



Highlights of the *Prioritized Research Agenda*

The *Prioritized Research Agenda* is organized around six key questions with three short-term and three long-term research objectives under each key question. Those key questions and research objectives—as well as the research pathways that will lead to achieving those objectives—can be found in the both the *Prioritized Research Agenda* and its companion piece, *Suicide Research Prioritization Plan of Action*.

In addition, the *Prioritized Research Agenda* highlights the following cross-cutting themes:

- Enhance and extend surveillance measures of suicide burden of both national and community-level scope. This information must be timely and useable to determine suicide burden. Information on the natural history of when and how individuals move through low- and high-risk states is a critical need.
- Leverage investments by encouraging the use of: a) common data elements in all suicide research; b) plans for data banking (e.g., brain banks, imaging, and genetic repositories) as appropriate; and c) data sharing with appropriate consent and privacy protections (e.g., consistent approaches to self-reports, neurocognitive assessments, core biological markers).
- Use patient registries and rigorous designs to test the feasibility of fast-acting medications. Consider community strategies to reduce access to lethal means. Test new technologies (e.g., imaging, neuropsychology approaches, peripheral blood marker) for prediction of risk and/or intervention response.
- Field studies of practical, randomized trials to determine the benefits of quality improvement in health care systems. Adapt and test appropriate components within other systems that have responsibility for housing or managing at-risk populations (e.g., justice, education, and services for older adults).
- Use multi-disciplinary approaches to understand and harness media influence (e.g., social, entertainment, and gaming sectors) and community values on individual means preferences and behaviors.
- Test approaches to initiate and maintain healthy behaviors and/or interventions that are aimed at reducing risk factors, including technological enhancements to facilitate social connections and help-seeking.
- Include measures of suicidal behavior outcomes into studies targeting known risk factors (e.g., interpersonal violence, depression, and substance abuse trends) to test the putative role of the risk factors. This will leverage other investments in prevention and treatment studies to inform suicide research. Given the higher non-suicide mortality observed among people who attempt suicide, suicide prevention efforts may reduce other mortality outcomes.
- Determine how to improve the adoption, fidelity of implementation, and sustainability of effective suicide prevention programs, with attention to efficient ways of training various types of providers (from lay providers to specialists).