

The epidemiology of antidepressant use and experiences of bullying or sexual abuse in the South Australian population.

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1. Background:

The demographic risk factors for Major Depressive Disorder (MDD) are crucial for preventative, curative and rehabilitative efforts. Previous research into MDD's social causes has implicated childhood and adulthood sexual abuse (CSA and ASA) as well as bullying victimisation. However, the predictors of these experiences and their precise temporal and contextual relationship to MDD on the population level remains contentious.

2. Aim:

The aim of this study was to test demographic predictors of CSA, ASA and bullying victimisation as well as their independent, gendered and temporal relationships to MDD with a contemporary cross-sectional population dataset.

3. Methods:

Data from the 2015 South Australian Health Omnibus Survey (N = 3,005) was analysed through nine separate multivariate logistic regressions. Antidepressant use was coded as a surrogate for MDD diagnosis. For sexual abuse and bullying, participants were asked the timing of their most recent experience, the duration of the most recent experience and the cumulative number of experiences. Demographic information about BMI, household income, Indigenous ethnicity, rural residence as well as marital status was collected and alternatively used as either predictors of sexual abuse or bullying experiences or as control variables for models predicting depression.

4. Results:

Overall, the population lifetime exposure was 16.2% for antidepressant use, 46.2% for bullying victimisation and 9.9% for sexual abuse, 53.0% of which occurred only below age 15. CSA, ASA and bullying experiences all increased the likelihood of antidepressant exposure with a dose-response relationship according to greater experience duration and frequency. Antidepressant use was also predicted by female gender, age and socioeconomic status but unexpectedly not by Indigenous ethnicity and rural residence. Surprisingly, CSA was the strongest predictor of bullying exposure in adulthood. Finally, adulthood bullying increased antidepressant use greater than childhood bullying.

5. Discussion:

Most hypotheses were supported but some findings require further investigation. The study was limited by the question structure and the use of antidepressant exposure as MDD surrogate. Future research should look at the interaction between risk factors for sexual assault and those of depression.

6. References:

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