

**Women's Mental Health Roundtable**  
**Washington, DC**  
**December 11, 2007**

Hosted by: American Psychiatric Association  
American Psychiatric Foundation

## **Overview**

The goal of this roundtable was to bring together leaders of national organizations concerned with the health, mental health, and well-being of women to create and advance an agenda to improve women's mental health through strategic and collaborative action. Traditional alliances of mental health organizations need to be expanded to include groups representing all organizations with a vested interest in women's health and welfare and who will bring unique viewpoints and resources to the table.

In any given year 20 percent of the adult U.S. population have a mental disorder. Mental disorders are the leading cause of disability in the U.S. for people age 15-44. Overall rates of psychiatric disorder are almost identical for men and women but striking gender differences are found in the patterns of mental illness. Mental disorders such as depressive disorders, eating disorders, post traumatic stress disorder (PTSD), and anxiety/panic disorders affect women significantly more than men.

In addition there are numerous particular areas of concern for racially, ethnically, and linguistically diverse women, and special populations of women such as teen girls, caregivers, elderly women, rural women, women with co-existing medical conditions, and others.

## **Summary of Breakout Session Recommendations**

Each breakout group was charged with developing a short list of recommendations for improving women's mental health in one of the four areas listed below.

- **Advocacy**
- **Service**
- **Education**
- **Research**

### **Breakout #1 Advocacy**

Overall focus should be on **Equal Access to Quality Services**

Definition is broad and includes: prevention, treatment, coverage (parity), research, education, access, environmental issues, and integration. Equal access refers to racial membership, ethnicity, language, developmental stage, education, gender, and geographic considerations.

Action Plan:

1. Women's mental health listserv/clearinghouse  
Goals: access resources needed, identify outstanding issues

2. Outreach to caregivers in positions of influence as primary stakeholders  
Goal: leverage roles as caregivers
3. Influence Presidential debate on women's mental health via:
  - media
  - Whole Health Campaign
  - Partnership to End Chronic Disease
 Goal: move from debate to platform
4. Need another meeting

## Breakout #2: Services

1. Improve access to quality care specific to women
  - medical home concept
  - mental health in primary care settings and vice versa
  - wrap around services co-located
  - centers of women's health
  - peer coaches
2. Increase knowledge and skills related to women's issues
  - decision-making tools (available through web, community organizations, women's magazines, professional caregivers, etc.)
  - multidisciplinary training
  - empowerment of women
3. More focus on prevention
  - suicide – girls talking to girls
  - trauma informed care (through schools, Internet, media, community support)

## Breakout # 3 – Public Education

Empowering the Consumer; target audience – girls and women

1. Priority: Nothing is new (*e.g. grandparents raising grandchildren*)  
 Recommendation: Public awareness campaign – “It's About Time”  
 (*e.g. warning signs information, “take time to take time”, imaging—community spokesperson*)
2. Priority: Signs/Sense of Self/Self-Awareness of Depression  
 Recommendation: Target the primary and secondary audience  
 (*e.g., conduct focus groups, identify vehicles for public information, branding/symbols/logos, where to go for help, outreach to primary care doctors*)
3. Priority: Symbol of mental health (not mental illness)  
 Recommendation: Unified symbol of all women: *Lifting Our Spirit, Promoting Our Health: Body, Mind, Spirit*
4. Priority: Positive mental health  
 Recommendation: Take care of yourself -- high impact messaging

## **Breakout # 4 – Research/Training**

### Key priorities/problems Identified

1. Translational Research
  - Efficacy → Effectiveness
2. Gender defined (Minority Population)
  - Ethnopsychopharm (hormonal influence)
3. Cultural influence
  - Health beliefs, values, preferences
4. Risk and prevention
  - Early intervention

### Recommendations

1. Prioritize the research agenda on women's mental health into these categories:
  - Translational Research
  - Gender Defined
  - Cultural Influence
  - Risk and Prevention
2. Contextualize women's mental health research
3. Conversations on managing mental health
  - Protective factors research
  - What keeps individuals well/healthy?
  - Highlight good health more