

Suicide Prevention Coalition Clackamas County

Tuesday, February 18, 2019 4:30 to 6:30 pm

Clackamas County Development Services Building 150 Beavercreek Road, Room 115, Oregon City OR 97045

Meeting Highlights in Blue

Item	Steering Committee Leader	Time
<p>Opening</p> <ul style="list-style-type: none"> • Welcome • New Participants • Safety, Guidelines • Agenda Overview • Introductions 	Michael	20 minutes
<p>Education /Discussion</p> <ul style="list-style-type: none"> • Heather Repetto, Native American Rehabilitation Association NW (NARA) Suicide through a cultural lens <p><u>Demographic/statistical info</u></p> <ul style="list-style-type: none"> • 564+ tribes in US • 6.5 Million American Indian and Alaska native in 2016 • Median age 31 • 53,203 American Indian and Alaska native enrolled in Oregon • 144,759 identified by two or more races • Portland ranked 9th largest urban-Indian population nationwide • 40,783 enrolled tribal members 2009 <p>Suicide statistics</p> <ul style="list-style-type: none"> • 31% increase in past 16 years • Highest in females 45-54 • Highest in males 65+ • Native have highest rates for death by suicide • Age 18-25 most thoughts <p><u>What you need to know</u></p> <ul style="list-style-type: none"> • Interdependent and collective structure • Extended families • Matriarchal/patriarchal • Elders extremely important • Multi-generational living <p>Values</p> <ul style="list-style-type: none"> • Relation • Harmony • Balance • Spirituality • Wellness <p>Communication style</p> <ul style="list-style-type: none"> • Circular indirect storytelling • Soft tone • Collaborative 	Galli facilitates	40 minutes

