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MILITARY FAMILY LIFE COUNSELOR (MFLC) RESPONDENTS

Introduction: Thank you for taking time to complete this brief survey related to Counseling on Access to Lethal Means (CALM). CALM involves asking clients who are experiencing significant distress or an adverse life experience about their exposure to lethal products (e.g., firearms, prescriptions/illegal drugs, poisons), which may be used to harm oneself or others in their home or other environments. If clients respond affirmatively, then a helping professional provides options for voluntary, temporary removal of lethal products or options for safe storage and use of lethal products. As a Military Family Life Counselor (MFLC), you may have or be in a position to use CALM as part of your duties. The purpose of this survey is to understand your experience with CALM training and your experience using CALM in the workplace. Your feedback will help us improve future training and implementation of CALM for all MFLCs. If you are unable to answer a question or a question is not applicable, please proceed to the next question. Survey participation is voluntary. You can skip questions you choose not to answer, and you can stop participating at any time. Data from the survey will only be reported in the aggregate; no responses will be linked back to an individual.

Instructions: Unless otherwise noted, please choose the response that best indicates your experience with CALM training and implementation within the past 12 months. Some questions are designed to understand your perceptions of how clients react to CALM techniques that are discussed during encounters. Please answer to the best of your ability and note your responses to these questions are confidential. Please do not include personally identifying information about yourself or your clients.

1. Did you receive CALM training? [**IF 1 = NO, DON'T KNOW, END SURVEY**].
 - ☐ Yes
 - ☐ No
 - ☐ Don't know
2. **Before** receiving the CALM training, how would you describe the level of knowledge you had with reducing access to lethal means?
 - ☐ Not at all knowledgeable
 - ☐ Slightly knowledgeable
 - ☐ Somewhat knowledgeable
 - ☐ Moderately knowledgeable
 - ☐ Extremely knowledgeable
3. **After** receiving the CALM training, how would you describe the level of knowledge you have with reducing access to lethal means?
 - ☐ Not at all knowledgeable
 - ☐ Slightly knowledgeable
 - ☐ Somewhat knowledgeable
 - ☐ Moderately knowledgeable
 - ☐ Extremely knowledgeable

4. In a typical month, about how many of your encounters with Service members and their family members involve CALM? (Please count multiple sessions with the same client only once). **[IF 4 ≠ 0, SKIP TO 6].**
- ☐ 0
 - ☐ 1-5
 - ☐ 6-10
 - ☐ 11-19
 - ☐ More than 20
5. Which of the following best describes your reason for **not** doing CALM with your clients? (select all that apply)
- ☐ I do not feel confident in my ability to discuss lethal means with individuals vulnerable to suicide or interpersonal violence
 - ☐ I am unsure about how to respond if the individual answered yes to having access to lethal means
 - ☐ I am worried the individual would react negatively due to concerns about personal freedom or liberty
 - ☐ I do not feel it is within scope of my duties or the contract I work for
 - ☐ I do not think this is appropriate to use with clients that are young children
 - ☐ Other (please specify). Please do not include any personally identifiable information: Click or tap here to enter text.

[IF 4 = 0, SKIP TO 10].

6. **[IF 4 ≠ 0].** Which of the following lethal means have you covered when administering CALM as part of your encounters with Service members and/or family members? Please select yes or no for each option.

Lethal Means Option	Yes	No
Firearms	☐	☐
Poisons	☐	☐
Prescription / over-the-counter drugs	☐	☐
Illegal drugs	☐	☐
Rope or belt	☐	☐

7. Following the administration of CALM during client engagements, how much do you think that your clients agree or disagree with the following statements?

Means Safety Statements	Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	N/A
Putting time and distance between a suicidal person and a	☐	☐	☐	☐	☐	☐

highly lethal means can prevent death by suicide						
Safe storage methods are effective and can save lives	0	0	0	0	0	0
Having a safety plan in place and sharing it with family members is important and can save lives	0	0	0	0	0	0

8. Following the administration of CALM during client engagements, which of the following best describes why your clients might not agree with reducing access to lethal means? (select all that apply)
- ☐ Concerns about protecting oneself and and/or family (e.g., need firearm loaded)
 - ☐ Firearms are part of their work (active military/police officer, security guard)
 - ☐ Family is educated on the use of firearms and would not misuse them
 - ☐ Not feeling suicidal, or they do not believe they or family members are at risk for suicide
 - ☐ Belief that someone who is suicidal will just replace one lethal method for another
 - ☐ Concerns about personal freedom or liberty
 - ☐ Other (please specify). Please do not include any personally identifiable information. Click or tap here to enter text.

