

**The Wellbeing Partners:
Head to Heart
Outcome Evaluation Findings**

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Purpose

The evaluator collaborated with The Wellbeing Partners (TWP) to complete the 2025 outcome evaluation of the Head to Heart program using a participatory approach in which TWP staff were actively involved in the evaluation planning and data collection. To accomplish the evaluation, the evaluator held meetings with program staff, analyzed outcome data via survey, and interviewed licensed professionals who participated in the program to assist with triangulating the data.

Program Overview

The Head to Heart program is a culturally specific program that began with training barbers/stylist in 2023 and expanded in 2024 to train Black licensed professionals (e.g., tattoo artists, nail technicians, massage therapists) to be mental health advocates for their clients by listening and providing mental health resources when necessary. The program consists of a two-day evidence-informed training entitled *Mental Health First Aid*. The first day focuses on the core concepts of mental well-being, teaching trainees how to identify signs and symptoms. The second day involves applied training with Elisha Suttles, providing hands-on experience in addressing mental health situations. In addition to receiving this training, the licensed professionals also received culturally responsive training as mental health responders by a licensed mental health specialist. After the program was completed, licensed professionals spent the next 3 months implementing the knowledge and skills learned in the program to be mental health advocates. After licensed professionals interacted with their clients, they asked each client to complete the Head to Heart Survey to share their experiences interacting with their licensed professional regarding personal situation(s).

Evaluation Methods

Outcome Evaluation

The outcome evaluation consisted of an assessment of one (1) knowledge quiz administered at the end of the *Mental Health First Aid* training, and one (1) post survey completed by the clients of the licensed professionals who participated in the Head to Heart program. A total of thirteen (13) licensed professionals completed the program. A total of 30 clients completed the survey during the evaluation period (January to March 2025).

The outcome measurement tool was developed in partnership with TWP staff during the 2023 cohort (See *Appendix 2*). In partnership with the TWP Wellbeing Coordinator, we decided to use the same survey items from the previous cohort to assess the success of the training, and to allow for comparisons across cohorts in a future evaluation. A 31-item survey was administered to assess interactions between the clients and the licensed professionals, and to garner feedback about the mental health resources their licensed professional may have provided them. (See *Appendix 1*). Questions related to interaction were on a dichotomous scale (i.e., Yes' or 'No'), a Likert-type scale ranging from 1 to 5 with '1' being 'Strongly disagree' and '4' being 'Strongly agree,' or an open-ended question (e.g., Why didn't you feel comfortable discussion your personal situation with your licensed professional?). To assess the mental health resources provided during their appointment, clients were asked a series of questions with responses on a dichotomous (e.g., Did your licensed professional provide you with mental health resources?) or Likert-type scale ranging from 1 to 5 with '1' being 'Strongly disagree' and '4' being 'Strongly agree (e.g., I used the mental health resources/materials given to me by my licensed professional), or open-ended questions (e.g., What resources did your licensed professional give you?). Demographic information (i.e., age, gender, race, ethnicity, zip code, health insurance, and income) was also obtained to determine if the population of focus was being reached. The survey items were based on the content delivered during the *Mental Health First Aid* training administered by TWP staff. Lastly, we asked clients to self-report their mental health status on a scale of 1 to 5 with '1' being 'excellent' to '5' being 'poor.'

The survey was administered electronically through Survey Monkey[®] by placing posters with a QR code in the shops of the licensed professionals. The licensed professionals were asked to have their clients complete the

survey if they provided them with mental health first aid. Initially, we created a goal of 260 total clients to complete the survey, but due to attrition a total of 13 licensed professionals participated in the program. Therefore, we adjusted the survey completion goal to 130. The survey responses were administered online through Survey Monkey® which could be accessed through a client's smartphone. The survey responses were imported from Survey Monkey® to a Microsoft Excel spreadsheet. From there, the data was cleaned, and the same codebook from the 2023 cohort was used in preparation for future use to compare cohorts. The Excel file will be shared back with TWP at the end of the evaluation period. The excel spreadsheet was imported into IBM SPSS Statistics version 30.0.0.0 software for analysis. Frequencies and descriptive analyses were performed. In addition, Chi-square and regression analyses were performed to examine relationships among survey items.

In addition to the client survey administration, 10 of 13 Head to Heart participants were interviewed to assess their overall experience with the program, including their completion of the *Mental Health First Aid* training. Two of the participants were not interviewed because they were either addressing a personal matter or unavailable to complete the interview. The semi-structured interview guide from the 2023 cohort was administered to maintain consistency in evaluation metrics. The final interview guide consisted of six (6) questions that focused on program content, self-efficacy in client interactions, cultural relevance, and compensation. However, we experienced challenges with the survey administration in meeting our sample size, so we added one question to the interview to determine other ideas to improve survey administration.

The evaluator was unable to attend the program kickoff. Therefore, the evaluator recorded a message describing the evaluation and the importance of the Head to Heart program participants to participate in the evaluation process. This allowed for buy-in to the evaluation plan for the remainder of the program. Permission was given to the TWP Wellness Coordinator from program participants to share their contact information with the evaluator and evaluator assistant to coordinate and schedule the interviews. The interviews occurred during times when the licensed professionals were available. The interviews were conducted by phone or Zoom and were no more than 30 minutes in duration. The participants' responses were captured through detailed notes or digitally recorded by the evaluator or the evaluator assistant. The evaluator captured most information verbatim by typing the responses in real time. Qualitative analysis of the interview notes used a priori approach in which responses were coded based on the evaluation goals.

Results: Outcome

Post-training quiz

For the *Mental Health First Aid* training, a total of 13 licensed professionals participated in the program, but 12 completed the post-training exam. The exam is completed online and consisted of 10 questions which offered scenarios or vignettes of situations in which they were asked to select the appropriate response to the scenarios. All scenarios covered material (i.e., knowledge and skills) learned during the training. The program curriculum requires a 60% pass rate to be considered a successful participant in the *Mental Health First Aid* training. Only one question was missed by one of the 12 participants who completed the exam (i.e., *Your best friend was a victim of physical assault some years ago and has since been diagnosed with an anxiety disorder. You're with her when she breaks into a sweat, doubles over as if in pain, and starts to hyperventilate. Do you...*). All participants who completed the exam **successfully passed with an average score of 99% for the cohort.**

Client survey

A total of 30 clients completed the survey. However, data was missing for 2 of the client surveys. Therefore, 28 client surveys were included in the analysis.

Demographics of the survey participants. Most of the clients surveyed (N=25) were Black/African American adults with an average age of 37 years (See Table 1). Almost a quarter of clients were male (23%) and most

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were female (70%). Most clients resided in zip code 68111, reported income between \$50,000 to 75,000, and had health insurance. Interestingly, most clients reported their mental health status as either 'Good' (20%) or 'Fair' (27%). Only a third of the sample reported their mental health status as 'Excellent' (13%) or 'Very Good' (20%).

