PROJECT SAFETY NET

Evaluation & Shared Measurement Community Meeting

October 23, 2019
3:30-5:30 PM
Cubberley Community Center
Building H: Room H-1
PSN Mission Statement

Project Safety Net mobilizes community support and resources in Palo Alto for youth suicide prevention and mental wellness. We are a coalition working on community education, outreach, and training; access to quality youth mental health services; and policy advocacy.
PSN Vision Statement

Young people are empowered, in partnership with the whole community, to advocate for themselves and their peers. Youth suicide is ended. Stigma is non-existent, and high-quality mental health services are culturally-relevant, accessible, and well-utilized. We envision a community where youth and young adults feel safe, supported, and accepted.
We all live with the objective of being happy; our lives are all different and yet the same – Anne Frank
AGENDA

- 3:40 Anti-bullying Awareness Month Truth or Myth Activity
- 3:55 Collective Impact Data Accelerator
- 4:35 Evaluation in our Community
- 5:20 Preview: Coalition in Action – Emerging Partnerships
MEETING OBJECTIVES

- Understand how Project Safety Net and its community organizations evaluate youth wellness and suicide prevention efforts.
- Learn how evaluation can inform change.
- Identify ways for community members to get involved in evaluation.
STOP
BULLYING
Bullying is easy to recognize.

MYTH
Boys will be boys.

MYTH
Most children and youth are against bullying.

TRUTH
Telling a teacher about bullying is “tattling.”

MYTH
Cyberbullying can happen anonymously.

TRUTH
Words will never hurt you.

MYTH
COLLECTIVE IMPACT DATA ACCELERATOR

MARY GLONER, PSN EXECUTIVE DIRECTOR
There are Five Conditions to Collective Impact Success

**Common Agenda**
- All participants share a vision for change that includes a common understanding of the problem and a joint approach to solving the problem through agreed-upon actions — FSN Mission Statement

**Shared Measurement**
- All participating organizations agree on the ways success will be measured and reported, with a short list of common indicators identified and used for learning and improvement — Goal 5

**Mutually Reinforcing Activities**
- A diverse set of stakeholders, typically across sectors, coordinate a set of differentiated activities through a mutually reinforcing plan of action — Goals 2, 3, 4

**Continuous Communication**
- All players engage in frequent and structured open communication to build trust, assure mutual objectives, and create common motivation — Goal 1

**Backbone Support**
- An independent, funded staff dedicated to the initiative provides ongoing support by guiding the initiative’s vision and strategy, supporting aligned activities, establishing shared measurement practices, advancing policy, and mobilizing funding — Goal 6

Source: FSG SSR Collective Impact Article, Winter 2011; FSG Interviews
PSN Goal 5: Evaluation and Shared Measurement

To measure success, track effectiveness, improve quality and report collaboration’s collective progress towards fulfilling its vision and mission

- **Strategy 5.1:** Develop and implement evaluation plan consisting of a dashboard and benchmarks of key performance indicators across PSN goals
- **Strategy 5.2:** Develop a database system for data collection, analysis, and report generation of PSN dashboard
- **Strategy 5.3:** Coordinate with County of Santa Clara and local research partners in Community Based Participatory Research (CBPR)
- **Strategy 5.4:** Develop and assess a repository of currently available health data measuring youth well-being, behavioral and suicide prevention
- **Strategy 5.5:** Identify gaps in youth mental health and suicide prevention data/health research and develop recommendations to address gaps.
- **Strategy 5.6:** Develop an annual report describing the state of youth well-being, youth suicide prevention, and Project Safety Net in Palo Alto
Collective Impact Data Accelerator Initiative – Why?

- Spearheaded by Collective Impact Forum
  - FSG
  - Aspen Institute Forum of Community Solutions

**Goals of the Collective Impact Data Accelerator**

- Build the capacity of backbone leaders, funders, and other partners to effectively use qualitative and quantitative data for learning in ways that provide insights into how the initiative might improve, adapt, and grow, in service of achieving a community goal.

