

Intimate Partner & Sexual Violence in Nebraska:

Findings from the 2020 Statewide Intimate
Partner & Sexual Violence Survey (SIPSVS)

Released Fall
2022



NEBRASKA COALITION
TO END SEXUAL AND DOMESTIC VIOLENCE

In Partnership With:  hti labs

Sexual and intimate partner violence are serious problems in our community. These issues have long-term implications for victims/survivors and potentially large-scale economic impacts for healthcare, workplaces, schools, government, and the community overall. When this violence occurs early in a person's life, it is often repeated throughout their lifespan. A single experience of sexual or intimate partner violence can create a lifetime impact.

When we know how and when violence occurs in a person's life, we are given the ability to intervene and to prevent the violence.

Sexual violence and intimate partner violence ARE preventable.

This report helps provide us this information and the answers to:

- How many people have experienced sexual and intimate partner violence in Nebraska?
- At what age do they first experience sexual or intimate partner violence?
- What is the impact of this violence on victims/survivors?
- Who do they reach out to for help?
- What is the impact on our communities?



To help answer these questions for Nebraska, the Nebraska Coalition to End Sexual and Domestic Violence commissioned HTI Labs to develop reliable and localized data that could speak to and understand the scope of the problem.

Launched in 2020, the Nebraska **Statewide Intimate Partner and Sexual Violence Survey** (SIPSVS) is the first ever large-scale survey to assess sexual and intimate partner violence victimization among Nebraskans. The resulting data provide a deep look at the various types of this violence Nebraskans experience and its impact on survivors and the community.

This report illustrates the major findings and how they shape prevention strategies across the state.

The Nebraska SIPSVS draws from the National Intimate Partner and Sexual Violence Survey, which is a national survey conducted regularly by the Centers for Disease Control and Prevention (CDC). The National Intimate Partner and Sexual Violence Survey utilizes phone calls to measure intimate partner and sexual violence through a series of questions about behavior.

Survey Implementation

Although there are similarities in implementation in these two surveys, the Nebraska SIPSVS was conducted online through SurveyUSA. This was done to reflect a more modern polling technique as well as to increase honest responses to highly sensitive questions.

What is SIPSVS designed to measure?

- Psychological aggression by intimate partners
- Physical violence by intimate partners
- Sexual violence by any perpetrator
- Lifetime impacts and aftermaths among those who have experienced these victimizations



1,896 Nebraskan adults completed the online survey in November - December 2020.

As is standard practice in survey research, the responses were weighted to reflect a representative sample of Nebraskans based on demographic factors.

What is not captured? Non-contact sexual violence (such as harassment, forced exposure of sexual images, or exposure of sexual body parts), stalking, and additional forms of expressive aggression (such as private name-calling or expressions of anger).

What is not clear from the data? Although it is a priority of the Nebraska Coalition to understand, respond, and report data based on specific identifies of survivors, including: race, gender identity, and sexual orientation, this survey was unable to provide a full picture of these demographics. While the survey did specifically ask inclusive gender and sexual identity questions, it is unable to provide a full picture of these demographics. This is primarily due to sample sizes of some demographics being too small to be statistically reliable, from a research standpoint. For this reason, we are unable to provide data on genders other than male-identifying (men) and female-identifying (women). We also are unable to provide a comprehensive view on racial identities of survivors. In areas where we were able to reliably report demographic data, we have. Future surveys will be updated with this in mind, to attempt to better capture this data and more fully report on it.

CONTENT WARNING: The subject matter covered in this research includes intimate partner and sexual violence. Readers should prepare themselves to engage, or if necessary, disengage for their own wellbeing.

Intimate Partner & Sexual Violence in Nebraska

Prevalence.....	1
Age of First Victimization.....	7
Aftermath of Victimization.....	13
Key Findings & Conclusions.....	18
Resources.....	22
Glossary of Terms.....	23



Prevalence of Sexual
& Intimate Partner
Violence in Nebraska

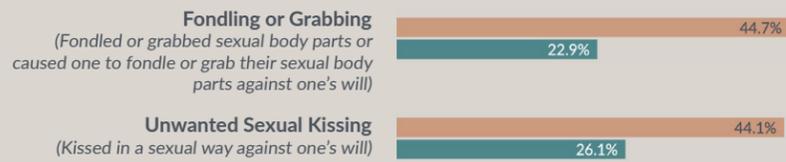
An estimated **81.5%** of women and **66.7%** of men experience some form of intimate partner or sexual violence in their lifetime. This translates to **1.4M** Nebraskans.

