

Prevention Planning

- *What are your suicide prevention goals?*
- *To prevent suicide on your campus, what needs to change?*
- *What behaviors do you want to change on campus that will help prevent suicide?*
- *What combination of activities will you use to prevent suicide on your campus?*
- *How do your prevention activities fulfill your suicide prevention goals?*
- *What changes in the campus culture need to occur to promote student well-being?*

Introduction

Suicide can affect the entire campus, so programs and trainings that prevent suicidal behavior and promote well-being are essential.

Any program or training you select should be well-planned and meet the following criteria:

- Address the problems on campus related to suicide
- Provide prevention support to the entire campus and/or the population groups most at risk
- Focus on changing the behavior of the target audience
- Show evidence of effectiveness whenever possible
- Be part of a comprehensive combination of strategies that prevent suicide

Discover the lessons learned from staff on different campuses.

Person #1 - Based on our campus data, our goal was to increase the number of students who seek help. So we developed an awareness campaign with posters reflecting this goal that attracted students' attention.

Person #2 - As a community college, it was hard to plan a gatekeeper training, especially with faculty because they often had multiple jobs and weren't on campus frequently. To get around this, we worked to incorporate our gatekeeper training into mandatory staff training at the beginning of the year.

Person #3 - For our social media campaign, we had to enlist the input from students to develop our whole strategy. They worked with us to shape our messages. They also worked with us to determine how to put out the messages so that the students would look at them.

Person #4 - We wanted to know the impact of our gatekeeper training. So we partnered with staff in our psychology department who helped us design a follow-up survey with students and analyze the results.

Steps: Prevention Planning

While all campuses are unique and will need a different combination of strategies to effectively prevent suicide, there are steps that every campus can take to identify and implement prevention strategies that will be most effective on their campus.

Each of the steps below can assist you with prevention planning.

Step 1: Identify the behavior you want to change

Step 2: Choose your strategies

Step 3: Roll out programs and trainings strategically

Step 4: Monitor effectiveness

Step 1: Identify the behavior you want to change

The goal of any prevention activity is ultimately to change people's behavior in an effort to prevent suicide by decreasing the factors that put a person at risk of suicide or increasing the factors that protect them from it.

Start your planning process by looking at your campus data to identify the problems areas related to suicide on your campus and the students most at risk. Then determine your goals—that is, the behavior you want to change. Determining your goals will help you decide the most appropriate program or training to do.

Following are common questions about this step.

- **How can I find data on the students most at risk of suicide?**
- **What suicide prevention goal(s) should I choose?**
- **Other campuses are doing gatekeeper trainings—is this right for my campus?**

How can I find data about which students are most at risk of suicide?

To understand the problems students experience related to mental health and suicide on your campus, it's essential to gather data.

You can get campus data from a variety of places:

- On campus: Access counseling center records and campus survey results (e.g., ACHA's National College Health Assessment)
- Off campus: Contact a local hospital or crisis center

Due to confidentiality laws, be sure to make it clear when seeking data from sources that you don't need personally identifiable information—just gender, age, and student status.

Example

A campus with approximately 20,000 students gathered data from the following sources to help them select their goals.

Existing Campus Survey – On the ACHA-NCHA, students reported anxiety and stress impacting their academic performance at a higher rate than the national average.

Counseling Center Records – 2,000 students received services, of which 150 minority students received services, and 15 veterans received services.

Campus Police Records – Last year, 89 students were transported to the hospital for substance use or overdose.

Key Informant Interviews – Interviews with counseling center staff indicate that minority students and student veterans are not utilizing the counseling center.

Focus Group – A focus group with student veterans uncovers that many are not aware of services available on campus.

Based on the data, this campus might select the following goals:

- Increase the number of students who seek help, particularly minority and veterans
- Provide targeted programs to veterans that increases their connectedness and knowledge of available resources on campus
- Increase the number of students with healthy coping skills

What suicide prevention goal(s) should I choose?

Since every college and university is different, each requires a different set of goals and strategies to effectively address their unique problems and challenges related to preventing suicide.

