

AWARENESS & SUICIDE PREVENTION



in EGYPT



Grupo Mulheres do Brasil
Cairo



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Considering the challenges that compromise the mental health of immigrants abroad, the **Grupo Mulheres do Brasil Núcleo Cairo**, launches this informative booklet with **the aim of promoting awareness, clarifying and guiding immigrants,**

expats and local community on how it is possible to help when dealing with situations of discouragement, anxiety, lack of energy and even doubts about the meaning of being alive.

SAY "YES" TO LIFE

Together with you, we want to say **YES to LIFE!**

Your History deserves to be valued and still has many chapters ahead, with challenges and more difficult moments, but also with lots of joy and achievements!

Núcleo Cairo supports the Suicide Prevention Awareness Month among expats in Egypt.

IT IS IMPORTANT TO EMPHASIZE THAT THE INFORMATION AND GUIDELINES PROVIDED HERE ARE NOT EQUIVALENT TO PSYCHOLOGICAL TREATMENT AND DO NOT SUBSTITUTE, UNDER NO CIRCUMSTANCES, A MEDICAL AND PROFESSIONAL EVALUATION.



Introduction

Worldwide, suicide is the **fourth leading** cause of death among **15-29-year-old** category. A suicide case occurs in the world **every 40 seconds**, according to a report by the **World Health Organization (WHO)** released at the end of 2019; more than half of suicides are committed by people under 45 years old, as well as between 15 and 29 years old.

According to the **scientific article** published online, in August 2022 – *“Suicide in Egypt: Should it Be prevented or disregarded?”* –, by Dr. Ramadan Abdelmoez Farahat – Faculty of Medicine, Kafrelsheikh University, Egypt –, **the suicide rate among men is twice comparing to that of women** and does not depend on age group. And this seems to increase with age due to psychological problems more than in women, according to a survey carried out between 2000-2022.

Attention to this **silent epidemic raises awareness** of the **significant increase** in the phenomenon of suicide, **especially among young people**.

The most common causes of suicide in Egypt are social factors such as bullying, violence and family breakdown. According to the study, bullying can be a major contributor, especially due to its spread on social networking sites, which can **expose victims to psychological pressures and loss of self-confidence**, leading them to commit suicide to alleviate this psychological fatigue. **Family disintegration and domestic violence**, especially when raising children, can also be factors that contribute to youth suicide.