Sexual Violence:

Unwanted Sexual Contact

57.2%
of women

34.2%
of men



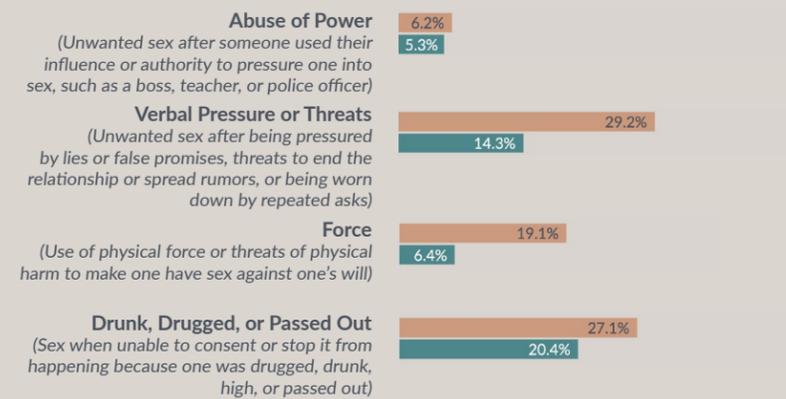
Source: Nebraska Statewide Intimate Partner & Sexual Violence Survey, 2020

Non-Consensual Sex/Rape

50.5%
of women

28.9%
of men

Vaginal, anal, oral, or other penetration resulting from...

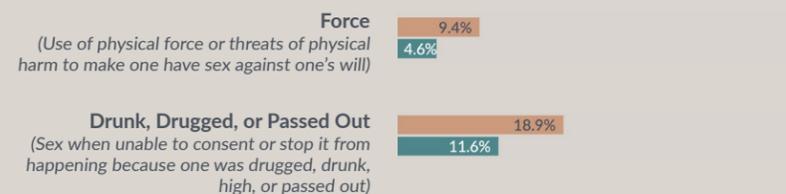


Source: Nebraska Statewide Intimate Partner & Sexual Violence Survey, 2020

Attempted Rape

23.0%
of women

12.2%
of men



Source: Nebraska Statewide Intimate Partner & Sexual Violence Survey, 2020

This research measures non-consensual (unwanted) sexual contact or intercourse by any perpetrator, including sexual behavior that was performed on an individual or sexual behaviors they were forced to perform on another person.

31.1% of women and 15.9% of men experience rape through coercion, which is when consent is bypassed or significantly constrained through reported abuse use of power, verbal pressure, or threats.

35.2% of women and 23.2% of men experience rape through force or when unable to consent while drunk, drugged, or passed out.

This research also measures experiences of attempted rape, which is when individuals reported that someone tried to have sex with them through force or when the individual was drugged or passed out from alcohol, drugs, or medications, but sexual intercourse did not happen.

This research measures aggression and physical violence by an intimate partner, which includes any current or former sexual or romantic partners, which might include spouses, boyfriends, girlfriends, sexual partners, or people they have dated or hooked up with.

44.8% of women and 38.2% of men experience one or more of the following forms of physical violence: being slapped, pushed, shoved, kicked, or hit, or being harmed by having one's hair pulled.

34.6% of women and 18.3% of men experience one of more forms of severe physical violence: being slammed against something, strangled, beaten, burned, or having had a knife or gun used.

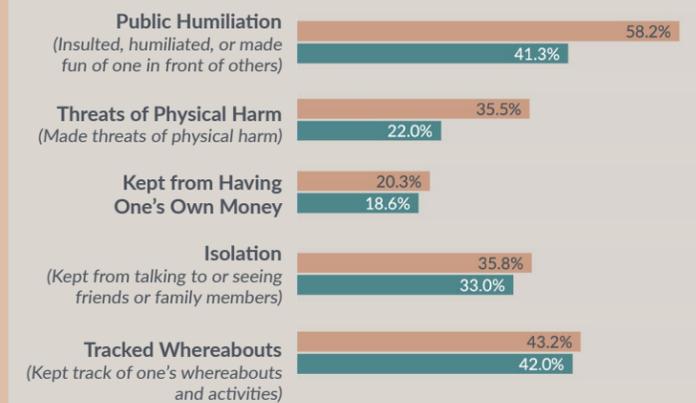
These percentages show lifetime prevalence of ever experiencing any of these behaviors in a relationship. In reality, victims/survivors typically experience many of these behaviors, which often escalate over time.

Intimate Partner Violence:

Psychological Aggression

67.7%
of women

58.9%
of men



Source: Nebraska Statewide Intimate Partner & Sexual Violence Survey, 2020

Physical Violence

46.8%
of women

39.2%
of men



Source: Nebraska Statewide Intimate Partner & Sexual Violence Survey, 2020

Unhealthy, controlling relationships: Most people face psychological aggression from an intimate partner.

It is an overwhelmingly common experience for both women (67.7%) and men (58.9%) to have a partner publicly insult, humiliate, or threaten them, keep them from having their own money, or keep track of their whereabouts.

Escalation of violence: Threats of physical violence against Nebraskan women are almost always followed up on.

