

Wage gap could explain why women are more likely to be anxious and depressed than men

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The odds of major depressive disorder and generalized anxiety disorder were markedly greater among women who earned less than their male counterparts, with whom they were matched on education and years of experience, according to new research conducted at Columbia University's Mailman School of Public Health. Results of the study are online in the journal *Social Science & Medicine*.

The odds that an American woman was diagnosed with depression in the past year are nearly twice that of men. However, this disparity looks very different when accounting for the wage gap: Among [women](#) whose income was lower than their male counterparts, the odds of major depression were nearly 2.5 times higher than men; but among women whose income equaled or exceeded their male counterparts, their odds of depression were no different than men.

Results were similar for [generalized anxiety disorder](#). Overall, women's odds of past-year anxiety were more than 2.5 times higher than men's. Where women's incomes were lower than their male counterparts, their odds of anxiety disorder were more than four times higher. For women whose income equaled or exceeded their male counterparts, their odds of anxiety disorder were greatly decreased.

The findings are based on data from a 2001-2002 U.S. population-representative sample of 22,581 working adults ages 30-65. Researchers tested the impact of structural wage disparities on depression and anxiety outcomes, according to criteria in the Diagnostic and Statistical Manual, version IV (DSM-IV).

"Our results show that some of the gender disparities in depression and anxiety may be due to the effects of structural gender inequality in the workforce and beyond," said Jonathan Platt, a PhD student in the Department of Epidemiology, who was the first author of the paper. "The social processes that sort women into certain jobs, compensate them less than equivalent male counterparts, and create gender disparities in domestic labor have material and psychosocial consequences."

While the U.S. has passed legislation to address some of the most overt forms of gender discrimination faced by working women, less conspicuous forms of structural discrimination persist. As examples, the

researchers refer to the norms, expectations, and opportunities surrounding the types of jobs women occupy and the way those jobs are valued and compensated relative to men.

"If women internalize these negative [experiences](#) as reflective of inferior merit, rather than the result of discrimination, they may be at increased risk for depression and anxiety disorders," says Platt.

"Our findings suggest that policies must go beyond prohibiting overt gender discrimination like sexual harassment," said Katherine Keyes, PhD, assistant professor of Epidemiology and senior author. "Further, while it is commonly believed that gender differences in depression and anxiety are biologically rooted, these results suggest that such differences are much more socially constructed than previously thought, indicating that gender disparities in psychiatric disorders are malleable and arise from unfair treatment ."

According to Keyes, policies such as paid parental leave, affordable childcare, and flexible work schedules may ameliorate some of this burden, although more research into understanding the ways in which discrimination plays a role in mental health outcomes is needed.

"Structural forms of discrimination may explain a substantial proportion of [gender disparities](#) in mood and [anxiety disorders](#) in the U.S. adult population," said Keyes. "Greater attention to the fundamental mechanisms that perpetuate wage disparities is needed, not only because it is unjust, but so that we may understand and be able to intervene to reduce subsequent health risks and disparities."

Provided by Columbia University's Mailman School of Public Health

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