The female social role and how it causes higher rates of depression in women versus men

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In 1972, psychologist Phyllis Chesler wrote that there was “a consistently large female involvement with psychiatry in America, an involvement that has been increasing rather dramatically since 1964.” (Chesler, p. 119) Unfortunately, this involvement has been increasing still since Chesler published her book. According to the National Institute of Health’s website, updated in September of 2010, more than 20 million people in today’s American society are suffering from depression and, more specifically, the number of women suffering from depression is twice that of men. (NIMH) There is much research attempting to determine why more women are suffering from depression than men but as noted by Dr. Donald J. Franklin, “the specific causes of depression in women remain unclear.” (Franklin) Almost all of the research investigating higher rates of depression in women versus men focuses only on genes, hormones, and stressful situations as causes of higher rates of depression in women. For example, the answer to the question on the National Institute of Mental Health’s website asking what causes depression in women states that, “several factors may contribute to depression in women.” The factors then reported by the NIMH were genes, “brain chemistry and hormones,” and stress. (NIMH) While it is most definitely true that women have many hormones that, if imbalanced, can cause depression, and that emotional stressors such as the loss of a loved one can also cause depression, there remains one factor that causes higher rates of depression in women versus men. The social role projected onto females in the United States makes women more vulnerable to depression and thus causes the rates of depression in women to be double that of men.

There are many types of depression including: major, bipolar, seasonal, psychotic, and dysthymia. Depression often occurs in conjunction with other mental
illnesses. For example, depression is often comorbid with anxiety, obsessive compulsive disorder, eating disorders, panic disorders, and phobias. Common symptoms of depression include but are not limited to physical symptoms such as joint and back pain, stomach upset, sleep irregularities, and changes in appetite. Emotional symptoms include a depressed mood for a prolonged amount of time, lack of energy or fatigue, and strong feelings of worthlessness or guilt that manifest about every day, difficulty concentrating, and poor decision making skills. (NIMH) According to the DSM-IV, a patient is diagnosed with depression when she has at least five of the above symptoms. (Depression Today) More specifically, those symptoms should be present almost daily for at least two weeks to receive an official diagnosis. Symptoms do vary though, from each developmental stage. In children, depression may appear as disruptive behavior that persists from day to day and interferes with daily function. Although it is not unusual for adolescents to experience unhappiness, if their unhappiness persists for two weeks or more then it is possible that he or she is suffering from depression. In fact, one in every thirty-three children and one in eight adolescents suffer from depression, yet twice the number of adolescent girls as adolescent boys suffers from depression. (Taushcer) Another 14.8 million adults suffer from major depression, and again, twice the number of women as men suffers from depression. Sadly, the suicide risk among people with major depression is the highest rate for any psychiatric disorder. Furthermore, suicide is the third most common cause of death in people between the ages of ten and twenty-four. Of these it is 200,000 women who attempt suicide annually. It is evident that depression is far more prevalent in females
than in males. (Caruso) The question is, though, why is depression more prevalent among females as opposed to males?

