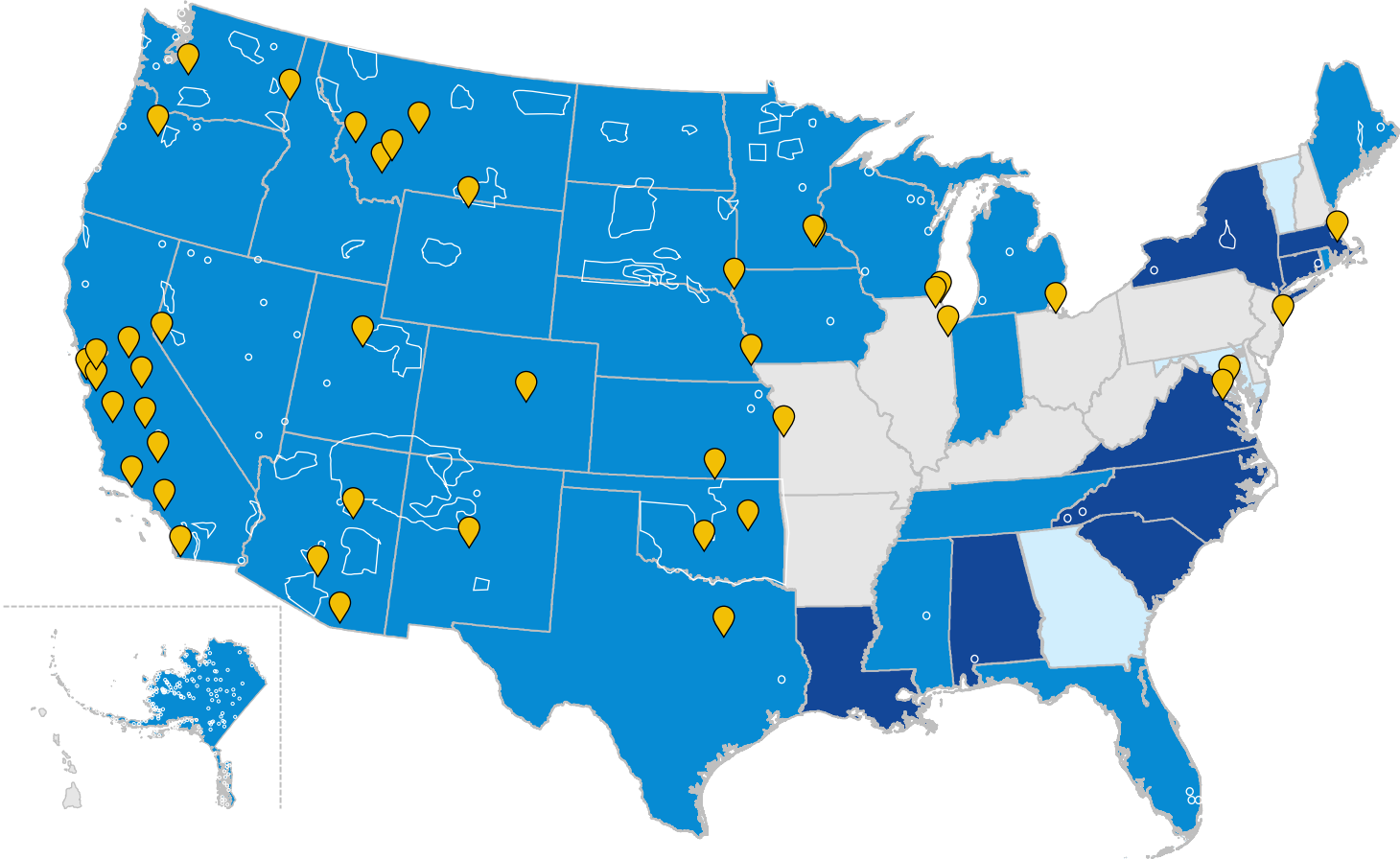


Individuals identifying as AI/AN reside in every county of all 50 states, with 39 states having recognized tribes

