

## MENTAL HEALTH CONSEQUENCES OF CRIME

- **Crime victims show much higher rates of Posttraumatic Stress Disorder (PTSD) than people who have not been victimized by crime.**
  - Research shows that 25% of crime victims experienced lifetime PTSD and 9.7% had current PTSD, compared to rates of 9.4% lifetime PTSD and 3.4% current PTSD for noncrime victims.<sup>1</sup>
  - Rape victims are 6.2 times more likely to develop PTSD than women who have never been victims of crime.<sup>2</sup>
  - 26.5% of women and 12.6% of men who were molested developed PTSD later in life.<sup>3</sup>
  - 11% of students in New York City had PTSD six months after the September 11<sup>th</sup> attacks, 5 times the rate of PTSD found in students outside of NYC.<sup>4</sup>
- **Victimized children suffer long-term psychological consequences.**
  - Molestation victims have significantly higher rates of major depressive disorder, obsessive compulsive disorder, and sexual disorders than their age-matched counterparts.<sup>5</sup>
  - Child victims of sexual assault often show developmental impairments including aggression, low self-esteem, cognitive deficits, and behavioral disorders.<sup>6</sup>
  - Children who have been abducted develop psychological symptoms that tend to increase rather than decrease over time.<sup>7</sup>
  - Twenty years after the abuse, women victims of child maltreatment were significantly more likely than nonvictims to evidence aggressive behaviors, PTSD, substance abuse, poorer academic and intellectual outcomes, and personality disorders.<sup>8</sup>
  - Women with a history of childhood sexual abuse tend to become depressed at an earlier age and are more likely to attempt suicide and to engage in deliberate self-harm compared to depressed women who were not exposed to childhood sexual abuse.<sup>9</sup>
- **Victims suffer from a wide range of mental health issues.**
  - In a national study of adult women, 55% of aggravated assault victims met the diagnostic criteria for major depression.<sup>10</sup> Rape victims were three times more likely than non-victims of crime to have ever had a major depressive episode.<sup>11</sup>
  - Battered women are five times more likely to attempt suicide, fifteen times more likely to abuse alcohol, four times more likely to abuse drugs, and three times more likely to be diagnosed as depressed or psychotic.<sup>12</sup>
  - 94.4% of 391 women meeting criteria for panic disorder were found to have a history of victimization.<sup>13</sup>
- **The mental health impact extends beyond the victim.**

- Among immediate family members of homicide victims, 23.3% developed PTSD at some point in their lives.<sup>14</sup>
- Homicide survivors also experience elevated levels of depression and anxiety compared to the general population.<sup>15</sup>
- **As the cost and use of mental health services continue to rise, victims struggle to pay for mental health services.**
  - 12% of all victim compensation payments in 2003 went toward mental health counseling for crime victims, totaling over \$53 billion.<sup>16</sup>
  - Roughly one third of mental health care bills for rape, physical assault, and stalking victims were paid for out-of-pocket.<sup>17</sup>

<sup>1</sup> Kilpatrick, D. and R. Acierno. (2003). Mental health needs of crime victims: Epidemiology and outcomes. *Journal of Traumatic Stress*, **16**(2): 119-132.

<sup>2</sup> National Violence Against Women Prevention Research Center. (2000). *The Mental Health Impact of Rape*. Charleston, SC: Medical University of South Carolina.

<sup>3</sup> Ibid.

<sup>4</sup> Cloitre, M. (2002). *Lessons Learned in 9/11: Considerations in the Development of School-Based Interventions Following Large Scale Violence*. National Center for Posttraumatic Stress Disorder. *Clinical Quarterly*, **11**(3).

<sup>5</sup> Saunders, B.E., Villeponteaux, L.A., Lipovsky, J.A., Kilpatrick, D.G. & Veronen, L.J. (1992). Child sexual assault as a risk factor for mental disorders among women: A community survey. *Journal of Interpersonal Violence*, **7**: 189-204.

<sup>6</sup> Ibid.

<sup>7</sup> Ibid.

<sup>8</sup> Arias, I. (2004). The legacy of child maltreatment: Long-term health consequences for women. *Journal of Women's Health*, **13**(5): 468-473.

<sup>9</sup> Gladstone, G., Parker, G., Mitchell, P., Malhi, H., Wilhelm, K., & Austin, M. (2004). Implications of childhood trauma for depressed women: An analysis of pathways from childhood sexual abuse to deliberate self-harm and revictimization. *American Journal of Psychiatry*, **161**: 1417-1425.

<sup>10</sup> Hanson, R., Kilpatrick, D., Falsetti, S., & Resnick, H. (1995). "Violent Crime and Mental Health" in *Traumatic Stress: From Theory to Practice* (New York: Plenum), 129-61.

<sup>11</sup> Ibid.

<sup>12</sup> Stark, E. and A. Flitcraft. (1996). *Women at Risk: Domestic Violence and Women's Health*. (Thousand Oaks, CA: Sage Publications).

<sup>13</sup> Falsetti, S.A., Resnick, H.S., Dansky, B.S., Lydiard, R.B., & Kilpatrick, D.G. (1995). The relationship of stress to panic disorder: Cause or effect. In C.M. Mazure (Ed.), *Does stress cause psychiatric illness?* (pp. 111-147). Washington, DC: American Psychiatric Press.

<sup>14</sup> Amick-McMullan, A., Kilpatrick, D.G., & Resnick, H.S. (1991). Homicide as a risk factor for PTSD among surviving family members. *Behavior Modification*, **15**(4): 545-559

<sup>15</sup> Thompson, M., Norris, F., & Ruback, R. (1998). Comparative Distress Levels of Inner-City Family Members of Homicide Victims. *Journal of Traumatic Stress*, **11**: 223-42.

<sup>16</sup> National Association of Crime Victim Compensation Boards. (2004). *Compensation to Victims Continues to Increase*. Alexandria, VA: NACVCB. Online: <http://www.nacvcb.org>.

<sup>17</sup> National Center for Injury Prevention and Control. (2003) *Costs of Intimate Partner Violence Against Women in the United States*. Atlanta, GA: Centers for Disease Control and Prevention.