

Alliance Webinar

June 22, 2022

10:00 AM – 11:30 AM

Attendance:

1. Annette Marcus
2. Anna Klein
3. Abby Warren
4. Angela Franklin
5. Ashley Meilahn
6. Caitlan Wentz
7. Caroline Suiter
8. Crystal Larson
9. Elissa Adair
10. Emily Watson
11. Erin Porter
12. Frankie Pfister
13. Gordon Clay
14. Hunter Moen
15. Iden Campbell
16. Jacob Dilla
17. Janeane Krongos
18. Jenn Fraga

19. Jonathan Hankins
20. Kris Bifulco
21. Kristin Fetting
22. Leslie Golden
23. Liz Schwarz
24. Marielena McWhirter
25. Mike James
26. Mila Rodriguez-Adair
27. Nick Clark
28. Shane Lopez
29. Shelaswau Crier
30. Scott Vu
31. Taylor Chambers
32. Yasu Tanaka
33. Zev Braun
34. Phone Number
35. Phone Number

## Agenda

- A. Looking Forward with the Alliance: Coalition Mini-Grants and Policy Priorities
- B. Spotlight on Washington County Suicide Prevention Council
- C. Announcing this years Summit: Human Rights and Social Justice Framework for Suicide Prevention, Intervention and Postvention
- D. 988 in Oregon Update and Discussion
- E. LGBTQ+ Update and Resources



Coalitions Webinar  
Please put name, email in chat box

JUNE 22, 2022

# Coalition Webinar

Topic	Who
Welcome, Agenda Overview	Name, pronouns, and agency in the chat
Looking Forward: Mini-Grants and Policy Priorities	Annette Marcus
Spotlight on Washington County	Zev Braun,
Summit: Human Rights and Social Justice Framework for Suicide Prevention, Intervention and Postvention	Iden Campbell, Tweleve6 Consulting
988 Update and Discussion	Leslie Golden, Lines for Life
LGBTQ+ Update and Resources	Kris Bifulco, LGBTQ+ Mini-Grant Update Annette Marcus, Framing and Resources



# Alliance: Looking Forward

- Policy Agenda Set
  - Lifespan funding
  - Require trainings for medical providers
  - Support 988/MRSS Implementation
  - Create protective environments (Safe storage and Good Samaritan Clause, Equity, LGBTQ.
- 988 comes online July
- Goal-August Coalition Mini-Grants from OHA
- Messaging Campaign – statewide materials available Augusts for September



Legislative Dates						
July	August	Sept	October	November	December	January
	-31 Revenue Forecast	-21-23 Leg Committee Days		-8 <sup>th</sup> General Election	-5 <sup>th</sup> - Legislative Counsel returns draft measures	Capitol Day Prep (will be in February)
		-23 Deadline to request LC		-16 <sup>th</sup> – Revenue Forecast	-7 <sup>th</sup> – 9 <sup>th</sup> – Leg Committee Days	-17 <sup>th</sup> – Legislative Session Starts
					-21 <sup>st</sup> Deadline to file bills	







# Coalition Spotlight: Washington County

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# Human Rights and Social Justice Framework for Suicide Prevention, Intervention, Postvention

## Focus: System Engaged Youth and Children

At this summit, we'll be unpacking suicidality, suicide "prevention," "intervention", and "postvention" critically thinking about suicide from a non-pathological, anti-carceral, Disability Justice framework. We will collectively learn how we can build lifegiving conditions in a society that is rooted in violent and life destroying systems.

How do we keep our loved ones rooted in community when they no longer feel they want to be on this planet? How do we support our community members navigating suicidality, while holding space for all the ways it makes sense to want to die? How do we practice care that centers autonomy, even in the most difficult circumstances? How do we support one another after a death in our families, community, and schools?

### Time and Date:

- July 21, 2022 10:00 a.m. – 4:00 pm, Portland (also available on Zoom) Presented by Twelve6 Strategies Inc
- Co-Sponsor: Oregon Alliance to Prevent Suicide
- Contact: [iden@twelve6.org](mailto:iden@twelve6.org) or [amarcus@aocmhp.org](mailto:amarcus@aocmhp.org)

Interactive breakout sessions. At the breakout tables you will have the opportunity to discuss community solutions to self-harm and suicidality where community members will have the opportunity to engage with clinicians, researchers, and community organizers, ask questions, and connect with other community members invested in doing this work differently. Recording, transcript, and audio file will be sent to everyone who registers.

