

BYSTANDER "APATHY"¹

By BIBB LATANÉ and JOHN M. DARLEY

*Do the work that's nearest
Though it's dull at times,
Helping, when you meet them,
Lame dogs over stiles.*

IN THE century since it was written, this minor bit of exhortatory doggerel has become sheer camp. We have become too sophisticated to appreciate the style—many believe that we have become too cynical to appreciate the moral. Working at dull tasks is now taken as a sign of dullness, and helping lame dogs is no longer much in vogue. At least, that is the impression we get from the newspapers.

On a March night in 1964, Kitty Genovese was set upon by a maniac as she came home from work at 3 A.M. Thirty-eight of her Kew Gardens neighbors came to their windows when she cried out in terror—none came to her assistance. Even though her assailant took over half an hour to murder her, no one even so much as called the police.

This story became the journalistic sensation of the decade. "Apathy," cried the newspapers. "Indifference," said the columnists and commentators. "Moral callousness," "dehumanization," "loss of concern for our fellow man," added preachers, professors, and other sermonizers. Movies, television specials, plays, and books explored this incident and many more like it. Americans became concerned about their lack of concern.

But can these epithets be correct? We think not. Although it is unquestionably true that witnesses in such emergencies have often done nothing to save the victims, "apathy," "indifference," and "unconcern" are not entirely accurate descriptions of their reactions. The 38 witnesses to Kitty Genovese's murder did not merely look at the scene once and then ignore it. Instead they continued to stare out their windows at what was going on. Caught, fascinated, distressed, unwilling to act but unable to turn away, their behavior was neither helpful nor heroic; but it was not indifferent or apathetic either.

Actually, it was like crowd behavior in many other emergency situations; car accidents, drownings, fires, and attempted suicides all attract

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substantial numbers of people who watch the drama in helpless fascination without getting directly involved in the action. Are these people alienated and indifferent? Are the rest of us? Obviously not. It seems only yesterday we were being called overconforming. But why, then, don't we act?

There are certainly strong forces leading us to act. Empathy or sympathy, innate or learned, may cause us to share, at least in part, a victim's distress. If intervention were easy, most of us would be willing to relieve our own discomfort by alleviating another's suffering. As Charles Darwin put it some years ago, "As man is a social animal it is almost certain that . . . he would, from an inherited tendency, be willing to defend, in concert with others, his fellow men; and be ready to aid them in any way, which did not interfere too greatly with his own welfare or his own strong desires."

Even if empathy or sympathy were not strong enough to lead us to help in emergencies, there are a variety of social norms which suggest that each of us has a responsibility to each other, and that help is the proper thing to do. "Do unto others as you would have them do unto you," we hear from our earliest years. Although norms such as these may not have much influence on our behavior in specific situations, they may imbue us with a general predisposition to try to help others.

Indeed, in many non-emergency situations, people seem surprisingly willing to share their time and money with others. According to the Internal Revenue Service, Americans contribute staggering sums to a great variety of charitable organizations each year. Even when tax deductions don't fan the urge to help, people still help others. When Columbia students asked 2,500 people on the streets of New York for 10¢ or 20¢, over half of these people gave it.

If people are so willing to help in non-emergency situations, they should be even more willing to help in emergencies when the need is so much greater. Or should they? Emergencies differ in many ways from other types of situations in which people need help, and these differences may be important. The very nature of an emergency implies certain psychological consequences.

Characteristics of Emergencies

Perhaps the most distinctive characteristic of an emergency is that it involves threat or harm. Life, well-being, or property is in danger. Even if an emergency is successfully dealt with, nobody is better off afterwards than before. Except in rare circumstances, the best that can be hoped for if an emergency occurs is a return to the status quo. Consequently, there are few positive rewards for successful action in an emergency. At worst, an emergency can claim the lives not only of those people who were initially involved in it, but also of anybody who inter-

venes in the situation. This fact puts pressures on individuals to ignore a potential emergency, to distort their perceptions of it, or to underestimate their responsibility for coping with it.

The second important feature of an emergency is that it is an unusual and rare event. Fortunately, although he may read about them in newspapers, or watch fictionalized accounts on television, the average person probably will encounter fewer than half a dozen serious emergencies in his lifetime. Unfortunately when he does encounter one, he will have had little direct personal experience in handling such a situation. Unlike the stereotyped patterns of his everyday behavior, an individual facing an emergency is untrained and unrehearsed.

In addition to being rare, emergencies differ widely, one from another. There are few common requirements for action between a drowning, a fire, or an automobile accident. Each emergency presents a different problem, and each requires a different type of action. Consequently, unlike other rare events, our culture provides us with little secondhand wisdom about how to deal with emergencies. An individual may cope with the rare event of a formal dinner party by using manners gleaned from late night Fred Astaire movies, but the stereotypes that the late movies provide for dealing with emergencies are much less accurate. "Charge!" "Women and children first!" "Quick, get lots of hot water and towels." This is about the extent of the advice offered for dealing with emergencies and it is singularly inappropriate in most specific real emergency situations.

The fourth basic characteristic of emergencies is that they are unforeseen. They "emerge," suddenly and without warning. Being unexpected, emergencies must be handled without the benefit of forethought and planning and an individual does not have the opportunity to think through in advance what course of action he should take when faced with an emergency. He must do his thinking in the immediacy of the situation, and has no opportunity to consult others as to the best course of action or to alert others who are especially equipped to deal with emergencies. The individual confronted with an emergency is thrown on his own resources. We have already seen that he does not have much in the way of practiced responses or cultural stereotypes to fall back upon.

A final characteristic of an emergency is that it requires instant action. It represents a pressing necessity. If the emergency is not dealt with immediately, the situation will deteriorate. The threat will transform itself into damage; the harm will continue or spread. There are urgent pressures to deal with the situation at once. The requirement for immediate action prevents the individual confronted with an emergency from leisurely considering the possible courses of action open to him. It forces him to come to a decision before he has had time to consider his alternatives. It places him in a condition of stress.

The picture we have drawn is a rather grim one. Faced with a situation in which there is no benefit to be gained for himself, unable to rely on past experience, on the experience of others, or on forethought and planning, denied the opportunity to consider carefully his course of action, the bystander to an emergency is in an unenviable position. It is perhaps surprising that anyone should intervene at all.

