



National American Indian and Alaska Native

MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

IOWA

SAMHSA
Substance Abuse and Mental Health
Services Administration

988 National Crisis Number A Tribal Outreach Approach

August 24, 2022

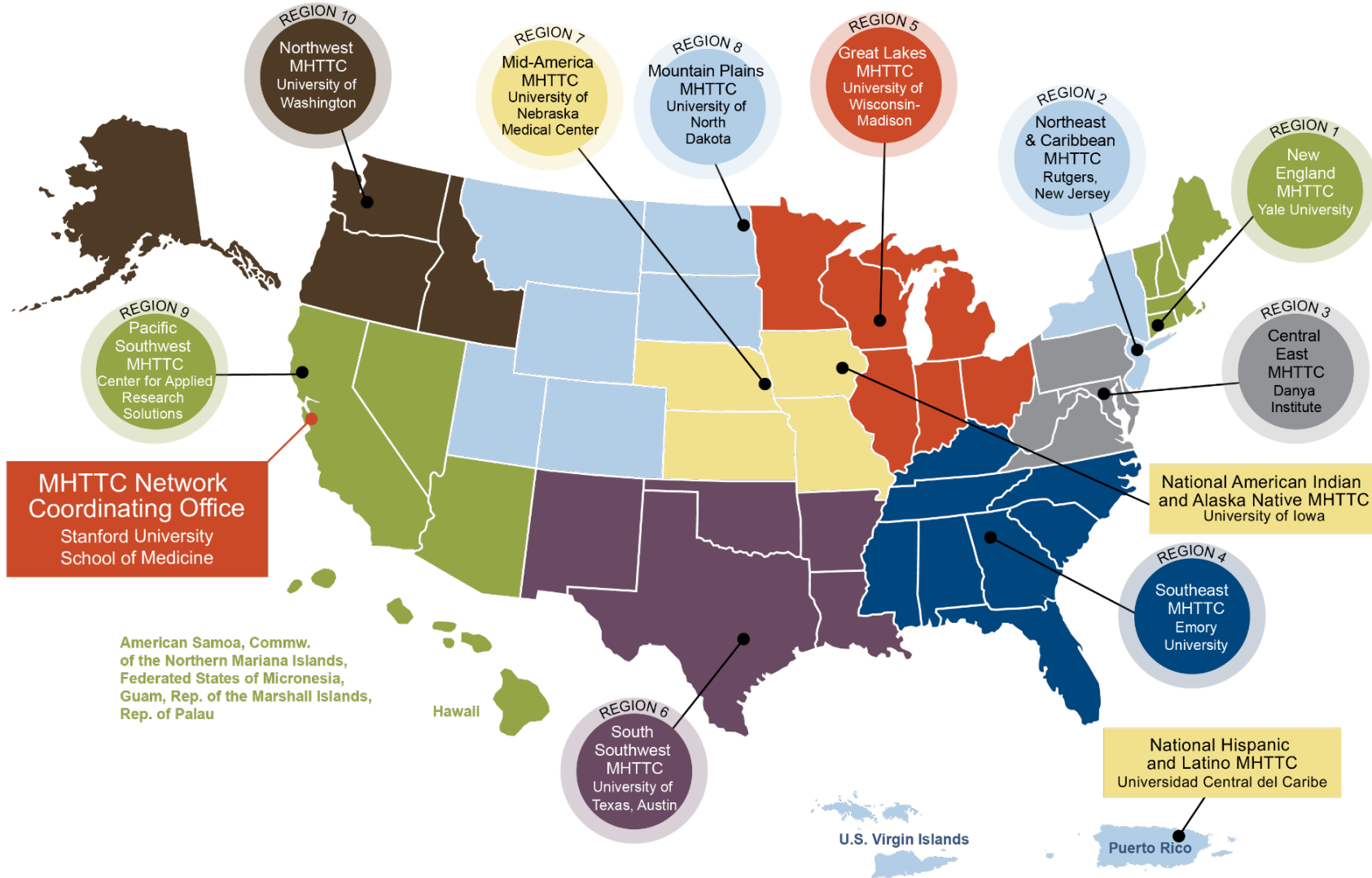


MHTTC

Mental Health Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration

MHTTC Network

American Indian & Alaska Native Mental Health Technology Transfer Center





Substance Abuse and Mental Health
Services Administration

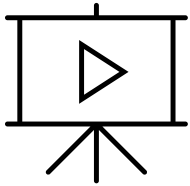
The National American Indian and Alaska Native Mental Health Technology Transfer Center is supported by a grant from the Substance Abuse and Mental Health Services Administration (SAMHSA).

