

# What Does it Mean to be Evidence-Based?

An Analysis of Existing Evidence-Based Bystander  
Intervention Programs

## Introduction:

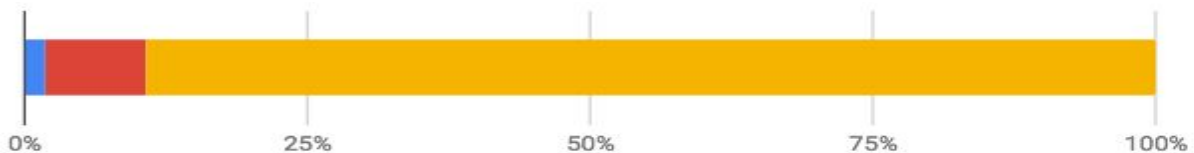
This project was developed as a result of the feedback from the It's On Us Regional Advisor Summit. The Summit was created after reviewing multiple surveys and feedback from previous cohorts of student leaders. The most recurring feedback included the need for training and for additional resources in the areas of organizing, awareness, and prevention. This analysis is meant to observe existing programs, how they were developed, and their strengths and weaknesses. I began by looking at as many national programs as possible and collecting as much information on them as exists. I then dissected the top 30 programs that were evidence-based. This paper is an analysis of those gaps and differences.

- [All Prevention Programs Nationwide](#)
- [Cost and Focus of the top 30 Evidence-Based Prevention Programs](#)

## Summary of Project:

Sexual violence is prevalent throughout the country, however women between the ages of 18-24 are at risk of sexual assault at a rate three times higher than other women.<sup>1</sup> Sexual violence can affect both a student's physical and mental health which can impact their ability to learn, socialize, and develop professionally. Sexual violence is the most underreported crime. According to NSVRC, over 90% of sexual violence on college campuses in the U.S. go unreported.<sup>2</sup> According to RAINN, less than 20% of female victims who report their assault report to the police.<sup>3</sup>

**Average Reporting rates for Sexual Violence in Colleges Around the United States** <sup>123</sup>



**Figure 1**

With prevalence rates this high, and reporting rates this low, prevention programs to change the culture on college and university campuses around the country have become extremely important.

## **What is Bystander Intervention?**

Bystander intervention is a prevention method to encourage responsive bystander behavior in order to spread the responsibility for safety to the community as a whole.<sup>4</sup> A bystander is anyone who is present

<sup>1</sup> Department of Justice, Office of Justice Programs, Bureau of Justice Statistics, Rape and Sexual Victimization Among College-Aged Females, 1995-2013 (2014).

<sup>2</sup>

[https://www.nsvrc.org/sites/default/files/publications\\_nsvrc\\_factsheet\\_media\\_packet\\_statistics-about-sexual-violence\\_0.pdf](https://www.nsvrc.org/sites/default/files/publications_nsvrc_factsheet_media_packet_statistics-about-sexual-violence_0.pdf)

<sup>3</sup> <https://www.rainn.org/articles/your-role-preventing-sexual-assault>

<sup>4</sup>

<https://books.google.com/books?hl=en&lr=&id=sR3gCgAAQBAJ&oi=fnd&pg=PA183&dq=bystander+intervention+training+assessment&ots=7pQYzhFnGB&sig=X4OQYI6Yqn2NELKbfPYEjp56Peg#v=onepage&q&f=false> jenn katz jessica moore.

when a situation occurs but is not involved directly in it. Bystander intervention is when a bystander takes steps to intervene in an act of violence or the acts leading up to the violence. It has been proven to help in many situations to de-escalate situations, giving a victim a chance to leave the situation or seek help.

Bystander intervention training is widely seen to reduce the prevalence of rape-supportive attitudes and increase the feeling of safety on campus,<sup>4</sup> therefore it is important for us to continue to use it and improve its reach and effectiveness.

This assessment is a review of existing bystander intervention programs that are seen as best practices, their individual components, and their effectiveness throughout different communities in higher education. For the purpose of this study, the most widely used standard and requirements for an evidence-based program by the Center for Disease Control (CDC) will be used.

