



# Diane

The Magazine

## Addressing Black Girls' Mental Health

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Women's Fund of Central Indiana convenes, invests, and advocates so all who identify as women or girls living in Central Indiana have an equitable opportunity to reach their full potential no matter their race, place, or identity.



Diane B. Brashear, Ph.D. was the founding force behind Women's Fund of Central Indiana. Photo courtesy of IUI University Library Special Collections and Archives

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## Letter from the President

So many around us are in crisis, but we may never see it. Too many people fall apart in corners or sob into pillows before splashing water on their faces and stepping forward to give others care they rarely receive themselves. Others exist in work places that undervalue them—dismissed, overlooked, and expected to endure simply because life has required resilience from them.

May is Mental Health Awareness Month. This month, we see an increase in the phrase “Be kind—you never know what someone is going through.” Thanks to the *State of Women in Central Indiana Report (SOWR)*, we know that 1 in 5 Central Indiana women report 1 in 5 women report experiencing frequent mental distress, compared to 1 in 8 men. Similarly, girls in grades 7 through 12 are twice as likely as their male peers to report feeling sad or hopeless for over two weeks, seriously consider suicide, and make a plan to attempt suicide.

These numbers represent the people we work alongside, learn with, and love. They are neighbors, colleagues, and friends. This data demands a response—one that meets the urgency of our community's need. Women and girls working to restore their mental health should not be invisible.

Mental health challenges surged post-2020, intensified by the COVID pandemic's isolation and uncertainty. While the social sphere has since reopened, how are we using it? Fewer people are talking, listening, and expressing empathy while more are scrolling and commenting. It is almost a privilege to be able to pause the work of daily life, sit with someone, and truly listen. But it is necessary. Purposeful connection has the power to break cycles of disconnection and silence.

Women's Fund answers the call of community by investing in systems change, advocating for women's rights, and building collective power for women and girls. You told us that work must begin with mental health.

During our Power of Women event, Ruby Bridges spoke about the importance of education and committing to the power of learning. This extends beyond academics to

include learning about emotional wellbeing and the social support it requires.

Our communities can thrive, but we must heed the call of those sharing their true state of being. The *SOWR* and *Girl Scouts' Indiana Girl Report* reflect a mosaic of perspectives and experiences.

They share how economic hardship brings emotional distress and cultural mistrust, perpetuating cycles of neglect. The *SOWR* highlights that women in Central Indiana experience higher rates of emergency mental health interventions than men. The *Indiana Girl Report* further illustrates the disparities, showing that trauma impacts girls differently, increasing their long-term risk of mental health disorders.

It is up to each of us—as individuals, as leaders, and as a community—to demand accessible, affordable, and culturally competent mental health care for women and girls across Central Indiana.

This issue of *DIANE* is our fourth, and with each one, we remain committed to equipping our community with actionable insights, local perspectives, and relevant conversations.

We invite you to engage with the stories inside, reflect on what role you can play, and join us in demanding access to care for mental health as a right—not a privilege. Look out for an issue brief from Women's Fund and Polis Center digging deeper into interventions that improve women and girls' mental health.

Thank you for standing with us, for believing in the power of knowledge, and for refusing to look away when the conversation gets difficult.

If we can listen to each other, learn together, and fight for the same opportunities, we can realize the advancements, the benefits, and the collective joy within reach.



*Tamara Winfrey-Harris*

Tamara Winfrey-Harris  
President  
Women's Fund of Central Indiana



# Addressing Barriers for Black Girls' Mental Health

The 2024 *Indiana Girl Report* and the *State of Women in Central Indiana Report* both highlight a troubling reality: the mental health crisis is real, and it's impacting virtually every demographic of girls and women across our state.

At Women's Fund, we understand that all women and girls must navigate health disparities related to gender, but intersecting identities, such as race, can complicate things. By working to assist those of us who are particularly vulnerable, we can make things better for everyone. This article focuses on the unique experience Black girls have in navigating mental health.

