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NOTE

From:	General Secretariat of the Council
To:	Delegations
Subject:	Draft Council Conclusions on Supporting Women's Mental Health

Delegations will find attached a set of draft Council Conclusions on "Supporting women's mental health" prepared by the Presidency.

This document will be examined by the Working Party on Social Questions at its meeting on 17 July 2024. Delegations are encouraged to submit written comments already before the meeting wherever possible. Please send your comments to the following email addresses:

LIFE.social@consilium.europa.eu and equality.epsco.hupres@mfa.gov.hu

NB. The deadline for written comments will be on 17 July (COB).

Draft Council Conclusions on Supporting Women's Mental Health

THE COUNCIL OF THE EUROPEAN UNION

ACKNOWLEDGING THAT:

1. The Treaty on the Functioning of the European Union provides that “Union action, which shall complement national policies, shall be directed towards improving public health, preventing physical and mental illness and diseases, and obviating sources of danger to physical and mental health”.¹
2. Article 8 of the Treaty on the Functioning of the European Union provides that “In all its activities, the Union shall aim to eliminate inequalities, and to promote equality, between men and women”.
3. The Charter of Fundamental Rights of the European Union declares that “everyone has the right to respect for his or her physical and mental integrity”.²
4. According to the Commission's Communication on a Comprehensive Approach to Mental Health, “mental health is an integral part of health. It is a state of well-being in which individuals realise their own abilities and can cope with the stresses of life and contribute to community life. Mental health is a precondition for a productive economy and inclusive society and goes beyond individual or family matters”.³ The Communication notes that women are almost twice as likely as men to experience depression, *inter alia* due to life circumstances and cultural stressors. It also emphasises the need to tackle the unequal sharing of domestic and family care responsibilities.

¹ Treaty on the Functioning of the European Union. Official EN Journal of the European Union, 2012, Article 168 (1). <https://eur-lex.europa.eu/LexUriServ/LexUriServ.do?uri=CELEX:12012E/TXT:en:PDF>

² Charter of Fundamental Rights of the European Union. Official Journal of the European Communities, 2000, Article 3 (1). https://www.europarl.europa.eu/charter/pdf/text_en.pdf.

³ Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions on a comprehensive approach to mental health, COM(2023) 298 final.

5. The Commission's Communication emphasises, moreover, "that countries should also deal with the challenges related to the prevention of mental health problems of vulnerable communities, reinforce early recognition of mental health issues, provide early interventions and support, and address the links between exclusion, inequalities and mental health by increasing efforts to combat discrimination, hate speech and violence".
6. According to the Commission's Gender Equality Strategy 2020-2025, pursuing a "dual approach of targeted measures to achieve gender equality, combined with strengthened gender mainstreaming" is essential. The Strategy further states that "the Commission will enhance gender mainstreaming by systematically including a gender perspective in all stages of policy design in all EU policy areas, internal and external."
7. In its recent Conclusions on Mental Health, the Council recognizes that "mental health problems are associated with many forms of inequalities, such as, for example, people in vulnerable situations, minorities, marginalised groups and those in disadvantaged socioeconomic situations including those living in long-term care services, those experiencing loneliness and social isolation, children and young people, older people, women, LGBTI persons, cancer patients, persons with disabilities, refugees, migrants, prisoners and people experiencing homelessness."⁴
8. Intersectionality can have a great impact, as it affects different groups of women in different ways. Their experiences are shaped by various factors, such as race, colour, ethnic or social origin, genetic features, language, education, socio-economic status, religion or belief, political or any other opinion, membership of a national minority, property, birth, disability, age or sexual orientation, which together determine their opportunities and particular challenges.
9. The UN Sustainable Development Goal 3 underlines the importance of ensuring healthy life and promoting the well-being for all at all ages, including mental health.⁵

⁴ Council conclusions on mental health, 15971/23, paragraph 24,
<https://data.consilium.europa.eu/doc/document/ST-15971-2023-INIT/en/pdf>

⁵ UNITED NATIONS Department of Economic and Social Affairs: Sustainable Development Goal 3.
<https://sdgs.un.org/goals/goal>.

