

Building 988: An Opportunity to Build Inclusive Care Structures – Effectiveness of the Lifeline

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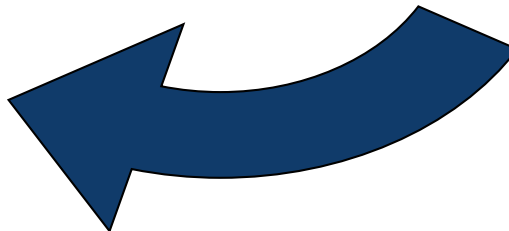
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- National crisis lines were first highlighted in the 2012 *National Strategy for Suicide Prevention*
- They have continued their prominent position in the 2021 *Surgeon General's Call to Action to Implement the National Strategy for Suicide Prevention*
- Yet, in 2001 when the first *National Strategy* was published, suicide crisis lines were noticeably absent.

ITERATIVE PROCESS BETWEEN EVALUATION FINDINGS AND PRACTICE

EVALUATION
STUDIES

LIFELINE/SAMHSA
PRACTICES



Major Evaluation Findings (I)

Effectiveness and Risk Assessments

- Seriously suicidal individuals reach out to telephone crisis services. (Gould et al., 2007)
- Callers' suicide risk (e.g., intent to die) is significantly reduced from the beginning to the end of the call. (Gould et al., 2007)
- Counselors at Lifeline centers were more likely to inquire about current suicidal ideation, recent ideation, and past attempts, and callers were more likely to experience reduced distress. (Ramchand et al., 2017)

Major Evaluation Findings (II): Imminent Risk

- Crisis counselors are able to secure the caller's collaboration on an intervention on over 75% of imminent risk calls. (Gould et al., 2016)
- On 19.1% of imminent risk calls, the counselors sent emergency services (police, sheriff, EMS) with the collaboration of the callers. (Gould et al., 2016)
- On a quarter of the imminent risk calls, the counselors sent emergency services without the caller's collaboration. (Gould et al., 2016)

Major Evaluation Findings (III): Imminent Risk and Follow-up

- Collaborative interventions not involving emergency services included getting rid of means, involving a third party, collaborating on a safety plan, and agreeing to receive follow-up from the crisis center. (Gould et al., 2016)
- “Third-party callers” calling the Lifeline when they are worried about someone deemed to be at imminent risk are provided a range of interventions which can supplement, and at times replace, calling 911. (Gould et al., 2021)
- Follow-up calls reduce suicidal individuals’ perceived risk of future suicidal behavior. (Gould et al., 2018)

Major Evaluation Findings (IV): Chat

- Almost 84% of LCC chatters endorsed either current or recent suicidal ideation on a pre-chat survey, which is markedly higher than the estimated 23% of Lifeline callers who are suicidal on the day of or the day before their calls. (Gould et al., in press)
- Two-thirds of chatters reported that chat was helpful and that they were significantly and substantially less distressed at the end of the chat intervention than they were at the beginning. Moreover, about half reported being less suicidal at the end of the chat. (Gould et al., in press)

Suggested Evaluations of 988 Going Forward

Questions about imminent risk callers/chatters/texters:

- How are imminent risk calls/chats/texts resolved? Including:
 - To what extent is imminent risk reduced during the course of the crisis intervention without needing additional services?
 - How often are 911 or police called by Lifeline crisis centers?
 - How often are mobile crisis teams and stabilization units used?
- To what extent is information shared between Lifeline crisis centers, 911, EDs, and other crisis and emergency services?
- What outcomes emerge after different types of dispatch and information sharing?
- Do dispatch and outcomes vary for different ethnic, racial, gender groups?

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