

Psychological and Sexual Health Outcomes of Female Survivors of Sexual Intimate Partner Violence

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INTRODUCTION

One in four of ever-partnered women and girls experienced physical and/or sexual intimate partner violence in their lifetime. Among ever-partnered American women, the median prevalence of lifetime physical and/or sexual intimate partner violence was between 25 to 29% (Sardinha et al., 2018).

Definitions

- **Intimate partner violence (IPV)** refers to the physical, sexual, psychological, and emotional abuse perpetrated by a current or former partner.
- **Sexual intimate partner violence** involves physical and/or non-physical (e.g., coercion) force and submission into nonconsensual sexual intercourse and/or humiliating/degrading sexual acts. (Sardinha et al., 2018).

Psychological Adjustment Outcomes

Post-traumatic stress disorder, anxiety, and depression are among the most frequently identified mental health outcomes among survivors of IPV.

- Women who experienced IPV were 3.26 times more likely to develop Major Depressive Disorder (MDD) (Bonomi, Anderson, Reid et al., 2009).
- Physical and psychological forms of IPV were more likely associated with depression than sexual IPV (White et al., 2024).

Sexual Health Outcomes

Female survivors of IPV were 1.5 to 6 times more likely of having a sexually transmitted disease (STD) than their non-abused counterparts (Gonzalez-Guarda et al., 2021).

Survivors of physical IPV were more likely to contract an STD (specifically including gonorrhea, chlamydia, and trichomoniasis) than non-abused women (Hess et al., 2013).

- Sexually victimized women were less likely to contract an STD.

PRESENT STUDY

The present study focused on the impact of experiences of sexual intimate partner violence on the prevalence of depression *diagnosis* and sexually transmitted disease (STD) *diagnosis*.

