

## Summary

**Background:** Kirkens SOS (K SOS) is classified as a low-threshold diaconal suicide prevention crisis line service aimed at connecting individuals in emotional and/or existential crises to immediate and anonymous crisis support, with an ultimate goal of saving lives from suicide (Kirkens SOS, 2004, 2005). Notwithstanding the role of K SOS in relation to important public mental health priorities, there is a paucity of studies exploring the support offered from diaconal suicide prevention crisis lines and the volunteers' roles in service-delivery. The current qualitative study was designed to contribute to addressing these knowledge gaps.

**Aim:** The objective of the present study was to provide a knowledge base from which to describe and gain a deeper understanding of the support offered from a volunteer-based diaconal suicide prevention crisis line and the role of the volunteers in service-delivery. The central research question was: How can the support offered by a volunteer-based diaconal suicide prevention crisis line and the volunteers' roles in service-delivery be understood from the perspective of public mental health psychology of religion and spirituality, based on the experiences of K SOS callers and volunteers within this specific context of a diaconal suicide prevention crisis line in Norway? This larger question was operationalized into three sub-questions that were addressed in the three papers: (a) How do volunteers operating a diaconal suicide prevention crisis line in Norway experience challenges and how are these challenges met? (paper I), (b) How do volunteers at a diaconal suicide prevention crisis line in Norway experience emotional stressors in relation to operating the service and how are these managed in daily operations? (paper II), and (c) How do callers utilizing a diaconal suicide prevention crisis line in Norway ascribe significance to contacting the service? (paper III).

**Research design:** The current research project was designed as a qualitative, explorative study, positioned within the hermeneutic research tradition (Gadamer, 2011). The empirical material consisted of qualitative interviews with K SOS volunteers ( $n = 27$ ) and callers ( $n = 9$ ). The data material was analyzed with Systematic Text Condensation (Malterud, 2012b), a modified, pragmatic version of Giorgi's descriptive phenomenological method (Giorgi, 2009). The study was theoretically approached through a multilevel interdisciplinary paradigm (Emmons & Paloutzian, 2003) that was built concomitantly with the analyses of papers I-III, rooted within public mental health psychology of religion and spirituality.

Main findings: After triangulating the findings of papers I-III, the consolidated findings indicate complexities in the support functions and service-delivery of K SOS. The findings showed that greatest challenge to the volunteers in the study was the perception of being caught between their expectations and the practice field. The experience of many volunteers was that the crisis line primarily served a broad ongoing support function for loneliness or mental illness concerns, rather than a suicide prevention crisis intervention function. Further, the findings illustrated how the volunteers experienced emotional stressors related to being unable to actively intervene, encountering traumatized callers, and feeling uncertain about representing the Church. They used a combination of personal coping strategies and organizational support, including focusing on experiences of meaning and growth, having realistic ambitions, maintaining boundaries, and participating in reflection-based supervision. We also found that from the callers' perspectives the crisis line provided significant emotional, relational, and existential support functions in terms of operationalizing immediate emotional availability, experiences of connectedness and acceptance, and a safe space for existential meaning-making processes.

Implications: The findings support maintaining a high degree of availability in service provision, using humanistic, resource-oriented crisis intervention models, and providing space for the callers' existential meaning-making processes. From a public mental health psychology of religion and spirituality perspective, our study identified a need for further work on the role of K SOS as a diaconal suicide prevention crisis line in relation to other professional and non-professional actors in the overall landscape of service-delivery within public mental health. Additionally, the risk of burnout and vicarious traumatization among volunteers must be addressed in research and clinical practice. To enable personal, relational, and spiritual growth and development among volunteers, adequate training and support systems are advised. As the findings suggest, implementing biopsychosocio-existential perspectives in a cultural context to applied practice models of suicide prevention and crisis intervention may provide a deeper understanding of callers' difficulties and coping resources. This area merits future investigation and study.