

Introduction

Wellbeing is a highly individualised, dynamic and subjective state, that is influenced by a complex combination of an individual's circumstances. Though everyone is likely to experience wellbeing differently, research has shown that certain groups of people fare more poorly.

Groups with the greatest wellbeing disparities are likely to experience social, economic, and/or environmental conditions which mean they are not afforded the same access to opportunities or experiences of other people or groups, subsequently compounding wellbeing deficits.

In Australia, health reports indicate those at greatest risk of having poorer health and wellbeing outcomes are people who come from socioeconomic disadvantage, have a disability, live in rural or remote locations or are Aboriginal and Torres Strait Islanders [1]. The LGBTIQ+ community [2], and people from other marginalised cultural or ethnicity groups are also highlighted as experiencing lower levels of wellbeing.

It's well known that females have faced significant inequality challenges that have impacted them in many ways.

Though much progress has been made towards gender equality in recent decades, the wellbeing gap between males and females is evident and seems to be widening.







The impact of the pandemic on female inequality has been widely reported, with damaging changes to female wellbeing in ways we haven't seen before. It has been a unique interplay of wellbeing detractors, including an increase in demands and the unequal division of household and childcare responsibilities that has challenged females' ability to balance their work and life commitments. In addition, an increase in worry about job security and finance was felt by many.

These pressures were exacerbated by feelings of isolation, disconnection and the loss of support structures that would typically provide a buffer from these stressors and further, give meaning and purpose to life [3].

It was (and continues to be) a uniquely challenging context for many women.

As a result, females report psychological stress at record levels, with more and more turning to mental health services for support [4].

The importance of wellbeing for this group of people cannot be underestimated. Females represent over half of the Australian population – so marginalized but not a minority – and 47 percent of the working population [5]. They also make up a proportion of the other minority groups facing significant wellbeing challenges in Australia.

The purpose of this paper is to explore what the research tells us about how gender is related to wellbeing, what forces are driving disparities, and what interventions may mitigate any further decline.



Key Research & Insights

For many years now researchers have sought to understand the impact of gender on health and wellbeing, with the hope that efforts can be made to optimize the conditions for all people to be well and thrive.



Insight #1: Females and males experience different physical health outcomes.

Compared with males, females [6]:

- are less overweight
- are less likely to smoke
- are less likely to consume excessive levels of alcohol
- have a higher life expectancy
- are less physically active
- · experience more sexual violence and
- have more disease and chronic conditions that they live with that don't cause death.



Insight #2. Females report a higher prevalence to mental health disorders in Australia.

For the first time, the Australian Bureau of Statistics 2020-21 conducted a National Study of Mental Health and Wellbeing released in June 2022 (NSMHW) [7]. They found:

- Females were more likely to experience high or very high levels of psychological stress than men (19% vs. 12% for males)
- Females experience higher rates of anxiety (21% compared to 12% males), affective disorders, such as depressive, bipolar, dysthymia (8.5% compared to 6% males), social phobia (9.8% compared to 4.3%) and PTSD (9.8 vs. 4.3%)
- Males had almost twice the rate of substance use disorder (4.4% with 2.3% females)
- Mental disorder prevalence declines with age, for both males and females, except for a slight increase for females in middle age (45 54 years)
- More females seek professional help for their mental health (22.8% vs. 12.2% for males)

Whilst this health data sheds light on the existence of mental health disorders in Australians it is only a small element of the wellbeing equation, with the need for broader, more holistic, and inclusive measures of wellbeing, above and beyond that of those associated with the presence of physical and mental ill-health.





Insight #3. Females report lower levels of overall wellbeing.

A recent review of the empirical studies on the role of gender on a more holistic picture of wellbeing and life satisfaction illustrated inconsistent findings. A need for more research on gender and wellbeing is needed [8].

Our own research (2022) into the differences between male and female wellbeing is based on an analysis of over 4,400 employed work experienced senior professionals and leaders, and it shows clear and significant disparities.

