



Exploring Health Disparities in San Diego County Residents by Socioeconomic Status

A Report to Identify Opportunities to Achieve Health Equity in San Diego County



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EXECUTIVE SUMMARY

HEALTH DISPARITIES BY SOCIOECONOMIC STATUS



Exploring Health Disparities in San Diego County Residents by Socioeconomic Status (SES)

Demographics

In 2022, a quarter of San Diego County residents lived in the moderately low (25.2%) socioeconomic (SES) communities, followed by moderately high (20.4%), low (17.9%), highest (15.2%), high (12.8%), and the lowest (7.2%) SES communities. Compared to those living in other SES communities, residents in the lowest SES communities had the highest proportion of those ages 15-24 old (17.2%) years old, the low SES communities had the highest proportion of those ages 5-14 (13.5%) years old, the moderately low SES communities had the highest proportion of those ages 0-4 (6.0%) and ages 25-44 (32.7%) years old, and those in the highest SES communities had the highest proportion of those 45-64 (27.7%) and 65 years and older (16.5%) in 2022.

Compared to those living in other SES communities, the lowest SES communities had the highest proportion of non-Hispanic (NH) Black (8.4%) residents, the low SES communities had the highest proportion of Hispanic (54.6%) residents, the moderately low SES communities had the highest proportion of NH Other (0.5%) residents, the moderately high SES communities had the highest proportion of NH White (56.8%) and NH American Indian/Alaska Native (AIAN) (0.4%) residents, and the highest SES communities had the highest proportion of NH Asian/Pacific Islander (API) (26.2%) and NH two or more races (5.9%).

Among the SES communities, the lowest SES communities had the highest proportion of adults 25 years or older without a high school diploma (20.8%), while those in the highest SES communities had the highest proportion of those with a bachelor’s degree or higher (63.5%). Residents in the low SES communities had the highest 5-year average unemployment rate (8.7%) between 2018-2022 followed by residents living in the lowest SES communities (7.7%) compared to those living in other SES community groups.

In 2022, residents in the low SES communities had the highest percent of households receiving food stamps/SNAP (16.2%), followed by residents in the lowest SES communities (15.7%) compared to those living in other SES communities. Additionally, compared to those living in other SES communities, those in the lowest SES communities had the highest proportion of population with no health insurance (11.6%), followed by residents in the low (9.5%) and moderately low (9.5%) SES communities.

Health Outcomes

In 2022, compared to those in other SES communities, those living in the lowest and low SES communities generally had a higher burden of morbidity and mortality due to non-communicable (chronic) and communicable diseases, injuries, and behavioral health conditions. Residents in the lowest SES communities had the highest ED discharge rates due to urinary tract infection, motor vehicle injuries, alcohol-related disorders, and anxiety and fear related disorders, the highest hospitalization rates due to diabetes, overall heart disease, overall hypertensive diseases, falls and motor vehicle injuries, and the highest incidence rates due to chlamydia, gonorrhea, and syphilis compared to those in other SES communities. Those in the lowest SES communities had poor maternal and child health outcomes with the lowest percentage of mothers receiving early prenatal care, and the highest percentage of preterm births and newborns with a low birth weight compared to those in other SES communities.

Residents in the low SES communities had the highest ED discharge rates due to asthma, overall heart disease, overall hypertensive diseases, assault, falls, flu, pneumonia, suicide ideation/attempt/intentional self-harm, the highest hospitalization rates due to overall cancer, pneumonia, urinary tract infection, poisoning, alcohol related disorders, suicide ideation/attempt/intentional self-harm, and the highest death rates due to overall heart disease and motor vehicle injuries compared to those living in other SES communities.

