

# Prevalence and Characteristics of Sexual Violence, Stalking, and Intimate Partner Violence Victimization — National Intimate Partner and Sexual Violence Survey, United States, 2011



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# Prevalence and Characteristics of Sexual Violence, Stalking, and Intimate Partner Violence Victimization — National Intimate Partner and Sexual Violence Survey, United States, 2011

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## Abstract

**Problem/Condition:** Sexual violence, stalking, and intimate partner violence are public health problems known to have a negative impact on millions of persons in the United States each year, not only by way of immediate harm but also through negative long-term health impacts. Before implementation of the National Intimate Partner and Sexual Violence Survey (NISVS) in 2010, the most recent detailed national data on the public health burden from these forms of violence were obtained from the National Violence against Women Survey conducted during 1995–1996.

This report examines sexual violence, stalking, and intimate partner violence victimization using data from 2011. The report describes the overall prevalence of sexual violence, stalking, and intimate partner violence victimization; racial/ethnic variation in prevalence; how types of perpetrators vary by violence type; and the age at which victimization typically begins. For intimate partner violence, the report also examines a range of negative impacts experienced as a result of victimization, including the need for services.

**Reporting Period:** January–December, 2011.

**Description of System:** NISVS is a national random-digit-dial telephone survey of the noninstitutionalized English- and Spanish-speaking U.S. population aged  $\geq 18$  years. NISVS gathers data on experiences of sexual violence, stalking, and intimate partner violence among adult women and men in the United States by using a dual-frame sampling strategy that includes both landline and cellular telephones. The survey was conducted in 50 states and the District of Columbia; in 2011, the second year of NISVS data collection, 12,727 interviews were completed, and 1,428 interviews were partially completed.

**Results:** In the United States, an estimated 19.3% of women and 1.7% of men have been raped during their lifetimes; an estimated 1.6% of women reported that they were raped in the 12 months preceding the survey. The case count for men reporting rape in the preceding 12 months was too small to produce a statistically reliable prevalence estimate. An estimated 43.9% of women and 23.4% of men experienced other forms of sexual violence during their lifetimes, including being made to penetrate, sexual coercion, unwanted sexual contact, and noncontact unwanted sexual experiences. The percentages of women and men who experienced these other forms of sexual violence victimization in the 12 months preceding the survey were an estimated 5.5% and 5.1%, respectively. An estimated 15.2% of women and 5.7% of men have been a victim of stalking during their lifetimes. An estimated 4.2% of women and 2.1% of men were stalked in the 12 months preceding the survey.

With respect to sexual violence and stalking, female victims reported predominantly male perpetrators, whereas for male victims, the sex of the perpetrator varied by the specific form of violence examined. Male rape victims predominantly had male perpetrators, but other forms of sexual violence experienced by men were either perpetrated predominantly by women (i.e., being made to penetrate and sexual coercion) or split more evenly among male and female perpetrators (i.e., unwanted sexual contact and noncontact unwanted sexual experiences). In addition, male stalking victims also reported a more even mix of males and females who had perpetrated stalking against them.

The lifetime and 12-month prevalences of rape by an intimate partner for women were an estimated 8.8% and 0.8%, respectively; an estimated 0.5% of men experienced rape by an intimate partner during their lifetimes, although the case count for men reporting rape by an intimate partner in the preceding

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12 months was too small to produce a statistically reliable prevalence estimate. An estimated 15.8% of women and 9.5% of men experienced other forms of sexual violence by an intimate partner during their lifetimes, whereas an estimated 2.1% of both men and women experienced these forms of sexual violence by a partner in the 12 months before taking the survey. Severe physical violence by an intimate partner (including acts such as being hit with something hard, being kicked or beaten, or being burned on purpose) was experienced by an estimated 22.3% of women and 14.0% of men during their lifetimes and by an estimated 2.3% of women and 2.1% of men in the 12 months before taking the survey. Finally, the lifetime and 12-month prevalence of stalking by an intimate partner for women was an estimated 9.2% and 2.4%, respectively, while the lifetime and 12-month prevalence for men was an estimated 2.5% and 0.8%, respectively.

Many victims of sexual violence, stalking, and intimate partner violence were first victimized at a young age. Among female victims of completed rape, an estimated 78.7% were first raped before age 25 years (40.4% before age 18 years). Among male victims who were made to penetrate a perpetrator, an estimated 71.0% were victimized before age 25 years (21.3% before age 18 years). In addition, an estimated 53.8% of female stalking victims and 47.7% of male stalking victims were first stalked before age 25 years (16.3% of female victims and 20.5% of male victims before age 18 years). Finally, among victims of contact sexual violence, physical violence, or stalking by an intimate partner, an estimated 71.1% of women and 58.2% of men first experienced these or other forms of intimate partner violence before age 25 years (23.2% of female victims and 14.1% of male victims before age 18 years).

**Interpretation:** A substantial proportion of U.S. female and male adults have experienced some form of sexual violence, stalking, or intimate partner violence at least once during their lifetimes, and the sex of perpetrators varied by the specific form of violence examined. In addition, a substantial number of U.S. adults experienced sexual violence, stalking, or intimate partner violence during the 12 months preceding the 2011 survey. Consistent with previous studies, the overall pattern of results suggest that women, in particular, are heavily impacted over their lifetime. However, the results also indicate that many men experience sexual violence, stalking, and, in particular, physical violence by an intimate partner. Because of the broad range of short- and long-term consequences known to be associated with these forms of violence, the public health burden of sexual violence, stalking, and intimate partner violence is substantial. Results suggest that these forms of violence frequently are experienced at an early age because a majority of victims experienced their first victimization before age 25 years, with a substantial proportion experiencing victimization in childhood or adolescence.

**Public Health Action:** Because a substantial proportion of sexual violence, stalking, and intimate partner violence is experienced at a young age, primary prevention of these forms of violence must begin early. Prevention efforts should take into consideration that female sexual violence and stalking victimization is perpetrated predominately by men and that a substantial proportion of male sexual violence and stalking victimization (including rape, unwanted sexual contact, noncontact unwanted sexual experiences, and stalking) also is perpetrated by men. CDC seeks to prevent these forms of violence with strategies that address known risk factors for perpetration and by changing social norms and behaviors by using bystander and other prevention strategies. In addition, primary prevention of intimate partner violence is focused on the promotion of healthy relationship behaviors and other protective factors, with the goal of helping adolescents develop these positive behaviors before their first relationships. The early promotion of healthy relationships while behaviors are still relatively modifiable makes it more likely that young persons can avoid violence in their relationships.

## Introduction

Sexual violence, stalking, and intimate partner violence are important public health problems that affect the lives of millions of persons in the United States. These forms of violence can lead to serious short- and long-term consequences including physical injury, poor mental health, and chronic physical health problems (1,2). For some persons, violence victimization results in hospitalization, disability, or death. Furthermore, previous research indicates that victimization as a child or adolescent increases the likelihood that victimization will reoccur in adulthood (3,4).

Before implementation of the National Intimate Partner and Sexual Violence Survey (NISVS) in 2010, the most recent data on the national public health burden of sexual violence, stalking and intimate partner violence victimization came from the National Violence Against Women Survey, which was administered one time during 1995–1996 (3). This report examines these three forms of violence from the second year of NISVS data collection. The report describes overall prevalence of sexual violence, stalking, and intimate partner violence victimization by sex; racial/ethnic variation in prevalence; how the type of perpetrator varies by violence type; and the age at

which victimization typically begins for each violence type. For intimate partner violence, this report also examines a range of negative impacts experienced as a result of victimization, including the need for various community and health services. The purpose of this report is to describe the most recent data on the public health burden of sexual violence, stalking, and intimate partner violence victimization and the characteristics of victimization. Researchers, advocates, and policymakers can use the findings in this report to inform efforts to prevent and address these forms of violence.

## Methods

NISVS is an ongoing nationally representative random-digit–dial telephone survey of the noninstitutionalized English- and Spanish-speaking U.S. population aged  $\geq 18$  years. NISVS uses a dual-frame sampling strategy that includes both landline and cellular telephones and is conducted in 50 states and the District of Columbia.

In 2011, a total of 14,155 interviews were conducted (7,758 women and 6,397 men). A total of 12,727 interviews were completed, and 1,428 interviews were partially completed. A total of 6,879 women and 5,848 men completed the survey. The estimates presented in this report are based on completed interviews. An interview is defined as having been completed if the respondent completed the demographic and general health questions as well as all of the violence victimization questions. Approximately 40.0% of completed interviews were conducted by landline telephone, and 60.0% of completed interviews were conducted by using a respondent's cellular telephone.

The American Association for Public Opinion Research (AAPOR) response rate RR4 was computed by using weighted case counts (5). The overall weighted response rate for the 2011 NISVS survey was 33.1%. The weighted cooperation rate, which reflects the proportion of persons contacted who agreed to participate in the interview and who were determined to be eligible, was 83.5%.

The questionnaire included behaviorally specific questions that assessed being a victim of sexual violence, stalking, and intimate partner violence over the respondent's lifetime and during the 12 months before interview. A list of the verbatim questions used in the 2011 survey can be found at <http://stacks.cdc.gov/view/cdc/24726>.

The specific types of sexual violence assessed included rape (completed or attempted forced penetration or alcohol- or drug-facilitated penetration) and sexual violence other than rape, including being made to penetrate a perpetrator, sexual coercion (nonphysically pressured unwanted penetration), unwanted sexual contact (e.g., kissing or fondling), and

noncontact unwanted sexual experiences (e.g., being flashed or forced to view sexually explicit media).

Respondents were classified as stalking victims if 1) they experienced multiple stalking tactics or a single stalking tactic multiple times by the same perpetrator and 2) they felt very fearful or believed that they or someone close to them would be harmed or killed as a result of a perpetrator's stalking behaviors. Examples of stalking tactics measured by NISVS included receiving unwanted e-mail messages, instant messages, or messages through social media; being watched or followed; and having someone approach or show up in the victim's home, workplace, or school when unwanted.

This report examines the four subtypes of intimate partner violence that comprise CDC's definition of being a victim of intimate partner violence: sexual violence, physical violence, stalking, and psychological aggression (6). Intimate partner violence can be perpetrated by current or former spouses (including married spouses, common-law spouses, civil union spouses, and domestic partners), boyfriends/girlfriends, dating partners, and ongoing sexual partners. Questions concerning physical violence victimization included items regarding the experience of being slapped, pushed, or shoved, as well as items categorized as severe physical violence in the literature (7). These include being hurt by pulling hair, being hit with something hard, being kicked, being slammed against something, attempts to hurt by choking or suffocating, being beaten, being burned on purpose, and having a partner use a knife or gun against the victim. Psychological aggression includes expressive aggression (e.g., name calling, or insulting or humiliating an intimate partner) and coercive control, which includes behaviors that are intended to monitor, control, or threaten an intimate partner.

