

Sexual Violence and Oppression

Certain groups of people experience sexual violence at higher rates. We've all read or heard this type of statement before, right?

While a statement like this may be true, when we share information or statistics about the increased rates of sexual violence faced by groups most impacted by oppression, we need to be clear about the bigger picture. How we communicate about this matters. We don't want to inadvertently place blame on the affected group or say that having that identity is inherently risky. So we must make sure we frame information within the larger landscape of health inequities, including the policies that perpetuate them.

We know that sexual violence is inextricably tied to oppression, but how do we communicate effectively about this?

1 Know who you are talking about.

Be specific about what group you are talking about. This is a starting place for linking sexual violence to health inequities. Look up information about prevalence from trusted sources such as the National Intimate Partner and Sexual Violence Survey² or the Sexual Violence Indicators Database.³ Keep in mind that many mainstream or academic sources may not ask about or include those who are most vulnerable in their research questions and methods. Consult individuals or organizations that represent the group that you are talking about and pay them for their work.

2 Find out how health inequities affect this group specifically.

Look up information about social determinants of health and health inequities and learn about the lived experiences of people in this group. One way to do this is by talking with and reading the works of people from the community. These inequities are frequently (but not always) linked to sexual violence, so your learning may take you to other related fields and social issues.

Identify associated risk and protective factors.

Several risk factors involve oppression in some form: racism, classism, sexism, homophobia, transphobia, ableism, and more.⁴ Many risk factors such as poverty, lack of employment opportunities, and racism within the police and judicial systems are linked to oppression.^{5,6} Oppression can also limit some people's access to protective factors such as involvement with pro-social activities (like sports, clubs, and after-school activities) and exposure to structured school environments.^{7,8} Protective factors are also disproportionately available to those with increased societal privilege.⁹

Use the information you learned above to frame the issue in terms of institutional oppression.

We must always tie our work back to the bigger picture – so when we are asked, "Why are certain people at a higher risk?" we can explain that inequitable systems increase the group's risk for sexual violence. And that it's not identity that causes risk, but rather the way these systems shape different groups' experiences in inequitable ways. Also, since we all have multiple identities, someone who has several marginalized identities faces an exponential increase of these inequities.

Instead of only sharing a statistic or fact about one group experiencing sexual violence at greater rates, shift to language that puts the statistic or fact into a context that portrays how oppression is built into the way systems and institutions operate – benefiting some and harming many.

5 Shape your prevention goals around this framework.

Choose risk and protective factors at the community and society levels (particularly those related to power imbalances) to shape your prevention efforts. This will help point your prevention work toward changing inequitable systems, like one program did when their needs assessment showed a lack of accessible sidewalks and public structures.¹⁰

We can trace a line from sexual violence to systems of oppression. We need to expand our prevention work to not just reach the people who are most impacted, but to *change the larger systems that continue to perpetuate oppression*.

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About this Infographic

We know that how we communicate about sexual violence and health inequities matters. What we also know is that certain groups of people are at higher risk for sexual violence, and those people are also most impacted by inequitable systems and oppression in our society. By providing a guide to framing these realities, our hope is to help us all understand how to give context to information and statistics so the connection between oppression and sexual violence is clear.

It is critical to make connections to the root causes of sexual violence, but we cannot do this without understanding oppression from a historical perspective and recognizing how privilege enables oppression. This is vital to the work of preventing sexual violence: Being informed about oppression helps expand primary prevention by focusing our community- and society-level prevention efforts.

We can work together to create the kind of equitable, respectful communities we want to live in.

To learn more, check out these additional resources:

California Coalition Against Sexual Assault (CALCASA). Ending Sexual Violence: An Intersectional Approach. https://tinyurl.com/y8mehfvl

INCITE! Dangerous Intersections. https://tinyurl.com/ybb67dxg

National Sexual Violence Resource Center (NSVRC). Sexual Violence and Oppression: Framing our Work Using the Sexual Violence Continuum. https://tinyurl.com/ycfa9brc

Oregon Attorney General's Sexual Assault Task Force (SATF Oregon). Intersections of Oppression and Sexual Violence. https://tinyurl.com/ycd9vcsn

Teaching Tolerance. What Is White Privilege, Really? https://tinyurl.com/ybpj2eg4

Robert Wood Johnson Foundation. A New Way to Talk About the Social Determinants of Health. https://tinyurl.com/y7x8wkl8

World Health Organization (WHO). About Social Determinants of Health. https://tinyurl.com/ybg9zg79

References

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²Centers for Disease Control and Prevention. (n.d.). *The National Intimate Partner and Sexual Violence Survey* (NISVS) [Webpage]. U.S. Department of Health and Human Services. https://www.cdc.gov/violenceprevention/datasources/nisvs/index.html

³VetoViolence. (2020). Sexual violence indicators guide & database [Webpage]. U.S. Department of Health & Human Services, Centers for Disease Control and Prevention. https://vetoviolence.cdc.gov/apps/sexual-violence-indicators-guide-database/home?deliveryName=USCDC_2023-DM22344

⁴National Sexual Violence Resource Center. (2019). Risk and protective factors [Infographic]. https://www.nsvrc.org/risk-and-protective-factors

⁵Hinton, E., Henderson, L., & Reed, C. (2018, May). *An unjust burden: The disparate treatment of Black Americans in the criminal justice system.* Vera Institute of Justice. https://www.vera.org/downloads/publications/for-the-record-unjust-burden-racial-disparities.pdf

⁶Solomon, D., Maxwell, C., & Castro, A. (2019). *Systematic inequality and economic opportunity*. Center for American Progress. https://www.americanprogress.org/issues/race/reports/2019/08/07/472910/systematic-inequality-economic-opportunity/

⁷Okamoto, D. G., Herda D., & Hartzog, C. (2013). Beyond good grades: School composition and immigrant youth participation in extracurricular activities. *Social Science Research*, *42*(1), 155-168. https://doi.org/10.1016/j.ssresearch.2012.08.005

⁸Toomey, R. B., & Russell, S. T. (2013). An initial investigation of sexual minority youth involvement in school-based extracurricular activities. Journal of Research on Adolescence, 23(2), 304-318. https://doi.org/10.1111/j.1532-7795.2012.00830.x

⁹McIntosh, P. (n.d.). White privilege: Unpacking the invisible knapsack. Wellesley College. https://nationalseedproject.org/images/documents/Knapsack_plus_Notes-Peggy_McIntosh.pdf

¹⁰Thomas-Williams, C. O. (2017). Sidewalks to sexual violence prevention: A guide to exploring social inclusion with adults with developmental and intellectual disabilities. Indiana Coalition Against Domestic Violence. https://icadvinc.org/wp-content/uploads/2019/12/new-sidewalks-to-sexual-violence-prevention.pdf



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