



Warmlines in Action

Strengthening Mental Health Through Connection

Mr. Howard D. Trachtman

Founder, Warmline.org

Co-founder, Metro Boston and Southeast Recovery Learning Communities

Councils/Boards

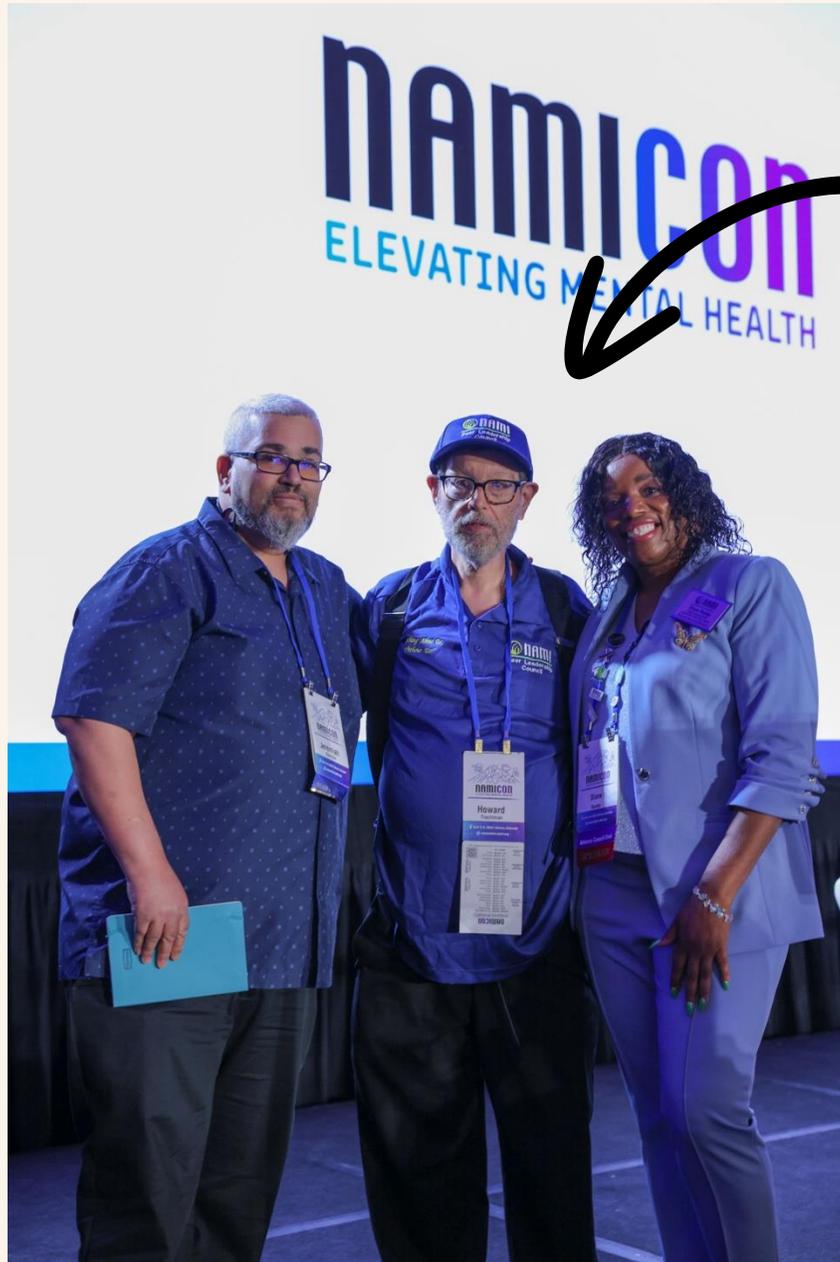
- MBHP Consumer Advisory Council
- State Mental Health Planning Council
- One Care Implementation Council
- Transcomm Board
- DMH Restraint and Seclusion Committees
- NAMI Mass, Board of Directors
- NAMI National Peer Leadership Council
- Edinburg Center Human Rights Committee
- M-POWER/Transformation Center
- National Association of Peer Supporters (N.A.P.S.)
- Former Chair PAIMI of Disability Law Center
- Former Pres DMH Metro Suburban Area Board
- Former Vice-Chair NAMI PLC Advocacy

