Imagine a safer, healthier Massachusetts
Healthy Relationships - Sexual Respect – Equality

“With its focus on primary prevention, this report outlines a concrete plan to keep children from developing problem sexual behaviors, help parents and educators teach children that sexual respect is expected, and assist adults in chang-
ing the climates in our diverse communities and institutions so that healthy relationships between all people can be the state norm. I hope that this report will be a guide for state and local leaders as we continue not only to improve our responses to incidents of sexual violence, but also toward shaping a safer, healthier future for all.”

--Governor Deval Patrick, September 2009

The challenge that we face in Massachusetts:
Sexual violence hurts us all. Someone you know has experienced it and the cost to each of us, our families, and our communities is unacceptable.

- Nearly 18% of adults ages 18-65 years old in Mas-
  sachusetts have had unwanted sexual contact at some time in their lives.
- 18% of girls and 7% of boys in MA high schools
  report ever having unwanted sexual contact.
- Massachusetts residents with disabilities, who are
  LGBT (lesbian, gay, bisexual and transgender), all
  ethnicities and abilities. Consent cannot be given when
  someone is: a minor, incapacitated, or has certain disabili-
  ties.

Domestic violence is physical, sexual, psychological or
financial harm caused by a current or former partner or
spouse, dating partner or household member.

Vonion: To move beyond sexual violence, we must also hold a clear
vision for what is healthy and not just what we don’t want in
the lives of our family and community.

Sexual respect means honoring personal boundaries and
developmental stages, and nurturing connection. Sexual
respect stems from basic respect for the integrity of other
people, and is inclusive of diverse cultures, disabilities, gen-
der identities, sexual orientation and ages.

Healthy relationships and healthy sexuality are respectful,
mutual, and based on equality and open communication.

In many cases, preventing sexual violence will be tied to
domestic violence issues, so it is important to think about the
full complexity of these problems when deciding what to do
about them.

Massachusetts now has the information and knowledge to
understand the problem, know what can be done, and have
a clear vision for change.

Definition: Sexual violence is any sexual activity where consent is not
freely given. Sexual violence includes a wide range of be-
haviors from a violent rape to drug assisted sexual assault to
sexual harassment to sexual exploitation (e.g., download-
ing child pornography from the Internet). It includes sexual
harm to people of all ages, genders, sexual orientations,
or orientations and abilities. Consent cannot be given when
someone is: a minor, incapacitated, or has certain disabili-
ties.

Domestic violence is physical, sexual, psychological or
financial harm caused by a current or former partner or
spouse, dating partner or household member.

Protection and Risk Factors for Sexual and
Domestic Violence

Research suggests that we can prevent sexual and domestic
violence by increasing the factors that protect people from
developing violent behaviors. We can also decrease factors
that create risk for violence. Together, these are called pro-
tective factors and risk factors. Here are selected protective
and risk factors to focus on in Massachusetts.

Individual factors

- PROTECTIVE: emotionally healthy youth and adults
- RISK: knowledge, attitudes, beliefs and behaviors that
  see rape and other forms of sexual violence as normal
- RISK: childhood history of abuse or witnessing family
  violence
- RISK: traditional beliefs about men and women (exam-
  ples: women are the weaker sex, men should be tough)

Interpersonal and family factors

- PROTECTIVE: positive connections with emotionally
  healthy peers and adults
- RISK: friendship with sexually aggressive peers
- RISK: marriage conflict

Community factors

- PROTECTIVE: community connections
- RISK: high rates of unemployment
- RISK: weak disapproval or consequences in community
- RISK: lack of or no enforcement of policies against
  sexual harassment

Societal factors

- PROTECTIVE: low tolerance for crime and for vio-
  lence
- RISK: a sense of male entitlement over women
- RISK: belief that men should have dominance over
  others
- RISK: cultural beliefs that violence can solve dis-
  agreements

GOAL #1: Youth and caregivers will value and de-
velop skills for respectful relationships.

