### 2.3 DEPRESSION AND VIOLENCE

## Chair: Prof. Peter Donnelly, UK

02-3.1

# PREVALENCE OF VIOLENCE AGAINST OLDER PERSONS IN THE EUROPEAN REGION

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**Introduction** Abuse and neglect of persons aged 60 years and over has become an increasingly prominent public health issue. From January 2009 to July 2009, we conducted the cross-sectional European study "Abuse of the elderly in the European region" (ABUEL) among community-dwelling elderly populations aged 60–84 years in Germany, Greece, Italy, Lithuania, Portugal, Spain and Sweden.

**Objective** (1) To describe the prevalence rate of violence against people aged 60–84 in Europe; (2) To analyse differences in prevalence rates between countries; and (3) To investigate whether there is a relation between violence and health.

**Methods** Description of variables, bivariate tests and regression analyses.

**Results** N=4467 participants were interviewed in the seven participating countries. The response rates ranged from 18.9% in Germany to 87.4% in Portugal. The lowest prevalence rates of overall violence against the elderly were found in the southern countries (Italy, Greece, and Spain); the highest prevalence rates were found in Germany, Lithuania and Sweden (about 30%). Country of origin was significantly associated with level of reported violence. Psychological violence was associated with increased rates of depression and anxiety.

**Conclusion** Violence against the elderly is significantly associated with health of the elderly and an important risk factor. Further studies are needed to gain further knowledge and design tailored intervention and prevention programmes.

02-3.2

#### DOMESTIC VIOLENCE AGAINST WOMEN IN ALEXANDRIA, EGYPT: A DEVELOPING COUNTRY PERSPECTIVE

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Domestic violence is the most common form of gender-based violence, considered a major contributor to physical and mental ill health of women. This study aimed at assessing prevalence and risk factors of domestic violence against married working women in Alexandria, Egypt.

**Methods** A cross sectional study was conducted among 400 married working women attending Health Insurance Clinics in Alexandria, using a modified FVPF questionnaire.

**Results** Overall prevalence of domestic violence was 67%, where psychological abuse was most common (48%) followed by physical violence (40%), sexual abuse (38%), financial abuse (30%). Out of the following studied significant factors (wife education, husband education, number of childern in the family, number of daughters in the family, positive history of cirumcision, wife's exposure to physical violence during childhood, mother's wife exposure to domestic violence, alcoholic husband, drug misuser husband, husband's exposure to physical violence during childhood, easily tempered, depressed/frustrated, jealous husband, husband's corrupt freinds, psychologically ill and introvert husband), only 4 were found to be positively and

significantly related to domestic violence in stepwise logestic regression namely:husband's exposure to physical violence during childhood (OR 6.1); depressed/frustrated (OR 3.5); positive history of cirumcision (OR 3.2); number of daughters in the family (OR 2.1).

**Conclusion** Domestic violence against women is an important neglected public health problem in the Egyptian community that needs multidisciplinary approach to understand its causes and plan effective preventive measures. Healthcare providers can play a crucial role in addressing and treating victims of domestic violence.

02-3.3

### ALCOHOL AND HARM TO OTHERS IN RUSSIA: THE LONGITUDINAL RELATIONSHIP BETWEEN HEAVY DRINKING AND FAMILY DISRUPTION

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**Introduction** In Russia hazardous alcohol consumption among men has a major impact on life expectancy. However, the harms associated with heavy drinking are likely to include adverse impacts on drinkers' partners and children. Relatively little is known about the potentially major impact of drinking on family conflict, separation and divorce. Attempting to resolve this issue is complex because drinking may both cause and reflect family problems, therefore longitudinal data are required.

**Methods** We investigated the association between problem drinking and subsequent family conflict and disruption in a population-based study in Izhevsk, Russia. Subjects were 1307 men aged 25–54 years who were married/cohabiting in 2003–2005. Follow-up data on their family situation was obtained in a resurvey in 2007–2009. Men and proxy respondents (generally partners) completed interviews asking about alcohol consumption, socio-demographic variables, and family relations. Logistic regression was used to see if baseline drinking predicted family conflict and partnership disruption at follow-up.

**Results** Baseline problem drinkers had a significantly higher risk of subsequent family conflict (OR 3.57, 95% CI 1.84 to 6.91) and partnership disruption (OR 3.17, 95% CI 1.67 to 6.02), after adjustment for age and socio-economic factors. Using proxy accounts, rather than index, produced stronger associations. Other significant predictors of family disruption were past financial problems and man's age.

**Conclusions** Using conventional and unconventional measures of drinking, the significantly increased risk of family disruption suggests that in Russia alcohol has a considerable effect on family relations. Collecting information from partners, as well as index respondents, may enhance identification of problem drinkers in surveys.

02-3.4

HETEROGENEITY IN DISABILITY ASSOCIATED WITH MAJOR DEPRESSIVE DISORDER: EFFECTS OF ILLNESS, PERSONAL, AND ENVIRONMENTAL CHARACTERISTICS ON THE SYNCHRONY OF CHANGE BETWEEN DEPRESSION SEVERITY AND DISABILITY

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**Introduction** Major depressive disorder (MDD) is the leading cause of disability worldwide and its impact on patients' functioning exceeds that of chronic medical conditions. Previous studies reported that severity of depression and disability show synchrony of change.