Messaging and Communications to Trusted Messengers of People Disproportionately Impacted by Suicide
RESEARCH TEAM:

Derrick Feldmann, Managing Director, Ad Council Research Institute
Catherine Chao, VP Strategy and Evaluation, The Ad Council
Colleen Thompson-Kuhn, Research Project Manager, Ad Council Research Institute and Director, Strategic Partnerships and External Engagement, The Ad Council
Ben Dorf, VP Communications and Marketing, The Ad Council
Hannah Lushin, Copywriter
Tyler Hansen, Designer
With Research Support from C+R

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WARNING TO THE READER
This document discusses various experiences that you may find yourself identifying with while reading. Should you need emotional or mental health-related support, please text, call, or chat with 988 or a local trusted support.
INTRODUCTION

Suicide is rarely caused by a single event or circumstance. Many individual, relationship, community, and societal conditions or factors contribute to suicide risk. Some groups experience more negative social conditions and factors related to suicide, such as racism and discrimination, ableism, economic hardship, colonization, poverty, limited affordable housing, lack of education opportunities, and barriers to physical and mental healthcare access. In addition, some groups may have higher or recently increased rates of suicide, suicide attempt, or suicidal ideation than the general U.S. population. These groups may be considered disproportionately impacted by suicide.

In July 2022, the U.S. transitioned from a 10-digit National Suicide Prevention Lifeline to 988, an easy-to-remember three-digit number for 24/7 crisis care. Since then, reports show 988 has routed approximately 9.6 million contacts, consisting of calls, chats, and texts.

With this transition, a need arose for 988-specific formative research among such groups that are disproportionately impacted by suicide to help support culturally sensitive, responsive, effective, and successful 988 communications: To make these populations more aware of 988 across the country, and to instill trust and confidence in the service so people will contact 988 when struggling to manage symptoms associated with mental health challenges or experiencing an acute mental health crisis.

In Summer 2022, the 988 Formative Research Project began, a collaborative effort led by the National Action Alliance for Suicide Prevention (Action Alliance), the Suicide Prevention Resource Center (SPRC), and the Ad Council Research Institute (ACRI), and supported by the Substance Abuse and Mental Health Services Administration (SAMHSA). The project fills a critical research gap and supports more informed 988 messaging and implementation efforts.

ACRI’s 988 Formative Research was released in late 2023. The inaugural study consisted of qualitative and quantitative methods focused on uncovering the attitudes, beliefs, perceptions, barriers, and motivations related to 988 and identifying help-seeking behaviors among populations disproportionately impacted by suicide as a first step in better understanding how to reach and engage them. The research also uncovered important findings about trusted messengers from the study’s population groups.

The second study in this project is focused on just that: the trusted messengers that people who are disproportionately impacted by suicide turn to for trusted, unbiased information and help when they’re struggling with their mental health or in crisis.

1. https://www.cdc.gov/suicide/facts/disparities-in-suicide.html#:~:text=The%20excess%20burden%20of%20suicide%20in%20some%20populations%20are%20called%20health%20disparities.&text=Examples%20of%20groups%20experiencing%20suicide%20of%20color%20and%20tribal%20populations.
Since 2012, ACRI has found the trusted messenger to be a critical person when an individual needs an unbiased, trustworthy source—for resources, help, and more. In the 988 Formative Research study, participants indicated that when they’re struggling with their mental health or are in crisis, they most often turn to their spouse/partner, mother, siblings, and friends for help and advice. These trusted messengers are also the ones participants said they’d most trust information on 988 from, giving them a vital role in helping encourage, nudge, and influence their loved ones/close connections to seek support through 988.

Thus marketers and communicators must speak to these crucial individuals within the communications landscape when seeking to increase awareness, knowledge, and usage of the 988 Lifeline. Given their closeness and experiences with people who are disproportionately impacted by suicide, marketers need to create messaging that builds confidence and supports their willingness to encourage use among their loved ones and close connections.

PURPOSE

ACRI conducted qualitative and quantitative research to:

• **Uncover knowledge, attitudes, beliefs, and perceptions** about accessing crisis services among trusted messengers of groups disproportionately impacted by suicide, as well as encouraging use to their loved ones/close connections.
• **Identify and explore barriers and motivators** to accessing crisis services among trusted messengers of these groups.
• **Inform culturally sensitive, responsive, and effective messaging development** to help trusted messengers access 988 as a resource for themselves, or when their loved one/close connection is struggling with mental health or in crisis.

This study builds on the ACRI’s initial 988 Formative Research, which is an important foundation for 988 messaging efforts, intended to produce insights that can be used by the field to make research-informed decisions about how to encourage use and/or access to 988—both by people who are struggling and people who are closest to them. It also generated evidence-based message frames that can be tested, validated, and enhanced through additional message testing and research.

The findings in this report provide a deeper look into how trusted messengers of groups that are disproportionately impacted by suicide view and/or access mental health resources and crisis services, and how to best develop messaging to encourage use and/or access to 988.
METHODOLOGY

This study consisted of two research phases: a qualitative phase conducted August 14-30, 2023, and a quantitative phase conducted in December 2023 - January 2024.

For the ACRI’s 2023 study on 988 messaging and communications to populations disproportionately impacted by suicide⁵, the research team identified eight populations:

- American Indian/Alaska Native youth and young adults (ages 13-34)
- Asian American, Native Hawaiian, and Pacific Islander (AANHPI) youth and young adults (ages 13-34)
- Black youth and young adults (ages 13-34)
- Hispanic, Latinx youth and young adults (ages 13-34)
- Individuals who have attempted suicide or experienced serious thoughts of suicide during their lifetime (ages 13+)
- LGBTQIA+ youth and adults (ages 13-49)
- People with disabilities (ages 13+)
- Rural older men (ages 49+)

That study allowed the project team to identify four key trusted messenger groups that people who are disproportionately impacted by suicide said they most turn to and trust for information about 988: spouse/partner, mother/caregiver, sibling, friend.

Throughout the report, any differences by race/ethnicity or other cohort are noted if they meet or exceed any of the following:
- Sample, cohort, and/or connection population size reflects an N>200
- Over/under index data points reported reflect the following:
  - Greater than 10% due to sample size and response proportionality
  - 5% variance (greater than or less than) from the total population of those who are disproportionately impacted by suicide

No mention of such differences in the main body of the report means data points or findings did not meet these thresholds.

Note: The groups included in this report (that are disproportionately impacted by suicide) are the designated populations included in the initial 988 study. They do not reflect all populations that are disproportionately impacted by suicide.

QUALITATIVE PHASE

The qualitative phase focused on trusted messengers of populations disproportionately impacted by suicide and consisted of 48 60-minute webcam interviews. Participants of trusted messenger populations represented a mix of gender, ages (within each cohort’s age range), household income (min. 3/cohorts under $75k; min. 3/cohorts over $150k), urbanicity, education, and household composition.

The qualitative phase was designed to inform the quantitative survey tool and subsequent message frame iterations.

QUANTITATIVE PHASE

To qualify for the quantitative phase of the study specific to trusted messengers, respondents must have a close connection to one of the above groups who are disproportionately impacted by suicide. In addition, a sample of White trusted messengers was recruited to analyze and compare responses to trusted messengers of the eight initial group samples within this study. This comparison provides insights that marketers and communication professionals can apply when developing broad-based communication and campaign efforts with population segmentation adaptations for culturally and racially appropriate messaging.

A 15-minute online survey (offered in English, Spanish, and Mandarin, the three most commonly spoken languages in the United States) was conducted in December 2023 - January 2024 among N=12,881 respondents to validate findings in the qualitative phase and to understand how to communicate with the trusted messengers of people disproportionately impacted by suicide. The overall sample included the following breakdowns of key cohorts analyzed for this study.

Study Cohorts

- Spouse/partner of someone ages 18-34
- Mother/caregiver of someone ages 13-34
- Sibling of someone ages 13-34
- Friend of someone ages 13-34
- Spouse/partner, sibling and friend of older rural men (49+)
Survey responses were organized based on trusted messengers of individuals by their race/ethnicity and other groups that are disproportionately impacted by suicide. Responses were also collected for trusted messengers of White loved ones/close connections who did not fall into designated groups to provide a comparison for findings and trends as noted above. The following is a breakdown of the sample and cohort compositions.

<table>
<thead>
<tr>
<th>TRUSTED MESSENGERS, ANSWERING ABOUT THEIR...</th>
<th>Spouse/ Partner, 18-34 Years Old</th>
<th>Child, 13-34 Years Old (Mother/ Caregivers)</th>
<th>Sibling, 13-34 Years Old</th>
<th>Friend, 13-34 Years Old</th>
<th>TOTAL Across all Trusted Messengers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Connections for Designated Populations</td>
<td>n=2328</td>
<td>n=1988</td>
<td>n=2126</td>
<td>n=2391</td>
<td>n=8833</td>
</tr>
<tr>
<td>AANHPI Connections</td>
<td>n=233</td>
<td>n=248</td>
<td>n=239</td>
<td>n=241</td>
<td>n=961</td>
</tr>
<tr>
<td>AI/AN Connections</td>
<td>n=57</td>
<td>n=55</td>
<td>n=55</td>
<td>n=54</td>
<td>n=221</td>
</tr>
<tr>
<td>Black/AA Connections</td>
<td>n=410</td>
<td>n=412</td>
<td>n=400</td>
<td>n=435</td>
<td>n=1657</td>
</tr>
<tr>
<td>Hispanic Connections</td>
<td>n=677</td>
<td>n=732</td>
<td>n=676</td>
<td>n=690</td>
<td>n=2775</td>
</tr>
<tr>
<td>White Connections</td>
<td>n=679</td>
<td>n=541</td>
<td>n=489</td>
<td>n=713</td>
<td>n=2422</td>
</tr>
<tr>
<td>Connections with Disabilities</td>
<td>n=198</td>
<td>n=239</td>
<td>n=203</td>
<td>n=195</td>
<td>n=835</td>
</tr>
<tr>
<td>LGBTQIA+ Connections</td>
<td>n=674</td>
<td>n=507</td>
<td>n=421</td>
<td>n=765</td>
<td>n=2367</td>
</tr>
<tr>
<td>Suicidal Ideation Connections</td>
<td>n=807</td>
<td>n=560</td>
<td>n=443</td>
<td>n=837</td>
<td>n=2647</td>
</tr>
<tr>
<td>Older Rural Men (49+ Years Old)</td>
<td>n=272</td>
<td>N/A</td>
<td>n=267</td>
<td>n=258</td>
<td>n=797</td>
</tr>
</tbody>
</table>

Responses were also collected for trusted messengers to White individuals who are not part of a designated population. These responses are not included in the Total Connections for Designated Populations group.

| White, NOT Designated Population            | n=885                             | n=1192                                     | n=1062                   | n=909                    | n=4048                            |

| TOTAL Interviews Collected                  | n=3213                           | n=3180                                     | n=3188                   | n=3300                   | n=12,881                          |
### ANALYSIS GROUP DEFINITIONS

