Preventing Sexual Violence

Risk and Protective Factors Annual Research Report—2021

PURPOSE

Based on a review of academic and professional research, this document identifies risk and protective factors that have routinely been shown to be associated with sexual assault and other forms of sexual violence. Risk and protective factors for both victimization and perpetration are provided.

RISK FACTORS

The risk factors identified below were selected because they are potentially modifiable or are factors that can be used to identify groups to target for sexual violence prevention. No single risk factor is sufficient to predict the occurrence of sexual violence. This list is not exhaustive but includes the most common risk factors associated with sexual violence.

The following are associated with an *increased risk of* perpetration of sexual violence:

Individual:

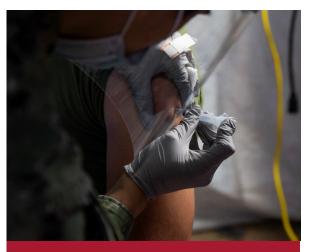
- Strong adherence to traditional gender norms ^{20, 34, 45, 49, 56, 59}
- Aggressiveness / Acceptance of violence ^{3, 31, 34, 49, 64}
- Alcohol and drug use ^{1, 2, 3, 11, 35, 49, 51, 57}
- Coercive sexual fantasies 35, 49, 64
- Exposure to sexually explicit media 9, 14, 55
- Hostility towards women ^{2, 3, 12, 14, 16, 55}
- Hyper-masculinity 35, 59, 64
- Prior sexual victimization or perpetration ^{11, 31, 34, 35, 58}
- Lack of empathy 4, 17, 57
- Sexual-risk taking ^{26, 31, 48}

Relationship/Family:

- Association with sexually aggressive and hyper-masculine peers ^{4, 19, 21, 24, 25, 31, 42}
- Childhood history of physical, sexual, or emotional abuse ^{14, 16, 18, 25, 31, 36, 59}
- Family environment characterized by physical violence and conflict ^{11, 19, 35, 45}
- Involvement in a violent or abusive intimate relationship ^{25, 27, 34}

Community/Society:

- Norms that support male superiority and sexual entitlement ^{24, 45}
- Norms that support sexual violence ^{4, 24, 45}



EFFECTS OF A PANDEMIC

Emerging evidence suggests that the social and economic realities associated with the ongoing global COVID-19 pandemic may be contributing to an increase in sexual violence. Travel restrictions and social distancing measures designed to combat the spread of COVID-19 have also brought increased social isolation and economic anxiety.

Factors associated with COVID-19 measures that might increase risk of sexual violence include:

- Less contact with family and friends 52,62
- Loss of employment 52.62
- Increased social isolation ^{52, 62}
- Economic insecurity 52,62
- Disruption of support and response capabilities ^{52, 53, 54}



RISK FACTORS (CONT.)

The following are associated with an increased risk of sexual violence victimization:

Individual:

- Alcohol and drug use ^{29, 47}
- Being a woman ^{32, 47, 63}
- Being young ^{32, 47, 63}
- Maltreatment in childhood 32,47
- Previous victimization 32,47

Community/Society:

- Norms that support male superiority and sexual entitlement ^{25, 63}
- Norms that support sexual violence ^{25, 63}

PROTECTIVE FACTORS

Research on protective factors related to sexual violence continues to emerge and develop, but at present remains understudied when compared to risk factors. The protective factors identified below were selected because they are potentially modifiable or are factors that can be used to identify groups to target for sexual violence prevention. This list is not exhaustive but includes the most common protective factors associated with sexual violence.

The following are associated with a decreased risk of perpetration of sexual violence:

Individual:

- Emotional health and connectedness ¹¹
- Empathy and concern for how one's actions affect others ^{17, 57}

Relationship/Family:

 Parental use of reasoning to resolve family conflict ^{19, 49} The following are associated with a decreased risk of sexual violence victimization:

Relationship/Family:

Social Connectedness ⁶¹

Community:

Coordination among community agencies ⁶¹

PREVENTION STRATEGIES

No one specific risk factor is the cause of sexual violence. Similarly, no one specific protective factor can prevent sexual violence. Any prevention strategy must take a multi-faceted approach.

- Build community support (e.g., leadership support, community unity, community resources)
- Encourage norms and behaviors that create protective environments
- Educate community members how to identify and what to do in high-risk situations

COVID-19 CONSIDERATIONS

Cultivating social connections during periods of isolation and stress is key to maintaining healthy communities. Work with the community to reduce the impacts of social isolation. Make sure that resources (hotline numbers, telehealth outlets, shelters, crisis centers, and counseling) are available and known to the community.

RESEARCH AND PROGRAM EVALUATION

Please contact us at behavioral.programs.research@usmc.mil with any questions! .



This report can be found on Gear Locker (https://hgmcportal.hgi.usmc.mil/sites/family/mfc/BHINT/researchana/default.aspx).

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