Study of violence against women : Study of prevalence and psychiatric consequences

Muhammad, Ranya Husain

Ain-Shams Univ., Cairo (EGY). Fac. of Med.

Thesis ; M.D. 2007

Review general scope, magnitude, consequences, different theories explaining violence against women.
Review interventions made to prevent future occurrence of the problem.
To study prevalence, possible correlates and psychiatric consequences of violence against women.
Case-control study.
Tools used were:
Standerdized psychiatric assessment. Structured clinical interview for DSM 1V axis I disorders.(SCID-CV)clinical version 1997.
Structured clinical interview for DSM 1V Axis II personality disorder.
World SAFE questionnaire (study of abuse within family environment)
Clinical psychiatric assessment using Al-Zahraa hospital sheet.
Types of violence:(slapping-hitting-beating-kicking-insulting-threateningabandoning)
There is interpersonal violence between husbands and wives.
Causes reported by women are (refusing sex-withholding money-disobediencejeoulsy-house duties) Bipolar patients are more likely to be abused followed by psychotic patients.
Severly abused patients usually attempt suicide.
Most common psychiatric disorders related to abuse are (depression-generalized anxiety disorder-somatoform disorder).
Types of sexual abuse(street harassment-touching-rubbing-attempt or actual rapeexhibitionism).
Psychiatric patients of group II were more abused than those of group 1 as follows:(physical, psychological abuse-abuse during pregnancy-sexual abusehospitalization as a consequence) Risk factor for abuse in women (illiterateabused or witnessed abuse in childhood-not working).
Risk factors for women who prepare for violence:(illicit drug abuse plus the former factors).
Victims are more liable to psychiatric disorders than the non abused persons.