



Research article

Childhood sexual abuse and substance abuse: A gender paradox?



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ABSTRACT

We examine associations between childhood sexual abuse (CSA) and substance abuse, the role of mental health indicators as mediators in these associations and whether or not associations differ by gender. Data are from 14,063 respondents aged 18–76 years from the 2004–2005 Canadian Gender, Alcohol, and Culture: An International Study (GENACIS). Multiple logistic regression models were used to examine associations between CSA and substance abuse variables, controlling for socio-demographic factors. Odds were adjusted by indicators of mental health to assess if these variables mediated associations between CSA and substance abuse. Tests of interactions between sex and CSA were conducted to see if gender differences exist in associations. In 2004/2005, CSA was reported by 14% of women and 5% of men. CSA was associated with heavy drinking, hazardous drinking, and the use of marijuana, other illicit drugs, and off-label drugs. Associations were only very marginally attenuated when controlling for depression and self-perceived emotional/mental health. In all cases previously observed significant associations persisted. Evidence of gender differences in associations between CSA and substance abuse was negligible. Preventing CSA may also reduce substance abuse.

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1. Introduction

Childhood sexual abuse (CSA) is a threat to public health. Recent data from the 2012 Canadian Community Health Survey: Mental Health (CCHS) estimates that 10% of adults experienced childhood sexual abuse before the age of 16 years (Afifi et al., 2014). CSA has been linked to numerous negative health outcomes including both chronic physical and mental conditions (Afifi et al., 2008; Afifi, Henriksen, Asmundson, & Sareen, 2012; Afifi et al., 2014; Fuller-Thomson, Roane, & Brennenstuhl, 2016; Kessler, Davis, & Kendler, 1997; MacMillan et al., 2001; Molnar, Buka, & Kessler, 2001; Scott, McLaughlin, Smith, & Ellis, 2012; Tonmyr, Jamieson, Mery, & MacMillan, 2005).

Associations between CSA and substance abuse are well documented. The authors of a review article comprising 31 studies of adolescent community and school samples concluded that CSA was associated with the use of nicotine, alcohol and drugs as well as earlier age of initiation of substance use (Tonmyr, Thornton, Draca, & Wekerle, 2010). The association between CSA and substance abuse has also been reported in representative retrospective studies even after adjustment for individual, family and societal factors (Afifi et al., 2008; Afifi et al., 2014; Fuller-Thomson et al., 2016; Kessler et al., 1997; MacMillan et al., 2001; Molnar et al., 2001).

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In western societies CSA is more often reported by women than men (Afifi et al., 2008; Afifi et al., 2014; Kessler et al., 1997; MacMillan et al., 1997; Molnar et al., 2001). Men, on the other hand have a higher prevalence of substance use disorders than women (Zilberman, Tavares, & el-Guebaly, 2003). However, changes in societal roles of women in recent decades have decreased the size of the gender gap in substance use disorders (Zilberman et al., 2003). It is far less clear if there are gender differences in associations between CSA and substance use disorders. Some studies have found gender differences with significant associations being observed for women but not for men (Afifi et al., 2008; Afifi et al., 2012; Molnar et al., 2001; Widom, Marmorstein, & White, 2006; Widom, White, Czaja, & Marmorstein, 2007). However, studies that have tested for CSA-by-sex interactions have concluded that there are no gender differences in associations (Afifi et al., 2014; Fuller-Thomson et al., 2016; Kessler et al., 1997; MacMillan et al., 2001). A recently published systematic review of the role of gender in the association between child maltreatment and substance abuse behaviour based on longitudinal studies concluded that “we remain unclear about the moderating effect of gender across the life course” (Kristman-Valente & Wells, 2013). Other researchers have also concluded that there are still gaps in our knowledge regarding gender differences in the associations between CSA and substance abuse (Fuller-Thomson et al., 2016; Simpson & Miller, 2002; Widom et al., 2006).

Several studies have found that CSA is also associated with psychiatric conditions such as mood and anxiety disorders (Afifi et al., 2008; Afifi et al., 2014; Kessler et al., 1997; MacMillan et al., 2001; Molnar et al., 2001). Furthermore, substance use disorders are highly co-morbid with psychiatric conditions (Gilman & Abraham, 2001; Grant & Harford, 1995; Grant et al., 2004; Swendsen & Merikangas, 2000; Tjepkema, 2004) and prospective studies have found that the onset of psychiatric disorders often precedes the onset of substance use (Gilman & Abraham, 2001; Sihvola et al., 2008; Tjepkema, 2004). Therefore, it has been proposed that psychiatric disorders may mediate the relationship between CSA and substance use disorders (Douglas et al., 2010). However, other studies have found that substance abuse precedes the development of psychiatric disorders (Brook, Brook, Zhang, Cohen, & Whiteman, 2002; Gilman & Abraham, 2001; Tjepkema, 2004). This may also have an impact on gender differences in associations between CSA and substance use disorders. Women with substance use disorders have a significantly higher prevalence of co-morbid psychiatric disorders (Brady & Randall, 1999; Grant & Harford, 1995) and therefore the effects of mediation may be stronger for women than men.

The 2004–2005 Canadian Gender, Alcohol, and Culture: An International Study (GENACIS) is an untapped data source for studying CSA and provides an opportunity to further elucidate the association between CSA and substance abuse and potential gender differences. It is important to assess this association in a variety of samples from diverse countries using different measures. Although GENACIS is a cross sectional survey, studies comparing the associations between child maltreatment and adverse health outcomes in adulthood concluded that retrospective and prospective studies yield similar results (Patten et al., 2015; Scott et al., 2012).

Using data from the 2004–2005 GENACIS we,

- assess associations between CSA and substance abuse variables;
- investigate the role of mental health indicators as mediators in associations between CSA and substance abuse variables;
- determine if gender differences exist in associations between CSA and substance abuse.

2. Methods

2.1. Data source

Data for this analysis are from the GENACIS Canada, a representative sample of the Canadian household population aged 18–76 years living in 10 provinces in 2004/2005. GENACIS is a part of a large international multidisciplinary collaboration covering a range of topics related to gender and alcohol use and problems (Bloomfield et al., 2005). Using random digit dialling, a sample of Canadian residential phone numbers was selected and then within each sampled household, the adult (aged 18–76) whose birthday most closely followed the interview date was selected to participate in the survey (Graham & Bernards, 2008). Interviews were conducted by telephone using computer assisted telephone interviewing (CATI). Data collection spanned a 12-month period (starting in March 2004 in Quebec and in January 2004 in other provinces) in order to represent seasonal variation in alcohol consumption. Based on the preference of the respondent, interviews were conducted in English (78.4%) or French (21.6%), with an average interview time of 25.6 min (Graham, Bernards, Flynn, Tremblay, & Wells, 2012). The survey excluded people living in households without a residential phone line, those who did not speak English or French, and those who were too cognitively impaired to participate (Graham & Massak, 2007). The response rate was 52.8% of all eligible households (Graham & Bernards, 2008); with a responding sample of 14,063 (6009 men and 8054 women).

2.2. Measures

2.2.1. *Childhood sexual abuse (CSA)*. Respondents were classified as having experienced *childhood sexual abuse* if they answered yes to either of the following questions:

- Before you were 16 years old, did anyone in YOUR FAMILY try to make you do sexual things or watch sexual things when you did NOT want to?
- Before you were 16 years old, did anyone OTHER THAN A FAMILY MEMBER try to make you do sexual things or watch sexual things when you did NOT want to?

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