Khám Phá Những Nỗi Đau Bí Ẩn Một Câu Hỏi Có Thể Cứu Một Mạng Sống.

Bạn có người thân nào có các hành

Nói là họ chán sống

- Gây tốn hại cho chính họ
- Họ đang chán năn, bị căng tháng hay bế
- Mang tài sản của mình cho người khác
 Sắp đặt công việc của ho theo thứ tư
- Sap dat cong việc của nộ theo thứ tự
 Ho tự đặt mình vào tình trang nguy hiểm
- Ho từ dạt hình vào tính trạng nguy hiệm
 Ho giân dữ hay lo lắng, và/hoặc là thay đối tâ
- Ho gia tăng số lượng rượu và thuốc hiện đang
- Ho thường kiếm cách xa lánh mọi người
- Họ ngủ liên miên hoặc mất ngủ
- Không làm những điều họ thường ưa thích
- Nói rằng họ là một gánh nặng cho những người l

KNUW THE SIGNS

Pain Isn't Always Obvious

suicideispreventable.org

Targeted Suicide Prevention Materials for the Vietnamese Community in California

WORKGROUP REPORT FINAL





Know the Signs >> Find the Words >> Reach Out

ΝΗΨΝΟ ΚΗΟ ΦΑυ

PAIN ISN'T ALWAYS OF

WELLNESS • RECOVERY • RESILIENCE

I. Introduction

The Know the Signs suicide prevention social marketing campaign prepares Californians' to prevent suicide by encouraging them to **know the signs, find the words** to offer support to someone they are concerned about, and **reach out** to local resources. Campaign materials range from print ads, TV and radio spots, to outreach materials available in several languages. All campaign materials refer individuals to the campaign websites:

- ww.suicideispreventable.org
- www.elsuicidioesprevenible.org

All campaign materials can be viewed, customized and downloaded from the Resource Center on Your Voice Counts (<u>www.yourvoicecounts.org</u>)—an online suicide prevention forum designed to facilitate a dialogue about suicide prevention in California and to engage stakeholders in the development and distribution of the Know the Signs campaign materials. The Know the Signs campaign is part of statewide efforts funded by counties through the Mental Health Services Act, formerly known as Prop 63.

II. Background

Vietnamese Americans are the fourth largest Asian subgroup nationally and the second largest in the state of California. Among Vietnamese Americans, experiences of war trauma, posttraumatic stress disorder and resettlement challenges contribute to the alarming rates of depression with estimates ranging from 8 to 50% in California.

Source: Discussing Depression with Vietnamese American Patients. Journal of Immigrant and Minority Health. (2009) http://link.springer.com/article/10.1007/s10903-009-9234-y/fulltext.html Source: 2010 Census Brief. The Asian Population: 2010. http://www.census.gov/prod/cen2010/briefs/c2010br-11.pdf

According to the research, Asian American women between the ages of 65-84 had the highest rates of suicide compared to women from other racial backgrounds. In addition, among all Asian American age groups, the age group between 20-24 had the highest rate of suicide compared to all other age groups.

Source: *Suicide among Asian Americans*. American Psychological Association. http://www.apa.org/pi/oema/resources/ethnicity-health/asian-american/suicide.aspx

Recent research conducted by the National Latino and Asian American Study (NLAAS) coincided with national overall findings in that **suicide** ideation and attempts among APIs are among younger aged females with mental health issues.

Source: Lifetime Suicidal Ideation and Suicide Attempts in Asian Americans. Asian American Journal of Psychology. (2010) http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2953852/

III. Needs Assessment Interviews

Approximately 35 organizations that work with or provide services to the Vietnamese community in 10 counties including Alameda, Orange, Los Angeles, San Francisco, San Bernardino, Riverside, Contra Costa, San Joaquin, San Diego, Santa Clara and Sacramento were contacted in March 2014 and asked to provide input on culturally relevant outreach strategies for the dissemination of suicide prevention campaign materials. A total of 13 organizations participated in a phone interview where staff provided insight regarding language, target population and usefulness of outreach materials. The majority of the organizations suggested a need for materials to reach both, parents of youth and helpers of older adults, and suggested materials should be bilingual in English and Vietnamese. The majority of organizations did not currently have any type of suicide prevention materials at their organization and only three organizations had previously received suicide prevention materials from Didi Hirsch. Staff from all of the organizations interviewed agreed there is a need for suicide prevention materials in Vietnamese and would be interested in having these materials available for distribution to their community members.

Staff from two organizations mentioned two key components regarding the topic of suicide prevention for the Vietnamese community: acculturation and stigma. For Vietnamese community members who are middle to older age there is a need to provide the materials in both languages as some may not have strong English language skills and may feel more comfortable reading information in their primary language. However, there may also be individuals in the middle-aged group who feel comfortable with their English skills and may prefer to have information in English. Most staff preferred messages reaching the parents of youth who could also act as 'helpers' of other middle-aged persons and/or elders at-risk for suicide.

IV. Members

Workgroup members for the Vietnamese cultural workgroup guided the development of campaign materials through their collaboration and participation in an orientation webinar as well as periodic discussion posts on the Your Voice Counts website. Workgroup members contributed their knowledge of this group's cultural characteristics based on their personal and professional expertise in related fields such as, mental health services, education, social services, advocacy, crisis response and intervention, suicide prevention, community outreach, and healthcare (see Appendix C Workgroup Member Roster).

A total of 7 members participated in the Vietnamese cultural workgroup. Members represented the counties of **Los Angeles**, **Orange**, **Alameda**, **Placer** and **Sacramento** from agencies such as the Vietnamese Community of Orange County, Mental Health America, the Vietnamese American Cancer Foundation and the Santa Ana Public Health Clinic and Viet-Care as well as affiliations with the Chicago School of Professional Psychology and the California MHSA Multicultural Coalition.

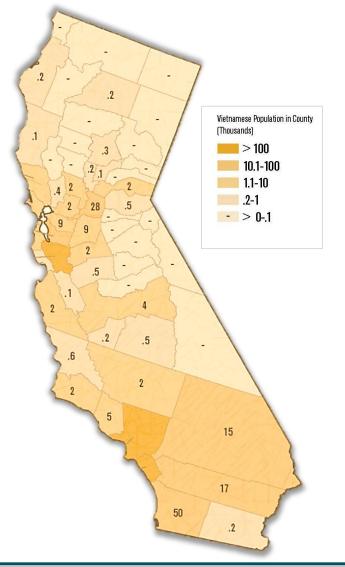
Members were recruited in several ways. Ethnic service managers, CalMHSA program partners and county liaisons were asked to refer community members representing or engaged in outreach to the Vietnamese community. In addition, organizations serving this population were contacted directly and provided with a workgroup recruitment flyer.

Based on 2010 Census data, among the 10 counties with highest numbers of Vietnamese residents in California are Orange County, Santa Clara County, Los Angeles County and San Diego County. **Figure 1** provides an overview of the population concentration (*based on Census Data 2010*) throughout California.

Figure 1.

Vietnamese Population in California

Source: U.S. Census Bureau, Census 2010, 2000; National Historic Geographic Information System, 1990, 1980 wwww.sccgov.org



According to 2010 Census data, the ten counties with the highest numbers of Vietnamese residents in California are:

- Orange County (183,766)
- Santa Clara County (125,695)
- Los Angeles County (87,468)
- San Diego County (44, 202)
- Alameda County (30,533)
- Sacramento County (25,030)
- Riverside County (14,623)
- San Francisco County (12,871)
- San Bernardino County (12,819)
- San Joaquin County (7,812)

Source: California Department of Finance. Demographic Research Unit. State Census Data Center.

www.dof.ca.gov/research/demographic/state_census _data_center/census_2010/#DP

V. Workgroup Discussions

Workgroup members were asked to contribute an estimated time commitment of 10-15 hours between September 2013 and March 2014; however, several workgroup members continued to stay involved until May 2014. Participation included one-on-one phone calls with campaign team members, conference calls, webinars and participation in periodic discussions on the Your Voice Counts website to provide input and review creative materials and to assist in the development of a distribution plan. All participants received a \$300 stipend for their time (see Appendix B Discussion Posts on Your Voice Counts). Key discussion topics included:

- Discussing cultural perceptions about suicide
- Identifying the person at-risk and the helpers in the Vietnamese community
- Providing feedback on existing materials reaching the Vietnamese community
- Reviewing the language adaptation
- Reviewing poster design drafts and final designs
- Suggestions for a distribution plan

VI. Development of Materials

Two posters in Vietnamese and one bilingual brochure were developed following a collaborative community review and focus group process (see appendix A Posters and Brochure).

Language Adaptation

The Know the Signs campaign team contracted with two Vietnamese community members to take the lead on the language adaptation for the materials. **Viet Tran** is a 31 year-old Vietnamese male living in San Diego since 1996. He is fluent in both English and Vietnamese and currently works for the San Diego Unified School District (SDUSD) as a case worker where he provides support to young adults between the ages of 18-22. He also acts as a Vietnamese translator for the school district during parent and teacher conferences. On the weekend, he volunteers to help manage the only Vietnamese American Scouting Organization in San Diego with over 100 youths. Mr. Tran also worked with a group of Vietnamese community members between the ages of 40-80 years old, specifically parents of youth, who spoke and read Vietnamese and who reviewed and provided feedback on the language adaptation of the posters and brochure. **Lactan Nuygen** is a Vietnamese community activist volunteer providing assistance to Vietnamese refugees for over two decades in Southern California. He is a retired teacher and also worked in the CalWORKS program as a case manager and employment counselor. He is fluent in spoken and written Vietnamese and has been involved in many community outreach activities through his volunteer job as a Vietnamese community activist in many different capacities as coordinator, external vice president and president of the Vietnamese Community of Orange County, Inc. in Southern California.

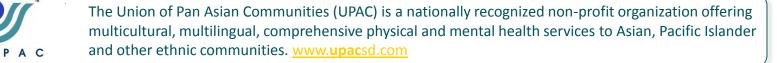
Design

As revealed during workgroup and focus group discussions, suicide is not a topic that is openly discussed in the Vietnamese culture as issues of shame and stigma are still prevalent and the stigma surrounding these topics is especially more prevalent among men and older adults. In the Vietnamese culture, people tend to *overprotect* each other because they do not want to place shame or burden on someone else - the potential helper can see that there is a problem; the person thinking about suicide knows that something is wrong - but both do not want to address it directly and hope that the behaviors and thoughts of suicide will pass. In response, the posters encourage the helper to *"Explore the Hidden Pains"* (Khám Phá Những Nỗi Đau Bí Ẩn) with the poster for older adults and asks *"Are your children thinking about suicide?"* (Con cái của bạn có nghĩ đến việc tự tử không?) on the poster for parents of youth.

