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PRINCIPAL INVESTIGATOR: Peter M. Gutierrez, Ph.D.

CONTRACTING ORGANIZATION: Denver VA Medical Center
Denver, CO 80220

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   Denver, CO 80220

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14. ABSTRACT
   Year one involved hiring and training staff, preparing and submitting all regulatory documents, collaborating with the Florida State University site and Core Directors, and developing the research program.

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   Personnel; Regulatory approvals; Quarterly reports and budget; Collaboration with cores; Research program

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# Annual Report to Department of Defense

(Fiscal Year 2010: September 28, 2010-September 27, 2011)

"Military Suicide Research Consortium"

DoD Award: W81XWH-10-2-0178

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Introduction:

The Military Suicide Research Consortium’s ultimate goal is suicide prevention in the military, through research, including on primary, secondary, and tertiary interventions, as well as through information management/scientific communications (cataloguing and disseminating knowledge on military suicide). Specifically, suicidal personnel compromise force readiness, place a strain on the healthcare resources of the military, impact unit morale, and take a large emotional toll on the involved friends, family, and commanders. There is significant stigma associated with being suicidal, which limits the extent to which at-risk individuals are willing to seek help. Moreover, decision-makers need a go-to resource for accurate, efficient, and fast answers regarding suicidal behavior as policies and programs are developed. The Military Suicide Research Consortium is designed to facilitate information management/scientific communications for the DoD and to maximize research efforts at understanding and improving suicide risk screening and assessment, interventions, and population-level prevention programs, as well as to address other pressing research needs (e.g., basic research including neuroscientific and genetic approaches). Programs and projects conducted by the Consortium ensure that information management/scientific communications occur seamlessly, and that screening and assessment, intervention, and prevention efforts are based on the best possible scientific evidence, specific to military personnel. Further, the Consortium contributes to the goal of the research program by expanding our knowledge, understanding, and capacity to prevent, treat, and enhance the quality of life of persons in military communities and the general public who are affected by suicide-related problems.

The Consortium’s overall mission can be summarized as follows; each function is developed with the goal of clear military relevance:

1. Produce new scientific knowledge about suicidal behavior in the military that will improve mental health outcomes for our men and women in uniform.

2. Use high quality research methods and analyses to address problems in policy and practice that will have a direct impact on suicide-related and other mental health outcomes for military personnel.

3. Disseminate Consortium knowledge, information, and findings through a variety of methods appropriate for decision makers, practitioners, and others who are accountable for ensuring the mental health of military personnel. This will include a rapid response function so that queries from decision makers and others to the Consortium will be answered with speed and efficiency. Technical assistance and support for decision makers and others is an integral aspect of this Consortium function. This aspect of the Consortium will warehouse knowledge about suicidal behavior in general (e.g., from civilian and international sources as well as from military sources), so that military issues can be informed in a comprehensive manner.
Train future leaders in military suicide research through experience within a multidisciplinary setting for Ph.D. students and postdoctoral scholars interested in research questions on military suicide of both a basic and applied nature.

The inter-relations and flow of information between the Cores and the research program is an important component of the Consortium. By its nature, the Executive Management Core is involved with all other Cores and the research program, to exert leadership and quality control over them. The Military/Civilian Research Monitoring Core, too, exerts an oversight function, with specific emphasis on military relevance. In its capacity as knowledge warehouse/communication center, the Information Management/Scientific Communications Core receives input from all elements of the Consortium, and will output information to military decision makers and others in rapid and efficient fashion. The Database Management/Statistical Core represents a highly valuable asset to the Consortium as a whole, perhaps particularly to the research program.

Body:

Statement of Work

Task 1. Project Start-up (months 1-3)

1a. Create infrastructure for all Cores (month 1)
   - Core A and Core Directors have weekly conference calls to discuss the Consortium, including its infrastructure.
   - Core A and Core C developed the Consortium’s Standard Operating Procedures (Started in August 2010, received MOMRP legal approval in February 2011)

1b. Hire and train staff (month 2)
   - All Denver staff were hired and trained by August 2010, with pre-award funding approval.

1c. Core C conduct first comprehensive literature review (month 3)
   - Accomplished by month 3 and distributed results to Cores A and B.

Task 2. Plan research projects (months 4-9)

2a. Establish research priorities in consultation with External Advisory Board (month 4)
   - Core A chose preliminary research priorities in month 3, while External Advisory Board members were selected.
   - The Military External Advisory Board (MEAB) and Independent Scientific Peer Review Program (ISPRP) members were chosen by month 7.
   - The MEAB and Core A met with potential funded research teams in June (month 9).

