

Risk Communication Toolkit

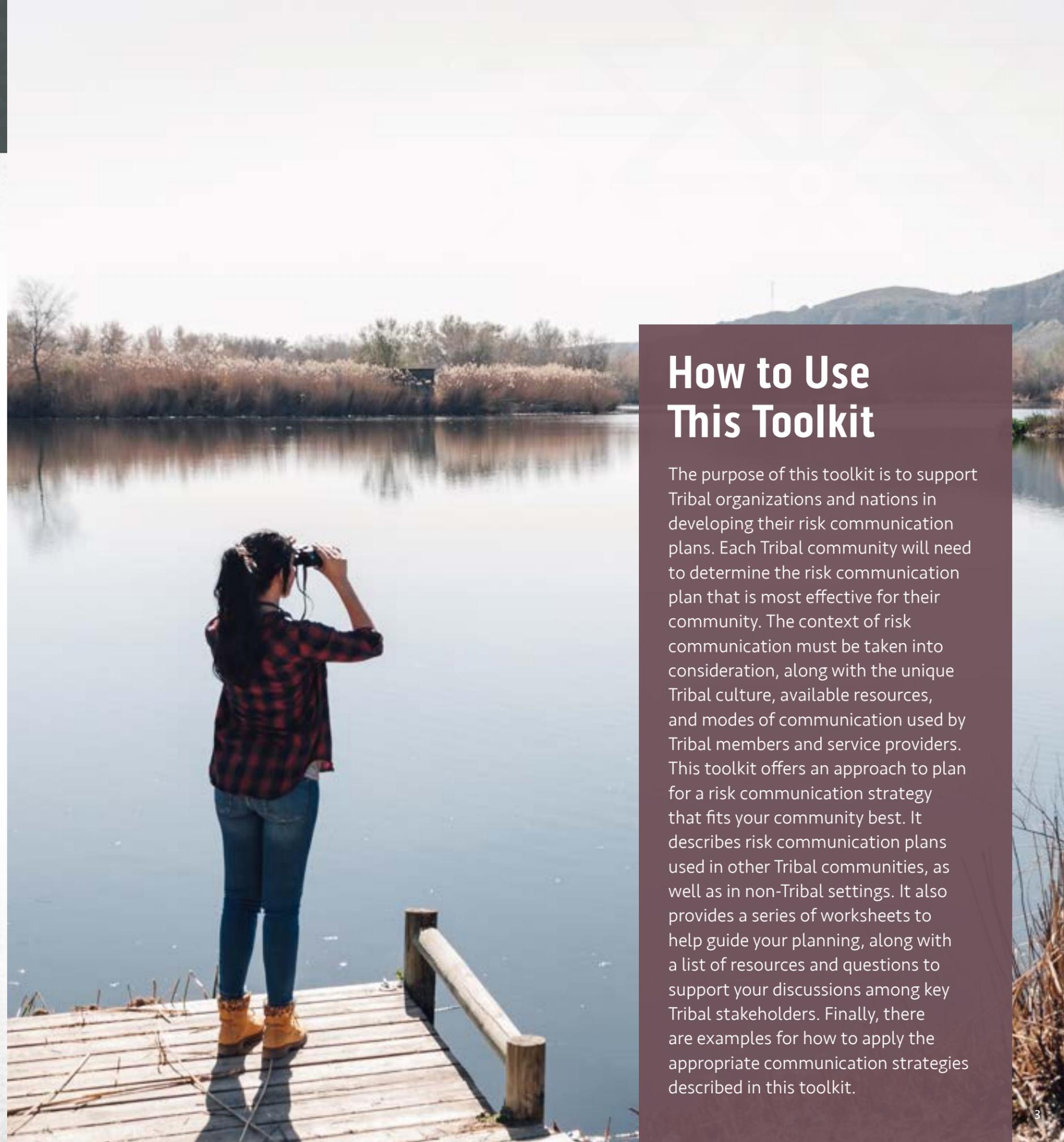
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This Risk Communication Toolkit has resources and examples of effective communications for Indigenous communities related to suicide, adverse childhood experiences, and intimate partner violence.

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How to Use This Toolkit

The purpose of this toolkit is to support Tribal organizations and nations in developing their risk communication plans. Each Tribal community will need to determine the risk communication plan that is most effective for their community. The context of risk communication must be taken into consideration, along with the unique Tribal culture, available resources, and modes of communication used by Tribal members and service providers. This toolkit offers an approach to plan for a risk communication strategy that fits your community best. It describes risk communication plans used in other Tribal communities, as well as in non-Tribal settings. It also provides a series of worksheets to help guide your planning, along with a list of resources and questions to support your discussions among key Tribal stakeholders. Finally, there are examples for how to apply the appropriate communication strategies described in this toolkit.

What is Risk Communication?

Risk Communication: sharing information with the public about health risks and events, and how to reduce those risks or improve public health.¹

Risk communication includes both internal and external communication, and involves a variety of team members. Internal communication may include program managers, public health professionals, and advisory members who come together to develop a common understanding of their tasks and responsibilities to develop communications around a subject area. From internal collaboration, the team can use the available information and data to better understand the current risk and its potential impacts on the community.² External communication focuses on the community or stakeholders and their awareness of the risk and what role they may have in helping to reduce it.³

Risk Communication should be:

- Culturally responsive and linguistically competent.
- Reflective of the views of stakeholder groups.
- Tailored for the population of focus.
- Clear and easy to understand, avoiding abbreviations and acronyms.
- Adjusted for a fifth-grade reading level to ensure understanding by all audiences.

The list above is adapted from the U.S. Department of Health & Human Services information gateway on child welfare.⁴





What is a Risk Communication Plan?

Risk Communication Plan: a clear and actionable strategy to share information, with detailed protocols and procedures outlining how risk communication will be operationalized and implemented.

Developing a risk communication plan includes: identifying and understanding the audience, establishing a communications team, selecting the appropriate messages and formats, designing and adapting materials, creating outreach and dissemination strategies, and finally, monitoring and evaluating the effectiveness of communication efforts.

Tribal governments may use many different approaches to communicate risk, ranging from individual- to community-level or mass media communications. A comprehensive understanding of community members' perceptions, concerns, and beliefs, along with community members' knowledge, practices, and context, provide a critical framework for a successful risk communications strategy. Practical risk communications approaches require the early identification and management of rumors, misinformation, and other challenges.

The materials in this toolkit are intended to provide Tribes with tools to **establish, review, or update a Tribal risk communication plan to address urgent health issues.** Our communities have dealt with and continue to deal with historical and intergenerational trauma. As Tribal members, we may have been exposed to sweeping policies and practices through contact with various institutions that have led to trauma for both individuals and communities. We also see some harmful behaviors being passed down across generations, which can also lead to trauma. These historical impacts can overlay other incidents and add to, as well as complicate, risk communication within our communities. Addressing these issues in a clear, meaningful way can help make supporting our

communities in times of crisis achievable. While we cannot change the past, we can create the space for healing now for a better future for our children and subsequent generations.

When Tribal departments and program managers understand their role in communicating risk, teams can be more effective and efficient. They can connect with Tribal communities in meaningful ways to improve community response overall. Part of connecting to our Tribal communities includes recognizing that we are very diverse. We have a range of ages, genders, educational levels, income levels, and exposures to discrimination and bias that may be perpetuated within our communities, as well as by members of the mainstream or outside community. Those of us who identify as members of more than one marginalized group may experience even more discrimination and bias. Understanding and planning for the diversity in our communities also represents a critical piece of creating a risk communication plan that helps support all Tribal members in times of crisis and stress.

Tribal communities, as sovereign entities, share many characteristics with state and county governments. However, the unique status of Tribal nations includes essential differences, such as language, culture, and social networks that must be included when developing Tribal risk communication plans. In addition, Tribal departments may require review and approval of risk communication processes, plans, and materials prior to implementation and dissemination. It is important to build in review and approval processes, and allocate reasonable time for the review process, to ensure Tribal support and adherence to Tribal laws and policies. Tailoring risk communication plans for a given Tribal community helps ensure the support provided offers meaningful risk reduction for Tribal members.

Risk Communication Objectives

This toolkit focuses on specific risk communication objectives to grow understanding of possible approaches to risk communications regarding certain health and wellness issues. In particular, this toolkit focuses on adverse childhood experiences (ACEs), intimate partner violence (IPV), and suicide risk reduction. These issues are of special concern in Indian Country because of the experiences of historical trauma, racial discrimination, and other environmental contexts that place our communities at higher risk for experiencing these stressors and traumatic experiences.

Adverse Childhood Experiences

Adverse childhood experiences (ACEs) are potentially traumatic events in childhood (0-17 years). These may include experiencing violence, abuse, or neglect; witnessing violence in the home or community; or, having a family member attempt or die by suicide. ACEs may also include aspects of the child's environment that can undermine their sense of safety, stability, and bonding.⁵ Child abuse and neglect data show that American Indian/Alaska Native (AI/AN) children have the second-highest overall rate of child maltreatment among all races and represent 14.2% of child maltreatment cases.⁶ Be mindful of how ACEs are framed. For example, providing an ACE score, which is a summary score of all the possible major stressors and trauma exposures an individual has experienced, may re-traumatize those who have experienced these types of abuse and neglect.

Intimate Partner Violence

Intimate partner violence (IPV) describes physical violence, sexual violence, stalking, or psychological harm by a current or former partner or spouse. This type of violence can occur among couples and does not require sexual intimacy.⁷ In a report published by the CDC in 2005, 39% of AI/AN women identified as victims of lifetime IPV.⁸ A 2018 report published by the Urban Indian Health Institute (UIHI) found that 66 out of 506 Missing and Murdered Indigenous Women and Girls cases that UIHI identified were tied to domestic and sexual violence.⁹ In their report, domestic violence includes IPV and family violence.

Suicide

Suicide is preventable, and everyone has a role to play to save lives and create healthy and strong individuals, families, and communities. Suicide prevention requires a comprehensive public health approach.¹⁰ Native communities experience higher rates of suicide compared to all other racial and ethnic groups in the U.S., with suicide being the eighth leading cause of death for AI/ANs across all ages. For Native youth, ages 10 to 24, suicide is the second leading cause of death; and the Native youth suicide rate is 2.5 times higher than the overall national average, making these rates the highest across all ethnic and racial groups.¹¹ There are several proven approaches to reducing suicide risk, including: (1) ensuring access to mental health care; (2) increasing social support among higher risk groups; (3) improving problem-solving and coping skills, particularly with an aim to reduce stress; (4) reducing access to lethal means (i.e., access to guns, drugs, and other dangerous materials); and, (5) improving understanding of and connection to cultural beliefs, community connectedness, and cohesion, and centering the supports available at the family, community, and local levels.¹²

Communication Objectives Summary

While ACEs, IPV, and suicide are all related, they can represent separate objectives for a Tribal risk communication plan. In this toolkit, a **communication objective** is defined as the main goal that a Tribal team aims to address within a given risk communication strategy. For example, the number of suicide completions in one community may be extremely low. A Tribal risk communication team may therefore decide to prioritize developing a communication strategy that focuses on IPV, particularly if the Tribal data suggests this is an issue in the community. While the overall Tribal risk communication plan can easily adjust to match the objectives of the team and community, it may be more realistic, given the availability of resources, to focus on one particular objective, such as implementing a risk communication strategy that addresses IPV.



Risk Communication Objectives

Other Considerations

The **COVID-19 pandemic** has had a significant and lasting impact on all Tribal communities, influencing how we communicate and perceive public health risk. American Indians and Alaska Natives faced disproportionately higher infection rates (3.5 times higher than white Americans in 2020), exacerbating already present health disparities and leading to loss of life and way of life for many Native communities.¹³ By acknowledging the challenges and ongoing physical and mental health effects of the pandemic, Tribal health departments can better understand and address co-occurring health crises. Regardless of a community’s specific objective, there were many lessons learned from COVID-19 that could help improve risk communication efforts:

- Have clear and consistent messaging to build public trust and improve engagement.¹⁴
- Center community, lead with positivity, and take a comprehensive approach to outreach and engagement.¹⁵
- Enlist trusted community members or Elders to help with messaging, acknowledging that risk communication is a two-way process that may take time.¹⁶
- Additionally, there may be systems, resources, new positions and staff, or relationships formed during the pandemic that can be added to or expanded to meet a Tribe’s communication objective.

The COVID-19 pandemic has shown the importance of public health work and highlighted our collective need for accessible, reliable, and useful risk communication.¹⁷ It has also shown the strength and resilience of Tribal health leaders committed to protecting our Native communities.



Guidance for Planning and Preparing Risk Communication

When in the middle of a crisis, having a plan to communicate information quickly and effectively is critical. **This toolkit is intended to serve as a guide to the risk communication planning process**, outlining opportunities and obstacles in different communication tools, with reflection questions for the planning stage, sample risk communication templates and work plans, and monitoring and evaluation suggestions. To establish a formal plan, Tribal teams may find it helpful to reference existing risk communication plans created by other governments (e.g., the New Hampshire Department of Health and Human Services¹⁸ and the State of Arizona¹⁹). A template outline based on these two guides is shown in **Appendix E**. This template may be used as a starting point and adjusted to fit the specific communication objective.

The following **eight steps** (Table 1) guide the risk communication planning process and are helpful for staff to think through before an incident occurs. *This toolkit provides a brief overview of the entire process and then gives more detailed guidance on each of the eight steps, with reflection questions embedded throughout.*

Table 1. The eight steps for developing a risk communication plan.

Step	Potential Communication Activities & Tasks
Pre-Planning Phase	<ul style="list-style-type: none"> • Research and evaluate existing communication campaigns to develop an informed communication strategy based on lessons learned from other or past efforts. • Consider Tribal leadership and when/how involved they should be in this work. Seek any necessary approval from designated authorities to develop a communication strategy and implement a communication campaign. • Identify resources such as revenue, staff, and consultants to support the development and implementation of a social marketing and communication plan.
Step 1. Identify the audience	<ul style="list-style-type: none"> • Guiding questions to consider when first identifying your audience: <ul style="list-style-type: none"> - Are there specific populations you are creating these materials for? Who needs to be informed? - Are you scheduling early focus groups to identify what kind of information is needed and how to present it? - Is there an existing communication committee with interagency and family involvement? Who may have existing relationships or contact with the people you are trying to reach? • See Step 2 for guidance on understanding your identified audience.

