Impact of Gender Stereotypes on Diagnosis and Treatment
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Disclosures

- The views expressed in this presentation are those of the author and do not necessarily reflect the official policy or position of the Department of Defense, nor the U.S. Government.

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Learning Objectives

At the conclusion of this presentation, participants will be able to:

- Understand ways in which clinicians may inadvertently apply gender stereotypes in clinical assessment and treatment contexts
- Describe the relations between gender stereotypes and stigma
- Recognize distinction between true gender and sex differences vs. stereotypes
- Demonstrate knowledge of methods for reducing potential for gender bias in assessment and treatment

“Medically Ready Force…Ready Medical Force”
What are Mental Health Gender Stereotypes?

“Particular behaviors and characteristics that may be thought indicative of pathology in members of one sex, but not pathological in members of the opposite sex.”

Broverman et al., (1970)

• https://www.popsugar.com/entertainment/How-Media-Portrays-Mental-Illness-Video-42728658
Interactive Quiz
Bias vs. True Sex and Gender Differences

■ BIAS\textsuperscript{1,2} in:
  □ Constructs
  □ Diagnostic criteria
  □ Application of diagnostic criteria
  □ Assessment measures
  □ Prevalence

■ GENDER DIFFERENCES\textsuperscript{1}
  □ Shaped by environment and experience

■ SEX DIFFERENCES\textsuperscript{3,4}
  □ Biologically-based

\textsuperscript{1}Winstead & Sanchez (2016)
\textsuperscript{2}Hartung & Widiger (1998)
\textsuperscript{3}Li & Graham (2017)
\textsuperscript{4}Kuehner (2017)
Male-Valued Traits

Feminine Pole
- Not at all aggressive
- Not at all independent
- Very emotional
- Very subjective
- Very easily influenced
- Very submissive
- Not at all competitive
- Excitable in minor crisis

Masculine Pole
- Very aggressive
- Very independent
- Not at all emotional
- Very objective
- Not at all easily influenced
- Very dominant
- Very competitive
- Not at all excitable in minor crisis

Broverman et al. (1970)
<table>
<thead>
<tr>
<th>Event</th>
<th>Emotion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Broken appointment</td>
<td>Disappointment</td>
</tr>
<tr>
<td>Death of a friend</td>
<td>Sad</td>
</tr>
<tr>
<td>Stupid acts of others</td>
<td>Angry</td>
</tr>
<tr>
<td>Confrontation with dangerous animal</td>
<td>Fear</td>
</tr>
</tbody>
</table>

Fisher (1993)
Sex Bias in Diagnosis

- Applying diagnosis on the basis of sex
- Example – Borderline Personality Disorder vs. Posttraumatic Stress Disorder (PTSD)
- Sex and gender differences in PTSD

Becker & Lamb (1994); Ford & Widiger (1989); Kimerling et al. (2014)
Interactive Exercise
Gendered Diagnoses and Stigma

- Some diagnoses are more stigmatizing than others
- Therapist distancing, microaggressions
- Greater stigma toward women diagnosed with “masculine” disorders such as alcohol abuse?
- Consequences of labeling

Ali et al., (2010); Aviram et al. (2006); Boysen et al. (2014); Gonzales et al. (2015); Ingelse & Messecar (2016)
Exercise: Small Group Discussion
Misdiagnosis vs. Gender-Biased Diagnostic Approach¹

**Misdiagnosis**
- Loose interpretation of diagnostic criteria
- Reliance on professional experience or personal assumptions
- Confirmation bias
- Representative heuristic²

**Gender-Biased Diagnosis**
- View that certain diagnoses are gender-linked
- Incongruence between symptoms and traditional gender characteristics
- Bias toward assigning diagnosis more frequently in women

¹Cwick et al., (2016); ²Garb (1996)
Treatment Considerations

- Gender of therapist?
- Mixed-sex group treatment?
- Therapist interpersonal style and related characteristics?

Bright et al., (2011); DeJong et al. (1993); Winstead & Sanchez (2016)
Guidelines to Reduce Gender Bias in Assessment and Treatment

- Diagnostic checklists
- Evidence-based assessment
- Consideration of deficits and strengths
- Facilitate informed choices

In combination with open clinical judgment

Ali et al. (2010); Cwick et al. (2016); Joiner et al. (2005); Snyder & Lopez (2002); Travis et al. (2012); Silverman & Ollendick (2005)
Key Takeaways

- Gender bias manifests in multiple and subtle ways across clinical encounters
- More research is needed to more fully understand the nature and prevalence of sex and gender differences in relation to mental health disorders
- Awareness of the limitations of the current diagnostic system in terms of bias in psychological constructs, diagnostic criteria, prevalence rates, and assessment tools is key to reducing gender bias
- Judicious, evidence-based assessment in combination with open clinical judgment is critical to avoiding gender bias in assessment and treatment
References


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Thank you!!

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