



Life Lines

Improving your quality of life, one step at a time

Issue #03:

WOMEN'S MENTAL HEALTH



The World Health Organization defines mental health as, "a state of well-being in which every individual realizes his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to their community."¹

While a lot has been done in the past decade to help bring more awareness of what it can mean to live with or support someone who is struggling with mental illness, for those dealing with mental health disorders, stigma still exists and the reality is that many people still don't know how to react, respond and offer help.

As we addressed in November's article "Men's Mental Health", both men and women experience many of the same mental health disorders, however their willingness to talk about their challenges and feelings are often very different. This month, we take a more in-depth look at women's mental health, to discover their unique health-care needs and find out how we can better support women who are struggling with mental health challenges.

Some enlightening facts about women's mental health:

- 47% of women were considered at high risk of developing mental health disorders, compared to 36% of men.²
- 25.7% of young women have self-harmed – more than twice the rate of young men.³
- Women are nearly twice as likely as men to be diagnosed with depression.
- Women who have experienced childhood trauma such as sexual abuse and physical violence are 3 to 4 times more likely to encounter depression as adults.⁴



- Women tend to experience more concurrent mental health disorders. Depression might be accompanied by anxiety, agoraphobia (feeling unsafe), panic disorders, somatoform disorders (symptoms of physical illness or pain that cannot be fully diagnosed), and post-traumatic stress disorder (PTSD).¹
- Women have significantly higher rates of developing PTSD following exposure to traumatic events – at least double that of men.
- An alarming 80% of individuals with eating disorders are women, which has the highest overall mortality rate of any mental illness.⁶

Though many mental illnesses seem to be gender neutral, women often have different signs and symptoms, requiring different treatments and services. For example, there are gender differences in age of onset and symptoms of schizophrenia. Women often develop this condition later in life and have more hallucinations and psychotic symptoms than men. With bipolar disorder, women tend to develop more rapid cycling forms and experience more anxiety, depression and medical illnesses than men. They also have a higher chance of being hospitalized during the manic phase.

Social stereotypes don't help to reduce stigma

Many may find this surprising, recent surveys show that "42% of Canadians were unsure whether they would socialize with a friend who has a mental illness" and only "50% of Canadians would tell friends or co-workers that they have a family member with a mental illness, compared to 72% who would discuss a diagnosis of cancer."¹

Many gender-based stereotypes also exist, creating societal beliefs that women are more prone to being emotional and therefore having emotional problems. Often, women's biology and reproduction factor into these negative stereotypes, but these physiological distinctions are valid contributors that do affect women's mental health.

Society has conditioned the way we see femininity. Many gender acquired risks arise from women's greater exposure to discrimination and disadvantages, such as traditionally earning less than men in paid work and bearing the responsibility of being wives, mothers and caregivers of others. Traditional gender roles can also increase women's vulnerability to mental health issues by imposing obedience and dependence. On top of a duty to take on the constant care of others, women are typically expected to take care of all the unpaid work of maintaining a household as well.

Women are often busy helping everyone else

We know that traditionally, women take on a higher proportion of caregiving of both children and elderly family members than men, but when it starts to become overwhelming is when women try to balance their roles in the workplace with what's going on at home. Despite seeing an increase in women in more executive roles, studies show that 80% of caregivers are still women. The burden of all of these responsibilities greatly increases their rates of stress - which not only affects mental health, but physical health as well. A WHO report pointed out that, "the inequity of the division of labour was the most important predictor of depressive symptoms rather than the absolute number of hours worked."⁴



There are also other fairly distinct factors which increase a woman's risk of developing mental health challenges. For instance, women suffering from emotional distress, exhaustion and parenting difficulties associated with newborns, or those who have experienced infant loss, can develop serious postnatal depression. They may feel isolated and unable to cope with the stress of added responsibilities due to the biological and physiological changes their bodies are undergoing post-pregnancy. Women's risk of experiencing mental health challenges also increases when economic, political and social forces intervene to disrupt their income, employment and living conditions. These all create disadvantages that can reduce access to mental health care. What's interesting is that when these factors are taken into account and addressed, they can offset biological and reproductive influences affecting women's mental health, and many risk factors then disappear.⁴

How can we better support women and their mental health?

