

# Results of SPRINT Needs Assessment

December 20, 2019



## Mission

VA HSR&D recently funded a Consortium of Research (CORE) on suicide prevention (SP). The mission of the Suicide Prevention Research Impact NeTwork (SPRINT) is to accelerate VA suicide prevention research to improve care and reduce suicide behaviors among Veterans. One of SPRINT's main objectives is to develop and sustain a collaborative network of VHA and non-VHA researchers dedicated to conducting high-quality, high-priority, and high impact health services research.

## Purpose

Using a needs assessment conducted in Fall, 2019, the SPRINT Core solicited feedback from current and aspiring suicide prevention researchers in VA. The needs assessment (Appendix A) included questions about research areas of interest, experience and expertise, and gathered input for future areas of collaboration, networking, and accessibility of information within the field. The needs assessment was distributed to currently and formally funded HSRD researchers, as well as research leadership and select stakeholders. Due to the scope of this current assessment, the needs assessment was housed on the VA intranet and, thus, could only be accessed by those with a VA affiliation.

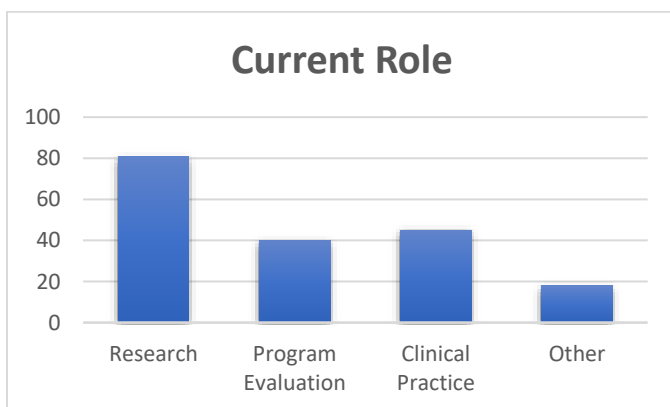
The following data were collected from 85 respondents between October 15<sup>th</sup>, 2019 and November 22<sup>nd</sup>, 2019.

## Needs Assessment Objectives

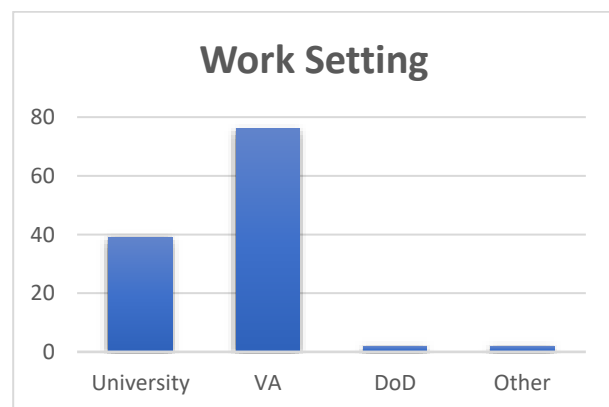
- 1) Identify individuals conducting, or interested in conducting, VA-relevant suicide prevention research;
- 2) Understand the current work and expertise of those working in the field; and
- 3) Understand the needs and preferences of those carrying out this work to reduce barriers within the field.

## Scope and Funding

The majority of respondents work in research, program evaluation, clinical practice, and to a lesser extent, have roles such as administrative or supervisory, education, and program administration. Most respondents work in VA or a university; however, 4 respondents represent the Department of Defense (DoD) and community-based work settings.

