



The National Intimate Partner and Sexual Violence Survey: An Overview

What is the National Intimate Partner and Sexual Violence Survey?

The Centers for Disease Control and Prevention’s (CDC) National Intimate Partner and Sexual Violence Survey (NISVS) assesses experiences of intimate partner violence (IPV), sexual violence (SV), and stalking among adult women and men in the United States.

What makes NISVS unique?

NISVS is the first ongoing survey dedicated solely to describing and monitoring these forms of violence as public health issues. It also includes information that has not previously been measured in a nationally representative survey, such as types of sexual violence other than rape, expressive psychological aggression and coercive control, and control of reproductive or sexual health. NISVS is also the first survey to provide national and state level data on IPV, SV, and stalking.

Why was NISVS developed?

With the ultimate goal of stopping violence before it occurs, the CDC developed NISVS to better describe and monitor the magnitude of IPV, SV, and stalking in the United States. Timely and reliable data on these forms of violence can be used to inform policies and programs, establish priorities at the national, state, and local levels, and, over time, to track progress in preventing these forms of violence.

The private nature of IPV, SV, and stalking make them more challenging to monitor, evaluate, and address than most other issues. But the need is especially acute because these forms of violence can create a ripple effect of health consequences well beyond the immediate injury.



What data does NISVS collect?

NISVS is designed to monitor the magnitude and impact of violent victimization. The primary objectives of NISVS are to describe:

- The prevalence and characteristics of IPV, SV, and stalking;
- Who is most likely to experience these forms of violence;
- The patterns and impact of the violence experienced by specific perpetrators; and
- The health consequences of these forms of violence.

NISVS collects lifetime and 12-month prevalence data on IPV, SV, and stalking, as well as information on the age at the time of the first victimization, demographic characteristics of both respondents and perpetrators, and detailed information about the patterns and impact of the violence.

Methodology

How are NISVS data collected?

NISVS is an ongoing, random digit dial telephone survey conducted in all 50 states and the District of Columbia. Data are collected throughout the year. To ensure cell phone-only households are included in the sample, interviews are conducted both by landline and cell phone.

The survey has been designed to be consistent with the way victims recall experiences of violence—all behaviors are linked to a specific perpetrator and all questions are asked within the context of that perpetrator. In this way, NISVS is able to measure the following:

- Patterns of violence, including:
 - the forms of violence experienced by a specific perpetrator;
 - whether multiple forms of violence were experienced;
 - severity of violence;
 - duration of the victimization; and
 - frequency of the victimization.
- The impact of violence by each perpetrator such as being fearful or needing medical care.

How often will data be collected for NISVS?

It is anticipated that data will be collected annually, pending funding.

How does NISVS measure intimate partner violence, sexual violence, and stalking victimization?

The survey asks approximately 60 questions to assess IPV, SV, and stalking over the lifetime and during the 12 months prior to the interview. Instead of using general terms like “abuse” or “rape” that might have different meanings to different people or be stigmatizing, respondents are asked about specific behaviors. For example, physical violence measures include behaviors such as slapping, kicking, and choking. Rape is assessed with specific questions such as the number of times someone used physical force or threats to make you have vaginal sex.

What are the limitations of the NISVS methodology?

NISVS relies on self-reported data. Despite efforts to make respondents feel comfortable and safe, it is possible that some victims are unable or unwilling to talk to an interviewer. Other victims, particularly those who were victimized a long time ago, may not remember some experiences.

Although NISVS includes a large sample size, in some cases statistically reliable estimates for all forms of violence among all populations and sub-populations are not able to be calculated from annual data.

How does NISVS inform prevention efforts?

Understanding the magnitude, impact, and consequences of IPV, SV, and stalking in the United States is an important first step in preventing violence. This information can be used to:

- Inform policies and programs that are aimed at preventing these forms of violence, such as approaches that promote healthy, respectful relationships;
- Provide information for states to consider in their prevention planning and advocacy efforts, such as ensuring adequate access to services and resources; and
- Establish priorities for preventing these forms of violence at the national, state, and local levels.

