June 5, 2018

Federal Communications Commission

445 12th Street, SW

Washington, DC 20554

Re: Docket 18-336

Implementation of the National Suicide Hotline Improvement Act of 2018

Dear Commissioners:

I write on behalf of Lines for Life to urge you to designate a 3-digit code as a Behavioral Health and Suicide Crisis Lifeline – and to reject the North American Numbering Council (NANC) recommendation that no such line should be established.

Frankly, I believe the NANC simply fails to appreciate the severity of the mental health and suicide crisis we are facing in the United States – and as such they elevated convenience and status quo over the desperate need for an easy to access crisis service -- a 911 for the brain.

Over 47,000 people in the United States died by suicide in 2017, according to the Centers for Disease Control. Put another way: **More Americans died by suicide 2017 than were killed in action in 40 years of the Vietnam War.[[1]](#footnote-1)** 2018 likely saw at least 47,000 more deaths by suicide, and we will see another 47,000 or more deaths again this year.

Suicide was the second leading cause of death among young people in the United States, and there were more than twice as many suicides (47,173) in the United States as there were homicides (19,510).

And of course the deaths are just the tip of the iceberg – 1.3 million adults in the United States attempted suicide in 2017, and nearly 10 million had serious thoughts of suicide.

The bottom line is that we are in the midst of a crisis in the United States – we are losing loved ones, neighbors and colleagues to suicide at a shocking and unprecedented rate.

So I am most gravely disappointed to learn that the NANC has opted for status quo and half-measures to address the grave mental health crisis we are facing as Americans. It seems apparent that the NANC’s reluctance is grounded in devotion to the status quo – when the status quo of 47,000 dead by suicide is simply unacceptable.

The time is now to embrace mental and emotional wellness as a national priority – and to deliver

3-digit access to crisis intervention services. Three-digit access will:

* Deliver timely and effective crisis intervention services to millions of Americans
* Make it easier to connect people in need with help
* Meet the *dramatically* growing need for crisis intervention
* Help eliminate the stigma of mental health by normalizing help seeking for mental illness with the same priority we deliver for services like fire and rescue, social service referral, and telecommunication referral for people with hearing disabilities

Lines for Life is Oregon’s National Suicide Prevention Lifeline (NSPL) affiliate, and we work with the Veterans Crisis Line (VCL) to serve the nation’s veterans as well. All in all, we service over 50,000 families each year through these two programs. Our highly skilled call counselors go through extensive training and operate under careful supervision to provide excellent, safe mental health crisis intervention. Our dedicated call counselors save lives – quite literally – every day. And like all NSPL affiliates, we at Lines for Life are subject to rigorous accreditation to ensure safe, healthy services to our clients in crisis – including accreditation by the American Association of Suicidology.

We believe 3-digit access to behavioral health and suicide crisis intervention is an important opportunity to meet the growing crisis of behavioral health in the United States.

In 2004, the Substance Abuse and Mental Health Services Administration launched the National Suicide Prevention Lifeline as an integrated national effort to reach people in crisis, using the single number 1-800-273-TALK as a uniform access point to connect to crisis services. The NSPL has been a tremendous success – growing from just a few calls that first year to over 2 million last year, including over 700,000 calls to the national Veterans Crisis Line.

The National Suicide Prevention Lifeline saves lives every day, helping thousands of people each day find a way forward through their darkest moments. Highly trained call counselors, at the VCL and over 160 call centers across the nation, help over 2 million Americans and their families each year cope with the challenges of mental wellness and suicidal crisis. The NSPL network is proof positive of the power of behavioral health and suicide crisis intervention. Extensive, independent research has proven the effectiveness of crisis intervention by the highly trained counselors of the NSPL affiliates nationwide.

The NSPL has experienced dramatic growth in the last five years – here at Lines for Life, our NSPL Lifeline volume has more than doubled in the last two years alone, and centers around the nation have likewise experienced dramatic growth.

**Three-digit access is a natural next step given the growth and proven effectiveness of the National Suicide Prevention Lifeline.**

And 3-digit access will also help remove the stigma associated with mental health challenges. 3-digit access to crisis services represent a national recognition that seeking help for behavioral health and suicidal crisis is just as much a part of life as seeking help for fire, for injury, or for other health and wellness needs. I cannot tell you how many parents I have met – parents who lost their child to untreated crisis – who have told me that they lost their child to *stigma*. These children grew up in a world were getting help for mental health crisis is shunned, uncool and something we don’t talk about.

Finally, I note that the NANC’s suggests instead of a behavioral health line that 211Info be used for 3-digit access to crisis intervention, rather than a dedicated behavioral health and suicide lifeline. This is, frankly, a preposterous suggestion that minimizes the imperative of effective crisis intervention and would simply add delay and complexity to obtaining crisis services – rather than easing access as Congress is demanding.

If you for one moment consider using 211Info as a suicide crisis line, I urge you to pick up the phone and call 211Info – what you will find on the other end of the line is nearly endless automated phone tree that navigates you through a broad array of sevices – from rent assistance to radon remediation.

But the very last thing a person in crisis needs is a lengthy automated phone tree – what our fragile callers need is a **human connection** – with a behavioral health counselor specifically trained to help people thinking about killing themselves….

211Info provides a vital service – connection to a vast array of social services. But 211Info’s mission and expertise do not include mental health services – and the reality is that crisis calls to 211 generally result in referral to an NSPL affiliate. **Using 211 as a crisis portal would thus *add a layer* – of time and delay – to people in crisis who need help *now*.** Moreover, using 211 as a crisis portal would forfeit the value in normalizing help seeking that would come from creating dedicated Behavioral Health Crisis and Suicide Lifeline. In short, we have great respect and appreciation for our colleagues at 211Info, and we support close partnership and jointly operated services where ever possible – but the reality is that mental health crisis intervention requires a very different expertise, and our nation’s crisis in suicide and behavioral health warrants a service devoted exclusively to meeting these needs – not a service added to the long list of non-mental health related social services currently managed by 211Info.

Thank you very much for your interest and thoughtful approach to this important issue. We stand at the threshold of a revolution in improved mental health and wellness services for people throughout the United States. The FCC is poised to take an important step in that revolution by designating a 3-digit Behavioral Health and Suicide Crisis Lifeline. As a longtime member of the National Suicide Prevention Lifeline, we at Lines for Life stand ready to help make this national service a reality, and we urge the FCC to make this designation.

Very truly yours,

*Kelsey Arias*

Swing-Shift Supervisor

1. Compare <https://www.nimh.nih.gov/health/statistics/suicide.shtml> with <https://www.archives.gov/research/military/vietnam-war/casualty-statistics> [↑](#footnote-ref-1)