MENTAL HEALTH RESPONSE TO VIOLENCE GUIDEBOOK





MESSAGE FROM THE EXECUTIVE DIRECTOR

In 2022, the Sikh community commemorated the tenth anniversary of the mass shooting at the Sikh Temple of Wisconsin in Oak Creek, Wisconsin, and the first anniversary of the mass shooting at the FedEx facility in Indianapolis, Indiana. Unfortunately, sangats across the country continue to face violence and traumatic events, from daily bullying to senseless murders.

As a national Sikh American impact organization, we are committed to building capacity and resources to provide our community with tools and approaches so they can engage in self-care and navigate these traumatic experiences in the short and long term. As SALDEF has responded to these incidents and countless others for over twenty-five years, we have been struck by the continuing need for mental health support as part of a comprehensive set of victim services and the need to build a mental health infrastructure. Our hope is these resources will both serve the Sikh and Punjabi community and be a model for use by other communities in similar situations.

We are thankful to The Asian American Foundation, for their support of this project; the Sikh Healing Collective, including Dr. Puni Kalra, Dr. Razia Kosi, Dr. Jasvir Kaur Singh, and Aparna Battacharya, for lending their expertise; the staff and volunteers at SALDEF, for their dedication to building a stronger community; and the families that continue to find support in the message of the Gurus and the spirit of chardi kala.



Kiran Kaur Gill Executive Director SALDEF

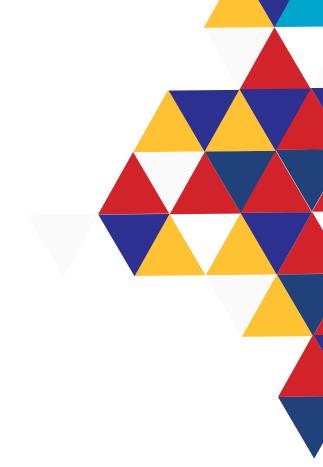


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This document provides additional guidance to the Mental Health Response to Violence/Traumatic Event Roadmap. While different violent or traumatic events may require specific responses, this roadmap provides an overview of how organizations and advocacy groups can better prepare and respond to the mental health needs of their staff and constituents. This is especially important for Asian American organizations because of the well-documented history in the community with stigma against accessing mental health services and the lack of culturally competent trauma therapists (Chaudhry & Chen, 2015; Masuda & Boone, 2011). The detailed guidance to the roadmap is organized by the different types of organizations and the timeline of responses. This roadmap is designed as guidance, with a chronological order of priorities. However, the assessment of available resources and the severity of the incident will determine the most appropriate order of responses for the crisis. Thus, it is critical for organizations to review and discuss the roadmap prior to a violent or traumatic event.

This resource manual is a collaboration authored by four South Asian female community leaders. Psychologist Dr. Puni Kalra and Pharmacist Dr. Jasvir Kaur Singh are the co-founders of the Sikh Healing Collective, a mental health relief effort that was born out of the need to support the Sikh community after the mass shooting at the Sikh Temple of Wisconsin in Oak Creek in August 2012.

Dr. Razia Kosi was the founder and Executive Director of Counselors Helping (South) Asians, Inc. (CHAI) from 2001-2014, an organization dedicated to ending mental health stigma and creating culturally and linguistically competent mental health materials. CHAI, under the leadership of Dr. Kosi, collaborated with the Sikh Healing Collective to co-author mental health educational documents that were used in the response to the Oak Creek shooting. Aparna Bhattacharyya is a community-based advocate and since 1998, she has served as the Executive Director of Raksha, a comprehensive non-profit organization providing support to the South Asian community in the Atlanta metro area. She has responded to a number of crisis incidents in Atlanta. This roadmap represents the collective experiences and expertise of these four community leaders. It is their hope that this will support the mental health needs of the Asian American community in their most vulnerable times.