Mental Health
Advocate



Certified Peer Specialist

Certified Psychiatric
Rehabilitation Practitioner



Receiving the NAMI Lifetime
achievement award for Peer
Advocacy and Support

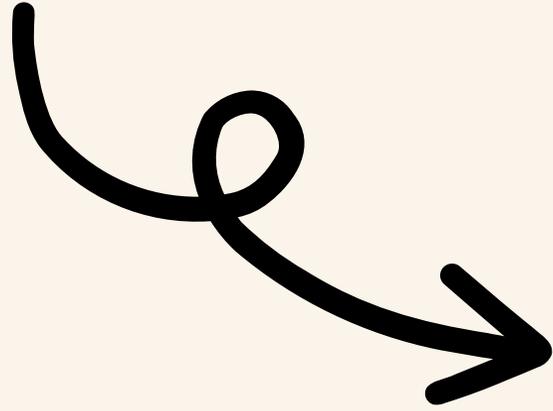
Meet The Presenter



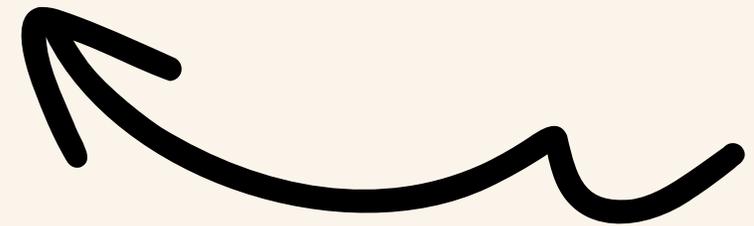
Started + Funded the Edinburg Center Warmline

Started the Metro Boston Recovery Learning Community (MBRLC) Warmline





What is a
Warmline?



Warmlines

Free Peer support line
Peer Specialist-run and led

- Designed to “offer hope, strength, and knowledge gained from their own personal experience of the recovery process” (Daglin, 2017).
- Bridges the gap between services, especially when lacking clinical services.
- Divert people from more expensive services, such as hospitals.
- Many are trauma-informed, maintain anonymity to a higher degree than the suicide hotline, and do not share information with police services.

Peer Specialists are individuals with lived/living expertise in recovery.

Recovery can be from a variety and/or combination of issues.

Saves money for both people and government systems by reducing hospitalizations

If you've called one Warmline,
you've called one Warmline.

No two Warmlines
are the same.



Types of Warmline Services

Telephonic

Warmlines are normally telephonic. Callers can talk to a Peer Specialist via the phone. Some Warmlines provide callbacks if the lines are busy.

Text/Chat

Some Warmlines utilize text/chat-based services to address accessibility issues and to reach other demographics.

Virtual/Zoom

Virtual settings became normalized as a result of the COVID-19 pandemic.

Support Offered

Emotional

Providing empathy, reassurance, and understanding to someone experiencing emotional distress or challenges, helping them feel cared for and validated.

Community

A group of people connected by shared values, interests, or geographic proximity, providing mutual support and a sense of belonging.

Resources

Tools, services, or materials that provide necessary assistance, information, or support to help individuals meet their needs or achieve their goals.

Safe Space

An environment where individuals feel secure, respected, and free from judgment or harm.

Isolation

The state of being separated from others, leading to feelings of loneliness and disconnection.

Judgement Free

An environment where individuals are accepted without criticism or evaluation of their actions, feelings, or thoughts.

Effectiveness & Accessibility

Measuring Impact

Warmline callers reported being “more optimistic about their future and believed personal goals are achievable” (Dalgin et al., 2017).

The Data

While the majority of Warmlines take between 350 and 6K calls annually, there are Warmlines that take over 45K calls annually (Dalgin et al., 2021).

Diverse Populations

Specialty lines exist to serve diverse populations. Warmlines may also use translation services when necessary (Dalgin et al., 2021).

