

# PSYCHOLOGICAL CONSEQUENCES OF SOCIAL VIOLENCE, DOMESTIC VIOLENCE AND MENTAL TORTURE AMONG WOMEN

DR. JHUNU SHAMSUN NAHAR

DR. MASUDA KHANAM

DR. MSI MULLICK

DR. NAFISA HAQ

1, 2, 3 : Department of Psychiatry  
Bangabandhu Sheikh Mujib Medical University  
Dhaka-1000, Bangladesh

4 : Monon Psychiatric Hospital  
150, Monipuripara, Tejgaon, Dhaka-1215  
Bangladesh

## ABSTRACT

Seventy-three tortured women attending different trauma centres and sheltered homes were included in this study. The sample was matched with 53 control women. The main objective of this study was to determine the prevalence and nature of psychological symptoms and disorders among tortured women. Psychological symptoms and disorders were commoner among the tortured group (51.6%) than that of controls (21.4%) which is statistically significant. Socio demographic analysis showed that tortured women came from all social classes (lower to upper class) and educational background (illiterate to highly educated). Women between age group 15 and 44 were mostly affected (86.3%).

Among the tortured, housewives outnumbered others (42.5%) And 61.6% were tortured by their husbands (married and divorced). Among married, the symptoms were more (44%) than that of unmarried, separated and divorced. After torture 32.9% had only mental symptoms whereas 86.3% had both mental and physical symptoms. Eleven percent only complained of physical symptoms alone. 31.5% underwent physical and mental type of torture whereas 26% only mental type and 17.8% only physical type of torture. Rape and sexual harassment constituted 23.3%.

Out of the total study population, 83.3% understood mental torture and 73.8% considered harassment by boys and musclemen as torture respectively.

### Introduction :

Violence and torture affect a large number of people worldwide and poses a serious threat to mental health. These are severe stresses to human personality. Now-a-days effects of trauma suffered by torture victims have become more widely known through media reports and professional studies. Researches show various stressful events provoke psychiatric disorders, such events can also provoke emotional reactions that are distressing and an important cause of family tension and absence from work. The development of psychiatric symptoms depends on the stress factor and also personality of the person'.

One important finding from medical or health point of view is that, for those who survive the ordeal, the most serious sequelae of torture are of psychological nature. Some studies suggest that the incidence, experience and sequelae of torture may be different for men and women. A South African survey of detained and tortured persons indicated that men were more often physically tortured and women experienced more frequent psychological torture and had more of a wide range of psychosomatic and psychological problems both during and after release. Another study on women victims of sexual assault reported terrifying dream experiences and disturbances of sleep. They were also found depressed.

## **Background :**

These days violence against women becomes a common and widespread phenomenon. It may be mentioned that since the inception of this country about 2 lac women were raped, tortured and humiliated. Now-a-days women are being tortured by in-laws, husbands, employers, mastans and even by policemen. Rape and abduction has been increased in the city. Seven hundred fifty three incidents of rape and attempted rape were reported in the media during 1997. One hundred and thirty three cases were reported of women whose faces and/or bodies had been disfigured with acid. The same report stated that 820 victims along with 195 traffickers were arrested by police. Not only that, in 1997 and 1998, personnel working with law enforcing agency have been accused of violence, rape and murder of young women. In our country another interesting form of violence is "Fatwa Instigated Violence". Local imams and powerful leaders have used the mediation process to issue fatwas leading to violence against young women.

In the face of increasing violence against women, the Government also has taken some important steps. The country has got a powerful "Women and Child Repression Act". The Ministry of Women and Children Affairs and some NGO's are also playing active roles to prevent violence against women.

The aim of this study was to find out the psychological consequences (psychiatric disorders and symptoms) among women who experienced violence and torture.

The main objectives of the study were :

- I) To find out the prevalence of psychiatric disorders and symptoms arising as a consequence of torture among women.
- II) To determine the specific types of psychiatric disorders and symptoms prevailing among tortured women.