While women are more likely to speak with their primary care physicians about mental health challenges, women also fear seeking treatment because of the social stigma and their obligations as parent and caregiver. If a woman does not look for help when a disorder first develops, it could mean that they delay seeking support and/or treatment for considerable time.

Historically, treatment has largely ignored gender distinctions, even though there are unique challenges for women with mental health disorders tied to biology. Women often have different responses to medications than men, and female life-cycle events can affect the instance and the way that mental health challenges present. A report titled, *Women, Mental Health and Mental Illness and Addiction in Canada: An Overview*, concludes that "women's and men's health and health needs are distinct both because of differences in their bodies and because of differences in how women and men live, work, and play, as well as how they were raised as children."⁵

Once we open our minds to the fact that women and men do have distinct needs, we can collectively begin to work on changing beliefs and addressing risk factors that are directly

related to "economic, social and gender disadvantages and biases."⁴ These inequalities affect mental and emotional well-being and addressing them will help with social change.

Courageously speak out against stereotypes

Having an awareness of stereotypes that are reinforcing stigma and preventing someone from getting help or talking about their mental health challenges can make a significant difference. Don't be afraid to challenge misconceptions like emotional problems being associated with women. Introducing new information can be the first step to changing someone's beliefs.

Support new ways to deliver help

Women need to be able to access services that allow them to feel more in control of their minds and bodies. They might need to be delivered in different, easy-to-access locations, or at alternate times than traditional care and treatment options. As a consideration, postpartum treatment could be given as part of general maternity services, where women being treated could bring their babies along. Today, most are admitted to psychiatric units in hospitals, alone. Pay attention to new partnerships and resources that make services available to women in familiar and trusted settings.



Get involved to support those who may be particularly vulnerable

There are some groups of women who are more vulnerable to developing mental health problems because their challenges are often overwhelming. Immigrant women, for instance, are “simultaneously experiencing an unfamiliar environment, facing new societal norms, and lacking their former social networks.” Women who are facing violence, aggression or abuse at home need extra support because these experiences tend to get worse and intensify in severity over time.

