September is Suicide Prevention Month and the Los Angeles County Board of Supervisors has declared September 10-16 as Suicide Awareness Week in LA County. This month, individuals and organizations around the country and the world join forces to broadcast the message that suicide is preventable and to educate as many people as possible with tools and resources.

During the months of September and October, the Los Angeles County Department of Mental Health (LACDMH) will promote suicide awareness and prevention in partnership with hip-hop radio station Power 106 through an integrated marketing campaign. The station will send out messages on-the-air, through personal stories in videos and through social media, directed at 16-40 year old Latinos and African Americans in LA County. Check the LACDMH Facebook page for Kevin Hines story of survival after jumping off the Golden Gate Bridge. Look for our all-star high-school basketball games that will bring celebrities together with students to participate in high energy, relevant entertainment and create peer support through personal pledges.

On September 7th, LACDMH co-sponsored the Suicide Prevention Summit at the California Endowment, entitled “The Suicide Contagion Effect: Why Does It Happen, What We Know and What We Can Do,” featuring Dr. April
Foreman as keynote speaker, who specializes in social media and the contagion effect. Also discussed was the passage of AB 2246, requiring the adoption of suicide prevention, education and follow-up in California schools from grade 7 to 12.

The California statewide campaign “Each Mind Matters” is presenting a series of webinars that seeks to increase understanding around mental health, stigma reduction and suicide prevention strategies, with a focus on learning from school and community-based efforts across the state. For more info, please e-mail info@eachmindmatters.org.

Here are a few basic things you should know and can share with those around you:

**Suicide can be prevented.** Most of us have been touched by the tragedy of suicide. We may have lost someone close to us or been moved by the loss of someone we never met. For example, when singers/songwriters Chris Cornell of Soundgarden and Audioslave and Chester Bennington of Linkin Park died recently, millions of people felt intense grief. When a suicide happens, those left behind often experience deep shock. Even if they knew the person was struggling, they may not have expected suicide to be the result. However, many people who find themselves in a suicide crisis can, and do, recover. Suicide can be prevented; you can help by taking the following actions:

- **Know the Signs:** Most people who are considering suicide show some warning signs or signals of their intentions. Learn to recognize these warning signs and how to respond to them by visiting the Know the Signs website (www.suicideispreventable.org).

- **Find the Words:** If you are concerned about someone, ask them directly if they are thinking about suicide. This can be difficult to do, but being direct provides an opportunity for them to open up and talk about their distress and will not suggest the idea to them if they aren’t already thinking about it. The “Find the Words” section of the Know the Signs website suggests ways to start the conversation.

- **Reach Out:** You are not alone in this. Before having the conversation, become familiar with some resources to offer to the person you are concerned about. Visit the Reach Out section of the Know the Signs website to identify where you can find help for your friend or loved one.

- The Substance Abuse and Mental Health Services Administration (SAMHSA) has many resources, including a Smart Phone App, that equips health providers with education and support resources to assess a patient’s risk of suicide, communicate effectively with patients and families, determine appropriate next steps, and make referrals to treatment and community resources (https://store.samhsa.gov/product/SAMHSA-Suicide-Safe-Mobile-App/PEP15SAFEAPP1).

The “Know the Signs” campaign is one of several statewide initiatives funded by counties through the voter-approved Mental Health Services Act (Prop 63). These efforts are administered by the California Mental Health Services Authority (CalMHSA) and are part of Each
Prevention Works. Many people who feel like taking their own life don’t want to die. If they can get through the crisis, treatment works. There are programs and practices that have been specifically developed to support those who are in a suicide crisis. The Suicide Prevention Resource Center hosts a registry of 160 programs, practices and resources for suicide prevention. You can learn more about them by visiting http://www.sprc.org/strategic-planning/finding-programs-practices.

An evaluation of the Know the Signs campaign in California found that more people now feel prepared to recognize the warning signs of suicide and confident to intervene with someone they are concerned about. The evaluation also found that suicide prevention training programs funded in California will have a long-term impact in the state, potentially preventing at least 140 deaths and 3,600 suicide attempts over the next three decades. The analysis also estimates that for every $1 the state invests in the suicide prevention program, the people of California will receive an estimated $1,100 in economic benefits such as reduced spending on emergency care and increased earnings. Prevention not only works to reduce suffering and distress, it also makes financial sense.

Help is Available

The Suicide Prevention Lifeline 1-800-273-8255 (1-800-273-TALK) offers 24/7 free and confidential assistance from trained counselors. Callers are connected to the nearest available crisis center. The Lifeline is also available in Spanish, and for veterans or for those concerned about a veteran, by selecting a prompt to be connected to counselors specifically trained to support veterans.

To find local services and supports, visit the Reach Out section of the Know the Signs resources page where you will find California statewide and national resources as well as links to resources in your county: www.suicideispreventable.org.

