

# Bridging the Gap Between Research and Practice

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## How to Make Our Dreams Come True: Successful Programs Start with Sound Logic

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Director of OHP Training, MAP ERC  
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# Acknowledgments

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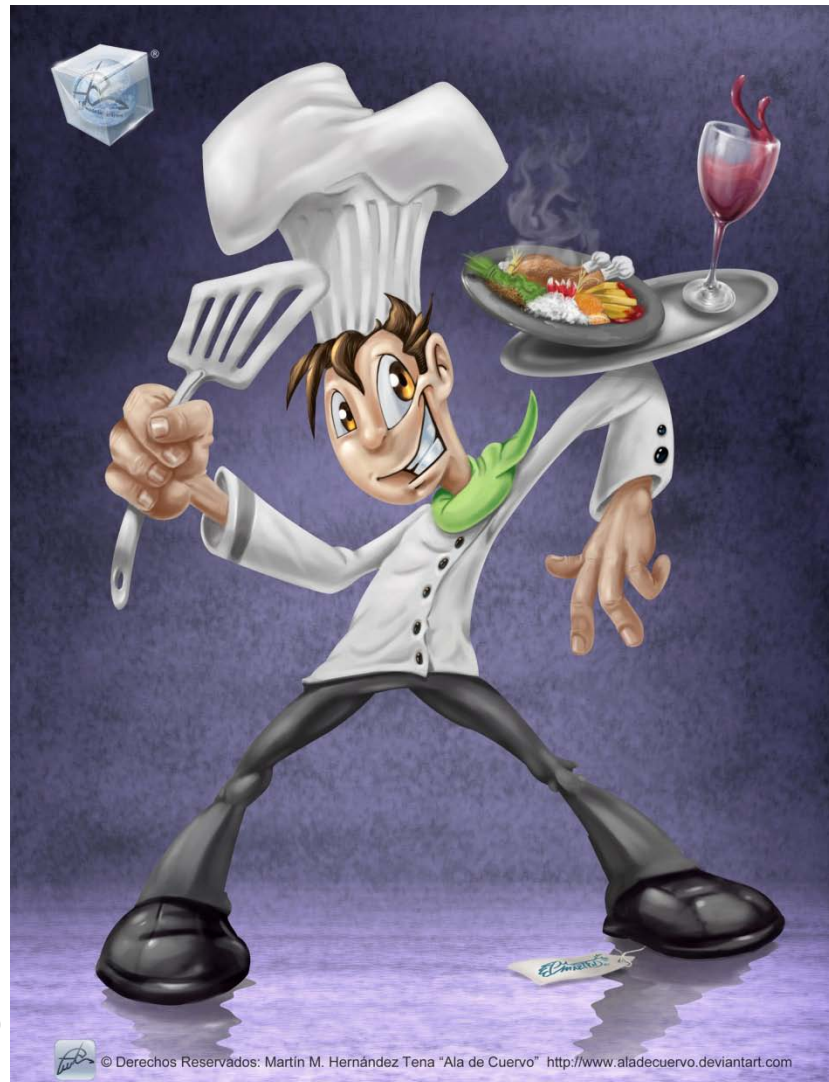
- National Institute for Occupational Safety and Health
- Office of Suicide Prevention, CDPHE
- Project Safety Net Communities 2006-2012.
- Safety Management Applied Research Team

