The Impact of Gender Inequalities on Psychological Well-Being: A Threat for Women's Mental Health

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Abstract— Gender significantly influences mental health and mental illness. Gender plays a crucial role in maintaining good mental health. It gauges the impact and authority held by both men and women in the realm of economics, alongside assessing their social status, role, and the manner in which they are perceived in society, all of which can influence their psychological welfare and general quality of life. Men and women both face a variety of risk factors, with mental health problems and different types of mental disorders affecting individuals in distinct ways. Psychological distress and mental disorders affect women differently than men. Significant variations exist between genders in the prevalence of common mental disorders like depression, anxiety, and somatic complaints. These conditions, which mainly affect women, impact 33% of the population, presenting a notable public health concern. The gender gap presents a significant cultural divide in our society, resulting in diverse emotional and mental health challenges for individuals of both genders as a result of the entrenched gender norms. Discussions on the disparities in mental health between men and women have been persisting for quite some time. The present article investigate important viewpoints, evaluates available evidence, and delves into the psychological factors that impact gender disparities in this field.

Key Words: Mental health, Gender, Gender disparities,Mental disease, Men and women.

I. INTRODUCTION

Nobody in this world enjoys being handled badly or incorrectly. Disparities do occur, though, and they have an impact on the person experiencing them. In actuality, gender disparities not only cause us discomfort but also have a considerable negative effect on our mental health. Gender is a sociocultural framework based on social conventions and social roles, whereas sex is a biological fact based on physical traits. When social norms and attitudes determine a woman's lower social status, differences develop. Social and cultural aspects influence gender expectations and norms and have an impact on everyone's access to and quality of health and social services, as well as social and structural factors that determine health. Gender has an enormous influence on all elements of mental health and well-being. Gender norms are a product of social and cultural development and have an effect on everyone's ability to access and receive quality social and health services, as well as on the social and structural elements that affect health and have an impact on everyone's access to and quality of health and social services, as well as social and structural factors that determine health. There are disparities in health and wellbeing that cross generations resulting from this restricting and harmful gender conventions, attitudes, and expectations. (Heise, Greene and Opper, 2019). It is sometimes assumed the causes of unsound mental illness or negativity are commonly attributed to childhood trauma or ongoing stress, but there may be more causes that are harmful to both men and women's mental health and furthermore females gender are more susceptible. At all ages and in all locations of the world, women suffer from higher rates of physical and mental disorders than males (MacIntyre, Hunt & Sweeting 1996;Austad,2006; Seedat, Scott, Angermeyer, Berglund, Bromet and Brugha, 2009) . It occurs primarily in areas with few resources, when women who do not adhere to social cultural norms suffer numerous issues such as social marginalization, violence, or honour killing, all of which contribute to mental illness among women. In epidemiological surveys, gender differences in mental disorders, such as greater anxiety and mood disorders in women and more externalizing disorders in men, are routinely found. Gender issues are still underrepresented in current mental health studies. As a result, a greater emphasis on sex and gender in mental health studies is critical. Therefore, a greater understanding of gender disparities in menta health is essential (Green and Pope, 1999; Bertakis, Azari, Helms, Callahan and Robbins, 2000; MacIntyre, Hunt & Sweeting ,2006).

II. MENTAL HEALTH AND GENDER

The issue of mental illness is important, especially in view of how prevalent it has become recently on a global level. Although mental health is a personal matter, other aspects including class, colour, occupation, and gender all matter. Gender The researche focused at the occurrence of several forms of common mental diseases by gender. Women who struggle with anxiety are also

more likely to repress their feelings, that can result in withdrawal, loneliness, and hopelessness. Men are more inclined to externalize their emotions, which can lead to aggressive, impulsive, coercive, and non-compliant behaviour, according to Schleider and Wisez (2016), while ladies are more probably to believe their physical attributes based only on how adults treat them. The researchers established that gender specific variance in the prevalence rates of numerous mental diseases were due to differences in this liability to internalize and externalize.