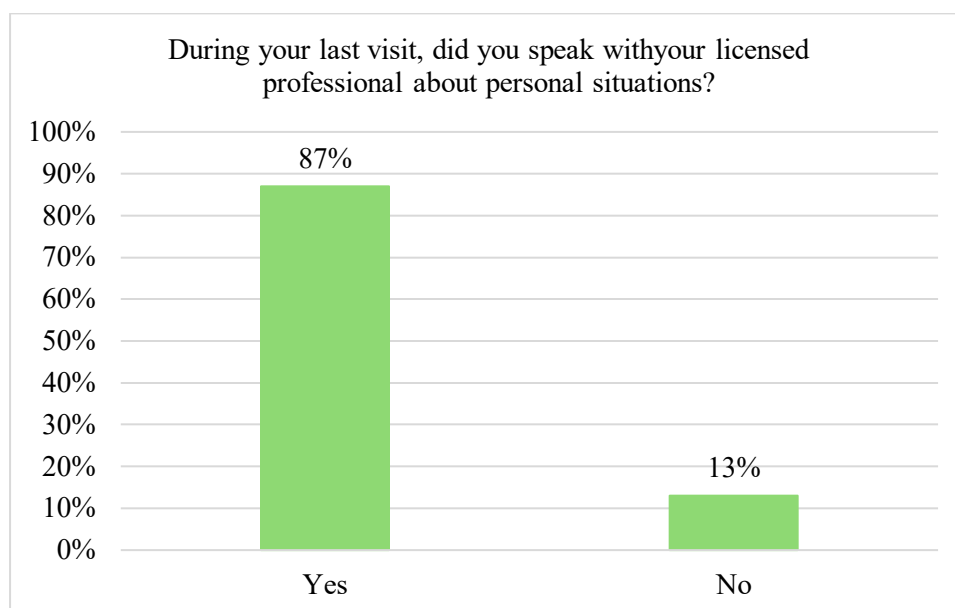
Table 1. Demographic Characteristics of Client Survey Respondents

Age (average in years)	37
Gender*	
Male	7 (23%)
Female	21 (70%)
Race*	
Black/African American	25 (83%)
White	4 (13%)
Spanish Origin*	
No	26 (87%)
Yes, Mexican, Mexican American	1 (3%)
Zip Code*	
68111	6 (20%)
68104	4 (13%)
68134	4 (13%)
Income*	
Below \$25k	3 (10%)
\$25k to \$49,999	5 (17%)
\$50k to \$74,999	7 (23%)
\$75k to \$99,999	4 (13%)
Health Insurance*	
Yes	22 (73%)
No	2 (7%)
Prefer Not To Answer	3 (10%)
Mental Health Status*	
Excellent	4 (13%)
Very good	6 (20%)
Good	9 (30%)
Fair	8 (27%)
Poor	1 (3%)

*N = 28, 2 missing

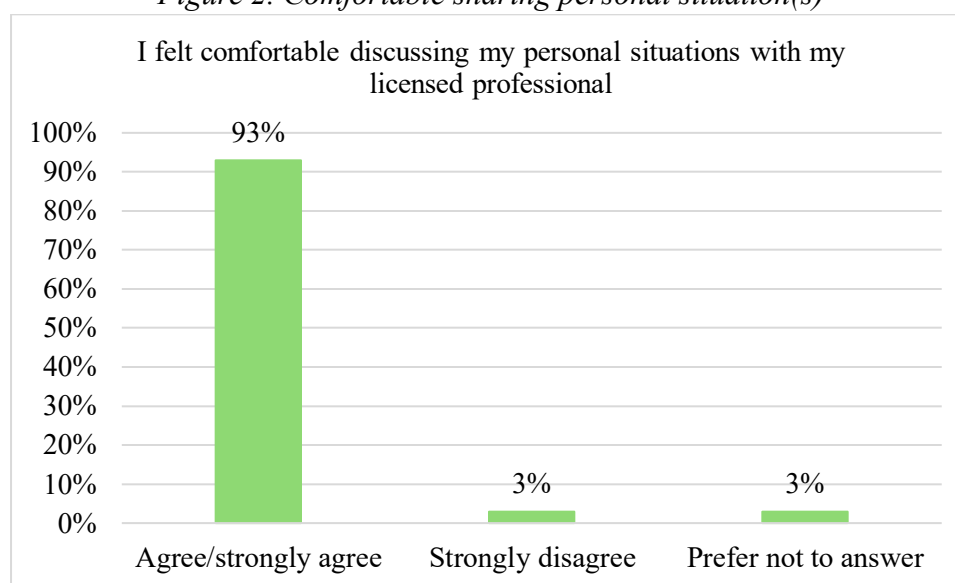
To assess client interaction with their barber or stylist, clients were asked if they spoke with their licensed professional about personal situations during their appointment. The response choices included ‘Yes’ or ‘No.’ Majority of participants (87%) reported speaking with their licensed professional about personal situations during their appointment (Figure 1).

Figure 1. Speaking with their licensed professional



When asked whether they felt comfortable sharing their personal situation(s) with their licensed professional, again, the majority strongly agreed or agreed (93%) although 3% (1 client) reported not feeling comfortable sharing and preferred not to answer (1 client) (Figure 2). When asked why they did not feel comfortable sharing, none of the clients responded to the open-ended question. The remaining responses for this question were missing (N=2).

Figure 2. Comfortable sharing personal situation(s)



Overall, majority of clients reported having a positive interaction with their licensed professional (See Table 2). Most clients strongly agreed or agreed (80% to 97%) that their licensed professional actively listened, reassured them, expressed concern, asked about their wellbeing, made them feel welcomed to share, and confirmed their feelings.