- Create a supportive peer learning community where backbone teams, funders and/or partners have candid conversations and learn with one another when using a broad range of different types of data.

- Identify promising practices that will be shared broadly with the field to support backbone leaders, funders, and other practitioners interested in using data in collective impact.
Collective Impact Data Accelerator – Who?

- 13 collaboratives nationally selected based on application process
  - **12 states** with different geographic focus
  - **Mid-to-late stages** of collective impact implementation
  - Issues: **education & youth**, **workforce development**, **health & nutrition**, **homelessness**

- 2-3 participants in each collaborative, including funder, backbone, and data partner
  - PSN/City of Palo Alto
  - Palo Alto University
Collective Impact Data Accelerator – When?

Learning Arc for the Accelerator: We Will Address Several Data-Focused Topics During In-Person and Virtual Sessions

- Three in-person working sessions: November 2019 (Chicago), May 2020 (Minneapolis), and October/November 2020 (Washington, DC)
- Group peer learning calls and 1:1 coaching during months when there is not a working session
- Identify an action learning project focused on using data (to trace throughout the learning experience)
Collective Impact Data Accelerator – How?

In the Collective Impact Data Accelerator, we will prioritize both **quantitative** and **qualitative** data in collective impact.

**Quantitative Data**
- Can be counted, measured, and expressed using numbers

**Examples**
- Process measures (% change in levels of trust year-over-year)
- Outputs (# of people served through aligned programs)
- Outcomes (% change in outcomes for target population)

**Qualitative Data**
- Can be observed through stories, interviews, and focus groups

**Examples**
- Process measures (governance plan adopted)
- Experiences of communities impacted by the collective impact initiative
Collective Impact Data Accelerator – How?

We will reference this framework for using data to assess progress at various levels of change in collective impact.

<table>
<thead>
<tr>
<th>Context</th>
<th>1 CI Design &amp; Implementation</th>
<th>2 Changes in Programs and Systems</th>
<th>3 Impact</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>The design and implementation of the five conditions of collective impact and principles of practice</td>
<td>The initiative’s outcomes, related to changes in the way people, organizations, institutions, and systems behave</td>
<td>The initiative’s long-term social or environmental impact goals</td>
</tr>
<tr>
<td></td>
<td>• Progress implementing the 5 conditions of CI (common agenda, shared measurement, mutually reinforcing activities, continuous communication, backbone infrastructure)</td>
<td>• Changes in programs and services (within and between organizations)</td>
<td>• Changes in lives</td>
</tr>
<tr>
<td></td>
<td>• Progress pursuing Principles of Practice (e.g., community engagement, equity)</td>
<td>• Changes in systems (policy change, resource flows, relationships &amp; connections, power dynamics, mental models)</td>
<td></td>
</tr>
</tbody>
</table>
Collective Impact Data Accelerator – PSN Objectives

- Measure PSN’s impact on youth resiliency, wellbeing, and suicide prevention
  - PSN services and programs
  - Suicide and mental health outcomes
- Build a data system that empowers youth, families, and partners
  - Learning
  - Shape partner activities and work
- Inform research and health evaluation opportunities for research questions to investigate and build data collection.
SEARCH INSTITUTE
DEVELOPMENTAL RELATIONSHIPS
PILOT SURVEY
“Measuring What Matters”

JOYCE KO, PSN GRADUATE PUBLIC HEALTH INTERN
Developmental Relationships

Developmental Relationships are close connections through which young people...
Developmental Relationships

discover who they are
Developmental Relationships

cultivate the ability to shape their own lives
Developmental Relationships

learn how to engage with and contribute to the world around them
Developmental Relationships Framework
Relationships Matter: The 5 Elements of Developing Relationships

Video link: https://www.youtube.com/watch?v=n5Y9kwCOF7I
Pilot Survey

- PSN selected alongside many other schools and youth-serving organizations
- Draft survey reviewed in September
- Survey administration window
  - October 16, 2019-January 31, 2020
Survey Format

Express Care
Show me that I matter to you.