The Vietnamese community is very family centered. Generally middle-aged women (30-50) are the glue of the family, supporting both their children and their elderly parents. These women are likely "helpers" for both, their children and their elders. And as mentioned earlier in the report, Asian American women between the ages of 65-84 had the highest rates of suicide compared to women in the same age group from other racial backgrounds. In addition, among all Asian Americans age groups, the age group between 20-24 had the highest rate of suicide compared to all other age groups. As a result, one poster is showing a middle aged woman who is offering support to an older adult female and the other poster is showing a young adult female in the forefront with her family in the background.

Focus Group Testing

Several drafts of the two poster designs were reviewed by workgroup members and then tested during a focus group. The focus group was facilitated by Dixie Galapon from the Union of Pan Asian Communities (UPAC) in San Diego County on Saturday May 31st. A total of eight participants between the ages of 42 and 83 represented men and women, parents, middle aged women and older adults.



Key Discussion Findings

- Although men are also impacted by depression and thoughts of suicide, women are more likely to see information and help as well as recognize warning signs in another person.
- Many participants would hide problems from their family, but instead seek comfort from friends.
- Participants discussed the need to have something in writing, such as a brochure, they could give to someone they are concerned about and that the most important piece of information is a phone number to call that will be answered by someone who speaks Vietnamese (or has access to a translation service).
- When asked about the best way to reach the Vietnamese community with this type of information the following suggestions were made: posters and brochures in community venues and distributed in temples and faith venues, articles and print ads in Vietnamese newspapers and newsletters, community educational workshops, and information featured on Vietnamese TV channels.

Feedback on Materials

- Participants agreed that both posters were visually engaging and culturally appropriate. No changes were suggested.
- Participants correctly stated that one poster was speaking to parents and the other poster to anyone in their community, but particularly to middle aged women. They agreed that the main message in both posters is to pay more attention to another person's behaviors and take action if warning signs are noticed to connect the person to help.
- It was recommended to list the warning signs for suicide on both posters.
- No text changes were recommended to the posters or brochure.
- Two brochure folds were tested. The fold option that featured English and Vietnamese information side by side was favored by the majority of participants.

VII. Distribution

Organizations throughout the state providing services and resources to the Vietnamese community were contacted and provided with a preview of the materials and asked to select how many of the different materials they would like to receive. In addition, a partnership has been established with UPAC to distribute and disseminate these materials in San Diego County.

As part of this partnership, UPAC conducted outreach and approached a wide range of organizations, including community clinics, primary care doctors, pharmacies, community-based organizations, churches and temples and supermarkets about them displaying the materials and disseminating them to the clients, members and congregations. In addition, UPAC planned and facilitated a suicide prevention community workshop on November 13th at the UPAC center in San Diego where a total of 24 participants between the ages of 25 and 60+ represented women, men, parents and young adults. During the workshop participants had an opportunity to ask questions and share insight regarding their view of how the Vietnamese community approaches the topic of suicide. As part of the ongoing dissemination plan, UPAC will aim to include information about suicide prevention in community newsletters and church bulletins.

In addition, the campaign team will reach out to county behavioral health agencies, ethnic service managers and other CBOs for additional distribution of the materials.



Appendix A: Posters, Brochure and Customized materials





- Nói là họ chán sống
- Gây tổn hại cho chính họ
- Họ đang chán năn, bị căng thẳng hay bế tắc
- Mang tài sản của mình cho người khác
- Sắp đặt công việc của họ theo thứ tự
- Họ tự đặt mình vào tình trạng nguy hiểm
- Họ giận dữ hay lo lắng, và hoặc là thay đối tâm trạng đột ngột
- Họ gia tăng số lượng rượu và thuốc hiện đang sử dụng
- Họ thường kiếm cách xa lánh mọi người
- Họ ngủ liên miên hoặc mất ngủ
- Không làm những đều họ thưởng ưa thích
- Nói rằng họ là một gánh nặng cho những người khác

Liên lạc Đường Dây Cứu Sinh Quốc Gia về Ngăn Ngừa Tự Từ số: **1.800.273.8255** Các cố vấn đã được huấn luyện dạng sẵn sàng 24/24 đế hố trợ bạn và có nhân viên nói tiếng Việtnam khi yêu cầu.

suicide is preventable.org

Approximate Translation from Vietnamese to English

Explore the Emotional Pains One question could save a life.

Do you know of anyone who shows the following behaviors:

- Talking about not wanting to live anymore or giving up
- · Looking for methods for self-harm or suicide
- Feeling hopeless, desperate, trapped
- Giving away possessions
- Putting affairs in order
- Engage in reckless behavior
- Anger, anxiety, sudden mood changes
- Increased alcohol and drug use
- Withdrawal
- Changes in sleep
- No longer doing the things he or she usually enjoys
- No sense of purpose, talk about being a burden to others

If you notice any of the signs above it is enough for you to have concern. Please consult with a psychiatrist or call the National Suicide Prevention Lifeline at 1-800-273-8255. Trained counselors are available 24/7 to assist and Vietnamese speakers are available upon request.

Con cái của bạn có nghĩ đến việc tự tử không?

Các dấu hiệu cảnh báo của những nỗi đau khổ tinh thần không phải lúc nào cũng rõ ràng. Nếu bạn cảm thấy được xin hãy lưu ý và mạnh dạn hành động.



- Nói là ho chán sống
- Gây tổn hại cho chính họ
- Họ đang chán nàn, bị căng thẳng hay bế tắc
- Mang tài sản của mình cho người khác
- Sắp đặt công việc của họ theo thứ tự
- Họ tự đặt mình vào tình trạng nguy hiểm
- Họ giận dữ hay lo lắng, và/hoặc là thay đổi tâm trạng đột ngột
- Họ gia tăng số lượng rượu và thuốc hiện đang sử dụng
- Họ thường kiếm cách xa lánh mọi người
- Họ ngủ liên miên hoặc mất ngủ
- Không làm những điều họ thường ưa thích
 Nói rằng họ là một gánh nặng cho những người khác
 - Norrang nộ là một gann nặn

Liên lạc Đường Đây Cứu Sinh Quốc Gia về Ngăn Ngừa Tư Từ số: **1.800.273.8255** Các cố vấn đã được huấn luyện đạng sẵn sàng 24/24 để hổ trợ bạn và có nhân viên nói tiếng Việtnam khi yêu cầu.

suicide is preventable.org

Approximate Translation from Vietnamese to English

Are your children thinking about suicide? The warning signs of emotional pains are not always clear. But if you sense something is wrong, don't hesitate to take action.

Do you know of anyone who shows the following behaviors:

- Talking about not wanting to live anymore or giving up
- Looking for methods for self-harm or suicide
- Feeling hopeless, desperate, trapped
- Giving away possessions
- Putting affairs in order
- Engage in reckless behavior
- Anger, anxiety, sudden mood changes
- Increased alcohol and drug use
- Withdrawal
- Changes in sleep
- No longer doing the things he or she usually enjoys
- No sense of purpose, talk about being a burden to others

If you notice any of the signs above it is enough for you to have concern. Please consult with a psychiatrist or call the National Suicide Prevention Lifeline at 1-800-273-8255. Trained counselors are available 24/7 to assist and Vietnamese speakers are available upon request.

KNOW THE SIGNS

always obvious. But if you sense something is

By recognizing the warning signs, finding the words to start a conversation and reaching out for help, you have the power to make a difference. The power to save a life.

If a friend or family member shows any of the following, especially if they are acting in ways that are not typical, reach out to provide help in time.

- · Talking about · Anger, anxiety, wanting to die sudden mood or suicide changes
- Increased alcohol · Seeking methods and drug use for self-harm or suicide
- · Withdrawal · Feeling hopeless, · Changes in sleep desperate, trapped
- No longer doing · Giving away the things he or
- possessions she usually enjoys · Putting affairs · No sense
- in order of purpose
- Beckless behavior



- · Hãy ở lại an ủi họ và cho biết là ban quan tâm và sẵn sàng để giúp họ.
- · Đảm bảo với họ là không có gì xấu hỗ khi tìm sự giúp đờ.
- · Sau đó hãy tìm đến và tham khảo với bác sĩ sức khoẻ tâm thần, hoặc một người lãnh đạo trong cộng đồng hoặc người thân trong gia đình.

NHỮNG KHỔ ĐAU GIẤU KÍN

Nói về những nỗi đau khổ này, hoặc là tìm kiếm sự giúp đờ không phải là điều dễ dàng. Các dấu hiệu cánh báo của những nỗi đau khổ tinh thần không phải lúc nào cũng rõ ràng. Nếu ban cảm thấy có điều gì đó không được bình thường, xin hãy manh dan hành đông.

Nếu như một người ban hoặc người thân trong gia đình có những biểu hiện sau đây, đặc biệt là khi mà họ thể hiện một cách không bình thường trong việc giúp đờ kịp thời.

 Nói là họ chán sống
 Ho gia tăng số lương rượu và · Gây tổn hại cho thuốc hiện đang chính họ sử dụng Ho đang chán năn, Ho thường kiếm

bị căng thẳng hay bế tắc

REACH OUT

cách xa lánh mọi

Contact the National Suicide Prevention Lifeline at

1.800.273.8255

Trained counselors are available 24/7 to assist and Vietnamese speakers are available upon request.

Visit:

www.suicideispreventable.org for more information and local resources.

Mention the "Are you Express warning signs thinking concern about reassure suicide? and ask to help them.

LISTEN

ASK ABOUT SUBCIDE

FIND THE WORDS

66 I have to ask this question

thinking about ending your life? ##

This is not an easy question to ask, but

when it comes to suicide prevention, no

question is more important. Please don't

hesitate to start the conversation.

Offer support:

START THE

CONVERSETION

vou are

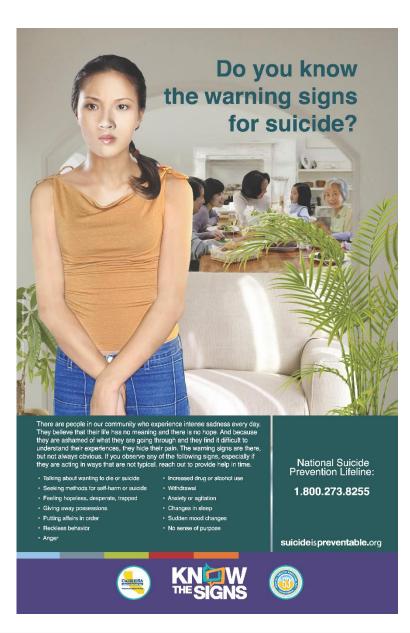
seeing.