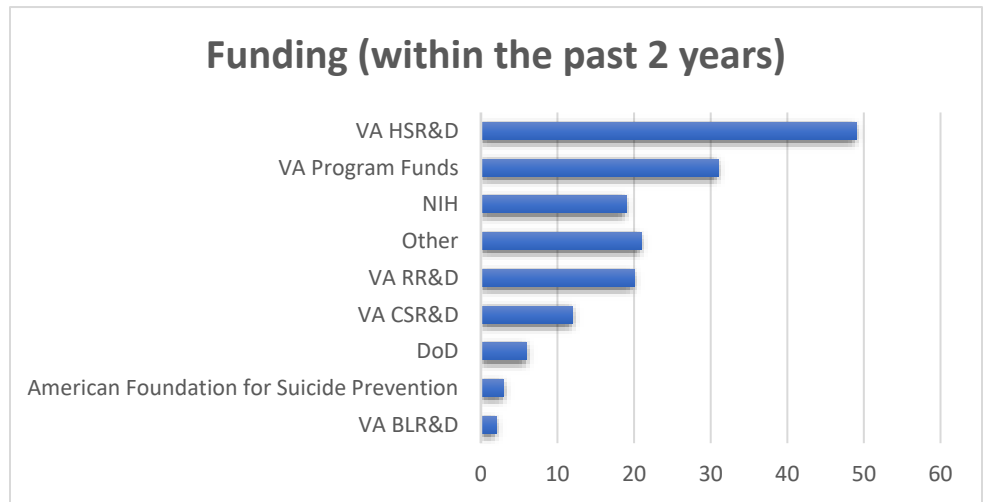


\*participants may select more than one answer



\*participants may select more than one answer

Respondents received research funds over the last two years from a variety of funding sources, most frequently through VA HSR&D funds (n = 49), as well as VA Program funds (n = 31). Other funding sources include NIH, private foundations, local funding through other VA channels, or universities.

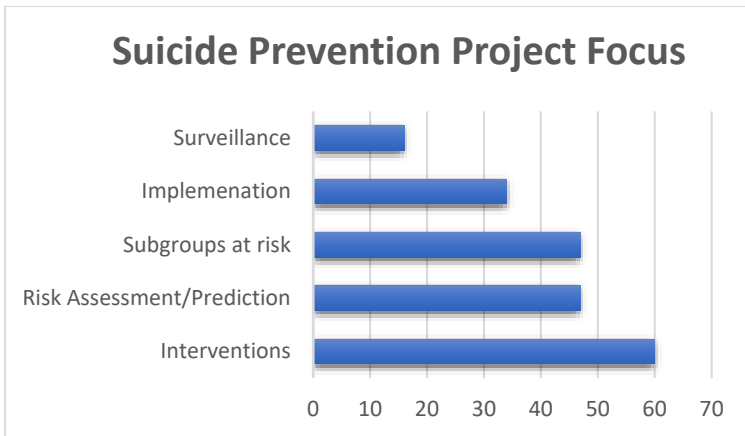


\*participants may select more than one answer

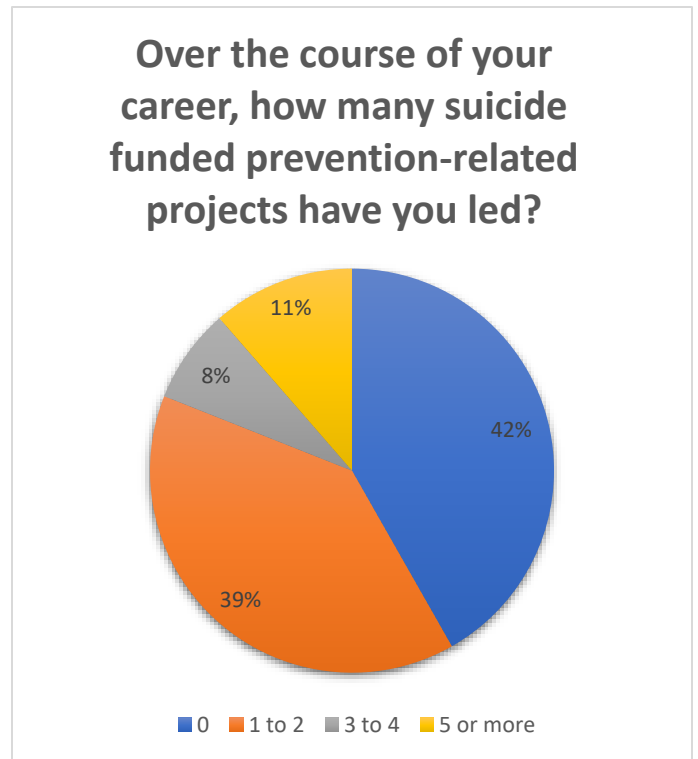
### Projects and Focus

Forty-two percent of respondents have not led a suicide prevention research project, and 39% have led one or two projects. Nineteen percent have led 3 projects or more. Projects most often focus on suicide prevention interventions, followed by suicide prevention risk assessment/predication and suicide prevention projects focused on sub-groups at risk (e.g. women, transitioning Veterans, substance use disorders, and traumatic brain injury).

