

California Commission on Aging

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GAVIN NEWSOM, Governor

Executive Director
Karol Swartzlander

September 12, 2023

THE HONORABLE SUSAN TALAMANTES EGGMAN
1021 O STREET, SUITE 8530
SACRAMENTO, CA 95814

SUBJECT: Senate Bill 326

Dear Senator Eggman,

The California Commission on Aging (CCoA) serves as the principal advocacy body for older Californians and advises the Governor, Legislature, and State, federal, and local agencies on programs and services that affect older adults. Commission members represent the State's cultural and geographic diversity, including professional expertise within and outside of the field of aging.

Thank you for your continued refinements to SB 326 as evidenced in the amended version of September 8, 2023. The Commission reviewed this version and were concerned with the deletion of the issues of death by suicide among older adults (Section 1, (c) and (e) on page 4). While this section was later inserted on page 7, the information about older adults was not included in the new section. As you know, older adults have the highest rate of suicide, compared to other age groups in California (and in the nation). The range in California by county is 12.8 to 33.3 (Shasta County) per 100,000 people. The rate for San Joaquin County is almost 16 (15.9). We ask that you strengthen the information by adding text from the above statistics (reference: [GOAL TWO for 2030: Health Reimagined - Let's Get Healthy California](#)) and reinsert the currently deleted text where the new text is now on page 7:


“...suicide risk factors may affect adults 65 years of age and older, including psychiatric and neurocognitive disorders, social exclusion, bereavement, cognitive impairment, and physical illnesses.”

In addition, we have concerns that the higher prevalence of suicide and other behavioral health problems of the LGBTQ+ and BIPOC populations of older adults is not emphasized adequately. While it is mentioned that these special populations have more vulnerability, higher prevalence of problems, and poorer outcomes, this is for the groups in general. Older members of these special populations fare even worse and often need specialized geriatric behavioral health services. This should be called out in SB 326 clearly as is already done for transitional age youth members of these groups.

Finally, we believe that SB 326 would be strengthened immeasurably by positioning the efforts of the Governor's Modernization plans within the framework of the Governor's Master Plan on Aging. Within the Master Plan, Goal 2, "Health Reimagined" states: **"We will have access to the services we need to live at home in our communities and to optimize our health and quality of life.** Health is a lifelong journey. To age well, from birth to 100-plus years old, Californians need access to quality health care informed by geriatric expertise, home and community-based services and supports, culturally competent public health resources, and nursing home innovations."

Thank you very much for your continued leadership in improving behavioral health services for all and promoting inclusivity for vulnerable Californians. Please let us know if there is additional information we can provide to your team.

Sincerely,

A handwritten signature in black ink that reads "Cheryl Brown". The signature is written in a cursive, flowing style.

Cheryl Brown, Chair
California Commission on Aging