

ALSWH COVID-19 Survey Report 3: Survey 3, 27 May 2020

Authors: Deborah Loxton, Peta Forder, Natalie Townsend, Isabelle Barnes, Emma Byrnes, Gita Mishra, Leigh Tooth, Julie Byles

Team: Anna Graves, Clare Thomson, Katherine Tuckerman, Ryan Tuckerman

For more information, please contact Professor Deborah Loxton: (Deborah.Loxton@newcastle.edu.au)

Background

The Australian Longitudinal Study on Women's Health (ALSWH) has been collecting comprehensive quantitative and qualitative data from over 57,000 Australian women for 25 years (alswh.org.au). As with the rest of the population, the women in the study have never lived through anything like the current pandemic. To capture this moment in time, a series of fortnightly short online surveys was deployed via email to women in the three ALSWH cohorts born 1989-95, 1973-78, and 1946-51, commencing in late April 2020. The purpose of these surveys is to ascertain women's experiences during the pandemic through set questions, a series of themed topics, and an opportunity for free-text comments. This third survey includes responses to the set questions on women's experiences of flu-like symptoms, COVID-19 testing, their level of stress, and the topic theme of living arrangements, before and during the pandemic. The aim of this report is to provide a snapshot of the experiences of Australian women in late May-early June 2020, adding to the information provided from the first two survey reports (covering 29 April to 5 May, and 13 May to 19 May 2020).

Method

COVID-19 Survey 3 was deployed on Wednesday 27 May 2020. Email invitations were sent to 29,471 women: 14,217 from the 1989-95 cohort, 8671 from the 1973-78 cohort, and 6583 from the 1946-51 cohort. In all, 7816 (27%) women returned a completed survey: 2630 (18%) from the 1989-95 cohort, 2753 (32%) from the 1973-78 cohort, and 2433 (37%) from the 1946-51 cohort.

This report presents data from the 7535 women who completed COVID-19 Survey 3 within a 7-day period (27 May to 2 June inclusive). From the free-text comments provided by 2854



women, 600 were randomly sampled (200 from each cohort) and analysed for common content and major preliminary themes.

Findings

COVID-19 symptoms and testing

In all, 13% (956) of women reported experiencing flu-like symptoms (e.g. fever, cough, sore throat, runny nose, shortness of breath) in the previous 14 days, with 1% (108) reporting a change to their sense of taste or smell, and 3% (228) reporting that they thought they might have COVID-19 (see Table 1).

COVID-19 testing was reported by 11% (808) of women. Among these women, 85% (687) reported having one COVID-19 test, and 13% (108) reported more than one COVID-19 test (seven women did not report number of tests).

Table 1. Recent flu symptoms (within last 14 days) among 7535 ALSWH women

	1989-95 cohort Aged 25-31 N=2545	1973-78 cohort Aged 42-47 N=2642	1946-51 cohort Aged 69-74 N=2348
	n %	n %	n %
Flu-like symptoms	504 19.8	325 12.3	127 5.4
Changes to taste/smell	51 2.0	43 1.6	14 0.6
Thought they might have COVID-19	118 4.6	73 2.8	37 1.6

Missing observations were included in the denominators.

Missing data for Symptoms: 1989-95 cohort n=2 ; 1973-78 cohort n=6; 1946-51 cohort n=13.

Missing data for Taste/Smell: 1989-95 cohort n=0; 1973-78 cohort n=8; 1946-51 cohort n=17.

Missing data for Suspect COVID-19: 1989-95 cohort n=4; 1973-78 cohort n=14; 1946-51 cohort n=21.

Importantly, across all cohorts, 72% (684) of women who reported flu-like symptoms did not get tested and 46% (105) of the women who reported that they thought they might have had COVID-19 did not get tested.

Stress

Younger women were more likely to report high levels of stress than older women (see Figure 1). Women aged 25-31 reported the highest levels of stress, with one in four (25%) reporting feeling very or extremely stressed. Women aged 42-47 also reported high levels of stress, with around one in eight women (13%) reporting feeling very or extremely stressed. Women aged 69-74 reported the lowest rates of stress, with 2% of women in this age group reporting feeling very or extremely stressed.

