STREE MANORAKSHA TRAINING

Psychological Impact of Violence: Assessment of mental distress, disorder and suicide risk

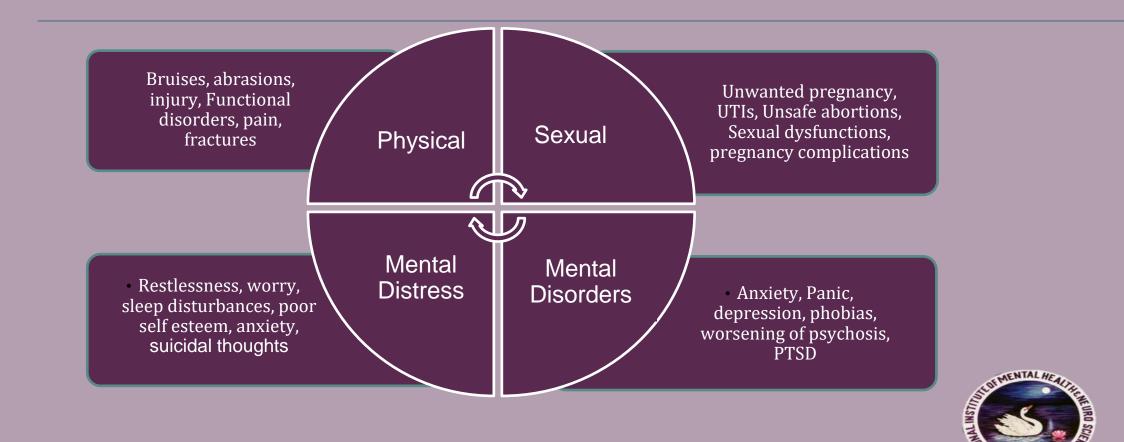




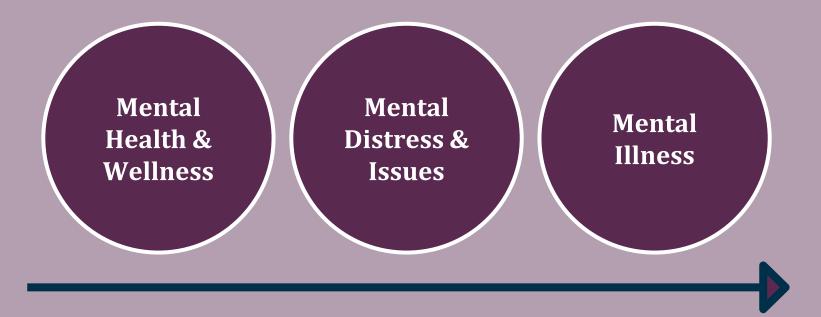
Learning Objectives

- To understand the mental health impact among women facing gender based violence
- To understand the identification and assessment of mental health among women facing gender based violence among women
- To identify risk factors of suicide and assessment of suicide among women facing violence

Consequences of Violence against Women



Mental Health Continuum





Common Mental Health Issues

- Physical, emotional, cognitive and behavioral symptoms
- Affects functioning
- Requires short term treatment and a good amount of support is required
- E.g. Anxiety, Depression, Medically Unexplained symptoms

Severe Mental Health Issues

• Physical, emotional, cognitive & behavioral symptoms, however of much higher impact

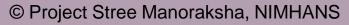
Impairs functionality

Require immediate attention of mental health professionals; Long term treatment and management

E.g. Schizophrenia, Bipolar Disorder

Ground Rules for assessment

- Sit in a quite place
- Ensure privacy and confidentiality
- Make the client comfortable
- Keep all necessary things such as pencil, eraser, pen, paper with you
- Don't give assessment tools or performa to clients to take with them
- Keep the notes of your assessment out of reach of client
- There should be no interruptions from surroundings
- Build rapport before assessing for mental health concerns
- Behavioral observations must be noted





Ground Rules for assessment

- Explain about the assessment Why, What, When, How
- Listen actively and attentively
- Be empathetic
- Make sure to take Consent
- Non judgmental
- Clarification if there is any confusion
- Don't generalize personal experiences



When not to do assessment

- When client refuses to talk or reports they are feeling tired, sleepy or lack of interest
- When client is angry, agitated, aggressive, violent
- When client cannot comprehend your questions or instructions
- When intoxicated alcohol or other substances
- Immediate traumatic response, client is not speaking
- When the client is having severe symptoms suspiciousness, personality issues
- In severe distress
- Not to do assessment in the first session itself
- Don't do assessment in tele counselling session



