

# Research on 988 Implementation: Studying State Approaches and Financing

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R01MH131649

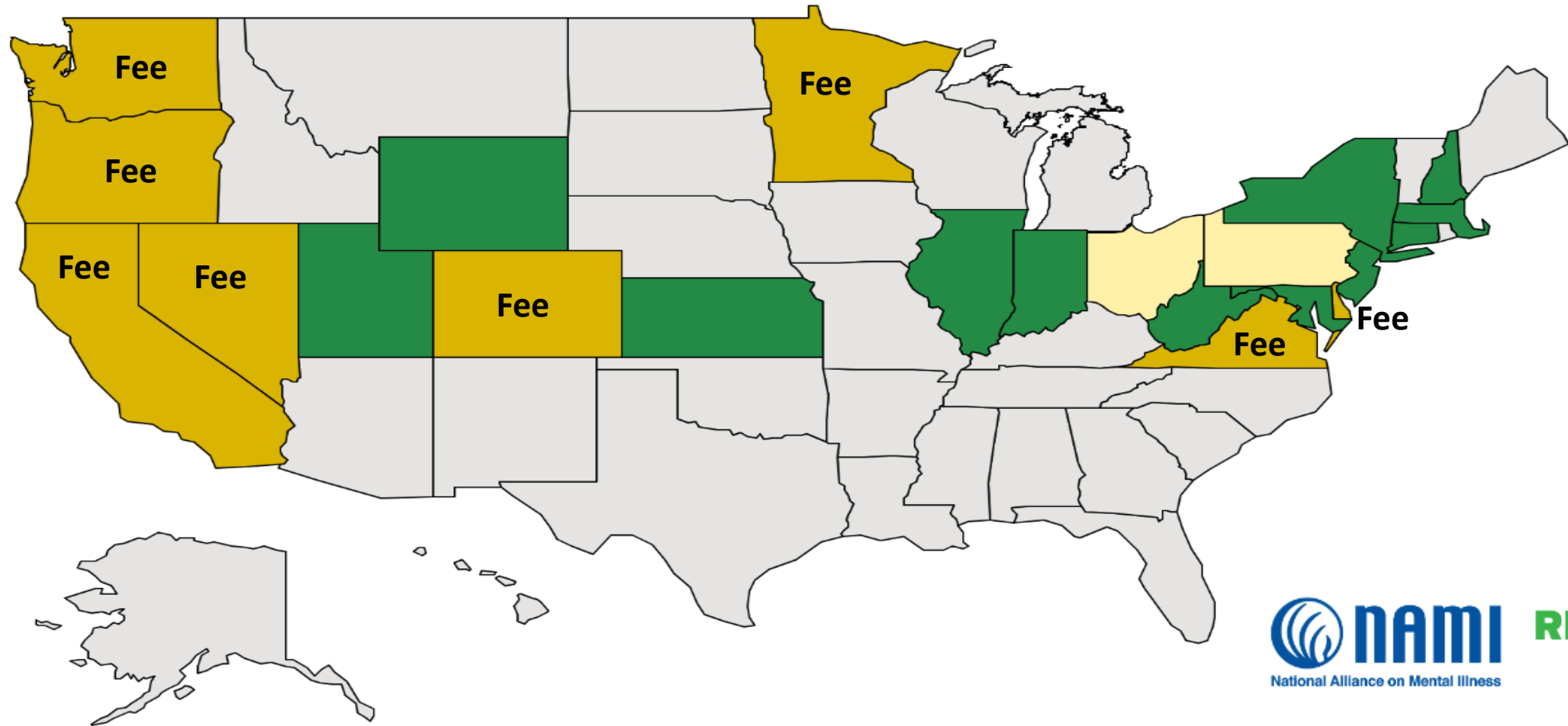


# Overview:

- Implementation of the Federal 988 Suicide and Mental Health Crisis Hotline Policy: Determinants and Effects of State Policy Implementation Financing Strategies (R01MH131649)
  - Aims/overview of project
  - Methodological considerations when comparing 988 outcomes between states
  - Findings from early analyses
- Findings from survey of awareness, use, and potential future use of 988
- Findings from analysis of state legislator social media posts about 988