Additionally, residents in the moderately low SES communities had the highest ED discharge rate due to Alzheimer’s and Related Dementia

(ADRD), the highest hospitalization rates due to schizophrenia and substance use/abuse/dependency, and the highest death rates due to overall cancer, falls, poisoning, traumatic brain injury, all opioid overdoses, and suicide. While residents in the moderately high SES communities had the highest death rate due to alcohol related disorders, residents in the high SES communities had the highest hospitalization rate due to hip fractures and the highest death rate due ADRD and Parkinson’s disease compared to those in other SES communities. Moreover, the highest SES communities had the highest hospitalization rate due to ADRD compared to residents in other SES communities in 2022.

Introduction

Health Equity is achieved when everyone has the opportunity to reach their highest health potential, no matter their demographic, social, economic, or environmental conditions.¹

Measuring Health Disparities

The health of a community is not simply the presence or absence of disease; rather, it is an interaction of several factors. **Social determinants of health (SDOH)** are circumstances in which people are born, grow, live, work, and age such as income, education, employment status, housing, access to health care services, and exposure to pollution.² Social determinants of health influence a person’s ability to achieve health equity.³

- **Health disparities** are differences in health outcomes between groups such as age, gender, place of residence, race/ethnicity, and socioeconomic status.⁴
- **Health inequities** are health disparities that may result from systematic or unequal distribution of positive resources.⁵

In order to describe health disparities in San Diego County, a variety of measures are used, considered together as lifestyle behaviors, socioeconomic status, healthcare access and utilization, and morbidity and mortality.

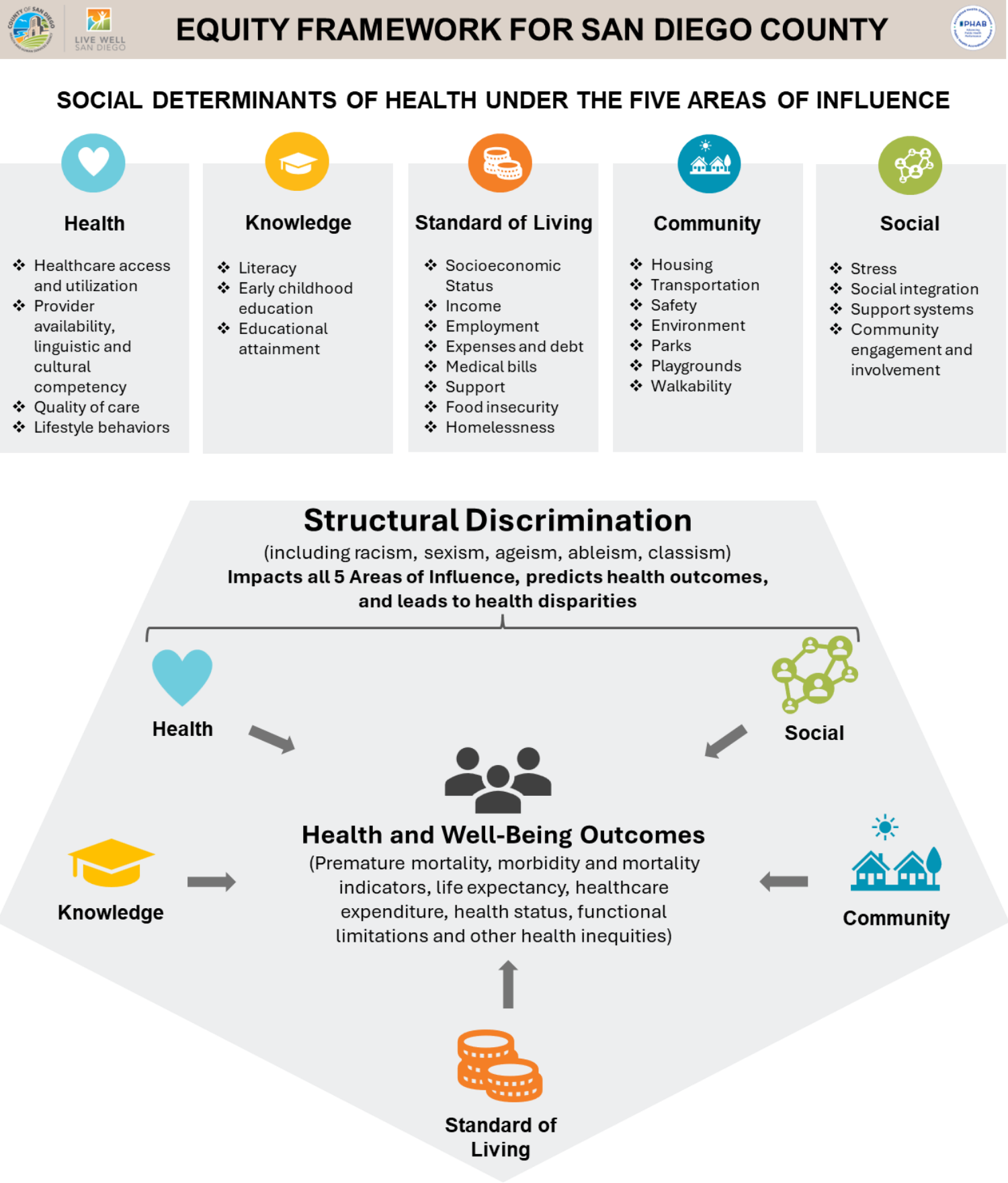
- **Lifestyle behaviors** are actions taken by individuals to attain or maintain good health and to prevent illness and injury.^{6,7} Lifestyle behaviors are often the result of socioeconomic status, as well as healthcare access and utilization, and in turn, have an impact on morbidity and mortality.^{6,8,9}
- **Socioeconomic status**, including the circumstances in which one lives and works, greatly affects health. Low socioeconomic status is related to poor health outcomes and can be measured by median family or household income, percent of households living below the Federal Poverty Level, unemployment rates, availability of transportation, educational attainment, and linguistic barriers.^{10,11} The association between these factors is cumulative and influences the health status of an individual over a lifetime.^{12,13}