Of the 35.5% of Nebraskan women who have been physically threatened by a partner:

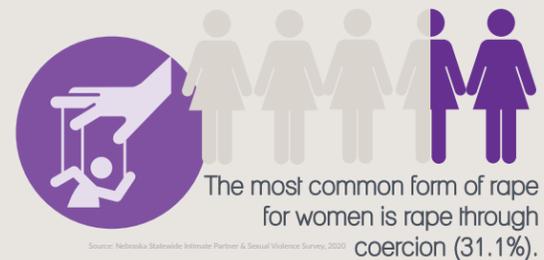
- 9 in 10 have also been slapped
- 3 in 5 have also been raped through coercion
- Nearly 1 in 2 have also been beaten

Violent relationships: Nearly half of Nebraskans face physical violence from an intimate partner in their life.

Nearly 850,000 Nebraskans (46.8% of women, 39.2% of men) experience physical violence by an intimate partner.

Women are twice as likely as men to say they have been beaten.

Lack of Consent: 1 in 2 women (50.5%) and 1 in 4 men (28.6%) are victims of rape in their lifetime.



Women experience violence more frequently and more severely throughout their lifetime than men.

Not only are more women affected by intimate partner and sexual violence than men, but women are also affected more often throughout their life. Nebraskan women are twice as likely as Nebraskan men to face ongoing physical violence (50+ experiences) and three times more likely to face ongoing rape by force (20+ experiences) in their lifetime.

1 in 5 women
21.4% of women face 50+ experiences of physical violence from an intimate partner in their lifetime.

30,000 women
3.2% of women experience rape by force more than 20 times in their lifetime.

Life-Threatening Indicators

Nationally, more than 55% of all female homicides are committed by an intimate partner, and 72% of murder-suicides involve an intimate partner¹. Some common indicators of life-threatening situations are:

- Domestic violence increasing in severity or frequency
- Strangulation
- Weapon or gun



165,000+ Nebraskan women (16.9%) are strangled by an intimate partner in their lifetime.

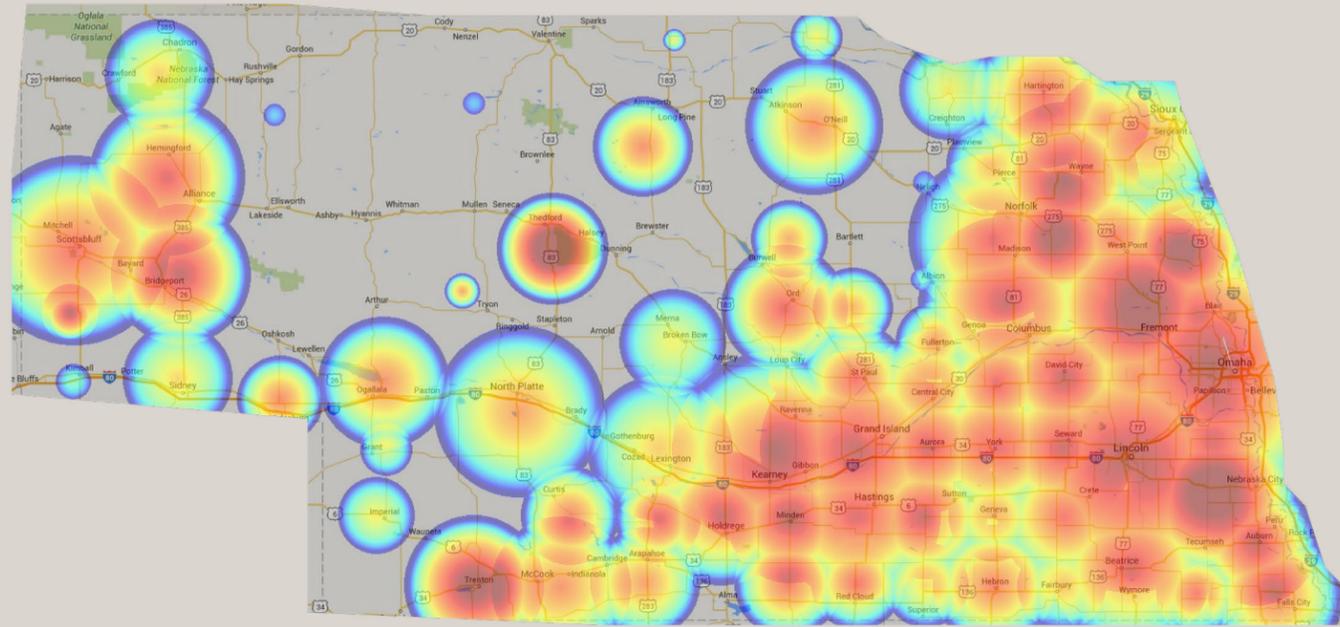


1 in 10 Nebraskan women (9.5%) have a knife or gun pulled on them by an intimate partner.

