THE NATIONAL LIFELINE

LEBANON’S EMOTIONAL SUPPORT AND SUICIDE PREVENTION HELPLINE

in collaboration with the National Mental Health Program at the Ministry of Public Health

MONTHLY LIFELINE INDICATORS

REPORTING PERIOD
September 2022
INTRODUCTION

Embrace Lifeline is the national helpline in Lebanon for emotional support and suicide prevention. Aggregate data related to the National Lifeline is captured, analyzed and disseminated on a monthly basis and annually for a yearly snapshot. The data is meant to offer a snapshot of the characteristics of callers to the helpline.

METHODOLOGY

The National Lifeline’s trained operators capture anonymous data through a secure computerized system. The non-identifiable data is then analyzed and reported on a monthly basis.

The numbers in this report are meant to offer a snapshot of the population that the National Lifeline serves. Please note that while that this information is recorded as accurately as possible, not all information may always be available. Unless otherwise indicated, the frequencies and percentages reported in this document represents the percentage of observations in a given category out of the total non-missing information. The metrics in this document can be considered representative of calls received during the reported time-period.

To cite this report: Embrace Lifeline: Lebanon’s National Helpline (2022). Caller characteristics for September 2022.

www.embracelebanon.org
IV. BENEFICIARY INFORMATION

I. AGE OF CALLERS (n=829)

- MEAN AGE: 29

II. SEX OF CALLERS

- 54% Female
- 46% Male

III. COUNTRY OF CALLERS

- 98% Lebanon
- 1% Not Reported
- 1% Other

*Egypt, Jordan, Saudi Arabia, United Arab Emirates
IV. HOW CALLERS HEARD ABOUT THE LIFELINE

308 callers informed us of how they first learned about the National Lifeline. The below chart summarizes their responses.

*Note: Percentages may not add up to 100% because each caller may have more than one status.

V. SEXUAL ORIENTATION OF CALLERS

8% of calls received by the Embrace Lifeline come from self-identifying LGBTQI+ individuals.

VI. NATIONALITY OF CALLERS

- 72% Lebanese
- 13% Others*
- 13% Syrian
- 1% Not Reported
- 1% Not Reported

*Other included referrals from medical professionals

*Australia, Egypt, Ethiopia, Jordan, Sierra Leone, Somalia, USA, Yemen
VII. REGION OF RESIDENCE AMONG CALLERS FROM LEBANON

<table>
<thead>
<tr>
<th>Region</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beirut</td>
<td>28%</td>
</tr>
<tr>
<td>Mount Lebanon</td>
<td>28%</td>
</tr>
<tr>
<td>Not Reported</td>
<td>19%</td>
</tr>
<tr>
<td>South</td>
<td>7%</td>
</tr>
<tr>
<td>North</td>
<td>6%</td>
</tr>
<tr>
<td>Bekaa</td>
<td>5%</td>
</tr>
<tr>
<td>Baalbek</td>
<td>4%</td>
</tr>
<tr>
<td>Nabatiyeh</td>
<td>2%</td>
</tr>
<tr>
<td>Akkar</td>
<td>1%</td>
</tr>
</tbody>
</table>

VIII. MARITAL STATUS OF CALLERS

<table>
<thead>
<tr>
<th>Status</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single</td>
<td>42%</td>
</tr>
<tr>
<td>Not Reported</td>
<td>24%</td>
</tr>
<tr>
<td>Married</td>
<td>17%</td>
</tr>
<tr>
<td>In a Relationship</td>
<td>8%</td>
</tr>
<tr>
<td>Divorced</td>
<td>6%</td>
</tr>
<tr>
<td>Widowed</td>
<td>1%</td>
</tr>
<tr>
<td>Separated</td>
<td>2%</td>
</tr>
</tbody>
</table>
IX. CALLER LIVING WITH

61% Nuclear Family
23% Not Reported
11% Alone
2% Extended Family
1% Roommate
2% Partner
1% Living others

*Note: Percentages may not add up to 100% because each caller may endorse more than one living status.

X. HIGHEST LEVEL OF EDUCATION OF CALLERS

- Did Not Complete Primary/Elementary School
- Primary/Elementary School (1st to 6th Grade)
- Middle School (7th to 9th Grade)
- High School (10th to 12th Grade)
- Bachelor’s Degree (BS, BA, DEA)
- Master’s Degree Completed (MS, MA, DESS)
- Vocational/Technical Degree
- Operator did not ask
- Not reported

- 1%
- 2%
- 6%
- 10%
- 31%
- 31%
- 5%
- 7%
- 7%
- 31%
- 7%
XI. EMPLOYMENT OF CALLERS

*Note: Percentages may not add up to 100% because each caller may have more than one status.

XII. CHANGE IN LEVEL OF DISTRESS FROM BEGINNING TO END OF CALL

88% of calls with available data for this indicator (n=287) reported a decrease in the level of distress from the beginning of the call to the end of the call. 11% of calls were from individuals whose level of distress did not change from the beginning to the end of the call. 1% of the calls reported an increase in level of distress from the beginning to the end of the call.

*Note: Callers contacting the National Lifeline may be experiencing chronic psychological, medical, or socioeconomic difficulties and level of distress may continue to be high even after seeking support from a preventive emotional support tool such as the National Lifeline.