Share Power
Treat me with respect and give me a say.

Challenge Growth
Push me to keep getting better.

Expand Possibilities
Connect me with people and places that broaden my world.

Provide Support
Help me complete tasks and achieve goals.
Covariate Sections

- Social and emotional competencies
- Cultural responsiveness
- Organizational climate
- Commitment to diversity, equity, and inclusion
Staff Version Pilot

- Piloting a staff version of the survey
  - Evaluate staff relational practices with youth
  - Staff-focused report
Survey Logistics

- Planning phase
- Target: December 2019
- Minimum of 30 respondents
- Youth ages 10-18 years old
- 1 day to 1 week
- Online format
- 15 minutes
Are you or someone you know interested in participating?

Email psnpaloalto@gmail.com
Strengthening Families
Creating Connections in Schools, Programs, and Families Through Developmental Relationships

During the workshop:
• Search Institute will demonstrate the connections between strong relationships and thriving youth
• Learn about Developmental Relationships, including ways families and others can:
  ○ Express CARE
  ○ CHALLENGE Growth
  ○ Provide SUPPORT
  ○ Expand POSSIBILITIES
  ○ Share POWER

Who should attend:
• Parenting adults
• Professionals and community members seeking to support families

To RSVP, please visit youthcommunityservice.org

SUNDAY, NOVEMBER 2
10:00AM - 1:00PM
Greene Middle School multi-purpose room:
750 N California Ave, Palo Alto, CA 94303
TO RSVP: www.youthcommunityservice.org

UPCOMING EVENTS

STRENGTHENING FAMILIES & DEVELOPMENTAL RELATIONSHIPS
YCS’s Youth Connectedness Initiative invites you to attend a workshop on November 2, 2019 focused on families and relationships. The event will be held at Greene Middle School in Palo Alto, and pre-registration is available through the YCS site.

MAKE A DIFFERENCE DAY 2019!
Join YCS for our annual Make a Difference Day event on Oct. 26, 2019 from 9:00AM – 1:30PM at the DLA Piper Law Firm (2000 University Ave. East, Palo Alto). Community members of all ages will be doing service together side by side.
DATA – Palo Alto Youth Voices

Opportunities for Suicide Prevention & Youth Well-being in Palo Alto

Sutter Health
My objectives

• Illustrate value to suicide prevention and health promotion goals

• Highlight data collections – Palo Alto youth

• Share select results from Gunn and PAHS

• Discuss data-based opportunities for informing Palo Alto/PSN efforts
Value of data to students and community?

- **Accurate snapshot** in time
- **Comparability** to local, state, national data sets
  - Value on display during Epi-Aid …
- **Informs efforts** – strategies, prioritize, focus
  - Based on accurate reflection of student behaviors, attitudes, values
- **Respect** for students
  - Opportunity to work with students on narrative
    - Improve youth-adult “developmental relationships”
    - More accurate perception of peers -> improve health behaviors
  - Tell their own “story” – all voices included
- **Cost of not acting**
How frequently do you receive results from student surveys?
N = 1107  Paly/Gunn Living Skills students  2017 - 2019
School-based Data Sets: Formal and informal

• **California Healthy Kids Survey** or “CHKS” - (CalSCHLS)
  – 2003 – 2017 available data
  – Biennial (2019 to be surveyed this Fall)
  – Grades 5, 7, 9, 11
  – Health risk behaviors, custom modules

• **Developmental Assets** – SEARCH Institute
  – 2010 and 2018
  – Youth Development – 40 Assets
  – Risk behaviors
  – Grade 5 plus all secondary grades
  – Results: [https://www.pausd.org/student-services/student-connectedness](https://www.pausd.org/student-services/student-connectedness)
School-based and Community Data Sets: Formal and informal

- **Reality Check survey** – Middle Schools
  - Risk behaviors, including bullying, ATOD
  - Locally created, annual since 2009?
  - Perceived norms
  - Intent to use results in norms campaign

- **CDC Epi-Aid - Community Survey** –
  - Community input into EpiAid process
  - Gather community “voice”
  - Knowledge, perceptions, beliefs & attitudes
  - Locally created – strategic questions
  - Eye to future efforts, positive focus, identify norms

- **Living Skills** – in-class presentations
  - Health decision-making
  - Opportunity to engage students with “live” data
  - Ask questions not on surveys!
  - Intervention
Data “Story” ??

