

POLICY BRIEF #5

Impacts of the COVID-19 pandemic on maternal mental health & wellbeing



Translating evidence from the Mothers' and Young People's Study to inform policy and practice

The COVID-19 pandemic led to widespread disruption to work, school and family life. Parents of school age children endured long periods of responsibility for home schooling, while often also working from home themselves.

During the first year of the pandemic we surveyed mothers and young people (aged 14-17 years) taking part in a longitudinal study investigating the health and wellbeing of over 1500 first-time mothers and their firstborn children. We have previously reported on what young people told us about the impact of the pandemic restrictions on their mental health and wellbeing.^{1,2} This policy brief summarises what women in the study told us about the impacts on them.

In total, 418 women completed an online survey between June and October 2020 during Victoria's second lockdown, and 391 women completed a subsequent survey between January and April 2021, when many restrictions had been lifted in Victoria.

In addition, we invited women to pass on information about the study to their firstborn child (aged 14-17 years). Young people agreeing to take part completed a separate online survey. Over 90% of the families taking part in the COVID-19 sub-study were living in Victoria during the pandemic.

The online surveys included standardised measures asking about mental health and wellbeing. These included measures of depression (CES-D) and anxiety (GAD-7).

We also asked women to reflect on how their wellbeing and family relationships had changed since the period prior to the pandemic.

Impacts on daily life

COVID-19 had substantial impacts on families' day to day lives.

In mid 2020,



4 in 5 women in paid employment were **stressed about work.**



3 in 5 women in paid employment were **working from home.**



1 in 4 women reported a **loss of income** due to the pandemic.



1 in 10 women who were working prior to the pandemic were **no longer working.**



3 in 4 women felt that COVID-19 **negatively impacted** their oldest child's **progress at school.**



1 in 4 women had concerns about **housing stability.**



1 in 4 women reported more **stress at home.**



1 in 7 women reported more **conflict at home.**

How life changed

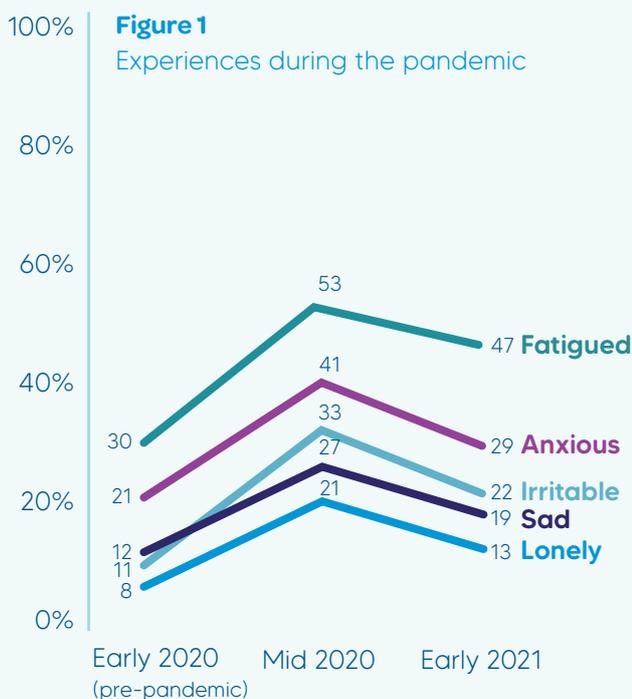
The pandemic led to dramatic increases in anxiety, fatigue, irritability, sadness and loneliness.

During Victoria's second lockdown in mid 2020, 53% of women experienced fatigue, 41% anxiety, 33% irritability, 27% felt sad and 21% felt lonely. In all cases, the proportion of women reporting these difficulties was higher than prior to the pandemic.



By early 2021, the proportion of women reporting these difficulties had reduced, but remained higher than pre-pandemic levels.

Fatigue stands out as the issue least likely to have resolved. In early 2021, almost half of women reported that they were fatigued, down just slightly from level reported in mid 2020.



It's been relentless, emotionally exhausting, trying my patience and temper. I've felt overwhelmed, worried about their learning abilities and independence. It's been incredibly stressful ... and detrimental to everyone's mental health.

There are only 24 hours in the day. It is very hard to do everything ... be the mother, supervisor, support, disciplinarian, full-time worker, house keeper. Not having brain and physical space was hard.

I feel overwhelmed at the amount of caring duties I have in addition to my own work. Most of my day is spent looking after everyone else, and I am exhausted and fed up.

