

DOMESTIC VIOLENCE

# Beyond the incident. Toward equitable safety.

Understanding power and control—and the systems that shape access to help.

**The issue.** Intimate partner violence (IPV) includes physical violence, sexual violence, stalking, and psychological aggression by a current or former intimate partner.<sup>1</sup>

**The policy imperative.** Responses must recognize patterns of control, reduce barriers to support, and preserve survivors' safety, dignity, and agency.

## The Power and Control Wheel

### HOW TO READ IT

**Center:** power and control connect the behaviors.

**Spokes:** tactics that limit freedom, create fear, or build dependence.

**Outer ring:** physical and sexual violence can reinforce control.<sup>8</sup>

### Look beyond visible injury.

Economic control, device monitoring, stalking, and reproductive coercion also matter.<sup>15</sup>

The original wheel reflects women's experiences of men's abuse. It is not an exhaustive model for all relationships. Abuse also affects LGBTQ+ people and survivors of every gender.<sup>68</sup>



**Source:** Domestic Abuse Intervention Programs (DAIP), Duluth, Minnesota. Original artwork, unchanged. [theduluthmodel.org](http://theduluthmodel.org) · 218-722-2781.<sup>8</sup>

“What barriers make safety difficult?”

A stronger question than “Why don’t they leave?”

Prepared by **Dr. Freda D. Grant** · Founder & Principal Consultant  
An equity-centered resource for institutions, workplaces, and community partners.

EVIDENCE & EQUITY

# The numbers need context.

Domestic violence occurs across communities. Access to safety is not equal.

## 34.0%

of U.S. women experienced contact sexual violence, physical violence, and/or stalking by an intimate partner in their lifetime.<sup>1</sup>

## 17.0%

of U.S. men experienced the same lifetime IPV measure.<sup>1</sup>

CDC NISVS 2023/2024, published February 2026. All CDC percentages on this page measure contact sexual violence, physical violence, and/or stalking by a partner—not police reporting or psychological aggression alone.

## BIPOC communities

BIPOC means Black, Indigenous, and People of Color. There is no single “BIPOC rate.” Below: **U.S. women’s lifetime IPV estimates**, CDC 2016/2017.<sup>2</sup>

|                                 |       |
|---------------------------------|-------|
| Black                           | 53.6% |
| American Indian / Alaska Native | 57.7% |
| Multiracial                     | 63.8% |
| Hispanic (any race)             | 42.1% |
| Asian / Pacific Islander        | 27.2% |

All categories except Hispanic are non-Hispanic. CDC grouped Asian and Pacific Islander respondents together. Point estimates are not rankings of cultures or individual risk.

## LGBTQ+ communities

Same **2016/2017 lifetime IPV measure**, by respondents’ sexual identity.<sup>3</sup>

| Sexual identity | Women | Men   |
|-----------------|-------|-------|
| Bisexual        | 69.3% | 46.1% |
| Lesbian / gay   | 56.3% | 47.7% |
| Heterosexual    | 46.3% | 44.1% |

Sexual identity is not partner gender. These are not rates only within same-gender relationships or estimates for every LGBTQ+ identity.

**Transgender survivors:** A 2020 meta-analysis found physical IPV prevalence about **2.2×** and sexual IPV prevalence about **2.5×** that of cisgender participants in comparative studies.<sup>4</sup>

**Interpret with care.** CDC changed methods and some items for 2023/2024; do not compare newer national figures with older subgroup data as a trend. The transgender figures are a separate, multi-country research synthesis—not U.S. national estimates. Race and LGBTQ+ identities overlap; these tables do not estimate IPV specifically among LGBTQ+ people of color.

## Barriers to reporting are barriers to safety.

Reporting, leaving, and seeking support are distinct decisions. Not reporting is not proof that abuse did not happen.<sup>567</sup>

### 01 / Safety & retaliation

Fear of escalation, stalking, threats, or harm to children, pets, and loved ones. Leaving can increase danger.

### 02 / Resources & access

Financial control; unsafe housing; lack of childcare, transport, language support, or disability-accessible services.

### 03 / Institutional harm

Fear of disbelief, blame, racism, criminalization, immigration consequences, or family separation.

### 04 / Identity & isolation

Threats of outing; homophobia, biphobia, or transphobia; stigma; dependence on a partner for care or support.

FROM AWARENESS TO ACTION

# Compliance is the floor. Culture change is the goal.

Build systems that expand survivors' options—not systems that make decisions for them.

## Replace myths with a survivor-centered response.

| THE MYTH                             | THE REALITY                                                                                                 |
|--------------------------------------|-------------------------------------------------------------------------------------------------------------|
| "They would leave if it were abuse." | Leaving can increase danger. Housing, finances, children, and care needs affect decisions. <sup>5</sup>     |
| "Abuse is only physical."            | Sexual, psychological, economic, and technology-facilitated abuse can also establish control. <sup>15</sup> |
| "Just call the police."              | Reporting may carry risks. Offer advocacy and informed choices—not pressure. <sup>67</sup>                  |
| "Staying means accepting abuse."     | Staying is not consent. Support is deserved whether or not someone leaves. <sup>5</sup>                     |

## Priorities for institutions

- 1 Make options transparent.**  
Explain support, reporting routes, confidentiality limits, and any reporting duties before requesting details.
- 2 Remove access barriers.**  
Offer accessible, culturally responsive, LGBTQ+-affirming support; connect people to qualified advocates.
- 3 Plan for safety & retaliation.**  
Address workplace or campus risks with the survivor. Do not confront the person causing harm on their behalf.
- 4 Listen without taking over.**  
Believe, thank, and ask: "What would help you feel safer?" Respect the survivor's choices.

## Support is available.

**National Domestic Violence Hotline**  
24/7 · Call **800-799-SAFE (7233)**  
Text **START to 88788**  
[thehotline.org](https://thehotline.org)<sup>5</sup>

**LGBTQ+ support: The Network/La Red**  
24/7 · **800-832-1901**  
[tnlr.org](https://tnlr.org)<sup>9</sup>

In immediate danger, call 911. Seek help on a safer device if possible; phones and browsing can be monitored. Incognito mode does not erase all traces. An advocate can help with a personal safety plan.<sup>5</sup>

**You do not have to leave  
to ask for help.**



### WORK WITH GRANT EQUITY CONSULTING

## Dr. Freda D. Grant

Founder & Principal Consultant  
Training, keynotes, and consulting on gender-based violence, equity-centered institutional responses, and organizational culture change.

[grantequityconsulting.com](https://grantequityconsulting.com)

## SOURCES & PUBLICATION NOTE

1. CDC. NISVS 2023/2024 IPV Brief (2026), Tables 1 & 4.
2. CDC. NISVS 2016/2017 IPV Report (2022), Table 7.
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5. The Hotline: support Why People Stay Internet Safety.
6. NYS OPDV. Violence in the LGBTQI+ Community.
7. Holliday et al. (2019). Race/Ethnicity & Police Reporting.
8. DAIP. FAQs About the Power and Control Wheel.
9. The Network/La Red. 24-Hour Hotline.

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