



No Excuse for Abuse: Evaluation of a Public Health Campaign To Increase Awareness and Change Attitudes Toward Non-Physical Domestic Violence

Domestic Violence Awareness Campaign

Reima Pryor¹ · Elizabeth Jane Doery² · Lata Satyen² · Bianca Klettke² · Jayne Pilkinton¹ · John W. Toumbourou² 

Accepted: 30 July 2025
© The Author(s) 2025

Abstract

Purpose Domestic violence against women causes severe health and social impacts and is of international public health concern. To address this issue, Our Watch, an organization established to prevent violence against women in Australia, used public health behavior change theories and preliminary studies to develop a social marketing video campaign to increase public recognition of non-physical forms of domestic violence against women such as emotional, financial, or technological control or abuse. This study reports an impact evaluation.

Methods A quasi-experimental design evaluated the impact of exposure to campaign videos on recognition and attitudes regarding non-physical domestic violence. Two samples, totaling 3,070 Australian adults were recruited. Analyses compared two levels of campaign exposure (low – 17.8%; high – 25.4%) to a no exposure group (56.8%). Multi-variate regression analyses evaluated campaign effects on knowledge and attitudes.

Results Exposure to the videos predicted significantly higher recognition of (Standardized Regression Coefficient [β] = 0.08, $p < .001$) and more unfavorable attitudes ($\beta = 0.02$, $p = .179$) to non-physical domestic violence. Higher levels of campaign exposure were associated with larger effects (recognition $\beta = 0.12$, $p < .001$; attitudes $\beta = 0.04$, $p = .015$).

Conclusions The current study uses a quasi-experimental design to evaluate a public health campaign designed to increase recognition of non-physical domestic violence. Our promising findings could be confirmed through further evaluations of prevention campaigns and extended to establish behavioral impacts to prevent domestic violence across whole populations.

Keywords Domestic violence · Family violence · Non-physical forms of violence · Public health campaign · Prevention · Social marketing campaign · Violence against women

Introduction

Across the world, the rates of domestic, family, and sexual violence against women remain high despite increasing efforts to address this issue. One in four ever-partnered women has experienced physical or sexual violence from

a male intimate partner since the age of 15 years (World Health Organization, 2021). The effects of violence against women are profound and impact the physical, psychological, and social health of women and children (Satyen et al., 2021; World Health Organization, 2016). The Lancet Public Health (2022) have noted the lack of evaluation of interventions to prevent violence against women. This is especially critical considering the increased incidences of domestic violence that were reported following the COVID-19 pandemic (Boxall et al., 2020; Dominguez et al., 2023).

One way to influence the knowledge and attitudes underlying physical and non-physical forms of domestic violence/abuse is through public health education or social marketing campaigns. The appeal of such campaigns is their wide reach across large sections of the general population

✉ John W. Toumbourou
John.toumbourou@deakin.edu.au

¹ Our Watch, GPO Box 24229, Melbourne, VIC 3001, Australia

² Research Centre for Social and Early Emotional Development (SEED Lifespan), Deakin University, Geelong, Australia

(Campbell & Manganello, 2006; Cismaru & Lavack, 2011). These campaigns aim to enhance awareness and/or modify attitudes believed to be drivers of violent behaviors and may contribute to shifting related social norms and ultimately, violent behaviors.

Message reinforcement is a commonly used strategy in public health education campaigns (Wakefield et al., 2010). Messages are repeated over time and in different contexts to increase recall. Theories of memory suggest that information is embedded at a deeper level through repetition and hence more accessible to memory (Craik & Lockhart, 1972; Seiver et al., 2019). Evaluations of message campaigns typically assess message exposure as a first step to ascertaining impacts.

To review the existing literature regarding evaluations of public health gender-based violence prevention campaigns, we used the following keywords: “domestic violence”, “intimate partner violence”, “IPV”, “family violence”, “prevent*”, “campaign” and “public health”. The search was not limited by country or year. Two reviews (Campbell & Manganello, 2006; Cismaru & Lavak, 2011) and several empirical studies including Gadowski et al. (2001), Keller and Honea (2016), and Potter et al. (2009) evaluating prevention campaigns were identified. This research was predominantly conducted in Australia, the United States, the United Kingdom, and New Zealand. While some of the empirical evaluations focused on sexual and physical violence and found that the campaigns were positively associated with attitude or behavior change, no studies focused on non-physical forms of violence. In what follows we summarize two public education campaigns that were evaluated to have positive effects in increasing awareness of domestic violence.

Gadowski et al. (2001) sought to understand how a seven-month public health education campaign, disseminated through radio advertisements, posters, and printed media articles, in New York, USA, could alter attitudes and behavior towards domestic violence. Two of the aims of the advertising campaign included increasing domestic violence awareness and highlighting that domestic violence consists of both physical and non-physical violence. One promising finding was that calls to the domestic violence hotline doubled following the campaign.

