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SUMMARY

RISK FACTORS FOR VIOLENT VICTIMIZATION
OF WOMEN: A PROSPECTIVE STUDY

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RISK FACTORS FOR VIOLENT VICTIMIZATION OF WOMEN: A PROSPECTIVE STUDY

Investigations into the causes of violence against women have generally pursued one of two different tracks, focusing on either the behavior of perpetrators of violence or on risk factors among the victims. As the National Research Council's (NRC) report on violence against women noted, far less is known about the latter than the former (Crowell & Burgess, 1996). This may be attributable in part to a reluctance to engage in research that might appear to be "blaming the victim" for her victimization. Indeed, the responsibility for violence perpetrated against women properly rests with the assailant. However, the prevalence of this aggressive behavior and the consequences that ensue dictate that all aspects of the dynamics of violence against women should be investigated. As Koss and Dinero (1989) have suggested, the question of whether there are certain risk factors which heighten vulnerability to victimization should be studied, particularly if such research can more effectively target prevention and intervention efforts. Identification of potential vulnerabilities to victimization need not take the form of blaming the victim, but rather can be the first step in arming women with knowledge that may lead to preventive strategies.

Factors that might increase women's vulnerability to adult sexual victimization or domestic violence (physical assault by an intimate partner) have been explored in numerous studies, and a history of child sexual abuse has been of interest in a number of these. Many studies have found that women who have been sexually victimized as adults are more likely to report that they were sexually abused as children than those who have no adult history of sexual victimization and that reported child sexual abuse survivors are at increased risk of adult victimization.

Investigations into a possible link between sexual victimization in childhood and becoming a victim of domestic violence have been more limited and less conclusively demonstrate a relationship between the two. Nevertheless, many of the outcomes associated with child sexual abuse may well be related to antecedents of a vulnerability to subsequent victimization. The mediating variables that would explain such a relationship are not well understood and clearly merit further investigation as a means of furthering our understanding of the dynamics of violence against women.

Although findings provide some evidence supportive of the notion that child sexual abuse is a risk factor for subsequent victimization, the research that has been conducted on the linkages between the two has several limitations. First, the survey samples utilized in most research are drawn from college or clinical populations. Minorities are under represented in both types of samples. Second, several studies lack control groups, which limits the extent to which the independent contribution of child sexual abuse to the outcomes examined can be assessed. Finally, most of the research has been based on surveys utilizing retrospective reports of abuse elicited from adults. Retrospective studies rely on adult recall of victimization in childhood, but such recall is subject to error and forgetting. In addition it is also possible that child sexual abuse does not increase the risk of adult victimization. Rather, adults who have been raped simply may be more likely than other women to recall and report incidents of childhood sexual abuse.

Much of the theorizing about the etiology of revictimization of child abuse survivors has focused on the role of learned behavior and assumes that women learn to be submissive or

helpless as a result of their early childhood experiences or that women's self-esteem is adversely affected by those experiences, which in turn places them at risk of involvement with abusive men.

In the research reported here we theorized that what may link child abuse survivors to an increased risk of later victimization are situational determinants that may thrust the women into environments of danger where the risk of revictimization is high. Prior research has shown that such determinants may include alcohol abuse and having numerous sexual partners in adolescence and adulthood. We also theorized that women who exhibit an aggressive orientation would be at increased risk of violent victimization. In addition, a child abuse victim's family situation, an unstable family structure, harsh punishment, or witnessing violence may play a significant role in determining the child's subsequent development of the aforementioned risk factors as well as of the risk of victimization.

Our research is a secondary analysis of data from interviews with women with contemporaneously documented histories of child sexual abuse and with a matched comparison group of women with no documented abuse. The interviews were part of the second and third wave of a prospective longitudinal study that began, under the direction of one of the authors, in 1973. Our current work addresses the question of whether women who were sexually abused as children are at increased risk of sexual abuse in later life or of domestic violence victimization. We also have investigated the role of other potential risk factors, including family background, sexual behavior, alcohol problems and a woman's own aggressive behavior.

Our hypotheses were tested using data from interviews conducted with 174 women during wave 3 of the study and with data drawn from interviews of 80 women interviewed during both

waves 2 and 3. In all cases, the effect of potential risk factors was evaluated controlling for familial background factors.

Analysis of the data produced the following results:

We found that the relationship between abuse suffered in childhood and later adult victimization is complex. The simple fact of being sexually abused in childhood was not associated with a higher risk of adult victimization of either type (sexual assault or domestic violence). However we found that some women who were sexually abused in childhood were further sexually victimized in adolescence. It is these women who were sexually abused both as children (below the age of 13) and as teenagers who had increased risk of revictimization as an adult.

Women who were sexually abused "only" as adolescents were not at a significantly higher risk of victimization relative to the other women in the sample. Only the combination of child sexual abuse and adolescent abuse led to the heightened risk of adult victimization.

