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Abstract | Image-based abuse (IBA) refers to the non-consensual taking, sharing or threat to share nude or sexual images. Research suggests people who witness IBA behaviours can reduce the extent and impacts of its harm by taking action to intervene. However, there is limited research available on the attitudes, experiences and role of bystanders in the prevention of IBA. This paper presents findings from a national study examining bystanders' experiences of, and responses to, witnessing IBA. Informed by a survey of 245 Australian adults in four jurisdictions, this paper shows that while witnessing IBA is common, few respondents reported taking action to intervene, and there are gender differences in bystander readiness to intervene. The findings have important implications for the development of bystander intervention and education programs.

Image-based abuse: Gender differences in bystander experiences and responses

Asher Flynn, Elena Cama and Adrian J Scott

Introduction

Although digital technologies have had benefits socially and culturally, they have also facilitated harmful and abusive behaviours such as image-based abuse (IBA), sexual harassment, and domestic and family violence (Dragiewicz et al. 2019; Flynn & Henry 2021; Harris & Woodlock 2019; Henry et al. 2021; Powell et al. 2019). Sometimes referred to as 'image-based sexual abuse' (Flynn & Henry 2019; Henry, Flynn & Powell 2019), 'revenge pornography' (Bond & Tyrrell 2021) and 'non-consensual pornography' (Franks 2017), IBA consists of three main behaviours:

- the non-consensual taking or creation of nude or sexual images (hereafter referred to as taking/creating);
- the non-consensual sharing or distribution of nude or sexual images (sharing/distributing); and/or
- the threat to share or distribute nude or sexual images (threatening).



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In 2016, research found that one in five Australians aged 16–49 years reported experiencing IBA (Henry, Flynn & Powell 2019). Comparative research across Australia ($n=2,054$), New Zealand ($n=2,027$) and the United Kingdom ($n=2,028$) conducted in 2019 found these rates to be increasing, with 38 percent of respondents reporting having experienced at least one form of IBA (Australia, 35%; New Zealand, 39%; UK, 39%; Powell et al. 2020). These studies also found that younger people, gender and sexuality diverse people, people living with a disability and Aboriginal and Torres Strait Islander people were disproportionately likely to experience IBA (Henry et al. 2021; Henry, Flynn & Powell 2019; Powell et al. 2020; Scott et al. 2022).

Research suggests that people who witness abusive behaviours can reduce the extent and impacts of the resultant harm (Barlińska, Szuster & Winiewski 2013; Brochado, Soares & Fraga 2017; Kowalski et al. 2014; Rebollo-Catalan & Mayor-Buzon 2020; Song & Oh 2018). However, many people report that they do not intervene when witnessing harmful behaviour. In the United States, a 2017 survey of 4,278 adults showed that 66 percent of respondents reported witnessing online harassment directed at other people, yet only 30 percent reported intervening (Pew Research Center 2017). Engaging bystanders to recognise and respond to abusive behaviours—known as bystander intervention—can be an effective prevention tool (Darley & Latané 1968; Dovidio et al. 2006; Gordon-Messer et al. 2013; Latané & Darley 1970). Over several decades, researchers have sought to better understand bystander attitudes, capacity and willingness to intervene, including how their attitudes and behaviours are influenced by others, barriers and facilitators for intervention, and programs that promote intervention by building bystanders' confidence and skills to intervene. Despite extensive literature on bystanders and bystander intervention in the context of sexual violence (see Mainwaring, Gabbert & Scott 2022), there is limited research on this in relation to IBA.

This paper draws from a multi-methods study published as *Preventing image-based abuse in Australia: The role of bystanders* (Flynn, Cama & Scott 2022), which was funded by a Criminology Research Grant (CRG 02/18–19). The project sought to build on existing research around 'silent' and 'passive' bystanders versus 'prosocial' or 'active' bystanders and sexual violence prevention campaigns (Darley & Latané 1968; Latané & Darley 1970; see also Clarke 2003; Dovidio et al. 2006; Flynn 2015) to better understand bystander intervention in IBA cases across four Australian jurisdictions—the Australian Capital Territory, New South Wales, South Australia and Victoria. It examined bystanders' attitudes towards IBA, their willingness and capacity to intervene when witnessing IBA, and barriers to and facilitators of intervention. This paper reports on gender differences in bystanders' experiences of witnessing and responding to IBA. Further findings from the study are available in the final report (Flynn, Cama & Scott 2022).

