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Child Abuse & Neglect



Men's and women's childhood sexual abuse and victimization in adult partner relationships: A study of risk factors[☆]

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ARTICLE INFO

Article history:
Received 14 March 2006
Received in revised form 4 November 2008
Accepted 13 April 2009

Keywords: Child sexual abuse Partner violence Victimization Risk factors

ABSTRACT

Objectives: (1) Document the prevalence of childhood sexual abuse (CSA), childhood physical assault, psychological, physical and sexual intimate partner violence (IPV) in a nationally representative sample. (2) Assess the predictive value of CSA and other characteristics of the respondents and their current partners as potential risk factors for IPV. (3) Assess factors predicting IPV in adulthood in a subsample of women reporting CSA.

Methods: The role of CSA as a risk factor for adult IPV was examined using data from the 1999 Canadian General Social Survey. A national stratified sample of 9170 women and 7823 men with current or previous partners were interviewed by telephone by Statistics Canada. Multiple logistic regressions were used.

Results: CSA consistently predicted IPV for women and men, although this relationship was weaker for men. Age, current marital status and limitations due to physical or mental condition or chronic illness were also predictors of IPV for men and women. For women reporting CSA, age (being younger) or being in a more recent relationship and being limited due to either physical, mental conditions or chronic illness were predictive of adult victimization.

Conclusions: These findings indicate that CSA is associated with a greater risk of IPV beyond sociodemographic risk factors.

Practice implications: To prevent IPV in women already at risk because of CSA, education about protective strategies seems important, particularly for women with physical or mental limitations, in the beginning stages of intimate relationships or for women with partners who drink excessively.

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Introduction

Being victimized by an intimate partner in adulthood following childhood sexual abuse (CSA) entails an accumulation of the deleterious effects associated with both these victimizations (Arata, 1999; Banyard, Williams, & Siegel, 2001; Casey & Nurius, 2005; Classen, Palesh, & Aggarwal, 2005; Hébert, Lavoie, Vitaro, McDuff, & Tremblay, 2008). To guide the development of prevention programs for intimate partner violence (IPV), research is needed to identify factors linked (a) to adult victimization and (b) to an increased risk of victimization in adulthood among CSA survivors (Desai, Arias, Thompson, &

The Centre de recherche interdisciplinaire sur les problèmes conjugaux et les aggressions sexuelles (CRIPCAS) [Interdisciplinary research center for conjugal problems and sexual abuse] and the Quebec Inter-University Center for Social Statistics (QICSS) provided financial support as postdoctoral fellowships to the first author.

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Basile, 2002). In this regard, it has been shown that women and adolescents reporting a history of sexual abuse in childhood, adolescence or adulthood do not benefit as much from participation in sexual assault prevention programs when compared to women and adolescents without such a history (Feltey, Ainslie, & Geib, 1991; Hanson & Gidycz, 1993). Thus, identifying factors related to an increased risk of IPV for both men and women with and without a history of CSA, may lead to the development of more effective prevention programming. This study aims to determine which risk factors are related to multiple types of IPV using a nationally representative sample of 16,993 Canadian men and women.

Literature review

The literature identifies four types of studies that have explored risk factors predicting IPV: (1) CSA as a risk factor for adult sexual assault or (2) multiple types of IPV, (3) other risk factors for multiple types of IPV and (4) risk factors for adulthood IPV among individuals reporting CSA.

CSA as a risk factor for adult sexual assault

The vast majority of recent empirical studies provide evidence that sexual assault following CSA occurs in diverse populations of women, and that CSA increases the risk of sexual victimization in late adolescence and adulthood, including rape and sexual assault from an intimate partner (Black, Heyman, & Slep, 2001; Coid et al., 2001; Fergusson, Horwood, & Lynskey, 1997; Maker, Kemmelmeier, & Peterson, 2001; Merrill et al., 1999; Noll, Horowitz, Bonanno, Trickett, & Putnam, 2003; Stermac, Reist, Addison, & Millar, 2002; Tyler, Hoyt, & Whitbeck, 2000; Zanarini et al., 1999). Two out of three women reporting CSA also report sexual victimization in adulthood (Classen et al., 2005), and some evidence suggests that this increased risk is also present for men (Desai et al., 2002).

CSA as a risk factor for multiple types of IPV

Recent data also suggest that CSA is associated with an increased risk of later physical or psychological IPV (Coid et al., 2001; DiLillo, Giuffre, Tremblay, & Peterson, 2001; Whitfield, Anda, Dube, & Felitti, 2003). Studies reveal moderate to strong relationships between unwanted sexual intercourse in childhood and later domestic violence (Coid et al., 2001), psychological aggression (Banyard, Arnold, & Smith, 2000), physical violence within romantic relationships (Banyard et al., 2000; Desai et al., 2002; DiLillo et al., 2001; Whitfield et al., 2003) and other types of adult physical and psychological abuse (Messman-Moore & Long, 2000). However, the potential role of CSA in increasing the risk of nonsexual IPV, especially psychological violence, has not been sufficiently studied. Moreover, few reports have investigated the link between CSA and later victimization of men. Only Desai et al. (2002) have addressed this issue in a nationally representative sample of men. They report that men who were sexually abused in childhood face a twofold increased risk of being physically abused by an intimate partner compared with men not sexually abused in childhood.

Other risk factors for multiple types of IPV

Sociodemographic factors have also been examined and appear related to an increased occurrence of IPV, regardless of the presence of CSA. Results show that being female, being younger, being from an ethnic minority, having less education, being of low socioeconomic status, being unemployed and presenting limitations in everyday activities increase the risk of IPV (Acierno, Resnick, & Kilpatrick, 1997; Black et al., 2001; Cohen, Forte, Du Mont, Hyman, & Romans, 2006; Field & Caetano, 2004; Forte, Cohen, Du Mont, Hyman, & Romans, 2005; Schumacher, Feldbau-Kohn, Slep, & Heyman, 2001; Schumacher, Slep, & Heyman, 2001). Factors increasing the likelihood of men physically assaulting their intimate partner are the men's younger age, lower education level, unemployment, lower income, ethnic minority, history of childhood victimization and psychological variables such as alcohol and drug use (Field & Caetano, 2004; Langhinrichsen-Rohling, 2005; Schumacher, Feldbau-Kohn, et al., 2001). These results apply to the general population, not specifically to survivors of CSA. Moreover, these results usually only predict physical IPV, while psychological and sexual IPV have rarely been explored. Several questions thus remain. What are the additional risks of IPV for individuals known to already be at risk because of previous CSA? Do the same sociodemographic factors significantly predict their risk of psychological, physical or sexual IPV?

Other risk factors for multiple types of IPV following CSA

In analyzing risk factors for sexual revictimization among individuals reporting CSA, intrapersonal factors, such as victim's alcohol and drug use, have typically been considered, while factors external to the victim, such as characteristics of the perpetrator, have been neglected (Messman-Moore & Long, 2003). Childhood physical abuse and sexual abuse that occurred later in life (adolescence vs. childhood) seem to be associated with higher risks of sexual revictimization, and preliminary evidence also suggests that membership in some ethnic groups places an individual at a greater risk of sexual revictimization (Classen et al., 2005). In addition, Noll et al. (2003) report that being older is associated with increased risk of both physical assault and sexual revictimization following CSA for

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