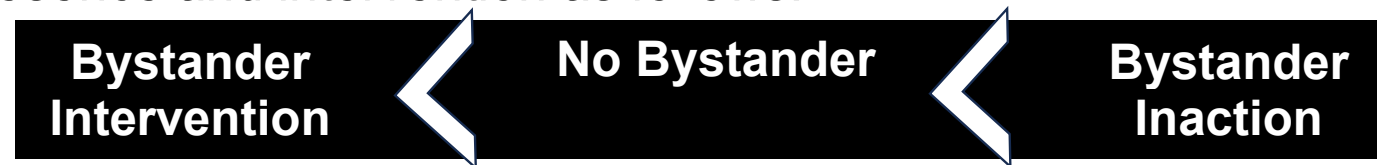


Introduction

- Sexual assault and harassment (SHA) among college women is common and may lead to negative outcomes. One pathway to negative outcomes is through cognitions following SHA.
- Social responses from others after SHA (e.g., following disclosure) can impact beliefs one holds about one's role in the event.
- Bystanders present during SHA not only offer the potential for helping, but also offer social reactions that could contribute to the SHA survivor's narrative of the event and mental health outcomes (Hamby et al., 2016). Recent qualitative research suggests that attempts at bystander intervention can serve to validate a survivor's perception of SHA as a problem, while bystander inaction could perpetuate maladaptive self-critical beliefs (Ford et al., in press; McMahan, 2022).
- Though bystanders are present in about half of all SHA, no known work has examined how (no) bystander presence and intervention during the SHA is associated with posttraumatic cognitions.
- We hypothesized that college women who experienced SHA would vary in average severity of self-blame and negative self cognitions (and not the world) based on their experiences of (no) bystander presence and intervention as follows:



Method

- College women (ages 18-24) who reported experiencing SHA since age 16 ($N=784$) completed online questionnaires. **SHA** was defined as endorsing an item on the Sexual Experiences Survey-Revised (SES-R; Koss et al., 2007) and/or the modified Sexual Experiences Questionnaire-Workplace (SEQ-W; Fitzgerald et al., 1995)
- Bystander Presence and Intervention:** Participants were asked to select who was present (e.g., family, friends, acquaintances, strangers, nobody) and if anybody attempted to help or stop the SHA in the most recent experience.
- Posttraumatic cognitions:** Posttraumatic Cognitions Inventory (PTCI; Foa et al., 1999) Self-Blame, Negative Cognitions about the Self, and Negative Cognitions about the World subscales.

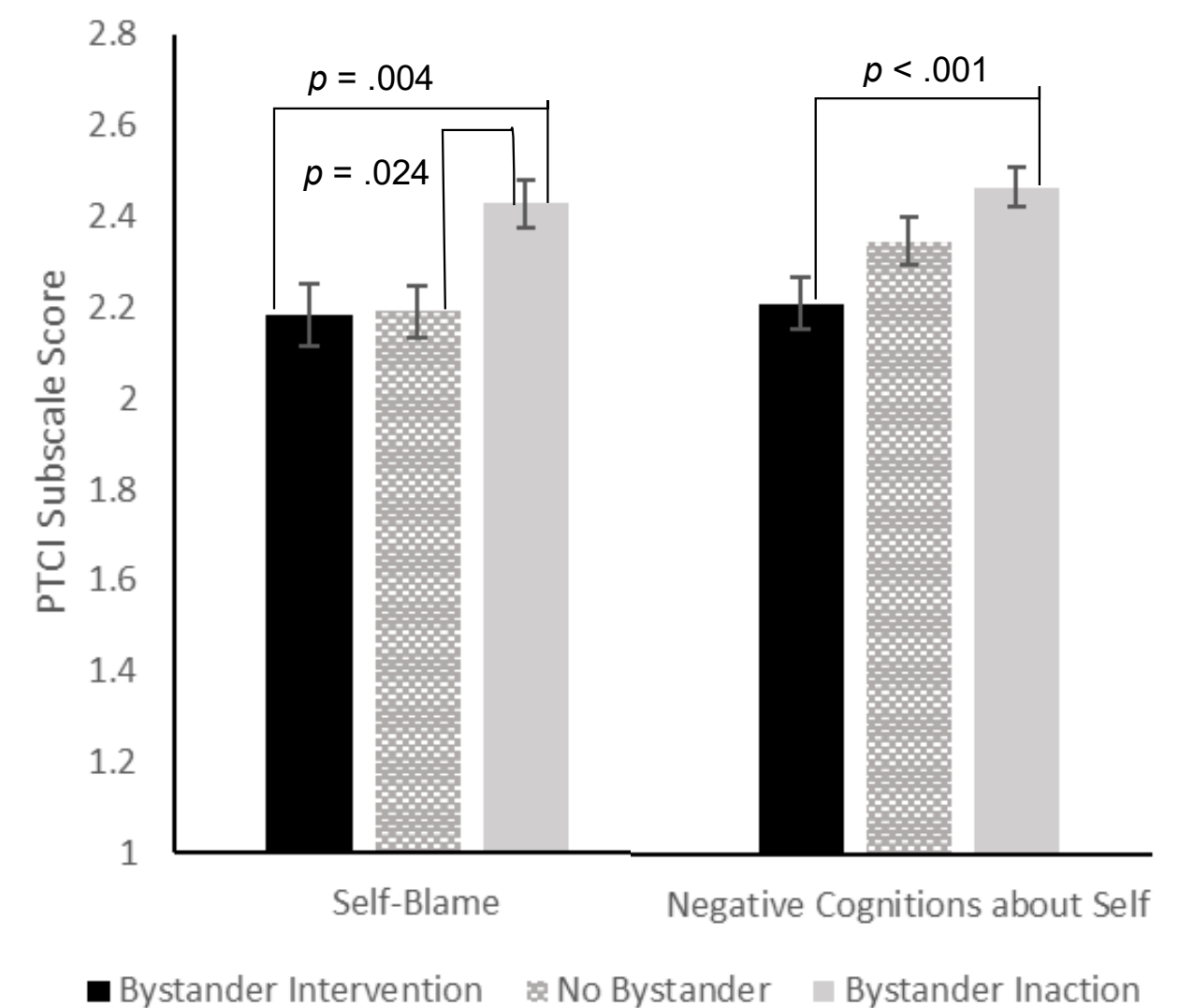
Table 1. Demographics by Bystander Group