# 988 is a Federal Initiative, But Implementation in State/Local





# Research Aims (R01MH131649)

- 1. Characterize states' 988 implementation financing strategies and identify determinants of implementation strategy adoption**
  - Key informant interviews
  - Create longitudinal 50 state dataset (1/1/20-12/31/25)
- 2. Explore perceptions of the financing determinants of 988 policy implementation success and acceptability and feasibility of legislative financing strategies to improve implementation**
  - National surveys of 350 mental health crisis system professionals (e.g., Lifeline call center leadership, state/local mental health and crisis system leadership)
  - Interviews (15 per state% with professionals in two states that adopted 988 telecom fee and two states that did not
- 3. Determine the effects of 988 telecom fees on policy implementation and mental health crisis outcomes, and assess effect heterogeneity across demographic groups**
  - Use a difference-in-differences approach to compare trends in outcomes pre (2015-2021) and post (2022-2025) 988 implementation between states that did and did not pass telecom fee legislation to finance 988 implementation.
  - Outcomes:
    - In-state answer rates (Vibrant)- Implementation outcome
    - State call volume rates (Vibrant)- Implementation outcome
    - Suicide death rate (CDC's National Violent Death Reporting System)- Effectiveness outcome
    - Emergency department use rate for mental health crisis and self harm (AHRQ's State Emergency Department Databases)- Effectiveness outcome
    - Suicide attempts (National Survey on Drug Use and Health)- Effectiveness outcome
  - Assess the extent to which effects are moderated by the amount of state 988 spending per state resident
  - Explore heterogeneity in the effects across demographic groups (e.g., by race/ethnicity and age)



# Interpreting Between-State Variation in 988 Suicide and Crisis Lifeline Call Volume Rates

Jonathan Purtle, Dr.P.H., Matthew L. Goldman, M.D., M.S., Elizabeth A. Stuart, Ph.D.

## Four Main Methodological Challenges:

1. Assigning callers to states based on area code, changing to geo area
2. Accounting for populations for whom population-specific Lifelines exist (e.g., Veterans Lifeline)
3. Presence and use of non-988 affiliated call centers (about 300)
4. State variation in intensity of 988 public awareness campaigns

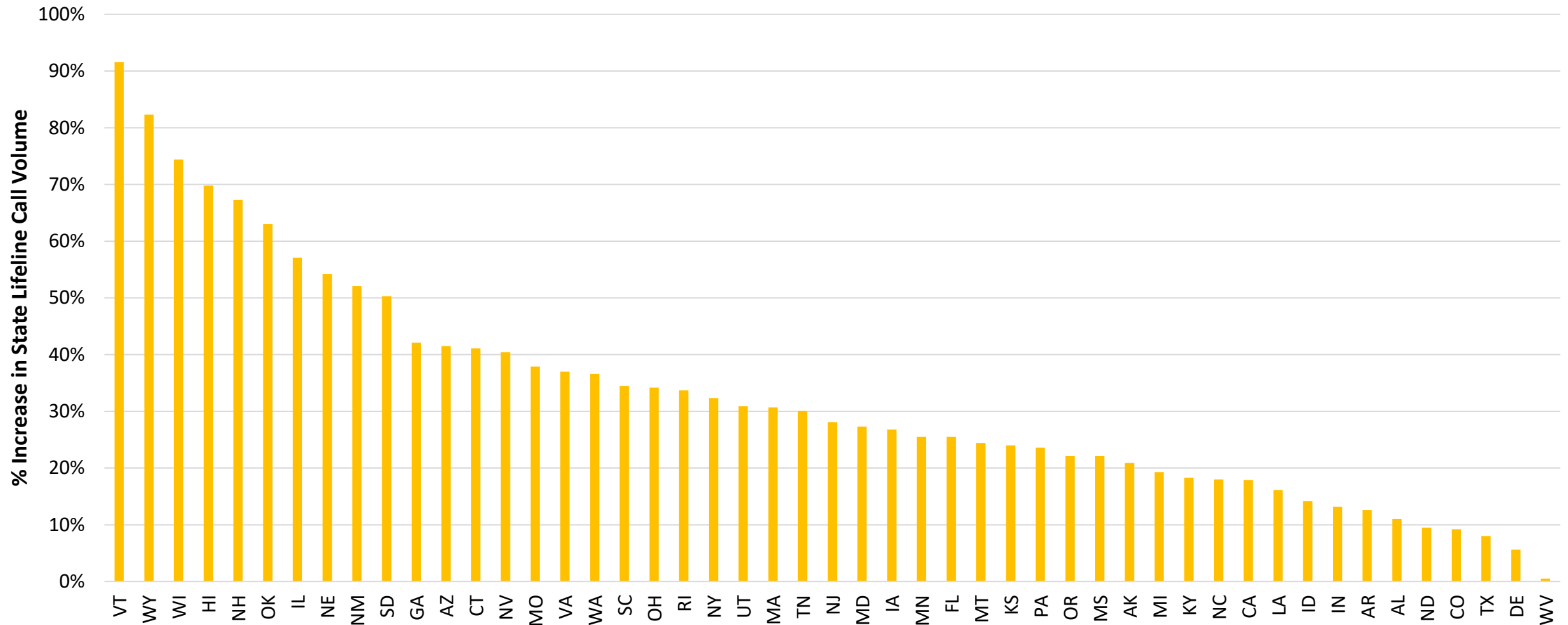
Purtle J, Goldman ML, Stuart EA. Interpreting between-state variation in 988 suicide and crisis lifeline call volume rates. *Psychiatric services*. 2023 Sep 1;74(9):901-.