# Road Map

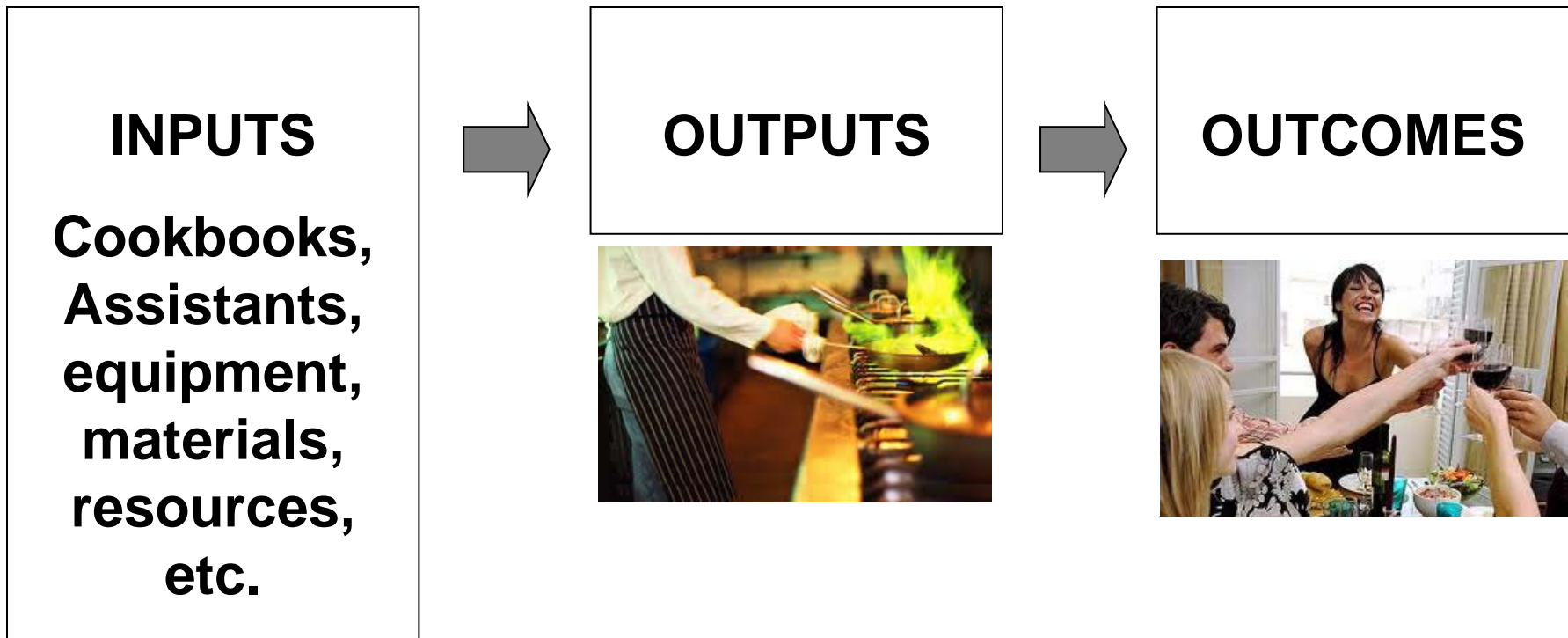
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1. Best practices
2. Challenges we face while implementing “best practices”
3. Know where we stand
4. Prepare and revise routes to reach our destination
5. Conclusions

