

Women's Mental Health in Bloom

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*A Global Event Marking International Women's Day
8 March 2026 • Seven Regions • 24 Hours • Nearly 2,000 Registrants*

By: Prof. Gihan ELNahas – Vice President, IAWMH

ABOUT THE EVENT

Every two years, the International Association for Women's Mental Health (IAWMH) convenes its global conference, bringing together professionals from around the world to advance education, collaboration, and innovation in women's mental health. This meaningful event also aligns with and celebrates International Women's Day (IWD).

Following the 2025 IAWMH Conference, the Royal College of Psychiatrists (RCPsych) and the Royal Australian and New Zealand College of Psychiatrists (RANZCP) proposed co-leading an informal global webathon to sustain momentum between major congresses. Under the auspices of the IAWMH, leading psychiatric associations across the world participated in a first-ever 24-hour webathon marking IWD 2026, focusing on all aspects of women's mental health.

This event aimed to highlight and celebrate the social, economic, cultural, and professional achievements of women, while reinforcing a global call to action for advancing gender equality. Through this collaborative webathon, the world's leading psychiatric associations united to promote learning, awareness, and collective action in support of women's mental health.

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Target Audience

- Mental health professionals

Partner Organizations

- International Association for Women's Mental Health – Host
 - Royal College of Psychiatrists (UK) – Lead Project Coordinator
 - Royal Australian and New Zealand College of Psychiatrists
 - The Lancet Commission on Women's Mental Health
 - World Psychiatric Association
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EVENT OVERVIEW

On 8 March 2026, the global psychiatry and mental health community convened for Women's Mental Health in Bloom (WMHIB) a landmark educational series of regional webinars held in recognition of International Women's Day. Spanning seven geographic regions — Australasia, Asia, Sub-Saharan Africa, Europe, North America, the Middle East and North Africa (MENA), and Latin America — WMHIB brought together clinicians, researchers, policymakers, lived-experience advocates, and community leaders in an uninterrupted, around-the-clock program. Open for registration for just one week prior to the event, the webathon attracted nearly 2,000 registrations.

1,990

TOTAL REGISTRATIONS

90

COUNTRIES
REPRESENTED

1,133

UNIQUE
ORGANIZATIONS

KEY THEMES

The global event embraced the sheer breadth of voices, regions, and disciplines — from Indigenous storytelling in Australasia to AI ethics in Europe, from lived experience poetry in the UK to women in crisis zones in MENA, all in a single day, running around the clock. Featuring a combination of live and pre-recorded presentations, the Webathon offered a richly diverse and interdisciplinary exploration of women's mental health across cultural, clinical, and systemic dimensions.

1. Perinatal, Reproductive & Hormonal Mental Health

One of the most prominent threads running through the event was the mental health of women across the reproductive lifespan. The Australasia session featured presentations on postpartum psychosis and the hormonal underpinnings of women's psychiatric conditions (Professors Anne Buist and Jayashri Kulkarni), while Asia addressed perinatal grief, peer support in perinatal mental health, and the challenges specific to pregnancy and the postnatal period. Europe deepened this focus through sessions on perinatal psychosis (Dr Trudi Seneviratne), menopause and mental health (Professor Anita Reicher-Rossler), and preconception health (Dr Louise Howard). North America contributed perspectives on postnatal depression. MENA complemented this with a crash course on the pharmacological treatment of depression in pregnancy (Prof. Gihan ELNahas), while Latin America examined the unique pressures faced by motherhood in crisis contexts.

2. Gender-Based Violence, Trauma & Safety

A major theme across all regions was the intersectionality of violence and women's mental wellbeing — examining intimate partner violence, domestic abuse, and systemic harm. In Australasia, Professor Manjula O'Connor addressed violence against women and girls. Sub-Saharan Africa explored the dignity and psychological recovery of women impacted by structural violence (Dr Ntombizane Menze). The MENA session opened with a powerful address by UNWomen Regional Director Dr Moez Doraid that tackled women in crisis zones and their unheard voices. Europe gave voice to incarcerated women (Cath Durkin) and domestic abuse survivors (Philippa Greenfield), while Latin America addressed intimate partner violence and breaking the silence around gender-based harm.

3. Leadership, Systemic Equity & the Gender Gap

Multiple sessions interrogated structural barriers to women's advancement in psychiatry and healthcare. The Asia region spotlighted women's leadership in mental health and the role of technology in scaling access and care. North America addressed the gender gap in medicine, women in leadership, and the creation of peer support networks for underrepresented practitioners (Drs Ludmilla Du Pruis, Tatiana Falcone, and Ruby Castillo-Puentes). Europe's Dr Lade Smith CBE examined the relationship between women's mental health and systemic inequality, and the Latin America session raised questions of professional equity and women's rights within the psychiatric profession.