The content of this event is the creation of the presenter(s), and the opinions expressed do not necessarily reflect the views or policies of SAMHSA, HHS, or the American Indian & Alaska Native MHTTC.

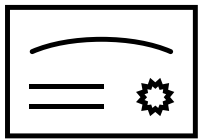


Follow-up

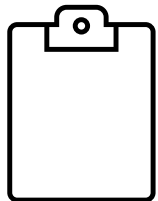
Following today's event, you will receive a follow up email, which will include:



Links to the presentation slides and recording, if applicable



Information about how to request and receive CEUs if applicable



Link to our evaluation survey (GPRA)

Land Acknowledgement

We would like to take this time to acknowledge the land and pay respect to the Indigenous Nations whose homelands were forcibly taken over and inhabited.

Past and present, we want to honor the land itself and the people who have stewarded it throughout the generations.

This calls us to commit to forever learn how to be better stewards of these lands through action, advocacy, support, and education.

We acknowledge the painful history of genocide and forced occupation of Native American territories, and we respect the many diverse indigenous people connected to this land on which we gather from time immemorial.

While injustices are still being committed against Indigenous people on Turtle Island, today we say thank you to those that stand with Indigenous peoples and acknowledge that land reparations must be made to allow healing for our Indigenous peoples and to mother earth, herself.

Dekibaota, Elleh Driscoll, Meskwaki and Winnebago Nations

Ttakimaweakwe, Keely Driscoll, Meskwaki and Winnebago Nations

Ki-o-kuk, Sean A. Bear, 1st. Meskwaki



Today's Speakers:

Ray Daw (Diné, Navajo), MA, is a Native behavioral health consultant. His career has been largely within and around the Navajo Nation, Native non-profits, and most recently in rural Alaska, in both inpatient and outpatient settings. His work in behavioral health has been geared heavily towards developing Native trauma-appropriate approaches that are healing and effective in tribal behavioral health prevention, intervention, and treatment services. Ray has extensive experience as a consultant with SAMHSA in program development and evaluation, culturally based prevention and intervention services, public policy, grant reviewing, and AI/AN modalities, along with training in motivational interviewing and historical trauma.



Today's Speakers:

Stephine “Steph” Poston (Pueblo of Sandia)

Owner, Poston & Associates, LLC

“Steph” was born and raised on the Sandia Pueblo Indian Reservation. She worked for her tribe for eleven years before launching Poston & Associates, a full-service communications firm. She inspires clients to draw from core values, imagine what success looks like and create strategic paths forward. She is committed to uplifting the Native American narrative through positive representation in the media. Steph’s expertise includes strategic facilitation, capacity building training, leadership development, strategic communication and event planning. She has worked with numerous tribes and tribal entities in New Mexico and throughout Indian Country on public relations and marketing campaigns, sacred site protection, voter empowerment, water rights, tribal policy development, economic development, education and healthcare.

She is a co-founder of Native Women Lead and is the current Chairwomen of the Southwestern Association for Indian Arts that hosts Indian Market.

Recent acknowledgment includes:

2018 Small Business Champion (SCORE)

2018 University of New Mexico, Anderson School of Management Hall of Fame

2017 Native Woman Business Owner of the Year (NCAIED)

2016 New Mexico Women of Influence

She has two son’s Marcus and Jon and enjoys golf, travel, yoga and audio books. She recently contributed to Indigenous Women Entrepreneurs of New Mexico: Surpassing Barriers and Stereotypes.



Today's Speakers:

Sindy Bolaños-Sacoman, MPH is the Owner and CEO of SBS Evaluation & Program Development Specialists, LLC and the Director and Co-Founder of the New Mexico Tribal Behavioral Health Provider's Association. Ms. Sacoman has over 20 years of experience in the field of program evaluation, grant writing, training, strategic planning and program management. She has worked with various Tribal communities local and nationally, universities, state and local government agencies, federal agencies and internationally. Her current work has focused on substance use prevention, SUD and OUD treatment, Medicaid, 988 initiative, Law Enforcement Diversion, Screening, Brief Intervention, and Referral to Treatment, Crisis Mobil Services, Children in state custody, early childhood education and general public health initiatives. Her interests include quantitative and qualitative methods, healing from trauma, community readiness, capacity building, prevention and treatment, fidelity to evidence-based programming, participatory research, policy, government relationships (federal and tribal), and empowerment.



