

Evaluation of the New Zealand Youth Suicide Prevention Strategy (NZYSPS)

*Aoife Fitzpatrick, Ministry of Social Development (MSD);
Isobel Brown, MSD;
Tania Stanton, MSD;
Anne Dowden, BRC Marketing and Social Research; and
Allen Gomes, MSD.*

Abstract

Evaluations are typically associated with tangible programmes and outcomes. This presentation, however, reports on an evaluation of a more abstract policy *strategy*. The New Zealand Youth Suicide Prevention Strategy was initiated in 1998 in response to the disproportionately high number of suicides among 15 to 24 year olds. Phase One of the evaluation, undertaken in 2003, sought feedback on the strategy from key stakeholders in government and non-government organisations. Though the strategy was found to be well accepted and perceived as identifying best-practice principles, the evaluation found that its communication and implementation could be improved. Phase Two completed in 2004 sought solutions to these issues from the perspective of community organisations and professionals at the ‘end-user’ level as well as central government. The unique approach developed to evaluate this strategy and the implications of the findings will be discussed.

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Introduction

In 1998 the New Zealand Youth Suicide Prevention Strategy (NZYSPS) *In Our Hands* and *Kia Piki te Ora o te Taitamariki* was released. *In Our Hands* and *Kia Piki te Ora o te Taitamariki* collectively form the NZYSPS. Five years into the implementation of the NZYSPS, policy officials and government ministers agreed to an evaluation of its effectiveness. It was decided to conduct the evaluation in two phases, with the first phase informing the scope of the second phase. This paper presents the findings of phase two of the evaluation.

The Strategy

The New Zealand Youth Suicide Prevention Strategy (NZYSPS) was initiated in New Zealand by the Ministry of Youth Affairs (now known as the Ministry of Youth Development), the Ministry of Health, and Te Puni Kōkiri, in 1998 in response to the disproportionately high number of suicides among 15 to 24 year olds. The NZYSPS provides a framework for understanding suicide prevention and signals the steps a range of government agencies, communities, services, hapū and iwi must take to reduce suicides in the 15-24 year old age group.

The NZYSPS is made up of two parts: *In Our Hands*, which is the general population strategy; and *Kia Piki te Ora o te Taitamariki*, which focuses on specific Māori needs and approaches. *In Our Hands* is based on five goals which relate to the different levels of suicide prevention. These actions range from broad initiatives which enhance the resilience of young people and reduce their vulnerability, to initiatives which provide support to people affected by a suicide. *Kia Piki te Ora o te Taitamariki* takes an approach based on community development, and on encouraging services to be more responsive to the needs of Māori.

The initial development of work programmes relating to the implementation of the NZYSPS included the establishment of Suicide Prevention Information New Zealand (SPINZ), *Kia Piki* Community Development projects, Youth Development Fund projects and a range of guidelines, information pamphlets and training for a range of audiences. SPINZ was launched in 1999 with the main purpose of providing accurate, up-to-date, information on youth suicide prevention to a range of audiences.

Dissemination of the NZYSPS has occurred primarily through mail-outs and a small number of presentations to groups. There has also been dissemination through a range of other services and providers, such as public health units and NGOs. An on-going process of document distribution has occurred through the Ministry of Youth Development, the Ministry of Health, Te Puni Kōkiri, and through SPINZ.

The Evaluation

Evaluation of the NZYSPS has occurred in two phases. The 'Phase One Evaluation' was completed in September 2003. It involved in-depth interviews with key informants from government and non-government organisations who had been involved in the high-level development and implementation of the NZYSPS. The key findings from this evaluation suggested that the NZYSPS is seen as a vital reference tool and identifies best-practice principles and consistent advice to those working in the field of youth suicide prevention. However, the findings also implied that insufficient implementation planning had taken place before the release of the NZYSPS and communications could have been improved.

Phase Two, completed in 2004, sought solutions to these issues from the perspective of community organisations and professionals at the 'end-user' level, as well as central government. In this instance 'end-users' are defined as those who work directly with youth, or with those who work with youth. Based on the findings from the Phase One evaluation, the primary goal of this evaluation was to provide an information base for the Ministry of Youth Development that would help it to optimise the implementation and communication of the NZYSPS.

