



ASIST

January 14, 2013 –  
December 6, 2016

# What Is ASIST?

- Applied Suicide Intervention Skills Training
- A two-day workshop in “suicide first aid”
- Teaches participants to recognize when someone may have thoughts of suicide and work with them to create a plan that will support their immediate safety.
- Anyone 16 or older can learn and use the ASIST model.

# ASIST Goals and Objectives

- Understand the ways that personal and societal attitudes affect views on suicide and interventions.
- Provide guidance and suicide first aid to a person at risk in ways that meet their individual safety needs.
- Identify the key elements of an effective suicide safety plan and the actions required to implement it.

# ASIST Goals and Objectives

- Appreciate the value of improving and integrating suicide prevention resources into the community at large.
- Recognize other important aspects of suicide prevention including life-promotion and self-care.



# Elements of ASIST

- Presentations and guidance from two LivingWorks-registered trainers
- A scientifically-proven intervention model
- Audiovisual learning aids
- Group discussions
- Skill practice (role play) and development

# ASIST Provided by SPTF

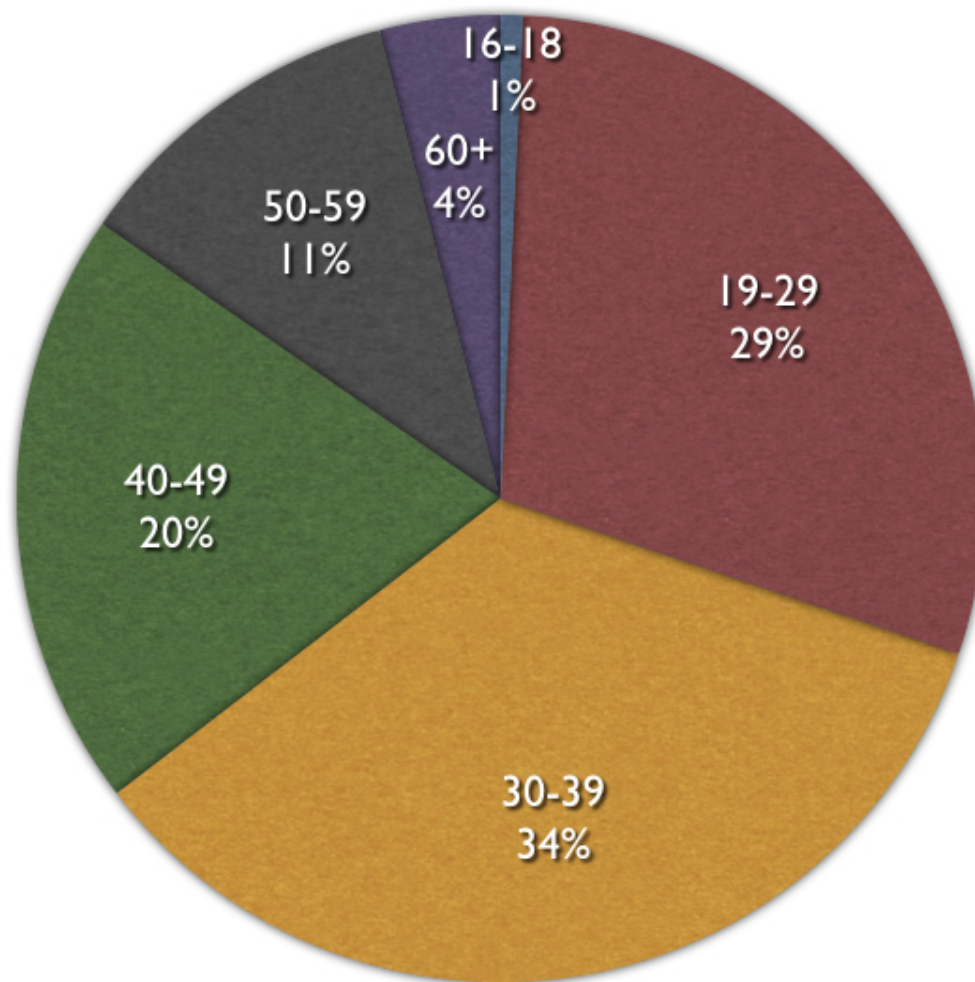
- 37 trainings from January 14, 2013 through December 3, 2016. Free of charge.
- These included special trainings for specific groups, including veterans and personnel of Naval Air Station Lemoore, the Tulare County Office of Education, Visalia Unified School District, Porterville College, Tulare County Child Welfare Services, and the Tule River Indian Reservation.

# Evaluation

- Participants are asked to complete three surveys:
- “Pre Survey” filled out right before the training.
- “Post Survey” filled out immediately afterward.
- “Follow-Up Survey” completed online approximately six months following the training.
- Largely based on questionnaires from an evaluation of ASIST in Scotland in 2007 (used with permission).

# Participants By Age

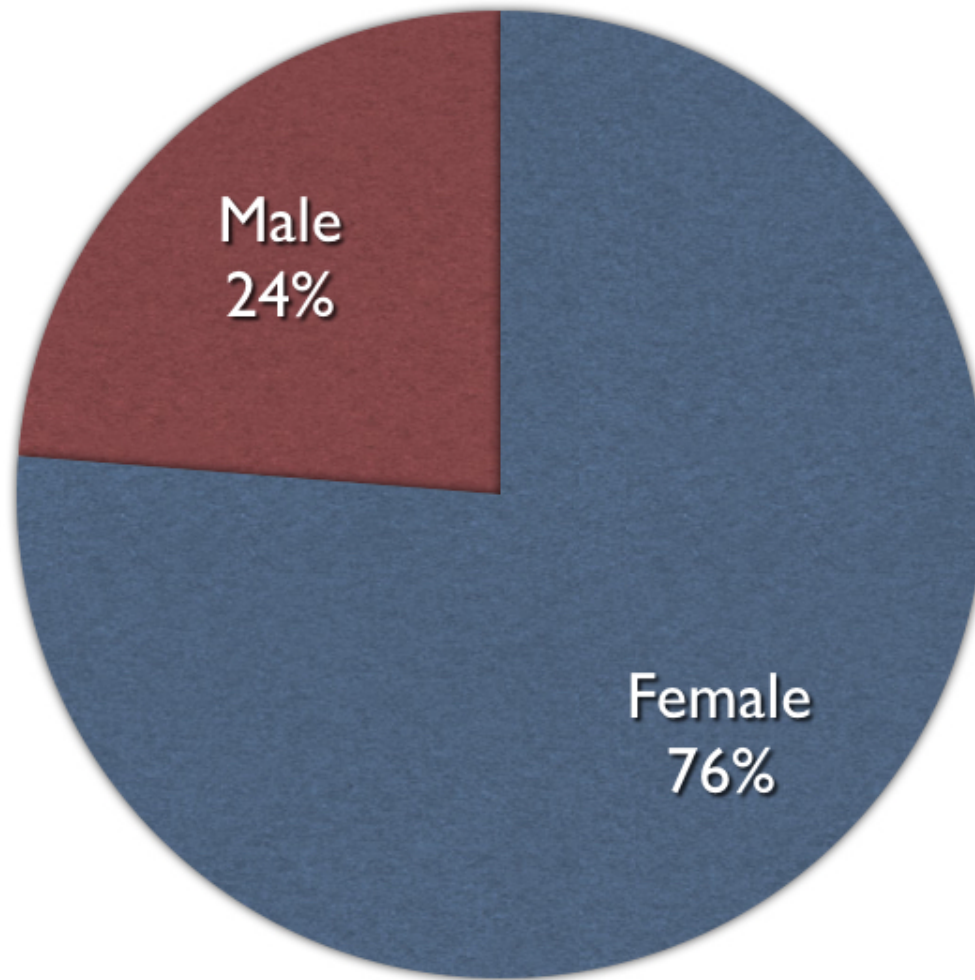
ASIST, January 14, 2013 - December 3, 2016



Sample size: 669

# Participants By Sex

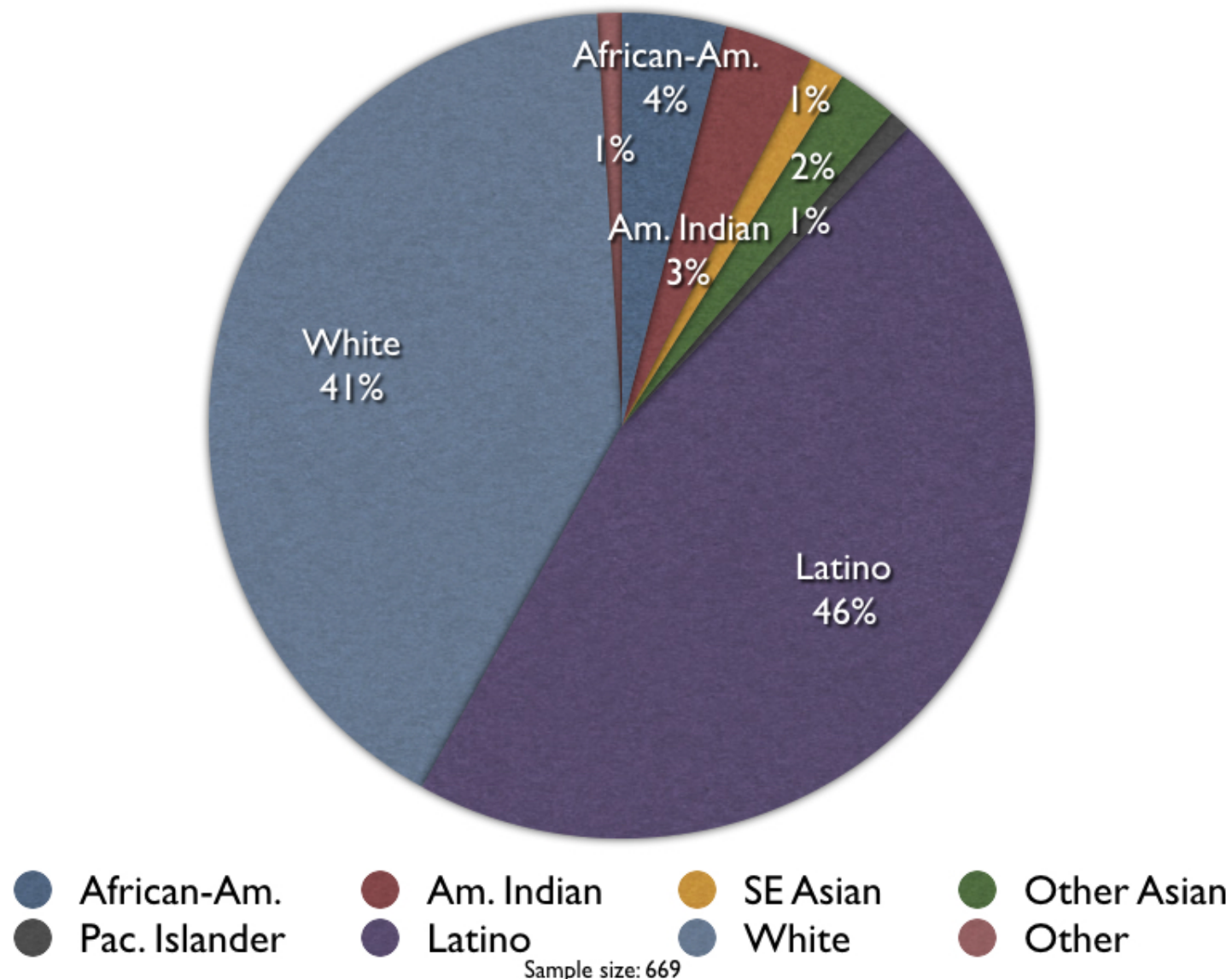
ASIST, January 14, 2013 - December 3, 2016



