## Evaluation of a Brief Contact Intervention (BCI) in Sweden: Methods and Early Lessons Learned in Implementation

10. Public Health and community interventions

**Karen O'Quin**<sup>1, 2, 3, 4, 5</sup>, *Johanna Nordin*<sup>5, 6</sup>, *Emma Eliasson*<sup>1, 3, 4, 5</sup>, *Gergö Hadlaczki*<sup>1, 3, 4, 5</sup>, <sup>7</sup>, *Bianca Blazevska*<sup>1, 3, 4, 5, 7</sup>, *Vladimir Carli*<sup>1, 3, 4, 5</sup>

- <sup>1</sup> Karolinska Institutet
- <sup>2</sup> Region Värmland
- <sup>3</sup> National Centre for Suicide Research and Prevention of Mental III-Health
- <sup>4</sup> Department of Learning, Informatics, Management and Ethics (LIME)
- <sup>5</sup> Sweden
- <sup>6</sup> Mind
- <sup>7</sup> Region Stockholm

## **Abstract text**

The development and evaluation of low-intensity public health interventions aimed at reducing suicide and suicidal behaviors has been highlighted in the existing research as a crucial next step. Brief Contact Interventions (BCI's) demonstrate potential as effective, wide reaching, scalable interventions for suicide prevention that can be more easily disseminated to the public. The BCI being evaluated is Uppföjlningssamtal, which is, for the first time, being piloted in a Swedish context. Planning and development of the intervention began in 2023 and implementation began in November 2024. Uppföljningssamtal is telephone-based and consists of 8 follow-up calls over a 12-month period. The evaluation includes analyzing both aggregate and individual level process data, a participant survey, participant interviews, and interviews with stakeholders involved in the implementation. The evaluation plan has been developed simultaneously with the intervention, which has enabled the evaluation team to capture early lessons learned in real time. There are two types of stakeholders involved in the implementation. The first is employees and volunteers at Mind, the Swedish non-profit that is implementing the intervention. The second is employees at connecting organizations that help identify potential participants and connect those participants to the pilot intervention. The connecting organizations identified for the pilot are social services Stockholm and emergency services in Värmland. Participants are individuals receiving assistance from social services or emergency services and who employees believe are at risk for suicidal behaviors. The pilot is ongoing, and results are expected under 2026, however, early lessons from the planning and implementation include the importance of partnerships between the evaluators and the stakeholders, awareness of legal requirements, and the vital role that connecting organizations play in identifying and linking participants to the intervention.