988 New Mexico Tribal Outreach



Thank You!



Poston & Associates, LLC - Team

Steph Poston (Pueblo of Sandia)

Ray Daw (Navajo)

Holly Patterson (Navajo)

Sunshine Eaton (Pueblo of Tesuque)

JoAnn Padilla

988 Campaign Core Values



Respect

Patience

Resourcefulness

Hopefulness

Compassion

Wellness

988 Campaign Goals

1. Let people know -
AWARENESS
2. Normalize asking for
help
3. Provide access to
behavioral health
tools





The audience

1. Tribal Leaders (government to government, policy)

- 988 workgroup
- Tribal consultation on June 24th
- Upcoming fall session

2. Service Providers

3. Consumers



Approach

1) Pre-launch

- ❖ High touch/direct outreach community engagement
- ❖ Strong social media presence
- ❖ Some billboards
- ❖ Tens of thousands of postcards distributed
- ❖ Flyers
- ❖ Some tabling

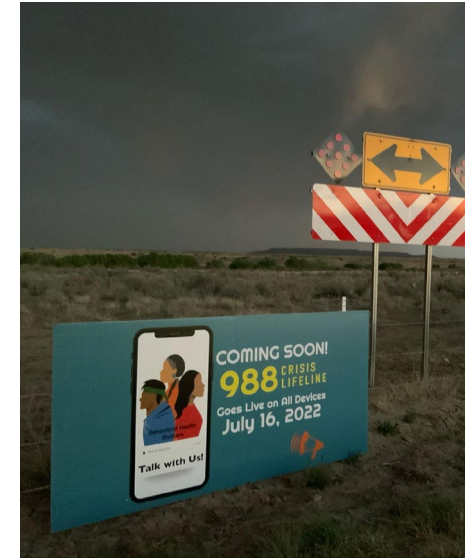
2) Soft launch for refining, retooling

3) Post launch: more billboards, radio ads, refine collateral material



Service Providers and Consumers

- 988 pre-launch outreach/marketing turbo mode since mid May 2022
- Direct outreach to tribes
- Tribal consortiums (Five Sandoval, Eight Northern, APCG, etc.)
- Collaboration with NM Indian Affairs & NM Tribal Behavioral Health Providers Association
- Native Community Health Network
- Youth – Native Health Initiative, SFIS, NACA
- Santa Fe Indigenous Center
- Americans for Indian Opportunity (EPICS, NAPPR, NICOA, etc.)
- **988 Training**