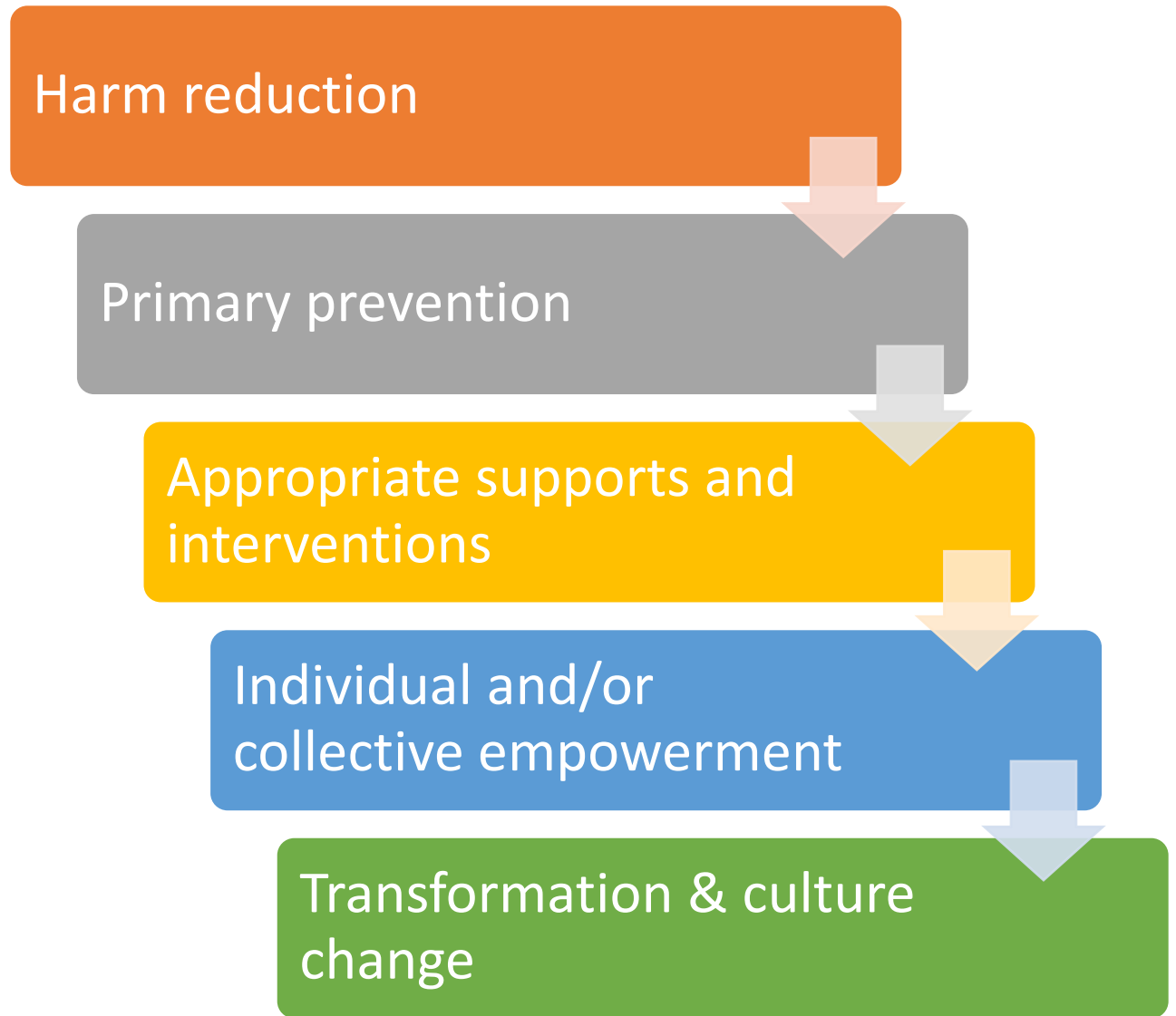


Update 988

Lines for Life



Approaches  
Addressing  
Suicide from  
Harm Reduction  
to Liberation for  
LGBTQ+ People



## What We Don't Know

- Prevalence among adults and older adults
- True numbers of deaths by suicide
- Specific information by identity/ies, true comparative studies
  - LGB vs TNB
  - Intersex
  - Asexual

## What We Do Know

- A majority LGBTQ+ people do not become suicidal.
- Increasing protective factors is more effective than decreasing risk factors
- People can and do recover from suicidality
- Effective treatments and approaches exist outside of inpatient/hospital settings



- **Connectedness to individuals, family, community and institutions**
- **Effective behavioral health care**
- **Life skills (adaptability, problem solving)**
- **Sense of purpose and meaning in life**
- **Cultural, religious, personal beliefs that discourage suicide**



# Trevor Project National Survey on LGBTQ Youth Mental Health 2022

[https://www.thetrevorproject.org/survey-2022/assets/static/trevor01\\_2022survey\\_final.pdf](https://www.thetrevorproject.org/survey-2022/assets/static/trevor01_2022survey_final.pdf)

