

## **Women's Mental Health and the COVID-19 pandemic**

July 2020

The COVID-19 pandemic is a challenging and concerning time for people in Ireland. COVID-19 has adversely impacted women by almost every measure. Women are disproportionately represented as frontline workers in health, retail and domestic roles. School and childcare closures put extra pressure on many women to look after their families and loved ones, which can be especially challenging for lone parents. Many women in precarious jobs before the pandemic have lost jobs. Women in abusive relationships have been locked-down with their abusers. Older women cocooning have been particularly concerned about their health.

For many women there has been an increase in stress and anxiety during the pandemic, which are natural reactions to the changes in our lives. At the same time women who were experiencing mental health difficulties before the pandemic may now have further challenges to face, in terms of anxiety and stress but also in terms of access to mental health supports.

Our response to the mental health impacts of the pandemic now and during recovery is hampered by the ongoing lack of investment in mental health promotion, early intervention and development of services. **It is imperative that Government undertake a gender sensitive approach in response to the COVID-19 pandemic, and in particular in the context of women's mental health.**

There is ample opportunity, through Ireland's new mental health policy, *Sharing the Vision*, to develop gender sensitive mental health services across the country. The policy proposes a more developed framework for the implementation of gender competency in mental health service delivery in order to effectively respond to the needs of individuals. More specifically, it recommends that "the Department of Health Women's Health Taskforce and the National Implementation Monitoring Committee will undertake a joint project within 12 months to outline an effective approach to the mental health of women and girls. The project should ensure that mental health priorities and services are gender-sensitive and that women's mental health is specifically and sufficiently addressed in the implementation of policy".

**As a matter of urgent priority, the National Women's Council of Ireland (NWC) and Mental Health Reform (MHR) recommend that Government:**

1. Ensure easy access to mental health services and supports across a continuum of care from primary (including community-based counselling services, family resource centres and women's organisations), community, and acute and specialist services for women who need them. This involves providing for new emerging mental health need, as well as supporting women with existing mental health difficulties.
2. Improve measures to enhance the mental health and wellbeing of women living in Ireland through promoting factors that protect women's mental health and reducing

the risk factors of poor mental health, including in areas such as income, violence against women, care supports, employment and health.

3. Immediately commence implementation of *Sharing the Vision*, including establishment of the National Implementation and Monitoring Committee to support the development of gender sensitive mental health services.
4. Develop a fully costed implementation plan for *Sharing the Vision* in 2020, to be delivered in full throughout the life of the government, to ensure this 10 year policy is resourced and implemented consistently year on year from the beginning to its conclusion. This includes ring-fenced funding commitments for the development of gender sensitive mental health services and supports.
5. The Government must measure, monitor and report on the mental health impact of the COVID-19 pandemic across the whole population, and in a way that includes data on women and women from intersectional groups.
6. Commit to the implementation of trauma informed mental health services, as set out in *Sharing the Vision*, which effectively identify and respond to the particular experiences of women.
7. Ensure women's equal representation in all COVID-19 mental health response planning and decision-making.

## **Gender and mental health**

Gender has a powerful impact on mental health. It shapes life experiences, socio-economic realities, expressions of mental distress, in addition to pathways into mental health supports and mental health service needs and responses. Risk factors that impact on mental health in women include poverty, inequality in the home and at work, and domestic and sexual violence. The longer-term socio-economic impact of the COVID-19 pandemic is likely to exacerbate existing gender inequalities and intensify the socio-economic disparities faced by women in areas such as income and employment which all contribute to mental health.<sup>1</sup> Additional challenges will arise in the context of intersectional issues and the multiple inequalities faced by groups of women, including LGBTQI+ women, minority ethnic women, including Traveller and Roma women, and women living in direct provision, women in prison, women experiencing homelessness, among many others.

## **Impact of COVID-19 on women's mental health and wellbeing**

It will take time for the impact of the COVID-19 outbreak on mental health and wellbeing to be fully known. The United Nations (UN) has warned that the COVID-19 pandemic “risks sparking a major global mental health crisis”.<sup>2</sup> The “isolation, fear, uncertainty, and the economic turmoil [of the current pandemic] could cause psychological distress, and we could expect to see an upsurge in the severity of mental illness, including among children, young people and healthcare workers”.<sup>3</sup> In its mental health policy brief on COVID-19 and mental

health, the UN reported that higher-than-usual levels of symptoms of depression and anxiety have already been recorded in various countries.<sup>4</sup>

A comparison of men and women's responses to the Central Statistics Office (CSO) Social Impact of COVID-19 survey found women's well-being was being more adversely affected by the crisis. Both women and men rated their overall life satisfaction lower in April 2020 than in 2013 when the country was experiencing the effects of the 2008 financial crisis. In April 2020 however, there was a greater increase in the percentage of female respondents reporting "Low" satisfaction with overall life. In addition, the percentage of respondents in April 2020 reporting that they felt "lonely", "very nervous", or "downhearted or depressed" was higher for women than for men.<sup>5</sup>

