



PREVENTING INTIMATE PARTNER & SEXUAL VIOLENCE

PROGRAM ACTIVITIES GUIDE

Preventing Intimate Partner & Sexual Violence

The Facts

Intimate partner violence is actual or threatened physical, sexual, psychological, or emotional abuse by a current or former spouse (including common-law spouse), dating partner, or boyfriend or girlfriend. Intimate partners can be of the same or opposite sex.

Sexual violence is a completed or attempted sex act against the victim's will or involving a victim who is unable to consent; abusive sexual contact; and non-contact sexual abuse, including sexual harassment. It is committed by an intimate or non-intimate perpetrator such as a spouse, family member, friend, person in position of power or trust, acquaintance, or stranger. Although there is some overlap between intimate partner violence and sexual violence, the latter is committed by a wider range of perpetrators.

Victims of intimate partner and sexual violence can experience physical injury; mental health consequences such as depression, anxiety, low self-esteem, and suicide attempts; and other health consequences such as gastrointestinal disorders, substance abuse, sexually transmitted diseases, and gynecological or pregnancy complications. These consequences can lead to hospitalization, disability, or death. Women experience more chronic and injurious assaults from intimate partner violence than men.

According to findings from the National Violence Against Women Survey published in 2000:

- Each year, women experience about 4.8 million intimate partner related physical assaults and rapes. Men are the victims of about 2.9 million intimate partner related physical assaults.
- Nearly two-thirds of women who reported being raped, physically assaulted, or stalked since age 18 were victimized by a current or former husband, cohabiting partner, boyfriend, or date.
- In the United States, 1 in 6 women and 1 in 33 men reported experiencing an attempted or completed rape at some time in their lives.
- More than half of all rapes of females occur before age 18, and of these, 22% occur before age 12.

CDC's Role

CDC's violence prevention activities are guided by four key principles:

- *An emphasis on primary prevention of violence perpetration.* CDC emphasizes efforts that prevent violence before it occurs. CDC focuses on reducing the factors that put people at risk for perpetration while increasing the factors that protect people from becoming perpetrators of violence.
- *A commitment to a rigorous science base.* Monitoring and tracking trends; researching risk and protective factors; rigorously evaluating prevention strategies, programs and policies; and learning how best to implement them adds to the base of what is known about violence and how to prevent it.
- *A cross-cutting perspective.* Public health encompasses many disciplines and perspectives, making its approach well-suited for examining and addressing multifaceted problems like violence.
- *A population approach.* Part of public health's broad view is an emphasis on population health and not just the health of individuals. Violence is experienced acutely by individuals but its consequences and potential solutions affect society in general.

CDC's strategic direction for intimate partner violence prevention is promoting respectful, nonviolent intimate partner relationships through individual, community, and societal change. Additional information about CDC's programs and activities to prevent intimate partner and sexual violence is available at www.cdc.gov/violenceprevention.

Key Partners

Preventing intimate partner and sexual violence requires the support and contributions of many partners: federal agencies, state and local health departments, nonprofit organizations, academic institutions, international agencies, and private industry. Partners help in a variety of ways, including collecting data about violence, learning about risk factors, developing strategies for prevention, and ensuring that effective prevention approaches reach those in need.

Monitoring, Tracking, and Researching the Problem

Measuring the Incidence and Prevalence of Intimate Partner Violence and Sexual Violence

CDC supported two optional modules on intimate partner violence and sexual violence for inclusion in the 2005, 2006, and 2007 Behavioral Risk Factor Surveillance System (BRFSS). The intimate partner violence module included seven questions and the sexual violence module included eight questions. State-level statistics on the prevalence of intimate partner violence and sexual violence enabled participating state health officials and policy makers to better understand the magnitude of the problems in their state and provided information that may be used to guide policy development and evaluation.

National Intimate Partner and Sexual Violence Surveillance System

CDC developed the National Intimate Partner and Sexual Violence Surveillance System (NISVSS) in collaboration with the National Institute of Justice and the U.S. Department of Defense. Beginning in 2010, NISVSS will provide national and state-level data, producing frequent, consistent, and reliable information on the magnitude and nature of intimate partner violence, sexual violence and stalking. Using consistent definitions and survey methods over time, NISVSS will provide improved prevalence of lifetime and 12-month estimates to monitor trends and to guide and evaluate intervention and prevention efforts.