	No Bystander ($n = 184$)	Bystander Inaction ($n = 283$)	Bystander Intervention ($n = 327$)
Age	18.82 $SD=1.06$	18.81 $SD=0.98$	18.82 $SD=1.01$
Race and Ethnicity			
American Indian/Native Am	5 (2.7%)	3 (1.1%)	3 (0.9%)
Asian/Asian American	7 (3.8%)	5 (1.8%)	11 (3.4%)
Black/African American	11 (6.0%)	10 (3.5%)	13 (4.0%)
Hispanic/Latinx	15 (8.2%)	20 (7.1%)	19 (5.8%)
White (non-Hispanic)	141 (76.6%)	239 (84.5%)	271 (82.9%)
Other	5 (2.7%)	6 (2.1%)	10 (3.1%)
Sexual Orientation			
Heterosexual	156 (84.8%)	252 (89.0%)	298 (91.1%)
Gay or Lesbian	1 (0.5%)	3 (1.1%)	2 (0.6%)
Bisexual or Pansexual	19 (10.3%)	21 (7.4%)	21 (6.4%)
Other or Questioning	8 (4.3%)	5 (1.8%)	5 (1.5%)

Results

- As expected, ANOVAs revealed significant effects of group on self-blame, $F(2, 791) = 6.09, p = 0.002$ and negative cognitions about self, $F(2, 791) = 7.69, p < 0.001$, but not negative cognitions about the world, $F(2, 791) = 1.98, p = .138$. Post-hoc comparisons were conducted with Bonferroni correction.

Figure 1. Posttraumatic Cognitions by Group



- As hypothesized, women in the Bystander Inaction group reported higher levels of self-blame and negative cognitions about the self than the Bystander Intervention group, and higher levels of self-blame than the No Bystander group.
- The No Bystander group did not differ from other groups in negative self cognitions, nor did this group differ from the Bystander Intervention group in self-blame cognitions.

Discussion

- Findings suggest college women who experienced sexual victimization reported more negative beliefs about themselves and self-blame when bystanders were present in an SHA event but are perceived to take no action to intervene.
- This is consistent with qualitative work suggesting that attempts at intervention by a bystander could be validating and reduce self-criticism related to the event (Ford et al., in press; McMahan, 2022). Even if bystander intervention attempts are unsuccessful, someone else noticing the nonconsensual sexual interactions and taking steps to address them may promote cognitions more consistent with posttraumatic growth.
- This study is limited in that there were not measures of PTSD symptoms and did not have more nuanced assessments of the event and survivor perceptions.
- Encouraging SHA bystanders to intervene could serve to reduce negative self-related cognitions and other negative outcomes.