Guidance for Planning and Preparing Risk Communication

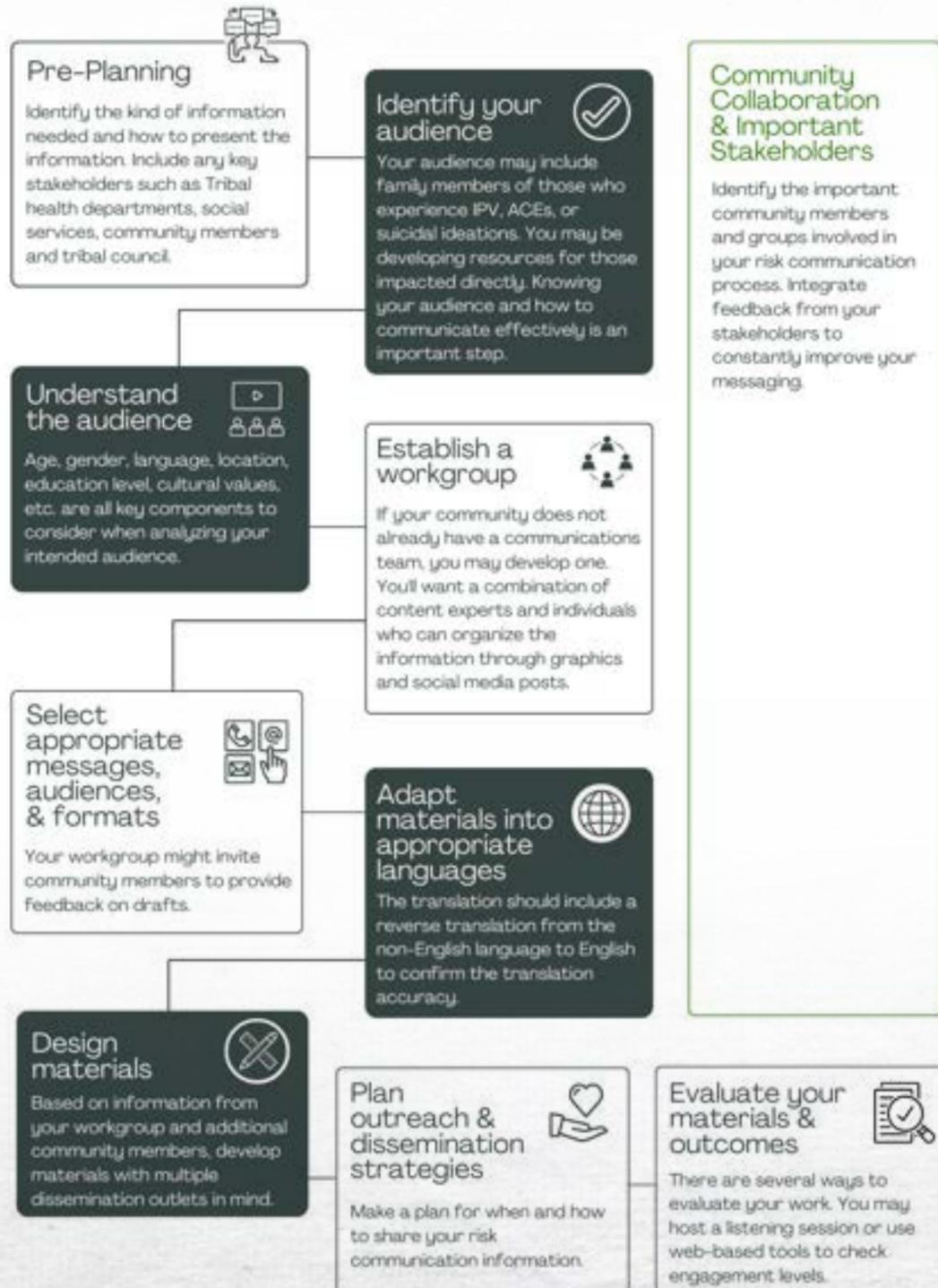
Step	Potential Communication Activities & Tasks
Step 2. Understand the target audience	<ul style="list-style-type: none"> Once the audience has been identified, review all aspects of your target audience: age, gender, language, education level, cultural values, location (living on or off reservation), etc. Understand the diversity of your community and the overlapping identities that may exist. Analyze existing data, host focus groups, or conduct other outreach efforts to learn more about your audience. Learn how your target audience receives and shares information (e.g., a popular Facebook page). Acknowledge the way your audience may react to information or express their emotions. For example, anger can be a way for family members to show grief. Successful interventions must take these cultural norms into consideration.
Step 3. Establish a workgroup	<ul style="list-style-type: none"> Create a diverse team that reflects different positions (remembering that individuals in those positions may change over time). Your team should include staff, leadership, Tribal leadership, and community members. Depending on the risk/crisis objective, the team may include non-Tribal individuals (e.g., local public health experts, education staff), or county, state, and federal partners. Establish roles and responsibilities within your team. Examples include: team lead, content development lead, social media manager, content designer, public service announcement planner, outreach coordinator, community health workers, and community health educators. Start to collaborate with others outside of your team to better align efforts across sectors (e.g., engage with Tribal police on public health efforts). Establish a communications subcommittee or workgroup to develop a social marketing and communication plan. This committee may change over time, and it may be important to identify new members as the work continues. Present the benefits of involvement for each member agency of the communications committee.

Step	Potential Communication Activities & Tasks
Step 4. Select appropriate messages, audiences, & formats	<ul style="list-style-type: none"> The type of incident and stage of incident both help to identify the target audience. Teams can then determine the appropriate message content for a risk communication response. Determine if the crisis is long-term and likely to continue, or short-term, and address accordingly. Consider both immediate and ongoing messaging plans. Focus on accurate information without stigmatizing or sensationalizing the situation. Use positive messaging whenever possible. Remember to include cultural protocols and perspectives. Use trusted and reliable sources of information. Access to the internet, social media, and other modes of communication may be limited. Create materials to fit your audience's main communication method.
Step 5. Adapt materials into appropriate languages	<ul style="list-style-type: none"> Identify all languages used by your audience and what translations are needed. The translation should include a reverse translation from the non-English language to English to confirm accuracy.
Step 6. Design materials	<ul style="list-style-type: none"> Ensure materials are accessible to all, including people with sensory impairments (e.g., consider color blindness during design). Reflect community culture in your materials. If hiring outside consultants, consider using a Native designer.
Step 7. Plan outreach & dissemination strategies	<ul style="list-style-type: none"> Make a plan for when, where, and how frequently to share information. Decide which team members are responsible for which stages of communication. Reach out to partners, if collaboration is needed, to disseminate information (e.g., local stations for a radio announcement).
Step 8. Evaluate your materials & outcomes	<ul style="list-style-type: none"> Capture feedback from the community about the communication. Maintain real-time information dissemination. Use web-based resources to track engagement. Host focus groups to review the communications and make adjustments.

Guidance for Planning and Preparing Risk Communication

Figure 1. Information flow in the risk communication planning process.

Flow of Information



Pre-planning

For more context on risk communication in Indian Country, refer to the “What is a Risk Communication Plan?” and “Risk Communication Objectives” sections in the introduction of this toolkit. *Throughout these planning steps, the Tribal risk communication team may be referred to as the RC team and the lead as the RC lead.*

Before beginning a risk communication plan, the RC team should evaluate the existing efforts and systems in their community. The Tribal public health department may already have protocols for sharing information, or there may be past communication campaigns to build on, learn from, or adjust for current efforts. By reviewing the previous or current plans, the RC team can make informed improvements to their communication strategy. Additionally, it is important to consider Tribal leadership and how and when they should be involved in this work. If there are necessary approvals to develop and implement a communication campaign, seek those early in the planning process to prevent delays later on. Finally, the RC team should identify the resources needed to support these efforts. They can start cataloging the funding, staff, and technology that may be required to reach their communication goal.



Guidance for Planning and Preparing Risk Communication

Table 2. Reflection questions for policies and procedures.

Reflection Questions: Policies and Procedures

Below is a list of reflective questions to consider as you develop your risk communication messaging and plans within your organization and/or Tribe.

Reflection Questions	Thoughts
Is there a process in place to develop, approve, and disseminate information and messaging?	
Who approves the messages for appropriateness before posting to the community?	
Are there social media policies within the organization?	
Is there a community advisory board or representation from the community to give feedback?	
Is there a tracking process to address any complaints or praises on information shared?	
Is a warm handoff training and guide needed for medical and behavioral health professionals and/or social services, in order to connect those in distress to the appropriate care? See, for example, the Warm Handoff Guide by the Agency for Healthcare Research and Quality. ²⁰	

Steps 1 & 2: Identify and Understand the Audience

For an RC team to identify their audience, they should consider where the public health issue is occurring and who needs to be informed about the risk. It may be the entire community or a particular subpopulation (e.g., youth) that is experiencing the issue at a higher rate. The team should focus on who they are creating specific materials for and then aim to gain a better understanding of that audience. They may host focus groups, interviews, or other outreach activities to learn more about their target audience. They can take advantage of existing data, resources, or people who already have working relationships with that audience. Ideally the RC team will better understand their audience's age, gender, language, education level, cultural values, location (living on or off reservation), and other aspects of their diverse and overlapping identities. Finally, the RC team should place special focus on how the target audience receives, reacts to, and shares public health information.

Steps One, Two, and Four are an iterative process, and the RC team will likely jump back and forth among them until their audience(s) and message(s) are clearly defined.



Guidance for Planning and Preparing Risk Communication

Table 3. Reflection questions for identifying and understanding the audience.

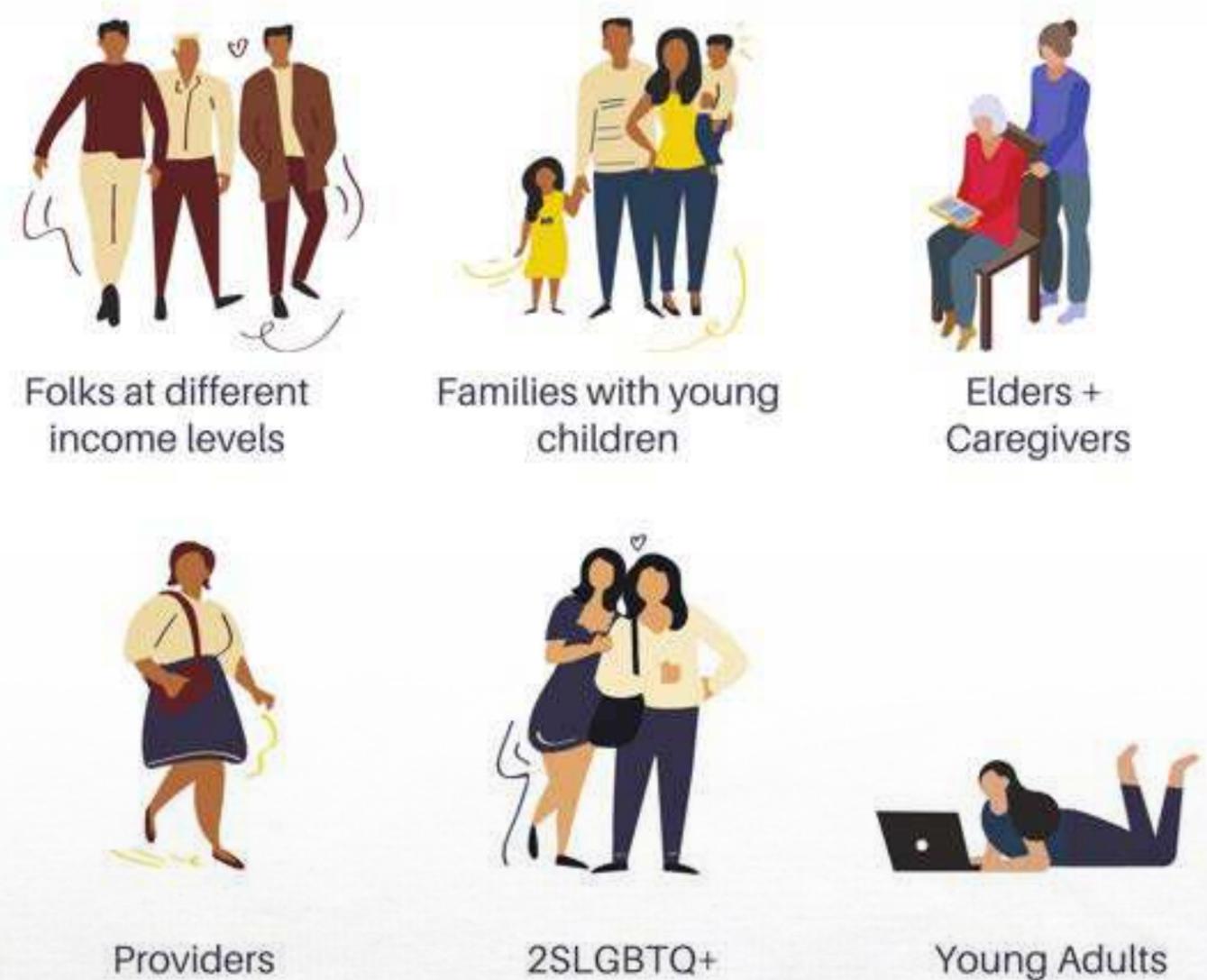
Reflection Questions: Populations and Subcultures

Below is a list of reflective questions to consider as you develop your risk communication messaging and plans within your organization and/or Tribe.

Reflection Questions	Thoughts
Are there specific populations you are creating these materials for (i.e., a target audience)?	
What are the subgroups in your community?	
How do these subgroups receive their health information?	
What is the best method to communicate your message to reach a particular group?	
Is there representation from these subgroups for feedback and input?	
How are these subgroups involved and engaged in the development of the messaging?	
Are people technologically savvy?	
What are the communities' cultural views and social norms about the subject?	
- What do the Elders say or do?	
- What do the youth say or do?	

Figure 2. Subpopulations in risk communication.

Considering all our relatives in our communications...



Guidance for Planning and Preparing Risk Communication

The following matrix (Matrix 1) provides considerations for developing a risk communications plan for ACEs, IPV, and suicide prevention. It is important to consider the audience(s) the plan is intending to address, the content to be communicated, the focus of the intervention, individual considerations for the intervention development, the community within which it will be implemented, and the system(s) that may be involved.

Matrix 1. Understanding the audience: considerations for adverse childhood experiences (ACEs)*, suicide prevention, and intimate partner violence (IPV).

