Mental Health

A healthy mind is as important as a healthy body to your overall well-being. Good mental health helps you feel good about yourself, connect with others, find meaning in life, and thrive at home, work, and play. Good mental health doesn’t mean you will never be sad, insecure, or worried. But good mental health can help you keep problems in perspective.

Some factors that influence mental health are out of our control, such as our genes and some life events. But many are not. Just like physical activity and eating right help to keep your body healthy, you can make lifestyle choices to help keep emotionally healthy, too.

What is mental health?
Mental health is how we think, feel, and act as we cope with life. It helps determine how we handle stress, relate to others, and make choices. Your mental health is shaped by the interplay of many forces. These include:

- brain chemicals
- culture
- environment
- genes
- hormones
- illness
- life events
- personality
- reproductive cycle
- society
Mental health exists on a spectrum. At one end are feelings, thoughts, and behaviors that allow you to thrive. At the other are feelings, thoughts, and behaviors that disrupt life and cause distress. Your point on the spectrum will change from moment to moment as the forces that shape your mental health change. You might not notice small changes in your mental health. But the big changes are easy to see and feel, such as the highs you might feel after reaching a personal goal or the lows after losing a job.

Your personal journey through life is unique. But there are predictable stages of a woman’s life cycle, from girlhood to older adulthood. At some points, a woman’s mental health may be more at risk of problems, such as after having a baby or in the years just before menopause. But with each stage comes a capacity for strength and growth, too.

Stress matters
We feel stressed when the demands of life and our skills and resources for coping are out of balance. We have short-term and long-term stress. Missing the bus or arguing with a spouse can cause short-term stress. Single parenting or financial hardship can lead to long-term stress. Even some of our happiest times can be stressful, like during the holidays or having a baby. Some of the most common stressful life events include:

- death of a spouse
- death of a close family member
- divorce
- losing your job
- major personal illness or injury
- marital separation
- marriage
- pregnancy
- retirement
- spending time in jail

A woman’s mental health is shaped by her body, mind, and life experiences.
Social conditions such as living in poverty and dealing with racism can expose people to ongoing stress. So can discrimination or harassment at work. Stress caused by trauma, intimate partner violence, or an abusive or troubled home life during childhood can have potent and long-lasting effects on a woman’s mental health. In fact, childhood sexual abuse, which is more frequent among girls, may have effects that last into adulthood—ranging from depression and anxiety to posttraumatic stress disorder (PTSD).

More familiar to many women is day-to-day stress. Stress that builds up can take a toll on your physical and mental health. Did you know that you are more likely to catch a cold during times of high stress? Long-term stress can put you at risk of more serious health problems, like depression or hypertension. Or make health problems you already have worse.

At the same time, not all stress is bad. Just enough stress keeps you focused and helps you to perform your best, such as the stress you might feel before speaking in front of a group of people. It also can prompt you to change a situation for the better, such as leaving a dead-end job. But any stress can affect your health. Pay attention to your body for signs that stress is building up. And try these tips to keep stress in check:

- Take time each day to relax and unwind, even if only for a few minutes.
- Aim for 7 to 9 hours of sleep every night.
- Eat healthy foods, which give you energy.
- Make time for physical activity, which relieves tension and boosts mood.
- Talk to friends and loved ones. They are good listeners and might offer a different way of seeing things.

Signs of Role Strain and Stress

Juggling multiple roles is a fact of life for most women today. Sometimes, our roles as wives, partners, mothers, workers, and caregivers can feel like they are competing for our time and energy. Role strain and stress can happen easily if you take on too much, set standards that are too high, and/or don’t get the support you need. But life roles can enhance and support each other, too. Research suggests that multiple roles are better for you than having just one. Look out for these signs that you are spreading yourself too thin:

- anxiety
- depression
- feeling you don’t have control, or a need for too much control
- forgetfulness
- headaches
- lack of energy
- lack of focus
- low morale
- not being able to get things done
- poor self-esteem
- short temper
- trouble sleeping
- upset stomach
- withdrawal
• Make time to do things you enjoy and that fulfill you.
• Set limits. Be realistic about what you can handle at work and in your personal life. Talk to your boss if work demands are too big to handle alone. If you feel overburdened, ask family and friends for help and say “no” to requests for your time and energy. Women often put the needs of others before their own.

