

Txoj Kev Mob Yeej Ib Txwm Yuav Tsis Pom Tau

Cov kev qhia pom ua ntej (Warning Signs) ntawm lawv txoj kev hu kom pab yeej muaj nyob rau ntawm, tabsis tsis yog ib qho ib txwm yooj yim pom. Yog tias txawm koj tsuas yog pom ib qhov kev qhia no xwb los, xub cev tes mus pab ua ntej.

Cov Kev Qhia Pom Ua Ntej (Warning Signs) uas Yuav Ua Zoo Saib:

- Tham hais txog xav tuag los yog txo txoj sia
- Mloog tsis muaj txoj kev cia siab, tag kev, tws kev
- Muab cov khoom tseem ceeb pub rau lwm tus
- Npaj tus kheej rau txoj kev tuag
- Coj tsis tus
- Kev npau ntaws
- Muaj siv yeeb tshuaj los yog dej cawv ntawd
- Tsis xav ua dabtsi/tnis mus koom lwm tus li
- Txhawj heev thiab siab tsis tus li
- Kev pw hloov
- Cwj pwm hloov tam sim ntawd
- Yeej tsis paub muaj lub hom phiaj



www.suicideispreventable.org

National Suicide Prevention Lifeline: 1.800.273.8255

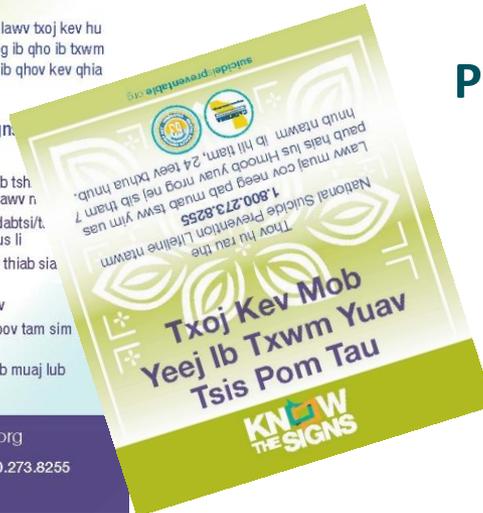
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Pain Isn't Always Obvious

KNOW THE SIGNS

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Cultural Adaptation of Suicide Prevention Materials for the Hmong Community in California

WORKGROUP REPORT FINAL

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



WELLNESS • RECOVERY • RESILIENCE

I. Introduction

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**. 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:

- www.suicideispreventable.org
- www.elsuicidiodoesprevenible.org

All campaign materials can be viewed, customized and downloaded from the Resource Center on Your Voice Counts (www.yourvoicecounts.org). This is an online suicide prevention forum designed to facilitate a dialog 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. Members

Members for the materials in Hmong workgroup participated in discussions on the subject of suicide prevention, outreach materials and distribution channels through their collaboration and participation in a webinar (September 26th) as well as periodic workgroup discussion posts on the Your Voice Counts website. Discussion topics included how suicide is or is not discussed in the Hmong community, identifying the helpers and the person at risk, as well as suggestions for outreach materials and strategies.

A total of 7 members participated in the materials in Hmong workgroup representing the counties of **San Francisco, Sacramento, San Diego, and Sutter/Yuba** (see Appendix D Workgroup Member Roster). 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 Hmong community. In addition, organizations serving this population were contacted directly and provided with a workgroup recruitment flyer (see Appendix F).

III. Background

“Past traumatic experiences and current adjustment issues have impacted the mental health of Hmong Americans”.

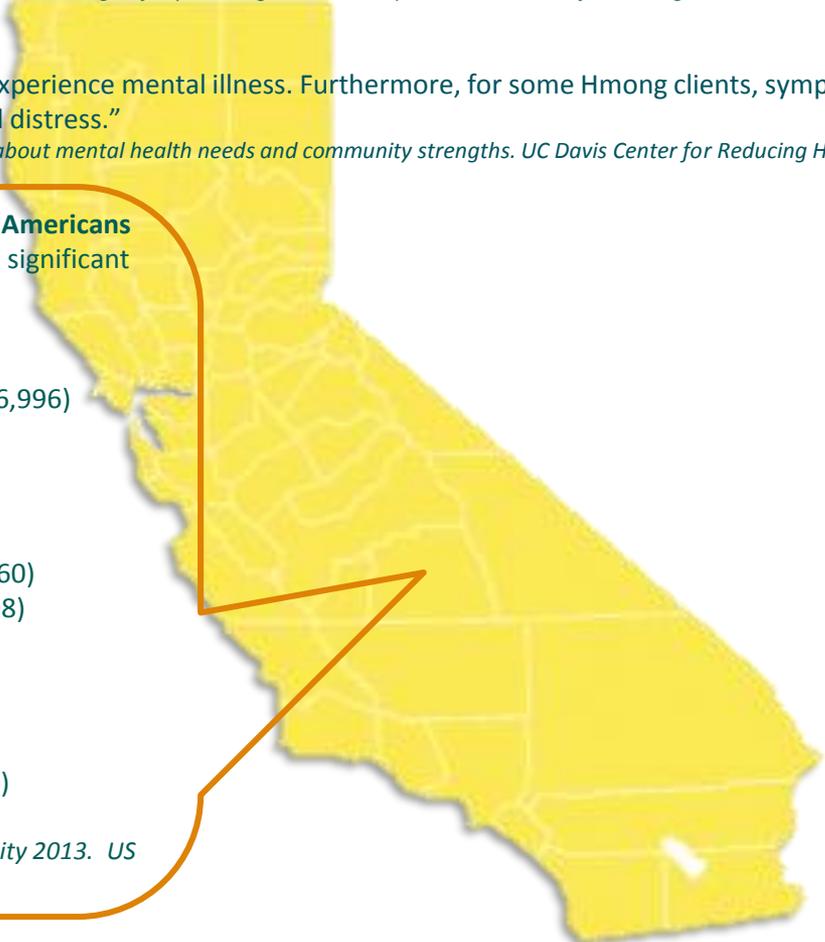
Source: Culhane-Pera, Vawter, Xiong, Babbitt, & Solberg, 2003; Lee & Chang, 2012a, 2012b. In Lee, S. E. 2013. Mental Health of Hmong Americans: A metasynthesis of academic journal of article findings. Hmong Studies Journal, 14.

“In general, the Hmong do not like to disclose information about mental health issues and family problems to providers”.

Source: Xiong, Tuicomepee, LaBlanc, & Raine (2006). In Cobb, T.G. 2010. Strategies for providing cultural competent health care for Hmong Americans. Journal of Cultural Diversity, 17(3).

“Many Hmong who suffer from chronic physical illness also experience mental illness. Furthermore, for some Hmong clients, symptoms of physical ailments are considered manifestations of emotional distress.”

Source: Building Partnerships: Conversations with Hmong about mental health needs and community strengths. UC Davis Center for Reducing Health Disparities



As of 2010, approximately **91,224 Hmong Americans** live in California. Metropolitan areas with significant population numbers include:

- **Fresno** (31,771)
- **Sacramento-Arden-Arcade-Roseville** (26,996)
- **Merced** (7,254)
- **Stockton** (6,968)
- **Chico** (4,354)
- **Yuba City** (2,883)
- **Los Angeles-Long Beach-Santa Ana** (1,960)
- **Riverside-San Bernardino-Ontario** (1,598)
- **San Diego-Carlsbad-San Marcos** (1,388)
- **San Francisco-Oakland-Fremont** (680)
- **Crescent City** (616)
- **Modesto** (611)
- **Santa Barbara-Santa Maria-Goleta** (517)

Source: State of the Hmong American Community 2013. US Census Bureau, 2010 US Census

IV. Workgroup and Focus Group Discussions

In the Hmong community suicide is a taboo topic not openly discussed or directly approached. For some individuals thoughts of suicide may imply past sins while others who are more traditional may seek the help of a shaman for mental or emotional distress as a common practice. For Hmong Americans the bond between family members is very strong and the fear of breaking that bond fosters apprehensiveness about expressing anger or sadness. Often, family members feel they do not want to “burden” their loved ones by discussing their emotional suffering. Parents may not take their children’s comments about suicide too seriously because they are in denial of the situation, but If they do take the comments seriously they will often refer the situation to the family or the clan instead of or before seeking professional services. There are 18 recognized clans in the Hmong community and the clan is considered a central part of the community.

Focus group participants felt one barrier that keeps their community from seeking professional help is the limited availability of language services and Hmong-speaking health providers as even those who speak English would often prefer to speak to someone in their primary language, but not necessarily to an interpreter. There is a lot of distrust in using interpreters as the community feels that within such a small area everyone is bound to know each other and share personal and confidential information.

Focus group participants suggested that to reach older adults TV and radio is a good strategy, while outreach materials is a good way to reach all age groups.

Summary of workgroup discussions:

How is suicide discussed, or not discussed in the Hmong Community? Suicide is not generally discussed in a serious way and there is stigma around it that prevents people from talking about it openly, especially in more traditional culture. Especially the older generation might say things like "I am going to hang myself" casually, so people around them often don't take it seriously because they hear it so much. Because of the elusiveness around the issue, people aren't as aware of the signs or what to look for if someone is really in trouble.