Communications Considerations	
Audience	Community, educators, health providers, social services, youth, parents, extended family roles, Elders, leadership
Individual	Historical trauma, family history, location, culture (or lack thereof), education, health (physical/mental), employment, housing
Community	Historical trauma, institutional racism, culture, location, housing, access to support
System	Historical trauma, institutional racism, cultural competency, accessibility

* Please note that providing ACE scores can retraumatize community members. Developing a strengths-based approach in consultation with behavioral health providers, Elders, and community members has worked well in many Tribal communities.

Step 3: Establish a Workgroup

To establish an RC team, consider the different types of work and people needed to create and implement the communication plan. The workgroup will likely be very diverse and include staff, team leadership, Tribal leadership, and community members. It is important to have defined positions for everyone involved. For instance, the RC team may have a team lead, content development lead, social media manager, content designer, public service announcement planner, outreach coordinator, community health workers, or community health educators. The responsibilities of each member should be clearly outlined, and all team members should have a mode to communicate with each other to ensure they are working toward a common goal on a shared timeline. Depending on the risk or crisis objective, the team may include non-Tribal individuals (e.g., local public health experts, education staff), or county, state, and federal partners. Start to collaborate with these partners early in the planning process and highlight the mutual benefit of the partnership.

Table 4. Reflection questions for establishing a workgroup

Reflection Questions: Creating a Risk Communication (RC) Team

Below is a list of reflective questions to consider as you develop your risk communication messaging and plans within your organization and/or Tribe.

Reflection Questions	Thoughts
Who is needed to make your plan successful? What are their different roles?	
Do you have an appropriately diverse team? (e.g., staff, specialists, community members, etc.)	
Who is leading this risk communication effort?	
How will Tribal leadership be involved in this process?	
What are the responsibilities of each RC team member?	
How will your team communicate with each other?	
What is the timeline for your RC plan and how will you stay on track?	
What outside entities, organizations, or agencies need to be involved in your plan? How will you collaborate early and often with them?	

Guidance for Planning and Preparing Risk Communication

Step 4: Select Appropriate Messages, Audiences, & Formats

Mode of Messages

There are several ways a RC team, organization, or community may distribute information. Below (Table 5) are a few examples of different communication tools, as well as the advantages and possible challenges of each. The ideal tool will be within budget, maintainable, and effective at reaching the target audience at the needed level. Whichever way the RC team decides to share information, the messaging should match community norms, perceptions, and culture. The workload and time required for content creation should also be considered when selecting a messaging mode. Please see **Appendix A** for detailed examples and visuals of these communication tools.

Table 5. Communication modes: advantages and possible challenges.

Tool	Advantages	Possible Challenges
Newsletters	<ul style="list-style-type: none"> • Provide more detailed, nuanced risk information including resources and contacts • Support a predictable format, particularly if a template is used, for greater community reliance • Can reach those without social media or internet 	<ul style="list-style-type: none"> • Require a team investment to develop content on a regular basis • More content and longer messages may take too long for people to read fully • Depending on format, distribution may be difficult • Set schedule may not align with the ideal timeframe or urgency of the risk communication plan
Text Messages	<ul style="list-style-type: none"> • Provide brief, urgent risk information in real time • Reach community members who may not have an internet connection • Offer opportunities to reach younger generations in ways they are familiar with and are likely to use 	<ul style="list-style-type: none"> • Require a team plan and process • May not be helpful for complex or possibly stigmatizing information • Too many text messages may be ignored • Phone numbers change frequently • Some people may get charged when they receive text messages
Websites	<ul style="list-style-type: none"> • Offer audio and video support for multiple audiences • Provide a format that can support complex info sharing • May be accessed through mobile devices 	<ul style="list-style-type: none"> • Require an large initial investment of time and money • Require frequent updates and technical expertise • Depend on a planned format to support access to key information

Tool	Advantages	Possible Challenges
Social Media	<ul style="list-style-type: none"> • Provide brief, urgent risk information in real time • Offer opportunities to reach younger generations in ways they are familiar with and are likely to use • Can offer real-time engagement with the community • No or low cost 	<ul style="list-style-type: none"> • Require a team plan and process • May not be helpful for complex or possibly stigmatizing information • Each social media platform attracts a different audience, and its popularity changes over time • Require staff to respond to comments in real time
Radio Announcements	<ul style="list-style-type: none"> • Can be mobilized quickly • Potential reach is wide, perhaps across an entire community or population • Opportunity to develop regular ads that people rely on • Can reach people who don't have access to other technology like a computer or phone 	<ul style="list-style-type: none"> • May only reach a small audience • May not be appropriate for complex information sharing • May require additional outside partnerships
Infographics	<ul style="list-style-type: none"> • Eye-catching • Convey large amounts of information briefly • Customizable • Useful for other communication methods 	<ul style="list-style-type: none"> • Require time and data to develop • Technology or design needs may be expensive
Community Flyers / Billboards	<ul style="list-style-type: none"> • Ideal for conveying one or two major ideas • Reach a large number of community members • Can especially highlight one major purpose or goal 	<ul style="list-style-type: none"> • Challenging to assess overall impact • Can be expensive • Can only focus on one major message; may not be appropriate for complex information sharing
Postcards	<ul style="list-style-type: none"> • Useful for reminders for specific events or opportunities • Can reach people who don't have access to other technology like a computer or phone 	<ul style="list-style-type: none"> • Expensive and potentially time consuming to mail out • Require mailing list or other distribution list, with frequent updates needed

Guidance for Planning and Preparing Risk Communication

Content of Messages

Selecting Effective Evidence-Based Interventions

Risk communication teams may also consider whether the risk communication effort would benefit from using an **evidence-based intervention (EBI)**. For the purposes of this toolkit, an EBI is a tested strategy that has been proven to have a statistically significant impact on health outcomes or other areas of need in a community. Few risk communication EBIs have been developed within or for AI/AN populations. However, a careful review of the characteristics of the communities they were tested in, and comparing them to Tribal or urban Indian community characteristics, may support selection of an EBI that is appropriate for a given community.

In addition to the community characteristics, it is also important to consider the measurement approaches and tools needed to understand the impact an EBI may have on individual behaviors. There are new resources available for Tribal and urban Indian communities interested in assessing the effectiveness of an EBI, and some assessment tools are specifically designed to understand the impact on suicide risk.²¹ Moreover, some interventions have begun to explore cultural components of intervention, in particular, connection to place, or land, which has been identified as important in improving AI/AN youth uptake of intervention messaging.²²

Evidence-Based Practices

For the purposes of this toolkit, **evidence-based practices (EBPs)** are those approaches that have been tested within certain settings, but are limited to specific aspects of communication or information. In short, they do not encompass all aspects of an intervention. There are resources available that were developed for the broader U.S. population that Tribal and urban Indian communities may consider to identify EBPs for suicide²³ risk reduction, such as recommendations for how to report on suicide, how to develop an approach for preventing IPV,²⁴ and ways to prevent ACEs.²⁵ When adopting these broader recommendations and tools, it is important to carefully consider the cultural fit and contextual issues that may impact how these approaches are perceived and their potential impact within a given Tribal or urban Indian community.

Other research has confirmed that graphics and other images can help support AI/AN individuals in improving their understanding of health information,²⁶ and different age groups, such as Elders, may have particular needs to best support understanding of numerical information.²⁷ More broadly, numerical information can be misconstrued without adequate explanation,²⁸ and teams would benefit from careful review and perhaps piloting sample information with community members to ensure the information is accessible to the population in question. One approach that has

been effective includes translating risk into a “ladder” that can be easily communicated across community groups.²⁹ Another approach, particularly related to risk communication among those who may be experiencing substance use issues, confirmed that messages framed with the benefits individuals may gain from certain behaviors are particularly effective.³⁰

It may also be important to consider how to promote certain behaviors more effectively. For example, one study found that risk communication efforts were particularly effective among racial and ethnic groups, yet social distancing messaging and health-seeking recommendations were less likely to be followed across all groups.³¹ While this may be limited to infectious disease control, it may be useful to test messaging with the given Tribal or urban Indian community to better understand the framing that would work most effectively within that community.

Content Summary

In summary, selecting EBIs or EBPs requires a thorough review of the evidence of effectiveness among AI/AN populations. If there is no evidence of effectiveness available, it may still be possible to select the EBI or EBP, but it is important to review the conditions and populations that they are tested in, and compare them with the given AI/AN community conditions, to ensure the best fit. In addition, it may be important to consider cultural adaptations that improve the fit and uptake of EBI and EBP. This can also be challenging, as these have usually not been tested to confirm the intervention or practice remains effective. Teams should establish a process for how to make necessary adaptations and include testing and/or collect community feedback to ensure the EBI and/or EBP remains effective and provides a strong community fit.

The following matrix provides considerations for developing a risk communications plan for ACEs, Suicide Prevention, and IPV. It is important to consider the audience(s) the plan is intending to address, the content to be communicated, the focus of the intervention, individual considerations for the intervention development, the community within which it will be implemented, and the system(s) that may be involved.

Guidance for Planning and Preparing Risk Communication

Matrix 2. Selecting the appropriate message: considerations for adverse childhood experiences (ACEs)*, suicide prevention, and intimate partner violence (IPV).

Consideration	Adverse Childhood Experiences*	Suicide Prevention	Intimate Partner Violence
Content	<ul style="list-style-type: none"> Interactive, age-specific Family strengths (biological, extended, kinship, family friends) 	<ul style="list-style-type: none"> We are a community; we are all part of a community You matter messages Support for family/friends Support for individual 	<ul style="list-style-type: none"> Relationship skill-building Safety measures Recognizing IPV & reporting mechanisms Indigenous women specific resources
Focus	<ul style="list-style-type: none"> Safety; well-being The health of the whole family (immediate, extended, community) Culture as prevention 	<ul style="list-style-type: none"> Value of life The importance of relationships Tribal community; culture as prevention 	<ul style="list-style-type: none"> Family support; addressing isolation Safe communication Culture as prevention

*Please note that providing ACE scores can retraumatize community members. Developing a strengths-based approach in consultation with behavioral health providers, Elders, and community members has worked well in many Tribal communities.

Steps 5 & 6: Design & Adapt Materials

When designing materials, it is crucial to use trusted and reliable sources of information. Inconsistent or questionable information can lead to public mistrust and disrupt the communication goal. At this stage, the RC team should review Steps One and Two before tailoring their materials to fit their audience's main communication method. They may recall that access to the internet, social media, and other modes of communication is limited. It also may be important to reflect community culture in their visuals, colors, and displays, and if they are hiring an outside consultant, consider using a Native designer. Additionally, the RC team should ensure materials are accessible to all, including people with sensory impairments (e.g., consider color blindness during design). Finally, they will want to identify all languages used by their audience and what translations are needed. The translation should include a reverse translation from the non-English language to English to confirm accuracy.

Table 6. Reflection questions for communication development.

Reflection Questions: Communications

Below is a list of reflective questions to consider as you develop your risk communication messaging and plans within your organization and/or Tribe.

Reflection Questions	Thoughts
What sources are being used? How does your team verify the credibility of this information?	
Is messaging culturally appropriate?	
How are the strengths and values of your community highlighted and incorporated into your messaging?	
Does the design fit with the community?	
What are the population's reading and writing levels?	
What are the primary and secondary languages used? How will those languages be translated?	
Are the communication modes accessible to all audiences? What adjustments may be needed for community members with disabilities?	

Guidance for Planning and Preparing Risk Communication

Step 7: Outreach & Dissemination

For successful implementation of the communication plan, it is important to have a clearly defined timeline with specific goals and roles for information dissemination. The RC team should make a plan for when, where, and how frequently to communicate with their target audience. Team members should know their responsibilities for each stage of the outreach and dissemination process. Additionally, if partners are needed (e.g., a local radio station for announcements), reach out early to build those relationships and ensure that there are clear dates and deadlines for the deliverables.

Table 7. Reflection questions for understanding outreach resources and capabilities.

Reflection Questions: Resources and Capabilities

Below is a list of reflective questions to consider as you develop your risk communication messaging and plans within your organization and/or Tribe.

Reflection Questions	Thoughts
What are the current social media platforms that are used by the organization/Tribe?	
Which programs are actively posting and disseminating information to the target populations?	
What is the community's accessibility to the internet and social media?	
Is free high-speed internet available?	
Is there a local computer lab for community members?	
What are the alternatives (non-technical ways) to reach out to the community?	



Reflection Questions	Thoughts
Is there a local radio station?	
Is there a local/Tribal newsletter, newspaper, or mailing distribution?	
Is there a community message board?	
Is there digital signage or a marquee?	
Which platforms are needed, and who needs access to post? Social media platforms such as: Facebook, Twitter, LinkedIn, Instagram, Snapchat, Pinterest, and Reddit	
Who can post, and who is their backup?	
What is your program budget for communications?	
How much do the risk communications activities that you'd like to implement cost?	

Guidance for Planning and Preparing Risk Communication

Table 8. Reflection questions for communication implementation.

Reflection Questions: Implementation

Below is a list of reflective questions to consider as you develop your risk communication messaging and plans within your organization and/or Tribe.

Reflection Questions	Thoughts
Would it be helpful for Tribal departments and team members to convene to review the risk communication plan?	
Do all the team members know their roles and responsibilities and have the required trainings and approvals to implement the communication effort?	
Is there anyone this messaging could impact (i.e., Tribal police, mental health professionals, emergency hotlines) that you could engage in this process?	
Would a mock incident be a helpful way to walk team members through the risk communication plan? (Also called a tabletop exercise.)	
How will the communication tool be introduced to others? For example, what will the outreach coordinator say when delivering copies to Tribal offices?	

Table 9. Helpful tips for implementing the risk communication plan

Start with Open and Honest Communication	Encourage Feedback
<ul style="list-style-type: none"> • Provide an open and honest flow of information to the public • Don't over-reassure • Acknowledge uncertainty • Express wishes • Give people things to do • Understand that you may have knowledge gaps and seek to learn more • Acknowledge the shared sense of pain and impact within the community 	<ul style="list-style-type: none"> • Emphasize that a process is in place to learn more • Be consistent in providing messages • Acknowledge fears • Give anticipatory guidance • Maintain trust and credibility during the resolution phase; keep the expressed commitments from the initial step • Failures or mistakes should be acknowledged and carefully explained

Box 1. Addressing misinformation

Addressing Misinformation
<p>Misinformation often stems from knowledge gaps. Here are a few tips to address misinformation:</p> <ul style="list-style-type: none"> • Communicate uncertainty clearly—saying that not all information is available is more effective than speculating or making claims. • Do not over- or under-reassure, but simply lay out risks and potential consequences with the appropriate tone. • Provide numbers, context, history, and changes to procedures in a timely and straightforward fashion, which can help bolster trust. • Tell people what they can do and how they can act to keep themselves and others safe. • Watch social media: Understand what questions and knowledge gaps are coming up and strategize how to counter myths and threats actively.³² Provide citations and references for information.

