

**Recommendations to
Prevent Sexual Violence
in Oregon:
A Plan of Action**

2006



Recommendations to Prevent Sexual Violence in Oregon: A Plan of Action

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Introduction

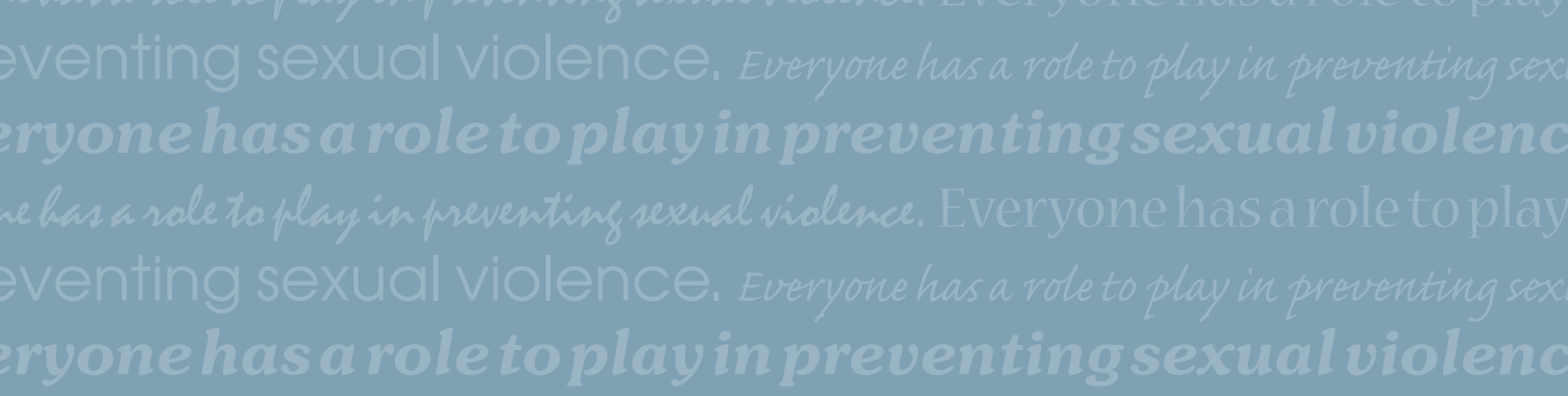
A multidisciplinary group spent one year meeting and developing “Recommendations to Prevent Sexual Violence in Oregon: A Plan of Action.” Resources and materials from around the world were reviewed in the development of these recommendations; prevention experts in Oregon and the nation were interviewed to develop a comprehensive view of the field. One message seems to be universal: that although sexual violence prevention is deemed a worthy endeavor, prevention efforts to date remain a low priority and receive few resources and little attention.

This Plan of Action came into being because there are those in our state who have decided that this needs to change in Oregon. There is a growing belief that it is time to focus on prevention and time to allocate resources of time and money on decreasing and eliminating sexual violence.

The authors hope that this Plan will:

- ◇ Increase understanding of the nature and scope of sexual violence.
- ◇ Acknowledge the importance of raising the status of women and girls while simultaneously addressing the roots of male violence.
- ◇ Promote the Ecological Model as a useful statewide tool for organizing, communicating, prioritizing and funding prevention efforts.
- ◇ Identify priority populations as focal points for some of Oregon’s efforts over the next five years.
- ◇ Offer useful recommendations for prevention planning.
- ◇ Provide support to the many individuals and groups who are currently working to implement prevention programming in relative isolation.

It is hoped that as readers of this Plan of Action, you will find the necessary information to take action to prevent sexual violence. Whether your efforts are for yourself or others, whether you become involved in prevention efforts where you work, play, worship or hang out, your efforts are important and valuable.



Executive Summary

The high rates of prevalence of sexual violence and its impact on victims are both widely known and recognized due to efforts of the women’s movement, governmental entities, universities, and the public health sector over the past thirty years. The current debate focuses on how to prevent sexual violence: how to stop it before it occurs; how to reduce the risk of targeted populations; how to create a climate where sexual violence is unthinkable. For the first time, as a state, Oregon joins in the international debate and begins its own multidisciplinary work by the development of these recommendations to prevent sexual violence.

This Plan of Action begins by placing “prevention” in the context of what has come before – including the research conducted to identify the prevalence of sexual violence. This plan recognizes the work that has taken place in the past and present in Oregon to address basic gender inequality, to empower women, to support victims, to hold perpetrators accountable, and to reduce the risk of both perpetration and victimization. With that context firmly in mind, the recommendations focus attention firmly on strategies for prevention.

Key to the Recommendations to Prevent Sexual Violence in Oregon is defining what is meant by “prevention”. The recommendations make a clear distinction between “primary prevention” defined as eliminating the root causes of sexual violence and stopping sexual violence before it occurs and “secondary prevention” defined as focusing efforts on specific groups at risk for perpetration or victimization. Primary prevention efforts include addressing basic gender inequalities because of the high correlation it has to sexual violence. Prevention efforts will address raising the status of women and girls while focusing on the issue of male violence. Of particular challenge is how to impact messages and dispel myths related to existing “social norms” for male behavior.

Eight prevention strategies are at the core of this Plan of Action. They are carefully chosen as a starting place for Oregon’s organized multidisciplinary efforts. The strategies are devised using the “ecological model” adapted from the World Health Organization as a framework for prevention; the model is based on recognition that individuals, communities, institutions and society have essential roles in the prevention process.

Given limited resources, three priority populations were chosen based on epidemiological and research literatures as the focus of prevention efforts for the first five years of this plan’s implementation. Both adolescent boys and girls were chosen as priority populations based on evidence that identifies their risk of becoming perpetrators or victims. The third priority population, people with developmental disabilities, was chosen due to their high rates of victimization by sexual offenders.

This Plan of Action is designed as a resource for all who wish to find a place for themselves or their organization in preventing – and eliminating – sexual violence.

Overview

Recognition of the connection between the status of women and sexual violence, and an understanding of how sexual offenders operate and who they target as their victims guides the assumptions, recommendations, and premises of this Plan of Action. We believe: that primary prevention efforts must focus simultaneously on males' perpetration of sexual violence as well as on raising the status of women and girls; that all efforts must include the involvement of both men and women to be successful; that the problem is of such a pervasive scope that it must be solved with assistance from all members of Oregon's communities.

Preparation for writing "Recommendations to Prevent Sexual Violence in Oregon: A Plan of Action" included investigating the national status of sexual violence prevention. A Fall 2003 survey included 45 states and U.S. territories. Prevention materials were identified and reviewed from 15 states. These materials included both violence against women and sexual violence prevention plans. This review revealed that few states have a statewide sexual violence prevention plan in place or a planning process of this nature underway.

One important message gleaned from the overview of the field is that the anti-violence movement's historic over-reliance on the criminal justice system has not effectively reduced or prevented violence. We join with other states in recommending that communities add alternatives to legal system intervention, such as community accountability strategies (e.g. taking collective action to assert that violence is unacceptable). In essence, these approaches expand the focus of violence prevention beyond individual, interpersonal interventions to emphasize community and societal change.

While there is greater recognition of the reality of sexual violence in society, more still needs to be done to prevent sexual violence. That is, additional strategies are needed to stop sexual violence before it occurs, to reduce the risk of susceptible populations, to create a climate where sexual violence is not tolerated, and to develop environments where healthy relationships and healthy sexuality is the norm. Over the past thirty years, the prevalence of sexual violence and its impact on society, the economy, and children has become better understood and recognized due to efforts of advocates, victims, governmental entities, universities, and the public health sector. A challenge that remains is to first recognize that sexual violence is preventable and then to answer the question: How can we effectively prevent sexual violence from occurring in the first place?

Nationwide, there appears to be a paradigm shift occurring where the focus of prevention efforts are changing to reflect the understanding that prevention means eliminating the root causes of violence and preventing assaults from ever occurring. As a result, prevention programs focusing on victim services, self-protection, harm reduction, telling men that rape is bad, and emphasizing "no means no", are beginning to shift focus to identifying and enhancing healthy social norms; addressing bystander intervention; identifying risk factors for victimization or perpetration; and addressing these risk factors as part of primary prevention programming. Many of these trends are based on the public health model and work by researchers such as Nan Stein, Jackson Katz, Alan Berkowitz, Paul Schewe and others.

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“Recommendations to Prevent Sexual Violence in Oregon: A Plan of Action” builds upon the concepts and themes of the aforementioned statewide plans and reports, encourages using evidence-based strategies when possible, focuses on building a body of evidence-based strategies, and utilizes the ecological model. This Plan of Action reflects a multidisciplinary effort to identify innovative, evidence-based, comprehensive sexual assault prevention initiatives in Oregon and provides directions to build upon these efforts.

- Support sexual violence prevention by:
- ✧ Promoting healthy and safe attitudes and beliefs about sexuality
 - ✧ Empowering those who witness violence (bystanders) to speak out
 - ✧ Developing interventions for young people who show risk factors for becoming perpetrators
 - ✧ Promoting the status of women and girls
 - ✧ Addressing the root causes of violence in our society

The Impact of Sexual Violence

Acts of sexual violence can occur through force, coercion, or exploitation of an individual and can include physical contact, voyeurism, exposure to pornography, use of sexual language, or exhibitionism. Although sexual violence includes a wide range of abusive behaviors, most of the evidence we have on the incidence of sexual violence involves forcible rape. Victims of rape experience more long-lasting mental health and physical health problems than the general population.¹ Dean G. Kilpatrick and Kenneth J. Ruggiero wrote a comprehensive report on sexual assault in Oregon in 2003 titled, 'One in Six - Rape in Oregon: A Report to the State'. Using data from national surveys, Kilpatrick and Ruggiero estimated:²

- One in six, or 230,000, women in Oregon have experienced rape at least once during their lives.
- 31%, or 71,000, Oregon women rape survivors have developed post-traumatic stress disorder (PTSD) at some time in their lives compared to 5% of women never victimized by violent crime.
- 30% of rape survivors (69,000 in Oregon) experience major depression at some time in their lives; compared to 10 percent of women never victimized by violent crime;
- 33% of rape survivors experience serious suicidal thoughts at some time in their lives (over 48,000 Oregon rape survivors), compared to 6% of women never victimized by violent crime.
- 13% of rape survivors will attempt suicide at some time in their lives (nearly 30,000 Oregon rape survivors), compared to only 1% of women never victimized by violent crime.