“I really think Hmong people don't talk much about suicide, not because it's hard to, but because they don't know how to. Older adults talk about suicide all the time, but they do so jokingly or all too casually, and so it may not seem so serious when it really is. And when people do talk about serious suicide, the other person doesn't really know how to listen and talk to them to get help.” (Workgroup Member)

How can we get the materials to influential helpers in the community?

More outreach and education are necessary, but it's important that the "messenger" is from the community. Clan leaders could be helpful for more traditional communities. Radio may be a good medium to reach larger numbers of people. Churches and Christian organizations could also be useful. It's also important to think about how to reach smaller Hmong communities that might not have access to as many cultural organizations and groups like in larger communities such as Fresno and Sacramento. Focusing on college students as helpers for their families and communities might be a good approach because they have earned a degree and more respect. Community-based organizations often have very limited resources, so materials should be inexpensive or free to access and use.

V. Development of Materials

Outreach materials including a bilingual post card and a tent card were developed following a collaborative community review and focus group process. In addition, a TV and radio spot were also developed.

Language Adaptation

The Know the Signs campaign team contracted with **May Ying Ly** and **Pheng Ly** from the Southeast Asian Assistance Center in Sacramento to take the lead on the language adaptation for the materials. The language adaptation and illustrations were further reviewed during a focus group. A small workgroup including Nick Cha from the Hmong National Development (HND) and community members Dr. Ghia Xiong and Peter Vang incorporated the focus group suggestions into the language adaptation which was then finalized and reviewed by May Ying and Pheng Ly and posted to the initial workgroup on Your Voice Counts.

Focus Group

Outreach materials including three post card designs and a tent card along with a TV and radio script were tested during a focus group held in Fresno County on June 19, 2014. A total of 10 participants represented men and women, parents, middle aged women and older adults. The focus group was facilitated by Nick Cha from the Hmong National Development, Inc.. During the focus group session participants were asked to provide input regarding the content, the images and the overall design approach. Focus group participants liked the color scheme and background designs on the materials presented. The Hmong community's preferences for education materials "include[s] the use of bright colors with bold type, providing information in Hmong and English, providing lists or bulleted points rather than paragraphs of information, the use of simple diagrams and drawings and artwork that is culturally appropriate" was consistent with the results from our focus group.

Source: Cobb, T.G. 2010. Strategies for providing cultural competent health care for Hmong Americans. Journal of Cultural Diversity, 17(3).

Based on workgroup and focus group feedback, younger people would not feel comfortable bringing up the topic of suicide to someone older than themselves. The helper in any age group would most likely be a peer and is also more likely to be a man, than a woman. Since these materials are reaching the Hmong speaking community, it was recommended to focus the design on middle-aged individuals.

During second and third focus groups in July participants agreed that in addition to the outreach materials a TV and radio ad would be appropriate to reach older adult helpers in the Hmong community and agreed that the information on the storyboard was clear and direct.

Revised Designs

Focus group feedback was incorporated into several revised post card options. It was recommended that the final product should be a bilingual postcard. Option 1 was chosen as the final English language design and option 4 was selected as the final design and image for the Hmong side of the postcard. The script for the TV and radio ads was revised and tested with additional community members before it was finalized.

Revision 2

Pab Cawm It Tug Neeg

Koj puas tau pom tej cov cwj pwm xws li nram no nyob rau ntawm koj tu phooj ywg los yog koj tsev neeg dtheeb ze ib tug twg?

- Tsis siab. Muaj kev nyab siab heev los yog thab toog kev tws?
- Nws puas yog xav nyob nws ib tug twg?
- Xav par toog zog tas mus li los yog par tsis toog zoo li.
- Puas qeaj heev?
- Puas muaj tus cwj pwm txawv dais txawv zais?
- Pheej muaj kev tas siab, kev trob siab los yog npaw tawv heev?
- Tsis qab siab koom ntog rau tej yam sas nws ib toom ayan ua?
- Muab nws tas kheej to rau tej qhov chaw txawv ntshab.
- Hws dej qawv tshej qhov qab?
- Pab muab nws tej haugwm too raws seem?
- Muab nws tej khoom ntshag tug pab rau hwm tes?
- Them toog tej kev xav tsag?

Mus saib tau nyob rau ntawm: www.suicide-preventable.org
yog xav paub ntau ntshab kev pab nyob hauv zee zog.

Revision 3

PAIN ISN'T ALWAYS OBVIOUS

The warning signs of their call for help are there, but not always obvious. If you observe even just one of these signs, reach out to provide help in time.

WARNING SIGNS TO LOOK FOR:

- Talking about wanting to die or suicide
- Feeling hopeless, desperate, trapped
- Giving away possessions
- Putting affairs in order
- Reckless behavior
- Anger
- Increased drug or alcohol use
- Withdrawal
- Anxiety or agitation
- Changes in sleep
- Sudden mood changes
- No sense of purpose

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- Puas muaj tus cwj pwm txawv dais txawv zais?
- Pheej muaj kev tas siab, kev trob siab los yog npaw tawv heev?
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Option 1

Option 2

PAIN ISN'T ALWAYS OBVIOUS

There are people in our community who experience intense sadness every day. They believe that their life has no meaning and there is no hope. And because they are ashamed of what they are going through and they find it difficult to understand their experiences, they hide their pain. The warning signs of their call for help are there, but not always obvious. If you observe even just one of these signs, reach out to provide help in time.

WARNING SIGNS TO LOOK FOR:

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- Nws puas yog xav nyob nws ib tug twg?
- Xav par toog zog tas mus li los yog par tsis toog zoo li.
- Puas qeaj heev?
- Puas muaj tus cwj pwm txawv dais txawv zais?
- Pheej muaj kev tas siab, kev trob siab los yog npaw tawv heev?
- Tsis qab siab koom ntog rau tej yam sas nws ib toom ayan ua?
- Muab nws tas kheej to rau tej qhov chaw txawv ntshab.
- Hws dej qawv tshej qhov qab?
- Pab muab nws tej haugwm too raws seem?
- Muab nws tej khoom ntshag tug pab rau hwm tes?
- Them toog tej kev xav tsag?

Mus saib tau nyob rau ntawm: www.suicide-preventable.org
yog xav paub ntau ntshab kev pab nyob hauv zee zog.

Pab Cawm It Tug Neeg

Koj puas tau pom tej cov cwj pwm xws li nram no nyob rau ntawm koj tu phooj ywg los yog koj tsev neeg dtheeb ze ib tug twg?

- Tsis siab. Muaj kev nyab siab heev los yog thab toog kev tws?
- Nws puas yog xav nyob nws ib tug twg?
- Xav par toog zog tas mus li los yog par tsis toog zoo li.
- Puas qeaj heev?
- Puas muaj tus cwj pwm txawv dais txawv zais?
- Pheej muaj kev tas siab, kev trob siab los yog npaw tawv heev?
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- Hws dej qawv tshej qhov qab?
- Pab muab nws tej haugwm too raws seem?
- Muab nws tej khoom ntshag tug pab rau hwm tes?
- Them toog tej kev xav tsag?

Mus saib tau nyob rau ntawm: www.suicide-preventable.org
yog xav paub ntau ntshab kev pab nyob hauv zee zog.

Option 3

Option 4

VI. Distribution

As part of a partnership with the Hmong National Development, Inc. (HND) they have been contracted to distribute the newly created Hmong suicide prevention outreach materials during outreach conducted by their organization and to share them with organizations in the state reaching the Hmong community. In addition, they created a 60-second TV and a 60-second radio spot to air in Hmong radio and TV stations.



The Hmong National Development is a not-for-profit, national organization serving the Hmong community for over 20 years through education, research, policy advocacy and leadership development.

<http://www.hndinc.org>

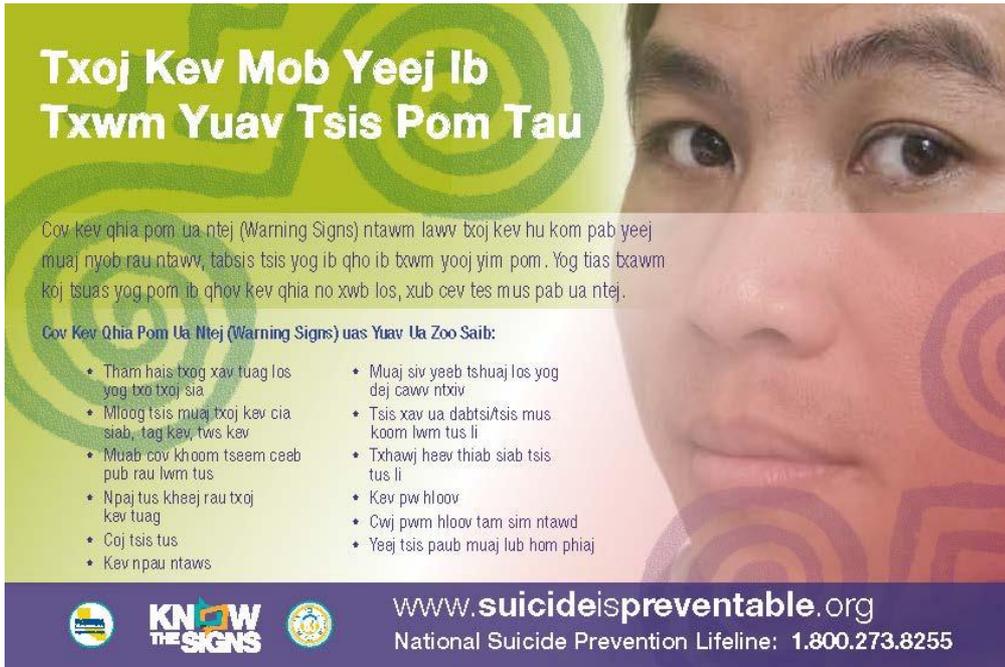
Hmong TV Network is a local television station located in Fresno, CA. Viewers in Mariposa, Merced, Madera, Fresno, and Tulare counties can access the broadcast on Channel 32.6. For Northern and Southern California and out of state and worldwide viewers, they can access this channel through the Roku box and live streaming through www.hmongtvnetwork.com. Hmong TV Network ran the TV spot from August to September, three times per day, for a total of 183 spots.

