



Striving
for
Zero

Striving for Zero Rural County Cohort Meeting 3, November 2, 2022

Support for people at risk for suicide or those supporting people at risk is available by calling the **National Suicide Prevention Lifeline** 1-800-273-TALK (8255)

Apoyo y ayuda para personas a riesgo de suicidarse o para las personas que los apoyan está disponible llamando al **National Suicide Prevention Lifeline** 1-888-682-9454

Welcome!

Please add your county name to your display name and introduce yourself in the chat.

We will share the slides and recording with you.

Striving for Zero Rural County Cohort

<https://mhsoac.ca.gov/initiatives/suicide-prevention/collaborative/>

Launch: April 7, 2021

Meeting 1: October 8, 2021

Meeting 2: April 11, 2022

Meeting 3: November 2, 2022

The Power of Rural



Strong



Resourceful



Resilient



Relationships

Transition Discussion

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What has been working well?



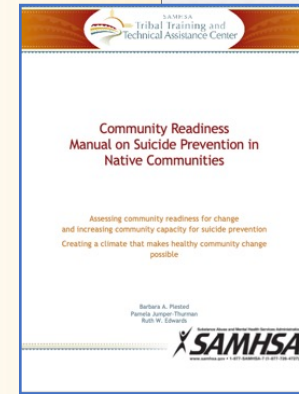
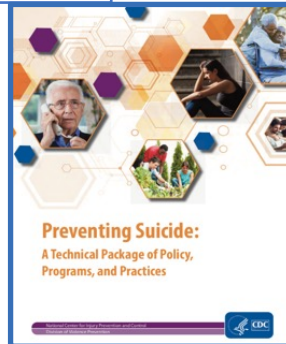
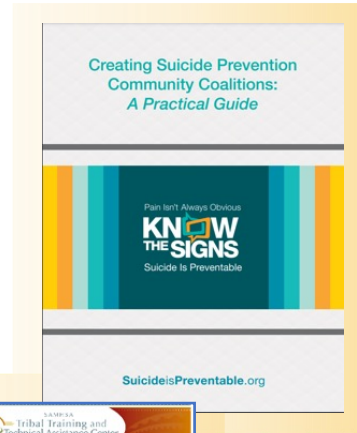
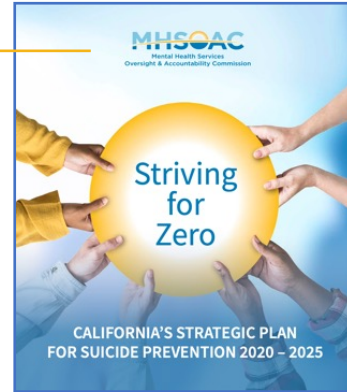
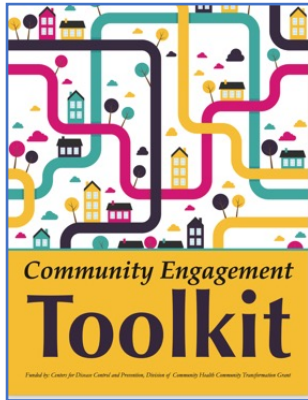
- Presentations from subject matter experts
- Presentations from other rural counties
- Time for discussion and information sharing
- Other?



What's Next?

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Guiding Resources





Rethinking Culture, Diversity and Suicide Prevention in Rural Counties



Christopher M. Weaver, Ph.D.
chrisweaver.phd@gmail.com
Clinical Psychologist, PSY 24133
Professor, Palo Alto University

Joyce P. Chu, Ph.D.

joycepchu@gmail.com

Clinical Psychologist, PSY 23059
Professor, Palo Alto University





Joyce Chu, Ph.D. is a licensed Clinical Psychologist whose expertise lie in the areas of suicidology, diversity and culture, and community mental health. She completed her training at Stanford University, University

of Michigan, and the University of California, San Francisco, and is currently a Professor of Psychology at Palo Alto University (PAU) where she directs/co-directs the Diversity and Community Mental Health (DCMH) emphasis and Multicultural Suicide Research Center. Her work is focused around advancing the assessment and prevention of suicide for ethnic minority and LGBTQ populations, particularly in Asian Americans. She has published numerous works including a cultural theory and model of suicide and a tool that assists in accounting for cultural influences on suicide risk. Her work is community-collaborative and aims to address the need for culturally congruent outreach and service options for underserved communities.