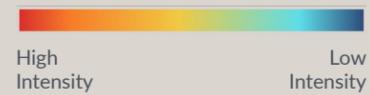
¹ Violence Policy Center. (2012). American roulette: Murder-suicide in the United States. Retrieved from www.vpc.org/studies/amroul2012.pdf.

There is little difference in victimization rates between rural, suburban, and urban parts of Nebraska.

The number of people affected by violence is naturally larger in areas with higher populations. When adjusted per capita, it is clear that rural parts of the state experience similar rates of violence in their communities as urban and suburban areas. In fact, the ten counties with the highest rates of violence all have populations below 40,000 inhabitants.



The color indicates the intensity of victimization, measured as the number of victimization experiences per capita. The size of the circle represents the raw number of victimization experiences reported in the location.



Who experiences the most extreme violence?

The most serious types of violence identified in this research clearly and disproportionately impact individuals with certain identities. Individuals that hold these identities experience significantly higher risks of intimate partner and sexual violence than those without. For the data below, **extreme violence** is defined as experiencing one or more of: severe physical intimate partner violence (being slammed against something, strangled, beaten, burned, or having a weapon used), rape or attempted rape by force, and rape or attempted rape while drunk, drugged, or passed out.

3.7x
Women
identifying Nebraskans

Women are **3.7 times** more likely to face extreme violence than men.

Source: Nebraska Statewide Intimate Partner & Sexual Violence Survey, 2020

1.8x
LGBTQ+
identifying Nebraskans

LGBTQ+ identifying Nebraskans are **nearly twice** as likely to experience extreme violence as non-LGBTQ+ identifying Nebraskans.

Source: Nebraska Statewide Intimate Partner & Sexual Violence Survey, 2020

4.9x
American Indian
identifying Nebraskans*

American Indian identifying Nebraskans are **4.9 times** more likely to face extreme violence than non-American Indian identifying Nebraskans.

Source: Nebraska Statewide Intimate Partner & Sexual Violence Survey, 2020

*While respondents reflected Nebraska's population, analysis of prevalence by racial/ethnic groups is hindered by the number of non-white respondents being too small to produce statistically stable estimates. As a consequence, we cannot report the odds of facing violence by ethnic/racial groups, but the data does allow for analysis of highly significant differences in experiences among groups (i.e. whether one group is facing more violence than others). We found this to be true for American Indian identifying Nebraskans, who disproportionately face severe violence relative to other ethnic/racial groups in the sample.

