



ADOLESCENT SEXUAL ASSAULT AND SUICIDAL BEHAVIORS: INVESTIGATING A NATIONAL SAMPLE

Jessica L. Tomasula
Pediatric School Psychology Doctoral Student

Laura M. Anderson, Ph.D.
SUNY Buffalo

2011 Annual NASP Convention
San Francisco, CA



Prevalence of Adolescents Reporting a History of Sexual Violence

- A recent estimate of sexual abuse prevalence among high school students indicates rates of 7.4% nationwide
 - Noted gender difference
- Likely to be an underestimate
 - Lack of disclosure
 - Inconsistent definitions used in research
 - Sexual abuse vs. sexual assault
 - Contact vs. non-contact

Risks Associated with a History of Sexual Violence

- Psychological distress
- Disengagement from academic learning environment
- Re-victimization and physical dating violence
- Increased likelihood to engage in unhealthy risk behaviors
- Increased suicidality

Rates of Adolescent Suicidal Behaviors

- Almost 14% of U.S. high-school aged students (17.4% of females and 10.5% of males) had *seriously considered* attempting suicide in the previous year
- Over 6% of U.S. students (8.1% of females and 4.6% of males) *attempted suicide* during the last school year
- However, adolescent males commit suicide at a rate five times that of females

Sexual Violence and Suicidality

- There is a clear pattern of elevated risk: with odds ratios (OR) for suicidal ideation and attempts ranging from 1.4 to 3.6
- Victims are more likely to seriously consider suicide (OR 1.69 - 2.8), or report a suicide attempt (OR 1.4 - 3.6) when compared to non-victims
- Victims are more likely to report an attempt requiring medical attention (OR 3.4) when compared to non-victims

Gender Differences: Sexual Violence and Suicidality

- Adolescent girls:
 - suicidal ideation (OR 1.97 - 2.50)
 - attempts (OR 2.17 - 2.20)
- Adolescent boys:
 - suicidal ideation (OR 1.64 - 3.94)
 - attempts (OR 1.9 - 5.41)
- Studies employing composite measures of suicidal behaviors (e.g., ideation, planning, attempts) similarly support this association:
 - adolescent girls (OR 2.9 -6.12)
 - adolescent boys (3.35-9.46)

Limitations of Current Research

- Extant research has been often limited to:
 - adolescent girls only
 - adult populations
 - young adults
 - local data
 - occurred outside of the United States

Purpose of Study

- Secondary data analysis
 - More research is needed to help fill in knowledge gaps between two culturally taboo topics
- Further guide prevention and intervention programs
 - School-based risk assessments and community awareness programs
 - More specific or individualized intervention programs based on warning signs and gender

Research Questions

- Will adolescents with a self-reported sexual assault history evidence increased likelihood of reporting a suicide attempt as compared to adolescents reporting no such history?
- Will both male and female adolescent sexual assault victims be more likely to report a history of a suicide attempt as compared to their same sex peers with no sexual assault history?

Research Questions

- Among adolescents with a self-reported sexual assault history, will male and females differ in their likelihood of reporting a history of a suicide attempts?
- Across all adolescents with a self-reported history of a suicide attempt, will the medical severity of attempts, as defined by self-inflicted attempts that require medical attention, differ significantly based on sex and sexual assault history?

Method

- Secondary data analyses of the 2007 Youth Risk Behavior Survey
- Procedures
 - self-administered, anonymous questionnaire
- Participants:
 - 9th through 12th grade students in public and private schools across the country
 - 49.5% female and 50.5% male responders

Variables of Interest

- Sexual Assault Status: Question 22
 - "Have you ever been physically forced to have sexual intercourse when you did not want to?"
- Suicidal Behavior: Questions 26 and 27
 - Number of Attempts: "During the past 12 months, how many times have you actually attempted suicide?"
 - Degree of Medical Severity: "If you attempted suicide during the past 12 months, did any attempt result in an injury, poisoning, or overdose that had to be treated by a doctor or nurse?"
 - Both variables have been dichotomized

Data Analyses

- Four stages:
 - Descriptive statistics and cross-tabulation for variables of interest, resulting in division of groups for analysis
 - Univariate analyses of demographic variables and variables of interest to establish control variables
 - Bivariate Logistic Regression: Sex by Sexual Assault History
 - Bivariate logistic regression analysis between predictor variables of sex and sexual assault status
 - Among subsample of students reporting a history of suicide attempts, iterative, maximum likelihood logistic regression analysis, controlling for age, for sex x sexual assault history interaction with respect to medically serious suicide attempts