Intimate partner violence-related impact was measured by using a set of questions that assessed a range of direct impacts that might be experienced by victims of intimate partner violence. Intimate partner violence–related impacts include fear, concern for safety, having experienced at least one post-traumatic stress disorder (PTSD) symptom, injury, having contacted a crisis hotline, needing health care, needing housing services, needing victim's advocate services, needing legal services, and having missed at least 1 day of work or school. For those who reported being raped, it also includes contracting a sexually transmitted infection or, for women only, becoming pregnant. This information not only serves as an indicator of the range in severity of victimization experiences but also documents the need for particular preventive services and responses. Intimate partner violence–related impact was assessed in relation to specific perpetrators, without regard to when the impact occurred. It also was asked in relation to all forms of intimate partner violence experienced in that

relationship. The prevalence of intimate partner violence–related impact was calculated among those who experienced contact sexual violence, physical violence, or stalking by an intimate partner. Contact sexual violence includes not only rape but also being made to penetrate a perpetrator, sexual coercion, and unwanted sexual contact.

Analyses were stratified by the respondent's sex. Prevalence by race and ethnicity also were estimated. No formal statistical comparisons of the prevalence estimates between demographic subgroups were made. Statistical inference for prevalence and population estimates were made on the basis of weighted analyses, in which complex sample design features (including stratified sampling, weighting for unequal sample selection probabilities, and nonresponse adjustments) were taken into account to produce nationally representative estimates. The estimated number of victims affected by a particular form of violence is based on U.S. population estimates from the census projections by state, sex, age, and race/ethnicity (8–10).

The relative standard error (RSE) is a measure of an estimate's reliability and was calculated for all estimates in this report. If the RSE was >30%, the estimate was deemed unreliable and is not reported. Consideration was also given to the case count. If the estimate was based on a numerator that was  $\leq 20$ , the estimate also is not reported.

A more complete description of the methods is available at <http://stacks.cdc.gov/view/cdc/12362>. Several of the sexual violence and stalking questions were modified between the 2010 and 2011 survey. Specifically, questions from 2010 regarding rape and being made to penetrate a perpetrator that combined several behaviors were split into separate questions in 2011. Also, the wording of a question measuring public sexual harassment was changed from “harassed” to “verbally harassed.” In addition, a question from 2010 asking about a perpetrator having fondled or grabbed the respondent's sexual body parts was modified to ask about a perpetrator having fondled, groped, grabbed, or touched the respondent in a way that made the respondent feel unsafe. One of the stalking items asked in 2010 was split into two items for 2011, and the order of the administration of stalking questions was changed between the 2010 and 2011 surveys so that questions about more severe stalking behaviors were asked first. This change in the ordering of items was made to set a better context for the stalking behaviors that might be perceived by respondents as less severe (e.g., unwanted calls and e-mail messages). These items were placed after the more severe stalking items to minimize reporting of these behaviors when they occurred outside of a stalking situation (e.g., harassment). Finally, intimate partner violence–related impact was calculated differently in 2011 than in 2010. In 2010, intimate partner violence–related impact was calculated among those who experienced rape,

physical violence, or stalking whereas in 2011, intimate partner violence–related impact was calculated among those who experienced contact sexual violence, physical violence, or stalking. The NISVS survey protocol received approval from the Institutional Review Board of RTI International.

## Results

### Sexual Violence Victimization

#### Prevalence of Sexual Violence Victimization

In the United States, an estimated 19.3% of women (or >23 million women) have been raped during their lifetimes (Table 1). Completed forced penetration was experienced by an estimated 11.5% of women. Nationally, an estimated 1.6% of women (or approximately 1.9 million women) were raped in the 12 months before taking the survey.

An estimated 1.7% of men (or almost 2.0 million men) were raped during their lifetimes; 0.7% of men experienced completed forced penetration. The case count for men reporting rape in the preceding 12 months was too small to produce a statistically reliable prevalence estimate.

An estimated 43.9% of women experienced sexual violence other than rape during their lifetimes, and an estimated 5.5% of women were victims of sexual violence other than rape in the 12 months preceding the survey. For men, an estimated 23.4% experienced sexual violence other than rape during their lifetimes, and 5.1% experienced sexual violence other than rape in the 12 months before completing the survey.

An estimated 0.6% of women (>700,000 women) were made to penetrate a perpetrator during their lifetimes. The case count for women reporting being made to penetrate a perpetrator in the preceding 12 months was too small to produce a statistically reliable prevalence estimate. For men, the lifetime prevalence of being made to penetrate a perpetrator was an estimated 6.7% (>7.6 million men), while an estimated 1.7% of men were made to penetrate a perpetrator in the 12 months preceding the survey. An estimated 12.5% of women experienced sexual coercion during their lifetimes. Sexual coercion was experienced by an estimated 2.0% of women in the 12 months before taking the survey. An estimated 5.8% of men experienced sexual coercion during their lifetimes while an estimated 1.3% of men experienced sexual coercion in the 12 months before taking the survey.

Approximately one in four women (27.3%) is estimated to have experienced some form of unwanted sexual contact during their lifetimes. In the 12 months preceding the survey, an estimated 2.2% of women experienced unwanted sexual contact. An estimated 10.8% of men experienced unwanted

**TABLE 1. Lifetime and 12-month prevalence of sexual violence victimization, by sex of victim — National Intimate Partner and Sexual Violence Survey, United States, 2011**

Prevalence	Women			Men		
	%*	(95% CI)	Estimated no. of victims <sup>†</sup>	%*	(95% CI)	Estimated no. of victims <sup>†</sup>
<b>Lifetime</b>						
Rape	19.3	(17.9–20.8)	23,305,000	1.7	(1.3–2.2)	1,971,000
Completed forced penetration	11.5	(10.3–12.7)	13,826,000	0.7	(0.5–1.1)	834,000
Attempted forced penetration	6.4	(5.6–7.4)	7,732,000	— <sup>§</sup>	—	—
Completed alcohol- or drug-facilitated penetration	9.3	(8.3–10.5)	11,276,000	1.1	(0.8–1.6)	1,308,000
Other sexual violence	43.9	(42.1–45.6)	52,958,000	23.4	(21.8–25.0)	26,590,000
Made to penetrate	0.6	(0.4–0.8)	703,000	6.7	(5.7–7.8)	7,610,000
Sexual coercion	12.5	(11.3–13.7)	15,045,000	5.8	(4.9–6.7)	6,558,000
Unwanted sexual contact	27.3	(25.8–28.9)	33,016,000	10.8	(9.6–12.0)	12,238,000
Noncontact unwanted sexual experiences	32.1	(30.5–33.8)	38,813,000	13.3	(12.1–14.7)	15,150,000
<b>12-month</b>						
Rape	1.6	(1.1–2.2)	1,929,000	—	—	—
Completed forced penetration	—	—	—	—	—	—
Attempted forced penetration	—	—	—	—	—	—
Completed alcohol- or drug-facilitated penetration	1.0	(0.7–1.5)	1,213,000	—	—	—
Other sexual violence	5.5	(4.7–6.5)	6,687,000	5.1	(4.3–6.0)	5,797,000
Made to penetrate	—	—	—	1.7	(1.3–2.3)	1,921,000
Sexual coercion	2.0	(1.5–2.6)	2,389,000	1.3	(1.0–1.8)	1,495,000
Unwanted sexual contact	2.2	(1.7–2.9)	2,687,000	1.6	(1.2–2.1)	1,777,000
Noncontact unwanted sexual experiences	3.4	(2.7–4.1)	4,046,000	2.5	(2.0–3.1)	2,829,000

**Abbreviation:** CI = confidence interval.

\* Percentages are weighted.

<sup>†</sup> Rounded to the nearest thousand.

<sup>§</sup> Estimate is not reported; relative standard error >30% or cell size ≤20.

sexual contact during their lifetimes, with an estimated 1.6% of men having experienced unwanted sexual contact in the 12 months before taking the survey.

Approximately one in three women (32.1%) is estimated to have experienced some type of noncontact unwanted sexual experience during their lifetimes, and an estimated 3.4% of women experienced this in the 12 months before taking the survey. An estimated 13.3% of men experienced noncontact unwanted sexual experiences during their lifetimes, and an estimated 2.5% of men experienced this type of victimization in the previous 12 months.

### Prevalence of Sexual Violence Victimization by Race/Ethnicity

In the United States, an estimated 32.3% of multiracial women, 27.5% of American Indian/Alaska Native women, 21.2% of non-Hispanic black women, 20.5% of non-Hispanic white women, and 13.6% of Hispanic women were raped during their lifetimes (Table 2). The case counts of other racial/ethnic categories of women were too small to report statistically reliable estimates. Lifetime estimates of rape for men by race/ethnicity were also not statistically reliable for reporting because of a small case count, with one exception: an estimated 1.6% of non-Hispanic white men were raped during their lifetimes.

An estimated 64.1% of multiracial women, 55.0% of American Indian/Alaska Native women, 46.9% of non-Hispanic white women, and 38.2% of non-Hispanic black women experienced sexual violence other than rape during their lifetimes. In addition, an estimated 35.6% of Hispanic women and 31.9% of Asian or Pacific Islander women experienced sexual violence other than rape during their lifetimes.

Among men, an estimated 39.5% of multiracial men experienced sexual violence other than rape during their lifetimes. In addition, 26.6% of Hispanic men, 24.5% of American Indian/Alaska Native men, 24.4% of non-Hispanic black men, and 22.2% of non-Hispanic white men experienced sexual violence other than rape during their lifetimes, and an estimated 15.8% of Asian or Pacific Islander men experienced this type of sexual violence during their lifetimes.

### Characteristics of Sexual Violence Perpetrators

For female rape victims, an estimated 99.0% had only male perpetrators. In addition, an estimated 94.7% of female victims of sexual violence other than rape had only male perpetrators. For male victims, the sex of the perpetrator varied by the type of sexual violence experienced. The majority of male rape victims (an estimated 79.3%) had only male perpetrators. For three of the other forms of sexual violence, a majority of male victims had only female perpetrators: being made to penetrate (an

**TABLE 2. Lifetime prevalence of sexual violence victimization, by sex and race/ethnicity\* of victim — National Intimate Partner and Sexual Violence Survey, United States, 2011**

	Women			Men		
	% <sup>†</sup>	(95% CI)	Estimated no. of victims <sup>§</sup>	% <sup>†</sup>	(95% CI)	Estimated no. of victims <sup>§</sup>
<b>White, non-Hispanic</b>						
Rape	20.5	(18.8–22.3)	16,475,000	1.6	(1.2–2.2)	1,232,000
Other sexual violence <sup>¶</sup>	46.9	(44.9–48.9)	37,661,000	22.2	(20.5–24.1)	16,846,000
<b>Black, non-Hispanic</b>						
Rape	21.2	(17.2–25.9)	3,084,000	—**	—	—
Other sexual violence <sup>¶</sup>	38.2	(33.3–43.3)	5,555,000	24.4	(19.4–30.2)	3,094,000
<b>Hispanic</b>						
Rape	13.6	(10.1–18.1)	2,204,000	—	—	—
Other sexual violence <sup>¶</sup>	35.6	(30.3–41.3)	5,771,000	26.6	(21.6–32.3)	4,348,000
<b>American Indian/Alaska Native</b>						
Rape	27.5	(16.1–42.7)	—	—	—	—
Other sexual violence <sup>¶</sup>	55.0	(41.5–67.9)	452,000	24.5	(13.5–40.3)	—
<b>Asian or Pacific Islander</b>						
Rape	—	—	—	—	—	—
Other sexual violence <sup>¶</sup>	31.9	(22.6–43.0)	1,924,000	15.8	(10.0–24.3)	842,000
<b>Multiracial</b>						
Rape	32.3	(22.9–43.3)	663,000	—	—	—
Other sexual violence <sup>¶</sup>	64.1	(52.5–74.2)	1,316,000	39.5	(30.2–49.5)	817,000

**Abbreviation:** CI = confidence interval.

\* Race/ethnicity was self-identified. The American Indian or Alaska Native designation does not indicate being enrolled or affiliated with a tribe. Persons of Hispanic ethnicity can be of any race or combination of races.

