



"Our families made strong through balance and support."

# Soboba Tribal Family Services

## October Newsletter

### Soboba Tribal Family Services is proud to welcome our new Director, Cathryn Leff



Cathryn L. Leff, M.A., Licensed Marriage and Family Therapist (LMFT) received her B.A. degree in Psychology from UCLA, M.A. degree in Counseling Psychology from Pepperdine University and PhD (ABD) in International Psychology with a concentration in Trauma Response from the Chicago School of Professional Psychology. Currently, she is

working on a PhD in Psychology with a concentration in Mental Health Policy and Practice at Northcentral University. She has been licensed as a Marriage and Family Therapist since 1996.

Previously, Ms. Leff worked for UCLA's Career Counseling Center as a Psychometrist, and as Social Worker for the Department of Children and Family Services, in Los Angeles, Orange and Riverside counties. Ms. Leff worked in Family Reunification, the Emergency Response program and as a Court Officer. Ms. Leff also worked as a Clinician for San Diego County Children's Mental Health, conducting psychological evaluations for children, and attending IEP meetings at schools with her recommendations.

Following her work with children, Ms. Leff worked at Tri-City Medical Center in Oceanside, conducting Psychiatric Evaluations for the Emergency Department, and at Ronald Reagan UCLA Medical Center as an Emergency Department Patient Liaison/Analyst.

Cathryn also has a Private Practice specializing in Trauma, Marriage/Relationship Counseling, Teens who engage in Self-Injury, Borderline Personality Disorder, Anger Management, ADD/ADHD, and Parenting issues with difficult children.

### Leading the Next Generation's Healthy Relationships

Wednesdays October 12<sup>th</sup> to December 14<sup>th</sup>  
12:00 – 2:30pm in Tribal Hall.

Soboba Tribal Family Services and the Soboba Cultural Center & Research Library are proud to announce *Healthy Relationships*, a class aimed at helping Native American Men & Women establish and maintain healthy, committed, long-term relationships. Couples with healthy relationships are better able to raise healthy children and families that are in better balance with each other and the world around them.

Please RSVP to Theresa Sam, Case Manager, Soboba Tribal Family Services at (951) 487-0283 or email at [tsam@soboba-nsn.gov](mailto:tsam@soboba-nsn.gov)

### From the Desk of Cathryn Leff

I am honored to have been chosen as the new Director of Tribal Family Services, and I hope that I can be of great assistance to you all. Since I am a licensed marriage family therapist (LMFT), I will be offering confidential counseling services, as well as anger management for those who may want help with the everyday problems of living, or to explore areas of personal growth. Please contact me if you have any questions in regards to these programs. The intake forms for adult and adolescent counseling are on the website under the "Counseling" tab. The anger management programs, no intake form is required.

Thank you for your patience as I adapt to this new role of Director of Tribal Family Services. Please stop by the Tribal Family Services office and introduce yourself! I am looking forward to meeting and working with you all.

Sincerely,  
Cathryn Leff, LMFT  
Director of Tribal Family Services

### Soboba Tribal Family Services

Director: Cathryn Leff  
Social Worker: Pending  
Case Manager: Theresa Sam  
Admin. Assistant: Catherine Gonzalez

Monday – Thursday 7:00am to 5:30 pm  
(951) 487-0283

## Emotional Safety Planning

A safety plan can help you stay safe while in an abusive relationship, while preparing to leave an abusive relationship or after leaving. Often people focus on planning around physical safety, but it's important to consider your emotional safety as well.

Emotional safety can look different to different people. Ultimately, it's about developing a personalized plan that helps you feel accepting of your emotions and decisions when dealing with abuse. Below are some ideas for how to create and maintain an emotional safety plan that works for you.

### Seek Out Supportive People

You deserve to feel safe while expressing yourself and your opinions. A caring person such as a trusted friend or family member can help create a calm space to think through difficult situations and allow for you to talk about your options.

### Identify and Work Towards Achievable Goals

Dealing with abusive situations can be very overwhelming and stressful. Taking one step at a time can be very helpful in overcoming larger tasks later. An achievable goal might be calling a local resource and seeing what services are available in your area. Remember, you don't have to do anything you aren't comfortable with right now, but taking small steps can help options feel possible when you're ready. Reading this page and looking for strategies to be emotionally safe is already a great first step.

### Create a Peaceful Space for Yourself

Designating a physical place where your mind can relax and feel safe can be a good option when working through difficult emotions. This can be a room in your house, a spot under your favorite tree, a comfy chair by a window or in a room with low lights. Whatever space works for you personally!

### Remind Yourself of Your Great Value

You are important and special, and recognizing and reminding yourself of this reality is so good for your emotional health. It is never your fault when someone chooses to be abusive to you, and it has no reflection on the great value you have as a person. You deserve to remind yourself of this! Writing messages to yourself about things you like about yourself or saying these things out loud every day can be a good way to start.

