



Lebanese Republic
Ministry of Public Health
National Mental Health Programme

1564

embrace

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
IMPACT REPORT**

REPORTING PERIOD
July 2021



INTRODUCTION

Embrace Lifeline is the national helpline in Lebanon for emotional support and suicide prevention. Aggregate data related to the 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

Embrace 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 Embrace 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.

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www.embracelebanon.org



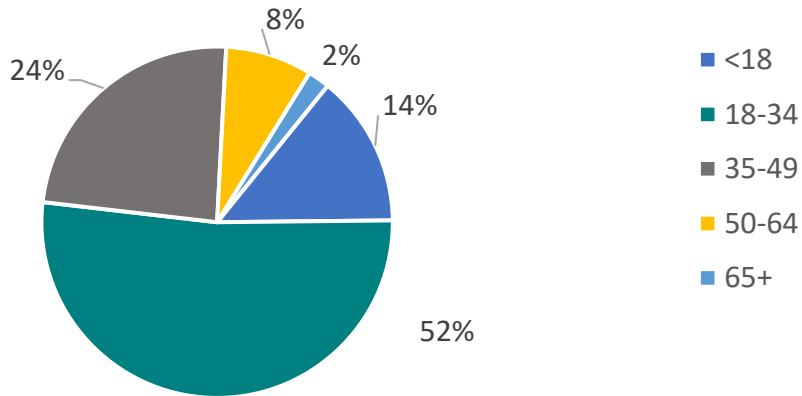
July 2021

TOTAL NUMBER OF CALLS WITH CAPTURED DATA

857

I. AGE OF CALLER (n=802)

MEAN AGE: 31.16



II. SEX OF CALLERS



46%



53%

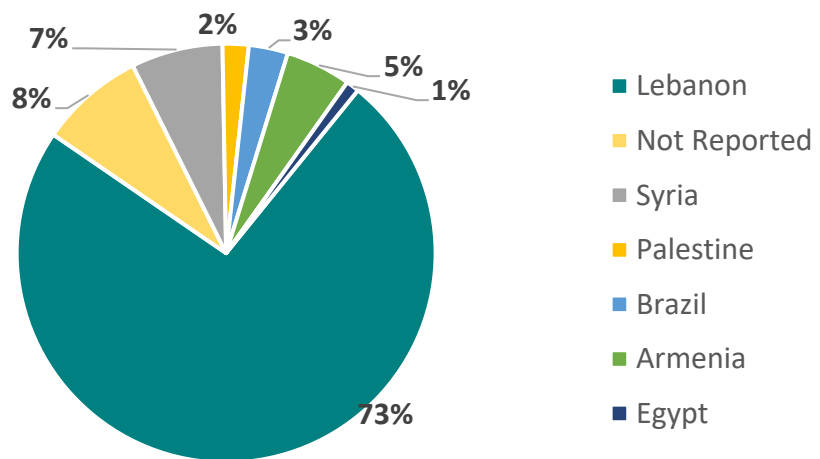
Intersex

1%

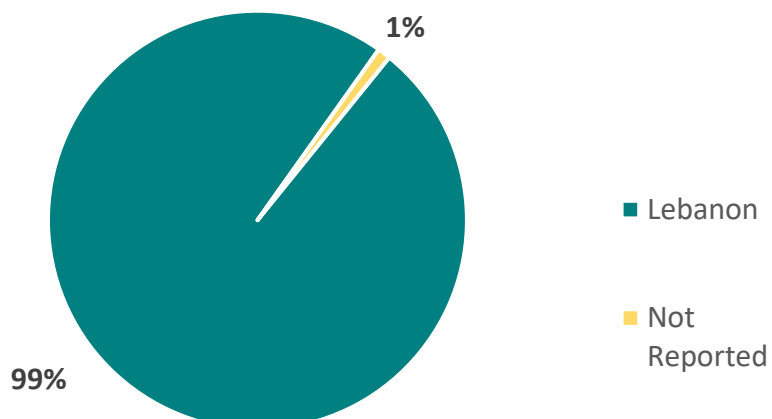
III. SEXUAL ORIENTATION OF CALLERS

16% of calls received by the Embrace Lifeline come from self-identifying LGBTQI+ individuals.