<sup>†</sup> Percentages are weighted.

<sup>§</sup> Rounded to the nearest thousand.

<sup>¶</sup> Includes being made to penetrate a perpetrator, sexual coercion, unwanted sexual contact, and noncontact unwanted sexual experiences.

\*\* Estimate is not reported; relative standard error >30% or cell size ≤20.

estimated 82.6%), sexual coercion (an estimated 80.0%), and unwanted sexual contact (an estimated 54.7%). For noncontact unwanted sexual experiences, nearly half of male victims (an estimated 46.0%) had only male perpetrators and an estimated 43.6% had only female perpetrators.

The majority of victims of all types of sexual violence knew their perpetrators. Almost half of female victims of rape (an estimated 46.7%) had at least one perpetrator who was an acquaintance, and an estimated 45.4% of female rape victims had at least one perpetrator who was an intimate partner (Table 3). More than half (an estimated 58.4%) of women who experienced alcohol/drug facilitated penetration were victimized by an acquaintance. An estimated 44.9% of male victims of rape were raped by an acquaintance, and an estimated 29.0% of male victims of rape were raped by an intimate partner. The estimates for male victims raped by other types of perpetrators are not reported because the case counts were too small to calculate a reliable estimate.

For sexual violence other than rape of both women and men, the type of perpetrator varied by the form of sexual violence experienced. The majority of female victims of sexual coercion (an estimated 74.1%) had an intimate partner as a perpetrator, and nearly half of female victims of unwanted sexual contact (an estimated 47.2%) had an acquaintance as a perpetrator.

About half of the female victims of noncontact unwanted sexual experiences had a stranger as a perpetrator (an estimated 49.3%).

Among men who were made to penetrate a perpetrator, an estimated 54.5% were made to penetrate an intimate partner and an estimated 43.0% were made to penetrate an acquaintance. The majority of male victims of sexual coercion (an estimated 69.5%) had an intimate partner as a perpetrator. Among male victims of unwanted sexual contact, about half (an estimated 51.8%) had an acquaintance as a perpetrator. Finally, among male victims of noncontact unwanted sexual violence, an estimated 39.2% had an acquaintance as a perpetrator, followed by an intimate partner (an estimated 30.9%), or a stranger (an estimated 30.9%).

## Stalking Victimization

### Prevalence of Stalking Victimization

In the United States, an estimated 15.2% of women (18.3 million women) have experienced stalking during their lifetimes that made them feel very fearful or made them believe that they or someone close to them would be harmed or killed (Table 4). In addition, an estimated 4.2% of women (approximately 5.1 million women) were stalked in the 12 months before taking the survey.



**TABLE 3. Lifetime reports of sexual violence among victims, by type of perpetrator\* and sex of victim — National Intimate Partner and Sexual Violence Survey, United States, 2011**

	Current/former intimate partner			Family member <sup>†</sup>			Person of authority <sup>§</sup>			Acquaintance <sup>¶</sup>			Stranger		
	%**	(95% CI)	Estimated no. of victims <sup>††</sup>	%**	(95% CI)	Estimated no. of victims <sup>††</sup>	%**	(95% CI)	Estimated no. of victims <sup>††</sup>	%**	(95% CI)	Estimated no. of victims <sup>††</sup>	%**	(95% CI)	Estimated no. of victims <sup>††</sup>
<b>Women</b>															
Rape	45.4	(41.3–49.5)	10,574,000	12.1	(9.4–15.4)	2,823,000	2.6	(1.5–4.6)	611,000	46.7	(42.5–51.0)	10,889,000	12.9	(10.7–15.6)	3,017,000
Completed or attempted forced penetration	48.1	(43.2–53.1)	8,264,000	14.9	(11.5–19.2)	2,566,000	— <sup>§§</sup>	—	—	38.8	(33.9–43.9)	6,660,000	11.0	(8.7–13.8)	1,894,000
Completed alcohol- or drug-facilitated penetration	40.4	(34.7–46.4)	4,558,000	—	—	—	—	—	—	58.4	(52.5–64.0)	6,582,000	12.4	(9.2–16.4)	1,395,000
Other sexual violence	36.0	(33.5–38.6)	19,082,000	16.7	(14.8–18.7)	8,845,000	7.6	(6.4–9.2)	4,043,000	43.4	(40.8–46.0)	22,963,000	43.0	(40.4–45.6)	22,754,000
Made to penetrate	53.2	(36.0–69.7)	374,000	—	—	—	—	—	—	—	—	—	—	—	
Sexual coercion	74.1	(69.5–78.3)	11,156,000	8.1	(5.1–12.4)	1,213,000	6.1	(4.1–9.2)	925,000	25.5	(21.1–30.5)	3,841,000	—	—	—
Unwanted sexual contact	23.4	(20.6–26.4)	7,711,000	22.1	(19.4–25.0)	7,286,000	8.9	(7.1–11.0)	2,923,000	47.2	(43.9–50.6)	15,586,000	21.1	(18.5–23.9)	6,967,000
Noncontact unwanted sexual experiences	26.6	(23.8–29.5)	10,311,000	15.1	(13.0–17.5)	5,879,000	3.7	(2.7–5.1)	1,436,000	33.5	(30.6–36.7)	13,017,000	49.3	(46.1–52.4)	19,118,000
<b>Men</b>															
Rape	29.0	(18.4–42.6)	572,000	—	—	—	—	—	—	44.9	(32.2–58.3)	885,000	—	—	—
Completed or attempted forced penetration	—	—	—	—	—	—	—	—	—	32.2	(18.8–49.2)	—	—	—	—
Completed alcohol- or drug-facilitated penetration	—	—	—	—	—	—	—	—	—	51.0	(34.1–67.7)	667,000	—	—	—
Other sexual violence	40.7	(36.8–44.7)	10,828,000	5.5	(4.0–7.6)	1,471,000	6.5	(4.8–8.7)	1,723,000	45.6	(41.7–49.6)	12,134,000	27.2	(23.8–30.8)	7,221,000
Made to penetrate	54.5	(46.8–62.1)	4,151,000	—	—	—	—	—	—	43.0	(35.5–50.8)	3,271,000	8.6	(5.4–13.2)	651,000
Sexual coercion	69.5	(61.6–76.3)	4,554,000	—	—	—	—	—	—	26.7	(20.4–34.0)	1,748,000	—	—	—
Unwanted sexual contact	22.6	(18.1–28.0)	2,771,000	6.1	(4.0–9.1)	741,000	6.7	(4.3–10.3)	820,000	51.8	(45.9–57.6)	6,339,000	23.7	(18.9–29.3)	2,903,000
Noncontact unwanted sexual experiences	30.9	(26.0–36.3)	4,686,000	7.2	(4.9–10.5)	1,088,000	7.0	(4.9–9.8)	1,056,000	39.2	(34.3–44.3)	5,939,000	30.9	(26.4–35.7)	4,674,000

**Abbreviation:** CI = confidence interval.

\* Relationship is based on victims' reports of their relationship at the time the perpetrator first committed any violence against them. Because of the possibility of multiple perpetrators, combined row percentages might exceed 100%.

<sup>†</sup> Includes immediate and extended family members.

<sup>§</sup> Includes, for example, boss, supervisor, superior in command, teacher, professor, coach, clergy, doctor, therapist, and caregiver.

<sup>¶</sup> Includes friends, neighbors, family friends, first date, someone briefly known, and persons not known well.

\*\* Percentages are weighted.

<sup>††</sup> Rounded to the nearest thousand.

<sup>§§</sup> Estimate is not reported; relative standard error >30% or cell size ≤20.

**TABLE 4. Prevalence of stalking victimization, by sex and race/ethnicity\* of victim — National Intimate Partner and Sexual Violence Survey, United States, 2011**

	Women			Men		
	% <sup>†</sup>	(95% CI)	Estimated no. of victims <sup>§</sup>	% <sup>†</sup>	(95% CI)	Estimated no. of victims <sup>§</sup>
<b>All races/ethnicities (lifetime)</b>	<b>15.2</b>	<b>(13.9–16.6)</b>	<b>18,330,000</b>	<b>5.7</b>	<b>(4.7–6.8)</b>	<b>6,487,000</b>
White, non-Hispanic	15.9	(14.4–17.5)	12,749,000	4.7	(3.9–5.8)	3,581,000
Black, non-Hispanic	13.9	(10.7–17.9)	2,020,000	9.1	(5.3–15.4)	1,159,000
Hispanic	14.2	(10.6–18.7)	2,295,000	8.2	(4.9–13.3)	1,342,000
American Indian/Alaska Native	24.5	(14.2–38.8)	— <sup>¶</sup>	—	—	—
Asian or Pacific Islander	—	—	—	—	—	—
Multiracial	22.4	(15.0–32.1)	461,000	9.3	(5.3–15.7)	192,000
<b>All races/ethnicities (12-month)</b>	<b>4.2</b>	<b>(3.5–5.1)</b>	<b>5,094,000</b>	<b>2.1</b>	<b>(1.6–2.8)</b>	<b>2,435,000</b>

**Abbreviation:** CI = confidence interval.

\* Race/ethnicity was self-identified. The American Indian/Alaska Native designation does not indicate being enrolled or affiliated with a tribe. Persons of Hispanic ethnicity can be of any race or combination of races.

<sup>†</sup> Percentages are weighted.

<sup>§</sup> Rounded to the nearest thousand.

<sup>¶</sup> Estimate is not reported; relative standard error >30% or cell size ≤20.

Nationally, an estimated 5.7% of men (or nearly 6.5 million) have experienced stalking victimization during their lifetimes,

while an estimated 2.1% of men (or 2.4 million) were stalked in the 12 months before taking the survey.

## Prevalence of Stalking Victimization by Race/Ethnicity

An estimated 24.5% of American Indian/Alaska Native women experienced stalking during their lifetimes, and an estimated 22.4% of multiracial women were stalked during their lifetimes (Table 4). An estimated 15.9% of non-Hispanic white women experienced stalking during their lifetimes, and the prevalence of stalking for Hispanic and non-Hispanic black women was an estimated 14.2% and 13.9%, respectively. The estimate for Asian or Pacific Islander women was not reported because the case count was too small to produce a reliable estimate.

An estimated 9.3% of multiracial men experienced stalking during their lifetimes, as did an estimated 9.1% of non-Hispanic black men, 8.2% of Hispanic men, and 4.7% of non-Hispanic white men. The estimates for the other racial/ethnic groups of men are not reported because case counts were too small to produce a reliable estimate.

## Frequency of Stalking Acts Among Stalking Victims

A variety of tactics were used to stalk victims during their lifetimes. An estimated 61.7% of female stalking victims were approached, such as at their home or work; over half (an estimated 55.3%) received unwanted messages, such as text and voice messages; an estimated 54.5% received unwanted telephone calls, including hang-ups (Table 5). In addition, nearly half (an estimated 49.7%) of female stalking victims were watched, followed, or spied on with a listening device, camera, or global positioning system (GPS) device.