10. The Beijing Platform for Action, identifies “Women and Health” as one of twelve critical areas of concern. It states that women have the right to the enjoyment of the highest attainable standard of both physical and mental health, which is also in line with the UN Sustainable Development Goal 5.
11. According to the WHO European Framework for action on mental health for 2021-2025, mental health and well-being are endangered by a wide range of factors covering individual, social and environmental levels, involving poverty and deprivation; debt and unemployment; and violence and conflict. The lowest level of mental well-being is found among women aged 18-24 years (together with women aged 35-44 years).⁶
12. A Joint EU-OSHA and Eurofound report entitled ‘Psychosocial risks in Europe: prevalence and strategies for prevention’ asserts that, among workers, women are more inclined to suffer from poor mental well-being (22%) than men (17%).⁷
13. Mental health challenges affect all individuals; men are significantly affected, and also more likely to die by suicide. Almost 8 in 10 of suicides (77%) are among men⁸. Women also face particular mental health challenges and concerns, including conditions, diseases or disorders that are specific to women; appear more frequently in women; have different risk factors for women; or follow a different path in women than men.⁹

⁶ WORLD HEALTH ORGANIZATION: European framework for action on mental health 2021–2025. Copenhagen: WHO Regional Office for Europe, 2022.

<https://iris.who.int/bitstream/handle/10665/352549/9789289057813-eng.pdf?sequence=1>.

⁷ EUROFOUND and EU-OSHA: Psychosocial risks in Europe: Prevalence and strategies for prevention, Publications Office of the European Union, Luxembourg, 2014.

<https://osha.europa.eu/sites/default/files/Report%20co-branded%20EUROFOUND%20and%20EU-OSHA.pdf>

⁸ European Parliamentary Research Service: Mental health in the EU, European Parliament Briefing 2023, [https://www.europarl.europa.eu/RegData/etudes/BRIE/2023/751416/EPRS_BRI\(2023\)751416_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/BRIE/2023/751416/EPRS_BRI(2023)751416_EN.pdf)

⁹ WORLD HEALTH ORGANIZATION: Women’s Mental Health: An Evidence Based Review. Mental Health Determinants and Populations, Department of Mental Health and Substance Dependence, 2000. https://iris.who.int/bitstream/handle/10665/66539/WHO_MSD_MDP_00.1.pdf?sequence=1

14. Social circumstances have a powerful impact on women's lives and adverse circumstances such as overwork, violence (including domestic violence), harassment, psychological overload and economic dependence can result in depression, hopelessness, exhaustion, anger and fear. In order to enhance women's well-being from childhood through old age, prevention policies aimed at improving the social status of women are needed along with multidisciplinary support, and notably policies focusing on the whole spectrum of women's health and care needs, including improved social, long-term care, and mental health services.¹⁰
15. Victims of gender-based violence are particularly vulnerable. The EU Directive on combating violence against women and domestic violence¹¹ recognises that domestic violence and violence against women have detrimental consequences on the mental health of the victim. Furthermore, it recognises that children who witness domestic violence within the family or domestic unit run an increased risk of suffering from mental illness, both in the short and long term.
16. Analysis of self-assessed mental well-being across population groups demonstrates that women in Europe report lower levels of mental well-being regardless of family structure, age, income level, country of birth or disability. Social determinants of mental health are potentially at play. Family structure can also have an impact on mental health. Caregiving is a significant factor influencing the physical and mental health of those providing care, who encounter accumulated chronic stressors and often ignore their own health.¹²

¹⁰ UNITED NATIONS (Mary-Jo Del Vecchio Good): Women and mental health: <https://www.un.org/womenwatch/daw/csw/mental.htm>

¹¹ Directive (EU) 2024/1385 of the European Parliament and of the Council of 14 May 2024 on combating violence against women and domestic violence: <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32024L1385>

¹² EUROPEAN INSTITUTE FOR GENDER EQUALITY: Gender Equality Index 2021 - Health. https://eige.europa.eu/publications-resources/toolkits-guides/gender-equality-index-2021-report/women-report-poorer-mental-well-being-men?language_content_entity=en