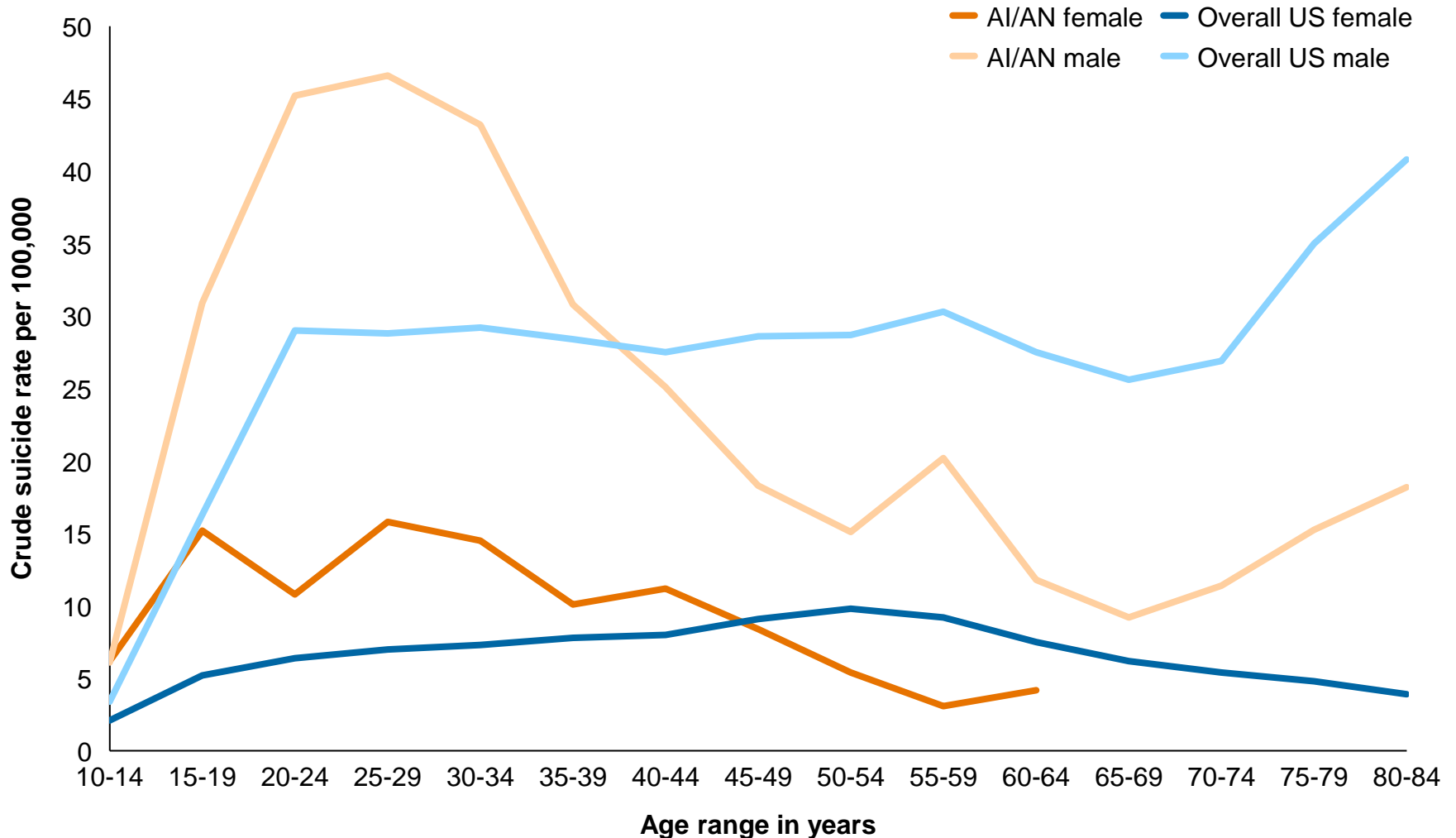


■ States with federally recognized tribes ■ States with state recognized tribes ■ States with both federally and state recognized tribes *White outlines indicate land areas of federally recognized tribes*

70% of individuals identifying as AI / AN live in urban areas. 📍 indicates presence of Urban Indian Organizations

Source: Bureau of Indian Affairs Federally Recognized Tribes, Tribal National Conference of State Legislatures State Recognition of American Indian Tribes, Bureau of Indian Affairs U.S. Domestic Sovereign Nations: Land Areas of Federally-recognized Tribes map, Indian Health Services Office of Urban Indian Health Programs

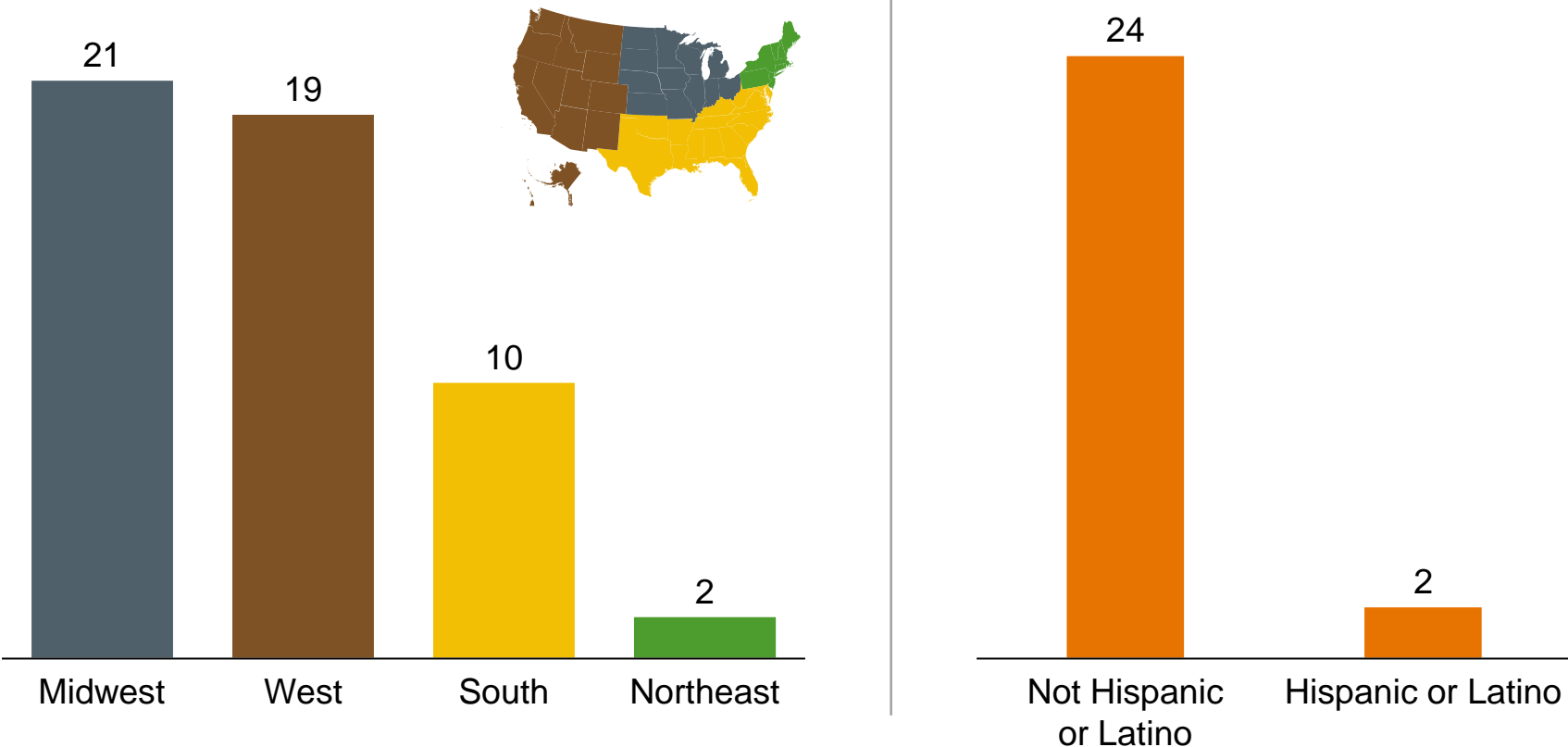
Suicide mortality rates of individuals who identify as AI/AN are higher than overall US rates, with notable variations by gender and age