# State Variation in % Increase In Lifeline Call Volume Between August-November 2021 (pre-988 implementation) and August-November 2022 (post-988 implementation)



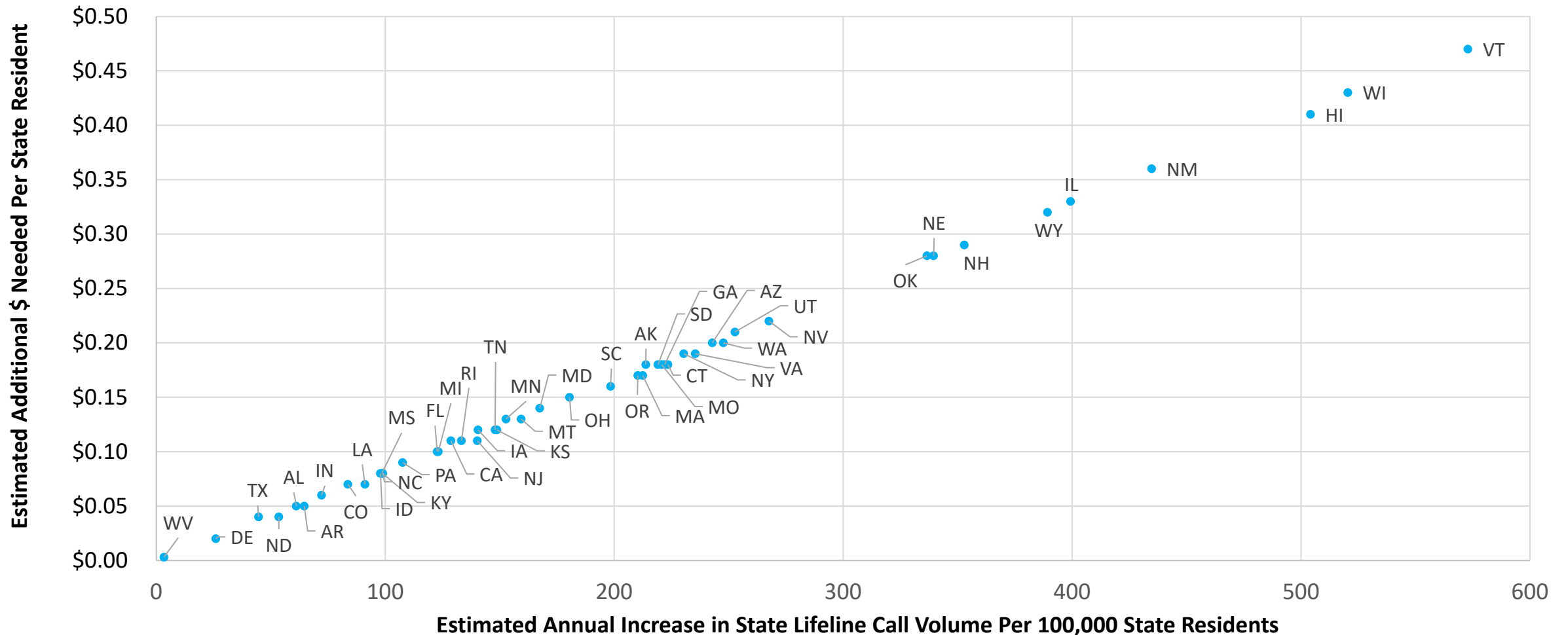
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Purtle, J., Ortego, J.C., Bandara, S., Goldstein, A., Pantalone, J., Goldman, M. Implementation of the 988 Suicide & Crisis Lifeline: Estimating State-Level Increases in Call Demand Costs and Financing. *Journal of Mental Health Policy and Economics*. 2023, 26, 85-95.



