

Behavioral Health Services: Behavioral Health Services Act & Data Presentation

**North County Community Leadership Team Meeting
Wednesday, September 3, 2025**

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Sandi Htut, MPH, CHES®, Senior Epidemiologist, Population Health Unit
Isaiah Reed, MSc, MA, Epidemiologist II, Population Health Unit



Land Acknowledgement



“

We acknowledge that the San Diego region is made up of the traditional lands of the Kumeyaay, Luiseño/Payómkaichum, Cahuilla and Cupeño/Kuupangaxwichem Peoples.

We acknowledge the harmony that existed among the land, nature, and its original Peoples, who have since endured displacement, persecution, and systemic oppression.

We pay our respect to the unceded territory and homelands of the 18 federally recognized tribes in our region.

We honor the ancestral grounds and sovereignty of the Tribal Nations, whose resilience and strength inspire forward movement towards more equitable and sustainable programs, policies, and practices.

”



COUNTY OF SAN DIEGO
HEALTH AND HUMAN SERVICES AGENCY



LIVE WELL
SAN DIEGO

Behavioral Health Services (BHS) & Behavioral Health Services Act (BHSA)

What to Know About Today?



Agenda:

- Brief overview of Behavioral Health Services (BHS)
- Explaining the Behavioral Health Services Act (BHSA) & Goals
- Gentle heads-up – due to the sensitivities of the subject matter we will discuss today, we want to encourage you to pause, step away, and prioritize your well-being if activated or distressed
 - Calling/Texting 9-8-8 as a resource
- Data Discussion will include
 - Self-harm, Suicide, Overdose, & More
- During today's discussion, we want to hear from YOU and address your questions related to the data being shared, but due to time, we ask you to use this QR code to share your questions during the presentation (image to the right)
- Remind you to utilize your handouts to review some of today's key takeaways



Behavioral Health Services Mission



Advance equity and accessibility to quality behavioral health supports and care to ensure all San Diego County residents can achieve and sustain wellness.



Behavioral Health Services: Our Role



CONTRACTOR

We fund various behavioral health services through contracts with community partners and providers.

SERVICE PROVIDER

We directly provide services at San Diego County Psychiatric Hospital, Edgemoor, and mental health clinics throughout the region.

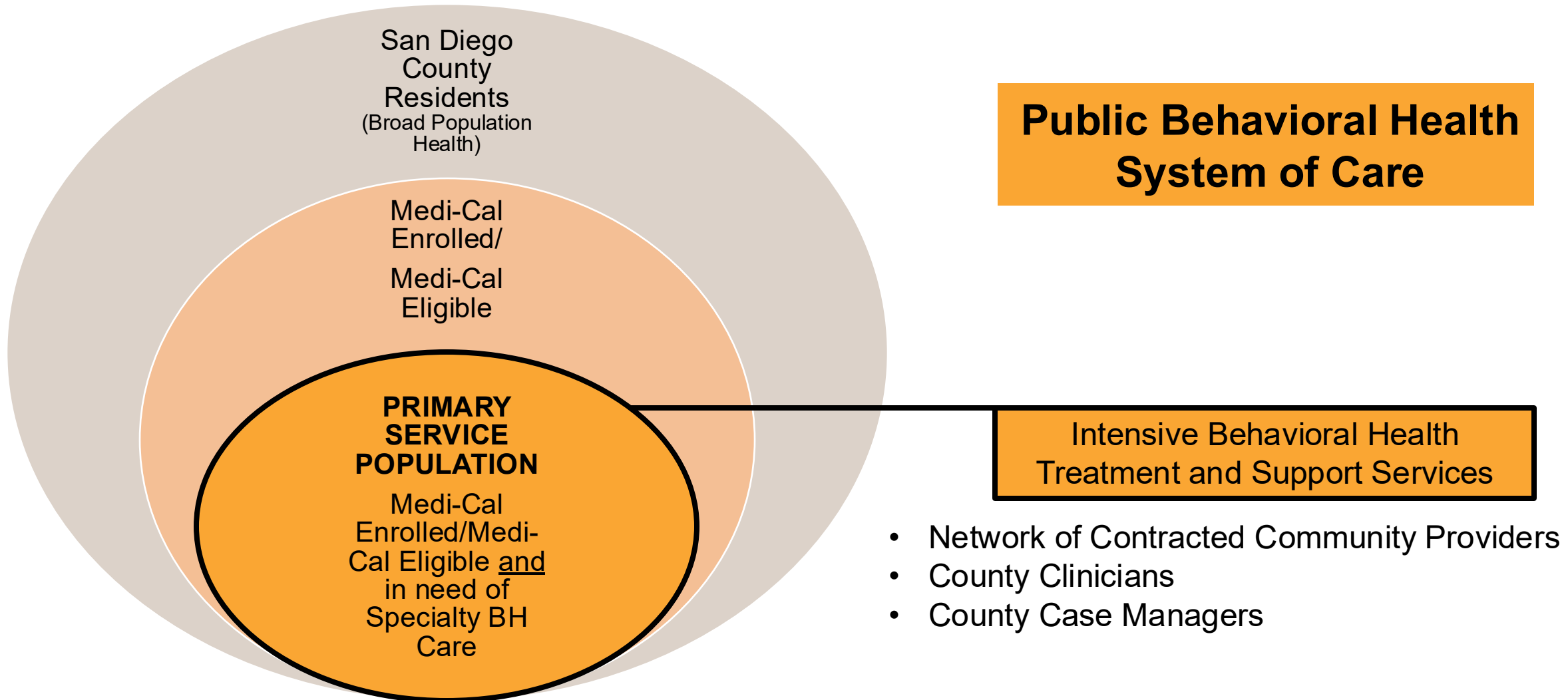
HEALTH PLAN

We serve as the Specialty Mental Health Plan for people enrolled in Medi-Cal with a serious mental illness.

PUBLIC HEALTH

We assess behavioral health at the population level and do what we can to address regional trends, working closely with our Public Health partners

Behavioral Health Services: Who We Serve



Behavioral Health Services Act (BHSA)



- Established via Proposition 1 (passed by CA voters in March 2024)
- Replaces existing Mental Health Services Act (MHSA); Changes in funding

Main goals:

1. Reach and serve high need priority populations (e.g., justice involved, those experiencing homelessness, among others)
2. Increase access to substance use disorder services, housing interventions, and evidence-based and community-defined practices
3. Expand behavioral health workforce
4. Focus on outcomes, transparency, accountability, and equity

➤ **Emphasis on Data**

Community Behavioral Health Data

- **Death data is preliminary:** Data may change near the end of the year as cases are closed.
- **Small Numbers Suppressed:** Counts under 11 are hidden to protect privacy and avoid unstable or misleading estimates.
- **Timeframe:** Years vary by source based on availability. Some years may be pooled (combined) for stability.
- **Geography:** Death and Emergency Department (ED) encounter data are based on the resident's ZIP code, not the location of the event.
- **Subregional Areas (SRAs):** Combinations of census tracts and are named for the largest city or community within them. Their boundaries generally remain consistent over time to allow for meaningful statistical comparisons. SRAs are assigned to larger Health & Human Services Agency (HHSA) Regions.
- **ED Data Scope:** Includes only civilian hospitals. Encounters include nonfatal dispositions, as death data was examined separately. ED encounters capture both ED discharges and ED discharges resulting in a hospital admission.
- **Behavioral Health Indicators:** Based on any mention of relevant ICD-10-CM codes (i.e., primary/secondary/other diagnosis, external cause).

Language Guidelines



Instead of this...

Committed suicide, completed suicide,
or suicide victim

Unsuccessful suicide, failed suicide

Successful suicide attempt



...**Say this**

**Died by suicide, took their own life,
or suicide death**

**Suicide attempt, nonfatal suicide
attempt**

Fatal suicide attempt

Counts

- A measure indicating an amount (e.g., individuals, items, events).
- Example: *There are six HHSA regions in San Diego County.*

Proportions

- The comparison of a part to the whole (e.g., percentage, fraction).
- Example: *In 2023, 54% of adults residing in San Diego County reported that they had tried marijuana or hashish during their lifetime.*

Rates

- A measure of the frequency showing how often an event occurs in a defined population over a specified period of time.
- Example: During 2023, the rate of emergency department encounters involving serious mental illness among San Diego County residents was **2,872.3 encounters per 100,000 population.**



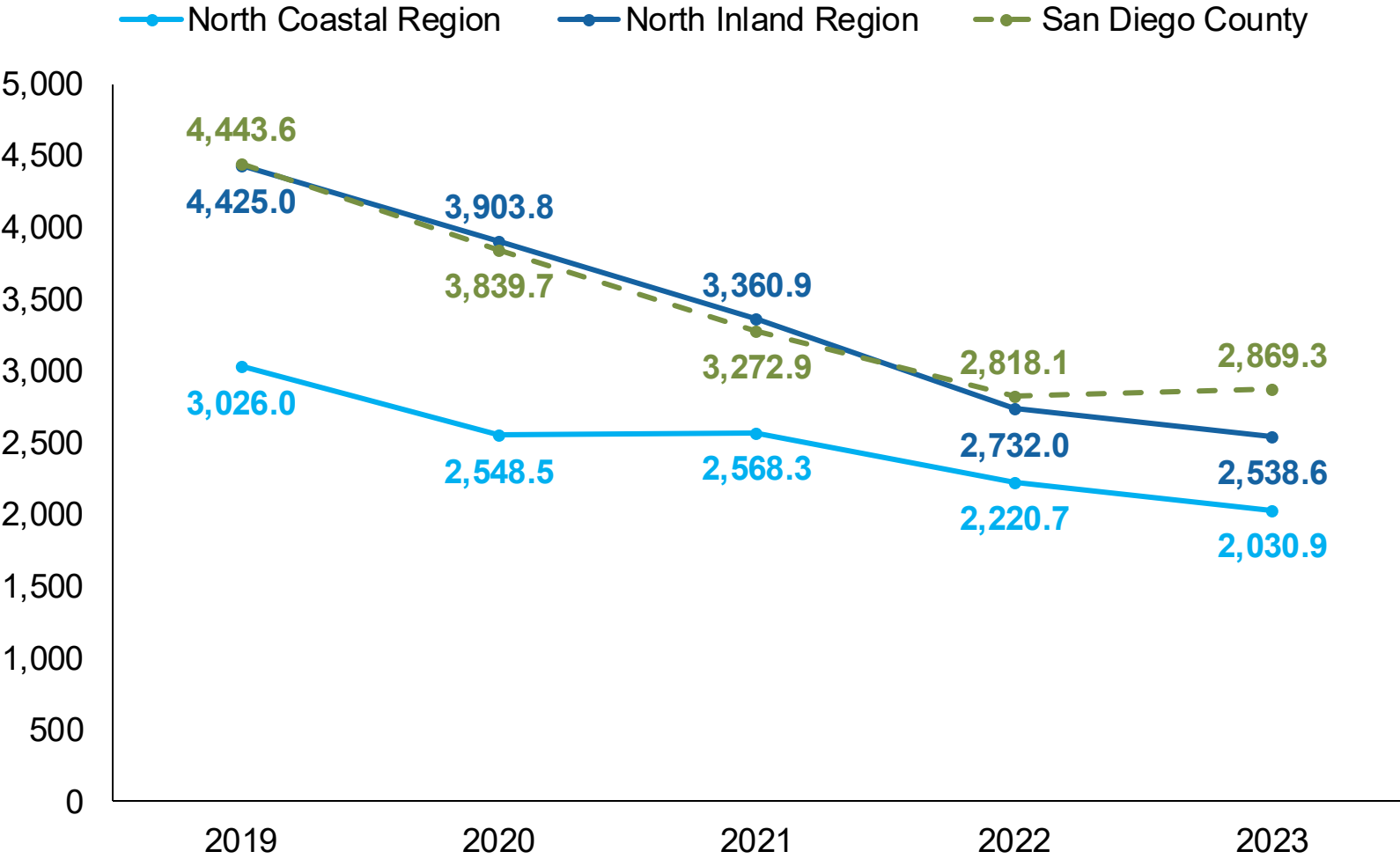
COUNTY OF SAN DIEGO
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County Mental Health Data

Serious Mental Illness Emergency Department Encounter Rates, 2019-2023



TRENDS	2019 vs 2023	2022 vs 2023
North Coastal Region	↓33%	↓9%
North Inland Region	↓43%	↓7%
San Diego County	↓35%	↑2%

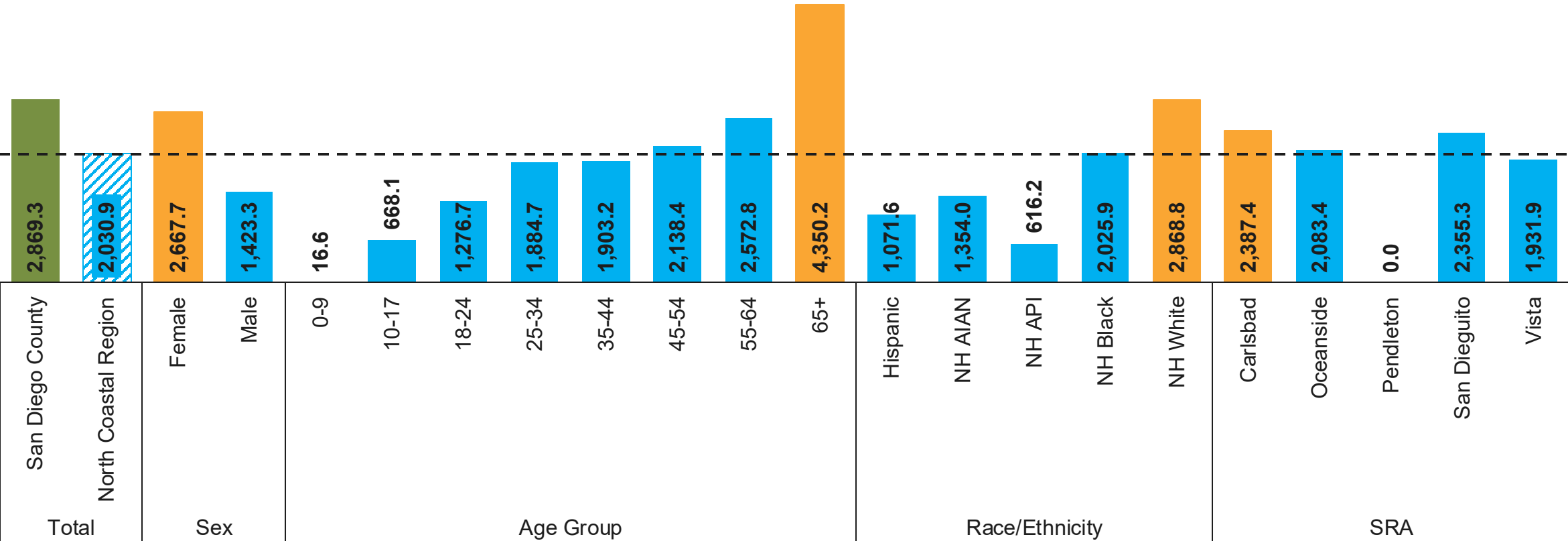
Rate per 100,000 residents. Source: California Department of Health Care Access and Information (HCAI), Emergency Department Database and Patient Discharge Database, 2019-2023. San Diego Association of Governments (SANDAG) Population Estimates, 2023 (v. 1/2025)

Serious Mental Illness Emergency Department Encounter Rates, 2023



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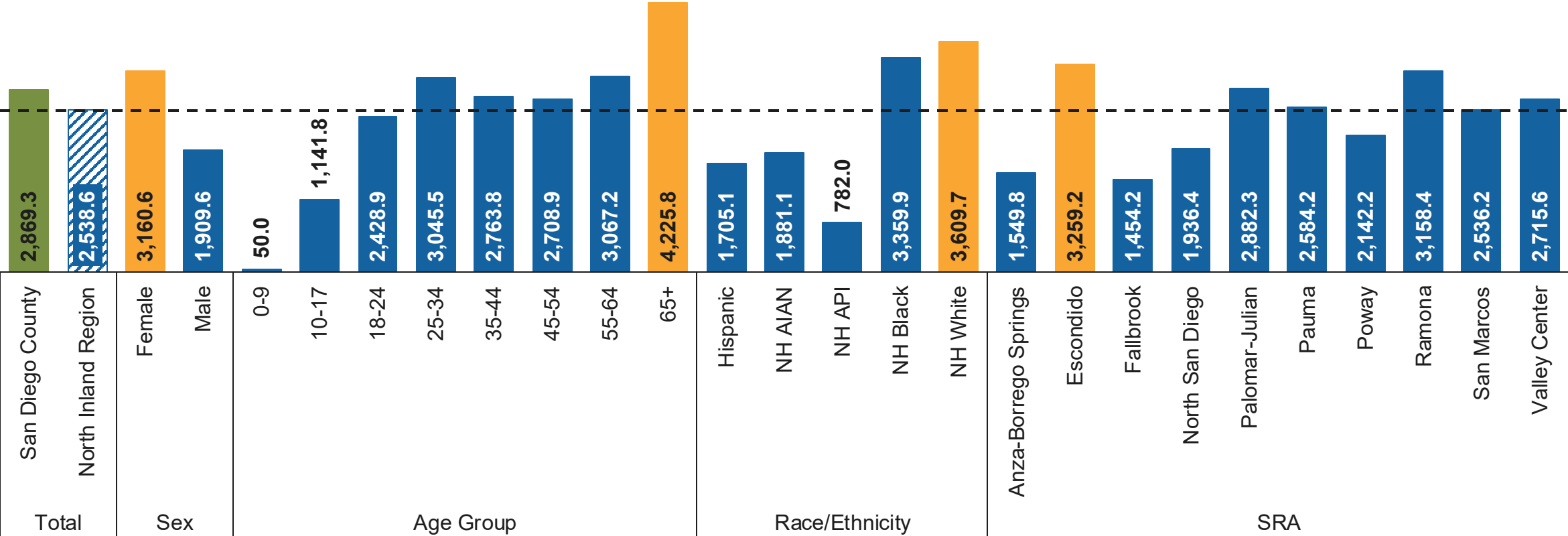
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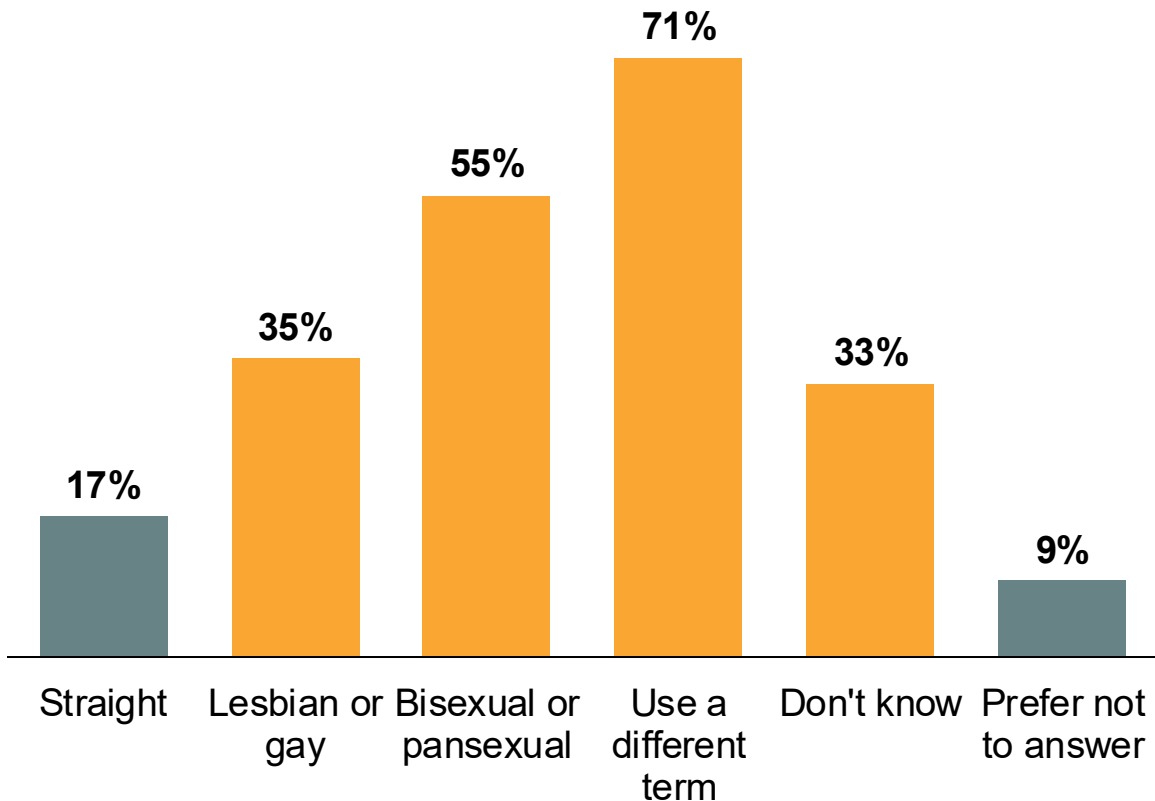
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Suicidal Ideation