## **Materials and Methods :**

Data were collected during the period February to June 1998. Seventy-three tortured women from different sheltered homes and trauma centres were interviewed. Women from different strata of society were also interviewed. Women with organic brain disorder, mental retardation and severe physical illness were excluded from the study. The women who were non-cooperative and reluctant to respond were also excluded. The sample was matched with 53 control women regarding age, educational, family, social and financial background. Before the interview, informed consent was taken from each respondent. The study was conducted in two stages. In first stage GHQ-12\* and a semi-structured questionnaire were applied to all respondents. Apart from socio-demographic data, the semi-structured questionnaire had a torture list which included deprivation of food, sleep etc., physical abuse and psychological abuse. In second stage GHQ screen positive cases and 25% of GHQ screen negative cases were interviewed by qualified psychiatrists. Diagnosis was done according to DSMIV diagnostic criteria. Information gathered were kept confidential. The data were processed and statistical analysis was done accordingly.

## **Results :**

One hundred and twenty six women were interviewed for this study-73 tortured women and 53 control. A statistically significant ( $P<0.001$ ) number of tortured women (51.6%) had psychological symptoms and disorders (table no. 1). We doubted whether our women will understood properly what the mental torture is. A questionnaire was distributed and explained wherever needed. It was founded that out of 126 respondents 105 (83.3%) understood mental torture, 19 (15.1%) do not understand and 2 (1.6%) did not answer the question (table no. 2). Out of 73 tortured women 38 (52%) met the different diagnostic criteria for DSMIV (Table no. 3A). Other 27 women complained various symptoms like transient depression, explosive anger, "not balanced", marital problems and different somatic symptoms (table no. 3B). Among psychiatric disorders depressive disorder was the most prevalent (24.6%) followed by post traumatic stress disorder. Table no. 4 showed the age range of tortured women. Women from age between 15 and 44 were mostly affected (86.3%) Table no. 5 and 6 showed the educational and financial background of the tortured women. Victims came from all educational background e.g. illiterate to highly educated and also from poor to highly solvent family background. Table no. 6 showed the occupation of the torture women. Housewives (42.5%) outnumbered others. There were service holders, physicians, teachers, students, receptionists, maidservants etc. (Table no. 7). Married women constituted the major part (64.4) according to the table no. 8. Table no. 9 showed the persons involved in torturing women. Majority were tortured by their husbands (61.6%). Torture included physical, mental, both physical and mental, sexual, rape, acid throwing etc. (table no. 10). Most of the respondents consider harassment by boys and musclemen as mental torture (table no. 11)

**TABLE NO-1**

Psychological Symptoms and Syndromes (disorders) among the tortured women and control.

Respondents	Mental symp. And dis (%)	No symp. and dis (%)	Total (%)
Tortured Women N = 73	65 (51.6)	8 (6.4)	73 (58.0)
Control N = 53	27 (21.4)	26 (20.6)	53 (43.0)
Total	92 (73.0)	34 (27.0)	126 (100)

$$X^2 = 27.8$$

$$df = 1$$

$$P < 0.001$$

**TABLE NO - 3A**

Psychiatric disorders among tortured women n = 73

Psychiatric disorders	No of women (%)
Panic disorder	1 (1.7)
Depressive disorder	18 (24.6)
Post traumatic stress dis	10 (13.7)
Phobic anxiety dis	1 (1.7)
Gen. Anxiety dis	3 (4.1)
Conversion dis	4 (5.5)
Obsessive compulsive dis	1 (1.7)
Total	38 (52.0)

**TABLE NO-4**

Age range of tortured women

Age range	Tortured Women	%
Below 15	2	2.7
15-24	18	24.7
25-34	25	34.2
35-44	20	27.4
Above 44	8	11.0
Total	73	100

**TABLE NO-6**

Financial background of tortured women

Family income Tk./month	Tortured Women	%
Below 3,000	15	20.6
3,000-5,000	8	10.9
5,000-10,000	10	13.7
10,000-40,000	12	38.4
Above 40,000	12	16.4
Total	73	100

**TABLE-2**

Understanding of mental torture by respondents.

Answer	Tortured (%)	Control (%)	Total (%)
Yes	60 (47.6)	45 (53.7)	105 (83.3)
No	11 (8.8)	8 (6.3)	19 (15.1)
No Answer	2 (1.6)	0 (0)	2 (1.6)
Total	73 (58.0)	53 (42.0)	126 (100.0)

**TABLE NO - 3B**

Psychiatric symptoms not meeting the diagnostic criteria of DSMN n = 73

Symptoms	No. of Women
Transient depression	27 (36.9)
Explosive anger "not balanced"	
Marital problem	
Somatic symptoms	

**TABLE NO - 5**

Educational background of tortured women

Education	Tortured Women	%
Upto class VIII	24	32.9
Upto H. S. C.	22	30.1
Graduation	27	37.0
Masters, other		
Total	73	100

**TABLE NO-7**

Occupation of tortured women

Occupation	Tortured Women	%
House wife	31	42.5
House maid	8	11.0
Receptionist	3	4.1
Service	7	9.6
Unemployed	3	4.1
Physician	4	5.5
Teacher	4	5.5
Student	9	12.3
Selfempl	3	4.1
Nursing	1	1.3
Total	73	100

**Table No-8**

Marital status and psychological consequences among tortured women.