### Remember That You Deserve to Be Kind to Yourself

You deserve support from other people, but you also have a right to be kind to yourself, and remember that you are going through a very difficult time. Taking time to practice self-care every day, even if only for a few minutes, really creates space for peace and emotional safety. In the end, this can help you make the decisions that are best for you.

Excerpted in part from [www.loveisrespect.org/content/emotional-safety-planning/](http://www.loveisrespect.org/content/emotional-safety-planning/) For help creating a safety plan, visit <http://www.loveisrespect.org/for-yourself/safety-planning/>

## Storytelling at The Oaks

Monday - October 10, 2016

5:00 – 7:00 p.m.

Potluck, Weenie Roast & Smores

Dr. Victoria Bomberry is an enrolled member of the Muscogee Creek Nation. She is a licensed spiritual counselor, writer, researcher and educator.

*Soboba Cultural Center*

*Carrie Garcia, Cultural Program Manager (951) 487-2329  
carrieg@soboba-nsn.gov*

## What Is a Safety Plan?

A safety plan is a set of actions that help lower your risk of being hurt by your partner. It includes information specific to you and your life that will increase your safety at school, home, and other places you go on a daily basis.

### How Do I Make A Safety Plan?

Visit [www.loveisrespect.org/for-yourself/safety-planning](http://www.loveisrespect.org/for-yourself/safety-planning) and click on "Interactive Guide to Safety Planning".

**INTERACTIVE GUIDE**  
To Safety Planning

Take time to go through each section of the safety planning tool. You'll be asked a series of questions to help you identify your safety options. You can use this tool on your own, or you can use it with a friend or an adult you trust.

At the end of the process, you will have a printable version of your personalized safety plan that you can reference whenever you need it. You can read it online, print it immediately, or have a link sent to your email.

You will also be given a pocket-sized emergency contact card that you can fill out with phone numbers and keep with you. If you don't feel safe keeping the printed safety plan or emergency card with you, then you can still use the safety tips. Try to memorize at least one phone number of someone you can call any time.

You know your situation better than anyone else; trust your judgment and weigh your options before taking any steps.

Excerpted from [www.loveisrespect.org/for-yourself/safety-planning](http://www.loveisrespect.org/for-yourself/safety-planning)

## Soboba Tribal Halloween Carnival

Friday October 28<sup>th</sup>

6:00-9:00 pm at The Oaks

**Please bring your favorite potluck dish.**

**For more information please call  
Jennifer at (951) 654-1319**

## Suicide Prevention

Suicidal thoughts can affect anyone regardless of age, gender or background. Suicide is the 3<sup>rd</sup> leading cause of death among young people and is often the result of mental health conditions that affect people when they are most vulnerable. In many cases the individuals, friends and families affected by suicide are left in the dark, feeling shame or stigma that prevents talking openly about issues dealing with suicide.

### Crisis and Information Resources

- I'm in a crisis or am experiencing difficult or suicidal thoughts: National Suicide Hotline 1-800-273 TALK (8255)
- I'm looking for more information, referrals or support: NAMI HelpLine 800-950-NAMI (6264)

**If someone you know is in an emergency, call 911 immediately.**

If you or someone you know may need a mental health assessment, anonymous online tools are available. Learn more (<http://helpyourselfhelpothers.org/>) and help yourself or someone you care about.

## Risk of Suicide

According to the CDC, each year more than 41,000 individuals die by suicide, leaving behind thousands of friends and family members to navigate the tragedy of their loss. Suicide is the 10<sup>th</sup> leading cause of death among adults in the U.S. and the 2<sup>nd</sup> leading cause of death among people aged 10-24 in 2013.

**The suicide rate was highest in the Native American adolescent population for both males and females (34.3 and 9.9 deaths per 100,000 population, respectively);** these rates are increasing. For the full report from the CDC, visit <http://www.cdc.gov/nchs/products/databriefs/db241.htm>.

Suicidal thoughts or behaviors are both damaging and dangerous and are therefore considered a psychiatric emergency. Someone experiencing these thoughts should seek immediate assistance from a health or mental health care provider. Having suicidal thoughts does not mean someone is weak or flawed.

### Know the Warning Signs

- Threats or comments about killing themselves, also known as suicidal ideation, can begin with seemingly harmless thoughts like "I wish I wasn't here" but can become more overt and dangerous.
- Increased alcohol and drug use
- Aggressive behavior
- Social withdrawal from friends, family and the community
- Dramatic mood swings
- Talking, writing or thinking about death
- Impulsive or reckless behavior

## Is There Imminent Danger?

Any person exhibiting these behaviors should get care immediately:

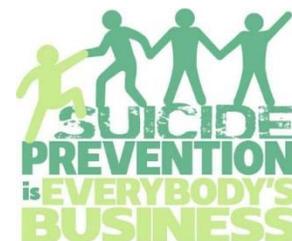
- Putting their affairs in order and giving away their possessions
- Saying goodbye to friends and family
- Mood shifts from despair to calm
- Planning, possibly by looking around to buy, steal or borrow the tools they need to commit suicide, such as a firearm or prescription medication

If you are unsure, a licensed mental health professional can help assess risk.