- 45% of LGBTQ youth seriously considered attempting suicide in the past year. Nearly 1 in 5 transgender and nonbinary youth attempted suicide and LGBTQ youth of color reported higher rates than their white peers.
- LGBTQ youth who found their school to be LGBTQ-affirming reported lower rates of attempting suicide.
- 60% of LGBTQ youth who wanted mental health care in the past year were not able to get it.
- Fewer than 1 in 3 transgender and nonbinary youth found their home to be gender-affirming
- LGBTQ youth who live in a community that is accepting of LGBTQ people reported significantly lower rates of attempting suicide than those who do not.
- LGBTQ youth who felt high social support from their family reported attempting suicide at less than half the rate of those who felt low or moderate social support.

# Why it Matters: Because LGBTQ2SIA+ students are in our Oregon classrooms, statewide

**About a third of Oregon youth are gay, lesbian, bisexual, unsure, or something else**

34.4% of 8th Graders; 28.7% of 11th Graders

**About 8% of Oregon youth are transgender or gender-expansive**

8% of 6th, 8th, and 11th Graders

Source: [2020 Oregon Student Health Survey](#), Oregon Health Authority

# Why it Matters: Because there are 'Hostile Educational Conditions' for LGBTQ+ Youth in Oregon

**61% of LGBTQ+ students reporting being bullied**

**47% of transgender students report seriously considering suicide**

Source: [2019 Oregon Healthy Teens Survey](#)

**LGBTQ+ students are 3x as likely to miss school due to fear**

**LGBTQ+ students are 2-3x as likely to experience sexual assault**

Source: OSSCC [2020 Oregon Safe Schools Report](#)

# Highlights from Alliance Request to OHA re LGBTQ+ Public Statement

- We are writing to ask that OHA make a clear public statement regarding the agency's commitment to supporting and affirming LGBTQ+ youth and families given the plethora of anti-LGBTQ+ legislation sweeping the country.
- We are alarmed by the national wave of anti-trans and anti-LGBTQ+ legislation. Research shows us that discrimination and negative messaging about the LGBTQ+ community puts youth and young adults at higher risk of suicide, among other negative health outcomes. As of April 8, 325 anti-LGBTQ+ bills have been introduced, with 130 of those bills specifically targeting transgender youth (map attached). In Oregon, we are aware of similar discriminatory policies being discussed or passed by school boards as well as community-wide organizing to attack trans and LGBTQ+ youth and their families.

We can make a difference and save lives by implementing policies that support:

1. Family acceptance of LGBTQ2SIA+ youth.
2. Access to gender affirming care.
3. Positive content about LGBTQ+ people and issues in classroom curricula to help increase feelings of safety in school and reduce suicide risk for LGBTQ+ students

# Learn About Adi's Act in Your Community

These Plans are to include procedural planning, equity and racial equity-centered supports, and a staff training process that explicitly addresses when and how students and families are referred to appropriate mental health and crisis services.

Adi's Act operates in conjunction with the Student Success Act to ensure that LGBTQ2SIA+ (lesbian, gay, bisexual, transgender/non-binary, queer/questioning, two-spirit, intersex, asexual, and the myriad other ways to describe gender identities) youth, foster youth, youth with disabilities, BIPOC (Black, Indigenous, and People of Color) and tribal communities/members/students and historically and currently underserved youth receive equitable access to services and support.

ODE, the Oregon Health Authority (OHA), and Lines for Life have partnered to provide school districts materials supporting the development and continuous improvement of Senate Bill 52 Plans.

How can your coalition support your local schools?

# Whole School LGBTQ2SIA+ Inclusive Practices

- **Normalize pronoun sharing**
  - Use neutral pronouns with people/students you don't know, add to zoom box, email signature
- **Use of affirming name and pronouns (student led)**
- **Access to affirming bathrooms, sports teams, school play roles, student clubs**
- **Use gender/sexuality expansive (foster care inclusive) "families and caregivers" rather than "moms and dads" or "parents" only**
- **Create spaces for gender celebration and education like GSAs or QSAs**
- **Uplift and integrate LGBTQ+ inclusive texts and classroom resources**
- **Avoid gender-based terms "boys and girls" and opt for "students" "folks" "everyone" "learners"**
  - Other inclusive language [to use with children](#)
- **Expand school info systems/data collection**
- **Connect students with relevant resources (mental health, social, healthcare, etc.)**
- **Examine dress code policies**
- **Interrupt LGBTQ2SIA+ bullying & discrimination every time. Educate about harm and model apologizing/repairing**
- **Examine and expand hetero/cisgender-centric events/practices (like daddy-daughter dances or prom king/queen)**



