

**GARRETT LEE SMITH  
YOUTH SUICIDE  
PREVENTION AND  
EARLY INTERVENTION  
CROSS-SITE  
EVALUATION**

**Grantee Meeting  
*Plenary Presentation*  
December 10, 2007**

**USES OF EVALUATION**

**Shifting Paradigms**

**Program Worth → Program Development and  
Sustainability**

**Program Expansion and Sustainability**



**Program Development and Improvement**



**Program Worthiness**

## THE CROSS-SITE EVALUATION

- Fundamental component of the authorizing legislation, the Garrett Lee Smith Memorial Act
- Consistent information across programs
- Suicide prevention
  - Understood,
  - Improved, and
  - Sustained
- Inform local and federal programmatic decision making



## NATIONAL PERSPECTIVE: EVALUATION AREAS OF INQUIRY

- National reach of suicide prevention products and services
- Training experiences across diverse gatekeeper groups
- Types of referrals across diverse groups
- Types of services/support received across diverse groups
- Existence and quality of collaborations and infrastructures to support suicide prevention



## SIX CROSS-SITE EVALUATION DATA COLLECTION ACTIVITIES

1. Training Exit Survey
2. Training Utilization and Penetration Key Informant Interview
3. Existing Database Inventory
4. Product and Services Inventory
5. Referral Network Survey
6. Early Identification, Referral and Follow-up

## NATIONAL PERSPECTIVE: WHAT THE DATA ARE SHOWING ABOUT GLS PROGRAM PROGRESS

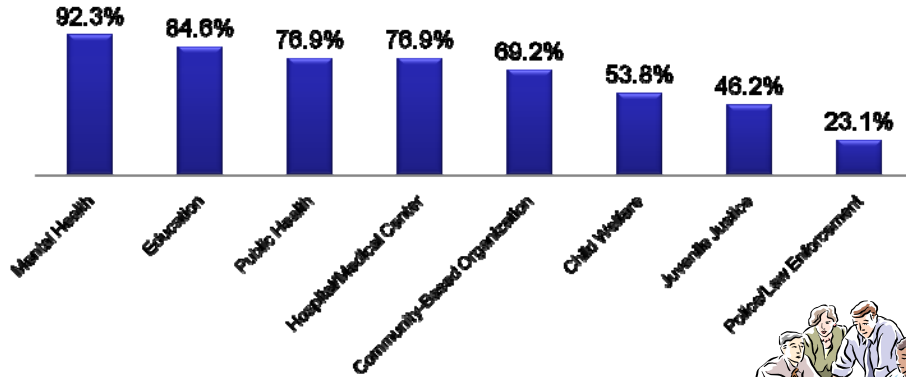
### **Grantees are...**

- Improving interagency connections
- Developing products and services for their communities
- Identifying and referring youth for services
- Training individuals to identify and respond appropriately to the signs of youth who are distressed