### Over the course of your career, how many suicide funded prevention-related projects have you led?



\*participants may select more than one answer



### Expertise

Respondents' expertise was queried by topic, subpopulations, and methods. Expertise was either within the suicide prevention field, or in a related field, and respondents could select multiple responses. Commonly selected responses were:

- Most common topic areas: post-traumatic stress disorder, depression, and substance use disorders
- Most common subpopulations: Veterans, those with psychological trauma, substance use disorder
- Most common methods: clinical trials, qualitative methods, and implementation science

### Barriers and Priorities

The SPRINT Core is interested in assessing barriers and priorities in suicide prevention to identify issues or gaps in investigators' ability to conduct or complete research or evaluation projects, as well as areas to funnel more resources.

The most prevalent barrier is **ascertaining appropriate outcomes** (e.g. suicide deaths, suicidal ideation), followed determining appropriate metrics to demonstrate efficacy or effectiveness, and grant reviewers' understanding of methods or the suicide prevention field.

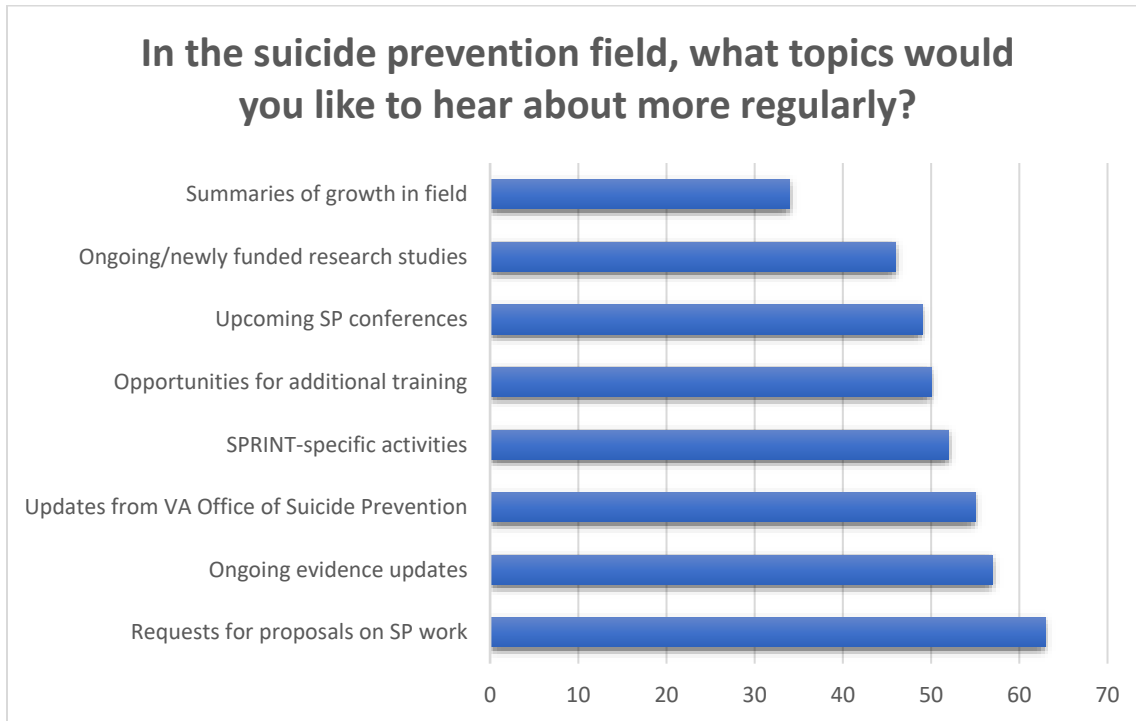
<b>Barriers to Research</b>	<b>n</b>	<b>%</b>
Ascertaining appropriate outcomes (e.g. suicide deaths, suicidal ideation)	28	39
Determining appropriate metrics to demonstrate efficacy or effectiveness (i.e. in clinical trials)	25	36
Grant reviewers lacking sufficient understanding of your methods or the SP field	25	36
Funding caps on individual projects	25	35
Lack of institutional buy-in or support (e.g. protected time, space)	23	33
Access to specific populations (e.g. psychiatric inpatient, women, LGBT)	21	30
Lack of research partners (either as co-investigators or national office partners such as Office of Mental Health and Suicide Prevention)	21	30
Year limits on individual projects	21	30
Access to national or local government datasets	20	29
Identifying collaborating investigators with needed expertise or skills	18	25
Access to DoD datasets	17	24
Institutional Review Board concerns regarding risk	17	24
Access to VA datasets	16	23
Resistance/hesitance from clinical setting or teams	11	16
Retaining participants in research	11	16

The most prevalent priority areas are **increasing opportunities to network and collaborate with other investigators**, as well as program offices and operational partners.