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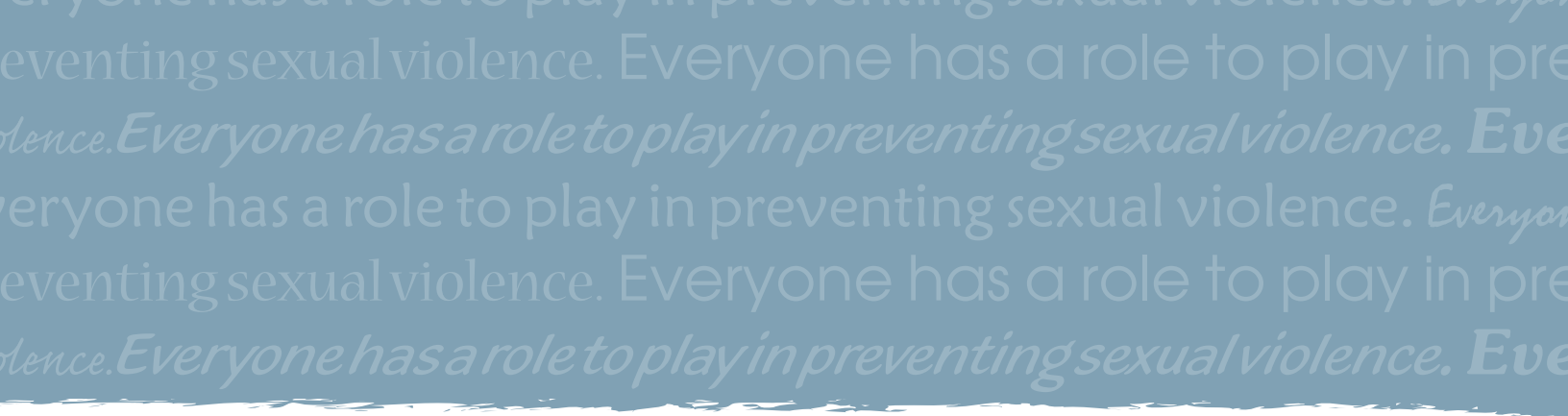
While these statistics clearly illustrate that rape is prevalent, these numbers are likely underestimates of the true incidence of sexual violence in Oregon. The FBI continues to identify sexual assault as the least reported of all violent crimes³ making it difficult to identify the actual scope of the problem.⁴ For example, in a recent survey of Oregon women, only 27% of intimate partner sexual assault victims made a report to the police.⁵ Since it is estimated that less than one in eight assaults are reported⁶ most researchers rely on surveys to predict prevalence and occurrence rates.

The National Institute of Justice estimates that rape and other sexual assaults of adults cause an annual minimum loss of 127 billion dollars, or about \$508 per U.S. resident. This includes tangible losses such as initial police response, medical care, mental health services, property damage or loss, and loss of productivity; and intangible losses, such as loss of quality of life, pain, and suffering. These costs do not include the costs of investigation, prosecution or incarceration of offenders. This figure makes sexual assault the costliest crime, even higher than murder.⁷

What research and crime reports appear to document is the fact that sexual violence is a long-standing part of our society. Sexual violence is a common problem that affects many people and with it come both high human and monetary costs. Virtually every Oregonian knows a survivor of sexual violence. Our friends, neighbors, coworkers, parents, siblings and partners may be among the one in six, or 230,000, women in Oregon who've experienced forcible rape at some time in their lives.²



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Oregon's Sexual Violence Prevention Efforts

Current approaches to address sexual violence in Oregon are commonly secondary and tertiary prevention efforts.

- Secondary approaches are designed to decrease risks for those identified as most likely to become victims or offenders of sexual violence.
- Tertiary strategies reflect efforts to reduce repeat victimization or perpetration and focus on the impact of violence on victims and the accountability of offenders after sexual violence has occurred.

Current efforts emphasize punishing offenders, helping victims mitigate the damage of being assaulted, and providing information to individuals at risk to help them recognize, escape and resist potential assault.

Relatively speaking, a much smaller proportion of programs in Oregon are designed to provide primary prevention activities.

- Primary prevention refers to approaches that seek to eliminate the root cause of sexual violence and to stop sexual violence from ever occurring.

These interventions often focus on providing information and skills to large community groups and the public in general through lectures, institutionally based education (e.g., schools), and the media.

Tertiary efforts in Oregon include criminal penalties, offender registration, and mandated treatment for those convicted of sexual assault as well as advocacy, therapy and support for victims of sexual violence. In addition to services offered by community nonprofit programs, Oregon's criminal justice and mental health systems provide many tertiary services.

Secondary prevention programs in Oregon focus on at-risk groups and provide information to potential victims about recognizing, escaping and resisting potential assault.

Primary prevention activities have been undertaken in a number of Oregon communities. Educational programs that challenge the thinking behind rape myths and teach young people to engage in responsible behavior are examples of these primary prevention efforts. Local sexual and domestic violence non-profit advocacy agencies provide most of the known primary prevention efforts in Oregon, largely through school-based programs.



In Oregon, vital work has been done to help victims mitigate the trauma and costs of being assaulted and to identify offenders and hold them accountable for their actions. Local sexual and domestic violence agencies have spent years in Oregon promoting the status of women and resistance to male violence through education and self-defense classes and programs. Existing services need support to continue and expand. However the goal of this Plan of Action is to foster the development of primary prevention efforts to complement the more prevalent secondary and tertiary services in our state. In Oregon, many individuals and organizations recognize the need to promote prevention and expand their programs or scope of work to reflect their commitment to ending sexual violence. In addition to responding to sexual violence, they support sexual violence prevention by promoting healthy and safe attitudes and beliefs about sexuality, empowering those who witness violence (i.e., “bystanders”) to speak out, and by developing interventions for young people who display risk factors associated with becoming perpetrators.

“Promising Prevention Activities in Oregon”

Flirting or Hurting?, a curriculum used by Sexual Assault Support Services (SASS) in Eugene, involves multiple presentations to the same groups, separate presentations for males and females, and presenters of both genders.

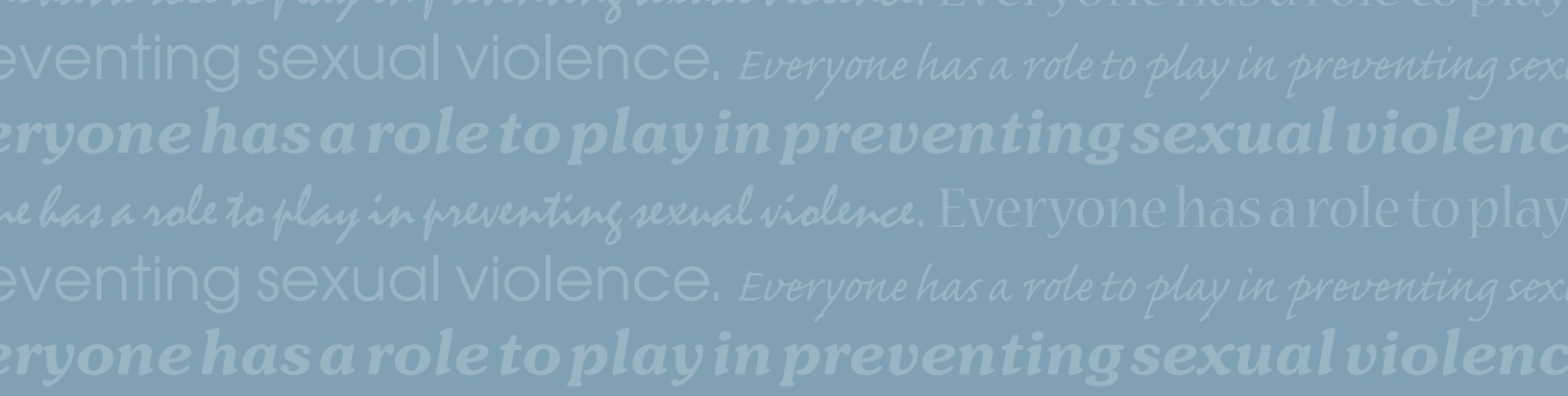
Community Works of Jackson County partnered with the Youth for Christ mentoring program. Adult mentors and youth were provided with information about the dynamics of sexual assault. The Community Works male teen outreach staff worked with men and boys on issues specific to men and sexual assault.

Portland-based Listen to Kids combines preschool and elementary programs on safety and abuse prevention for children with programs for parents and adult gatekeepers on: discussing safety, sexuality and sexual abuse with children; recognizing appropriate boundaries with children and; recognizing and dealing with adults who present a danger to children.

6. The lack of clear evidence about effective sexual violence prevention programs requires choosing promising directions and evaluating all efforts.