This goal was to be achieved through: identification of examples, in a range of settings, of how the NZYSPS is currently being used; identification of the factors enhance and/or limit knowledge about the NZYSPS; and identification of the key lessons that can be taken forward to assist the implementation plans and communications strategy for the NZYSPS.

Method

A qualitative approach was used to provide a 'snap shot' of the perspectives of a range of people across several sectors. A qualitative approach was chosen because of the sensitivity of the subject (youth suicide) and because of the need for in-depth analysis using a small number of informants. A series of vertical case studies were identified to allow a focus on informants who either worked directly with youth, or who worked with those who worked with youth. A bottom-up process was used for selection of the participants, whereby informants at the community organisation level identified their line manager, or the person they most readily used as a source of information.

A total of 28 informants were interviewed. Informants included employees from six organisations: Department of Internal Affairs (Wellington); Group Special Education (Auckland); Kia Piki Community Development Organisation (Auckland); Suicide Prevention Network (Christchurch), Suicide Prevention Information New Zealand (SPINZ) and; Auckland Waikato District Health Board (Hamilton). This resulted in a wide variety of participants including youth workers in the health and education sectors, health practitioners, project managers, middle management, higher level managers, and one central government informant.

Interviews took place either over the telephone (10 interviews) or face-to-face (18 interviews) using a semi-structured interview guide. All informants completed consent forms and confirmed their interview notes before their comments were included in the results.

Results

Awareness and implementation of the NZYSPS

The findings of the evaluation suggest that there is limited awareness and implementation of the NZYSPS at the end-user level. While most of the informants had read and understood the NZYSPS document, many believed that there was limited understanding of how to use or implement it in the wider community. They felt that by addressing a number of issues relating to the contents of the NZYSPS document, its' dissemination, and the supporting documents and communications that accompanied it, overall communication and implementation of the NZYPSA could have been enhanced.

Furthermore, informant comments suggested that differences exist in perceptions of what constitutes 'use' and 'implementation' of the NZYSPS. There appears to be some uncertainty among end-users as to whether the NZYSPS is intended to be used as a reference guide for best practice or to provide advice about how to implement the strategy in practical ways in their work. This uncertainty has an impact on whether and how the NZYSPS is implemented among intended end-users.

Features that promote or inhibit use of the NZYSPS

Whilst the NZYSPS provided a clear explanation of the range of goals and its broad focus, and was accompanied by useful supporting documents for some recipients (e.g. those in schools) that promoted its use, aspects of the document itself, and the way that it had been disseminated, detracted from its use. In particular, the lack of summaries in the NZYSPS document, the limited number of sector-specific supporting documents, and the perceived limited support for implementation of the NZYSPS were cited as inhibiting factors. Some also indicated that limited financial resources inhibited some people from accessing educational sessions about the NZYSPS.

Informants intimated that simply including more summaries or 'end of chapter highlights' in a document, such as that used to communicate the NZYSPS, may increase its readership and subsequent implementation. Providing educational sessions on the NZYSPS and how to implement it, was also suggested as a feature that would promote use of the strategy.

While the NZYSPS includes *Kia Piki te Ora o te Taitamariki*, a strategy developed specifically for Māori, there remained a perception among informants that there was a lack of a communication focus for Māori audiences. This was considered to inhibit the use of the NZYSPS for some groups. This highlights the importance of providing culturally-specific, as well as sector-specific, information and communicating this effectively.

Factors for effective communication of the NZYSPS

Due to the nature of youth suicide prevention and the potential consequences of responding inappropriately, those who work with youth were found to be risk averse in using new information unless it is from a trusted source. Informants suggested that in order for new information about a topic as sensitive as youth suicide prevention to be read and acted upon, it is essential that the source of that information needs to be known and trusted by the recipient.

In fact, successful communication of information about youth suicide prevention was identified by informants as having three distinct components; a trusted origin or source, an effective channel to arrive via, as well as a reliable, preferably local, 'endorser'. The information needs not only to come from a trusted source, it also needs to be communicated via the correct channels and ideally should target multiple levels within an organisation. Furthermore, information on youth suicide prevention is more likely to be valued and implemented if it is 'endorsed' by someone known and trusted by the recipient.