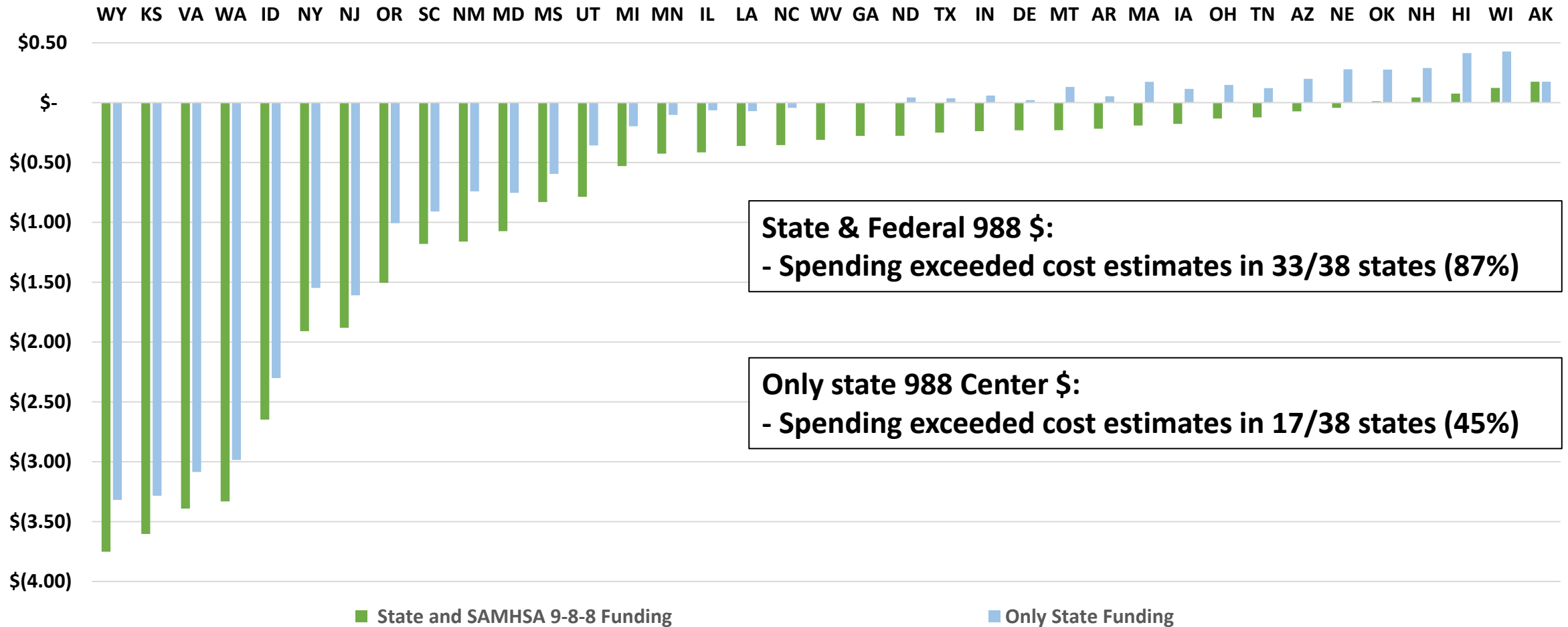
# Estimated Additional \$ Needed Per State Resident Annually to Meet Estimated Annual State Increase In Lifeline Call Volume (cost per call estimate= \$82, SAMHSA)



Purtle, J., Ortego, J.C., Bandara, S., Goldstein, A., Pantalone, J., Goldman, M. Implementation of the 988 Suicide & Crisis Lifeline: Estimating State-Level Increases in Call Demand Costs and Financing. *Journal of Mental Health Policy and Economics*. 2023, 26, 85-95.



# Difference between Estimated Additional \$ Needed Per State Resident Annually to Meet Estimated Annual State Increase In Lifeline Call Volume and \$ Earmarked for Lifeline Centers in Response to 988