Source: 2018-2021 CDC National Center for Health Statistics, National Vital Statistics System, Provisional Mortality on CDC WONDER Online Database, based on underlying cause of death, by single race, on death certificates for US residents. Data not available to calculate crude suicide rate for overall US population aged 85+, male AI / AN aged 85+, and female AI/AN aged 65+

Suicide mortality rates of individuals who identify as AI/AN vary by region and by whether they identify as Hispanic or Latino

Suicide mortality rate per 100,000 among individuals who identify as AI/AN



Source: 2018-2021 CDC National Center for Health Statistics, National Vital Statistics System, Provisional Mortality on CDC WONDER Online Database, based on underlying cause of death, by single race, on death certificates for US residents

Example challenges and strategies to designing crisis care systems that meet the needs of tribal populations

Attitudes

"The biggest thing is stigma. We got hit with suicide a while back, in young kids. People knew, but they didn't want it to be out there. In our culture, it's one of those things we don't talk about"

– 988 Tribal Response Grantee

"We're coming out with a new line of [988] posters and billboards that are more Native-oriented. One of the ones we like is 'Auntie says it's ok to call 988'"

– 988 Tribal Response Grantee

Trust

*"The worst thing a state can do is flip a switch and say 'we have a Tribal crisis line.' This process **requires that tribes be consulted first, not last**"*

– Crisis services provider

"We have been sitting on the [state] 988 advisory board for several months. The state has been very willing to share policies and procedures with us as we set up our own [crisis line] program"

– 988 Tribal Response Grantee

Workforce

"There are not enough mental health professionals equipped in the field of suicide education, it isn't always covered in school and a lot of it is learned on the job"

– 988 Tribal Response Grantee

*"We are **training youth volunteers** from a nearby reservation to be peer supports for Native callers"*

– Crisis services provider

Data

*"People are still trying to distinguish between 988 and 911, and **they don't have to identify ethnicity, so we can't do wraparound or follow up care**"*

– 988 Tribal Response Grantee

*"In our state, tribes don't have the same level of data collection that we do, so **when they are applying for grants, we'll help them run the data**"*

– State Mental Health Commissioner

Infrastructure

*"**Internet services aren't great** here, and there is **limited access to electronics like cell phones**"*