A Model of the Intervention Process

If an individual is to intervene in an emergency, he must make, not just one, but a *series* of decisions. Only one particular set of choices will lead him to take action in the situation. Let us now consider the behavioral and cognitive processes that go on in an individual who is in the vicinity of an emergency. What must he do and decide before he actually intervenes? These may have important implications for predicting whether an individual will act.

Let us suppose that an emergency is actually taking place. A middle-aged man, walking down the street, has a heart attack. He stops short, clutches his chest, and staggers to the nearest building wall, where he slowly slumps to the sidewalk in a sitting position. What is the likelihood with which a passerby will come to his assistance? First, the bystander has to *notice* that something is happening. The external event has to break into his thinking and intrude itself on his conscious mind. He must tear himself away from his private thoughts or from the legs of the pretty girl walking down the street ahead of him and pay attention to this unusual event.

Once the person is aware of the event as something to be explained, it is necessary that he *interpret* the event. Specifically, he must decide that there is something wrong, that this ambiguous event is an emergency. It may be that the man slumped on the sidewalk is only a drunk, beyond any assistance that the passerby can give him. If the bystander decided that something is indeed wrong, he must next decide that he has a *responsibility* to act. Perhaps help is on the way or perhaps someone else might be better qualified to help. Even in an emergency, it is not clear that everybody should immediately intrude himself into the situation.

If the person does decide that he should help, he must decide what *form of assistance* he can give. Should he rush in directly and try to help the victim or should he detour by calling a doctor or the police? Finally, of course, he must decide how to *implement* his choice and form of intervention. Where is the nearest telephone? Is there a hospital nearby? At this point, the person may finally begin to act in the situation. The socially responsible act is the end point of a series of decisions that the person makes.

Obviously, this model is too rational. It seems unlikely that a bystander will run through the series of choice points in a strictly logical

and sequential order. Instead, he may consider two or three of them simultaneously and "try on" various decisions and their consequences before he finally arrives at his overall assessment of the situation. Since he has no commitment to any intermediary decision until he has taken final action, he may cycle back and forth through the decision series until he comes up with a set which serves both his needs and the needs of "reality."

Second, the bystander in an emergency is not a detached and objective observer. His decisions have consequences for himself just as much as for the victim. Unfortunately, however, the rewards and penalties for action and inaction are biased in favor of inaction. All the bystander has to gain from intervention is a feeling of pride and the chance to be a hero. On the other hand, he can be made to appear a fool, sued, or even attacked and wounded. By leaving the situation, he has little to lose but his self-respect. There are strong pressures against deciding that an event is an emergency.

Intervention, then, requires choosing a single course of action through a rather complex matrix of possible actions. The failure to intervene may result from failing to notice an event, failing to realize that the event is an emergency, failing to feel personally responsible for dealing with the emergency, or failing to have sufficient skill to intervene.

Social Determinants of Bystander Intervention, I

Most emergencies are, or at least begin as, ambiguous events. A quarrel in the street may erupt into violence, but it may be simply a family argument. A man staggering about may be suffering a coronary or an onset of diabetes; he may simply be drunk. Smoke pouring from a building may signal a fire; on the other hand, it may be simply steam or airconditioner vapor. Before a bystander is likely to take action in such ambiguous situations, he must first define the event as an emergency and decide that intervention is the proper course of action.

In the course of making these decisions, it is likely that an individual bystander will be considerably influenced by the decisions he perceives other bystanders to be taking. If everyone else in a group of onlookers seems to regard an event as nonserious and the proper course of action as non-intervention, this consensus may strongly affect the perceptions of any single individual and inhibit his potential intervention.

The definitions that other people hold may be discovered by discussing the situation with them, but they may also be inferred from their facial expressions or their behavior. A whistling man with his hands in his pockets obviously does not believe he is in the midst of a crisis. A bystander who does not respond to smoke obviously does not attribute it to fire. An individual, seeing the inaction of others, will judge the situation as less serious than he would if alone.

But why should the others be inactive? Unless there were some force inhibiting responses on the part of others, the kind of social influence process described would, by itself, only lead to a convergence of attitudes within a group. If each individual expressed his true feelings, then, even if each member of the group were entirely guided by the reactions of the others, the group should still respond with a likelihood equal to the average of the individuals.

An additional factor is involved, however. Each member of a group may watch the others, but he is also aware that others are watching him. They are an audience to his own reactions. Among American males, it is considered desirable to appear poised and collected in times of stress. Being exposed to the public view may constrain the actions and expressions of emotion of any individual as he tries to avoid possible ridicule and embarrassment. Even though he may be truly concerned and upset about the plight of a victim, until he decides what to do, he may maintain a calm demeanor.

The constraints involved with being in public might in themselves tend to inhibit action by individuals in a group, but in conjunction with the social influence process described above, they may be expected to have even more powerful effects. If each member of a group is, at the same time, trying to appear calm and also looking around at the other members to gauge their reactions, all members may be led (or misled) by each other to define the situation as less critical than they would if alone. Until someone acts, each person sees only other non-responding bystanders, and is likely to be influenced not to act himself. A state of "pluralistic ignorance" may develop.

It has often been recognized (Brown, 1954, 1965) that a crowd can cause contagion of panic, leading each person in the crowd to over-react to an emergency to the detriment of everyone's welfare. What we suggest here is that a crowd can also force inaction on its members. It can suggest, implicitly but strongly, by its passive behavior that an event is not to be reacted to as an emergency, and it can make any individual uncomfortably aware of what a fool he will look for behaving as if it is.

This line of thought suggests that individuals may be less likely to intervene in an emergency if they witness it in the presence of other people than if they see it alone. It suggests that the presence of other people may lead each person to interpret the situation as less serious, and less demanding of action than he would if alone. The presence of other people may alter each bystander's perceptions and interpretations of the situation. We suspect that the presence of other people may also affect each individual's assessment of the rewards and costs involved in taking action, and indeed we will discuss this possibility in some detail later. First, however, let us look at evidence relevant to this initial process. The experiments reported below were designed to test the line of thought presented above.

Experiment 1. Where There's Smoke, There's (Sometimes) Fire²

In this experiment we presented an emergency to individuals either alone, in the presence of two passive others (confederates of the experimenter who were instructed to notice the emergency but remain indifferent to it), or in groups of three. It was our expectation that individuals faced with the passive reactions of the confederates would be influenced by them and thus less likely to take action than single subjects. We also predicted that the constraints on behavior in public combined with social influence processes would lessen the likelihood that members of three-person groups would act to cope with the emergency.

