Introduction

An increasing number of college students face significant mental health problems (ACHA, 2007), which places them at elevated risk for suicide. Suicide is the 2nd leading cause of death for college students (AAS, 2012; CDC, 2009).

Unfortunately, many universities and colleges lack resources to effectively manage, intervene with, and prevent suicidal behavior (Gallagher, 2007). As a result, college students are often identifying their own mental health needs and frequently turn to peers for support (Haas et al., 2003). This makes college peers an important group to target for prevention initiatives.

The Garrett Lee Smith Memorial Act was passed to stimulate suicide prevention initiatives on college campuses (Goldston et al., 2010). Prior research on gatekeeper training programs (e.g., QPR) have demonstrated effectiveness in improving suicide-related knowledge, attitudes, and prevention skills over time (Indelicato et al., 2011; Thompkins, et al., 2010).

However, a majority of the existing suicide prevention programs are not geared towards college students, nor have their effects been rigorously assessed for long-term benefits (Mann et al., 2005; Thompkins et al., 2010).

Follow-up assessment are essential as they may indicate which factors of prevention are effective over time, such as self-efficacy, which is predictive of action to intervene (Hooven et al., 2010). They also evaluate long-term impact, as indicated by an 18 yr longitudinal study that showed their prevention program yielded significant decreases in suicide rates and attempts (Zener et al., 2009).

The purpose of this study was to create, implement, and evaluate the long-term (1-month) effects of a suicide awareness/gatekeeper prevention program for students. We hypothesized that participants’ knowledge of suicide warning signs, self-efficacy, and confidence for preventing suicide would increase; while stigma towards help-seeking and suicidal peers would decrease. We expected improvements to be maintained at a 1-month follow up.

Methods

The program curriculum was created in consultation with leading experts, campus counselors, and existing research. The program was delivered in selected classes (e.g., nursing, social work, psychology) throughout the University by trained undergraduate students. A pre-post self-report assessment was administered at the time of presentation.

380, predominantly Caucasian, undergraduates (Mean age = 20.85, SD = 3.06) completed the pre-post assessment.

Students willing to be contacted for follow-up were sent an email link to the online survey, housed on a secure server. One reminder email was sent to improve response rates.

Results

Hypotheses were tested using a repeated measures MANCOVA with gender, prior suicide prevention training, and knowing someone who struggled with suicidal thoughts as covariates. Significant effects were observed for each dependent variable.

Discussion and Implications

Our results demonstrate that the UWEC Suicide Awareness and Gatekeeper program was effective in improving knowledge, attitudes towards suicidal persons and seeking help, prevention efficacy, and confidence in one’s ability to intervene with a suicidal person. These improvements held over time, with knowledge of and confidence in how to intervene continuing to improve at the one-month follow-up.

The program appears to have the greatest impact on general knowledge about suicide warning signs and enhancing participants’ beliefs that they are capable of intervening with a suicidal person and linking them to help. Another key area of change likely to impact willingness to intervene was the reduction of stigma towards a suicidal person and towards seeking help for suicide.

The finding that there were no differences in the longitudinal effects of the program across class years, indicates this program can be useful to students at all class levels in the university.

While actual behaviors were not able to be measured, a sizeable portion of students reported noticing suicide warning signs and intervening in some way, one-month following the program. Additionally, participants reported feeling more knowledgeable and able to intervene as a result of participating in this program; a finding that held up over the one-month follow up.

This study offers evidence that a peer-delivered program can have a lasting effect on increasing factors known to influence behavioral action, and thereby has potential to prevent suicide on college campuses.

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