The goals you choose will depend on the information you collect about the needs of your campus. You can collect this information through existing mental health surveys or data, create a new survey, or conduct a focus group or key informant interviews.

Example

A university initially wanted to focus their suicide prevention efforts on increasing student knowledge about mental health resources on campus. They decided to gather more information to better understand this issue.

Learn how the data they gathered impacted their goal.

Existing Data – When they looked at their campus mental health survey data, they learned:

- Most students are already aware of the counseling center and other campus mental health activities (e.g., stress reduction classes).

Key Informant Interview – From their key informant interview with the counseling center director, they learned:

- Most students are aware of the counseling center.
- Student veterans, a known high-risk group for suicide, aren't using the counseling center at the same rate as other students.

Focus Group – They held a focus group with student veterans and learned:

- Most of them work in addition to being students.
- Student veterans find the counseling center hours inconvenient.

Summary

Based on their data, the campus chose a new goal: increase the number of student veterans who receive support from the counseling center. As a result of this new goal, they planned to focus their prevention planning efforts on improving access for veterans. Some of the strategies they are considering include:

- Working with the counseling center to offer more convenient hours
- Providing group therapy sessions specifically for student veterans at a time when most of them are on campus

I see other campuses doing gatekeeper trainings—is this right for my campus?

Some campuses are doing gatekeeper training, and you may be wondering if you should do one too. It is always helpful to start with identifying your suicide prevention goals and the behavior you want to change before choosing a strategy. The data you collect about the needs on your campus might also point to more pressing suicide prevention goals that cannot be addressed by a gatekeeper training.

Below are some goals one campus identified. *Will any of these goals be addressed by providing a gatekeeper training—if so, which one(s)?*

- Increase the number of students with healthy coping skills** – Actually, to address this goal a gatekeeper training is probably not what the campus needs. A gatekeeper training might make more sense if the goal was to equip students with the skills to talk with a friend they may be concerned about or to increase the number of at-risk students who are referred to counseling.
- Improve data collection on suicide attempts and ideation** – Actually, to address this goal a gatekeeper training is probably not what the campus needs. A gatekeeper training might make more sense if the

goal were to equip students with the skills to talk with a friend they may be concerned about or to increase the number of at-risk students who are referred to counseling.

- ☑ **Increase the number of faculty and staff on campus who refer students to counseling, either on campus or off campus** – If the goal is to increase the number of faculty and staff on campus who refer students counseling or increase the number of students who feel comfortable asking a friend about suicidal thoughts, then including a gatekeeper training may make sense as one of the strategies in their overall approach to preventing suicide.
- ☑ **Increase the number of students who feel comfortable asking a friend about suicidal thoughts** – If the goal is to increase the number of students who feel comfortable asking a friend about suicidal thoughts or to increase the number of faculty and staff on campus who refer students counseling, then including a gatekeeper training may make sense as one of the strategies in their overall approach to preventing suicide.

Step 2: Choose your strategies

Successfully preventing suicide requires a variety of strategies that complement each other and are part of a comprehensive approach. When choosing your strategies, consider best practices for prevention: select programs and trainings that incorporate the principles of effective prevention, that follow safe messaging guidelines, and that have evidence of effectiveness.

Also take into consideration the needs of your audience:

- What type of information do they need—basic or in-depth?
- What method of delivery will work best for them—print, online, or in-person?
- If you are planning a program or training, what is the appropriate length of time during which this audience can participate?

Following are some common questions about this step.

- **What are the best practices for programs and trainings?**
- **Which program or training is the most effective?**
- **How can I make sure the program I select is a good fit?**

What are the best practices for programs and trainings?

A program or training is more likely to have an impact if it incorporates best practices and has been shown by research to be effective for preventing suicide. *Applying the Principles of Prevention (2005)* and *Frameworks for Successful Messaging (2015)* list some best practices for prevention.

Think about a prevention program or training you are considering for your campus or have used in the past. Determine if it meets these six best practices.

Comprehensive Approach – Is it a part of a comprehensive approach or does it include multiple components?

