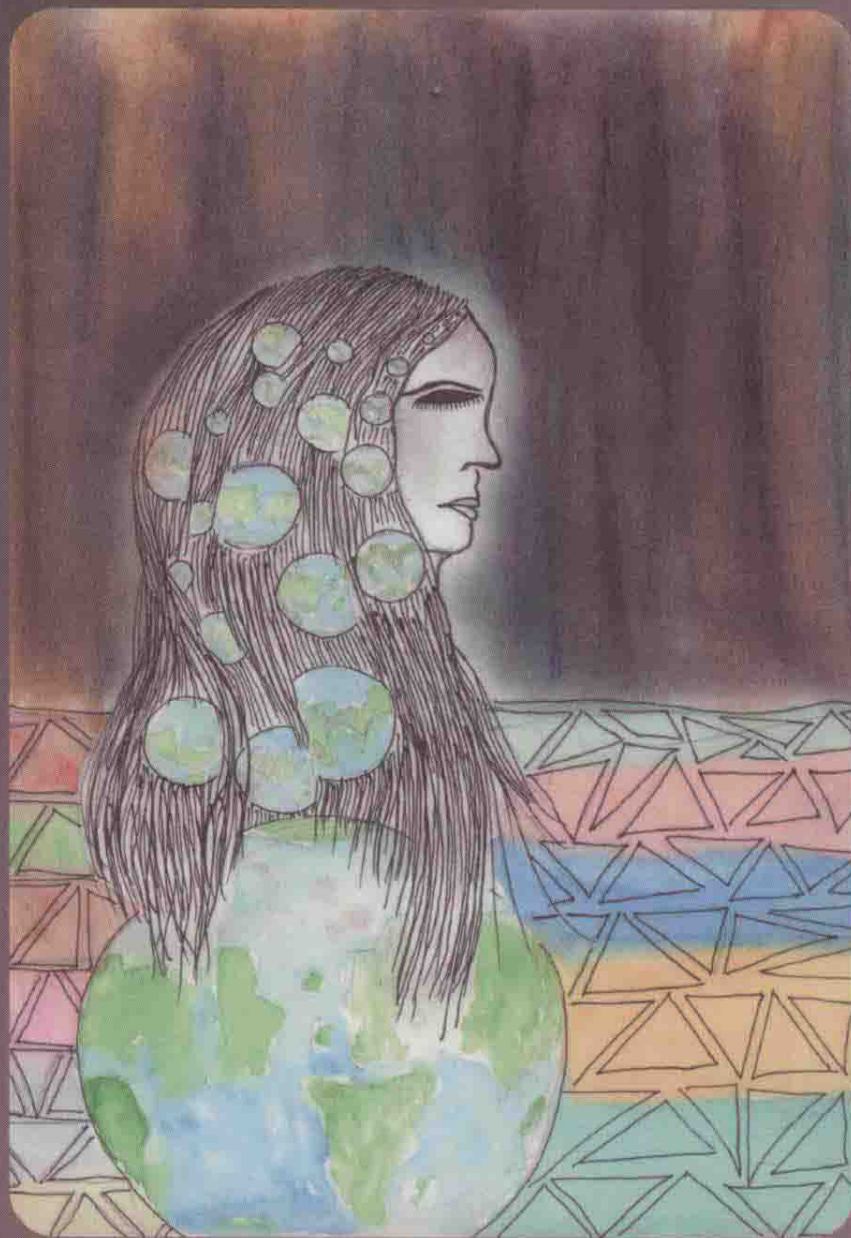


# Contemporary Topics in Women's Mental Health

Global perspectives in a changing society



Editors

Prabha S. Chandra

Helen Herrman

Jane Fisher

Marianne Kastrup

Unaiza Niaz

Marta B. Rondón

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World  
Psychiatric  
Association

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A John Wiley & Sons, Ltd., Publication

This edition first published 2009 © 2009, John Wiley & Sons Ltd

Wiley-Blackwell is an imprint of John Wiley & Sons, formed by the merger of Wiley's global Scientific, Technical and Medical business with Blackwell Publishing.

*Registered office:* John Wiley & Sons Ltd, The Atrium, Southern Gate, Chichester, West Sussex, PO19 8SQ, UK

*Other Editorial Offices:*

9600 Garsington Road, Oxford, OX4 2DQ, UK

111 River Street, Hoboken, NJ 07030-5774, USA

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**Library of Congress Cataloging-in-Publication Data**

Contemporary topics in women's mental health : global perspectives in a changing society / editors, Prabha S. Chandra ... [et al.].

p. ; cm.

Includes bibliographical references.

ISBN 978-0-470-75411-5 (cloth)

1. Women—Mental health. 2. Women—Mental health—Social aspects. 3.

Mentally ill women. I. Chandra, Prabha S.

[DNLM: 1. Mental Disorders. 2. Women's Health. 3. Interpersonal Relations. 4. Women's Health Services – ethics. WM 140 C7613 2009]

RC451.4.W6C673 2009

362.196'890082—dc22

2009021622

ISBN 978-0-470-75411-5

A catalogue record for this book is available from the British Library.

