



# COMMUNITY HEALTH ASSESSMENT: NORTH CENTRAL REGION UPDATE

Presented by Leslie Upledger Ray
Presented to North Central Region Leadership Team
February 22, 2022







### PURPOSE AND AGENDA



# PURPOSE: SHARE AND RECEIVE INFORMATION ABOUT THE HEALTH AND WELL-BEING OF THE PEOPLE WHO LIVE IN NORTH CENTRAL REGION.

What is the Community Health Assessment and why is it important?

What are the demographic, economic and social determinants of health and well-being in North Central Region?

New resources: Self Sufficiency Dashboard and the ARPA/HPI Dashboard

Mortality and morbidity data

- 3-4-50, COVID-19 and Alzheimer's Disease and Related Dementias (ADRD)
- New resources: Community Profiles Dashboard and Medical Encounters of Homeless Persons Dashboards
- Regional Health Status Reports and Regional Briefs

Health and well-being impacts of racism and poverty

New resources: Racial Equity Dashboard

# **Adhere to Robust Planning Process**

Mobilizing for Action through Planning and Partnerships (MAPP) Model



Source: National Association of County & City Health Officials (NACCHO). Mobilizing for Action through Planning and Partnerships (MAPP). <a href="https://www.naccho.org/programs/public-health-infrastructure/performance-improvement/community-health-assessment/mapp">https://www.naccho.org/programs/public-health-infrastructure/performance-improvement/community-health-assessment/mapp</a>. Accessed May 30, 2018.

There is lots of flexibility in how we approach planning going forward









# **Community Health Assessment**



- ➤ What is the Community Health Assessment (CHA)?
  - Continuous community collaboration about the data
- ➤ Why is the CHA Important?
  - Captures needs of the community
  - Guide planning for the future
  - Informs Community Enrichment Plans (CEPs)

https://www.sandiegocounty.gov/content/dam/livewell/community-action/2019-21-LWSD-Community-Health-Assessment.pdf





# **Community Assessment to Planning**

➤ Ongoing community collaborative <u>process</u> for continuous enhancement of the community health assessment that in turn informs the community (regional) plans.

Each Region had a CEP & New plans to be developed!





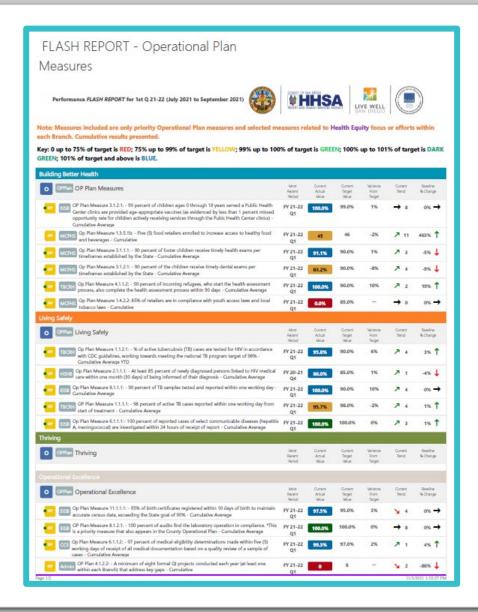
CHSU – Community Health Statistics Unit CLT – Regional Community Leadership Teams CHIP – Community Health Improvement Plan CEP – Community Enrichment Plan





# Tracking Results

- Critical that we track results to show collective impact
- For population data, Community Health Statistics Unit is an important resource
- For community activity and program data:
  - Work Plans are useful
  - Clear Impact, a performance management tool is available for tracking community activities and program data technical support available through the Performance Improvement Unit, PHS Admin





# **Data Presentation Survey**



- ✓ Survey Monkey link sent after data presentation
- ✓ Capture needs of the community
- √ Responses will help plan for future





# 2019 DEMOGRAPHICS





# DEMOGRAPHIC CHARACTERISTICS



# WWW.SDHEALTHSTATISTICS.COM





### Demographics:

- · Population size
- · Race/Ethnicity
- Languages spoken
- Poverty level
- · and more



### Educational Attainment Among Population 25 Years and Older

ource: U.S. Census Bureau; 2015-2019 American Community Survey 5-Year Estimates, Table DP02.

Geography	Population Age 25+	Not a High School Graduate	High School Graduate	Some College or AA/AS	Bachelor's Degree	Graduate Degree
City of Carlsbad	80,508	4.8%	10.4%	25.3%	34.0%	25.5
City of Chula Vista	175,262	17.2%	20.3%	33.1%	20.4%	9.0
City of Coronado	15,935	2.3%	9.2%	24.1%	33.2%	31.2
City of Del Mar	3,626	0.0%	5.5%	18.8%	36.7%	39.1
City of El Cajon	67,509	16.0%	27.9%	35.2%	14.4%	6.5
City of Encinitas	46,792	4.7%	8.7%	24.7%	35.7%	26.3
City of Escondido	99,115	21.2%	22.6%	32.4%	15.7%	8.1
City of Imperial Beach	17,717	16.1%	25.0%	36.9%	14.3%	7.6
City of La Mesa	42,411	7.3%	18.4%	36.5%	24.1%	13.7
City of Lemon Grove	18,062	20.7%	23.8%	36.6%	12.2%	6.7
City of National City	40,038	25.1%	28.2%	32.6%	10.7%	3.5
City of Oceanside	121,592	13.3%	20.3%	35.3%	20.8%	10.3
City of Poway	34,329	8.7%	13.9%	29.2%	30.5%	17.7
City of San Diego	970,333	11.9%	15.1%	27.0%	27.0%	18.9
City of San Marcos	60,352	14.7%	19.2%	29.1%	24.7%	12.3
City of Santee	40,067	6.1%	26.5%	37.9%	20.7%	8.8
City of Solana Beach	10,209	4.1%	9.4%	18.5%	37.6%	30.4
City of Vista	63,921	21.0%	24.0%	31.0%	16.2%	7.7
Unincorporated	338,793	10.1%	22.5%	35.8%	19.9%	11.7
San Diego County	2,246,571	12.6%	18.2%	30.4%	23.8%	15.0
California	26,471,543	16.7%	20.5%	28.9%	21.2%	12.
United States	220.622.076	12.0%	27.0%	28.9%	19.8%	12

This indicator refers to the highest level of education completed for term of the highest degree or the highest level of schooling completed for the population 2.5 years and defer. This is different from the level of his

# Education Attainment Among Population 25 Years and Older by Municipality, 2019 II Not a High School Graduate II High School Graduate II High School Graduate III High School Graduate III High School Graduate III Some College or AA/AS III Some College o







# DEMOGRAPHIC CHARACTERISTICS



# WWW.SDHEALTHSTATISTICS.COM





- Population size
- Race/Ethnicity
- Languages spoken
- Poverty level
- and more









Supervisorial District Demographic Profiles
San Diego County 2019



**Published July 2021** 

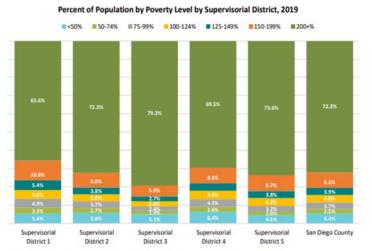
### **Poverty Level for the Population**

Geography	<50%	50-74%	75-99%	100-124%	125-149%	150-199%	200+%
Supervisorial District 1	5.4%	3.3%	4.9%	4.8%	5.4%	10.8%	65.6%
Supervisorial District 2	5.8%	2.7%	3.7%	3.8%	3.8%	8.0%	72.3%
Supervisorial District 3	5.1%	1.9%	2.4%	2.8%	2.7%	5.9%	79.3%
Supervisorial District 4	6.4%	2.6%	4.3%	4.6%	4.0%	8.6%	69.5%
Supervisorial District 5	4.5%	2.0%	3.2%	4.2%	3.8%	8.7%	73.6%
San Diego County	5.4%	2.5%	3.7%	4.0%	3.9%	8.3%	72.2%
California	5.9%	3.1%	4.4%	4.5%	4.3%	8.8%	69.0%
United States	6.0%	3.3%	4.1%	4.3%	4.3%	8.8%	69.1%

For this indicator, data shown is the percentage of the population for whom poverty was determined at specified poverty levels. Poverty status was only determined for people not institutionalized, living in military group quarters, in college dormitories, and/or people ages 0-14 living alone or with unrelated roommates (not family).

Poverty status is determined by matching people's annual income before tax to sets of dollar amounts (also known as poverty thresholds) which will vary depending on the number of people in the family, number of children under the age of 18, and the age of householder (i.e., under age 65 or over age 65) If the annual income before tax is under the dollar amount for their threshold, the family and everyone in it living in the same household are determined to be in poverty. The income of anyone else living in the house not related, or in the family, is not considered for this threshold. In fact, these individuals would be compared to their own poverty threshold. In order to account for changes in cost of living year to year, poverty thresholds are updated every year per the Consumer Price Index (CPI-U). Poverty thresholds are the same for all geographies in the United States. While cost of living may different

How to interpret these data: In 2019, 11.6% of the San Diego County population lived below 100% federal poverty level (FPL). Specifically, 5.4% lived under 50% FPL, 2.5% between 50-74% FPL, and 3.7% between 75-99% FPL.



Source: U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates, Table B17024 Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.







# **DEMOGRAPHIC CHARACTERISTICS**



# WWW.SDHEALTHSTATISTICS.COM

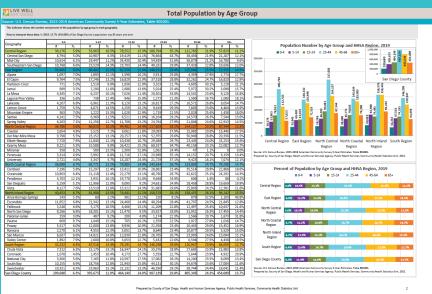




### Demographics:

- · Population size
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- · and more











# INTRODUCTION





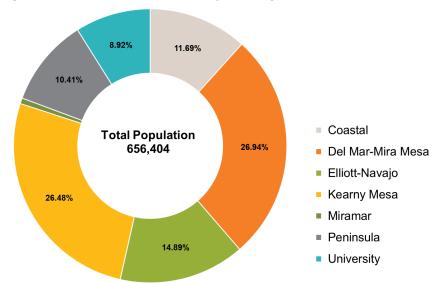
### **NORTH CENTRAL REGION**

In 2019, **North Central Region** was home to an estimated <u>656,404</u> <u>residents</u>, representing **19.8%** of San Diego County population (3,316,073).

### **Subregional Areas**

Coastal, Del Mar-Mira Mesa, Elliott-Navajo, Kearny Mesa, Miramar, Peninsula, University

### North Central Region Population Distribution by Subregional Areas, 2019



Source: U.S. Census Bureau; 2015-2019 American Community Survey 5-year Estimates, Table B01001.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.

### **COMMUNITIES IN YOUR REGION**







### POPULATION DISTRIBUTION BY AGE

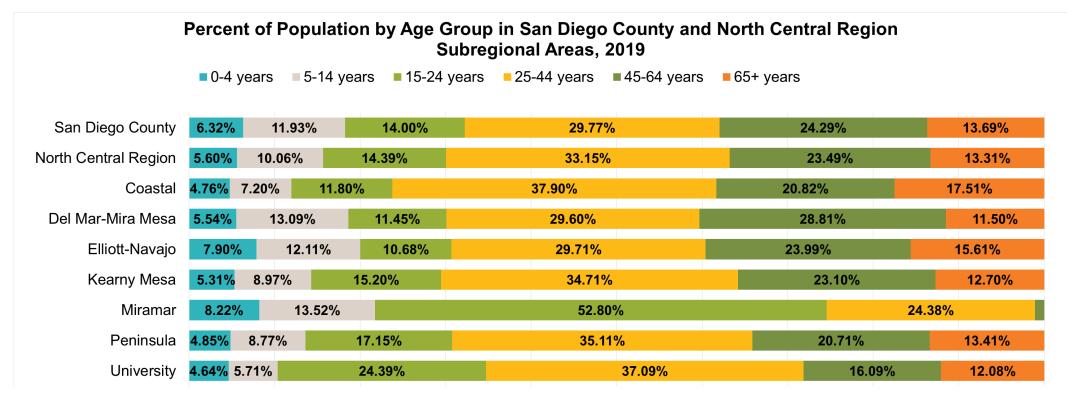




In 2019, adults aged **25-44 years old** constituted the **highest** proportion of North Central Region residents (**33.15%**).

**45-64 years old** constituted the **second highest** proportion of North Central Region residents (**23.49%**) in 2019.

In 2019, **Coastal SRA** had the highest proportion of adults aged 25-44 years old (**37.90%**) in North Central Region.



Source: U.S. Census Bureau; 2015-2019 American Community Survey 5-year Estimates, Table S0101.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.





### POPULATION DISTRIBUTION BY RACE/ETHNICITY



Geography	Hispanic	White	Black	API*	AIAN**	Other
San Diego County	33.70%	45.56%	4.71%	12.01%	0.38%	3.64%
North Central Region	16.58%	55.91%	3.30%	19.41%	0.25%	4.56%
Coastal	13.29%	76.27%	1.39%	5.20%	0.10%	3.75%
Del Mar-Mira Mesa	11.19%	43.20%	2.24%	37.62%	0.25%	5.50%
Elliott-Navajo	18.22%	62.38%	4.90%	9.76%	0.16%	4.58%
Kearny Mesa	24.58%	52.26%	4.30%	14.39%	0.23%	4.24%
Miramar	31.66%	48.85%	7.97%	2.87%	2.09%	6.57%
Peninsula	14.74%	71.51%	4.26%	5.19%	0.40%	3.91%
University	11.67%	49.92%	1.87%	31.88%	0.37%	4.30%

The community with the highest proportion of **Hispanic residents** was Miramar SRA (31.66%) and the lowest was Del Mar-Mira Mesa SRA (11.19%).

The community with the highest proportion of **Asian/Pacific Islander residents** was Del Mar-Mira Mesa SRA (37.62%) and the lowest was Miramar SRA (2.87%).

\*API-Asian/Pacific Islander.

<sup>\*\*</sup>AIAN-American Indian/Alaska Native. Source: U.S. Census Bureau; 2015-2019 American Community Survey 5year Estimates, Table B03002. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit. 2021.



# **LANGUAGE\***





Geography	Speak English Only	Speak a Non- English Language at Home and Speak English "very well"	Speak Spanish and English less than "very well"	Speak API** Language and English less than "very well"	Speak Other Language and English less than "very well"
San Diego County	62.40%	23.87%	8.65%	3.42%	1.66%
North Central Region	69.35%	20.54%	2.54%	5.53%	2.04%
Coastal	80.87%	14.75%	2.18%	0.71%	1.50%
Del Mar-Mira Mesa	57.75%	26.81%	1.86%	11.12%	2.45%
Elliott-Navajo	78.67%	15.72%	1.62%	2.61%	1.38%
Kearny Mesa	68.26%	20.34%	4.76%	4.62%	2.01%
Miramar	80.44%	17.96%	1.25%	0.15%	0.20%
Peninsula	84.57%	11.70%	1.47%	0.76%	1.50%
University	58.66%	28.14%	1.36%	8.43%	3.40%

In 2019, nearly **7 out of 10**residents aged **5 years and**older in North Central Region
(69.35%) spoke only English at
home.

In 2019, 1 out of 5 residents aged 5 years and older (20.54%) spoke English "very well" and another language at home in North Central Region.

Among North Central Region SRAs, the proportion of residents speaking only

English at home was highest in Peninsula (84.57%) and lowest in

Del Mar-Mira Mesa (57.75%).



<sup>\*</sup>Among population 5 years and older \*\*Asian/Pacific Islander.

Source: U.S. Census Bureau; 2015-2019 American Community Survey 5-year Estimates, Table DP02.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.

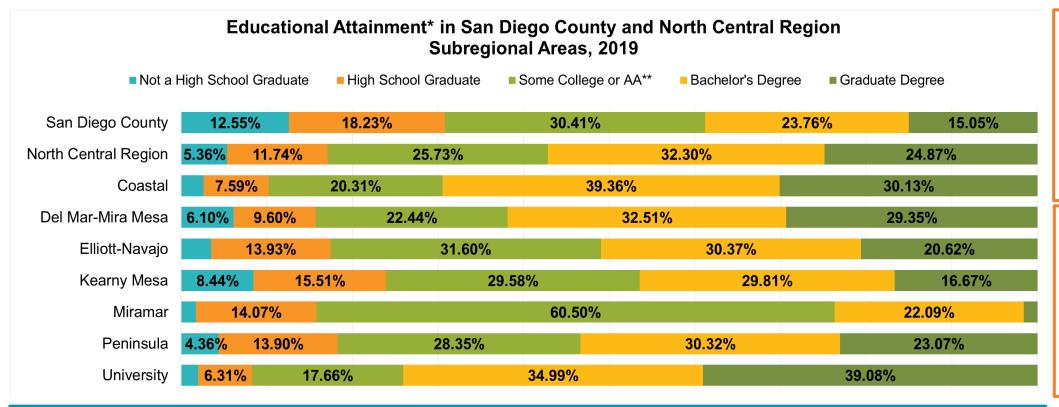
# **EDUCATIONAL ATTAINMENT\***







### **Educational attainment in North Central Region**



In 2019, over **9 out**of **10 adults** 25
years and older
(94.64%) had at
least a high school
diploma in North
Central Region.

Nearly 6 out of 10 adults 25 years and older (57.17%) held a bachelor's or higher degree in North Central Region in 2019.

In North Central Region, the proportion of adults 25 years and older without a high school diploma was highest in Kearny Mesa SRA (8.44%) and lowest in Miramar SRA (1.71%) in 2019.



<sup>\*</sup>Among population 25 years and older. \*\*Includes Some college, no degree and Associate's degree.

Source: U.S. Census Bureau; 2015-2019 American Community Survey 5-year Estimates, Table DP02.

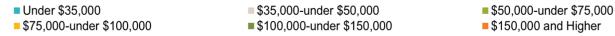
Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.