**Building healthy futures** for LGBT children and youth through:



## RESEARCH

on family acceptance and rejection

## EDUCATION AND TRAINING

to decrease risk and promote well-being by increasing family acceptance

## FAMILY-ORIENTED SERVICES

to help diverse families support their LGBT children

## INFORMED PUBLIC POLICY

to promote well-being – not just protect from harm



## Family Acceptance Project® Posters

To Build Healthy Futures for LGBTQ & Gender Diverse Children & Youth

FAMILY ACCEPTANCE PROJECT® POSTERS TO BUILD HEALTHY  
FUTURES FOR LGBTQ & GENDER DIVERSE CHILDREN  
& YOUTH <https://familyproject.sfsu.edu/>



# Believe That Your Child Will Be A Happy LGBTQ Adult



## Oregon Resources for Families

### **Family Reactions to Their LGBTQ Children Have a Powerful Impact on Their Children's Health Risks & Well-Being**

When the [Family Acceptance Project](https://www.familyacceptanceproject.org/) (FAP) launched the first research on LGBTQ youth and families 20 years ago, they found that families have a compelling impact on their LGBTQ children's health and well-being.

FAP's research found that families were motivated by trying to help their LGBTQ children have a good life, be respected by others and keep their families together but parents and caregivers didn't realize the impact their reactions had on their LGBTQ children's self-worth, hopefulness, risk, behaviors and self-care. At that time, researchers had not studied the experiences of LGBTQ youth and families and did not know how family reactions affected their LGBTQ children.



**FAMILY BEHAVIOR THAT INCREASES HEALTH RISKS:**

## Don't Talk About Your Child's LGBTQ Identity



Artwork by Sam Kirk / @iamsamkirk

[www.lgbtqfamilyacceptance.org](http://www.lgbtqfamilyacceptance.org) | **FAMILY ACCEPTANCE PROJECT®**

**FAMILY BEHAVIOR THAT INCREASES HEALTH RISKS:**

## Don't Let Your Child Participate In LGBTQ Events



[www.lgbtqfamilyacceptance.org](http://www.lgbtqfamilyacceptance.org) | **FAMILY ACCEPTANCE PROJECT®**

# Oregon Affirms



## LGBTQ+ FAMILY NIGHT

ARE YOU A FAMILY MEMBER OF A MIDDLE SCHOOL LGBTQ+ STUDENT?

COME TO OUR FAMILY NIGHT AT HIGH DESERT MIDDLE SCHOOL!  
OPEN TO **ALL** MIDDLE SCHOOL STUDENTS AND FAMILIES FROM  
ANY 6TH, 7TH AND 8TH GRADE SCHOOL IN CENTRAL OREGON!

LEARN ABOUT HOW OUR SCHOOL  
SUPPORTS LGBTQ+ YOUTH.

ASK QUESTIONS TO A PANEL OF  
PARENTS, FORMER STUDENTS,  
AND OTHERS AND HEAR THEIR  
STORIES.

CONNECT WITH COMMUNITY  
RESOURCES.



**JUNE 5TH @ 6PM** IN THE  
HDMS  
MEDIA CENTER  
**PRESENTED BY HDMS GENDER SEXUALITY ALLIANCE**  
FOR MORE INFORMATION CONTACT MARK.KOOPMAN@BEND.K12.OR.US

# Self-Care Plans –How Do We Also Create Community-Care

Think of these as maintenance plans.

- What needs to get done and how do I do it? Who can support me?
- Am I able to ask for help? How?
- What helps me to feel my best? Use all five senses to brainstorm
- Who do I feel best around? How can we spend time together? How can I assert my boundaries?
- Where are some places that help me relieve stress?

June 22<sup>nd</sup>, 2022

# Washington County Public Health Mental Health Awareness Campaign



*Healthy People, Thriving Communities*



WASHINGTON COUNTY  
Public Health



# Washington County Suicide Prevention Council

- Identified public outreach and events as being a priority for current fiscal year
- Steering Committee convened in late March to discuss and plan out outreach events and media campaign
  - Incorporated ideas from Coalition Network
  - Had tight timeline to get things ready for May

# Sign Rallies

- Modeled after “signs of hope” campaigns, but with custom images that included:
  - QR codes
  - hashtag for social media posting
  - somewhat different text (more Spanish)



