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Lifetime Number of Perpetrators and Victim–Offender Relationship Status Per U.S. Victim of Intimate Partner, Sexual Violence, or Stalking

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Abstract

The aim of this study was to describe the U.S. population-level prevalence of multiple perpetrator types (intimate partner, acquaintance, stranger, person of authority, or family member) per victim and to describe the prevalence of victim-offender relationship status combinations. Authors analyzed U.S. nationally representative data from noninstitutionalized adult respondents with selfreported lifetime exposure to intimate partner violence, sexual violence, or stalking in the 2012 National Intimate Partner and Sexual Violence Survey (NISVS). An estimated 142 million U.S. adults had some lifetime exposure to intimate partner violence, sexual violence, or stalking. An estimated 55 million victims (39% of total victims) had more than one perpetrator type during their lifetimes. A significantly higher proportion of female victims reported more than one perpetrator type compared with male victims (49% vs. 27%). Among both female and male victims with >1 perpetrator type, the most prevalent victim-offender relationship status combinations all included an intimate partner perpetrator. Many victims of interpersonal violence are subject to multiple perpetrator types during their lifetimes. Prevention strategies that address polyvictimization and protect victims from additional perpetrators can have a substantial and beneficial societal impact. Research on victim experiences to inform prevention strategies is strengthened by comprehensively accounting for lifetime victimizations.

Keywords

intimate partner violence; sexual violence; stalking

The health and economic consequences of intimate partner violence, sexual violence, and stalking are substantial (Peterson, DeGue, Florence, & Lokey, 2017; Peterson et al., 2018). Population data quantifying the prevalence of this violence over time by number of victims,

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Cora Peterson conceived of the study, led the study design and interpretation of results, and drafted the manuscript. Yang Liu and Cora Peterson conducted data analysis. Yang Liu, Melissa Merrick, Kathleen C. Basile, and Thomas R. Simon assisted with the study design and interpretation of results. All authors edited the manuscript and approved the final manuscript as submitted.

Declaration of Conflicting Interests

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violence type, and perpetrator type are essential for an informed public health response (Smith et al., 2017). When data allow, it is important to describe trends in per-victim experiences, such as the type and frequency of lifetime violence victimizations per individual. Per-victim information can illuminate the range and depth of victim experiences, improve understanding of associated health and economic consequences, and help to identify opportunities to prevent violence and protect and support survivors.

Awareness and study of polyvictimization—the cumulative effect of multiple violence and perpetrator types per victim—is growing (Wolfe, 2018). Population-level descriptive epidemiology on polyvictimization in the United States has primarily addressed multiple violence types per victim and, to a more limited extent, has addressed multiple perpetrators by violence type per victim (Finkelhor, Turner, Shattuck, & Hamby, 2013; Ford, Elhai, Connor, & Frueh, 2010; Smith et al., 2017). For example, data from the U.S. National Intimate Partner and Sexual Violence Survey (NISVS) indicate that 29% of female rape victims and 13% of male rape victims and 18% of male stalking victims had more than one stalking perpetrator (Black et al., 2011). Among female rape victims, current or former intimate partners are the most frequent perpetrator type (47% of victims), followed by acquaintance perpetrators (44% of victims; Smith et al., 2017).

However, it appears population-based data on per-victim lifetime experiences of different perpetrator types—across violence types—have not been previously reported. Such data are potentially important for research and policy making for three reasons. First, multiple perpetrator types may indicate victimization across a victim's life span (e.g., both a family member perpetrator and intimate partner perpetrator) and violence that affected distinct domains of a victim's life (e.g., both a person of authority perpetrator [victim's school or workplace] and intimate partner perpetrator [victim's home]). Researchers have described this as "no safe haven" for victims (Turner, Shattuck, Finkelhor, & Hamby, 2016). Second, the circumstance of multiple perpetrator types per victim provides further evidence that comprehensive clinical and public health strategies are required to address violence, both to prevent it in the first place and to protect victims from additional violence. Third, evidence suggests that victims with multiple violence perpetrators have worse mental health outcomes (e.g., depression, sleep disturbance) compared with violence victims with a single perpetrator (Lind, Aggen, Kendler, York, & Amstadter, 2016; Liu, Jager-Hyman, Wagner, Alloy, & Gibb, 2012) and that polyvictimization may more severely inhibit victims' development (e.g., adaptation to college) and produce worse psychological outcomes (e.g., distress, trauma symptoms) than individual violence victimization categories (Elliott, Alexander, Pierce, Aspelmeier, & Richmond, 2009; Finkelhor, Ormrod, & Turner, 2007; Richmond, Elliott, Pierce, Aspelmeier, & Alexander, 2009).

