Using Evaluation Findings from the Tennessee’s State-Wide Gatekeeper Training Program

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1. (SAMHSA) Center for Mental Health Services Cooperative Agreement for State-Sponsored Youth Suicide Prevention and Early Intervention (SM 57400-01), Lygia Williams, Principal Investigator, Tennessee Department of Mental Health and Developmental Disabilities (Nashville, TN)

2. (Centers for Disease Control and SAMHSA) Enhanced Evaluation Award, Thomas W. Doub, Principal Investigator, Centerstone Community Mental Health Centers, Inc. (Nashville, TN)
TLC Youth Suicide Prevention and Early Intervention Training

• 90 to 120 minutes
• Question, Persuade, Refer (QPR, Quinnett) method
• Current national and state statistics
• Review of gatekeeper attitudes
• Interactive role play
• Lethality assessment
• Referral and resource information
• Objectives: increase awareness of personal attitudes and their potential impact on helping behavior, develop skills for identifying those at risk, assessing lethality, and making referrals, enhance self-efficacy to intervene with at-risk youth, and learn about local resources
Target Populations

- Education (6,000 school personnel, mostly teachers)
- Child welfare (2,500 staff)
- Foster care (1,500 foster care parents)
- Juvenile justice (1,200 staff in juvenile corrections)
- Health department (900 nurses and nurse practitioners)
- 1,000 undergraduate and graduate students enrolled in social and health science programs
- 200 college/university faculty
- 50 adults who work with gay, lesbian, and bisexual youth
Evaluation Dashboard

- Penetration (number, percent) by region or locale
- Match to target (intended participants reached)
- Training locations, dates, and attendance
- Program and research participation indicators
- Participant characteristics
Domains

Perceived Effectiveness
Satisfaction with Training
Suicide Prevention Knowledge
Self-efficacy
Suicide Preventability
Perceived knowledge of suicide prevention increased from medium (2.0) or less to medium-high (2.5) for most groups; effect sizes ranged from .43 (resource parents) to 1.78 (university faculty)

Suicide Prevention Knowledge

Overall $ES = 1.30$
Overall $R = .54$
Suicide preventability attitudes changed most among university students (ES = .89) and faculty (ES = .63), but remained static among juvenile justice staff.

Suicide Preventability

Overall ES = .27
Overall R = .13
Participants reported feeling fairly comfortable and responsible for discussing suicide with young people at the outset: university faculty reported the most change (ES = .88) whereas resource parents reported the least (ES = .22)

Self Efficacy (Confidence)

Overall $ES = .55$
Overall $R = .27$
All but one participant group indicated strong gains in the development of skills and training, especially university students and faculty ($ES = 2.43, 1.73$). Resource parents reported moderate gains ($ES = .68$).

Overall $ES = 1.51$

Overall $R = .60$
Evaluation Informing School Legislation

Public schools required to provide yearly suicide prevention in-service training

2 hours out of the standard 40 hours of in-service training

Regions, districts, urban vs. rural

Large vs. small group trainings

Standard delivery vs. technology-enhanced training (via television monitors)