



***Evaluating a complex intervention for
people bereaved through suicide –
challenges and considerations***

2009 Australasian Evaluation Society (AES) International
Conference

Evidence and Evaluation

Victoria Visser
&
Professor Peter Bycroft



the science of knowing



Overview

- Evaluating complex interventions
- The StandBy Response Service & the StandBy Replication Trial Project
- Evaluation objectives and approach
- Specific methodological considerations
- Project challenges, solutions and management strategies
- Achievements and future opportunities

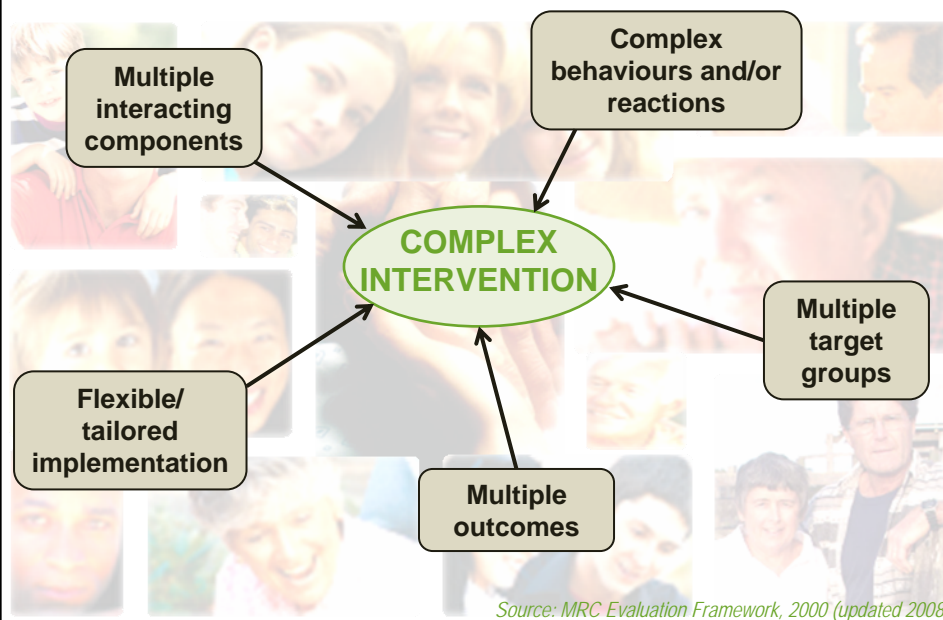
the science of knowing

Overview

- Evaluating complex interventions
- The StandBy Response Service & the StandBy Replication Trial Project
- Evaluation objectives and approach
- Specific methodological considerations
- Project challenges, solutions and management strategies
- Achievements and future opportunities

the science of knowing

Complex interventions



Evaluating complex interventions

- Difficulties in conducting *pre- and post-testing* – randomised control trial not feasible and/or appropriate
- Difficulties in *attributing effects* to the success of the intervention within a complex system – eliminating the effects of *intervening/confounding variables*
- Often have *lagging outcomes* that are difficult to measure over the short-term
- *Reliability, validity and generalisability* of results

the science of knowing 

Overview

- Evaluating complex interventions
- The StandBy Response Service & the StandBy Replication Trial Project
- Evaluation objectives and approach
- Specific methodological considerations
- Project challenges, solutions and management strategies
- Achievements and future opportunities

the science of knowing 

Postvention

- a term used to describe activities (“interventions”) that *assist people bereaved by suicide*
- manage the *bereavement circumstance*
- assist the bereaved with the *grieving process*
- *prevent suicide imitation effects* (i.e. suicides and/or suicide attempts that occur as a result of a previous suicide).