This Plan of Action recommends a focus on primary and secondary prevention strategies based on public health definitions of those terms. Primary prevention strategies are those designed to stop sexual violence before it occurs. Primary prevention strategies address the behaviors and conditions that support, condone, and lead to sexual violence. Secondary prevention reflects strategies that are designed to decrease risk factors that increase individuals' likelihood of becoming either a sexual violence victim or offender. These interventions are often referred to as risk-reduction strategies because they assist identified populations to recognize and avoid factors that lead to perpetration or victimization. In the case of both primary and secondary prevention, interventions seek to balance the reduction of risks with the promotion of strengths and healthy values in a complementary fashion. For example, reducing media that portrays women in a negative manner and simultaneously teaching young males values rooted in the equitable treatment of women can address risks related to the objectification of women.

Because of the broad scope of the problem, knowing where to start with sexual violence prevention initiatives can be overwhelming. In order to best use limited violence prevention resources, this Plan of Action focuses on groups that are most often identified in the literature as victims and/or perpetrators of sexual violence and then ties these populations to strategies that are effective in addressing their concerns. Since the majority of sexual assaults are perpetrated by males against females⁸ the emphasis of this plan is on preventing male violence directed towards female victims. Similarly, because the majority of rape victims are young women, this Plan of Action emphasizes prevention activities directed at youth. This is not to ignore other groups that are victims of sexual assault. Same-sex violence and sexual violence perpetrated against transgender and intersex individuals is an increasing problem, though it is largely unreported. Anecdotal evidence suggests that sexual minority communities may face increased risk of sexual violence in the form of hate crimes. Although this Plan recommends preventing sexual violence by focusing on male violence directed towards female victims, we maintain the commitment to preventing sexual violence in all of its forms.



Priority Populations

The World Health Organization (WHO) World Report on Violence and Health looked at the available international research on sexual violence and noted trends to assist in identifying who is most likely to become a perpetrator or a victim of sexual violence. The leading indicators, reinforced by data collected by criminal justice systems worldwide, begin with gender.^{9,10} That is, being male is the one broad risk factor found in all the available evidence on who will become a perpetrator of sexual violence. Likewise, being female is the one broad risk factor identified for likely victimization.

The available evidence cited by the WHO report also points to rigid gender roles, drug and alcohol use, childhood neglect and all forms of child abuse as risk factors which may increase the likelihood of sexual violence perpetration. Identified risk factors for victimization, aside from gender, point to poverty and neglect, and mental and physical developmental disabilities.

The selected priority populations for this plan have one thing in common; the fact that available evidence on sexual violence indicates that these groups are at particular risk for either committing or being victimized by sexual violence. The choice of these particular populations does not mean that other risk factors for sexual violence do not exist or that all risk factors have been identified and explained. Their selection offers opportunities for focusing limited resources where the most impact can be realized.

Based on available research, promising practices, and potential for positive change this Plan of Action identifies three priority groups for focusing Oregon's prevention programs:

1) Young women

Young women are the highest risk group for victimization. Young women would benefit from programs supporting a strong sense of self, negotiation skills, qualities of healthy relationships, and how to assist if witnessing violent behavior.

2) Young men

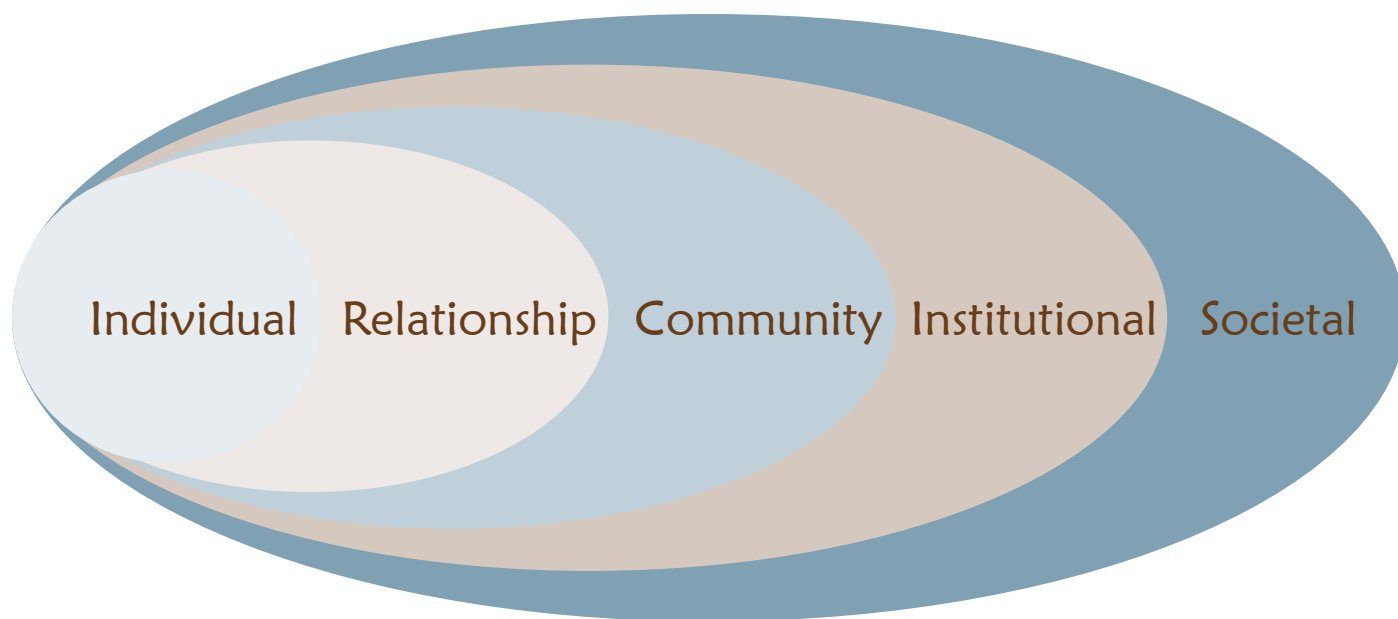
Because most perpetrators of both male and female victims are males, young men are at risk for learning the thinking errors that lead to perpetrating sexual assault.¹¹ Addressing the thinking of young men offers a unique opportunity to mold their beliefs about sexuality and sexual violence while they are forming and to redirect negative behaviors early in their lives. Not only are adolescents trying out different roles and behaviors, existing research suggests that young men conform to what they believe

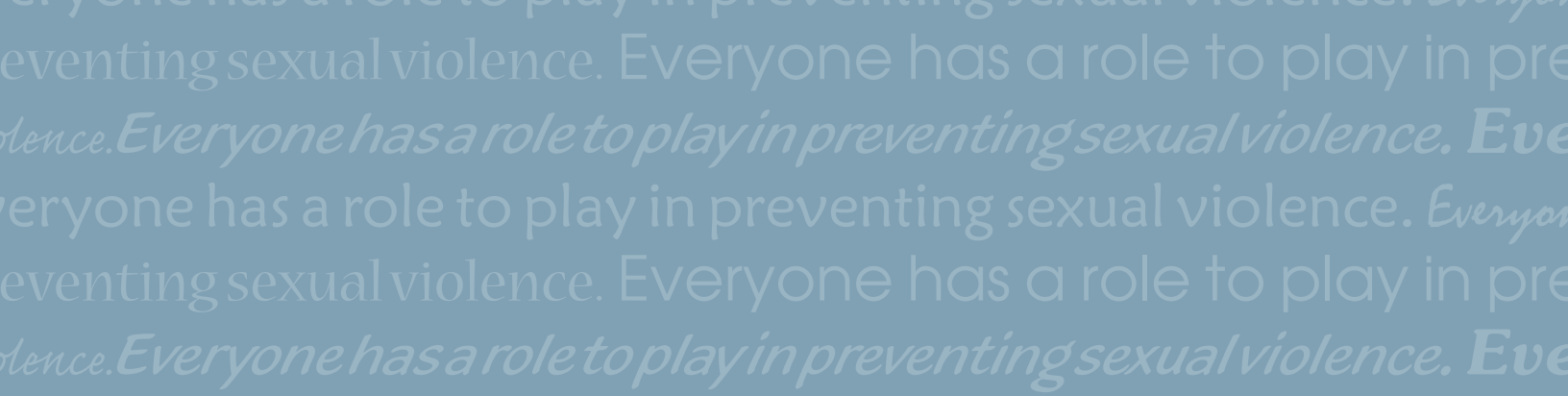
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Frameworks for Prevention:

The Ecological Model

Following the lead of The World Health Organization (WHO), this plan uses a modified version of the Ecological Model as a means to understand and organize violence prevention work. While sexual violence is committed by individuals, preventing that behavior requires taking into account multiple domains -- family, peers, community, institutions, media, broader society -- and their relative impact on individuals and their behavior. The ecological model recognizes that the individual is strongly influenced by domains, systems and norms, and that influencing each of these will reduce violence. The model is based on the recognition that no one group or institution can end sexual violence alone and that change needs to take place on the individual, relationship, community, institutional, and societal levels to truly impact the problem.⁹ Using a comprehensive model allows individuals and groups to identify where they can participate in prevention efforts given their strengths, resources, and experience.





It is too simple to see the ecological model as a model of separate spheres. Pictorial representations do not convey the complexity of societal influences on sexual violence at every level of the ecological model. Likewise, the other levels in the ecological model interact with and influence each other. Visualizing the model as three-dimensional, with societal influences as a thin overlay touching all the other levels, more accurately conveys the concept of how to think about the model when engaging in sexual violence prevention planning.

1. Individual

This level identifies biological and personal history factors that influence how individuals behave and that may increase or decrease their likelihood of becoming a victim or perpetrator of violence.

Examples of these factors are: gender, age, education, history of child abuse or neglect, income, psychological or personality disorders, substance abuse, and a history of behaving aggressively.

