

City of Long Beach

Legislation Details (With Text)

File #: 18-0542 Version: 1 Name: CD2,1,3,4 - Suicide Prevention Plan

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Title: Recommendation to request City Manager to work with Department of Health and Human Services

and Long Beach Police Department and report back to Council in the next 30 days; A report of Long Beach's current suicide prevention methods; establish a suicide prevention plan; create a suicide prevention community task force; and training for community members on intervention, procedures,

and knowledge of existing resources.

Sponsors: COUNCILMEMBER JEANNINE PEARCE, SECOND DISTRICT, COUNCILWOMAN LENA

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COUNCILMAN DARYL SUPERNAW, FOURTH DISTRICT

Indexes:

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Attachments: 1. 061918-NB-44sr&att.pdf, 2. 061918-NB-44-PC Coorespondance-Hahn.pdf, 3. 061918-NB-44-PC

Coorespondance-Lowenthal.pdf

Date	Ver.	Action By	Action	Result
6/19/2018	1	City Council	approve recommendation	Pass

Recommendation to request City Manager to work with Department of Health and Human Services and Long Beach Police Department and report back to Council in the next 30 days; A report of Long Beach's current suicide prevention methods; establish a suicide prevention plan; create a suicide prevention community task force; and training for community members on intervention, procedures, and knowledge of existing resources.

Since the early 2000s, we have seen a rise in suicide cases. In a recent report from Centers of Disease Control and Prevention, they found that from 1999 to 2016, suicide rates spurred to the top, across the nation. In 2016, the highest U.S suicide rate was seen among Whites at 15 percent and Native Americans at 13 percent. In 2018, on average, one person dies by suicide every two hours, making it the eleventh leading cause of death in California and second leading for ages 25 to 34. In Long Beach, we have an average or 3-4 suicides per month. Action is needed.

Aside from mental illnesses, there are several risk factors that may contribute to thoughts of suicide, attempted suicide, and actual suicide. They include:

- previous suicide attempts
- substance abuse
- incarceration

File #: 18-0542, Version: 1

- · family history of suicide
- poor job security or low levels of job satisfaction
- history of being abused or witnessing continuous abuse
- being diagnosed with a serious medical condition, such as cancer or HIV
- being socially isolated or a victim of bullying

Currently, states such as Utah, Alaska, Colorado among others have taken steps in creating suicide prevention task forces to do community outreach and provide training services with the guidance of methods such as Applied Suicide Intervention Skills, also known as ASIST, and SafeTALK ASIST is a two-day training that covers understanding of suicide, provides skills to recognize suicide risk and intervenes to prevent it. SafeTALK trains individuals to learn how to respond to someone when expressing suicidal thoughts, how to identity a person in risk of suicide, and how to connect them to resources.

Establishing a suicide prevention plan will educate the community on suicide risk factors, protective factors, recovery and healing processes. Creating a community task force will be able to work on strategies such as education, outreach, and support for the community. The goal is to reduce deaths by suicide, increase awareness and understandirig, and connect individuals to resources that can provide methods of healing.

It is anticipated this request will have a fiscal impact, but the amount is unknown at this time. This action should include staff reviewing implementation options and associated costs and include the information as part of their report back to Council.

Approve recommendation.

JEANNINE PEARCE COUNCILMEMBER, SECOND DISTRICT

LENA GONZALEZ COUNCILWOMAN, FIRST DISTRICT

SUZIE PRICE COUNCILWOMAN, THIRD DISTRICT

DARYL SUPERNAW COUNCILMEMBER, FOURTH DISTRICT