

NEDS ANALYTIC SUMMARY

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Highlights

Clients who had been physically and/or sexually victimized (73% of sample) had poorer treatment outcomes than clients with no history of abuse.



Impact of Prior Physical and Sexual Victimization on Substance Abuse Treatment Outcomes



NEDS Analytic Summary Series

The Center for Substance Abuse Treatment (CSAT) works to improve the lives of those affected by alcohol and other substance abuse, and, through treatment, to reduce the ill effects of substance abuse on individuals, families, communities, and society at large. Thus, one important CSAT mission is to expand the knowledge about effective substance abuse treatment and recovery services. In support of these efforts, CSAT established the National Evaluation Data Services (NEDS) contract to provide a wide array of secondary data analysis products to the substance abuse treatment field.

Specifically, the NEDS project is focused upon providing CSAT with an analytic capability to use existing data to address policy- and practice-relevant topics as well as future research and evaluation activities. NEDS has developed several product lines designed to provide analytic findings to substance abuse treatment policy makers, service providers, services researchers and evaluators in a format that is most useful to the end user.

The Analytic Summary is one of the NEDS product lines. The purpose of the Analytic Summary is to provide a brief summary of each technical report produced by NEDS written in non-technical language. Readers who find the Analytic Summary results of interest can contact the original NEDS technical report authors for more detailed information. Through this process, the NEDS Analytic Summaries provide information to the substance abuse treatment field and promote linkages among different areas in the field.

This Analytic Summary

This NEDS Analytic Summary is based on the NEDS Technical Report titled *Impact of Prior Physical and Sexual Victimization on Substance Abuse Treatment Outcomes* (Orwin, R., Maranda, M., and Brady, T., February 2001). For a more thorough discussion of the analysis and findings, please obtain a copy of the complete Technical Report. Information for doing so is provided on the last page of this summary.

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Impact of Prior Physical and Sexual Victimization on Substance Abuse Treatment Outcomes

Analytic Importance

One important function of CSAT is to expand the knowledge about, and the availability of, effective treatment and recovery services for those affected by alcohol and other substance abuse. In sponsoring these analyses of the data they have collected, CSAT is attempting to gain useful insight into the fundamental question: *What constitutes effective (and cost-effective) treatment, and for what populations?*

Many substance abusers are also victims of physical and/or sexual abuse. Previous research has indicated that substance-abusing men and women both experience high rates of physical abuse, and that women are more often sexually victimized than are men. Victims of violence may present with special needs, such as the need to deal with psychological trauma from the physical/sexual abuse, in order to achieve successful substance abuse treatment outcomes.

Analytic Purpose

This analysis examines the prevalence of physical and sexual victimization among clients before they entered substance abuse treatment in the National Treatment Improvement Evaluation Study (NTIES) and the impact of prior victimization on treatment outcomes. The analysis compares both men and women in five treatment modalities: methadone, non-methadone outpatient treatment, short-term residential treatment, long-term residential treatment, and treatment facilities located in correctional institutions.

Three key analytic questions were addressed:

- What proportion of clients had a history of physical and sexual victimization and how did this vary by gender and modality?

- Did a history of physical and/or sexual victimization negatively influence the outcomes of substance abuse treatment?
- How did the effects of physical and/or sexual victimization vary by gender and treatment modality?

Two other analytic summaries in the NEDS series focus on the issue of substance abuse and violence. Analytic Summary 17, *The Effectiveness of Substance Abuse Treatment in Reducing Violent Behavior*, addresses the association between substance abuse and violence, both as a perpetrator and as a victim, among clients entering treatment, and the impact of treatment on reducing violent behaviors.

Analytic Summary 19, *Physically and Sexually Abused Women in Substance Abuse Treatment*, compares women who experienced repeated abuse (physical, sexual, or both physical and sexual) to women who experienced a single instance of physical or sexual abuse prior to treatment.

Analytic Approach

This analysis investigates the relationship between pre-treatment physical and sexual abuse and treatment outcomes. Of the 4,411 clients in the NTIES outcome sample, 4,405 clients responded to questions about physical victimization, and 4,379 clients responded to questions about sexual victimization at intake to treatment. Information on clients' substance use, criminal behaviors, employment status, income, housing, risk behaviors, and other psychosocial factors was collected at intake, during treatment, and at post-treatment follow-up about one year after treatment.

This analysis addressed three questions:

- **What proportion of clients had a history of physical and sexual victimization?**
- **Did prior victimization adversely affect treatment outcomes?**
- **How did the effects of victimization vary by gender and treatment modality?**



Impact of Prior Physical and Sexual Victimization on Substance Abuse Treatment Outcomes (cont.)