It was a dark and stormy night.

...and they lived happily ever after.
CHKS, Epi-Aid, Developmental Assets, Classroom voices

DATA SNAPSHOT
Frequency of sad & hopeless feelings, past 12 months

PAHS/Gunn CHKS data 2007 - 2017 - 11th grade
Past 12 months, did you seriously consider attempting suicide?

PAHS/Gunn CHKS data 2007 - 2017 - 11th grade

2017 – MV-LA Juniors = 18
CDC EPI-AID 2016 - PSN Community Survey Committee

- PSN
  - Mary Gloner
- PSN/PTAC
  - Susan Usman
- SCCBH, PSN
  - Lan Nguyen
- PAUSD
  - Chris Kolar
- Parent Leader
  - Sumita Vasudeva
- PAMF
  - Becky Beacom
- Paly/Gunn student interns

Members:
- Parent Leader: Sumita Vasudeva
- PSN: Mary Gloner
- PSN/PTAC: Susan Usman
- SCCBH, PSN: Lan Nguyen
- PAUSD: Chris Kolar
- PAMF: Becky Beacom
- Paly/Gunn student interns
By the Numbers…

• 1825 “opened” the survey

• **CDC focus**: residents, current students & parents
  – N = 1065 officially completed
  – 229 “current students” (21.5%)
  – 476 “current parents” (44.7%)

• **PSN focus**: by-age
  – Youth N = 576        Adult N = 1020

• Female – 52-60% of Youth; 75% of Adults

• **Representative? Valuable? Actionable? Aligned?**
What is true about Palo Alto’s attitudes and beliefs?

- stigma or help-seeking?
- mental health and treatment?
- underlying risk factors in PA?
- Support for each other?
- Support for suicide prevention efforts?
- Youth and adult similarities and differences?
- Strengths in our community?

• Story…?
• Sense of Hope?

I would support a friend/family member who decided to seek professional help for depression.

<table>
<thead>
<tr>
<th></th>
<th>SA/A</th>
<th>Neither</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent of student &lt;...</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>Parent, student...</td>
<td>98.5</td>
<td>1.5</td>
</tr>
<tr>
<td>Parent of current...</td>
<td>98.8</td>
<td>1.2</td>
</tr>
<tr>
<td>Adult not a parent</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>Youth 16 - 19</td>
<td>97.7</td>
<td>1.4</td>
</tr>
<tr>
<td>Youth 13 to 15</td>
<td>98.9</td>
<td></td>
</tr>
</tbody>
</table>

EPI-AID Community Survey Questions
### Q15-4.

**Suicide is shameful, something to be hidden.**

<table>
<thead>
<tr>
<th>Category</th>
<th>SA/A</th>
<th>Neither</th>
<th>SDA/DA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent of student &lt; 2009</td>
<td>0.8</td>
<td>97.5</td>
<td></td>
</tr>
<tr>
<td>Parent, student 2009...</td>
<td>3.8</td>
<td>94.7</td>
<td></td>
</tr>
<tr>
<td>Parent of current student</td>
<td>6.1</td>
<td>91.5</td>
<td></td>
</tr>
<tr>
<td>Adult not a parent</td>
<td>7.1</td>
<td>90.1</td>
<td></td>
</tr>
<tr>
<td>Youth 16 - 19</td>
<td>4.4</td>
<td>14.5</td>
<td>81.1</td>
</tr>
<tr>
<td>Youth 13 to 15</td>
<td>8.9</td>
<td>18.1</td>
<td>73</td>
</tr>
</tbody>
</table>
Q15-8. Depression is a medical disorder that responds to treatment.