National Electronic Injury Surveillance System—All Injury Program

The National Electronic Injury Surveillance System – All Injury Program (NEISS-AIP) is operated by the U.S. Consumer Product Safety Commission in collaboration with the National Center for Injury Prevention and Control. It provides nationally-representative data about all types and causes of nonfatal injuries treated in U.S. hospital emergency departments. CDC uses NEISS-AIP data to generate national estimates of nonfatal injuries, including those related to intimate partner violence and sexual violence.

National Violent Death Reporting System

State and local agencies have detailed information from medical examiners, coroners, police, crime labs, and death certificates that could answer important, fundamental questions about trends and patterns in violence. However, the information is fragmented and difficult to access. Eighteen states are currently part of the National Violent Death Reporting System (NVDRS)—Alaska, Colorado, Georgia, Kentucky, Maryland, Massachusetts, Michigan, New Jersey, New Mexico, North Carolina, Ohio, Oklahoma, Oregon, Rhode Island, South Carolina, Utah, Virginia, and Wisconsin. These states gather, share, and link state-level data about violence. NVDRS enables CDC and states to access vital, state-level information to gain a more accurate understanding of the problem of violence. This will enable policy makers and community leaders to make informed decisions about violence prevention strategies and programs, including those that address intimate partner and sexual violence.

A Study of Minority Women’s Experiences of Sexual Violence

CDC is using a comprehensive sexual violence survey instrument to learn more about sexual violence victimization prevalence, characteristics, circumstances, and help-seeking behavior among English- and/or Spanish-speaking adults from different racial/ethnic minority populations. The findings from this study will provide important information about the incidence, type, frequency, characteristics, and context of sexual violence in American Indian, Hispanic, and African American communities. Currently, we know very little about sexual violence in these communities.

Assessing Links Between Various Forms of Violence

CDC is examining the links between different forms of interpersonal and self-directed violent behaviors among adolescents. More than 4,000 students were surveyed for the study in 2004. Data are helping scientists understand the prevalence and consequences of different types of aggressive behaviors; the association between dating violence and other forms of peer violence; and the manner in which these types of violent behaviors vary by sex, developmental stage, and other factors.

Intimate Partner Violence Perpetration Study

CDC is studying how issues of power and control contribute to the development of intimate partner violence perpetration. Results of the study will help scientists determine the best way to prevent perpetration. Information was collected from January 2005 through April 2006 from male batterers in a court-mandated treatment program to identify factors that lead to intimate partner violence perpetration. Data analyses are currently underway.

Development and Intergenerational Paths to Partner Violence and Child Maltreatment

Researchers for the University of Colorado at Boulder are examining intimate partner violence and child maltreatment in a longitudinal, intergenerational context. The core objective of the CDC-funded study is to identify the developmental pathways and social circumstances that lead to perpetration and to identify protective factors that generate resilience in the face of risk.

Roots of Sexual Abuse

CDC is funding researchers at the University of Minnesota to examine the factors that distinguish sexual abuse perpetration from delinquent behavior. The study will focus on male adolescents and their caregivers. A major obstacle to developing prevention programs for child sexual abuse is lack of information about its causes and correlates, especially in young offenders.

Perpetration of Partner Violence Among Adolescents from Violent Homes

CDC is funding researchers at Southern Methodist University to explore partner violence among adolescents exposed to violence at home. Findings will offer insight into risk and protective factors of adolescent partner violence and inform the development of targeted prevention programs for adolescents from violent homes.

Etiologic Frameworks to Prevent Gender Based Violence Among Immigrant Latinos

CDC is funding George Washington University School of Public Health and Health Services to examine the etiology of gender-related violence among immigrant Latino populations. Working with the SAFER Latinos project, researchers are assessing the community problem solving capacity in an immigrant Latino neighborhood, identifying gaps in available prevention programming, and developing an etiological model and best practices approach that can provide the foundation for a community-based intervention.

Mapping Etiological Pathways to Sexual Violence Perpetration from Childhood to Young Adulthood

CDC is funding Internet Solutions for Kids, Inc. to extend the follow-up of the Growing Up with Media cohort. Growing Up with Media is a national, longitudinal survey of adolescents designed to identify the associations between exposure to violence in new media and the subsequent expression of seriously violent behavior. Findings from the extended study will provide insight into the etiology of sexual violence perpetration as youth transition from adolescence into adulthood.