Table 2. Interaction skills reported by clients

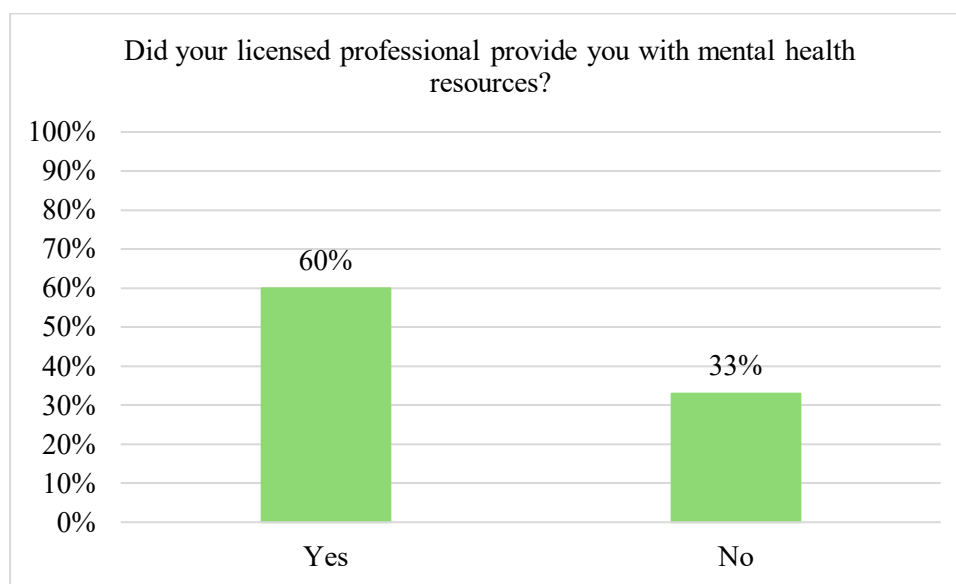
Survey Items	Strongly Agree N (%)	Agree N (%)	Disagree N (%)	Strongly Disagree N (%)
Thinking through the situation(s) with me	14 (47)	14 (47)	--	1 (3)
Giving me good advice about the situation(s)	15 (50)	14 (47)	--	--
Actively listening to me talk about the situation(s)	16 (53)	13 (40)	--	--
Reassuring me about the situation(s)	16 (53)	12 (40)	--	--
Expressing concern about the situation(s)	15 (50)	14 (47)	--	--
Offering assistance with the situation(s)	16 (53)	12 (40)	--	--
Pointing out changes in my behaviors because of the situation(s)	13 (43)	11 (37)	4 (13)	--
Asking me if I'm okay	17 (57)	10 (33)	1 (3)	--
Making me feel welcome to talk about my situation(s)	21 (70)	7 (23)	--	--
Confirming my feelings about the situation(s)	18 (60)	10 (33)	--	--

*N is the number of clients who selected the response choice

28 cases included and 2 missing cases

When asked whether their licensed professional provided mental health resources to them, majority of clients (60% or 18 clients) reported they received resources. However, 33% of clients (10) did not receive resources.

Figure 3. Mental health resources distribution



Of the 18 clients who were provided with mental health resources, they were asked an open-ended question to capture the types of mental health resources they were provided (i.e., *What resources did your licensed professional give you?*). There was a mix of resources distributed to clients but most of the licensed professionals (7) gave contact information for a therapist. Table 3 displays a list of resources distributed by licensed professionals.

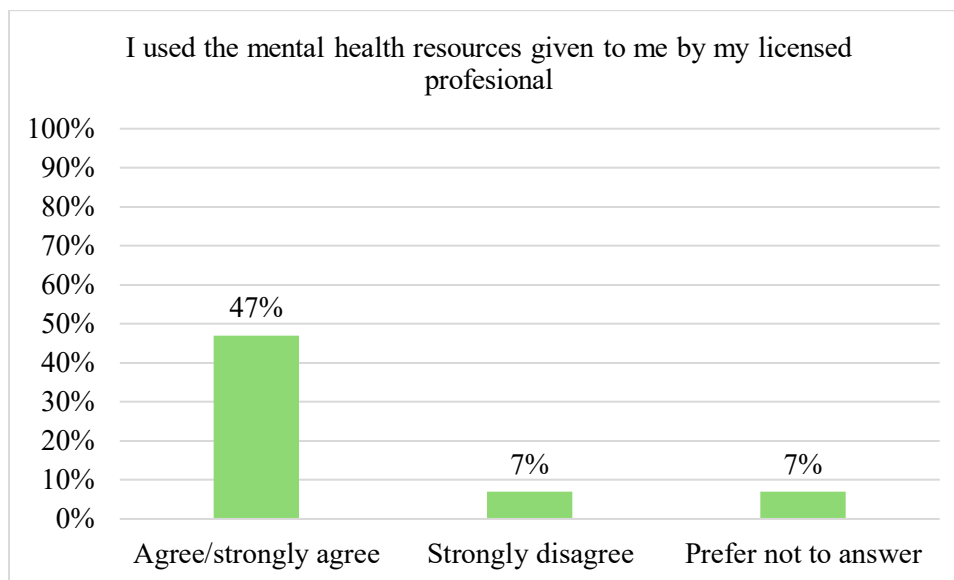
Table 3. Mental Health Resources

Business card/Individuals I could call/therapist	7
Brochure	1
Books	1
Douglas County Health Department	1

Homeless resources	1
Joining groups regarding my situation	1
Mobile applications	1
Talked about therapy and the benefits	1
Inspirational podcasts	1
Television show (<i>This Is Us</i>)	1
Websites	1
The Wellbeing Partners	1
NAMI	1
Kim Foundation	1

Most clients strongly agreed (13%) or agreed (33%) that they used the mental health resources given to them by their licensed professionals. However, 2 clients strongly disagreed with using the mental health resources and 2 more clients preferred not to answer the question. The clients who reported not using the mental health resources were asked why, and the clients stated they *haven't had time, I'm lazy*, and two stated *not ready to use them*. When the additional follow up question was asked whether the clients thought they would use the mental health resources within the next three months, 1 client agreed they would use the resource, and 1 client disagreed they would use the resource within the next 3 months. The client who disagreed gave the reason again *not ready, limited time with life's ups and downs come and go*. The other client did not answer the question regarding why they did not plan to use the mental health resources. All other clients who reported using the mental health resources (14 clients) strongly agreed or agreed that the resources were helpful (100%).

Figure 5. Mental health resources utilization



Chi-square and regression analysis were conducted to identify relationships between demographic variables and self-reported mental health status among clients as well as interactions and mental health status. Due to a small sample size, there were not statistically significant relationships identified except one – self reporting as Black/African American. There was a statistically significant relationship between self-reported mental health status and self-reporting as Black/African American, $X^2(4) = 9.53, p < .05$. This means mental health status was dependent on self-reporting as Black/African American. Mental health status and being Black/African American has a strong correlation, which was determined using Cramer's V (.648). When a multinomial logistic regression was performed to establish probability and directionality, there was not a significant relationship

identified even when adjusting for other demographic variables such as age, gender, and income. When reviewing the data for practical significance, no relationships were identified to provide further insight into the survey data about the program outcomes.

Limitations

There were two limitations of the outcome evaluation results:

- The small sample size limits the generalizability of the results.
- The small sample size also prevents opportunities for reaching statistical significance. It should be noted that statistical significance is not a requirement because practical significance can also demonstrate program success.