Women's Fund spoke to several caregivers and service providers who work regularly with Black girls and adolescents. Throughout these discussions, our interviewees brought up three primary strategies:

- Identify **biased treatment** in systems (educational, legal, medical).
- Address medical and mental health **skepticism** within the Black community.
- Increase easy access to **culturally competent care**, both for mental health programs and programs addressing overall wellness.

## ACKNOWLEDGING BIAS

Dr. Tyffani Monford is a psychologist and author who often serves justice-impacted, juvenile populations.

"I mainly see girls through systems," she said. "A lot of times, talking to me is not a voluntary choice for these girls. When they walk in the door, it's almost always because they were told to by a judge, a school official or some authority. So, as a result—and even though I'm Black—they don't always look at me as any different than the rest of the system that brought them to me."

Dr. Monford sees a lack of early care as contributing to more severe issues later in childhood.

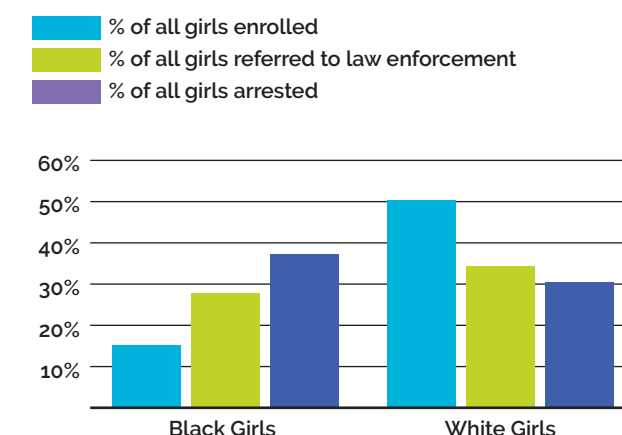
"We usually wait until Black girls' mental health impacts *other* people before addressing it," she said. "We push resiliency too much on these girls without prioritizing their well-being. Nobody makes a place for them to talk about stress and what that looks like until they inevitably lash out and get punished."

Heightened expectations of Black girls' resilience partly stems from a tendency to view them as more mature than they are.

A groundbreaking 2017 study from Georgetown Law showed that Americans across race and class viewed Black girls as inherently less innocent and more adult-like than their peers, especially between ages 5 and 14.

Many suspect that makes them likelier to be punished, and more severely. According to the National Women's Law Center, even though fewer Black female students are referred to law enforcement than white students (28% versus 34% of total referrals), Black female students nevertheless make up a higher percentage of those ultimately arrested (37% Black versus 30% white).

Percentage of girls referred to law enforcement or arrested at school in the 2013-2014 school year



Nat'l Women's Law Ctr. (2017)

Kareema Boykin, a social worker at KIPP Indy College Prep Middle School, serves a student population that is majority Black and over 90% economically disadvantaged. As someone who is aware of potential biases, she prefers to resolve conflict rather than punish behavior.

Like Dr. Monford, most of the girls she sees are seldom there by choice.

"After asking questions about why they acted out, I usually discover deeper issues," Boykin said. "If a kid is misbehaving, it could mean something is wrong. They're not just a 'bad kid.' I don't really believe in that. We expect adults to tell us what's wrong. But kids usually show us what's wrong through the way they act."

Sometimes, the "deeper issues" are as simple and relatable as gossip, an argument with a teacher, or a recent breakup. In those instances, Kareema calls for a "restorative." Here, the involved students (and, if necessary, teachers and staff) get together in a circle and fully discuss the issue.

"There is what we call a 'talking piece.' We take turns listening, repair the harm and come to an agreement on how best to restore the school community. Nine times out of 10, that solves it. Basic conflict resolution."

