

IMPACT REPORT: 2021 FORUM ON WOMEN AND GIRLS

Mental Health, Trauma,
the Pandemic, & Moving Forward

Presented by the Women's Endowment Fund of Akron Community Foundation



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On September 23, 2021, more than 50 women representing various industries within Northeast Ohio came together virtually for the Women's Endowment Fund's Forum on Women and Girls: Mental Health, Trauma, the Pandemic & Moving Forward to discuss mental health challenges facing women and girls in the context of the

COVID-19 pandemic and a focus on moving forward. The forum participants discussed how the effects of varying forms of economic, social and emotional marginalization can be alleviated generally, and with the resources available in Northeast Ohio. While the mental health challenges faced by women and girls can be attributed to long-term marginalization, the COVID-19 pandemic amplified the necessity and urgency for these challenges to be addressed.

Recent studies have shown that the majority of people feel that their lives have changed because of the pandemic, with more women reporting that their lives have changed in a major way (Pew Research Center, 2020). The social distancing policies, lockdowns, economic shutdowns, and occupying a large portion of the essential workforce have transformed how women navigate their day-to-day lives regarding work and family. Between the onset of the pandemic in March 2020 and December 2021, over 1.5 million Ohioans have contracted COVID-19, and over 29,000 have died from it (Ohio Department of Health, 2021).

During this time of fear and uncertainty, jobs that were typically occupied by women were either deemed essential, or lost due to layoffs, forced exits, and terminations (Yavorsky, Qian and Sargent, 2021). Some suggest that gender itself could be considered a risk factor for COVID-19, in the sense that the industries most affected by economic shutdown employ more women than men (Alon et al, 2020; McClain and Cahn, 2020, Pew Research Center, 2020). Women have been forced to work the frontlines, exposing their families to a deadly virus, figure out how to juggle working from home and assisting their children with distance learning, or forced to leave the workforce entirely, often due to the lack of support they had surrounding childcare (Petts, Carlson, and Pepin, 2021; Yavorsky, Qian and Sargent, 2021).

The Forum sought out to address three sets of questions regarding implications of long-term marginalization, how to help women and girls struggling in institutional settings, and what women can do to address their own mental health. The forum began with a panel discussion of these questions moderated by Lisa Hairston, M.A., M.ED featuring Sondra Palivoda, Manager of Research for Team NEO, Lisa McCraney, M. Ed, LPCC-S , and Gizelle Jones, MSW. Following the panel discussion, each question was addressed during a breakout round. The breakout rounds consisted of Lisa Hairston M.A., M. ED, Dr. Angela Neal-Barnett, and Dr. Lisa Sims addressing one of the three sets of questions with their own expertise and knowledge.

These breakout presentations were followed by the women of the audience organizing into groups to discuss their experience as related to the questions and potential solutions.

The following report summarizes these important discussions and the themes that emerged during the Forum while placing them in the context of the current research surrounding the marginalization of women, employment, mental health, and the COVID-19 pandemic.

Implications of Long-term Marginalization

The first breakout session centered around the implications of the long-term marginalization of women in economic, social and emotional contexts. One significant implication touched upon by all groups was how the difficulties women face as working mothers ultimately impacts their social and emotional wellbeing. The work of “juggling multiple hats” has always been a struggle unique to women in the workforce (Bielby and Bielby, 1989; Wharton, 1994; Zorotovich, Dove, and Myers, 2021) and this juggling act has increased in intensity as a result of the COVID-19 pandemic.

In 2020, the number of women who left the labor force was four times the number of men who left (U.S. Bureau of Labor Statistics, 2020). This increased struggle has potentially set women back in regard to economic equality, as women have no choice but to leave the workforce or reduce their working hours to take on childcare responsibility. A report by Team NEO and Moody Analytics (2020) reveals that women were twice as likely as men to reduce their working hours among couples that live together during the pandemic. The reduction in working hours is due to having to accommodate children in the household, as well as women disproportionately occupying industries that were shut down during the pandemic.

The consensus among forum participants is that traditional management has not responded well to working mothers. Forum attendees largely agreed that better emotional intelligence from managers is needed in order to provide a supportive workplace, and part of that involves acknowledging that women have different experiences as mothers in the workplace. While the shift to telework has alleviated some of the worry about how to work without childcare, many women report that they are still taking on more childcare responsibilities in comparison to their partners while trying to work from home (Profeta, 2020). Overall, the landscape of the workplace needs to change to reflect and accommodate the needs of the women involved.

Another important implication discussed extensively during this session was the need to bridge the disconnect between mental health professionals and the communities they serve. Women are often too proud or even too exhausted to try to seek help in managing their emotional wellbeing. The women of the forum agreed there is a stigma attached to mental health, and by teaching the younger generations that it is not a taboo subject, perhaps this stigma will disappear over time.

