



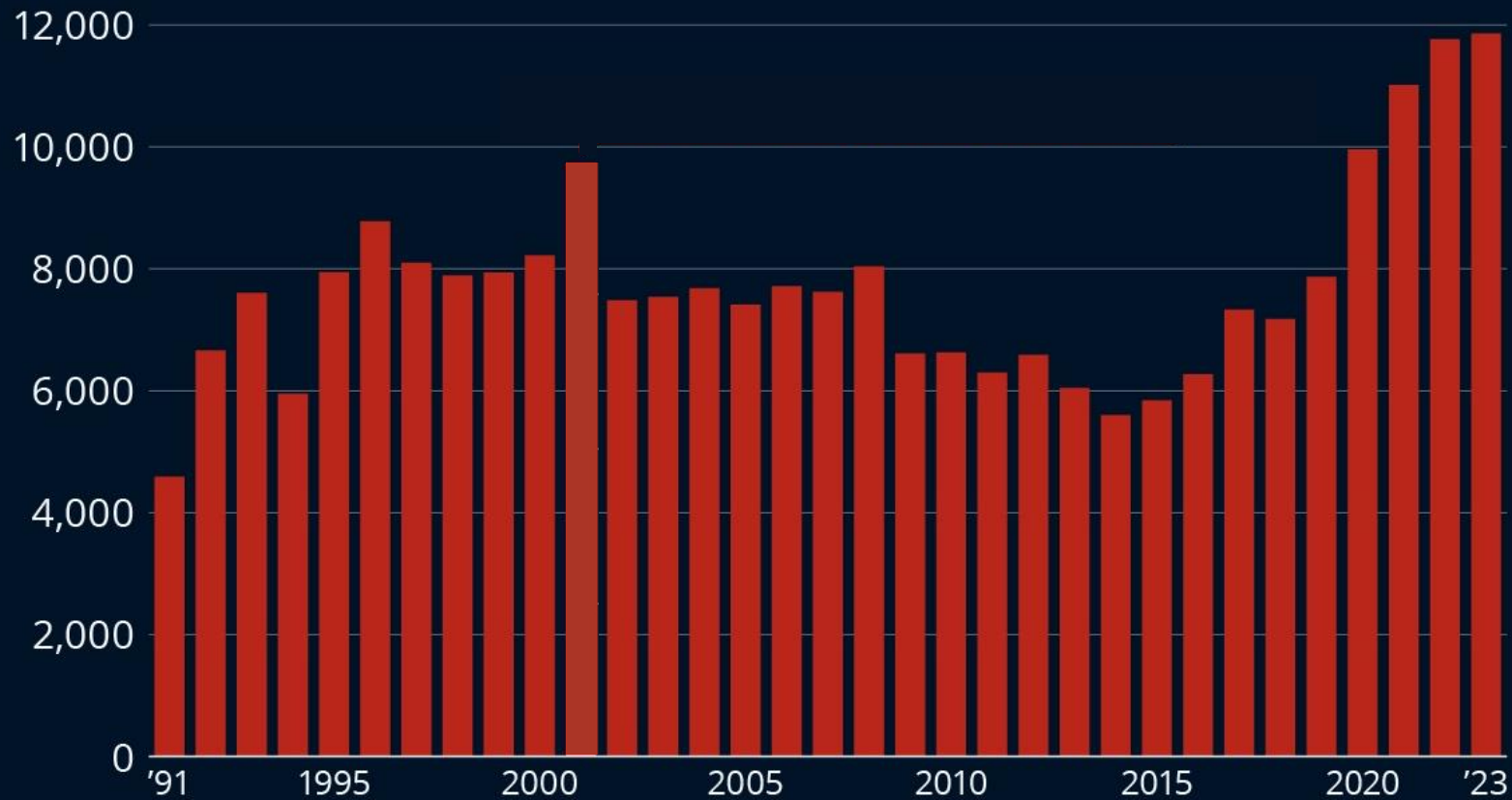
A Time for Strength: Culturally Infusing Suicide Prevention Efforts to Support Our Diverse Communities

Joyce Chu, Ph.D.

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Director, Community Connections
Psychological Associates (CCPA)
Professor, Palo Alto University
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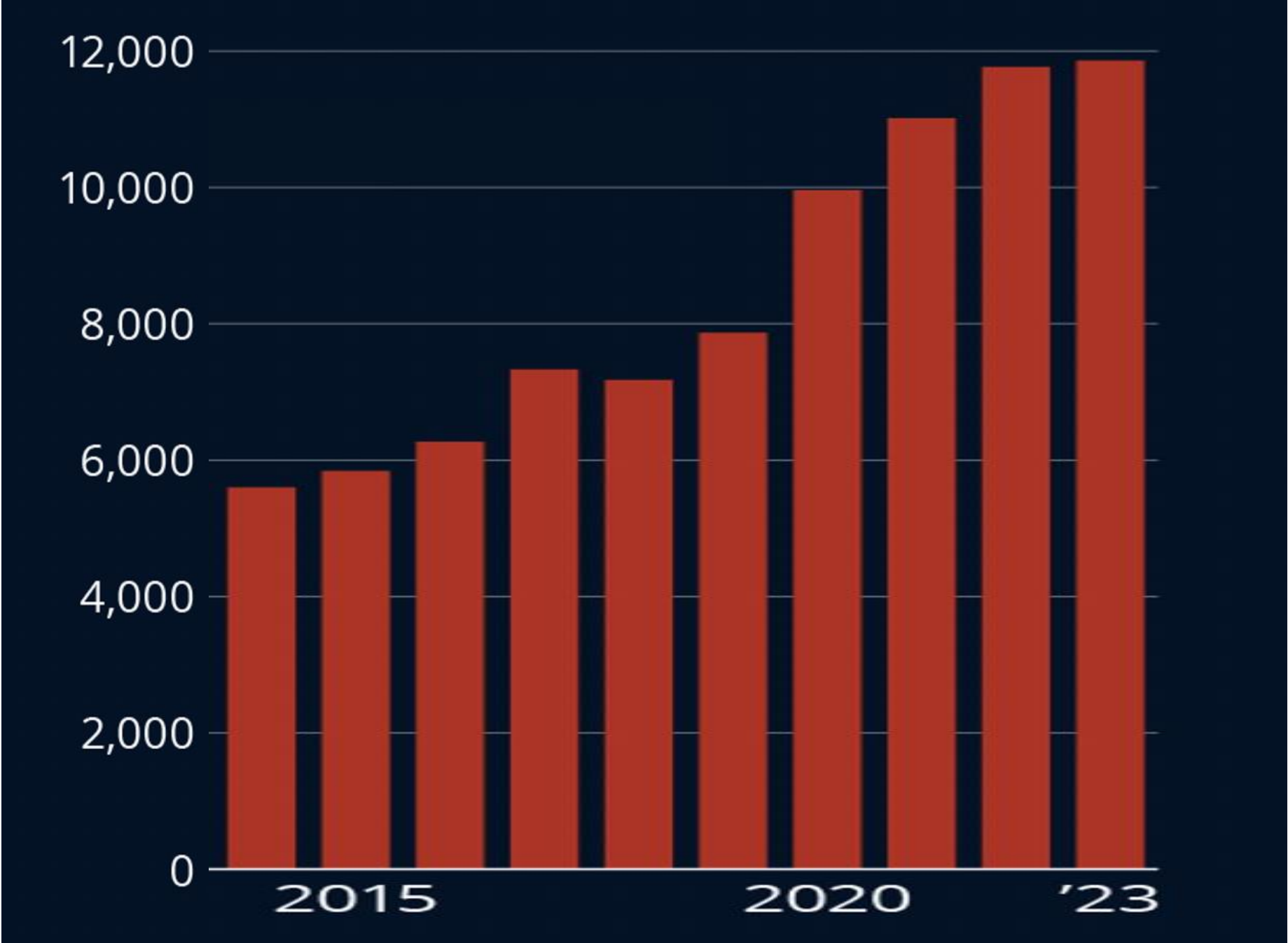
FBI Sees Upward Trend in Reported Hate Crimes

Number of hate crime incidents reported to the FBI in the United States



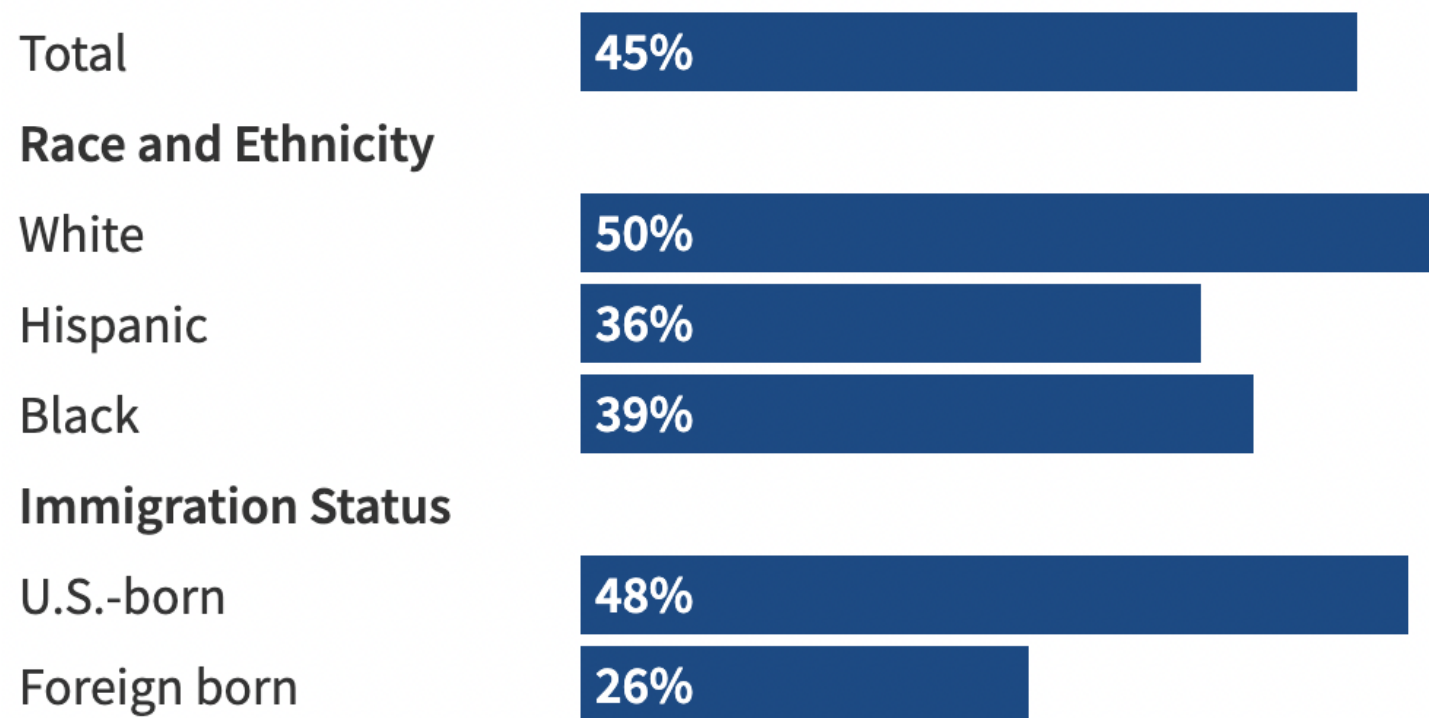
The FBI defines a hate crime as a "crime motivated by bias against race, color, religion, national origin, sexual orientation, gender, gender identity, or disability".