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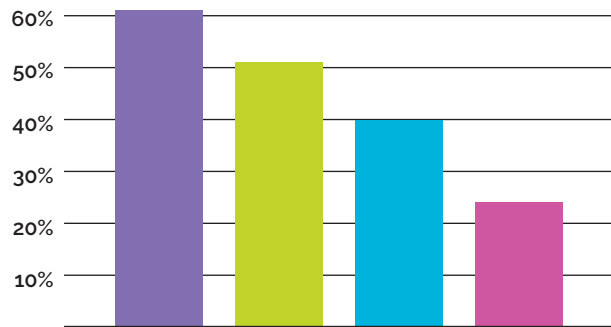
Other times, however, Boykin may discover behavior that conceals a more serious traumatic experience. This could be bullying, current or past abuse (physical or mental), grief over a death, the strain of poverty, or more.

In 2016, the National Survey of Children's Health found that a majority of Black children (61%) had gone through one or more Adverse Childhood Experiences (ACE). This was the highest rate of any demographic in the study. ACEs have been found to negatively impact early development.

In short: childhood trauma is not experienced equally, and it can impair one's lifelong physical and mental health.

#### National prevalence of Adverse Childhood Experiences (ACE)

■ % of Black non-Hispanic children  
■ % of Hispanic children  
■ % of White non-Hispanic children  
■ % of Asian non-Hispanic children



National Survey of Children's Health (2016)

#### ADDRESSING SKEPTICISM

America's embrace of mental health as a concept has come far in recent decades, but it has further to go to gain wider acceptance. Some estimates show only 25% of Black Americans will seek help when experiencing mental distress. That's relative to 40% of white Americans.

That gap is partly due to skepticism within many Black households of the medical establishment as a whole. In part, that's due to past violations of trust.

Over the last 20 years, public apologies for anti-Black discrimination have been issued by some of the nation's major medical organizations (e.g., American Medical Association, the American Psychological Association, the American Academy of Pediatrics, and the American Nurses Association).

Violations include medical neglect, active harm, resistance to integration law, and covert bans on Black membership in professional organizations.

Additionally, studies have shown that traumatic life experiences in Black patients are sometimes viewed differently by doctors, leading to higher rates of misdiagnosis.

These betrayals can carry long legacies, forming differences in cultural practices within Black households.

"There's a long history of, 'What goes on in this house stays in this house,'" said La Tonya Brown, founder of Leading Ladies, Inc., a nonprofit mentorship program for girls in Indianapolis.



In recent decades, several U.S. medical organizations have issued apologies to Black Americans for a legacy of prejudice.



"There's a lot of reasons for that. Some parents think asking for help is a sign of weakness in an environment where being tough is a must. Some think it could bring unwanted people to the house. Instead of individuals or organizations who can help you, you get the police or DCS (Department of Child Services), which is already likely a fear. That creates more resistance."

Kareema Boykin at KIPP Indy has also experienced skepticism from parents. "I think sometimes they forget you can be stressed as a kid," she said. "They may not be convinced that depression or anxiety are real at that age, like there should be less concern for mental health. 'Kids have everything, so there's nothing wrong with them,' not realizing that the student is really struggling. I can see it in their face and body language."

According to the American Psychological Association, significant numbers of all Americans do not consider the two most commonly diagnosed mental health disorders—depression and anxiety—to be disorders at all.

To address that skepticism, some of our interviewees endorsed a two-generation approach to children's mental health care, inviting parents into therapy sessions so that both are introduced to important concepts together.

"If trauma from a girl's life gets brought up, it could impact the mother," Boykin said. "It's likely that the mother didn't have this kind of support as a child."

Brown agrees: "Having both in there together can bridge the communication gap. A child and their parent are now learning something at the same time, they have something to talk about, bonding them."

The partnership can even lead to new insights between child and parent.

"We have the parents share their story with their girls," Brown said. "Ninety-nine percent of the time the girls say, 'Oh, now I understand why they do what they do.' The kid can finally see their parent as someone else's child."