In Judith Lober’s article titled, “‘Night to his Day’: The Social Construction of Gender,” published in 1994, Lorber wrote “… gender cannot be equated with biological and physiological differences between human females and males. The building blocks of gender are socially constructed statuses…” (Lorber) While it is true that most often humans can be easily categorized based on their genitalia, the roles that humans learn, which then dictate how they act, are determined by society. Society has labeled males: humans with testicles and a penis, muscular, strong, aggressive, and sexual. Society has labeled women: humans without testicles and a penis, but a human with a vagina and ovaries, submissive, weak, care-taker, and the object of males’ sexual desire. In today’s society there are numerous expectations within the female role. Not only are women expected to be the nurturing caretakers, they are expected to be employed and maintain a youthful appearance so that they are the desirable sexual object for men. These expectations are internalized by females who are never able to fulfill such a demanding role. Those who do feel they have fulfilled the role, however, often then realize that they have no remaining purpose in life and are overcome with feelings of worthlessness and depression. Because the social female role is projected onto women by all facets of life, such as by other women, men, and the media, females internalize this role and its expectations. It is the failure to fulfill the expectations of this role and sometimes even the fulfillment of this role that causes higher rates of depression in women versus men.
According to Chesler, the female social role is “…the real oppression of women—which leads to real distress and unhappiness.” (Chesler, p. 118-119) Chesler means that these roles, which oppress women by limiting them to being nurturing care-takers and help seekers, usually seeking help from a higher power, men, only remind women of what they are missing out on in life by being stuck within the restrictions and expectations of these roles. While this idea certainly holds true for the past centuries, in today’s 21st century, women have an emotional tug of war. Not only are they expected to care for their home, children, and husband, today they are expected to do so while having a full-time job. Thus, women have the pressure of two full-time jobs while men only have the pressure of one. “Women often suffer from role strain over conflicting and overwhelming responsibilities in their life. The more roles a woman is expected to play (mother, wife, working woman), the more vulnerable she is to role strain and subsequent stress and depression.” (Helpguide.org) In fact, women who have no help caring for their families, home, and jobs, such as single mothers, are more vulnerable to depression. It has been found that single mothers actually suffer from depression three times more often than wed mothers. (Helpguide.org) Women are understandably easily overwhelmed and often feel they have failed at least one of their expectations, for between caring for a family, working a full-time job, and constantly maintaining a sexual appearance, failure is inevitable. Especially when a sexual appearance is considered a youthful face with a thin frame, women struggle to feel comfortable in the body nature has given them and thus, do not feel sexy and in turn feel they are not the object of sexual desire for males, failing at fulfilling at least one of the expectations constructed for them by society. Thinking about battling the traditional restriction created by society
for women that women should only be “stay-at-home moms” and cook and clean and care for their families with the modern expectation that women may have a full-time job but they still must be a “stay-at-home mom,” while all the man must do is work all day and come home to a meal and a groomed house prepared by his wife, has proven to have taken a toll on women. For these reasons it is evident that the female role constructed by society causes females great unhappiness which eventually develops into the more severe problem, depression.

Depression may actually begin at a young age when the female role is first being internalized by young girls. In fact, the finding that twice as many women as men suffer from depression holds true for female adolescents as well. (Gurian) “Little girls are socialized by their parents and teachers to be more nurturing and sensitive to the opinions of others... This type of socialization is theorized to lead to greater depression in women, who must look outside themselves for validation.” (Schimelpfening) Because their peers are also looking for validation from their peers, girls end up “policing” each other (YWCA); a problem men do not face. Girls “police” each other on how well they are fulfilling social expectations. While they do not explicitly say to one another, “Hey! You are not fulfilling our social roles as females,” they do say, “Hey Fatty! Want a twinkie?” or “You’re not sexy, of course you don’t have a boyfriend.” Girls end up desiring to fulfill the social expectations of the female role without realizing that is what they are doing. For example, one expectation of females is to be the object of males’ sexual desire. Girls are taught by their mothers and the media that to be the sexual desire of a male she must be sexy, and to be sexy in today’s modern time she internalizes that she must be thin. Then, girls “police” each other and base their actions
on what other girls are doing. Alexa said, "I don’t necessarily diet but I am aware of what I eat because everyone around me is watching their weight or on some diet… like it’s the ‘in’ thing to do." (Collins, p. 36) The idea that girls must be thin to be sexy causes even more susceptibility to developing depression.

This often unattainable physical appearance causes high rates of eating disorders in girls which are comorbid with depression. In an online survey by *SELF* magazine and the University of North Carolina at Chapel Hill, researchers discovered that among women between the ages of 25-45, 67%, not including those women diagnosed with eating disorders, want to lose weight, and 53% of women who diet are already “at a healthy weight,” yet they still want to lose weight. (*SELF*) Shockingly, as found by researchers at the APA task force on the sexualization of girls, 40% of girls who are diagnosed with eating disorders are between the ages of 15 and 19, but symptoms of eating disorders can become apparent in girls as young as kindergarten. (APA)