Steps to do assessment

- **Socio demographics** –name, age, marital status, socio economic status, domicile, educational qualification, occupation, religion
- Main concerns of the client visiting
- **Details of the main concerns** When, What, Why, Whom and How
- **Mood** how is your mood, how do you feel? how are you feeling?
- Behavior observation (grooming, kempt, dressing, involuntary movements, eye contact, hygiene, is she able to concentrate, is she able to comprehend or follow the instructions)



Steps to do assessment

- Body language posture, relaxed, tense or restless, slow, hesitant, cooperative?
- **Biological functions** sleep, appetite, menstrual cycle, bladder bowel movement
- Socio occupational functioning involvement in daily activities, involvement in work (if employed), social interactions – family, children, friends, neighbors, attending social gatherings etc.



What are the symptoms of common mental disorders?



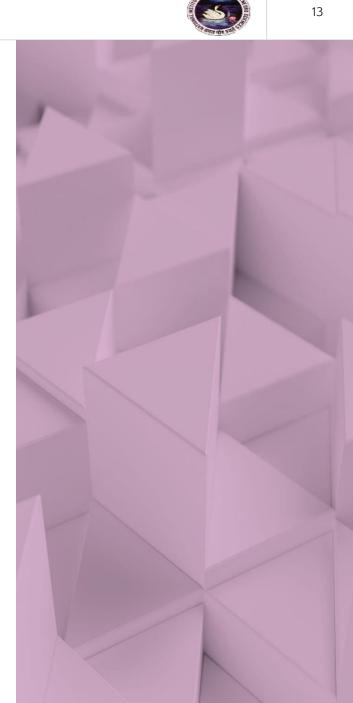


What symptoms to look for?



Physical symptoms

- Excessive sweating
- Palpitations
- Breathing difficulties
- Fatigue
- Sleep problems
- Muscle tension & pain
- Nausea, gastric problems



Thought & Feeling symptoms

- Apprehension
- Worry, fear of future
- Difficulty in concentration
- Racing thoughts
- Mental restlessness
- Irritability
- Feeling lost



Behavioral symptoms

- Inability to sit still
- Difficulty in focusing on tasks
- Difficulty in completing tasks
- Irritability
- Social withdrawal



How to assess Anxiety?

COGNITIVE ASSESSMENT

- Do you worry a lot about things?
- Do you worry a lot about your future?

AUTONOMIC ASSESSMENT

- Do you have increased heartbeat and sweating?
- Do you feel restless when you worry a lot?
- Do you find it difficult to focus on work and completing it?

EMOTIONAL ASSESSMENT

- Do you feel fearful without any reasons?
- Do you feel more irritable then usual?





Severity of Anxiety

MILD - worries about future, native thoughts, able to do work, not significant physical symptoms

MODERATE – unable to focus on task, feeling restless, distressed, having racing thoughts

SEVERE – Severe physical symptoms (increased heart beat, sweating etc), not able to do routine activities, difficulty in concentration and not able to complete tasks, fearful, on the edge, breathing difficulties



Depression

What symptoms to look for?



Physical symptoms

- Fatigue
- Exhaustion
- Reduced appetite
- Increased/reduced sleep (early wakefulness)
- Weight loss
- Headaches
- Body pain
- Sensation of increased heart rate



Thought & Feeling symptoms

- Low mood
- Irritability
- Negative thoughts about self future and others
- Difficulty in concentration
- Forgetfulness, indecisiveness
- Low self esteem, guilt
- Decreased confidence
- Thoughts of death or suicide



Behavioral symptoms

- Frequent weeping
- Decreased interaction
- Poor self care and grooming
- Lack of interest
- Long hours of inactivity
- Anger outbursts
- Self harm



How to assess Depression?

QUESTIONS TO ASSESS THOUGTHS

- Do you feel that there is no hope for the future and it is not worth living?
- Do you feel helpless at times?
- Do you feel that it is better to die rather than continuing this life?
- Have you lost interest in pleasurable activities?

QUESTIONS TO ASSESS BEHAVIOUR

- Do you have sleep disturbances very frequently?
- Do you think you have lost weight in the last few weeks because of less or no eating?
- Have you lost interest in activities that interested you earlier?
- Are you able to do your daily chores properly?
- Do you feel tired all day?