For future evaluations, if there is interest in identifying statistically significant relationships as it relates to mental health status, the sample size must be increased. In addition, TWP staff may want to consider identifying an additional outcome variable that is continuous, such as depressive symptomology scores from validated measures like the Patient Health Questionnaire (PHQ), which assesses mental health status. Another validated scale to consider is the Center for Epidemiological Studies (CES), which is another depressive symptomology assessment that may provide further insights into the mental health of clients interacting with licensed professionals who participated in the program. The current outcome variable, self-reported mental health status, is a categorical variable and limits the type of analyses conducted.

Results: Interviews

A total of 10 qualitative interviews were conducted, with 1 male participant and 9 female participants. Seven themes a priori were described: 1) program interaction, 2) program concern, 3) difficult conversation, 4) program satisfaction, 5) cultural relevance, 6) compensation, 7) client survey, and 8) program recommendations (See Table 4).

Program interaction

Most of the program participants expressed that the program content was very helpful, and delivery of the content was very engaging. Many of the licensed professionals discussed how they acquired or enhanced skills such as communication, awareness, confidence, confidence in providing mental health resources to clients, knowledge, and active listening:

It increased my awareness of how to communicate effectively with clients. It gave me confidence in offering support and fostered a healing exchange where vulnerability and empathy could thrive.

The training was very helpful, and it gave me more insight and knowledge, especially in my role as a Doula.

This helped me better interact with clients in recognizing mental health concerns.

There is a significant improvement in my ability to supply resources to clients which was something I initially struggled with.

It was very helpful especially the self-evaluation part which allowed me to better identify when others might need therapy or counselling.

The training was very helpful in encouraging me to see things from other perspectives, allowing me to engage with clients thoughtfully.

It made discussing mental health less difficult and applicable in my day-to-day work... There is a significant improvement in my ability to supply resources to clients which was something I initially struggled with.

One participant stated how the training has helped with her relationship with her clients as well as in her personal and family interactions:

The training made it easier for me to assist clients with mental health needs, creating a comfortable space for them to talk... It helped me feel more confident giving resources to clients. It also helped me with my personal and family interactions.

Program concerns

When asked if there was any program content they questioned or were unsure of, most licensed professionals stated that they did not have any concerns or did not question anything:

I do not question any part of the training and felt it was consistent with my previous experience in similar programs.

I do not question any part of the training as they all align with my belief and how mental health situations should be handled.

However, some licensed professionals, questioned some aspects of the program:

I questioned the presence of a white therapist during a session but later realized that the therapist's role was helpful.

I questioned the approach of continually probing clients during conversations, especially if the client had already shown signs of being finished with the discussion. I felt that once the client no longer wanted to share, it was appropriate to offer resources and end the conversation.

I questioned the path of separating the lecture and practical session of the training, a few combining boards on the same day would be more beneficial.

Personally, I think the part of training that suggests that I could diagnose mental health conditions. I really find it challenging to understand the full scope of diagnosis.

I questioned the drug and alcohol use in the training because it is not in all instances of drinking or substance use are linked to mental health issues.

One licensed professional mentioned how the program piqued their interest to learn more:

I was curious about the mental health book provided during the training, particularly when it mentioned that I cannot diagnose conditions. I feel the book made me want to learn more and even consider future studies.

Difficult conversations

Each licensed professional shared one or more stories about handling difficult conversations with their clients that reflected their ability to exercise the knowledge and skills they learned during the *Mental Health First Aid* training. Overall, the licensed professionals described productive discussions with their clients related to the personal situation(s) shared with them. Most of the situations were resolved positively whether it ended in receiving professional support (e.g., therapy, psychological assessment), clarity about their situation, or further discussion to provide support or advice. Most licensed professionals mentioned they were able to showcase their active listening skills:

I listen more to them and try to understand their needs to provide the needed resources.

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It was very easy for me to start conversations which also allowed my clients to open up more. I used resources like therapy sessions and group counseling for more support.

I faced many crisis situations in the barbershop. I used the training to introduce discussions about mental health and suggest resources outside of the barbershop for those struggling.

I now find it easier to have an open and natural conversation. I approach difficult situations by assessing the severity of the issue and using appropriate resources, if necessary, like contacting authorities or family members that I currently use.

Others mentioned how confident they are to handle difficult conversations with their clients after the training:

I feel difficult conversations are now easier as the training provided me with tools for addressing mental health concerns. I offer client resources like mental health therapy and support options when necessary. I use resources like resource cards and suicide prevention.

I now handle difficult conversations with more caution, helping clients take accountability and think critically. I focus on offering support without judgment using open-ended questions to encourage clients to reflect on their decisions.

I feel more confident handling difficult conversations now. I have created a safe, calming space for clients to express vulnerability allowing for more productive discussions. The training helped me notice clients' emotional changes and respond appropriately.

I am more mindful now using a guided approach to listen and respond with intent rather than relying on my personal biases or jumping into solutions too quickly.

Handling difficult conversations has become smoother and more effective. I now offer clients a reference card and explain that it is okay to talk to someone using resources shared during the training.

Some licensed professionals shared how they were able to resolve certain or specific conversations with their clients, and what they used from the training during these conversations:

I helped a client, and her mother recognized the client's anxiety. I took steps such as scheduling a doctor's visit and considering medication. While the situation was ongoing, the conversation laid the groundwork for further support.

The training refined my existing approach, making me feel more comfortable checking in with clients when emotional shifts are observed. I now feel more confident recognizing signs of distress and offering support.

Program satisfaction

All licensed professionals expressed high satisfaction with their participation and completion of the program. All licensed professionals also said they would recommend other licensed professionals to take the program and provided reasons why they should:

I strongly recommend the training encouraging both mental health professionals and the general public to take part. I believe it offers valuable skills for connecting with and supporting others.

Yes, I will always recommend the training to other people so that they can listen and communicate better with other people struggling with mental health.

Yes, I would always recommend the training, especially for service providers who need tools to help clients open up and access resources.

Yes, I would recommend this program because it is very important especially for barbers who interact with many people and absorb different emotions and also the need of mental health awareness and self-care.

I would recommend the program to anyone, emphasizing that it helps people understand others better, especially in a community setting where mental health is often a significant issue. It made it easier to help people in a meaningful way.

One licensed professional mentioned the training could help others change their perspective on how they interact with their clients. The licensed professional also emphasized that having the right mindset and knowledge helps avoid causing harm:

Yes, I would recommend the program to others, especially to those in the cosmetology field. I believe it's important for service providers to be equipped with mental health knowledge to better support clients.

One participant said they would recommend the training to those in leadership positions:

Yes, I would recommend others to join the training because of its importance, especially to those in leadership positions.

Another participant said she would recommend the program because of its community relevance:

Yes, I will always recommend the program because it is an essential resource for service providers to help reach and support communities in need.

