

Psychosocial Risk Factors for Women's Mental Health

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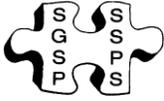
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Objectives: Although women and men show about the same lifetime prevalence of mental disorders, women suffer differently. Especially depression and anxiety disorders show a two- to three-fold higher prevalence in women than in men. Also suicide attempts are much more common in women, whilst suicide is more common in men.

Reasons for that seem to be mainly psychosocial ones, such as differential upbringing of boys and girls, but also influences in adult life. One of the most important risk factors seems to be violence, which women suffer in different forms: domestic violence, sexual abuse, gender-based harassment or all sorts of repression and discrimination in private or professional relationships.

In this symposium we will shed spots of light on some of these factors and their influence on women's mental health.

- Speakers:**
1. *Anita Riecher-Rössler, anita.riecher@upkbs.ch: **Why Is Depression More Common in Women?***
 2. *Louise Howard, louise.howard@kcl.ac.uk: **Domestic Violence and Mental Health in Women***
 3. *Marianne Kastrup, Marianne.Kastrup@regionh.dk: **Abuse and Mental Health in Migrant Women***
 4. *Karen Devries, Karen.Devries@lshtm.ac.uk: **Violence and Suicidality in Women / Violence, Women and Suicide: Systematic Review of Longitudinal Studies***



Why Is Depression More Common in Women?

Anita Riecher-Rössler

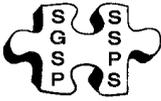
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Introduction: Ten percent of all men, but 20% of all women suffer at least once in their lives from depressive disorders. This is one of the most intriguing findings of epidemiology. The reasons for this gender difference are multifold.

Methods: Review and critical discussion of potential reasons for this gender gap based on psychiatric as well as psychological and sociological literature.

Results: Partly, the difference just seems to reflect bias, e.g. due to the better help-seeking of women or diagnostic stereotypes of doctors. But also after accounting for these potential artifacts there are differences which probably have mainly psychosocial reasons. The upbringing of girls might be an important risk factor for the later personal, emotional and cognitive style of women which predisposes them for anxiety and depression. But also distress and burdens of adult life can have a negative effect on the mental health of women: living in dependent structures in private or professional relationships with little influence or control, low social status, suffering violence and abuse, role overload and role conflicts. Traditional gender roles, but also recent changes of these roles in the society obviously can influence the gender gap.

Conclusions: Knowledge which could contribute to explaining the gender gap in the prevalence of depression and its recent development is scattered in psychiatric, psychological and sociological literature and has to be put together in order not only to better understand pathogenetic mechanisms of depression, but also to establish gender-sensitive psychiatry and psychotherapy.



Domestic violence and mental health

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Introduction: Domestic violence is a major public health issue worldwide, and has been estimated to account for up to 7% of the overall burden of disease in women, mostly due to its impact on mental ill health. Most of this violence is at the hands of partners, often referred to as Intimate Partner Violence. There is clear evidence that partner violence is associated with depression and anxiety disorders but there has been less research into other mental disorders.

Method: Cross-sectional national survey (UK Adult Psychiatric Morbidity Survey 2007) using the Clinical Interview Schedule-Revised version and screening questionnaires for other disorders; systematic reviews; pilot intervention before and after study

Results: 27.8% of 4206 women (95%CI 26.2-29.4) had experienced physical and/or emotional partner violence and all mental disorders were significantly associated with both types of violence with Odds Ratios around 3. Our systematic review identified 42 eligible studies of psychiatric patients. Among female patients, the prevalence of lifetime physical or sexual domestic violence reported by high-quality papers ranged from 26% to 64% among inpatients and from 8% to 60% among outpatients. Findings for specific disorders including depression will also be presented and results of a pilot study of an intervention to address domestic violence in mental health services will be briefly discussed.

Conclusions: Women with mental disorders are at increased risk of domestic violence and mental health services therefore need to address domestic violence using evidence based interventions



Abuse and mental health in migrant women

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There is increasing focus on the gender perspective related to the consequences of collective violence seen in a migratory context. Relatively few studies have however focused on gender differences with respect to physical violence, sexual violations and impact on mental health.

In a transcultural context, two groups of female migrants run a particular risk of being exposed to violence, namely trafficked women and refugees.

Both groups express many gender related problems where female therapists may play a special role. There is increasing attention paid to providing comprehensive care to such women recognising that many trafficked and refugee women have been and are subjected to severe forms of abuse particularly of a sexual nature. Further, they frequently come from societies where women's role is primarily centred round the home and female empowerment is found less important. Such women may need particular attention when having to cope with the migratory situation in order to avoid that their particular needs are neglected in the new host country. Many migrant women may feel dis-empowered when coming to a new, frequently hostile environment, and therapeutic interventions should have as a goal to help such women to develop skills to gain control over their life without infringing on others rights. To achieve this psychiatrists working in a transcultural setting have to listen and support the proposals to solutions these women bring forward, discuss their solutions and try to understand their cognitive and emotional world view by building a bridge over cultural incongruence.

Title: Violence women and suicide: systematic review of longitudinal studies

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Introduction: Intimate partner violence and childhood sexual abuse are two of the most common forms of violence against women globally. Cross-sectional data from low, middle and high income countries show that women who experience violence are more likely to report lifetime suicide attempts. But is this relationship a causal one?

Methods: We conducted a systematic review and meta-analysis of longitudinal studies examining intimate partner violence, childhood sexual abuse, and suicide attempts in women. As part of a series of reviews for the Global Burden of Disease Study, we searched 26 databases and screened 22002 records. Data on study characteristics and quality were extracted. Random effects meta-analyses were conducted to generate pooled estimates of effect. Heterogeneity was assessed using Higgins I² (p<0.10 was taken to indicate heterogeneity), and was explored narratively.

Results: 10 longitudinal studies met our inclusion criteria. Nearly all estimates showed a positive relationship between women's exposure to violence and subsequent suicide attempts. Despite a longitudinal design, methodological quality was limited. No studies examined suicide attempts in relation to incident violence.

Conclusion: Longitudinal studies suggest that violence exposure is associated with later suicide attempts. Because violence exposure can increase risk of suicide, interventions to reduce suicidal behaviour and improve mental health among women must adopt a gendered perspective and address women's experiences of violence.