

# STOP-SV: a training programme to prevent nightlife-related sexual violence (Evaluation Report)

PHI, Faculty of Education, Health and Community, Liverpool John Moores University, 3rd Floor Exchange Station, Tithebarn Street, Liverpool, L2 2QP 0151 231 4513 | z.a.quigg@ljmu.ac.uk | www.ljmu.ac.uk/phi | ISBN: 978-1-912210-58-9 (web)

# Authors

Zara Quigg\*, Charlotte Bigland\*, Kim Ross-Houle\*, Karen Hughes^, Mark A Bellis^

\* Public Health Institute, LJMU

^ IREFREA Spain/Bangor University

# Acknowledgements

The STOP-SV project is co-funded by the Rights, Equality and Citizenship (REC) Programme of the European Union. The STOP-SV project includes partners from four European countries:

- Czech Republic: Roman Gabrhelik, Adam Kulhanek, Tereza Jovbaková and Hana Fidesova (Charles University).
- Portugal: Irma Brito, Maria do Rosário Mendes and Fernando Mendes (IREFREA Portugal).
- Spain (Project lead): Mariàngels Duch, Maite Kefauver, Montse Juan and Amador Calafat (IREFREA Spain), and Karen Hughes and Mark A Bellis (IREFREA Spain/Bangor University).
- United Kingdom: Zara Quigg, Charlotte Bigland and Kim Ross-Houle (Liverpool John Moores University [LJMU]).

All partners have contributed to the development and/or implementation of the STOP-SV project, and/or research study design and implementation.

Along with STOP-SV project partners, we are grateful for the support of training facilitators in implementing the training of nightlife workers and research data collection, and all research participants who gave their time freely. Finally, we thank the following staff at LJMU for their support in report production: Rebecca Bates, Nadia Butler, Rebecca Harrison, Laura Heeks, Jennifer Lovelady and Lisa Jones.







CHARLES UNIVERSITY First Faculty of Medicine

# Contents

# Executive summary (infographic)

1. Introduction	1
2. Literature review	2
2.1 Nature of nightlife related sexual violence	2
2.2 Extent and consequences of nightlife related sexual violence	3
2.3 Factors associated with nightlife related sexual violence	3
2.4 Prevention of sexual violence	7
3. The STOP-SV training programme	9
3.1 Overview	9
3.2 STOP-SV training manual	9
3.3 Training of facilitators	10
3.4 Training of nightlife workers	10
4. Methods	12
4.1 Semi-structured interviews (project partners and training facilitators)	12
4.2 Pre and post-training surveys (nightlife workers)	12
4.3 Research implementation	13
4.4 Ethical considerations	13
4.5 Data collection, cleaning and analysis	14
5. Findings	15
5.1 Implementation and perceptions of the STOP-SV training programme	15
5.2 Nightlife worker knowledge of sexual violence	20
5.3 Nightlife worker attitudes and perceptions of sexual violence	21
5.4 Nightlife worker confidence to intervene in sexual violence/vulnerability	25
5.5 Nightlife worker identification of vulnerability and sexual violence	28
5.6 Nightlife worker experience of sexual violence	29
6. Discussion	30
6.1 Implementation and perceptions of the STOP-SV training programme	30
6.2 Associated impact of the STOP-SV training programme	31
6.3 Experience of sexual violence and vulnerability amongst nightlife workers	32
6.4 Study limitations	32
6.5 Conclusion	33
7. References	34
8. Appendices	38

# STOP-SV: a training programme to prevent nightlife-related sexual violence (evaluation)

# **INTRODUCTION**

Globally, sexual violence places large burdens on individuals' health and well-being, as well as local communities and services. Sexual violence that occurs in recreational settings, such as nightlife, is of increasing concern. Studies have started to emerge highlighting the nature and prevalence of sexual violence in nightlife, and critically have found that some forms of violence are often not recognised as such, and are thus socially accepted. This highlights the importance of developing and implementing prevention strategies. However, few prevention strategies exist that specifically aim to prevent and respond to nightlife related sexual violence.

# **STOP-SV PROJECT**

As part of the European Union Rights, Equality and Citizenship programme, in 2016 the STOP-SV (staff training on prevention of sexual violence) project was established with partners from Czech Republic, Portugal, Spain and the United Kingdom. The primary aim of STOP-SV is to support the prevention of nightlife related sexual violence, through:



Training nightlife workers so that they can recognise and effectively prevent and respond to sexual violence in nightlife.

violence in nightlife.

# **TRAINING IMPLEMENTATION**



In 2017/18 28 stakeholders from Czech Republic, Portugal and Spain were provided with resources to train nightlife workers leading to the training of 114 nightlife workers.

stop

sexual violence

- In each location, local stakeholders were provided with approximately 20 hours of training to become STOP-SV training facilitators.
- Occupational background, levels of confidence in discussing the topic, and time constraints affected some training facilitators' ability to fully engage with the STOP-SV training (including delivery to nightlife workers).
- Nightlife worker training sessions lasted approximately 2-3 hours.<sup>1</sup>
- The STOP-SV training was generally well received. Some of those engaged in the training suggested that it could be less academic and provide a greater focus on experience of sexual violence across genders.

# Nightlife worker perceptions of the STOP-SV training, post-training survey

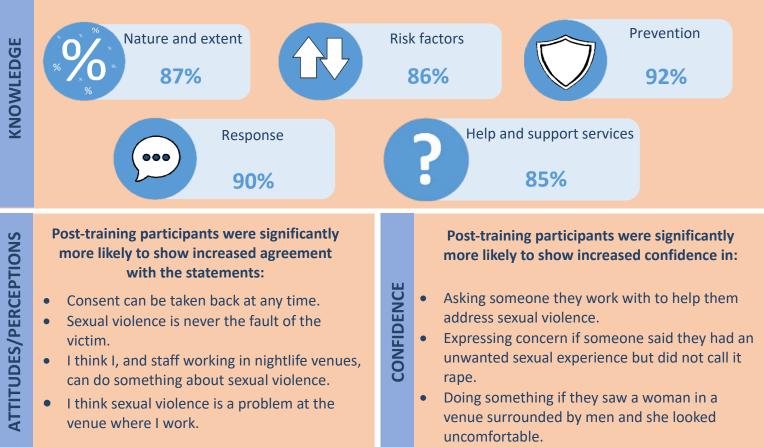


- The training is useful for me in my current job role in nightlife
- The training will help me to better deal with sexual violence in nightlife
- The trainer did a good job teaching and supporting me throughout the training session

<sup>1</sup> One pilot site conducted the training of nightlife workers over a 6-hour period.

# ASSOCIATED IMPACT OF THE STOP-SV TRAINING ON NIGHTLIFE WORKERS

Post-training, most participants agreed that the training had improved their knowledge on sexual violence

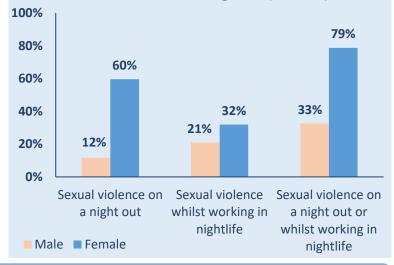


# NIGHTLIFE WORKERS EXPERIENCES OF SEXUAL VIOLENCE/VULNERABILITY

# In the last 3 months:

- **73%** had seen someone who looked drunk being escorted out of a venue by another patron.
- **66%** had seen a person who had had too much to drink passed out in a venue.
- 58% had seen someone who seemed upset in a venue.
- **20%** had seen a woman in a venue surrounded by a group of men looking uncomfortable or upset.
- **14%** had someone tell them that they had an unwanted sexual experience but did not call it rape.
- **9%** had heard someone making excuses for forcing someone to have sex with them.

% of trainees reporting being a victim of sexual violence whilst in nightlife (lifetime)



# CONCLUSION

Findings suggest that the STOP-SV training programme is associated with: improvements in knowledge; improved attitudes towards sexual violence; and, greater confidence to intervene in sexual violence, amongst nightlife workers. A longer-term follow-up study will aim to assess whether participation in the STOP-SV training programme is associated with positive bystander behaviours to prevent and respond to sexual violence in nightlife, and if associated improvements in knowledge, attitudes and confidence have been sustained three months post-training.







CHARLES UNIVERSITY First Faculty of Medicine The STOP-SV project was designed and implemented by: IREFREA Spain, IREFREA Portugal, Liverpool John Moores University (LJMU; UK) and Charles University (Czech Republic). A report presenting the full study is available at <u>www.ljmu.ac.uk/phi</u> Quigg et al (2018). STOP-SV: a training programme to prevent nightlife-related sexual violence (Evaluation Report). LJMU.

# 1. Introduction

Globally, sexual violence is a key public health issue, placing large burdens on individuals' health and well-being, local communities and services [1]. Accordingly, preventing sexual violence and associated risk factors are key targets in the sustainable development goals (SDGs)<sup>1</sup>. Efforts to understand, prevent and respond to sexual violence have increased in recent decades. Importantly, studies have started to emerge highlighting nightlife environments as key settings for sexual violence, and critically the importance of developing and implementing prevention strategies in these settings [2, 3, 4]. However, few prevention strategies exist that specifically aim to address nightlife related sexual violence.

As part of the European Union Rights, Equality and Citizenship Programme, in 2016 the STOP-SV (staff training on prevention of sexual violence) project was established with partners from the Czech Republic (Charles University), Portugal (IREFREA), Spain (IREFREA) and the United Kingdom (UK; Liverpool John Moores University). The primary aim of STOP-SV is to support the prevention of nightlife related sexual violence, through:

- Mobilising local communities and developing community coalitions to work together to prevent nightlife related sexual violence;
- Providing local stakeholders with the knowledge and tools to train nightlife staff (e.g. servers, security) so that they can recognise and effectively prevent and respond to sexual violence in nightlife; and,
- 3. Training nightlife workers so that they can recognise and effectively prevent and respond to sexual violence in nightlife.

Based on existing literature on nightlife related sexual violence, and programmes that aim to prevent and respond to sexual violence through bystander intervention, the project developed a new pilot training programme for nightlife workers (see section 3). In 2017/18, STOP-SV project partners from three pilot site countries (Czech Republic, Portugal and Spain) identified and tutored local stakeholders (i.e. training facilitators; Czech Republic n=5; Portugal n=11; Spain n=12, Appendix 1) to implement the STOP-SV training programme with nightlife workers in their respective countries. Subsequently, training facilitators implemented a training session with 114 nightlife workers (i.e. trainees; Czech Republic n=70; Portugal n=26; Spain n=18).

A research study was conducted to evaluate the implementation and impact of the pilot STOP-SV training programme. The core objectives were to explore:

- The views of project partners, training facilitators and trainees of the STOP-SV training programme (following the piloting); and,
- The associated impact of the STOP-SV pilot training programme on nightlife workers':
  - Knowledge, attitudes and perceptions of sexual violence; and,
  - Confidence in intervening in sexual violence in nightlife settings<sup>2</sup>.

In addition, the study sought to explore nightlife workers':

- Experience of identifying vulnerable patrons and/or sexual violence in nightlife settings; and,
- Personal experience of sexual violence in nightlife settings.

<sup>&</sup>lt;sup>1</sup> <u>https://sustainabledevelopment.un.org/sdgs</u>

<sup>&</sup>lt;sup>2</sup> A longer-term follow-up study will explore changes in bystander behaviour, three months post-training.

# 2. Literature review

### 2.1 Nature of nightlife related sexual violence

The World Health Organization (WHO) defines sexual violence as:

"Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed, against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work" [5].

This definition incorporates a wide range of aggressive and non-consensual acts that, in the context of nightlife environments, can include:

- Rape or attempted rape;
- Unwanted sexual contact, such as groping, kissing and touching;
- Unwanted non-contact sexual attention or harassment, such as verbal comments and sexual gestures;
- Coerced sexual activity, e.g. through threats, verbal pressure or the surreptitious provision of alcohol and drugs;
- Engaging in sexual activity with someone who is unable to give consent due to intoxication through alcohol or drugs; and,
- Sexual exploitation (e.g. providing underage access to nightlife venues in exchange for sexual favours).

Sexual violence in nightlife environments is thought to be most commonly perpetrated by male patrons towards female patrons or female staff. However, it can be committed by individuals of any gender towards both opposite and same sex victims and can also be committed by staff towards both patrons and other staff members [6, 7]. For example, in a study of observed aggressive incidents involving sexual advances (n=258) in bars and clubs in Canada, 2.2% of perpetrators and 6.5% of victims were employed by the venue (e.g. bar servers or entertainers) [7]. Meeting potential romantic or sexual partners is one of the main reasons why young people go to bars and nightclubs, meaning nightlife venues can be highly sexualised environments. This can complicate understanding and recognition of the issue, which is further exacerbated by widespread alcohol and drug use, which can both reduce inhibitions and increase vulnerability to sexual assault [1]. There are several ways in which sexual violence can manifest in nightlife settings, including [2, 8, 9]:

- Sexual violence may occur through misperceptions, such as when an individual incorrectly perceives another person to be sexually interested in them or a sexual action to be acceptable to them. Violence may also arise as part of the response to such misperceptions, such as through an aggressive rejection of an advance or an aggressive reaction to a rejection.
- Predatory individuals may target nightlife venues as easy locations for finding victims, in particular those who have been drinking heavily or using drugs. Such individuals may be less likely to recognise their vulnerability; less capable of refusing or defending themselves against sexual approaches; and less likely to report sexual assault to authorities. Predatory individuals may also provide individuals with alcohol or drugs (openly or surreptitiously) for such a purpose.
- Social norms may support sexual violence and prevent people from recognising this as such (e.g. if women who drink or work in bars are considered to be 'loose' or if being 'touched up' on a night out is accepted as normal behaviour).

