

OBERLIN

COLLEGE & CONSERVATORY



# ***Bystander Intervention Training***

A Program for Oberlin College Students

By PRSM (Preventing and Responding to Sexual Misconduct)  
through the Office of Equity, Diversity, and Inclusion

# My Notes

## **INCAPACITATION**

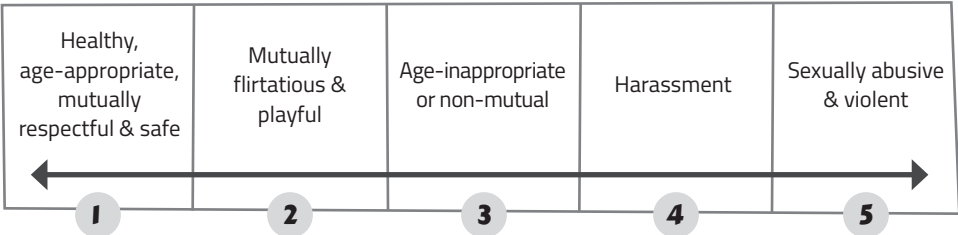
## **BYSTANDER**

## **COMMUNITY RESPONSIBILITY**

## **CONSENT**

# Continuum of Violence

*From National Sexual Violence Resource Center*



**Choose a number on the above scale to answer the following questions:**

When is direct intervention appropriate?

When is it time to call a paid staff person to intervene?

How do we know when something becomes non-mutual?

## Essential Elements of Consent

Informed

Mutually Understandable

Specific to a Given Situation

Freely and Actively Given





Images by Anna Droege '16

# Audit Alcohol Screening Tool



Questions	Scoring System					Your Score
	0	1	2	3	4	
How often do you have a drink containing alcohol?	Never	Monthly or less	2-4x per month	2-3x per week	4+ per week	
How many units of alcohol do you drink on a typical day when you are drinking?	1-2	3-4	5-6	7-9	10+	
How often have you had 6 or more units if your body has more estrogen, or 8 or more if your body has more testosterone, on a single occasion in the last year?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you failed to do what was normally expected from you because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you needed an alcoholic drink in the morning to get yourself going after a heavy drinking session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you been unable to remember what happened the night before because you had been drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
Have you or somebody else been injured as a result of your drinking?	No		Yes, but not in the last year		Yes, during the last year	
Has a relative or friend, doctor or other health worker been concerned about your drinking or suggested that you cut down?	No		Yes, but not in the last year		Yes, during the last year	

## What your score means:

- 0–7: Lower risk of harmful alcohol use
- 8–15: Increasing risk of harmful alcohol use
- 16–19: Higher risk of harmful alcohol use
- 20 or higher: Possible alcohol dependence

Total Score:



# What Does

## Blood Alcohol Content Level

### Really Mean?

BAC Level	Effects from Alcohol
0.02–0.03 BAC	No loss of coordination, slight euphoria, and loss of shyness. Mildly relaxed and maybe a little lightheaded.
0.04–0.06 BAC	Feeling of well-being, lower inhibitions, and relaxation. Judgment is slightly impaired. Minor impairment of reasoning and memory, and less cautious. Your behavior can become exaggerated and emotions (ex. happiness or sadness) felt more intensely.
0.07–0.09 BAC	Impairment present in everyone. Driving skills such as vision, steering, lane changing, and reaction time are impaired along with balance, speech, and hearing. Feelings of euphoria in some. Self-control and caution are reduced. Riskier behaviors displayed. Judgment, reason, and memory suffer. You are likely to believe that you are functioning better than you really are.
<b>0.08 BAC is legally impaired and it is illegal to drive at this level.</b>	
0.10–0.12 BAC	Significant impairment to motor coordination and loss of good judgment. Speech may be slurred; balance, vision, reaction time, and hearing will be impaired. Probably not thinking straight.
0.13–0.15 BAC	Very obviously drunk. Severe impairment to judgment, perception, and major motor skills. Very slow reaction time. Blurred vision, loss of balance, and slurred speech. Feelings of well being starting to be replaced by anxiety and restlessness (dysphoria). Vomiting common.
<b>At 0.15 BAC you are 380 times more likely to be in a fatal crash than you are sober.</b>	
0.16–0.19 BAC	The drinker has the appearance of a “sloppy drunk.” At this point, most drinkers begin to feel incapacitated. Many social drinkers will pass out. Nausea begins to set in and the drinker has difficulty focusing on any object.
<b>The average BAC among fatally injured drivers in 0.17, which is also the average BAC nationally for persons arrested for drunk driving.</b>	
0.20 BAC	Out of it. Confused. Dizzy. Requires help to stand or walk. If injured may not feel the pain. Nausea and vomiting. The gag reflex is impaired and you can choke if you do vomit. Blackouts are likely.
0.25 BAC	All mental, physical, and sensory functions are severely impaired. Near total loss of motor function control. Increased risk of asphyxiation from choking on vomit and of seriously injuring yourself by falls or other accidents.
0.30–0.40 BAC	Extremely life threatening. You have little comprehension of where you are. You may pass out suddenly and be difficult to awaken. Complete unconsciousness. Coma is possible. This is the level of surgical anesthesia. Death may occur.
<b>Over 0.45 BAC death will occur in most people.</b>	

From <http://tampaattorneys.org>



Although there’s no strict limit for consent like there is for driving, how can we think about drinking and consent under the influence similarly?