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<ul style="list-style-type: none">• Nonverbal/nondirective• Avoid eye-contact (aggression)• Strong emotions inappropriate• Don't say "that's wrong"• Take turns• Interrupting is rude• Long pauses between speakers• Natives pause for 1.5 to 5 sec• English speakers pause 1 sec• Immediate answers not expected• Comfortable w/ silence <p>Clinical implications</p> <p>Assess for acculturation</p> <ol style="list-style-type: none">1. What is tribal affiliation?2. Were you raised on reservation?3. Who did you live with?4. Speak tribal language?5. Were you raised in a traditional way?6. Practice tribal ceremonies?7. Spiritual preference?8. Identity? Two spirit?9. Did any family attend boarding school? <p>Intervention Techniques</p> <ul style="list-style-type: none">• Self-disclosure as rural provider to build alliance and decrease barriers• Pacing is slower to spend more time on alliance• Narrative story telling• Metaphors and imagery• Descriptive Statements• No direct questions• Restatement and clarification• Ask for forgiveness and permission• Address emotion before moving on• Use talking circles in groups• Unsolicited advice never given• Silence is respected• Use humor (cultural norm) Exaggeration is seen in group settings to increase humbleness and lighten the mood <p>How Suicide is different for Natives</p> <p>Difference in Risk</p> <ul style="list-style-type: none">• Elders who are engaged in community and culture have less risk• Those less than 25 have highest risk• Suicide clusters• Most by hanging• Females 15-24 highest risk for attempt		
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<ul style="list-style-type: none">• Males 15-24 highest risk for completion <p>Culturally specific info</p> <ul style="list-style-type: none">• In some tribes, it is unacceptable to speak of the dead• Yakama• Umatilla confederacy<ul style="list-style-type: none">-Walla Walla-Cayuse-Umatilla• Navajo and Ute<ul style="list-style-type: none">-Traditions around death• Ute tribes have blended Christianity and native practices; spirit is trapped• In others, you may not say the word suicide because it can be seen as a curse• SW tribes<ul style="list-style-type: none">-Pueblo-Zuni• NW and Alaskan tribes speak of passed loved ones as having "walked on?"• Does their tribe have a word for death or suicide? <p><u>How might you assess SI?</u></p> <p><u>Suggested Q's</u></p> <ul style="list-style-type: none">• "I know this might be something you talk about, but would it be ok if..?"• I'm sorry if I say something wrong; I care about you• Have you considered joining your ancestors?• Do you ever wish you would walk on?• Have you ever had any family members walk on?• Would you be willing to share about that?" <p>Risk considerations</p> <ul style="list-style-type: none">• Have they broken their eagle feathers?• Stopped engaging in ceremony or interacting with community• Cut their hair• Does tribe have beliefs against suicide?• Presence of cultural voices between 2 cultures• What is their tribe's beliefs about suicide?<ul style="list-style-type: none">-Burden? Shame? Honorable?-Protest injustice-Demonstration of selflessness <p><u>About Heather:</u></p> <p>Cherokee from South (didn't grow up on reservation) Mother in law's best friend connected Heather w/ NARA NARA invited Heather to do practicum there Heather tried working in traditional systems, didn't feel comfortable there</p>		
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<p>Feels lucky lots of Cherokee traditions translate into DBT</p> <p>Galli: How do we hold space for folks in a different way? Heather: Build rapport during intakes, initial appointments. NARA measures outcomes differently → build rapport, increase social engagement</p>		
<p>Reports</p> <ul style="list-style-type: none"> • Animal Care Workgroup -- Kathy or Elisa <ol style="list-style-type: none"> 1. Relinquishing animals is a risk factor 2. Veterinarians as a profession have a higher risk 3. When people lose their pets, they can be at risk <p>-VCA (large firm of vet clinics) Invited SPCCC to host QPR at "Teaching Tuesday" event -Galli's contact has brokered a compassion fatigue training for Clack Co. Dog Services</p> <ul style="list-style-type: none"> • Partnership with LEDIC – Carlos & Caitlin <p>LEDIC to vote on proposed objectives for collaboration with SPCCC during next meeting in February</p> <ol style="list-style-type: none"> 1. LEDIC could work on downloadable Fact Sheets 2. LEDIC could work on visual information such as suicide prevention posters for the website: https://www.clackamas.us/behavioralhealth/suicideprevention.html 3. LEDIC could work on suicide prevention within our population of people looking for jobs (County Unemployment Offices/Resources) 4. LEDIC could work on hosting an outreach event with a partnership with Clackamas County Suicide Prevention Coalition (or vice versa) 5. LEDIC could work on suicide prevention fundraising, suicide prevention business tool kits, suicide prevention outreach awareness with clothing such a T-Shirt designs 6. LEDIC could work on reports that show changes in services within our most vulnerable communities which lead to a rise in mental health needs and more suicide prevention outreach 7. LEDIC could work on the Blueprint Clackamas Website for LEDIC platform of projects and communications 8. LEDIC members could present additional findings regarding suicide prevention in Clackamas County and present those findings as addition objectives 9. LEDIC could work on a Clackamas County suicide prevention tool kits <ul style="list-style-type: none"> • Legislative/Advocacy/Policy Updates – Galli <p>2020 Legislative session started Monday Feb 3 HB 4132: Relating to student health surveys. Requires OHA to administer and collect data from student health surveys. (Related to OHA Teens Survey)</p>	<p>Carlos</p>	<p>30 minutes</p>

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<p>HB 4005: Relating to firearm safety requirements. Requires owner or possessor of firearm to secure firearm with trigger or cable lock, in locked container or in gun room except in specified circumstances</p> <p>HB 4040: Relating to family treatment courts. Directs Judicial Department to establish Family Treatment Court Program in certain counties to improve outcomes in child welfare cases resulting from parent’s or caregivers alleged substance use disorder.</p> <p>HB 4139: Relating to procedures for hostile educational environments. Prescribes notification requirements for school district upon receipt of report of act of harassment, intimidation, bullying or cyberbullying.</p> <p>HB 4149: Relating to behavioral health. Directs OHA to study implementation of Alcohol and Drug Policy Commission’s biennial strategic plan.</p> <p>SB 1553: Relating to behavioral health care. Requires OHA, under direction of Oregon Health Policy Board and in collaboration with specified stakeholder groups, to identify, assess and prepare report on regulatory and policy barriers to effective and timely behavioral health treatment for individuals with co-occurring disorders.</p> <p>Submit comments, public testimony @ OregonLegislature.gov</p> <p>Michelle mentions movement to create 3 digit number (988) for mental health crisis</p>		
<p>Announcements</p> <ul style="list-style-type: none"> American Assn of Suicidology Conference <p>April 22-25 (23-24 main conference), focused across lifespan</p> <ul style="list-style-type: none"> Oregon Suicide Prevention Conference October <p>March 13-14 , hosted by Lines for Life, focused across lifespan</p> <ul style="list-style-type: none"> Other Announcements <p>NAMI Walk in May</p> <p>May is mental health awareness month!</p> <ul style="list-style-type: none"> -Possibility of wrapping Lake Oswego patrol car in message of hope & recovery -Signs of hope (twice a week for the month of May) <p>Kathy is looking for locations to do QPR training</p> <p>May 10th, 25th – email Kathy at KTurner@clackamas.us</p>	<p>Galli</p>	<p>10 minutes</p>