Some organizations also offer trainings and sample risk communication tools on their websites:

- Centers for Disease Control and Prevention (CDC): Crisis and Emergency Risk Communication³³
- Federal Emergency Management Agency (FEMA): Flood Risk Communication Toolkit for Community Officials³⁴
- National Oceanic and Atmospheric Administration (NOAA): Risk Communication Strategy Template³⁵

Guidance for Planning and Preparing Risk Communication

Step 8: Monitoring & Evaluation

Monitoring and evaluation (M&E) offers information about the performance of policies, programs, and projects. M&E can help identify what works, what does not work, and provide information about why.³⁶ There are several resources for the RC team to help keep track of how their communication materials are doing within the community. Below are a few to consider:

- Email delivery systems that automate dissemination of messages can help communities assess how many people opened their newsletters.
- Short online surveys: Before and after a communication campaign, a community could help assess how knowledge and perceptions changed.
- Social Media Analytics: Monitoring the number of shares / likes / comments / saves on social media posts, as well as added followers during the time period, can help communities gauge involvement and subjects that are especially interesting.
 - These tools can also help the RC team engage with audience feedback in real time (e.g., a staff member may read and then respond to comments or concerns from the public).
- Google Analytics: This site allows you to measure your advertising return on investment and track your Flash, video, and social networking sites and applications.
- Consider relying on similar assessment tools or frameworks such as an after action report used by emergency preparedness teams.
- Focus groups, both to provide input on the messaging and to learn how the messaging was received, can provide invaluable insight.

If possible, involve project evaluators from the beginning to develop effective process and outcome measures. Evaluation metrics should reflect the project goals to ensure the RC team is measuring their desired outcomes.

Table 10. Reflection questions for monitoring and evaluation.

Reflection Questions: Monitoring and Evaluation

Below is a list of reflective questions to consider as you develop your risk communication messaging and plans within your organization and/or Tribe.

Reflection Questions	Thoughts
Is there data on the full community? How can the team ensure each subgroup and consumer is represented in the evaluation?	
Are there any strategic evaluation plans in place, such as in the marketing or communications departments?	
Are there ongoing monitoring and evaluation efforts on the effectiveness of the messaging?	
What are the measures in place such as the level of community access, satisfaction, and outcomes of communication efforts?	
Is there a performance improvement plan to address any concerns or add feedback given from the people served?	



Sample Template

The following section provides a template for Tribal teams to map out a one-week communication strategy for a single risk communication effort. For example, a Tribal team may want to raise awareness around suicide prevention during World Suicide Prevention Day. This template supports implementation of the overall risk communication plan in the context of this one-week event. Additional communication strategy examples are available in **Appendices B and C**.



Sample One-Week Communication Template

Message: [Meet with your team / advisors / leadership to confirm a message for the overall communication strategy.]

Groups / Target Audience: [Identify the groups you will aim to reach with this strategy.]

Communication Objectives: [List the objectives you hope to accomplish by completing this strategy.]

Strategies: [Confirm the communication strategies you will employ.]

Tactics: [Identify the tactics you and your team will use to implement the strategy.]

Roles and Responsibilities:

Establishing roles and responsibilities for the communication plan will help make sure the campaign rollout goes smoothly, and any adjustments to the plan or process can be easily incorporated. The following roles are based on this communication template; Tribal teams may identify other roles as needed, depending on the structure of their team, and community context.

1. **Team Lead(s)** – It helps to have one or two team leaders willing to take on the role of coordinating across teams.
2. **Content Development Lead** – Identifying one person on the team to lead the message development and confirm with Elders, behavioral health experts, and other key stakeholders can support consistent, accurate, and effective messaging.
3. **Social Media Manager and Contact** – Social media takes time and expertise, and having a team member who owns this role can help ensure it is managed efficiently and respectfully.
4. **Content Design Manager** – Having a team member who can design the campaign content and adjust as needed can be very helpful as the campaign unfolds.
5. **Public Service Announcement Planner** – Coordination of Tribal leaders, youth, parents, and Elders who are going to support the media efforts takes time and graciousness. It helps to have a team member designated for this role.
6. **Outreach and Engagement Coordinator** – Developing a plan for disseminating or dropping off campaign materials is key and having someone ready to implement the plan is equally important.

Evaluation Approach:

Plan to conduct ongoing monitoring in collaboration with Tribal partners at the individual and community levels to assess process and performance measures. Sample measures may include: (1) Number of pamphlets distributed; (2) Number of behavioral health consultations requested over the one-week communication period; (3) Number of views on social media; (4) Number of “likes” or other endorsements on social media; (5) Number of followers over the one-week period; (6) Number of posters still in use at the end of week one. Measures could be tracked one month before implementation, during the one-week period of dissemination, and one month after to assess overall effectiveness of the communication dissemination activities. Qualitative data may also be collected. A summary report for review and planning purposes is recommended.

Work Plan

Week or Day	Focus	Mode	Frequency	Content / Notes
1	[Add the main message]	[How will the message be communicated?]	[How often will the message be distributed?]	[Add any additional content to include roles of team members and other notes to support implementation.]

This toolkit is intended to serve as a first step in developing a risk communication plan tailored for Tribal or urban Indian communities. The toolkit begins with an overview of risk communication and the essential components of a plan. It covers the steps needed to work with teams and community members to prepare for the development of a risk communication plan with a specific focus on preventing adverse childhood experiences, intimate partner violence, and suicide in Indian Country. It then identifies risk communication tools, shows examples, and reviews considerations for monitoring the impact of a risk communication plan. Throughout the toolkit, there are reflection questions for Tribal and urban Indian teams to consider when developing or enhancing their own communication strategies. **Appendix G** provides resources for behavioral health, safety planning, and health care screenings, which may be helpful in structuring a risk communication plan for a specific community. The appendices provide two additional sample risk communication strategies: a one-month strategy for addressing suicide risk reduction (**Appendix B**) and a one-week strategy for reducing the risk of intimate partner violence (**Appendix C**), along with sample posters (**Appendix D**) that may support an RC team in developing content most appropriate for their risk communication efforts.

The content in this toolkit is based on the latest evidence-based practice in these areas and practice-based approaches identified through a scoping review of ACEs, IPV, and suicide risk reduction materials. It does not replace a thorough and comprehensive review of these materials given the unique context of a given community. **We hope this toolkit provides you and your team with the groundwork for developing a risk communication plan that works best for your organization and Tribal or urban Indian community.**



Appendix A

Risk Communication Tools & Examples

Newsletters

Newsletters or emails can help ensure that your organization shares information consistently with your audience about a given subject. You may cover a specific subject in-depth or have a guest feature. You may describe an upcoming event or announce new staff or resources. When creating your newsletter, you may consider using a template and establishing consistent expectations with your audience. Newsletters can be work-intensive, so it may be worth conducting periodic reviews to ensure they are well-read and a useful method for conveying information.

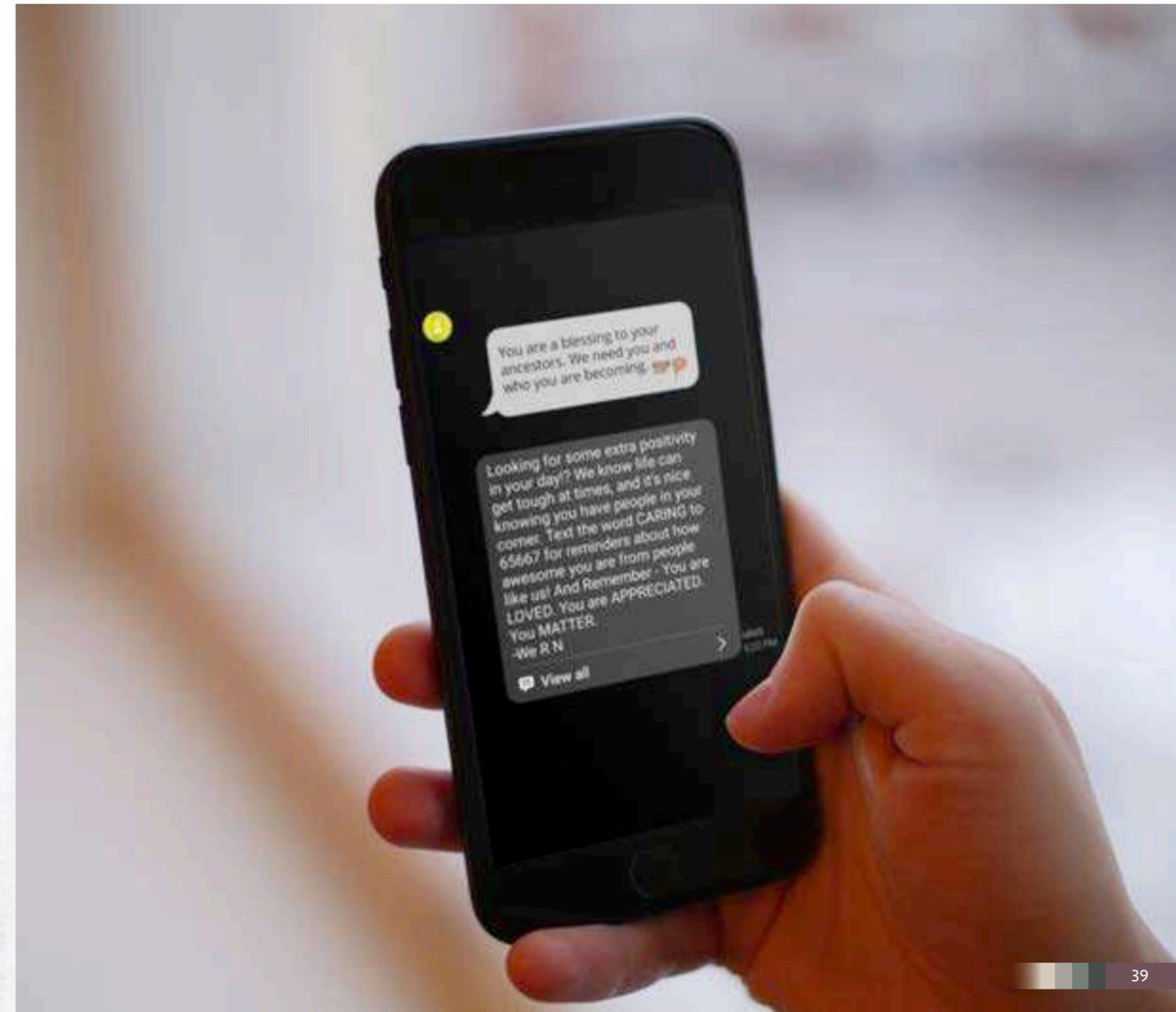
Other questions to consider include:

- Have you assigned someone to coordinate your newsletter development and production?
- Do you have a staff member who can edit all written material?
- Do you have an editorial committee that oversees newsletter subjects, content development, interview recommendations, and management?
- Will your newsletter be printed and/or electronic?
- Will your newsletter appear on your website?
- Will you address controversial issues in your newsletter?
- Will you acknowledge individuals and organizations that have gone beyond the required effort to make a difference in your system of care?³⁷

Texts

Texting community members may be a way to reach those who do not have consistent access to the internet or do not use social media. WeRNative³⁸ is an organization that offers comprehensive health resources for Native youth, by Native youth. They offer a texting service that provides weekly health tips, contests, and life advice. Their content includes healthy relationships, addressing mental health challenges, and being proud of culture and identity. Their use of texting helps reach their target audience, teenagers, and the examples and language they use reflect their communities' cultural background. Check out just one example of their offerings.

While texting may be an effective method of communication, it can be challenging as phone numbers frequently change and individuals could be charged when they receive text messages. Some communities increase accessibility by distributing hotspots or communication devices. The Bureau of Indian Education³⁹ and the Federal Integrated Public Alert and Warning System⁴⁰ (IPAWS) emergency messaging is available to Tribal partners when needed.



Appendix A

Risk Communication Tools & Examples

Websites

Websites can help you communicate with your audience regarding resources, updates, and essential information about how to access services. If your community has a website, does it have the resources a community member needs to access services locally and quickly? If not, is that something that might benefit community members? A significant consideration for building a website is accessibility.

An accessible website may include features such as:

- Video captions or transcriptions (busy individuals may have too little time to watch an entire video or audio recording but can quickly access its content if a transcript is available)
- Alternative text (alt text) for images
- Mobile device capability
- Pages that load quickly (use graphics sparingly)
- Screen magnification software to zoom into all or a portion of the visual screen
- Compatibility with audible output (products called screen readers that read web content using synthesized speech) or tactile output (a refreshable Braille device) software, and
- Compatibility with software that highlights words or phrases as they're read aloud using synthesized speech

For a more comprehensive list of considerations, visit the University of Washington's guide on Developing Accessible Websites.⁴¹ Additionally, please review the Department of Health & Human Services' checklist for more information about accessibility compliance.⁴²

Please check out the Coalition to Stop Violence Against Native Women website for more information on violence prevention and to see design features that increase accessibility.⁴³

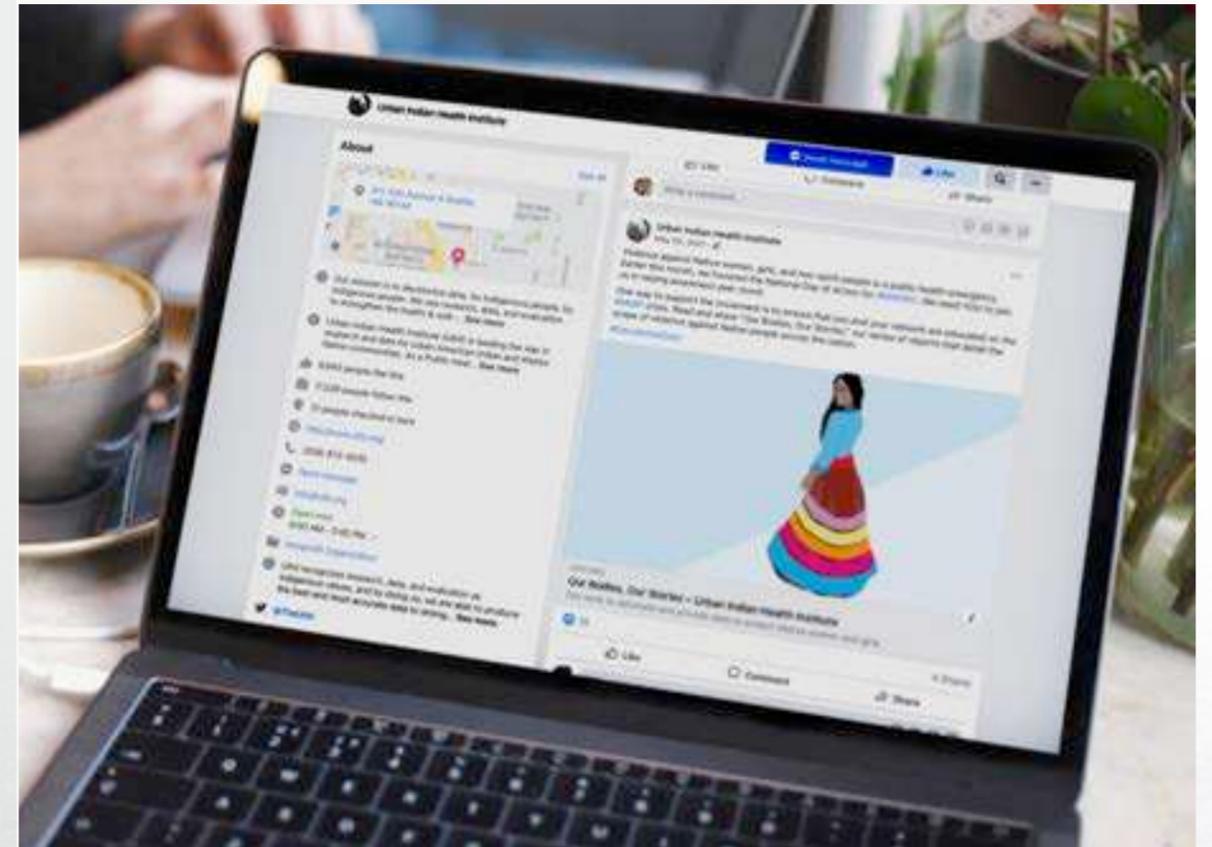
Social Media

Facebook has tools to create and share events, disseminate resources, and host events using Facebook Live.