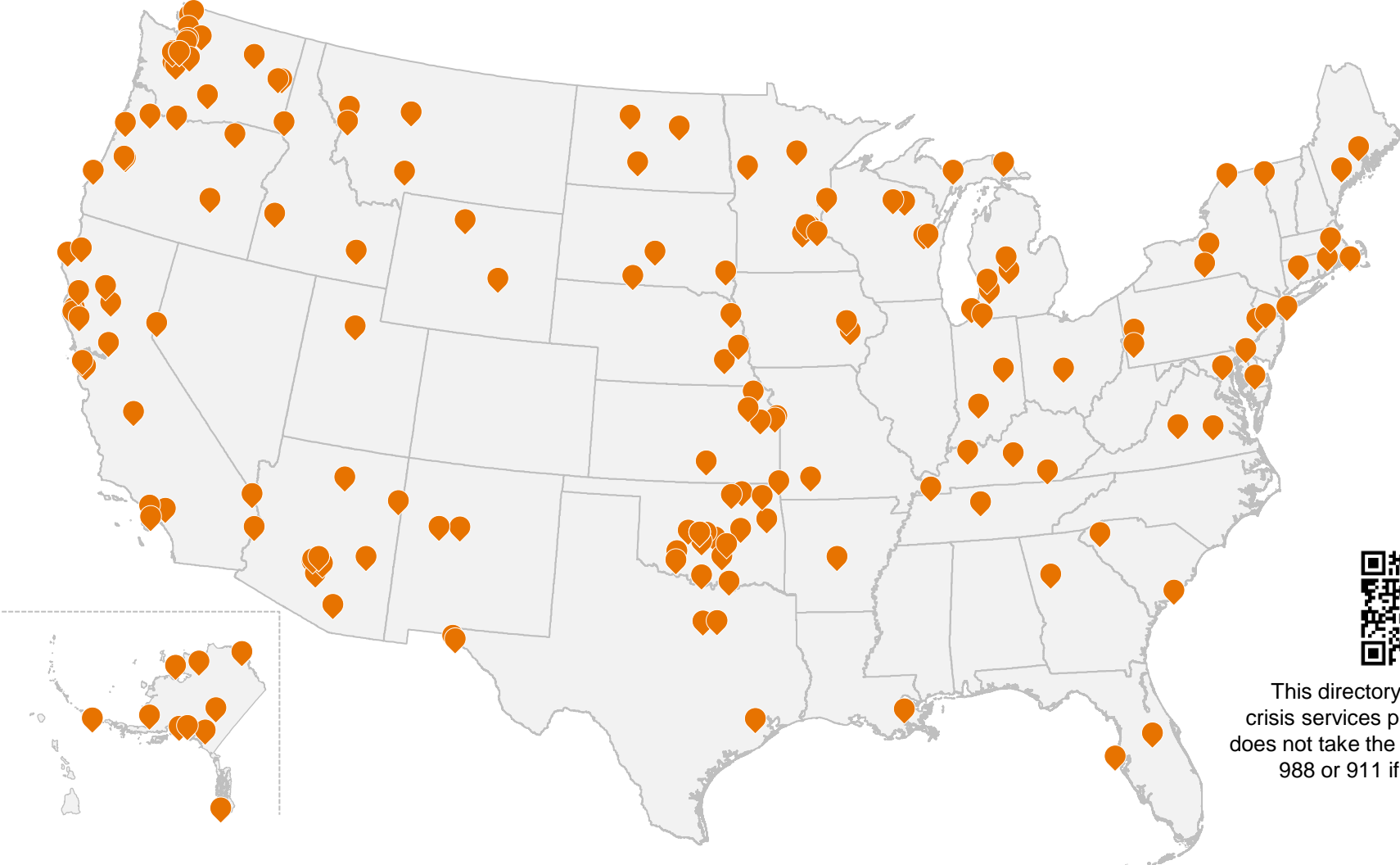
– 988 Tribal Response Grantee

*"The state's Medicaid authority has **worked with providers to better meet the needs of populations living in remote areas**. For example, by covering equine and helicopter transport."*

– Crisis services provider

Crisis Services Indigenous People's Directory

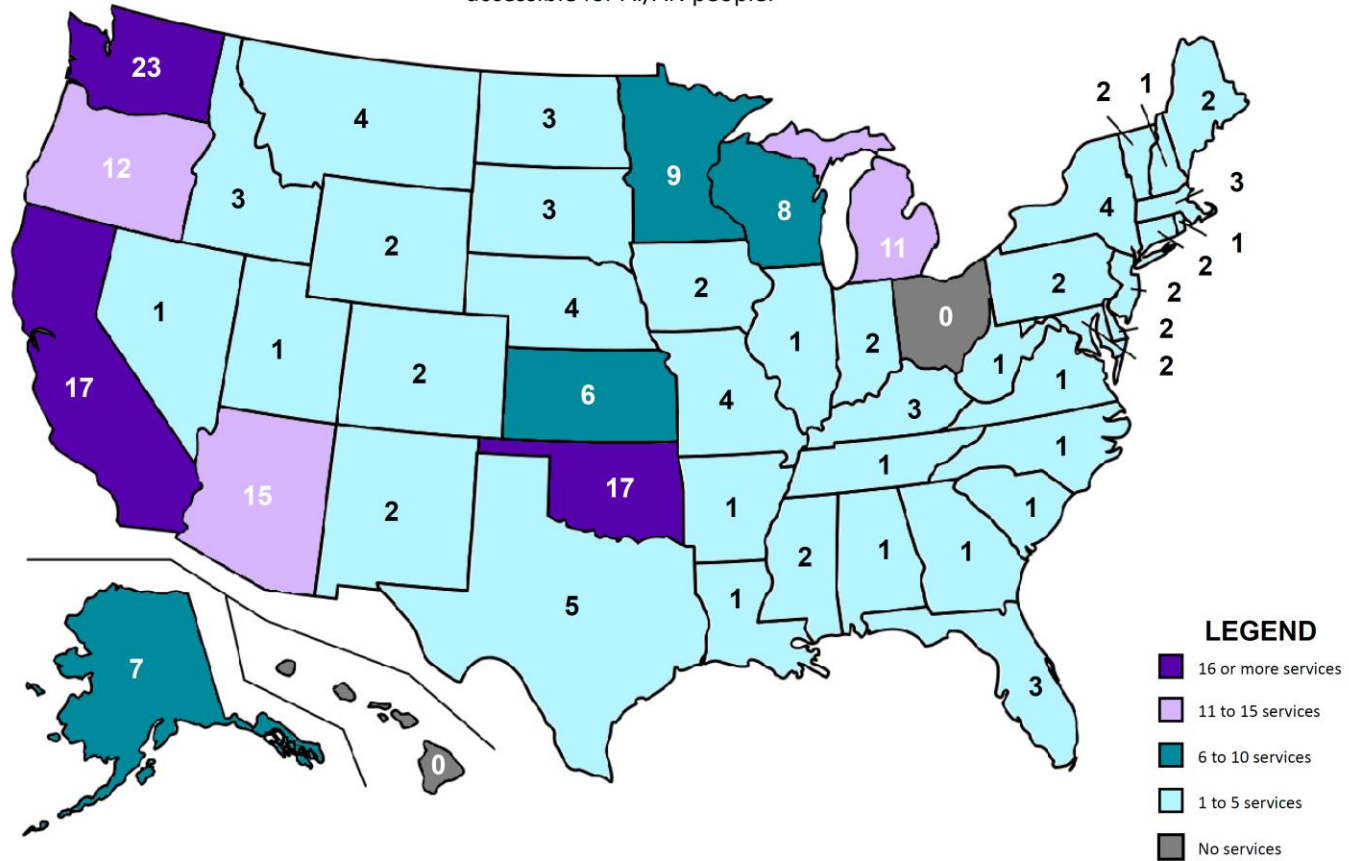
Developed by Northwest Portland Area Indian Health Board and Indian Health Service



