

# Engaging Veterans in Survey Research to Prevent Suicide

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## **ABSTRACT**

Suicide rates among Veterans remain high, underscoring the necessity of identifying modifiable suicide risk and protective factors that can be targeted through public health approaches. One way to ensure that survey-based research yields information necessary to translate findings into patient-centered interventions is through Veteran engagement. The current manuscript describes perspectives of members of a national Veterans Engagement Board (VEB) in contributing to the *Assessing Social and Community Environments with National Data (ASCEND) for Veteran Suicide Prevention* project. Contributions have included strengthening communication with potential Veteran participants, addressing sensitive survey topics such as firearms and suicide, and ensuring that ASCEND is responsive to current national and global events. Additionally, VEB members described the personal impact of engagement. These contributions highlight the value of Veteran engagement as an integral component of suicide risk and prevention research.

**KEYWORDS:** Suicide, Engagement, Health Outcomes, Mental Health, Veterans, Health Care Surveys, Health Care Quality, Access, and Evaluation

In 2018, Veteran suicide rates were the highest since the Department of Veterans Affairs (VA) began systematically tracking suicide mortality among all Veterans.<sup>1</sup> Suicide prevention remains the leading clinical priority within the VA, and research is necessary to address questions critical to curbing this public health concern. Extant research has demonstrated that service members and Veterans undergo unique experiences that can increase their risk for suicide, such as combat-related experiences,<sup>2</sup> military sexual trauma,<sup>3</sup> and challenges related to reintegration into civilian life following separation from military service.<sup>4</sup> Suicide risk factors between Veterans and non-Veterans also differ in key ways, including with respect to methods of suicide.<sup>5,6</sup> Furthermore, Veterans have described unique experiences and preferences regarding suicide risk disclosure, assessment, and intervention.<sup>7</sup>

To ensure that suicide risk and prevention research is responsive to Veterans' unique needs, experiences, and preferences, Veteran engagement is pivotal. Veteran engagement involves meaningfully incorporating Veterans' perspectives into the research process. Doing so can help to ensure that research is relevant to the needs, experiences, and preferences of Veterans.<sup>8,9,10</sup> Unfortunately, to our knowledge, Veteran engagement in suicide risk and prevention research has historically been limited; Veterans have not typically been included as partners. Considering this gap, we provide our experiences and insights in Veteran/Researcher engagement for a suicide prevention project entitled: *Assessing Social and Community Environments with National Data (ASCEND) for Veteran Suicide Prevention*.

## **ASCEND**

ASCEND strives to become a recurring national survey of non-fatal suicidal self-directed violence (NF-SSDV; e.g., suicide attempt, suicidal ideation) among the U.S. Veteran population.

Inherent to this, ASCEND seeks to provide information on the prevalence and trends in NF-SSDV among the Veteran population, as well as by gender, rurality, use of VA healthcare, and other characteristics. ASCEND also aims to provide novel information regarding risk and protective factors for NF-SSDV across individual, relationship, community, and societal levels, to garner knowledge necessary for clinical and community interventions to prevent suicide among Veterans.

### **The ASCEND Veteran Engagement Board**

Veteran engagement can vary in how Veterans' perspectives are incorporated into the research process.<sup>8</sup> Table 1 depicts the roles of researchers and Veterans for different levels of engagement<sup>11</sup>. The work described in the next sections for the ASCEND project falls under “involve,” although our continued work together may gradually move this partnership along the continuum in the direction of “collaborate” over time. In their current role, ASCEND VEB members have been considered research *partners*, rather than research *participants*. ASCEND VEB members do not interact with participants or review ASCEND data. Thus, Institutional Review Board consent and approval were not required from ASCEND VEB members, who co-authored this manuscript along with the ASCEND researchers<sup>11</sup>. Next, we describe contributions from the ASCEND VEB members, using “we” to refer to the perspectives of the ASCEND VEB members and the VA researchers working alongside them.

**Table 1: Levels of Veteran Participation in Research<sup>11</sup>**

	<b>Participate</b>	<b>Consult</b>	<b>Involve</b>	<b>Collaborate</b>	<b>Lead/Co-Lead</b>
<b>Veteran's Role</b>	To act as a participant in a research study	To provide feedback or input on specific research activities	To work directly with a research team throughout a study	Partner with researchers on all aspects of a research study	Leadership role with decision-making authority on studies
<b>Researcher's Role</b>	To conduct research in a respectful, ethical manner	Veteran(s) asked for input on specific aspects of a research study	Ongoing engagement of Veteran(s) throughout a research study	Veteran(s) join research team and act as team member	Shared leadership and decision-making
<b>Examples</b>	Quantitative, qualitative, mixed methods research	Meeting with existing or ad hoc groups; priority setting activities	Standing group dedicated to providing input on studies	Members of research steering committee	Research partners or co-investigators

*Note.* Levels of engagement in health research figure was adapted by the SERVE toolkit from the International Association for Public Participation's Public Participation Spectrum under the fair dealing provision of the Canadian Copyright Act for research.