Male Columbia students living in campus residences were invited to an interview to discuss "some of the problems involved in life at an urban university." As they sat in a small room waiting to be called for the interview and filling out a preliminary questionnaire, they faced an ambiguous but potentially dangerous situation as a stream of smoke began to puff into the room through a wall vent. Some subjects filled out the questionnaire and were exposed to this potentially critical situation while alone. Others were part of three-person groups consisting of one subject and two confederates acting the part of naive subjects. The confederates attempted to avoid conversation as much as possible. Once the smoke had been introduced, they stared at it briefly, made no comment, but simply shrugged their shoulders, returned to the questionnaires and continued to fill them out, occasionally waving away the smoke to do so. If addressed, they attempted to be as uncommunicative as possible and to show apparent indifference to the smoke. "I dunno," they said, and no subject persisted in talking. In a final condition, three naive subjects were tested together. In general, these subjects did not know each other, although in two groups, subjects reported a nodding acquaintance with another subject. Since subjects arrived at slightly different times and since they each had individual questionnaires to work on, they did not introduce themselves to each other, or attempt anything but the most rudimentary conversation.

As soon as the subjects had completed two pages of their questionnaires, the experimenter began to introduce the smoke through a small vent in the wall. The "smoke" was finely divided titanium dioxide produced in a stoppered bottle and delivered under slight air pressure through the vent. It formed a moderately fine-textured but clearly visible stream of whitish smoke. For the entire experimental period, the smoke continued to jet into the room in irregular puffs. By the end of the experimental period, vision was obscured in the room by the amount of smoke present.

² A more detailed report of this experiment is given in: LATANÉ, B. and DARLEY, J. M. Group inhibition of bystander intervention in emergencies. *Journal of Personality and Social Psychology*, 1968, 10, 215-221.

All behavior and conversation was observed and coded from behind a one-way window (largely disguised on the subject's side by a large sign giving preliminary instructions). When and if the subject left the experimental room and reported the smoke, he was told that the situation "would be taken care of." If the subject had not reported the smoke within six minutes of the time he first noticed it, the experiment was terminated.

The typical subject, when tested alone, behaved very reasonably. Usually, shortly after the smoke appeared, he would glance up from his questionnaire, notice the smoke, show a slight but distinct startle reaction, and then undergo a brief period of indecision, and perhaps return briefly to his questionnaire before again staring at the smoke. Soon, most subjects would get up from their chairs, walk over to the vent, and investigate it closely, sniffing the smoke, waving their hands in it, feeling its temperature, etc. The usual Alone subject would hesitate again, but finally walk out of the room, look around outside, and, finding somebody there, calmly report the presence of the smoke. No subject showed any sign of panic; most simply said, "There's something strange going on in there, there seems to be some sort of smoke coming through the wall. . . ." The median subject in the Alone condition had reported the smoke within two minutes of first noticing it. Three-quarters of the 24 people run in this condition reported the smoke before the experimental period was terminated.

The behavior of subjects run with two passive confederates was dramatically different; of ten people run in this condition, only one reported the smoke. The other nine stayed in the waiting room as it filled up with smoke, doggedly working on their questionnaires and waving the fumes away from their faces. They coughed, rubbed their eyes, and opened the window—but they did not report the smoke. The difference between the response rate of 75% in the Alone condition and 10% in the Two Passive Confederates condition is highly significant ($p < .002$ by Fisher's Exact test, two-tailed).

Because there are three subjects present and available to report the smoke in the Three Naive Bystander condition as compared to only one subject at a time in the Alone condition, a simple comparison between the two conditions is not appropriate. On the one hand, we cannot compare speeds in the Alone condition with the average speed of the three subjects in a group, since, once one subject in a group had reported the smoke, the pressures on the other two disappeared. They legitimately could feel that the emergency had been handled, and that any action on their part would be redundant and potentially confusing. Therefore, we used the speed of the *first* subject in a group to report the smoke as our dependent variable. However, since there were three times as many people available to respond in this condition as in the Alone condition,

we would expect an increased likelihood that at least one person would report the smoke by chance alone. Therefore, we mathematically created "groups" of three scores from the Alone condition to serve as a baseline.³

In contrast to the complexity of this procedure, the results were quite simple. Subjects in the Three Naive Bystander condition were markedly inhibited from reporting the smoke. Since 75% of the Alone subjects reported the smoke, we would expect over 98% of the three-person groups to include at least one reporter. In fact, in only 38% of the eight groups in this condition did even one person report ($p < .01$).

twenty-four people run in these eight groups, only one person reported the smoke within the first four minutes before the room got noticeably unpleasant. Only three people reported the smoke within the entire experimental period. Social inhibition of reporting was so strong that the smoke was reported quicker when only one person saw it than when groups of three were present ($p < .01$).

Subjects who had reported the smoke were relatively consistent in later describing their reactions to it. They thought the smoke looked somewhat "strange," they were not sure exactly what it was or whether it was dangerous, but they felt it was unusual enough to justify some examination. "I wasn't sure whether it was a fire, but it looked like something was wrong." "I thought it might be steam, but it seemed like a good idea to check it out."

Subjects who had not reported the smoke also were unsure about exactly what it was, but they uniformly said that they had rejected the idea that it was a fire. Instead, they hit upon an astonishing variety of alternative explanations, all sharing the common characteristic of interpreting the smoke as a nondangerous event. Many thought the smoke was either steam or airconditioning vapors, several thought it was smog, purposely introduced to simulate an urban environment, and two (from different groups) actually suggested that the smoke was a "truth gas" filtered into the room to induce them to answer the questionnaire accurately (surprisingly, they were not disturbed by this conviction). Predictably, some decided that "it must be some sort of experiment" and stoically endured the discomfort of the room rather than overreact.

Despite the obvious and powerful report-inhibiting effect of other bystanders, subjects almost invariably claimed that they had paid little or no attention to the reactions of the other people in the room. Although the presence of other people actually had a strong and pervasive effect on the subjects' reactions, they were either unaware of this or unwilling to admit it.

³ The formula for calculating the expected proportion of groups in which at least one person will have acted by a given time is $1-(1-p)^n$ where p is the proportion of single individuals who act by that time and n is the number of persons in the group.

The results of this study clearly support the predictions. Individuals exposed to a room filling with smoke in the presence of passive others themselves remained passive, and groups of three naive subjects were less likely to report the smoke than solitary bystanders. Our predictions were confirmed—but this does not necessarily mean that our explanation for these results is the correct one. As a matter of fact several alternatives are available.