17. The increased time spent on unpaid care responsibilities can cause acute work-life tensions for women and men.¹³ Women take on the bulk of unpaid care responsibilities at home while also providing most of the additional informal care outside the home, which causes significant strain.¹⁴ The Work-life balance Directive¹⁵ aims to tackle the unequal share of caring responsibilities between men and women by facilitating the reconciliation of work and family life for workers who are parents, or carers. Next to this, two Council Recommendations, on Early Childhood Education and Care: the Barcelona Targets for 2030¹⁶ and on Access to Affordable High Quality Long Term Care¹⁷ promote measures to enhance accessible, affordable and high-quality care for children and other dependants over the life course.

CONSIDERING THAT:

18. Women and girls face different challenges typically occurring in every life stage that can cause mental strain.

¹³ Ibid.

¹⁴ WHO: World mental health report: Transforming mental health for all, 2022, <https://www.who.int/publications/i/item/9789240049338>

¹⁵ Directive (EU) 2019/1158 of the European Parliament and of the Council of 20 June 2019 on work-life balance for parents and carers and repealing Council Directive 2010/18/EU, OJ L 188.

¹⁶ Council Recommendation of 8 December 2022 on early childhood education and care: the Barcelona targets for 2030 (2022/C 484/01)

¹⁷ Council Recommendation of 8 December 2022 on access to affordable high-quality long-term care, 2022/C 476/01.

19. As a result of the omnipresence and the increasingly dominant role of the internet (especially social media), children and young people, especially girls, are particularly exposed to dangers such as the harmful, body image-damaging effects of online content and the risk of cyberbullying and cyberviolence. Children and young people face a high risk of exposure to disinformation, manipulation and abuse, as well as gender-based violence. In addition, early exposure to pornography, including extreme and violent content, and the use of GenAI in the context of child sexual abuse and/or gender-based violence¹⁸, are also adversely affecting girls' mental health and increasing misogynistic behaviour. All these factors may significantly impair girls' health and their physical and mental development.¹⁹ According to the WHO, the negative health consequences of social media, particularly among adolescent girls, include loss of self-esteem, worrying, anxiety, difficulty in relaxing and sleeping, and deteriorating face-to-face communication skills²⁰.
20. According to the WHO, adolescent girls have poorer mental health and well-being across the board compared to boys. Furthermore, these gaps widen with age, with 15-year-old girls showing the worst outcomes.²¹ Almost twice as many 15-year-olds (13% for boys and 28% for girls) than 11-year-olds (8% for boys and 14% for girls) report feeling lonely. Furthermore, girls are more likely to be victims of degrading depiction and cyber harassment, which can have devastating psychological consequences.²²

¹⁸ NCMEC: Testimony "Addressing Real Harm Done by Deepfakes", March 2024.

¹⁹ REGULATION (EU) 2022/2065 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 19 October 2022 on a Single Market For Digital Services and amending Directive 2000/31/EC (Digital Services Act), OJ L 277, Preamble (64), (71), (81), (83), (104), Article 34. DIRECTIVE 2010/13/EU OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 10 March 2010 on the coordination of certain provisions laid down by law, regulation or administrative action in Member States concerning the provision of audiovisual media services (Audiovisual Media Services Directive), amended by Directive (EU) 2018/1808 of the European Parliament and of the Council of 14 November 2018, Article 6a and Article 28b. In addition to the Digital Services Act and the Audiovisual Media Services Directive, the Communication of the Commission on "A Digital Decade for children and youth: the new European strategy for a better internet for kids" calls for sharing best practices and available guidance.

²⁰ WORLD HEALTH ORGANIZATION: Women's health and well-being in Europe: beyond the mortality advantage, 2016: <https://iris.who.int/bitstream/handle/10665/332324/9789289051910-eng.pdf?sequence=1>

²¹ WORLD HEALTH ORGANIZATION: Mental health in Europe and Central Asia: girls fare worse than boys. WHO Europe, 2023: <https://www.who.int/europe/news/item/10-10-2023-mental-health-in-europe-and-central-asia--girls-fare-worse-than-boys>

²² WORLD HEALTH ORGANIZATION: Women's health and well-being in Europe: beyond the mortality advantage, 2016: <https://iris.who.int/bitstream/handle/10665/332324/9789289051910-eng.pdf?sequence=1>.

