

笑容的另一面
也許暗藏痛苦



你身邊的朋友、家人或同事，都有可能正在痛苦的情緒中掙扎，甚至內心產生自殺的念頭，他們有可能只抱怨身體上的疼痛及痛苦，甚至外表卻似乎若無其事。

如果你觀察到身邊的親友需要投入更多關懷。請撥打防生命線 1.800.273.8255

若你留心觀察他們出現以下任何警告徵兆，並出現不尋常的行為，請伸出援手，及時提供協助。

- 談起想尋死或自殺的念頭
- 尋找傷害自己的方法
- 深感沮喪，不堪壓力負荷或陷入情緒困擾
- 一言噤聲或失聲
- 經常喜怒無常，煩躁或憤怒
- 對自己原本喜歡的事物失去興趣
- 作冒險的行為讓自己陷入危險之中
- 增加酒精或藥物的用量
- 將自己的財物送贈給別人
- 感覺自己成為別人的負擔
- 安排整理自己的事務

KNOW THE SIGNS
認識前兆

認識前兆

suicideispreventable.org

自殺可以預防

心中的陰影，需要有人
伸出援手！

KNOW THE SIGNS
認識前兆



Pain Isn't Always Obvious

KNOW THE SIGNS

suicideispreventable.org

Targeted Suicide Prevention Materials for the Chinese 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) --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. Background

Among the Asian American groups, the Chinese population is the largest ethnic group in the country and the third largest group in California.

Source: Chinese American Mental Facts. NAMI (2011); The Asian Population: 2010. U.S. Department of Commerce. U.S. Census Bureau, 2010.

In national comparisons, among “women aged 65 years and older, the suicide rate in Chinese Americans was much higher than among whites” and across all cultural groups “among women ages 15-24, Chinese American girls have higher suicide mortality rates than European Americans in that age range”.

Source: National Alliance on Mental Health (NAMI). Chinese Americans Mental Health Facts. October 2011.

In terms of expressing help-seeking behaviors related to disclosing thoughts of death and suicide, recent research suggests “Asian Americans consistently seek help at lower rates than any other racial or ethnic demographic”.

Source: Chur, J.P., Hsieh, KY, & Tokars, D.A. (2011). Help-Seeking tendencies in Asian Americans with suicidal ideation and attempts. Asian American Journal of Psychology, 2(1), 25-38.

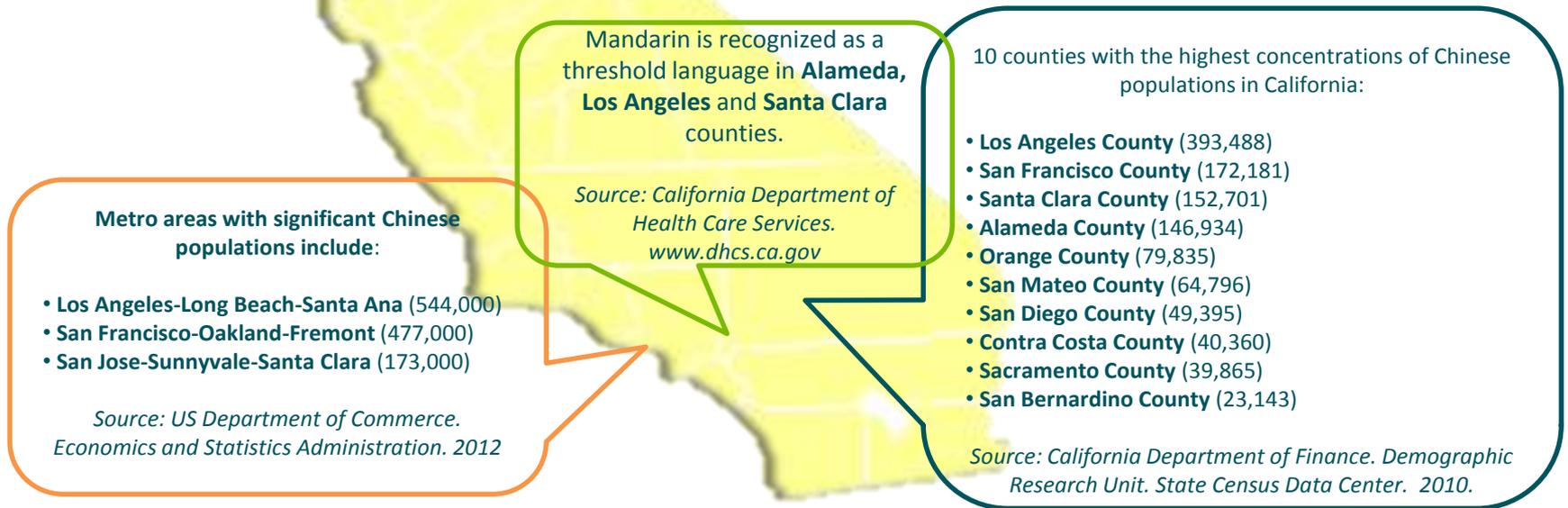
III. Members

Workgroup members for the Chinese cultural workgroup guided the development of campaign materials through their collaboration and participation in an orientation webinar (October 2nd) 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 (see Appendix C Workgroup Member Roster).

A total of 8 members participated in the workgroup to develop cultural adaptations of the suicide prevention materials in Chinese. Members represented the counties of **Alameda, Orange, Sacramento, San Bernardino, Los Angeles** and **San Francisco** from agencies such as the NICOS Chinese Health Coalition, the San Gabriel Pomona Regional Center, Dignity Health Medical Foundation, Reach Out, and Alameda Community Mental Health Services.

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 Chinese community. In addition, organizations serving this population were contacted directly and provided with a workgroup recruitment flyer.

Based on 2010 Census data, **Los Angeles, San Francisco, Santa Clara** and **Alameda** are among the counties with highest Chinese populations.



IV. Workgroup Discussions

Workgroup members were asked to contribute an estimated time commitment of 10-15 hours between July 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 (October 2 and January 15) 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).

Summary of workgroup discussions:

How is suicide discussed or not discussed in the Chinese community?

Similar to other Asian cultures, suicide and mental illness are topics not openly discussed or directly approached in the Chinese community due to issues related with stigma and shame. Often somatic complaints may offer cues to a person's overall emotional state including references to neurasthenia. Expressing thoughts of suicide may imply that a person has a 'weak character' or is 'irresponsible' as suicide is viewed as an 'easy way out'.

"In Chinese American culture, an individual's feelings of "integration" might be closely related to their success in keeping up with societal and familial expectations. If this is the case with this particular individual, it might help to make him or her realize that mistakes are inevitable at times, and perfectly normal for human beings." (Workgroup Member)

Who is at-risk for suicide in the Chinese community and who might their helpers be?

Workgroup participants suggested that women experience more social pressure (taking care of children and parents, health issues, financial issues) and tend to look to teachers (such as English teachers) and other community helpers for resources. Although family members may be the first to notice warning signs, they may not be the first to approach the person because they are unaware of how to do so. Persons at risk may look to faith leaders and community and agency staff as they are highly regarded and respected by the Chinese community for their status and experience. Workgroup members suggested potential helpers in the Chinese community could include church group elders, teachers, social workers, immediate family members, close friends, physicians and authority figures in the community.

"Overall, those who have these thoughts and feelings [of suicide] probably will not initiate the conversation but it will be displayed in their body language. Especially in the Chinese/Chinese-speaking communities where verbal communication is very limited in my experience being part of the Chinese diaspora, picking up on those non verbal cues: sad eyes, distant look, unwillingness to speak, etc. can allow us to start the conversation." (Workgroup Member)

V. Development of Materials

A poster in Chinese (Traditional), a bilingual brochure in English and Chinese (Traditional), and print ads were developed following a collaborative community review process (see appendix A Posters and Brochure).

Language Adaptation

Two different styles of spoken language form were suggested for the language adaptation: Mandarin and Cantonese. And two different styles of written form: traditional version and simplified dialect. Workgroup members suggested materials should be in Mandarin in Traditional version as many Chinese community members who can read Traditional Version can also read Simplified Dialect, but it would not be the case with Simplified Dialect. The language adaptation was provided by Sherry Chin (aka Hsiao-ling Chin) from Taiwan (a Mandarin-speaking country) who finished her Communication Art masters degree in New York. She has been a copy writer for over 10 years, specializing in Chinese language campaigns and further reviewed by Christina Nip and her colleagues from the NICOS Chinese Health Coalition.

Design

Following workgroup member suggestions for poster design, print materials were designed to reach female helpers (ages 40-60) who can recognize warning signs in a younger (ages 20-24) at risk person. Design suggestions included the following: 1) showing two people (one younger, one older) talking intimately, e.g. at a kitchen table drinking tea; 2) showing two people, one person standing in the shadow (in a house, female, older adult 60s plus) and another person reaching out their hand to them (female middle-aged). It was suggested to play with the light to show hope and accentuate the person reaching out as offering that hope; and 3) showing that someone might be perfect on the outside, but different on the inside, having a young person (mid 20s) looking into a mirror with a smile, but with the image reflected back being sad and to show a helper (also female 40-60) in the far background looking into the room seeing the image in the mirror.

Workgroup members were presented with two design style options considering their design suggestions and members chose design style option 1 showing the young woman looking in the mirror and the helper to her side. Workgroup members initially preferred photo images over illustrations, however, after realizing the limited stock images available consensus was reached to go with an illustration in which various cultural concepts could be captured through a customized illustration. Workgroup members were presented with two illustration styles and selected illustration style option 1, Ralph Voltz. A native of Offenbach, Germany, Ralph Voltz started illustrating using traditional painting and drawing media but now creates most of his work digitally. His illustrations have appeared on more than 350 novel and book covers, and he has worked with a variety of agencies, companies and publishers. Ralph is an instructor of graphic design at King's College in North Carolina, specializing in digital and traditional art.



Design style option 1



Design style option 2

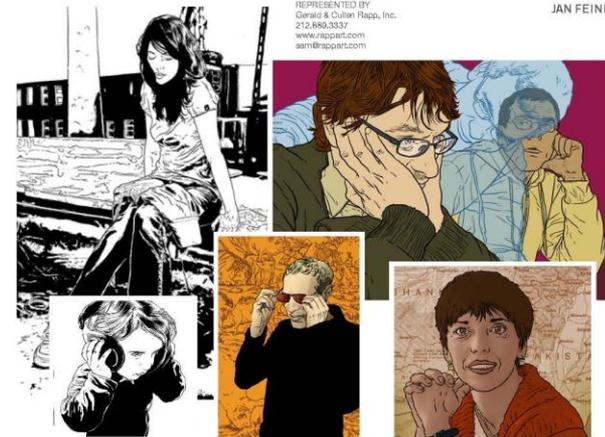


REPRESENTED BY
Deborah Wolfe Ltd
215.232.0069
www.illustrationOnLine.com
info@illustrationOnLine.com

RALPH VOLTZ



Illustration style option 1



REPRESENTED BY
Gerald & Cullen Rapp, Inc.
212.889.3337
www.rappart.com
asm@rappart.com

JAN FEINDT

Illustration style option 2

Headlines

Members were also asked to choose a poster headline from the following options. The options highlighted in bold reflect the top choices identified by workgroup members. Out of these choices: “The pain could be hidden in another side of the smile” was selected because it most appropriately complimented the selected illustration.

1. 關心，就要說出口 *(If you're) concerned, (you should) speak it out*
2. 用心聆聽，提供正面能量 *Listen with your heart to provide positive energy*
3. 誠摯的關心，可振奮生命力量 *Sincere concern can encourage the power of life*
4. 關懷傾聽，開啓心靈之鎖 *Open the lock of a heart by being concerned and listening*
5. 心中的陰影，需要有人伸出援手！ *The shadow in the heart needs someone to give a hand!*
6. 你的一臂之力，可助人走出陰影 *Your "one-arm strength" (a Chinese idiom that means "help") can help someone walk out of a shadow!*
7. 伸出援手，點亮他人內心陰暗角落！ *Give a hand to light up the shadowed corner in someone's heart!*
8. 笑容的另一面，也許暗藏痛苦 *The pain could be hidden in another side of the smile*
9. 笑容，不見得反映真實內心 *The smile may not reflect the true feelings of the heart*
10. 笑容下的痛苦，需要你正視！ *You need to look squarely at (attach importance to) the pain under the smile!*

笑容的另一面，也許暗藏痛苦

The pain could be hidden in another side of the smile

“For me this message is quite strong and direct. I think it is good to use a clear strong concept of "pain" or "hidden pain" which conveys gravity of observing, caring and acting on observations. This heading is good because it is informative. I think a follow up sentence stressing the fact that the helper has the "power" to "act" to "help" to "reach out" would make it even stronger.” (Workgroup Member)

Final Design -- Draft 1

The Know the Signs campaign contracted with workgroup member Christina Nip, along with her colleagues Kent Woo and Michael Liao from NICOS Chinese Health Coalition, to guide the final illustration and poster design.



“The individuals don’t look very Chinese to me quite yet. Their body shape is slightly too stocky. The hair of the girl in the mirror (standing and smiling) also seems uncharacteristically wavy.

The clothes of the helper don’t seem to fit the attire of those in that age group. The T-shirt and jeans is not what the helper group typically wears in my experience. People in the helper group I have interacted with tend to wear more loose fitting shirts/blouses and slacks. They rarely wear jeans or fitting pants like depicted above. It might make more sense if the clothes were switched between the two.

The setting does not feel like a typical Chinese household. The furniture design of the rectangular mirror with the wide wooden frame, the dresser and the decorative plant are not commonly found in a Chinese household. Please consider removing the dresser and plant, and making the mirror full length. Or consider placing Chinese decorative images such as the New Year fortune paper cutting decorations on the wall. Or if the layout has to be kept, consider switching the plant to those typically displayed in Chinese families, such as lucky bamboo plants, or orchids.”

(Workgroup Member)



"I think this second draft of the illustration is much improved when looking at cultural appropriateness! I like the changes made to the mirror, the plant, and the faces, hair and overall look of the characters.

The mirror design and the bamboo plant are something that many Chinese -our target audience- would recognize and find familiar and are clear signifiers of who the picture is addressing. The clothes of the characters are also appropriate for their age. The faces, hair and body shape of characters are also appropriate and familiar looking to our experience. Overall, I think the changes are great.

I am wondering if you all are still working on changing anything else about the illustration. My main feedback now comes from the girl's reflection in the mirror. Currently the heading reads "Behind the other side of a smile may be hidden pain." The strength of the heading in the word "pain" is not conveyed in the reflection. That reflection seems mildly sad, but doesn't convey the feelings of hidden pain. Perhaps, the reflection can be more dramatic. The character can be hanging her head, crying, burying her face in her hands, hunched over, having greater facial expression, or physically embodying the many "signs" we want people to know about suicide. Currently, there is not very much emotion conveyed to me through the illustration. The emotions of the characters seem muted, which is actually all right for the two outside of the mirror, but I think the illustration would speak a clearer and stronger message if the emotions of the character in the reflection can be emphasized and heightened."

