

## CONCURRENCE IN SENATE AMENDMENTS

AB 440 (Ramos)

As Amended September 3, 2025

Majority vote

**SUMMARY**

Requires the Department of Transportation (CalTrans), *on or before July 1, 2028*, to identify *best practices* for the *implementation of suicide countermeasures designed to deter suicide attempts on bridges and overpasses*. *Requires CalTrans to consider feedback from local jurisdictions and other stakeholders in evaluating appropriate physical infrastructure, design features, and related deterrent measures*. *Requires CalTrans to consult with the State Department of Public Health (DPH), behavioral health experts, and other relevant stakeholders in implementation*.

**Senate Amendments**

- 1) Strike the previous contents of the bill directing DPH to work in consultation with CalTrans to identify cost-effective strategies to reduce suicides and suicide attempts on state bridges and roadways and instead directs CalTrans to identify best practices for the implementation of suicide countermeasures on bridges and overpasses.
- 2) Require CalTrans to consider feedback from local jurisdictions and other stakeholders in evaluating appropriate physical infrastructure, design features, and related deterrent measures.
- 3) Require CalTrans to consult with DPH, behavioral health experts, and other relevant stakeholders in implementation.
- 4) State that establishing best practices pursuant to this bill is not considered a "mandatory duty" under an existing law, which provides that failure to discharge such duty could result in liability.
- 5) Delete the reporting requirement.
- 6) Add coauthors.

**COMMENTS**

*Suicide and Self-Harm in California. According to a January 2025 data brief from DPH, suicide is the leading cause of violent death, and self-harm is the third leading cause of injury-related emergency department (ED) visits. Men consistently have higher rates of suicide than women, and in 2022 men account for more than three-fourths of suicides. Use of firearms was the most common mechanism for suicide in 2021 and 2022. Youth under the age of 10 had a statistically significant increase in self-harm ED visit rates from 1.9 per 100,000 Californians in this age group in 2021 to 2.7 in 2022. Although there was a small number of black people who visited the ED for self-harm injury, this group is at elevated risk for self-harm. Self-harm by poisoning was the most common mechanism of self-harm injury leading to ED visits, followed by cutting/piercing and, when combined, both accounted for approximately 85% of self-harm ED visits. Other mechanisms of self-harm combined, including fall, firearm, and hanging/suffocation, made up 2% of self-harm ED visits.*

*The brief also highlights opportunities for prevention, such as advancing protective factors as a part of prevention programming to build resilience and foster support at the individual, relationship, and community level to help decrease suicide risk. While the brief notes that prevention efforts should focus on the most common and lethal means of suicide (firearms and intentional drug overdoses), it also highlights the 2024 National Strategy for Suicide Prevention, which contains several goals, such as integrating suicide prevention into the culture of the workplace and into other community settings, and implementing research-informed suicide prevention communication activities in diverse populations, using best practices from communication science.*

*988. As of July 16, 2022, the National Suicide Prevention Lifeline number transitioned to 988, providing an easy to remember number that anyone can call, text, or chat to receive support when experiencing a suicidal, mental health and/or substance use related crisis. When Californians dial 988, they are directed to one of 12 Lifeline crisis call centers. California's call centers are part of the broader 988 Lifeline crisis center network. If a local crisis center is unable to take the call, the caller is automatically routed to a national backup crisis center. According to the 988 California Crisis Center Consortium, 988 routed 342,394 calls with an average answer speed of 34 seconds, answer rate of 85%, and call length of 12 minutes in 2023.*

*Striving for Zero. In 2019, pursuant to AB 114, Chapter 38, Statutes of 2017, the Mental Health Services Oversight and Accountability Commission (now the Behavioral Health Services Oversight and Accountability Commission, or BHSOAC) adopted Striving for Zero, California's Strategic Plan for Suicide Prevention, 2020-2025. The 2020-21 Budget Act authorized the Behavioral Health Services Oversight and Accountability Commission (BHSOAC) to allocate \$2 million support suicide prevention efforts consistent with the plan. The Behavioral Health Services Act (SB 326 [Eggman], Chapter 790, Statutes of 2023), requires the Office of Suicide Prevention (OSP), if established, to consult with the BHSOAC to implement suicide prevention efforts consistent with the strategic plan.*