Cultural relevance

Most licensed professionals did not see any issues with the program curriculum being culturally relevant. Most of the comments were about how the curriculum was either relevant to them personally or to the community they live in:

I resonate with the training's emphasis on trauma connecting it to my personal cultural experiences as a person of color. I found the training approach to dealing with trauma especially in Black communities.

I relate with focus on substance abuse. I recognize it as a significant issue in the community.

Culturally, I relate to the training focusing on how to approach mental health discussions within minority communities, especially in breaking down barriers and overcoming stereotypes around therapy and mental health.

Culturally, I relate with the training discussion on how Black community often avoids discussing mental health and how important it is to break barriers.

I related to the session led by the Black licensed mental health therapist who provided additional resources for Black mental health which resonates with me.

...I found these sessions more relatable and appreciated how the trainers spoke directly to the community's cultural context.

Some licensed professionals mentioned specific portions of the content they found relevant based on their personal experiences and past experiences interacting with clients about personal situations:

I related to the PTSD session of the training especially in relation to trauma in the community.

I think the aspect of mental health in the Black community stood out for me.

...I resonated most with the cultural aspect of the training, especially Alicia Suttles' presentation that aligned mental health concepts with real-life experiences.

Only one licensed professional mentioned that there was one area of disconnect as it related to cultural relevance:

I felt that that while the training used Black actors in videos, the storyline did not connect with their own cultural context leading to some disengagement.

Compensation

All licensed professionals agreed the compensation to participate in the program was fair and some mentioned that they would have participated even if payment was not offered because they were very interested in the topic:

The money paid was OK and sufficient for the time.

The payment was fair and well appreciated unlike other training that did not offer bonus.

The payment was fair because I would have participated without compensation as I was very eager to participate in the training.

The payment was fair and well appreciated. I would have participated even without payment.

The payment was fair and exceeded my expectations since I was not even expecting to be paid for the training.

The payment was fair since I was not expecting any payment before joining the training.

Client Survey

Most licensed professionals did not find it difficult to give out the survey to their clients. However, some licensed professionals said they did not follow up with their clients to know if the survey was completed or not:

I think the survey was easy to understand but some clients might hesitate to complete it due to privacy concerns.

I think following up with clients to ensure the survey is completed and understood was my issue.

I referred clients to the survey but did not personally follow up or review the feedback.

Some licensed professionals said the survey was convenient and very easy to understand although one licensed professional mentioned the link did not work for some of their clients. However, this licensed professional suggested accessibility but did not share how evaluators could make it "easier" for clients to complete:

I felt the survey was convenient as one of my clients completed it while sitting in the chair.

Sometimes the survey link does not work for clients ...I will suggest improving accessibility and making it easier for clients to complete.

Program Recommendation

All the participants were satisfied with the program and gave reasons why they would recommend the program to others. Most participants believed it would help others to understand clients' perspectives with respect to mental health and wellbeing.

I would recommend the program to anyone because it helps people understand others better.

I would recommend the program to others, especially to those in the field of cosmetology.

One participant expressed that the program is very beneficial, hence, he/she would recommend it. However, the program is not for everyone:

I feel that while the training works for those who interact verbally with clients like barbers, it might not be as relevant for professionals who have non-verbal interactions, like massage therapists.

One participant suggested ways of networking and partnerships with other graduates from the program:

I suggest organizing quarterly reunions for graduates to maintain connections and support.

Table 4. Themes and accompanying quotes from licensed professional interviews

Theme	Quotes
Program interaction	<p><i>I found the training very helpful... It increased my awareness of how to communicate effectively with clients It gave me confidence in offering support and fostered a healing exchange where vulnerability and empathy could thrive.</i></p> <p><i>They are all good. All the information was helpful, particularly the therapist relationship aspects. The information was beneficial.</i></p> <p><i>The training was very helpful, especially in opening up dialogue or communication with clients I appreciate the training session on asking my clients about suicide.</i></p> <p><i>The training was very helpful, especially the self-evaluation part Which allowed me to better identify when others might need therapy or counseling'.</i></p> <p><i>The training was very helpful. It gave me more insight and knowledge especially in my role as a doula. This helped me better interact with my clients in recognizing mental health concerns.</i></p> <p><i>The training was helpful. It gave me more confidence in interacting with my clients. It made discussing mental health less difficult and applicable in my day-to-day work. There's a significant improvement in my ability to supply resources to clients, which was something I initially struggled with'.</i></p>

	<p><i>'The training was very helpful, providing me better knowledge of mental health and enabling me to have easier and more meaningful interactions with clients... I felt more equipped to offer resources to clients making their interactions more effective and focused on providing support.</i></p> <p><i>The training was very helpful in encouraging me to see things from other perspectives, allowing me to engage with clients thoughtfully... It helped me understand how mental illness affects the community and improve their ability to respond and support clients without enabling unhealthy behaviors.</i></p> <p><i>I noted that my work as a massage therapist differs from professions like cosmetologists and barbers, as clients typically come in to relax and have minimal verbal interaction. The training helped me offer resources like the Wellbeing Partners, but I acknowledged the limited opportunity for deeper conversations.</i></p> <p><i>The training made it easier for me to assist clients with mental health needs, creating a comfortable space for them to talk... It helped me feel more confident giving resources to clients, even in personal and family interactions.</i></p>
Difficult conversations	<p><i>I feel more confident handling difficult conversations now. I have created a safe, calming space for clients to express vulnerability, allowing for more productive discussions. The training helped me notice clients' emotional changes and respond appropriately.</i></p> <p><i>I listen more to them and try to understand their needs to provide the needed resources.</i></p> <p><i>It was very easy for me to start conversation, which also allowed my clients to open up more. I used resources like therapy sessions and group counseling for more support.</i></p> <p><i>I faced many crises situation in the barbershop. I used the training to introduce discussions about mental health and suggest resources outside of the barbershop for those struggling.</i></p> <p><i>I now find it easier to have open and natural conversations. I approach difficult situations by assessing the severity of the issue and using appropriate resources, if necessary, like contacting authorities or family members. I currently use this suicide prevention hotline and refer to my training material like resource cards and documents for additional assistance.</i></p> <p><i>I feel difficult conversations are now easier as the training provided me with tools for addressing mental health concerns. I offer client resources like mental health therapy and support options when necessary. I use resources like resource cards and suicide prevention.</i></p> <p><i>I now handle difficult conversations with more caution, helping clients take accountability and think critically. I focus on offering support without</i></p>