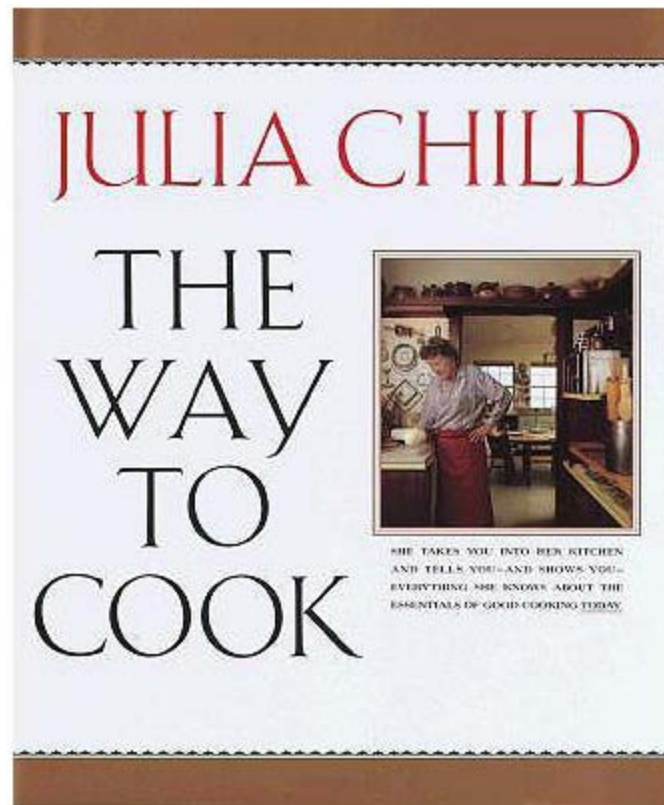
# My dream



# Processes of making my dream come true



# Choose best practices



# Prepare kitchen equipment, personnel...

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# Implement best practices

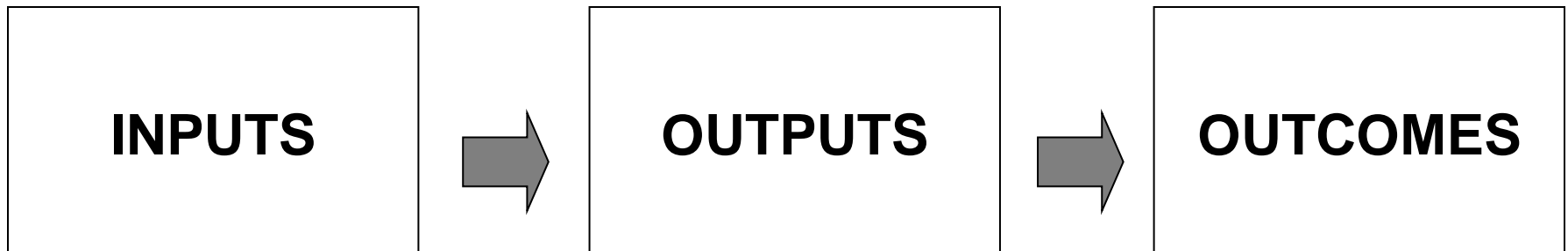


# What would I expect?



Programs are about changes. Yet,  
changes require more than choice of  
best practices!

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# UNDERSTANDING CHANGE PROCESSES IS THE KEY

# Do we always strive for desired behaviors?



# Why do we “sometimes” engage undesired behaviors?



# Undesired behaviors

- Rewards are immediate
- Less effort
- More comfort



# Desired behaviors

## The Price

- Extra effort
- Discomfort
- No certain reward



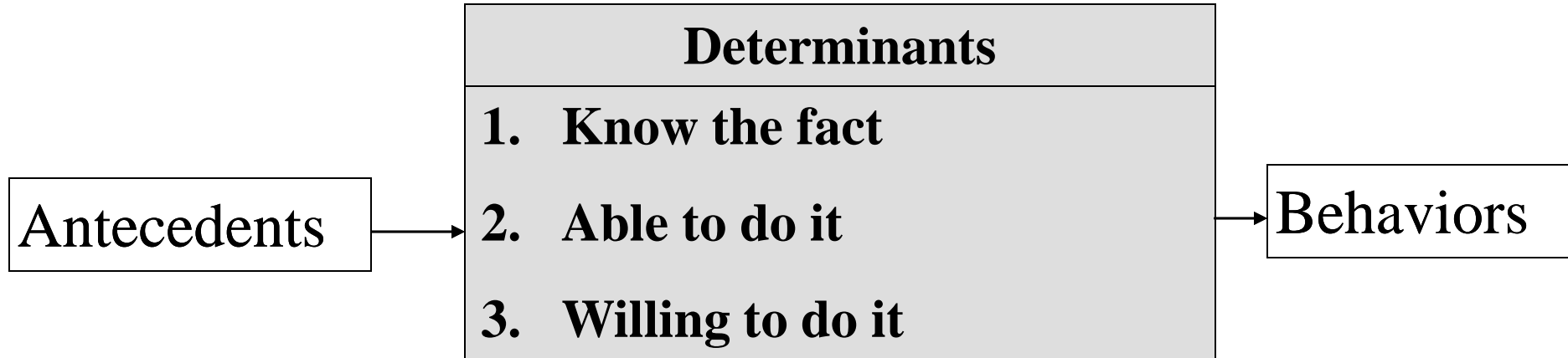
# Desired behaviors are inherently “pricier!”