The following are some ways you can offer help and provide support:

- · Stay to comfort them and let them know you care and are willing to help.
- · Reassure them that there is no shame in seeking help.
- · Then consult with a doctor, community leader or family member.

Brochure back translation

Vietnamese BROCHURE NHỮNG KHỔ ĐAU GIÂU KÍN Bạn có thể cứu một mạng sống nếu bạn nhận ra các dầu hiệu này, gọi chuyện tim hiểu, và tiếp cận với các cơ quan giúp đờ địa phương đề được hướng dẫn thêm chi tiết.	What the Vietnamese says in English (approximately) THE HIDDEN PAINS You can save a life if you recognize these signs, start a conversation, and engage with resources in your area for detail information.	 Họ giận dữ hay lo lắng, và/hoặc là thay dồi tâm trạng đột ngột. Họ gia tăng số lượng rượu và thuốc hiện đang sử dụng Họ thường kiểm cách xa lánh mọi người Họ ngủ liên mien hoặc mất ngủ Không làm những diều họ thường ua thịch Xói rằng họ là một gánh nặng cho 	 Changes in sleep No longer doing the things he or she usually enjoys No sense of purpose, talk about being a burden to others 	 Tiấy ở lại an úi họ và cho biết là bạn quan tắm và sẵn sảng để giứp họ. 	-Stay with them, let them know that you care and are ready to help.
NHỮNG KHỔ ĐAU GIÂU KÍN Hằng ngày chung quanh chúng ta có những bạn bè, dồng nghiệp, hoặc người thân trong gia đình phải đối điện với nhiều nỗi đau khố. Nói về những nỗi đau khố này, hoặc là tìm kiếm sự giúp đỡ không phải là điều dễ dàng. Các đấu hiệu cảnh báo của những nỗi đau khố tính thần không phải lúc nào cũng rỡ ràng. Nếu bạn cảm thấy có điều gi đó không được bình thường, xin hãy mạnh dạn hành động. Nếu như một người bạn hoặc người thân	THE HIDDEN PAINS Every day, around us there are friends, co-workers, or loved ones in the family facing these emotional pains. Talking about these pains or asking for help is not an easy thing to do. The warning signs of emotional pain are not always clear. If you could sense something is wrong, please don't hesitate to take action. If a friend or family member shows any of the	 LUA LÓI GOI CHUYỆN "Tôi phải hỏi bạn điều này vi tôi quan tâm đến bạn. Tôi muốn biết bạn đang suy nghĩ đến việc kết liễu đời mình phải không?" Có những câu hỏi tế nhị mà chúng ta rất ngại hỏi, Nhưng nếu chúng ta muốn phòng ngữa tự tứ thì không có gì quan trọng họn những câu hỏi này. Xin bạn đừng ngắi. Hày nhắc đến những dấu hiệu cảnh báo bạn 	START A CONVERSATION "I have to ask you this because I care about you. I want to know if you are thinking of ending your life?" There are some question that we may hesitate to ask but if we want to prevent suicide there is nothing more important than these questions. Please don't hesitate. Refer to the warning signs you observed	 Đam bảo với họ là không có gi xấu hỗ khi tìm sự giúp đó. Sau đó hãy tìm đến và tham khảo với bác sĩ sức khoẻ tâm thần, hoặc một người lãnh đạo trong công đồng hoặc người thân trong gia đình. Tim Đến Sự Giúp Đờ Liên lạc Đường Dày Căn Sinh Quốc Gia về Ngăn Ngũa Tự Từ số 1-800-273-8255. Các cố vận đả được huấn luyện đang sẵn sảng 24/24 dễ hổ trợ bạn và có nhân viên nói tiếng Việtnam khi yêu cầu. 	-Assure them that it's not embarrassing to seek help -After that, please consult with a mental health technician, a leader in the community or a close family member. Reach Out For Help Contact the National Suicide Prevention Lifeline at 1- 800-273-8255. Trained counsels are available 24/7 to assist and Vietnamese speakers are available upon request.
 trong gia đình có những biểu hiện sau đây, đặc biệt là khi mà họ thể hiện một cách không bình thường trong việc giúp đờ kịp thời. 1. Nói là họ chán sống 2. Gây tồn hại cho chính họ 3. Họ đang chán nàn, bị căng thẳng hay bế tắc 4. Mang tài sản của mình cho người khác 5. Sắp đặt công việc của họ theo thứ tự 6. Họ tự đặt mình vào tình trạng nguy hiểm 	following, especially if they are acting in ways that are not typical, reach out to provide help in time. 1. Talking about not wanting to live anymore or giving up 2. Looking for methods for self-harm or suicide 3. Feeling hopeless, desperate, trapped 4. Giving away possessions 5. Putting affairs in order 6. Engage in reckless behavior 7. Anger, anxiety, sudden mood changes 8. Increased alcohol and drug use 9. Withdrawal	dang nhận thẩy. Bạn dang suy nghĩ đến việc tự từ phải không? Thể hiện sự quan tâm, trấn an, và để nghị để giúp họ. ĐÊ NGHI GIÚP ĐÕ Dùng lo là bạn don độc trong việc giúp đờ, không đù khả năng, hoặc không biết phải làm gi trong tỉnh huống này. Sau đây là những cách bạn có thể giúp đờ họ:	"Are you thinking of suicide?" Show them that you care, stay calm, and offer to help. OFFER TO HELP/ REACH OUT Don't worry that you're alone to help, not capable, or know what to do in this situation. Following are ways you can help:	Trên trang web www.snicideispreventable org có thêm thông tin về các cơ quan giữp đờ lăn cận trong quận của các bạn ở phần "Đề Nghị Giúp Đờ"	More information for assistance in your county is available on the website <u>www.suicideispreventable.org</u> in the "Reach out" section.



Materials customized materials for San Diego County



Materials customized materials for Los Angles County

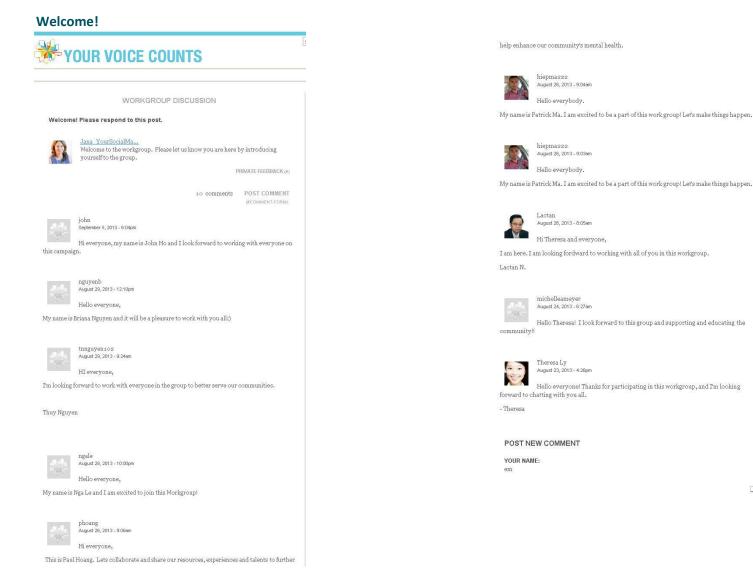
Con cái của ban có nghĩ đến Phá Những Nỗi Đau Bí Ấn viêc tư tử không? u Hỏi Có Thể Cứu Môt Mang Sống. Các dấu hiệu cảnh báo của những nỗi đau khổ tinh thần không phải lúc nào cũng rõ ràng. Nếu bạn cảm thấy được xin hãy lưu ý và mạnh dạn hành động. 183 LƯA LỜI GƠI CHUYÊN **FIND THE WORDS** Tìm Đến Sư Giúp Đỡ **REACH OUT** 44 I have to ask this question ecause I care about you. Are you inking sbout ending your life? tâm đến bạn. Tôi muốn biết bạn đang suy nghĩ đến việc kết liễu đời minh phál không?"" Liên lạc Đường Dây Cứu Sinh Quốc Gia về Ngăn Ngừa Tư Từ số: Contact the Có những cậu hỏi tế nhị mà chúng tạ rất This is not an easy question to ask, but National Suicide Prevention Lifeline at ngai hỏi. Nhưng nếu chúng ta muốn phòng when it comes to suicide prevention, no 1.800.273.8255 1.800.273.8255 ngừa tự từ thì không có gì quan trọng hơn question is more important. Please don't Các cổ vấn đã được huấn luyên đạng sẵn những câu hỏi này. Xin bạn đừng ngần ngại Trained counselors are available 24/7 to besitate to start the conversation sàng 24/24 để hổ trợ bạn và có nhân viên nói assist and Vietnamese speakers are tiếng Việtnam khi vêu cầu. available upon request. Bạn có người thân nào có các hành động, hoặc nói với bạn Liên lạc Đường Dây Cứu Hãy nhắc đến Bạn đang suy Thể hiện sự Visit: START THE ASK ABOUT SU LISTER Nói là họ chán sống Sinh Quốc Gia về Ngăn Trên trang web: những dấu nghĩ đến việc liệu cành bảo tự từ phải quan tâm, trấn an, và www.suicideispreventable.org www.suicideispreventable.org Gây tổn hại cho chính họ hiệu cành bảo Ngừa Tư Từ số: Mention the "Are you Express có thêm thông tin về các cơ quan giúp đờ lân for more information and Họ đang chàn nán, bị căng thẳng hay bế tắc 1.800.273.8255 ban dang không? dè nahi dé warning signs thinking concern, nhân thấy giúp họ. cân trong quận của các bạn ở phần "Đồ Nghị local resources. Mang tài sản của mình cho người khác about Các cố vấn đã được you are reassure Giúp Đở." Sắp đặt công việc của họ theo thứ tự seeing. suicide?" and ask to huấn luyện đang sẵn Họ tự đặt mình vào tình trạng nguy hiểm Họ giận dữ hay lo lắng, và/hoặc là thay đối tâm trạng đột ngột ĐỀ NGHI GIÚP ĐỮ help them. sàng 24/24 để hồ trợ bạn Suicide Prevention Crisis Line: Đừng lo là bạn đơn độc trong việc giúp đở, Họ gia tăng số lượng rượu và thuốc hiện dang sử dụng và có nhân viên nói tiếng 1.877.727.4747 nào có cá không đủ khả năng, hoặc không biết phải Họ thường kiếm cách xa lánh mọi người Việtnam khi yêu cầu. 24 hours a day, 7 days a week làm gi trong tình huống này. Sau đây là những cách bạn có thể giúp đớ họ: Offer support: Họ ngủ liên miên hoặc mất ngủ ı sống Không làm những điều họ thường ưa thích Los Angeles County Department of Montal Health ACCESS Hotline: The following are some ways you can offer Nói rằng họ là một gánh nặng cho những người khác suicide is preventable.org io chính họ · Hãy ở lại an ùi họ và cho biết là bạn help and provide support: 1.800.854.7771 *press 9 for Vietname nàn, bị căng quan tâm và sẵn sàng để giúp họ. 24 hours a day; 7 days a week · Stay to comfort them and let them súa minh cho Đảm bảo với họ là không có gì xấu know you care and are willing to help. việc của họ th hỗ khi tìm sự giúp dờ.) HAG h vào tình trạ Reassure them that there is no shame ıy lo lắng, và/ Sau đó hãy tìm đến và tham khảo với in seeking help. bác sĩ sức khoẻ tâm thần, hoặc một luong ruou · Then consult with a doctor. ny muyny niểm cách xa lá người lãnh đạo trong cộng đồng hoặc) Part community leader or family member. người thân trong gia đình. Họ ngủ liên miên hoặc mất Không làm những điều họ t Nói rằng họ là một gánh nặr suicideispreventable.org