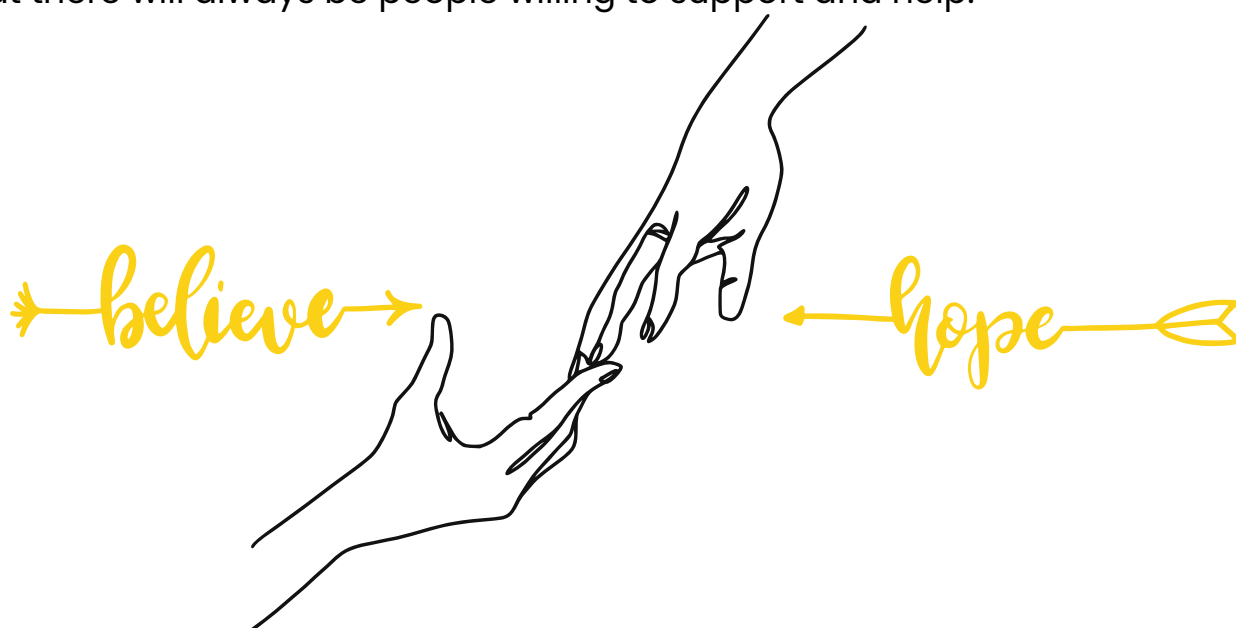
**If you need,
Ask for help!**

Introduction

Dialogue and transparency are key elements in suicide prevention. There are theories that indicate that there is an individual predisposition to suicide, which is activated by traumatic experiences throughout life that originate a negative thought pattern.

More than 50% of people who committed suicide suffered from **depression**, making that the **biggest predisposing factor**. Situations of separation, divorce, recent loss, loneliness, unemployment, recent change or loss of work, school or work pressures and problems, serious or chronic illness, drug and alcohol addiction can effectively result in a negative response and lead to suicide.

The sense of **hopelessness** makes this a reason to generate the thought that the only available solution is death. **Isolation, marginalization, the feeling of not belonging, of feeling part of a social group**, have a significant weight in the suicidal decision. **When helped in time, people can understand** that there are **other ways** to resolve their issues and that there will always be people willing to support and help.



1. Unfolding Taboos and Prejudices.

Any of us, at certain point in life, may face challenging situations, with feelings of discouragement, apathy, lack of affection, sadness, depression, despair or even thoughts and doubts about the meaning of life.

We need help at this time. And, besides what many people may think, **seeking for help** will be a sign of **strength and maturity**.

Mistakes and prejudices have been historically repeated, **contributing** for the construction of a **stigma** around mental illness and suicidal behavior. Stigma which results in a process that **people become to feel ashamed, excluded and discriminated**.



Table 1 illustrates the myths about suicidal behavior. Knowledge can contribute to the deconstruction of this stigma around suicidal behavior.

**If you need,
Ask for help!**

1. Unfolding Taboos and Prejudices.

Table 1: Myths about suicide

Myths	Truths
<p>Suicide is an individual decision, as everyone has the full right to exercise their free will.</p>	<p>FALSE. Suicides are almost invariably experiencing a mental illness that radically alters their perception of reality and interferes with their free will. Effective treatment of mental illness is the most important pillar of suicide prevention. After treatment of mental illness the desire to kill oneself disappears.</p>
<p>When a person thinks about committing suicide, he will be at risk of suicide for the rest of his life.</p>	<p>FALSE. Suicide risk can be effectively treated, after which the person is no longer at risk.</p>
<p>People who threaten to kill themselves won't do it, they just want attention.</p>	<p>FALSE. Most suicidal people talk or give signs about their ideas of death. The major part of the suiciders expressed, in previous days or weeks, often to health professionals, their desire to kill themselves.</p>
<p>If a person who has felt depressed and thought about committing suicide, in the next moment starts to feel better, it usually means that the problem is over.</p>	<p>FALSE. If someone who was thinking about committing suicide and suddenly seems calm, relieved, it doesn't mean that the problem is over. A person who has decided to commit suicide may feel "better" or feel relief simply because they have made the decision to kill themselves.</p>

Source: BRAZILIAN ASSOCIATION OF PSYCHIATRY (ABP)