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<p>MHAAO hiring .8 fte peer wellness specialist for primary care clinic in Clackamas County. Funding is coming from the Zero Suicide SAMHSA grant.</p> <p style="text-align: center;">Scott seeking input for first responder Q+A – Have a question? Email Scott at sthran@ci.oswego.or.us</p>		
<p>Next Meeting</p> <ul style="list-style-type: none"> • March 17, 2020 – Kathy absent for Steering Committee and Coalition Meeting in March and Coalition Meeting in May • Key Ideas to Discuss 	Scott	10 minutes

QPR (Open and Reserved)	Location	Audience	Open for public registration
Wednesday, January 29, 2020	Oregon City, OR	Community	x
Thursday, February 6, 2020	Clayton Mohr Commons Oregon City	Veterans	
Friday, February 7, 2020	Oregon City School District Oregon City	Educators	
Tuesday, February 11, 2020	Crisis Intervention Training, Clackamas	Law Enforcement	
Tuesday, February 25, 2020; 6:30 – 7:30 pm	Canby Library 220 NE 2nd Avenue Canby, OR 97013	Community	x
Friday, February 28, 2020	Renaissance Charter Academy Molalla, OR	Educators	
Monday, March 9, 2020	Alliance Charter Academy Oregon City, OR	Educators	
Tuesday, March 17, 2020	VCA NW Teaching Tuesday	Veterinarians & Animal Care Professionals	TBD

WORKING MEETING GUIDELINES (revised)

1. Show each other respect.
2. Start and end on time.
3. Listen to others and be open to hearing others' perspectives.
4. Share the airtime and self-regulate your participation; please don't interrupt others while they are speaking.
5. Please keep to one conversation and avoid sidebar conversations.
6. Create a safe environment.
7. We value stories of lived experience and we want to communicate about the topic safely.
 - a. We recognize the value of stories of lived experience and welcome them as an essential part of our discourse.

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- b. We also recognize that certain words, statistics and details about suicide attempts or deaths can activate emotions and feelings. To communicate safely, we will strive to be mindful about sharing details of a suicide attempt or death, discussion of statistics, discussion about means or other topics that may have potentially dangerous content.
 - c. Please don't share personal stories that are told in the meeting outside the meeting.
 - d. How we say it matters. We suggest using the phrase "died by suicide" instead of "commit," because "commit" is a word associated with a crime or a sin. We also suggest avoiding the use of the terms "successful" or "unsuccessful" when talking about attempts/suicides; as an alternative we suggest saying "attempts" or "died by suicide," so that we avoid attributing positives or negatives.
8. Please place mobile phones on vibrate during the meeting and take important calls outside the room. Thank you for your cooperation.
 9. The role of the co-chairs and meeting facilitators is to manage the agenda, the discussions and the time we have together; please cooperate with their requests.
 10. Please raise your hand to be recognized by the facilitator if you want to contribute to the full group.
 11. There are often many possible solutions to complex issues; when generating ideas about solutions, please strive to speak about interests not positions.
 12. Identify next steps that foster commitment to the goals.
 13. Resource Table – please share information about other upcoming events, programs, or trainings by providing written materials for the resource table which will be available at all meetings of the Coalition; because of time limitations we request no verbal announcements; thank you for your cooperation.
 14. Decision Making for Coalition Meetings
 - a. Full Coalition -- Decisions by majority vote; vote may be reconsidered to include alternative perspectives raised by coalition members. If the full coalition is unable to come to a satisfactory resolution, the matter will be referred to the steering committee who will work with the coalition to reach a resolution.
 - b. Ad Hoc Work Groups – Decisions by majority vote; vote may be reconsidered to include alternative perspectives raised by work group members. If the ad hoc work group is unable to come to a satisfactory resolution, the matter will be referred to the steering committee who will work with the ad hoc group to reach a resolution.
 15. Conflict Resolution for the Coalition - The Steering Committee is charged with resolving conflicts for the Coalition, including but not limited to, getting additional perspectives, doing additional research and other methods to ensure equity, diversity and inclusion in decision making within the Coalition.