	<p><i>judgment, using open-ended questions to encourage clients to reflect on their decisions.</i></p> <p><i>I'm more mindful now, using a guided approach to listen and respond with intent, rather than relying on their personal biases or jumping into solutions too quickly.</i></p> <p><i>Handling difficult conversations has become smoother and more effective. I now offer clients a reference card and explain that it's okay to talk to someone, using resources shared during the training.</i></p> <p><i>I helped a client, and her mother recognized the client's anxiety. I took steps such as scheduling a doctor's visit and considering medication. While the situation was ongoing, the conversation laid the groundwork for further support.</i></p> <p><i>The training refined my existing approach, making me feel more comfortable checking in with clients when emotional shifts are observed. I now feel more confident recognizing signs of distress and offering support.</i></p> <p><i>I did not specify any particular tools from the training, but I used my general knowledge of de-escalation techniques and offering resources as needed during conversations with clients.</i></p>
Cultural relevance	<p><i>I resonate with the training's emphasis on trauma, connecting it to my personal cultural experiences as a person of color. I found the training approach to dealing with trauma, especially in Black communities, particularly meaningful.</i></p> <p><i>I think the aspect of mental health in the black community stood out for me.</i></p> <p><i>I relate with focus on substance abuse. I recognize it as a significant issue in the community.</i></p> <p><i>Culturally and I relate to the PTSD session of the training, especially in relation to trauma in our community.</i></p> <p><i>Culturally, I relate to the training focusing on how to approach mental health discussions within minority communities, especially in breaking down barriers and overcoming stereotypes around therapy and mental health.</i></p> <p><i>Culturally, I relate with the training discussion on how black community often avoids discussing mental health and how important it is to break down these barriers.</i></p> <p><i>Culturally, it relates with sessions led by Black licensed mental health therapist who provided additional resources for black mental health, which resonates with me.</i></p>

	<p><i>I connected with how mental health issues are often ignored in the Black community. I appreciate the training's focus on breaking down these barriers, especially in discussing mental health conditions like anxiety and depression.</i></p> <p><i>I resonate most with the cultural aspect of the training, especially Alicia Suttles' presentation that aligned mental health concepts with real-life experiences. I also felt that while the training used Black actors in videos, the storyline didn't connect with my own cultural context, leading to some disengagement.</i></p> <p><i>I felt most connected to the parts of the training where Black instructors were involved. I found these sessions more relatable and appreciate how the trainers spoke directly to the community's cultural context.</i></p>
Program concern	<p><i>I didn't have many concerns about the training itself, but I feel that there are logistical challenges, such as technology issues. I feel there are areas for potential for growth in the program for future improvements.</i></p> <p><i>I did not question any part of the training.</i></p> <p><i>I questioned the part of separating the lecture and practical session of the training, a few combining boards on the same day would be more beneficial. I questioned the drug and alcohol use in the training because it is not in all instances of drinking or substance use are linked to mental health issues.</i></p> <p><i>I do not question any part of the training and felt it was consistent with my previous experience in similar programs.</i></p> <p><i>I do not question any part of the training as they all align with my belief and how mental health situations should be handled'.</i></p> <p><i>Personally, I think the part of the training that suggests that I could diagnose mental health conditions, I really find it challenging to understand the full scope of diagnosis.</i></p> <p><i>I questioned the presence of a white therapist during a session but later realized that the therapist's role was helpful. The therapist listened without judgment and supported the group's process.</i></p> <p><i>I questioned the approach of continually probing clients during conversations, especially if the client had already shown signs of being finished with the discussion. I felt that once the client no longer wanted to share, it was appropriate to offer resources and end the conversation.</i></p> <p><i>I was curious about the mental health book provided during the training, particularly when it mentioned that participants cannot diagnose conditions. I feel like the book made me want to learn more and even consider further studies.</i></p>

<p>Program satisfaction</p>	<p><i>I strongly recommend the training, encouraging both mental health professionals and the general public to take part. I believe it offers valuable skills for connecting with and supporting others.</i></p> <p><i>Yes, I will always recommend the training to other people so that they can listen and communicate better with other people struggling with mental health.</i></p> <p><i>Yes, I would always recommend the training, especially for service providers who need tools to help clients open up and access resources.</i></p> <p><i>Yes, I would recommend this program because it is very important especially for barbers who interact with many people and absorb different emotions. Also, the need for mental health awareness and self-care.</i></p> <p><i>Yes, I would recommend the training to others, especially to help service providers gain knowledge on how to address mental health issues and support people who may be struggling but don't have anyone to reach out to.</i></p> <p><i>Yes, I will always recommend the program because it is an essential resource for service providers to help reach and support communities in need.</i> <i>Yes, I would recommend others to join the training because of its importance, especially to those in leadership positions.</i></p> <p><i>I would recommend the program to others, especially to those in the cosmetology field. I believe it's important for service providers to be equipped with mental health knowledge to better support clients. Having the right mindset and knowledge helps avoid causing harm.</i></p> <p><i>I would recommend the program, especially if there were two tracks tailored for different professions. I felt that while the training works for those who interact verbally with clients like cosmetologists and barbers, it might not be as relevant for professionals who have more non-verbal interactions like massage therapists.</i></p> <p><i>I would recommend the program to anyone knowing that it helps people understand others better, especially in a community setting where mental health is often a significant issue. It made it easier to help people in a meaningful way.</i></p>
<p>Client survey</p>	<p><i>I think the survey was easy to understand but some clients might hesitate to complete it due to privacy concerns. I think following up with clients to ensure the survey is completed and understood was my issue.</i></p> <p><i>Sometimes the survey link does not work for clients. I will suggest improving accessibility and making it easier for clients to complete.</i></p> <p><i>I referred clients to the survey but didn't personally follow up or review the feedback. I didn't hear back from any of their clients regarding the survey.</i></p>

	<i>I felt the survey was convenient, as one of my clients completed it while sitting in the chair. However, I was unsure about all the questions and noted that some clients might not take the survey seriously or forget about it.</i>
Compensation	<p><i>The money paid was OK and sufficient for the time.</i></p> <p><i>The payment was fair and well appreciated unlike other training that did not offer a bonus.</i></p> <p><i>The payment was fair because I would have participated without compensation as I was very eager to participate in the training.</i></p> <p><i>The pay was fair and well appreciated. I would have participated even without the payment.</i></p> <p><i>The pay was fair and exceeded my expectation since I was not even expecting to be paid for the training.</i></p> <p><i>The payment was fair since I was not expecting any payment before joining the training.</i></p>
Program recommendations	<p><i>I suggest organizing quarterly reunions for graduates to maintain connections and support. I would also recommended hosting events that include recognition of awards, fostering engagement and accountability in the program.</i></p> <p><i>I would recommend the program to others, especially to those in the cosmetology field. I believe it's important for service providers to be equipped with mental health knowledge to better support clients. I think that having the right mindset and knowledge helps avoid causing harm.</i></p> <p><i>I would recommend the program, especially if there were two tracks tailored for different professions. I feel that while the training works for those who interact verbally with clients (like cosmetologists and barbers), it might not be as relevant for professionals who have more non-verbal interactions, like massage therapists.</i></p> <p><i>I would recommend the program to anyone because it helps people understand others better, especially in a community setting where mental health is often a significant issue. It made it easier to help people in a meaningful way'.</i></p>