Source: FBI

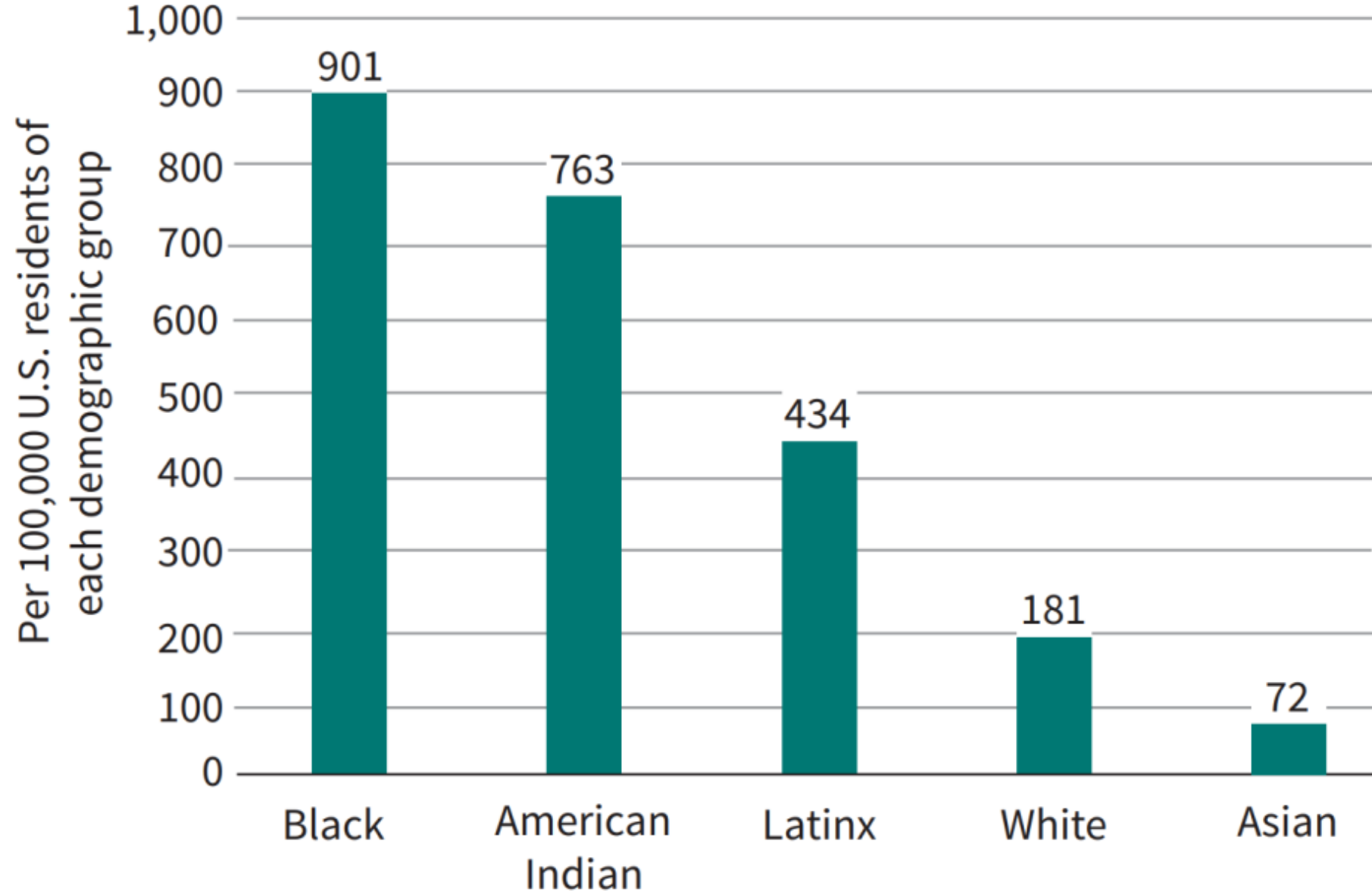


Among Adults Reporting Fair or Poor Mental Health Status, White Adults Are More Likely Than Hispanic and Black Adults To Say They Received Mental Health Care in the Past Three Years

Percent of adults reporting fair or poor mental health status who received mental health services from a doctor, counselor, or other mental health professional in the past three years:



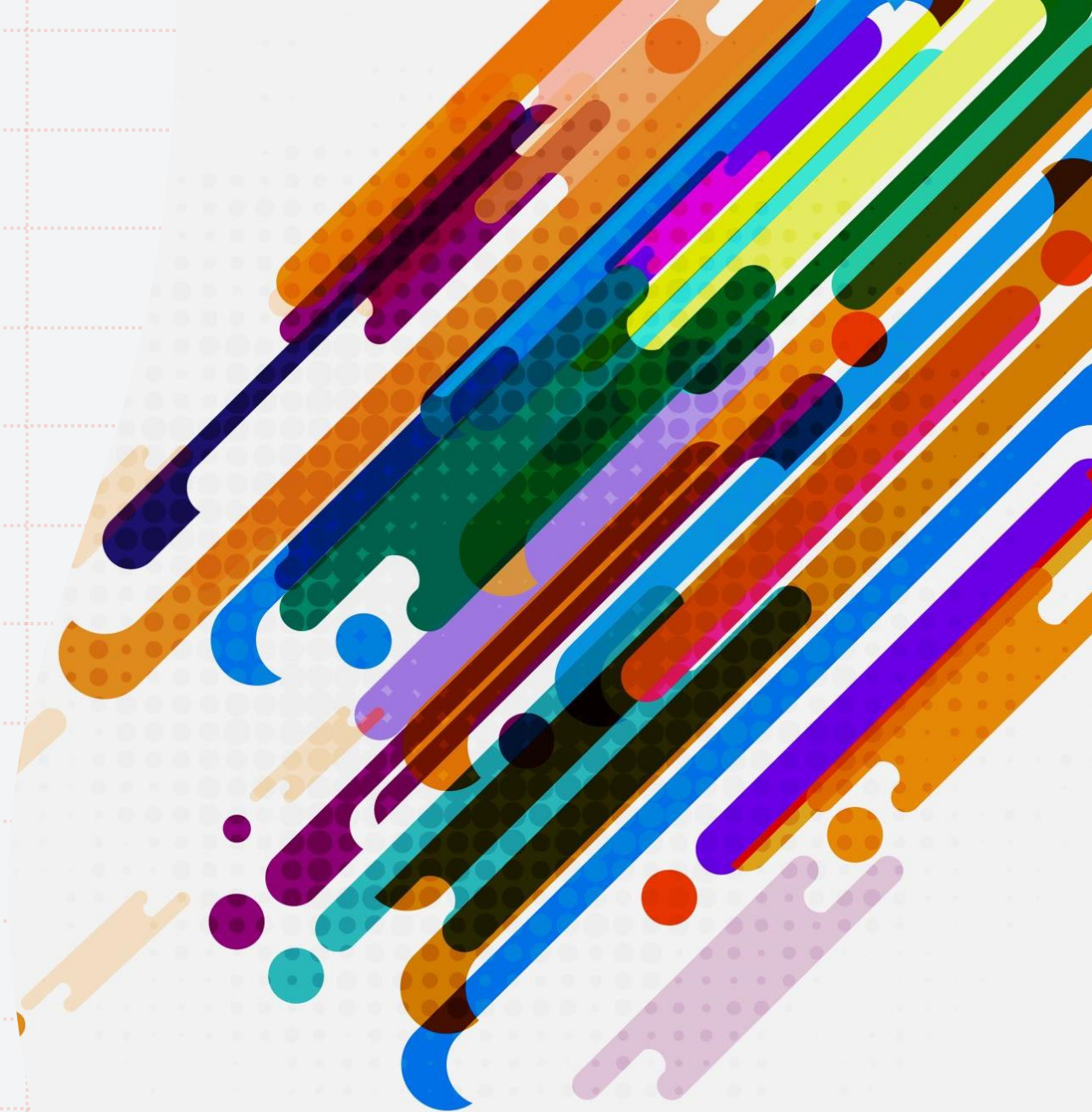
Incarceration Rates by Race and Ethnicity



2021

Call to Action

Changing and Infusing
Culture Into Suicide
Prevention

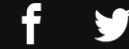




Soaring female suicide rate amid COVID crisis in Japan could be a warning to the world

BY LUCY CRAFT

DECEMBER 1, 2020 / 3:11 AM / CBS NEWS



MENTAL HEALTH

In Japan, more people died by suicide last month than from COVID in all of 2020

Experts say this alarming spike is being partially driven by women, who often work in industries most affected by the COVID-19 pandemic.

By Selina Wang, Rebecca Wright and Yoko Wakatsuki, CNN

Sunday, November 29, 2020



Risk of Depression, Suicide and Substance Abuse

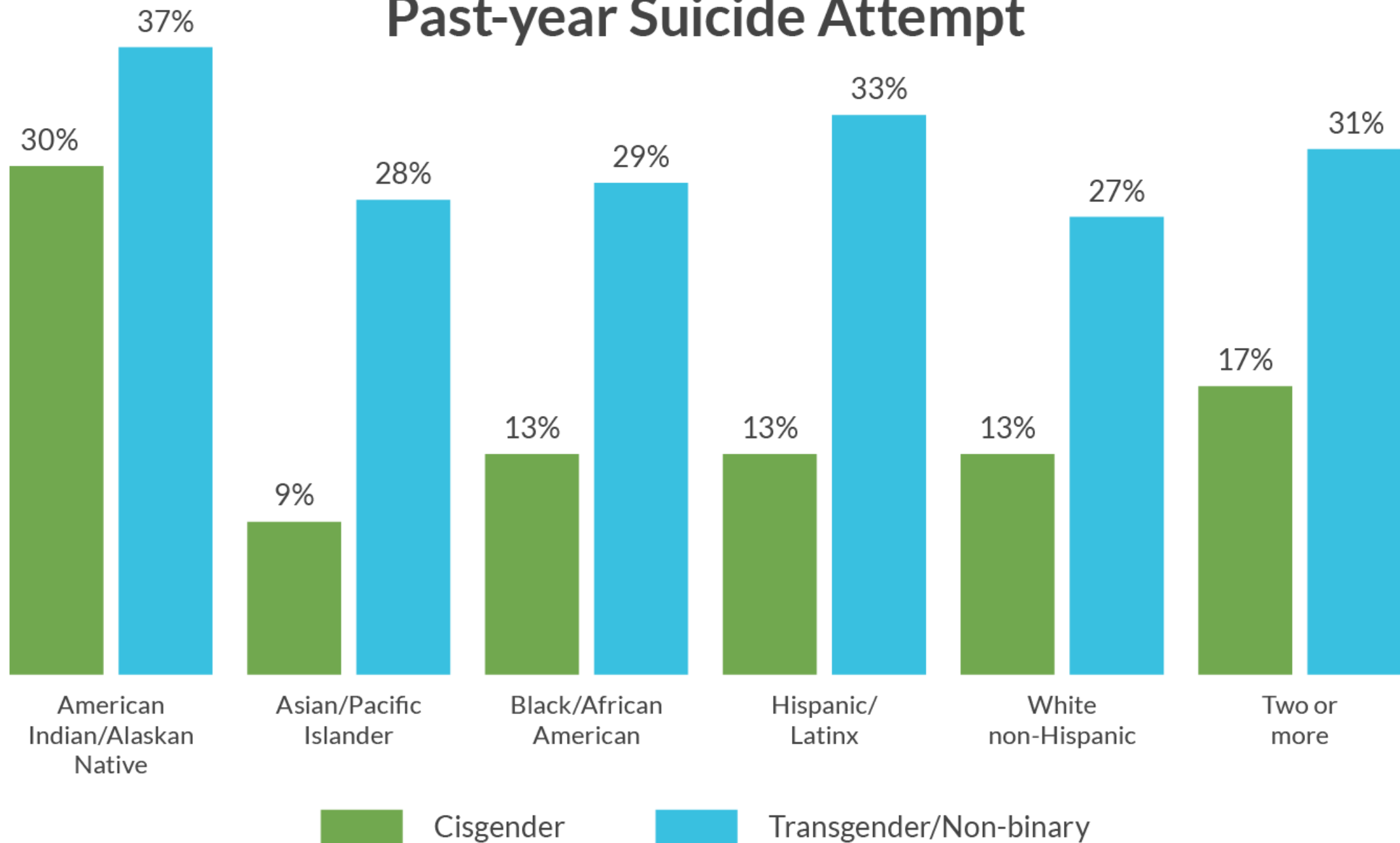
LGB YOUTH ARE

~3X
as likely to
CONSIDER SUICIDE
as straight youth.