<table>
<thead>
<tr>
<th>Category</th>
<th>SA/A</th>
<th>Neither</th>
<th>SDA/DA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent of student &lt;...</td>
<td>92.5</td>
<td>5.8</td>
<td>1.7</td>
</tr>
<tr>
<td>Parent, student 2009...</td>
<td>93.3</td>
<td>6.8</td>
<td></td>
</tr>
<tr>
<td>Parent of current...</td>
<td>86.6</td>
<td>10.2</td>
<td>3.2</td>
</tr>
<tr>
<td>Adult not a parent</td>
<td>84.4</td>
<td>14.1</td>
<td>1.2</td>
</tr>
<tr>
<td>Youth 16 - 19</td>
<td>75.1</td>
<td>21.9</td>
<td>3.1</td>
</tr>
<tr>
<td>Youth 13 to 15</td>
<td>49.4</td>
<td>35</td>
<td>15.5</td>
</tr>
</tbody>
</table>
Q 15-6. I would recognize if a friend/family member was thinking about killing themselves.

<table>
<thead>
<tr>
<th>Category</th>
<th>SA/A</th>
<th>Neither</th>
<th>SDA/DA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent of student &lt; 2009</td>
<td>36</td>
<td>48.1</td>
<td>15.9</td>
</tr>
<tr>
<td>Parent, student 2009 or &gt;</td>
<td>38.1</td>
<td>39</td>
<td>23.1</td>
</tr>
<tr>
<td>Parent of current student</td>
<td>30.9</td>
<td>47.5</td>
<td>21.7</td>
</tr>
<tr>
<td>Adult not a parent</td>
<td>38.4</td>
<td>44.6</td>
<td>17</td>
</tr>
<tr>
<td>Youth 16 - 19</td>
<td>46.5</td>
<td>36.8</td>
<td>16.8</td>
</tr>
<tr>
<td>Youth 13 to 15</td>
<td>49.7</td>
<td>30.6</td>
<td>19.6</td>
</tr>
</tbody>
</table>
### Q15-2. Suicide is preventable

<table>
<thead>
<tr>
<th>Category</th>
<th>SA/A</th>
<th>Neither</th>
<th>SDA/DA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent of student &lt; 2009</td>
<td>77.1</td>
<td>14.4</td>
<td>8.5</td>
</tr>
<tr>
<td>Parent, student 2009 or &gt;</td>
<td>92</td>
<td>8.1</td>
<td></td>
</tr>
<tr>
<td>Parent of current student</td>
<td>79</td>
<td>17.2</td>
<td>2.8</td>
</tr>
<tr>
<td>Adult not a parent</td>
<td>82</td>
<td>16.9</td>
<td></td>
</tr>
<tr>
<td>Youth 16 - 19</td>
<td>84</td>
<td>13.1</td>
<td>2.9</td>
</tr>
<tr>
<td>Youth 13 to 15</td>
<td>81</td>
<td>13.4</td>
<td>5.6</td>
</tr>
</tbody>
</table>
Q 15-7. I know how & where to get help for a friend/family member who is thinking about killing themselves.

<table>
<thead>
<tr>
<th>Category</th>
<th>SA/A</th>
<th>Neither</th>
<th>SDA/DA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent of student &lt; 2009</td>
<td>77</td>
<td>13</td>
<td>10</td>
</tr>
<tr>
<td>Parent, student 2009 or &gt;</td>
<td>71.1</td>
<td>15.8</td>
<td>13.3</td>
</tr>
<tr>
<td>Parent of current student</td>
<td>71</td>
<td>14.5</td>
<td>14.5</td>
</tr>
<tr>
<td>Adult not a parent</td>
<td>62.6</td>
<td>18.3</td>
<td>19.1</td>
</tr>
<tr>
<td>Youth 16 - 19</td>
<td>73.4</td>
<td>13.8</td>
<td>12.8</td>
</tr>
<tr>
<td>Youth 13 to 15</td>
<td>66.4</td>
<td>13.9</td>
<td>19.7</td>
</tr>
</tbody>
</table>
Q15-5. I am comfortable talking about suicide with my family or friends.