21. Social media contributes to reinforcing unhealthy beauty standards and places young women under a great deal of pressure when it comes to their physical characteristics.²³ Eating disorders (e.g. anorexia nervosa, bulimia, etc.) among adolescent girls are a significant public health concern.²⁴ Boys are also exposed to widespread objectification of women online, particularly through the problematic depiction of women in games. In 2015 almost half of boys aged 15-16 (49 %) in the EU-28 play collaborative online games every day or almost every day. Furthermore, unhealthy representation of ‘male’ attitudes and behaviours online is also a crucial challenge.²⁵
22. Single parents remain one of the most vulnerable groups when it comes to poverty, housing and health challenges, including mental health issues, which are decisive and affect women disproportionately.²⁶ Eurostat data shows that women make up almost 80% of the 7.8 million one-parent families in the EU.²⁷ Many single mothers face psychological stress resulting from a precarious financial situation, social exclusion or the accumulation of social roles.²⁸

²³ EUROPEAN INSTITUTE FOR GENDER EQUALITY: Gender equality and youth: opportunities and risks of digitalisation, Factsheet, 2019. https://eige.europa.eu/publications-resources/publications/gender-equality-and-youth-opportunities-and-risks-digitalisation-factsheet?language_content_entity=en

²⁴ WORLD HEALTH ORGANIZATION: Women’s health and well-being in Europe: beyond the mortality advantage, 2016:

<https://healthrights.mk/pdf/Publikacii/Zensko%20zdravje%20i%20rodova%20ednakvost/2016/Womens-health-well-being-Europe-beyond-mortality-advantage.pdf>.

²⁵ EIGE: Gender equality and youth: opportunities and risks of digitalisation, 2019. https://eige.europa.eu/publications-resources/publications/gender-equality-and-youth-opportunities-and-risks-digitalisation?language_content_entity=en

²⁶ EIGE: Poverty, gender and lone parents in the EU, 2016, <https://eige.europa.eu/sites/default/files/documents/mh0216841enn.pdf>

EIGE’s calculations based on EU-SILC 2022 microdata. This number includes one-parent families with dependent children aged below 24 who are declared to be own/adopted children or stepchildren and are not in employment or unemployment.

²⁸ WORLD HEALTH ORGANIZATION: Women’s health and well-being in Europe: beyond the mortality advantage, 2016:

<https://healthrights.mk/pdf/Publikacii/Zensko%20zdravje%20i%20rodova%20ednakvost/2016/Womens-health-well-being-Europe-beyond-mortality-advantage.pdf>.

23. The vulnerability and mental strain experienced by women during and after pregnancy, including post-natal depression, can have a severely detrimental impact on their lives and can affect the lives of their family members as well. Research shows that the social network or support system available to the mother is important in determining her mental health and general health, as well as the quality of the care she is able to provide to her infant.²⁹ There is also consistent evidence that fathers' access to flexible leave in the postpartum period improves maternal health and lowers the risk of post-partum depression.³⁰
24. Challenges such as unequal access to employment and/or to equal pay, the unequal sharing of domestic and family care responsibilities, economic pressures and dependencies can also place mental strain on women. The prevalence of mental health problems among carers, most of whom are women, is 20% higher than among non-carers.³¹
25. The mental health of victims of violence against women and domestic violence is an issue requiring particular attention, as violence has serious long-term psychological effects.³² Gender-based violence takes many forms, including domestic violence, intimate partner violence, sexual violence, cyberviolence, forced marriage, and human trafficking. In the EU, physical and sexual violence by a current or former partner or spouse is among the most common forms of gender-based violence. More than one in five women (22 %) has suffered from it.³³ As highlighted by the recent Fundamental Rights Survey published by the European Agency for Fundamental Rights (FRA), incidents of a sexual nature, in particular, have a serious long-term psychological impact on victims, including feeling anxious, defenceless, ashamed, embarrassed or depressed.³⁴

²⁹ WORLD HEALTH ORGANIZATION: Thinking Healthy: A manual for psychosocial management of perinatal depression, 2015:

https://iris.who.int/bitstream/handle/10665/152936/WHO_MSD_MER_15.1_eng.pdf?sequence=1.