### What does it mean to be evidence-based?

What does it mean to be “evidence-based?” According to the Center for Disease Control, the best standard of evidence for the field of sexual violence, is the Best Available Research Evidence. This is a type of evidence, also used in medicine and psychology to determine if the desired outcome is being achieved. Within this standard, programs that have the most exhaustive research design are found to have the most “evidence.”<sup>5</sup>

The other two standards of evidence that are most used are Experiential Evidence, which is based on the professional insight, understanding, skill, and expertise that is accumulated over time and is often referred to as intuitive or tacit knowledge, and Contextual Evidence, a type of evidence that is based on factors that address whether a strategy is useful, feasible to implement, and accepted by a particular community.

The following areas are used to review best practices with the Best Available Research Evidence standard.

**Effect:** This is a measure of how effectively the program can reduce the outcome of sexual violence. The most effective programs have both short and long term outcomes.

**Internal Validity:** Internal validity refers to the extent to which the short term and/or long term outcomes of a program, practice, or policy (as mentioned previously) can truly be attributed to it or if these outcomes could have been caused by something else. The higher the internal validity, the higher the effect of a program.

**Research Design:** The nature of the design of the research study determines whether and how well we can answer our research questions related to effectiveness. The components or elements of these evaluations (measures, selection of participants, assignment to group, assessment of outcomes over time) are known as the research design. The more rigorous the research design, the higher its internal validity.

**Independent Replication:** The independent replication of a program involves implementing it with other

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<sup>5</sup> Understanding Evidence Part 1: Best Available Research Evidence. A Guide to the Continuum of Evidence of Effectiveness is a publication of the National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

participants (ex: in a different school with other students). This replication should be independent, meaning it should be implemented and evaluated by researchers/practitioners who are unaffiliated with the original program and who do not have any conflicts of interest in implementing or evaluating it.

**Implementation Guidance:** Implementation guidance includes any and all services and/or materials that aid in the implementation of a prevention strategy in a different setting, including but not limited to: training, coaching, technical assistance, support materials, organizational/systems change consultation, and manuals/guides. Implementation guidance is typically created by the original developers of a program in order to help researchers/practitioners implement it appropriately in their own setting.

**External and Ecological Validity:** This area of the Continuum combines aspects of external and ecological validity. External validity refers to whether a program can demonstrate preventive effects among a wide range of populations and contexts.

For example, a parenting skills training program designed to prevent child maltreatment that demonstrated preventive effects in both urban and rural areas with different populations of parents would have high external validity.

These areas create the Continuum of Evidence of Effectiveness, developed to create a universal set of standards to review sexual violence prevention programs. The Continuum is intended for decision-makers in the field such as researchers, policy-makers, and practitioners. It was developed by researchers, practitioners and policy-makers from a variety of violence-related content areas including: youth violence, self-directed violence, intimate partner violence, sexual violence, and child maltreatment.

They reviewed over 42 sources to develop this standard including:

- National Registry of Evidence-Based Programs and Practices<sup>6</sup>
- Blueprints for Violence Prevention<sup>7</sup>
- Community-Based Child Abuse Prevention Programming<sup>8</sup>
- Kauffman Best Practices Project<sup>9</sup>
- Handbook of Injury and Violence Prevention<sup>10</sup>
- Guide to Community Preventive Services<sup>11</sup>

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<sup>6</sup> Substance Abuse and Mental Health Services Administration—National Registry of Evidence Based Programs and Practices. (2008). Retrieved July 18, 2011 from <http://www.nrepp.samhsa.gov/Search.aspx>

<sup>7</sup> Mihalic, S., Irwin, K., Elliott, D., Fagan, A., & Hansen, D. (2001). Blueprints for Violence Prevention (NCJ 187079). Washington DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.

<sup>8</sup> Winkle, E., Luckie, A., Gehl, M., & Norris, D. (2008). Integrating evidence-based practices into CBCAP programs: A tool for critical discussions. FRIENDS National Resource Center for Community-Based Child Abuse Prevention.

<sup>9</sup> Chadwick Center for Children and Families. (2004). Closing the quality chasm in child abuse treatment: Identifying and disseminating best practices. San Diego, CA.

<sup>10</sup> Doll, L., Bonzo, S., Mercy, J., Sleet, D., & Haas, E (eds.). (2007). Handbook of Injury and Violence Prevention. Springer: New York.