Sample size: 670

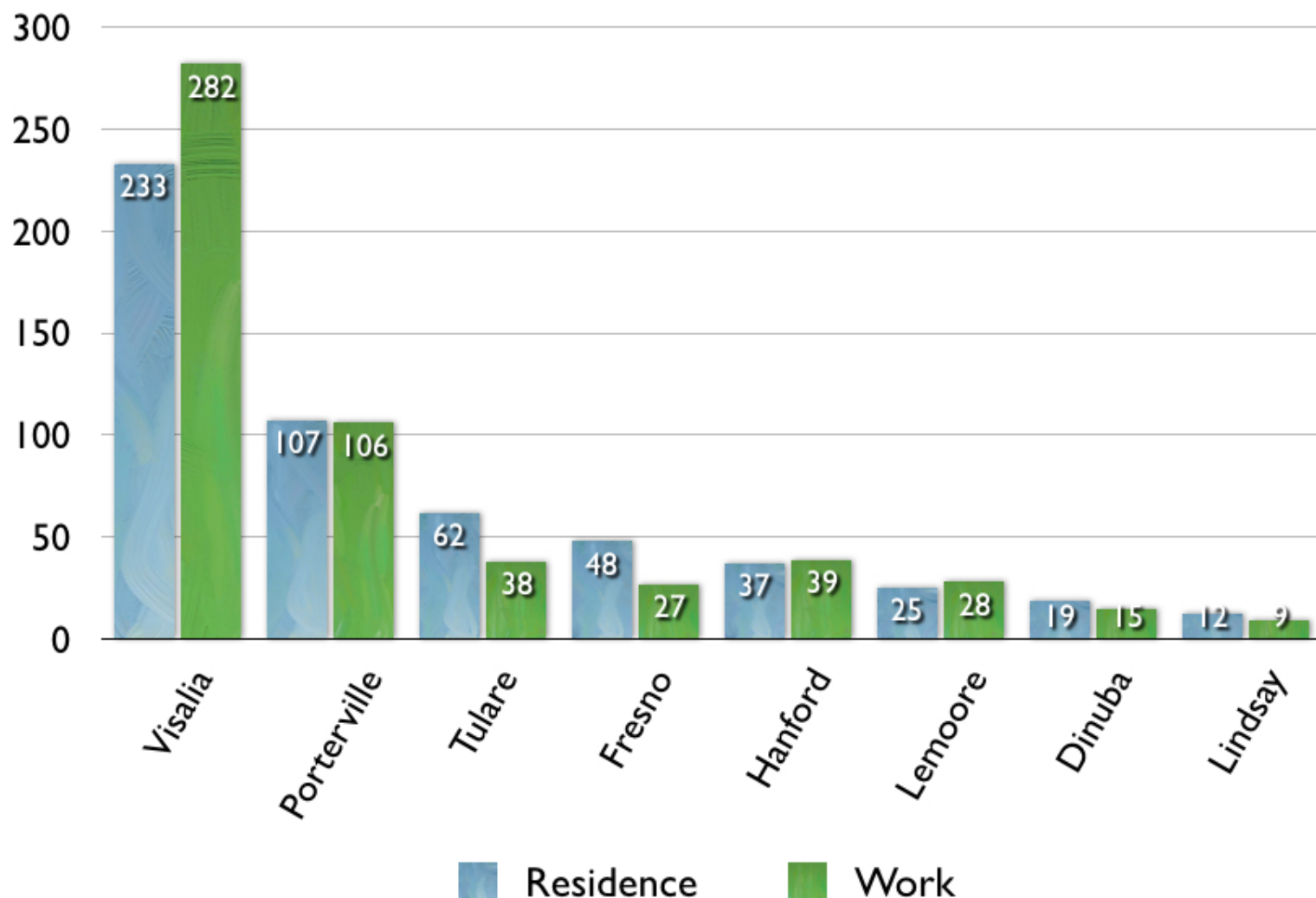
# Participants By Race/Ethnicity

ASIST, January 14, 2013 - December 3, 2016



# Top Participant Places of Residence and Work

ASIST, January 14, 2013 - December 3, 2016

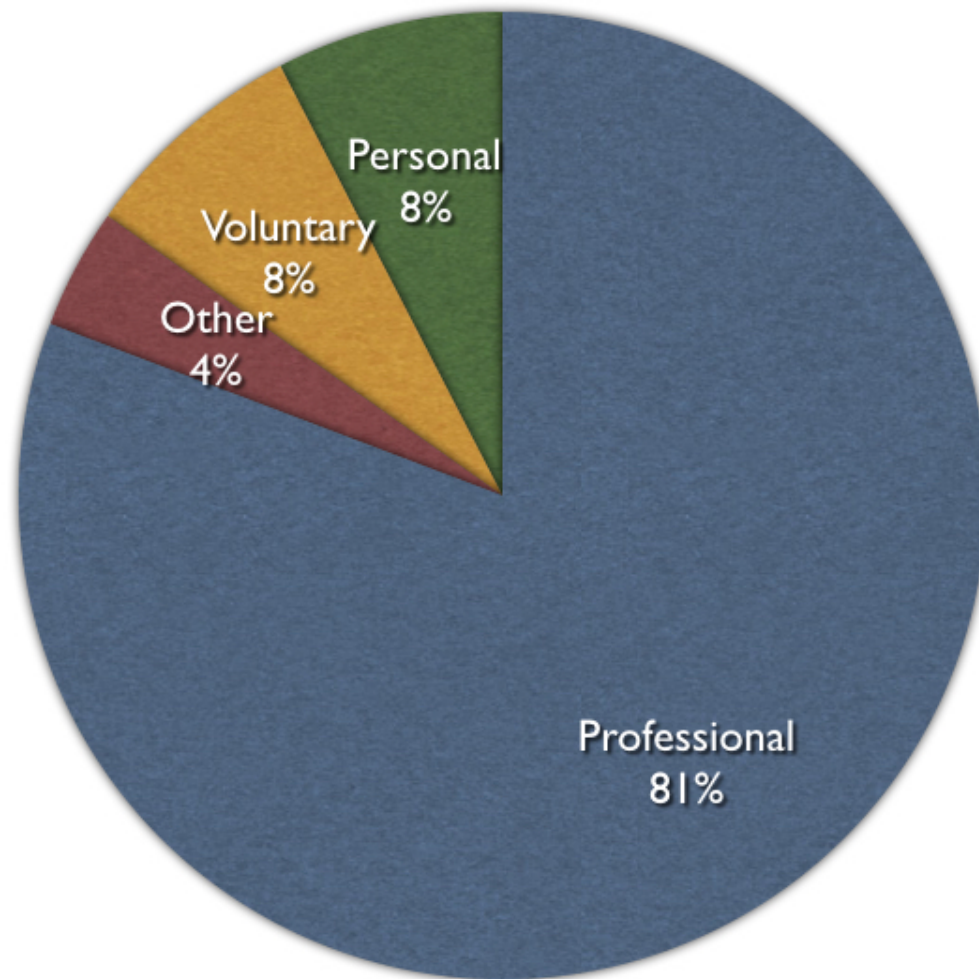


Sample sizes: 669 (residence), 603 (work)



# Capacity in Which Participants Attended

ASIST, January 14, 2013 - December 3, 2016

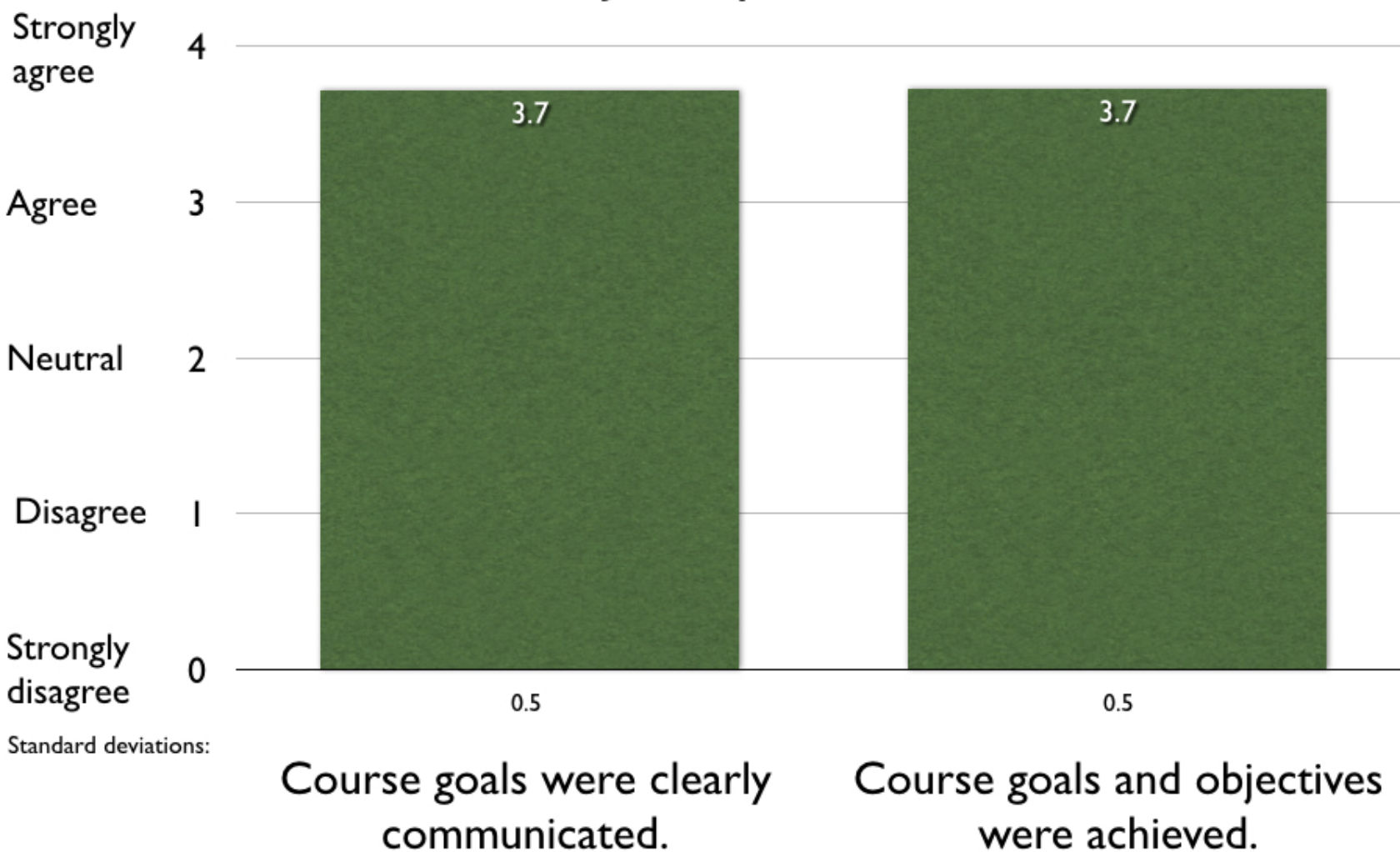


Sample size: 659



# Training Feedback, Part I

Post Means, ASIST, January 14, 2013 - December 3, 2016

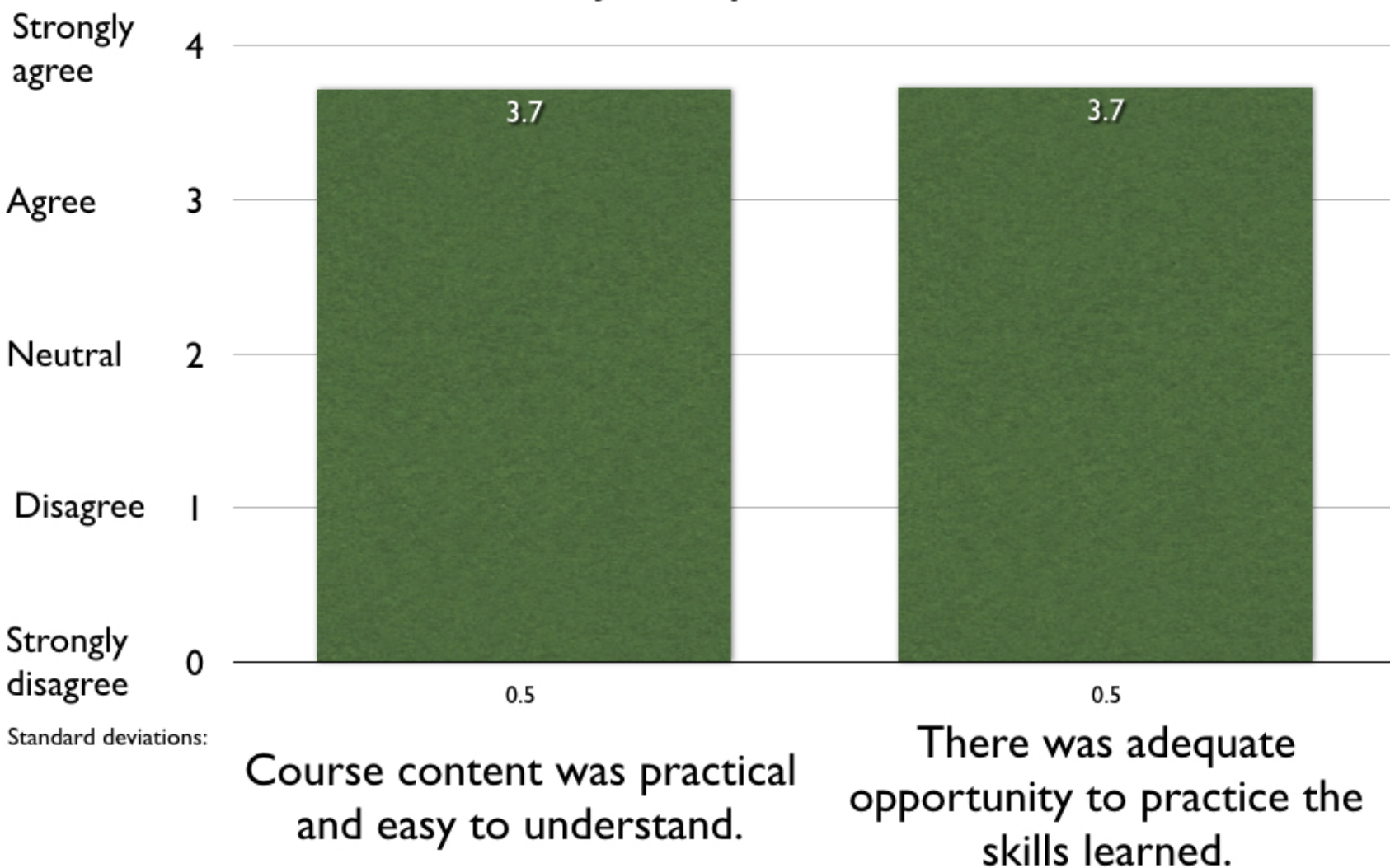


Standard deviations:

Sample sizes: 635, 634

# Training Feedback, Part 2

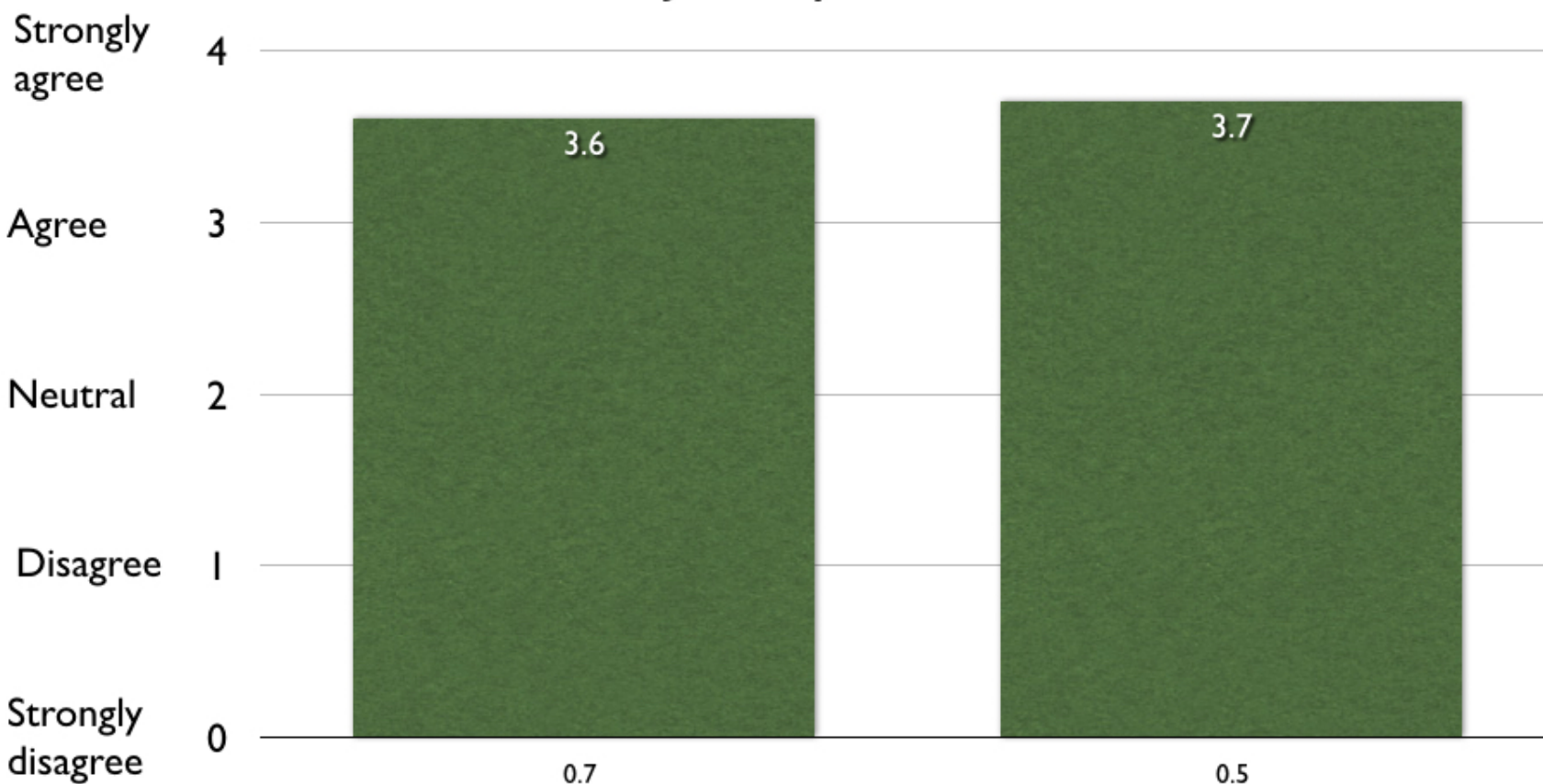
Post Means, ASIST, January 14, 2013 - December 3, 2016



Sample sizes: 634, 635

# Training Feedback, Part 3

Post Means, ASIST, January 14, 2013 - December 3, 2016



Standard deviations:

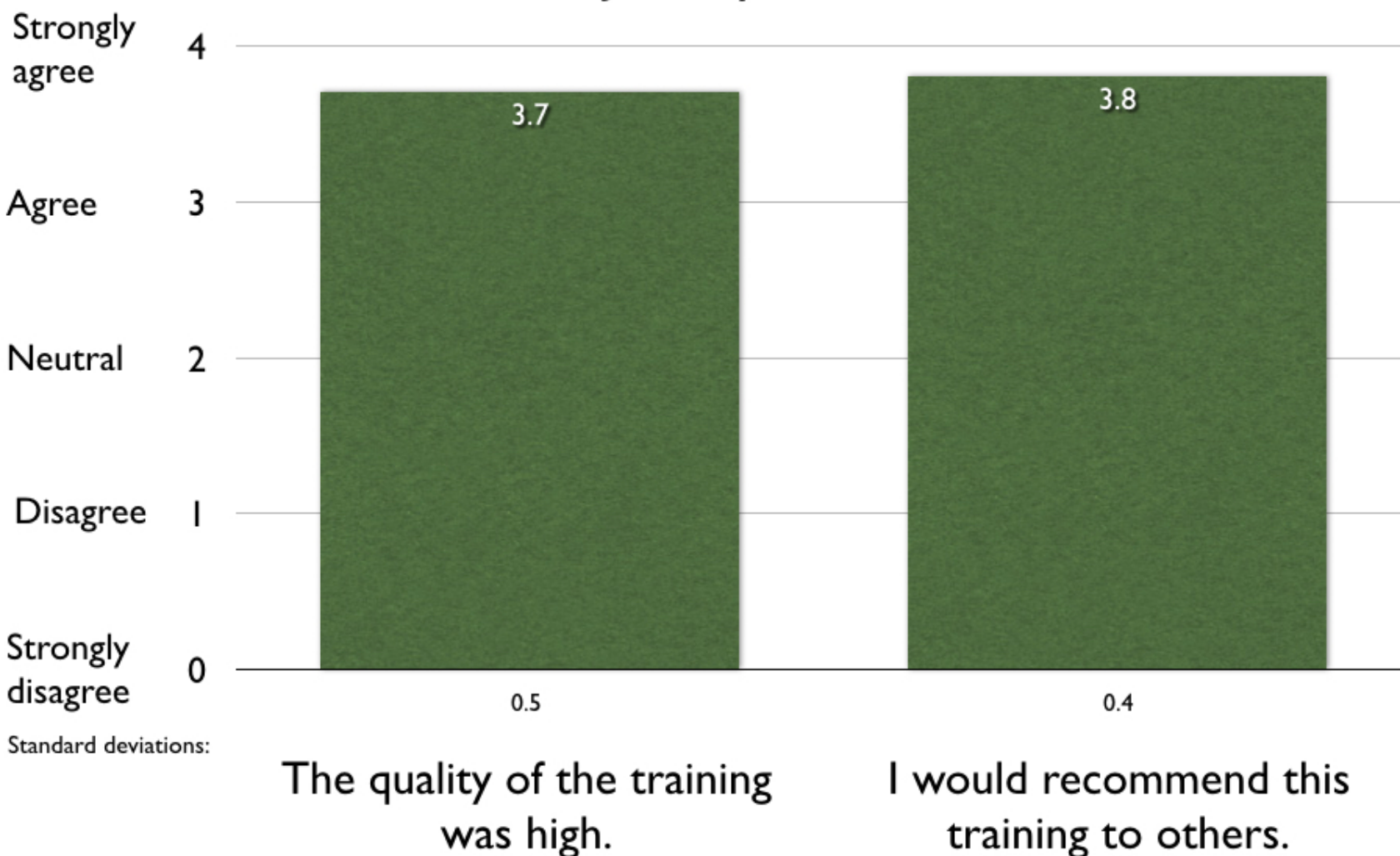
I learned a lot in this training  
that I did not know before.

The training was a good  
use of my time.

Sample size: 635

# Training Feedback, Part 4

Post Means, ASIST, January 14, 2013 - December 3, 2016

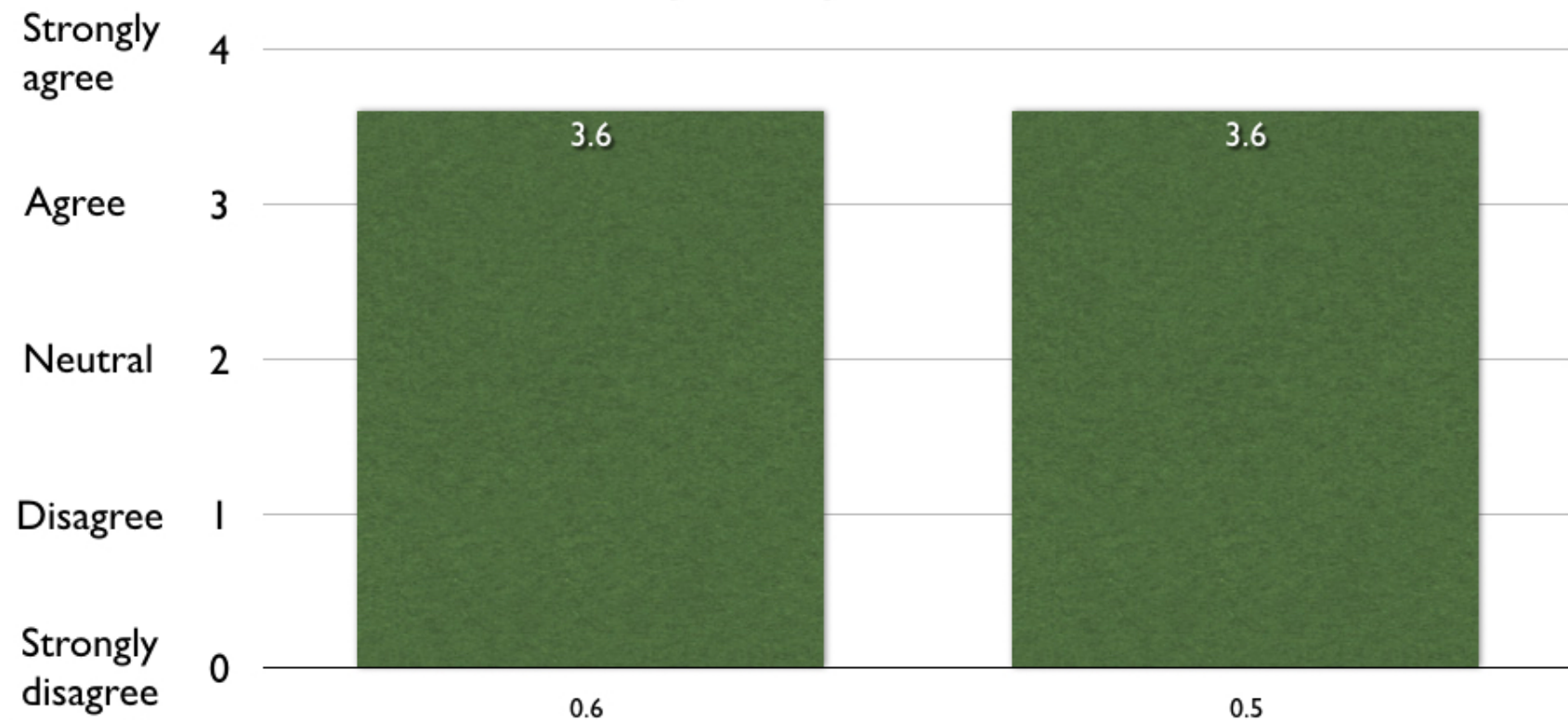


Sample sizes: 628, 629



# Increased Confidence, Part I

Post Means, ASIST, January 14, 2013 - December 3, 2016



Standard deviations:

**As a result of this training, I feel more confident that I can ...**

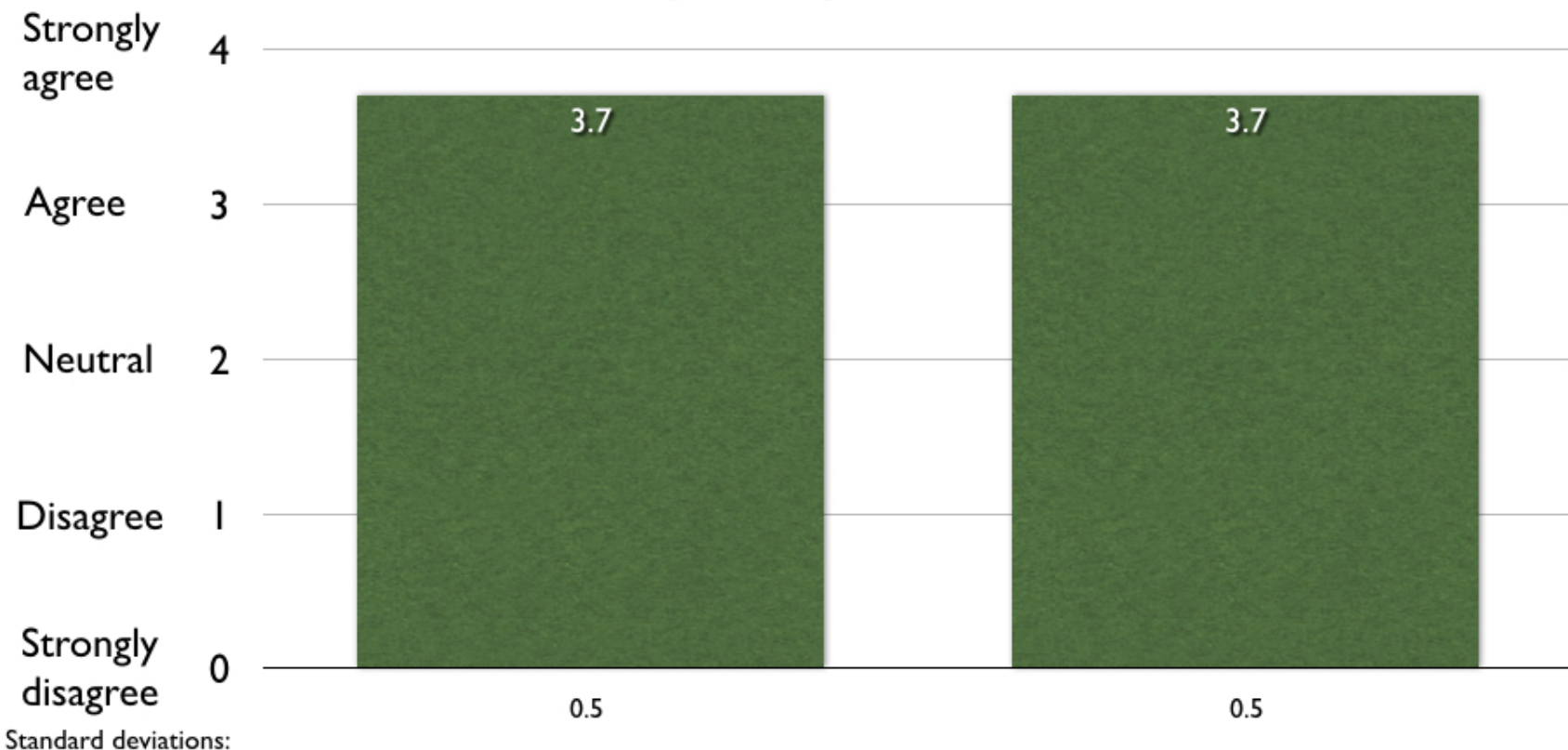
... recognize the signs that  
someone may be at risk of  
suicide

... reach out to someone  
who may be at risk of  
suicide.

Sample size: 630

# Increased Confidence, Part 2

Post Means, ASIST, January 14, 2013 - December 3, 2016



**As a result of this training, I feel more confident that I can ...**

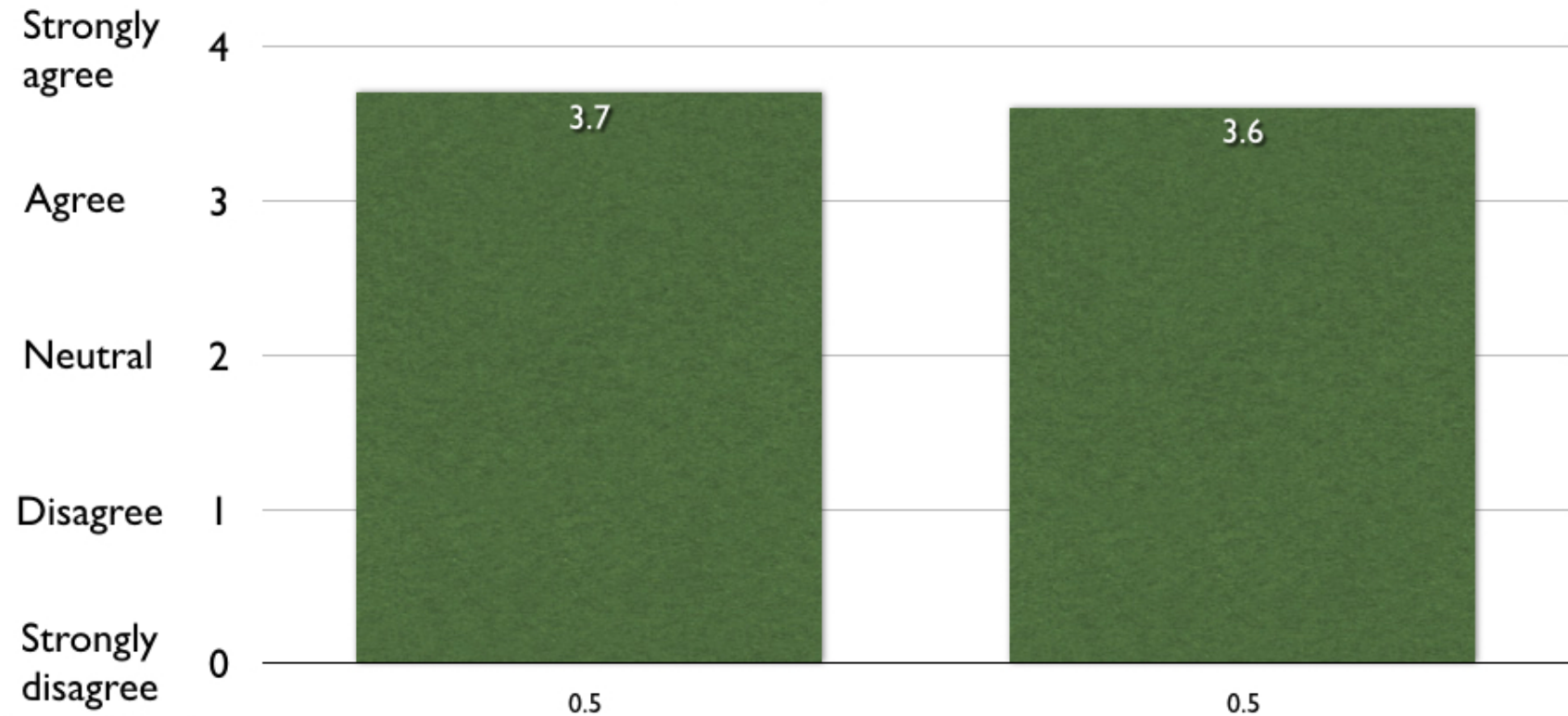
... ask a person whether she/  
he is considering killing  
herself/himself.

... explore with someone  
their reasons for wanting to  
live or die.

Sample sizes: 629, 625

# Increased Confidence, Part 3

Post Means, ASIST, January 14, 2013 - December 3, 2016



Standard deviations:

**As a result of this training, I feel more confident that I can ...**

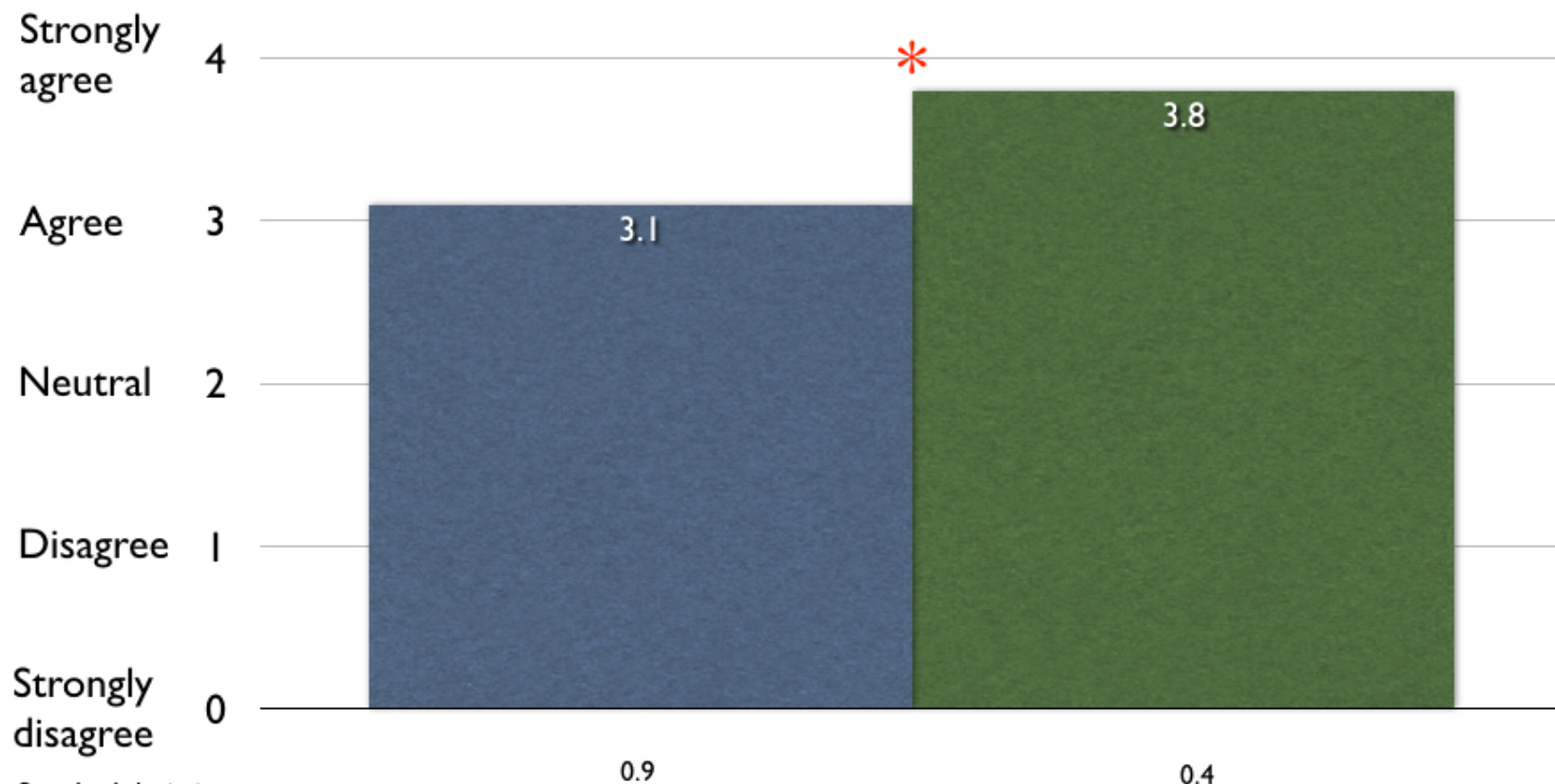
... review a person's risk of suicide.

... make a "safeplan" with someone at risk of suicide.

Sample size: 630

# Suicide Intervention Responses, Part I

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016



If a person's words and/or behaviors suggest the possibility of suicide, I would ask directly if he or she is thinking of suicide.