- **Healthcare service access and utilization** are closely aligned with socioeconomic status and are major factors in individual and community health.¹⁴ Lack of health insurance is also associated with reduced access to preventive care services, increasing poor health outcomes, particularly among young adults and racial/ethnic minorities.^{14, 15}
- **Morbidity and Mortality Indicators:** Rates of death and medical encounter can be measured and used to describe the impact of non-communicable (chronic) disease, communicable disease, maternal and child health, injury, and behavioral health conditions on the community. By using morbidity and mortality indicators to identify health disparities, efforts can be made to address the underlying factors contributing to these differences in health outcomes.

Live Well San Diego and Health Equity

Health equity is a key component of the *Live Well San Diego* vision, as well as a longstanding practice in Public Health Services (PHS). The Equity Framework for San Diego County includes the five Areas of Influence of the *Live Well San Diego* framework but is expanded by including additional measures of social determinants of health (SDOH), such as income, housing status, and access to healthcare. The equity framework acknowledges that SDOH may impact aspects of a person’s life and often lead to disparities in health and well-being outcomes, irrespective of biological or genetic factors. With the goal of equity in mind, disparities in systems and health and well-being outcomes may be identified and become more balanced.

The Equity Framework aims to better understand systemic inequities with the purpose of providing data for SDOH and related health and behavioral indicators. When SDOH are examined by lenses of health equity, such as by race/ethnicity, disparities become apparent. This framework can also be applied to other vulnerable populations, such as those with disabilities, the young and the elderly, and those of low socioeconomic status. The inclusion of more measures in the Equity Framework helps to better understand the root causes of health inequities so that actions may be taken to ensure health and well-being for all San Diego County residents. To see an example of the framework under a racial equity lens, please click [here](#).