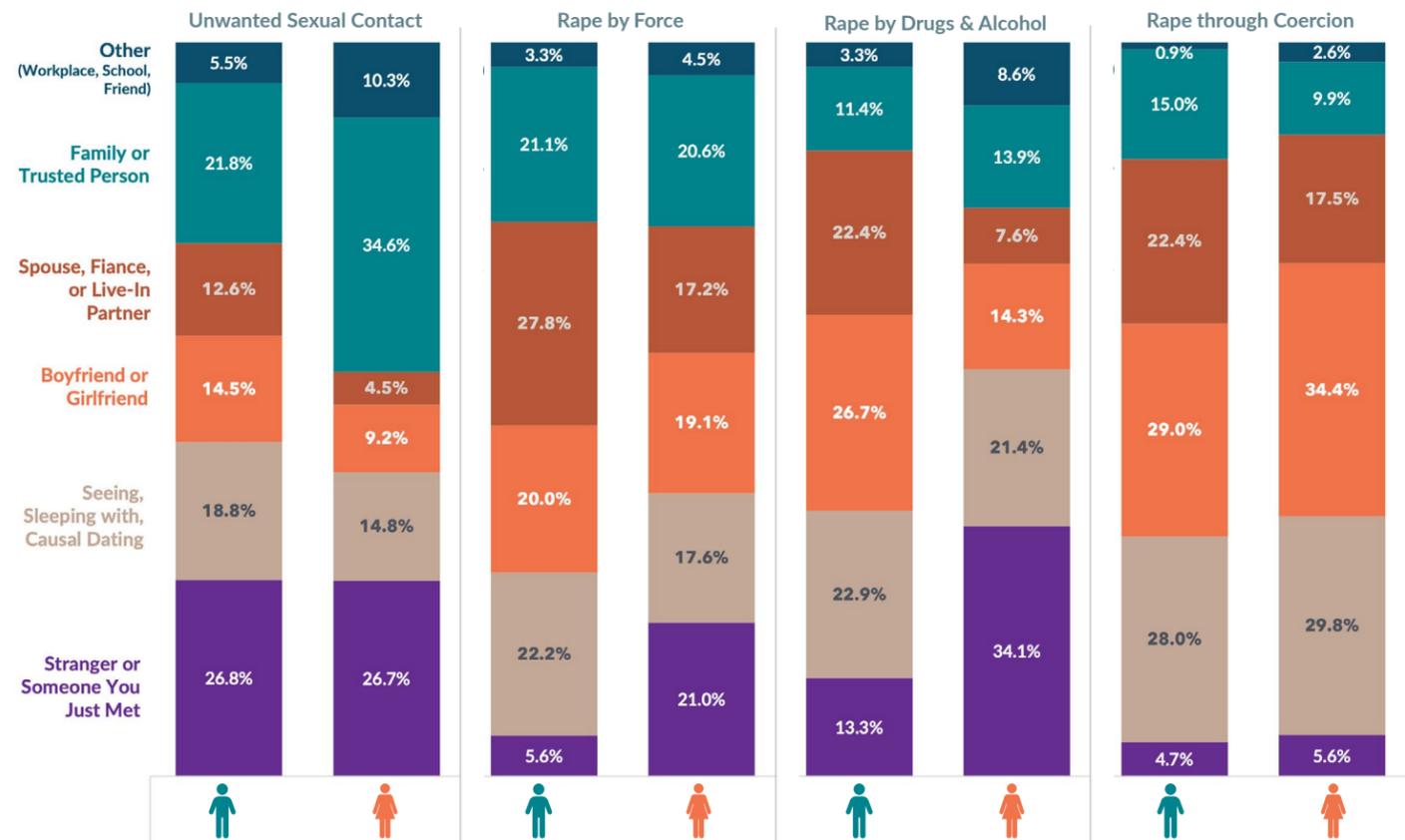
Age of First
Victimization

By what age are most survivors first experiencing violence?



Who perpetrates a survivor's first experience of sexual violence?

The bulk of sexual violence against males is initially perpetrated by romantic partners, whereas for women it is more varied. Women are most likely to first experience groping, kissing, and fondling from a family member or trusted person, and to first experience rape (through force or through drugs and alcohol) by a stranger or someone they just met. For all genders, violence is most commonly perpetrated by an intimate partner.



In childhood and adolescence, women experience unwanted sexual contact or rape through family or trusted people. As women age and develop relationships outside of the family, it transitions to intimate partner violence.

The likelihood for violence does not change, but who perpetrates the violence does.

Initial experiences with sexual and intimate partner violence occur early in Nebraskans' lives, with the likelihood of first experiencing violence peaking in adolescence. Women encounter both sexual and intimate partner violence earlier in life than men.

Adolescence (Ages 11-19)

- > This is the most dangerous time period for women, who are at peak likelihood for first experiencing all forms of violence.
 - 1 in 3 face unwanted sexual contact for the first time
 - 1 in 5 face rape while drunk, drugged, or passed out for the first time
 - 44.2% face psychological aggression from an intimate partner for the first time
 - 1 in 5 experience physical violence from an intimate partner for the first time

Adolescence is when men first experience psychological aggression from an intimate partner (1 in 3) and unwanted sexual contact (1 in 5).

14.3% of women in Nebraska have been raped through force or threat of force before becoming an adult.

Childhood (Ages 0-10)

- > Men and women are equally likely to experience rape through force before turning 10 years old (1.9% of men and 2.5% of women).

However, women are far more likely to experience unwanted sexual contact than men at this age. This means that 7.0% of women in Nebraska experience unwanted sexual contact (kissing, groping, fondling) before turning 10 years old (compared to 2.7% of men).

Twenties (Ages 20-29)

- > Men are at peak likelihood for first experiencing rape while drunk, drugged, or passed out (10.4% of Nebraskan men) and physical violence from an intimate partner (18.1% of Nebraskan men) at this age.

66.8% of Nebraskans experience initial victimization prior to age 30, compared to just 3.7% who experience it after 30.

Likelihood for first facing violence peaks in a woman's teenage years.

17
years old

Most common age for a woman's initial experience of rape through force.

18
years old

Most common age for a woman's initial experience of rape through drugs and alcohol and psychological aggression from an intimate partner.

19
years old

Most common age for a woman's initial experience of physical violence from an intimate partner.

Prevent the violence.



Since sexual and intimate partner violence peak between the ages of 15 and 18, it is important to introduce prevention strategies to Nebraska youth before adolescence. Offering prevention strategies to youth at an early age allows them to build a foundation for bodily autonomy, boundaries, consent, and healthy relationships.

We ALL play a role in prevention. At the end of this report, we highlight the many ways you can help prevent sexual and intimate partner violence: creating safe environments, promoting healthy relationships, modeling open communication, and becoming a safe and trusted support for youth.

Aftermath of
Victimization

Injury

25.9% of women and 8.7% of men are estimated to face **injury** as a result of sexual or intimate partner violence in their lifetime.

This is more than **330,000 Nebraskans** who need medical services and are likely coming in contact with healthcare professionals.

87,000+

Nebraskans (6.4% of women and 2.5% of men) are estimated to receive a **sexually transmitted infection (STI)** due to sexual violence.