<sup>11</sup> The Community Guide to Preventive Services. Systematic Review Methods. Retrieved on July 18, 2011 from <http://www.thecommunityguide.org/about/methods.html>.

- California Evidence-Based Clearinghouse<sup>12</sup>
- What Works Clearinghouse<sup>13</sup>
- Promising Practices Network for Children, Families, and Communities<sup>14</sup>
- Violence Prevention: the Evidence<sup>15</sup>

Many national database exist on bystander intervention programs that are evidence-based. All of them rate programs based on how many evaluations have been conducted. The CDC's most recently documented list of prevention programs is included in their [Sexual Violence Prevention Technical Package](#), released in 2016. The National Institute of Justice database can be found on [Crime Solutions](#).

### What is the feedback like for EB programs?

This Continuum used by the CDC does not take into consideration the experience of the practitioners or contextual factors of the audience that may affect the effectiveness of a program.

*“The Continuum is designed to be used as a tool to help researchers, practitioners, and policymakers better understand best available research evidence, and why this evidence is important. On a practical level, the Continuum can be used to help practitioners and policy-makers make decisions about which violence prevention strategies to adopt in their communities.”*

One gap in the use of programs that are labeled as evidence-based is that being designated as evidence-based does not indicate that the program will work for all communities. For example, according to these standards, a program that is created from a needs assessment for a community would have low validity even if it was helpful for that specific community.

There are multiple barriers to the continuum.

**Effect:** The effectiveness of a strategy is based on its intent and design. For example, a program designed to modify violence related behavior would be considered effective if it produced significant outcomes in reducing physical fighting, even if it did not produce significant long term outcomes (e.g., reduction in population rates of assault or homicide). Also, a program may be highly effective in one setting, but not as effective in another setting or context. Practitioners must take into account contextual factors when applying a prevention strategy to a new setting.

Here is an example of the barriers that may exist when using this continuum to validate the effect of a program. This is a comparison of a program with high validity (GreenDot) and a program with low validity (BOUT That Life).

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<sup>12</sup> California Evidence-Based Clearinghouse. Scientific Rating Scale. Retrieved on July 18, 2011 from <http://www.cebc4cw.org/ratings/scientific-rating-scale/>

<sup>13</sup> What Works Clearinghouse. Retrieved on July 18, 2011 from <http://ies.ed.gov/ncee/wwc/>.

<sup>14</sup> Promising Practices Network for Children, Families, and Communities. Retrieved July 18, 2011 from <http://www.promisingpractices.net/criteria.asp#evidence>.

<sup>15</sup> World Health Organization (2009). Violence Prevention: the evidence. WHO Press. Geneva, Switzerland.

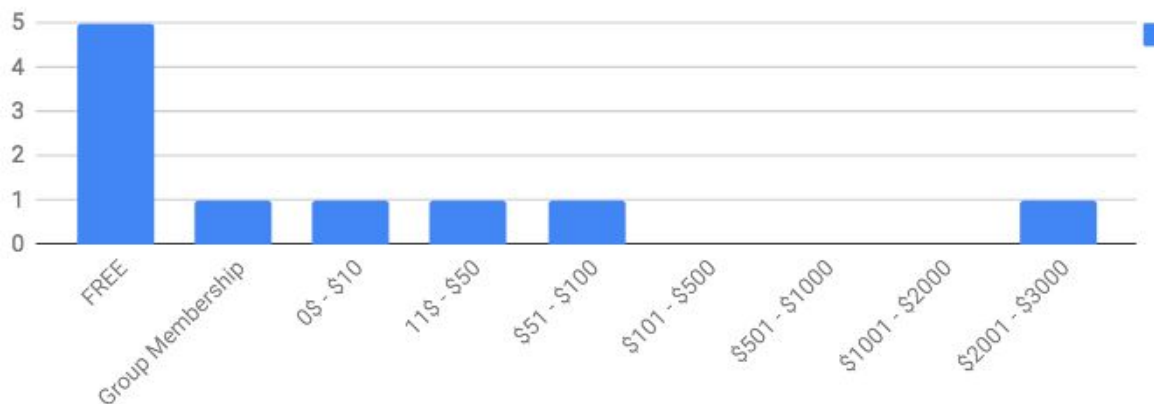
GreenDot, inc.	BOUT That Life
<ul style="list-style-type: none"> <li>- This program has been evaluated multiple times, and was evaluated using a sample of almost 8,000 students in 2011.<sup>16</sup> Of their sample of students, 14% had already received the GreenDot training within the past two years and almost half had heard of GreenDot before. GreenDot is a large prevention organization with over 25 staff that has been in existence and federally funded since 2006. It has reached multiple countries including Taiwan and Africa.</li> </ul>	<ul style="list-style-type: none"> <li>- This program has not yet been evaluated, but is currently looking to partner with a larger organization to apply for funding. This organization has only one full time staff and has been in existence for about a year now. The program was created on the basis of multiple needs assessments and works with each community they train to provide bystander intervention strategies that are most relevant for them. BOUT That Life has received very positive survey responses after each session.</li> </ul>

