American Indian Life Skills (AILS)

Program Snapshot

Evidence Ratings*

Promising Depression and Depressive Symptoms
Promising Suicidal Thoughts and Behaviors
Ineffective Self-Concept

*Ratings definitions can be found in the appendix.

Program Contact
Teresa LaFromboise, Ph.D.
Professor, Developmental and Psychological Sciences
Stanford Graduate School of Education
485 Lasuen Mall
Stanford, CA 94305-3096
650.319.5016
lafrom@stanford.edu
https://ed.stanford.edu/faculty/lafrom

Dissemination/Implementation Contact
Teresa LaFromboise, Ph.D.
Professor, Developmental and Psychological Sciences
Stanford Graduate School of Education
485 Lasuen Mall
Stanford, CA 94305-3096
650.319.5016
lafrom@stanford.edu

Program Type
Mental health promotion

Gender
American Indian Life Skills (AILS)

Male
Female

Age
13-17 (Adolescent)

Geographic Locations
Urban
Rural and/or frontier
Tribal

Settings
Residential Facility
Correctional Facility
School / Classroom
Mental Health Treatment Center

Race/Ethnicity
American Indian or Alaska Native
Information not provided

Implementation/Dissemination
Not Specified

Program Description

American Indian Life Skills (AILS) is a universal, school-based, culturally grounded, life-skills training program that aims to reduce high rates of American Indian/Alaska Native (AI/AN) adolescent suicidal behaviors by reducing suicide risk and improving protective factors.

The curriculum emphasizes social–cognitive skills training and includes seven main themes: 1) building self-esteem, 2) identifying emotions and stress, 3) increasing communication and problem-solving skills, 4) recognizing and eliminating self-destructive behavior, 5) information on suicide, 6) suicide intervention training, and 7) setting personal and community goals. The curriculum includes between 13 to 56 lesson plans and is typically delivered over 30 weeks during the school year or as an afterschool program, with students participating in lessons three times per week. Lessons are interactive and incorporate situations and experiences relevant to AI/AN adolescent life such as friendship issues, rejection, divorce, separation, unemployment, and problems with health and the law. The curriculum also incorporates three domains of well-being that are specific to tribal groups: 1) helping one another, 2) group belonging, and 3) spiritual belief systems and practices. Each lesson in the curriculum contains skills-training techniques for providing information about the helpful or harmful effects of certain behaviors, modeling of target skills, experimental activities, behavior rehearsal for skills acquisition, and feedback for skills refinement. Most of the lessons include brief, scripted scenarios that provide a chance for students to employ problem solving and apply the suicide-related knowledge they have learned.

Lessons may be delivered by teachers working with community resource leaders and representatives of local social service agencies. This team-teaching approach is intended to ensure that the lessons have a high degree of cultural and linguistic relevance even if the teachers are not American Indian/Alaska Native or of the same tribe as the students. For example, the community resource leaders can speak to students in their own language to explain important concepts and can relate curriculum materials and exercises to traditional and contemporary tribal activities, beliefs, and values. A school counselor (typically of the same tribe) serves as the
American Indian Life Skills (AILS)

clinical supervisor or onsite curriculum coordinator.

AILS is the currently available version of the former Zuni Life Skills Development program, which was developed with cultural components relevant to the people of the Zuni Pueblo in New Mexico, including Zuni norms, values, beliefs, and attitudes; sense of self, space, and time; communication style; and rewards and forms of recognition. The Zuni curriculum served as the basis for the broader AILS curriculum that is now in use, which can be used with other AI/AN populations when implemented with appropriate and culturally specific modifications.

### Evaluation Findings by Outcome

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<th>OUTCOME: DEPRESSION AND DEPRESSIVE SYMPTOMS</th>
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<tr>
<th>OUTCOME: SUICIDAL THOUGHTS AND BEHAVIORS</th>
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<th>OUTCOME: SELF-CONCEPT</th>
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<td><strong>PROGRAM EFFECTS ACROSS ALL STUDIES</strong></td>
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effect size for self-concept is .19 (95% CI: -.03, .41).

Click here to find out what other programs have found about the average effect sizes for this outcome.

**KEY STUDY FINDINGS**

From pretest to posttest, the intervention group demonstrated a greater increase in self-efficacy for anger-management skills, compared with the control group; this difference was statistically significant. There were, however, no statistically significant intervention effects for hopelessness or for self-efficacy for skills related to suicide prevention, active listening, and stress management.

**MEASURES**

LaFromboise and Howard-Pitney (1995): Hopelessness Beck Scale; A scale that measured suicide prevention skills, active listening, anger management and stress management

**ADDITIONAL DETAILS**

None provided.

**Study Evaluation Methodology**

LaFromboise and Howard-Pitney (1995)

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<th>STUDY DESIGN</th>
<th>Narrative</th>
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<tr>
<td><strong>SAMPLE</strong></td>
<td>Participants taking language arts classes in one school were assigned to the American Indian Life Skills (AILS) curriculum or to the control group, which received the standard language arts curriculum.</td>
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<tr>
<td><strong>DESCRIPTION</strong></td>
<td>The original sample included 128 freshmen and juniors from an American Indian public high school. Of the total sample, 69 were assigned to the intervention group, and 59 were assigned to the control group. Participants were predominantly female (64%) and ranged from 14 to 19 years old (mean of 15.9 years). At pretest, the control group was significantly less suicidal and less hopeless, compared with the intervention group. To approximate equivalent groups, participants were matched from the two groups at pretest on suicide probability and hopelessness to form the analytic sample; there were 31 participants in each group.</td>
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</table>

**References**

**STUDIES REVIEWED**


**SUPPLEMENTAL AND CITED DOCUMENTS**

*American Indian Life Skills—Youth Resilience Project Brief Description of Scales for Outcome Study.*

**OTHER STUDIES**

None provided.
Resources for Dissemination and Implementation *

* Dissemination and implementation information was provided by the program developer or program contact at the time of review. Profile information may not reflect the current costs or availability of materials (including newly developed or discontinued items). The dissemination/implementation contact for this program can provide current information on the availability of additional, updated, or new materials.

Implementation/Training and Technical Assistance Information

Detailed implementation information was not provided for this program.

Dissemination Information

Detailed dissemination information was not provided for this program.

Summary Table of RFDI Materials

<table>
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Appendix

Evidence Rating Definitions

- **Effective**
  
The evaluation evidence has strong methodological rigor, and the short-term effect on this outcome is favorable. More specifically, the short-term effect favors the intervention group and the size of the effect is substantial.

- **Promising**
  
The evaluation evidence has strong methodological rigor, and the short-term effect on this outcome is favorable. More specifically, the short-term effect favors the intervention group and the size of the effect is substantial.

- **Ineffective**
  
The evaluation evidence has sufficient methodological rigor, but there is little to no short-term effect. More specifically, the short-term effect does not favor the intervention group and the size of the effect is negligible. Occasionally, the evidence indicates that there is a negative short-term effect. In these cases, the short-term effect harms the intervention group and the size of the effect is substantial.