Hmong USA TV is also a local television station located in Fresno, CA. Viewers in Mariposa, Merced, Madera, Fresno, and Tulare counties broadcasted on digital channel 4.5. Recently, Hmong USA TV has opened up a channel in MN, and this is under channel 62.2. For Northern and Southern California and out of state and worldwide viewers, they can also access these channels through the Roku box and live streaming through www.hmongusatv.com. Hmong USA TV ran the TV spot from August to October, four times per day, for a total of 224 spots.

In addition, a radio contract agreement with KBIF 900 AM radio (3401 Holland, Fresno, CA) ran a 60-second spot from August 1st to September 30th, 4 times per day, for a total of 180 spots. KBIF is a local radio station located in Fresno, CA, and it serves the Central San Joaquin Valley from Bakersfield to Modesto 24/7.

“I think it's a good idea for the project to target the adults/older adults because these groups tend to have less access and awareness. Hmong children and younger adults generally have more access to outside resources since they speak English and can more easily navigate the different systems. There are also other suicide prevention efforts in English that may reach out to them already. Regarding materials that target the adult/older adults, this can still be a challenge since most adults, especially the older adults, cannot even read Hmong. Lots of Hmong adults/older adults listen to Hmong radio and watch shows like Hmong TV, so I would use these avenues to get the information out vs. written materials.” (Workgroup Member)

Appendix A: Post card, Tent card and Customized Materials



**Txoj Kev Mob Yeej Ib
Txwm Yuav Tsis Pom Tau**

Cov kev qhia pom ua ntej (Warning Signs) ntawm lawv txoj kev hu kom pab yeej muaj nyob rau ntawm, tabsis tsis yog ib qho ib txwm yooj yim pom. Yog tias txawm koj tsuas yog pom ib qhov kev qhia no xwb los, xub cev tes mus pab ua ntej.

Cov Kev Qhia Pom Ua Ntej (Warning Signs) uas Yuav Ua Zoo Saib:

- Tham hais txog xav tuag los yog txo txoj sia
- Mloog tsis muaj txoj kev cia siab, tag kev, tws kev
- Muab cov khoom tseem ceeb pub rau lwm tus
- Npaj tus kheej rau txoj kev tuag
- Coj tsis tus
- Kev npau ntaws
- Muaj siv yeeb tshuaj los yog dej cawv ntav
- Tsis xav ua dabtsi/tsis mus koom lwm tus li
- Txhawj heev thiab siab tsis tus li
- Kev pw hloov
- Cwj pwm hloov tam sim ntawd
- Yeej tsis paub muaj lub hom phiaj

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Approximate Translation from Hmong to English

A loved one's pain isn't always visible

The first warning signs of the call for help are available, but are not always easy to see. If you see only one of these signs, reach out to provide help in time.

Warning signs to cautiously look for:

- Talking about wanting to die or suicide
- Feeling hopeless, discouraged, trapped
- Giving away possessions to others
- Preparing themselves for death
- Misconduct or Reckless behavior
- Anger
- Increased drug or alcohol use
- Withdrawal/does not want to participate in any gathering
- Changes in sleep
- Sudden mood changes
- No sense of purpose

---Post Card---	
Hmong	Translation
Txoj Kev Mob Yeej Ib Txwm Yuav Tsis Pom Tau	A loved one's pain isn't always visible
Cov kev qhia pom ua ntej (Warning Signs) ntawm lawv txoj kev hu kom pab yeej muaj nyob rau ntawv, tabsis tsis yog ib qho ib txwm yooj yim pom. Yog tias txawm koj tsuas yog pom ib qhov kev qhia no xwb los, xub cev tes mus pab ua ntej.	The first warning signs of the call for help are available, but are not always easy to see. If you see only one of these signs, reach out to provide help in time.
Cov Kev Qhia Pom Ua Ntej (Warning Signs) uas Yuav Ua Zoo Saib:	Warning signs to cautiously look for:
<ul style="list-style-type: none"> • Tham hais txog xav tuag los yog txo txoj sia • Mloog tsis muaj txoj kev cia siab, tag kev, tws kev • Muab cov khoom tseem ceeb pub rau lwm tus • Npaj tus kheej rau txoj kev tuag • Coj tsis tus • Kev npau ntaws • Muaj siv yeeb tshuaj los yog dej cawv ntxiv • Tsis xav ua dabtsi/tsis mus koom lwm tus li • Txhawj heev thiab siab tsis tus li • Kev pw hloov • Cwj pwm hloov tam sim ntawd • Yeej tsis paub muaj lub hom phiaj 	<ul style="list-style-type: none"> • Talking about wanting to die or suicide • Feeling hopeless, discouraged, trapped • Giving away possessions to others • Preparing themselves for death • Misconduct or reckless behavior • Anger • Increased drug or alcohol use • Withdrawal/does not want to participate in any gathering • Changes in sleep • Sudden mood changes • No sense of purpose
---Tent Card---	
Hmong	Translation
Thov hu rau the National Suicide Prevention Lifeline ntawm 1.800.273.8255	Please contact the National Suicide Prevention Lifeline 1.800.273.8255
Lawv muaj cov neeg pab muab tswv yim uas paub hais lus Hmoob yuav nrog nej sib tham 7 hnuv ntawm ib hli tiam, 24 teev txhua hnuv.	They have counselors available that can help you 24 hours a day, 7 days a week.

PAIN ISN'T ALWAYS OBVIOUS

By recognizing the warning signs of suicide, knowing how to start a conversation and where to turn to for help, you have the power to make a difference— the power to save a life.

WARNING SIGNS TO LOOK FOR:

- Talking about wanting to die or suicide
- Feeling hopeless, desperate, trapped
- Giving away possessions
- Putting affairs in order
- Reckless behavior
- Anger
- Increased drug or alcohol use
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**KNOW
THE SIGNS**



www.suicideispreventable.org

National Suicide Prevention Lifeline: 1.800.273.8255

Tent card

Cov kev qhia pom ua ntej (Warning Signs) ntawm lawv txoj kev hu kom pab yeej muaj nyob rau ntawv, tabsis tsis yog ib qho ib txwm yooj yim pom. Yog tias txawm koj tsuas yog pom ib qhov kev qhia no xwb los, xub cev tes mus pab ua ntej.

Cov Kev Qhia Pom Ua Ntej (Warning Signs) uas Yuav Ua Zoo Saib:

- Tham hais txog xav tuag los yog txo txoj sia
- Mloog tsis muaj txoj kev cia siab, tag kev, tws kev
- Muab cov ibhoos, tsoos, ...
- Npaj tu kev tu
- Coj tsik
- Kev np
- Muaj siv yeeb tshuaj los yog dej cawv ntxiv
- Tsis xav ua dabtsi/tsis mus koom lwm tus li

Lawv muaj cov neeg pab muab tsawv yim uas pab hais lus Hmoob yuav nrog nej sib tham 7 hnub ntawm ib hill tiam, 24 teev txhua hnub.

Thov hu rau the National Suicide Prevention Lifeline ntawm 1.800.273.8255

Txoj Kev Mob Yeej Ib Txwm Yuav Tsis Pom Tau

KNOW THE SIGNS

Pain isn't always obvious. By recognizing the warning signs of suicide, knowing how to start a conversation and where to turn to for help, you have the power to make a difference— the power to save a life.

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If you are con question:

“Are you

If you think th them alone. (

Visit suici

1.800.273.8255

National Suicide Prevention Lifeline:

Pain Isn't Always Obvious

KNOW THE SIGNS

Suicide Is Preventable

Txoj Kev Mob Yeej Ib Txwm Yuav Tsis Pom Tau

Cov kev qhia pom ua ntej (Warning Signs) ntawm lawv txoj kev hu kom pab yeej muaj nyob rau ntawv, tabsis tsis yog ib qho ib txwm yooj yim pom. Yog tias txawm koj tsuas yog pom ib qhov kev qhia no xwb los, xub cev tes mus pab ua ntej.