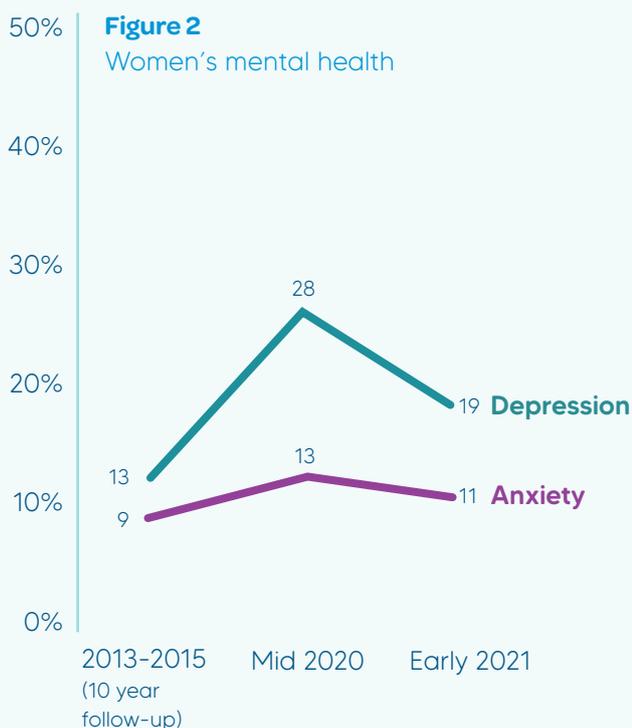
Much of the responsibility for remote schooling was shouldered by women. For some women, this meant giving up their paid job, taking leave without pay or reducing their hours of work significantly.

The challenges of remote learning were particularly acute for mothers of children experiencing neurodevelopmental conditions such as Attention Deficit Hyperactivity Disorder or autism, and for women whose children started at a new school just prior to the pandemic.

Impact on women's mental health

Almost 1 in 3 women reported clinically significant mental health difficulties during Victoria's second lockdown in mid 2020.

There was a slight decrease in the proportion of women reporting clinically significant mental health difficulties in early 2021, but the proportion remained well above pre-pandemic levels.



There was a particularly pronounced increase in the proportion of women who reported clinically significant depressive symptoms. At our previous contact with women when their first child was aged ten, 13% were experiencing depression. During the second lockdown this peaked at 28%, declining to 19% in early 2021.

We do not have data for the period of the long lockdown during 2021, but it is likely that women's mental health deteriorated again during this period.

There was higher prevalence of depressive symptoms among women who had a history of mental health difficulties. This suggests the pandemic exacerbated underlying difficulties.

However, **1 in 5** women with no prior history of depression reported clinically significant depressive symptoms during the pandemic.

Services and support

Less than half of women (45%) experiencing clinically significant depressive or anxiety symptoms during the pandemic received support from health professionals.



1 in 4 talked to a GP.



1 in 4 talked to a psychologist.

A majority of women experiencing depression or anxiety (55%) did not receive any mental health support from primary care or mental health services. Only 4% of women experiencing clinically significant depression or anxiety had called a mental health telephone support line.

I have tried contacting psychologists for mental health support. They have all either closed their books or do not return calls at all.

I was concerned about money and not the same over the telephone so postponed.

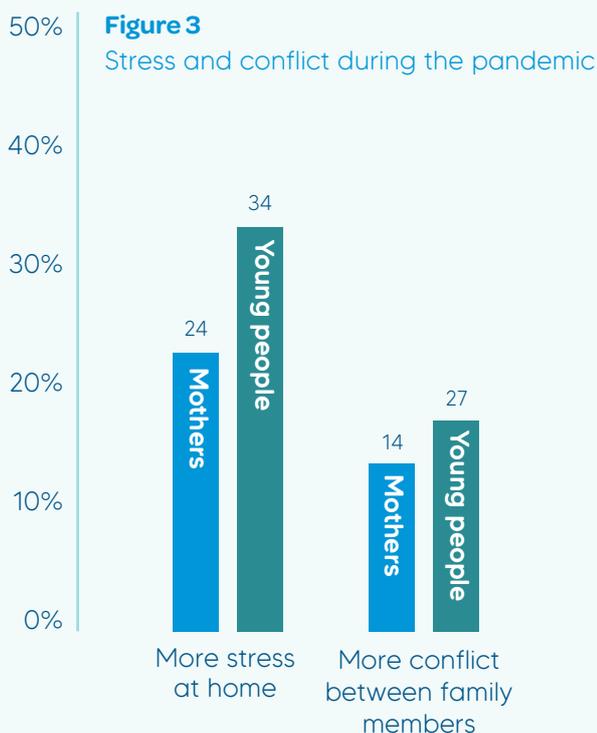
Reasons for not receiving support from health professionals included:

- prioritising counselling for their child/ren over their own mental health needs
- psychologists closing their books to new clients/ long waiting periods
- not feeling comfortable or confident with telehealth
- not being able to pay the bill.

Women experiencing mental health difficulties were almost four times more likely to delay their own medical care for financial reasons.

Parenting during the pandemic

The pandemic caused enormous upheaval in the daily life of families. While most women reported having a good relationship with their oldest child, many reported more stress at home and more conflict between family members compared with the period before the onset of the pandemic.



Young people (aged 14-17 years) were even more likely to perceive that stress levels and conflict had increased compared to the period before the pandemic.