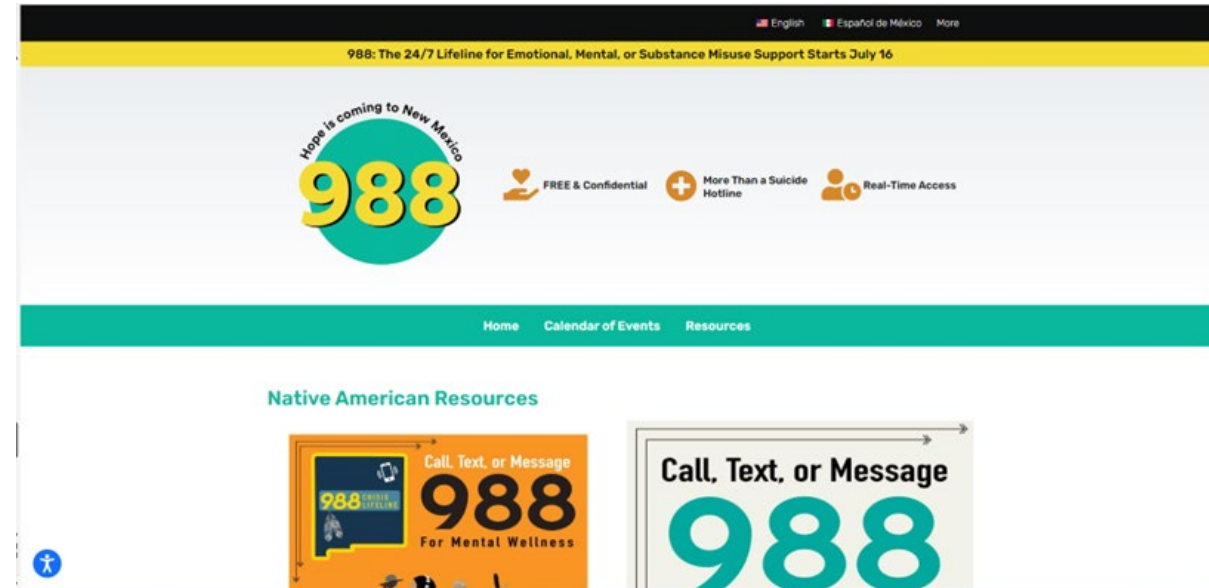


Direct outreach...



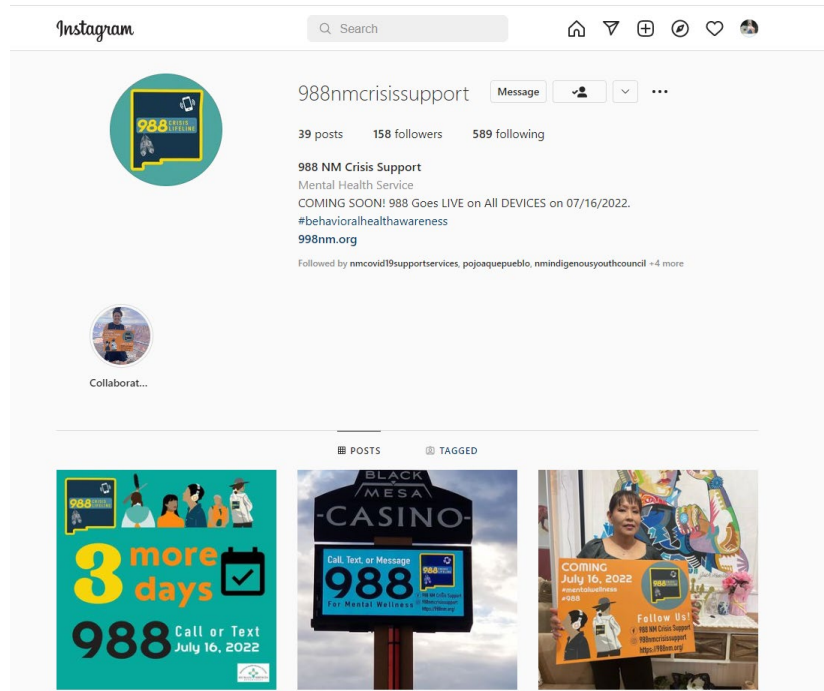
Billboards

https://988nm.org/



The Request

1. Get the information out
2. Follow our socials
3. Feedback (survey)



Why We Are
Here?

Thank you!





HUMAN
SERVICES
DEPARTMENT

988 BEHAVIORAL HEALTH CRISIS LINE



Master slides compiled by Serna Solutions

Emily Everhart, LMHC

Brian Serna, LPCC, LADAC

Modified and Adapted by SBS Evaluation & Program Development Specialists,

Sindy Bolaños-Sacoman, MPH



SERNA SOLUTIONS
Counseling • Coaching • Consulting

TRIBAL OUTREACH



988 Overview

What is 988

How does 988 differ from 911

What is a Behavioral Health Crisis

Overview of the Ideal Crisis Now System

Data privacy

Overview of Mobile Crisis Teams

Overview of Crisis Triage Centers

Known Limitations and Challenges for Tribal Communities

4-Hour Onsite Interactive Planning Session

Community's readiness to respond to crisis

NM 988 in collaboration with Tribal Crisis Response



WHAT IS 988?

- 988 is a coordinated national effort to support 911 crisis intervention diversion for behavioral health emergencies.
- Beginning July 16, 2022, 988 will be the new three-digit dialing code connecting people to local Behavioral Health response centers.

WHAT IS A BEHAVIORAL HEALTH CRISIS?

Reasons for calling the hotline include thoughts of suicide, mental health or substance use crisis, or any other kind of emotional distress.

People can also dial 988 if they are worried about a loved one who may need crisis support.

WHAT MIGHT A BEHAVIORAL HEALTH CRISIS LOOK LIKE?

