

Out of Her Mind: How We Are Failing Women's Mental Health and What Must Change

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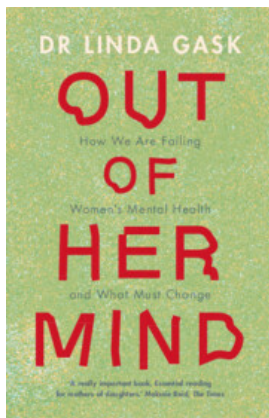
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Book Title: Out of Her Mind: How We Are Failing Women's Mental Health and What Must Change

Author: Linda Gask

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Women are sometimes called difficult, hysterical, or out of their minds when presenting with a normal emotional response. Women experiencing a mental illness may be ignored, disregarded, and denied their realities as truthful. This happens among family, in the workplace, in prisons, in private and public, and notably with health care professionals.

Dr Linda Gask unravels these realities in a clear and fluid manner, using anecdotes, literature, and the latest science, in her novel *Out of Her Mind*. Gask was a professor of primary care psychiatry and validates her qualifications as a psychiatrist, researcher, and patient. She candidly touches on her own perspectives as a clinician and patient with anecdotal personal experiences to demonstrate how she treated mental health, how she was treated, and the stigmas that exist regarding women's mental health.

The book begins with a brief introduction on the modern history of the feminism movement and the author's place within it. The first chapter focuses on girls and how social media and pressure may lead to difficulties with self-esteem. Following chapters explore the challenges that come from family, eating disorders, motherhood, work, racism, gender, violence, prison, borderline personality disorder, the mental health care system, and aging. However, none of these chapters are rigid in scope. For example, the chapter on motherhood flows seamlessly from periods to perinatal mental illness, childbirth, and other challenges. Personal stories are embedded throughout, and each chapter ends with what must change. While mainly focused on the United Kingdom, the contents are globally relevant and often refer to the United States.

As an example, Chapter five on women's work illustrates how Gask uses both research and personal stories to describe mental health. Women are diagnosed with depression at nearly twice the rate as men, and working-class women get depressed more often than middle-class women. Emotional and physical labor for often low pay may lead to chronic pain, injury, and illness without the ability to take time off. Disparities in working conditions and environments for women may lead to chronic disorders and segregate women into feeling guilty and ashamed of their bodies.¹ Dee, one of the interviewees, describes how the difficulty of work leads her to cope using alcohol: "It's amazing how alcohol slips from being something that's very helpful in your life, to something that you can't control (p. 103). Deaths of despair are reflected in the ways suicide, alcoholism, and drug overdoses are on the rise among women, not just men, and stem from failings to address mental health."²

While research may inform the reader, it is the lived experiences shared in the book that resonate deepest. A 24-year-old nonbinary, Mal, shared how his father raped their mother.

One night mum had to carry us out the house. Dad was having a manic episode and decided he was going to fix the gas. We woke up to him sawing through the gas pipes . . . so many people knew that this was

happening but never called it trauma. To me, this was normal. This was fine.

(p. 41)

Freida, 65 with fibromyalgia, describes how “my doctors first thought it was ‘all in my head’” (p. 246). Gask describes her own frustration.

Instead of shouting and screaming at the unfairness of the world, girls of my generation silenced ourselves. We experienced depression, guilt, shame and perhaps even turned to self-harm.

(p. 37)

Gask leaves us with steps toward ending the disparities in women’s mental health that were exhibited by the stories and research shared. For example, filling research gaps can inform practice across disciplines.³ Training and education are frequently critiqued as a prominent area needing greater focus. Mental health training and education in family medicine and the integration of women’s health in the curriculum can lead to prevention, appropriate care, and lasting change.⁴

As a reader, this book captured my attention. As a male, it demanded my understanding. Gask’s book often refers to “we” as women. Yet, to bring change to women’s mental health, anyone engaged in family medicine and health should read this book. Used as a teaching instrument, *Out of Her Mind* can raise awareness among family medicine and health care professionals to break stigmas and end silence.

Gask shares three words for readers to try to use, share, and encourage if we seek to make a difference. Listen. Hear. Believe.

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