Understanding Risk and Protective Factors for Sexual Violence Perpetration and the Overlap with Bullying Behavior

CDC is conducting a study to examine the association between bullying experiences and co-occurring and subsequent sexual violence among middle school students to inform sexual violence prevention strategies for schools. The study explores the risk and protective factors of bullying and sexual violence and examines the ways adolescent behavior is shaped by family, peers, and school environments. Approximately 3,500 middle school students in 140 classrooms across two school districts are participating.

Developing and Evaluating Prevention Strategies

Choose Respect

CDC's Choose Respect initiative is a national effort to help youth form healthy relationships to prevent dating abuse before it starts. Choose Respect provides information and educational tools to challenge harmful beliefs about unhealthy relationship behaviors and to reinforce positive attitudes about respectful relationships. The initiative targets adolescents ages 11 to 14 and also connects with parents, teachers, youth leaders and other caregivers who influence the lives of young teens.

Teen Dating Violence Initiative

CDC is developing a teen dating violence initiative to implement and evaluate a comprehensive approach to promoting respectful, nonviolent dating relationships. The initiative will target 11 to 14 year olds in high-risk, urban communities. An overall goal of the initiative is to create community environments that foster and support healthy adolescent relationships.

Enhancing and Making Programs Work to End Rape (EMPOWER)

The EMPOWER project began in 2005 as a three-year prevention planning, implementation and evaluation capacity building project supporting Colorado, Massachusetts, North Carolina, North Dakota, Kentucky, and New Jersey. Using an empowerment evaluation approach, CDC works intensively with states to build individual and sexual violence prevention system capacity and to develop program planning, implementation, evaluation and sustainability tools and training. The six states are developing statewide sexual violence prevention plans and will be implementing and evaluating the plans.

Effectiveness and Implementation Trial of the Safe Dates Program

CDC is evaluating the intervention effectiveness, economic cost, and implementation of Safe Dates, a school-based adolescent dating violence prevention program aimed at preventing violence perpetration and victimization. Scientists are evaluating the effectiveness of Safe Dates with a diverse group of adolescents, as well as gathering information about the conditions under which the program can be implemented in new settings or with new populations most effectively and efficiently.

Preventing Sexual and Intimate Partner Violence within Racial/Ethnic Minority Communities

CDC is working with the Migrant Clinicians Network and the National Indian Justice Center to build organizational capacity and develop a program model that is culturally relevant and focused on engaging men and boys in the primary prevention of sexual violence and intimate partner violence. The aim of this initiative is to promote change in men's knowledge, attitudes, beliefs, and behaviors that support or allow violence against women. The grantees are developing, pilot testing, and evaluating prevention strategies within their communities.

Effectiveness of Screening for Intimate Partner Violence in Primary Care

CDC is working with the Research Collaborative Unit of John H. Stroger Hospital in Chicago to conduct a randomized controlled trial to establish the impact of screening for intimate partner violence on health and quality of life. The pilot test for this study has been completed and the full study has begun enrolling participants.

Evaluation of a Workplace Program for Victims of Partner Violence

CDC is evaluating the manager training portion of a workplace program for victims of partner violence. The training consists of raising awareness about intimate partner violence, recognizing signs of violence, and dealing with employees who may experience intimate partner violence.

Family-based Prevention of Conduct Problems to Prevent Intimate Partner Violence Development

Researchers from the John Jay College of Criminal Justice are examining the impact of a family-based intervention aimed at children with early conduct problems. Early conduct problems have been identified as one of the most robust risk factors for intimate partner violence. Findings from the CDC-funded study may inform a novel approach to preventing intimate partner violence in youth who would be most resistant to standard interventions when they reach adolescence.

Dyadic, Skills Based Primary Prevention for Partner Violence in Perinatal Parents

Researchers from the State University of New York at Stony Brook are conducting trials to determine the outcomes of Couple CARE for Parents, a program that addresses interpersonal processes and promotes relationship skills. The CDC-funded project aims to identify factors that may reduce intimate partner violence such as communication skills, conflict behaviors, parenting expectations, and parenting stress.

Telephone Care Management to Prevent Further Intimate Partner Violence

CDC is funding researchers from the Children's Research Institute to investigate the acceptability, safety, efficacy, and cost of Telephone Care Management (TCM) intervention to prevent further intimate partner violence. TCM provides women who have reported violence with education, referral assistance, and problem solving for common barriers to receiving advocacy services.

