



Arizona Crisis Line Survey Results

December 9, 2021



**Welcome and thank
you for being here!**

Meeting Logistics & Norms

- We are keeping equity and inclusion at the forefront.
- Everyone who is here today has unique and valuable perspectives. Let's make sure we create a safe space for people to share from their lived experiences.
- We will have several opportunities for you to share your thoughts throughout this meeting.

Note: we will share a summary from today to the group, but the full report is not public at this time.



The purpose of this meeting is to discuss some key results and implications from the Arizona Crisis Line Survey. We will also discuss how to use this information to lead to improvements.

There will likely be discussion about suicide and crises that some people may find upsetting or triggering. Please be kind to yourself by taking breaks as needed.

If you feel like you need additional support, you can reach out to the current National Suicide Prevention Lifeline number at **1-800-273-TALK (8225)** or find local crisis numbers here:

<https://www.azahcccs.gov/BehavioralHealth/crisis.html>

Goals for Today

Recognize

Recognize the contribution of those who responded to our survey with lived experience.

Share

Share some key results from the survey.

Discuss

Discuss implications and how to use this information to improve crisis systems and prepare for the 988 roll out.



INTRODUCTIONS AND 988
BACKGROUND



PRESENTATION OF SURVEY
METHODS AND RESULTS



DISCUSSION OF THESE
IMPLICATIONS

Agenda

What is 988?

The National Suicide Prevention Hotline Designation Act was signed into law in October 2020.

Beginning July 16, 2022, dialing “988” will route calls to the National Suicide Prevention Lifeline (Lifeline or NSPL), replacing the current phone number of 1-800-273-8255.

Anyone experiencing a mental health crisis or emotional distress will be able to call 988 for support (you do not have to be experiencing thoughts of suicide).

This does not replace Arizona’s crisis lines.

988 State Planning Grants

The grants were awarded to 50 U.S. states and territories. The grants were funded privately by Vibrant Emotional Health.

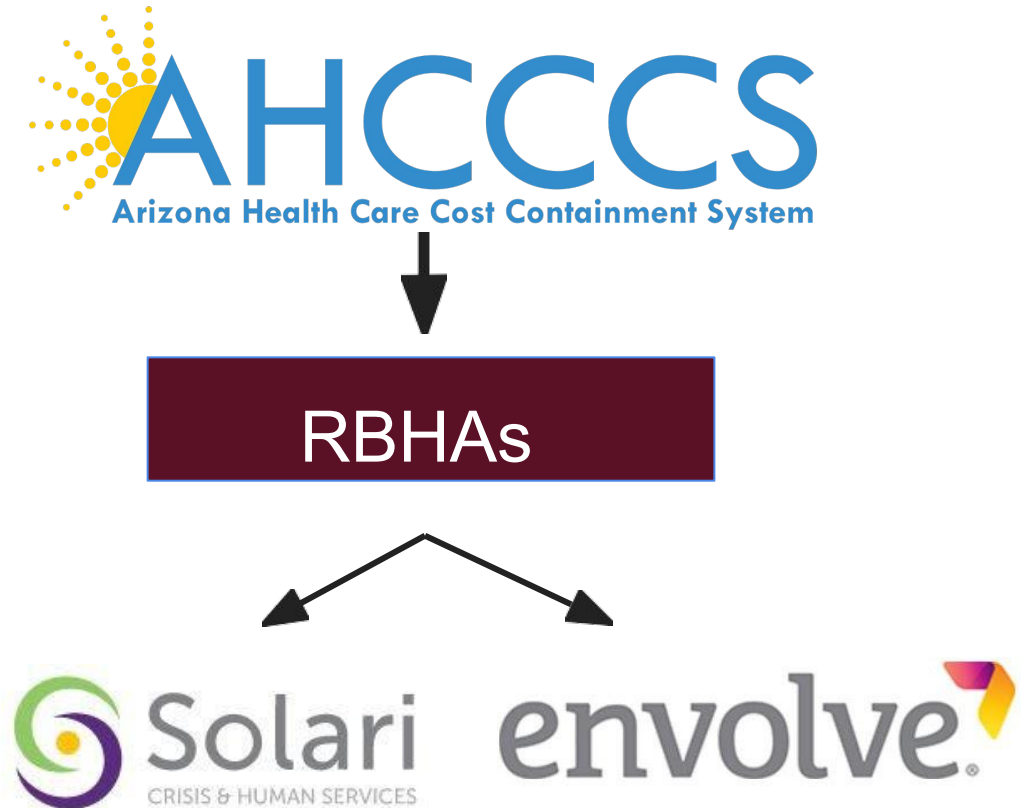
The focus of the 988 Planning Grant is to develop an **implementation plan** for how 988 calls will be answered by qualified National Suicide Prevention Lifeline centers and connected to community-based crisis services when needed.