# IMPROVING INTERAGENCY CONNECTIONS

Percent of Sites in Which Specified Agency Is Involved in Suicide Prevention\*



Sites had an average of six agencies involved with their efforts

\*From Existing Database Inventory, Section I, Item 3. N=13/14 Cohort 1 Sites



# IMPROVING INTERAGENCY CONNECTIONS (CONT.)

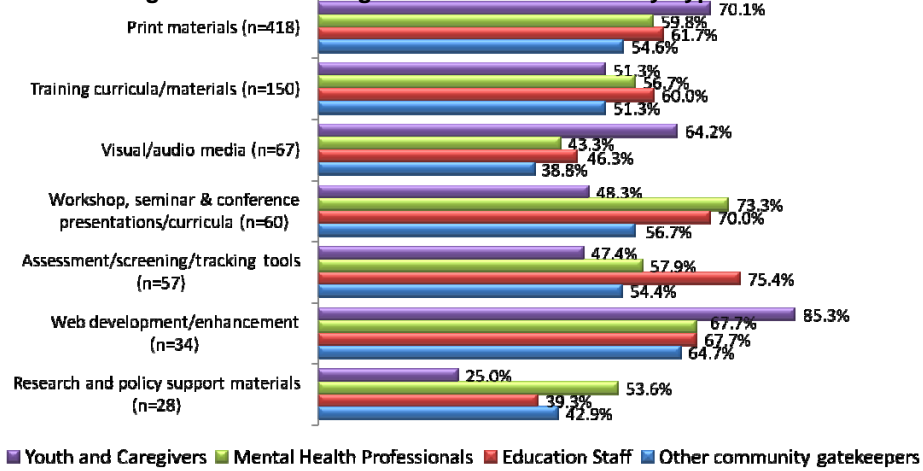
Key Suicide Prevention Activities Around Which Grantees Are Connecting With Other Agencies and Organizations\*\*

Key Activity	Average Number of Linkages	
	Administrators*	Direct Service Providers
Administration of suicide prevention efforts and decision making	4.0	4.5
Sharing information related to suicide prevention	4.2	4.4
Sharing resources to support the suicide prevention program	3.6	3.8
Developing service infrastructures to support suicide prevention efforts	3.7	4.0
Providing referrals for youth in need of service as part of suicide prevention efforts	3.2	3.0
Receiving referrals for youth in need of service as part of suicide prevention efforts	2.3	2.0
Coordinating suicide prevention gatekeeper training activities	2.9	2.2
Coordinating suicide prevention or mental health screening activities	2.2	1.9
Delivering or receiving technical assistance or consultation around suicide prevention	2.5	2.7

\*One network had no administrative respondents. \*\*From the Referral Network Survey, Items 1, 9, 12a-12i. Number of networks available for analysis=19; average # of agencies per network=9.4; average # of respondents per network=16.3

# DEVELOPING PRODUCTS AND SERVICES FOR THEIR COMMUNITIES

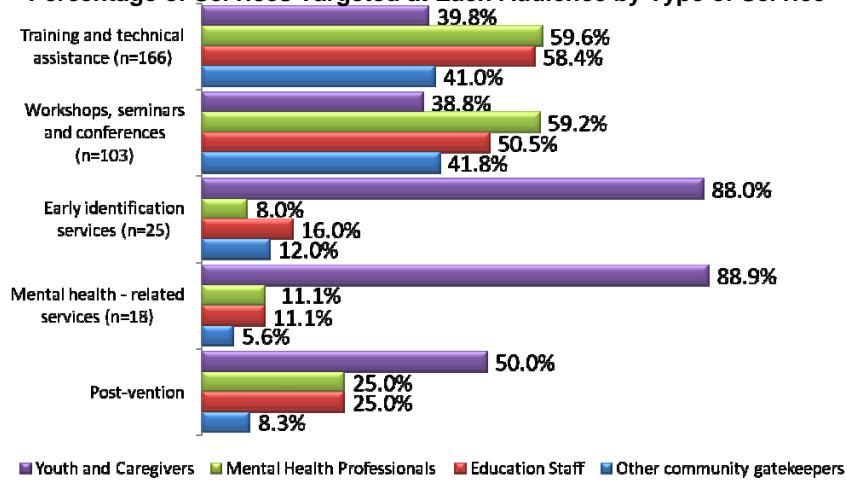
Percentage of Products Targeted at Each Audience by Type of Product\*



\* From the Product and Services Inventory, Part I

# DEVELOPING PRODUCTS AND SERVICES FOR THEIR COMMUNITIES (CONT)

Percentage of Services Targeted at Each Audience by Type of Service\*



\* From the Products and Services Inventory Part I

# IDENTIFYING AND REFERRING YOUTH FOR SERVICES

## Characteristics of Youths by Identification Source\*

Demographic Characteristics	Identified at Risk Through Screening (n=1,304)	Identified at Risk by Trained Gatekeepers (n=149)
Average age	15.2 years	14.5 years
Female	57.9%	62.4%
American Indian or Alaska Native	0.6%	2.7%
Asian	0.8%	0%
Black or African American	19.9%	9.5%
Native Hawaiian or Other Pacific Islander	0.3%	2.0%
White	70.9%	85.7%
Hispanic/Latino	8.9%	16.1%