Recommendations

The recommendations below are based upon the evaluation findings and relevant recommendations from licensed professionals who participated in the program. Some of these recommendations are repeated from the previous evaluation report because the recommendation was shared again in this cohort or the data demonstrated the need:

1. **Consider inviting past cohort participants to attend the current cohort.** Many of the licensed professionals in this cohort mentioned how they would love to interact with past cohort participants to provide their insights and experiences leveraging the mental health first aid training in real time.
2. **Consider asking additional interview questions for the next cohort.** In Appendix 1, you will find the interview questions that were asked of licensed professionals after the program ended. The questions highlighted in yellow were the questions asked. The non-highlighted questions were not asked to be efficient with time. However, it may be beneficial to consider asking these questions for future cohorts to have better understanding of the process to support future outcome evaluations. Refining the process can help support better outcome data collection to establish the effectiveness of the program.
3. **Consider collecting more client surveys.** Majority of the licensed professionals mentioned that client surveys were useful, but accessibility issues and the ease of participation could be improved. For example, providing a larger QR code or ensuring the survey is completed immediately after the service could increase client participation. Adding an incentive like a small gift card instead of entering clients into a drawing could further encourage participation and feedback, ensuring that more surveys are completed. This will help with conducting more detailed analyses on the survey data leading to further program improvements and insights regarding participant skill building and client mental health status. Additionally, some licensed professionals expressed that clients may not always remember to fill out the surveys, so a follow-up protocol for licensed professionals could help gather more data.
4. **Continue having a culturally matched facilitator.** Majority of the participants noted the importance of having culturally relevant facilitators. Also, participants connected better with the Black therapist during the training, appreciating the cultural alignment. Having a facilitator who reflected the community they are working with increased engagement and made the program more relatable, which could likely improve the effectiveness of the training.
5. **Consider providing follow-up or booster sessions.** Several licensed professionals emphasized that continuous support and follow-up are essential for reinforcing what was learned during the program. One licensed professional recommended having quarterly “reunions” to keep the participants engaged and accountable. Providing ongoing support could help address any challenges encountered by participants applying skills learned during the training in their professional environments. This can also ensure the material is retained.
6. **Consider providing more content around substance abuse and alcohol misuse.** Barbers expressed an interest in learning more about substances and alcohol abuse. Some licensed professionals indicated that substance abuse and alcohol misuse are prevalent issues in the communities they service. Including more focused content on how to address substance abuse in the context of mental health provides a more comprehensive program. It also better equips licensed professionals to help clients who are struggling with substance abuse or misuse. This would also align with the need for tailored support for the unique challenges encountered by individuals in their communities.
7. **Consider changing the program format.** One licensed professional stated the current program format might not be suitable for everyone, particularly for those with more non-verbal client interactions, such as massage therapists. One licensed professional suggested that the format could be adjusted by introducing two tracks: one for professionals who engage verbally with clients (e.g., barbers) and another for those with more non-verbal interactions (e.g., esthetician). This would help accommodate diverse professional needs within the cohort, enhancing relevance and engagement.

8. **Consider adding content about local mental health disparities.** Most barbers and stylists noted that mental health issues are often not discussed, particularly in Black communities. Therefore, including more specific content on local mental health disparities would raise awareness of the unique challenges within their communities. This could also help support ways in addressing common issues like trauma, substance abuse, and the stigma around mental health, making the program more relevant to the specific needs of the community.

Conclusion

Overall, the *Adult Mental Health First Aid* training has a transformative impact on licensed professionals, preparing them with the skills to support mental health concerns in their clients. All licensed professionals reported improved communication skills, enabling them to create safe, supportive spaces for clients to discuss sensitive topics. Most licensed professionals now feel more confident in offering guidance and referring clients to mental health resources after participating in the program.

In addition, the program has strengthened relationships between service providers and clients, fostering trust and support. Licensed professionals also described how they can successfully recognize signs of mental health crises and substance abuse, which is crucial in their community. The program has helped many licensed professionals break down the mental health stigma in the Black community and opened up conversations in environments where such topics were previously not discussed.

The community benefits from these trained professionals who serve as accessible points of support for mental health, offering early intervention and helping clients seek professional care. Moving forward, follow-up sessions, continued use of culturally aligned facilitators, and more content on substance abuse would further enhance the program's impact.

In conclusion, the program has significantly improved the ability of licensed professionals to contribute to mental wellness in their communities, creating lasting positive changes both for individuals and the broader community.

Appendices

Appendix 1: Interview Questions

Head to Heart Evaluation Interview Questions

1. What has your experience been like as a mental health advocate?
2. How has the process been for sharing resources? Referring clients?
3. How deep are your conversations with clients regarding their personal issues or situations?
 - a. *[If not much interaction]* why do you believe you're not having deep conversations with your clients?
4. How helpful was the Adult Mental Health First Aid training in interacting with clients?
 - a. Which part of the training has been most helpful in your interactions?
5. How prepared did you feel to talk with you clients after the training?
 - a. *[If they did not feel prepared]* Why do you feel this way?
6. How have you handled difficult conversations with your clients since participating in the training?
 - a. How was the conversation resolved?
 - b. What did you use from your training during this conversation if anything?
7. How often have you revisited the Mental Health First Aid training manual or other materials?
 - a. *[If they have rarely or never used the manual or other materials since training]* Why haven't you revisited the manual or other materials since the training?
8. How was the process promoting the survey to your clients?
 - a. What did you do to promote the survey?
 - b. What would you change about promoting the survey?
9. Which part of the Mental Health First Aid training did you culturally relate with the most?
10. A part of your training was also with a local mental health provider, Ms. Janae Donaldson. What part of your training with her did you culturally relate with the most?
11. What part of the training did you question the most?
12. What would you like to see differently in the training content?
13. Would you recommend others participate in this program? Why or why not?
14. Please recall you were paid for your time to participate in the training. How did you feel about the amount given to you?
 - a. Was the amount fair?
 - i. *[If not]* What would be a fair amount?
15. What other thoughts or recommendations would you like to share with me today?

Appendix 2: Client Survey (Screenshots of first two pages)

Head to Heart Evaluation

Thank you for taking this survey!

Your responses to the following questions will help us understand how to improve the Head To Heart program. We also want to better understand the communication between your barber/stylist and you. Please answer the questions. There are no right or wrong answers.