Psychological costs (time consuming, difficult to use)

If we increase the number of patient lifts available to hospital personnel, will there be increased use



# What shapes ones' change?



Lessons we have learned

# CASE 1

# Five Most Critical Barriers for Self

If I felt depressed or suicidal, I would not seek help because:	% Agree
➤ DON'T KNOW WHAT TO SAY TO PARENTS	54
➤ CAN HANDLE PROBLEM ON MY OWN	50
➤ FEAR HOSPITALIZATION	48
➤ DON'T KNOW WHAT TO SAY TO COUNSELORS AND TEACHERS	44
➤ DON'T FEEL CLOSE TO ADULTS IN SCHOOL	43

# Five Most Critical Barriers for Others

<p><b>I would not seek help for a depressed/suicidal FRIEND because:</b></p>	<p><b>% Agree</b></p>
<p>➤ FEAR OF MAKING WRONG JUDGMENT ABOUT FRIEND</p>	<p>44</p>
<p>➤ HARD TO APPROACH ADULT ABOUT FRIEND</p>	<p>43</p>
<p>➤ FEAR HOSPITALIZATION OF FRIEND</p>	<p>42</p>
<p>➤ UPSET FRIEND</p>	<p>39</p>
<p>➤ BETRAY FRIEND</p>	<p>38</p>

# Take more than a village...



Lessons we have learned

# CASE 2

# Engineering a better hand tool.



Lessons we have learned

# CASE 3

# How long would training effects last?

Mean Sample-size Weighted Correlations Among Training Criteria

	Reactions			Learning			Transfer					
	Affective	Utility	Combined	Immediate	Retained	Behavior						
	<i>r</i>	<i>n</i>	<i>r</i>	<i>n</i>	<i>r</i>	<i>n</i>	<i>r</i>	<i>n</i>				
<u>Reactions</u>												
Affective	.82 (.81)	12	.34 (.28)	3	.02 (.01)	11	.03 (.01)	9	.07 (.03)	6		
Utility			.86 (.85)	5	.26 (.20)	6	.03 (-.08)	3	.18 (.12)	3		
Combined					.82 (.80)	5	.14 (.09)	6	.12 (.07)	8	.21 (.16)	9
<u>Learning</u>												
Immediate					.77 (.75)	14	.35 (.29)	2	.18 (.16)	13	.11 (.08)	16
Retained							.58 (.53)	2	.14 (.05)	2	.08 (.03)	4
Behavior									.85 (.84)	9	.18 (.11)	7
<u>Transfer</u>												
									.86 (.85)	13		

Note: Values in parentheses show lower 95% confidence bound for mean correlation; *n* is number of studies combined in calculating each mean correlation. Empty cells indicate that one or fewer correlations were available. Reliabilities are on the diagonal.

Alliger, G. M., Tannenbaum, S. I., Bennett, W., Jr., Traver, H., & et al. (1997). A meta-analysis of the relations among training criteria. *Personnel Psychology*, 50, 341-358.

# KNOW WHERE WE STAND

# Know Our Journey



**Needs Improvement:**  
We do the basics of suicide prevention. We are typically reactive and are probably missing components.

**Excellence:**  
We have the best suicide prevention program that only needs minor adjustments on occasion. We are seeking excellence in our suicide prevention program.

**Needs Development:**  
We don't have much, don't know what we want or need, but we want to improve.

**Best Practice:**  
We do lots with suicide prevention but have no real knowledge of how well it performs or how to take it to the next level.

**World Class:**  
Our journey is to take us beyond excellence.

Colorado ISVP Conference August 3, 2010 **Where are we and where do we want to go?**

# Road Map to Prevent Suicide

## **Step 1. Where is your organization now?**

### ***Consider the following questions:***

- How effective are your suicide prevention initiatives?
- How successful do your initiatives enhance protective factors?
- How successful do your initiatives reverse or reduce known risks and barriers before, during, and after the initiatives?
- How much do your suicide prevention efforts focus on family, in addition to individuals?
- How much do your initiatives include media campaigns and policy changes?
- How much do your initiatives attempt to strengthen norms in all settings?
- How well do your initiatives adapt to address target population's need?
- How much do your initiatives differ from programs that were designed and tested?
- What is your performance and how you assess success of your initiatives
- How committed is leadership of your organization?

## **Step 2. What does the future of suicide prevention initiatives at your organization look like?**

### **In terms of:**

- Performance
- Results and Impacts
- Funding opportunities
- Sustainability
- Measurements of Success
- Culture change
- Policy changes
- Resources sharing
- Leadership
- Knowledge

# Road Map to Prevent Suicide

**Step 1. Where is your organization now?**

**Step 2. What does safety look like in the future at your organization?**

**Step 3. How do we get there?**

- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

How do we get there?