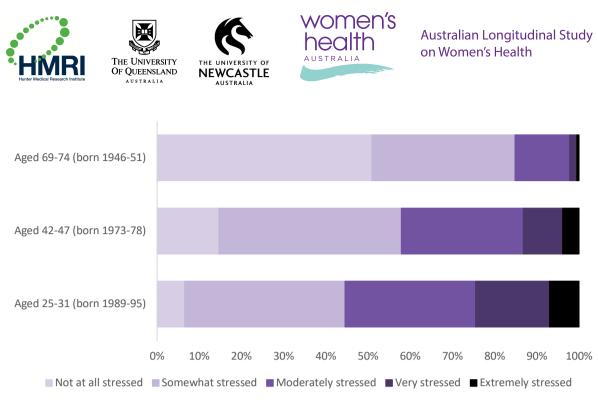
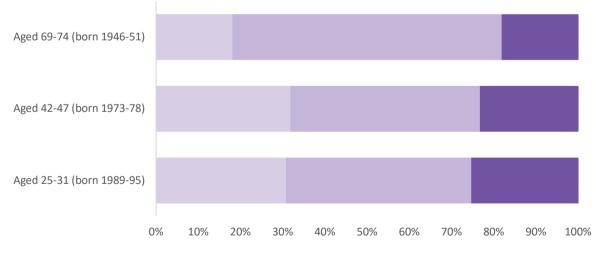


Figure 1: Stress levels of women aged 25-31 (n=2545), 42-47 (n=2636) and 69-74 (n=2339)

One in three women aged 25-31 (31%) and 42-47 (32%) reported lower levels of stress than at COVID-19 Survey 1, and approximately one in four (25% and 23%, respectively) reported higher levels of stress than at COVID-19 Survey 1 (see Figure 2). Women aged 69-74 were more likely to report no change in stress level since COVID-19 Survey 1 than those aged 25-31 and 42-47 (64% versus 44% and 45%, respectively). Almost one in five women aged 69-74 (18%) reported lower levels of stress than at COVID-19 Survey 1, and one in five (18%) reported higher levels of stress than at COVID-19 Survey 1.



■ Lower level of stress than Survey 1 ■ No change in stress from Survey 1 ■ Higher level of stress than Survey 1

Figure 2: Change in level of stress among women completing all three COVID-19 surveys (COVID-19 Survey 1 versus COVID-19 Survey 3)



The prevalence of very high levels of stress for women aged 25-31 and 69-74 has remained consistent across the three COVID-19 surveys (see Figure 3). However, the percentage of women aged 42-47 who reported very high levels of stress has decreased from nearly one in five (19%) at COVID-19 Survey 1 launched on 29 April, to approximately one in eight (13%) at COVID-19 Survey 3 launched on 27 May.

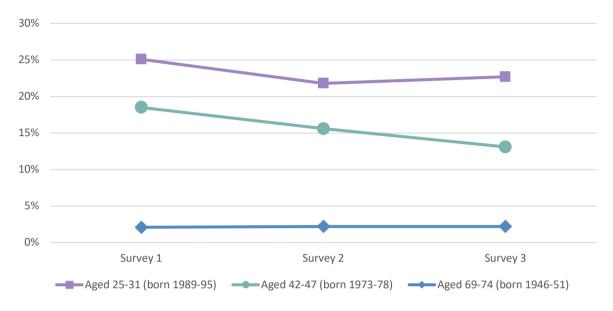


Figure 3: Percentage of women who completed all three COVID-19 surveys who reported very high levels of stress

Living arrangements during COVID-19

Women aged 25-31

Two-thirds of women aged 25-31 reported that they were living with a partner or spouse (66%); 18% were living with someone other than a partner, parent, child or relative; 16% were living with their own or their partner's children; and 14% were living with their parents or their partner's parents (see Figure 4).

