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# An introduction to body vandalism: What is it? Who does it? When does it happen?



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#### HIGHLIGHTS

- Common types of body vandalism were the addition of writing, objects, or substances.
- Most victims of body vandalism are also perpetrators.
- Body vandalism is associated with alcohol use for both perpetrators and victims.
- · Body vandalism victimization results in both positive and negative consequences.

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#### ABSTRACT

A number of typical consequences for alcohol and other substances have been well documented. However, a specific category of consequences which has received no attention in the existing literature includes acts (other than sexual assault) committed upon incapacitated individuals. We have termed this behavior body vandalism (BV), defined as the direct manipulation of an incapacitated individual through the addition of markings, objects or substances, removal of property or hair, or relocation of a body. The purpose of this paper is to provide a preliminary examination of rates of experiencing and variations in positive and negative perceptions of this behavior from the victim's perspective. A pilot study was conducted aimed at examining the rates and demographic characteristics of body vandalism in a national sample of 981 adults. The majority of individuals had witnessed BV, half had perpetrated, and over 40% had been a victim in their lifetime. Rates of lifetime victimization and perpetration were low (1–2 times). Perpetrators most often targeted their friends and alcohol was typically a factor in victimization. Over half of victims reported experiencing positive social outcomes as a result of being victimized and about a third reported negative emotional outcomes. Findings suggest that experiences of body vandalism are relatively common, especially in young adults, associated with alcohol consumption, and result in both positive and negative outcomes for victims. This study offers evidence for BV as an outcome of social drinking, suggests contexts that increase the risk of BV occurrence, and provides a foundation from which future studies can build

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# 1. Introduction

Hazardous alcohol consumption has been consistently found to be associated with negative consequences (e.g. Kahler, Strong, & Read, 2005; White & Labouvie, 1989). Many of these consequences, including hangovers, increased tolerance, fights, and problems sleeping, have been regularly studied. However, personal reports, social media postings (Krieger et al., 2015), and recent news articles (The Associated Press, 2007; New York Times, 2008) have brought to light a behavior related to drinking not previously studied. We labeled this behavior body

vandalism (henceforth BV) and define it as the *deliberate manipulation* of an incapacitated individual by the addition of markings, objects, or substances, the removal of clothing or hair, or the relocation of their body. BV is restricted to the defacement of an incapacitated individual and does not include actions that fall under legal and research definitions of sexual assault, molestation, or physical violence (Abbey, 2002; Eaton et al., 2012; Singh et al., 2015; The United States Department of Justice, 2013). An individual is considered incapacitated if they are unable to verbally or physically object, resist, or deflect the actions of others.

Archival and social media data (Krieger et al., 2015) suggest that images of BV are posted and discussed on social media sites, that there are different types of BV, and that alcohol is a contributing factor in many

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experiences. In addition, there have been reports of body vandalism behaviors in the news. These reports demonstrate the negative physical and emotional outcomes that can result from BV behaviors and suggest that victimization may result in harm or death (e.g. The Associated Press, 2007; New York Times, 2008). Despite this emerging evidence no published research of which we are aware has examined BV and the possible negative experiences that may result. To assess the impact of BV on individuals, we conducted an exploratory study on BV behaviors.

We designed a pilot study to examine how often BV occurs over the lifespan, what percentage of people have experienced BV, and specific characteristics associated with individuals who have been perpetrators or victims of BV. Of particular interest, we assessed the positive and negative consequences associated with BV victimization. As there was no empirical basis for specific hypotheses, the results of this study are descriptive, and no specific hypotheses were made regarding the associations between study variables. However, given the social media studies and news reports, we expected that BV would be experienced by a moderate proportion of individuals and that it would be accompanied by reported negative outcomes by victims.

#### 2. Materials and methods

#### 2.1. Participants and procedure

A total of 1003 people (51.99% men) participated in the survey, of which 981 provided complete data. Participants were recruited from an online community to complete a brief online survey using Amazon's Mechanical Turk (Mturk) system (https://www.mturk.com). Mturk is an online forum for completing tasks in exchange for money credited to an Amazon.com account. This recruitment system has been found to be a valid method of conducting online research, as it is similar to online sampling in college populations but targets a more diverse participant pool (Buhrmester, Kwang, & Gosling, 2011; Casler, Bickel, & Hackett, 2013). After reading a short study description, interested participants clicked on the link and consented. In exchange for completing the 5 minute survey, participants received \$0.10. Inclusion criteria was living within the United States, having a 95% approval rating on Mturk, and having completed at least 50 prior tasks. The sample was not restricted by age or ethnicity and the mean age was 31.80 (SD =10.03). Details regarding the demographic breakdown of the sample are presented in Table 1.