<table>
<thead>
<tr>
<th>Group Name</th>
<th>Group Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Race/Ethnicity Groups Designated Population</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Total [connections] Gen Pop 13-34</strong></td>
<td>Total Gen Pop, representative to 13-34-year-olds based on age, gender, region, race/ethnicity &amp; household income. Includes all core interviews 13-34 years old; excludes older rural men 49+ interviews</td>
</tr>
<tr>
<td><strong>Total [connections] designated population</strong></td>
<td>Total Designated Populations, includes all interviews collected for 1) White connections designated populations, 2) All BIPOC connections &amp; 3) older rural men 49+ connections only excludes interviews for White connections NOT designated populations</td>
</tr>
<tr>
<td><strong>White designated population 13-34</strong></td>
<td>All interviews for White connections who are part of a designated population group (either LGBTQIA+, have had suicidal ideation, and/or have a disability)</td>
</tr>
<tr>
<td><strong>Hispanic connections 13-34</strong></td>
<td>All interviews for Hispanic connections</td>
</tr>
<tr>
<td><strong>Black/AA connections 13-34</strong></td>
<td>All interviews for Black/AA connections (Black/Afro Caribbean/African American)</td>
</tr>
<tr>
<td><strong>AANPI connections 13-34</strong></td>
<td>All interviews for AANHPI connections (Asian Indian/Indian Origin, Chinese/Chinese Origin, Native Hawaiian/Pacific Islander, Asian/Asian American)</td>
</tr>
<tr>
<td><strong>AI/AN connections 13-34</strong></td>
<td>All interviews for AI/AN connections (American Indian or Alaska Native)</td>
</tr>
<tr>
<td><strong>Rural Man connections 49+</strong></td>
<td>Any male connection, age 49+ and lives in a rural area, across any race/ethnicity</td>
</tr>
<tr>
<td><strong>LGBTQIA+ connections 13-34</strong></td>
<td>Any connection who qualifies as LGBTQIA+ across any race/ethnicity (either via gender identity or sexual orientation)</td>
</tr>
<tr>
<td><strong>Suicidal Ideation connections 13-34</strong></td>
<td>Any connection who has thought about or considered suicide in the past across any race/ethnicity</td>
</tr>
<tr>
<td><strong>Disability connections 13-34</strong></td>
<td>Any connection who has a mental and/or physical disability across any race/ethnicity</td>
</tr>
<tr>
<td><strong>White connections not designated population</strong></td>
<td>All interviews for White connections who are NOT part of designated population (not LGBTQIA+, have not had suicidal ideation and do not have a disability)</td>
</tr>
</tbody>
</table>

### FINDINGS

This study examined and is organized around four key areas:

1. **MENTAL HEALTH STRUGGLES & CRISIS**
2. **988 KNOWLEDGE & USAGE**
3. **988 USAGE CONSIDERATIONS AND INTENTIONS**
4. **988 MESSAGING PERFORMANCE**
SECTION 1: MENTAL HEALTH STRUGGLES & CRISIS

Understanding the mental health journey of loved ones/close connections, and actions taken when help is needed.
JUST UNDER HALF OF TRUSTED MESSENGERS SAY THEIR LOVED ONE OR CLOSE CONNECTION’S MENTAL HEALTH IS EXCELLENT/VERY GOOD.

Nearly half of trusted messengers across all groups say their loved one’s/close connection's mental health is very good or excellent, more so for mothers/caregivers and siblings. Fewer friends than other cohorts say their loved one/connection's mental health is excellent.

CONNECTION’S MENTAL HEALTH STATUS

THE MAJORITY OF TRUSTED MESSENGERS BELIEVE THEY COULD RECOGNIZE CHANGES IN THEIR LOVED ONE OR CLOSE CONNECTION, MORE SO FOR SPOUSES/PARTNERS AND MOTHERS/CAREGIVERS.

Two-thirds or more of trusted messengers across all cohorts said they'd be extremely or very able to recognize if their loved one/close connection was showing changes in behavior that suggest they may harm themselves, slightly more for spouses/partners (75%) and mothers/caregivers (72%) than friends (69%) or siblings (68%). The top signs among all groups of such a shift include isolation or withdrawing, lack of communication, and a shift in mood or behavior.

“His mood would change drastically, and he would withdraw from people and be by himself.”
– SPOUSE/PARTNER OF ASIAN AMERICAN, NATIVE HAWAIIAN, AND PACIFIC ISLANDER LOVED ONE/CLOSE CONNECTION

“If she became withdrawn or unable to work, interact with others, seemed sad or uninterested in things she enjoys.”
– MOTHER/CAREGIVER OF LGBTQIA+ AND HISPANIC LOVED ONE/CLOSE CONNECTION
A few differences can be seen among how well cohort groups describe their ability to recognize concerning changes in behavior:

- Spouses/partners (27%) and friends (29%) of Asian American, Native Hawaiian, and Pacific Islander (AANHPI) loved ones/close connections are more likely than trusted messengers to other groups (19%) to choose “somewhat well;” however, both are less likely to say they’d be able to tell a change “extremely well” (29% spouse/partner, 24% friend, compared to 42% total).

- Mothers/caregivers and siblings of White loved ones/close connections and those who have experienced suicidal ideation are more likely than the total population of trusted messengers to choose “somewhat well” but less likely to choose “extremely well.” Conversely, mothers/caregivers and siblings of Black/African American connections are less likely to choose “somewhat well” and more likely to choose “extremely well.”
  - Can tell somewhat well:
    22% mother/caregiver, 24% sibling overall
    28% mother/caregiver, 30% sibling to White individuals
    31% mother/caregiver, 30% sibling to individuals with previous suicidal ideation
    14% mother/caregiver, 18% sibling to Black/African American individuals
  - Can tell extremely well:
    37% mother/caregiver, 33% sibling overall
    29% mother/caregiver to White individuals
    26% mother/caregiver, 24% sibling to individuals with previous suicidal ideation
    48% mother/caregiver, 41% sibling to Black/African American individuals

- Spouses/partners of older rural men 49+ (13%) are less likely than the total population (19%) to choose “somewhat well,” while friends of this cohort (23%) are also less likely than the total population of trusted messengers (30%) to choose “extremely well.”
As a reminder, throughout the report, any differences by race/ethnicity or other cohort are noted if they meet or exceed any of the following:

- Sample, cohort, and/or connection population size reflects an N>200
- Over/under index data points reported reflect the following:
  - Greater than 10% due to sample size and response proportionality
  - 5% variance (greater than or less than) from the total population of those who are disproportionately impacted by suicide
SIBLINGS ARE LESS LIKELY TO SAY THEY’VE EXPERIENCED A MENTAL HEALTH STRUGGLE WITH THEIR LOVED ONE/CLOSE CONNECTION, COMPARED TO OTHER MESSENGERS.

Half or more of mothers/caregivers (53%), friends (55%) and spouses/partners (59%) say they’ve experienced a situation (one or multiple) where their loved one/close connection struggled with their mental health, while fewer than half (43%) of siblings said the same. Of those who’d experienced such a struggle, nearly all messengers said they took some kind of action to help, mostly talking/staying with them in person and holding/hugging them. Friends were also likely to say they’d talked to their connection on the phone.
ACTIONS TAKEN IN SITUATION: MENTAL HEALTH STRUGGLE
DISPROPORTIONATELY IMPACTED CONNECTION EXPERIENCED
MENTAL HEALTH STRUGGLE

<table>
<thead>
<tr>
<th>Total Trusted Messengers n=4649</th>
<th>Total Spouse/Partner of Designated Populations n=1356</th>
<th>Total Mother/Caregiver of Designated Populations n=1048</th>
<th>Total Sibling of Designated Populations n=918</th>
<th>Total Friend of Designated Populations n=1318</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did something (net)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Talked to them in person</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stayed with them in person</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Held/hugged them</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Talked to them on the phone</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Called one of the connection's family members</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Called their counselor/therapist</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Called their physician</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Called a faith leader/church member</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Called a suicide hotline/help number</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Something else</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I let them work it out by themselves</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Called one of their close friends</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Called their counselor/therapist</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Called their physician</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Called a faith leader/church member</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Called a suicide hotline/help number</td>
<td></td>
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<tr>
<td>Something else</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I let them work it out by themselves</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Spouse/Partner</th>
<th>Mother/Caregiver</th>
<th>Sibling</th>
<th>Friend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Called one of connection's family members</td>
<td>32%</td>
<td>13%</td>
<td>23%</td>
</tr>
<tr>
<td>Talked to them on the phone</td>
<td>30%</td>
<td>26%</td>
<td>34%</td>
</tr>
<tr>
<td>I searched online for advice/resources</td>
<td>24%</td>
<td>23%</td>
<td>17%</td>
</tr>
<tr>
<td>Offered to take them to the hospital/ER</td>
<td>19%</td>
<td>20%</td>
<td>14%</td>
</tr>
</tbody>
</table>

| Called one of their close friends | 18% | 12% | 12% | 13% |
| Called their counselor/therapist | 14% | 23% | 12% | 7% |
| I talked to someone else for advice/resources | 18% | 19% | 20% |
| Called one of my family members | 13% | 20% | 39% | 15% |
Most trusted messengers would be likely to spend more time with their connection or talking to them during a future mental health struggle. Mothers/caregivers are more likely than other groups to say they’d contact a counselor/therapist or doctor for guidance.

Among cohorts:
- Friends of older rural men 49+ are less likely than the total population of trusted messengers to search online for advice/resources (56%, vs. 71% total), contact someone for advice (48%, vs. 61% total), contact a counselor/therapist (32%, vs. 50% total), reach out to support groups for advice/resources (39%, vs. 49% total), contact a suicidal hotline (37%, vs. 48%), or contact a physician (23%, vs. 35% total).
- Friends and siblings of a loved one/close connection who’s experienced suicidal ideation are less likely than the total population to say they’d contact a teacher or school administrator (34% siblings vs. 49% total, 41% friend vs. 52% total) or contact a faith leader/church member (28% siblings vs. 39% total, 26% friends vs. 33% total).
- Black/African American spouses/partners (55%, vs. 43% total), mothers/caregivers (53%, vs. 43% total), and siblings (51%, vs. 39% total) are more likely than total respondents to say they’d contact a faith leader/church member for help.
### ACTIONS WOULD TAKE IN FUTURE MENTAL HEALTH STRUGGLE (% DEFINITELY/PROBABLY WOULD DO)

<table>
<thead>
<tr>
<th>Spouse/Partner</th>
<th>Mother/Caregiver</th>
<th>Sibling</th>
<th>Friend</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
<td>More than</td>
<td>Less than</td>
</tr>
<tr>
<td>Search online for advice/resources</td>
<td>74%</td>
<td>77%</td>
<td>74%</td>
</tr>
<tr>
<td>Contact someone else for advice/resources</td>
<td>62%</td>
<td>63%</td>
<td>63%</td>
</tr>
<tr>
<td>Contact a teacher or school administrator</td>
<td>n/a</td>
<td>n/a</td>
<td>49%</td>
</tr>
<tr>
<td>Contact a counselor/therapist for guidance</td>
<td>63%</td>
<td>78%</td>
<td>61%</td>
</tr>
<tr>
<td>Reach out to support groups for advice/resources</td>
<td>60%</td>
<td>67%</td>
<td>56%</td>
</tr>
<tr>
<td>Contact a suicide hotline/help number for guidance</td>
<td>55%</td>
<td>60%</td>
<td>53%</td>
</tr>
<tr>
<td>Contact a physician for guidance</td>
<td>58%</td>
<td>69%</td>
<td>50%</td>
</tr>
<tr>
<td>Contact a faith leader/church member</td>
<td>43%</td>
<td>53%</td>
<td>33%</td>
</tr>
</tbody>
</table>

**AANHPI** | **Black/AA** | **Hispanic** | **LGBTQIA+** | **PWD** | **Rural Men** | **Suicidal Ideation** | **White** | **White NOT designated pop**
ABOUT A THIRD OF PARTICIPANTS SAY THEY’VE EXPERIENCED A MENTAL HEALTH CRISIS WITH THEIR LOVED ONE/CONNECTION, MORE FOR SPOUSES/PARTNERS.

