

# These suicide hotline operators struggle with a surge of calls

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The man on the phone is desperate.

He's struggling to get to work after a car accident. He's thinking of walking into traffic to kill himself.

Crisis counselor Ariana Diaz, 24, murmurs and reassures him, gently asking about his life: "What are some things that have brought you joy?"

Diaz works at the Crisis Center of Tampa Bay, a nonprofit that answers calls in Hillsborough and Charlotte counties from those who contact 988, the national suicide prevention hotline.

"Have you ever attempted to end your life?" she asks. "Is there anything that eases the pain of what you're going through?"

Calls like this can last an hour or longer. And they're becoming more frequent, meaning more callers may not get an immediate answer.

Since 988 launched in mid-July, replacing the original 10-digit suicide hotline, calls have surged at the Tampa center. It used to receive an average of 80 to 100 per week. Now, it gets up to 400.

The influx has been overwhelming. Before 988, the center answered almost all suicide and mental health [crisis](#) calls. The rate has since dropped to 60%. More people are being redirected to backup call-takers, some of whom may be unfamiliar with the local health care system and what support is available for those in distress—or more callers are hanging up before they can get help.

The crisis center is racing to hire additional staff, hoping to boost its answer rate and prevent burnout among employees.

Diaz is a University of South Florida student who studies psychology.

She plays The Sims to relax and keeps a pineapple-shaped stress ball on her desk at work.

"Some people's stories are really difficult," she says.

The original 24/7 suicide prevention hotline launched in 2005.

The U.S. Substance Abuse and Mental Health Services Administration and New York nonprofit Vibrant Emotional Health set up the number, 1-800-273-8255.

Fifteen years later, and after a steady rise in national suicide rates, a bipartisan bill in Congress sought to make it easier to reach the hundreds of crisis counselors who offer confidential support to callers. The hotline's new dialing code would be simple, memorable: 988. It rolled out July 16.

Since then, calls have inundated the more than 200 centers across the country that answer the toll-free hotline. Federal officials have yet to heavily promote 988 via a marketing campaign, but news stories, social media and celebrities have drawn attention to it.

In August, calls to the hotline spiked almost 50% in the U.S. when compared to last year. Florida also reported a nearly 50% increase in calls, with 12,300 routed to the state's 12 centers. (A thirteenth center started to answer calls earlier this month).

Local centers are struggling with the heightened interest and changes to areas they cover.

Before 988, the Crisis Center of Tampa Bay was the main call center for Hillsborough County, but now it's responsible for both Hillsborough and Charlotte counties.

If the center doesn't answer a call within two minutes, it gets bumped to backup counselors.

Last year, Largo area nonprofit 211 Tampa Bay Cares was a backup call center for Pinellas County. In August, it became the primary center for nine counties, including Pinellas and Pasco.

211 Tampa Bay Cares used to receive up to 500 suicide and mental health crisis calls a month. Now, it gets as many as 1,700.

The rate of calls answered by the nonprofit has fallen from 65% to 30%. Many are being redirected to backup counselors, some of whom are outside the area, which isn't ideal.

When local call-takers pick up, they know which mental health resources are available in Tampa Bay. Counselors elsewhere might not.

The stakes are high. In 2021, there were 497 suicides reported among Hillsborough, Pinellas and Pasco residents—nearly triple the number of homicides, according to preliminary data from the Florida Department of Health.

Nationally, suicide was the 12th leading cause of death during the first year of the pandemic, claiming almost 46,000 lives.

Diaz sits nearly motionless at her desk in the Tampa crisis center. The first-floor room is quiet on a recent Wednesday afternoon, filled with sunshine, rows of computers and muffled conversation.

Wearing a headset, Diaz stares at her laptop and types up details about the man on the phone, who is experiencing suicidal thoughts.

He's in Southwest Florida. He has two children. He wants help.

Diaz, an intervention specialist who started at the center in February, tells him he's resilient. She directs him to Catholic Charities and a legal aid organization, where he can seek assistance after his car accident.

Mostly, she just listens.

It's important to make callers feel heard. Feel validated. Many just want a sympathetic ear.

"I'm glad that you called," Diaz says. "What do you feel like you're going to do for the rest of the day to stay safe?"

The man calms down, and the call ends after an hour and nine minutes.

"I feel like I was able to help," Diaz says.

The goal is to hire and train more people like Diaz, given the deluge of calls.

In late August, local centers received federal grant money to do so.

211 Tampa Bay Cares, which got more than \$800,000, is hiring 12 people. They'll be paid \$25 an hour, and many will start answering calls in the coming weeks.

The Crisis Center of Tampa Bay plans to hire 10. They'll earn between \$18 and \$20 an hour.

It's "gut-wrenching work," and recruitment can be difficult. It'll take months to fill the open positions and train hires, says Clara Reynolds, CEO and president of the crisis center, which received over \$750,000.

Turnover also is an issue. Typically, she says, call-takers burn out after

six months or a year. They're prone to compassion fatigue after deescalating emotional crises again and again.

Everyone finds a way to cope with the stress for as long as possible. At the crisis center, Nijah Slaughter drinks green tea and listens to R&B. She loves Chris Brown, Brandy, Tamar Braxton.

She also checks in with her coworkers. If someone's on a long call, she'll send them a message, asking if they're OK.

"We kind of feed off each other," says Slaughter, a lead intervention specialist who has worked at the center since March.

It's a tough job. Not knowing what happens after a call ends is the hardest part, she says. But trying to help those in distress makes it worthwhile. Some callers don't feel comfortable talking with friends or family, so they turn to 988 instead.

To help counter burnout, the center has a "self-care room" where employees can watch TV or play board games.

At 211 Tampa Bay Cares, leaders are beginning to host open forums for staff to discuss challenges.

"We want to know, 'What's the trend? What're you hearing? What tools do you wish you had that you didn't get?'" says Edward Perry, vice president of programs and services. "Is there anything y'all want to put on the table that you're concerned about?"

At the Tampa crisis center, another 988 call comes in.

Slaughter, 32, picks up. It's a local woman. Her adult son in Southeast Florida is suicidal. He told his family he's ready to die and has prepared

a bank account for his kids.

"OK, so this is happening right now, and you stated that you have an address for him, so you may have to call 911," Slaughter says.

She pauses.

"Definitely call 911."

The call ends, and Slaughter looks at a Tampa Bay Times reporter who is visiting the center. When someone calls on behalf of a family member, and the situation is dire, counselors urge them to contact first responders.

"I pray that he's still here," she says, "and they can get help to him immediately."

If you or someone you know is contemplating suicide, call or text 988 to reach the 988 Suicide & Crisis Lifeline or chat with someone online at [988lifeline.org](https://988lifeline.org).

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