### Risk Factors for Suicide

Research has found that about 90% of individuals who die by suicide experience mental illness. A number of other things may put a person at risk of suicide, including:

- A family history of suicide.
- Substance abuse. Drugs and alcohol can result in mental highs and lows that exacerbate suicidal thoughts.
- Intoxication. More than one in three people who die from suicide are found to be currently under the influence.
- Access to firearms.
- A serious or chronic medical illness
- Gender. Although more women than men attempt suicide, men are four times more likely to die by suicide.
- A history of trauma or abuse.
- Prolonged stress.
- Isolation.
- Age. People under age 24 or above age 65 are at a higher risk for suicide.
- A recent tragedy or loss.
- Agitation and sleep deprivation.



If you are concerned about suicide and don't know what to do, call the **National Suicide Prevention Lifeline: 1-800-273-TALK (8255)**. They have trained counselors available 24/7 to speak with either you or your loved one.

## Can Thoughts of Suicide Be Prevented?

Mental health professionals are trained to help a person understand their feelings and can improve mental wellness and resiliency. Depending on their training they can provide effective ways to help.

Psychotherapy such as cognitive behavioral therapy and dialectical behavior therapy, can help a person with thoughts of suicide recognize unhealthy patterns of thinking and behavior, validate troubling feelings, and learn coping skills.

Medication can be used if necessary to treat underlying depression and anxiety and can lower a person's risk of hurting themselves. Depending on the person's mental health diagnosis, other medications can be used to alleviate symptoms.

### Preventing Suicide

It can be frightening and intimidating when a loved one reveals or shows signs of suicidal thoughts. However, not taking thoughts of suicide seriously can have a devastating outcome. If you think your friend or family member will hurt themselves or someone else, call 911 immediately.

There are a few ways to approach this situation.

- Remove means such as guns, knives or stockpiled pills
- Calmly ask simple and direct questions, such as "Can I help you call your psychiatrist?" rather than "Would you like me to call your psychiatrist, your therapist or your case manager?"
- Talk openly and honestly about suicide. Don't be afraid to ask questions such as "Are you having thoughts of suicide?" or "Do you have a plan for how you would kill yourself?"
- If there are multiple people, have one person speak at a time
- Ask what you can do to help
- Don't argue, threaten or raise your voice
- Don't debate whether suicide is right or wrong
- If your loved one asks for something, provide it, as long as the request is safe and reasonable
- If you are nervous, try not to fidget or pace
- If your loved one is having hallucinations or delusions, be gentle and sympathetic, but do not get in an argument about whether the delusions or hallucinations are real

If you are concerned about suicide and don't know what to do, call the National Suicide Prevention Lifeline: 1-800-273-TALK (8255). They have trained counselors available 24/7 to speak with either you or your loved one.

Excerpted from [www.nami.org](http://www.nami.org)

## Providing Support

Even if your loved one isn't in a moment of crisis, you need to provide support. Let them know that they can talk with you about what they are going through. Make sure that you are actively and openly listening to the things they say. Instead of arguing with any negative statements that they make, try providing positive reinforcement. Active listening techniques such as reflecting feelings and summarizing thoughts can help your loved one feel heard and validated. Furthermore, reassuring your loved one that you are concerned for their well-being will encourage them to lean on you for support.

Excerpted from [www.nami.org](http://www.nami.org)



**Known risk factors for suicide across ethnic groups include depression, hopelessness, substance use, access to lethal means, history of suicidal behavior, physical or sexual abuse, loss of ethnic identity and language, frequent exposure to suicide and other premature deaths, binge substance use and stressful life events.**

(King & Apter 2003; Olsen & Wahab, 2006; Barlow et al., 2012; Cwik et al., in press).

*Tingey, Lauren; Cwik, Mary; Goklish, Novalene; Larzelere-Hinton, Francene; Lee, Angelita; Suttle, Rosemarie; Walkup, John; and Barlow, Allison. "Risk Pathways for Suicide Among Native American Adolescents." Qualitative Health Research, Vol. 24, 11, 2014, 1518-1526.*

## Be Educated

One of the best things you can do if you know or suspect that your loved one is contemplating suicide is educate yourself. Learning about suicide, what the warning signs are, and how it can be prevented can help you understand what you need to do as a member of their support system.