1. Unfolding Taboos and Prejudices.

Table 1: Myths about suicide

Myths	Truths
<p>When an individual shows signs of improvement or survives a suicide attempt, they are out of danger.</p>	<p>FALSE. One of the most dangerous periods is when one is getting better from the crisis that motivated the attempt, or when the person is still in the hospital, after an attempt. The week following discharge from the hospital is a period during which the person is particularly fragile. As a predictor of future behavior is past behavior, the suicidal person often remains at high risk.</p>
<p>When a person thinks about committing suicide, he will be at risk of suicide for the rest of his life.</p>	<p>FALSE. Suicide risk can be effectively treated, after which the person is no longer at risk.</p>
<p>We should not talk about suicide, as this can increase the risk.</p>	<p>FALSE. Talking about suicide does not increase the risk. Quite the opposite, talking to someone about it can ease the anguish and tension that these thoughts bring.</p>
<p>It is forbidden for the media to address the subject of suicide.</p>	<p>FALSE. The media have a social obligation to address this important public health issue and to address it appropriately. This does not increase a person's risk of killing himself; on the contrary, it is essential to provide the population with information about the problem, where to seek help, etc.</p>

Source: BRAZILIAN ASSOCIATION OF PSYCHIATRY (ABP)

2. Who can I count on?

Friends, family members, religious leaders, community leaders, any other people in among our circle of coexistence, can help us decisively in those more defiant phases of life. Yes, talking to someone we trust can be a great remedy to alleviate the pain of the mind and daily anguish.

Understanding that no one is free from those difficulties and that those kind of emotions and feelings are normal and natural for human beings, it is the first big step towards relieving and overcoming situations in which, sudden emotions seem to be out of control.



**If you need,
Ask for help!**



3. How can I better express my feelings?

Often what we need is to change the way we express ourselves, so that feelings and emotions don't get in the way of our daily lives, in relationships with family, at work, with our friends...

It is important to be aware of when the level of mental stress is harming our relationships and compromising eating, sleeping, concentration and communication skills, and our physical health.

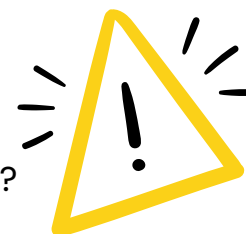
When that happens, **IT'S TIME TO SEEK HELP!**

When you speak slowly, to be clear and brief, to be assertive and not aggressive and to choose your words carefully, some tips can help you to be better understood, such as:

4. Which signs do I need to look out for?

Watch for the following signs and seek professional help - talk to your doctor and tell them what's going on. **Some important alerts**, which should prompt you to make an appointment soon:

- Have you been feeling "down" for a long time?
- Have you repeatedly experienced sudden mood swings?
- Have you been feeling yourself aggressive or very nervous?
- Have you felt the need to isolate yourself frequently?
- Have you been feeling low energy and having problems with sleeping and/or eating?
- Have you questioned the fact of why you are alive?



5. Seek for help!

Your mental health is just as important as your physical health and it deserves the same attention.

Therefore, it is fundamental to seek therapeutic/medical guidance!

Seek for help, trust yourself and believe: that difficult times any of us can face, at some moment of life.

The important thing is to **overcome your own resistance, get rid of prejudices and taboos** and, above all, **SAY "YES" to LIFE!!**



**If you need,
Ask for help!**

Next, we are going to share some **simple tips** on small actions that can improve your life or that of someone close to you...

When discouragement, apathy, isolation and sadness come, some activities can be a great option in favor of your health.

Let's go?

“
"Don't face the
storm alone,
I'm here to talk to
you!"
”



6. Simple actions that make the difference.

- Do some physical exercise regularly. For starters, a 10-minute walk makes difference.
- Identify any task of your interest that could become a 'hobby'.
- Connect with people, even if it's just for a "hello" and a chat.
- Watch a comedy or cartoon every now and then.
- Look for something different to do: have you thought about playing an instrument, or learning to paint or sew? And, a dance class?
When was the last time you learned to do something new?
- Walk, swim, jog, stroll through a park, enjoy nature whenever it's possible!
- And, if you can, plan a vacation, relax, entertain yourself and have fun!

Always keep in mind:

**Taking care of your mental health is so important
as taking care of your physical health!!!**



7. How to Help in Risky Situations in mental health?

For those more serious situations, which may require urgent help and immediate intervention, we present the following guidelines from mental health professionals.

