THE BI-DIRECTIONAL LINK BETWEEN WOMEN'S AND MEN'S MENTAL HEALTH

Dear Sir,

I read with great interest, the recently published editorial by Dr Helen Chen in your prestigious journal.⁽¹⁾ I highly commend Dr Chen's article, especially her closing paragraph stating the importance of not dismissing the mental health needs of the male population. Dr Chen gave a good example of men's experience of psychological symptoms during the postnatal depression period of their female partners. I would like to humbly add some more examples of the bi-directional link between men's and women's mental health, starting from the childhood and adolescent developmental period.

Men who experienced child abuse are more likely to display psychopathology and become domestic victimisers in their adulthood. Women who reported physical child abuse or witnessed marital violence during their childhood are at a 4-6 fold increase in risk of experiencing marital violence in their adulthood. This could be explained by the theory of learned helplessness. Women might also consequently affect more shame, less guilt and less empathy, and subsequently victimise their children, hence creating an intergenerational lack of empathy and a vicious cycle of violence.

Women's mental health would not be achieved effectively without first fulfilling the Millennium developmental goal of women empowerment and gender equity. Our experience in Oman proved that negative adolescent attitude towards both women empowerment and the egalitarian roles of both genders is more prevalent among adolescents with psychological symptoms, such as having sleep problems, lower self esteem, current smoking, and history of indulging in violent behaviour. Another example of the challenges faced by women in Africa and the Middle East is polygamy. Spousal alcoholism and polygamy are strongly associated with postnatal depression in Nepal. Studies on women in polygamous marriages also show higher levels of somatisation, phobia and other psychological problems.

The age difference between a man and his partner also constitutes a challenge to women's mental health in our region. The larger the difference, the more likely wives would have to bear the burden of unpaid caregiving to their elderly husbands. Unfortunately, there is poor recognition of caregiving complexity and burden especially with regard to mentally-ill husbands. Caring for a person with dementia is burdensome and studies indicate that these women experience high rates of depressive symptoms and other negative mental health indicators.⁽¹⁰⁾

Yours sincerely,

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