

4th Euro-Global Congress on

Psychiatrists & Forensic Psychology

November 10-11, 2016 Alicante, Spain

The relationship between men's early maladaptive schemas, rape myth acceptance and self-reported likelihood of using force and raping

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Global efforts to understand sexual violence against women (SVW) persistently reinforce the magnitude and versatility of this multifaceted problem. Particularly, more thorough comprehension of the structures underlying SVW is warranted. The present study aims to examine the association between early maladaptive schemas (EMSs), rape myths acceptance (RMA) and self-reported proclivity to rape (RP). It was hypothesized that higher RMA is correlated with elevated RP, and that participants will report an increased tendency to use force rather than raping. Moreover, participants with elevated RP are more likely to endorse schemas from the disconnection/rejection domain, and that schema types are unlikely to vary among participants with the tendency to use force rather than raping. In total, 150 male students from an international university in Singapore completed a series of self-reported measures assessing RMA, RP, EMSs and social desirability. The findings confirmed that higher RMA predicted increased RP, and participants reported the use of force rather than raping. Although, RMA predicted RP significantly, the predictive power of 4.3% was rather low. Elevated RP was predicted by the unrelenting standards/hyper-criticalness, punitiveness and abandonment/instability schemas. Furthermore, there were no differences in the schemas endorsed among participants with an increased tendency to rape. The present study has implications for clinical and forensic psychology and further research on SVW in Singapore, primarily due to the plausible influences of culture on the findings. Preliminary support is provided for more thorough research on the use of schema therapy in rehabilitating sexually aggressive behaviour.

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Self-repair PsychoCorporeality

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The psyche is a phenomenal event produced by the body, to an adaptive purpose, to achieve adequate environmental homeostasis. Since then is the body to produce the psyche phenomenon and it inevitably affects its structure. The psyche has its own autonomy and, with its operations, in turn, affects the body that has produced it, changing the organic functional settings. This interactive cycle produces the organic changes in the connective tissues, in the organs, and in the various nerve endings. The new body settings, in turn affect the functioning of the psyche by changing its analytical and reading capacity of the internal and external environment. Tensions and information in the body, at a given time, constitute the zero point, which is used as a basis for making any assessment that purchases meaning in relation to the deviation from it. Each person creates his own reality and truth assessing it in relation to its zero point in place. To solve the various psychopathologies, you must obtain a general reorganization, in order to eliminate the various shenanigans. So you do not have to be limited to acting only on a psychological level, or merely physical, but you need a multidisciplinary intervention that consider the psychological aspects on one hand and a physical manipulative treatment on the other hand, aimed to free the connective tissue, the muscle fibers with their spindle and the various reflex zones from the alterations that have been produced in repeated attempts to environmental adaptation.

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