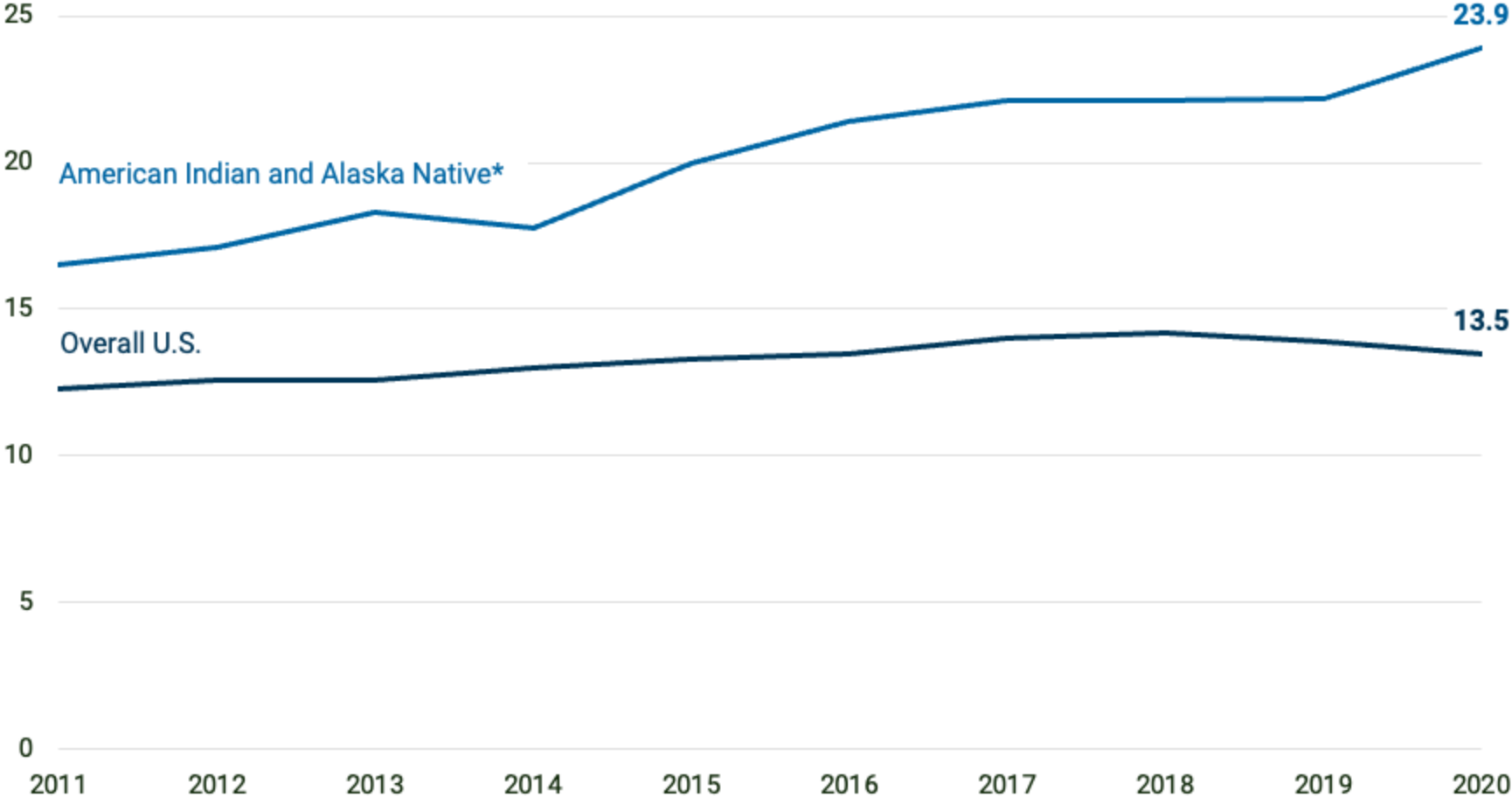
4 1/2X
more likely to
ATTEMPT SUICIDE
than straight youth.

Centers for Disease Control and Prevention: <https://www.cdc.gov/mmwr/volumes/65/ss/pdfs/ss6509.pdf>

Portion of LGBTQ Youth Who Reported a Past-year Suicide Attempt



Suicide Rates Among American Indian and Alaska Native Populations in the U.S., 2011-2020



Age-adjusted rate per 100,000

*Non-Hispanic
Source: CDC, 2021



Cultural Research
Driven Experiences
Guidance

Strategic Direction 4: Health Equity in Suicide Prevention

- **Goal 12:** Embed health equity into all comprehensive suicide prevention activities.
- **Goal 13:** Implement comprehensive suicide prevention strategies for populations disproportionately affected by suicide, with a focus on historically marginalized communities, persons with suicide-centered lived experience, and youth.
- **Goal 14:** Create an equitable and diverse suicide prevention workforce that is equipped and supported to address the needs of the communities they serve.
- **Goal 15:** Improve and expand effective suicide prevention programs for populations disproportionately impacted by suicide across the life span through improved data, research, and evaluation.

National Strategy *for*
Suicide Prevention

2024

Culturally-infused strategic plan

T

**TRAINING,
PROGRAMS,
OUTREACH**

Culturally responsive programs & trainings

E

**EVALUATION &
DATA**

Tracking data across cultures

M

**MEDIA &
RESOURCES**

Linguistically & culturally responsive materials & communications

P

POLICY

Policies that are inclusive and responsive to cultural community needs

O

**ORGANIZATIONAL
STRUCTURE**

Buy-In, Commitment, Resources, Values

S

SYSTEMS-DOWNSTREAM

Clinical systems & practices that are culturally responsive

Cultural Community Collaboration / Leadership

Cultural Model or Framework

Why is Cultural INFUSION Needed in Suicide Prevention?

White adult population

- Concerning rise in suicide ideation
- Suicide attempts and deaths



Suicide Prevention Efforts

- Teach people to ask about suicide
- Distribute resources (hotline, textline)
- Media campaign about warning signs
- Firearm safety outreach
- Training in knowledge & skills of suicide prevention
- Services/programs that screen, assess, & treat
- Data & evaluation efforts to measure & refine

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Black LGBTQ+ identifying youth population

- Concerning rise in suicide ideation
- Suicide attempts and deaths



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Black LGBTQ+ identifying youth population

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Suicide Prevention Efforts

- Ask about suicide in culturally responsive ways
- Resources that fit cultural needs
- Media campaigns with cultural warning signs
- Increase the breadth of means restriction efforts
- Referrals that respect cultural preferences / needs for help
- Culturally responsive screening, assessment, treatment
- Data & evaluation approaches designed to understand and address disparities (CBPR; qualitative)

Culturally-infused strategic plan

T

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THE
SAME
OLD
THINKING

THE
SAME
OLD
RESULTS

A

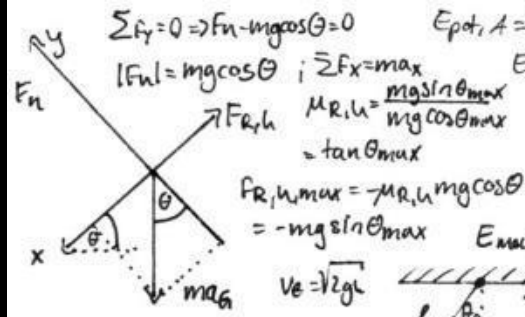
Y



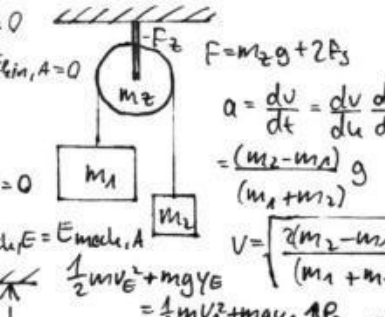
SUICIDE PREVENTION: A CRITIQUE

- Warning signs and materials - same
- Questions asking about suicide – same
- Outreach, interventions, data approaches – same

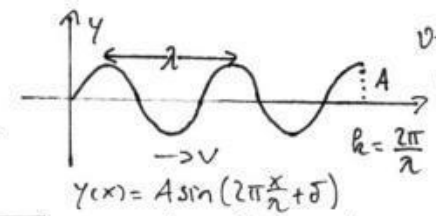
Little recognition of cultural variation, context, or approaches need for diverse communities



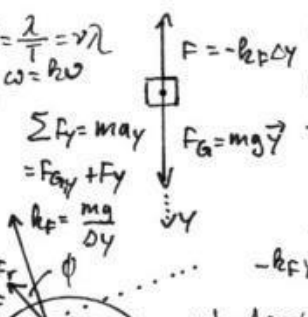
$\Sigma F_y = 0 \Rightarrow F_n \cos \theta = mg$
 $|F_n| = mg \cos \theta$
 $\Sigma F_x = \max$
 $\mu R, \mu = \frac{mg \sin \theta_{\max}}{mg \cos \theta_{\max}} = \tan \theta_{\max}$
 $F_{R, \mu, \max} = -\mu R, \mu mg \cos \theta = 0$
 $= -mg \sin \theta_{\max}$



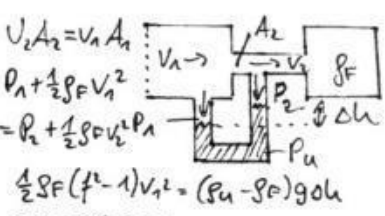
$F = m_2 g + 2F_s$
 $a = \frac{dv}{dt} = \frac{dv}{du} \frac{du}{dt}$
 $= \frac{(m_2 - m_1)}{(m_1 + m_2)} g$
 $v = \sqrt{\frac{2(m_2 - m_1)}{(m_1 + m_2)} gh}$



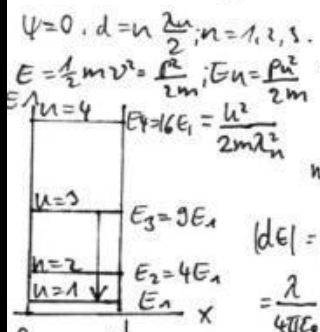
$v = \frac{\lambda}{T} = v \lambda$
 $\omega = k v$
 $y(x) = A \sin(2\pi \frac{x}{\lambda} + \phi)$
 $y(x,t) = A \sin(kx - \omega t)$
 $2\pi v = k \omega = \frac{2\pi}{\lambda} v$
 $\lambda_{\max} = \frac{2.99 \text{ mm} \cdot \text{K}}{T}$
 $P_e = e B A T^4$
 $P_a = e B A T_0^4$
 $\Delta P = e B A (T^4 - T_0^4)$



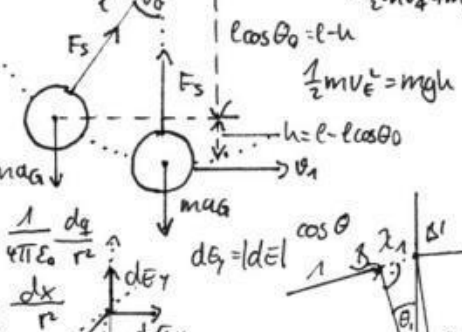
$\Sigma F_y = m a_y$
 $= F_{ay} + F_y$
 $F_c = F \sin \phi$
 $v = v \sin \phi$
 $v^2 = v_0^2 + 2 a x d$



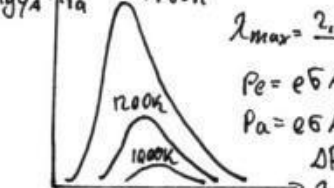
$V_1 A_1 = V_2 A_2 = V_n A_n$
 $P_1 + \frac{1}{2} \rho v_1^2 = P_2 + \frac{1}{2} \rho v_2^2 = P_n + \frac{1}{2} \rho v_n^2$
 $\frac{1}{2} \rho (v^2 - v_0^2) = (\rho_n - \rho_0) g h$
 $\Sigma F_y = -k_f (y + y_0) + m g$
 $\Sigma F_y = -k_f y'$
 $-k_f y' = m \frac{d^2 y}{dt^2}$
 $E_{\text{pot}} = -\int k_f y' dy$
 $\downarrow m a g = \frac{1}{2} k_f y'^2 + E_{\text{pot}}$



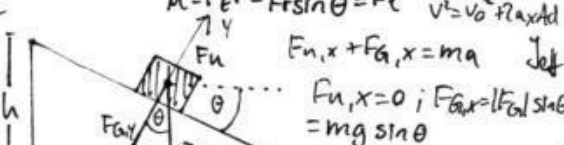
$\Psi = 0, d = n \frac{\lambda}{2}, n = 1, 2, 3$
 $E = \frac{1}{2} m v^2 = \frac{p^2}{2m}, E_n = \frac{p_n^2}{2m}$
 $E_3 = 9E_1$
 $E_2 = 4E_1$
 $E_1 = \frac{h^2}{8md^2}$



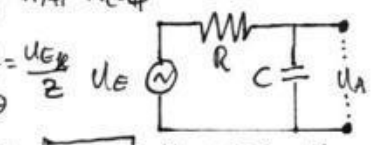
$\frac{1}{2} m v^2 + m g y = \frac{1}{2} m v_0^2 + m g y_0$
 $\frac{1}{2} m v^2 = m g h$
 $h = l - l \cos \theta$
 $\cos \theta = \frac{l - h}{l}$
 $\Delta y = |d\theta|$
 $\frac{d\theta}{dt} = \frac{1}{4\pi \epsilon_0} \frac{dq}{r^2}$
 $\frac{d\theta}{dt} = \frac{2}{4\pi \epsilon_0} \frac{dx}{r^2}$
 $\frac{d\theta}{dt} = \frac{2}{4\pi \epsilon_0} \frac{y dx}{r^3}$