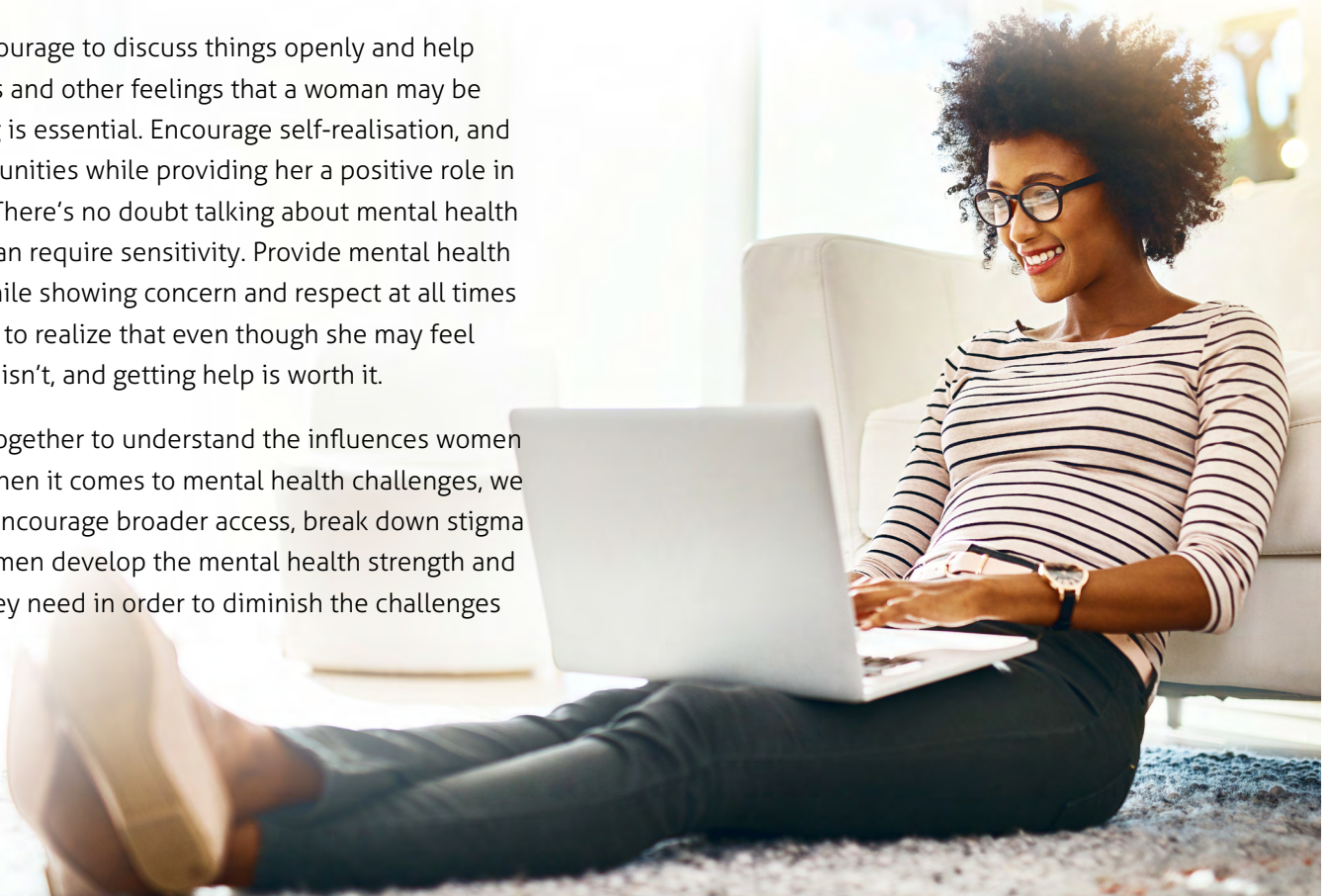
Talking is often the first step to encourage getting help

Having the courage to discuss things openly and help address fears and other feelings that a woman may be experiencing is essential. Encourage self-realisation, and share opportunities while providing her a positive role in connecting. There's no doubt talking about mental health challenges can require sensitivity. Provide mental health resources while showing concern and respect at all times and help her to realize that even though she may feel trapped, she isn't, and getting help is worth it.

By working together to understand the influences women encounter when it comes to mental health challenges, we can help to encourage broader access, break down stigma and help women develop the mental health strength and resiliency they need in order to diminish the challenges they face.

References:

1. World Health Organization (2014). Mental Health: a state of well-being. Health Topics. Retrieved on January 25, 2019 from https://www.who.int/features/factfiles/mental_health/en/
2. Chal, C. (2017) As cited in These 3 groups are at 'high risk' of mental health issues in Canada. Here's why. Global News. Retrieved on January 25, 2019 from <https://globalnews.ca/news/3415871/these-3-groups-are-at-high-risk-of-mental-health-issues-in-canada-heres-why/>
3. Agenda Alliance for Women & Girls at Risk (n.d.). Women's Mental Health Facts, Retrieved on January 25, 2019 from <https://weareagenda.org/womens-mental-health-key-facts/#>
4. World Health Organization (n.d). Gender Disparities in Mental Health. Retrieved on January 25, 2019 from https://www.who.int/mental_health/media/en/242.pdf?ua=1
5. The Royal, Areas of Care, Women's Mental Health (n.d.) Retrieved on January 25, 2019 from <http://www.theroyal.ca/mental-health-centre/mental-health-programs/areas-of-care/womens-mental-health/>
6. Eating disorders are women. <https://www.camh.ca/en/camh-news-and-stories/camh-library-resources-for-eating-disorders-week>.



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