

Supplementary Online Content

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eTable 1. Standard Care Received by Condition

eTable 2. Recent Suicide Attempt Details

eTable 3. Hurdle Model and Logistic Regression: Complete Case Analyses

This supplementary material has been provided by the authors to give readers additional information about their work.

eTable 1. Standard Care Received by Condition

Variable ^c	Participants, No. (%)	
	Standard Care (n=223) ^a	Caring Contacts (n=232) ^b
Psychosocial treatment		
Individual psychotherapy ^d	195 (87.4)	206 (88.8)
Group psychotherapy/skills training ^e	41 (18.4)	36 (15.5)
Substance use treatment ^f	41 (18.4)	34 (14.7)
IOP/PHP ^g	19 (8.5)	25 (10.8)
Spiritual counseling or direction ^h	15 (6.7)	17 (7.3)
Other treatment ⁱ	38 (17.0)	52 (22.4)
No treatment ^j	16 (7.2)	10 (4.3)
Psychotropic medications		
Medication	185 (83.0)	191 (82.3)
No medication	38 (17.0)	41 (17.7)

^a 223/328 (68%) of Standard Care participants provided detailed treatment data at 12 months.

^b 232/329 (70%) of Caring Contacts participants provided detailed treatment data at 12 months.

^c Treatments are not mutually exclusive except for “no treatment” category.

^d Individual psychotherapy received outside of comprehensive programs (e.g., substance abuse program, behavioral health intensive outpatient program).

^e Group psychotherapy or skills training received outside of comprehensive programs (e.g., substance abuse program, behavioral health intensive outpatient program).

^f Formal substance use programs including Army Substance Abuse Program (ASAP), Substance Abuse Counseling Center (SACC), Substance Abuse Rehabilitation Program (SARP), and civilian/Veterans programs.

^g Behavioral health or co-occurring disorders intensive outpatient or partial hospitalization program.

^h Includes Army and Navy Chaplains as well as community pastoral counseling.

ⁱ Includes case management, intake or evaluation only without subsequent services, acute/crisis walk-in to installation or VA behavioral health clinic, safety check in installation behavioral health clinic, couples/family counseling, Family Advocacy Program services, telehealth, neurofeedback.

^j No outpatient psychosocial treatment received during the 12-month follow-up period.

eTable 2. Recent Suicide Attempt Details^a

Variable	Participants, No. (%)		
	All (n=657)	Standard Care (n=328)	Caring Contacts (n=329)
Past-year suicide attempts at baseline			
Any	171 (26.0)	93 (28.4)	78 (23.7)
If any, M (SD)	1.46 (2.45)	1.67 (3.27)	1.22 (0.64)
Mdn (IQR)	1 (1-1)	1 (1-1)	1 (1-1)
Most lethal suicide attempt			
Lethality rating, M (SD) ^b	3.76 (1.27)	3.66 (1.22)	3.88 (1.32)
Mdn (IQR)	4 (3-5)	3 (3-5)	4 (3-5)
Method			
Cutting/stabbing	20 (11.7)	13 (14.0)	7 (9.0)
Overdose/poisoning	91 (53.2)	50 (53.8)	41 (52.6)
Hanging/strangulation/asphyxiation	26 (15.2)	12 (12.9)	14 (17.9)
Firearm ^c	9 (5.3)	5 (5.4)	4 (5.1)
Other ^d	25 (14.6)	13 (14.0)	12 (15.4)
Suicide attempts during follow-up			
Any ^e	55 (11.9)	34 (14.9)	21 (9.0)
If any, M (SD) ^f	1.36 (0.85)	1.16 (0.37)	1.72 (1.27)
Mdn (IQR)	1 (1-1)	1 (1-1)	1 (1-2)
Most lethal suicide attempt			
Lethality rating, M (SD) ^{b,g}	3.94 (1.28)	3.97 (1.31)	3.90 (1.25)
Mdn (IQR)	4 (3-5)	4 (3-5)	4 (3-5)
Method			
Cutting/stabbing	6 (11.1)	2 (5.9)	4 (20.0)
Overdose/poisoning	32 (59.3)	21 (61.8)	11 (55.0)
Hanging/strangulation/asphyxiation	10 (18.5)	7 (20.6)	3 (15.0)
Firearm ^c	3 (5.6)	2 (5.9)	1 (5.0)
Other ^h	3 (5.6)	2 (5.9)	1 (5.0)
Method of all suicide attempts assessed during follow-up ⁱ			
Cutting/stabbing	13 (16.9)	3 (7.5)	10 (27.0)
Overdose/poisoning	41 (53.2)	24 (60.0)	17 (45.9)
Hanging/strangulation/asphyxiation	12 (15.6)	8 (20.0)	4 (10.8)
Firearm ^c	3 (3.9)	2 (5.0)	1 (2.7)
Other ^j	8 (10.4)	3 (7.5)	5 (13.5)
Lethality categorization of all suicide attempts assessed during follow-up ^k			
Low lethality (1-2)	13 (16.9)	5 (12.5)	8 (21.6)
Moderate lethality (3-4)	43 (55.8)	23 (57.5)	20 (54.1)
High lethality (5-6)	21 (27.3)	12 (30.0)	9 (24.3)

^a Assessed by Suicide Attempt Self-Injury Count.

