

Colorado's Sexual Violence Prevention: *A Guide for Primary Prevention*



Published 2012



Colorado Department
of Public Health
and Environment

What is Sexual Violence?

Sexual violence is a type of interpersonal violence. It includes any unwanted sexual comment, advance or act regardless of the relationship between perpetrator and victim. It refers to a spectrum of behaviors that are sexually aggressive, including physical, verbal and virtual harassment, including online bullying. The sexual abuse of children, threatened or attempted rape, rape and workplace sexual harassment are all part of the sexual violence spectrum.

Sexual violence occurs every two minutes in the United States, and 80 percent of victims are under the age of 30 years. In addition to the immediate trauma, survivors of sexual violence may experience ongoing problems such as depression, attempted or completed suicide, sleep or eating disorders, and chronic diseases such as asthma, heart disease and cancer.

In addition to its devastating impact on individuals, sexual violence has direct costs to society. According to the U.S. Department of Justice, sexual violence resulted in economic losses near \$33 million in 1994. The National Crime Victimization Survey estimates a cost of \$84,000 per incidence of rape that year.

Research shows the behaviors that lead to sexual violence start early. One national survey indicated that among adult victims of sexual violence, 22 percent of women and 15 percent of men first experienced partner violence between the ages of 11 and 17 years (National Intimate Partner and Sexual Violence Survey, 2010). In the National Longitudinal Study of Adolescent Health, both male and female respondents in grades 7-12 reported "insisting their partner have sex when they didn't want to" at some point in the relationship (Add HEALTH 2002). In 2011, findings from the Youth Risk Behavior Surveillance Survey (YRBS) indicated female students in grades 9-12 were seven times more likely than males to report being "forced to have sexual intercourse." Additionally, this survey showed that over 9 percent of youth had been "hit, slapped or physically hurt on purpose" by their intimate partner.

While all people are at risk of violence, some experience it at higher rates than others. For example, in 2010 the National Coalition of Anti-Violence Programs reported that Lesbian, Gay, Bisexual and Transgender (LGBT) youth were disproportionately impacted by violence, with a record high number of deaths resulting from hate crimes. In the YRBS survey, girls of color were as much as two times more likely than their white counterparts to say that they had experienced sexual violence. In 2010, the U.S. Centers for Disease Control and Prevention (CDC) conducted the Intimate Partner and Sexual Violence Survey, in which approximately 1 in 3 women and 1 in 4 men reported experiencing rape or physical violence. This survey showed that more than a quarter (26.9%) of women who identified as American Indian or Alaska Native and 33 percent of multiracial women had experienced rape at some point in their lifetime. And according to research by Susan Lewis (2003), victims of sexual violence in rural settings are not likely to file a police report due to a close-knit rural culture and are unlikely to locate or access services. This suggests a need to address the uniqueness of rural settings when planning prevention efforts.

Violence is a troubling factor in Colorado and across the nation. Headlines emphasize the impact that violence has on individuals and communities, and attends to the aftermath of negative results. The focus on a single event, and those involved often neglects the issues that lead to violence and falls short of revealing solutions.

Impoverished women in public housing are at increased risk of intimate partner violence. Several factors fuel men's violence against women in public housing, including poverty, stress resulting from an inability to fulfill traditional male economic roles, and male peer support networks that condone physical and sexual violence against women.

– National Sexual Violence Resource Center

Why Does Sexual Violence Happen?

Although sexual violence is often viewed primarily as the problematic behavior of an individual person or persons, the issue is larger and more complex. Researchers have identified a variety of influences besides individual behavior that contribute to - or provide a buffer against - the likelihood of sexual violence. Negative influences are called risk factors and positive influences are called protective factors. Risk and protective factors exist at multiple levels of the social ecology. A three-level social ecological model (SEM) helps explain the risks and protections associated with sexual violence. On pages 4 and 5, risk and protective factors are separately displayed to make distinctions between them clear.