Marital status	No of women	(%)
Married	47	64.4
Unmarried	14	19.2
Separated	2	2.7
Divorced	10	13.7
Total	73	100

**TABLE NO-9**

Persons involved in torturing women

Perpetrator	tortured women	%
Husband	45	61.6
Mother-in-law	17	23.3
Brother-in-low	15	20.5\
sister-in-law	10	13.7
Musclermen	6	8.3
Other	26	35.6

(Response may be more than one)

**TABLE NO-10**

Nature of torture among women victim.

Nature of torture	No. of women	%
Physical only	13	17.8%
Mental only	19	26.0
Physical + Mental	23	31.5
Sexual	8	11.0
Rape	9	12.3
Acid throwing	1	1.4
Total	73	100.0

**TABLE-11**

Harassment by boys and musclermen as mental torture.

Answer	Tortured (%)	Control (%)	Total
Yes	55 (43.7)	38 (30.1)	93 (73.3)
No	14 (11.6)	7 (5.1)	21 (16.7)
Enjoys	1 (0.8)	1 (0.8)	2 (1.1)
Irritating	1 (0.8)	7 (6.0)	8 (7.3)
No answer	2 (1.10)	0 (0)	2 (1.1)
Total	73 (58.0)	53 (42.0)	126 (100.0)

### Discussion :

One hundred and twenty six women were included in the present study. Among them 73 women went through different types of torture and 53 were controls. Tortured women suffered significantly more ( $P < 0.001$ ) from psychiatric disorders than controls. This finding is consistent with the findings of some foreign studies done in Canada, Denmark and Bosnia. In our country torture and violence have been increasing day by day which is a everyday news in media. But unfortunately, punishment of perpetrators is not enough and follow up of the victims are also scanty. some NGO's however have taken some good stand in this regard.

Before applying the main questionnaire, respondents were asked whether they understand what mental torture is. Though ignorance and illiteracy are prevailing in our country people, they still know (83.3%) what is mental torture. Among tortured persons there is almost always have components of mental torture such as humiliation, suffering etc. beside physical torture. Psychiatric disorders were found in 38 (52.0%) women and another 27 (36.9%) had different psychiatric symptoms not meeting the criteria of DSM IV. Depressive disorder was 24.6% and Post Traumatic Stress Disorder (PTSD) was 13.7%. In two Canadian studies done on Latin American refugee women and immigrant men prevalence of PTSD was more than depression. The reason for more depression in this study may be that the stressful events acted on a previously predisposed person. Another reason may be that the victims felt so humiliated and insulted that they could not come out of depression and depressive thoughts and cognition's were prevailing more than that of autonomic arousal. Other than disorders, some psychiatric symptoms like transient depression, explosive anger, "not balanced", marital problems and somatic symptoms were present in 27 (36.9%) women. Eighty nine point three percent torture victim fell in age group between 15 and 44 which is usual and consistent with foreign studies and local media reports. One interesting finding that tortured women came from all types of educational level namely illiterate to master degree holders and also from family background ranging from poor to high economic background. Majority foreign studies were conducted among refugees, war victims and politically detained persons. These studies also showed different levels of education ranging from illiterate to highly educated. In one study a graduate woman in political detention was the victim. In our country organised study in this field are scarce but media reports show that women from all educational level and family background are tortured. Even women residing in posh areas of capital city are not escaped (e.g. Shazneen murder case: different media reports).

Regarding occupation of the victims in this study, house wives (42.5%) outnumbered others and married women were more. Majority of them were tortured by their husbands (61.0%). These findings are not consistent with the western studies because as

mentioned earlier majority of those studies were on refugees, war victims and political detainees. Perpetrators in those cases were persons other than relatives. Overrepresentation of domestic violence prevailed in this study. This may be a very important reason for emergence of husbands and in-laws as perpetrators. Husbands and in-laws are specially connected with dowry related violence. Social violence did not come to the surface that much in this study though everyday media reports show enormous number of social violence in the society. Obviously this is a very sensitive issue and the victim and their guardians do not want to disclose the facts mainly because of social stigma and also due to threats from musclemen and terrorists.