Compared to males, females' 'Wellbeing Snapshot' subjective wellbeing evaluations show significantly lower:

- Overall wellbeing
- · Personal wellbeing
- Work wellbeing
- Life satisfaction

There is no significant difference in happiness between males and females.

Table 1. Percent of Males and Females who scored their wellbeing Very/Fairly low, Neither low nor high, and Fairly/Very high, and the differences in % between genders.

Wellbeing Dimensions	% 'Very or fairly low'		
	Female	Male	% Difference
Work Wellbeing	13.8%	8.8%	5.0%
Living Wellbeing	10.9%	7.6%	3.3%
Life Satisfaction	4.3%	2.8%	1.5%
Happiness	4.1%	3.8%	0.3%
Overall Wellbeing	15.3%	10.2%	5.1%

% 'Neither low nor high' Female Male % Difference				
20.8%	21.6%	0.8%		
21.6%	21.0%	0.6%		
7.7%	7.7%	0.0%		
9.9%	10.0%	0.1%		
22.5%	21.7%	0.8%		

% 'Fairly or very high' Female Male % Difference				
65.4%	69.6%	4.2%		
67.5%	71.4%	3.9%		
88.1%	89.4%	1.3%		
86.0%	86.3%	0.3%		
62.1%	68.1%	6.0%		



Of the eleven wellbeing domains assessed in The GLWS Framework, females rated significantly lower than males on five out of the eleven dimensions, whereas males rated significantly lower than females on only one of the eleven areas. The aspect of overall wellbeing where men described worse wellbeing was in relation to their Authentic Relationships, Living Well, experiencing more negatives and fewer positives in their personal and family relationships outside of work.

Here are the five domains where females on average report significantly fewer positives and more negatives for their wellbeing, confirming a rather startling gender wellbeing gap.

- Meaning Purpose and Direction (Working Well)
- Resilience & Equanimity (Working Well)
- Resilience & Equanimity (Living Well)
- Balance & Boundaries (Working Well)
- Balance & Boundaries (Living Well)

In reviewing the differences in the GLWS domains, as well as the individual 121 GLWS survey items we can shed some light on the key gender wellbeing themes.



Insight #4. The greatest wellbeing differences between genders is in psychological wellbeing.

Irrespective of whether females have a mental health illness or not, most females experience lower psychological wellbeing, at work and home. They are more depressed, more stressed and anxious, more emotional, more likely to be focused on the negatives, and have much higher self-doubt than males.

They also experience greater work-life conflict. They are less comfortable with the amount of time they spend working, their workdays feel like a race, and they are at greater risk of high burnout, compared to males. Females are also more likely to report that family responsibilities and personal matters can spill over and negatively impact them while they work. Males seem to be better at managing work and life demands, with females reporting that they are significantly more likely to experience tensions and challenges with juggling the volume of personal commitments and responsibilities. This is likely to be created by the uneven division of household responsibilities, which saw females report that they are more likely to excessively struggle with household chores and personal administration.





Females, in comparison to males, appear to be less clear on their career direction or in their ability to shape it. They are also more likely to question whether they are in the right job and if their work contribution is valuable and makes a difference. Though, interestingly, they do derive more meaning and purpose from their work and see their career as more central to their identity, than males. Further investigation is needed to understand the implication of this result to females in the workplace.

Females rate their overall personal relationships to be stronger than males, with results indicating they are more likely to spend time with people they love, they feel important to others, give and receive affection, and contribute to other's successes. Interestingly this wellbeing domain did improve for males throughout the pandemic, most likely because of the increased quality of time spent with family and loved ones.

There are other aspects of female wellbeing that are starting to gain real attention and are likely to have an impact on wellbeing and other outcomes for females engaged in work, including:

- Infertility and prenatal loss an increase in the stress and grief of women who are unable to conceive without medical intervention [9] or lose their baby during pregnancy.
- Pregnancy and motherhood one in 10 females experience depression while pregnant and one in six in the first year of birth.
- Menopause an increased risk of psychological and physical challenges, such as depression, anxiety, sleep disturbance and weight gain.
- Domestic abuse experiences of psychological, physical and sexual abuse.