Add Your Voice to World Suicide Prevention Day

Sept. 10, 2017, was World Suicide Prevention Day, an opportunity to join millions of others around the globe to focus public attention on preventing suicide through diverse activities to promote understanding about suicide and highlight effective prevention activities. Find out more about joining this collective call to action by visiting www.iasp.info/wspd.
PUBLIC HEALTH IMPACT OF SUICIDE IN LOS ANGELES COUNTY, 2017 EDITION

OVER $1 BILLION
Total projected economic impact of suicides and attempted suicides in 2014.*

In 2014, more Los Angeles County residents died by suicide than motor vehicle crashes, unintentional overdoses, or homicides.

EACH DAY

2 TWO residents died by suicide.

11 ELEVEN were hospitalized for a suicide attempt.

8 EIGHT were treated in the emergency department (ED) for a suicide attempt.

If you or someone you know is having thoughts of suicide, call the National Suicide Prevention Lifeline at 1-800-273-TALK (1-800-273-8255), or visit their website at http://suicidepreventionlifeline.org.
For additional suicide prevention resources, visit http://www.bit.ly/PreventSuicideLA.

** Los Angeles County Department of Public Health, Division of Chronic Disease and Injury Prevention, Injury & Violence Prevention Program (Sep 2017). Number Suicide Deaths and Suicide Attempts Among Los Angeles County Residents 2014.
MEET THE “PROBLEM SOLVERS” AT THE DEPARTMENT OF MENTAL HEALTH COURT LINKAGE PROGRAM, LA COUNTY’S BEST KNOWN SECRET

By Kathleen Piché, Public Affairs Director

Truly a combined effort between Los Angeles County Department of Mental Health (LACDMH), Los Angeles County Superior Court, District Attorney and Public Defenders' Offices, the Department of Mental Health Court Linkage Program (DMHCLP) is now celebrating thirty years of success in diverting persons with mental illness and substance use issues into treatment programs and moving them forward on the road to recovery. In some cases, the programs have kept clients out of jail and have even gotten criminal records expunged.

LACDMH received a grant thirty years ago to expand a small program at the County Jail providing five courtrooms with jail mental health advocates. The staff assisted inmates who had symptoms and diagnoses of mental illness with case management and community reintegration services. Also known as the “problem solvers” by LA Superior Court, this dedicated group of individuals work hard to change lives.

The DMHCLP expanded upon suggestion of the Department of Justice, who arrived to monitor the County Jail ten years later, in 1997. The most recent expansion occurred in 2008, following the passage of the Mental Health Services Act in California which funds much of the program. This extended the DMHCLP reach to Pomona and Lancaster.

Program Director, Alisa Dunn, L.C.S.W., has stewarded the program since DMHCLP’s inception. Working with and involving the community is a “key component,” Dunn said. Many of her staff feel so strongly about the importance of helping this population, they have stayed with the program for twenty years. Arlene Veliz, M.S.W., Mental Health Service Coordinator II, works at Pasadena Superior Court and is one of those dedicated employees.

An 18 year-old male (who we call Bob for confidentiality reasons) came before the court having been arrested on two serious felonies and was looking at prison time. The District Attorney assigned to the case suggested Mental Health Court Linkage. Bob had been diagnosed with Bipolar Disorder, was young, angry and not wanting to be labeled as mentally ill.

“Just send me to prison,” he said. His mental health records showed that treatment and rehabilitation were a better choice than jail. Bob plead guilty to one felony and the other was reduced to a misdemeanor. He got three years of formal probation and twelve months at Olive Vista. After his success at Olive Vista, Arlene Veliz continued to follow Bob, who eventually self-disclosed substance use with a girlfriend. He knew it was a probation violation.
“Listen I can’t do this. I’m ok for a while, but then I go to old habits, I can do prison, it’s easier.” Bob really wanted to go to prison, even during the interview with River Community. Arlene kept trying. Bob went to River Community for co-occurring treatment. Bob has not re-offended since. He has been sober for nine years. He has obtained his cosmetology license and works fulltime to support himself. His case has been expunged and dismissed. Arlene and Bob continue to stay in contact.

The court linkage programs are equally valuable to all partners. H. Richard Lamb and Linda E. Weinberger, professors of psychiatry at USC, did a study and concluded that court mandated and monitored treatment is effective in obtaining good outcomes for chronically mentally ill persons who’ve committed minor crimes. In their book entitled “Deinstitutionalization: Promise and Problems,” Lamb and Weinberger state that using mental health consultation as soon as mentally ill defendants enter the criminal justice system makes a significant impact on the population.

In 2016, the Mental Health Court Linkage Program served a total of 5,844 clients.