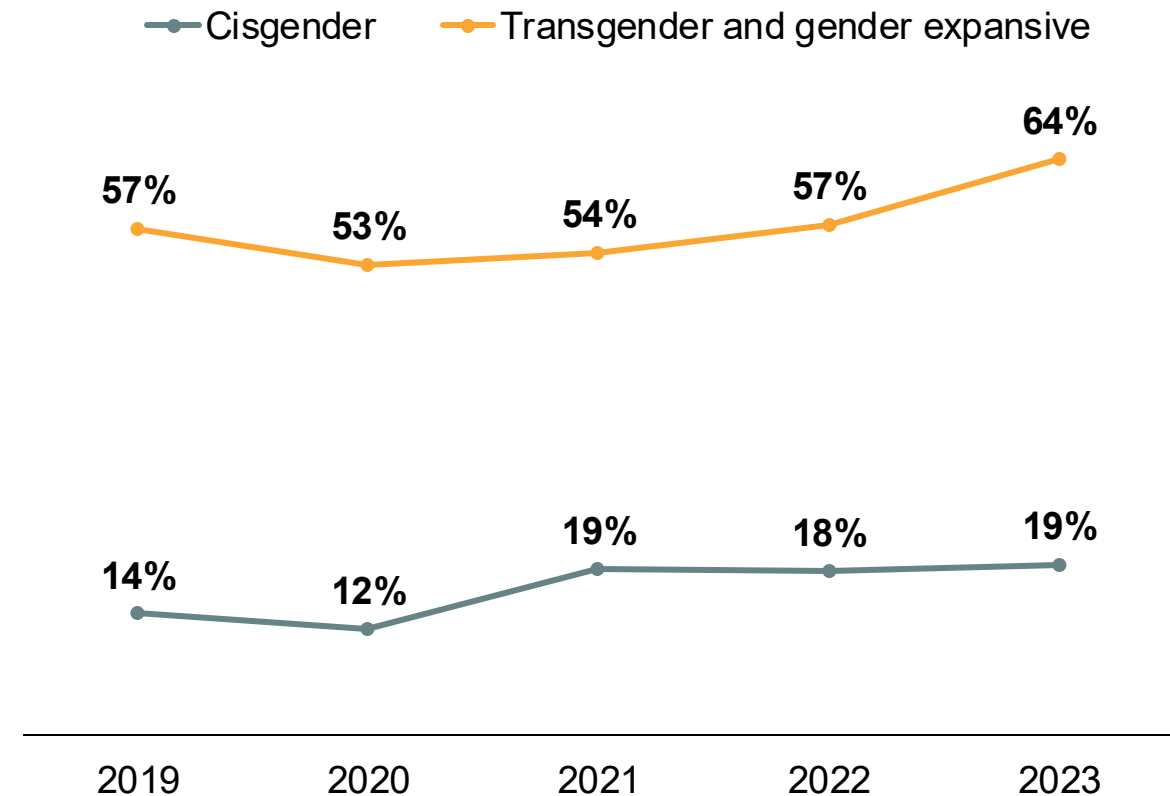
Percent Among Adults by Sexual Orientation (2023) & Gender Identity (2019-2023)



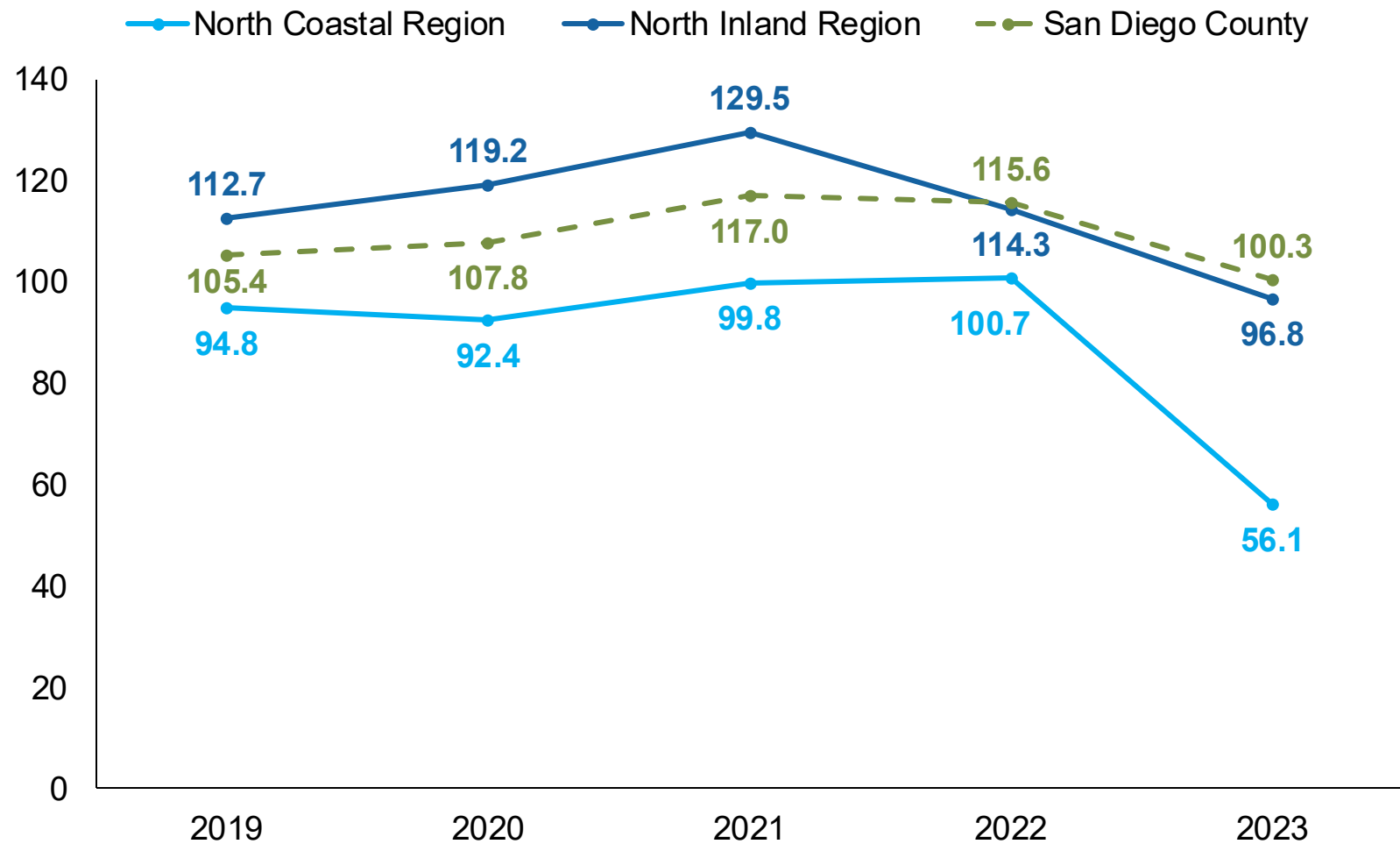
Percent of Adults 18+ that Ever Seriously Considered Suicide, by Sexual Orientation, California, 2023



Percent of Adults 18+ that Ever Seriously Considered Suicide, by Gender Identity, California, 2019-2023



Suicide Attempts and Intentional Self-Harm Emergency Department Encounter Rates, 2019-2023



TRENDS	2019 vs 2023	2022 vs 2023
North Coastal Region	↓41%	↓44%
North Inland Region	↓14%	↓15%
San Diego County	↓5%	↓13%

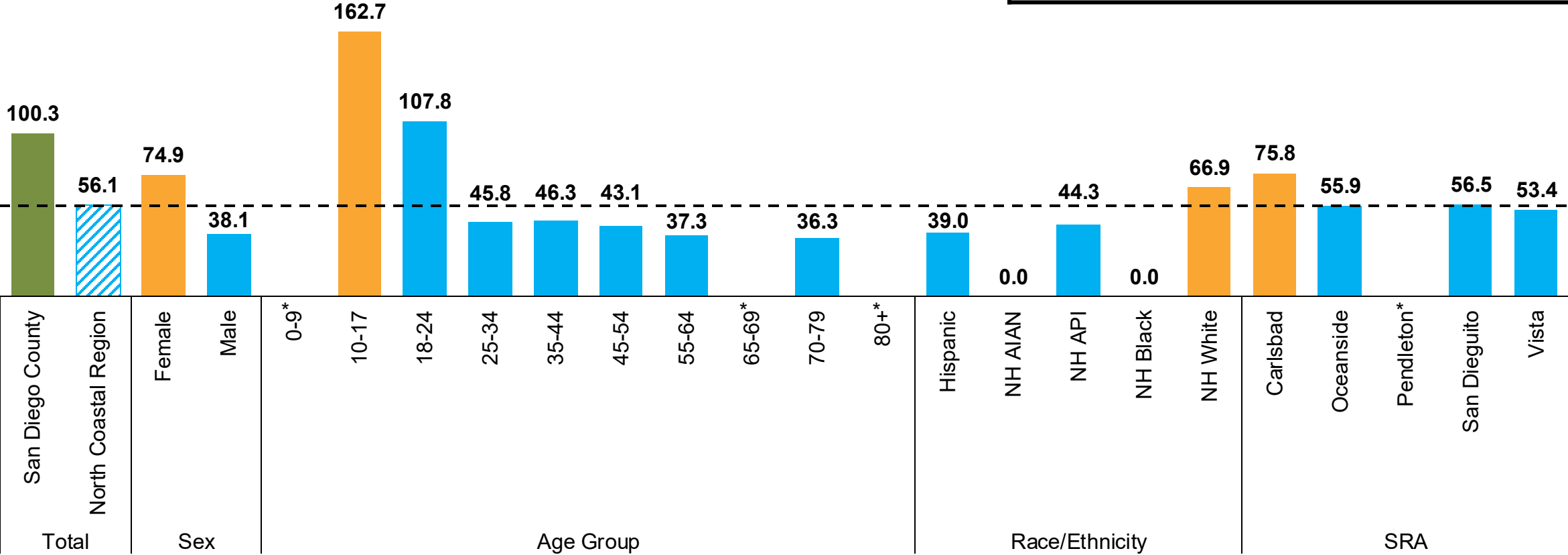
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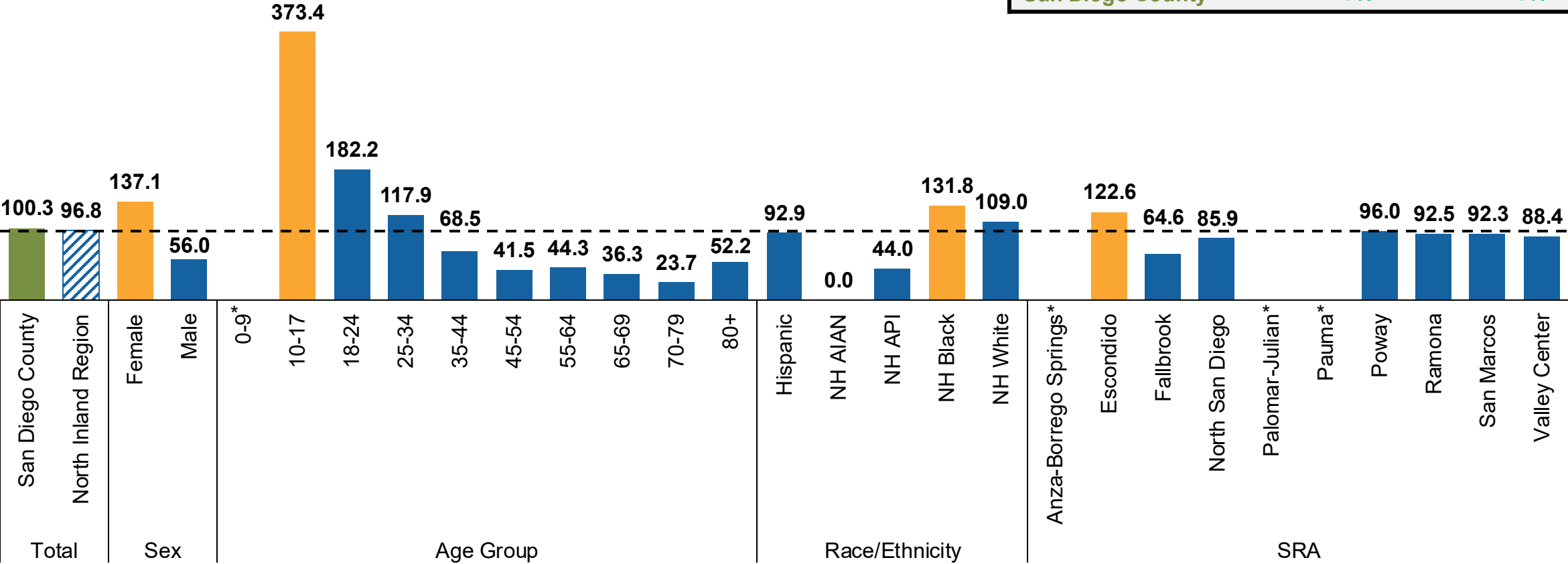
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Suicide Attempts and Intentional Self-Harm Emergency Department Encounter Rates, 2023



North Inland Region

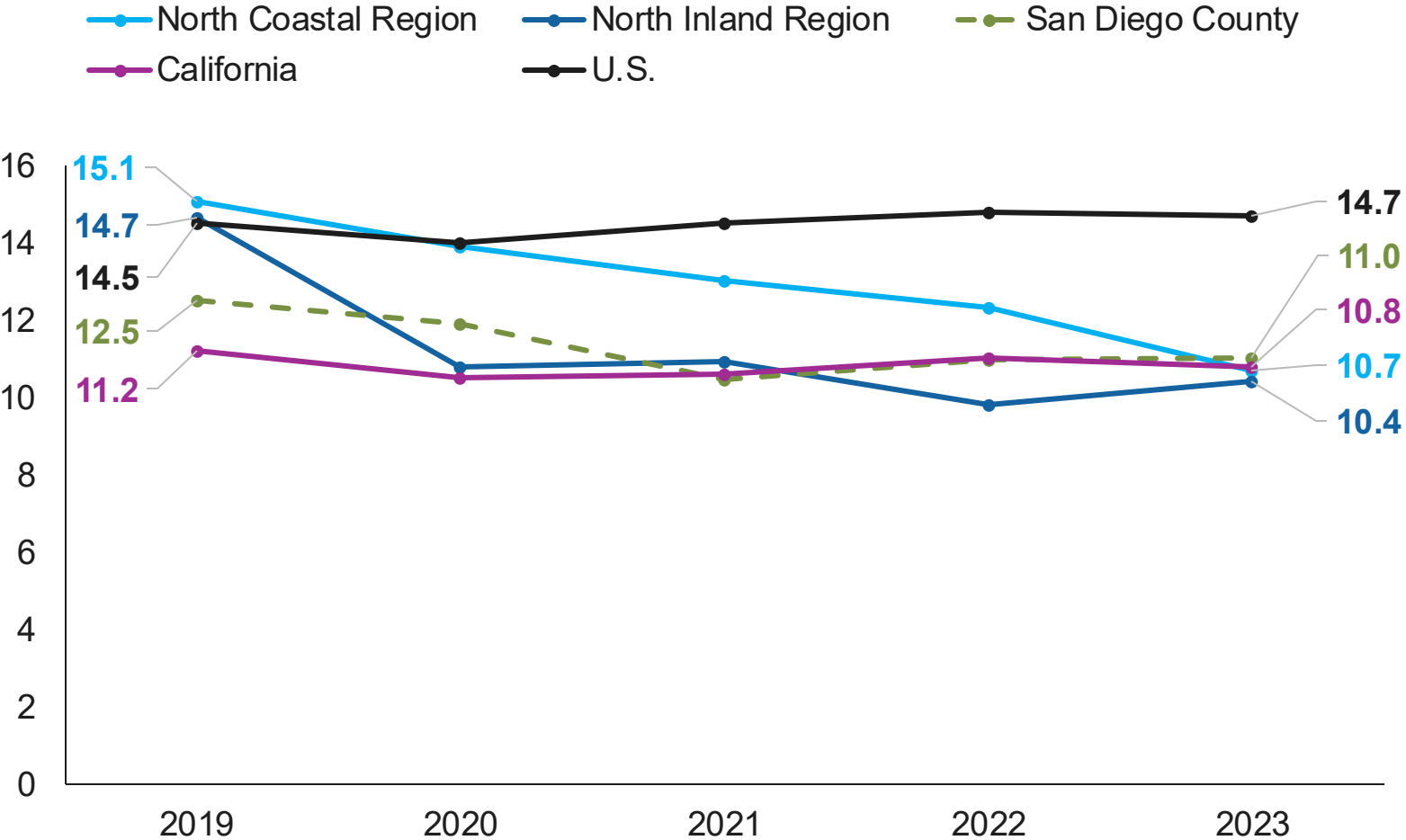
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Suicide Deaths

Rate Comparisons, 2019-2023



TRENDS	2019 vs 2023	2022 vs 2023
North Coastal Region	↓29%	↓13%
North Inland Region	↓29%	↑6%
San Diego County	↓12%	↑1%
California	↓4%	↓2%
United States	↑1%	↓1%

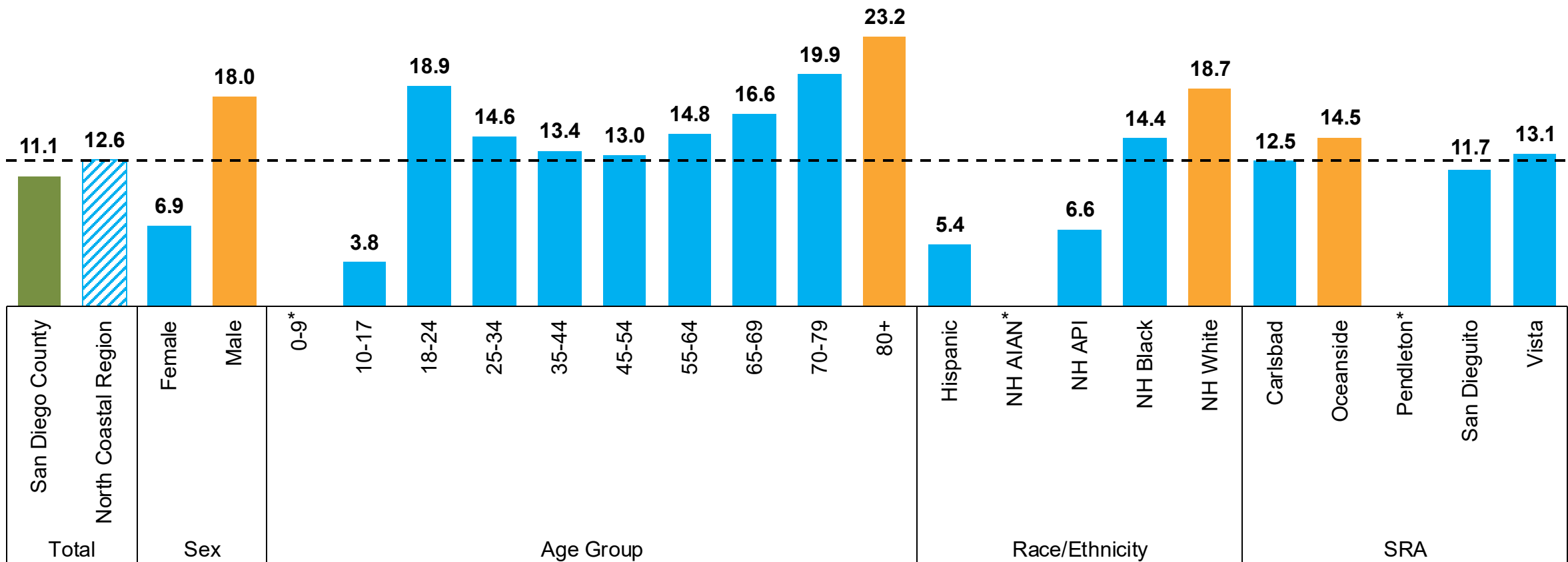
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Suicide Deaths

