

**Testimony for the House Committee on Armed Services
Subcommittee on Military Personnel
United States House of Representatives
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**Regarding the Hearing “Shattered Families, Shattered Service: Taking Military Domestic
Violence Out of the Shadows.”
September 18, 2019**

Chairwoman Speier, Ranking Member Kelly, and distinguished members of the Committee, thank you for this opportunity to provide testimony on the importance of prevention. I sincerely thank the Committee for its support for holding a hearing to discuss lifesaving prevention practices and strategies. I am the Vice President of Programs, Prevention, and Social change at the National Resource Center on Domestic Violence (NRCDV). Our mission is to strengthen and transform efforts to end domestic violence. Since its inception in 1993, NRCDV has played a key role in promoting collaborative learning and resource development. NRCDV utilizes four key strategies to advance domestic violence intervention and prevention – *public awareness and resource development; technical assistance (TA) and training; public policy and systems engagement; and research and evaluation*. Collaboration, coordination of effort, and accountability to the field are essential elements of all NRCDV’s activities, as is centering survivors’ experiences and promoting trauma-informed, culturally responsive and accessible responses.

NRCDV’s overarching goals and objectives are to:

- Strengthen the capacity of domestic violence programs, allied professionals, and individuals and organizations serving survivors and their children to promote and advance comprehensive services that are trauma-informed, survivor-defined, empowering, and culturally responsive.
- Promote public policy, institutional responses, and research that enhance the safety and well-being of survivors and advance gender, social, racial, and economic justice.
- Enhance the capacity of social change agents to support the development of healthy systems, communities, families, and individuals through community-led, collaborative multi-sector and cross-movement approaches to prevent gender-based violence.

The purpose of this testimony is to share the impact of domestic violence across the nation, share that prevention is possible, share critical prevention resources, and share strategies for prevention that could be implemented by the military. These strategies can help prevent domestic violence before it happens, benefiting not only the military, but all our communities across the country.

The impact of domestic violence is significant

[Research](#) confirms that domestic violence negatively impacts every community in the United States, affecting one in three women and one in four men, with profound and enduring health, economic and other consequences across the lifespan.¹ [Studies focusing on children’s exposure](#)

¹ Breiding, M.J., Chen J., & Black, M.C. (2014). Intimate Partner Violence in the United States- 2010. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

[to violence](#) find that one in five children witnesses parental assault, leading to increased risk of experiencing or perpetrating domestic violence as adults and underscoring the need and opportunity for early intervention,² including [promoting protective factors](#) within the family and community that help develop resiliency among children and teens. The American Journal of Preventive Medicine recently published the staggering costs of this violence in [Lifetime Economic Burden of Intimate Partner Violence Among U.S. Adults](#), which found “estimated lifetime costs of \$103,767 per female victim and \$23,414 per male victim or a population economic burden of nearly \$3.6 trillion (2014 US\$) over victims’ lifetimes, based on 43 million U.S adults with victimization history.”³

Preventing domestic violence is possible

The public health approach provides a vision of success for the primary prevention of sexual violence and intimate partner violence. “Violence can be prevented, and its impact reduced, in the same way that public health efforts have prevented and reduced pregnancy-related complications, workplace injuries, infectious diseases, and illness resulting from contaminated food and water in many parts of the world. The factors that contribute to [violence]...can be changed.”⁴ Sexual violence and intimate partner violence are perhaps more complicated than other public health issues because of the intentionality of harm and social stigmas associated with their occurrence. But just as public health’s systematic approaches have helped mitigate a range of threats to our wellbeing once thought to be completely intractable, they can also assist us in significantly reducing the prevalence of sexual violence and intimate partner violence.⁵ Primary prevention of Intimate Partner Violence (IPV), including Teen Dating Violence (TDV), means preventing IPV before it begins. The negative consequences associated with IPV underscore the importance of stopping it before it occurs. Primary prevention strategies are key to ending partner violence in adolescence and adulthood and protecting people from its effect.⁶ Primary prevention efforts impact modifiable factors associated with IPV such as reducing acceptance of violence, challenging social norms, practices and policies that support or reinforce gender-based violence.

CDC’s National Center on Injury Prevention and Control has documented effective strategies and approaches in its [Preventing Intimate Partner Violence Across the Lifespan: A Technical Package of Programs, Policies, and Practices](#) (2017). This comprehensive technical package shared evidence-based practices ranging from teaching healthy relationship skills, to creating protective environments, to strengthening economic support. A recent Blue Shield of California report, [Breaking the Cycle: A life course framework for preventing domestic violence](#) (2019) also

² Hamby, S., Finkelhor, D., Turner, H., & Ormrod, R. (2011) “Children’s exposure to intimate partner violence and other family violence” U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention, National Survey of Children’s Exposure to Violence Series, Bulletin.

³ Lifetime Economic Burden of Intimate Partner Violence Among U.S. Adults, Peterson, Cora et al. American Journal of Preventive Medicine, Volume 55, Issue 4, 433-444

⁴ Dahlberg, L., and Krug, E. (2002). Violence. A global public health problem. In E. Krug, L. Dahlberg, J. Mercy, A. B. Zwi, and R. Lozano (eds.). *World Report on Violence and Health*. Geneva: World Health Organization, pp. 1-21.