One in eight (13%) women aged 25-31 reported a change in their living arrangements since the start of COVID-19. The three most commonly reported changes in living arrangements which women reported were having moved in with their partner (17%), their parents (17%) or someone other than partner, parent, or children (20%).

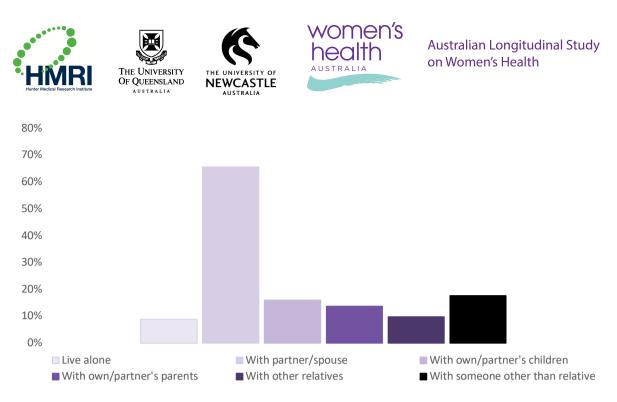


Figure 4: Living arrangements during COVID-19 pandemic for women aged 25-31 (n=2545)

Women aged 42-47

Three-quarters of women aged 42-47 reported living with their partner or spouse (74%) and/or children (75%) during the COVID-19 outbreak (see Figure 5).

Only 6% of women aged 42-47 reported a change in their living arrangements since the start of COVID-19. One in eight (13%) reported that their children or grandchildren had come to live with them, while one in ten (11%) reported that their children or grandchildren had moved out. Almost one in ten women reported moving in with parents (8%) or someone other than a relative (8%).

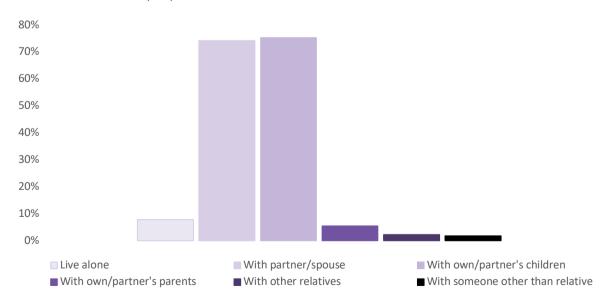


Figure 5: Living arrangements during COVID-19 pandemic for women aged 42-47 years (n=2642)



Australian Longitudinal Study on Women's Health

Women aged 69-74

Two-thirds (67%) of women aged 69-74 reported living with their partner or spouse; 26% reported living on their own; and 7% were living with children (see Figure 6).

Only 4% of women aged 69-74 reported a change in their living arrangements since the start of COVID-19. Approximately one in four (28%) reported that their children had moved in with them; 11% reported that their children or grandchildren had moved out; and 6% reported that they had moved in with their children or grandchildren.

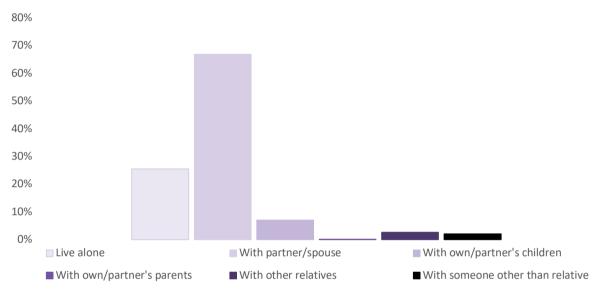


Figure 6: Living arrangements during COVID-19 pandemic for women aged 69-74 years (n=2348)

What women said about their living arrangements during COVID-19

Women across all three cohorts discussed changes to living arrangements during COVID-19, however, the impact was reported most commonly by women aged 25-31 and 42-47. Women aged 25-31 spoke about temporarily moving in with parents or partners.

I lived with my parents for 6 weeks during the strictest part of the lockdown. This was in a town 7 hours away, I've since returned to my own home where I live alone. 1989-95 cohort

I am staying with my partner temporarily during the lockdown, I have not given up my rented apartment in Sydney. 1989-95 cohort

I moved back in with my mum after returning to Australia from the UK where I have been living for the past 2 years and will return once the situation returns to normal. 1989-95 cohort

Women aged 42-47 discussed their children or parents moving into their home.