<b>Priorities in Conducting Suicide Prevention Research</b>	<b>n</b>	<b>%</b>
Increasing opportunities to network and collaborate with other investigators	47	70
Increasing opportunities to network and collaborate with program offices or operational partners	45	65
Increasing access to suicide-related data sources	43	64
Supporting development of junior investigators	43	63
Identifying and publicizing sources of funding for research and demonstration projects	43	62
Increasing opportunities to develop expertise in specific methods or approaches (e.g. clinical trials, implementation)	33	49
Increasing access to information and consultation on methods and data sources	36	55
Improving awareness of SP research, evaluation, and implementation on Capitol Hill	37	54
Promoting key findings to lay audiences, VA operations, others	35	52
Improving ease of finding current information on suicide prevention programs for those at risk	30	45
Improving ease of finding current information on SP related research, evaluation, and implementation	29	42
Increasing opportunities to publish manuscripts	21	31

## Communication with the Field

### Preferences for content of communication:



\*participants may select more than one answer

### Preferences for methods of receiving information about suicide prevention research:

<b>Very interested in</b>	<ul style="list-style-type: none"> <li>• Email listserv for periodic and real-time updates/briefs</li> <li>• Periodic Cyberseminars</li> </ul>
<b>Somewhat interested in</b>	<ul style="list-style-type: none"> <li>• A SPRINT website</li> <li>• Bi-annual newsletter</li> <li>• Quarterly phone calls</li> </ul>
<b>A little bit interested in</b>	<ul style="list-style-type: none"> <li>• A SPRINT SharePoint</li> </ul>

## Needs Assessment Questions

Confidential

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# SPRINT Needs Assessment Survey

The goals of this brief survey are to 1) identify individuals conducting or interested in conducting suicide prevention research; 2) understand the current work and expertise of those working in the field; and 3) understand the needs of those carrying out this work to reduce barriers within the field. Although a wide range of work may be said to contribute to suicide prevention, here, we define suicide prevention-related work as research or evaluation projects with a suicide-related aim.

Please complete the survey below.

Thank you!

### Your Role

Please indicate the type of work you do in your current role: (Mark all that apply)

- Research
- Program evaluation
- Clinical practice
- Other

Please specify the type of work you do:

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**Work Setting and Funding**

In what setting(s) do you currently conduct research or evaluation projects? (Mark all that apply)

- University
- VA
- DoD
- Other

Please specify which setting(s):

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What sources (within the past 2 years) fund your work? (Mark all that apply)

- VA HSR&D
- VA CSR&D
- VA RR&D
- VA BLR&D
- DoD
- NIH
- VA program funds
- American Foundation for Suicide Prevention
- Other

Which DoD mechanism funds your work (e.g., MOMRP, MSCRP):

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Which institute funds your work (e.g., NIDA, NIMH):

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Which program office funds your work (e.g., OMHSP, ORH):

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Other:

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Over the course of your career, how many funded suicide prevention-related projects have you led (principal investigator or equivalent role)?

- 0
- 1-2
- 3-4
- 5-or more

**Areas of Interest and Expertise**

Which of the following categories best describe your interests in suicide prevention? (mark all that apply)

- Suicide prevention - risk assessment/prediction
- Suicide prevention - interventions
- Suicide prevention - surveillance
- Suicide prevention - implementation
- Suicide prevention focused on subgroups at risk (e.g., women, transitioning Veterans, TBI)

Do you have specific expertise with any of the following subpopulations (either within or outside suicide prevention)? (mark all that apply)

- Veterans
- Military service members/national guard
- Civilians
- Women
- Veterans separating/recently separated from military service
- Lesbian, gay, bisexual, or transgender
- Elderly (65+)
- Homeless
- Individuals with Substance use disorders or individuals using/prescribed opioids
- Veterans not enrolled in VHA care
- Individuals who have experienced psychological trauma
- Other

