



ROGER



# Program Evaluation

**JANUARY 2023 TO MAY 2024**

# Key Findings

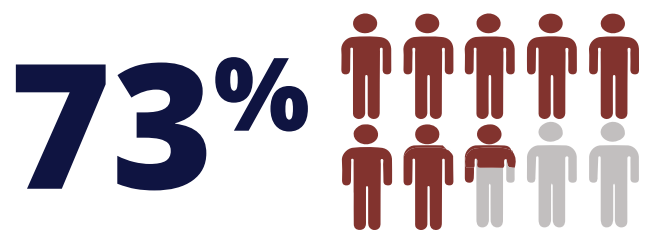
Each year, Stop Soldier Suicide evaluates and refines its **ROGER** Wellness Program. During the current evaluation time frame, **ROGER** served over 1,400 veterans and service members and provided over 15,000 clinical hours of support.

We implemented a new, comprehensive and highly customized clinical record management system that has provided greater insight than ever before into our clients' progress toward wellbeing.

Among clients engaged in our program, 73% experienced a reduction in suicidal cognitions, and 92% experienced an increase in mental wellbeing. For those engaged in our care for more than 30 days, 46% said that ROGER helped prevent a suicide attempt in their life.

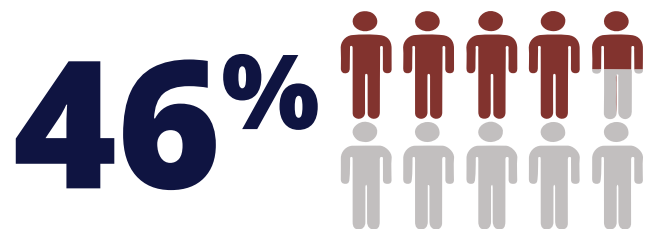
## Suicide Specific Outcome Measures

### Suicidal Cognitions



of clients experienced a decrease in suicidal cognitions (thoughts and beliefs about one's life that put them at highest risk for suicide) while in our care

### Attempts Prevented



of all clients who remained in care for more than 30 days, or who had 2+ treatment sessions, reported that ROGER helped prevent a suicide attempt in their life.

# Stop Soldier Suicide Overview

As a veteran founded, national nonprofit exclusively dedicated to reducing military suicide, our vision is a nation where veterans and service members are at no greater risk for suicide than any other American. Our mission is to reduce service member and veteran suicide by using enhanced data insights, focused client acquisition, and suicide-specific intervention services.

Stop Soldier Suicide's core service offering is its ROGER Wellness Program. Launched in 2019, this national, evidence-based package was designed by the country's leading experts in military suicide prevention.

The ROGER clinical telehealth services focus on evidence-based, suicide specific care, utilizing effective psychotherapy protocols such as Collaborative Assessment and Management of Suicidality (CAMS) and Brief Cognitive Behavioral Therapy for Suicide Prevention (BCBT-SP). In addition, the ROGER Resource, Referral, and Benefits Coordinators (RRBCs) connect clients with tailored and vetted resources in each client's community.

## ROGER has three key features:

- 1) Best-in-class client identification and acquisition methods using proprietary online keyword searches to tailor digital advertisements that connect veterans and service members to immediate intervention and help.
- 2) Comprehensive suicide risk assessment utilizing validated tools that effectively capture military history, trauma exposure, mental health symptoms, suicide attempt history, and specific plans for suicide while simultaneously building the therapeutic trust necessary to reduce risk.
- 3) Empirically-supported telemental health services delivered by highly-trained Wellness Coordinators employing validated tools to mitigate suicide risk (such as Crisis Response Plans), improve protective factors (especially by providing access to individualized resources), and comprehensively meet the needs of veterans, service members and their families.





# Evaluating Our Impact



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This report summarizes our evaluation of the ROGER Wellness Program from January 2023 to May 2024.

Two major changes took place within our program during this time frame. First, we started offering BCBT-SP in July 2023. Prior to that, our main treatment offered was CAMS. Second, in October 2023 we changed our client record management system and our processes for tracking client outcomes. Even though this report shares the total number of clients served and clinical hours provided during the evaluation time frame, our process and outcome measures use data from our new record management system.

We gather several patient-reported outcomes throughout the client's journey with us. At intake and every 30 days thereafter, we

administer an outcome questionnaire that measures changes in mental wellbeing, suicide cognitions, severity of suicidal thinking, self-rated suicide risk, and life purpose and satisfaction. At the beginning, after a few sessions of care, and at the end of care, we also ask clients to complete a survey related to additional conditions such as depression, anxiety, PTSD, and substance use disorders. A feedback survey is sent to clients at the middle and end of treatment.

We also track closely all of our clinician's interactions with clients. This includes the date and time when services were offered, the length of time to deliver care, the services offered with each interaction, and all the interactions that take place between treatment sessions. These data are also used to evaluate the efficiency of our processes.

# Treatment Journey

6,442 total requests were made between January 2023 and May 2024.

## Help Requests

1

Potential clients either call our 24/7 call center or fill out a short request form online that asks about contact information, birthdate, military status, suicidal thoughts and behaviors, and the reason for their request.