Previous physical and/or sexual victimization was determined in the NTIES baseline interview by the clients' responses to two questions:

- Altogether, how many times have you ever been attacked with a weapon or seriously beaten?
- In your lifetime, how many times altogether has anyone ever made you have any type of sex when you didn't want to by using force or by threatening to harm you or someone close to you? This might have happened to you either as a child or as an adult.

The NTIES interviewers recorded responses to each of these questions in seven categories (never, once, 2 to 5 times, 6 to 10 times, 11 to 20 times, 21 to 100 times, and more than 100 times). The reported frequency of victimization due to physical and sexual abuse was tabulated by gender across the entire analysis group and within each treatment modality.

The outcome measures included six severity scales created in the original NTIES analysis for:

- Drug use
- Alcohol use
- Medical status
- Psychiatric status
- Employment status
- Criminal behaviors.

Regression analyses were used to assess the relationships of prior victimization and treatment outcomes for the 10 gender-modality groups (men and women in 5 treatment modalities). The analysis controlled for the effects of pre-treatment severity for each outcome measure and whether or not the client had also been a perpetrator of violence.

Findings

There was a high prevalence of prior physical and/or sexual victimization among clients, and prior victimization was most strongly associated with poorer substance abuse treatment outcomes in regard to criminal behaviors, drug use, and medical status.

Prevalence of Physical and Sexual Victimization Among Clients at Admission

Most clients reported prior physical and/or sexual victimization. The majority of clients (73%) reported some kind of victimization at least once in their lifetime. Almost three-fourths (71%) reported being victims of physical violence, while approximately one-fifth (17%) reported sexual victimization.

The prevalence of physical and sexual abuse differed markedly by gender. At admission, men and women reported being physically and/or sexually victimized with varying frequency (see Exhibit 1).

- Although the majority of both men and women reported prior physical abuse, the proportion was higher for men (73%) than for women (66%).
- Men were more likely to report being physically abused than were women, but high frequencies of physical violence were more likely to be reported by women. One in 10 women reported being physically abused 21 or more times, compared to 4 percent of men.
- Far more women (42%) reported sexual victimization than did men (6%).

Most clients reported prior victimization:

- **Seven in 10 individuals reported physical abuse**
- **One in five individuals reported sexual abuse.**



Impact of Prior Physical and Sexual Victimization on Substance Abuse Treatment Outcomes (cont.)

Gender differences were noted in client history of victimization:

- For men, physical abuse was the most prevalent kind of victimization.
- For women, both physical and sexual abuse was the most common pattern.



Exhibit 1 Percent of Clients Reporting Physical and Sexual Abuse by Gender and Reported Frequency				
Reported Frequency	Men		Women	
	Physical (n=3,034)	Sexual (n=3,021)	Physical (n=1,371)	Sexual (n=1,358)
Never	27	94	34	58
Once	16	2	14	10
2-5 times	38	2	26	18
6-10 times	10	<1	9	5
11-20 times	5	<1	7	5
21 or more times	4	1	10	4

N=4,411. Missing: 6 cases for physical abuse, 32 cases for sexual abuse.

The proportion of victims of physical and/or sexual abuse varied across treatment modalities. The proportion of male and female respondents reporting physical abuse only, sexual abuse only, both physical and sexual abuse and no abuse for each of the five treatment modalities is shown in Exhibit 2.

- Physical abuse was the most prevalent kind of victimization for men across all modalities. The proportion of men who were physically abused ranged from 67 percent for men in outpatient and short-term residential settings to 72 percent for those in methadone treatment.
- The proportion of men who reported sexual abuse only never exceeded 1 percent, with another 4 to 8 percent reporting sexual abuse in addition to physical abuse.
- Regardless of modality, sexual abuse without some history of physical abuse was rare among the male clients.
- For women, the most common pattern of victimization was both physical and sexual abuse, except in methadone treatment where physical abuse was the most common (40% compared to 6% for sexual abuse

and 11% for both physical and sexual abuse). Women in methadone treatment had the highest percentage reporting no history of abuse for all gender-modality groups (43%).

- Long-term residential treatment had the largest proportion of women who were both physically and sexually abused (42%).

Regardless of modality, sexually abused persons of both genders tended to be physically abused as well.

Impact of Prior Victimization on Treatment Outcomes

Controlling for pre-treatment problem severity and whether the client was also a violent perpetrator, the analysis showed that clients who were victims of physical and/or sexual violence had less favorable substance abuse treatment outcomes on one or more measures than clients who were not victimized. Based on the number of gender-modality analysis groups (10 in all) significantly affected, the treatment outcomes most adversely affected by prior victimization were:

- Criminal behaviors (6 groups)
- Psychiatric status (4 groups)
- Drug use (3 groups)
- Medical status (2 groups).