# EXERCISE I

# Define Your Journey



**Needs Improvement:**  
We do the basics of XXXX. We are typically reactive and are probably missing components.

**Excellence:**  
We have the best XXX that only needs minor adjustments on occasion. We are seeking excellence in our suicide prevention program.

**Needs Development:**  
We don't have much, don't know what we want or need, but we want to improve.

**Best Practice:**  
We do lots with XXX but have no real knowledge of how well it performs or how to take it to the next level.

**World Class:**  
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**Where are we and where do we want to go?**

# Road Map of Your Prevention Programs

## Step 1. Where is your organization now?

### *Consider the following questions:*

- How effective are your prevention initiatives?
- How successful do your initiatives enhance protective factors?
- How successful do your initiatives reverse or reduce known risks and barriers before, during, and after the initiatives?
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# Road Map of Your Prevention Programs

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**Step 3. How do we get there?**

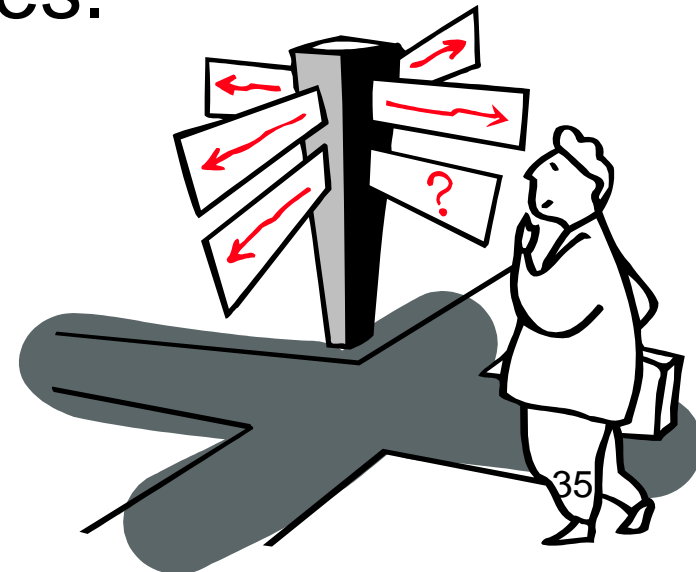
- a. \_\_\_\_\_
- b. \_\_\_\_\_
- c. \_\_\_\_\_
- d. \_\_\_\_\_
- e. \_\_\_\_\_

**Step 2. What does prevention programs look like in the future at your organization?**

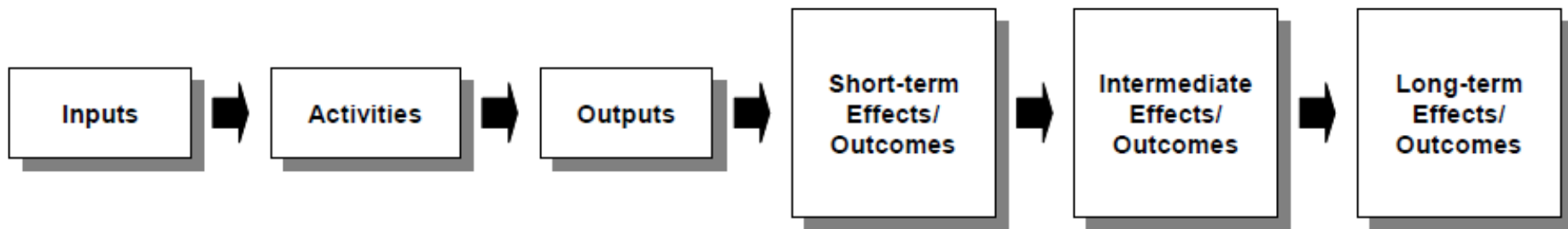
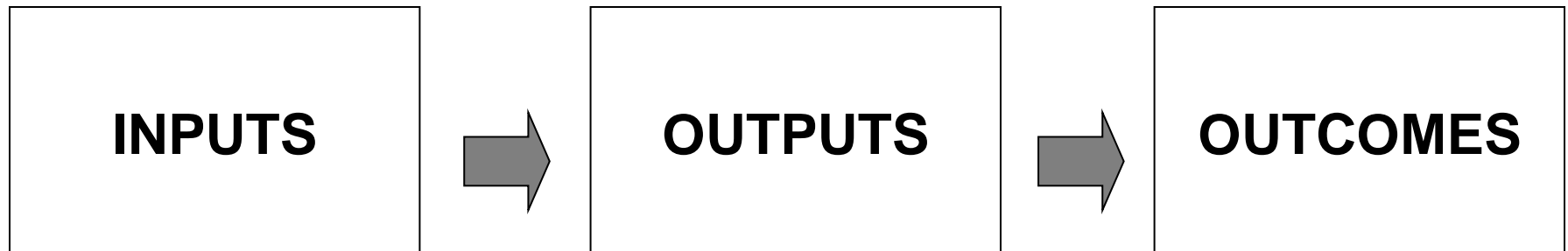
# PREPARE A LOGICAL ROADMAP

