Abstract

This paper provides an introduction to and framework for a series of guidance documents that include, Social Media Use in Sexual Violence Prevention, A Vision of Sexual Health, and The Transformative Power of Intersectionality. All four define primary prevention as approaches that seek to eliminate the root causes of sexual violence in all its forms, from sexism, to coercion, to violent rape, and to keep violence from ever occurring. Primary prevention seeks to identify and change the conditions that cause the violence, working comprehensively with individuals, families, communities, institutions, and society as a whole. AGSATF recognizes oppression as the root cause of violence and uses an anti-oppression and social justice framework for its prevention work. We follow the public health approach, defining the problem, identifying risk and protective factors, testing interventions and ensuring widespread adoption of what works. We partner with communities in our prevention work, joining our expertise to theirs; and we practice “trauma-informed” prevention, honoring the presence of survivors in every community. We are guided by the conviction that:

Sexual violence is preventable, and everyone has a role and a responsibility in preventing it.

Primary Prevention of Sexual Violence in Oregon

The Attorney General’s Sexual Assault Task Force (AGSATF) defines primary prevention of sexual violence as “approaches that seek to eliminate the root causes of sexual violence and to stop sexual violence from ever occurring.” Unlike “public awareness” activities that raise awareness of the scope and impact of sexual violence and how to respond when sexual violence occurs, primary prevention engages individuals, communities, institutions and policy makers to create conditions that will keep sexual violence from happening. Primary prevention work is often referred to as “moving upstream”; while sexual assault responders address the crisis of victims fighting to survive the river’s swift current, primary prevention directs us “upstream” to locate the place where the victims are going into the water and to change what is happening there.¹

AGSATF believes that oppression is the primary root cause of sexual violence. Oppression can be defined as the socially-sanctioned abuse of power over others. For example, laws that exclude women from educational or employment opportunities based on their gender represent a government’s abuse of what might be its otherwise legitimate power to govern. In

¹ This concept is captured in the “Three Sisters” story, as told by Lisa Brunner from the Sacred Spirits First Nations Coalition’s “Three Sisters” story, recorded by Oregon Coalition Against Domestic and Sexual Violence in 2012 and located at http://www.youtube.com/watch?v=1HyvmXQ3Jl. Each sister represents a stage of prevention; secondary (responding in the crisis immediately after the violence); tertiary (addressing the longer term impacts of the violence), as well as primary (preventing the violence before it occurs).
Primary Prevention of Sexual Violence Position Paper

working to prevent sexual violence before it ever occurs, AGSATF uses an anti-oppression framework, seeking interventions that focus on access, inclusion, equity and social justice.

AGSATF employs a public health approach in identifying and implementing prevention strategies. The public health approach identifies sexual violence as a serious threat to public health, and seeks to prevent it by clearly defining the violence, identifying risk and protective factors, developing and testing prevention strategies and ensuring widespread adoption of what has been shown to work.

1. Defining the violence:

AGSATF defines sexual violence as any nonconsensual sexual act. We define consent as “a ‘yes’, when ‘no’ is a viable option.” Our focus on root causes means that we consider the entire continuum of violence in our prevention work, from sexism, to harassment, to unwanted attention, to coerced sex, to stranger rape, to gang rape. As the National Sexual Violence Resource Center has written, While some forms of sexual violence -- such as sexist and sexually violent jokes, comments about someone’s appearance, sexual orientation or gender identity, catcalling, sexually explicit comments and vulgar gestures -- might not be illegal, this does not make them less threatening or harmful to the person victimized. All of these behaviors contribute to a culture that accepts sexual violence.

2. Identifying Risk and Protective Factors

- We focus on risk factors for perpetration, not for victimization. AGSATF believes that, while it can be useful to give individuals and communities information to help keep vulnerable members safer, the only person who can truly prevent a sexual assault is the potential perpetrator, by choosing NOT to offend. Because risk reduction for potential victims can lead to victim blaming, AGSATF does not include it as part of primary prevention work. For the same reason, we endorse “trauma-informed” prevention, understanding that survivors will be present in every group and community and therefore using language and bringing resources that will validate their experience and help them to heal.

- We also understand that risk factors for perpetration do not identify those who will perpetrate, but rather those who may be more likely to choose to perpetrate. By addressing the factors that may support that choice, we seek to encourage those at risk to choose respect, non-violence, and healthy relationships and communities. For example, adolescent youth who hold views of dominant masculinity and the belief that women are inferior to men are more at risk to choose or support sexually violent actions.

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2 This definition can be found in Recommended Guidelines for Sexual Assault Response and Prevention on Campus at http://oregonsatf.org/resources/satf-position-papers/ That paper includes additional information about primary prevention.

We support research that will increase our ability to identify factors that protect against first time perpetration as an important part of strength-based prevention work.

We endorse identifying risk and protective factors that may be common across multiple forms of violence and forging partnerships and collaborations to increase prevention efforts and leverage scarce resources.

3. Developing and testing prevention strategies

- AGSATF prioritizes evaluation. By documenting the effectiveness of prevention interventions, programs and strategies, we can maximize the impact of activities and encourage replication of effective programs and strategies.
- We recognize the importance of keeping current in prevention and prevention-related research and development to improve access to successful strategies.