■ Pre ■ Post

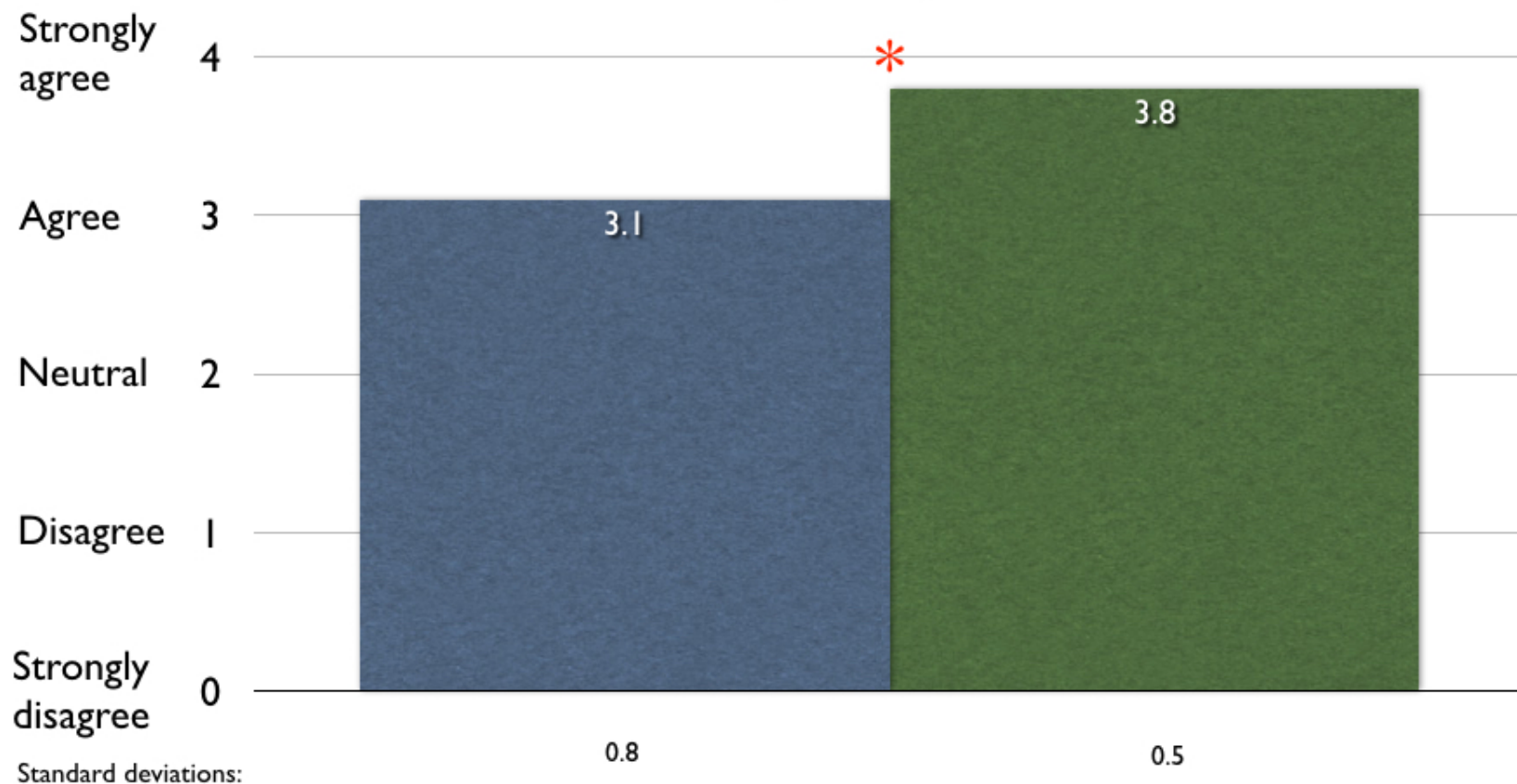
\*There is a significant difference between the pre and post mean responses (Wilcoxon signed-rank test, 99% confidence interval).

Sample size: 581



# Suicide Intervention Responses, Part 2

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016



If someone told me he or she were thinking of suicide,  
I would do a suicide intervention.

Pre

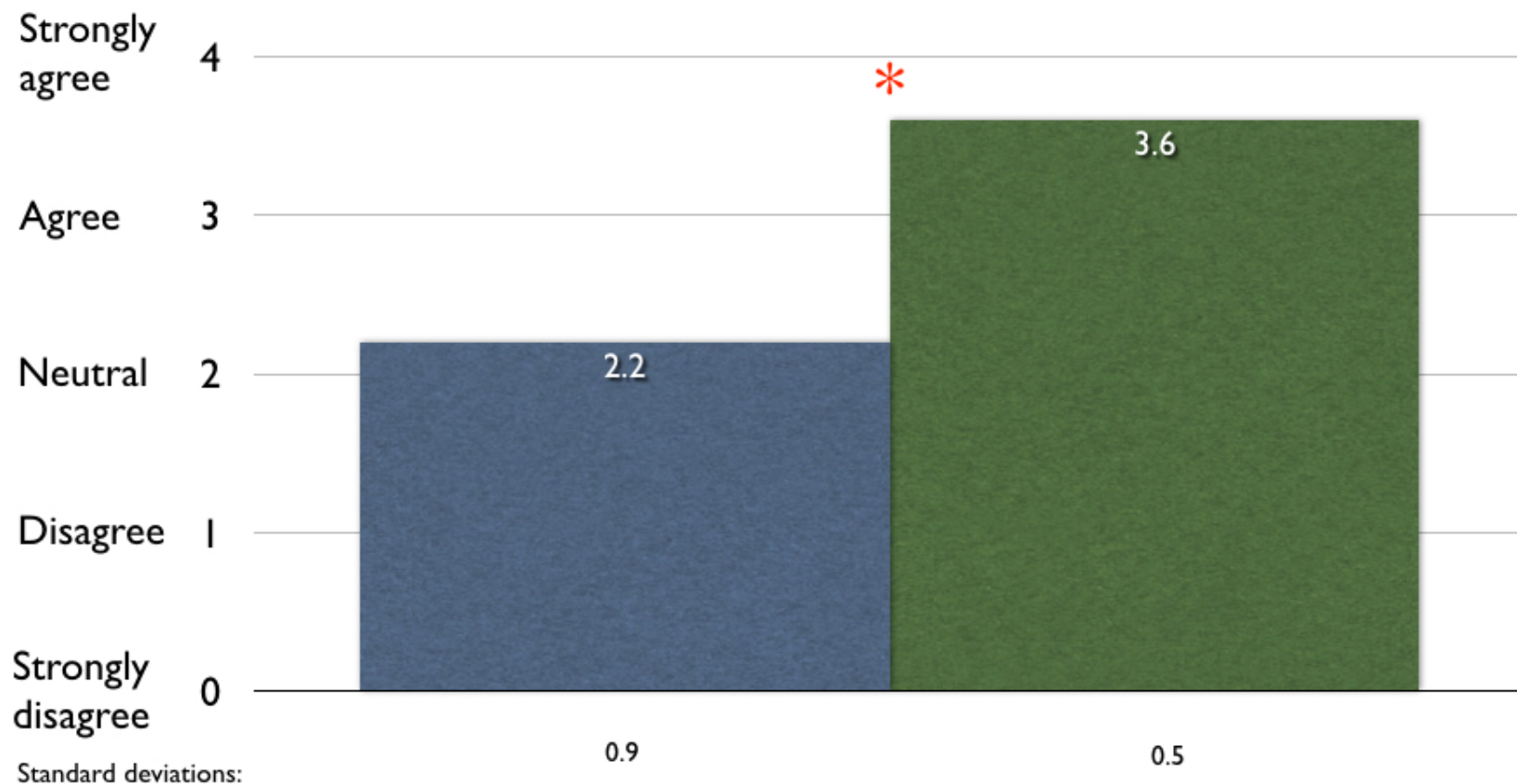
Post

\*There is a significant difference between the pre and post mean responses  
(Wilcoxon signed-rank test, 99% confidence interval).

Sample size: 576

# Suicide Intervention Responses, Part 3

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016



I feel **prepared** to help a person at risk of suicide.

Pre

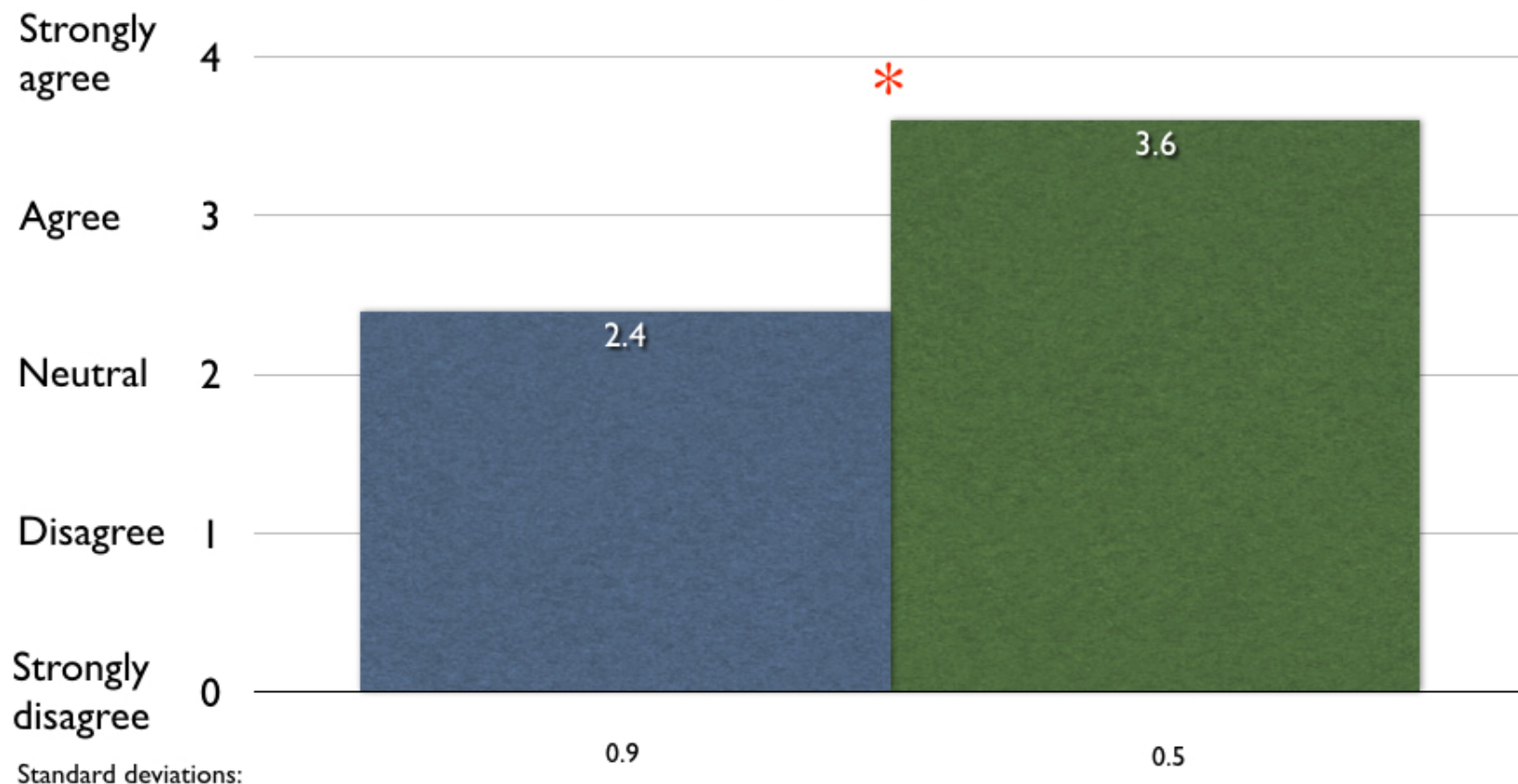
Post

\*There is a significant difference between the pre and post mean responses (Wilcoxon signed-rank test, 99% confidence interval).

Sample size: 581

# Suicide Intervention Responses, Part 4

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016



I feel **confident** I could help a person at risk of suicide.