Christopher Weaver, Ph.D. is a licensed Clinical Psychologist whose expertise lie in the areas of forensics, suicide, assessment, substance use, violence, and trauma. Dr. Weaver completed his training at the University of Louisville,

University of California, San Francisco and Stanford University, and is currently a Professor at Palo Alto University where he directs the Forensic Psychology Program. He has published in the areas of psychopathy and violence and suicide risk assessment, and more recently in the areas of substance abuse and psychological trauma. His publications also include co-authored books in law & mental health and psychopathology. Dr. Weaver's current research focuses on the role that trauma and substance use play in criminal offending, the assessment of dissimulation in PTSD assessment. He is also conducting a funded training and research program designed to increase police officer effectiveness in working with people with mental illness.

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

Cultural Model or Framework



Roadmap

1 Define Organizational
Policies, Values,
Resources

1

3 Establish partners with
cultural stakeholders &
partners

3

5 Culturally infused
data monitoring
& evaluation

5

2 Identify a cultural
model/framework

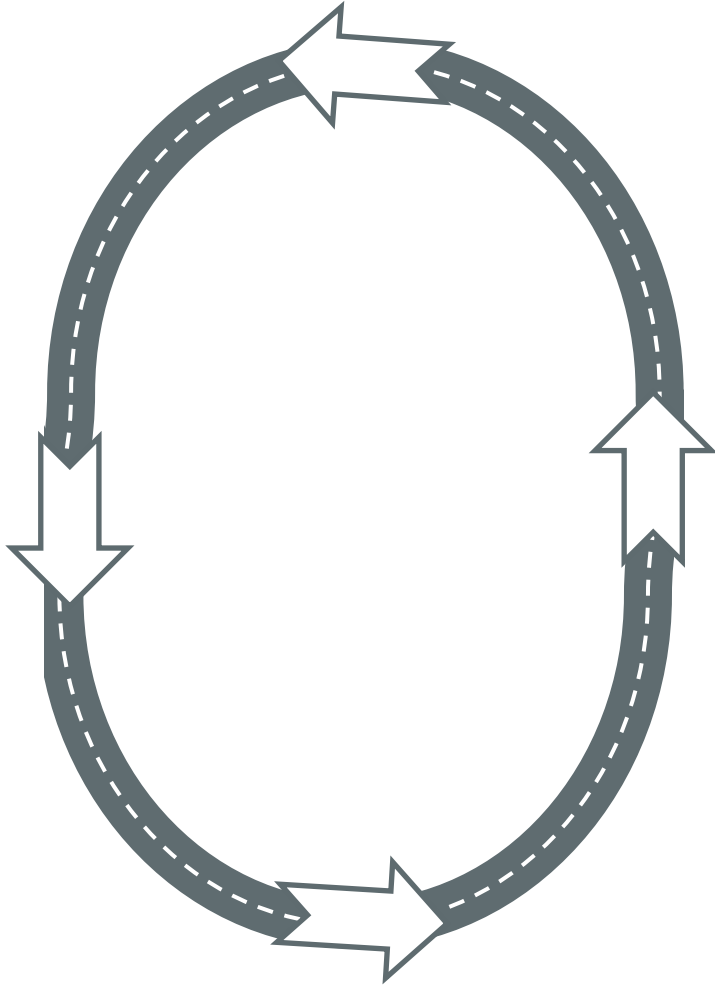
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4 Build culture &
diversity into the
strategic plan