## Sign Rallies

**You  
Matter**

**You Are  
Enough**

**You've  
Got This**



Helpful  
Info &  
Resources

#OregonHopeRally

**Don't  
Give Up**



Helpful  
Info &  
Resources

#OregonHopeRally

Free Suicide  
Prevention  
Trainings



#OregonHopeRally

**One Day  
At A Time**



Helpful  
Info &  
Resources

#OregonHopeRally

Free Suicide  
Prevention  
Trainings



#OregonHopeRally

Free Suicide  
Prevention  
Trainings



# Sign Rallies

**Tú eres  
importante**



Info y  
recursos  
útiles

**Tú eres  
suficiente**

**Tú  
puedes**

**#EsperanzaOregon**

**No te  
rindas**



Info y  
recursos  
útiles

**#EsperanzaOregon**

**Un día  
a la vez**



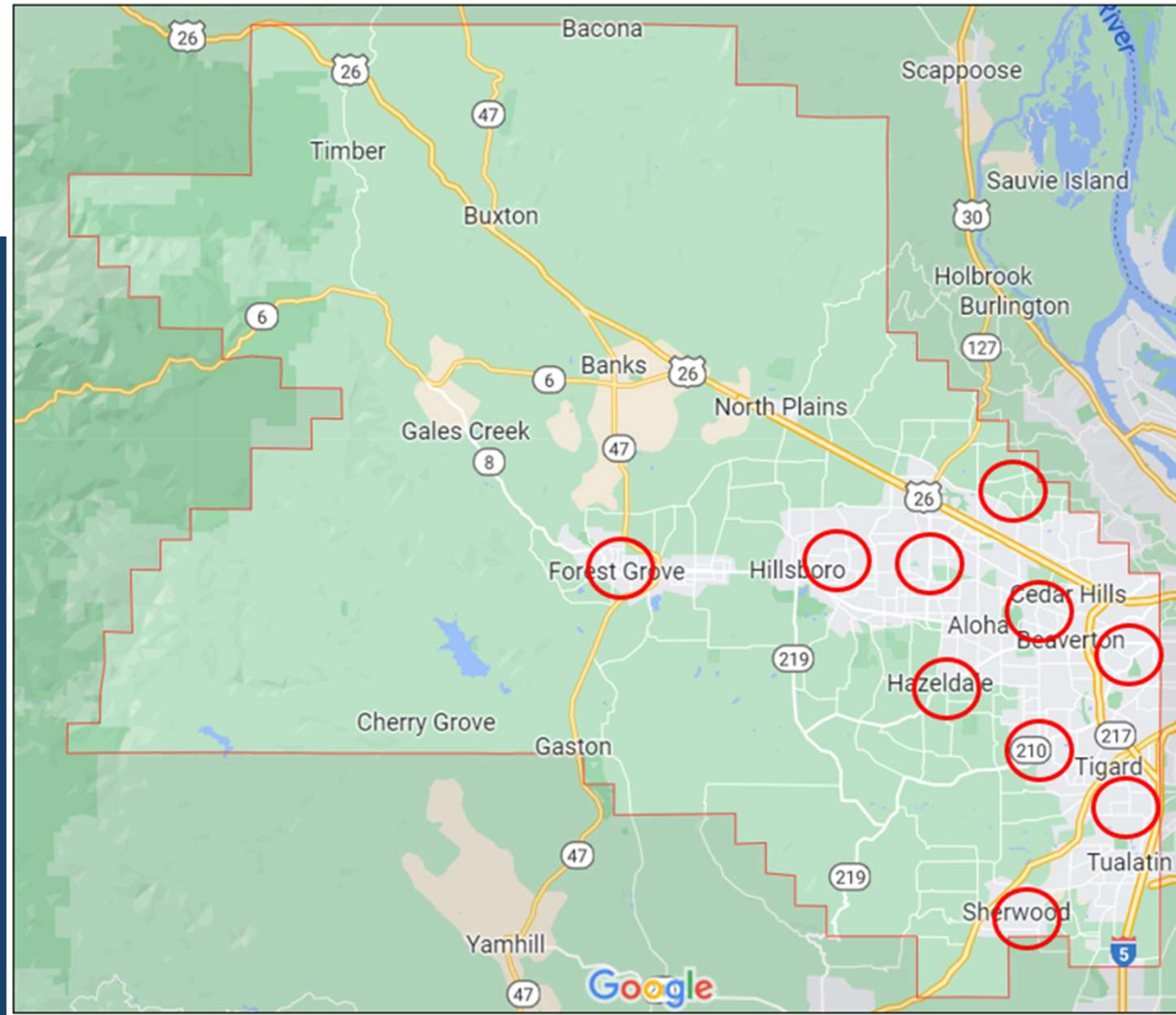
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**#EsperanzaOregon**



# Sign Rallies

Used real time data from Washington County epidemiology program to determine locations in county with higher rates of suicide



# Sign Rallies

- Developed coordination model where we would only be responsible for recruiting “hosts”, who would then coordinate their own rally with volunteers/coworkers
- We provided them with signs, water, and snacks in advance of their rally day(s)
- They kept the signs once they finished, for permanent placement in their community
- Developed flyer to begin recruiting hosts



**Washington County  
Suicide Prevention Council**

## #OregonHopeRally



In support of Mental Health Awareness Month, the Washington County Suicide Prevention Council is sponsoring sign rallies this May to bring community members together and **inspire hope around mental health**.