Literature review

Recent research suggests that both engaging in and experiencing IBA are common (Powell et al. 2022). As outlined above, 38 percent of respondents in Powell et al.'s (2020) study across the United Kingdom, New Zealand and Australia reported having experienced at least one form of IBA. In terms of perpetration, Henry et al.'s (2021) study found that 18 percent of respondents ($n=1,070$ of 6,109) reported perpetrating IBA across three countries (Australia, 16%; New Zealand, 20%; UK, 17%). There was also a clear gendered, sexuality and age pattern among the perpetration findings, with 22 percent of men, 23 percent of respondents aged 16–39 years and 29 percent of gender and sexuality diverse respondents reporting having engaged in one or more perpetration behaviours, compared with 13 percent of women, 11 percent of respondents aged 40–64 years and 16 percent of heterosexual respondents (Henry et al. 2021; see also Powell et al. 2022).

Perpetrators of IBA include intimate partners, family members, friends, acquaintances and persons unknown to the victim (Powell et al. 2019). IBA occurs in a range of relationship contexts (Powell, Henry & Flynn 2018; Powell et al. 2019), and motivations underpinning acts of IBA are diverse (Powell et al. 2019). In their study, Powell et al. (2020) found that the most common motivation reported by perpetrators was to have 'fun', to 'flirt' or to be 'sexy' (61%, taking/creating; 58%, sharing/distributing; 56%, threatening). Other key motivations included wanting to impress friends, trade images, control the person depicted in the image, and embarrass or get back at the person depicted in the image. Overall, perpetrators in Powell et al.'s (2020) study commonly reported having shared/distributed nude or sexual images on social media (26%, Facebook; 18%, Instagram) and via email (19%), mobile messaging or chat applications (18%) and SMS messages (16%).

Bystanders and intervention

Research suggests that engaging bystanders to intervene when they witness violence or discrimination could be an effective prevention tool (Darley & Latané 1968; Dovidio et al. 2006; Gordon-Messer et al. 2013; Latané & Darley 1970). A bystander is a person who witnesses or is aware of an emergency or critical event, such as a harmful act against another person (Taket & Crisp 2017). Bystander action or intervention therefore refers to the actions that are taken by those who witness the critical event to prevent, disrupt or respond to it. Research in this field has largely focused on how bystanders respond in emergency situations, how their behaviours are influenced by the actions of others, barriers to and facilitators of intervention, and programs that encourage intervention.

In their seminal work, Darley and Latané (1968) conceptualised the bystander effect, whereby a person's likelihood of intervening when witnessing a critical event decreases if other bystanders are present and do not intervene. They proposed three elements that influence the bystander effect:

- diffusion of responsibility, whereby feelings of personal responsibility to intervene decrease as the number of other bystanders increases;
- evaluation apprehension, which refers to fears of being judged negatively by others (eg for intervening when others do not believe intervention is warranted or taking inappropriate steps to intervene); and
- social influence, which refers to reliance on others' reactions to critical events.

Latané and Darley's (1970) work culminated in the development of the situational model of bystander intervention, which posits five steps bystanders move through when deciding whether to intervene:

1. notice the critical event;
2. interpret the event as an emergency;
3. develop feelings of personal responsibility;
4. believe that they have the appropriate skills and confidence to intervene successfully; and
5. reach a conscious decision to help.

