## Peer Reviewed

# FCC Suicide Hotline Comment Letter NCfIH

#### Mitchell Goldstein, MD and Susan Hepworth



Protecting Access for Premature Infants through Age Two

The National Coalition for Infant Health is a collaborative of more than 180 professional, clinical, community health, and family support organizations focused on improving the lives of premature infants through age two and their families. NCfIH's mission is to promote lifelong clinical, health, education, and supportive services needed by premature infants and their families. NCfIH prioritizes safety of this vulnerable population and access to approved therapies.

The National Coalition for infant health recently sent a letter to the Federal Communications Commission in support of the implementation of the National Suicide Hotline Improvement Act of 2018.The letter in its entirety follows. February 10, 2020

Marlene H. Dortch, Secretary

Federal Communications Commission

Office of the Secretary

236 Massachusetts Ave., NE

Washington, DC 20002

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

Dear Secretary Dortch:

On behalf of the National Coalition for Infant Health, I am writing to express support for the Federal Communications Commission's recommendation to implement a three-digit dialing code, 988, for a national suicide prevention and mental health crisis hotline. This would serve as an important step in increasing access to life-saving resources for those in crisis.

The National Coalition for Infant Health (NCfIH) is a collaborative of over 200 professional, clinical, community health, and family support organizations focused on improving the lives of premature infants and their families. The coalition's mission is to promote lifelong clinical, health, education, and support services needed by premature infants and their families. One area of NCfIH's focus is



on access to diagnosis and treatment for postpartum depression and post-traumatic stress disorder. Many of NCfIH's members know first-hand how childbirth, especially traumatic births, can affect the mental health of mom and dad.

Postpartum depression is a mood disorder that affects approximately 600,000 women each year and is most likely caused by a combination of physical and emotional factors. It can also af-

"Postpartum depression is a mood disorder that affects approximately 600,000 women each year and is most likely caused by a combination of physical and emotional factors. It can also affect men. "

fect men. Common symptoms like extreme sadness, irritability, exhaustion, and withdrawal are often dismissed as just the "baby blues." While the "baby blues" and postpartum depression have some commonalities, they are not the same.

Postpartum depression symptoms typically develop within a week or two after the baby is born. But for some new parents, it may not emerge for months, or even up to one year later. This is especially true for parents of babies admitted to the neonatal intensive care unit. Left untreated, postpartum depression can have dire consequences for new moms, dads, and their babies.

NCfIH applauds the efforts of the FCC to improve access to critical mental health resources with the implementation of a three-digit emergency number. This number is an important step in recognizing that mental health is as important as physical health. NCfIH urges the FCC to ensure callers are protected from any financial burden associated with the implementation of this proposal.

Thank you for the opportunity to provide comments, and we ap-

preciate your attention to this matter. If NCfIH can provide further details or be of assistance, please contact us at <u>info@infanthealth.</u> org.

Sincerely,

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Mitchell Goldstein, MD

Medical Director, National Coalition for Infant Health

Disclosures: The authors do not have any relevant disclosures.

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### National Coalition for Infant Health Values (SANE)

**Safety.** Premature infants are born vulnerable. Products, treatments and related public policies should prioritize these fragile infants' safety.

**Access**. Budget-driven health care policies should not preclude premature infants' access to preventative or necessary therapies.

**Nutrition.** Proper nutrition and full access to health care keep premature infants healthy after discharge from the NICU.

**Equality.** Prematurity and related vulnerabilities disproportionately impact minority and economically disadvantaged families. Restrictions on care and treatment should not worsen inherent disparities.

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