# 2.2 Extent and consequences of nightlife related sexual violence

Over the past decade, various studies have emerged highlighting the prevalence of nightlife related sexual violence, particularly in countries including the USA, Canada and the UK. Most studies have focused on nightlife patron experience of sexual violence as either a victim, witness or perpetrator, with few studies exploring the prevalence of sexual violence amongst nightlife workers [6, 7]. Whilst estimates and measurements vary across studies, all studies suggest that sexual violence is highly prevalent across nightlife settings (see Box 1).

Sexual violence in nightlife and other settings both direct and can have indirect consequences. For instance, sexual violence may lead to injury, disability or even death [1]. Further impacts may also be placed on the victim's health and wellbeing, through stress and mental health problems; substance use; fertility control, lack of unintended pregnancies and abortions; and sexually transmitted infections [1]. Such impacts can place pressures on local services, including health and criminal justice [1].

One study exploring female attitudes toward sexually overt approaches in bars found that the majority would be upset/bothered if someone they did not know touched their breast/chest or genital area whilst in a bar (87.4%); and half (51.7%) if their buttock was touched [10]. The 2015 Global Drug Survey (an online survey targeted towards drug users) found that the proportion of respondents feeling unsafe/very unsafe on a night out in their country of residence increased from 4.9% whilst in bars, to 28.6% on the way home [11]. Feeling unsafe either before, during or on the way home from a night out increased with experiencing more categories of aggressive harm (including sexual violence) by a drunk person [11]. Experience of sexual violence, or fear of harm, can place direct impacts on the night-time economy (NTE). A study conducted in one UK nightlife area found that over a quarter of male (25.1%) and female (29.1%) nightlife users would be reluctant to return to a venue in which they received unwanted sexual touching [3].

# 2.3 Factors associated with nightlife related sexual violence

The nature and prevalence of nightlife related sexual violence is the result of a combination of intertwining factors that can either promote or prevent such harms. These factors can occur at an individual, relationship, community and/or societal level.

# 2.3.1 Individual level factors

**Alcohol consumption:** Across numerous studies alcohol consumption by either the victim or perpetrator has been associated with nightlife related sexual violence [2, 12, 13, 14,

15, 16]. For example, in a study of US females (aged 21+ years) visiting Mexico for a night out, those who consumed any alcohol were 4.8 times more likely to experience moderate sexual aggression during their night out [13]. A study of Brazilian nightlife users also found a relationship with drinking behaviours, with pre-drinking (i.e. drinking prior to entering the club) associated with unwanted kissing or attempted intercourse whilst in the club that night [14]. The relationship between alcohol use and sexual violence in nightlife settings may be due to a number of factors (see Box 2)

# Box 1: Extent of nightlife related sexual violence

# Brazil

• In a study of nightclub patrons (aged 18+ years), 10.2% of males and 10.8% of females reported that someone had kissed or tried to have intercourse with them against their will whilst in the club that night. 4.7% of males and 3.0% of females reported that they had kissed or attempted to have intercourse against a person's will whilst in the club that night [14].

# Canada

- Half (50.0%) of young (19-29 years) female nightlife users reported experiencing unwanted and/or persistent sexual aggression during a night out [2].
- In a study of female students (95% aged 18-20 years), the majority (82.5%) reported having had their buttock touched (over clothes) whilst at a bar or dance club; 24.6% of whom also reported that this always occurred when at a bar or dance club [10].
- In a study of 1,334 nights of observations in nightlife venues, around a quarter of all observed incidents of verbal or physical aggression were related to sexual/romantic overtures [8]. Of these, key types of aggressive behaviours included invasive contact (e.g. rubbing groin against a person) and engaging in persistent advances following a refusal [7].

# United Kingdom

- One in ten (11.6%) nightlife users aged 18 to 35 years who had preloaded (i.e. drank at home) prior to a night out reported experiencing sexual molestation in the nightlife environment in the past 12 months (compared to 5.0% of those who did not preload) [12].
- Amongst nightlife users, 70.0% of females and 41.8% of males reported that they had experienced unwanted sexual touching during a night out at some point in their lifetime [3].
- Amongst nightlife users, 11.3% reported experience of sexual violence during a night out in the past 12 months [54].

# USA

- One fifth (20.0%: females 25.4%; males 14.6%) of club users reported experiencing sexual aggression whilst in the club that night [20]. In another study, 12.6% of club users reported experiencing being touched, grabbed, or fondled without invitation whilst in the club that night [19].
- In a study of young (21-25 years) students, 61% of females and 43% of males reported experiencing unwanted sexual contact in drinking settings at some point in their lifetime [16].
- In a study of female bar users (n=52), a third (32.6%) reported having ever experienced either attempted or completed rape associated with drinking in a bar [26].
- A fifth (21.0%) of females reported experiencing sexual aggression either during or after drinking in bars [17].
- In a study of male students, 92% reported perpetrating at least one sexually aggressive act in bars since they were students [18].
- In a study of females travelling from the USA to Mexico for a weekend night out, 38.0% and 1.5% reported experiencing moderate and severe sexual aggression respectively during their night out [13].

**Demographics:** Many studies suggest that females are more likely than males to experience sexual violence in nightlife settings. For example, in a study of UK nightlife users, females were 6.7 times more likely than males to report experiencing sexual molestation during a night out in the past 12 months [12]. Some studies suggest that both victims and perpetrators of sexual violence in nightlife settings tend to be of a younger age [11, 17, 18]. In a study of club users in the US, ethnicity was related to being a victim of sexual aggression in the club, with White ethnicity associated with increased risk, and Hispanic ethnicity with decreased risk [19].

Personal history/previous victimisation: A history of violence, sexual abuse and/or harassment both within and external to the nightlife environment has been associated with sexual violence occurring in nightlife settings [9, 13, 17]. For example, in a study of US females visiting Mexico for a night out, those who had been verbally threatened in the past year were over two times more likely to experience moderate sexual aggression during their night out [13]. In another study of US club goers, experience of sexual aggression in a club during the past 30 days was associated with sexual aggression in a club on the night of survey [19]. A history of multiple sexual partners/interpersonal relationships has also been suggested as being associated with nightlife related sexual abuse and/or harassment [9, 10].

Other factors: One study found that men who are sexually aggressive in bar settings are younger, heterosexual, unmarried and embody dominant cultures of masculinity (e.g., being assertive, dominant, willing to take risks, forceful), and they are more likely to have engaged in self-reported consensual sexual intercourse [18]. In a study of US female bar drinkers, poor mental health was a strong predictor of bar-related victimisation during the past year [17]. Permissive attitudes towards sexually overt approach behaviours have been associated with experience of sexually overt approach behaviours in the bar environment [10].

# 2.3.2 Relationship level factors

Group dynamics: Some studies have explored the influence of group dynamics in preventing or promoting sexual violence in nightlife settings, with findings suggesting varying relationships. For example, two studies have found that experience of sexual aggression amongst the group (either on the same or a previous night out) was associated with individual group members' increased risk of sexual aggression during the night out [2, 19]. One study also found that if a group has at least one member who frequently gets drunk, individuals in the group are at increased risk of experiencing sexual aggression during the night out [19]. Individuals social status within, or familiarity with, the group also appears to be a key factor. In a study of female bar patrons, lower social status in the group was

#### Box 2: Relationship between alcohol use and sexual violence

Alcohol use directly affects cognitive and physical functioning reducing self-control and the ability to process information [51]. Thus, for example, reducing the ability of victims to recognise sexually aggressive cues or to resist coercive attempts, or perpetrators to distinguish between friendly and sexually interested behaviours of others [2, 16, 19, 53]. The expectations about the effects of alcohol (e.g. feeling more sexual) may also influence a person's personality and behaviours [16, 53]. Evidence also suggests that females may be more vulnerable to sexual violence in nightlife settings as males may believe that a female consuming alcohol is more sexually available and promiscuous, and forcing sex on a woman is more acceptable when she is drinking [2, 21, 27].

associated with increased risk of sexual aggression amongst those who had consumed 5+ alcoholic drinks [2]. In another study of nightlife users, with increasing age, group familiarity amongst females became increasingly predictive of experiencing sexual aggression in the club [20].

# 2.3.3 Community and societal level factors

Attitudes, expectations and social norms: The attitudes, expectations and social norms regarding what is acceptable and/or an expected behaviour in nightlife settings has been cited as a contributor to sexual violence across a number of studies [2, 16, 21, 22, 23]. Male and female attitudes around what makes females vulnerable to sexual violence in nightlife settings show how attitudes can be influenced through perceptions of female behaviours. One study has found that males believe that female dress, having contact with men in bars, attention seeking behaviours and being alone in a nightlife environment makes them vulnerable to sexual violence in bars [21]. Another similar study amongst females found that they believed female sexual provocation, attention seeking behaviours and aggression makes them vulnerable to sexual violence in bars [24]. Behaviours such as transactional sex (e.g. exchanging/accepting alcohol for sex) in nightlife venues in South Africa have been suggested to reinforce the undervaluing and commoditisation of women, whilst also putting them at greater risk of rape [23]. In a study of young (16-35 years) German and British holidaymakers visiting tourist resorts in Southern Europe during the summer, being attracted to bars with opportunities for sex was associated with being a victim of sexual harassment and having sex against one's will during their holiday. Further, being attracted to bars where people get drunk was also associated with being a victim of sexual harassment during their holiday [25].

A permissive environment where anything goes, involving norms of public displays of

affection (beyond what people may do in their day-to-day life), and where males and females are expected to play different roles (e.g. men pursue women) means that sexual aggression in nightlife may become normalised [2, 16]. This may prevent people from recognising such harms. For example, if women who drink or work in bars are considered to be 'loose' or if being 'touched up' on a night out is accepted as normal behaviour. Sexual violence by men towards women can be related to cultures of machismo, male bonding and the assertion or defence of perceived dominant male identities [18].

Nightlife venues: Studies have shown that the frequency of attending bars is associated with experiencing nightlife related sexual violence, particularly amongst females [17, 26, 27]. Further, a study in India found that amongst males, visiting a wine shop with friends was associated with perpetrating forced sex with at least one partner in the past three months [28]. The sexualised nature of nightlife environments, and the behaviours (e.g. alcohol consumption) and expectations (e.g. fun /friendly/open environment) of nightlife patrons can exacerbate risks of sexual violence [29, 30]. In an observational study in Canada, sexual activity, contact and competition were related to frequency of aggression occurring in bars [29]. In a study of US females visiting Mexico for a night out, a number of characteristics relating to the venue and their customers were associated with increased risk of moderate sexual aggression on a night out. Factors included the presence of drink offers and customers openly removing their clothing, appearing to be drunk, fighting and using drugs [13].

The role and interaction style of venue security staff has also been suggested as being associated with sexual violence [30]. Further, certain environmental factors have been shown to have a potential influence. Bar and clubs can often be dark, crowded and noisy places, and these factors have been found to contribute to the problem. For example, these venue characteristics may make it easier for perpetrators to commit offences due to the close proximity of patrons and/or the difficulty in identifying offenders [16, 30]. Alcohol outlet density: At a population level, whilst one US study has found a relationship between alcohol outlet density and levels of sexual offences [31]. Another study found no relationship between alcohol outlet density and sexual intimate partner violence amongst females [32].

# 2.4 Prevention of sexual violence

At a societal level, developing a climate of nontolerance of sexual violence is vital to preventing such harms. Preventing sexual violence and associated risk factors are key targets in the United Nations SGDs (Box 3). Implementing and adhering to legislation and conventions that aim to prevent sexual violence, reduce inequalities and/or promote human rights (particularly for girls and women) is critical to support prevention efforts (e.g. Box 3) [1]. Globally, there is increasing emphasis on developing and implementing sexual violence prevention strategies. However, few programmes have been rigorously evaluated, or implemented outside of high-income countries [1]. Specific strategies with some evidence of effectiveness include programmes that aim to change social and cultural gender norms, through the use of social norms theory, and school-based training to help children recognise and avoid potentially sexually abusive situations [1].

Pertinent to nightlife settings, at a community level, studies suggest that the use of alcohol policy (e.g. alcohol pricing, and management of drinking environments) may be effective in preventing sexual violence [33, 34]. Few academic studies have, however, explored the prevention of sexual violence in nightlife settings [3, 35]. One study has explored the sensitivity and specificity of two commercially available drug-facilitated sexual assault drug detector kits [35]. They concluded that the use of such kits by the public in the nightlife environment needs further investigation, as they may create a false sense of security (false negatives) and undue concern (false positives) among kit users [35].