If you are living with someone who is showing signs of doubt about the meaning of continuing to live, see some recommendations below and get ready to help, provide support, comfort and assistance in the appropriate medical referral of the situation.

How to prevent suicide?

When someone you know declares an intention to take their own life or shows signs of risk, you need to be alert to act and **help the person to seek immediate professional help.**

We understand that the situation can get very delicate and difficult to deal with. But, although the first feeling is of helplessness, **it is possible to prevent it.** By recognizing the risk factors and signs, it facilitates **taking immediate action to give appropriate support** during that situation.

Always remember that the most important thing is to seek professional help.

Patients with suicide ideas or attempts should be accompanied by a psychiatrist as soon as possible.

In case of doubt, never hesitate to **call 112** or take the person to the nearest hospital emergency room.



**Medical
Emergency
Call: 112**



8. PAY ATTENTION to Risk Factors!

Life presents situations that can make people more vulnerable. Following, are some risk factors that may contribute to thoughts of suicide.



- The person has been depressed. Depression and other psychological problems are among the main risk factors. In general, depressed people are those who have been feeling sad nearly every day for, at least, two weeks and have shown less interest in doing things they are used to do.
- The person has been drinking more alcohol or using drugs, which can also lead to self-destructive thoughts.
- The person has been talking about dying or killing himself. The opposite that many might think, those who commit suicide often speak of their intention. People who have recently talked about it or even searched the internet and read about ways to kill themselves are at high risk. By talking about these ideas, the person may be indirectly asking for your help.
- The person has tried to take their own life in the past.
- The person has a family history of mental disorders.



8. Risk Factors

Respecting the others' struggles fighting alone is the truest form of empathy.

- The person has been or had been a victim of abuse, domestic violence, bullying or harassment. These experiences can increase the risk.
- The person has suffered some kind of loss, such as the death of a loved one, job dismissal, divorce, relationship breakup or sudden loss of privacy with the exposure of intimate life on the internet, for example.
- The person has a serious and possibly incurable illness that causes, for example, chronic pain or tiredness. Suicide can be seen as the end of long suffering.
- The person has a tendency to be impulsive or aggressive or has access to ways to kill themselves, such as firearms.

Impulsive people can shorten their lives even accidentally, when they decide, for example, to take too many pills at once saying they want to “sleep” or “disappear”.



**Medical
Emergency
Call: 112**



8. Risk Factors

Table 2: Main risk factors associated with suicidal behavior

Mental illnesses	Social characteristics
<ul style="list-style-type: none"> • Depression; • Bipolar disorder; • Mental disorders related to the use of alcohol and other substances; • Personality disorders; • Schizophrenia; • Increased risk with associated mental illness: bipolar patient who is also addicted to alcohol will be at greater risk than if he does not have this addiction. 	<ul style="list-style-type: none"> • Male; • Age between 15 and 30 years and over 65 years; • Without children; • Residents of urban areas; • Unemployed or retired; • Social isolation; • Single, separated or widowed; • Special populations: refugees, immigrants, teenagers and homeless people.*
Psychological characteristic	Limiting health condition
<ul style="list-style-type: none"> • Recent losses; • Little resilience; • Impulsive, aggressive or moody personality; • Have suffered physical or sexual abuse in childhood; • Hopelessness, despair and helplessness. 	<ul style="list-style-type: none"> • Disabling organic diseases; • Chronic pain; • neurological diseases (epilepsy, Parkinson's, Huntington); • Spinal cord trauma; • Malignant tumors; • AIDS.
<p>Suicidality: Having attempted suicide, having family members who have attempted or committed suicide, having suicide ideas and/or plans.</p>	

Source: BRAZILIAN ASSOCIATION OF PSYCHIATRY (ABP)

Special Populations - <https://www.unhcr.org/media/evidence-suicide-prevention-and-response-programs-refugees-systematic-review-and>

9. Practice active listening.

Listen to the person.

Someone who urges to take their own life can give hints of what they have in mind. Pay attention to what the person says in order to help them in time.

- **Watch out for depreciating sentences**, like: *"My death would be better for everyone"* or *"At least you won't have to stand me anymore"*.

