

Massachusetts and the National Suicide Prevention Lifeline 2019



free and confidential support to people in suicidal crisis or emotional distress



80%

The Lifeline connects more than 80% of callers to a call center on the first routing attempt (within 30 seconds after the greeting)

and around **95%** on subsequent attempts (within 60-90 seconds after the greeting)



If a local center is unable to answer, the call is rerouted to one of our national backup centers.

Administered by **Vibrant** through a grant from **SAMHSA**

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SAMHSA Substance Abuse and Mental Health

Lifeline calls in Massachusetts

Lifeline-affiliated centers currently in Massachusetts

19 %

Massachusetts Lifeline Call volume has **increased 19 %** since 2016 In 2019, the Lifeline received nearly 2.3 million crisis calls across the United States



52,350 ^{ca}

calls were from Massachusetts

28,013 calls were connected to crisis centers in state



Of the 52,350 **callers**, 8,373 pressed "1" to be transferred to the **Veterans Crisis Line**

and 717 pressed "2″ for **the Spanish Language Line**



Why were only 65% of Lifeline's calls in **Massachusetts** answered in-state in 2019?



Investing in crisis centers is investing in your community

These call centers are key components of Massachusetts' behavioral health systems. They are a vital entry point for coordinated care, providing critical services for Massachusetts residents at serious risk

911=\$

A typical 911 call results in thousands of dollars in cost to taxpayers



Calls to Lifeline call centers cost a fraction of a 911 call

An emergency department visit or hospitalization is also much more costly



Emergency medical services are dispatched for only 2% of Lifeline calls, reducing the burden on law enforcement and emergency medical resources so they can better respond to other public safety needs

triaged with emergency services personnel

Callers to the Lifeline have better health outcomes than people in crisis who are

Over two thirds of our crisis centers provide suicide prevention and other mental health training within their communities

Investing in crisis centers puts money back into the community by supporting local resources, local research, workforce development and local businesses





- Allocate funding to support Lifeline call centers and suicide prevention activities in Massachusetts
- Consider expanding state and local investment in call centers when promoting use of the Lifeline
- Partner with local call centers for town halls and other community events
- Utilize suicide prevention and mental health expertise of call centers when crafting public policy
- Invite call centers to participate in task forces, roundtables, or other forums on mental health and suicide prevention

If a state or locality does not provide funding to a local crisis center, their ability to effectively serve all community members

is lowered. Lifeline call centers in Massachusetts set the hours

and coverage areas for when they will take Lifeline calls. They

affect crisis centers' capacity and longer wait times can occur. When a local call center is unable to answer, the call is routed

When calls are re-routed to centers out-of-state, Massachusetts callers in crisis often wait two to three times longer, receive fewer linkages to effective local care, and are more likely to

Despite their best efforts, periods of high call volume can

do this based on funding and staffing levels.

to one the Lifeline national backup centers.

abandon their calls.