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PSYCHOTHERAPY AND PSYCHOSOCIAL TREATMENT: FUTURE DIRECTIONS AND RECENT ADVANCES

<u>Eric M. Plakun</u>ª °Austen Riggs Center, USA

This workshop addresses the future role of psychotherapy and psychosocial treatment in psychiatry and mental health treatment. This future depends on several factors related to psychiatric practice and teaching, but also to government policy toward funding treatment and research. In the realms of practice, teaching and research, it is ironic that, as psychiatric practice has become increasingly narrowly biologically focused, evidence is accumulating that psychotherapy and psychosocial treatment are effective forms of treatment for a range of individual and complex comorbid disorders. The field's biologically reductionistic stance constitutes a kind of "tunnel vision" that contributes to the increasingly recognized phenomenon of treatment resistance in psychiatry. This workshop reports evidence from epidemiology, molecular genetics and clinical research suggesting that psychiatry is adversely influenced by 3 unwitting false assumptions linked to its biological reductionistic stance: [1] Genes = disease, [2] Patients present with single disorders that respond to single evidence based treatments, and [3] The best treatments are pills. The future of psychiatry, and the role of psychotherapy and psychosocial treatment, depend on the field's ability to address these false assumptions, but also on policy issues like full implementation of mental health parity, and a shift in research and education policy that prioritizes funding of research into and teaching of nonspecific and specific "elements" shared by effective psychosocial therapies.

SEXUAL VIOLENCE AMONG HOUSE MAIDS AND ITS ADVERSE REPRODUCTIVE HEALTH OUT COMES IN ETHIOPIA, HAWASSA

Fasika Esatu^a, Negusse Deyassa^a

°University of Gonder School of Medicine & Public Health, Ethiopia

Sexual violence is a violation of human rights and a serious public health problem. It has a profound impact on physical and mental health, both immediately and many years after the assault. To date, sexual violence has received insufficient attention from researchers, policy-makers and program designers and it has been a long struggle to have it recognize as a legitimate public health issue

Objectives :- to assess the magnitude of sexual violence and its adverse RH outcome on housemaids, & to compare the adverse RH outcomes on sexually violated & non violated maids. A cross-sectional analytical study was conducted among 523 house maids in Hawassa. After the quantitative data was collected using self-administered questionnaire data were entered, cleaned and analyzed using SPSS. The lifetime prevalence of sexual violence was 15.3% with 95% CI (12.2, 18.4) and the 12 month prevalence of sexual violence were 5.9%. In this study the likely hood of experiencing sexual violence is higher among house maids who use any substance. The prevalence of any adverse RH outcome was 14.5% with 95% CI (11.5, 17.6) and the likely hood of experiencing adverse RH outcome is higher among those house maids who ever use any substance and house maids who experience sexual violence