<table>
<thead>
<tr>
<th>Category</th>
<th>SA/A</th>
<th>Neither</th>
<th>SDA/DA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent of student &lt; 2009</td>
<td>87.5</td>
<td>7.5</td>
<td>5.0</td>
</tr>
<tr>
<td>Parent, student 2009 or &gt;</td>
<td>83.3</td>
<td>12.2</td>
<td>6.6</td>
</tr>
<tr>
<td>Parent of current student</td>
<td>74.5</td>
<td>16.1</td>
<td>9.3</td>
</tr>
<tr>
<td>Adult not a parent</td>
<td>73.8</td>
<td>10.5</td>
<td>15.7</td>
</tr>
<tr>
<td>Youth 16 - 19</td>
<td>58.5</td>
<td>18.8</td>
<td>22.6</td>
</tr>
<tr>
<td>Youth 13 to 15</td>
<td>49.6</td>
<td>22.7</td>
<td>27.8</td>
</tr>
</tbody>
</table>
Q15-11. I would be comfortable telling a friend/family member if I needed professional help for depression.

- Adult student < 2009: 85.8% SA/A, 13.3% Neither, 1.3% SDA/DA
- Adult student 2009 or >: 82.1% SA/A, 14.3% Neither, 3.8% SDA/DA
- Adult current student: 79.6% SA/A, 10.6% Neither, 9.8% SDA/DA
- Adult not a parent: 74.4% SA/A, 17.9% Neither, 7.6% SDA/DA
- Youth 16 - 19: 55.2% SA/A, 19.1% Neither, 25.6% SDA/DA
- Youth 13 to 15: 47.1% SA/A, 22.3% Neither, 30.6% SDA/DA
Q15-12.
If I am concerned that a friend/family member is considering suicide, I would ask – it would not plant the idea in their mind.

<table>
<thead>
<tr>
<th></th>
<th>SA/A</th>
<th>Neither</th>
<th>SDA/DA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent of student &lt; 2009</td>
<td>84.7</td>
<td>13.6</td>
<td>1.6</td>
</tr>
<tr>
<td>Parent, student 2009 or &gt;</td>
<td>86.6</td>
<td>9</td>
<td>4.6</td>
</tr>
<tr>
<td>Parent of current student</td>
<td>77.4</td>
<td>17.1</td>
<td>5.6</td>
</tr>
<tr>
<td>Adult not a parent</td>
<td>69.6</td>
<td>19.7</td>
<td>10.7</td>
</tr>
<tr>
<td>Youth 16 - 19</td>
<td>57.3</td>
<td>25.6</td>
<td>17.1</td>
</tr>
<tr>
<td>Youth 13 to 15</td>
<td>47.1</td>
<td>29.7</td>
<td>23.2</td>
</tr>
</tbody>
</table>
Q 15-6. I would recognize if a friend/family member was thinking about killing themselves.

![Chart showing the percentage of youth and adults who would recognize if a friend/family member was thinking about killing themselves.](chart)

- **Parent of student < 2009**
  - SA/A: 36%
  - Neither: 48.1%
  - SDA/DA: 15.9%

- **Parent, student 2009 or >**
  - SA/A: 38.1%
  - Neither: 39%
  - SDA/DA: 23.1%

- **Parent of current student**
  - SA/A: 30.9%
  - Neither: 47.5%
  - SDA/DA: 21.7%

- **Adult not a parent**
  - SA/A: 38.4%
  - Neither: 44.6%
  - SDA/DA: 17%

- **Youth 16 - 19**
  - SA/A: 46.5%
  - Neither: 36.8%
  - SDA/DA: 16.8%

- **Youth 13 to 15**
  - SA/A: 49.7%
  - Neither: 30.6%
  - SDA/DA: 19.6%
Q15-3. Suicide is bound to happen.