This directory is not a crisis services page and does not take the place of 988 or 911 if needed

Crisis Services for Indigenous People

The Northwest Portland Area Indian Health Board (NPAIHB) worked with a Contractor to examine the extent of crisis services available to AI/AN people throughout the Indian Health Service regions in the United States to better understand the strengths and needs of services accessible for AI/AN people.

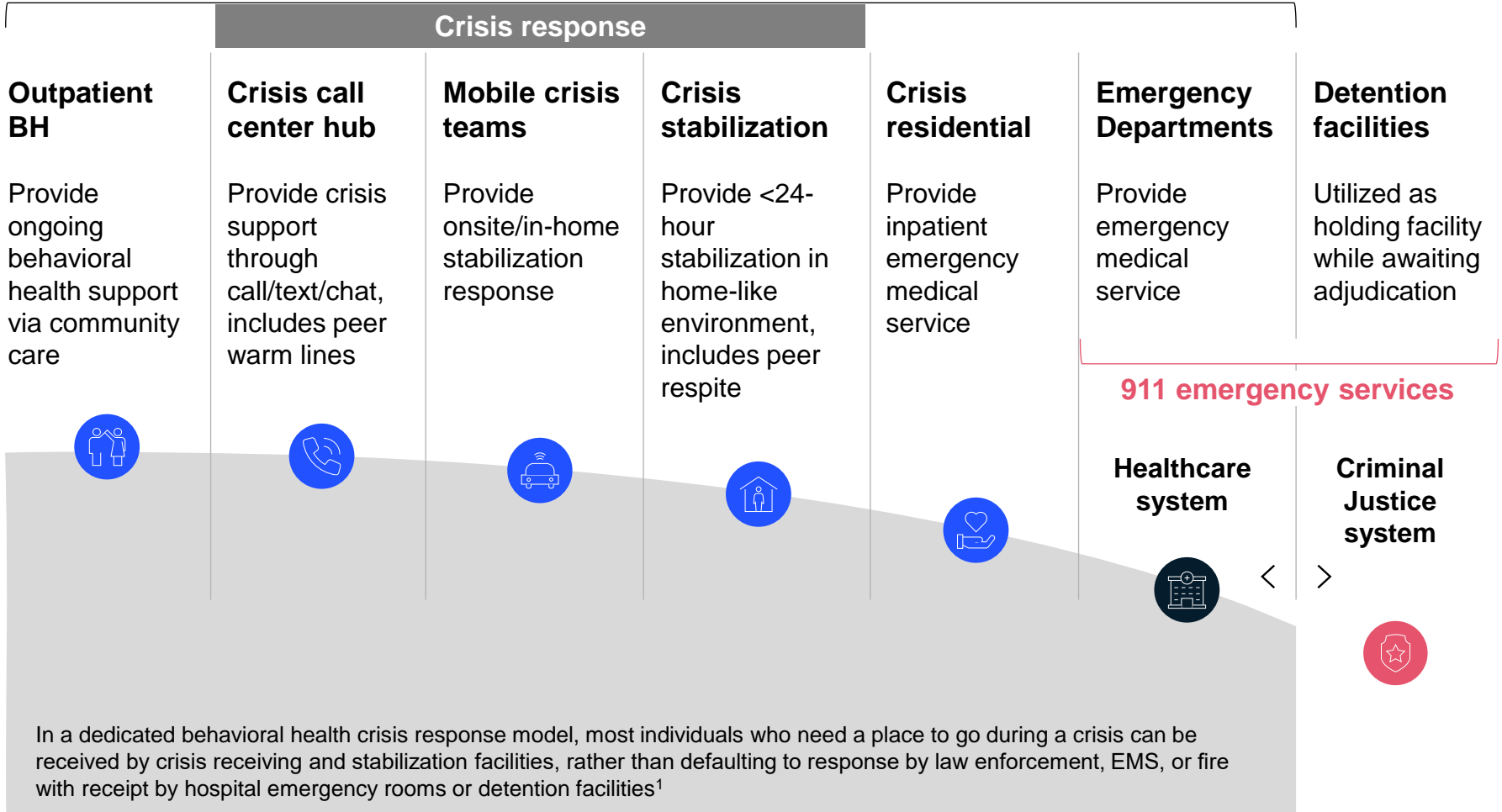


The interactive map can be located at: <https://www.npaihb.org/thrive/crisis-intervention-services/>

