

Center for Accelerating Practices to End Suicide

A WORD FROM OUR DIRECTORS

Welcome to the fourth CAPES quarterly newsletter! We are excited to share news and announcements from April to July 2024 from the NIMH-funded Center for Accelerating Practices to End Suicide (CAPES) at UMass Chan Medical School. It's been a busy quarter, with planning fully underway for the Summer Retreat and Fall Summit, an eye tracking workshop hosted by the Person-Centered Design Unit, ongoing monthly Lived Experience Advisory Board meetings available to all CAPES research projects and faculty, and suicide prevention trainings. We look forward to seeing you all at the Spring Retreat and Fall Summit!

Sincerely,

Ed Boudreaux, PhD and Catarina Kiefe, PhD, MD
Directors, Center for Accelerating Practices to End Suicide



New Suicide and Translation Journal Articles

> Check out this study by **Larkin, C., Kiefe, C. I., Morena, A. L., Rahmoun, M. B., Lazar, P., Sefair, A. V., & Boudreaux, E. D. (2024):** *Clinician Attitudes Toward Suicide Prevention Practices and Their Implementation: Findings From the System of Safety Study*. *Psychiatric Services*, 75(6), 534–542.

<https://doi.org/10.1176/appi.ps.20230082>

> [READ MORE](#)

> NEWS THIS QUARTER

The [CAPES Website](#) is now LIVE! Check it out for all updates on CAPES projects, connection with other faculty, and resources for researchers, clinicians and healthcare organizations, digital health specialists, and persons impacted by suicide and suicidal thoughts.

The launch of the [CAPES signature project](#) started in January 2024 and recruitment is well underway! We are testing clinical and implementation outcomes of Jaspr, a suicide prevention software that can be accessed on a tablet by emergency department (ED) patients, which makes therapeutic use of downtime before a psychiatric evaluation. Patients can download the Jaspr@Home app to their smartphone and use their safety plan and tools after the visit. Look out for the Jaspr research coordinators recruiting in the medical ED and EMH!

Save the Dates for CAPES Summer Retreats! The CAPES Methods Core Retreat is scheduled for Tuesday July 23rd from 8:30AM - 1PM. The Admin Core Retreat is scheduled for July 25th from 8:30AM- 1 PM. Please RSVP via your calendar invite to hear all about CAPES projects and researchers, suggest improvements for CAPES related to networking and DEI efforts, and share ideas for grants and manuscripts!

Check out the Mental Health Matters Podcast by NIMH - including this feature on preventing youth suicide.

> [LISTEN HERE](#)

The CAPES Lived Experience Advisory Board has expanded to include six members - all of whom have lived experience with suicidal thoughts and/or attempts. The Board is co-facilitated by [Lourah Kelly](#) of UMass Chan Medical School and [Rick Strait](#) of EDC.

In May, the Advisory Board met with the Jaspr team and provided feedback on our approach to encouraging use of the Jaspr at Home app, and on our Research Coordinator's approach script. The board gave extensive, detailed feedback on what may contribute to patient's hesitancy of using mobile apps for suicide prevention, and identified several key points to share with participants in a job aid to alleviate concerns about JASPR not tracking their personal health information and what the app does do to support patients after discharge from the Emergency Department.





Anthony Nunes is a doctoral trained epidemiologist with expertise in pharmaceutical and chronic disease epidemiology, “big data” analytics, and collaborative research integrating machine learning enabled methodologies. Dr. Nunes will execute up to 2 pilot feasibility projects, proposed by early-stage or established investigators and trainees. He organizes training opportunities across a range of topics and disciplines important for suicide-related care translation and research.

As an educator, leader and methodologist, Dr. Nunes serves as the Lead Role for the Education and Scientific Development Unit. He oversees the process for soliciting and selecting emerging and advanced scholars to be supported by CAPES. In addition, he oversees the Pilot Project funding program, patterned after the NIH peer review process, to solicit, review, and award 10 R03-like pilot studies that support the mission of CAPES, focus on synergy between technologies and faculty, and gather data to be leveraged for new grant submissions.