(Workgroup Member)

Final Design -- final draft in color



“I much prefer this new version with the more dramatic expression of pain and sadness. All the graphic details look great to me! I am excited to see the finished product.”

(Workgroup Member)

VI. Distribution

Workgroup members suggested outreach strategies could include education workshops at churches, temples, community agencies and schools, Chinese radio, TV and newspaper ads, outdoor ads, take-away items (flyers), bus ads and displaying outreach materials in community venues such as libraries, health clinics, family service agencies and ESL schools. In an effort to recognize the best outreach strategies to reach the Chinese community in California we interviewed several organizations statewide who have in the past implemented the lay health worker model as a strategy to reach this community with public health campaigns. Organizations contacted included the NICOS Chinese Health Coalition, the Chinatown Public Health Center, the Chinese Community Health Resource Center and the Healthier Living Project. Although a lay health worker model approach may be an effective strategy for direct consumer outreach for the Chinese population, due to limited time and funding it did not present itself as a feasible strategy for our efforts (see Appendix D for Summary of Interviews).



NICOS Chinese Health Coalition is a public-private-community partnership of more than 30 health and human service organizations and concerned individuals. NICOS' membership includes health care agencies, education- and faith-based institutions, housing and community development organizations, and child and youth development agencies. www.nicoschc.org/

Instead, a partnership was established with the NICOS Chinese Health Coalition in San Francisco to distribute and disseminate the materials in San Francisco, the surrounding Bay Area and statewide through their network of health and human service organizations, Asian-physician organizations, participation in community events, health and wellness fairs, and media outreach to Chinese news media.

As of October 31st, NICOS has received commitments to display and distribute materials for 23 partner agencies located in the San Francisco Bay Area and throughout Southern California and has fielded requests for a total of 3,285 bilingual brochures and 103 Chinese posters. In addition, NICOS created a bilingual press release on suicide prevention and the Know the Signs campaign in the context of Mental Health Awareness Week which was printed in 2 resources—World Journal and 21city.com on Oct. 10th and announced in 1 radio station—Singtao Radio. NICOS has also conducted outreach to the Chinese community during 8 community events including the 19th Annual Chinatown Community Health Fair, the World Journal Health Expo and the San Francisco District Attorney's Office Chinatown Resource Fair among others. Six NICOS staff members and interns also received a 2 hour training on suicide prevention from San Francisco Suicide Prevention and as a result, NICOS staff have in turn been able to provide basic training and introduction on the topic of suicide prevention to community members and partners. So far, NICOS has presented to 114 seniors at the Chinatown CDC tenant buildings, 8 staff members of the Asian Women's Shelter and to 30 staff members of the Chinatown Public Health Center.

In addition to outreach materials a media buy for print publications was implemented in July 2014 in The China Press (Los Angeles and San Francisco counties), Epoch Times (Los Angeles county) and Sing Tao (San Francisco county).

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: Poster, Brochure, Print ads and Customized Materials



Approximate Translation from Chinese to English

The pain could be hidden in another side of the smile

The warning signs of emotional pain of someone are not always obvious, but if you do observe them, you can provide the help in time.

If you observe closely and find that they have any of the following warning signs, and if they have unusual behaviors, please give a helping hand to provide help in time.

- Talk about wanting to die or suicide
- Look for ways to harm themselves
- Feel depressed or unable to deal with the burdens of stress or feel trapped
- Sleep too much or unable to sleep
- Has mood swings, is frustrated or angry
- Lose interest in things that they usually love
- Put themselves in danger by engaging in reckless behaviors
- Increase in use of alcohol and drugs
- Give away their personal belongings
- Feel they have become a burden to others
- Arrange or place their affairs in order

If you see any of the above signs in your family or friend, don't hesitate. Please consult with a doctor or call the National Suicide Prevention Lifeline at 1.800.273.8255 for more information.

KNOW THE SIGNS

Every day, there are friends, family or co-workers around you who could be struggling with emotional pain. They may even have suicidal feelings, but don't show them or they may only complain of physical aches and pains.

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 wanting to die or suicide
- Seeking methods for self-harm or suicide
- Feeling hopeless, overwhelmed by stress, trapped
- Changes in sleep
- Mood swings, anger, anxiety
- Withdrawal
- Reckless behavior
- Increased drug or alcohol use
- Giving away possessions
- Feeling like they are a burden to others
- Putting affairs in order

PAIN ISN'T ALWAYS OBVIOUS



THE SHADOW IN THE HEART NEEDS SOMEONE TO GIVE A HAND!

心中的陰影，需要有人伸出援手！

瞭解徵兆

每天，身邊的朋友、家人或同事，都有可能正在痛苦的情緒中掙扎，甚至內心產生自殺的念頭，他們有可能只抱怨身體上的疼痛及痛苦，甚至外表都數字若無其事。

給你朋友或家人出現以下任何警覺徵兆，並出現不尋常的行為，請伸出援手，及時提供協助。

- 談論想尋死或自殺的念頭
- 尋找傷害自己的方法
- 深感沮喪，不遂願力真或陷入情緒泥淖
- 一言不發或失眠
- 經常漏班曠工，情緒或憤怒
- 對自己原本喜歡的事物失去興趣
- 作冒險的行為讓自己陷入危險之中
- 增加酒精或藥物的用量
- 將自己的財物贈送給別人
- 感覺自己成為別人的負擔
- 安排整理自己的事情






尋找適當言語

聽你所關心的人健談有關自殺並不簡單，但對於自殺預防來說，及與有自傷心的人健談有關自殺的警覺徵兆非常的重要。給您想尋找適當的方法來開始交談，以下是一些實用的建議：

嘗試開始交談
在對話中詢問你所注意到的警訊

探問自傷原因
“我真的很在乎你，所以我需要知道，你是不是在考慮結束自己的生命？”

用心傾聽
表達關心並安慰對方的情緒

下列為可協助支撐他們的有效方法：

- 陪伴在旁，並表達你的關心及隨時提供協助的準備
- 安慰並請他們尋求幫助並非可恥的事
- 協助他們尋求專業協助，社區服務或與家庭成員討論下一個步驟

尋求外援

請撥打全美自殺預防生命線
1.800.273.8255
多位訓練有素的輔導員可為您提供每週7天，每天24小時的全天候支援。

REACH OUT

Call
1.800.273.8255
Trained counselors are available 24/7 to offer support at the National Suicide Prevention Lifeline.

FIND THE WORDS

Talking to someone about suicide can be difficult. But when it comes to suicide prevention, it is important that you speak with the person right away if they show any warning signs. Finding the words to begin the conversation can be difficult. Here are some practical suggestions:

START THE CONVERSATION
Mention the warning signs you are noticing.

ASK ABOUT SUICIDE
“I really care about you, so I need to know if you are thinking about ending your life?”

LISTEN WITH YOUR HEART
Express concern and reassure.

The following are some ways you can help and support them:

- Stay with them and show that you care and are there to help.
- Reassure them that there is no shame in getting help.
- Talk to and discuss next steps with a mental health clinician or doctor, a community leader or other family members.

此外，你亦可瀏覽英文網站
suicidepreventionable.org
上“Reach Out” (遠手相助)
內容，專員關於如何與自傷者進行溝通與協助建議。

Visit
www.suicidepreventionable.org
for more information and social resources.

--Brochure--	
Back Translation	TRADITIONALCHINESE
The Shadow in Someone's Heart, Needs a Helping Hand!	心中的陰影，需要有人伸出援手！
Know the Signs Every day, friends, family members, even co-workers around us may be in pain and dealing with emotional struggles, they may even have suicidal thoughts, but they may appear normal.	瞭解徵兆 每天，身邊的朋友、家人或同事，都有可能正在痛苦的情緒中掙扎，甚至內心產生自殺的念頭，他們有可能只抱怨身體上的疼痛及痛苦，甚至外表卻似乎若無其事。
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. <ul style="list-style-type: none"> Talking about wanting to die or suicide Looking for ways to harm themselves Feels depressed or unable to deal with burdens of stress or feel trapped Sleep too much or unable to sleep Has mood swings, is frustrated or angry Lose interest in things that they usually love Put themselves in danger by engaging in reckless behaviors Increase in use of alcohol and drugs Giving away their personal belongings Feel they have become a burden to others Arrange or place their affairs in order 	若你朋友或家人出現以下任何警告徵兆，並出現不尋常的行為，請伸出援手，及時提供協助。 <ul style="list-style-type: none"> 談過想尋死或自殺的念頭 尋找傷害自己的方法 深感沮喪、不堪壓力負荷或陷入情緒困境 一直嗜睡或失眠 經常喜怒無常、煩躁或憤怒 對自己原本喜歡的事物失去興趣 作冒險的行為讓自己陷入危險之中 增加酒精或藥物的用量 將自己的財物送贈給別人 感覺自己成為別人的負擔 安排整理自己的事務
Find the Appropriate Language	尋找適當言語
It is not easy to talk about suicide with someone you care about. But for suicide prevention, it is very important that you talk to someone you care for about the warning signs that you have noticed. If you are looking for appropriate ways to begin the conversation, below are some practical suggestions: Try to Begin the Conversation	跟你所關心的人傾談有關自殺並不容易。但對於自殺預防來說，及時和您所關心的人傾談有關您所察覺到的警告徵兆非常的重要。若您想尋找適當的方法來開始交談，以下是一些實用的建議： 嘗試開始交談

Talk about the warning signs you noticed in your conversation	在對話中提到你所注意到的警訊
Ask About Suicide Intention "I really care about you, so I need to know, are you considering ending your own life?"	探問自殺傾向 “我真的很在乎你，所以我需要知道，你是不是在考慮結束自己的生命？”
Listen Carefully Express concern and console the other person's feelings.	用心傾聽 表達關心並安撫對方的情緒
Below are some effective ways you can help them: <ul style="list-style-type: none"> Accompany them, express your concern and your willingness to help Console them and let them understand that asking for help is not a shameful thing Discuss next steps with Mental health clinicians or physicians, community leaders and other family members 	下列為可協助支援他們的有效方法： <ul style="list-style-type: none"> 陪伴在側，並表達你的關心及隨時從旁相助的意願 安撫並讓他們瞭解尋求幫助並非可恥的事 與精神健康臨床專家或醫師、社區領袖或其他家庭成員討論下一個步驟
Seek Additional Help	尋求外援
Please call the National Suicide Prevention Lifeline 1.800.273.8255 Many well trained counselors can provide you with assistance 24/7. In addition, you can visit the English website Suicideispreventable.org Visit "Reach Out" content to find helpful resources near the location where you live.	請撥打全美自殺預防生命線 1.800.273.8255 多位訓練有素的輔導員可為你提供每週7天、每天 24 小時的全天候支援。 此外，你亦可瀏覽英文網站 suicideispreventable.org 上 "Reach Out" (尋求外援) 內容，尋找關於你居住區域附近所提供的協助資源。



**笑容的另一面，
也許暗藏痛苦**

別人深陷於痛苦情緒的警訊，並非都明顯可見，但你若留心觀察出徵兆，就能及時提供協助。

您身邊的人是否：

- 談過想尋死或自殺的念頭？
- 深感沮喪、不堪壓力負荷或被情緒困擾？
- 抱怨身體上的持續疼痛及痛苦？
- 一直嗜睡或失眠？
- 哭泣過度？
- 出現不尋常行為？
- 經常喜怒無常、煩躁或憤怒？
- 對自己原本喜歡的事物失去興趣？
- 讓自己陷入危險之中？
- 濫用酒精或藥物？
- 將自己的財物送贈給別人？
- 安排或整理自己的事務？

如果你觀察到身邊的親友有任何上述徵兆，就代表你需要投入更多關懷。請向醫生諮詢或撥打全美自殺預防生命線 **1.800.273.8255** 獲得更多資訊。

KNOW THE SIGNS   **suicideispreventable.org**
自殺可以預防

認識前兆



**笑容的另一面，
也許暗藏痛苦**

別人深陷於痛苦情緒的警訊，並非都明顯可見，但你若留心觀察出徵兆，就能及時提供協助。

您身邊的人是否：

- 談過想尋死或自殺的念頭？
- 深感沮喪、不堪壓力負荷或被情緒困擾？
- 抱怨身體上的持續疼痛及痛苦？
- 一直嗜睡或失眠？
- 哭泣過度？
- 出現不尋常行為？
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需要投入更多關懷。
防生命線 1.800.273.82

若你留心觀察他們出現以下任何警兆徵兆，並出現不尋常的行為，請伸出援手，及時提供協助。

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- 對自己原本喜愛的事物失去興趣
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認識前兆

suicideispreventable.org

自殺可以預防



KNOW THE SIGNS

Every day, there are friends, family or co-workers around you who could be struggling with emotional pain. They may even have suicidal feelings, but don't show them or they may only complain of physical aches and pains.

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 wanting to die or suicide
- Seeking methods for self-harm or suicide
- Feeling hopeless, overwhelmed by stress, trapped
- Changes in sleep
- Mood swings, anger, anxiety
- Withdrawal
- Reckless behavior
- Increased drug or alcohol use
- Giving away possessions
- Feeling like they are a burden to others
- Putting affairs in order

PAIN ISN'T ALWAYS OBVIOUS



THE SHADOW IN THE HEART NEEDS SOMEONE TO GIVE A HAND!

心中的陰影，需要有人伸出援手！



認識前兆



瞭解徵兆

每天，身邊的朋友、家人或同事，都有可能正在痛苦的情緒中掙扎，甚至在內心產生自殺的念頭，他們有可能只抱怨身體上的疼痛及痛苦，甚至外表卻似乎若無其事。

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認識前兆

suicideispreventable.org
自殺可以預防

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Appendix B: Your Voice Counts Discussions

Welcome! Please respond to this post.



WORKGROUP DISCUSSION

Welcome! Please respond to this post.



[Jana_YourSocialMa...](#)
Welcome! Please let us know you are here by introducing yourself to the group.

[PRIVATE FEEDBACK](#) (0)

10 comments [POST COMMENT](#)
([COMMENT FORM](#))



tinanova
August 29, 2013 - 5:00pm

Hi, I'm Christina Nava, I look forward to meeting you all.



maxxg_68
August 28, 2013 - 9:39pm

Hello everyone, my name is Maximo Garcia V. I am a LCSW, working for Kaiser Permanente and teaching at Sacramento State. I hope I get a chance to meet everyone.



marissalee
August 28, 2013 - 8:40pm

Hi everyone, my name is Marissa! I am a second generation Taiwanese American and look forward to serving on this workgroup.