9. Following the administration of CALM during client engagements, did any of your clients express interest in any of these safety steps? Please select yes, no, or unsure for each option.

Means Safety Steps	Yes	No	Unsure
Storing firearms with a relative, friend, gun shop, shooting range or other secure location	0	0	0
Ensuring loaded firearms in the home are locked	0	0	0
Safely disposing of unused, expired, and unwanted medication	0	0	0
Limiting easy access to belts or ropes	0	0	0
Sharing a safety plan with family members or another support person	0	0	0
Other (please specify). Please do not include any personally identifiable information: Click or tap here to enter text.	0	0	0

10. What more would you like to say about your experience with CALM? Please do not include any personally identifiable information.

11. What has been the biggest or most valuable impact of CALM discussions with your clients? Please do not include any personally identifiable information. You can also indicate 'not applicable' if you have not administered CALM with clients.

12. What are your suggestions for improving how CALM is implemented? Please do not include any personally identifiable information.

MILITARY FAMILY LIFE COUNSELOR (MFLC) MANAGER OR SUPERVISOR RESPONDENTS

Introduction: Thank you for taking time to complete this brief data call related to Counseling on Access to Lethal Means (CALM). Recently, we asked many Military Family-Life Counselors (MFLC) to complete a CALM training. As their managers and supervisors, your feedback to this data call will help us understand CALM training implementation and effectiveness. If you are unable to answer a question or a question is not applicable, please proceed to the next question. Survey participation is voluntary. You can skip questions you choose not to answer, and you can stop participating at any time. Data from the survey will only be reported in the aggregate; no responses will be linked back to an individual.

Instructions: Unless otherwise noted, please choose the response that best indicates your observations of MFLCs, which you manage or supervise, implementing CALM within the past 12 months. Your responses to these questions are kept confidential. Please do not include personally identifying information about yourself or your clients.

1. Approximately what percentage of your MFLCs have received CALM training?
 - ☐ 0%
 - ☐ 1-25%
 - ☐ 26-50%
 - ☐ 51-75%
 - ☐ 76-99%
 - ☐ 100%
2. **Before** receiving the CALM training, how would you describe the level of knowledge the typical MFLC had with reducing access to lethal means?
 - ☐ Not at all knowledgeable
 - ☐ Slightly knowledgeable
 - ☐ Somewhat knowledgeable
 - ☐ Moderately knowledgeable
 - ☐ Extremely knowledgeable
3. **After** receiving the CALM training, how would you describe the level of knowledge the typical MFLC has with reducing access to lethal means?
 - ☐ Not at all knowledgeable
 - ☐ Slightly knowledgeable
 - ☐ Somewhat knowledgeable
 - ☐ Moderately knowledgeable
 - ☐ Extremely knowledgeable
4. **[IF 1 ≠ 0% OR 2 = NOT AT ALL, SLIGHTLY].** Do you believe your MFLCs need refresher training on CALM?

- ☐ Yes
- ☐ No
- ☐ I don't know

5. What training format do you believe is most effective for your MFLCs?

- ☐ Self-directed training via full desktop web site
- ☐ Self-directed training via smartphone or tablet application
- ☐ Facilitated group training via webinar, video conferencing, or virtual classroom
- ☐ Facilitated group training via in-person classroom
- ☐ One-on-one, virtual consultation
- ☐ One-on-one, in-person consultation

6. **[IF 1 ≠ 0%]** Approximately what percentage of your MFLCs have conducted at least one CALM session per month with a Service member or family member?

- ☐ 0%
- ☐ 1-25%
- ☐ 26-50%
- ☐ 51-75%
- ☐ 76-99%
- ☐ 100%
- ☐ Don't know

7. **[IF 6 = 0%]** Which of the following describes the reasons MFLCs are not doing CALM with their clients? (select all that apply)

- ☐ MFLCs do not feel confident their ability to discuss lethal means with individuals vulnerable to suicide or interpersonal violence
- ☐ MFLCs are unsure about how to respond if the individual answered yes to having access to lethal means
- ☐ MFLCs are worried the individual would react negatively due to concerns about personal freedom or liberty
- ☐ It is not within scope of MFLC duties or the contract
- ☐ It is not appropriate to use with clients that are young children
- ☐ Other (please specify). Please do not include any personally identifiable information:
Click or tap here to enter text.

8. What more would you like to say about your observations of MFLC's implementation of CALM? Please do not include any personally identifiable information.