Pooled Total Rates, 2020-2024



North Coastal Region



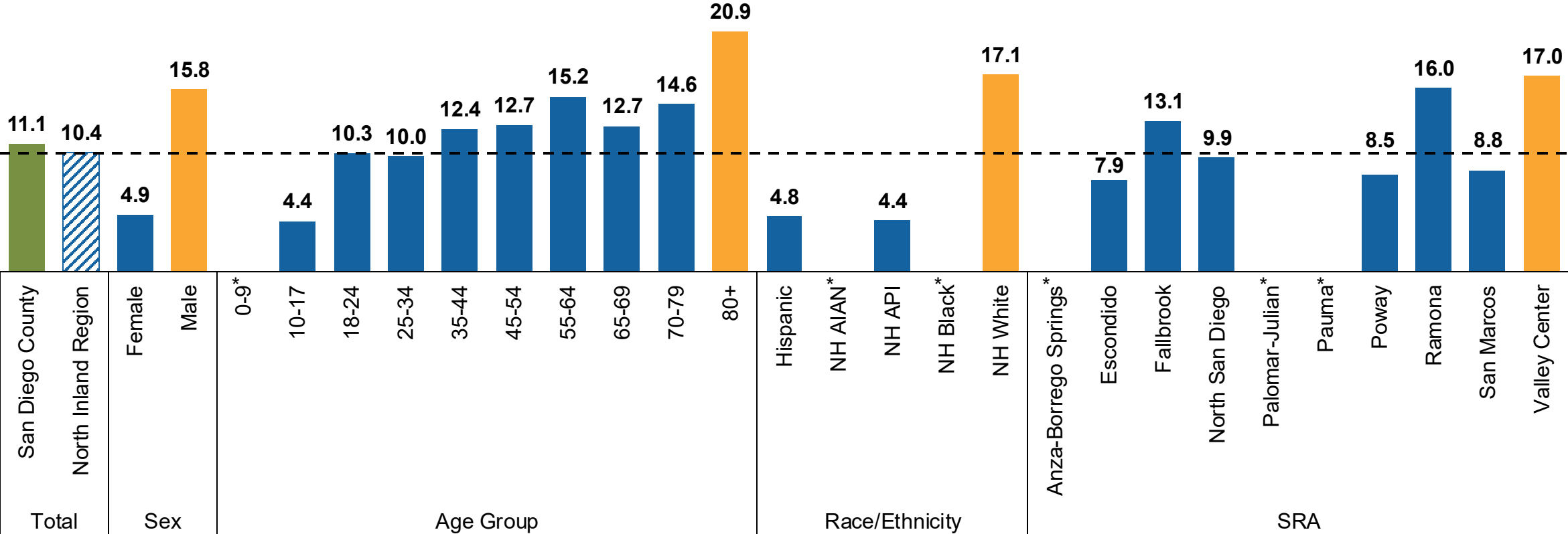
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Suicide Deaths

Pooled Total Rates, 2020-2024



North Inland Region



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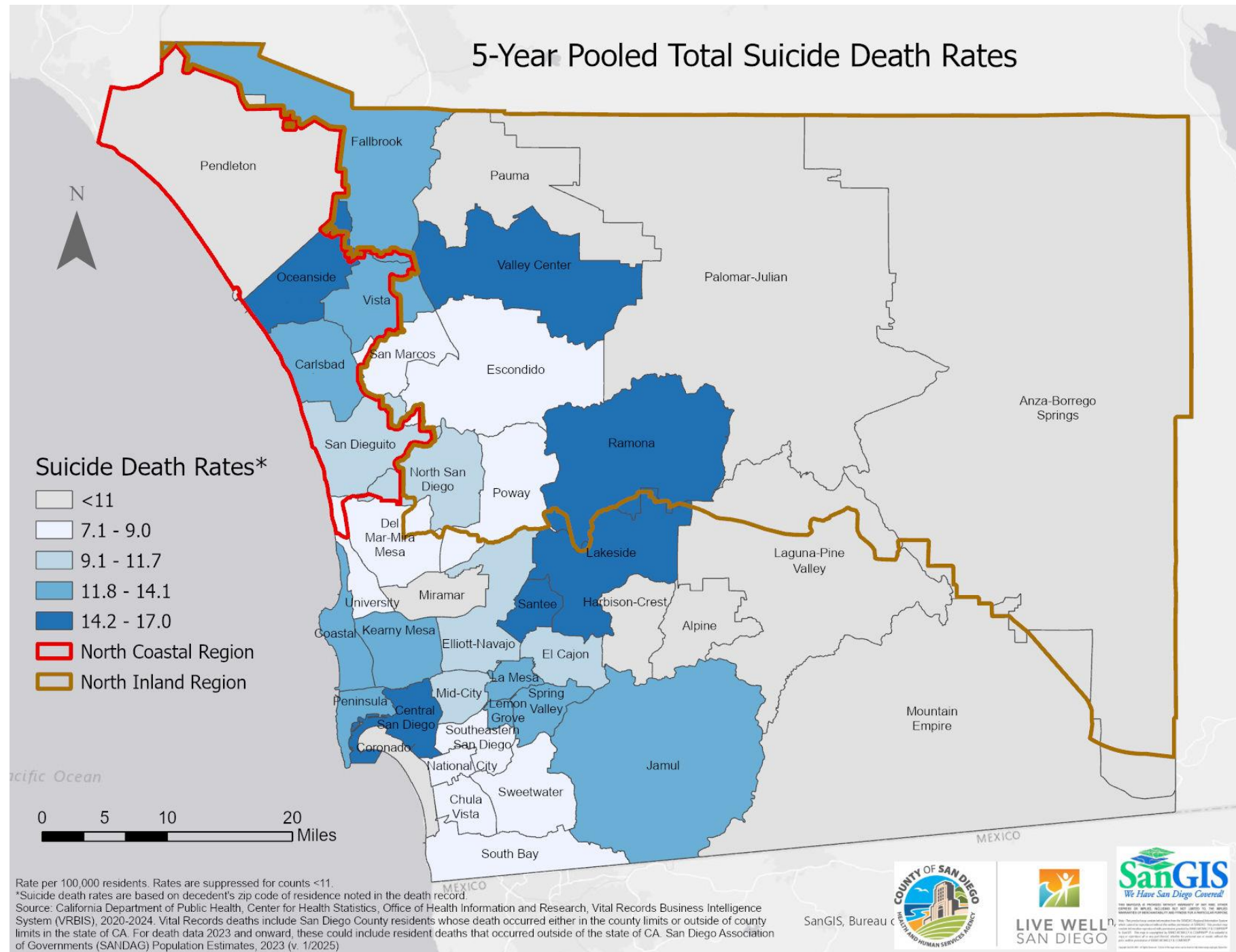
Suicide Deaths Subregional Area (SRA) Rates, San Diego County, Pooled Totals, 2020-2024

Rates for the **North Coastal Region**
were highest in:

Oceanside

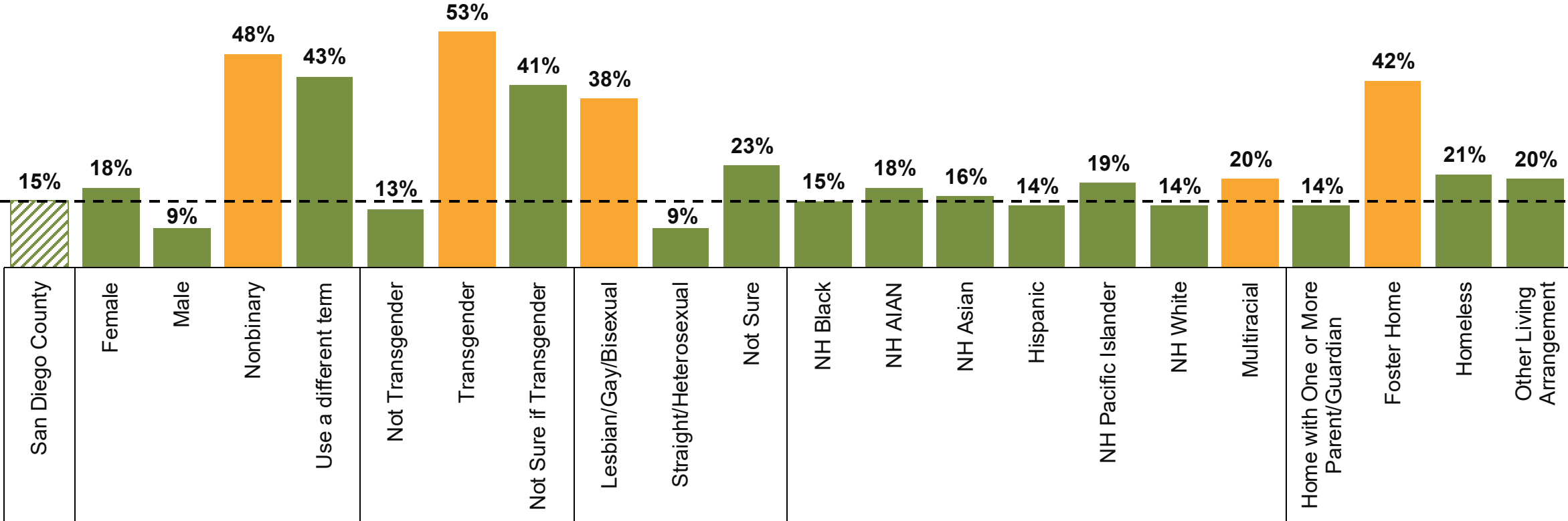
Rates for the **North Inland Region**
were highest in:

Valley Center and Ramona



Considered Suicide in Past 12 Months

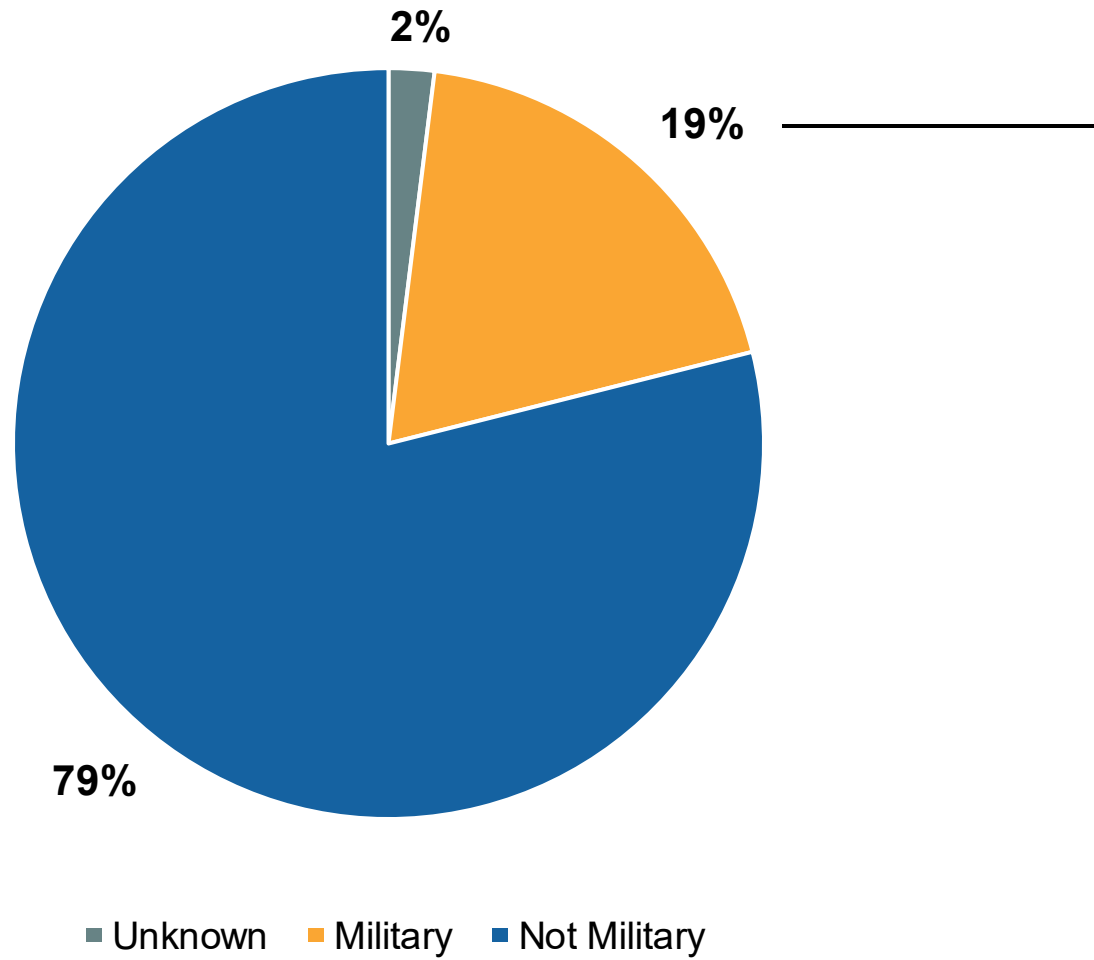
Percent Reported by 9th Graders, San Diego County, 2021-2023



AI/AN = American Indian/Alaska Native. Foster home includes foster home, group care, or waiting placement. Homeless includes friend's home, hotel or motel, shelter, car, campground, or other transitional or temporary housing. Other living arrangement includes other relative's home, a home with more than one family, or other living arrangement. Source: California Healthy Kids Survey, 2021-2023. Accessed online 5/23/25 at <https://calschls.org/reports-data/public-dashboards>

Suicide Deaths

Percent by Military Status, Pooled Totals, San Diego County, 2020-2024

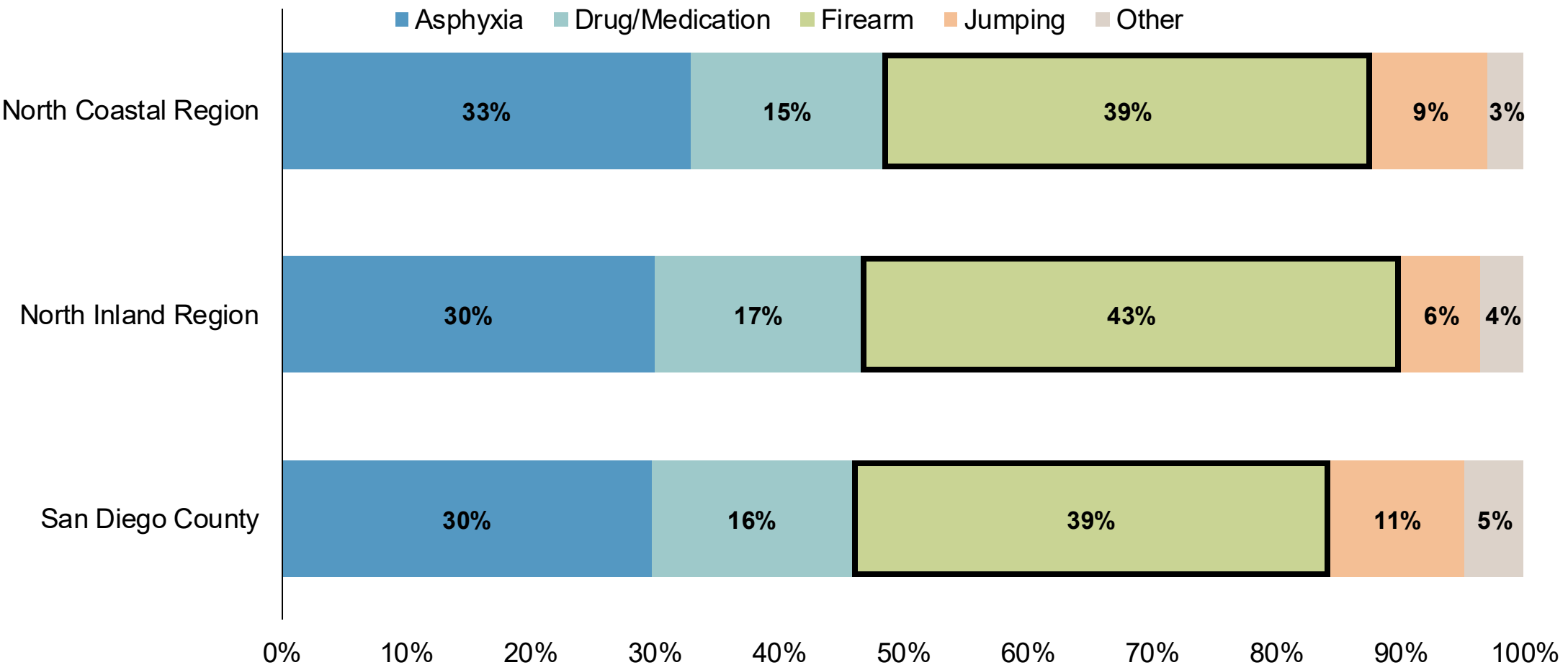


Suicide deaths among **military-affiliated residents** of San Diego County were predominantly:

- **male** (94.0%)
- **non-Hispanic White** (70.8%)
- **ages 65+** (35.8%)

Suicide Deaths

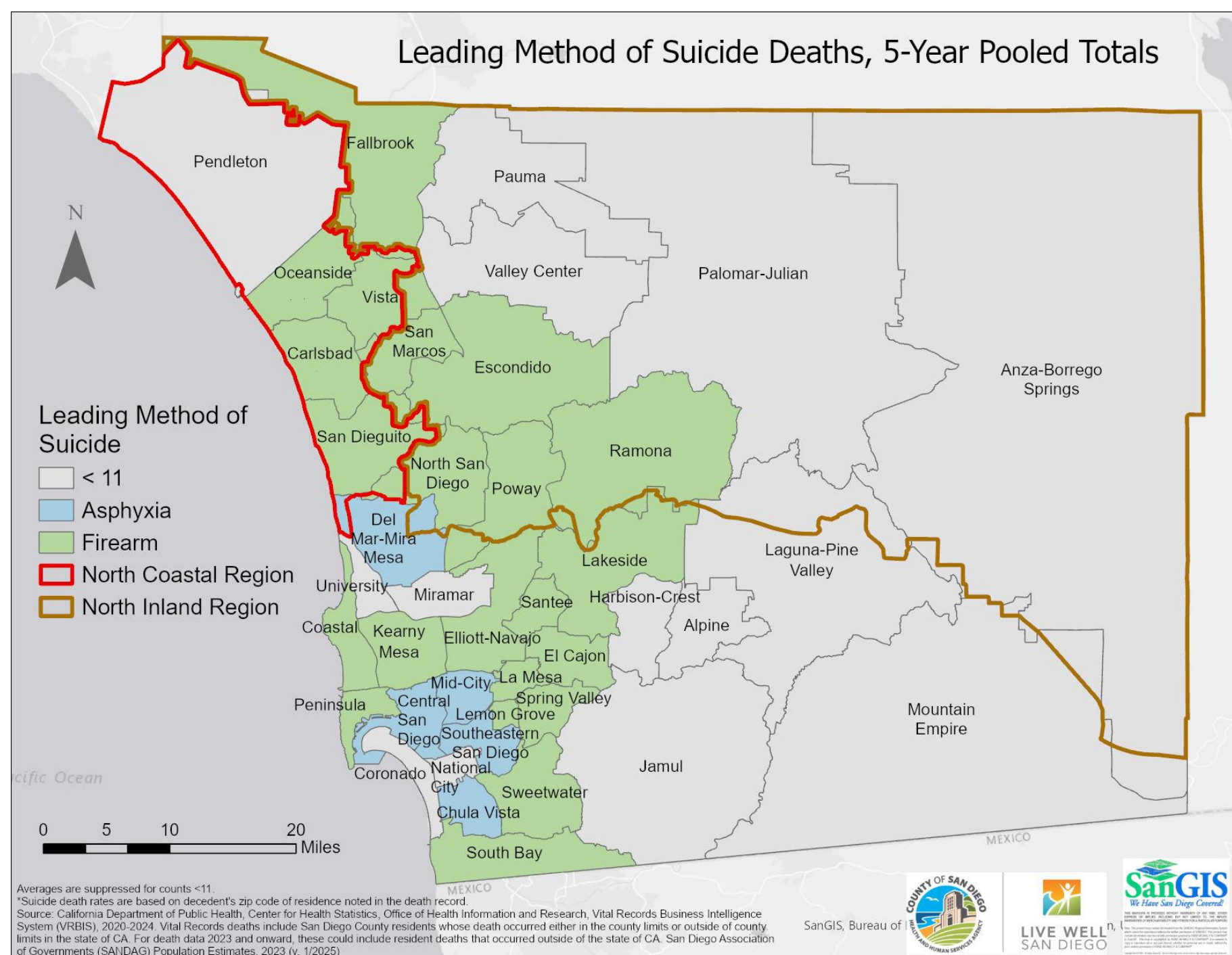
Pooled Total Rates by Method, 2020-2024



Percent of total suicides. Other method includes intentional self-harm by crashing of motor vehicle, by explosive material, by smoke/fire/flames, by steam/hot vapors/hot objects, by sharp or blunt object, by terrorism, or other or unspecified means. Source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS), 2020-2024. (5/15/25) Vital Records deaths include San Diego County residents whose death occurred either in the county limits or outside of county limits in the state of CA. For death data 2023 and onward, these could include resident deaths that occurred outside of the state of CA. San Diego Association of Governments (SANDAG) Population Estimates, 2023 (v. 1/2025)

