



**American
Foundation
for Suicide
Prevention**

Greater Kansas

**Written Testimony in Support of HB 2281
House Health & Human Services Committee
February 15, 2022**

Chairperson Landwehr and Committee Members:

The American Foundation for Suicide Prevention (AFSP) Greater Kansas Chapter writes in support of House Bill 2281, which would implement the national 988 suicide and mental health emergency response system in Kansas. AFSP is the leading national not-for-profit organization exclusively dedicated to saving lives and bringing hope to those affected by suicide; our local Greater Kansas Chapter carries out this mission across the state through research, education, advocacy, and support. In 2020, we lost 531 Kansas residents to suicide, up from the 523 we lost in 2019. That same year, suicide was the 2nd leading cause of death for teens and young adults ages 15-34 and the 9th leading cause of death overall.

On October 17, 2020, President Trump signed the National Suicide Hotline Designation Act (S.2661) into law, designating "988" as "the universal telephone number for reaching a national suicide prevention and mental health crisis hotline system operating through the National Suicide Prevention Lifeline." 988 will be operational nationwide by July 16, although the 10-digit number (1-800-273-8255) will remain operational during and after the transition. The Designation Act also included language allowing each state to pass their own legislation funding 988 and their local in-state crisis call centers the same way as 911, through state-managed monthly customer service fees.

State support for and investment in crisis support systems and call centers within the Lifeline network is critical. While the Lifeline is a national program, federal funding is minimal for each center and largely goes toward managing call routing, best practice standards, public messaging, and technical assistance. Local crisis centers therefore rely on funding from state and local contributors to operate and grow.

As the July launch date nears, Kansas must invest in our local crisis call centers and the continuum of community crisis services that can support callers needing an in-person response. An appropriately resourced 988 system consists of immediate access to an effective and coordinated system of suicide prevention crisis services – crisis call centers are the hub of this integrated system which also includes access to mobile crisis teams and crisis stabilization centers.

The transition to 988 is anticipated to result in a significant increase in crisis center call, chat, and text volume -- the number is easier to remember, Kansas residents continue to face pandemic-related stressors, and there will be a national marketing campaign to inform the public about the change. Reliable, sustainable funding will be needed from multiple sources, including federal, state, and local contributors, for Kansas' crisis service systems to continue to operate and expand to meet growing community crisis needs.

HB 2281 would implement a 988 service fee to support the implementation of 988, as outlined by the unanimously acclaimed National Suicide Hotline Designation Act. The “provision of acute mental health, crisis outreach and stabilization services” set forth by the federal law and advanced by HB 2281 includes “personnel and behavioral health, crisis outreach and stabilization services with emphasis on expanding services to rural areas,” “[the provision of] mobile crisis response services for persons with intellectual or developmental disability; and [the provision of] mobile crisis response services for behavioral health needs.” Fee revenue should supplement, not supplant, funding from diverse sources.

When in-state call centers are unable to answer calls to the Lifeline, callers get re-routed to other centers out-of-state and into the Lifeline’s National Backup Network. This can result in longer wait times and fewer linkages to effective local care. In contrast, in-state crisis centers connect callers to local counselors who are familiar with the community and better equipped to provide culturally competent support and referrals to local community resources and other lifesaving follow-up care.

Mobile crisis response is crucial for the implementation of 988 in Kansas. The Sunflower State currently does not have the capacity to provide mental health crisis response when individuals calling 988 need in-person interventions. This responsibility falls upon emergency responders, most commonly law enforcement officers who are often not trained in managing a suicide or mental health crisis. An average of 10% of law enforcement agencies’ total budgets was spent responding to and transporting persons with mental illness. And research shows that over 20% of total law enforcement staff time is spent responding to and transporting people with mental illness. ¹

A 988 crisis services system that is effectively resourced and promoted will reduce healthcare spending with early intervention, reduce the burden on emergency rooms and law enforcement, and improve outcomes for individuals experiencing a suicide or mental health crisis. It will also ensure more equitable access to and fill gaps in the current crisis response system, particularly those that affect rural and underserved communities.

Members of the Committee, we all have a role to play in preventing suicide, and with your support, passage of this legislation will affirm the state’s commitment to improving the lives of Kansas’ residents and their loved ones and to preventing the tragic loss of life to suicide in the future. Thank you for the opportunity to submit testimony in support of HB 2281. The AFSP Greater Kansas Chapter is grateful for your consideration of this critical bill and strongly urges your support.

Sincerely,



Barbara Mares
Area Director
AFSP Greater Kansas

¹ Road Runners: The Role and Impact of Law Enforcement in Transporting Individuals with Severe Mental Illness. (Treatment Advocacy Center, 2019). <https://www.treatmentadvocacycenter.org/road-runners>