Some studies have discussed ways in which individuals (primarily females) may monitor or alter their behaviours to reduce their level of vulnerability in nightlife. For example through: limiting personal alcohol consumption to reduce levels of inebriation; not walking around alone/going out in groups/remaining with friends; avoiding interactions with strangers; shaming aggressors to deter future incidents; the use of gestures and signals to alert friends to potentially compromising situations; and watching drinks to ensure they are not tampered with or only drinking out of bottles [4, 9, 30, 36].

In an observational study in Canadian bars and clubs, bystanders (i.e. nightlife users) intervened in a fifth of aggressive incidents involving sexual advances; however, whilst this was often to support the victim, sometimes it involved encouraging the perpetrator (staff appeared to rarely intervene) [2]. A number of programmes have been developed to encourage positive bystander behaviours to prevent and respond to sexual violence in nightlife settings (e.g. Who Are You?, New Zealand<sup>3</sup>; vulnerability training, South Wales

<sup>&</sup>lt;sup>3</sup> www.whoareyou.co.nz/

UK<sup>4</sup>). Whilst information on the impact of such programmes is limited, evaluation of bystander programmes implemented in other settings (e.g. college campuses) suggest that they may be associated with reductions in violence, including sexual violence [37]. Such programmes aim to alter social norms and encourage people to tackle and prevent sexual violence. They do this through promoting norms that protect against violence and motivating people to promote these norms through providing peer leadership around preventing sexual violence and to intervene when they witness such behaviours [37, 38, 39, 40].

#### Box 3: Sustainable development goals (SDGs) and EU legislation relating to sexual violence

#### Sustainable development goals (SDGs) relating to sexual violence [52]

- 5.1: End all forms of discrimination against all women and girls everywhere.
- 5.2: Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation.
- 16.1: Significantly reduce all forms of violence and related death rates everywhere.
- 16.2: End abuse, exploitation, trafficking and all forms of violence against and torture of children.

#### **EU** legislation

European legislation does not specifically address the issue of sexual violence in the nightlife environment. However, the topic is covered within broader legislation:

- EU Victims' Directive (2012/29/EU): Adopted in 2012, this establishes minimum standards on the rights, protection and support of victims of crime in the EU, and makes specific reference to victims of gender-based violence, victims of sexual violence and victims of violence in a close relationship [55].
- Council of Europe Convention on preventing and combating violence against women and domestic violence (Istanbul Convention): Adopted in 2011, this is the first legally binding regional instrument that comprehensively addresses different forms of violence against women, such as psychological violence, stalking, physical violence and sexual violence [56].

https://www.swansea.gov.uk/article/30961/Peopl e-are-safe-and-feel-safe

# 3. The STOP-SV training programme

# 3.1 Overview

The STOP-SV training programme aims to increase the capacity of staff working in nightlife (e.g. servers, security) to recognise and prevent nightlife related sexual violence, and increase their ability and willingness to respond through positive bystander intervention. The programme has four core objectives:

- To raise awareness of the nature of sexual violence in nightlife settings, its consequences and associated risk factors.
- To promote the unacceptability of all forms of sexual violence.
- To improve awareness of ways to identify, prevent and respond to sexual violence in nightlife settings.

• To develop individual's skills to enable safe bystander engagement to prevent or respond to sexual violence.

In order to achieve these objectives, STOP-SV aims to provide local stakeholders (training facilitators) with the knowledge and tools to train nightlife workers (trainees). A two-step training package was produced covering 1) training of facilitators, and 2) training of nightlife workers, which was accompanied by a STOP-SV training manual and materials. All programme materials were produced in the English language and then translated by project partners into each pilot sites native language.

# 3.2 STOP-SV training manual

The manual provides stakeholders engaged in nightlife with:

- A training programme designed to develop nightlife worker capacity, ability and willingness to identify, prevent and respond to sexual violence in nightlife.
- Information, tools and techniques to support implementation of the training programme.
- A framework to support the continued development, implementation and evaluation of the training programme.

An introductory section provides an overview of the purpose of the STOP-SV training

programme and its target audience; the importance of focusing on sexual violence in nightlife; and, an overview of the manual. The manual is split into two core sections<sup>5</sup>:

**PART 1:** provides a summary of the nature and extent of sexual violence in nightlife, its consequences and risk factors and the STOP-SV approach to prevent and respond to sexual violence in nightlife.

**PART 2:** focuses on the training programme, including: information on training delivery and the nightlife worker training programme including PowerPoint presentation slides and accompanying notes, activities and materials.

<sup>&</sup>lt;sup>5</sup> The final manual, produced post-piloting also includes a section on monitoring and evaluation.

# 3.3 Training of facilitators

A training programme was produced to develop training facilitator's capacity to train nightlife workers. The overarching aim of the training of facilitators was to provide them with the knowledge, tools and skills to go on to deliver training to nightlife workers. The training programme was delivered by project partners in each pilot site over a period of approximately 20 hours and was broken down into four sessions:

Session 1: Understanding sexual violence in nightlife settings covering: the nature, extent and consequences of nightlife related sexual violence, and associated risk factors; consent; and, if and how the nightlife workers may facilitate or prevent sexual violence.

**Session 2**: **Nightlife and vulnerability** covering: factors that increase vulnerability or risks of sexual violence, and how to identify such risks in the NTE.

**Session 3: Prevention in action** covering: how nightlife workers and the NTE may prevent sexual violence, through e.g. professionalism of staff, management of patrons, and the design of the NTE.

**Session 4: Response** providing: an understanding of positive bystander

intervention theory [41], considering passive and active bystanders, differences in these roles, and aiming to promote positive bystander actions as a response to sexual violence in the NTE.

Training materials were developed to promote consistency in training delivery across pilot sites, whilst allowing some flexibility to ensure the training met local partner needs<sup>6</sup>. A lesson plan was produced for each session, including the objectives of the session, and information to support the implementation of the training process. For each phase of the session, this included: the aim; techniques (e.g. exercises) and materials (e.g. PowerPoint slides; additional materials) to aid the training process; and the estimated length of time required. The PowerPoint presentation was accompanied with notes for each slide. Activities included facilitated discussions, 'brain storming<sup>7</sup> and 'world café<sup>8</sup> methodologies.

All participants of the training received a copy of the training manual, PowerPoint slides (for reference purposes), and relevant training tools (e.g. PowerPoint slides, notes and materials) to equip them to deliver the training of nightlife workers.

# 3.4 Training of nightlife workers

The trained facilitators (trained by project partners, described above) undertook the training of nightlife workers (trainees). The training was designed to be carried out in approximately two hours, to promote uptake of the training, and participant engagement. Similar to the facilitator training, the nightlife worker training covered three key areas:

 Understanding sexual violence in nightlife settings covering: the nature, extent and consequences of nightlife related sexual violence, and associated risk factors; and, consent.

<sup>&</sup>lt;sup>6</sup> Project leads included local information into the training, such as legislation.

<sup>&</sup>lt;sup>7</sup> E.g. Individual ideas are shared to trigger discussion with others.

<sup>&</sup>lt;sup>8</sup> E.g. Individuals discuss set topics with other individuals/groups at tables, with individuals switching tables, to learn from, and build upon other individuals/group discussions.

- Nightlife and vulnerability covering: factors that increase vulnerability or risks of sexual violence, and how to identify such risks in the nightlife setting.
- Prevention and response focusing on: developing understanding of positive bystander intervention theory [41], considering passive and active bystanders, differences in these roles, and promoting positive bystander actions as a response to sexual violence in the NTE.

Along with the training manual, PowerPoint slides were provided for use during the training session. The PowerPoint slides included detailed notes with hints, tips and activities for facilitators to follow in order to help encourage participant engagement and conversation about the topic. Activities included asking trainees to write on post-it notes what they thought sexual violence was, and engaging in group discussions. For example:



**Discussion:** Ask participants why it is important for them to attend the training and what they want to get out of the session?



**Activity:** Ask trainees to consider and write down what roles these

groups of nightlife workers can play in preventing and/or responding to sexual violence?

In addition, the training included use of the 'Who Are You?'<sup>9</sup> video, which illustrates how nightlife related sexual violence may occur and opportunities for bystander intervention. The video uses actors to portray a night out where a girl is a potential victim of sexual violence, and depicts this through the viewpoint of different spectators (e.g. nightlife workers and patrons). For the training, the video was formatted into two parts, with facilitators halting the video half way through to ask participants to reflect on what they have seen, and what could have been done to intervene at varying times during the scenes. The second half of the video is then played, and participants are shown preventative strategies specific to nightlife environments. The aim of this video is to encourage trainees to think about how their actions could influence the prevention of sexual violence.

Facilitators were also provided with a breakdown of the estimated time that should be spent on each slide.

<sup>&</sup>lt;sup>9</sup> www.whoareyou.co.nz/

# 4. Methods

In order to evaluate the STOP-SV training programme a mixed methods approach

incorporating quantitative and qualitative methods was undertaken.

# 4.1 Semi-structured interviews (project partners and training facilitators)

Semi-structured interviews were carried out with a project partner from each participating pilot site (n=3) and five training facilitators from across the pilot sites (Czech Republic, n=1; Portugal, n=2; Spain, n=1). Interviews were carried out via Skype or telephone and the majority were conducted in English. One interview took place in Spanish and was translated to English. The interviews were semi-structured to allow for set themes to be explored through open ended questions. Throughout the interviews, project partners discussed their experiences of delivering the training to the training facilitators, and the training facilitators reflected on their experience of training nightlife workers. Questions explored the content of the manual and training materials, any issues encountered with delivery of the training and perceptions of how the training facilitators/nightlife workers responded to the training. Additionally, the project partners and training facilitators were asked about any additions, omissions and amendments that they felt were necessary to the STOP-SV training programme.

# 4.2 Pre and post-training surveys (nightlife workers)

A pre and post-training survey was administered to the nightlife workers participating in the training session:

Pre-training survey: Prior to the training session, participants were provided with a copy of the participant information sheet (PIS; in the native language of the pilot site) which explained the purpose of the study, how the data would be used and the various stages of data collection. Participants were further informed that they could withdraw from the study prior to and during completion. However, due to the anonymous nature of the surveys, once they were submitted individual responses could not be withdrawn. The PIS also explained that by submitting a completed survey, the participant would be giving their consent to take part in the study. The training facilitator provided a verbal explanation of the PIS and then provided the trainees with a paper-based pre-training survey. The survey asked questions about:

• Demographics (e.g. age, gender).

- The participant's drinking behaviours.
- The participant's understanding of, and attitudes and perceptions toward sexual violence.
- Previous training regarding sexual violence, and/or engagement in prevention.
- The participant's experiences of identifying vulnerability and/or sexual violence in nightlife settings.
- How confident the participant would be in recognising and dealing with sexual violence in nightlife settings.
- The participant's expectations of the STOP-SV training.

The questions that related to the participant's attitudes and perceptions of sexual violence and their confidence in recognising and dealing with sexual violence were adapted from preexisting surveys [42, 43, 44], so that they were applicable to the nightlife setting. All (n=114) trainees completed a pre-training survey. **Post-training survey**: Following the training, training facilitators provided study participants with a paper-based post-training survey. This survey included questions about:

- Demographics (e.g. age and gender).
- The participant's experience of the STOP-SV training.
- The participant's attitudes and perceptions of sexual violence (repeated from the pre-training survey).
- How confident the participant would be in recognising and dealing with sexual violence in nightlife settings (repeated from the pre-training survey).
- The participant's own experiences of sexual violence in nightlife settings.

The questions about attitudes and perceptions of sexual violence and confidence in recognising and responding to sexual violence were repeated to see if there had been any changes in perceptions, understanding and attitudes following the STOP-SV training. Participants were asked to provide their email address if they were willing to take part in a longer-term follow-up survey, which would be sent to them in three months' time<sup>10</sup>. The longer-term follow-up study will explore the association between engagement in the training, and attitudes, perceptions and confidence, and bystander behaviour (3months post-training). All (n=114) trainees completed a post-training survey, and 80 (Czech Republic n=41; Portugal n=25; Spain n=14;) provided their email address to receive the follow-up survey.

# 4.3 Research implementation

Project partners from each of the three pilot sites were provided with copies of the surveys and PIS for translation. Training facilitators were also provided with instructions for survey distribution (see Appendix 2), and took part in a research implementation training session delivered by members of the LJMU research team via Skype. The training session provided the opportunity for the research team to explain the purpose behind each of the surveys and address any queries. It discussed how/when surveys should be disseminated to the trainees to ensure consistency in implementation. The training also discussed

4.4 Ethical considerations

Approval for this study was obtained from LJMU Research Ethics Committee (reference-18/PHI/003). Gatekeeper consent to recruit the training facilitators and nightlife workers was obtained from the project partners. All how the surveys should be collected and stored (in sealed envelopes before being handed to the project partner at the earliest opportunity) to ensure that the data collection process complied with the ethical approval granted by LJMU's Research Ethics Committee (see 4.4). The surveys were made available to participants in English or the native language of the pilot site. After completion, where applicable, the responses to the free text questions were translated to English by project partners and the surveys were returned to the research team at LJMU via a secure SharePoint.

those who took part in either an interview or survey were provided with a PIS, which included contact details of the research team in case they had any queries. Informed verbal consent was obtained from all of those who

<sup>&</sup>lt;sup>10</sup> As the longer-term follow-up period is on-going these findings are not provided in this report.

took part in an interview. Nightlife workers provided implied consent through submitting completed surveys to training facilitators. All of the data included in this report has been anonymised to ensure that individuals cannot be identified. So that the three trainee surveys could be anonymously linked, participants were asked to include their initials, age and the first or last three digits of their zip code on each survey (producing a pseudo-anonymised participant code).