An estimated 58.2% of male stalking victims received unwanted telephone calls, and an estimated 56.7% received unwanted messages. An estimated 47.7% of male stalking victims were approached by their perpetrator, and an estimated 32.2% were watched, followed, or spied on with a listening or other device.

**TABLE 5. Proportion of stalking victims who experienced individual stalking tactics, by sex of victim and time period — National Intimate Partner and Sexual Violence Survey, United States, 2011**

Stalking tactic	Women						Men					
	Lifetime			12-month			Lifetime			12-month		
	%*	(95% CI)	Estimated no. of victims <sup>†</sup>	%*	(95% CI)	Estimated no. of victims <sup>†</sup>	%*	(95% CI)	Estimated no. of victims <sup>†</sup>	%*	(95% CI)	Estimated no. of victims <sup>†</sup>
Watched or followed victim from a distance, or spied on victim with a listening device, camera, or global positioning system	49.7	(45.0–54.4)	9,109,000	25.9	(17.4–36.8)	1,322,000	32.2	(23.6–42.3)	2,090,000	— <sup>§</sup>	—	—
Approached victim or showed up in places (e.g., home, school, or workplace) when victim didn't want them to be there	61.7	(57.1–66.1)	11,313,000	33.6	(24.6–43.9)	1,709,000	47.7	(38.3–57.2)	3,094,000	40.0	(27.6–53.9)	975,000
Left strange or threatening items for victim to find	15.0	(11.8–18.9)	2,754,000	—	—	—	14.7	(9.7–21.7)	956,000	—	—	—
Sneaked into victim's car or home and did things to scare victim by letting victim know they had been there	26.8	(22.7–31.3)	4,905,000	7.8	(4.9–12.1)	396,000	—	—	—	—	—	—
Left victim unwanted messages, including text or voice messages	55.3	(50.5–59.9)	10,132,000	52.7	(42.6–62.6)	2,686,000	56.7	(47.5–65.5)	3,681,000	48.7	(35.6–62.0)	1,186,000
Made unwanted telephone calls to victim, including hang-ups	54.5	(49.8–59.1)	9,987,000	45.4	(35.8–55.2)	2,311,000	58.2	(49.0–66.9)	3,777,000	58.9	(45.6–71.0)	1,434,000
Sent victim unwanted emails, instant messages, or messages through social media websites	14.3	(11.1–18.2)	2,618,000	30.0	(21.3–40.4)	1,527,000	9.4	(6.0–14.3)	607,000	18.1	(10.8–28.6)	440,000
Left victim unwanted cards, letters, flowers, or presents when they knew victim didn't want them to do so	24.7	(20.6–29.3)	4,524,000	17.8	(10.0–29.9)	—	—	—	—	—	—	—

**Abbreviation:** CI = confidence interval.

\*Percentages are weighted.

<sup>†</sup> Rounded to the nearest thousand.

<sup>§</sup> Estimate is not reported; relative standard error >30% or cell size ≤20.

## Characteristics of Stalking Perpetrators

Among persons who were victims of stalking during their lifetimes, the sex of the perpetrator varied somewhat by the sex of the victim. Among female stalking victims, an estimated 88.3% were stalked by only male perpetrators; an estimated 7.1% had only female perpetrators. Among male stalking victims, almost half (an estimated 48.0%) were stalked by only male perpetrators while a similar proportion (an estimated 44.6%) were stalked by only female perpetrators.

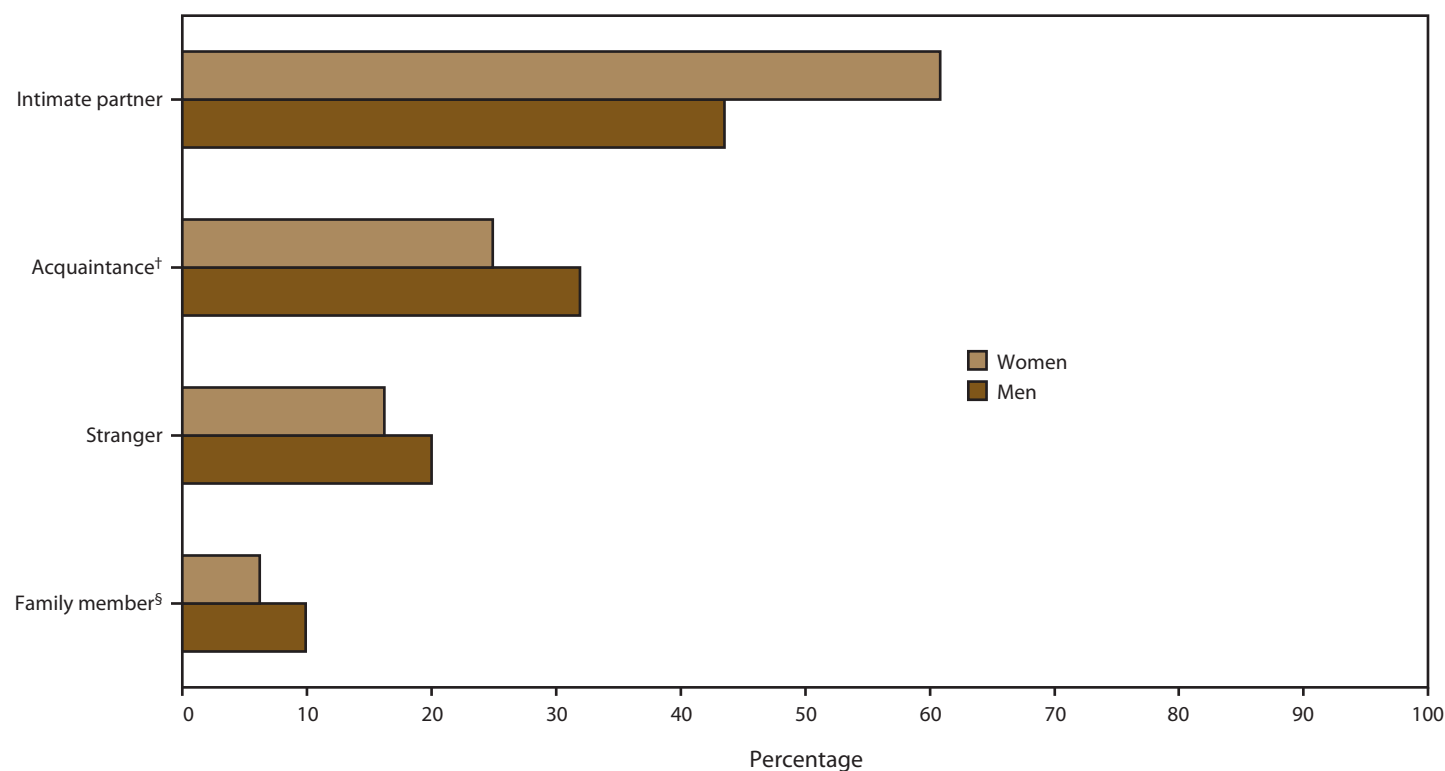
Both female and male victims often identified their stalkers as persons whom they knew or with whom they had an intimate relationship. Among female stalking victims, an estimated 60.8% were stalked by a current or former intimate partner, nearly one-quarter (an estimated 24.9%) were stalked by an acquaintance, an estimated 16.2% were stalked by a stranger, and an estimated 6.2% were stalked by a family member (Figure 1). Among male stalking victims, an estimated 43.5% were stalked by an intimate partner, an estimated 31.9% by an acquaintance, an estimated 20.0% by a stranger, and an estimated 9.9% by a family member.

## Intimate Partner Violence Victimization

### Prevalence of Intimate Partner Violence Victimization

The lifetime and 12-month prevalence of rape by an intimate partner for women was an estimated 8.8% and 0.8%, respectively (Table 6). Nationally, an estimated 15.8% of women experienced other forms of sexual violence by an intimate partner during their lifetimes, while an estimated 2.1% of women experienced other forms of sexual violence by a partner in the 12 months before taking the survey. The lifetime prevalence of physical violence by an intimate partner was an estimated 31.5% among women and in the 12 months before taking the survey, an estimated 4.0% of women experienced some form of physical violence by an intimate partner. An estimated 22.3% of women experienced at least one act of severe physical violence by an intimate partner during their lifetimes. With respect to individual severe physical violence behaviors, being slammed against something was experienced by an estimated 15.4% of women, and being hit with a fist or something hard was experienced by 13.2% of women. In

**FIGURE 1. Lifetime reports of stalking among female and male victims, by type of perpetrator\* — National Intimate Partner and Sexual Violence Survey, United States, 2011**



\* Relationship is based on victims' reports of their relationship at the time the perpetrator first committed any violence against them. Due to the possibility of multiple perpetrators, the combined percentages exceed 100%.

<sup>†</sup> Includes friends, neighbors, family friends, first date, someone briefly known, and persons not known well.

<sup>§</sup> Includes immediate and extended family members.

**TABLE 6. Lifetime and 12-month prevalence of intimate partner violence victimization, by sex of victim and time period — National Intimate Partner and Sexual Violence Survey, United States, 2011**