988 crisis care continuum and 911 emergency services

■ Part of 988 crisis care continuum ■ Part of 988 crisis care continuum and 911 emergency services ■ Part of 911 emergency services continuum

988 crisis care continuum



1. For both 988 and 911, a share of calls will be resolved without need for a facility. In some cases, individuals receiving care through a dedicated mental health crisis response model will need receipt by non behavioral health facilities, but this will not be a default response.

Source: Memorial Fund, "The 988" opportunity: improving our Response to Behavioral Health Crises" published Nov 2020. Crisis Now "Mental Health Care shouldn't come in a Police Car" Published Dec 2019

Vision for 988 and a fully resourced crisis care system

SAMHSA's 5-Year Vision¹



Someone to talk to

90%+ of all 988 contacts answered in-state [by 2023]²



Someone to respond

80%+ of individuals have access to mobile crisis response [by 2025]



A safe place for help

80%+ of individuals have access to community-based crisis care [by 2027]

Example initiatives led by tribes and tribal organizations

- Tribal 988 responders and peer support workers
- Trainings for crisis call center operators
- Warmline for 988 transfers of tribal callers

- Tribally-operated mobile crisis response units
- Trainings for crisis responders, including law enforcement and emergency first responders

- Tribally-operated inpatient behavioral health facilities³
- Cultural crisis living room³

Majority of 988 tribal grantee initiatives are focused here

1. The vision above is intended to highlight short-term targets, inclusive of intake, engagement, follow-up, and longer-term supports. SAMHSA's longer-term aspiration involves scaling crisis services nationwide to support all individuals in crisis

2. Proportion may differ with chat/text vs. calls; "contacts answered" is defined as connected with a trained responder

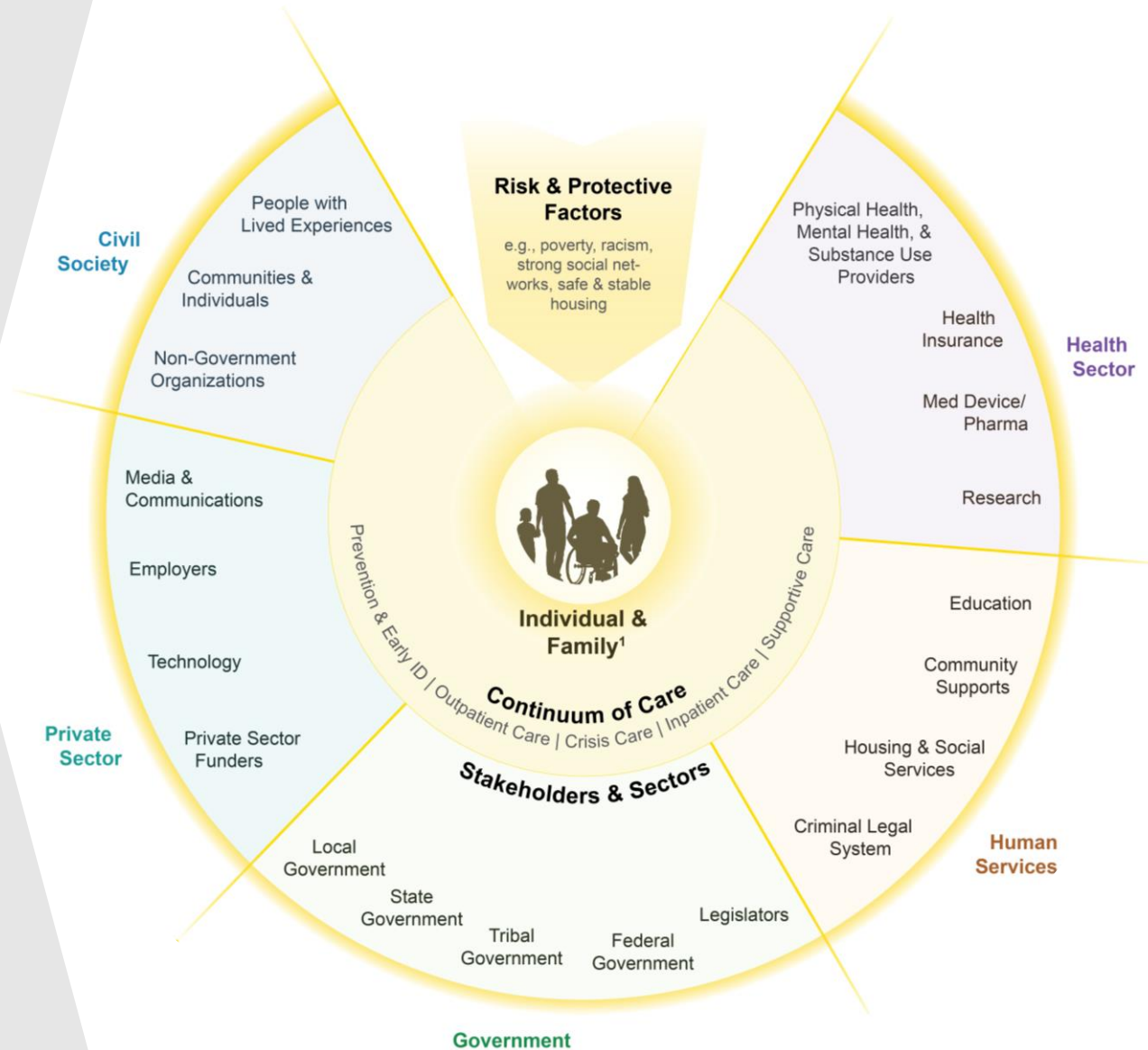
3. Example initiative that has been proposed but is not yet underway

