



VA OFFICE OF RESEARCH & DEVELOPMENT CORE IMPACT: SPRINT

Key Highlights from the Consortia of Research

- IMPACTS
- PRIORITIES
- PLANNING AWARDS
- PROMISING PRACTICES

The Suicide Prevention Research Impact Network Consortium of Research ([SPRINT CORE](#)), funded by the Office of Research and Development's Health Systems Research ([HSR](#)) and Clinical Science Research and Development ([CSR](#)), is a national network of approximately 440 VHA researchers and operational partners who collaborate with VA's Office of Suicide Prevention to identify research priorities, facilitate development of innovative research proposals through a planning award mechanism and field-based meetings, and foster professional development among suicide prevention researchers. Other SPRINT partners include the Office of Rural Health, the National Center for PTSD, the National Center on Homelessness Among Veterans, and VA's LGBTQ+ Health Program.

Supporting ORD

SPRINT leads Steven Dobscha, MD, and Brian Marx, PhD, are working closely with Joseph Constans, PhD, Senior Program Manager for Suicide Prevention, to prepare for the implementation of the [Suicide Prevention Actively Managed Portfolio](#) (AMP)—a focused area of study that aligns with ORD's priority research areas. The Suicide Prevention AMP will interact with clinical and operational partners, identify research priorities, bring together researchers and/or other stakeholders to accomplish goals, and establish agile funding mechanisms when required. Drs. Dobscha and Marx serve as non-voting members on the Executive Committee for the Suicide Prevention AMP.

SPRINT Priorities

SPRINT develops its priorities in collaboration with partners. Priorities have been informed by:

- Knowledge of evidence gaps, identified by VA's [Evidence Synthesis Program](#).
- Portfolio analysis using SPRINT's Active Projects Inventory, which includes ORD- and operations-funded projects.
- Operational and national VA priorities.

SPRINT's FY2024 priorities are:

Lethal means safety

- Use innovative approaches for messaging/communications to reduce access to lethal means during periods of increased risk.
- Understand and address Veterans' firearm-owning culture.

Effectiveness of training

- Promote studies that examine the effectiveness of training programs directly related to suicide prevention for clinicians and staff, Veterans, families, or other gatekeepers.

Engagement

- Engage community partners and engage in community settings to enhance suicide prevention.
- Engage with Veterans' family, friends, and peers.
- Engage Veterans not currently engaged in VA or with healthcare outside of VA.

Interpersonal violence

- Understand how interpersonal violence (IPV) affects the suicide risk of IPV victims.
- Develop interventions that address emotional regulation.

Precision medicine

- Examine differential treatment response and treatment moderators.
- Understand risk fluctuation over time; match specific treatments to level of risk.
- Develop precision medicine models and tools that incorporate personal characteristics and/or social determinants of health.

SPRINT Planning Awards

SPRINT's Planning Award process gives preference to projects that address priority areas while also supporting suicide prevention research and suicide prevention research careers. Planning Award projects accelerate the transition of innovative and promising research ideas into full-scale, federally funded research or operational projects designed to improve the delivery of suicide prevention services within and outside VA. SPRINT Planning Award projects include:

Modeling the pathway between autonomic function, emotion regulation, and suicide risk in Veterans. This project focuses on the priority area of engaging Veterans who are not currently engaged in care by contributing to the development of a mobile intervention that integrates self-reporting of emotional states and changes in heart-rate variability. The project aims to characterize the predictive relationship between emotional regulation (ER) and suicidal thoughts and behaviors (STB) over time and determine if heart-rate variability (HRV) is a mechanism that partially explains the relationship between ER and STB. Researchers will also identify the impact that chronicity of PTSD symptom severity has on the proposed relationship between ER, HRV, and STB.

PI: Sabra Inslight, PhD

Developing an exercise promotion intervention for high-risk women Veterans. This project will develop a group psychological skills training intervention to promote exercise and decrease suicidal behaviors among women Veterans at high risk for suicide—a high-priority population. The project aims to establish and work with an advisory group of VA providers and staff who are experienced in women's healthcare and/or suicide prevention, along with Veteran stakeholders. Researchers also will determine exercise perceptions and needs among high-risk women Veterans.

PI: Sarah Shue, PhD

Quantifying heterogeneity of suicidal Veteran inpatients using individual causal models: A precision medicine approach to suicide prevention using real-time high-density data. This study augments the ongoing VA RR&D-funded study, "Effects of Neuromodulation and Cognitive Training for Suicide in Veterans (ENACTS)," which evaluates a novel transcranial direct current stimulation and executive function training intervention to reduce suicidal thoughts and behaviors (STBs) among suicidal Veteran inpatients. The current study will strengthen ENACTS's ability to characterize the individual heterogeneity in STB risk and treatment response of suicidal inpatient Veterans by collecting high-density data on STBs and related cognitive, psychological, and physiological factors.