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Suicide Deaths Subregional Area (SRA) Leading Methods Involved, San Diego County, Pooled Totals, 2020-2024





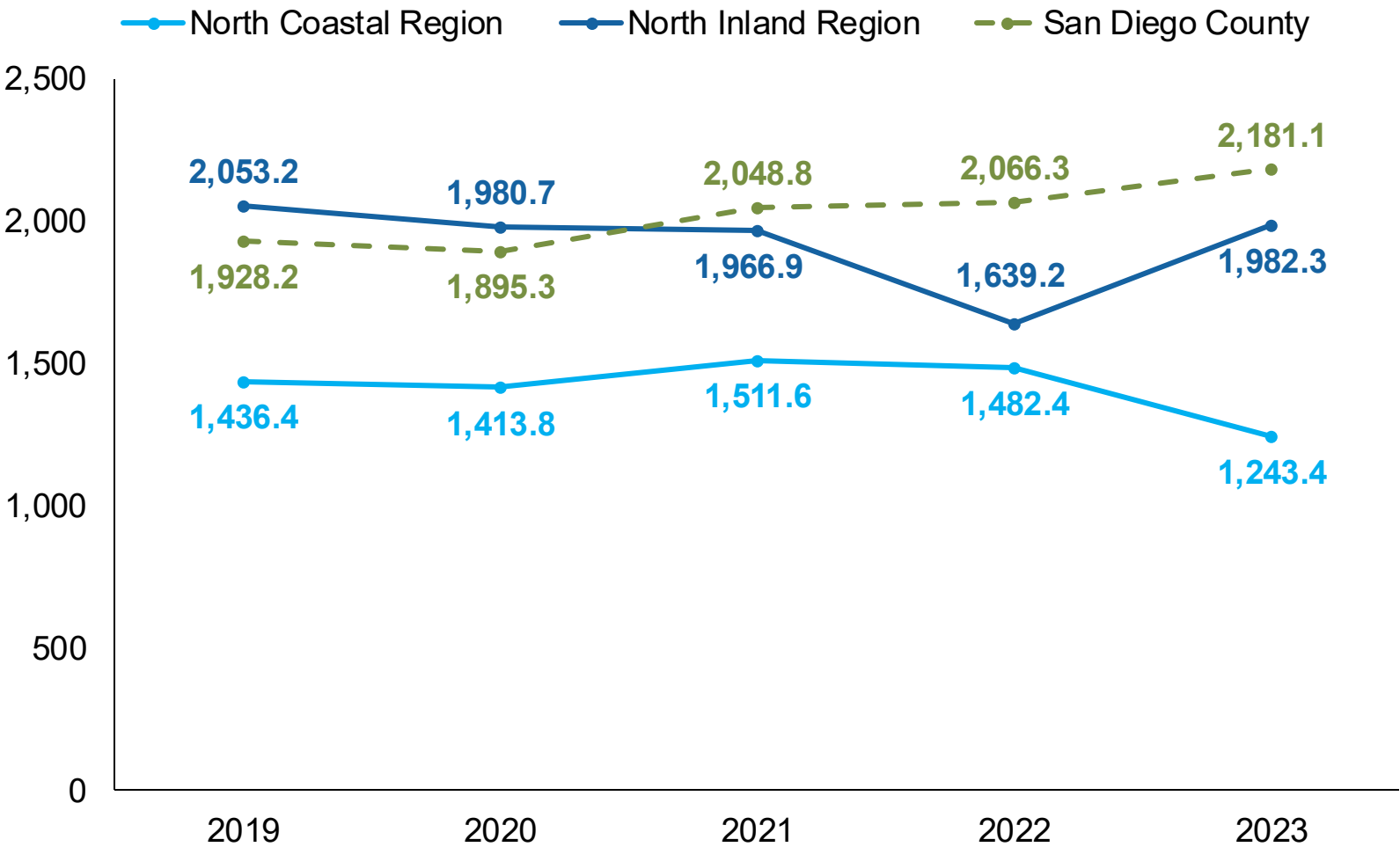
COUNTY OF SAN DIEGO
HEALTH AND HUMAN SERVICES AGENCY



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SAN DIEGO

County Substance Use Data

Substance-Related Disorder Emergency Department Encounter Rates, 2019-2023



TRENDS	2019 vs 2023	2022 vs 2023
North Coastal Region	↓13%	↓16%
North Inland Region	↓4%	↑21%
San Diego County	↑13%	↑6%

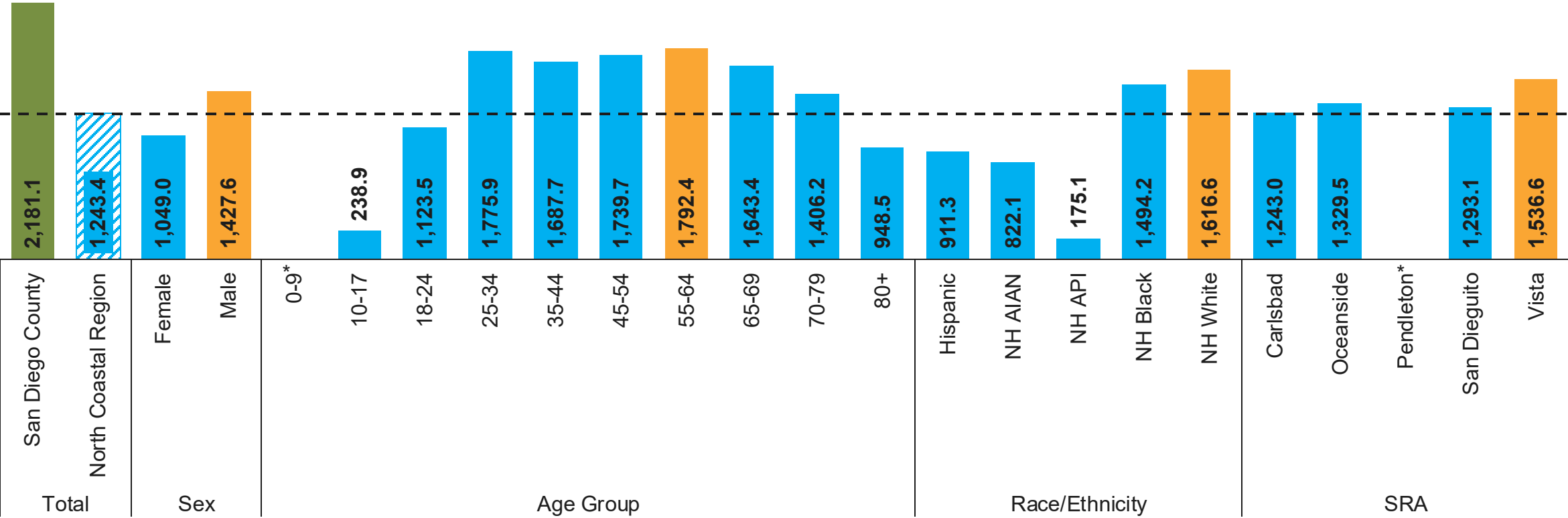
Rate per 100,000 residents. Source: California Department of Health Care Access and Information (HCAI), Emergency Department Database and Patient Discharge Database, 2019-2023. San Diego Association of Governments (SANDAG) Population Estimates, 2023 (v. 1/2025)

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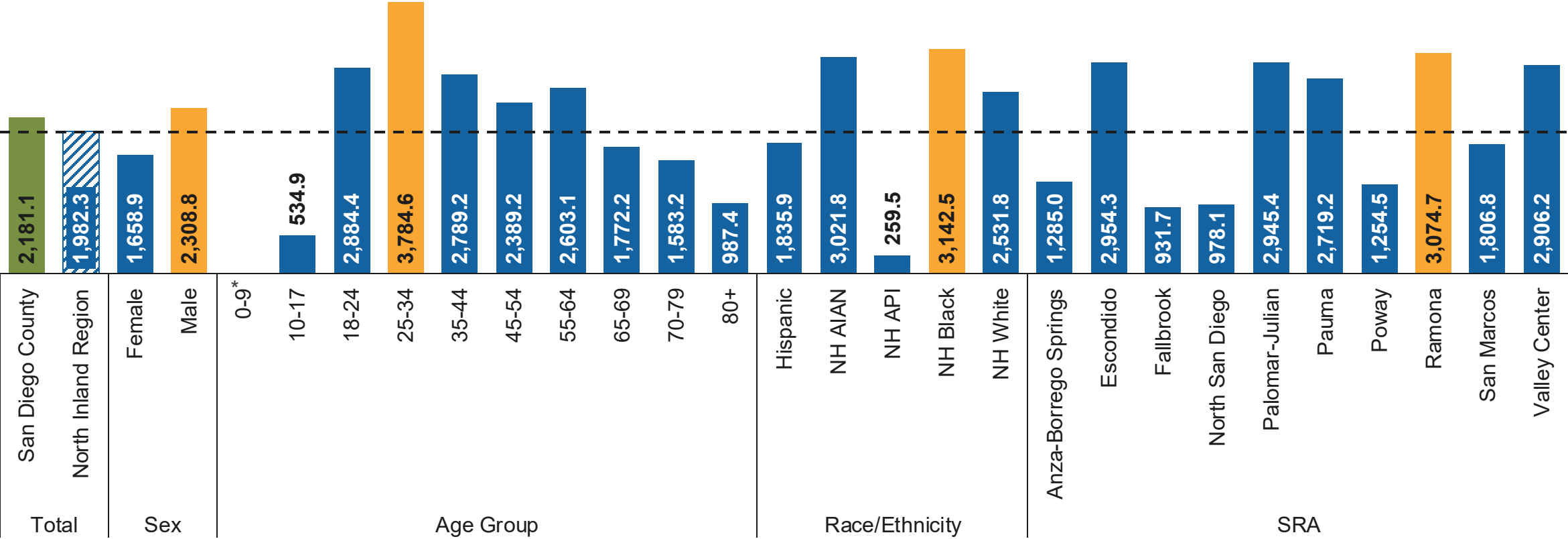
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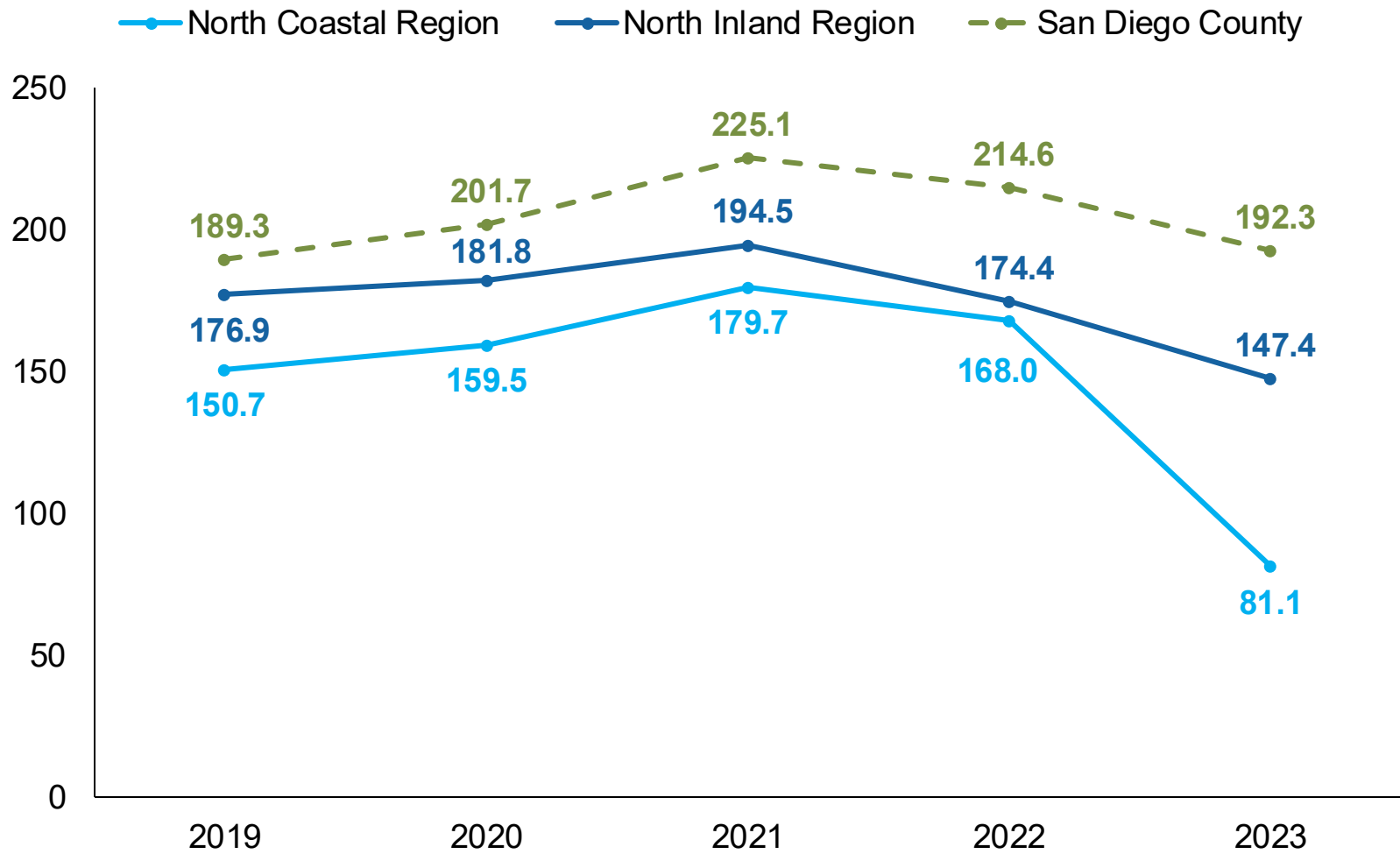
North Inland Region

TRENDS	2019 vs 2023	2022 vs 2023
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Nonfatal Overdose Emergency Department Encounter Rates, 2019-2023



TRENDS	2019 vs 2023	2022 vs 2023
North Coastal Region	↓46%	↓52%
North Inland Region	↓17%	↓16%
San Diego County	↑2%	↓10%

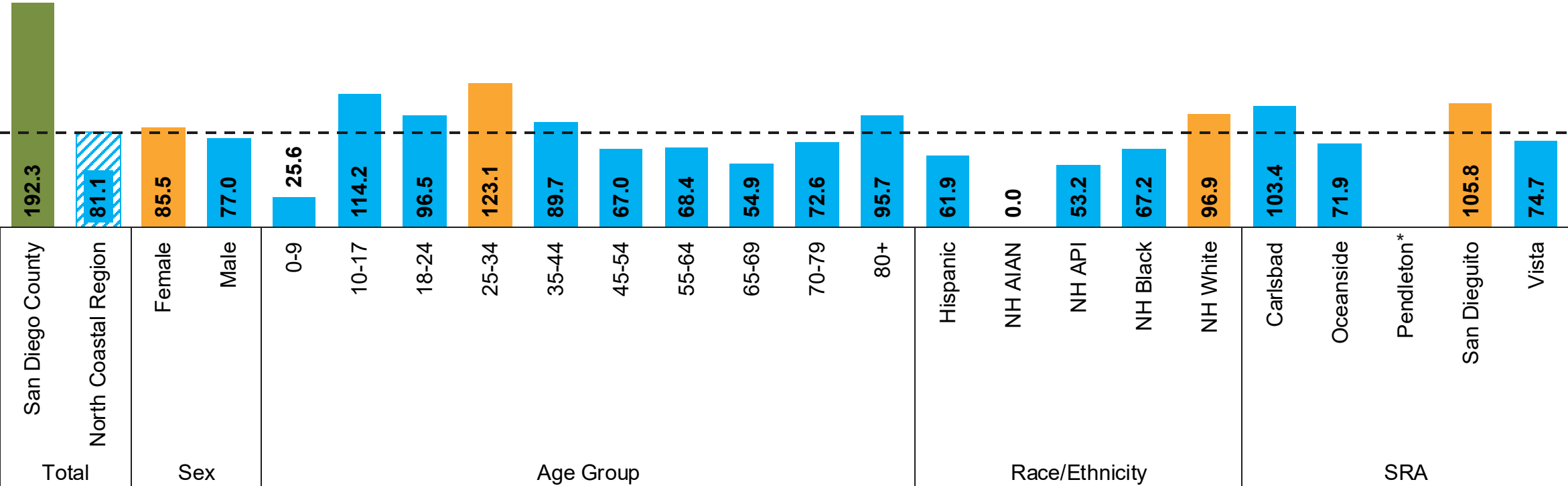
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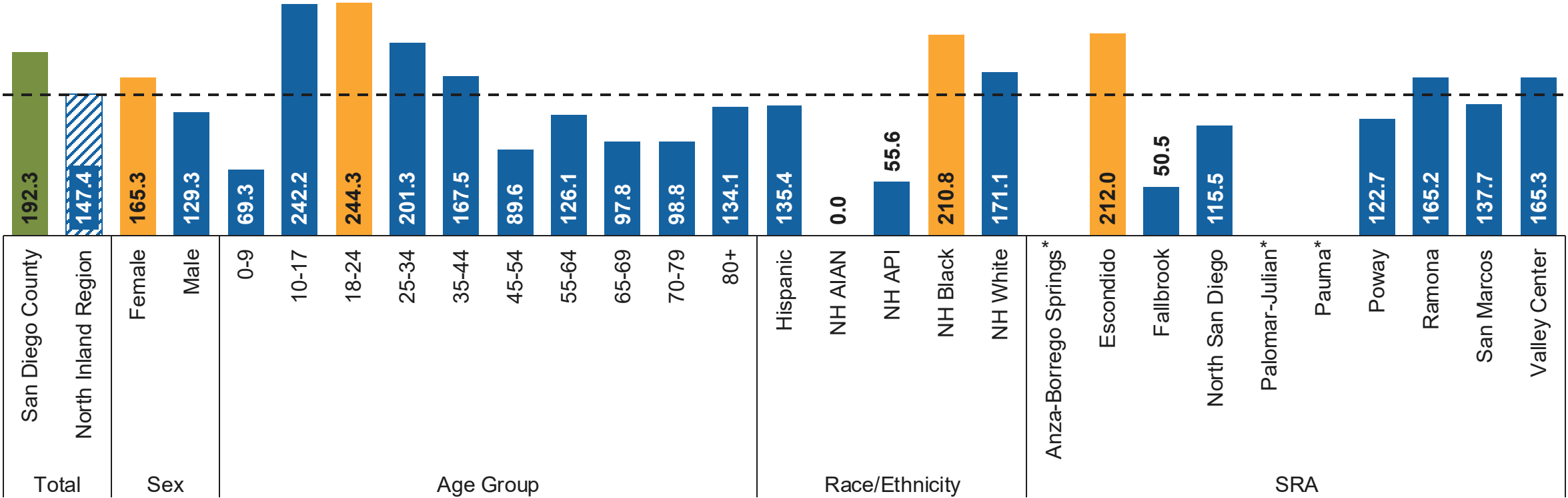
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Nonfatal Overdose Emergency Department Encounter Rates, 2019-2023



