

More Than A Number

How a 988 Crisis Response System Will Change How We Help People Experiencing Mental Health Crises



In too many communities, law enforcement is typically the first response to people experiencing a psychiatric crisis, often with tragic results. Nearly 1 in 4 people shot and killed by police have a mental illness. People with mental health conditions are also incarcerated disproportionately – about 2 million times each year, people with serious mental illness are booked into jails – and experience high rates of emergency department visits and readmissions into hospitals.

A coordinated effort to build a crisis response system around 988 can significantly change how we respond to people experiencing mental health crises and reduce the inequities experienced by communities of color.

Problem

Solution



A 10-digit number focused only on suicide prevention, which can be difficult to remember while experiencing a crisis

An easy-to-remember 3-digit number for mental health, substance use and suicidal crises, operational nationwide by July 2022



Patchwork system that makes it difficult for crisis counselors to coordinate care for callers, dispatch help in a crisis, or follow-up afterwards

Create 24/7 crisis call center hubs with the ability to respond effectively to callers, dispatch mobile crisis teams, connect to crisis stabilization programs, and follow-up after the call



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Promote behavioral health mobile crisis teams that include police as co-responders only as needed in high-risk situations – reducing law enforcement involvement in mental health crises



Insufficient funding for crisis centers to meet the CURRENT level of calls, let alone increased demand from consolidating mental health, substance use and suicidal crises in one number

Implement monthly fees on phone bills to fund 988 call center operations and associated crisis response services



People experiencing crises often don't get connected to intensive services until too late, if at all

Establish crisis stabilization programs in a home-like environment that provides short-term (under 24 hours) acute services and warm hand-offs to follow-up care