Among U.S. adults with any lifetime exposure to intimate partner violence, sexual violence, or stalking, this brief report aimed to describe the population-level prevalence of multiple perpetrator types per victim and to describe the prevalence of victim–offender relationship status combinations.

Method

This study used publicly available data and no human subjects. Authors used 2012 NISVS data to estimate the number of U.S. adults (18 years of age) with any lifetime exposure (including childhood victimizations) to selected violence types: sexual violence or stalking by one or more perpetrator types (intimate partner, acquaintance, stranger, person of authority, or family member), or physical violence or psychological aggression (by an intimate partner only; Smith et al., 2017). NISVS is an ongoing, dual frame national random-digit-dial telephone survey (Smith et al., 2017). NISVS represents the U.S. noninstitutionalized, English-speaking and Spanish-speaking population, aged 18 years. The 2012 sample (n = 11,940) had a weighted response rate of 33.2% and a cooperation rate of 80.3%.

NISVS violence victimizations and data limitations were previously described (Smith et al., 2017). An intimate partner was defined as a current or former spouse (including married, common-law, and civil union spouses, and domestic partners), boyfriend/girlfriend, dating partner, or ongoing sexual partner. An acquaintance was defined as a friend, neighbor, first date, or someone briefly known or not known well. Person of authority included, for example, a boss, supervisor, superior in command, teacher, professor, coach, clergy, doctor, therapist, or caregiver. A family member was defined as an immediate or extended family member. NISVS queries respondents about physical violence and psychological aggression victimization only due to intimate partner perpetrators; therefore, this analysis does not address several forms of youth peer violence (e.g., gang violence) or community violence (e.g., robbery, physical assault). Sexual violence included rape (completed or attempted forced penetration or completed alcohol-facilitated or drug-facilitated penetration), being made to sexually penetrate someone else (completed, attempted forced, or alcohol/drug facilitated), sexual coercion (nonphysically pressured unwanted penetration), unwanted sexual contact (e.g., kissing, fondling), and noncontact unwanted sexual experiences (e.g., being flashed or forced to view sexually explicit media). Stalking included a pattern of unwanted attention and contact causing fear that the victim, or victim's associate, would be harmed or killed. Physical violence by an intimate partner included being slapped, pushed, kicked, shoved, beaten, or burned on purpose; pulling hair; being hit with something hard; being slammed against something; attempts to hurt by choking or suffocating; or a partner using a knife or gun against the victim. Psychological aggression by an intimate partner included repeated expressive aggression (e.g., name-calling or humiliating) and coercive control and entrapment (behaviors intended to monitor, control, or threaten).

Authors analyzed data on NISVS respondents that reported any lifetime intimate partner violence, sexual violence, or stalking and reported their age at survey time (n = 7,194 victims; 4,182 females and 3,012 males). Authors first report the number and proportion of victims (all victims, female victims, male victims) with different perpetrator types (intimate partner, etc.) and number of different perpetrator types (1, 2, etc.), including statistical tests of proportion that compared those results between female and male victims. Authors then present a five-set Venn diagram that describes the number of victims (female victims, male victims) with different perpetrator type combinations (e.g., intimate partner and family member). Due to small sample sizes and the density and complexity of visual presentations

with greater than five overlapping categories, authors did not analyze the number of perpetrators per victim by perpetrator type (e.g., whether a victim had multiple family member perpetrators) or violence type (e.g., rape) per perpetrator type. Estimates based on respondent counts with numerator <21 or with a relative standard error >30% are not reported. Survey-weighted analysis was conducted with SAS (9.4; Cary, North Carolina)-callable SUDAAN (11.0; Triangle Park, North Carolina).