At each stage, a situational barrier may arise that prevents the bystander from intervening. Piliavin et al. (1981) have since proposed that bystanders will be more motivated to intervene if a situation arouses an emotional response, such as the desire to relieve others of distress. Such a decision requires an assessment of the potential rewards of intervening (eg praise or compensation) weighed against the potential costs (eg risk of personal harm, or feelings of guilt for not intervening; Dovidio et al. 2006; Piliavin et al. 1981; Wang 2021).

Barriers and facilitators for bystander intervention

There are a range of factors that may encourage or impede people's willingness and capacity to intervene. Banyard's (2011) ecological model expands on Latané and Darley's (1970) work by exploring intrapersonal and contextual factors that could promote or prevent intervention. Intrapersonal factors include prosocial tendencies, which are linked to increased self-reported helping behaviours (Bennett, Banyard & Garnhart 2013). Contextual factors include bystanders' perceptions of the severity of the situation, the relationship between the bystander and the victim and/or perpetrator, and feelings of social connectedness.

Research further suggests that bystanders are more likely to intervene if they perceive the situation to be more severe (Fischer et al. 2011). Additionally, bystanders may express greater empathy and be more likely to intervene if they know the victim (Bennett, Banyard & Edwards 2017; Burn 2009; Katz et al. 2015) or, for male bystanders, if the perpetrator is their friend (Burn 2009). In contrast, bystanders may be less likely to intervene if they believe they lack the skills needed to intervene (Bennett, Banyard & Garnhart 2013) or if they fear negative evaluation, where others will view the intervention as unnecessary or inappropriate (Burn 2009). Research indicates that men's intervention intentions and behaviours are adversely impacted by the belief that peers will not support intervention (Brown & Messman-Moore 2010; Kroshus 2018). In relation to sexual violence, bystanders who hold stereotypical or prejudiced beliefs, such as accepting rape myths, are also less likely to intervene, with research suggesting that men are more likely to hold these attitudes than women (Banyard 2008; Banyard, Moynihan & Plante 2007; Mainwaring, Gabbert & Scott 2022).

Bystander intervention and IBA

There is limited research on bystander intervention and IBA. In a national survey of more than 4,000 Australians, nearly one in five reported that they had been bystanders to IBA (Office of the eSafety Commissioner 2017). Of those who witnessed IBA, four in 10 did not act in response. In Henry et al.'s (2021) survey, only 46 percent of respondents who had witnessed IBA reported that they had intervened. However, despite limited research, it has been suggested that bystanders can reduce the extent and impact of IBA and other harmful behaviours (Barlińska, Szuster & Winiewski 2013; Brochado, Soares & Fraga 2017; Kowalski et al. 2014; Rebollo-Catalan & Mayor-Buzon 2020; Song & Oh 2018). Engaging bystanders is therefore an untapped prevention tool in the context of IBA.

Aims

The broader project aimed to build on existing knowledge of bystander intervention in relation to IBA in Australia to inform future resources and interventions. Key aims included to:

1. measure bystanders' capacity and willingness to engage in positive action in response to the occurrence of, or conditions contributing to, IBA;
2. identify the enablers of, and barriers to, engaging with IBA law (where it exists) as a form of remedy; and
3. identify the enablers of, and barriers to, bystander intervention and to building cultures that encourage bystanders to take action, where safe to do so.

This paper presents the findings related to the first aim, with a specific focus on gender differences in experiences of, and responses to, witnessing IBA.

Methods

The broader project adopted a two-phase mixed methodology. Phase 1 comprised an online survey and face-to-face focus groups with a cohort of Australians aged 18–71 years across four jurisdictions: South Australia, the Australian Capital Territory, Victoria and New South Wales. These locations were selected because they had specific IBA laws at the time the project was developed (mid-2018). IBA laws have since been introduced in all Australian jurisdictions except Tasmania, and at the federal level (Flynn & Henry 2021). Phase 2 comprised a comprehensive review of available bystander resources on prevention and education on IBA and bystander intervention. This paper reports on the survey data collected during Phase 1.