Certain groups of **women may experience particular mental health challenges brought on by the crisis**. Women with pre-existing mental health difficulties may experience a worsening of such difficulties. Research shows that symptoms associated with depression, anxiety, eating disorders and self-harm are more prevalent in women than in men, and women also experience perinatal mental health difficulties.<sup>6 7 8</sup> In July 2019, a report published by Eurofound showed that gender is an important factor in depression and that in the majority of EU member states young women aged 15–24 were more likely to suffer from depression than young men. The greatest gender gaps were in Denmark, Germany, Ireland and Sweden. In fact, young Irish women are suffering the highest levels of moderate to severe symptoms of depression among their EU counterparts. Some 17% of this age group of women in Ireland report being moderately or severely depressed compared to an EU average of 9%.<sup>9</sup>

Among the vast numbers of people who have lost, or are at risk of losing their jobs are women. Initial data shows that those who have lost their jobs as a result of Covid-19 are more likely to be young, low-paid, women workers who were previously in part-time employment.<sup>10</sup> This means that the economic impact of this pandemic is falling on the most marginalised women in our society.

**Healthcare and frontline workers**, who are operating under tremendous stress and have been identified as a key group at increased risk of mental health difficulties due to the current crisis, are predominantly women. According to the 2016 Census, four out of five (79.3%) employees in the Irish Health Service are women.<sup>11</sup> Women are also responsible for the majority of caring roles. In 2016, more than six out of ten carers providing unpaid help were female.<sup>12</sup> Three-quarters of the almost 80,000 people receiving Carer's Allowance in 2018 were women.<sup>13</sup>

In a 2019 report by the Irish Human Rights and Equality Commission and the Economic and Social Research Institute, the authors highlighted the significant and persistent imbalance in the gender division of unpaid work in Ireland – the seventh highest among the EU28. The report found that women spend, on average, double the amount of time men do on caring, and more than twice as much time on housework. Further, 45% of women and 29% of men provide care for others on a daily basis i.e. childcare and/or adult care.<sup>14</sup> There is a concern that such caring responsibilities will be intensified in the wake of the current COVID-19

pandemic, with children and young people being kept out of schools, childcare facilities suspended and disability services, including day and respite services being significantly reduced. The CSO 'Employment and Life Effects of Covid-19' survey<sup>15</sup> showed that almost a fifth of the population was caring for someone as a result of COVID-19, and that more women (21%) than men (15%) were caring for a dependent family member or friend.

Women who face heightened risk of **domestic abuse** have been particularly vulnerable during lock-down. According to Garda reports, domestic violence increased by almost 25% since the coronavirus lockdown period began, with higher spikes in some geographical areas.<sup>16</sup> This increase in reports is also reflected in spikes in demand for community and voluntary sector supports, including, for example, a 51% increase in calls to Aoibhneas women's refuge helpline in March of this year.<sup>17</sup>

## **A women-centred mental health response to the COVID-19 crisis**

This situation of emerging mental health need as a result of COVID-19 is compounded by the decades of neglect and under investment in mental health services, as recently reported by UN Secretary-General Antonio Guterres.<sup>18</sup> Similarly, WHO has stressed that issues of mental health service access and continuity of care for individuals is a major concern. It is particularly worrying in the context of those aspects of mental health service delivery that have received little to no attention to date, including the implementation of gender sensitive mental health service delivery. Women need mental health services that respect and reflect their lived experiences to ensure they are supported appropriately. Gender sensitive mental health services are essential in ensuring that the gender specific mental health needs of individuals, including women, are identified and addressed. The COVID-19 pandemic has further exposed the fragility of the mental health sector and the deep fault lines that have existed for decades in the state's response to addressing the particular mental health needs of women.

Women must be at the heart of these solutions and share a balanced role in decision making processes. If we are to effectively improve the mental health outcomes of Ireland's population during this crisis, gender inequalities will need to be addressed. This will require a 'gender lens', intrinsically building in gender, through inclusive decision making, in the development of mental health services and supports, in addition to all related socio-economic issues. WHO has recommended the inclusion of women in national and global COVID-19 outbreak preparedness and response policy and operational spaces. The OECD has found that "women [decision makers] more often bring attention to issues such as gender-based violence, family-friendly policies and responsiveness to citizen needs"<sup>19</sup>. Mainstreaming gender equality is an intrinsic part of the road to recovery from COVID-19, including in mental health. The Irish Government must acknowledge the impact of the pandemic on women, and in effect on women's mental health, and the essential role inclusive decision-making at community, and national levels will bring.

### **About us**

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Mental Health Reform (MHR) is Ireland's leading national coalition on mental health. With over 75 member organisations, we work together to drive progressive reform of mental health services and supports in Ireland.

National Women's Council (NWC) is Ireland's leading feminist NGO, with a mission to bring about equality for women. We are a membership organisation representing over 190 organisations.

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<sup>1</sup> The Mental Health Foundation. (2020). *The COVID-19 Pandemic, Financial Inequality and Mental Health: A briefing from the "Coronavirus: Mental Health in the Pandemic" Study*. MHF. Retrieved from <https://www.mentalhealth.org.uk/sites/default/files/MHF-covid-19-inequality-mental-health-briefing.pdf>.