Christina Nip
August 28, 2013 - 12:00pm

Hi everyone,

My name is Christina and I am excited to be a part of this work group. I look forward to getting to know and working with all of you!

Regards,

Christina Nip



rdlp92
August 26, 2013 - 1:26am

Hello Everyone!

My name is Roberto, and I am very happy to get to know you all and work with you! Hope your days are going good!

Rob*



rdlp92
August 26, 2013 - 1:26am

Hello Everyone!

My name is Roberto, and I am very happy to get to know you all and work with you! Hope your days are going good!

Rob*



erlath27
August 24, 2013 - 9:35pm

Hi everyone! I am excited to get on board with this project.



ahuyh
August 24, 2013 - 1:05pm

Hi Everybody,

My name is Anna and thanks for having me participate in this group. Looking forward to working with you all.

Have a great day!

Anna



Theresa Ly
August 23, 2013 - 4:27pm

Hello everyone! Thanks for participating in this workgroup, and I'm looking forward to chatting with you all.

-Theresa



maxxg_68
August 28, 2013 - 9:41pm

Hi Theresa, looking forward to working with you. Max :)

POST NEW COMMENT

YOUR NAME:
em



Preparing for our orientation webinar



WORKGROUP DISCUSSION

Preparing for our orientation webinar



[Theresa Ly](#)
Hi everyone!

I'm looking forward to chatting with you all on Wednesday, October 2nd to get you oriented to the Know the Signs Campaign Chinese Workgroup to create suicide prevention outreach materials for the Chinese speaking community. Thanks again for your time in providing your valuable feedback to this project.

Here are a few housekeeping items to share in preparation for next week:

Technology

After you registered for the webinar, you should have received an email with webinar access information from Go2Webinar, which included a weblink and a conference number to call into. *If you do not have this webinar access information, please email me (tly@edc.org), so I can give you your unique access information.*

At the time of the webinar, please make sure you are at a computer with an internet connection, as you will need to follow the presentation that I will be sharing on the screen. Click on the provided weblink and that will install and open the Go2Webinar screen and the Go2Webinar Control Panel.

If you have a computer mic & speakers, please make sure you use a headset in order to reduce background noise.

If you would rather speak via the phone, please go to the Go2Webinar Control Panel, under "Audio", and choose "Telephone". Make sure to type in the Audio Pin provided in the Go2Webinar Control Panel.

Questions for discussion

Here is a pretty comprehensive list of discussion starters that we will talk about either during the webinar, or afterwards as we continue the conversation here on the Your Voice Counts Chinese Workgroup. Please take a few moments to consider these questions before the orientation webinar.

Discussion Question One:

- How is suicide perceived among the Chinese-speaking community?
- How is suicide discussed, or not discussed among the Chinese-speaking community?
- What are barriers for helpers in the Chinese community to help others?

Discussion Question Two:

- What existing suicide prevention materials aimed at helpers (not those in crisis) exist to reach this group?
- What types of materials would resonate or work most effectively for the helper?
- What resources should be listed? What mental health-related resources are accepted by the Chinese community locally, statewide or nationally?
- Throughout the state of California, what organizations should receive these materials?

Discussion Question Three:

- What kind of image/setting would be most appropriate?
 - Photo or Illustration?
 - Who should be portrayed as "the helper" and who should be portrayed as the "person who needs help"?
- What is an appropriate headline?

I have also attached the PowerPoint presentation we will use during the orientation webinar (see below). If you have any questions, please don't hesitate to call me at 916.494.9616 or email me at tly@edc.org.

Thanks, and talk to you next week!

Theresa

PRIVATE FEEDBACK (9)

Attachment:

[Chinese Orientation 10-2-13.pdf](http://www.yourvoicecounts.org/sites/default/files/Topic/Chinese_Orientation_10-2-13_0.ppt#) (http://www.yourvoicecounts.org/sites/default/files/Topic/Chinese_Orientation_10-2-13_0.ppt#)

[comments](#) [POST COMMENT](#)
(#COMMENT-FORM)

POST NEW COMMENT

YOUR NAME:
em



Disable rich-text (javascript:void(0))

CAPTCHA

This question is for testing whether you are a human visitor and to prevent automated spam submissions.



WHAT CODE IS IN THE IMAGE?: *

Enter the characters shown in the image.

SAVE

How is suicide discussed, or not discussed in the Chinese community?



WORKGROUP DISCUSSION

How is suicide discussed, or not discussed in the Chinese Community?



Theresa Ly

Notes from our webinars on October 2nd: In general, participants thought that there was a low degree of comfort in the Chinese community when it comes to talking about suicide - people tend to keep the topic of suicide and mental health at arms length. Like other Asian cultures, there is a sense of shame associated with individuals who have had thoughts of suicide. In addition, there is general lack of education about suicide, and some strong misconceptions. For example, some people may believe that if they talk about suicide or other "bad things", those things will actually happen.

There was some discussion about how some people do express suicidal thoughts, even if they do so in an exasperated or frustrated way (i.e.: "You make me want to kill myself!"). However, it is important to frame suicidal thoughts as mental health issues (stress, anxiety etc...) - if asked directly about suicidal thoughts, people will ultimately deny it.

Please offer additional thoughts and also consider these questions:

- How would someone who is concerned about another person start a conversation about suicide?
- How might a person who is having suicidal thoughts express this to someone else?

PRIVATE FEEDBACK (#)

14 comments

POST COMMENT
(COMMENT FORM)



Theresa Ly

October 31, 2013 - 3:58pm

Hi all,

Sorry for being a little absent on these comments - I just got back from vacation to see this very rich discussion! Thanks for being so active on this forum so far.

I think we have a great deal of information to work off here with regards to how a helper could offer assistance and some behavioral signs to look for. All of this information will help us with the language that we'll eventually land on and the emotions that the marketing piece will attempt to convey.

To answer Marissa's concerns and questions directly - thank you for underscoring the need for bilingual materials and for not using "Chinese"-specific terminology in the marketing materials. I don't believe it was ever our intent to directly call out to the Chinese community with these marketing materials (we'd be more likely to do it with imagery than in text), I still think it's an important thought to bring to the table, just to be sure.

We will wrap up this conversation and please watch out for the second set of discussion questions, which will come out shortly!

Thanks,

Theresa

marissalee



October 30, 2013 - 11:23am

I appreciate the comments regarding how our outreach materials should also reach those who do not consider themselves to be part of the Chinese community, but do speak Chinese. Are there any unique approaches we should take to reach out to this group?

Because the Chinese and Chinese speaking communities are a diaspora, I believe we should have the outreach materials be bilingual to encompass all. I think a way to do this would be to not designate a specific population or refer to Chinese people directly in the printed or spoken materials. Instead of saying "If you are a Chinese family with a family member that may be feeling suicidal" just say "If someone in your family..." and skip the specifier. Don't use specific terms like zhongguoren.

In printed materials there is the additional complication of there being two different writing systems used by the Chinese-speaking community: traditional and simplified Chinese. Depending on the target audience and the content of the printed material, you have to make your best judgement to decide to use one or the other. Optionally, you could bifurcate the materials so they are printed both in traditional and simplified Chinese.

Additional thoughts:

Maybe something around how to engage someone you sense is "withdrawing from life"? The concept of "withdrawing or pulling away" may be more easy for people to engage with than the concept of being "suicidal." Still clustered around depressive symptoms.

With older immigrants there may be the additional factor of isolation (and changing expectations of what their life would look like as an older person...perhaps they thought they would live with extended family when they got older, instead they are living in a residential care facility, etc.) There may be additional etiquette violations if it is a younger individual or younger family member asking about someone's suicidality versus coming from a same-aged peer.

With younger individuals they may not feel like they can talk to their parents or family about suicide. Is the goal to create a campaign that makes it easier for family members to have these conversations, or is the goal to remind individuals that they may be access to other resources of support if family is not available?



rdlp92

October 24, 2013 - 11:04am

Hello Everyone!

In regards to the first question "talking to someone about suicide" it is important that the topic be approached indirectly. Unfortunately, there is a lot of stigma against mental health issues in the Chinese community (as well as in most other communities) so using words like "suicide, depression, mental health etc." might make the person feel uncomfortable and scared. Maybe one can start the conversation by talking about a personal experience so that the focus is not immediately on the person with suicide ideation, but on the person who is trying to reach out to them. Not only will this soothing bring up the topic, it will also make the person feel that they are not the only one that struggles with these types of things. In order to change the conversation to them, the person trying to reach out could say "Have you ever felt something similar?" or even just a simple "what do you think?"

Once the conversation gets started, it's important to make the person feel like they are not isolated. In Chinese American culture, an individual's feelings of "integration" might be closely related to their success in keeping up with societal expectations and family expectations. If this is the case with this particular individual, it might help to make him or her realize that mistakes are inevitable at times, and perfectly normal for human beings. The speaker might want to share his or her own experience with failure so that the person does not feel isolated. The person will likely believe that his or her mistakes are enormous in comparison to the ones you bring up, and that might often be true. The important thing in this situation is to make the person feel important and that despite all their mistakes, they matter to you and many other people, otherwise you wouldn't be there to try and help.

Overall, these are my suggestions;

- Approach the topic indirectly
- Talk about your own issues and try to soothingly get the other person to talk about their struggles
- Talk about mistakes and failure, and how they are not the only ones experiencing this
- Let the person know how much they matter to you and other people

In regards to the second question "how can a person with suicidal thoughts express this to someone else?", I suggest once more that the individual bring the topic up with ease. The individual might have this idea in their head that in order to talk about the issue, they need to be in a very serious setting where the person has to confess what they are going through in a very straightforward manner. It is completely acceptable to approach the topic lightly. The person can find someone they can trust and get together for something unrelated to the issue, such as for lunch, bowling, etc. Make sure that the person plans to have some time (such as walking to and from a certain place, or sitting down to eat) to talk about what they've been going through. If the person is struggling to bring the topic up, they can try to talk about their symptoms instead, "I haven't been able to sleep, eat, or have fun." If the individual chooses to take this indirect approach, he or she has to commit to making VERY obvious indirect comments and signals so that the person they are trying to reach out to is able to decipher their meaning. They should also not feel sad if person does not understand. It does not mean that they don't care about you, they just can't decipher what you are trying to say. Over time, the individual should allow their signs to become more forward, up until the point that the person is able to talk about what they are going through.

I really enjoyed reading what you all had to say. Its very nice to be part of such a compassionate group of people that are working for this awesome cause. I hope my suggestions are useful.

Thank you,

Roberto*

References:

<http://www.spinz.org.nz/page/299-responding-to-people-at-risk-of-suicide+understanding-suicide-across-culture> (<http://www.spinz.org.nz/page/299-responding-to-people-at-risk-of-suicide+understanding-suicide-across-culture>)

<http://www.apa.org/pi/ocma/resources/ethnicity-health/asian-american/suicide.aspx>
(<http://www.apa.org/pi/ocma/resources/ethnicity-health/asian-american/suicide.aspx>)

<http://www.sfgate.com/health/article/Asian-Americans-struggle-with-suicide-4214483.php#page=2>
(<http://www.sfgate.com/health/article/Asian-Americans-struggle-with-suicide-4214483.php#page=2>)



tinanova
October 23, 2013 - 8:45pm

Someone who is having suicidal thoughts can express their feelings by talking about the changes they have felt (emotionally, physically, spiritually) which have brought on a sense of hopelessness. The helper can educate themselves in learning how to respond and identify risks for the person with SI thoughts.



tinanova
October 23, 2013 - 8:42pm

I believe the best way to start a conversation about suicide is to express your own concern and care for the person and address the persons sense of hopelessness, assess for safety issues, and engaged some form of plan and support system. It is highly beneficial when the client can commit to it and maintain regular contact to provide safety, resources, and support.



tinanova
October 23, 2013 - 8:36pm

Thanks Maxx, I really appreciate the information you posted. As you pointed out Asian Americans identify their depressive sx's as more somatic sx's and as clinician and helpers its important to show individuals concern and care. It's also key to educate clt about their sx's and how they affect their life in order to grow self-awareness. Thank You!!



maxx5_68
October 21, 2013 - 10:07am

Many Asian Americans who are depressed may not outrightly say that they are suicidal. Be attentive to somatic complaints, such as head aches, body aches, not sleeping and eating well. Also, the client may be making plans with finances, giving things away, more isolation, displeasure in daily activities. The majority of the Asian Americans that I have worked with (after some gentle questioning and assessment questions) do express their suicidal thoughts.



maxx5_68
October 21, 2013 - 9:43am

It has been my experience that when you suspect some that maybe having suicidal thoughts, it is a good idea to do a "check-in", to determine how the person is doing. Start by informing the person that you care about them very much, and that you are there to help in any way. Then develop a conversation about specific events or stressors that has been impacting the person. At this time, you can assess of how the person's level of functioning maybe effected. Are they losing sleep? How is there eating? How are their moods? Are they having any body aches? Look for behaviors that are out of their character. Reassure the person that you care ONLY asking because you care about him/her very much. You can then ask if they are having any ideas of thoughts of hopelessness. Many people who are stressed and depressed may have feelings of hopelessness. If so, then you could ask about suicide thoughts or ideas of hurting themselves.



Theresa Ly
October 17, 2013 - 8:40am

Great stuff everyone! Anna, thank you so much for giving us some personal insight into how you have helped your friend and sister through some difficult times. Those are incredibly powerful stories.

There are still a few people who haven't responded to this discussion thread yet - Lai Meng, Roberto, Maximo - do you have any thoughts to share?



erlath27
October 14, 2013 - 10:55am

- How would someone who is concerned about another person start a conversation about suicide?

Definitely not direct like "Are you suicidal?" The person would first see how life is going for the other person and see what he or she has been up to lately. If they notice that the person has not been doing their normal daily routine or is feeling helpless then that is definitely a sign that he or she is suicidal. I think a big component of starting a conversation about suicide is by not drilling them with questions, but more so listening. Listening gives the person the comfortability to open up on their own time.

Another great way to start a conversation about suicide is to be relatable. The helper should maybe give an example of a time he or she felt down and low.

- **How might a person who is having suicidal thoughts express this to someone else?**

They may be too ashamed to admit the truth (that they are suicidal), and cover it up with "I am fine." Or they may be too overwhelmed to know where to start. Or they may just not want to talk about it at all.



ahuyinh
October 11, 2013 - 11:35am

First off, thank you, Marissa and Christina for your research and insights! I do agree on what you both said.

Here are my responses:

I appreciate the comments regarding how our outreach materials should also reach those who do not consider themselves to be part of the Chinese community, but do speak Chinese. Are there any unique approaches we should take to reach out to this group?

Because the Chinese and Chinese speaking communities are a diaspora, I believe we should have the outreach materials be bilingual to encompass all.