Results

In 2012, an estimated 142 million U.S. adults had experienced sexual violence or stalking by an intimate partner, acquaintance, stranger, person of authority, or family member perpetrator or physical or psychological violence by an intimate partner at some point during their lifetimes (Table 1). Among those victims, approximately 121 million (85%) had an intimate partner perpetrator, 45 million (32%) had an acquaintance perpetrator, 29 million (21%) had a stranger perpetrator, 14 million (10%) had a family member perpetrator, and 7 million (5%) had a person of authority perpetrator (Table 1). Compared with male victims, a significantly higher proportion of female victims reported a perpetrator that was an acquaintance (39% of female victims vs. 24% of male victims), stranger (28% vs. 13%), person of authority (6% vs. 3%), or family member (15% vs. 4%; Table 1). Among male victims, a significantly higher proportion reported an intimate partner perpetrator compared with female victims (90% vs. 80%; Table 1).

A significantly lower proportion of female victims reported just one perpetrator type compared with male victims (51% vs. 73%; Table 1). A significantly higher proportion of female victims also reported 2, 3, or 4 perpetrator types compared with male victims (33% vs. 21%, 13% vs. 5%, and 3% vs. 1%, respectively; Table 1). Among female victims whose perpetrators included an intimate partner (n = 61,002,000), nearly half (n = 27,478,000) reported no other perpetrator type during their lifetime. In contrast, only a minority of female victims of acquaintance (17%), stranger (21%), person of authority (13%), or family member perpetrators (9%) reported just one perpetrator type (Figure 1; proportions calculable from reported number of victims). Similarly, among male victims of intimate partner violence (n = 59,584,000), a majority (n = 43,085,000, or 72%) reported no other perpetrators reported just one perpetrator type (Figure 2; number of victims reported in the figure; proportions calculable from presented data). Small sample sizes prevented calculation of the proportion of male victims of person of authority or family member perpetrators with no other perpetrator types (Figure 2).

Among female victims with >1 perpetrator type, the most prevalent victim–offender relationship status combinations were an intimate partner perpetrator and acquaintance perpetrator (n = 10,871,000); intimate partner perpetrator and stranger perpetrator (n = 6,064,000); intimate partner perpetrator, acquaintance perpetrator, and stranger perpetrator (n = 4,775,000); and intimate partner perpetrator and family member perpetrator (n = 4,095,000; Figure 1). Among male victims with >1 perpetrator type, the most prevalent combinations were the same as among female victims: an intimate partner perpetrator and acquaintance perpetrator (n = 7,523,000); intimate partner perpetrator and stranger

perpetrator (n = 3,567,000); intimate partner perpetrator, acquaintance perpetrator, and stranger perpetrator (n = 1,663,000); and intimate partner perpetrator and family member perpetrator (n = 1,193,000; Figure 2).

Discussion

Among U.S. adults, nearly half of female victims and over a quarter of male victims of intimate partner violence, sexual violence, or stalking reported more than one perpetrator type (intimate partner, acquaintance, stranger, person of authority, or family member) during their lifetimes.

These results support previous NISVS research indicating many rape and stalking victims have more than one lifetime perpetrator, although authors are not aware of a previous study that examined perpetrator types per victim in a manner directly comparable with this study (Black et al., 2011).

Clinical recommendations to address polyvictimization include comprehensive assessment for multiple victimization types, addressing underlying vulnerabilities including environmental conditions that perpetuate victimization, and a focus on early intervention (Finkelhor, Turner, Hamby, & Ormrod, 2011). In terms of public health, Centers for Disease Control and Prevention (CDC) recently published technical packages to help communities make use of the best available evidence on prevention strategies that address individual, social, and environmental factors to stop child abuse and neglect, sexual violence, and intimate partner violence before such violence starts and support survivors to lessen harms (Basile et al., 2016; Fortson, Klevens, Merrick, Gilbert, & Alexander, 2016; Niolon et al., 2017). A coordinated public health approach to violence prevention, in general, and polyvictimization, in particular, includes strategies such as treatment and support for survivors; bystander empowerment and education; family-based skill-building programs; interventions that reduce and monitor bullying and harassment in schools, workplaces, and other community sites; as well as comprehensive early childhood education and economic support for women and families. These violence prevention strategies are consistent with what has been referred to in the context of polyvictimization as a "person-centered approach," in that such strategies aim to reduce violence comprehensively and in the longterm through healthy relationships and resilient communities (Wolfe, 2018).

