



Child Sexual Abuse

Long-Term Consequences

Child sexual abuse is a significant problem in Maine and in the United States. In 2014, over 50% of contacts with Maine’s sexual assault support programs were from or about someone who experienced sexual violence under the age of 18. Because it is so underreported, we cannot determine the full extent of the impact of child sexual abuse. However, we know the impacts on victims and survivors vary and most often include long-lasting physical, mental, and emotional issues.

Mental Health & Substance Use Consequences

- Girls who are sexually abused are three times more likely to develop **psychiatric disorders** than girls who are not sexually abused (Day, et al., 2003; Kendler, et al., 2000; Voeltanz, et al., 1999).
- Adult women who were sexually abused as a child are more than twice as likely to suffer from **depression** as women who were not sexually abused (Rohde, et al., 2008).
- Adults with a history of child sexual abuse are more than twice as likely to report a **suicide attempt** (Dube, et al., 2005; Waldrop, et al., 2007).
- Among male survivors, more than 70% seek psychological treatment for issues such as **substance abuse, suicidal thoughts and attempted suicide** (Walrath, et al., 2003).
- Female adult survivors of child sexual abuse are nearly three times more likely to report **substance use problems** (40.5% versus 14% in general population) (Simpson & Miller, 2002).
- Male adult CSA victims are 2.6 times more likely to report **substance use problems** (65% versus 25% in general population) (Simpson & Miller, 2002).

Physical Consequences

- 20-24 year-old women who were sexually abused as children were four times more likely than their non-abused peers to be **diagnosed with an eating disorder** (Fuemmeler, et al., 2009).
- Middle-aged women who were sexually abused as children were **twice as likely to be obese** when compared with their non-abused peers (Rohde, et al., 2008).
- Generally, adult victims of child sexual abuse have **higher rates of health care utilization** and report **significantly more health complaints** compared to adults without a CSA history (Arnow, 2004; Golding, Cooper, & George, 1997; Thompson, Arias, Basile & Desai, 2002). This is true for both self-reported doctor’s visits and objective examination of medical records (Newman, et al., 2000).
- Adults with a history of child sexual abuse are 30% more likely than their non-abused peers to have a **serious medical condition** such as **diabetes, cancer, heart problems, stroke or hypertension** (Sachs-Ericsson, et al., 2005).
- Male sexual abuse survivors have **twice the HIV-infection rate** of non-abused males. In a study of HIV-infected 12-20 year olds, 41% had a sexual abuse history (Dekker, et al. 1990; Wilson, et al. 2009).

Bibliography

- Arnow, B. A. (2004). Relationships between childhood maltreatment, adult health and psychiatric outcomes, and medical utilization. *Journal of Clinical Psychiatry*, (65), 10 – 15.
- Day, A., Thurlow, K., & Woolliscroft, J. (2003). Working with childhood sexual abuse: A survey of mental health professionals. *Child Abuse & Neglect*, (27), 191-198.
- Dekker, A. et. al. (1990). The incidence of sexual abuse in HIV infected adolescents and young adults. *Journal of Adolescent Health Care*, (11)3.
- Dube, et. al. (2005). Long-term consequences of childhood sexual abuse by gender of victim. *American Journal of Preventive Medicine*, 28, 430-438.
- Fuemmeler, B., et. al. (2009). Adverse childhood events are associated with obesity and disordered eating: Results from a U.S. population-based survey of young adults. *Journal of Traumatic Stress*, (22)4, 329-333.
- Golding, J., Cooper, M., & George, L. (1997). Sexual assault history and health perceptions: Seven general population studies. *Health Psychology*, (16)5, 417-425.
- Kendler, KS, et. al. (2000). Childhood sexual abuse and adult psychiatric and substance use disorders in women: An epidemiological and Cotwin control analysis. *Archives of General Psychiatry*, (57)10, 953-959.
- Newman, MG., et al. (2000). The relationship of childhood sexual abuse and depression with somatic symptoms and medical utilization. *Psychological Medicine*, 30, 1063-1077.
- Rohde, P., et. al. (2008). Associations of child sexual and physical abuse with obesity and depression in middle-aged women. *Child Abuse and Neglect*, (32)9, 878-887.
- Sachs-Ericsson, N., et. al. (2005). Childhood sexual and physical abuse and the 1-year prevalence of medical problems in the national comorbidity survey. *Health Psychology*, (24)1, 32-40.
- Simpson, T. & Miller, W. (2002). Concomitance between childhood sexual and physical abuse and substance use problems: A review. *Clinical Psychology Review*, (22)1, 27-77.
- Thompson, M., Arias, I., Basile, K. & Desai, S. (2002). The association between childhood physical and sexual victimization and health problems in adulthood in a nationally representative sample of women. *Journal of Interpersonal Violence*, (17)10, 1115-1129.
- Voeltanz, N., et. al. (1999). Prevalence and risk factors for childhood sexual abuse in women: National survey findings. *Child Abuse and Neglect*, (23)6, 579-592.
- Waldrop, AE, et. al. (2007). Risk factors for suicidal behavior among a national sample of adolescents: Implications for prevention. *Journal of Traumatic Stress*, (20)5, 869–879.
- Walrath, C., et. al. (2003). Children with reported histories of sexual abuse: Utilizing multiple perspectives to understand clinical and psychosocial profiles. *Child Abuse and Neglect*, (27), 5, 509-524.
- Wilson, H. & Widom, C.S. (2009). An examination of risky sexual behavior and HIV among victims of child abuse and neglect: A thirty-year follow-up. *Health Psychology* (27), 149-158.

Adapted with thanks from a data compilation created by Darkness to Light.