The example below by the Urban Indian Health Institute⁴⁴ features an image of a person with a multi-color ribbon skirt. The text reads, "Violence against Native women, girls, and two-spirit people is a public health emergency. Earlier this month, we honored the National Day of Action for #MMIWG. We need YOU to join us in raising awareness year round."

"One way to support the movement is to ensure that you and your network are educated on the #MMIP crisis. Read and share 'Our Bodies, Our Stories,' our series of reports that detail the scope of violence against Native people across the nation. #DecolonizeData."

Facebook



Appendix A

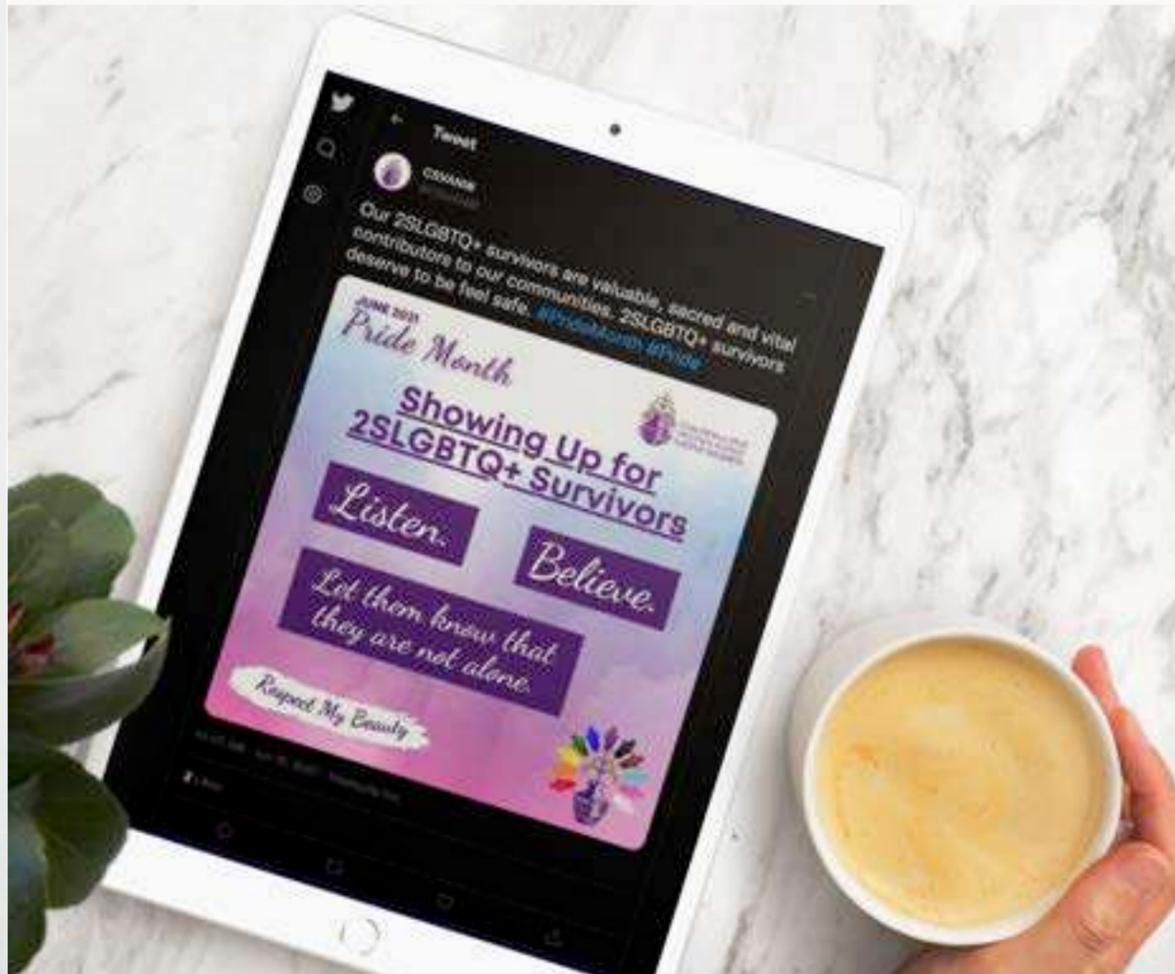
Risk Communication Tools & Examples

Social Media

Twitter is an app designed for brief, compelling messaging. Using a persuasive photo or short video can improve message uptake. This format is best for simple, to-the-point messaging.

The example below is from the Coalition to Stop Violence Against Native Women.⁴⁵ The graphic shares recommendations for showing up for 2SLGBTQ+ Survivors: Listen. Believe. Let them know they are not alone. The text states, "Our 2SLGBTQ+ survivors are valuable, sacred and vital contributors to our communities. 2SLGBTQ+ survivors deserve to feel safe. #PrideMonth #Pride."

Twitter



Social Media

Instagram posts focus on visual displays to communicate moments, evoke feelings, and demonstrate a connection. This format can also be used to share infographics or poster-type communications.

The example below is from WeRNative⁴⁶ and includes an image with a cellphone with the crisis text line on the screen. The text reads, "Life is a beautiful thing, but it can become challenging at times. Having someone to listen to how you feel can help navigate these situations and we've partnered with the @crisistextline to do just that. So if you are feeling alone, know that you are cared for and loved. For support, text NATIVE to 741741 for free 24/7 crisis counseling. #WeNeedYouHere #MentalHealthAwarenessMonth."

Instagram



Appendix A

Risk Communication Tools & Examples



Social Media

TikTok	<p>TikTok is an app for making and sharing short videos. Some folks have used TikTok to convey important messages about mental health. Check out the resource below to learn more about how professionals use TikTok to share these messages.</p> <p>Wylde, K. (2020, May 19). What to know about all the mental health advice you're seeing on TikTok. Bustle. https://www.bustle.com/p/mental-health-videos-on-tiktok-reach-people-where-theyre-at-22901756</p>
Snapchat	<p>Snapchat⁴⁷ is a popular messaging app that lets users exchange pictures and videos (called snaps) that are meant to disappear after they're viewed. This is the "Here for You" feature in Snapchat.</p> <p>"Here For You provides proactive in-app support to Snapchatters who may be experiencing mental health or emotional crisis or who may be curious to learn more about these issues and how they can help friends dealing with them. Here For You shows safety resources from local experts when Snapchatters search for certain subjects, including those related to anxiety, depression, stress, grief, suicidal thoughts, and bullying."</p>
YouTube	<p>YouTube is a free video-sharing website that makes it easy to watch online videos. You can even create and upload your videos to share with others.</p> <p>WeRNative's Youtube channel⁴⁸ offers several resources for Native youth and young adults. BRAVE is a series on their channel that follows the journeys of Alex, Chris, and Benny as they share their stories of growth and maturity. The videos provide examples of how to address difficult situations as a friend, a partner, and community member.</p>

Radio Announcements

Radio announcements are a great way to get out information quickly and regularly. Creating a public service announcement (PSA) specifically toward a group in your community can help members feel seen and know exactly where to get services. Below is an example of a suicide prevention radio spot encouraging the public to learn and recognize the warnings for suicide in others and seek help. Your organization may develop something similar with where to get help in your area should you recognize any of the signs mentioned.

It's Up to Us. (2022). It's Up to Each One of Us. <https://up2sd.org/community-bulletins>

Infographics

Infographics are a way to communicate information visually. Your organization may consider posting these in your office building or community gathering spaces. They can also be shared through social media outlets such as Instagram or Facebook. The example below offers information about intimate partner violence.

Centers for Disease Control and Prevention. (n.d.). Prevent Intimate Partner Violence. <https://www.cdc.gov/violenceprevention/pdf/infographic/ipv-prevention-infographic.pdf>

Tools to help create your materials

Graphic design platforms can be used to create social media graphics, presentations, posters, documents, and other visual content. Some apps may already include templates for users to adapt.

Appendix A

Risk Communication Tools & Examples

Community Flyers / Billboards

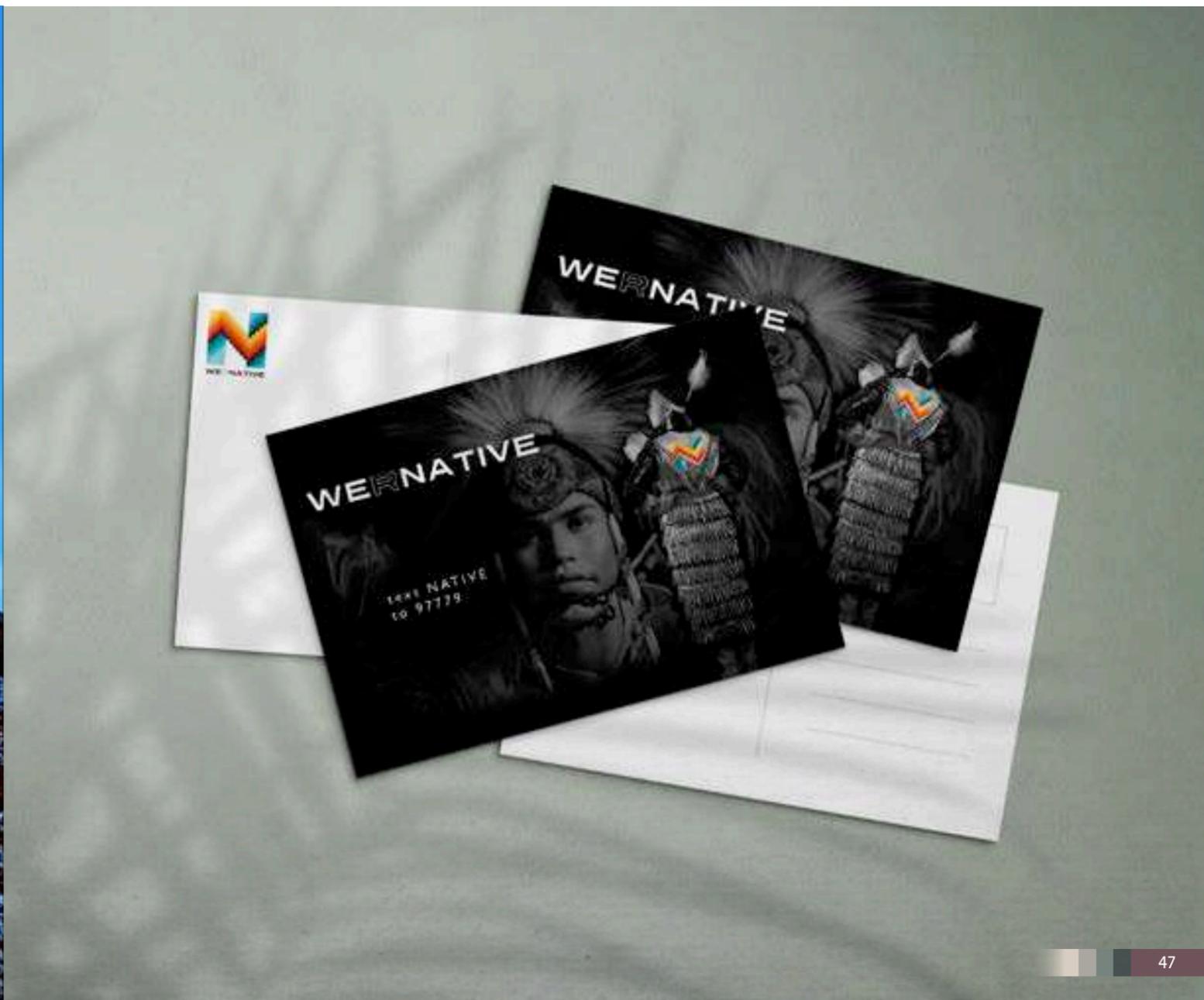
Flyers posted in community gathering places or mailed to individuals can also be an excellent way to reach community members who may not have access to the internet or be tech-savvy. Billboards can be expensive; they reach a large audience and can make a statement but the information they convey is limited.

See an example billboard by The Native Justice Coalition⁴⁹ below:



Postcards

Postcards can include reminders, as well as information for how to access help when needed. Postcards are a great option for community members who may not use social media or have reliable internet access. Many communities use postcards to distribute information at community health fairs or other gatherings.