A program or training is more likely to have an impact when it is part of a comprehensive approach. Here are some considerations:

- Effective programs address multiple areas of a person's life, such as health, education, social connections, and social conditions, by providing services in a variety of relevant settings.
- Effective programs offer a wide variety of activities to address the target problem, which usually has multiple risk factors. These activities may include several components, such as curriculum-based interventions, media campaigns, systems change, and environmental strategies that can affect economic-social conditions.

Teaching Methods – Does it incorporate various teaching methods (e.g., role play, hands-on learning)?

A program or training is more likely to have an impact when it incorporates various teaching methods. Here are some considerations:

- Effective programs focus on the development of skills that enable the participants to avoid problem behaviors. Skills that have been associated with effective prevention include helping participants develop their cognitive (thinking) skills, their ability to communicate assertively, and their ability to resist the problem behavior.
- Effective programs provide hands-on experiences for participants. Rather than only depending on sharing information and discussion, effective programs facilitate activities (e.g., role plays, verbal and written practice) that allow participants to develop and practice their new skills.

Sufficient dosage – Is the program or training sufficient enough (length/dosage) to present the content or include follow-up?

A program or training is more likely to have an impact when its participants are exposed to a sufficient dosage of it. Here are some considerations:

- The amount of dosage needed to produce positive outcomes is contingent on the participant's level of risk and/or the amount deficits (i.e., the greater the risk factors of the participants, the greater the dosage necessary).
- Effective prevention programs provide some type of follow-up or booster sessions to help sustain the effects of the original intervention. The effects of most strategies diminish over time. Booster sessions support the continued use of information and skills learned in the original activity.

Theory-Driven – Does the program or training articulate a theory about how it will produce a change in behavior?

A program or training is more likely to have an impact when it is based on a scientific behavior change theory. Here are some considerations:

- Effective prevention programs are able to describe a theory of how or why the strategy is likely to change behavior. By describing a theory, the strategy model can be refined to maximize its chances of producing positive outcomes. A logic model is a theory of action and can be used to map out what your program intends to achieve.
- Effective prevention strategies use reverse engineering to prevent behavior problems and promote positive behaviors. They start with the goal or outcome in mind (after identifying the problem or need) and work backwards to develop a strategy that will produce the desired outcome.

Positive Relationships – For any student program, does it include opportunities for students to strengthen relationships with peers and other adults (not including professional service providers)?

A program or training is more likely to have an impact when it includes opportunities for youth to strengthen relationships with others. Here are some considerations:

- Effective programs support the development of positive relationships, such as training in decision-making, communication, and conflict resolution skills.
- In the absence of good relationships, effective programs provide an opportunity for participants to establish a strong relationship with at least one person who is invested in their well-being.

Safe Messaging – Does the program or training, and any related materials, follow safe messaging guidelines for suicide?

A program or training is more likely to have an impact when its messages are positive, safe, effective, and make use of relevant suicide prevention guidelines. Here are some considerations:

- Certain types of messages about suicide can increase the likelihood that at-risk individuals will consider or attempt suicide themselves. Effective programs do not include content that is potentially harmful or undermines prevention. Instead, they promote positive messages such as *prevention works*, and *resiliency and recovery are possible*.
- Effective programs include messages that emphasize help is available and effective services exist and that there are actions individuals can take to prevent suicide.

Summary

If you select a program or training developed by someone else, it's a good idea to ask the developer for formal evaluations that have been conducted on it so you can see what the results show. Some suicide prevention and mental health programs are listed in SAMHSA's National Registry of Evidence-based Programs and Practices (NREPP), where you may also be able to find evidence of effectiveness.

Which program or training is the most effective?

No single program or training can prevent all suicides. Research and experience have shown that suicide is most effectively prevented by a comprehensive approach—a combination of strategies that addresses different aspects of the problem. There are nine areas that form a comprehensive approach. When planning for suicide prevention, consider strategies (e.g., programs, trainings, activities, services, policies) in each of these areas. Many campuses already have some strategies in place.

