

EMBRACE LIFELINE: LEBANON'S NATIONAL EMOTIONAL SUPPORT AND SUICIDE PREVENTION HELPLINE

IN COLLABORATION WITH THE NATIONAL MENTAL HEALTH PROGRAM AT THE
MINISTRY OF PUBLIC HEALTH

MONTHLY EMBRACE LIFELINE INDICATORS

REPORT DATE:

APRIL 2019

Introduction

Embrace Lifeline is the national helpline in Lebanon for emotional support and suicide prevention. As part of its mission, and in collaboration with the National Mental Health Program of the Ministry of Public Health (MOPH), Embrace Lifeline keeps track of its provided services both for quality assurance purposes and to report on the impact, quality, and frequency of use of its services. The below numbers are meant to offer a snapshot of the population that the Embrace Lifeline serves, taking into consideration that this information is recorded as accurately as possible while not all information may be available at all times. The metrics in this document can be considered representative of calls received during the reported time-period.

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embrace



Lebanese Republic
Ministry of Public Health
National Mental Health Programme

الجمهورية اللبنانية
وزارة الصحة العامة
البرنامج الوطني للصحة النفسية

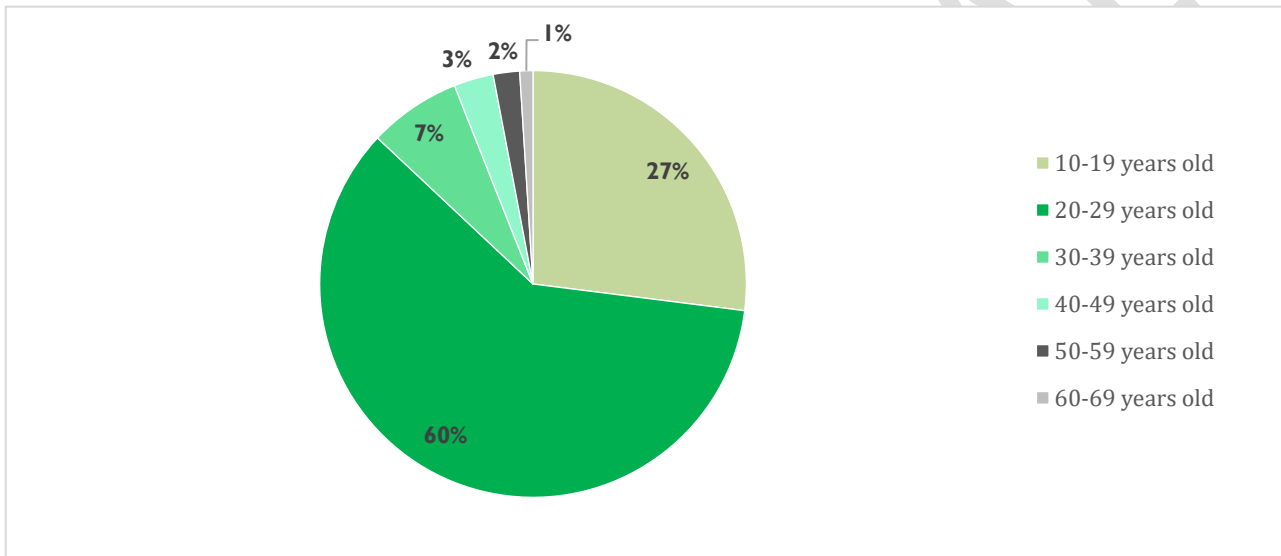


EMBRACE – MOPH/NMHP MONTHLY INDICATORS

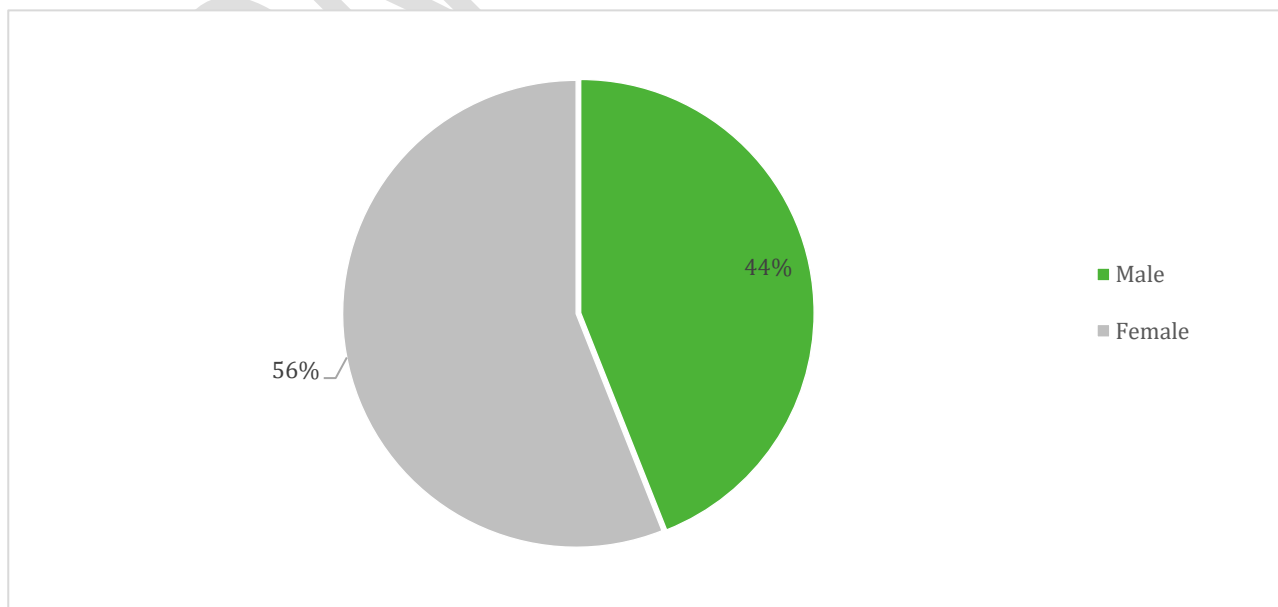
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| DATE | APRIL 2019 | TOTAL NUMBER OF CALLS WITH CAPTURED DATA | 191 |
| | | TOTAL NUMBERS OF CALLS INCOMING | NA |

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| I. | AGE OF CALLERS | MEAN AGE: | 23 |
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The majority 61% of calls were from people between 20- 29 years old, followed by 27% between 10-19 years old, followed by 7% between 30- 39 years old, and the remaining at 6% or below (40- 49 years old, 50- 59 years old and 60- 69 years old).