### 4.5 Data collection, cleaning and analysis

Surveys were entered, cleaned, coded and analysed in SPSS 24. Analyses utilised chisquared and Wilcoxon signed rank tests to examine differences between pre and posttraining measurements, genders and pilot sites. Surveys were linked using the pseudoanonymised participant code. All interviews were audio recorded, with the participant's permission, and a full transcript was made. Thematic analysis was applied to the interview transcripts [45]. Common themes throughout the interviews were identified. Illustrative quotations have been used within the report to highlight and evidence these themes.

# 5.1 Implementation and perceptions of the STOP-SV training programme

# 5.1.1 Training of facilitators (project partner interviews)

Training implementation: The training of facilitators lasted approximately 18-20 hours across each pilot site. Two pilot sites divided this time equally between two training sessions, whilst the third divided this into five shorter sessions. A total of 28 facilitators (Czech Republic n=5; Portugal n=11; Spain n=12) were trained across the three pilot sites; all countries experienced some dropout of facilitators during or after the training (see Appendix 1). Project partners reported that some of the reasons behind the dropouts included facilitators not feeling confident in discussing the topic, and lack of time to commit to the training and delivery of training to nightlife workers.

# "We also had one trainer drop out because they did not feel confident with the topic" (Project partner, Pilot Site [PS] 2)

Project partners provided information on the demographics of the facilitators; across all pilot sites, facilitators were reported to be aged over 25 years; for two of the three pilot sites more females than males were trained (see Appendix 1). Facilitators' occupational backgrounds included psychology students, bar managers and professional trainers.

The location of training varied across pilot sites from academic institutes to privately hired venues. All project partners reported using the training materials, including the PowerPoint slides and training manual, to deliver the training of facilitators. One pilot site conducted a fieldtrip with facilitators to a nightlife environment lasting 3-4 hours where they visited several venues to observe nightlife harms. Another pilot site introduced a roleplay section relating to intervention techniques to the training, which was reported by the project partner as being well received by facilitators.

**Perceptions of the training:** Project partners were asked their views on the training programme. When asked about the length of the training, one project partner explained their initial concerns that the training may be too long. However, this view altered once training began, with acknowledgment, that sufficient time is needed to allow facilitators to discuss and reflect upon the issue.

"It should be a long training to give people time to process the information, reflect on it, and be able to deliver it to somebody else" (Project Partner, PS1)

All those asked felt that the materials portrayed the information clearly and complemented each other.

"I think it works, it's very visual, it gives straight information and the pedagogical part of it works well to give the information but also the objectives and aims" (Project Partner, PS1)

Overall, the project partners felt the training content was appropriate for the participants in terms of the use of language, terminologies, and level of information. One project partner did express that they would like to integrate some local data, which was previously unavailable to ensure the data was up to date and relevant to their location. Another project partner reported that some facilitators requested a summarised version of key points of the training as an additional resource. This was something that was provided by the project partner.

"Some people said that what they wanted to have was this summary so that they keep the key ideas" (Project Partner, PS3)

#### **Facilitator engagement**

Overall, facilitator engagement in the training and understanding of the topic was reported as being generally positive across all pilot sites, with few issues being raised by project partners. One concern raised was the comprehension of the training by people from different educational backgrounds. This was due to a project partner's observation that one of the training facilitators (from a bar work background) found the information more difficult to comprehend compared to those from an academic background.

# "I think it's easier for people who have studied in psychology, social services or another related work practice than for people who work in nightclubs or bars" (Project Partner, PS3)

Project partners noted that participants did have some questions, which centred on the nature of sexual violence and local legislation and experience of sexual violence. Project partners felt they were able to answer any queries. They also reported receiving positive informal feedback during training, with participants stating they had benefitted from the training and that they were looking forward to distributing it to nightlife workers. They also noted a change in attitudes and perceptions of sexual violence as the training progressed.

"I think that some concepts associated with violence were clarified, and also some ways of looking at the problem and how to act improved" (Project Partner, PS3)

# 5.1.2 Training of nightlife workers (training facilitator interviews)

#### **Training implementation**

Whilst all pilot sites recruited trainees who worked within the NTE, the roles they undertook varied. Participants included bar staff, security and door staff, promotors, and entertainment personnel. Half of trainees were aged 18-29 years, and 54.4% were male (see section 5.1.3). The gender balance within training was discussed as an issue within two pilot sites however, with some facilitators feeling that one gender was underrepresented.

# "We had a lot of males attend and not many females, so I think more females would be good" (Facilitator, PS1)

Training took place in different locations, but primarily within nightlife venues. The number of training sessions that took place in each pilot site ranged from 2 to 5<sup>11</sup>, with the total number of participants per pilot sites ranging from 18-70. Training in two of the pilot sites lasted approximately 2-3 hours per group, with the third pilot site conducting training with one group over a 5-6 hour period. Despite the difference in training length, all facilitators felt they managed to cover the relevant materials in the allocated time. For pilot site 3, which had the longer training time, it was identified by one facilitator that the training may have been more suitable for nightlife workers if it was conducted over a shorter period of time.

"I think the training was a little long for people. It would be better for them if it was shorter" (Facilitator, PS3)

#### Perceptions of training

Training facilitators were asked their views on the nightlife worker training programme. Facilitators were in agreement that the materials were well prepared, and the order of training and the visual accompaniments worked well. The use of videos was reported as being well received by trainees.

"It worked brilliantly. They were well prepared; it was useful and works nicely. We had the training materials in both electronic and paper format" (Facilitator, PS2)

"People liked the videos because it made it more real to them" (Facilitator, PS3)

Facilitators were asked if they, or the trainees, felt there were any gaps in information, or if

<sup>&</sup>lt;sup>11</sup> Czech Republic, 5; Portugal, 2; Spain, 2.

any of the content was unnecessary to which the majority agreed they felt that all information was covered. However, some concerns were raised relating to the depth of knowledge included. For example, it was suggested that the first section may have been too theoretical and quantitative for trainees. Further, some facilitators felt that the content was not basic enough for those who did not have a full understanding of the NTE and may need to be adjusted in the future for specific audiences.

"I think everything went pretty well, except the presentation, as I think it is a bit too much quantitative data and a bit too expert about the topic" (Facilitator, PS2)

"I think it worked well for the public that we had, but for other audiences it may need to change" (Facilitator, PS3)

Additionally, facilitators from two countries expressed concerns staff had regarding the training being too heavily focused on the female perspective, and male participants feeling there was a lack of gender equality in the content.

"The guys that were there think that the information was very focused on young women, and the problem that women have in dealing with these things. Some of them said it wasn't fair. We need more men's opinions on this" (Facilitator, PS3)

### Staff engagement

Whilst overall engagement from trainees was reported to be good, there were examples provided by facilitators that demonstrated some issues relating to gender during training. These seemed to be divided by gender groups, with males being seen to have taken the training less seriously than their female counterparts across the three pilot sites, with some evidence of attitudes that may promote sexual violence. "The nature of the men was that they would be a bit less serious; they made some jokes, but not over the line. The men took longer to participate definitely; the girls seemed to take it more seriously" (Facilitator, PS2)

"There was some people who were very conscious of the problem, but there were others who made inappropriate jokes, the male staff actually. The jokes were things like the males calling a man a hero in the video relating to a male taking advantage of a drunken female" (Facilitator, PS1)

Although these problems were initially encountered, all facilitators remarked that they felt there was a marked change in participants' attitudes about sexual violence during the training. This occurred in relation to trainees' understanding of the definition and extent of the issue, and prevention strategies.

"There were two very young women, who are 18-19, and they initially didn't think they had suffered any sort of sexual violence, and in the end they had changed how they see what had been done to them" (Facilitator, PS3)

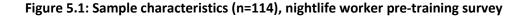
# "I thought there was a big change but it's hard to say how it would work in the following months" (Facilitator, PS2)

Other issues related more specifically to the trainees themselves, linking either to their confidence, or their willingness to engage in the topic. It was observed by one facilitator that some participants felt, prior to the training, that sexual violence prevention was not their responsibility, however after the training they could see the opportunities that their post offered in prevention activity.

"The thing that I observed was that the staff thought they couldn't do anything to prevent sexual violence and they always thought someone else should prevent it instead of them" (Facilitator, PS1)

### 5.1.3 Nightlife worker trainee characteristics

Figure 5.1 and Table A1 (Appendix 3) provide details of nightlife worker trainee characteristics. Over half (54.4%) were male and 50.9% were aged 18-29 years. Just under half (49.1%) were employed as a bar tender (31.6%) or bar supervisor/manager (17.5%); 15.8% were employed as door security; 7.0% as an entertainer (e.g. DJ); and 28.1% another role. The majority (80.2%) had worked in the NTE for two or more years. Of those working in venues (n=102), 58.6% had worked in their current venue for two or more years; 58.2% had worked in the venue on a weekly basis in the last three months. Of those who had worked in a venue in the last three months, 30.1% reported weekly consumption of alcohol whilst working in the venue. Of all trainees, 29.5% reported binge drinking<sup>12</sup> at least weekly in the last three months. One-fifth (20.2%) of trainees had previously received training about sexual violence (14.2%), or had been/were currently involved in efforts to address sexual violence (13.2%; not including involvement in the STOP-SV training). Some differences in sample characteristics were observed across pilot sites (Table A1, Appendix 3).



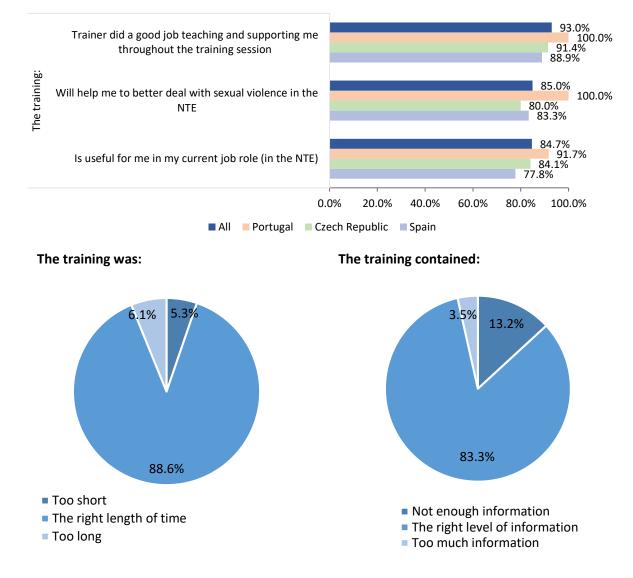
ď	Male 54.4%	<b>Female</b> 44.7%	Age group (years)	<b>18-29</b> 50.9%	<b>30+</b> 49.1%		
	<b>Bar tender/manager</b> 49.1%		Door securityOther job role15.8%35.1%				
	<b>2+ years worked in NTE</b> 80.2%	27	Venue workers: 2+ years worked in venue 58.6% Work weekly in venue* 58.2%				
	Weekly binge drink* 29.5%	Weekly	Of those working in venues Weekly drink whilst working in venue* 30.1%				
	Prior engagement in sexual violence prevention/training 20.2%	1.	Engagement in:TrainingPrevention activity14.2%13.2%				

\* Last 3 months.

<sup>&</sup>lt;sup>12</sup> Consuming six or more drinks containing alcohol on one occasion.

# 5.1.4 Nightlife worker views of the STOP-SV training

Overall, the STOP-SV training was well received by trainees (Figure 5.2; Table A2, Appendix 3). The majority of participants agreed that the training was useful for their current job role in the NTE (84.7%); will help them to better deal with sexual violence in the NTE (85.0%); and that the trainer did a good job teaching and supporting them throughout the training session (93.0%). The majority also thought that the training was the right length of time (88.6%) and had the right level of information (83.3%). Nearly all (98.2%) participants would recommend the training to others. Of these, 71.4% would recommend that they do it during their personal or work time; 25.9% during work time only; and 2.7% during personal time only. No significant differences in participant views were observed across pilot sites (Table A2, Appendix 3).



### Figure 5.2: Participants perceptions of the STOP-SV training, nightlife worker post-training survey

# 5.2 Nightlife worker knowledge of sexual violence

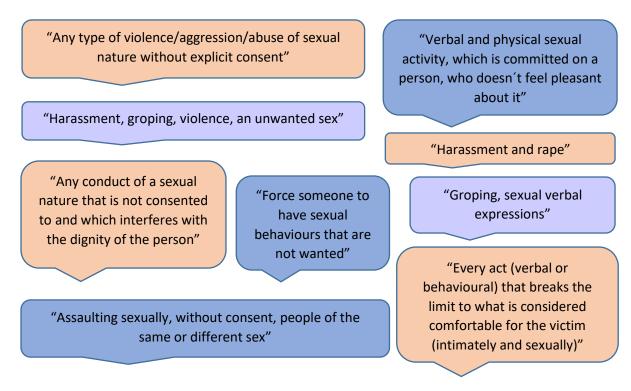
# 5.2.1 Pre-training

Figure 5.3 provides examples of trainees' (n=85) written descriptions of sexual violence, pre-training. Descriptions were provided in the trainees native language, which were subsequently translated into English by project partners. As quotes may have been affected during the translation process, descriptions were grouped into broad categories. Almost half of descriptions included reference to verbal (49.4%) and physical (49.4%) forms of sexual violence; 16.5% specifically mentioned the term rape. Over four in ten (47.1%) referred to acts that were unwanted or lacked consent. Around а fifth mentioned enforcement/coercion/aggression (23.5%) or harassment (21.2%); or referred to impacts of sexual violence on the victim (e.g. unpleasant, dignity, self-determination) (20.0%).