Hormone rhythms and mood
Hormones are your body’s chemical messengers. They affect many different processes in your body. The menstrual cycle is one example. Hormones rise and fall during the month and make the menstrual cycle happen. Many women notice physical and mood changes in the week or two before their period. We know that hormones have an effect on the brain chemistry that controls feelings and mood. In particular, estrogen appears to have a strong effect on mood and mental health. But the exact process is still unclear. We do know that depression rates for girls go up suddenly at puberty—the time when a girl’s period begins. Mood changes right after having a baby can range from mild, short-lived “blues,” which last 2 weeks or less, to major depression, which lasts longer than 2 weeks. Some women report an increase in depressive symptoms in the years before menopause.

Even though hormones are powerful, keep in mind that many factors contribute to mood. A woman’s normal hormone rhythms are only one piece of the puzzle.

Taking care of your mental health
When you take care of your body, you likely strive to eat right, stay active, and take care to look your best. Your mental health needs similar care. In fact, to be healthy overall, you need to take care of both your body and mind—the two are closely connected. If you neglect caring for one, the other will suffer. These ideas will help you to care for both mind and body:

• Build self-esteem. Good self-esteem is linked to mental well-being, happiness, and success in many areas of life. It protects mental health during tough times. One way to build self-esteem is to value who you are and what you do. This is hard to do if you judge yourself by other people’s standards or rely on others to make you feel good about yourself. Instead, accept the qualities—both strengths and weaknesses—that make you unique.
• **Set realistic standards and goals.** Take pride in your achievements, both small and big. Positive thinking also boosts self-esteem. This comes naturally to some people. But it’s a skill you can learn, too. Many people are lifted up by their spirituality. It can shape beliefs and values and be a source of comfort in hard times. It can be good to tune out the outside world and connect with the spirit within you.

• **Find value and purpose in life.** People who pursue goals based on their own values and dreams enjoy stronger mental well-being. Think about your values and dreams. What makes you happy? What do you care deeply about? What are you good at? If you could change one thing in the world, what would it be? What do you dream about? How do you want your friends and family to remember you? Use your answers to set short-term and long-term goals for yourself. Keep your goals realistic. Review them every once in a while, and make changes as your values and priorities change.

• **Learn healthy ways to cope with hard times.** How do you react to stress, change, or hardship? Do you see setbacks as failures or merely bumps in the road? Do you avoid problems or look for solutions? Do you obsess about issues without taking action to resolve them? If your style needs improving, take heart: Positive coping styles and traits can be learned with some effort. If you have trouble improving thinking patterns on your own, a mental health professional can help. You might also benefit from life-skills classes. For example, parenting classes can prepare new mothers for what to expect. Being informed helps people to understand, control, and deal with situations that are new and stressful.

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**Do I have a problem with alcohol?**

Many women drink alcohol to cope with stress. But some women drink too much. Alcohol abuse and addiction cause stress in a job and family. Answer these questions to help find out if you might have a problem:

1. Have you ever felt you should cut down on your drinking?
2. Have people criticized your drinking?
3. Have you ever felt bad or guilty about your drinking?
4. Have you ever had a drink first thing in the morning to steady your nerves or to get rid of a hangover?

Talk with your doctor about your drinking if you answered “yes” to one or more questions. Even if you answered “no” to all the questions, talk to your doctor if drinking is causing you problems with your job, relationships, health, work, or the law.
• **Build healthy relationships.** We need healthy relationships to grow, thrive, and sustain us in hard times. They also protect from loneliness and isolation, which can lead to depression. Surround yourself with people who encourage and support you. You might draw strength from your ethnic or cultural community. Relationships that cause you to feel neglected, shameful, disrespected, or afraid are not healthy. Keep in mind that just as you need people, you are needed by others. Reach out and connect.

**What is mental illness?**
Mental illness is a collective term for a wide range of mental disorders. Mental disorders are medical conditions that disrupt how a person thinks, feels, and/or acts, resulting in distress and/or impaired functioning. Mental illness can be disabling, making it hard to meet and keep friends, hold a job, manage everyday tasks, or enjoy life. Mental illness is very common—affecting about 1 in 4 U.S. adults each year. Some mental disorders are more common in women. It’s not your fault if you have mental illness. These disorders are real diseases that cannot be wished or willed away. Fortunately, recovery is possible from most mental disorders.