While, dieting is not always healthy, as in Alexa’s case, there is the other extreme, overeating, which is never healthy. In the article titled, “Should Obesity be Called a Mental Illness?” Massie, Cavanaugh, Davis, and Storch question whether or not obesity should be added to DSM-V. (Massie, Cavanaugh, Davis, and Storch) They say that many obese people eat for comfort. Developmental issues, such as sexual abuse may result in a girl feeling she has no control, so she eats as an attempt to get control over something. It has been found that obesity can lead to depression or depression can lead to obesity. People who are obese feel ugly because they do not fulfill the societal expectation that thin is beautiful. If they do not fulfill this expectation,
they are aware that they are no longer the sexual object of men’s desire and thus they have no purpose, for without a man’s affection and interest they cannot procreate and then they cannot fulfill their caretaker role as part of the female role constructed by society. However, it is also possible that the imbalance in serotonin levels that often occurs in women with depression leads to overeating as an attempt to raise those decreased serotonin levels and feel happiness once again. Also, if a woman is on medication as treatment for her depression, the medication may cause her to gain weight. This weight gain then causes the woman to enter the same cycle as described above. She does not feel beautiful and thus, feels insignificant to the world for she feels she will never be able to fulfill her role of nurturer for no man will ever find her the object of sexual desire. It has actually been found that people who are morbidly obese are five times more likely to have depression. (Caruso) Most importantly, “People with eating disorders tend to suffer from low self-esteem” (SAMHSA), and low self-esteem leads to depression.

Just as women internalize that their main function is to be the object of sexual desire for men, this idea is internalized by young girls and adolescents as well. In fact, according to the APA’s Task Force on the Sexualization of Girls, sexualization is linked with some of the most prevalent mental disorders including, eating disorders, as discussed, low self-esteem, and thus, depression. “What young women believe about themselves and how they feel in the present moment about themselves were shaped by how they were treated and what they were exposed to when they were girls.” (APA) In almost every form of media available in today’s American society, girls and women are shown in sexualized ways, whether it be on prime-time television, the commercials aired
in between the prime-time television shows, music videos, or magazines. Because girls are consumers of these forms of media, they are exposed to these messages every day. In fact, the Kaiser Family Foundation reported that in 2003, “68% of children have a TV in their bedroom, that 51% of girls play interactive games on their computers and video game consoles, and that girls, like boys, are on their computers about an hour each day visiting web sites, listening to music, frequenting chat rooms, playing games, and sending messages to friends (D. Roberts et al., 2005).” (APA) This extreme exposure to media and the messages portrayed by them creates even more opportunities for exposure to forms of media sexualizing girls and women which then teach them that they are and should be sexual objects. One specific characteristic projected onto young girls by the media, for example, is the previously discussed modern idea that thin is sexy. The YWCA reported in “Beauty at any Cost” that the “Sexualization of women—the sole focus on one’s physical and sexual attractiveness—and increasingly of young girls and teens, occurs in virtually every form of American media. Women are much more likely than men to be shown with unrealistic standards of physical beauty, and the consequences are great, including negative effects on mental health, cognitive functioning and their beliefs about ideal standards of beauty.” (YWCA) A study by Gregory Fouts and Kimberly Burgaff titled "Television situation comedies: female body images and verbal reinforcements," found that it only requires thirty minutes of viewing a show and the advertisements in between the shows for a woman to alter her perception of her body. “Young women of this generation ‘have learned from a very young age that the power of their gender was tied to what they looked like—and how ‘sexy’ they were—than to character or achievement.’” (YWCA)
Because both adult women and young girls are sexualized and objectified by men and the rest of society as well, the distinction between adults and children becomes skewed. (APA) Girls are now being sexualized in the same way women are, and they are feeling pressure at too early an age to be a sexual object for males. Thus young girls start looking for validation that they are the sexual object of desire of males at too early an age. This need for validation that the girls have fulfilled a part of their social role leads to premature sexual activity which often in time leads to depression.