This is more than 87,000 Nebraskans in need of medical services and long-term medication. STIs can have short- and long-term impacts, which can take a toll on physical and mental health.

Reported injuries resulting from experiences of intimate partner or sexual violence



5.2% of individuals face unwanted pregnancy due to rape. This is more than **50,000** Nebraskan women.

Sexual violence can also create multiple generations of trauma. Beyond the devastating implications this can have for a survivor, it is also worth noting the massive healthcare and child welfare implications this creates.

48.3% of women and 19.5% of men experience **fear or concern for safety** due to sexual or intimate partner violence.

This is more than **650,000 Nebraskans** who likely need long-term support, such as mental health care, safe housing, and protection orders.

A woman growing up in Nebraska has an estimated **50/50 chance** of fearing for her safety due to these two issues in her lifetime.

Safety



School & Work

17.1% of women and 11.6% of men **miss school or work** as a result of sexual or intimate partner violence.

Nearly **300,000 Nebraskans** miss at least one day of school or work due to sexual or intimate partner violence. Over 78,000 Nebraskans (4.8% of women and 3.4% of men) miss more than three weeks of school or work due to violence. Missed school and work time may have an adverse effect on a person's future employment opportunities, in addition to impacting the state's economy.

Identified Gaps for Survivors

Most needed: **medical & counseling services**



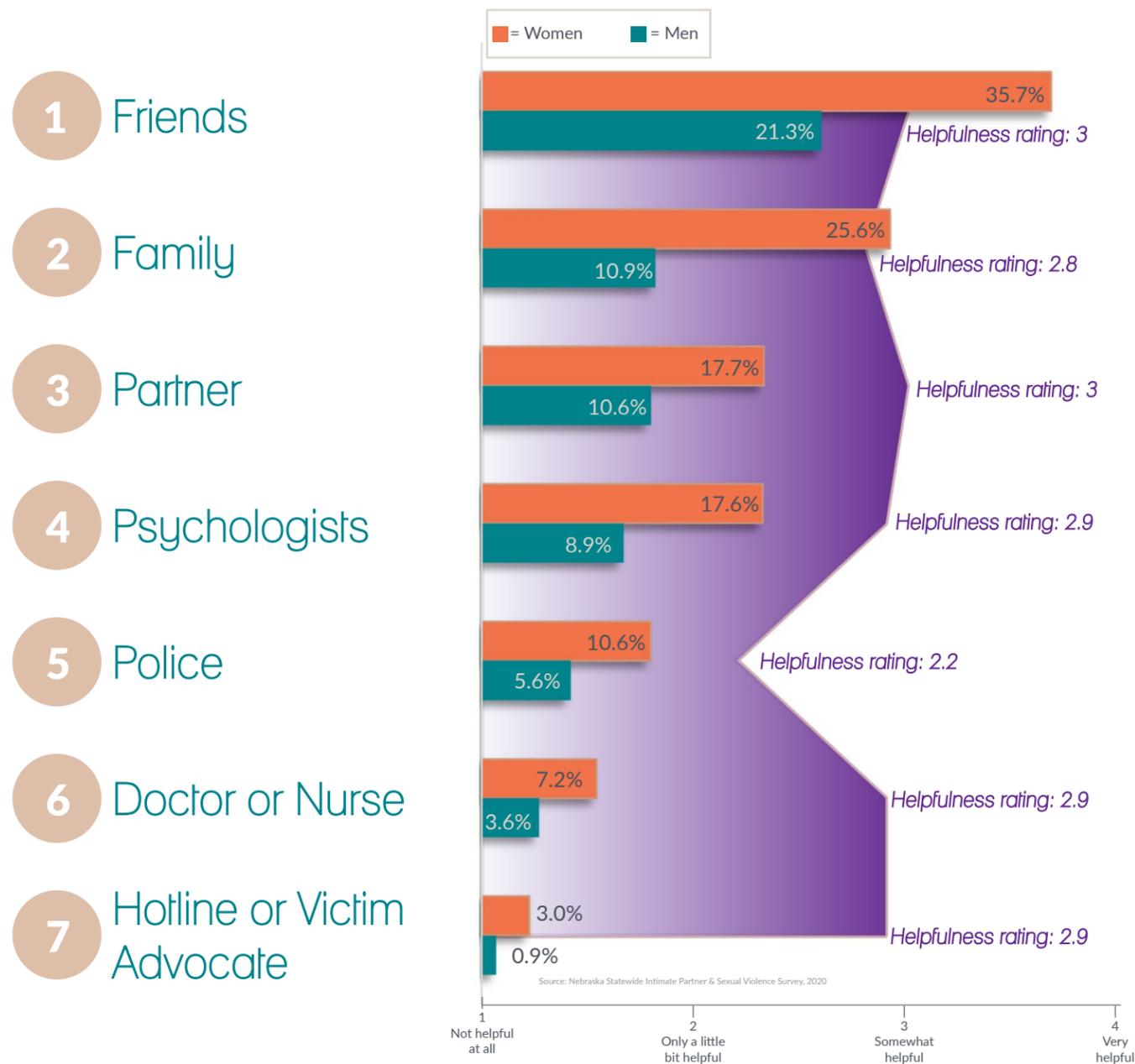
Survivors in urban areas are 3 times more likely than rural survivors to express needing housing services in response to victimization.



