



Violence Data Brief

Sexual Violence

1999 to 2001

In 2001, at least 1,051 Minnesotans received hospital care for sexual violence (SV), which is an age-adjusted rate of 22.4 per 100,000 population. Hospital data appear to represent only a small percentage of all of SV incidents in Minnesota; and are most useful for the detail they provide about victims, circumstances and health care costs, rather than number of cases. Hospital data in this report are from:

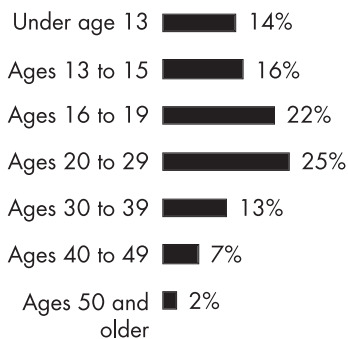
- ▶ hospital-assigned billing codes, which include known SV cases, and
- ▶ an evaluation of billing codes, which include known and suspected SV cases.

Hospital-treated SV is defined as any completed or attempted sex act in which a victim was forced against his or her will, or

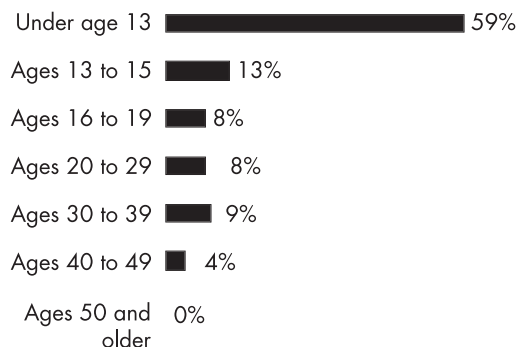
In 2001, more than half of female patients who received hospital care for sexual violence were under age 20 and 80 percent of male patients were under age 20

Age when received hospital care for SV

Percent of females (n=972)



Percent of males (n=79)



Source: Minnesota Hospital Association

In this data brief

- ▶ Hospital care in Minnesota due to sexual violence: patient demographics; patient injuries; charges, costs and payers; and perpetrators
- ▶ Self-reported sexual violence from Minnesota surveys: young adults from ages 18 to 21, 9th and 12th grade students and citizens statewide
- ▶ Criminal justice sexual violence-related offenses in Minnesota: reported crimes and arrests
- ▶ Resources for victims and offenders
- ▶ Data sources and methodology

was unable to consent; and as contact and non-contact sexual abuse. This report also includes information from police crime reports and community survey responses. Each of these sources defines SV differently. Not all victims seek medical care, law enforcement involvement, or respond to surveys. Due to these differences, data included in this report cannot be directly compared but, when viewed together, may offer insight in understanding SV in Minnesota.

Hospital care in Minnesota due to sexual violence

The rate of patients who received hospital care for SV rose over a three-year period. The cause of this increase is not clear; one reason may be better reporting by hospitals. The age-adjusted rate per 100,000 population of hospital patients treated for SV was 17.9 in 1999, 18.9 in 2000 and 22.4 in 2001.

Patient demographics

Females accounted for 92 to 93 percent of patients who received hospital care due to SV between 1999 and 2001. They had an age-adjusted rate per 100,000 population that increased from 33.7 in 1999, 35.6 in 2000, to 42.0 in 2001. The rate of male SV hospital patients was between 2.6 and 3.2 per 100,000 population during the three years. An MDH evaluation of hospital patients who received care for SV showed that in 2000, 98 percent were female. Some of the males who were coded with an "examination following an alleged rape or seduction" were examined as alleged perpetrators and were not defined as SV patients.

Minnesotans under age 40 accounted for more than 90 percent of patients who received hospital care due to SV. Between 1999 and 2001, the age of SV patients ranged from less than one-year to 95. For all three years, 70 to 73 percent of patients were age 24 and younger and nearly all, 91 to 93 percent, were age 39 or younger.

Patient zip code was used to identify median household income. As median household income increased, the rate of patients who received hospital care for SV decreased. In 2001, patients who received hospital care due to SV, with a yearly median household income of less than \$30,000, had a rate of 35.3 per 100,000 population; and those with a yearly median household income of \$75,000 or more, had a rate of 10.2 per 100,000 population. These data only capture hospital care. Some individuals who experienced SV did not seek health care or used health care other than hospitals, such as clinics, and may account for a portion of the differences between income brackets.