Health Equity in San Diego County: Socioeconomic Status

Exploring Health Disparities in San Diego County by Socioeconomic Status is a document prepared by the Division of Public Health Services in the County of San Diego Health and Human Services Agency. The report identifies health disparities among San Diego County residents. The information in this report is meant to be used to identify disparities and serve as a starting point in developing solutions that will help close the gap in existing disparities. This report supports the *Live Well San Diego* regional vision by identifying health disparities and inequities that critical in developing prevention and intervention measures, ultimately leading to a healthier San Diego. This document is designed for local agencies, organizations, groups, services, and individuals who have an interest in improving the health of county residents.

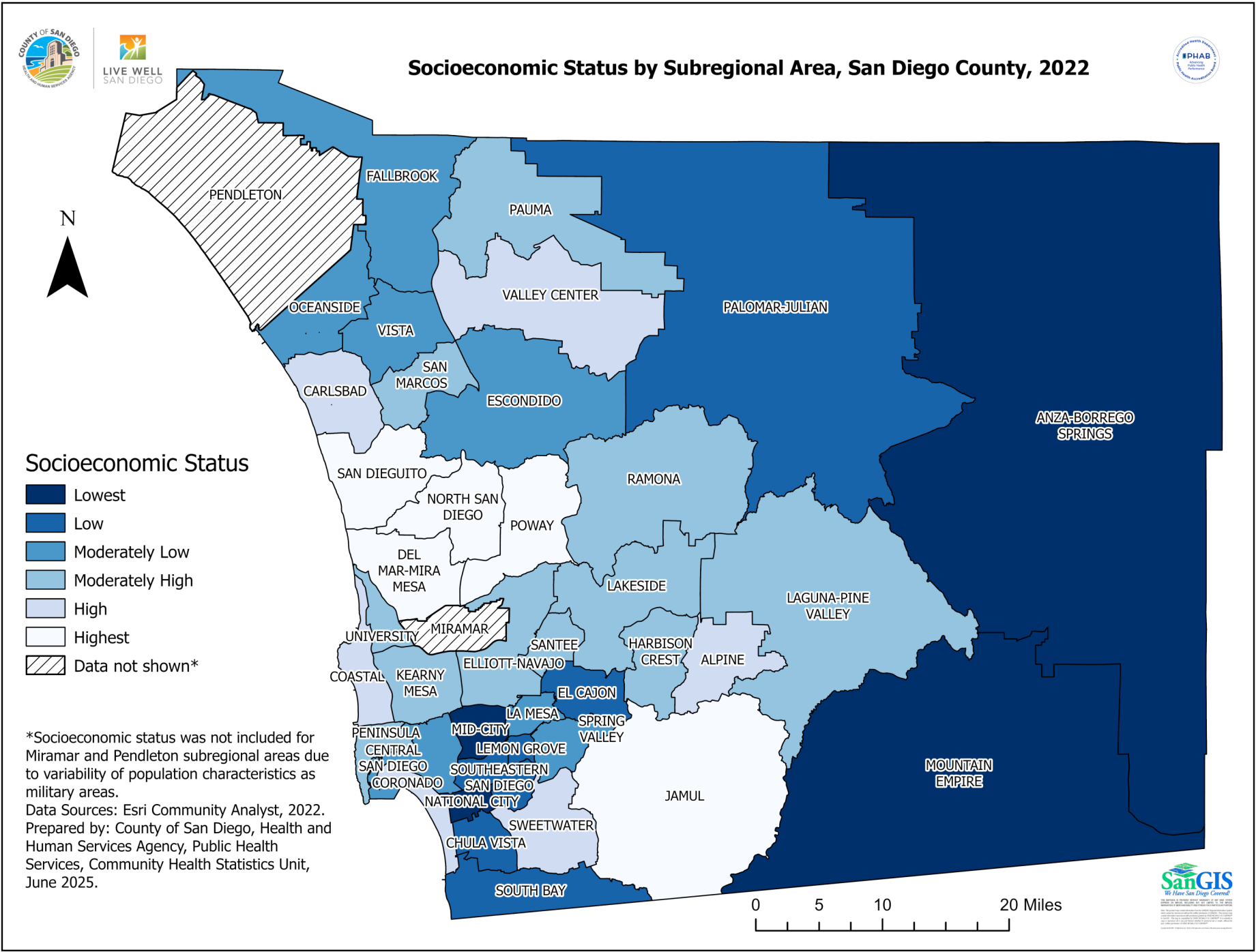
Defining Socioeconomic Status in San Diego County