# Road maps

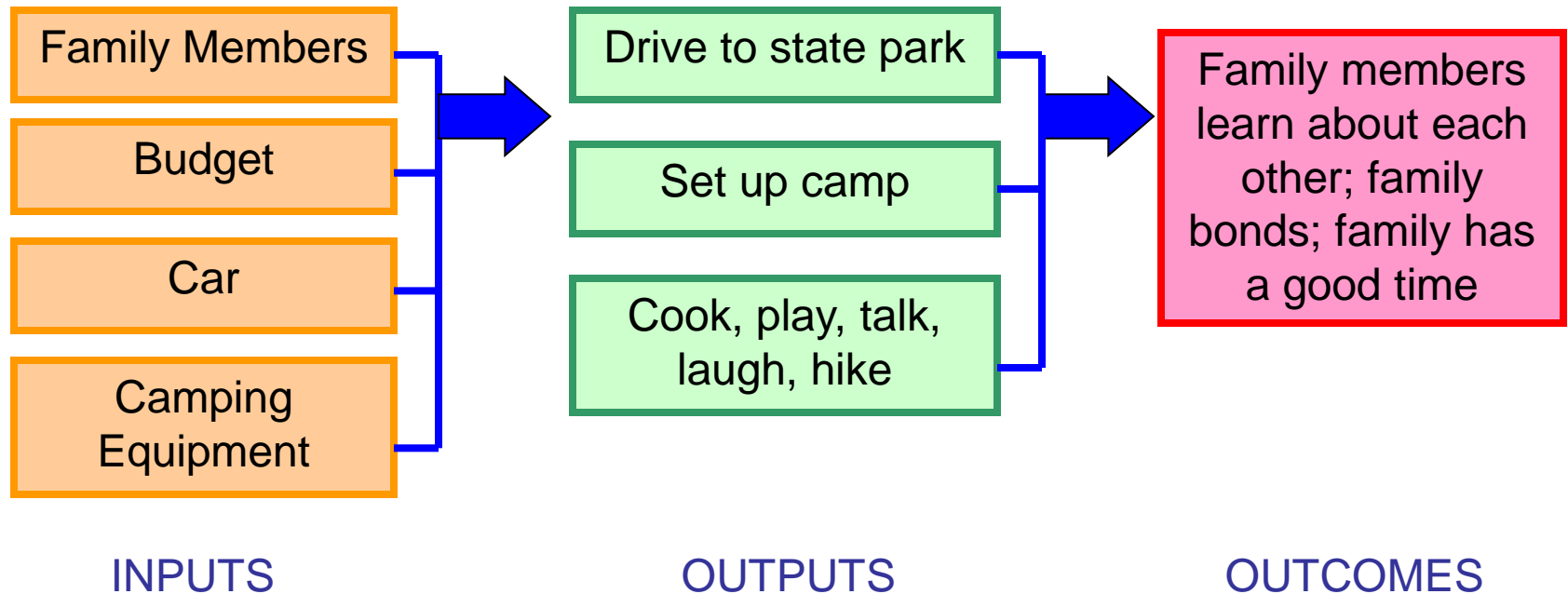
- Road maps (i.e., Logic models) represent what programs do and accomplish
- They are graphic depictions of the relationship between programs' activities and their intended outcomes.