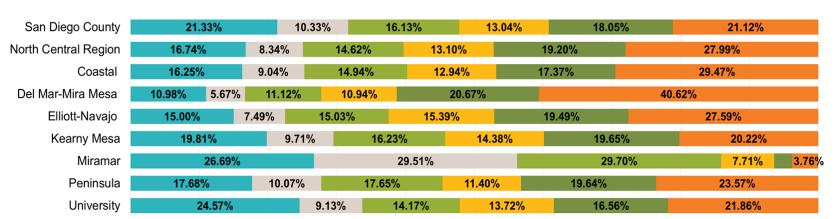
# HOUSEHOLD INCOME



### HOUSEHOLD INCOME

# Percent of Households by Household Income in San Diego County and North Central Region Subregional Areas, 2019





### Percent of Households

Source: U.S. Census Bureau; 2015-2019 American Community Survey 5-year Estimates, Table DP03. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.

In 2019, nearly **16.74% households** in North Central Region had an annual income of less than **\$35,000**.

In North Central Region, the proportion of households with an annual income of less than \$35,000 was highest in **Miramar SRA** in 2019.

### MEDIAN HOUSEHOLD INCOME

Geography	Median Household Income		
San Diego County	\$78,980		
North Central Region	\$100,965		
Coastal	\$108,175		
Del Mar-Mira Mesa	\$129,360		
Elliott-Navajo	\$99,628		
Kearny Mesa	\$82,869		
Miramar	\$47,097		
Peninsula	\$93,254		
University	\$83,531		

Source: U.S. Census Bureau; 2015-2019 American Community Survey 5-year Estimates, Table DP03.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.





# **POVERTY & UNEMPLOYMENT**



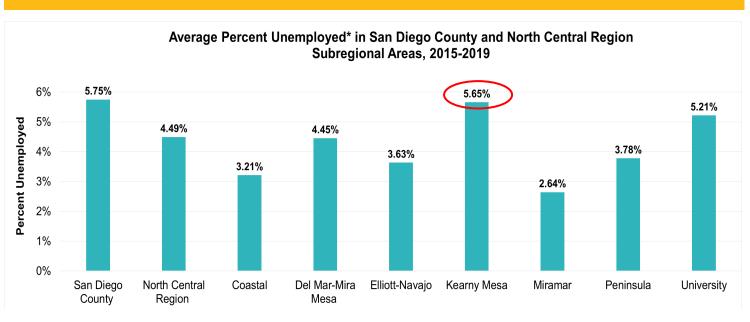
### **POVERTY**

Geography	% Population below 200% federal poverty level (FPL)				
San Diego County	27.82%				
North Central Region	20.79%				
Coastal	19.41%				
Del Mar-Mira Mesa	13.62%				
Elliott-Navajo	17.48%				
Kearny Mesa	25.32%				
Miramar	54.71%				
Peninsula	22.99%				
University	33.21%				

Source: U.S. Census Bureau; 2015-2019 American Community Survey 5-year Estimates, Table S1701. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.

In North Central Region, **Miramar SRA** had the highest proportion of population living below 200% FPL (54.71%) in 2019.

### UNEMPLOYMENT



\*Percent unemployed of population 16 years and over in labor force. Labor force includes residents employed, unemployed, and in Armed Forces. Source: U.S. Census Bureau; 2015-2019 American Community Survey 5-year Estimates, Table DP03.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.

In North Central Region, the average unemployment rate was highest in Kearny Mesa SRA (5.65%) between 2015-2019.

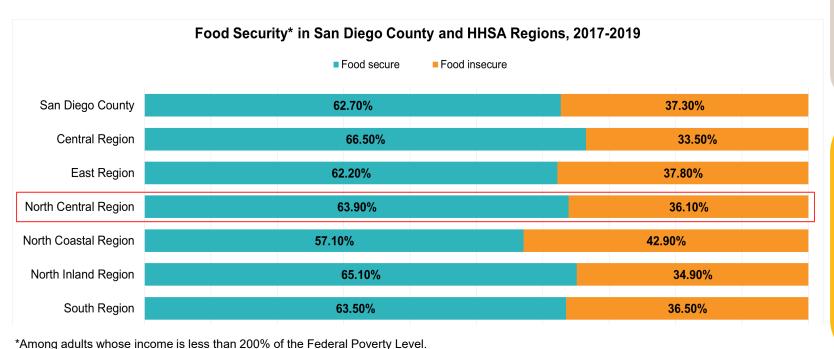




# **FOOD SECURITY\***



# FOOD SECURITY\* AMONG ADULTS WITH INCOME LESS THAN 200% FEDERAL POVERTY LEVEL



Source: UCLA Center for Health Policy Research, Los Angeles, CA. AskCHIS 2017-2019. Food security (ability to afford enough food) (San Diego County Health Regions). Available at http://ask.chis.ucla.edu. Exported on April 21, 2021.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.





On average, nearly 2 out of 5 adults with income less than 200% FPL, reported an inability to afford enough food in North Central Region between 2017-2019.

Between 2017-2019, among HHSA regions, the proportion of adults with income less than 200% FPL reporting food insecurity in North Central Region was comparatively lower than that in East Region and North Coastal Region.

# **ACCESS TO HEALTHCARE**



### **HEALTH INSURANCE (HI)**

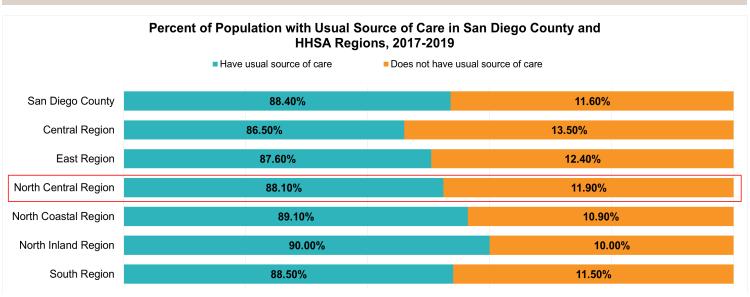
Geography	% with HI	% with no HI
San Diego County	92.16%	7.84%
North Central Region	94.52%	5.48%
Coastal	93.98%	6.02%
Del Mar-Mira Mesa	95.95%	4.05%
Elliott-Navajo	96.18%	3.82%
Kearny Mesa	92.79%	7.21%
Miramar	98.57%	1.43%
Peninsula	93.85%	6.15%
University	93.85%	6.15%

Source: U.S. Census Bureau; 2015-2019 American Community Survey 5-year Estimates. Table B27001.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.

Among North Central Region SRAs, Kearny Mesa had the highest proportion of residents with no health insurance (7.21%).

### **USUAL SOURCE OF CARE**



Source: UCLA Center for Health Policy Research, Los Angeles, CA. AskCHIS 2017-2019.
Usual Source of Care (San Diego County Health Regions). Available at http://ask.chis.ucla.edu. Exported on April 21, 2021.
Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.

North Central Region residents were more likely to report having a usual place to go when sick or needing health advice compared to Central Region and East Region.





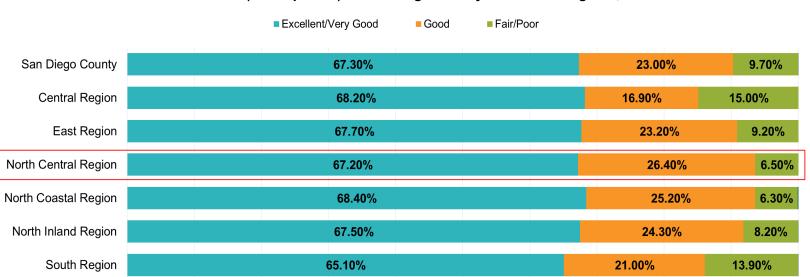
## **SELF-REPORTED HEALTH STATUS & DISABILITY**





### **SELF-REPORTED HEALTH STATUS**

### Health Status (self-reported) in San Diego County and HHSA Regions, 2019



Source: UCLA Center for Health Policy Research, Los Angeles, CA. AskCHIS 2017-2019. Health Status (San Diego County Health Regions). Available at http://ask.chis.ucla.edu. Exported on April 21, 2021.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.

In 2019, nearly 7 out of 10 residents (67.20%) in East Region reported excellent or very good health.





### DISABILITY

Disability %
9.88%
8.13%
7.26%
6.77%
8.92%
10.03%
4.76%
7.74%
7.09%

Source: U.S. Census Bureau; 2015-2019 American Community Survey 5-year Estimates,

Prepared by: County of San Diego, Health and Human Services Agency, Public Health

Services, Community Health Statistics Unit, 2021.

# 





### Self-Sufficiency Standard\* for San Diego County, 2021^

The self-sufficiency standard measures how much income is needed for a household of a certain composition to adequately meet their basic needs without public or private assistance.

This interactive tool helps to visualize the minimum wage required for self-sufficiency\* based on the average amount spent on basic necessities in each Health and Human Services Agency (HHSA) region, subregional area (SRA), and San Diego County overall.

Select household type to explore the differences in the income required to be economically self-sufficient:

Household with 2 Adults, 2 Children (1 Preschool-Age, 1 School-Age)

Single-Adult Household

Select San Diego County/HHSA Region and Subregional Area (SRA) to explore the differences by geography:

San Diego County and HHSA Regions	Subregional Area (SRA)
North Central Region	Coastal

### Self-Sufficiency\* Income for a Household with 2 Adults, 2 Children (1 Preschool-Age, 1 School-Age), 2021

The average minimum income required to be economically self-sufficient without public or private assistance (based on each adult working 40 hours per week).

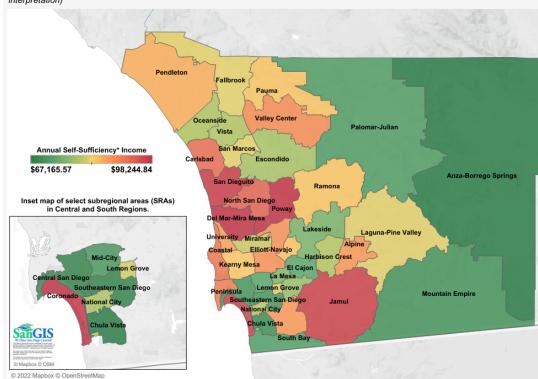
North Central Region		Coastal SRA	Annual Self-Sufficiency* Income for a Household with 2 Adults, 2 Children (1 Preschool-Age, 1 School-Age), Coastal SRA, 2021
Hourly (per adult)	\$21,41	\$21.85	
Monthly	\$7,422.61	\$7,575.22	
Annual	\$89,071.28	\$90,902.58	
Monthly Contribution to	Emergency Savings F	und	Village State
North Centr	ral Region	Coastal SRA	Coastal SRA \$90,902.58
\$151	.21	\$156.31	STGS

### Monthly Expenses for a Household with 2 Adults, 2 Children (1 Preschool-Age, 1 School-Age), 2021

The average amount spent per month by expense type to meet basic necessities without public or private assistance.



Annual Self-Sufficiency\* Income for a Household with 2 Adults, 2 Children (1 Preschool Age, 1 School Age) by Subregional Area (SRA), San Diego County, 2021 (Hover the cursor over the SRAs in the map to view interpretation)



\*The Self-Sufficiency Standard measures how much income is needed for a household of a certain composition to adequately meet their basic needs without public or private assistance. (https://insightcced.org/family-needs-calculator/). ^Estimates based on the most recent data available. See methodology (insert link) for detailed information.

Sources (Household with 2 adults, 2 children): Insight Center's Family Needs Calculator. https://insightcced.org/family-needs-calculator/. Accessed October 2021. Health care expenditure: 2021 Community Analyst ESRI Medical Expenditures. Average amount spent on health care. Accessed October 2021. Housing: U.S. Census Bureau; 2015-2019 American Community Survey 5-Year Estimates, Table B25105. Child care cost: The YMCA of San Diego County. 2021 Average cost of child care in San Diego by zip code. upport/childcare-resource-service/family-resources/choosing-child-care/cost-child-care. Accessed November 2021, Transportation cost: The Housing and Transportation Affordability Index, The Center for Neighborhood Technology (CNT). https://htaindex.cnt.org/. Accessed November 2021. Tax data: Internal Revenue Service. Individual Income Tax Statistics—2019 ZIP Code Data (SOI). https://www.irs.gov/stati

Sources (Individual): Insight Center's Family Needs Calculator. https://insightcced.org/family-needs-calculator/. Accessed October 2021. Housing: 2021 Fair Market Rents (40th Percentile Rents), HUD's Office of Policy Development and Research (PD&R), https://www.huduser.gov/portal/datasets/fmr.html#2021\_query. Accessed December 2021. Transportation cost: The Housing and Transportation Affordability Index, The Center for Neighborhood Technology (CNT). https://htaindex.cnt.org/. Accessed November 2021. 2015-2019 American Community Survey 5-Year Estimates, Table B19215. Healthcare cost: 2021 Products by Zip Code, Health, Individual, Covered California. Average Annual Dollars per Person Spent on Medical Care in 2019 in San Diego, CA, Policy Map. Accessed December 2021. 2015-2019 American Community Survey 5-Year Estimates, Table S0101.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, December 2021.

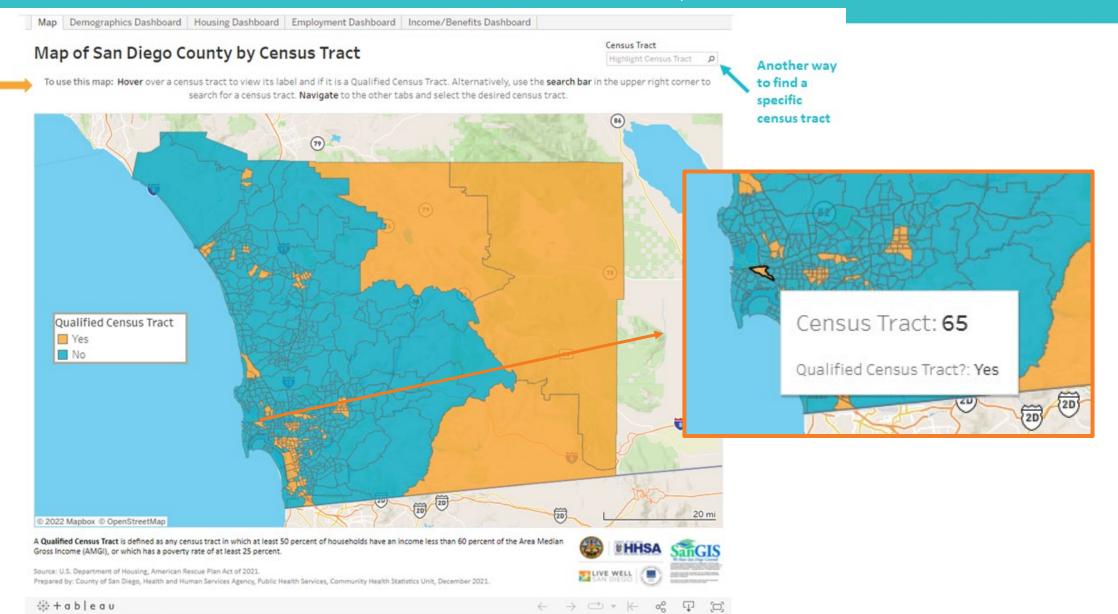






# AMERICAN RESCUE PLAN ACT (ARPA) DEMOGRAPHICS BY CENSUS TRACT, 2019



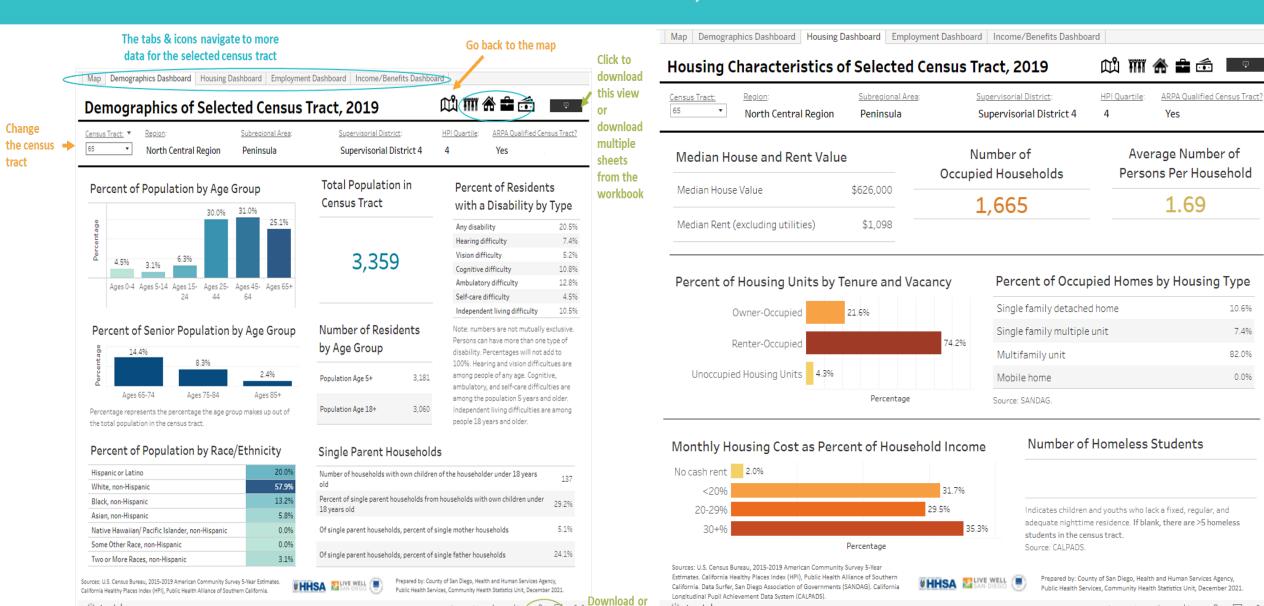


# AMERICAN RESCUE PLAN ACT (ARPA) DEMOGRAPHICS BY CENSUS TRACT, 2019

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# AMERICAN RESCUE PLAN ACT (ARPA) DEMOGRAPHICS BY CENSUS TRACT, 2019

Supervisorial District 4



Map | Demographics Dashboard | Housing Dashboard | Employment Dashboard | Income/Benefits Dashboard Employment Characteristics of Selected Census Tract, 2019 Census Tract: Subregional Area: Supervisorial District ARPA Qualified Census Tract?