Potter et al. (2009) evaluated the success of university campaign posters aimed at encouraging prosocial bystander behavior and willingness to intervene in situations related to violence against women. Results revealed that participants who saw the campaign had greater awareness of these issues than those who did not (Potter et al., 2009). While these findings support the use of public health campaigns in creating awareness and changing attitudes regarding domestic violence, there remains a paucity of publicly shared campaign

evaluations on this topic and how they could be made more effective, reinforcing the importance of the current study.

While changes in domestic violence behaviors are difficult to measure, evaluations often focus on whether individuals can recall campaign messages; changes in awareness/knowledge and attitudes; changes in help-seeking behavior; and increasing the identification of intimate partner violence in community and health settings (Campbell & Manganello, 2006). It is critical that campaigns are evaluated to ensure they effectively generate their intended change. Such evaluations further understanding of how drivers of domestic violence can be modified, and enable sharing of learnings with peers.

Our Watch is a key government-funded national organization that was established in 2013 to prevent violence against women in Australia. Their goal is to address the drivers of violence against women and to prevent it before it starts. To achieve this, Our Watch delivers evidence-based social marketing campaigns, among a range of other initiatives (Our Watch, 2022). The current study reports aspects of an evaluation of the ‘No Excuse for Abuse’ campaign. This campaign was designed by Our Watch to help Australians recognize different types of non-physical abuse and help them understand that these behaviors are harmful and should not be overlooked or excused. The campaign depicted non-physical abuse types of emotional, technological, and financial abuse impacting women.

The campaign was developed in response to formative research findings commissioned by Our Watch that found 50% of 1,062 Australians aged 18–64 years believed that non-physical abuse between partners can be difficult to recognize (Our Watch, 2020). This statistic was higher among younger people (aged 18–34), with 58% in this age group believing these forms of behaviors can be challenging to identify. Other research found young men and individuals with unfavorable attitudes to female equality were more likely to believe that non-physical forms of abuse do not constitute domestic violence (Politoff et al., 2019). The aim of the ‘No Excuse for Abuse’ campaign was to enhance the recognition of non-physical forms of domestic violence and to promote the attitude that these behaviors are serious and not excusable.

The current study reports a quasi-experimental evaluation of the Our Watch ‘No Excuse for Abuse’ public health campaign. The evaluation was commissioned by Our Watch, who invited a Deakin University team to assist the current analysis and report. Levels of campaign exposure were operationalized based on delivery of media and participant recall of content in an evaluation survey. It was hypothesized that exposure to the campaign would increase recognition of and unfavorable attitudes to non-physical domestic violence (that these forms are serious

and inexcusable), with higher levels of exposure showing larger effects.

Methods

A cross-sectional post-evaluation design was approved by the Belberry private Human Research Ethics Committee. The evaluation assessed among other aspects of campaign effectiveness, the impacts of the campaign on recognition of and attitudes to non-physical domestic violence. The Deakin University authors were approved to assist analysis and reporting through an ethics exemption (2022-086).

Procedure

The ‘No Excuse for Abuse’ campaign was initially launched in 2018 for 10 months. The campaign was relaunched in 2020 based on research predicting an increase in violence against women due to the global COVID-19 pandemic. Two bursts of campaign activity took place, in May and September 2020, each for around eight weeks. The 2020 campaign included two 30-second videos depicting three types of non-physical forms of domestic violence against women (technological/financial and emotional) (Our Watch, 2020). These were disseminated across media channels of, television (both free-to-air/linear and online/catch-up), social media, internet search engines, and billboards. Individual viewers were served the video advertisements multiple times on a given platform, and many viewed them across several platforms. The videos encouraged visits to the campaign website that offered further information resources. For the campaign videos see: <https://adsspot.me/brands/our-watch-f9e6cdf7362e>.

Table 1 Sample demographic details

Variable	<i>Sample One</i> <i>n</i> = 1000	<i>Sample Two</i> <i>n</i> = 2070	<i>Combined</i> <i>n</i> = 3070
	%	%	%
Female	50.00	67.25	61.63
Age			
18 to 24 years	23.50	10.72	14.89
25 to 29 years	19.00	16.33	17.20
30 to 34 years	19.90	19.13	19.38
35 to 39 years	18.70	20.34	19.80
40 to 44 years	18.90	33.48	28.73
Income			
Under \$50,000	15.50	24.78	21.76
\$50,000 to \$99,000	30.90	29.90	30.23
\$100,000 to \$149,999	25.30	17.63	20.13
\$150,000 plus	17.80	13.48	14.89
Rather not say/don't know	10.50	14.20	13.00

