



Considering ASIST Evaluation and Research?

LivingWorks believes that evaluation and research play a vital role in the ongoing development of its programs and in building empirical support for their effectiveness. The independence of this work is essential to its integrity. Our commitment is to ensure that those conducting evaluation and research have access to documents that clearly articulate the purpose, scope, and rationale for our programs. This paper on ASIST is part of a series that provides this background on each program. It includes a Program Logic framework that describes the program's formative influences, learning processes, intended outcomes, and anticipated impacts.

Program Overview

Description

ASIST is a two-day, interactive, skills-based workshop that prepares people to provide suicide first aid. Participants learn to apply a model, the *Pathway for Assisting Life* (*PAL*), that guides a suicide first-aid intervention. *PAL* facilitates a collaborative process through which caregivers recognize, acknowledge, and seek to understand the presence of suicide thoughts in others and then work with them to develop a personal SafePlan to keep them safe-for-now. The model features a pivotal turning point where persons thinking about suicide discover their uncertainty about killing themselves and commit to focus on their immediate safety. Participants also consider how attitudes about suicide affect openness to seeking help and the ability to provide help.

ASIST training provides accessible, practical learning for a diverse range of caregivers. The workshop's suicide first-aid model may be applied in everyday relationships and integrated into more formal helping roles. Many organizations incorporate ASIST into the professional development of their staff and volunteers.

Rationale

ASIST derives its rationale from the first-aid paradigm. The primary goal is immediate safety rather than resolution of underlying issues. The intervention process involves a series of steps that work toward safe outcomes, and these steps are guided by a life-assisting pathway that begins within the intervention and continues beyond it.

ASIST is positioned as a community-based training because the need for suicide first aid could present at any time, anywhere. However, it also meets a specific training need for formal helpers who would be expected to incorporate suicide first-aid competencies into their professional practice. The scope of the suicide first-aid intervention is more extensive than the role of identification and referral associated with suicide awareness and alertness programs such as Living-

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Works' safeTALK. The PAL model facilitates a collaborative engagement that seeks sufficient understanding of the person's suicide story to elicit their commitment to safety and develop a SafePlan that is tailored to their needs.

Safety is the defining construct that guides both the helping process and the desired outcome of a suicide first-aid intervention. Safety is purposefully chosen as a readily understandable, positive goal that is achievable, even for people who are not yet ready to choose life. The premise of *ASIST* is that any uncertainty about dying by suicide prioritizes safety-for-now as the immediate goal. Safety provides the time and opportunity to understand and address the painful concerns underlying the person's suicide story in the context of follow-up and ongoing care. A paper¹ on the literature supporting the rationale for *ASIST* and its key concepts is available on the Living-Works website at www.livingworks.net

Mapping Evaluation and Research

Theory of Change

The key features of ASIST, and the rationale behind them, are grounded in a theory of change.² The working assumption is that ASIST training will help participants develop suicide first-aid competencies that enable them to increase the immediate safety of individuals considering suicide. The anticipated outcome for ASIST participants is that they will become proficient in suicide first aid and that this will have a positive impact on persons with thoughts of suicide, increasing their immediate safety.

A significant challenge for evaluation and research is that the people whom the training is ultimately designed to benefit are not themselves in the training. Accordingly, factors influencing the program's ultimate impact on persons with thoughts of suicide are identified and described so they can be accurately measured or explored. The relationship between or among these factors is also of research and evaluation interest.

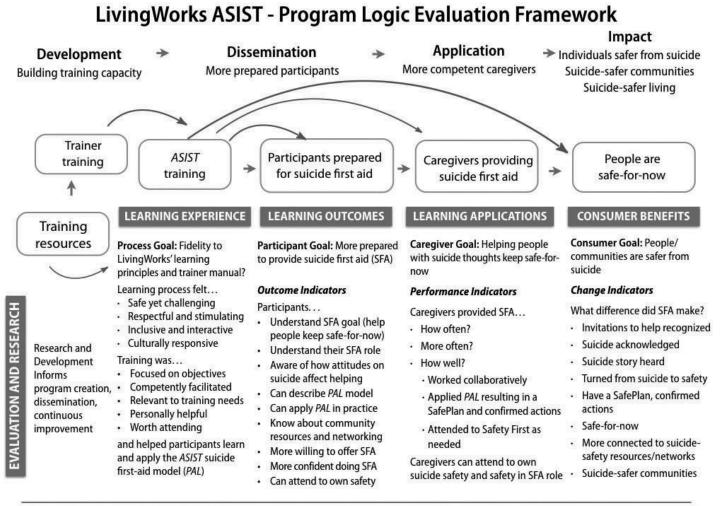
Since Program Logic³ is a widely accepted way of mapping these influences and relationships, LivingWorks has developed a logic framework for ASIST. We have identified the development process, the personal and material resources, the learning experience, the learning outcomes, participants' performance in applying learning, and the impact on those receiving help as key domains of interest.

