



# Loneliness under assault: Understanding the impact of sexual assault on the relation between loneliness and suicidal risk in college students



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## ABSTRACT

The present study sought to examine for how loneliness and sexual assault are involved in predicting suicidal risk (viz., hopelessness & suicide probability) in a sample of 334 college students. Specifically, we were interested in examining whether sexual assault may play an additive as well as interactive role in the prediction of suicidal risk above and beyond loneliness. Results from regression analyses indicated that both loneliness and sexual assault were important and unique predictors of suicidal risk in students. Moreover, consistent with expectations, we found support for a Loneliness  $\times$  Sexual Assault interaction in predicting both hopelessness and suicide probability. Inspection of the interactions indicated that the highest levels of suicidal risk were present for lonely students who had experienced some form of sexual assault. Some important implications of the present findings are discussed.

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## 1. Introduction

Loneliness is defined by feelings and thoughts of being isolated and disconnected from others (Russell, Peplau, & Cutrona, 1980). Studies on loneliness over the past 30 years have indicated that it is a robust correlate and predictor of a wide range of negative affective conditions (see Heinrich & Gullone, 2006, for a review), including depression (Anderson, 1999; Cacioppo, Hughes, Waite, Hawkley, & Thisted, 2006; Chang, 2013; Chang, Sanna, Chang, & Bodem, 2008; Russell et al., 1980; Wilbert & Rupert, 1986), anxiety (e.g., Chang, 2013; Chang et al., 2008; Crick & Ladd, 1993; Fontaine et al., 2009; Russell et al., 1980; Wilbert & Rupert, 1986), and stress (Cacioppo et al., 2006; Hawkley, Thisted, & Cacioppo, 2009). Importantly, findings from studies on loneliness have also implicated it as a reliable predictor of suicidal risk (e.g., hopelessness, suicide probability, suicide ideation) in adults (e.g., Lamis, Ballard, & Patel, in press; Stravynski & Boyer, 2001). For example, in an early study examining predictors of suicidal risk in college students,

Weber, Metha, and Nelsen (1997) found that loneliness, as measured by the revised UCLA Loneliness Scale or R-UCLA (Russell et al., 1980), was associated with greater hopelessness and greater suicide ideation. Indeed, Westefeld and Furr (1987) found that in 47% of the adults who indicated a history of suicide ideation, loneliness was the most frequently cited cause of suicide ideation.

Recently, however, findings from some studies have begun to highlight ways in which life stress may add to and interact with loneliness in predicting suicidal risk in adults (e.g., Hirsch, Chang, & Jeglic, 2012; Yang & Clum, 1994). For example, in a study of college students, Chang, Sanna, Hirsch, and Jeglic (2010) proposed a diathesis  $\times$  stress model of suicidal risk predicated on loneliness and negative life events. Consistent with their model, these investigators found that beyond loneliness and negative life events emerging as important predictors of both hopelessness and suicidal behaviors, the inclusion of the Loneliness  $\times$  Negative Life Events interaction term further augmented their prediction model for both suicidal risk outcomes. As expected, Chang et al. found that the highest levels of hopelessness and suicidal behaviors were present among lonely individuals who experienced the highest levels of negative life events.

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However, one problem in studying negative life events is that they are typically assessed using measures that capture a very broad range of potentially adverse events (e.g., failing an exam, death of a close family member/friend, divorce, being fired from a job, & detention in jail; Sarason, Johnson, & Siegel, 1978). Accordingly, it is not clear from general studies examining the role of negative life events if findings linking such events with adjustment reflect the influence of some or of all the adverse life events assessed. With this concern in mind, there are at least two compelling reasons to specifically focus on one particular type of negative life event, namely, sexual assault. First, and foremost, sexual assault represents a major problem in society (Devries et al., 2011), and it remains a serious concern in college student populations (Gidycz, Orchowski, King, & Rich, 2008; Loh, Gidycz, Lobo, & Luthra, 2005; Palmer, McMahon, Rounsaville, & Ball, 2010). For example, according to Krebs et al. (2011), 19% of undergraduate women reported experiencing some form of sexual assault since entering college. Second, and relatedly, findings from studies have pointed to a reliable positive association between sexual assault and suicidal risk in student populations (Tomasula, Anderson, Littleton, & Riley-Tillman, 2012). For example, Bryan, McNaughton-Cassill, Osman, and Hernandez (2013) found that college students who had previously experienced unwanted sexual experiences had significantly increased risks for suicide ideation. Furthermore, Davidson, Hughes, George, and Blazer (1996) reported that individuals who had a history of sexual assault were more likely to report higher lifetime rates of suicide attempts. Given these findings, it might be particularly important to examine for the role of sexual assault in the association between loneliness and suicidal risk in adults.