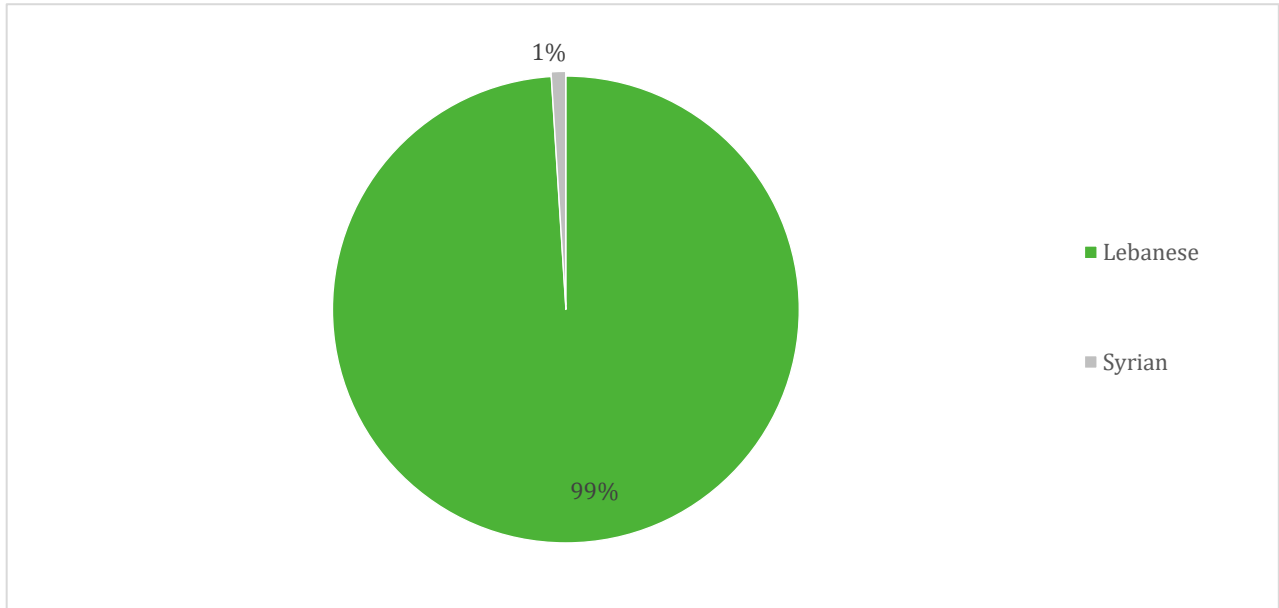


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| II. | SEX OF CALLERS | FEMALE | 56% |
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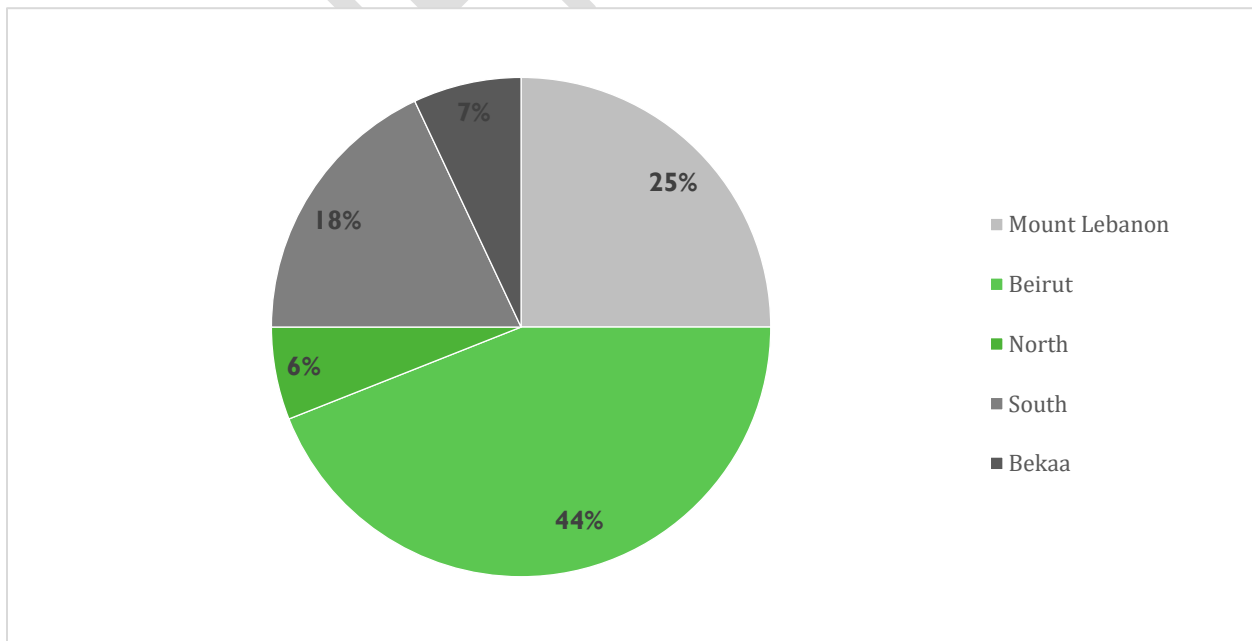
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| III. | NATIONALITY OF CALLERS | LEBANESE | 99% |