*Suicide barriers can be effective. A review published in 2024 in the Journal of Preventive Medicine Reports titled, "Effectiveness of physical barriers to prevent suicide from high-risk bridges" identified that physical barriers work and are effective at reducing suicides by jumping from high-risk areas. The review also found that physical deterrent generally did not result in the substitution of a place or method. Over a longitudinal period, some areas even reduced their suicide rates to zero. Suicide barriers deter individuals who are at risk from jumping and buy additional time for intervention from bystanders and law enforcement.*

*Suicide deterrent infrastructure in California. In January 2024, a continuous physical suicide barrier was installed on the full length of the 1.7-mile span of the Golden Gate Bridge. Since its installation, the Golden Gate Bridge has seen a reduction of suicides by 73% and suicide attempts by 34%. The total project cost was approximately \$224 million and was funded through federal and state grants, bridge tolls, Proposition 63 monies, and individual and foundation donations.*

*CalTrans is currently developing a suicide deterrent system (estimated at \$124 million) for the San Diego-Coronado Bay Bridge (SDCBB). Although official figures have not been maintained, it is widely believed that approximately 400 deaths by suicide have occurred since opening in 1969. After the Golden Gate Bridge, SDCBB is recognized as the second most frequently used bridge for suicide in the state. The standard operating procedure for responding to suicide*

*attempts is bridge closure. In response, interim measures to address suicide incidents were implemented by installing four inch spikes on top of the bridge rail in 2019. Multiple suicides and suicide attempts have occurred since, resulting in bridge closures that have heavily affected travel time for residents of San Diego County.*

*In addition to the San Diego-Coronado Bay Bridge, CalTrans is also working on installing a suicide deterrent system across the Arroyo Simi Overhead Bridge on State Route 118. More than 20 documented attempts and suicides have occurred since 1994, with a majority of incidents occurring since 2009. The project is anticipated to be completed in December 2025. The total project cost is approximately \$10 million, according to the proposed State Highway Operation and Protection Program Fiscal Year 2024-25.*

### **According to the Author**

This bill aims to continue California's goal of working towards achieving zero suicides. The author says that, in order to do so, we must begin identifying areas of potential harm for at-risk individuals. Specifically, such harms are on our state's bridges and overpasses. It is the hope of the author that that this bill will help prevent a future tragedy from striking communities and to protect those in need.

### **Arguments in Support**

Didi Hirsch Mental Health Services is sponsoring this bill and states in support that CalTrans does not have a statewide suicide prevention policy in place for their bridges and roadways and that the state should not have to wait for a tragedy to strike to begin the process of developing safety measures in areas that possess a clear and present danger to any at-risk individual that may be considering taking their own life. Didi Hirsch says this legislation aims to protect at-risk individuals and help provide families with some relief knowing their state is being proactive about their loved one's safety.

### **Arguments in Opposition**

None.

## **FISCAL COMMENTS**

*The current version of this bill has not been analyzed by a fiscal committee.*

## **VOTES:**

### **ASM HEALTH: 15-0-0**

**YES:** Bonta, Chen, Addis, Aguiar-Curry, Arambula, Carrillo, Flora, Mark González, Krell, Patel, Celeste Rodriguez, Sanchez, Schiavo, Sharp-Collins, Stefani

### **ASM APPROPRIATIONS: 14-0-1**

**YES:** Wicks, Arambula, Calderon, Caloza, Dixon, Elhawary, Fong, Mark González, Hart, Pacheco, Pellerin, Solache, Ta, Tangipa

**ABS, ABST OR NV:** Sanchez

### **ASSEMBLY FLOOR: 79-0-0**

**YES:** Addis, Aguiar-Curry, Ahrens, Alanis, Alvarez, Arambula, Ávila Farías, Bains, Bauer-Kahan, Bennett, Berman, Boerner, Bonta, Bryan, Calderon, Caloza, Carrillo, Castillo, Chen, Connolly, Davies, DeMaio, Dixon, Elhawary, Ellis, Flora, Fong, Gabriel, Gallagher, Garcia,

Gipson, Jeff Gonzalez, Mark González, Hadwick, Haney, Harabedian, Hart, Hoover, Irwin, Jackson, Kalra, Krell, Lackey, Lee, Lowenthal, Macedo, McKinnor, Muratsuchi, Nguyen, Ortega, Pacheco, Papan, Patel, Patterson, Pellerin, Petrie-Norris, Quirk-Silva, Ramos, Ransom, Celeste Rodriguez, Michelle Rodriguez, Rogers, Blanca Rubio, Sanchez, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Ta, Tangipa, Valencia, Wallis, Ward, Wicks, Wilson, Zbur, Rivas

**UPDATED**

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