I have brought my mum to stay with us while in lockdown (she is 71). 1973-78 cohort





Daughter 20 has lost her job and employer refused to apply for jobkeeper allowance....She has needed to return home as she couldn't pay her rent and living expenses. 1973-78 cohort

... My parents had their holiday with me unexpectedly extended, which did not cause any stress or issues at all. 1973-78 cohort

Some women discussed the emotional and economic impacts of their living arrangements during COVID-19.

I am currently homeless, struggling to find an apartment because I am unemployed and I have now no current fixed address, living in the loungeroom of my friends place. I'm facing a lot of difficulty getting even a short term lease on a cheap/damp apartment in my local area because I don't have a job, even though my income is over \$600pw with the coronavirus supplement. I'm very stressed and trying not to feel downtrodden in a city which is too expensive to live in. 1989-95 cohort

My grandfather has recently died...I have moved in with my grandmother temporarily until restrictions ease, to be a support for each other. 1989-95 cohort

The breakdown of our share house has occurred with a couple moving out. It was very stressful trying to find someone to replace them as hardly anyone is looking to move at this time! 1989-95 cohort

My mother who is 96 has been living with us since the outbreak of Covid-19...The challenges are she has become quite dependent on me for all her needs that she managed herself in her own unit, and as time goes on I am finding the responsibility for the practical caring such as helping her with showering is a stress for me. However I'm glad to have her with us, rather than living alone. 1946-51 cohort

Impact of COVID-19

What women said about the impact of COVID-19

Women across all three cohorts indicated that they were continuing to self-isolate as much as possible due to COVID-19. These women spoke about enjoying the slower pace of life and time with family at home.

Enjoying time at home with 4 month old son... it's been a fantastic time to spend together as a new little family. 1989-95 cohort

It's been a wonderful break, much like a much needed very deep breath. My health has benefited! 1973-78 cohort

...I have actually enjoyed the quieter pace of life in lock-down. I am usually stressed by believing there is too much to do, but staying home has been a big relief from my usual busyness. 1946-51 cohort







While many women appreciated this, some expressed feelings of boredom and frustration as a result of the prolonged isolation and restrictions. Some also indicated a sense of demotivation due to the inability to make plans for the near future.

The constant changes in regulation about who can meet and when and how are getting to my head! It means that it's hard to make plans with certainty and it's hard to feel certain about any future plans. I'm tired of not having things to look forward to. I'm tired of googling the rules before I do anything. It's hard to think long term and it's hard to care. 1989-95 cohort

It's been a struggle to get up in the mornings. I found I'm hitting snooze on my alarm a lot. I normally don't do that. While I'm used to working from home and not catching up with people in person, I'm really tired of the sameness. The novelty of catching up with people using zoom has worn off. 1973-78 cohort

Feeling like life is in limbo. 1946-51 cohort

These feelings of frustration were expressed particularly strongly by women aged 69-74, who explained that they were becoming "fed up" with the effects of the pandemic.

I am finding the constant coverage of the cover-19 difficult. I understand that we need to be informed, but feel that we also need to return to a more 'normal' life. Am starting to be concerned at how many other aspects of our lives are starting to be neglected. 1946-51 cohort

Totally over it. Bored, sleeping too much, lacking motivation to do anything. 1946-51 cohort

Dragging on!! 1946-51 cohort

Women across all three cohorts spoke of their concern for other family members' health, finances, and futures. A number of women explained that this had an impact on their own mental wellbeing.

... we would rather stay home and stay safe than have the possibility to catch the virus and pass it on to our older family members. 1989-95 cohort

It has been very stressful for my parents who have recently retired having their savings erode and having to go to the hospital for other reasons during the height of the pandemic, my brother who was made redundant and my sister with decreased salary. 1989-95 cohort

Heightened concern for elderly, unwell parents and recently widowed sister-in-law living alone - concern about isolation and caring for them while maintaining social distance. 1973-78 cohort

Concerns about the future for children and grandchildren. Not personally as our lives have been good and we are older. 1946-51 cohort

Among women aged 25-31 and 42-47, there was an emerging theme of heightened stress within relationships. These women experienced disconnect from their partners and tension between family members. A number of women indicated that this was due to being in such close proximity for long periods, often with a lack of time to themselves.