4

6 Systematically
culturally transform
programs, services,
products

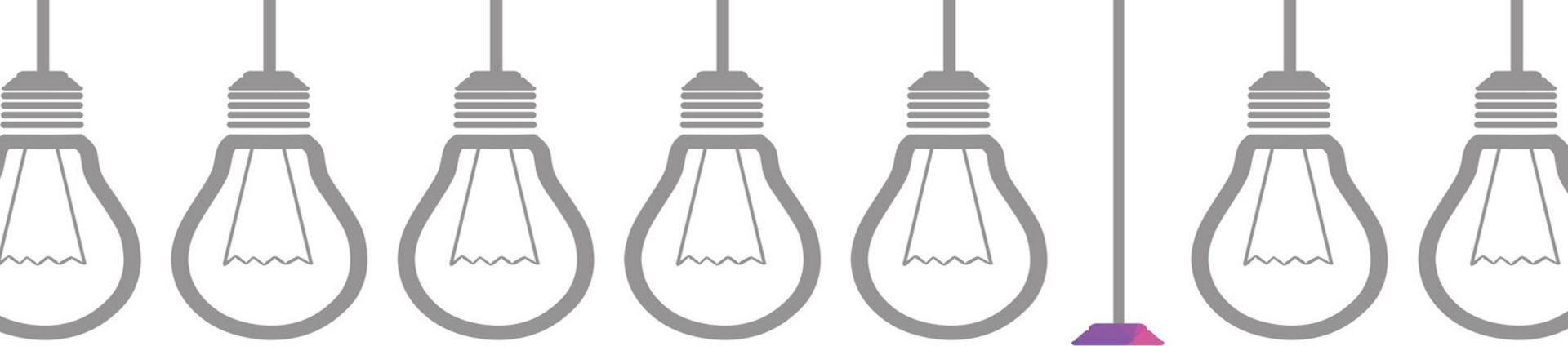
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Questions to Workshop Your Programs

- Do you have organizational values, mission, & structure that supports culture and diversity?
- Is culture and diversity a core part of your strategic plan and logic model?
- Do you have a cultural framework, theory, or model (as a base for group-specific work) to guide how you address diversity?
- Which programmatic efforts are already culturally infused? Where are the gaps?
- Do you have an evaluation plan to inform cultural infusion efforts, and to measure change over time?



Think Differently About Diversity & Suicide in Rural Counties



Goals For Today

Expand our thinking about culture and diversity in our rural suicide work

Assess & understand the unique cultural needs in your rural community

Conceptualize an approach to diversity that is tailored to your county

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Assess & understand the unique cultural needs in your rural community