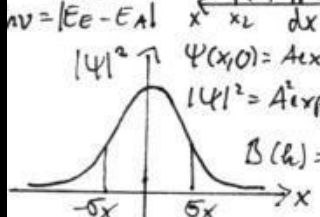
$\lambda_1 = \frac{u_1}{f}, \lambda_2 = \frac{u_2}{f}$
 $\sin \theta_2 = \frac{\lambda_2}{AB'}$
 $\frac{\sin \theta_1}{\sin \theta_2} = \frac{\lambda_1}{\lambda_2} = \frac{u_1}{u_2} = \frac{v_1}{v_2}$
 $\frac{v_1}{v_2} = \frac{1}{\sqrt{1 - \beta^2}}$
 $\frac{v_1}{v_2} = \frac{1}{\sqrt{1 - (v_0/c)^2}}$
 $\frac{1}{\beta} = \sqrt{1 - (v_0/c)^2}$
 $P_2^{(A)} = -P_1^{(A)}$



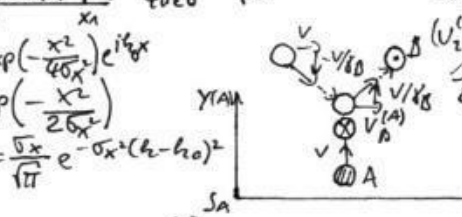
$F_{n,x} + F_{a,x} = m a$
 $F_{n,x} = 0; F_{a,x} = F \sin \theta = m g \sin \theta$
 $a_x = g \sin \theta$
 $v^2 = 2 g \sin \theta \Delta x$
 $v^2 = 2 g h$
 $v_s = \sqrt{2 g h} \cdot \sin \theta$



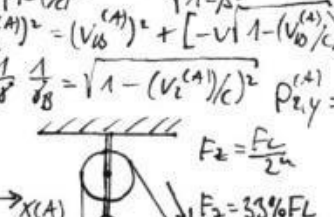
$U_{a, \text{eff}} = X_C I_{\text{eff}} = \frac{X_C U_{\text{eff}}}{Z}$
 $Z = \sqrt{R^2 + X_C^2}$
 $U_{a, \text{eff}} = X_C I_{\text{eff}} = \frac{X_C U_{\text{eff}}}{Z}$



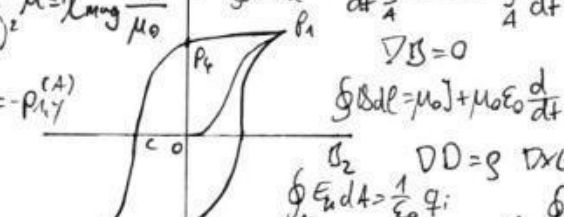
$|\psi|^2 = A^2 \exp(-\frac{x^2}{2\sigma^2})$
 $\beta(h) = \frac{\sqrt{x}}{\sqrt{\pi}} e^{-\sigma^2(x-h_0)^2}$
 $\text{Re}(\psi) = A \cos(k_0 x - \omega t)$
 $|F| = \frac{1}{4\pi \epsilon_0} \frac{ze^2}{r}$
 $= \frac{mv^2}{r}$



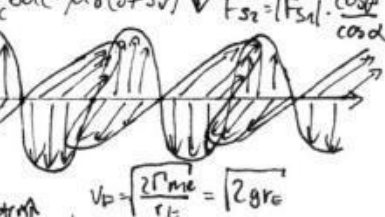
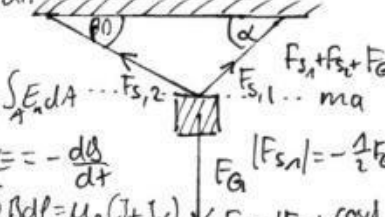
$E_{\text{pot}} = -\frac{1}{4\pi \epsilon_0} \frac{ze^2}{r}$
 $E_{\text{kin}} = \frac{1}{2} m v^2 = \frac{1}{2} \frac{1}{4\pi \epsilon_0} \frac{ze^2}{r}$
 $E_{\text{pot}} = -2 E_{\text{kin}}$



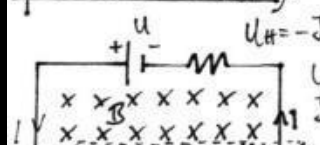
$F_2 = \frac{F_1}{2}$
 $E = F_2 \cdot s$
 $= \frac{F_2}{u} \cdot u \cdot h$
 $F_L = F_L \cdot h = m \cdot g \cdot h$
 $s = u \cdot h$



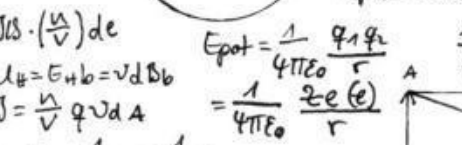
$\oint E \cdot dl = -\frac{d}{dt} \int B \cdot dA = -\frac{d\Phi_B}{dt}$
 $\oint B \cdot dl = \mu_0 (I + I_{\text{displacement}})$
 $\oint B \cdot dl = \mu_0 (I + \epsilon_0 \frac{d}{dt} \int E \cdot dA)$
 $\oint E \cdot dA = \frac{1}{\epsilon_0} q$
 $\oint B \cdot dA = 0$
 $\beta = \beta_2 + \mu_0 u = \beta_2 (1 + \lambda u)$
 $E = c \beta$
 $\beta = \mu_0 u$
 $E = c \mu_0 u$
 $\mu = \mu_0 \epsilon_0 u$
 $m_1 v_{1A} + m_2 v_{2A} = m_1 v_{1E} + m_2 v_{2E}$
 $\frac{1}{2} m_1 v_{1E}^2 + \frac{1}{2} m_2 v_{2E}^2 = \frac{1}{2} m_1 v_{1A}^2 + \frac{1}{2} m_2 v_{2A}^2$
 $m a = \frac{a x}{g}; a = g \tan \theta$
 $\tan \theta = \frac{a x}{g}; a = g \tan \theta$



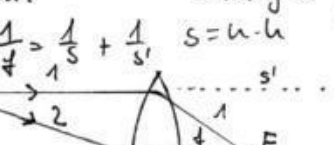
$v_0 = \sqrt{\frac{2 \Gamma m e}{r_0}} = \sqrt{2 g r_0}$
 $E_2 > 9$
 $E_{\text{pot}}(r) = -\frac{\Gamma m e m}{r}$
 $E_{\text{kin}} = E - E_{\text{pot}}$



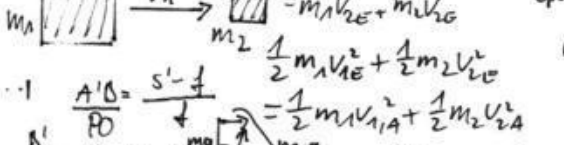
$U_H = \int \mathbf{J} \cdot (\frac{\mathbf{v}}{c}) d\mathbf{e}$
 $U_H = E_H + b = v d B b$
 $\mathbf{J} = \frac{1}{V} q v d A$
 $b \frac{v}{V} = \frac{1}{4\pi r_0} b d e v d$
 $= -\mathbf{J} \cdot d\mathbf{U}_H$



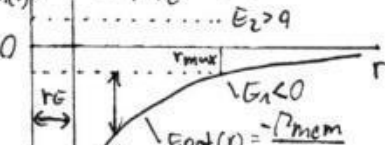
$E_{\text{pot}} = \frac{1}{4\pi \epsilon_0} \frac{q_1 q_2}{r}$
 $= \frac{1}{4\pi \epsilon_0} \frac{ze(e)}{r}$
 $\frac{1}{f} = \frac{1}{s} + \frac{1}{s'}$
 $\frac{A'B'}{AB} = \frac{s'}{s}$



$\frac{A'B'}{AB} = \frac{s'}{s}$
 $\frac{s'}{s} = \frac{s' - f}{f}$



$\frac{A'B'}{AB} = \frac{s'}{s}$
 $\frac{s'}{s} = \frac{s' - f}{f}$



$\frac{A'B'}{AB} = \frac{s'}{s}$
 $\frac{s'}{s} = \frac{s' - f}{f}$

Minority
Stress

Idioms of
Distress

Social
Discord

Cultural
Sanctions

CULTURAL FACTORS

95% of the culturally specific
suicide risk literature encompassed
by 4 factors

The Cultural Theory and Model of Suicide

4 key concepts

#1. Account for Different Signs of Suicide

Cultural Idioms of Distress

#2. Suicide May Be Precipitated By Different Stressors

Minority Stress, Social Discord

#3. Look for the Cultural Meaning of Things

Cultural Sanctions

#4. Are there help resources for us?

Cultural Preferences For Help

Resources / Referral Access

Chu, Goldblum, Floyd, & Bongar (2010)

Yang, Lam, Vega, Martinez, Botcheva, Hong, Chu, & Lewis (2018)

The Cultural Theory and Model of Suicide for Youth

Four Factors

Cultural Sanctions:
Cultural meanings and messages regarding acceptability of life events or suicide

Idioms of Distress:
Cultural variation in expression of suicidality

Minority Stress:
Stress related to one's cultural minority identity

Social Discord:
Social conflict with others in one's life, such as friends, peers, and family

Events *Academic Stress	Suicide
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Suicidal Methods/ Means	Expressions
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Ethnic/Racial Minority Stress	LGBTQ+ Minority Stress
--------------------------------------	-------------------------------

Family Conflict *Family Rejection	*Intergenerational cultural conflict
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Acculturative Stress

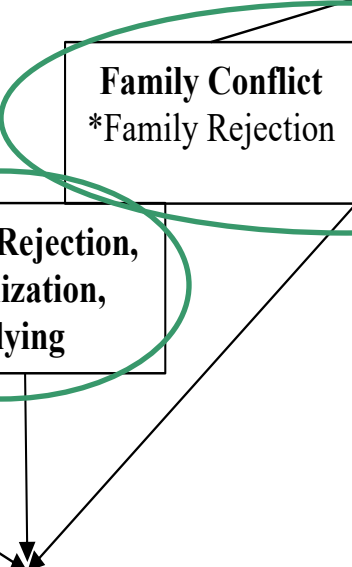
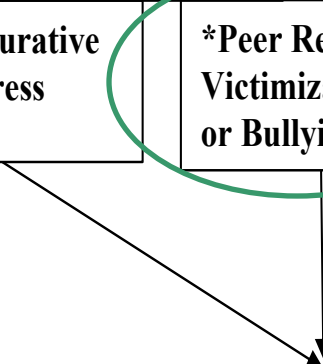
***Peer Rejection, Victimization, or Bullying**

Three Theoretical Principles

Cultural Meanings:
Cultural meanings around life stressors and suicide affect the development of suicidality for youth

Culture Affects Expression:
Suicidal ideation and behaviors are expressed and experienced differently across cultures

Culture Affects Stressors:
Culturally-informed life stressors related to minority stress and social discord events can increase suicide risk for youth



→ GOAL 13:

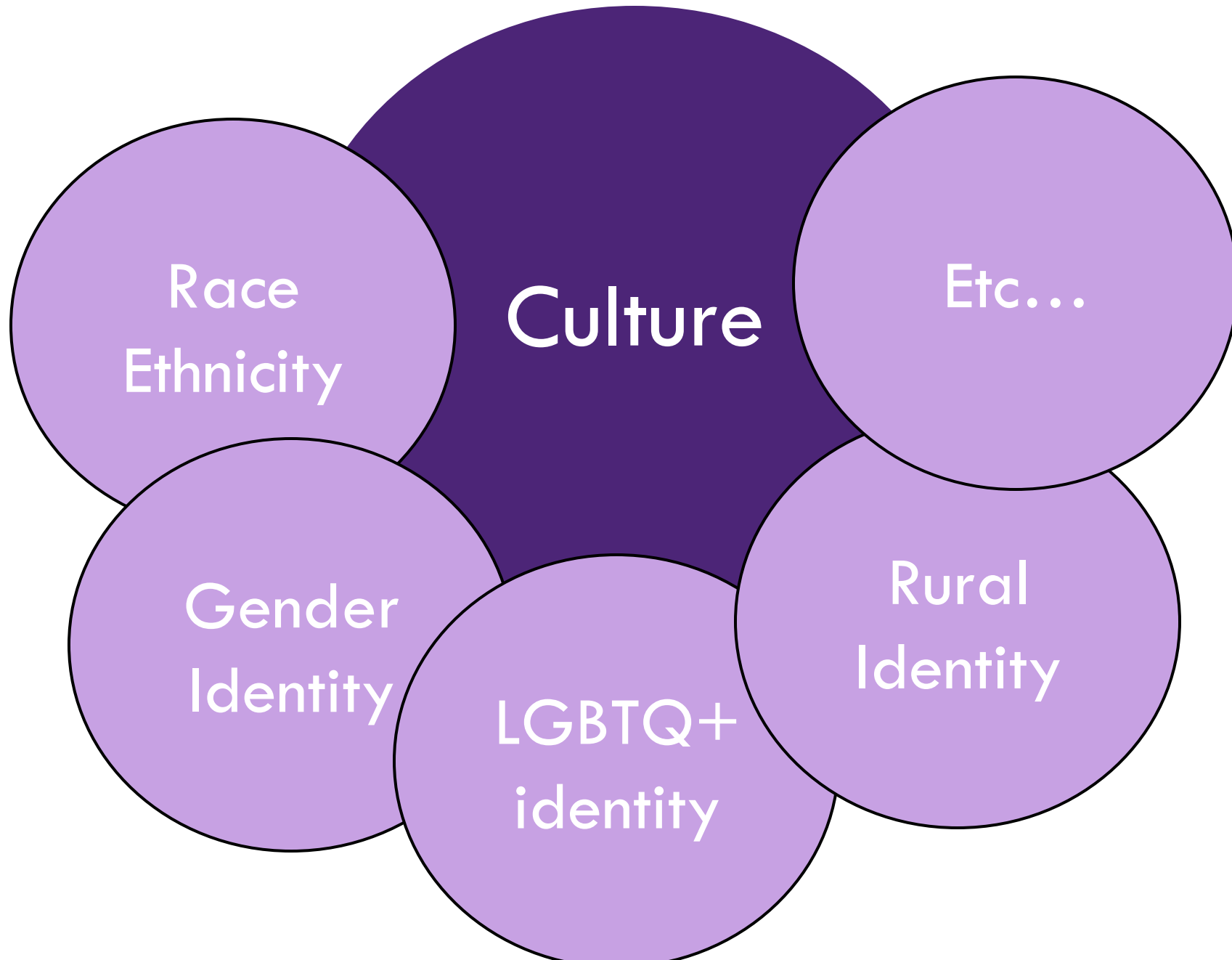
Implement comprehensive suicide prevention strategies for populations disproportionately affected by suicide, with a focus on historically marginalized communities, persons with suicide-centered lived experience, and youth.