Someone who feels overwhelmed due to an event like:

Losing their job

Feeling lonely or isolated

Losing a relationship

When substance abuse reaches a breaking point – for the caller or a loved one

Running out of psychiatric medications w/o access to refill

Experiencing a traumatic event or witnessing one





911 DIVERSION TO 988 IS MORE EFFECTIVE

- Americans do not believe those having a mental health crisis should be taken to jail or into police custody for help, which happens frequently in many communities.
- The goal is to respond to behavioral health emergencies with trained behavioral health professionals rather than law enforcement.

AND MORE FISCALLY RESPONSIBLE

- Additionally, expensive ambulance trips & hospitalizations can decrease, reducing the burden on healthcare systems and allowing access to care in the least restrictive way.

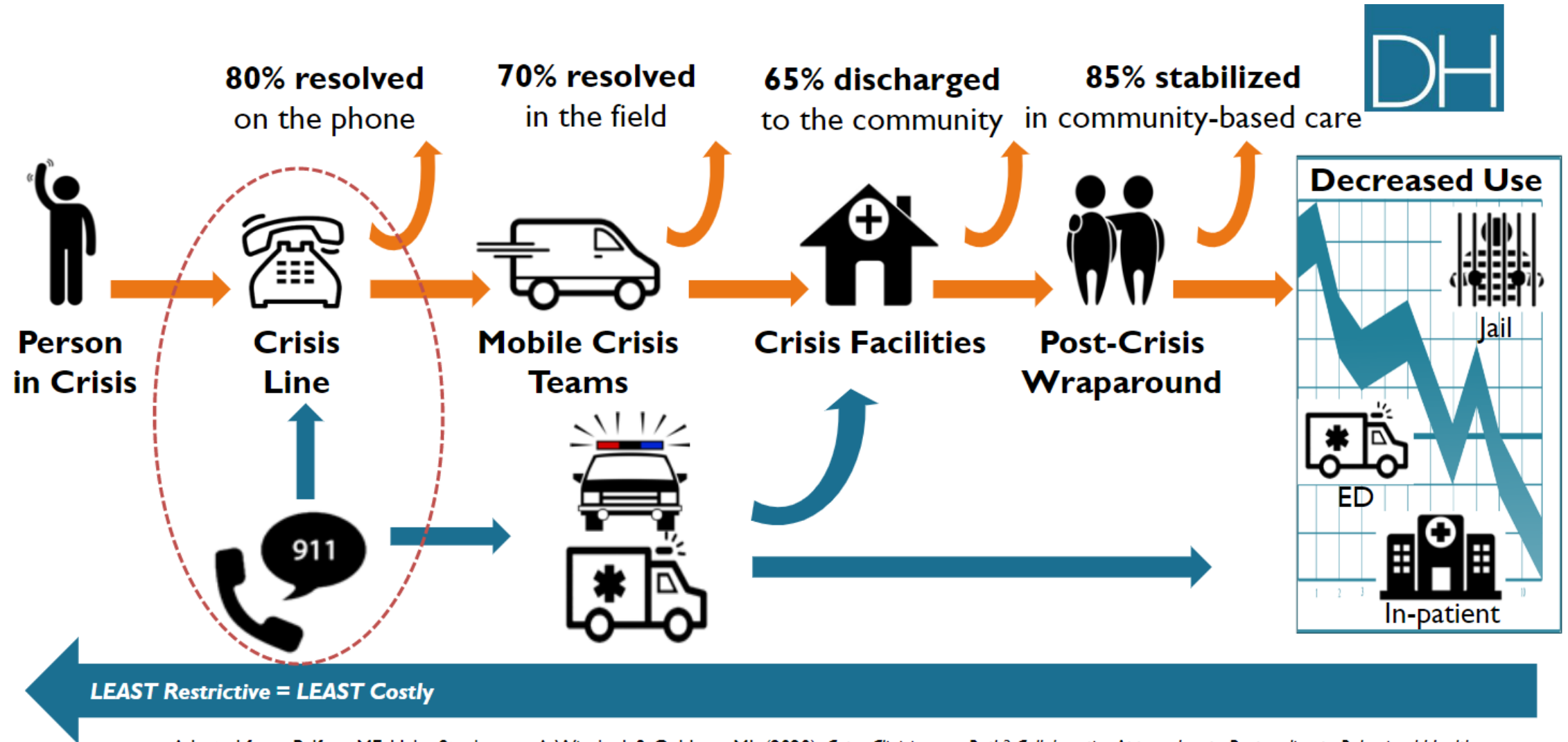


HOW IS 988 DIFFERENT FROM 911?