Women and men communicate, deal with relationships, express their thoughts, and react to stress in different ways. Stress reactivity and brain architecture vary among different men and women for example, social pressure about traditional gendered roles may have varied consequences on the mental health of men and women. (Eagly and Wood,1999). Women and men may deal with workplace competition differently in a male-dominated culture. As we can see, earlier studies investigated whether hegemonic masculinity and men's mental health might be related. (Courtenay,2000; Emslie,Ridge, Ziebland and Hunt 2005) Boysen, Guy, Ashley Ebersole, , Robert Casner & Nykhala Coston (2014) found that when there is a matter of stereotypes about men and women,women, for example, are stereotyped as highly emotional, making emotional diseases like depression and anxiety seem more feminine. In the exploratory study conducted by Rosvall and Nilsson (2016), school nurses were questioned regarding mental well-being and also the students they support. It was ascertained that young women had a higher likelihood than compared to boys, and that it was harder to persuade boys to seek help for mental health problems.

III. REACTIONS TO STRESS

To comprehend the link between gender and mental health, one must first evaluate gender roles and typical responses to stressful events. Gender roles often favour one gender as being more stress-resistant than the other, which can have an impact on long-term development. Girls are stereotyped as weak and passive, whereas guys are seen as robust and capable of dealing with stress. In both mental health and mental disease, gender plays a significant impact. The gender-specific determinants as well as procedures that support and safeguard mental health and foster resilience to stress and adversity have received much more attention than estimated mortality connected to mental disorder, according to a study (World Health Organization Geneva (2001), females are more seemingly experience stress and trauma than men during their lifetime. The females believe their failures are a result of their inherent inadequacies as a result. The hypothesis put forth by Klonoff, Landrine, and Campbell (2000) was that if they compared women who had experienced sexist-based stress with those who had not, they would discover that the latter had mental health symptoms that were comparable to those of men. They did discover, however, that women who faced these stressors less frequently had the same number of symptoms as males, whereas women who had more stressors had higher rates of symptoms for depression and anxiety. In this perspective the Looking Glass Self, a sociological theory created by Charles Cooley becomes important to asserts that people will act in the manner that society expects them to act. When these adults insinuate that the girls are incapable of change, the girls will respond in kind. This causes more stress in girls, and thus more mental disease, as explained by both the entity and 'looking glass self' theories.

IV. PREVALENCE OF MENTAL ILLNESS DUE TO GENDER INEQUALITIES

Although males and females have similar rates of mental illness, some mental diseases affect women more frequently than men (Kessler, Berglund, Demler, Jin, Merikangas and Walters,2005). For instance, women are nearly twice as likely as men to have severe depression, which is associated with problems including decreased productivity, increased morbidity from medical conditions, a higher probability of poor self-care or non-adherence to treatment plans, and an increased risk of suicide (Rappaport, Clary, Fayyad and Endicott,2005; Mazure, Keita and Blehar, 2002) In the first year following birth, perinatal depression affects 6–13% of mothers and 8–11% of pregnant women. Women are three times more likely than males to use excessive amounts of sleeping tablets or participate in other non-fatal suicidal behaviour, but they use less pistol or other deadly means to end their lives (Weissman,Bland and Canino, 1999; Minino, Arias, Kaochanek, Murphy and Smith,2002).The patterns of psychiatric disorder and psychological discomfort seen in women differ from those seen in men, according to an analysis of mental health indices and statistics. Women 2-3 times in the comparison of men to exhibit signs of depression, anxiety, and generalized psychological distress, while men are more expected to exhibit addictions, substance use disorders, and psychopathic personality disorders. Gender differences are particularly pronounced in the incidence of common mental disorders (CMDs), which include somatic symptoms, anxiety, and depression.

Unipolar depression is twice as common in women, and is expected to be the second greatest cause of worldwide disability burden by 2020. Furthermore, females have a 2–3 times higher lifetime risk of anxiety disorders (e.g., generalised anxiety disorder) than males (Pigott,2002). Furthermore, depression seems to last longer females in the comparison of males, making it more common mental health issue among females. Regardless of that the symptoms of depression in men and women are

typically comparable. According to studies, poverty and common mental illnesses including despondency and anxiety, as well as female gender in India, are strongly correlated. Studies of treatment seekers and community-based research show that women are more vulnerable than men to be affected by CMD (Thara and Patel,2001). There may be disparities in the kind of mental health difficulties that men and women encounter, despite the fact that data suggests that they do so at comparable rates(Heise, Greene and Opper 2019).In both gender women normally experience sadness in similar ways, although women are more prone to experience unusual or "reverse vegetative" symptoms such increased appetite and weight gain. They are more into experience anxiety disorders than men, and their symptoms are more severe, depressing, and convoluted.