Source: SAMHSA 3rd National Convening on 988 and Crisis Services, December 2022; SAMHSA FY2022 988 Tribal Response Grantee Abstracts; Interviews with 988 Tribal Response grantees and key stakeholders

US Mental Health and Substance Use Systems Map:

Stakeholders and sectors impacting the experiences and outcomes of individuals and families

The stakeholder map represents a system view and is not intended to highlight the specific groups and individuals within each subsector (e.g., LGBTQ2S)



SAMHSA 988 Tribal Response Grant Program

The 988 Tribal Response grants funded by SAMHSA provide resources to improve response to 988 contacts originating in tribal communities and/or activated by AI/AN individuals. They also aim to improve crisis care navigation and follow up care and to facilitate collaboration between tribal and state entities.

- **FY2022:** \$17.2M awarded to 23 grantees, receiving annual award amounts of \$250K – 2M
- **FY2023:** \$17.8M in total available funding for up to 70 awards and estimated annual award amount of \$250K – 2M (application deadline was 7/18/23)

“ *People are still learning the de-escalation process and learning that **just because it’s a crisis doesn’t mean they have to go to an inpatient facility.** I am hoping with this funding and the 988 grants we can get that known out there* ”

- 988 Tribal Response Grantee ”

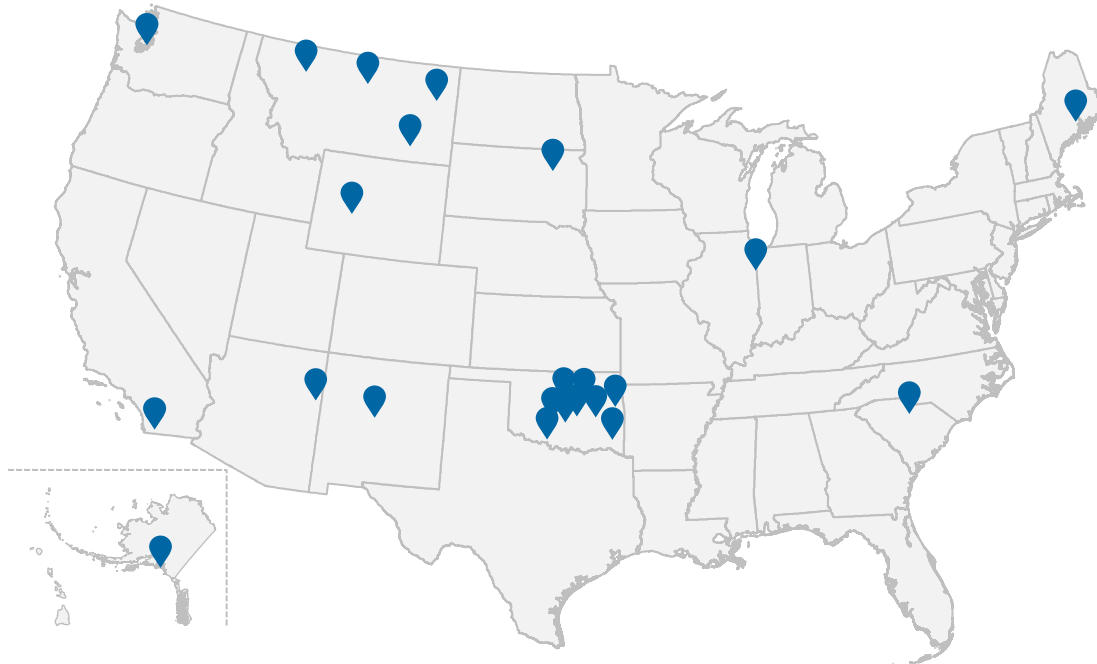
“ *It has been helpful to build connections with the other grantees and work together to help people find the crisis resources they need. **The grant was the catalyst for bringing us all together*** ”

- 988 Tribal Response Grantee ”

“ *The 988 grant has provided infrastructure for us to work on the overlap between our [crisis] line and the tribal line. This has created **opportunities for future oriented dialogue and collaboration*** ”

- State Mental Health Commissioner ”