2. Relationship

The relationship level includes family, friends, intimate partners, mentors and peers and describes how they may increase or decrease the risk of being a victim or perpetrator of violence.

Examples of relationship influences are: having friends who engage in and encourage or discourage, violence and living in a home where there is mutual respect for all household members.

3. Community

This level explores the community contexts in which social relationships occur, such as sports facilities, community centers, parks and neighborhoods, and seeks to identify the characteristics of these settings that may increase or decrease the risk for violence.

Examples of community influences are: population density, employment trends and crime rates.



4. Institutional

At this level, consideration is given to the institutional processes and contexts which support or challenge norms that may lead to or prevent sexual violence.

Examples of institutional contexts are: school no-tolerance policies for violent or sexually harassing behavior, group home rules requiring staff training on recognizing and addressing inappropriate behaviors, press education and guidelines for reporting on sexual violence, and gender and economic equity initiatives by housing, financial and legal institutions.

5. Societal

This level explores broad societal factors that foster a climate in which violence may be encouraged or inhibited.

Examples of societal influences are: social norms that value having power over others, social and cultural norms that endorse or reject violence, social norms that support or deny male dominance over women and children, and media that glorifies or rebuffs violence.

The Spectrum of Prevention

Preventing sexual violence requires the recognition that conditions within our society and communities perpetuate this type of violence. The beliefs we share, the gender roles we reinforce, and the myths we validate all contribute to a climate in which sexual violence is permitted and condoned. Challenging the systems, norms and beliefs that enable people to wield power and control over others is among the most promising of approaches to prevent sexual violence before it occurs. Efforts of this nature foster a culture in which everyone takes action to reduce the factors that contribute to sexual violence.¹⁴

The Spectrum of Prevention developed by Larry Cohen and Susan Swift of the Prevention Institute reflects a framework, complementary to the Ecological Model, for thinking about various categories of preventive approaches. One strategy or approach will not eliminate complex social problems, such as sexual violence. Prevention efforts need to take place simultaneously on all levels of the spectrum. The Spectrum can help individuals, groups, and organizations develop a comprehensive violence prevention continuum based upon their existing efforts, and resources available.

**Sample Risk Factors and Prevention Responses for
Adolescent Female Population at Risk of Victimization**

Level of the Ecological Model	Possible Risk Factors	Primary Prevention	Secondary Prevention
Individual	Lack of accurate sexual knowledge	Provide sex education classes in schools that focus on healthy sexuality, mutuality, respect	Offer skills training (communication skills, social skills, belief in self, peer support) to at-risk groups of teens
Relationship	Families experiencing physical, verbal, and/or sexual violence	Provide parents and caregivers with parent training opportunities	Provide interventions to at-risk families, which may include: appropriate faith-based response, mental health response, extended family response, peer response
Community	Limiting girls' roles to specific spheres and arenas by rigid gender roles	Promote activities that demonstrate the value, skills and efforts of girls (i.e. sports, academia, work, volunteerism)	Train community members and community agencies to become more involved in guiding and supervising at-risk community teens
Institutional	Schools that lack clear policies regarding conduct (e.g., sexual harassment)	Encourage schools to develop policies promoting safe and violence-free environments	Target schools in high violence areas for tailored support to change school environment
Societal	Media messages that objectify and disrespect women and promote acceptance of violence against women	Implement a social norms campaign promoting respect for women in relationships and the appropriate treatment of women and children	Identify particular media with a history of producing violent and misogynistic entertainment and encourage them to develop more responsible programming. Engage celebrities to assist



Recommendations to Prevent Sexual Violence in Oregon

Having identified the components of promising sexual violence prevention programs, a comprehensive model for organizing efforts, and identified priority populations, the following recommendations can guide Oregon's initial steps to prevent sexual violence. Although not a complete list, these recommendations provide a framework for action.

Recommendations:

1. Increase the capacity of individuals, groups, and communities in Oregon to prevent sexual violence.
2. Increase the recognition that sexual violence is preventable.
3. Increase prevention efforts that recognize the unique cultural aspects of specific communities and groups.
4. Build upon existing expertise and promote community organizing on issues related to sexual violence.
5. Encourage healthy, non-violent interactions and diminish aspects of society that promote and support sexual violence.
6. Use evidence-based strategies, promote promising practices, and support model sexual violence prevention programs.
7. Broaden the scope and increase effectiveness of current prevention efforts through partnerships.
8. Support efforts to increase knowledge about effective prevention efforts through program evaluation.

Each recommendation is followed by five components:

- A. Rationale – Why this recommendation was selected
- B. Objectives – Measurable aims for achieving the recommendation
- C. Strategies – Overarching methods for accomplishing objectives, with levels of the Ecological Model addressed in parentheses
- D. Implementation activities – Examples of specific interventions, existing projects, ideas for future work
- E. Indicators of success – How to know when the project is successful; describes possible evaluation components or how objectives and activities can be achieved

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- Look for sources of technical assistance, such as local experts and other state/national agencies.
- Create a statewide sexual violence prevention training institute and resource center available to all.
- Identify resources to link sexual violence prevention experts to audiences needing prevention consultation.

Possible Indicators of Success

- Technical assistance/resource centers have been established. Lists of technical assistance providers have been compiled.
- Increased numbers of people, institutions, and communities have received tools to improve their capacity.
- Sexual assault prevention agencies and specialists have received an increase in the number of requests for technical assistance around preventing sexual violence.
- Technical assistance consultation needs have been met by experts in sexual violence prevention.



Implementation Activities:

- Create a directory of stakeholders, leaders and interested members wishing to work on sexual violence prevention within specific groups.
- Gather culturally specific, evidence-based prevention information to share with interested groups.
- Attend meetings and events of cultural groups who have an interest in sexual violence prevention.

Possible Indicators of Success:

- Increased numbers of culturally specific projects that address sexual violence.
- Increased numbers and diversity of community members participating in sexual violence prevention planning and implementation activities.



Recommendation 4:

Build upon existing expertise and support community organizing on issues related to sexual violence.

Rationale:

- Residents are the most knowledgeable about the values, traditions, and practices in their community that support and perpetuate violence and that can be used to intervene and stop it.
- Community residents and leaders have the willingness and capacity to develop skills needed to conduct sexual violence prevention and intervention activities.
- Often communities need the assistance and support of expert consultants to translate their knowledge of community and motivation into effective strategies for violence prevention – community organizing offers this type of consultation.

Objective:

- To promote and support established community leaders to organize around sexual violence prevention
- To gather information about how sexual violence is perceived and experienced within particular communities, and to determine communities' readiness to take action to prevent sexual violence
- To develop collaborative partnerships among community-based violence prevention initiatives

Strategies:

- Identify leaders, both formal and informal, who are connected to the community and are invested in the issue of sexual violence prevention. (Individual, Community)
- Use a community development process to understand the assets, needs, and associated prevention activities of the community. (Community)
- Identify and draw upon existing expertise within the community. (Individual, Community)

Implementation Activities:

- Survey the community to identify experts in sexual violence prevention.
- Identify and collaborate with existing violence prevention initiatives within the community.
- Conduct surveys and focus groups in the community around sexual violence and how it can be prevented.

Possible Indicators of Success:

- The level of participation of community members (# of members in the group, # of community groups represented, # of meetings attended over time)
- The number of experts identified initially and after any program implementation
- The number of new community partnerships
- The number of community assessments completed



Planned Parenthood of Southwestern Oregon's Teen Theater

Planned Parenthood of Southwestern Oregon Teen Theater performs original pieces that feature young people struggling with the pressures and decisions facing adolescents today. Its messages are rooted in positive self-image, taking care of oneself, healthy attitudes towards sexuality, respecting others, and healthy decision-making. Through theater, audiences are inspired to voice their own concerns, fears, and opinions. For more information, go to www.pphsso.org/education/teentheater.htm

Recommendation 5:

Encourage healthy, non-violent interactions and diminish aspects of society that promote and support sexual violence.

Rationale:

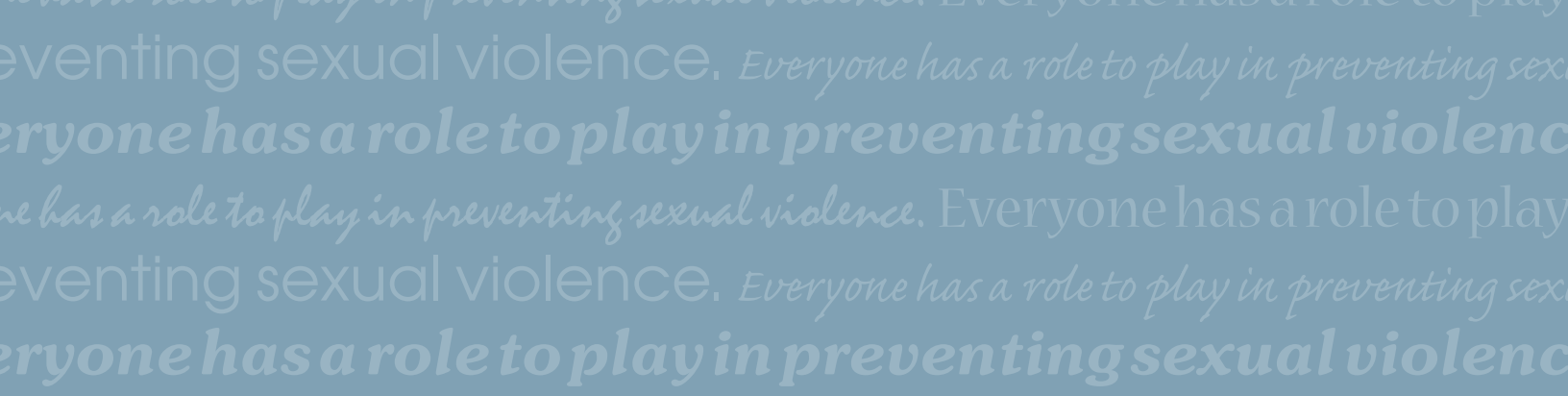
- Knowledge regarding healthy sexuality and relationships offers individuals the ability to make informed decisions.
- Commonly accepted negative attitudes and beliefs about traditional gender roles and masculinity support sexual violence.
- Individuals may be at greater risk of victimization because they lack power, status and credibility – often on the basis of gender, class, race, sexual orientation or ability.
- Individuals and society cannot be expected to change their behavior when their environment supports and encourages violence and disrespect.

