Minnesota Callers in 2018
to the National Suicide Prevention Lifeline

Of the 42,630 callers, **10,634 individuals** pressed "1" to be transferred to the Veterans Crisis Line and **283** pressed "2" for Lifeline's Spanish Language Line.

Ideally, the remaining **31,713 calls** in 2018 would have been **answered by Lifeline call centers in Minnesota**.

Of those, **only 8,858 calls (28%)** were able to be answered in-state.

Which meant **22,855 callers in crisis were unable to be answered** by Minnesota call centers.

**Established in 2005**

The National Suicide Prevention Lifeline is the nation’s most recognized suicide and mental health crisis line.

The Lifeline is not one large national call center. Instead, it is a network of 170 independently operated, independently funded local, regional, and state-level call centers. In 2018, there was only 1 Lifeline-affiliated center in Minnesota. However, in 2019 there are none.

In the event local centers are unable to answer, **the Lifeline re-routes calls to backup centers in our network (both in and out-of-state)**.

To participate in the Lifeline network, centers operate to the highest standards of suicide care. They do an incredible job of de-escalating crisis situations, decreasing emotional distress, and reducing suicidality.

**The number of Lifeline calls that needed answering by Minnesota call centers increased +140% from 2016 to 2018**

The Lifeline is administered through Vibrant Emotional Health and funded by the U.S. Substance Abuse and Mental Health Services Administration.
In 2019, there are 0 Lifeline network call centers in Minnesota.

Why were only 28% of 2018’s Lifeline calls in Minnesota answered in-state?

Lifeline call centers set the hours and coverage areas for when and where they will take Lifeline calls. They do this based on funding and staffing levels. Most Lifeline-affiliated call centers in the U.S. answer calls on other helplines in addition to the Lifeline. Despite their very best efforts, call volume can strain center capacity and callers may hang up while they wait for the next available counselor.

In 2018 there was only one Lifeline-affiliated call center in Minnesota. That center left the Lifeline network in June, 2018. All calls must now be routed out of state. This must change if residents in crisis are to get the care they deserve.

When calls are re-routed to centers out-of-state, Minnesota callers in crisis wait longer, they receive fewer linkages to effective local care, and they are more likely to abandon their calls.

Proven effective; needing support

The Lifeline’s hotline services have been shown by research to be effective, life-saving safety nets for those in crisis (Gould et al., 2007, 2013, 2015, 2017; Ramchand et al., 2016). According to a 2018 survey of Lifeline centers, almost 98% of the crisis calls are de-escalated such that costly, highly-restrictive responses from law enforcement and emergency medical services are not necessary.

The Lifeline is federally funded to manage the call routing, best practice standards, public messaging, capacity-building opportunities and technical assistance for its nationwide network. However, the funds that sustain our network’s crisis centers come from state, county and local sources. Many of our network’s centers are struggling to find enough funding and resources to operate and grow.

Having Minnesota-based, Lifeline-affiliated crisis call centers is a key component of city, regional and state behavioral health systems. Such centers serve as an entry point into other levels of coordinated care. They could provide critical services for people at serious risk, especially those with nowhere else to turn.

Minnesota needs Lifeline-affiliated crisis call centers.

You can advocate for this.

Please join the cause!

Reach out to your local decision-makers in Minnesota.

Learn more about the Lifeline by visiting: http://suicidepreventionlifeline.org/our-network/