“The association between self-objectification and anxiety about appearance and feelings of shame has been found in adolescent girls (12-13-year-olds).” (APA) Girls have begun to self-objectify causing them great emotional distress. According to the APA’s Task Force on the Sexualization of Girls, “cognitively, self-objectification has been repeatedly shown to detract from the ability to concentrate and focus one’s attention, thus leading to impaired performance on mental activities.” (APA) This “impaired performance of mental activities” then leads to poor academic performance by girls who today also feel pressure to excel academically so that they may later have a successful full-time job in addition to fulfilling the tasks of a “stay-at-home mom.” If girls are distracted by objectifying themselves, they cannot put forth their best effort academically. Their grades begin to fall and they feel failure, yet again, that they have not fulfilled part of their social role. They are then inclined to put all of their effort into being sexual objects leading to more poor academic performance, in turn leading to more feelings of failure and thus low self-esteem. This low self-esteem may turn into depression. It could also cause girls to seek validation that they are desirable sexual objects of males so that they feel successful at something, which then leads to
premature sexual activity. Premature sexual activity itself usually leads to depression. “Objectification of women plays into a general culture of tolerance of unhealthy sexual behaviors for young girls. One survey found a surprising level of acceptance for forced or coerced sex among both boys and girls.” (APA) Psychologists have been aware for a while that there is a link between premature sexual activity and depression, especially in teen girls. In 2005, a study conducted by Mazzaferro, Murray, Ness, Bass, Tyus, and Cook discovered that teenage girls participating in sexual intercourse “were up to three times more likely to be depressed a year later than girls who did not take those risks.” (Mazzaferro, Murray, Ness, Bass, Tyus, Cook) From this study it is evident that the sexualization of girls is detrimental to their emotional health. As girls grow older, the problematic results of sexualization of women still occurs. “For example, there is evidence that sexualization contributes to impaired cognitive performance in college-aged women,” who then face the same struggles with sexual activity and depression as teenage girls. (APA) The daughters of these women learn from their mothers that females are to be the sexual object of desire of males and they too partake in premature sexual activity in an attempt to fulfilling their social role. Because they were sexually active prematurely, they may have depression soon after and then seek more validation from males in an attempt to find happiness. Their daughters watch as their mothers seek validation from males. The daughters also seek validation from males. This cyclical nature driven by the sexualization of girls, motivated by the role for females constructed by society, leads to higher rates of depression in women.

Furthermore, “The sexualization of girls contributes to the idealization of youth as the only good and beautiful stage of life.” (APA) As a response to this “cultural standard"
of beauty, numerous women invest great amounts of energy into maintaining a youthful appearance. In fact, anti-aging products had the greatest increase in sales of any skin care product in 2005 with an increase of 10.7%. Facial products are not the only means women use to appear more youthful; many women go “under the knife” because they are so desperate to remain in the societal restriction that sexy is young and they must be sexy to remain the object of sexual desire for men. (APA) Failure to achieve “traits which to a large extent are out of their control,” leads to low self-esteem in women which leads to higher rates of depression in women versus men. The American Society of Plastic Surgeons has compiled data revealing the increase in plastic surgeries used by older women to maintain a youthful look. “Between 2000 and 2005, annual rates of Botox injections rose from roughly three quarters of a million to almost 4 million, amounting to a 388% increase. In the same 5-year period, there was also a 115% increase in tummy tucks (from 62,713 to 134,746 annually), a 283% increase in buttock lifts (from 1,356 to 5,193 annually), as well as a stunning 3,413% and 4, 101% increase in upper arm and lower body lifts, respectively. (American Society of Plastic Surgeons, 2006c). (APA) Most interestingly, many of the procedures performed “were age specific.” It has been found that both young and older women get nose jobs or breast augmentations at about the same rate. However, the rates of breast lifts, butt lifts, tummy tucks, and liposuction in women 35-59 years old are double that of the rates of breast lifts, butt lifts, tummy tucks, and liposuction in women 19-34 years old. (APA) Unfortunately for women who feel the pressures of society to look younger, nature will take its course no matter what amount of plastic surgery she has. “This inability to meet the culturally imposed standard of beauty may lead to body shame, lowered self-
esteem, and a reduced sense of well-being. There is evidence that exposure to thin-ideal images in the media and subsequent thin-ideal internalization have negative effects on adult women.” (APA) The inevitable failure to meet these social expectations for appearance of women leads to severe low self-esteem and then depression in women.

In addition to working against nature to maintain a youthful appearance so that they are the object of males’ sexual desire, adult women are expected to, in today’s society, care for their family’s children and hold a full-time job. Working tediously to fulfill the expectations that come with their role, when some adult women feel that they have fulfilled their roles as nurturing care-takers, for example when their children have moved out of the house, they feel that they have had a loss, a loss of the role itself.