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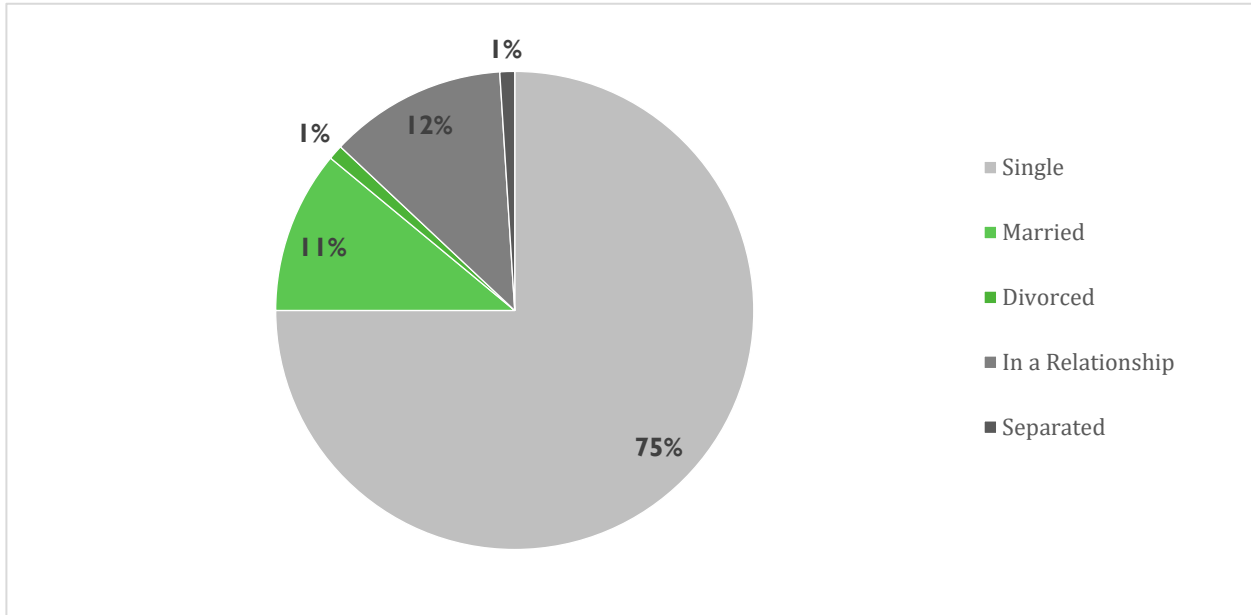
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| V. | COUNTRY OF CALLERS | LEBANON | 99% |
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| VI. | REGION OF CALLERS | BEIRUT | 44% |
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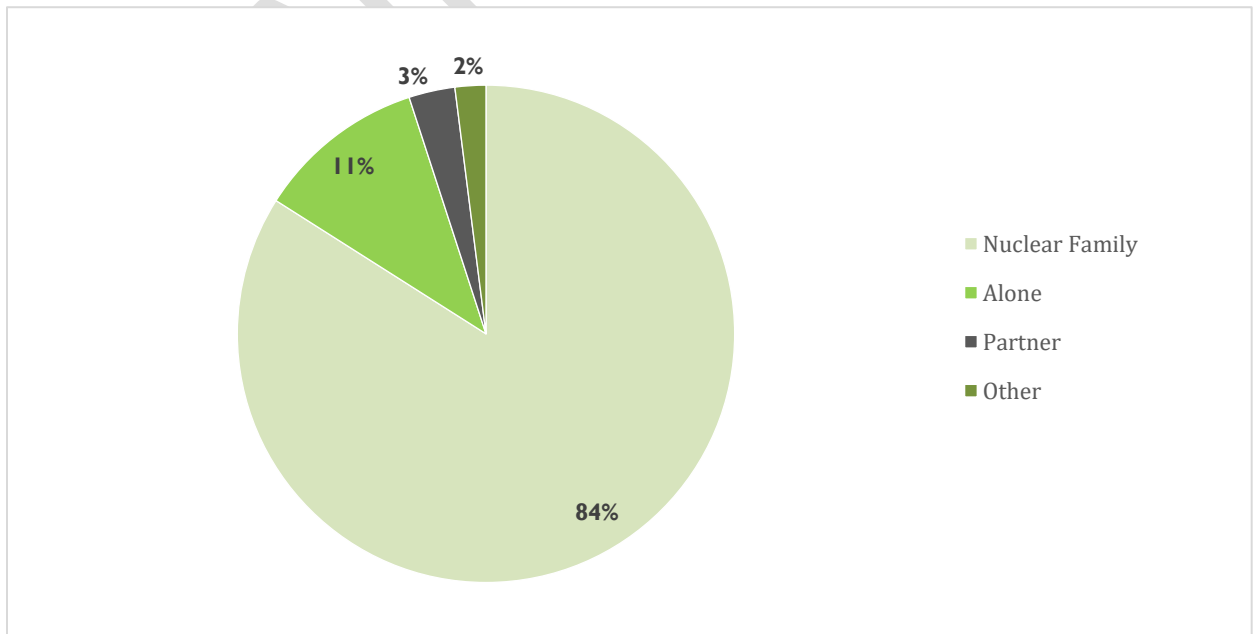