How to assess Depression?

QUESTIONS TO ASSESS EMOTIONS

- How is your mood for the past two weeks?
- Do you feel excessively sad?
- Do you feel like crying often?



Severity of depression

MILD – Mild changes in mood, feeling low or sad, not feel like talking to people, But able to do all household chores and other activities

MODERATE – low and sad mood, getting tired easily, decreased social interactions, mood and thoughts create difficulty in daily activities (Important to refer to MHP)

SEVERE – Suicidal thoughts, unable to do daily activities, poor self hygiene, death wishes, social withdrawal, negative thoughts of self, others and future, feelings of guilt (Important to refer to MHP)

NOTE – Important to assess for suicide in depression



Somatization Disorder

- Causes one for more bodily symptoms e.g. Pain
- Unexplained medical symptoms
- These symptoms cause significant emotional distress
- These symptoms are multiple and recurrent in nature
- The distressed experienced from pain and other problems is real regardless of whether or not there is medical explanation to the symptoms



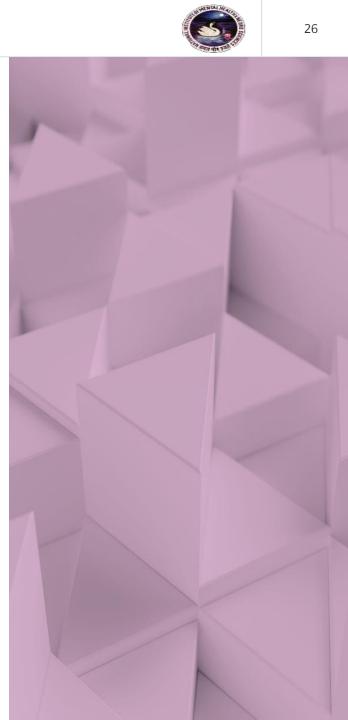
Symptoms

Pain is the most commonly reported symptom. Areas of reported pain can include chest, arms, legs, joints, back, abdomen, and other areas.

Neurological symptoms such as headaches,, movement disorders, weakness, dizziness, fainting

Digestive symptoms such as abdominal pain or bowel problems, diarrhoea, constipation

Sexual symptoms such as pain during sexual activity or severe pain during periods



Symptoms

- There is a constant worry about potential illness
- There is a feeling that medical evaluation and treatment have not been adequate
- There is frequent and repeated checking body for abnormalities



How to assess Somatization?

- Do you frequently have aches and pains all over your body?
- Do you frequently have aches and pains on specific parts of your body?
- Have you visited many doctors to treat aches and pains?
- Do you take lot of medications or self-medication to get rid of aches and pains?
- Do you also feel sad or stressed out when you have aches and pains?
- Has you sleep and appetite been affected significantly?
- Do these physical complaints affect your daily routine and your social life?
- Do these physical complaints restrict your mobility?

Dissociation

Dissociation is disconnection & lack of continuity between thoughts, memories, surroundings, actions and identity.

An individual experiencing dissociation may feel as though things around them are unreal.

It may occur as a coping mechanism for an individual, to put some distance between themselves and the traumatic situation.



Symptoms

- Experiencing flashbacks of traumatic events
- Inability to remember things for some time
- Losing memories about certain people, places, information, events, or specific periods
- A blurred or distorted sense of reality
- A feeling of numbress and disconnection towards one's environment
- A distorted sense of place and time
- A feeling of detachment from one's emotions



Post Traumatic Stress Disorder (PTSD)

PTSD is a lasting consequence of traumatic events that cause intense fear, helplessness, or horror.

Complex PTSD: Experienced by people who have repeatedly experienced traumatic events, such as violence, neglect or abuse.

In PTSD, the experience of traumatic event may not be experienced repeatedly



Symptoms

- Night terrors
- Nightmares
- Fearfulness
- Flashbacks
- Disturbed sleep
- Avoidance of situations and triggers related to violence
- Negative beliefs about oneself
- Hypervigilance



What is Flashback?

- Distressing memory of the trauma
- Unwanted & intrusive in nature
- Reliving the trauma as if it was happening now
- Takes over all the senses





What is Hypervigilance?

