

Surgeon General's Perspectives

MENTAL HEALTH MATTERS

Mental health and wellness are essential to overall health. The World Health Organization defines health as “. . . a state of complete physical, mental, and social well-being. . . .”¹ For all of us, our mental, physical, and social health are interdependent.

Consider the links between chronic disease and depression. Individuals who suffer from a chronic condition such as cardiovascular disease or diabetes have a greater risk of developing a mental disorder such as depression.¹ Individuals with depression have a greater risk of developing chronic diseases such as cancer.² The issue of comorbidity—the simultaneous occurrence of two or more conditions or diseases—is gaining interest.

Furthermore, recent research indicated that obese individuals have a significantly increased risk for developing a mood, anxiety, personality, and alcohol risk disorder.³ In this survey of 41,000 adults, the elevated risk applied to both men and women.³ In turn, individuals who are depressed may be more likely to become obese or have other poor health outcomes.⁴

While mental illness can be an isolating and personal struggle, it is also a public health issue. We as a society need to view mental disorders like other chronic medical conditions. They are highly treatable. For many individuals, recovery from mental disorders is possible. This message needs to be further emphasized to combat stigma and encourage more people to seek treatment.

Mental illness can weave itself through all aspects of one's life: physical health, parenting, work, childbearing, finances, caregiving, and common daily activities. An estimated 46.4% of Americans will experience some form of mental illness in their lifetime.⁵ Given a current U.S. population of more than 305 million, that figure represents an estimated 141 million of us. It does not include those affected by the mental illness of their spouses, parents, friends, children, or grandparents.

In the U.S., these disorders cost billions of dollars in direct health costs and indirect costs: decreased productivity, absenteeism, lost jobs and wages, untold pain and suffering, unraveling of families and friendships, and suicide. Various forms of depression are estimated to cost more than \$83 billion a year.⁶ Anxiety disorders, which affect roughly 40 million American adults,⁷ cost more than \$63 billion a year.⁶



RADM Steven K. Galson,
Acting Surgeon General

More than a decade of research tackling sex and gender differences in mental health has revealed insights that should influence how we manage these conditions. For major depressive disorder, 20.0% of women are affected vs. 13.0% of men. More than 6.0% of women will suffer from panic disorder compared with 3.1% of men. Women suffer from post-traumatic stress disorder (PTSD) at more than two times the rate of men, 9.7% for women vs. 3.6% of men.⁸ Women represent 90.0% of all cases of eating disorders, which have the highest mortality rate of all mental disorders.⁹

Men have higher rates of impulse-control disorders and substance abuse disorders than do women. Almost 10.0% of men have attention-deficit/hyperactivity disorder compared with 6.4% of women. Nearly 20.0% of men suffer from alcohol abuse, compared with 7.5% of women. Of men, 11.6% are affected by drug abuse vs. 4.8% of women.⁸

Males commit suicide at nearly four times the rate of females. However, women *attempt* suicide roughly two to three times as often as men.¹⁰ Men and women *do* have similar prevalence rates for some mental illnesses, as is the case with bipolar disorder.⁸ Yet notable differences exist in the presentation and course of these same illnesses. For example, women tend to have a later age of onset of bipolar disorder than men, and they are

more likely than men to experience a seasonal pattern of the mood disturbance.¹¹

Important biological differences between men and women, such as hormones and brain structure, may affect the risk of developing certain mental disorders. Environmental factors may also be associated with sex-based variations in the risk, diagnosis, course, and treatment of selected mental illnesses. Examples of such factors include trauma and violence, gender roles, treatment-seeking behaviors, poverty, social status, and coping mechanisms.

Mental health issues are not fully recognized by many policy makers, health-care providers, payers, and members of the general public. Mental disorders are too often untreated, underdiagnosed, misdiagnosed, ignored, stigmatized, and dismissed.

Conducting research, developing treatment strategies, and translating those findings into practice can help us prevent, manage, and detect mental illness. Correctly diagnosing and treating mental illness can mean life or death to an individual. Recognizing that reality, the Office of the Surgeon General has a 10-year history of work on mental health issues, starting with the publication of *Mental Health: A Report of the Surgeon General* in 1999.¹² Additional Surgeon General publications provide evidence-based information on preventing suicide,¹³ on children¹⁴ (youth violence¹⁵ and child maltreatment¹⁶), on women,¹⁷ and on racial and ethnic populations.¹⁸

In April 2002, the President's New Freedom Commission on Mental Health was established.¹⁹ The Commission identified policies that could be implemented by federal, state, and local governments to better serve adults with a serious mental illness and children with serious emotional disturbances.

In January 2009, the U.S. Department of Health and Human Services (DHHS) published *Action Steps for Improving Women's Mental Health*.² It combines the latest science of mental health with specific action steps for improving the mental health and well-being of women and girls. The document explores the sex-based differences in the risk, onset, course, and treatment of mental disorders.

Action Steps was supported by the DHHS Office on Women's Health (OWH), established in 1991 to improve the health of women. OWH has since expanded its charge to include girls. OWH provides national leadership to promote health equity for women and girls through sex- and gender-specific approaches.

Women's mental health is an essential part of their overall health. That concept serves as the overarching

theme of *Action Steps*. The report proposes the following actions, among others:

- Integrate mental health services into primary care.
- Accelerate gender-based research on mental health.
- Recognize the unique prevalence of trauma, violence, and abuse in the lives of women and girls.
- Build resilience and protective factors to aid recovery.
- Incorporate gender differences, including mental health issues, into emergency preparedness planning, training, and response.

The companion piece to *Action Steps* is entitled *Women's Mental Health: What it means to you*.²⁰ It targets a general audience with clear, concise, and visually interesting information. Its overall tone is positive, promoting good mental health throughout a woman's life span. Fear, stigma, trauma, and resiliency are addressed, as is the importance of seeking treatment.

These two publications represent a collaborative effort of experts across DHHS. I want to acknowledge those efforts on behalf of the Office of the Surgeon General. Special thanks go to the employees of OWH for their work.

As our society better understands the critical role of sex and gender in mental illness, we all benefit: women, girls, men, and boys. We have made progress in our research, in the translation of that research into practice, and in our understanding of mental health disorders. We have much more to learn and much more compassion to show. We can, and should, be role models and lead the effort to improve the mental health of Americans.

The author thanks Barbara B. Diskind, DHHS Office on Women's Health, for her contributions to this article.



Steven K. Galson, MD, MPH
RADM, USPHS
Acting Surgeon General

For reports and other resources, go to www.surgeongeneral.gov and the two websites sponsored by the DHHS Office on Women's Health: www.womenshealth.gov and www.girlshealth.gov.

To order or download the two *Action Steps* documents on women's mental health, go to <http://www.samhsa.gov/shin>. For copies, call toll-free at 1-877-726-4727.

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