Cov Kev Qhia Pom Ua Ntej (Warning Signs) uas Yuav Ua Zoo Saib:

- Tham hais txog xav tuag los yog txoj kev qhia
- Mloog tsis muaj txoj kev cia siab, tag kev, tws kev
- Muab cov khoom tseem ceeb pub rau hwm tus
- Npaj tus kheej rau txoj kev tuag
- Coj tsis tus
- Kev npau ntaws
- Muaj siv yeeb tshuaj los yog dej cawv ntxiv
- Tsis xav ua dabtsi/tsis mus koom hwm tus li
- Txhawj heev thiab siab tsis tus li
- Kev pw hloov
- Owj pwm hloov tam sim ntawd
- Yeej tsis paub muaj lub hom phiaj



www.suicidepreventionlifeline.org

- Reckless behavior
- Anger

- Sudden mood changes
- No sense of purpose



www.suicidepreventionlifeline.org 1.800.273.8255

Txoj Kev Mob Yeej Ib Txwm Yuav Tsis Pom Tau

Cov kev qhia pom ua ntej (Warning Signs) ntawm lawv txoj kev hu kom pab yeej muaj nyob rau ntawv, tabsis tsis yog ib qho ib txwm yooj yim pom. Yog tias txawm koj tsuas yog pom ib qhov kev qhia no xwb los, xub cev tes mus pab ua ntej.

Cov Kev Qhia Pom Ua Ntej (Warning Signs) uas Yuav Ua Zoo Saib:

- Tham hais txog xav tuag los yog txo txoj sia
- Mloog tsis muaj txoj kev cia siab, tag kev, tws kev
- Muab cov khoom tseem ceeb pub rau lwm tus
- Npaj tus kheej rau txoj kev tuag
- Coj tsis tus
- Kev npau ntaus
- Muaj siv yeeb tshuaj los yeeb dej cawv ntxiv
- Tsis xav ua dabtsi/tnis mus koom lwm tus li
- Txhawj heev thiab siab tsis tus li
- Kev pw hloov
- Cwj pwm hloov
- Yeej tsis paub n



PAIN ISN'T ALWAYS OBVIOUS

By recognizing the warning signs of suicide, knowing how to start a conversation and where to turn to for help, you have the power to make a difference— the power to save a life.

WARNING SIGNS TO LOOK FOR:

- Talking about wanting to die or suicide
- Feeling hopeless, desperate, trapped
- Giving away possessions
- Putting affairs in order
- Reckless behavior
- Anger
- Increased drug or alcohol use
- Withdrawal
- Anxiety or agitation
- Changes in sleep
- Sudden mood changes
- No sense of purpose



www.suicideispreventable.org
Suicide Prevention Crisis Line: 1.877.727.4747



Appendix B: TV ad Storyboard

Client Hmong National Development
Campaign Suicide Prevention: Know The Signs
Length 60 seconds

VIDEO	AUDIO (Hmong)	English Translation
1 Helper: Mid age woman Role: Mother of young female in crisis	Kuv tus ntxhais muaj qhov kev chim sai sai, zoo li luag lwm tus ntxhais thiab. Tabsis nws ho tham txog kev tuag thiab hais tias yuav tsis muaj leej twg khes txog nws li yog hais tias nws tuag lawm.	My daughter has this very fast anger like other young girls her age, but she also talks about death in that there will be no one who cares about her if she dies
2 Helper: Mid age male Role: Close Friend of the man in crisis	Kuv tus phooj ywg tau qhia rau kuv hais tias nws muaj kev nyuaj siab heev. Nws mloog zoo li nws tag txoj hau kev lawm.	My dear friend told me that he is stressed and overwhelmed, he felt hopeless
3 Postcard Still & Onscreen texts	Txoj Kev Mob Yeej Ib Txwm Yuav Tsis Pom Tau Cov kev qhia pom ua ntej ntawm lawv txoj kev hu kom pab yeej muaj nyob rau ntawd, tabsis tsis yog ib qho ib txwm yooj yim pom. Yog tias txawm koj tsuas yog pom ib qhov kev qhia no xwb los, xub cev tes mus pab ua ntej.	Pain isn't always obvious By recognizing the warning signs of suicide, knowing how to start a conversation and where to turn to for help, you have the power to make a difference - the power to save a life
4 Still Photos & Onscreen texts (warning signs)	Cov kev qhia pom ua ntej uas yuav ua zoo saib: Kev pw hloov, Muaj siv yeeb tshuaj los yog dej cawv ntxiv, Txhawj heev thiab kev txhawj ntshai, Npaj tus kheej rau txoj kev tuag thiab Yeej tsis paub muaj lub hom phiaj	Other warning signs to look for: Changes in sleep, Increased drug or alcohol use, anger or anxiety, putting affairs in order and no sense of purpose.
5 National Suicide Prevention, logos, website & contact information on screen	Yog koj los sis koj paub ib tug txheeb ze, phooj ywg uas xav txog kev txov nws txoj sia, thov hu rau qhov National Suicide Prevention Lifeline ntawm 1-800-273-8255 los sis, ntaus ntawm mus rau www.suicideispreventable.org	If you or you know a relative or friend who think about suicide, please do not hesitate to call the National Suicide Prevention Lifeline at 1-800-273-8255. For more information visit www.suicideispreventable.org

Appendix C: Your Voice Counts Discussions

Welcome! Please respond to this post.



YOUR VOICE COUNTS

WORKGROUP DISCUSSION

Welcome! Please respond to this post.



Jana YourSocialMa...

Welcome! Please respond to this post by introducing yourself to the group!

PRIVATE FEEDBACK (6)

9 comments

POST COMMENT
(#COMMENT FORM)



HazelM

October 22, 2013 - 10:18pm

Hi all, my name is Hazel and I'm currently a part-time student and full-time sailor in the United States Navy. My job mainly focuses on law enforcement and anti-terrorism force protection. In my free time, I volunteer as a sexual assault advocate and help raise awareness for suicide prevention and intervention. I look forward to working with you all.



Cyeu

September 9, 2013 - 9:16am

Hello! My name is Cheng Veu. I recently graduated from UCSC last June with a BS in Politics. I currently work for ReachOut.com (<http://www.reachoutusa.com>), which is a website aimed to promote wellness in teens and young adults by crushing stigmas and spreading awareness about mental health issues. I'm excited to be on this team and look forward to meeting all of you!



ljfang

September 9, 2013 - 8:06pm

Hello everyone, my name is Lang Fang and I'm from San Diego. I recently received a MA in education and counseling and went back this year for my MSW. I have worked closely with the Lao Hmong Association of San Diego as well as the Hmong Students Association of San Diego. My background consists of youth development, policy, community organizing, and nonprofits. I look forward to working with everyone!



jchang_lmft

August 29, 2013 - 9:45pm

Greetings! My name is Jenny Chang, LMFT. I am a Clinical Psychiatric Counselor w/Dignity Health Medical Foundation, and is the primary Hmong speaking clinician at our clinic. We provide comprehensive EPSDT mental health services to children in Sacramento County. Looking forward to the collaborative efforts in this project and meeting everyone in the group!



mvang

August 29, 2013 - 1:14pm

Hello everyone. My name is Mai Youa Vang. I am a licensed therapist with Sutter-Yuba Bi County Mental Health. I run and manage the Hmong Outreach Center out in Marysville to

provide mental health services to the Hmong population in Sutter/Yuba Counties. We do a variety of things out here, including providing direct mental health services, outreach, prevention & stigma reduction, education/consultation...whatever supports Hmong mental health. I look forward to meeting all of you.



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Sandra_EDC

August 29, 2013 - 9:53am

Welcome everyone! I will be co-facilitating this workgroup with Jana. I am really looking forward to getting started! Please let me know if you have any questions about the email I sent to you on August 28th.



MsCha

August 29, 2013 - 9:24am

Hi everyone! My name is Cindy Cha and I'm with Solsken Public Relations & Marketing. We work closely with community based organizations throughout California in the API communities to do outreach. CalMHSA is one of our clients with whom we're currently carrying out a campaign to educate the Hmong, Lao and Cambodian communities about reducing stigma and discrimination around mental health. I look forward to meeting and working with everyone in this workgroup.



MAY YING

August 29, 2013 - 9:08am

Hello everyone. My name is May Ying Ly. I am currently with the Southeast Asian Assistance Center in Sacramento. We provide interpreting and translation services for Sacramento County's mental health providers as well as have a community health navigation program serving the Vietnamese and Mien community. I am looking forward to meeting everyone on the group.

POST NEW COMMENT

YOUR NAME:

em



Notes from our September 26 webinar and discussion questions



WORKGROUP DISCUSSION

Notes from our September 26 Webinar and Discussion Questions



Sandra EDC

Thank you to those who were able to participate in our first webinar on September 26th. Below are some notes we took from the discussion. **We would really like to hear from all of you**, especially those of you who were not able to be on the webinar, about your thoughts on these questions, so please respond to the questions in **bold** by commenting here.

How is suicide discussed, or not discussed in the Hmong Community? Suicide is not generally discussed in a serious way, and there is stigma around it that prevents people from talking about it openly, especially in more traditional culture. Especially the older generation might say things like "I am going to hang myself" casually, so people around them often don't take it seriously because they hear it so much. Because of the silence around the issue, people aren't as aware of the signs or what to look for if someone is really in trouble.

What are the issues about suicide that make it "taboo" or difficult to discuss?