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| VII. | MARITAL STATUS OF CALLERS | SINGLE | 50% |
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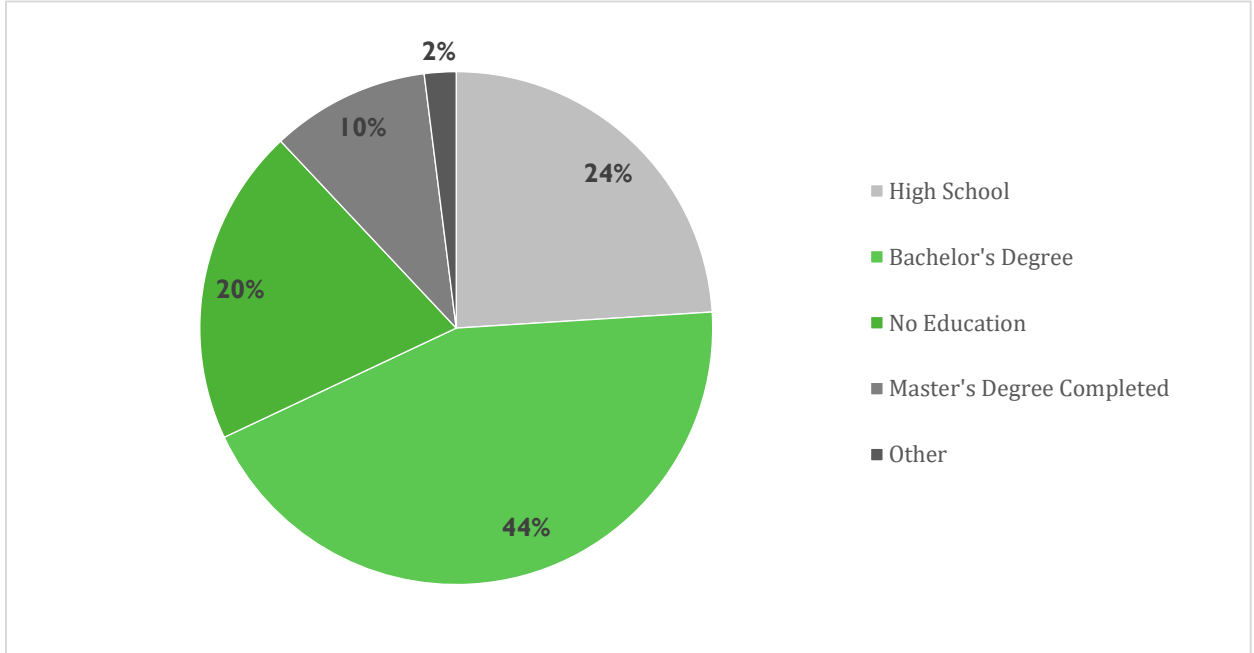


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| VIII. | CALLER LIVING WITH | NUCLEAR FAMILY | 84% |
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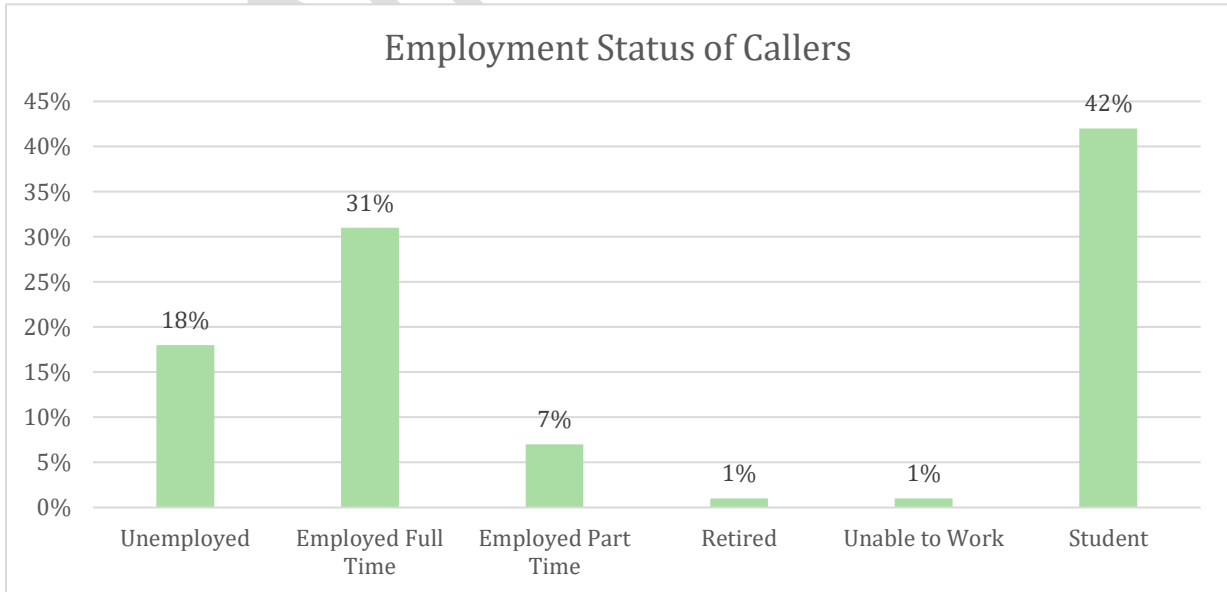


