

# Rape Prevention and Education: Transforming Communities to Prevent Sexual Violence



Sexual violence is a significant public health problem in the United States. According to the Centers for Disease Control and Prevention's (CDC) National Intimate Partner and Sexual Violence Survey (NISVS), nearly 1 in 5 women and 1 in 71 men in the United States have been raped at some time in their lives and nearly 1 in 2 women and 1 in 5 men have experienced other forms of sexual violence victimization in their lifetime (e.g., made to penetrate someone, sexual coercion, unwanted sexual contact and non-contact unwanted sexual experiences).<sup>1</sup>

Victimization often occurs for the first time before the age of 25 (e.g., 40% of female victims of rape in the U.S. report that they were first raped before the age of 18 and 37% report that they were first raped between the ages of 18-24).<sup>1</sup> Victimization is also often by someone known to the victim, primarily by a current or former intimate partner or an acquaintance.<sup>1</sup>

Rape, and other forms of sexual violence, is preventable. Recognizing this, Congress passed the Violence Against Women Act in 1994. This landmark legislation established the Rape Prevention and Education (RPE) program at CDC. The goal of the RPE program is to strengthen sexual violence prevention efforts at the local, state, and national level. It operates in all 50 states, the District of Columbia, Puerto Rico, and six U.S. territories.

## CDC's Role in Preventing Sexual Violence

CDC's role in sexual violence prevention is unique; no other federal agency is working to advance the primary prevention of sexual violence—to prevent violence before it begins. By working to prevent sexual violence before it begins, RPE grantees have reached out to new audiences including coaches, boys and men, and the entertainment industry, and have developed innovative prevention strategies, which have spread across the country.

## Guiding Principles of the RPE Program

Primary prevention is the cornerstone of the RPE program. Program activities are guided by a set of prevention principles that include:

- Preventing first-time perpetration and victimization;
- Reducing modifiable risk factors while enhancing protective factors associated with sexual violence perpetration and victimization;
- Using the best available evidence when planning, implementing, and evaluating prevention programs;
- Incorporating behavior and social change theories into prevention programs;
- Using population-based surveillance to inform program decisions and monitor trends; and
- Evaluating prevention efforts and using the results to improve future program plans.

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Source: National Intimate Partner and Sexual Violence Survey, 2010.

# Rape Prevention and Education Program

## Current Activities

RPE grantees are currently engaged in a range of activities from implementing prevention strategies that are culturally relevant and based on the best available evidence to conducting educational seminars, professional training, and leveraging resources through partnerships. The RPE program encourages the development of comprehensive prevention strategies through a continuum of activities that address all levels of the social ecological model ([www.cdc.gov/violenceprevention/overview/social-ecologicalmodel.html](http://www.cdc.gov/violenceprevention/overview/social-ecologicalmodel.html)). The model considers the complex interplay between individual, relationship, community and societal factors, and addresses risk and protective factors from multiple domains. This approach is more likely to prevent sexual violence across a lifetime than any single intervention. Grantees are also:

- Implementing primary prevention strategies such as engaging bystanders, educating youth about healthy relationships, and changing social norms;
- Operating statewide and community hotlines;
- Building state and local capacity for program planning, implementation, and evaluation;
- Implementing their state sexual violence primary prevention plan; and
- Assessing state system and local organization evaluation capacity.

While evidence of effective sexual violence prevention strategies is emerging, CDC's Injury Center provides tools, training and technical assistance to RPE grantees for understanding the continuum of evidence and making evidence-based decisions. In addition, states are assessing the capacity of state and local organizations to collect evaluation data about their prevention strategies and use that data to improve what they are doing. Ultimately, this will contribute to the next generation of practice-based evidence.

RPE grantees convene diverse sexual assault prevention teams to guide implementation of their state sexual violence prevention plans. These partnerships have strengthened the state sexual violence prevention system and have resulted in expanded resources and new prevention opportunities. In addition, implementation of the plans' goals and objectives is expanding the traditional focus of state and local efforts on victim services to include primary prevention practices.



## Publication

Sexual Violence Prevention: Beginning the Dialogue ([www.cdc.gov/violenceprevention/pdf/svprevention-a.pdf](http://www.cdc.gov/violenceprevention/pdf/svprevention-a.pdf))

1. Black, M.C., Basile, K.C., Breiding, M.J., Smith, S.G., Walters, M.L., Merrick, M.T., Chen, J., & Stevens, M.R. (2011). The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.