## 2. Purpose of the present study

Given these concerns, we conducted the present study in a college student population to: (1) examine for loneliness and sexual assault as unique predictors of suicidal risk (viz., hopelessness & suicide probability); and (2) determine if the interaction of Loneliness  $\times$  Sexual Assault accounts for additional variance in suicidal risk beyond loneliness and sexual assault alone.

Consistent with past findings (e.g., Bryan et al., 2013; Hirsch et al., 2012; Weber et al., 1997), we expected to find support for both loneliness and sexual assault as important and unique positive predictors of suicidal risk. Additionally, consistent with Chang et al., (2010) contention that loneliness and negative life events may interact to predict suicidal risk, we further hypothesized that we would find support for a significant Loneliness  $\times$  Sexual Assault interaction in predicting suicidal risk. With regard to the latter prediction, we expected to find the highest levels of hopelessness and suicide probability to be found among lonely students who experienced some form of sexual assault.

## 3. Method

### 3.1. Participants

A total of 343 college students were recruited from a university in the southeast United States. These participants were part of a larger study examining the impact of sexual assault on adjustment in college students. Of the original 343 participants, 9 did not complete all study measures, thus the present study analyses are based off of 334 participants (225 females & 109 males). Participants' ages ranged from 18 to 58 years, with a mean age of 21.75 ( $SD = 5.31$ ). The breakdown of participants' year in school was as follows: 43.4% freshman, 18.3% sophomore, 23.7% junior, and 14.4% senior. The racial/ethnic breakdown of the participants was 89.2% White, 5.4% Black, 3.6% Asian, and 1.8% Hispanic.

### 3.2. Measures

#### 3.2.1. Loneliness

Loneliness was assessed by the revised UCLA Loneliness Scale (R-UCLA; Russell et al., 1980). The scale consists of 20 items, half of which describe non-lonely thoughts (e.g., "There are people I feel close to"), while the other half characterizes feelings of loneliness (e.g., "I feel isolated from others"). Respondents are asked to rate the statements on the frequency with which they experience these feelings using a 4-point Likert-type scale, ranging from 1 (*never*) to 4 (*often*). Higher scores on the R-UCLA indicate greater levels of loneliness.

#### 3.2.2. Sexual assault

To assess for sexual assault, we used 4 individual self-report questions from the National College Health Assessment scale (Hoban, 2007). The items assessed for various dimensions of sexual assault, namely, verbal threat ("Within the last school year, have you experienced verbal threats for sex against your will?"), unwanted sexual touching ("Within the last school year, have you experienced sexual touching against your will?"), attempted sexual penetration ("Within the last school year, have you experienced attempted penetration against your will?"), and completed sexual penetration ("Within the last school year, have you experienced sexual penetration against your will?"). Participants responded to each question with either "yes" or "no". If participants responded "yes" to any of the aforementioned questions, they were coded as having experienced sexual assault. In the present sample, fifty students (31 females & 19 males) indicated they had experienced some form of sexual assault.

#### 3.2.3. Suicidal risk

To assess for suicidal risk, we used two measures, namely, the Beck Hopelessness Scale (BHS; Beck, Weissman, Lester, & Trexler, 1974) and one item from the Suicidal Behaviors Questionnaire-Revised (SBQ-R; Osman et al., 2001). The BHS is a 20-item measure of extreme pessimism or hopelessness. Respondents are asked to indicate either agreement or disagreement to these items that assess negative expectancies for the future (e.g., "My future seems dark to me"). Scores on the BHS have been found to correspond highly with clinical ratings of hopelessness (Beck et al., 1974) and have also been found to predict eventual suicides (Beck, Steer, Kovacs, & Garrison, 1985; McMillan, Gilbody, Beresford, & Neilly, 2007). Higher scores on the BHS indicate greater hopelessness.

The SBQ-R is a 4-item self-report measure developed to directly tap key different aspects of suicidality. Given our interest in assessing for suicide probability, we only used an item assessing for likelihood of suicidal behavior in the future (viz., "How likely is it that you will attempt suicide someday?"). Respondents are asked to indicate how likely they are to make a suicide attempt across a 7-point Likert-type scale, ranging from 0 (*never*) to 6 (*very likely*). Scores on the SBQ-R have been found to be positively associated with clinical ratings of suicide risk and other self-report measures of suicide potential (Range & Knott, 1997). Higher scores on this SBQ-R item indicate greater suicide probability.

### 3.3. Procedure

Approval for the study was obtained from the Institutional Review Board prior to data collection. Participants were recruited at a regional university in the southeast United States and received either course-required credit or extra credit upon completion of the survey. Most of the participants were recruited from Introductory Psychology classes. All participants were provided with written informed consent, which indicated that all data would be kept strictly confidential.

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