No matter the approach, each of our interviewees stressed how critical it was to have spaces that were safe for this level of

vulnerability. Creating those spaces, however, requires a level of trust that may only be possible if girls and parents are convinced that clinicians truly understand where they're coming from.

As Boykin puts it: "Black girls want to talk to Black girls. Often, they just need someone to listen, validate feelings and show they care."

#### INCREASING ACCESS TO COMPETENT CARE

Over two nights in 1976, NBC aired *Sybil*, a TV movie drama starring Sally Field. A popular and influential success, the movie was an early portrayal of what was then called multiple personality disorder. It would inspire an eighth-grade viewer named Tyffani Monford to eventually pursue a career as a psychologist.

"Of course, when I realized this would mean 10 more years of school, I had second thoughts!" Dr. Monford laughed. "But my mother wouldn't let me back out. She said, 'You wanted to do this, so you're going to do it.'"

Luckily for those she sees in her practice today, Monford's mother prevailed. Very few Black girls have access to a mental health professional who looks like them. The benefits for those who do, though, cannot be ignored.

"There's been lots of research on same language and same culture," she added. "The therapeutic relationship and outcomes are often better, at least initially, because there aren't as many barriers to get through up front."

Researchers call this the "race concordance hypothesis".

"But the difficulty for Black communities," Dr. Monford added, "is that we lose so many people

**The mental health crisis is real, and it's impacting virtually every demographic of girls and women across our state.**



*Sybil* © 1977  
© Warner Bros. Entertainment Inc.

Continued on page 8



who would have majored in social work or in psychology, either because they can't justify the cost or because they don't have somebody like I did making sure they finish school."

Today, about 2% of psychiatrists and 4% of psychologists in America are Black. That compares to Black America's 14% share of the U.S. population (nearly 30% in Indianapolis).

"Now, even if you do make it through school, you'll probably be in debt," Dr. Monford continued. "To pay off that debt, you're more likely to serve clients who can pay more."

There are programs that try to mitigate this doctor shortage. After graduating, Monford joined the National Health Service Corps, a federal program that helps pay off doctors' student loans in exchange for practicing in urban and rural areas of the country.

However, Dr. Monford sees another important way to increase access to care that doesn't necessarily involve doctoral degrees: investing in wellness and early prevention programming. These efforts not only stop more serious issues from developing, but they also provide a level of care families may otherwise be unable to afford or physically access.

"Plus, not every Black girl *needs* a psychologist," Dr. Monford added. "So, part of a broader approach can be in those areas of early care and overall wellness. Are we giving girls space to problem solve? Or to learn from Black women how to navigate the world as a Black girl? Do we support intergenerational programs, bringing in parents?"

Health professionals like Dr. Monford offer curricula to train nonprofit staff in these foundational, prevention-minded services.

Some of them can be found in La Tonya Brown's Leading Ladies, Inc.

"We work with girls and families to break generational curses," Brown said. "Some of what these girls face can be avoided if we make it easier to get help early on. I mean, it could be as simple as learning how to interview for a job or other life skills. Or it could be as serious as learning to process trauma. Either way, if a girl feels neglected, they'll just go to outside forces for attention or affirmation. Those usually end up being negative."

### WHAT YOU CAN DO

Today, numerous efforts are underway to minimize our awareness of and response to social inequity. More than ever, it is up to those living outside vulnerable communities to educate themselves and support those working to counteract a legacy of bias and prejudice.

Women's Fund encourages you to explore the below organizations and resources dedicated to wider access to mental health services.

- Leading Ladies, Inc.
- Centers of Wellness for Urban Women, Inc.
- Therapy for Black Girls
- "Girlhood Interrupted" study from Georgetown Law; authors Rebecca Epstein, Jamilia J. Blake, Thalia González



## Staff Picks

### What We're Watching, Reading and Listening To

As advocates, conveners, community members and investors in women and girls, it's essential that we focus on supporting media produced by and for women. Staying up to date with critical issues keeps us informed and inspired. Below is a list of books, articles, videos and podcasts focused on women that Women's Fund recommends.