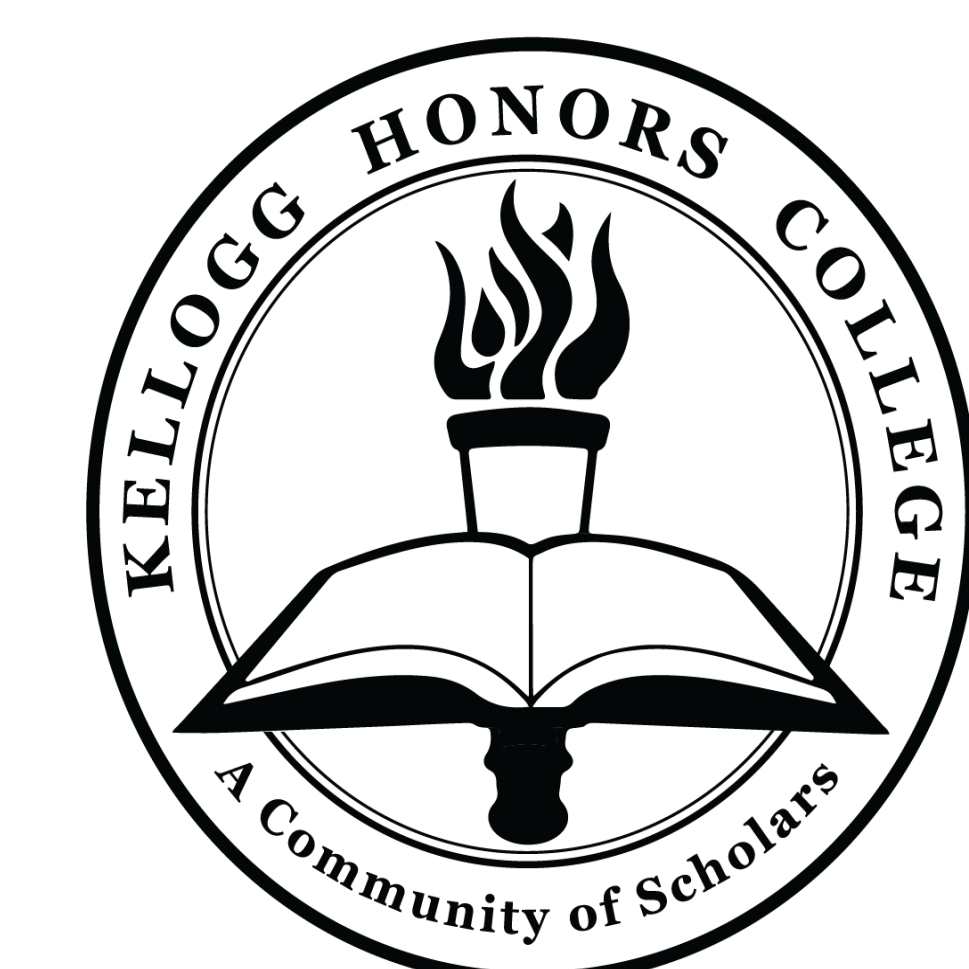
METHODS

- Wave IV data from the National Longitudinal Study on Adolescent to Adult Health (Add Health) was used in this study.
- 2761 woman-identified participants (aged 24-32)

Women who experience sexual intimate partner violence are at higher risk of being diagnosed with depression and STDs (gonorrhea, chlamydia, & HPV) than non-abused women.



RACE OF FEMALE PARTICIPANTS	SEXUAL IPV EXP (%)
WHITE (N=1616)	24.8%
BLACK./AFRICAN AMERICAN (N=597)	17.1%
NATIVE AMERICAN (N=100)	24.0%
ASIAN/PACIFIC ISLANDER (N=96)	16.7%
HISPANIC (N=232)	23.7%



RESULTS				
	No IPV	Non-Phy IPV	Phy IPV	Both
No Depression diagnosis (N=2158)	81% (+)	8% (-)	2%	9% (-)
Depression diagnosis (N=591)	60% (-)	15% (+)	5% (+)	20% (+)
Female survivors of sexual IPV were proportionally more likely to be diagnosed with depression compared to women who did not experience sexual violence, $\chi^2(3)= 114.035$, $p < 0.001$.				
+ Standardized residual (z) is greater than 2.0: these indicate a greater proportion of individuals than expected in cell - z is less than -2.0: these indicate a smaller proportion of individuals than expected for the cell				
	No IPV	Non-Phy IPV	Phy IPV	Both
No Chlamydia diagnosis (N=2305)	78%	9%	3%	10%
Chlamydia diagnosis (N=405)	68% (-)	8%	5% (+)	19% (+)
Female survivors of sexual IPV were proportionally more likely to be diagnosed with chlamydia compared to women who did not experience sexual violence, $\chi^2(3)= 34.289$, $p < 0.001$.				
	No IPV	Non-Phy IPV	Phy IPV	Both
No Gonorrhea diagnosis (N=2594)	78%	9%	3%	11%
Gonorrhea diagnosis (N=116)	60% (-)	6%	8% (+)	27% (+)
Female survivors of sexual IPV were proportionally more likely to be diagnosed with gonorrhea compared to women who did not experience sexual violence, $\chi^2(3)= 40.368$, $p < 0.001$.				
	No IPV	Non-Phy IPV	Phy IPV	Both
No HPV diagnosis (N=2408)	78%	8%	3%	11%
HPV diagnosis (N=302)	66% (-)	16% (+)	3%	16% (+)
Female survivors of sexual IPV were proportionally more likely to be diagnosed with HPV compared to women who did not experience sexual violence, $\chi^2(3)= 30.334$, $p < 0.001$.				

DISCUSSION

- Sexual IPV (be it physically forced, non-physically forced, and especially both) results in psychological and sexual effects to women's health. This includes sexually transmitted diseases (chlamydia, gonorrhea, and HPV) and the development of psychological disorders.
- Because experiences of sexual IPV can result in serious health concerns, it is important to reduce violence in our culture to ensure safety and better health for women.
- Because participants were mostly white, future research could focus on non-white female populations and how sexual IPV impacts health outcomes.