



August 3, 2011

Dear Colleagues;

The California Mental Health Planning Council (CMHPC) is mandated by federal and state statute to advocate for children with serious emotional disturbances and adults and older adults with serious mental illness, to provide oversight and accountability for the public mental health system, to advise the Administration and the Legislature on priority issues, and to participate in statewide planning. With passage of the Mental Health Services Act, the Planning Council also has responsibilities related to workforce development.

The Planning Council is organized into multiple subcommittees dedicated to understanding specific issues that strengthen or challenge our communities. The Older Adult System of Care Committee has been discussing the increasing number of baby boomers that will achieve entry into their more senior years, and the alarming rates of suicide for this group. The coming elder boom creates great challenges for the mental health system as well as for the health, aging services, and social security systems. The number of older adults (65+) in the U.S. will double over the next quarter century from 35 million to 70 million. The proportion of older adults will increase from about 13% to about 20% of the total population, while the proportion of working age adults declines 5%. The proportion of older adults from minority cultures will increase from 16% to 25%. The number of older adults with mental illnesses in the U.S. will double from 7 million to 14 million.

California is projected to be one of the fastest growing States in the nation in total population. In 1990, California comprised 12 percent of the nation's population and is expected to have 14 percent of the nation's population by 2020 (an increase of 15.7 million people). In California, the elderly population is expected to grow more than twice as fast as the total population and this growth will vary by region.

The elderly age group will have an overall increase of 112 percent during the period from 1990 to 2020. More than half the counties will have over a 100 percent increase in this age group. Eleven of these counties will have growth rates of over 150 percent. These counties are located throughout the central and southern areas of the State. The influence of the 60 and over age group on California is expected to emerge most strongly between 2000 to 2020.

As a result of the discussion, in the spring of 2011, the Planning Council staff compiled a report that addressed the gender and ethnic differences in older adult suicides. It is recognized that much of the cited data is older than the Council would prefer, therefore several other documents have been incorporated into this letter's enclosure to provide a sense of what information we have to date.

The Older Adult System of Care Committee is interested in compiling more information and resources for your use. We are aware that counties are embarking on multiple initiatives to address planning efforts related to prevention and early intervention, suicide prevention, and reduction in stigma and discrimination. We would like to incorporate any data or outcome reports you are aware of into this effort, so that we can offer counties and advocacy groups the most current resource information possible. It is further hoped that the Council can provide information that can be used most effectively at the local level for education and community awareness campaigns on this very important social issue that we are facing.

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If you would kindly submit to Michael Gardner at the address below by September 16, 2011 any material you wish to share, it will be greatly appreciated. Included also is his email address:

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We intend to include the local Mental Health Boards and Commissions in the final distribution of collected material, but if there are other organizations or stakeholders you would like to see the Council include, please provide Mr. Gardner with the contact name and address so that they can be added to the final distribution list as well.

I am pleased to represent you on the Council, and sincerely hope you will join in our effort to provide information and educational materials for use as we address this unfortunate and tragic fate that is affecting our elderly population.

Jaye Vanderhurst, LCSW
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