

Community Lifeline

The suicide rate of Korean Americans in Los Angeles County is double that of the county's average for all groups. But social worker Jae Kim is dedicated to reversing this disturbing trend.

story and photograph by $Narae\ Son$

THE ROOM WAS SILENT AND expressions serious, as about 25 Korean Americans sat in a room at Young Nak Presbyterian Church in Los Angeles on a Friday in late April. The men and women, appearing mostly in their 30s and 40s, were not here to worship. They gathered instead to hear a sobering presentation on how to prevent young people from committing suicide.

The talk was given entirely in Korean, catering to the audience of mostly Korean immigrant parents of schoolaged children. Many were shaken by news of the suicides of two Korean American high school students in Los

Angeles earlier this year. A service and community development group called the YNOT Foundation, based at Young Nak, tapped Jae Kim from the L.A. County Department of Mental Health to host a forum on the normally taboo topic.

Kim is part of a team called Partners in Suicide Prevention, which tries to educate the general public, as well as school counselors, social service providers and other so-called "gatekeepers," so they can recognize the warning signs of suicide. Through this kind of education, they not only hope to prevent suicides, but also to reduce the stigma associated with seeking mental

health services.

Kim, a licensed clinical social worker, is actually assigned to work specifically with the older adult population for his job with the county, but because he is bilingual, he finds himself doing outreach work to the Korean American community at large.

During an interview with KoreAm, he expressed deep concerns about the suicide problem in the Korean American community. He cited statistics in L.A. County revealing that, from 2006 to 2010, 157 Koreans committed suicide, giving them the highest suicide rate among all Asian groups. Even more



alarming is the fact that, over that five-year period, Koreans had the fifth-highest suicide rate of all racial/ethnic groups, after Caucasians, African Americans and Latinos, which he divided into two subcategories of Mexican Hispanics and Central/South American Hispanics.

"That Koreans have the fifth highest number of suicides shows how serious the problem is, if you consider how the Korean population in L.A. County is relatively small compared to other ethnicities," said Kim. "Assuming that the population of Koreans in L.A. County is about 210,000, the suicide rate among Koreans is double that of L.A. County's overall average (of 7.5 per 100,000), at 15 per 100,000."

That's why Kim has been taking his suicide prevention message to this community, giving presentations at churches, senior centers and other venues.

Mental health issues are quite personal to Kim, whose own mother suffered from depression from the time he was a high school student. "While taking care of her, I felt that professional [mental] support was important for patients and their families," he said. "And I thought that my personal experiences might be helpful to understand a variety of people's needs. So I made up my mind to help those people and their families."

After he earned a B.A. in social work at Yonsei University in Seoul, he worked part-time with mentally disabled individuals in Podonamu (which means "the vine"), a community-based mental health program. This program was the first private daycare model for the mentally disabled in Korea. He recalled one of the clients in the program, who was severely depressed. After working with him a while, the treatment staff agreed this client was ready to return to college and live a normal life.

"But the first day, after he came back from his school, I heard that he killed himself," said Kim. "It was very shocking. And I realized the seriousness of what I do because I can save one's life or not."

After earning his master's degree from the Graduate School of Social Work at Yonsei University, he set his sights on teaching social work to undergraduate and graduate students in Korea. But the clinical social work curriculum in Korea is based on what's being taught in the U.S., said Kim, so he decided to come to the States in 2002 to further his studies and also get on-the-job experience, with the intention of returning to Korea within 10 years.

It's been over a decade, and Kim is still here.

After obtaining his master's at the University of Texas at Arlington School of Social Work, he moved to California, where he worked at the Asian Pacific Counseling and Treatment Center in Los Angeles. There, he served for six years as a psychiatric social worker for severely mentally ill patients with suicidal or homicidal risks.

"It was an extremely tough job and got to a point where I even considered quitting," said Kim. "But around that time, I coincidentally met the mother of one of my clients. She was so grateful to me for changing her son's life and thanked me. To this day, I can't forget that moment, and it helped me hold on and realize the precious value of my job. Those kinds of experiences helped me be where I am today."

