



'OPERATION DEEP DIVE' RESEARCH STUDY OVERVIEW

BACKGROUND

America's Warrior Partnership, University of Alabama researchers and the Bristol-Myers Squibb Foundation have partnered on a four-year research study that will examine the factors and potential causes involved in suicides and early mortality due to self-harm among military veterans. The study began in 2018 and will conclude at the end of 2021. Funded by a \$2.9 million grant from Bristol-Myers Squibb Foundation, as well as additional investment from America's Warrior Partnership and other in-kind supporters, "Operation Deep Dive" will use unique methodologies that have never before been applied to the research of veteran suicides.

OBJECTIVES & SCOPE

This study will identify the individual, organizational, and community risk factors that lead to suicide within veteran communities and help guide the development of programs to prevent and reduce self-harm among veterans. The study will include veterans with Honorable Discharge, Entry Level Separation [ELS], General Discharge - Under Honorable Conditions, Other Than Honorable Conditions Discharge, Bad Conduct Discharge [BCD], Officer Discharge, or Dishonorable Discharge).

A total of 14 communities are participating in this study across the country. In 2018, we launched the study with Community Affiliates, including California (Orange County), Florida (Panhandle), Georgia (Atlanta), Minnesota (Minneapolis and St. Paul), South Carolina (Greenville and Charleston). In 2019, we added an additional eight communities that were selected through a Request for Proposal process. These communities include Alabama (Mobile), Arizona (Phoenix), Indiana (Indianapolis), the tristate area of Kentucky, Indiana, and Ohio (Cincinnati), Nevada (Las Vegas), New York (Syracuse), North Carolina (Charlotte), and Texas (Houston).

METHODOLOGY & TIMEFRAME OVERVIEW

This study will be divided into two phases over four years using a mixed-methods, Community-Based Participatory Research (CBPR) approach.

Phase I (Year 1)

1. Partner with Medical Examiners (MEs) in each community to conduct a two to five-year retrospective of veteran suicides or suspected suicides, determine their military service history via the Department of Defense Database, and identify which veterans were receiving VA services.
2. Recruit and implement Community Action Teams in each community, consisting of MEs, Veteran Serving Organization (VSO) leaders, community leaders, and veterans/family members to help shape, review and help direct the research from design to dissemination.
3. Geo-map all identified veteran suicides or suspected suicides in each community to determine different geo-cultural contexts and locations that affect likelihood of suicide/suspected suicide.
4. Develop sociocultural death investigation tool that identifies individual, organizational, and community factors leading to veteran suicide or self-harm leading to suicide.
5. Recruit seven (7) non-Affiliate Communities with similar demographics to the seven (7) Affiliate Communities

Phase II (Years 2-4)

1. Implement sociocultural death investigations of new suicides in communities with friends and family members of deceased in Affiliate and non-Affiliate Communities.
2. In seven new non-Affiliate Communities, implement retrospective analysis of former service member suicides or suspected suicides as completed for Affiliate Communities in Phase I.
3. In-depth qualitative semi-structured interviews with veterans at higher risk for suicide to explore the role of community in engaging those who have served to prevent negative outcomes contributing to suicide and self-harm.
4. Conduct a quantitative multi-database statistical analysis linking the WarriorServe® information system linked with the joint Department of Defense (DoD) and Veterans Affairs (VA) Suicide Data Repository (SDR) and VA health records data. We will also link to U.S. Census Bureau, Bureau of Labor Statistics, Centers for Medicare & Medicaid Services, and U.S. Department of Agriculture Economic Research Service data sources to facilitate a comprehensive capture of potential community and social factors related to suicides identified in Phase 1.

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