FACT SHEET

Transforming the Culture of Power
Recommendations to Combat Gender-Based Violence

By Jocelyn Frye, Robin Bleiweis, and Shilpa Phadke  October 31, 2019

Authors’ note: CAP uses “Black” and “African American” interchangeably throughout many of our products. We chose to capitalize “Black” in order to reflect that we are discussing a group of people and to be consistent with the capitalization of “African American.”

The prevalence of gender-based violence (GBV) has become the focus of a national and international conversation. From a seemingly unending proliferation of incidents and stories about sexual misconduct, to the viral call to action propelled by the #MeToo movement, the discussion about GBV shows no signs of slowing down. GBV reaches every corner of the country and affects people of all backgrounds. It persists, in part, because of entrenched attitudes that fail to acknowledge or center the experiences of survivors; that perpetuate a status quo infected by bias that privileges some groups over others; and that dismiss the urgent need to transform a culture of power that consistently harms women, gender minorities, and all who do not adhere to expected gender roles. While the problem is not new, the time for action is long overdue.

In an effort to put forward comprehensive, concrete solutions to tackle the issue head-on, the Center for American Progress takes an in-depth look at GBV in a new report titled “Transforming the Culture of Power: An Examination of Gender-Based Violence in the United States.”1 The report focuses on the breadth and depth of GBV across multiple disciplines, settings, and experiences as well as the critical importance of much-needed reforms. This fact sheet discusses the report’s key themes, with more than 25 recommendations for future action.

Overview

GBV affects millions of survivors. Centers for Disease Control and Prevention data show that more than 43 percent of women in the United States—about 52.2 million—report experiencing some form of sexual violence involving physical contact over the course of their lifetime.2 Approximately 1 in 4 women reports experiencing some form of intimate partner violence (IPV) and an IPV-related impact during her lifetime.3
Even with these numbers, there is significant underreporting and a serious lack of comprehensive data. Although the majority of GBV survivors are women, GBV affects people across sex and gender identities. Survivors are frequently viewed through one narrow lens, ignoring people from diverse experiences and backgrounds, such as women of color, transgender women, immigrant women, low-income women, women with disabilities, men, and people across gender identities or who identify as nonbinary or gender-nonconforming. Increasingly, LGBTQ and gender minority people are targets of GBV, yet there is too little tracking of these trends and too little research on the causes and effects.

GBV is too often treated as an individual problem within individual relationships, rather than a systemic problem rooted in an imbalance of power. Too little attention is given to the power dynamics that fuel GBV, particularly the systemic, structural mechanisms used to protect those in power and perpetuate the status quo. A comprehensive response to GBV must address the entrenched biases that undermine survivors’ status and include interventions focused on driving institutional change and accountability and supporting survivor and worker power.

GBV occurs across the life cycle and, thus, requires solutions that respond to the needs of survivors at all stages of life. The attitudes and actions that fuel GBV begin at an early age and extend over the course of a lifetime. A sampling of statistics tells the story. Findings from 2010 show that around 75 percent of students in third through sixth grade reported witnessing bullying, and nearly half of teachers reported hearing sexist comments at school. Nearly 60 percent of LGBTQ students in sixth through 12th grade reported being sexually harassed in school, and an estimated 77 percent of openly transgender students in kindergarten through 12th grade were harassed or discriminated against while in school. Young people also confront other forms of misconduct. Women and girls with disabilities are more than twice as likely as women and girls without disabilities to have experienced sexual abuse as a child. And young women and girls of color often encounter outdated stereotypes that overssexualize their bodies and also make them targets of abuse, with lifelong effects. These trends continue into adulthood: Women ages 18 to 24 experience the highest rate of rape and sexual assault of any age group. And a 2019 survey by the American Association of Universities found that as many as 33 percent of undergraduate women with disabilities and 22.8 percent of undergraduate transgender, genderqueer, gender-nonconforming, or questioning students reported experiencing nonconsensual sexual contact. GBV also does not dissipate over time; in fact, elderly women face the majority of elder abuse. One study found that women ages 60 years and older endured 71.4 percent of all reported elder physical abuse. These experiences make clear that efforts to address GBV must occur throughout the life cycle.