Appendix B

Sample One-Month Communication Template for Suicide Risk Reduction

Message: Connect relatives in need with suicide risk reduction supports

Groups / Target Audience: Adolescents, Parents / Guardians, LGBTQ and Two-Spirit Community Members

Communication Objectives:

1. Reduce the stigma associated with mental health care seeking within the broader Tribal community and for certain groups facing higher risk of suicidality.
2. Connect Tribal community members with culturally congruent services for both emergent and ongoing support needs.
3. Ensure messaging affirms diverse members of the broader Tribal community and promotes help seeking, particularly among LGBTQ and Two-Spirit community members.

Strategies:

Poster Strategies - Provide a clear message with how to connect to support resources.

Pamphlet Strategies - The aim of a pamphlet is to provide details around the signs that individuals and community members should look for if they feel that an individual may be struggling with their mental health. In addition, the pamphlet can offer helpful phone numbers and next steps for seeking help.

PSA Strategies - The aim is to reduce the stigma associated with mental health issues within the Tribal community, connect those in need to meaningful sources of support, and ensure community members know these services are inclusive and non-discriminatory. Based on recommendations from the National Action Alliance for Suicide Prevention,⁵⁰ PSAs can:

- Provide positive messages
- Articulate concrete and realistic actions
- Give examples of effective efforts
- Include personal stories of coping, resilience, and recovery
- Highlight effective treatments and where to find them
- Offer stories of people helped by particular services
- Broaden understanding of the services provided through descriptions of program accomplishments or successes

PSAs include language that demonstrates that “we care for all Tribal community members;” is direct about suicide risk yet respectful of the serious nature of the subject; and offers access to responsive, culturally appropriate services for those in need, in keeping with recommendations from the American Foundation for Suicide Prevention.⁵¹

PSAs acknowledge that LGBTQ and Two-Spirit community members experience prejudice, stigma, and discrimination for their sexual orientation and/or gender identity, above and beyond what they may experience as American Indians and Alaska Natives. This may place these community members at higher risk for depression and other mental health issues that can in turn raise the risk of suicide. To reduce this risk, we follow the guidelines of the American Foundation for Suicide Prevention⁵² by promoting:

- Increased family and community acceptance and affirmation of LGBTQ and Two-Spirit identity
- Efforts to reduce anti-LGBTQ and Two-Spirit stigma and prejudice
- Efforts to reduce bullying and other forms of victimization
- Meaningful and respectful access to LGBTQ and Two-Spirit-affirming physical and mental health care
- Improved legal protections from discrimination to promote wellbeing in our LGBTQ and Two-Spirit community

Tactics

1. Use multiple types of communication channels (i.e., social media, posters, pamphlets, and radio PSAs) to ensure a broad level of engagement across age groups, genders, and sexual orientations.
2. Provide written, visual, and audio modes of communication for a variety of audiences who may have different learning and communication styles.
3. Establish a weekly plan for dissemination of information across the chosen communication channels and modes.
4. Identify select team members to disseminate information to ensure regular, consistent communication.
5. Identify community champions (i.e., Tribal leaders, Elders, youth advocates, parents, LGBTQ and Two-Spirit advocates) who can support messaging and provide leadership in confirming community norms.
6. Address the intersectionality of Tribal community members: We are all complex individuals who have different identities and needs.

Appendix B

Sample One-Month Communication Template for Suicide Risk Reduction

Roles and Responsibilities:

Establishing roles and responsibilities for the communication plan will help make sure the campaign rollout goes smoothly, and any adjustments to the plan or process can be easily incorporated. The following roles are based on this communication template; Tribal teams may identify other roles as needed depending on the structure of their team, as well as community context.

1. **Team Lead(s)** – It helps to have one or two team leaders willing to take on the role of coordinating across teams.
2. **Content Development Lead** – Identifying one person on the team to lead the message development and confirm with Elders, behavioral health experts, and other key stakeholders can support consistent, accurate, and effective messaging.
3. **Social Media Manager and Contact** – Social media takes time and expertise, and having a team member who owns this role can help ensure it is managed efficiently and respectfully.
4. **Content Design Manager** – Having a team member who can design the campaign content and adjust as needed can be very helpful as the campaign unfolds.
5. **Public Service Announcement Planner** – Coordination of Tribal leaders, youth, parents, and Elders who are going to support the media efforts takes time and graciousness. It helps to have a team member designated for this role.
6. **Outreach and Engagement Coordinator** – Developing a plan for dropping off campaign materials is key and having someone ready to implement the plan is equally important.

Evaluation Approach:

To assess these activities, plan to conduct ongoing monitoring in collaboration with Tribal partners at the individual and community levels to assess process and performance measures. Plan to collect the following process measures on suicide risk communication dissemination: (1) Number of pamphlets distributed; (2) Number of behavioral health consultations requested over the one-month communication period; (3) Number of views on social media; (4) Number of “likes” or other endorsements on social media; (5) Number of followers over the one-month period; (6) Number of posters still in use at the end of week four. Track these measures one month before implementation, during the one-month period of dissemination, and one month after to assess overall effectiveness of the communication dissemination activities. Also, plan to conduct ten qualitative interviews with Elders, parents, youth, and members of the LGBTQ Two-Spirit community (40 interviews total) to assess their perceptions of the overall campaign, recommendations for improvements and next steps, and sense of community norms that may have been impacted by the campaign effort. Also, plan to interview Tribal behavioral health providers to assess the impact, if any, on their provision of services, requests for information and support, and interest in future collaborations. Finally, develop a report summarizing these findings for review and planning purposes.

Tagline: Talking with someone is the first step to healing. Let’s take care of one another. [Please note: communication strategists and other experts may support development of specific messaging. These experts can ensure that best practices in communication are consistently applied.]



Appendix B

Sample One-Month Communication Template for Suicide Risk Reduction

Work Plan

Week or Day	Focus	Mode	Frequency	Content / Notes
1	Social Media Campaign - Launch	Twitter, Instagram, Facebook	3 repeated posts	The program coordinator will post on the program's social media accounts, which will be shared / retweeted / liked by community champions and other Tribal health, behavioral health, and social service programs. Hashtags will include: #Tribalhealth #timetoheal #care4ourpeople
1	Pamphlet Drop - Launch	Trifold Pamphlet in provider offices	1 delivery per office of 50 copies	The program coordinator, with support from the program assistants, will develop tips on talking about suicide with Tribal community members. The pamphlet will include contact information for Tribal and regional suicide prevention resources. It will feature a "Meet the Providers" section with photos and bios of behavioral health support staff in the community with their experience working in culturally congruent ways. Program assistants will deliver copies to each Tribal office.
1	Public Service Announcement Broadcast - Launch	Tribal Radio Station and Tribal Website	3 times per day: morning, afternoon, evening 90 word limit	For All Tribal Members: [Tribal leader speaking] <i>In our Tribal community, we care about one another. As part of suicide prevention month, we want to make sure everyone knows where they can go for help when they need it most. If you are having thoughts about ending your life or if you know someone who needs help now, we have Tribal resources that can help. In an emergency, call [insert telephone number]. If you need to learn more, contact [insert telephone number]. Talking with someone is the first step to healing. Let's take care of one another.</i>

Week or Day	Focus	Mode	Frequency	Content / Notes
1	Poster Campaign - Launch	Hard copy 18"x24" posters	1 delivery per Tribal program of 2 copies	<ul style="list-style-type: none"> - Clear steps on how to talk with Tribal community members about suicide risk - Ways to get help - 10th grade reading level
2	Social Media Campaign - Youth	TikTok, Instagram	Daily posts	The program coordinator, youth advocates, and youth program leaders will post on the program's and individuals' social media accounts, which will be shared / retweeted / liked by community champions and other Tribal health, behavioral health, and social service programs, as well as youth-specific programs and groups. Hashtags will include: #Tribalhealth #healing4youth #care4nativeteens #cultureisprevention
2	Youth Pamphlet Drop - zine format with how to get help	"zine" created by community youth	1 delivery per school, 400 copies	The Tribal youth council will host a zine development drive and provide two iPads as raffle prizes. All teens who submit a zine article, poem, or drawing will receive one raffle ticket per submission. The Tribal youth council will select up to ten submissions for inclusion in the zine in the 2 months preceding the suicide risk reduction month. The zine will be published by the behavioral health team. The zine will be delivered to all schools by the suicide prevention program assistants. A major theme will include culture as prevention.

Appendix B

Sample One-Month Communication Template for Suicide Risk Reduction

Week or Day	Focus	Mode	Frequency	Content / Notes
2	Youth Public Service Announcement Broadcast	Tribal Radio Station and Tribal Website	3 times per day: morning, afternoon, evening 90 word limit	<i>For Teens and Young Adults: [teen/youth speaking] As teenagers, we're still figuring things out, including how to deal with feeling overwhelmed. We can get help for depression, and finding help in line with our cultural teachings is easier than ever. If you are having thoughts of ending your life, we have Tribal resources that can help. It's okay to reach out and talk to someone. In an emergency, call [insert telephone number]. If you need to learn more, contact [insert telephone number]. Reaching out to begin talking with someone is the first step toward healing. Let's take care of one another. It's our way.</i>
2	Youth Poster Campaign	Hard copy 18"x24" posters	1 delivery per Tribal program of 2 copies	<ul style="list-style-type: none"> - Specific resources available to teens and young adults within the Tribal community - Steps to access resources - 8th grade reading level ; youthful approach to conveying information
3	Social Media Campaign - Parents	Facebook, Twitter	5 posts per day, 3 days per week	Program coordinator, parent advocates, and community leaders will post on the program's and individuals' social media accounts, which will be shared / retweeted / liked by community champions and other Tribal health, behavioral health, and social service programs, as well as parent-specific programs and groups. Hashtags will include: #Tribalhealth #healing4youth #nativeparents

Week or Day	Focus	Mode	Frequency	Content / Notes
3	Pamphlet Drop - Parents	Trifold of how to talk to teens and young adults	1 delivery per Tribal office, 50 copies	The program coordinator, with support from the program assistants, will develop tips for parents on talking about suicide with youth. The pamphlet will include contact information for Tribal and regional suicide prevention resources. It will feature a "Meet the Providers" section with photos and bios of behavioral health supports in the community with their experience working in culturally congruent ways specifically addressing the needs of youth. Program assistants will deliver copies to each Tribal office.
3	Parent Public Service Announcement Broadcast	Tribal Radio Station and Tribal Website	3 times per day: morning, afternoon, evening 90 word limit	<i>For Parents: [Mom speaking] I used to have a hard time talking about things with my son. One day, he told me he was having thoughts of ending his life and needed help. I took it seriously, and called behavioral health. They got him help right away with culturally appropriate care that addressed my son's needs. If you need help now, call [insert telephone number]. To learn more about these services, contact [insert telephone number]. Reach out to begin the Talking with someone is the first step to healing. Let's take care of one another. It's our way.</i>
3	Parent Poster Campaign	Hard copy 18"x24" posters	1 delivery per Tribal program of 2 copies	<ul style="list-style-type: none"> - Clear steps on how to talk with teens and young adults about suicide risk - Ways to get help for children and other family members - 11th grade reading level

Appendix B

Sample One-Month Communication Template for Suicide Risk Reduction

Week or Day	Focus	Mode	Frequency	Content / Notes
4	Social Media Campaign - LGBTQ and Two-Spirit Community Members	Facebook, Twitter	5 posts per day, 3 days per week	Program coordinator, LGBTQ and Two-Spirit advocates, and community leaders will post on the program's and individuals' social media accounts, which will be shared / retweeted / liked by community champions and other Tribal health, behavioral health, and social service programs, as well as parent-specific programs and groups. Hashtags will include: #Tribalhealth #NativeLGBTQhealing #SupportLGBTQrelatives
4	Pamphlet Drop - LGBTQ and Two-Spirit Community Members	Trifold of how to connect to LGBTQ- and Two-Spirit-tailored services	1 delivery per Tribal office, 50 copies	The program coordinator, with support from the program assistants, will develop tips for LGBTQ and Two-Spirit community members on the substantive ways Tribal behavioral health services are available to support the unique issues Native LGBTQ and Two-Spirit community members face. The pamphlet will include contact information for Tribal and regional suicide prevention resources specific to LGBTQ and Two-Spirit community members. It will feature a "Meet the Providers" section with photos and bios of behavioral health supports in the community with their experience working in culturally congruent ways with members of the Tribal LGBTQ and Two-Spirit community. Program assistants will deliver copies to each Tribal office.

Week or Day	Focus	Mode	Frequency	Content / Notes
4	LGBTQ and Two-Spirit Community Members Public Service Announcement Broadcast	Tribal Radio Station and Tribal Website	3 times per day: morning, afternoon, evening 90 word limit	<u>To Support LGBTQ Two-Spirit Community Members:</u> [LGBTQ Spokesperson speaking] <i>As Native people, we have our own ways, including a holistic approach to health. We know health includes our physical, emotional, and spiritual well-being. And we also know that it's important to make sure LGBTQ and Two-Spirit community members have meaningful access to mental health care. If you know someone who is having thoughts of ending their life or other mental health issues, or if you want to learn more, contact [insert telephone number]. Reaching out to begin talking with someone is the first step toward healing. Let's take care of one another. It's our way.</i>
4	LGBTQ and Two-Spirit Community Members Poster Campaign	Hard copy 18"x24" posters	1 delivery per Tribal program of 2 copies	<ul style="list-style-type: none"> - Provide tangible supports tailored to LGBTQ and Two-Spirit community member needs - Be an ally: Verbalize your support clearly and use messaging that promotes an inclusive environment that honors and respects diversity - Underscore the need for family support, meaningful social support, and providing a safe environment that includes diverse perspectives - Providing affirming support can save lives. Affirming gender identity and sexual orientation supports mental health. In many Tribal cultures, people with these identities had honored, specific roles in our communities. Is this true in your community? Express it to affirm LGBTQ and Two-Spirit community members and the inclusivity in your community

Appendix C

Sample One-Week Communication Template for Intimate Partner Violence Prevention

Message: Provide relatives in need with real-time support to stop intimate partner violence

Groups / Target Audience: Adolescents, Parents / Guardians

Communication Objectives:

1. Reduce the fear of helping to defuse a potentially violent situation within the broader Tribal community and for certain groups that experience intimate partner violence at higher rates.
2. Connect Tribal community members with appropriate services in emergency situations.
3. Ensure messaging affirms diverse members of the broader Tribal community.
4. Increase access to information on where to seek help.

Strategies:

Poster Strategies - The poster will note important phone numbers to call for those who know someone who may be experiencing intimate partner violence or those who are currently experiencing intimate partner violence.

Pamphlet Strategies - The pamphlet will provide information about intimate partner violence, signs of when to get help, and support services in the local area.

PSA Strategies - The PSA will identify how to get help during a difficult relationship.

