THE HELP-LINE "INVITO ALLA VITA": A NEW PROJECT FOR SUICIDE PREVENTION IN TRENTINO REGION

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SUMMARY

"Invito alla Vita" is a community-based suicide prevention project that officially started in Trentino in late 2008. The project was promoted by the local Health Services, trying from the beginning to involve other community subjects, and has been working over five years and a half in different directions, particularly promoting a phone help-line.

The aims of the Invito alla Vita (IaV) Help Line have been clear from the beginning: decrease the sense of loneliness, offer encouragement and support, promote engagement with health services, reduce stigma and prejudice. Contrary to popular misconceptions, talking with people about suicide will not increase suicide risk, neither will it induce patients to commit suicide. The volunteers involved in the IaV help-line offer people empathic listening without judgment and easy tips, to reduce loneliness, sadness and supply reassurance that other people care.

In this study we tried to deepen our knowledges about the volunteers' motivations and necessities to use them for creating a better system of support: we realized indeed that continuous training and supervision, along with official awards given by community institutions, are basic factors to sustain the volunteers' motives to cooperate with the help line.

Key words: suicide prevention - help line - volunteers

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BACKGROUND

The World Health Organization states that suicide prevention programs:

- should distinguish each country's characteristics, taking into account social, cultural and health differences;
- must address local solutions to local problems;
- should prefer interventions conducted by local organizations, cooperating with each other.

"Invito alla Vita" is a community-based suicide preventing project that officially started in Trentino in late 2008. The project has grown since that time and spread all over the Province, and has been working in different directions and with several partners over five years and a half. It was promoted by the local Health Services, but tried from the beginning to involve other community subjects, from institutions and associations, like AMA – Associazione Auto Mutuo Aiuto – mutual aid (Rodgers 2002).

After three years work, all those who wanted to collaborate on the project came together at a Coordination Table, composed of institutions, health services, citizen's organizations, professional associations, which mets every five months or so, to update and choose what actions to adopt.

The targets of the Project consist of:

- Information and involvement of institutions, services, community;
- Advertising campaign;
- Sensitization of the population;
- Specific training and guidelines for the so-called sensors;

- Mutual aid Groups;
- Epidemiological Monitoring of the phenomenon;
- Coordinating project in its different parts;
- Help line.

Help-lines are mainly an opportunity for people to receive support and care by experiencing that they are not alone and isolated. The simple fact that they have been created is a strong signal to the community, revealing that something is done to break the wall of silence that often surrounds people with suicidal thoughts (Till 2013).

The aims of the Invito alla Vita (IaV) Help Line have been clear from the beginning:

- decrease the sense of loneliness;
- offer encouragement and support;
- promote engagement with health services;
- reduce stigma and prejudice.

The "IaV" help line offers a service of active listening, free from fees, available 24 hours 24, provided by qualified volunteers offering empathy, emotional closeness, no judgment.

Nowadays the IaV Help line is composed of 40 volunteers, even if there are always new volunteers in training, in order to operate 24 hours 24, 365 days per year.

After a preliminary interview with a supervisor, who is a psychologist, the potential volunteer can move to the training program, composed by ten meetings where, together with the supervisor and other volunteers, he can study in depth and discuss topics about communication strategies, the helping relationship, empathy and ethics. After this stage he can decide whether to become a volunteer or not, and he is aware of having the same rules to observe: respect the limits involved in his role; frequent monthly supervision with other volunteers; participation in at least two shifts of four hours per month in the Help line.

OBJECTIVES

This paper aims to describe the help line activities (phone call data, needs detected, voluteers' committment) and to show and discuss data from the latest research upon volunteers' motivational reasons and emotional experience about their role in help line.

These data may be useful in the future to clarify the disposition and features that volunteers should have to take on this kind of task, enabling staff to give them good support and establishing effective methods of recruitment to the project.

METHODS

Volunteers fill out at every call a simple form where they can record their properties (name, date, hour) and data regarding the calls (duration, call features, detected needs, suggested services) and, at the end, elements about their feelings.

Obviously these data are extracted from conversation and not trough direct questions, always ensuring privacy and anonymity to line users, and are used to better understand people' needs and volunteers' activities in order to ameliorate the contribution of the line.

Moreover we developed a semi-structured interview that we performed with several expert volunteers, with the aim of identifying their disclosed beliefs, knowledge, meanings and codes, and to use this analysis to ensure them better support and improve strategies of recruitment of new volunteers.