\*From the Early Identification Referral and Follow-up EI form, (submissions from 11/36 sites)

# IDENTIFYING AND REFERRING YOUTH FOR SERVICES (CONT.)

The person responsible for the early identification was affiliated with the following setting or organization...

Setting	Screening (N= 1304)	Trained GK (N= 149)	Overall (N= 1453)
School	72.6%	78.5%	73.2%
Child Welfare	<.1%	0%	.1%
Juvenile Justice	24.8%	1%	22.4%
Community Based Org.	0%	1%	.1%
Physical Health	0%	2%	.3
Mental Health Agency	<.1%	7.4%	.8%
Other*	2.5%	8.7%	3.1%

\*Of the individuals characterized as "other," home/community (n=5), and unknown (n=32) were the most common write-in answers. From the Early Identification Referral and Follow-up EI form, (submissions from 11/36 sites)

## TRAINING INDIVIDUALS TO IDENTIFY AND RESPOND APPROPRIATELY TO YOUTH IN DISTRESS

- Over 40,000 individuals have been trained in suicide prevention
- Grantees have submitted information about more than 6,000 trainees
- Most training incorporates gatekeeper components including risk factor awareness (90%), early identification (77%), and referral procedures/ protocols (60%)
- Many trainings also focus on screening components (i.e., a specific screening protocol) (28%)



## TRAINING INDIVIDUALS TO IDENTIFY AND RESPOND APPROPRIATELY TO YOUTH IN DISTRESS (CONT.)

**Who Is Getting Trained?\***

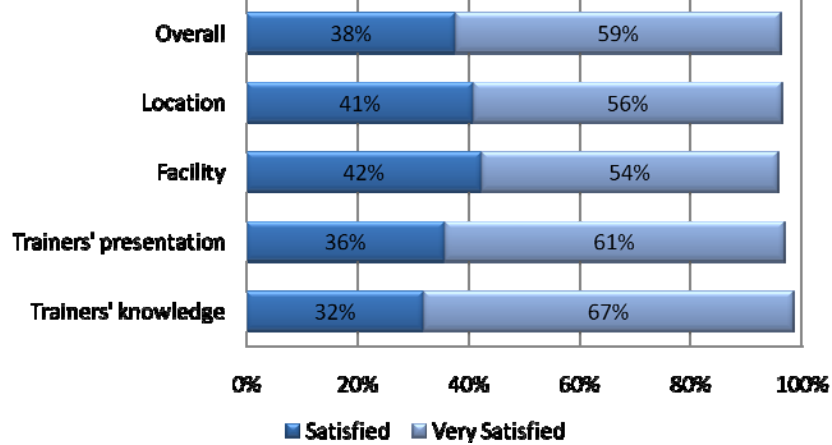
Role	No. of Participants	Percentage of participants
Caregiver	2,190	37.3%
Mental health service Provider	894	15.2%
Teacher/secondary school staff	1,266	21.5%
Child welfare staff	454	13.3%
Probation officer/juvenile justice	244	7.7%
Primary care provider	348	5.9%
University faculty	244	4.2%
University student	779	4.2%
Police officer/law enforcement	128	2.6%
Trainer	151	2.2%
Other	1,699	28.9%
<b>Total**</b>	<b>5,877</b>	

*More than 30% of trainees affiliate with more than one role*

\*From the Training Exit Survey, Item 1. \*\*Role information was provided for 5,877 participants attending 330 trainings