Population Age 16 and Older in Labor Force

North Central Region

Peninsula

1,812

Five-Year Average Percent Unemployed Population Age 16 and Older in Labor Force

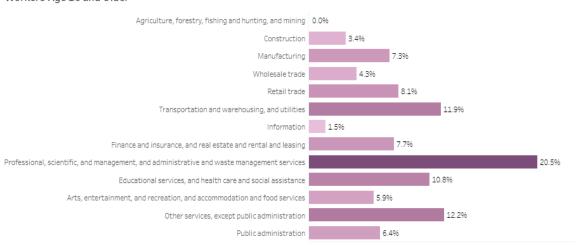
12.0%

Percent unemployed was derived from the number of unemployed persons out of the 16 year and older eligible labor force. This unemployment rate is based on a 5-year average (2015-2019) and may not be comparable to unemployment rates from other sources with different methodology and/or unemployment definitions, including the unemployment Live Well San Diego Indicator. Unemployment may be influenced by seasonal variability.

Yes

### Occupation of Workers by Type of Industry

Workers Age 16 and Older



Map Demographics Dashboard Housing Dashboard Employment Dashboard Income/Benefits Dashboard

Subregional Area

### Income & Benefit Characteristics of Selected Census Tract, 2019

HPI Quartile: ARPA Qualified Census Tract?

Census Tract:

North Central Region

Peninsula

Supervisorial District 4

Supervisorial District

Yes

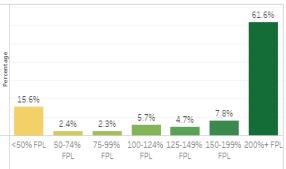
Percent of Households per Household Income



Median Household Income

\$58,112

### Percent of Population by Poverty Level



### Food Stamps/SNAP/CalFresh Receipt

1,665 Total number of households in census tract 5.096 Percent of households receiving SNAP Total number of households with children under 18 years old 144 Percent of households with children under 18 years old with 23.6% SNAP

Sources: U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates. California Healthy Places Index (HPI), Public Health Alliance of Southern California.

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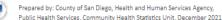
Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, December 2021.

← → □ ▼ ← & □ □

Sources: U.S. Census Bureau, 2015-2019 American Community Survey 5-Year Estimates California Healthy Places Index (HPI), Public Health Alliance of Southern California.













# **MORTALITY MEASURES**



### WWW.SDHEALTHSTATISTICS.COM

### Start Your Data Journey Here!

I am looking for..



### Demographics:

- · Population size
- Race/Ethnicity
- Languages spoken
- · Poverty level
- and more..





- Deaths, Hospitalizations, and ED
   Discharge data
- Health Briefs
- Motor Vehicle Crashes

### Regional Data:



- Regional Health
  Status Reports
- Regional Presentations



### Reports:

Publications



### Maps and Spatial Data:

- Disease AtlasesCommunity
- Features Atlases



### Measures of Mortality:

- Leading Causes of Death
- Life Expectancy
- Smoking
   Attributable Mortality





### Measures of Mortality:

- Leading Causes of Death
- Life Expectancy
- Smoking

Attributable Mortality



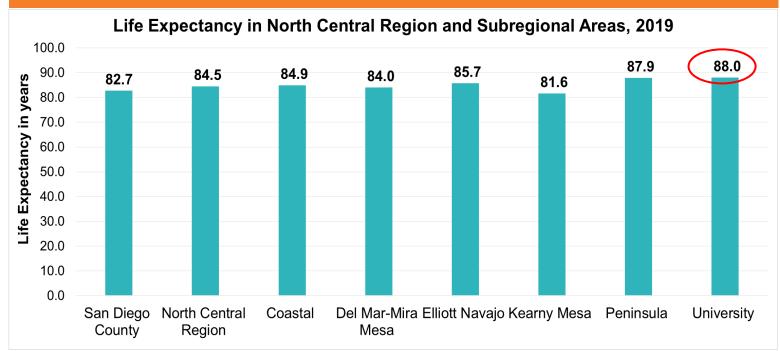




# **MORTALITY MEASURES, 2019**



### LIFE EXPECTANCY\*



\*Life expectancy data not available for all SRAs; censored due to variance in population size.

Source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS).

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2022.

In 2019, among North Central Region SRAs, University had the highest life expectancy (88 years), followed by Peninsula (87.9 years).





### **TOP 10 LEADING CAUSES OF DEATH**

In North Central Region, 8 out of the top 10 leading causes of death were chronic diseases in 2019.

- 1. Cancer
- 2. Heart Diseases
- 3. Alzheimer's Disease
- 4. Cerebrovascular Diseases (Stroke)
- 5. Accidents/Unintentional Injuries
- **6. Chronic Lower Respiratory Diseases**
- 7. Diabetes Mellitus
- 8. Intentional Self-Harm (Suicide)
- 9. Parkinson's Disease
- 10. Essential Hypertension and Hypertensive Renal Disease

Source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS). Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2022.

# HEALTH OUTCOMES

### WWW.SDHEALTHSTATISTICS.COM



### Start Your Data Journey Here!

I am looking for.



### Demographics:

- · Population size Race/Ethnicity
- Languages spoken
- Poverty level
- and more..

### Health Data:



- Deaths, Hospitalizations. and ED Discharge data
- Health Briefs
- Motor Vehicle Crashes



### Regional Data:

- · Regional Health Status Reports
- Regional Presentations



### Reports:

Publications



### Maps and Spatial Data:

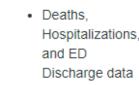
- Disease Atlases
- Community Features Atlases



### Measures of Mortality:

- · Leading Causes of Death
- Life Expectancy
- Smoking Attributable Mortality

### Health Data:



- · Health Briefs
- Motor Vehicle Crashes





Community Profiles contain a variety of health-related information in San Diego County and its communities. We currently have 2016 to 2019 deaths, hospitalizations, emergency department discharges, in-patient treatment

discharges, physical rehabilitation and skilled nursing facility discharges for all conditions. The data is collected by

The 2019 Community Profiles are available online as dynamic Tableau dashboards. These dashboards help to

Regions and their respective subregional areas (SRAs). Individual tabs can be downloaded as images and the

visualize the health data by the lenses of health equity: geography, socioeconomic status, race/ethnicity, age, and

gender. There are over 80 conditions with 6 outcomes available for the Health & Human Services Agency (HHSA)

All HHSA Regions

age groups by race/ethnicity as well

- Central Region
- East Region North Central Region

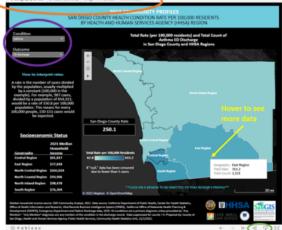
- · North Coastal Region · North Inland Region
- · South Region

See the below picture to learn how to use the Community Profiles:

entire profile can be downloaded as PDFs or PowerPoint slides.

### Navigate to data by various lenses of health equity

Use the dropdown arrows to filter by condition and outcome



Health Data by Year

Alzheimer's Disease and Related Dementias (ADRD)

- 2016
- 2017
- 2018 . 2019

### **Behavioral Health Outcomes**

- . 2016
- 2017 - 2018
- 2019

### Communicable Diseases

- 2016
- 2017 2018
- 2019

### Injuries

- . 2017
- 2018
- 2019

### Non-Communicable (Chronic) Diseases

- 2016
- 2017 2018
- . 2019

### Maternal and Child Health Outcomes

- 2016 2017
- 2018
- 2019

### Public Health Services Data Guide and Codebook For previous years' health data, dating back to 2000, visit our archives







Share or download

# 3-4-50: CHRONIC DISEASE DEATHS





**Behaviors** 

**No Physical Activity Poor Diet Tobacco Use** 

**Diseases** 

Cancer **Heart Disease & Stroke Type 2 Diabetes Lung Disease** 

Percent

Of Deaths In San Diego Change your life by...

Walking for 30 minutes every day



Eating healthy, at least 5 fruits and veggies daily



Not smoking!



**San Diego County** 



**North Central Region** 

The proportion of deaths due to 3-4-50 chronic diseases in San Diego County dropped from 63% in 2000 to 50% in 2019

The proportion of deaths due to 3-4-50 chronic diseases in North Central Region dropped from 63% in 2000 to 48% in 2019

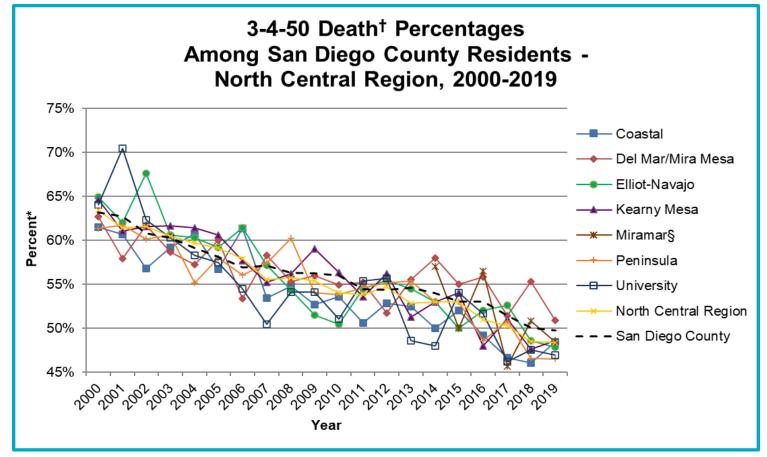




# 3-4-50: CHRONIC DISEASE DEATHS



# Percentages, Trend 2000-2019



The proportion of deaths due to 3-4-50 chronic diseases in North Central Region dropped from 63% in 2000 to 48% in 2019.

Among the North Central Region SRAs, Del Mar-Mira Mesa had the highest percentage of deaths due to 3-4-50 chronic disease (51%) in 2019.

§Percentages not calculated for fewer than 5 events. Percentages not calculated in cases where zip code is unknown.

Source: California Department of Public Health, 2000-2013 Death Statistical Master Files, 2014-2019 California Vital Records Business Intelligence System (VRBIS).

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit. 2021.



<sup>\*3-4-50</sup> Deaths as a percentage of all cause deaths.

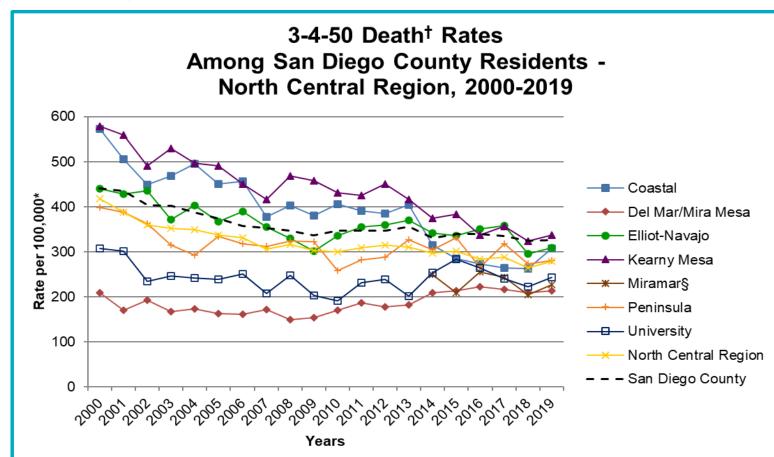
<sup>\*\*</sup>Harbison Crest/El Cajon is an aggregation of the Harbison Crest and El Cajon SRAs. Due to geographic limitations, the Harbison Crest SRA is not shown alone. See the Data Guide for more information

<sup>†3-4-50</sup> Deaths include Stroke, Coronary Heart Disease (CHD), Diabetes, COPD, Asthma, and Cancer. Beginning with 2017, COPD includes chronic lower respiratory diseases (COPD/chronic lower respiratory diseases).

# 3-4-50: CHRONIC DISEASE DEATHS



# **Rates, Trend 2000-2019**



3-4-50 chronic disease death rate in **North Central Region dropped from** 417.1 per 100,000 in 2000 to 278.2 per 100,000 in 2019.

**Among the North Central Region** SRAs, Kearny Mesa had the highest 3-4-50 chronic disease death rate (336.5 per 100,000) in 2019.

Overall, 3-4-50 chronic disease death rates have decreased in the North **Central Region and its SRAs except** Del Mar-Mira Mesa SRA, where the rate increased from 2000-2019.

\*Rates per 100,000 population

§Rates not calculated for fewer than 5 events. Rates not calculated in cases where zip code is unknown.





<sup>\*\*</sup>Harbison Crest/El Cajon is an aggregation of the Harbison Crest and El Cajon SRAs. Due to geographic limitations, the Harbison Crest SRA is not shown alone. See the Data Guide for more information †3-4-50 Deaths include Stroke, Coronary Heart Disease (CHD), Diabetes, COPD, Asthma, and Cancer. Beginning with 2017, COPD includes chronic lower respiratory diseases (COPD/chronic lower respiratory diseases).

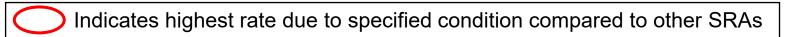
Source: California Department of Public Health, 2000-2013 Death Statistical Master Files, 2014-2019 California Vital Records Business Intelligence System (VRBIS). Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.

# NON-COMMUNICABLE (CHRONIC) DISEASES





Geography	Death (per 100		-	alization Rate r 100,000)	ED* Discharge Rate (per 100,000)		
o o g. a.p.i.y	Highest	Second Highest	Highest	Second Highest	Highest	Second Highest	
San Diego County	Cancer (149.7)	Heart Disease (139.9)	Heart Disease (994.0)	Hypertensive Diseases (315.0)	Heart Disease (1,841.9)	Hypertensive Diseases (300.4)	
North Central Region	Cancer (131.4)	Heart Disease (129.3)	Heart Disease (780.0)	Hypertensive Diseases (231.6)	Heart Disease (1,395.1)	Hypertensive Diseases (218.8)	
Coastal	Heart Disease (147.9)	Cancer (144.7)	Heart Disease (753.7)	Cancer (209.4)	Heart Disease (1,031.2)	Hypertensive Diseases (136.4)	
Del Mar-Mira Mesa	Cancer (115.8)	Heart Disease (80.8)	Heart Disease (632.6)	Cancer (226.1)	Heart Disease (1,186.2)	Hypertensive Diseases (190.7)	
Elliott-Navajo	Cancer (144.4)	Heart Disease (140.5)	Heart Disease (941.4)	Hypertensive Diseases (266.3)	Heart Disease (1,769.6)	Hypertensive Diseases (280.6)	
Kearny Mesa	Heart Disease (162.0)	Cancer (154.7)	Heart Disease (918.6)	Hypertensive Diseases (308.3)	Heart Disease (1,795.7)	Hypertensive Diseases (285.5)	
Miramar	Cancer (115.1)	Heart Disease (90.7)	Heart Disease (671.8)	Hypertensive Diseases (263.5)	Heart Disease (1,436.4)	Hypertensive Diseases (244.9)	
Peninsula	Heart Disease (145.1)	Cancer (120.1)	Heart Disease (777.5)	Hypertensive Diseases (243.9)	Heart Disease (1,275.1)	Hypertensive Diseases (169.2)	
University	Heart Disease (114.2)	Cancer (114.0)	Heart Disease (677.1)	Cancer (204.1)	Heart Disease (1,011.3)	Hypertensive Diseases (192.1)	



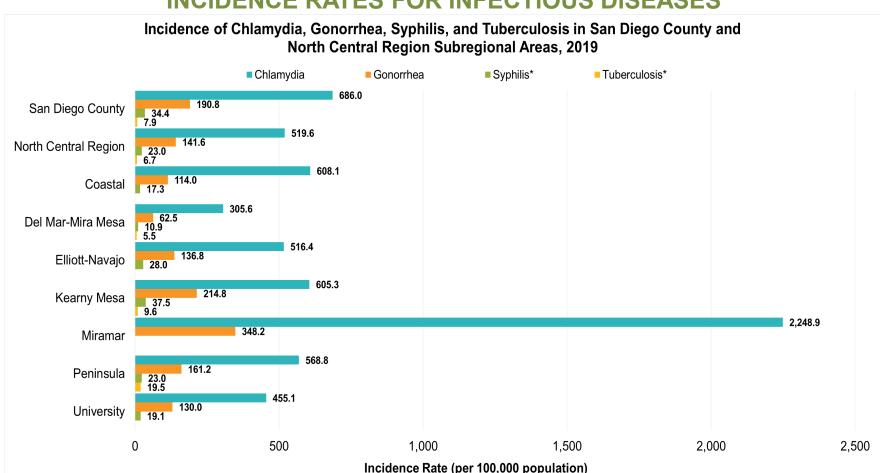


# **COMMUNICABLE (INFECTIOUS) DISEASES**





### INCIDENCE RATES FOR INFECTIOUS DISEASES



\*Rates not calculated for fewer than 5 cases.

Source: San Diego County Community Profiles, 2019.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2022.





In 2019, the incidence rates for infectious diseases (chlamydia, gonorrhea, syphilis, and tuberculosis) in North Central Region overall were lower compared to San Diego County overall.

In 2019, the incidence rate for **chlamydia** in **Miramar SRA** was significantly higher than that in North Central Region and San Diego County overall.

In 2019, the incidence rate for **gonorrhea** in **Miramar SRA** was higher than that in North Central Region and San Diego County overall.