Individual influences include biological and personal history such as substance use and abuse or witnessing family violence. Interpersonal *relationship* influences are factors that result from relationships with peers, intimate partners, family members and community members. *Community and societal* influences are those that reside in organizations and systems where individuals live their lives. At the *community* level, this may include policies, practices and norms that exist in schools, workplaces and neighborhoods. *Societal* influences might include general attitudes and beliefs reflected in policies or social norms that promote gender and economic inequality (CDC, 2004). Sexual violence is rooted in societal norms, policies and practices.

The root causes of sexual violence include poverty, racism, sexism and heterosexism, among other forms of oppression. Root causes are also found in interrelated social systems, such as the education system, in which certain types of learners are valued more than others. Sexual violence is also rooted in discriminatory policies that prevent equal access to civil rights and resources, like legislative policies that limit the definition of marriage to only include heterosexual couples. These examples reflect the root causes of many negative health outcomes, because inequality and social injustice can limit access to opportunities, services and factors that protect individuals from violence and poor health. Root causes must be addressed in prevention programming in order to create a violent-free community.

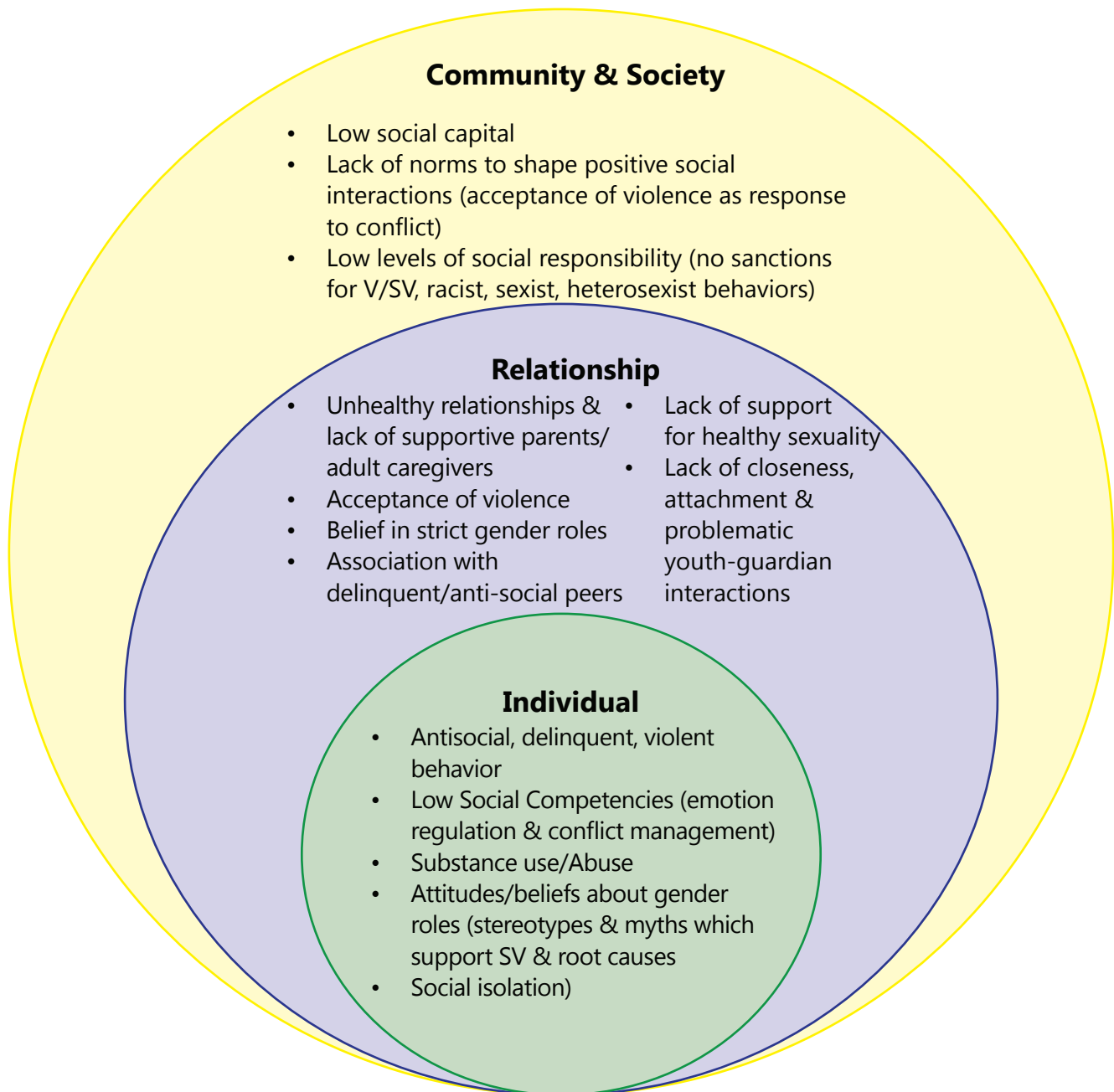
Risk factors exist across all levels of the SEM and are useful when designing theoretical models for prevention. Some factors, such as social-economic status or gender, are helpful for identifying the need for prevention. Others, such as unhealthy relationships, can be used as targets for improvement. The prevention approach described here focuses on decreasing risk factors important to the prevention of first time perpetration of sexual violence. Preventing the perpetration of sexual violence before it occurs is considered to be primary prevention.

