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## **Suicide Prevention Hotlines Struggle to Keep Up with Spike in Activity Following Celebrity Suicides**

*Study Suggests the Need for Additional Resources Among Crisis Mental Health Services After Notable Figure Dies by Suicide*

**Stamford, CT., April 30, 2019** – Suicide prevention hotlines and websites are critical resources to help curb the rate of suicides nationally, but they may lack the resources needed to meet the increase in demand after a celebrity dies by suicide, such as with entertainer Robin Williams. That’s according to a recent study by researchers at the National Institute of Mental Health (NIMH), part of the National Institutes of Health, and others. The study highlights the need for crisis mental health services to develop contingency plans to accommodate the immediate increase in demand, particularly in the two days following a celebrity suicide. The findings are published in the peer-reviewed journal [Psychiatric Services](#).

The study was led by Rajeev Ramchand Ph.D., who is now senior vice president of research for Cohen Veterans Network (CVN), a not-for-profit organization working to help prevent veteran suicide through its national network of mental health clinics. Ramchand and colleagues tested for acute increases in suicides, help-and information-seeking, and the ability of mental health services to meet increased demand after a celebrity suicide.

“Unfortunately, we know that celebrity suicides, like that of Mr. Williams, can lead to increases in suicides in the general population,” said Ramchand, who is currently responsible for designing and guiding CVN’s research strategy. “This study reveals that help-seeking also increases dramatically after these high-profile events, but that available crisis services may be insufficiently resourced to meet this demand.”

Researchers examined daily suicide data, call volume to the National Suicide Prevention Lifeline (NSPL) and visits to two suicide prevention websites before and after Williams’ death on August 11, 2014.

Using data from the National Center for Health Statistics’ Compressed Mortality File, they found that in the 30 days after Williams’ death the average rate of suicide deaths increased to 142 per day, from an average of 113 to 117 suicide deaths per day in 2012 to 2014. Approximately two-



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thirds of the suicides that occurred immediately following August 11, 2014 were the same method of suicide as Williams.

Additionally, they discovered that calls to the National Suicide Prevention Lifeline increased by 300% on the day after Williams' suicide. In the week prior to Williams' death the NSPL received 4,000 to 6,000 calls per day. That number jumped to 12,972 calls the day after Williams' death. Only 57% of those calls were answered, indicating an inability for the NSPL to respond to the increase in demand.

With regard to information-seeking, the researchers found that visits to the Suicide Prevention Resource Center (SPRC) and Suicide Awareness Voices of Education (SAVE) websites increased dramatically following Williams' death. The SPRC website averaged 2,315 visits per day from August 3 to 11, 2014. On Tuesday, August 12, there were 5,981 visits to the site. While the SAVE website averaged 4,239 visits per day from August 3 to 11, 2014, jumping to 24,819 visits on August 12.

The study suggests that the efficient allocation of existing funds and the procurement of new funding are crucial in meeting the demand for crisis mental health services, including surge capacity. "Crisis mental health services, such as suicide prevention hotlines and websites, provide effective counseling and vital resources for people in suicide distress. We need to ensure these services have sufficient resources to serve the public 24/7, especially in times of increased demand," said Jane Pearson, Ph.D., chair of the Suicide Research Consortium in [NIMH's Division of Services and Intervention Research](#).

"From celebrities to civilians to veterans, suicide does not discriminate. It is a devastating issue that affects all Americans," said Dr. Anthony Hassan, CEO & President of CVN. "As we at CVN work to stem the nationwide problem of veteran suicide, this study emphasizes the importance of crisis mental health services for all populations across the board."

#### **ABOUT THE COHEN VETERANS NETWORK**

The Cohen Veterans Network is a 501(c)(3) national not-for-profit philanthropic network of mental health clinics for post-9/11 veterans and their families. CVN focuses on improving mental health outcomes, with a goal to build a network of outpatient mental health clinics for veterans and their families in high-need communities, in which trained clinicians deliver holistic evidence-based care to treat mental health conditions. The network currently will soon have 14 locations serving veterans and their families across the country. Dr. Ramchand is currently building a research strategy for Cohen Veterans Network. Learn more about the [Cohen Veterans Network](#).

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