■ Pre

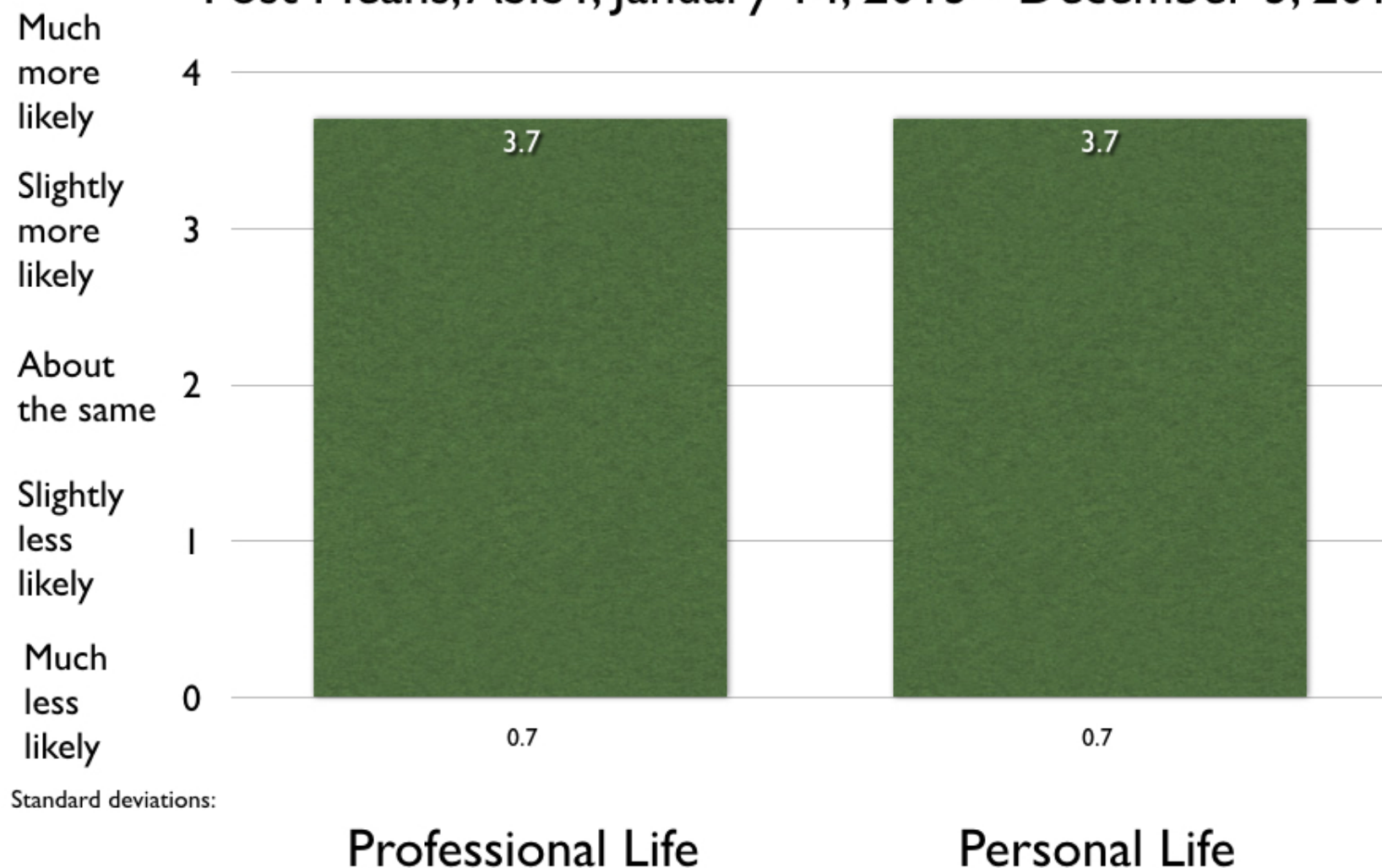
■ Post

\*There is a significant difference between the pre and post mean responses (Wilcoxon signed-rank test, 99% confidence interval).

Sample size: 584

# Self-Reported Likelihood of Intervention

Post Means, ASIST, January 14, 2013 - December 3, 2016

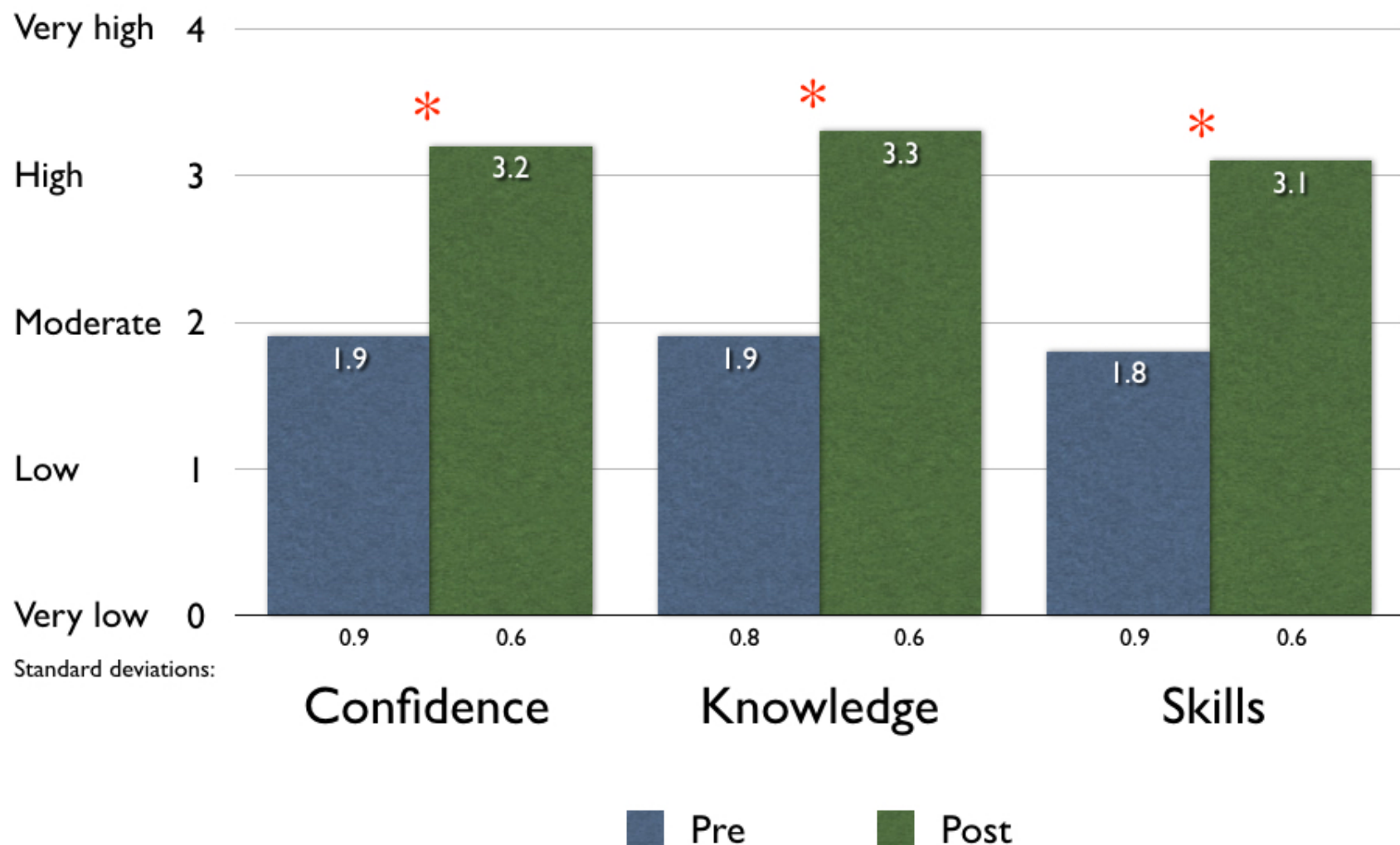


Sample sizes: 630, 634



# Self-ratings in Relation to Intervening with Someone at Risk of Suicide

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016



\*There is a significant difference between the pre and post mean responses (Wilcoxon signed-rank test, 99% confidence interval).

Sample sizes: 591, 579, 577

# Self-ratings in Relation to Intervening with Someone at Risk of Suicide

Post and Six-Month Follow-Up Means, ASIST, Jan. 14, 2013 - Dec. 3, 2016

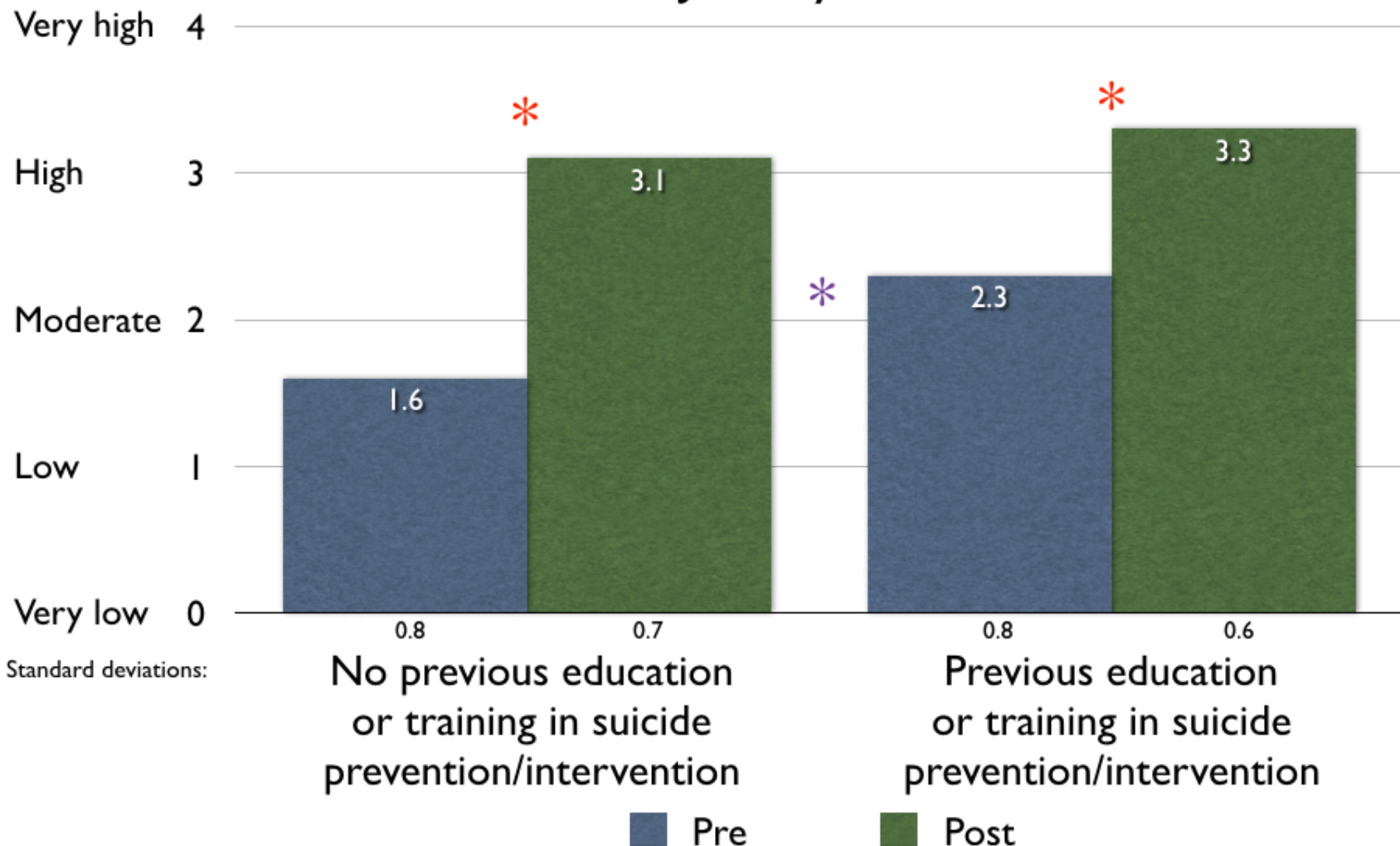


\*There is a significant difference between the post and follow-up mean responses (Wilcoxon signed-rank test, 99% confidence interval).