Note: % - column percentages

Participants

To evaluate the campaign, over 3,070 adults (18–44 years) who were representative of the Australian population in terms of age and gender, and located in different Australian states and territories, were recruited from research ‘panels’, having previously agreed to complete surveys for \$50 remuneration (Sample One, *n* = 1,000; Sample Two, *n* = 2,070). Our Watch contracted two firms to complete campaign delivery and evaluation. Sample One was recruited by Quantum Market Research to include the Australian population regions and 18 to 44 age groups. This sample received the same free-to-air TV campaign as the national population, with exposure assessed by recall as described in the Measures section below. Sample Two was recruited by EMX Digital from a remunerated panel subscribing to the catch-up/online TV service, with 50% allocated to be served the campaign videos and 50% not served them, during their catch-up TV viewing time.

All participants completed a 10-minute online survey at the end of the campaign in October 2020. This assessed demographic characteristics, recall of the campaign, recognition of and attitudes to non-physical forms of violence. Participant perceptions of the campaign videos and their impacts were also assessed but are not reported here.

Table 1 presents demographic details for Sample One, Two and the Combined sample. For the combined sample the gender breakdown was Male 38.4%, Female, 61.6% and Non-binary, 0%. In the combined sample, 14.9% were aged 18 to 24 years and 21.8% earned under \$50,000 (in Australian Dollars), which were the referent categories in the regression analyses.

Measure

Table A1 in the Online Resource provides details of the two surveys and how each survey measured the variables of interest. Table 1 presents the demographic variables included in the analyses. Below we have included a summary of the independent and dependent variables.

Campaign exposure (independent variable) Was measured and categorized differently in the two surveys. In Sample One (Quantum Survey) participants were assessed for their recall of the campaign through free-to-air TV. Participants were firstly asked unprompted and then prompted questions to establish if they recalled the campaign. Prompting included still images of the two campaign videos (one video addressed technological and emotional abuse and the other video addressed technological and financial abuse) and then questions asking about their recall of each video. For

analyses respondents were classified as No recall of either campaign video (No exposure, 69.6%), recall of one of the two videos (Exposure Level 1, 13.9%), or recall of both videos (Exposure Level 2, 16.5%).

In Sample Two (EMX survey) the panel was allocated to different video exposure conditions and then surveyed about their recall. For analyses, they were categorized based on not having been served the videos on catch-up TV (No exposure, 50.7%), being served during their catch-up/online TV viewing time but not recalling the campaign (Exposure Level 1, 19.6%) and being served and recalling the campaign (Exposure Level 2, 29.7%).

The combined sample included both Sample One and Two. In the combined sample No exposure [56.8%], was compared to Level 1 [17.8%] and 2 [25.4%].

Recognition of non-physical domestic violence (dependent variable) Items were selected from the National Community Attitudes towards Violence against Women Survey (NCAS), which had been previously designed through extensive psychometric testing (Webster et al., 2018). For the current study, participants assessed whether six non-physical abuse scenarios were recognized as domestic abuse or violence, covering non-physical abuse types: (1) emotional, (2) stalking/harassment, (3) technology, (4) social, (5) financial and (6) spiritual. The presentation of NCAS items was adapted for the current study. For Sample One a series of six scenarios (e.g., one partner in a domestic relationship ... repeatedly criticizes the other to make them feel bad or useless) were presented and respondents were asked whether “this is a form of domestic violence?”. Response options were coded: Yes always (4), Yes usually (3), Yes sometimes (2), No/Don’t know/Prefer not to answer (1), and responses showed high internal consistency (Cronbach’s Alpha=0.88). Sample Two rated their agreement that six scenarios were a form of domestic abuse or violence. Response options ranged from 1=Strongly disagree to 5=Strongly agree, showed high internal consistency (Alpha=0.92) and were recoded 1 to 4 for data harmonization.

Attitudes to non-physical domestic violence (dependent variable) In Sample One were assessed with 5-items “To what extent do you agree or disagree that non-physical violence or abuse is (1) acceptable/excusable, (2) a serious issue, (3) harmful, (4) as concerning as physical violence, and (5) never excusable, regardless of the circumstances”. Response options ranged from 1=Strongly disagree to 5=Strongly agree. Responses had high internal consistency (Alpha=0.80). Sample Two rated 4-items: “Non-physical abuse ... towards women is common in our society; ... in relationships is serious/harmful; ...in relationships

is not acceptable/excusable; During times of crisis like the COVID-19 pandemic, non-physical forms of domestic violence are more likely to occur”. Response options ranged from 0=Strongly disagree to 10=Strongly agree. Responses showed high internal consistency (Alpha=0.76), and were harmonized to a 1 to 5 scale. Respondents were considered to have unfavorable attitudes to non-physical forms of domestic violence if they agreed these forms were serious and inexcusable.