It is also important to note that programs that have been successfully **independently replicated** should not necessarily be implemented in all types of settings or with different populations. Factors such as a program’s external and ecological validity and other considerations (such as feasibility and acceptability) must also be taken into consideration when implementing a prevention strategy.

Cost-related Barriers to Prevention:

As shown in Figure 3 (below), of the top 30 evidence-based programs in the country, only 10 provided the actual cost of the program or materials for implementation. Of these 10, half of them were free of cost and half varied from \$5 - \$3000.

Figure 3



As stated earlier, program evaluations are extremely costly. Another factor making it difficult to achieve is federal funding requirements. A large majority of the programs in the field of sexual violence, especially technical assistance program, rely on public funds to operate each year. In order to ensure that most

<sup>16</sup> Coker, A. L., Cook-Craig, P. G., Williams, C. M., Fisher, B. S., Clear, E. R., Garcia, L. S., & Hegge, L. M. (2011). Evaluation of Green Dot: An Active Bystander Intervention to Reduce Sexual Violence on College Campuses. *Violence Against Women*, 17(6), 777–796. <https://doi.org/10.1177/1077801211410264>

taxpayer dollars are being used to directly respond to victims of crimes, most federal funding prohibits the use of funds to conduct research (below is an example of an Office on Violence Against Women Technical Assistance Grant application with research projects listed). This means that what is most often an organization's largest pool of funds cannot be used to further validate their work. This can affect the quality and relevance of the technical assistance being provided, as programs that are funded are most often the programs funded the next year.

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**Out-of-Scope Activities**

OVW has determined the activities listed below to be out of the program scope, and they will not be supported by TA Initiative funding.

1. Research projects (This does not include program assessments conducted only for internal improvement purposes. See "Research and Protection of Human Subjects" in the [Solicitation Companion Guide](#)).
2. Direct victim services and justice system interventions: OVW's TA Initiative funds are intended to support educational and training opportunities, advice, and guidance for current and potential OVW grantees and sub-grantees. They are not meant to support law enforcement activities, legal representation, direct services, or other interventions.
3. Technical assistance focused on a single state, region, or local geographic community, unless specified in the purpose areas.

Applications that propose activities that are deemed to be substantially out-of-scope may receive a deduction in points during the review process or may be eliminated from consideration entirely.

One of the most widely used evidence based prevention programs in the country is Living the GreenDot, inc. (GreenDot). GreenDot was first funded by the Office on Violence Against Women in 2006 and has received continuing funds since then.

GreenDot has been evaluated multiple times, but the most recent evaluation was with 326 students at a large, 4-year university in the pacific northwest. The effectiveness of the program was reviewed based on surveys collected before the GreenDot training and again three months after the training. Respondents to these surveys were 97% female, 97% ages 18-23, and 77% Caucasian.<sup>17</sup> This is a national program that has been through multiple evaluations that included large set of data, and has received positive results, however, it is only representative of white, female students between the ages of 18-23. This is not representative of either the groups of students most at-risk of sexual violence or the enrollment rates in colleges across the United States.

[HERE](#) you can find a breakdown of most existing national bystander intervention programs.