Sexual violence	Women						Men					
	Lifetime			12-month			Lifetime			12-month		
	%*	(95% CI)	Estimated no. of victims <sup>†</sup>	%*	(95% CI)	Estimated no. of victims <sup>†</sup>	%*	(95% CI)	Estimated no. of victims <sup>†</sup>	%*	(95% CI)	Estimated no. of victims <sup>†</sup>
Rape	8.8	(7.8–9.8)	10,574,000	0.8	(0.5–1.2)	922,000	0.5	(0.3–0.8)	572,000	— <sup>§</sup>	—	—
Completed forced penetration	5.6	(4.8–6.5)	6,770,000	—	—	—	—	—	—	—	—	—
Attempted forced penetration	2.8	(2.2–3.5)	3,368,000	—	—	—	—	—	—	—	—	—
Completed alcohol- or drug-facilitated penetration	3.8	(3.1–4.5)	4,558,000	0.5	(0.3–0.8)	618,000	—	—	—	—	—	—
Other sexual violence	15.8	(14.6–17.1)	19,082,000	2.1	(1.6–2.6)	2,476,000	9.5	(8.4–10.8)	10,828,000	2.1	(1.7–2.7)	2,442,000
Made to penetrate	0.3	(0.2–0.5)	374,000	—	—	—	3.6	(2.9–4.5)	4,151,000	0.8	(0.6–1.2)	962,000
Sexual coercion	9.2	(8.3–10.3)	11,156,000	1.5	(1.1–1.9)	1,752,000	4.0	(3.3–4.8)	4,554,000	0.9	(0.7–1.3)	1,044,000
Unwanted sexual contact	6.4	(5.6–7.3)	7,711,000	0.6	(0.4–1.0)	776,000	2.4	(1.9–3.1)	2,771,000	—	—	—
Noncontact unwanted sexual experiences	8.5	(7.6–9.6)	10,311,000	0.9	(0.6–1.2)	1,043,000	4.1	(3.4–5.0)	4,686,000	0.8	(0.5–1.3)	929,000
Physical violence	31.5	(29.9–33.2)	38,028,000	4.0	(3.2–4.8)	4,774,000	27.5	(25.8–29.3)	31,331,000	4.8	(4.0–5.8)	5,452,000
Slapped, pushed, shoved	29.7	(28.1–31.4)	35,872,000	3.7	(3.0–4.5)	4,447,000	25.5	(23.8–27.2)	28,992,000	4.4	(3.6–5.3)	4,983,000
Slapped	18.9	(17.6–20.4)	22,864,000	1.7	(1.2–2.3)	2,056,000	19.5	(18.0–21.1)	22,216,000	2.7	(2.1–3.5)	3,072,000
Pushed/shoved	27.3	(25.7–28.9)	32,955,000	3.1	(2.5–3.9)	3,736,000	18.3	(16.9–19.9)	20,849,000	3.2	(2.6–4.0)	3,641,000
Any severe physical violence	22.3	(20.8–23.9)	26,928,000	2.3	(1.8–2.9)	2,752,000	14.0	(12.7–15.5)	15,985,000	2.1	(1.6–2.7)	2,374,000
Hurt by pulling hair	9.4	(8.4–10.6)	11,397,000	0.9	(0.6–1.3)	1,088,000	2.6	(2.1–3.3)	3,014,000	—	—	—
Hit with a fist or something hard	13.2	(12.0–14.4)	15,881,000	1.2	(0.8–1.8)	1,471,000	10.1	(9.0–11.4)	11,506,000	1.5	(1.1–2.1)	1,695,000
Kicked	6.7	(5.8–7.6)	8,033,000	0.4	(0.2–0.7)	494,000	4.6	(3.8–5.4)	5,190,000	0.5	(0.3–0.8)	555,000
Slammed against something	15.4	(14.2–16.8)	18,638,000	1.3	(1.0–1.8)	1,614,000	2.5	(2.0–3.1)	2,836,000	0.4	(0.2–0.7)	455,000
Tried to hurt by choking or suffocating	9.2	(8.2–10.3)	11,120,000	0.7	(0.5–1.2)	896,000	0.7	(0.5–1.1)	814,000	—	—	—
Beaten	10.5	(9.5–11.7)	12,719,000	0.7	(0.4–1.0)	795,000	2.3	(1.8–3.0)	2,654,000	—	—	—
Burned on purpose	1.2	(0.8–1.7)	1,423,000	—	—	—	0.3	(0.2–0.6)	384,000	—	—	—
Used a knife or gun	4.2	(3.5–5.0)	5,101,000	—	—	—	2.3	(1.8–3.0)	2,661,000	—	—	—
Stalking	9.2	(8.2–10.3)	11,149,000	2.4	(1.9–3.0)	2,883,000	2.5	(1.9–3.3)	2,822,000	0.8	(0.6–1.2)	940,000
Psychological aggression <sup>¶</sup>	47.1	(45.3–48.8)	56,807,000	14.2	(12.9–15.5)	17,091,000	46.5	(44.6–48.4)	52,937,000	18.0	(16.5–19.6)	20,471,000
Expressive aggression	39.0	(37.3–40.8)	47,118,000	9.7	(8.6–10.8)	11,677,000	31.0	(29.3–32.8)	35,330,000	9.1	(8.1–10.2)	10,314,000
Coercive control	39.9	(38.2–41.6)	48,140,000	10.4	(9.3–11.6)	12,552,000	40.4	(38.5–42.3)	45,964,000	15.4	(14.0–17.0)	17,571,000
Contact sexual violence,** physical violence, or stalking with intimate partner violence-related impact <sup>††</sup>	27.3	(25.8–28.9)	32,996,000	NA	NA	NA	11.5	(10.3–12.8)	13,080,000	NA	NA	NA

**Abbreviations:** CI = confidence interval; NA = not assessed.

\* Percentages are weighted.

† Rounded to the nearest thousand.

§ Estimate not reported; relative standard error >30% or cell size ≤20.

¶ Psychological aggression includes expressive aggression (such as name calling, or insulting or humiliating an intimate partner) and coercive control, which includes behaviors that are intended to monitor, control, or threaten an intimate partner.

\*\* Contact sexual violence by an intimate partner includes rape, being made to penetrate a perpetrator, sexual coercion, and unwanted sexual contact perpetrated by an intimate partner.

†† Includes experiencing any of the following: being fearful, concerned for safety, any post-traumatic stress disorder symptoms, injury, need for medical care, need for housing services, need for victim advocate services, need for legal services, missed at least 1 day of work or school, and contacting a crisis hotline. For those who reported being raped, it also includes having contracted a sexually transmitted infection or having become pregnant. Intimate partner violence-related impact questions were assessed in relation to specific perpetrators, without regard to the time period in which they occurred, and asked in relation to any form of intimate partner violence experienced (sexual violence, physical violence, stalking, expressive aggression, coercive control, and control of reproductive or sexual health) in that relationship. By definition, all stalking incidents result in impact because the definition of stalking requires the experience of fear or concern for safety.

the 12 months before taking the survey, an estimated 2.3% of women experienced at least one form of severe physical violence by an intimate partner. The lifetime and 12-month prevalence of stalking by an intimate partner for women was an estimated 9.2% and 2.4%, respectively. Finally, an estimated 47.1% of women experienced at least one act of psychological aggression by an intimate partner during their lifetimes; an estimated 14.2% of women experienced some form of psychological aggression in the 12 months preceding the survey.

Nationally, an estimated 0.5% of men experienced rape by an intimate partner during their lifetimes. However, the case count for men reporting rape by an intimate partner in the preceding 12 months was too small to produce a statistically reliable

prevalence estimate. An estimated 9.5% of men experienced other forms of sexual violence by an intimate partner during their lifetimes, while an estimated 2.1% of men experienced other forms of sexual violence by an intimate partner in the 12 months before taking the survey. The lifetime prevalence of physical violence by an intimate partner was an estimated 27.5% for men, and in the 12 months before taking the survey, an estimated 4.8% of men experienced some form of physical violence by an intimate partner. An estimated 14.0% of men experienced at least one act of severe physical violence by an intimate partner during their lifetimes. With respect to individual severe physical violence behaviors, being hit with a fist or something hard was experienced by an estimated

10.1% of men, and 4.6% of men have been kicked by an intimate partner. In the 12 months before taking the survey, an estimated 2.1% of men experienced at least one form of severe physical violence by an intimate partner. The lifetime and 12-month prevalence of stalking by an intimate partner for men was an estimated 2.5% and 0.8%, respectively. Finally, an estimated 46.5% of men experienced at least one act of psychological aggression by an intimate partner during their lifetimes; an estimated 18.0% of men experienced some form of psychological aggression in the 12 months preceding the survey.

### Prevalence of Intimate Partner Violence Victimization by Race/Ethnicity

Nationally, an estimated 11.4% of multiracial women, 9.6% of non-Hispanic white women, 8.8% of non-Hispanic black women, and 6.2% of Hispanic women were raped by an intimate partner during their lifetimes (Table 7). The case counts for men reporting rape by an intimate partner during their lifetimes were too small to produce statistically reliable prevalence estimates by race/ethnicity.

An estimated 26.8% of multiracial women, 17.4% of non-Hispanic black women, 17.1% of non-Hispanic white women, and 9.9% of Hispanic women experienced sexual violence other than rape by an intimate partner during their lifetimes. The case counts of other female racial/ethnic groups (Asian or Pacific Islander and American Indian/Alaska Native) were too small to report statistically reliable estimates. In addition, an estimated 18.2% of multiracial men, 14.8% of non-Hispanic black men, 13.5% of Hispanic men, and 7.6% of non-Hispanic white men experienced sexual violence other than rape by an intimate partner at some point during their lifetimes. The case counts of other male racial/ethnic groups (Asian or Pacific Islander and American Indian/Alaska Native) were too small to report statistically reliable estimates.

An estimated 51.7% of American Indian/Alaska Native women, 51.3% of multiracial women, 41.2% of non-Hispanic black women, 30.5% of non-Hispanic white women, 29.7% of Hispanic women, and 15.3% of Asian or Pacific Islander women experienced physical violence by an intimate partner during their lifetimes. An estimated 43.0% of American Indian/Alaska Native men, 39.3% of multiracial men, 36.3% of non-Hispanic black men, 27.1% of Hispanic men, 26.6% of non-Hispanic white men, and 11.5% of Asian or Pacific Islander men experienced physical violence by an intimate partner during their lifetime.

An estimated 13.3% of multiracial women, 9.9% of non-Hispanic white women, 9.5% of non-Hispanic black women, and 6.8% of Hispanic women were stalked by an intimate partner during their lifetimes. The case counts of other female racial/ethnic groups (Asian or Pacific Islander and American

Indian/Alaska Native) were too small to report statistically reliable estimates.

In addition, an estimated 1.7% of non-Hispanic white men were stalked by an intimate partner during their lifetimes. The case counts of all other male racial/ethnic groups were too small to report statistically reliable estimates.

### Prevalence of Intimate Partner Violence–Related Impact

An estimated 27.3% of women have experienced contact sexual violence (rape, being made to penetrate, sexual coercion, or unwanted sexual contact), physical violence, or stalking by an intimate partner during their lifetimes and have experienced at least one measured negative impact related to these or other forms of violence (noncontact unwanted sexual experiences, psychological aggression, or control of reproductive or sexual health) experienced in that relationship (Table 6). More specifically, an estimated 23.7% of women were fearful, 20.7% were concerned for their safety, 20.0% experienced one or more PTSD symptoms, 13.4% were physically injured, 6.9% needed medical care, 3.6% needed housing services, 3.3% needed victim advocate services, 8.8% needed legal services, 2.8% contacted a crisis hotline, 9.1% missed at least 1 day of work or school, 1.3% contracted a sexually transmitted infection, and 1.7% became pregnant as a result of the violence experienced by an intimate partner (Figure 2).

Nationally, an estimated 11.5% of men have experienced contact sexual violence, physical violence, or stalking by an intimate partner during their lifetimes and have experienced at least one measured negative impact related to these or other forms of violence experienced in that relationship. More specifically, an estimated 6.9% of men were fearful, 5.2% were concerned for their safety, 5.2% experienced one or more PTSD symptoms, 3.5% were physically injured, 1.6% needed medical care, 1.0% needed housing services, 4.0% needed legal services, and 4.8% missed at least 1 day of work or school. The case counts for men needing victim advocacy services, having contacted a crisis hotline, or contracting a sexually transmitted infection as a result of these types of violence were too small to produce statistically reliable estimates.