At the end of the survey, we will ask for your name and email address to be entered into a drawing for a \$10 Amazon gift card. If you are interested in having your name in the drawing please be sure to share your name and email so we can contact you if you're chosen as one of the lucky winners!

* 1. During your last visit, did you speak with your barber/stylist about personal situations (e.g., family, children, relationships, etc.)?

☐ No

☐ Yes



Next

3. Thinking about your last visit to your barber/stylist, please tell us whether you strongly agree or strongly disagree with the following statements:

My barber/stylist helped me by:

	Strongly disagree	Disagree	Agree	Strongly agree
Thinking through the situation(s) with me.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Giving me good advice about the situation(s).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Actively listening to me talk about the situation(s).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Reassuring me about the situation(s).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Expressing concern about the situation(s).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Offering assistance with the situation(s).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pointing out changes in my behavior because of the situation(s).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Asking me if I'm okay.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Making me feel welcomed to talk about my situation(s).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Confirming my feelings about the situation(s).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

4. Did your barber/stylist provide you with mental health resources?

☐ No

☐ Yes



Appendix 2: Client Survey

Head 2 Heart Program Survey

Directions: Please answer the following questions. There are no right or wrong answers. We want to better understand the communication between your licensed professional and you.

Mental Health Support & Resources

1. During your last visit, did you speak with your licensed professional about personal situations (e.g., family, children, relationships, etc.)?

☐ No

☐ Yes

2. I felt comfortable discussing my personal situation(s) with my licensed professional?

☐ Strongly disagree (**Skip to Question 3**)

☐ Disagree (**Skip to Question 3**)

☐ Agree (**Skip to Question 5**)

☐ Strongly agree (**Skip to Question 5**)

☐ Prefer not to answer (**Skip to Question 5**)

3. Why didn't you feel comfortable discussing your personal situation(s) with your licensed professional?

[OPEN ENDED QUESTION] _____

4. What would make you feel more comfortable discussing your personal situation(s) with your licensed professional?

[OPEN ENDED QUESTION] _____

Thinking about your last visit to your licensed professional, please tell us whether you strongly agree or strongly disagree with the following statements:	Strongly disagree	Disagree	Agree	Strongly agree
My licensed professional helped me by:				
5. Thinking through the situation(s) with me.	1	2	3	4
6. Giving me good advice about the situation(s).	1	2	3	4

7. Actively listening to me talk about the situation(s).	1	2	3	4
8. Reassuring me about the situation(s).	1	2	3	4
9. Expressing concern about the situation(s).	1	2	3	4
10. Offering assistance with the situation(s).	1	2	3	4
11. Pointing out changes in my behavior because of the situation(s).	1	2	3	4
12. Asking me if I'm okay.	1	2	3	4
13. Making me feel welcomed to talk about my situation(s).	1	2	3	4
14. Confirming my feelings about the situation(s).	1	2	3	4

15. Did your licensed professional provide you with mental health resources?

☐ No (**Skip to Question 24**)

☐ Yes

16. What resources did your licensed professional give you?

[OPEN ENDED QUESTION] _____

17. I used the mental health resources/materials given to me by my licensed professional.

☐ Strongly disagree

☐ Disagree

☐ Agree (**Skip to Question 21**)

☐ Strongly agree (**Skip to Question 21**)

☐ Prefer not to answer (**Skip to Question 21**)

18. Why didn't you use the mental health resources/materials given to you by your licensed professional?

[OPEN ENDED QUESTION] _____

19. I plan to use the mental health resource/materials within the next 3 months.

☐ Strongly disagree (**Skip to Question 20**)

☐ Disagree (**Skip to Question 20**)

- ☐ Agree (**Skip to Question 24**)
- ☐ Strongly agree (**Skip to Question 24**)
- ☐ Prefer not to answer (**Skip to Question 24**)

20. Please list the reason(s) why you do not plan to use the mental health resources/materials later?

[OPEN ENDED QUESTIONS] _____

21. The mental health resources/materials given to me by my licensed professional were helpful.

- ☐ Strongly disagree (**Skip to Question 22**)
- ☐ Disagree (**Skip to Question 22**)
- ☐ Agree (**Skip to Question 24**)
- ☐ Strongly agree (**Skip to Question 24**)
- ☐ Prefer not to answer (**Skip to Question 24**)

22. Why weren't the resources helpful to you?

[OPEN ENDED QUESTION] _____

23. What resource(s)/materials would be helpful to receive?

[OPEN ENDED QUESTION] _____

Demographic Questions

24. What is your age? _____

- ☐ Prefer not to answer
- ☐ Don't know

25. What is your gender?

- ☐ Male
- ☐ Female
- ☐ Transgender Female
- ☐ Transgender Male

⁵☐ Non-Binary

⁹⁷☐ Prefer not to answer

26. What race do you most identify with? (CHECK ALL THAT APPLY)

¹☐ Black/African American

²☐ White

³☐ Asian/Pacific Islander

⁵☐ Two or more races

⁶☐ Native American/Alaska Native

⁷☐ Other (please specify) _____

⁹⁷☐ Prefer not to answer

⁹⁸☐ Don't know

27. Are you Hispanic, Latino/a, or of Spanish origin?

⁰☐ No

¹☐ Yes, Mexican, Mexican American

²☐ Yes, Puerto Rican

³☐ Yes, Cuban

⁴☐ Yes, another Hispanic, Latino/a, or Spanish origin

Please write answer (examples: Columbian, Dominican) _____

⁹⁷☐ Prefer not to answer

⁹⁸☐ Don't know

28. What is your home zip code? _____

⁹⁷☐ Prefer not to answer

⁹⁸☐ Don't know

29. In 2022, what was your total family combined income before taxes for you and the family members you live with (e.g., wages, salaries, commissions, bonuses, tips, or self-employment)?

¹☐ Below \$25,000

Head to Heart

- ☐ ₂ \$25,000-\$49,999
- ☐ ₃ \$50,000-\$74,999
- ☐ ₄ \$75,000-\$99,999
- ☐ ₅ \$100,000-\$124,999
- ☐ ₆ \$125,000-\$149,999
- ☐ ₇ \$150,000-\$174,999
- ☐ ₈ \$175,000-\$199,999
- ☐ ₉ \$200,000 or more
- ☐ ₉₇ Prefer not to answer
- ☐ ₉₈ Don't know

30. Do you have health insurance?

- ☐ ₀ No
- ☐ ₁ Yes
- ☐ ₉₇ Prefer not to answer
- ☐ ₉₈ Don't know

31. Overall, how would you rate your current mental health?

- ☐ ₁ Excellent
- ☐ ₂ Very good
- ☐ ₃ Good
- ☐ ₄ Fair
- ☐ ₅ Poor
- ☐ ₉₇ Prefer not to answer
- ☐ ₉₈ Don't know