<sup>2</sup> RTE News. (2020, May 14). UN warns of global mental health crisis due to Covid-19 pandemic. *RTE News*, Retrieved from <https://www.rte.ie/news/world/2020/0515/1138301-pandemic-mental-health-crisis/>.

<sup>3</sup> Rourke, A. (2020, May 14). Global report: WHO says Covid-19 'may never go away' and warns of mental health crisis. *The Guardian*, Retrieved from <https://www.theguardian.com/world/2020/may/14/global-report-who-says-covid-19-may-never-go-and-warns-of-mental-health-crisis>.

<sup>4</sup> A large study in Amhara Regional State, Ethiopia, in April 2020, reported an estimated 33% prevalence rate of symptoms consistent with depressive disorder, a 3-fold increase compared to estimates from Ethiopia before the epidemic.

<sup>5</sup> Central Statistics Office. (2020, May, 19). *Social Impact of COVID-19 on Women and Men: April 2020*. Retrieved from <https://www.cso.ie/en/releasesandpublications/er/sic19wm/socialimpactofcovid-19onwomenandmenapril2020/>.

<sup>6</sup> Kennedy, Y. (2016, 3 November) Rates of depression are high amongst pregnant women in Ireland. [Press Release]. Retrieved from: [https://www.tcd.ie/news\\_events/articles/rates-of-depression-are-high-amongst-pregnant-women-in-ireland/7341](https://www.tcd.ie/news_events/articles/rates-of-depression-are-high-amongst-pregnant-women-in-ireland/7341)

<sup>7</sup> World Health Organisation Europe. (2016). Strategy on women's health and well-being in the WHO European Region. Copenhagen: WHO. Page 2. <http://www.euro.who.int/en/health-topics/health-determinants/gender/publications/2016/strategy-on-womens-health-and-well-being-in-the-who-european-region-2016>.

<sup>8</sup> HSE (2018) Eating Disorder Services. HSE Model of Care for Ireland. Retrieved from: <https://www.hse.ie/eng/services/list/4/mental-health-services/national-clinical-programme-for-eating-disorders/ed-moc.pdf>.

<sup>9</sup> Eurofound (2019), Inequalities in the access of young people to information and support services, Publications Office of the European Union, Luxembourg.

<sup>10</sup> Coates, Byrne, Brioscú, Corcoran, Cronin, Keenan and McIndoe-Calder (2020) *Working Paper - The Initial Impacts of the COVID-19 Pandemic on Ireland's Labour Market*, Department of Employment Affairs and Social Protection.

<sup>11</sup> Central Statistics Office. (2016). *Women and Men in Ireland 2016*. Retrieved from <https://www.cso.ie/en/releasesandpublications/ep/p-wamii/womenandmeninireland2016/health/>.

<sup>12</sup> Central Statistics Office. (2020). *Women and Men in Ireland 2019*. <https://www.cso.ie/en/releasesandpublications/ep/p-wamii/womenandmeninireland2019/>

<sup>13</sup> Central Statistics Office. (2020). *Women and Men in Ireland 2019*.

<sup>14</sup> Russell, H., Grotti, R., McGinnity, F., & and Privalko, I. (2019) *Caring and Unpaid Work in Ireland*. Retrieved from [https://www.ihrec.ie/app/uploads/2019/07/Caring-and-Unpaid-Work-in-Ireland\\_Final.pdf](https://www.ihrec.ie/app/uploads/2019/07/Caring-and-Unpaid-Work-in-Ireland_Final.pdf).

<sup>15</sup> CSO release 13<sup>th</sup> May 2020, Employment and Life Effects of COVID-19. <https://www.cso.ie/en/releasesandpublications/er/elec19/employmentandlifeeffectsofcovid-19/>

<sup>16</sup> Lally, C. (2020, April, 27). Domestic violence reports up 30% in some areas since lockdown, says Garda. *The Irish Times*. Retrieved from <https://www.irishtimes.com/news/crime-and-law/domestic-violence-reports-up-30-in-some-areas-since-lockdown-says-garda-1.4238362>.

<sup>17</sup> McGuire, P. (2020, April, 20). "I feel constantly suffocated": The domestic violence epidemic raging behind closed doors of Covid-19. *Thejournal.ie*. Retrieved from <https://www.thejournal.ie/domestic-violence-investigation-coronavirus-crisis-part-one-5076812-Apr2020/>.

<sup>18</sup> Guterres, A. (2020, May, 13). "Mental health services are an essential part of all government responses to COVID-19". Retrieved from <https://www.un.org/en/coronavirus/mental-health-services-are-essential-part-all-government-responses-covid-19>.

<sup>19</sup> Al-Rashid, S. (2020, April, 21). COVID-19: time for gender inclusive decision-making. *OECD Development Matters*. Retrieved from <https://oecd-development-matters.org/2020/04/21/covid-19-time-for-gender-inclusive-decision-making/>.