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| IX. | HIGHEST LEVEL OF EDUCATION OF CALLERS | BACHELOR'S DEGREE | 44% |
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| X. | EMPLOYMENT OF CALLERS | |
| *Percentages do not add up to 100% because each caller may have more than one status. | | |



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| XI. | CALLERS CURRENTLY RECEIVING MENTAL HEALTH SERVICES | n= 114 |
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59% of calls are from individuals who reported currently receiving mental health services

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| XII. | CALLERS WITH PASSIVE SUICIDAL IDEATION | n= 121/191 |
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54% of calls are from individuals who reported having passive suicidal ideations

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| XIII. | CALLERS WITH ACTIVE SUICIDAL IDEATION | n= 123/191 |
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43% of calls are from individuals who **had active suicidal ideations** when placing the call

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| XIV. | CALLERS WITH ACTIVE SUICIDAL IDEATION WITH INTENT | n= 60/191 |
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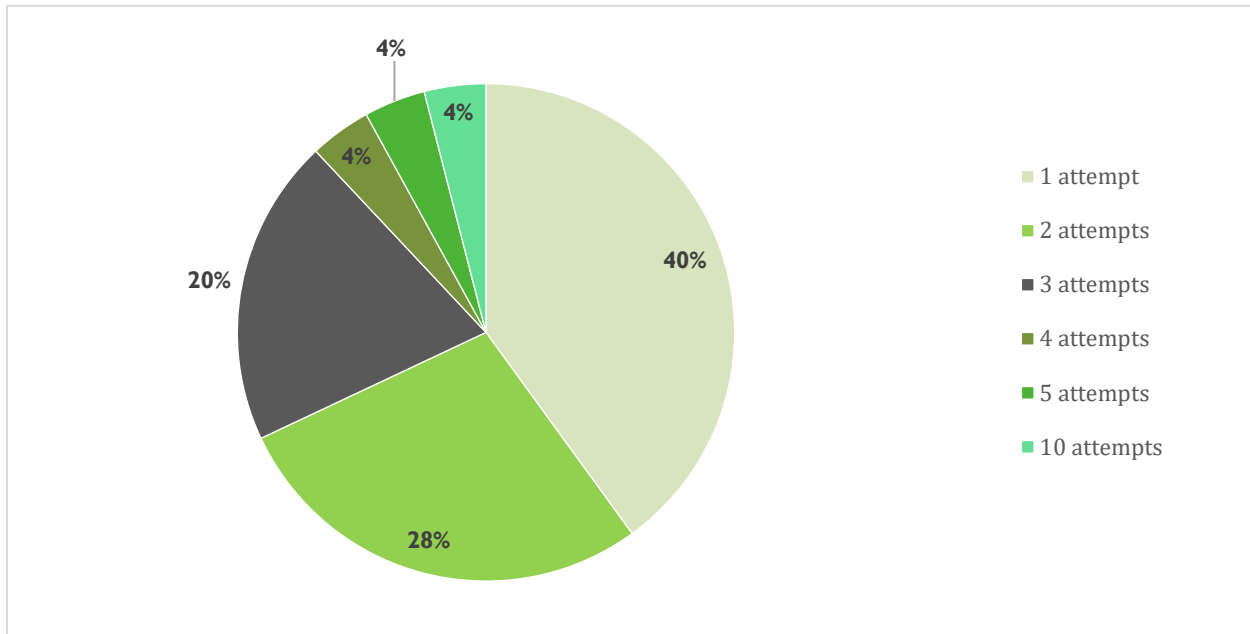
40% of calls are from individuals who **had active suicidal ideations WITH intent** when placing the call