**Causes of mental illness**
Most mental disorders do not have a precise cause. Rather, cause lies in a mix of the same forces that shape mental health. We do know that biology plays a key role in the development of mental disorders, as it does with all health and illness. For example, PTSD can develop after a person is exposed to a very stressful or terrifying event. Yet not everyone who experiences trauma gets PTSD. For those who do, other factors must make them more vulnerable to PTSD. We do know that women are more likely to develop PTSD than men. We also know a link exists between some physical diseases and mental illnesses, such as between heart disease and depression. The relation between mental illness and other diseases is an area of abundant research. Sometimes, mental illness can be a symptom of another disease. For example, depression can be a symptom of an underactive thyroid or overactive thyroid. When thyroid problems are treated, the depressive symptoms go away.

**Faces of mental illness**
Mental illness can affect people of any age, race, ethnicity, sex, income, or background. Certain groups of people have higher rates of reported mental illness. Rates of mental illness are much higher among the homeless, the incarcerated,
and people living in poverty. African Americans are overrepresented in these vulnerable groups of people. And African Americans with mental health needs are much less likely to seek or receive professional help. American Indians and Alaska Natives have limited access to help and appear to have much higher rates of depression, including suicide. Asian Americans have been stereotyped as “mentally healthier.” But studies show rates of mental illness similar to those of other Americans. Hispanic American youths are at much greater risk of poor mental health than white youths.

**Women and mental illness**

Being a woman puts you at greater risk of certain mental disorders, including depression, some anxiety disorders, and eating disorders. Some mental disorders show up differently in women and men. An example is attention-deficit/hyperactivity disorder (ADHD), which can cause similar problems for both males and females. Yet different symptoms appear to be one reason ADHD is often not recognized in girls and women. Also, it’s not unusual for people to have more than one mental disorder at the same time. About 15 percent of all adults who have a mental disorder in 1 year also have problems with drugs or alcohol, which makes treatment harder.

**Anxiety disorders** are the most common mental illness. They affect about 40 million American adults each year. For these people, feelings of fear, uncertainty, and anxiety do not go away and get worse over time. They may have chest pains or nightmares. They may even be afraid to leave home. Most anxiety disorders are treatable. Anxiety disorders include:

- generalized anxiety disorder (GAD)
- obsessive-compulsive disorder (OCD)
- panic disorder
- PTSD
- social anxiety disorder
- specific phobias

**Mood disorders** affect mood, energy level, and ability to function. More than 20 million American adults have a mood disorder. With depression, feelings of sadness and hopelessness do not go away. Severe depression can lead to thoughts of death or suicide. Most depressive disorders respond well to treatment. People with bipolar disorder have extreme mood swings, sometimes with normal mood in between. It is a lifelong condition that must be carefully managed. Mood disorders include:
• major depressive disorder
• dysthymia (diss-THEYE-mee-uh)—mild, chronic depression
• premenstrual dysphoric (diss-FOR-ihk) disorder (PMDD)—a severe form of premenstrual syndrome (PMS)
• postpartum depression (See page 215 for more information.)
• bipolar disorder
• seasonal affective disorder (SAD)—depressed mood triggered by the change in seasons, usually in the fall and winter

**Eating disorders** involve serious problems in eating behavior, plus extreme concern for body shape or weight. Women are much more likely than men to have eating disorders. They usually start in the teenage years, but some women seek treatment for the first time in mid-life. Getting help early is important. Eating disorders can cause heart and kidney problems and even death. The main types of eating disorders are:

- **anorexia nervosa**—an intense fear of getting fat that causes you to not eat, even though you become too thin
- **bulimia nervosa**—involves bouts of overeating followed by purging, such as by throwing up
- **binge eating**—out-of-control eating

**Body dysmorphic disorder (BDD)** occurs when a person is overly concerned about an imagined defect in appearance. BDD is not an eating disorder. But it may be present with an eating disorder, as well as an anxiety disorder or depression.

**Substance abuse and addiction** can occur with other mental disorders or be a stand-alone problem, which causes problems at work and in relationships. Also, people often use alcohol and drugs to cope with life problems. This use can lead to abuse and addiction. Drug and alcohol addiction is a serious, long-lasting problem. There are no easy cures. But it’s possible to overcome addiction with treatment.