Sign up today to host a  
**Sign Rally** in your community!

Email Donna-Marie: [donnamarie.ofsc@gmail.com](mailto:donnamarie.ofsc@gmail.com)

**Focus Areas include:** Forest Grove, East Hillsboro, Orenco Station, Sherwood, Hazeldale, Raleigh Hills, South Tigard, South Beaverton, West Beaverton, Bethany.

- Each host will determine a specific day and time of day for their sign rally.
- We encourage rallies between 7-9 a.m. or 4-6 p.m., lasting one to two hours.
- One rally works, two would be AMAZING!
- Each host will receive 12+ signs (English and Spanish), plus water and snacks.
- Keep the signs to continue spreading hope by placing them for others to see.

# Sign Rallies

30+ rallies occurred with over 150 volunteers!!

Got lots of heartwarming responses from volunteers:

“Participants were moved as children waved at us from their car seats, truckers blew their horns, and police and fire trucks gave us a blast from their sirens.”

Cost effective outreach strategy: ~\$3,350 total

- Will continue to have effect with placement of 300 signs in county
  - Jail, sheriff's office stations, HHS, nonprofit organizations, residences, etc.









# Mental Health Awareness Videos

- Faced difficult timeline between the 3/24 meeting and May 1<sup>st</sup> to get videos together
- TV studio involvement in offering space, filming, and lots of editing was all free—very important to success of project
- Set the ambitious goal of recording 20 different community members in a TV studio
  - Ended up getting **34 participants!**
  - Gave each participant a \$50 gift card as a thank-you
- Presented each participant with three prompts to respond to...

# Mental Health Awareness Videos

Prompt #1:

*How would you check in with a friend who may be struggling with their mental health?*



# Mental Health Awareness Videos

Prompt #2:

*What would you say to a friend who may be thinking about suicide?*



# Mental Health Awareness Videos

Prompt #3:

*If you could say something about mental health or suicide to your community or the world at large, what would you say?*

# Mental Health Awareness Videos

- Participants varied widely:
  - 4 languages spoken (English, Spanish, Russian, Kirundi)
  - Age range of 12 – 70s
  - Many different occupations/lifestyles
- Only used Prompt 1 footage for these videos → still have Prompt 2 and 3 footage for Suicide Awareness Month or other occasions in future



# Advertising Campaign

- Three-pronged approach:
  - paid video ads (15 versions) on TV streaming services
  - paid static display ads (7 versions) on various websites
  - boosted Facebook posts from HHS accounts and Elemento Latino
  - 3:1 ratio of English to Spanish audience spending
- Hired consultant for video and display ads for \$10k



# Advertising Campaign – Video Ads

## Streaming TV platforms

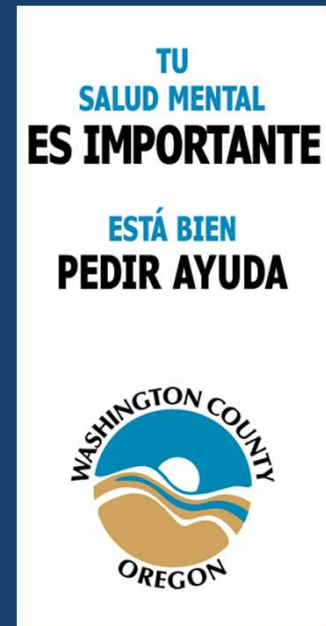
- 86,000 impressions with 97% view rate  
→ \$0.07 per view
- Top platforms: Samsung TV, Pluto TV, Roku, KPTV (local), Atmosphere TV, Xumo, Tubi TV, Vizio

## Youtube

- 89,000 impressions with 4,400 views (5% view rate)  
→ \$0.92 per view
- 246 clicks to website → click through rate (CTR): 0.28%

# Advertising Campaign – Display Ads

- 1.1 million impressions
- 1,607 clicks to website – CTR 0.15%
- Some formats performed up to 9 times better than others



# Advertising Campaign – Social Media

## Facebook pages:

- HHS (English and Spanish)
- Elemento Latino
- WCSO Facebook
- City of Sherwood
- Raices de Bienestar
- Personal accounts

## **#OregonHopeRally**

- 13 posts
- Hundreds of reactions, dozens of comments and shares

## **#EsperanzaOregon**

- 4 posts, few reactions and shares

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Thank you!

Questions?