4. Ensuring widespread adoption of successful strategies

- Prevention and Education Subcommittee of AGSATF (PEC) brings together statewide expertise to facilitate dissemination;
- AGSATF uses Internet, listservs and participation in national and regional networks;
- AGSATF participates in national collaborative networks, including the CDC’s Rape Prevention and Education (RPE) Grant Program, the National Sexual Violence Resource Center (NSVRC), and Prevent Connect, to enhance dialogue and resource sharing.

Combining the anti-oppression framework with the public health approach, we strive for health equity, where everyone has equal access to the resources and opportunities that make their lives healthier. We recognize that oppressions result in unequal access to those fundamental resources and resultant health disparities, including heightened vulnerability to violence. We also recognize that communities are the best source of information on what will work in their community; which means respecting local expertise, particularly in communities that have been historically marginalized and oppressed. We use tools such as the “Stages of Community Readiness” and approaches such as Participatory Action Research to support this approach to community mobilization.

The public health approach AGSATF endorses in primary prevention is complementary to the public safety approach that guides our work in intervention and response to sexual violence that has occurred. Both approaches share the same understanding of the causes of violence

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4 These resources and opportunities are sometimes referred to as the “social determinants of health” and can be defined as “… life-enhancing resources, such as food supply, housing, economic and social relationships, transportation, education, and health care, whose distribution across populations effectively determines the length and quality of life.” James, S. Social determinants of health; implications for intervening on social and ethnic health disparities. Paper presented at Minority Health Conference, 2002; University of North Carolina. Quoted in Brennan Ramirez, LK et al. (2008). Promoting Health Equity: A Resource to Help Communities...” Department of Health and Human Services, CDC.
and of the key importance of shifting responsibility for the violence from the victim to the perpetrator and the community. Communities that vigorously act to hold perpetrators responsible for the crimes they commit have the capacity to bring that same vigor to identifying and addressing the conditions that may cause the violence to occur.

We understand that successful prevention programs are comprehensive and include strategies that simultaneously address individuals, relationships, communities, and institutions, as well as society in general. The social ecological model and Spectrum of Prevention provide key frameworks for understanding the logic and power of this comprehensive approach. Challenging pro-violence attitudes, beliefs and behaviors at the individual level cannot create sustainable change alone. They must be reinforced and reflected by the community in which individuals live, and by the society and institutions that create the policies and laws that shape and control their environment. By contrast, when society and institutions reflect gender, race and cultural equity, individuals will find much less support for pro-violence beliefs. For example, teaching students about healthy sexuality will be more likely to result in the changed behaviors we intend if the school district adopts and systemically enforces policies that require safety and respect in all school-based relationships.

This comprehensive context frames our understanding of the work being done by the Sexual Assault Training Institute (SATI), AGSATF Advisory Committee subcommittees, and by local communities to create a survivor-centered approach. That approach, which holds offenders accountable, supports individual victims while also challenging the social norms that tolerate violence, and the institutional policies that reflect those norms.

We summarize our approach in the statement, "Sexual violence is preventable, and everyone has a role and responsibility in preventing it." We look forward to working with communities and partners in identifying and supporting those roles. We hope this paper will provide a foundation on which to build and strengthen the integration of prevention into our collaborations and strategies as we seek to address and end sexual violence in Oregon.

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5 Pictures of these models are included on the last page of this paper.
6 The Nine-Principles of Effective Prevention Programs provide additional guidelines for program development, while the Stages of Community Readiness are a valuable tool for supporting communities in prevention work. Both are described in the Prevention Chapter of the 2012 SATF Advocate Manual, available upon request.
7 Social norms are the formal and informal sanctions (rules) of behavior through which oppression is maintained.
The Social Ecological Model

The Spectrum of Prevention

<table>
<thead>
<tr>
<th>Level of Spectrum</th>
<th>Definition of Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>LEVEL 1</td>
<td>Strengthening Individual Knowledge and Skills</td>
</tr>
<tr>
<td></td>
<td>Enhancing an individual’s capability of preventing violence and promoting safety</td>
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<tr>
<td>LEVEL 2</td>
<td>Promoting Community Education</td>
</tr>
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<td></td>
<td>Reaching groups of people with information and resources to prevent violence and promote safety</td>
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<tr>
<td>LEVEL 3</td>
<td>Educating Providers</td>
</tr>
<tr>
<td></td>
<td>Informing providers who will transmit skills and knowledge to others and model positive norms</td>
</tr>
<tr>
<td>LEVEL 4</td>
<td>Fostering Coalitions and Networks</td>
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<tr>
<td></td>
<td>Bringing together groups and individuals for broader goals and greater impact</td>
</tr>
<tr>
<td>LEVEL 5</td>
<td>Changing Organizational Practices</td>
</tr>
<tr>
<td></td>
<td>Adopting regulations and shaping norms to prevent violence and improve safety</td>
</tr>
<tr>
<td>LEVEL 6</td>
<td>Influencing Policies and Legislation</td>
</tr>
<tr>
<td></td>
<td>Enacting laws and policies that support healthy community norms and a violence-free society</td>
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