Focus on Special Populations

Preventing suicide requires focusing on populations disproportionately affected or where suicide rates are increasing. Effective prevention efforts require considering unique strengths, challenges, barriers, and resources. The Cultural Theory and Model of Suicide includes three considerations for understanding how culture impacts suicide, as follows:

- Culture affects the types of stressors associated with suicide
- Cultural meanings associated with stressors and suicide affect the development of suicidal thoughts, one's threshold of tolerance for psychological pain, and subsequent suicidal acts
- Culture affects how suicidal thoughts, intent, plans, and attempts are expressed (Chu et al., 2010)

The model was developed by analyzing suicide research among African American, Asian American, American Indian and Alaska Natives, and LGBTQ+ adults, but culture expands beyond race and ethnicity, sexual orientation, and gender identity. Other groups may also fit the model based on the above characteristics, including people with disabilities (Marlow et al., 2021), rural populations, and Veterans, among others. Collaborating with people who are part of these groups can help address suicide risk factors, develop focused interventions, improve risk assessment tools, and improve communication regarding suicide prevention activities.





#1. ACCOUNT FOR DIFFERENT SIGNS OF SUICIDE

Idioms of Distress

CULTURAL IDIOMS OF DISTRESS

Definition:

- The way suicide symptoms (or methods) are expressed
- One's likelihood to express suicidality

Hidden Suicidal Ideation (HSI) (Morrison & Downey, 2000)

SCREENING FROM A CULTURAL LENS

Cultural Variations in how to ask about suicide

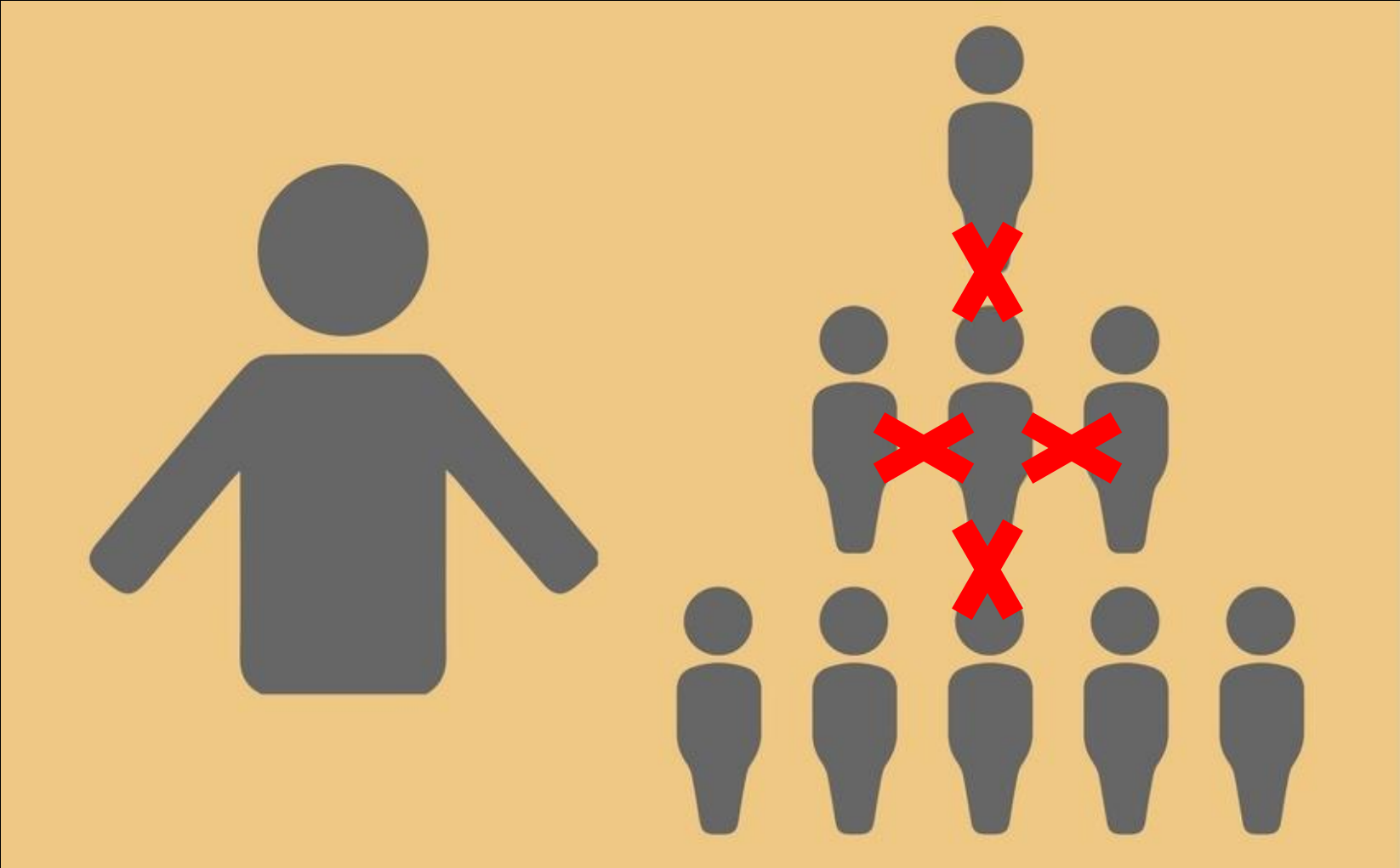
- Have you ever wanted to give your life away?
- Have you ever felt your loved ones would be better off without you?
- Have you ever felt no one would care if you weren't around anymore?
- Have you ever felt you don't deserve to be alive?
- Have you felt so ashamed that you wanted to disappear?
- Have you ever felt your time on this earth is done?
- Have you felt this world has rejected you and it's time to leave?
- Have you ever wished someone else would just end your life?



#2. SUICIDE MAY BE PRECIPITATED BY DIFFERENT STRESSORS

Social Discord

Minority Stress



MINORITY STRESS

External

- **Negative life events, Discrimination, “-isms,” Outness**
(concealment vs. disclosure)
- **Acculturative Stress**

Internal

- **Internalized stigma or bias** (negative beliefs and stereotypes re: racism, homophobia, transphobia; expectations of rejection and discrimination)



BLACK LIVES MATTER

RACISM IS A PUBLIC HEALTH CRISIS

RACISM IS A PANDemic

I MARCH FOR TOM MBEDEKE ALL BLACK LIVES

Heritage

philosophy

Suicide Warning Signs - Cultural Variations (Minority Stress, Social Discord)

Thoughts

- Thinking life is not worth living, thinking about hurting yourself, or having suicidal thoughts
- Thinking others are better off without you.
- Thinking you are a failure
- Believing that no one understands you

Feelings

- Feeling hopeless, desperate, or trapped.
- Feeling abandoned or betrayed.
- Feeling no sense of purpose.
- Sudden mood changes.
- Feeling ashamed of who you are.
- Feeling unbearable emotional pain.

Physical

- Trouble coping with health changes
- Unbearable chronic pain

Behavioral

- Giving away prized possessions.
- Doing reckless things that put you in danger.
- Putting affairs in order.
- Increased drug, alcohol use or other ways to numb pain.
- Withdrawing and spending most of your time alone.
- Not caring for personal hygiene or health needs.

Verbal

- "I just want out."
- "I won't be around much longer."
- "I'm a burden to other people."
- I want to go to sleep & never wake up again

Situational

- Conflict with or rejection from your family, support system, or community.
- Exposure to trauma, such as abuse or bullying.
- Financial stress.
- Chronic or terminal illness.
- Death or suicide of a loved one.
- Discrimination or being treated unfairly because of who you are.
- Not having others who understand you.
- Failure to meet expectations.
- Trouble adjusting to a new culture.