Also, see if she feels like no one understands or cares about her, by saying things like: *"Nobody really cares"*, *"Nobody understands how I feel"* or *"You'll never understand"*.

- Watch if **the person demonstrates lack of attachment to life**, by saying: *"I have no reason to live"* or *"I'm so tired of living"*, these are signs that deserve attention.
- **The lack of hope is also a sign to watch out for.** If the person says: *"It's too late now, I can't take it anymore"*, *"There's nothing else to be done"* or *"I just wanted this pain to go away"*, **be aware.**



9. Practice active listening.

Be aware of the person's emotions.

- **Paying attention to the person's feelings** and the emotions behind their actions can help you identify intentions and risks.
- If she won't talk about how she feels, **ask**.
Say something like: "How have you been feeling?" or "How are you emotionally?"
- Has he ever expressed feelings of personal failure, despair, or guilt?
- Does she seem depressed, anxious, or overwhelmed?
Notice if she has been crying more than usual, if she has been more sad or upset all the time.
- Notice if the person is more irritable, is always in a bad mood, or if things they normally don't care about have been getting them down frequently.

Are you noticing these risk signs, behavior changes and habit changes for no apparent reason?

Be alert and prepared to help, always remembering that it is essential to:

Make contact, listen, understand, never judge or criticize, show you care and seek professional help.



11. Certain changes in behavior may be signs of danger.

People with suicidal tendencies **demonstrate their intentions with specific behaviors** and recognizing them can be very useful to prevent the worst from happening. Some of these behaviors are, as follows:

- The person reads, writes, or says things about death or suicide.
- The person is no longer interested in things they used to enjoy, stopped attending a certain group that he valued or stopped practicing a specific activity.
- The person is more isolated, apathetic or quieter, for no reason that can be clearly identified. This can also be a red flag.
- The person has been giving away her personal valuables to others for no apparent reason. This is a relevant sign, but one that is often ignored.
- The person has been buying weapons or medicines and visiting favorable places such as very high bridges, tops of buildings, etc. These are serious factors to consider.



”
Your help can save someone's life.

11. Changes in behavior.



ATTENTION TO THESE SIGNS

There are some signs that people in emotional distress often transmit and should be observed:

- Social media posts with negative content or participation in virtual groups that encourage suicide or other associated behaviors;
- Isolation and distancing from family, friends and social groups, particularly important if the person has an active social life;
- Dangerous attitudes that may not necessarily be associated with the desire for death and para-suicidal attitudes (driving dangerously, drinking uncontrollably, constant fights, aggressiveness, impulsiveness, etc.);
- Absence or abandonment of plans for the future;
- Disinterested way in which the person is dealing with some stressful event (accident, unemployment, bankruptcy, separation of parents, death of a loved one);
- Farewells (*"I don't think I'll be here with you next Christmas"*, calls with a farewell connotation, distributing personal belongings);



11. Changes in behavior



ATTENTION TO THESE SIGNS

- Putting matters in order, making a will, giving or returning property;
- Continuous complaints of symptoms such as discomfort, anguish, lack of pleasure or meaning in life and, finally;
- Any untreated psychiatric illness (psychotic conditions, eating disorders and affective mood disorders).

SOME WARNING PHRASES

- "I want to sleep and never wake up";
- "I'm a burden to other people";
- "I'm tired and have no reason to live";
- "There is no more pleasure in living";
- "Everything would be easier if I didn't exist";
- "I'm a failure";
- "This is the last chance";
- "I am not loved or wanted by anyone";
- "I won't be here next year."



12. Understand better.

CONTACT THE PERSON

One of the biggest pains for the person is to think that nobody cares about their existence. Therefore, your role is to help her believe that she is important to you and to many other people. Talking helps bond, and the person will know you care.



