MARGINALIZATION OF WOMEN: ITS INFLUENCE ON MENTAL HEALTH, WELL-BEING AND PRODUCTIVITY

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Abstract

From womb to grave, in times of peace as well as war, women face discrimination at the hands of the state, community and the family. Female infanticide deprives countless women of life itself. Every year, millions of women are raped by partners, relatives, friends and strangers, by employers, colleagues and security officials. "Marginalized women" today are the focus of concern and, several of their issues are strongly debated to bring about positive changes. Reliefs, improvements and facilities for various groups of marginalized women are remarkable achievements in the progress of our present society. Several professional bodies have highlighted their efforts to support different marginalized women sectors but have also mentioned their concern about its very existence and alarming increase in the size of these sectors. Current world scenario indicates the role of various organizations in working for the cause of different sectors of marginalized woman. Has the momentous of this work shadowed the issue of “marginalization of women”?

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Looking into the various definitions of the concept “Marginalization” we can have following:

Margin is the line we draw to mark the difference between the main area, the line that marks corner area and the line that marks the non used areas.
Marginal means insignificant/barely adequate
Marginalize means, make or treat as insignificant
Marginalized means, prevent from having attention or power

With an objective to highlight the influence of this marginalization on health, well being and productivity, we need to view health as multi-dimensional, espousing a social model of health (WHO Ottawa charter for Health Promotion, 1986).

The definition of mental health used in 1981 WHO report on social dimensions of mental health states that:

“Mental health is the capacity of the individual, the group and the environment to interact with one another in ways that promote subjective well being, the optimal development and the use of mental abilities (cognitive, affective and relational), the achievement of individual and collective goals consistent with justice and the attainment and preservation of conditions of fundamental equality.”

The definition has several advantages in relation to women’s mental health because it:

• Stresses the complex web of interrelationships that determine mental health and that the factors that determine health operate on multiple levels
• Goes beyond the biological and the individual
• Acknowledge the crucial role of the social context
• Highlights the importance of justice and equality in determining mental well being

The definition does not mention gender, but gender can impact on the production of mental health at every level – the individual, the group and the environment – and is critically implicated in the differential delivery of justice and equality. Gender configures both the material and symbolic position women occupy in social hierarchy as well as the experiences, which condition their lives.

Maximalists who believe that there are fundamental differences between men and women have viewed male behaviour as the norm, so women are always compared to men. Feminist theorists have recently argued, women’s well-being is not solely
determined by biological factors and reproduction, but also by the effects of workload, nutrition, stress, etc. It is also very important to sight psychological boundaries for every one in society when we consider health, both mental and physical. Although psychological boundaries are not so readily apparent as geographical borders or physical intrusions, they are just as real because psychological boundaries represent our unique inner territory.

Today, various sectors do convince our society of the marginalization. Unfolding our understanding of marginalization will aptly begin by looking into the ancient Indian society. By advocating separate expectations for the behavior of men and women, the Ramayana successfully served to reinforce India’s patriarchal structure. The sex appropriate ideals that are prominent throughout the Ramayana were a reflection of the values that structures ancient Indian society. The epic expresses that there are different expectations for the behavior of women and that of their male counterparts.

The virtuous women of the story possess exaggerated feminine qualities while the immortal women’s actions more closely resemble the behavior of the men. In either case, the women are subordinate and are considered possessions rather than partners. Urmila, wife of Lakshmana — her life stands up to speak and indicate marginalization of women. Lakshmana accompanying Rama in his exile is said to have acted according to will without giving a thought to the sensitivity of women. No doubt, his cause was noble but we must also remember that he got married in fact, at the same time as Rama. His filial duty was so strong that he felt his wife’s presence would be an obstruction in his performance, so he did not consider taking Urmila along to the forest even when she wanted to. Urmila spent those 14 years in front of an oil lamp, continuously feeding it with oil in order to keep the flame burning — always afraid and hoping that the flame indicated her husband’s safety. In the story, women are subordinate to all men, even the evil ones. The pious women are portrayed as child like and naïve, lacking intelligence to make decisions or to protect themselves.

One of the greatest works of our Indian Literature – Mahabharata also depicts women characters quite critically. On reading the Mahabharata, a reader realizes that women’s behavior is mainly criticized and condemned basically because they violated social norms and fail to contribute to the family unity as Ganga, Amba and in a way, Draupadi did. Mahabharatha incorporated philosophical, religious and social basic ideas of the traditional Indian society.