In considering that there are many determinants (e.g. individuals, biological, environmental) of wellbeing, it would be remiss of us not to explore the impact of the Covid-19 pandemic on female wellbeing.



The gendered impact of Covid-19 on wellbeing

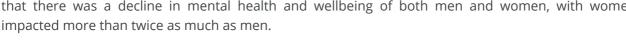
There is a clear story in the research to date on female wellbeing during the pandemic, and it isn't a positive one. Females from all over the world have been disproportionately affected by the pandemic, in many ways. Here's what we've learnt.



Insight #1: Both male and female wellbeing and psychological health dipped, but for females this was more substantial.

One large scale study [4] examining more than 50,000 females in Australia reported higher levels of stress and psychological distress during the pandemic, with younger age groups being most impacted. According to GLWS data both genders had significantly lower overall subjective wellbeing and work wellbeing when splitting the data into two time periods; pre-Covid and during Covid. But gender disparities exacerbated since Covid. There were no significant differences in wellbeing outside of work, and life satisfaction for both males and females during the pandemic, though happiness dropped substantially for females over the pandemic, and not for males.

A UK study [10] supported some of these findings by examining the gender gap in wellbeing during the Covid-19 pandemic. After the onset of the pandemic and during the first Covid wave, they found that there was a decline in mental health and wellbeing of both men and women, with women impacted more than twice as much as men.



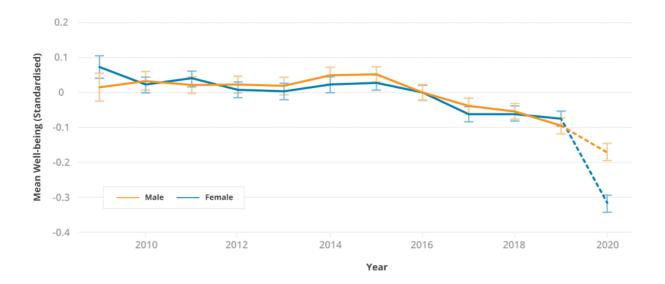


Figure 1. Examining the psychological wellbeing of UK males and females over time.

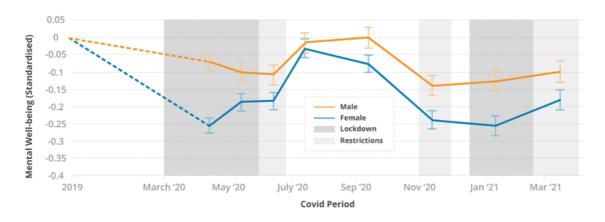


The UK was one of the most Covid-affected countries in the world, with high daily infectious and death rates, and strict 'lockdowns'.

Later data [10] capturing mental wellbeing of males and females during several Covid waves, from 2019 to March 2021, illustrated that the greatest differences between males and females were during the harshest 'lockdowns', where female mental health significantly fell.

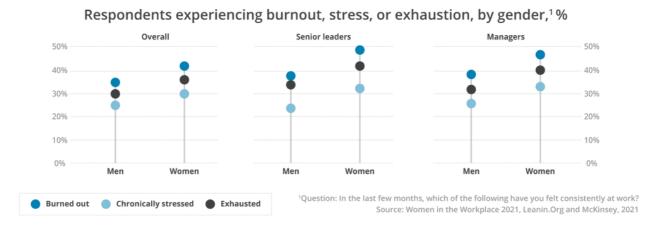
Echoing the Australian results, younger females were significantly worse off than older age groups.

Figure 2. Examining the psychological wellbeing of UK males and females through the Covid period.



Female burnout, stress and exhaustion levels also appear to be heightened compared to males (Figure 3), with more females (now 1 in 3) considering downshifting their careers or leaving the workforce [11].

Figure 3. Burnout, stress and exhaustion level in Male and Female employees



Some studies [10] have started to explore a variety of different factors (e.g., change to work situation, changes to domestic situations, changes to social factors, and personality traits) to understand this gender wellbeing disparity.