Four in ten (41%) spouses/partners say they’ve experienced a situation where their loved one/close connection appeared to be in a mental health crisis, as do 36% of friends, 35% of mothers/caregivers and 29% of siblings. During such a situation, like during a mental health struggle, trusted messengers were most likely to say they talked to their loved one/close connection or stayed with them in person, with many also hugging/holding them. Siblings were most likely of the groups to call a family member; friends talked on the phone with their loved one/close connection.

Mothers/caregivers (43%, vs. 35% total) and friends (23%, vs. 18% total) of loved ones who have experienced suicidal ideation are more likely than the total population to say they’ve offered to take them to the hospital/ER during a mental health crisis; mothers/caregivers of LGBTQIA+ are less likely to say they’ve called one of their connection’s family members (16%, vs. 22% total).

### EXPERIENCED MENTAL HEALTH CRISIS WITH LOVED ONE/CLOSE CONNECTION

<table>
<thead>
<tr>
<th>Total TrustedMessengers</th>
<th>Total Spouse/Partner of Designated Populations</th>
<th>Total Mother/Caregiver of Designated Populations</th>
<th>Total Sibling of Designated Populations</th>
<th>Total Friend of Designated Populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>n=8833</td>
<td>n=2328</td>
<td>n=1988</td>
<td>n=2126</td>
<td>n=2391</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AANHPI</th>
<th>Black/AA</th>
<th>Hispanic</th>
<th>LGBTQIA+</th>
<th>PwD</th>
<th>Rural Men</th>
<th>Suicidal Ideation</th>
<th>White</th>
<th>White NOT designated pop</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>90%</td>
<td>80%</td>
<td>70%</td>
<td>60%</td>
<td>50%</td>
<td>40%</td>
<td>30%</td>
<td>20%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Spouse/Partner</th>
<th>Total</th>
<th>More than</th>
<th>Less than</th>
<th>Mother/Caregiver</th>
<th>Total</th>
<th>More than</th>
<th>Less than</th>
<th>Sibling</th>
<th>Total</th>
<th>More than</th>
<th>Less than</th>
<th>Friend</th>
<th>Total</th>
<th>More than</th>
<th>Less than</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes (net)</td>
<td>41%</td>
<td>54%</td>
<td>14%</td>
<td>35%</td>
<td>58%</td>
<td>43%</td>
<td>14%</td>
<td>29%</td>
<td>52%</td>
<td>40%</td>
<td>20%</td>
<td>36%</td>
<td>52%</td>
<td>27%</td>
<td>15%</td>
</tr>
<tr>
<td>Yes, there was 1 situation</td>
<td>26%</td>
<td>31%</td>
<td>13%</td>
<td>22%</td>
<td>31%</td>
<td>11%</td>
<td>19%</td>
<td>32%</td>
<td>43%</td>
<td>10%</td>
<td>13%</td>
<td>19%</td>
<td>15%</td>
<td>11%</td>
<td>12%</td>
</tr>
<tr>
<td>Yes, there have been multiple situations</td>
<td>15%</td>
<td>23%</td>
<td>18%</td>
<td>13%</td>
<td>18%</td>
<td>11%</td>
<td>10%</td>
<td>20%</td>
<td>16%</td>
<td>30%</td>
<td>19%</td>
<td>12%</td>
<td>17%</td>
<td>28%</td>
<td></td>
</tr>
<tr>
<td>No</td>
<td>58%</td>
<td>85%</td>
<td>43%</td>
<td>63%</td>
<td>76%</td>
<td>40%</td>
<td>19%</td>
<td>70%</td>
<td>89%</td>
<td>26%</td>
<td>53%</td>
<td>62%</td>
<td>84%</td>
<td>45%</td>
<td>27%</td>
</tr>
</tbody>
</table>
**Actions Taken in Situation: Mental Health Crisis**

Disproportionately impacted connection experienced mental health crisis.

<table>
<thead>
<tr>
<th>Total Trusted Messengers</th>
<th>Total Spouse/Partner of Designated Populations</th>
<th>Total Mother/Caregiver of Designated Populations</th>
<th>Total Sibling of Designated Populations</th>
<th>Total Friend of Designated Populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>n=3103</td>
<td>n=944</td>
<td>n=696</td>
<td>n=608</td>
<td>n=855</td>
</tr>
</tbody>
</table>

**Spouse/Partner**

- Talked to them on the phone: 28%
- Offered to take them to the hospital/ER: 25%
- Called their counselor/therapist: 14%
- Called one of connection’s family members: 34%

**Mother/Caregiver**

- Talked to them on the phone: 28%
- Offered to take them to the hospital/ER: 25%
- Called their counselor/therapist: 14%
- Called one of connection’s family members: 34%

**Sibling**

- Talked to them on the phone: 30%
- Offered to take them to the hospital/ER: 19%
- Called their counselor/therapist: 13%
- Called one of connection’s family members: 38%

**Friend**

- Talked to them on the phone: 46%
- Offered to take them to the hospital/ER: 18%
- Called their counselor/therapist: 8%
- Called one of connection’s family members: 35%

**Did something (net)**

- 99%

**Talked to them in person**

- 63%

**Stayed with them in person**

- 61%

**Held/hugged them**

- 55%

**Talked to them on the phone**

- 33%

**Called one of the connection’s family members**

- 32%

**Called their counselor/therapist**

- 27%

**Called one of my family members**

- 24%

**Called their counselor/therapist**

- 21%

**Called one of their close friends**

- 16%

**Called their physician**

- 14%

**Called a faith leader/church member**

- 8%

**Called their counselor/therapist**

- 15%

**Called a mobile crisis unit**

- 5%

**Called a suicide hotline/help number**

- 7%

**Called their physician**

- 21%

**Called 911**

- 9%

**Called a faith leader/church member**

- 9%

**Called a mobile crisis unit**

- 7%

**Called a suicide hotline/help number**

- 7%
SECTION 2: 988
KNOWLEDGE & USAGE

Understanding trusted messengers’ awareness, familiarity, usage, and recommendation of the 988 Suicide & Crisis Lifeline.
SPOUSES/PARTNERS AND FRIENDS ARE MORE LIKELY TO BE AWARE/HEARD OF AND ARE SOMEWHAT FAMILIAR WITH 988 COMPARED TO OTHER GROUPS.

Trusted messengers are split on 988 awareness, though few have used it. More spouses/partners (56%) and friends (53%) of loved ones/close connections say they’re aware of it, compared to 49% of siblings and 44% of mothers/caregivers. Very few overall say they’ve used it, however.

988 AIDED AWARENESS

<table>
<thead>
<tr>
<th></th>
<th>Total Trusted Messengers</th>
<th>Total Spouse/Partner of Designated Populations</th>
<th>Total Mother/Caregiver of Designated Populations</th>
<th>Total Sibling of Designated Populations</th>
<th>Total Friend of Designated Populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aware of 988 (net)</td>
<td>56%</td>
<td>49%</td>
<td>44%</td>
<td>32%</td>
<td>53%</td>
</tr>
<tr>
<td>I have used it</td>
<td>4%</td>
<td>6%</td>
<td>3%</td>
<td>3%</td>
<td>3%</td>
</tr>
<tr>
<td>I have heard of it, and I am somewhat familiar with it</td>
<td>16%</td>
<td>19%</td>
<td>13%</td>
<td>14%</td>
<td>16%</td>
</tr>
<tr>
<td>I have heard of it, but don’t know much about it</td>
<td>32%</td>
<td>29%</td>
<td>32%</td>
<td>39%</td>
<td>34%</td>
</tr>
<tr>
<td>I have never heard of it before</td>
<td>44%</td>
<td>63%</td>
<td>56%</td>
<td>51%</td>
<td>47%</td>
</tr>
</tbody>
</table>

9% of total trusted messengers can name “988” top of mind (unaided open-ended)
SPOUSES/PARTNERS ARE ALSO MORE LIKELY THAN OTHER GROUPS TO SAY THEY KNOW SOMEONE WHO HAS USED 988; MOTHERS/CAREGIVERS ARE LEAST LIKELY.

A quarter (26%) of spouses/partners know someone who has used 988, compared to 16% of friends, 15% of siblings, and 11% of mothers/caregivers. Spouses/partners, siblings, and friends of a rural man 49+ were least likely to be aware of 988 compared to other cohort groups, while all loved ones/close connections of an individual who's experienced suicidal ideation were more likely to know someone who has used it.

Of those who are aware of 988, respondents indicated a variety of reasons someone should call the hotline: feeling like they’ll harm themselves or others, struggling with their own mental health, if they needed to talk to someone, if they needed resources for themselves or others.

988 OTHER KNOWN USAGE

<table>
<thead>
<tr>
<th>Total Trusted Messengers</th>
<th>Total Spouse/Partner of Designated Populations</th>
<th>Total Mother/Caregiver of Designated Populations</th>
<th>Total Sibling of Designated Populations</th>
<th>Total Friend of Designated Populations</th>
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</thead>
<tbody>
<tr>
<td>n=8833</td>
<td>n=2328</td>
<td>n=1988</td>
<td>n=2126</td>
<td>n=2391</td>
</tr>
<tr>
<td>100%</td>
<td>90%</td>
<td>80%</td>
<td>70%</td>
<td>60%</td>
</tr>
<tr>
<td>50%</td>
<td>40%</td>
<td>30%</td>
<td>20%</td>
<td>10%</td>
</tr>
<tr>
<td>0%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Not aware of 988</th>
<th>Do not know anyone who has</th>
<th>Know someone who has</th>
</tr>
</thead>
<tbody>
<tr>
<td>AANHPI</td>
<td>Black/AA</td>
<td>Hispanic</td>
</tr>
<tr>
<td>44%</td>
<td>63%</td>
<td>56%</td>
</tr>
<tr>
<td>30%</td>
<td>33%</td>
<td>34%</td>
</tr>
<tr>
<td>26%</td>
<td>31%</td>
<td>11%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Spouse/Partner</th>
<th>Mother/Caregiver</th>
<th>Sibling</th>
<th>Friend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>Total</td>
<td>Total</td>
<td>Total</td>
</tr>
<tr>
<td>More than</td>
<td>Less than</td>
<td>More than</td>
<td>Less than</td>
</tr>
<tr>
<td>Spouse/Partner</td>
<td>Mother/Caregiver</td>
<td>Sibling</td>
<td>Friend</td>
</tr>
<tr>
<td>Know someone who has</td>
<td>26%</td>
<td>31%</td>
<td>15%</td>
</tr>
</tbody>
</table>
REASONS WOULD CALL 988
AWARE OF 988 SUICIDE & CRISIS LIFELINE

When they’ve heard about it, trusted messengers are most likely to have heard about 988 being available 24/7 and free.