Survey recruitment and analysis

Respondents were recruited using methods successfully adopted by the researchers previously (see Flynn et al. 2021; Henry et al. 2021; McGlynn et al. 2021; Rackley et al. 2021; see also Flynn, Cama & Scott 2022 for more details). Respondents completed an online anonymous survey hosted by Qualtrics XM in May and June 2019, prior to attending a focus group. The survey was adapted from previous international research on IBA and gender-based violence (eg Cyber Civil Rights Initiative 2014; Englander 2015; Powell, Henry & Flynn 2018). It included questions regarding respondents' experiences of witnessing IBA, actions taken, concerns about taking action, reasons for taking or not taking action, and demographic characteristics.

The data analysis was completed using IBM SPSS Statistics (Version 27). Chi-square analyses, with phi (ϕ) as a measure of effect size, explored gender differences in experiences of witnessing IBA and in actions taken. For those who had witnessed IBA, *t*-test analyses, with Hedge's *g* as a measure of effect size, explored gender differences in concerns about taking action, and reasons for taking or not taking action. Comparisons across non-heterosexual groups were not possible due to small cell sizes. Comparisons between heterosexual and lesbian, gay, bisexual and other sexual identities (LGB+) can be found in the final report (Flynn, Cama & Scott 2022).

Results

The survey sample comprised 245 Australian adults (65.7% women, 29.8% men, 4.5% non-binary or other gender identity) located in South Australia ($n=67$, 27.3%), the Australian Capital Territory ($n=35$, 14.3%), Victoria ($n=71$, 29.0%) and New South Wales ($n=72$, 29.4%). The mean age was 31.20 years ($SD=13.02$, range=18–71 years) and respondents identified as heterosexual ($n=183$, 74.7%), bisexual ($n=29$, 11.8%), gay ($n=12$, 4.9%), lesbian ($n=8$, 3.3%) or other (eg asexual, pansexual, queer; $n=13$, 5.3%). Additional demographic characteristics can be found in the final report (Flynn, Cama & Scott 2022).

Experiences of witnessing IBA

Respondents were asked if they had ever witnessed any of seven unwanted behaviours, each representing a different form of IBA (Table 1). These behaviours comprised non-consensually sharing images, threatening to share images, uploading images, downblousing (an image taken down someone’s shirt), taking images, upskirting (an image taken up someone’s skirt/dress) and other (eg receiving unsolicited nude or sexual images). Nearly two-thirds (64.1%, $n=157$) reported that they had ever witnessed, or become aware of, someone engaging in IBA. Experiences were similar for women (63.4%, $n=102$) and men (67.1%, $n=49$).

	Overall % (n) ($n=245$)	Women % (n) ($n=161$)	Men % (n) ($n=73$)	$\chi^2(1)$	p	ϕ
Sharing	46.1% (113)	44.1% (71)	50.7% (37)	0.88	0.349	0.06
Threatening	29.4% (72)	31.7% (51)	23.3% (17)	1.72	0.190	-0.09
Uploading	28.6% (70)	29.2% (47)	28.8% (21)	0.00	0.947	-0.00
Downblousing	22.9% (56)	26.1% (42)	15.1% (11)	3.48	0.062	-0.12
Taking	20.0% (49)	21.1% (34)	17.8% (13)	0.34	0.558	-0.04
Upskirting	16.7% (41)	18.6% (30)	12.3% (9)	1.44	0.231	-0.08
Other	13.9% (34)	14.3% (23)	12.3% (9)	0.16	0.686	-0.03
Any	64.1% (157)	63.4% (102)	67.1% (49)	0.31	0.577	0.04

Note: Gender comparison $n=234$. Trans and gender-diverse respondents were excluded from comparisons due to insufficient data

Respondents were most likely to report having witnessed the sharing of an intimate image of someone without that person’s permission (46.1%, $n=113$), followed by the threatening to share an intimate image of someone (29.4%, $n=72$) and the uploading of an intimate image of someone onto a website without that person’s permission (28.6%, $n=70$). A total of 149 respondents provided further information about their most recent experience witnessing IBA. Of these, 45.6% ($n=68$) reported that they said or did something in response to this experience. There were no statistically significant differences in the proportion of men (52.4%, $n=22$) and women (42.0%, $n=42$) ($\chi^2[1, n=142]=1.29$, $p=0.257$, $\phi=0.095$) reporting such responses.