### 5.2.2 Post-training

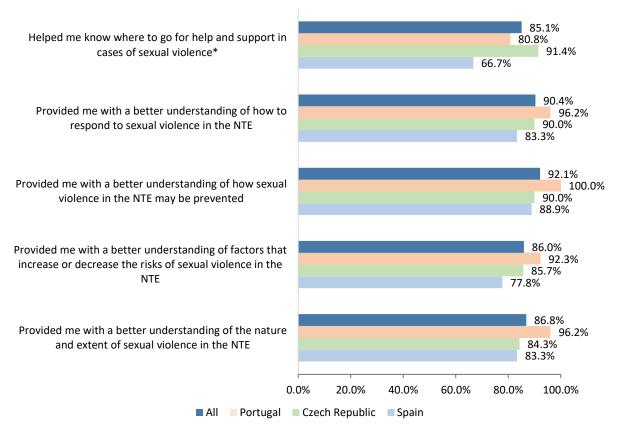
In the post-training survey, trainees were asked how much they agreed/disagreed with a range of statements about the impact of the training on their knowledge (see Figure 5.4). Overall, the majority of trainees agreed<sup>13</sup> that the training had provided them with a better understanding of: the nature and extent of sexual violence in the NTE (86.8%); factors that increase or decrease the risks of sexual violence in the NTE (86.0%); how sexual violence in the NTE may be prevented (92.1%); and, how to respond to sexual violence in the NTE (90.4%). Further, the majority (85.1%) agreed that the training had helped them know where to go for help and support in cases of sexual violence (85.1%); differences were observed across pilot sites (Figure 5.4).

### Figure 5.3: Examples of trainees' descriptions of sexual violence, nightlife worker pre-training survey



<sup>&</sup>lt;sup>13</sup> Including strongly agree/agree.

# Figure 5.4: Proportion of trainees agreeing with selected statements on the STOP-SV training, nightlife worker post-training survey



\* X<sup>2</sup> test, significant difference, p<0.05.

# 5.3 Nightlife worker attitudes and perceptions of sexual violence

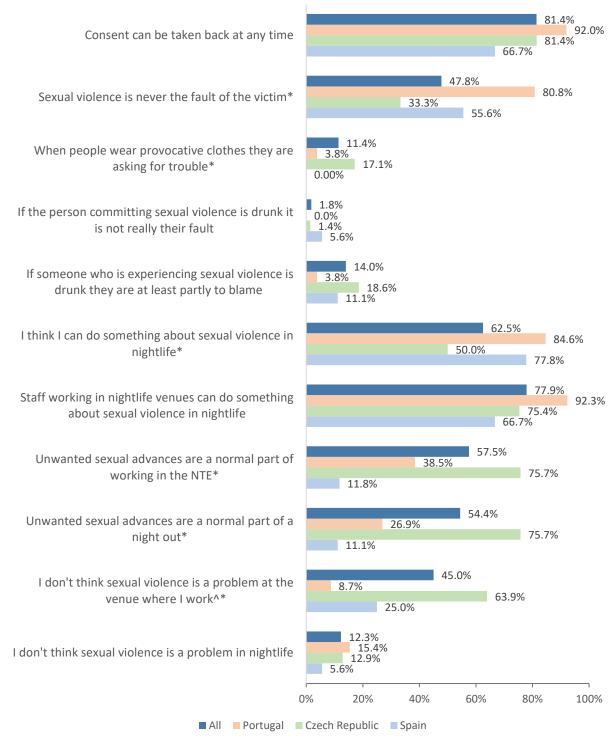
#### **Pre-training**

Pre-training, the majority of trainees agreed that consent can be taken back at any time (81.4%); 47.8% agreed that sexual violence is never the fault of the victim. However, just over one in ten agreed that when people wear provocative clothes, they are asking for trouble (11.4%), and if someone who is experiencing sexual violence is drunk they are at least partly to blame (14.0%). Less than one in 50 (1.8%) agreed that if the person committing sexual violence is drunk it is not really their fault.

Over half agreed that unwanted sexual advances are a normal part of a night out (54.4%) and working in a bar, pub or nightclub (57.5%). Correspondingly, only 12.3% agreed that they did not think sexual violence is a problem in nightlife, and 45.0% at the venue where they work<sup>14</sup>. The majority agreed that they (62.5%) and staff working in nightlife venues (77.9%) can do something about sexual violence in nightlife. Some significant differences were observed across pilot sites (Figure 5.5) and genders (Table A3, Appendix 3).

<sup>&</sup>lt;sup>14</sup> Venue workers only.

# Figure 5.5: Proportion of trainees agreeing with selected statements on sexual violence, nightlife worker pre-training survey



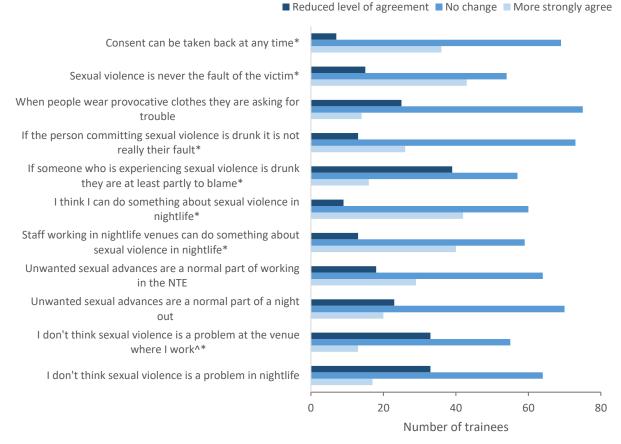
^ Of those working in venues. \*  $X^2$  test, significant difference, p<0.05.

#### **Post-training**

То compare pre and post-training attitudes/perceptions, scales were coded from one (strongly agree) to five (strongly disagree), and mean scores were compared (Table A4, Appendix 3). Compared to pre-training, posttraining participants were significantly more likely to show stronger agreement with the statements: consent can be taken back at any time; sexual violence is never the fault of the victim; and, I think I, and staff working nightlife venues can do something about sexual violence. Further, compared to pre-training, post-training participants were significantly less likely to agree with the statement I do not think sexual violence is a problem at the venue where I work.

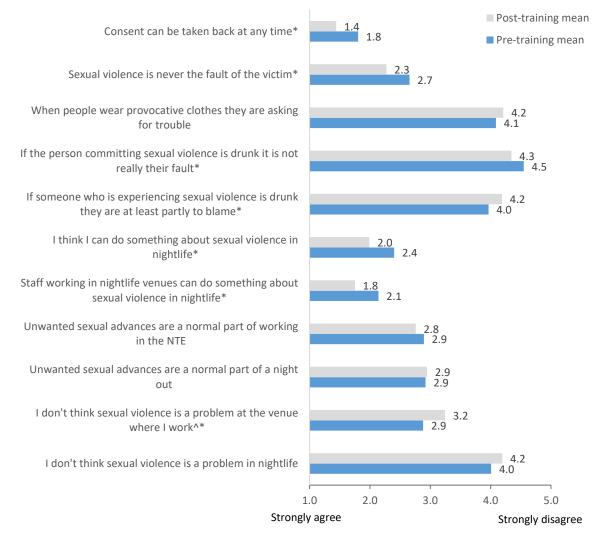
Whilst the post-training score for the statement if the person committing sexual violence is drunk it is not really their fault was also significantly lower post-training, both pre (4.5) and post-training (4.3) mean scores were over four, indicating general disagreement with the statement in both phases. Similarly, whilst the post-training score for the statement if someone who is experiencing sexual violence is drunk they are at least partly to blame was significantly higher post-training, both pre (4.0) and post-training (4.2) mean scores were over four, indicating disagreement with the statement in both phases. Figure 5.6 illustrates the changes in participants' levels of agreement pre to post-training, and Figure 5.7 pre and post-training mean scores.

# Figure 5.6: Attitudes and perceptions of sexual violence, change in participants' levels of agreement, pre to post-training



^ Of those working in venues. \* Wilcoxon signed rank test, significant change, p<0.05.

### Figure 5.7: Attitudes and perceptions of sexual violence, pre and post-training mean scores



^ Of those working in venues. \* Wilcoxon signed rank test, significant change, p<0.05.

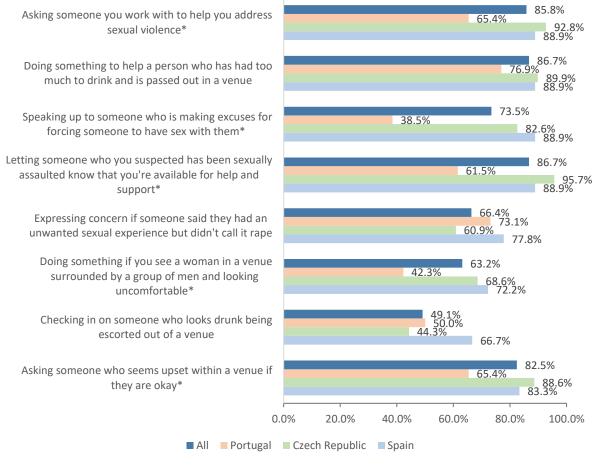
# 5.4 Nightlife worker confidence to intervene in sexual violence/vulnerability

### 5.4.1 Pre-training

Pre-training, the majority of trainees reported feeling confident<sup>15</sup> in: asking someone they work with to help them address sexual violence (85.8%); doing something to help a person who had had too much to drink and was passed out in a venue (86.7%); letting someone they suspected had been sexually assaulted know that they're available for help and support (86.7%); asking someone who seems upset within a venue if they're okay (82.5%); and speaking up to someone who was making

excuses for forcing someone to have sex with them (73.5%). Two-thirds reported feeling confident in: expressing concern if someone said they had an unwanted sexual experience but didn't call it rape (66.4%) or doing something if they saw a woman in a venue surrounded by a group of men and looking uncomfortable (63.2%). Some significant differences were observed across pilot sites (Figure 5.8); there were no differences between genders (Table A5, Appendix 3).

# Figure 5.8: Proportion of trainees reporting feeling confident in intervening in sexual violence/vulnerability, nightlife worker pre-training survey



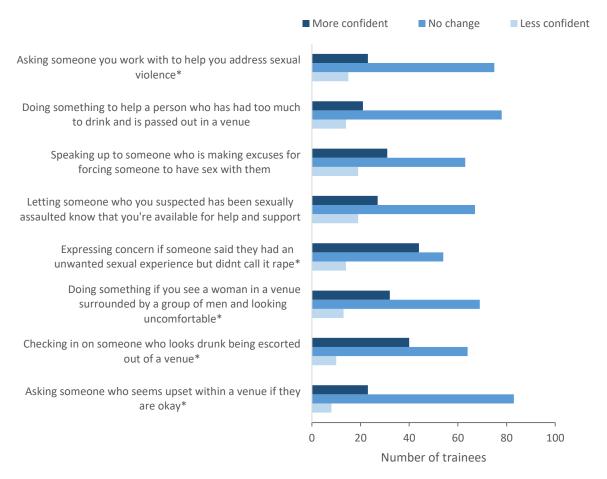
\* X<sup>2</sup> test, significant difference, p<0.05.

<sup>&</sup>lt;sup>15</sup> Including really confident/confident.

### 5.4.2 Post-training

To compare pre and post-training levels of confidence, scales were coded from one (really not confident) to five (really confident), and mean scores were compared (Table A6, Appendix 3). Compared to pre-training, post-training mean scores were higher, indicating greater confidence for all statements. Mean scores were significantly (p<0.05) higher for all statements excluding: letting someone who you suspected has been sexually assaulted

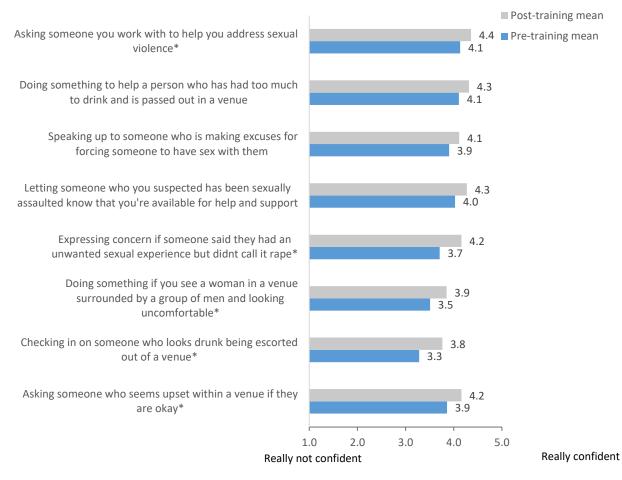
know that you're available for help and support; speaking up to someone who is making excuses for forcing someone to have sex with them; and, doing something to help a person who has had too much to drink and is passed out in a venue (p<0.10). Figure 5.9 illustrates the changes in participants' levels of confidence pre to post-training, and Figure 5.10 pre and post-training mean scores.