In our study 31.5% women suffered from both physical and mental torture. While 17.8% and 26.0% responded with either only physical or mental type of torture respectively. We think that every physical torture also has a psychological component. Those who responded only with physical type of torture were less educated and ignorant about mental type of torture. Rape and sexual type of torture constituted 33.3%. In fact in our country rape, sexual abuse and torture are more than reported in this study and increasing day by day. The low representation may be due to difficulty in gathering information because of its sensitivity. Besides the victims want more legal help than psychological. This is why police and human right agencies have more involvement initially. At that stage very few guardians take the victims for psychological help and counselling.

Now-a-days society became aware about the increasing violence against women. Bangladesh Government has also taken some important measures to combat with this serious problem. We have powerful act against dowry and women & child repression. Department of woman affairs and some different women organisations run some shelter homes for the victims. But it may be mentioned that everybody is concerned about the short term benefits such as legal aspects, exemplary punishments of the perpetrators, monetary compensation etc. Very few talk about the long term psychological consequence on torture victims. Violence, torture, humiliation can crush a person and her self-esteem can be lowered in such a level that she might feel the world meaningless and want to die. In this context, we have to rehabilitate the victims in such a way so that the psychological stability is restored and the woman changes from helpless victims to empowered survivor.

#### **Reference :**

1. Gelder, M.; Gath, D.; Mayou, R.; Cowen, P.; Oxford Textbook of Psychiatry; 3rd edition, Oxford University Press, 1996; PP-134-159.
2. Allodi, F.; Stiasny, S.; Women as Torture Victims; Can. J. Psychiatry, Vol. 35, 1999, PP-144-148.
3. Foster, D., Sandler, D.; Detention and Torture in South Africa. Capetown: David Philip, 1987.
4. Moldofsky, H., Hafez, A., Lue, F. A.; Sleep, Dreams and Symptoms in Woman following Sexual Assault VS Men following Political torture; Centre for Sleep and Chronology; The Toronto Hospital, Ontario, Canada, Sleep Research 21, 1992.
5. The Daily Star, A daily newspaper, City Publishing House Ltd., Dhaka, Dec. 9, 1997.
6. The daily Star, A daily Newspaper, City Publishing House Ltd., Dhaka Nov. 12. 1997.
7. Violence Against Women (Exerpts from Human Rights in Bangladesh 1997, A report prepared by AINO SALISH KENDRA (ASK), Bangladesh Legal Aid and Services Trust (BALLAST), Odhikar, Madaripur Legal Aid Association (MLAA); The Daily Star, City Publishing House Ltd, Dhaka, Aug 24, 1998.
8. Goldberg DP; Gater, R.; Sartorius, N.; Ustun TB.; The validity of two versions of GHQ in the WHO study of mental illness in general health care; Psychol. Med.; 1997;27: 191-7.
9. Diagnostic and Statistical manual of Mental Disorders. Fourth Edition, DSMIV, American Psychiatric Association, Washington DC.
10. Amnesty International Evidence of Torture, London: Studies of Amnesty International's Danish Medical Group, 1997.
11. Allodi, F.; Cowgill, Cr.; Ethical and Psychiatric aspects of Torture; Canadian J Psychiatry 1992;27 (2); 98-102.
12. Lande, I., Ortmann, J., Prevalence and Sequelae of Sexual Torture; Lancet; 1990; 336 (8710); 289-91.
13. Maudud, H.; Violence has a Woman's face; Presentation in seminar on strategies to eradicate violence against women and children; 1998.
14. Sharma, S.; Lama, S.; Ale, S.; Maharjon, J.; Rape survivors: Nepal district management on refugees; Torture; 1995; Vol. 5, No. 2, P. 8-10.
15. Seaas, N.; Axelsen, E.; Psychotherapeutic intervention with women exposed to sexual violence in political detention: A presentation of two therapies; Nordisk Sexologi; 1994: 12: 13-28.
16. The Daily Janakantha, A daily Newspaper; Globe printers and Janakantha Ltd. Dhaka; May 16, 2000.