The Know the Signs campaign is designed to reach helpers of those who may need help. Who are the most likely helpers in the Hmong community? There has been a shift in the last few years and people are more open to seeking help for mental health issues, especially younger people. However younger people may not be comfortable bringing issues up to elders, they are more like to be helpers for peers. Many communities have groups that can be helpful for outreach, such as after school programs or women's circles. It would be important not to just focus on youth - they are often more open to the issues but not trying to reach the older generation could just perpetuate their isolation. It might be helpful to look at the strategies that have been used for domestic violence outreach and education for models. **Are there more thoughts on who are the most likely helpers in this community?**

What materials would be helpful for outreach?

Having something visual in hand that will remind people that there is hope and help, such as a magnet or tote bag with a phone number on it. Brochures would also be helpful because there is room to include information about the warning signs, what to do, where to go for help. Having the materials in Hmong would be important, especially for older members of the community. **What are some additional thoughts?**

How can we get the materials to influential helpers in the community?

More outreach and education are necessary, but it's important that the "messenger" is from the community. Clan leaders could be helpful for more traditional communities. Radio may be a good medium to reach larger numbers of people. Churches and Christian organizations could also be useful. It's also important to think about how to reach smaller Hmong communities that might not have access to as many cultural organizations and groups like in larger communities such as Fresno and Sacramento. Focusing on college students as helpers for their families and communities might be a good approach because they have earned a degree and more respect. Community-based organizations often have very limited resources, so materials should be inexpensive or free to access and use. **What are your comments on these ideas, and what are some other ideas?**

Are there any existing resources out there that might be useful for us to look at? Center for New America (Fresno). Sacramento Stop Stigma campaign. **Any other ideas about where we might look for good examples of materials reaching the Hmong community?** They don't have to be related to suicide prevention.

What culturally specific services might be promoted on these materials? For example the Suicide Prevention Lifeline offers 24 hour, 7 day a week access to trained

counselors, however Hmong speaking callers may need to use a tele interpreter to access these services - is that OK or would you recommend another service to promote? Remember that these materials will be distributed statewide.

Thank you for your input, we look forward to seeing your responses and moving forward with this project!

PRIVATE FEEDBACK (9)

4 comments POST COMMENT
(@COMMENT-FORM)



ljfang
November 3, 2013 - 2:34pm

What are the issues about suicide that make it "taboo" or difficult to discuss?

- Generational
 - It would be harder for a younger individual to address an elder who may be exhibiting symptoms
- Gender
 - Due to the already stratified gendering of the community, it may be more challenging for women to address the issue with an individual if it is an elder and a male elder
- Family dynamics/communication
 - It may additionally be difficult for an in-law to address the issue to his/her in-laws (married into family)
- Overall stigma and silencing
 - The stigma about the topic to the self
 - What does this mean about the individual? Bad individual? Something of a deficient in self, thus the individual has suicide ideations, etc.
 - Bad karma-->bad person, bad moral character
 - The stigma about the topic to the family and clan
 - What does it mean if your brother has suicide ideation? Hmong community is a group oriented society that some meaning is derived from group interactions. This may cause internal pressures for individuals to not speak out for sake of their family honor/face and thus, prevents the individual from really seeking the support they need.

Are there more thoughts on who are the most likely helpers in this community?

- Paradigm shift/changing the message of suicide
 - It is arguable that the community has indeed been attempting to do this: shifting the perception of suicide. Through more education, the community has been for a lack of a more accurate word, normalizing suicide, thus enabling others to feel less stigmatization and seek help.
- Operationalize a campaign
 - Just like how the President does a state of the union address, if a few organization could take on suicide as a issue for a year, to educate, to bring awareness, I would how much of an impact it would then make. Definitely, training advocates of a wide age range to help with putting out the message.

What materials would be helpful for outreach?

What are some additional thoughts?

- Making the pamphlets for the youth very youth friendly, making the catchy, smart and cool
 - Example: I love boobies campaign done by the breast cancer awareness folks
 - Used a slogan that many people identified with because it was light enough but yet, pointed at a serious cause
- Using social media to help promote and bring awareness to the youth
 - FB would be ideal

How can we get the materials to influential helpers in the community?

What are your comments on these ideas, and what are some other ideas?

- Internet accessible training/certification
 - Perhaps requiring community organizations who are applying for grants to have a handful of staffers/community leaders be certified

Are there any existing resources out there that might be useful for us to look at? Center for New America (Fresno), Sacramento Stop Stigma campaign. **Any other ideas about where we might look for good examples of materials reaching the Hmong community?** They don't have to be related to suicide prevention.

- Asking local community members, in the t-shirt business, to make a few t-shirts for the campaign
 - Incentive for those who are trained
 - PR the message as well as highlight the individual as a "helper"
- It is more important in the Hmong community to highlight the "helpers" like formally indicate it to the community so that people who are scared can approach that person without others knowing, basically making these "helpers" also "experts" at least in terms of the preliminary conversation (this also more appropriately pertains to question 1)

What culturally specific services might be promoted on these materials?

- Giving out small grants to college orgs to do presentations at their local Hmong new year about prevention and intervention
- Putting up a tent at the new year, asking student to mobilize and educate the community during the new year
- Asking local community leaders to be interviewed and then social media to PR them on the Hmong TV, or youtube about this issue
 - Te: Mee Moua, Elong Xiong, etc



Sandra_EDC
October 8, 2013 - 9:03am

Others in the workgroup, please speak up!



Sandra_EDC
October 8, 2013 - 9:03am

Thank you so much for this informative response!



jchang.lmft
October 6, 2013 - 3:50pm

1. Suicide is difficult to discuss due to the generational differences, especially as the new paradigm shift is beginning to become more visible. Parents are likely to be immigrants of the Vietnam War, thus creating families to have differing expectations for their US born children to succeed. This creates friction thus the Hmong teenagers are likely to commit suicide. Acculturation also plays an intricate part and affects a person holistically, due to majority of Hmong families not knowing that preventive services are available until a crisis erupts and leads to one being hospitalized. Emotions are not highly displayed as well.

2. From my clinical experience, many Hmong families are "helping" persons themselves. The Youth are more likely to respond to school-based programs that are in collaboration w/community agencies because they spend majority of their days at school. Across the lifespan, families may be more receptive to televised and/or radio sessions that hosts sessions to talk

about this campaign and its related efforts. MN has televised speaker series and many clinical professionals come to talk about their health profession and their roles linking w/the Hmong community.

3. In regards to material, a magnet may be more beneficial to the whole community as it can easily be accessible to a refrigerator. Hmong families have tight kinship and ties, thus food is a central asset to bring families together to celebrate milestones and/or traditional events. Sacramento County also put out a small yellow double-fold wallet sized card that is given to agencies. Clinicians in the agencies hand out these cards to susceptible patients who are at risk for suicide. This is the most accessible form as it is small and can be carried anywhere. On the card, I usually put "I speak Hmong" so if a patient has a crisis and I am not available, they can hand this card to an emergency personnel which helps the crisis center/hospital to access an interpreter while the patient is hospitalized.

4. There are Hmong student organizations at the college campuses in Sacramento. Many are willing to collaborate on future events that bring out more health forums and do prevention efforts. They also have access to Alumni who are trained medical professionals. UC Davis (Hmong in Health) and CSU Sac (Hmong Health Alliance) are both pioneers who hosts 1 day community fairs, are usually at Hmong New Year promoting their organization. There are licensed clinicians (Mental Health, Psychologist, Social Workers) at the colleges who do crisis assessments, and it would be beneficial if they are aware of resources if Hmong college students need support as well. In regards to Church/Congregational families, it would be more beneficial to talk to the pastor of a larger Hmong church community and build an alliance. He is open and apt to share the demographics and how to reach this population. When an established church already has a big congregation, the smaller churches are invited to come gather and support such events as well. Pastor can provide an open invitation to other Hmong churches in the locale, and if there is a big event (conferences, weekend seminars, 1 day events) the church coordinators are likely to promote the event as well. Specific doctor's (MDs) offices also specialize in providing care to the Hmong communities. They would also benefit from receiving suicide prevention info in terms of outreach (putting brochures, magnets, etc) in their office.

5. Existing Resources in Sacramento, and families can initiate to contact/access: 1) "My Sister's House" is an organization in Sacramento that specializes in the API communities affected by domestic violence and mental health issues. They have a Hmong speaking person on staff, and do know of my work in the community. 2) WellSpace Health has a 24-hour Suicide Crisis Hotline at 916-368-3111, also 800-273-8255. There is a 24 hour parent support line too at 888-281-3000. 3) 211sacramento.org is a free internet based catalog that provides info on community programs. 4) St. Francis "Street Sheet" provides the most up to date community programs. 5) Men are also now open to receiving support, and our clinic refers them here: <http://onefatherslove.com/SacramentoResourceDirectory.aspx> (<http://onefatherslove.com/SacramentoResourceDirectory.aspx>)

6. No comment.

POST NEW COMMENT

YOUR NAME:
em



Who is at highest risk? Should we target our materials?



WORKGROUP DISCUSSION

Who is at highest risk? Should we target our materials?



Sandra EDC

Attached is a fact sheet from the Suicide Prevention Resource Center that includes national data about suicide for Asian/Pacific Islanders. This is very broad data, and although Hmong communities are included in it, it does not have specific data for that group. Generally, this data indicates that men die by suicide at higher rates than women, and that older people are at higher risk than younger people. It also includes some information from national surveys of high school youth that indicate that API youth may have more frequent thoughts of suicide than other racial and ethnic groups of their peers. Finally, it also includes some risk factors and protective factors that are more specific to API cultures.

