

Proposal to Support the Task Force on Community Safety and Firearm Prevention

University of Oregon Suicide Prevention Lab

The University of Oregon Suicide Prevention Lab (UOSPL) is a cross-disciplinary research and evaluation lab that includes experts from fields such as suicide prevention, education, mental health, substance abuse, prevention science, public health, implementation science, improvement science, and network science. The UOSPL has a longstanding history of successful community-academic partnerships (CAPs) and has partnered with international, national, state, and community-level organizations to impact policy and practice in the field of suicide prevention. Across many years, UOSPL has developed deeply rooted partnerships throughout Oregon's suicide prevention landscape ranging from state agencies, non-profits, and community-based organizations. To this end, the UOSPL employs a diverse array of methodologies including CAPs, quantitative and qualitative analyses, advanced statistical modeling, root-cause analyses, focus groups, survey research, network analyses, and literature syntheses.

Evaluation Team

John Seeley, PhD (he/him) is an academic expert in school-based behavioral health intervention, suicide prevention, substance abuse prevention, and implementation science. He serves as the principal investigator of a collaborative multisite study funded by the National Institute of Mental Health to evaluate adaptive treatment strategies for college students with moderate to severe suicidal ideation delivered through college counseling centers. Since 2016, Dr. Seeley has served as an appointed member of the Oregon Alliance to Prevent Suicide (OAPS) and he directs the UOSPL evaluation activities for the implementation of suicide prevention initiatives funded by the Oregon Health Authority (OHA) and the Oregon Department of Education (ODE).

Mavis Gallo, PhD (they/them) is a prevention scientist with expertise in suicidology, implementation science, and LGBTQ youth mental health. Dr. Gallo has served as lead evaluator on several projects funded by OHA, OAPS, and ODE. Currently, Dr. Gallo serves as an evaluation partner on Oregon's Comprehensive Suicide Prevention CDC grant. They also serve as a member of the Oregon Alliance to Prevent Suicide's Data and Evaluation Committee and LGBTQ Advisory Group.

Kurt Michael, PhD (he/him) is the Senior Clinical Director at The Jed (JED) Foundation. He is a master trainer and national consultant for Counseling on Access to Lethal Means (CALM) and Collaborative Assessment and Management of Suicidality (CAMS). At JED, Dr. Michael leads the postvention consulting team and helps scale up the promotion of lethal means safety practices (e.g., secure storage of medications and firearms, suicide deterrents). He spent almost 25 years as part of the Psychology Faculty at Appalachian State University, establishing and sustaining a nationally recognized program of funded research and clinical practice in school mental health, adolescent suicidology, and rural healthcare. Dr. Michael is the Emeritus Distinguished Professor of Psychology at Appalachian and an Adjunct Professor of Child Psychiatry at the Huntsman Mental Health Institute and the University of Utah Spencer Fox Eccles School of Medicine.

Mark Hammond, PhD, MPH (he/him) is a public health researcher with expertise in implementation science, suicide prevention and treatment programs, and school and family-based mental health interventions. Mark serves as an evaluation partner for Oregon's Comprehensive Suicide Prevention CDC grant and is

responsible for monitoring the grant's strategies related to gatekeeper and postvention training, firearm safety resources, and clinician training. He also oversees federally and state-funded program evaluation activities for promoting suicide prevention and safety training and improving access to mental health resources for Oregon schools.

Steph Luther, MS (they/them) is a doctoral candidate in Prevention Science at the University of Oregon. Their primary research focus is reducing long-term negative outcomes for rural youth who experience violence. Steph has worked as an evaluator for Protect Our Children, which is a statewide child abuse prevention program aimed at reducing disparities in rural communities. Prior to graduate school, Steph worked as a violence prevention program coordinator in partnership with K-12 schools in Juneau, Alaska. Currently, Steph is finishing their last year of doctoral studies and works as an evaluator for the Haa Tóoch Lichéesh Coalition in Alaska, where they evaluate community-based initiatives to reduce the impact of colonization on Alaska Native communities.