Experiencing discrimination has been linked to mental health issues according to many studies, Additionally, sexism exposes people to a number of risk factors for mental health disorders, such as agony and emotional pain, persistent strain, and a low self-worth and self-image. The World Health Organization (2020) recognizes the presence of health inequalities among people worldwide and within countries, with women facing disproportionate impacts of inequality at every stage of life. The evident gaps in social and economic areas experienced by women, such as limited educational and employment prospects, unequal wages, underrepresentation in positions of authority, and heightened emotional burdens from caregiving responsibilities to domestic abuse, collectively contribute to these disparities. Some psychological problems that are often seen in women are described below:

IV.I. DEPRESSION AND ANXIETY

The researchers claim that discrimination is a major factor in the differences in rates of mental illness between genders. Encountering discrimination may lead to feelings of anxiety and psychological trauma, depending on the circumstances. Research conducted in 2020 showed that women who reported facing gender discrimination in the previous year scored higher on a depression assessment tool compared to those who did not.

IV.II. LOWER SELF-ESTEEM

A cross-cultural study conducted in 2015 and discovered that throughout 48 countries, men were generally more confident than women. The pervasive impact of gender norms, stereotypes, and the focus on women's physical appearance in some nations, like the United States, is one reason for this. According to a succinct 2019 review, numerous research has demonstrated that gender stereotypes—such as the notion that boys are inherently superior to girls in math or science—have a direct impact on academic achievement and undermine women's self-confidence. The disparity between boys' and girls' mathematical aptitude vanishes in societies with less rigid preconceptions. Numerous mental health disorders, some of which have the potential to worsen, are associated with low self-esteem. This encompasses eating problems.

IV.III. DEPRESSION

Depression is the most frequent mental health issue among women. Women are twice as likely as males to encounter depression during their lifetime. In the previous year, one out of every nine women aged 18 and above experienced at least one serious depressive episode. (National institutes of health,2008).

IV.IV. PTSD

Women have twice as many disorders as men. PTSD is more likely to occur. According to American Psychiatric Associatioin(2013). Every year, one in five women in the US encounter mental illness, which makes them overly watchful, melancholy, and unable to feel emotions; whereas males, have problems with alcohol or drugs.

IV.V. ANXIETY

According to American Psychiatric Association research from 2003, women are twice as likely as males to experience panic disorder and generalized anxiety disorder.

Biological factors could be a contributing factor to why women have a greater tendency to attempt suicide than men, even though men are more prone to dying by suicide. Research has indicated that societies with higher levels of gender equality tend to exhibit diminished gender gaps in rates of mental illness. This suggests that differences are mainly shaped by inequity and bias. As per the World Health Organization (WHO), gender inequality is recognized as a factor that contributes to gender-based violence. Around 30% of women worldwide have experienced physical or sexual violence at some point in their lives. The percentage rises to 47% for transgender individuals, and it increases even more for transgender individuals of color, as well as those who have experience in sex work, faced homelessness, or have a current or past disability.

V. IMPROVING WOMEN'S MENTAL HEALTH: SOME ACTION STEPS

Exciting advancements in the field of women's mental health present a unique opportunity to lessen the effects of mental illnesses on women's daily lives and enhance their ability to recover. In order to have a positive impact, it is necessary to translate this information into tangible actions that can inspire transformation and advance the enhancement of mental and overall well-being among the women and girls of our country. Consequently, this article recommends the subsequent actions: Encourage people to recognize that women's mental health is an important element of their overall health.

I. Improve women's access to primary care and mental health services.

II. Increase the representation of women and minorities in academic research and medical.

III. Support national, state, and large community-based surveillance systems that track the mental health, distress, and well-being of women and girls.

IV. Recognize the special incidence of trauma, violence, and abuse towards girls, women, and female.

V. Promote the President's New Freedom Commission's recommendations for a recovery-oriented, strengths-based approach to treatment for women.

VI. Build resilience and protective variables to help girls and women's mental health and recovery.

VII. Incorporate gender concerns and considerations, especially mental health difficulties, into emergency preparedness and catastrophe planning.