If alcohol impairs our judgment and reason, how would your intoxication level affect your ability to judge someone else’s level of intoxication?



# ***That's a cool chart, but how does alcohol work in my body?***



It takes 20-30 minutes to feel the maximum effect of one drink, and about 45-60 minutes for the drink to leave the system.

This matters because the effects of alcohol are cumulative—someone might not be incapacitated when you start kissing, but then they are 20 minutes later!

There are a lot of factors that affect how drunk someone gets on a given night. A few are:

- how much they've eaten prior to drinking
- strength of the alcohol (beer vs hard liquor)
  - their weight
- any medications that may interact with alcohol
- other drug interactions
- the speed of consumption
  - hormones

Most of these are not factors you can know as an observer, so you never really know how someone is processing alcohol one night in comparison to a different night.

Some people are verbal and seem to be functioning physically even when they are in a state of "blackout" or "brownout" (when the brain stops coding short-term memories into long-term memory. As in, "I was so drunk, I can't remember what happened last night!").

People exhibit intoxication and incapacitation differently, and sometimes it's impossible to know just by looking at them (or even talking to them!).

**This means checking in early and often if you are going to be intimate or sexual with someone who has been drinking. Check in with them and yourself, and if you're unsure about anything, wait until you can both communicate clearly and are uninhibited by substances.**





# What Does

## Victim Blaming

### Sound Like?

Were they drinking?

How much? Did they seem drunk?

What were they wearing?

Why did they leave their friends?

Were they flirting?

Why didn't anyone stop them?

Do they have a lot of partners?

Do they know their perpetrator?

Didn't they know this would happen?

Is it their fault?

...

Even if there are a lot of questions, there is only one answer:

**A survivor is never to blame for their assault.  
Ever.**

# **How to Act: 5 Steps to Intervention**

## **1. Notice**

Notice the event along the continuum of violence

## **2. Consider**

Consider whether the situation demands action

## **3. Decide**

Decide if you have a responsibility to act

## **4. Choose**

Choose what form of assistance to use

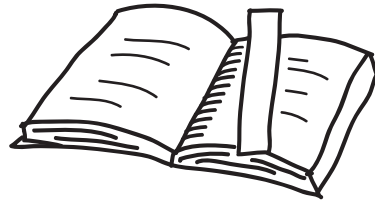
## **5. Understand**

Understand how to implement the choice safely



How does your identity affect the above steps?

# Definitions



## **POWER**

Access to resources and systems that facilitate the self-definition of one's reality and lived experience as normal. Having institutional power benefits those who are part of the defined norm and also includes the ability or capacity to influence/control access to resources as well as the behaviors of others.

## **PRIVILEGE**

Privilege operates on personal, interpersonal, cultural, and institutional levels and gives advantages, favors and benefits to members of dominant groups at the expense of members of target groups.

## **OPPRESSION**

A systemic social phenomenon based on the perceived and real difference among social groups that involves ideological domination, institutional control, as well as the promulgation of the oppressors ideology, logic system and culture to the oppressed group. The result is the exploitation of one social group by another for the benefit of the oppressor group. The act of upholding and reinforcing authority and power is an exercise of oppression.