There is little existing literature describing evaluation of postvention activities, in Australia or internationally.

the science of knowing 

StandBy Response Service

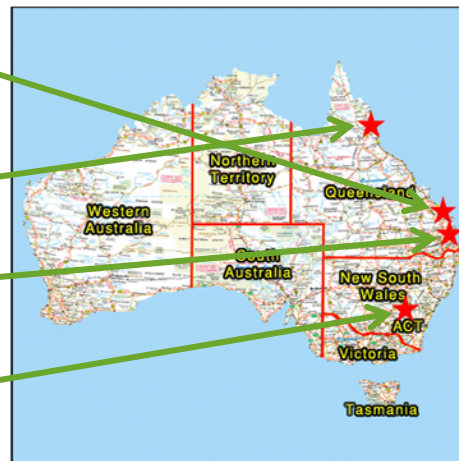
- The *StandBy Response Service* is a suicide bereavement support service.
- The program supports people bereaved by suicide through *crisis intervention, referrals to appropriate community support services and community training and capacity-building activities.*
- In 2007, the federal Department of Health and Ageing funded the *national trial* of the roll-out of the StandBy Response Service into *four communities across Eastern Australia* – this trial project was called the StandBy Replication Trial Project.



the science of knowing 

The four StandBy trial sites

- **Sunshine/Cooloola Coast , Qld**– StandBy Response Service originally established by United Synergies Ltd in 2002
- **Cairns, Far North Qld** – StandBy trial auspiced by the Dr. Edward Koch Foundation
- **North Brisbane, Qld** – StandBy trial auspiced by Lifeline Community Care
- **Canberra, A.C.T.** – StandBy trial auspiced by SupportLink Australia Ltd



Standby Response Service was tailored to each trial site region's specific circumstances

the science of knowing

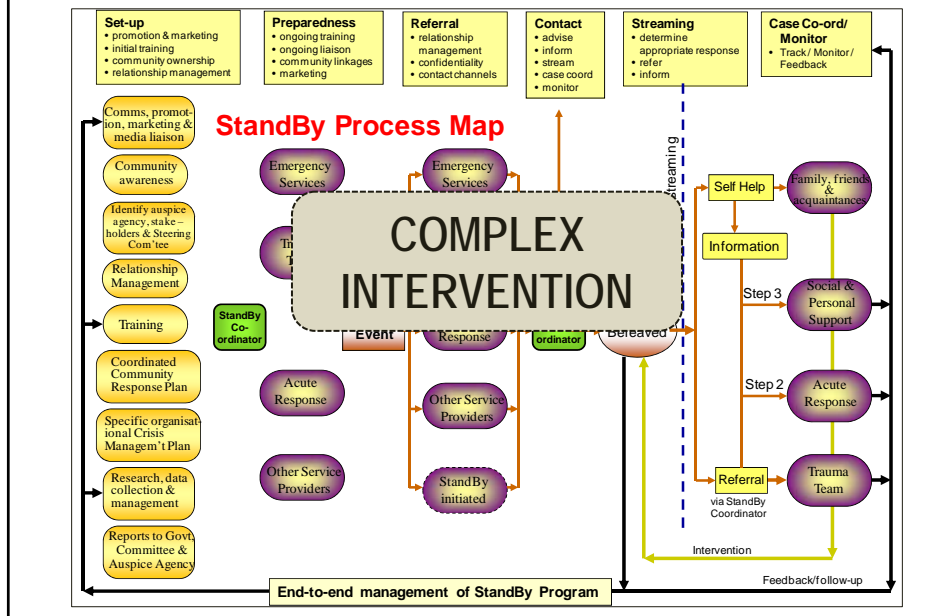
Objectives of StandBy

The StandBy Response Service model has the goals of:

- 1.Reducing *potential adverse health outcomes* and assisting in suicide prevention for family members, friends and associated bereaved by suicide, by providing an integrated and comprehensive response built on existing emergency and community response mechanisms;
- 2.Building a *sustainable capacity within the community to respond* to and support those bereaved through suicide.

