

Diverse identities, diverse design – Building an evaluation framework for two distinct program populations



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Presenters

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Presentation overview

- Project overview
- Project complexities
- Our approach: Participatory Action Research
- Outcomes: Two different methodologies
- Lessons learned: Successes and challenges
- What we hope to achieve
- Questions



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Project overview

STANDBY Client Outcomes Project

The Science of Knowing has been contracted by United Synergies to evaluate the impact of the STANDBY Support After Suicide program on client outcomes.



STANDBY Support After Suicide



STANDBY Support After Suicide (STANDBY) is a community-based suicide postvention program that provides coordinated support and assistance for people who have been bereaved through suicide by responding to individuals' unique needs.

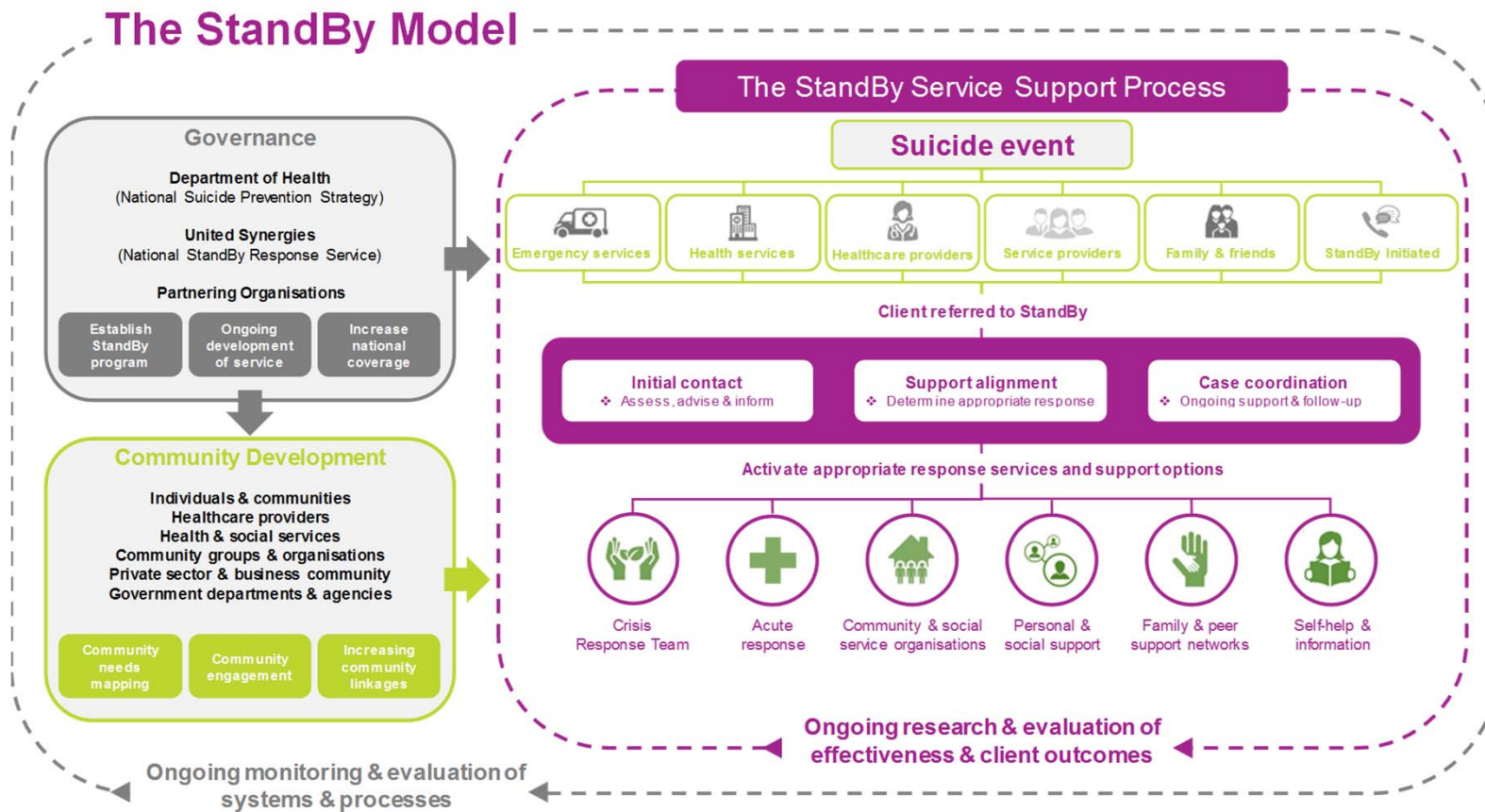


STANDBY locations

STANDBY operates in numerous regions around Australia, including several rural and remote areas with large Aboriginal and Torres Strait Islander populations.

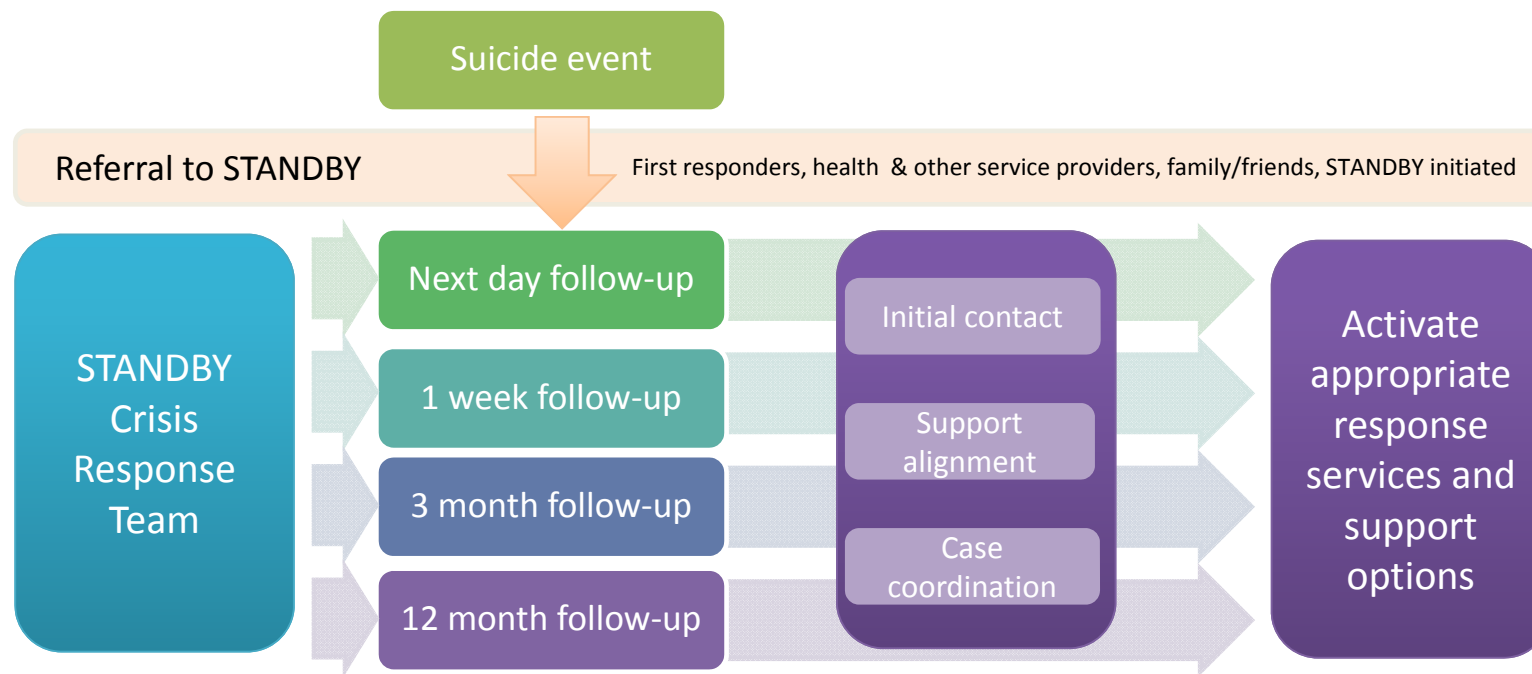


STANDBY model

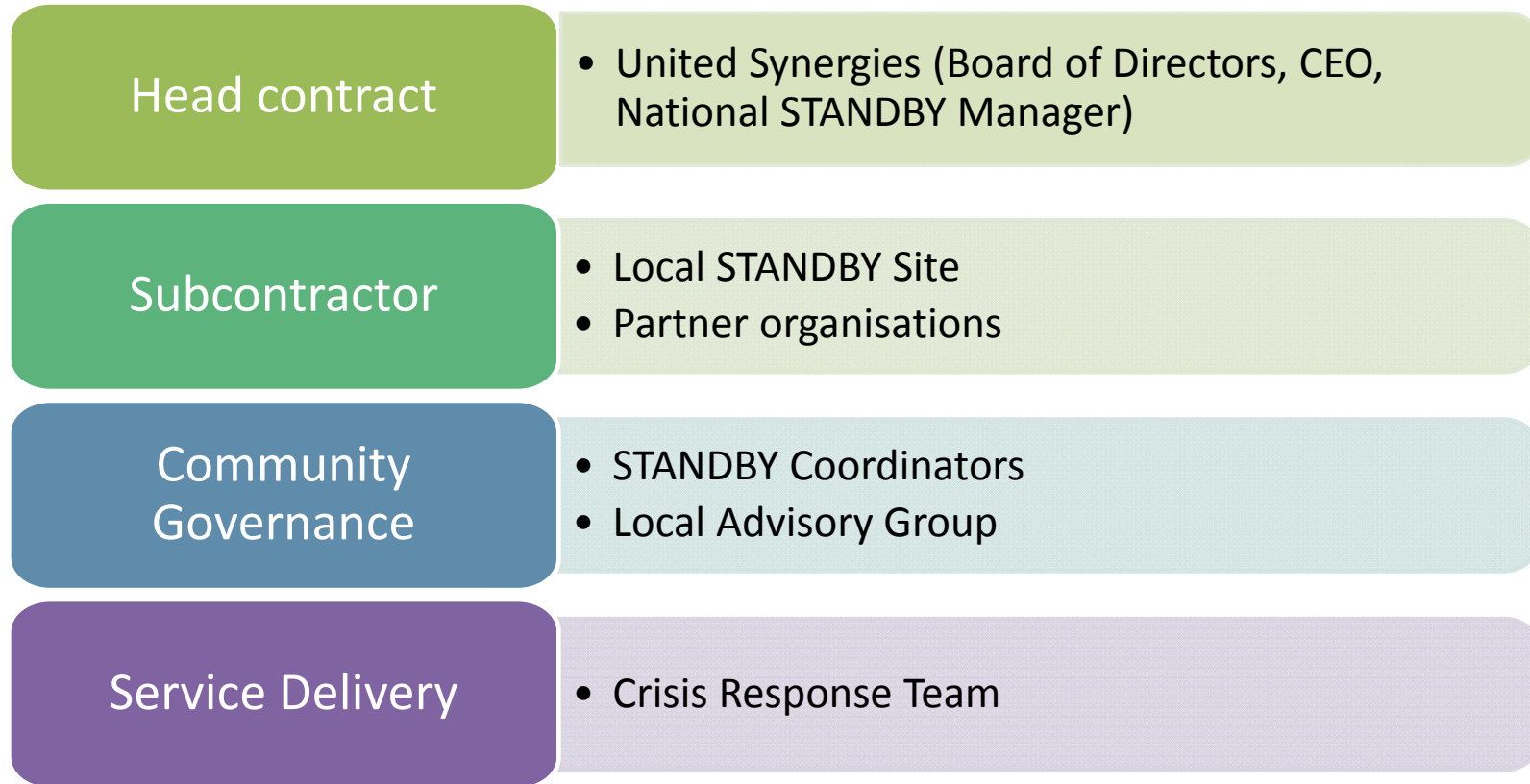


STANDBY support process

Following a suicide event, clients are referred to STANDBY, support may include telephone or face-to-face and follow up (next day, 1 week, 3 months and 12 months).



STANDBY governance structure

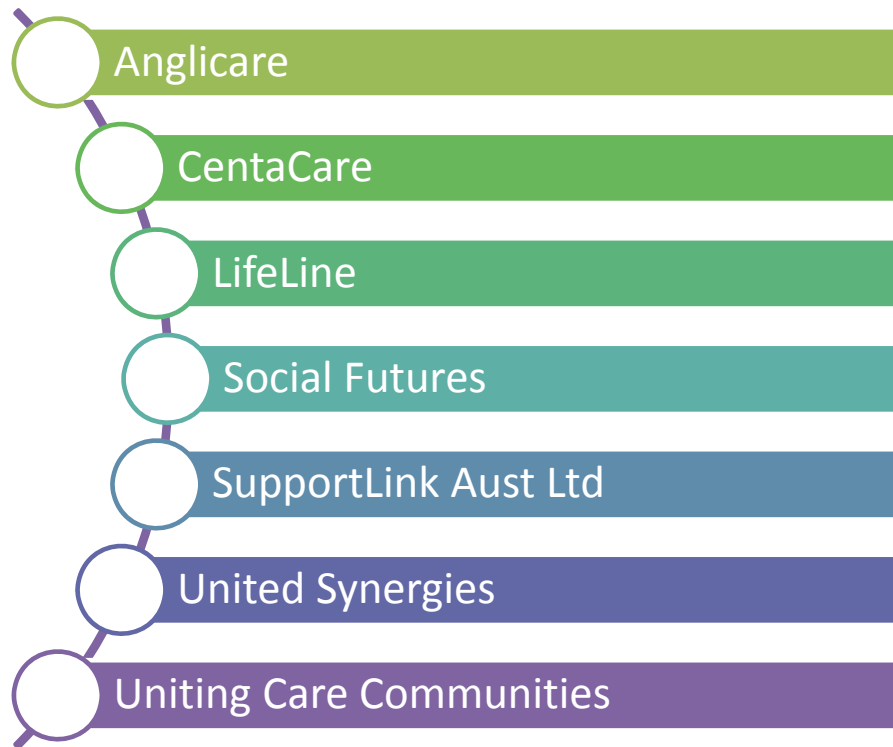


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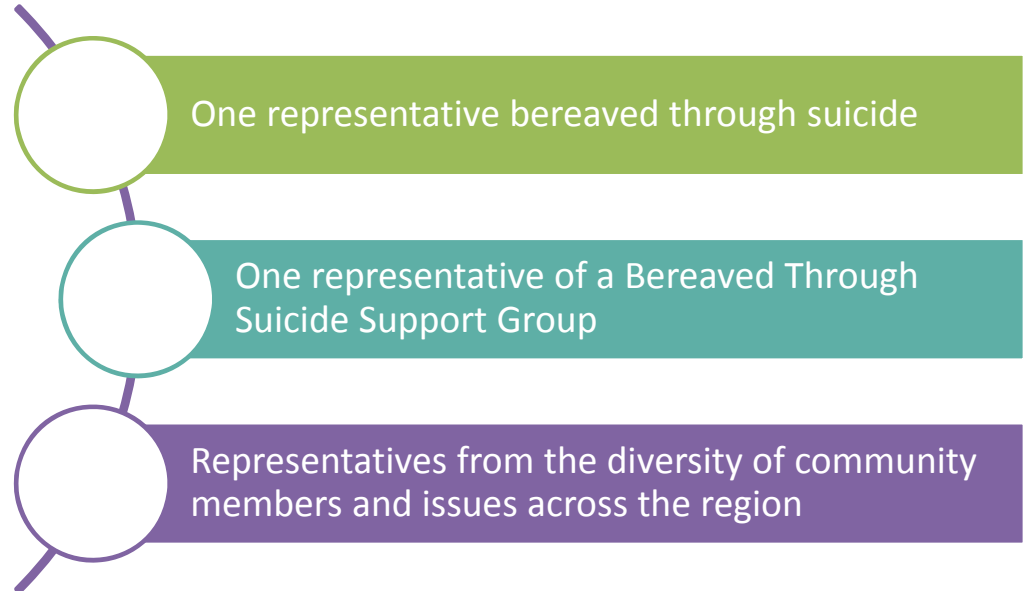
Project complexities

Diverse service/community identities

Auspicing agents/partner organisations



Local Advisory Groups



Diverse service values and views



Cultural and diverse client needs

STANDBY is committed to providing a genuine and appropriate response which recognises the cultural and diverse needs of people bereaved by suicide. This is achieved by:

- Establishing links to, and consulting with, extended families, and local cultural communities*
- Using cultural advisors, specialist cultural/identity services, and ensuring the response considers various factors (e.g. diverse needs such as age, gender, cultural background, etc.)*
- Using appropriate protocols within different cultural/identity groups*
- Using translation and language services such as the Telephone Interpreter Service as needed*
- Utilising appropriate cultural settings*
- Promoting community pride, knowledge and understanding of cultural history, heritage and identity.*

Source: United Synergies, 2016

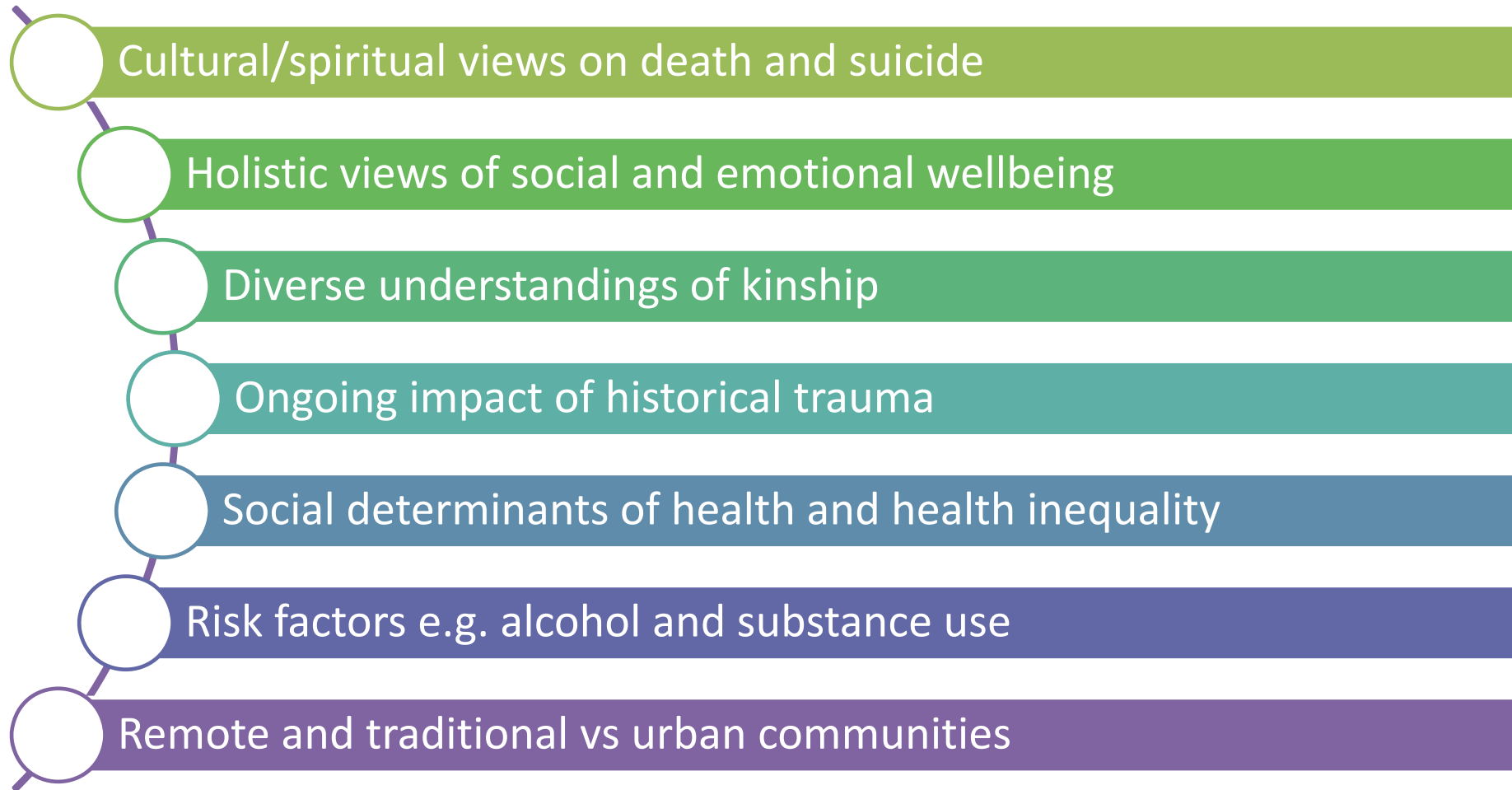


Indigenous suicide

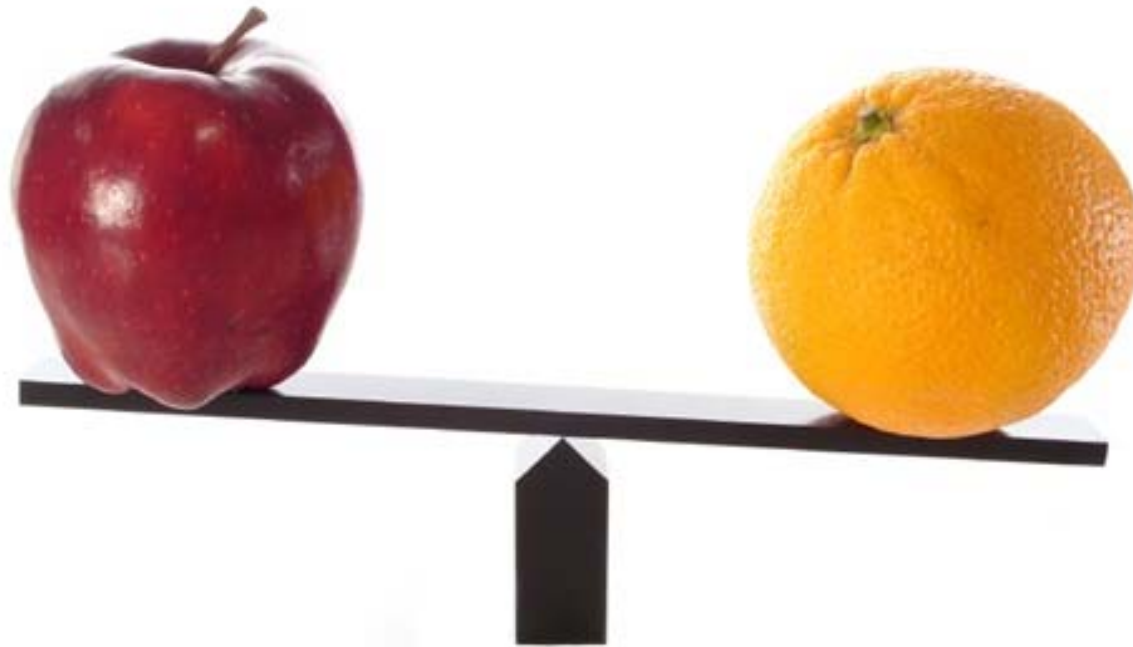
- Over **100 Aboriginal and Torres Strait Islanders** end their lives through suicide each year
- Unheard of prior to the 1960s (Hunter & Milroy, 2006)
- The **rate of suicide is twice as high** as that of non-Indigenous people (ABS, 2016)
- In 2015 it was the **fifth leading cause of death** among Indigenous people (ABS, 2016)
- In the five years from 2011 to 2015, intentional self-harm was the leading cause of death for Aboriginal and Torres Strait Islander persons between 15 and 34 years of age, and was the second leading cause for those 35-44 years of age (ABS, 2016)
- **Indigenous 15-24 year olds are over five times as likely to suicide** as their non-Indigenous peers (Australian Health Ministers' Advisory Council, 2015)



Indigenous perspectives



Comparing apples with oranges?



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Our approach: Participatory Action Research (PAR)

Principles of PAR

Social change

Intended to enable action that leads to a change or improvement on an issue. This is achieved by converging science (research) with practice (change)

Participation

- Driven by research participants and other individuals or agencies who have a stake in the issue being researched (stakeholders)

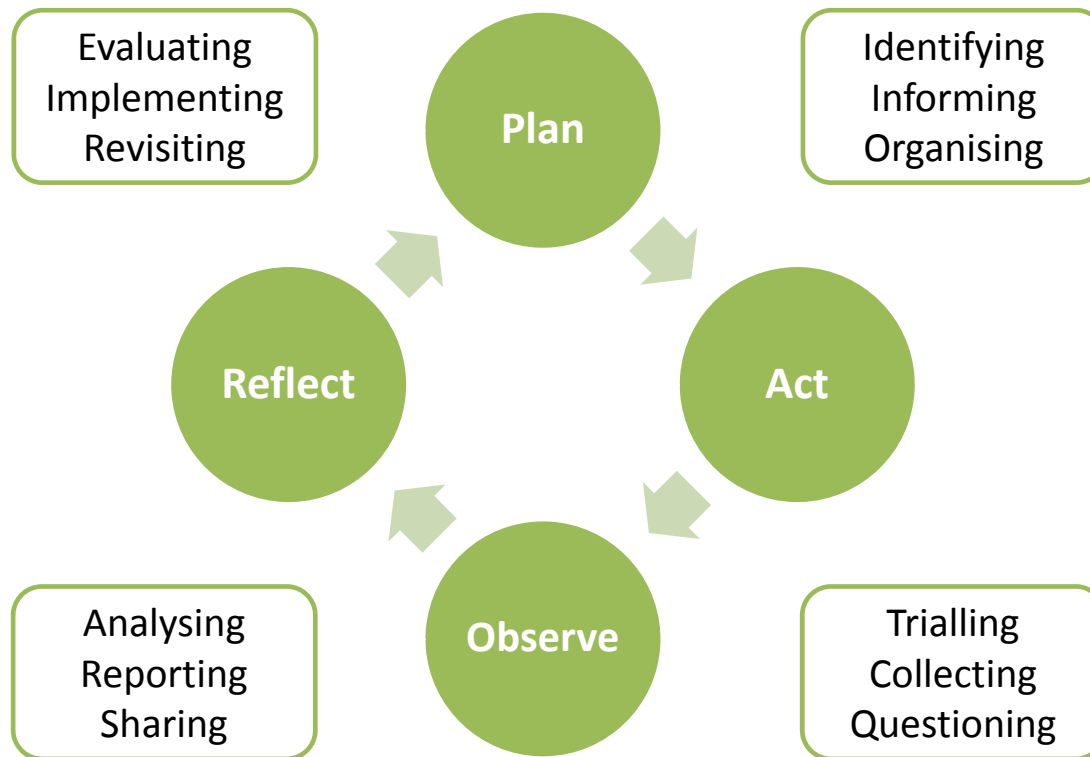
Power of knowledge

- A democratic model of communal learning, where knowledge is deliberately produced, owned and used by stakeholders, and provides new insights for both researchers and practitioners; and

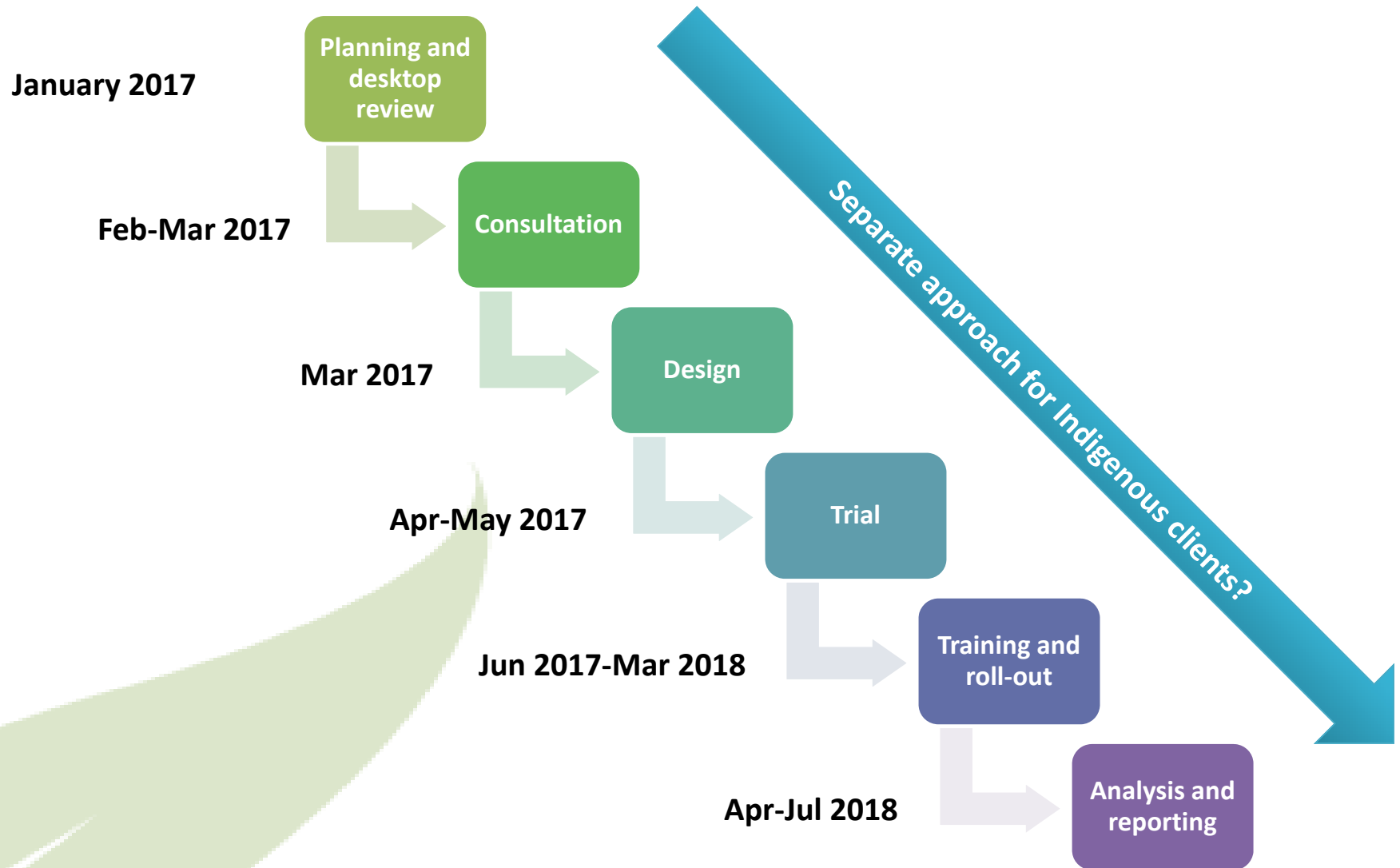
Collaboration

- Expands the emphasis from action and change to collaborative research activities that occur at every stage of the research cycle, including program planning, implementation, and evaluation.

PAR cycles



Original project plan



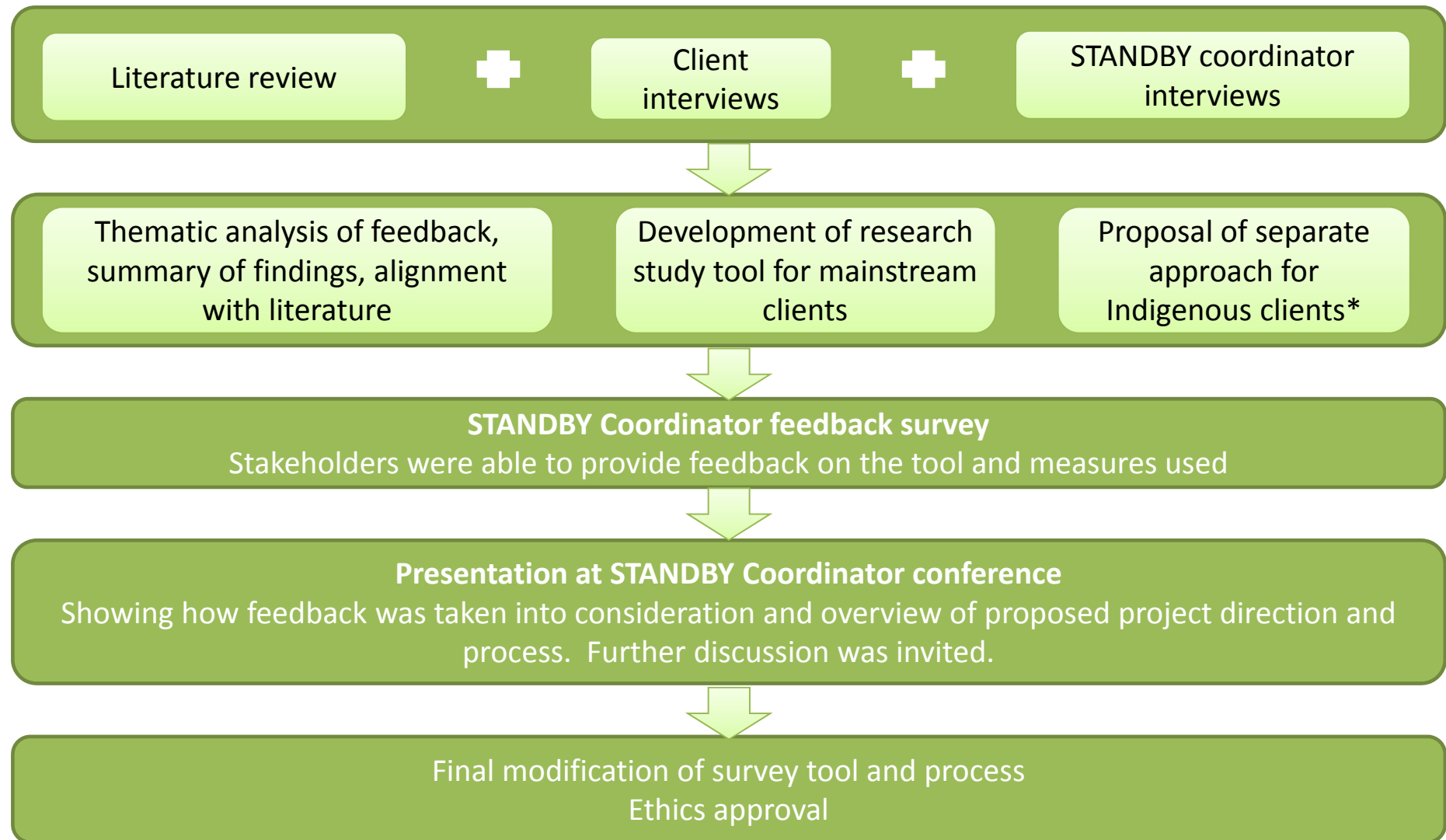
The PAR process

An inclusive consultation process was used to:

- **Confirm literature and assumptions** about outcome measures
- Identify **gaps in understanding**
- Ensure data collection methods and processes were **appropriate and acceptable** for a wide range of stakeholders
- Select **evaluation methods that were relevant** and could be **embedded into existing processes**.



Consultation process



Feedback – key client benefits

- **Information** – STANDBY provides clients with important information including both formal and practical information.
- **Support linkages** – STANDBY provides clients with appropriate referrals to support services.
- **Normalisation** – STANDBY helps to normalise clients' emotions and feelings.
- **Meaning-making** – STANDBY listens with non-judgement and helps clients make sense of their loss.
- **Suicide prevention** – STANDBY helps assess risk factors among clients.
- **Security/safety** – STANDBY makes clients feel safe in the knowledge that someone is there when they need them.



Measures for key benefits

Grief Experience Questionnaire (GEQ)

The GEQ measures grief responses associated with suicide bereavement across eight sub-scales.

Suicide Behaviours Questionnaire-Revised (SBQ-R)

- The SBQ-R measures suicidal ideation.

De Jong Gierveld Loneliness Scale (DGL)

- The DGL scale measures social and emotional loneliness and provides a measure of social isolation.

Satisfaction questions

- The survey will ask participants questions regarding their level of satisfaction with their contact with the STANDBY service and the services they were referred to by STANDBY.

Concerns raised

General project feedback

- **Confidentiality and consent** – concern that clients have not consented to being contacted in relation to participating in research and having their information shared with a third party.
- **Client safety** – concern that being invited and/or completing a survey may trigger negative feelings and traumatised clients.
- **Appropriate time** – concern about the best time to invite clients to participate in a study/provide feedback.

Draft survey feedback

- **Question wording** – concern around some of the question wording, specifically on the GEQ scale.
- **Client experience** – suggestions that the survey should ask participants about their social connections (e.g. changes, disruptions, loss).
- **Safety numbers** – suggestions about including safety numbers (e.g. Lifeline, Beyondblue) at the start of the outcomes sections.



Consideration of feedback

- **Literature review** – the Science of Knowing has conducted a literature review on appropriate measures, research designs, and ethical considerations in the area of suicide bereavement research.
- **Ethics review and approval** – the Science of Knowing will be partnering with a university to conduct the comparison study which will include gaining ethics approval.
- **Adapting current client consent processes** – developing a digital client consent process to be used for study and ongoing feedback process.
- **Survey revision** – revise survey to soften question wording, include indicators of social connections, increase visibility of safety numbers within survey.



Indigenous specific consultation

Proposal for Indigenous evaluation with Kimberley as trial site



Site Coordinators' thoughts and opinions sought about approach



Additional face-to-face meeting with STANDBY coordinators and area manager to discuss methodology, challenges/barriers and approach



Indigenous tool developed drawing on feedback, literature and existing Indigenous tools and resources



****Feedback from coordinators and other relevant sites invited (question relevance, wording)**



Indigenous specific feedback

Unique aspects of service delivery

- Very remote and traditional communities e.g. Kimberley
- More relational service i.e. more face-to-face contact; and yarning about issues
- Opportunistic delivery rather than strictly model based
- Substantial relationship building required to establish trust before being able to provide support

Outcome measures

- Outcome measures needed to include cultural and spiritual aspects of wellbeing i.e. worry about cultural practices that they may feel disconnected from

Key concerns

- Impact of the evaluation on trust and relationship with clients
- Client suspicion of outsiders/third party involvement and data collection



Consideration of feedback

- **Indigenous evaluation tools and resources** – The Science of Knowing identified Indigenous tools and resources currently being used for Indigenous populations to inform the development of a culturally appropriate Indigenous discussion tool.
- **Evaluation approach** – Developing a structured, yet informal approach to data collection that can be implemented by STANDBY Coordinators in an effort to maintain community trust and relationship.
- **Discussion tool revision** – The Science of Knowing will revise the discussion tool to ensure that questions include relevant indicators, culturally appropriate wording and to refine issues that arise from implementation, to soften question wording, include indicators of social connections, increase visibility of safety numbers within survey.




Consideration of feedback

Suggestions:

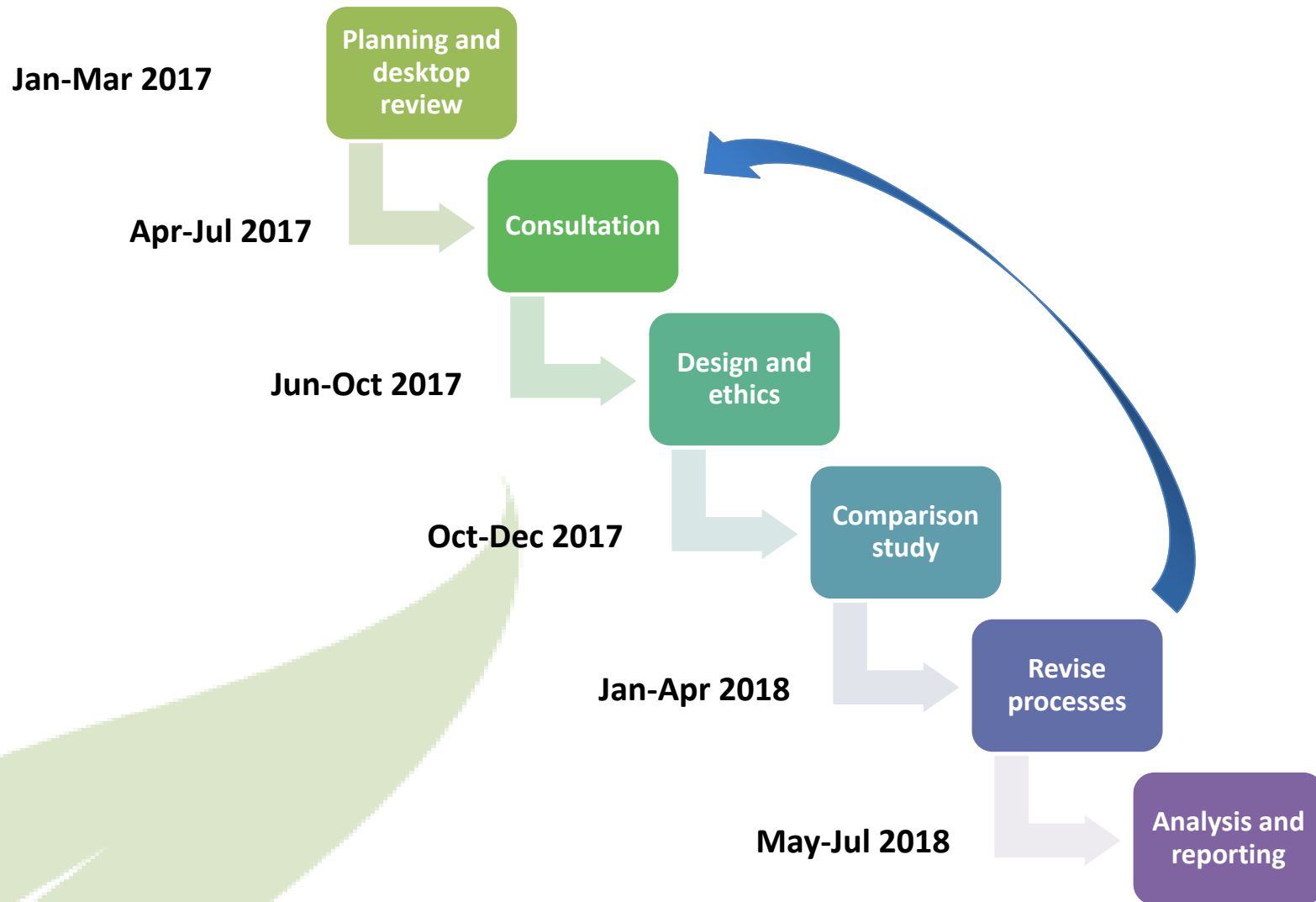
- Collecting **viewpoint of other stakeholders** as an alternative to contacting clients
- Inviting Indigenous clients to participate in the evaluation in **informal ways** e.g. STANDBY stands at local Indigenous events (e.g. Mabo event)
- Developing an **Indigenous version of the mainstream ongoing Client Feedback Survey** as an option for Indigenous clients to avoid any assumptions based solely on Indigenous status.



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**Outcome:
Two evaluation
methodologies**

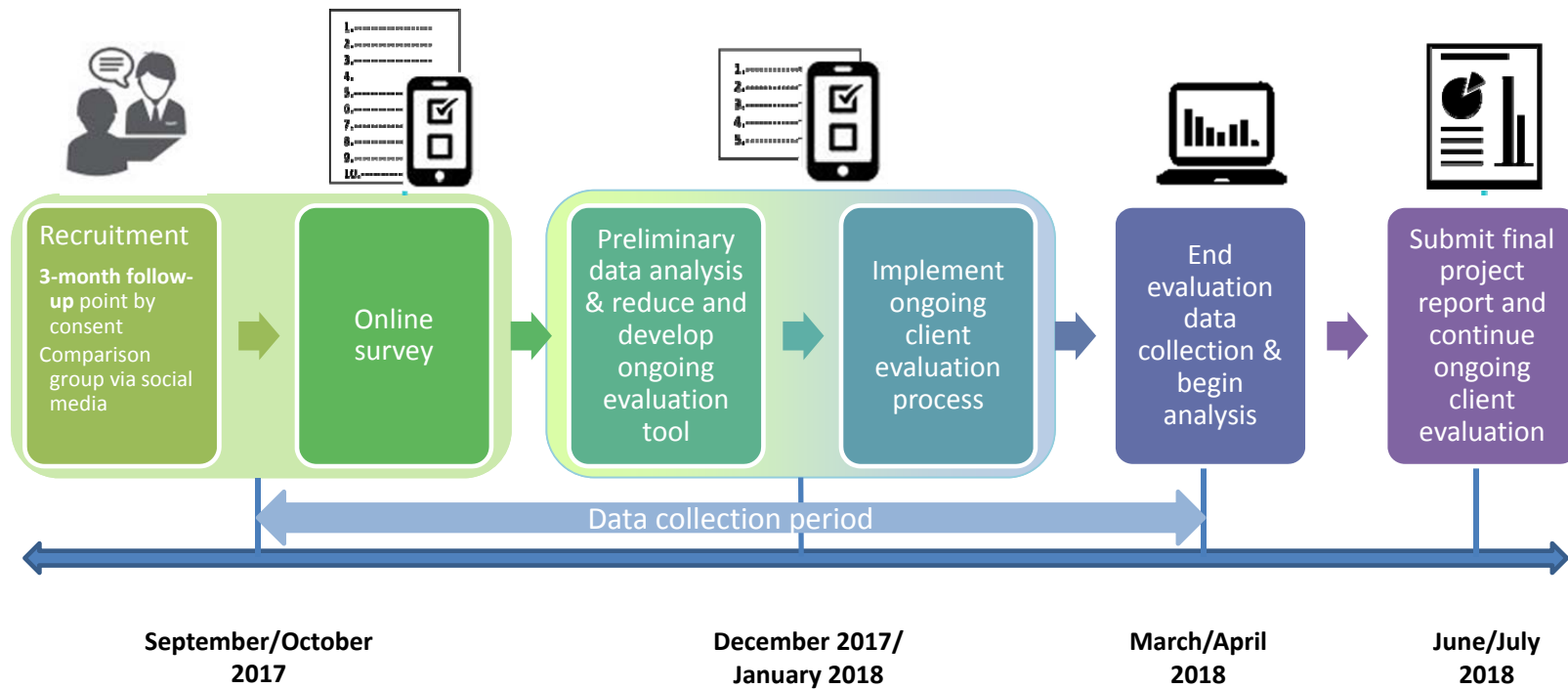
Original vs revised project plan



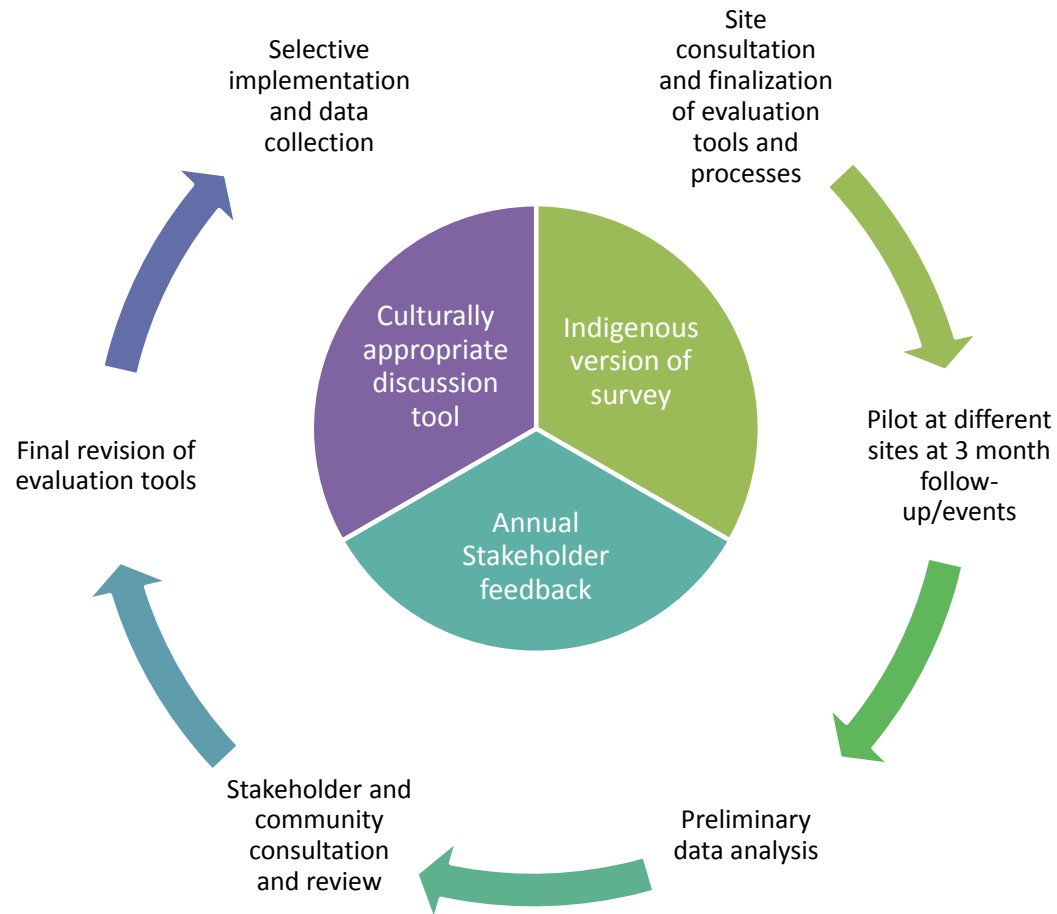
Mainstream methodology

Comparison study

Ongoing evaluation process



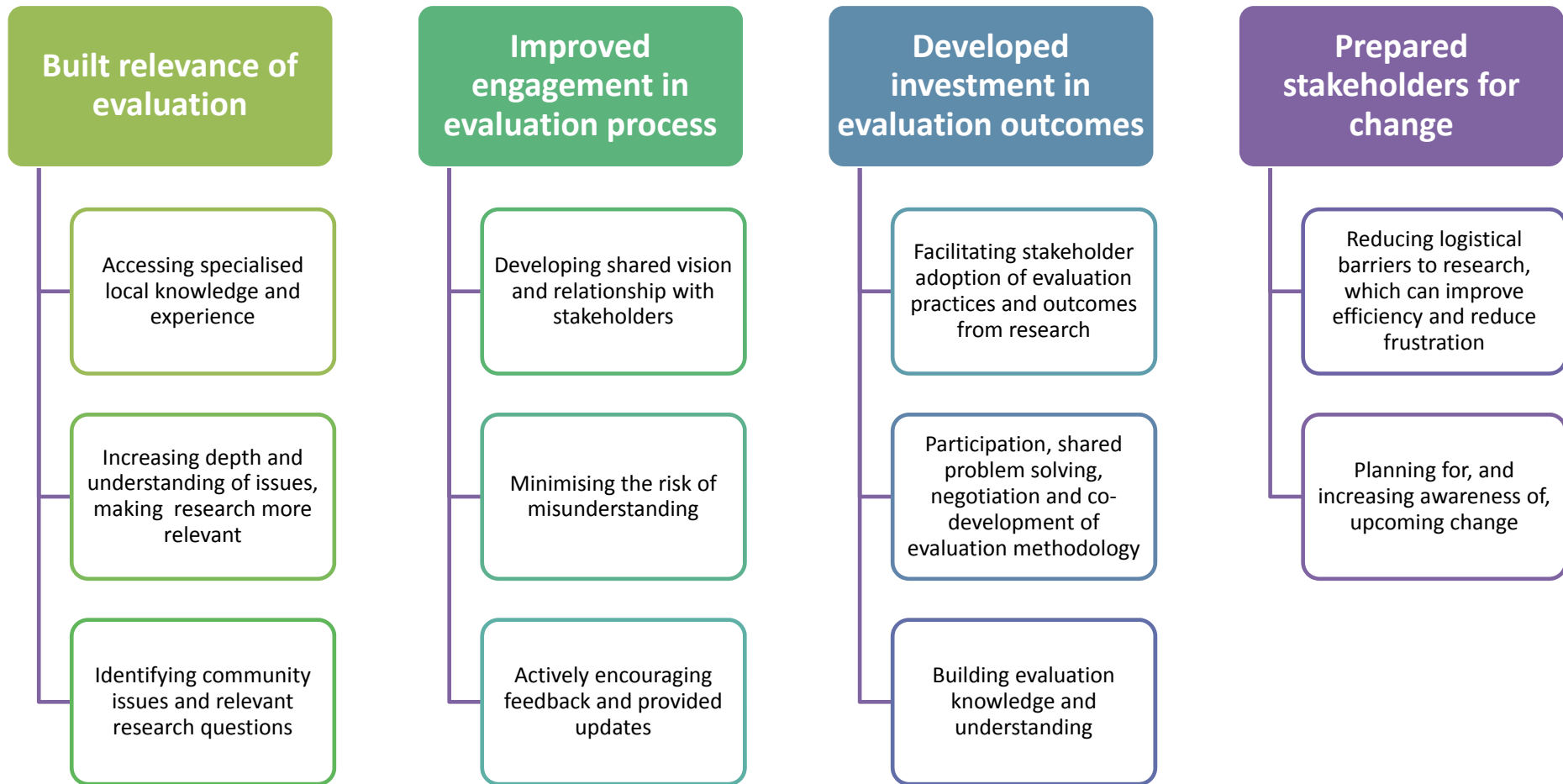
Indigenous methodology



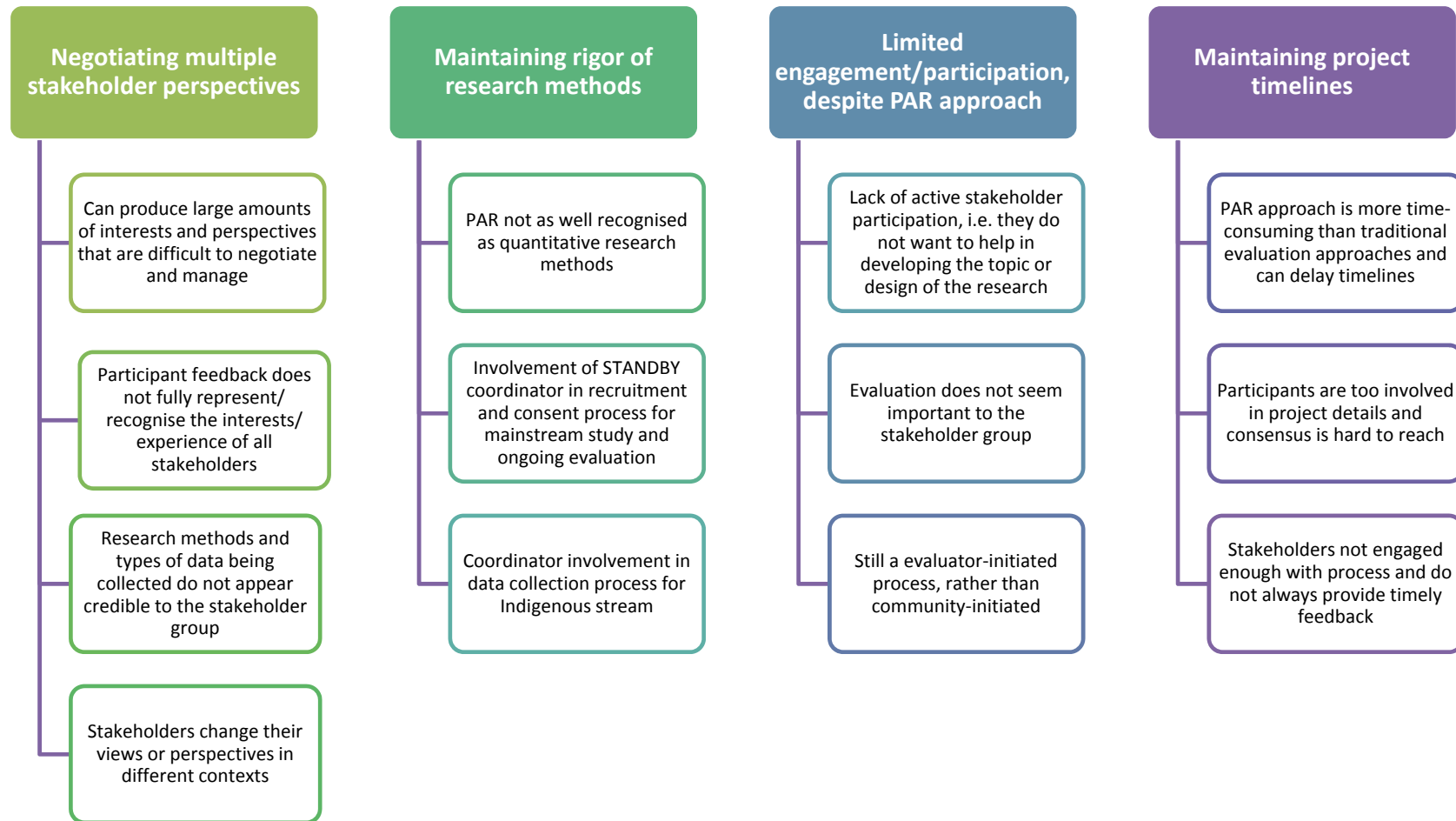
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Lessons learned

Successes



Challenges



What we hope to achieve

- More conscious understanding of **clients' needs and gaps in service delivery**
- **Co-creation of knowledge** in evaluation practice
- **Evidence-based** service delivery
- Improved **outcomes and benefits** for clients
- Contribution to STANDBY's **evaluation capital**



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Questions?



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References

Australian Bureau of Statistics (2016). *Causes of Death, Australia, 2014*, cat.no: 3303.0, viewed 26 June 2016, <[www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/3303.0~2014~Main%20Features~External%20Causes%20\(V01-Y98\)%20%20%20%20~10044](http://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/3303.0~2014~Main%20Features~External%20Causes%20(V01-Y98)%20%20%20%20~10044)>.

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