GBV by intimate partners increasingly has deadly and devastating consequences. Data show that 1 in 5 homicide victims—and more than half of all female homicide victims—is killed by an intimate partner. Women in the United States are 21 times
more likely to be shot to death than women in other high-income countries, and most are killed by an intimate partner. Rates of IPV vary among women of different races: More than half of multiracial women have experienced physical violence by an intimate partner, while 48 percent of American Indian and Alaska Native women; 45 percent of Black women; 37 percent of white, non-Hispanic women; 34 percent of Hispanic women; and 18 percent of Asian American and Pacific Islander women have experienced intimate partner sexual violence, physical violence, or stalking.

Recommendations

These data are only the tip of the iceberg. Solutions to address GBV must be comprehensive and occur at all levels—from strategies that are focused on survivors, to federal interventions, state actions, and individual efforts.

Survivor-focused strategies

- **Full access to legal supports:** Survivors must have access to different types of legal assistance, including no-cost legal services and help with understanding different rights and protections.

- **Full access to comprehensive health care:** Survivors must have access to both primary and preventative care in addition to emergency services and the full range of reproductive health care, including contraception and abortion care.

- **Robust social safety net protections:** Survivors must have access to emergency support services, such as safe housing and fiscal assistance, that will allow them to achieve full and long-lasting economic independence.

- **Work transition supports:** Survivors must have access to assistance, such as additional job training and short-term stipends, that enables them to transition from one job to another without falling into financial ruin.

- **Emergency child care services:** Survivors must be able to leave their children in a safe environment when handling rapid transitions from one place to another or multiple appointments such as court-mandated meetings, doctor visits, job interviews for new positions, or other official meetings.

- **Informational resources:** Survivors must have access to comprehensive, accessible information about what to do when they encounter GBV: where they can go for help, what resources are available, and what steps to take if they decide to pursue a claim.

- **Supports for survivors from diverse backgrounds:** Targeted resources must be available to address unique survivor needs that often are overlooked, such as examining the higher prevalence of sexual harassment claims filed by women of color survivors in selected industries; rolling back recent changes to asylum laws that have reduced access to protection for immigrant survivors; providing
resources for shelters for LGBTQ survivors and prohibiting discrimination targeting LGBTQ people; and investing in caregiving services and supports with specialized skills to assist survivors with disabilities.

- **Civic participation**: Survivors must feel safe to participate in civic activities, from volunteer work, to registering and going to vote, to becoming actively involved in their communities.

**Federal interventions**

- **Strengthening existing sex discrimination and other anti-discrimination protections**: Measures to strengthen protections under key sex discrimination laws such as Title VII of the Civil Rights Act of 1964 and Title IX of the Education Amendments of 1972 and to reauthorize the Violence Against Women Act must be a top priority to achieve greater accountability for wrongdoing, ensure that all survivors can come forward without fear of retribution, and recognize the diverse experiences of survivors across race, ethnicity, sex, gender identity and expression, sexual orientation, disability, and LGBTQ status.

- **Expanding economic security policies**: Addressing persistent economic inequality that, left unchecked, can limit the ability of survivors to escape abusive situations is essential. This can be done through measures such as enacting comprehensive equal pay reforms; paid sick and “safe” days; inclusive paid family and medical leave; and proposals to raise the minimum wage and eliminate the tipped minimum wage and subminimum wage.

- **Passing comprehensive immigration reform**: Immigrant survivors need a structured pathway toward citizenship—that includes greater access to the necessary visas and asylum protections—so that they can feel safe coming forward in GBV cases.

- **Implementing state-of-the-art anti-bias training for law enforcement, educators, service providers, employers, and others interacting with survivors**: All those who interact with survivors, particularly law enforcement officers and service providers, must receive effective training to better understand survivor trauma, how to recognize and disrupt bias and abuse, and how to appropriately and sensitively communicate with survivors—particularly survivors with disabilities or language barriers.

- **Increasing support for research on GBV causes and prevention, perpetrators, and survivors**: A robust research agenda to examine challenges facing survivors of color, LGBTQ survivors, and survivors with disabilities is critical to identify gaps in the available data and overall knowledge and to identify best practices, including alternative resolution and restorative justice approaches that focus on survivor healing, accountability, truth-telling, and community-based strategies.

- **Stepping up vigorous government enforcement of legal protections**: Ensuring that government upholds its pivotal role to protect survivors from harm must be a top priority. The federal government must leverage its power to hold institutional actors accountable for wrongdoing through measures such as strengthening the

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types of investigatory tools available; disaggregating claims by demographic data to show unique impacts on targeted communities; reversing proposed rollbacks in critical areas such as Title IX enforcement that would reduce protections for gender minorities and survivors; and ensuring that the federal government itself operates as a model employer.