# Figure 5.9: Confidence in intervening in sexual violence/vulnerability, change in participants' levels of confidence, pre to post-training score

\* Wilcoxon signed rank test, significant change, p<0.05.

### Figure 5.10: Confidence in intervening in sexual violence, pre and post-training mean scores

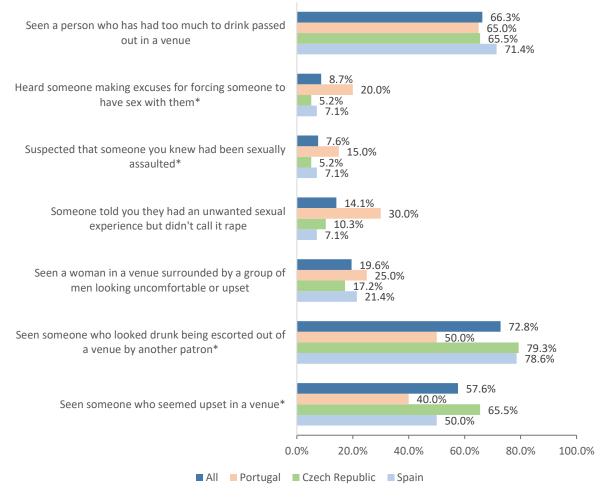


<sup>\*</sup> Wilcoxon signed rank test, significant change, p<0.05.

# 5.5 Nightlife worker identification of vulnerability and sexual violence

Amongst trainees who had worked in venues in the last three months, over half reported seeing (in the past three months): someone who looked drunk being escorted out of a venue by another patron (72.8%); a person who had had too much to drink passed out in a venue (66.3%); and, someone who seemed upset in a venue (57.6%). One fifth (19.6%) reported seeing a woman in a venue surrounded by a group of men looking uncomfortable or upset. One in ten (8.7%) had heard someone making excuses for forcing someone to have sex with them. 14.1% reported that someone had told them that they had an unwanted sexual experience but didn't call it rape, and 7.6% suspected that someone they knew had been sexually assaulted. Some significant differences were observed across pilot sites (Figure 5.11); there were no differences between genders (Table A7, Appendix 3).

# Figure 5.11: Proportion of venue workers^ reporting identifying vulnerable patrons or sexual violence whilst working in the last three months, nightlife worker pre-training survey



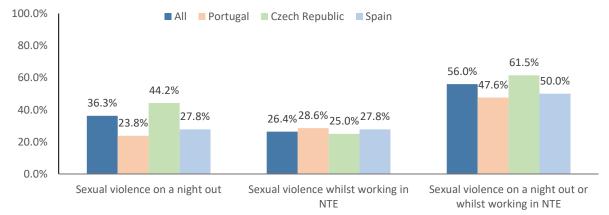
^ Who have worked in the last three months only. \*  $X^2$  test, significant difference, p<0.05.

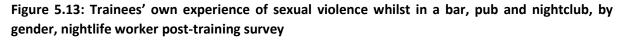
# 5.6 Nightlife worker experience of sexual violence

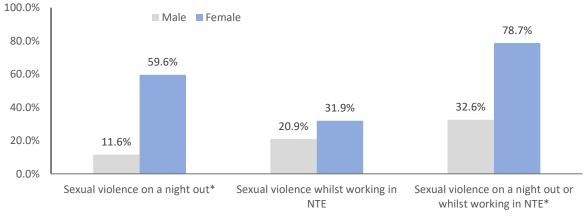
Over half (56.0%) of trainees reported that they had been a victim of sexual violence<sup>16</sup> whilst in a bar, pub or nightclub in their lifetime; over a third (36.3%) whilst on a night out and a quarter (26.4%) whilst working in the NTE (Figure 5.12). Significant differences were observed between genders (females, 78.7%; males 32.6%; p<0.05; Figure 5.13); there were no differences across pilot sites (Figure 5.12). Amongst those who reported experiencing sexual violence whilst working in the NTE:

- 25.0% stated that it had occurred within the last three months;
- 70.8% reported that the perpetrator was male, 33.3% female<sup>17</sup>;
- 83.3% reported that the perpetrator was a stranger; 16.7% a friend; 20.8% an acquaintance; and 4.2% other<sup>17</sup>; and,
- 45.7% stated that they had not reported the incident to anyone.

# Figure 5.12: Trainees' own experience of sexual violence whilst in a bar, pub and nightclub, by pilot site, nightlife worker post-training survey







\*  $X^2$  test, significant difference, p<0.05.

something else sexual to you that you did not want them to do?

<sup>17</sup> Trainees could tick more than one option.

<sup>&</sup>lt;sup>16</sup> Has anyone ever touched you sexually in a way that you did not want to be touched or done

# 6. Discussion

Studies in several countries have highlighted the extent of and risk factors for nightlife related sexual violence, and to a lesser extent the effect such harms have on victims and witnesses, as well as the NTE and public services [2, 3, 4]. Few studies have explored the development, implementation and impact of strategies that aim to prevent and/or respond to nightlife related sexual violence. The STOP-SV project aims to support efforts to prevent nightlife related sexual violence across European settings, through mobilising local communities to collaborate to prevent such harms, and building capacity by facilitating the training of nightlife workers so that they can recognise and effectively prevent and respond to sexual violence. This study aimed to explore the implementation and associated impact of the pilot STOP-SV training programme on nightlife workers' knowledge, attitudes, perceptions and confidence to intervene (and in the longer-term positive bystander behaviours).

# 6.1 Implementation and perceptions of the STOP-SV training programme

In total, 28 local stakeholders were trained as training facilitators to enable them to deliver the STOP-SV programme. Overall, project partners who provided the facilitator training were positive about the training programme and accompanying materials. Further, they reported that the training was generally well received by the training facilitators. However, it was noted that the participants' occupational background, levels of confidence in discussing the topic, and availability to attend the training and deliver nightlife worker training affected their ability to fully engage. All pilot sites reported that some training facilitators dropped out of the project, either during or after receiving training, despite financial incentives to engage<sup>18</sup>.

Following their training, facilitators subsequently delivered the STOP-SV training programme to 114 nightlife workers across the three pilot sites. Nightlife workers can include those working within bars, pubs and nightclubs (e.g. servers, entertainers, security) or other NTE venues (e.g. restaurants or fast food outlets); those tasked with managing the NTE and minimising harms (e.g. police, health promotion); or those who transport people to and from the NTE (e.g. taxi drivers). All have the potential to identify sexual violence from a different viewpoint, and at varying points of a night out (e.g. Who Are You?<sup>19</sup>). Training of a broad range of nightlife workers is therefore critical to build violence prevention capacity. The STOP-SV programme involved the training of a variety of nightlife workers, who were predominately under the age of 30 years. The training of young staff is likely to reflect the characteristics of those who typically work in the NTE. Equally, young adults are more likely to visit NTEs, and thus be exposed to sexual violence in these settings. Therefore, through engagement in the STOP-SV training, awareness of the problem of sexual violence and ways to prevent it are likely to have been raised across key at-risk groups.

The STOP-SV programme was well received by both those tasked with delivering (training facilitators) and those receiving the training (nightlife workers). The programme was short (approximately 2-3 hours in two pilot sites, and 5-6 in the third), and was conducted primarily within nightlife venues to encourage

<sup>&</sup>lt;sup>18</sup> Training facilitators were compensated financially for supporting the delivery of the STOP-

SV training programme across their respective pilot site.

<sup>&</sup>lt;sup>19</sup> www.whoareyou.co.nz/

participation. The training in one pilot site lasted approximately 5-6 hours, to allow the facilitators to cover all the content, and trainees to discuss the topic in detail. However, implementation, following one training facilitator felt it would have been better if the training duration were shorter. Nightlife workers are often a fluid population, who may be reluctant to participate in activities that may appear beyond their primary role (for example, due to time, resources and motivation). Feedback from this study suggests that across the pilot sites, nightlife workers were able to participate in the training, and for two of the pilot sites, the key concepts of the training programme could be covered in a 2-3 hour session.

# 6.2 Associated impact of the STOP-SV training programme

To date, our study suggests that the STOP-SV nightlife worker training programme is associated with improvements in knowledge; improved attitudes towards sexual violence; and greater confidence to intervene when sexual violence is taking place. Post-training, participants were significantly more likely to show increased agreement with statements including: consent can be taken back at any time; sexual violence is never the fault of the victim; that they and other staff working in nightlife venues can do something about sexual violence; and that they think sexual violence is a problem at the venue where they work. Further, they were more likely to report feeling confident in: asking someone they work with to help them address sexual violence; expressing concern if someone said they had an unwanted sexual experience but didn't call it rape; and doing something if they saw a woman in a venue surrounded by men and she looked uncomfortable. А number of evaluations of bystander programmes implemented in other settings have found that they are associated with changes in attitudes towards violence and reductions in violence, including sexual violence [1, 37, 41, 42, 46]. Early findings presented in this report provide

Following the implementation of the STOP-SV project across pilot sites, a few areas for training programme development were identified by project partners, training facilitators and trainees (Appendix 4 provides a summary of suggested amendments). Key points raised centred on the level of comprehensiveness of the training and the gendered nature of sexual violence. Whilst studies suggest that sexual violence, including that which takes place in nightlife settings, is predominantly experienced by females, it can also be experienced by males (evidenced in our study also; [14, 19]). Some trainees suggested that this should be acknowledged more within the STOP-SV training programme.

indications that a bystander intervention can be implemented in nightlife settings, and be associated with positive effects. The longerterm follow-up study will aim to assess whether participation in the training programme is associated with positive bystander behaviours to prevent and respond to sexual violence in the NTE, and if associated improvements in knowledge, attitudes and confidence are sustained three months posttraining.

Reviews of interventions to prevent nightlife harms, suggest that the most effective strategies are those that incorporate a community based multi-component approach [47, 48]. In Europe, the most well established and successful of such approaches is the Stockholm Prevents Alcohol and Drug Problems (STAD) programme [49, 50]. STAD aims to prevent alcohol-related harms in nightlife, and includes community mobilisation, strengthened law enforcement and responsible bar server training. The programme has been associated with reductions in alcohol access and violence [49, 50]. The STOP-SV project aims to follow a similar approach, and our study aimed to evaluate one aspect of the project, the training programme. Further research is required to understand the development, contribution and value of this community-based multicomponent approach in developing and implementing the STOP-SV training programme, and preventing nightlife related sexual violence.

#### 6.3 Experience of sexual violence and vulnerability amongst nightlife workers

This study found high levels of experiences of nightlife related sexual violence amongst nightlife workers (n=114). Over half (56.0%) had experienced sexual violence whilst on a night out or whilst working in the NTE in their lifetime. Similar to other studies, prevalence was higher amongst females [3, 16] with nearly four-fifths (78.7%) of females and a third (32.6%) of males reporting having ever been exposed to sexual violence in nightlife. Crucially however, our study and others illustrate that whilst nightlife related sexual violence is an issue predominately suffered by females, it can be perpetrated by, and towards both sexes, amongst those working in and visiting the NTE [2, 6]. Whilst the latter was acknowledged within the STOP-SV training programme (e.g. trainees of both genders were provided with details of available local support services), further research is required to fully understand male experience of nightlife related sexual violence, and societal attitudes towards this. For instance, in a study of young people (aged 18-24 years; n=159) on a night out in a UK city, half (53.2%) stated there was no difference in the acceptability of unwanted sexual touching (UST) perpetrated against women and men. However, 40.4% felt that it was more acceptable for a woman to touch a man sexually without permission, than for a man to touch a woman in this way [3].

Additionally, our study found high levels of vulnerability in nightlife settings. Two thirds (66.3%) of participants had witnessed a person who had had too much to drink passed out in a nightlife venue and almost three quarters (72.8%) had seen someone who looked drunk being escorted out of a nightlife venue by another patron. This relates to other studies that have considered the role that high levels of alcohol consumption can have in increasing vulnerability within the NTE, and experience of harms including sexual violence [2, 12, 13, 14].

#### 6.4 Study limitations

STOP-SV was piloted in one location across each of three European countries, and the number of nightlife workers engaged in the training was small (n=114). Thus, our findings cannot be considered representative of nightlife workers within pilot sites or across Europe. Evaluation materials were reviewed by project partners to ensure that the language used was appropriate and could be translated into local languages. All required adjustments were made to the English versions of the materials prior to translation. However, translated tools were not piloted, and differences in cultural and personal perceptions of sexual violence may have

introduced bias to the data obtained. Some study data was collected in local languages, and had to be translated into English for inclusion in analyses. All trainees completed a pre and post-training survey, however only 80 provided their email address to receive the 3month follow-up survey. Finally, whilst views on the STOP-SV training programme were obtained from project partners, training facilitators and trainees, we did not directly ask training facilitators about their experience or perceptions of the training they received from project partners. Whilst we did not interview all training facilitators, of those interviewed no issues were raised regarding the training they had received.