XIII. CALLERS CURRENTLY SEEKING MENTAL HEALTH SERVICES

55% of calls with available data for this indicator (n=514) are from individuals who reported currently receiving at least 1 mental health service.
**XIV. TYPE OF CALL**

- Emotional Distress: 68%
- Suicide Ideation Present: 27%
- Looking for Referrals: 19%
- Third Party Involved: 10%
- Other: 9%
- Frequent Caller: 8%
- Socioeconomic Concerns: 8%
- Third Party Bystander: 2%
- Attempt in Progress: 3%
- Prank Call: 3%
- Gender-Based Violence: 3%
- Agitation/Mania/Psychosis: 2%
- Other: 1%

*Note: This indicator is assessed by the operator based on their conversation with the caller. Percentages may not add up to 100% because the caller can express more than one type of concern (e.g., a caller could express both socioeconomic concerns and emotional distress).*

**XV. SUICIDE ATTEMPT ONGOING**

3% of calls were from individuals who had a suicide attempt that was ongoing during the call.
I. LEVEL OF SATISFACTION

78 Quality assurance calls were conducted in September 2022. 74 responded and agreed to participate. Beneficiaries were asked to rate their level of satisfaction with the services received during their initial call on a scale of 1 to 5 with higher numbers indicating greater satisfaction. Across all 74 callers, the average satisfaction rating was 4.4.

II. CALL OUTCOME

The below figure outlines caller-reported outcomes of their initial call to the Lifeline (N=74):

- Felt less distressed: 86%
- Felt more empowered to solve the presenting problem: 68%
- Felt hopeful/confident about the future: 42%
- Nothing changed: 8%
- Felt pessimistic/unsure about the future: 3%

*Note: Callers contacting the National Lifeline may be experiencing chronic/physical or socioeconomic difficulties which cannot be improved by a call to the National Lifeline (Emotional Support and Suicide Prevention Hotline).
III. WOULD CALL THE LIFELINE IN THE FUTURE

93% of callers (n=74) reported that they would recommend the Lifeline to others in need of assistance.

IV. CALL BACK

97% of callers with available data (n=74) reported that they would call the Lifeline again if they were experiencing emotional distress or thinking about suicide.

V. HELPFUL ORIENTATIONS

22 of the 74 callers were provided with referrals during their initial call to the Lifeline. 30% reported that the service was helpful. 26% reported that the service was not helpful due to issues related to the agencies themselves. (44%) either did not use the service yet or they were already provided with referrals previously.
The social work department at Embrace serves both the Embrace Mental Health Center (EMHC) and the National Lifeline (1564). It aims to provide a holistic approach to mental health care by offering psycho-social assistance to beneficiaries. The Social Work Department is resourced with a comprehensive referral database that is updated every 4 months. This referral network is linked with governmental and non-governmental organizations that provide a wide range of psychosocial services from livelihood, shelter, basic assistance, child protection, and organizations catering to the needs of vulnerable groups such as refugees, LGBTQ community and persons affected by gender-based violence. The department is currently staffed by one social worker who coordinates with a multi-disciplinary internal team of psychologists, psychologists, psychiatric nurse, hotline operators and lifeline supervisors.

**Total Number of Consultations**: 50

**1st Consult**: 13

**Follow Up**: 37

**Total Number of Active Cases**: 29

**Total Number of Closed Cases**: 13

*Total number of consultations: Refers to all social work consultations taking place between the Mental Health Social Worker and beneficiaries referred (may include more than 1 consultation per beneficiary)

Total Number of Active Cases: Refers to the number of beneficiaries (callers) who are still being followed up by the Mental Health Social Worker

# 1st Consult: Refers to the number of cases contacted by the Mental Health Social Worker for the 1st consultation after being referred from the Lifeline.

**Follow up**: Refers to the number of follow up consultations (out of the total consultations)

**Follow Up Consultations can be carried out with the callers directly or with the relevant party at a referred resource.**

27% of follow up consultations were conducted **directly with the callers** (or their parent/legal guardian where a minor was involved).

73% of follow up consultations were conducted with the **relevant party at the referred resource** (e.g., a case manager at a rehab facility).

**Closed Cases (N=13)**

- **Referral Refused**: 15%
- **Other***: 8%
- **Goal Achieved**: 77%

*patient unreachable
X. SOCIAL WORK

ZOOM IN ON NEW CASES

**Note** that percentages for the bar charts may add up to more than 100% because the callers may be referred for several reasons; Abbreviations: MH = Mental Health, GBV= Gender Based violence.

### Urgency Level (N=13)

- **High**: 62%
- **Moderate**: 38%

### Reasons for Referral (N=13)

- **Severe Economic Distress**: 54%
- **GBV**: 77%
- **MH Services**: 69%
- **Child Protection**: 92%
- **Other**: 15%

### Referrals Provided (N=12)

- **Rehabilitation**: 8%
- **Education Services**: 15%
- **Shelter**: 23%
- **Food Assistance**: 38%
- **Financial Assistance**: 38%
- **General Health**: 46%
- **MH Services**: 69%
- **GBV**: 77%
- **Child Protection**: 92%

### Beneficiary Information

100% were referred to NGOs

**Note** that percentages for the above bar chart may add up to more than 100% because multiple types of referrals can be provided; Abbreviations: MH = Mental Health, NGO = Non-governmental institute, GBV= Gender Based violence.
CALLERS DEMOGRAPHICS

The below charts present the demographics of all callers the social worker engaged with. This includes new cases and follow ups on other cases active from previous months.

- **SEX DISTRIBUTION**: 59% Male, 41% Female
- **AGE GROUPS**: 32% <18, 25% 18-24, 19% 25-34, 9% 35-44, 6% 45-54, 3% 55-64
- **NATIONALITY**: 59% Lebanese, 41% Syrian
- **GEOGRAPHIC LOCATION**: 21% Mount Lebanon, 19% Beirut, 19% Bekaa, 16% South, 9% Akkar, 9% North
- **MARRITAL STATUS**: 38% Married, 59% Single, 3% Separated
- **EMPLOYMENT STATUS**: 3% Unemployed, 6% Freelancer, 16% Unable to work, 75% Employment (Full time)