CPWE

Know the Signs >> Find the Words >> Reach Out

CalMHSA

Appendix B: Your Voice Counts discussions



Know the Signs >> Find the Words >> Reach Out

Follow up Discussions—Defining the Helper

YOUR VOICE COUNTS

WORKGROUP DISCUSSION

Follow up Discussions - Defining the Helper



Theresa Ly Thank you for participating in the webinars that have occurred in the last week. Attached is a copy of the powerpoint presentation that was used during the webinar for your reference.

Below is a summary of what we heard from you all during our orientation webinars. Please provide any additional thoughts if there were other points that you wanted to share!

- · Suicide is not a topic that is openly discussed issues of shame and stigma are still prevalent in the culture. It was suggested that it might be more culturally appropriate to ask about behaviors that someone might be observing (you seem sad, you have not been going out much lately) than to ask the person directly about suicide.
- · Respect is necessary when addressing anything pertaining to one's mental health, especially if you are asking an older person about their health.
- · Suicide is perceived differently depending on age and level of acculturation
- . In the Vietnamese culture, people tend to overprotect each other because they don't want to place shame or burden or someone else - the potential helper can see that there is a problem; the person thinking about suicide knows that something is wrong - but both do not want to address it directly and hope that the behaviors and thoughts of suicide will pass.
- However, change in behavior is noticed, and may be "gossiped" about, but addressing the topic head-on is unlikely because of a) shame, or b) lack of basic knowledge about mental health or suicide, and/or c) lack of knowledge about resources
- We suggested that possible <u>helpers</u> within the Vietnamese community would be: • a middle aged/older female, or a respected "matriarch" in the community
- grandmother
- Individuals among a similar generation (ie: Vietnamese youth helping other Vietnamese youth; Vietnamese elders helping other Vietnamese elders)
- · People will oftentimes approach another person (someone older, or someone with more "respect" in the community to express concerns about someone who may be suicidal. For example:
 - A son who sees behavior change in his uncle and is concerned, is more likely to approach his father and express his concerns about his uncle and ask his father to reach out. The son may be more likely to do research on the topic of suicide and local resources, and share that with the father.
 - A church-goer may approach a church leader about their concerns about another church member
- . With regards to imagery, a sense of family was seen as a culturally appropriate image for any outreach material we might create.

Here are some follow-up questions for the group to discuss:

- Who do you think is most likely to act as a "helper" within the community who would have strong standing in the community, and would be trusted by a possible person at risk? Please be as specific as possible.
- . How can someone ask whether another person is suicidal or not? What is a respectful way to do it?
- What type of behavior change should the helper be made aware of as potential warning signs for suicide? What type of behavior change do people generally notice but oftentimes dismiss as anything "serious"?

Start the conversation below, and remember to continue to come back to this workgroup to see what your fellow workgroup participants have suggested, and continue the dialogue!

PRIVATE FEEDBACK (#)

Attachment: Vietnamese Orientation_9-10-13.pdf (http://www.vourvoicecounts.org/sites/default/files/topics/Vietnamese Orientation 9-10-13.0df)

> 7 comments POST COMMENT (#COMMENT-FORM)



Hi everyone.

Great comments so far. It sounds like we're gravitating more towards reaching out to a broader sector of the community to encourage them to act as helpers to the people they care about, versus thinking about a single person who is likely to be the primary gatekeeper and helper within a small community.

I also like how the approach of encouraging the helper to pick up on behavioral changes, and have them focus on offering help instead of directly asking someone if they are thinking about suicide. This type of language will be considered when we create our outreach materials.

Keep the comments rolling in - what type of behavior changes do you think people would be most likely to pick up on? What other phrases would the Vietnamese community state as a way to express concern or offr help?



hiepma222 October 2, 2013 - 8:11am

I think Helper is anyone who cares enough to go out of their way to assist their loved one, whether that person is a spouse, parent, friend or even neighbor. They don't need to already possess exceptional knowledge about suicide because that what we are trying to create for them: a knowledge base that they can access.

I wouldn't think that helper would be comfortable asking someone if they were suicidal or not, but they rather would pay attention closely to that person once they sense something is off. In the scenario in which the person is in desperate situation, then a respectful way to ask would be: Can I help you with anything? Do you need anything? Letting that person know that the helper is there and eager to help.

Signs for suicide can be anything that is abnormal: from sudden change of mood (from very happy to sad or very sad to extreme static- some people have a sense of relief right before they commit suicide).



Lactan September 30, 2013 - 12:56am

I think "helper" could be any one who are familiar or trained to know all the "warning signs" or abnormal behavior that could lead to suicide action.

The most and potential "helper" could be any one who has closed relationship with the person at risk of suicide. Therefore we need to reach out the community as much as possible, to educate them so that they are familiar with this issue and know how to take action when discovering the warning signs of suicide.

Therefore, we need to organize regularly enough reach out activities to educate almost everybody so that they can take action fast an properly to prevent any attempt to commit suicide.

Lactan N



ngale September 29, 2013 - 9:53pm

I think that the "helper" should be someone who is trusted and respected by the community members. Workers at (Vietnamese) community based organizations, community centers, health centers, or temples/churches are both professionals that can provide the person with necessary resources or referrals as well as concerned community members who have the cultural understanding and comparison to help.

It is important to have a deeper conversation about different aspects of the person's life, to get a better understanding of the state they are in. Honesty is best, so after asking the person if they are suicidal, provide them with resources they can use and discuss who can be called as a support system.

I agree that we do need to ask an expert on the warming signs for suicide. Warming signs can be any changes to behavior, whether the person is completely isolating themselves from family and friends, or changing their previous attitude because they have it planned out already.



September 25, 2013 - 3:23pm

Hi everyone,

Theresa Ly

Thank you to Briana and Lactan for their comments so far - please continue this conversation, and for those of you who haven't joined in, please leave your remarks and provide input on other people's feedback!

Also, when we're talling about a "helper", remember that we're trying to reach the community, and not necessarily physicians, who would be already well aware of issues pertaining to suciide. So, in your opinion, who is the <u>community</u> helper?

Thanks!

Theresa



Thank you for posting the summary of the last discussion. I agree that suicide is not discussed widely and openly in the Vietnamese American community.

In my opinion suicide, our culture and religions (Catholic, Budhism, Caodism, Tao...) don't teach or allow people to commit to suicide. We did not see a lot of suicide cases in the Viet community.

Vietnamese now may be more open than previously. They will talk and talk more in their small group about this issue if a suicide case just happened.

I agree we should to find a doctor or a Psychiasist who are working in this field or mental health services to learn more about all factors reletated to suicide. I did have a chance to talk to Dr. Dong Xuyen who is specializing in Mental Health about this issue last week.



nguyenb September 22, 2013 - 10.53am

I think that a person who knows a lot about suicide in general and how to treat it
would most likely act as a helper within the community.

- I think that the best way would be to go see a doctor or a person with full knowledge on suicide and tell them about the person's behavior.
- Depression definitely should be a potential warning sign for suicide. I think lack of appetite is
 what people would generally notice but oftentimes would dismiss as something serious.

Please provide your thoughts on this poster



WORKGROUP DISCUSSION

Please provide your thoughts on this poster



<u>Theresa Ly</u> Thank you for the rich discussion so far. Here's a quick summary of our conversation at this point and some new things for you to review

From our first webinar conversation, it seemed that potential helpers could be a
respected matriarchal figure (middle/older-aged female or grandmother) or someone of a
similar age compared to the at-risk person. In the subsequent workgroup discussions on
Your Voice Count, there was no further identification of who one 'helper' would be - it
seemed like helpers would be anyone who would care enough for someone else to act as a
helper (spouse, parent, friend, trust community member, church/temple community
etc...).

 There were some clear warning signs that were suggested, such as a change of mood and loss of appette – these are things that helpers will pick up on, and our outreach materials should encourage them to take those signs seriously.

Now let's put these thoughts into our next step.

Please take a look at the attached Poster that was developed for a mental health and suicide prevention program in San Diego County. It reaches helpers within the Vietnamese community.

The translation for the poster is as follows:

Are you worried about the changes in health conditions or the mood changes of any of your family members? If you notice a friend or family member feeling anxicus or worried or experiencing things such as headaches, loss of appetite, gaining or losing weight, trouble sleeping or concentrating, they can benefit from visiting local resources. Feelings and symptoms like this are very common and help is available.

Consider these questions:

- What do you think is the most appropriate way to illustrate a suicide prevention message through an illustration (like the poster) or a photo?
- What do you think about the language on the poster? What kind of changes could we make to reflect more suicide prevention-oriented language?

PRIVATE FEEDBACK (#)

Attachment:

🕢 San Diego Vietnamese Poster (http://www.yourvoicecounts.org/sites/default/files/topics/Illustration Poster Two.pdf)

16 comments POST COMMENT (#COMMENT-FORM)



hiepma222 October 17, 2013 - 4:34pm

Hi everyone,

I like the illustration poster. However, there is much improvement that can be done for the San Diego poster. The language is not quite correct [I will never say something like that). Is it possible for someone who is in charge of typing/translating that poster to give me a call? It would be

easier to explain my perspective over the phone than to type on here. Plus I don't have the special program to type Vietnamese.