FY2022 988 Tribal Response Grantees



American Indian Health Service of Chicago

Albuquerque Area Indian Health Board

Blackfeet Tribe

Catawba Indian Nation

Cherokee Nation

Cheyenne & Arapaho Tribes

Choctaw Nation of Oklahoma

Chugachmiut

Comanche Nation

Eastern Shoshone Tribe

Fort Peck Assiniboine and Sioux Tribes

Iowa Tribe of Oklahoma, Perkins Family Clinic Behavioral Health

Muscogee Creek Nation

Navajo Nation

Northern Cheyenne Tribe

Osage Nation

Pala Band of Mission Indians

Port Gamble S'Klallam Tribe

Rocky Boy Health Board

South Dakota Urban Indian Health

Southern Plains Tribal Health Board

Wabanaki Health and Wellness

Wichita & Affiliated Tribes

Example 988 crisis response materials

1

LOOK AFTER THE
**WELL-BEING OF
MIND & BODY**

FOCUS ON WHAT'S POSITIVE IN YOUR LIFE
MAKE SURE TO GET PLENTY OF SLEEP
JUST DO THE BEST YOU CAN
SPEAK ONLY KIND WORDS
TAKE TIME TO EXPRESS GRATITUDE
TALK TO YOUR FAMILY & FRIENDS
LISTEN TO YOUR FAVORITE MUSIC
GIVE BACK TO YOUR COMMUNITY
TAKE A FEW DEEP BREATHS
EXERCISE ON A REGULAR BASIS
FOCUS ON WHAT YOU CAN CONTROL

National Suicide Prevention Lifeline
1-800-273-8255 (TALK) or 988
Crisis Text Line
Text HOPE4SC to 741741
osp.scdmh.org
Hope.ConnectsYou.org

2

Asking for
help is an act
of love for
ourselves.

Tuchily
Healing
Hearts

Call
Tuchily Healing Hearts
(760) 292-6271

3

**WE
NEED
YOU
HERE**

**988
SUICIDE
& CRISIS
LIFELINE**

988 has been designated as the new three-digit dialing code that will route callers to the National Suicide Prevention Lifeline (now known as the 988 Suicide & Crisis Lifeline), and is now active across the United States.

Depression and suicide affect people of all ages and populations, but Native American and Alaskan Native populations can be at a higher risk due to historical trauma, adverse childhood experiences, and lack of connection to necessary resources. If you're struggling, the Lifeline is available to help, 24/7.

the Catawba Indian Nation
Department of Behavioral Health

4

CALL OR TEXT
988
MENTAL
HEALTH
LIFELINE

**ONE CALL
CAN CHANGE
EVERYTHING.**

THERE IS HOPE.

Choctaw Nation of Oklahoma
TOGETHER WE'RE MORE

5

SPTHB 988 Tribal Response Project

Talk is good medicine.

Oriceekes - "You are enough" - Mvskoke
Mvnickv rvpohis - "Ask for help" - Mvskoke
Mishkozwen ni - "Strength" - Potawatomi
Pene zhna majin! - "Keep going!" Potawatomi
TAPATANO KILLA-I (KIYA-I) - "Love yourself" - Kickapoo

Free, confidential relief is available 24/7.

CALL OR TEXT **988** MENTAL HEALTH LIFELINE

6

**How to Help
STRUGGLING LOVED ONES**

- Be willing to hear them out
- Show genuine concern for their feelings
- Offer your support
- Remember we all process our emotions differently
- Be present & accepting

MCNBHS Native Connections
For help or information call 919-758-9800
IF YOU OR SOMEONE YOU KNOW IS IN A CRISIS
text 'crisis' to 281-741 or call 988

7

Losing a Loved One to Suicide

CONFUSION
REJECTION
HEALING
SHOCK
ANGER
GUILT
DESPAIR

You may wrestle with your loved one's decision to leave their life, trying to make sense out of what has happened. It is likely you will not find answers to all your questions, but you may need to find a way to move on without all the answers.

Example 988 crisis response materials

1

If your family is struggling, you don't have to do it alone. Native and Strong Lifeline is here for you. Call 988, option 4.

988 SUICIDE & CRISIS LIFELINE

Image and design: Helene Logo artist: Jason LaClair, Lummi Nation and Nooakuck Indian Tribe.

2

YOU PROTECTED US.
LET US WALK WITH YOU.
#WENEEDYOUHERE

IF YOU OR SOMEONE YOU KNOW IS IN CRISIS, PLEASE DIAL 988 TO REACH THE SUICIDE & CRISIS LIFELINE, AND PRESS 1 IF YOU ARE IN THE MILITARY OR ARE A VETERAN.

3

TWO SPIRIT LOVED & ACCEPTED
#WENEEDYOUHERE

PREVENT SUICIDE.
LESBIAN | GAY | BISEXUAL | TRANSGENDER | QUEER

4

988 SUICIDE & CRISIS LIFELINE

Helpers bring hope.

5

Crisis Support for IHS Community Members

Hope and action can **restore balance** and **save lives.**

If you or someone you know is struggling with an emotional or mental health crisis, contact any of these organizations for help.

Each group provides **free, 24/7** confidential hotlines.

Suicide and Crisis | Call, chat or text 988
Reach out to this national network of crisis call centers to speak to a local crisis counselor.

Protect yourself and your loved ones:
Connect those at-risk to behavioral or mental health services
Engage with your loved ones and community
Talk to others about hopes and dreams
Maintain good physical and emotional health
Seek spirituality

Additional efforts to support messaging around 988



The **988 Formative Research Project** was launched to produce insights that can be used to make research-informed decisions about how to encourage use and/or access to 988 among populations at higher risk for suicide, including AI / AN youth and young adults. Results from this study are anticipated in late 2023