- It a state of heightened alertness accompanied by behavior that aims to prevent danger
- Person is extremely sensitive to environment
- Physical symptoms –breathing very quickly, restlessness, increased heart rate
- Behavioral symptoms jumpy reflexes
- Emotional symptoms fear, panic, worry



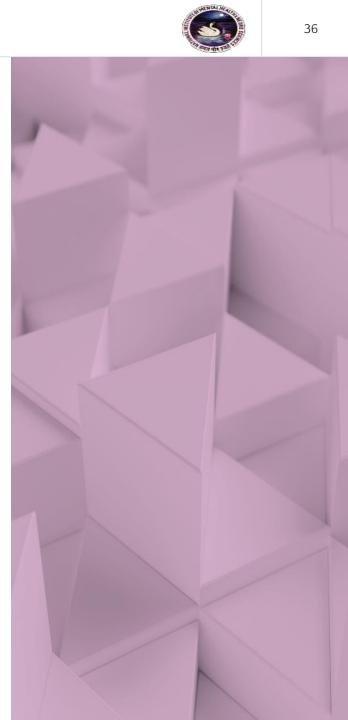
What are Night terrors?

- Also known as sleep terrors
- During a night terror, a person appears to awaken and scream or shout in terror
- The content is not remembered
- They cause increased heart rate, flushed skin, sweating and kicking and thrashing in bed



What is Nightmare?

- Unpleasant dreams that are usually remembered upon waking
- Start after traumatic event
- Follow the experience of trauma and often involve the same elements that were in the trauma
- Signs sweating, increased heart rate, fearful



How to assess PTSD?

- Do you get scary dreams which bother you a lot?
- Do you have flashbacks of past painful events?
- Does anything remind you of your past painful events such as any program on the TV or newspaper? Do you avoid them?
- Do you become vigilant or alert on listening to some sudden sound or something which makes you fearful?
- Do you feel fearful sometimes?
- Do you have disturbed sleep?
- Do memories of your past painful event keep intruding in your thoughts which you are not able to control?
- Do you try to avoid thinking of past painful experiences?

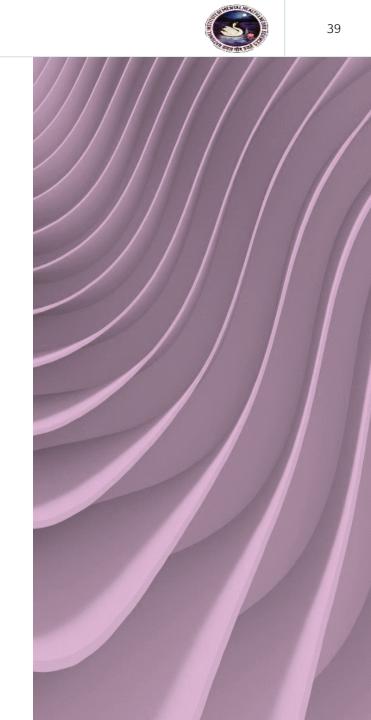


What are the symptoms of severe mental disorders?



Behavioural Symptoms

- Aggressive behavior
- Disorganized behavior such as eating dirt/mud
- Talking to self
- Poor self hygiene
- Loss of social skills
- Withdrawal from friends and activities (Isolation)



Emotional Symptoms

- Extreme mood changes of highs and lows
- Difficulty in understanding & handling emotional experiences
- Laughing and smiling inappropriately without any reason
- Making big and unrealistic plans



Thought related symptoms

- False beliefs e.g. People are plotting against me; I • am God's messenger and I have powers to save the world
- Inability to think rationally (lack of logic) ullet
- Suspiciousness (having, fixed and rigid beliefs about ۲ things that are not true)
- Disorganized thinking leading to disorganized speech ۲
- Inability to concentrate ullet
- Hearing voices ۲



Referral Process

When, Whom & How?



When to refer?

- Risk of self- harm or suicide
- Survivor is so depressed, that she cannot do any day-to day activities
- Severe flashbacks, nightmares, anxiety or other symptoms of PTSD
- Psychological distress persists despite counselling
- Psychosis or severe mental illness
- Difficulties in individual, social and occupational level



Whom to refer?

- Psychiatrist
- Clinical Psychologist
- Psychiatric Social Worker
- Counsellors
- District Mental Health Program
- Primary Care Doctor



How to refer?

- Set up an appointment
- Call the mental health professional and brief them about the case
- Make a referral letter
- Follow up after the referral
- Give feedback to the survivor



Thank you

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