³⁰ Petra Persson - Maya Rossin-Slater: When Dad Can Stay Home: Fathers' Workplace Flexibility and Maternal Health, NBER Working Paper No. 25902, May 2019, <https://www.nber.org/papers/w25902>.

³¹ Social Protection Committee and the European Commission: Adequate social protection for long-term care needs in an ageing society, 2014, <https://op.europa.eu/en/publication-detail/-/publication/71532344-ddf1-4d34-a7aa-f65c701a22a2>

³² FUNDAMENTAL RIGHTS AGENCY: Fundamental rights survey 2021, <https://fra.europa.eu/en/data-and-maps/2021/frs>.

³³ EUROPEAN INSTITUTE FOR GENDER EQUALITY: Gender Equality Index 2021: Health, https://eige.europa.eu/publications-resources/toolkits-guides/gender-equality-index-2021-report/gender-based-violence?language_content_entity=en

³⁴ FUNDAMENTAL RIGHTS AGENCY: Fundamental rights survey 2021, <https://fra.europa.eu/en/data-and-maps/2021/frs>.

26. According to the Commission Communication entitled “Demographic change in Europe: a toolbox for action,” Europe “needs to build a ‘longevity society’ “that values the longer lifetime spent in old-age, empowers older citizens, and nurtures the welfare and well-being of present and future generations alike”.³⁵ In this context, the mental health of elderly people, especially women, merits particular attention. Mental health disorders, including depression, anxiety, and cognitive deterioration are prevalent among the elderly population.³⁶ Social isolation and loneliness, which affect about a quarter of older people, are key risk elements for mental health conditions in later life. So too is the abuse of elderly people, which includes any kind of physical, verbal, psychological, sexual or financial abuse, as well as neglect.³⁷
27. This set of conclusions builds on previous work and political commitments voiced by the Council, the Commission and the European Parliament and relevant stakeholders in this area, including the documents listed in the Annex.

INVITES THE MEMBER STATES, IN ACCORDANCE WITH THEIR COMPETENCES AND TAKING INTO ACCOUNT NATIONAL CIRCUMSTANCES, TO:

28. TAKE appropriate measures, including preventive measures, in compliance with the Directive on combating violence against women and domestic violence, to protect women and girls, especially those in vulnerable situations, from all forms of gender-based violence, including cyber-violence, and from harmful online content, including AI-generated content, causing body dysmorphia and poor mental health. Such measures can include ensuring effective reporting processes for citizens. PROMOTE support services providing specialist support tailored to the specific needs of the victim. In addition, FOSTER transparency and enhance disaggregated data collection to support the monitoring of harmful online content.

³⁵ EUROPEAN COMMISSION: Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions: Demographic change in Europe: a toolbox for action, COM/2023/577 final, 2023.

³⁶ European Parliamentary Research Service: Mental Health in the EU, European Parliament Briefing, 2023, [https://www.europarl.europa.eu/RegData/etudes/BRIE/2023/751416/EPRS_BRI\(2023\)751416_EN.pdf](https://www.europarl.europa.eu/RegData/etudes/BRIE/2023/751416/EPRS_BRI(2023)751416_EN.pdf).

³⁷ WORLD HEALTH ORGANIZATION: Mental health of older adults, 2023, <https://www.who.int/news-room/fact-sheets/detail/mental-health-of-older-adults>.

