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adults who were exposed to Know the Signs agreed more strongly with each item than those not exposed (see Table 1). Those exposed also had higher overall confidence to intervene than those not exposed. All differences were statistically significant \((p < .05)\). Though we cannot rule out the possibility that those with greater confidence to intervene were more likely to notice or remember seeing or hearing one of the Know the Signs materials, these encouraging results suggest that Know the Signs may be effective at achieving its targeted outcome.

Across items, adults who were exposed to Know the Signs agreed more strongly with each item than those not exposed (see Table 1). Those exposed also had higher overall confidence to intervene than those not exposed. All differences were statistically significant \((p < .05)\). Though we cannot rule out the possibility that those with greater confidence to intervene were more likely to notice or remember seeing or hearing one of the Know the Signs materials, these encouraging results suggest that Know the Signs may be effective at achieving its targeted outcome.

1 Specifically, respondents were asked if they had, in the past 12 months, “seen or heard an advertisement that has the slogan ‘Know the Signs’ or ‘Pain Isn’t Always Obvious’ or ‘Suicide Is Preventable’”, “visited the website ‘Suicide Is Preventable dot org’”, or “seen or heard an advertisement for suicide prevention with the website ‘Suicide is Preventable dot org’.” Respondents reporting “yes” to any of these questions were categorized as having been exposed to Know the Signs.

2 When exposure was measured by also including reporting yes to the questions “seen or heard an advertisement for a suicide hotline or crisis line” or “seen or heard an advertisement about recognizing the warning signs of suicide,” 59.7% report being exposed; results regarding confidence to intervene are similar.
Table 1 Confidence to Intervene with Those At Risk for Suicide

<table>
<thead>
<tr>
<th>Item</th>
<th>Exposed to Know the Signs (35.4%) Mean (SE)</th>
<th>Not Exposed to Know the Signs (64.6%) Mean (SE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Confidence to Intervene (Average of the items listed below)</td>
<td>4.56 (0.05)</td>
<td>4.09 (0.03)</td>
</tr>
<tr>
<td>I feel comfortable discussing suicide with my friends, colleagues, and family members</td>
<td>4.74 (0.08)</td>
<td>4.31 (0.06)</td>
</tr>
<tr>
<td>I am aware of the warning signs of suicide</td>
<td>4.49 (0.07)</td>
<td>3.90 (0.05)</td>
</tr>
<tr>
<td>I can recognize friends, colleagues, and family members contemplating suicide by the way they behave</td>
<td>4.22 (0.07)</td>
<td>3.69 (0.05)</td>
</tr>
<tr>
<td>I don’t have the necessary skills to talk about suicide with a friend, colleague, or family member (Reverse Coded)</td>
<td>4.24 (0.07)</td>
<td>4.04 (0.06)</td>
</tr>
<tr>
<td>If a person’s words and/or behaviors suggest the possibility of suicide, I would ask directly if he or she is thinking about suicide</td>
<td>4.93 (0.07)</td>
<td>4.56 (0.06)</td>
</tr>
<tr>
<td>I have easy access to the educational or resource materials I need to learn about helping a person at risk of suicide</td>
<td>4.80 (0.08)</td>
<td>4.20 (0.06)</td>
</tr>
<tr>
<td>I can identify the places or people where I should refer somebody thinking about suicide</td>
<td>4.53 (0.08)</td>
<td>4.08 (0.06)</td>
</tr>
</tbody>
</table>

NOTE: All differences were statistically significant at p < 0.05.

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RAND Health
This research was conducted in RAND Health, a division of the RAND Corporation. A profile of RAND Health, abstracts of its publications, and ordering information can be found at http://www.rand.org/health.

CalMHSA
The California Mental Health Services Authority (CalMHSA) is an organization of county governments working to improve mental health outcomes for individuals, families, and communities. Prevention and Early Intervention programs implemented by CalMHSA are funded by counties through the voter-approved Mental Health Services Act (Prop. 63). Prop. 63 provides the funding and framework needed to expand mental health services to previously underserved populations and all of California’s diverse communities.

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