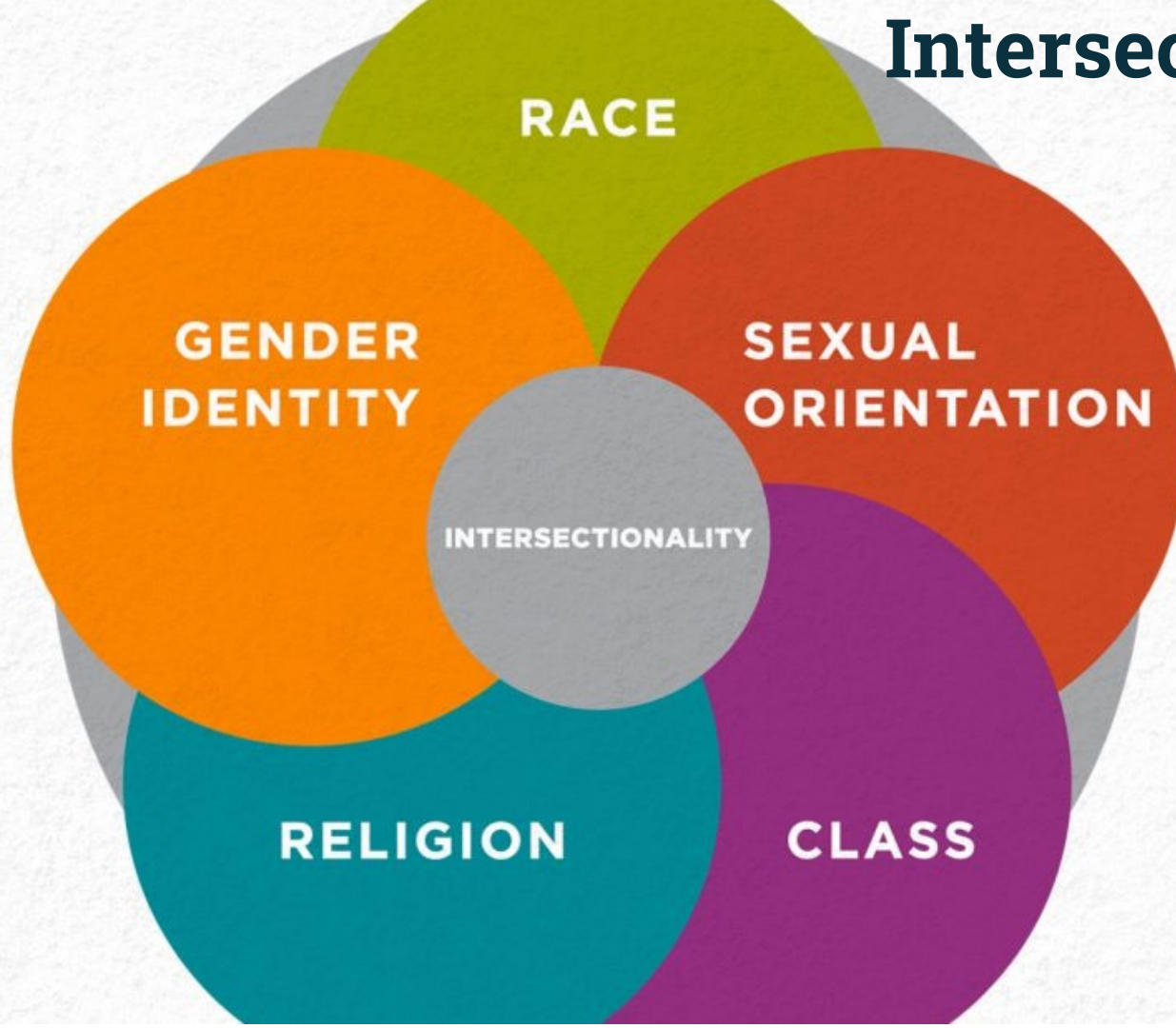
Conceptualize an approach to diversity that is tailored to your county