**Schizophrenia** is a chronic, severe, and disabling mental disorder. People who have it may hear voices, see things that aren’t there, or think that others are reading or controlling their minds. They have trouble thinking logically and expressing emotion. In women, symptoms usually start in the mid-20s to early 30s. Medicines can help many of the symptoms, but it can take many tries to find the right drug. With treatment, many people improve enough to have a good quality of life.
Pregnancy and Depression

Depression is common during and after pregnancy. Pregnant women with depression can have a hard time caring for themselves. This can hurt the unborn baby. And depression that is not controlled during pregnancy triples the risk of postpartum depression (see below). You might not know you have depression because some normal pregnancy changes cause similar symptoms. So it’s important to let your doctor know about any mood changes you might be having while you’re pregnant.

After childbirth, many women get the “baby blues”—feeling sad, weepy, and overwhelmed for a few days. But some women develop postpartum depression, a serious but treatable condition that needs a doctor’s help. Postpartum depression can happen anytime within the first year of birth. In rare cases, a woman might have a severe form called postpartum psychosis. Some women don’t tell anyone about their symptoms because they feel embarrassed or guilty for having these feelings at a time when they think they should be happy. Don’t let this happen to you! Postpartum depression can make it hard to take care of your new baby. Infants of mothers with postpartum depression can have delays in learning how to talk. They can have problems with emotional bonding. They also might have problems with behavior, lower activity levels, sleep problems, and distress. **Call your doctor if:**

- Your baby blues don’t go away after 2 weeks.
- Depressive symptoms get more and more intense.
- Strong feelings of sadness or anger come on 1 or 2 months after delivery.
- It is hard for you to perform tasks at work or at home.
- You cannot care for yourself or your baby.
- You have thoughts of harming your baby or yourself.

Keep in mind that there are ways to treat depression during and after pregnancy. Seek help if you find yourself feeling depressed at any time.

*If you are taking medicine for depression and become pregnant, do not stop without talking to your doctor. Not using medicine that you need may be more harmful to you and your baby than using the medicine.*

**Personality disorders** are long-term patterns of thoughts and behaviors that cause serious problems with relationships and work. People with personality disorders have a hard time dealing with everyday stresses and problems. They often have stormy relationships with other people. Borderline personality disorder (BPD) is one of 10 types of personality disorders. It has been defined as affecting
mostly young women. People with BPD have problems controlling emotion. Many, but not all, people with BPD were abused or neglected as young children.

Alzheimer’s disease is not a mental illness. For more information on Alzheimer’s disease, see the Healthy Aging chapter on page 221.

How to know when you need help
Mental illness can be mild or severe. Even though mental illness is widespread, only about 1 in 17 Americans with mental illness is severely debilitated as a result. Many people with mild forms of mental illness might not seek help, even though their quality of life is suffering. If emotional problems interfere with daily living, you should talk to your doctor. Keep in mind that professional help might benefit you in rough times, even if you do not have a diagnosable condition.

Stigma: A barrier to treatment and recovery
Stigma, negative ideas linked to mental illness, is the biggest barrier to getting better. Many people don’t seek help for mental health problems because they are ashamed, even though treatment is available. One reason stigma persists is because mental illness is still widely misunderstood. Here are some common myths about mental illness:

- Mental illness is not a real illness, like cancer or heart disease.
- Mental illness is caused by emotional or personal weakness.
- Children don’t get mental illness.
- People with mental illness are violent.
- People with mental illness can will it away if they really want to.

Your culture also can influence whether you think it’s okay to seek help. Seeking help and drawing support from loved ones who understand is the only way to get better. Don’t let stigma stand in the way of getting help!

Where to go for help
There are many types of mental health professionals. They include:

- certified alcohol and drug abuse counselors
- clinical social workers
- faith-based counselors
- licensed professional counselors
- marital and family therapists
- mental health counselors
- nurse psychotherapists

Feeling hopeless?
If you are feeling hopeless or thinking about death or suicide, get help right away! Call this toll-free number: (800) 273-TALK (8255). You will reach the National Suicide Prevention Lifeline. This service is available to anyone, 24 hours a day, every day of the year. With help, it’s possible to feel good again.
psychiatrists
psychologists

A good place to start looking for help is the doctor who normally cares for you. Your doctor can suggest mental health professionals based on the nature of your problem. If you do not have a regular doctor, contact a community mental health center near you. These centers can help you find a doctor or mental health counselor, even if you cannot afford to pay for care. If you don’t feel comfortable with the professional you choose, it’s okay to contact somebody else. Feeling comfortable with the doctor or counselor helping you is important to getting better.

