



In The News

988 – Suicide and Mental Health Hotline

In 2022, individuals in suicidal crisis seeking help will have a number that is easy to remember and quick to dial to reach the National Suicide Prevention Lifeline.

The Federal Communications Commission (FCC) unanimously voted to finalize 988 as the three-digit number Americans can dial and be directed to the 24/7 national hotline.

Callers currently reach the hotline by phoning the 10-digit number: 1-800-273-8255 (TALK). Even after 988 is active, callers will still be able to reach the hotline through the original 10-digit number.

The lifeline doesn't offer a texting service, but has a chat portal on its website. The FCC said it could revisit the issue if the lifeline develops a text option.

Several other text options are available, including the Veterans Crisis Line (838255) and the nonprofit Crisis Text Line (741741).

Americans are currently dealing with several crises -- including the coronavirus pandemic, an economic downturn tied to the pandemic, civil unrest over police brutality -- that can cause distress and anxiety and contribute to suicide. Since 2008, suicide is the 10th leading cause of death in the United States, according to the US Centers for Disease Control and Prevention. It has become the second leading cause of death for Americans ages 10-34.

America's suicide rates are at the highest level since World War II, with an increase of 33% from 1999 to 2017 alone, according to the CDC. Suicide rates are highest among Native American and White populations and higher in rural areas than urban. Military veterans and LGBTQ youth are disproportionately impacted by suicide.

<https://www.cnn.com/2020/07/16/politics/fcc-national-suicide-hotline/index.html>

Self-Care Corner

Refresher – Raising the Subject

As peer recovery coaches, we aim to use motivational interviewing skills effectively to build rapport with our patients as we begin our conversations. Introductions that include who we are and why we are seeing the patient are critical steps in helping the patient begin a comfortable and motivational conversation. Below are some tips to help support Raising the Subject.

Acknowledging that the patient admitted to alcohol/substance use and thanking them for their honesty are effective ways to introduce the conversation. If there was a screening tool used, **explaining the results**, including the recommended range of healthy use, may give the patient a better understanding of why you are raising this subject. Asking **permission** to engage in conversation with the patient gives them a choice and supports trauma-informed care as they are empowered at the beginning of the conversation.

Asking **open-ended questions** is a helpful way to engage the patient in conversation while letting them take the lead. By asking open-ended questions, we are allowing the patient to direct the conversation in a manner they feel comfortable. One examples includes:

“Good morning, my name is ___ and I am a peer recovery coach. I’d like to talk to you a little about your alcohol/drug use, if that’s ok?”

Words/Phrases to avoid:

- “Drug problem” – We cannot assume that patients see their substance use as a problem.
- “Treatment” in your introduction – A coach’s support can include so much more than treatment. Before we mention treatment, it’s far more effective to use our tools to gauge the patient’s readiness to change, and stage of change, to determine if treatment is in fact, going to be part of the conversation.

Coach-Connect

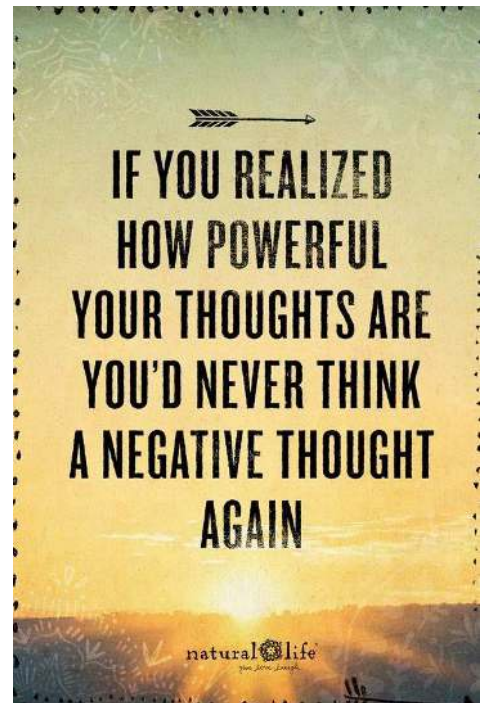
Before becoming the Obstetrics Peer Recovery Coach (OB PRC) for Harbor Hospital, Brenda worked as a PRC in their Emergency Department. The OB unit functions quite differently than the ED, and it took some time to acclimate to the slower-pace, but she soon realized her work was no less important.

Helping pregnant women and new mothers struggling with substance use is a passion of Brenda's. She exudes empathy and compassion from the moment she begins working with a patient.

Brenda said she preps for a patient conversation by saying she "gets me out of the way". What I think, what I feel, is not important. The patient is the focus."

She feels that reminding herself of this, sets the stage for an open, patient-centered conversation. Brenda also considers not just words, but tone and demeanor, especially when introducing herself and raising the subject. She encourages coaches to speak naturally, making eye contact with the patient, and ensuring it's obvious that the focus is on them and not 'gathering information', separating these interactions from others they have had in the healthcare setting.

We thank Brenda for all she does to care for some of our most vulnerable patients and doing so with such love and passion!



Do you want to submit something to be featured in the Mosaic Minute? *Let us know!*

We heard your feedback! The Mosaic Minute will now be accepting your submissions. Please reach out to us with your success stories, questions, pictures, or any other materials you would like to see highlighted [here](#).

Check out our [website!](#)

Follow, like, and subscribe.



Thank you for all you do!