Analyses

Multi-variate regression predicted recognition/awareness of and attitudes to non-physical forms of domestic violence from level of campaign exposure (No exposure compared to Level 1 and 2), adjusting for demographic factors (sex, age, and income). Analyses were performed on the two samples separately and then the combined sample. As previous research has identified young males to have a poor understanding of non-physical violence (Webster et al., 2018), a series of moderation analyses explored the relevance of the campaign for males in the sample aged 18–24 years ($n=135$). Analyses investigated whether this group showed differences in recognition of and attitudes to non-physical violence (based on multivariate regression) and campaign exposure (based on chi-square analyses). Sensitivity regression analyses evaluated intervention effects in the young male sub-sample.

Results

The first multivariate regression analysis found campaign exposure predicted recognition of non-physical domestic violence. The results showed that Level 1 and Level 2 campaign exposures (relative to No exposure) were significant predictors for each sample and when combined (Table 2). In the combined data higher recognition (relative to No exposure) was predicted by both Level 1 (standardized regression coefficient [β]=0.08, $p<.001$) and Level 2 ($\beta=0.12$, $p<.001$) campaign exposure. Higher recognition was also predicted by being female, being aged 30 years or older (relative to age 18 to 24 years). Finally, reporting income above \$100,000 predicted higher recognition (relative to those with income under \$50,000).

The second multivariate analysis found Level 2 campaign exposure compared to No campaign exposure significantly predicted unfavorable attitudes to non-physical domestic violence in Sample Two ($\beta=0.06$, $p=.009$) and the combined sample ($\beta=0.04$, $p=.015$) (Table 3). Level 1 exposure did not predict attitudes in any of the samples. In

Table 2 Linear regression predicting recognition of non-Physical domestic violence

	Sample One <i>n</i> = 1000			Sample Two <i>n</i> = 2070			Combined <i>n</i> = 3070		
Predictors	β	<i>t</i>	<i>p</i>	β	<i>t</i>	<i>p</i>	β	<i>t</i>	<i>p</i>
Campaign exposure	Referent (No exposure)								
Level 1	0.07	2.29	0.022	0.06	2.36	0.018	0.08	4.24	<0.001
Level 2	0.12	3.79	<0.001	0.07	2.82	0.005	0.12	6.35	<0.001
Female	0.20	6.55	<0.001	0.14	6.61	<0.001	0.20	11.48	<0.001
Age	Referent (18 to 24 years)								
25 to 29 years	−0.04	−1.08	0.280	0.01	0.46	0.643	0.02	0.94	0.345
30 to 34 years	−0.04	−1.01	0.311	0.05	1.46	0.144	0.05	2.06	0.040
35 to 39 years	−0.01	−0.17	0.862	0.03	0.98	0.326	0.06	2.43	0.015
40 to 44 years	−0.00	−0.12	0.901	0.04	0.98	0.326	0.07	2.61	0.009
Income	Referent (Under \$50,000)								
\$50,000 to \$99,000	0.12	2.65	0.008	0.03	1.26	0.209	0.04	1.72	0.086
\$100,000 to \$149,999	0.14	3.26	0.001	0.05	1.96	0.050	0.04	2.01	0.044
\$150,000 plus	0.14	3.30	0.001	0.07	2.90	0.004	0.07	3.07	0.002
Rather not say/don't know	−0.00	−0.05	0.959	−0.04	−1.62	0.105	−0.03	−1.25	0.213

Note: β = Standardized coefficients. Survey One, Quantum survey: $R^2 = 0.079$; $R^2_{adj} = 0.069$. Survey Two, EMX Survey: $R^2 = 0.035$; $R^2_{adj} = 0.030$. Combined: $R^2 = 0.065$; $R^2_{adj} = 0.062$

Table 3 Linear regression predicting attitudes unfavorable to non-Physical domestic violence

	Sample One <i>n</i> = 992			Sample Two <i>n</i> = 2072			Combined <i>n</i> = 3064		
Predictors	β	<i>t</i>	<i>p</i>	β	<i>t</i>	<i>p</i>	β	<i>t</i>	<i>p</i>
Campaign exposure	Referent (No exposure)								
Level 1	0.02	0.61	0.539	0.02	0.88	0.377	0.02	1.34	0.179
Level 2	−0.02	−0.51	0.610	0.06	2.61	0.009	0.04	2.43	0.015
Female	0.28	9.03	<0.001	0.28	13.02	<0.001	0.29	16.45	<0.001
Age	Referent (18 to 24 years)								
25 to 29 years	−0.03	−0.68	0.497	0.00	0.01	0.990	−0.00	−0.10	0.918
30 to 34 years	−0.03	−0.87	0.382	0.04	1.37	0.170	0.03	1.07	0.283
35 to 39 years	0.00	0.03	0.980	0.00	0.06	0.953	0.01	0.58	0.560
40 to 44 years	−0.01	−0.34	0.736	0.05	1.42	0.154	0.05	1.98	0.048
Income	Referent (Under \$50,000)								
\$50,000 to \$99,000	0.10	2.18	0.030	0.03	1.32	0.187	0.04	1.61	0.107
\$100,000 to \$149,999	0.16	3.68	<0.001	0.00	0.26	0.789	0.04	1.83	0.067
\$150,000 plus	0.23	5.52	<0.001	0.02	0.71	0.478	0.08	3.85	<0.001
Rather not say/don't know	0.08	2.09	0.037	−0.02	−0.91	0.363	0.00	0.42	0.671