NISVS data also can be used to examine trends in IPV, SV, and stalking, as well as to evaluate and track the effectiveness of prevention efforts.

What is the CDC doing to address intimate partner violence, sexual violence, and stalking?

CDC focuses on preventing IPV, SV, and stalking before it happens. CDC's work focuses on three areas: 1) understanding the problem—NISVS is a key component of this work, 2) identifying effective interventions, and 3) ensuring that states and communities have the capacity and resources to implement prevention approaches based on the best available evidence. For more information about CDC violence prevention efforts, visit www.cdc.gov/violenceprevention.

How does NISVS measure...

Intimate Partner Violence

Five types of IPV, also called violence by an intimate partner, are measured in NISVS. These include SV, physical violence, stalking, psychological aggression, and control of reproductive/sexual health.

- **Sexual violence** includes rape, being made to penetrate someone else, sexual coercion, unwanted sexual contact, and non-contact unwanted sexual experiences. See below.
- **Physical violence** includes a range of behaviors from slapping, pushing, or shoving to severe acts, such as being beaten, burned, or choked.
- **Stalking victimization** involves a pattern of harassing or threatening tactics used by a perpetrator that is both unwanted and causes fear or safety concerns in the victim. See below.
- **Psychological aggression** includes expressive aggression (such as name calling, insulting, or humiliating an intimate partner) and coercive control, which includes behaviors that are intended to monitor and control or threaten an intimate partner.
- **Control of reproductive or sexual health** includes the refusal by an intimate partner to use a condom. For a woman, it also includes times when a partner tried to get her pregnant when she did not want to become pregnant. For a man, it also includes times when a partner tried to get pregnant when the man did not want her to become pregnant.

Sexual Violence

Five types of sexual violence were measured in NISVS. These include acts of rape, and types of sexual violence other than rape as defined below.

- **Rape** is defined as any completed or attempted unwanted vaginal (for women), oral, or anal penetration through the use of physical force or threats to physically harm and includes times when the victim was drunk, high, drugged, or passed out and unable to consent. Rape is separated into three types—completed forced penetration, attempted forced penetration, and completed alcohol or drug facilitated penetration.
- **Sexual coercion** is defined as unwanted vaginal, oral, or anal sexual penetration that occurs after a person is pressured in a nonphysical way, such as being worn down by someone who repeatedly asked for sex or showed they were unhappy; feeling pressured by being lied to, being told promises that were untrue, having someone threaten to end a relationship or spread rumors; and sexual pressure due to someone using their influence or authority.
- **Being made to penetrate someone else** includes times when the victim was made to, or there was an attempt to make them—sexually penetrate someone without the victim's consent because the victim was physically forced or threatened with physical harm, or when the victim was drunk, high, drugged, or passed out and unable to consent.
- **Unwanted sexual contact** is defined as unwanted sexual experiences involving touch but not sexual penetration, such as being kissed in a sexual way, or having sexual body parts fondled or grabbed.
- **Non-contact unwanted sexual experiences** are unwanted experiences that do not involve any touching or penetration, including someone exposing their sexual body parts, flashing, or masturbating in front of the victim; someone making a victim show his or her body parts; someone making a victim look at or participate in sexual photos or movies; or someone harassing the victim in a public place in a way that made the victim feel unsafe.

Stalking

Stalking victimization involves a pattern of harassing or threatening tactics used by a perpetrator that is both unwanted and causes fear or safety concerns in the victim. For the purposes of this report, a person was considered a stalking victim if they experienced multiple stalking tactics or a single stalking tactic multiple times by the same perpetrator and felt very fearful, or believed that they or someone close to them would be harmed or killed as a result of the perpetrator's behavior. Examples of stalking tactics measured include unwanted phone calls or emails, watching or following from a distance, and leaving strange or potentially threatening items for the victim to find.