#### WHAT WE'RE watching

##### ***The Six Triple Eight***

During WWII, the only US Women's Army Corps unit of color stationed overseas takes on an impossible mission in a drama based on a true story. | [Watch on Netflix](#)

##### ***The Last of the Sea Women***

From Producer Malala Yousafzai and Director Sue Kim comes a breathtaking look at the lives of the Haenyeo – the real-life sea women of South Korea's Jeju Island. | [Watch on Apple TV](#)

##### ***Woman of the Hour***

In her directorial debut, Anna Kendrick helms a true-crime thriller set in the 1970s about a serial killer appearing on *The Dating Game*. Anna Kendrick donated her earnings to nonprofits that support assault victims. | [Watch on Netflix](#)

#### WHAT WE'RE reading

##### ***The Let Them Theory: A Life-Changing Tool That Millions of People Can't Stop Talking About***

Author Mel Robbins teaches you how to stop wasting energy on what you can't control and focus on what truly matters: your happiness, your goals, and your life. | [Available now](#)

##### ***The Lion Women of Tehran***

From national bestselling author Marjan Kamali, this novel is a powerful portrait of friendship, feminism, and political activism set against three transformative decades in Tehran, Iran. | [Available now](#)

##### ***Pushout: The Criminalization of Black Girls in Schools***

In this influential book, author Monique Couvson chronicles the experiences and social consequences of Black girls who are over-punished and policed by teachers, administrators, and the justice system. | [Available now](#)

#### WHAT WE'RE listening to

##### ***Stuff Mom Never Told You: "The Damaging Impact of Strategic Incompetence"***

In a recent episode of the long-running podcast, hosts Anney Reese and Samantha McVey talk about "strategic incompetence" and the ways it is used to hold women back. | [Listen wherever you get podcasts](#)

##### ***Lola Young: "Messy" (Explicit)***

This viral hit about embracing imperfections and finding strength in who we are is from the British soul-pop artist's 2024 album, *This Wasn't Meant for You Anyway*. | [Listen wherever you get music](#)

President Tamara Winfrey Harris at Free Press Indiana fundraiser





## Centers of Wellness for Urban Women, Inc.

For nearly two decades, Centers of Wellness for Urban Women, Inc. (CWUW) has empowered Central Indiana women and their families to take control of and improve their health.

Founded by Rhonda Bayless in 2007, the organization's approach spans everything from education to advocacy to direct caregiving.

Bayless formed the idea back in the 1990s while working in HIV treatment. "I knew we needed earlier intervention. I wanted to form a place that focuses on what is now called 'social determinants of health,' those things that go on to influence good or bad outcomes."

While taking a holistic approach to healthcare is a more widely accepted practice today, that wasn't the case when CWUW was founded.

"The concept of 'wellness' wasn't all that well known locally in 2007," Bayless said. "But after researching successful programs in other cities, I saw a need to create a space in Indy where women could focus on themselves and play a more active role in their health, preventing more serious health issues like what I had seen with HIV."

To do that, CWUW's programs focus on seven aspects of wellness: physical, emotional, spiritual, environmental, intellectual, occupational and social.

For many clients, these concepts get introduced during CWUW's Connections 4 Wellness program.

"That's our wraparound services program," Bayless said. With a focus on mental health, the program begins with women introducing themselves to CWUW staff and discussing how they view their health needs. Depending on those needs, Connections 4 Wellness then moves onto one-on-one coaching, medical referrals, financial education, and even resources for basic needs like housing.

In 2022, Women's Fund awarded CWUW with a \$25,000 grant to build up Connections 4 Wellness.



Rhonda Bayless



Photo provided by Rhonda Bayless

Photo provided by Rhonda Bayless

"What we've found is a lot of people just don't know the resources that are already out there," Bayless said. "So, a big part of our work is showing women what services they can use and who to talk to around town. And we support them when they're on that journey, too."