<https://sustainingcommunity.wordpress.com/2017/02/14/spectrum-of-public-participation>

To ensure that ASCEND is relevant to Veterans' needs and preferences, and that resulting clinical and public health recommendations are patient-centered, Veteran engagement has been included as an integral component of ASCEND from its inception. Our research team uses practices successfully employed in the VA, such as the *Strengthening Excellence in Research through Veteran Engagement (SERVE) Toolkit*<sup>11</sup>, to integrate engagement methods into ASCEND. The ASCEND researchers sought to form a project-specific VEB to partner with on ASCEND. To accomplish this, the researchers recruited Veterans from other existing Veteran engagement groups across the country, as well as through word-of-mouth, using resources provided in the SERVE Toolkit<sup>10</sup>.

While the ASCEND project team has not formally collected demographic data from VEB members, VEB members have openly shared their information about their backgrounds in VEB meetings and in preparing their biographies for the ASCEND VEB website<sup>12</sup>, highlighting what backgrounds they bring to the project in their own words. VEB members are geographically dispersed across the U.S. (California, Colorado, Iowa, Louisiana, North Carolina, and Wisconsin) and live in both urban and rural areas. They vary in their demographic backgrounds (e.g., gender, race), military service characteristics (e.g., branch, service era), involvement with the VA, and lived experiences.

The mission of the ASCEND VEB is for members to apply their knowledge and experiences as Veterans to ensure that the ASCEND survey is relevant to the needs and experiences of Veterans, including the survey content, as well as study processes and materials (e.g., consent information, response modes, safety-related information). The ASCEND VEB began meeting in September 2019 and meets monthly. Meetings are facilitated by a designated

ASCEND project team member (the first author) trained in group facilitation. Project feedback and group work occur during designated VEB meeting times. Meetings were originally sixty minutes in duration, but have increased to ninety minutes, at the direction of the VEB. Agendas map onto the timeline and milestones of the broader ASCEND project, encompassing the entire research process, from survey development to interpretation of findings. To ensure Veteran engagement is not limited geographically, meetings are conducted remotely, which has not presented any issues for our VEB.

Collectively, we have successfully partnered on a variety of issues, including recruitment, survey content, consent, and debriefing. VEB members have shared their individual perspectives on many different aspects of ASCEND; in turn, the researchers have worked diligently to incorporate VEB members' insights into procedures and materials. Thus, VEB members have made substantial contributions to ASCEND – particularly in regard to enhancing communication with Veteran research participants, addressing sensitive topics, and being responsive to national and global events, described next.

### **Strengthening Communication with Veterans**

Strengthening communication with Veterans has been a cornerstone of VEB members' contributions to ASCEND. VEB members have offered their perspectives on how to communicate with Veterans (e.g., potential and actual research participants) in the recruitment materials, study website, and survey itself. VEB members' suggestions have centered on increasing trust through transparency, such as explaining why different survey questions are being asked. VEB members felt that doing this would help Veterans feel comfortable, protected,

and supported throughout the survey, and increase the likelihood that Veterans will provide honest and thoughtful answers.

We worked together on how ASCEND materials could destigmatize, normalize, and introduce sensitive survey topics in a way that is simple to understand. Many VEB members emphasized highlighting how participating in the ASCEND survey could help other Veterans in the future. ASCEND researchers thus revised communication materials to be simple, direct, and engaging. Revisions were reflected in the recruitment letters, safety resources, consent, and survey instructions.

### **Addressing Sensitive Topics**

Due to the aims of ASCEND, the survey includes questions about suicidal thoughts and behaviors and firearms, the leading means of suicide among Veterans who have died by suicide.<sup>1</sup> VEB members have been mindful of the potentially sensitive, personal, and political nature of these questions. VEB members have conveyed that many Veterans have unique perspectives on firearms, compared to non-Veterans, and that questions about firearms could alienate participants if not carefully worded and thoughtfully approached.

Thus, VEB members and the research team have worked together to present these topics within the survey in ways that would not “turn off” participants. First, VEB members recommended making such questions optional; consequently, the researchers added a *decline to respond* option. Second, VEB members suggested that it would be ideal to sequence these questions later in the survey to allow participants time to become comfortable with the survey and gradually build up to these questions. Consequently, the research team moved the firearm questions to later in the survey. Finally, directly preceding potentially sensitive survey questions,



VEB members encouraged reinforcing trust with survey respondents by reiterating the voluntary and confidential nature of the survey; they worked with the researchers to add language to inform participants of the rationale for asking such questions and to remind them that their responses were voluntary and confidential. This information was included prior to asking questions deemed to be sensitive. This is a departure from common practice in surveys, in which such information is typically conveyed primarily during the initial consent process, rather than being reiterated.