Protective factors are the characteristics or situations that reduce the risk of an individual becoming a perpetrator of violence. Protective factors also exist across all levels of the SEM. There are two important ways of enhancing protective factors: sustaining existing factors and creating factors that are absent. Sustaining existing protective factors should be a significant component of any primary prevention effort. For example, creating programs and learning environments that cultivate a positive identity among participants can be protective. Creating protective factors that may be absent also should be a component of program design and delivery. Increasing knowledge among adults who work with young people about promoting healthy sexuality is one way to create a protective factor.

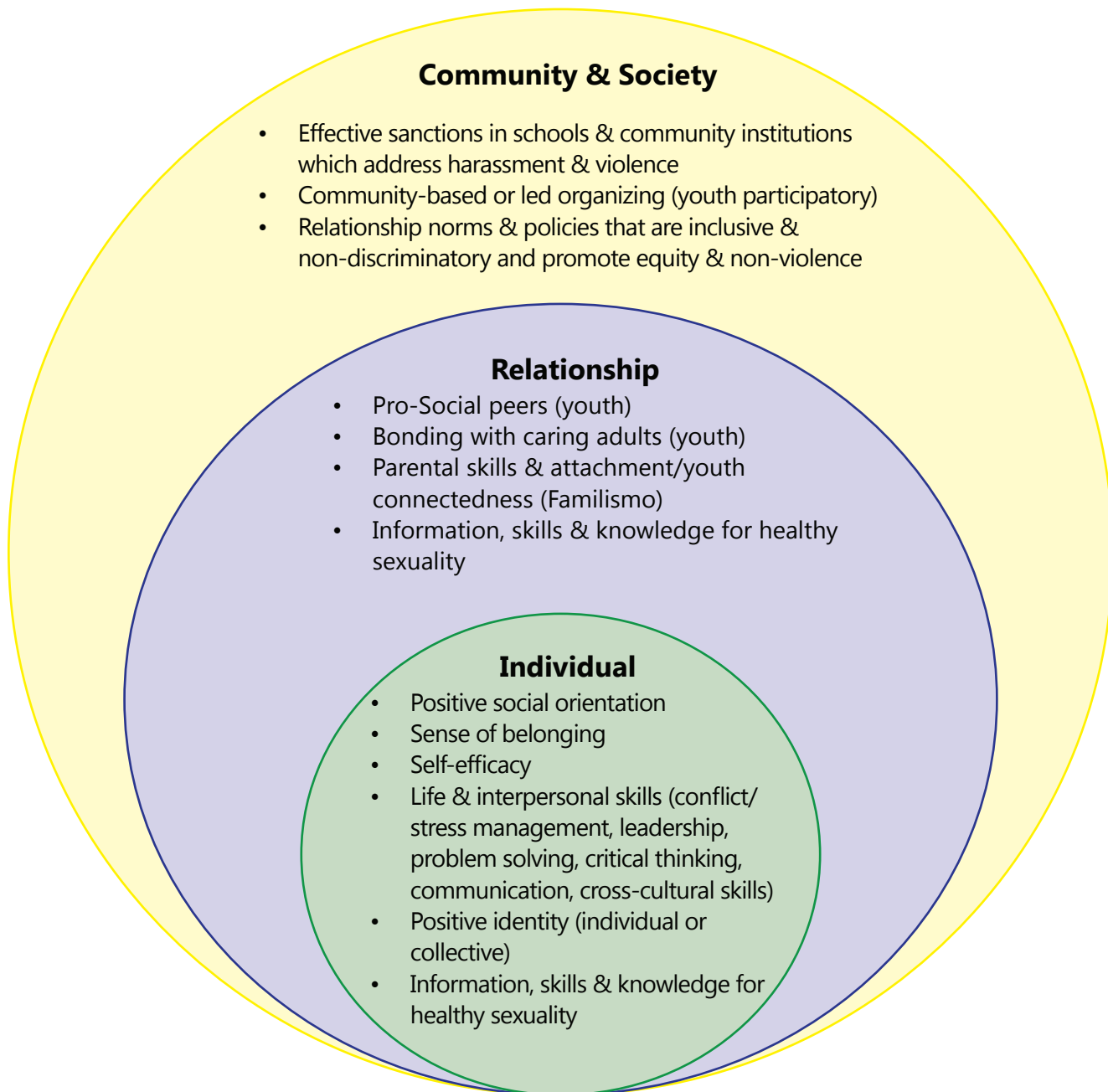


Risk Factors

for Perpetration of Sexual Violence Across the Social Ecology



Protective Factors *against Sexual Violence Across the Social Ecology*



Sexual Violence Prevention in Colorado

Colorado's Sexual Violence Prevention (SVP) Program is funded by the Rape Prevention and Education (RPE) project of the CDC. The SVP Program is housed in the Colorado Department of Public Health and Environment (CDPHE). Program work focuses on the prevention of sexual violence, including the development of interventions designed to increase protective factors and decrease risk factors. The SVP Program, together with partners and experts in the field, have prioritized risk and protective factors important to Colorado's violence prevention efforts. The SVP Program is committed to implementation and

evaluation of strategies that span the prevention spectrum, from strengthening individual knowledge and skills to influencing policy and legislation. Additionally, the SVP Program values a strength-based approach that strives to equip people and communities to be violent-free. The SVP Program is guided by a six-year strategic plan that includes comprehensive evaluation. To prevent sexual violence, the reduction of risk must be complimented by efforts to bolster protection, including positive influences that help youth avoid violence. Considering both risk and protective factors gives a better understanding of sexual violence and underscores a more powerful prevention approach.