14 minutes from request to initial outreach  
15 hours from request to connection

## Outreach & Scheduling

2

Our call center contacts all those who submitted a help request form online within 15 minutes of submission to confirm information and determine whether immediate crisis services are needed. Staff also call within a business day to schedule the intake session.

6.2 days from request to intake (4.8 for high priority and 6.7 for low priority clients)

## Intake Session

3

Information is gathered about the client's biopsychosocial history and current life experiences. Suicide risk is fully assessed. Crisis response plans (CRPs) are developed with moderate and high risk clients.

6 days between contacts during treatment

## Treatment Sessions

4

Moderate and high risk clients are offered the evidence-based treatments of either CAMS or BCBT-SP. CRPs are revisited and maintained. We collaborate as needed with the client's professional and social support networks. Check-in calls, text messages, and emails are done in-between treatment sessions. Referrals to local community resources for additional social or economic needs are offered to all clients regardless of initial suicide risk level.

Clients remained in treatment for an average of 63 days:  
85 for high risk,  
71 for moderate risk  
38 for low risk clients

## Treatment Completion

5

The end of care is determined collaboratively as the client shows greater stability and reduction in their suicide risk. We typically offer up to 14 sessions of treatment as needed.

Clients receive messages from **ROGER** for a period of up to 12 months following treatment

## Caring Contacts

6

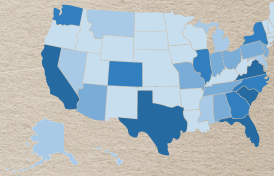
After care has ended, we send emails and text messages over 12 months to check-in with the client and remind them that we can help them if they have a relapse in their suicidality.



# Process Of Care: By The Numbers

## Help Requests

**86%** of requests are made through the web request form



Help requests came from all 50 states and DC.

## Outreach and Scheduling

**86%** of clients connected with us within one business day

**23%** of clients disclosed thoughts or behaviors of suicide for the first time in their lives

## Intake Session

**104** minutes for intake process on average, spanning 1.4 treatment sessions

**58** additional minutes on preparation (14 min) and clinical documentation (44 min)

**44%** of clients who initially screened negative for suicidal thoughts and behaviors, revealed during intake that they **did** have prior thoughts or behaviors

## Treatment Sessions

**98%** of high and moderate risk clients completed a Crisis Response Plan

**68%** of high and moderate risk clients participated in CAMS or BCBT clinical treatment

**No** statistical difference in the percentage of clients receiving treatment by: **Gender, Race, Ethnicity**

## Treatment Completion

**15,074** hours spent directly serving clients during their time with SSS between Jan 2023 and May 2024

**8** sessions on average before concluding treatment

**65%** of clients completed treatment with asufficient clinical dosage of 6+ sessions

## Caring Contacts

**700+** email and text messages were sent in our initial pilot program for sending caring contacts

**UPCOMING:** This next year we are building automated processes that will allow all clients to receive these caring messages

# Who becomes a ROGER client?



Below are the 10 most common responses to the question "What can **ROGER** help you with?"

ANXIETY



55%

FINANCES



54%

HOPELESSNESS



41%

HOUSING



37%

RELATIONSHIPS



36%

PURPOSE



33%

TRAUMA



33%

ANGER



33%

ISOLATION



32%

SLEEP



31%



# Who becomes a ROGER client?

## SOCIOECONOMICS

Uninsured .....	32%
Unemployed .....	17%
Homeless .....	15%
Experiencing Domestic Violence .....	10%



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## MENTAL HEALTH SYMPTOMS

PTSD .....	76%
Anxiety .....	69%
Depression .....	63%
Substance Use Disorder .....	30%