# Basic form of logic model

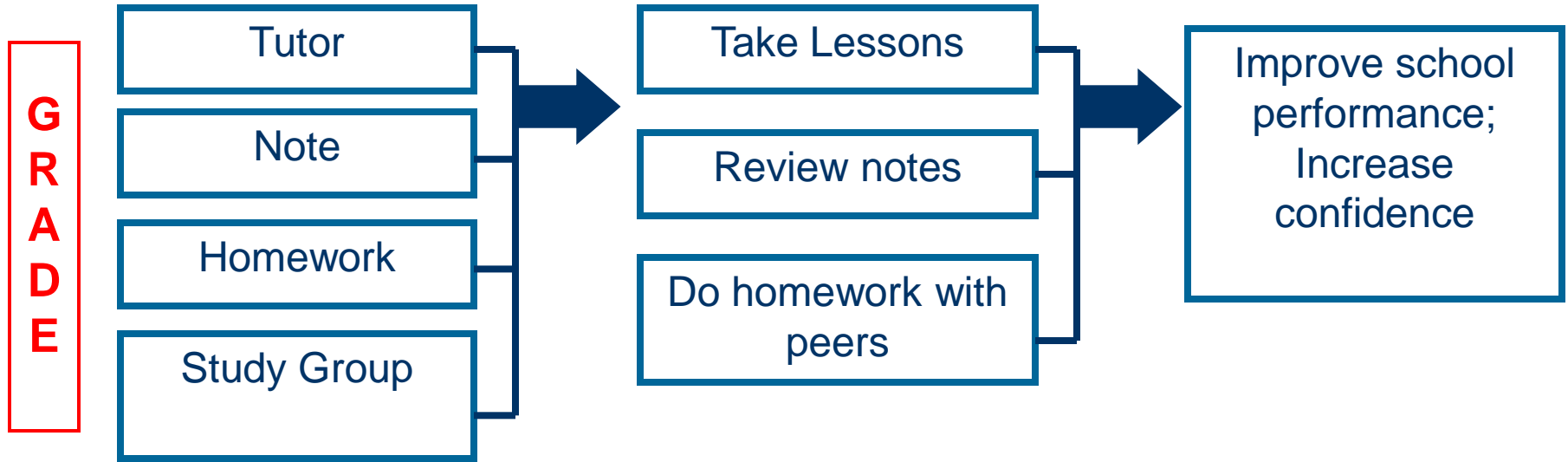


# Family Vacation



Sources: University of Wisconsin-Extension, Program Development and Evaluation

# Improve school performance



## OUTPUTS

Activities (What we do)

