

## Snapshot of Australian women's mental health

## Gendered discrepancies in mental health outcomes

Globally, women are approximately twice as likely as men to suffer from a mental illness.<sup>i</sup>

Australian data shows:

- Females report consistently higher levels of psychological distress than males<sup>ii</sup>
- Females are almost twice as likely to experience mood disorders (e.g. depression, bipolar disorder)<sup>iii</sup>
- Females are more likely to experience anxiety disorders<sup>iv</sup>
- Females are twice as likely to be diagnosed with Post-Traumatic Stress Disorder  $^{v}$
- Females are hospitalised for intentional self-harm at almost twice the rate of males<sup>vi</sup>
- Females are more likely to attempt suicide than males<sup>vii</sup>
- 95% of hospitalisations for an eating disorder are for females.<sup>viii</sup>

Other forms of inequality and discrimination intersect with gender to influence the mental health of different groups of women. For example:

- Young women aged 16 to 24 report the highest rates of mental disorder of *any* population group (30%) and are presenting to mental health services with self-harm and suicidal behaviours at increasing rates<sup>ix</sup>
- At least one in five pregnant women/new mothers experiences perinatal anxiety and/or depression,<sup>x</sup> and migrant and refugee women experience higher rates of perinatal depression and anxiety than Australian-born women<sup>xi</sup>
- Aboriginal and Torres Strait Islander women are hospitalised for self-harm at twice the rate of non-Aboriginal women,<sup>xii</sup> and suicide rates among Aboriginal and Torres Strait Islander women aged 15-19 are nearly six times higher than for non-Aboriginal young women<sup>xiii</sup>
- Evidence suggests **migrant and refugee women** experience poorer mental health outcomes than Australian-born women, with race and gender inequality, violence against women, settlement stress and trauma all playing a role<sup>xiv</sup>
- A higher proportion of **women in rural and regional areas** have been diagnosed with anxiety or depression than women in metropolitan areas<sup>xv</sup>
- Women with disabilities experience higher levels of isolation, discrimination and violence than women without disabilities, and are more likely to experience employment, financial and housing insecurity than men with disabilities, all of which are key determinants of mental ill-health<sup>xvi</sup>
- Lesbian and bisexual women, people with intersex characteristics and trans women are almost four times as likely as their cis/heterosexual peers to have tried to self-harm or suicide<sup>xvii</sup>
- **Carers** around two-thirds of whom are female have been shown to have the lowest collective wellbeing score of any group, with more than half of all carers found to have moderate depression as well as experiencing other stressors<sup>xviii</sup>





- Over 60% of **single mothers** (who make up 80% of single parent households) nominate managing their health or mental health as a key challenge<sup>xix</sup>
- Women in prison are 1.7 times more likely to have a mental illness than men in prison.

While women do have different patterns of help-seeking from men, these differences in mental health outcomes are not simply related to greater help-seeking among women, but represent the impacts of biological differences (such as hormonal differences), social determinants (such as differential access to power and resources) and environmental factors (including early and later life trauma) all of which impact women differently.<sup>xx</sup>

The unequal impacts of COVID-19 on women's mental health are detailed in the Women's Mental Health Alliance's policy briefs from <u>June 2020</u> and <u>October 2020</u>, and demonstrate the impact of gendered social and economic inequalities on mental health.

<sup>viii</sup> Australian Institute of Health & Welfare (2018). *Australia's health 2018,* Chapter 3.13, p 2.

<sup>x</sup> PANDA [Website], *Prevalence of mental illness in the perinatal period*, Available at: <u>URL</u>. Visited 10 February 2021.

<sup>xi</sup> Shafiei, T. et. al. (2018) *Identifying the perinatal mental health needs of immigrant and refugee women*. La Trobe University.

<sup>xii</sup> Harrison JE and Henley G (2014) *Suicide and hospitalised self-harm in Australia: trends and analysis: hospitalised intentional self-harm: 2010-11*, Australian Institute of Health and Welfare, Canberra.

xiii Suicide Prevention Australia (2016), Suicide and Suicidal Behaviour in Women: Issues and Prevention, p 24.

<sup>xiv</sup> Multicultural Centre for Women's Health (2020). *Policy brief: Immigrant and Refugee Women's Mental Health*.

<sup>&</sup>lt;sup>xx</sup> Young E, Korszun A, Altemus M (2002). 'Chapter 1: Sex Differences in Neuroendocrine and Neurotransmitter Systems'. In Kornstein S and Clayton A (eds) (2002) Women's Mental Health – A Comprehensive Textbook. The Guildford Press, New York. ISBN 1-57230 -699-8



<sup>&</sup>lt;sup>i</sup> Yu S. (2018). *Uncovering the hidden impacts of inequality on mental health: a global study*. Translat Psychiatr. 2018;8: 98.

<sup>&</sup>lt;sup>ii</sup> Australian Institute of Health & Welfare, *Suicide & self-harm monitoring* [Website], Psychological distress, Available at: URL. Visited 10 February 2021.

<sup>&</sup>lt;sup>III</sup> Australian Bureau of Statistics (2008). *National Survey of Mental Health and Wellbeing*.

<sup>&</sup>lt;sup>iv</sup> Australian Bureau of Statistics (2008). *National Survey of Mental Health and Wellbeing*.

<sup>&</sup>lt;sup>v</sup> Olff M. (2017). Sex and gender differences in post-traumatic stress disorder: an update. European Journal of Psychotraumatology, 8(sup4), 1351204.

<sup>&</sup>lt;sup>vi</sup> This includes hospitalisations for self-harm both with and without suicidal intent. Australian Institute of Health & Welfare, *Suicide & self-harm monitoring* [Website], Deaths by suicide over time, Available at: <u>URL</u>. Visited 10 February 2021.

<sup>&</sup>lt;sup>vii</sup> Australian Institute of Health & Welfare, *Suicide & self-harm monitoring* [Website], Deaths by suicide over time, Available at: <u>URL</u>. Visited 10 February 2021.

<sup>&</sup>lt;sup>ix</sup> Women's Health Victoria, Submission on the Victorian Youth Strategy consultation, 2020, p 9.

<sup>&</sup>lt;sup>xv</sup> Calculated by Women's Health Victoria from the Victorian Population Health Survey 2017 based on the average across local government areas.

<sup>&</sup>lt;sup>xvi</sup> Women with Disabilities Australia (2011). *Assessing the situation of women with disabilities in Australia – a human rights approach.* 

 <sup>&</sup>lt;sup>xvii</sup> Suicide Prevention Australia (2016) Suicide and Suicidal Behaviour in Women: Issues and Prevention, p 23.
<sup>xviii</sup> Cummins, R et al (2007). Special Report 17.1: The Wellbeing of Australians – Carer Health and Wellbeing, Deakin University, p. vi–vii.

<sup>&</sup>lt;sup>xix</sup> Sebastian A and Ziv I (2019). One in eight: Australian single mothers' lives revealed. Report of a national survey undertaken in 2018 by the Council of Single Mothers and their Children. Available at: <u>URL</u>.