Two alternative explanations stem from the fact that the smoke represented a possible danger to the subject himself as well as to others in the building. Subjects' behavior might have reflected their fear of fire, with subjects in groups feeling less threatened by the fire than single subjects and thus less concerned to act. It has been demonstrated in studies with humans (Schachter, 1959) and with rats (Latané, 1969; Latané and Glass, 1968) that togetherness reduces fear, even in situations where it does not reduce danger. In addition, subjects may have felt that the presence of others increased their ability to cope with fire. For both these reasons, subjects in groups may have been less afraid of fire and thus less likely to report the smoke than solitary subjects.

A similar explanation might emphasize, not fearfulness, but the desire to hide fear. To the extent that bravery or stoicism in the face of danger or discomfort is a socially desirable trait (as it appears to be for American male undergraduates), we might expect individuals to attempt to appear more brave or more stoic when others are watching than when they are alone. It is possible that subjects in the Group condition saw themselves as engaged in a game of "Chicken," and thus did not react.

Although both of these explanations are plausible, we do not think that they provide an accurate account of subjects' thinking. In the post-experimental interviews, subjects claimed, *not* that they were unworried by the fire or that they were unwilling to endure the danger; but rather that they had decided that there was no fire at all and the smoke was caused by something else. They failed to act because they thought there was no reason to act. Their "apathetic" behavior was reasonable—given their interpretation of the circumstances.

*Experiment 2. A Lady in Distress*⁴

Although it seems unlikely that the group inhibition of bystander intervention observed in Experiment 1 can be attributed entirely to the fact that smoke represents a danger to the individual bystander, it is certainly possible that this is so. Experiment 2 was designed to see whether similar group inhibition effects could be observed in situations where there is no danger to the individual himself for not acting. In

⁴ A more detailed description of this experiment is given in: Latané, B. and Rodin, J. A Lady in distress: Inhibiting effects of friends and strangers on bystander intervention, *Journal of Experimental Social Psychology*, in press.

addition, a new variable was included: whether the bystanders knew each other.

Male Columbia undergraduates waited either alone, with a friend, or with a stranger to participate in a market research study. As they waited, they heard someone fall and apparently injure herself in the room next door. Whether they tried to help, and how long they took to do so were the main dependent variables of the study. Subjects were telephoned and offered \$2 to participate in a survey of game and puzzle preferences conducted at Columbia by the Consumer Testing Bureau (CTB), a market research organization. Each person contacted was asked to find a friend who would also be interested in participating. Only those students who recommended friends, and the friends they suggested, were used as subjects.

Subjects were met at the door by the market research representative, an attractive young woman, and taken to the testing room. On the way, they passed the CTB office and through its open door they were able to see a desk and bookcases piled high with papers and filing cabinets. They entered the adjacent testing room which contained a table and chairs and a variety of games, and they were given a preliminary background information and game preference questionnaire to fill out. The representative told subjects that she would be working next door in her office for about 10 minutes while they completed the questionnaires, and left by opening the collapsible curtain which divided the two rooms. She made sure that subjects were aware that the curtain was unlocked and easily opened and that it provided a means of entry to her office. The representative stayed in her office, shuffling papers, opening drawers, and making enough noise to remind the subjects of her presence. Four minutes after leaving the testing area, she turned on a high fidelity stereophonic tape recorder.

The emergency: If the subject listened carefully, he heard the representative climb up on a chair to reach for a stack of papers on the bookcase. Even if he were not listening carefully, he heard a loud crash and a scream as the chair collapsed and she fell to the floor. "Oh, my God, my foot. . . I . . . can't move. . . it. Oh. . . my ankle," the representative moaned. "I . . . can't get this. . . thing. . . off me." She cried and moaned for about a minute longer, but the cries gradually got more subdued and controlled. Finally, she muttered something about getting outside, knocked over the chair as she pulled herself up, and thumped to the door, closing it behind her as she left. The entire incident took 130 seconds.

The main dependent variable of the study, of course, was whether the subjects took action to help the victim and how long it took him to do so. There were actually several modes of intervention possible: a subject could open the screen dividing the two rooms, leave the testing room and enter the CTB office by the door, find someone else, or, most simply, call out to see if the representative needed help. Four experimental conditions

were run. In one condition (Alone, $n = 26$) each subject was by himself in the testing room while he filled out the questionnaire and heard the fall. In a second condition (Stooge, $n = 14$), a stranger, actually a confederate of the experimenter, was also present. The confederate had instructions to be as passive as possible and to answer questions put to him by the subjects with a brief gesture or remark. During the emergency, he looked up, shrugged his shoulders, and continued working on his questionnaire. Subjects in the third condition (Strangers, $n = 20$ pairs) were placed in the testing room in pairs. Each subject in the pair was unacquainted with the other before entering the room and they were not introduced. Only one subject in this condition spontaneously introduced himself to the other. In a final condition (Friends, $n = 20$ pairs), pairs of friends overheard the incident together.

Mode of intervention: Across all experimental groups, the majority of subjects who intervened did so by pulling back the room divider and coming into the CTB office (61%). Few subjects came the round-about way through the door to offer their assistance (14%), and a surprisingly small number (24%) chose the easy solution of calling out to offer help. No one tried to find someone else to whom to report the accident. Since experimental conditions did not differ in the proportions choosing various modes of intervention, the comparisons below will deal only with the total proportions of subjects offering help.

Alone vs. Stooge conditions: Seventy per cent of all subjects who heard the accident while alone in the waiting room offered to help the victim before she left the room. By contrast the presence of a non-responsive bystander markedly inhibited helping. Only 7% of subjects in the Stooge condition intervened. These subjects seemed upset and confused during the emergency and frequently glanced at the passive confederate who continued working on his questionnaire. The difference between the Alone and Stooge response rates is, of course, highly significant ($p < .001$).

Alone vs. Two Strangers: Since 70% of Alone subjects intervened, we should expect that at least one person in 91% of all two-person groups would offer help if members of a pair had no influence upon each other. In fact, members did influence each other. In only 40% of the groups did even one person offer help to the injured woman. Only 8 subjects of the 40 who were run in this condition intervened. This response rate is significantly below the hypothetical baseline ($p < .001$). Social inhibition of helping was so strong, that the victim was actually aided more quickly when only one person heard her distress than when two did ($p < .01$).