Connections 4 Wellness also addresses the stigma surrounding mental health care.

"We've found that can be a challenge when it comes to women accessing all the services that can help. We do that especially because we serve mostly Black women, and we know there can be skepticism."

That cultural awareness extends to CWUW's clinician partners. "Folks at every step of the way need to have that cultural competency. It can dictate if a woman decides to stay in treatment or not."

When it comes to challenges of affordability, CWUW allots funding to cover out-of-pocket costs for clients. Their in-house and partner mental health clinicians will also grant a limited

number of free sessions for those who are uninsured.

Over the last several years, as need dramatically increased in the wake of the pandemic, CWUW had to expand their reach, which included expanding their operations.

"We're up to a staff of ten now, with all the office space and overhead that requires," Bayless said. "That's often where the financial struggle is because operations are absolutely critical to filling the need. We can't do it without facilities, computers, software or lights."

In 2024, Women's Fund awarded CWUW a \$20,000 grant specifically for operations.

After nearly two decades of CWUW, Rhonda emphasizes the importance of commitment.

"Mental health is a fragile thing in every community, but especially in the communities we serve," Bayless said. "So, getting people the full help they need takes time. Years."

Bayless gave the example of a woman she's worked with since 1999—before CWUW was even a reality.

**"Even with the best help, it's hard for any of us to change our life, but it's especially hard for women facing so many internal and external challenges."**

"This woman was a sex worker with substance use disorder and several unacknowledged

mental health challenges. It took years to get her into treatment. She would disappear for a while then pop back up. Time went by, I was at a different agency, and she came back. We finally got her a diagnosis. It turned out she was bipolar and schizophrenic. That makes it extremely difficult to get a regular job with a good wage.

"We were able to get her into housing and care, but this all took years. That consistency and my availability to her over time... that is the real work. Even with the best help, it's hard for any of us to change our life, but it's especially hard for women facing so many internal and external challenges. That's why we often see the best outcomes after years of engagement."

Bayless explained her clients appreciate this most about CWUW. "In this work, you need credibility because many of these women have seen other efforts and organizations come and go. If they're making a commitment, clients need to know that you're also in it for the long haul."

Now approaching their second decade, CWUW has earned the trust of their clients alongside the region's philanthropic community.

To learn more or donate, visit [CWUWonline.org](https://www.CWUWonline.org)





# No Two Alike

## Stories of Mothers and Motherhood

Mother's Day holds meaning and emotions for us all. Is any role more complex or demanding than "mother"? They are tasked as providers, caregivers, supporters, nurturers, heroes, and so much more. To celebrate Mother's Day, we are featuring several different perspectives.



**MYKAEL HOLLOWAY**  
On being a justice-impacted mother

Motherhood is the one title that never fades, no matter where life takes you. Mistakes, struggles, and second chances may shape your journey, but they do not define your worth as a mother. The world may see labels, but your child sees love, sacrifice, and resilience. You won't always be who you were in your hardest moments, but you will always be a mother! Guiding, nurturing, and proving that redemption is real. Your past does not disqualify you from being present; it empowers you to love harder, dream bigger, and break cycles for the ones who matter most.



**TAMARA WINFREY-HARRIS**  
On being a "bonus mom"

At my stepson's wedding reception last year, during the mother-son dance, he first took his mom for a spin around the dance floor and then extended his hand to me.

I have always been ambivalent about motherhood. While I thoroughly enjoy little ones and take pride in my role as a "cool auntie," I have never experienced a strong desire for biological children. But I met and married a wonderful man with two children—a boy, 6, and a girl, 9. I became a "bonus mom." Those children are mine, even though I didn't give birth to them. Family is more than biology and real love is expansive.