Treating mental illness

Today, many treatment options can help people with mental health problems and illness. Thanks to improved understanding of the brain and biology, new medicines are making it possible for people with serious disorders to work and enjoy a fulfilling life. Talking face-to-face with a mental health professional is another important tool for treating mental health problems. This is called psychotherapy. Some types are:

- behavioral therapy—seeks to change destructive behavior
- cognitive therapy—seeks to change or get rid of destructive thought patterns
- family therapy—involves every family member in the discussion and solving of problems
- group therapy—helps a small group of people with similar problems through use of a facilitator
- movement/art/music therapy—helps people to express emotions
- psychoanalysis—seeks to understand how past experiences influence mental health

Treating a mental health problem often involves more than one type of therapy, such as using medicine and behavior therapy. A problem might be helped with only a few sessions of counseling. Or treatment might last years. With severe mental illness, treatment in a hospital or outpatient clinic sometimes is necessary. Let your health care provider know if you don’t begin to feel better after starting treatment. Keep in mind that recovery can take time.

Recovery is a journey

The sooner a mental disorder is discovered, the better the chance for full recovery. Unlike most disabling physical illnesses, mental illness often begins early in life. Also, there is no lab test to tell if you have a problem that needs help. For these reasons, it’s important to talk with your doctor about any concerns you might be having as soon as possible. This way, if you do have a mental health problem or illness, you can start treatment early and begin a journey toward feeling good again.
On the day I came home from the hospital with my beautiful baby daughter, my world began to disintegrate. I was hit with intense nausea, vomiting, diarrhea, dehydration, and fainting. Breastfeeding my baby was out of the question. Every time I held her to my breast, I had to quickly lay her back down so I could run to the bathroom.

During the first 3 months of my daughter’s life, I was hospitalized twice, separated for a week at a time from her and my 16-month-old son. I was transformed from a very healthy, vibrant, and physically active 30-year-old to someone unable to perform even the simplest everyday tasks. I was devastated. I was a failure as a mom and couldn’t even get out of bed. I wanted to die.

During my second hospital stay, a nurse gently suggested that I might have postpartum depression. I was stunned. How could the horrible gastrointestinal symptoms I was experiencing be caused by depression? I could understand how I could be depressed because of the sickness I was suffering, but not the other way around. And I had never heard of postpartum depression. But I took her suggestion to heart and quickly sought a diagnosis, information, and help.

I started taking an antidepressant and soon felt nearly like my former self, able to take care of my babies and function around the house. I also immediately began seeing a psychologist and after about a year of therapy, I got my life back.

And not only that, I went on to have another beautiful baby girl a few years later, armed with the knowledge I needed in case postpartum depression struck again.

When I look back on that horrible time, I cringe, knowing that there are still new mothers out there who are dealing with the exact same thing. There is so much that needs to be done to spread awareness of perinatal mood disorders. I never hesitate to share my story with anyone who will listen. If I am able to reach out and help even one new mother, then what I went through will have been worth it.

Kristin Chandler, Arizona
# For More Information...

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<tr>
<th>Office on Women’s Health, HHS</th>
<th>Anxiety Disorders Association of America</th>
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<tbody>
<tr>
<td>200 Independence Ave SW, Room 712E</td>
<td>8730 Georgia Ave, Suite 600</td>
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<tr>
<td>Washington, DC 20201</td>
<td>Silver Spring, MD 20910</td>
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<tr>
<td>Phone number: (800) 994-9662, (888) 220-5446 TDD</td>
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<tr>
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<td>2000 N Beauregard St, 6th Floor</td>
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<tr>
<td>Phone number: (802) 296-6300</td>
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<th>National Institute of Mental Health, NIH</th>
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<tr>
<td>6001 Executive Blvd, Room 8184, MSC 9663</td>
<td>Colonial Place Three</td>
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<td>Bethesda, MD 20892-9663</td>
<td>2107 Wilson Blvd, Suite 300</td>
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<tr>
<td>Phone number: (866) 615-6464, (866) 415-8051 TTY</td>
<td>Web site: <a href="http://www.nami.org">www.nami.org</a></td>
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<tr>
<td>PO Box 42557</td>
<td>3268 Arcadia Pl NW</td>
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<tr>
<td>Phone number: (800) 789-2647, (866) 889-2647 TDD</td>
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<td>Arlington, VA 22209</td>
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<tr>
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<tr>
<td>750 First St NE</td>
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<td>Washington, DC 20002-4242</td>
<td>Phone number: (800) 273-8255, (800) 799-4889 TTY</td>
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<tr>
<td>Seattle, WA 98101</td>
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