# COMMUNICABLE (INFECTIOUS) DISEASES





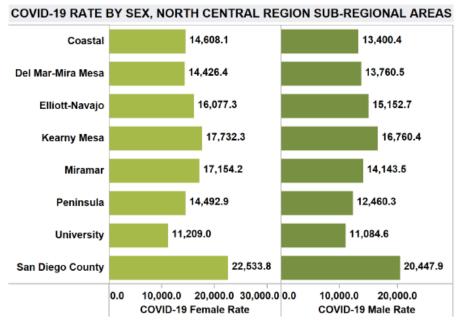
Geography	Death Rate* (per 100,000)			ization Rate* 100,000)	ED** Discharge Rate (per 100,000)	
	Highest	Second Highest	Highest	Second Highest	Highest	Second Highest
San Diego County	Pneumonia (6.9)	UTI*** (3.0)	Pneumonia (118.1)	UTI*** (105.7)	UTI*** (643.9)	Flu (252.6)
North Central Region	Pneumonia (5.4)	UTI*** (2.5)	Pneumonia (87.0)	UTI*** (70.9)	UTI*** (412.1)	Pneumonia (167.9)
Coastal	Pneumonia (7.2)	-	Pneumonia (79.3)	UTI*** (72.8)	UTI*** (300.0)	Pneumonia (111.7)
Del Mar-Mira Mesa		-	Pneumonia (86.9)	UTI*** (53.5)	UTI*** (304.0)	Pneumonia (148.5)
Elliott-Navajo	UTI*** (5.4)	-	Pneumonia (80.2)	UTI*** (69.0)	UTI*** (513.0)	Pneumonia (221.0)
Kearny Mesa	Pneumonia (5.2)	-	Pneumonia (105.9)	UTI*** (90.1)	UTI*** (565.6)	Flu (237.8)
Miramar	-	-	Pneumonia (100.0)	-	UTI*** (416.2)	Pneumonia (177.5)
Peninsula	-	-	Pneumonia (82.5)	UTI*** (79.0)	UTI*** (408.6)	Pneumonia (131.3)
University	Pneumonia (9.3)	-	UTI*** (77.0)	Pneumonia (66.5)	UTI*** (298.7)	Pneumonia (128.5)





<sup>\*\*</sup>Emergency Department. \*\*\*Urinary Tract Infection. Source: San Diego County Community Profiles, 2019.

# SAN DIEGO COUNTY CUMULATIVE COVID-19 RATE\* PER 100,000 RESIDENTS BY NORTH CENTRAL REGION SUB-REGIONAL AREAS^ (DATA THROUGH FEBRUARY 13, 2022)

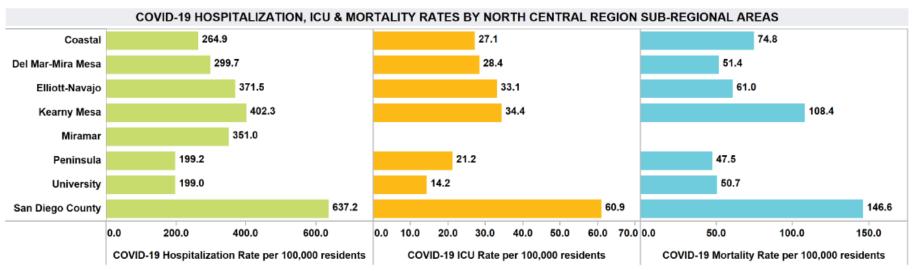






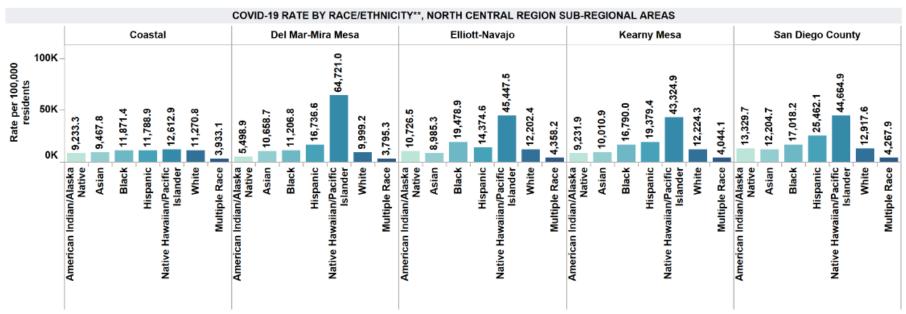
Median household income source: ESRI Community Analyst, 2019. \*A rate is the number of cases divided by the population, usually multiplied by a constant (100,000 in the following example). For example 987 cases, divided by population of 654,321, would be a rate of 150.8 per 100,000 population. This means for every 100,000 people, 150-151 cases would be expected.

Health equity is achieved when "every person has the opportunity to 'attain his or her full health potential' and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances." -Centers for Disease Control and Prevention

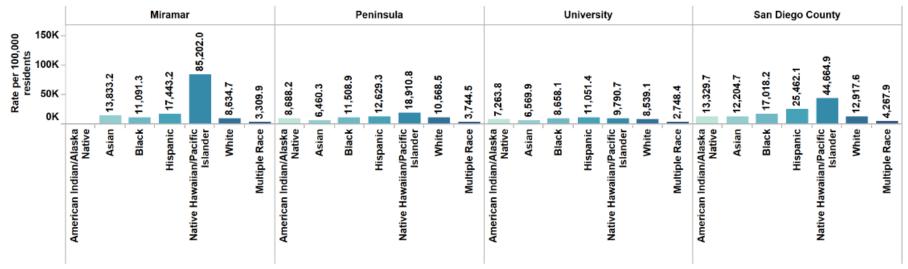


Data through 2/13/2022. Data are preliminary and subject to change. More information may become available as individual case investigations are completed. ASRA of residence, which may not be location of exposure, only cases with known zip code are included in rate calculation. Data source: San Diego County Communicable Disease Registry. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2/15/2022.

# SAN DIEGO COUNTY CUMULATIVE COVID-19 RATE\* PER 100,000 RESIDENTS BY NORTH CENTRAL REGION SUB-REGIONAL AREAS^ (DATA THROUGH FEBRUARY 13, 2022)



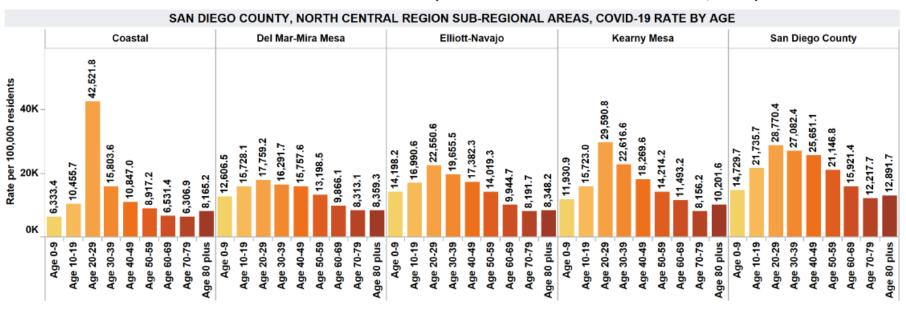
<sup>\*</sup>A rate is the number of cases divided by the population, usually multiplied by a constant (100,000 in the following example). For example 987 cases, divided by population of 654,321, would be a rate of 150.8 per 100,000 population. This means for every 100,000 people, 150-151 cases would be expected.



<sup>\*\*</sup>Persons of Hispanic/Latino ethnicity may belong to any race group. All categories except Hispanic/Latino include persons for whom race is known but ethnicity is non-Hispanic or unknown.

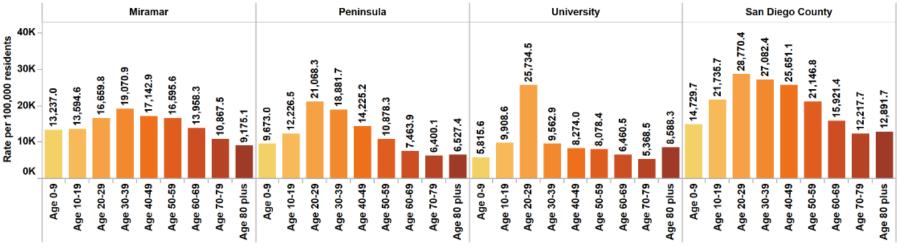
Data through 2/13/2022. Data are preliminary and subject to change. More information may become available as individual case investigations are completed. ASRA of residence, which may not be location of exposure, only cases with known zip code are included in rate calculation. Data source: San Diego County Communicable Disease Registry. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2/15/2022.

# SAN DIEGO COUNTY CUMULATIVE COVID-19 RATE\* PER 100,000 RESIDENTS BY NORTH CENTRAL REGION SUB-REGIONAL AREAS^ (DATA THROUGH FEBRUARY 13, 2022)



<sup>\*</sup>A rate is the number of cases divided by the population, usually multiplied by a constant (100,000 in the following example). For example 987 cases, divided by population of 654,321, would be a rate of 150.8 per 100,000 population. This means for every 100,000 people, 150- 151 cases would be expected.

Health equity is achieved when "every person has the opportunity to 'attain his or her full health potential' and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances." -Centers for Disease Control and Prevention



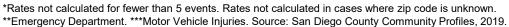
Data through 2/13/2022. Data are preliminary and subject to change. More information may become available as individual case investigations are completed. ASRA of residence, which may not be location of exposure, only cases with known zip code are included in rate calculation. Data source: San Diego County Communicable Disease Registry. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2/15/2022.

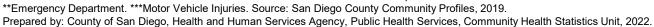
# **INJURY**



Geography	Death Rate*		Hospitalization Rate		ED** Discharge Rate	
	(per 100,000)		(per 100,000)		(per 100,000)	
	Highest	Second Highest	Highest	Second Highest	Highest	Second Highest
San Diego County	Poisoning	Suicide	Falls	Poisoning	Falls	MVI***
	(14.0)	(12.4)	(404.6)	(77.1)	(2,036.9)	(577.0)
North Central Region	Suicide	Poisoning	Falls	Hip Fractures	Falls	MVI***
	(12.6)	(12.1)	(364.1)	(65.3)	(1,666.2)	(393.3)
Coastal	Poisoning (20.3)	Suicide (14.1)	Falls (410.8)	Hip Fractures (76.3)	Falls (1,480.0)	MVI*** (304.3)
Del Mar-Mira Mesa	Suicide	Poisoning	Falls	MVI***	Falls	MVI***
	(11.4)	(7.5)	(254.0)	(50.4)	(1,220.9)	(354.5)
Elliott-Navajo	Suicide (13.1)	Firearm-Related (9.7)	Falls (415.9)	Hip Fractures (84.9)	Falls (2,050.2)	MVI*** (456.0)
Kearny Mesa	Poisoning (19.7)	Suicide (12.1)	Falls (406.4)	Poisoning (74.8)	Falls (2,148.6)	MVI*** (511.9)
Miramar	-	-	Falls (239.4)	Poisoning (80.6)	Falls (1,172.1)	MVI*** (514.3)
Peninsula	Poisoning	Suicide	Falls	Hip Fractures	Falls	MVI***
	(14.0)	(13.8)	(405.7)	(59.2)	(1,737.9)	(359.0)
University	Suicide	Falls	Falls	Hip Fractures	Falls	MVI***
	(14.0)	(10.9)	(366.0)	(77.1)	(1,249.2)	(247.1)

Indicates highest rate due to specified condition compared to other SRAs







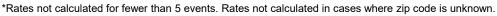
# **BEHAVIORAL HEALTH INDICATORS**





Geography	Death Rate* (per 100,000)		Hospitalization Rate* (per 100,000)		ED** Discharge Rate (per 100,000)	
	Highest	Second Highest	Highest	Second Highest	Highest	Second Highest
San Diego County	ADRD*** (85.2)	Alcohol-Related Disorders (13.0)	Alcohol-Related Disorders (50.5)	ADRD*** (21.2)	Alcohol-Related Disorders (270.2)	Anxiety~ (231.5)
North Central Region	ADRD*** (83.7)	Alcohol-Related Disorders (11.7)	Alcohol-Related Disorders (43.9)	ADRD*** (22.6)	Alcohol-Related Disorders (242.6)	Anxiety~ (178.3)
Coastal	ADRD*** (103.3)	Alcohol-Related Disorders (8.9)	Alcohol-Related Disorders (56.9)	ADRD*** (22.5)	Alcohol-Related Disorders (238.5)	Anxiety~ (135.0)
Del Mar-Mira Mesa	ADRD*** (65.1)	Alcohol-Related Disorders (5.7)	Alcohol-Related Disorders (17.2)	ADRD*** (13.4)	Anxiety~ (124.3)	Alcohol-Related Disorders (116.8)
Elliott-Navajo	ADRD*** (101.0)	Alcohol-Related Disorders (18.1)	Alcohol-Related Disorders (44.5)	ADRD*** (25.0)	Alcohol-Related Disorders (310.6)	Anxiety~ (212.6)
Kearny Mesa	ADRD*** (91.4)	Alcohol-Related Disorders (16.8)	Alcohol-Related Disorders (57.9)	ADRD*** (28.7)	Alcohol-Related Disorders (304.5)	Anxiety~ (249.1)
Miramar	ADRD*** (67.4)	-	-	-	Anxiety~ (142.6)	Alcohol-Related Disorders (134.1)
Peninsula	ADRD*** (84.1)	Alcohol-Related Disorders (19.5)	Alcohol-Related Disorders (81.9)	ADRD*** (31.1)	Alcohol-Related Disorders (383.4)	Mood Disorder (184.9)
University	ADRD*** (71.4)	-	Alcohol-Related Disorders (26.7)	ADRD*** (22.5)	Alcohol-Related Disorders (183.4)	Anxiety~ (140.5)









# 2020 INCREASES IN DEATHS IN SAN DIEGO COUNTY



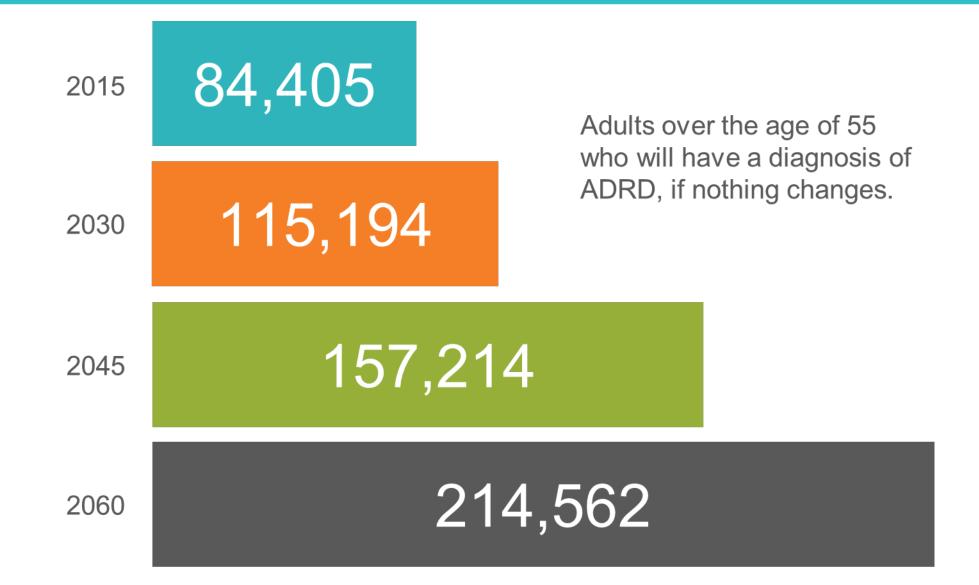
Cause of Death	Total Number of Deaths in 2020	Percent Increase in Rate from 2019	
Alzheimer's disease and related dementias	2,618	6.0%	
COVID-19	1,727	N/A	
All Causes	24,570	9.3%	

Source: California Department of Public Health Fusion Center. Data Brief: 2020/Q1 2021 Increases in Deaths in San Diego County, last updated 10/15/2021. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2021.

- In San Diego County, Alzheimer's disease and related dementias had the second largest absolute increase in number of deaths from 2019 to 2020 (+241 deaths) compared to other selected causes of death.
- Increases in death due to ADRD are consistent with long-term increasing trends.