2b. Assemble research teams (months 5-6)
   - As of month 5, there were 44 MSRC research members accepted for a two year appointment.
   - As of month 6, Core A received six Letters of Intent from assembled research teams.
As of month 12, MSRC is finalizing the subcontracts of five research proposals, with four additional proposals being presented to the MEAB in month 14.

2c. Continue creation of Core B infrastructure (months 4-9)
- Core B is located at the FSU site and its infrastructure was accomplished by month 9.
- Cores A and C contributed to the creation of Core B’s infrastructure.

2c. Core D assist with protocol development and production (months 7-8)
- Core A and Core D collaborated on protocol development and production.
- Core A and Core D created a set of common data elements that were dispersed to the five selected studies, in month 11.

2d. Core C review protocols to ensure proper military relevance (month 9)
- Accomplished in month 9; Core C reviewed the six proposals ensuring military relevance.
- Core C will continue to ensure protocols have proper military relevance, as the Consortium receives proposals in the upcoming months.

Task 3. Implement intramural research projects (months 10-12)
3a. Preliminary study information submitted to core B (month 12)
- Preliminary study information was submitted to Core B in month 12, to be added to the Consortium’s website.

Task 4. Initial Consortium review by External Advisory Board (month 12)
- The Military External Advisory Board met with Core A in June 2010 (month 9) and will again in November 2011 (month 14).
- Core A reviews the progress of the Consortium with their senior advisors at annual meetings and quarterly conference calls.

Task 5. Preparing year one quarterly reports (months 3, 6, 9, 12)
- The 1st, 2nd, 3rd and 4th quarter reports were prepared and distributed on time.

Task 6. Continue intramural research projects (months 13-24)
- Four new research projects are being reviewed by the MEAB and will be voted on for funding recommendations in month 14.
- Requests for additional intramural research projects were sent in month 12.

Task 7. Establish pre-doctoral and postdoctoral training experiences at FSU and MIRECC (month 24)
- Pre-doctoral and postdoctoral training experiences are established at FSU.
- Discussion has been initiated on how to establish pre-doctoral and postdoctoral training at the MIRECC.

Overall project timeline:
Year 1 — Complete Tasks 1, 2, 3, 4, and 5
- Tasks 1, 2, 3, 4, and 5 were completed. Tasks 6 and 7 were initiated.
Year 2 — Complete Tasks 6, 7, 8, and 9
Year 3 — Complete Tasks 6, 10a, 10b, 11, and 12
**Key Research Accomplishments:**

- Hired and trained all staff in addition to orienting the collaborating teams to the study.
- Created Standard Operating Procedures for the Consortium staff and research teams.
- Secured all regulatory approvals (COMIRB 11-0304) necessary to subcontract with research teams.
- Collaborated with ISPRP and MEAB to fund five research projects and review an additional four potentially funded projects.
- Assisted with the creation of the common data elements, to be distributed to research teams.
- Contributed to the military resources on the MSRC website.

**Reportable Outcomes:**

Data collection has not begun for subcontracted studies. The five studies under subcontracting received the common data elements to be collected by Consortium funded studies. Basic information about the Consortium and funded studies has been presented at the following professional meetings:

Gutierrez, P. M., & Lineberry, T. United States Army Medical Research and Materiel Command United States military suicide research: Activities and opportunities. Panel presentation at the American Association of Suicidology conference, Portland, OR, April 14, 2011.


Staff from the MIRECC and FSU sites collaborated on a secondary data analysis project resulting in the following in-press article:

ABSTRACT:
Background: Sleep problems appear to represent an underappreciated and important warning sign and risk factor for suicidal behaviors. Given past research indicating that disturbed sleep may confer such risk independent of depressed mood, in the present report we compared self-reported insomnia symptoms to several more traditional, well-established suicide risk factors: depression severity, hopelessness, PTSD diagnosis, as well as anxiety, drug abuse, and alcohol abuse symptoms.
Methods: Using multiple regression, we examined the cross-sectional and longitudinal relationships between insomnia symptoms and suicidal ideation and behavior, controlling for depressive symptom severity, hopelessness, PTSD diagnosis, anxiety symptoms, and drug and alcohol abuse symptoms in a sample of military personnel (N=311).
Results: In support of a priori hypotheses, self-reported insomnia symptoms were cross-sectionally associated with suicidal ideation, even after accounting for symptoms of depression, hopelessness, PTSD diagnosis, anxiety symptoms and drug and alcohol abuse. Self-reported insomnia symptoms also predicted suicide attempts prospectively at one-month follow up at the level of a non-significant trend, when controlling for baseline self-reported insomnia symptoms, depression, hopelessness, PTSD diagnosis and anxiety, drug and alcohol abuse symptoms. Insomnia symptoms were unique predictors of suicide attempt longitudinally when only baseline self-reported insomnia symptoms, depressive symptoms and hopelessness were controlled.
Conclusions: These findings suggest that insomnia symptoms may be an important target for suicide risk assessment and the treatment development of interventions to prevent suicide.