DEFINITIONS OF TERMS IN THE ROADMAP -DIFFERENT TYPES OF ORGANIZATIONS:

National Organizations/Advocacy Groups. This is any group whose focus is to support a particular community, based on race/ethnicity/culture/religion, and specifically for the Asian American community. For this document, the examples are primarily South Asian. The following are examples of National Organizations/Advocacy Groups:

- Sikh American Legal Defense and Education Fund (<u>SALDEF</u>)
- <u>Sikh Coalition</u>
- <u>United Sikhs</u>
- South Asian Americans Leading Together (<u>SAALT</u>)
- Division on South Asian Americans
 (DoSAA)
- <u>Stop AAPI Hate</u>

Mental Health/Crisis Organizations.

There are many mental health and crisis organizations who are helpful in response to a crisis as well as educating the community about mental health. The following are examples of these types of organizations:

- The <u>American Red Cross</u>
- National Alliance on Mental Health (<u>NAMI</u>)
- Local health departments
- Sikh Family Center (<u>SFC</u>)

Local South Asian Organizations. There are hundreds of local South Asian organizations throughout the country. Their roles can serve to unite the community through cultural, religious, or language-based community events. Many organizations who serve the South Asian community may focus on a particular community need, such as preventing domestic and intimate partner violence, supporting youth groups, or organizing worker rights. The following are some examples of these types of organizations:

- <u>Raksha</u> (Atlanta)
- <u>Ashiyanna</u> (Maryland/Virginia/ Washington,DC)
- Desis Rising Up and Moving (<u>DRUM</u>) (New York)

DEFINITIONS OF TERMS IN THE ROADMAP -TIMELINE OF RESPONSES:

Prior to a Traumatic Event. The time to prepare for a response to a traumatic event or normalize conversations about mental health is BEFORE a traumatic event happens. This time frame starts NOW and is ongoing.

Immediately After a Traumatic Event. The exact timeline for this may vary, but this generally begins minutes after a violent attack and continues throughout the first several days. This phase can be up to a week or longer depending on the steps recommended.

Intermediately After a Traumatic Event. Some of the steps recommended in "Immediately After a Traumatic Event" may continue into this phase. Other steps may begin after the immediate concerns and needs are addressed. This phase may not be as intensive as the first couple of weeks, but it is important to stay focused on the ongoing needs of the community and prepare for longer-term healing. The time frame for this can start a few weeks after the event and continue for several months.

Long-Term and Ongoing After a Traumatic Event. This phase can start a few weeks after the traumatic event and can continue for up to one year. In some cases, the follow-up can go on for several years. This phase allows for the opportunity to implement longer-term community and collective healing and policy change.



MENTAL HEALTH RESPONSE TO VIOLENCE/ TRAUMATIC EVENT ROADMAP

ORGANIZATION	PRIOR TO A TRAUMATIC EVENT	IMMEDIATELY AFTER A TRAUMATIC EVENT	INTERMEDIATELY AFTER A TRAUMATIC EVENT	LONG-TERM AND ONGOING AFTER A TRAUMATIC EVEN
NATIONAL ORGANIZATIONS /ADVOCACY GROUPS	Normalize discussions & practices supporting staff mental health & wellness	Gather demographics of the affected people	Support with funerals, fundraising, and basic needs	Track victims' family's needs
	Build staff resilience	Identify mental health, crisis responses & South Asian mental		Media management
	Update crisis response protocols to include mental health response			Remembrance planning
MENTAL HEALTH ORGANIZATIONS/ CRISIS RESPONSE ORGANIZATIONS	Connect with culture-specific organizations to increase cultural competence	Show up, listen, observe, and support	Co-lead discussions on mental health with community leaders	
	Offer trainings to national advocacy organizations & leaders	Confirm translated materials on mental health /trauma are available		
LOCAL SOUTH ASIAN ORGANIZATIONS	Participate in FBI trainings	Connect with local 9 estional		Track the needs of most
	Connect with local law enforcement	Identify local connections with law enforcement, mental heath supports, and faith groups	South Asian organizations to increase support and resources	impacted victims
	Create list of local resources			Track the data

Organizations under this heading are groups who relate to the affected group because of a shared identity, faith, or cultural ties. They may or may not have relationships with the local site or the people from the impacted community. The national organizations may have additional resources to raise awareness of the traumatic event, leverage media for public support, or have access to funding for immediate support. The national organizations may also help with long-term efforts to change policy or advocate for changes to prevent future violent attacks from occurring.