Patient injuries

Most SV patients were treated in the emergency room or emergency department (ED), 96 to 97 percent between 1999 and 2001. All other patients were treated for injuries that required an overnight stay (inpatient treatment) of one or more days at the hospital. ED and inpatient treatment analysis allows for some assumptions about the severity of an injury. Inpatient status generally means the injuries sustained were severe.

An MDH evaluation found that in 2000, 9 percent of patients, who received hospital care due to SV, sustained a physical injury to some region of the body. Of those patients, one-quarter had injuries to the upper limbs, including the shoulders, just under a quarter had injuries to the skin, such as bruising (this also included some cases with internal or external burns), 24 percent experienced injuries to the abdomen or pelvic area.

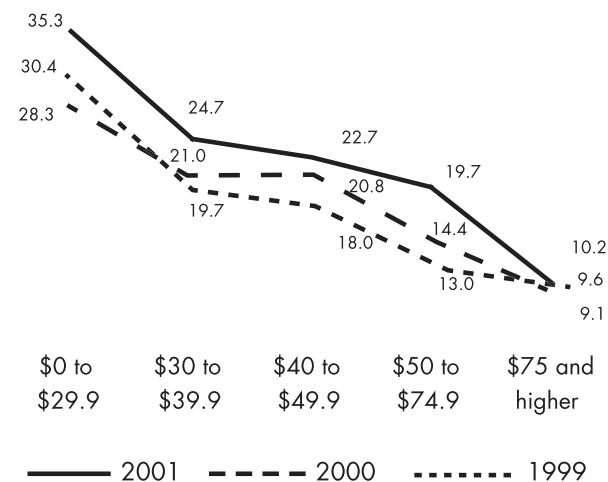
Charges, costs and payers

An evaluation by MDH found that in 2000, the average charge of a hospital patient seen for SV and treated in the ED was \$452. Inpatients had an average charge of \$5,235. Charges represent the amount billed for hospital services rendered. Hospital reimbursement is often less than the original charges because of contracts between payer providers and hospitals.

The Pacific Institute for Research & Evaluation calculated total medical cost of a rape patient receiving hospital care in Minnesota. Costs are actual expenses incurred by hospitals while treating patients and are usually less than charges. Based on the average number of Minnesotans receiving hospital care for rape between 1999 and 2001, the average cost of ED-treatment was \$411, similar to the hospital charge data. The average inpatient-treated cost was \$13,990 but inpatient calculations are considered unreliable due to small numbers.

The rate of patients who received hospital care due to sexual violence decreased as median income increased

Median income in thousands
Rate per 100,000 population



Note: Income is based on the median income in a patient's mailing address zip code.

Source: Minnesota Hospital Association

Most hospital patients who received care due to sexual violence were considered unable to consent to the sexual act, 53 percent, and the primary reason was the patient's age

Reasons patients were unable to consent

Legally under age	44%
Physical, emotional or mental health disability	18%
Suspected or confirmed:	
Alcohol use	38%
Date rape drug	11%
Other drug	18%
Some other reason (included amnesia due to head injury, homelessness and non-English speaking)	3%

Note: some patients were unable to consent for multiple reasons.

Source: Minnesota Department of Health

Sexual violence-related reported crimes and patients hospital-treated for sexual violence are not directly comparable, but rates do imply most people are not receiving hospital treatment when victimized (low county rates may be attributed to recording procedures by hospitals and law enforcement and may not represent the actual number of hospital cases or reported crimes)

