## Inside **Philanthropy**

## Mental Health Hotline's Launch Is Fast-Approaching. Philanthropy Can Help Make It a Success

March 24, 2022 Paul Karon



With the new national 988 mental health crisis phone number fast approaching its mandated July launch, mental health advocates are understandably focused on just what will happen when the number goes live and the phones start ringing. But since all 50 states have traditionally handled mental health and emergency services differently, there's no one-size-fits-all blueprint to determine what kinds of technologies, procedures and personnel that communities across the country need to put in place to create a system that can effectively handle these types of emergencies.

In part, the 988 number will take over from an existing emergency mental health emergency number—the National Suicide Prevention Lifeline. But mental health advocates and policymakers say the new crisis hotline presents a rare opportunity to transform the country's response to mental health crisis. But it'll take more than just setting up a new phone number. What's needed, experts say, is a "continuum of care" that can not only address immediate emergencies with trained professionals, but can also provide longer term supports that have the potential to prevent future crises and provide a pathway for people to successfully manage mental health issues.

Delivering on the promise of a successful 988 hotline that feeds into a full continuum of care is a huge task, of course, and the launch date is now just around the corner. The next several months before the deadline, and the critical months that follow, will require a tremendous amount of work and funding from multiple sectors and stakeholders. And though the rollout of 988 is a

multifaceted public initiative, experts say private philanthropy can play an important role in its adoption—as well as in the broader changes to mental healthcare that advocates are calling for.

Philanthropy can and should do a lot more to foster an effective continuum of care, and the payoff will be well worth it. Not only could such a care ecosystem more effectively treat patients, it would divert much of the response away from police and the criminal justice system. This would provide a number of benefits: It would free police from the burden of responding to emergencies they're not trained for. And it would (hopefully) eliminate some of the disparities experienced by minority communities whose mental health problems have been criminalized at higher rates.

No one expects the process of rolling out 988 to be easy, as IP made clear in our coverage from last year. For one thing, there's the question of money: States vary widely when it comes to how they're paying for the service. Some have passed bills allocating funding, while others haven't even proposed legislation.

"Communities are looking for financial support to scale this up," said Ben Miller, president of Wellbeing Trust, a mental health funder. "This is kind of an unfunded mandate. But our nation has underinvested in infrastructure for mental health, so when it comes to establishing a continuum of care, we are way behind the eight ball."

Beyond the money, there's also big unanswered questions about just what a 988 system and crisis response should look like, explained Lisa Dailey, executive director of Treatment Advocacy Center, a mental health advocacy organization. As is typical of federal legislation, the law that calls for 988 also doesn't give a lot of detail into exactly what states and communities need to, or ought to, put into place. "Every state has its own way of providing mental health services, so it's hard to come up with a plan that's applicable to all states."

But that doesn't mean every state is on its own—or should be—in implementing 988. To help local and state officials prepare for rollout of the hotline, an organization called the CEO Alliance for Mental Health (a collaborative of funders, advocates and professional organizations) has developed a roadmap for implementing 988 and a continuum of care in their communities. (Check out the full roadmap here: A Consensus Approach and Recommendations for the Creation of a Comprehensive Crisis Response System)

Meanwhile, Dailey at the Treatment Advocacy Center has plenty of advice on ways the philanthropic sector can help. This hoped-for evolution of the country's response to healthcare

needs is too big for philanthropy alone. But funders of mental health causes—really, health funders more broadly—can provide important assistance in several areas, Dailey said.

- Data: Philanthropy is positioned to collect and analyze data about local approaches to crisis and mental health response, to provide evidence-based guidance and recommendations that can be shared and scaled throughout the country.
- Workforce Development: An expanded continuum of care will need more trained professionals. Philanthropy can provide educational and professional training institutions with funds to expand programs. Some givers, such as Connie and Steve Ballmer, have already begun investing in such workforce development.
- Public Education: Crisis response and mental healthcare are complex, multifaceted issues. Philanthropy can help local health and other government officials understand what a continuum of care might look like, beyond merely implementing a new emergency number that connects to the same old imperfect resources.
- Capacity: If communities throughout the country create more mental healthcare resources—and manage, for example, to shift the burden of care from jails and prisons to healthcare facilities—then more beds, transportation and other facilities will likely be needed. Philanthropy can help fund development of that added capacity, and can do so faster than government sources of funding.

The launch of 988 almost certainly won't be smooth, just as the 911 emergency number took years to develop after its official launch. Philanthropy played an important role there, too. The 911 number started in 1968, but it developed over decades. In 1972, for example, the Robert Wood Johnson Foundation granted \$15 million across 32 states (over \$100 million in today's dollars) to help communities connect ambulance services and other responders into the system, among other measures. RWJF's role in 911 was considered crucial to its development. Philanthropy is going to have to step up to make 988 and an effective continuum of care necessary this time, as well.