Lactan

Jana_YourSocialMa... October 17, 2013 - 7:31pm

This was developed about five years ago and the language was provided by two Vietnamese workgroup participants and then reviewed by a Vietnamese language services. But I would not focus on this text as much, since we will develop our own text and you would have a chance to provide feedback directly to the person who will do that for us for our project. Does that make sense?



Hi Jana, Theresa and every body,

October 17, 2013 - 2:37pm

I want to make sure one more time that I don't misunderstand: the message of the illustration is to attract the potentional helper so that he/she look at the image of a person or a number of persons (young, old, male, female, different careers...) can determine a suppet case of suicide can take place, then this helper must take some kind of actions to help the person at risk not to commit suicide or seek help to stay away from the thoughts and actions of suicide or not willing to live, or willing to die...

With this thoughts in my mind, in my opinion we have to design an illustration with two goals:

1.- Since in the Vietmasse American community, due to culture, people usually hide their feeling or keep for themselves. They may not speak out. They may isolate themselves. And, the helper can be any one close or not close to the person a trisk.

But the helper need to know or learn all the indications that a person at risk (the person in illustration) could lead to a suicidal action so that he/she can take action to prevent the suicde or help that person stay away from suicidal thinkings.

2. If the illustration of persons with facial aspects are not good enough to help the helper identifying the potential suicidal case, we need to reinforce the illustration by the language wording that could help the helper paying attention the persons at risk around.

With these thoughts, I am having trouble to interpret or understand the illustration both the previous and the second ones on how the image of a man or an old woman with facial indications (sad, hopeless, and worry enough that they don't want to live any more.

In these illustrations, I only see the man or an old lady with a sad face. With these sad faces I don/t think or believe a suicidal case can take place scon or these persons can take action to end their lives.

Besides the problem with the illustration mentioned above, the Vietnamese wording and language on these two illustrations also are not good enough to attract a helper to pay a ttention on a potential suicide and take action to prevent suicde. If the wording of the illustration does not mention about *idea of suicide or willing to die, or not willing to live*, people will normally just think about a family with problem not serious as a suicidal one.

Looking at the faces of these people I have a hard time to think or believe that they are in very sad or hopeless situation that could lead to a suiciding action. I am a fraid that a helper can look at these images and figure out a suicide could take place soon so that he/she should take action right away.

I hope that my thoughts will also reflect other members'.

From my minds and my deep thoughts.

October 15, 2013 - 12:36pm

I like the portrayal of the attached poster. One thing that I want to mention though is that instead of the father being suicidal and staying away from his family,

it can be the son instead. That way, younger audiences can relate to it. I think we can create a poster similiar to this one or one that targets all audiences. An illustration is the best way to get the message around.



Jana_YourSocialMa... October 16, 2013 - 6:45pm

Thank you. I also just posted a second poster sample. Do you generally think that illustrations are a good way to reach the Vietnamese community?



phoang October 14, 2013 - 11:29am

Sometimes, there are also people who are suicidal but do not have a "sad" face when they are in front of their family. Vietnamese/ Asian are good at putting up a front to hide their true emotion/ thoughts.

That being said, I do like the current poster image. One thing I may suggest based on what I we said above is that maybe, the suicidal person can be in a "happy' normal" family environment, possibly looking "normal/happy" but with bubble above his head representing his true thoughts stating something about "feeling hopeless, helpless, and/or meaningless...It's better to not live anymore", just an example and my 2 cents to stimulate our discussion.

Have a happy Monday!



Jana_YourSocialMa... October 16, 2013 - 6:46pm

Thank you for these thoughts. I have also just attached a second poster if you want to take a look. Do you generally think that illustrations are a good way to reach the Vietnamese community?



michelleameyer October 14, 2013 - 9:11am

I do like the images protrayed as they touch on the different members of the family that may be involved. We may want to create a few different posters to attracht different audiences. I can see this specific poster having more meaning with an older audience, but we may also want to grab the attention of the younger groups.

when are we going to try to speak (as a group) again.



Jana_YourSocialMa... October 14, 2013 - 10:27am

Thank you for your thoughts. We will likely only be able to create one poster or one type of outreach materials, so we will have to think as a group what we want to focus on or what type of image or illustration will work the best to reach across different generations. For now, we will continue our dialog here on the forum but will let you know as soon as the next group discussion is scheduled.

nguyenb



ngale October 11, 2013 - 10:33am

I think the most appropriate way to illustrate a suicide prevention message is through a photo. While I understand why an illustration was used in the poster, I want to make a step towards addressing the stigma that Vietnamese people have towards suicide and mental health. I think showing Vietnamese people on the poster helps remove the shame of having suicidal thoughts or suffering from a mental illness. We want more people to step up and have the courage to seek help, or to give help and resources to someone that could benefit from it. In my opinion, having a photo of a real person or family on the poster that the helper or consumer can relate to would like to see the person that is thinking about suicide on the poster with family, friends, and other resources behind them to reinforce the idea that they do have support. Putting the resources and support as words on the poster is good, but having the visual image of support behind them would help.

The message on the poster sounds like it is targeting the consumer and not the helper. I think the message that Lactan wrote is great! I also agree that more symptoms should be listed so that the helper will know what to look for.



Jana_YourSocialMa... October 16, 2013 - 6:48pm

I just realized we posted the wrong poster. I just posted the one with the language reaching the "helper".



Jana_YourSocialMa... October 14, 2013 - 10:24am

Thank you! We have had some feedback that illustrations are more commonly used than photos in Vietnamese culture, but from your feedback it seems that this is not the case? One of the advantages of an illustration is that you can draw exactly what you would like to see (how the people lock, their facial expressions, the setting etc). We can not do a photo shoct, so for a photo we would be limited to the photos that are available for purchase and they are quite limited unfortunately.



Here is my inputs. 1.- The most appropriate way to illustrate a suicide prevention message – through an illustration (like the poster) or a photo In my opinion, either the poster or photo is OK, but the important thing is the poster or photo has to show the persons (couple, and their child) with the clothing and appearance of the face looked really bad and sad so that he/she can commit suicide. In adition the poster should have some thing like bubbles coming from their heads with image of a suicde action such as taking pills, hanging up head or jumping from a tall building. 2.- The language on the poster? What kind of changes could we make to reflect more suicide prevention-oriented language? The English language version is OK, but may be not enough to mention all major indications of a commit suicide action so that the helper can easily recognize or find out from the person at risk. The English version should add a few phrases like: feeling hopeless, feeling really sad and useless, don't want live. Besides that, the Vietnamese version is not quite good. The first sentence is totally a make up not proper in thhis case. The content of the message does not motivate the helper to take action to prevent suicide. Here is my Vietnamese trial version for this poster: Ban có thầy ai muốn giấu kín điều gì trong lòng không? Bạn có lo lắng về sự thay đỗi tình trạng sức khỏe hay sự thay đỗi trong động thái của bất cứ thành viên nào trong gia đình của bạn. Nếu bạn nhận thấy một người bạn hay một thành viên trong gia đình cảm thấy bốn chồn hay lo lắng, nhức đầu, không muốn ăn, lên cân hay xuống cân, mất ngũ hay không tập trung chú ý được, họ có thể nhận được được sự giúp đỡ từ chúng tôi. Những cảm xúc và dấu hiệu trên rất thông thường và chúng tôi luôn luôn trợ giúp.

Jana_YourSocialMa... October 14, 2013 - 10:20am Hi

Thank you for your thoughts. In addition to the thoughts Theress offered below, I wanted to clarify that there will only be a Vietnamese version, not an English version. Could you provide an approximate translation of your trial text for the Vietnamese poster for us?



Theresa Ly October 11, 2013 - 11:22am Hi Lactan,

Thanks for your thoughts! One thing that I have failed to mention so far in our discussion is that the Know the Signs campaign promotes a more positive spin on messaging, following guidelines provided by the Suicide Prevention Resource Center http://www.sprc.org/sites/sprc.org/files/library/SafeMessagingrevised.pdf

As much as possible, we'd like to stay away from imagery and language that shows and discusses methods of suicide, and would like to support a more positive spin on suicide prevention - focusing on warning signs, and ways in which helpers can express their concern and offering of help is a really great way to go.

Keep the thoughts coming! Thanks!



October 14, 2013 - 11:56am Hi Theresa,

Thank you for your response about my input.

In my opinion, my input I don't mean to show the methods of suicide. I mean we have to show some kind of indications or actions that the person at risk could take to commit suicide.

Our problem is to create or select what are appropriate warning signs so that the helpers can easily regconize and take any action to help the person at risk to prevent the suicide.

We have three problems here:

1.- First, we must have an official and original English language version of the poster. This poster language also needs to carry out the message with the content meaningful to the Vietnamese American people and create the attention to them.

2.- We must have an illustration or a photo with a person with appropriate appearance and surrounding people or situation that could help the helper identifying the person at risk. We may have a problem to find a person who can accept to be in the photo that meets our requirement. I am afraid that we may have a hard time to find the star for this picture. We may have to pay for this photo person.

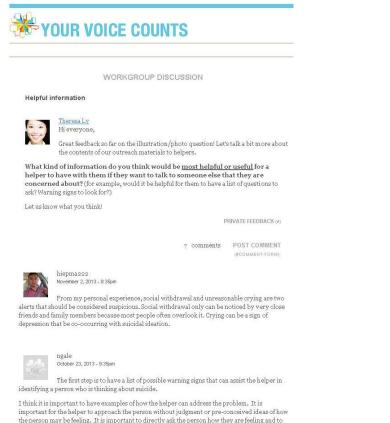
3.- The Vietnamese language version of the poster also needs to be meaningful and understandable to all Vietnamese audiences such as children, young, middle age, old, seniors, male, female, careers, across the spectrum of all classes and ages of the Vietnamese community people.

To make and select the poster that meets all these requirements is a challenging job.

POST NEW COMMENT

YOUR NAME: em

Helpful information



the person may be feeling. It is important to directly ask the person how they are feeling and to acknowledge that the person's feelings are real. It is important to be understanding but not downplay the person's emotions.

Something else that is important is to have the helper recognize that stigma does exist for the community, and to address the issue of stigma appropriately when talking to the person. A statement letting the person know that there is no shame in having a mental illness, depression, or anything else they may be experiencing.