⁵ Guidelines for the Primary Prevention of Sexual Violence & Intimate Partner Violence. Virginia Sexual and Domestic Violence Action Alliance, 2007.

⁶ Niolon, P.H., Kearns, M., Dills, J., Rambo, K., Irving, S., Armstead, T., Gilbert, L. (2017). *Preventing Intimate Partner Violence Across the Lifespan: A Technical Package of Programs, Policies, and Practices*. Atlanta, GA: National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.

provides further guidance to the field on how to invest prevention resources wisely and with greatest impact.

Preventing Multiple Forms of Violence

The different forms of violence—child abuse and neglect, youth violence, intimate partner violence, sexual violence, elder abuse, and suicidal behavior—are strongly connected to each other in many important ways. Understanding and addressing the interconnections among these forms of violence is the central tenet of a 5-year vision to prevent violence developed by the Division of Violence Prevention (DVP).

Violence prevention efforts have historically centered on particular forms of violence. The seminal work of Dr. C. Henry Kempe in the early 1960s exposed the realities of child abuse and neglect. His work helped to launch, and shape decades of prevention, treatment, advocacy, and education geared toward protecting children. Explicit recognition of other forms of violence, such as intimate partner and sexual violence against women, gained widespread attention in the late 1960s and 1970s as the Women’s Movement drew attention to these problems and the need for services, care, and prevention. As suicide and homicide rose in the ranks as leading causes of death in the 1980s (particularly among youth and young adults), concerns about these problems also led to numerous calls for effective solutions. Several decades of research, prevention, and services have revealed a lot about the different forms of violence and how to prevent and respond to them. One fact clearly emerging from this body of work is that the different forms of violence are strongly interconnected.

Previous research indicates:

- **Those who are victims of one form of violence are likely to experience other forms of violence.** There is evidence to suggest that experiencing one type of victimization can lead to a doubling or tripling of the risk for another type of victimization.
- **Those who have been violent in one context are likely to be violent in another context.** Youth who are violent toward peers, for example, are also more likely to be violent toward their dating partners. Adults who are violent toward their partners are also more likely to abuse their children.
- **The different forms of violence share common consequences.** Beyond physical injuries and deaths these include a broad range of mental, emotional and physical health, and social problems that have effects across the lifespan. Exposure to violence increases the risk of depression, post-traumatic stress disorder (PTSD), anxiety, sleep and eating disorders, and suicide and suicide attempts. There is also a strong association between violence and infectious diseases, especially HIV and other sexually transmitted infections. Multiple studies also document a number of reproductive consequences from exposure to violence, including unintended pregnancy and teen pregnancy, as well as associated risk behaviors, such as multiple partners and early initiation of sexual activity. Many of the leading causes of death—such as cancer, cardiovascular disease, lung disease, and diabetes—are linked to experiences of violence through the adoption of harmful alcohol use, tobacco use, and physical inactivity, and impacts on the brain, cardiovascular, immune and other biological systems. Beyond the chronic health effects, serious psychosocial effects of childhood

violence are observed decades later, including severe problems with finances, family, jobs, anger, and stress.

- **The evidence also clearly shows that the different forms of violence share common risk and protective factors.** These factors can start in early childhood and continue across the lifespan. Many of the behavioral factors associated with perpetrating violence are evident well before 10 years of age, with signs of early physical aggression being one of the strongest predictors for later involvement in violent behavior, including violence against intimate partners. Early onset of sexual aggression is also one of the strongest predictors of subsequent sexual violence perpetration. Those who have been exposed to violence in the home are at increased risk for several forms of violence. Growing up and living in impoverished environments with limited social, educational, and economic opportunities and confronting the daily stresses of violence, racism, and instability at home or in the community also increases the risk of multiple forms of violence. Societal influences such as norms about violence, gender, and race/ethnicity, which are often rooted in customs, institutional practices and policies, impact health and opportunities and are associated with risk for multiple forms of violence. Connectedness, on the other hand, is protective across multiple forms of violence. Those who have stable connections to caring adults, affiliations with pro-social peers, and a strong connection to school and community are at lower risk for violence.⁷

NRCDV's Strategic Focus

Facilitate the identification, implementation, and scaling up of approaches that have cross-cutting impact

There are also a number of policy-oriented approaches that have the potential to impact multiple forms of violence by addressing gender, racial, and socioeconomic inequalities, social and cultural norms, and other community and societal risks (e.g., economic supports for children and families, economic empowerment and development schemes, urban upgrading, equal pay and other employment-based policies to improve opportunities and economic stability for women). Prioritizing the implementation and adoption of these approaches is critical to reducing the risks that are common across multiple forms of violence.⁸

Promote a community of practice around cross-cutting prevention efforts

Collaboration is one of the cornerstones of public health. Identifying ways to efficiently and effectively exchange information and facilitate learning is essential to maximizing the impact of our efforts. To prevent multiple forms of violence, we need to create opportunities for violence prevention practitioners to develop relationships and learn from one another in a more effective, systematic way. A community of practice is one approach to providing a context for relationship-building and to share critical information. With regular exchange of information among partners working on the different forms of violence, we gain: 1) a broader range of expertise and a more extensive network of professionals; 2) additional opportunities for sharing data and using data for action; 3) expanded knowledge of other resources and networks; and 4) increased options for

⁷ *Preventing Multiple Forms of Violence: A Strategic Vision for Connecting the Dots.* Atlanta, GA: Division of Violence Prevention, National Center for Injury Prevention and Control, Center for Disease Control and Prevention, 2016.