Note: Sample One, Quantum survey: $R^2 = 0.104$; $R^2_{adj} = 0.094$. Sample Two, EMX Survey: $R^2 = 0.083$; $R^2_{adj} = 0.078$. Combined: $R^2 = 0.088$; $R^2_{adj} = 0.085$

the combined results unfavorable attitudes were predicted by: being female, being aged 40–44 years (relative to age 18–24 years), and reporting income \$150,000 or above (relative to income under \$50,000).

Moderation analyses in the combined sample revealed males aged 18 to 24 ($n = 135$) reported significantly lower recognition ($\beta = -0.06$, $p = .008$) and lower unfavorable attitudes ($\beta = -0.07$, $p = .001$) to non-physical violence (that is, they were less likely to see these forms as serious and inexcusable), and lower campaign recall (Level 1, 16.3%; Level 2, 16.3%: $\text{Chi}^2(2) = 7.56$, $p = .023$). Regression analyses limited to the young male sample found campaign exposure did not predict recognition (relative to No exposure: Level 1,

$\beta = -0.09$, $p = .333$; Level 2, $\beta = 0.10$, $p = .248$) or unfavorable attitudes (relative to No exposure: Level 1, $\beta = -0.02$, $p = .810$; Level 2, $\beta = 0.08$, $p = .350$).

Discussion

The current study presents a quasi-experimental evaluation of a public health messaging campaign designed to increase recognition of and unfavorable attitudes towards non-physical domestic violence. In line with the hypotheses, exposure to the campaign was associated with higher levels of recognition of and unfavorable attitudes to non-physical domestic

violence. Higher levels of campaign exposure were also associated with stronger effects. Importantly, as a response to the Lancet Public Health (2022) which called for evaluation to demonstrate gendered violence against women is preventable, our study provided novel evidence that exposure to video message campaigns was associated with increased recognition of non-physical forms of domestic violence and increased unfavorable attitudes to this behavior. In line with well validated behavior change theories (Forsdike et al., 2021), Our Watch anticipate that through intervening to change recognition and attitudes, changes in behavior can be achieved to consequently prevent domestic violence.

In accordance with the present results, previous studies have noted the importance of public health education campaigns that reach large proportions of the population to modify social norms and reduce physical and non-physical forms of domestic violence (Campbell & Manganello, 2006; Cismaru & Lavack, 2011). The importance of the current study is demonstrated through previous literature conducted by Our Watch (2020) and Politoff et al. (2019) that shows non-physical forms of violence are often difficult to identify and hence unchallenged. Our study demonstrates it may be feasible to increase recognition of these behaviors through repeated messaging, following the assertion that repetition leads to better recall and recognition of information (Craik & Lockhart, 1972). Further, our study was one of few to evaluate the use of video message campaigns that can be disseminated across large populations for non-physical forms of domestic violence.

A noteworthy outcome of our study showed a dose effect for campaign exposure when controlled for confounding factors, with higher levels of exposure associated with greater recognition. While measures of dose effect in evaluations of violence against women prevention campaigns are lacking, a similar finding for an antismoking campaign was reported by Farrelly and colleagues (2005). Evidence from the Farrelly study revealed that a higher dose of campaign exposure was significantly related to lower youth smoking behavior.

Sample Two (the EMX survey) assessed exposure level based on having been served the ads during catch-up TV viewing time (or not) and respondents recalling a video ad (or not). In Sample One (the Quantum survey) exposure was assessed based on whether respondents recalled one or two different variants of the ads (or none). Recall has been used widely to assess campaign exposure (Campbell & Manganello, 2006; Cismaru & Lavack, 2011; Marcus et al., 1998).

A novel finding in the current study was that significant recognition effects were still evident in populations that were exposed to the messages but did not recall them. This could be because of subliminal processing, which can facilitate recall of related information (Van den Bussche et al., 2009). Alternative explanations for this finding may be that (1) respondents

cognitively processed the messages but then subsequently forgot them or (2) indirect exposure occurred whereby TV messages are received in households or social networks and discussed, but never directly witnessed by the respondent.