Set in 10.5/12.5 Minion-Regular by Laserwords Private Ltd, Chennai, India.

Printed in Singapore by Markono Print Media Pte Ltd

First Impression 2009

Cover illustration and Art Work by Meghana S. Chandra

**Contemporary Topics  
in Women's Mental  
Health**



# Foreword

Women have more illness than men. Even in high income countries where women have longer life expectancy than men, they still suffer more from illness. This is especially true of mental illness, which, all too commonly the forgotten family member, is a major cause of suffering globally. Understanding mental illness in women, then, has great potential to improve population health and change clinical practice.

One approach to understanding mental illness in women is to examine biological causes, linked to endocrine control of the reproductive system, for example, or the activity of serotonin-specific neuronal systems. There are the obvious links between some mental illness and changes in reproductive function: the menstrual cycle, the postpartum period, and the peri-menopause. A quite different approach is to study the place of women in society and the role of social, economic, cultural and psychological causes of illness.

These two approaches should not be in opposition. It is highly relevant and important to understand the biological processes that underpin mental illness. Equally, not to focus on the social determinants of illness that arise from the way society is organised or, regrettably, disorganised is to fail to understand the causes of mental illness in the fullest sense.

Similarly, both cause of illness and its consequences are important. The wider society, the community and the family may all have a role to play in causing or exacerbating mental illness. In its turn, illness has a powerful effect on the functioning of family and community and affects the wider society.

Causative factors for illness rightly claim attention. Violence (whether social or interpersonal), poverty, disrupted family relations, discrimination and stigma, employment and working conditions, and early childhood influences may all be potent contributors to mental illness. It is important to remember there may be protective factors at work as well. Resilience of individuals, families and communities may all help protect from mental illness in the face of adversity.

Illness, then, is recognised, but what about treatment? Cognitive Behaviour Therapy has been emphasised as an alternative to pharmacotherapy; is this a luxury that only rich countries can afford? No, appears to be the answer from this book. It is quite possible to integrate treatment for mental illness with other treatment in resource-poor settings.

These were the perspectives taken by the WHO Commission on Social Determinants of Health. The Commission recognised the fundamental importance for health equity of mental illness: tackling its social causes as well as ensuring an appropriate response to illness when it occurs. I am therefore delighted to see this book with its depth of understanding and evidence. It has the potential to further the cause both of improving the status of women in society and responding to the major global burden of mental illness.

**Sir Michael Marmot**

Professor of Epidemiology and Public Health, UCL  
Chair Commission on Social Determinants of Health

# Preface

The World Psychiatric Association is instrumental in disseminating knowledge to mental health professionals in every part of the globe. The book is another contribution to this endeavour. It was inspired by the XIII World Congress of Psychiatry in Cairo 2006, chaired by Professor Ahmed Okasha. It brings knowledge in the field up to date and discusses psychiatric disorders among women in a manner that is relevant to clinical practice and considers cultural and social realities in perspective. The various sections acknowledge rapidly changing conditions, including better education and more working women in some countries, and the widespread effects of globalisation. The book also focuses on challenges such as migration, war and violence and their impact on the mental health of women. While we are conscious that women's mental health and psychiatric disorders cannot be divorced from social and cultural realities, the book also gives due attention to the current advances in neurobiology of psychiatric disorders among women.

Preparing the book was a journey undertaken by mental health researchers from several cultures and geographical zones working in unison for a common cause, which developed in discussion between publishers, section editors and the consumers. The chapter topics evolved as the book took shape, much like women's lives the world over, where creative solutions have to be found depending on where life leads.

The book is special in two respects. First, a deliberate attempt is made to ensure representation of prominent authors from several parts of the world. Second, topics that are important for women and adolescent girls in today's changing world are juxtaposed with discussion of the classic psychiatric syndromes in order to make the book relevant and contemporary for clinicians, researchers and policymakers in the field. The book has five sections, each featuring several chapters and concluding with a commentary from the section editors. The authors are prominent researchers in the field from 12 countries and all continents are represented.

The first section discusses important psychiatric disorders. The second focuses on reproductive health and its interface with women's mental health. The third section has chapters related to ethics and service delivery. The fourth section addresses culture, globalisation and social change, while the final section considers social policy and health promotion related to women's mental health.

Even though we cast our net wide in terms of topics, we acknowledge that there may be relevant areas that are not touched on or are dealt with insufficiently. Sometimes there is discussion of topics in more than one section and chapter: for example, violence as a risk factor for psychiatric problems and as an important consideration in interventions is raised by several authors. We retain these overlaps so that the chapters can be read independently and to note the various consequences for women's mental health and the range of responses required to a problem of this type.

We gratefully acknowledge the expert and dedicated work by the authors and the Wiley-Blackwell publishing and production teams. Thanks to Meghana S. Chandra for providing us with the illustrations and cover art. We also thank the lovely and brave women who share experiences of their mental health journey in Chapter 8 in Section 1. We hope that clinicians, researchers, students and policymakers in the field of women's mental health will enjoy reading and learning from this book as much as we enjoyed and learnt while bringing it together.

**The Editors**



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