Of those who said they’re aware of 988, the majority of all trusted messengers had heard that the service is available all the time and that it’s free, followed by it being helpful, anonymous, and/or private/confidential. Trusted messengers of a Black/African American loved one/close connection were less likely than the total population of trusted messengers to have heard specific things about 988, including:

- **Siblings:**
  - It’s available 24/7 (49% Black/AA, 65% total)
  - It’s free (44% Black/AA, 56% total)
  - There is a real person on the other end/not a robot (29% Black/AA, 37% total)

- **Spouses/partners:**
  - It’s private/confidential (29% Black/AA, 38% total)
  - The person on the other end is a trained counselor (19% Black/AA, 25% total)

- **Friends:**
  - It’s private/confidential (36% Black/AA, 45% total)
  - The person on the other can can connect you to other mental health resources (25% Black/AA, 33% total)
  - They can refer you to other mental health professionals (24% Black/AA, 31% total)

“I’m not sure if the suicide hotline does counseling over the phone. I know they’re 24 hours, but I’m not sure if they could offer counseling while you’re waiting on an [in-person] appointment.”

– SIBLING TO AN OLDER RURAL MAN 49+

“I don’t really know anybody that’s called the hotline, but if I knew somebody was suicidal, I would call it and I’m sure they would give me step-by-step directions on what to do.”

– FRIEND OF PERSON WHO HAS EXPERIENCED SUICIDAL IDEATION
988 FAMILIARITY/ASSOCIATIONS
AWARE OF 988 SUICIDE & CRISIS LIFELINE

- Total Trusted Messengers: n=4488
- Total Spouse/Partner of Designated Populations: n=1307
- Total Mother/Caregiver of Designated Populations: n=879
- Total Sibling of Designated Populations: n=1041
- Total Friend of Designated Populations: n=1261

- It's available 24/7
- It's free
- It's helpful
- It's anonymous
- You can talk to someone instantly
- There is a real person on the other end not a robot
- It's available through call, text, or chat
- The person on the other end can connect you to other mental health resources

- They can refer you to other mental health professionals
- The person on the other end is a trained counselor
- There's a long wait time to talk to someone
- The person on the other end is not helpful
- It takes too many screening questions before you can talk to a real person
- It's not helpful
- Something else
- None of these
**988 Familiarity/Associations**

Aware of 988 Suicide & Crisis Lifeline

<table>
<thead>
<tr>
<th></th>
<th>Spouse/Partner</th>
<th>Mother/Caregiver</th>
<th>Sibling</th>
<th>Friend</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>It’s available 24/7</td>
<td>61%</td>
<td>66%</td>
<td>65%</td>
<td>67%</td>
</tr>
<tr>
<td>It’s free</td>
<td>50%</td>
<td>58%</td>
<td>56%</td>
<td>61%</td>
</tr>
<tr>
<td>It’s anonymous</td>
<td>37%</td>
<td>44%</td>
<td>42%</td>
<td>46%</td>
</tr>
<tr>
<td>It’s private/confidential</td>
<td>38%</td>
<td>44%</td>
<td>42%</td>
<td>45%</td>
</tr>
<tr>
<td>There is a real person on the other end/not a robot</td>
<td>33%</td>
<td>37%</td>
<td>37%</td>
<td>41%</td>
</tr>
<tr>
<td>It’s available through call, text, or chat</td>
<td>36%</td>
<td>33%</td>
<td>36%</td>
<td>37%</td>
</tr>
<tr>
<td>The person on the other can connect you to other mental health resources</td>
<td>28%</td>
<td>33%</td>
<td>31%</td>
<td>33%</td>
</tr>
<tr>
<td>They can refer you to other mental health professionals</td>
<td>28%</td>
<td>33%</td>
<td>28%</td>
<td>31%</td>
</tr>
<tr>
<td>The person on the other end is a trained counselor</td>
<td>25%</td>
<td>19%</td>
<td>26%</td>
<td>28%</td>
</tr>
</tbody>
</table>

AANHPI | Black/AA | Hispanic | LGBTQIA+ | PwD | Rural Men | Suicidal Ideation | White | White NOT designated pop

- AANHPI
- Black/AA
- Hispanic
- LGBTQIA+
- PwD
- Rural Men
- Suicidal Ideation
- White
- White NOT designated pop
MOST TRUSTED MESSENGERS FEEL 988 IS VERY/EXTREMELY VALUABLE, ESPECIALLY PEOPLE WITH ASIAN AMERICAN, NATIVE HAWAIIAN, AND PACIFIC ISLANDER LOVED ONES/CLOSE CONNECTIONS.

After reading about 988, most trusted messengers feel it’s very/extremely valuable, even more so for all trusted messengers to Asian American, Native Hawaiian, and Pacific Islander individuals.

988 VALUE
AWARE OF 988 SUICIDE & CRISIS LIFELINE

<table>
<thead>
<tr>
<th>Total Trusted Messengers</th>
<th>Total Spouse/Partner of Designated Populations</th>
<th>Total Mother/Caregiver of Designated Populations</th>
<th>Total Sibling of Designated Populations</th>
<th>Total Friend of Designated Populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>n=8833</td>
<td>n=2328</td>
<td>n=1988</td>
<td>n=2126</td>
<td>n=2391</td>
</tr>
</tbody>
</table>

[Graph showing the value of 988 among different populations]
INCREASING 988’S VALUE STARTS WITH INFORMATION.

Trusted messengers across groups found 988 more valuable if they know more about what happens when someone calls, hear personal success stories, know more about 988’s trained counselors, or that information would be confidential. Of all groups, mothers/caregivers found the least value in 988 being endorsed by someone they trust.

Trusted messengers (spouse/partner, sibling, friend) to older rural men 49+ found less value than other cohort groups across a number of factors, particularly about endorsements or social media:

- **Spouses/partners:**
  - Hearing personal success stories/knowing who has used it (32% older rural men, 44% total)
  - If it is endorsed by someone I trust (19% older rural men, 26% total)
  - If it was featured in an ad on social media (18% older rural men, 24% total)
  - If it was featured on a social media account that I follow/trust (14% older rural men, 24% total)

- **Siblings:**
  - If it was featured in an ad on social media (16% older rural men, 26% total)
  - If it was featured on a social media account that I follow/trust (14% older rural men, 21% total)

- **Friends:**
  - If it was featured in an ad on social media (14% older rural men, 27% total)
  - If it was featured on a social media account that I follow/trust (13% older rural men, 28% total)

Asian American, Native Hawaiian, and Pacific Islander mothers/caregivers would find more value in 988 than the total population of trusted messengers if it was endorsed by someone they trust (26% AANHPI, 19% total), if it was featured on news they rely on (27% AANHPI, 20% total), or knowing who/what organizations fund 988 (34% AANHPI, 27% total)—something siblings within the same cohort are also interested in (32% AANHPI siblings, 26% total).

HOW TO INCREASE 988 VALUE

<table>
<thead>
<tr>
<th>Total Trusted Messengers  n=8833</th>
<th>Total Spouse/Partner of Designated Populations  n=2328</th>
<th>Total Mother/Caregiver of Designated Populations  n=1988</th>
<th>Total Sibling of Designated Populations  n=2126</th>
<th>Total Friend of Designated Populations  n=2391</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowing more about what happens when someone calls the lifeline</td>
<td>Hearing that information shared is confidential</td>
<td>Hearing personal success stories/knowing who has used it</td>
<td>Knowing more about the trained counselors who work for this lifeline</td>
<td>Knowing who/what organizations fund this lifeline</td>
</tr>
</tbody>
</table>
### HOW TO INCREASE 988 VALUE

<table>
<thead>
<tr>
<th></th>
<th>Spouse/Partner</th>
<th>Mother/Caregiver</th>
<th>Sibling</th>
<th>Friend</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total</strong></td>
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<td></td>
</tr>
<tr>
<td><strong>Total Trusted Messengers</strong></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>n=8833</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Spouse/Partner of</strong></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Designated Populations</td>
<td></td>
<td></td>
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<tr>
<td>n=2328</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Mother/Caregiver of</strong></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Designated Populations</td>
<td></td>
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<tr>
<td>n=1988</td>
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<tr>
<td><strong>Total Sibling of</strong></td>
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<td></td>
<td></td>
<td></td>
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<tr>
<td>Designated Populations</td>
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</tr>
<tr>
<td>n=2126</td>
<td></td>
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<tr>
<td><strong>Total Friend of</strong></td>
<td></td>
<td></td>
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<tr>
<td>Designated Populations</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>n=2391</td>
<td></td>
<td></td>
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</tbody>
</table>

#### Factors影响ing credibility

<table>
<thead>
<tr>
<th><strong>Factor</strong></th>
<th>Spouse/Partner</th>
<th>Mother/Caregiver</th>
<th>Sibling</th>
<th>Friend</th>
</tr>
</thead>
<tbody>
<tr>
<td>If it was endorsed by someone I trust</td>
<td>26%</td>
<td>19%</td>
<td>19%</td>
<td>26%</td>
</tr>
<tr>
<td>Hearing personal success stories/ knowing who has used it</td>
<td>44%</td>
<td>32%</td>
<td>42%</td>
<td>45%</td>
</tr>
<tr>
<td>Hearing/seeing advertisements for this lifeline</td>
<td>34%</td>
<td>36%</td>
<td>34%</td>
<td>35%</td>
</tr>
<tr>
<td>Knowing who/what organizations fund this lifeline</td>
<td>27%</td>
<td>27%</td>
<td>34%</td>
<td>32%</td>
</tr>
<tr>
<td>If it was featured in/on the news I rely on</td>
<td>20%</td>
<td>25%</td>
<td>20%</td>
<td>19%</td>
</tr>
<tr>
<td>Nothing would make it more credible</td>
<td>6%</td>
<td>12%</td>
<td>9%</td>
<td>7%</td>
</tr>
</tbody>
</table>
Top resources messengers would find helpful if included on the 988 website:

- Information on who to contact when someone they know is in crisis
- How to start a conversation with someone struggling with their mental health
- How to identify someone struggling with their mental health
- Information about mental health conditions, such as depression, anxiety, OCD, etc.
- What to do during a panic attack
- How to find and choose a mental health therapist