North Inland Region

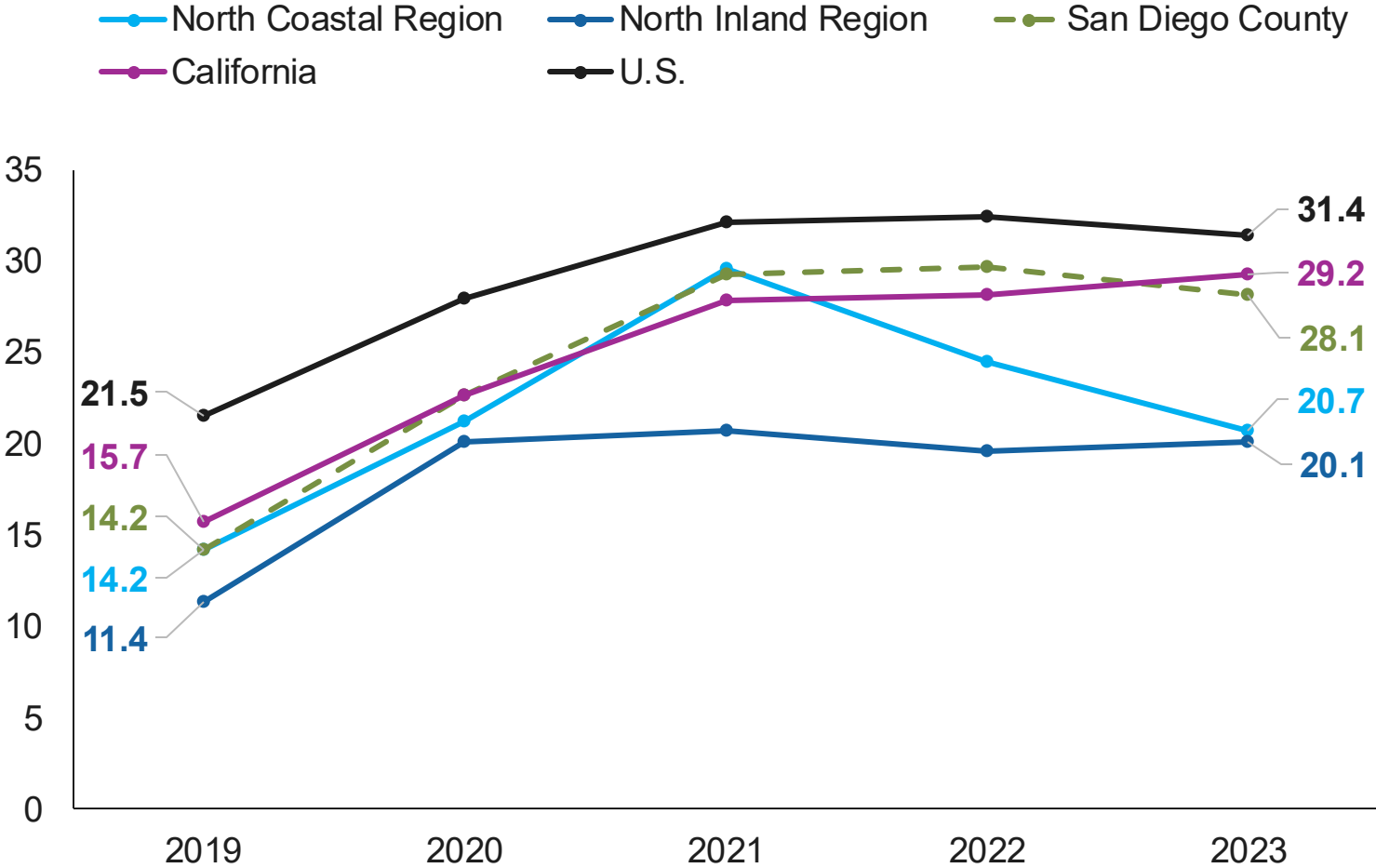
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Overdose Deaths

Rate Comparisons, 2019-2023



TRENDS	2019 vs 2023	2022 vs 2023
North Coastal Region	↑46%	↓16%
North Inland Region	↑76%	↑3%
San Diego County	↑98%	↓5%
California	↑86%	↑4%
United States	↑46%	↓3%

Rate per 100,000 residents. San Diego County rates are from vital records data to be consistent with the rest of the report. California and United States rates are from CDC Wonder. Source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS), 2019-2023. (5/15/25) Vital Records deaths include San Diego County residents whose death occurred either in the county limits or outside of county limits in the state of CA. For death data 2023 and onward, these could include resident deaths that occurred outside of the state of CA. Centers for Disease Control and Prevention (CDC), National Center for Health Statistics (NCHS), Underlying Cause of Death 1999-2020 on CDC WONDER Online Database, released 2021. Underlying Cause of Death by Single Race 2018-2023 on CDC WONDER Online Database, released 2025. Data are compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed 4/2025.

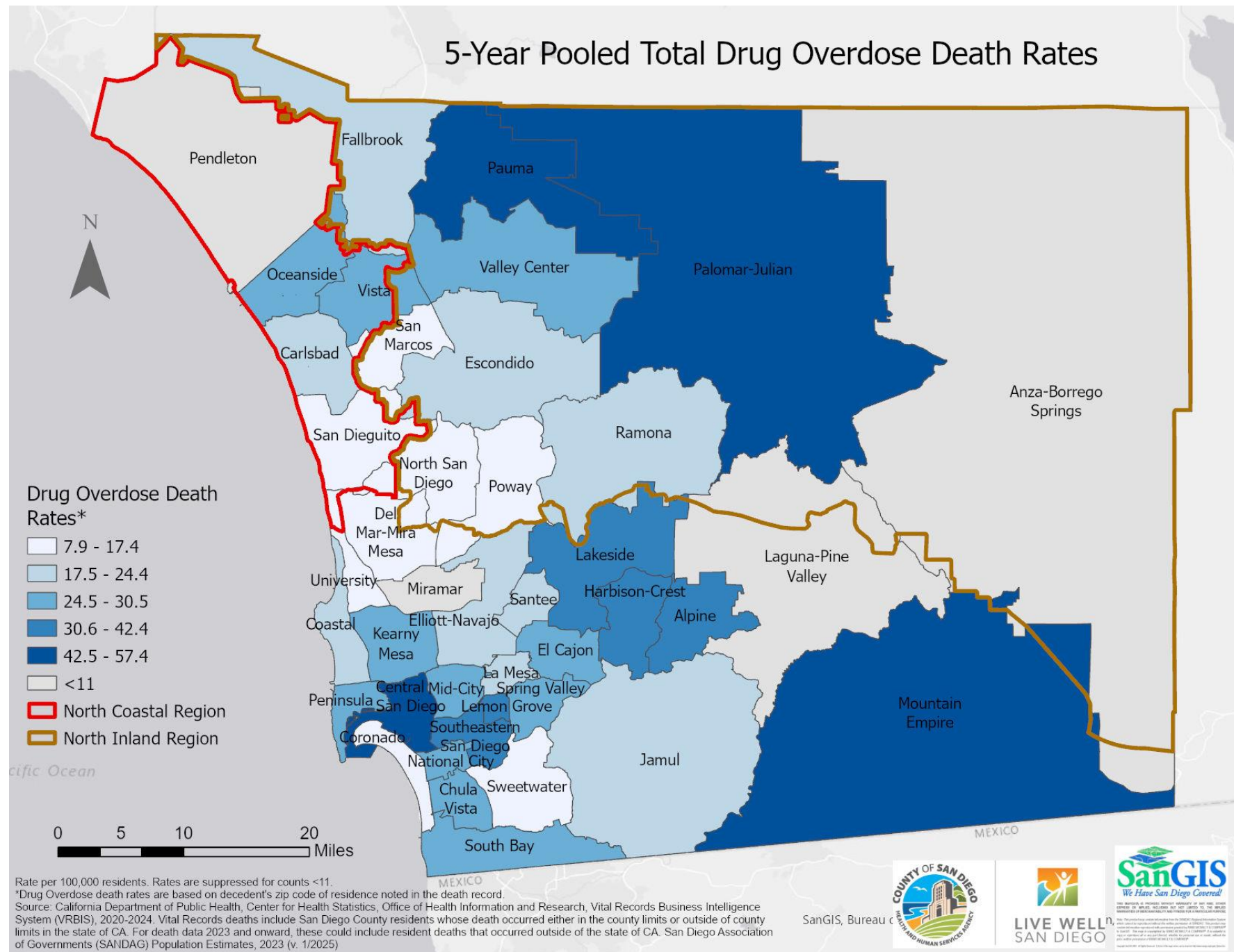
Overdose Deaths Subregional Area (SRA) Rates, San Diego County, Pooled Totals, 2020-2024

Rates for the **North Coastal Region**
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Oceanside and Vista

Rates for the **North Inland Region**
were highest in:

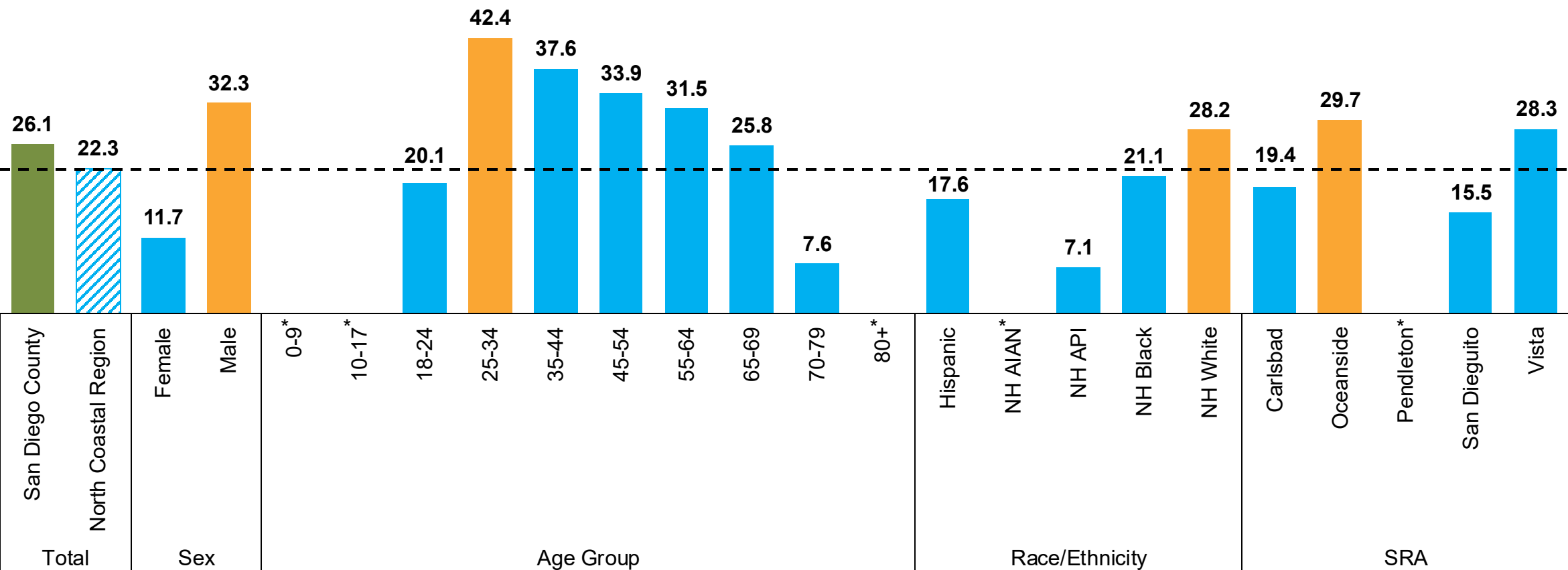
Pauma and Palomar-Julian



Overdose Deaths

Pooled Total Rates, 2020-2024

North Coastal Region

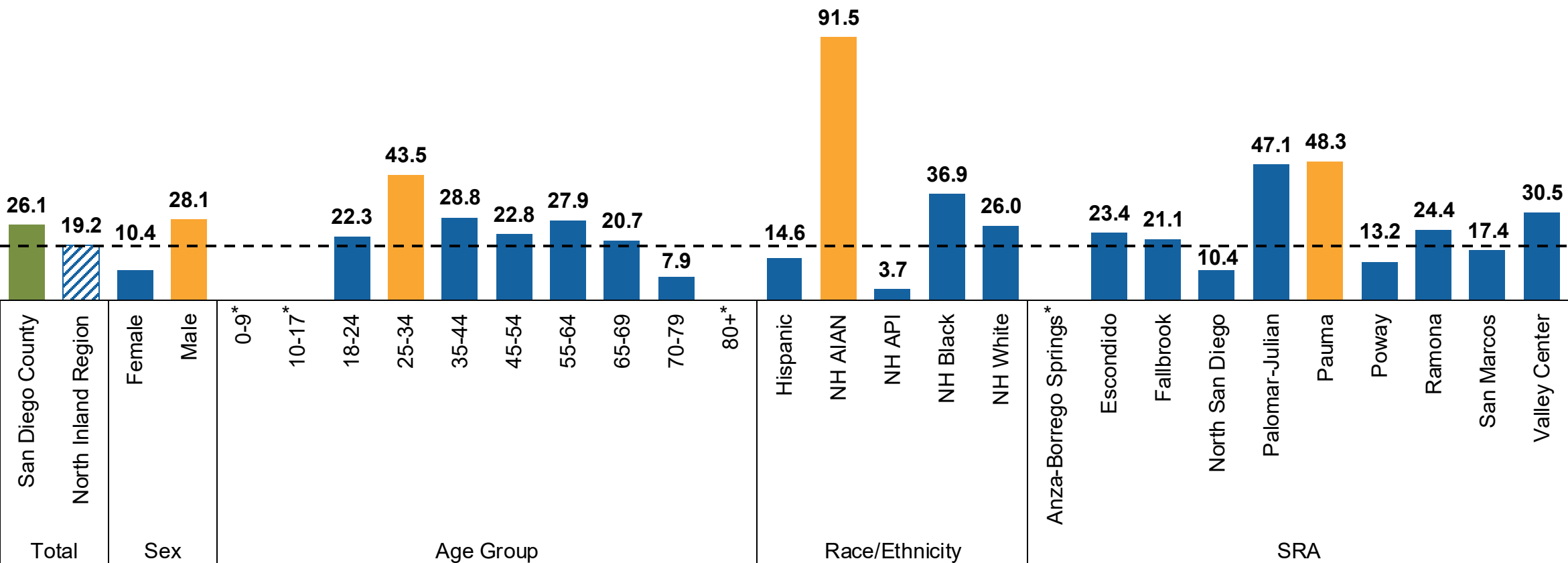


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Overdose Deaths

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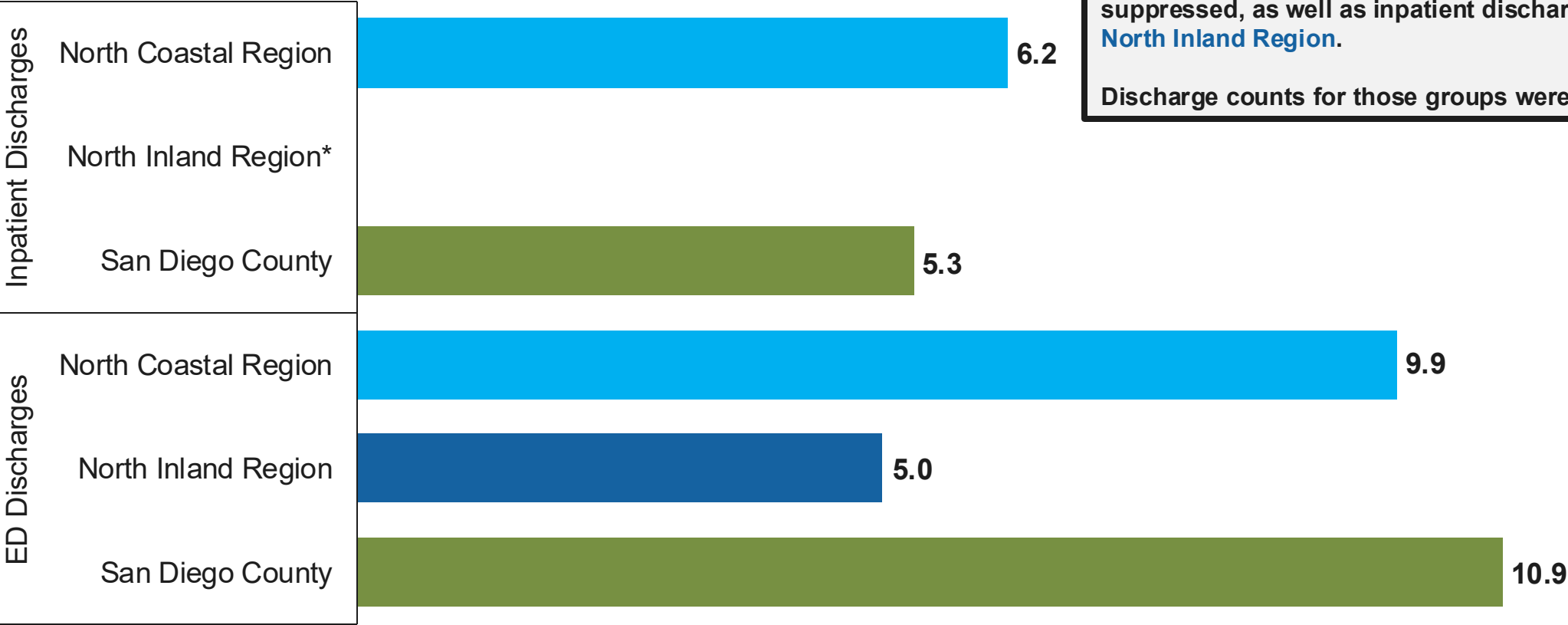
North Inland Region



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Alcohol Poisoning

Emergency Department and Inpatient Discharge Rates, Ages 20 Years and Older, 2022



Rates for ages less than 20 years (underage drinkers) residing in the North Coastal and North Inland Regions and San Diego County have been suppressed, as well as inpatient discharges for the North Inland Region.

Discharge counts for those groups were less than 11.

Rate per 100,000 residents. *Rates are not shown for <11 encounters. Rates are fully suppressed for underage drinking (ages <20). ED discharges and hospitalizations do not include fatal encounters. Rates are among San Diego County residents only. Data includes those with any mention of alcohol poisoning or alcohol abuse or dependence within their medical record. Includes duplicate records for those with multiple visits. Source: California Department of Public Health, California Department of Health Care Access and Information (HCAI), Patient Discharge Data & Emergency Department Data, (2018-2022).