Proposed Activities

Phase 1: Co-design and development of structured workplan

The UO team will work alongside task force members to address and refine the priorities identified by the taskforce: (a) supporting youth experiencing suicidal ideation, (b) supporting rural Oregonians experiencing suicidal ideation, (c) reducing stigma surrounding suicidal ideation, (d) addressing barriers to suicide prevention support, (e) overcoming obstacles to implementing suicide prevention best practices, and (f) supporting those experiencing SI across the lifespan. This will include working together to create a structured workplan where we operationalize identified priorities (e.g., nesting some activities within an overarching priority area and making sure we are interpreting bill correctly) and identify artifacts or parameters that may be useful to convey the information (e.g., brief, presentation). During the co-design process, we will work with the task force members to identify and create deliverables that will be meaningful and appropriate for the work.

Phase 2: Leverage current connections and work to task force priorities

The UOSPL is deeply connected to suicide prevention efforts throughout Oregon. The UOSPL has served as the lead evaluation team for several projects funded by the Oregon Health Authority ([Oregon Youth Suicide Intervention and Prevention](#); [Climate Change and Mental Health in Oregon Youth](#)), the Oregon Higher Education Coordinating Commission ([Oregon Mental Health Task Force Report](#)), and the Oregon Department of Education, all with the aim of increasing the impact of suicide prevention activities in Oregon.

As a current evaluation partner for Oregon's Comprehensive Suicide Prevention CDC five-year grant, UOSPL reports on progress toward the grants aims to identify and support disproportionately affected adults (adults 55+, veterans, and firearm owners in rural counties) by reducing lethal means access and (2) strengthen access and delivery of suicide care through creating protective environments. Through project year 2, the UOSPL has collaborated with Oregon Health Authority, Association of Oregon Community Mental Health Programs, Oregon Health Sciences University, Portland State University, Oregon State University, and the Oregon Firearm Safety Coalition to design and coordinate evaluation activities and share evaluation data on gatekeeper training (ASIST and QPR), design a firearm safe storage map, promote safe storage among older

adults and their caregivers, understanding extreme risk protection orders (ERPOs) law implementation, and providing a culturally-sensitive rural firearm safety CE/CME training online for providers. In project year 3, the UOSPL will add evaluating CALM Conversations, Connect Postvention, and firearm storage distribution to their evaluation planning responsibilities.

The UOSPL, through a Project AWARE (Advancing Wellness and Resiliency in Education) grant funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), have also partnered with ODE to plan and implement suicide awareness and prevention training in among Oregon school districts, as well as improve access to mental health resources and improve mental health literacy.

Utilizing data from our prior work and scans (e.g., literature, statewide data dashboards and resources), will allow us to summarize current efforts for supporting youth experiencing suicidal ideation, supporting rural Oregonians experiencing suicidal ideation, reducing stigma surrounding suicidal ideation, addressing barriers to suicide prevention support, overcoming obstacles to implementing suicide prevention best practices, and supporting those experiencing SI across the lifespan. These scans will allow our team to identify gaps/growth areas in current policy and practice for addressing suicidal thoughts and behaviors across the lifespan and within communities unduly impacted by this issue. These activities will be reported to the task force and used to inform on evaluation plans and methodology going forward.

Phase 3: Novel Research

UOSPL plans to ground our proposed work with the Task Force on Community Safety and Firearm Prevention (Task Force) in evidence-based implementation science frameworks, such as [EPIS \(Exploration, Preparation, Implementation, Sustainment\)](#) and [CFIR \(Consolidation Framework for Implementation Research\)](#). Guided by implementation science principles and outcomes of the co-design phase, the UOSPL will lead and conduct research and evaluation activities. In addition to summarizing the extant work to date during the Phase 2, novel research could address the gaps that are identified based on the current efforts. Evaluation activities typically include a mixed-methods approach, meaning that qualitative (e.g., individual interviews or focus groups) and quantitative (e.g., survey design, advanced statistical modeling) methodologies will be employed. Additionally, a data hub would be created to easily access all evaluation and research materials (e.g., reports, briefs, slide decks).