Actions taken

The 68 respondents who reported taking action were asked which of 11 actions they took in response to their most recent experience of witnessing IBA (Table 2).

	Overall % (n) (n=68)	Women % (n) (n=42)	Men % (n) (n=22)	$\chi^2(1)$	p	ϕ
Confronted perpetrator	55.9% (38)	47.6% (20)	68.2% (15)	2.46	0.117	0.20
Told friend, family member or colleague	50.0% (34)	54.8% (23)	40.9% (9)	1.11	0.292	-0.13
Distanced self from perpetrator	47.1% (32)	50.0% (21)	40.9% (9)	0.48	0.489	-0.09
Supported victim	47.1% (32)	52.4% (22)	36.4% (8)	1.49	0.223	-0.15
Informed victim	26.5% (18)	26.2% (11)	27.3% (6)	0.01	0.926	0.01
Confronted perpetrator with another person	25.0% (17)	26.2% (11)	22.7% (5)	0.09	0.761	-0.04
Other	16.2% (11)	11.9% (5)	27.3% (6)	2.40	0.122	0.193
Flagged content with provider or platform	14.7% (10)	16.7% (7)	13.6% (3)	0.10	0.751	-0.04
Reported perpetrator to police or other official	14.7% (10)	14.3% (6)	13.6% (3)	0.05	0.943	-0.01
Threatened perpetrator or took physical action	13.2% (9)	11.9% (5)	13.6% (3)	0.40	0.842	0.03
Reported perpetrator to provider or platform	7.4% (5)	7.1% (3)	9.1% (2)	0.08	0.783	0.34

Note: Items were not mutually exclusive. Gender comparison $n=64$. Trans and gender-diverse respondents were excluded from comparisons due to insufficient data

These respondents were most likely to report confronting the perpetrator (55.9%, $n=38$); telling a friend, family member or colleague (50.0%, $n=34$); distancing themselves from the perpetrator (47.1%, $n=32$); and supporting the victim (47.1%, $n=32$). Respondents were least likely to report flagging the content with the provider or platform (14.7%, $n=10$), reporting the perpetrator to the police or other official (14.7%, $n=10$), threatening the perpetrator or taking physical action (13.2%, $n=9$) and reporting the perpetrator to the provider or platform (7.4%, $n=5$). There were no statistically significant differences between men and women in actions taken.

Concerns about taking action

Respondents who reported taking action were asked to indicate their level of agreement with nine statements regarding their concerns about taking action (Table 3).

	Overall <i>M (SD)</i> (<i>n</i> =68)	Women <i>M (SD)</i> (<i>n</i> =42)	Men <i>M (SD)</i> (<i>n</i> =22)	<i>t</i>	<i>p</i>	Hedge's <i>g</i>
Others harass victim	2.75 (1.66)	2.98 (1.60)	2.45 (1.71)	1.21	0.231	0.32
Perpetrator verbally abuse victim	2.68 (1.67)	3.17 (1.68)	2.05 (1.40)	2.84	0.007	0.72
Relationship with perpetrator	2.24 (1.48)	2.17 (1.43)	2.45 (1.60)	-0.74	0.465	0.19
Perpetrator physically abuse victim	2.21 (1.45)	2.48 (1.52)	1.86 (1.32)	1.60	0.115	0.43
Verbal abuse	2.13 (1.37)	2.36 (1.41)	1.73 (1.24)	1.77	0.082	0.47
Harassment	2.03 (1.35)	2.12 (1.42)	1.95 (1.33)	0.45	0.654	0.12
Relationship with victim	2.03 (1.38)	2.10 (1.43)	2.09 (1.32)	0.12	0.991	0.01
Physical abuse	1.79 (1.23)	1.90 (1.32)	1.64 (1.14)	0.81	0.422	0.21
Other	1.37 (1.01)	1.24 (0.79)	1.68 (1.36)	-1.41	0.169	0.43

