

Study reveals rural, unmarried women at higher risk for depression

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Mayo Clinic research suggests unmarried women living in rural areas have lower self-rated health status than their married counterparts. This lower health status often includes greater instances of self-assessed feelings of depression. The results of the study were recently published in the *Journal of Evaluation in Clinical Practice*. They suggest that primary care physicians should take a proactive role in addressing health concerns of single women.

"We tend to focus on disease, but as the World Health Organization notes, good health includes physical, mental and social well-being and not merely the absence of disease," says James Rohrer, Ph.D., of Mayo Clinic's Department of Family Medicine and lead author of the study. "Being single may be associated with a greater degree of separation from usual health care, as many women gain insurance through a spouse or a former spouse. Lack of social support also may contribute to poor health among some single women."

Researchers used a cross-functional survey to gather self-ratings of overall health among female primary care patients aged 18 years and older who live in cities with a census of approximately 3,000. The study analyzed marital status and self-assessed mental health as potential risk factors for poor overall self-rated health among female primary care patients. The analysis revealed that single or divorced women are more prone to poor self-rated health compared to married women. Women who described themselves as being depressed also had worse overall health. Women aged 65 and older had an even higher risk of poor self-

rated health.

While the data were finalized in 2000, Dr. Rohrer notes that current economic concerns may exacerbate the risk.

"Economic problems increase feelings of emotional stress. People today are worried about, among other things, the mortgage crisis and high gas prices. Many are left wondering how they are going to pay for necessities. Statistically, rural, unmarried women are more often economically depressed than their married counterparts," says Dr. Rohrer. "If the economy worsens, we will see a significant impact on visits to primary care physicians and nurses. Medical providers are trained to focus on the biological and psychological. But economic causes of poor health? I don't think that receives a lot of air time in medical school."

Patients experiencing feelings of poor self-rated mental health can address these concerns with screening, health promotion and treatment programs. Screening can be followed-up with self-help materials, support groups and medication if deemed appropriate by the physician. Referrals to financial counseling might have indirect therapeutic value.

Source: Mayo Clinic

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