### **Who might this exclude from the conversation?**

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<sup>17</sup> Paula M. Adams, Gitanjali Shrestha, Stephanie Roeter, Annelise N. Smith, Laura G. Hill (2013). Using Self-Determination Theory to Evaluate Bystander Intervention Programs. <http://comm.eval.org/HigherLogic/System/DownloadDocumentFile.ashx?DocumentFileKey=c78464a2-9a51-4f94-b7db-d1fc1eb40160>

We know that young women between the ages of 18-24 are most at risk of sexual violence on campuses and that women of color are at an increased risk, however there is not a lot of research on what women of color need to feel more safe at their schools.

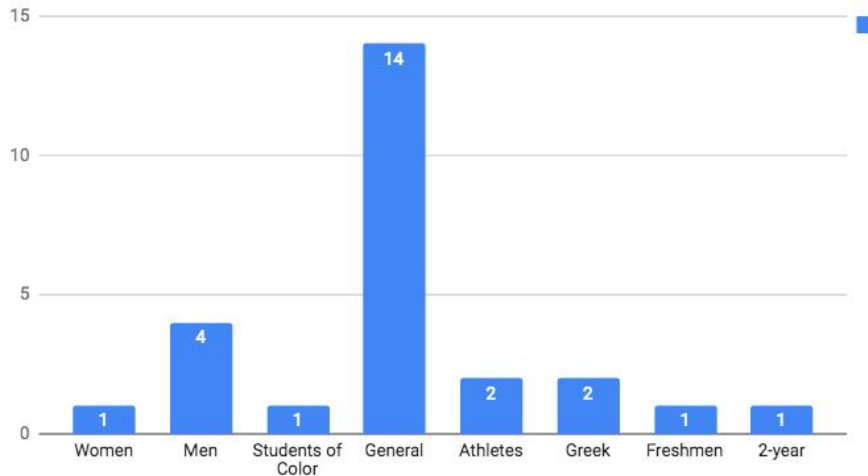


Figure 2 shows data from top 30 evidence-based programs in the country. Of the 30, about half were not made for any specific campus community. Only one program was designed specifically for students of color.

Figure 2

There is a single published study that explores sexual assault at HBCUs. In this study, of which one of the authors is Chimi Boyd, the creator of BOUT That Life, the research is used to document the prevalence of different types of sexual assault among undergraduate women at HBCUs and make comparisons to data collected from undergraduate women at non-HBCUs. Data on sexual assault victimization were collected from 3,951 undergraduate women at HBCUs using a web-based survey. These data was then compared to data collected from 5,446 undergraduate women at non-HBCUs using the same research methods. The study found that prevalence rates are similar between women at HBCUs and black women at non-HBCUs,<sup>18</sup> therefore culturally-relevant prevention trainings should also exist at non-HBCUs.

Evidence shows that peer to peer programming can increase effectiveness of training.<sup>19</sup> Figure 2 shows that there is also a gap in bystander intervention training for men on college campuses. In a study of the program, A Men's Program, a peer facilitated bystander intervention and rape prevention program for male-identified students, researchers reviewed whether the program could reduce men's rape myth acceptance, enhance the perceived effectiveness of college

<sup>18</sup> Krebs, C. P., Barrick, K., Lindquist, C. H., Crosby, C. M., Boyd, C., & Bogan, Y. (2011). The Sexual Assault of Undergraduate Women at Historically Black Colleges and Universities (HBCUs). *Journal of Interpersonal Violence*, 26(18), 3640–3666. <https://doi.org/10.1177/0886260511403759>

<sup>19</sup> BREITENBECHER, K. H., & SCARCE, M. (1999). A Longitudinal Evaluation of the Effectiveness of a Sexual Assault Education Program. *Journal of Interpersonal Violence*, 14(5), 459–478. <https://doi.org/10.1177/088626099014005001>



men's bystander behavior, and increase men's willingness to intervene as bystanders in potentially dangerous situations. The study concluded that college men who experienced The Men's Program *significantly* increased their self-reported willingness to help as a bystander and their perceived bystander efficacy in comparison to college men who experienced the comparison condition. Men's Program participants also significantly decreased their self-reported rape myth acceptance in comparison to men who do not receive the training. There is much data on the need to bring men into the conversation, and based on this study and many others, the best way to do this is by providing information that is most relevant to them.