Alcohol or Drug Use in the Past 30 Days

Percent Reported by 9th Graders, San Diego County, 2021-2023



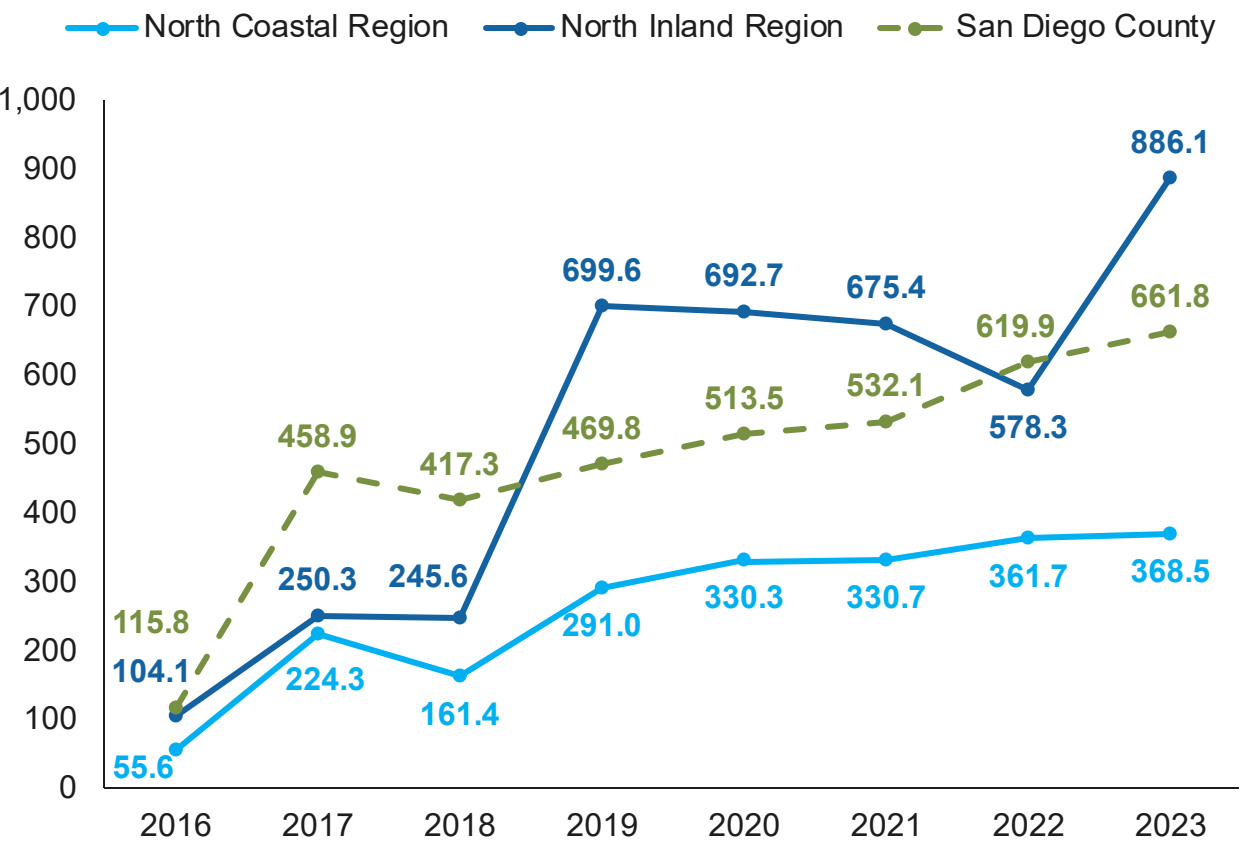
AI/AN = American Indian/Alaska Native. Foster home includes foster home, group care, or waiting placement. Homeless includes friend's home, hotel or motel, shelter, car, campground, or other transitional or temporary housing. Other living arrangement includes other relative's home, a home with more than one family, or other living arrangement. Source: California Healthy Kids Survey, 2021-2023. Accessed online 5/23/25 at <https://calschls.org/reports-data/public-dashboards>

Cannabis-Related Indicators

Emergency Department Encounter Rates (2016-2023) & Reported Lifetime Use (2017-2023)

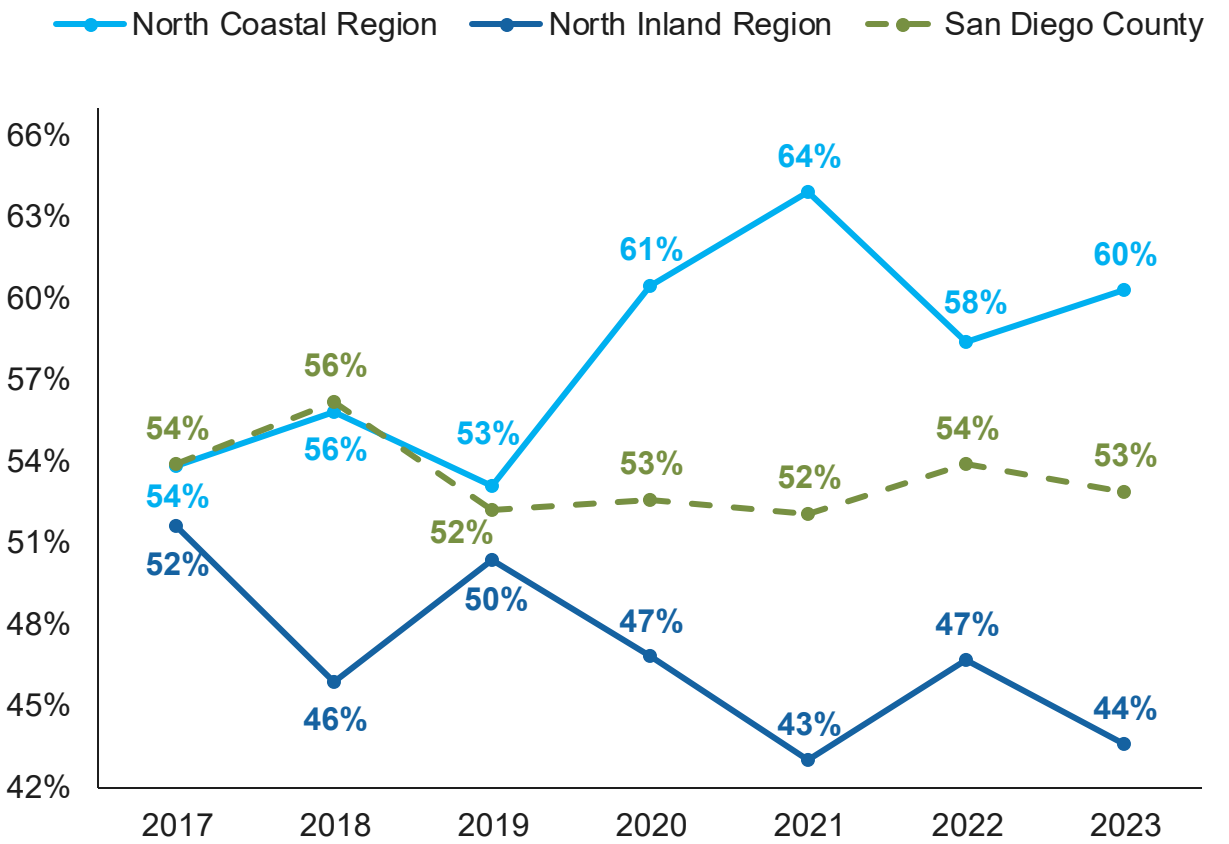


Cannabis-Related Emergency Department
Encounter Rates, 2016-2023



Rate per 100,00 residents. Rates for 2016 and 2017 should be interpreted with caution, as ICD-10 codes specific to cannabis were introduced in October 2015. Source: California Department of Health Care Access and Information (HCAI), Emergency Department Database and Patient Discharge Database, 2016-2023. San Diego Association of Governments (SANDAG) Population Estimates, 2023 (v. 1/2025)

Percent of Adults Ages 18+ That Have Ever Tried
Marijuana or Hashish, 2017-2023



Source: 2017, 2018, 2019, 2020, 2021, 2022, 2023 California Health Interview Survey. UCLA Center for Health Policy Research. Accessed at <https://healthpolicy.ucla.edu/our-work/askchis/askchis-dashboard> on 06/18/25.

Countywide Initiatives



Suicide Prevention Council

- Collaborative, countywide effort dedicated to preventing suicides
- Vision is zero suicides in San Diego County
- Many resources available, including Priority Population Resource Guides and School Resource Guides

<https://www.sdchip.org/initiatives/suicide-prevention-council/>

Join a subcommittee! Visit the website or call 858-609-7976.

[Assessment and Evaluation Subcommittee](#)

[Faith Subcommittee](#)

[Higher Education Subcommittee](#)

[Means Reduction Subcommittee](#)

[Media Subcommittee](#)



[Postvention Subcommittee](#)

[Priority Populations Community Subcommittee](#)

[School Collaboration K-12 Subcommittee](#)

[Training & Education](#)

2024



San Diego County Suicide Prevention Council

Annual Report to the Community 2024


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Suicide is a leading cause of death in the United States and in San Diego County. It is a complex public health issue that requires a multi-faceted approach to prevention and intervention. The San Diego County Suicide Prevention Council (SPC) aims to leverage data to inform suicide prevention efforts, ensuring services are available and accessible where and when they are needed most. By analyzing patterns in our data, we can gain insights on emerging trends, risk factors, and vulnerable populations, allowing us to develop a more comprehensive understanding of suicide in our county. The SPC Annual Report to the Community 2024 presents various data, including local, state, and national suicide rates; suicide rates by demographics and means; and emergency department data on intentional self-harm, suicide attempts, and suicidal ideation.


Although data can be a powerful tool in addressing suicide, we can never forget that this data represents real people – our family, friends, neighbors, and community members. As we strive to better understand suicide in our community, it's vital that we approach this work with compassion, always honoring the humanity behind the numbers.

Each of us plays a crucial role in supporting this effort and prioritizing mental health in our communities. To learn more about how to get involved, please explore the 'Take Action' page in this report or visit the San Diego County Suicide Prevention Council website at www.spcsandiego.org.

The following data in this report contains the most recent information available on suicide death (2023, unless otherwise noted), suicide attempt / intentional self-harm and suicidal ideation emergency department encounters (2022), and local survey data (various years).



COMMUNITY HEALTH
IMPROVEMENT PARTNERS
making a difference together



San Diego County
Suicide Prevention
Council
Coordinated by Community Health Improvement Partners

Dial 1-888-724-7240 to connect to the San Diego Access and Crisis Line for free & confidential behavioral health resources & referrals, available 24/7 in over 200 languages.

Dial 9-8-8 to connect to the Suicide & Crisis Lifeline network of crisis call centers, available 24/7.

Dial 2-1-1 for local information & connections to community, health, & disaster resources, available 24/7.

Countywide Initiatives



Binge and Underage Drinking Initiative (BUDI)

- The San Diego County Binge and Underage Drinking Initiative is a strategic, collaborative, multi-agency prevention effort to encourage, support, and promote safe and healthy behaviors and social and community conditions that reduce alcohol-related harms at a population level.

<https://budisd.org/>

Cannabis Public Health Initiative

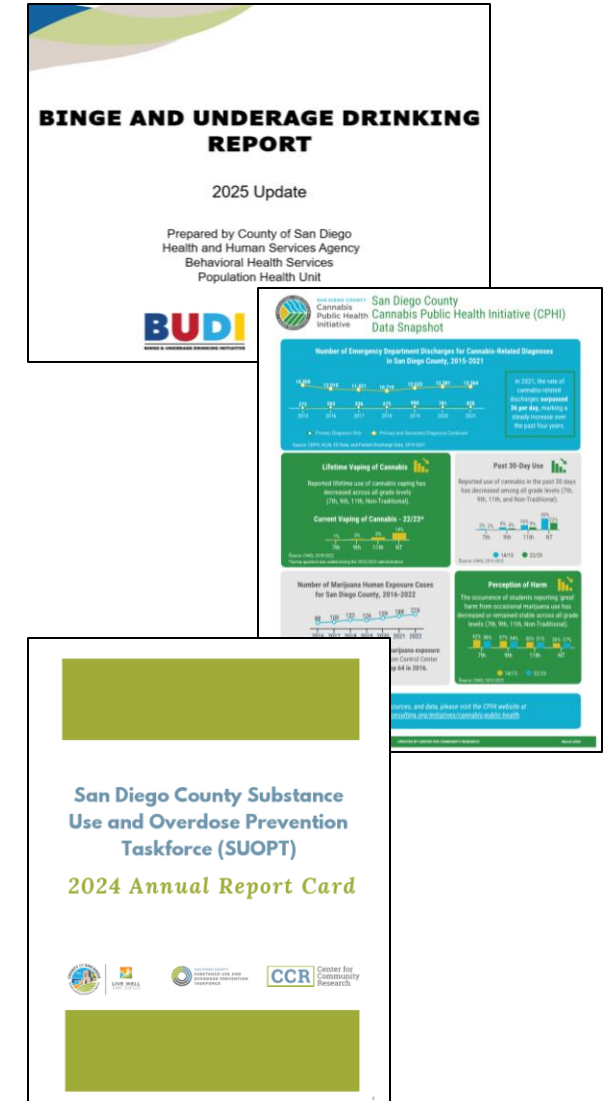
- Works to reduce youth access to cannabis by increasing public awareness regarding the adverse effects resulting from youth cannabis use.
- Efforts are aimed at providing the science behind youth cannabis use and its public health impacts.

<https://www.ccrconsulting.org/initiatives/cannabis-public-health>

Substance Use and Overdose Prevention Taskforce (SUOPT)

- Brings together healthcare providers, educators, prevention specialists, government officials, law enforcement, non-profit organizations, and residents to reduce substance-related harms and save lives.

<https://www.suopt.org/>



Overdose Surveillance and Response Program (OSAR)



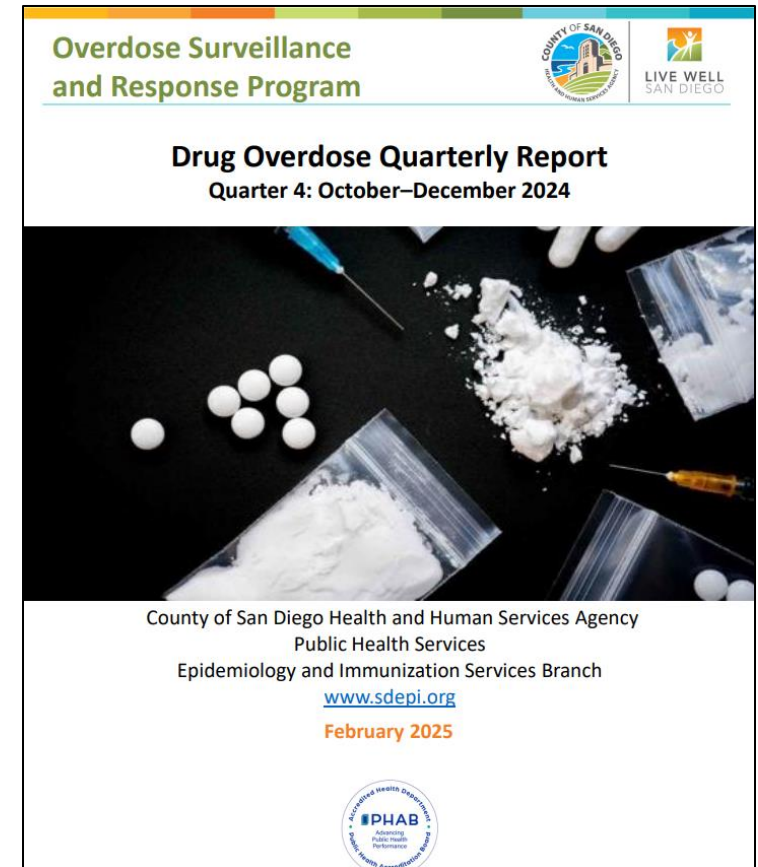
In response to the need for a comprehensive drug overdose surveillance and response system, the County of San Diego created the Overdose Surveillance and Response (OSAR) program in the fall of 2023.

This program is a collaborative effort between County Health and Human Services Agency Public Health Services and Behavioral Health Services, with support from the County Medical Examiner's Office and County Emergency Medical Services.

The program's design is centered around three main pillars:

- Surveillance
- Investigation and Response
- Community Engagement

<https://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/OSAR.html>





COUNTY OF SAN DIEGO
HEALTH AND HUMAN SERVICES AGENCY



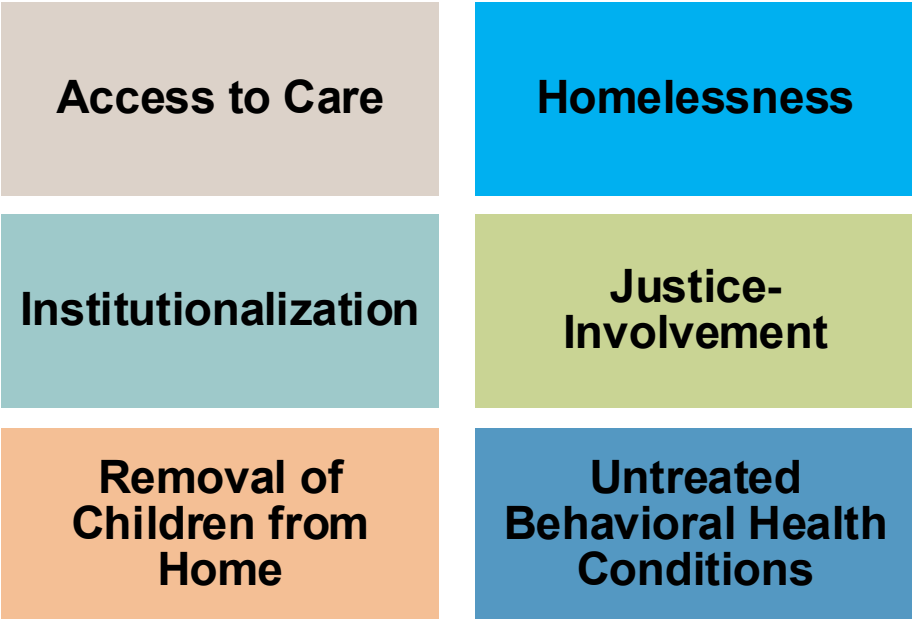
LIVE WELL
SAN DIEGO

Behavioral Health Services Act: Population Behavioral Health Goals

BHSA – Population Behavioral Health Goals



Priority Statewide Goals for Improvement



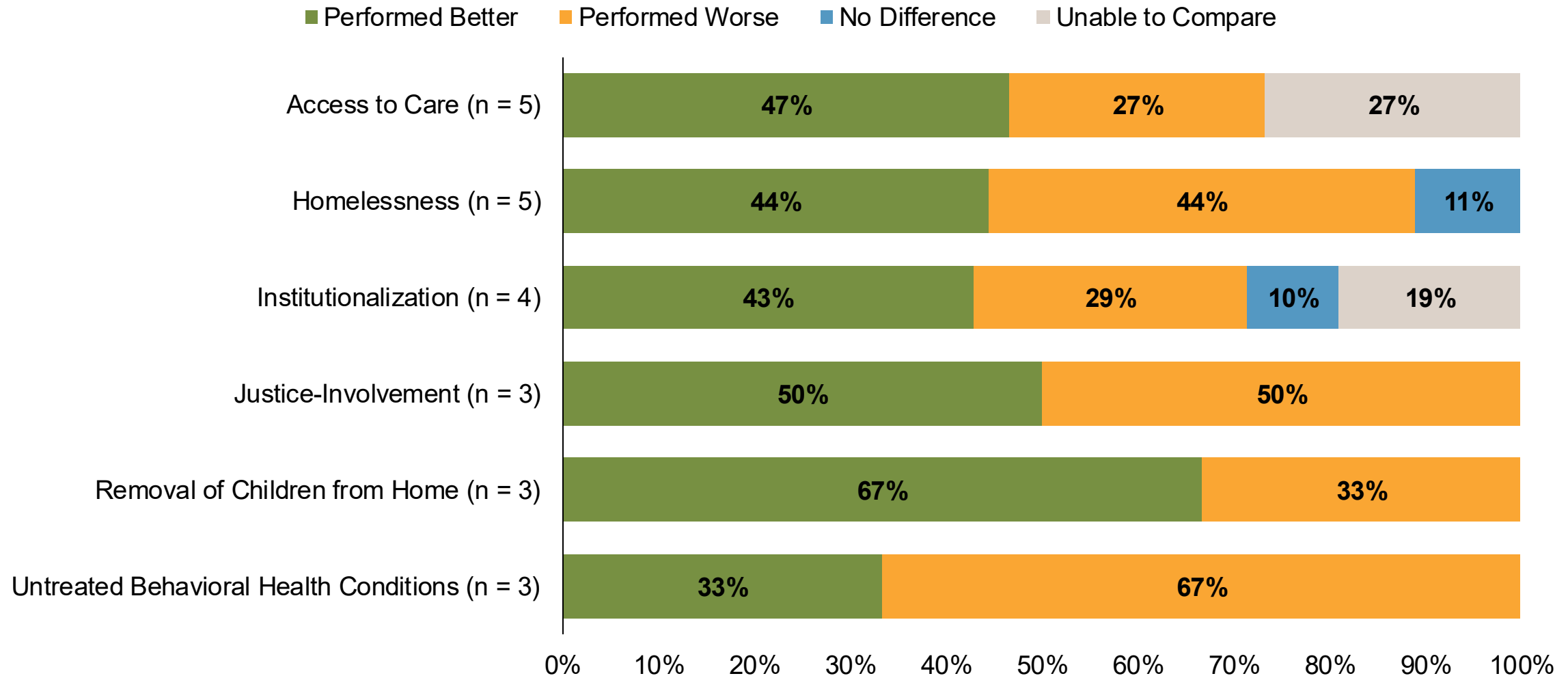
Additional County-Selected Goal

Additional Goals to Address

- Care Experience
- Engagement in School
- Engagement in Work
- Overdoses
- Prevention and Treatment of Co-Occurring Physical Health Conditions
- Quality of Life
- Social Connection
- Suicides

