

The Relationship Between Sexual Assault and Suicide

7/19/12

Statement of the Problem

Sexual assault and suicide are important concerns among both military and civilian populations. Is there a relationship between these two problems and if so, how is it characterized?

Summary of the relevant literature

Research in civilian populations has consistently provided evidence that sexual assault is associated with increased risk for suicidal ideation, attempts, and death by suicide. Much of this research has been conducted on women and has found that being sexually assaulted as an adult is significantly associated with higher rates of suicidal ideation and attempts (Ullman & Najdowski, 2009). Sexual assault also has been found to increase the risk for death by suicide by as much as 14 times for female victims compared to women who have never been assaulted, even after controlling for psychiatric diagnoses present prior to the assault (Gradus et al., 2012). There has additionally been evidence that civilian male sexual assault victims are at higher risk of suicide compared to those who have never been assaulted, and that they may have similar adverse mental health responses to sexual assault as civilian women (Coxell et al., 1999; Ratner et al., 2003; Suirs & Lind, 2009, Peterson et al., 2011).

Having a history of childhood sexual assault/abuse (CSA) has also been identified as a significant risk factor for suicidal behavior as an adult. For both men and women, CSA is a better predictor of future suicide attempts than childhood physical abuse and more severe CSA is associated with further increased risk for suicide attempts in young adulthood (Brown et al., 1999; Fergusson et al., 1996). As reported in one study, this association remains strong (although slightly diminished) when controlling for factors like the development of depression or post traumatic stress disorder (PTSD) (Bedi et al., 2011).

Sexual assault is also commonly associated with adverse mental health outcomes such as depression, anxiety, substance abuse, and non-suicidal self-injury, which are also commonly associated with suicidal ideation, attempts, and death by suicide (Bakken & Gunter, 2012; Coxell et al., 1999; Elliott et al., 2004; Larimer et al., 1999; Walker, Archer, & Davies, 2005; Wolff & Shi, 2009).

There are few published data on the association between sexual assault and suicidal ideation, attempts, or death by suicide in American military populations. One retrospective study of OEF/OIF veterans' medical charts revealed that prior exposure to sexual abuse was significantly associated with current suicidal ideation; however that connection was no longer significant

when factors such as gender, depression and PTSD were considered (Lemaire & Graham, 2011). In a study of Canadian active duty military personnel, sexual assault history was found to be significantly associated with suicide attempts in both men and women, even after controlling for sociodemographic factors and comorbid mental health disorders (Belik et al., 2009).

Gaps in the literature

Although research on sexual assault as well as suicide in American military populations is increasing, research is needed to examine the possible connection between the two in active duty and veteran populations, instead of continuing to just look at each problem in isolation (Kimerling et al., 2010; Turchik & Wilson, 2010).

Recommendations

In light of the one study investigating sexual assault and suicide in OEF/OIF veterans, future research in military populations should include careful analyses of the effect of not only sexual assault on suicide related outcomes, but also the comorbidity of other mental health disorders including depression and PTSD.

Empirical research from civilian populations provides strong evidence that victims of sexual assault, whether they be children or adults at the time of assault, are at increased risk for suicidal ideation, attempts, and death by suicide in adulthood. Although scant research has been conducted specifically on military populations, there is no convincing evidence to suggest that military personnel and veterans are any different from civilians in regard to the risk posed by experiencing a sexual assault. Based on strong evidence from civilian populations and the limited data available from military (American and Canadian) populations, it seems reasonable to recommend that military victims of sexual assault be evaluated for mental health concerns, including thoughts about suicide.

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