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Technology-Facilitated Abuse in Intimate Partner Violence (IPV): An Exploration of Costs and Consequences

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Summary of Findings

Research Question 1 asked: What are the prevalence and incidence rates associated with cyberstalking, IBSA, and doxing in the U.S.? The results of our nationally representative survey presented above revealed that approximately 16% of the respondents had experienced at least one type of TFA in their lifetime. IBSA (7.7%) was the most common individual type of lifetime TFA victimization, followed by cyberstalking (7.4%) and doxing (5.4%). Furthermore, almost 4% of respondents indicated that they had been the victim of at least two separate types of TFA. As expected, the 1-year incidence rates of TFA victimization were considerably smaller than the lifetime prevalence rates, but the victimization patterns between the two were similar. Cyberstalking (1.8%) and doxing (1.8%) were the most common individual TFA measures, followed by IBSA (1.1%). Approximately 4% of respondents reported experiencing any type of victimization in the past year, while 1.6% reported experiencing at least two types of TFA. Next, although this study primarily focused on TFA within the context of intimate partner violence (IPV), approximately 60% of IBSA and cyberstalking victims—and over 80% of doxing victims—reported that the perpetrator was someone other than a current or former intimate partner.

As discussed in the literature review, it is difficult to compare prevalence and incidence rates across studies due to differences in variable definitions, sampling frame, and time periods. In fact, as shown in Table 1, we are aware of only two previous nationally representative surveys estimating TFA offenses in the U.S.: ADL (2022) and Pew Research Center (Duggan, 2017). Our estimate of 16% lifetime prevalence of TFA is similar to the Duggan (2017) lifetime prevalence of 18% for "severe behaviors" including of physical threats, sustained harassment, stalking, and sexual harassments – a definition that might not include doxing depending upon how the survey respondent views such incidents. The ADL (2022) estimated 27% of adults had ever experienced any form of "severe" online harassment – with definitions only slightly more inclusive than our TFA categories (e.g., including swatting which was not included in our survey). In addition to the broad category of TFA, we are aware of only two nationally representative lifetime prevalence estimates for any of our three subcategories – both from the ADL (2022) survey. They found a 10% lifetime prevalence for cyberstalking and 5% for doxing, quite similar to our estimated rates of 7.4% for cyberstalking and 5.4% for doxing.

When examining the 1-year incidence rates, there were several noteworthy findings regarding the demographic profiles of TFA victims. First, women were significantly more likely to experience each of the five TFA measures compared to males, and non-cisgender respondents were more likely to experience each measure relative to both cisgender males and females. Next, White respondents were the least likely to be victimized across four of the five TFA measures (all but cyberstalking). Conversely, multiracial or 'other' race respondents were most likely to experience each TFA measure. Regarding sexual orientation, straight respondents were less

likely to experience cyberstalking, doxing, and any victimization relative to those who identify as gay/lesbian, bisexual, or another orientation. Gay/lesbian respondents were least likely to experience IBSA, while bisexual respondents were least likely to experience polyvictimization.

The average age for those who experienced TFA victimization in the past year was relatively high: 47 years old for doxing, 46 for cyberstalking, and 39 for IBSA. Next, separated respondents were most likely to experience each of the TFA measures compared to those who were married, widowed, divorced, or never married. This finding was somewhat expected for IBSA and cyberstalking since current or former intimate partners were two of the most common victim-offender relationships found in the data. Conversely, married respondents had the lowest rates of victimization in the past year for cyberstalking, doxing, and any victimization, while widowed respondents were least likely to experience IBSA.

There were few differences in past-year victimization prevalence rates regarding respondents' education level, region of residence, and employment status, and those differences that were present were quite small. The final demographic variable included in the analyses was household income. In general, respondents from lower income households were more likely to experience each TFA measure compared to those from higher income households, though this relationship was not perfectly linear. As discussed above, the patterns presented here for the 1-year incidence rates were quite similar to those of the lifetime prevalence rates (see Table 16).

This leads to Research Question 2, which was: Within the context of IPV, what are the consequences and financial costs to victims associated with cyberstalking, IBSA, and doxing? As reported by our sample of 403 self-reported victims, the potential consequences are far-reaching and vary considerably by respondent and across victimization types. Combined, the direct financial impact of victimization is estimated to be \$8,874 (95% CI \$4,849-\$12,902), although the maximum reported in our sample was approximately \$650,000. Polyvictimization had the largest mean cost of \$24,848 (95% CI \$8,986 - \$40,731), with the largest cost borne by one of the polyvictims in our sample.

The largest component of financial costs was earnings losses – including losses due to short-term time off work as well as extended periods of time – and in some cases, shifting careers to a lower paying job. Costs associated with actual physical property were the next largest category – including stolen or vandalized property, moving expenses, and the cost associated with replacing or buying new accounts or new technology. The smallest direct financial cost categories are the out-of-pocket costs for medical or mental health expenses. However, medical and mental health expenses will inevitably be higher as nearly 40% of victims reported they were still receiving (or expected to receive) treatment in the future. Moreover, approximately 50% of victims receiving treatment reported that other sources (e.g., insurance, government programs, or nonprofits) were covering some or all of their costs – thus they are excluded from the direct financial costs to victims estimated here.