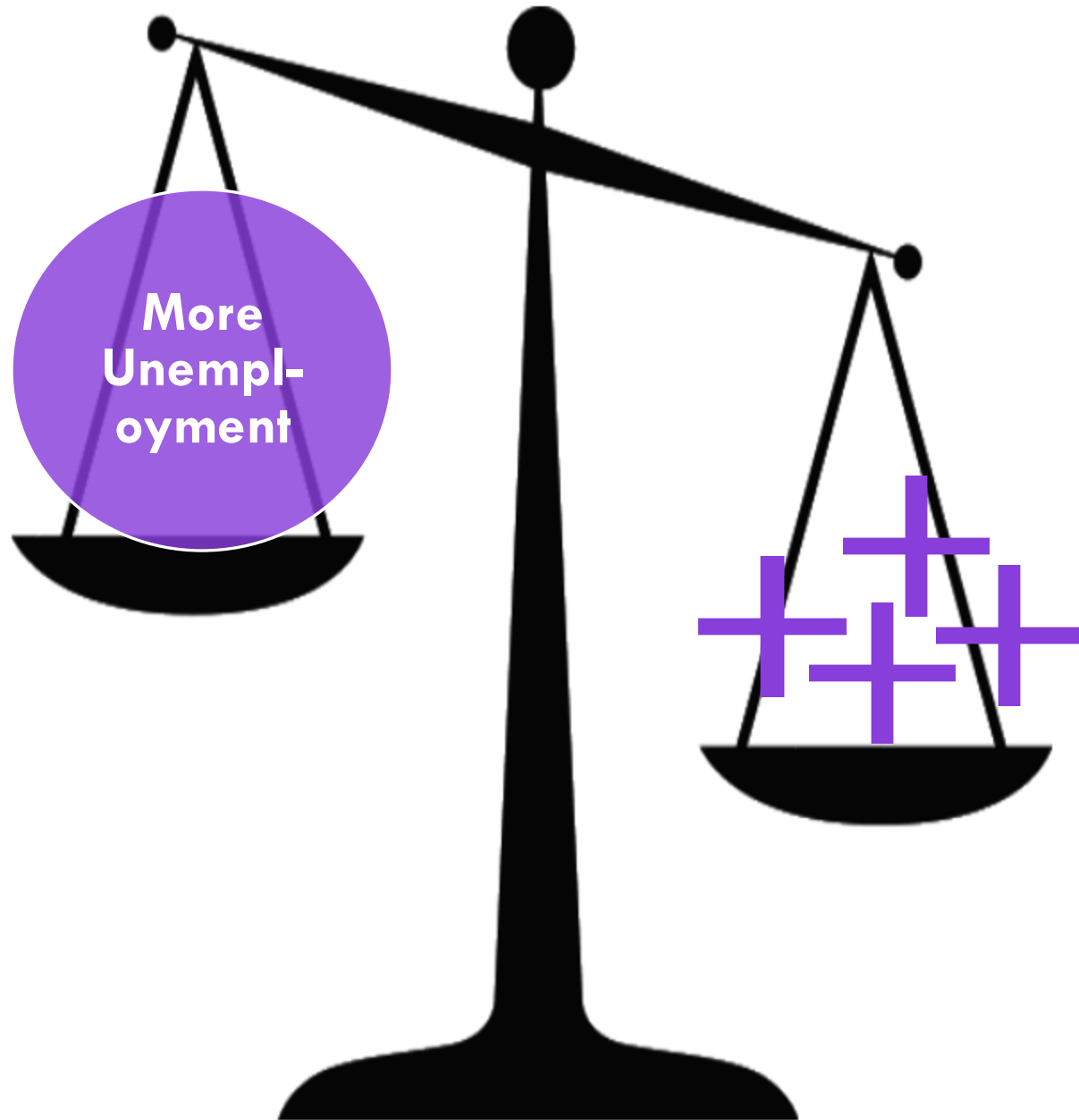
#3. LOOK FOR THE CULTURAL MEANINGS OF THINGS

Cultural Sanctions

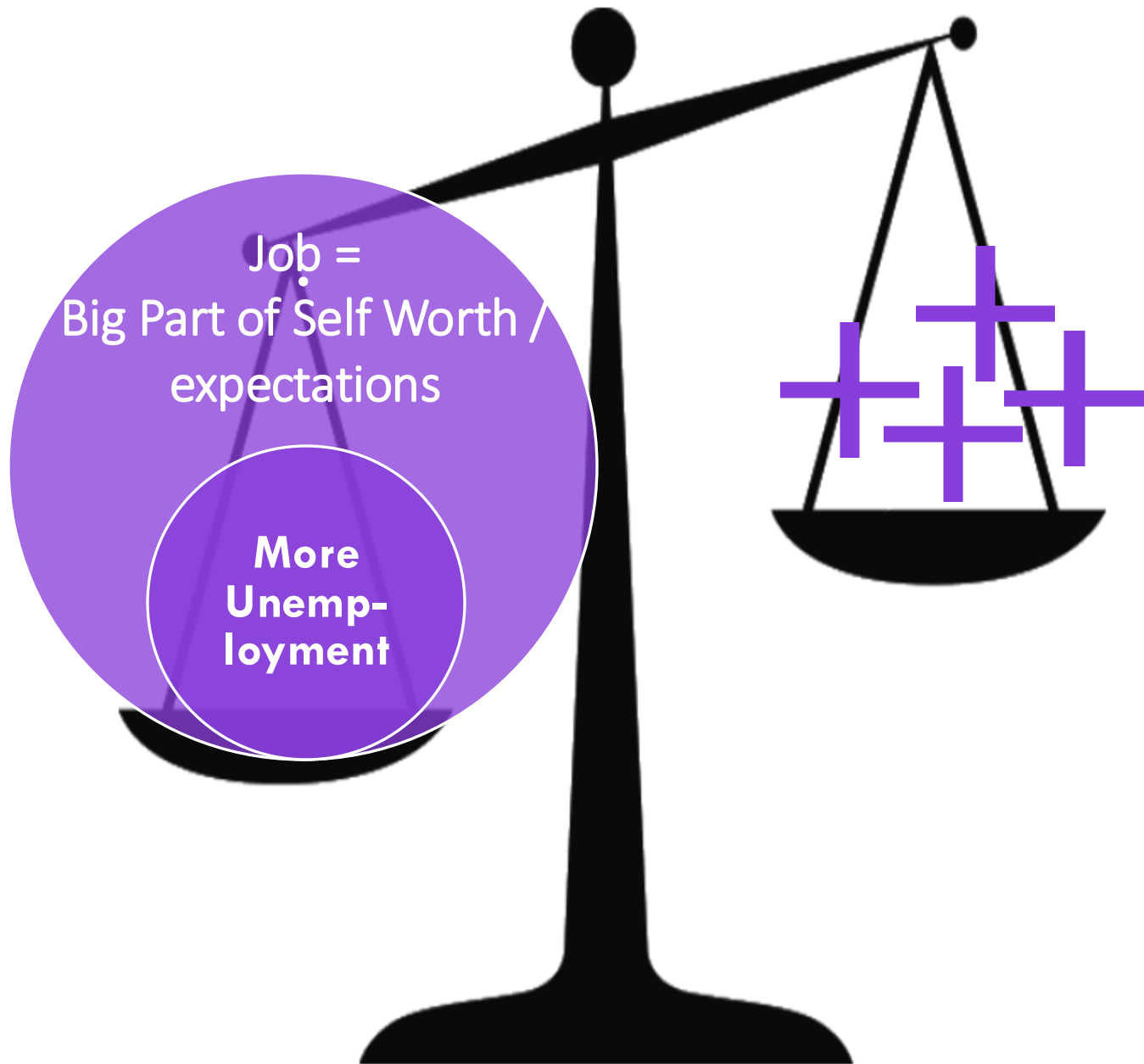


**18TH GREAT
GRANDPA**



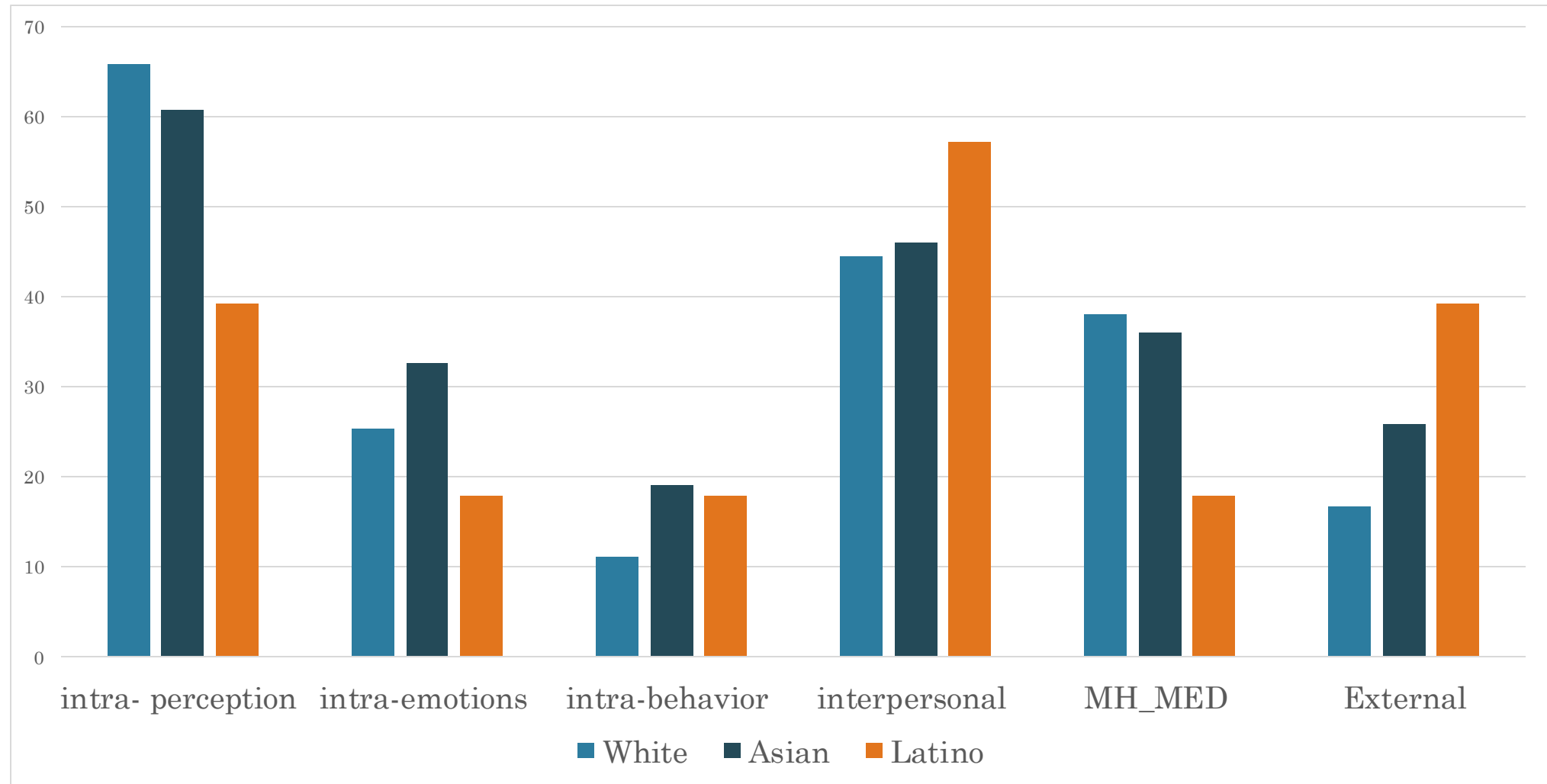


WHAT DOES THE
STRESSOR MEAN
FOR THIS
COMMUNITY?



WHAT DOES THE
STRESSOR MEAN
FOR THIS
COMMUNITY?

PERCEIVED MOTIVES FOR SUICIDE





#3. LOOK FOR THE CULTURAL MEANINGS OF THINGS

Cultural Sanctions



#4. ARE THERE HELP RESOURCES FOR US?

*Cultural Preferences For Help
Resources/Referrals Access*

The Cultural Theory and Model of Suicide

4 key concepts

#1. Account for Different Signs of Suicide

Cultural Idioms of Distress

#2. Suicide May Be Precipitated By Different Stressors

Minority Stress, Social Discord

#3. Look for the Cultural Meaning of Things

Cultural Sanctions

#4. Are there help resources for us?

Cultural Preferences For Help

Resources / Referral Access

Chu, Goldblum, Floyd, & Bongar (2010)

Yang, Lam, Vega, Martinez, Botcheva, Hong, Chu, & Lewis (2018)

→ GOAL 15:

Improve and expand effective suicide prevention programs for populations disproportionately impacted by suicide across the life span through improved data, research, and evaluation.

Improve Data, Research, and Evaluation

- The Cultural Assessment of Risk for Suicide (CARS) created a screening assessment tool that addresses cultural variations in the presentation of suicide risk. CARS was informed by the Cultural Theory and Model of Suicide (described in Goal 13). This model characterizes the many cultural variations in suicide risk among ethnic and sexual minority groups. The tool was tested with 950 adults from the general population. Minority participants reported experiencing the cultural risk factors identified in the tool to a greater extent than non-minority participants. Results also showed reliability in identifying cultural suicide risk factors not available in other assessment tools. Ultimately, CARS can help behavioral health providers measure cross-cultural variations in suicide-related distress, meaning, risk and protective factors, intention, and plans. To learn more about CARS, visit https://www.researchgate.net/publication/235378188_A_Tool_for_the_Culturally_Compent_Assessment_of_Suicide_The_Cultural_Assessment_of_Risk_for_Suicide_CARS_Measure.

A Tool for the Culturally Competent Assessment of Suicide: The Cultural Assessment of Risk for Suicide (CARS) Measure

Joyce Chu, Rebecca Floyd, and Hy Diep
Palo Alto University

Seth Pardo
Alliant International University

Peter Goldblum
Palo Alto University

Bruce Bongar
Palo Alto University and Stanford University
Medicine

CARS Manual download
available at the Culture &
Suicide Prevention Institute
(www.CSP.Institute)

Archives of Suicide Research, 0:1–9, 2018
Copyright © International Academy for Suicide Research
ISSN: 1381-1118 print/1543-6136 online
DOI: 10.1080/13811118.2017.1413469



A Shortened Screener Version of the Cultural Assessment of Risk for Suicide

Joyce Chu, Brandon Hoeflein, Peter Goldblum, Dorothy Espelage,
Jordan Davis, and Bruce Bongar

The Culture & Suicide Prevention Institute
(CSPI)

We can unite to prevent suicide for
culturally diverse communities

Culturally-Infused Trainings

Culturally-Responsive Clinical
Systems

Cultural Warning Signs

Cultural Theory & Model

CARS Clinical Measure

CICF Curriculum Framework

The CARS Measure
(Cultural Assessment of Risk for Suicide)



About the CARS Measure

The CARS measure is a psychometrically valid instrument that assesses for the 4 theoretical constructs of the Cultural Theory and Model of Suicide. It can be used as a clinical tool to assess for the four major ways in which culture influences suicide risk across multiple cultural identities. It is available in a 39-item and 14-item version

Culturally-infused strategic plan

T

**TRAINING,
PROGRAMS,
OUTREACH**

Culturally responsive programs & trainings

E

**EVALUATION &
DATA**

Tracking data across cultures

M

**MEDIA &
RESOURCES**

Linguistically & culturally responsive materials & communications

P

POLICY

Policies that are inclusive and responsive to cultural community needs

O

**ORGANIZATIONAL
STRUCTURE**

Buy-In, Commitment, Resources, Values

S

SYSTEMS-DOWNSTREAM

Clinical systems & practices that are culturally responsive

Cultural Community Collaboration / Leadership

Cultural Model or Framework



SP201

Suicide Prevention Training for Clinicians

(Youth & Adults)

The leading culturally-infused suicide
prevention clinician training

About SP201 (Suicide Prevention 201)

Suicide Prevention 201 (SP201): Advancing Suicide Prevention & Management for Diverse Clients is a diversity- and culturally-infused workshop for clinicians, crisis response providers, school counselors, and other providers. It teaches core suicide prevention and management from beginning to end (screening, comprehensive assessment, crisis response and safety

Risk Level determination process

For the Columbia Protocol, risk is determined by the category of the most concerning item that is endorsed. In this case, the highest category item endorsed was:

[Author: choose 1 of the following]

1. “wished you were dead”, which is in the yellow tier indicating low risk.
2. “thoughts about killing yourself”, which is in the yellow tier, indicating low risk with a need for behavioral health referral.”
3. “how you might do this”, which is in the orange tier, indicating moderate risk with a need for immediate behavioral health referral ”

-
-
-

As the clinician, I agreed with this determination of [*LOW, LOW TO MODERATE, MODERATE, MODERATE TO HIGH, HIGH, IMMINENT*] risk.