Note: Measured via a 5-point scale ranging from '1 not at all' to '5 very much'. Gender comparison *n*=64. Trans and gender-diverse respondents were excluded from comparisons due to insufficient data

Respondents were most likely to indicate concern that other people might have harassed the victim ($M=2.75$, $SD=1.66$) and that the perpetrator might have verbally abused the victim ($M=2.68$, $SD=1.67$). However, it is important to acknowledge that these averages represent a relatively low level of concern: 'neutral' concern or 'not really' being concerned. Respondents were least likely to indicate concern that they might have been physically abused by the perpetrator ($M=1.79$, $SD=1.23$) or to have some 'other' concern (eg distress and not being believed; $M=1.37$, $SD=1.01$). The only statistically significant gender difference was that women ($M=3.17$, $SD=1.68$) indicated a higher level of agreement than men ($M=2.05$, $SD=1.40$) with the statement that they were concerned that the perpetrator might have verbally abused the victim as a consequence of their taking action ($t[62]=2.84$, $p=0.007$, Hedge's $g=0.72$).

Reasons for taking action

Respondents who reported taking action were also asked to indicate their level of agreement with seven statements about their reasons for taking action (Table 4).

	Overall <i>M (SD)</i> (<i>n</i> =68)	Women <i>M (SD)</i> (<i>n</i> =42)	Men <i>M (SD)</i> (<i>n</i> =22)	<i>t</i>	<i>p</i>	Hedge's <i>g</i>
It is wrong	4.79 (0.64)	4.83 (0.66)	4.68 (0.65)	0.88	0.383	0.23
Right thing to do	4.65 (0.69)	4.67 (0.75)	4.64 (0.58)	0.16	0.870	0.04
It is illegal	4.26 (1.12)	4.36 (1.12)	4.05 (1.17)	1.04	0.303	0.27
Relationship with victim	3.10 (1.54)	3.31 (1.60)	2.95 (1.40)	0.88	0.383	0.23
Relationship with perpetrator	2.25 (1.42)	1.86 (1.32)	3.09 (1.34)	-3.54	0.001	0.93
Previous experience of IBA victimisation	2.13 (1.54)	2.24 (1.59)	1.91 (1.41)	0.82	0.418	0.22
Other	1.49 (1.07)	1.52 (1.17)	1.50 (0.96)	0.08	0.935	0.02

Note: Measured via a 5-point scale ranging from '1 not at all' to '5 very much'. Gender comparison *n*=64. Trans and gender diverse respondents were excluded from comparisons due to insufficient data

Respondents were most likely to indicate that they acted because IBA is wrong ($M=4.79$, $SD=0.64$), because taking action is the right thing to do ($M=4.65$, $SD=0.69$) and because IBA is illegal ($M=4.26$, $SD=1.12$). Respondents were least likely to indicate that they acted because of previous personal experience of IBA ($M=2.13$, $SD=1.54$) or for some 'other' reason (eg stopping the behaviour; $M=1.49$, $SD=1.07$). The only statistically significant gender difference was that men ($M=3.09$, $SD=1.34$) were more likely than women ($M=1.86$, $SD=1.32$) to indicate that they acted because of their relationship with the perpetrator ($t[62]=-3.54$, $p=0.001$, Hedge's $g=0.93$).

Reasons for not taking action

The 81 respondents who reported not taking action were asked to indicate their level of agreement with 13 statements about their reasons for not taking action (see Table 5).