- **Strengthening gun laws to keep guns out of the hands of domestic abusers and stalkers:** These efforts must close gaps in federal law that allow some individuals with a demonstrated history of domestic abuse or stalking to continue to legally purchase and possess firearms in certain situations, putting survivors and their communities at risk. Such situations include if the abuse occurred in the context of a dating relationship or if the abuser is subject to a temporary order of protection issued at the beginning of a legal process when a survivor first attempts to obtain protection.

- **Pursuing federal initiatives that intentionally include survivors with disabilities:** These efforts must be visible in all GBV-related research and output from the federal government, including the production of targeted materials for disabled survivors of GBV and the inclusion of disability as a demographic category in all GBV research and data collection.

**Establishing a federal, blue-ribbon commission to end GBV**

The creation of a new federal commission could help implement these recommendations and develop a national strategy for reducing GBV through sustainable and visionary reform. This proposed commission, with a four-year authorization, would be tasked with examining and reporting on trends, research and data gaps, best practices, enforcement priorities, and prevalence across different sectors. The commission’s work would devote special attention to addressing the unique experiences of survivors with higher rates of GBV—especially women of color, women with disabilities, transgender women, and other gender minorities—and include as members ex officio representatives from federal agencies, congressional lawmakers, leading experts, advocates, and survivors themselves, all from diverse racial, ethnic, economic, and other backgrounds.

**State action**

State actions should include measures to address states’ own practices as employers and in their own operations, as well as to ensure that individuals in their communities have access to the protections and supports that they need. A wide-ranging coalition of nearly 300 advocates across the country have called for at least 20 states to take concrete action to enact policies addressing different forms of GBV by 2020. Comprehensive assessments by independent evaluators to examine the effectiveness of their own policies and procedures; climate surveys among their own workforce; remedying power imbalances that discourage survivors from coming forward; strengthening legal protections; and driving efforts to change institutional culture are among the efforts that are critical to pursue.
School, employer, and other institutional action
These efforts must promote institutional accountability across many different sectors to fully address GBV and promote a culture where such misconduct is deemed unacceptable. These steps include running regular internal assessments and evaluations to examine organizational practices, culture, and overall climate, as well as tackling head-on stubborn, entrenched biases about women and gender minorities across race, ethnicity, sexuality, and disability status. Schools at all levels, for example, must use a mix of strategies to improve internal processes for addressing GBV and supporting survivors and to educate students about healthy relationships, codes of conduct, and school processes—both to fulfill their educational mission and to ensure compliance with the law. Similarly, workplaces must use assessments and climate surveys to identify where interventions are needed, in combination with comprehensive training tailored to the institution. They must ensure fair processes that enable survivors to come forward without retribution and be willing to address structural barriers that may hinder reporting. It is also critical to expand opportunities for women and people of color to move up the career ladder, because greater equity can help reduce discriminatory practices overall. More broadly, all institutional settings must take steps to disrupt power centers that inhibit or deter individuals from coming forward about GBV, using measures such as ensuring that staff have access to worker advocates and removing barriers to collective organizing.

Individual actions
These actions should involve public education to help individuals prevent GBV. Investments to make widely available educational resources and trainings so that individuals can learn about bystander intervention strategies and creating a culture of inclusion can also have impact.

Conclusion
No one should have to endure gender-based violence in any form, in any place, or at any time. The time for action is long overdue. There are concrete steps that can be pursued—in different settings, by different actors, at different levels—to drive meaningful, impactful change. It is essential to believe survivors and demonstrate an unflinching commitment to progress—and to putting an end to GBV once and for all.

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Endnotes


3 Ibid. This data point reflects women who reported experiencing contact sexual violence, physical violence, and/or stalking by an intimate partner and reported an IPV-related impact during their lifetime.


12 These data refer to experiences of penetration or sexual touching involving physical force or inability to consent or stop what was happening. David Cantor and others, "Report on the AAU Campus Climate Survey on Sexual Assault and Sexual Misconduct" (Rockville, MD: Westat, 2019), available at https://www.aau.edu/sites/default/files/AAU-Files-Key-Issues/Campus-Safety/FULL_2019_Campus_Climate_Survey.pdf.