Other Cultural Idioms of Suicidal Distress

[insert other expressions / symptoms – (e.g., headaches, fatigue, shame, emotions, behaviors, physical, etc.) – that may represent the diverse ways that suicidal ideation/intent/plan/means is showing up]

Comprehensive Suicide Assessment

The individual listed above was assessed for risk of danger to self by the assessing clinician using a conceptualization method that has been empirically demonstrated to improve consideration and

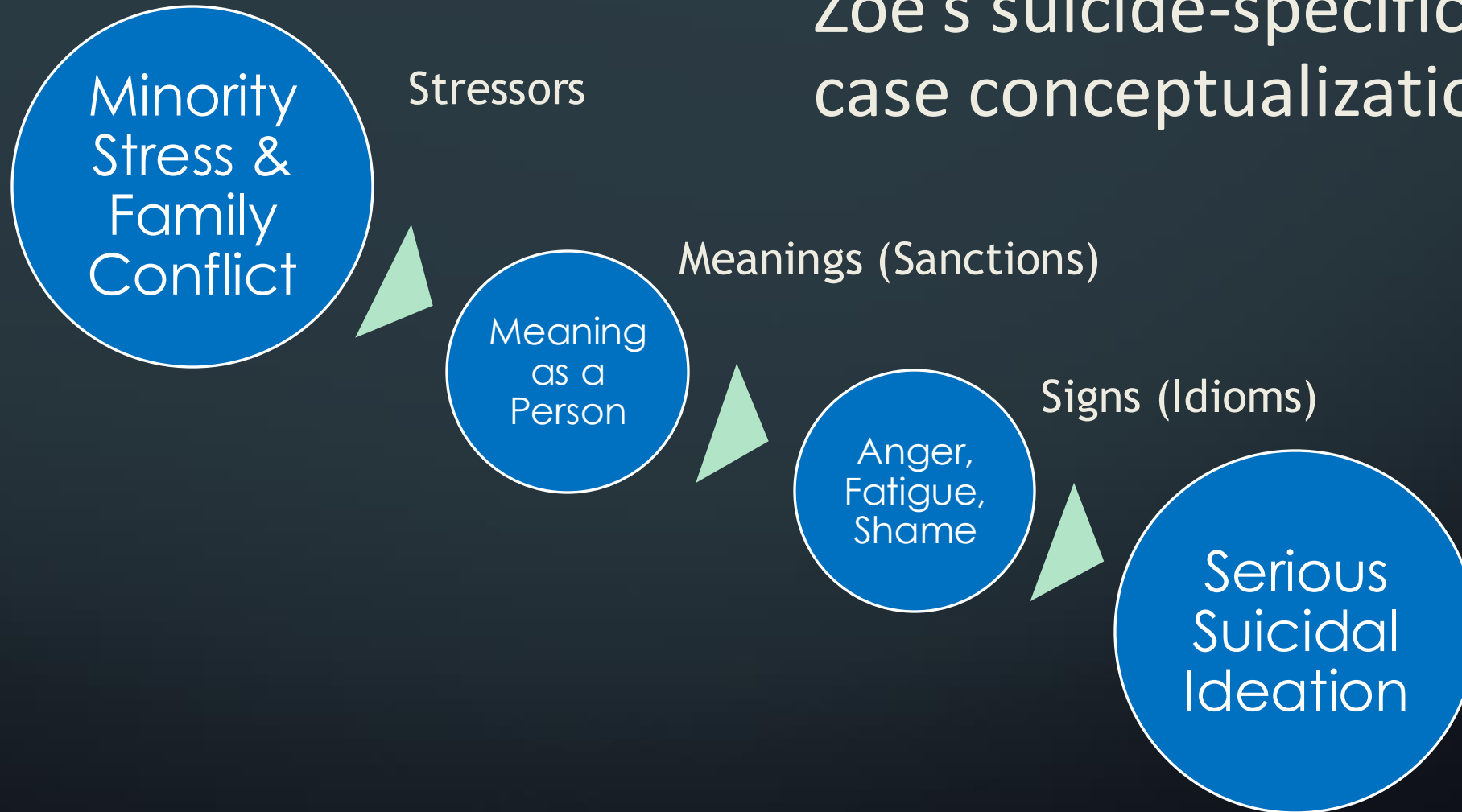
SAFETY PLAN

(Borges et al., 2010; Bryan et al., 2017; Stanley & Brown, 2009; Miller et al., 2017)

<p>Warning Signs (Minority Stress, Idioms of Distress, Social Discord, Cultural Sanctions)</p>	<p>Coping Strategies (Idioms of Distress – Culturally congruent ways of expressing & coping)</p>
<p>Social Contacts & Settings That Provide Distraction (Idioms of Distress, Culturally responsive sources of help)</p>	<p>People I Can Ask For Help (Idioms of Distress, Culturally responsive sources of help)</p>
<p>Professionals I Can Contact During a Crisis (Culturally responsive sources of help)</p>	<p>Making the Environment Safe (including Reducing Access to Lethal Means) (Idioms of Distress-culturally preferred suicide means)</p>
<p>Reasons for Living (Cultural Sanctions-Cultural meaning of life events, etc.)</p>	

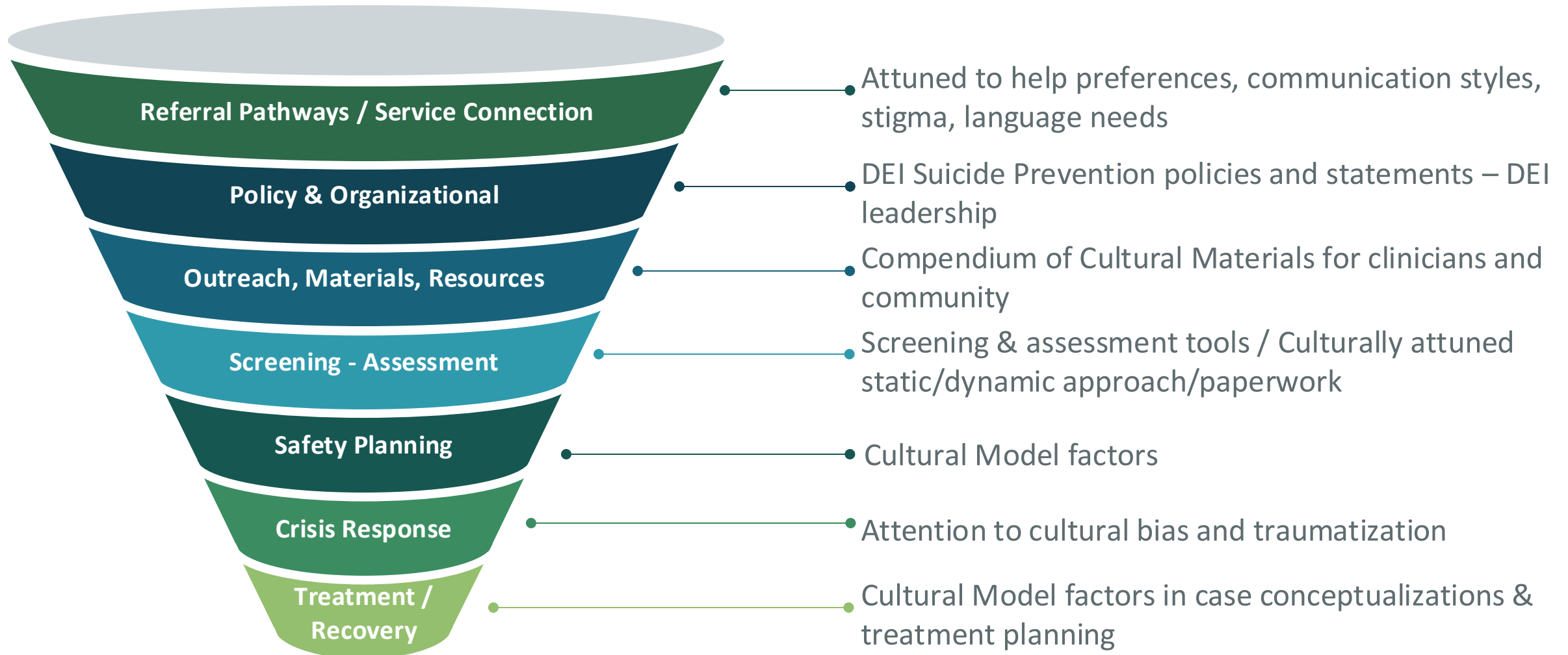
Note: Noted in red are potential categories of culture & diversity factors (e.g., from the Cultural Theory and Model of Suicide or others) that may affect the relevant safety plan components. The lists provided may not be exhaustive or all-inclusive.

Zoe's suicide-specific case conceptualization



Culturally Responsive Downstream Systems

www.CSP.Institute



Culturally-infused strategic plan

T

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Culturally responsive programs & trainings

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Cultural Model or Framework

Review

> Health Promot Pract. 2024 Mar 5:15248399241234064.

doi: 10.1177/15248399241234064. Online ahead of print.

The Culturally Infused Curricular Framework (CICF) for Suicide Prevention Trainings

Lorna Chiu ¹, Gabriel H Corpus ¹, Mego Lien ², Joyce P Chu ¹

Culturally-Infused Suicide Prevention Trainings



Effective suicide prevention training requires:

- ...infusion of culture & diversity across the suicide crisis continuum
- ...involvement of all stakeholders from community members to clinicians

**Culturally
-infused
training**

**Be Sensitive,
Be Brave**
Culturally-Infused Community Trainings

SP201
Advancing Suicide Prevention
& Management for Diverse Clients

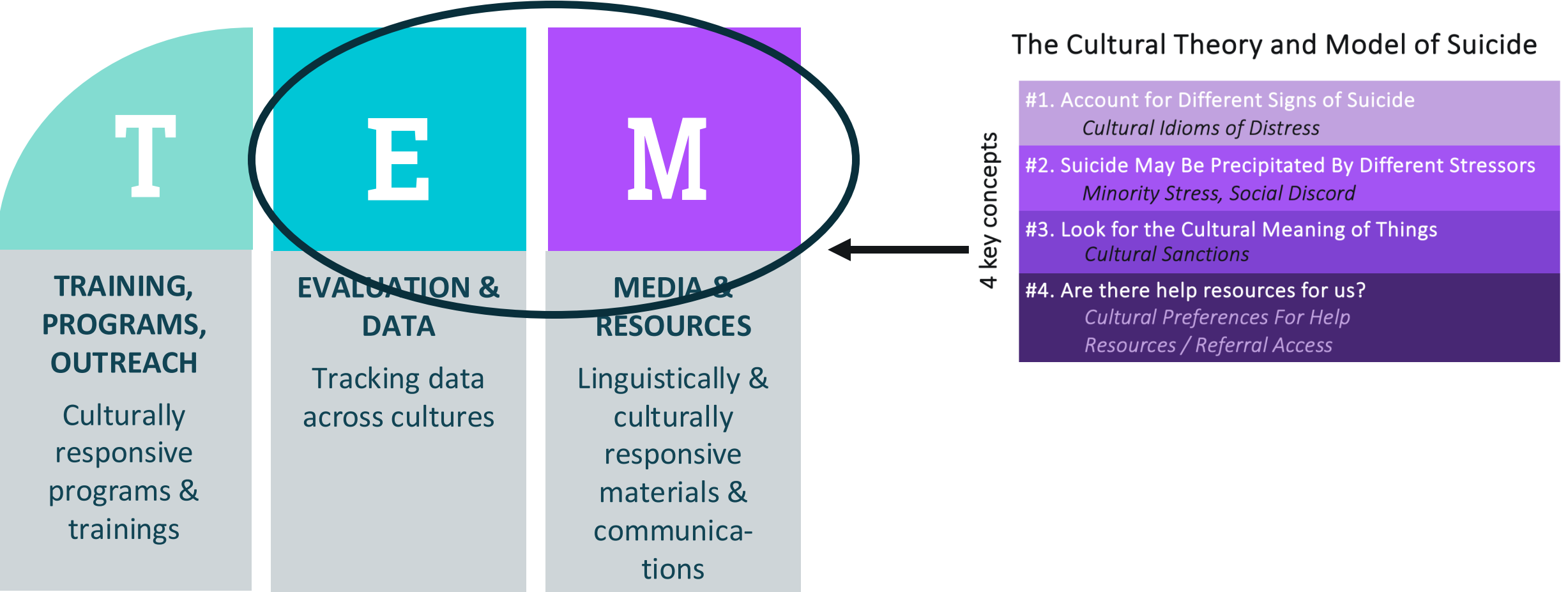
**For
stakeholders
across the
suicide
crisis
continuum**