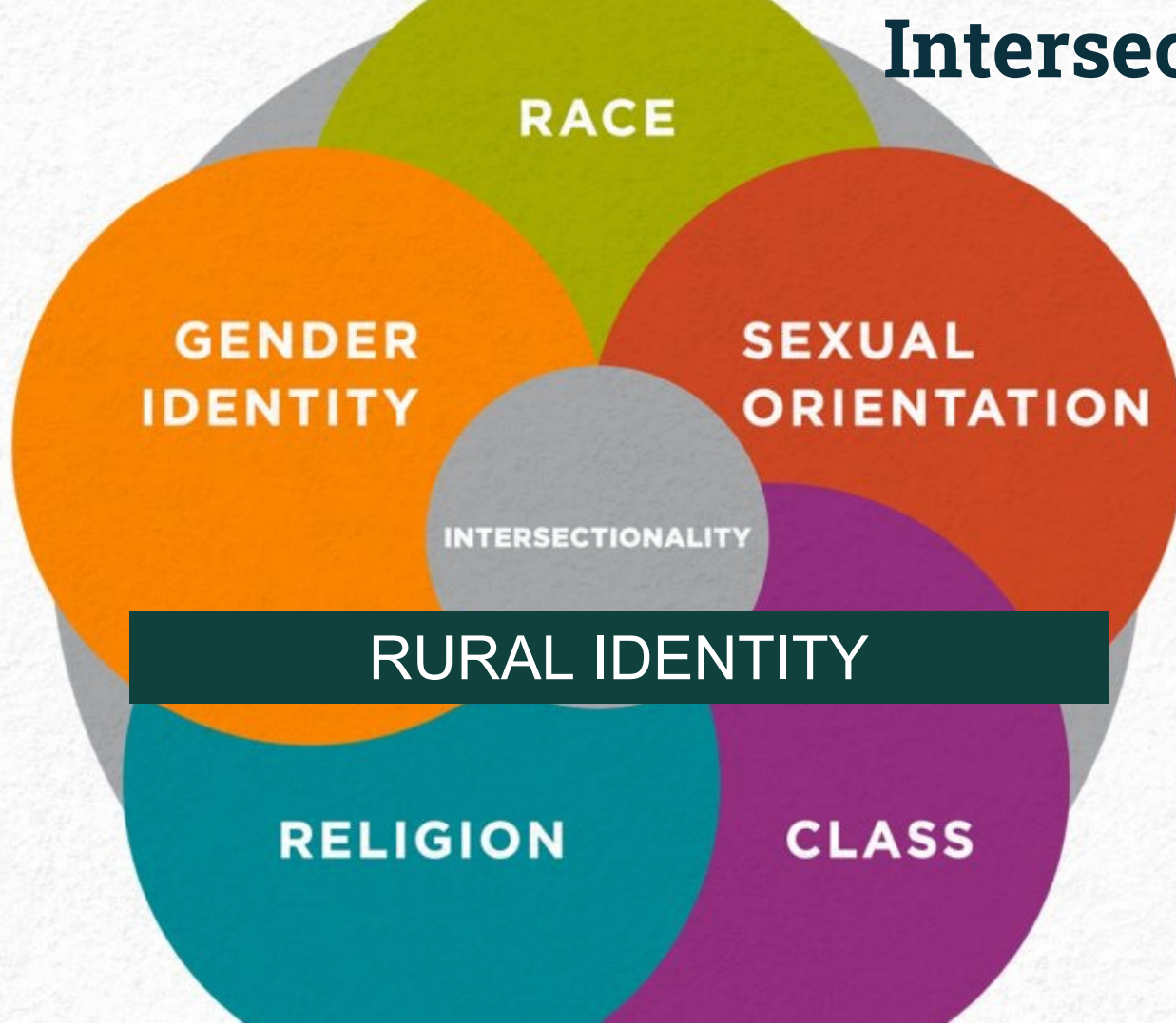
1. Context of the Issue

The need to think differently about diversity and suicide for rural counties

Intersectionality



Intersectionality



RURAL IDENTITY



Agenda / Overview

1. Context of the Issue

The need to think differently about diversity and suicide for rural counties

2. The Need for a Cultural Model or Framework

SUICIDE PREVENTION: A CRITIQUE

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

Little recognition of cultural variation or context

Minority
Stress

Idioms of
Distress

Social
Discord

Cultural
Sanctions

CULTURAL SYNTHESIS, IMPROVING SUICIDE ASSESSMENT

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