“Traditionally, depression has been conceived of as the response to—or expression of—loss, either of an ambivalently loved other, of the ‘ideal’ self, or of ‘meaning’ in one’s life. The hostility that should or could be directed outward in response to loss in turned inwards toward the self. ‘Depression’ rather than ‘aggression’ is the female response to disappointment or loss.” (Chesler, p. 44) As mentioned before, a known cause of depression in women is an emotional stressor such as loss. By losing their role and the experience of spending so much time trying to fulfill it, women who feel they have successfully fulfilled their role feel almost as if they are experiencing a death in the family. They feel as if an essential part of their identity is dead. It has even been stated that, for reasons such as this, older women do get depressed more often than adolescents. “Dr. Pauline Bart studied depression in middle-aged women and found that such women had completely accepted their ‘feminine’ role—and were ‘depressed’
because that role was no longer possible or needed.” (Chesler, p. 44) Chesler supports this theory suggesting that once women realize their “already limited opportunities for sexual, emotional, and intellectual growth decrease even further” as they grow older, they become depressed (Chesler, p. 44)

Unfortunately, the only way to further research societally constructed gender roles for females is to make female gender the independent variable and see if depression results as the dependent variable. This is not possible, though, because gender cannot be an independent variable. “Whatever genes, hormones, and biological evolution contribute to human social institutions is materially as well as qualitatively transformed by social practices.” (Lorber) Biologically, humans can be categorized into two different categories, for the most part, because they have obviously different genitalia. However, the gender roles of male and female are roles learned from society. “People have to learn to be women and men.” (Lorber) It is possible, though, that if completely anonymous self-surveys were given to the same amount of men and women from the same age group asking questions concerning general health issues that men may answer more honestly regarding their depression. Questions would be asked as such as:

- Are you male or female?
- How old are you?
- Do you have high cholesterol?
- Do you have heart disease?
- Do you have depression?
By including depression among other diseases more commonly associated with men, it is likely that they would answer more honestly as opposed to denying it, for the survey would be completely anonymous. From these surveys, it would be possible to determine from the sample a general relationship between the number of men and women from specific age groups suffering from depression. However, because gender is a socially constructed entity, no thorough experimentation could be done to accurately determine if the social role constructed and projected onto females is the cause of higher rates of depression among women versus men.

Regardless, it is essential that change begins in today’s generation of girls so that it can proceed from this generation onward. Antidepressants can only do so much for women. The root of the problem needs to change in order for the rates of depression in women to decrease. There are several ways to challenge the internalization of the female social role. If girls stop “policing” each other to maintain the social ideas that have been created for them, more and more girls will resist conforming to these unhealthy social standards. Furthermore, if girls refuse to fuel the media with these social standards but instead create their own standards, the media will have to appeal to those girls with those standards. The media, which have become one of the largest, quickest ways to relay information to the whole world, projects the social restrictions and expectations of females onto young girls, who then grow up thinking that is how they want to be because that is how they ought to be. “Fueled by consumer culture, they are also a delivery system for already-existing cultural values”. (APA) Jean Kilbourne said in her documentary, “Killing Us Softly,” “The public thinks of themselves as citizens when it needs to think of themselves as consumers.” This is an exceptional point for if the public
refused to buy magazines or watch shows in which women are sexualized, then companies would be forced to change their messages. “Some girls and their supporters, now and in the past, have resisted mainstream characterizations of girls as sexual objects. Through media education and literacy, the creation of media subcultures, participation in athletics, comprehensive sex education programs, activism, and religious/spiritual practices, girls, their peers, adults in their lives, and institutions that support them help to challenge the narrow prescriptions for girls in this culture.” (APA) Magazines such as *Teen Voices* and organizations such as SPARK Summit create spaces for girls to feel safe and supported, breaking through the restrictions and expectations society has made for them. If alternatives such as these magazines and organizations continue, they will propel the change in the female role and more girls will join the change. Once these girls become women they will raise their daughters with the same mentality they created, and their daughters will raise their daughters the same way. This process will perpetuate the change in the social role of women and thus decrease and then level out rates of depression between women and men.
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