

Urgent Federal Action Needed 988 and Strengthening Our Nation's Crisis Response System

Even before the pandemic, suicide and overdose rates had risen to historically high levels and incidents of mental health challenges among Americans were on the rise. To address these issues and better connect people to appropriate care by trained mental health professionals, Congress designated 988 as the new three-digit crisis number for mental health emergencies. But a number alone is not enough.

Sustained federal funding is needed now to help build a 988 crisis infrastructure that can provide someone to answer the call, someone to come help, and someplace to go for care. It's time to make a historic shift in how America responds to mental health crises.

The need is growing.

• With Americans reporting increased depression, anxiety, financial strain, social isolation, substance misuse, and suicidal ideation amid the pandemic—and with increases in completed suicides among certain populations, such as Black youth—now, more than ever, we need to get people help when and where they need it.

One number to call.

- When 988 goes live nationwide in July 2022, it will be the easy-to-remember, three-digit number to call when you or someone you know is experiencing a mental health emergency.
- For example, when someone is having suicidal thoughts, experiencing delusions, or displaying severe symptoms of a mental health condition, 988 will be available to connect them with the help they need.

More than a number, 988 is a pathway to compassionate care.

- 988 is not only about answering calls—it's also about making appropriate and accessible referrals, creating a system of mobile crisis teams, and offering crisis stabilization programs that connect people to a continuum of care at critical moments.
- Fully implemented, 988 will reduce avoidable emergency department or hospital admissions for people in crisis and avoid traumatic, often deadly, engagements with the criminal justice system.

A more effective allocation of resources.

- A comprehensive 988 system will not only save lives, but also preserve important local, state, and federal resources.
- In 2017, an estimated average of 10% of law enforcement agencies' total budgets and 21% of staff time were spent responding to and transporting persons with mental illness (<u>Treatment Advocacy</u> <u>Center</u>).
- In contrast, a key mobile response program in Oregon—which sends a medic and a mental health crisis counselor to attend to immediate mental health issues, de-escalate, and help formulate a plan—cost \$800,000 in 2018, less than 2% of the annual police budget (*Wall Street Journal*).

More than half of Americans support sending specialized crisis teams to respond to mental health crises instead of police, according to a recent <u>Harris Poll survey</u>.

Time for action is now.

988 will only be effective nationwide if it's adequately funded by Congress. We are calling on federal policymakers to take steps now to help states develop effective crisis response infrastructure that include three key components:

Someone to answer the call. 24/7 call centers adequately staffed by specially trained individuals to respond to a range of mental health crises.

Someone to come help. Mobile crisis teams that can be dispatched to the scene and are equipped to effectively assist people in crisis.

Someplace to go for care. Crisis stabilization services to provide observation as well as connection to follow-up care.

We also urge Congress to ensure all payers, including commercial insurers, cover these and other crisis services.

Learn more: NationalMentalHealthResponse.org/CrisisResponse

The National Action Alliance for Suicide Prevention's Mental Health & Suicide Prevention National Response to COVID-19 ("National Response") collaborated with chief executives of the nation's leading mental health advocacy organizations and professional associations ("The CEO Huddle") to develop these materials, which reflect the alignment of both the National Response's <u>An Action Plan for Strengthening Mental Health and the Prevention of Suicide in the Aftermath of COVID-19</u> and the CEO Huddle's <u>A Unified Vision for the Future of Mental Health, Addiction, and Well-Being in the United States</u>. To learn more, visit <u>NationalMentalHealthResponse.org/CrisisResponse</u>.