How would someone who is concerned about another person start a conversation about suicide? How might a person who is having suicidal thoughts express this to someone else?

When I was in high school, my friend contemplated committing suicide. I actually asked her how she was feeling and why she was feeling that way initially. After she discussed with me about her feelings, she alluded to not wanting to be in this world, to just leave and forget about this life. I knew she was then considering suicide. I showed as much empathy as possible, told her how much I and everyone else cared for her, and all the great things she can be/do/have if she did not end her life. We talked for a long time and she finally came around. Luckily, she did not do it and is doing well.

Last year, my older sister was very depressed due to chronic health conditions which resulted in her having to quit her job. She harbored a lot of guilt, shame, pain and I could see her going in a downward spiral. I lived with her then so I was able to observe all the negative mood changes and behaviors. She would cry hysterically at times, seemed lifeless, and would not talk. We are very close so we could always talk with each other. I continuously consoled and counseled her asking her what she was feeling, why and telling her to forgive herself as she blamed herself a lot. Through talking, she also said that she didn't want to live anymore. I urged her to seek professional help, gave her numbers to call, and encouraged her that counseling and medication together will help her feel better. Luckily, she too did not do it and is doing well.

Overall, those who have these thoughts and feelings probably will not initiate the conversation but it will be displayed in their body language. But it is the surrounding support who has to initiate that verbal communication to get them talking about what is going on. Especially in the Chinese/Chinese speaking communities where verbal communication is very limited in my experience being part of the Chinese diaspora. Picking up on those non verbal cues: sad eyes, distant look, unwillingness to speak, etc, can allow us to start that conversation.

Please let me know if there were other questions I need to respond to!

Thanks and have a great day everybody!

Anna



Theresa Ly
October 11, 2013 - 8:50am

Hi all,

Marissa & Christina - thank you for your very thoughtful comments above (and Marissa - thanks

for the great research! I know there's not a lot of statewide representative research out there about suicide specific to Chinese communities, but I think there's a lot of value in looking at what has been done in other countries with shared cultural and traditional values).

I appreciate the comments regarding how our outreach materials should also reach those who do not consider themselves to be part of the Chinese community, but do speak Chinese. Are there any unique approaches we should take to reach out to this group?

I welcome everyone else's comments on this question as well as the other questions posed above.



Christina Nip
October 10, 2013 - 7:07pm

Hi Marissa and everyone,

Thank you so much Marissa for sharing the interesting study findings with us! I certainly find the points you shared with us interesting. I was born in Hong Kong and spent my early childhood years in Hong Kong and moved to Singapore when I was seven. I grew up in Singapore, and moved to San Francisco 5 years ago. I now work with the Chinatown community in San Francisco. From my personal experience (as a Chinese person and a part of Chinese communities in these three cities) I strongly agree with your observation that the topic of suicide carries a heavy burden of "irresponsibility" or "weakness". There is also a kind of judgment attached that suicide is morally wrong, and only someone who is irresponsible, morally and mentally weak, or trying to escape from problems would do.

I also sometimes feel that suicide can become sensationalized in some Chinese media portrayal too. Cases of suicide are depicted in tabloid news, or in a way that sensationalizes the case instead of understanding the motivations or the mental health aspect of suicide. Discussion of suicide becomes a place for gossip, judgment and criticism. Suicide or suicidal behavior is often seen as "abnormal". There is the belief that something must be wrong with the person or the family of the person who attempts suicide. "Normal people don't think about or talk about suicide" is a common belief.

How would someone who is concerned about another person start a conversation about suicide?

I think this conversation would start off with showing concern "Are you okay?" and then discussing the overall well being of the person (including physical, mental and emotional health), it would ask about stress, feelings, any difficult situations the person might be in, sense of isolation, hopelessness, and observations that something seems to be bothering the affected person "Is something bothering you?". I can't really imagine the opening of this conversation to be "have you been contemplating suicide?" I think it would be more along the line of "How are you feeling?" "How do you feel about your situation?" and a whole series of "tell me more. I am here to listen".

How might a person who is having suicidal thoughts express this to someone else?

This might be difficult to be expressed verbally as Marissa already noted. I agree this might be expressed in other non-verbal ways. It might be sudden change of mood (suddenly happy after feeling depressed), isolation. If verbally expressed, it might be conveying a sense of hopelessness, sadness, anger, or a loss of control over their situations, a sense of isolation, or that no one understands their situation. I agree that we might be need to brainstorm some other signs. Any other thoughts everyone?



marissalee
October 10, 2013 - 5:41pm

Hi, I just wanted to check in to clarify what we mean when we talk about the Chinese community just because the category is so broad and on the other hand also oddly exclusive. As I am not a member of the Chinese community, but am a member of a Chinese-speaking community, I also would like to advocate that since some of the materials the campaign ends up distributing will be written or presented in the Chinese languages, it may be wise to extend the content of these materials to be inclusive of Chinese-speaking or reading communities that are not Chinese. Many non-Chinese Asian American individuals will still be able to understand and be moved by the materials (eg. communities with some people who are fluent in Mandarin or

other Chinese dialects such as the Malaysian, Taiwanese, Singaporean, and Cambodian communities.)

Regarding rates of suicidality in the Chinese American community, here are some of the resources I have found:

Suicide among Asian Americans (American Psychological Association 2007 data)
(<http://www.apa.org/pi/ocma/resources/ethnicity/health/asian-american/suicide.aspx>)

- Among all Asian-Americans, those aged 20-24 had the highest suicide rate (12.44 per 100,000).
- Among females from all racial backgrounds between the ages of 65 and 84, Asian-Americans had the highest suicide rate.
- U.S.-born Asian-American women had a higher lifetime rate of suicidal thoughts (15.9 percent) than that of the general U.S. population (13.5 percent).³
- Among Asian-American adults, those aged 18-34 had the highest rates of suicidal thoughts (11.9 percent), intent (4.4 percent) and attempts (3.8 percent) compared to other age groups.

Powerpoint on suicide statistics in Asian American women by Eliza Noh PhD at Davis.
(<http://psychology.ucdavis.edu/sac/del/08oct08.pdf>) Dr. Noh is a famous Asian American advocate and expert on suicidality and Asian Americans.

Lifetime Suicidal Ideation and Suicide Attempts in Asian Americans
(<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2953852/>) (Uses the NLAAS study), Asian American Journal of Psychology (2010)

- Estimated lifetime prevalence of suicidal ideation was 8.8%
- Estimated lifetime prevalence suicide attempts was 2.5%
- Suicidal ideation differed significantly by age group and marital status.
- Individuals who were U.S. born reported higher rates of suicidal ideation.
- The prevalence rates of suicidal ideation did not differ by gender, ethnic origin, level of education, or household poverty.
- A higher proportion of women had attempted suicide than men.
- Chinese Americans were more likely to report suicidal ideation than those in the other Asian category (e.g., Asian Indian) and than Vietnamese and Filipino (although these differences did not reach statistical significance).
- A high level of ethnic identity was found to be associated with lower rates of suicide attempts for Asian Americans.
- One in three Asian Americans who attempted suicide had no evidence of DSM-IV depressive or anxiety disorders

Lifetime and Twelve-Month Prevalence Rates of Major Depressive Episodes and Dysthymia Among Chinese Americans in Los Angeles (1998) Uses the Chinese American Psychiatric Epidemiological Study.

- The most consistent correlate of lifetime and 12-month depressive episode and dysthymia was social stress, measured by past traumatic events and recent negative life events.
- Neurasthenia, a culture-bound syndrome including somatic symptoms of depression such as fatigue, inability to concentrate, and sleep disturbances, could be diagnosed in about 7% of the respondents

Changing Patterns in Methods of Suicide by Race and Sex (<http://online.library.wiley.com/doi/10.1111/j.1943-278X.1982.tb00710.x#abstract>) (sessionid=DA4ED69C58A8BC7B8133CFCAB324611110104?deniedAccessCustomisedMessage=useSelf#authenticatadhtml#e) (this article is from 1982 though)

- Notes that Asian Americans are more likely to use hanging than fire arms (again, this study is very old though.)

Thoughts on Suicide in Chinese-speaking communities outside of the United States

My only real-life frame of reference is Taiwan which is the country my parents are from. Taiwan has one of the highest suicide rates in the world. Taiwan is culturally similar to China in some ways and different in others; many Chinese-speaking and reading immigrants to the United States are from Taiwan. The Taiwanese government set up a National Suicide Prevention Center in 2005 and was able to decrease suicides substantially. **Here are results from a recent study of attitudes towards suicide in Taiwan** (<http://www.taipeitimes.com/news/taiwan/archives/2013/09/09/2003571719/>) (came out just last month)

- 87% of percent of those surveyed think suicide is "irresponsible"
- 81% percent believe it is selfish and 59.6 percent consider it to be an "easy way out."
- 59% supported the idea that suicide is "an act of a weak person"

- 38.8% agreed that the act is "shameful." (To me it is interesting that the concept of "shame" that we discussed is not as strongly endorsed as "irresponsible" or "weak")
- 70.7% said that suicide should be publicly discussed and 62.2% percent expressed a willingness to contribute to suicide prevention efforts

Most of the conversations around suicide that I heard growing up in my family were around the idea of family annihilation (media covered trend in Chinese-speaking countries in the early 1990s, continues to occur) and charcoal burning suicides (<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2852925/>) (a popular way to complete a suicide in the late 1990s/ early 2000s, though hanging was still the most commonly used method). Regarding family annihilation, **Taiwanese parents who commit suicide are more likely to kill their children** (<http://www.taipeitimes.com/News/taiwan/archives/2004/09/07/2003201939/>), too, compared to American parents who commit suicide.

Here are some slides from the Beijing Suicide Research and Prevention Center.
(<http://www.ganett.com/edu/cms/pdf/cmh/presentation/supload/SuicidalChina052005.pdf>)

Just to quickly summarize these stats are pretty striking, it's the number one cause of death for ages 15-34, most completed suicides are by females and the most common cause of death is pesticides/rat poison, etc. Many had friends or relatives with history of suicidal behavior. Decreased participation of social activities in the month prior to death. The end of the slides talk about increasing outreach to Chinese students living in America which may be relevant to our goals.

To answer the two discussion questions...

How would someone who is concerned about another person start a conversation about suicide?

I don't know how relevant the results of the Taiwan survey are to the Chinese community but my instinct is that there may be some similarities between the two communities. I think it can be very difficult to talk to someone about suicide for some of the aforementioned reasons:

- Suicidal ideation is often used as a figure of speech so there's a risk of not realizing the other person is serious. Suicide is also stigmatized so people may react the same way Americans (including Asian Americans) react which is to not take it seriously or laugh it off. It is difficult to engage someone in this conversation so people may be avoidant.
- In my own personal experience I think there is a temptation by others to bring up the "irresponsible" or "be strong" or "tough it out" messages as noted in the survey above. So just as in the United States there probably has to be a way to encourage people to talk about suicide without increasing the dysphoric feelings or increasing shame and guilt.

How might a person who is having suicidal thoughts express this to someone else?

I don't think these behaviors are necessarily expressed verbally so we may have to brain storm some common warning signs (eg. withdrawing from social activities, preparing for a will, etc.). There may also be expressions of physical or emotional discomfort such as feeling heartbroken, experiencing, neurasthenia, headaches, "luo qi da", etc.

POST NEW COMMENT

YOUR NAME:
em



Who is at-risk for suicide in the Chinese community, and who might their helpers be?



WORKGROUP DISCUSSION

Who is at-risk for suicide in the Chinese community, and who might their helpers be?



Theresa Ly

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, Asian Americans between the ages of 20-24 had the highest rate of suicide compared to all other age groups (<http://www.apa.org/pi/oema/resources/ethnicity-health/asian-american/suicide.aspx>). Workgroup participants suggested that women experience more social pressure (taking care of children and parents, health issues, financial issues).

Women tend to look to teachers (such as English teachers) and other community helpers to get resources. Oftentimes they place their trust in individuals who serve as interpreters. They oftentimes place their trust in individuals who have a higher degree of education and are generally more willing to have a conversation about personal issues in a more professional setting. The church and temple community can also serve as gatekeepers.

Given the at-risk age groups, there was some discussion about how women 40-60 years old could serve as helpers to both these at-risk groups (40-60 year old women are children to older women, and are parents to 16-25 year olds women).

Please offer additional thoughts and also consider this question:

- Who is most likely to notice warning signs for suicide in someone else?
- Who would be most comfortable to bring up their concerns and offer support to a person who might be at risk for suicide?
- Since we don't have the resources to do outreach with these materials ourselves, how can we reach these "helpers" across cities with high numbers of Chinese community members across the state? Who would be a good partner? (E.g. ESL teachers?).

PRIVATE FEEDBACK (#)

16 comments POST COMMENT
(@COMMENT-FORM)



marissalee

December 1, 2013 - 2:29am

Don't forget to partner with informal Parent Teacher Organizations at local Chinese language schools. This is often a social gathering place for women in this demographic while their kids take Saturday language class.



laimengi

November 25, 2013 - 9:31pm

I would like to express my thoughts combining these two questions: "Who is most likely to notice warning signs for suicide in someone else?" and "Who would be most comfortable to bring up their concerns and offer support to a person who might be at risk for suicide?"

Family members and close relatives/friends would usually notice someone 'has something wrong or behaves unusual recently,' but they don't know these might be the signs for suicide because they haven't heard the words such as 'suicide' or 'die' from this individual's mouth. In addition, Chinese feel uncomfortable to talk or hear anything related to death. So for the individual who has

S/I or for the people I mentioned above, they would likely avoid talking more further about this topic even though they have the relevant concerns.

But for the persons who have trained would explore more details when they notice the warning signs appeared. These persons include primary care providers, social workers, therapists, teachers (ESL or children teachers), child care providers, etc.. They would explore with the individual who has the signs for suicide regarding his/her problems, assess his/her safety, and refer him/her to receive treatment or, the most serious, call the crisis hotline.

Therefore, I believe proper education is very important for community members: reduce the stigma for suicidal prevention, understand the importance of knowing the signs (save a life, save a family), and let everyone know where to get help if needed. To answer the last question "Since we don't have the resources to do outreach with these materials ourselves, how can we reach these 'helpers' across cities with high numbers of Chinese community members across the state? Who would be a good partner?", I think through the Chinese medias is a good way to spread the concept of suicide prevention. Due to language barriers and cultural issues, Chinese like reading newspaper, listening to radio, and watching TV. Chinese seniors like to sit in the Dim Sum restaurants and bakery shops to share news and resources. For those who understand English, education by means of internet can be considered.



ahuyinh

November 20, 2013 - 7:30pm

Hi Jana,

In the LA County, some of the main Chinese newspapers could be Chinese Daily News, Epoch Times and Zhong Guo Daily News.