Insight #2. A larger proportion of work and life demands has contributed, but it's not the whole story.

Not surprisingly, domestic and childcare responsibilities fell more heavily on females during the pandemic, particularly those with parental responsibilities.

In one study [12] sampling 478 partnering parents in the US, an increase in time spent on housework and childcare was noted by both mothers and fathers during the pandemic. Though gendered norms continued with:

- 79% of mothers saying they were primarily responsible for housework, compared to only 28% of fathers
- 72% of mothers saying they took primarily responsibility for childcare, compared to 33% of fathers [12]

What's interesting about this data was that when fathers worked 'offsite' and mothers worked from home, the gender division in household activities increased further, with females taking on even more. But when the father worked from home and the mother worked 'offsite', fathers continued to be protected from gender norms with mothers continuing to take on primary responsibility of household responsibilities.

Though this increased demand on females subsequently lowered female wellbeing, it was not a contributing factor to those females who did not see an increase in household or childcare demands [10].



Insight #3. When females' social needs and structure aren't in place, they suffer greatly.

The most significant factors contributing to the gender wellbeing difference were social factors, with females feeling more isolated, disconnected, and lonely than males. According to the researchers this accounted for about a quarter of the overall gender wellbeing gap [10].

This supports the finding that female wellbeing was at its worst during the toughest lockdowns and restrictions, when females couldn't utilise and connect to their social networks and support structures as they normally would.





Insight #4. Female leaders play an important role in buffering the wellbeing challenges of others.

Despite female leaders being more likely to experience low levels of wellbeing themselves, they are more likely to support the wellbeing of their teams during the pandemic [11] (Figure 4)

Figure 4. Reported support from Male and Female managers during the pandemic



Source: Women in the Workplace 2021, Leanin.Org and McKinsey, 2021

This in turn has been shown to have positive outcomes for employee wellbeing and engagement.





Insight #5: There appears to be a rebounding affect, but only time will tell!

Diving deeper into a largely Australian GLWS dataset over several different 'during Covid' periods during March 2020 to December 2021, female wellbeing appears to rebound on a number of wellbeing dimensions. With increases in:

- Work wellbeing
- Happiness
- Resilience and Equanimity (Working Well)
- Meaning, Purpose & Direction (Working Well)

On the contrary though, the one wellbeing dimension that continued to steadily decline for females throughout the entire pandemic was Balance & Boundaries and their ability to manage the work responsibilities and demands, together with other home/life responsibilities.

Discussion

Wellbeing is a deeply individual state that is shaped by a multitude of complex and dynamic factors, often interplaying so that every person has their own unique wellbeing experience.

It's because of the individualised nature of wellbeing, that there have been mixed findings in the literature pertaining to the wellbeing outcomes and detriments of certain groups of people.

Gender differences in wellbeing has been a topic of much exploration for many years as people seek to understand which gender is better or worse off. Increasingly, research (including our own by GLWS), points towards overall wellbeing being lower in females, than males. Psychological stress has been the most widely populated wellbeing dimension that affects women.

There is no denying that a large part of this wellbeing drop has been driven by the catastrophic disruption of the pandemic, with males also feeling the burden of a tough couple of years. Though, the widening gap in wellbeing outcomes between males and females should necessitate greater attention.

With so much focus and work being done to attempt to close years of inequalities experienced by females in any array of situations and experiences, this widening gender wellbeing gap is a huge step back.





DISCUSSION (CONT)

In exploring the insights emerging about the challenges faced by females during the pandemic, it's clear that gender remains a powerful force in driving some of the wellbeing inequalities. Despite the move to more remote and flexible working approaches, this appears to have impacted females detrimentally, increasing work and home demands and creating social barriers that are clearly important in buffering psychological stress. Males have been able to better protect themselves from the tensions and challenges of work-life spill over and are likely to have different factors that contribute to and support them in their own psychological stress.

Several questions are being posed to prompt reflection, consideration, and further exploration into how gender (and other minority groups) impacts wellbeing, the key determinants of any wellbeing difference and what needs to be done to make positive progress.

