South Dakota and the National Suicide Prevention Lifeline

What’s the Lifeline?

24/7

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)

95%

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.

180

Independent centers across the country

In 2019, the Lifeline received nearly 2.3 million crisis calls across the United States

2.3 million

Lifeline calls in South Dakota

1

Lifeline-affiliated centers currently in South Dakota

5,167

calls were from South Dakota

3,107

calls were connected to crisis centers in state

73 %

South Dakota Lifeline Call volume has increased since 2016

1,568

Of the 5,167 callers, 1,568 pressed “1” to be transferred to the Veterans Crisis Line

37

and 37 pressed “2” for the Spanish Language Line

Administered by Vibrant through a grant from SAMHSA
Why were only 87% of Lifeline’s calls in South Dakota answered in-state in 2019?

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 South Dakota set the hours and coverage areas for when they will take Lifeline calls. They do this based on funding and staffing levels.

Despite their best efforts, periods of high call volume can affect crisis centers’ capacity and longer wait times can occur. When a local call center is unable to answer, the call is routed to one the Lifeline national backup centers.

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

Investing in crisis centers is investing in your community

These call centers are key components of South Dakota’s behavioral health systems. They are a vital entry point for coordinated care, providing critical services for South Dakota 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

2% of our crisis centers provide suicide prevention and other mental health training within their communities

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

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

Callers to the Lifeline have better health outcomes than people in crisis who are triaged with emergency services personnel

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 South Dakota
• 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

Here's How You Can Help

To learn more about the Lifeline and the call centers in your state visit: www.suicidepreventionlifeline.org