IV. NATIONALITY OF CALLERS

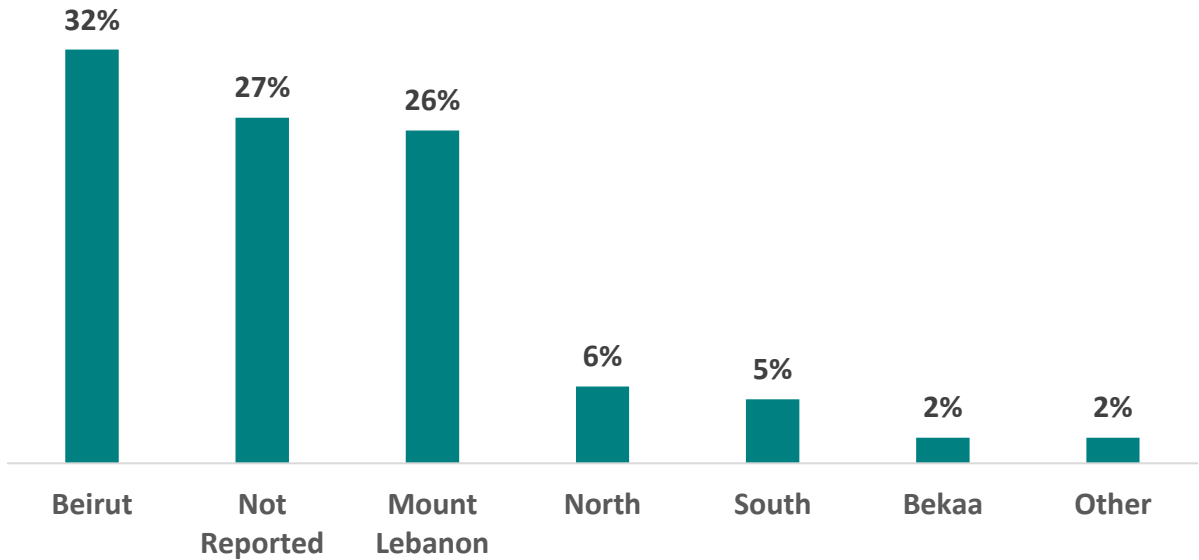


V. COUNTRY OF CALLERS

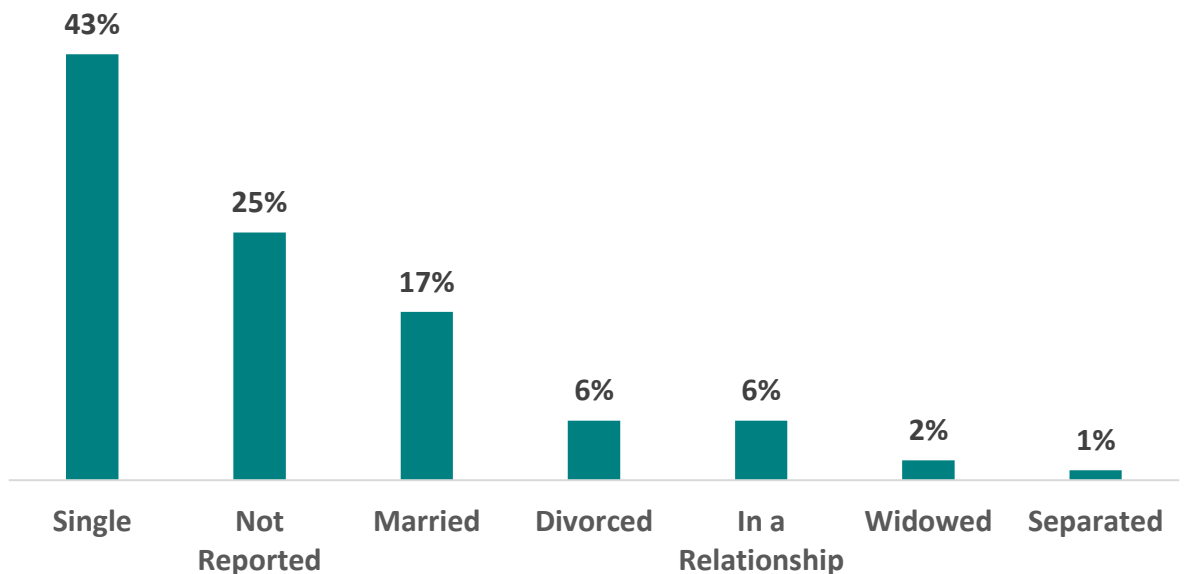




VI. REGION OF RESIDENCE AMONG CALLERS FROM LEBANON

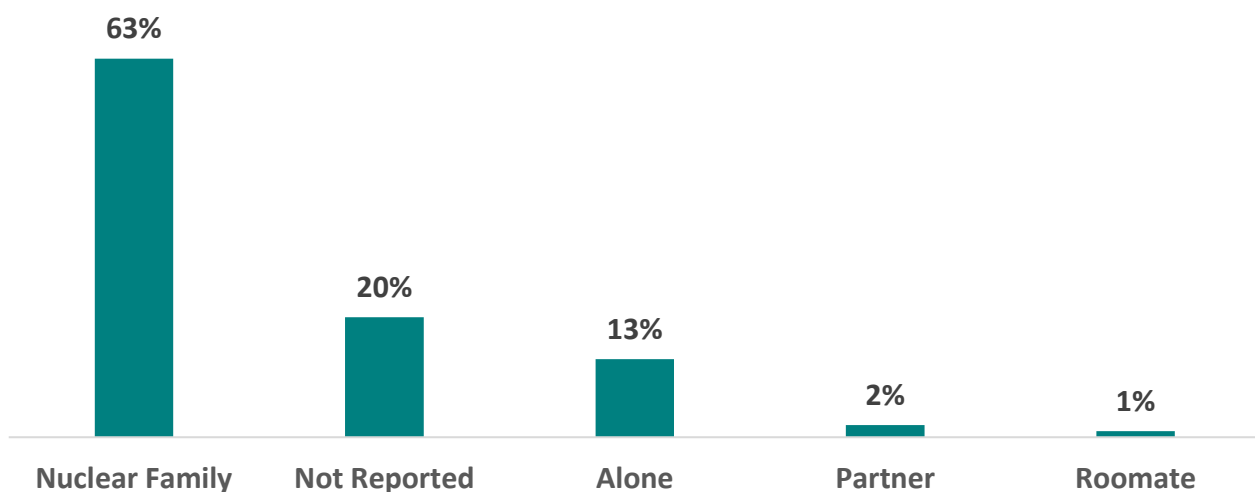


VII. MARITAL STATUS OF CALLERS

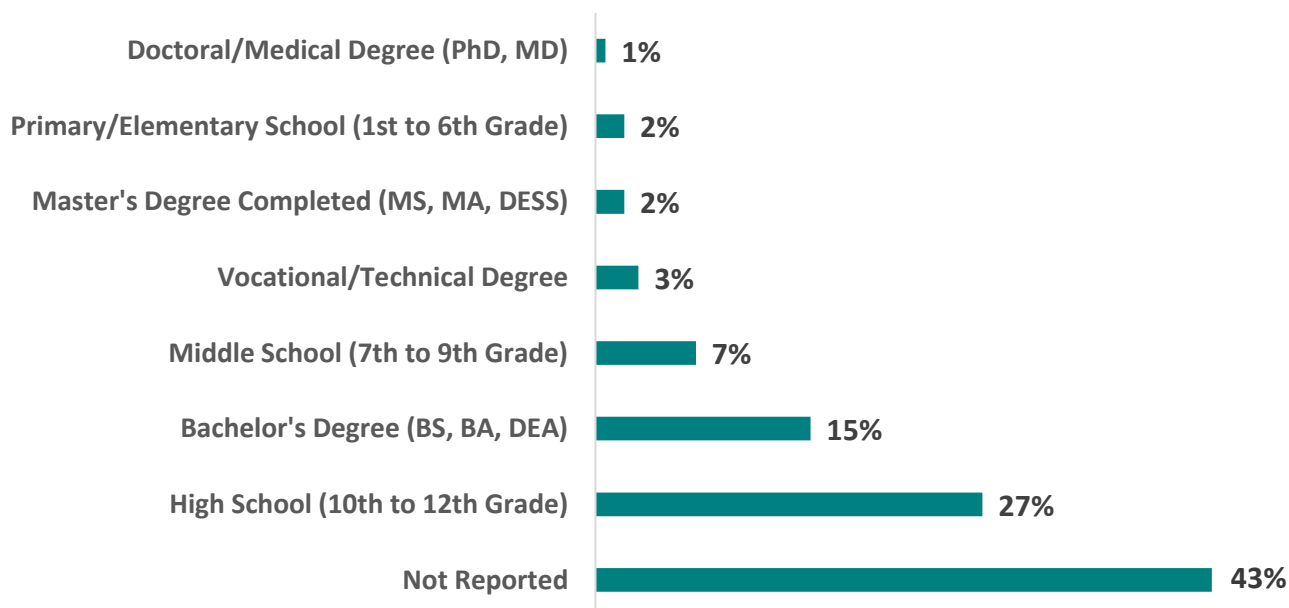


VIII. CALLER LIVING WITH