<table>
<thead>
<tr>
<th>Category</th>
<th>SDA/DA</th>
<th>Neither</th>
<th>SA/A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Parent of student &lt; 2009</td>
<td>48.9</td>
<td>30.7</td>
<td>20.3</td>
</tr>
<tr>
<td>Parent, student 2009 or &gt;</td>
<td>64.7</td>
<td>23.2</td>
<td>12.1</td>
</tr>
<tr>
<td>Parent of current student</td>
<td>56.6</td>
<td>29.7</td>
<td>13.8</td>
</tr>
<tr>
<td>Adult not a parent</td>
<td>53.3</td>
<td>20.3</td>
<td>26.5</td>
</tr>
<tr>
<td>Youth 16 - 19</td>
<td>56.5</td>
<td>26</td>
<td>17.4</td>
</tr>
<tr>
<td>Youth 13 to 15</td>
<td>47.2</td>
<td>30</td>
<td>22.9</td>
</tr>
</tbody>
</table>
Top 5 Perceived Risk Factors – all respondents

- Depression, mental health issues
- Academic distress or pressure
-Disconnected, socially isolated
- Family or cultural pressure
- Life challenges
SUPPORT FOR PREVENTION EFFORTS
CDC: Overall support for community efforts

- **Majority support current or planned efforts**
  - Improve access to mental health providers (90.4%)
  - School-based efforts to reduce unnecessary stress (82.6%)
  - Strengthen culturally tailored MH services (82.5%)
  - Increase youth input/involvement in school/community (82.3%)
  - ...
  - Means restriction at the tracks (59%)

- Students less likely to support than parents

- Upcoming PSN analysis - distribution of responses
Are we asking the right questions?

Paying attention to the right questions?

True consent from both partners is essential. Living Skills Summer 2017

N = 327

<table>
<thead>
<tr>
<th></th>
<th>Strongly believe</th>
<th>Somewhat believe</th>
<th>Do NOT believe</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personal belief</td>
<td>87.7</td>
<td>4.8</td>
<td>7.3</td>
</tr>
<tr>
<td>Perception MOST</td>
<td>53.5</td>
<td>42.4</td>
<td>4</td>
</tr>
<tr>
<td>Perception MOST HS men</td>
<td>26.4</td>
<td>62.2</td>
<td>11.3</td>
</tr>
<tr>
<td>Perception MOST HS women</td>
<td>79</td>
<td>17.1</td>
<td>3.8</td>
</tr>
</tbody>
</table>
How concerned would you be if your friend was vaping?  (Menlo school 2019)

<table>
<thead>
<tr>
<th>Response</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very concerned</td>
<td>27%</td>
</tr>
<tr>
<td>Concerned</td>
<td>36%</td>
</tr>
<tr>
<td>Somewhat concerned</td>
<td>27%</td>
</tr>
<tr>
<td>Depends on what they are vaping</td>
<td>0%</td>
</tr>
<tr>
<td>Not concerned</td>
<td>9%</td>
</tr>
</tbody>
</table>
You & DUI – sample from Living Skills classes PAHS/Gunn

82% STRONGLY AGAINST - GOOD ALTERNATIVES AVAILABLE
18% DON'T WANT TO - UNSURE IF ALTERNATIVES ARE REASONABLE
DEPENDS ON HOW FAR
DEPENS ON DRIVER
I'M OKAY WITH IT
“What strengths are currently present in PA that offer the greatest hope and protections against youth suicide?”
“What strengths are currently present in PA that offer the greatest hope & protections against youth suicide?”

ADULT RESPONSES: 549 adults responded to this open-ended question. The table below organizes adult comments by themes, and tallies the number of comments related to each theme. (Top 10 themes are shaded).

