

4.10 Considerations for Special Populations

Your Caring Contacts program may include populations that require special considerations. The following recommendations are suggested for specific populations.

Youth and Teens

We have found that youth and teens interact with a Caring Contacts two-way text program differently than adults. For example, some teens may initially present as bored, defensive, or skeptical. It's important to take extra care in the beginning to respond to their incoming messages promptly and consistently to build trust. Teens may also engage in the program intermittently as their needs evolve over weeks and months.

Teens may also be unable to view or respond to texts sent during school hours, which is especially important to know if assessing safety. Finally, while some teens may have especially high mental health literacy and be very comfortable sharing about their mental health concerns, others may be hesitant to do so.

The table below includes strategies to build trust and rapport with youth and teens early in the program.

STARTING THE INTERVENTION

- Schedule outgoing messages to be sent outside of school hours when feasible.
- Ask for and be sure to use preferred pronouns and names.
- Consider potential variation in the level of support available at home. Some youth may be significantly undersupported, and not every teen is comfortable talking to a parent or caregiver, especially about suicidal ideation or self-harm. Others may have very supportive home environments.

DELIVERING THE INTERVENTION

- Respond promptly to initial incoming messages, even if it is just to acknowledge their reply. Teens in research trials have given feedback that a delayed text reply feels uncaring and insincere.
- Communicate that you are on their side. Use statements such as *I'm here for you either way,* or *I'm on your team.*
- Validate their emotional turmoil, no matter how small it may sound.
- Choose words and tone carefully to avoid sounding judgmental. (i.e., avoid "you should" statements).
- Cultivate awareness of subtext, slang, memes, punctuation usage, and emojis.
- Be responsive to activities, hobbies, projects, or any interests that they share as a way to reinforce a sense of genuine care.
- Once rapport is established, be prepared to respond to requests for advice on navigating relationships with parents, friends, and/or significant others.

It may take more time to build a relationship with teens. However, once trust has been established, teens may be more likely than adults to initiate contact with their follow-up specialist, offering an opportunity to reinforce safety and well-being during periods of calm or crisis.

Older Adults

Caring Contacts have successfully supported older adults – including those over the age of 90. It's important not to underestimate the digital engagement of older individuals, but be aware that there may be a range of comfort with technology in this age group. Many are not only capable of texting but may also benefit greatly from a text-based program.

When you're supporting older adults, consider the following:

- If you are collecting data, consider additional support that may be needed, such as offering to complete surveys via phone call.
- Adapt tone, language, and grammar to mirror the participant. Respond in full sentences, and utilize more formal grammar if the participant does so.
- Note that stigma around mental health may be more pronounced in older generations.
- Be aware that discomfort discussing emotional well-being may be more common.


Veterans and Active-Duty Service Members

There has been extensive research into the preferences of veterans for their Caring Contacts. You can find more details on their feedback about Caring Contacts, including modality and author preferences, on our website, caringcontacts.info/examples. If supporting veterans and active-duty service members with two-way text message Caring Contacts, consider the following feedback that was collected as part of an assessment in a VA emergency department.¹⁰

- Two-thirds of veterans preferred messages to continue at the same frequency over time, compared to tapering off toward the end.
- Include Veterans Day in holiday messages. Other important holidays to consider are Memorial Day, Armed Forces Day, July Fourth, Christmas, and 9/11.
- Veterans had a stronger preference for an inpatient or outpatient mental health counselor or primary care physician as the Caring Contacts author compared to other correspondents (e.g., a fellow veteran they had not met, a crisis worker, or a provider from a Caring Contacts program).

Individuals with Complex Mental Health Diagnoses

In rare situations, Caring Contacts may not be a suitable follow-up support program for some individuals with complex mental health diagnoses, or it may require modifications. Seek guidance from behavioral health professionals on how to manage participants with complex clinical diagnoses that may require alterations to the program.



This project and related research were supported by Grant TBS-0-022-22 awarded to Anna K. Radin, DrPH, MPH, with St. Luke's Health System from the American Foundation for Suicide Prevention. The content is solely the responsibility of the authors and does not necessarily represent the official views of the American Foundation for Suicide Prevention. This project was also supported with funding from the St. Luke's Health Foundation. This publication includes findings and lessons learned from research that was funded through a Patient-Centered Outcomes Research Institute® (PCORI®) Research Award (IHS-2018C3-14695). The content presented in this publication is solely the responsibility of the authors and does not necessarily represent the views of PCORI.

stlukesonline.org | idahocrisis.org | uwcspar.org | uwmedicine.org

