Applied Suicide Intervention Skills Training (ASIST)

Date: 2007 (For resources, this is the publication date. For programs, this is the date posted.)

Information

Type: Program/Practice, Education/Training Program, Program with Evidence of Effectiveness
Organization: LivingWorks
Costs: See the archived NREPP listing [1].

Contact

See the archived NREPP listing [1].

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ASIST is a two-day, two-trainer, workshop designed for members of all caregiving groups. Family, friends, and other community members may be the first to talk with a person at risk, but have little or no training. ASIST can also provide those in formal helping roles with professional development to ensure that they are prepared to provide suicide first aid help as part of the care they provide.

The emphasis is on teaching suicide first-aid to help a person at risk stay safe and seek further help as needed. Participants learn to use a suicide intervention model to identify persons with thoughts of suicide, seek a shared understanding of reasons for dying and living, develop a safeplan based upon a review of risk, be prepared to do follow-up, and become involved in suicide-safer community networks. The learning process is based on adult learning principles and highly participatory. Graduated skills development occurs through mini-lectures, facilitated discussions, group simulations, and role plays.

Workshop instructors take a five-day training for the trainer course and agree to be part of a quality control program that supports them in their trainer roles and encourages them to provide feedback to the developers of ASIST.

Designation as a "Program with Evidence of Effectiveness"

SPRC designated this intervention as a “program with evidence of effectiveness” based on its inclusion in SAMHSA’s National Registry of Evidence-Based Programs and Practices (NREPP).

Outcome Reviewed (Evidence Rating)*

- Personal Resilience/Self-concept (Promising)

ASIST was rated as promising for improving personal resiliency and self-concept among suicidal individuals calling
a hotline. This finding was based on use of ASIST in a specific context: to train suicide crisis line counselors. NREPP reviewed a study that randomized suicide crisis centers into an intervention group, in which counselors received ASIST training, and a wait-list control group. A strength of this study was that it examined the effects of training on distressed individuals (i.e., callers to the hotline), not just on those who received the training. Data from monitored calls of suicidal individuals showed a significant improvement in callers (e.g., less depressed, less suicidal, less overwhelmed) by the end of calls handled by ASIST trained counselors, compared with the wait-list control group (Gould et al., 2013).

Read more about the program's ratings [1].

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* NREPP changed its review criteria in 2015. This program was reviewed under the post-2015 criteria. To help practitioners find programs that fit their needs, NREPP reviews the evidence for specific outcomes, not overall programs. Each outcome was assigned an evidence rating of Effective, Promising, or Ineffective. A single program may have multiple outcomes with different ratings. When considering programs, we recommend (a) assessing whether the specific outcomes achieved by the program are a fit for your needs; and (b) examining the strength of evidence for each outcome.

Program Objectives

After training, ASIST participants should be able to:

1. Recognize that caregivers and persons at risk are affected by personal and societal attitudes about suicide.
2. Discuss suicide in a direct manner with someone at risk.
3. Identify risk alerts and develop related safeplans.
4. Demonstrate the skills required to intervene with a person at risk of suicide.
5. List the types of resources available to a person at risk, including themselves.
6. Make a commitment to improving community resources.
7. Recognize that suicide prevention is broader than suicide first-aid and includes life promotion and self-care for caregivers.

Implementation Essentials

- Two-day training session by certified ASIST trainers.

2012 NSSP Objectives Addressed:

Objective 1.2: Establish effective, sustainable, and collaborative suicide prevention programming at the state/territorial, tribal, and local levels.
Objective 7.1: Provide training on suicide prevention to community groups that have a role in the prevention of suicide and related behaviors.

Populations: Young Adults Ages 18 to 25 Years, Adults Ages 26 to 55 Years, Older Adults, Children Ages 12 and Younger, Adolescents
Settings: Crisis Centers/Services, Communities
Strategies: Identify and Assist, Gatekeeper Training, Life Skills and Resilience