# Nationally Representative Ipsos Survey, June 2023, N=4,942

Has Heard of 988

Has Used 988

Very Likely to Use 988 in the Future if  
Experiencing a Mental Health Crisis

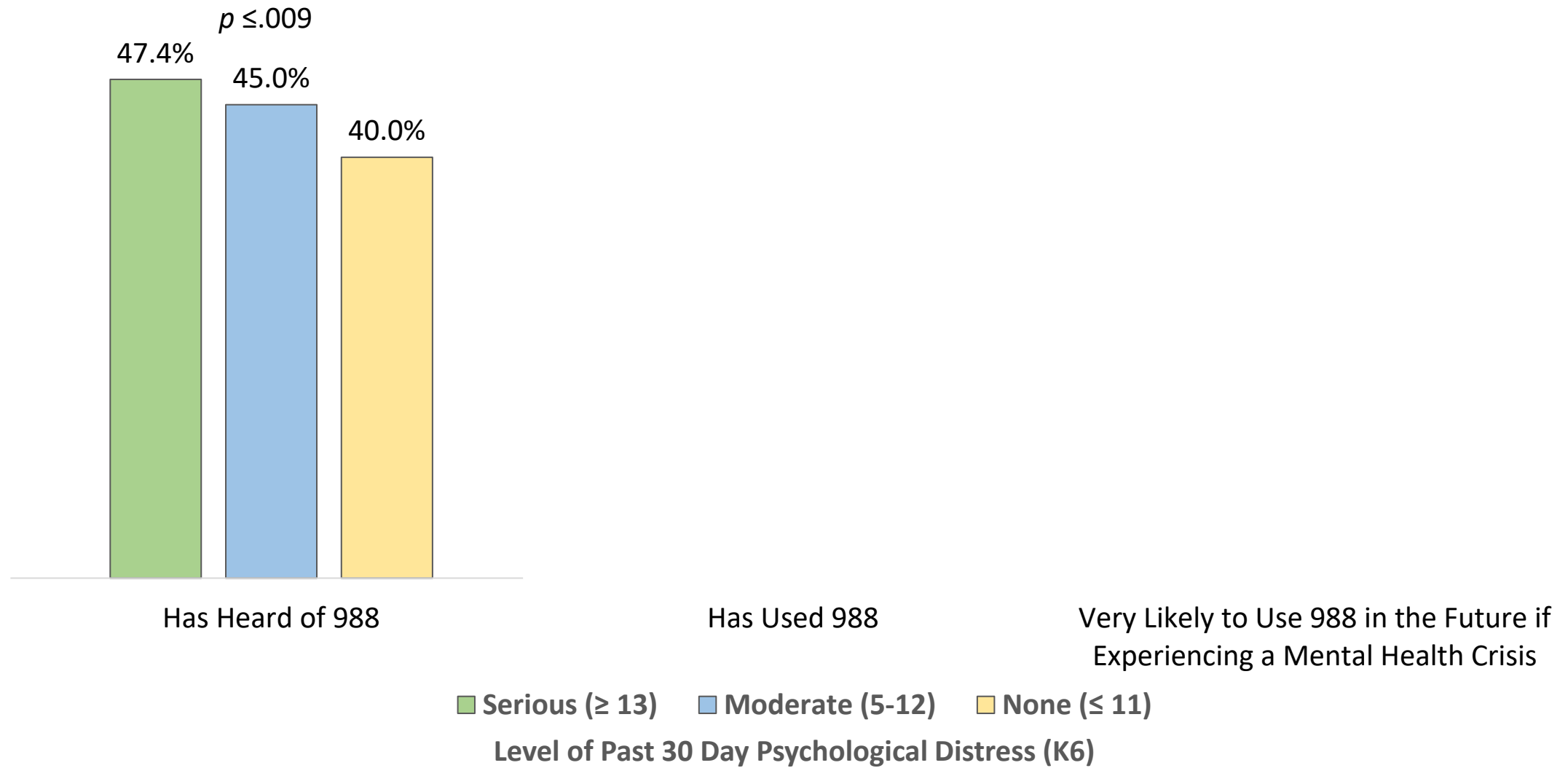
■ Serious ( $\geq 13$ )   ■ Moderate (5-12)   ■ None ( $\leq 11$ )

Level of Past 30 Day Psychological Distress (K6)

Purtle, J., McSorley, A.M., Adera, A.L., Lindsey, M.A., Variation in Use, Potential Use, and Awareness of the 988 Suicide & Crisis Lifeline by Level of Psychological Distress. *JAMA Network Open*. In press.