The Lifeline & Arizona Crisis Lines

Current Lifeline Structure in Arizona



Current Arizona crisis line structure



Note: There will be a single, statewide crisis call center provider by October 2022.

988 Planning in Arizona

In Arizona, AHCCCS received the planning grant and worked with LeCroy & Milligan Associates (a local evaluation and research company) to gather input from a broad coalition of stakeholders about the 988 roll out.

We have hosted monthly stakeholder meetings since April 2021 and gathered feedback through other activities such as the Arizona Crisis Line Survey. The implementation planning is ongoing through January 2022 and beyond.

Survey Structure

LeCroy & Milligan Associates designed a survey to gather input from people who have lived experience with calling crisis lines and/or meeting with Mobile Crisis Teams. The survey had 49 questions, given through an online platform available in English and Spanish. The survey was piloted by 2 people with lived experience.

The purpose was to collect information about experiences contacting crisis lines, preferences about crisis lines, feedback on the crisis system, and interest in participating in other 988 planning efforts.

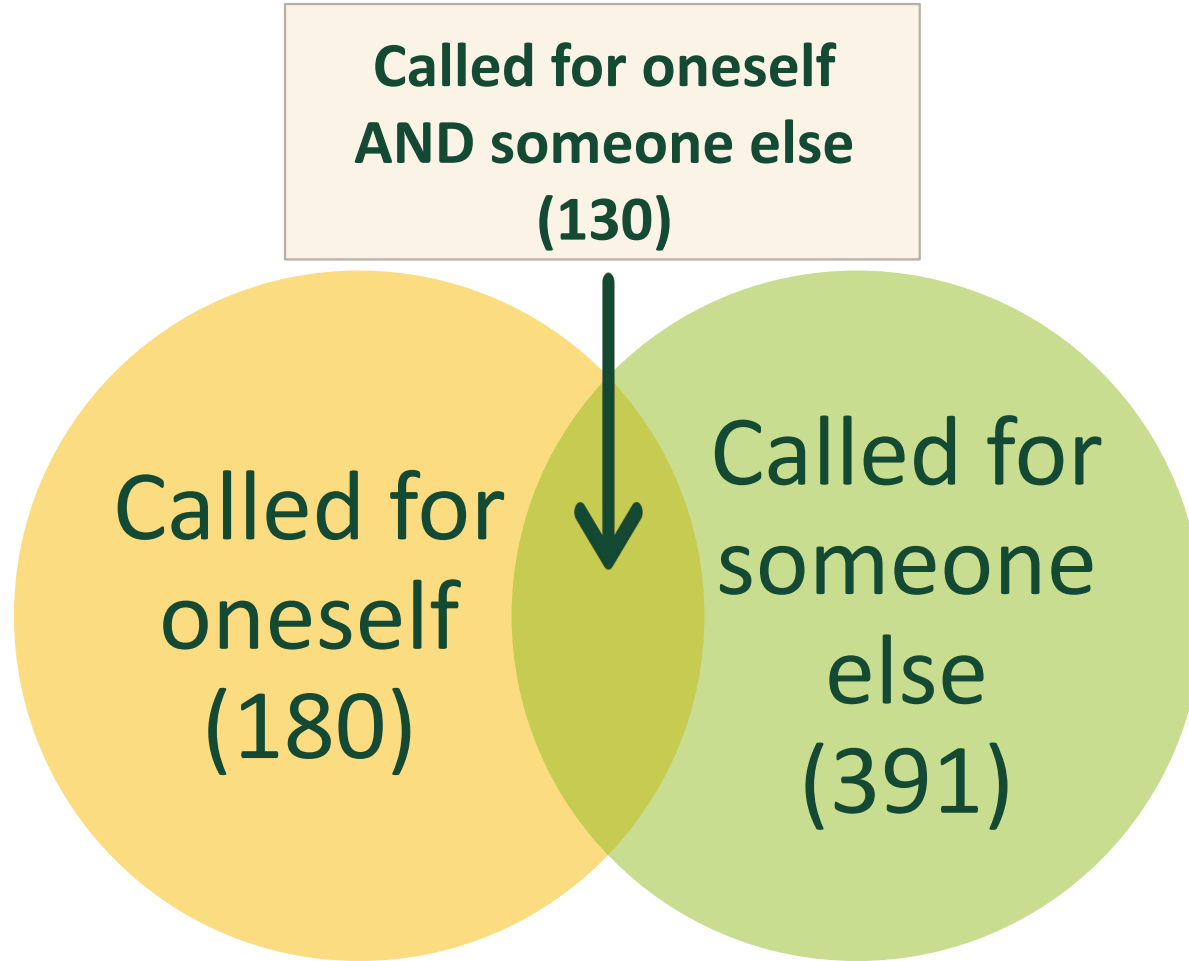
After filtering out incomplete surveys, we had **589** surveys to analyze.