If Possible, Be Prepared

If your friend or family member has had suicidal thoughts in the past, it's a good idea to have a crisis plan just in case. This means that you'll need to work together to develop the best course of action if a crisis situation should occur.

Excerpted from [www.nami.org](http://www.nami.org)

## Your Child Might Be A Bully. Here Are 7 Ways To Stop That Behavior

Adapted from an article by Lev Novak - September 14, 2016  
The Washington Post



As a former after-school teacher, I've spent three years working with kids in a more relaxed environment than the classroom. And, in those hours with kids as their less-guarded selves, I've seen the bullying, teasing, whispers and shoves that scarcely get reported home to parents. There are no one-size-fits-all approaches to preventing or stopping bullying. But below are some strategies I've found effective for various children.

**Avoid clichés.** Generalizations sound like static to kids, who don't apply morals and have heard "don't bully" all their lives. But specifics help, and authenticity matters. Sincerity can bring real empathy to a subject that all too often is artificial. So be specific. That will show understanding and open the conversation up to your child. The good-faith personal stories will ground the issue in something concrete.

**Remember the purpose of bullying.** Bullying, for many kids, is affirming. It provides a feeling of force and power that is frankly intoxicating, and puts into action the dominance that they, as children, lack in the outside world. Bullying can also make a kid feel cool. But it is wrong, mean, cruel and painful. Talk with your child about morality and power. The opposite of a bully, as I tell students, is a leader. Redirecting that ambitious energy, that need for dominance, in a positive way can pay lasting dividends.

**Bullies often don't know they're bullies.** When a child is engaged in bullying patterns, they're lashing out at a perceived irritation – a student, a speaker, a policy – with internal justification. They think it's everyone else's fault. If your child has a long list of enemies and frustrations, that should be a warning sign that they may be lashing out in response. But when you remove the bullying, you're left with a kid who is annoyed, bothered, angry and sad. Talk with your child about how they feel. Work with them to recognize that "He annoyed me" is a responsibility-shirking projection, but "I'm annoyed when..." is an honest, emotional expression. It emphasizes adapting internally, rather than blaming external conflicts.

**Bullies are often eager to grow up.** Bullying is frequently a rebellion against childhood; an attempt to access and embrace power. Bullies are mimicking what they consider strength. Some children imagine adulthood to be a scary, mean place of warfare. If children fear the world is a war, some will make themselves soldiers.

Oddly, you may be more successful in combating bullying if you're less sensitive with the perpetrator. Being treated with kid gloves can provoke real frustration for bullies, who are often seeking dominance and maturity. Respectful, serious reproach is much more honorable to a certain type of bully. Leveling with them honestly and clearly can be much more helpful than an overly gentle approach. Let them know that this isn't what strength is, that it isn't right and that you know what they are doing. Kids often think they can get away with anything. Letting them know that they can't could pave the way for more positive modeling of what it means to be an adult, with the emphasis on inner strength, rather than on external strength cruelly applied.

**Internal problems may become external ones.** An insecure older child may lash out at younger kids, eager to distinguish himself in a social plane where he feels like he has more leverage. A young girl who is overly worried about her appearance may deride others in an attempt to maintain a position in a social structure. A student struggling in a class may attempt to disrupt it, preferring to show disdain for a concept rather than admit his difficulties. Remember that, as a parent, you most often see your child in a family structure, where they feel safe confiding their struggles. You don't necessarily see how they cope with those feelings in a more social setting.

**Bullying isn't a judgment.** Don't view your child's bullying behavior as a moral referendum on your parenting skills. Fear of labeling, and its connotations, causes many parents to avoid talking about bullying with their children. But remember: Children only learn when you teach them.

Good kids bully. Nice kids bully. Smart kids bully. *When parents look away, it does their children – and their children's classmates – a disservice.*

**Teach them how to repair.** One of the central issues of bullying is that it feels good in the moment. One of the other problems is, it can be painful and humiliating to apologize. Some bullies will bristle, but many others will break down, even cry, and the prospect of making amends, because that is framed in shame. Shame and guilt can keep a child running from a painful acknowledgment. If your kid is bullying someone, help them find a solid, tactful and prideful way to repair the friendship. Forcing a child to say "sorry" embitters and embarrasses them. Empowering them to do a fun, good deed – making treats for the class, throwing a surprise party, making a present – can teach the same lesson in a powerful, positive way.

*Lev Novak is a writer and teacher in Boston and a former after-school teacher who, for better and worse, was treated by his students as an equal. He is currently writing a young adult novel, titled "Black Sabbath," with John Hamburg, to be released with Soho Press in September 2017.*

To view the article in its entirety, visit

<https://www.washingtonpost.com/news/parenting/wp/2016/09/14/your-child-might-be-a-bully-here-are-7-ways-to-stop-that-behavior/>