Phase 4: Reporting

As a result of the proposed activities, the UO team will synthesize all findings and create reports and presentations that are appropriate to activities among the task force. As noted above, the UO team can leverage current working relationships from a variety of sectors to present on material related to initiatives and use these artifacts to conduct novel research addressing the gaps of current priority areas. Along these products, individuals from the UOSPL have their own area of expertise in suicidology and suicide prevention and can share findings from peer-reviewed journal articles or preliminary data from current research studies, while the data hub will serve as a repository for all materials created.

Budget & Timeline

Quarter	Activity	Cost
January 2024	<p><u>Co-design and development of structured workplan</u></p> <p>The UO team will work alongside task force members to co-design a plan and address the priorities identified by the taskforce: (a) supporting youth experiencing suicidal ideation, (b) supporting rural Oregonians experiencing suicidal ideation, (c) reducing stigma surrounding suicidal ideation, (d) addressing barriers to suicide prevention support, (e) overcoming obstacles to implementing suicide prevention best practices, and (f) supporting those experiencing SI across the lifespan.</p> <p>Create a structured workplan where we operationalize identified priorities (e.g., nesting some activities within an overarching priority area and make sure we are interpreting bill correctly)</p> <p>Identify artifacts or parameters that may be useful to convey the information</p> <p>Exemplar deliverable(s): brief, report, and/or presentation of work plan and priority areas of inquiry</p>	<p>Personnel: \$20,000</p>
February 2025	<p><u>Leverage current connections and work to task force priorities</u></p> <p>Utilizing data from our prior work and scans (e.g., literature, statewide data dashboards and artifacts), will allow us to summarize current efforts for:</p> <ul style="list-style-type: none"> - Supporting youth and rural Oregonians experiencing suicidal ideation - Reducing stigma surrounding suicidal ideation - Addressing barriers to suicide prevention support - Obstacles to implementing suicide prevention best practices - Supporting those experiencing SI across the lifespan <p>Exemplar deliverable(s): brief, report, and/or presentation of scan of current suicide prevention activities in Oregon, gaps/successes in policy and practice, and mapping of state efforts</p>	<p>Personnel: \$20,000</p>
March - June 2025	<p><u>Novel Research</u></p> <p>UOSPL will lead and conduct research and evaluation activities aimed at addressing barriers and facilitators of current suicide prevention efforts in Oregon</p>	<p>Personnel: \$27,000</p>

	<p>Mixed-methods approach, using qualitative (e.g., individual interviews or focus groups) and quantitative (e.g., survey design, advanced statistical modeling) methodologies</p> <p>Literature synthesis, researching current local and statewide policies in place for suicide prevention activities, and creating a living data hub that can be updated as new information is collected</p> <p>Exemplar deliverable(s): Research brief on preliminary findings or highlights; Presentation of preliminary findings from evaluation activities; creation of data hub</p>	<p>Participant Compensation: \$3,000</p>
<p>July - September 2025</p>	<p><u>Reporting</u></p> <p>Synthesize all findings and create reports and presentations that are appropriate to a variety of audiences and that can be repurposed for task force needs</p> <p>Leverage current working relationships from a variety of sectors to present on material related to initiatives</p> <p>UO team have their own area of expertise in suicidology and suicide prevention and can share findings from peer-reviewed journal articles or preliminary data from current research studies</p> <p>Exemplar deliverable(s): Full evaluation report and presentation on findings; assist task force with reporting</p>	<p>Personnel: \$30,000</p>
	<p>Total budget</p>	<p>\$100,000</p>