

Women and Mental Health

Introduction

In Australia, more disability, dependence, and time out of the workforce can be attributed to mental illness than any other health problem¹. Position in society and experiences of living in society can explain the differences in the mental health of women and men⁶.

Sex Differences

There are significant differences in the types of mental illness affecting women and men, and the ways they are prescribed and react to medication.

- The most common mental illnesses experienced by women are depression, bipolar disorder and anxiety².
- Eating disorders affect more women than men³.
- Depression is commonly reported to be twice as common in women than men⁶.
- Deliberate self harm is common in adolescents; more so in young women than young men⁴.
- 10-15% of women report experiencing depression shortly after childbirth⁵
- Women are more likely to suffer with more than one mental illness at a time (co-morbidity), which is linked to increased severity of mental illness and increased disability⁶.
- Drug trials often exclude women, so when given medications based on knowledge gained from trials on men, women often receive larger doses than are needed¹⁰.

Gender Influences

Women are exposed to a wide range of specific risk factors that can increase their risk of poor mental health⁶. Women are at higher risk of developing co-morbidities when these risk factors occur together⁷:

- Women are affected unduly by the burden of poverty, and this influences their likelihood of suffering depression⁶
- Lesbian and bisexual women report worse mental health than other women¹, and Indigenous Australian women commit suicide at nearly twice the rate of non-Indigenous Australian women³.
- Women are much more likely than men to experience violence. Depression in adult women is between three and four times higher if they have experienced sexual abuse as children, or partner violence as adults⁶.
- Women are more likely to work in jobs that are unstable and of low status⁶, and to take on the unpaid role of carer⁷.
- Traditional roles expose women to higher stress and make it more difficult for them to change their stressful situations⁸.

Women are more likely to be diagnosed as depressed than men with the same symptoms⁶, and are also more likely to be prescribed anti-depressant medication than men with the same diagnosis⁹.

Hospital settings for the treatment of mental illness can be very threatening due to the high ratio of men to women. This puts hospitalised women at high risk of assault, threat and loss of privacy¹⁰

Implications for the Future

- Women's mental health outcomes could be improved by addressing the risk factors that specifically impact on women at an individual and societal level⁶.

- Evidence on the impacts of gender and mental health focuses mainly on the differences in frequency of mental illnesses. In the future, research, contributing factors, outcomes, health seeking behaviours, and the response of health services need to be addressed separately for women and men⁷.
- There is a need for treatment facilities and services to be tailored for the different and specific needs according to gender¹⁰.

¹ Women's Health Australia. The Australian Longitudinal Study on Women's Health: Mental Health. <http://www.newcastle.edu.au/centre/wha/Reports/Achievements/achievements-mentalhealth.pdf>. Accessed on 15/06/2006.

² Public Health Group, Department of Human Services (2005) *Victorian Burden of Disease Study: Mortality and Morbidity 2001*. Public Health Group, Rural and Regional Aged Care Services Division, Victorian Government Department of Human Services, Melbourne.

³ Mental Health and Wellbeing Unit, VicHealth (2005) *Burden of Disease Due to Mental Illness and Mental Health Problems*. VicHealth, Carlton.

⁴ De Leo D & Heller T S. (2004) Who are the Kids who Self-Harm? An Australian Self-Report School Survey. *Medical Journal of Australia*; 181(3): 140-144.

⁵ O'Hara MW and Swain AM. Rates and risk of postpartum depression - A meta-analysis. *Rev Psych* 1996;8:37-54.

⁶ Astbury J (2001) *Gender Disparities in Mental Health*. World Health Organisation Round Tables.

⁷ Patel V (2005) *Gender in Mental Health Research*. World Health Organisation, Italy.

⁸ World Health Organisation (2001) *World Health Report 2001: Mental Health: New Understanding, New Hope*. World Health Organisation, Geneva.

⁹ Williams, JB; Spitzer, RL; Linzer, M; Kroenke, K; Hanh, SR; deGruy, FV; and Lazev, A (1995) Gender Differences in Depression in Primary Care, *American Journal of Obstetrics and Gynaecology* Vol 173(2).

¹⁰ Kulkarni J (2001) Women and Schizophrenia in Health Sharing Women, 11(4), 17-20.