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| XV. | CALLERS WITH PREVIOUS SUICIDE ATTEMPT | n= 99 |
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45% of calls are from individuals who had a **previous suicide attempt**

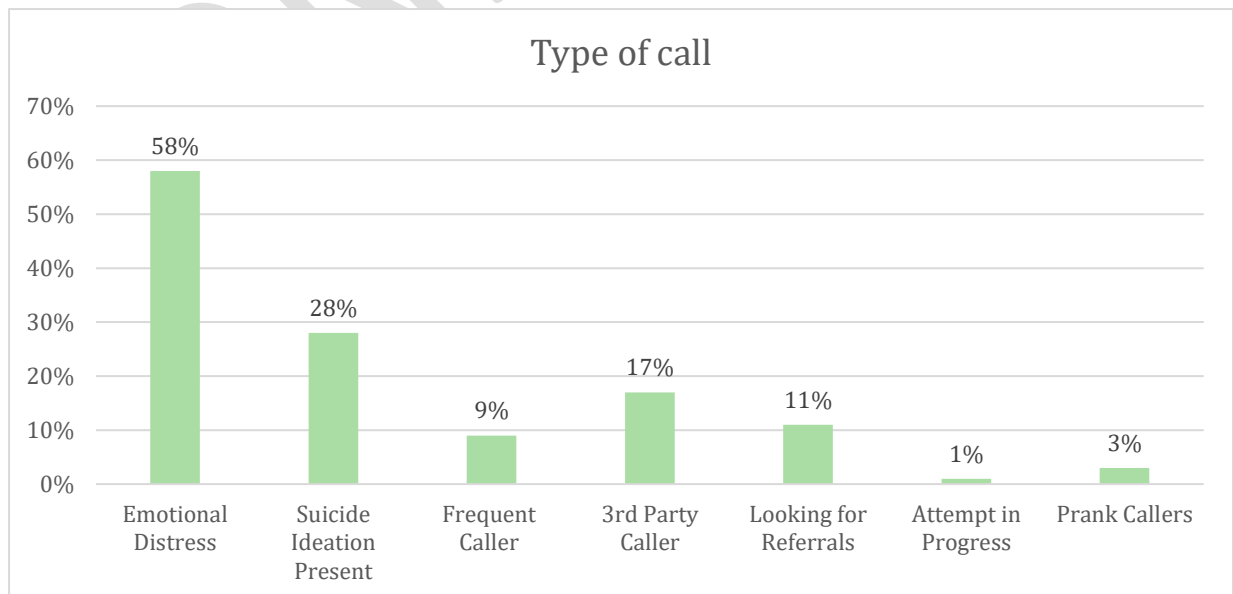
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| XVI. | NUMBER OF SUICIDE ATTEMPTS IN THE PAST | n= 25 |
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| XVII. SUICIDE ATTEMPT ONGOING | N= 191 |
| 1% of calls are from individuals who had a suicide attempt that was ongoing during the call | |

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| XVIII. TYPE OF CALL | Each taken with N=137 |
| *Percentages do not add up to 100% because each caller may express more than one concern. | |



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| XIX. | ACTIVE SUICIDAL IDEATION AT THE END OF THE CALL | 4% |
| of calls are from individuals who had active suicidal ideation at the end of the call | | |

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| XX. | ACTIVE SUICIDAL IDEATION WITH INTENT AT THE END OF THE CALL | 2% |
| of calls are from individuals who had active suicidal ideation with intent at the end of the call. Such callers are all identified as individuals who are struggling with chronic stress. | | |

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| VI. | CALLERS REPORTING DECREASE IN LEVEL OF DISTRESS FROM BEGINNING TO END OF CALL | N=191 |
| 100% of callers reported a decrease in the level of distress from the beginning of the call to the end. Thirteen calls were from individuals whose level of distress did not decrease from the beginning to the end of the call due to (1) high levels of distress or (2) looking for referrals with no intervention or (3) third party callers. | | |

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