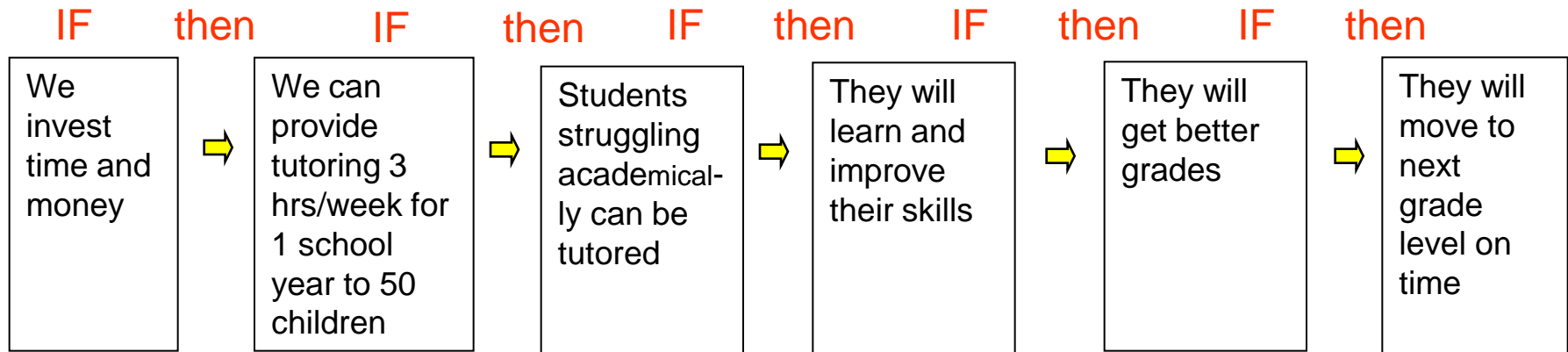
Product of activities

## OUTCOMES

Impacts

What results

# How will inputs lead to outputs, and then lead to desired outcomes?



Sources: University of Wisconsin-Extension, Program Development and Evaluation

# Assumptions

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- IF-THEN chain relationships
  - express how change would occur via inputs and outputs
- These relationships imply various assumptions about programs, participants, staff, environment, resources, external factors, etc.
  - Are assumptions explicit and valid?

# Criteria of evaluating a logic model

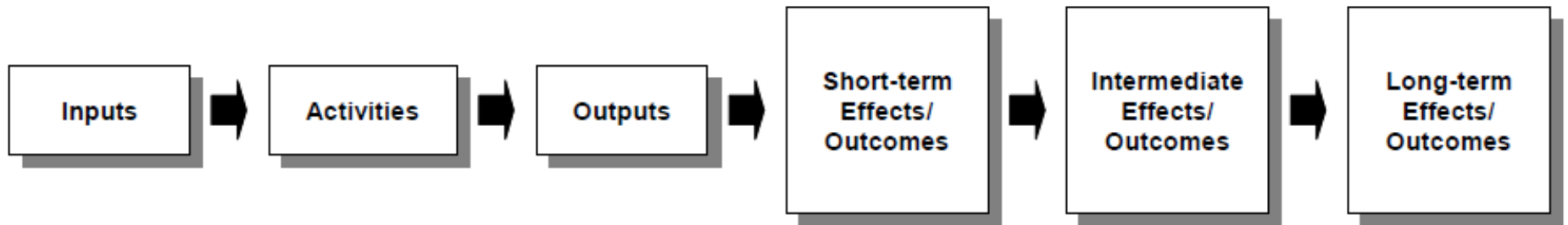
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- Is it relevant?
- Is it easy to follow?
- Is it practical?
- Can it be verified?

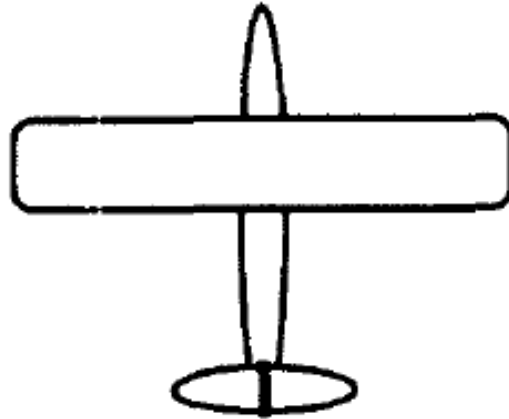
Create a logic model

# EXERCISE II

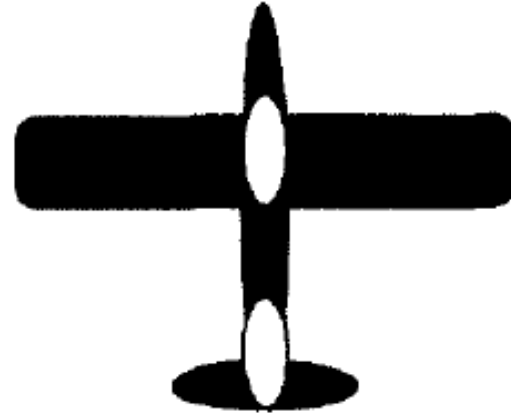
# What is your logic model?



# What we see is not the same as what we don't see



**An outline of a plane**



**A depiction of a plane with shading indicating where returning planes had been shot.**

*Source: The most dangerous profession: A note on nonsampling error. By: Wainer, Howard, Psychological Methods, 1082-989X, 1999, Vol. 4, Issue 3*

# Thank you!

# Comments?

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Past and on-going projects conducted by SMART can be found in SMART newsletters (<http://lamar.colostate.edu/~chenp/SMART.htm>)