# ALZHEIMER'S DISEASE AND RELATED DEMENTIAS (ADRD) IN SAN DIEGO COUNTY



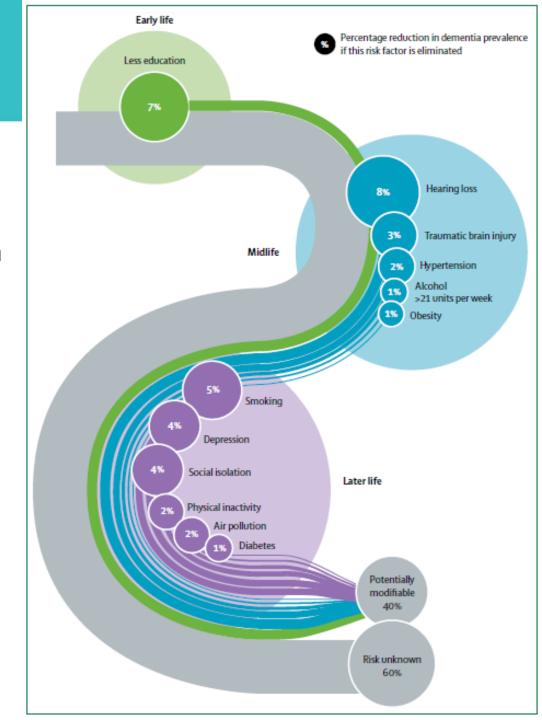


# DEMENTIA PREVENTION

## DEMENTIA PREVENTION, INTERVENTION,

#### AND CARE

- Article published in The Lancet in July 2017, updated in 2020
- Research team working with the World Health Organization
- Big data analysis
  - All studies done relating to Alzheimer's Disease and Related Dementias (ADRD)
  - Purpose: to identify modifiable risk factors
- Determined that 40% of ADRD cases could be prevented through behavioral and lifestyle changes

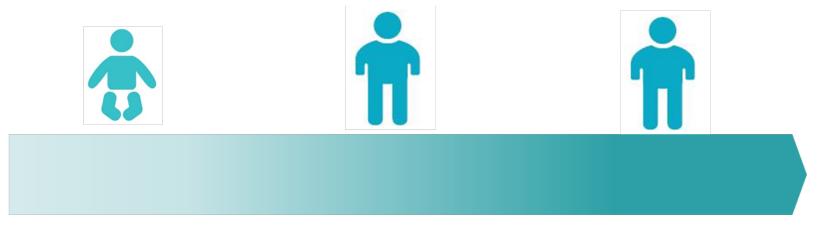


Source: Dementia prevention, intervention, and care. (2020) Livingston, G. et al. *The Lancet*, *396*, 413-46. doi:10.1016/s0140-6736(20)30367-6

# MODIFIABLE RISK FACTORS



## ALZHEIMER'S DISEASE AND RELATED DEMENTIA RISK FACTORS BY LIFE STAGE



Alzheimer's Disease and

Related **Dementias** 

#### Childhood (7%)

### Low education (7%)

Mid-Life (15%)

- Hearing loss (8%)
- Traumatic brain injury (3%)
- Hypertension (2%)
- Obesity (1%)
- Excessive alcohol consumption (1%)

#### Older Adulthood (18%)

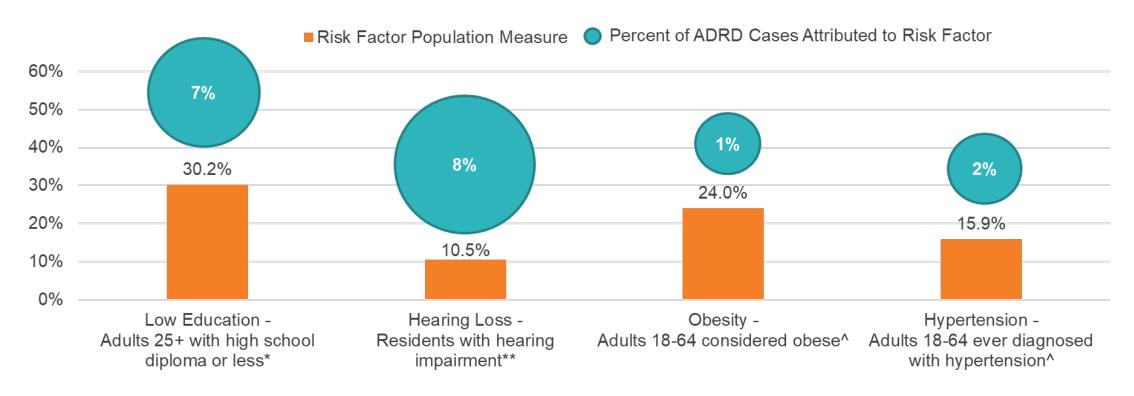
- Smoking (5%)
- Depression (4%)
- Social isolation (4%)
- Physical inactivity (2%)
- Air pollution (2%)
- Diabetes (1%)

Source: Dementia prevention, intervention, and care. (2020) Livingston, G. et al. The Lancet, 396, 413-46. doi:10.1016/s0140-6736(20)30367-6

# EARLY & MID-LIFE RISK



# RISK FACTORS FOR ALZHEIMER'S DISEASE AND RELATED DEMENTIAS (ADRD) AND PERCENT OF ADRD ATTRIBUTED TO RISK FACTORS, SAN DIEGO COUNTY



Sources: Dementia prevention, intervention, and care. (2020) Livingston, G. et al. The Lancet, 396, 413-46. doi:10.1016/s0140-6736(20)30367-6.

<sup>\*</sup>U.S. Census Bureau, 2019 American Community Survey 1-Year Estimate, Table DP02.

<sup>\*\*</sup>U.S. Census Bureau, 2019 American Community Survey 1-Year Estimate, Table B99182.

<sup>^</sup>UCLA Center for Health Policy Research. 2020 California Health Interview Survey. Accessed 11/5/2021.

# HEALTHY BODY, HEALTHY MIND

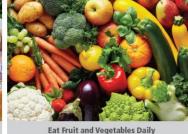




# **HEALTHY** BODY, Y **HEALTHY**







**Maintain Social Interactions** 



#### **KNOW YOUR HEALTH NUMBERS**

For more information, contact your health provider.









#### YOUR HEALTH IS UP TO YOU! MAKE IT FUN!

#### **EATING HEALTHY IS EASY & COLORFUL!**

- . Try adding a new fruit or vegetable to your meals each month
- · Pick foods of all different colors for your plate
- . Olive and avocado oils are healthy fats to use instead of animal fats
- · Have fresh fruit easily available for your family instead of candy and pastries
- · Choose whole wheat and whole grains instead of white flour for breads
- · Read package nutrition information and look for products with at least 5 grams of fiber
- · Avoid fad diets that are hard to maintain and tend to promote weight gain after their use

#### HAVE FUN INCREASING YOUR ACTIVITY

- · Pick one or two activities you really enjoy, and can do comfortably
- . If you are getting started with activity, start slow and build up over a few weeks
- . Try to get moderate exercise 30 minutes a day, three or four days a week
- . Brisk walking, dancing, hiking can improve the health of your heart, lungs and circulatory system
- . Make it a family activity! Get the kids out with you to improve their health as well.
- · Gardening is a great strengthening activity for the whole family
- . Try a new activity, like cycling, flying a kite with children, or exploring a new area of the community
- . Be sure to stretch your muscles when you are done with your activity to keep muscles from aching

#### SOCIAL CONNECTION KEEPS YOU HAPPY

- . Stay in touch with family and friends, even if it is on the telephone
- · Plan and enjoy meals with friends and other families
- · Your faith community can be an important social connection
- . Take a class for social connection and testing your brain
- Find group activities you like, such as singing in a choir, joining a walking group or bowling league

#### **TEST YOUR BRAIN**

- · Learn a new subject by reading or watching videos
- · Sing songs from your childhood as well as new ones
- · Try your hand at jigsaw puzzles or word games
- · Tell your children and grandchildren stories about your life experiences
- Take a cooking class

#### KNOW YOUR HEALTH NUMBERS

- . 0 smoking, vaping, or chewing tobacco
- 7 9 hours sleep nightly
- . Know your blood pressure, weight, cholesterol, and blood sugar (A1c) and keep them in check
- . 100% Take all your medications as prescribed











# HEALTHY BRAIN INITIATIVE



# HEALTHY BRAIN INITIATIVE











# MATERNAL AND CHILD HEALTH INDICATORS



## WWW.SDHEALTHSTATISTICS.COM

#### **Start Your Data Journey Here!**

I am looking for.



#### Demographics:

- · Population size
- Race/Ethnicity Languages
- Poverty level and more.



#### Health Data:

- Deaths. Hospitalizations. and ED Discharge data
- Health Briefs
- Motor Vehicle Crashes

#### Regional Data:



#### Regional Health

- Status Reports
- Regional Presentations



#### Reports:

Publications



#### Maps and Spatial Data:

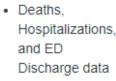
- · Disease Atlases
- Community Features Atlases



#### Measures of Mortality:

- · Leading Causes of Death
- Life Expectancy
- Smoking Attributable Mortality







Motor Vehicle

#### Health Data:

- Hospitalizations,
- · Health Briefs
- Crashes



#### Maternal and Child Health Outcomes

- 2016
- 2017
- 2018
- 2019







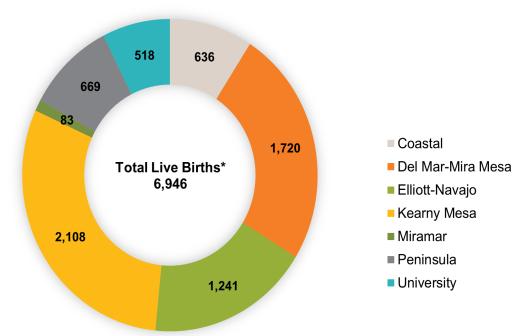
## MATERNAL AND CHILD HEALTH INDICATORS





In 2019, there were <u>6,946 total live births</u> in North Central Region, which represented **18%** of the total live births in San Diego County (38,445).

Distribution of Live Births in North Central Region by Subregional Areas, 2019



\*Subregional areas (SRAs) may not add up to the regional total live births due to allocation. Source: San Diego County Community Profiles, 2019.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services,

Community Health Statistics Unit, 2022.



Geography	Preterm Births	Low Weight Births	Very Low Weight Births	Teen Births
San Diego County	8.68%	6.84%	1.02%	0.54%
North Central Region	7.69%	6.25%	0.94%	0.17%
Coastal	7.26%	5.98%	-	-
Del Mar-Mira Mesa	7.01%	6.45%	1.05%	-
Elliott-Navajo	8.90%	6.61%	0.97%	-
Kearny Mesa	8.47%	5.94%	1.13%	0.31%
Miramar	7.83%	7.62%	-	-
Peninsula	6.84%	6.32%	0.96%	-
University	5.53%	5.24%	-	-

Source: San Diego County Community Profiles, 2019.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services Division, Community Health Statistics Unit, 2022.

Indicates proportion higher than North Central Region

In North Central Region, the proportion of preterm births was highest in Elliott-Navajo SRA (8.9%) in 2019.

The proportion of **low birth weight infants** among all live births within North Central Region was **highest in Miramar SRA** (7.6%) in 2019.

# MATERNAL AND CHILD HEALTH INDICATORS





0

Indicates proportion/rate higher than North Central Region

In 2019, North Central Region had a higher percent of births with early prenatal care compared to the county overall. Among North Central Region SRAs, **Del Mar-Mira Mesa SRA** had the **highest percent of births with early prenatal care** (93.88%).

#### **Early Prenatal Care**

Geography	Early Prenatal Care
San Diego County	88.24%
North Central Region	92.66%
Coastal	92.60%
Del Mar-Mira Mesa	93.88%
Elliott-Navajo	93.43%
Kearny Mesa	91.47%
Miramar	93.28%
Peninsula	91.60%
University	93.26%

Source: San Diego County Community Profiles, 2018, 2019. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2022.



In 2018, **Elliott-Navajo SRA** had the **highest fetal mortality rate** (4.95 per 1,000) among North Central SRAs. In 2019, **Kearny Mesa SRA** had the **highest infant mortality rate** in North Central Region.

#### **Fetal Mortality and Infant Mortality**

Geography	Fetal Mortality Rate per 1,000 (2018)	Infant Mortality Rate per 1,000 (2019)	
San Diego County	3.92	3.67	
North Central Region	2.97	4.03	
Coastal	-	-	
Del Mar-Mira Mesa	2.91	-	
Elliott-Navajo	4.95	5.83	
Kearny Mesa	-	6.54	
Miramar	-	-	
Peninsula	-	-	
University	-	-	



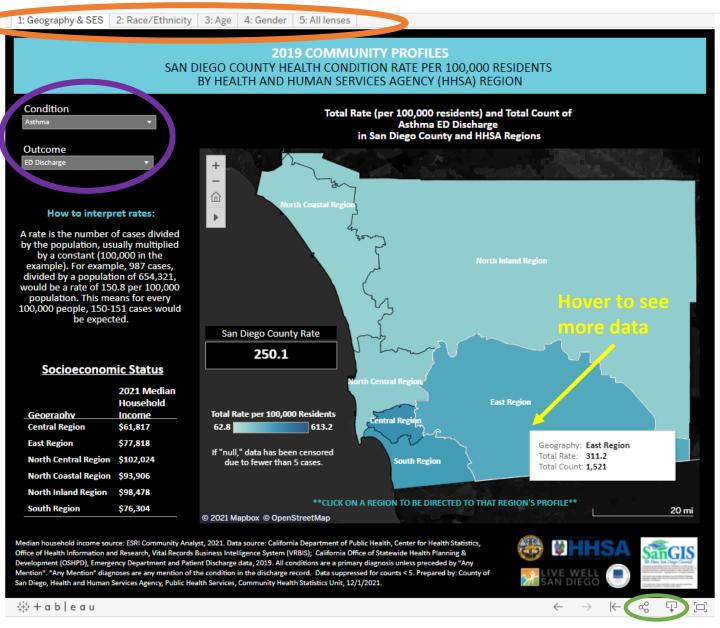
# 2019 COMMUNITY PROFILES IN TABLEAU





#### Navigate to data by various lenses of health equity

Use the drop-down arrows to filter by condition and outcome



1: Geography & SES | 2: Race/Ethnicity | 3: Age | 4: Gender | 5: All lenses

#### **2019 COMMUNITY PROFILES**

#### HEALTH CONDITION RATE PER 100,000 RESIDENTS BY NORTH CENTRAL REGION SUBREGIONAL AREA (SRA)

#### Condition

Motor Vehicle Injuries

#### Outcome

ED Discharge

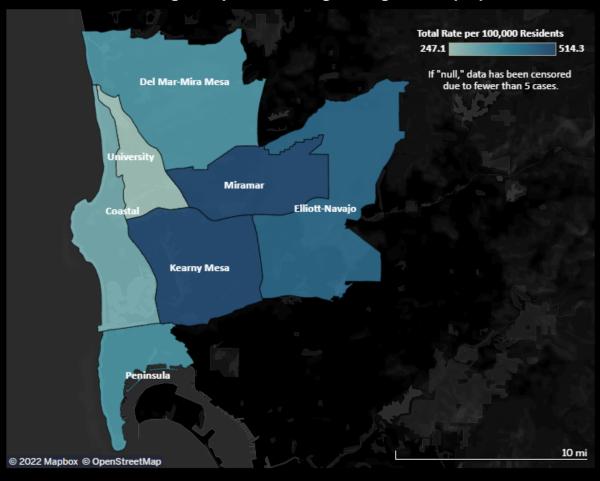
#### How to interpret rates:

A rate is the number of cases divided by the population, usually multiplied by a constant (100,000 in the example). For example, 987 cases, divided by a population of 654,321, would be a rate of 150.8 per 100,000 population. This means for every 100,000 people, 150-151 cases would be expected.

#### Socioeconomic Status

Geography	2021 Median Household Income
Coastal	\$102,298
Del Mar-Mira Mesa	\$131,711
Elliott-Navajo	\$101,561
Kearny Mesa	\$86,637
Miramar	\$49,603
Peninsula	\$93,490
University	\$85,699

Total Rate (per 100,000 residents) and Total Count of Motor Vehicle Injuries ED Discharge in San Diego County North Central Region Subregional Areas (SRA)



Median household income source: ESRI Community Analyst, 2021. Data source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS); California Office of Statewide Health Planning & Development (OSHPD), Emergency Department and Patient Discharge data, 2019. All conditions are a primary diagnosis unless preceded by "Any Mention". "Any Mention" diagnoses are any mention of the condition in the discharge record. Data suppressed for counts < 5. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 12/1/2021.

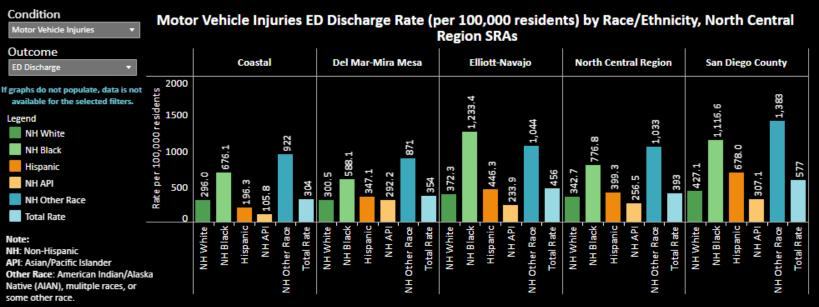


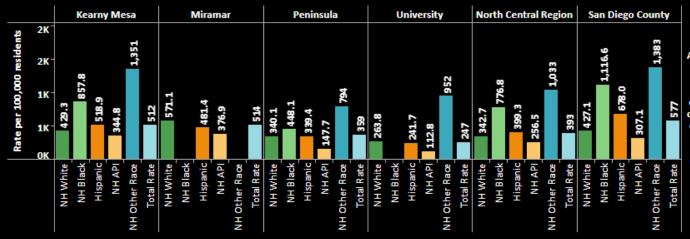






#### HEALTH CONDITION RATE PER 100,000 RESIDENTS BY RACE/ETHNICITY, NORTH CENTRAL SUBREGIONAL AREAS (SRA)





How to interpret rates:
A rate is the number of cases divided by the population, usually multiplied by a constant (100,000 in the example). For example, 987 cases, divided by population of 654,321, would be a rate of 150.8 per 100,000 population. This means for every 100,000 people, 150-151 cases would be expected.

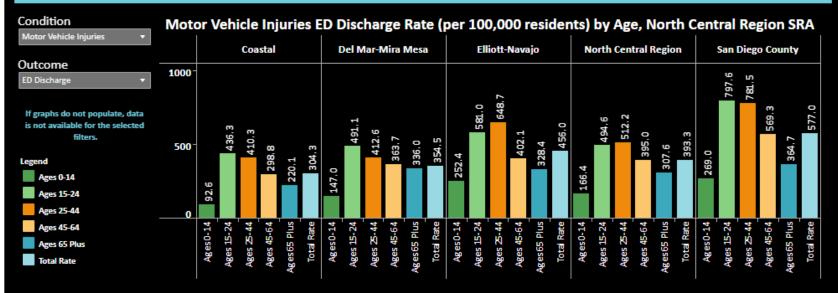
Data source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS);
California Office of Statewide Health Planning & Development (OSHPD), Emergency Department and Patient Discharge data, 2019. All conditions are a primary diagnosis unless preceded by "Any Mention". "Any Mention" diagnoses are any mention of the condition in the discharge record. Data suppressed for counts < 5. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 12/1/2021.

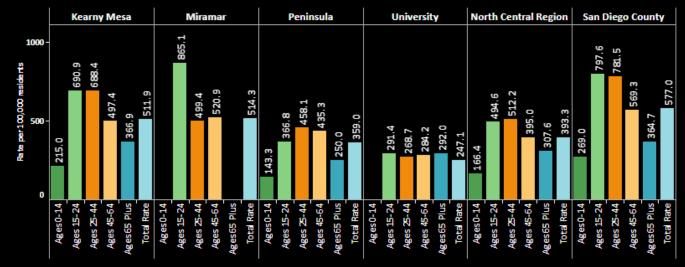






#### HEALTH CONDITION RATE PER 100,000 RESIDENTS BY AGE, NORTH CENTRAL REGION SUBREGIONAL AREAS (SRA)





Data source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS); California Office of Statewide Health Planning & Development (OSHPD), Emergency Department and Patient Discharge data, 2019. All conditions are a primary diagnosis unless preceded by "Any Mention". "Any Mention" diagnoses are any mention of the condition in the discharge record. Data suppressed for counts < 5. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 12/1/2021.

