Coming to Indian Country: 988 and the National Suicide Prevention Lifeline

Why do we need 988?
Suicide is the second leading cause of death for Native youth ages 10-24. Native communities experience the highest rates of suicide amongst all racial and ethnic groups in the United States, and suicide rates among American Indian and Alaska Native communities rose by 118% between 1999 and 2017.

Suicide is preventable. 988 is one step in the direction of saving lives. This early intervention can reduce the burden on 911 and hospital services. 988 will move mental health and substance use services out of the shadows and into the mainstream; it will send a message that healing and getting help are normal and important parts of life.

What is 988?
988 is a direct three-digit line to trained National Suicide Prevention Lifeline crisis counselors that will go live July 16, 2022. With an easy to remember 3-digit number, the Lifeline hopes to reach many more people in emotional crisis. This service is provided free of charge to the caller. Any person of any age can call or text 988; services will be available 24/7, year round. They will include a text option, translation services for non-English speakers, accessible options for people who are deaf or hard of hearing, and services for minors.

When you’ve got a police, fire, or rescue emergency, you call 911. When you have a mental health emergency, you call/text 988.

How will this affect my community?
The impact of 988 will vary from community to community. If your community has reliable phone and 911 services, it will now have access to 988 24/7. Community members will be able to receive confidential services during mental health emergencies with minimal involvement of police or hospitals. If you live in an area where connecting to 911 services is difficult, you may experience the same with 988. Please know that chatting via the suicidepreventionlifeline.org website, texting NATIVE to the Crisis Text Line at 741741, or texting 988 when available may be the best ways to connect in these communities.

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**Lifeline Crisis Centers are Local and Effective**

The National Suicide Prevention Lifeline provides free, 24/7 confidential emotional support to people in suicidal crisis or emotional distress in the United States. **The Lifeline is effective in reducing suicidal and emotional distress.**

- The Lifeline has served over 10 million people since its inception
- Call centers in the Lifeline divert hundreds of thousands of calls from 911 every year
- Independent evaluations demonstrate that Lifeline centers are effective in reducing emotional distress and suicidality

The Lifeline is a network of over 180 local crisis call centers. Crisis centers are connected to local community resources including community mental health, hospitals, social services, and first responders. The Lifeline’s crisis call centers provide the specialized care of a local community with the support of a national network.

There are no Lifeline tribal crisis call centers—yet! Tribes may partner with regional non-profits to provide coverage to tribal communities as well as open tribal crisis lines in their community. To learn more about the capacities needed to open a crisis call center, review the [SAMHSA National Guidelines for Behavioral Health Crisis Care](#).

**What happens when you call (or text) 988?**

You will be connected with a trained crisis worker from a local crisis center. Wait times are anticipated to be under one minute. The caller can talk about any emotional crisis, not just suicide. The crisis worker will use active listening to assess risk, determine if a person is in danger, and assist the person in feeling better and accessing resources. If the crisis worker believes the caller is in danger, they will work with the caller to create a safety plan that does not require calling emergency services. **Less than 3% of calls result in dispatching 911 services.**

If you are calling about a friend or family member who is in distress, the person on the phone will walk you through how to help and provide resources.

**How will this change be resourced and promoted?**

With the passage of the National Suicide Hotline Designation Act, the federal government has set aside a 5% Mental Health Block Grant for crisis services and a single time Mental Health Block Grant of $1.5 Billion. States can also exercise their authority to implement a 988 fee, similar to the current 911 fee. In 2018, 911 fees generated $2.6 Billion. Tribes can contact the SAMHSA Office of Tribal Affairs and Policy to discuss possible funding to support 988 in their region, or reach out to the state closest to them to discuss funding partnerships.

In addition to federal efforts, non-profit agencies all over the nation will be disseminating information about 988. For tribal promotional materials or consultation in Washington, Oregon, or Idaho, contact the Northwest Portland Area Indian Health Board’s THRIVE Suicide Prevention Project Coordinator at mnore@npaihb.org.

**How can tribal communities partner with 988?**

Tribes and Tribal communities can:

- Contact their state’s 988 Implementation Coalition to get involved in the rollout of 988.
- Partner with local crisis service centers to provide culturally appropriate services. To get connected or learn more about your local crisis service center, visit the Lifeline’s Network webpage.
- Establish tribally specific crisis service centers to become part of the Lifeline network.
- Develop culturally aware mobile crisis response teams for tribal communities.