Based on his work both in Korea and the United States, he had some theories about why there are such high rates of suicide among Korean Americans. He said that, when looking at 2006 L.A. County figures, about 95 percent of the Korean adult suicide cases involved immigrants. He believes this could be attributed, in part, to the economic and societal pressures many newcomers feel as they adjust to their lives in America, but also to the stressful mindset they brought with them from their native country.

"Korea has experienced tremendous economic growth that stems from a competitive society. But that kind of competitive atmosphere also gave Koreans a lot of psychological, social and economic stress," Kim said. "Some experts think that this kind of long-term stress can [create] a stress hormone in the brain ... [which] can lead to depression, bipolar disorder and vio-

lent tendencies. In Los Angeles County, Koreans [also] have the highest rates of domestic violence among all Asians."

Because Korean culture is known as a "face (or dignity) culture," people often don't want to talk about their personal problems, Kim said.

So it is hard for people to get help from friends or mental health professionals, sometimes even from their own families. "When I had to care for my mother, I also felt ashamed to talk about her with other people," Kim admitted.

But the need to raise awareness about suicide prevention is ever urgent, as the issue is now also touching the younger generation. Kim noted that an examination of 2006 statistics shows that Korean American suicide cases in L.A. County involving those aged 16 to 25 (known as "transition age youth") tended to occur among those born in this country. There could be multiple causes, of course, but Kim posited that one factor is that the "Korean culture of competition is putting a lot of stress on the second generation.



Jae Kim gives a presentation on suicide prevention.

"Many Korean American children are forced to follow the Korean culture within the family, but when they're outside, they have to conform to a different culture," he added. "The difference in culture is putting a lot of pressure on them as well. It's also possible that many of them aren't getting enough emotional support from their parents because they can't seem to communicate well due to the language barrier."

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Kim is working on several programs specifically geared toward reaching Korean Americans. With the help of a bilingual Korean American colleague at the county health department, he is creating a Korean-language version of a program that teaches suicide intervention skills, which can be utilized by teachers, social workers and anyone aged 15 and over. "If this plan comes to fruition, it will be the first time in the U.S. that a suicide prevention training program will be provided in the Korean language," said Kim.

The social worker's dedication to his work has not gone unnoticed. He was honored last year with the Department of Mental Health's Employee of the Year Award, and his Partners in Suicide Prevention team was also recognized as Team of The Year. In addition, as peers in South Korea have learned about his work with Koreans in the States, they have invited him to speak at the Korean National Suicide Prevention Conference both last year and this year.

In the future, Kim hopes to do more outreach to Korean American members of the faith-based community, as well as to tap Korean and Korean American celebrities to help spread an anti-suicide message. He mentioned that the Korean media should also help play a role in preventing these tragedies.

"It's important that members of the media not sensationalize suicide in their articles," he said. "I would like for the press in the Korean American community to focus on what can help the community prevent possible suicides, rather than setting their goals on publishing sensational stories to grow their readership. Publishing specific methods of suicides can cause a suicide contagion."

It's been 11 years since Kim came

to the States armed with his "10-year plan" that included studying, getting clinical experience and then returning to Korea to teach. "My friends who are currently social work professors in Korea encouraged me to get my Ph.D. and come back to Korea because there is a high demand for educators like me, who have field experience both in Korea and in America," said Kim.

"But I think my decision [to stay] was right," he continued. "One of the reasons that I decided to continue working in the U.S. is that this Korean American community desperately needs Korean-speaking bilingual social workers who understand this community culture and who can advocate for the community."

For more information, including recognizing suicide warning signs in youth and guidelines for parents, please visit http://preventsuicide.lacoe.edu or iamKoreAm.com. For those living in L.A. County, the Department of Mentai Health offers a 24-hour mental health crisis hotline, called ACCESS, at 1-800-854-7771. People In L.A., Orange, Ventura, San Bernardino, Riverside and Imperial counties of California, can also call toll-free the DIdi Hirsch Suicide Prevention Center's 24/7 hotline at 1-877-427-4747; it offers Korean-language services between 6:30 p.m. and 2:30 a.m. Those outside of these areas can cali the National Suicide Prevention Lifeline at 1-800-273-TALK (8255).