## Age of First Victimization

### Completed Rape

Among female victims of completed rape (completed forced penetration and completed alcohol- or drug-facilitated penetration), this form of sexual violence was first experienced by an estimated 78.7% before age 25 years, by an estimated 40.4% before age 18 years (28.3% at ages 11–17 years and 12.1% at age ≤10 years), and by an estimated 38.3% at age

**TABLE 7. Lifetime prevalence of intimate partner violence, by race/ethnicity\* and sex of victim — National Intimate Partner and Sexual Violence Survey, United States, 2011**

	Hispanic	Black, non-Hispanic	White, non-Hispanic	Asian or Pacific Islander	American Indian/ Alaska Native	Multiracial
<b>Women</b>						
Rape						
Weighted % (95% CI)	6.2 (4.2–9.2)	8.8 (6.3–12.2)	9.6 (8.4–10.9)	—†	—	11.4 (6.9–18.2)
Estimated no. of victims <sup>§</sup>	1,011,000	1,286,000	7,730,000	—	—	234,000
Other sexual violence						
Weighted % (95% CI)	9.9 (7.2–13.4)	17.4 (13.8–21.8)	17.1 (15.6–18.7)	—	—	26.8 (17.8–38.1)
Estimated no. of victims <sup>§</sup>	1,603,000	2,536,000	13,710,000	—	—	550,000
Physical violence						
Weighted % (95% CI)	29.7 (24.9–35.1)	41.2 (36.1–46.6)	30.5 (28.6–32.4)	15.3 (8.9–24.9)	51.7 (38.1–65.0)	51.3 (40.2–62.3)
Estimated no. of victims <sup>§</sup>	4,819,000	5,996,000	24,469,000	921,000	424,000	1,055,000
Stalking						
Weighted % (95% CI)	6.8 (4.7–9.9)	9.5 (6.9–13.0)	9.9 (8.6–11.3)	—	—	13.3 (7.7–21.8)
Estimated no. of victims <sup>§</sup>	1,105,000	1,386,000	7,935,000	—	—	272,000
Psychological aggression						
Weighted % (95% CI)	43.9 (38.3–49.6)	53.8 (48.5–59.0)	47.2 (45.2–49.2)	29.8 (20.5–41.1)	63.8 (50.4–75.3)	61.1 (49.7–71.5)
Estimated no. of victims <sup>§</sup>	7,115,000	7,819,000	37,888,000	1,797,000	523,000	1,256,000
Contact sexual violence, <sup>¶</sup> physical violence, or stalking with intimate partner violence-related impact**						
Weighted % (95% CI)	24.2 (19.7–29.3)	31.8 (26.9–37.2)	28.0 (26.1–29.8)	—	42.4 (29.4–56.5)	43.1 (32.4–54.6)
Estimated no. of victims <sup>§</sup>	3,918,000	4,627,000	22,444,000	—	348,000	886,000
<b>Men</b>						
Rape						
Weighted % (95% CI)	—	—	—	—	—	—
Estimated no. of victims <sup>§</sup>	—	—	—	—	—	—
Other sexual violence						
Weighted % (95% CI)	13.5 (9.8–18.2)	14.8 (10.8–19.9)	7.6 (6.5–8.9)	—	—	18.2 (11.7–27.2)
Estimated no. of victims <sup>§</sup>	2,204,000	1,878,000	5,777,000	—	—	377,000
Physical violence						
Weighted % (95% CI)	27.1 (22.0–32.8)	36.3 (30.0–43.1)	26.6 (24.8–28.6)	11.5 (6.8–19.0)	43.0 (27.4–60.1)	39.3 (30.4–49.0)
Estimated no. of victims <sup>§</sup>	4,428,000	4,603,000	20,190,000	612,000	335,000	814,000
Stalking						
Weighted % (95% CI)	—	—	1.7 (1.3–2.3)	—	—	—
Estimated no. of victims <sup>§</sup>	—	—	1,279,000	—	—	—
Psychological aggression						
Weighted % (95% CI)	50.9 (44.8–57.1)	56.1 (49.5–62.4)	44.8 (42.7–46.9)	26.6 (18.9–36.2)	47.2 (31.1–64.0)	64.2 (53.6–73.5)
Estimated no. of victims <sup>§</sup>	8,333,000	7,110,000	33,959,000	1,415,000	368,000	1,329,000
Contact sexual violence, <sup>¶</sup> physical violence, or stalking with intimate partner violence-related impact**						
Weighted % (95% CI)	11.2 (8.1–15.3)	16.8 (11.9–23.2)	10.7 (9.4–12.1)	—	—	22.2 (15.1–31.2)
Estimated no. of victims <sup>§</sup>	1,835,000	2,128,000	8,074,000	—	—	459,000

**Abbreviation:** CI = confidence interval.

\* Race/ethnicity was self-identified. The American Indian/Alaska Native designation does not indicate being enrolled or affiliated with a tribe. Persons of Hispanic ethnicity can be of any race or combination of races.

† Estimate is not reported; relative standard error >30% or cell size ≤20.

§ Rounded to the nearest thousand.

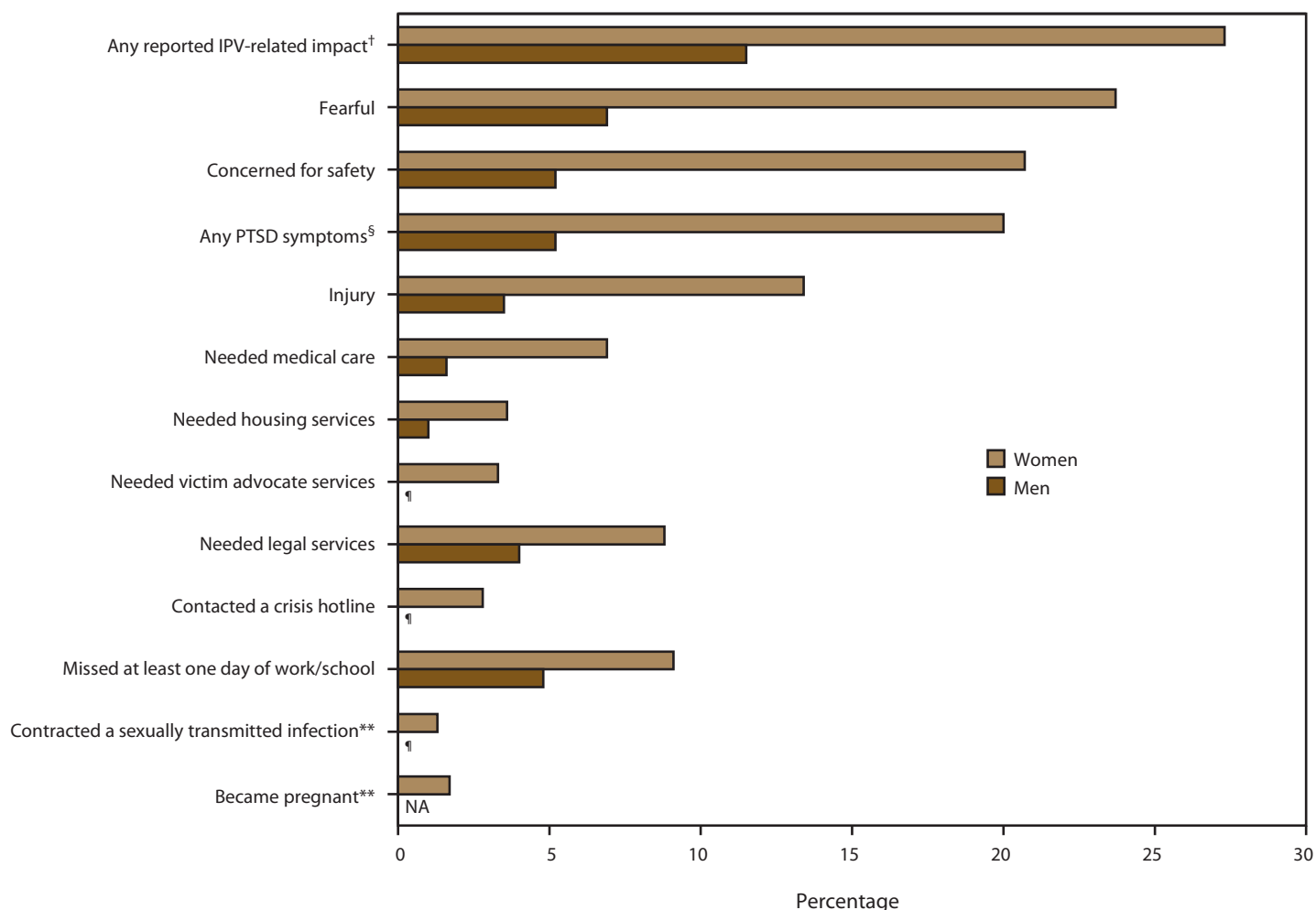
¶ Contact sexual violence by an intimate partner includes rape, being made to penetrate a perpetrator, sexual coercion, and unwanted sexual contact perpetrated by an intimate partner.

\*\* Includes experiencing any of the following: being fearful, concerned for safety, any post-traumatic stress disorder symptoms, injury, need for medical care, need for housing services, need for victim advocate services, need for legal services, missed at least 1 day of work or school, and contacting a crisis hotline. For those who reported being raped, it also includes having contracted a sexually transmitted infection or having become pregnant. Intimate partner violence-related impact questions were assessed in relation to specific perpetrators, without regard to the time period in which they occurred, and asked in relation to any form of intimate partner violence experienced (sexual violence, physical violence, stalking, expressive aggression, coercive control, and control of reproductive or sexual health) in that relationship. By definition, all stalking incidents result in impact because the definition of stalking requires the experience of fear or concern for safety.

18–24 years (Figure 3). In addition, among female victims of completed rape, an estimated 15.2% first experienced this at age 25–34 years, an estimated 4.6% at age 35–44 years, and

an estimated 1.5% at age ≥45 years. The case counts for men reporting lifetime completed rape were too small to produce statistically reliable estimates for all age categories.

**FIGURE 2. Lifetime prevalence of contact sexual violence,\* physical violence, or stalking by an intimate partner with intimate partner violence-related impact, by sex — National Intimate Partner and Sexual Violence Survey, United States, 2011**



**Abbreviations:** IPV = intimate partner violence; NA = not applicable; PTSD = post-traumatic stress disorder.

\* Includes rape, being made to penetrate a perpetrator, sexual coercion, and unwanted sexual contact perpetrated by an intimate partner.

<sup>†</sup> Includes experiencing any of the following: being fearful, concerned for safety, any PTSD symptoms, injury, need for medical care, need for housing services, need for victim advocate services, need for legal services, missed at least 1 day of work or school, and contacting a crisis hotline. For those who reported being raped, it also includes having contracted a sexually transmitted infection or having become pregnant. IPV-related impact questions were assessed in relation to specific perpetrators, without regard to the time period in which they occurred, and asked in relation to any form of intimate partner violence experienced (sexual violence, physical violence, stalking, expressive aggression, coercive control, and control of reproductive or sexual health) in that relationship; 12-month prevalence of IPV-related impact was not assessed. By definition, all stalking incidents result in impact because the definition of stalking requires the experience of fear or concern for safety.

<sup>§</sup> Includes had nightmares; tried not to think about or avoided being reminded of; felt constantly on guard, watchful, or easily startled; and felt numb or detached. Asked only of victims who reported being fearful or concerned for their safety in relation to violence experienced by an individual perpetrator.

<sup>¶</sup> Estimate not reported; relative standard error >30% or cell size ≤20.