It is important to end with encouraging the person to seek help and to provide the person with options. Allow the person to choose what they want to do next. The options could include talking and discussing next steps with a mental health clinician, community leader, or concerned family members and friends that will provide them with the necessary support that they need. People have suicidal thoughts for many reasons, and the helper must take a look into all the possible parts of the person's life that could be pushing them to feel that way. This is why it is key for the helper to have the trust of the person.



October 22, 2013 - 8:02am

I think warning signs are the best information for someone to have if they want to help anyone at all. They are proof that something is wrong and make it easier for them to talk to someone else about the person in crisis.



October 19, 2013 - 12:05pm Hello Theresa,

I think on the illustration, we should have as much as possible all the important warmings as well as a list of questions to guide or lead the helper to take some kind of action to identify a potential case of suicide. These questions could be phrased in different form to help the helper to look into the potential case of suicide and take any action to verify the case and take appropriate action quickly.



October 19, 2013 - 11:52am

I agree with Hiep's point about to talk to someone prior to make initial contact with potential suicidal person. The helper should be very careful to make appropriate move to avoid problem and be helpful effectively,



Theresa Ly October 18, 2013 - 10:41am

Thanks for the input, and we can consider some wording that encourages a potential helper to talk to a a professional (maybe a crisis hotline that also serves helpers, or a mental health organization) prior to reaching out to a person they are concerned about.

Warning signs certainly are subjective, and there isn't a "one size fits all" framework that will clearly identify who is having thoughts of suicide and who isn't. However, there are a number of things that people can be aware of that may "alert" a helper that someone else may be experiencing some kind of emotional or mental stress or difficulty. See the Know the Signs Campaign website (www.suicideispreventable.org) section on warning signs, many of which are vetted by the the Substance Abuse and Mental Health Services Administration (SAMHSA) and the National Suicide Prevention Lifeline.

Our goal is to try to get people more in tune with changes in behavior/language/attitude in their loved ones, and encourage them to be attentive and supportive to a friend who is exhibiting warning signs. Given that, what do you think are some potential warning signs that may be more specific to the Vietnamese community as a whole? For example, in some of our other workgroups, some people have said that there are certain phrases like "You would be better off if I was dead", or more behavioral indicators, like missing school or halting church attendence, that would indicate that someone was experiencing distress. What do you guys think?



October 17, 2013 - 4:29pm

I think warning signs are very subjective. It's different for everyone. However, I think it would be helpful for the helper to have someone to talk to prior to make the initial contact with the potential suicidal person. A wrong move may have catastrophic effect on that person.

Ready to create our own illustration!



WORKGROUP DISCUSSION

Ready to create our own illustration!



Sorry for the delay in getting another discussion thread going! November has been a rather busy month for Jana and I.

Based on the discussions we have had so far this seems to be the recommendation for the illustration. To create this illustration, we need to provide some guidance to the artist - the more specific direction we can provide, the better! From the workgroup discussions so far we had identified a middle aged female as both a person at risk and a helper for both her children and her elders. Given that, here are some initial parameters for the illustration.

Person/people in the illustration (no more than 3 or 4)

A respected "matriarch" in the community (middle aged/older female), surrounded by others (who could be family or close friends). Who should these others be? Maybe a teen/young adult, an older adult man, and a maybe another middle aged female?

Setting

What is the setting? What are they doing? How are they interacting? Many of you have commented on the importance of church members or elders as potential helpers as well. Is there a way to acknowledge or hint at this in the illustration?

Let us know what you think!

PRIVATE FEEDBACK (#)

4 comments POST COMMENT (#COMMENT-FORM)

michelleameyer December 17, 2013 - 6:57am

I think we also want to consider an image of resources outside the family, friends, school, a supportive teacher. I do not think those images have to be as clear, but may be helpful to see them (less focused) in the background, creating the idea that there are others (outside the family) that may be of help. I know we want to send the message that individuals should reach out to caregivers, but given everyone's comments about "keeping it in", we want to encourge that as a viable option. Also I think we may want to think about using an image similar to the the Ecological Model that encompasses everyone's ideas.



hiepma222 December 15, 2013 - 10:20pm

I think we should be aware of the fact that beside Christianity, a big portion of Vietnamese population choose Buddhism as their faith. Temple can be another potential setting since it's the place where people (especially older folks) go to clear their head and get in touch with themselves. Research have shown that helpers (as in caretakers) are usually females in early to mid 500 (here would probably be a grandma of some sort). Beside grandma, daughters/ daughters in law will be another source of help to the person in crisis. It has been the norm for youngsters (in my experience) to come to grandma or mom for help. Being a male in this culture means I have to be tough and pull myself up by the bootstraps. Emotions are not often encouraged to be expressed. I would never walk up to my father to talk about touchy feely subjects. I would rather go to mom or grandma. Soft think the illustration should incorporate such images.



Lactan December 3, 2013 - 6:39am

In my opinion, the people in the illustration should be around 5, at least is 4.

I agree with NguyenB about the setting and the interacting, but the illustration must show the

"potential" helpers could be any one including the matriarch and other sitting around her.

The illustration must show a person at risk sitting from a distant or isolated place with a sad or desparested look. The matriarch should show a concern face, with eye looking into the direction of a person at risk.



December 2, 2013 - 10:20am

I think the people surrounding the matriarch should be a young child, a teen/young adult, and a middle aged or older man. They can all be sitting together at a table and talking at a family reunion, which takes place outside. They all are happy except the matriarch, who can look like she is distant from them. That's how I think the illustration can/should look.

POST NEW COMMENT

YOUR NAME: em

Disable rich-text (Javascript:void(0);)

Please register for March 4th webinar



WORKGROUP DISCUSSION

Please register for March 4th webinar

Jana YourSocialMa...

Dear Workgroup members,

Our next webinar is scheduled for Tuesday, March 4th from 11am to 12pm. Please register here:

https://attendee.gotowebinar.com/register/4528844771069217794 (https://attendee.gotowebinar.com/register/4528844771069217794)

During the webinar we will review the text for a draft outrach brochure in Vietnamese and several drafts of a poster.

PRIVATE FEEDBACK (#)

o comments POST COMMENT (#COMMENT-FORM)

POST NEW COMMENT

YOUR NAME: em

Information for March 4th webinar



WORKGROUP DISCUSSION

Information for March 4th Webinar



Jana YourSocialMa... Dear Workgroup Members,

Attached please find the slides we are going to review during the webinar today. For those of you who can't make it, we will post results from the discussion within a few days!

PRIVATE FEEDBACK (#)

Attachment: Vietnamese Workgroup Webinar 03.04.14.pdf (http://www.yourvoicecounts.org/sites/default/files/topics/Vietnamese_Workgroup_Webinar_03.04.14.pdf)

> o comments POST COMMENT (#COMMENT-FORM)

POST NEW COMMENT

YOUR NAME: em

Update and please review two poster designs and brochure language

YOUR VOICE COUNTS

WORKGROUP DISCUSSION

Update and please review two poster designs and brochure language



<u>Jana YourSocialMa...</u> (Click on images to view them or see pdf files below)

(http://www.yourvoicecounts.org/sites/default/files/topic-images/Poster for Older Adults.jpg



(http://www.yourvoicecounts.org/sites/default/files/topic-images/Poster_Forparents.jpg)



Dear Workgroup Members,

I wanted to give you an update on the development of our materials. We have been busy! Since our last discussion these activities took place:

 We contacted organizations that work with or provide services to the Vietnamese community to learn about what age groups they serve and the types of materials most useful to them. A summary of the interviews is provided below.

 As a result of the interviews, we decided to create two posters. One reaching parents, as helpers of youth, and one reaching helpers of older adults. The posters will be in Vietnamese and the brochnew will be blingual.

 Viet Tran worked with Vietnamese community members and Lactan Nuygen (one of our workgroup members) to finalize the brochure text in Vietnamese. A big thank you to both of them.

Action Items:

- Review the two posters and offer any thoughts before they are finalized. At this point we are not creating additional designs, just "twoaling" the two posters that have been created. You can view the posters by clicking on the image above or by viewing the pdf files provided below.
- Review the suggested brochure language. Note that the English is a "back translation" to give those of us who don't read Vietnamese an idea of what the Vietnamese portion says.
 Suggest organizations that we should contact to receive the materials.
- Daggest organizations and no bioand contact to receive the mater

Summary of Interviews:

Approximately 35 organizations that currently work with or provide services to the Vietnamese community in 10 counties including: Alameda, Orange, Los Angeles, San Francisco, San Bernardino, Riverside, Contra Costa, San Joaquin, San Diego, Santa Clara and Sacramento were contacted in March 2014 and asked to provide input on culturally relevant outreach strategies for the dissemination of suicide prevention campaign materials. A total of 13 organizations participated in the telephone questionnaire. Staff from these organizations provided insight regarding the language, target population and usefulness of materials.

What demographic do you mostly work with (age/gender)?

- Little Saigon Economic, Social and Cultural Services Center (Vietnamese Community of Orange County): adults/young adults
- Orange County Asian and Pacific Islander Community Alliance (Orange County): TAY and parents
- 3. Horizon Cross Cultural Center (Orange County): Adults/older adults
- 4. Asian Health Services (Alameda): Adults/youth
- 5. Vietnamese American Community Center of the East Bay (Alameda): Seniors
- 6. Community Health for Asian Americans (Alameda): Youth to Seniors
- 7. North East Medical Services (San Francisco): General public
- 8. Vietnamese Youth Development Center (San Francisco): Youth
- Transcultural Clinic (T.C.C) (San Joaquin): primarily adults 18-59, but also some older adults
- 10. Asian Americans for Community Involvement (Santa Clara): Ages 5-90+
- 11. Foothill Community Health Center (Santa Clara): Youth/Parents/General Public
- 12. Special Services for Groups (SSG) AP Recovery Unit (Los Angeles): Adults/Older adults
- 13. Asian Pacific Family Center in Rosemead (Los Angeles): Youth/General Public

Do you have existing suicide prevention materials in Vietnamese?

Three organizations have materials (brochures) provided by Didi Hirsch, 8 organizations do not have any kind of suicide prevention materials, one organization has materials that "hint" at depression/suicide and one organization could not provide an answer.

Is there a need for suicide prevention materials in Vietnamese and would your organization be interested in receiving any?

All organizations answered 'yes'.

Please mark which materials would be most useful to you (rank #1, #2)

-----Parents of Vietnamese youth with information about how to recognize the warning signs

Six organizations said Parents and two said Both: Parents and Older adults

-----Information for middle aged/older adult Vietnamese speaking individuals about how to recognize the warning signs

Two organizations said older adults and two said older adults and youth

----One organization did not provide a response

What language should the materials be in?