Prior to a Traumatic Event

Organizations that serve their community are drawn by the value of service and give selflessly towards the greater good. Serving the community is an important value and may feel in conflict with taking care of oneself. We propose in order to be of better service to the community, it is just as important to take care of oneself emotionally, physically, and spiritually. If practices are in place that prioritize individual health and wellness, a stronger and healthier collective work environment is created. A positive work environment builds higher levels of collaboration and trust among its team members, which ultimately allows the organization to better serve the community. This becomes especially true in times of crisis. Below are recommended practices to bolster the mental health and wellness of people within the organization prior to a traumatic event.

Normalize discussions and practices supporting staff mental health and wellness

- Talk about stress management in the workplace
- Commit to creating a workplace that is <u>less stressful and more</u> <u>engaging for employees</u>
- Support <u>leaders to model ways to take care of one's mental health</u> and wellness
- Éncourage <u>help-seeking behaviors</u>

Build staff resilience

- Dedicate time once per month in which staff have a half day to engage in wellness strategies. This will replenish staff and keep them prepared to support their community during a crisis. Ask them for suggestions of what they need most. Some examples of wellness strategies include providing:
 - Non-meeting days for staff to catch up on other work
 - Social time for team and community building
 - Time for meditation, exercise or team sports
 - Space for innovation and creativity expression
 - Experts to share information with staff about improving financial wellness, fitness and nutrition
 - Nutritious lunch options and potlucks
 - Massage therapist at the worksite for staff to receive massages
 - Permission for staff to leave a few hours early once a month for intentional self-care
- Access <u>Employee Assistance Programs</u> (EAP) to support staff mental health and wellness
- Utilize therapists to conduct sessions with staff to help them recognize unhealthy coping mechanisms, understand and identify symptoms of burnout, engage in self-care, and encourage healthy boundary-setting
- Identify staff strengths and develop a strategy of who to deploy during a crisis response. To reduce burnout, ensure that the same staff are not being used repeatedly.

Update crisis response protocols to include mental health response

- Establish or locate a national directory professionals who are culturally and linguistically competent (see below for links to websites for Asian and South Asian providers)
- Facilitate the connections between local groups and local health departments and local mental health agencies
- Encourage staff to participate in Mental Health First Aid Training
- Understand the work of the <u>National Alliance on Mental Illness</u> (<u>NAMI</u>) and integrate it into the organization
- Build relationships with mental health centers
- Participate in trainings on mental health
- Connect with local mental health hotlines and centers
- Ensure that all staff know critical mental health numbers. For example, contact the <u>National Suicide Prevention Hotline</u> (I-800-273-8255) for suicide or mental health crisis support or the new national crisis number #988 (similar to 911, but for mental health).

Immediately After a Traumatic Event

Right after a tragedy occurs, it is time to go into crisis mode and respond. The timeline for this response can be minutes to days after the tragedy. The people directly impacted by the tragedy or violent attack may still be in a state of shock, feel guilt from surviving, and experience a wide range of emotions. While people in national organizations will also feel a multitude of emotions, they are not directly affected which may give them the ability to respond from a more rational and logical mindset. Entering the community with this relatively detached perspective allows them to more easily collect relevant information that can assist the community in its healing. This does not imply people in national organizations will not have a strong emotional response to the traumatic event. In fact, it is expected that everyone who plays a role in supporting the community will have feelings in response to the tragedy. Their ability to recognize their emotional response and manage it effectively will determine how well and how long they can support the community.

Gather the demographics of the affected people. This information is about the community and having accurate information for the media and future support.

- Who is the group?
- What ties them as a community?
- What are their ages?
- What is their gender identity?
- Are members a part of the LGBTQIA+ community?
- What is their immigration status? How long have they lived in the US? (Recent, multi-generational in the US)
- What are their most commonly spoken and written languages?
- What is their English fluency? How comfortable are they receiving verbal and written information in English? This information will help to identify appropriate resources for those most impacted by the crisis.
- What are the neighborhoods in which they live?
- Where do they go to school, to worship, to meet their health care needs?
- What is the community's views/comfort with receiving mental health treatment?
- What is the community's history, relationship, and level of trust with local law enforcement and the legal system?
- What are the immigration concerns for families and community members most impacted by the tragedy?