The nine areas of a comprehensive approach:

- **Life skills and Resilience** – Help students build life skills, such as critical thinking, stress management, and coping, that can prepare them to safely address challenges faced during college and beyond.
- **Connectedness** – Promote the development of supportive relationships and connections between individuals and the campus community.
- **Increase Help-Seeking** – Help students recognize when they need help and where to find it.
- **Identify and Assist** – Identify those at risk for suicide and connect them with effective care and support.
- **Respond to Crisis** – Make a wide range of support services available to those within your campus community who are experiencing severe emotional distress; have guidelines in place to identify when these services should be implemented.
- **Reduce Access to Means** – Limit access to lethal means of self-harm among people in a suicidal crisis.
- **Effective Care/ Treatment** – Make sure that students have access to and receive effective care for suicide risk and other mental health problems.
- **Care Transitions/Linkages** – Facilitate safe transitions in care by promoting linkages among different providers.
- **Postvention** – Create a plan for supporting individuals affected by a suicide death.

Example

A campus has adopted the comprehensive approach to prevent suicide. Find out which areas of the comprehensive approach this campus has already implemented and what they decided to do in order to incorporate other areas.

What this campus has already done

Among the nine areas of the comprehensive approach, this campus has done quite a bit, such as:

- Hosted several new activities and workshops to increase student connectedness and life skills development.
- Started depression screening for all students seen at the campus Health Services to identify students at risk.
- Created a memorandum of understanding with a local hospital to make it easier for students to seek treatment there.
- Developed crisis protocols documents so faculty and staff know what to do if a student is in distress.

What they decided to do next

The staff and administrators realized they had not yet addressed reducing access to means, so they decided to focus on this next. Since it can be a challenging area to evaluate, they collaborated with partners to identify strategies for reducing access. Based on an assessment of their campus and available funding, here are the strategies they selected:

- Put safety nets under bridges on or near the campus.
- Place placards in potentially unsafe areas (such as rooftops) with the National Suicide Prevention Lifeline number and a campus phone with direct contact to the campus police.
- Encourage campus counseling staff, health professionals, and clergy to take Counseling on Access to Lethal Means (CALM), an online course that trains providers on how to develop safety plans for patients at risk of suicide.

How can I make sure the program I select is a good fit?

Prevention programs vary in content, length, and method of delivery. What works best will depend on your goal and audience.

A campus wants to do a gatekeeper training. **Review information about their goal and audience, then answer the following questions to determine which gatekeeper training would be the best fit.**

Goal and audience:

The campus's goal is to increase the number of faculty who refer students to counseling either on campus or off campus. This institution has a lot of adjunct faculty who don't spend much time on campus.

Audience: Which group needs to be trained?

- Students: Actually, based on the campus's goal, the audience is faculty.
- Faculty: Yes, based on the campus's goal, it's clear the audience is faculty.
- Staff: Actually, based on the campus's goal, the audience is faculty.
- Senior Administrators: Actually, based on the campus's goal, the audience is faculty.

Content: This audience needs content that is...

- Basic: Yes, basic information is usually sufficient, especially since they have limited availability.
- In-depth: Actually, basic information is usually sufficient for faculty, especially since they have limited availability.

Length: Given what the audience needs to learn and the time they have available, the approximate length of the training or program should be...

- 1–2 hours: Faculty have limited time and availability, so 1–2 hours may be all the time they would have to participate in a training.

- 4–8 hours: Faculty have limited time and availability, so 4–8 hours may be more time than they would have to participate in a training.
- 1–2 days: Actually, because faculty have limited time and availability, they usually aren't available for a 1–2 day training.

Delivery Method: The delivery method that will work best for the audience...

- Printed document: Actually gatekeeper trainings are usually best to do in person or online since they provide opportunities for simulation, role play, and/or discussion.
- Online: An online self-paced training might be best for this audience since many faculty in this example are adjunct and don't spend all of their time on campus. It's important to find out what the target audience would find most useful. In person could also work, though it would be important to work with adjunct faculty to find a day and time that would be convenient for them.
- In person: In person could work, though it would be important to work with adjunct faculty to find a day and time that would be convenient for them. Also, an online self-paced training might be a good option for this audience since many faculty in this example are adjunct and don't spend all their time on campus. It's important to find out what the target audience would find most useful.