## **988 Overview and Preparations**

### **What will 988 look like on July 16<sup>th</sup>?**

**Contact (Call, Text/Chat)**

**Respond (deescalate, provide resources, offer follow up)**

**Go to (mobile dispatch as it currently exists)**

### **What is the short term focus?**

- **For July 16: Staffing up, training on text/chat, operationalizing growth!**
- **Participating in national systems development**
- **Supporting PSAP/911, OHA, NW Human Services discussions on future of dispatch**

### **Long term?**

- **Integrated systems for fastest possible response**
- **Medicaid Billing for sustainability**
- **Cell carrier fee for sustainability**



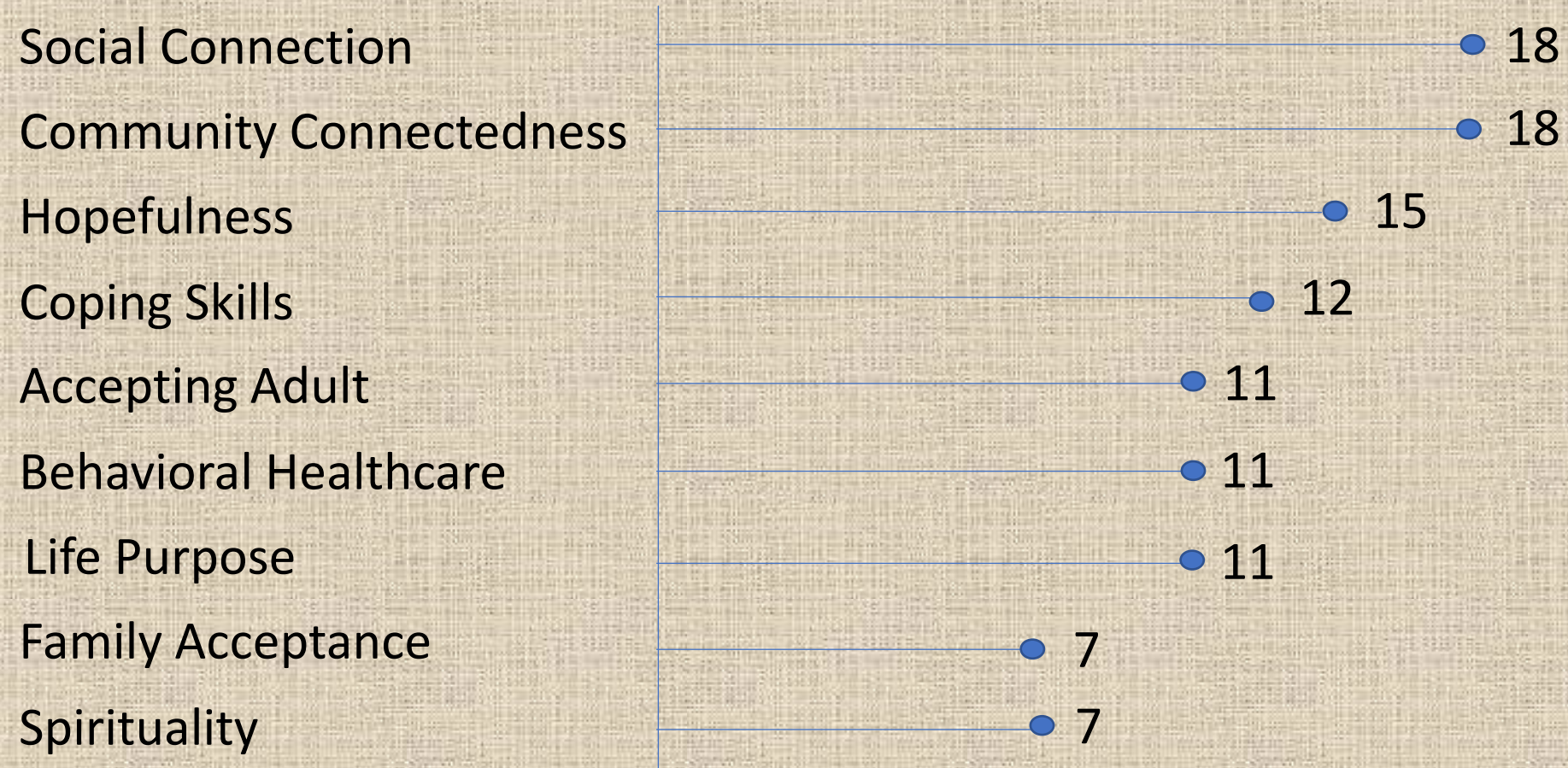
# LGBTQ+ Mini-Grants Summary

Kris Bifulco (she/they)  
[kbifulco@aocmhp.org](mailto:kbifulco@aocmhp.org)

*Those living at the intersections of race, sexuality, and gender often find themselves confronted with the very real struggle that suicide feels like the only available option.*