This study had several limitations. This study analyzed data on perpetrator types but did not examine the number of perpetrators by type per victim (e.g., some victims of intimate partner perpetrators may have had multiple intimate partner perpetrators) or victimization timing (e.g., type of perpetrator at youngest victimization). This study examined one aspect of diversity—experiences among female victims versus male victims—but owing to sample sizes, it was not able to further disaggregate by-sex categories to examine victim experiences by violence type or by victim race/ethnicity, U.S. residential state, or other factors. Polyvictimization sequelae, including mental-health trauma, may vary by victims' race/ ethnicity and socioeconomic status (Andrews et al., 2015). Future research can benefit from addressing the violence type and lifespan timing issues that polyvictimization research has

demonstrated affect victims' long-term health (Dierkhising, Ford, Branson, Grasso, & Lee, 2018).

This study assessed adult victims aged 18 years, which may undercount lifetime perpetrators among younger respondents if many victims experience additional perpetrators types later in life. However, the proportion of victims with each perpetrator type combination (e.g., intimate partner only, intimate partner and acquaintance, etc.) was not substantially different (assessed a priori as 5% point change in prevalence per combination; data not shown) when compared between victims (i.e., male and female combined) of all ages versus victims aged less than the median age at survey time (43 years; data not shown). This suggests most victims had been victimized by all perpetrator types beginning before middle age and supports previous evidence indicating that youth and young adulthood are vulnerable times for victimization and key times for primary prevention of intimate partner violence, sexual violence, and stalking (Breiding et al., 2014; Peterman, Bleck, & Palermo, 2015). Early exposure to violence is a risk factor for future violence victimization as well as perpetration (Logan-Greene, Nurius, Hooven, & Thompson, 2013, 2015).

Conclusion

This study reported a high prevalence of multiple perpetrator types (intimate partner, acquaintance, stranger, person of authority, or family member) among U.S. victims of intimate partner violence, sexual violence, or stalking and identified that females were more likely than males to experience multiple perpetrator types. Clinical and public health strategies that address polyvictimization and protect victims from additional perpetrators can have a substantial and beneficial societal impact. Research on victim experiences and health outcomes to inform prevention strategies is strengthened by comprehensively accounting for lifetime victimizations. By understanding the interconnectedness of different violence types and implementing multilevel prevention strategies that address shared risk (e.g., history of exposure to violence in the home, cultural norms that support violence, limited educational and economic opportunities) and protective (e.g., problem solving and impulse control skills, strong social connections) factors (Basile et al., 2016; Centers for Disease Control and Prevention, 2016), communities have the potential to prevent multiple forms of violence.

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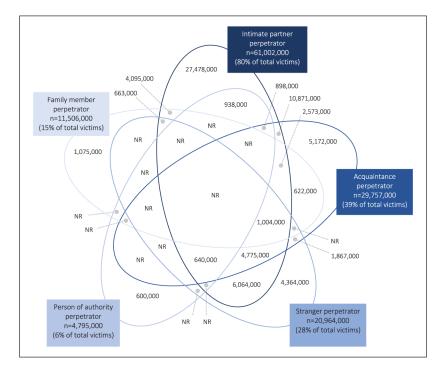


Figure 1.

Lifetime victimizations by perpetrator type among female victims aged 18 years, National Intimate Partner and Sexual Violence Survey, United States, 2012 (weighted n = 76,018,000 victims).

Note. NR = estimate is not reported due to relative standard error > 30% or cell size < 21.

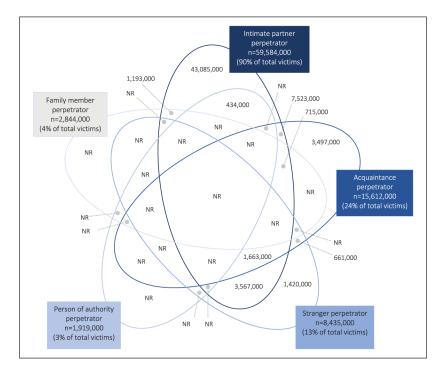


Figure 2.

Lifetime victimizations by perpetrator type among male victims aged 18 years, National Intimate Partner and Sexual Violence Survey, United States, 2012 (weighted n = 66,065,000 victims).