Staffs from the MIRECC and FSU sites are preparing data and research information for the following topics:

Hanson, J. E., Joiner, T. E. Jr., & Gutierrez, P. M. (research in progress) Blood alcohol content and suicide.

Anestis, M. D., Moroney, K. A., Gutierrez, P. M. & Joiner, T. E. Jr. (research in progress) Literature review on impulsivity and suicidal behavior.

Submission to 2012 AAS Conference
- Panel on United States Military Research: Status Report on Funded Research

Conclusion:
The Military Suicide Research Consortium reached its annual goals and research aims. Denver Research Institute is currently finalizing its subcontracts with two institutions, the MEAB and ISPRP are reviewing four proposals, and the Consortium is accepting additional letters of intent. The four Cores collaborate on a daily basis, working toward the ultimate goals of suicide
prevention in the military and information dissemination to decision makers, practitioners, and others who are accountable for ensuring the mental health of military personnel.

References:


Appendices:

A1. Peter Gutierrez, Ph.D. CV

Appendix Pages: 8-25
DATE: 9-28-11
NAME: Peter M. Gutierrez
ADDRESS: VA VISN 19 MIRECC
1055 Clermont Street
Denver, Colorado 80220
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EDUCATION:

<table>
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<th>Degree</th>
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<td>Ph.D., Clinical Psychology</td>
<td>1997</td>
<td>University of Michigan</td>
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<tr>
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<td>B.A., Psychology</td>
<td>1991</td>
<td>Winona State University</td>
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*Summa Cum Laude*

AREAS OF SPECIALIZATION AND RESEARCH INTERESTS:

Suicide risk factors, assessment, and prevention. Young adult suicidality. Cultural validity of assessment tools and suicide risk models. Scale development and psychometric evaluation.

PROFESSIONAL EXPERIENCE:

7/1/09-   Associate Professor, University of Colorado School of Medicine, Department of Psychiatry.

6/9/08-   Licensed Clinical Psychologist, Colorado #3203.

2008-     Clinical/ Research Psychologist, Denver VA Medical Center, Mental Illness Research and Education Clinical Center.

2008-2009 Visiting Associate Professor, University of Colorado Denver School of Medicine, Department of Psychiatry.

2007-2008 Research Psychologist, Denver VA Medical Center, Mental Illness Research and Education Clinical Center.

2006-2008 Adjoint Associate Professor, University of Colorado Denver School of Medicine, Department of Psychiatry.
2006-2007  Research Consultant, Denver VA Medical Center, Mental Illness Research and Education Clinical Center.

2002-2007  Associate Professor, Northern Illinois University, Department of Psychology.

2002-2006  Assistant Chair, Northern Illinois University, Department of Psychology.

1996-2002  Assistant Professor, Northern Illinois University, Department of Psychology.

1995-1996  University of Michigan, University Center for the Child and Family, Psychology Intern (APA Accredited through University’s Captive Consortium).

1993-1995  University of Michigan Medical Center, Division of Child and Adolescent Psychiatry, Department of Psychiatry, Psychology Intern (APA Accredited through University’s Captive Consortium).

PUBLICATIONS:


**BOOK/CHAPTERS:**


**PAPER PRESENTATIONS:**


Gutierrez, P. M., & Lineberry, T. United States Army Medical Research and Materiel Command United States military suicide research: Activities and opportunities. Panel presentation at the American Association of Suicidology conference, Portland, OR, April 14, 2011.


Gutierrez, P. M. Redefining diversity: The chronically suicidal veteran as one example. Presidential address at the American Association of Suicidology conference, Boston, MA, April 17, 2008.


Gutierrez, P. M. Change is good: What the past 40 years tell us about the future. Presidential address at the American Association of Suicidology conference, New Orleans, LA, April 12, 2007.

Gutierrez, P. M. Suicide in the young adult population. Presented at the Department of Veterans Affairs Employee Education System’s Evidence-Based Interventions for Suicidal Persons conference, Denver, CO, February 8, 2007.


Schumacher, M., & Gutierrez, P. M. Bipolar spectrum traits and suicide risk. Presented at the American Association of Suicidology conference, Broomfield, CO, April 15, 2005.


Brausch, A. M., & Gutierrez, P. M. Does this magazine make me look fat? Media’s impact on body image, depression, and eating. Presented at the Midwestern Psychological Association Conference, Chicago, IL, May 1, 2004.