As far as ESL schools, the only way I know to look them up would be to do a search on line and then having to outreach to each and one of them if manpower is available. Another way to outreach directly to ESL teachers could be to tap into the ESL teacher professionals group on LinkedIn. I think that could be a great way to start a conversation or to put up the ad on line.

With adult schools, they are usually connected with actual schools so we would have to outreach to those teachers at the school.

I hope that helps!

Anna



Jana_YourSocialMa...

November 20, 2013 - 8:42pm

Thank you! As far as the ESL schools and adult schools, that is a lot of manpower. I like your idea of the ESL teacher professional group on LinkedIn.



erlathz7

November 20, 2013 - 8:00am

Jana- Just for our community in the BAY Area. I know of the Asian Health Services (clinic) in Chinatown which provides health checkups, dental work, and counseling services. <http://www.asianhealthservices.org>. As far as churches go, I do not know the percentage of how many Asians attend, but I do know of a church I used to attend as a kid called the Chinese Independent Baptist Church of Oakland which had a pretty big congregation.

tinanava

November 4, 2013 - 11:53pm



Hi everyone, (I'm addressing the following questions.)

Q: Who is most likely to notice warning signs for suicide in someone else? Who would be most comfortable to bring up their concerns and offer support to a person who might be at risk for suicide? Since we don't have the resources to do outreach with these materials ourselves, how can we reach these "helpers" across cities with high numbers of Chinese community members across the state? Who would be a good partner? (E.g. ESL teachers?).

A: The people to notice the warning signs are church group elders, community/social workers, immediate family members, and close friends. Church elders and community/social workers would be most comfortable in sharing their concerns because of their helper role within the community in the first place. They are already sought for other resources, so it would be easier for them to convey their concern and education onto a person who is having trouble functioning emotionally. A way to reach the Chinese community is by presenting educational talks to groups at churches, temples, community agencies, and schools.

Thanks, Christina Nava



Jana_YourSocialMa...
November 19, 2013 - 10:00pm

Hi,

Thank you for these thoughts. I appreciate your idea about presenting educational talks at churches, temples and community agencies. Thinking about this on a statewide level (or at least for counties/cities with a large Chinese population) how would we go about this. If you had to provide an example for just your county. How many churches and temples visited by Chinese community members are there? And do you think they would be open to sharing information about suicide prevention? Would it be best if they were approached by someone from their own community? In addition to the talk, what types of materials might be helpful to leave behind with community members after the talk?



Christina Nip
November 4, 2013 - 12:39pm

- Who is most likely to notice warning signs for suicide in someone else?

I certainly agree that it would be someone close to the individual who will notice warning signs. I also think that targeting the age group of women aged 40-60 as helpers is a great strategy given their links to both these different age groups.

However, sometimes people who are too close to the individual (such as immediate family members) may find it hard to acknowledge that their loved ones may be showing warning signs of suicide, since they may be in denial or defensive especially if the idea of suicide is taboo. It may be friends, or other family members, or family friends, or friends from church or temple community.

- Who would be most comfortable to bring up their concerns and offer support to a person who might be at risk for suicide?

I agree that someone who is close to the individual. I also agree that medical staff and other the figures of authority would be suited to bring up their concerns and support, since bringing up concerns and offering support would require a certain amount of trust from the person receiving the message. Especially relating to something that most people do not want to acknowledge or face, someone of authority with credibility would be effective in conveying this message.

- Since we don't have the resources to do outreach with these materials ourselves, how can we reach these "helpers" across cities with high numbers of Chinese community members across the state? Who would be a good partner? (E.g. ESL teachers?).

I agree that Newspaper ads are effective. Another really effective marketing tool for the Chinese and Chinese speaking community is radio ads. We noticed this for one of our projects that deal with another rather taboo issue: Problem Gambling. Radio is the most effective in this project

possibly also because of the anonymity given for someone concerned to seek help. Radio is great for the older group of Chinese speaking women who may be illiterate, but listen to the radio for news and information. T.V ads also reach a wide audience in the Chinese community. A lot of women in the community also get their information from community forums and workshops. For the younger women of the 40-60 age group, some of them may be quite computer savvy, and may have access to internet and may get information online.



Jana_YourSocialMa...
November 19, 2013 - 9:55pm

Thank you for these thoughts. I am not sure we have funding to create and place newspaper and radio ads, but it is something we can explore. Could you suggest a few newspapers for me to look into? When I think about radio, I wonder what resource we could provide at the end for individuals to visit for more information since the campaign website is only available in English (www.suicideispreventable.org).



Christina Nip
November 20, 2013 - 10:12am

Some Chinese newspaper in the Bay Area are: Singtao Daily, Chinapress USA, World Journal, and Epoch Times. In Southern California, Chinese newspapers are: Singtao Daily, Chinese Daily News.

Radio stations that is popular in the Bay Area is: Singtao Radio, KEST 60. Radio stations in Southern California: KMRB (Cantonese)

Television stations serving the Bay Area is: KTSF Channel 26 (they reach a wider Asian community with broadcasts in Japanese, Korean, and Vietnamese). TV Station in Southern California: KSCI L.A.

If the website is only available in English, that might be hard for radio promotion for those who are monolingual Chinese, it might work for those who are bilingual however. Do you have any helplines that people can call for help?



maxxg_68
November 4, 2013 - 12:07pm

Hello There,

The research that I have read is that Elderly Asian women are 10 times more likely to commit suicide compared to the general population. Other research results also indicate that Asian girls, ages 15-24, have higher suicide rates compared to the general population. Regarding Elderly Asian women, one of the main reasons for the high suicide rate is that there is a loss of purpose in their lives. They may feel disenfranchised from their adult children and may think that they are no longer appreciated or needed. Many Asian women come to this country with good family support, with the purpose of helping their children; however, many Asian children, as they become adult, are more Americanized, tend to distance themselves of the values of the Asian Culture, which includes not keeping in contact with the elderly. For the Asian teen girls, pressure is the biggest stressor for them. Pressure to do well in school, and that pressure to balance their level of acculturation.

Regarding "Who would be best to observe the warning signs of suicide within the Chinese Culture?" I would say caregivers, school teachers, medical staff. I work for the Dept of Psychiatry at Kaiser Hospital. Most recently, a depressed, suicidal Chinese teenager was sent to the Emergency Room for psychiatric care. This was the result of the pediatrician noticing depressive symptoms of the teenager, and the teenager telling the physician that he was having thoughts of hurting himself. Additional people that would be able to observe signs of suicide within the Chinese Culture may also include family members, members of the church, or family friends.

I agree that providing outreach materials (in Cantonese, Mandarin, etc.) to teachers, doctors, medical providers, church members, youth group supervisors, school officials is a great idea. Also, advertisements such as bulletin board and flyers that you can display at local community fairs and outings can also be an avenue of educating the public. Other ideas includes using the Media or the Social Media as avenues to educate the Chinese Community about signs of Suicide.

Thank you for reading my comments.

Maximo A. Garcia V, LCSW



Jana_YourSocialMa...
November 19, 2013 - 9:50pm

Hi,

Thank you for your insightful comments! One of the challenges we will face is the distribution of these materials. You suggested providing the materials to teachers, doctors, medical providers, youth group supervisors and school officials. Since we don't have the resources to research, identify and reach out to all of these individual groups as part of a statewide project, do you have an idea of larger groups or organizations throughout the state that we might engage as partners to distribute the materials? For example, if you had to answer this question specific to your county, what are a few of the places/people/organizations that you would advise us to try to engage as partners to distribute any outreach materials we create?



erlathz7
November 4, 2013 - 7:48am

Who is most likely to notice warning signs for suicide in someone else?

I believe an individual most likely to notice warning signs for suicide in another individual would be someone who is close to the other person and who has known the person for awhile. Someone who sees the person often—like at home, work, or school. For example, a mother who is knowledgeable about the warning signs of suicide would be able to notice the difference in her child's behavior.

Who would be most comfortable to bring up their concerns and offer support to a person who might be at risk for suicide?

An authority figure or close friend would be most comfortable. Someone trustworthy, like a teacher, school guidance counselor, a longtime neighbor, aunt, uncle etc.

Since we don't have the resources to do outreach with these materials ourselves, how can we reach these "helpers" across cities with high numbers of Chinese community members across the state? Who would be a good partner? (E.g. ESL teachers?).

Outreach material should be worded with care and tastefulness. For example, phrases like "positive growth" may be used in exchange for the phrase "mental health" to reduce the sense of stigma.

Libraries, health clinics in Chinatown, family service agencies, possibly an advertisement on a bus, university dorms, recreation centers are great ways to reach "helpers" across cities.

WebRep

currentVote

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Jana_YourSocialMa...
November 19, 2013 - 9:43pm

Thank you for your thoughts!



ahuyinh
November 1, 2013 - 4:04pm

Hello Everybody,

I completely agree that those at risk for suicide are both young Asian women and the elderly Asian women.

Besides the peers of these two groups who would notice these signs, but also the middle aged Asian women would notice and even possibly be more comfortable to offer support and provide resources.

Providing these outreach materials to teachers at all levels of secondary and post secondary schools as well as ESL schools, churches, temples, and government agencies, especially the social service sector as there are more women who happen to work there. Also agencies, especially the non profits that focus on the Asian community, would be a good place. These settings all have service minded professionals and mentors who have many resources and know how to approach someone who could be suicidal.

If possible, also running the ads in the Chinese newspapers are a great way to reach the monolingual Chinese speakers.

Hope this is helpful!

Anna



Jana_YourSocialMa...
November 19, 2013 - 9:42pm

Thank you for your thoughts! I wanted to follow-up on a few of your suggestions. I am not sure that we have the budget to create and run ads in Chinese newspapers, but this is something we can at least look into. Do you have the names of a few newspapers that I could use as a starting point?

In regards to your suggestion for ESL schools, do you have more information about how to access them? For example, I am not sure we could research and contact every ESL school in the state, but maybe there is a statewide directory? Or an association? How do you suggest we would go about enlisting them as a partner?

POST NEW COMMENT

YOUR NAME:

em



What are your thoughts on some of the ideas presented so far?

13 comments POST COMMENT
(#COMMENT-FORM)



WORKGROUP DISCUSSION

What are your thoughts on some of the ideas presented so far?



Theresa Lv
Hi everyone!

Sorry for the delay in getting a new discussion question up - November has been quite busy for Jana and I!

Thank you for your comments so far on the last thread. From the discussion, it sounds like potential helpers within the Chinese community are:

- Church group elders
- Teachers/social workers
- Immediate family members (especially women ages 40-60)
- Close friends (especially women ages 40-60)
- Physicians/Figures of authority

Ways to reach the Chinese community and engaging potential helpers include:

- Education talks at churches, temples, community agencies and schools
- Community forums and workshops
- Newspaper ads
- Chinese radio ads (following the example of using radio to address problem gambling among the Chinese community)
- TV ads
- Bulletin boards
- Flyers
- Bus ads
- Community venues such as libraries, health clinics, family services agencies, ESL schools

Here are some follow-up questions for you to consider

Which of the distribution strategies suggested so far do you think is the most promising?

1. Creating an advertisement that can be placed in Chinese newspapers. (Keeping in mind that we might only be able to create the ad and make it available to county and community agencies to place the ad.)
2. Creating a radio advertisement. (One of the considerations here is what resource to provide for where Chinese community members can go or call for more information.)
3. Engaging and preparing a Chinese community member to facilitate a series of talks about suicide prevention in churches/temples/community centers in key cities throughout the state. (What types of materials should be created as hand-outs after these presentations? Maybe a brochure, small card, magnet or other give-away?)
4. Creating a poster and brochure (or other printed material) and mail a supply to key organizations throughout the state who can then distribute the materials. (Who might these organizations be?)

Please expand on ways in which we can reach helpers within the Chinese community.

Using the list that we have already generated (such as community forums and workshops, health clinics, ESL schools etc...), please provide names and locations of where a large majority of the Chinese community often frequents. Perhaps there is a Chinese-specific health center in your region that you are familiar with, or a statewide Chinese ESL language organization? **Please be as specific as possible when describing possible partners for the Know the Signs Campaign to engage in to distribute our outreach materials to reach helpers.**

PRIVATE FEEDBACK (#)



rdip02
December 26, 2013 - 5:26pm

Hi Theresa,

I think option three sounds very promising. It might NOT be the greatest in terms of its scope of reach but it is definitely the most effective, and it could create a domino effect. Having a person represent a cause is so much more powerful than brochures and posters, especially if this person has a personal connection to the cause and to the community to which he or she is presenting. Not only that, but I imagine that the Chinese community member delivering the materials might also be knowledgeable of other local resources that he or she could relay to the community.

As for materials to be created for giving away after the presentations, brochures and small cards sound the best. The community members seeking the services might be wary of having a magnet with this type of information on their fridge.

I've also compiled a list of some places around me that could serve as targets for these services.

In Irvine California there is a huge Chinese community

HOAG Health Network: The HOAG hospitals are very well known for being culturally sensitive and going out of their way to reach out to the community in any way possible. They've gone to great lengths to reach out to the Chinese community, so they might serve as a good partner for delivering these materials. <http://www.hoag.org/Pages/Home.aspx> (<http://www.hoag.org/Pages/Home.aspx>)
<http://articles.latimes.com/2010/sep/08/local/a-me-hoag-hospital-20100908>
(<http://articles.latimes.com/2010/sep/08/local/a-me-hoag-hospital-20100908>)

South Coast Chinese Cultural Association: It is mostly a Chinese School but many functions of the Irvine Chinese Community take place here. <http://www.sccca.us/> (<http://www.sccca.us/>)

Thien Hau Temple: Although ambiguous in terms of its religious affiliation, the temple is associated with the Camau Association of America which works with Chinese, Vietnamese, Teochew and Thai Chinese communities, particularly refugees. The main website for it is down, but I did find a wikipedia page. http://en.wikipedia.org/wiki/Thien_Hau_Temple_Los_Angeles
(http://en.wikipedia.org/wiki/Thien_Hau_Temple_Los_Angeles)

In San Diego there are also a big Chinese community.

San Diego Chinese Center: Provides charitable services for the Chinese community. <http://www.sdchinesecenter.org/> (<http://www.sdchinesecenter.org/>)

Chinese Service Center of San Diego: Like the SD Chinese Center, provides services for Chinese community. <http://cscsandiego.org/> (<http://cscsandiego.org/>)

Buddhist Temples in San Diego: There are also a few Buddhist Temples in San Diego with strong ties to the San Diego Chinese Community. Here are websites for the two big ones. <http://www.btstd.net/> (<http://www.btstd.net/>) <http://www.hsifangtemple.org/> (<http://www.hsifangtemple.org/>)

Please let me know if you ever need help making connections with these places. I'd be glad to help!