Trusted messengers to older rural men 49+ are less likely to find information about relaxation, health/wellness, meditation, etc. helpful than other cohorts.
### Helpful Resources to Include in 988 Website (% Extremely/Very Helpful)

| Real-life people talking about how they have supported/helped someone with 988 | More than | Less than | More than | Less than | More than | Less than | More than | Less than | Total | More than | Less than | More than | Less than | More than | Less than | More than | Less than | More than | Less than | More than | Less than | More than | Less than |
| Spouse/Partner | 76% | 77% | 76% | 76% | | | | | | | | | | | | | | | | | | | | | | | |
| Mother/Caregiver | 71% | 75% | 72% | 70% | 52% | | | | | | | | | | | | | | | | | | | | | | | | |
| Sibling | 71% | 70% | 69% | 65% | 45% | | | | | | | | | | | | | | | | | | | | | | | | | |
| Friend | 68% | 49% | 65% | 41% | 62% | 40% | | | | | | | | | | | | | | | | | | | | | | | | | |
| Tips for relaxation techniques | 66% | 49% | 62% | 38% | 59% | 49% | | | | | | | | | | | | | | | | | | | | | | | | | |
| Information on mindfulness and meditation | 68% | 49% | 67% | 65% | 41% | 62% | 40% | | | | | | | | | | | | | | | | | | | | | | | | |
| Tips on physical health and wellness | 66% | 49% | 63% | 62% | 38% | 59% | 49% | | | | | | | | | | | | | | | | | | | | | | | | |
| Links to resources for religious services | 54% | 48% | 36% | 49% | 37% | 43% | 54% | | | | | | | | | | | | | | | | | | | | | | | | |
SECTION 3: 988 USAGE CONSIDERATIONS & INTENTIONS

Identifying who would and would not use and/or recommend 988 in future situations, and why or why not.
THE MAJORITY OF TRUSTED MESSENGERS WOULD CONSIDER USING/RECOMMENDING 988 WHEN THEIR LOVED ONE/CLOSE CONNECTION IS STRUGGLING OR IN CRISIS.

Nearly three-quarters of all messengers said they’d consider using 988 as a resource to get help or support for their loved one/close connection if they were struggling with their mental health or in crisis, even more for mothers/caregivers (76%). More trusted messengers to Asian American, Native Hawaiian, and Pacific Islander individuals (across all groups) than the aggregate said they’d be very likely to consider using 988.
ABOVE ALL, TRUSTED MESSENGERS WOULD CONSIDER USING 988 TO LEARN HOW TO BEST SUPPORT THEIR LOVED ONE/CLOSE CONNECTION WHEN THEY’RE STRUGGLING OR IN CRISIS.

Trusted messengers across groups would also consider using 988 as a resource to learn how to talk about mental health with their loved ones/close connections, find additional resources to help, or get support for themselves as a loved one/close connection.

More siblings of White (53%) loved ones/close connections and those who have experienced suicidal ideation (53%) said they’d be open to using 988 because they can’t support their loved ones/close connections alone (compared to 44% total); fewer mothers of White loved ones/close connections said they’d use 988 to learn more about mental health (28%, vs. 39% total).

<table>
<thead>
<tr>
<th>Total Trusted Messengers</th>
<th>Total Spouse/Partner of Designated Populations</th>
<th>Total Mother/Caregiver of Designated Populations</th>
<th>Total Sibling of Designated Populations</th>
<th>Total Friend of Designated Populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>n=8833</td>
<td>n=2328</td>
<td>n=1988</td>
<td>n=2126</td>
<td>n=2391</td>
</tr>
</tbody>
</table>

**To learn how to best support connection in this situation**
- AANHPI: 35%
- Black/AA: 45%
- Hispanic: 44%
- LGBTQIA+: 53%
- PwD: 53%
- Rural Men: 53%
- Suicidal Ideation: 53%
- White: 45%
- White NOT designated pop: 45%

**To learn how to talk about mental health with connection**
- AANHPI: 38%
- Black/AA: 39%
- Hispanic: 28%
- LGBTQIA+: 39%
- PwD: 35%
- Rural Men: 35%
- Suicidal Ideation: 35%
- White: 35%
- White NOT designated pop: 35%

**To find additional resources to help**
- AANHPI: 56%
- Black/AA: 55%
- Hispanic: 59%
- LGBTQIA+: 56%
- PwD: 56%
- Rural Men: 56%
- Suicidal Ideation: 56%
- White: 56%
- White NOT designated pop: 56%

**To get support for myself as their close connection**
- AANHPI: 54%
- Black/AA: 49%
- Hispanic: 60%
- LGBTQIA+: 53%
- PwD: 56%
- Rural Men: 56%
- Suicidal Ideation: 56%
- White: 52%
- White NOT designated pop: 52%

**Because I know I can’t support them alone**
- AANHPI: 38%
- Black/AA: 45%
- Hispanic: 44%
- LGBTQIA+: 53%
- PwD: 53%
- Rural Men: 53%
- Suicidal Ideation: 53%
- White: 45%
- White NOT designated pop: 45%

**To learn more about mental health**
- AANHPI: 42%
- Black/AA: 35%
- Hispanic: 45%
- LGBTQIA+: 44%
- PwD: 45%
- Rural Men: 45%
- Suicidal Ideation: 45%
- White: 39%
- White NOT designated pop: 35%

**Some other reason**
- AANHPI: 1%
- Black/AA: 0%
- Hispanic: 1%
- LGBTQIA+: 0%
- PwD: 0%
- Rural Men: 0%
- Suicidal Ideation: 0%
- White: 1%
- White NOT designated pop: 0%
PEOPLE WHO ARE NOT OPEN TO USING 988 AS A RESOURCE CITED A VARIETY OF BARRIERS: PRIVACY, POTENTIAL DAMAGE TO RELATIONSHIPS, AND LACK OF KNOWLEDGE.

When asked why they wouldn’t use 988 as a resource, responses varied. Friends especially are worried about how it would impact their relationship with their loved one/close connection (they’d be overstepping, it would be a breach of trust, etc.), or are worried law enforcement would be contacted.

Spouses/partners and friends of someone who has experienced suicidal ideation are more likely to say they’d be worried about damaging their relationship, that law enforcement would be called, or that responses would be scripted and not authentic.

BARRIERS TO USING 988 AS A RESOURCE AMONG THOSE NOT OPEN TO USING 988 AS A RESOURCE
### BARRIERS TO USING 988 AS A RESOURCE AMONG THOSE NOT OPEN TO USING 988 AS A RESOURCE

<table>
<thead>
<tr>
<th></th>
<th>Spouse/Partner</th>
<th>Mother/Caregiver</th>
<th>Sibling</th>
<th>Friend</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
<td>More than</td>
<td>Total</td>
<td>More than</td>
</tr>
<tr>
<td>Worried I'd be overstepping connection's privacy</td>
<td>36%</td>
<td>50%</td>
<td>25%</td>
<td>35%</td>
</tr>
<tr>
<td>Connection would see it as a breach of trust/damaging our relationship</td>
<td>33%</td>
<td>46%</td>
<td>27%</td>
<td>27%</td>
</tr>
<tr>
<td>Worried they'd call law enforcement/I'd get connection in trouble</td>
<td>20%</td>
<td>13%</td>
<td>20%</td>
<td>28%</td>
</tr>
<tr>
<td>Responses might be scripted or not personalized</td>
<td>20%</td>
<td>26%</td>
<td>16%</td>
<td>17%</td>
</tr>
<tr>
<td>Worried they might not be able to help in a timely manner</td>
<td>16%</td>
<td>14%</td>
<td>16%</td>
<td>17%</td>
</tr>
<tr>
<td>I would see it as a breach of trust/damaging to our relationship</td>
<td>14%</td>
<td>26%</td>
<td>8%</td>
<td>14%</td>
</tr>
</tbody>
</table>
MOST TRUSTED MESSENGERS, ESPECIALLY MOTHERS/CAREGIVERS, SAID THEY’D BE LIKELY TO RECOMMEND 988 TO THEIR LOVED ONE/CLOSE CONNECTION IF THEY WERE STRUGGLING WITH THEIR MENTAL HEALTH OR IN CRISIS.

Over three-quarters (77%) of mothers/caregivers, 72% of friends, and 70% each of spouses/partners and siblings said they’d be very/extremely likely to recommend 988 to their loved one/close connection if they were struggling with their mental health. More spouses/partners and siblings of Asian American, Native Hawaiian, and Pacific Islander loved ones/close connections than the aggregate said they’d be very likely to recommend.

988 FUTURE INTENTIONS TO RECOMMEND TO LOVED ONE/CLOSE CONNECTION

<table>
<thead>
<tr>
<th>Total Trusted Messengers</th>
<th>Total Spouse/Partner of Designated Populations</th>
<th>Total Mother/Caregiver of Designated Populations</th>
<th>Total Sibling of Designated Populations</th>
<th>Total Friend of Designated Populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>n=8833</td>
<td>n=2328</td>
<td>n=1988</td>
<td>n=2126</td>
<td>n=2391</td>
</tr>
</tbody>
</table>

- **Very likely**: 29% (Spouse/Partner), 26% (Mother/Caregiver), 28% (Sibling), 29% (Friend)
- **Extremely likely**: 41% (Spouse/Partner), 33% (Mother/Caregiver), 51% (Sibling), 43% (Friend)
MOST TRUSTED MESSENGERS SAID THEY’D RECOMMEND 988 IF THEIR LOVED ONE/CLOSE CONNECTION WAS STRUGGLING BECAUSE 988 IS TRAINED TO HANDLE MENTAL HEALTH SITUATIONS, AND CAN CONNECT THEM TO A PROFESSIONAL.

Trusted messengers are most likely to consider recommending 988 to a loved one/close connection because:

- The people at 988 are trained to handle situations with mental health
- It’s best for their loved one/close connection to speak directly to a professional
- 988 would make sure they get the help they need

Spouses/partners are less likely than other groups to say they can’t support their loved one/close connection alone, as are siblings of individuals who have experienced suicidal ideation (55% suicidal ideation, 46% total sibling).

### REASONS WOULD RECOMMEND TO CONNECTION AMONG THOSE OPEN TO RECOMMENDING 988

<table>
<thead>
<tr>
<th>Total Trusted Messengers</th>
<th>Total Spouse/Partner of Designated Populations</th>
<th>Total Mother/Caregiver of Designated Populations</th>
<th>Total Sibling of Designated Populations</th>
<th>Total Friend of Designated Populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>n=6356</td>
<td>n=1622</td>
<td>n=1525</td>
<td>n=1487</td>
<td>n=1722</td>
</tr>
<tr>
<td>100%</td>
<td>90%</td>
<td>80%</td>
<td>70%</td>
<td>60%</td>
</tr>
<tr>
<td>50%</td>
<td>40%</td>
<td>30%</td>
<td>20%</td>
<td>10%</td>
</tr>
<tr>
<td>0%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **The people at 988 are trained to handle situations with mental health**: 63%
- **It’s best for connection to speak directly to a professional**: 56%
- **988 would make sure they get the help they need**: 64%
- **I know I can’t support them alone**: 44%
- **Some other reason**: 1%
THOSE WHO WOULD NOT RECOMMEND 988 ARE WORRIED ABOUT PRIVACY OR SAY THEY DON’T KNOW ENOUGH ABOUT IT.

