Call On Us:
Taking Calls as a NAMI Affiliate

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Outline of This Module

- What does a NAMI Helpline Do?
- The Three Pillars of Helpline Responding (And a Toolkit for them)
- Timeline of a Helpline Call
- Scope of Practice
What does a NAMI Helpline do?

- Peer support service providing **Emotional Support**, **Psychoeducation**, and **Referrals** to people living with mental health conditions, family members/caregivers, mental health professionals and the public.

- We often offer people a next step when they are stuck.
What is Peer Support
Helpline Responder Goals & Ethics

Goals
- Respond to each and every call with warmth, empathy, & kindness.
- Create a safe, respectful space in which we listen, support & educate.
- Prioritize caller needs whenever possible for client-centered service.
- Remain open-minded, inclusive, & non-judgemental.
- Take care of ourselves - we can’t pour from an empty cup!

Ethics
- We are a peer-led helpline and do not provide professional or clinical care.
- We do not instruct callers, rather we offer options & empower callers to do what works best.
- We never share personal contact information with a caller for ethical & safety reasons.
- We do not maintain any forms of ongoing support relationships with callers.
Types of Helpline Calls

1. People who just want to be heard and need some peer support.
2. Requests for mental health services.
3. Inquiries about housing, employment, or legal aid.
4. Questions about NAMI services.
5. Everything else.
Thank you for calling the NAMI-_____ Helpline. This is ____, how can I help you?
The Three Pillars of Helpline Responding

**Emotional Support**
We listen and validate to tend to our callers emotional experience.

**Psycho-Education**
We offer information, tips, and strategies for learning about and coping with Mental Illness.

**Referrals & Resources**
We provide appropriate referrals and resources for callers next steps on their journeys.
Tools for Helpline Responding

Emotional Support
- Active Listening
- Empathetic Response
- Validation
- Normalization

Psychoeducation
- Sharing Information
- Coping Skills Enhancement
- Connection to Social Supports

Referrals & Resources
- Referring to Relevant Outside Organization
- Referring to Relevant NAMI Program
- Sharing Relevant Book, Website, or Other Information
**Hearing**

The act of perceiving sound in your ear. *Hearing just happens, it’s passive.*

**Listening**

The act of hearing a sound and understanding what you hear by concentration and brain processing. *Listening needs to be done, it’s active.*

**Skills**

Neutral and nonjudgmental

Patient (periods of silence are not "filled")

Verbal and nonverbal feedback to show signs of listening (e.g., smiling, eye contact, leaning in, mirroring)

Asking questions
1. Reflecting
2. Paraphrasing
3. Clarifications

Emotional Support

Empathetic Response
Effective validation has two main components:

1. It identifies a specific emotion
2. It offers justification for feeling that emotion

“Wow, that would be confusing.”
“He really said that? I’d be angry too!”
“Ah, that is so sad.”
“You have every right to be proud; that was a major accomplishment!”
“I’m so happy for you! You’ve worked incredibly hard on this. It must feel amazing.”
Once we have identified how someone might be feeling, the next step is to communicate to the other person that we picked up on that feeling, and that the feeling is normal.

How can we do that? What could we say (or ask) our called to demonstrate that we understand and validate that feeling for them?

“It’s ok to feel…”

“That sounds like a normal reaction to a difficult situation.”

“We get a lot of callers who are struggling with that lately”
Referrals & Resources
Emotional Support
Psychoeducation
Sharing information about mental illness or treatment that is relevant to what the caller is calling about.

Often this means sharing that what they’re describing could be symptoms of a mental illness, sharing that there are treatment options available, or sharing information about mental illness.

“Usually when people start hearing voices they don’t just go away on their own”

“For many people addiction is something that is a lifelong battle”

“Mindfulness is something that can be really helpful for anxiety”
Helping people develop the coping skills they already have or beginning them on the process to learn new ones.

“What has worked for you in the past?”

“Could we walk through a breathing exercise right now”

“What does your therapist say?”

“Has something like this ever happened in the past”
Encouraging people to reconnect with the supports they already have in their life.

“Have you talked to anyone else about this?”

“Who do you usually go to for support”
Collaboratively determining what organizations might be able to help them as a next step or two in coping and/or resolving their issues

- Using your knowledge and judgement and your Helpline resources that are available in your area.
- If your affiliate rotates helpline calls this resource packet should be available for each person taking the calls
Collaboratively determining what NAMI programs they’d be most interested in. Then providing information and guidance on how to attend.
Sharing a relevant book, website, blog post, document in the resource drive or anything else you or others have found helpful.