## TRAINING INDIVIDUALS TO IDENTIFY AND RESPOND APPROPRIATELY TO YOUTH IN DISTRESS (CONT.)

How do Trainees Feel About Their Training Experience?\*



\*From the Training Exit Survey, Items 20-23, N=5998

## TRAINING INDIVIDUALS TO IDENTIFY AND RESPOND APPROPRIATELY TO YOUTH IN DISTRESS (CONT.)

Participants' Intent to Use Their Training by Role\*

Intent to...	Parent/ Foster Parent/ Caregiver	Direct Mental Health Service Provider	Teacher or Other Secondary School Staff	Child Welfare Staff	Probation Officer or Other Juvenile Justice Staff	College faculty	College student
Screen youth	22.6% n=7	53.4% n=62	42.9% n=39	84.2% n=16	69.2% n=9	5.3% n=1	11.6% n=25
Increase suicide awareness	90.3% n=28	67.2% n=78	85.7% n=78	21.1% n=4	76.9% n=10	84.2% n=16	68.8% n=148
Identify youth who might be at risk	41.9% n=13	56.0% n=65	80.2% n=73	89.5% n=17	84.6% n=11	57.9% n=11	76.3% n=164
Provide direct services to at-risk youth and/or their families	22.6% n=7	47.4% n=55	29.7% n=27	78.9% n=15	38.5% n=5	15.8% n=3	28.8% n=62
Train other staff members	12.9% n=4	33.6% n=39	20.9% n=19	73.7% n=14	23.1% n=3	31.6% n=6	5.6% n=12
Make referrals to mental health services for youth	41.9% n=13	48.3% n=56	48.4% n=44	78.9% n=15	61.5% n=8	26.3% n=5	25.6% n=55

\*From the Training Exit Survey, Items 1 and 5; based only on individuals who endorsed a single role affiliation



## TRAINING INDIVIDUALS TO IDENTIFY AND RESPOND APPROPRIATELY TO YOUTH IN DISTRESS (CONT.)

### What Training Participants Are Telling Us About Their Training\*

- They are extremely satisfied with their training experience, and want more
- They benefit from trainings with trainees from other professional backgrounds
- The use of role play is helpful and reinforces skills
- Structured trainings with easily remembered steps helps trainees remember what to do
- Clinical and non-clinical trainees often have different perceptions about the same training
- Culturally relevant training curricula are useful and necessary

\*From the Training Utilization and Penetration Key Informant Interview, from 50 respondents from 7 sites

## TRAINING INDIVIDUALS TO IDENTIFY AND RESPOND APPROPRIATELY TO YOUTH IN DISTRESS (CONT.)

### What Training Participants Are Telling Us About How They Use Their Training\*

- They are more aware of warning signs from youth
- They are more comfortable and confident about responding to warning signs
- Trainees' families, communities, and co-workers benefit from the knowledge and skills learned in the training
- Agency protocols and policies are often barriers to implementing what they've learned
- Stigma and lack of awareness are also barriers to implementing suicide prevention
- Tragic events are often catalysts for action
- Suicide survivors report additional personal benefits to participating in trainings

\*From the Training Utilization and Penetration Key Informant Interview, from 50 respondents from 7 sites

## EMERGING THEMES

- Grantees are connecting with other agencies and organizations to improve services for youth at-risk for suicide
- Grantees are developing products and services to address the unique strengths, needs, and characteristics of their communities
- Hundreds of youths at-risk for suicide are being identified and referred by grantee-trained and supported professionals and community members
- Tens of thousands of parents, teachers, police officers, physicians, social service providers, advocates, coaches, and other individuals who frequently interact with youth are being trained to identify and respond appropriately to the signs of youth who are distressed

## LOOKING AHEAD

- More data from existing collection efforts
  - Referral and follow-up information
  - Program implementation and development
- More analyses of new and existing data
- Planned and ongoing data collection efforts
  - Post-vention services
  - Culturally specific suicide prevention efforts
  - School-based prevention efforts
  - Detailed training utilization information