When reflecting upon the impact of these contributions, VEB members stated that, in making these changes, we were able to help set up the firearm questions in a way that “took the edge off” this challenging topic. VEB members felt confident that we had approached this topic together “civilly,” and had encouraged open dialogue between VEB members and the ASCEND researchers to determine how to collect information necessary to help Veterans, while keeping Veterans’ values at the forefront of discussions and survey questions. Of note, preliminary findings from the ASCEND pilot survey, which included over 500 participants, suggests that there was no discernible “drop off” (i.e., participants ending the survey prematurely) with respect to the questions about firearms or suicide. Although we cannot definitively attribute this to the changes implemented regarding these questions, prior research has shown that the language used to discuss firearms is indeed important<sup>13,14</sup> and VEB members felt confident that their contributions in this regard helped.

### **Responsiveness to Current Events**

Survey development and data collection for the ASCEND pilot study took place in 2020 and early 2021. This meant that we worked together through a worldwide pandemic, social strife,

and high-profile events highlighting racial discrimination and injustice – events with important public health implications.<sup>15-18</sup> ASCEND VEB members and researchers had meaningful open discussions about how Veterans and their families had been affected by these events and how the ASCEND survey could be adapted to increase understanding of how Veterans nationwide had been impacted by these events. These discussions prompted the researchers to add survey items that related to these salient issues. For example, we discussed VEB members’ perspectives on the unprecedented effects of the COVID-19 pandemic that “intensified every aspect of daily living”; this conversation shaped the closed and open-ended survey items that were added to better understand the impact of the pandemic on Veterans. An additional result of our discussions was that resources were added to the debriefing form with information for participants struggling to cope with the pandemic.

Furthermore, conversations regarding racial injustice and discrimination helped to guide how ASCEND could address this important topic – for example, by adding questions to assess experiences of racial and ethnic discrimination (which VEB members reviewed and commented on) and by further diversifying the VEB. Discussions regarding the VEB composition helped to identify a need to expand VEB membership to obtain more diverse Veteran perspectives, including with respect to race, ethnicity, age, and gender. As a result, the ASCEND project team expanded and diversified the VEB, and VEB members were actively involved in this process. VEB members helped to design a recruitment flyer, participated in interviews of potential candidates, and ultimately decided whether to invite applicants to join the VEB. As a result, three new VEB members have joined the ASCEND VEB since these discussions, resulting in a larger (i.e., eight members total) and more diverse (with respect to gender and age) VEB.

## **The Personal Impact of Engagement**

Upon reflecting on our work together, we all agreed that there was an intentional effort from both the ASCEND researchers and VEB members to come together and prioritize bidirectional dialogue. VEB members appreciated that ASCEND staff were always prepared, that meeting schedules and topics were clearly communicated, and that we had patience and held space for one another, learned from each other, and were present in the work we do together. VEB members considered these elements of our interactions to be important because “everybody’s time is valuable.” They noted that we all communicate that value by how we treat each other.

The personal impact of this work was made clearer during the challenges of 2020, when together we implemented a formal “check-in” time at the start of every meeting that included both the VEB members and ASCEND researchers. We expressed an appreciation for working together, producing work, searching for answers, and launching a national survey while navigating the challenges of everyday life during an unprecedented year (i.e., the COVID -19 pandemic). One VEB member reflected on the personal impact of the engagement work to date, noting that it gave him purpose. He indicated that, when he learned that Veterans had taken the ASCEND pilot survey, “materializing and collecting data,” it was a “full circle” moment.

## **Conclusions**

As the ASCEND team prepares to launch the survey with a larger national sample of 15,000 respondents, Veteran engagement will remain an integral part of the project. As described, Veteran engagement has already been valuable in survey development, thoughtful inclusion and placement of sensitive questions, and the addition of pertinent and timely resources

for participants. Our experiences also underscore the impact Veteran engagement can have on improving Veteran suicide prevention research. While a national survey on NF-SSDV may not represent a prototypical project for embracing Veteran engagement, the contributions from this engagement have been invaluable, making the project more responsive and relevant to Veterans' needs and experiences. ASCEND VEB members have helped the project be successful in ways that likely would not have been achieved without this partnership. We look forward to continuing to work together as we prepare to launch the national survey, disseminate survey results, and ultimately, work together to ensure that ASCEND continues to hold the perspectives of Veterans as central to the project's goals. As noted recently by one VEB member: "...your approach of being so open to us and continually referring back to us is a formula for success. Vets have longed to be heard in various settings for a long time. That's what we want—to be heard. And valued."

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