# Social Identity Wheel



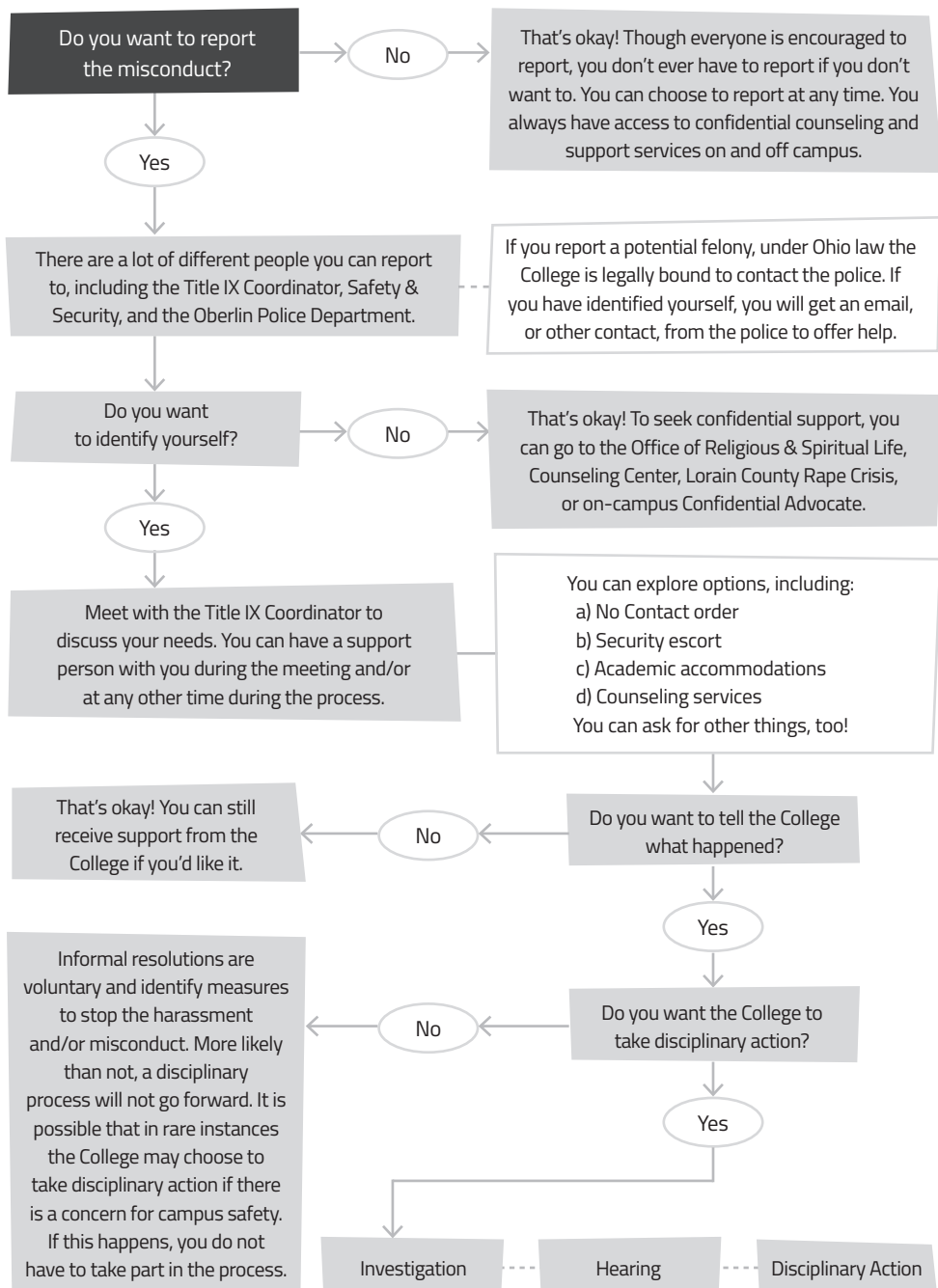
**How do these identities impact how you would intervene?  
Does it depend on context and setting? If an identity presents a barrier  
to intervening, how would you overcome or go around that barrier?**

**When can you be an active bystander in your daily life?**

**What student organizations, teams, classes, etc. are you part of that would benefit from a culture of active bystander intervention?**

**How do you like to intervene? Are you more direct or indirect? What are the benefits to both approaches?**

# Reporting Sexual Misconduct at Oberlin



# Resources

If you or someone you know has experienced sexual misconduct, or if you just need someone to talk to, there are a variety of places and people who can help.

## **Emergency Assistance**

911 Emergency Services

Oberlin College Safety & Security (440) 775-8911 (24 hour)

The Nord Center Sexual Assault Care Unit (800) 888-6161 (24 hour hotline)

Lorain County Rape Crisis (800) 888-6161 (24 hours)

Lorain County Mental Health Crisis Hotline (800) 888-6161 (24 hours)

## **Confidential Resources & Support**

Oberlin College Counseling Center (440) 775-8470

Oberlin College Counseling Center After-Hours Telephone Support (440) 775-8470 (press option 2)

Office of Religious and Spiritual Life (440) 775-8103

Lorain County Rape Crisis (800) 888-6161 (24 hour hotline)

Confidential on-campus Student Advocate (440) 204-4359 or [college\\_advocate@nordcenter.org](mailto:college_advocate@nordcenter.org)

## **Reporting Options**

### **On Campus**

Safety and Security (440) 775-8911(24 hours)

Dean of Students (440) 775-8462

Title IX Coordinator, Rebecca Mosely (440) 775-8555

Human Resources (440) 775-5573

### **Off Campus**

Oberlin Police Department (440) 774-1061

Mercy Allen Hospital (440) 986-4000

Lorain County Prosecutor (440) 329-5389

## **Related Student Organizations**

Edmonia Lewis Center (ELC) [elc@oberlin.edu](mailto:elc@oberlin.edu)

Multicultural Resource Center (MRC) (440) 775-8802

Sexual Information Center (SIC) [sic@oberlin.edu](mailto:sic@oberlin.edu)

Preventing & Responding to Sexual Misconduct (PRSM) [prsm@oberlin.edu](mailto:prsm@oberlin.edu)

OSCA Sexual Offense Policy Advocates Hotline (440) 574-0167

**To read more about Oberlin's Sexual Misconduct Policy, visit [go.oberlin.edu/edi](http://go.oberlin.edu/edi) or contact PRSM trainers at [prsm@oberlin.edu](mailto:prsm@oberlin.edu).**