[CAPES faculty and scholars - check your email for the current R03 Request for Applications - LOI due 8/16/24!](#)

> CAPES TECHNOLOGY CORNER



We’re featuring a new technology or innovation tested within CAPES each quarter. This month, we asked Dr. Djasmasbi from WPI and the Person Centered Design Unit to share more about eye tracking, after providing a excellent training on eye tracking to inform user-centered design of digital health interventions. Learn more about Dr. Djasmasbi and her work [here](#).

1. What is eye tracking?

Eye tracking is a research methodology that utilizes sensor-based devices (eye trackers) to measure where and for how long a person looks at various parts of a visual scene. These devices unobtrusively collect data without burdening users, making them invaluable for studying digital experiences and cognitive engagement. Modern eye trackers, with their high sampling rates, are considered the gold standard for capturing the complex and dynamic nature of information processing and decision-making behavior.



“*These findings highlight the potential of eye tracking in developing smart technologies that can identify those at higher risk of suicide based on their eye movement patterns.*”

2. What are the benefits of using eye tracking for technology-based suicide interventions?

By allowing researchers to literally 'see' through users' eyes, eye tracking provides a valuable tool for assessing and enhancing the design of technology-based suicide interventions. Eye trackers offer insights into subtle yet important nuances in cognitive processes that are typically not measurable with traditional research methods (e.g., surveys or interviews). For example, research shows that eye movement patterns can reveal significant differences in engagement with a medical decision aid, when self-reported data fails to detect differences in technology experience (**Norouzi Nia et al. 2021**).

In addition to improving existing interventions, eye tracking can facilitate the development of next-generation smart technologies for suicide prevention. For instance, eye tracking sensors can enable systems to automatically detect high cognitive load (**Shojaeizadeh et al. 2019**). This detection can then trigger personalized interventions aimed at reducing cognitive overload, thereby maintaining user engagement with the intervention.

Our research team has observed significant differences in the visual patterns of individuals with health symptoms such as anxiety (**Alrefaei et al. 2023a**) and chronic pain (**Alrefaei et al. 2023b**) compared to healthy subjects. These findings highlight the potential of eye tracking in developing smart technologies that can identify those at higher risk of suicide based on their eye movement patterns.





> UPCOMING CONFERENCES

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Submit an abstract for the Association of Behavioral and Cognitive Therapies (ABCT), Suicide and Self-Injury Special Interest Group! You need to be a member to submit, which is easy to sign up. Dr. Edwin Boudreaux, Katherine Dixon-Gordon and Lourah Kelly are planning to attend ABCT 2024 (Nov 14-17 in Philadelphia, PA).



All applicants for the SIG Poster Expo must submit SIG membership dues for the 2024-2025 year prior to submitting an abstract and be current members of ABCT. Dues are \$10 for students and \$20 for professionals. Send payment through PayPal to abctsssig@gmail.com with your preferred email address in the notes line.

SIG Poster Exposition (deadline Friday, August 9th)

Please upload your poster abstract and enter your poster presenter's information [here](#). Abstracts should be 500 words or less. In your abstract, please describe the relevance of your research to underrepresented groups or efforts to increase diversity, equity, inclusion or accessibility, if applicable.

Submissions should be formatted so that the title and identifying information of the authors appear on the first page, and the body of the abstract appears on the second page. The title of the poster should be in upper and lower case, using lower case only for conjunctions, prepositions, and articles that are 3 letters or less. Include authors in their proper order, followed by their affiliation (no departments or centers or secondary listings). When multiple authors are at the same institution, you may group them under a single affiliation.

Save the date for the Annual Suicide Prevention Conference, hosted at the Best Western Premier - the Central Hotel and Conference Center in Harrisburg, PA. Click [here](#) for more details!



> OTHER UPCOMING EVENTS



Check out CAPES in the Practice Based Research Center Meeting from April 2024 - for an overview of CAPES, our mission, and research aims to push the field forward in using technology to implement compassionate suicide care.

Watch the full recording [here](#).



National Institute of Mental Health

CAPES is walking and raising funds and awareness for suicide prevention at the annual American Foundation for Suicide Prevention Walk in September 2024. Join our team [here](#). Order a CAPES t-shirt [here](#).



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Our Summer Intern, Arba Kambari, created new branding for our social media. Check us out by clicking on these icons!



Newsletter formatted and designed by: Nancy Hu