⁸ *Id.*

the field to more quickly learn about innovations, which could increase uptake and maximize impact.⁹

PreventIPV tools for social change: *A unified national voice.* NRCDV provides leadership and support to the Intimate Partner Violence (IPV) Prevention Council Steering Committee, comprised of diverse consultants, to advance a national prevention agenda. The IPV Prevention Council represents a unified national effort committed to enhancing the capacity of state/territory domestic violence coalitions and community-based domestic violence programs to advance a comprehensive national prevention agenda and broaden support for its full implementation at the national, state, territory and local levels.

NRCDV's Domestic Violence Awareness Project (DVAP) is committed to promoting efforts to shift the cultural rules, norms and constructs that support gender-based violence and support the health and well-being of individuals, families, communities and institutions. The DVAP Advisory Board is a diverse and unique partnership of national, state, and local organizations, as well as individual advocates. The DVAP collaborates to collect, develop and distribute resources and ideas relevant to advocates' *ongoing public and prevention awareness and education efforts*, not only in preparation for Domestic Violence Awareness Month (observed annually in the U.S. in October) but also throughout the year.

Integration of awareness and prevention: NRCDV embraces the idea that [Awareness + Action = Social Change](#).

- **Awareness:** Raising awareness involves efforts to increase knowledge or reshape cultural norms or false perceptions about gender-based violence. This includes educating ourselves and those in our communities about healthy relationships, the dynamics of abuse, and the root causes of gender-based violence.
- **Action:** Preventing gender-based violence involves proactive efforts to stop violence and abuse from happening in the first place by interrupting the cultural rules, norms, and constructs that support it. These strategies are implemented to shift attitudes, beliefs, behaviors, environments and policies to positively impact the health and well-being of individuals, families, communities, and institutions.
- **Social Change:** When equipped with a heightened level of awareness and an understanding of the concrete actions necessary to get there, social change can occur. This transformation becomes possible when individuals, families, communities, and institutions have access to both knowledge and tools.

Recommendations for the Military:

- Develop and implement a comprehensive IPV response and prevention plan.
- Create and foster a culture of equity, dignity and respect.
- Create policies and practices that support survivors and hold perpetrators accountable, so that all service members know that IPV is not acceptable and will not be tolerated.

⁹ *Id.*

- Develop and maintain collaborative relationships with community-based preventionist, social justice organizations, local domestic violence agencies and state coalitions
- Increase awareness and knowledge about the prevalence of IPV and the impact on individuals, families, communities and society.
- Equip all service members with tools to recognize warning signs and encourage safe and effective bystander interventions to reduce or prevent violence and assault.

Below are resources and tools compiled by NRC DV to support prevention strategies and approaches, to engage influential adults and peers, outlined in [Preventing Intimate Partner Violence Across the Lifespan: A Technical Package of Programs, Policies, and Practices](#) (CDC, 2017).

Bystander empowerment and education

- Prevention Tool: [Where do you stand?](#) (Men Can Stop Rape)
- Prevention Tool: [Hasta Aqui No Mas/Draw the Line](#) (Mujer)
- Prevention Tool: [See the Signs & Speak Out](#) (Avon Foundation for Women)

Men and boys as allies in prevention

- Special Collection: [Men and Boys: Preventing Sexual and Intimate Partner Violence](#)
- Prevention Tool: [Current Practices and Challenges with Engaging Men on Campus](#) (Men Can Stop Rape)
- Prevention Tool: [White Ribbon Campaign](#)
- Prevention Tool: [Coaching Boys Into Men](#) (Futures Without Violence)
- Prevention Tool: [Te Invito](#) (National Latin@ Network for Healthy Families and Communities)

Additional Resource

Violence Education Tools Online (VetoViolence)

<http://vetoviolence.cdc.gov>

Thank you for your support and interest in prevention efforts, strategies, and evidence-based practices. An investment to stop intimate partner and sexual violence before they occur will protect and promote the well-being and development of individuals, families and societies.¹⁰ Preventing violence means changing our society and its institutions-eliminating attitudes, beliefs, behaviors, environments and policies that contribute to violence and promoting those that create thriving communities for individuals to live, play, work and worship.

¹⁰ World Health Organization/London School of Hygiene and Tropical Medicine. (2010) *Preventing intimate partner and sexual violence against women: taking action and generating evidence*. Geneva: World Health Organization.