Table 5: Reasons for not taking action

	Overall <i>M (SD)</i> (<i>n</i> =81)	Women <i>M (SD)</i> (<i>n</i> =58)	Men <i>M (SD)</i> (<i>n</i> =20)	<i>t</i>	<i>p</i>	Hedge's <i>g</i>
Not comfortable	3.43 (1.40)	3.60 (1.28)	2.75 (1.55)	2.43	0.018	0.63
Not responsible	3.22 (1.40)	3.34 (1.33)	3.00 (1.56)	0.96	0.342	0.24
Harmless	2.46 (1.41)	2.16 (1.31)	3.30 (1.45)	-3.28	0.002	0.85
Not concerned	2.42 (1.37)	2.07 (1.20)	3.55 (1.32)	-4.65	<0.001	1.20
Relationship with perpetrator	2.14 (1.44)	1.98 (1.34)	2.35 (1.50)	-1.02	0.309	0.27
Others harass victim	2.12 (1.40)	2.29 (1.48)	1.50 (1.00)	2.68	0.010	0.57
Verbal abuse	2.11 (1.36)	2.16 (1.40)	1.85 (1.27)	0.86	0.392	0.23
Perpetrator verbally abuse victim	2.00 (1.37)	2.14 (1.43)	1.50 (1.05)	2.12	0.040	0.48
Harassment	1.90 (1.27)	1.93 (1.28)	1.65 (1.14)	0.87	0.388	0.22
Perpetrator physically abuse victim	1.78 (1.25)	1.79 (1.24)	1.55 (1.15)	0.77	0.443	0.20
Other	1.77 (1.30)	1.79 (1.31)	1.60 (1.14)	0.59	0.559	0.15
Relationship with victim	1.73 (1.15)	1.64 (1.04)	1.85 (1.39)	-0.72	0.473	0.18
Physical abuse	1.68 (1.10)	1.67 (1.08)	1.50 (1.00)	0.63	0.533	0.16

Note: Measured via a 5-point scale ranging from '1 not at all' to '5 very much'. Gender comparison *n*=78. Trans and gender-diverse respondents were excluded from comparisons due to insufficient data

These respondents were most likely to indicate that they did not take action because they did not feel comfortable ($M=3.43$, $SD=1.40$) and because they did not feel it was their responsibility ($M=3.22$, $SD=1.40$). Respondents were least likely to indicate that they did not take action due to concern that the perpetrator might physically abuse the victim ($M=1.78$, $SD=1.25$), due to some 'other' reason (eg they were unable to help; $M=1.77$, $SD=1.30$), because of their relationship with the victim ($M=1.73$, $SD=1.15$) and because they (the respondent) might be physically abused by the perpetrator ($M=1.68$, $SD=1.10$).

Women were more likely than men to indicate that they did not act because they did not feel comfortable ($M=3.60$, $SD=1.28$ vs $M=2.75$, $SD=1.55$), because they were concerned that other people might harass the victim ($M=2.29$, $SD=1.48$ vs $M=1.50$, $SD=1.00$) and because they were concerned the perpetrator might verbally abuse the victim ($M=2.14$, $SD=1.43$ vs $M=1.50$, $SD=1.05$; $t[76]=2.43$, $p=0.018$, Hedge's $g=0.63$, $t[76]=2.68$, $p=0.010$, Hedge's $g=0.57$, and $t[76]=2.12$, $p=0.040$, Hedge's $g=0.48$, respectively). In contrast, men were more likely than women to indicate that they did not take action because they believed the situation was harmless ($M=3.30$, $SD=1.45$ vs $M=2.16$, $SD=1.31$) and because they were not concerned about the situation ($M=3.55$, $SD=1.32$ vs $M=2.07$, $SD=1.20$; $t[76]=-3.28$, $p=0.002$, Hedge's $g=0.85$ and $t[76]=-4.65$, $p<0.001$, Hedge's $g=1.20$, respectively).

Discussion

The findings from this study provide insight into the experiences of Australian adults witnessing IBA. The survey findings reported in this paper indicate that witnessing IBA was common among the respondents, with nearly two-thirds reporting having ever witnessed someone engaging in IBA—a rate higher than that reported in previous research (Office of the eSafety Commissioner 2017). Most commonly, respondents reported witnessing someone sharing an intimate image without the person's permission. Previous survey research in Australia has found that approximately four in 10 people who witness IBA take actions to intervene (Henry et al. 2021; Office of the eSafety Commissioner 2017). Our study similarly found that 45.6 percent of respondents reported having taken action to intervene during their most recent experience of witnessing IBA.

