



OHCHR Call for inputs on the impact of mental health challenges on the enjoyment of human rights by young people

Make Mothers Matter (MMM) welcomes the opportunity to contribute to this Call for Inputs. This submission focuses on the mental health challenges faced by young mothers and their impact on human rights. It draws on the State of Motherhood in Europe survey, that we conducted at the end of 2024 in collaboration with Kantar across 12 European countries.¹ The survey examines the evolving experiences and challenges of motherhood across Europe, based on responses from 9,600 mothers in 11 EU countries—Belgium, Czechia, France, Germany, Ireland, Italy, Poland, Portugal, Slovakia, Spain, and Sweden—as well as the United Kingdom.

The situation of young mothers in Europe

For the purpose of this submission, we compared the responses of young mothers with those of the overall sample of interviewed mothers. The age range was divided into two subgroups: 18–24 and 25–29.²

The data show that early motherhood is associated with a convergence of psychological distress, economic dependency, reduced stability, and limited access to supportive structures. Young mothers represent a group facing structurally heightened vulnerability compared to the general population of mothers. Rather than experiencing isolated challenges, young mothers face interconnected disadvantages that accumulate across mental health, employment, family dynamics, and institutional support systems.

This life stage combines the pressures of caregiving with unfinished educational pathways, unstable labour market integration, weaker economic autonomy, and limited policy responsiveness.

As a result, young mothers are not only more exposed to individual risks, but also to systemic barriers that restrict their opportunities for wellbeing, autonomy, and long-term social mobility.

Mental health challenges faced by young mothers

According to the World Health Organization (WHO), up to one in five mothers in the UNECE region experience a significant mental health condition after giving birth, although no age-disaggregated

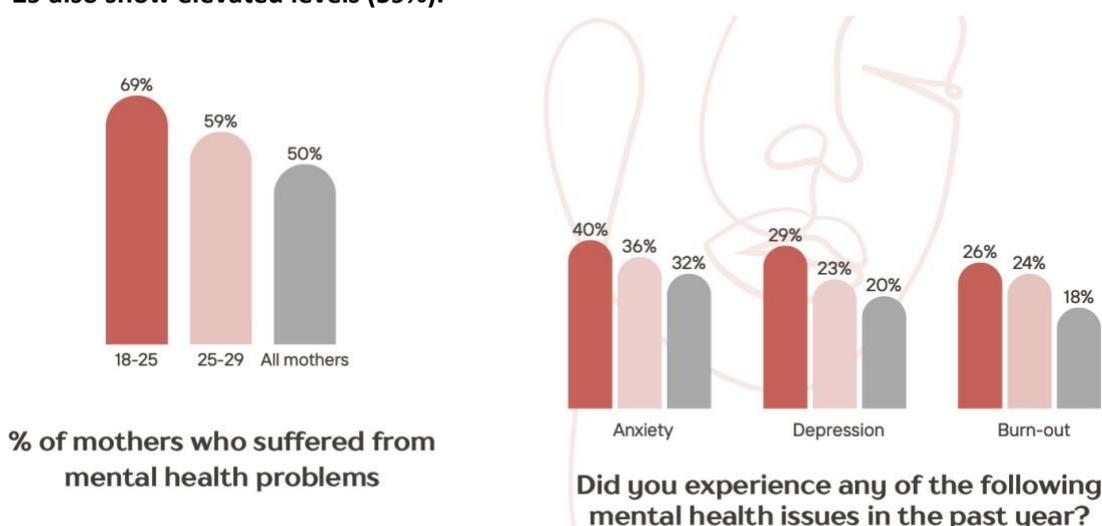
¹ See <https://makemothersmatter.org/mmm-state-of-motherhood-in-europe-2024/>

² https://makemothersmatter.org/wp-content/uploads/2026/02/Young-mothers-focus_MMM-State-of-Motherhood-in-Europe-2024.pdf

data appear to be available.³ Maternal mental health issues are even more prevalent in developing countries. For example, some studies in South Africa report that 21–50% of women experience depression during or after pregnancy.

However, these figures are likely to be underestimated, as screening remains rare, symptoms are often normalised, and access to mental health services is limited.

Half of all mothers surveyed by MMM report having experienced mental health problems. Young mothers—particularly those aged 18–24—report significantly higher levels of mental health difficulties across all indicators. Almost seven in ten mothers aged 18–24 (69%) report having experienced mental health problems, compared with 50% of all mothers surveyed. Mothers aged 25–29 also show elevated levels (59%).



Human rights impacts of maternal mental health problems

The human rights impacts of undiagnosed or untreated maternal mental health problems are multiple, affecting not only mothers themselves but also their children and families.

Impacts on mothers:

- Maternal mental health problems can cause intense, debilitating, isolating, and often frightening suffering for women. These are avoidable forms of suffering, which in turn affect women's ability to exercise their right to work or study.
- Maternal mental health problems can have long-term impacts on a woman's self-esteem and on her relationships with partners and family members.
- In severe cases, maternal mental health problems can be life-threatening. In many developed countries, suicide is one of the leading causes of maternal death in the first postnatal year.

Impacts on children and families:

³ See <https://wearesolomon.com/mag/format/investigation/a-silent-postpartum-crisis-how-europe-is-failing-mothers>

- Maternal mental health problems can adversely affect bonding and interaction between a mother and her baby, with consequences for the child's emotional, social, and cognitive development.
- Research also shows that children of parents with mental health problems are twice as likely to experience social and emotional development difficulties compared with children of parents without such challenges.⁴

Main barriers to the right to mental health for young mothers

Motherhood remains an underexplored and insufficiently addressed issue in both policymaking and societal discourse. **The invisibility** of the challenges mothers face, combined with the lack of comprehensive and disaggregated data, exacerbates the difficulty of designing effective policies that respond to their specific needs and realities. This gap was one of the key reasons MMM conducted the State of Motherhood in Europe survey.