Strangers vs. Stooge: The response rate in the Two Strangers condition appears to be somewhat higher than the 7% rate in the Stooge condition. Making a correction similar to that used for the Alone scores, the expected response rate based on the Stooge condition is 13%. This is

significantly lower than the response rate in the Strangers condition ($p < .05$).

Alone vs. Two Friends: Pairs of friends often talked about the questionnaire before the accident, and sometimes discussed a course of action after the fall. Even so, in only 70% of the pairs did even one person intervene. While, superficially, this appears as high as the Alone condition, there must again be a correction for the fact that twice as many people are free to act. When compared to the 91% hypothetical base rate, friends do inhibit each other from intervening ($p < .10$). They were also slower to intervene than would be expected from the Alone condition ($p < .05$).

Friends vs. Strangers: Although pairs of friends were inhibited from helping when compared to the Alone condition, they were significantly faster to intervene than were pairs of strangers ($p < .01$). The median latency of the first response from pairs of friends was 36 seconds; the median pair of strangers did not respond at all within the arbitrary 130-second duration of the emergency.

Subjects who intervened usually claimed that they did so either because the fall sounded very serious or because they were uncertain what had occurred and felt they should investigate. Many talked about intervention as the "right thing to do" and asserted they would help again in any situation.

Many of the non-interveners also claimed that they were unsure what had happened (59%), but had decided that it was not too serious (46%). A number of subjects reported that they thought other people would or could help (25%), and three said they refrained out of concern for the victim—they did not want to embarrass her. Whether to accept these explanations as reasons or rationalizations is moot—they certainly do not explain the differences among conditions. The important thing to note is that non-interveners did not seem to feel that they had behaved callously or immorally. Their behavior was generally consistent with their interpretation of the situation. Subjects almost uniformly claimed that, in a "real" emergency, they would be among the first to help the victim.

Interestingly, when subjects were asked whether they had been influenced by the presence of action of their coworkers, they were either unwilling or unable to report that they had. Subjects in the passive confederate condition reported, on the average, that they were "very little" influenced by the stooge. Subjects in the Two Strangers condition claimed to have been only "a little bit" influenced by each other, and friends admitted to "moderate" influence. Put another way, only 14%, 30%, and 70% of the subjects in these three conditions admitted to at least a "moderate" degree of influence. These claims, of course, run directly counter to the experimental results, in which friends were the least inhibited and subjects in the Stooge condition most inhibited by the other's actions.

These results strongly replicate the findings of the Smoke study. In both experiments, subjects were less likely to take action if they were in the presence of passive confederates than if they were alone, and in both studies, this effect showed up even when groups of naive subjects were tested together. This congruence of findings from different experimental settings supports the validity and generality of the phenomenon: it also helps rule out a variety of alternative explanations suitable to either situation alone. For example, the possibility that smoke may have represented a threat to the subject's personal safety and that subjects in groups may have had a greater concern to appear "brave" than single subjects does not apply to the present experiment. In the present experiment, non-intervention cannot signify bravery. Comparison of the two experiments also suggests that the absolute number of non-responsive bystanders may not be a critical factor in producing social inhibition of intervention. One passive confederate in the present experiment was as effective as two in the smoke study; pairs of strangers in the present study inhibited each other as much as did trios in the former study.

How can we account for the differential social inhibition caused by friends and strangers? It may be that people are less likely to fear possible embarrassment in front of friends than before strangers, and that friends are less likely to misinterpret each other's inaction than are strangers. If so, social influence should be less likely to lead friends to decide there is no emergency than strangers. When strangers overheard the accident, they seemed noticeably concerned but confused. Attempting to interpret what they had heard and to decide upon a course of action, they often glanced furtively at one another, apparently anxious to discover the other's reaction yet unwilling to meet eyes and betray their own concern. Friends, on the other hand, seemed better able to convey their concern nonverbally, and often discussed the incident and arrived at a mutual plan of action. Although these observations are admittedly impressionistic, they are consistent with other data. During the emergency, a record was kept of whether the bystanders engaged in conversation. Unfortunately, no attempt was made to code the amount or content of what was said, but it is possible to determine if there was any talking at all. Only 29% of subjects attempted any conversation with the stooge; while 60% of the pairs of strangers engaged in some conversation, it was mostly desultory and often unrelated to the accident. Although the latter rate seems higher than the former, it really is not, since there are two people free to initiate a conversation rather than just one. Friends, on the other hand, were somewhat more likely to talk than strangers—85% of the pairs did so. Friends, then, may show less mutual inhibition than strangers because they are less likely to develop a state of "pluralistic ignorance."

These first experiments show that in two, widely different types of

emergency settings, the presence of other people inhibits intervention. Subjects were less likely to report a possible fire when together than alone, and they were less likely to go to the aid of the victim of an accident when others were present. Is this a general effect? Will it apply to all types of emergency? Are there situations in which the presence of other people might actually facilitate bystander intervention? One possible set of circumstances in which we might expect social facilitation of intervention is when an emergency is caused by a villain. People who fail to intervene in real emergencies sometimes claim they were afraid of the consequences of intervention—afraid of direct attack, afraid of later retribution, afraid of having to go to court. In situations involving a villain, even if one person is afraid to take action, the presence of other people as potential risk-sharing allies might embolden him to intervene. Under these circumstances, there might actually be a group facilitation of intervention. To test this possibility, two Columbia undergraduates, Paul Bonnarigo and Malcolm Ross, turned to a life of crime.

Experiment 3. The Case of the Stolen Beer

The Nu-Way Beverage Center in Suffern, New York, is a discount beer store. It sells beer and soda by the case, often to New Jerseyans who cross the state line to find both lowered prices and a lowered legal drinking age. During the spring of 1968 it was the scene of a minor crime wave—within one two-week period, it was robbed 96 times. The robbers followed much the same modus operandi on each occasion. Singly or in a pair, they would enter the store and ask the cashier at the checkout counter "What is the most expensive imported beer that you carry?" The cashier, in cahoots with the robbers, would reply "Lowenbrau. I'll go back and check how much we have." Leaving the robbers in the front of the store, the cashier would disappear into the rear to look for the Lowenbrau. After waiting for a minute, the robbers would pick up a case of beer near the front of the store, remark to nobody in particular, "They'll never miss this," walk out of the front door, put the beer in their car, and drive off. On 46 occasions, one robber carried off the theft; on 46 occasions, two robbers were present.