Identify mental health, crisis resources, and South Asian mental health professionals. Reaching out to the local resources for mental health will bridge the healing in the community. Many local governments have mental health crisis teams and/or have partnerships with local health services. Connect with local and national South Asian groups to help identify South Asian mental health professionals. While it will be best to bring people locally to the site and community, the use of online and virtual telehealth platforms may also be an option. This strategy falls in BOTH the

"immediately" and "intermediately" after a traumatic event, meaning this begins right away and continues several weeks and months following the event. Websites for finding South Asian mental health professionals across the nation include the following:

- <u>https://asiansformentalhealth.com/</u>
- <u>https://www.asianmhc.org/</u>
- <u>https://www.asianmentalhealthga.com/resources</u>
- <u>https://www.browntherapistnetwork.com/</u>
- <u>https://www.humecenter.org/</u>
- <u>https://www.inclusivetherapists.com/</u>
- <u>https://www.mannmukti.org/</u>
- <u>https://southasiantherapists.org/</u>

If your organization has created a list of culturally and linguistically competent mental health therapists, ensure that the provider list is updated yearly.

- Confirm with each provider that they wish to remain on the list for the upcoming year
- Update provider contact information
- Encourage this to be an important project delegated to interns or volunteers

Immediately After a Traumatic Event

Following a crisis, you play a key role in the community and its healing. Taking time to care for yourself is not a luxury, but a necessity. Working yourself to mental and physical exhaustion will not help the community in the long run. It will cause burnout and you will not be giving the best of yourself to anyone. No one wins in this situation. It is critical to recognize symptoms and address them early.

Pour your own cup before giving to others. First and foremost, breathe, pause, attend to your own mental and physical state. Ask yourself the following questions to assess your current state:

- What is coming up for you emotionally?
- How are you addressing these emotional needs?
- How is your physical energy? How exhausted are you?
- How well are you sleeping these days? Is it a sufficient amount for the work demand or does it need to be increased?
- How is your cognitive state? How well are you able to stay focused? How clearly are you able to think?
- What activities are you doing to help recharge your batteries?
- How often are you asking others for help? Make sure that you are working closely with your team and communicating clearly about your needs and energy levels.

Identify the Victim Advocate. A victim advocate is a trained professional who provides support and assistance to victims of crime. Their responsibilities may include:

- Crisis intervention
- Emotional support
- Resources and referrals
- Information on victimization
- Assistance with Crime Victims Compensation application
- Information on legal rights and protections
- Information on criminal justice process
- Assist victims and their family members submit statements to the court
- Intervention with landlords, creditors, and employers on behalf of the victim
- Information on crime prevention
- Assistance with funeral/memorial arrangements
- Assistance with safety planning
- Assistance in navigating the medical systems

- You can search online for "Victim Services Unit" or "Victim Advocate Agency" and insert the name of the city or county in which the tragedy occurred
- Once you find your victim advocate, introduce yourself as a member of the community and share that you would like to help them as they support the victims
- If you find that the victim advocate is not approachable or an inappropriate fit for the community and/or family's needs, you may request a new one by asking their supervisor

Support with funerals, fundraising and basic needs. National organizations may have a larger reach to help with fundraising efforts, both within the impacted community and the broader public. When tragedy occurs, people want to help, and they reach out in various ways to support the members of the affected community:

- Donate money
- Donate food
- Donate clothing
- Donate items for basic needs (household and school supplies)
- Donate their expertise (doctors, therapists, language interpreter)

There is often a need for help with funeral arrangements and possible speakers for the funeral. Please note that with some religious practices, the funerals are held immediately after the occurrence of death, so this piece may fall in the "immediately" after the traumatic event. Community resources to help with funerals include:

- Office of Victims of Crime (OVC)
- <u>State Victim Compensation programs</u>

It is important to have fundraising links available for the community and a way to track any funds designated to support victims and their families. The following groups can help with these fundraising efforts:

- National Compassion Fund
- Local banks
- Local community foundations
- Non-profit organizations

To best assess the needs of the community and address them in a timely manner:

- Build relationships with the community members most impacted
- Inquire about their current challenges to identify gaps
- Identify and share resources to fill these gaps
- Continually reassess to ensure needs are being met
- Expect that the needs will change over time and vary by person and family
- Utilize handouts and videos to help community members identify what they are feeling
- Inform the community of their rights pertaining to the media so they feel protected and empowered

Long-Term and Ongoing After a Traumatic Event

The relationships and trust formed during the time of intense tragedy are meaningful to both the community impacted and the national organizations who serve them. While the national organizations may be ready to return to their daily work at the office, the healing and recovery for the survivors of the traumatic event has just begun. It is critical that the national organizations remain involved with the families and community after the initial few weeks following the tragedy. It strengthens the trust and allows reassessment of needs throughout the year ahead.

Track the victims' family's needs. Before getting involved with the families, you need to have permission to contact them following the immediate crisis. After you have their consent, stay involved with the families by calling or meeting them regularly. You will gain valuable information that will help you best support them.

- Contact the community leaders on a regular basis to receive updates on the families
- Ensure that you are protecting the victims' family's privacy and maintaining confidentiality of their stories. If you believe sharing their information will help others, seek permission from the family first. If they do not grant you permission to share their stories, photos, or any identifying information, you must honor their request, respect their dignity, and follow the confidentiality agreement
- Raise awareness among the government, policy makers, and the public to ensure needs are being met in the short and long-term
- Collect the relevant data to support future funding and policy change. Ensure that all data is de-identified

Media Management. Most local community groups will not have training with how to respond to the media. If you are a national organization that has received media training, use this skill to support the community. Examples of media training for nonprofits include <u>ReThinkMedia</u> and Institute for Public Strategies.

- Provide support and advice to victims' families on how to respond to the media and how to leverage the attention they are receiving
- Only speak to the media if you have been formally tasked with representing the community
- Only give statements when you are prepared with the facts
- Take the opportunity to be proactive and lead a narrative that best represents the community, rather than reacting to the media. Within this context, a narrative is defined as the different perspectives from which one shares their story. It can be from the side of the survivors, perpetrators, community leaders, or the various agencies that responded to the tragedy
- After gaining consent release forms, be sure to verbalize to survivors that they can revoke their consent at any time. Be warned that if you reuse images years later, it can be triggering for survivors

Remembrance Planning. In past tragedies, such as the one that occurred in 2012 at The Sikh Temple of Wisconsin in Oak Creek, the annual 6K Chardhi Kala Run has been a powerful remembrance and healing event. It speaks to the heart of Sikh beliefs and to the resilience of the community. It also serves as a reminder to the public to not forget the victims and to continue to advocate for change and safety for all people in the U.S.

- Work with the community to understand their vision and needs for their remembrance event
- Bring national focus to these remembrance activities
- Offer a toolkit or plans for communities across the country to partake in remembrance activities. This will bring a larger sense of community, unity and healing across the nation
- Partner with mental health professionals or victim advocates who have experience with trauma-informed practices to ensure survivors and community members have the support they need at this time

Remembrance events are healing events. Work with the community to understand their vision and needs. Be ready to help and support but do not take over.

MENTAL HEALTH/CRISIS RESPONSE ORGANIZATIONS SERVING ALL POPULATIONS

Organizations focused on mental health and crisis response, such as Red Cross and NAMI, are valuable to our society. Unfortunately, they are often underutilized by Asian Americans (Hoang & Lee, 2021). Having these organizations build trust with Asian American communities is an ongoing effort and the time to begin is BEFORE a mass violence attack. Some of the ways in which they can build bridges with the Asian American community include:

Actively collaborate with them at local health fairs Develop and distribute culturally and linguistically competent materials for them

Organize events in partnership with local community faith leaders Gain a greater understanding of the community's challenges and unmet needs