Although many programs exist that claim to be adaptable to different groups on campus, it needs to be done more intentionally to be relevant to students today. According to a 2017 study at Portland University, most analyses of sexual violence specifically focus on the power and control that perpetrators are looking for; which is commonly expressed in our society through a male taking advantage of and taking away one's females power through sexual violence. This produces prevention programs with the same focus. Many programs need to be updated as to not assume gender binary or that all victims of violence are comfortable using the term "survivor." It is possible to create programs where the power and control is not solely expressed in heterosexual interactions but instead include narratives of people who have a range of gender identities.

### Recommendations:

Based on the feedback we've collected from student surveys, from the first IOU Regional Advisor Summit, and the information gathered above, there are multiple approaches to bystander intervention that can be incorporated throughout the year and on a national level.

As stated above, research on prevention strategies for communities of color or marginalized communities is not widely in existence. There is a lack of funding for these smaller, culturally specific organizations, so they are often left out of the conversation even though the work they are doing is extremely valuable.

Our existing data shows that we need to understand demographics of students in order to change prosocial behavior. However, there is a lack of culturally specific resources, especially in the field of bystander intervention. I believe the only way to bridge this large gap is to include students in the development of their programming. Using this as a start, we can create a resource that identifies different programs or consultants for different communities on campus. Prevention will never be a one stop shop, therefore the programming that is specifically for athletes, greek life, LGBTQ, culturally-specific groups, can be part of the dosage throughout the year.

Chimi Boyd, the creator and single staff member of BOUT That Life, and an author of the above HBCU study, has had trouble finding funding for research evaluation of her program, but has seen very positive feedback from surveys. Knowing the flaws in what is considered a best

practice, we can begin to bridge this gap by inviting people with different areas of expertise to provide a dose of prevention training either through a webinar or in person.

Through this research, I have found that of the programs that are specifically for students at colleges or universities and are specifically focused on bystander intervention as a form of prevention, most specific to any group are for greek life or athletics. Some programs have the option of a training for non-traditional students such as those pursuing a 2-year degree or commuters, only one with a focus of students of color, and none with a focus on latinx, API, or students with disabilities. There are many people doing great work who are not federally funded, so I promise to be intentional in finding these trainers and bringing their knowledge to the table for students who haven't found existing training to be relatable.

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10. Paula M. Adams, Gitanjali Shrestha, Stephanie Roeter, Annelise N. Smith, Laura G. Hill (2013). Using Self-Determination Theory to Evaluate Bystander Intervention Programs. <http://comm.eval.org/HigherLogic/System/DownloadDocumentFile.ashx?DocumentFileKey=c78464a2-9a51-4f94-b7db-d1fc1eb40160>

Ideas:

1. Make fact sheet for students to use when working with their admin to choose a program
2. Difference between dorothy edwards from greendot and Chimi/others from smaller orgs

**What is a Comprehensive Program?**

A bystander intervention program is a program that explains why we all need to be active bystanders and ways to do so in our daily life. A comprehensive program is \_\_\_\_.

What Comprehensive Programs exist?

**How to engage more male-identifying students:**

Justin Baldoni: “I challenge you to see if you can use the same qualities that you think make you a man to go deeper into yourself - your strength, your bravery, your toughness. Can we redefine what those mean and use them to explore our hearts. Are you brave enough to be vulnerable - to reach out to another man when you need help. To dive head first into your shame. Are you strong enough be be sensitive - to cry whether you are hurting or happy - even if it makes you look weak. Are you confident enough to listen to the women in your life - to hear their ideas and their solutions. To hold their anguish and actually believe them, even if what they’re saying is against you? And will you be man enough to stand up to other men when you hear locker room talk. When you hear stories of sexual harassment. When you hear your boys talking about grabbing ass or getting her drunk? Will you actually stand up and do something so that one day we don’t have to live in a world where a woman has to risk everything and come forward to say the words “me too.”

**Internal Validity:** There are three ways a program can increase the internal validity of their evaluation:

1. A control or comparison group
2. Multiple measurement points
3. Gathering information on other things that could influence outcomes

A control or comparison group in this situation is a group of students who have not received any of the training. Many programs, such as Bringing in the Bystander, use another university as their control group, which adds to the cost of the evaluation.

Example:

Bringing in the Bystander	Hollaback!
-	- This is a comprehensive prevention program that