The biggest gap is for **counseling services**: Only 2 in 3 women and 1 in 2 men who needed counseling were able to successfully access it.

The gap widens for **Black Nebraskans**: Only 1 in 4 Black Nebraskans who needed counseling were able to successfully access it.

Who are survivors most likely to turn to for help, and how helpful were they?



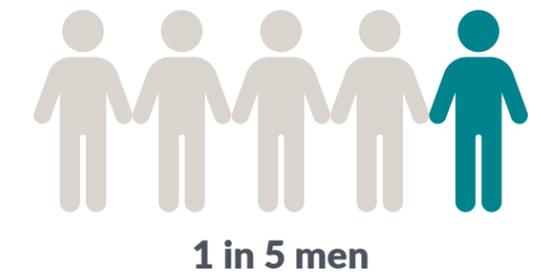
Of people experiencing intimate partner and sexual violence, how many seek any form of help?



Source: Nebraska Statewide Intimate Partner & Sexual Violence Survey, 2020

25.6% of women and 10.9% of men reached out to family, who they believed to be the least helpful of all helpseeking options, other than police. 35.7% of women and 21.3% of men reached out to friends, whom they ranked to be the most helpful of all helpseeking options.

How often do survivors report to or seek help from community professionals (such as police, doctors/nurses, psychologists, or help hotline/victim advocates)?



Source: Nebraska Statewide Intimate Partner & Sexual Violence Survey, 2020

 For more information on how to help a friend or family member experiencing intimate partner or sexual violence, turn to page 20.

Key Findings & Conclusions

Initial victimization occurs very early in life, and victimization is likely to repeat throughout one's life.

TAKEAWAY

Early prevention is critical.

Survivors are most likely to turn to friends, family, and partners.

TAKEAWAY

You can play a key role in addressing community violence by supporting survivors.

There are significant economic impacts to violence. Victimization can have a lifelong, multi-generational impact, and services are not always available.

TAKEAWAY

School, business, and healthcare professionals can *all* play a critical role in preventing violence.



GENERAL PUBLIC

If someone you know has experienced violence:

- Believe victims/survivors. Listen to them and avoid judgment.
- Check in with them in a private space, and ask how you can support them. Do not share their story without their permission
- Help them get in contact with a local domestic violence and sexual assault program to plan for safety, and receive additional services and support.
- Get support for yourself – it can be difficult seeing someone experience violence.

You can also:

- Model healthy relationships for the young people in your life.
- Speak up if you witness someone using violence towards others, and feel safe doing so.
- Challenge statements that blame victims/survivors or minimize or excuse violence.
- Volunteer with a local domestic violence and sexual assault program in your community.
- Advocate for policy or initiatives that promote healthy relationships and safe communities.
- See the resources on page 22 for more information.



HEALTHCARE

- Talk with ALL patients about healthy and unhealthy relationships, the health effects of violence, and resources, regardless of screening or disclosures of violence. Display trauma-informed information and tools for patients and providers to view, use, or reference.
- Describe steps of physical exams with patients of EVERY age and ask permission to continue at each step.
- Work with your administration to develop and implement trauma-informed policy and procedures to promote prevention and respond to disclosures of violence if they don't already exist.
- Become familiar with healthcare, reporting, and parental consent laws, and communicate openly with patients about them.
- Ensure a private space and time with just the patient and provider, for at least a portion of the visit, to allow time for patients to discuss issues privately.
- Consider experiences of violence when offering treatment or building care plans for patients, including reproductive health.
- Connect with a local domestic violence and sexual assault program for support to cross train staff and facilitate referrals for victims/survivors.

Relevant resources:

- Future Without Violence's **Health Program**
Visit futureswithoutviolence.org/health for more information.
- National Sexual Violence Resource Center's **Assessing Patients for Sexual Violence: A Guide for Health Care Providers**
Visit nsvrc.org/sites/default/files/2012-03/Publications_NSVRC_Guides_Assessing-patients-for-sexual-violence.pdf for more information.



BUSINESSES

- Launch an anti-violence awareness campaign in the workplace.
- Develop and adopt policies and procedures for the workplace to effectively prevent and respond to violence, and train staff on how to prevent violence and promote healthy relationships.
- Ensure employees experiencing violence can access support and accommodations they may need to stay safe, and that overall workplace safety is prioritized.
- Partner with a local domestic violence and sexual assault program to learn how to foster a trauma-informed and healthy work environment.