### 6.5 Conclusion

Sexual violence that occurs either within nightlife settings, or before or after a night out, is a key issue across many countries. Such harms can involve both those who work in and visit nightlife settings, as both victims and perpetrators. Those who manage or work within the NTE have the potential to play a vital role in preventing and responding to sexual violence. Bystander programmes to prevent different types of violence have been developed and implemented across a number of settings, and some evaluations suggest that these may be effective in preventing violence, and addressing structural and social norms that promote violence. Our study suggests that a training programme focusing on preventing sexual violence, through promoting positive attitudes around sexual violence and bystander behaviours can be implemented within the nightlife setting. Critically, our study suggests that the STOP-SV training programme is associated with improvements in knowledge; improved attitudes towards sexual violence; and greater confidence to intervene in sexual violence. A longer-term follow-up study will aim to assess whether participation in the STOP-SV training programme is associated with positive bystander behaviours to prevent and respond to sexual violence in the NTE, and if associated improvements in knowledge, attitudes and confidence are sustained three months post-training. The levels of sexual violence experienced and witnessed by nightlife workers, identified in this pilot study, should act as a catalyst for driving further implementation and evaluation of sexual violence prevention strategies across the European region.

# 7. References

[1] World Health Organization/London School of Hygiene and Tropical Medicine, "Preventing intimate partner and sexual violence against women: taking action and generating evidence," World Health Organization, Geneva, 2010.

[2] K. Graham, S. Bernards, A. Abbey, T. Dumas and S. Wells, "Young women's risk of sexual aggression in bars: the roles of intoxication and peer social status," Drug and Alcohol Review, vol. 33, pp. 393-400, 2014.

[3] K. Hardcastle, K. Hughes and Z. Quigg, "Experiences and attitudes towards unwanted sexual touching in the night time economy: the impact of the There's No Excuse campaign," Centre for Public Health, Liverpool, 2015.

[4] L. D. Kovac and D. E. Trussell, ""Classy and never trashy": young women's experiences of nightclubs and the construction of gender and sexuality," Leisure Sciences, vol. 37, pp. 195-209, 2015.

[5] E. G. Krug, L. L. Dahlberg, J. A. Mercy et al., "World report on violence and health," World Health Organization, Geneva, 2002.

[6] P. Alagrappar, M. L. Lean, M. K. David et al., ""You're so hot!": a content analysis of sexual harassment among hotel employees," International Proceedings of Economics Development and Research, vol. 20, pp. 17-21, 2011.

[7] K. Graham, S. Bernards, D. W. Osgood, A. Abbey et al., "Blurred lines?" sexual aggression and barroom culture," Alcoholism: Clinical and Experimental Research, vol. 38, no. 5, pp. 1416-1424, 2014.

[8] K. Graham, S. Wells, S. Bernards and S. Dennison, ""Yes, I do but not with you"-qualitative analyses of sexual/romantic overture-related aggression in bars and clubs," Contemporary Drug Problems, vol. 37, pp. 2-2, 2010.

[9] P. R. Kavanaugh, "The continuum of sexual violence: women's accounts of victimization in urban nightlife," Feminist Criminology, vol. 8, pp. 20-39, 2013.

[10] J. D. Huber and E. S. Herold, "Sexually overt approaches in singles bars," Canadian Journal of Human Sexuality, vol. 15, pp. 133-146, 2006.

[11] M. A. Bellis, Z. Quigg, K. Hughes, K. Ashton, J. Ferris and A. Winstock, "Harms from other people's drinking: an international survey of their occurrence, impacts on feeling safe and legislation relating to their control," BMJ Open, vol. 5, no. 12, 2015.

[12] K. Hughes, Z. Anderson, M. Morleo and M. A. Bellis, "Alcohol, nightlife and violence: the relative contributions of drinking before and during nights out to negative health and criminal justice outcomes," Addiction, vol. 103, pp. 60-65, 2008.

[13] T. Kelley-Baker, E. A. Mumford, R. Vishnuvajjala, R. B. Voas, E. Romano and M. Johnson, "A night in Tijuana: female victimization in a high-risk environment," Journal of Alcohol & Drug Education, vol. 52, pp. 46-71, 2008.

[14] M. G. Santos, A. T. Paes, A. Sanudo, S. Andreoni and Z. M. Sanchez, "Gender differences in predrinking behavior among nightclubs' patrons," Alcoholism, Clinical and Experimental Research, vol. 39, pp. 1243-1252, 2015.

[15] H. D. Flowe, J. Stewart, E. R. Sleath and F. T. Palmer, "Public house patrons' engagement in hypothetical sexual assault: a test of alcohol myopia theory in a field setting," Aggressive Behavior, vol. 37, no. 6, pp. 547-558, 2011.

[16] S. Becker and J. Tinkler, ""Me getting plastered and her provoking my eyes": young people's attribution of blame for sexual aggression in public drinking spaces," Feminist Criminology, vol. 10, no. 3, pp. 235-258, 2015.

[17] K. A. Parks, "An event-based analysis of aggression women experience in bars," Psychology of Addictive Behaviors, vol. 14, pp. 102-110, 2000.

[18] E. H. Thompson and E. J. Cracco, "Sexual aggression in bars: what college men can normalize," The Journal of Men's Studies, vol. 16, pp. 82-96, 2008.

[19] B. A. Miller, B. Bourdeau, M. Johnson and R. Voas, "Experiencing aggression in clubs: social group and individual level predictors," Prevention Science, vol. 16, pp. 527-537, 2015.

[20] M. B. Johnson, R. Voas, B. Miller, B. Bourdeau and H. Byrnes, "Clubbing with familiar social groups: relaxed vigilance and implications for risk," Journal of Studies on Alcohol & Drugs, vol. 76, pp. 924-927, 2015.

[21] K. A. Parks and D. M. Scheidt, "Male bar drinkers' perspective on female bar drinkers," Sex Roles, vol. 43, pp. 927-941, 2000.

[22] E. Rich, S. Nkosi and N. Morojele, "Masculinities, alcohol consumption, and sexual risk behavior among male tavern attendees: a qualitative study in north west province, South Africa," Psychology of Men & Masculinity, vol. 16, pp. 382-392, 2015.

[23] M. H. Watt, F. M. Aunon, D. Skinner, K. J. Sikkema, S. C. Kalichman and D. Pieterse,
""Because he has bought for her, he wants to sleep with her": alcohol as a currency for sexual exchange in South African drinking venues," Social Science and Medicine, vol. 74, pp. 1005-1012, 2012.

[24] K. A. Parks, B. A. Miller, L. Collins and L. Zetes-Zanatta, "Women's descriptions of drinking in bars: reasons and risks," Sex Roles, vol. 38, pp. 701-717, 1998.

[25] A. Calafat, K. Hughes, N. Blay, M. A. Bellis, F. Mendes, M. Juan, P. Lazarov, B. Cibin and M. A. Duch, "Sexual harassment among young tourists visiting Mediterranean resorts," Archives of Sexual Behavior, vol. 42, pp. 603-313, 2013.

[26] K. A. Parks and B. A. Miller, "Bar victimization of women," Psychology of Women Quarterly, vol. 21, pp. 509-525, 1997.

[27] N. W. Pino and A. M. Johnson-Johns, "College women and the occurrence of unwanted sexual advances in public drinking settings," The Social Science Journal, vol. 46, pp. 252-267, 2009.

[28] V. F. Go, A. K. Srikrishnan, M. L. Salter, S. Mehta, S. C. Johnson, S. Sivaram, W. Davis, S. Solomon and D. D. Celentano, "Factors associated with the perpetration of sexual violence among wine-shop patrons in Chennai, India," Social Science & Medicine, vol. 71, pp. 1277-1284, 2010.

[29] K. Graham, S. Bernards, D. W. Osgood and S. Wells, "Bad nights or bad bars? Multi-level analysis of environmental predictors of aggression in late-night large-capacity bars and clubs," Addiction, vol. 101, pp. 1569-1580, 2006.

[30] T. Anderson, K. Daly and L. Rapp, "Clubbing masculinities and crime: a qualitative study of Philadelphia nightclub scenes," Feminist Criminology, vol. 4, pp. 302-332, 2009.

[31] F. A. Franklin, T. A. Laveist, D. W. Webster and W. K. Pan, "Alcohol outlets and violent crime in Washington D.C.," The Western Journal of Emergency Medicine, vol. 11, pp. 283-290, 2010.

[32] M. W. Waller, B. J. Iritani, S. L. Christ, H. K. Clark, K. E. Moracco, C. T. Halpern and R. L. Flewelling, "Relationships among alcohol outlet density, alcohol use, and intimate partner violence victimization among young women in the United States," Journal of Interpersonal Violence, vol. 27, pp. 2062-2086, 2012.

[33] C. Lippy and S. Degue, "Exploring alcohol policy approaches to prevent sexual violence perpetration," Trauma, Violence & Abuse, vol. 17, pp. 26-42, 2016.

[34] F. De Vocht, J. Heron, R. Campbell, M. Egan, J. D. Mooney, C. Angus, A. Brennan and M. Hickman, "Testing the impact of local alcohol licencing policies on reported crime rates in England," Journal of Epidemiology and Community Health, vol. 71, pp. 137-145, 2016.

[35] C. M. Beynon, H. R. Sumnall, J. McVeigh, J. C. Cole and M. A. Bellis, "The ability of two commercially available quick test kits to detect drug-facilitated sexual assault drugs in beverages," Addiction, vol. 101, pp. 1413-1420, 2006.

[36] O. Brooks, ""Guys! Stop doing it!" young women's adoption and rejection of safety advice when socializing in bars, pubs and clubs," British Journal of Criminology, vol. 51, pp. 635-651, 2011.

[37] A. L. Coker, H. M. Bush, B. S. Fisher, S. C. Swan, C. M. Williams, E. R. Clear and S. DeGue, "Multi-college bystander intervention evaluation for violence prevention," Elsevier Science, vol. 50, no. 3, pp. 295-302, 2016.

[38] K. C. Basile, S. G. Smith, D. N. Fowler, M. L. Walters and M. E. Hamburger, "Sexual violence victimization and associations with health in a community sample of African American women," Journal of Aggression, Maltreatment and Trauma, vol. 25, pp. 231-253, 2016.

[39] J. D. Foubert, J. Langhinrichsen-Rohling, H. Brasfield and B. Hill, "Effects of a rape awareness program on college women: increasing bystander efficacy and willingness to intervene," Journal of Community Psychology, vol. 38, no. 7, pp. 813-827, 2010.

[40] J. Katz and J. Moore, "Bystander education training for campus sexual assault prevention: An initial meta-analysis," Violence and Victims, vol. 28, no. 6, pp. 1054-1067, 2013.

[41] A. Berkowitz, Response ability: a complete guide to bystander intervention, Beck & Co, 2009.

[42] V. L. Banyard, E. G. Plante, and M. M. Moynihan, "Rape prevention through bystander education: bringing a broader community perpective to sexual violence prevention," Journal of Community Psychology, vol. 35, pp. 61-79, 2005.

[43] H. Greger, H. Greger, H. Kley, G. Bohner and F. Siebler, "The acceptance of modern myths about sexual aggression (AMMSA) scale: development and validation in German and English," Aggressive Behavior, vol. 33, pp. 422-440, 2007.

[44] C. Ward, "The Attitudes toward Rape Victims Scale: construction, validation and crosscultural applicability," Psychology of Women Quarterly, vol. 12, pp. 127-146, 1988.

[45] V. Braun and V. Clarke, "Using thematic analysis in psychology," Qualitative Research in Psychology, vol. 3, pp. 77-101, 2006.

[46] V. L. Banyard, M. M. Moynihan and E. G. Plante, "Sexual violence prevention through bystander education: an experimental evaluation," Journal of Community Psychology, vol. 35, no. 4, pp. 463-481, 2007.

[47] L. Jones, K. Hughes, A. M. Atkinson and M. A. Bellis, "Reducing harm in drinking environments: a systematic review of effective approaches," Health & Place, vol. 17, pp. 508-18, 2011.

[48] N. Kurtze, S. Wollscheid and E. Denison, "Effects of interventions to counter overserving, serving underage people, and alcohol-related harm/injuries linked to drinking venues," The Norwegian Knowledge Centre for the Health Services, Oslo, 2014.

[49] T. Norström and B. Trolldal, "Was the STAD programme really that successful?," Nordic Studies on Alcohol and Drugs, vol. 30, pp. 171-8, 2013.

[50] E. Wallin, T. Norström and S. Andréasson, "Alcohol prevention targeting licensed premises: a study of effects on violence," Journal of Studies on Alcohol, vol. 64, pp. 270-7, 2003.

[51] World Health Organization, "Intimate partner violence and alcohol," World Health Organization, Geneva, 2006.

[52] United Nations, "Sustainable development goals," 2018. [Online]. Available: https://sustainabledevelopment.un.org/. [Accessed 01 November 2018].