Sample sizes: 129, 127, 124

# Self-ratings of confidence in relation to intervening with someone at risk of suicide

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016



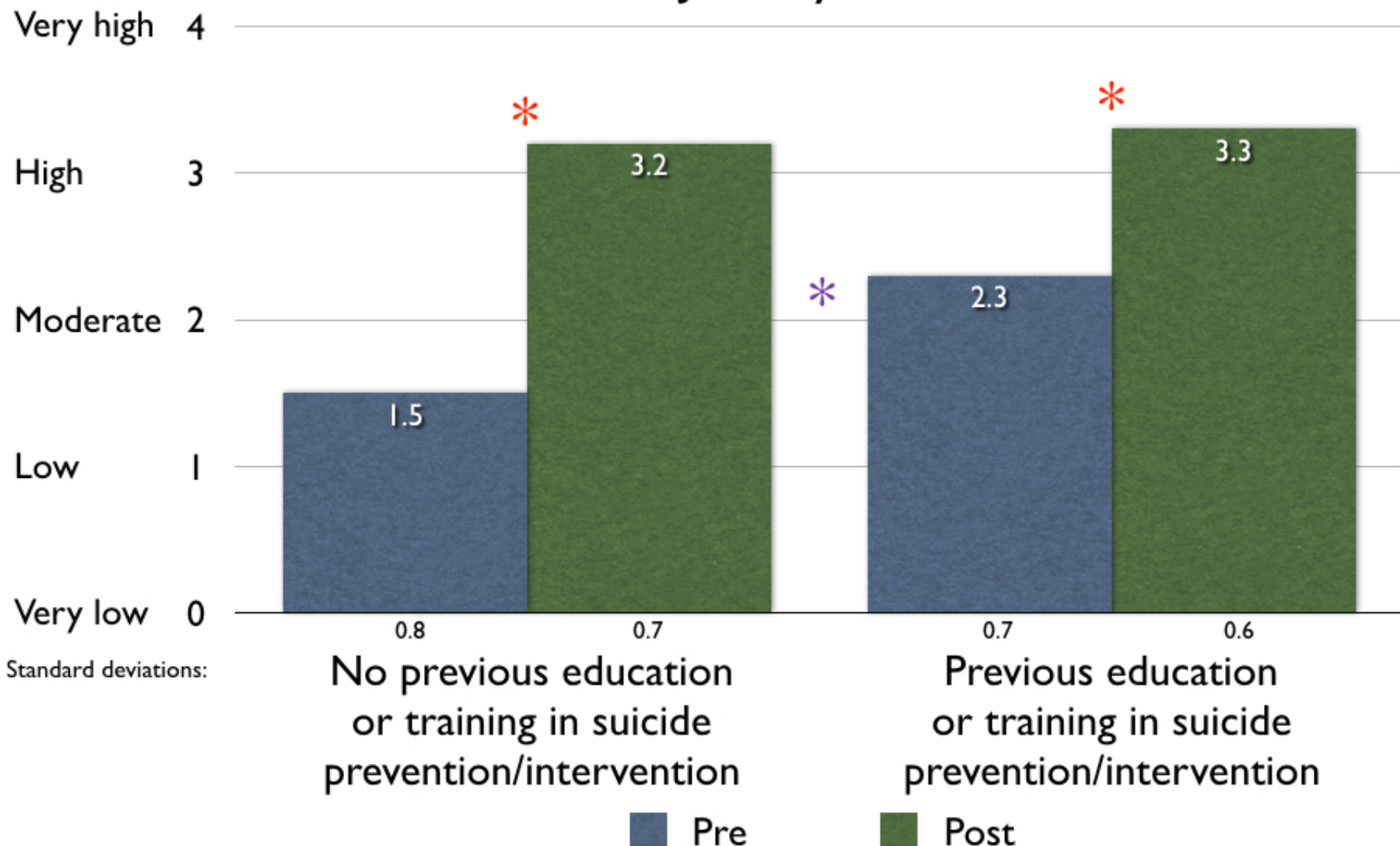
\*There is a significant difference between the pre and post mean responses (Wilcoxon signed rank test, 99% conf. interval).

\*There is a significant difference in the changes in confidence between the two groups (Hotelling's T-squared, 99% conf.).

Sample sizes: 302, 279

# Self-ratings of knowledge in relation to intervening with someone at risk of suicide

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016



\*There is a significant difference between the pre and post mean responses (Wilcoxon signed rank test, 99% conf. interval).

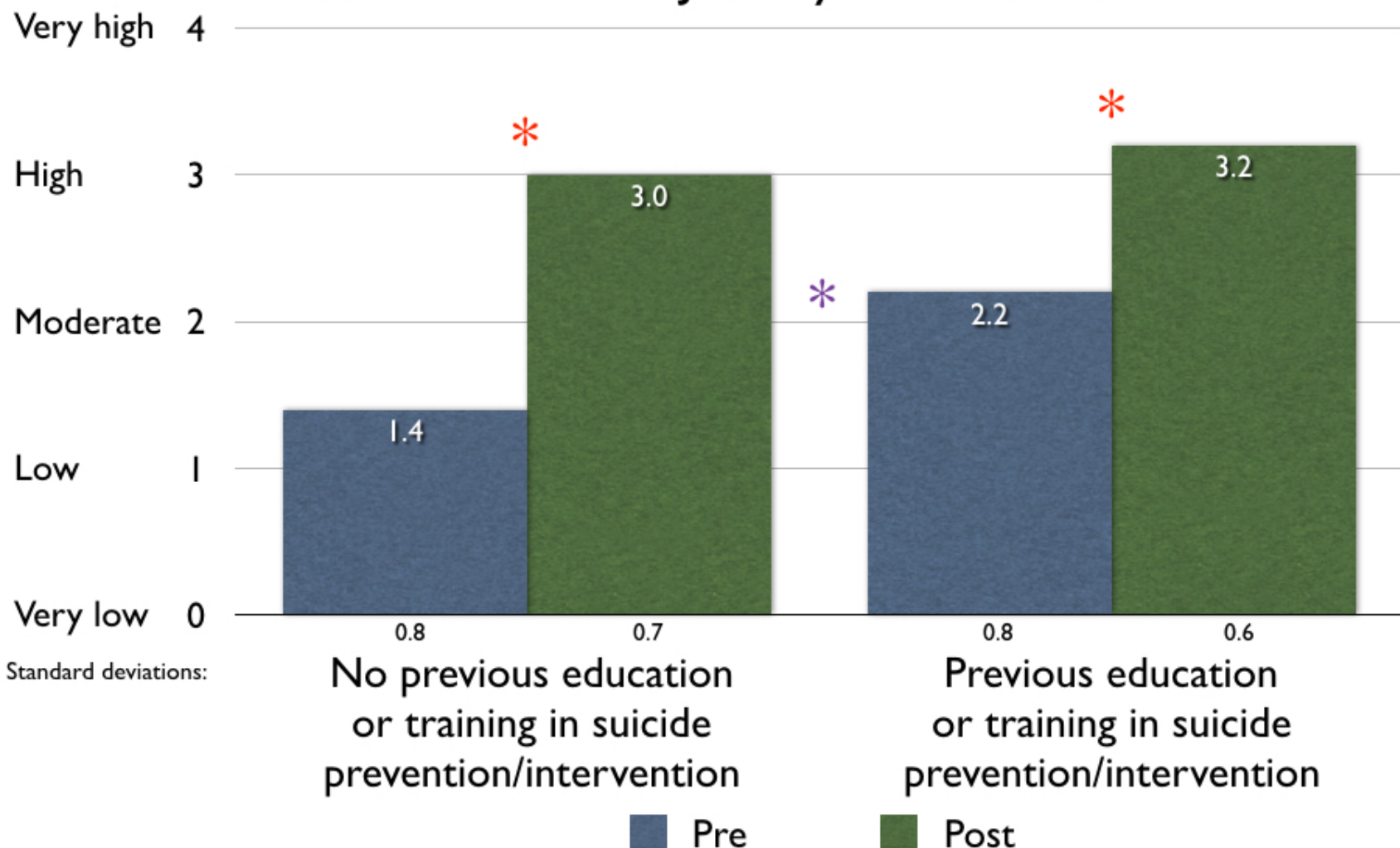
\*There is a significant difference in the changes in knowledge between the two groups (Hotelling's T-squared, 99% conf.).

Sample sizes: 296, 273



# Self-ratings of skills in relation to intervening with someone at risk of suicide

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016



\*There is a significant difference between the pre and post mean responses (Wilcoxon signed rank test, 99% conf. interval).

\*There is a significant difference in the changes in skills between the two groups (Hotelling's T-squared, 99% conf.).

Sample sizes: 295, 271

# The Stigma of Mental Illness

- “Stigma” derives from the Greek word *stigmata*, which refers to “a mark of shame or discredit; a stain, or an identifying mark or characteristic.”
- Public stigma of mental illness: “The harmful effects to people with mental illness when the general population endorses the prejudice and discrimination of mental illness.”
- Other kinds of mental illness stigma include self-stigma and label avoidance.

# Survey Section on the Public Stigma of Mental Illness

- Included in the Pre and Post surveys.
- Questions written by Dr. Patrick Corrigan, one of the foremost researchers on the stigma of mental illness.

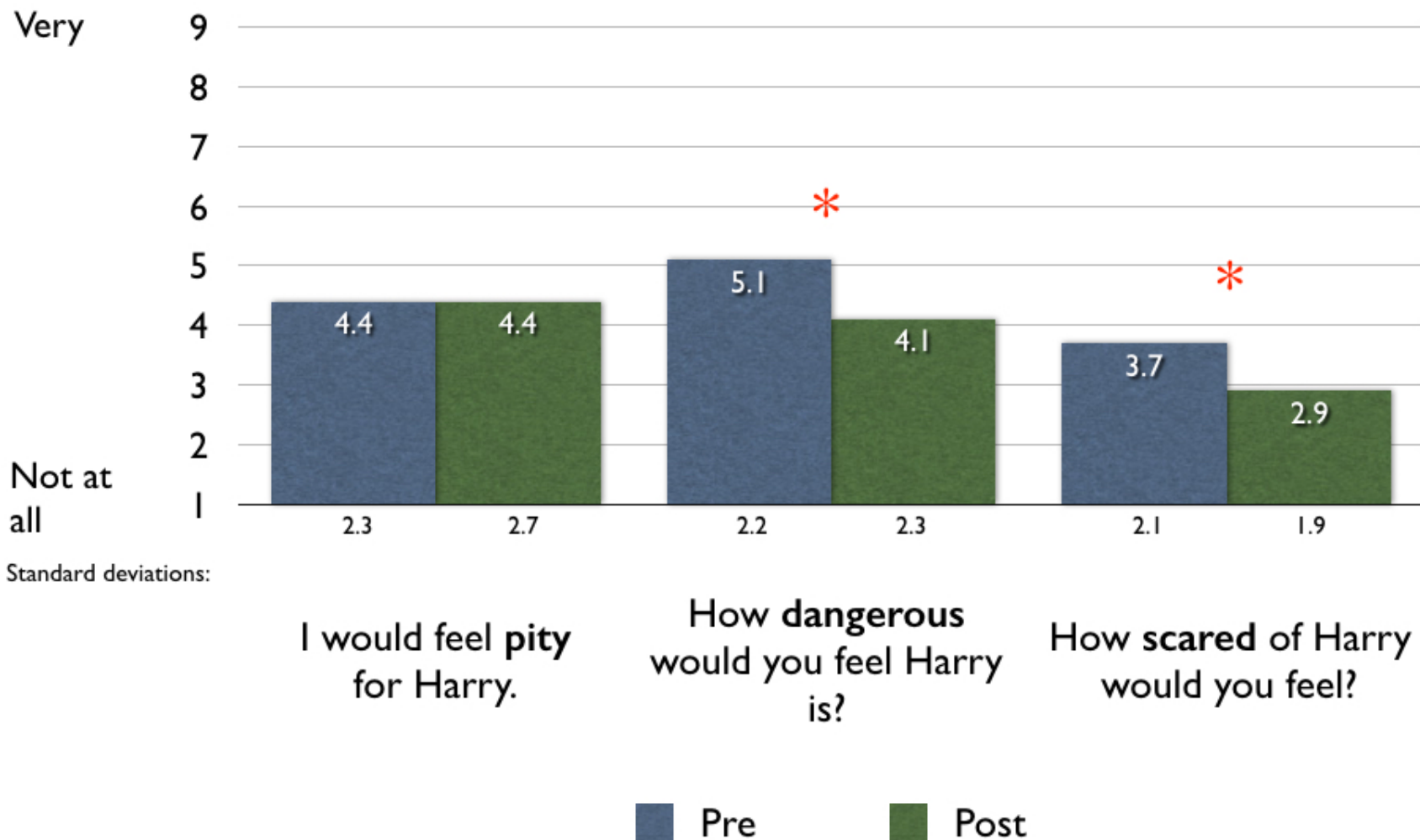
# Survey Section on the Public Stigma of Mental Illness

- Introductory paragraph:

“Harry is a 30 year-old single man with schizophrenia. Sometimes he hears voices and becomes upset. He lives alone in an apartment and works as a clerk at a large law firm. He has been hospitalized six times because of his illness.”