When asked if they would use 988 as a resource, the top barriers among trusted messengers to recommending 988 to a loved one/close connection if they were struggling with mental health or in crisis are related to privacy, relationship, and credibility:

- Worried about the privacy/confidentiality of their loved one/close connection
- Don't know enough about it
- Loved one/close connection would see it as damaging to the relationship
- Don't know how credible it is
- Worried they’d call law enforcement, and/or that their loved one/close connection would get in trouble

“In case of an emergency, if I feel like he's really about to hurt himself, I would definitely **call 911** or just someone that can get here as soon as possible.”

— SIBLING TO PERSON WHO HAS EXPERIENCED SUICIDAL IDEATION

“I guess I would be like, ‘**What warrants calling that number?**’ You know, like when somebody calls 911, usually it’s an emergency.”

— FRIEND TO PERSON WHO HAS A DISABILITY

Siblings of Hispanic (13-34) loved ones/close connections are more worried about credibility and an engagement with law enforcement. Spouses and friends of individuals who have experienced suicidal ideation are worried about law enforcement and that responses from 988 would be scripted or not personalized.
BARRIERS TO RECOMMENDING 988 TO CONNECTION
AMONG THOSE NOT OPEN TO RECOMMENDING 988

Total Trusted Messengers
n=2477

Total Spouse/Partner of Designated Populations
n=706

Total Mother/Caregiver of Designated Populations
n=463

Total Sibling of Designated Populations
n=639

Total Friend of Designated Populations
n=669

60%
50%
40%
30%
20%
10%
0%

I would see it as damaging to our relationship

Don't know enough about it

Don't know how credible it is

Connection would see it as damaging to our relationship

Worried they'd call law enforcement/ connection would get in trouble

Responses might be scripted or not personalized

Worried that they would not be able to help in a timely manner

Don't know if the person on the other end is trained

Some other reason

Worried about connection's privacy/confidentiality

Responses might be scripted or not personalized

Worried that they would not be able to help in a timely manner

Don't know if the person on the other end is trained

Some other reason

Don't know how credible it is

Don't know enough about it

Worried they'd call law enforcement/ connection would get in trouble

Worried that it would cost money

Worried that it would cost money

Worried that it would cost money

Worried about connection's privacy/confidentiality

Don't know if they would be talking to a real person

Some other reason

Spouse/Partner

Mother/Caregiver

Sibling

Friend

Don't know how credible it is 16%

Don't know enough about it 22%

Worried they’d called law enforcement/ connection would get in trouble 21%

Responses might be scripted or not personalized 17%

Worried they would not be able to help in a timely manner 14%

Connection has access to other resources they would prefer to use instead

Connection has access to other resources they would prefer to use instead

Connection has access to other resources they would prefer to use instead

Connection has access to other resources they would prefer to use instead

Connection has access to other resources they would prefer to use instead

I'm just not interested in doing this

I'm just not interested in doing this

I'm just not interested in doing this

I'm just not interested in doing this

I'm just not interested in doing this

Worried about connection’s privacy/confidentiality

Worried about connection’s privacy/confidentiality

Worried about connection’s privacy/confidentiality

Worried about connection’s privacy/confidentiality

Worried about connection’s privacy/confidentiality

Don’t know if they would be talking to a real person

Don’t know enough about it

Don’t know how credible it is

Don’t know how credible it is

Don’t know how credible it is

Worried they’d call law enforcement/ connection would get in trouble

Worried they’d call law enforcement/ connection would get in trouble

Worried they’d call law enforcement/ connection would get in trouble

Worried they’d call law enforcement/ connection would get in trouble

Worried they’d call law enforcement/ connection would get in trouble

Some other reason

Some other reason

Some other reason

Some other reason

Some other reason

AANHPI

Black/AA

Hispanic

LGBTQIA+

PwD

Rural Men

Suicidal Ideation

White

White NOT designated pop
TRUSTED MESSENGERS NOT OPEN TO RECOMMENDING 988 NEED MORE INFORMATION TO MAKE THEM FEEL MORE CONFIDENT, SUCH AS ASSURANCES AROUND CONFIDENTIALITY AND KNOWING MORE ABOUT HOW INFORMATION IS USED AND HOW COUNSELORS ARE TRAINED.

What would make trusted messengers who are not open to recommending 988 feel more confident in suggesting it to their loved one/close connection?

- Knowing that it’s private/confidential
- Knowing what happens after the conversation ends/how information gathered is used
- Understanding when/why other emergency services are called (i.e., law enforcement, medical services)
- Knowing more about who helps with 988/their credentials/training

Spouses and friends of individuals who have experienced suicidal ideation, more than those of other groups disproportionately impacted by suicide, want to know more about what happens after the conversation ends, knowing why/when other emergency services are called, and that it’s free.

ADDITIONAL INFORMATION TO BE MORE CONFIDENT IN 988 AMONG THOSE NOT OPEN TO RECOMMEND 988
**ADDITIONAL INFORMATION TO BE MORE CONFIDENT IN 988 AMONG THOSE NOT OPEN TO RECOMMENDING 988**

<table>
<thead>
<tr>
<th></th>
<th>Spouse/Partner</th>
<th>Mother/Caregiver</th>
<th>Sibling</th>
<th>Friend</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Total</td>
<td>More than</td>
<td>Less than</td>
<td>Total</td>
</tr>
<tr>
<td>Knowing what happens after the conversation ends/how the information gathered is used</td>
<td>38%</td>
<td>46%</td>
<td>38%</td>
<td>37%</td>
</tr>
<tr>
<td>Understanding when/why other emergency services are called</td>
<td>31%</td>
<td>25%</td>
<td>30%</td>
<td>32%</td>
</tr>
<tr>
<td>Knowing that it’s free</td>
<td>26%</td>
<td>33%</td>
<td>23%</td>
<td>28%</td>
</tr>
<tr>
<td>Knowing more about who helps with 988/their credentials/training</td>
<td>30%</td>
<td>30%</td>
<td>40%</td>
<td>32%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AANHPI</th>
<th>Black/AA</th>
<th>Hispanic</th>
<th>LGBTQIA+</th>
<th>PwD</th>
<th>Rural Men</th>
<th>Suicidal ideation</th>
<th>White</th>
<th>White NOT designated pop</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
TRUSTED MESSENGERS ARE MUCH MORE LIKELY TO SAY THEY’D CONTACT 988 AFTER LEARNING MORE ABOUT IT.

When asked earlier in the survey what actions they’d be likely to take to help their loved one/close connection in a future mental health struggle, around half of trusted messengers said they’d contact a suicide hotline or help number for guidance. Later in the survey, after learning more about the 988 Suicide & Crisis Lifeline specifically, the majority of messengers (approx. four in five) across groups said they’d contact 988 to help their loved one/close connection if they were struggling with their mental health or in crisis.

Trusted messengers of Asian American, Native Hawaiian, and Pacific Islander individuals across all groups, as well as siblings whose loved one/close connection has a disability, are more likely to say they probably would contact 988 in future situations.

INTENTIONS TO CONTACT 988 IN FUTURE SITUATIONS

<table>
<thead>
<tr>
<th>Spouse/Partner</th>
<th>Mother/Caregiver</th>
<th>Sibling</th>
<th>Friend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Might or might not contact</td>
<td>Total</td>
<td>More than</td>
<td>Less than</td>
</tr>
<tr>
<td>Definitely would not contact</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Probably would not contact</td>
<td>92%</td>
<td>92%</td>
<td>92%</td>
</tr>
<tr>
<td>Probably would contact</td>
<td>7%</td>
<td>7%</td>
<td>7%</td>
</tr>
<tr>
<td>Definitely would contact</td>
<td>1%</td>
<td>1%</td>
<td>1%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Total Trusted Messengers n=8833</th>
<th>Total Spouse/Partner of Designated Populations n=2328</th>
<th>Total Mother/Caregiver of Designated Populations n=1988</th>
<th>Total Sibling of Designated Populations n=2106</th>
<th>Total Friend of Designated Populations n=2391</th>
</tr>
</thead>
<tbody>
<tr>
<td>Definitely would not contact</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Probably would not contact</td>
<td>90%</td>
<td>90%</td>
<td>90%</td>
<td>90%</td>
</tr>
<tr>
<td>Might or might not contact</td>
<td>10%</td>
<td>10%</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>Probably would contact</td>
<td>10%</td>
<td>10%</td>
<td>10%</td>
<td>10%</td>
</tr>
<tr>
<td>Definitely would contact</td>
<td>10%</td>
<td>10%</td>
<td>10%</td>
<td>10%</td>
</tr>
</tbody>
</table>

AANHPI | Black/AA | Hispanic | LGBTQIA+ | PwD | Rural Men | Suicidal Ideation | White | White NOT designated pop

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Bottom 2 box (net) | Top 2 box (net)
---|---

<table>
<thead>
<tr>
<th>Spouse/Partner</th>
<th>Mother/Caregiver</th>
<th>Sibling</th>
<th>Friend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Might or might not contact</td>
<td>Total</td>
<td>More than</td>
<td>Less than</td>
</tr>
<tr>
<td>Definitely would not contact</td>
<td>16%</td>
<td>15%</td>
<td>17%</td>
</tr>
<tr>
<td>Probably would not contact</td>
<td>29%</td>
<td>26%</td>
<td>28%</td>
</tr>
<tr>
<td>Probably would contact</td>
<td>41%</td>
<td>32%</td>
<td>36%</td>
</tr>
<tr>
<td>Definitely would contact</td>
<td>56%</td>
<td>50%</td>
<td>47%</td>
</tr>
</tbody>
</table>
INTENTIONS TO CONTACT 988 IN FUTURE SITUATION
PRE (NOT 988 SPECIFIC) VS. POST (988 SPECIFIC)

Pre = Asking likelihood to contact a (unbranded) suicide hotline/help number in a situation
Post = After a description of 988, asking likelihood to contact 988 Suicide & Crisis Lifeline in a situation

Not likely
B2B: 28% Pre, 16% Post
Not likely
MB: 25% Pre, 27% Post
Neutral
T2B: 47% Pre, 60% Post
Neutral
MB: 27% Pre, 27% Post
Likely
T2B: 60% Pre, 53% Post
Likely
MB: 31% Pre, 21% Post

Total trusted messengers
Total spouse/partner to designated population
Total mother/caregiver to designated population
Total sibling to designated population
Total friend to designated population
SECTION 4: 988 MESSAGING PERFORMANCE

Testing message frames that would most compel trusted messengers to seek out information on and/or recommend 988 to their loved one/close connection.
Throughout this study, the research team drafted, tested, revised, and optimized message frames through multiple rounds based on participant responses during qualitative and quantitative phases of research. The testing of message frames was specifically intended to determine the key narratives and phrasing that most resonate with and motivate trusted messengers of people disproportionately impacted by suicide to seek out information and/or consider using or recommending 988 to their loved one/close connection when they’re struggling with mental health or in crisis.