How Can We Help?

The COVID-19 Pandemic has reinforced and exacerbated the tensions women experience between the workplace and the home. These tensions have the ability to manifest as stress, concern, anxiety and depression. After the first session addressed the negative consequences of these tensions and their manifestations, the second breakout session continued the conversation surrounding the stigma of mental health. The women of the forum were asked to think about how we can identify women and girls who are struggling and how we go about assisting them in accessing help. Research suggests that many people experienced a decline in mental health at the start of the pandemic in comparison to pre-pandemic (Sisson et al, 2020). Women and girls are particularly susceptible to mental health struggles (Roxburgh, 1997; Yerkes et al, 2020; Smail et al, 2020). Almeida et al (2020) found that many different contributors to women's mental health such as pregnancy, postpartum, partner violence, and parenting increase a women's likelihood of depression and anxiety, particularly in the context of the pandemic. The women of the forum agreed that access to mental healthcare needs to be streamlined and destigmatized.

An important point that emerged from this discussion is that fostering trusting and nonjudgmental relationships is key in allowing women and girls to feel safe admitting they are struggling with their mental health. This is especially true of the relationships between girls and educators or mentors; it was agreed that women can lead by example. People in leadership roles or authority figures can assist in destigmatizing mental health by openly discussing their own mental health issues. This in itself can help foster trusting and nonjudgmental relationships between women and girls and normalize mental health.

Another significant theme that emerged was the need for mental health professionals in other institutional settings, particularly embedding counselors in schools and workplaces. The goal stemming from embedding mental health professional would be to normalize mental healthcare, give mental health professionals the ability to identify those struggling in atypical ways, and learn to recognize culturally embedded symptoms of mental health struggle. By normalizing mental healthcare and making mental professionals a part of normal institutional culture, safe spaces can be created for women and girls who are dealing with mental health struggles and need assistance.

What Signs Can We Look for and How Do We Ask for Help?

The final breakout session aimed to address the following questions: What signs can we look for within ourselves and in others to identify mental health concerns? What is the best way to approach recommending or asking for help? During this session, one theme that emerged was being vulnerable or transparent in expressing what we are feeling. By being vulnerable and transparent, one can reflect on and communicate their own struggles, while simultaneously creating an avenue by which others feel comfortable communicating their struggles. From this

theme emerged the idea of creating safe spaces and sense of community among women and girls surrounding mental healthcare. Forum participants discussed being proactive in reaching out to friends or family when mental health struggles surface and having purposeful socialization in order to avoid accidental isolation.

The women of the Forum also reaffirmed the need for normalizing and destigmatizing mental healthcare and agreed that regular mental health check-ins with a professional should be a part of yearly wellness checks. This sentiment is also reflected in current research that has found that the integration of physical and mental healthcare is effective for improving mental health in communities. Chen and others (2018) found that local health departments can play a critical role in prevention of acute mental distress hospitalizations by providing preventative care that is accessible to the general public. Perhaps by embedding mental health professionals in institutions, mental healthcare will not just be more accessible, but become a normal aspect of the healthcare industry over time.

Importantly, it was acknowledged that for minority communities, lack of health insurance and general cost of mental health services are currently barriers to accessing a mental health professional. Research has shown that stigma, cost, lack of transportation and lack of childcare are all barriers to accessing mental health care, particularly for African American communities (Kawaii-Bogue et al, 2017). Reducing stigma and cost burden are two essential pieces in the puzzle that is adequate mental healthcare delivery.

Conclusion

The discussions that occurred during the 2021 Women's Endowment Forum were important in addressing the unique challenges women and girls face in their daily lives. Women and girls in Northeast Ohio, and in general, are subject to marginalization in economic, social, and emotional arenas. As such, their mental health unfortunately has greater potential to be impacted negatively; the COVID-19 pandemic has only increased this potential.

From the forum emerged significant themes that point to how the effects of long-term economic, social and emotional marginalization can be managed and prevented at the individual and institutional level. At the institutional level, the landscape of the workplace needs to change to reflect and accommodate the needs of women, mental health professionals need to be embedded within the workplace, government, and schools, and mental health care needs to be normalized and made more economically accessible. As individuals, women can be models for girls struggling with mental health by being vulnerable and discussing their own struggles, checking in yearly with a mental health professional, and working to foster supportive and nonjudgmental relationships with family, friends, and members of the community. In doing so, the conversation surrounding mental health and mental healthcare can transform from a subject of taboo, to a normal aspect of health and well-being for women and girls.

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