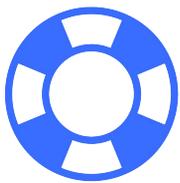




Doreen Marshall

Vice President, Mission
Engagement



**American
Foundation
for Suicide
Prevention**

What are your thoughts on the current landscape of the substance use and mental healthcare ecosystem?

Now more than ever, people are understanding the importance of taking care of their mental health. Nine out of ten people believe that suicide can be prevented, and they will look to their health providers for support around mental health crises. As a field, we have to find ways to make services more accessible to more people and to improve the quality of care. I think we

are going to continue to see an increase in demand for affordable, evidenced-based care and more attention to culturally competent service delivery. Because of demand, there will be a continued expectation that other health providers, such as primary care doctors, ob/gyn docs, family physicians and pediatricians can help serve as a bridge to and referral for mental health services. I imagine we may also see more peer-to-peer interventions to help bridge gaps and waiting times for services.

What work is AFSP doing in the space to accelerate mental healthcare?

Because we understand that seeking mental healthcare can help reduce suicide risk, we advocate for better access to affordable, evidence-based treatments that have been shown to have an impact on suicide. As part of our Project 2025 efforts, we are working with large healthcare systems to improve care for those at risk for suicide. A key



component here is training healthcare professionals to understand and assess suicide since persons at risk for suicide also present in primary care settings and emergency departments.

What barriers need to be overcome to improve access to high-quality, evidence-based care?

Providers need ongoing training in evidenced-based care interventions to make these more available to more people. We also need to be thinking about the cost of services and how to scale proven interventions.

The implementation of 988 as the National Suicide and Crisis Lifeline is an example of addressing the barrier to crisis access by implementing a shorter, easier to remember, number and devoting resources to increase access.

What are the main opportunities for transformation?

There are some best practices when it comes to providing mental health care for those at risk for suicide, but they are not widely implemented. We want to see more healthcare settings implement these practices, as taking these practices to scale will mean that more people are exposed to the care that can help save lives.

What are you looking forward to at the Future of Mental Healthcare Summit?

I am looking forward to learning from other leaders in mental healthcare, especially those who are looking at innovative ways to better meet the demand for services and improve care coordination and quality.

You can hear more from Doreen Marshall at the **Future of Mental Healthcare East Summit** on April 19-20 in Boston, MA.