



CWHS

Data Points

RESULTS FROM THE 2005 CALIFORNIA WOMEN'S HEALTH SURVEY

Sexual violence (SV) was not always considered a public health problem. Most intervention programs fell under the category of crime prevention. But SV is not just a single traumatic episode, and it is more than simply a crime. SV is a broader social and health problem that includes incest, child sexual abuse, rape, and other abusive behaviors. Researchers are now finding that adverse childhood events such as sexual abuse lead to a range of emotional and health consequences for the victims, including chronic diseases,¹ emotional and functional disability,² a tendency to engage in harmful behaviors,³ and difficulties in intimate relationships.⁴ Women who were raped before age 18 are also more likely to be raped again as adults.⁵

Stopping SV is critical to preventing these long-term consequences. Public health surveillance plays an important role by describing how often SV occurs and who is most at risk. Unfortunately, data on SV is difficult to obtain, because rape is highly underreported: data from the United States Department of Justice indicate that only 36 percent of rapes and sexual assaults were reported to law enforcement in 2004.⁶

The California Women's Health Survey (CWHS) provides a valuable data source to examine the problem of SV. In 2001-2005, the California Department of Social Services sponsored two questions that asked respondents whether anyone had: "...forced you into unwanted sexual activity by using force or threatening to harm you since the age of 18," or

"...forced you into unwanted sexual activity by using force or threatening to harm you before the age of 18."

In 2005, the California Department of Health Services, EPIC Branch, Rape Prevention and Education Program added a question to the survey that asked respondents whether any forced sexual activity since age 18 occurred in the previous 12 months.

In 2005, 4,023 women responded to these survey questions. The data were weighted to the California population for age and race/ethnicity based on the 2000 Census. Incomplete surveys were excluded.⁷

Responses indicating that SV had occurred in childhood and adulthood were not mutually exclusive (respondents could answer "Yes" to both questions). Responses were combined to show how many respondents had been forced to have sex at any point during their lives.

Were you forced to have sex ...	"Yes"	Estimated Number of California Women
as a child?	11%	1,166,000
as an adult?	10%	1,120,000
sometime in your life?	17%	1,862,000
in the past 12 months?	0.7%	71,000

Black/African American women reported the highest rate of SV during childhood (19 percent), followed by Whites (11.6 percent), Hispanics (9.2 percent), and Asians/Others (6.7 percent). Similarly, Black/African American women reported the highest rate of SV in adulthood (14.7 percent), followed by Whites (11.4 percent), Asians/Others (8.8 percent), and Hispanics (7.8 percent). Asian/Other women were the only race/ethnicity group who reported higher rates of SV during adulthood than during childhood.

Sexual Violence in California, 2005

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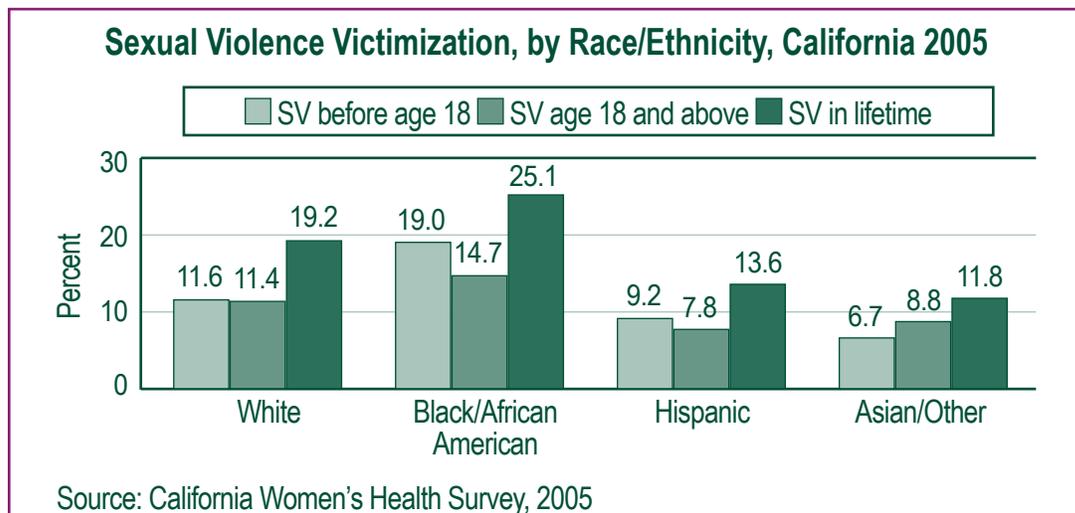
Public Health Message:

Nearly one in six California women reports having suffered sexual violence. This means that nearly two million California women victimized by SV are at risk of the severe physical and emotional health consequences of this violence. Surveillance data from sources such as the CWHS are crucial for understanding the dimensions of this threat to women's well-being. Knowledge about who is at highest risk provides the basis for policies that can alleviate the threat of SV. Such findings represent a small step in the direction of revealing a large, but largely hidden, public health problem.

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Overall, these findings are consistent with studies in other times and places. In California as elsewhere, SV threatens the health and well-being of females regardless of race, ethnicity or age.



- 1 Felitti VJ, Anda RF, Nordenberg D, et al. Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults. The Adverse Childhood Experiences (ACE) Study. *Am J Prev Med* 1998;14(4):245-258.
- 2 Walker EA, Gelfand A, Kelfand A, et al. Adult health status of women with histories of childhood abuse and neglect. *Am J Med* 1999;107(4):332-339.
- 3 Dube SR, Anda RF, Whitfield CL, et al. Long-term consequences of childhood sexual abuse by gender of victim. *Am J Prev Med* 2005;28(5):430-438.
- 4 Fleming J, Mullen PE, Sibthorpe B, Bammer G. The long-term impact of childhood sexual abuse in Australian women. *Child Abuse Negl* 1999;23(2):145-159.
- 5 Tjaden P, Thoennes N. *Extent, Nature, and Consequences of Rape Victimization: Findings from the National Violence Against Women Survey*. Bureau of Justice Statistics, Washington, DC: US Department of Justice; 2006.
- 6 Catalano SM. *Criminal Victimization, 2004*. Bureau of Justice Statistics. National Crime Victimization Survey. Washington, DC: US Department of Justice. Government Printing Office; 2005. Publication No. NCJ210674. <http://www.ojp.usdoj.gov/bjs/pub/pdf/cv04.pdf>.
- 7 Incomplete surveys accounted for 13 percent of the total sample, representing about 1.7 million California women. The vast majority of incomplete surveys lacked SV data, but those that did were more than 30 percent more likely to have positive answers for the SV questions than the completed surveys. It is reasonable to conclude that women who did not complete the survey were more likely to have been sexually victimized.

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