29. TAKE MEASURES, pursuant to the Audiovisual Media Service Directive, to protect minors from content available online that may impair their physical, mental or moral development.
30. PROMOTE positive female role models in the media and combat harmful gender stereotypes, taking into account the need to protect the mental health of women and girls, especially in their teenage years, and giving special attention to possible effects related to their body image.
31. ENSURE adequate social protection for women, especially single mothers, and mothers raising children living with disabilities, including through affordable childcare, child and housing allowances in order to reduce financial distress and its repercussions for mental health. Furthermore, ENSURE adequate work-life balance, especially for single mothers, through measures promoting flexible working and teleworking arrangements, as well as care leaves in order to ease the mental strain that they face.
32. PROVIDE access to social and psychological support services for women, in particular single mothers, especially those in vulnerable situations, in order to prevent and tackle burn-out and other adversities linked to multiple burdens.
33. TAKE MEASURES to improve the psychological care of mothers in need in the perinatal and postnatal periods and promote the building of local support networks in order to mitigate women's mental health challenges linked to pregnancy, birth and motherhood. FACILITATE appropriate training for nurses and social workers in this regard.
34. FOSTER measures that ensure mother and baby-friendly circumstances in obstetric care, paying special attention to informing the patient and the physical and emotional integrity and needs of women before, during, and after childbirth with regard to medical procedures, conditions of labour as well as the presence of the partner and/or accompanying person.
35. STRENGTHEN support services for victims of violence against women, domestic violence and human trafficking that are tailored to their personal needs.

36. **SUPPORT** prevention, health promotion and awareness-raising strategies for healthy and active ageing, including measures to protect the mental health of the elderly, especially elderly women, such as measures aiming to reduce their financial insecurity, and measures to ensure safe and accessible housing, and access to affordable high-quality long-term care, as well as social support for them, and their carers, in order to reduce social isolation and loneliness.

INVITES THE EUROPEAN COMMISSION AND THE MEMBER STATES, in accordance with their respective competences, to:

37. **ENSURE** Member States' timely and correct transposition and implementation of EU legislation on combating violence against women and domestic violence, on equal opportunities and equal treatment of women and men in matters of employment and occupation, on work-life balance for parents and carers, as well as on pay transparency.

38. **RAISE AWARENESS** among young people as well as among their parents about respectful and responsible online communication and content sharing, including through support for specific campaigns aimed at children, with a view to improving protection online and on social media. **RAISE AWARENESS** about the psychological and cognitive consequences of excessive smartphone screen time on minors, including the very young. **CONTINUES** work on the development of the prevention toolkit addressing the determinants of physical and mental health mentioned in the Communication on a comprehensive approach to mental health.

39. **TAKE MEASURES** under the Digital Services Act to provide minors, especially girls, with a high level of safety, security and privacy when using online platforms.

INVITES THE EUROPEAN COMMISSION, IN ACCORDANCE WITH ITS COMPETENCES, TO:

40. **CONTINUE TO FOSTER** actions for tackling cyber violence in the relevant areas identified in the Gender Equality Strategy and the European Strategy for a Better Internet for Kids and in the implementation of the Digital Services Act, including actions to prevent and combat the bullying of girls.

41. CONTINUE to monitor the correct transposition and application of the relevant requirements under the Audiovisual Media Services Directive, so as to ensure the protection of minors from harmful content available online.
42. RAISE AWARENESS of the importance of psychological support for women, especially single mothers in vulnerable situations.
43. RAISE AWARENESS about pay transparency rights and support raising awareness on collective action in matters of pay discrimination, as well as about the new rights of working parents and carers under the Work-Life Balance Directive.
44. PROMOTE initiatives aimed at supporting the mental health of women, particularly in the perinatal and postnatal periods.
45. EMPHASIZE the importance of providing victims of violence against women and domestic violence and victims of human trafficking with the necessary psychological support when developing initiatives to combat violence against women and human trafficking.
46. CONSIDER targeted initiatives focused on elderly women aiming to protect and improve their mental health.

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https://health.ec.europa.eu/system/files/2021-10/028_mental-health_workforce_en_0.pdf

[Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions: Demographic change in Europe: a toolbox for action, COM/2023/577 final.](#)

[16. Communication from the Commission to the European Parliament, the Council, the European Economic and Social Committee and the Committee of the Regions on a comprehensive approach to mental health, COM\(2023\) 298 final.](#)

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