Objective:

- To increase knowledge regarding healthy, non-violent interactions and relationships
- To address the laws, institutions, policies, practices and belief systems based on attitudes, behaviors and actions that may lead to sexual violence
- To identify and address the underlying causes of violence directed against marginalized groups

Strategies:

- Promote positive media images and messages of healthy, non-violent interactions and relationships. (Individual, Institutional, Societal)
- Support legislation and protocols to eliminate sexism and other forms of oppression (e.g. U.N. Convention on the Elimination of All Forms of Discrimination Against Women).[§] (Societal, Institutional)



- Develop social marketing and social norms campaigns that counter oppressive views. (Societal)
- Support and strengthen programs that teach families non-violent problem-solving skills. (Community, Institutional)

Implementation Activities:

- Pioneer a letter-writing campaign in support of advertisers that promote positive images and messages regarding healthy relationships.
- Advocate to eliminate discrimination and violence in the media.
- Identify high-quality curricula that promotes healthy, non-violent interactions and relationships.

Possible Indicators of Success:

- Number of individuals participating in healthy relationship trainings.
- Changes in media protocols to limit violent and oppressive messages.
- Increased number of individuals with accurate attitudes about healthy, non-violent interactions and relationships.

Family Violence Prevention Fund's

"Coaching Boys into Men" Campaign

"Coaching Boys into Men" emphasizes the need for boys to have positive male influence in their life.

Boys are swamped with influences outside of the home – from friends, the neighborhood, television, the internet, music, the movies... everything they see around them. They hear all kinds of messages about what it means to "be a man" – that they have to be tough and in control. There are numerous conflicting and some harmful messages being given to boys about what constitutes "being a man" in a relationship.

Boys need advice on how to behave toward girls. Boys are watching how men relate to women to figure out their own stance towards girls. Teach boys early, and teach them often, that there is no place for violence in a relationship. For more information see:

<http://endabuse.org/cbim>

Recommendation 6:

Use evidence-based strategies, promote promising practices, and support model sexual violence prevention programs.

Rationale:

- Public health surveillance, epidemiologic studies and other research provides information on risk factors related to sexual violence that can indicate specific forms of prevention strategies most likely to be successful.
- Promising public health prevention approaches for other issues (smoking, substance abuse, etc.) have been found to be successful. Successful strategies may be adapted to sexual violence prevention.
- Because little research has been conducted on sexual violence prevention efforts, there is a need to develop new strategies.

Objective:

- To prioritize resources to address specific populations that evidence shows may be at risk of becoming sexual violence victims or offenders
- To increase the effectiveness of sexual violence prevention programs
- To identify and implement successful and replicable sexual violence prevention activities across the ecological model

Strategies:

- Develop and disseminate information that outlines evidence-based and promising prevention approaches in sexual violence and other behavioral risk areas. (Community, Institutional)
- Support policies that direct funding to areas or groups in greatest need of prevention efforts. (Institutional)

Everyone has a role to play in preventing sexual violence. Everyone has a role to play in preventing sexual violence. Everyone has a role to play in preventing sexual violence. Everyone has a role to play in preventing sexual violence. Everyone has a role to play in preventing sexual violence. Everyone has a role to play in preventing sexual violence. Everyone has a role to play in preventing sexual violence. Everyone has a role to play in preventing sexual violence.

Implementation Activities:

- Develop materials that identify key risk factors related to sexual violence.
- Require funded programs to use evidence-based models.
- Create avenues for networking and sharing information about promising practices.

Possible Indicators of Success:

- The adoption of funding policies that require working with priority populations and using evidence-based practices.
- The number of evidence-based prevention programs active in Oregon.



Recommendation 7:

Broaden the scope and increase effectiveness of current prevention efforts through partnerships.

Rationale:

- The causes of sexual violence cannot be eliminated without investment by a broad spectrum of society.
- Collaborations can provide a foundation for developing better-coordinated interventions and prevention curricula.
- Establishing relationships with individuals, organizations, and companies not currently associated with sexual violence prevention can enrich existing prevention programs and foster the development of new and innovative programs.

Objectives:

- To broaden the scope of prevention work by establishing new collaborative relationships with individuals, organizations, and agencies who represent both traditional and non-traditional sexual violence prevention partners
- To increase power and leverage of prevention efforts at many levels by identifying needs and benefits that could be addressed through the establishment of collaborative relationships

Strategies:

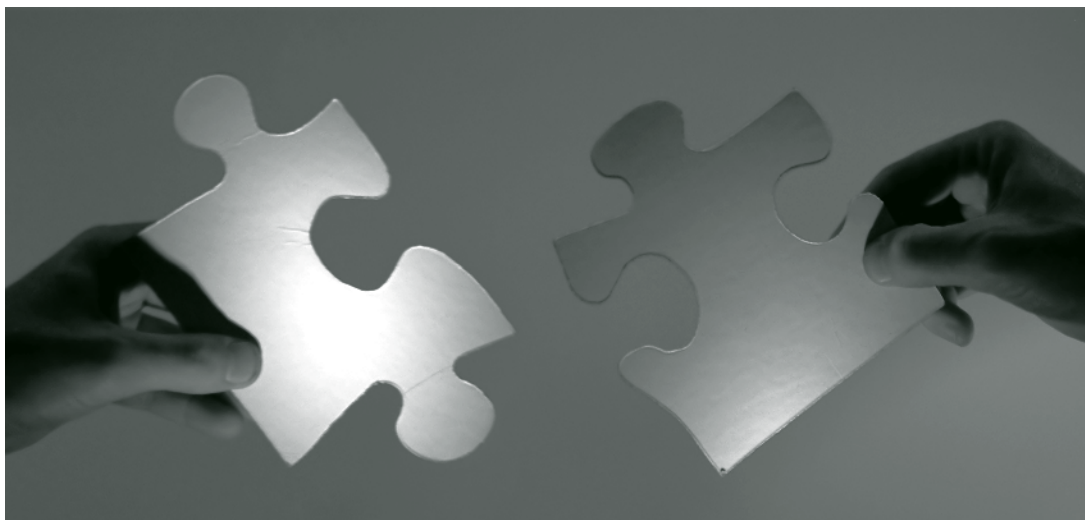
- Create coalitions and partnerships of groups working on violence prevention. (Community, Institutional)
- Establish relationships with other agencies that provide services to specific audiences, (e.g. sexual violence survivors). (Community, Institutional)
- Educate business and policy makers on the value and economy of prevention. (Community)
- Identify traditional and non-traditional collaborations that may be effective in addressing sexual violence. (Community, Institutional)
- Identify role models, media spokespersons and elected officials to publicly promote collaborations to address sexual violence. (Individual, Community, Institutional)

Implementation Activities:

- Collaborate on grant submissions and staff training around sexual violence prevention with other agencies involved with rape prevention education.
- Invite the participation of community members of diverse organizations and multi-disciplinary professionals to generate effective community strategies that address the causes of sexual violence.
- Identify the types of expertise and services that organizations can share as part of a collaborative relationship.

Possible Indicators of Success:

- The number of collaborations established within the sexual violence prevention field
- The number of collaborations between victim and treatment organizations and agencies
- The number of collaborations established with organizations outside of the sexual violence prevention field
- Measurable increase in the scope and effectiveness of sexual violence prevention efforts



Recommendation 8:

Support efforts to increase knowledge about effective prevention efforts through evaluation and research.

Rationale:

- Evaluation offers a means of assessing the strengths and weaknesses of prevention programs.
- Evaluation allows programs to tailor prevention efforts and track progress for particular community groups and types of sexual violence.
- Research is needed to define and promote evidence-based strategies.

Objectives:

- To incorporate an ongoing program evaluation component in all sexual violence prevention programs
- To utilize evaluation feedback in the the modification, tailoring, and improvement of prevention strategies
- To increase the understanding of and ability to implement program evaluation
- To engage academic researchers in in program evaluation

Strategies:

- Advocate for funding and establish requirements for program evaluation to be a part of all prevention efforts. (Community, Institutional)
- Encourage the dissemination of evaluation findings that would offer directions for improving prevention programming. (Community, Institutional)
- Partner with researchers to investigate the efficacy of promising practices. (Institutional)
- Involve stakeholders in evaluation design and implementation. (Community)

Implementation Activities:

- Require funded programs to set aside a certain proportion of their budget (e.g. 10%) for evaluation purposes.
- Conduct workshops to educate program providers on evaluation and research techniques and methods.
- Provide technical assistance related to evaluation.

Possible Indicators of Success:

- The number of prevention programs with ongoing program evaluation components
- Number of evaluation trainings offered to prevention programs
- Number of requests for and hours of technical assistance on evaluation provided to prevention programs
- Measurable increase in effectiveness of funded prevention programs
- Number of partnerships with academic researchers conducting investigation in sexual violence prevention



Endnotes

¹ Koss MP and Heslet L. Somatic consequences of violence against women. *Archives of Family Medicine*, 1: 53-9, 1992.