Impact of Prior Physical and Sexual Victimization on Substance Abuse Treatment Outcomes (cont.)

Treatment outcomes most adversely affected by physical and/or sexual victimization were:

- Criminal behaviors
- Psychiatric status
- Drug use
- Medical status.



Exhibit 2 Percent of Clients Reporting Physical and Sexual Abuse by Gender and Modality								
Modality	Men				Women			
	Physical	Sexual	Both	Neither	Physical	Sexual	Both	Neither
Methadone n=286 M n=136 F	72	<0.5	4	24	40	6	11	43
Non-methadone outpatient n=1,116 M n=437 F	67	1	4	28	27	7	36	30
Short-term residential n=596 M n=421 F	67	1	8	24	30	5	36	20
Long-term residential n=411 M n=421 F	69	1	6	24	27	9	42	22
Correctional n=615 M n=92 F	68	1	4	27	35	2	40	23

Number and percent of non-missing cases for individuals reporting at least one incident of physical or sexual abuse prior to treatment. Each case is entered only once in this table. Respondents reporting both physical and sexual abuse were entered only in the column for both. Cases with missing data on abuse variables were not entered into the denominator for the percentages. Missing: outpatient non-methadone—5 males, 8 females; long-term residential—6 males, 3 females; correctional—2 males.

Alcohol use (1 group) and employment status (1 group) appeared to be less influenced by prior victimization.

Victims of physical abuse. The impact of physical victimization on treatment outcomes varied by gender and modality. Compared to same-sex clients in the same treatment setting who had not been physically victimized:

- Criminal severity was higher for abused men in all modalities except methadone maintenance and higher for abused women in short-term residential treatment
- Drug use was higher for women in methadone treatment
- Drug use and medical severity were higher for men in non-methadone

outpatient settings

- Psychiatric severity was higher for women in methadone and long-term residential facilities
- Employment status after treatment was lower for abused men in correctional settings.

Victims of sexual abuse. For women, prior sexual victimization was associated with poorer treatment outcomes, especially for women in long-term residential treatment. Compared to women in the same treatment setting who had not been sexually victimized these women had poorer treatment outcomes for:

- Alcohol use
- Drug use
- Criminal behaviors
- Psychiatric status.

Impact of Prior Physical and Sexual Victimization on Substance Abuse Treatment Outcomes (cont.)

Treatment outcomes most affected by physical victimization were among men rather than women for:

- Drug use
- Criminal behaviors
- Psychiatric status.

Treatment outcomes most affected by sexual victimization were among women rather than men for:

- Alcohol use
- Drug use
- Criminal behaviors
- Psychiatric status.



For men, prior sexual victimization had no significant impact on treatment outcomes. This may be because the rate of reported sexual victimization among men was low (6%) and the numbers were too small for the analysis to detect the effects. Men may be more reluctant to report sexual victimization than women, but the reported rates for both men and women in this analysis were probably low, given the higher rates typically found in the literature.

Victims of both physical and sexual abuse. The treatment outcomes most affected by both prior physical and sexual victimization varied by gender and modality. Compared to same-sex clients in the same treatment settings who had not been both physically and sexually victimized, victimized clients had less favorable treatment outcomes on:

- Alcohol use (men in short-term residential treatment; men in long-term residential treatment)
- Employment status (women in long-term residential treatment)
- Psychiatric status (women in short-term residential treatment; men in non-methadone outpatient treatment).

For clients who had experienced both physical and sexual victimization, there appeared to be no significant impact on employment outcomes for men or on the drug use, criminal behaviors or medical status outcomes for either men or women.

Outcomes varied across modalities by gender and by type of abuse. For women, higher numbers

of both physical and sexual abuse were significantly associated with poorer outcomes on one or more measures in the methadone, short-term and long-term residential modalities.

For men, higher numbers of physical abuse were significantly associated with poorer outcomes on one or more measures in the outpatient, short-term residential, long-term residential, and correctional modalities. Higher numbers of sexual abuse were not significantly associated with poorer outcomes in any modality for men.

Criminal outcomes were the ones most affected by prior victimization, with a significant impact noted in four of the five treatment modalities and across both genders.

Implications

This analysis suggests that clients who were victims of physical and/or sexual abuse may have less success in substance abuse treatment than clients who were not victimized. The implications of this analysis for further substance abuse treatment research, policy, and practice are discussed below.