Summary

In this example, the training that would be the best fit should meet these criteria:

- Designed for faculty
- Short (1–2 hours)
- Offered online or in person

You will want to select a program or training like this example that meets the needs of your audience in terms of the content, length, and delivery method. To assess the fit of a training or program, print the downloadable resource.

Step 3: Roll out programs and trainings strategically

Once you have decided on a program or training to offer based on your goals, then consider how to get your target audience(s) to participate. Students, faculty, and staff have other interests and demands on their time, so suicide prevention may not be a top priority.

Publicity alone will typically not be enough to get them to attend. And don't expect your audience to come to you; rather you need to go to them with your activity, program or training. Involving your audience from the beginning can be one way to ensure their buy-in early on. Together, the three Ps—publicity, piggybacking, and partnerships—can produce results.

Following are some common questions about this step.

- **How can I roll out my program or training more effectively?**

- **Who are the best partners to help roll out my program?**
- **How can I maximize the impact of my program or training?**

How can I roll out my program or training more effectively?

Effectively rolling out a program or training starts early on when you plan and develop it. To help ensure that your messages and publicity are appropriate, involve one or more members of your target audience in the development and dissemination. To boost attendance and attract attention to your event, try to offer it where your audience naturally goes—this will help make it easy and enticing for them to participate.

Example

On one campus, staff conducted a communications campaign for students on suicide warning signs. *Compare Year 1 and Year 2 to see what the team did in each year.*

Year 1:

Planning and implementation – In year 1, campus staff developed a communications campaign aimed at educating students about the warning signs of suicide. The campaign used posters featuring the warning signs that were put on bulletin boards around campus.

Result – Very few students noticed the posters and learned the warning signs.

Year 2:

Planning and implementation – In year 2, campus staff focused their campaign on high-risk groups: military veterans and LGBT individuals. They held focus groups of 5 to 10 students from each of these groups who selected the photos and language to use on a new set of posters. Students also identified unique eye-catching locations to hang the posters so these student groups would see them.

Result – Students in these high-risk groups talked about the posters and more of them sought help for mental health issues.

Who are the best partners to help roll out my program?

You may have more success implementing your program if you partner with other people or groups. They will have ideas, connections, and influences that are different from your own. So reach out to others and partner with them on a thoughtful and strategic rollout.

Example

A large campus with 25,000 students is doing a communications campaign to encourage students to seek help when they are in crisis. In addition to involving students in the development and rollout, how could the following departments collaborate on this campaign?

Campus counseling center – The campus counseling center will have a role to play in responding to students in crisis and expertise in mental health issues, so it's important to incorporate their input in the communications messages that are developed.

Student wellness services – Student wellness services is a resource that many students use on campus for health issues, and staff will be able to help promote the messages of your campaign.

Residence life – Residence life staff work closely with students and will have useful insight on the types of communication messages that may or may not resonate with students.

Campus security – Campus security/police play a role in responding to students in crisis, so it's a good idea to obtain their input in the communications messages that are developed.

Student affairs – Student affairs staff serve many students on a daily basis, so they will be a good partner to help promote the messages of the campaign.

Academic departments – Faculty and academic staff often interact with students who may be in a crisis, so they will be valuable partners in developing the campaign and promoting its messages.

Financial aid office – Staff in financial aid may interact with students who are in crisis, so they will be a good partner for promoting the messages of the campaign.

How can I maximize the impact of my program or training?

To maximize the impact of a prevention program, spread the word. Publicity involves knowing your audience and having an accurate sense of where they get information. But publicity alone is not usually enough. It's a good idea to piggyback your program or training onto other events, activities, or classes. Partnering with others can also help boost participation and maximize impact.

See an example, and read some suggestions for the three P's—publicity, piggyback and partnerships.

Publicity: How can you most effectively publicize your program?