The marginalization of women is not culture specific as other texts from the west also had similar concepts. The birth of Helen of Troy was the consequence of an
evening of notorious seduction or deception. Marginalization is the foundation of Helen's existence – deception, manipulation and rape, and the inability to know her origins. We can question the powers of this character, where it was found that, others determined her every move! The most obvious marginalization here is the object of the gaze- an object inherently passive, in the control of the subject.

Although controversial, the functioning of women in our society indicates marginalization. Women's development across her life span in our society today indicates that in the family, in the community, at work, there are unique issues and problems that they confront. Infancy issues like ear piercing, color of clothes, color and types of toys, childhood issues like work distribution told by parents to girls, sex appropriate dressing, sex appropriate behavior and games is evident of marginalization. During adolescence and as young adults issues of falling in love always has a different perspective for girls, where most communities disown them. Issues of menopause have always explained that females are silent victims while male menopause has always got the necessary medical attention. At the workplace, popular sayings like, “Think Manager...think MALE; Think Secretary...think female” have always existed.

Massachusetts Institute of Technology (MIT)- 2002 report on the status of women faculty explains specific manifestations of marginalization and the inequalities that can arise from it. Of the several points highlighted it speaks of marginalization having a cumulative and deleterious effects on faculty members productivity. It leads to professional exclusion and a sense of being undervalued. This report was an outcome of a study to provide support to women’s career.

Marginalization can take many forms and can occur for complex reasons. Consider the mental health issues of women. Depression in women manifests in headaches, sleepless nights, constant tension, detachment, irritability, loss of appetite, fear, self-blame, lack of concentration, lack of interest in any kind of activity. Psychosocial stressors originate from the external social environment such as women’s inferior social position, lack of power, homelessness, economic hardships and man-made and natural disasters. They create learned helplessness and reduce motivation to lead an active life.

Over the past century, the landscape of war has featured many intractable conflicts that have taken millions of lives. Both men and women suffer negatively and participate as aggressors, but women are more susceptible to harm and abuse in the environment racked by violent conflicts whether or not they are engaged in conflict. Even in the absence of war, women's lives are subject to neglect and exploitation. Commonly, female lives are valued less which is obvious in events like
female infanticide, they have fewer opportunities for education and training, they do not have access to critical health information, their decision making capability is non existent and they suffer as victims of domestic violence.

In today’s society, women are routinely terrorized, raped, mutilated, abducted into slavery, murdered and exploited. This physical harm is likely to impact the victims psychologically. In addition, these women who are the victims are looked upon as bringing shame to the society. This might lead them to disguise or hide their injuries, leading to grievous mental or physical harm. For example, refusing counseling, concealing symptoms of sexually transmitted diseases and avoiding prenatal care.

Psychiatric labeling does not take cognizance of material reality faced by women on a day-to-day experiential levels. The Universalist approach uses diagnostic categories of mental illnesses such as neurosis, psychosis, mania, phobia, paranoia so on and so forth. The philosophical basis of psychiatry as a bio-medical discipline prevents mental health professionals to take into consideration larger reality and macro issues resulting from socio-economic and other factors. Limitations of the bio-medical perspectives lie in their narrow focus on somatic and psychological factors in their diagnostic efforts, ignoring the impact of socio-cultural and socio-demographic factors. Marginalization of mental health concerns results from the understanding that mental distress is a manifestation of an individual problem, not directly related to social oppression and not common to all women. Focus is more on the treatment of the illness, not on preventive and promotive efforts.

Implications of such reading may evolve personal responsibility in generations to come, to address our roles in the issues of marginalization, and be the true contributors of world peace, well-being and productivity.

An Unknown Author wrote......

HERE’S TO THE WOMEN....
Who knows where she is going
And will keep on until she gets there;
Who knows not only what she wants from life
But what she has to offer in return.
Here’s to the woman
who is loyal to family and friends,
who expects no more from others’
than she is willing to give.

Here’s to the woman
Who guides and inspires
Not by quoting others’ philosophies
But by living her own good example.
Who accepts both victories and disappointments
with the same grace
And who can rise above life’s challenges
and move on...

Here’s to the woman
Who gives the gifts of her thoughtfulness,
who shows her caring with a word of support,
her understanding with a smile;
A woman who brings joy to others just by being herself.

References:

• www. Parabaas.com
• www. un.org/women watch