#### How to interpret rates:

A rate is the number of cases divided by the population, usually multiplied by a constant (100,000 in the example). For example, 987 cases, divided by population of 654,321, would be a rate of 150.8 per 100,000 population. This means for every 100,000 people, 150-151 cases would be expected.









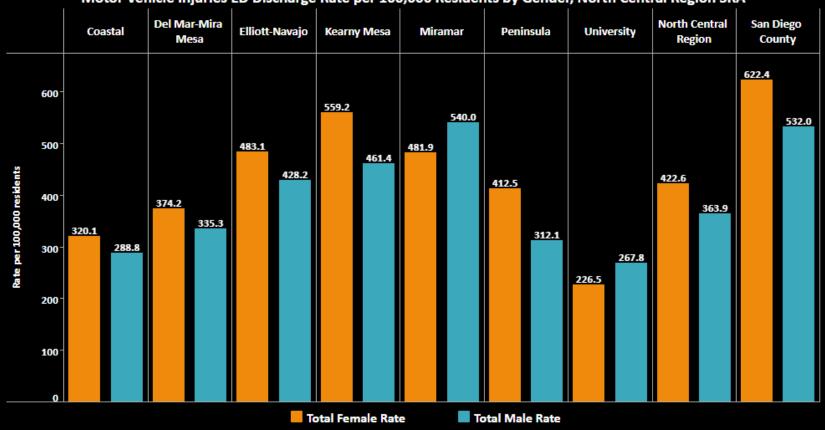


HEALTH CONDITION RATE PER 100,000 RESIDENTS BY GENDER, NORTH CENTRAL REGION SUBREGIONAL AREAS (SRA)



How to interpret a rate: A rate is the number of cases divided by the population, usually multiplied by a constant (100,000 in the following example). For example, 987 cases, divided by population of 654,321, would be a rate of 150.8 per 100,000 population. This means for every 100,000 people, 150-151 cases would be expected.

#### Motor Vehicle Injuries ED Discharge Rate per 100,000 Residents by Gender, North Central Region SRA



Data source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS); California Office of Statewide Health Planning & Development (OSHPD), Emergency Department and Patient Discharge data, 2019. All conditions are a primary diagnosis unless preceded by "Any Mention". "Any Mention" diagnoses are any mention of the condition in the discharge record. Data suppressed for counts < 5. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 12/1/2021.







HEALTH CONDITION RATE PER 100,000 RESIDENTS BY RACE/ETHNICITY, GENDER, SOCIOECONOMIC STATUS, AND AGE BY NORTH CENTRAL REGION SUBREGIONAL AREA (SRA)

#### North Central Region Subregional Area

Kearny Mesa Condition Motor Vehicle Injuries Outcome

ED Discharge

If graphs do not populate, data is not available for the selected filters.

#### Note:

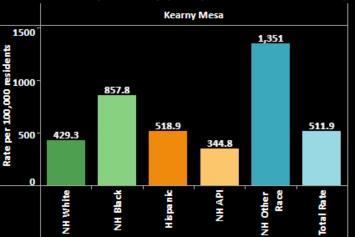
NH: Non-Hispanic API: Asian/Pacific Islander Other Race: American Indian/Alaska Native (AIAN), mulitple races, or some other race

#### How to interpret a rate:

A rate is the number of cases divided by the population, usually multiplied by a constant (100,000 in the following example). For example, 987 cases, divided by population of 654,321, would be a rate of 150.8 per 100,000 population. This means for every 100,000 people, 150-151 cases would be expected.

# **₩HHSA**

#### Race/Ethnicity (rate per 100,000 residents)



#### Gender (rate per 100,000 residents)



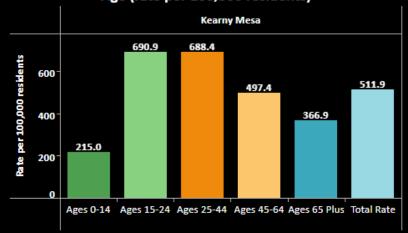
Rate per 100,000 residents

#### Socioeconomic Status

2021 Median Geography Household Income

Kearny Mesa \$86,637

#### Age (rate per 100,000 residents)



Median household income source: ESRI Community Analyst, 2021. Data source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS); California Office of Statewide Health Planning & Development (OSHPD), Emergency Department and Patient Discharge data, 2019. All conditions are a primary diagnosis unless preceded by "Any Mention". "Any Mention" diagnoses are any mention of the condition in the discharge record. Data suppressed for counts < 5. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 12/1/2021.



# HOSPITAL AND EMERGENCY DEPARTMENT DISCHARGE DATA FOR PERSONS EXPERIENCING HOMELESSNESS, 2019





#### 2019 Hospital Discharge Data for Persons Experiencing Homelessness

Number of Individuals Experiencing Homelessness Discharged from the Hospital

4,116

of Hospital Discharges Experiencing Homelessness

Total Number

Average Number of Visits per Person

1.7

6,945

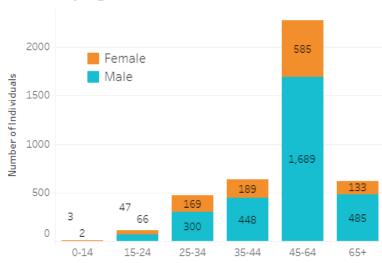
Age Range

Median Age

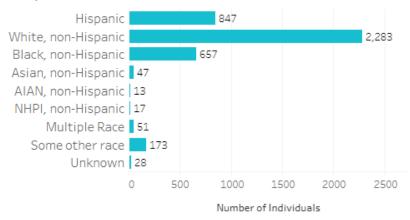
54

0 to 92 years old

#### Gender by Age



#### Race/Ethnicity



#### Preferred Language Spoken



Footnote: Additional discharges of the same individual were removed from the total. All hospitalizations represent acute care facilities only. AIAN: American Indian/Alaska Native. NHPI: Native Hawaiian/Pacific Islander. Source: California Office of Statewide Health Planning & Development (OSHPD), Patient Discharge Data, 2019. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, December 2021.



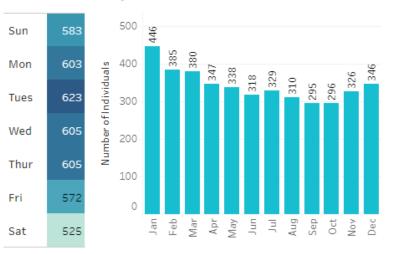






#### 2019 Hospital Discharge Data for Persons Experiencing Homelessness

#### Admittance Day of Week and Month



6 days Average Length of Stay:

#### Top 10 Primary Diagnosis Groups

Septicemia	554
Skin and subcutaneous tissue infections	425
Alcohol-related disorders	249
Heart failure	197
Diabetes mellitus with complication	163
Poisoning by drugs, initial encounter	91
Chronic obstructive pulmonary disease and bronchiectasis	89
Pneumonia (except that caused by tuberculosis)	86
Fracture of the lower limb (except hip), initial encounter	86
Cardiac dysrhythmias	63

#### Top 5 Facility 7 incodes

Zipcou	
92103	1,859
91942	474
92123	417
92120	286
92025	268

#### Top 5 Expected Sources of Payment

Medi-Cal	2,797
Medicare	988
Self-Pay	177
Private Coverage	92
Other Government	54

#### Top 3 Patient Dispositions

Discharged to home or self care (routine discharge)	2,753
Discharged/transferred to a skilled nursing facility (SNF) with Medicare certification in anticipation of skilled care	724
Left against medical advice or discontinued care	247

Footnote: Additional discharges of the same individual were removed from the total. All hospitalizations represent acute care facilities only. Source: California Office of Statewide Health Planning & Development (OSHPD), Patient Discharge Data, 2019. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, December 2021.

















#### 2019 Hospital Discharge Data for Persons Experiencing Homelessness

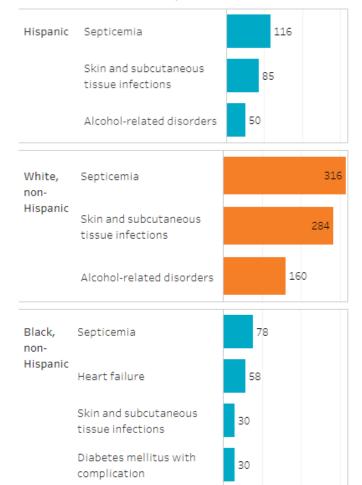
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Septicemia	554
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Diabetes mellitus with complication	163
Poisoning by drugs, initial encounter	91
Chronic obstructive pulmonary disease and bronchiectasis	89
Pneumonia (except that caused by tuberculosis)	86
Fracture of the lower limb (except hip), initial encounter	86
Cardiac dysrhythmias	63

#### Top 10 Primary Diagnosis Groups by Age Group\*\*

	15-24	25-34	35-44	45-64	65+
Septicemia	18	72	95	285	84
Skin and subcutaneous tissue infections	12	68	98	213	34
Alcohol-related disorders		21	44	155	27
Heart failure		5	12	139	40
Diabetes mellitus with complication		14	23	100	22
Poisoning by drugs, initial encounter	5	24	18	36	8
Chronic obstructive pulmonary disease and bronchiectasis				67	18
Pneumonia (except that caused by tuberculosis)			11	47	23
Fracture of the lower limb (except hip), initial encounter		17	13	49	
Cardiac dysrhythmias				38	20

#### Top 3 Primary Diagnosis Groups for 3 Most Common Race/Ethnicities\*



Footnote: Additional discharges of the same individual were removed from the total. All hospitalizations represent acute care facilities only. \*Hispanic, Non-Hispanic White, and Non-Hispanic Black make up 92% of homeless individuals who were discharged from the hospital in 2019. \*\*Counts less than 5 were surpressed. Ages 0-14 had no top 10 diagnosis groups greater than 5. Source: California Office of Statewide Health Planning & Development (OSHPD), Patient Discharge Data, 2019. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, December 2021.









#### 2019 Emergency Department Data for Persons Experiencing Homelessness

Number of Individuals Experiencing Homelessness Discharged from the ED

6,724

47

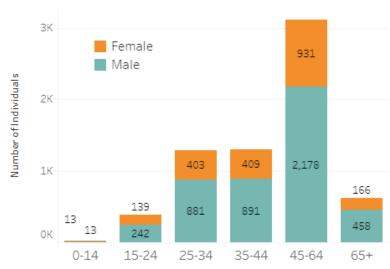
Total Number of ED Discharges Experiencing Homelessness Average Number of Visits per Person

2.4

16,376

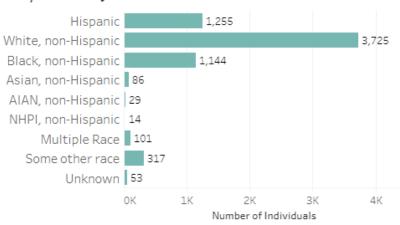
Age Range 0 to 98 years old

#### Gender by Age

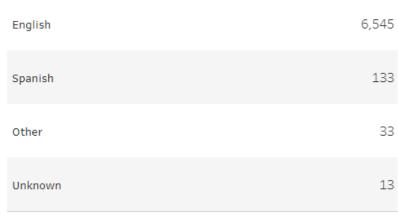


#### Race/Ethnicity

Median Age



#### Preferred Language Spoken



Footnote: Additional discharges of the same individual were removed from the total. AIAN: American Indian/Alaska Native. NHPI: Native Hawaiian/Pacific Islander. Source: California Office of Statewide Health Planning & Development (OSHPD), Emergency Department Discharge Data, 2019. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, December 2021.











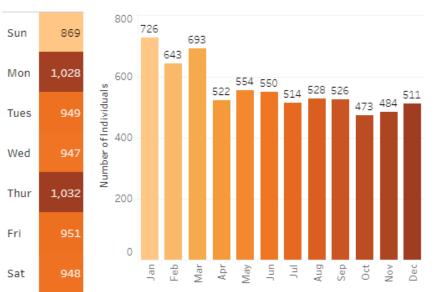






#### 2019 Emergency Department Data for Persons Experiencing Homelessness





#### Top 10 Primary Diagnosis Groups

Skin and subcutaneous tissue infections	461
Schizophrenia spectrum & other psychotic disorders	417
Alcohol-related disorders	394
Suicidal ideation/attempt/intentional self-harm	309
Musculoskeletal pain, not low back pain	301
Superficial injury; contusion, initial encounter	251
Abdominal pain $\&$ other digestive/abdomen signs/symptoms	197
Nonspecific chest pain	191
Depressive disorders	182
Stimulant-related disorders	151

#### Top 5 Facility 7incodos

Zipcod	es
92103	2,957
91942	915
92025	711
92123	579
92120	525

#### Top 5 Expected Sources of Payment

Medicaid (Medi-Cal)	4,421
Medicare Part B	881
Self Pay	710
Health Maintenance Organization (HMO) Medicare Risk	381
Health Maintenance Organization (HMO)	121

#### Top 3 Patient Dispositions

Discharged to home or self care (routine discharge)	6,086
Discharged/Transferred to a psychiatric hospital or psychiatric distinct part/unit of a hospital	222
Left against medical advice or discontinued care	209

Footnote: Additional discharges of the same individual were removed from the total

Source: California Office of Statewide Health Planning & Development (OSHPD), Emergency Department Discharge Data, 2019.















#### 2019 Emergency Department Data for Persons Experiencing Homelessness

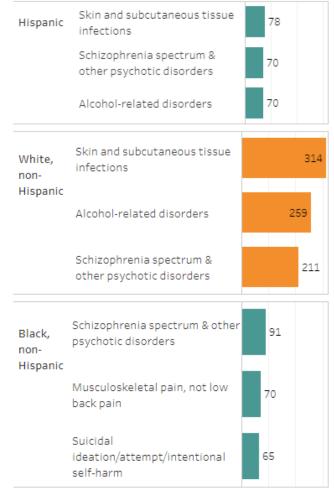
#### Top 10 Primary Diagnosis Groups

Skin and subcutaneous tissue infections	461
Schizophrenia spectrum & other psychotic disorders	417
Alcohol-related disorders	394
Suicidal ideation/attempt/intentional self-harm	309
Musculoskeletal pain, not low back pain	301
Superficial injury; contusion, initial encounter	251
Abdominal pain & other digestive/abdomen signs/symptoms	197
Nonspecific chest pain	191
Depressive disorders	182
Stimulant-related disorders	151

#### Top 10 Primary Diagnosis Groups by Age Group\*\*

	15-24	25-34	35-44	45-64	65+
Skin and subcutaneous tissue infections	22	116	104	192	27
Schizophrenia spectrum & other psychotic disorders	31	101	100	168	17
Alcohol-related disorders	15	54	70	211	44
Suicidal ideation/attempt/intentional self-harm	33	72	62	120	18
Musculoskeletal pain, not low back pain	8	38	48	182	24
Superficial injury; contusion, initial encounter	20	55	49	109	17
Abdominal pain & other digestive/abdomen signs/symptoms	12	34	41	96	14
Nonspecific chest pain		18	24	121	25
Depressive disorders	13	48	45	69	7
Stimulant-related disorders	14	47	37	51	

#### Top 3 Primary Diagnosis Groups for 3 Most Common Race/Ethnicities\*



Footnote: Additional discharges of the same individual were removed from the total. \*Hispanic, Non-Hispanic White, and Non-Hispanic Black make up 91% of homeless individuals who presented to the emergency department (ED) in 2019. \*\*Counts less than 5 were surpressed. Ages 0-14 had no top 10 diagnoses greater than 5. Source: California Office of Statewide Health Planning & Development (OSHPD), Emergency Department Discharge Data, 2019. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, December 2021.



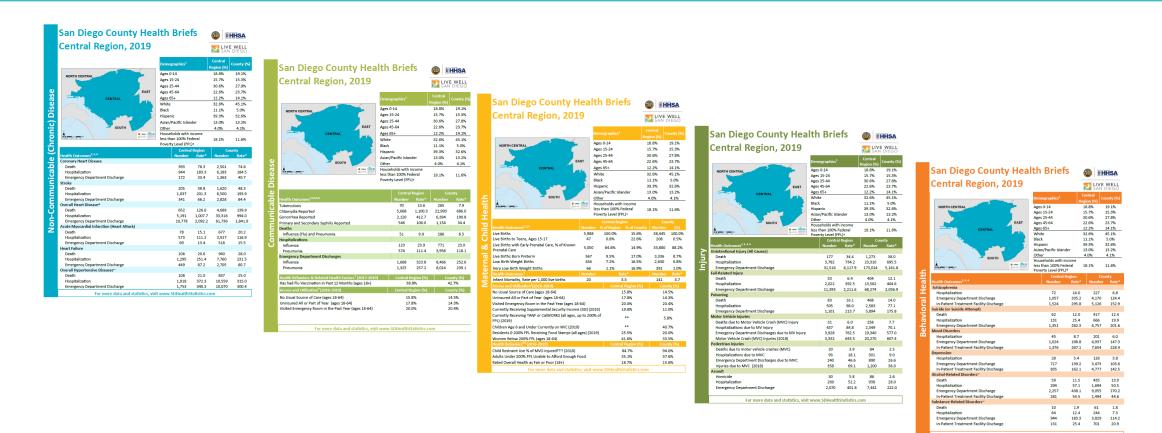






# HEALTH BRIEFS, 2019

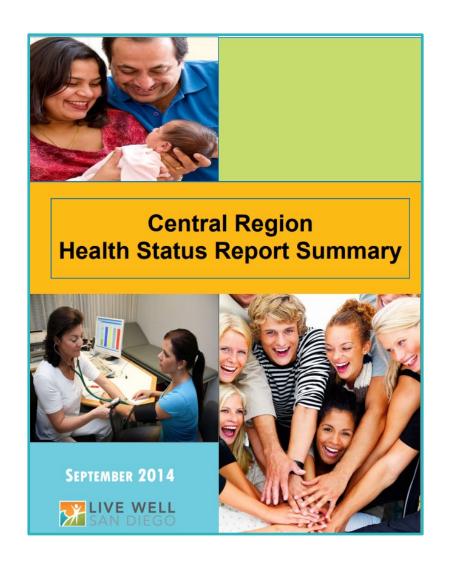




**Health Briefs** are easy-to-read, printable health statistics by Region using data from the Community Profiles and the California Health Interview Survey (CHIS). Each health brief is divided into non-communicable disease, communicable disease, ADRD, maternal & child health, injury, and behavioral health data.