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

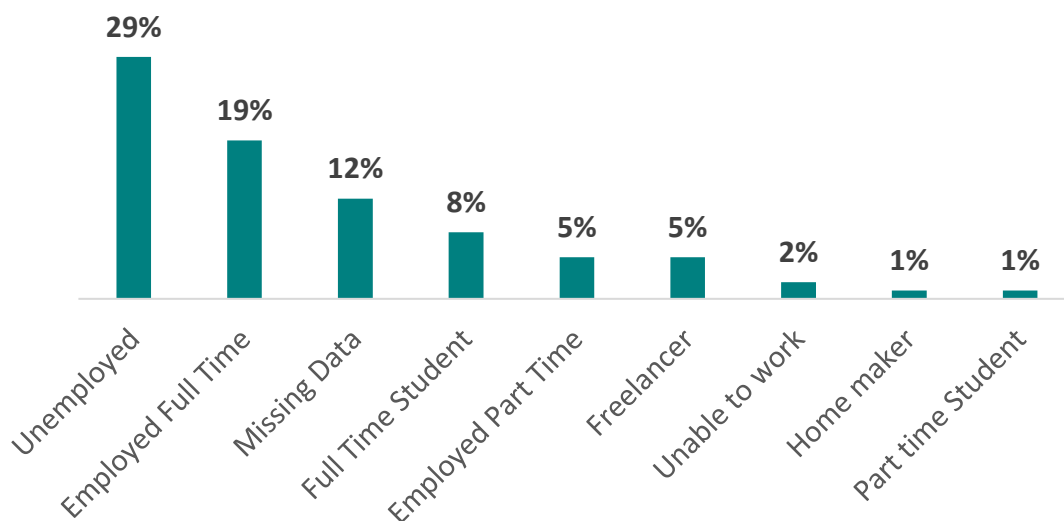


IX. HIGHEST LEVEL OF EDUCATION OF CALLERS



X. EMPLOYMENT OF CALLERS

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



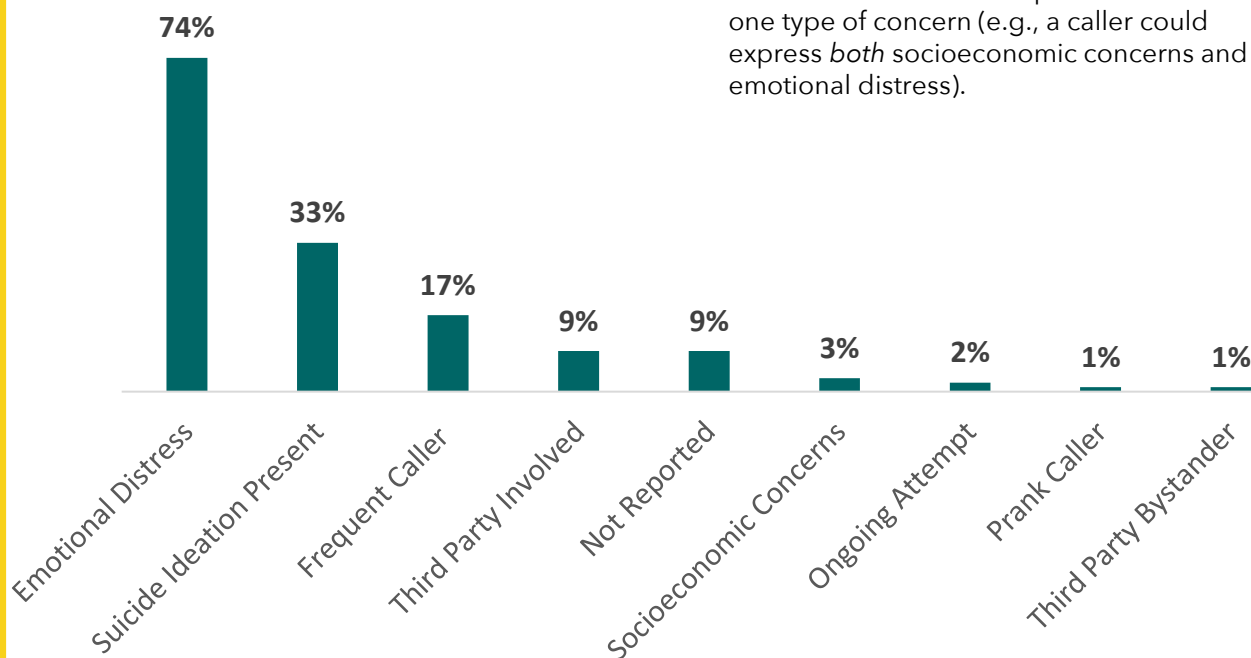
XI. CHANGE IN LEVEL OF DISTRESS FROM BEGINNING TO END OF CALL

92% of calls with available data for this indicator (n=316) reported are from individuals who reported a **decrease in the level of distress** from the beginning of the call to the end. **7%** of calls were from individuals whose level of distress did not change from the beginning to the end of the call.