	Patients hospital-treated for sexual violence			1999 to 2001	*Annualized rate (per 100,000 population)	Reported crimes of rape and other sex offenses	*Annualized rate (per 100,000 population)
	1999	2000	2001	Average	Hospital-treated patients		
State of Minnesota	849	891	1,051	930	18.9	5,860	119.1
Aitkin County	1	3	2	2	13.1	27	176.5
Anoka County	61	56	86	68	22.7	412	138.3
Becker County	3	4	10	6	18.9	5	16.7
Beltrami County	19	15	20	18	45.4	31	77.3
Benton County	1	4	2	2	6.8	27	79.9
Big Stone County	2	-	-	1	11.5	9	154.6
Blue Earth County	2	1	1	1	2.4	86	153.7
Brown County	3	3	4	3	12.4	15	57.0
Carlton County	5	6	4	5	15.8	41	128.4
Carver County	10	9	12	10	14.7	57	81.7
Cass County	5	1	5	4	13.5	66	243.1
Chippewa County	-	-	1	0.3	2.5	7	56.0
Chisago County	3	7	14	8	19.5	55	133.0
Clay County	1	1	1	1	2.0	52	102.2
Clearwater County	1	3	3	2	27.7	15	182.0
Cook County	-	1	1	1	12.9	10	187.0
Cottonwood County	1	1	1	1	8.2	8	68.5
Crow Wing County	15	19	24	19	35.1	80	145.8
Dakota County	46	52	51	50	14.0	327	92.0
Dodge County	1	1	-	1	3.8	9	50.8
Douglas County	6	3	3	4	12.2	46	140.2
Faribault County	1	1	3	2	10.3	16	100.9
Fillmore County	2	3	-	2	7.9	7	34.7
Freeborn County	1	1	-	1	2.0	11	32.7
Goodhue County	8	15	8	10	23.4	56	126.9
Grant County	1	-	-	0.3	5.3	5	84.8
Hennepin County	305	271	266	281	25.1	1,691	151.5
Houston County	1	-	-	0.3	1.7	11	54.1
Hubbard County	2	6	3	4	20.0	44	239.4
Isanti County	-	6	10	5	17.0	36	116.1
Itasca County	9	9	17	12	26.5	65	147.8
Jackson County	-	1	-	0.3	3.0	6	53.2
Kanabec County	2	2	2	2	13.3	34	224.5
Kandiyohi County	6	10	10	9	21.0	56	135.9
Kittson County	-	-	-	-	-	3	56.8
Koochiching County	1	2	-	1	7.0	26	181.1
Lac qui Parle County	-	1	1	1	8.3	2	20.7
Lake County	1	2	-	1	9.0	4	36.2
Lake of the Woods County	1	2	1	1	29.5	4	88.5
Le Sueur County	5	1	3	3	11.8	12	45.9
Lincoln County	1	1	2	1	20.7	-	-
Lyon County	5	1	9	5	19.7	20	80.0
McLeod County	3	6	1	3	9.6	79	227.3
Mahnomen County	-	-	-	-	-	23	443.2

	Patients hospital-treated for sexual violence			1999 to 2001	*Annualized rate (per 100,000 population)	Reported crimes of rape and other sex offenses	*Annualized rate (per 100,000 population)
	1999	2000	2001	Average	Hospital-treated patients		
Marshall County	1	-	-	0.3	3.3	4	42.7
Martin County	5	6	10	7	32.1	41	188.1
Meeker County	3	5	4	4	17.7	30	134.0
Mille Lacs County	9	10	3	7	32.8	62	279.1
Morrison County	4	1	2	2	7.4	40	126.1
Mower County	2	2	1	2	4.3	64	164.9
Murray County	-	-	1	0.3	3.6	6	65.5
Nicollet County	1	2	-	1	3.4	56	187.0
Nobles County	3	3	4	3	16.0	12	56.0
Norman County	2	-	1	1	13.4	4	58.2
Olmsted County	21	12	14	16	12.6	125	100.9
Otter Tail County	2	5	2	3	5.2	70	121.9
Pennington County	6	2	1	3	22.1	23	166.9
Pine County	6	3	10	6	23.9	55	207.3
Pipestone County	-	1	-	0.3	3.4	5	50.5
Polk County	5	7	7	6	20.2	49	156.2
Pope County	-	1	-	0.3	3.0	5	44.5
Ramsey County	93	87	156	112	21.9	379	74.2
Red Lake County	-	-	1	0.3	7.8	0.3	7.8
Redwood County	1	1	-	1	4.0	18	105.1
Renville County	1	1	1	1	5.8	23	134.1
Rice County	6	5	10	7	12.4	74	131.2
Rock County	1	-	1	1	6.9	-	-
Roseau County	7	8	8	8	46.9	31	187.7
St. Louis County	43	72	69	61	30.6	368	183.4
Scott County	12	13	21	15	17.1	73	81.9
Sherburne County	6	15	17	13	19.7	44	68.8
Sibley County	-	-	2	1	4.3	0.3	2.2
Stearns County	1	23	33	19	14.3	160	120.4
Steele County	7	3	7	6	16.8	36	105.9
Stevens County	-	-	-	-	-	6	63.0
Swift County	-	1	1	1	5.6	6	47.4
Todd County	1	2	1	1	5.5	40	163.8
Traverse County	-	-	-	-	-	1	32.3
Wabasha County	2	1	3	2	9.3	13	61.7
Wadena County	4	1	4	3	21.9	18	133.7
Waseca County	-	4	5	3	15.4	18	92.2
Washington County	17	20	29	22	10.9	161	79.9
Watsonwan County	-	1	-	0.3	2.8	10	81.4
Wilkin County	1	-	2	1	14.0	13	182.1
Winona County	15	23	12	17	33.3	57	114.0
Wright County	13	13	22	16	17.8	57	63.0
Yellow Medicine County	3	2	1	2	18.1	3	27.1
Unknown county	4	4	4	4	N/A	0.3	N/A

*Rates based on an average fewer than 20 are considered unreliable.