the science of knowing

StandBy Process Map



Defining characteristics

15 Defining Characteristics of StandBy

1. Community-based model
2. Evidence-based (latest theories in loss, grief and suicide bereavement)
3. Available to anyone bereaved by suicide
4. 24/7 service
5. Always and only by invitation (right response, right person/s)
6. Paid response team with demonstrated knowledge in suicide intervention
7. Coordinates services according to client's needs (i.e. according to information, support)
8. Trauma Team always responds in person
9. No time limit since suicide
10. No clinical or therapeutic provision
11. Trauma Team must have regular meetings
12. Auspice agency has facilities for meetings, data storage)
13. There is a clearly defined mechanism for referral
14. Guided by Steering Committee, which includes representatives from services, community groups, bereavement support groups
15. StandBy does not run a Bereavement Support Group



Overview

- Evaluating complex interventions
- The StandBy Response Service & the StandBy Replication Trial Project
- Evaluation objectives and approach
- Specific methodological considerations
- Project challenges, solutions and management strategies
- Achievements and future opportunities

Evaluation Objectives

“Through the presentation of evaluation data generated by the target group (those bereaved by suicide), the Participant is able to demonstrate that:

1. The community benefits of the StandBy program, evidenced through the stakeholder consultation, including:

- *increased public awareness and understanding, both of the service and of the issues associated with suicide prevention; and*
- *an increased capacity of the local community to respond to individual members' postvention needs.*

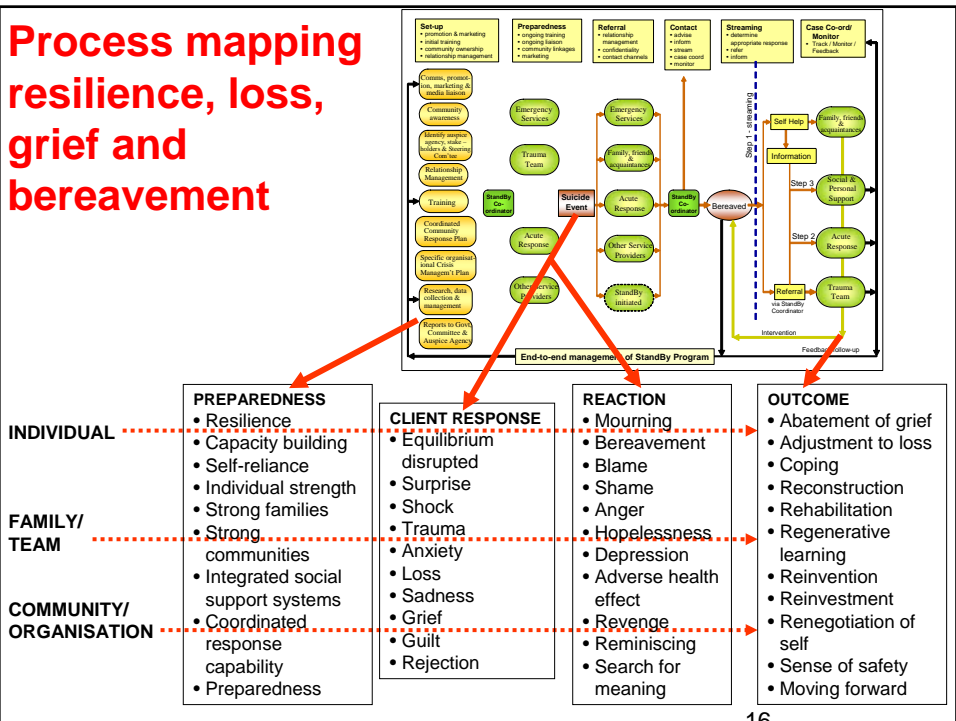
2. In the primary target group (bereaved people), StandBy resulted in:

- *reduced physical and mental morbidity, resulting in subsequent reduction in costs to the community and the various departments and agencies providing health support;*
- *greater sense of connectedness to and within the community; and*
- *improved understanding of government and non-government services available to provide assistance and a greater willingness to engage with those services.”*

Evaluation Objectives

In response to the requirements of the contract, the evaluation aimed to provide evidence in respect to the following research questions?