The prioritized risk and protective factors below include a description and examples of prevention activities to modify the associated factor.

INDIVIDUAL

Risk Factors

Personal & biological characteristics, behaviors & past experiences

- **Rigid attitudes/beliefs about gender roles** - When males are expected to "be tough" and not be seen as sensitive, they are more likely to view violence as acceptable.
- **Substance use/abuse** - When adolescents are exposed to alcohol, tobacco and other drugs, they are more likely to be influenced to use violence.
- **Anti-social delinquent, violent behavior** - When youth are exposed to peers and family who disregard policies and practices that create safety, they are more likely to be involved in violence.
- **Social isolation** - When people are not included or they do not see themselves portrayed positively in their environments, they are less likely to feel connected or valued, placing them at risk for problem behaviors.
- **Low social competencies** - When people do not have skills for managing relationships in healthy ways, they default to primitive survival - fight or flight.

Prevention activities that impact individual risks may provide opportunities to practice social and cognitive skills within an educational setting such as healthy relationship classes that provide information that normalizes positive relationships and offers conflict management techniques.

Protective Factors

Mitigate risks for violence based on a person's biology or history

- **Positive social orientation** - People thrive with social skills and values that connect them to others.
- **Sense of belonging** - When family, peers, school and community are safe and reflect values and interests for all, individuals are more likely to fit in.
- **Self-efficacy** - When people know what to do and have access to what they need to learn and be productive, they are more likely to reach their life goals.
- **Life and interpersonal skills** - When youth learn healthy skills for managing conflict and stress, they become less likely to engage in sexual violence.
- **Positive identity** - When youth feel good about themselves, feel connected to family, culture and tribe, and believe they have a purpose in the world; they are more likely to display a positive social orientation and thrive.