² Kilpatrick, DG & Ruggiero, KJ. (2003). *Rape in Oregon: A Report to the State*. Charleston, SC: National Violence Against Women Prevention Research Center, Medical University of South Carolina.

³ Federal Bureau of Investigation. *Crime in the United States 2002*. Uniform Crime Report: 2002

⁴ Bachar K.K., Mary P.; (2000) From Prevalence to Prevention Closing the Gap Between What We Know About Rape and What We Do. *Sourcebook on Violence Against Women*. Chapter 7: 117-142.

⁵ Oregon Women's Health and Safety survey, 2001-2002. Available from: <http://www.dhs.state.or.us/publichealth/ipv/index.cfm>

⁶ Kilpatrick, D. G., C. N. Edmunds, and A. K. Seymour. 1992. *Rape in America: A Report to the Nation*. Arlington, VA: National Center for Victims of Crime; Charleston, SC: Medical University of South Carolina.

⁷ US Department of Justice, *Victim Costs and Consequences: A New Look*, 1996; Summary by Virginians Aligned Against Sexual Assault.

⁸ Tjaden P, Thoennes N. Prevalence, incidence and consequences of violence against women: Findings from the national violence against women survey. Full Report. Washington, D.C.: U.S. Department of Justice, 2000; DOJ publication No. NCJ 183781

⁹ Krug EG et al., eds. *World report on violence and health*. Geneva, World Health Organization, 2002.

¹⁰ Greenfield (1997). *Sex Offenses and Offenders*. Bureau of Justice Statistics, U.S. Department of Justice.

¹¹ Kilpatrick DG, Edmunds C, Seymour A. (1992). *Rape in America: A report to the nation*. Charelston, SC: National Victim Center and Crime Victims Research and Treatment Center, University of South Carolina.

¹² Berkowitz, A. "Fostering Men's Responsibility for Preventing Sexual Assault" in Schewe, Paul (2002) *Preventing Violence in Relationships: Interventions Across the Life Span*. American Psychological Association Chapter 7. 2002.

¹³ Valenti-Hein, D. & Schwartz, L. (1995). *The sexual abuse interview for those with developmental disabilities*. James Stanfield Company. Santa Barbara: California.

¹⁴ Cohen L. Swift S. The Spectrum of Prevention: Developing a comprehensive approach to injury prevention. *Injury Prevention* (1999;5:203-207)

Explanatory Notes

†

- Overall, 12.3% of Black students, 10.4% of Hispanic students, and 7.3% of White students reported forced sexual intercourse (CDC 2004). Centers for Disease Control and Prevention. Youth Risk Behavior Surveillance—United States, 2003. *MMWR* 2004;53(SS-02):1–96. According to the National Violence Against Women Survey, American Indian and Alaskan Native women were significantly more likely (34%) to report that they were raped than African American women (19%) or White women (18%). (Tjaden and Thoennes 2000). Tjaden P, Thoennes N. Full report of the prevalence, incidence, and consequences of violence against women: findings from the national violence against women survey. Washington (DC): National Institute of Justice; 2000. Report NCJ 183781.
- Poverty may make the daily lives of women and children dangerous (e.g. walking alone at night, less parental supervision) and put them at greater risk for experiencing sexual violence (Krug et al. 2002). In addition, poor women may be at risk for sexual violence because their economic status forces them into certain high risk occupations, including prostitution (Irwin et al. 1995). Irwin KL, Edlin BR, Wong L, Faruque S, McCoy HV, Word C, Shilling R, McCoy CB, Evans PE, Holmberg SD. Urban rape survivors: characteristics and prevalence of human immunodeficiency virus and other sexually transmitted infections. *Obstetrics and Gynecology* 1995;85:330–36.

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For full text of the Convention on the Elimination of All Forms of Discrimination against Women go to <http://www.un.org/womenwatch/daw/cedaw/cedaw.htm>

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Appendices

Appendices

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Steering Committee

This Plan of Action grew out of a May 2003 prevention forum where educators, advocates, and their allies met to discuss the state of sexual assault prevention in Oregon. Sponsored by the Attorney General's Sexual Assault Task Force (SATF), Department of Human Services, Office of Family Health (DHS OFH), and the Oregon Coalition Against Domestic and Sexual Violence (OCADSV), the forum was designed to initiate a statewide collaborative process to address sexual assault prevention.

A Sexual Violence Prevention Plan Steering Committee convened throughout 2003-2004 under the auspices of the SATF and developed the Plan as a group and agreed upon its central themes and its recommendations.

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**Sample Risk Factors and Prevention Responses for
Adolescent Male Population at Risk of Perpetration**

Level of the Ecological Model	Possible Risk Factors	Universal Audience (strategies designed to affect all adolescent males, regardless of risk factors)	Selected Audience (programs for adolescent males identified as “at-risk” for perpetration)
Individual	<ul style="list-style-type: none"> o Being male o Hyper-masculine gender identity o Low valuation of girls and women o Key skills deficits (poor social and interpersonal skills) o Personal alienation and marginalization o High use of pornography, especially depicting violence 	<ul style="list-style-type: none"> o Ongoing community (e.g., faith-based) and/or school-based classes, training or workshops that teach skills and provide information to adolescent males o Provide boys with peer opportunities to promote status of women and girls 	<ul style="list-style-type: none"> o School-based screening to identify teens with key skills deficits o Skills training (e.g., social skills, training in bystander intervention) o Sex education classes
Relationship	<ul style="list-style-type: none"> o Friendship with peers who condone violence and objectification of women o Lack of positive role models o Families experiencing neglect, physical, verbal, and/or sexual violence 	<ul style="list-style-type: none"> o Provide parents and caregivers with parent training opportunities o Develop enhanced social support networks o Social marketing efforts to influence peer relationships 	<ul style="list-style-type: none"> o Provide information to address myths regarding violence in relationships o Family therapy approaches (e.g., Multi-Systemic Therapy) for at-risk families o Treatment to address interpersonal relationships
Community	<ul style="list-style-type: none"> o Alienation and marginalization o Acceptance of violence, rape myths, and objectification of women o Lack of community member involvement in guiding and supervising teens 	<ul style="list-style-type: none"> o Promote programs that increase resources to economically deprived areas o Use social norms approaches to strengthen healthy community norms rejecting violence, rape myths and objectification of women 	<ul style="list-style-type: none"> o Support organizing and program development for specific marginalized areas of the community o Identify mentors and provide training to influence attitudes and behaviors rejecting violence and sexual violence o Train community members to become more involved in guiding and supervising community teens

<p>Institutional</p>	<ul style="list-style-type: none"> o Political and economic policies perpetuating female poverty, disempowerment and victimization o Schools that lack clear policies regarding conduct (e.g., sexual harassment) o Increased access to pornography 	<ul style="list-style-type: none"> o Work for political and economic policies which empower women o Encourage schools to develop policies promoting safe environments o Support the development of effective pornography blocking software; lobby internet providers for restrictions on pornography 	<ul style="list-style-type: none"> o Target schools for tailored support to change school environment o Identify internet providers who provide the least restrictions on pornography on their sites and develop campaigns to change those policies o Influence regulatory agencies to address internet providers who don't adequately protect teens
<p>Societal</p>	<ul style="list-style-type: none"> o Exposure to violence in the media o Exposure to media messages that objectify women o Low status of women o Homophobia 	<ul style="list-style-type: none"> o Social Norms campaigns addressing misperceptions about violence in relationships, the value of women and children, and bystanders' responsibility to intervene 	<ul style="list-style-type: none"> o Identify particular media - TV shows, TV stations, and movie studios - which produce violent and/or misogynistic entertainment and encourage more responsible programming



Sample Risk Factors and Illustrative Prevention Responses for Persons with Developmental Disabilities (DD) at Risk of Victimization

Level of the Ecological Model	Possible Risk Factors	Universal Audience (programs designed for all persons with DD and those who work with them)	Selected Audience (programs for persons with DD identified at risk of victimization)
Individual	<ul style="list-style-type: none"> o Lack of accurate sexual knowledge relationship development, including victimization and how to report o Lack of mobility o Dependent status o Language skills 	<ul style="list-style-type: none"> o State/County agency classes, training or workshops that increase awareness and provide sexual assault reporting procedures o Provide information on victimization awareness in schools (special needs class) 	<ul style="list-style-type: none"> o DD case management and schools screening to identify DD persons that may be vulnerable. o Skills training (e.g., social skills, seeking help, how to report sexual assault) o Sex education and relationship classes
Relationship	<ul style="list-style-type: none"> o Lack of positive, supportive friendships o Lack of positive role models o Physical verbal, and/or sexual violence perpetrated in family 	<ul style="list-style-type: none"> o Provide parents, DD agencies and caregivers with training opportunities in fostering relationships o Develop enhanced social support networks o Social marketing efforts to influence peer relationships 	<ul style="list-style-type: none"> o Provide relationship skills information to people with DD o Provide monitoring approaches for “at-risk” DD persons in supervised living settings o Offer treatment to address interpersonal relationships
Community	<ul style="list-style-type: none"> o Lack of resources due to poverty o Acceptance of violence, rape myths, and objectification of women o Lack of community member involvement in guiding and assisting persons with DD o Ignorance of reality of sexual assault due to myths about DD and lack of accountability 	<ul style="list-style-type: none"> o Promote programs that increase resources to economically deprived areas o Use social norms approaches to strengthen healthy community norms regarding violence, rape myths and objectification of women o Inform community about risks faced by persons with DD 	<ul style="list-style-type: none"> o Target particular areas of communities for empowerment training and organizing o Identify mentors and provide training to influence attitudes and behaviors regarding violence and sexual violence o Screen and train community members and caregivers to become more involved in guiding and assisting DD persons in the community who are at risk or have been victimized o Increased understanding of the risks of sexual violence of DD persons

