Services—WV FRIS (2012). [Reconstructing norms: A curriculum to educate college campuses about sexual assault prevention](#). Fairmont, WV: Author. (Adapted with permission from Pennsylvania Coalition Against Rape's *Reconstructing Norms: Preventing Alcohol Related Sexual Assault on College Campuses*).
- World Health Organization/London School of Hygiene and Tropical Medicine (2010). [Preventing intimate partner and sexual violence against women: Taking action and generating evidence](#). Geneva, Switzerland: World Health Organization.