The robberies were always staged when there were either one or two people in the store, and the timing was arranged so that the one or both customers would be at the checkout counter at the time when the robbers entered. On 46 occasions, one customer was at the checkout counter during the theft; on 46 occasions, two customers were present. Although occasionally the two customers had come in together, more usually they were strangers to each other. Sixty-one per cent of the customers were male, 39% female. Since the checkout counter was about 20 feet from the front door, since the theft itself took less than a minute, and since the robbers were both husky young men, nobody tried directly to prevent

the theft. There were, however, other courses of intervention available.

When the cashier returned from the rear of the store, he went to the checkout counter and resumed waiting on the customers there. After a minute, if nobody had spontaneously mentioned the theft, he casually inquired, "Hey, what happened to that man (those men) who was (were) in here? Did you see him (them) leave?" At this point the customer could either report the theft, say merely that he had seen the man or men leave, or disclaim any knowledge of the event whatsoever. Overall, 20% of the subjects reported the theft spontaneously, and 51% of the remainder reported it upon prompting. Since the results from each criterion followed an identical pattern, we shall indicate only the total proportion of subjects in each condition who reported the theft, whether spontaneously or not.

Results: Whether there were one or two robbers present made little difference. Customers were somewhat but not significantly more likely to report the theft if there were two robbers (69%) than if there was only one (52%). Sex also made no difference; females were as likely to report as males. The number of customers, on the other hand, made a big difference. Thirty-one of the 48 single customers, or 65%, mentioned the theft. From this, we would expect that 87% of the two-person groups would include at least one reporter. In fact, in only 56% of the two-person groups did even one person report the theft ($p < .01$). Social inhibition of reporting was so strong that the theft was actually somewhat (though not significantly) less likely to be reported when two people saw it than when only one did.

In three widely differing situations the same effect has been observed. People are less likely to take a socially responsible action if other people are present than if they are alone. This effect has occurred in a situation involving general danger, in a situation where someone has been the victim of an accident, and in a situation involving one or more villains. The effect holds in real life as well as in the laboratory, and for members of the general population as well as college students. The results of each of these three experiments clearly support the line of theoretical argument advanced earlier. When bystanders to an emergency can see the reactions of other people, and when other people can see their own reactions, each individual may, through a process of social influence, be led to interpret the situation as less serious than he would if he were alone, and consequently be less likely to take action.

Social Determinants of Bystander Intervention, II

So far we have devoted our attention exclusively to one stage of our hypothesized model of the intervention process: noticing the situation and interpreting it. Once an individual has noticed an emergency and interpreted it as being serious, he still has to decide what, if anything, he

will do about it. He must decide that he has a responsibility to help, and that there is some form of assistance that he is in a position to give. He is faced with the choice of whether he himself will intervene. His decision will presumably be made in terms of the rewards and costs of the various alternative courses of action open to him.

In addition to affecting the interpretations that he places on a situation, the presence of other people can also alter the rewards and costs facing an individual bystander. Perhaps most importantly, the presence of other people can alter the cost of not acting. If only one bystander is present at an emergency, he carries all of the responsibility for dealing with it; he will feel all of the guilt for not acting; he will bear all of any blame others may level for non-intervention. If others are present, the onus of responsibility is diffused, and the individual may be more likely to resolve his conflict between intervening and not intervening in favor of the latter alternative.

When only one bystander is present at an emergency, if help is to come it must be from him. Although he may choose to ignore them (out of concern for his personal safety, or desire "not to get involved"), any pressures to intervene focus uniquely on him. When there are several observers present, however, the pressures to intervene do not focus on any one of the observers; instead the responsibility for intervention is shared among all the onlookers and is not unique to any one. As a result, each may be less likely to help.

Potential blame may also be diffused. However much we wish to think that an individual's moral behavior is divorced from considerations of personal punishment or reward, there is both theory and evidence to the contrary. It is perfectly reasonable to assume that, under circumstances of group responsibility for a punishable act, the punishment or blame that accrues to any one individual is often slight or nonexistent.

Finally, if others are known to be present, but their behavior cannot be closely observed, any one bystander may assume that one of the other observers is already taking action to end the emergency. If so, his own intervention would only be redundant—perhaps harmfully or confusingly so. Thus, given the presence of other onlookers whose behavior cannot be observed, any given bystander can rationalize his own inaction by convincing himself that "somebody else must be doing something."

These considerations suggest that, even when bystanders to an emergency cannot see or be influenced by each other, the more bystanders who are present, the less likely any one bystander would be to intervene and provide aid. To test this suggestion, it would be necessary to create an emergency situation in which each subject is blocked from communicating with others to prevent his getting information about their behavior during the emergency. Experiment 4 attempted to fulfill this requirement.

Experiment 4. *A Fit to be Tried*⁵

Procedure: Thirteen male and 104 female students in introductory psychology courses at New York University were recruited to take part in an unspecified experiment as part of their class requirement. When a subject arrived in the laboratory, he was ushered into an individual room from which a communication system would enable him to talk to the other participants (who were actually figments of the tape recorder). Over the intercom, the subject was told that the experimenter was concerned with the kinds of personal problems faced by normal college students in a high-pressure, urban environment, and that he would be asked to participate in a discussion about these problems. To avoid possible embarrassment about discussing personal problems with strangers, the experimenter said, several precautions would be taken. First, subjects would remain anonymous, which was why they had been placed in individual rooms rather than face-to-face. Second, the experimenter would not listen to the initial discussion himself, but would only get the subjects' reactions later by questionnaire.

The plan for the discussion was that each person would talk in turn for two minutes, presenting his problems to the group. Next, each person in turn would comment on what others had said, and finally there would be a free discussion. A mechanical switching device regulated the discussion, switching on only one microphone at a time.

The emergency: The discussion started with the future victim speaking first. He said he found it difficult to get adjusted to New York and to his studies. Very hesitantly and with obvious embarrassment, he mentioned that he was prone to seizures, particularly when studying hard or taking exams. The other people, including the one real subject, took their turns and discussed similar problems (minus the proneness to seizures). The naive subject talked last in the series, after the last prerecorded voice.

When it was again the victim's turn to talk, he made a few relatively calm comments, and then, growing increasingly loud and incoherent, he continued:

I er um I think I I need er if if could er er somebody er er er er er er
give me a little er give me a little help here because er I er I'm er er
h-h-having a a a a real problem er right now and I er if somebody
could help me out it would it would er er s-s-sure be sure be good . . .
because er there er er a cause I er I uh I've got a a one of the er sei----er
er things coming on and and and I could really er use some help so if
somebody would er give me a little h-help uh er-er-er-er-er c-could
somebody er er help er uh uh uh (choking sounds) . . . I'm gonna die
er er I'm . . . gonna die er help er er seizure er (chokes, then quiet).