# COMING SOON: REGIONAL HEALTH SUMMARIES, 2019





**Regional Health Summaries** are a compilation of information made available to the public health community and public policy-makers to better understand and manage the health and well-being of the resident of our county.

The purpose of this report is to provide detailed information about the health and characteristics of people in San Diego County.

It is designed to help the Health and Human Services Agency (HHSA) staff in each of the Health Service Area Regions (HHSA Regions) identify problems and priority needs within their communities.



# HEALTH EQUITY DASHBOARD SERIES

# RACIAL EQUITY DASHBOARDS





# HEALTH EQUITY DASHBOARD SERIES

#### **Racial Equity Dashboards**

These interactive Tableau dashboards help to visualize the demographic data, social determinants of health, and health outcomes disaggregated..

Please click the dashboard buttons below to navigate. Click the home button on any dashboard to return to this page.

#### **Demographic Data**

#### **Demographics Dashboard-1**

 Population distribution by age, gender, geography, and race/ethnicity.

#### Demographics Dashboard-2

 Population distribution by age, gender, geography, and race/ethnicity. Representated as population pyramids.

#### **Demographics Dashboard-3**

 Marital status by geography, race and ethnicity.

#### Social Determinants of Health by Race and Ethnicity

#### Health Dashboard-1

#### Knowledge Dashboard-1

#### Standard of Living Dashboard-1

#### Community Dashboard-1

#### **Social Dashboard**

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- Disability
- School enrollment
- Educational attainment
- Field of bachelor's degree
- Household Income
- Employment status
  - · Poverty status
- Upward economic mobility
- Supplemental Nutrition Assistance Program (SNAP)
- · Means of commute
  - Tenure
- · Voter engagement
- Psychological distress
- Incarceration rate by family income
- Students: Alcohol, cigarette, e-cigarette, ...

#### Social Determinants of Health by Race/Ethnicity

#### Health Dashboard-2

- Life Expectancy
- · Usual source of care
- · Finding primary care
- · Unfair treatment while getting m..

#### Knowledge Dashboard-2

- · Early childhood education
  - Dropout rate

#### Standard of Living Dashboard-2

- Food insecurity
- Families using CalFresh
- Forgone medical care
- Problems paying medical bills

#### Community Dashboard-2

- · Neighborhood safety
- · Home loan mortgage denials
- Home purchase loan denials
  - · Subsidized housing

#### **Health Outcomes by Race/Ethnicity**

Health Outcomes Dashboard

Race and Ethnicity Dashboards: Data are presented with an overall Hispanic category, and then under separate race categories. There is overlap between the Hispanic category and the race categories – that is, an individual who identifies as Hispanic will be counted in the Hispanic category and counted again under the race category that they also identified. Race/Ethnicity Dashboards: Data are presented as Hispanic (of any race) and non-Hispanic race. Individuals included in the Hispanic category may be of any race. Individuals in non-Hispanic race categories do not identify as Hispanic. See the Racial Equity: Framework and Outcomes Brief on www.SDHealthStatistics.com for detailed information.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, December 2021.







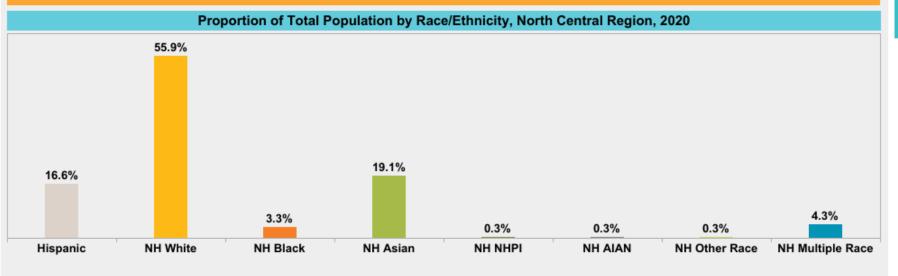


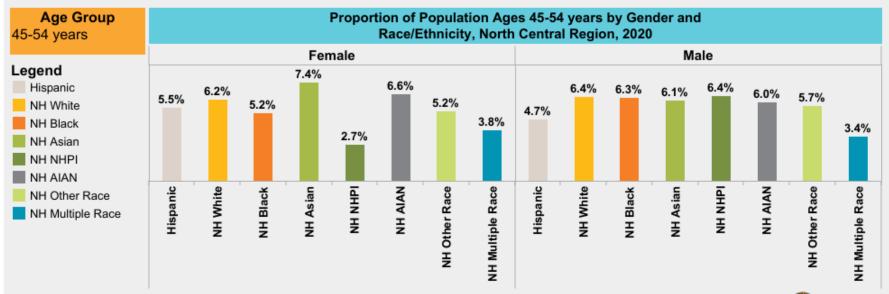
#### DEMOGRAPHIC INDICATORS - POPULATION DISTRIBUTION BY RACE/ETHNICITY, 2020



North Central Region







Note: NH indicates Non-Hispanic. NHPI: Native Hawaiian/Pacific Islander, AIAN: American Indian/Alaska Native. If blank, data is statistically unstable or unavailable.

Sources: SANDAG, 2020 Current Population Estimates (Data extracted on: 08/11/2021). Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, December 2021.







**#HHSA** 

#### 

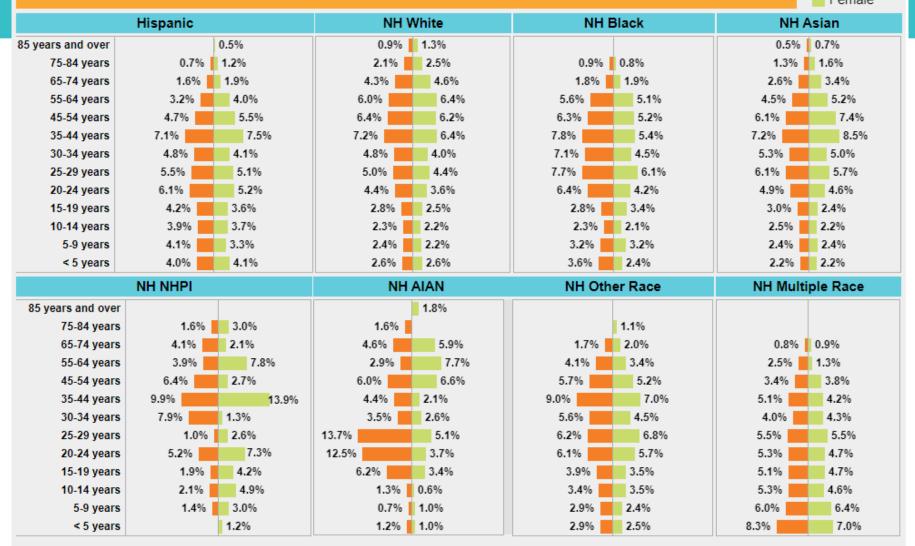
#### POPULATION DISTRIBUTION BY AGE, GENDER, AND RACE/ETHNICITY, 2020

Geography

North Central Region

Legend
Male
Female

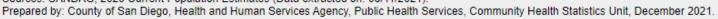




Note: NH indicates Non-Hispanic. NHPI: Native Hawaiian/Pacific Islander, AIAN: American Indian/Alaska Native.

If blank, data is statistically unstable or unavailable.

Sources: SANDAG, 2020 Current Population Estimates (Data extracted on: 08/11/2021).







North Central Region

#### **DEMOGRAPHIC INDICATORS - MARITAL STATUS BY RACE AND ETHNICITY, 2019**

Geography

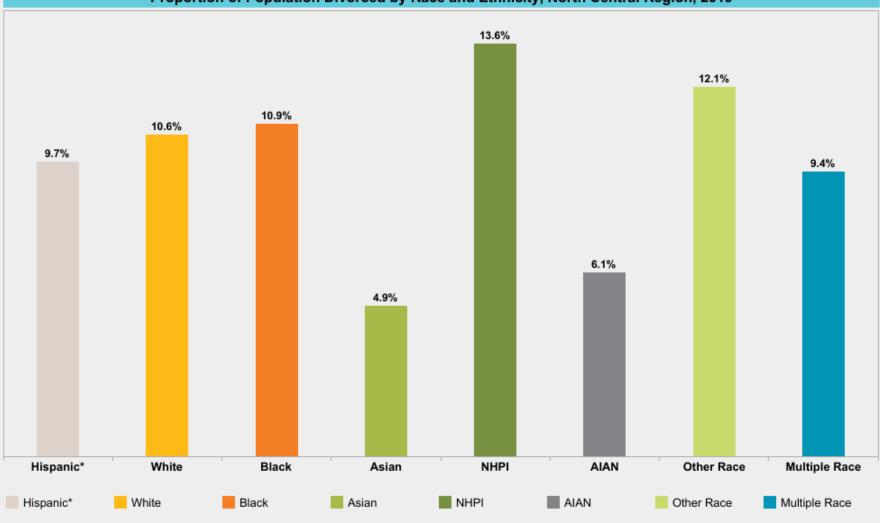
Divorced

Marital Status

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#### Proportion of Population Divorced by Race and Ethnicity, North Central Region, 2019



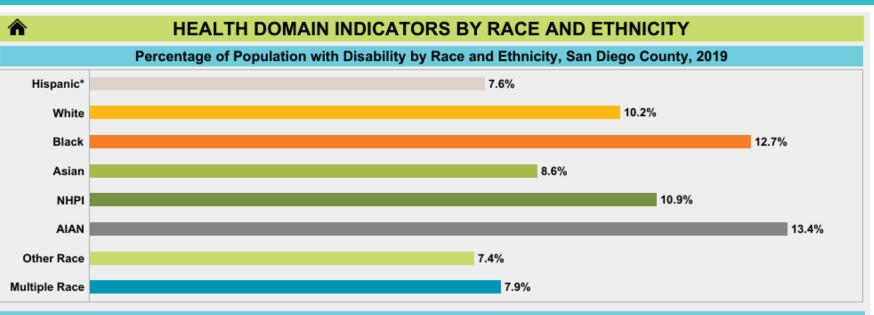
NHPI: Native Hawaiian/Pacific Islander, AIAN: American Indian/Alaska Native.

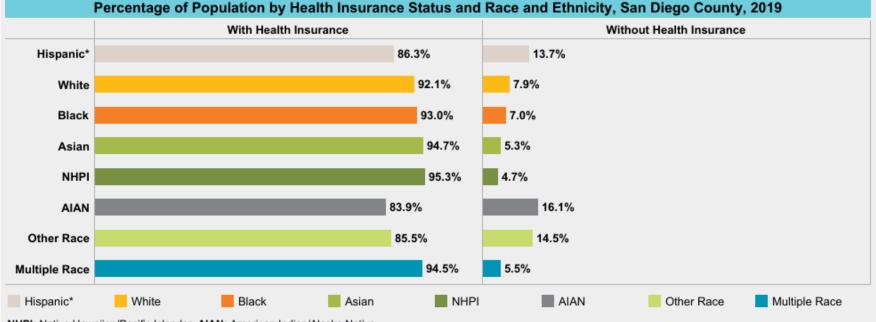
\*Data by race and ethnicity includes possible overlap between racial and ethnic groups, as Hispanic includes population of Hispanic/Latino origin of all races and each racial group includes population of all ethnicites.

If blank, data is statistically unstable or unavailable.

Sources: U.S. Census Bureau; 2015-2019 American Community Survey 5-Year Estimates, Table S1201.







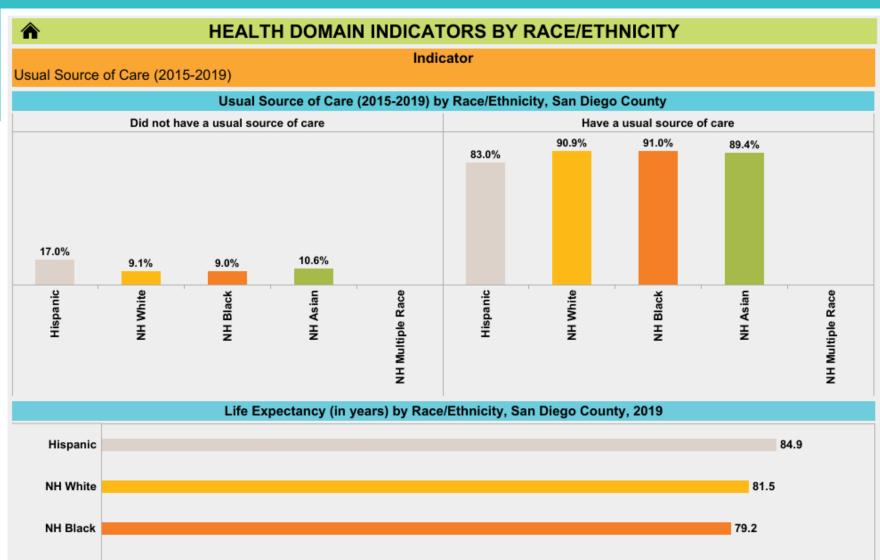
NHPI: Native Hawaiian/Pacific Islander, AIAN: American Indian/Alaska Native.

If blank, data is statistically unstable or unavailable.

Sources: U.S. Census Bureau; 2015-2019 American Community Survey 5-Year Estimates, Tables S1810; C27001A-G,I.



<sup>\*</sup>Data by race and ethnicity includes possible overlap between racial and ethnic groups, as Hispanic includes population of Hispanic/Latino origin of all races and each racial group includes population of all ethnicites.



Note: **NH** indicates Non-Hispanic. **AIAN:** American Indian/Alaska Native. If blank, data is statistically unstable or unavailable.

Hispanic

NH Asian

Sources: Provider Availability: UCLA Center for Health Policy Research, Los Angeles, CA. AskCHIS 2015-2019. Quality of Care: UCLA Center for Health Policy Research, Los Angeles, CA. AskCHIS 2015-2017. Available at <a href="http://ask.chis.ucla.edu">http://ask.chis.ucla.edu</a> Life Expectancy: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS). SANDAG January 1 Population Estimates, 2019. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, December 2021.

NH Black

NH Asian

NH White



89.0

NH Multiple Race



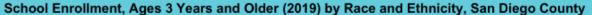


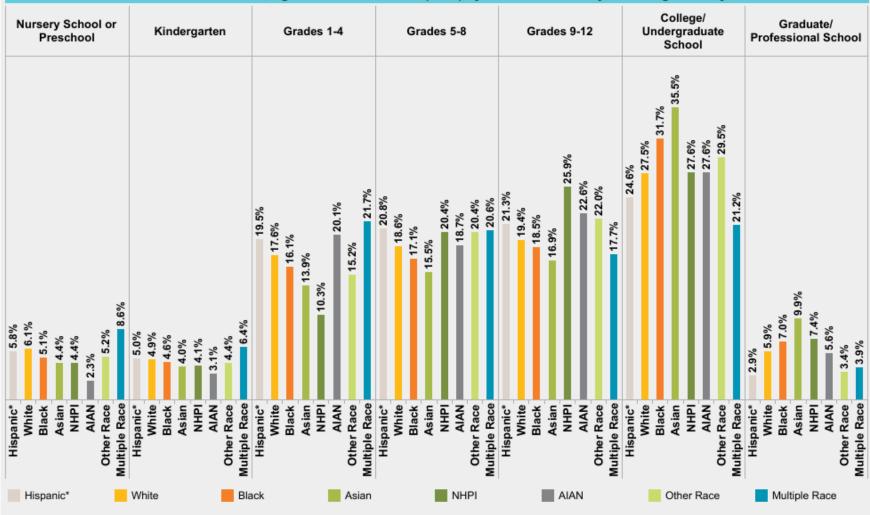
#### KNOWLEDGE DOMAIN INDICATORS BY RACE AND ETHNICITY

#### Indicator

School Enrollment, Ages 3 Years and Older (2019)

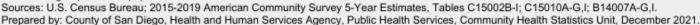
#### ndicator





NHPI: Native Hawaiian/Pacific Islander, AIAN: American Indian/Alaska Native.

<sup>\*</sup>Data by race and ethnicity includes possible overlap between racial and ethnic groups, as Hispanic includes population of Hispanic/Latino origin of all races and each racial group includes population of all ethnicites.







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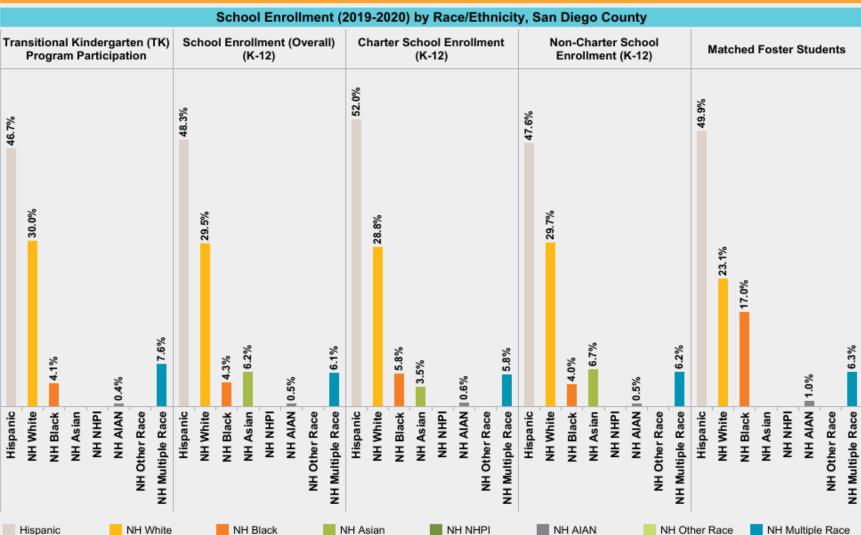


#### KNOWLEDGE DOMAIN INDICATORS BY RACE/ETHNICITY

Indicator

School Enrollment (2019-2020)

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Note: NH indicates Non-Hispanic. NHPI: Native Hawaiian/Pacific Islander, AIAN: American Indian/Alaska Native. If blank, data is statistically unstable or unavailable.