# Mental Illness Stigma Attribution, Part I

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016

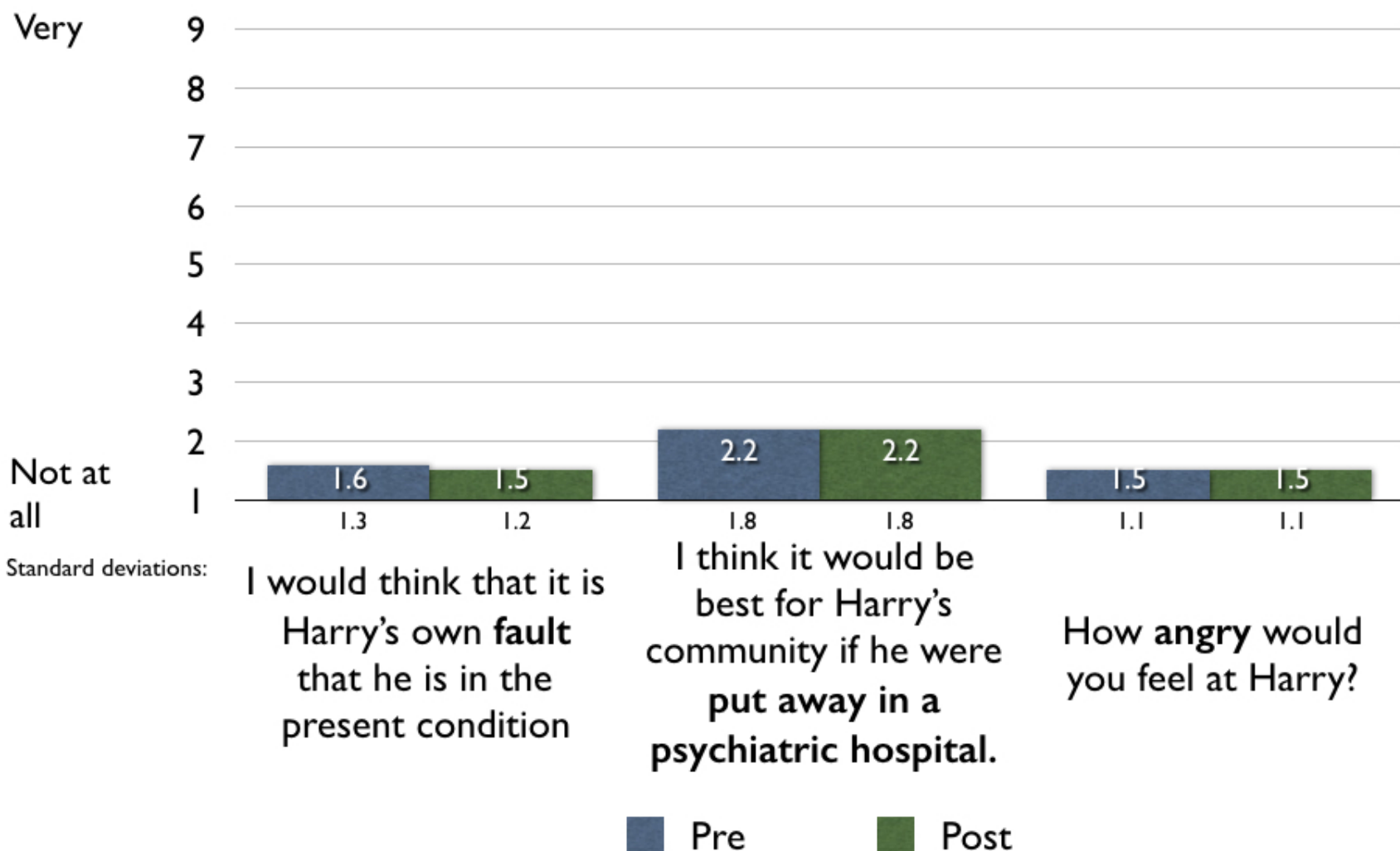


\*There is a significant difference between the pre and post mean responses (Wilcoxon signed-rank test, 99% confidence interval).

Sample sizes: 566, 575, 575

# Mental Illness Stigma Attribution, Part 2

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016



# Mental Illness Stigma Attribution, Part 3

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016

Definitely  
would  
**NOT**  
help

9  
8  
7  
6  
5  
4  
3  
2  
1

3.8

3.4

2.7

3.0

Definitely  
would  
help

Standard deviations:

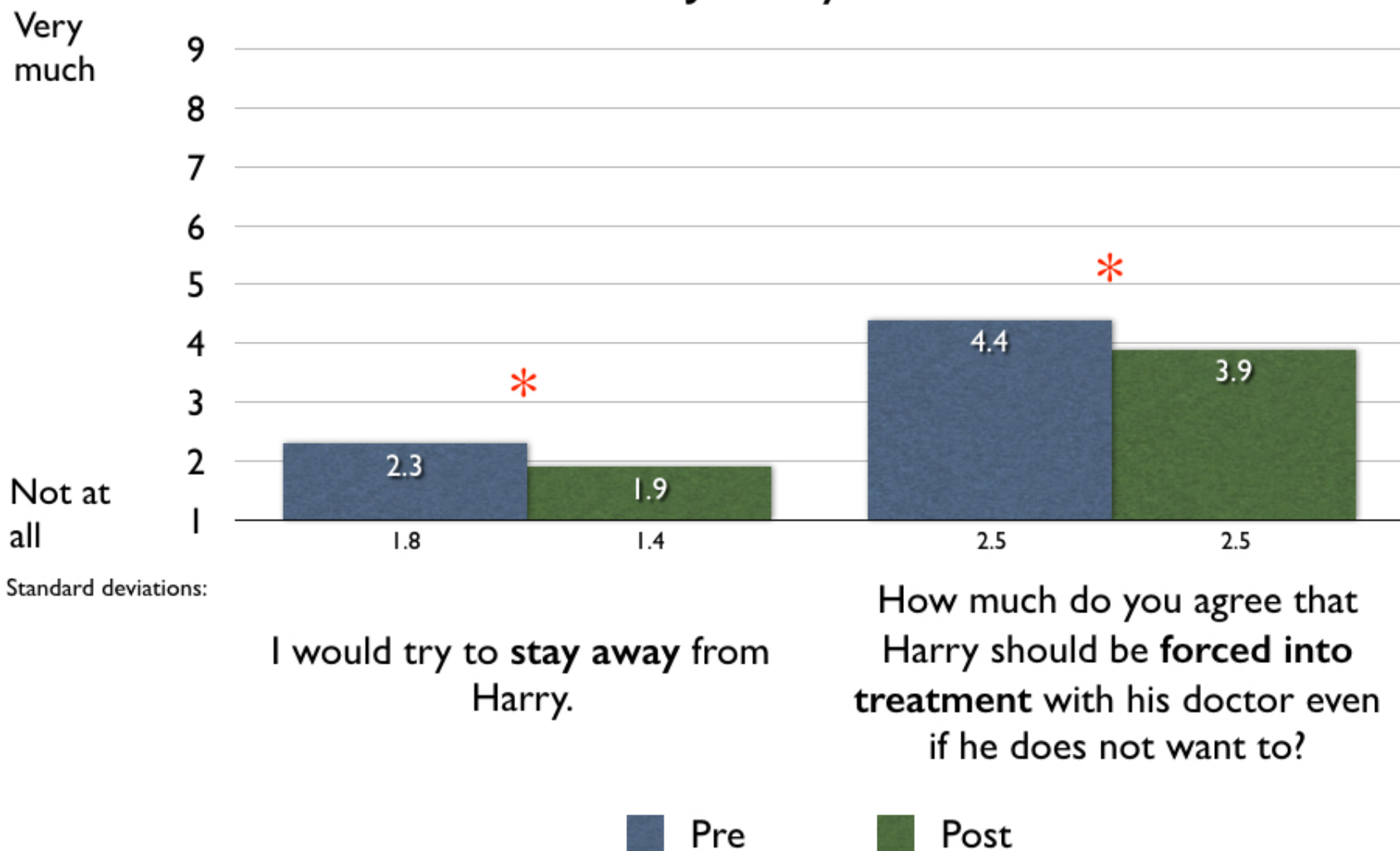
How likely is it that you would help Harry?

■ Pre

■ Post

# Mental Illness Stigma Attribution, Part 4

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016



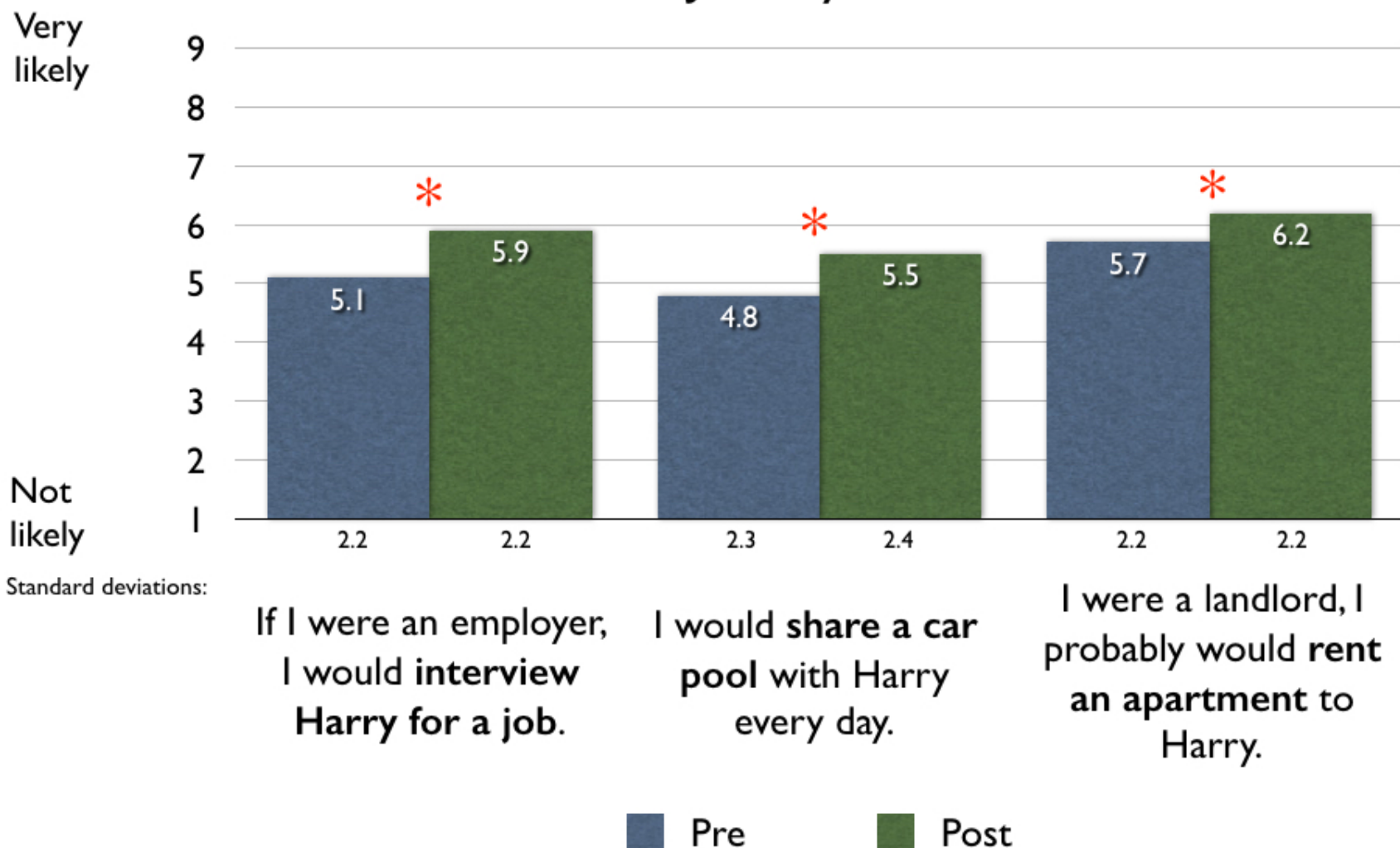
\*There is a significant difference between the pre and post mean responses (Wilcoxon signed-rank test, 99% confidence interval).

Sample sizes: 575, 570



# Mental Illness Stigma Attribution, Part 5

Pre and Post Means, ASIST, January 14, 2013 - December 3, 2016



\*There is a significant difference between the pre and post mean responses (Wilcoxon signed-rank test, 99% confidence interval).

Sample sizes: 567, 570, 570

# “How did ASIST help you?”

- “This course helped me gain skills on how to intervene in crisis situations. Prior to this training it would be much more difficult for me to intervene.”
- “It gave me the tools and therefore confidence to help others. It took away the fear to ask, ‘Do you want to commit suicide?’ It's all about them and hearing the story.”

# “How did ASIST help you?”

- “I was completely unprepared to help a person contemplating suicide. I feel better prepared to intervene. I also feel that I have a better understanding of how to better my skills and knowledge on how to get better at intervening (gathering resources, etc.)”

# “How did ASIST help you?”

- “By removing the taboo from discussing the concept of suicide, it became much easier and more comfortable for me to offer help and support to an individual dealing with suicidal ideation.”

# “How did ASIST help you?”

- “It helped me to not only help others, but it helped me, as well.”
- “I learned many things such as an invitation, the high risk concerns and tasks of caregivers. I did not know the signs of suicide when my son took his life. If I can help at least one person then it has been worth it.”

# “How did ASIST help you?”

- “It helped me help a friend who actually attempted suicide this week. I applied everything that I learned and I appreciate how I actually was able to get through to her.”



# Thank you!

## Questions?



WELLNESS • RECOVERY • RESILIENCE