Tactics:

1. Use multiple types of communication channels (i.e., social media, posters, pamphlets, and radio PSAs) to ensure a broad level of engagement across age groups, genders, and sexual orientations.
2. Provide written, visual, and audio modes of communication for a variety of audiences who may have different learning and communication styles.
3. Establish a weekly plan for dissemination of information across the chosen communication channels and modes.
4. Identify select team members to disseminate information to ensure regular, consistent communication.
5. Identify community champions (i.e., Tribal leaders, Elders, youth advocates, parents) who can support messaging and provide leadership in confirming community norms.
6. Address the intersectionality of Tribal community members: We are all complex individuals who have different identities and needs.

Roles and Responsibilities:

Establishing roles and responsibilities for the communication plan will help make sure the campaign rollout goes smoothly, and any adjustments to the plan or process can be easily incorporated. The following roles are based on this communication template; Tribal teams may identify other roles as needed, depending on the structure of their team, as well as community context.

1. **Team Lead(s)** – It helps to have one or two team leaders willing to take on the role of coordinating across teams.
2. **Content Development Lead** – Identifying one person on the team to lead the message development and confirm with Elders, behavioral health experts, and other key stakeholders can support consistent, accurate, and effective messaging.
3. **Social Media Manager and Contact** – Social media takes time and expertise, and having a team member who owns this role can help ensure it is managed efficiently and respectfully.
4. **Content Design Manager** – Having a team member who can design the campaign content and adjust as needed can be very helpful as the campaign unfolds.
5. **Public Service Announcement Planner** – Coordination of Tribal leaders, youth, parents, and Elders who are going to support the media efforts takes time and graciousness. It helps to have a team member designated for this role.
6. **Outreach and Engagement Coordinator** – Developing a plan for dropping off campaign materials is key and having someone ready to implement the plan is equally important.



Appendix C

Sample One-Week Communication Template for Intimate Partner Violence Prevention

Evaluation Approach:

To test the effectiveness of these activities, plan to conduct ongoing monitoring in collaboration with Tribal partners at the individual and community levels to assess process and performance measures. Plan to collect the following process measures on suicide risk communication dissemination: (1) Number of pamphlets distributed; (2) Number of behavioral health consultations requested over the one-week communication period; (3) Number of views on social media; (4) Number of “likes” or other endorsements on social media; (5) Number of followers over the one-week period; (6) Number of posters still in use at the end of week one. Track these measures one month before implementation, during the one-week period of dissemination, and one month after to assess overall effectiveness of the communication dissemination activities. Also plan to conduct ten qualitative interviews with Elders, parents, youth, and members of the LGBTQ Two-Spirit community (40 interviews total) to assess their perceptions of the overall campaign, recommendations for improvements and next steps, and sense of community norms that may have been impacted by the campaign effort. Also, plan to interview Tribal behavioral health providers to assess the impact, if any, on their provision of services, requests for information and support, and interest in future collaborations. Finally, develop a report summarizing these findings for review and planning purposes.

Tagline: Talking with someone is the first step to healing. Let’s take care of one another.

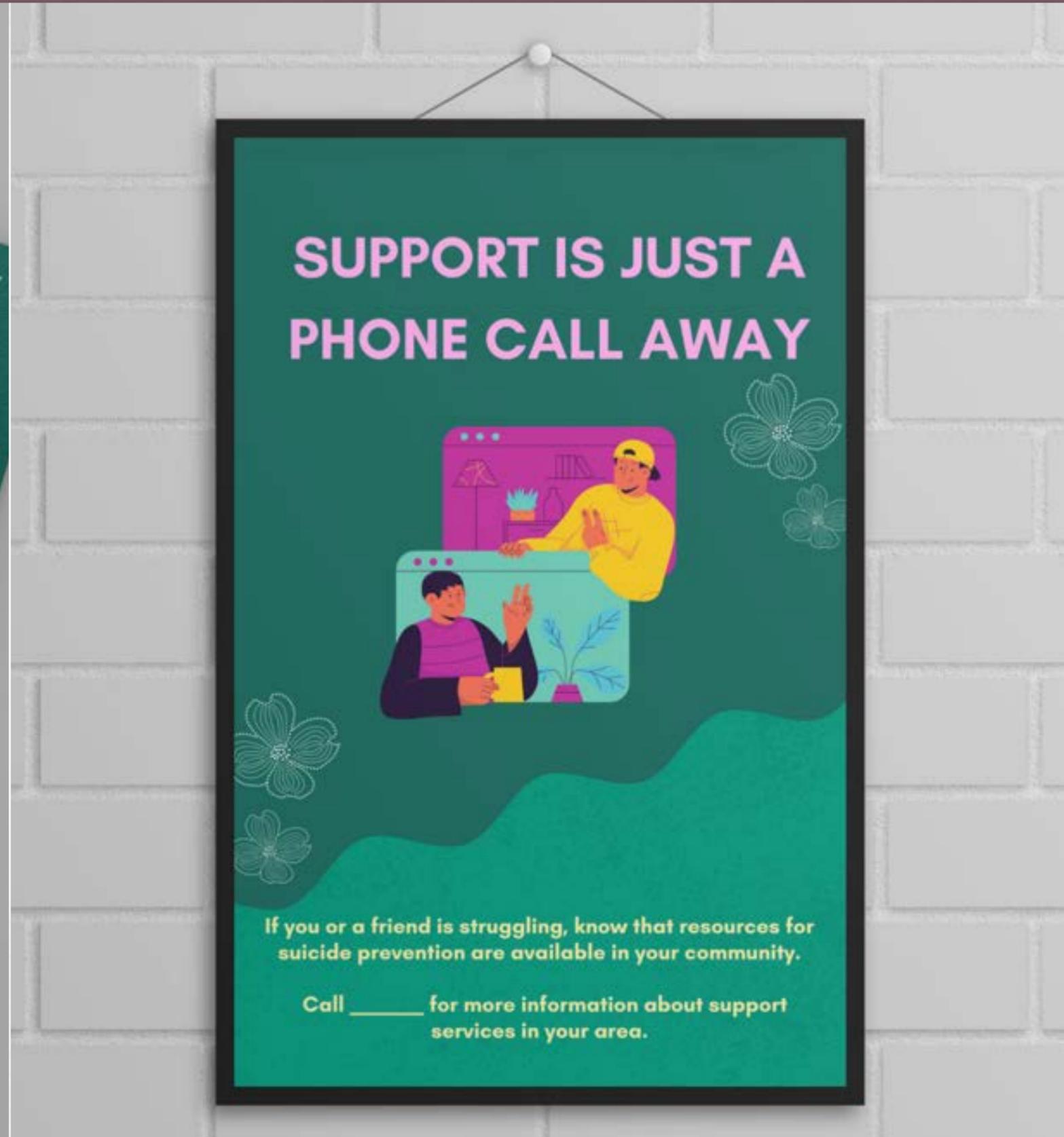
Work Plan:

Week or Day	Focus	Mode	Frequency	Content / Notes
1 + 2	Social Media Campaign - Launch	Twitter, Instagram, Facebook	1 post	Program coordinator will post on the program’s social media accounts, which will be shared / retweeted / liked by community champions and other Tribal health, behavioral health, and social service programs. Hashtags will include: #Tribalhealth #IPVprevention #here4you

Week or Day	Focus	Mode	Frequency	Content / Notes
3	Pamphlet Drop - Launch	Trifold Pamphlet in provider offices	1 delivery per office of 50 copies	The program coordinator, with support from the program assistants, will describe signs of IPV and how to get support within the local area as well as national phone numbers. The pamphlet will include language that emphasizes that it is okay to ask for help. It will feature a “Meet the Providers” section with photos and bios of behavioral health support staff in the community with their experience working in culturally congruent ways. Program assistants will deliver copies to each Tribal office.
4	Public Service Announcement Broadcast - Launch	Tribal Radio Station and Tribal Website	3 times per day: morning, afternoon, evening 90 word limit	<i>For All Tribal Members: [Tribal leader speaking] Relationships are not always easy. However relationships should provide a sense of safety, comfort, and joy. A relationship shouldn't feel controlling, abusive, or unkind. Abuse can happen in any relationship regardless of age, gender, race, sexuality, or income level. If you are in an abusive relationship, know there are people who are ready to support you, right here in the community. If you are someone who is causing harm in a relationship, would you treat your friend or colleague the way you treat your partner? To get support in building healthy relationship skills call _____. For crisis support call _____.</i>
5	Poster Campaign - Launch	Hard copy 18"x24" posters	1 delivery per Tribal program of 2 copies	<ul style="list-style-type: none"> - Clear message of support - Ways to get support - 10th grade reading level

Appendix D

Example Posters & Pamphlets



Appendix D

Example Posters & Pamphlets



Together, we can prevent Intimate Partner Violence and ensure we take a holistic approach to this issue.

CONTACT US
Phone
Address
Email
Crisis hotline

YOUR COMMUNITY IS HERE TO SUPPORT
What to do if you or someone you know is in a difficult relationship

WHO WE ARE
About organization

HOUSING SUPPORT
If you or someone you know is in an unsafe housing situation, please call to identify safe housing options. ...

HAVE SOMEONE TO TALK TO.
Therapists and counselors are trained professionals who have tools to support you either short-term or long-term. Therapy can be covered through health insurance. To find a therapist that's right for you or to learn more, call _____

Support can start with a phone call.
If you ever find yourself in a difficult situation or relationship know you are not alone.
You have a community that is ready to support you. Call _____ for more information about additional resources in your area.
For crisis support call _____

01
Have a number to call. If your partner is controlling or abusive, it's better to get help right away. Controlling or violent relationships usually get worse over time. Reach out to an organization you trust as soon as possible and put their number in your phone.

02
Build your support system. Should you feel that you are in a dangerous situation, are there people you can stay with? Are there people who would be able to help you safety plan for work and other daily activities?

03
It takes a community. You are not alone. For ongoing support, it may be helpful to schedule weekly sessions with someone you trust. That could be a counselor, therapist, a trusted community member, or a family member.

Appendix E

Sample Risk Communication Outline

The following example may act as a starting outline for a Tribe or urban Indian serving organization to develop their own risk communication plan. The outline is adapted from two existing communication plans from the New Hampshire Department of Health and Human Services⁵³ and the State of Arizona.⁵⁴



Section	Purpose / Content to Include
Introduction	Explain the purpose and overall goals of your plan. Outline the scope of your work, the situation, current policies, assumptions, and context for your risk communication efforts. Include a brief description of team members and outside collaborators, as well as important contact information.
Communication Objectives	Outline what Crisis and Risk Communication objectives you aim to achieve. Explain the target audience and what health risk topic you are addressing.
Organization & Assignment of Responsibilities	Beyond team composition, explain the main roles and responsibilities of each team member. Be specific and actionable, with concrete deadlines.
Identified Vehicles of Communication	Explain how and when you will communicate to your target audience. Justify why this mode of communication works well for the audience and the health issue you are aiming to address.
Reaching Special Populations	Identify how you will reach special subpopulations. There may be different modes of communication for different audience targets. Outline your language translation and accessibility considerations.
Information Collection & Dissemination	Discuss what sources of information you will use and what specific messages you want to share with your audience. Develop a timeline or work plan to share these messages (see Appendices B and C).
Monitoring & Analysis	Outline your monitoring and evaluation plan to show how you will gauge the success of your communication efforts (effectiveness of messaging, increased public knowledge, uptake in services, community feedback, etc.). Also note how you will manage rumors, misinformation, and respond to community thoughts and questions in real time.
Deactivation & Improvement	Explain how you will improve the next stage of communication efforts given the feedback and data you receive from monitoring and analysis. Also write out your deactivation strategy for acute crises and how you will sustain a long-term strategy for ongoing crisis communication.
Appendix	Include your sample plans, visuals, or communication resources here. You may also address special situations and unique policies or approvals here.

Appendix F

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Appendix F

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Appendix G

Additional References

Behavioral Health Services and Hotlines	
Description	Resource / Link
<p>Tribal Behavioral Health Services under Tribal Regional Behavioral Health Authorities (TRBHAs): List of TRBHAs are Tribal entities that have an Intergovernmental Agreement (IGA) with the Arizona Health Care Cost Containment System (AHCCCS) administration; see next column. The primary purpose of this is to coordinate the delivery of comprehensive mental health services to all eligible persons assigned by the administration to the Tribal entity. Tribal governments, through an agreement with the State, may operate a Tribal Regional Behavioral Health Authority for the provision of behavioral health services to American Indian/Alaska Native members.</p>	<p>Arizona Health Care Cost Containment System. (2022). Tribal Regional Behavioral Health Authorities. https://www.azahcccs.gov/PlansProviders/FeeForServiceHealthPlans/ProgramsAndPopulations/TRBHA.html</p>
<p>Arizona Complete Health builds upon a tradition of excellence started by Health Net of Arizona and Cenpatico Integrated Care. Health Net of Arizona was founded in Tucson in 1981 as Intergroup of Arizona, and has a proud history of serving Arizonans statewide through Medicare Advantage, employer-based coverage, Marketplace and AHCCCS. Cenpatico Integrated Care began serving Arizonans in 2005, with a special focus on improving access to community-based behavioral health services and emphasizing person-centered, whole health care for individuals.</p>	<p>Arizona Complete Health. (2022). Crisis Intervention Services. https://www.azcompletehealth.com/members/medicaid/crisis-intervention-services.html</p>
<p>Ho-Chunk Nation Social Services: The mission of the Department of Social Services is to provide holistic preventive and protective services or referrals to each Tribal member, from the very youngest to the most elite of Elders. Their goal is to provide services in an effort to increase the self-sufficiency of the Tribal membership while maintaining the inherent traditions and customs of the Ho-Chunk Nation.</p>	<p>Ho-Chunk Nation. (2022). Social Services Department. https://ho-chunknation.com/government/executive-branch/social-services/</p>

