Re: Risks and Benefits of the New 988 Help Line, Set to Launch 7/16/22

On July 16, 2022, the 988 Mental Health Crisis Hotline will roll out across the country. In Massachusetts, July 16th will mark a turnover from the National Suicide Prevention Lifeline number to 988. The 988 line is touted as an easily accessible resource for those who are considering ending their life or experiencing emotional distress. The 988 line will also eventually work in tandem with the Department of Mental Health Behavioral Health Helpline set to roll out in early 2023. While hopeful that this new resource will help fill critical gaps in our community mental health programing, MHLAC joins with community partners in encouraging forthcoming users of the 988 line to consider the current risks and benefits when taking advantage of these services.

The 988 line in Massachusetts will direct calls, based on area code, to five regional call centers staffed by civilian workers. In addition to providing talk assistance, non-clinical staff and volunteers will have the capability to connect calls to 911, if they believe the call rises to such a critical level. In answer to a recent question posed to representatives of the Department of Public Health, 988 webinar participants were informed that an individual caller would be told if they were going to be connected to 911. However, these representatives hesitated to answer further inquiries into explicit policies on this feature, which might imply the answer is more ambiguous. Emergency-911 services have integrated geolocation as well as caller identifying information as a key pillar to their system. This available option for the Call-taker, and unclear policy, would terminate confidentiality and activate a law enforcement, fire, or EMS response. While response policy varies across the Commonwealth, callers should be aware in most locations police respond to calls of this nature.

The driving purpose of the new 988 line is to divert mental health crises calls away from Law Enforcement and 911. Historically, police responses to mental health crises have resulted in long-term entanglement with the criminal justice system, incarceration, and far too often death for the individual in crisis. This has been especially true for individuals of color. Law enforcement contact may also trigger mandatory reporting requirements as well as unnecessary and invasive governmental procedures which can have monumental impacts. Many residents of the Commonwealth equally understand that police responses to emotional distress can lead to non-criminal loss of liberty: involuntary stays in locked psychiatric units. A major 2019 study published in the British Medical Journal, found that incarceration in a psychiatric unit creates that highest risk for suicide of all suicide risk indicators. The use of coercion, the loss of agency, and the human
rights abuses that abound on such units, drive many people to, and over, the edge of life and death. Users of the 988 line would be advised to consider the risk of potential 911 transfer and make an informed choice as to the assistance the line can offer them.

While MHLAC and community partners applaud the National Suicide Prevention Lifeline and partner organizations for their decades of incredible work providing services to those in suicidal crisis, we know not all mental health crisis involves suicidal ideation. In fact, mental health crisis can take many forms and require diverse, compassionate, and creative informed approaches. Currently, all callers to the 988 line will be walked through a suicide screening, even those calling on behalf of a third party or without indication of suicide. Understanding Mental health crises can take innumerable forms and fall along a spectrum for each person, this screening could be a neutral hurdle or a concerning trigger. Callers should prepare themselves for this screening.

Furthermore, thinking about suicide does not necessarily mean that a person is intending to end their life. Frequently, thoughts of suicide mean that a person feels hopeless and simply needs someone to listen and to be with them in an incredibly lonely experience. Thoughts of serious bodily harm can be a reaction to social-determinates or major life changes. It is often the overwhelm of those losses that needs to be held by the listener so that they can more comfortably move through those feelings, rather than focusing on talk of suicide. Escalation is dangerous. Adopting a suicide focused approach could also potentially divert Call-taker training from approaches to the vast array of mental health challenges callers may be experiencing. MHLAC and community partners look forward to the roll out of the Department of Mental Health Behavioral Health Helpline in early 2023 which is in development to provide citizens of the Commonwealth with a clinical helpline to connect them with diverse mental health services.

The new 988 Crisis Line is a true step in the right direction for addressing mental health as a public health matter, rather than matter to be policed through 911. MHLAC and community partners encourage potential users of the 988 line to educate themselves on the rollout and follow along as hiccups are sorted through. Currently the Department of Public Health Suicide Prevention Program is taking lead on this roll out, and can be reached at https://www.mass.gov/service-details/suicide-prevention-program-contact-information. Additionally, a proposed 988 commission established by the state legislature that includes individuals with lived experiences of mental health crises, if passed will spend the next year studying all aspects of the 988 line and would work to resolve problematic issues related to the start-up of the new number.

Resources for Additional Information:

- FCC 988 Fact Sheet
- Suicide Prevention Hotline Fact Sheet
- National Suicide Hotline Designation Act of 2020
- Mass Gov 988 Fact Sheet
- 988 Commission Authorizing State Senate Statute
- 988 Commission Authorizing State House of Representatives Statute
Sincerely,

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Seedlings