Roberto*



marissalee
December 1, 2013 - 2:32pm

Also the World Journal. And consider partnership with KCET and other Chinese language channels, maybe they would be willing to do some pro bono PSAs.

Perhaps consider local Chinese speaking politicians like Chinese American Judy Chu and Taiwanese American Jay Chen...



Jana_YourSocialMa...
December 4, 2013 - 10:53pm

Thanks- good ideas!



maxx5_68
November 30, 2013 - 5:50pm

Hi Theresa,

I think all four ideas are great. For the newspaper, I think targeting newspapers (The Daily Recorder) that Chinese communities read in the Sacramento area. Further, collaborating with church leaders is another idea. Churches are The Sacramento Chinese Grace Bible Church, The Chinese Community Church and the Chinese Immanuel Church.



erlath7
November 22, 2013 - 7:49am

I believe the most promising distribution strategy is 3.)Engaging and preparing a Chinese community member to facilitate a series of talks about suicide prevention in churches/temples/community centers in key cities throughout the state. (What types of materials should be created as hand-outs after these presentations? Maybe a brochure, small card, magnet or other give-away?.

This strategy really reminds me of a NAMI presentation which can be quite effective, especially when participants are given handouts/ resource lists at the end.

I feel like the radio advertisement can be hit or miss, with who is listening at the exact moment. Also, I do not know how likely someone is willing to jot down information from an advertisement.

I love the poster/ billboard idea. In fact, every time I am on bart riding through Fruitvale I see the Know the Signs Billboard for the Hispanic community and it makes me happy.



Jana_YourSocialMa...
December 4, 2013 - 10:50pm

Thank you!



Christina Nip
November 21, 2013 - 11:40am

Hi,

I think all of the listed strategies for distribution are promising. They all would have their own impact, reach and effect.

For the news print and radio ads, the reach is wider, and it may reach a more varied group of people in the Chinese community. It may also reach people who may not have the social connection to the public/social agencies, or who may live farther away from where all Chinese services are concentrated. However, news ad and radio ads do require the necessary budget.

Engaging community members to facilitate a series of talk at local temples/churches/community centers are great ways to reach target communities and may be more cost effective. One of our project uses the model of community Lay Health Workers to spread preventive health knowledge and though the impact is not as far reaching or wide, the impact tends to be more in-depth/effective. Because of the pre-existing social ties in place, project seems to suggest that Lay Health Workers model actually may be more effective in actually getting people to change their

behaviors. If there is a powerpoint presentation, participants do like to receive a copy of information to read over at home and to share with friends and family. Brochures, keychains, magnets, or other promo items with the helpline/website are also popular with the community. In S.F tote bags are also highly popular.

Mailing out printed materials to key agencies in the State is also effective. I think partnering with local social agencies that serve the Chinese community is a good idea for this.

Some larger agency ideas include:

- DPH County Clinics
- Community clinics
- Public libraries
- Park and Recreation Centers/Community Centers
- City /Community Colleges (that offer ESL classes)

Some social service agencies in S.F servicing the Chinese community:

- Asian Women's Resource Center
- Cameron House
- Charity Cultural Center
- Chinatown Child Development Center
- Chinatown Public Health Center
- Chinese for Affirmative Action
- Chinese Hospital
- Chinese Independent Baptist Church
- Community Youth Center
- First Chinese Baptist Church
- Kai Ming Headstart
- NIOOS Chinese Health Coalition
- Northeast Medical Services
- On Lok Lifeways
- Portola Family Connections
- Richmond Area Multi-Services, INC.
- Self-Help for the Elderly
- Visitation Valley Senior Center
- Wu Yee Family Center



Jana_YourSocialMa...
December 4, 2013 - 5:34pm

Thank you so much for all of these suggestions.

I have a follow-up to this comment: "One of our project uses the model of community Lay Health Workers to spread preventive health knowledge and though the impact is not as far reaching or wide, the impact tends to be more in-depth/effective".

I have worked a lot with Promotoras, who are Spanish speaking community lay health workers. I was not aware that these are also active for the Chinese community. Are there formal organizations that we could reach out to? If you have more information or a contact that would be helpful!

You also mentioned that give-aways with the crisis hotline or website are helpful. I assume that we would have to be sure that the crisis line has Chinese language capability? Does the website have to be in Mandarin or will an English website work as well?

Thank you for your thoughts!



Christina Nip
December 5, 2013 - 3:08pm

Hi Jana,

You can contact the following agencies for more information on Community Lay Health Workers in the Chinese community in San Francisco:

NICOS Chinese Health Coalition

1208 Mason Street, San Francisco, CA 94108

(415)788-6426

NICOS is my agency and we have been a partner agency with UCSF in a Lay Health Worker Project. We have been working on this project for 5 years now, and have been instrumental in recruiting and training LHWs and coordinating the project from the community aspect with UCSF.

Chinatown Public Health Center

1490 Mason Street, San Francisco, CA 94108

(415)364-7600

The Chinatown Public Health Center is a San Francisco Department of Public Health clinic, and they too have used the Lay Health Worker model and may have databases on previous and current Lay Health Workers.

Chinese Community Health Resource Center

835 Jackson St #25, San Francisco, CA 94133

(415) 677-2473

Chinese Community Health Resource Center has partnered with DPH and have also used the Lay Health Worker model in a project to help smokers in the Chinese community in San Francisco quit smoking.

The Healthier Living Project

Contact: Kenneth Liu

30th St. Senior Center / On Lok

225 30th St. @ Dolores, San Francisco, CA 94131

415 550-6002

<http://www.cahealthierliving.org/locations/san-francisco/> (<http://www.cahealthierliving.org/locations/san-francisco/>)

Based on a project by Stanford University, this project also utilizes a Community Health Worker model to promote healthy living.

For the giveaway items, yes, it will be important to have a crisis line with Chinese language capabilities if you choose to have it published on promo items in Chinese. From my experience working with the Chinese community in San Francisco, online/websites may not be as accessible as a phone line, as a large portion of the Chinese clients we work with still do not use internet.

That said, there are portions of Chinese who are tech/online savvy, they are the same group will most probably would be literate in English at a proficient level as well. So an English website may be accessible for this same group.



ahuyh
November 20, 2013 - 8:02pm

Hi All,

I think the 2 most promising are running a print ad in the Chinese Newspaper: It's easier for the helper to have the information (contact number, for example) already there and can refer to it; and creating a poster and brochure to mail out to our partnerships. I believe that once these organizations get it, maybe we can ask them to engage in the Chinese community to provide talks at key places and further help to disperse the materials???

Some key organizations in Southern CA:

Chinatown Service Center, LA

Little Tokyo Service Center, LA

Tzu Chi Medical Clinic, Alhambra, San Dimas, and South El Monte

Herald Christian Health Center, San Gabriel

Pacific Clinics, Rosemead and Pasadena

Asia Pacific Family Center, Rosemead

San Gabriel Pomona Regional Center and East LA Regional Center (these are the two that cover the majority of the Asian communities in LA County)

Thanks!

Anna



Jana_YourSocialMa...
November 20, 2013 - 8:48pm

Hi,

I am looking into it, but I don't think we have the budget to run print ads. But if we create a poster and brochure, we can modify the poster to also work as a print ad and make it available to organizations to use in that way. Do you have any specific newspapers in mind?



ahuyh
November 20, 2013 - 1:37pm

Hi Jana,

Sorry for replying late. Some popular SoCal Chinese newspapers are Chinese Daily News, Zhong Guo Daily News and Epoch Times.

Thanks!

Anna



Jana_YourSocialMa...
December 4, 2013 - 5:23pm

Thanks!

POST NEW COMMENT

YOUR NAME:

What language should print materials be written in? Traditional



WORKGROUP DISCUSSION

What language should print materials be written in? Traditional



Jana YourSocialMa...
Hi,

For any materials in Mandarin that we develop, should they be in the traditional version or the simplified dialect?

As always we appreciate your time.

PRIVATE FEEDBACK (9)

11 comments POST COMMENT
(COMMENT FORM)



Theresa Ly
December 4, 2013 - 12:40pm

Hi everyone,

Thanks for your feedback on this. It seems like we're rather split on the issue, but after doing some research and weighing your considerations, it sounds like Traditional might be the way to go (if we don't have the budget to do traditional *and* simplified, which is definitely something we need to look into).

From our discussions so far, the helpers we are trying to reach with our print materials include church elders, teachers, physicians, and friends and family members between 40-60 years of age. Given this middle-aged/older population, I think traditional characters would be most familiar to them. I also agree with Marissa & Robert's comments that it's easier for individuals who usually read traditional characters to read simplified characters, but not the other way around.

Does anybody have any other thoughts to share or strongly advocate for the use of simplified characters?



Christina Nip
December 3, 2013 - 9:56am

Hi I agree with the others that it depends on who the target audience is. Is there budget for creating both traditional and simplified text?

The reason I ask is because even though people who typically read traditional text may be able to understand or guess at the meaning of simplified text or vice versa, I think it is not only the issue of whether the message can be understood that is at stake here, but also a sense of who the message is for.

As someone who typically reads traditional Chinese text, I may sometimes pay less attention to notices in simplified Chinese.

Online Chinese newspapers also usually provide both traditional and simplified versions of the same article.

Just a thought. It would be great if there is enough resources for both text versions. But if not, I agree that simplified text may be more universal.



tinanava
December 2, 2013 - 9:58pm

The materials should be printed in Mandarin, Cantonese, and simplified if possible. If just one then simplified with the hope it starts a conversation between people. Thanks.
Christina



laimengi
December 2, 2013 - 12:55pm

If the target readers are from mainland China, materials should be printed in simplified characters. If the readers are from Hong Kong, Taiwan, Singapore, Malaysia and other Asian Chinese, I would suggest to print the materials in traditional characters. But no matter which type will be used, Chinese readers could understand for most of the characters are the same, and as the interaction is closer and more frequent, I don't think it (traditional or simplified) is a big deal.



rdlp92
December 2, 2013 - 12:25pm

I've noticed that a large amount of advertisement directed at the Chinese community in the US is written in traditional characters. I know that simplified was not promoted until about the 1950's or 1960's and it probably took a while to become compulsory, so it might be more convenient to use traditional if we are trying to attract an older audience.

On another note, I've also noticed from observing my Chinese teachers and tutors that it is easy for someone whose first writing system is traditional to read simplified, while the opposite is a bit more difficult.



rdlp92
December 2, 2013 - 12:25pm

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On another note, I've also noticed from observing my Chinese teachers and tutors that it is easy for someone whose first writing system is traditional to read simplified, while the opposite is a bit more difficult.



marissalee
December 1, 2013 - 2:20am

FYI "Traditional Chinese characters are currently used in Hong Kong, Macau, and Republic of China (Taiwan). While traditional characters can still be read and understood by many mainland Chinese and Singaporeans, these groups generally retain their use of Simplified characters. To accommodate users of both scripts, Overseas Chinese communities generally use traditional characters."

http://en.wikipedia.org/wiki/Simplified_Chinese



marissalee
December 1, 2013 - 2:16am

It depends. Where will the written materials be published? Who is the target audience? Can they be written in such a way to maximize the commonalities between the two writing forms (they are not dialects)?



maxxs_68
November 30, 2013 - 5:53pm

The think that the materials should be in Cantonese and Mandarin. I also think simplified dialect is a good idea. Hopefully this helps. Max



ahuyzh
November 30, 2013 - 1:33pm

I also agree that it should be simplified as more and more people are using that version.

Thanks!

Anna



erlath27
November 30, 2013 - 8:03am

I say simplified dialect, because I believe are target audiences will be more used to it. :) My mom has been in the US for over 20 years and does not use traditional mandarin, nor do her friends.

POST NEW COMMENT

YOUR NAME:
em



Disable rich-text (javascript:void(0))

CAPTCHA

This question is for testing whether you are a human visitor and to prevent automated spam submissions.

Workgroup Update and please review suicide prevention language



YOUR VOICE COUNTS

WORKGROUP DISCUSSION

Workgroup Update and please suicide prevention language



Jana_YourSocialMa...
Dear Workgroup Members,

The stipend checks were mailed out last week. Please let us know if you receive them!

Thank you for your discussion around what language the materials should be in. Attached below please find two brochures. One is our campaign brochure in English. The second one has been translated into traditional Chinese. Although we have not decided on the outreach strategies and materials that we will create, it will be helpful to engage in a discussion around the language. If you can read Chinese, please review the brochure and offer feedback on the language. **Please note that the design will be different, so just comment on the language at this point.** Please be as specific as possible.

1. Is the language appropriate and culturally relevant?
2. Is anything stated incorrect? How should it be said instead?
3. The brochure provides a blank panel on the back where organizations can post their contact information. Should we also include the website: www.suicideispreventable.org (<http://www.suicideispreventable.org>) even though it is only available in English?

We appreciate your thoughts, peaceful holidays and looking forward to working with you next year to finish up this project.

PRIVATE FEEDBACK (6)

Attachment:

- [KTS_Brochure_TCH.pdf](http://www.yourvoicecounts.org/sites/default/files/01/13/KTS_Brochure_TCH.pdf) (http://www.yourvoicecounts.org/sites/default/files/01/13/KTS_Brochure_TCH.pdf)
- [English_Suicide_Prevention_Brochure.pdf](http://www.yourvoicecounts.org/sites/default/files/01/13/English_Suicide_Prevention_Brochure.pdf) (http://www.yourvoicecounts.org/sites/default/files/01/13/English_Suicide_Prevention_Brochure.pdf)

4 comments POST COMMENT
(COMMENT-FORM)



ahuyzh
January 16, 2014 - 9:35am

Hi Everyone,

I just wanted to throw out another idea for the visual image:

On a blank white background, there can be a photo of a young asian woman to the right and on the left will be the older asian woman, both looking sad and distraught. They both will share a thought bubble in the middle of the page with statements of suicidal ideations, for example:

I hate my life.

I feel so alone.

I wish I could die.

(maybe written in this fashion inside the thought bubble)

While that is more on the top background, in the bottom front will be a photo of the helper (middle age asian woman) with a confident look and her thought bubble will be: I can help.

At the bottom of the page will be:

Know the signs.

You can help.

Thanks for the good discussion last night. Sorry I couldn't help out more with the actual wording as my Chinese grammar is not that good.

Anna



Christina Nip
January 2, 2014 - 11:44am

Happy 2014 everyone! Thank you Jana, I received the stipend.

Regarding the translation of the text, I have the following feedback:

Front page (Extreme Left Panel)

- The last sentence: "The power to save a life." didn't translate very well into Chinese, as it is logically incomplete. In Chinese, the "挽救生命的重要作用" didn't make as much sense as in English. I suggested making it a complete sentence. "(你有能力起到)挽救生命的重要作用。" or rephrasing it.