Key factors contributing to exacerbated mental health problems among young mothers include:⁵

- Social isolation and stigma: Young mothers often face judgement, shame, and a loss of support from peers and family, leading to loneliness and isolation—particularly when they have children outside marriage.
- Developmental conflict: Very young mothers are navigating the transition from childhood to adulthood at the same time as the demands of motherhood, creating intense and often unresolved internal conflict.
- Socioeconomic factors: Many young mothers experience financial stress, poverty, and restricted career or educational opportunities, particularly in rural areas.
- Lack of practical and emotional support: Adequate support is critical for coping with the demands of caring for a new baby, yet is often insufficient or unavailable.

Recommendations for the realisation of young mothers' human right to mental health

The results of the State of Motherhood in Europe survey call for a paradigm shift in policy design—from fragmented, age-neutral approaches to integrated, life-course-based strategies that recognise early motherhood as a structurally distinct social reality. Support for young mothers must move beyond individualised interventions towards coherent policy ecosystems that combine mental health care, economic empowerment, access to childcare, education pathways, housing stability, support networks, and rights-based social protection.

⁴ See <https://www.sciencedirect.com/science/article/pii/S2666560323000129>

⁵ See for example: https://maternalmentalhealthalliance.org/media/filer_public/2b/c1/2bc1d7f4-b64e-40bc-96e3-ccf773c33ad0/final_the_maternal_mental_health_experiences_of_young_mums.pdf

Investing in young mothers is not only a matter of fulfilling their human rights; it is also an issue of intergenerational justice. Supporting young mothers means supporting children’s wellbeing, social mobility, and long-term societal cohesion. Without targeted policy action, the risks identified in our survey will continue to reproduce cycles of inequality across generations.

Research by the London School of Economics and Political Science (LSE) also shows that such investment is cost-effective. It estimates that untreated maternal mental illness costs the UK £8.1 billion per year, with 72% of this impact borne by the child—**five times more than the cost of improving maternal mental health services.**⁶

Recommendations for governments:

- Ensure accessible, integrated, and affordable services: Psychological support for common mental health difficulties during pregnancy and after birth must be integrated into universal health services, particularly maternal health services, home visiting, and general practice. Maternal mental health should become an essential component of maternal care.
- Introduce clinical guidelines and mandatory perinatal mental health training for medical professionals.
- Allocate funding for prevention, community outreach, and monitoring.
- Address social determinants of mental health such as poverty, violence, and inequality, with a particular focus on young mothers.
- Promote workplaces that recognise care as essential and motherhood as a valuable skill-building experience, and encourage employers to develop policies that support unpaid caregivers, particularly mothers.
- Break stigma by amplifying the voices of mothers and challenging systems that normalise overload and silence.

Examples of best practices

At **the local government level**, an example of good practice is Bogotá’s Manzanas del Cuidado ("Care Blocks"), a system of neighbourhood-based hubs that co-locate public services around the needs of caregivers and their dependants. Care Blocks bring services together within a 15–20-minute walk, including childcare and eldercare, adult education, legal assistance, mental health support, and job training. While children play or attend tutoring sessions, caregivers can complete secondary education, see a therapist, or access legal support.⁷

⁶ See <https://eprints.lse.ac.uk/59885/>

⁷ <https://www.rotman.utoronto.ca/faculty-and-research/research-centres/gender-economy/teaching--learning/case-studies/2026/bogotas-care-blocks/>

Supporting young mothers does not need to be costly. One effective way to address some of the mental health challenges mothers face is to reduce the isolation many experience during pregnancy and after childbirth, particularly at a young age.

Examples of good practices at the local level include:

- Denmark: Municipal governments facilitate mother groups (mødregupper), a built-in peer support system for new mothers. These groups connect four to six local mothers whose babies are born around the same time, creating a supportive community for sharing experiences, reducing isolation, and promoting maternal wellbeing. Groups meet regularly for mutual support, advice, and community-building, and have been shown to reduce the risk of postpartum depression and improve breastfeeding outcomes.
- United Kingdom: The British Association of Social Workers established The Young Mums' Group to support young mothers' access to mental health services and practical assistance. The programme provides peer support, weekly one-to-one sessions with facilitators, and access to extended professional services.⁸
- Community level: Mothers' Centres (or Family Centres) can play an effective role in reducing isolation and fostering community and intergenerational support. Often operated by volunteers, these centres provide safe community spaces where mothers can connect, share support, and access services such as childcare, counselling, and education. They offer peer support and social connection that enhance the wellbeing of mothers and their families.⁹

The private sector also has an important role to play. Providing flexibility and targeted support to young mothers can make a substantial difference. For example, companies such as Danone Italy have taken steps to recognise the skills mothers develop through caregiving.¹⁰

Conclusion

The mental health challenges faced by mothers remain largely invisible and insufficiently addressed, despite their significant impacts on human rights and their high social and economic costs. These challenges are exacerbated for young mothers, particularly those who have not yet fully transitioned to adulthood and those who are lone mothers.

⁸ <https://basw.co.uk/policy-and-practice/resources/young-mums-together-promoting-young-mothers-wellbeing>

⁹ See MINE – Mother Centers International Network for Empowerment: <https://minemothercenters.org/>, a network of Mothers centres in more than 20 countries

¹⁰ See for example <https://lifeed.io/en/danone-case-study-parenthood-caregiving/> or MMM side-event to the 64th Commission on Social Development titled *Unlocking the Power of Care: Skills, Equity, and Social Transformation*: <https://makemothersmatter.org/motherhood-develop-skills-like-any-work-experience-does/>