Prevention activities that strengthen individual protective factors include sequential programming for youth and parents to promote skills for positive communication and training teachers and others who work with youth how to establish positive connections with diverse youth.

RELATIONSHIP

Risk Factors

Resulting from interactions between two or more people.

- **Association with delinquent/anti-social peers** - Youth who spend time around others who break rules and laws are more likely to become involved in sexual violence.
- **Unhealthy relationships between youth and adults** - When youth do not feel connected to or supported by their caregivers, they become at risk for perpetrating violence.
- **Lack of support for healthy sexuality for youth** - When adults do not support the development of healthy sexuality, or lack skills or resources for supporting youth in this area, youth become less likely to develop a positive sexuality.
- **Adult acceptance of violence** - When youth observe adults who believe that male dominance is acceptable, or uphold stereotypes about sexual orientation, they are more likely to support the root causes of sexual violence.

Prevention activities that impact relationship risks include raising awareness about sexual violence and providing resources that help youth develop a positive sexual identity, such as a community event for parents/guardians of youth participating in a healthy relationship class.

Protective Factors

Positively impact close social relationships, such as family, peers and school

- **Pro-social peers** - When males and others spend time around those who follow rules and laws, they are more likely to do the same.
- **Bonding between youth and caring adults** - When youth feel strong connections with parents and other adults, they are more likely to feel supported and thrive.
- **Effective parenting skills** - When parents or guardians become informed and have access to the support and resources necessary to guide youth in ways that allow them to learn from their mistakes and seek their own goals, youth are less likely to be involved in violence.
- **Information, skills and knowledge about healthy sexuality** - When parents or guardians become informed and have resources to support the healthy sexual development of young people, youth are less likely to become perpetrators of sexual violence.

Prevention activities that advance positive relationships may include educating media providers, such as musicians and DJs, about sexual violence to encourage them to produce positive media messages that shape healthy relationship norms.



COMMUNITY & SOCIETAL

Risk Factors

Evident in settings and institutions where social relationships take place such as schools, neighborhoods and in the greater society

- **Low social capital** - Without consistent public role models and policies that are non-discriminatory and consistent in enforcement, young people are more likely to uphold root causes of violence and sexual violence.
- **Low levels of social responsibility/weak community sanctions for violence/sexual violence** - Without laws and regular enforcement of rules that prevent racism, sexism and heterosexist behaviors, sexual violence is more likely to occur.

Prevention activities that impact community and societal risks include improving organizational practices and promoting laws and policies that support healthy community norms and a violent-free society. Media literacy training that helps people deconstruct messages that promote racism, sexism and heterosexism, among other inequities, can decrease discrimination that leads to violence.

Protective Factors

Influence change at the community and societal level focus on systems that produce norms

- **Relationships, social acceptance and policies that promote equity** - Violence will be less likely to occur with public examples of healthy relationships, laws and regular enforcement of policies that prevent exclusion, intolerance and discrimination.
- **Community-based or led organizing** - When young people are given useful roles in the community and opportunities to shape their own development, they are more likely to thrive.
- **Effective sanctions in schools, workplaces and other community institutions** - Comprehensive harassment policies that name homophobic bullying and consistent enforcement of these policies ensure all youth are safe in those settings.

Prevention activities that lead to positive community and societal changes include youth-led organizing and leadership development that foster connections for diverse youth with pro-social peers. These include youth-led projects that train youth to advocate for equitable practices in schools and communities.



SVP Programs' Six Tenets for Primary Prevention

The key to ending sexual violence is stopping perpetration before it occurs. This approach is known as primary prevention. Primary prevention aims to address the root causes of violence and influence risk and protective factors in a positive direction. It does not include immediate response to sexual violence such as crisis hotlines, or counseling for survivors. But it is considered a contributor to the important work of advocates and others who work tirelessly to ensure the well-being of those affected by sexual violence (CDC, 2004).