XII. CALLERS CURRENTLY SEEKING MENTAL HEALTH SERVICES

59% of calls with available data for this indicator (n=623) are from individuals who reported currently receiving mental health services.

XIII. TYPE OF CALL



*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).

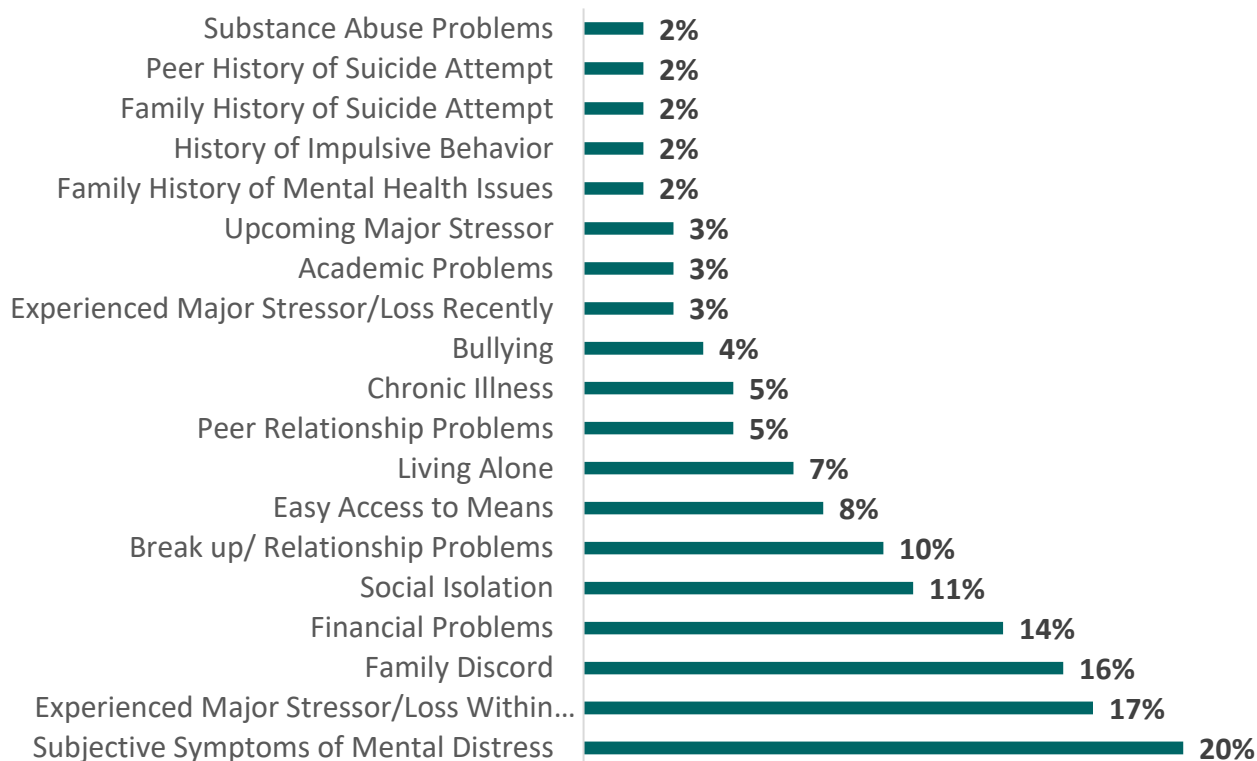
XIV. CALL DURATION

The average call duration was **27 minutes** long and call durations ranged between 2 minutes and 130 minutes.

XV. SUICIDE ATTEMPT ONGOING

2% of calls were from individuals who had a **suicide attempt** that was **ongoing** during the call.

XVI. RISK FACTORS



*This indicator is assessed by the operator based on their conversation with the caller. Percentages may not add up to 100% because multiple risk factors can occur together (e.g., a caller could be *both* living alone and reporting experiences of bullying..