- 911 focuses on dispatching Emergency Medical Services like fire, paramedics and police as needed.
- 988 focuses on mental health and addiction crisis services dispatching trained behavioral health professionals.



HOW WILL 988 COORDINATE WITH 911?



Adapted from: Balfour ME, Hahn Stephenson A, Winsky J, & Goldman ML (2020). *Cops, Clinicians, or Both? Collaborative Approaches to Responding to Behavioral Health Emergencies*. Alexandria, VA: National Association of State Mental Health Program Directors. <https://www.nasmhpd.org/sites/default/files/2020paper11.pdf>

WHO CAN ACCESS 988?

- Starting July 16, 2022, anyone who needs behavioral health-related crisis support can access 988 through voice, chat or text.
- 80% of Calls go to our local crisis line, New Mexico Crisis and Access Line or (NMCAL). The 20% who are routed elsewhere are often veterans (who have their own dedicated crisis line), and if they speak Spanish they get routed to one of three nationwide Spanish speaking crisis call centers.
- Persons with hearing challenges can use the NM CAL TTY Line: 1-855-227-5485 .



WHAT LANGUAGES WILL 988 SERVICES BE AVAILABLE IN?

- 988 currently provides live crisis center calling services in English and Spanish and uses Language Line Solutions to provide translation services in over 250 additional languages. Text and chat are currently available in English only.

WHAT HAPPENS WHEN SOMEONE CALLS 988?

- Starting July 16, 2022, when calling 988, callers first hear a greeting message while their call is routed to the local location in a network of crisis centers (based on the caller's area code).
- A trained crisis counselor will answer the phone, listen to the caller, understand how their problem is affecting them, provide support, and share resources if needed. If the local crisis center is unable to take the call, the caller will be automatically routed to a national backup crisis center.





WHAT HAPPENS WHEN SOMEONE TEXTS 988?

- Text (English only) will be available through 988 by July 16, 2022. When someone texts “**Talk**” to 988, they will be responded to by a group of Lifeline crisis centers that respond to chat and text. This service will expand over the next few years to increase local and state level response.



WHAT HAPPENS WHEN SOMEONE CHATS WITH 988?

- Chat (English only) is available through the Lifeline's website

<https://suicidepreventionlifeline.org/chat>

- People seeking chat services will be provided a pre-chat survey before connecting with a counselor that identifies the main area of concern. If there is a wait to chat with a crisis counselor, a wait-time message will appear.

WHAT ABOUT
PRIVACY?

WILL
GEOLOCATION
BE USED?



- Currently, the Lifeline automatically routes calls by area code to the nearest crisis center (unlike 911, which uses geolocation).
- This protects privacy but creates other problems since many people keep their old phone numbers even after living in a new area code for many years.



DATA PRIVACY OF 988 USERS



PEOPLE CONTACTING 988 ARE NOT REQUIRED TO PROVIDE ANY PERSONAL DATA TO RECEIVE SERVICES. SAMHSA RECOGNIZES THE IMPORTANCE AND THE EXPECTATION OF PRIVACY WHEN A PERSON CONTACTS 988. THE NETWORK SYSTEM HAS SEVERAL SAFEGUARDS TO ADDRESS CONCERNS ABOUT PRIVACY.



ANY EFFORT TO OBTAIN DEMOGRAPHIC INFORMATION FROM THOSE WHO USE 988 WILL SERVE THREE PRIMARY PURPOSES: 1) TO SAVE LIVES; 2) TO CONNECT PEOPLE TO ONGOING SUPPORTS; AND 3) TO EVALUATE SYSTEM NEEDS AND PERFORMANCE, PARTICULARLY ENSURING THAT GAPS AND INEQUITIES ARE BEING ADDRESSED.

QUESTIONS?



Contact Informaion:
Sindy Bolaños-Sacoman, MPH
sindysacoman@gmail.com
505-818-8021



SERNA SOLUTIONS
Counseling • Coaching • Consulting

Slides compiled by Serna Solutions

Emily Everhart, LMHC

Brian Serna, LPCC, LADAC

Modified and Adapted by SBS Evaluation & Program Development Specialists,

Sindy Bolaños-Sacoman, MPH