Find resources to meet community's identified needs

Prior to a Traumatic Event

Connect with culture-specific organizations to increase cultural

competence. If someone asked you about the "American" culture, would you have the same response as a person from the East Coast or West Coast, from the North or the South, from the Bible Belt or the Rust Belt? Would these terms even be meaningful to people who identify as American? Would an Italian American give the same response as a South Asian American? These examples highlight the layers of cultural identity and complexity across broad cultural terms. For local mental health and crisis organizations, it will be most helpful to engage in the following activities:

- Identify different religious and cultural groups in your community who are vulnerable and/or may have stigma around mental health
- Increase your foundational knowledge about the community so that members do not have to explain basic tenets about their culture and faith to you
- Identify the key leaders and the most influential/respected people in these groups (they are not always the same individuals)
- Understand their core values and belief systems

- Understand what is important to them within their religious and cultural identity, and how those values connect with death, funerals and burials
- Do not rely solely on the internet and books as these sources may only give you broader commonalities
- Foster deep relationships with these community members. This investment in time and effort will illuminate nuances and subtle differences that become critically important during a crisis

Offer training to national advocacy groups and leaders. When larger national mental health organizations offer trainings, be cognizant of who is in attendance and who is missing. How broadly are different organizations represented at these training? Similarly, be intentional about who you invite to your trainings and ensure that you are being as inclusive as possible. These trainings are a wonderful opportunity to connect and build NEW partnerships.

• Invite the leaders of national advocacy groups such as Sikh American Legal Defense and Education Fund (<u>SALDEF</u>)

MENTAL HEALTH/CRISIS RESPONSE ORGANIZATIONS SERVING ALL POPULATIONS

- Extend invitations to various Asian professional groups whose mission is to serve their communities, such as:
 - Asian American Advancing Justice (<u>AAAJ</u>)
 - South Asian Americans Leading Together (SAALT)
 - National Asian Pacific American Women's Forum (<u>NAPAWF</u>)
- More extensive lists of Asian American specific organizations can be found at:
 - The Asian American Foundation (<u>TAAF</u>)
 - National Council of Asian Pacific Americans (<u>NCAPA</u>)
- Including these leaders and staff from those organizations will contribute to them having a deeper understanding of mental health and will support their leadership during times of crisis

Immediately After a Traumatic Event

Show up, listen, observe, and support. Showing up after a tragedy is just as important as continuing to show up regularly in the weeks and months ahead. Your consistent presence and commitment are noted, and they help to build trust with the community.

- Listen to what is being said and observe which individuals and organizations the community entrusts
- Be a calm presence and be prepared to support the community in whatever ways they need at this time
- Regardless of your expertise and knowledge in this field, do not push your ideas about what you think the community needs. This is a time of being curious and empathetic, so listen more and ask open-ended questions while refraining from giving advice
- Wait for the community members to open up to you and invite you into their hearts. Do not fall into the temptation of taking urgent action and assume you know what is best for them. You must follow their timeline, not your own

• It is important for the community to feel ownership and empowerment over their healing process. Assume they are the experts in this situation and engage with them accordingly

Immediately and Long-Term After a Traumatic Event

Co-lead discussions on mental health with community leaders.

Community leaders are often well-respected and have a great deal of influence over their members. They may be the head priest or faith leader or the local medical doctor. As an outsider, it is important to build relationships with them. Help these leaders understand why you are there and how you can assist them in empowering their community after the tragedy. The community will more quickly recognize you as a credible source and ally when they see consistent partnership between you and their leaders.

Like many immigrant groups, Asian Americans have misperceptions and stigma around accessing mental health services. As you work alongside these local community leaders:

- Assess their understanding and attitudes about mental health
- When discussing mental health topics with them, speak about it in practical terms using clear and concise language
- Avoid using psychological jargon
- Do not minimize the value of the mental health field or mental health professionals
- Understanding of mental health varies among individuals based on their own beliefs, biases, and training. Asian American community members often defer to medical doctors and lawyers for their expertise, however, they may have their own assumptions or opinions about mental health topics which are not based on facts or deeper understanding about mental health

MENTAL HEALTH/CRISIS RESPONSE ORGANIZATIONS SERVING ALL POPULATIONS

The goal is for you to co-lead discussions about mental health topics with these local community leaders.

