

THE STATE OF PLAY

Each month, we examine how the mental health conversation in the media is evolving, with a focus on youth, women, and the justice system. Last month, we concluded our three-part series on trauma by looking at the intersection of trauma and the justice system. This month, we investigate two interrelated topics that impact each of these groups and have percolated frequently in the media since the onset of the COVID-19 pandemic: mindfulness and resiliency.

The diagram below illustrates the conversation around mindfulness, resiliency, and COVID-19. It assesses a 3634 news articles from April to November 2020. Takeaways include:

The many forms of mindfulness

Throughout the pandemic, mental health experts have argued that practicing mindfulness can build **psychological resilience**. In theory, that sounds simple. But in practice, it can mean many things, such as: calmly and consciously accepting one's thoughts and feelings; strengthening cognitive and emotional capacity; engaging in meditation – an increasingly **evidence-based** intervention – **mindful eating** and “**intermittent silence**.”

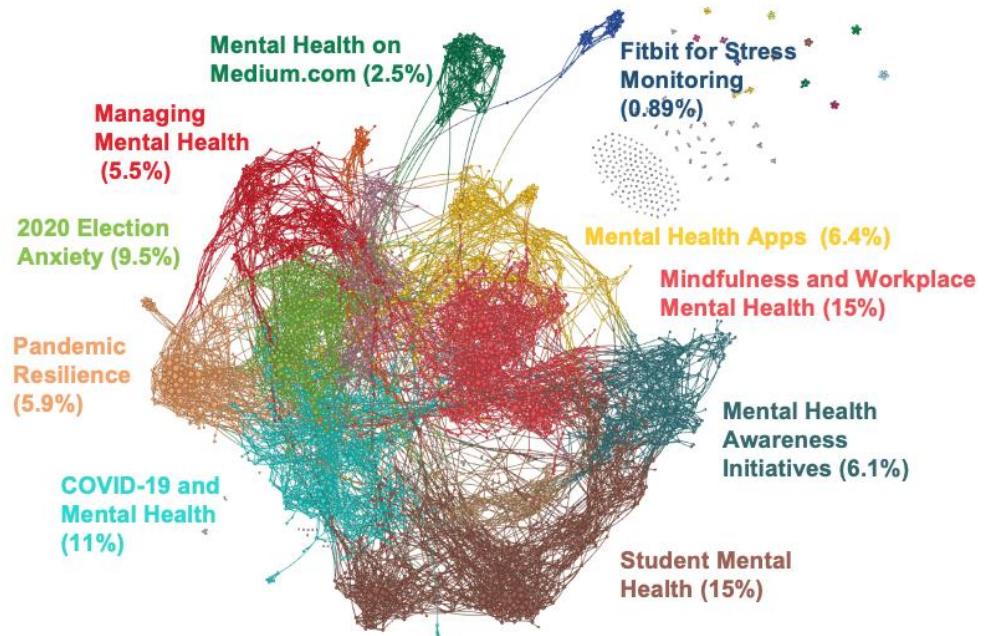
Putting mindfulness to work

There is a “business case” to mindfulness. The *Harvard Business Review* describes **collective mindfulness** as a way for teams to intentionally observe and accept group dynamics and work situations as they arise; *HBR* also underscores self-compassion and mindfulness as key elements of **strong leadership**.

From 2019-2020, there was an 84% increase in headlines related to mindfulness, resilience and mental health.

Mindfulness, Resiliency, and COVID-19

April to November 2020



When it comes to resilience, teach them young

Resilience is becoming part of the school curriculum through **Social-Emotional Learning (SEL)**. As educators and school administrators consider how COVID-19 and virtual learning threaten the early development SEL skills, they are instituting curriculum components to teach the skills that children once learned organically by interacting with peers at recess and lunchtime.

THOUGHT STARTERS

A roundup of thought-provoking pieces on mental health for youth, women, and the justice system.



Youth Mental Health: The Urgent Needs of Rural Communities

The U.S. Department of Health and Human Services' recent [Rural Action Plan](#) makes a case for increasing funding for telehealth services in rural areas. The need is urgent. A [new study](#) examines the availability of suicide prevention services in rural counties in the United States and finds that suicide among rural youth are increasing 1.5 times faster than in urban areas. HHS aims to help solve this problem:

"A lack of behavioral health providers is particularly pronounced in rural areas...In FY 2020, HRSA is leveraging approximately \$30 million...to expand the use of telehealth to meet the needs of rural and medically underserved areas with a particular focus on tele-emergency and tele-behavioral health services."



Women's Mental Health: The Patriarchy of Psychology

The crisis of [femicide in Mexico](#) gained attention earlier this year, as rising cases sparked outrage and protests outside the Palacio Nacional in Mexico City. [SORECE](#), a coalition of Mexican psychologists, is responding to the daily threat of trauma and violence faced by women by practicing a type of therapy rooted in feminism. A recent profile shows how their work can be an effective approach to healing:

"Feminist psychotherapy questions the theories, methods, and practice of traditional psychology, which is seen as androcentric, and considers the social and contextual issues – sheltered by a patriarchal system – that contribute to women's discomfort."



The Justice System: Client Service

[Capitol Weekly](#), a California publication that covers government and politics, released a [two-part analysis](#) of California's mental health courts. In 1998, Santa Clara County Superior Court Judge Stephen Manley established one of the first behavioral health courts in the state – and the country – and has been lauded as a “trailblazer” for the way he ran his court. For example, he referred to defendants as “clients” as, he explained, that is the language of treatment, rather than the language of the court. Yet even with the success of the model he established in Santa Clara, Judge Manley asserts the need to focus on “upstream” interventions:

"I go back again and again to the lack of capacity [in community mental healthcare]. There should be much more effort with young children and their families. We should be working with 2- and 3- year-olds. We need to do far more work on the front end. To be really successful, diversion shouldn't be in the courts."

THE PUNCHLIST



3 ways to take action on this month.

1

Read:

Can virtual reality help bring depression and anxiety treatment to the masses? An op-ed in **Scientific American**, written by a doctor from Cedars-Sinai Medical Center in Los Angeles, argues it can. He credits COVID-19 for pushing VR therapy from research to practice.

2

Watch:

Workplaces and schools have hosted screenings of **Angst**, a 56-minute documentary that aims to raise awareness around youth and anxiety. Watch this **two-minute clip** from the producers explaining why it's important, and consider hosting your own home screening – especially if you have kids.

3

Learn:

What is “toxic positivity?” And how is it different from positive thinking? And are there emotional consequences to being “too optimistic?” Find out by listening to (or watching) **this video interview** with two therapists from the Psychology Group.

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