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 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.

The NANC fails to appreciate the severity of the mental health and suicide crisis we are facing in the United States. 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). More than 1.3 million adults in the United States attempted suicide in 2017, and nearly 10 million had serious thoughts of suicide.

Please provide 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

211Info should not be used as a substitute for 3-digit access to crisis intervention. It would simply add delay and complexity to obtaining crisis services. 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 services – from rent assistance to radon remediation. **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.

Kind regards,

Kristen Tranetzki