There are a range of barriers that prevent people from believing they have the capacity, skills and/or ability to intervene when witnessing IBA. In this study, respondents who did not intervene reported not feeling comfortable or not feeling it was their responsibility. This supports previous research which suggests that if bystanders do not feel they have any personal responsibility to intervene when witnessing harmful behaviour, they will be less likely to do so, especially where other bystanders are present (Darley & Latané 1968; Latané & Darley 1968).

Previous research suggests that women are more likely than men to intervene when witnessing sexual violence, and that this may be due to women's greater awareness of sexual violence (Banyard 2008; Burn 2009; Mainwaring, Gabbert & Scott 2022). This extends to IBA, with some evidence indicating that women are more likely than men to perceive non-consensual image sharing as serious and to report intervening in both hypothetical and actual experiences of witnessing IBA (Scott & Gavin 2018). In our study, men and women reported similar rates of both witnessing and intervening in IBA. However, there were gender differences in the reasons for taking action among those who did intervene. For example, men were more likely than women to report having intervened due to their relationship with the perpetrator, supporting earlier research findings that men are more likely to intervene if they know the perpetrator (Burn 2009).

There were also some significant gender differences among respondents who reported that they did not intervene. Women were more likely to report inaction because they did not feel comfortable, were concerned that other people might harass the victim or that the perpetrator might verbally abuse the victim. The survey did not capture whether 'not feeling comfortable' was related to respondents' concerns about self-protection from the perpetrator; however, this issue was explored in the focus groups as part of the broader research project and is discussed in the final report (see Flynn, Cama & Scott 2022). In contrast to women, men were more likely to report inaction because they believed the situation was harmless or they were not concerned about the situation. These findings are problematic, given that men in the study demonstrated a greater propensity to blame victims and minimise IBA (see Flynn, Cama & Scott 2022 for more details). Thus, there may be a range of IBA situations where men do not intervene because they believe IBA is harmless. Future bystander intervention programs may therefore need to involve additional education and skills development to improve understandings of the harms of IBA and that specifically encourage men to identify and respond to IBA.

Conclusion

This study has several limitations. First, respondents were predominantly female, self-selecting and recruited through cost-effective strategies the researchers had used previously. Thus, the sample is not generalisable. Furthermore, as noted earlier, we were unable to conduct reliable analyses across non-heterosexual groups due to insufficient data. Although comparisons between heterosexual and LGB+ can be found in the final report (Flynn, Cama & Scott 2022), sexuality diverse respondents were still analysed as one group (ie LGB+) due to insufficient data. Future research would benefit from concerted efforts to recruit a more representative sample of the Australian community, in addition to more targeted recruitment of gender and sexuality diverse respondents, to enable a more in-depth examination of bystanders' attitudes and experiences among different population sub-groups.

IBA is a complex social, legal and public health problem that requires a multifaceted response. It is vital that responses include the development of prevention education, both to discourage perpetrators and to encourage bystanders to identify and safely respond to harmful behaviour. Such education should promote the theme of shared responsibility, while also addressing how bystanders can safely and effectively intervene and/or support victims when witnessing IBA.

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Dr Asher Flynn is an Associate Professor of Criminology in the School of Social Sciences at Monash University and Vice President of the Australian and New Zealand Society of Criminology.

Elena Cama is a Scientia PhD Candidate at the Centre for Social Research in Health at UNSW Sydney.

Dr Adrian Scott is a Senior Lecturer at Goldsmiths, University of London, where he is Co-Director of the Forensic Psychology Unit and of an accredited MSc program in Forensic Psychology.

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GPO Box 1936
Canberra ACT 2601, Australia
Tel: 02 6268 7166

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