# 2.2. Measures

#### 2.2.1. Lifetime body vandalism

Participants completed eight questions pertaining to their lifetime rate of experiencing BV. Examples were described and categorically labeled as "practical jokes". Perpetration and victimization were phrased as participation and being a target. This phrasing was used to reduce defensiveness. Two questions provided photo examples (see Appendix A for example images) and verbal descriptions of six different BV behaviors including writing on the body, placing objects on the body, wrapping the body in tape or plastic wrap, covering the body with substances, removing clothing or hair, and relocating the body. Participants were asked if they had experienced or had done of any of listed behaviors or anything similar. Participants could check as many as applied to them or check "None of the above or anything similar." Following these questions participants were asked to indicate how many times they had ever been the target of a practical joke when they were incapacitated, perpetrated, or had witnessed a practical joke on an incapacitated individual. Recency of perpetration and victimization was assessed with one item with 5 response options including: "Never," "In the last year," "1-2 years ago," "3-4 years ago," and "5 or more years ago." Perpetrators were also asked "who are the people most likely targeted by you and your group of friends" and could check all that applied from four

**Table 1**Demographics of Study Participants.

	Count	%
Gender		
Female	470	48.00%
Race & ethnicity		
Hispanic	63	6.46%
Caucasian	797	81.46%
Native American	7	0.72%
African American/Black	66	6.75%
Asian	67	6.85%
Pacific Islander	3	0.31%
Multi-ethnic	29	2.97%
Other	9	0.92%
Highest level of education		
Some high school	8	0.82%
High school diploma/GED	92	9.40%
Some college	359	36.67%
Bachelors/associates degree	431	44.02%
Graduate degree	89	9.09%
Current yearly income		
<\$10,000	211	21.57%
\$10,000-\$29,999	304	31.08%
\$30,000-\$49,999	233	23.82%
\$50,000-\$69,999	120	12.27%
\$70,000-\$89,999	64	6.54%
\$90,000 +	46	4.70%
Relationship status		
Single or dating	444	45.31%
Engaged or long-term committed	153	15.61%
Married or with life partner	322	32.86%
Divorced or separated	53	5.41%
Widowed	8	0.82%
Occupational status		
Student only	120	12.33%
Working only	609	62.59%
Student & working	65	6.68%
Retired	158	16.24%
Other	19	2.40%

Note: Student and Working only includes part and full time workers that did not mark being in another category.

options: Friends, Acquaintances, Strangers, and Disliked People. Finally participants were asked two questions assessing what percent of the time they or their target(s) were incapacitated due to: "Alcohol Consumption," "Other Substance Use," "Just Asleep," or "Some Other Reasons."

# 2.2.2. Body vandalism event details

Participants who indicated being a victim of or perpetrating BV in the last two years received three additional measures. Two questions asked about the number of alcoholic drinks they consumed during their last occasion of BV (victim and perpetrator). The third measure included 38 possible positive and negative outcomes they experienced in the last six months as a result of being a victim of BV. Participants responded 'Yes' or 'No' to each item. The questions represented a negative outcomes scale ( $\alpha=0.94$ ) including items about negative physical, legal, social, and emotional outcomes and a positive outcomes scale including positive social and emotional outcomes ( $\alpha=0.91$ ). Total counts were created for each of the negative and positive outcomes subscales.

# 2.3. Analysis plan

First, a series of tests were conducted to assess the psychometric properties of the new body vandalism outcomes scale: (1) An exploratory factor analysis (EFA) was conducted in SAS version 9.13 to examine underlying dimensions of the items. (2) Cronbach's alpha was used to document internal consistency of any identified factors and/or total scores. Due to the exploratory nature of this study counts and percentages are reported for rates of experiencing, types, and outcomes of BV. Logistic regression was used to assess associations between

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