Descriptive Statistics for Prevalence Data

N = 13,721							
Sex		Age		Sexual Assault History		Suicide Attempt History	
Male	50.5%	14-15 yrs old	37%	Overall	7.8%	Overall	6.9%
Female	49.5%	16-17 yrs old	49%	Male	4.4%	Male	4.5%
		18+ yrs old	13%	Female	11.2%	Female	9.2%
**Due to initial differences between age groups in suicide attempts, all subsequent analyses were controlled for age.						Medically Serious Suicide Attempts	
**Due to gender differences in rates of sexual assault and suicide attempts, all subsequent analyses were split by gender, as applicable						Overall	1.9%
						Male	1.4%
						Female	2.4%

Results

- 1. After controlling for age, adolescents reporting a history of sexual assault were approximately six times (OR=6.384) more likely to report a suicide attempt in the past year when compared to adolescents reporting no history of sexual assault.
- 2. When examining each sex separately after adjusting for age, a strong, statistically significant association was found in both male and female adolescents.

Results

- 2a. After controlling for age, females reporting a history of sexual assault were nearly five times (OR=4.712) more likely to have attempted suicide in the previous twelve months when compared to females reporting no such history (*Wald* $\chi^2=156.644$, $p<.001$).
- 2b. Adjusting for age, males reporting a history of sexual assault were nearly ten times (OR=9.757) as likely to attempt suicide at least once in the past year when compared to males reporting no such history (*Wald* $\chi^2=119.264$, $p<.001$).

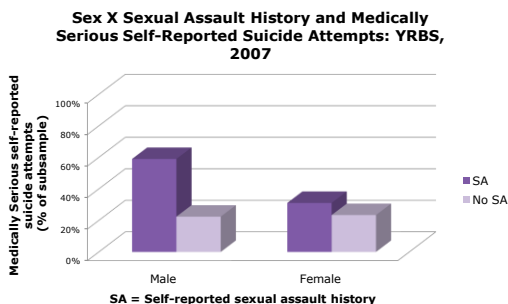
Results

- 3. Among those adolescents reporting a history of sexual assault, there was no significant association between sex and self-reported suicide attempts after controlling for age ($Wald \chi^2 = .000, p = .987$).
 - Among females reporting a history of sexual assault, 26.2% indicated a history of suicide attempts.
 - Among males reporting a history of sexual assault, 26.4% indicated a history of suicide attempts.

Results

- 4. After controlling for age, a statistically significant sex x sexual assault history interaction emerged ($Wald \chi^2 (1, 40) = 11.00, p = .002$) when examining the subsample of adolescents who reported a history of suicide attempts
 - SA males vs. non-SA males: (OR=4.974)
59% vs. 22.4%
 - SA females vs. non-SA females: (OR=1.47)
31.1% vs. 23.4%
- **Important finding:** SA males are more likely *than any other group* (non-SA males and SA/non-SA females) to report medically serious suicide attempts

Results



Limitations

- Self-report data
- School-based survey
- Cross-sectional design
- Limited question content

Implications

- General:
 - prospective research design
 - further research on risk *and* protective factors
 - Improves research base for two culturally taboo topics
 - Suicide screenings
 - Psychoeducational programs (e.g. parents and peers)
 - Community collaborations
- Specific: Intervention and prevention programs geared toward male victims of sexual violence
 - public education messages, specialized screenings, evidence-based treatments

What Can We Do?

Systems

- Open communication with administration about current prevention methods
- Create or re-emphasize referral system to school personnel
- Create a list of community resources and discuss specialized referral system to ensure closer supervision:
 - Local hospital systems
 - Community advocacy centers
 - Community-based therapists with specialization in child sexual abuse

What Can We Do?

Child & Family

- Ask about abuse history during interview process
- Monitor progress of intervention regardless of whether it occurs outside or within the school building
- Provide parents with education for prevention and tips on how to proceed when abuse is disclosed
 - www.darkness2light.org

Internet Resources

- American Association of Suicidology - www.suicidology.org
- American Foundation for Suicide Prevention - www.afsp.org
- Darkness to Light: End Child Sexual Abuse - www.darkness2light.org
- National Sexual Violence Resource Center - <http://www.nsvrc.org/>

Training Opportunities

Suicide Prevention

- The School Suicide Prevention Specialist Certification Program in an online training program provided by the American Association of Suicidology (AAS). Please visit www.suicidology.org for more information.

Sexual Abuse Prevention

- Darkness to Light: End Child Sexual Abuse - www.darkness2light.org
- Provides an interactive sexual abuse prevention training program, called **Stewards of Children**, a 2 ½ hour training program for adults, including school personnel.

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