Question for discussion: What are your thoughts on how this national API data may compare with what is going on within the Hmong population in California specifically? Do you think there is a specific segment of the population that is at highest risk? Are you aware of any studies or sources of data that might help us identify who in the Hmong community is most at risk?

PRIVATE FEEDBACK (0)

Attachment:

[SPRC API Suicide Fact Sheet](http://www.yourvoicecounts.org/files/default/files/2013/03/SPRC_API_Suicide_Fact_Sheet_2013.pdf) (http://www.yourvoicecounts.org/files/default/files/2013/03/SPRC_API_Suicide_Fact_Sheet_2013.pdf)

14 comments

POST COMMENT
([COMMENT FORM](#))



ljjfang

November 3, 2013 - 4:28pm

I apologize in advance for the below comment may seem to some out of scope, but for me, it was helpful in contextualizing some of the patterns we have been seeing in terms of suicide and young adults/college students:

- Young adults are at risk not just for acculturation but more for family dynamics
 - Studies have shown there is a correlation between the level of acculturation of an individual in adopting western values of independent self constructs (strong independent sense of self) and lower suicidal ideation
 - the youth do have access to english-speaking resources through school, may be more challenged by interdependent (maybe more generational) influences within the home
 - strong family dynamics and communication can be a preventive measure for this group -> helpers: 1.5 generation (younger parents with middle school/high school aged children)
- Joiner's (2005) interpersonal-psychological theory of suicidal behavior
 - perceived burdensomeness
 - thwarted belongingness
 - self constructs

- suicidal ideation
- Wong, et al. (2012) Asian American College Students' Suicide Ideation
 - unfulfilled interpersonal expectations
 - family
 - relationship
 - cultural differences
 - racism
 - unfulfilled intrapersonal expectations
 - less than 7 percent of the Asian American participants (n=237; Other Asian= 27.8%) attributed the cause of suicide ideation to psychological distress, whereas 8 out of 10 participants believed suicide ideation was caused by an interpersonal issue
 - many don't believe suicide ideation can be a mental health issue rather it's their own personal issue—education and awareness is needed
- Additional thoughts about the above research:
 - the studies are took into account mainly East Asian Americans, thus implications of acculturation, generation, socioeconomic status and impact of loss of country come up for me (with further thoughts of PTSD, transgenerational trauma...)
 - these are college students, thus how are these correlations with Hmong adults not in college?



jchang.lmft

October 21, 2013 - 4:00pm

Hi all- there is still baseline groundwork that needs to capture data that is specific to Hmong health disparities. HND put out "The State of the Hmong American Community" (2013), available here: http://www.hndinc.org/research_ctr.php. There are discussions across the nation that are starting to establish research interest that are Hmong specific and then info is to be analyzed at the next decade that may be compared with US Census - possibly in 2020. There is still broad research data available to date, because the Hmong are still categorized/lumped together whether Asian demographics, thus it is still hard to depict the specific statistical data of Hmong suicides in youth, middle-aged, VS elders. Hmong Studies Journal also highlights various scholarly work from Hmong professionals internationally. <http://www.hmongstudiesjournal.org/> (<http://www.hmongstudiesjournal.org/>)

In doing current clinical and research work, the data fact sheet attached is spot on re: the demographics and just a general overview of the Asian demographics. Although broad, it highlights Asians in general. I have dialogued with clinicians/professionals who are non-Hmong and their insights are reflective of the attachment when working with the Asian demographics.

Hmong youth may be more prone to suicide tendencies given the generational and acculturation differences, especially during a transitional lifespan (going to middle school, high school, college, entering their career, etc). This age group (5-17 years old) is the largest percentage group of Hmong's in CA, 31.1%, and data is available on the HND website (link above, page 15). Youth spend majority of their time in school and more open to reaching out to their Counselors on campus, and after-school programs seem to be more effective in reaching this demographic about suicide related efforts. Hmong Youth would be most beneficial because they are leaders of tomorrow. When a youth is identified and referred for services in Sacramento County, their family (parents, adult siblings) are involved to remediate the situation and this is an opportunistic time to educate everyone about suicide. Children's mental health services allow our clinical team to collaborate with family, as opposed to strictly working with the child alone in therapy. The elders are vulnerable given their historical context of the war generation, adjustment difficulties and language barriers. They are not aware of accessing preventive care, until accumulative events finally trigger a personal crisis that may lead to a hospitalization (or mass-suicides).

**May Ying: in regards to the Hmong teen suicides awhile back that was published by the Fresno Bee as a Special Edition, the families have not been highlighted ever since the article published. A lot of professional research refers their work back to this pivotal event, which is documented continuously. After the article published, there were some short-term programs funded by non-profits in Fresno County, Fresno County efforts and SAMHSA to do some prevention and crisis management. I was not made aware of these tactics in place and it is unknown if the programs still exist that are Hmong youth specific to suicide prevention. Dr Serge Lee (CSU Sacramento) can share highlights of his involvement with various agencies during that specific time in Fresno, as he may have spear-headed and collaborated in the events thereafter. The families who were affected by the losses have not been contacted since it published in 2000. I do know some of the Editors/Photographers who were involved in compiling the Special Edition, and they still inquire about how the Hmong community has changed throughout the decades, and if the stigma of suicides has changed.



Jana_YourSocialMa...
October 30, 2013 - 6:08pm

Thank you for your indepth thoughts. I also found the HND publication very useful.



MsCha
October 21, 2013 - 3:29pm

Radio ads are an excellent source of outreach for the older Hmong generations as there are several popular Hmong programs airing on KJAY 1430 in Sacramento. However, if the idea is to educate the young in hopes of reaching the elders then radio may not be the right choice since the majority of listeners are senior citizens. I think a better idea is to create TV ads using Hmong teens and young adults. We can promote the ads on platforms that the younger generations visit most like social media sites and YouTube. We can also run the ads on Crossings TV, a local station which airs Hmong news and entertainment programs throughout Sacramento, Stockton and Fresno.



mvang
October 21, 2013 - 2:29pm

I agree that the data is too broad. There's not enough research specifically in this area for the Hmong so it's difficult to pinpoint who is most at risk in the Hmong community. With this said though, I think it's a good idea for the project to target the adults/older adults because this group tend to have less access and awareness (Hmong children and younger adults generally have more access to outside resources since they speak English and can easier navigate the different systems, there are also other suicide prevention efforts in English that may reach out to them already). Regarding materials that target the adult/older adults, this can be a challenge since most adults, especially the older adults, cannot even read Hmong. Lots of Hmong adults/older adults listen to Hmong radio and watch shows like Hmong TV, so I would use these avenue to get the information out vs. written materials. One of the unique things we do here at Sutter Yuba Mental Health for prevention and early intervention of mental health illness is recruit and educate Hmong Traditional Healers about mental illness, signs, and symptoms so they can help reduce the stigma and be a referral/access point for us. I can picture something like creating a network of Hmong clan leaders and elders and educating them about suicide prevention so they can take the info and reach out to everyone else....or maybe even more effective would be to reach out to parents so they would at least know the signs and know how to talk to eachother, their parents, and their kids about suicide. These would be culturally responsive since it is a value that one should listen to, respect, and do as they are told to by their parents, clan leaders and elders. I really think Hmong people don't talk much about suicide, not because it's hard to, but because they don't know how to. Older adults talk about suicide all the time, but they do so jokingly or all too casually, and so it may not seem so serious when it really is. And when people do talk about serious suicide, the other person don't really know how to listen and talk to them to get help.



ljfang
November 3, 2013 - 2:53pm

Wanted to just say, I am really intriuged to see your organization's outcomes. What a great method!



mvang
November 4, 2013 - 9:09am

Thank you for your comment. It's a lot of hard work and coordination working with Hmong older adults so I really appreciate the feedback. Through the years of working with the Hmong adults and mental health, I've found that we must get really

creative to find overlap abd/or build bridges between the traditional mental health 'box' and the Hmong mental health 'box' since the concepts of wellness are different, especially for traditional Hmong.



Jana_YourSocialMa...
October 30, 2013 - 6:08pm

Interesting idea. I will follow-up with this with the entire group in a new post, but I would like some more information about details of how this might come together.



Sandra_EDC
October 21, 2013 - 2:40pm

Great comment, thank you. The scope of this project is limited to creating outreach materials - so we are not able to implement activities such as convening people at educational events. What we can do is create some kind of materials that outreach workers and others who ARE in a position to host such events, or who have contact with Hmong people in the community, can use as part of their work. What do you think would be useful for them? You mentioned radio as a good means of reaching older Hmong people - would a radio ad be a good idea? We could also consider things like magnets, pamphlets, or some other material that would have some infomraiton about suicide prevention. If literacy is an issue for the population we are hoping to reach, we can also think about how to design the materials so that images, resources numbers etc are more prominent and there is not as much text. What are your thoughts?



MAY YING
October 23, 2013 - 8:47am

In terms of mass media, radio is probably your best outlet currently. There are a number of Hmong-host radio shows and Hmong own radio stations all over California that does have a pretty good audience. For print materials, I really like what Sacramento County did with the Stop Stigma Sacramento Campaign. What they developed were specific, culturally responsive tag lines with pictures of people from various Asian community members. You can check these pictures out www.StopStigmaSacramento.org (<http://www.StopStigmaSacramento.org>).