The SVP Program primary prevention model focuses on preventing first time perpetration for youth and young adults ages 12-25 years. Prevention education may look different when compared to other sexual violence prevention efforts. The SVP Program created the following six tenets to guide prevention programming. These six tenets are grounded in research, contextual and experiential evidence.

I. Designed for Youth Between the Ages of 12 and 25 Years.

Research indicates that middle and high school age youth are at a critical developmental stage for the primary prevention of sexual violence. Their interest in dating and intimate partnerships is new and they are experimenting with their perceptions and behaviors related to sexual health. This provides an opportunity for the provision of education and skill building for healthy sexuality.

II. Designed for Males

The majority of perpetrators of violence are male (Basile, et al 2009).

Feminine and multicultural socialization that emphasize empathy and healthy sexuality are central to preventing the development of sexually aggressive behavior. This strategy is to be combined with strategies to shift societal power structures toward greater acceptance

of feminine and multicultural socialization practices in order to attain greatest impact. (Nagayama Hall, 1997)

III. Provide Prevention Programs and Services for All Youth

A universal approach to primary prevention means that programming is designed for the general population regardless of individual risk for sexual violence perpetration or victimization. Universal programming ensures that all youth have access to sexual violence prevention content and resources, regardless of sexual orientation or gender expression. Offering universal programming means that sexual violence prevention resources have the greatest impact on the highest number of young people.

IV. Develop Culturally Relevant Primary Prevention

It is important for prevention educators to know about their participants in order to provide information that is relevant to them. This may mean adapting the language of evidence-based curricula, or developing and evaluating evidence-based innovative strategies that are inclusive of the values and needs of the community where prevention efforts are being implemented. The aim is to be as inclusive as possible, removing any discriminatory content.

V. Utilize a Positive Youth Development Approach

Positive youth development (PYD) is a strength-based approach that centers on youth participation. Individual youth assets for healthy youth development are essential for primary prevention, and represent the standards for PYD. Three principles of PYD are required for SVP Program-sponsored projects: 1) Long term positive youth-adult relationships; 2) Life skills training with opportunities to practice; and 3) Youth participation in leadership roles within community programs.

VI. Community Organizing

For prevention to be long-lasting, individual communities must be organized and have opportunities to provide input for solutions to end violence. The SVP Program works collaboratively across the state and commits resources annually to community organizing that will increase readiness to address sexual violence.

What Does Effective Primary Prevention Look Like in Colorado?

The SVP Program concentrates on a positive approach to the prevention of first-time perpetration of sexual violence. This approach advocates for comprehensive programming that implements strategies and activities to create social change at every level of the social ecology. A list of prioritized risk and protective factors is the cornerstone of prevention and the focus of evaluation. The provision of successful prevention programming ensures that all young people experience a successful transition from adolescence to adulthood and demonstrate a decrease in risk factors and an increase in protective factors important to ending sexual violence.

The SVP Program's six-year strategic plan includes the following goals, objectives and strategies intended to serve as a framework for implementing sexual violence prevention at the state and community levels.

GOAL 1

Prevent first time sexual violence perpetration by youth during adolescence and young adulthood (approximate ages 12-25)

Objective 1

Develop programs and services designed to increase protective factors and decrease risk factors for potential perpetrators

Strategies

- A. Increase the number of males participating in local grantee SVP programs
- B. Fund local grantees whose program design includes specific strategies to engage young males

Objective 2

Increase the number of programs aimed at increasing protective factors and decreasing risk factors for potential victims and perpetrators in universal

populations of youth, which are in alignment with a positive youth development (PYD) approach

Strategies

1. Develop evidence based programs for universal populations of youth (effective at decreasing and increasing R and P factors salient to SVP) in alignment with positive youth development approach
2. Fund local grantees to implement evidence-based programs

Outcomes

1. 25 percent of local grantees receive funding to implement evidence-based SVP programs effective at decreasing/increasing R and P factors salient to SVP by 10/13
2. Increase number of violence prevention programs that utilize Shared R and P factor approach toward preventing multiple forms of violence by 12/17
3. Increase number of SVP programs using a positive youth development approach by 12/17
4. 80 percent of local grantees demonstrate an effect on the decrease/increase of R and P factors salient to SVP for potential victims and perpetrators by 10/17