Note. NR = estimate is not reported due to relative standard error > 30% or cell size < 21.

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	All Victims	Female Victims	Male Victims
Respondents, n	7,194	4,182	3,012
Survey-weighted, n	142,083,000	76,018,000	66,065,000
Perpetrator type, $a n (\% \text{ of})$	Perpetrator type, $a^{a} n$ (% of total victims) (95% CI n)		
Intimate partner, n	120,586,000 [117,460,000, 123,712,000]	61,002,000 [59,553,000, 62,353,000]	59,584,000 [58,568,000, 60,476,000]
%	84.9% [83.6, 86.0]	$80.2\% \ ^{*}$ [78.3, 82.0]	90.2% [88.7, 91.5]
Acquaintance, n	45,369,000 [42,963,000, 47,775,000]	29,757,000 [28,050,000, 31,499,000]	15,612,000 [14,191,000, 17,129,000]
%	31.9% [30.3, 33.6]	$39.1\% \overset{*}{=} [36.9, 41.4]$	23.6% [21.5, 25.9]
Stranger, n	29,398,000 [27,446,000, 31,351,000]	20,964,000 [19,470,000, 22,526,000]	8,435,000 [7,350,000, 9,653,000]
%	20.7% [19.4, 22.1]	$27.6\%^{*}$ [25.6, 29.6]	12.8% [11.1, 14.6]
Family member, <i>n</i>	14,349,000 [12,771,000, 15,928,000]	11,506,000 [10,239,000, 12,898,000]	2,844,000 [2,200,000, 3,665,000]
%	10.1% [9.1, 11.2]	$15.1\%^{*}$ [13.5, 17.0]	4.3% [3.3, 5.6]
Person of authority, n	6,714,000 [5,777,000, 7,651,000]	4,795,000 [4,092,000,5,609,000]	1,919,000 [1,433,000, 2,564,000]
%	4.7% [4.1, 5.4]	$6.3\% \stackrel{*}{=} [5.4, 7.4]$	2.9% [2.2, 3.9]
Number of perpetrator typ	Number of perpetrator types per victim, $b_{\ n}$ (% of total victims) (95% CI n)	ictims) (95% CI n)	
1 type, <i>n</i>	87,081,000 [84,627,000, 89,496,000]	38,689,000 [36,911,000, 40,464,000]	48,392,000 [46,786,000, 49,911,000]
%	61.3% [59.6, 63.0]	50.9% * [48.6, 53.2]	73.2% [70.8, 75.6]
2 types, <i>n</i>	39,024,000 [36,817,000, 41,310,000]	25,255,000 [23,594,000, 26,972,000]	$\begin{array}{c} 13,769,000\\ [12,388,000,15,260,000]\end{array}$
%	27.5% [25.9, 29.1]	$33.2\% \overset{*}{[31.0, 35.5]}$	20.8% [18.8, 23.1]

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	All Victims	Female Victims	Male Victims
3 types, n	12,968,000 [11,690,000, 14,371,000]	9,760,000 [8,698,000, 10,930,000]	3,209,000 [2,559,000, 4,013,000]
%	9.1% [8.2, 10.1]	$12.8\% \overset{*}{}[11.4, 14.4]$	4.9% [3.9, 6.1]
4 types, <i>n</i>	2,668,000 [2,095,000, 3,393,000]	2,028,000 [1,566,000, 2,623,000]	639,000 [356,000, 1,143,000]
%	1.9% [1.5, 2.4]	2.7% * [2.1, 3.5]	1.0% [0.5, 1.7]
5 types	NR	NR	NR

[intimate partner only]) by one or more perpetrator types (intimate partner, acquaintance, stranger, person of authority, family member). NIS VS = National Intimate Partner and Sexual Violence Survey; CI = confidence interval; NR = estimate is not reported due to standard error > 30% or cell size < 21. Note. Victimization refers to any lifetime exposure to violence types assessed in the 2012 NISVS survey (sexual violence, stalking, physical violence [intimate partner only], or psychological aggression

p < .05 for proportion of females versus males.

 $^{2}_{\rm R}$ Nows sum to more than the total number of victims per column due to >1 perpetrator type per victim for some victims.

bUnique victim count per column.