That is not to say that women who experienced sexual abuse "only" before the age of 13, or who experienced no child sexual abuse for that matter, were immune from victimization. Rates of reported adult sexual victimization and violence perpetrated by an intimate partner were quite high. Women who reported no childhood sexual victimization had the lowest prevalence rates for both sexual and domestic violence victimization in adulthood, but 28% of them reported having been sexually victimized as adults and 60% reported experiencing at least minor violence perpetrated by an intimate partner.

As we had hypothesized, situational variables related to a woman's sexual behavior also increased the risk of adult sexual abuse. Specifically, having multiple sexual partners significantly increased the risk of such victimization. Alcohol abuse was also a statistically significant factor in predicting increased risk of adult sexual victimization but not of physical assault by a woman's partner.

Women who were victimized in both childhood and adolescence - the "double victims," so to speak - differed from the other women in important ways that could also have contributed to their later behavior. The "double victims" were significantly more likely than others to have reported that they were beaten by their mothers. The "double victim," high risk girls in the current study were more likely to have had a boyfriend earlier than others and to have started drinking at an earlier age. They were also more likely to have engaged in at least two delinquent behaviors: running away and prostitution before the age of 18. The latter behavior of course could have been a consequence of their running away, because they may have had few legitimate resources on which to survive. In the multivariate analyses, running away was one of only two factors that significantly increased the odds of becoming a "double victim."

The other significant factor that emerged from the multivariate analyses examining the risk of adolescent revictimization was whether a woman's mother had been arrested when the woman was a child or teenager. Nearly half (48%) of the "double victims" reported that their mothers had been arrested, which represents an extremely high rate for women, one that was 6.8 times greater than that for the mothers of the women not abused as children. Such high arrest rates could mean as well that the women in this group were separated from their mothers at some time

due to the mother's incarceration, which may account in part for the significantly greater number of living situations and childhood caretakers the women reported having. Even absent a period of incarceration, it seems likely that women with such high arrest rates must have exhibited behaviors that contributed to inconsistent parenting, which may account for the significantly higher scores of their daughters on the scale measuring neglect. Despite the significance at the bivariate level of the markers of family instability, neglect and violence, the effect of the mother's arrest was so strong that none of the other measures related to a woman's family of origin remained statistically significant in multivariate analyses, although harsh physical discipline did remain in the model.

Women who reported engaging in aggressive behavior themselves were at increased risk of being severely abused by their partner. Although perpetrating violence against her partner was strongly associated with a woman's own domestic violence victimization, caution should be used before concluding that this is a risk factor for victimization since much of the violence the women reported perpetrating no doubt involved self-defense. For example, among those who reported using force against their partner, 38% reported that they were *never* the first to use force and 40% said that when they did use force, they did so all or most of the time in order to protect themselves from what they perceived as harm their partner might inflict. Furthermore, among those who were victims of severe domestic violence, only 27% reported that they initiated violence most or all of the time; more than 4 in 10 women (44%) said they never initiate violence. More than half (52%) of the victims of severe domestic violence reported that, of the times they did use force against their partner, they did so to protect themselves from force by him all or most

of the time and only 5% said their own use of force was never caused by a need to protect themselves. Future research needs to examine more closely the dynamics of actual physically violent episodes between partners in order to better understand the processes of initiation, motivation and escalation of violence and the role each partner plays in these processes.

Noting that women are themselves aggressive on occasion, that such aggression is not always self-defensive and that such aggressive behavior is associated with an increased risk of partner violence does not absolve men of the responsibility for the harm they inflict, nor should it be interpreted as blaming the victim for her victimization. Rather, such behavior by young women should serve as a warning sign for parents, educators and others who might observe it. Early signs of such behavior can be an opportunity to intervene and educate women on the risks they face if they utilize aggressive behavior as a means of resolving conflict.

This research supports focusing attention on risk factors that may have important implications for those working with young female victims of sexual abuse. While some victims will prove to be relatively resistant to further victimization, others are at risk of repeat sexual and physical victimization during both adolescence and early adulthood. Intervening with child victims to reduce their risk for victimization in adolescence may have an important impact in reducing later adult revictimization and should be a primary concern of treatment providers.

Our sample was comprised chiefly of low-income, urban, predominantly African-American women, who are not a representative sample of the general population. Thus, the ability to generalize from the current findings is limited. Nevertheless, the results do provide important

information on a group of women and girls that has heretofore been largely overlooked in the research on victimization.

Much remains to be learned about factors in the lives of women that may place some of them at risk of victimization by men. The current study found that while a portion of the women who were sexually abused as children were at risk of revictimization throughout their life, others were not. The challenge to researchers and practitioners will be to uncover more about the complex pathways that lead to resistance or vulnerability so that effective interventions can be appropriately targeted.

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