Eight organizations said 'both' languages in a bilingual format, two organizations said Vietnamese only for older adults and three organizations did not provide a response.

Is there another organization we can contact?

VIVO (Partner with Transcultural Clinic (T.C.C.)), Pacific Clinics, Berry essa Resource Center, Horizon

Outside of your organization is there another way to distribute these materials to community members?

One-on-one counseling, resource centers, community events

Additional insight:

A couple of individuals mentioned two key components regarding the topic of suicide prevention for the Vietnamese community: acculturation and stigma. For Vietnamese community members who are middle to older age there is a need to provide the materials in both languages as some may not have strong English language skills and may feel more comfortable reading information in their primary language. However, there may also be individuals in the mid-aged group who feel comfortable with their English skills and may prefer to have information in English. With regards to stigma, it seems that the actual use of the word suicide is not widely used because it inferse oretain negative attributes in a stigmating view to a person at risk. Therefore, it is often the case that the message is in some way indirectly related to the topic of suicide. Most staff preferred messages reaching the parents of youth who could act as 'helpers' of other middle-aged persons at risk, voth and/or elders. Although many individuals in this age group may speak, read and write English it may be most useful to have the materials in both English and Vietnamese for individuals who may feel more comfortable in their primary language.

Population at-a-glance:

Santa Clara (7%)

Orange (6%)

Alameda (2%)

Sacramento (1.7%)

San Francisco (1.6%)

San Joaquin (1.4%)

San Diego (1.4%)

PRIVATE FEEDBACK (#)

Attachment:

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Poster for Older Adults.pdf.ntto//www.vounoice.counts.org/stez/default/files/taoios/Poster for Older Adults.pdf

5 comments POST COMMENT (#COMMENT-FORM)



michelleameyer April 30, 2014 - 7:50pm

These look great and really capture 2 separte demographic groups very well!



hiepma222 April 30, 2014 - 11:16am

The poster looks great. I may word the sentences differently, but it's very minor. The content is understandable and not offensive in anyway. Great job



Jana_YourSocialMa... April 30, 2014 - 5:59pm

Do you want to provide your suggested changes to the poster?

Thanks,

Jana



phoang April 29, 2014 - 5:20pm

The brochure content looks sound. My apology for not being able to keep up with the group and giving feedback earlier. If this point has already been discussed and decided on then dont mind my comment below. If this point hasn't been brought up for discussion, then my feedback would be to include an image of a male in the brochure as well. As stats indicate, females attempt suicide 4x more than males, but males succeed more often than females. From my experiences as a first responder who provide 5150 evaluation, crisis intervention, stabilization and linkages to resources most of my completed suicides are males. This stats seems true also within my experiences with the API/Vietnamese population.



Jana_YourSocialMa... April 30, 2014 - 5:57pm

Thank you for your insights. At this point we are not able to make additional changes to the direction and focus of the two posters, but something to consider in the future.

POST NEW COMMENT

YOUR NAME:

em

Do you want to receive outreach materials?



WORKGROUP DISCUSSION

Do you want to receive outreach materials?

Jana YourSocialMa... Hello workgroup members!

We have identified and contacted several organizations throughout the state that currently work with or provide services to the Vietnamese community to let them how we are able to share our campaign materials with them. At this time we would like to ask you to please look at the list below and suggest any organizations we may have missed and that would appreciate having our posters and brochures. Also, please let us know how many materials you would like to receive (posters and brochures) and provide an address where we can send them. Attached are the two posters we recently developed.

Thank you.

Orange County

Little Saigon Economic, Social and Cultural Services Center (Vietnamese Community of Orange County, Inc.)

Asian Health Center

Nhan Hoa Comprehensive Care Clinic

Orange County Asian and Pacific Islander Community Alliance

Horizon Cross Cultural Center

Alameda County

Asian Health Services

Asian Community Mental Health

Vietnamese American Community Center of the East Bay

Community Health for Asian Americans

Sacramento County

Asian Pacific Community Counseling

Sacramento Chinese Community Center

Southeast Asian Assistance Center

San Diego

Vietnamese American Center

Asian Pacific Health Foundation

City Heights Family Health Center

Vietnamese Federation of San Diego

Union of Pan Asian Communities

San Francisco

Richmond-Area Multi-Services, Inc.

North East Medical Services

Berryessa Resource Center

Vietnamese Youth Development Center

Asian & Pacific Islander Wellness Center

San Joaquin

Transcultural Clinic (T.C.C.)

Vietnamese Voluntary Foundation, Inc. (VIVO)

Santa Clara

Asian Americans for Community Involvement

Foothill Community Health Center

San Jose Clinic (Northeast Medical Services)

Valley Connection (Health Center Gilroy)

San Bernardino

Asian American Resource Center (SB & Riverside)

San Bernardino Dept. of Behavioral Health: Access Unit

Dept of Behavioral Health Public Information

Riverside

Riverside County Culturally Competent Liaison

Los Angeles

Special Services for Groups (SSG) AP Recovery Unit

Asian Pacific Family Center in Rose mead

PRIVATE FEEDBACK (#)

Attachment: a KTS. V. Poster for Older Adults. pdf.http://www.vouncicecounts.osp/stev/default/hitestopics/KTS. V. Poster for Closer Adults.ost aments.ost Sentiss.ost Sentiss.ost

> o comments POST COMMENT (ICOMMENT FORM)

POST NEW COMMENT

YOUR NAME:

Would you like to receive materials?



WORKGROUP DISCUSSION

Would you like to receive materials?



Jana YourSocialMa... Hello workgroup members!

We would like to share that we recently partnered with the Union of Pan Asian Communities (UPAC) in San Diego to host a focus group this Saturday, May 21, to test the posters and brochure with Vietnamese community members and get their feedback on the language, design and overall look of the materials. The materials will be available for distribution in June. We would also like to thank everyone for their input and feedback throughout this process and would also like to encourage everyone to share information about the campaign with any organizations throughout the state who work directly or indirectly with the Vietnamese community and who could be a part of community outreach efforts and help distribute these campaign materials.

If your (or other) organization would like to receive materials, please provide:

-Name

-Address

-Contact person

-Suggested quantity of posters and brochures

Thank you!

PRIVATE FEEDBACK (#)

Attachment: Attachment: KTS_Poster_Older_Adults_vietnamese.pdf Mts_Unewsveuroisecounts.orabiteddefaultificationismKTS_Poster_Older_Adults_Vietnamese.pdf Mts_Unewsveuroisecounts.orabiteddefaultificationismKTS_Poster_Parents_Vietnamese.pdf Mts_Unewsveuroisecounts.orabiteddefaultificationismKTS_Poster_Parents_Vietnamese.pdf Mts_Unewsveuroisecounts.orabiteddefaultificationismKTS_Birchure_Billingual_Vietnamese.pdf Mts_Unewsveuroisecounts.orabiteddefaultificationismKTS_Birchure_Billingual_Vietnamese.pdf

> o comments POST COMMENT (#COMMENT-FORM)

Appendix C: Workgroup Member Roster

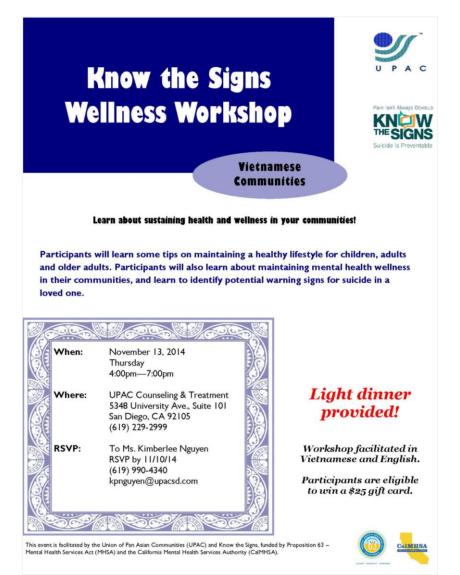
Name	Organization	County	Qualifications
Michelle Meyer	Chicago School of Psychology	Los Angeles	I am a licensed clinical psychologist specializing in treatment/assessment of child and adolescent populations, that, have worked extensively with victims of crime, SED populations, trauma, FASD, academic difficulties, AD/HD, underserved populations, and community psychology. I am very interested in using my knowledge and skills to continue to develop prevention and early intervention programs for children, adolescents, and families of underserved populations.
Paul Hoang	Viet-Care	Orange	I work fulltime with law enforcement, county's healthcare agency and responding to psychiatric emergency calls. I'm the county trainer 5150 certification training course. I founded Viet-Care, a non-profit addressing menta health issues in the Vietnace community. I train law enforcement, community and providers on crisis evaluation and intervention.
Nga Le	Community Health for Asian Americans	Alameda	As a member of the California MHSA Multicultural Coalition and the SDR Consortium, I represent the API community and the Southeast Asian immigrant and refugee community. I am currently the co-coordinator of the Southeast Asian Youth Leaders, a youth group in Richmond. I have conducted outreach and education for API Youth during my time at Berkeley through the API Recruitment and Retention Center. I have also worked closely with the Vietnamese community through the Volunteer Health Interpreters Organization (VHIO) as a Vietnamese interpreter. Mental Health is a sensitive issue especially about the API community. I have learned that culturally competent community based practices are the best way to work with the API immigrant and refugee community. I would like to share my knowledge and skills to outreach to API youth and develop linguistically appropriate materials for the Vietnamese speaking community.
John Ho	Vietnamese American Cancer Foundation & Santa Ana Public Health Clinic	Orange	Through my work as a volunteer for 2 summers at the Vietnamese American Cancer Foundation, I have gained a comprehensive understanding of the disparities, hardships and cultural nuances of the Vietnamese American community. This knowledge also extends to the low literacy latino community, through my experience as a health educator at the Santa Ana Public Health clinic for a summer. As a first general child of Vietnamese immigrants and a current undergraduate, I am highly aware of the challeneges and pressures faced by API youths as they struggle to strike a healthy balance between different cultural values from society and their heritage. I have a vested interest in helping fellow community members overcome their struggles. My personal experience, combined with my experience with relevant communities, will allow me to contribute greatly to this campaign.
Briana Nguyen	(College student)	Placer	I am somewhat fluent in Vietnamese and would like to benefit more by joining
Hiep (Patrick) Ma	Mental Health America	Sacramento	this workgroup. I'm an immigrant who came to the US at age of 17. I have been working with many youths who identified as consumers and family members, this provides me with experience in this subject matter. I also experienced suicide personally (2 attempts) in the past. I'm also a gay man. I speak Vietnamese & English fluently.
Lactan Nuygen	Vietnamese Community of Orange County, Inc.	Orange	I am a Vietnamese community activist to assist Vietnamese refugees for over two decades in Southern California. I am a retired teacher. I also had worked in the CaliWORKS program as a case manager, employment counselor. I am very fluently in speaking and writing Vietnamese. I have been involved in many community outreach activities through my volunteer job as Vietnamese community activist in many different capacity as coordinator, external vice president and president of the Vietnamese American Community in Southern California. I am always concerned and interested in helping Vietnamese American Community to overcome their difficulty in settling and integrating into new society in the United States.