The Cultural Theory/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

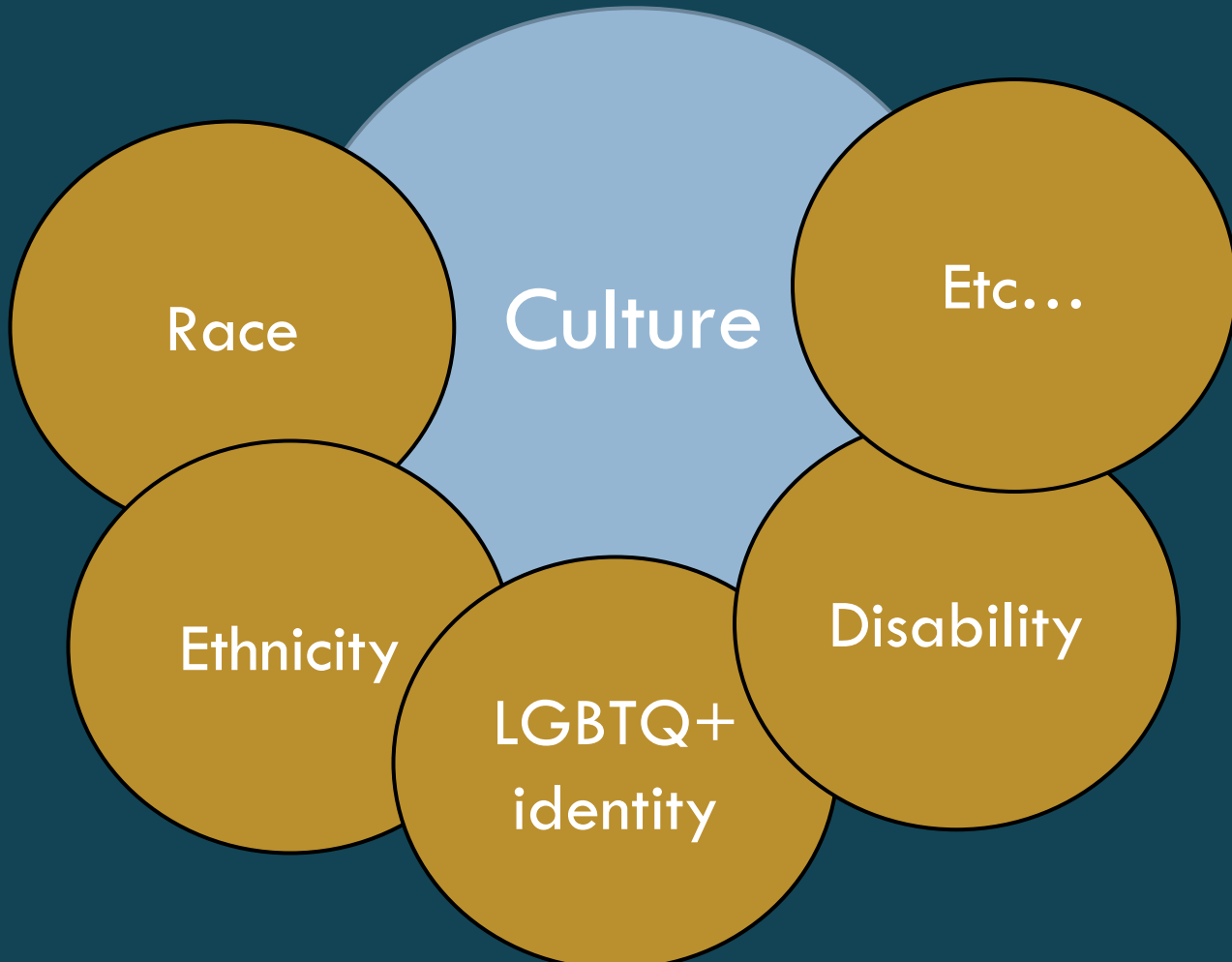
Cultural Sanctions

#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)



Race

Culture

Etc...

Ethnicity

LGBTQ+
identity

Disability

EFFECTS ON OUR SUICIDE PREVENTION EFFORTS?

The Lifeline
is **FREE**,
confidential, and
always available.

HELP
a loved one,
a friend,
or yourself deal
with trauma.

**Community crisis centers
answer Lifeline calls.**



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
www.samhsa.gov

Printed 2007 • Reprinted 2011
CMHS-SVP-0155

NATIONAL
SUICIDE
PREVENTION
LIFELINETM
1-800-273-TALK (8255)

suicidepreventionlifeline.org

**Having
Trouble
Coping?**

Having Trouble Coping?