<table>
<thead>
<tr>
<th>Theme</th>
<th># of related comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Awareness, honesty, talking about it</td>
<td>151</td>
</tr>
<tr>
<td>Carling Community</td>
<td>119</td>
</tr>
<tr>
<td>Nothing or critical or I don’t know</td>
<td>61</td>
</tr>
<tr>
<td>School Policies to decrease stress &amp; prevent suicide</td>
<td>48</td>
</tr>
<tr>
<td>Youth themselves, peers</td>
<td>47</td>
</tr>
<tr>
<td>Supportive SCHOOL Community</td>
<td>36</td>
</tr>
<tr>
<td>Wealth, Money</td>
<td>34</td>
</tr>
<tr>
<td>Educated Community</td>
<td>30</td>
</tr>
<tr>
<td>Teachers</td>
<td>30</td>
</tr>
<tr>
<td>Parent Education efforts/parents/parent involvement</td>
<td>28</td>
</tr>
<tr>
<td>Resources</td>
<td>17</td>
</tr>
<tr>
<td>Track Watch</td>
<td>17</td>
</tr>
<tr>
<td>Collaboration among orgs</td>
<td>15</td>
</tr>
</tbody>
</table>

YOUTH RESPONSES: 2880 youth responded to this open-ended question. The table below organizes youth comments by themes, and tallies the number of comments related to each theme. (Top 12 themes are shaded).

<table>
<thead>
<tr>
<th>Theme</th>
<th># of related comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth themselves, peers</td>
<td>45</td>
</tr>
<tr>
<td>Nothing or critical or I don’t know</td>
<td>44</td>
</tr>
<tr>
<td>Carling Community</td>
<td>37</td>
</tr>
<tr>
<td>Awareness, honesty, talking about it</td>
<td>35</td>
</tr>
<tr>
<td>School Policies to decrease stress &amp; prevent suicide</td>
<td>35</td>
</tr>
<tr>
<td>Supportive SCHOOL Community</td>
<td>24</td>
</tr>
<tr>
<td>Teachers</td>
<td>20</td>
</tr>
<tr>
<td>Counselors - school</td>
<td>17</td>
</tr>
<tr>
<td>Track Watch</td>
<td>14</td>
</tr>
<tr>
<td>Family/friends</td>
<td>10</td>
</tr>
<tr>
<td>Hotlines</td>
<td>9</td>
</tr>
</tbody>
</table>
Youth voices…

“Friends. There’s no program that you can put in place or treatment that you can force that will do a better job helping people than their friends. These events have brought people in the town closer together and made them much more open to talking about it.”

“We have some wonderful communities within the larger community (Gunn theatre, sports, etc.) that allow for a feeling of inclusion and achievement.”

“Community, I have never met someone in PAUSD who doesn’t drop everything to listen when someone reaches out. In my class, I felt as if we were a family, ultimately not all super close knit or necessarily perfect at getting along with everyone, but everyone cared about each other regardless. When we were struck with tragedy we stuck together and helped each other. The students in PAUSD are compassionate.”
“It’s quite or extremely important to me to:

- Help other people – 90%
- Reduce hunger & poverty in the world – 71%
- Make sure all people are treated fairly – 88%
- Speak up for equality – all should have the same rights & opportunities – 85%
- Get to know people of a different race or ethnic group than mine – 71%
- Stand up for what I believe, even when it’s unpopular to do so – 85%
- Accept responsibility for my actions, even when I make a mistake or get in trouble – 85%
- Tell the truth, even when it’s not easy ... - 71%”
“Hope creates new realities.” Mary Pipher

“Healthy conversations move through despair into something bigger & brighter.”  Mary Pipher
Listen.

“The first responsibility of love is to *listen*.”
Paul Tillich
NEXT MONTH:

COALITION IN ACTION – EMERGING PARTNERSHIPS

MARY GLONER, PSN EXECUTIVE DIRECTOR
Preview: 11-20 Coalition in Action – Emerging Partnerships Meeting

- 1-week earlier on November 20th due to Thanksgiving Break
- Partner-In-Action Showcase
  - Palo Alto Museum Teen Council
  - Alum Rock Counseling Center
- Community Sharing
CLOSING & THANK YOU

- Next PSN Community Meeting:
  - 3:30-5:30 PM
  - Cubberley Community Center – H1

  - **November 20, 2019**: Coalition in Action – Emerging Partnerships