- Provide them with a platform to facilitate discussions with their community (see documents below)
- Each document is accompanied with a video (see links below). Watch the videos with the community leaders and ask them how you can together transmit these messages to their community
- Encourage them to utilize religious scriptures (Guru Granth Sahib), songs/hymns (shabads) or storytelling as a means to share the mental health concepts from the documents and videos with their community
- Help them translate these mental health concepts into a language that can be best understood by those most affected by the tragedy
- Inform them that these documents have been used in other communities after similar tragedies and they have brought relief to community members
- Empower them to support their community's healing and elevate their leadership during this difficult time

Confirm translated materials on mental health/trauma are available.

Below are the aforementioned materials explaining different mental health terms and concepts to support the community in its healing. Confirm that they are translated in the language and terms most easily understood by the community impacted by the tragedy. These documents were intentionally designed to be on a single page so that the English version is on one side and the Punjabi version is on the other side. Ensure enough copies are made so community members can take them home and share with others within their household.

Find English and Punjabi resources, including handouts and videos, at <u>saldef.org/mentalhealth</u>

Current topics include:

- I. Anxiety
- 2. Effective Coping
- 3. Grief and Community Healing
- 4. Grounding Techniques
- 5. Helpful and Harmful Phrases
- 6. Improving Sleep and Managing Intrusive Thoughts
- 7. Stress and PTSD
- 8. Supporting a Struggling Loved One
- 9. Supporting Children After a Tragedy
- 10. Survivor Guilt

LOCAL SOUTH ASIAN GROUPS/ORGANIZATIONS SERVING COMMUNITIES BY GEOGRAPHIC REGION

If you are a South Asian organization that focuses on serving the South Asian community in a specific geographic area, there are actions your group can take to prepare for tragedies that may affect your community. While you might think, "We only focus on cultural events, this is out of our area of expertise," your presence and work is valuable in building a sense of belonging, trust, and familiarity among those who attend your cultural events. If a crisis or traumatic event occurs, your community may have higher trust with members of your organization. You can serve as a critical bridge between your community and mental health or government agencies. Review and determine how you can be most helpful in the different stages.

Prior to a Traumatic Event

- Participate in trainings offered by the FBI such as <u>Community</u> <u>Awareness Presentations</u>
- Connect with local law enforcement to strengthen partnerships that will increase familiarity with your community members (i.e. invite them to your cultural events)
- Create a protocol for responding to mass violence and other traumatic events. <u>The National Mass Victimization Resource Center</u> is one resource
- Create a list of local resources and develop relationships with members of these organizations and government agencies

Immediately Following a Traumatic Event

- Identify people within local law enforcement, victim advocacy organizations, mental health organizations, and faith groups
- Locate tangible resources such as food, shelter, funding for basic needs
- Share list of resources with leaders of the impacted community
- Bring together smaller active groups within the community such as youth groups, women's groups, dance groups
- Hold daily briefings and strategy meetings (these can be shorter as time progresses)
- Create communication channels with key decision-makers (group texts)

Intermediately Following a Traumatic Event

• Connect local and national South Asian groups to increase avenues for fundraising and support

Long-Term and Ongoing After a Traumatic Event

- **Track the needs of the most impacted victims.** These needs will continue to change for the survivors and their families over time. It is important to check in regularly with each family to ensure that their needs are being met
- Track the data. Data helps inform funding decisions and provides a narrative for long-term policy change. Tracking both quantitative data (numbers of services provided, amount of money used, number of people impacted) and qualitative data (stories about the survivors and their families) will help support those directly impacted by the tragedy and many more in the future

In conclusion, the recommendations within this resource manual encourage conversations about mental health and the greater vulnerability of Asian American communities targeted by hate violence. The authors hope that no one will ever become a victim of mass violence. The protection of gun rights combined with the increased rates in hate violence across our nation, however, amplifies the need for us to be vigilant with safety protocols and compassionate with healing. For additional information or questions about the content of this document, please contact the authors. They are here to support you.