Jana_YourSocialMa...
October 30, 2013 - 6:10pm

Thank you. I like their campaign as well.



Sandra_EDC
October 21, 2013 - 9:42am

Thank you for these comments. Certainly the data is very broad but it may provide some insight. Generally - regardless of culture, race or ethnicity - suicide rates are much higher among middle aged and older adults, and among men than women. As you have noted though it can be a challenge to reach adults - often young people are easier to reach because they typically attend school and there are many avenues to reach them there. They may also be more "open" to talking about suicide and mental health issues. Some workgroup members have also commented that educating young people can itself be a way to reach their parents, grandparents, etc. Should we use this project as an opportunity to design outreach materials that target adults and/or older adults? What are your thoughts on how we might specifically design the materials to "speak to" that group, or family members, friends, caregivers of that group?

MAY YING
October 21, 2013 - 8:36am



I think the data is too broad to generalize to the Hmong community. This has always been a problem in California, especially since we have such a large and diverse Asian and Pacific Islander community.

I think when we had that one year with so many youth suicide in Fresno, there was something that was generated but it's been a few years and I do not recall any specific study that came out of it. I wonder if anyone is from Fresno in the group that could shed light on the event in Fresno and where they are now?

Having worked with Hmong youth and adults over the last 20 years, I have anecdotal examples as a frame of reference. Through the Hmong Women and Men Circles, the kids - mostly middle and high school students, suicide was a major concern. The concern came out of the various discussions on race, identity, inter-generation conflicts with parents and a changing Hmong culture. Mental health was also a major concern which was evident through dialogues and social media postings. The kids were concern enough to put together a mini-project talking about suicide.

When I was at Healthy Start, working with school social workers, teachers, parents and students, a majority of the kids that were referred for services had some form of suicide ideation manifested in the arts, through cutting, and disclosing to the social worker.

Older adults are difficult to gage but again, anecdotally, we see it in the media where multiple murder-suicides have been committed. Just within the last six months, there must have been at least three murder-suicides that happened. Of course, these are not specific to California, infact, it's more in the Midwest but it still happened in the Hmong community. For more information on this, perhaps looking at local women shelters or the Asian Pacific Islander Health Forum.



[cveu](#)
October 20, 2013 - 10:25pm

It is broad data and I honestly don't think that Hmong teenagers/young adults contemplating suicide would share those kinds of thoughts openly. I think it's even more rare for an adult to.

If I had to guess, I think that the middle- and old-aged Hmong population, such as the Vietnam war veterans and those that are disabled and don't speak English, are at highest risk for suicide. Many veterans suffer from PTSD and are uncertain of where to seek help, so they don't. Middle-aged immigrants have a hard time finding work due to the language barrier, and they have an even harder time acculturating.

I also think that Hmong teenagers are at high risk for suicide because of acculturation and the psychological clash it creates between following customs and beliefs of parents and elders, and following customs and beliefs that are taught in school and society. Relationship issues and sexuality are also big factors.

I don't have any studies or sources, but I can Google scholarly it and get back to you. =)

POST NEW COMMENT

YOUR NAME:
em



What are your thoughts on these suggested materials?



YOUR VOICE COUNTS

Se

9

WORKGROUP DISCUSSION

What are your thoughts on these suggested strategies?



[Jana_YourSocialMa...](#)

Thank you for the insights many of you have offered in the discussions so far. I wanted to follow-up on a few of the suggestions that have been made. **Please offer your thoughts on these:**

1. Based on a model by Sutter Yuba Mental Health it was suggested to create a network of Hmong clan leaders and elders and educating them about suicide prevention so they can take the info and reach out to everyone else.
2. There are a number of Hmong-host radio shows and Hmong own radio stations all over California and several of you suggested that radio ads might be an excellent source of outreach for the older Hmong generations as there are several popular Hmong programs (e.g. on KJAY 1430 in Sacramento.)
3. I do not believe that we have enough resources to create a TV spot, but I wanted to include it for the discussion. A suggestion was to create TV ads using Hmong teens and young adults and to promote the ads on platforms that the younger generations visit most like social media sites and YouTube and to run the ads on Crossings TV, a local station which airs Hmong news and entertainment programs throughout Sacramento, Stockton and Fresno.
4. One participant stated: Hmong Youth would be most beneficial because they are leaders of tomorrow. When a youth is identified and referred for services in Sacramento County, their family (parents, adult siblings) are involved to remediate the situation and this is an opportunistic time to educate everyone about suicide. I wanted to note that we are developing an online ad campaign reaching API youth specifically, so we might not need to duplicate those efforts. If we did want to focus on Hmong youth, we would have to brainstorm about ways we can reach them throughout the state.

PRIVATE FEEDBACK (#)

7 comments

POST COMMENT
(#COMMENT-FORM)



[MAY YING](#)
November 18, 2013 - 2:27pm

I favor all of the options presented because of how we are tackling this issue. Suicide is a norm in the Hmong community but mental health and prevention education are new concepts and methodology. We don't know what will take off but one thing is for sure, we have to begin to plant the seed for the community to get involved and receive information. If I was to prioritize due to the limited resources that is available, I would take the aim to work with the youth first and then the elders. Therefore, if we can continue to work with youth programs within the schools were there usually are a support structure and then moving on to work with the 18 clan council, I think we can build on these aims in the future.



[MAY YING](#)
November 18, 2013 - 2:27pm

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prioritize due to the limited resources that is available, I would take the aim to work with the youth first and then the elders. Therefore, if we can continue to work with youth programs within the schools were there usually are a support structure and then moving on to work with the 18 clan council, I think we can build on these aims in the future.



Jana_YourSocialMa...
November 14, 2013 - 6:29pm

Thank you- this is helpful!



jchang_lmft
November 3, 2013 - 8:06pm

Hi all, to better encompass and utilize this as a state-wide suicide prevention campaign, radio ads (or host shows) would be good a better outlet. There are various independently sponsored hour slots that are specifically geared towards the elders, youth, etc and the radio company can run the ad throughout the day customized for this campaign. For example in Fresno, the Hmong radio show hosts a "Gen X" show that is for Hmong youth from 4-6pm M-F. Another highlight is that many Hmong families can listen to the radio programs online if they do not reside in the proximity. TV ads would also be as effective, and families can watch this channel online here too: <http://www.hmongtnetwork.com/index.php/watch-live> (<http://www.hmongtnetwork.com/index.php/watch-live>)

Thanks for clarifying that there is an API Youth outreach campaign already in place.



mvang
October 31, 2013 - 8:04am

Another thought...I really liked the approach the was used recently to raise awareness in the Hmong community about domestic violence, but I don't know how feasible it is to do something like that for suicide prevention. I felt it was effective in getting the message out in the community because it seemed to get people talking about the issues (even the Hmong community in Yuba Sutter knew and talked about the forum that was in Sacto). The key, I think, was that the situation that was used as a basis for the forums that happened in the Hmong community across the country was pretty controversial and well known to everyone in the community...The Hmong community is so close knit and news spread so easily and fast via word of mouth (and now social media, esp. fb), if only we can spread good information on suicide prevention that easily and fast :)



Jana_YourSocialMa...
October 31, 2013 - 11:42am

Can you provide a little more background on the approach?



mvang
November 4, 2013 - 10:25am

I don't know the details to how the forums were organized or set up, which is why I wondered how feasible it is. I don't know if anyone has more info? All I know is there was a DV tragedy in the Hmong community where a husband murdered his wife. The case became well known and spreaded in the Hmong community I think because controversy emerged about who should arrange and pay the funeral expenses based on Hmong cultural traditions. It raised attention to DV issues on the Hmong community and also sparked a nationwide effort in the Hmong community to reduce DV. Forums were held cross country during the memorial service for Pa Nhia Vue to raise DV awareness and bring light to some Hmong cultural beliefs and traditions that may perpetuate DV. Hmong DV hotline info was given at the forums-I didn't attend but clients came back and told me about the hotline, which made me feel that the efforts have at least helped raise awareness about help available and get people talking in the right direction. The people who I know attended the forum in Sacto attended though, not

because they wanted to learn about DV, but because it was a memorial service dedicated to this girl that they've heard so much about and because it was put together by Hmong leaders they were familiar with (It sounded to me to be the same group who put together efforts to support Gen. Vang Pao when he was in jail)...for this effort, I was thinking maybe piggy back on recent suicides in the Hmong community to raise suicide prevention awareness? There was something circulating on facebook about a Hmong girl committing suicide in Denver not too long ago. I didn't click on the link because it appeared to be to be a video of the actual suicide...I heard she was the daughter of a famous Hmong singer...Here's a quick link i googled up on Pa Nhia Vue <http://www.weau.com/home/headlines/Domestic-violence-in-Hmong-community-highlighted-in-memorial-service-222823481.html> (<http://www.weau.com/home/headlines/Domestic-violence-in-Hmong-community-highlighted-in-memorial-service-222823481.html>) There are also clips of Hmong news coverage highlighting some of the DV stories that were told in the forums on youtube (that was circulating on fb as well) --try Hmong Domestic Violence search on youtube.