Suggestions:

- Publicize the event where your audience will naturally find it. If they are online, then post it online. If they frequent the dining hall, then publicize it there.
- Involve your target audience in determining publicity strategies. They may have the best and most creative ideas.

Piggyback: What other events and activities could you piggyback on?

Suggestions:

- Many campuses host a health and wellness fair where several campus offices focus on varied health topics, such as nutrition; violence prevention; and physical, alcohol, and substance abuse. They may have activities and booths. This can be a good place for visibility for the suicide prevention program and to promote future trainings or communication activities.
- Some campuses have a “don’t cancel that class” program so that instead of a faculty member cancelling a class, the class period is used to provide a gatekeeper training or suicide prevention information.

Partnerships: Who can you partner with to boost participation in your programs?

Suggestions:

- **For student activities and programs**, partner with academic departments, the health center, fitness centers, residence life, student affairs, LGBT office, Greek life, international student office, and cultural groups (African American, Asian students, etc.). Also consider health-related student groups and students majoring in psychology, social work, and public health.
- **For staff and faculty programs and trainings**, partner with Campus Life, Student Life, Student Affairs, Judicial Affairs, Financial Aid/Bursars’ office, Residence Life, Campus Police, and Health Services

Example

One campus hosted a brief online student training in their computer lab. Then they partnered with the psychology department who announced the training in their classes and agreed to bring their students down to the lab during the designated time to do the training. After students completed the training, they received a t-shirt as a way to reinforce participation and publicize the training.

Step 4: Monitor effectiveness

Monitoring the effectiveness of your suicide prevention efforts is essential. Evaluation data can help you determine what worked well and what didn’t and what sort of impact your programs have had.

If the results are negative (e.g., no one showed up for events or few students were referred to the counseling center by staff after a gatekeeper training) then you will want to modify what you offer and how you roll it out.

If the results are positive (e.g., a lot of people attended a gatekeeper training, and in the following months, more students were referred to counseling), then you can publicize these results to administrators to show the value of the program. Positive results may help you obtain funding to sustain your prevention efforts.

Following are some common questions about this step.

- **What kind of evaluation should I conduct for my program?**
- **How should I conduct an evaluation?**
- **How can I tell if my program had an impact?**

What kind of evaluation should I conduct for my program?

There are two common types of evaluation:

- **Outcome evaluation** measures the effect of a program or training and whether any change occurred as a result.
- **Process evaluation** documents all aspects of implementing a program or training and shows what worked well and what didn't.

Question 1: A campus holds an in-person half-day gatekeeper training for staff, but very few people show up for the training. Which type of evaluation would provide information indicating why more people didn't attend the event: outcome evaluation or process evaluation?

Outcome evaluation – Actually, process evaluation would provide information indicating why more people didn't attend the event. This type of evaluation collects information that answers the following questions:

- When did the program or training take place?
- Where did the program or training take place?
- Who was the target audience for your program or training?
- Who and how many people participated?
- What were the demographics of participants?
- Was the program implemented as intended?
- What obstacles were encountered?
- How did participants rate their satisfaction with the training?

Process evaluation – That's right. Process evaluation would provide information indicating why more people didn't attend the event. This type of evaluation collects information that answers the following questions:

- When did the program or training take place?
- Where did the program or training take place?
- Who was the target audience for your program or training?
- Who and how many people participated?
- What were the demographics of participants?
- Was the program implemented as intended?
- What obstacles were encountered?
- How did participants rate their satisfaction with the training?

Question 2: A campus develops a suicide awareness campaign with a series of posters displayed throughout the campus in strategic places that encourage students in distress to seek help. Which type of evaluation would

provide information indicating whether more students in distress went to the campus counseling center: outcome evaluation or process evaluation?

Process evaluation - Actually, outcome evaluation would provide information indicating whether more students in distress went to the campus counseling center. This type of evaluation collects information that answers the following questions:

- What changes actually occurred?
- How do these changes compare to what the program/training was expected to achieve?
- How do these changes compare with those not exposed to the program/training?
- How well did participants retain knowledge and skills learned during the program/training?
- Were more at-risk people identified as result of the training?
- Was there increased awareness of suicide signs and symptoms?

