

FREEDOM FROM RELIGION *foundation*

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December 10, 2018

Federal Communications Commission
445 12th Street SW
Washington, D.C. 20554

**Re: Implementation of the National Suicide Hotline Improvement Act of 2018
(WC Docket No. 18-336, CC Docket No. 92-105)**

Dear Madam or Sir:

We are writing on behalf of the Freedom From Religion Foundation, and our members in all 50 states, in response to the request for public comments regarding the implementation of the National Suicide Hotline Improvement Act of 2018¹ (WC Docket No. 18-336, CC Docket No. 92-105). The Act directs the Commission to coordinate with other federal agencies to 1) conduct a study on the feasibility of creating a 3-digit dialing code for a national suicide and prevention mental health crisis hotline system, and 2) analyze how well the current National Suicide Prevention Lifeline is working to address the needs of veterans. We submit these comments to highlight the need for any designed hotline system to support specialization of services for at-risk populations and, in particular, support for religiously unaffiliated individuals, individuals facing a faith crisis, and individuals who have faced religion-based trauma.

FFRF is a national nonprofit organization with 32,000 members nationwide. Our purposes are to protect the constitutional principle of separation between state and church, and to educate the public on matters relating to nontheism.

Studies have shown that, in the United States, religiously unaffiliated individuals who are depressed have higher rates of suicidal behavior.² Despite this disparity, there is a significant lack of research into the minority stress experiences of atheists and other religiously unaffiliated people in the U.S. This dearth of research is particularly notable given the increasing size of religiously unaffiliated populations. Currently, about 24% of adults are religiously unaffiliated, and atheists and agnostics make up about 7% of the total

¹ National Suicide Hotline Improvement Act of 2018, Pub. L. No. 115-233, H.R. 2345, 115th Congress (2018), available at www.govtrack.us/congress/bills/115/hr2345/text.

² Dervic K, Oquendo MA, Grunebaum MF, Ellis S, Burke AK, and Mann JJ (2004), *Religious Affiliation and Suicide Attempt*, AM. J. OF PSYCHIATRY, published online: 1 Dec. 2004, available at ajp.psychiatryonline.org/doi/full/10.1176/appi.ajp.161.12.2303#.

population.³ Counselors have highlighted the necessity for a greater understanding of the needs and beliefs of atheists and religiously unaffiliated people in order to better serve these populations.⁴

Therefore, we make the following recommendations to ensure adequate training and/or specialization of services to meet the needs of these at-risk populations:

1. **Make referrals for secular therapy.** Ensure that hotline counselors are aware that non-religious therapists are available to assist callers after any immediate crisis has been resolved. Anecdotally, many atheists and religiously unaffiliated people report that their therapist or counselor has tried to push religion on them, which is often counterproductive. The Secular Therapy Project⁵ can help clients to find appropriate post-crisis counseling.
2. **Make referrals for peer-based secular support.** Once they are stabilized, callers who mention a faith crisis, loss of faith, or fear of hell may be referred to the Recovering from Religion Helpline,⁶ which can help identify resources to provide support and help with coping. Counselors report that people often go through some level of depression immediately after leaving religion, which is almost always related to loss of social support.
3. **Normalize faith crisis and accompanying isolation as a form of loss requiring support.** People leaving religion need extra social support because of the shunning, guilt, and shame they frequently experience from their religious associates. Individuals going through a faith crisis frequently report that family and friends can abandon them almost overnight, and that those who stay in contact may harangue them with harmful religious messages. This pattern is often related to suicidal ideation. Therefore, hotline counselors must be trained to help callers understand that leaving religion or having a faith crisis can be a significant loss, that this would be difficult for almost anyone to handle alone, and that there are sources of support available to them.

³ Cox D & Jones RP (2017), *America's Changing Religious Identity: Findings from the 2016 American Values Atlas*, PUBLIC RELIGION RESEARCH INSTITUTION.

⁴ D'Andrea LM & Sprenger J (2007), *Atheism and Nonspirituality as Diversity Issues in Counseling*, COUNSELING AND VALUES, 51(2), 149–58.

⁵ The Secular Therapy Project (www.SecularTherapy.org) provides therapists who are vetted, well-trained, and who use no religious or supernatural concepts in their work. The therapy is not free, as these are professionals in private practice, but the Secular Therapy Project search service is entirely free to both clients and therapists.

⁶ The Recovering from Religion Helpline (www.recoveringfromreligion.org) provides support by putting people in faith crisis in touch with local groups. With hundreds of groups in their database, the Helpline can assist callers to find timely social support. The Recovering from Religion Helpline also has a private online community that provides support for those who have no groups near them or who cannot otherwise connect with a local group.

4. **Make referrals for secular addiction recovery services.** Dependency on alcohol or drugs is a major risk factor for suicidality, and hotline counselors will frequently need to provide counseling or make referrals to help callers deal with these issues. However, many addiction-recovery programs and peer-based recovery services employ faith-based or religious counseling, which is inappropriate for atheist or religiously unaffiliated callers. Therefore, hotline counselors should be prepared to make referrals to secular recovery services such as SMART Recovery.⁷
5. **Avoid reinforcing harmful religious messages.** One pattern therapists often report in clients suffering a faith crisis is trauma due to a fear of hell. Certain religions program people to believe that they will go to hell if they don't believe in a very specific and detailed way. Since such belief is virtually impossible to maintain, the person starts having doubts that they will never be good enough and believes that they are inevitably destined for hell. This pattern may exacerbate depression and suicidality, as such individuals may come to believe that life has no meaning since they have no hope of heaven. A counselor unaccustomed to dealing with these issues may have a negative impact on callers by reinforcing these religious messages.
6. **Address isolation among the religiously unaffiliated.** Finally, those who have been religiously unaffiliated for many years, or even their whole lives, can feel quite isolated in many parts of the country where church is the primary social event in people's lives. Hotline counselors must be trained to recognize that isolation and loneliness are critical factors for this population regardless of how long one has been atheist or religiously unaffiliated.

If you should have any questions regarding FFRF's comments on implementation of the National Suicide Hotline Improvement Act, please contact us at 608-256-8900 or via email at info@ffrf.org.

Very truly,



Dan Barker and Annie Laurie Gaylor
Co-Presidents

⁷ SMART Recovery (<https://www.smartrecovery.org/>) is an abstinence-based, not-for-profit organization with a sensible self-help program for people having problems with drinking and using. The program uses a cognitive-behavioral (thinking/doing) psychotherapy called Rational Emotive Behavior Therapy (REBT), and it does not require belief in powerlessness, religion, or spirituality.