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## Depression and personality traits among women submitted to domestic violence

Dear Editor,

Domestic violence against women, inflicted by the spouse, has remarkably increased, being considered by the World Health Organization (WHO) and the Pan-American Health Organization (PAHO) as a severe health public problem.<sup>1-2</sup>

According to the Seade Foundation (State Data Analysis Foundation), cited by Schritzmeyer,<sup>3</sup> in Brazil every four minutes a woman is attacked at her own home by a person with whom she has an emotional relationship. Available statistics and the records of police stations specialized in crimes against women show that 70% of the incidents occur at home and that the aggressor is their own husbands or partners.

According to Heise,<sup>4</sup> domestic violence and rape are deemed the sixth cause for loss of life years due to death or physical incapacitation among women aged 15 to 44 years – more than all types of cancer, traffic accidents and wars. Therefore, it is a subject that deserves full attention as, besides having emotional consequences for children who testify violence, it harms the country's economy, regarding health costs, and has psychophysical consequences for women.

Women who report having suffered domestic violence show combined forms of physical aggressions – black stains, fractures, burnings, marks of strangling attempts, bruises provoked by sharp instruments etc – as well as psychological aggressions which have as sequels: fear, affective isolation, emotional dependence, feelings of guilt and depressive pictures.

Our proposal was thus to verify the occurrence of depression and the presence of some personality trait that would compromise the health of women who suffer domestic violence and decide to stay in the conflicting and aggressive relationship.

With this objective, the Minnesota Multiphasic Personality Inventory (MMPI), and the Beck Depression Inventory<sup>5-6</sup> were applied. The use of these instruments allowed us to notice that attacked women who remain in the marital relationship are more prone to depression, showing feelings of loneliness, sadness, hopelessness, disbelief, irritation, low self-esteem and low self-confidence, which may characterize dysthymic symptoms.

Regarding personality traits, we verify that women who suffer domestic violence show schizotypic or schizoid traits, which favor introversion, affective isolation, persecutory anxiety, etc. This would lead women to perform objectal love choices identified with the same characteristics, increasing, therefore, the risks of trying to solve conflicts with aggressive impulses, as there is an increasing difficulty to solve them with dialogue.

There is, thus a vicious cycle: attacked women who remain with the aggressor become frequently aggressive, leading couples to have a daily life increasingly violent in which conflicts multiply and intensify.

**Patricia Gugliotta Jacobucci and Mara Aparecida Alves Cabral**  
Department of Psychiatry of the Medical School of the State University of Campinas, São Paulo

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