Please specify which:

\_\_\_\_\_

Do you have expertise in any of the following topics (either within or outside suicide prevention)? (mark all that apply)

- Chronic pain
- PTSD
- Depression
- TBI
- Substance use disorders
- Sleep disorders
- IPV or MST

Do you have expertise in any of the following methods/approaches (either within or outside suicide prevention)? (mark all that apply)

- Clinical trials
- Predictive analytics
- Population-level surveillance data
- Qualitative methods
- Implementation science
- Other

Please specify which methods/approaches:

\_\_\_\_\_

**Current or Upcoming Research**

Are you currently leading any active studies, evaluations, or operations projects in suicide prevention?

- Yes  
 No

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Please provide a 2-3 sentence description of each study, including the purpose of the study, the funder, and length of project:

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Do you have any studies, evaluations, or operations projects in suicide prevention under development (that you will lead)?

- Yes  
 No

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Please provide a 2-3 sentence description of each project, including the purpose of the study, and the planned length of the project:



## Barriers and needs in suicide prevention research, evaluation, and implementation

Please rate the following items on the extent to which each item has been a barrier to your ability to conduct or complete research or evaluation projects in suicide prevention:

	Not at all	Minor	Moderate	Significant	Major
Funding caps on individual projects	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Year limits on individual projects	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to specific populations (e.g. psychiatric inpatient, women, LGBT)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Institutional Review Board concerns regarding risk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ascertaining appropriate outcomes (e.g. suicide deaths, suicidal ideation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Determining appropriate metrics to demonstrate efficacy or effectiveness (i.e. in clinical trials)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to national or local government datasets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to VA datasets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Access to DoD datasets	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Identifying collaborating investigators with needed expertise or skills	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Retaining participants in research	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Grant reviewers lacking sufficient understanding of your methods or the suicide prevention field	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of institutional buy-in or support (e.g. protected time, space)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Resistance/hesitance from clinical settings or teams	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of research partners (either as co-investigators or national office partners such as Office of Mental Health and Suicide Prevention).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What (other) barriers to conducting or completing research or evaluation projects in suicide prevention would you like to see the suicide prevention field address?

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What do you think would be the best approach to address these barriers?

**Below is a list of proposed priorities for growing research and evaluation in the suicide prevention field. Please rate each one on its importance to you:**

	Not at all important	A little important	Somewhat important	Very important	Extremely important
Identifying and publicizing sources of funding for research and demonstration projects	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increasing opportunities to publish manuscripts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increasing opportunities to network and collaborate with other investigators	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increasing opportunities to develop expertise in specific methods or approaches (e.g., clinical trials, implementation)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increasing access to information and consultation on methods and data sources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increasing access to suicide-related data sources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Supporting development of junior investigators	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Promoting key findings in the field to lay audiences, VA operations, others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Improving awareness of suicide prevention research, evaluation, and implementation on Capitol Hill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Improving ease of finding current information on suicide prevention related research, evaluation, and implementation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Improving ease of finding current information on suicide prevention related programs for those at risk	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Increasing opportunities to network and collaborate with program offices or operational partners	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What other activities would help advance the suicide prevention field and support investigators/research teams?

**Communication Within the Field**

In the suicide prevention field, what topics would you like to hear about more regularly? (mark all that apply)

- Ongoing/newly funded research studies
- Requests for proposals on suicide prevention work
- Summaries of growth in field (e.g. funding levels, number of pubs, number of funded investigators)
- Ongoing evidence updates
- Upcoming conferences or events related to suicide prevention
- Updates from the VA Office of Suicide Prevention
- Opportunities for additional training
- SPRINT-specific activities
- None of the above
- Other:

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Other:

**Please indicate your preference for how you would like to receive more information about the suicide prevention field:**

	Not at all	A little bit	Somewhat	Very much
Email listserv for periodic and real-time updates/briefs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Periodic cyberseminars	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quarterly phone calls	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A SPRINT website	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A SPRINT SharePoint	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Bi-annual newsletter delivered via email	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Do you currently participate in any workgroups related to suicide prevention?

- Yes  
 No

Please list your suicide prevention related workgroups:

What workgroups would you like to see developed to support suicide prevention research and dissemination?