- Are we clear enough on the detriments that impact the wellbeing of females, and different groups of people?
- What role do job and organizational factors contribute to gender wellbeing, and its differences?
- What can organisations do to lift female wellbeing?
- How can organisational wellbeing interventions better support the different wellbeing needs of people and groups?
- What are the risks and likely consequences of not placing our focus on the wellbeing of females, and other minority groups?
- How might societal gender norms be contributing to female wellbeing?
- What role do organisations play in challenging and redefining gender norms?
- How might the gender wellbeing gap exacerbate existing gender inequalities (e.g., work participation, pay)?
- How do we foster better work-life balance for females?
- How do we ensure sufficient support, networks and a sense of community is in place to safeguard psychological wellbeing?
- How can we better support females wellbeing during key experiences and transitions (motherhood, domestic abuse, menopause)?
- How might future governmental and organizational policy consider the impact of social isolation on psychological wellbeing (e.g., social distancing, remote working arrangements, use of social technologies)?



References & Resources

- [1] Australia's Health 2022: In brief. The Australian Institute of Health and Welfare 2022. https://www.aihw.gov.au/getmedia/c6c5dda9-4020-43b0-8ed6-a567cd660eaa/aihw-aus-241.pdf.aspx?inline=true
- [2] National Study of Mental Health and Wellbeing, 2020-21 | Australian Bureau of Statistics. (July 2022). https://www.abs.gov.au/statistics/health/mental-health/national-study-mental-health-and-wellbeing/latest-release
- [3] Women in the Workplace 2020. McKinsey & Company. 2020. https://wiw-report.s3.amazonaws.com/Women_in_the_Workplace_2020.pdf
- [4] Australian women's mental health and wellbeing in the context of the COVID-19 pandemic in 2020. https://alswh.org.au/wp-content/uploads/2021/12/NMHC-ALSWH-report-August-2021.pdf
- [5] Labour Force, Australia, Table 01: Labour force status by sex (December 2017) Labour Force, Australia, June 2022 | Australian Bureau of Statistics. (2022, July 14). https://www.abs.gov.au/statistics/labour/employment-and-unemployment/labour-force-australia/latest-release
- [6] The health of Australia's females, How does the health of females and males compare? (n.d.). Australian Institute of Health and Welfare. Retrieved 27 July 2022, from https://www.aihw.gov.au/reports/men-women/female-health/contents/how-does-the-health-of-females-and-males-compare
- [7] First insights from the National Study of Mental Health and Wellbeing, 2020-21 | Australian Bureau of Statistics. (2021, December 8). https://www.abs.gov.au/articles/first-insights-national-study-mental-health-and-wellbeing-2020-21
- [8] Batz, C., & Tay, L. (2018). *Gender Differences in Subjective Well-Being*. Handbook of well-being. Salt Lake City, UT: DEF Publishers. DOI:nobascholar.com.
- [9] Bagade, T., Thapaliya, K., Breuer, E., Kamath, R., Li, Z., Sullivan, E., & Majeed, T. (2022). Investigating the association between infertility and psychological distress using Australian Longitudinal Study on Women's Health (ALSWH). *Scientific Reports*, *12*(1), 10808. https://doi.org/10.1038/s41598-022-15064-2
- [10] Etheridge, B., & Spantig, L. (2022). The gender gap in mental well-being at the onset of the Covid-19 pandemic: Evidence from the UK. European Economic Review, 145, 104114. https://doi.org/10.1016/j.euroecorev.2022.104114
- [11] Women in the Workplace 2021. McKinsey & Company https://www.mckinsey.com/featured-insights/diversity-and-inclusion/women-in-the-workplace
- [12] Dunatchik, A., Gerson, K., Glass, J., Jacobs, J. A., & Stritzel, H. (2021). *Gender, Parenting, and The Rise of Remote Work During the Pandemic: Implications for Domestic Inequality in the United States. GENDER&SOCIETY, Vol 35 No. 2.* https://journals.sagepub.com/doi/10.1177/08912432211001301?icid=int.sj-full-text.similar-articles.2

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