Muehlenkamp, J. J., Swanson, J., & Gutierrez, P. M. Differences between self-injury and suicide on measures of depression and suicidal ideation. Presented at the Midwestern Psychological Association annual meeting, Chicago, IL, May 9, 2003.

Kaplan, M., Schultz, D., Gutierrez, P. M., Sanddal, N., & Fernquist, N. Suicide research: Working with a mentor. Panel presentation at the American Association of Suicidology annual conference, Santa Fe, NM, April 24, 2003.


POSTER PRESENTATIONS:


Swanson, J. D., & Gutierrez, P. M. Gender, social support, and student suicidality. Poster presented at the American Association of Suicidology conference, Seattle, WA, April 30, 2006.


Osman, A., Barrios, F. X., Gutierrez, P. M., Kopper, B. A., Williams, J. E., Carlson, N., & Koser, K. Reliability and validity of the Multidimensional Anxiety Scale for Children and the Children’s


Kopper, B. A., Osman, A., Linehan, M. M., Barrios, F. X., Gutierrez, P. M., Bagge, C. L. Validation of the Adult Suicide Ideation Questionnaire and the Reasons for Living Inventory in an adult


Gutierrez, P. M., & Hagstrom, A. H. Uses for the Multi-Attitude Suicide Tendency Scale. Presented at the American Association of Suicidology annual conference, Bethesda, MD, April 17, 1998.


GRANTS AND AWARDS:

3/11-2/13 Department of Defense, Military Operational Medicine Research Program, grant; Consultant (PI Steven Vannoy, Ph.D., MPH); $1,354,386 for Development and Validation of a Theory Based Screening Process for Suicide Risk.

3/11-3/15 Department of Defense, Military Operational Medicine Research Program, grant; Co-Investigator; $3,400,000 for A Randomized Clinical Trial of the Collaborative Assessment and Management of Suicidality vs. Enhanced Care as Usual for Suicidal Soldiers.

9/10-9/13 Department of Defense, Military Operational Medicine Research Program, grant; Principle Investigator: jointly with Thomas Joiner, Ph.D., Florida State University; $8,500,000 (additional $8,500,000 going to FSU) for Military Suicide Research Consortium.

9/09-9/13 Department of Defense, Military Operational Medicine Research Program, grant; Principle Investigator; $1,173,408 for Blister Packaging Medication to Increase Treatment Adherence and Clinical Response: Impact on Suicide-related Morbidity and Mortality.

5/09-5/10 Colorado TBI Trust Fund Education grant; $8427 to support the hosting of a conference of national experts in suicide safety planning and TBI rehabilitation.
5/08-5/09 Colorado TBI Trust Fund Education grant; $5,000 to support the hosting of a conference of national experts in assessment of TBI and suicide risk and the role of executive dysfunction in linking the two problems.

2005 Shneidman Award for Significant Contributions to Suicide Research, American Association of Suicidology

2003 Outstanding Young Alumni, Winona State University

PROFESSIONAL SERVICE:

4/09- Associate Editor, Suicide and Life-Threatening Behavior, Thomas Joiner, Ph.D., Editor-in-Chief.

4/09-4/11 Past-president, Board position, of the American Association of Suicidology.


5/07-10/08 Member of the International Advisory Board for the Australian National Study of Self Injury (ANESSI), Professor Graham Martin, Director.

4/07-4/09 President of the American Association of Suicidology.

3/06-3/07 Reviewer for National Registry of Evidence-based Programs and Practices, Substance Abuse and Mental Health Services Administration.

4/05-4/07 President-Elect of the American Association of Suicidology.

2/04-4/09 Consulting Editor and Editorial Board member, Suicide and Life-Threatening Behavior, Morton M. Silverman, M.D., Editor-in-Chief.

11/02-6/06 Member, Illinois Suicide Prevention Strategic Planning Task Force, Illinois Department of Public Health.

3/02-1/06 Member, American Association of Suicidology Institutional Review Board.

4/00-4/03 Director, Research Division, American Association of Suicidology.


1998-2002 Member, North Central Association Outcomes Endorsement Team for Auburn High School, Rockford, IL.

7/98-4/00 Chair, Publications Committee, American Association of Suicidology.
1998-2006 Director, Adolescent Risk Project, Auburn High School, Rockford, IL. Combined research and suicide risk screening project.

1997-2006 Faculty Associate of the Center for Latino and Latin-American Studies at Northern Illinois University.

MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS:

2010- International Academy for Suicide Research, Fellow

2007- Colorado Psychological Association

2003-2010 International Academy for Suicide Research, Associate Member

1999- APA Div. 12, Section VII, Clinical Emergencies and Crises

1998-2010 APA Div. 53, Society of Clinical Child and Adolescent Psychology

1997-2007 Midwestern Psychological Association

1996- American Association of Suicidology