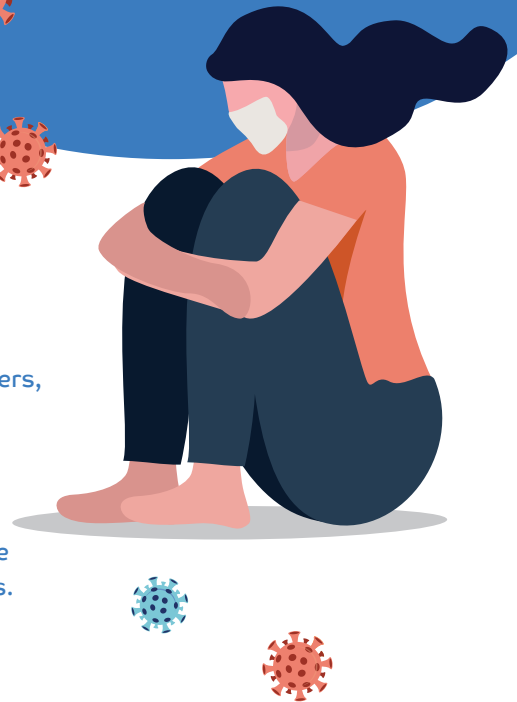




The gendered effects of COVID-19 and its policy response in Hong Kong: Preliminary evidence from the first wave of the pandemic

This briefing reports on qualitative research conducted through in-depth interviews with men and women in Hong Kong to understand the differential gendered effects of COVID-19 and the related policy response. Surveys were conducted with healthcare workers, social workers, foreign domestic workers, street cleaners, ethnic minorities, university students, pregnant women, new mothers, parents, as well as people working in industries disproportionately affected by the pandemic. The most important findings are that the pandemic has led to a major mental health crisis, caused important challenges in access reproductive health services, and has severely marginalized foreign domestic workers. We further expand upon each of these below.



Mental health crisis

The COVID-19 pandemic has not only affected the physical health of those infected, but it also has affected the mental health of the population. Feeling ‘anxious’, ‘worried’, ‘stressed’ ‘traumatized’, and ‘fearful’ were the most commonly used terms when respondents referred to their mental health condition. The closure of schools, outdoor play spaces, sports, and social activities further exacerbated the problem. Concerns about how to maintain and protect mental health came out as the biggest challenge amongst all of the participants regardless of their gender or occupation.

“Well, honestly, or based on observations, I think there will be a long-term effect, especially mental. You cannot avoid the paranoia.”

Homemaker, woman

Healthcare workers, particularly female health workers, were worried that their children and elderly family members would get infected from them. As a result, many chose to stay at hotels instead of at home with their loved ones.

This work-life conflict left healthcare workers emotionally drained and exhausted.

“Yeah, I am staying out in the hotel for two to three months now. I am scared my family can get an infection from me. It is emotionally very disturbing for a mother to leave separately from your small children but for their safety, I have to do.”

Healthcare professional, woman

Mothers were concerned about the aggressive, grumpy, and distorted behaviours of their children and suspected it was due to elongated screen time.

“This lockdown is impacting myself and my children a lot. I am worrying more about my children. No school, no outing, no meeting with friends, just sitting at home in front of a laptop or with their phone making things worse.”

“You cannot avoid the paranoia.”

They are becoming so grumpy, not able to tolerate each other’s talk. Just yelling at each other. I think this lockdown is impacting their mental and emotional health a lot.”

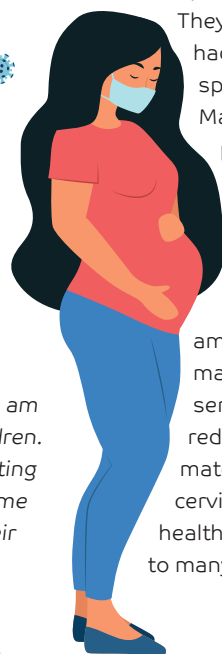
Mother of three children

In contrast, while Hong Kong never experienced a full lockdown, due to work from home policies, school closures, and social distancing measures, some male respondents actually reported increased well-being due to having more time to sleep, time to relax, and to do exercise.

They also stated that family dynamics had improved as they were able to spend more time with their family. Many mentioned that after the pandemic they were planning to have a calmer or slower lifestyle.

Challenges in the utilization of reproductive care services

The pandemic increased anxiety amongst pregnant women as maintaining access to healthcare services was a major concern – the reduced or suspended services of maternal, postnatal, family planning, cervical cancer screening, and other health services posed a challenge to many women. For example, some





women reported additional challenges of obtaining access to necessary antenatal care and health education during their pregnancies.

“However, the registration is done but the appointment was given like I mean very late. Now it has been around 17 weeks for the pregnancy but she just visits the hospital only once, in 16 weeks, and only once that she goes is for Down Syndrome screening actually for that reason but she hasn’t met the doctor yet. So actually, we are concerned,

“Is everything OK?”
Husband of a pregnant woman

Women who delivered during the pandemic suffered during their hospital stays due to policies which prevented them from having a companion with them. This left women alone without any emotional or social support and increased feelings of loneliness and anxiety.