Further findings revealed that while attitude change was evident for Sample two among those who recalled the ads, these same results were not found among Sample one. These findings confirm that campaign recognition may not be sufficient to achieve attitude change. Therefore, future research should further investigate under what campaign conditions attitude change occurs.

Moderation analyses revealed that young men (aged 18–24 years) had lower recognition of non-physical domestic violence, and the campaign and less unfavorable attitudes to non-physical forms of abuse. Regression analyses testing interaction terms did not observe a campaign exposure effect on recognition or attitudes for young men. These quantitative findings were at odds with other qualitative feedback where young men self-reported the campaign had led them to reflect on their attitudes (Our Watch, 2020). Future campaigns and evaluations may wish to target specific population groups (i.e., young males) to better understand the attitude change process and encourage behavior change among these groups.

The finding that assessments of both recall and repeated exposure to different messages combined to show level/dose effects aligns with behavioral reinforcement and subliminal processing theories. These theories assume that awareness increases due to cognitive recall prompted by reminders and message reinforcers (De Leon et al., 2014; Skinner, 1966). The current evaluation also adds to the knowledge of how public health campaign exposure may influence antecedents of behavior change (Wakefield et al., 2010). Previous literature has examined how public health awareness-raising strategies, such as social media advertising, can lead to behavior change (Al-Dmour et al., 2020). However, much of the existing research is theoretically based and there remains a paucity of research that has directly tested the effect of public health strategies in reducing violent behaviors. Therefore, our findings that suggest how we might alter both awareness and attitudes about domestic violence behaviors, are both practically and theoretically important.

The current study is an example of one of the few domestic violence prevention public health campaigns designed to achieve large population (Australia-wide) reach that have published an impact evaluation. Further, our evaluation included quasi-experiment design features where some participants are known to have been served the ads and others are known to be not served the ads on a given media channel, and where dose effects for different levels of message campaign exposure were evaluated. These evaluation features are novel in the current domestic violence prevention

literature. The demonstration of dose effects in the current findings increases confidence that the effects are associated with the campaign rather than confounding factors. The multi-variate analyses were adjusted for demographic effects that may otherwise associate with message exposure. The analysis of two samples provides a potential confirmation of findings using different designs.

Despite these strengths, we recommend the results are interpreted considering some limitations. Firstly, the current findings are cross-sectional with analyses based on post-program exposure. Future designs might consider longitudinal evaluations to more clearly demonstrate that recognition and attitudes were changed in temporal association with the campaign exposure. Although the current study includes forms of control groups, it remains a non-experimental design as exposure groups were not randomly allocated. This is a scientific advance as from the literature identified, no previous studies have reported a quasi-experimental design. Therefore, we propose that future evaluations may consider the potential to appropriately utilize experimental designs to establish causal effects. Secondly, future studies should test behavior change theory assumptions and evaluate how recognition or awareness and attitude change contributes to behavior change (i.e., reduction in violence). Finally, longer term studies are required to evaluate whether and how changes in recognition/awareness and attitudes contribute to behavior change and whether changes are sustained and translated to different scenarios or cultural contexts.

Implications and Conclusion

For the current project, post campaign surveys estimated that 34% of the 18-to 44-year-old target group across Australia recalled the campaign (Our Watch, 2020). As behavior change was not measured in the unexposed sample, the current analyses did not evaluate behavior change effects. However, the post campaign survey found that of those exposed to the campaign, 42% self-reported taking actions after the campaign. These actions included talking to others about the videos, or non-physical forms of violence and seeking further information or help (Our Watch, 2020).

While these findings are promising, they should be confirmed with rigorous evaluation designs as occurs in other areas of public health. As one example, Brennan et al. (2021) report a sophisticated evaluation of a public health campaign to promote low risk drinking. This study randomly assigned exposure to campaign and then used mediation analyses to longitudinally test the theoretical mechanisms purported to lead from alcohol campaign exposure to targeted behavior changes.

Future investment could seek to replicate the campaign and evaluation to reinforce population effects. Materials

could also be adapted to target diverse cultural, language and demographic sub-populations. Given the current findings, young males should be a specific sub-population focus.

Given this intervention reached a large population across Australia and changed attitudes, it is possible that it may have been cost-effective in terms of the economic burden of domestic violence. Future evaluations could confirm the current finding of an exposure effect. The population effect can then be monetized to estimate the campaign costs and benefits.

In conclusion, the current evaluation demonstrates the Our Watch No Excuse for Abuse campaign was associated with increased recognition/awareness and attitude changes, which are pre-conditions that may subsequently trigger social norm and behavior change to reduce domestic violence. Future evaluations could seek to replicate findings and adjust messages to increase effectiveness for young males.