Behavioral Health Services and Hotlines	
Description	Resource / Link
<p>The Forest County Potawatomi Community Advocate Program is available 24/7. Crisis phone line at (715) 478-7201. Office hours are Monday – Thursday, 7am – 5pm, or as needed for crisis intervention.</p> <p>All services are free and confidential. They are able to provide services to Forest County Potawatomi enrolled and Tribally affiliated members who have experienced past or present domestic violence / sexual assault. The program will assist other victims in finding appropriate resources to meet their needs to the best of its abilities.</p>	<p>Forest County Potawatomi. (n.d.) Community Advocate. https://www.fcpotawatomi.com/family-services/community-advocate/</p>
<p>Native American Connections offers substance use treatment including residential, outpatient, and integrated health services for substance use and co-occurring disorders. Licensed by the Arizona Department of Health Services in 1978, NAC has partnerships with over 45 different entities including all of the Arizona Medicaid Health Plans, T/RBHAs, Tribes, and Indian Health Services (IHS).</p>	<p>Native American Connections. (n.d.). Prioritizing Health & Wellness. Behavioral Health. https://www.nativeconnections.org/behavioral-health/</p>
<p>U.S. Department of Health & Human Services; MentalHealth.gov provides one-stop access to U.S. government mental health and mental health problems information. MentalHealth.gov aims to educate and guide organizations.</p>	<p>U.S. Department of Health & Human Services. (2022, February 28). Get Immediate Help. https://www.mentalhealth.gov/get-help/immediate-help</p>
<p>The Substance Use and Mental Health Services Administration (SAMHSA) National Helpline is a free, confidential, 24/7, 365-day-a-year treatment referral and information service (in English and Spanish) for individuals and families facing mental and/or substance use disorders.</p>	<p>Substance Use and Mental Health Services Administration. (2022, March 25). National Helpline. https://www.samhsa.gov/find-help/national-helpline</p>

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Additional References

Behavioral Health Services and Hotlines	
Description	Resource / Link
The National Alliance on Mental Illness (NAMI) HelpLine is a free, nationwide peer-support service providing information, resource referrals and support to people living with a mental health condition, their family members and caregivers, mental health providers and the public. HelpLine staff and volunteers are experienced, well-trained, and able to provide guidance.	https://www.nami.org/help Arizona example: National Alliance on Mental Illness. (2022). Find your local NAMI. https://www.nami.org/Find-Your-Local-NAMI/Affiliate?state=AZ
The National Suicide Prevention Lifeline is a national network of local crisis centers that provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, 7 days a week. They are committed to improving crisis services and advancing suicide prevention by empowering individuals, advancing professional best practices, and building awareness.	National Suicide Prevention Lifeline. (n.d.). Lifeline. https://suicidepreventionlifeline.org
The National Alliance on Mental Illness provides pointers on how to have conversations with adolescents and young adults about suicide.	Reid, J. (2021, November 08). How to Talk to your Teen about Suicide. National Alliance on Mental Illness. https://www.nami.org/Blogs/NAMI-Blog/November-2021/How-to-Talk-to-Your-Teen-About-Suicide
The American Foundation for Suicide Prevention describes risk factors for suicidality and warning signs for parents and caregivers to be aware of when concerned about their teen's well-being.	American Foundation for Suicide Prevention. (2022). Risk factors, protective factors, and warning signs. https://afsp.org/risk-factors-protective-factors-and-warning-signs

Behavioral Health Services and Hotlines	
Description	Resource / Link
24 hours a day, seven days a week, 365 days a year, the National Domestic Violence Hotline provides essential tools and support to help survivors of domestic violence so they can live their lives free of abuse. Note: this site features a "Leave this site safely" button where users "can quickly leave this website by clicking the "X" in the top right or by pressing the Escape key twice." This helps protect users and may be an important feature to consider when protecting community members seeking help for IPV.	National Domestic Violence Hotline. (n.d.). Domestic Violence Support. https://www.thehotline.org
RAINN (Rape, Abuse & Incest National Network) is the nation's largest anti-sexual violence organization. RAINN created and operates the National Sexual Assault Hotline in partnership with more than 1,000 local sexual assault service providers across the country and operates the Department of Defense (DoD) Safe Helpline for the DoD. RAINN also carries out programs to prevent sexual violence, help survivors, and ensure that perpetrators are brought to justice.	Rape, Abuse, & Incest National Network (RAINN). (2022). About the National Sexual Assault Telephone Hotline. https://www.rainn.org/about-national-sexual-assault-telephone-hotline
StrongHearts Native Helpline 1-844-7NATIVE (762-8483) is a safe domestic, dating and sexual violence helpline for American Indians and Alaska Natives, offering culturally appropriate support and advocacy daily in an anonymous and confidential manner. Callers reaching out after hours may use the telephone prompts to be redirected to The National Domestic Violence Hotline, a non-Native based 24-7 domestic violence helpline. Note: this site also features a quick escape for private viewing, through "Hit the ESC key at any time to hide this site."	StrongHearts Native Helpline. (2022). Home. https://strongheartshelpline.org
Serious behavioral health issues such as substance use disorders, mental health disorders, suicide, violence, and behavior-related chronic diseases have a profound impact on the health of American Indian/Alaska Native (AI/AN) individuals, families, and communities. Through its programs, the IHS Division of Behavioral Health addresses these issues and promotes the Indian health care system focus on integrated behavioral health and primary care treatment, while respecting the balance, wellness, and resilience of AI/AN people.	Indian Health Service. (n.d.). Division of Behavioral Health. https://www.ihs.gov/dbh/ Indian Health Service. (n.d.). Behavioral health. https://www.ihs.gov/communityhealth/behavioralhealth/

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Additional References

Behavioral Health Services and Hotlines	
Description	Resource / Link
Connect with the Veterans Crisis Line to reach caring, qualified responders with the Department of Veterans Affairs. Many of them are veterans themselves.	Veterans Crisis Line. (n.d.). Home. https://www.veteranscrisisline.net
What to Do if Hotlines Are Unavailable	
<p>Need Immediate Help in an Emergency?</p> <p>If you or a loved one is in immediate danger, calling 911 and talking with police may be necessary. It is important to notify the operator that it is a psychiatric emergency and ask for police officers trained in crisis intervention or trained to assist people experiencing a psychiatric emergency.</p>	
Consider the safe functions on computers and other technologies.	Technology Safety. (2018). Technology Safety Plan: A Guide for Survivors and Advocates. https://www.techsafety.org/resources-survivors/technology-safety-plan
Instant Messaging	
Managed by the Safety Net Project at the National Network to End Domestic Violence (NNEDV) , this blog discusses technology, privacy, and safety in the context of intimate partner violence, sexual assault, and violence against women.	<p>National Network to End Domestic Violence. (2017). Home. https://nnedv.org</p> <p>Technology Safety. (2022). Technology Safety & Privacy: A Toolkit for Survivors. https://www.techsafety.org/resources-survivors</p> <p>Technology Safety. (2022). Response to the COVID-19 Pandemic. https://www.techsafety.org/covid19</p>

Safety Planning Tools and Other Resources	
Description	Resource / Link
The Zero Suicide model is a comprehensive approach to suicide care that aims to reduce the risk of suicide for all individuals seen in health care systems. Zero Suicide represents a commitment to patient safety – the most fundamental responsibility of health care – and to the safety and support of clinical staff who treat and support suicidal patient.	Zero Suicide. (2021). Toolkit: Lead, Indian Country. https://zerosuicide.edc.org/toolkit/toolkit-adaptations/indian-country
<p>Your Healthiest Self - Wellness Toolkit:</p> <p>Each person’s “healthiest self” is different. We have different bodies, minds, living situations, and people influencing our lives. Each area can impact your overall health. This means we each have a unique set of health needs. Use these wellness toolkits to find ways to improve your well-being in any area you’d like.</p>	National Institutes of Health. (2021). Your healthiest self: Wellness Toolkits. https://www.nih.gov/health-information/your-healthiest-self-wellness-toolkits
CDC’s Intimate Partner Violence Resources	Centers for Disease Control and Prevention. (n.d.). Intimate Partner Violence Resources. https://www.cdc.gov/violenceprevention/intimatepartnerviolence/resources.html
CDC’s Adverse Childhood Experiences (ACEs) Resources	Centers for Disease Control and Prevention. (n.d.). Adverse Childhood Experiences (ACEs). https://www.cdc.gov/violenceprevention/aces/index.html

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Additional References

Safety Planning Tools and Other Resources	
Description	Resource / Link
<p>The National Coalition Against Domestic Violence (NCADV):</p> <p>Their mission is to lead, mobilize, and raise our voices to support efforts that demand a change of conditions that lead to domestic violence such as patriarchy, privilege, racism, sexism, and classism. They are dedicated to supporting survivors and holding offenders accountable and supporting advocates.</p>	<p>White, R., & Zorza, J. (2010). Safety plan for a friend, relative, or co-worker who is being abused by an intimate partner. Safety Plan Friends and Family. https://ncadv.org/safety-plan-friends-and-family</p> <p>National Coalition Against Domestic Violence. (2022). COVID-19 and Domestic Violence. https://ncadv.org/covid-19-and-domestic-violence</p>
Health care Screenings as Possible Points of Contact	
<p>The U.S. Preventive Services Task Force is an independent, volunteer panel of national experts in prevention and evidence-based medicine. The Task Force works to improve the health of all Americans by making evidence-based recommendations about clinical preventive services such as screenings, counseling services, and preventive medications. All recommendations are published on the Task Force's Web site and/or in a peer-reviewed journal.</p>	<p>U.S. Preventive Services Task Force. (2021). A & B Recommendations. https://uspreventiveservicestaskforce.org/uspstf/recommendation-topics/uspstf-and-b-recommendations</p> <p>Highmark West Virginia. (2021). Adult Preventive Health Guidelines. https://content.highmarkprc.com/Files/Region/hwvbcbs/EducationManuals/ClinicalGuidelines/guideline-19-64.pdf</p> <p>American Academy of Family Physicians. (2020, June 8). Adult Preventive Health Care Schedule: Recommendations from the USPSTF. https://www.aafp.org/dam/AAFP/documents/journals/afp/USPSTFHealth-CareSchedule2020.pdf</p>
<p>CDC Cancer Screenings</p>	<p>Centers for Disease Control and Prevention (CDC). (2021). Cancer Screening Tests. https://www.cdc.gov/cancer/dcpc/prevention/screening.htm</p>

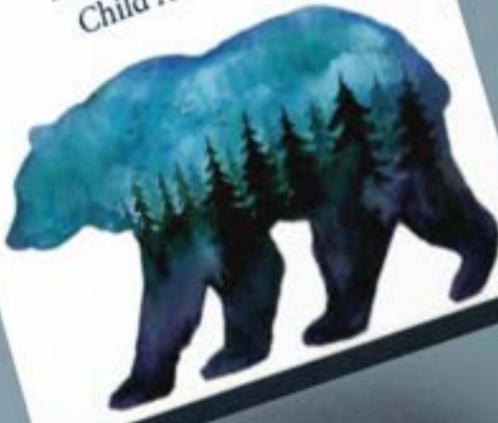
Safety Planning Tools and Other Resources	
Description	Resource / Link
<p>National Cancer Institute at the National Institutes of Health</p>	<p>National Cancer Institute. (2022). Screening Tests. https://www.cancer.gov/about-cancer/screening/screening-tests</p>
<p>CDC Sexually Transmitted Infection (STI) Screenings</p>	<p>Centers for Disease Control and Prevention. (2021). Sexually Transmitted Infection Treatment Guidelines, 2021. https://www.cdc.gov/std/treatment-guidelines/screening-recommendations.htm</p> <p>Centers for Disease Control and Prevention. (n.d.). 2021 STI Treatment Guidelines. https://www.cdc.gov/std/treatment/default.htm</p>
Other Resources for General Risk Communication	
<p>Substance Abuse and Mental Health Services Administration. (2019). Communicating in a Crisis: Risk Communication Guidelines for Public Officials. https://store.samhsa.gov/product/communicating-crisis-risk-communication-guidelines-public-officials/pep19-01-01-005</p>	
Suicide Prevention Communication	
<p>Hill, N. T. M., Robinson, J., & Rice, S. (2019, January 31). Safe Communication about Suicide in the Digital Age. Psychiatric Times. https://www.psychiatrytimes.com/view/safe-communication-about-suicide-digital-age</p>	
<p>Suicide Prevention Resource Center. (2019). Strategic Communication Planning. https://www.sprc.org/resources-programs/strategic-communication-planning</p>	
Child Welfare Communication	
<p>Child Welfare Information Gateway: https://www.childwelfare.gov/topics/preventing/promoting/protectfactors/protective-factors-toolkit/</p>	
<p>Arizona Department of Child Safety. (2021). Indian Child Welfare Act. https://dcs.az.gov/parents/indian-child-welfare-act-icwa</p>	

Appendix H

Example Resources from the Bad River Zhawenindig Program Services

Zhawenindig Program Services
53755 Oak St.
P.O. Box 58
Odanah, WI 54861
715-682-7151

Domestic Abuse
Crime Victim Services
Legal Advocate
Victims of Crime Act (VOCA)
Ikwewag Advocate
Child Advocate



The Bad River Zhawenindig Program
Domestic & Sexual Abuse
VOCA-Victims of Crime Act
&
Crime Victim Services

The Zhawenindig Program Services offers 24-hour crisis response, personal advocacy, child advocacy, information and referrals, cultural healing, handicap accessible services, community outreach and prevention education.

We are here to help you identify the best choices for you.
We will help you look at the risks and benefits of those choices without pressure or judgement.
We will not pressure you into doing anything you aren't ready to do.
Confidentiality is our highest priority.
We are here to listen and support you!



Giga-wiidookoon Virtual Connections
On Mondays, March 15, or March 29, 2021
from 1:30 p.m. – 3:30 p.m. call or text 715-292-8453

The Giga-wiidookoon virtual sessions are designed to connect victims and survivors with an advocate who will listen.

Before you call/text make sure you are in a safe location. Make sure to delete the call number/text message afterwards. Your safety is priority!

Through this connection the advocate may provide options and explanation of services or referrals to aid in your support and healing.

715-292-8453 every other Monday in March!
Violence is NOT an Anishinabe tradition!

For information call or text



Appendix H

Example Resources from the Bad River Zhawenindig Program Services

WHAT'S HAPPENING OVER THERE?
Zhawenindig Program Services
Community Connection Drive Thru

WHEN
Tuesday, November 9, 2021
From 11:00 a.m. thru 1:30 p.m.

WHERE
Zhawenindig Program Services Building
53755 Oak Street, Odanah

WHY
We will be offering information on the services provided in the Zhawenindig Program Services building.
To include what services are provided by which staff member.
This connection to the community will aid you regarding what is available if you are a victim of domestic abuse, family violence, sexual assault, cultural abuse, spiritual abuse, harassment, or are victimized by a criminal act or civil issue.
For more information feel free to call **715-682-7151**

For



SEVEN DIRECTIONS
A CENTER FOR INDIGENOUS PUBLIC HEALTH



Great Lakes Inter-Tribal Epidemiology Center
A program of Great Lakes Inter-Tribal Council, Inc.