Appendix D: Needs Assessment Interviews

Organization Orange County	Contact Phone Number	Action	In what way does your organization work with the Vietnamese community?	What demographic do you mostly work with (age/gender)?	Do you have existing suicide prevention materials in Vietnamese?	Is there a need for suicide prevention materials in Vietnames and would your organization be interested in receiving any?	Should materials be in Vietnamese, English, or beth?	Rease mark which materials would be most useful to you (rank 81,82) o Farenti O Vietnamese youth which information about how to receptive the most of the second se	Dutside of your organization is there another way to distribute these materials to community members?
Urange County Little Salgon Economic, Social and Cultural Services Center Wethamese Community of Orange County, Inc.)	714.839.4441	T/C	Mental Health and Medical Services, Outreach, Suicide Prevention Program with Didi Hirsch	Adults, Young adults	They translated materials for Didi Hirsch for Suicide Prevention Prevention	yes	n/a	Both	Horizan
Asian Health Center	714.640.3470	Call back on Monday; 03.10.14 left message; 03.10.14 sent email to Manager							
Nhan Hoa Comprehensive Care Clinic	714.898.8888	Call back on Monday; 03.10.14 left second message							
Orange County Asian and Pacific Islander Community Alliance	714.636.9095	т/с	Mental Health programs, Prevention and Early Intervention and Wraparound focused on API community	TAY for both programs, but parents accompany youth	yes, Didi Hirsch materials	yes	n/a	Both	
Social Services Agency in Anaheim	714.480.6612	03.10.14 left message							
Hortson Gross Gultural Center	714-537.0608	τ/ς	Two mental health programs, ESL classes, Senior Activities, Otteenship classes, Social Adjustment-emphasis on domestic wolence, Basic needs for low income, Employment services, Department of Rehaba, and Sdifferent transportation programs. Horizonis very well known in the Vietamese communities and has been providing services since 1975.	Adults, male and female and older adults	no	yes	Both	#1 Older studits #2 Parents	We get invited onto a lot of Vietnamese taik shows to discuss our services. The shows are shown locally and a lot stetewised for large Vietnamese populations in North Co, TX, Canada, and other states.
Alameda County									
Asian Health Services	No active number	T/C	Various topics offered: mental health/wellbeing, housing, youth programs, employment	Adults and youth	no (maybe in youth programs)	yes	Both	Parents	
Asian Community Mental Health	510.869.6015	03.12.14 left message; 03.24.14 left message							
Vietnamese American Community Center of the East Bay	510.891.9999	т/с	Provide services to low-income seniors, Medi-cal, housing, wellness, prevention, ESL	Seniors	During one-one-home visits they provide some basic information on depression, domestic violence and suicide. They also have law enforcement visit the conter to talk about crime in the community. But nothing specific to suicide prevention.	Yes, highly interested in brochures	Vietnamese	Older adults	During one-on-one home visits and at the community group centers
Community Health for Asian Americans	510.835.2777	т/с	This is a non-profit organization that provides outerach and counselling services to clients on a one-on-one basis. Individuals hear about the services offered at forums and group sessions offered at Garden Lake.	Youth to Seniors	по	yes	Both	Youth and Dider Adults	Community outreach is the main way in which this organization recruits community members to partake in services offered.
Sacramento County Asian Pacific Community Counseling	916.383.6783off 916.267.8516cp	03.13.14 T/C and email	Large Vietnamese population		Suicide Prevention Program				
Sacramento Chinese Community Center	916.442.4096x115	03.13.14 left message; 03.14.14 left message							
Southeast Asian Assistance Center	916.421.1036	03.13.14 left message; sent email							
San Diego									
Vietnamese American Center	858.205.7785	03.14.14 left message; 03.17.14 left message; 03.27.14 left message							
Asian Pacific Health Foundation	619.517.3744cp	03.14.14 left message; 03.17.14 left message							
City Heights Family Health Center	619.515.2589	03.14.14 left message; 03.17.14 left message							
Vietnamese Federation of San Diego	no phone number	03.25.14 sent email; 03.27.14 sent email							
Union of Pan Asian Communities	619.229.2999	03.18.14 left message; 03.26.14 called and was referred to translation services							

Organization San Francisco	Contact Phone Number	Action	In what way does your organization work with the Vietnamese community?	What demographic do you mostly work with (ogs/gender)?	De you have existing suicide prevention materials in Vethamese?	It there a need for suicide prevention materials in graphication be interested in receiving any?	Should materials to is Vietnamese, Ergilah, or both?	Nase mark which materials would be most useful to you (rank #1, #2) p. Paynist of Vietnamese youth with information about how to recepte the p. information for middle age/older aukit Vietnamese speaking individuals about how to receptise the warning signs:	Dutside of your organization is there another may to distribute these materials to community members?
	()		Provide medical care to uninsured. Medi-cal						
Richmond-Area Multi-Services, Inc	415.668.5955	03.18.14 sent email	community members						
North East Medical Services	415.391.9686x5905	03.19.14 sent email	Through the local consortium Community Health Partnership – participating in health resource fairs	Data is hard to sort due to demographic being captured as "Asian" so unable to filter for age or gender	no	yes	Both	n/a	Community health partnerships: Berryessa Resource Center
Berryessa Resource Center 3050 Berryessa Rd. San Jose, CA 95132	408.251.6392	03.27.14 research, but no info on community outreach	community center for seniors, classes are on physical activity, wellbeing	n/a	n/a	n/a	n/a	n/s	n/s
viotramese Youth Development, Centor 866 Eddy 36, San Prancisco	415.771.2600	τίς	Mental health services, including prevention services for youth, but parents also involved	youth	50	yes	Noth, definitely Vietnamee for parents who wouldn't feel as confortable with English	For youth, it would be peers,-the states often peers, lettere parents, are the first ones to how if a finding gang through something for distributions of the states of the states of the states where the states of the states are bound to the state visit the control for transitions encode and often find it height to tail about the states the fixed where are bound to the states are the states the fixed where are bound to the states are the states are the fixed where are bound to the states are the states the fixed where are bound to the states are states are the fixed where are bound to the states are states are the bound of the states are the states are also do not goed time with them.	Suggests contacting Pacific Clinics
The Wellness Clinic: Asian & Pacific Islander Wellness Center	415.292.3420	03.17.14 left message; 03.24.14 left message							
San Joaquin		meandge							
Transcultural Clinic (T.C.C.)	209.953.8843	τ/c	County mental health program, primary community cambodian, vietnamese, hmong, lao	primarily adults 18-59 adults (70-80%), but also some 60+ adults	no	yes	Both in a bilingual format as some older adults may not be able to read so their children, who often know both languages, interpret/translate	Parents of Vietnamese youth/middle aged adults	wvo
Vietnamese Voluntary Foundation, Inc (VIVD)	209.475.9454 408.532.7755 fax	03.18.14 left message; 03.27.14 sent email							
Santa Clara	408.352.7735 Tax	eman							
Aulan Americans for Community Involviement	408.975.2730	т/с	Mental health services to general public	Ages 5-90+	The have a brochure for their Healing Legacies program which talks about mental health, but not about suicide although it indirectly hints at the topic.	yes	Vietnamese only for older adults; bilingual for middle- aged adults (for acculturation purposes)	Parents of Vietnamese youth/middle aged adults: youth would have peers as helpers and older adults would not always approach a younger person to offer holp	
Foashill Community Health Center	408.729.4290	τ/c	Six clinics: 3 on high school campus and 3 open to the general public for primary care including behavioral health services; outreach events, partners with local religious affiliations, annual Vietnamese Festival	Teens/parents at school clinics; general public at outreach events	no; suicide is briefly discussed as a subtopic in stress workshops	yes	both	Parents of Vietnamese youth/middle aged adults	Kerri/Behavioral Health program director: 408-755-9902 03.24.14 left message
San Jose Clinic	408.573.9686	03.19.14 sent email							
Valley Health Center Gilroy	888.334.1000	long wait hold: 10 mins							
San Bernardino									
Asian American Resource Center (SB & Riverside)	909.383.0164	T/C, wants additional/specific information							
San Bernardino Dept. of Behavioral Health: Access Unit	909.381.2400	mailbox full/no answer				[<u>├</u> ────┤
Dept of Behavioral Health Public Information	909.382.3179	03.19.14 left message							
Riverside									
Riverside County Culturally Competent Liaison	951.955.7168	03.19.14 left message; 03.20.14 left message; 03.27.14 no answer							
Los Angeles									
Special Services for Groups (SSG) AP Recovery Unit	323.731.3534	T/C	Outpatient mental health services	Adults and older adults	no	yes	DMH materials are often one monolingual, however, bilingual is probably best	Parents/middle aged	Also work with Korean and Chinese community
					1			1	

Appendix E: Workshop Flyer



Appendix F: Recruitment Flyer



Workgroup Participants Needed

Contact: Jana Sczersputowski -jana@yoursocialmarketer.com - 858 740 4381.

The Know the Signs suicide prevention social marketing campaign is looking for workgroup participants to assist in the development of culturally and linguistically competent materials. Please recommend yourself, a colleague or community member. Responsibilities include:

- ✓ An estimated time commitment of 10-15 hours between July 1, 2013 and September 30, 2013.
- ✓ Participation in one-on-one phone calls with campaign team members.
- ✓ Participation in conference calls as needed.
- ✓ Provide input and review creative materials.
- ✓ Assist with the development of a distribution plan

We are looking for approximately 5-8 participants in each workgroup. Participants who are selected will be compensated for their time with a \$300 stipend.

rga	inization (if applicable):		Title (if applicab	le):	
ma	il:		Phone:		
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student mental health. The Know the Signs suicide prevention social marketing campaign prepares Californian's to prevent suicide by encouraging them to know the signs, find the words to offer support to someone they are concerned about and reach out to local resources.