The Court Linkage programs have won multiple awards over the years, including:

1. MILES Conference Award (2000)
2. Mental Health Commission Award for Most innovative Program (2001)
3. LACDMH Employee of the Year, Program Award (2001)
4. LA County Quality and Productivity Award, Top Ten, Competency Restoration Program (2004)
5. NAMI (California) Outstanding Criminal Justice Award (2009)
6. LA County Quality and Productivity Award, Best Teamwork Award & LA County Co-Occurring Disorders Court (2010)
7. Mental Health Commission Award for Outstanding Directly Operated Program (2013)

Forty-one LACDMH staff help make the DMHCLP programs effective. LACDMH thanks them all for their hard work and dedication in changing lives for the better.

“Among the most challenging defendants are those suffering from mental health issues. As a criminal court judge, I see a number of people who may not have received needed services; failure to address those issues often results in anti-social behavior and the filing of a criminal case. I have heavily relied on the Mental Health Court Linkage Program to properly identify and serve those defendants. I consider them a key partner.”

—Judge Jose I. Sandoval, Clara Shortridge Foltz Criminal Justice Center

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“With the right team effort on the part of the DMH representative and the Public Defender’s Office, the Court Linkage Program provides our clients with invaluable services. Our current court worker has been an amazing resource of information, suggestions and, ultimately, solutions for our clients suffering from mental illness – whether they have been diagnosed and treated in the past, or are experiencing symptoms for the first time. The greatest option available to our mentally ill incarcerated clients is the ability to receive round-the-clock treatment at Olive Vista, the one option that combines comprehensive treatment with the security and focus on public safety that prosecutors are looking for as an alternative to prison.”

—Laura Kislinger, Deputy Public Defender
More Support for Court Linkage

“You really helped me believe that Hamadicko and I weren’t alone. Hamadicko entered Olive Vista on November 9th after ten months at Twin Towers. He is so thankful … a lot of life and laughter is coming back. He is advancing very quickly in the classes, so there are more options for him. He signed the HIPAA papers, so information can be shared and, as a family, we can be more effective. We are very thankful.”

—Family member Peter Carreiro to DMHCLP staff, Sandra Bautista-Lechner

“The DMHCLP has exceeded all expectations in the delivery of mental health services to courtrooms, consumers, families and mental health providers. I have great confidence referring community partners, families and community members to consult with the DMHCLP staff when a situation calls for their specialized care. I am grateful for the collaboration and partnership we have forged and will always be in debt for the assistance they have provided me in completing my daily responsibilities.”

—Eugene Marquez, LACDMH Mental Health Service Coordinator, Service Area 3

“The DMH Liaison program has been an invaluable resource for prosecutors. Many of our defendants are living with mental illness. For them, the best solution is treatment, not incarceration. Our DMH liaison evaluates defendants in court and determines whether they have a mental illness. If they do, the DMH liaison finds an appropriate treatment program and makes the referral. This allows prosecutors to quickly and efficiently resolve cases while helping defendants get the treatment they need. Olive Vista is the only facility in the county that can prevent mentally ill defendants from abandoning a program without permission and is a necessary resource.”

—Marcia Daniel, Deputy in Charge, East LA County District Attorney

“Before he couldn’t concentrate. He is following the structure. My son would be dead without this. He wants to do everything now, once he gets out. This is the best thing that has ever happened for him.”

—The mother of one client at Olive Vista
The DMHCLP includes five components:

The **Court Liaison Program** is a problem-solving collaboration between LACDMH and LA Superior Court, and is located at 22 courts countywide. Fifteen LACDMH staff increase coordination and collaboration between the criminal justice and mental health systems to improve access to mental health services and provide continuity of care. With a primary emphasis on creating “best fit” individualized alternative sentencing plans, the program has linked close to 20,000 consumers since inception. Additionally, the program provides support to families and educates the court and community regarding specific client needs.

The **1370.01 PC Program** (mental competency) seeks to expedite stabilization of misdemeanor defendants found incompetent to stand trial. The program provides Court 95 (mental health court) defendants direct linkage to treatment and competency restoration services.

Focused on rehabilitation skills and reintegration into the community, the **Community Reintegration Program** offers mentally ill defendants community-based treatment as an alternative to incarceration in one of two specialized programs. Sixty-five beds are available for six-to-twelve month stays for defendants at Olive Vista, a locked licensed skilled nursing facility, or River Community, an unlocked co-occurring disorder residential treatment facility.

The **Co-Occurring Disorders Court Program** is a specially designated court program that helps those defendants experiencing mental illness and substance-use disorders. Many of these defendants are also chronically homeless. Residential and outpatient services for this 12-18 month program are provided by Antelope Valley Rehabilitation Center and Project 180 Full Service Partnership. The program represents a unique partnership between the criminal justice system, the drug treatment community and the mental health community.

The **AB109 Revocation Court Program** staffs a three-person team at Bauchet (County Jail) Court, tasked with conducting on-site screenings and level-of-care recommendations for the court on behalf of post-release supervised persons with mental illness and/or co-occurring disorders, done in conjunction with Jail Mental Health Services discharge planners and the LACDMH Countywide Resource Management Administration.