<p>Institutional</p>	<ul style="list-style-type: none"> o Supervised DD settings that lack clear policies regarding conduct (e.g., sexual harassment) o Lack of caregiver understanding regarding sexual offending issues and impact of victimization 	<ul style="list-style-type: none"> o Encourage State/County DD systems to develop policies promoting safe and violence free environments. o Encourage DD agencies to provide public information regarding victimization risk for DD persons 	<ul style="list-style-type: none"> o Target areas for tailored support to change living environments for DD persons. o DD agencies campaign for awareness of legal rights and; identifying and reporting sexual assault outside DD agencies (e.g. Special Olympics) o Train SANEs and SART members regarding victimization issues unique to DD persons
<p>Societal</p>	<ul style="list-style-type: none"> o Exposure to media messages that objectify women o Myths that restrict or present barriers to persons with DD from developing mutual intimate relationships 	<ul style="list-style-type: none"> o Social Norms campaigns correcting misperceptions about the acceptance of violence in relationships o Public presentations of persons with DD as loving/intimate partners 	<ul style="list-style-type: none"> o Encourage media - TV shows, TV stations, and movie studios to show persons with DD as partners (marriage, dating) with lives similar to non-DD persons



Sample Risk Factors and Illustrative Prevention Responses for Adolescent Female Population at Risk of Victimization

Level of the Ecological Model	Possible Risk Factors	Universal Audience (strategies designed to affect all adolescent girls, regardless of other possible risk factors)	Selected Audience (programs for adolescent girls identified as “at-risk” for victimization)
Individual	<ul style="list-style-type: none"> o Being female o Age o Any cognitive or physical impairment o Non-English speaking o Runaway or homeless o Lack of understanding of sexuality and sexual violence 	<ul style="list-style-type: none"> o Ongoing community and school-based efforts to teach life skills, self-empowerment and provide information about sexual assault o Sex education classes that focus on healthy sexuality, mutuality, respect 	<ul style="list-style-type: none"> o School-based screening to identify teens lacking family or peer support systems o Skills training (communication skills, social skills, belief in self, peer support)
Relationship	<ul style="list-style-type: none"> o Past personal victimization o Mother has survived sexual assault o Friendship with peers that condone violence and objectification of women o Physical, verbal, and/or sexual violence perpetrated in family 	<ul style="list-style-type: none"> o Provide parents and caregivers with parent training opportunities o Foster enhanced peer and social support networks o Social marketing efforts to demonstrate respect and value of girls and women 	<ul style="list-style-type: none"> o Provide information to address myths regarding violence in any relationship o Organize peer support to promote healthy interactions / peer accountability o Family interventions, which may include: appropriate faith-based response, mental health response, extended family response, peer response



<p>Community</p>	<ul style="list-style-type: none"> o Acceptance of violence, rape myths, and objectification of women as the norm o Promoting adolescent girls’ attractiveness as their primary asset o Limiting girls’ roles to specific spheres and arenas o Lack of community member involvement in guiding and supervising teen girls o Lack of community support for the promotion of gender equity 	<ul style="list-style-type: none"> o Use social norms approaches to strengthen healthy community norms rejecting violence, rape myths, and objectification of women o Promote activities that demonstrate the value, skills and efforts of girls (i.e. sports, academia, work, volunteerism) o Promote community visual images of girls that value qualities other than physical appearance 	<ul style="list-style-type: none"> o Target particular communities for empowerment training and organizing o Identify mentors and provide training to influence attitudes and behaviors regarding violence and sexual violence o Train community members and community agencies to become more involved in guiding and supervising community teens
<p>Institutional</p>	<ul style="list-style-type: none"> o Public and private resources that disproportionately go to support activities and programs for boys o Schools that lack clear policies regarding conduct (e.g., sexual harassment) o Discrimination within institutions based on gender 	<ul style="list-style-type: none"> o Set public policy ensuring gender equity in resource allocation o Encourage schools to develop policies promoting safe and violence-free environments o No tolerance of sexual discrimination within institutions o Promote civil rights/ remedies for girls and women 	<ul style="list-style-type: none"> o Promote equitable use of public resources for programs for girls and boys o Target schools in high violence areas for tailored support to change school environment o Develop best practices and evaluation methods to address gender discrimination and harassment in organizations o Publish accessible materials on personal protections & rights offered to females
<p>Societal</p>	<ul style="list-style-type: none"> o Acceptance of the higher value of male lives and activities o Exposure to violence and pornography o Media messages that objectify and disrespect women and; promote acceptance of violence against women 	<ul style="list-style-type: none"> o Social norms campaign strengthening values which honor the roles and activities of girls and women o Social norms campaign promoting respect for women in relationships and the appropriate treatment of women and children o Promote gender equity and the status of women 	<ul style="list-style-type: none"> o Create public opportunities to reflect on the achievements and accomplishments of women and girls o Identify particular media with a history of producing violent and misogynistic entertainment and encourage them to develop more responsible programming. Engage celebrities to assist

Sexual Violence Data Sources and Limitations

Sexual Assault

Data sources and limitations:

Data on sexual assault in Oregon come from three main sources: the “Rape in Oregon” report (derived from two national surveys), the Oregon Behavioral Risk Factor Surveillance System (BRFSS), and the Oregon Healthy Teens Survey. All of these are population-based telephone surveys, with the exception of Oregon Healthy Teen (OHT), which is a self-administered questionnaire that students complete in a participating sample of Oregon schools. The “Rape in Oregon” report is based on data from the National Women’s Survey (NWS) and the National Violence Against Women Survey (NVAWS). Both of these used large samples, focused solely on women’s health and victimization issues, and used only female interviewers.

The BRFSS is a telephone survey of adults that covers a wide range of health topics and uses both male and female interviewers. Likewise, the OHT covers a wide range of health topics, of which violence is only a small part. It is suggested that the best data on sexual assault would come from a statewide survey specifically focused on sexual assault and other types of violence.¹

As yet, no such survey has been conducted in Oregon.

Prevalence of rape in Oregon:

- One in six adult women in Oregon (about 230,000 women) has been the victim of forcible rape in her lifetime.ⁱ
- The five-year prevalence of forced sex for Oregon women 20-55 who responded to the BRFSS was 3.2% (95% CI: 2.3%-4.4%).²
- 6% of Oregon’s 8th grade females and 7% of Oregon’s 11th grade females have been physically forced to have sex.³

Dynamics of rape:

When children, adolescents, and adult women are raped, most commonly it is by someone they know. Nationally, almost 60% of women who have been forcibly raped were first raped in childhood (under age 18). Nearly 30% were raped before age 13. Almost two-thirds of women raped as adults are raped by intimate partners.⁴

Stalking

Data source and limitations:

The following data are from the Oregon Women’s Health & Safety Survey, conducted in

2001-2002 with a random sample of 2,962 Oregon women age 20-55 years. Stalking is defined as repeated harassing or threatening behaviors toward a specific person that would make a reasonable person feel fear. The Oregon survey asked women if they had experienced one or more types of harassing behavior on more than one occasion, perpetrated by the same person.

Harassing behaviors included unwanted contact (through letters, calls, or items), being followed or spied on, having property vandalized, or having a pet threatened, harmed, or killed. The survey did not measure the level of fear that the victim felt, so these data may not be directly comparable to other measures of stalking.

Prevalence of stalking in Oregon

In a survey of Oregon women age 20-55, 13% (about 111,000 women) said they had been stalked in a 5-year period. Intimate partners stalked two third of the women who experienced stalking. Of those stalked by an intimate partner, 63% said it happened during the course of the relationship, while 37% said it only happened after the relationship was over.⁵

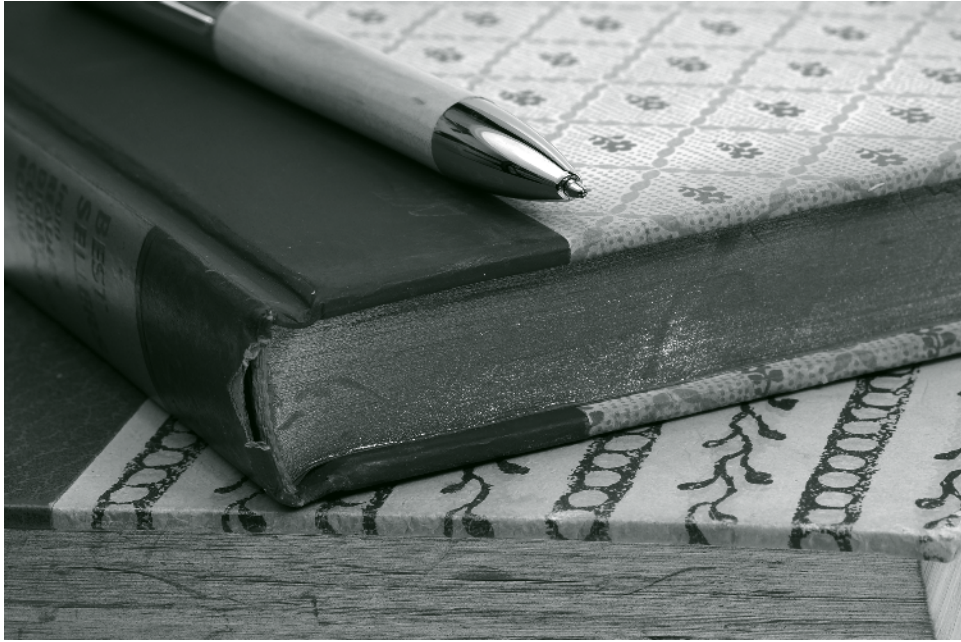
ⁱ Kilpatrick D, Ruggiero K. (2003). Rape in Oregon: A Report to the State. Charleston, SC: National Violence Against Women Prevention Research Center, Medical University of South Carolina.