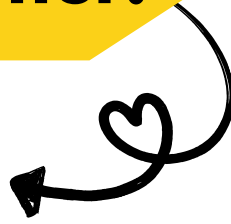
- If you can't stay with her, call someone she trusts and stay with her until that person arrives.
- **Avoid saying things like:** *"It's not that bad"* or *"That will pass"*. That **NEVER** helps and can make the person think you don't understand or aren't listening.
- **Prefer to say:** *"You are not alone. I'm here to listen and help you"* or *"I may not know exactly how you feel, but I want to help as best as I can."*

**You matter.
You have value.
You're not alone.**

**If you need,
Ask for help!**



12. Understand better.



LISTEN

Never leave the person alone if they are depressed, if they admit that they are thinking about killing themselves and/or if they show many signs that this is possible. Stay with her, **talk and listen to what she has to say**.

- **If you don't know what to say**, you don't even have to say it. Just being there and caring about how she feels can go a long way toward helping her.
- **Show that you are listening** to what she says and that you understand that her suffering is real.
- **Get rid of distractions** (such as television, computer, mobile, etc.) so that your attention is fully focused on the person who is in need of help. Just keep your mobile nearby and ready to use in case you need emergency help.

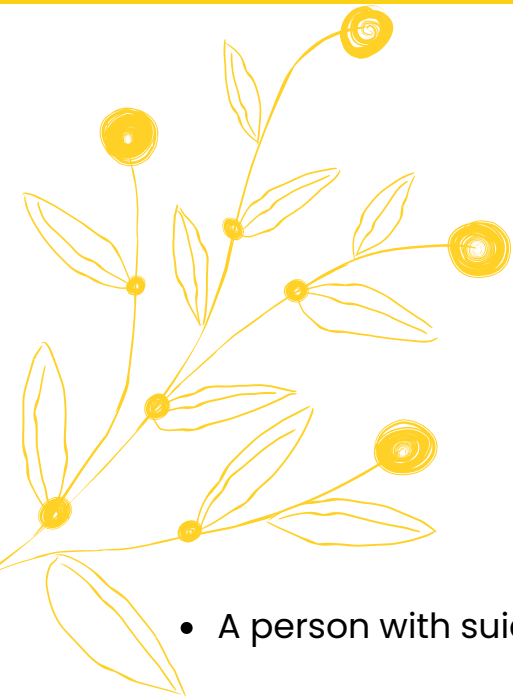
TRY TO UNDERSTAND HOW SHE FEELS

You may never have thought about killing yourself, but **be empathetic and try to put yourself in the person's shoes** to understand how they feel.

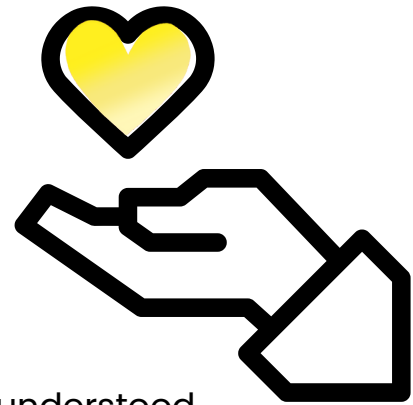
- **NEVER tell her how she should feel** or what she should do. Simply **show your support** and make an effort to understand her.
- **Repeat what she says** to show that you are listening and that you understand how she feels.
- **If she says:** *"I've tried everything and I don't know what else to do"*, respond with something like: *"I understand. It's so frustrating to push yourself to the extreme and nothing works out that it's really hard not to give up"*.



12. Understand better.



NEVER JUDGE OR CRITICIZE



- A person with suicidal idea already feels alone and misunderstood.
- Any further criticism or judgment can be quite damaging at this point.
- **Avoid comments like:** *"Get out of bed and stop being lazy", "Find yourself something to do".*

These types of comments put **more pressure** on someone who can no longer bear to be alive.

- **Making the person feel guilty** for what they feel **doesn't help** either. So **never** say things like: *"Your life isn't that bad", "There are people with problems much worse than yours" or "Think of others. You are making everyone suffer by being like this".*

SHOW YOUR CONCERN

- Show that you care and want to help. Knowing that you care and are interested in how they feel, knowing what the person is going through **can make all the difference.**
- When they talk and you want to show your concern, **just be yourself.**
- **Say something like:** *"I don't have the answer to your problems, but I'm really worried about you and want to help you".*



13. Know how to help.

- **The person's safety should be your primary concern**, and it's not just up to you to deal with the problem. Talking to a professional will be of great help to the person. Therefore, **help her to seek** a psychiatrist or psychologist as soon as possible, **even if she refuses** to seek help on her own.
- **Call 112** to get help.