Limitations

Like all surveys, there are limitations with the results:

- Not a representative or random sample.
- People are more likely to respond who had a highly negative or positive experience.
- Needed a device/internet connection to take online survey.
- More likely to take survey if already have a connection with AHCCCS.
- More individuals who responded had called as part of their job than anticipated (56%; 222 of 396).
- Fewer responses in Spanish than hoped (n=9).

Survey
Respondents:
Did you call
the crisis line
for yourself or
someone else?



Demographics among people who engaged with crisis system for themselves (n=180*)

80% identified as female.

43% had AHCCCS/Medicaid or another type of public insurance.

38% identified as Black, Indigenous, and People of Color (BIPOC).

24% identified as a person with a disability.

24% identified as a person in recovery from a mental health disorder.

19% identified as a suicide-attempt survivor.

13% identified as LGBTQ+.

Demographics among people who engaged with crisis system for another (n=391*)

72% identified as female.

41% were family members/friends of people living with behavioral health concerns.

33% identified as Black, Indigenous, and People of Color (BIPOC).

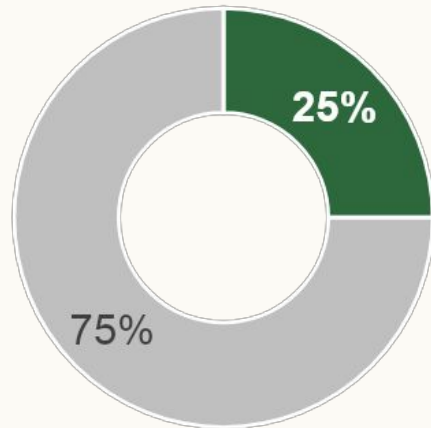
14% identified as a foster or adoptive parent.

9% identified as a suicide loss survivor.

7% identified as LGBTQ+.

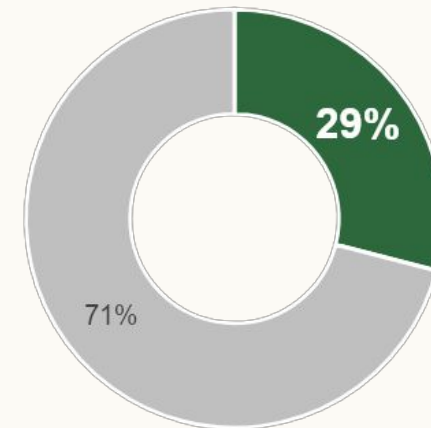
Over a quarter of survey respondents were from rural counties (counties other than Maricopa/Pima)

Individuals Who Engaged with the Crisis System for Oneself



■ Rural County ■ Urban County

Individuals Who Engaged with the Crisis System for Another



■ Rural County ■ Urban County

Survey respondents had experience calling many different crisis lines

The survey results do not reflect experiences with one specific crisis line:

- Almost half had called **more than one** type of line.
- 1 in 4 people with experience calling for someone else had **called 911** for a behavioral health emergency (1 in 5 calling for themselves).
- 59 respondents had called the **National Suicide Prevention Lifeline**.
 - By comparison: 169 had called Solari/Crisis Response Network; 80 had called the Community-Wide Crisis Line/Nursewise Crisis Line/Envolve

Top reasons for calling crisis lines:

When calling for oneself:

- (1) Depression.**
- (2) Anxiety.**
- (3) Thoughts of suicide or harming myself.**

When calling for another:

Concerns about the person's

- (1) Mental health.**
- (2) Substance use.**
- (3) Thoughts of suicide or suicide attempt.**

Reasons people do not call for help in a crisis

People who have engaged with the crisis system for themselves or for another

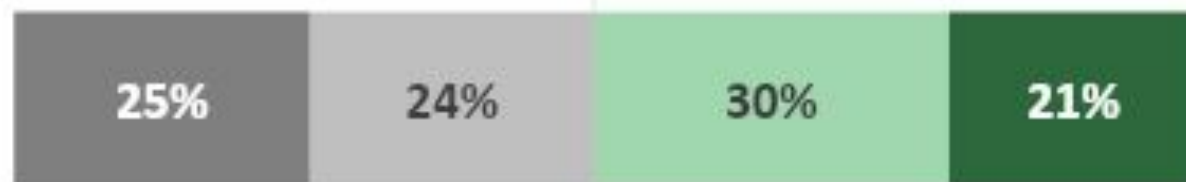
1. I had a negative experience when I contacted a crisis line in the past
2. I felt like no one would be able to help.
3. I was afraid that the crisis worker would send the police.

People who have never engaged with the crisis system

- Called another source of support (friend, advocate, social worker, etc.)
- Felt scared, embarrassed, or did not want others in their business.
- Concerned about possible implications of calling (leaving a record or it affecting their family)
- Fear of police response.
- Did not think it would help.