Supplementary Information The online version contains supplementary material available at <https://doi.org/10.1007/s10896-025-00957-3>.

Acknowledgements This report evaluates campaigns implemented by and data collected by Quantum Market Research (Sample One) and EMX Digital (Sample Two) who were commissioned by Our Watch.

Author Contributions Reima Pryor: Funding acquisition, Project administration; Supervision; Data collection; Visualisation; Writing - original draft

Elizabeth Jane Doery: Project administration; Supervision; Data collection; Visualisation; Writing - original draft

Lata Satyen: Conceptualisation; Data collection; Writing - original draft

Bianca Klettke: Conceptualisation; Writing - review & editing

Jayne Pilkinton: Conceptualisation; Project administration; Writing - review & editing

John W Toumbourou: Conceptualisation; Funding acquisition; Project administration; Analysis; Writing - review & editing; Response to review.

Funding Open Access funding enabled and organized by CAUL and its Member Institutions. Our watch provided funding for the data collection, analysis and reporting for this paper.

Data Availability Not Applicable.

Declarations

Ethical Approval A cross-sectional post-evaluation design was approved by the Bellberry private Human Research Ethics Committee. Deakin University authors were approved to assist analysis and reporting through an ethics exemption 2022-086.

Competing interests The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest. No one has been paid to write this article by a pharmaceutical company or other agency who will benefit financially from its submission. Our Watch commissioned this article to share learnings and further the practices of a sector aiming to prevent violence against women.

Open Access This article is licensed under a Creative Commons Attribution 4.0 International License, which permits use, sharing, adaptation, distribution and reproduction in any medium or format, as long as you give appropriate credit to the original author(s) and the source, provide a link to the Creative Commons licence, and indicate if changes were made. The images or other third party material in this article are included in the article's Creative Commons licence, unless indicated otherwise in a credit line to the material. If material is not included in the article's Creative Commons licence and your intended use is not permitted by statutory regulation or exceeds the permitted use, you will need to obtain permission directly from the copyright holder. To view a copy of this licence, visit <http://creativecommons.org/licenses/by/4.0/>.