^b Coded on 1-6 scale in which “1” is “very low” (e.g., overdose on five pills or less (unless medication potentially lethal in low doses), “4” is “high” (e.g., overdose on 11-30 pills potentially lethal in low doses or combined with large amount of alcohol; stabbing to body), and

“6” is “severe” (e.g., hanging with feet above the ground; pulling the trigger of a loaded gun aimed at a vital area).

^c All suicide attempts via firearm resulted in misfire with one exception in which the bullet struck a wall rather than the participant. In all cases, lethality was scored “6” as described above.

^d Includes n=9 involving motor vehicle (e.g., car/motorcycle accident, jumping in front of/from moving vehicle); n=7 combination methods (e.g., overdose and cutting); n=2 jumping from high place; n=2 attempted drowning; n=1 hitting head (e.g., against concrete wall); n=3 attempted exsanguination via peripheral venous catheter; n=1 attempted electrocution.

^e Based on follow-up assessment of 461 participants (228 SC; 233 Caring Contacts).

^f Based on follow-up assessment of 456 participants (226 SC; 230 Caring Contacts). Excludes five participants who disclosed one or more suicide attempts, but were unwilling or unable to disclose whether additional suicide attempts occurred. Count data were therefore not available for these five participants with at least one suicide attempt.

^g Highest-lethality suicide attempt could be rated for 54/55 participants with one or more suicide attempts. Lethality was missing for one participant, who refused to disclose any details about the suicide attempt that occurred.

^h Includes n=2 involving motor vehicle (e.g., car/motorcycle accident, jumping in front of/from moving vehicle); n=1 combination method (e.g., overdose and cutting).

ⁱ Coded for 77/78 reported attempts. Method could not be determined for one participant, who refused to disclose any details about the suicide attempt that occurred.

^j Includes n=3 involving motor vehicle (e.g., car/motorcycle accident, jumping in front of/from moving vehicle); n=2 combination methods (e.g., overdose and cutting); n=3 victim-precipitated violence (i.e., started physical fights with intent to die).

^k Categorizes lethality ratings for 77/78 suicide attempts during follow-up. Lethality was missing for one participant, who refused to disclose any details about the suicide attempt that occurred.

eTable 3. Hurdle Model and Logistic Regression: Complete Case Analyses

Variable	Logistic Regression Portion ^a					Counts Portion (Negative Binomial)				
	b	SE _b	OR	95% CI	p	b	SE _b	RR	95% CI	p
Current Ideation at 12 months ^b										
Current Ideation at Baseline	0.02	0.01	1.02	1.00 to 1.05	.03	0.02	0.01	1.02	1.00 to 1.05	.05
Caring Contacts	-0.02	0.19	0.98	0.68 to 1.42	.92	0.11	0.19	1.12	0.78 to 1.62	.55
Worst Ideation since Baseline ^c										
Current Ideation at Baseline	0.04	0.01	1.04	1.01 to 1.07	.01	0.02	0.004	1.02	1.01 to 1.03	<.001
Caring Contacts	-0.59	0.27	0.55	0.32 to 0.95	.03	0.05	0.07	1.05	0.91 to 1.21	.53
Any Suicide Risk Incidents since Baseline ^{d,g}										
Suicide Risk Incident Count at Baseline	0.06	0.23	1.07	0.68 to 1.66	.78					
Caring Contacts	-0.11	0.28	0.89	0.52 to 1.54	.68					
Any ED Visit for Suicide since Baseline ^{e,g}										
ED Visit for Suicide Count at Baseline	0.19	0.20	1.22	0.82 to 1.79	.33					
Caring Contacts	-0.15	0.27	0.86	0.51 to 1.46	.57					
Any Suicide Attempts since Baseline ^{f,g}										
Log Transformed Lifetime Suicide Attempts	0.37	0.17	1.44	1.03 to 2.02	.03					
Caring Contacts	-0.60	0.30	0.55	0.31 to 0.99	.04					

Abbreviations and Definitions: ED, Emergency Department.

^a Caring Contacts condition = 1, Standard Care condition = 0.

^b Assessed by Scale for Suicide Ideation–Current; scores range from 0–38; higher scores indicate more severe ideation; based on 460 complete cases for variables in this model.

^c Assessed by Scale for Suicide Ideation–Worst; scores range from 0–38; higher scores indicate more severe ideation; based on 420 complete cases for variables in this model.

^d Assessed by Treatment History Interview–Military; defined as hospital or residential treatment admission or medical evacuation to prevent suicide; based on 458 complete cases for variables in this model.

^e Assessed by Treatment History Interview–Military; defined as emergency department presentation to prevent suicide; based on 457 complete cases for variables in this model.

^f Assessed by Suicide Attempt Self-Injury Count; based on 461 complete cases for variables in this model.

^g Binary logistic regression model only.