FACT SHEET

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OFFICE OF SUICIDE PREVENTION

Overview

The California Office of Suicide Prevention was established by Governor’s Executive Order in 2007, after being called for in AB 509 (Hayashi, 2007). The Office is located within the California Department of Mental Health (DMH). Some of the Office’s activities include:

• Coordinating the implementation of a statewide suicide prevention strategy;
• Collecting and disseminating suicide statistics and best practices for suicide prevention; and
• Developing prevention training standards on suicide prevention.

Through the Mental Health Services Act (MHSA, formerly Proposition 63), $14 million is available each year for four years for Office of Suicide Prevention projects. Counties may also direct their local MHSA funds to suicide prevention efforts.

Suicide Trends

• In 2004, the latest available data, 3,343 individuals died by suicide in California. This is equivalent to nine lives every day – comparable to the number of residents that were killed in traffic collisions.\(^1\)
• Every year, approximately 32,000 Americans die by suicide, and over 800,000 suicide attempts are made.\(^2\) This is equivalent to one attempt every 39 seconds.
• It is a myth that suicides are more common during the holiday season. If fact, the rate of suicide in the United States is lowest in December, and peaks in the spring and fall.\(^3\)
• Nationally, suicide is the 8th leading cause of death among adults, and the 3rd leading cause of death among adolescents.\(^4\)
• The highest suicide rates are found among Caucasian males, adults over age 65, Hispanic female high school students, and American Indian/Alaska Natives.

California Strategic Plan for Suicide Prevention

DMH is currently working with an advisory group of diverse experts to develop a statewide Strategic Plan for Suicide Prevention. The plan was required to be developed by the Governor’s veto message of SB 1356 (Lowenthal, 2006). The Office will be a key coordinator of the efforts recommended in the plan, which is due to the Governor by May 1, 2008.

Suicide Hotlines

There are many different kinds of phone lines that handle a wide range of crisis calls. Some are specifically for suicide prevention, while others are general “crisis” lines, many of which are connected to county mental health agencies. The national suicide hotlines are 1-800-273-TALK and 1-800-SUICIDE, administered by the National Suicide Prevention Lifeline. Callers to these national phone numbers are routed to one of over 120 affiliated crisis lines.

When to Seek Help: Suicide Warning Signs

According to the American Association of Suicidology, suicide warning signs include:

• Threatening to hurt or kill him or herself, or talking of wanting to hurt or kill him/herself;
• Looking for ways to kill him/herself by seeking access to firearms, available pills, or other means;
• Talking or writing about death, dying, or suicide;
• Increased substance abuse;
• Feeling hopeless;
• Seeing no reason for living or no purpose in life;
• Anxiety, agitation, troubled or constant sleeping;
• Feeling trapped, as if there is no way out;
• Withdrawing from friends, family, and society;
• Rage, uncontrolled anger, seeking revenge;
• Acting reckless, engaging in risky activities; and
• Dramatic mood changes.

\(^1\) California Department of Public Health
\(^2\) Centers for Disease Control and Prevention
\(^3\) National Center for Health Statistics
\(^4\) Centers for Disease Control and Prevention