ⁱⁱ Oregon BRFSS. Available at: <http://www.dhs.state.or.us/publichealth/chs/brfss.cfm>.

ⁱⁱⁱ Oregon Healthy Teens Survey, 2002. Available at <http://www.dhs.state.or.us/publichealth/chs/yrbsdata.cfm>.

^{iv} Tjaden P, Thonennes N (2000). Full Report on the Prevalence, Incidence, and Consequences of Violence Against Women. Washington, D.C.: U.S. Department of Justice; DOJ Publication #NCJ183781.

^v Oregon Women's Health & Safety Survey, 2001-2002. Available at <http://www.dhs.state.or.us/publichealth/ipv>.



Glossary

Glossary

Bystander: A person who is present during or witnesses an event without being an active participant.

Community Accountability: A concept involving, or strategies that involve, encouraging communities to take responsibility for preventing and ending sexual violence or other forms of violence and oppression. Community accountability has the following principles: 1) collective action; 2) prioritizing safety for survivors; 3) self-determination; 4) re-thinking and building community (beyond the notion of community as defined by geography; redefining community in terms of religious affiliation, employment, hobbies, etc.); and 5) exposing the ineffectiveness of the criminal justice system to address gender violence.¹

Community Development: Collaborative, collective action taken by local people to enhance the long-term social, economic, and environmental conditions of their community. The primary goal of community development is to create a better overall quality of life for everyone in the community.

Community Organizing: A process by which community groups are helped to identify common problems or goals, mobilize resources, and in other ways develop and implement strategies for reaching goals they have set.²

Developmentally Disabled: One who has a severe, chronic disability that is attributable to a mental or physical impairment, manifested before the person attains age 22, likely to continue indefinitely, results in substantial functional limitations in several areas of major life activity, and reflects the need for individually planned support and/or assistance for an extended duration.

Ecological Model: A model that illustrates the complex interplays of individual, relationship, community, institutional, and social factors. The ecological model explores the relationship between individual and contextual factors and considers violence as the product of multiple levels of influence on behavior.

Evidence-Based Practice: Ways of working based on the best available evidence, either from the research literature or expertise.

Marginalized Community: A group relegated or confined to a lower or outer limit of social standing.

Primary Prevention: Prevention activities designed to stop a negative event from ever occurring. Primary prevention of sexual violence stops sexual violence *before it occurs* by addressing the root causes, behaviors and conditions that support, condone and lead to sexual violence.

Public Health Model: an approach for examining a health behavior or outcome that 1) emphasizes prevention rather than treatment, 2) offers a solution-focused methodology involving four steps: define the scope of the problem, determine the cause of the problem, determine effective interventions and implement the interventions, and 3) stresses a multi-disciplinary approach.³

Rape: The crime of forcing another person to submit to sex acts, especially sexual intercourse. In Oregon, rape is a legal term referring to vaginal penetration by a penis in situations where force is used or when a person is unable to consent because of age or incapacitation.

Secondary Prevention: Prevention activities designed to intervene when risk factors or early indicators of risk are present. These strategies are sometimes called *risk-reduction strategies* and in sexual violence prevention, it includes work to assist identified populations recognize and avoid victimization or perpetration of sexual assault.

Sexual Abuse: The forcing of unwanted sexual activity by one person on another, as by the use of threats or coercion. Sexual activity that is deemed improper or harmful, as between an adult and a minor or with a person of diminished mental capacity. In Oregon, sexual abuse is a legal term referring to sexual contact where force, or threat of force is used, or when the person is unable to consent because of age or incapacitation.

Sexual Assault: Conduct of a sexual or indecent nature toward another person that is accompanied by actual or threatened physical force or that induces fear, shame, or mental suffering. Any nonconsensual sexual act. A sexual act is nonconsensual if inflicted on a person unable to grant consent OR if it is unwanted and compelled through the use of physical force, manipulation, coercion, threats, or intimidation.⁴

Sexual Violence: Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed, against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work.⁵

Social Marketing (campaigns): The application of commercial marketing technologies to the analysis, planning, execution and evaluation of programs designed to influence the voluntary behavior of target audiences in order to improve their personal welfare and that of their society.⁶ Public health campaigns to reduce smoking and drunk driving are successful examples.

Social Norms (campaigns): The cultural and social norms expressed and supported by community, media and institutions as the accepted standards of behavior and attitude for individuals, relationships and communities. Social norms campaigns attempt to address and promote the positive reality of what is happening in a society rather than what people may think is happening. Social norms campaigns designed to prevent sexual violence that would establish that most men do not accept sexual violence show promise in encouraging male peers to adopt and support attitudes of gender equality and nonviolence.

Tertiary Prevention: Prevention activities designed to minimize the negative effects of violence. These activities focus on the impact on victims and accountability of offenders after sexual violence occurs. In sexual violence prevention, tertiary strategies include the services provided in immediate response to and long-term support of victims of sexual assault. Tertiary prevention recognizes that victims and perpetrators of sexual violence are at increased risk for many unhealthy outcomes, including future victimization and perpetration, and attempts effective intervention.

¹ Incite! 2003

² Minkler, 1990

³ William Foege, MD, MPH, Mark Rosenberg, MD, MPP, and James Mercy, PhD "Public Health and Violence Prevention," Current Issues in Public Health 1995, 1:2-9.

⁴ Oregon Attorney General's Sexual Assault Task Force, 2003

⁵ World Report on Violence and Health, World Health Organization, 2002, pg. 149

⁶ Alan Andreasen, "Marketing Social Change"

Web-Based Resources

The **Family Violence Prevention Fund** works to prevent violence within the home, and in the community, to help those whose lives are devastated by violence because everyone has the right to live free of violence. This site contains many useful violence prevention tools.

<http://endabuse.org>

The **Interpersonal Violence Prevention Information Center** promotes healthy relationships and aims to prevent gender-based violence across the life span. The website contains links to promising programs.

<http://tiger.uic.edu/~schewepa>

Jackson Katz is widely recognized for his groundbreaking work in the field of gender violence prevention education with men and boys, particularly in sports and the military.

www.jacksonkatz.com

The **Sexual Violence Prevention Program of the Minnesota Department of Health** helps people and organizations find effective ways to prevent sexual violence. This site has useful tools for many different audiences and links to sexual violence prevention curricula.

www.health.state.mn.us/injury/topic/svp

The **National Sexual Violence Resource Center (NSVRC)** is a comprehensive collection and distribution center for information, statistics, and resources related to sexual violence.

www.nsvrc.org

The **Oregon Attorney General's Sexual Assault Task Force** mission is to develop and support an effective, consistent, and collaborative approach to the response to and reduction of adult and adolescent sexual assault in Oregon. This site provides information on current sexual assault prevention and response activities and trainings throughout Oregon.

www.oregonsatf.org

End Sexual Violence Oregon provides information on sexual violence prevention with links to resources and relevant websites.

www.endsexualviolenceoregon.org

The **Prevention Institute** is a non-profit national center dedicated to improving community health and well-being by building momentum for effective primary prevention by taking action to build resilience and to prevent problems before they occur.

www.preventioninstitute.org

The **National Violence Against Women Prevention Research Center** website (NVAWPRC) is sponsored by the Centers for Disease Control and Prevention. This website for scientists, practitioners, advocates, grassroots organizations, and any other professional or lay person interested in current topics related to violence against women and its prevention.

www.vawprevention.org

The **Oregon Coalition Against Domestic and Sexual Violence** mission is to raise awareness about or regarding violence against all women and children and to work towards non-violence through leadership in advocacy, public policy, resource development, and social change.

www.ocadsv.com

Acknowledgements

Thanks to the following individuals for their time and energy in reviewing and commenting on the Plan:

Alan Berkowitz	Virginia Henderson
Nan Stein	Marti Wicks
Marcia Hall	Terry Walker
Paul Schewe	Liz Tarrant
Karen Lang	Daniela Letz

Thanks to the following individuals for their time and energy in assisting the Plan's steering committee in developing and finalizing the plan:

Brie Akins	Attorney General's Sexual Assault Task Force
Nancy Slavin	Tillamook Women's Crisis Service
Paul Schewe	University of Illinois at Chicago
Sandra Clark	Portland Women's Crisis Line
Alan Berkowitz	Prevention Researcher and Consultant
Virginia Martin	Sexual Assault Resource Center
Karen Lang	U.S. Centers for Disease Control
Liz Tarrant	Women's Safety and Resource Center
Corinne Graffunder	U.S. Centers for Disease Control
Wanda Powless	Klamath Crisis Center
Jeff Todahl	University of Oregon
Wendy Anderson	Community Works
Gayle Stringer	Washington Coalition of Sexual Assault Programs
Tamara Fulwyler	Project DOVE
Lydia Guy	Washington Coalition of Sexual Assault Programs
Lee Werhan	Domestic Violence Services
Bev Emery	Washington Department of Health and Human Services
Wendy McDaniels	Safe Harbors
Brandi Bonney	Columbia County Women's Resource Center
Sandi Rosamond	Shelter from the Storm
Stacia Euwer	Clatsop County Women's Resource Center
Lisa Millet	DHS, Health Services, ODPE



www.oregonsatf.org

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