Talk to a psychiatrist or professional on call:

"I'm accompanying a suicidal person and I need guidance".

The person might get upset if you seek help, but it's the right thing to do. Explain to the person that you are trying to help and for that you need the support of a professional.

Say something like: *"I don't want to hurt you, but I need to help you and this is the best way to do it".*

Attention:
**never doubt someone
with suicidal ideation,
Just HELP!**



*"While no one can go back and make a new beginning,
anyone can start NOW and make a new ending."*

James R. Sherman

14. A small comma.



A small comma so they can continue to write their story.



– I try to sell courage to the insecure, boldness to the phobic, joy to those who have lost their charm for life, wisdom to the unwary, criticism to thinkers.

– And for those thinking of putting an end to their lives, I try to sell a comma, just a comma.

– A comma? Asked the sociologist, confused.

– Yes, a comma. A small comma, so that they can continue to write their story.



"The Seller of Dreams", Augusto Cury.

YOU HAVE VALUE.

yellow september



15. Where do I find help?

Need help? Get in touch with:

GENERAL SECRETARIAT OF MENTAL HEALTH EGYPT



**In case of emergency
Hotline
English/Arabic.**

Call: 16328

Provides **free of charge** services through the **Digital Platform for Mental Health and Addiction Treatment for everyone**

resident in Egypt. Psychological support and counseling through **virtual 'telemedicine' clinics**, qualified psychotherapists, service with complete privacy and confidentiality of patient data.

English/Arabic

Access the link below:

www.mentalhealth.mohp.gov.eg/mental/web/en



International Toolfree Call

International support available in **English or in your mother language**, if the service is available in your country.

Check the website:

www.befrienders.org



**Free 24/7 Chat
in English**

Be heard by volunteer listeners and chat with others who understand in support chat rooms.

www.7cups.com/

Services provided with respect, anonymity, non-advice, non-judgment and with a guarantee of strict secrecy on everything which is said.



15. Where do I find help?

Need help? Get in touch with:



**Emergency
Hotline**

Call: 112



**Contact your Embassy in Cairo
Check the list in the link bellow**

www.embassypages.com



Support to the Brazilian Women

**cairo@grupomulheresdobrasil.org.br
www.grupomulheresdobrasil.org.br**

 **If you want to reach a number you can't remember Call: 140** 

AN INICIATIVE OF:



Núcleo Cairo was born on September 29, 2022 with the mission of building a support network to Brazilian women in Egypt in order to expand their transformative power, by offering backbone tools in order to positively impact their lives and the lives of other women, whether in Brazil or abroad.

The **Grupo Mulheres do Brasil Cairo** makes its email available to inform and guide the Brazilian Community about access to mental health services.

NOTICE that this is **only** a guidance and initial assistance so that the interested person can be supported in the search for **local health institutions and qualified professionals in Egypt**. The service is **FREE and it is not for** psychological treatment.

The treatment must be carried out by a professional directly chosen by the interested party or family member, when applicable.

Portuguese speakers, ask for the Portuguese version of this publication.

SUPPORTERS:



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Togheter we are stronger.



CONNECT!



Grupo Mulheres do Brasil
Cairo



**Scan the QR Code for
information and support.**



cairo@grupomulheresdobrasil.org.br

www.grupomulheresdobrasil.org.br

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UNHCR - The UN Refugee Agency

<https://www.unhcr.org/media/evidence-suicide-prevention-and-response-programs-refugees-systematic-review-and>

Ministry of Human Rights and Citizenship of Brazil -

<https://www.gov.br/mdh/pt-br/setembro-amarelo/porque-a-vida-vale-a-pena#Alerta>

ABP - Brazilian Psychiatric Association

<https://www.setembroamarelo.com/>

Estadão - Brazilian Newspaper

<https://www.estadao.com.br/emails/bem-estar/setembro-amarelo-o-que-nao-dizer-para-uma-pessoa-que-pensa-em-suicidio/>



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