In both phases, the research team tested a foundational message frame (i.e., messaging and narrative concepts used to test definition of the various language and phrasing) with participants, followed by two conditional frames. The foundational frame provided background, explanatory descriptions, and key attributes of 988 to aid in the basic understanding of the lifeline and its benefits. The conditional frames were added to the end of the foundational frame to further explain and expand upon it, as well as to address key barriers the research team heard in the qualitative phase (i.e., to overcome objections, perceptions, and/or attitudes toward 988).

These frames were used to determine which messages, phrases, statements, and/or words participants found most relevant and motivating to seek information on, recommend, and/or use 988 - as a resource for themselves or recommending its use to loved ones/close connections. In-depth feedback on the initial message frames during the qualitative phase informed strategic revisions and the quantitative phase then tested optimized frames.

QUALITATIVE MESSAGE FRAMES & KEY FINDINGS

The qualitative phase tested a foundational frame and two conditional frames to gauge participant reactions and impressions. The foundational frame was shown to first inform participants how 988 can be used to help a loved one/close connection, while the conditional frames further expanded on why/how a trusted messenger should consider 988 in a mental health struggle or crisis.
Life for my sister had become so ... overwhelming. She was stressed all the time, incredibly anxious. I'd ask how she was doing, what I could do to support her, how I could help, but she'd always just shrug me off, saying she was fine - or in moments of truth, like she didn't think she could talk to me, or that I wouldn't understand what she was going through.

She kept pulling away from me, and I was so terrified for her. How was she going to get through this if she wouldn't let anyone help her?

988 became her lifeline. I told my sister about the hotline, and how it was her way to speak with someone who could actually relate, and who could provide help and resources to help her feel better. Someone who understood my sister's problems and where she was coming from, and, importantly, someone she could really trust and confide in.

I held my sister's hand as she dialed 988, and within just the first few minutes of the call, I felt her finally start to relax. Afterward, she was almost a different person - in a good way. She said it finally felt like someone cared to just listen, and to provide help if she wanted it - which was exactly what she needed at a time when life felt like too much to handle on her own.

If your loved one is feeling overwhelmed by life or emotions, they don't know where to turn, or they're questioning if their life is worth it, call/text/chat with a counselor at 988. They'll get one-on-one support from a skilled, compassionate counselor, 24/7. All conversations are confidential, and your loved one will feel heard and cared about, and they'll get connected with the support they need.

Tell your loved one to call/text/chat with a 988 counselor. They are ready to listen.

**OVERALL IMPRESSION:**

The foundational frame was widely accepted by trusted messengers across groups. Most participants liked that this message is built around a detailed story, and characterized it as "warm" and "compassionate." Most participants described it as being highly relatable, based on their specific relationships to their loved ones/close connections.

**LIKES:**

- Emotionally "moving"
- Critical phrases: "skilled, compassionate counselors," "24/7," "call/text/chat"
- Made participants feel heard

**DISLIKES:**

- Seemed too good to be true for some
- Felt too cheesy
- Story length (too long for some)
CONDITIONAL FRAME 1: YOU’RE NOT ALONE

When a loved one is struggling with mental health or is in crisis, you may feel like you're the only person who can help them - even if you don't really know what to say or do.

That can feel kind of scary/awkward, but you don't have to do it alone. 988 connects people with skilled, compassionate counselors who provide a listening ear and real, confidential mental health support when it's needed most.

You aren't alone, and your loved one isn't, either. Reach out yourself or connect your loved one with 988 for mental health support - anytime, day or night.

LIKES:

- Critical phrases: “You may feel like you're the only person who can help them,” “skilled, compassionate counselors,” “listening ear,” “confidential”
- The phrase “reach out yourself or connect your loved one,” elevated this message frame in the eyes of many participants by introducing the aspect that they (trusted messengers) can call 988 for help - and that it isn't only for the person in crisis

OVERALL IMPRESSION:

Most respondents preferred this conditional frame over frame 2. They felt it was relatable and strongly connected with the dilemma of not knowing what to do in a mental health situation or crisis.

DISLIKES:

- “That can feel kind of scary/awkward” was a polarizing phrase; some participants found it accurate, while others saw it as too superficial for the situation at hand
- Many participants did not feel there was a suitably instructional final call-to-action in this message for them or their loved one/close connection (e.g., call/text/chat)
CONDITIONAL FRAME 2: IDENTIFYING CRISIS

For your loved ones, if something was off, you'd know it. But it can be more difficult to know when it's serious enough to seek help with or for them.

988 is a free resource for anyone needing to talk about their mental health or whatever they're going through - if they're simply having a hard time, or if they're in crisis.

If you know your loved one needs support, recommend 988 to them today.

LIKES:

- Informing that it is a “free resource” is critical (especially as many qualitative participants discussed issues with insurance coverage and navigating the healthcare system)
- The phrase, “whatever they’re going through” denotes support for situations beyond just extreme crisis, which was well received by participants

OVERALL IMPRESSION:

Respondents liked this frame less than conditional frame 1, mostly due to its tone being more informative than emotional.

DISLIKES:

- The least personal-feeling message; demonstrated far less warmth or compassion than the other messages
- Felt too concise; important information was missing
- Mixed reactions to the phrases, “it can be difficult to know when it’s serious enough to seek help with or for them,” as well as, “you’d know it,” which were seen as condescending and/or presumptuous by many participants
QUANTITATIVE MESSAGE FRAMES & KEY FINDINGS

Based on participant feedback from the qualitative phase, the quantitative phase presented optimized foundational and conditional frames.

In the quantitative survey, participants were first shown the foundational frame and asked to highlight the words and/or phrases they liked and disliked. Then, participants were asked to rank how much they determined it to be informative and motivating to recommend, as well as what action(s) they'd be likely to take after reading it. They were then shown the two conditional frames and asked to rank how much or how little they helped improve the foundational frame when included.

FOUNDATIONAL FRAME

Life for my sister had become so ... overwhelming. She was stressed all the time, incredibly anxious. I'd ask how she was doing, what I could do to support her, how I could help, but she'd always just shrug me off, saying she was fine, that I wouldn't understand what she was going through.

She kept pulling away from me. How was she going to get through this if she wouldn't let anyone help her?

I told my sister about 988: How she could speak with someone who could actually relate, and who could provide help and resources to help her feel better. For her, 988 was a much-needed first step to feel heard and help share her burden.

If your loved one is feeling overwhelmed by life or emotions, they don't know where to turn, or they're questioning if their life is worth it, call/text/chat with a counselor at 988. They'll get one-on-one support from a skilled, compassionate counselor, 24/7. All conversations are confidential, and your loved one will feel heard and cared about, and they'll get connected with the support they need.

Tell your loved one to call/text/chat with a 988 counselor. They are ready to listen.
Mothers/caregivers particularly liked language about the options to contact 988 (call/text/chat), while spouses/partners most disliked language about the person in the story being overwhelmed or anxious.

Overall, half or more of mothers/caregivers (54%), siblings (50%), and friends (53%) disliked nothing about the foundational frame, while fewer spouses/partners (42%) said the same. However, most messengers across all groups found most or all of the first two paragraphs to be polarizing or to dislike it. Mothers/caregivers most liked language about being able to contact 988 in multiple ways, while spouses/partners most disliked language about the person in the story being anxious or overwhelmed.
Life for my sister had become so … overwhelming. She was stressed all the time, incredibly anxious. I’d ask how she was doing, what I could do to support her, how I could help, but she’d always just shrug me off, saying she was fine, that I wouldn’t understand what she was going through.

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Tell your loved one to call/text/chat with a 988 counselor. They are ready to listen.

Respondents were asked to evaluate the frame based on what like/motivates them to learn more and what they dislike about the frame.

**LIKES:** Above average across all segments for this group

**POLARIZING:** Above average for LIKES & DISLIKES across all segments for this group

**DISLIKES:** Above average across all segments for this group

5% like nothing
50% dislike nothing
Life for my sister had become so ... overwhelming. She was stressed all the time, incredibly anxious. I'd ask how she was doing, what I could do to support her, how I could help, but she'd always just shrug me off, saying she was fine, that I wouldn't understand what she was going through.

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LIKES: Above average across all segments for this group

POLARIZING: Above average for LIKES & DISLIKES across all segments for this group

DISLIKES: Above average across all segments for this group

6% like nothing
42% dislike nothing
Life for my sister had become so ... overwhelming. She was stressed all the time, incredibly anxious. I’d ask how she was doing, what I could do to support her, how I could help, but she’d always just shrug me off, saying she was fine, that I wouldn't understand what she was going through.

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**LIKES:** Above average across all segments for this group

**POLARIZING:** Above average for LIKES & DISLIKES across all segments for this group

**DISLIKES:** Above average across all segments for this group

- 4% like nothing
- 54% dislike nothing
Life for my sister had become so ... overwhelming. She was stressed all the time, incredibly anxious. I'd ask how she was doing, what I could do to support her, how I could help, but she'd always just shrug me off, saying she was fine, that I wouldn't understand what she was going through.

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**LIKES:** Above average across all segments for this group

**POLARIZING:** Above average for LIKES & DISLIKES across all segments for this group

**DISLIKES:** Above average across all segments for this group

| 5% like nothing |
| 50% dislike nothing |
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If your loved one is feeling overwhelmed by life or emotions, they don’t know where to turn, or they’re questioning if their life is worth it, call/text/chat with a counselor at 988. They’ll get one-on-one support from a skilled, compassionate counselor, 24/7. All conversations are confidential, and your loved one will feel heard and cared about, and they’ll get connected with the support they need.

Tell your loved one to call/text/chat with a 988 counselor. They are ready to listen.

Respondents were asked to evaluate the frame based on what like/motivates them to learn more and what they dislike about the frame.

LIKES: Above average across all segments for this group

POLARIZING: Above average for LIKES & DISLIKES across all segments for this group

DISLIKES: Above average across all segments for this group

4% like nothing
53% dislike nothing
Most found the foundational frame extremely/very helpful in explaining 988, though less so for loved ones/close connections of older rural men 49+.

More than three-quarters of respondents in each trusted messenger group found the foundational frame extremely/very helpful to their understanding of 988. Spouses/partners, siblings, and friends of an older rural man 49+ were less likely than others to choose “extremely helpful;” friends of a Black/African American loved one/close connection were less likely to say “somewhat helpful.”