## PHYSICAL HEALTH

**93%**

of clients report some physical health problem

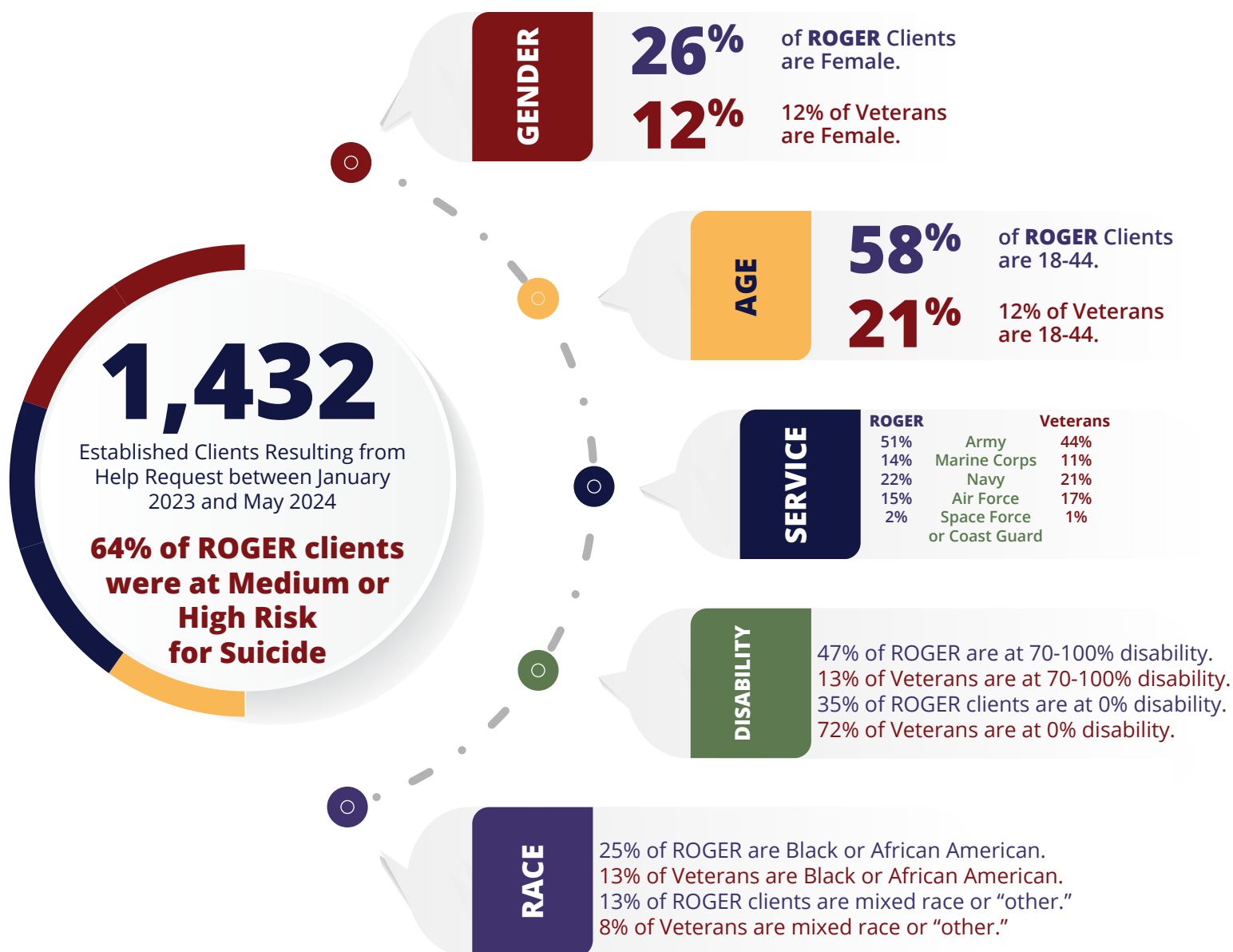
**74%**

of clients report chronic pain



# Who becomes a ROGER client?

**ROGER clients are typically younger and more diverse than the general veteran population.**



# Outcome Measures: Risk and Protective Factors

**42%**

of clients who were meaningfully engaged in our care improved in overall life satisfaction by end of treatment.

**80%**

of clients who were meaningfully engaged in our care were able to manage their thoughts and feelings by end of treatment.

**92%**

of clients who were meaningfully engaged in our care showed some improvement in mental wellbeing by end of treatment.

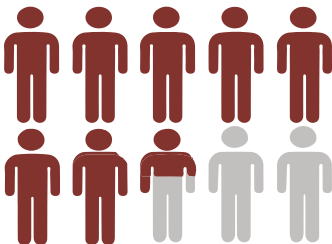
Percentage of clients receiving CAMS experiencing any reduction by end of treatment in:

STRESS.....	56%
PSYCHOLOGICAL PAIN.....	51%
AGITATION.....	50%
HOPELESSNESS.....	50%
SELF-HATE.....	46%

## Suicide Specific Outcome Measures

### Suicidal Cognitions

**73%**



of clients experienced a decrease in suicidal cognitions (thoughts and beliefs about one's life that put them at highest risk for suicide) while in our care

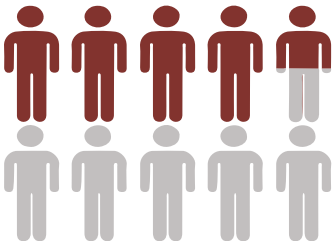
## Symptom Specific Outcome Measures

Clients who demonstrate clinically meaningful improvements in the following symptoms:

DEPRESSION	32%
PTSD	22%
ANXIETY	17%
6% SUBSTANCE USE DISORDER	

### Attempts Prevented

**46%**



of all clients who remained in care for more than 30 days, or who had 2+ treatment sessions, reported that ROGER helped prevent a suicide attempt in their life.

# Outcome Measures: ROGER Client Satisfaction

**ROGER's Net Promoter Score of 67**  
(a measure of customer satisfaction) is  
rated as outstanding.

***It helped me ground myself when I started to have passive suicidal thoughts that could have led farther down. This program helped me get my brain from survival mode to normal again.***

***They helped me when I felt I was at the end of my rope and nothing was going to be able to help.***

***ROGER has given me tools, not just words, to re-train my go-to patterns when life gets beyond overwhelming.***

***It has changed my life, giving me tools to use whenever I need to in the future. This has been the best therapy I have ever had.***

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ROGER

## Recommended Citation

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