Sources: Early childhood education: California Dept. of Education (2019-2020). Dropout percentage: California Dept. of Education (2015-2017). Student reported truancy: WestEd, California Healthy Kids Survey (CHKS) and Biennial State CHKS. California Dept. of Education (Mar. 2019). Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, December 2021.



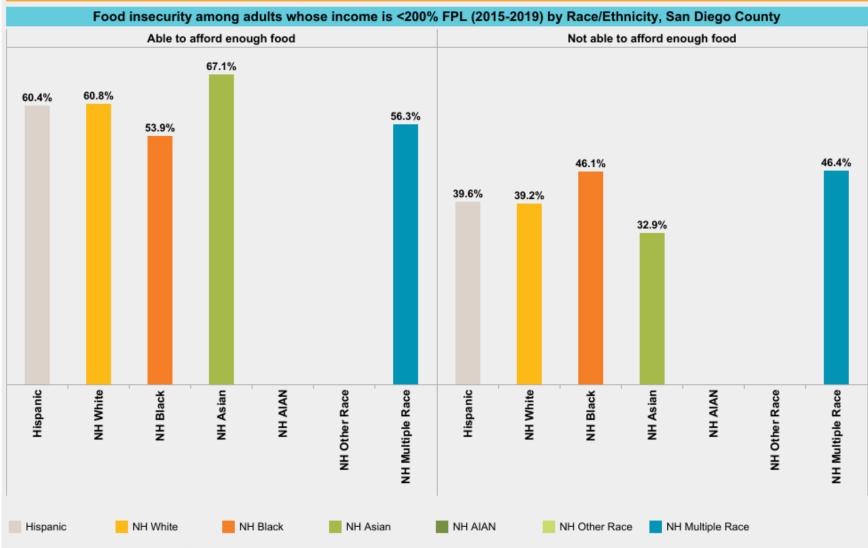


#### STANDARD OF LIVING DOMAIN INDICATORS BY RACE/ETHNICITY

#### Indicator

Food insecurity among adults whose income is <200% FPL (2015-2019)





Note: NH indicates Non-Hispanic. AIAN: American Indian/Alaska Native.

If blank, data is statistically unstable or unavailable.

Sources: Food insecurity, Forgone needed medical care: UCLA Center for Health Policy Research, Los Angeles, CA. AskCHIS 2015-2019. Medical Bills: UCLA Center for Health Policy Research, Los Angeles, CA. AskCHIS 2017-2019. Available at <a href="http://ask.chis.ucla.edu">http://ask.chis.ucla.edu</a> Families using CalFresh: As cited on kidsdata.org, California Dept. of Social Services, CalFresh Data Tables (Oct. 2018).







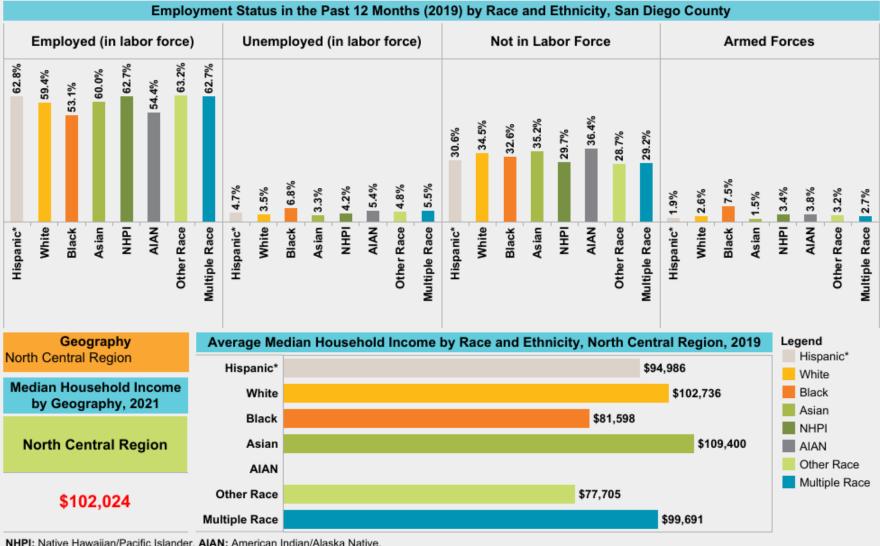


#### STANDARD OF LIVING DOMAIN INDICATORS BY RACE AND ETHNICITY

#### Indicator

Employment Status in the Past 12 Months (2019)

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NHPI: Native Hawaiian/Pacific Islander, AIAN: American Indian/Alaska Native.

If blank, data is statistically unstable or unavailable.

\*Data by race and ethnicity includes possible overlap between racial and ethnic groups, as Hispanic includes population of Hispanic/Latino origin of all races and each racial group includes population of all ethnicites.

Sources: U.S. Census Bureau; 2015-2019 American Community Survey 5-Year Estimates, Tables C23002A-G,I; B17001A-G,I; B19001A-G,I; S1903; B22005A-G,I. Median household income source: ESRI Community Analyst, 2021. Upward economic mobility: Census, Opportunity Insights, Policy Map, 2018. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, December 2021.



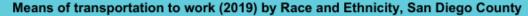


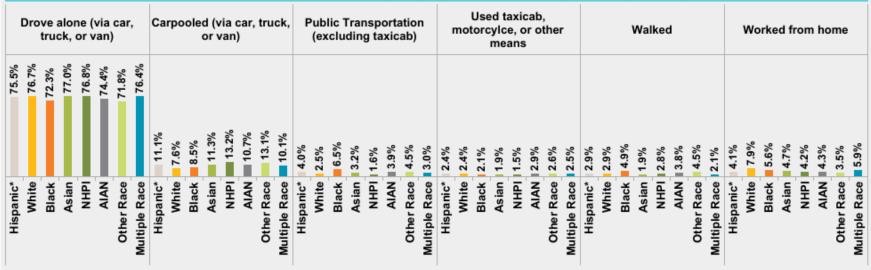
#### COMMUNITY DOMAIN INDICATORS RACE AND ETHNICITY

#### Indicator

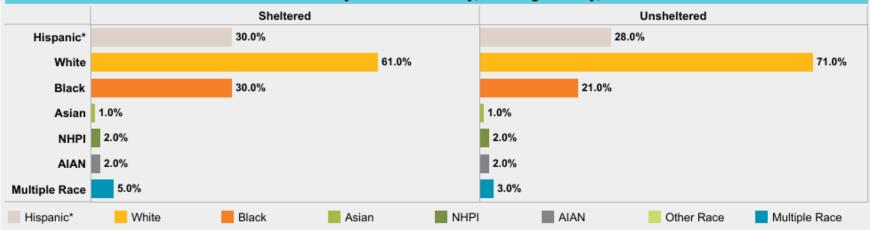
Means of transportation to work (2019)







#### Homelessness by Race and Ethnicity, San Diego County, 2020



NHPI: Native Hawaiian/Pacific Islander, AIAN: American Indian/Alaska Native. If blank, data is statistically unstable or unavailable.

Sources: U.S. Census Bureau; 2015-2019 American Community Survey 5-Year Estimates, Tables B25003A-G,I; B08105A-G,I. Homelessness: 2020 Weallcount Report, San Diego Regional Task Force on the Homeless.





<sup>\*</sup>Data by race and ethnicity includes possible overlap between racial and ethnic groups, as Hispanic includes population of Hispanic/Latino origin of all races and each racial group includes population of all ethnicites.

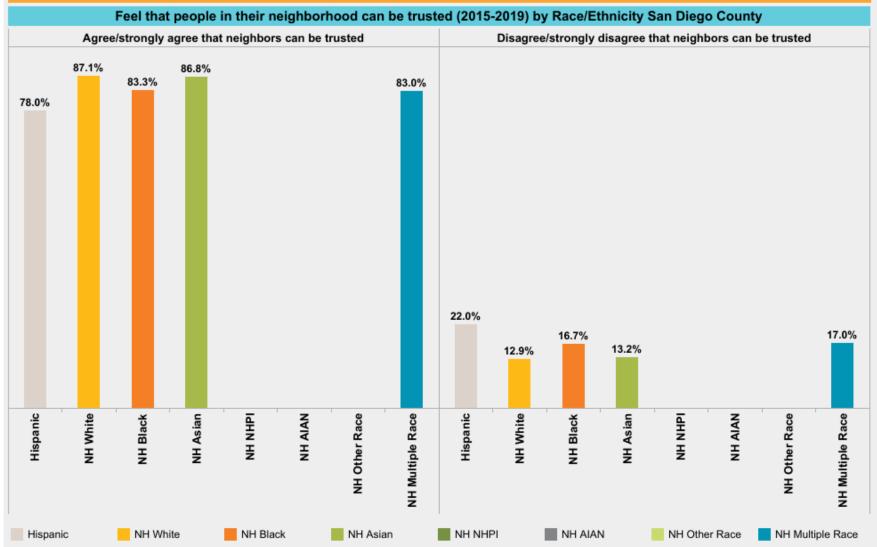
#### 

#### COMMUNITY DOMAIN INDICATORS BY RACE/ETHNICITY

#### Indicator

Feel that people in their neighborhood can be trusted (2015-2019)





Note: **NH** indicates Non-Hispanic. **NHPI:** Native Hawaiian/Pacific Islander, **AIAN:** American Indian/Alaska Native. If blank, data is statistically unstable or unavailable.

Sources: Neighborhood Safety: UCLA Center for Health Policy Research, Los Angeles, CA. AskCHIS 2015-2019. Available at <a href="http://ask.chis.ucla.edu">http://ask.chis.ucla.edu</a> Housing: Census, Opportunity Insights, Policy Map, 2018.



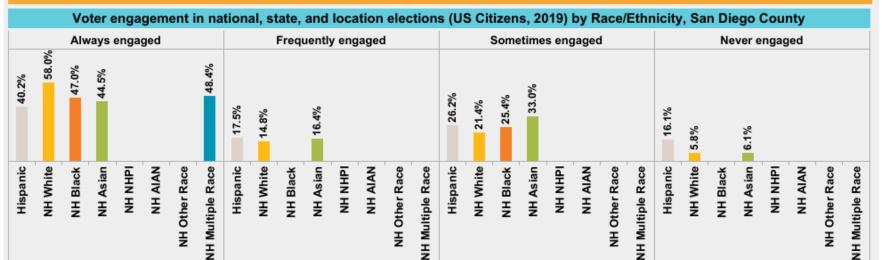


#### SOCIAL DOMAIN INDICATORS BY RACE/ETHNICITY

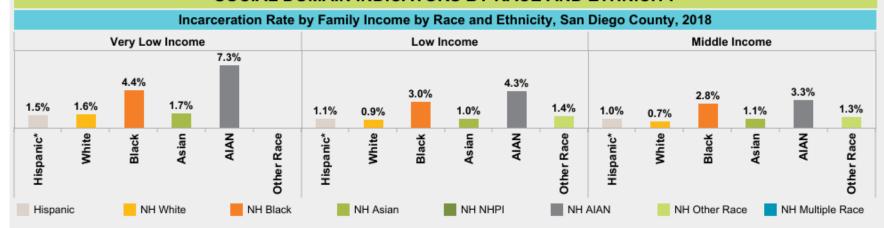
#### Indicator

Voter engagement in national, state, and location elections (US Citizens, 2019)

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#### SOCIAL DOMAIN INDICATORS BY RACE AND ETHNICITY



Note: **NH** indicates Non-Hispanic. **NHPI:** Native Hawaiian/Pacific Islander, **AIAN:** American Indian/Alaska Native. If blank, data is statistically unstable or unavailable.

Sources: WestEd, California Healthy Kids Survey (CHKS) and Biennial State CHKS. California Dept. of Education. Community engagement and involvement: UCLA Center for Health Policy Research, Los Angeles, CA. AskCHIS. Available at <a href="http://ask.chis.ucla.edu">http://ask.chis.ucla.edu</a> Incarceration Rate: Census, Opportunity Insights, Policy Map, 2018.



<sup>\*</sup>Data by race and ethnicity includes possible overlap between racial and ethnic groups, as Hispanic includes population of Hispanic/Latino origin of all races and each racial group includes population of all ethnicites.

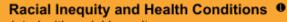


#### **HEALTH OUTCOMES BY RACE/ETHNICITY IN SAN DIEGO COUNTY, 2019**

Subregional Area (SRA)
Coastal

Outcome Hospitalization Total Rate (per 100,000 residents) of Hospitalization due to Heart Failure, Coastal SRA, 2019

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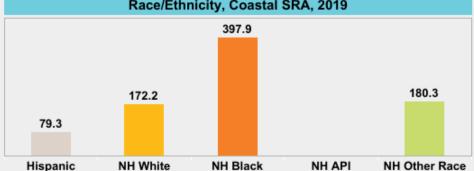


Conditions associated with racial inequity

**Choose Health Condition of Interest** 

**Heart Failure** 

Heart Failure Hospitalization Rate (per 100,000 residents) by Race/Ethnicity, Coastal SRA, 2019



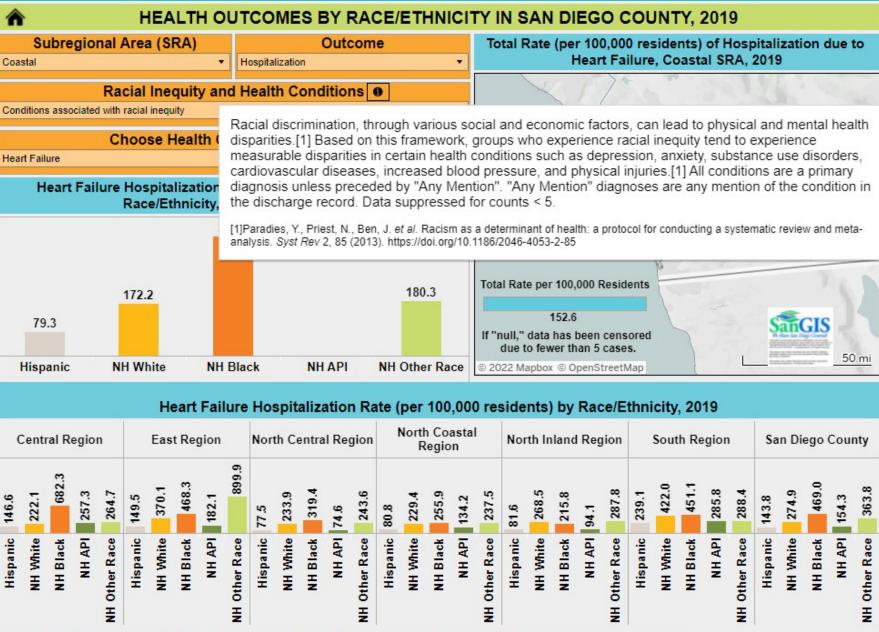


## Heart Failure Hospitalization Rate (per 100,000 residents) by Race/Ethnicity, 2019

Ī	С	entra	al R	egior	n	East Region						th C	entra	ıl Re	gion	Nor	th C	oasta	al Re	gion	No	rth Ir	land	Reg	ion		Sout	th Re	gion		Sa	n Die	ego (	Coun	ty
	140.0	222.1	682.3	257.3	264.7	149.5	370.1	468.3	182.1	899.9	77.5	233.9	319.4	74.6	243.6	80.8	229.4	255.9	134.2	237.5	81.6	268.5	215.8	94.1	287.8	239.1	422.0	451.1	285.8	288.4	143.8	274.9	469.0	154.3	363.8
	Hispanic	NH White	NH Black	NH API	NH Other Race	Hispanic	NH White	NH Black	NH API	NH Other Race	Hispanic	NH White	NH Black	NH API	NH Other Race	Hispanic	NH White	NH Black	NH API	NH Other Race	Hispanic	NH White	NH Black	NH API	NH Other Race	Hispanic	NH White	NH Black	NH API	NH Other Race	Hispanic	NH White	NH Black	NH API	NH Other Race

NH indicates Non-Hispanic. API: Asian/Pacific Islander; Other Race: American Indian/Alaska Native (AIAN), mulitple races, or some other race. Source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS); California Office of Statewide Health Planning & Development (OSHPD), Emergency Department and Patient Discharge data, 2019. All conditions are a primary diagnosis unless preceded by "Any Mention". "Any Mention" diagnoses are any mention of the condition in the discharge record. Data suppressed for counts < 5.





NH indicates Non-Hispanic. API: Asian/Pacific Islander; Other Race: American Indian/Alaska Native (AIAN), mulitple races, or some other race.

Source: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS); California Office of Statewide Health Planning & Development (OSHPD), Emergency Department and Patient Discharge data, 2019. All conditions are a primary diagnosis unless preceded by "Any Mention". "Any Mention" diagnoses are any mention of the condition in the discharge record. Data suppressed for counts < 5.



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# WE NEED YOUR VOICE!



# PLEASE TELL US YOUR EXPERIENCES, YOUR STORIES, YOUR REALITIES SO WE CAN MAKE MEANINGFUL CHANGE TOGETHER.

- There is a renewed emphasis at all aspects of county government on the demographic, economic and social factors that impact our diverse populations.
- I can tell you what I know from our databases, but that is only part of the story. We need to hear from you.
- Please go to <a href="https://www.surveymonkey.com/r/B33YRJW">https://www.surveymonkey.com/r/B33YRJW</a> to complete the survey. It should take only 10 minutes of your time. Your responses are important to help guide our future efforts. Please feel free to voice the issues we missed in the text boxes.
- If you have questions or concerns or if you want us to look for data on a specific issue, feel free to email us!
  - Leslie.Ray@sdcounty.ca.gov
  - Maria.Pena@sdcounty.ca.gov
  - phs.chsu.hhsa@sdcounty.ca.gov

# **Questions?**



For more information, including data, resources and reports, from Public Health Services:

www.SDHealthStatistics.com

Contact Information:
Leslie Ray, MPH, MPPA, MA
Leslie.Ray@sdcounty.ca.gov





Live Well San Diego focuses on creating an environment that encourages all San Diego County residents to live healthy, safe, and thriving lives.