BHSA – Priority Statewide Goals

San Diego County's Performance vs. California

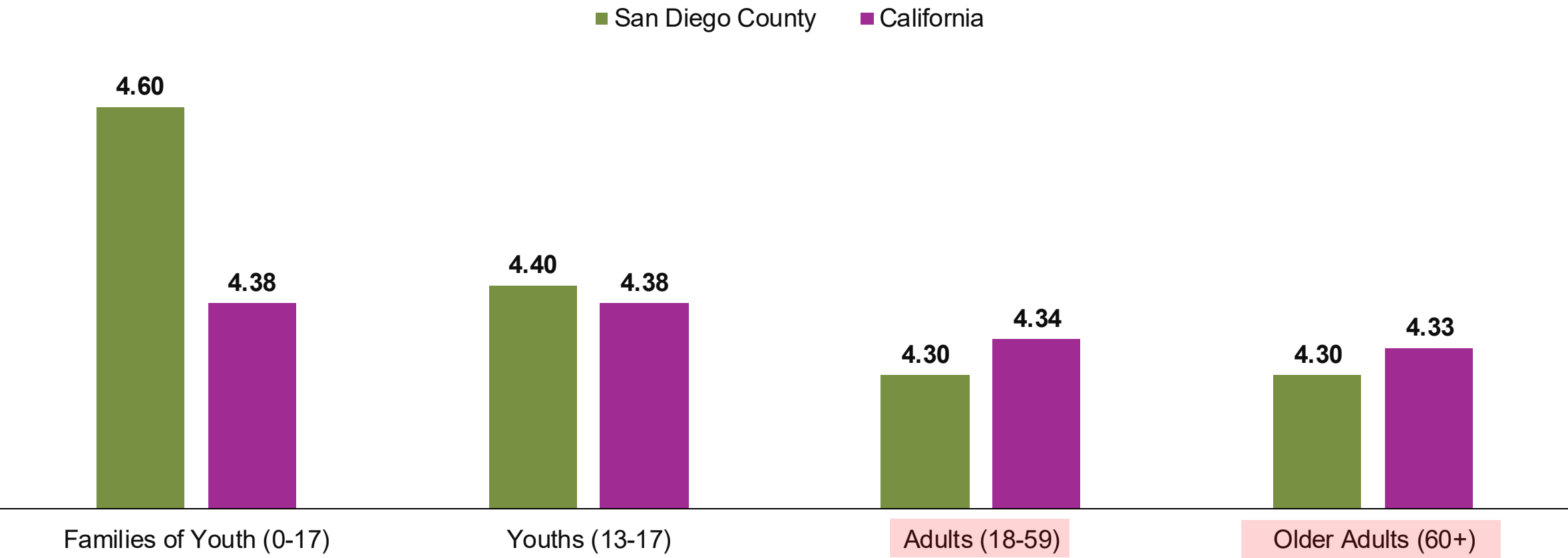


Care Experience

Perception of Cultural Appropriateness of Services



Consumer Perception Survey (CPS) Average Scores, 2023



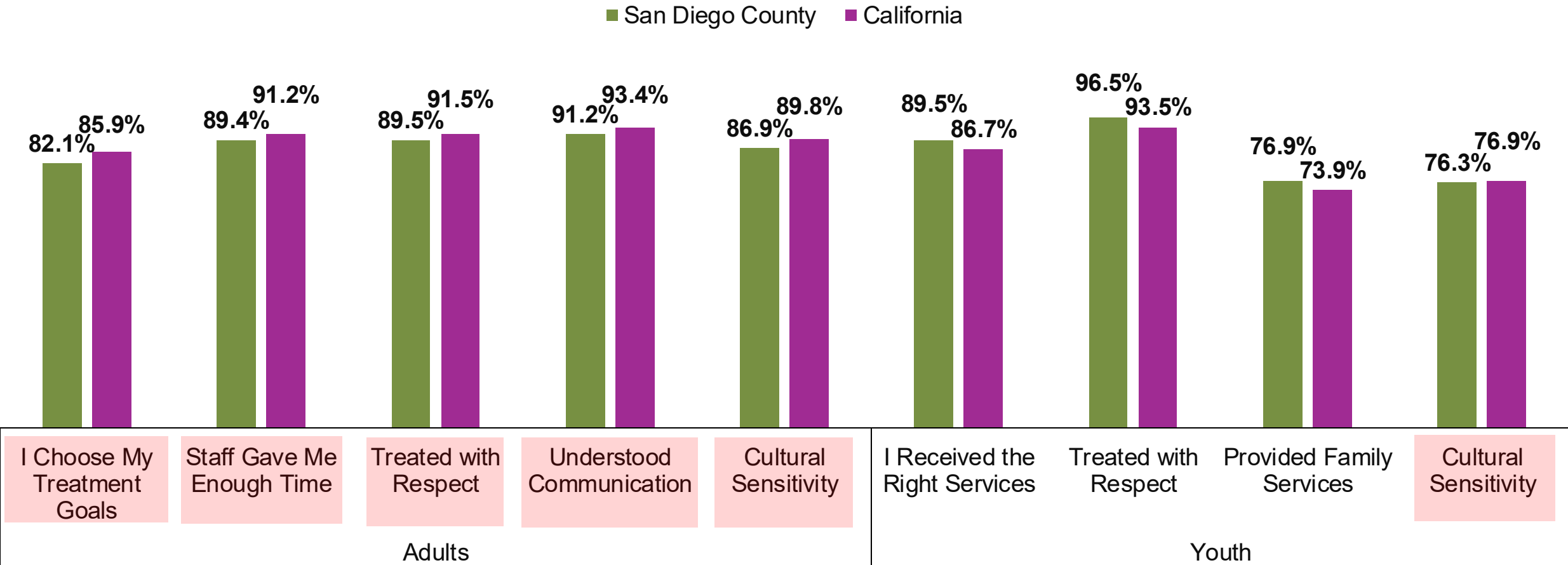
Scoring: 1 = Strongly Disagree; 2 = Disagree; 3 = Neutral; 4 = Agree; 5 = Strongly Agree

Care Experience

Perception of Quality of Services



Percent of Individuals who “Agree” or “Strongly Agree” with the Following Statements, Treatment Perception Survey (TPS), 2023



Source: California Department of Healthcare Services (DHCS) County Performance Workbook

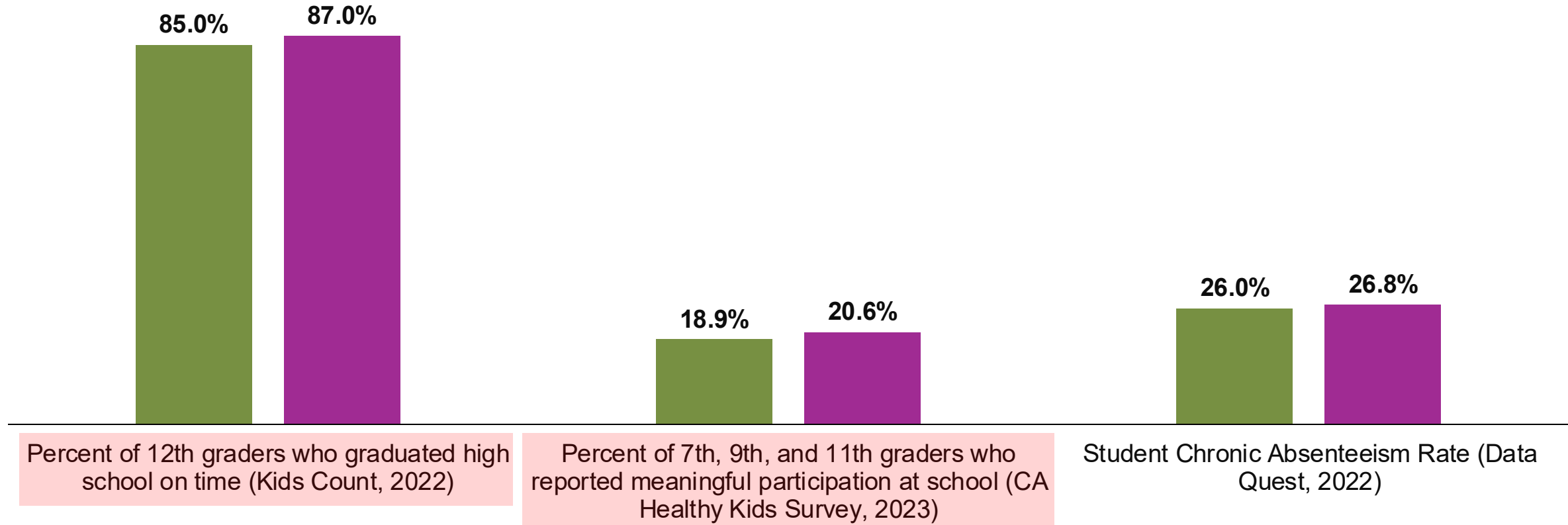
Engagement in School

Graduated School on Time, Meaningful Participation, & Chronic Absenteeism



Graduated School on Time, Meaningful Participation, and Chronic Absenteeism, 2022-2023

■ San Diego County ■ California



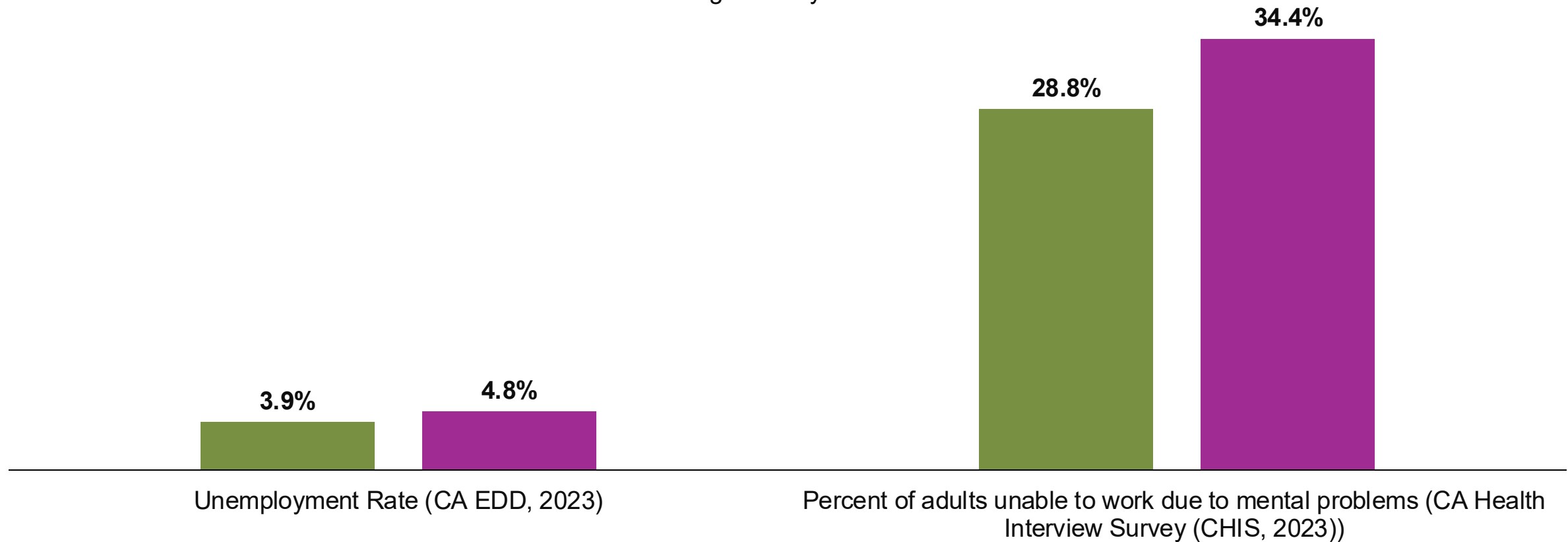
Engagement in Work

Unemployment Rate & Unable to Work Due to Mental Problems



Unemployment Rate and Percent of Adults Unable to Work Due to Mental Problems, 2023

■ San Diego County ■ California



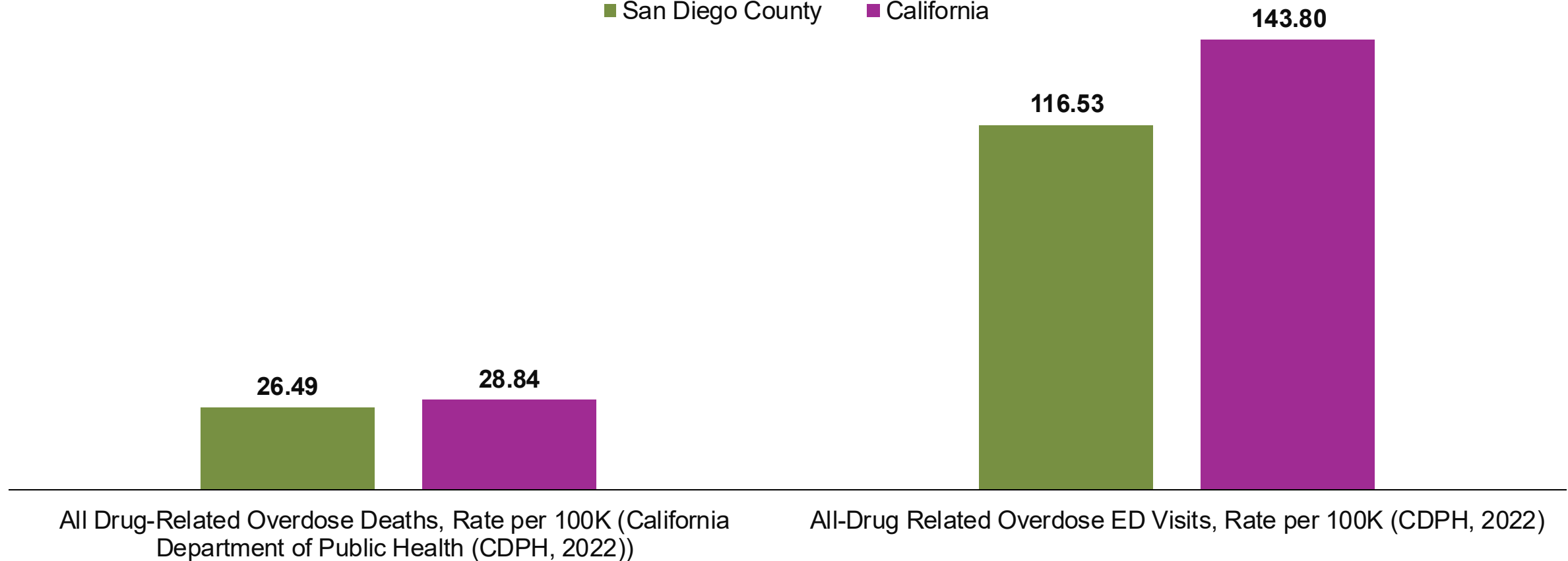
Overdose

All Drug-Related Overdose Deaths & Emergency Department Visit Rates



Overdose Death and ED Visit Rates, 2022

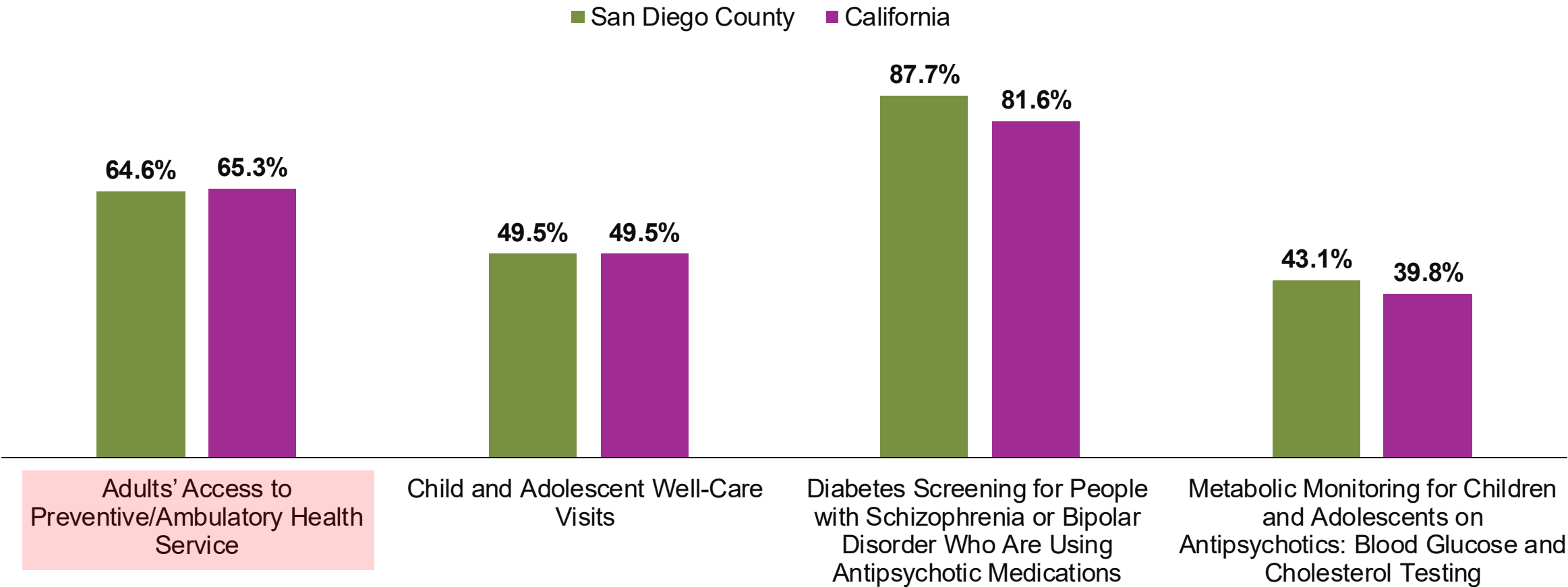
■ San Diego County ■ California



Prevention and Treatment of Co-Occurring Physical Health Conditions



Medi-Cal Managed Care Accountability Measures,
CA Department of Healthcare Services (DHCS), 2022



