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Childhood Sexual Abuse Scale

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The Child Sexual Abuse Scale (CSAS; Aalsma, Zimet, Fortenberry, Blythe, & Orr, 2002) is a self-report instrument that was developed to measure the occurrence of childhood sexual abuse in adolescent and adult populations. The measurement of childhood sexual abuse varies widely from brief, single-item measures to lengthy clinical interviews. The scale was developed with two issues in mind. First, a benefit of the current measure is it is very brief (four items) and can therefore be utilized in a wide variety of studies. For instance, many measures of childhood sexual abuse are interviews or are lengthy self-report inventories, which are difficult to incorporate into studies assessing many areas of sexual functioning and behavior. Second, because the CSAS is a multiple-item rather than single-item measure, internal reliability can be assessed.

Description

The CSAS consists of four items. Participants are instructed that the items refer to events that may have occurred prior to age 12. The use of this particular age cutoff was based, in part, on focus groups with adolescents in which the participants reached a consensus that the term childhood sexual abuse involved events occurring up to 12 years of age. We also wanted the CSAS to address an age range during which consensual sexual experiences were less likely. In order to maintain brevity, the CSAS did not include items regarding the specific nature of the abuse (e.g., whether penetration was involved) or the participant’s relationship with the perpetrator. Given that the age range for childhood sexual abuse is set at below 12, as well as the reading level of this scale, it is most appropriate for adolescent and adult populations.

Response Mode and Timing

The participants are asked to circle Yes or No to each statement.

Scoring

The total score for this scale is calculated by summing across items and can range from zero to four.

Reliability

The CSAS was originally utilized in a study of female adolescent and young adult subjects (14 to 24 years of age) recruited from urban health clinics and a sexually transmitted disease clinic in a large midwestern city. The scale, measuring a single construct, demonstrated excellent internal reliability at baseline (alpha = .81) and 7-month follow-up (alpha = .84; Aalsma et al., 2002).

Validity

The content validity of this scale was established by exploring other childhood sexual abuse scales. When compared to other scales, the current CSAS demonstrates strong face validity. Support for the construct validity of the CSAS is demonstrated by its relationship with other variables. In the original study assessing the role of consistent reporting of childhood sexual abuse, consistent nonreporters of childhood sexual abuse were compared to inconsistent (endorsed at least one item at one time point and not at another time point) and consistent reporters of childhood sexual abuse. We found that reporters (either inconsistent or consistent) endorsed marked increases in measures of pathology (i.e., depression) and health-compromising behavior (i.e., sexual coercion and lifetime sexual partners). Moreover, a linear trend was evident with lifetime number of sexual partners and depression. Consistent reports of childhood sexual abuse reported the highest number of sexual partners and increased depression. Consistent reports of childhood sexual abuse reported the highest number of sexual partners and increased depression. Lastly, we conducted a logistic regression in order to predict membership in the consistent or inconsistent reporting group. The results indicated that adolescents who endorsed at least two items on the CSAS were over five times more likely to be consistent childhood sexual abuse reporters. The results of this analysis demonstrate the utility and importance of using a scale to measure childhood sexual abuse rather than a single-item measure. The above findings were extended in an additional analysis with the same sample (Fortenberry & Aalsma, 2003).
The CSAS was also employed in a study of homeless youth (Rew, Whittaker, Taylor-Seehafer, & Smith, 2005). Significant differences among homeless youth by sexual orientation categories on the CSAS were found. Specifically, gay and lesbian youth were more likely to have left home due to sexual abuse than heterosexual and bisexual youth. The authors of the study utilized the full scale as well as individual items in the analysis.

Exhibit

Childhood Sexual Abuse Scale

Instructions: These next questions are about activity before you were 12 years old.

1. Someone tried to touch me in a sexual way against my will.
2. Someone tried to make me touch them in a sexual way against my will.
3. I believe that I have been sexually abused by someone.
4. Someone threatened to tell lies about me or hurt me unless I did something sexual with them.

Early Sexual Experiences Checklist

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Self-report biases and definitional problems have plagued studies of sexual abuse of children. Various investigators have forced respondents to label themselves as “sexually abused” (e.g., Kercher & McShane, 1984) or to make subtle distinctions among vague categories (e.g., “kissing or hugging in a sexual way”; Kilpatrick, 1986) in order to be counted as victims of deleterious, unwanted childhood sexual experiences. Miller, Johnson, and Johnson (1991) created the Early Sexual Experiences Checklist (ESEC) to provide an efficient, accessible procedure for detecting such experiences that avoids these methodological and conceptual problems. The ESEC merely asks respondents to check any specific, overt sexual behaviors that occurred when the respondents did not want them to. Coupled with reports of (a) the respondent’s age during the events, (b) the age of the person who initiated the events, or (c) any coercion, the ESEC allows diverse operationalizations of unwanted sexual experience that span the existing literature on sexual abuse (Kendall-Tackett, Williams, & Finkelhor, 1993). The straightforward, mechanical checklist method eschews evaluative, pejorative terminology and is thus relatively noninvasive. It is also simple and direct and very inexpensive, making it practical for use with large heterogeneous populations.

Description

The ESEC contains nine items listing explicit sexual behaviors and two additional items that allow respondents either to describe a further sexual event or to pick none of the above. The checklist ordinarily includes additional questions—which may vary according to investigators’ needs—that obtain (a) the respondent’s sex, (b) the respondent’s age at the time of the most bothersome event, (c) the age of the other person involved, (d) the identity (e.g., “stranger”) of the other person, (e) the frequency and duration of the most bothersome experience, and (f) the presence and type of any coercion. Items using a 1 (not at

References