Front page (Second Left Panel)

- The sentence "To learn the warning signs of suicide, visit" for the website, the word "visit" was translated as "訪問", which read a little strange to me. Perhaps it is because I am a Cantonese speaker, and the translator might have been translating into Mandarin. Even though the meaning is visit, the word "訪問" is not commonly used this way. I suggest using another word, perhaps "到訪" or "到醫院".

Back page ("Know the Signs" Panel)

- The second warning sign "Feeling hopeless, desperate, trapped", "trapped" was translated into "難以自拔" which has more of a meaning of "losing control" or even "becoming addicted" and doesn't convey the feeling of feeling trapped. Perhaps, we can use a more direct translation of "感覺被困", or consider other translations.

Back page ("Reach Out" Panel)

- The sentence "If you even see one warning sign, step in or speak up." "Warning sign" was translated to "危險跡象" which means "dangerous signs", "warning sign" can be more accurately translated as "警告跡象".

Back page (Two Right Panels)

- I had the same issue as above with the word choice "訪問" for "visit" before listing of the website. It is more commonly used for "interview" so I suggest finding another translation.



ahuynh
January 1, 2014 - 6:46pm

Hi Everyone,

Happy New Year!

After reviewing the brochure, I think the translation works, gets the idea across, and is

understandable. It's great that there will be a list of local organizations that people can turn to.

I agree too that it is necessary that the hotline have language assistance. I think the website should be on the brochure even if it is only in English. Is there a way for the website to have it in the Chinese language too? It would be more effective that way.

Thank you also for the stipend check!

Anna



marissalee
December 30, 2013 - 3:54pm

I can provide more input later but my first instinct is to deemphasize the focus on websites (do include, but deemphasize) and provide a stronger emphasis on the hotline. My instinct is that this paper brochure will be read by a lot of people who do not get most of their information from the internet and may have easier access to the phone than the internet. That being said, does the hotline have culturally competent language capacity?

POST NEW COMMENT

YOUR NAME:

em



Please register for webinar on January 9th



See

WORKGROUP DISCUSSION

Please register for webinar on January 9th



[Jana YourSocialMa...](#)

During this webinar we will review the discussion so far and discuss the suggested strategies and materials that should be developed. We will also review the language for the materials.

To register:

January 9th 11:30am to 12:30pm:
: <https://attendee.gotowebinar.com/register/347748395268353261>
(<https://attendee.gotowebinar.com/register/347748395268353261>)

PRIVATE FEEDBACK (#)

3 comments

POST COMMENT
(#COMMENT-FORM)



[Christina Nip](#)

January 3, 2014 - 4:49pm

Hi Jana,

I too have work during the scheduled time for this webinar and will not be able to attend. But if you have an alternative time for the webinar (after or before office hours), I will be very happy to participate.



[ahuyh](#)

January 1, 2014 - 11:16am

hi Jana, I would like to attend the webinar, however I have to work during those hours. Will there be another webinar maybe in the evening? Or something I can review on my own and provide feedback. Please let me know and sorry for the inconvenience. Happy new year! Anna



[marissalee](#)

December 30, 2013 - 3:51pm

Hi Jana,

As my availability in January is different from the availability I had in October and November when I first signed on to the project, I will not be able to participate in this webinar. I would be happy to review the slides/documents if you email them to me, though. Thanks.

POST NEW COMMENT

Alternate webinar date poll: Please let me know what date/time will work best for you



See

WORKGROUP DISCUSSION

Alternate webinar date poll: Please let me know what date/time will work best for you



[Jana YourSocialMa...](#)

Hi,

Since Wednesday the 9th at 11:30am does not seem to work for anyone, please let me which of these alternate dates/times would work better:

Wed January 8th at 5:30pm

Wed January 8th at 6pm

Wed January 15th at noon

Wed January 15th at 6:30pm

Thank you!

Jana

PRIVATE FEEDBACK (#)

6 comments

POST COMMENT
(#COMMENT-FORM)



[marissalee](#)

January 4, 2014 - 3:33pm

Wed January 15th at 6:30pm would work for me, though I may be late if there is bad traffic on my way home.



[ahuyh](#)

January 4, 2014 - 12:55pm

HI Everyone,

Wed 1/8/14 at 6:30pm or later works

Wed 1/15/14 at 6:30pm or later works

or Fri 1/17/14 anytime.

Thanks!

Anna



[erlathz7](#)

January 4, 2014 - 10:13am

Yes



Jana_YourSocialMa...
January 4, 2014 - 9:22am

Is that the only one that will work for you?



Jana_YourSocialMa...
January 4, 2014 - 9:22am

Is that the only one that will work for you?



erlath27
January 4, 2014 - 8:36am

January 15th at noon

POST NEW COMMENT

YOUR NAME:
em



Please register for new webinar on January 15th at 6:30 pm



YOUR VOICE COUNTS

See

WORKGROUP DISCUSSION

Please register for new webinar on January 15th at 6.30pm



Jana_YourSocialMa...
Hello,

It seems that this date and time works best. The webinar on the 9th will be cancelled and instead we will plan to meet on Wednesday, January 16th at 6.30pm.

Please register for Know the Signs Campaign - Chinese Workgroup on Jan 15, 2014 6:30 PM PST at:

<https://attendee.gotowebinar.com/register/5641914475627600898>
(<https://attendee.gotowebinar.com/register/5641914475627600898>)

During this webinar we will review the discussion so far and discuss the suggested strategies and materials that should be developed. We will also review the language for the materials.

PRIVATE FEEDBACK (e)

o comments POST COMMENT
(@COMMENT-FORM)

POST NEW COMMENT

YOUR NAME:
em



Disable rich-text (javascript:void(0))

Please provide feedback on two poster options



WORKGROUP DISCUSSION

Please provide feedback on two poster options



Jana_YourSocialMa...

Hello,

Please view full images by clicking the pdf below.



http://www.yourvoicecounts.org/sites/default/files/topic_images/Poster_Options_Page_1.jpg



http://www.yourvoicecounts.org/sites/default/files/topic_images/Poster_Options_Page_3.jpg

During our last webinar we discussed several layouts for a possible poster. Below are the suggestions from our last discussion. Unfortunately there are very limited options when it comes to using stock photos and the design team was not able to find suitable images to really make our more complex suggestions (listed below) work. However, they have come up with two initial designs.

Target Audience: Helpers (female ages 40-60) who can recognize warning signs in the at risk person (younger 20-24).

Notes from last discussion:

- Photo was preferred over an illustration
- Design Suggestion: Two Chinese people talking intimately, e.g. at a kitchen table drinking tea. Should be two females, one 40-60, one younger (20-24)
- Design Suggestion: Two people, one person standing in the shadow (in a house, female, older adult 60s plus) and another person reaching out their hand to them (female middle aged). Something with lighting to show hope and accentuate the person reaching out as offering that hope.
- Design Suggestion: To show that someone might be perfect on the outside, but different on inside: person looking into mirror. Show her (mid 20s) smiling into mirror, but image smiling back is sad. Show a helper (also female 40-60) in the far background looking into the room....seeing the image in the mirror.

Requested Feedback:

Please note that there will be additional text on the poster and that the text across the image will disappear once the photo has been purchased. You can view the images by viewing the attached pdf file below.

- Which of the two options ("drinking tea" or "looking in the mirror") is the more appropriate to reach our target audience?
- Is there anything that you would change?
- Does the headline go with the image?

PRIVATE FEEDBACK (6)

Attachment:

[Poster_Options_Drinking_Tea.pdf](#)

http://www.yourvoicecounts.org/sites/default/files/topic_images/Poster_Options_Drinking_Tea.pdf

[Poster_Options_Looking_into_Mirror.pdf](#) http://www.yourvoicecounts.org/sites/default/files/topic_images/Poster_Options_Looking_into_Mirror.pdf

6 comments POST COMMENT
(COMMENT FORM)



Christina Nip

March 11, 2014 - 9:45am

Hi everyone,

I actually prefer the tea drinking poster. For me it conveys more of the message that a "helper" can reach out to help or that community may be a way to help someone in pain. I think that the tea drinking poster needs much stronger headings. Currently, the headings are not very effective. They are rather vague. I would not know the poster is about suicide prevention if not for the suicide prevention.org link on the bottom. I feel that if the headings are improved to be stronger and clearer that the tea drinking posters will be much more effective.

Currently the crisis of suicide is only alluded to. Stronger language pointing to ideas of "pain" "life" "death" and the idea that "you" can reach" or "reach out" should be included. The current headings include ideas of: "care", "listen", "willingness to live", "unlocking the soul". They are very positive, but very vague.

For me the mirror poster conveys once again the sense of isolation that I didn't like about the previous posters. The message of a "helper" seems to be obscured. I agree with Anna that it may help to actually have the face of the helper focused or more clearly depicted, but I also understand that stock photos are used so this may be a challenge. The mirror posters had much more focused and effective headings. I like the final heading the best. The one that translates to: "The pain beneath the smile needs you to face/confront it directly".



Jana_YourSocialMa...

March 21, 2014 - 1:17pm

Thank you for your thoughts. Once we decide on the image, there will be additional text on the poster along the lines of what you are suggesting.



shuynh

March 11, 2014 - 8:40am

Hi All,

I definitely prefer the mirror image over the tea image because the mirror image conveys more of our idea that things may appear good on the outside, but on the inside, it may not.

It is possible to see more of the young asian woman smile from the side and to have the mirror image look more upset because the mirror image looks like she's neutral.

Because we are targeting middle aged women as the helper, I prefer to keep her, maybe having her look a bit younger like 40s/50s, less blurry, and have her turn slightly to see the side of her face.

I like the headline because it is short and sweet, but maybe we can add another line at the bottom, in the middle, saying something like, "there is hope, you can help"

Thanks!

Anna

Jana_YourSocialMa...



March 11, 2014 - 8:44am

I appreciate your thoughts and suggestions and agree with them. Taht being said, these are stock images so there is little we can do to change the angle of the face or facial expressions. I personally like the idea of the mirror, but I am not sure the current design really appeals to me.



marissalee
March 10, 2014 - 9:30am

My instinct is that the women in the first stock photo lookskewed (it looks like the photo was resized in a distorted way.) I am not sure if they look identifiably Chinese or East Asian to the average Chinese speaking person (obviously what makes someone Chinese is very contentiously debated but in terms of immediaetly grabbing the target audience this is important.)

I think I prefer the second design with the mirror as it looks more dynamic.



Jana_YourSocialMa...
March 10, 2014 - 10:15am

Thank you for your thoughts. The images at the top are distorted. It is just the way they post on the forum. But if you click on the pdf, they are not. In terms of your feedback, do both people (the older woman and the younger woman) not look Chinese to you? For the mirror image, are you ok with the person that is watching the young girl on the side, or should we remove that person and just focus on the girl looking into the mirror?

POST NEW COMMENT

YOUR NAME:
em



Disable rich-text (javascript:void(0))

Which headlines do you like?



YOUR VOICE COUNTS

Se

WORKGROUP DISCUSSION

Which headlines do you like?



Jana_YourSocialMa...
Hello,

We worked with a copywriter to come up with a few possible headline options for our poster. Please review this and reply back with your top three options and why you like those. **These are intended to speak to the potential helper.**

1. 關心，就要說出口

(If you're concerned, (you should) speak it out

2. 用心聆聽，提供正面能量

Listen with your heart to provide positive energy

3. 誠摯的關心，可激發生命力量

Sincere concern can encourage the power of life

4. 關懷傾聽，開啟心靈之鎖

Open the lock of a heart by being concerned and listening

5. 心中的陰影，需要有人伸出援手！

The shadow in the heart needs someone to give a hand!

6. 你的一臂之力，可助人走出陰影！

Your "one-arm strength" (a Chinese idiom that means "help") can help someone walk out of a shadow!

7. 伸出援手，點亮他人內心陰暗角落！

Give a hand to light up the shadowed corner in someone's heart!

8. 笑容的另一面，也許暗藏痛苦

The pain could be hidden in another side of the smile

9. 笑容，不見得反映真實內心

The smile may not reflect the true feeling of the heart

10. 笑容下的痛苦，需要你正視！

You need to look squarely at (attach importance to) the pain under the smile!

PRIVATE FEEDBACK (e)

4 comments POST COMMENT
(COMMENT-FORM)



Christina Nip
March 11, 2014 - 10:42am

My top three choices are:

7. 伸出援手，點亮他人內心陰暗角落！

Give a hand to light up the shadowed corner in someone's heart!

Like Anna, I feel that the focus of "reaching out" is important in the message. It is empowering to know you can do something. However I do feel that the "lighting up the shadow in someone's heart" is vague, and does not convey the importance and the fact that reaching out is crucial. In other words, I feel that the gravity of the one's choice to reach out (or not to reach out) is not conveyed.

5. 心中的陰影，需要有人伸出援手！

The shadow in the heart needs someone to give a hand!

This is less proactive than the first, because it is in passive voice, but nonetheless conveys idea of "giving a hand" and to "act" on it.

8. 笑容的另一面，也許暗藏痛苦

The pain could be hidden in another side of the smile

For me this message is quite strong and direct. Again, I think it is good to use clear strong concept of "pain" or "hidden pain" which again conveys gravity of observing, caring and acting on observations. This heading is good because it is informative. But I think a follow up sentence stressing the fact that the helper has the "power" to "act" to "help" to "reach out" would make it even stronger.



Jana_YourSocialMa...
March 21, 2014 - 1:09pm

Thank you!



ahuynh
March 11, 2014 - 9:18am

Hi All,

My top three choices:

5. 心中的陰影，需要有人伸出援手！

The shadow in the heart needs someone to give a hand!

I like this one because it speaks to the helper to proactively help someone out since those who really need help are stuck in the shadows.

7. 伸出援手，點亮他人內心陰暗角落！

Give a hand to light up the shadowed corner in someone's heart!

I also like this one because it goes along with the theme of proactively helping as in #5.

9. 笑容，不見得反映真確內心

The smile may not reflect the true feeling of the heart

I like this one because it goes well with the mirror poster and our theme of how appearances are deceitful.

Thank you!

Anna

Please provide feedback on brochure text



YOUR VOICE COUNTS

Search

WORKGROUP DISCUSSION

Please provide feedback on brochure text



Jana_YourSocialMa...

Hello,

We worked with a native Chinese speaker to culturally adapt the copy into traditional Chinese. Please have a look and let me know if you approve the content.