GOAL 2

Prevent sexual violence in communities prioritized by the SVP Plan (Rural, Communities of Color, Immigrant, Indigenous, LGBTQ)

Objective 1

Increase awareness and community readiness to prevent sexual violence among youth and young adults

Strategies

- A. Develop partner capacity to assess and increase community readiness
- B. Fund partner capacity to assess and increase community readiness

Outcomes

1. 100 percent of local grantees assess a baseline level of community readiness by date 11/10

2. 100 percent of local grantees reassess community readiness 10/13
3. 10 percent of funding in local grantees' contracts is allocated to strategies toward increasing community readiness
4. 50 percent of local grantee communities demonstrate an increase in community readiness by 10/16

Objective 2

Develop programs and services for priority populations

Strategies

- A. Develop relationships with partners in prioritized populations and communities
- B. Fund local grantees targeting prioritized populations

Outcomes

1. Increase number of partners within priority communities/populations by 11/13
2. Increase number of scholarships/stipends for partners from priority communities/populations by 10/15
3. Increase number of applications received by agencies targeting priority populations by 10/15
4. Increase number of local grantees with programs specifically for priority populations by 10/15
5. 100 percent of SVP Program local grantees deliver primary prevention programs for prioritized populations by 10/17
6. 75 percent of local grantees demonstrate an effect on the decrease/increase of R and P factors salient to sexual violence prevention for priority populations by 10/17

GOAL 3

Promote social norms, practices and policies salient to sexual violence prevention in CO

Objective 1

Develop local grantees' capacity to participate in and lead the community and state level initiatives which address root causes of sexual violence by engaging in unique community efforts or participating in state approved initiatives

Strategies

- A. Require local grantees allocate 10 percent (min) of SVP Program funding toward community & state level initiatives that address root causes of sexual violence
- B. Provide technical assistance to local grantees on community and societal level change initiatives

Outcomes:

1. 100 percent of local grantees participate in community & state level initiatives salient to sexual violence prevention by 11/13
2. Systematic emphasis on changing the number of norms, policies, and practices salient to SVP by 10/17
3. Increase capacity of partners to participate in & provide leadership for community & state level initiatives, which address root causes of sexual violence and impact youth and young adults in priority populations by 10/17
4. Decrease/increase R & P factors at community & societal levels salient to sexual violence prevention by 10/17
5. Demonstrate changes in norms, policies or practices (TBD per initiative)

Objective 2

Support state and national initiatives (external to the SVP Program's local grant-making efforts), which address root causes of sexual violence

Strategy

- A. Collaborate with national, state and community level agencies working on system change within institutions or at the state/national level salient to sexual violence prevention

Outcomes:

1. 15 percent of SVP Program staff time spent supporting initiatives external to the SVP Program
2. Increase emphasis on community and societal norms, policies, and practices salient to sexual violence by 10/17
3. Demonstrate changes in norms, policies or practices (TBD and initiative specific)
Include indicators of effort and effect if applicable

Successful Primary Prevention of Sexual Violence: Based on CDC's "Spectrum of Prevention"



Prevention Strategy	Description of Strategy	Activity Example
Strengthening Individual Knowledge & Skills	Enhancing an individual's capability of preventing sexual violence and promoting safety	<ul style="list-style-type: none"> Workshops such as "Power & Privilege" where racism, sexism, and heterosexism are discussed Healthy Relationship Classes
Promoting Community Education	Reaching groups of people with information and resources to prevent SV and promote safety	<ul style="list-style-type: none"> Events such as theatre "Until Someone Wakes Up" that raise awareness about sexual violence
Educating Providers	Informing providers who will transmit skills and knowledge to others and model positive norms	<ul style="list-style-type: none"> Train teachers about ways to prevent sexual violence in a variety of learning environments Educate musicians, song writers, DJ's and producers about the impact of music and video who will produce positive media
Fostering Coalitions & Networks	Bringing together groups and individuals for broader goals and greater impact	<ul style="list-style-type: none"> A unified group of community members proposing policy or proclamation to prevent violence
Changing Organizational Practices	Adopting regulations and shaping norms to prevent violence & promote safety	<ul style="list-style-type: none"> Sponsor a Gay Straight Alliance (GSA) student group to increase school safety Adapt all programming materials to include diverse populations and reject oppressive language
Influencing Policies & Legislation	Promoting laws and policies that support healthy community norms and a violent-free society	<ul style="list-style-type: none"> Media literacy training to deconstruct violent and discriminatory messages and produce positive media