Outcome evaluation – That's right. Outcome evaluation would provide information indicating whether more students in distress went to the campus counseling center. This type of evaluation collects information that answers the following questions:

- What changes actually occurred?
- How do these changes compare to what the program/training was expected to achieve?
- How do these changes compare with those not exposed to the program/training?
- How well did participants retain knowledge and skills learned during the program/training?
- Were more at-risk people identified as result of the training?
- Was there increased awareness of suicide signs and symptoms?

How should I conduct an evaluation?

As you start to plan your program or training, this is a good time to begin to plan the evaluation of it as well. First, think through what you want the evaluation to measure. Once that is clear, then you can consider how to conduct the evaluation. If you have not done an evaluation before, enlist the help of a professional evaluator or someone with experience conducting evaluations.

What to Evaluate

The first task in conducting an evaluation is determining what you want to know from the evaluation. What is it you want the evaluation to tell you? Be as specific as possible. This information will guide the evaluation.

Here are six evaluation questions campuses often use to guide their evaluation:

1. What changes actually occurred?
2. How do these changes compare to what the program/training was expected to achieve?
3. How do these changes compare with those not exposed to the program/training?
4. How well did participants retain knowledge and skills learned during the program/training?
5. Were more at-risk people identified as result of the training?

6. Was there increased awareness of suicide signs and symptoms?

How to Conduct an Evaluation

The next task is determining how you will conduct the evaluation. Conducting an evaluation can be challenging, particularly if you haven't done it before.

Here are some common challenges and possible solutions for addressing them:

Difficult to get baseline data

Possible solution(s):

Look for data from or participate in the National College Health Assessment (ACHA) and Healthy Minds studies, or any campus climate surveys at your institution. Or check the counseling center or health services records for relevant data.

Unable to access and collect data

Possible solution(s):

Build and foster partnership with staff in departments on and off campus that collect data you need. Explain to them why data is important in addressing the shared goals you may have, such as increasing student retention.

Difficult to evaluate a comprehensive program or when multiple groups are doing various programs

Possible solution(s):

Conduct several types of evaluation that look at separate components of a comprehensive program. For instance, in addition to a campus-wide survey on mental health, consider surveying participants after a gatekeeper training or conducting focus groups or key informant interviews to provide additional information.

Unsure how to measure behavior change such as increases in “help-seeking” or “life skills”

Possible solution(s):

Since you are on a college campus, it is likely you will have access to staff and faculty with evaluation experience. Get help from staff in your institutional research office or faculty in the psychology or public health departments who are familiar with how to conduct an evaluation, measure these indicators, and analyze the results.

How can I tell if my program had an impact?

Think through in advance how you will monitor and evaluate the programs, activities, and trainings you offer. Decide if you want to conduct an outcome evaluation, a process evaluation, or both. Then decide how you will gather the data for your evaluations.

Read about program examples to see how they were evaluated.

Example 1

Gatekeeper training program: Administer pre- and post-surveys to the target audience to determine whether the training was effective.

Before the event

A survey administered before the training assessed participants' current level of knowledge, attitudes, and skills related to mental health, suicide, and helping students in distress.

After the event

- After the training, an evaluation survey assessed new information or skills the participants have learned.
- A follow-up survey, a few weeks or months later, captured whether participants have retained the new information and if they have put the new skills and knowledge into practice.

Example 2: Walk to raise awareness and/or money about suicide

Before the event

Information was collected about the event, such as the number of people who registered and their demographic information, to learn about the audience that participated in this event.

After the event

A survey was administered that asks participants about:

- Their satisfaction with the event
- Whether they had any changes in attitudes towards mental health or counseling
- Whether they would be more likely to refer a student in distress

The responses indicate the impact of this event.

Summary

Remember that the goal of any program, training, or activity you offer is to change behavior. But don't expect to see a change right away or from just one program. Changing behavior typically takes time and involves repetition, so campuses usually provide multiple and different types of events.