ASIST Program Logic

Key elements of the ASIST Program Logic are described below and mapped into the graphic that follows.

- Inputs such as training materials and trainers' training are designed to provide a consistent, quality learning experience aligned with the program's values and objectives. The ASIST literature review outlines conceptual inputs informing program development. Rothman's research and development framework has guided the development of all LivingWorks training programs.
- The learning experience reflects the quality and safety of the workshop environment. Evaluations elicit feedback on whether the training was competently facilitated, reflected adult learning principles, resulted in a clear understanding of core concepts, was perceived as worthwhile, and helped develop a working knowledge of PAL.
- Learning outcomes focus on what participants learned and whether the program's learning objectives were met. The overarching goal of ASIST is that participants learn to provide suicide first aid. Participants' willingness, confidence, and preparedness to apply PAL are key outcomes of interest.
- Learning applications explore how participants applied program learning. It is helpful to know what difference ASIST made to their willingness to offer suicide first aid and the how often they provided it. Helpers could be invited to share their experiences of using the model and their observations about how it informed and aided their ability to help. Investigations into fidelity in applying the model might also be considered as a post-workshop quality assurance measure.
- The impact of these interventions (and indirectly the training) is what matters most. Provider, consumer, and observer perspectives all contribute to understanding impact. The fundamental question is whether people who received a PAL intervention experienced an increase in their immediate safety and clarity about next steps identified within the SafePlan. Their reflections on the helping process and the value of tools such as the SafePlan offer insight into what consumers experienced as most helpful.

The ASIST Program Logic graphic proposes some indicators for each of the domains of interest that are aligned with design intentions. We invite feedback from evaluators and researchers on how the potential range of these indicators can be expanded. Training follow-up may also affect outcomes, such as whether organizations hosting training provide subsequent support for ASIST-trained helpers through their intervention policies and practices. The graphic aims to illustrate the range of possible areas for research and evaluation focus, as discussed above, rather than limit or conclusively define them.



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The Contributions of Evaluation and Research

There will be overlap between evaluation and research. However, we anticipate that evaluations will focus more on program effectiveness and improvements—assessing whether, and to what extent, ASIST offers value and benefits consistent with its objectives. Results will help improve program quality, fidelity, and effectiveness. Value for money and social return on investment may also feature along with comparing the unique contributions of ASIST with alternative training programs. A document mapping ASIST to the National Action Alliance for Suicide Prevention's workforce training guidelines may be accessed on the LivingWorks website. We expect research to investigate the working assumptions, concepts, and predicted consumer impacts of ASIST and examine factors affecting implementation fidelity following workshop attendance. Research will determine the level of empirical support for the program's theory of change and its intended benefits. It will also contribute to knowledge about what works in suicide intervention training and which factors are most strongly associated with good outcomes and impacts. A significant body of evaluation and research on ASIST is already available. A 2010⁶ paper, reviewing 20 key studies, and references on subsequent research are available on LivingWorks' website.

Diverse Methodologies

LivingWorks encourages a diverse range of methodologies in conducting evaluation and research on its programs. Quantitative methodologies will build a growing body of research evidence that collectively supports robust findings about whether and how effectively the training supports outcomes and impacts consistent with its objectives. We hope these investigations will be complemented by phenomenological qualitative inquiries, such as case studies, that illustrate how training is experienced and applied and provide a nuanced understanding of the impact of *ASIST* interventions on those who provide and receive them. Mixed methods strategies will be able to tap into the potential of both approaches. A paper⁷ on LivingWorks' website outlines some of our aspirations for developing a broad view of evidence featuring quantitative and qualitative approaches. A document8 on LivingWorks' core beliefs summarizes our guiding values.

The ASIST Program Logic aims to provide a sufficiently broad framework within which evaluators and researchers can identify their specific contributions and compare their findings with those of others. We also hope that it stimulates ideas about additional avenues of research and evaluation inquiry. Hopefully, it creates a forum for dialogue about what works, what the critical success factors are, how training can be improved, and which areas require further investigation. Our best guidance will come from those who participate in our training programs, and ultimately from the persons with thoughts of suicide whom they seek to help.

While assembling a repertoire of well-validated existing measures relevant to the program, we also intend to develop, trial, and validate research measures specifically aligned with the program's concepts, model, processes, and objectives.

We encourage anyone researching or evaluating any of our training programs to contact us at research@livingworks.net. We can provide relevant background on our values and programs, share information about work already done, offer thoughts on work yet to be done and, where possible, connect people with others who are evaluating or researching our programs. Beyond this collaborative role, we believe it is important to respect the independence of the work being done and the reporting of key findings.

References

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- 2. The rationale and methodology for this approach have been articulated in many settings. See, for example, Rogers, P. (2014). *Theory of change: Methodological briefs Impact evaluation no. 2.* Florence, Italy: UNICEF Office of Research.
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