PRIVATE FEEDBACK (P)

Attachment:

- [Suicide Prevention Brochure_Chinese.docx](http://www.yourvoicecounts.org/sites/default/files/topics/Suicide_Prevention_Brochure_Chinese.docx) (http://www.yourvoicecounts.org/sites/default/files/topics/Suicide_Prevention_Brochure_Chinese.docx)
- [Suicide Prevention Brochure_Chinese.pdf](http://www.yourvoicecounts.org/sites/default/files/topics/Suicide_Prevention_Brochure_Chinese.pdf) (http://www.yourvoicecounts.org/sites/default/files/topics/Suicide_Prevention_Brochure_Chinese.pdf)

3 comments

POST COMMENT

(FCOMMENT FORM)



Christina Nip

April 7, 2014 - 10:02am

Hi all,

Sorry for the late response, but the Chinese text looks good to me!

Regards,

Christina



Jana_YourSocialMa...

March 24, 2014 - 2:49pm

Thank you! Just a note that the English is a rough "back translation" of Chinese version. We will not use it on any workgroup materials. It is just for those of us who don't read/understand Chinese to have an idea of what is being communicated in Chinese.



ahuynh

March 22, 2014 - 1:06pm

HI All,

Since my reading Chinese level is not that great, I had my mom help me and she said that it was fine.

However, with the English, I did notice some things that are a little awkward such as

The shadow in the heart needs someone to give a hand! I know this is a direct translation of the Chinese, which sounds fine, but in English sounds a little weird to me.

they are indeed there with some tracks: sounds weird, I would omit with some tracks.

If you can recognize the signs, use the proper words to start a conversation and reach out to local resource organizations for help, you have the power to make a change. This is the power to save a life.: I would end the sentence at help. I would change the next sentence to: You have the power to make a change and save a life. Omit the rest.

Under Use the right words section, I would avoid starting sentences with And or But

Thanks!

Anna

POST NEW COMMENT

YOUR NAME:

em



Vote on illustration style



WORKGROUP DISCUSSION

Vote on illustration style



Jana_YourSocialMa...

Hello,

Since we cannot create the "perfect" poster with stock images, we are going to



http://www.yourvoicecounts.org/sites/default/files/topic_images/CALM_Illustrator_Page_1.jpg



http://www.yourvoicecounts.org/sites/default/files/topic_images/CALM_Illustrator_Page_3.jpg

move towards an illustration. We have narrowed it down to two illustrators. Please let me know which style you prefer. The illustrator will then create the setting of the young woman looking into the mirror and the helper supportive observing her.

In addition I just attended an API conference where I attended a workshop featuring posters and brochures developed to educate the Chinese community about depression. I liked how their poster lists symptoms on the bottom and a path leading towards wellness.

Requested Action:

1. Vote on preferred illustration style. **Click on the images above to enlarge them. Then vote.**
2. Do you recommend that we move forward with the mirror setting we chose or do you prefer the direction of adapting the path towards wellness poster for suicide prevention? **See pdfs below.**

Which direction do you recommend?

- OPTION ONE (JAN FEINDT) ON LEFT
 OPTION TWO (RALPH VOLTZ) ON RIGHT

VOTE

PRIVATE FEEDBACK (f)

Attachment:

[DEPRESS Poster All Ages.pdf](http://www.yourvoicecounts.org/sites/default/files/topic/DEPRESS_Poster_All_Ages.s.pdf) (http://www.yourvoicecounts.org/sites/default/files/topic/DEPRESS_Poster_All_Ages.s.pdf)

[Poster Options_Looking into Mirror.pdf](http://www.yourvoicecounts.org/sites/default/files/topic/Poster_Options_Looking into Mirror.pdf) (http://www.yourvoicecounts.org/sites/default/files/topic/Poster_Options_Looking into Mirror.s.pdf)

6 comments POST COMMENT

(#COMMENT-FORM)



Christina Nip
April 7, 2014 - 10:00am

Hi everyone,

I definitely prefer the style of Ralph Voltz and think that his style will speak more to the cultural and age group we have identified as helpers. I feel that Jan Feindt's style would speak much more to a younger audience. Just the graphics style alone would speak tons about who the poster is speaking to so I vote for Ralph's work.

Also, I think the mirror concept would speak more powerfully and directly about the message of identifying someone at risk to a helper rather than the path to wellness message that I feel speaks much more generally about understanding suicide and suicide prevention to a much wider population. In other words, I feel that that mirror message may be more specific and can target our helper group more effectively.



Jana_YourSocialMa...
April 7, 2014 - 3:02pm

Thank you for your thoughts!



ahuyinh
April 6, 2014 - 7:35pm

HI All,

I still prefer the mirror idea especially if the illustrator is able to portray those heavy emotions on the mirror side and the cherry composure on the woman's face. I also prefer if we can see a clear side of the face of the helper/observer rather than a blurry image.

Thanks!

Anna



Jana_YourSocialMa...
April 7, 2014 - 3:04pm

Thank you!



marissalee
April 4, 2014 - 2:56pm

Is it possible to commission artwork from Chinese American artists or artists of Chinese descent?



Jana_YourSocialMa...
April 7, 2014 - 8:13am

Hi,

AdEase, the advertising agency, that is designing all of the campaign materials has spent a lot of time researching and reaching out to artists who have a skill set for the particular styles we think we work best for the project, e.g. they are both great with facial expressions and settings. They are also used to working with an advertising agency and the requirements that come with having to accept very specific direction from both workgroup members and the creative director who will ultimately turn the illustration into finished outreach pieces. One of the things I have found is that artists from a specific cultural group don't always specialize in the genre of their cultural background, but rather a specific style. So the agency focused on identifying a style they thought worked best for what we have in mind. Does this make

sense? That being said, if you have an illustrator in mind who you would like to refer, please send me his or her information and I can send it on to the agency. We hope to make a selection this week so we can move forward with creating the pieces.

POST NEW COMMENT

YOUR NAME:
em



First draft of illustration for our poster



WORKGROUP DISCUSSION

First draft of illustration for our poster



Jana_YourSocialMa...
May 27, 2014 - 9:43am

Dear Workgroup Members,

Here is the draft of the illustration we will be using for the poster. As a next step



http://www.yourvoicecounts.org/sites/default/files/topic-images/14-CALM-0827_Illustration_Workgroup_R2.jpg

the illustrator will fill in color. Please let me know if you have any thoughts at your earliest convenience. It is best to view the pdf below. You can also click on the image above, but it will appear distorted.

PRIVATE FEEDBACK (0)

5 comments

POST COMMENT
(#COMMENT-FORM)



abuyinh
May 6, 2014 - 7:54pm

Hi All,

When I initially looked at the drawing, I was confused by who was the young person and the helper.

Can we design the younger Asian female to have a more dramatic look of happiness and sadness and also isolate that picture and put it in the background?

While have the helper look a bit older, wear a blouse and slacks, maybe even give her curly hair (I often see middle aged Asian women with curly hair, go figure, but that is the least of the problem)??? Can we have her in the foreground with those words we were planning on saying?

If we place emphasis on these two ideas, we will not need to have a plant or anything. The mirror is fine like that.

Thanks!

Anna



Jana_YourSocialMa...
May 27, 2014 - 9:43am

Hi,

Thank you for your thoughts. I had passed them on to the illustrator, but I had a follow-up question. What do you mean with 'isolate the picture and put it in the background'?



ahuyinh
May 28, 2014 - 7:34pm

Hi,

When I say isolate the picture, I meant to place that image more on the background while the helper is more on the foreground. Hope that makes more sense.

Thanks!

Anna



Christina Nip
May 5, 2014 - 10:59am

Hi Jana,

I couldn't find a PDF link so I looked at the image above, and hence I am not sure if my feedback might be affected by the image I was looking at, but my first initial feeling about the draft is that the characters don't look very close to the target group of possibly monolingual, middle-aged, female Chinese audience, and hence the effectiveness and impact when targeting the group may be lessened.

The reason I say this comes from a few factors.

- 1) The characters don't look very Chinese to me. Their body shape is slightly too stocky. The hair of the girl in the mirror (standing and smiling) also seem uncharacteristically wavy.
- 2) The clothes of the helper doesn't seem to fit the attire of those in that age group. The T-shirt and jeans is not what the helper group typically wears in my experience. People in the helper group I have interacted with tends to wear more loose fitting shirts/blouses and slacks. They rarely wear jeans or fitting pants like depicted above. It might make more sense if the clothes were switched between the two.
- 3) The setting does not feel like a very Chinese household. The furniture design of the rectangular mirror with wide wooden frame, the dresser and the decorative plant are not commonly found in a Chinese household. Consider removing the dresser and plant, and making the mirror full length. Or consider placing Chinese decorative images such as the new year fortune paper cutting decorations on the wall. Or if the layout has to be kept, consider switching plant to those typically displayed in Chinese families, such as lucky bamboo plants, or orchids.



Jana_YourSocialMa...
May 27, 2014 - 9:42am

Hi Christina,

We passed on your feedback to the illustrator and your thoughts were very helpful!

POST NEW COMMENT

YOUR NAME:
em



Appendix C: Member Roster

Name	Organization	County	Qualifications
Lai Meng leong	ACMHS (Alameda Community Mental Health Services)	Alameda	I believe my language capacity (Cantonese & Mandarin) and working experience as a Mental Health Clinician can help develop the materials that require culturally and linguistical competence. I would like to assist the team to help Chinese people understand more about suicide prevention
Erica Thompson	ReachOut	Alameda	I am currently a psychology student at Laney College in Oakland, one unit shy of transferring to San Jose State University. I currently work at ReachOut as a social media content developer for their Facebook and Tumblr. At Reachout, we are committed to reducing the stigma that is often related to people who struggle with mental illness. I also intern at the Mental Health Association of San Francisco as a Youth Investigator where I focus on program evaluation, technical assistance, and stigma reduction in different cultural communities across California. Identifying myself as African American I would be delighted to be a part of the African American workgroup. Is half African American/half Chinese
Roberto De La Pena Jr.	ReachOut	Orange County	I believe that every challenge is an opportunity. Not only do challenges make us stronger, but they give us knowledge that we can share with others who are struggling through similar situations. As a gay youth who has overcome severe identity crisis and self-esteem issues, and as an immigrant Mexican boy who struggled with discrimination based on language and culture, I know that I have a lot of insight to offer to your campaign. I want to be able to make something good of my struggles, for myself and for others, I know that this is the perfect opportunity to do that. I would also be glad to participate in the Chinese speaking work group. Although I am not of Chinese decent, I am very well aware about issues that Chinese and Chinese Americans go through. I am currently learning Mandarin Chinese and am about to start volunteering at the San Diego Chinese History Museum. I am not fluent in Chinese, but I speak enough to understand a bit about the culture and have simple conversations.
Christina Nava	Dignity Health Medical Foundation	Sacramento	Has experience working with Chinese population
Maximo Garcia	Kaiser Hospital	Sacramento	I am a LCSW, working for Kaiser Permanente Crisis Team. I specialize in completing psychiatric emergency assessments, which includes suicide and homicide assessments. I am trained and specialized in working with multicultural families. Furthermore, I am an Adjunct Professor at California State University, Sacramento. I teach a Multicultural Therapy class. I am requesting to be assigned to the Chinese population group.
Anna Huynh	San Gabriel Pomona Regional Center	San Bernardino	I currently work with diverse clients, especially with the Mandarin speaking population, in coordinating services for the developmentally disabled. Often times, I do come across clients and their families who also have mental illness and would always encourage them to seek help. I am interested because I feel the Asian population especially, has difficulty accepting this and getting help and would like to help ameliorate the situation
Marissa Lee		Los Angeles	I recently graduated from UCLA with a Masters Degree in Social Work. I have been active on several cultural competence committees including the California Mental Health Oversight and Accountability Commission's committees. My subject matter specializations include second generation Asian Americans and LGBTQ individuals and the intersection between these groups. I have previously participated on grant reviews and have experience with social media campaign design
Oi Ying Nip (Christina)	NICOS Chinese Health Coalition	San Francisco	I am fluently bilingual in English & Chinese and read and write traditional and simplified Chinese text. I was born in HK and grew up in Singapore. I moved to the US with my family 6 years ago. I currently work with the Chinatown population, many with limited English proficiency. I also work with youth as a supervisor through the MYEEP program in SF, which places youth from at-risk and low income families into worksites for work experience. Suicide prevention and mental health and well-being is something I care about as part of my work relating to the overall well-being of my community's health. Having cultural and linguistically competent materials is especially crucial in reaching out to address health issues. I am very interested in being part of this workgroup, and hope that I can put my own language and cultural skills to good use

Appendix D: Summary of Lay Health Worker Model Interviews

Chinese Lay Health Worker Project Interviews 01.07.2014

Organization	Contact Phone Number	Contact Person	Action	Could you provide us with more information about your lay health worker model to reach the Chinese community?	Do your lay health workers talk about mental health and/or suicide?	Are you open to these topics and, if yes, what type of materials would be useful to you if we could provide it? (e.g. brochure, presentation, etc)	Could you use these materials if provided or would this require additional training?	Is there another organization you recommend we contact outside of San Francisco?
NICCS Chinese Health Coalition	415.788.6426	Elaine/Kent	Left message for coordinators 01.09.14; sent email to Kent at kentwood@nicoschc.org	The model is simple: we train community members as peer health educators. Currently, we are focused on the topics of colorectal cancer awareness and healthy eating. The community members in turn educate friends and acquaintances in their social network about the health topic. An article on the project can be found at http://link.springer.com/article/10.1007/s13187-010-0064-3/fulltext.html .	They do not currently, but could conceivably.	Yes, we would be open to any relevant health topics impacting the Asian American community. Useful materials would include flipchart, brochure.	Of course, additional training would be required in order for the lay health workers to learn about and be versed to speak competently about mental health/suicide.	N/A
Chinatown Public Health Center	415.364.7600	Nursing Mgr.	Left message: 01.09.14; left message for health educator 01.15.14					
Chinese Community Health Resource Center	415.677.2473	Program Mgr. Joyce	Email to admin 01.09.14; sent email to Shirley at shirley@chasc.org; 01.15.14 follow-up call/email to Joyce					
The Healthier Living Project	415.550.6002	Kenneth Wng	T/C on 01.09.14	Their outreach process is 3-prong and includes: 1) recruiting lay leaders to teach the workshops, 2) recruiting organizations to host the workshops, and 3) recruiting participants. Their lay leaders are either volunteers or staff members who work in related fields. They often use flyers placed at the YMCA, library, or senior centers to let the community know of upcoming workshops. The library also has an online newsletter in which they allow information to be posted. They also reach out to hospitals and insurance plans who have a direct connection with the community and can share information.	Their workshops include a variety of topics ranging from physical wellbeing to goal setting skills.	Yes, although their main focus is on off-site workshops where they focus particularly on the topic of the specific program they are teaching and for which they have a license.	This organization has a license to operate from Stanford Univ. and all of the workshops they conduct (6-week workshops) require a license.	Golden Gate Health Initiative VITAS

Appendix E: 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
suicide@preventable.org