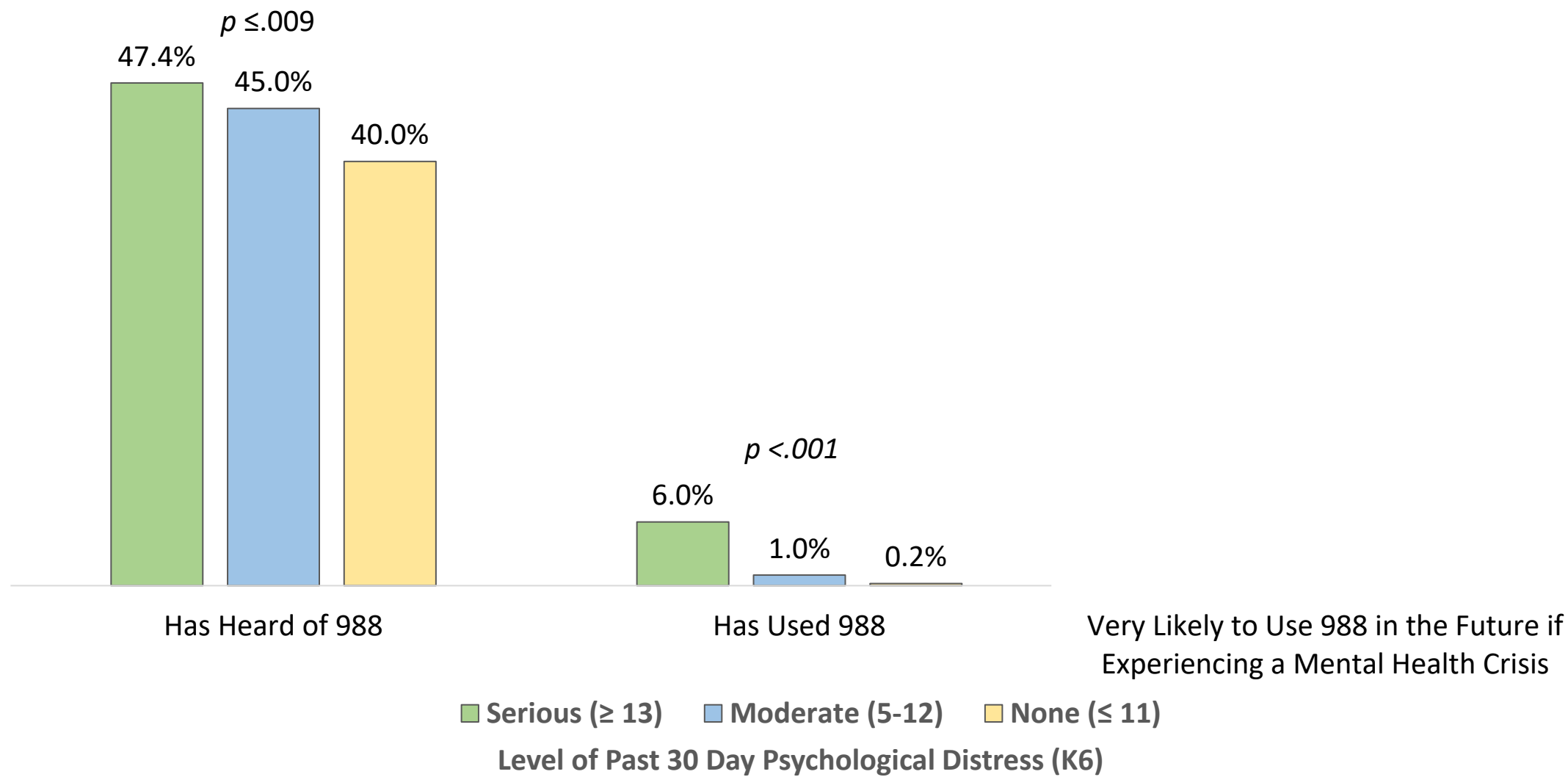
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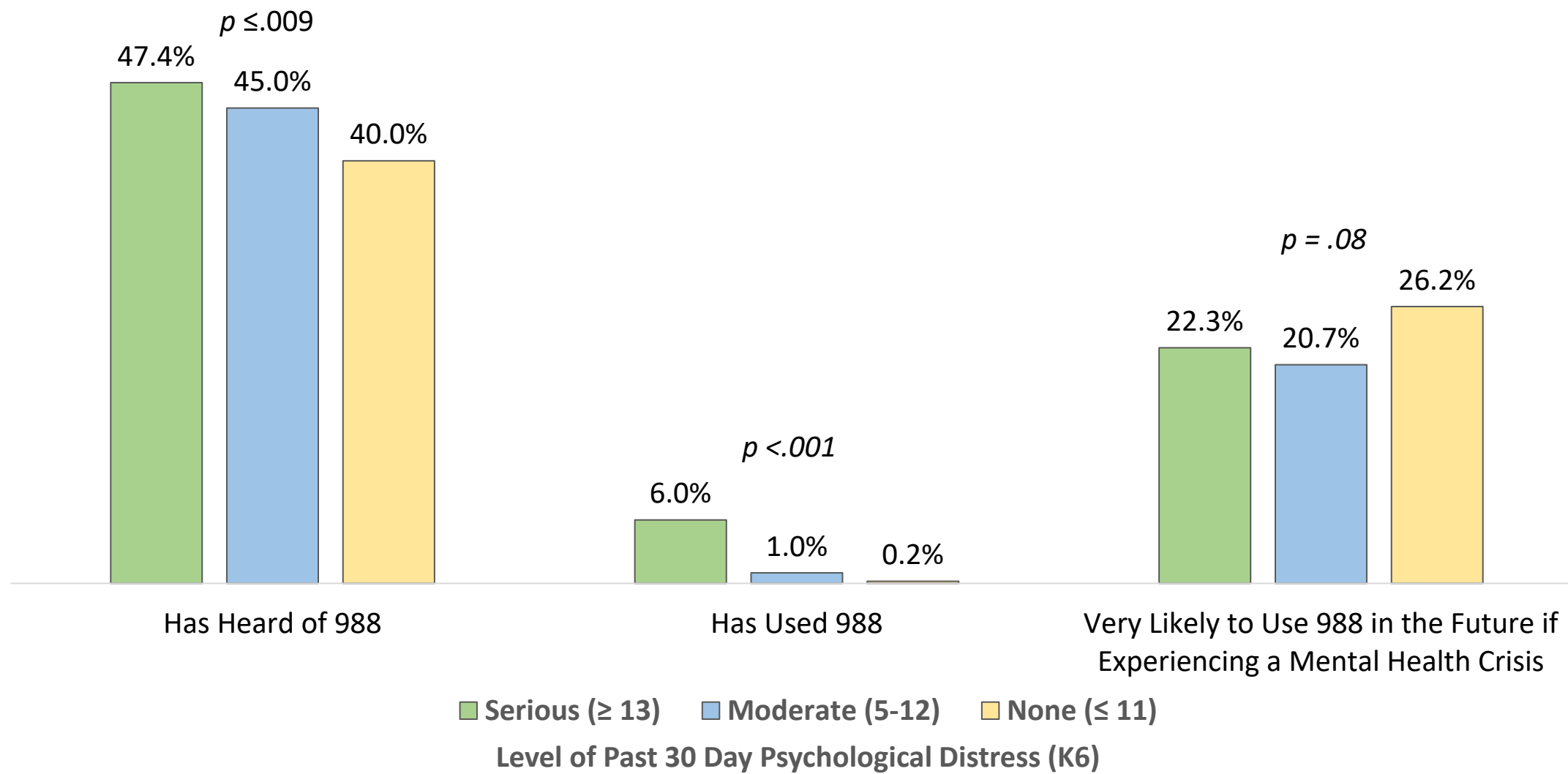
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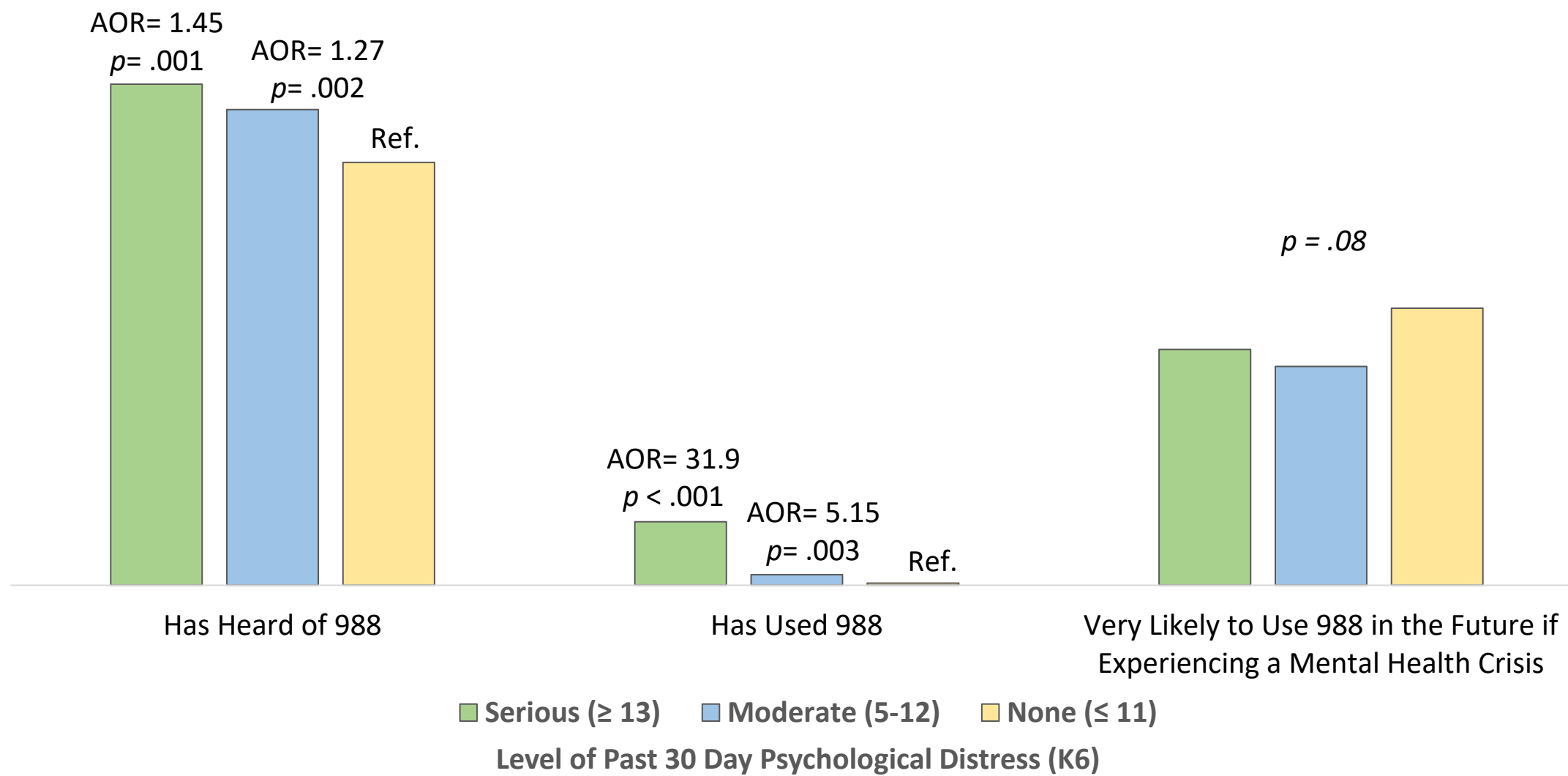
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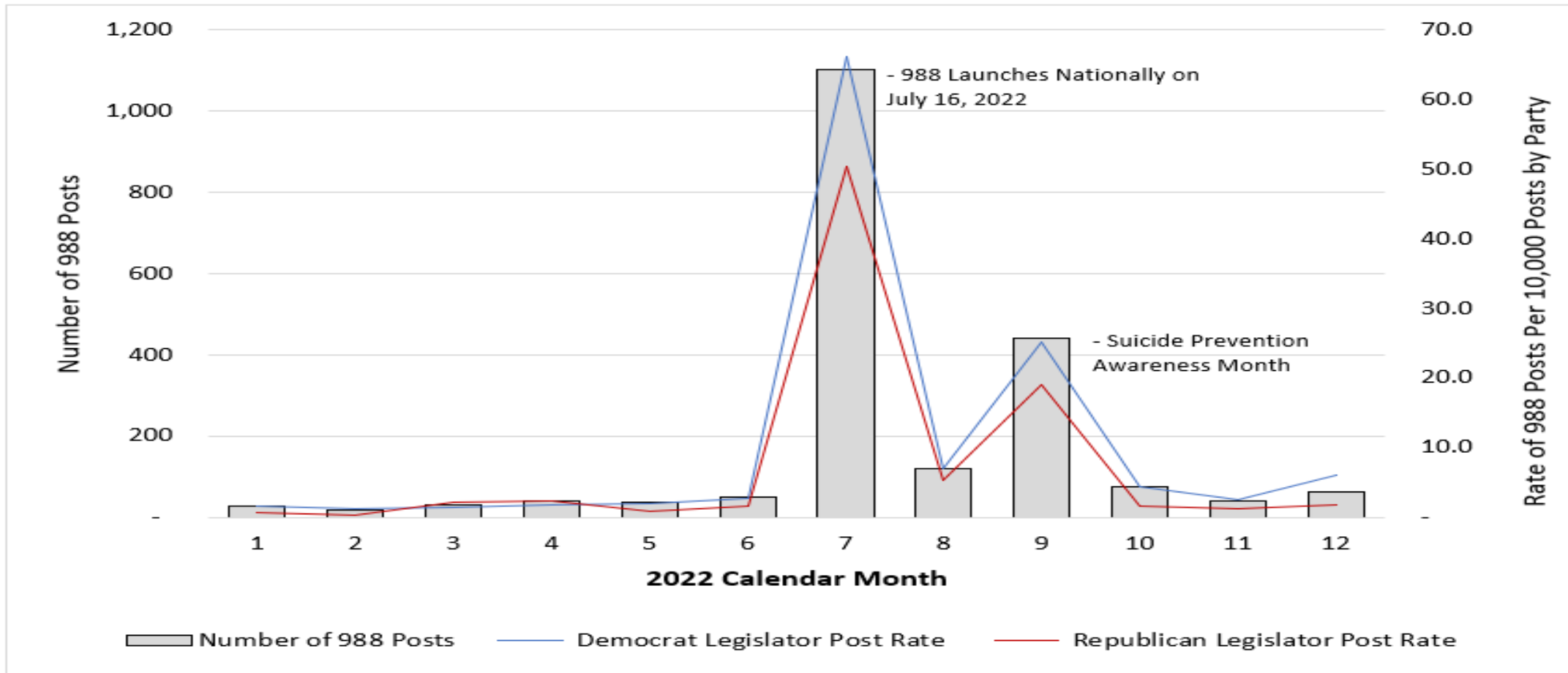
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# State Legislators' Social Media Posts about the 988 Suicide & Crisis Lifeline (2022)



Purtle, J., Soltero, M., Crane, M.E., McSorley, A.M., Knapp, M., Drapeau, C.W. State Legislators' Social Media Posts about the 988 Suicide & Crisis Lifeline. *JAMA Network Open*. In press.



# State Legislators' Social Media Posts about the 988 Suicide & Crisis Lifeline (2022)

Thematic Category	All 988 Posts (N= 2,041)	988 Posts, Democrats (N= 1,561)	988 Posts, Republicans (N= 466)	<i>p</i>
General news about 988	44.9%	43.0%	50.9%	.03
Encourages use of 988 among people in distress/ on behalf of loved ones	34.2%	35.0%	32.3%	.33
Mentions legislative/ government action related to 988	10.3%	10.2%	10.5%	.58
Mentions that 988 can be used for substance use issues	12.5%	13.5%	9.2%	.06
Includes statistics about suicide, mental health, or substance use issues	6.1%	4.5%	11.6%	<.001

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# Thank You!

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