4. Mental Health Conditions, Addiction & Clinical Practice

Sessions across regions addressed a broad clinical landscape — including addiction and substance use, personality disorders, suicide prevention, depression, and psychopharmacology. The MENA region devoted significant time to women's mental health in the workplace (Dr Hussein ELKholy), substance use and tobacco dependence, and pharmacological treatment approaches, culminating in an interactive panel on current needs, training gaps, and roadblocks in women's mental health across the Arab world. Europe's session covered addictions comprehensively (Dr Marta Torrens), North America examined awareness and prevention (Dr Donna Stewart), and Asia addressed suicide prevention in women and girls from a South Asian perspective (Dr Alexis Palfreyman, Sri Lanka).

5. Culture, Community & Lived Experience






A hallmark of WMHIB 2026 was its deliberate integration of lived experience, cultural safety, and creative expression. In Australasia, Professor Helen Milroy AM delivered a keynote on the power of storytelling in Aboriginal and Torres Strait Islander mental health. Ms. Fiona Jiang addressed cultural safety and community wellbeing. The Asia region incorporated sports as a mental health intervention, a creative healing capsule, and a documentary film on homecoming. Europe featured poetry by a lived-experience contributor and a session by Ananta Dave on creativity, connection, and courage. Sub-Saharan Africa explored identity through the lens of interracial adoption (Miss Rachel Makoni), and Latin America wove in yoga, mindfulness, and narratives of resilience.

6. Technology, Innovation & Cross-Sector Collaboration

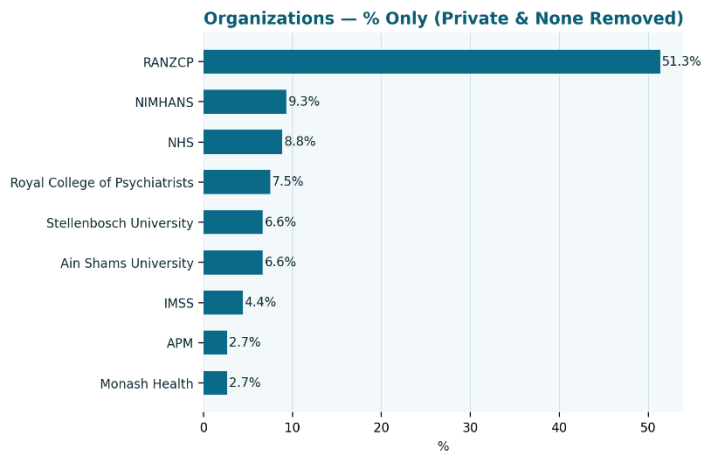
Several sessions examined the transformative role of technology and interdisciplinary collaboration in advancing women's mental health. The Asia region discussed digital tools for scaling care access, while Latin America addressed artificial intelligence in psychiatric practice (Dra Roxanna Ruiz Cabarrús) and the Warmi collaborative network. Europe's Dr Raquel Iniesta tackled ethics, gender bias, and AI — a timely intervention in the global conversation about equitable technology. The MENA interactive forum modelled a collaborative, cross-national dialogue lead by Dr Lamia Jouini–ECP, WPA and Prof Gihan ELNahas drawing panelists from Jordan, Algeria, Qatar, Lebanon, Egypt, and Tunisia to echo the voices of early career psychiatrists.

KEY Metrics and Global Participation insights

Top 5 countries by registration:

#	Country	Count	Distribution	%
1	Australia	422		21.2%
2	United Kingdom	325		16.3%
3	India	233		11.7%
4	Mexico	147		7.4%
5	Egypt	139		7.0%

Top world organizations by registration



CONCLUSION

Women's Mental Health in Bloom (WMHIB) 2026 demonstrated the power of global collaboration in advancing a nuanced, culturally informed understanding of women's mental health. By bringing together scientific evidence, clinical practice, lived experience, advocacy, and women in art across seven regions and multiple languages — including dedicated Spanish-language programming in Latin America — the event underscored both the universality of challenges facing women's mental wellbeing and the importance of contextually sensitive, locally led responses.

As a platform that ran continuously across time zones, WMHIB 2026 stands as a model for inclusive, equitable, and globally connected health education. A remarkable event that exemplifies how united voices can cross borders to advance a shared purpose.

Together, we sparked more than an event — we ignited a global movement.

Let's keep this momentum alive, deepen our collaborations, and continue shaping a world where women's mental health is prioritized, protected, and empowered across every region.

The flame has been lit — and we are just getting started.

" Together, we sparked more than an event – we ignited a global movement"

Special thanks and appreciation go to our supporting organizations and contributors, including The Parc and theyouthtalks.com-India for providing logistic and tech support. We also extend special recognition to Egyptian award-winning digital artist and designer Ahmed Emad Eldin for his creative contributions to the event.

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Event recordings will be made freely available on the IAWMH website as open-access resources for all.