Portions of these results have been reported in DARLEY, J. M. and LATANÉ, B. Bystander intervention in emergencies: Diffusion of responsibility. *Journal of Personality and Social Psychology*, 1968, 8, 377-383.

The major independent variable of the study was the number of people the subject believed also heard the fit. The subject was led to believe that the discussion group was one of three sizes: a two-person group consisting of himself and the victim; a three-person group consisting of himself, the victim and one other person; or a six-person group consisting of himself, the victim, and four other persons.

Varying the kind of bystanders present at an emergency as well as the number of bystanders should also vary the amount of responsibility felt by any single bystander. To test this, several variations of the three-person group were run. In one three-person condition, the other bystander was a female; in another, a male; and in a third, a male who said that he was a premedical student who occasionally worked in the emergency wards at Bellevue Hospital.

Subjects in the above conditions were female college students. To test whether there are sex differences in the likelihood of helping, males drawn from the same subject pool were tested in the three-person, female bystander condition.

Two final experimental variations concerned acquaintanceship relationships between the subject and other bystanders and between the subject and the victim. In one of these conditions, female subjects were tested in the three-person condition, but were tested with a friend that they had been asked to bring with them to the laboratory. In another, subjects were given prior contact with the victim before being run in the six-person group. Subjects underwent a very brief "accidental" encounter with an experimental confederate posing as the future victim. The two met for about a minute in the hall before the experiment began. During this time, they chatted about topics having nothing to do with the experiment.

The major dependent variable of the experiment was the time elapsed from the start of the victim's seizure until the subject left her experimental cubicle. When the subject left her room, she saw the experiment's assistant seated at the end of the hall, and invariably went to the assistant to report the seizure. If six minutes elapsed without the subject's having emerged from her room, the experiment was terminated.

Ninety-five per cent of all the subjects who ever responded did so within the first half of the time available to them. No subject who had not reported within three minutes after the fit ever did so. This suggests that even had the experiment been allowed to run for a considerably longer period of time, few additional subjects would have responded.

Eighty-five per cent of the subjects who thought they alone knew of the victim's plight reported the seizure before the victim was cut off; only 31% of those who thought four other bystanders were present did so. Every one of the subjects in the two-person condition, but only 62% of the subjects in the six-person condition ever reported the emergency. To

do a more detailed analysis of the results, each subject's time score was transformed into a "speed" score by taking the reciprocal of the response time in seconds and multiplying by 100. Analysis of variance of these speed scores indicates that the effect of group size was highly significant ($p < .01$), and all three groups differed significantly one from another ($p < .05$).

Effect of group composition and sex of the subject: Several variations of the three-person group were run. In one pair of variations, the female subject thought the other bystander was either male or female, in another, she thought the other bystander was a premedical student who worked in the emergency ward at Bellevue Hospital. These variations in the sex and medical competence of the other bystander had no important or detectable effect on speed of response. Subjects responded equally frequently and fast whether the other bystander was female, male, or medically experienced.

Coping with emergencies is often thought to be the duty of males, especially when there are females present, but there was no evidence that this is the case in this study. Male subjects responded to the emergency with almost exactly the same speed as did females.

Effects of friendship and prior acquaintance: Friends responded considerably differently from strangers in the three-person condition. When two friends were each aware of the victim's distress, even though they could not see or be seen by each other, they responded significantly faster than subjects in the other three-person groups. In fact, the average speed of response by subjects who thought their friend was also present was not noticeably different from the average speed of response in the two-person condition, where subjects believed that they alone were aware of the emergency. This suggests that responsibility does not diffuse across friends.

The effects of prior acquaintance with the victim were also strong. Subjects who had met the victim, even though only for less than a minute, were significantly faster to report his distress than other subjects in the six-person condition. Subjects in this condition later discussed their reactions to the situation. Unlike subjects in any other group, some of those who had accidentally met the victim-to-be later reported that they had actually *pictured* him in the grip of the seizure. Apparently, the ability to *visualize* a specific, concrete, distressed individual increases the likelihood of helping that person.

Subjects, whether or not they intervened, believed the fit to be genuine and serious. "My God, he's having a fit," many subjects said to themselves (and we overheard via their microphones). Others gasped or simply said, "Oh." Several of the male subjects swore. One subject said to herself, "It's just my kind of luck, something has to happen to me!"

Several subjects spoke aloud of their confusion about what course of action to take: "Oh, God, what should I do?"

When those subjects who intervened stepped out of their rooms, they found the experiment's assistant down the hall. With some uncertainty but without panic, they reported the situation. "Hey, I think Number 1 is very sick. He's having a fit or something." After ostensibly checking on the situation, the experimenter returned to report that "everything is under control." The subjects accepted these assurances with obvious relief.

Subjects who failed to report the emergency showed few signs of the apathy and indifference thought to characterize "unresponsive bystanders." When the experimenter entered her room to terminate the situation, the subject often asked if the victim were all right. "Is he being taken care of?" "He's all right, isn't he?" Many of these subjects showed physical signs of nervousness; they often had trembling hands and sweating palms. If anything, they seemed more emotionally aroused than did the subjects who reported the emergency.

Why, then, didn't they respond? It is not our impression that they had decided *not* to respond. Rather, they were still in a state of indecision and conflict concerning whether to respond or not. The emotional behavior of these non-responding subjects was a sign of their continuing conflict; a conflict that other subjects resolved by responding.

The fit created a conflict situation of the avoidance-avoidance type. On the one hand, subjects worried about the guilt and shame they would feel if they did not help the person in distress. On the other hand, they were concerned not to make fools of themselves by overreacting, not to ruin the ongoing experiment by leaving their intercoms and not to destroy the anonymous nature of the situation, which the experimenter had earlier stressed as important. For subjects in the two-person condition, the obvious distress of the victim and his need for help were so important that their conflict was easily resolved. For the subjects who knew that there were other bystanders present, the cost of not helping was reduced and the conflict they were in was more acute. Caught between the two negative alternatives of letting the victim continue to suffer, or the costs of rushing in to help, the non-responding bystanders vacillated between them rather than choosing not to respond. This distinction may be academic for the victim, since he got no help in either case, but it is an extremely important one for understanding the causes of bystander's failures to help.