[53] A. Abbey, T. Zawacki, P. O. Buck, M. Testa, K. Parks et al., "How does alcohol contribute to sexual assault? Explanations from laboratory and survey data," Alcoholism, Clinical and Experimental Research, vol. 26, pp. 575-581, 2002.

[54] Z. Quigg, N. Butler, R. Bates, H. Grey, K. Ross-Houle and C. Bigland, "Evaluation of the Cheshire and Merseyside Drink Less Enjoy More intervention," Public Health Institute, Liverpool John Moores University, Liverpool, 2018.

[55] EUR-Lex, "EUR-Lex. Access to European Union law. Document 32012L0029," 25 10 2012.
[Online]. Available: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX:32012L0029.
[Accessed 23 11 2018].

[56] Council of Europe, "Istanbul Convention. Action against violence against women and domestic violence," 11 May 2011. [Online]. Available: https://www.coe.int/en/web/istanbul-convention/home. [Accessed 23 11 2018].

# 8. Appendices

	Czech Republic	Portugal	Spain
Facilitator training			
Number of facilitators trained	5	11	12
Male	3	4	3
Female	2	7	9
Number of facilitators who dropped out	2	7	6
Male	1	2	3
Female	1	5	3
Number of facilitators who conducted training with nightlife workers	3	2+	4
Male	2	1	0
Female	1	1	4
Nightlife worker training			
Number of nightlife workers trained	70^	26	18
Male	29	10	16
Female	40	16	2
Number of training sessions with nightlife workers	5	2	2*

# Appendix 1: Engagement in the STOP-SV training

\*Spain also delivered training to Balearic Agency for Tourism. ^ One participant did not provide their gender. \*Two facilitators did not have the opportunity to carry out training with nightlife workers in Portugal.

## Appendix 2: Survey distribution instructions for training facilitators



# Appendix 3: Supplementary data tables

		Czecł	n Republic	Portugal		Spain		Spain All		
		n	%	n	%	n	%	n	%	p^
Gender	Male	38	54.3	10	38.5	14	77.8	62	54.4	0.119
	Female	31	44.3	16	61.5	4	22.2	51	44.7	
	Prefer not to say	1	1.4	0	0.0	0	0.0	1	0.9	
Age group	18-29	47	67.1	11	42.3	0	0.0	58	50.9	<0.001
(years)	30+	23	32.9	15	57.7	18	100.0	56	49.1	
Job role	Bar tender	22	31.4	14	53.8	0	0.0	36	31.6	<0.001
	Bar supervisor/manager	7	10.0	1	3.8	12	66.7	20	17.5	
	Door security	13	18.6	1	3.8	4	22.2	18	15.8	
	Entertainer	4	5.7	4	15.4	0	0.0	8	7.0	
	Other	24	34.3	6	23.1	2	11.1	32	28.1	
Employment in	2+ years worked in NTE	53	75.7	21	84.0	15	93.8	89	80.2	0.227
NTE	2+ years worked in current venue*	27	45.0	18	75.0	13	86.7	58	58.6	<0.01
	Worked weekly in current venue (last 3 months)*	32	53.3	12	54.5	13	81.3	57	58.2	0.123
Alcohol	Weekly drink alcohol whilst working in venue**	19	31.7	5	26.3	4	28.6	28	30.1	0.898
consumption	Weekly binge drink (last 3 months)***	24	34.3	7	29.2	2	11.1	33	29.5	0.157
Engagement in	Previous sexual violence training	5	7.1	6	23.1	5	29.4	16	14.2	<0.05
sexual violence	Previously/current sexual violence prevention activity	5	7.1	7	26.9	3	16.7	15	13.2	<0.05
prevention	Trained or prevention activity	10	14.3	8	30.8	5	27.8	23	20.2	0.138

### Table A1: Sample characteristics, nightlife worker training participants

\* Venue workers only. \*\* Venue workers who have worked in last 3 months. \*\*\*Consuming six or more drinks containing alcohol on one occasion. ^ X<sup>2</sup> test.

		Czech Republic	Portugal	Spain	All	p۸
The	Is useful for me in my current job role (in the NTE)	84.1%	91.7%	77.8%	84.7%	0.453
training:	Will help me to better deal with sexual violence in the NTE	80.0%	100.0%	83.3%	85.0%	0.055
	Trainer did a good job teaching and supporting me throughout the training session	91.4%	100.0%	88.9%	93.0%	0.261
The	Too short	4.3%	3.8%	11.1%	5.3%	0.606
training	The right length of time	88.6%	88.5%	88.9%	88.6%	
was:	Too long	7.1%	7.7%	0.0%	6.1%	
The	Not enough information	18.6%	3.8%	5.6%	13.2%	0.154
training	The right level of information	80.0%	88.5%	88.9%	83.3%	
contained:	Too much information	1.4%	7.7%	5.6%	3.5%	

^ X<sup>2</sup> test.

Table A3: Proportion of participants agreeing with selected statements on sexual violence, by gender, nightlife worker pre-training survey

Statement	Male	Female	All**	Р^
I don't think sexual violence is a problem in nightlife	14.5%	9.8%	12.4%	0.449
I don't think sexual violence is a problem at the venue where I work*	55.2%	29.3%	44.4%	<0.05
Unwanted sexual advances are a normal part of a night out	51.6%	56.9%	54.0%	0.577
Unwanted sexual advances are a normal part of working in the NTE	50.8%	64.7%	57.1%	0.139
Staff working in nightlife venues can do something about sexual violence in nightlife	75.8%	82.0%	78.6%	0.427
I think I can do something about sexual violence in nightlife	63.3%	62.7%	63.1%	0.949
If someone who is experiencing sexual violence is drunk they are at least partly to blame	21.0%	5.9%	14.2%	<0.05
If the person committing sexual violence is drunk it is not really their fault	3.3%	0.0%	1.8%	0.192
When people wear provocative clothes they are asking for trouble	14.5%	7.8%	11.5%	0.269
Sexual violence is never the fault of the victim	44.3%	52.9%	48.2%	0.360
Consent can be taken back at any time	82.0%	80.4%	81.3%	0.832

\* Venue workers only. \*\* Excludes 1 participant who ticked prefer not to say. ^  $X^2$  test.

Table A4: Attitudes and perceptions - mean scores pre and post-training, full sample

		Pre- training		Post- training					Post score co to pre (		•
To what extent to you agree/disagree with the following <sup>a</sup> :	n	Mean	SD	Mean	SD	pb	Less	More	Same		
I don't think sexual violence is a problem in nightlife	114	4.0	1.0	4.2	0.9	0.061	17	33	64		
I don't think sexual violence is a problem at the venue where I work*	100	2.89	1.1	3.2	1.1	<0.01	13	31	55		
Unwanted sexual advances are a normal part of a night out	114	2.9	1.3	2.9	1.3	0.455	20	23	70		
Unwanted sexual advances are a normal part of working in the NTE	113	2.9	1.3	2.8	1.3	0.296	29	18	64		
Staff working in nightlife venues can do something about sexual violence in nightlife	113	2.1	0.9	1.8	0.6	<0.001	40	13	59		
I think I can do something about sexual violence in nightlife	112	2.4	1.0	2.0	0.7	<0.001	42	9	60		
If someone who is experiencing sexual violence is drunk they are at least partly to blame	114	4.0	1.0	4.2	0.9	<0.01	16	39	57		
If the person committing sexual violence is drunk it is not really their fault	113	4.5	0.7	4.3	0.9	<0.05	26	13	73		
When people wear provocative clothes they are asking for trouble	114	4.1	1.0	4.2	1.0	0.104	14	25	75		
Sexual violence is never the fault of the victim	113	2.7	1.2	2.3	1.3	<0.01	43	15	54		
Consent can be taken back at any time	113	1.8	0.9	1.4	0.7	<0.001	36	7	69		

<sup>a</sup> Using a five point Likert scale: 1=Strongly agree, 2=Agree, 3=Neither, 4=Disagree, 5=Strongly disagree. <sup>b</sup> Wilcoxon signed rank test. SD = standard deviation. \* Venue workers only.

Table A5: Proportion of participants reporting feeling confident in intervening in sexual violence (selected statements), by gender, nightlife worker pretraining survey

Statement:	Male	Female	All*	<b>P^</b>
Asking someone who seems upset within a venue if they are okay	80.6%	86.3%	83.2%	0.426
Checking in on someone who looks drunk being escorted out of a venue	53.2%	45.1%	49.6%	0.390
Doing something if you see a woman in a venue surrounded by a group of men and looking uncomfortable	67.7%	56.9%	62.8%	0.234
Expressing concern if someone said they had an unwanted sexual experience but didn't call it rape	65.6%	68.6%	67.0%	0.732
Letting someone who you suspected had been sexually assaulted know that you're available for help and support	86.9%	88.2%	87.5%	0.830
Speaking up to someone who is making excuses for forcing someone to have sex with them	78.7%	68.6%	74.1%	0.226
Doing something to help a person who has had too much to drink and is passed out in a venue	90.2%	82.4%	86.6%	0.227
Asking someone you work with to help you address sexual violence	90.2%	80.4%	85.7%	0.141

\* Excludes 1 participant who ticked prefer not to say. ^  $X^2$  test.

Table A6: Confidence - mean scores pre and post-training, full sample

		Pre-training		Post-	trainin	3	Post compared to		pre (n)
In general, how confident do you think you would feel <sup>a</sup> :	n	Mean	SD	Mean	SD	pb	Less	More	Same
Asking someone who seems upset within a venue if they are okay	114	3.9	1.1	4.2	0.8	<0.01	8	23	83
Checking in on someone who looks drunk being escorted out of a venue	114	3.3	1.0	3.8	0.9	< 0.001	10	40	64
Doing something if you see a woman in a venue surrounded by a group of men and looking uncomfortable	114	3.5	1.1	3.9	0.9	<0.01	13	32	69
Expressing concern if someone said they had an unwanted sexual experience but didn't call it rape	113	3.7	1.0	4.2	0.8	<0.001	14	44	54
Letting someone who you suspected had been sexually assaulted know that you're available for help and support	113	4.0	1.1	4.3	0.8	0.081	19	27	67
Speaking up to someone who is making excuses for forcing someone to have sex with them	113	3.9	1.1	4.1	0.9	0.088	19	31	63
Doing something to help a person who has had too much to drink and is passed out in a venue	113	4.1	1.1	4.3	0.8	0.074	14	21	78
Asking someone you work with to help you address sexual violence	113	4.1	1.1	4.4	0.8	<0.05	15	23	75

<sup>a</sup> Using a five point Likert scale: 1=Really not confident, 2=Not confident, 3=Neither, 4=Confident, 5=Really confident. <sup>b</sup> Wilcoxon signed rank test. SD = standard deviation.

Table A7: Proportion of venue workers<sup>^</sup> reporting identifying vulnerable patrons or witnessing sexual violence (selected statements) whilst working in the last three months, by gender, nightlife worker pre-training survey

Statement	Male	Female	All*	<b>p^</b>
Seen someone who seemed upset in a venue	60.4%	55.3%	58.2%	0.609
Seen someone who looked drunk being escorted out of a venue by another patron	79.2%	65.8%	73.6%	0.176
Seen a woman in a venue surrounded by a group of men looking uncomfortable or upset	20.8%	18.4%	19.8%	0.686
Someone tell them they had an unwanted sexual experience but didn't call it rape	15.1%	13.2%	14.3%	0.483
Suspected that someone they didn't know had been sexually assaulted	3.8%	13.2%	7.7%	0.169
Heard someone making excuses for forcing someone to have sex with them	3.8%	15.8%	8.8%	0.094
Seen a person who has had too much to drink passed out in a venue	73.6%	55.3%	65.9%	0.185

^Venue workers who have worked in the last three months only. \* Excludes 1 participant who ticked prefer not to say.  $^{X^2}$  test.

## Appendix 4: Suggested developments for the STOP-SV training programme

During the interviews, project partners and training facilitators were asked about any suggestions for any additions, omissions and amendments that they felt were necessary for the STOP-SV training programme. Additionally, trainees were also asked to reflect on their experiences of the training in the post-training survey. The following were the changes suggested:

- Where appropriate, recent local data should be included to make the training relevant to each location (suggestion from one of the project partners).
- Some training facilitators from one of the pilot sites requested a summarised version of key points of the training. This was provided by the project partner for the pilot site, but could potentially be incorporated into future training packages.
- The training of nightlife workers (trainees) was intended to last approximately two hours, however, one of the pilot sites went significantly over this time. Whilst on reflection, one training facilitator for this pilot site felt that their training was too long, those implementing the training in the

future should consider that the training may need to last more than two hours to meet trainee needs. A 2-3 hour training session was implemented across two of the pilot sites.

- facilitators Some training were concerned that the first section of the training may have been too theoretical for the trainees and that a more basic overview might have been more appropriate. For future training, it is important that the training be tailored in its delivery to each individual group, in order to ensure the information is appropriate for the audience. This assessment could be made by the training facilitator prior to the training starting.
- Training facilitators from two of the pilot sites expressed that some concerns were raised by trainees that the STOP-SV training was too focused on the female perspective of sexual violence. Future versions of the STOP-SV training could include more content that relates to male experiences of sexual violence in the NTE, including findings from this pilot study.



CHARLES UNIVERSITY First Faculty of Medicine





