Our economy is currently hemorrhaging, one cause of this bleeding is a direct result of sexual violence perpetrated against our most vulnerable members of society, our children, God’s children. Every year, childhood sexual assault is allowed to thrive; our children suffer dire physical consequences—each traumatic insult, compounding the damage to the body, mind, and spirit. Girls are directly impacted later in life due to the inability to end the abuse perpetrated against them or live in its horrific aftermath. Thus, affecting overall health and shortening their lifespan. As a country, as a society, we must act now to stop the bleeding.

The National Comorbidity Study highlighted the fact that child/adolescent rape or sexual molestation was associated with a 5-fold increase in reported heart disease among women (Goodwin & Stein, 2004). Existing studies further suggest that the high levels of cortisol, a hormone released in response to stressful or fearful situations on an ongoing basis, can also not just increase blood cholesterol and triglycerides, but blood sugar, and blood pressure as well. All common risk factors for heart disease. This repetitive stress can also cause changes that promote the buildup of plaque deposits in the arteries (URMC, 2022).

According to Dr. Rebecca Thurston’s study of Women’s Health Across the Nation (SWAN) that looked at women transitioning through menopause, a history of childhood sexual abuse was associated with higher carotid intima-media thickness (IMT). This correlates with the presence and progression of atherosclerosis in coronary arteries and assists in assessing stroke and cardiovascular disease (CVD) risk. The findings of the SWAN study published in 2014 highlighted the importance of considering the potential impact of early life stressors on women’s later cardiovascular health (Thurston et al., 2014).

Dr. Thurston conducted another study of 169 non-smoking, cardiovascular disease-free women aged 40-60 years over five years. Questionnaires, phlebotomy, physical measures, and carotid ultrasounds were obtained as part of the study on the participants with associations between sexual assault and carotid plaque levels made. 28% of the women reported a sexual assault history. The study concluded that sexual assault is associated with greater carotid atherosclerosis levels (which can lead to stroke) and progression over midlife. The authors recommended that future work consider whether sexual assault prevention reduces women’s CVD risk (Thurston et al., 2021).


The study findings by Thurston et al, add to the increasing body of data collected showing the potentially harmful effect of child abuse, and childhood sexual abuse (CSA) in particular, to women’s cardiovascular health. The study stressed the importance of considering psychosocial factors in relation to cardiovascular health, of assessing abuse history in clinical practice, and of ongoing efforts to prevent child abuse to improve population health (Thurston et al., 2014).