Perspectives on Sexual Violence Prevention

Sexual violence can be examined from many perspectives. Each perspective provides its own insights into the nature of this social problem. These include public health, criminal justice, social change, and examining specific factors that increase or reduce risk.

A. Public Health Perspective

In the public health arena, prevention of sexual violence has been explored much like the traditional approach to preventing disease. Applying this model, sexual violence prevention efforts have been classified into three categories -- Primary, Secondary, and Tertiary.

**Primary prevention** is defined as decreasing the incidence of a problem. In other words, the goal of primary prevention programs is to influence individuals before negative behavior occurs. In the example of sexual violence prevention, primary prevention efforts include preventing the offender from assaulting, and changing societal norms to decrease rape supportive attitudes.

**Secondary prevention** is defined as lowering the prevalence of a problem in the population. Secondary sexual violence prevention efforts include school-based programs, public education media campaigns, and rape deterrence by threat of criminal sanction.

**Tertiary prevention** is defined as decreasing the disability associated with, and preventing the reoccurrence of the problem. In the past, most efforts to prevent sexual violence have been limited to this area. These include various treatment options for survivors, among them individual interventions such as psychotherapy or counseling, as well as community-wide interventions, such as rape crisis hotlines, health care interventions, and criminal justice services. Tertiary prevention also includes interventions with sex offenders after the fact, such as sex offender treatment programs. The reform of rape statutes, the enforcement of existing laws and the prosecution of accused rapists are more examples of this prevention strategy.

“Injury Prevention” Approach

Public health communities have become increasingly aware of the impact of injury on the public’s health and have begun to focus efforts to reduce injury. Violence has been labeled “intentional injury.” A recent study looks at sexual assault from the public health perspective of injury prevention, by applying the
injury prevention strategies of William Haddon to the issue of rape. In this study, the hazard of rape is defined as cultural norms regarding male sexuality and violence.

Recently, three levels of prevention, specified as universal, selective, and indicated, were developed by the Institute of Medicine and replace what was formerly called primary, secondary and tertiary prevention.1

- **Universal prevention** is directed at all members of the population in question without identifying those at risk of sexual violence. Examples of universal prevention include media campaigns, and classroom presentations in schools.
- **Selective prevention** is directed at particular members of a group who are at risk for a problem. For instance, selective prevention programs might target college freshmen, or boys or girls with a history of abuse or neglect.
- **Indicated prevention** is directed at particular individuals who already display signs of the problem. Indicated Prevention programs aim to prevent reoccurrence of the problem, and might include such things as bully proofing; bystander interventions; programs for boys or girls with behavior/adjustment problems or treatment for offenders or victims.

Interventions at all three levels of prevention can be combined and intersected to create a comprehensive program which is theoretically based and which has mutually reinforcing program elements.2

The injury prevention approach is widely applied to health problems in the community, and is well accepted in the public health domain. It is commonly used as a guide for all alcohol and other drug abuse problems, for example. As well established as this model is, it may be difficult to extrapolate it to the prevention of sexual violence. Understanding intentional injury, such as sexual violence, in terms of the disease model is difficult.

**B. Factors which reduce or increase risk**

This pragmatic perspective is based on the belief that there are identifiable causes (“risk factors”) and identifiable conditions that help one avoid (“protective factors”) negative experiences. Proponents of this perspective feel that prevention efforts should focus on reducing risk and increasing protective factors. This model was originally designed to prevent drug abuse. More work needs to be done to explore how this model may or may not be applicable to this issue.
C. Social Change

This strategy is based on the belief that violence occurs because of a societal structure which treats people unequally, resulting in unequal power distribution among all citizens. Inherent to this strategy is the belief that this type of societal structure maintains power through the use of oppression and uses sexual violence as a tool of oppression to maintain power within certain segments of society.

D. Law and Criminal Justice

Proponents of this perspective believe that a safe society is one in which its members agree on acceptable behaviors and ways to interact. If individuals deviate from such acceptable behaviors and interaction they must be held accountable to the individuals who were affected and to the whole community. Sexual violence is seen as a violation of law, and sexual offenders as criminals who need to be contained and/ or punished.

Restorative Justice

Recently, in an effort to make the justice system more responsive to the needs of society, a new approach, called “Restorative Justice,” has been advocated. It is a framework for a new kind of justice based on community responsibility and individual accountability. Offenders and victims are brought together in a meeting with family, friends and community members, and come to an restitution agreement acceptable to everyone present. Whether restorative justice is appropriately applied to sexual offenses is controversial, and has not been widely attempted.

Conclusion

The various perspectives on sexual violence prevention are relevant and useful, although none perfectly capture the complexity and many facets of this social problem. Nonetheless, each perspective provide us the opportunity to examine sexual violence from within the context of the distinct discipline, each providing it’s own unique insights into the problem.