Tailoring NZYSPS information to individual sectors also increases the chances of it being understood, trusted and implemented. Relevance of information promotes its use, as some recipients feel they need significant support to feel confident to respond to the issue of youth suicide prevention.

"Communication hubs" were identified as being an important resource for effective communication of the NZYSPS. "Communication hubs" are organisations that can act as both sources of information that they have gathered, and endorsers of that information, as they disseminate it to their networks. These hubs include the Kia Piki Community Development Projects, the Youth Development Fund Projects and SPINZ, which were all set up as part of the implementation plan of the NZYSPS, as well as local government, and a range of professional and occupational associations.

To promote awareness and use of the NZYSPS, the issue of youth suicide prevention needs to be 'on the agenda' for everyone working with youth, at every level. Targeting every level is important for affecting change in organisational priorities, so youth suicide prevention information is communicated to those in decision-making or agenda-setting roles as well as to field workers. Placing youth suicide prevention on organisation's agendas, makes it easier for those working directly with youth to attend related training sessions and to implement the principles of the NZYSPS in their work plan.

Discussion

A number of the key findings of this evaluation can be used to inform and optimise the implementation and communication of the NZYSPS. Furthermore, these key findings could form the basis for principle guidelines for implementation and communication of strategies in general.

An extremely important component of the successful communication of new information is that the recipients perceive the source of that information as being credible, trustworthy, and relevant to their sector. This is particularly the case when dealing with sensitive issues towards which the recipient may feel risk averse, such as youth suicide prevention. The recipient needs reassurance that the source of such information is credible and trustworthy before this information can be implemented with confidence. Similarly, 'endorsement' of new information by a trusted, preferably sector-specific entity enhances the likelihood of that information being viewed as relevant and worthy of implementation.

In order for a strategy such as the NZYSPS to reach intended audiences, and be implemented where possible, information needs to be framed and communicated in a way that is optimal for that audience. For instance, the findings of this evaluation suggest that certain aspects of the document used to communicate the NZYSPS may have detracted from its use. These aspects included the length of the document and the time required to read it in full, the lack of summaries, examples and case studies, and the limited number of sector-specific documents. Using shorter, more concise and sector specific documents to communicate the NZYSPS may have resulted in greater awareness and implementation of that strategy.

Using the correct 'communication channels' and optimising use of 'communication hubs' are also important components of effective communication. The findings of this evaluation suggest that communication channels are not always linear or hierarchical and may differ among sectors or organisations. For instance, in some cases, information may be delivered directly to the intended 'end-user', while in others it may pass through a number of management levels before reaching the end-user. Therefore, understanding the nature of communication channels, and maximising use of communication hubs, are necessary components of effective communication of a strategy such as the NZYSPS.

Finally, successful communication of new information, such as that relating to the NZYSPS, requires that the recipient organisation regards the topic as being a high priority. In effect, for NZYSPS-related information to be understood and implemented, youth suicide prevention needs to be 'on the agenda'. For optimum implementation to occur, the topic needs to be a priority for everyone at every level of a recipient organisation – that is from the management/decision-maker level through to the end-user level.

Thus, a number of findings from this evaluation could be used to inform the communication and implementation of the NZYSPS, or indeed, strategies in general. Reconsidering aspects of the document used to communicate the information, how that document was communicated and supported, and the content of the document itself, while taking into account the needs of the recipient as informed by this evaluation, may result in an increase in awareness and implementation.

This evaluation was unique in that it did not focus on a set of programmes or outcomes, nor was it an evaluation of the effectiveness or worth of a strategy. Rather, it was an evaluation of the communication and implementation of a strategy. It explored the

methods of communication used in relation to the NZYSPS and the implementation of that strategy which resulted from this. Furthermore, the objectives of this evaluation were achieved by using the 'end-users', in this case those who work directly with youth, as the primary informants. In doing this, an insight was gained into how recipients of the NZYSPS document viewed it and how they responded to it. Such insights, if incorporated into communication and implementation plans, could enhance awareness, implementation and general success of future strategies.

References

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