Although the subjects experienced stress and conflict during the emergency, their general reactions to it were highly positive. On a questionnaire administered after the experimenter had discussed the nature and purpose of the experiment, every single subject found the experiment either "interesting" or "very interesting" and was willing to participate

in similar experiments in the future. All subjects felt they understood what the experiment was all about and indicated they thought the deceptions were necessary and justified. All but one felt they were better informed about the nature of psychological research in general.

We asked all subjects whether the presence or absence of other bystanders had entered their minds during the time that they were hearing the seizure. We asked the question every way we knew how: subtly, directly, tactfully, bluntly, and the answer was always the same. Subjects had been aware of the presence of other bystanders in the appropriate conditions, but they did not feel that they had been influenced in any way by their presence. As in our previous experiments, this denial occurred in the face of results showing that the presence of others did affect helping.

Social Determinants of Bystander Intervention, III

We have suggested two distinct processes which might lead people to be less likely to intervene in an emergency if there are other people present than if they are alone. On the one hand, we have suggested that the presence of other people may affect the interpretations each bystander puts on an ambiguous emergency situation. If other people are present at an emergency, each bystander will be guided by their apparent reactions in formulating his own impressions. Unfortunately, their apparent reactions may not be a good indication of their true feelings. It is possible for a state of "pluralistic ignorance" to develop, in which each bystander is led by the *apparent* lack of concern of the others to interpret the situation as being less serious than he would if alone. To the extent that he does not feel the situation is an emergency, of course, he will be unlikely to take any helpful action.

Even if an individual does decide that an emergency is actually in process and that something ought to be done, he still is faced with the choice of whether he himself will intervene. Here again, the presence of other people may influence him—by reducing the costs associated with non-intervention. If a number of people witness the same event, the responsibility for action is diffused, and each may feel less necessity to help.

Both the "social influence" and the "diffusion of responsibility" explanations seem valid, and there is no reason why both should not be jointly operative. Neither alone can account for all the data. For example, the diffusion explanation cannot account for the significant difference in response rate between the Strangers and Stooze conditions in Experiment 2. There should be equal diffusion in either case. This difference can more plausibly be attributed to the fact that strangers typically did not show such complete indifference to the accident as did the stooze. The diffusion process also does not seem applicable to the results of Experi-

ment 1. Responsibility for protecting oneself from fire should not diffuse. On the other hand, "social influence" processes cannot account for results in Experiment 4. Subjects in that experiment could not communicate with each other and thus could not be influenced by each other's reactions.

Although both processes probably operate, they may not do so at the same time. To the extent that social influence leads an individual to define the situation as non-serious and not requiring action, his responsibility is eliminated, making diffusion unnecessary. Only if social influence is unavailable or unsuccessful in leading subjects to misinterpret a situation, should diffusion play a role. Indirect evidence supporting this analysis comes from observation of non-intervening subjects in the various emergency settings. In settings involving face-to-face contact, as in Experiments 1 and 2, non-interveners typically redefined the situation and did not see it as a serious emergency. Consequently, they avoided the moral choice of whether or not to take action. During the post-experimental interviews, subjects in these experiments seemed relaxed and assured. They felt they had behaved reasonably and properly. In Experiment 4, on the other hand, face-to-face contact was prevented, social influence could not help subjects define the situation as non-serious, and they were faced with the moral dilemma of whether to intervene. Although the imagined presence of other people led many subjects to delay intervention, their conflict was exhibited in the post-experimental interviews. If anything, subjects who did not intervene seemed more emotionally aroused than did subjects who reported the emergency.

The results of these experiments suggest that social inhibition effects may be rather general over a wide variety of emergency situations. In four different experiments, bystanders have been less likely to intervene if other bystanders are present. The nature of the other bystander seems to be important: a non-reactive confederate provides the most inhibition, a stranger provides a moderate amount, and a friend, the least. Overall, the results are consistent with a multiprocess model of intervention; the effect of other people seems to be mediated both through the interpretations that bystanders place on the situation, and through the decisions they make once they have come up with an interpretation.

"There's safety in numbers," according to an old adage, and modern city dwellers seem to believe it. They shun deserted streets, empty subway cars, and lonely walks in dark parks, preferring instead to go where others are or to stay at home. When faced with stress, most individuals seem less afraid when they are in the presence of others than when they are alone. Dogs are less likely to yelp when they face a strange situation with other dogs; even rats are less likely to defecate and freeze when they are placed in a frightening open field with other rats.

A feeling so widely shared should have some basis in reality. Is there

safety in numbers? If so, why? Two reasons are often suggested: Individuals are less likely to find themselves in trouble if there are others about, and even if they do find themselves in trouble, others are likely to help them deal with it. While it is certainly true that a victim is unlikely to receive help if nobody knows of his plight, the experiments above cast doubt on the suggestion that he will be more likely to receive help if more people are present. In fact, the opposite seems to be true. A victim may be more likely to get help, or an emergency be reported, the fewer people who are available to take action.

Although the results of these studies may shake our faith in "safety in numbers," they also may help us begin to understand a number of frightening incidents where crowds have listened to, but not answered, a call for help. Newspapers have tagged these incidents with the label "apathy." We have become indifferent, they say, callous to the fate of suffering others. Our society has become "dehumanized" as it has become urbanized. These glib phrases may contain some truth, since startling cases such as the Genovese murder often seem to occur in our large cities, but such terms may also be misleading. Our studies suggest a different conclusion. They suggest that situational factors, specifically factors involving the immediate social environment, may be of greater importance in determining an individual's reaction to an emergency than such vague cultural or personality concepts as "apathy" or "alienation due to urbanization." They suggest that the failure to intervene may be better understood by knowing the relationship among bystanders rather than that between a bystander and the victim.

Our results may explain why the failure to intervene seems to be more characteristic of large cities than rural areas. Bystanders to urban emergencies are more likely to be, or at least to think they are, in the presence of other bystanders than witnesses of non-urban emergencies. Bystanders to urban emergencies are less likely to know each other or to know the victim than are witnesses of non-urban emergencies. When an emergency occurs in a large city, a crowd is likely to gather; the crowd members are likely to be strangers; and it is likely that no one will be acquainted with the victim. These are exactly the conditions that made the helping response least likely in our experiments.

In a less sophisticated era, Rudyard Kipling prayed "That we, with Thee, may walk uncowed by fear or favor of the crowd; that, under Thee, we may possess man's strength to comfort man's distress." It appears that the latter hope may depend to a surprising extent upon the former.

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