References

- Al-Dmour, H., Masa'deh, R., Salman, A., Abuhashesh, M., & Al-Dmour, R. (2020). Influence of social media platforms on public health protection against the COVID-19 pandemic via the mediating effects of public health awareness and behavioral changes: Integrated model. *Journal of Medical Internet Research*, 22(8), Article e19996. <https://doi.org/10.2196/19996>
- Boxall, H., Morgan, A., & Brown, R. (2020). *The prevalence of domestic violence among women during the COVID-19 pandemic* (Statistical Bulletin No. 28). Australian Institute of Criminology. <http://www.aic.gov.au/publications/sb/sb28>
- Brennan, E., Schoenaker, D. A. J. M., Dunstone, K., Slater, M. D., Durkin, S. J., Dixon, H. G., Pettigrew, S., & Wakefield, M. A. (2021). Understanding the effectiveness of advertisements about the long-term harms of alcohol and low-risk drinking guidelines: A mediation analysis. *Social Science & Medicine*, 270, Article 113596. <https://doi.org/10.1016/j.socscimed.2020.113596>
- Campbell, J. C., & Manganello, J. (2006). Changing public attitudes as a prevention strategy to reduce intimate partner violence. *Journal of Aggression, Maltreatment & Trauma*, 13(3–4), 13–39. https://doi.org/10.1300/j146v13n03_02
- Cismaru, M., & Lavack, A. M. (2011). Campaigns targeting perpetrators of intimate partner violence. *Trauma, Violence & Abuse*, 12(4), 183–197. <https://doi.org/10.1177/1524838011416376>
- Craik, F. I. M., & Lockhart, R. S. (1972). Levels of processing: A framework for memory research. *Journal of Verbal Learning and Verbal Behavior*, 11, 671–684. [https://doi.org/10.1016/S0022-5371\(72\)80001-X](https://doi.org/10.1016/S0022-5371(72)80001-X)
- De Leon, E., Fuentes, L. W., & Cohen, J. E. (2014). Characterizing periodic messaging interventions across health behaviors and media: Systematic review. *Journal of Medical Internet Research*, 16(3), e93. <https://doi.org/10.2196/jmir.2837>
- Dominguez, J., Truong, J., Burnett, J., Satyen, L., Akhlaghi, H., Stella, J., Rushworth, N., & Caeyenberghs, K. (2023). Effects of the response to the COVID-19 pandemic on assault-related head injury in Melbourne: A retrospective study. *International Journal of Environmental Research and Public Health*, 20(1). <https://doi.org/10.3390/ijerph20010063>. Article 63.
- Farrelly, M. C., Davis, K. C., Haviland, M. L., Messeri, P., & Heaton, C. G. (2005). Evidence of a dose–response relationship between truth antismoking ads and youth smoking prevalence. *American Journal of Public Health*, 95(3), 425–431. <https://doi.org/10.2105/ajph.2004.049692>
- Forsdike, K., Tarzia, L., Flood, M., Vlasis, R., & Hegarty, K. (2021). A lightbulb moment: Using the theory of planned behavior to explore the challenges and opportunities for early engagement of Australian men who use violence in their relationships. *Journal of Interpersonal Violence*, 36(7–8), NP3889–NP3913. <https://doi.org/10.1177/0886260518780778>
- Gadomski, A. M., Tripp, M., Wolff, D. A., Lewis, C., & Jenkins, P. (2001). Impact of a rural domestic violence prevention campaign. *The Journal of Rural Health*, 17(3), 266–277. <https://doi.org/10.1111/j.1748-0361.2001.tb00964.x>
- Keller, S. N., & Honea, J. C. (2016). Navigating the gender minefield: An IPV prevention campaign sheds light on the gender gap. *Global Public Health*, 11(1–2), 187–197. <https://doi.org/10.1080/17441692.2015.1036765>
- Marcus, B. H., Owen, N., Forsyth, L. H., Cavill, N. A., & Fridinger, F. (1998). Physical activity interventions using mass media, print media, and information technology. *American Journal of Preventive Medicine*, 15(4), 362–378. [https://doi.org/10.1016/S0749-3797\(98\)00079-8](https://doi.org/10.1016/S0749-3797(98)00079-8)
- Our Watch. (2020). *No excuse for abuse COVID-19 Relaunch 2020: Interim Evaluation Report*. Ourwatch.org.au.
- Our Watch. (2022). *What we do to prevent violence against women*. Ourwatch.org.au. <https://www.ourwatch.org.au/about-us/what-we-do/>
- Politoff, V., Crabbe, M., Honey, N., Mannix, S., Mickle, J., Morgan, J., Parkes, A., Powell, A., Stubbs, J., Ward, A., & Webster, K. (2019). Young Australians' attitudes to violence against women and gender equality: Findings from the 2017 National Community Attitudes towards Violence against Women Survey (NCAS) (ANROWS Insights, Issue 01/2019). ANROWS.
- Potter, S. J., Moynihan, M. M., Stapleton, J. G., & Banyard, V. L. (2009). Empowering bystanders to prevent campus violence against women. *Violence Against Women*, 15(1), 106–121. <https://doi.org/10.1177/1077801208327482>
- Seiver, J. G., Pires, M., Awan, F., & Thompson, W. (2019). Retention of word pairs as a function of level of processing, instruction to remember and delay. *Journal of Cognitive Psychology*, 31(7), 665–682. <https://doi.org/10.1080/20445911.2019.1664555>
- Skinner, B. F. (1966). What is the experimental analysis of behavior? *Journal of the Experimental Analysis of Behavior*, 9(3), 213–218. <https://doi.org/10.1901/jeab.1966.9-213>
- Satyen, L., Supol, M., Ranganathan, A., & Toumbourou, J. (2021). International and cross-cultural research on men's violence against female intimate partners. In T. K. Shackelford (Ed.), *The SAGE Handbook of Domestic Violence* (pp. 40–60). SAGE Publications Ltd. <https://doi.org/10.4135/9781529742343.n3>
- The Lancet Public Health (2022). *The Lancet Psychiatry Commission on intimate partner violence and mental health: Advancing mental health services, research, and policy*. <https://www.thelancet.com/commissions/intimate-partner-violence>
- Van den Bussche, E., Van den Noortgate, W., & Reynvoet, B. (2009). Mechanisms of masked priming: A meta-analysis. *Psychological Bulletin*, 135, 452–477. <https://doi.org/10.1037/a0015329>
- Wakefield, M. A., Loken, B., & Hornik, R. C. (2010). Use of mass media campaigns to change health behaviour. *Lancet*, 376(9748), 1261–1271. [https://doi.org/10.1016/S0140-6736\(10\)60809-4](https://doi.org/10.1016/S0140-6736(10)60809-4)
- Webster, K., Diemer, K., Honey, N., Mannix, S., Mickle, J., Morgan, J., Parkes, A., Politoff, V., Powell, A., Stubbs, J., & Ward, A. (2018). *Methodology report: Survey redevelopment and implementation of the 2017 National Community Attitudes towards Violence against Women Survey* (NCAS) (ANROWS Insights, 12/2018). Sydney, NSW: ANROWS. <https://anrows.intersearch.com.au/anrowsjsui/handle/1/19860>
- World Health Organization. (2016). *Global plan of action: Health systems address violence against women and girls*. World Health Organization.
- World Health Organization. (2021). *Violence against women prevalence estimates, 2018*. World Health Organization.

Publisher's Note Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.