- NAMI Blog
- NAMINYC Website “Diagnoses” page
- A book from a therapist or about therapy
- PositivePsychology.com
- PsychologyToday.com
Tools for Helpline Responding

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**Psychoeducation**
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**Referrals & Resources**
- Referring to Relevant Outside Organization
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- Sharing Relevant Book, Website, or Other Information
- **Helpline Calls are not always linear**
- **Usually they will follow this timeline though**
Hi this is “Sam” at the NAMI Helpline, how can I help you today?

- Warm
- Welcoming
- Clear
- “How can I help you today” > “Can I help you”
A presenting concern is an initial need that causes a person to seek professional help from a doctor, therapist, or another mental health provider.

Sometimes the presenting concern of a caller will be obvious, sometimes it may take a while to figure it out. Sometimes a caller doesn’t know.

We always help someone with their presenting concern. We sometimes help people with underlying issues too.
The 3 Pillars

Timeline of A Helpline Call

Emotional Support
We listen and validate to tend to our callers emotional experience.

Psycho-Education
We offer information, tips, and strategies for learning about and coping with Mental Illness.

Referrals & Resources
We provide appropriate referrals and resources for callers next steps on their journeys.
Determining the actions that it will take for our caller to follow through on any resources we’ve given them.

Restating before the end of the call what these actions are and any follow up that you as a Helpline Responder will take (ex: sending an email, asking a supervisor for a resource, etc)

“I’m not sure about this at the moment but I want to help you get the help you need. Would I be able to give you a call back after I’ve done some more research on the matter?”

“We have a wide range of resources & I would love to take some time find something that best suits your needs, can I call you back once I’ve found that?”
Tips for Ending A Call

Ending a call (within 45 mins) is an essential piece of the Helpline puzzle. Here are some handy tips to end calls successfully:

- Provide a warning for the end of the call.
- Transition towards a natural end by summarizing the key points of the call.
- Always end on what’s next, so either the referral given, or a future step/directions.

Circling Callers

If you feel that you’ve covered what the caller needs, but they are circling, here are some suggestions for politely ending a call:

“We’ve covered a lot in this conversation. Why don’t you take time to think things over and call us back at another time?”

“I’m sorry but I have another caller on the line, but I’m so glad we connected today and you can always call back.”
Any work that comes after a call

- Contacting supervisor
- Sending the caller an email
- Researching for an appropriate resource
- Entering in the data into your call log (NAMI NYC Metro uses Apricot, NAMI NYS uses a excel data base)
Scope of Practice
What is a Helpline Responder Scope of Practice?

- Scope of practice describes the procedures, actions, and processes that a healthcare practitioner is permitted to undertake in keeping with the terms of their professional license.
Self-Disclosure and Use of Self

- Self-disclosing is a personal choice.
- Everyone’s experience is unique. What worked for you may or may not work for the caller, and they need to use their own judgment.
- Any time you share information about yourself you should have a clear idea of what it is accomplishing in your conversation:
  - Is this something I’m sharing for me or for the caller?
  - Can I achieve the same outcome without sharing something about myself
  - How can I maintain a boundary if the caller asks more questions about this?
What we don’t do on the Helpline:

- Offer Advice
- Reach out to a resource or family on a caller’s behalf
- Share personal contact info
- Diagnose people
- Crisis Intervention or Call the police or another hotline
Obstacles to Good Helpline Response

- Negative Judgement
- Jumping to conclusions
- Assumptions
- Being closed-minded
- Short attention span
- Wishful hearing
- Semantics
- Talking > listening
- Lack of humility
- Fear
What to do if you don’t know what to do:

- It's ok to let a caller know you don’t have the answer for their questions. In this case you can ask them for their contact information and let them know you will look into their matter and get back to them.
- You may have to reach out to others in your affiliate or State office to get guidance and or resources.
- Remember, it's always ok to ask for help
Self-Care & Stress Management
Taking Your Emotional Pulse

Just like we tend to our caller’s emotion, we need to tend to our own emotions.

Learning to notice and identify our own emotions as we are on a call is a crucial skill in self care and in caring for others.

What are emotions you anticipate feeling on calls?