“I felt lonely in the ward, no one to talk to due to fear and I felt more anxious and alone when I got to know the hospital

will not allow even my husband come into labour room during delivery.”

New mother

Women who delivered during the pandemic period also could not get post-natal check-ups as hospitals had suspended those services. New mothers go through many physical, physiological, and emotional changes that can easily get ignored as the attention shifts to

the child. Therefore, post-natal services were very critical to them. Even the mothers who had post-delivery wounds were not able to get any care due to postponed post-natal care appointments.

“I felt lonely in the ward... anxious and alone... ”

“After delivering my baby when I came home,

I did not get any check-up appointment for me. I had difficulty in sitting during breastfeeding because of wounds and pain in that part (vaginal area). Hospital told me to take an appointment for this after the COVID-19 pandemic. It has been two to three months since I am suffering and still got no appointment.”

New mother



Severe marginalization of foreign domestic workers

As in many other parts of the world, women in Hong Kong also had to bear a disproportionate share of the additional burden of caregiving and household chores that emerged during the pandemic. This was particularly true for foreign domestic workers who struggled due to the work from home and school closure policies that were first introduced in January, and then were then extended in February and March.

Almost all (>98 %) of the foreign domestic workers in Hong Kong are women who live-in with their employers. Many found themselves with no privacy, overworked, and scrutinized around the clock by their employers. In addition to daily household and care responsibilities, they also had to bear the burden of cleaning and sanitizing the house and toilet multiple times a day causing their hand and eyes to become irritated and it left them feeling nauseous.

“Many of us (domestic workers) have no privacy, overworked, and scrutinized 24x7 during the pandemic. In addition to daily household and care responsibilities, we have to do cleaning and sanitization of house and toilet multiple times as many as 25 times a day. My hands and eyes irritated and dried because of excessive use of cleaning agents, alcohol, and bleaches.”

Domestic worker, woman



Social distancing measures also created havoc in these domestic workers' lives as most employers did not allow them to go out even on their rest days due to the fear that they would bring infection home, while at the same time, employers themselves went out for social activities.

"Is it some kind of joke? If we go out on our rest day we catch the virus and employers go out whenever they want, they are not catching the virus and risking my health."

Foreign domestic worker, woman

Due to being overworked and feeling trapped, the well-being of the foreign domestic workers was greatly affected. Some foreign domestic workers also complained about the treatment they got from society due to their employment status as well as their skin colour.

"It's silent – yeah, it's a silent type of discrimination that if you are a helper you are – you're having a dark skin, it means that you are the one who will – who carry the virus. Because – well,

I don't want to blame and I – it's not this time to keep on saying, but sometimes I also feel bad, so I feel depressed sometimes."

Foreign domestic worker, woman

The economic slowdown meant many employers themselves lost their jobs, which led to many letting their domestic workers go. Or, due to the fear of getting infected from their employees, others fired their domestic workers. Normally once a domestic worker loses their job, they must return home, however, with suspended flights it was challenging for many of them to return home, leaving many in legal limbo.

Some domestic workers received extended visas from the Immigration Department to stay, but without a source of income, many struggled to get access to food, masks, necessities, and shelter. Some ended up staying in the boarding houses which are often unauthorized and have uninhabitable conditions.

"...it's a silent type of discrimination... having a dark skin"

"I have no job, no money, no food... No place to stay."

"I have no job, no money, no food. My friend has some part-time job so she shares some food with me. No place to stay. I live in a boarding house with 10-12 more people. My bed is in a small room, six of us sleep there. Three bunk beds- five ladies and one man. It is troublesome sharing the same bathroom, changing dress, etc. I am waiting for flights to Sri Lanka."

Foreign domestic worker from Sri Lanka

METHODS

These data come from interviews conducted with key affected constituent groups, including healthcare workers, migrant workers, parents with school-aged children or younger, pregnant women, new mothers, and those working in high-risk industries. In total, 47 interviews were conducted between May-July 2020. Interviews provide illustrative examples of how people were affected according to their position, income, and occupation. Participants were purposefully recruited through social media adverts and women's organizations. Oral and/or written consent was obtained and interviews were recorded and transcribed for analysis. Thematic analysis was used for the rapid dissemination of results for policymakers.

ACKNOWLEDGEMENTS

For more information on this project, please contact **Dr Karen A. Grépin, Associate Professor, The University of Hong Kong School of Public Health:** kgrepin@hku.hk

This project forms part of a wider comparative study of the gendered impact of COVID-19 in Canada, Hong Kong, China and UK. More information can be found: <https://www.sfu.ca/fhs/gendercovid.html>

This work was supported by the Canadian Institutes of Health Research under grant OV7-170639