Parenting is hard work, no matter the situation. And stepparenting comes with the extra challenge of finding your place in a complicated tangle of existing relationships—between the children and their biological parents and between your partner and their former partner. The landmines are many. And there is always that hovering narrative

of stepmothers as cackling, evil interlopers. But complication is often where you find the good stuff in life.

Love blossoms, in part, because of the happy times like family road trips and T-ball games and graduations, but it really strengthens during the harder times—the late-night fevers and teenage mistakes and frank discussions between co-parents trying to do what is right. It has been a journey. And on the wedding day of our youngest, standing beside my husband and the children's mother—I was reminded again how grateful I am for the experience and for our family.



**GERRI PAGACH**  
On being a daughter

Being a daughter has been a journey of love, growth, and connection. As the first daughter in an extended family full of boys, I was spoiled. However, I also learned to navigate life among them, gaining strength, kindness, and resilience. Being a daughter means showing up through tough times, sometimes carrying

the load, other times leaning on support. These experiences helped me find my voice and embrace my identity as a daughter and, later, as a mom. I've learned the balance of receiving and giving love, discovering more about myself each year. My mom taught me love, strength, and support, and I hope my daughter embodies these qualities.



**BEKAH CORWIN**  
On being a dog mom

I know what you're thinking: is a dog mom a kind of mom? From my perspective, yes. I always knew a dog would be out there waiting for me when I was ready. They provide joy and unconditional love, but they depend on you for everything. And to me, mothering means giving selflessly. Adopting Royal, a now 18-pound bundle of energy, allows me to nurture in a way that teaches me more about myself. In the words of author Dean Koontz: "Petting, scratching, and cuddling a dog could be as soothing to the mind and heart as deep meditation and almost as good for the soul as prayer." 🐾



# Addressing the Hoosier Health Crisis

Kareema Boykin, MSW, LCSW, LSSW, CYCP, Licensed Clinical Social Worker at KIPP Indy Public Schools, at Women in Health Collaborative Fund Event

The Women in Health Collaborative Fund, a pilot initiative from Women's Fund of Central Indiana, is a response to the health challenges facing Hoosier women and girls. This initiative, reflecting Women's Fund's strategic pillar of Health & Wellbeing, brings together health professionals to raise funds and direct grants that can improve outcomes for women and girls.

"We created this fund in response to the State of Women in Central Indiana report," said Nichole Wilson, FACHE, Chair of Women's Fund Advisory Board and VP of Community Health Operations at Indiana University Health. "The Fund brought together all types of women who work in healthcare—from doulas to midwives to OBGYNs to surgeons—so that they could make decisions about how funds can best be used for women's health."

The Women in Health Collaborative Fund is powered by collective giving, with more than fifty women in healthcare contributing. Every donor, regardless of contribution size, had a voice in voting for grant recipients. Contributions came from these donors alongside Women's Fund, Indiana University Health, and a private family foundation fund.

"We already know that Indiana has some of the worst infant and maternal mortality rates in the country," said Cara Berg-Raunick, DNP, Co-chair

of the Women in Health Collaborative Fund Steering Committee. "As a women's health nurse practitioner, I see every day how policies worsen outcomes for women and families—and how these issues are driving providers away from our state, leaving greater gaps in care. What I love about the Women in Health Collaborative Fund is that through Women's Fund, women are standing up and saying, 'Trust women, trust providers—we know how to solve these issues.'"

The first round of grants went to applications in the areas of reproductive health and Black girls' mental health. Members of the fund voted on and selected the following grant recipients:

- Martin Luther King Community Center
- The Ross Foundation
- Centers of Wellness for Urban Women
- Indiana University Foundation/PATH4YOU
- Exodus Refugee Immigration, Inc.
- Just Community

The Women in Health Collaborative Fund is more than a grant program—it's a community of women using their voices and expertise to drive change. 🌊

To learn more or donate, visit [womensfund.org](https://womensfund.org)

## Donor Profile

### Karen Gentleman



Karen Gentleman

Recently, the Women's Fund team reached out to Karen Gentleman, a founding mother who has remained involved with the organization for nearly thirty years. We wanted to get her insight on Women's Fund's impending 30-year anniversary (coming in 2026), the recent *State of Women in Central Indiana Report*, and reflections on our publication's namesake, Dr. Diane Brashear.