Relevant resources:

- Future Without Violence's **Workplace Safety and Equity Project**
Visit futureswithoutviolence.org/workplace-safety-equity for more information.
- National Sexual Violence Resource Center's resources on **Ending Sexual Assault and Harassment in the Workplace**
Visit nsvrc.org/ending-sexual-assault-and-harassment-workplace for more information.
- The Women's Fund of Omaha/Human Resource Association of the Midlands resource on **Creating Safe Environments in the Workplace for Victims/Survivors of Violence**
Visit omahawomensfund.org/wp-content/uploads/HRAM_Creating-Safe-Environments_The-Administration-Toolkit.pdf for more information.



SCHOOLS

- Conduct a survey on school climate to help determine how to build a safe and trauma-informed learning environment.
- Incorporate social emotional learning and violence prevention curricula that teaches youth healthy relationships and consent in age appropriate, medically accurate, and inclusive ways.
- Launch a school-wide awareness campaign developed by and for students.
- Become familiar with mandatory reporting laws and communicate openly with students about limits to confidentiality up front.
- Partner with a local domestic violence and sexual assault program in your efforts.

Relevant resources:

- **National Center of Safe Supportive Learning Environments**
Visit safesupportivelearning.ed.gov/safe-place-to-learn-k12 for more information.
- National Sexual Violence Resource Center's **Sexual Violence on Campus: Strategies for Prevention**
Visit cdc.gov/violenceprevention/pdf/campusvprevention.pdf for more information.
- **Stop Sexual Assault in Schools**
Visit stopsexualassaultinschools.org for more information.
- Women's Fund of Omaha's **Sexual Violence Prevention Educator's Guide**
Visit omahawomensfund.org/svp-educators-guide for more information.

The following resources provide services to not only victims/survivors, but to family and friends as well.

State Resources

Nebraska's network of domestic violence and sexual assault programs provides a safety net of services across the state 24 hours a day.

To find a program near you, visit:
www.nebraskacoalition.org/get_informed/find-help.html

National Resources

National Domestic Violence Hotline

Visit thehotline.org for more information or to live chat with an advocate.

Phone: 1-800-799-SAFE (7233) or text START to 88788

National Teen Dating Abuse Helpline

Visit loveisrespect.org for more information or to live chat with an advocate.

Phone: 1-866-331-9474 or text LOVEIS to 22522

Rape, Abuse, Incest National Network (RAINN)

Visit rainn.org for more information or to live chat with an advocate.

Phone: 1-800-656-HOPE (4673)

Strong Hearts Native Helpline

Visit strongheartshelpline.org for more information or to live chat with an advocate.

Phone: 1-844-7NATIVE (762-8483)

Nebraska Coalition to End Sexual and Domestic Violence
nebraskacoalition.org

Sexual violence: Any behavior that is sexual (penetration of or contact with sexual body parts) and unwanted (involves force, fraud, coercion, or other instances without consent). This research defines sexual violence to include non-consensual, or unwanted, sexual behavior from any perpetrator. This includes unwanted sexual contact, non-consensual sex/rape, and attempted rape.

Sexual contact: Sexual kissing, fondling, or grabbing.

Non-consensual sex/rape: Non-consensual, or unwanted, vaginal, anal, oral, and other penetration resulting from abuse of power, verbal pressure or threats, force, or when consent is bypassed due to drugs or alcohol.

Attempted rape: The attempt of performing non-consensual sex/rape by force or through drugs and alcohol, but the sexual intercourse did not occur.

Intimate partner violence (IPV): The psychological aggression or physical violence by an intimate partner, which includes any current or former partners an individual has been involved with romantically or sexually, which might include spouses, boyfriends, girlfriends, sexual partners, or people they have dated or hooked up with.

Psychological aggression: Non-physical intimate partner violence measured through five behaviors that exhibit controlling, isolating, and concerning behavior by an intimate partner. These behaviors include public humiliation, threats of physical harm, being kept from having one's own money, isolation from family and friends, and tracking one's whereabouts.

Physical violence: Physical intimate partner violence measured through the following eight behaviors: being slapped, pushed, shoved, kicked, hit, slammed against something, strangled, beaten, or burnt on purpose, having one's hair pulled, or having a knife, gun, or other hard object be used.

Severe physical violence: Five specific behaviors classified under "physical violence." These include being slammed against something, strangled, beaten, burnt on purpose, and having a knife, gun, or other hard object used on them.

Extreme violence: Specific types of heightened violence that include severe physical violence (defined above) and rape/attempted rape through force or while drunk, drugged, or passed out.



NEBRASKA COALITION
TO END SEXUAL AND DOMESTIC VIOLENCE

In Partnership With:



hti labs