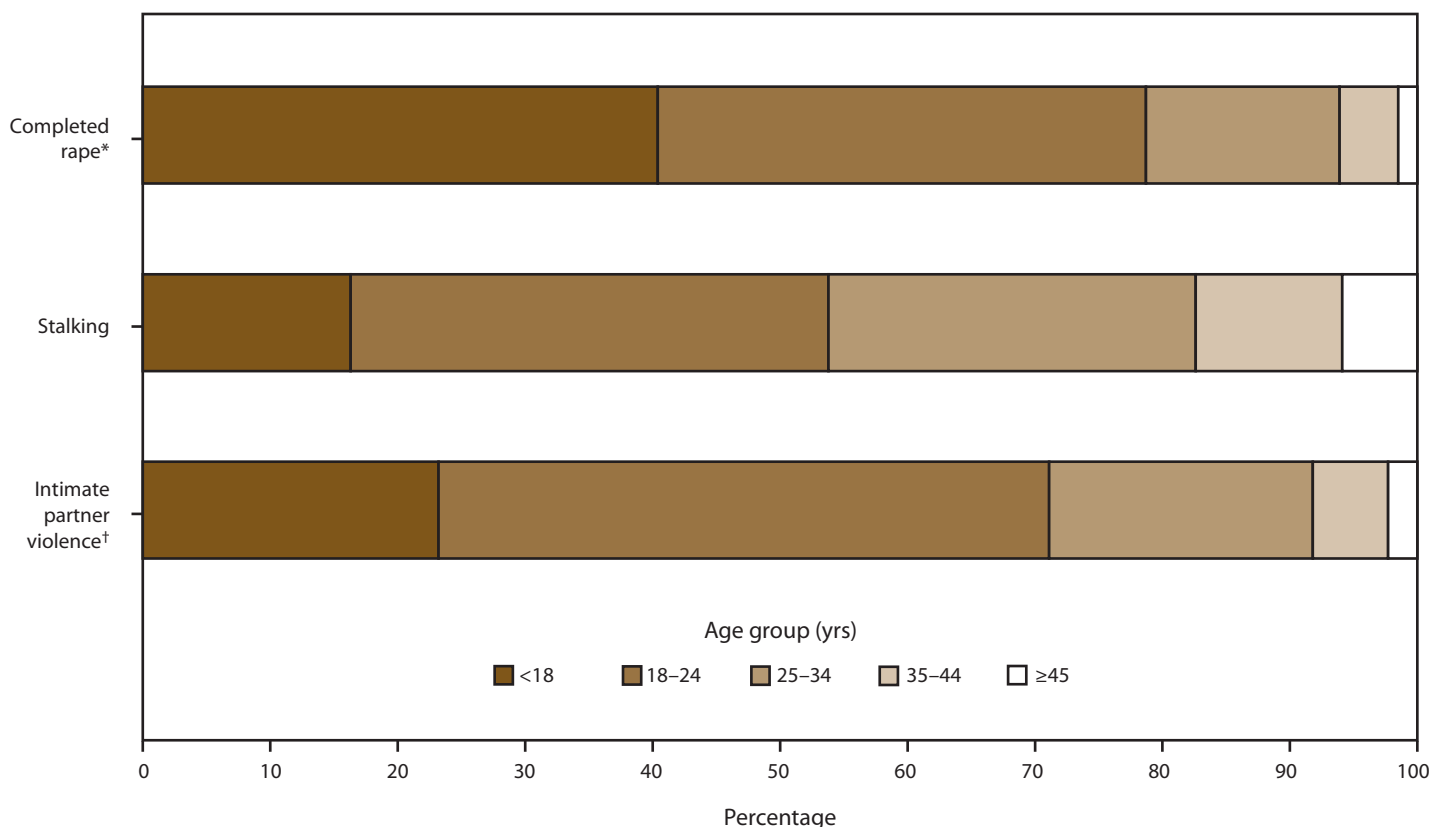
\*\* Asked only of women who reported rape by an intimate partner.

### Being Made to Penetrate a Perpetrator

Among males who were made to penetrate a perpetrator, this was experienced first by an estimated 71.0% before age 25 years, with an estimated 21.3% having first experienced this before age 18 years (18.6% at age 11–17 years) and an estimated 49.7% at age 18–24 years (Figure 4). In addition, among male victims who were made to penetrate a perpetrator, this was experienced first by an estimated 15.3% at age 25–34

years and by an estimated 7.9% at age 35–44 years. The case count for men reporting first being made to penetrate a perpetrator at age ≥45 years was too small to produce a statistically reliable estimate. In addition, the case counts for women reporting being made to penetrate a perpetrator during their lifetimes were too small to produce statistically reliable estimates for all age categories.

**FIGURE 3. Age at the time of first victimization among female victims, by type of victimization — National Intimate Partner and Sexual Violence Survey, United States, 2011**



\* Includes completed forced penetration and completed alcohol/drug-facilitated penetration but not attempted forced penetration.

† Represents the age at time of first experience of intimate partner violence among women who experienced contact sexual violence, physical violence, or stalking by an intimate partner. Includes physical violence, all forms of sexual violence, stalking, psychological aggression, and control of reproductive or sexual health. Contact sexual violence by an intimate partner includes rape, being made to penetrate a perpetrator, sexual coercion, or unwanted sexual contact perpetrated by an intimate partner.

## Stalking

Among female victims of stalking, an estimated 53.8% were first stalked before age 25 years, with an estimated 16.3% first experiencing this before age 18 years (13.5% at ages 11–17 years) and an estimated 37.5% at ages 18–24 years (Figure 3). In addition, among female victims of stalking, this was experienced first by an estimated 28.8% at ages 25–34 years, by an estimated 11.5% at ages 35–44 years, and by an estimated 5.9% at age ≥45 years.

Among male victims of stalking, an estimated 47.7% were first stalked before age 25 years, with an estimated 20.5% having first experienced stalking before age 18 years (16.2% at ages 11–17 years) and an estimated 27.2% having first experienced this at age 18–24 years (Figure 4). In addition, among male victims of stalking, this was experienced first by an estimated 21.3% at age 25–34 years, by an estimated 17.9% at age 35–44 years, and by an estimated 13.1% at age ≥45 years.

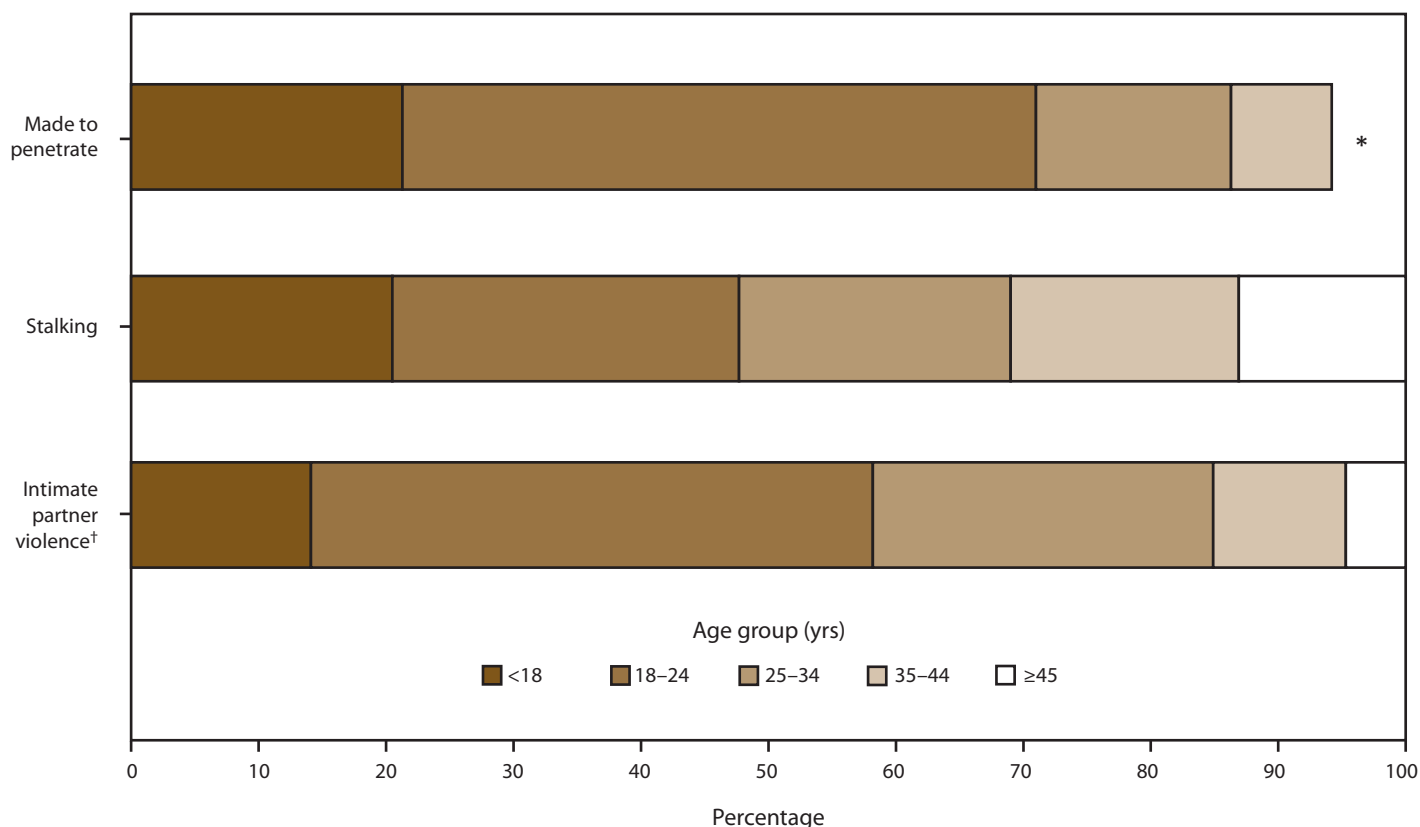
## Intimate Partner Violence

Among female victims of contact sexual violence, physical violence, or stalking by an intimate partner, an estimated 71.1% first experienced these or other forms of intimate partner violence before age 25 years, with an estimated 23.2% having first experienced this before age 18 years (23.1% at age 11–17 years) and an estimated 47.9% at age 18–24 years (Figure 3). In addition, among female victims of contact sexual violence, physical violence, or stalking by an intimate partner, these or other forms of intimate partner violence were experienced first by an estimated 20.7% at age 25–34 years, by an estimated 5.9% at age 35–44 years, and by an estimated 2.3% at age ≥45 years.

Among male victims of contact sexual violence, physical violence, or stalking by an intimate partner, an estimated 58.2% first experienced these or other forms of intimate partner violence before age 25 years, with an estimated 14.1% having first experienced this before age 18 years (14.0% at



**FIGURE 4. Age at the time of first victimization among male victims, by type of victimization — National Intimate Partner and Sexual Violence Survey, United States, 2011**



\* Estimate not reported; relative standard error >30% or cell size ≤20.

† Represents the age at time of first experience of intimate partner violence among men who experienced contact sexual violence, physical violence, or stalking by an intimate partner. Includes physical violence, all forms of sexual violence, stalking, psychological aggression, and control of reproductive or sexual health. Contact sexual violence by an intimate partner includes rape, being made to penetrate a perpetrator, sexual coercion, or unwanted sexual contact perpetrated by an intimate partner.

age 11–17 years) and an estimated 44.1% at age 18–24 years (Figure 4). In addition, among male victims of contact sexual violence, physical violence, or stalking by an intimate partner, these or other forms of intimate partner violence were first experienced by an estimated 26.7% at age 25–34 years, by an estimated 10.4% at age 35–44 years, and by an estimated 4.7% at age ≥45 years.

## Discussion

The results presented in this report indicate that a significant number and proportion of female and male U.S. adults have experienced sexual violence, stalking, or intimate partner violence during their lifetimes or in the 12 months preceding the 2011 survey. Because of the broad range of short- and long-term consequences associated with these forms of violence, the public health burden of sexual violence, stalking, and intimate partner violence is substantial.