Implications for Research

Implications for research include:

- **Design prospective studies to test effectiveness of treating clients with a history of physical/sexual abuse.** Studies are needed to test the effectiveness of different types of treatment strategies with different types of victimized clients. Interventions may include empowerment models, peer groups, building self-esteem, addressing trust issues, and forming therapeutic alliances.

Implications for research:

- **Design and test intervention strategies**
- **Assess severity of victimization**
- **Include longer follow-ups.**

Implications for policy:

- **Make mental health services available to victims of violence**
- **Support development of gender-specific treatment services.**

Implications for practice:

- **Train staff to assess prior physical/sexual trauma**
- **Identify and test women-only treatment components.**



Impact of Prior Physical and Sexual Victimization on Substance Abuse Treatment Outcomes (cont.)

- **Conduct studies that assess severity of victimization.** Future analyses should take into account the severity of incidence as well as the frequency of abuse in determining the need for additional services and in assessing the impact of victimization on treatment outcomes.
- **Conduct treatment evaluation with longer follow-up intervals.** Clients with and without a history of victimization may both improve in the short term, but improvements may deteriorate faster for victims of abuse, particularly if the abuse is ongoing.
- **Explore the role of post-traumatic stress disorder (PTSD) and its impact on treatment outcomes.** Individuals who have a history of victimization and who suffer from PTSD or other trauma-related disorders may need special treatment in addition to substance abuse treatment.

Implications for Policy

Victimization was found among three-fourths of the clients, and the analysis showed poorer treatment outcomes for clients who had been physically and/or sexually victimized than for clients with no history of abuse. The implications for policy are:

- **Assure availability of mental health services in substance abuse treatment.** Policies guiding substance abuse treatment services need to take into consideration the mental health needs of clients with a history of physical and/or sexual victimization.

- **Fund the development of gender-specific services for victims of violence.** Make provisions for the development of better assessment tools and interventions targeted to meeting the special needs of victims of prior abuse, particularly sexually abused women and physically abused men. Appropriately targeted services may help clients achieve and sustain positive treatment outcomes and improve their quality of life.

Implications for Practice

Men and women may have different needs for mental health services in the management of victimization effects. Implications for treatment providers include:

- **Train staff to recognize and assess past sexual abuse trauma.** Women and men are often reluctant to reveal a past history of sexual victimization which, if left unaddressed, may lessen their likelihood of recovery in substance abuse treatment.
- **Identify and test women-only treatment components.** This may provide the best opportunity for successful treatment of sexual and physical trauma in women to improve their chances for sustained recovery.
- **Pay particular attention to the mental health needs of women in residential treatment.** Women in long-term residential treatment showed many negative effects from having been sexually abused.

Impact of Prior Physical and Sexual Victimization on Substance Abuse Treatment Outcomes (cont.)

Future Steps

This analysis provides research support for policy makers and treatment providers to identify and test specialized service components for abused clients, so that these clients can overcome the effects of prior abuse and achieve sustained recoveries. Given that victimization appears to be widespread among substance abuse treatment clients, policies need to be developed to treat these particular clients.

Clients in treatment for substance abuse may also need assistance in the management of victimization-related disorders. Sexual abuse predominated among female substance abuse treatment clients while males reported mostly physical abuse. Gender-specific services may improve the treatment of sexual abuse related-trauma among males as well as among females. It is

likely that all treatment would benefit from a more accurate measure of the prevalence of sexual abuse and specific services that address the traumas resulting from both sexual and physical abuse.

Reference

Orwin, R., Maranda, M., & Brady, T. (2001). *Impact of prior physical and sexual victimization on substance abuse treatment outcomes*. Report prepared under Contract No. 270-97-7016 for the Center for Substance Abuse Treatment. Fairfax, VA: Caliber Associates.

For more information, please contact the National Evaluation Data Services analysis team at (703) 385-3200, or visit the NEDS Web site.

**Find more on the web
<http://neds.calib.com>**

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National Treatment Improvement Evaluation Study (NTIES)

This analysis was performed on data derived from the National Treatment Improvement Evaluation Study (NTIES). The NTIES was a national treatment services evaluation of the effectiveness of substance abuse treatment services delivered in comprehensive treatment demonstration programs supported by the Center for Substance Abuse Treatment (CSAT).

The NTIES project collected longitudinal data between FY 1992 and FY 1995 on a purposive sample of clients in treatment programs receiving demonstration grant funding from CSAT. Data are derived from client interviews conducted at three points in time: at treatment intake, at treatment exit, and 12 months after treatment exit.

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