Notes: Rates calculated from Census 2000. Annualized rates are not age-adjusted; therefore will vary from age-adjusted rates mentioned in Sexual Violence Data Brief. County for hospital-treated data is based on a patient's mailing address and reported crimes represent the county in which a rape or other sexual offense was reported to police. Reported crimes with an unknown county refer to Minnesota State Patrol data. Reported crimes include rape and other sex offenses. Other sex offenses are defined as "violations of common decency or morals and such acts as adultery, incest, indecent exposure, sodomy and all attempts to commit these acts. This category does not include forcible rape or prostitution." The City of St. Paul is not included in Ramsey county reported crimes of other sex offenses because St. Paul does not release those numbers to the Minnesota Department of Public Safety.

Source: Minnesota Hospital Association; Bureau of Criminal Apprehension, Department of Public Safety; US Census Bureau

In addition to medical costs, there are productivity and quality of life costs that may be applied to an SV patient. The Pacific Institute for Research & Evaluation also calculated a total per patient cost for hospital treatment of rape based on all three cost areas and found the average ED-treated rape patient cost was \$4,375 while the inpatient-treated rape patient cost was \$112,774. Again, inpatient calculations are considered unreliable due to small numbers.

According to 2000 hospital data evaluated by MDH, SV patients' primary form of payment for hospital treatment was 4 percent Medicare, 27 percent Medicaid, 17 percent self-pay and 51 percent commercial health insurance or government insurance (other than Medicaid or Medicare). *Minnesota Health Care Expenditures and Trends: 1996*, an MDH publication, estimated health care spending in Minnesota using revenue and expenditure data collected from private and public purchasers, and from a variety of other sources. Minnesota's estimated payer source in 1996, based on health care spending, was 18 percent Medicare, 15 percent Medicaid, 21 percent self-pay and 45 percent private or other public health insurance.

Perpetrators

An evaluation by MDH found that, of hospital patients who received care for SV in 2000, 98 percent of perpetrators were male and 18 percent of patients had more than one perpetrator during the same incident. Of those patients with multiple offenders, 40 percent had perpetrators classified as strangers, and 27 percent had perpetrators who were each classified as a date or acquaintance.

Evaluation of 2000 data shows that of all patients who received hospital care due to SV, 26 percent of perpetrators were strangers.

Self-reported sexual violence from Minnesota surveys

Young adults from ages 18 to 21

In 2000, MDH completed a phone survey of young adults between the ages 18 and 21. Half of the respondents were male and half female. Twenty percent of the 801 respondents had previously been forced, or an attempt of force was made, to have sexual contact against the respondents' wishes. Females comprised 78 percent of respondents who experienced SV. Thirty-one percent of females and 8 percent of males experienced SV. Alcohol use was more often reported by respondents who experienced SV, 67 percent of females and 91 percent of males, than those who had not experienced SV, 60 percent of females and 63 percent of males.

9th and 12th grade students

The Minnesota departments of Human Services, and Children, Family and Learning conduct the Minnesota

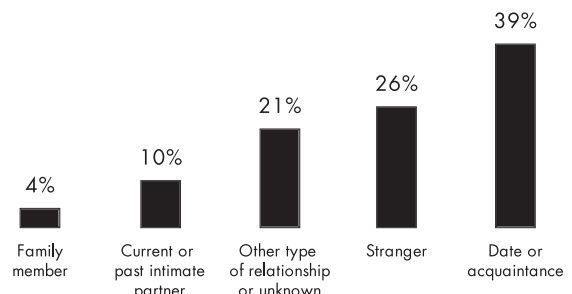
Student Survey every three years. The paper and pen survey is voluntary and completed by students in public schools and some participating private schools. The 2001 survey had three questions that dealt with SV, "Have you ever been the victim of date rape," "Has any adult or older person outside your family ever touched you sexually against your wishes or forced you to touch them sexually," and "Has any older or stronger member of your family ever touched you sexually or had you touch them sexually." Nine percent of students experienced SV, defined as 9th and 12th grade students who answered yes to at least one of the three questions. Twelve percent of female and 5 percent of male students experienced SV. Alcohol or marijuana use, in the past year, was more often reported by SV respondents, 75 percent of females and 70 percent of males, than those who did not experience SV, 57 percent of females and 55 percent of males.