Green Dot Across the Bluegrass: Evaluation of a Primary Prevention Intervention

CDC is working with researchers from the University of Texas to evaluate the Green Dot program, a statewide bystander intervention program for the primary prevention of sexual violence. Green Dot empowers students to actively question peer support for sexual violence and to become agents for change. The evaluation will be conducted in Kentucky high schools.

Multi-site Evaluation of Second Step: Student Success Through Prevention

CDC is working with researchers from the University of Illinois to conduct an evaluation of the Second Step:

Student Success Through Prevention program, a middle school intervention targeting the shared risk and protective factors for bullying, sexual harassment, and dating aggression. Sixth graders from 32 schools in Illinois and Kansas are participating.

A Randomized Controlled Trial of an Adolescent Perpetration Prevention Program

CDC is funding researchers from the University of California, Davis to examine the effectiveness of a primary prevention program for intimate partner violence and sexual assault. The Coaching Boys into Men program aims to reduce perpetration and promote bystander intervention by engaging coaches as positive role models to high school age male athletes. Male athletes in 14 large urban high schools are participating.

PTSD Focused Relationship Enhancement Therapy for Returning Veterans

CDC is funding Boston Veterans Affairs Research Institute to develop and test a couples-based, group intervention for married or partnered Operation Enduring Freedom / Operation Iraqi Freedom veterans to prevent the perpetration of intimate partner violence. The program will incorporate components of several interventions for post traumatic stress disorder and intimate partner violence.

Enhancing Bystander Efficacy to Prevent Sexual Violence: Extending Primary Prevention to First Year College Students

Researchers at the University of New Hampshire are implementing and evaluating a bystander approach to preventing sexual violence. The CDC-funded study includes a multi-session prevention program and a social marketing campaign. Approximately 700 participants from two college campuses are participating.

Supporting and Enhancing Prevention Programs

Domestic Violence Prevention Enhancement and Leadership Through Alliances (DELTA)

CDC is funding 14 state domestic violence coalitions to implement and evaluate prevention strategies that can be integrated into Coordinated Community Responses (CCRs) or similar community-based collaborations. The DELTA Program adds a significant primary prevention focus to the existing CCR model by funding state domestic violence coalitions that act as intermediary

organizations, providing prevention-focused technical assistance, training, and funding to local communities. Funded state coalitions are Alaska, California, Delaware, Florida, Kansas, Michigan, Montana, New York, North Carolina, North Dakota, Ohio, Rhode Island, Virginia, and Wisconsin. CDC is also funding an evaluation of the DELTA project that assesses the DELTA Program's success in building capacity to implement and evaluate primary prevention strategies throughout each funded state and within funded CCRs.

DELTA-PREP Program

Building on the successes of the DELTA Program, CDC, in collaboration with the CDC Foundation and the Robert Wood Johnson Foundation, has developed the DELTA-PREP Program to provide training, technical assistance, and funding to non-DELTA state domestic violence coalitions that are ready to build their capacity to prevent intimate partner violence. Through training, technical assistance, and coaching from current DELTA Program grantees, DELTA-PREP coalitions will begin integrating primary prevention concepts and principles within their daily practice and promoting primary prevention with state and local partners.

Rape Prevention and Education (RPE) Program

CDC administers and provides technical assistance for the Rape Prevention and Education (RPE) Grant program to help health departments and sexual assault coalitions more effectively use funds provided through the Violence Against Women Act. The funding—designed to enable states to educate communities about sexual violence and develop prevention programs—supports educational seminars, hotlines, training programs for professionals, the development of informational materials, and special programs for underserved communities. Through RPE, states and territories have strengthened their infrastructure to address sexual violence and to implement prevention and education programs.

Providing Prevention Resources

National Sexual Violence Resource Center

The National Sexual Violence Resource Center (NSVRC) identifies and disseminates information, resources, and research on all aspects of sexual violence prevention and intervention. Staff provide customized technical assistance, collaborate with other national and local organizations, and specialize in offering resources for underserved communities. Additional activities include coordinating national sexual assault awareness activities; identifying emerging policy issues and research needs; issuing a biannual newsletter; and recommending speakers and trainers. The NSVRC website features links to resources, including information about conferences, funding, jobs, research, and special events. The Center serves state sexual assault coalitions, rape crisis centers, government agencies, U.S. Territories and tribal entities, colleges and universities, service providers, researchers, allied organizations, policymakers, media, and the public. The NSVRC is a project of the Pennsylvania Coalition Against Rape.