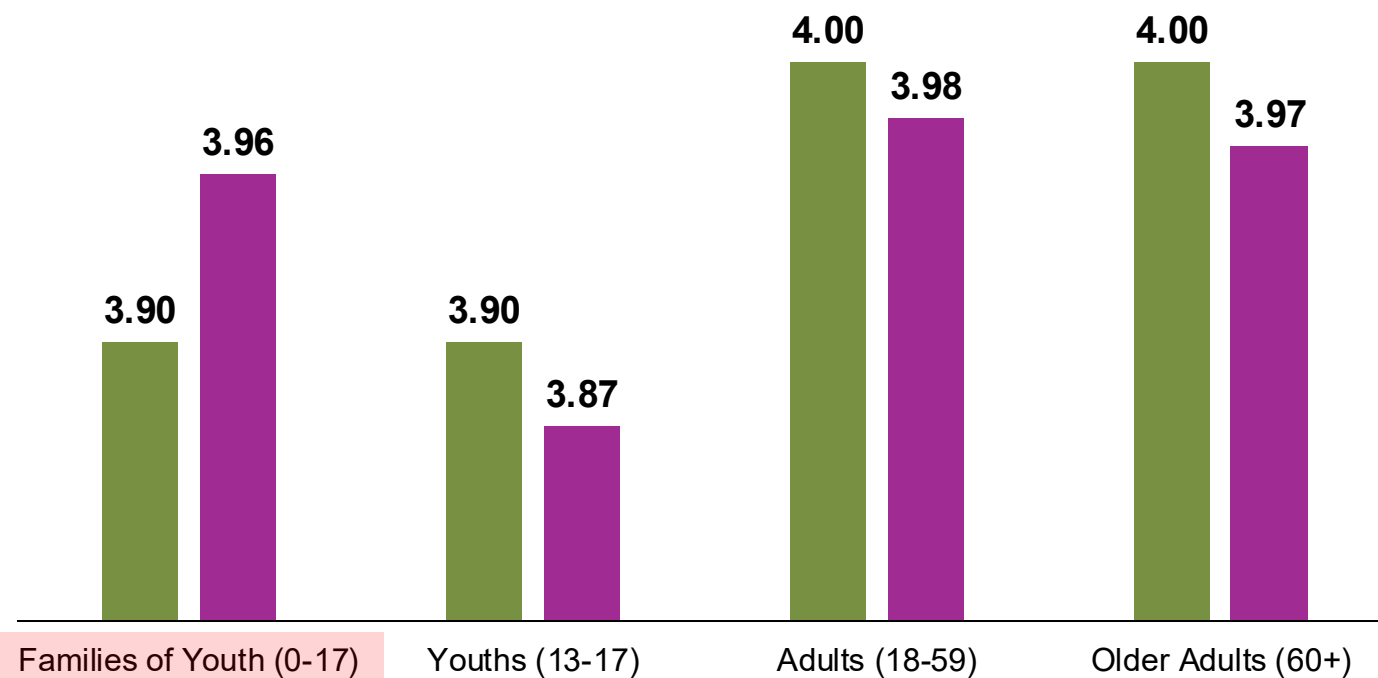
Quality of Life

Perception of Functioning & Poor Mental Health Days Reported



Perception of Functioning
Consumer Perception Survey (CPS) Average Scores, 2024

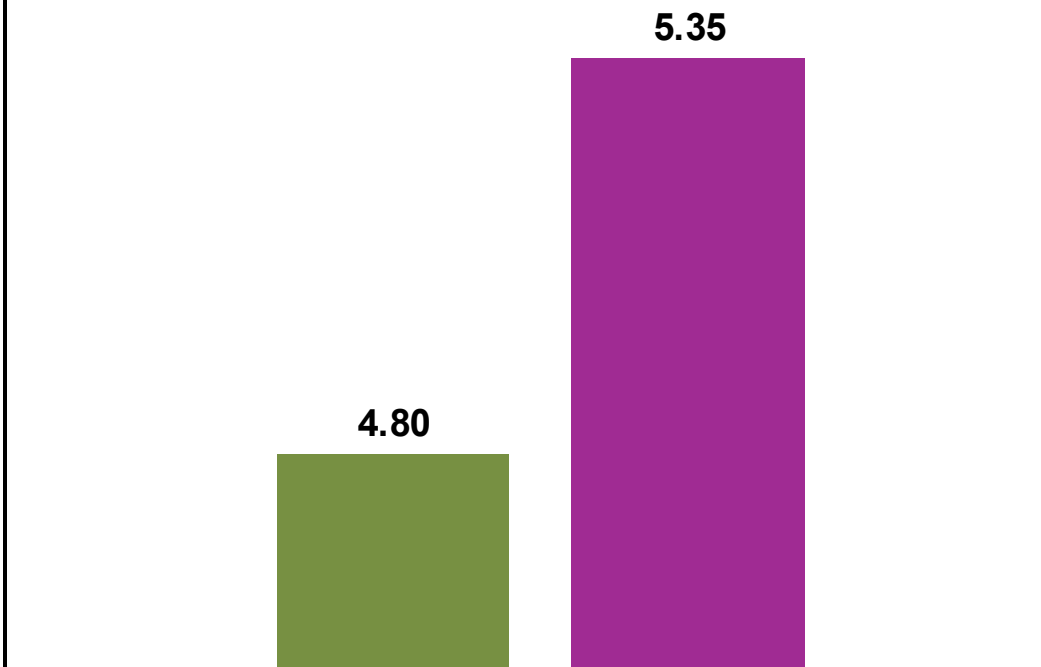
■ San Diego County ■ California



Scoring: 1 = Strongly Disagree; 2 = Disagree; 3 = Neutral; 4 = Agree; 5 = Strongly Agree

Average Number of Mentally Unhealthy Days
Self-Reported in Past 30 Days, Adults 18+,
BRFSS, 2024

■ San Diego County ■ California

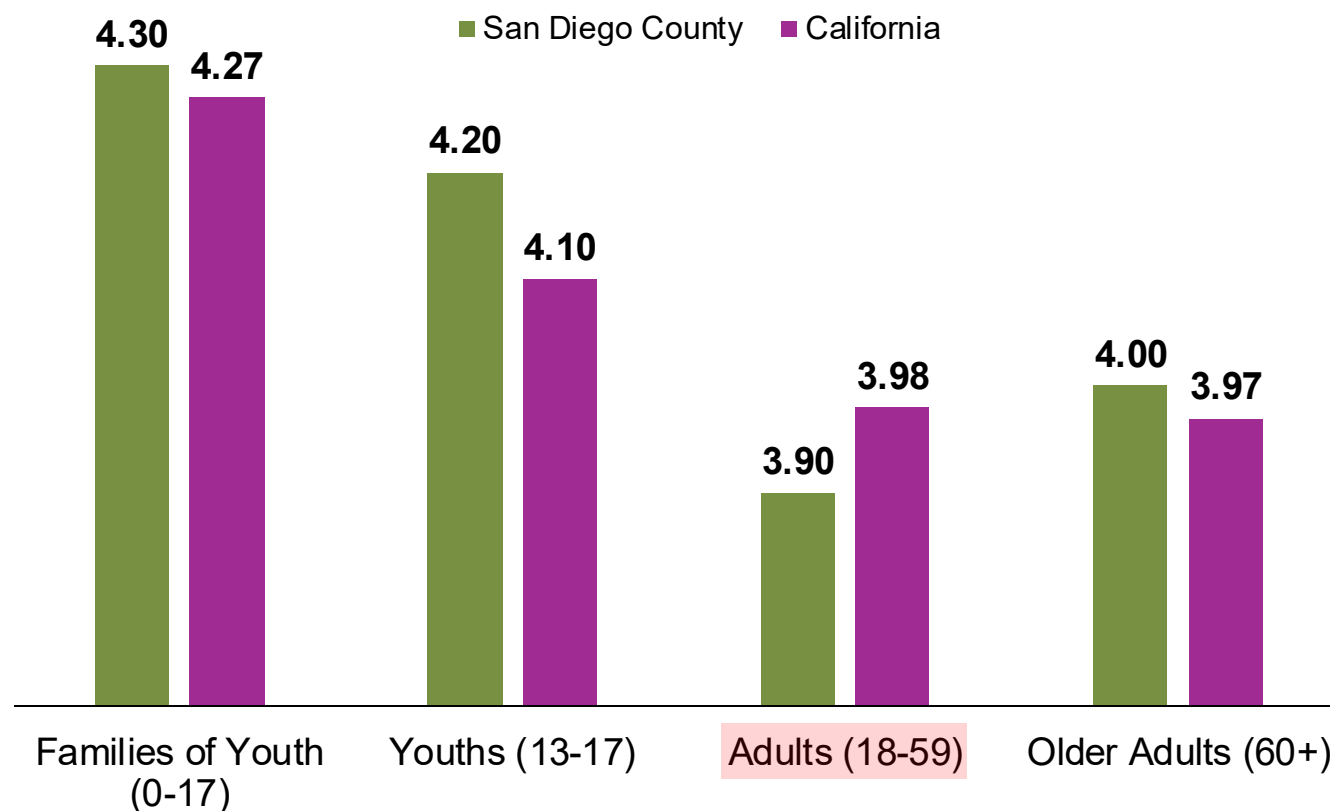


Social Connections

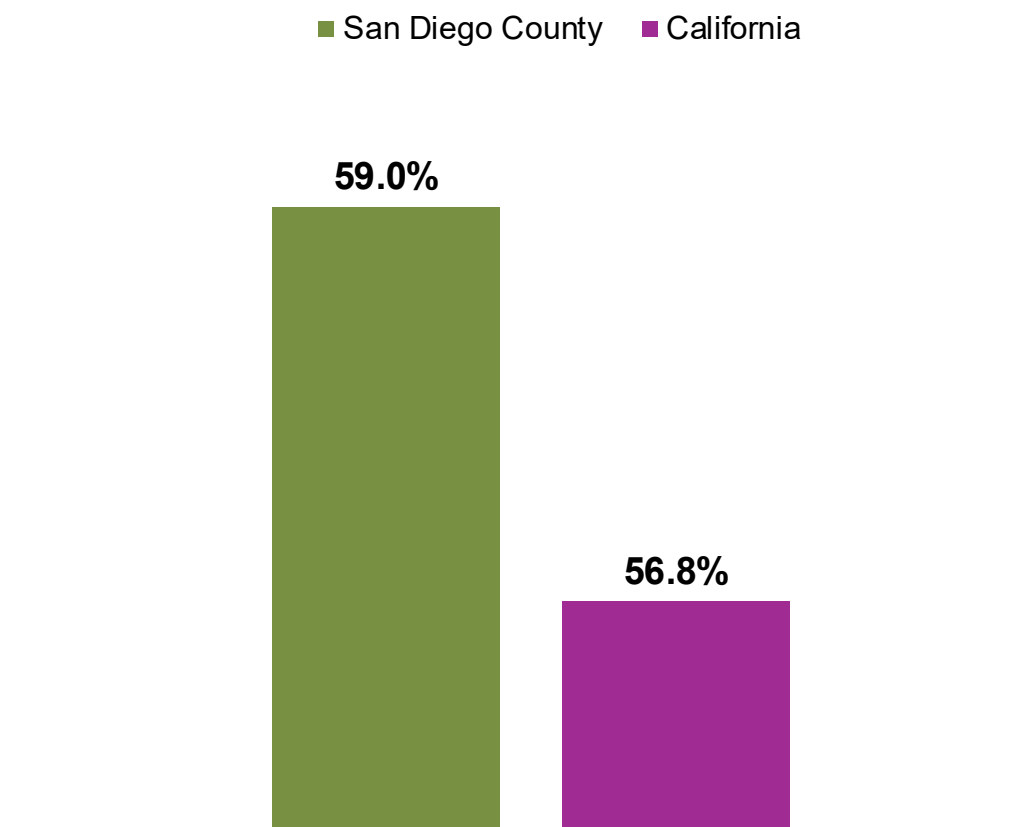
Perception of Social Connectedness & Caring Adult Relationships at School



Perception of Social Connectedness,
Consumer Perception Survey (CPS) Average Scores, 2024



Percent of 7th, 9th, and 11th Graders who
Reported Caring Adult Relationships at School,
CA Healthy Kids Survey, 2023



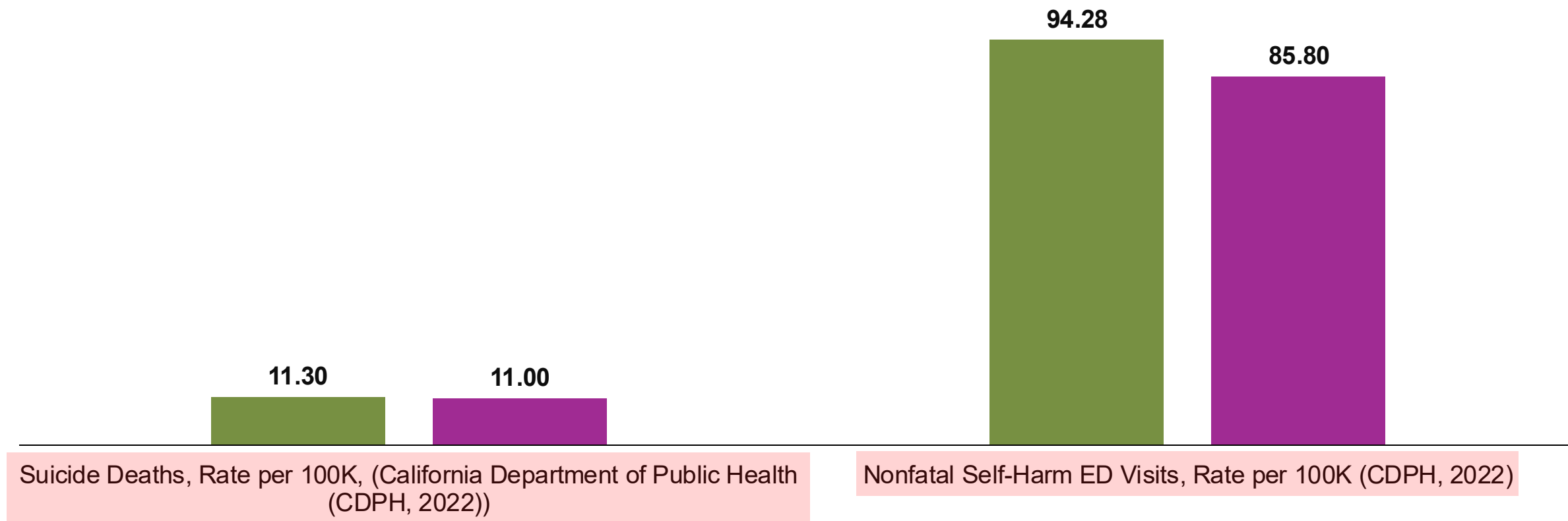
Suicide

Suicide Deaths & Non-fatal Emergency Department Visits Due to Self Harm



Suicide Death Rate and Self-Harm Emergency Department Visit Rate, 2022

■ San Diego County ■ California



Additional Resources



Nationwide Mental Health Crises and Suicide Prevention, Dial 9-8-8

- Available 24 hours/7 days a week
- Confidential and free of charge
- Connect individuals with trained counselors for immediate support and resources.

San Diego Access and Crisis Line (ACL), Dial: 1-888-724-7240

- Available 24 hours/7 days a week
- Confidential and free of charge
- Support and help in navigating services
- San Diego County Programs

San Diego 211 Resource Connection, Dial 2-1-1

- Available 24 hours/7 days a week
- Confidential and free of charge
- Support and help in navigating services
- Housing assistance, healthcare services, food and meal programs, crisis intervention, and more.

Mental Health & Substance Use Care: https://www.sandiegocounty.gov/content/sdc/hhsa/programs/bhs/all_services.html

Overdose Resources: <https://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs/OSAR/community.html>

1. **San Diego Association of Governments (SANDAG), 2018-2023 Population Estimates (v. 1/2025):** Population estimates and forecasts for the County.
2. **California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS), 2020-2024 (v. 5/15/2025):** Non-public dataset, repository for California's birth, death, and fetal death records. Primary diagnosis unless stated otherwise.
3. **California Department of Health Care Access and Information (HCAI), Emergency Department Data and Patient Discharge Data, 2019-2023:** Non-public dataset, collects data from California-licensed hospitals and emergency departments.
4. **California Healthy Kids Survey (CHKS), 2021-2023:** Accessed online at <https://calschls.org/reports-data/public-dashboards>. Public dataset, school-based survey for 7th, 9th, and 11th graders.
5. **UCLA California Health Interview Survey (CHIS), 2019-2023:** Accessed online at <https://ask.chis.ucla.edu/>. Public dataset, CA survey led by UCLA.



Questions

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Let's Discuss - Intention & Instructions



BHS data presentations from year's past:

- Intention to learn from the community what matters most
- What factors and conditions influence your response- snapshots
- How we utilize your feedback- Last Year - public messaging campaigns
(Prioritize Prevention & Early Intervention/School, Expand Data Visualization related to BH Subject Matter, & Focus on Accessibility and Inclusion-tailored language to reach communities)

This year we seek to learn...

- What behavioral health areas/topics are you looking to learn more about?
- What factors do you believe contribute to the data that was presented today?
- How can the County and community work collaboratively to address some of these disparities?

ACTIVITY:

- Break into groups around the room with **no more than 8-10 persons**
- BHS will provide a scribe to take notes, or welcome to leave your thoughts via sticky notes
- We will have **approximately 5 minutes** to address each question

Remember- be honest, be thoughtful, and be insightful, as we all have something to contribute

Let's Discuss - Activity



From your perspective, lived experience, and/or expertise...

1. What do you consider the biggest disparity or difference in health outcomes when it comes to mental health/substance use in this region, from the data shared today?
2. What factors do you feel contribute to these disparities/gaps? From your perspective, are there certain populations or communities more impacted than others? (What are barriers for people getting the support they need - consider access, cultural norms/traditions, etc.)
3. How can the County and community work together to address these disparities or gaps to improve mental health and wellbeing? (Consider available resources, existing programs/services, accessible information, trusted members of the community, etc.)
4. Cast a vote for what you would like the County to focus on for our future data sets that we share in the future.

Additional Goals

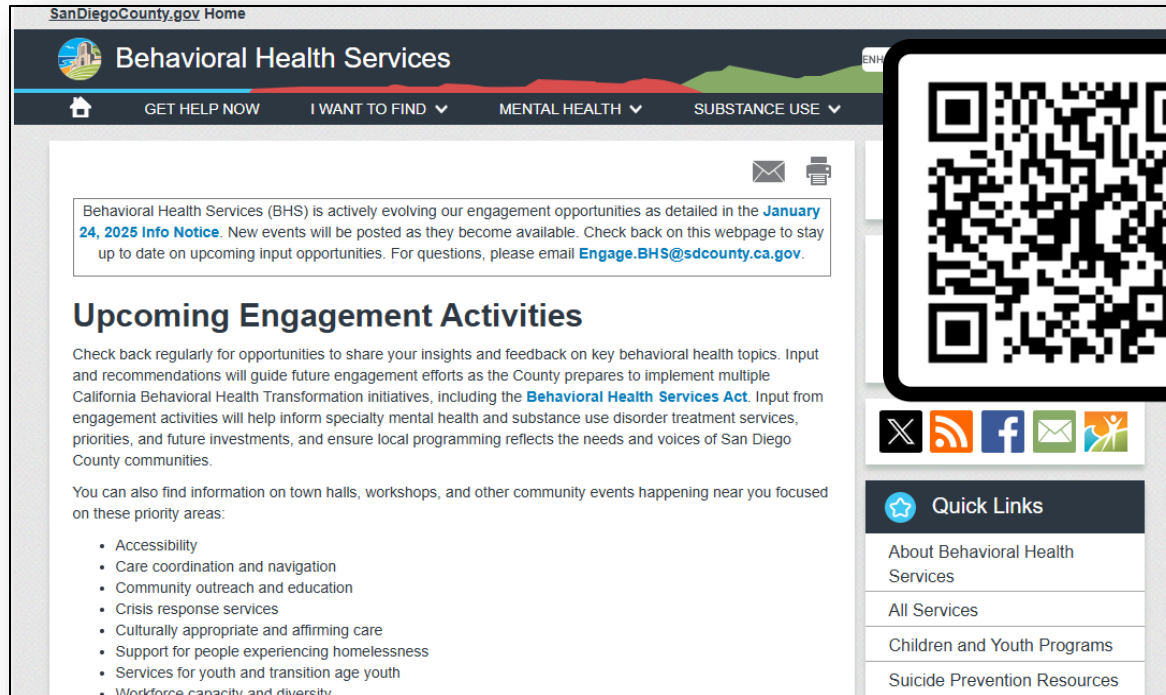
- Care Experience
- Engagement in School
- Engagement in Work
- Overdoses
- Prevention and Treatment of Co-Occurring Physical Health
- Quality of Life
- Social Connection
- Suicides

Let's Discuss - Wrap Up



- This is a baseline year, so thank you for helping to set the bar for our County
- Your knowledge, perspective, & feedback are greatly appreciated
- More ways to participate in more robust discussions (interest list)
- Where to go for more information?





SCAN ME

Upcoming Engagement Opportunities

Planned Engagement Activities

Engagement Activity Summaries

Contact Us

Communication & Engagement Unit: Engage.BHS@sdcounty.ca.gov

Danny Romero: DanielM.Romero@sdcounty.ca.gov