Citizens statewide

The Criminal Justice Statistics Center at Minnesota Planning conducts a random statewide tri-yearly mail survey, which includes questions on crime perception and victimization. The 2002 Minnesota crime survey included two SV-related questions, "In 2001, did anyone force you, or attempt to force you, to have sexual intercourse with them," and "In 2001, did anyone force you, or attempt to force you, into any unwanted sexual activity such as touching, grabbing, kissing or fondling or other unwanted sexual acts." For each question, 1 percent of respondents answered yes and about one-fifth of those respondents were victimized by a current or former spouse, boyfriend or girlfriend, or someone they dated. The number of SV respondents who filed reports with law enforcement was not yet completed for the 2002 crime survey at the time of this report but the 1999 crime survey showed that in 1998, 90 percent of SV respondents did not report to police at least one incident of an unwanted sexual activity. Eighty four percent of rape or attempted rape victims did not report at least one incident to police.

In 2000, perpetrators of patients who received hospital care due to sexual violence were primarily known to the patient

Perpetrator's relationship to victim



Note: Percent based on number of perpetrators.

Source: Minnesota Department of Health

Criminal justice sexual violence-related offenses in Minnesota

Reported crimes

Data from the Minnesota Department of Public Safety and the US Census Bureau show the crime rate per 100,000 population of sexual violence-related offenses (defined in this report as rape and other sex offenses) has stayed somewhat steady over the past few years: 119.3 in 1999, 121.1 in 2000 and 118.5 in 2001.

Arrests

Males were the majority of offenders arrested for sexual violence-related offenses, 96 to 97 percent between 1999 and 2001. Of those males, about three-quarters were adult and 23 to 24 percent were under age 18. Adults made up about two-thirds of all sexual violence-related female arrests.

Resources for victims and offenders

Resources for individuals who were sexually assaulted:

- ▶ The Minnesota Coalition Against Sexual Assault may be contacted via the Web < www.mncasa.org > or by phone at 800-964-8847.
- ▶ The Minnesota Center for Crime Victim Services may be contacted via the Web < www.dps.state.mn.us/mccvs/home.htm > or by phone at 888-622-8799.

Individuals interested in locating a treatment provider who may help prevent sexual behavior problems may contact the Safer Society Foundation via the Web < www.safersociety.org > or by phone at 802-247-3132.

Individuals who are concerned they may sexually abuse a child, are sexually abusing a child, or think they know a child who is being sexually abused, may contact STOP IT NOW! via the Web < www.stopitnow.org > or by phone at 888-773-8368.

Data sources and methodology

The Minnesota Hospital Association (MHA) was the primary data source for hospital-treated SV. MHA extracted these data from the Universal Billing dataset. The data include about 95 percent of all hospital patient discharges in Minnesota. Patients who received hospital care due to SV were defined by specific International Classification of Diseases (ICD) codes. ICD codes help identify specific injuries, illnesses and procedures associated with a patient.

The ICD codes used to extract patients who received hospital care due to SV were rape (E960.1), observation following alleged rape or seduction (V71.5), adult sexual abuse (995.83) and child sexual abuse (995.53).

Hospital evaluation data were abstracted. The process of abstraction involved reviewing patient files, determining if SV criteria were met, and looking at demographic, relationship and health information about the IPV victim and offender. Data that would identify the patient or offender were not abstracted. Along with the four ICD codes of SV, additional codes were evaluated as possible SV. Those codes were contact with or exposure to venereal diseases (V01.6), psychological trauma from history of physical abuse (V15.41) and special screening examination for venereal disease (V74.5). Findings showed nearly all SV is reported accurately using the four known SV codes.

Hospital evaluation data in this report were weighted. When a population is not proportionately represented in analysis, case weighting helps correct that problem. Cases were weighted based on the total number of patients with specific ICD codes divided by the total number of patients assigned those codes in abstraction.

Age adjusted rates were formulated using a weight based on age groupings of the U.S. population. Weighting in this manner allows for comparison between states.

Cost of SV injury was completed by the Pacific Institute for Research & Evaluation and was based on the average number of patients who received hospital care for rape (E960.1). The additional ICD codes associated with SV were not used in calculation because the formula was restricted to ICD external codes, which aid in understanding the cause of injury.

The Federal Bureau of Investigation defines other sex offenses as "violations of common decency or morals and such acts as adultery, incest, indecent exposure, sodomy and all attempts to commit these acts. This category does not include forcible rape or prostitution."

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