www.nsvrc.org
1-877-739-3895

Prevention Connection

Prevention Connection: The Violence Against Women Prevention Partnership integrates web-based technology and promotes web conferences to build the capacity of local, state, national, and tribal agencies and organizations to develop, implement, and evaluate effective vio-

lence against women prevention initiatives. Prevention Connection provides a vehicle for ongoing analysis and discussion of domestic and sexual violence prevention efforts. Online forums feature a variety of prevention experts who explore and discuss approaches and comprehensive solutions to domestic and sexual violence. Prevention Connection is a project of the California Coalition Against Sexual Assault.

www.preventconnect.org
916-446-2520

Violence Against Women Electronic Network

The National Online Resource Center on Violence Against Women (VAWnet) provides support for the development, implementation, and maintenance of effective violence against women intervention and prevention efforts at national, state, and local levels. VAWnet provides a collection of full-text, searchable electronic resources on intimate partner violence and related issues to state domestic violence coalitions, allied organizations, and the public. It offers useful links; monitors news coverage of violence against women issues; provides calendars of trainings, conferences, and grant deadlines; presents interpretations of current research; and provides information about Domestic Violence Awareness Month. VAWnet is a project of the Pennsylvania Coalition Against Domestic Violence.

www.vawnet.org
1-800-537-2238

Key Publications

Uniform Definitions and Recommended Data Elements

In 1999, CDC published *Intimate Partner Violence Surveillance: Uniform Definitions and Recommended Data Elements* to improve and standardize data collected on intimate partner violence. Similar standards for sexual violence, *Sexual Violence Surveillance: Uniform Definitions and Recommended Data Elements*, were published in 2002. Uniform definitions and recommended data elements are important because they provide consistency in the use of terminology and standardization in data collection. Consistent data allow researchers to better gauge the scope of the problem, identify high-risk groups, and monitor the effects of prevention programs.

Screening Inventory for Use in Health Care Settings

Intimate Partner Violence and Sexual Violence Victimization Assessment Instruments for Use in Healthcare Settings is a compilation of existing tools for assessing intimate partner violence and sexual violence victimization in clinical/healthcare settings. The compilation provides practitioners and clinicians with the most current inventory of assessment tools and informs decisions about which instruments are most appropriate for use with a given population.

Compendium of Assessment Tools for Victimization and Perpetration

Measuring Intimate Partner Violence Victimization and Perpetration: A Compendium of Assessment Tools provides researchers and prevention specialists with a set of assessment tools with demonstrated reliability and validity for measuring the self-reported incidence and prevalence of intimate partner violence victimization and perpetration. The information can help researchers and practitioners make informed decisions when choosing scales to use in their work.

Preventing Child Sexual Abuse Within Organizations Serving Children and Youth

CDC has developed *Preventing Child Sexual Abuse Within Youth-serving Organizations: Getting Started on Policies and Procedures* to assist youth-serving organizations as they begin to adopt prevention strategies for child sexual abuse. The guide identifies six key components of child sexual abuse prevention for organizations and includes prevention goals and critical strategies for each component.

Evaluation Guide for Prevention Programs

The *Sexual and Intimate Partner Violence Prevention Programs Evaluation Guide* presents an overview of the importance of evaluation and provides evaluation approaches and strategies that can be applied to programs. Chapters provide practical guidelines for planning and conducting evaluations; information on linking program goals, objectives, activities, outcomes, and evaluation strategies; sources and techniques for data gathering; and tips on analyzing and interpreting the data collected and sharing the results.

Evaluation for Improvement

Evaluation for Improvement: A Seven-Step Empowerment Evaluation Approach is designed to help violence prevention organizations hire an empowerment evaluator who will assist them in building their evaluation capacity through a learn-by-doing process of evaluating their own strategies. It is for state and local leaders and staff members of organizations, coalitions, government agencies, and partnerships working to prevent violence.

Intimate Partner Violence Strategic Direction

The strategic direction for intimate partner violence describes a five-year vision for CDC's prevention work. The overall strategy for preventing intimate partner violence is to promote respectful, nonviolent relationships through individual-, relationship-, community-, and societal-level change.

For information on CDC's international work related to intimate partner and sexual violence, see www.cdc.gov/violenceprevention/globalviolence/index.html.

For more information, please contact:
Centers for Disease Control and Prevention
National Center for Injury Prevention and Control
1-800-CDC-INFO • cdcinfo@cdc.gov • www.cdc.gov/violenceprevention