For example, 1 in 3 young people reported more stress at home during the pandemic. In contrast, around 1 in 4 mothers thought that there was more stress at home during the pandemic compared with the period before the pandemic.

During the first Victorian lockdown,



1 in 3 young people reported more stress at home.



1 in 4 young people reported more conflict between family members.



2 in 5 women reported problems in their relationship with their current and/or ex-partner. Almost **1 in 10** reported serious conflict between family members.

Against this background, many women expressed a need for greater support with parenting and family responsibilities. A minority of women – around **1 in 4** – sought support from a health professional with regard to concerns about parenting.

Of these,



1 in 5 women were experiencing clinically significant anxiety symptoms.



2 in 5 women were experiencing clinically significant depressive symptoms.

The extent to which women themselves were dealing with mental health problems – whether pre-existing or experienced for the first time during the pandemic – undoubtedly compounded the challenges for families.

I can tell she is sick of us at home... She has withdrawn from us and prefers to stay in her room... She was never like this before. It's been tuff to watch. How do we separate what is normal 15-year-old behaviour from what COVID-19 is doing to her?

It's just fear of the unknown.... My worry is for the future, what future complications the virus will bring those who have been affected, and how it will affect the future of our children's lives.

What is already known?

The COVID-19 pandemic has disrupted the lives of people around the globe, with major social and economic consequences for families.

The State of Victoria imposed more extensive and protracted pandemic related social restrictions than other Australian states. The pandemic response in Victoria included long periods of stay-at-home orders and remote learning for children in the context of surging case numbers and pressures on health services.

Several Victorian lifecourse cohorts, including the Mothers' and Young People's Study, have shown that mental health difficulties were considerably more common among children and young people during the pandemic, than in the period prior to the pandemic.^{1,2,3}

What this policy brief adds

Maternal mental health and wellbeing have been profoundly impacted by the COVID-19 pandemic. These impacts are reflected in higher prevalence of maternal depression, anxiety, fatigue and parenting stress.

The pandemic has exacerbated underlying mental health difficulties⁴ AND resulted in some women experiencing depression or anxiety for the first time.

Around half of women experiencing depression and/or anxiety did not access support from GPs or psychologists. In some instances, women prioritised support for their children's mental health over their own. Other reasons for not accessing support included the cost of services, long waiting periods, and lack of confidence with telehealth.

Stress at home and conflict between family members rose during the pandemic. One in four women sought support with parenting. Many of these women were experiencing mental health difficulties themselves.

Considerations for policy

The mental health and wellbeing of mothers is essential to the health and wellbeing of the whole family.

Strategies to safeguard the mental health of mothers need to be more prominent in:

- **the public health response to long-term impacts of the pandemic, and**
- **reform of Victoria's mental health system.**

Mental health strategies to support children and young people need to extend to the whole family. It is important to provide multi-service frameworks that enable mothers, fathers, children and young people under 18 to receive appropriately tailored support.

The pandemic has highlighted gaps in the current service delivery frameworks, especially for women with limited financial resources. These gaps have resulted in many women in need of mental health support being unable to access mental health services.

While pandemic-related restrictions have eased, COVID-19 infection rates remain high. Home isolation due to COVID-19 exposure is ongoing and some schools have resumed remote learning due to staff shortages and high infection rates. These continuing day-to-day effects of the pandemic are likely to have both short and longer-term impacts on women's workforce participation, their own mental health and wellbeing and the mental health and wellbeing of other family members.

The process of healing and recovery from the pandemic will take time. It is critical that the public health response includes a strong focus on maternal mental health in order to safeguard the health and wellbeing of the whole family.

About the study

The Mothers' and Young People's Study is an Australian longitudinal study designed to investigate women's health after childbirth. Over 1500 women were recruited to the study from six Melbourne metropolitan hospitals between 2003 and 2005. Women in the study completed questionnaires and interviews in early pregnancy; at 3, 6, 9, 12 and 18 months postpartum; and 4 years and 10 years after the birth of their first child. Maternal mental health was assessed during pregnancy and at every follow-up. Women have also reported on health service use related to their own health and to the health of their first-born child at every wave. This included use of primary care, specialist and allied health services.

During the COVID-19 pandemic, we undertook a nested sub-study to examine social impacts of the pandemic on the health and wellbeing of women and young people (aged 14-17 years). Online surveys of mothers and young people in the study were undertaken at two timepoints: between June and October 2020, and between January and April 2021. Over 90% of women and young people that took part in the sub-study were living in Victoria during the pandemic.

Eighteen-year follow-up of the cohort is commencing mid 2022. Information from this follow-up will be used to assess longer term impacts of the pandemic.



References

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MOTHERS'and
YOUNG PEOPLE'S
study

Contact

This policy brief has been put together by the Intergenerational Health group, Murdoch Children's Research Institute. We are grateful to all of the mothers and young people who have taken part in the study.

For further information about the study see: strongerfutures.org.au/mothers-and-young-peoples-study **or contact:**

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