-LGBTQ+ Mini-grant Recipient

# *Protective Factors*

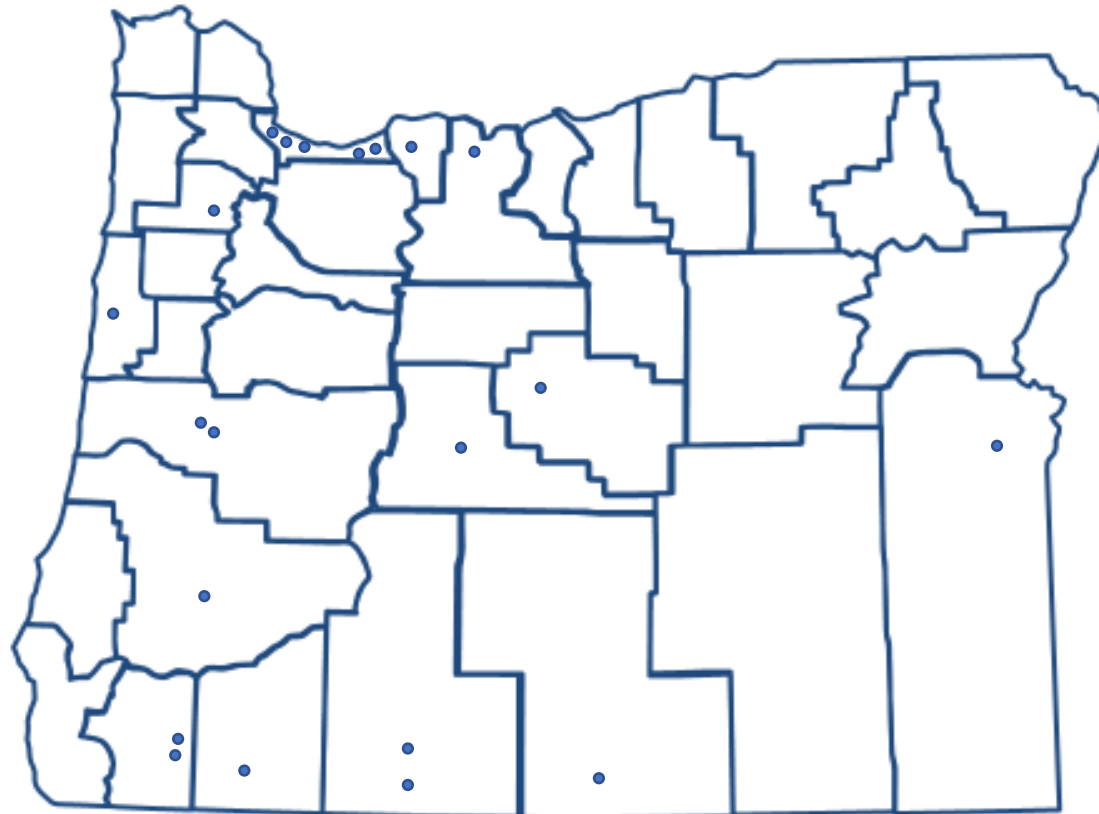




# *Activities*

- Host special events/support groups
- Enhance culturally specific medical/behavioral health services
- Develop culturally specific curricula and training
- Address social determinants of health
- Raise awareness through marketing and outreach
- Connect to resources
- Build partnerships
- Enhance sustainability through evaluation

# Geographic Distribution of Mini-grant Recipients



18 Mini-grant Recipients

14 Counties

4 Statewide

## Impacts

***“At this time of COVID, when our already compromised community is facing social isolation, housing/employment/medical discrimination, and mental health resource scarcity, having real people available to connect with, and get assistance navigating the ever-changing landscape is literally the difference between life and death for folks.”***

***“This means that we have the agency and autonomy to choose how we heal instead of being told what it must look like. This means that we are able to establish deeper relationships with those who are providing mental healthcare to the community.”***

## Positive Impact on Staff

*“[This] has been the highlight of our careers [...] This work means so much to us as Queer individuals, and as survivors of suicide loss.”*

***“This has given us a stepping stone and allowed us to dream in ways that we can now scale to support our community.”***

*“One facilitator mentioned...facilitating this group has been the most important service work she has done.”*



## Increased Awareness and Allyship

*“A vice principal who did not use proper pronouns now does. That has been encouraging progress for the team.”*

*“Another organizer said, ‘There’s folks in Klamath who have never seen a positive queer depiction before this.’*

*“The [project] has increased outward facing presence in the community which aids in shifting false narratives that LGBTQ+ folks do not live in the Gorge. It supports shifting transphobia and homophobic views and norms, as well as lets LGBTQ+ community members know they are valued, celebrated, and a part of the community.”*

*“This project has been giving much hope and support to a community that have been struggling to have visibility and their voices heard.”*