

Mental Health Issues Of Victims

Thirty-one percent of all rape victims develop Posttraumatic Stress Disorder (PTSD) during their lifetimes. Rape victims are 6.2 times more likely to develop PTSD than women who have never been victims of crime.

(National Violence Against Women Prevention Research Center. nd. *The Mental Health Impact of Rape*. Charleston, SC: Medical University of South Carolina.)

Research indicates that thirty percent of all rape victims have experienced one major depressive episode in their lifetimes after the rape. Only 10 percent of women who have never experienced a violent crime have had a depressive episode. (Ibid.)

Rape victims are four times more likely to have contemplated suicide after the rape than non-crime victims and 13 times more likely than non-crime victims to have attempted suicide. (Ibid.)

An investigation into the suicides of women within one year of their giving birth found that there was a known or suspected history of intimate partner violence in two out of the five cases. (Walton-Moss, B. and Campbell, J. January 2002. "Intimate Partner Violence: Implications for Nursing." *Issues in Nursing*. Vol.7 [1].)

Thirty percent of female stalking victims and 20 percent of male stalking victims seek psychological counseling as a result of their victimization. They are significantly more likely to fear for their personal safety than people who have never been stalked. (National Institute of Justice. 1998. *Stalking in America: Findings From the National Violence Against Women Survey*. Washington, DC: U.S. Department of Justice.)

Three in 10 college women who have been stalked believe that they are psychologically and emotionally injured by the victimization. (National Institute of Justice. 2000. *The Sexual Victimization of College Women*. Washington, DC: U.S. Department of Justice.)

Sixty percent of recovered gunshot patients interviewed eight months after leaving the hospital reported that their physical health was "somewhat" or "much worse" than it had been prior to the victimization. Their emotional health was also affected: 39 percent reported problems with intrusive thoughts about being shot and 42 percent reported serious avoidance behaviors.

(Greenspan, A. and Kellerman, A. October, 2002.

"Physical and Psychological Outcomes 8 Months after Serious Gunshot Injury." *The Journal of Trauma*. 53 [4].)

Eighty percent of recovered gunshot patients interviewed eight months after leaving the hospital reported symptoms of Posttraumatic Stress Disorder (PTSD). (Ibid.)

Twenty percent of adults interviewed who lived in south Manhattan within several blocks of the World Trade Center during the events of September 11th reported symptoms of Posttraumatic Stress Disorder (PTSD). Of those adults interviewed living in northern Manhattan during the same period, 7.5 percent reported symptoms of PTSD and 9.7 percent reported symptoms of depression. (Galea, S., Ahern, S., Resnick, H., et. al. March 2002. "Psychological Sequelae of the September 11 Terrorist Attacks in New York City." *New England Journal of Medicine*. 346. [13].)

A survey of persons directly exposed to the Oklahoma City Bombing found troubled interpersonal relationships among 17 percent of the non-injured persons and 42 percent among persons whose injuries required hospitalization. (Shariat, S., Mallonee, S., Kruger, et. al. 1999. "A prospective study of long-term health outcomes among Oklahoma City bombing survivors." *Journal of the Oklahoma State Medical Association*. 92.)