Youth is a key period for development of relationship
values, attitudes and behaviors. Therefore, there is a
need to promote healthy, respectful relationship and
sexual norms—and behaviors—with children, adoles-
cents, and young adults in Massachusetts.

ACTION STEPS:
1) Educate parents and caregivers to help them support
children’s healthy sexual development and safety.
2) Support organizations working with children and
adolescents in their efforts to prevent violence through
new policies, increased staff training, stronger parent
involvement, and educational programs for children
and teens. Specifically address the needs of youth with
disabilities and LGBT youth.
1) Teach adolescents about healthy sexuality and healthy relationships through school policies and programming.

Strengthen college and university policies and programming on healthy relationships and sexual and domestic violence prevention.

Goal #2: Promote healthy LGBT relationships and sexuality to prevent violence against LGBT people.

LGBT people are at increased risk for sexual violence victimization as compared to their heterosexual peers.

ACTION STEPS:

1) Train programs to promote healthy LGBT relationships and sexuality and prevent violence against LGBT people.

2) Develop partnerships for additional research about sexual and domestic violence against LGBT people to inform prevention strategies.

Goal #3: Promote healthy sexuality and relationships among people with developmental disabilities.

According to the majority of published reports, individuals with disabilities are more likely than those in the general population to experience sexual assault victimization.

ACTION STEPS:

1) The Department of Developmental Services (DDS) will identify needs and resources to improve healthy sexuality and relationship training and programming for DDS providers and people with developmental disabilities.

2) Develop cross-training and partnerships between sexual and domestic violence programs, sexual health programs, abuse prevention programs, and DDS-funded programs.

Goal #4: Government, community groups, and institutions will build leadership for the prevention of sexual and domestic violence.

ACTION STEPS:

1) Support staff and volunteers of organizations doing sexual and domestic violence prevention to plan, carry out and evaluate primary prevention. Focus on primary prevention with youth, racial/ethnic populations, LGBT people, deaf people, and people with disabilities.

2) Expand opportunities for males to engage in sexual and domestic violence prevention. Promote healthy relationships and sexuality through responsible fatherhood and other initiatives for men and boys.

3) Improve media reporting on sexual and domestic violence to include promoting healthy relationships and sexuality.

Everyone can help prevent sexual and domestic violence.

Here are some things WE ALL can do to prevent sexual and domestic violence:

1) Talk about healthy relationships and sexual respect with our friends, neighbors and co-workers.

2) Speak up and act when we see behaviors that worry us about someone doing harm or getting hurt.

3) Listen to children, talk with them about healthy relationships and share what we hope for them.

4) Write a letter to the editor or contact the sponsors of sexually violent messaging and marketing.

5) Invite a local rape crisis center to discuss violence prevention with faith and/or community organizations.

6) Ask school boards and other officials for policies that prevent violence and promote healthy sexuality.

7) Be a mentor. Support local youth programs and ask about their sexual harassment policies.

8) Contact local sexual or domestic violence programs to find out how we can get involved.

9) Share this plan with someone else and take action together.

Who developed this plan:
The Massachusetts Sexual Violence Prevention Team represents a range of state and community-based agencies. The Team is brought together by the Massachusetts Department of Public Health, with support from the Centers for Disease Control and Prevention. The Team heard from many people across the state to make a plan to prevent sexual violence.

How we will know if this plan works:
The Massachusetts Department of Public Health, Jane Doe, Inc., and the State Prevention Team will monitor the plan activities, to learn what is working and why. We are committed to continual and sustainable improvements.

To download the complete MA Sexual Violence Prevention Plan: http://www.mass.gov/ehhs/docs/dph/com_health/violence/sv_prevention_plan.pdf

For information about local sexual and domestic violence services in Massachusetts, please visit: www.mass.gov/dph/sexualassaultservices or www.janedoe.org

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