STATEMENT OF
COMMISSIONER GEOFFREY STARKS

Re: Implementation of the National Suicide Hotline Improvement Act of 2018, WC Docket No. 18-336.

Suicide is an urgent national problem that touches so many American households. One person in the United States dies by suicide every 11 minutes, yet only half of all Americans experiencing an episode of major depression receive treatment. I support today’s decision to designate 988 nationwide as a three-digit number to access the National Suicide Prevention Lifeline because it will aid millions of Americans in moments of crisis and quickly connect them to the critical support they need. Calling the Lifeline may be the most important call of a person’s life, and nationwide implementation of 988 ensures that anyone in the United States can easily and quickly connect to lifesaving help. I thank the staff of the Wireline Competition Bureau for their work on this critical issue.

This vote comes at a critical time when the social, health, and economic impacts of the COVID-19 pandemic are likely intensifying mental health concerns in the United States. Many Americans are overwhelmed on so many levels. This unprecedented public health crisis has taken the lives of more than 138,000 people and compounded the mental health issues that so many Americans manage every day. Shelter-in-place orders have limited access to mental health resources, while the stress and fear of the pandemic has placed enormous pressure on Americans.

I recognize that we are asking the telecommunications industry to move quickly, and our decision recognizes the implementation challenges in particular regions that some companies have identified. I nonetheless support establishing a uniform deadline that will support a nationwide rollout of 988. We are facing a growing mental health emergency in the United States. In 2018, 10.7 million adults in the United States seriously thought about suicide, 3.3 million made a plan for suicide, and 1.4 million attempted suicide. Suicide also disproportionately affects at-risk populations: More than 20 veterans die by suicide every day. Suicide is the second most common cause of death among teenagers and young adults. More than 1.8 million LGBTQ+ and same-gender-loving youth and young adults seriously consider suicide each year. Additionally, suicide rates are higher among Native American and rural American populations. These statistics illustrate the severity of the mental health crisis in the United States.

We know there are a myriad of mental health issues our most vulnerable communities are grappling with in the midst of this pandemic. In addition, we have also seen recent data that showed a spike in anxiety and depression among Black Americans in the week following the widely circulated videos of George Floyd’s death. This unprecedented time of uncertainty is why I am particularly concerned about the grave statistics surrounding Black youth. Dr. Michael A. Lindsey and his colleagues found that between 1991 to 2017, suicide attempts among Black adolescents increased by 73 percent, while attempts among white youth decreased. Both as a Commissioner and as a Black parent, I deeply believe in the role the Federal Communications Commission has to play in this conversation. That is why earlier this week, I hosted an event on Black mental health where we heard from academics, advocates, and media leaders who all have a vested interest in elevating complete narratives and solving this complex crisis with innovative and culturally competent approaches.

I was proud to have Congresswoman Bonnie Watson Coleman, a fearless advocate for our community and chair of the Congressional Black Caucus Emergency Task Force on Black Youth Suicide and Mental Health, speak during this event. As I previously mentioned, mental health has become increasingly important during this pandemic for communities of color. There are too many highlights from the event to discuss here, but I want to note that one of the panelists, Noopur Agarwal, Vice President of Social Impact at ViacomCBS’s Entertainment & Youth Group, discussed at length the need for media to support the intersection of mental health and entertainment within Black communities. Additionally, we heard from Dr. Kia Darling-Hammond who has done transformative work on the concept of thriving, hence the name of the panel: “Thriving While Black: The Role of Media and Communications Technology in Addressing Black Mental Health.” It was instructive to hear from her
and all of the panelists who reified the message that we must reimagine and advocate for a world where Black people and other marginalized groups not only survive but thrive.

Without hesitation, I see today’s vote as an important step toward addressing the needs of those with mental health concerns and in particular the Black community. However, I would note that there is much more I believe the FCC must do to ensure that communities of color thrive. COVID-19 has made telehealth, including mental health care, more necessary than ever. It has also highlighted the cruel reality of internet inequality. Though expanded access to telehealth can ease access to lifesaving, critical care, it doesn’t work for the millions of Americans, particularly low-income people and people of color, who lack access high-quality, affordable communications services. That’s why I have been so supportive of congressional efforts to fund emergency and affordable broadband access during the COVID-19 crisis. In addition, I have called for improvements to the Lifeline program, such as for the FCC to enter into MOUs with agencies such as the USDA and HHS, which administer programs like SNAP and Medicaid, and are two of the government services that automatically qualify households for the Lifeline program. The Commission must ensure that these eligible subscribers immediately learn about the Lifeline program and how to sign up for it. Closing the digital divide is a critical step toward universal access to mental health care in the United States—just one more reason addressing internet inequality should be our top priority.