VI. PREVENTIVE REMEDIES FOR MENTAL ILLNESS

Implementing solutions that address both gender as a sizable section of society at various degree is essential. On the fronts of law and justice as well as the provision of basic health care, they should be put into action. The primary care practitioners need to be heedful of the serious problems with women's mental health, ask frequently about reoccurring problems, provide the greatest intervention and support, and inform the public about these difficulties.

Along with policies addressing the whole range of women's health requirements, public health and social policies aiming at enhancing women's social status are required. It is also necessary to make improvements to social and mental health programmes and services in order to raise professional competency. Interventions that concentrate on the psychosocial environment are needed to address women's mental health.

One important factor in determining mental illness has been identified as gender.(World Health Organizations,1997).Indian culture is distinct with joint family systems, patriarchy, the requirement of marriage, especially for women; marriage as a sacred and permanent union; the status of daughter-in-laws at home, preference for the male child, the use of dowries, the lower educational status of women, strict codes of conduct for females(Sharma, Pandit, Pathak and Sharma,2013; Sharma,2015). Hence these elements have a substantial impact on the incidence, symptoms, prognosis, and treatment of the management of mental conditions between many Indian women. Mental illness affects all of us in different ways, and gender plays a part in how we as individuals are affected. A strategy to prevent, identify, and efficiently control common mental health illnesses in the workplace, such as chronic depression and anxiety, has seen fast growth in the number of workplace treatments.(Wang, Simon, Avorn, Azocar, Ludman, McCulloch, Petukhova and Kessler, 2007; Martin, Sanderson and Cocker, 2009).

A person's physical and mental health are interdependent. Many prevalent mental diseases as well as a person's mental health are influenced by the varied community, bodily and mental contexts that are present at different periods of life. Social disparities is a major risk factor for some major psychopathological and psychological diseases, with the risk of each disorder increasing with the level of inequality. Action must be taken to enhance living conditions from the time of conception through early childhood, older childhood, adolescence, the time spent starting a family and entering the workforce, and into old age. It would be possible to reduce the likelihood of that mental illness and mental health linked to socioeconomic inequality by taking action at each stage of life, while also enhancing population mental health. Due to the changing nature of gender roles, advancements in technology, money, and globalization, women will likely face significantly greater challenges in the next years. It is important to realize that women's mental health are complementary. A well-rounded strategy is required. Both male and female mental health practitioners should endeavor to meet the challenge. There is no exception for mental health and is an important issue to talk but it has to be seen from a different perspective, especially when we think of some preventive solution, then gender is a very important aspect to be thought about. Gender is a social cultural structure which includes how girls will behave or will they follow such rules

(Hosang and Bhui,2018). Although it is an outspread component that interacts with sex differences, gender can also mix with other social factors to potentially cause a differential worsening of biological susceptibilities. Both gender as well as sexual orientation must constantly be taken into account because of their different and interrelated effects on mental health. This begins with the widespread implementation of techniques for screening to identify individuals who are at risk of mental health issues and to stop them from developing, or at the very least, to enable action before they get worse (Colizzi, Lasalvia and Ruggeri,2020). Additionally, those who identify as non-conforming may experience particular difficulties, health problems, and health inequalities; a new research review emphasizes the significance of fostering gender diversity in order to prevent detrimental effects on mental health (Dominguez and Martinez, 2019).

VII. SUMMARY

Gender inequality has a significant and enduring effect on women and other marginalized genders. Anxiety, despair, low self-esteem, and PTSD may arise due to the impact of sexual violence, objectification of women, and challenges stemming from fraud and economic inequality. Counselling can offer support to individuals experiencing mental health challenges, but implementing structural changes is essential to promote fairness and alleviate the burden of mental illness on marginalized communities. Prevention and screening measures play a vital role in enhancing people's overall well-being and mental health. It is important to consider gender variations in risk factors for mental health problems when implementing interventions. Gender differences have seldom been considered in mental health prevention efforts. Studies focusing on adults, such as postpartum depression, contribute a majority of the information available, yet research for young children is limited. Additional research is necessary to understand how the interaction of physiological and genetic traits in males and females impacts mental health requirements, susceptibility to mental disorders, utilization of mental health resources, and reactions to pharmacological and unconventional therapies.

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