The Data

When Warmline participants were asked if they thought using the Warmline reduced their need for crisis services, most respondents (79%) stated that it was “very likely” or “somewhat likely”

TABLE 1—PERCEIVED REDUCTION IN CRISIS SERVICES BASED ON WARM LINE USAGE

Does using the Warm Line reduce your need for Crisis Services?	2006 <i>n</i>=120	2007 <i>n</i>=120	2008 <i>n</i>=108	2009 <i>N</i>=120
Very Likely	48.4%	50.0%	52.5%	42.2%
Somewhat Likely	25.4%	33.3%	34.2%	28.9%
Very Unlikely	1.6%	1.7%	0.8%	2.3%
Don't Know	21.4%	14.2%	2.5%	15.6%

The Data 2

A number of respondents commented

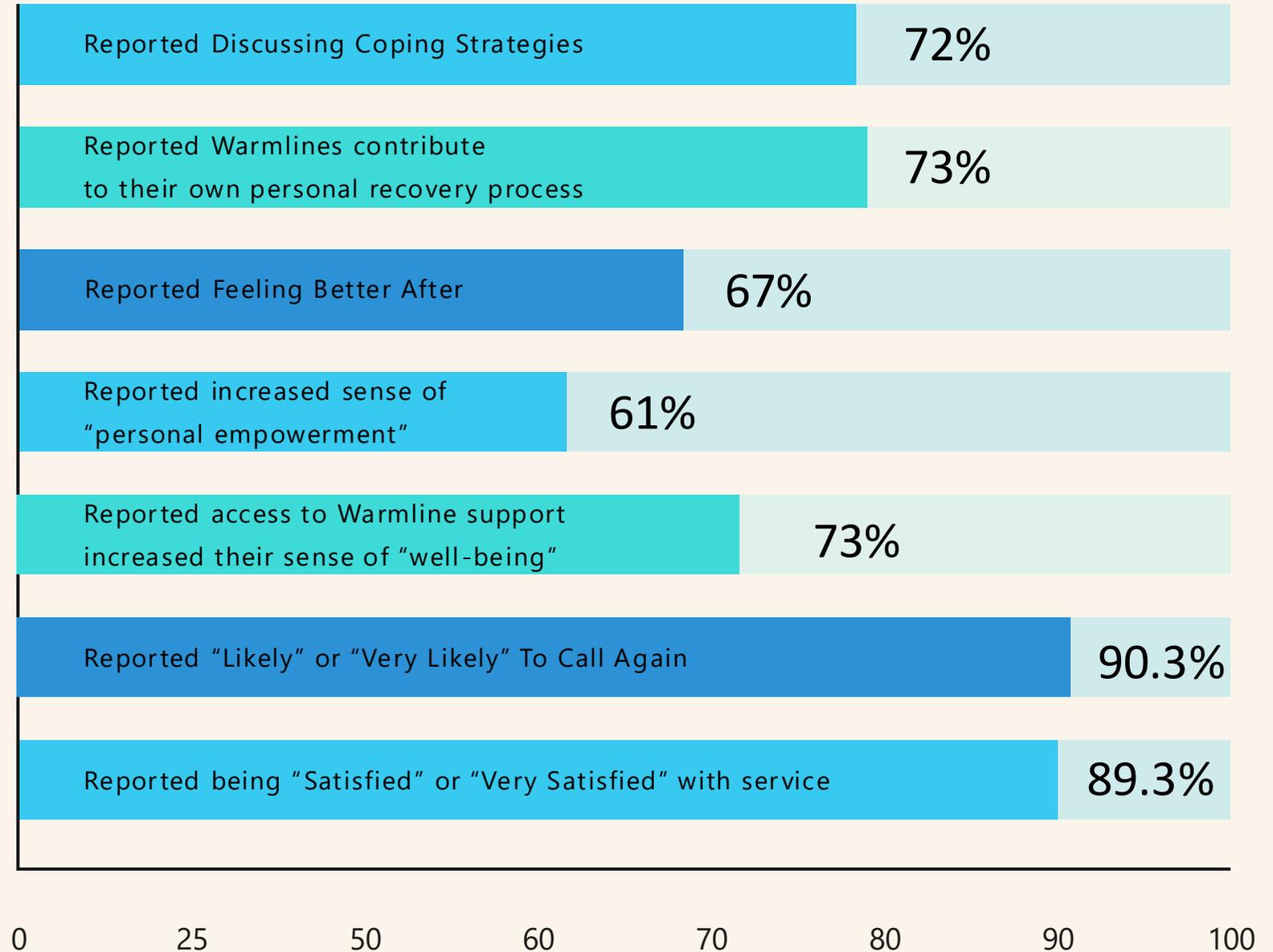
I used to use crisis almost every night
now hardly ever