Some cost categories that make up only a small fraction of overall averages still have significant impacts on the few victims who do incur such costs. For most of the cost categories in our survey, roughly 80-90% of victims suffered no financial costs at all. For example, while the average out-of-pocket costs for mental health care was reportedly \$567, it was \$5,313 for the

10.7% of victims who actually incurred these costs. Overall, 40% of victims had financial costs > 0.

In addition to monetary costs to victims, our survey also found significant identifiable non-pecuniary harms that might ultimately result in either monetary losses and/or mental anguish. For example, 64.5% of victims who were in school at the time reported having a hard time focusing on their studies while only 37.1% reported actually missing days at school. Similarly, while 37.6% of victims who were employed at the time reported difficulty focusing on their jobs, only 11.6% reported taking paid time off and 13.6% reported unpaid time off.

Similarly, while 10.7% of victims reported incurring some mental health expenses, 40% of victims reported a diagnosis of anxiety, depression, mood disorder, or PTSD compared to about 20% for non-victims. Thus, not only do victims have a higher rate of mental health issues, the need for mental health care for victims appears to be much higher than the rate of victims receiving such care. These findings alone do not necessarily establish causality – as it is possible that those afflicted with one of these mental health disorders are more vulnerable to IPV victimization. This is an area where further study could prove fruitful.

In addition to variability in victimization rates by demographic characteristics, we also found two statistically significant differences in financial impacts. First, victims in the 30-59 age range had higher losses than those under 30 or 60+. This is most likely due to the fact that these victims are more likely to be working at the time of victimization. Indeed, the total financial impact for victims who were working is about twice that of the non-working, and the average age of employed victims was about 40 compared to 55 for non-employed victims. Second, the financial costs actually decrease with household income. Thus, controlling for the rate of victimization, the financial impact of TFAs have a disproportionate impact on lower income individuals.

Finally, one of our research questions was to understand the differing impact on minors who were victims of TFA. Although the sample was limited to adults over age 18, we were able to estimate the number of minors by comparing their current age to the date of their most recent victimization. Overall, only 13.1% of our victim sample were estimated to have been victimized as minors – resulting in a sample of only 53 victims. Nevertheless, based on that limited sample, the direct monetary costs to minors is estimated to be about 1/3 that of non-minors. Of course, these are not directly comparable since adults who were victimized many years ago as minors are included in our "non-minor" sample, and even for those who we were able to include in our "minors" subcategory might incur ongoing financial costs.

Finally, Research Question 3 asked: What is the public's willingness-to-pay to reduce the risk and consequences of cyberstalking, IBSA, and doxing in the U.S.? To address this question, we posed a series of hypotheticals to survey respondents designed to elicit this information. On average, we found that the typical individual was willing to pay between \$75 and \$85 annually to reduce each of the three crime types. However, when averaged over the entire population, These figures translate into an estimated willingness-to-pay to reduce one TFA incident ranges from about \$3,500 to \$6,500.

Our first major finding was that the implied willingness-to-pay to reduce one victimization is less than the estimated financial burden to victims that was estimated in the portion of the survey that victims responded to. Although the reason for this is unclear, it is possible that respondents underestimated the true costs and consequences of victimization. This might have been exacerbated by the brief descriptions given of each TFA that did not include quantifiable impacts. However, based on open-ended survey responses explaining their choice on the survey, several other possibilities became clear. First, some respondents noted that the underlying rates of victimization were low and thus spending money on further reducing their incidence would not be their priority. Second, some survey respondents shifted some or all of the blame on victims – who they said should have taken more precautions. No doubt a combination of all three reasons contributed to this finding.

Further analysis of respondent's willingness-to-pay revealed several interesting findings. First, women and Hispanics were generally willing to pay more than men and non-Hispanics, as were those who reported they regularly check and/or post social media. These three groups are also those who are at higher risk for victimization. Those aged 60+ were found to be willing to pay less – which is also consistent with their lower risk of victimization. Prior victims were not willing to pay any more than non-victims, controlling for other demographics. One possible reason for this finding is that the typical victim suffers no financial costs (i.e., only 40% of victims reported costs greater than zero). Alternatively, prior victims might have taken further precautions and believe they are now at lower risk, and/or these precautions should be taken by a larger percentage of the population.

Additional insights from the willingness-to-pay survey came from follow-up questions. First, approximately 55% of respondents believe that tech companies should pay for programs to reduce TFA (whether through lower corporate profits or higher consumer prices), while 27.5% believe the burden should be on taxpayers. The remaining 18% indicated various parties should pay – such as a combination of taxpayers and companies, perpetrators (through higher fines), and victims themselves (although this was a small minority of respondents).

Finally, when asked to rank the relative importance of taxpayer spending to address TFA, the highest ranked was tougher punishment, followed by victim assistance and more secure technology. Educational programs to either prevent such abusive behavior or to protect oneself from becoming a victim were given lower priority.