



THEORY OF CHANGE

What is the problem you are trying to solve?

29% of people with suicidal ideation will go on to make a suicide attempt.

Who is your key audience?

People with chronic suicidal ideation, particularly those who dissociate. What is your entry point to reaching your audience?

search
-App store
search
-Referred
from mental
health
practitioner

-General

What steps are needed to bring about change?

Best practice is not to try and remove the ideation; app provides reminders that they do not want to act on it on a given day. What is the measurable effect of your work?

User does not attempt suicide during period of engagement with the app

measurable effect?

User has fewer days with suicidal ideation

measurable effect?

User is more educated on their condition

What are the wider benefits of your work?

Having a prior attempt is the best predictor of dying of suicide; preventing attempts = fewer suicides

wider benefits?

User shares app with others who need it

wider benefits?

User can educate others

What is the longterm change you see as your goal?

Current best

practice in the

management of

suicidal ideation is

not to focus on eradicating the ideation, as it can be an important coping mechanism. Rather, the focus is on a "harm reduction" approach of avoiding the severest consequences of the symptom. (Source: Half in Love With Death: Managing the Chronically Suicidal Patient, Joel Paris, MD)

KEY ASSUMPTIONS

Sucide attempts can be prevented

REY ASSUMPTIONS Reminders of how they felt during nonsuicidal selfstates will help those who

dissociate

KEY ASSUMPTIONS

People with chronic ideation have time periods where they will be looking for help with the symptom and will consider apps; Mental health practitioners will think an app can be efficacious

KEY ASSUMPTIONS

Remembering times when they did not want to commit suicide will have an effect on actions when they do. **KEY ASSUMPTIONS**

User remains engaged with app for meaningful period; mindfulness of ideation as unwanted leads to decrease in its use as coping strategy; user engages with app's educational material

KEY ASSUMPTIONS

Research on epidemiology of suicide is accurate; users are willing to talk about their ideation with others STAKEHOLDERS

People with chronic suicidal ideation; mental health practitioners