**Community
members,
Family,
Friends**

**Non-clinical,
staff,
Teachers, Peer
specialists**

**Clinicians,
Counselors,
Health & Behavioral
Health Providers**

Culturally-infused strategic plan



Cultural Community Collaboration / Leadership

Cultural Model or Framework

VIETNAMESE ADVISORY GROUP

- Campaign messaging
- Language, terminology, tone
- Research screening
- Media outlet identification
- Materials creation
- Promotion and distribution



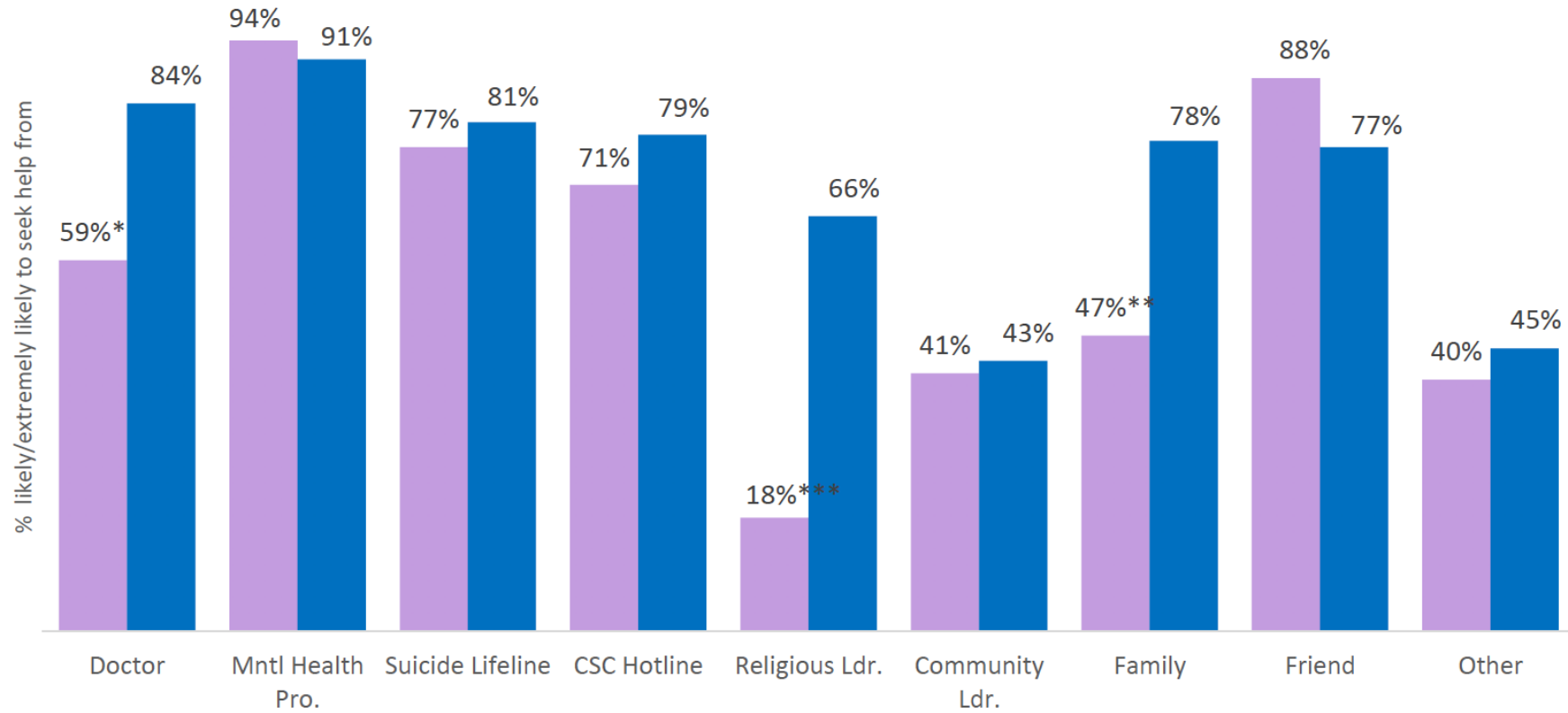


Cultural Findings

USA born Vietnamese compared to Foreign born Vietnamese

Imagine that you or someone you know is feeling suicidal and/or has mental health concerns, and all of the following resources are available. How likely would you be to seek help from ...

Behavior



*p<.05; **p<.01; ***p<.001

VIETNAMESE ADULTS, 55+: WHAT THEY SAID

“Before he [killed himself], I noticed that he was having manifestations, or expressions, of great sadness. He wouldn't talk to anybody. He just sat a chair up in front of his door and sat there.” – Married Male, 77

“From my friends, they've said that if the doctor says it, that's the source they trust the most.”
– Divorced Female, 63

The Cultural Theory and Model of Suicide

4 key concepts

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Cultural Idioms of Distress

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Minority Stress, Social Discord

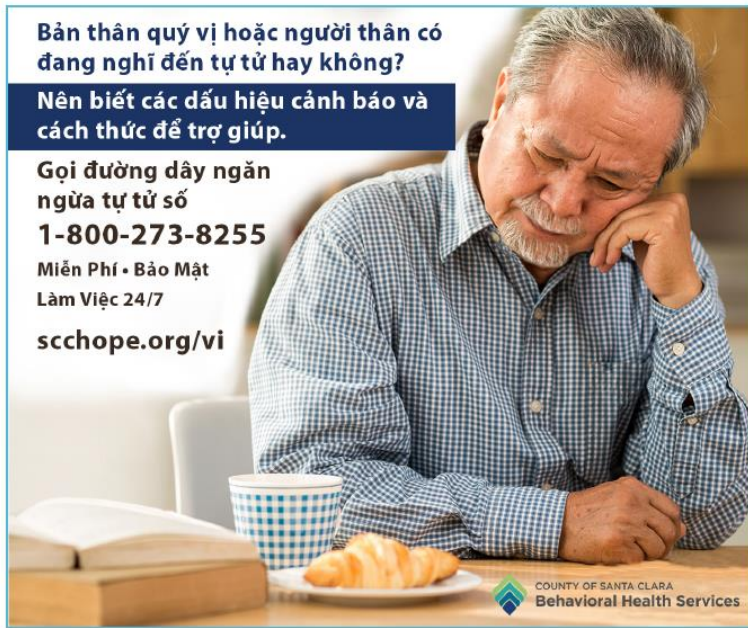
#3. Look for the Cultural Meaning of Things

Cultural Sanctions

#4. Are there help resources for us?

Cultural Preferences For Help

Resources / Referral Access



Bản thân quý vị hoặc người thân có đang nghĩ đến tự tử hay không?
Nên biết các dấu hiệu cảnh báo và cách thức để trợ giúp.

Gọi đường dây ngăn ngừa tự tử số
1-800-273-8255
Miễn Phí • Bảo Mật
Làm Việc 24/7
scchope.org/vi

COUNTY OF SANTA CLARA
Behavioral Health Services

2020: Vietnamese Adults 55+,
September 3 – October 22, 2020

Culturally- Attuned Media Campaigns



¿Se siente ansioso, deprimido o tiene pensamientos suicidas?
El COVID-19 nos afecta a todos.

Obtenga ayuda.

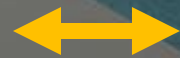
1-800-273-8255
Línea para la Prevención del Suicidio
Gratuita • Confidencial
Las 24 horas
scchope.org/ayuda

COUNTY OF SANTA CLARA
Behavioral Health Services

2021: Spanish-speaking Middle-aged Men (35-54), December 21, 2020 – February 21, 2021



*Cultural Lived
Experiences*



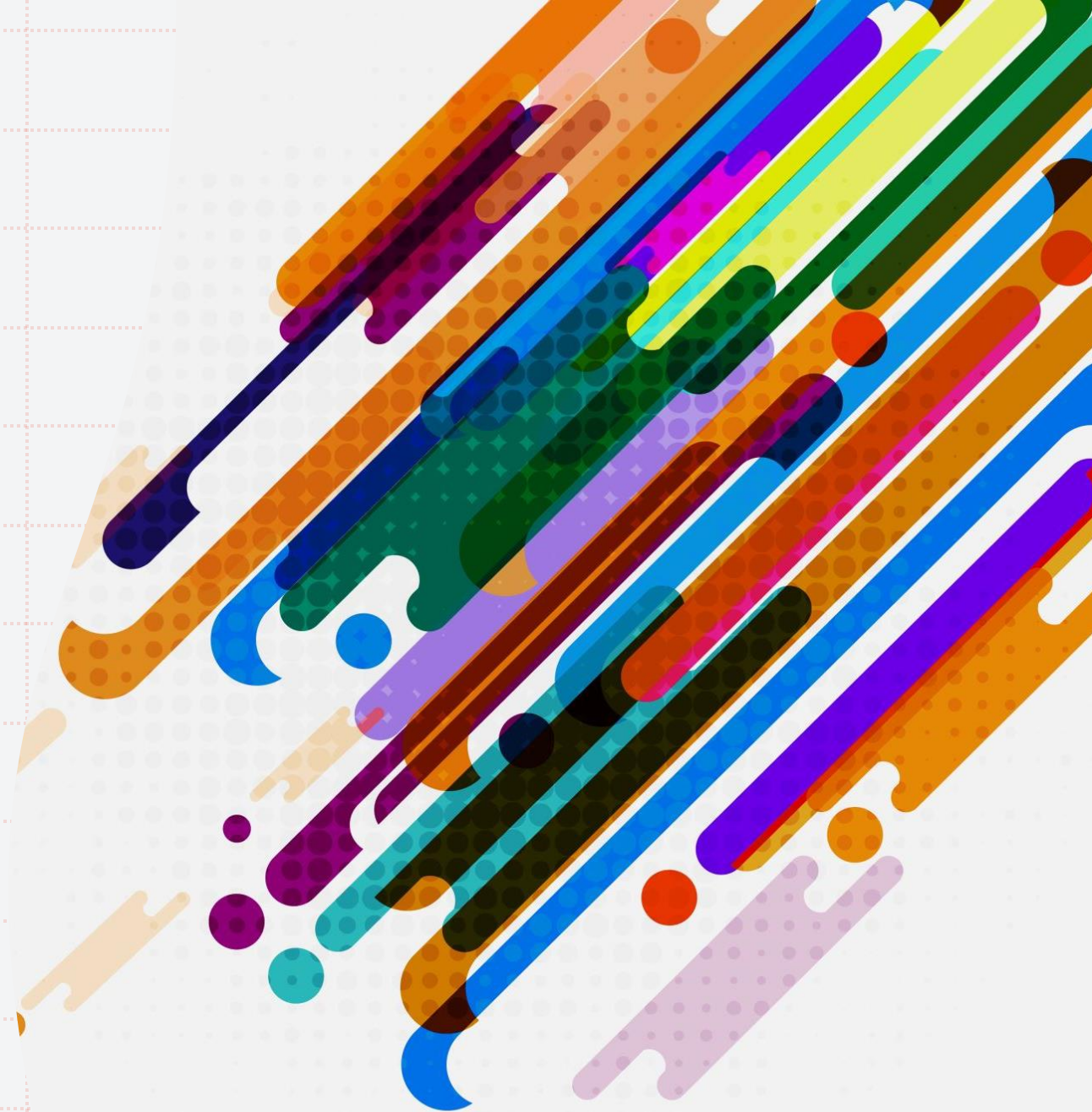
*Research-
Driven
Guidance*

MAKE

SPACE

Call to Action

Changing and Infusing
Culture Into Suicide
Prevention





A Time for Strength: Culturally Infusing Suicide Prevention Efforts to Support Our Diverse Communities

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Director, Community Connections
Psychological Associates (CCPA)
Professor, Palo Alto University

joycepchu@gmail.com