Haven't called crisis,
use it less and less

Would turn to Warmline
before crisis

The Data 3

Survey of callers into
Warmlines





What Callers Felt “Most Helpful”

“Someone to talk to”

“A person who can relate
and truly
understand”

“Peer Support Staff is well
trained and
quality listeners”

“Non-clinical/non-provider
staff”



What callers felt “least helpful”

“Difficult to access”

These comments referred to long wait times and feeling rushed due to a call waiting list.

Requests were made for the line be open late night (after 3am) or even 24 hours.

“Unable to connect with Peer Specialist”

Referred to a variety of reasons including:

Too young, couldn't relate, not supportive, not respectful, not providing requested referrals or information.

Challenges



Collaboration

Lack of an accessible centralized hub to create sharing of resources, training materials, best practices, and technology among Warmlines across the country.

Funding & Sustainability

Crucial to ensure continuous, reliable emotional support for individuals in need, helping to prevent crises and promote mental well-being.

Training & Retention of Workers

Due to underfunding, many Warmline workers are not paid a living wage, leading to turnover. Training staff may not be a priority due to constant understaffing challenges.



Call to Action



**Support local
Warmlines**



**Spread awareness
of Warmlines**



**Collaborate with
local Warmlines for
resources/funding
solutions**



Use Warmline.org as a resource

115,000+ visitors
in last 6 months

Where Do We Go From Here

Warmline.org is a website that is still in development

Our intention is to be a resource for both warmline callers and service providers

Developing the go-to hub of accessible organizational best practices

Advocacy for greater public awareness of warmlines

Helping new warmlines with funding and training strategies

Includes working with government to create new funding

Warmline.org

Executive Committee

Howard Trachtman: Founder

Kimberly Harol: Founding Member + President DBSA Revere

Rebecca Dalgin, PhD: Researcher + Professor & Rehabilitation Counseling Program Director

Paul Komarek: Member + Founder, Human Intervention LLC

Ansh Kharbanda: Member + Undergraduate Researcher at Stanford School of Engineering

Orly Israel: Member + Founder, The Listening Table

Trenda Hedges: Member + CEO, Peer Power LLC

Vanessa Williams: Member + CEO, Elevate Recovery LLC

Anyush Pareek: Researcher + VP, Model UN at Irvington High School

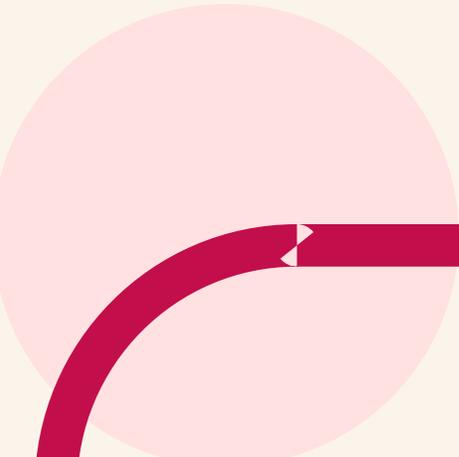


Thank you!

For additional questions, comments, or conversation

hdt@warmline.org

warmline.org



References

Dalgin, R. S., Trachtman, H.D., & Dalrymple, K.N. (2021). National Warmline Survey Executive Report. <https://warmline.org/2021NationalWarmlineSurveySummary.pdf>

Dalgin, R. S., Dalgin, M. H., & Metzger, S. J. (2017). A longitudinal analysis of the influence of a peer run warm line phone service on psychiatric recovery. *Community Mental Health Journal*, 54(4), 376–382. <https://doi.org/10.1007/s10597-017-0161-4>

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