The results provided in this report indicate that the burden of sexual violence, stalking, and intimate partner violence is not distributed evenly in the U.S. population. Consistent with previous studies, the results suggest that women, in particular, are impacted heavily during their lifetimes (11,12). However, the results indicate that many men also experience sexual violence, stalking and, in particular, physical violence by an intimate partner. Although there are relatively smaller differences in the overall prevalence of physical violence by an intimate partner when comparing women and men, there is greater differentiation between women and men in terms of the prevalence of negative intimate partner violence–related impact. This suggests the need to look beyond the overall prevalence estimates when comparing the total burden of men’s and women’s intimate partner violence victimization. Previous research indicates that characteristics (e.g., frequency, severity, and impact) of men’s and women’s intimate partner violence victimization differ in ways that might not be reflected in overall prevalence estimates (12). However, any

focus on differences between men and women should not obscure the fact that nearly 16 million men have experienced some form of severe physical violence by an intimate partner during their lifetimes and >13 million men have experienced intimate partner violence during their lifetimes that resulted in a negative impact.

The results also suggest that certain racial/ethnic groups experience a comparatively higher burden. Although statistical testing was not undertaken, an examination of the pattern of lifetime prevalence estimates suggests that multiracial and American Indian/Alaska Native women experience elevated levels for most of the types of violence examined in this report. These findings are consistent with previous reports indicating that multiracial and American Indian/Alaska Native women are at greater risk for rape, stalking, and intimate partner violence (3,13). These findings underscore the importance of prevention efforts and services that address the needs of multiracial and American Indian/Alaska Native women. Although previous research has suggested explanations for elevated rates of violence among American Indian/Alaska Native women (e.g., elevated poverty, social and geographic isolation, and a higher likelihood of alcohol use by the perpetrator) (14), little is known about why multiracial women are at greater risk for these forms of violence. Research is needed to identify risk and protective factors for violence victimization among multiracial persons.

By definition, all victims of intimate partner violence knew their perpetrator; however, the majority of sexual violence and stalking victims also knew their perpetrators. Despite frequent depictions in the media of sexual violence and stalking perpetrated by strangers (15,16), strangers were reported as the perpetrator by less than one fourth of stalking victims and by less than one fourth of victims of each form of sexual violence except noncontact unwanted sexual experiences. For stalking and for all forms of sexual violence except noncontact unwanted sexual experiences, two frequently reported perpetrators were intimate partners and acquaintances. This pattern suggests that prevention efforts for sexual violence and stalking need to focus on preventing violent interactions between persons who are intimate or are known to each other in another capacity.

Female victims of sexual violence and stalking reported predominantly male perpetrators, whereas for male victims, the sex of the perpetrator varied by the specific form of violence examined. Male rape victims predominantly had male perpetrators, but other forms of sexual violence experienced by men either were perpetrated predominantly by women (i.e., being made to penetrate a perpetrator or sexual coercion) or were split more evenly among male and female perpetrators (i.e., unwanted sexual contact and noncontact unwanted sexual

experiences). In addition, male stalking victims also had a more even mix of males and females who had perpetrated stalking against them. Prevention efforts should take into consideration that female sexual violence and stalking victimization is predominately perpetrated by men and that a substantial proportion of male sexual violence and stalking victimization (rape, unwanted sexual contact, noncontact unwanted sexual experiences, and stalking) also is perpetrated by men.

For each of the violence types assessed,  $\geq 53.8\%$  of all female victims and  $\geq 47.7\%$  of all male victims experienced their first victimizations before age 25 years, with many first experiencing victimization in childhood and adolescence. These findings suggest that primary prevention of sexual violence, stalking, and intimate partner violence should take place at an early age. CDC's approach to the primary prevention of violence is in keeping with this finding. Specifically, CDC supports the development of safe, stable, and nurturing relationships and environments for children as a precursor to healthy parent-child relationships (<http://www.cdc.gov/violenceprevention/pdf/efc-01-03-2013-a.pdf>); healthy peer relationships among adolescents; healthy dating relationships among adolescents before their first experience with dating (<http://www.cdc.gov/violenceprevention/DatingMatters>); and the engagement of bystanders to intervene before violence occurs. CDC also supports the development, evaluation, and widespread adoption of empirically supported teen dating violence prevention programs. For example, the school-based Safe Dates program, which focuses on enhancing conflict management skills and changing norms about dating violence, has been shown to prevent perpetration of physical and sexual violence as well as psychological aggression in teen dating relationships (17). When parental, peer, and dating relationships are influenced early in life, healthy relationship behaviors and patterns and healthy social environments can be promoted while these behaviors are relatively modifiable. In so doing, adolescents can be equipped with healthier behaviors to use in place of violence within adult relationships.

In addition to primary prevention efforts, secondary prevention is also important. The results suggest that a substantial number of women and men also have experienced a range of negative impacts as a result of the intimate partner violence they have experienced. Most notably, nearly 13.4% of women and 3.5% of men have been injured physically, and 9.1% of women and 4.8% of men have missed at least 1 day of work or school because of experiencing intimate partner violence. Previous research has established that in addition to these near-term impacts, those who experience intimate partner violence are at greater risk for a range of long-term health consequences (1,2). For the negative effects of intimate partner violence, sexual violence, and stalking to be mitigated,

it is important to ensure that relevant services are available to victims. The findings in this report suggest that many adults are in need of these types of services as a result of intimate partner violence victimization. During their lifetimes 6.9% of women and 1.6% of men needed medical services, 8.8% of women and 4.0% of men needed legal services, and 3.6% of women and 1.0% of men needed housing services (e.g., shelters). Analyses of 2010 NISVS data suggest that nearly half of female victims and approximately two thirds of male victims who indicated a need for services did not receive any of the services needed as a result of intimate partner violence experienced during their lifetimes (12). Research is needed to examine the degree to which needed services are not being received and to determine whether any existing gap is attributable to services being unavailable, inaccessible, or inadequate, or to victims choosing not to use available services.

## Limitations

The findings of this report are subject to at least five limitations. First, the overall response rate for the 2011 NISVS survey was relatively low (33.1%). However, the cooperation rate was high (83.5%), and multiple efforts were made to reduce the likelihood of nonresponse and noncoverage bias. These included a nonresponse follow-up in which randomly selected nonresponders were contacted again and offered an increased incentive for participation as well as the inclusion of a cellular telephone sample. Second, although NISVS captures a broad range of self-reported victimization experiences, it is likely that the estimates presented underestimate the prevalence of sexual violence, stalking, and intimate partner violence (18). Victims who are involved in violent relationships or who have recently experienced severe forms of violence might be less likely to participate in surveys or might not be willing to disclose their experiences because of unresolved emotional trauma or concern for their safety, among other reasons. Third, a telephone survey might be less likely to capture some populations that could be at higher risk for victimization (e.g., persons living in nursing homes, military bases, prisons, or shelters, or those who are homeless). Fourth, self-reported data are vulnerable to recall bias because respondents might believe that events occurred closer in time than they did in actuality (i.e., telescoping), and this type of bias might particularly affect 12-month prevalence estimates. Finally, follow-up questions were designed to reflect the victim's experience with each perpetrator across the victim's lifetime and there were limitations associated with how these questions were asked. Respondents were asked about the impact from any of the violence inflicted by each perpetrator. Therefore, the impact of

specific intimate partner violence behaviors cannot be assessed. Also, because victims' reports of the age and relationship at the time any violence began with each perpetrator were used, it was not always possible to assess the age or relationship at the time specific types of intimate partner violence occurred.

## Conclusion

Although progress has been made in efforts to prevent sexual violence, stalking, and intimate partner violence, these forms of violence continue to exact a substantial toll upon U.S. adults. Further, it is clear that many of these forms of violence are first experienced by many in adolescence and young adulthood. This suggests the critical need for primary prevention to focus on promoting healthy relational behaviors and patterns that can be carried forward into adulthood. Continued surveillance of sexual violence, stalking, and intimate partner violence is needed to understand these public health problems better and to serve as a measuring stick by which the success of prevention efforts can be gauged.

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## References

1. Black MC. Intimate partner violence and adverse health consequences: implications for clinicians. *Am J Lifestyle Med* 2011;5:428–39.
2. Coker AL, Davis KE, Arias I, et al. Physical and mental health effects of intimate partner violence for men and women. *Am J Prev Med* 2002;23:260–8.
3. Tjaden P, Thoennes N. Extent, nature, and consequences of intimate partner violence: findings from the National Violence Against Women Survey. (NIJ Publication No. 181867). Washington, DC: US Department of Justice; 2000.
4. Smith PH, White JW, Holland LJ. A longitudinal perspective on dating violence among adolescent and college-age women. *Am J Public Health* 2003;93:1104–9.
5. The American Association for Public Opinion Research. Standard definitions: final dispositions of case codes and outcome rates for surveys. 7th ed. Deerfield, IL: The American Association for Public Opinion Research; 2011.

6. Breiding MJ, Basile KC, Smith SG, Black MC, Mahendra RR. Intimate partner violence surveillance: uniform definitions and recommended data elements, version 2.0. Atlanta, GA: US Department of Health and Human Services, CDC, National Center for Injury Prevention and Control. In press.
7. Straus MA, Hamby SL, Boney-McCoy S, Sugarman DB. The revised Conflict Tactics Scale (CTS2). *J Fam Issues* 1996;17:283–316.
8. US Census Bureau. 2010 census summary file 1. Washington, DC: US Census Bureau; 2011. Available at [http://factfinder2.census.gov/faces/nav/jsf/pages/wc\\_dec.xhtml](http://factfinder2.census.gov/faces/nav/jsf/pages/wc_dec.xhtml).
9. US Census Bureau. 2006–2010 American Community Survey 5-year estimates. Washington, DC: US Census Bureau; 2011. Available at <http://factfinder2.census.gov>.
10. US Census Bureau. 2010 American Community Survey 1-year estimates. Washington, DC: US Census Bureau; 2011. Available at <http://factfinder2.census.gov>.
11. Black MC, Basile KC, Breiding MJ, et al. The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 summary report. Atlanta, GA: US Department of Health and Human Services, CDC, National Center for Injury Prevention and Control; 2011.
12. Breiding MJ, Chen J, Black MC. Intimate partner violence in the United States—2010. Atlanta, GA: US Department of Health and Human Services, CDC, National Center for Injury Prevention and Control; 2014.
13. Breiding MJ, Black MC, Ryan GW. Prevalence and risk factors of intimate partner violence in eighteen US states/territories, 2005. *Am J Prev Med* 2008;34:112–8.
14. Bachman R, Zaykowski H, Kallmyer R, Poteyeva M, Lanier C. Violence against American Indian and Alaska Native women and the criminal justice response: what is known. Washington, DC: National Institute of Justice; 2008.
15. Bufkin J, Eschholz S. Images of sex and rape: a content analysis of popular film. *Violence Against Women* 2000;6:1317–44.
16. Ross K, Byerly C. Women and media: international perspectives. Malden, MA: Blackwell; 2004.
17. Foshee VA, Bauman KE, Ennett ST, Suchindran C, Benefield T, Linder GF. Assessing the effects of the dating violence prevention program “Safe Dates” using random coefficient regression modeling. *Prev Sci* 2005;6:245–50.
18. Schwartz MD. Methodological issues in the use of survey data for measuring and characterizing violence against women. *Violence Against Women* 2000;6:815–38.







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