PIs: Casey Gilmore, PhD; Carol Yu, PhD

Women Veterans' experiences with VA's enhanced suicide prevention care. This study is collecting input from women Veterans on their experiences with and perspectives on VA's enhanced suicide prevention care. Researchers will focus on women Veterans' interactions with suicide prevention teams/suicide prevention coordinators, their comfort with how this care met their needs, and their perspectives on improving care for women-identifying Veterans with suicide risk. Results from this study will help to enhance current care and ensure future care is inclusive of women Veterans.

PI: Lauren Krishnamurti, PhD

The Coaching into Care-Suicide Prevention (CIC-SP) intervention: A promising lethal means safety intervention for family members of Veterans at risk for suicide.

This project aims to test a coaching intervention, CIC-SP, that helps family members have discussions with Veterans about suicide and securing lethal means. The intervention uses the informational website WorriedAboutaVeteran.org, developed by a consortium of VA clinical researchers, the New York State Governors Challenge, and others.

Co-PI: Steven Sayers, PhD

Study to Assess Risk and Resilience in Service—Longitudinal Study (STARRS-LS) Researcher-in-Residence Program. This project aims to examine legal and administrative events within the context of the military-to-civilian transition, as legal difficulties and limited social support are common among military personnel at risk for suicide. The STARRS-LS dataset is uniquely suited to overcome limitations examining military-to-civilian transition due to its longitudinal assessment of personnel before and following military discharge.

PI: Emily Edwards, PhD

Study to Assess Risk and Resilience in Service—Longitudinal Study (STARRS-LS) Researcher-in-Residence Program.

This project aims to examine the association between PTSD symptom clusters, primarily hyperarousal symptoms, and firearm ownership, storage, and carrying practices. The longitudinal nature of the STARRS-LS data set will allow for analyses predicting new firearm acquisition over time, as well as changes in firearm carrying and/or storage practices.

PI: Claire Houtsma, PhD

Suicide Prevention Research Impact Network—Highlights

SPRINT Impacts

SPRINT works closely with partners and supports researchers to accelerate impactful VA suicide prevention research and advance VA's suicide prevention policies and practices.

Data Curation

- SPRINT is integrated with [VA's Center for Harmonizing and Improving Interventions to Prevent Suicide](#) (CHIIPS), a clinical resource center that strives to advance a precision medicine approach to suicide prevention research. CHIIPS features content hubs on predictive analytics, biomarkers, social determinants, interventions, and more, and provides resources for VA's suicide prevention research community, including a dataset repository with several different datasets that are available to suicide prevention researchers for secondary analyses.
- SPRINT assisted with the development of the [Suicide Prevention Trials Database](#), a publicly available database of study-level data from published trials of suicide prevention approaches. The database can be used for systematic reviews or clinical practice guidelines, identifying research gaps, and serving as an information source for clinicians, patients, policymakers, and Veterans' family members.
- SPRINT administers a [Researcher in Residence](#) program that allows VA investigators to examine predictors of suicidality and related outcomes using data collected as part of the Study to Assess Risk and Resilience in Service—Longitudinal Study.

Addressing Key Researcher Needs

- SPRINT provides expert information through its [website](#), which houses [Measurement Resources](#), [Risk Management Resources](#), [Implementation Science Resources](#), and the [Military Suicide Research Consortium \(MSRC\)](#). The site also includes [SPRINT's Active Projects Inventory](#) (updated biannually and searchable), as well as the [MSRC Common Database](#), a valuable resource for a variety of partners and collaborators.
- In addition, SPRINT created a [Veteran Engagement Council](#) (VEC), which gives input to SPRINT leadership and to investigators developing research projects. The VEC recently provided input for the VA/DoD Clinical Practice Guideline for Suicide Prevention Workgroup and to the Suicide Prevention Actively Managed Portfolio research prioritization process.

Addressing Key Needs for Partners and Collaborators

SPRINT sponsored **two field-based meetings** focused on lethal means safety in FY2023. The meetings were attended by lethal means safety researchers, operational partners, and other subject matter experts. Resulting impacts include a planned journal supplement on firearms safety in the elderly; development of several pilot projects; establishment of consultant/contractor roles on two new projects; and initiation of a scoping review of the literature on measurement related to firearm safety.

Promising Practices

SPRINT-supported projects have helped spread programs, datasets, evaluations, and web-based and mobile trainings that have impacted Veterans' care, experience, and outcomes. Examples include:

- **Impact of VA-issued telehealth tablets on suicide-related hospitalizations and suicide deaths among at-risk rural and urban Veterans.** Tablets were associated with a 36% reduction in suicide-related emergency department visits observed for rural Veterans. (Published in [JAMA Network Open](#).)
- **Developing a mobile intervention to reduce suicidal cognitions in Veterans.** Participants reported that they found the treatment helpful and easy to use. They experienced large improvements in perceived self-efficacy to control suicidal thoughts, perceived burdensomeness, and unlovability, and medium improvement in “unsolvability”—the belief that one's problems are unsolvable. (Results not yet published.)

About the Consortia of Research (COREs)

HSR's [COREs](#) are networks that foster collaboration among researchers across the country and work to accelerate progress on VA research priority areas. COREs strengthen HSR's connections with VA partners, fund rapid pilots, and communicate research results to speed efforts that lead to measurable improvements in Veterans' care.