Foundational Frame – Informative

<table>
<thead>
<tr>
<th>Total Trusted Messengers</th>
<th>Total Spouse/Partner of Designated Populations</th>
<th>Total Mother/Caregiver of Designated Populations</th>
<th>Total Sibling of Designated Populations</th>
<th>Total Friend of Designated Populations</th>
</tr>
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<tbody>
<tr>
<td>n=8833</td>
<td>n=2328</td>
<td>n=1988</td>
<td>n=2126</td>
<td>n=2391</td>
</tr>
</tbody>
</table>

Not helpful at all   Not very helpful   Bottom 2 box (net)   Somewhat helpful   Very helpful   Extremely helpful   Top 2 box (net)

AANHPI   Black/AA   Hispanic   LGBTQIA+   PwD   Rural Men   Suicidal Ideation   White   White NOT designated pop

<table>
<thead>
<tr>
<th>Spouse/Partner</th>
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<th>Sibling</th>
<th>Friend</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
<td>Total More than</td>
<td>Total Less than</td>
<td>Total More than</td>
</tr>
<tr>
<td>Somewhat helpful</td>
<td>15%</td>
<td>18%</td>
<td>19%</td>
</tr>
<tr>
<td>Extremely helpful</td>
<td>49%</td>
<td>48%</td>
<td>44%</td>
</tr>
</tbody>
</table>

100% 90% 80% 70% 60% 50% 40% 30% 20% 10% 0%
Most also said the foundational frame would motivate them to recommend 988 to a loved one/close connection if they were in a mental health situation or crisis, particularly mothers/caregivers.

More than three-quarters of trusted messengers—and more than four in five mothers/caregivers (82%)—found the foundational frame very/extremely motivating to recommend 988 to a loved one/close connection during a mental health struggle or crisis. More spouses/partners and friends of an Asian American, Native Hawaiian, and Pacific Islander individual said they’d be very likely to recommend 988 after reading the foundational frame.
MOST TRUSTED MESSENGERS FOUND THE FOUNDATIONAL FRAME MOTIVATING TO TAKE ACTION IN SOME WAY.

The majority of trusted messengers said the foundational frame would motivate them to take action, such as tell their loved one/close connection about 988 if/when worried about their mental health, share information about 988, visit the website and contact 988 on their loved one’s/close connection’s behalf.

FOUNDATIONAL FRAME – CALL TO ACTION (% DEFINITELY/PROBABLY WOULD)

CONDITIONAL FRAMES

CONDITIONAL FRAME 1: YOU’RE NOT ALONE

When a loved one is struggling with mental health or is in crisis, you may feel like you’re the only person who can help them - even if you don’t really know what to say or do.

That can feel scary, but you don’t have to do it alone.

988 connects people with skilled, compassionate counselors who provide a listening ear and real, confidential mental health support when it’s needed most.

You aren’t alone, and your loved one isn’t, either. Call/text/chat with a 988 counselor - anytime, day or night.

CONDITIONAL FRAME 2: IDENTIFYING CRISIS

If your loved one seems down or like they’re struggling - or worse - how do you know when it’s serious enough to seek help with or for them? When is it time to seek action?

988 is a free resource for anyone needing to talk about their mental health or whatever they’re going through - if they’re simply having a hard time, or if they’re in crisis.

A 988 counselor is ready to talk - anytime, day or night. Call/text/chat today.
TRUSTED MESSENGERS SAID THE YOU’RE NOT ALONE FRAME IMPROVED THE FOUNDATIONAL FRAME MORE THAN IDENTIFYING CRISIS.

You’re Not Alone edged out Identifying Crisis for all trusted messengers. More spouses/partners of an Asian American, Native Hawaiian, and Pacific Islander loved one/close connection than the aggregate said the You’re Not Alone conditional frame made the foundational frame “somewhat better.” Fewer siblings of a loved one/close connection who’s experienced suicidal ideation than the aggregate said Identifying Crisis had no impact on the foundational frame.

CONDITIONAL FRAME – IMPROVEMENT
(YOU’RE NOT ALONE)

<table>
<thead>
<tr>
<th>Total Trusted Messengers</th>
<th>Total Spouse/Partner of Designated Populations</th>
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(Identifying Crisis)
### Conditional Frame — Improvement

<table>
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<td>Total</td>
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<tr>
<td>More than</td>
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<tr>
<td>Less than</td>
<td>Less than</td>
<td>Less than</td>
<td>Less than</td>
</tr>
<tr>
<td>Somewhat better</td>
<td>35%</td>
<td>34%</td>
<td>37%</td>
</tr>
<tr>
<td>Has no impact</td>
<td>13%</td>
<td>13%</td>
<td>16%</td>
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**Trusted Messengers Are Also Slightly More Likely to Recommend 988 to a Loved One/Close Connection After Reading You’re Not Alone, Compared to Identifying Crisis.**

Identifying Crisis again fell short against You’re Not Alone for likelihood to recommend across all messenger groups. Demographically, more spouses of an Asian American, Native Hawaiian, and Pacific Islander loved one/close connection than the aggregate said they’d be very likely to recommend 988 after reading You’re Not Alone. More trusted messengers to Asian American, Native Hawaiian, and Pacific Islander connections across all groups than the aggregate said they’d be somewhat or very likely to recommend Identifying Crisis.
CONDITIONAL FRAME – LIKELIHOOD TO RECOMMEND
(YOU’RE NOT ALONE)

Total Trusted Messengers
n=8833

Total Spouse/Partner of
Designated Populations
n=2328

Total Mother/Caregiver of
Designated Populations
n=1988

Total Sibling of
Designated Populations
n=2126

Total Friend of
Designated Populations
n=2391

100%
90%
80%
70%
60%
50%
40%
30%
20%
10%
0%

Bottom 2 box (net)
2%
1%
2%
2%
2%
1%

Somewhat worse
2%
2%
2%
2%
3%

Somewhat better
Has no impact
11%
11%
11%
12%
10%

Top 2 box (net)
50%
49%
47%
49%
47%

87%
87%
87%
86%
87%

YOU’RE NOT ALONE
IDENTIFYING CRISIS

Spouse/Partner
Mother/Caregiver
Sibling
Friend

Very likely
30%
27%
28%
30%

Somewhat likely
21%
18%
21%
28%

Very likely
30%
28%
29%
32%

Extremely likely
44%
50%
44%
42%

AANHPI
Black/AA
Hispanic
LGBTQIA+
PwD
Rural Men
Suicid Ideation
White
White NOT designated pop

More than
Less than
More than
Less than
More than
Less than
More than
Less than
More than
Less than
More than
Less than
WHEN FORCED TO CHOOSE BETWEEN THE TWO FRAMES, TRUSTED MESSENGERS GRAVITATED MUCH MORE TO THE YOU’RE NOT ALONE FRAME THAN IDENTIFYING CRISIS.

You’re Not Alone clearly won out against Identifying Crisis when the two frames were compared head-to-head. More friends of an older rural man 49+ chose Identifying Crisis than the aggregate (48%, compared to 37% total).

“It clarifies that the hotline is for both the person contemplating suicide and the person(s) trying to prevent the suicide.”

– MOTHER/CAREGIVER OF AN AANHPI CONNECTION ON WHY THEY PREFER THE YOU’RE NOT ALONE FRAME

“I feel this message is better; it relates to so many people out there. Yes, we feel we’re the only one to help, but it is also very scary and we do need help with situations like this. This brings me peace of mind knowing I’m not alone.”

– SPOUSE/PARTNER OF A HISPANIC CONNECTION ON WHY THEY PREFER THE YOU’RE NOT ALONE FRAME

“I really like both, but this statement ‘how do you know when it’s serious enough..’ that statement gives you ‘permission’ to call. I think most people need that. We need that encouragement to meddle in someone else’s business.”

– SIBLING TO AN LGBTQIA+ AND RURAL OLDER MAN 49+ CONNECTION ON WHY THEY PREFER THE IDENTIFYING CRISIS FRAME
**CONDITIONAL FRAME – LIKELIHOOD TO RECOMMEND**

### Spouse/Partner
- **Total Trusted Messengers**: n=8833
- **Total Spouse/Partner of Designated Populations**: n=2328
- **Total Mother/Caregiver of Designated Populations**: n=1988
- **Total Sibling of Designated Populations**: n=2126
- **Total Friend of Designated Populations**: n=2391

### Identifying Crisis

<table>
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<tbody>
<tr>
<td><strong>Total</strong></td>
<td><strong>More than</strong></td>
<td><strong>Less than</strong></td>
<td><strong>Total</strong></td>
</tr>
<tr>
<td>Identifying Crisis</td>
<td>38%</td>
<td>38%</td>
<td>39%</td>
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</table>
RECOMMENDATIONS

From the qualitative and quantitative research conducted, the research team identified the following recommendations for organizations working to communicate with trusted messengers about how, why, and when they should contact 988 as a resource or on behalf of a loved one/close connection, and to motivate them to recommend it to others when needed.

1. MORE AWARENESS OF THE 988 CRISIS & SUICIDE LIFELINE IS NEEDED.
Around half of trusted messengers of loved ones/closed connections who are disproportionately impacted by suicide say they are aware of 988, and few recall it top of mind. Because of this, efforts should focus on continuing to grow awareness of 988 among these populations.

2. MESSAGING TO TRUSTED MESSENGERS SHOULD SPECIFY WHAT 988 IS AND HOW IT WORKS.
In awareness efforts to trusted messengers, messaging should focus on:

• What 988 will provide (resources for both the loved one/close connection and the messenger)
• How the process works when calling 988 (who is involved, where information goes, what happens after the call ends)
• Reassurances that information is confidential, available 24/7, and involves medical and legal services if their loved one is in imminent danger

While the message should be used to inform the public about 988, it should also be positioned in a supportive tone—letting trusted messengers know they are not alone.
RECOMMENDATIONS

3. 988 HAS AN OPPORTUNITY TO PROVIDE DEEPER RESOURCES FOR LOVED ONES/CLOSE CONNECTIONS AND MESSENGERS.

Trusted messengers want and need a variety of resources to help their loved ones/close connections when they’re struggling with mental health or are in crisis. 988 has an opportunity to provide these resources to them, including:

- Who to contact and when/how
- Conversation starters around mental health and seeking help
- Ways to identify those who are struggling
- General information on mental health conditions (including signs and symptoms, how to identify them in loved ones, and how to help someone in the moment, such as with anxiety and panic attacks)

Most trusted messengers are open to using 988 as a resource for themselves and recommending it to their loved ones/close connections who are disproportionately impacted by suicide. Resources should cater to both the loved one/close connection and the trusted messenger.

4. CONSIDER MOTIVATORS, BARRIERS, PREFERENCES, AND DIFFERENCES AMONG MESSENGER GROUPS AND SUBPOPULATIONS.

While many trusted messengers felt similarly about 988-related topics, some nuances arose across messenger groups as well as subpopulations (designated populations). For example:

- Mothers/caregivers of an Asian American, Native Hawaiian, and Pacific Islander loved one/close connection would find 988 more valuable if it was endorsed by someone they trust, if it was featured on the news they rely on, and/or if they’re aware of who/what organizations fund it.
- Spouses/partners of older rural men 49+, however, would be less likely to find value in 988 if it was endorsed by someone they trust, if they heard a personal success story of someone who used it, or if it was featured on social media.
- In addition, friends overall are more worried than other trusted messengers that recommending 988 would breach trust or damage their relationship with the loved one/close connection.

When creating campaigns, choosing mediums, and crafting messaging to trusted messengers about 988, marketers should take these nuances into consideration.

FOR MORE CAMPAIGN AND MESSAGING RECOMMENDATIONS BY MESSENGER AND SUBPOPULATION GROUP, SEE THE ACCOMPANYING TOOLKIT.