1. Is StandBy making a difference in reducing potential and/or existing adverse health effects amongst people bereaved by suicide?
2. Are communities better prepared to respond to suicide events?
3. Are emergency and other statutory services able to refer to the program?
4. Are efficiencies created for emergency and other statutory services?



Evaluation Approach

The evaluation strategy was two-pronged:

- Pre- and post-test measurement of *community capacity to respond*, in the opinion of emergency and community service providers involved in responding to suicide events in the trial communities; and
- Controlled pre- and post-test measurement of the *impact of the StandBy program on people bereaved by suicide* when compared with matched samples of people not bereaved by suicide, people who had experienced by traumatic life events other than suicide and those bereaved by suicide who had not had access to the StandBy program.

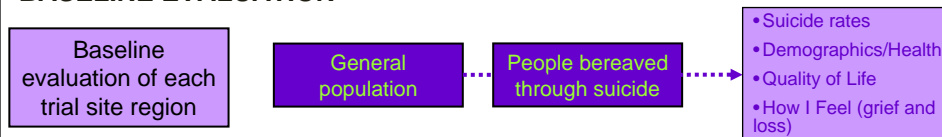
the science of knowing 



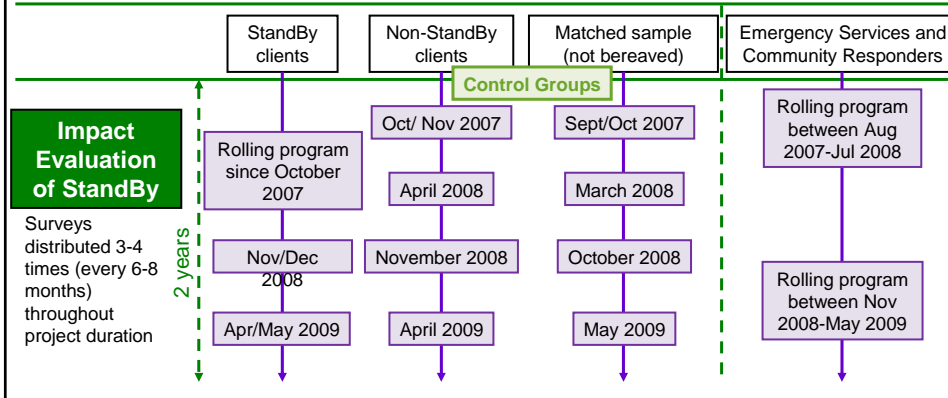
Evaluation Approach

Longitudinal monitoring of program rollout

BASELINE EVALUATION



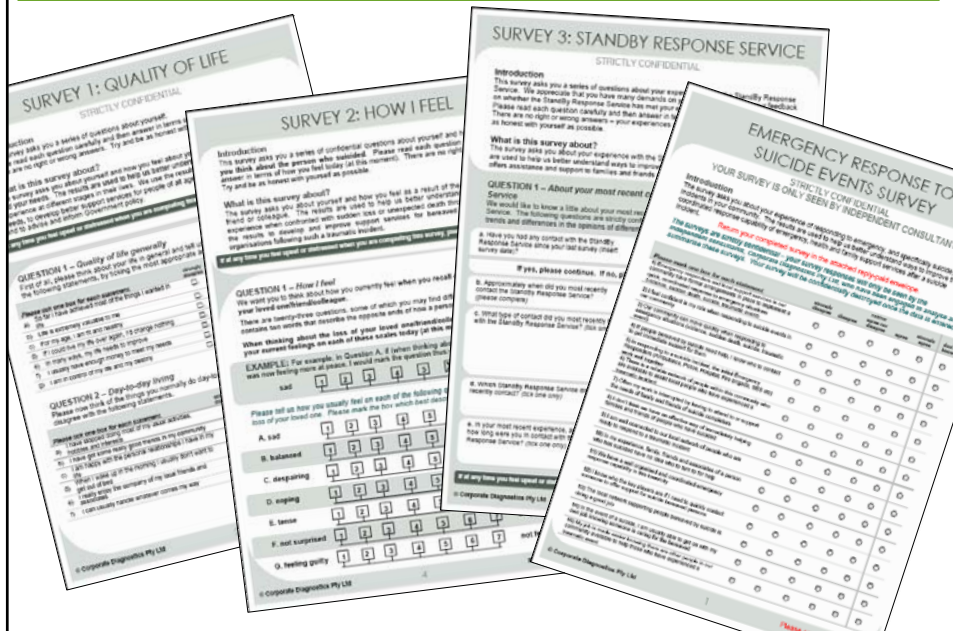
IMPACT EVALUATION – 3-4 Survey waves over a two-year timeframe



Overview

- Evaluating complex interventions
- The StandBy Response Service & the StandBy Replication Trial Project
- Evaluation objectives and approach
- **Specific methodological considerations**
- Project challenges, solutions and management strategies
- Achievements and future opportunities

Development of survey instruments



Development of survey instruments

Development of standardised tools for measuring grief reactions unique to suicide bereavement

2005

Evaluation of the **Older Men Unlimited (OMU) Suicide Prevention Program**, Hervey Bay

2006

Evaluation of the **StandBy Response Service Pilot Study**, Sunshine Coast

2006-2007

National Consultations with people bereaved by suicide, health professionals and Service Providers

2007 to 2009

Longitudinal evaluation of the national rollout of the **StandBy Response Service**

Quality of Life Survey

STRICTLY CONFIDENTIAL

Reference number: 100000

NATIONAL STUDY OF QUALITY OF LIFE

The following survey package contains two surveys: the Quality of Life Survey and the How I Feel Survey and shows a group of questions about life. Each survey has an introduction which explains its purpose and gives instructions on how to answer the questions.

The surveys are strictly confidential – your responses will only be seen by the independent consultants, Corporate Diagnostics Pty Ltd, who have been assigned to analyse and summarise these surveys.

Many thanks for taking the time to complete these surveys. They should take you only 10-15 minutes.

Just mark the answer option that most represents your experience or opinion for each question.

PLEASE CLEARLY PRINT OR MARK YOUR ANSWERS USING A BLACK PEN/TAPE OR

If you find you have a question or need more information, please contact us on 1800 347 433.

When you have finished answering the surveys, please use the enclosed reply-paid envelope to post your completed surveys to:

Corporate Diagnostics, PO Box 852, Noosa Health, QLD 4567

Please return your completed surveys by: Friday 27th February, 2008

If you have any questions or concerns about these surveys, feel free to contact the independent consultants engaged to undertake this study on our toll free number 1800 347 433.

Professor Peter Degrift, Managing Director of Noosa Health, Senior Research Consultant

Corporate Diagnostics Pty Ltd
PO Box 852 Noosa Health QLD 4567 Tel: 27 347 433 Fax: 27 347 433
Email: info@corpdiag.com.au

© Corporate Diagnostics Pty Ltd

SURVEY 1: QUALITY OF LIFE

STRICTLY CONFIDENTIAL

Introduction
This survey asks you a series of questions about yourself. Please read each question carefully and then answer in terms of how you feel today. There are no right or wrong answers. Try and be as honest with yourself as possible.

What is this survey about?
The survey asks you about yourself and how you feel about your life, your day-to-day feelings and your needs. The results are used to help us better understand the feelings and needs experienced by different groups of people. We use the results to better understand the needs, to identify better support services for people of all ages and in all stages of their life to provide and inform government policy.

If you find you have a question or need more information, please contact us on 1800 347 433.

First of all, please think about your life in general and tell us whether you agree or disagree with the following statements by ticking the most appropriate answer option.

QUESTION 1 – Quality of life, generally
First of all, please think about your life in general and tell us whether you agree or disagree with the following statements by ticking the most appropriate answer option.

1. Life is extremely valuable to me	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I am happy, fit and healthy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. I usually have enough income to meet my needs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. I am in control of my own destiny	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

QUESTION 2 – Day-to-day living
Please tick how often of the things you normally do day-to-day and tell us whether you agree or disagree with the following statements.

	never	often	often	often	often
5. I have enough things to do in my life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I have enough things to do in my life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. I have a good social life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. I have a good social life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9. I have a good social life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10. I have a good social life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11. I have a good social life	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

© Corporate Diagnostics Pty Ltd

...please think about your life in general and tell us whether you agree or disagree with the following statements....

- Life is extremely valuable to me
- For my age, I am fit and healthy
- If I could live my life over again, I'd change nothing

36 similar opinion questions comprising 11 factors

uses a five-point Likert answer scale from strongly disagree through to strongly agree

How I Feel Survey

SURVEY 2: HOW I FEEL

Introduction
The survey asks you to think about the most traumatic or emotionally upsetting event that has happened to you. The results are used to help us better understand the health needs of people who have experienced a traumatic or emotionally upsetting event.

QUESTION 1 - About your most traumatic life experience
Please think about the most traumatic or emotionally upsetting event in your life. The results are used to help us better understand the health needs of people who have experienced a traumatic or emotionally upsetting event.

QUESTION 2 - How you currently feel
Please think about how you currently feel when you think about your most traumatic or emotionally upsetting event. The results are used to help us better understand the health needs of people who have experienced a traumatic or emotionally upsetting event.

SURVEY 2: HOW I FEEL

QUESTION 1 - About your most traumatic life experience
Please think about the most traumatic or emotionally upsetting event in your life. The results are used to help us better understand the health needs of people who have experienced a traumatic or emotionally upsetting event.

QUESTION 2 - How you currently feel
Please think about how you currently feel when you think about your most traumatic or emotionally upsetting event. The results are used to help us better understand the health needs of people who have experienced a traumatic or emotionally upsetting event.

What is the most traumatic or emotionally upsetting event that has happened in your life?

When thinking about your most traumatic or emotionally upsetting life experience, how would you rate your current feelings on each of these scales today (at this moment)?

calm.....not calm
tense.....relaxed
sad.....at peace

21-23 similar bipolar adjectives comprising 5 factors

uses a seven point semantic differential answer scale of bipolar adjectives

Satisfaction with StandBy

Specific measure of bereaved client's perceptions of the StandBy program in terms of the program's stated client outcomes – a process-based client satisfaction measure

SURVEY 3: STANDBY RESPONSE SERVICE

Introduction
This survey asks you a series of questions about your experience with the StandBy Response Service. The results are used to help us better understand ways to improve this service and improve how StandBy offers assistance and support to families and friends experiencing grief or bereavement.

QUESTION 1 - About your most recent contact with the StandBy Response Service
Please think about your most recent contact with the StandBy Response Service. The following questions are asked confidentially and will only be used in the analysis of the survey.

SURVEY 3: STANDBY RESPONSE SERVICE

QUESTION 2 - StandBy's immediate response
Please think about your most recent contact with the StandBy Response Service. The following questions are asked confidentially and will only be used in the analysis of the survey.

- 24 general evaluation questions
- 7 questions evaluating different types of assistance provided by StandBy
- Series of demographic questions



Satisfaction with StandBy

QUESTION 1 – About your most recent contact with the StandBy Response Service

QUESTION 2 – StandBy's immediate response

We would like you to think about your most recent contact with the StandBy Response Service and tell us to what extent do you agree or disagree with the following statements.

- I was pleased to get the assistance/advice from the StandBy Response Service
- With the help of StandBy, I was better able to understand what support I needed and where to get it
- The StandBy people/person understood what I was going through

uses a five-point Likert answer scale from strongly disagree through to strongly agree

Community capacity building

Specific measure of emergency and community responders' capacity to deal with suicide and other traumatic events in their communities

- 15 general evaluation questions
- 5 questions about familiarity and contact with StandBy (Time 2 only)
- 8 demographic questions

Community capacity building

Are you familiar with the StandBy Response Suicide Bereavement Service?

- *Emergency responders and local support services in our community have formal arrangements in place to implement a quick, coordinated response to emergency situations (violence, sudden death, suicide, traumatic event)*
- *I feel confident in my role when responding to suicide events in our community*
- *Our community can move quickly when responding to emergency situations (violence, sudden death, suicide, traumatic event)*
- *If people bereaved by suicide need help, I know who to contact to get immediate support for them*



Sampling and recruitment

Advertisements in national newspapers

Two campaigns

**National Quality of Life Survey
Call for Volunteers**

Are you interested in contributing to Government policy on quality of life and well-being in Australia? We are seeking volunteers to participate in a major national survey.

Your participation in the study will involve completing a tick-the-box style survey 4 times over the next 3 years. The survey will take less than 15 minutes to complete.

If you would like to participate in this important initiative, please contact:
Corporate Diagnostics on 1800 547 453 (free call within Australia)

Or email: victoria.combes@cordia.com.au for further details

It's time to hear the voice of the bereaved

Have you been bereaved through suicide? We want to hear your views through a national survey of quality of life. The survey is part of a major national study aiming to better understand the needs and experiences of people bereaved through suicide. The results will assist in the developing Government policy and providing support services throughout Australia.

Your participation in the study will involve completing a tick-the-box style survey 4 times over the next 3 years. The survey will take less than 15 minutes to complete.

If you would like to participate in this important initiative, please contact:
Corporate Diagnostics on 1800 547 453 (free call within Australia)

Or email: victoria.combes@cordia.com.au for further details

AGREEMENT TO PARTICIPATE
IN THE NATIONAL SUICIDE BEREAVEMENT STUDY

Participant Name: _____

Participant Address: _____

Participant Phone: _____

Participant Email: _____

Participant Signature: _____

Date: _____

Ethical and privacy issues

Suicide is often a sudden, traumatic experience and may invoke intense emotional responses and wide range of bereavement experiences. *People bereaved by suicide are a high-risk group.*

Strategies for managing ethical and privacy obligations

- Signed consent forms from all participants
- All participants informed of potential risks and benefits
- Participants provided with Lifeline number in case of distress or upset
- Trained evaluation researchers used to collect survey data, where requested
- All data kept strictly confidential – surveys were de-identified (ID numbers used) and trial sites did not have access to participant data and were not informed if clients had participated

the science of knowing 

Evaluation researchers

In addition to both hard-copy and electronic survey completion methods, StandBy clients also had the option of completing their survey face-to-face, with a trained evaluation researcher.

- Relevant qualifications
- Standardised training syllabus and manual – research techniques and knowledge of suicide bereavement
- No counselling or ongoing therapeutic practice
- De-briefing available for researchers



the science of knowing 

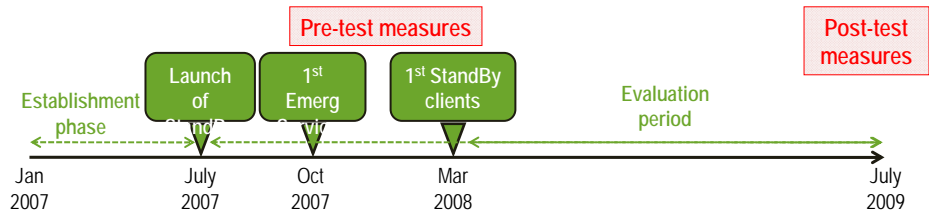


Overview

- Evaluating complex interventions
- The StandBy Response Service & the StandBy Replication Trial Project
- Evaluation objectives and approach
- Specific methodological considerations
- Project challenges, solutions and management strategies
- Achievements and future opportunities

Set-up time for the program

Establishment and “bedding-in” of the StandBy Response Service in each trial site took longer than expected (with the exception of Sunshine/Cooloola Coast – already established).

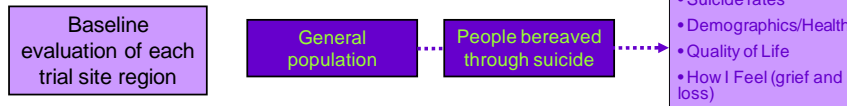


Management strategies

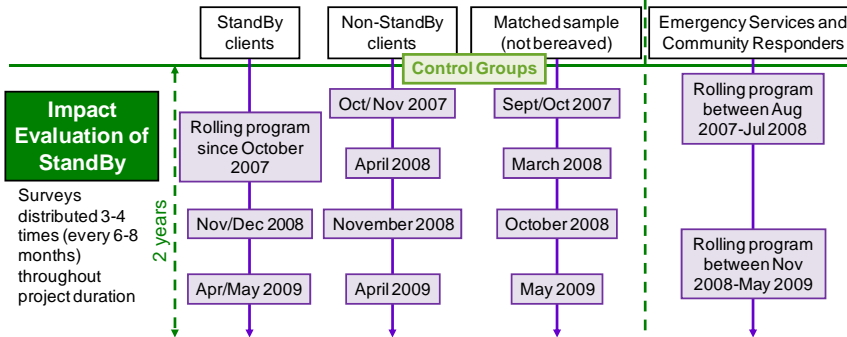
- Three survey periods for StandBy clients
- Pre- and post-testing (i.e. 2 survey periods) of community capacity through emergency and community services personnel
- Ongoing communication with trial sites to boost response rates

Set-up time for the program

BASELINE EVALUATION



IMPACT EVALUATION – 3-4 Survey waves over a two-year timeframe



Postvention set-up factors

- *Stability of staffing* – NFP churn, topic sensitivity, skills deficits in the NFP sector, program complexity
- *Community networks, partnerships & agreements* – existing networks and/or arrangements beneficial
- *Practices and procedures* – tailoring the program model and practices to each region's specific needs takes time

Recruitment & retention for the evaluation



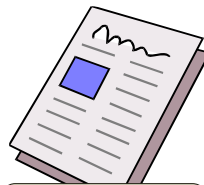
Regular contact
with trial sites



Newsletters/
factsheets



Toll-free number
for evaluators



Final summary
of results



Multiple survey
completion methods



Ethical dilemmas for the objective evaluator

- **Participant requests** – e.g. questions about the surveys and/or study; requests for survey results; information about local services; assistance with personal circumstances
- **Managing participant responses** – surveys asked some personal questions about suicide ideation, quality of life and feelings (e.g. depression, sadness, anger). Some participants also made additional comments about their personal circumstances



Overview

- Evaluating complex interventions
- The StandBy Response Service & the StandBy Replication Trial Project
- Evaluation objectives and approach
- Specific methodological considerations
- Project challenges, solutions and management strategies
- Achievements and future opportunities

Learnings from the evaluation

- ***Communication is vital*** – ongoing communication with all sites/staff and participants is essential for gaining good response rates and reliable data
- ***Scientific methods vs flexibility*** – important to be flexible in evaluation design to manage changes, while still maintaining rigorous evaluation techniques

Learnings from the evaluation

- ***Innovative techniques*** – multiple survey completion methods, such as electronic, email-based survey options, can boost response rates and improve participant retention
- ***Risk management*** – developing effective risk management strategies at the outset can prevent difficulties and/or problems during the evaluation

the science of knowing 

Evaluation achievements

- ***Comprehensive, longitudinal, evidence-based evaluation*** of the StandBy Response Service in four different trial sites
- ***Huge database of information*** regarding postvention, suicide bereavement, how people cope with trauma/loss, support needs, and much more

the science of knowing 

Future opportunities

- **Survey development and testing** – wider use of specially designed survey instruments
- **Further data mining** – evaluation produced massive amounts of data on a range of topics, including suicide ideation, risk factors for suicide, support needs, barriers to seeking/finding support, differential responses to trauma
- **Building the knowledge-base** – contribute to overall understanding of suicide bereavement and the efficacy of active postvention activities; evaluating complex interventions

Evaluating a complex intervention for
people bereaved through suicide –
challenges and considerations

Thank you for your attention

Victoria Visser
&
Professor Peter Bycroft



the science of knowing