After a traumatic event, problems may come and go. It's important to know when to ask for help. Please call us if you or someone you know is experiencing any of the following problems, especially if a problem is making it hard to get through the day or is getting worse.

- ❖ Eating or sleeping too much or too little
- ❖ Pulling away from people and things
- ❖ Having low or no energy
- ❖ Feeling numb or like nothing matters
- ❖ Having unexplained aches and pains
- ❖ Feeling helpless or hopeless
- ❖ Smoking, drinking, or using drugs more than you should
- ❖ Feeling unusually confused or forgetful; on edge, angry, or upset; or worried and scared
- ❖ Fighting with family and friends
- ❖ Unable to get rid of troubling thoughts and memories
- ❖ Thinking of hurting or killing yourself or someone else
- ❖ Unable to perform daily tasks like taking care of your kids or getting to work or school

**Call the Lifeline at 1-800-273-TALK (8255)
(en español, 1-888-628-9454)**

With Help Comes Hope

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- ❖ Thinking of hurting or killing yourself or someone else
- ❖ Unable to perform daily tasks like taking care of your kids or getting to work or school
- ✦ Feeling ashamed about something
- ✦ Feeling treated unfairly because of who you are
- ✦ Doing careless things that put you in danger
- ✦ Feeling too tired to get up
- ✦ Feeling isolated from others that understand you
- ✦ Thinking others are

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With Help Comes Hope



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1. Context of the Issue

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2. The Need for a Cultural Model or Framework

3. Identifying cultural factors for rural counties
+
Implications for Suicide Prevention programming

Rural Culture: The Literature

Independence & Self-reliance

- Hesitance to access care

- Keep things within the family

- Isolation from services (chicken or egg?)

Pressure to be hyper-conventional

- Assimilation

- MH stigma

- Traditional gender roles

Rural Culture: The Literature

Lack of anonymity/privacy (everybody knows everybody)

Sociopolitical exclusion

Exacerbated when accessing urban care centers

Low job diversity – primary industry or employer

Older population – outmigration of youth/educated

Rural Culture: The Literature

Access to firearms

Distrust of government and corporate entities

Lower SES compared to urban centers

RURAL CULTURE IN THE MISC MODEL

Minority
Stress

Enhanced Assimilation Demands, SES,
Sociopolitical exclusion

Idioms of
Distress

Independence/self-reliance, Keep
within family, Privacy

Social
Discord

Keep within family, Privacy, Hyper-
conventionality pressure

Cultural
Sanctions

Care hesitance, Isolation from services,
Anonymity from Providers, Low job
diversity, Firearms, Distrust



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4. Workshop brainstorming for our own rural counties

Exercise #1
**Assess the unique
cultural needs &
context of your
rural community**

(25 min)

**Who are your marginalized
communities?**

- What is the racial/ethnic and LGBTQ+ makeup of your County
- Are they isolated?
- Any ultra marginalized?

**What is your level of organizational
support for cultural work?**

- Any cultural political tensions?
- How much is diversity work supported by leadership?
- Is there representation in the leadership and/or department?

**Do any of the rural cultural factors
discussed today apply to your county?**

Exercise #2
**Identify ways to
coordinate
community
engagement within
this process**

(15 min)

Are there any existing cultural group collaborations?

- Is there a cultural network to build from?

Are these cultural groups isolated, or supported?

Exercise #3
Conceptualize an approach to diversity that is tailored to your rural county's unique cultural needs / context

(15 min)

What cultural factors need to be integrated into your programming?

- How do your cultural factors affect your core TEMPOS activities?

What are acceptable ways to messaging to both the “minority” and “majority”?

Culturally-infused strategic plan

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Group Discussion and Q/A

Discuss:

- One thing you learned
- Next steps for you, or your group or agency?
- Remaining questions

Thank you!



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joycepchu@gmail.com

Clinical Psychologist, PSY 23059

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Questions,
Comments,
Consultation

Thank you!

CONTACT INFO FOR LEAD

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