Between home schooling and working from home, having four people in a cramped house has impacted each of us and it will take some time to bounce back from that. 1989-95 cohort

It has been hard at times living with my partner who is experiencing a depressive episode due to losing his job from COVID, and can sometimes be irrationally cranky, but I know that it will pass. 1989-95 cohort

Navigating a marriage separation, being isolated together with our children during this time has had positive and negative impacts (less activities/obligations outside of the home has offered a calmer environment and opportunity to talk, although cabin fever / tensions of limited personal space off-set that positive feeling at times). 1973-78 cohort

The whole COVID19 thing is having an impact on [my] partner. He will not talk about it but he has become very difficult to live with when he is home. He is always uptight and grumpy and has begun to question my everyday actions and movements, I am feeling very untrusted. 1973-78 cohort

Women from all three cohorts offered their thoughts on the continuing relaxation of restrictions. There were both positive comments and concerns about implementing social distancing. Notably, many women aged 42-47 commented on the reopening of schools, explaining that their children's return to school had alleviated a lot of their stress.

Great news is school is back. The kids are happier and so are the parents. That was a very stressful experience and caused a lot of rift in our family. We are a strong family unit, this almost broke us. 1973-78 cohort

Children returning to school has been a massive positive. They need the routine and socialisation. We need quiet to be productive at work. 1973-78 cohort

Women across all three cohorts discussed the concept of "normality", offering different perspectives on this. Some women felt that things were slowly returning to normal, as they were before the impact of COVID-19.

Positive - I am back at work so I am enjoying it and I am relieved I am able to earn an income again, as I have not qualified for any government assistance during the pandemic, as my husband is still working. My children are back at school for online learning so we are getting closer to a normal routine. 1973-78 cohort

It's good to feel that some sort of "normality" is coming back!! I don't feel as "freaked out" going to the shops now compared to a month ago. 1973-78 cohort

I am now feeling that life is slowly getting back to normal as I can now see family. I still not have seen any friends and keep shopping to a minimum. 1946-51 cohort

Other women expressed both openness to, and acceptance of, a "new normal", with the recognition that several restrictions would remain in place for some time.

Uncertainty around work conditions (hospitality) and the adjustments needed to maintain a "new normal". 1989-95 cohort

It feels a bit stuck in terms of flexibility to change my circumstance until everything settles to a proper new normal... Professional life on hold. No mental energy. No





one asks how each other are coping with covid anymore, maybe it's normalised or others are more adaptive than me. 1989-95 cohort

All in all, I am enjoying the "new" normal and am almost not wanting it to go back to the "old' normal! 1973-78 cohort

A number of women provided reflective comments, identifying some positive aspects that had emerged from COVID-19. These included stronger community spirit, appreciation for family and friends, a sense of gratitude, and mindfulness about time spent in different aspects of their lives. These women spoke of their desire to retain these after the pandemic, as part of their "new normal".

I do hope that some elements of this time are sustained in society- emphasis on home time, loved ones, physical activity, health, creative pursuits, independence. 1989-95 cohort

I like this life of no obligations to go anywhere and participant in activities I go to out of obligation rather than out of desire. I am going to take a good look at what I reintroduce back into my life when this is over. I hope we all learn that and that we treat each other with more kindness moving forward. 1973-78 cohort

Hope that some of the good things such as kindness and sense of community will continue. 1946-51 cohort

Acknowledgements

The research on which this report is based was conducted as part of ALSWH at the University of Newcastle and the University of Queensland. We are grateful to the Australian Government Department of Health for funding ALSWH, and to the women who provided the survey data. We thank the University of Newcastle and the Hunter Medical Research Institute for providing funding for the COVID-19 surveys.