The CDC Spectrum of Prevention simplifies comprehensive application of prevention activities that affect multiple levels of the social ecology. CDC Funded agencies implement one or more of the outlined strategies and measure impact. Reproduced here to

demonstrate how Colorado's SVP Program will measure local and state outcomes, the spectrum of sexual violence prevention shows which risk and protective factors are impacted and demonstrates successful statewide prevention efforts.

Intended Participant	Outcome (<i>change in Risk & Protective Factor</i>)
Youth age 12 - 25	Decrease in negative attitudes/beliefs about gender roles Increase in self-efficacy
Youth and adults	Decrease acceptance of violence Increase Relationship norms that are inclusive & non-discriminatory
Adult teachers	Decrease acceptance of violence
Youth and adults in a specific community	Increase knowledge and skills toward developing healthy sexuality Increase community-led organizing that addresses sexual violence
Adults with influence over practice and policy impacting youth	Decrease the lack of social responsibility for sexual violence Increase relationship norms and/or policies that are inclusive & non-discriminatory
Youth and adults in schools & community	Decrease the lack of norms that shape positive social interactions Decrease association with anti-social peers
Adult program staff and youth & family participants	Increase sense of belonging & self-efficacy
Youth, adults, professional media outlets	Decrease low levels of social responsibility Increase relationship norms & policies that are inclusive & non-discriminatory and promote equity & non-violence

References

National Intimate Partner and Sexual Violence Survey: 2010 Summary

Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T., Chen, J., & Stevens, M.R. (2011). *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. Retrieved on July 11, 2012:
http://www.cdc.gov/ViolencePrevention/pdf/NISVS_Executive_Summary-a.pdf

National Institute of Child Health and Human Development, **National Longitudinal Study of Adolescent Health (Add Health), 1994-2008 & 2002**. Retrieved on July 20, 2012:
<http://www.fsu.edu/~popctr/research/addhealth1.pdf>

Youth Risk Behavior Surveillance System (YRBSS)

Centers for Disease Control and Prevention. [Youth Behaviors Surveillance – United States, 2011]. MMWR 2012;61(No. 4):[10] Retrieved on July 13, 2012:
<http://www.cdc.gov/mmwr/pdf/ss/ss6104.pdf>

National Coalition of Anti-violence Programs, **Hate Violence against the Lesbian, Gay, Bisexual, Transgender and Queer Communities in the United States, 2011**. Retrieved on July 11, 2012:
http://www.avp.org/documents/NCAVPHVReport2011Final6_8.pdf

National Sexual Violence Resource Center, *Housing & Sexual Violence Research Brief*. Retrieved on July 11, 2012:
<http://www.nsvrc.org/publications/nsvrc-publications/housing-sexual-violence-research-brief>

Centers for Disease Control and Prevention. Sexual violence prevention: **beginning the dialogue**. Atlanta, GA: Centers for Disease Control and Prevention; 2004.

Davis, R.D., Parks, L.F., Cohen, L. (2006) Sexual Violence and the spectrum of prevention: Towards a community solution. National Sexual Violence Resource Center, Centers for Disease Control and Prevention

Page 8 photo courtesy of Grand Canyon Music Festival

Contributors

Bonnie Moya, B.A.

Agnieszka McCort, M.A.

Kristen Pozzoboni, PhD

Sexual Violence Prevention Program

Injury, Suicide and Violence Prevention Branch

Prevention Services Division

Publication supported by a grant from the Centers for Disease Control and Prevention,

Grant Number- 5VF1CE001131-05



For more information on the Sexual Violence Prevention Program, please visit:
<http://www.cdphe.state.co.us/pp/injuryprevention/sexualassault.html>



Colorado Department
of Public Health
and Environment