We created this interview using "the long interview" by Mc Craken and based upon the psychological Theory of personal constructs (Mc Craken 1988, Bannister 1986).

RESULTS

Here we describe data obtained analyzing phone calls received in the last two years. They received 4873 phone calls, 1235 in 2012, 3638 in 2013, with a medium average of 3.4 calls per day in 2012 and 10 calls per day in 2013. This increasing number of phone calls is probably due to the sensitization campaign recently promoted, but can even seen as a consequence a better organization of volunteers' shifts, spreading throughout the day (Figure 1).

The detected needs expressed in the phone calls are recorded and divided into several general categories. The most reported topic is loneliness, then mental distress, relational and familiar difficulties, in fifth position we find suicidal thoughts (Figure 2).

We divided even answers to these needs in three groups: listening, health services and association proposal. "Listening" is evidently the best strategy offered by volunteers, as we can see from the graphic below (Figure 3).

Analyzing the results of the semi structured interviews broadly what stands out is the volunteers' need to feel useful and to perform this need through their role in the help line, despite of any personal differences. The organization built around them to sustain the help line activities, specifically monthly supervisions, continuous training, sharing experience with colleagues, and, on the other hand, the callers' gratitude, are all crucial factors sustaining this role, motivating and encouraging volunteers in their engagement. If some of these factors are lost, for example, because of decreased feelings of usefulness, when there is a reduced number of phone calls, or because of frustrating experience in their activity, only supervision, feelings of belonging to the volunteers' group and a sense of duty can avoid interruption of the volunteer's cooperation.

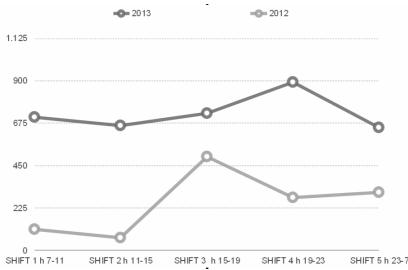


Figure 1. Phone calls distribution along different shifts

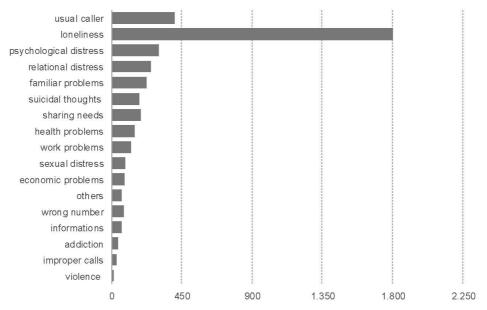


Figure 2. Detected needs expressed to the Help line

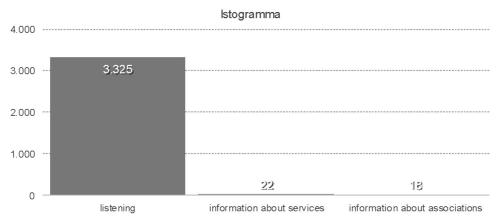


Figure 3. Different kind of answers

CONCLUDING REMARKS

Suicide is the tenth leading cause of death in the world, with about 800.000 to one million people dying every year, with a mortality rate of quite 11 per 100,000 persons per year. Suicide rates have increased by 60% from the 1960s to 2013, primarily in the developing world. Furthermore for every suicide we should consider between 10 and 40 attempted suicides and at least 40 to 100 people involved in suffering for suicide (family, friends, colleagues) (Barbagli 2010).

Considering the size of this phenomenon one can easily understand the reasons which moved our Health Service in Trentino to develop and implement a community-based suicide prevention program, called Invito alla Vita, that from the beginning could rely on a remarkable number of volunteers concerned with the phone help-line.

Contrary to popular misconceptions, talking with people about suicide will not increase suicide risk, neither induce them to do it. Conversely, offering people empathic listening without judgment and easy tips, acts as a powerful method to reduce loneliness, sadness and provide reassurance that other people care (Pompili 2007).

The volunteers involved in the IaV help-line are aware of this power and use it to provide moral support and closeness to people calling for inner suffering, who maybe could feel isolated and not able to find help because of shame and mistrust.

We tried to deepen our knowledges about the volunteers' motivations and needs in order to use this knowledge for creating a better system of support: we realized indeed that continuous training and supervision, along with official awards given by community institutions, are basic factors to sustain the volunteers' motives to cooperate with the help line.

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