POST NEW COMMENT

YOUR NAME:
em



Workgroup update



WORKGROUP DISCUSSION

Workgroup Update



[Jana YourSocialMa...](#)

Dear Workgroup members,

As we continue with the development of suicide prevention materials for the Hmong community we recently partnered with The Hmong National Development organization in Fresno to select the best media options to reach this community, purchase media, and develop and test all the necessary content for the media options (radio and/or TV). In addition, this organization will facilitate a focus group with Hmong community members to review the media script and suicide prevention outreach tent card as well as distribute and share the Hmong suicide prevention outreach card and other printed materials during outreach activities and make them available to organizations in the state reaching the Hmong community.

We are excited about this partnership and look forward to sharing these materials with you soon.

Thank you.

PRIVATE FEEDBACK (9)

0 comments

POST COMMENT
(COMMENT-FORM)

POST NEW COMMENT

YOUR NAME:
em.



Appendix D: Member Roster

Name	Organization	County	Qualifications
Cheng Veu	Reach Out	San Francisco	I've identified with the LGBTQ community since my freshmen year of high school and believe I can contribute and offer input on material targeting LGBTQ youth. I was also raised in a household and community that spoke predominantly Hmong and understand the cultural and social hardships that arise with learning and speaking English as a second language.
Hazel Mouayang	US Navy		I would like to help others who may be struggling with issues that I may have dealt with in the past. Recently, I've volunteered with organizations such as Reach Out, CalMHSA, Human Rights Campaign, and other local non-profit organizations. As an active member in the LGBTQ community, I like to promote fairness and equality for all. I am of Hmong descent and although I can't read the language, I do speak it. With my knowledge and overall experience, I know I will play a crucial role in this team. I also am a Sexual Assault Prevention and Response Advocate for my command.
Cindy Cha	Solsken Public Relations & Marketing	Sacramento	I've been involved with the CalMHSA (California Mental Health Services Authority) campaign for the past year, working closely with members in the Lao, Hmong and Cambodian communities to help reduce stigma and discrimination. Our goal is to develop and implement common strategies and programs that can help the community reduce stigma and discrimination against mental health. We're working with community based organizations throughout the state by holding public mental wellness forums and providing qualified guest speakers to educate the communities. I'm interested in participating in this workgroup because it will put me in a better position to connect further with the community and work more closely with them whether through the mental health campaign or suicide prevention campaign. I read and write Hmong and can converse effectively as well.
Jenny Chang, LMFT	Dignity Health Medical	Sacramento	I am a licensed mental health practitioner in Sacramento. I am the primary clinician for the Hmong/Southeast Asian clients, and have developed cultural competency skills to gain an alliance to working with this very unserved and underserved community. I have also co-authored various journal articles about SE Asian mental health issues as well. I recently spoke on the Mental Health Forum at Southeast Assistance Center about the Hmong & Depression.
Lang Fang		San Diego	
May Ying, MSW Executive Director	Southeast Asian Assistance Center	Sacramento	I am bilingual and bicultural in Hmong. I am a mental health professional who has worked with refugee youth and families for over a decade. I believe that my experiences and insight will help the workgroup to be linguistically and culturally response to our diverse community.
Maya Youa Vang, Licensed Therapist	Sutter Yuba Mental Health	Sutter/Yuba	I am a licensed therapist with Sutter-Yuba Bi County Mental Health. I run and manage the Hmong Outreach Center out in Marysville to provide mental health services to the Hmong population in Sutter/Yuba Counties. We do a variety of things out here, including providing direct mental health services, outreach, prevention & stigma reduction, education/consultation...whatever supports Hmong mental health.

Appendix E: Focus Group Protocol and Consent Form

Focus Group Protocol

Introduction/Welcome

Introduction statement for the group: (Thank everyone for being present):

*We want to welcome you to today's focus group. The purpose of today's meeting is to review materials to reach the Hmong community with information about suicide prevention. We will review media scripts (TV and radio) as well as outreach materials (tent card and magnet) in Hmong to reach the **helpers**, meaning someone who is in a position to recognize warning signs and offer support, **NOT** the person at-risk.*

Please emphasize to participants that their input and feedback are invaluable in ensuring we produce materials that are user friendly and effective.

Remind participants that we have provided food and beverages for their enjoyment and to please feel comfortable to get up and get something to drink or eat if they haven't already.

Background

Campaign background: The materials that will be created for the *Know the Signs* campaign are part of statewide efforts to prevent suicide and are funded by counties through the Mental Health Services Act.

SECTION 1: Discussion about Suicide Prevention

- 1) If you were concerned that a friend or family member is having thoughts of suicide what information do you need to help you support a friend you are concerned about?
- 2) If you were having thoughts of suicide, who do you think would notice warning signs and reach out to you? A family member? A close friend?
- 3) What is the best way to reach the Hmong community members with this type of information? (For example, TV, radio, posters in a local store, brochures at church, community workshop or other.)

SECTION 2: Tent Card and Magnet Feedback

The language on the materials was created by May Ying Ly and Phen Ly from the Southeast Asian Assistance Center in Sacramento and we welcome your input to pass on to them.

1. Tent Card and Magnet

Please take a few minutes to review the tent card and magnet and the content. Explain that they are mock-ups.

- In 10 words or less, what are these materials about?
- Who are these materials trying to speak to? Who are they relevant for?
- What are these materials asking you to do?
- Are the designs appropriate for the Hmong community?
- All of the information is in Hmong. Is this appropriate?

SECTION 3: Review TV and Radio script

Hand-out copies of the TV and radio scripts and give participants a few minutes to read the scripts.

- In 10 words or less, what is the TV spot about?
- Who is it trying to speak to? Who is it relevant for?
- What is it asking you to do?
- Segment 1: (Male in 30s as helper of other male): Is this the appropriate person to recognize warning signs in another man? Is the statement believable and "real"?
- Segment 2: (Female as helper of teen/young adult daughter): Is this the appropriate person to recognize warning signs in a youth? Is the statement believable and "real"?
- Segment 3: (Son as helper of older adult): Is this the appropriate person to recognize warning signs in an older adult? Is the statement believable and "real"?

Thank everyone for participating and hand out gift cards

Consent Form

Know the Signs Campaign Consent to Participate in Focus Group

You have been invited to participate in a focus group to inform materials for the statewide suicide prevention social marketing campaign *Know the Signs*. The campaign is funded through counties by the voter approved Mental Health Services Act (MHSA) (Prop 63) and administered by the California Mental Health Services Authority (CalMHSA). You were selected as a possible participant because you are Hmong and speak Hmong.

PURPOSE

The purpose is to help us understand how we can reach the Hmong community with information about suicide prevention and to offer feedback on printed materials.

PROCEDURES

If you choose to participate, you will be asked to participate in a group discussion about the outreach needs in your community and about the appropriate strategies to reach members of your community. This type of group meeting is called a focus group. The focus group will last about 1 and 2 hours. The focus group will not be audiotaped and no identifying information will be collected. There are no right or wrong answers to the questions that will be asked in the group; the important thing is for you to share your experience and opinions.

POTENTIAL RISKS AND DISCOMFORTS

We ask that you share only as much information as you wish. Other people in the focus group discussion will know what you say.

POTENTIAL BENEFITS

Your answers will help the Know the Signs campaign to develop culturally appropriate outreach materials for the Hmong community. You will receive no direct benefit from being in the focus group although you will be compensated for your time.

COMPENSATION FOR PARTICIPATION

You will receive a gift for being in the focus group that is worth approximately \$25 in value. If you decide to leave before the focus group is over, you will still receive the gift.

CONFIDENTIALITY

Your identity will be unknown. We will not disclose any information that can be identified with you, nor connect your name to any information we present.

PARTICIPATION AND WITHDRAWAL

Your decision whether or not to participate will not affect any services you now receive or will receive from The Hmong National Development. If you decide to participate, you are free to discontinue participation at any time. You may choose not to answer questions that you do not want to answer. The facilitator may withdraw you from this meeting if circumstances arise which in the opinion of the presenters warrant doing so. If this happens, you will still receive the gift for being in the focus group.

QUESTIONS

If you have any questions or concerns about the focus group please feel free to ask now. You may withdraw your consent at any time and discontinue participation without penalty. You are not waiving any legal claims, rights, or remedies because of your participation in this focus group.

Your signature indicates that you have read the information provided above and have decided to participate. You can keep a copy of this form.

Name of Participant _____ Signature of Participant _____ Date _____

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.

First and Last Name:	
Organization (if applicable):	Title (if applicable):
Email:	Phone:
Briefly describe your qualifications for this workgroup and why you are interested in participating.	

We are looking for individuals with experience working with or conducting outreach to these different groups. **Please mark which of these 11 workgroup(s) you are interested in**

- African American
- API Youth
- LGBTQ Youth
- Low literacy Spanish-speaking individuals.

Workgroups for the development of materials reaching individuals who speak these languages:

- Vietnamese
- Tagalog
- Cantonese/Mandarin
- Hmong
- Khmer
- Korean
- Lao

The Know the Signs campaign is part of statewide efforts to prevent suicide, eliminate stigma about mental illness and improve 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**.



Know the Signs >> Find the Words >> Reach Out
suicideispreventable.org

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