**As someone who worked alongside Dr. Brashear, what do you think her opinion would be of the publication that bears her name? What types of articles do you think she would want us to include?**

I think it's great, and I believe Diane would find it just terrific. She was a big believer in anything that got the word out about what Women's Fund was. In terms of articles, Diane was always a believer in getting out stories about women who were leading the charge and doing a wonderful job in the community.

She used to tell a story about how she met with a very important foundation in the area—the meeting was with all men. She challenged them and said, "Come up with the names of women who are leaders in Indianapolis and Central Indiana." And they came up with only seven names, and she just couldn't believe it. So, with that paucity, she dove into the work of trying to make everyone aware that there were far more than seven women leaders here.

**On *Shaky Ground* was the Women's Fund's predecessor to the recent *State of Women in Central Indiana Report*. As the main author of the very first *On Shaky Ground*, what are your thoughts on the new report?**

Since *On Shaky Ground* was first published, every update shows that we are still "on shaky ground". The challenges facing women and girls continue to just go up and up and up. It's crucially important for Women's Fund to continue to tackle those needs.

One of the statistics I always liked to point out are the challenges for women as caregivers. The *State of Women Report* certainly documents that you've got twice the demand [for quality childcare] than you do of the supply in parts of Central Indiana. Because of that imbalance, the costs for childcare are just humongous.

**Next year, the Women's Fund will celebrate its 30th anniversary. As a founding mother, what are your hopes and aspirations for the next 30 years?**

I personally would like Women's Fund to stay focused on women and girls in Central Indiana. The problems are major everywhere, but they impact women and girls especially hard here.

I also think we're going to need to continue to have the strong board that Women's Fund has always had in terms of skills, gender, ethnicity and age.

And then, there's the strong support of Central Indiana Community Foundation (CICF). Under Diane's leadership, that was a big question about whether to affiliate with CICF or not. And I think that was probably the best early decision that we made. It was not an easy decision because in the nineties, CICF was a male- and white-dominated space. And we had to sort of say, well, we think this will help. And it has.

**We know there are many wonderful organizations and causes to support in our community. Can you share more about your motivations to support Women's Fund?**

I just continue to be impressed over the years by Women's Fund's strong mission. Especially when their mission changed to specify not only that they invest money but also that they convene, which is a crucial role, and that they advocate. So those three verbs, I think, are something that are very important.

And I think its structure as an endowment always appealed to me because I do give annual operating support to other wonderful organizations, but you do that, and then the money's gone. So having something that lasts and will continue to make an impact over the years has just been a wonderful reason to support Women's Fund. 🌊





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**Did you know that issues specific to women and girls receive only 1.9 % of all U.S. philanthropic giving? \***

And yet, women and girls across our country and in Central Indiana face tremendous challenges. The Institute for Women's Policy Research keeps a report card for each state, and Indiana ranks among the worst for women's well-being, earning a D grade.

In Central Indiana, far too many women face inequitable pay, rising housing costs, lack of access to the full range of reproductive health care, high rates of infant and maternal mortality, intimate partner violence and other challenges. Girls face pressures unimaginable to past generations, from relentless social media to escalating mental health crises.

**Women's Fund asks you to stand with us** to invest in organizations that lift up the women and girls around you.

Please donate to Women's Fund. Each gift, no matter the amount, builds our collective power. Together, we can answer the call of community by investing in systems change, advocating for women's rights, and building collective power for women and girls.

**To donate, visit [womensfund.org/donate](https://womensfund.org/donate)**, or mail your gift to Women's Fund of Central Indiana, 615 N. Alabama Street, Suite 300, Indianapolis, IN 46204.

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