About half of survey respondents rated their overall experience calling crisis lines **negatively** and the other half rated them **positively**.

Called for self:



Called for someone else:



Legend:

- Very Negative
- Somewhat Negative
- Somewhat Positive
- Very Positive

Top positive experiences

Called for Oneself

- My call was answered quickly.
- I felt understood during the call.
- I felt calmer by the end of the call than at the start.

Called for Someone Else

- My call was answered quickly.
- The crisis worker offered to send a Mobile Crisis Team.
- I felt understood during the call.

Importance of empathy

Quotes from respondents:

- *The people that answer the phone are trained personnel that help many times over the phone where a team does not have to be sent out. They are also very familiar with the resources Valley Wide which is impressive.*
- *They are very caring. They make you feel like you really do matter. Also, they help you to get a psychiatrist if needed.*
- *They are patient and understand the situation.*
- *The crisis line and warm lines help to feel supported and safe.*
- *A crisis line helped us determine [...]the right decision for our daughter the first time she expressed suicidal ideations. [...]having a person reinforce your gut instinct is a great thing.*
- *Provided a fallback place to get information on resources close to me, helped me feel less alone [...] helped me stay calm and grounded, overall, I'm very grateful for them.*

Top Challenges

Called for Oneself

- My needs were not met.
- I waited on hold for what felt like a long time.
- My call kept getting transferred.

Called for Someone Else

- I asked for someone to come help in person, and I felt like I had to wait a long time.
- I waited on hold for what felt like a long time.
- My needs were not met.

Discussion

Survey respondents had very variable experiences with the crisis system overall.

What ideas do you have to help make sure people have more consistently positive experiences—no matter which number they call?

Preferences for call vs. chat vs. text



65% want the option to **call**.



43% want the option to **text**.



27% want the option to **chat**.



54% say **it depends** on the situation.

Text

- May be better for teens and youth
- Some people may not have available call minutes on a prepaid or similar phone plan
- It could be safer if the person calling for help is in a volatile situation and cannot say their needs aloud

Phone call

- Complexities of a crisis may be too difficult to articulate over text
- People may find comfort in talking to another empathetic person

Preferences for Phone Numbers

- Survey respondents commented on the **benefits of an easy-to-remember three-digit number (i.e., 988)** for mental health crises.
- **50%** of respondents preferred to just have a three-digit number to reach a crisis line. Stakeholders in Arizona should **prepare for increases** and shifts in call volume with the imminent roll out of 988, with the expectation that many more Arizonans will reach out to the National Suicide Prevention Lifeline at 988 than they do currently at 1-800-273-8255.

Market and promote crisis numbers and system better

- The two most common ways that people who answered the survey had learned what crisis phone number to call were 1) from behavioral health providers or 2) online
- Just less than half of respondents indicated it was “**hard to identify what number to call**”. In the open-ended comments, survey respondents described **confusion about which number to call**, which is particularly challenging during a crisis.

“I have no idea who to call other than the police, there’s all these numbers, but which one is best for a child?”

Wait times have a big impact on experience

- Many of the respondents who reported having a negative experience also reported feeling like they had to wait a long time to get help.
 - Long hold times on the phone
 - Calls transferred multiple times
 - Long wait times for Mobile Crisis Teams

Discussion

When we are in a crisis situation, our perception of time may be altered (seconds may feel like minutes, minutes like hours, etc.).

- Do you have any ideas about how to make waiting on hold more tolerable when calling a crisis line?

Crisis system context is important:

We need to improve behavioral health supports overall

Follow up

Called for Yourself

- 51% did not have any follow up
- 39% had someone call to check in
- 39% had someone meet with them in-person to follow up

Called for Someone Else

- 48% had a Mobile Crisis Team sent to meet with the person
- 31% did not have follow up
- 24% had someone call to check in

Requests for additional Mobile Crisis Teams

- Many survey respondents shared that they also felt like wait times for Crisis Mobile Teams (CMT) were too long.
- Some reports indicated that the situation escalated while waiting for CMT and then called 911 or went to the ER instead.

Need more Crisis services in rural areas

The survey indicated a theme regarding a need for additional crisis services in rural areas.

- Need more options in providers
- More Crisis Mobile Teams would be helpful
- Ensure equitable services in rural areas

Strong interest in specialized services

Groups identified in the survey with interest in specialized services:

- Children/Youth
- Rural areas
- Individuals with intellectual and/or developmental disabilities

Wrap up

Thank you to individuals who responded to our survey and shared their experiences with us honestly and openly.

This information can be used to inform both 988 implementation planning as well as ongoing improvements to the Arizona crisis system as a whole.

Upcoming Meetings

12/13 2:00-3:30 pm

**Feedback Session to inform 988
Implementation Plan**



Thank you!!