The mental wellbeing of New Zealanders during and post-lockdown

Meisha N Nicolson, Jayde AM Flett

Aotearoa New Zealand’s ‘go hard and go early’ approach meant that we were one of the first countries in the world to ease our COVID-19 lockdown restrictions. But, the re-emergence of community transmission in Tāmaki Makaurau Auckland demonstrated the recovery from COVID-19 will be a marathon rather than sprint. By highlighting people’s experiences during and following Alert Level 4 lockdown we hope to provide assurance that most people found positive aspects of the lockdown, while also highlighting inequitable experiences and ongoing mental health concerns.

Te Hīranga Hauora/Health Promotion Agency asked New Zealanders about their wellbeing during Alert Level 4 lockdown and post-lockdown (during Alert Level 1). Almost nine out of 10 people reported at least one positive experience during lockdown. During lockdown more people reported pride in their ability to cope, more time for hobbies and exercise, heightened sense of community, increased family resilience and a stronger personal commitment to Aotearoa New Zealand than they did post-lockdown.

Importantly, Māori and Pasifika reported several notable positive experiences post-lockdown. More Māori were proud of their ability to cope and reported higher whānau resilience than non-Māori/non-Pasifika. Likewise, more Pasifika had a renewed appreciation for life and spent more time with family and friends than non-Māori/non-Pasifika.

But we also identified some inequities. Although fewer people reported severe experiences of depression and anxiety post-lockdown (5% compared to 8% during lockdown), this reduction mostly occurred in non-Māori/non-Pasifika people. Of those who completed both during and post-lockdown surveys, over half reported no experiences at both time points, while 22% had improved experiences and 13% had worsening experiences post-lockdown.

Experiences of depression and anxiety were common for young people both during and post-lockdown. Almost 60% of young people had some experience of depression or anxiety post-lockdown (57%), 10% being severe. The recent ‘Protecting and promoting mental wellbeing: Beyond COVID-19’ report by Koi Tū, highlighted the persistently inequitable and worsening state of youth mental health.1 In addition, the impacts of COVID-19 on youth mental wellbeing are likely to be extensive and enduring.2 Action is required to reduce adverse life course consequences. Te Hīranga Hauora supports young people by providing digital mental health support at thelowdown.co.nz. Both thelowdown.co.nz and depression.org.nz have been updated to provide COVID-19-specific mental health advice for those seeking help.

Innovative and collaborative community-led responses have been an integral part of the Psychosocial and Mental Wellbeing Recovery Plan response to COVID-19. Government and non-government organisations have changed the way they work to adapt to a rapidly changing environment. To support those in the Pasifika community experiencing mental distress, Te Hīranga Hauora worked in collaboration with Mapu Maia, Vaka Tautua, the Mental Health Foundation and Pasifika health leaders Phil Siataga, Stephanie Erick and Tui Tararo. Together, we launched Mana Pasifika, a campaign to encourage and destigmatise help-seeking for depression and anxiety in Pasifika communities. This strengths-based and story-driven approach is by Pasifika, for Pasifika and with Pasifika.
Economic stressors also went hand-in-hand with mental distress. Experiences of depression and anxiety were twice as common for people without enough money to meet their everyday needs than those with enough money. One in seven people reported not having enough money (14%), however this rises to over one in five for Pasifika people (22%). Those that did not have enough money were also less able to cope with everyday stresses.

Post-lockdown, one in 10 people reported loss of their main source of income. Income loss was higher for Pasifika and Asian New Zealanders than it was for New Zealand Europeans. Likewise, almost three in 10 people reported reduction in income. This rate was higher for Asian New Zealanders than New Zealand Europeans. Unexpectedly, a small number of peoples’ income increased post-lockdown (5%). However, increased income did not mean they were better off. People whose income had increased were more likely to have severe experiences of depression or anxiety than people with no change in income. This unexpected finding may reflect the increased stressors experienced by those who had increased work hours or greater responsibility in the COVID-19 response, such as supermarket and other essential workers. Consideration of the impact of economic stressors on mental health is important as the economic implications of COVID-19 are likely to be long-term.

More detail on our survey
Te Hiringa Hauora commissioned Nielsen (a global measurement and data analytics company) to conduct two COVID-19 surveys using online panels. Data were collected during:

**Alert Level 4 Lockdown:** 7 to 13 April 2020, the highest level of risk and restriction ($n=1,190$).

**Alert Level 1 Post-lockdown:** 10 to 19 June 2020, when day-to-day life was largely restriction-free ($n=925$).

Our surveys were weighted to better represent the Aotearoa New Zealand population and measured experiences of depression and anxiety (Patient Health Questionaire-4: PHQ-4), positive lockdown experiences and the economic impacts of lockdown. Broader findings and methodology can be found in the Nielsen report on the Te Hiringa Hauora website.3

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Nil.

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**Author information:**
Meisha N Nicolson, Senior Researcher, Te Hiringa Hauora/Health Promotion Agency, Te Whanganui a Tara/Wellington; Jayde AM Flett, Senior Researcher, Te Hiringa Hauora/Health Promotion Agency, Te Whanganui a Tara/Wellington.

**Corresponding author:**
Meisha N Nicolson, Te Hiringa Hauora/Health Promotion Agency, Level 16, 101 The Terrace, Te Whanganui-a-Tara 6011.
m.nicolson@hpa.org.nz

**URL:**
REFERENCES:

