

Long-term efforts yield results: Positive evaluation of Educational Program Vivat

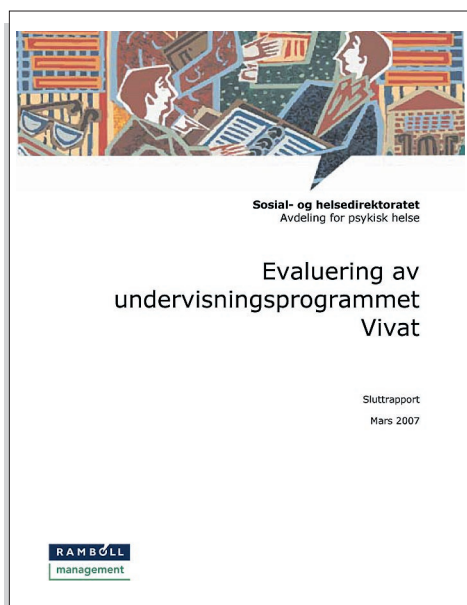


By Hans Lander and Dag Willy Tallaksen

Since 1998, Vivat's course "First-aid suicide intervention skills" (ASIST) has been part of the state-initiated Action Plan against Suicide, with more than 12 000 course participants. The Directorate of Health and Social Affairs, which funds Vivat, wanted a new and comprehensive evaluation of Vivat to ascertain whether the participants' gain long-lasting competence and ability to intervene in cases where the risk of suicide is imminent, and to see whether the program raises competence in the workplace. Findings from the evaluation, carried out in autumn 2006 and spring 2007, were positive.

So far, more than 12 000 persons have taken the first-aid course, and there are 120 active Vivat trainers. In addition to the trainers, Vivat also trains coaches as part of its internal quality assurance system.

The Directorate of Health and Social Affairs has been planning for an evaluation of the Vivat program for some time. From a research perspective such evaluations are very challenging, so staff members at Vivat were very excited about the outcome. In 2006 the assignment was posted for tenders and Rambøll Management won the contract. They carried out the evaluation in the autumn of 2006 and spring of 2007, publishing their evaluation report in March 2007.



[The report, in Norwegian, can be downloaded from www.unn.no/vivat Document archive (in the menu to the left)]

This is the first independent evaluation of the course "First-aid suicide intervention skills". There was a limited evaluation in 2000 as part of the evaluation by

Agenda Utredning og Utvikling of the Action Plan against Suicide. The Directorate of Health and Social Affairs set the framework for the new evaluation to include the following areas: the organization and anchoring of the program, method, content and scope, and effect. The evaluation comprised a number of interviews with course participants, trainers and coaches/Vivat staff. The study was also based on questionnaires collected from 249 course participants and 36 trainers. Rambøll Management pointed out that it was difficult to obtain sufficient response for the study, particularly from course participants. This is generally due to inadequate information on course participants' phone numbers, workplaces and addresses, as registers were incomplete and people changed workplaces. Below is a summary of the assessments made by Rambøll Management:

Organization and anchoring

Vivat is found to be both cost efficient and to have a solidly based network of local competence and expert support. The links to regional resource centres for violence, traumatic stress and suicide prevention (RVTS) are found to be appropriate. It is also pointed out that Vivat has succeeded in recruiting participants from relevant expert environments and workplaces, but the report finds that some groups are underrepresented and the geographical distribution is not quite satisfactory. Some of this is due to inadequate resources. One consequence of this is that information material, such as leaflets, is found to be outdated. The southern and central regions of Norway continue to be inadequately covered when it comes to course participants and trainers.

Nationwide courses: First-aid suicide intervention skills

The course "First-aid suicide intervention skills" is an intensive two-day course. It focuses on people who in their day-to-day jobs encounter individuals at risk of suicide, and is a practical interdisciplinary course where participants learn to interpret danger signals and intervene in the case of an acute suicide crisis. The goal is that after the course the participants will be more competent and confident when it comes to intervening in acute suicide crises. At the course, participants learn to:

- Ascertain who may be at risk of suicide
- Ask direct questions about suicidal thoughts
- Help the person at risk of suicide to talk about what he or she is having trouble with
- Make a simple risk assessment
- Prepare and implement a plan with the person in question where the aim is to save his or her life
- Use local resources to alleviate crises

More than 12 000 persons have participated in the Vivat course in Norway since its launch in 1998.

On a global basis it is the most frequently used suicide prevention course. It is approved by several trade unions as vital to raising competence in this field.

Vivat is anchored at the University Hospital of North Norway, where it is linked to RVTS Nord (the resource centre for violence, traumatic stress and suicide prevention, northern region), and funded by the Directorate of Health and Social Affairs.

For more information contact: Vivat, Universitetssykehuset Nord-Norge HF, Postboks 6124, N-9291 Tromsø.

www.unn.no/vivat.

e-mail: vivat@unn.no

According to Rambøll, this may be due to the lack or inadequate organization of suicide prevention centres in these regions. Vivat's contact with LivingWorks Education is described as a feasible quality-assurance method which opens for mutual influence. The international revision in 2004 is described as a positive development.

Vivat appears to have a key role in the total competence raising program for suicide prevention. The ties to the University Hospital of North Norway and RVTS Nord are found to be good solutions.

The education program's course model

In this area Rambøll Management has attached importance to what is called the two-stage principle where course participants may continue after the first-aid course and become trainers. The report states that this model generally works as intended, but that there is a preponderance of psychiatric nurses among the trainers. This does not satisfy the aim of having a broad interdisciplinary range. More importance should be attached to broader interdisciplinary recruitment in the future, or this aim should be changed. When it comes to the voluntary aspect of trainers' activities, it is found that this does not stop people from becoming or continuing as a trainer. The trainers state that courses require a great deal of preparation and that holding a course is quite a workload. For some trainers this is probably the reason why they do not arrange more courses than the minimum requirement for continuing in Vivat. The report nevertheless comes to the conclusion that trainers see their workload as bearable. The report finds that the scheme for quality assurance of the courses is good. The rationale for this is that the trainers are generally satisfied with the follow-up they receive from the coaches. It is also emphasized that the trainers display a high degree of interest and commitment.

Content and scope

The content of the course satisfies the course intentions according to the report. The trainers are described as competent, and they present the material in a satisfactory manner. The course has a suitable level of difficulty. The evaluation shows that course participants feel more confident and more able to deal with suicide situations after having participated in the course. The report also points out that the course is not intended to train participants to treat persons at risk of suicide, and nor does it do this.

The evaluation report states that the interdisciplinary qualities of the course are a strength that opens for the exchange of experience and knowledge. One question is raised as to whether doctors and psychologists would rather use other courses for their further and continuing education. The assessment is that the course participants feel that they have raised their competence, and they state that they are satisfied with the teaching material and the educational methods used. The report states that a need for a follow-up course is present.

Effect of course participation

The assessment finds that to some extent participation in the course has a lasting effect on the participants. A refresher course with skills training would reinforce this effect. Course participation strengthens interdisciplinary cooperation and networks. This assumes that building networks is given priority at the course. It is pointed out, however, that the competence is linked to training one's own skills, and is hence difficult to transfer. Thus it is difficult to see whether competence is raised to any considerable extent on the system level.



Comments from Vivat's managerial team

Vivat's managerial team is pleased with the positive feedback in Rambøll's report. Some shortcomings are pointed out and some measures for improvement are proposed. Vivat considers this useful and takes it under consideration. These issues will be included in discussions in Vivat's steering group and organization when preparing future strategy plans. Vivat has already planned to start pilot testing a new refresher course for previous course participants in the autumn of 2007, which is recommended in the report. On the basis of Rambøll's evaluation report the Directorate of Health and Social Affairs has now asked Vivat to design a proposal for a plan for the organization and anchoring of Vivat as a permanent activity.

Hans Lander is the head of the Vivat education programme. He is a clinical specialist in psychiatric nursing with a cand. mag. (Bachelor's) degree. Since 2001 he has worked with suicide prevention within the national programme aimed at counteracting suicide.

Dag Willy Tallaksen is a senior lecturer at the Department of Nursing Education of Akershus University College, and is a team leader at Vivat. He and Hans Lander are responsible for training the course heads and for quality-assuring the activities.