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AUTHOR BIOS



Aparna Bhattacharyya

Since 1998, Aparna Bhattacharyya has served as Executive Director of Raksha, an organization focused on healing, empowerment and justice for South Asian survivors of violence. She began her career as a victim advocate in Atlanta and helped coordinate the 1996 Olympic Crisis Response team. She has responded several community crises impacting the South Asian community in Georgia. She was a member of the Asian Americans Advancing Justice - Atlanta Survivors' Fund working group in response to the Atlanta Spa Shootings that took place in March 2021. She is a board member of Asian Pacific Islander Institute on gender-based violence and Advisory Board member for South Asian SOAR (Survivors, Organizations and Allies Rising). Much of Aparna's work is focused on gender-based violence in immigrant communities and providing training on the needs of underserved communities. She was a White House Champion of Change in May 2013 and received the Georgia Commission on Family Violence Gender Justice Award in 2006.



Puni Kalra, PhD

Puni Kalra has a PhD in Clinical Psychology. For nearly 30 years, she has worked with diverse ethnic and religious communities who have experienced trauma. In 2012, she co-founded the Sikh Healing Collective. This was a coordinated mental health relief effort that helped stabilize the Sikh community after a mass shooting took place in their house of worship that killed six community leaders. Dr. Kalra has also co-founded two organizations that were designed to support the education and professional training needs of South Asian psychologists: South Asian Psychological Networking Association (SAPNA) and the Division of South Asian Americans (DoSAA) within the Asian American Psychological Association (AAPA). These organizations collectively serve over 500 members worldwide. Dr. Kalra is currently in private practice where she provides executive coaching and consulting to global leaders spanning five continents and 20+ countries. She develops leaders across a wide range of industries and facilitates and consults on topics related to DEI, anti-racism, and anti-bias awareness within the judicial system. Dr. Kalra has been serving as adjunct faculty at the Center for Creative Leadership since 2010.

AUTHOR BIOS



Razia Kosi, EdD, LCSW-C

Dr. Kosi is the Coordinator of Culturally Responsive Practices and Anti-Racism Development in the Howard County Public School System in Maryland where she leads DEI initiatives. She is also a mental health professional working to end the stigma surrounding mental health in the South Asian (SA) community and was the founder of Counselors Helping (South) Asians, Inc.(CHAI). Additionally, Dr. Kosi is an adjunct professor in the doctoral program at the School of Education at Johns Hopkins University. Advocating for both mental health and education, she has been on executive boards for both national and local organizations serving the SA and AAPI communities, including Division of South Asian Americans (DoSAA) and Asian American Psychological Association (AAPA). She is also co-founder and current President of the Asian American Educators of Howard County. Dr. Kosi has a small private practice primarily serving SA and Muslim clients from varying racial and ethnic backgrounds.



Jasvir Kaur Singh, PharmD

Jasvir Kaur Singh has her doctorate in Pharmacy. Dr. Singh is the co-founder of the Sikh Healing Collective, a mental health relief effort that was created to meet the needs of the Sikh Community in response to the domestic terror that took place at the Sikh Temple Shooting in Oak Creek, Wisconsin in August 2012. She works as a clinical pharmacist and has participated in disaster relief efforts and medical missions in many countries around the world. Dr. Singh is a community activist and organizer. She is a board member of the Sikh Sewa Foundation of Chicago, Sikh Council of Interfaith Relations, and Sikh Religious Society of Chicago. Dr. Singh also spends her time as a counselor for various Sikh camps around the country. She teaches children about Sikh history, empowers children and young adults to be comfortable in their own skin, and encourages them to embrace their differences and build bridges through compassion.

MODEL RESOURCES: MENTAL HEALTH FOR THE SIKH/ PUNJABI COMMUNITY

When working with a community impacted by violence, it is important to provide them with culturally appropriate resources to support their mental health. While materials may be available in English, direct translations may lose impact due to a lack of linguistic or cultural nuance. These materials were prepared for use in the cultural and linguistic context of the Sikh American and Punjabi community with mental health experts. They may serve as a model for adaptation by organizations working in other communities. The videos are intended to be used in conjunction with written documents. Using one alone may result in an incomplete understanding by the impacted individual. Finally, using both forms of media improves the accessibility for users of all abilities.



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