San Diego Association of Governments (SANDAG) develops annual demographic estimates and long-range forecasts in addition to maintaining census data files. San Diego County has 41 SRAs, which are aggregations of census tracts. While the boundaries of many geographical areas, such as cities, change over time, SRA boundaries have remained essentially the same since their formation which allows for meaningful comparisons of time series information because identical areas are being compared. While SRAs are composed of census tracts, they are defined by SANDAG, not the Census Bureau.¹⁶

For the Socioeconomic Status (SES) Report, SES was calculated using Median Household Income (MHI) as the proxy measure. The MHI was pulled for 2022 by zip codes from ESRI Community Analyst and broken into six categories using the optimal binning procedure. Based on the lower and upper limits of the bins, each subregional area (SRA) was assigned to one of the following six SES categories: lowest, low, moderately low, moderately high, high, and highest.

Understanding Population Health by Socioeconomic Status

Health outcome data were compiled from the County Community Health Statistics Unit’s San Diego County Community Profiles. Specifically, death, hospitalization, and emergency department (ED) discharge rates for various health outcomes were analyzed to identify health disparities within San Diego County’s populations. In addition to identifying health disparities, demographic information and lifestyle/behavioral data on each group was provided to highlight some of the potential contributing factors to these health outcomes. Lastly, prevention strategies, as well as links to related websites, are provided for further information on non-communicable (chronic) diseases, communicable (infectious) diseases, maternal and child health, injury, and behavioral health. For further resources, including local health and demographic information, please visit www.sdhealthstatistics.com.



DEMOGRAPHICS



LOWEST¹⁷

In 2022, 7.2% of San Diego County residents lived in the lowest SES communities. Among those in the lowest SES communities, 5.5% of the population were 0-4 years old, 11.2% were 5-14 years old, 17.2% were 15-24 years old, 31.5% were 25-44 years old, 22.6% were 45-64 years old, and 12.0% were 65 years and older.

Additionally, the lowest SES communities were 46.2% Hispanic, 26.5% Non-Hispanic (NH) White, 8.4% NH Black, 14.5% NH Asian/Pacific Islander (API), 0.3% NH American Indian/Alaska Native (AIAN), 0.4% NH Other, and 3.7% two or more races.

Over 1 in 5 adults 25 years and older (20.8%) in the lowest SES communities did not graduate high school, 22.6% were high school graduates, 28.7% had some college or an associate degree, 27.9% had a bachelor’s degree or higher in 2022.

Compared to those living in other SES communities, the lowest SES communities had the second highest 5-year average unemployment rate of 7.7%, between 2018-2022, and the second highest proportion of households receiving food stamps/SNAP at 15.7% in 2022.

While 88.4% had health insurance, over 1 in 10 residents (11.6%) in the lowest SES communities did not have health insurance in 2022.

LOW¹⁷

In 2022, 17.9% of San Diego County residents lived in the low SES communities. Among those in the low SES communities, 5.8% were 0-4 years old, 13.5% were 5-

14 years old, 13.8% were 15-24 years old, 29.4% were 25-44 years old, 23.4% were 45-64 years old, and 14.1% were 65 years and older. Additionally, over half of residents (54.6%) were Hispanic, 24.2% were NH White, 7.4% were NH Black, 9.9% were NH API, 0.2% were NH AIAN, 0.4% were NH Other, and 3.3% two or more races.

Among adults 25 years and older in the low SES communities, 1 in 5 adults (20.0%) were not a high school graduate, 27.8% were high school graduates, 32.2% had some college or an associate degree, 20.1% had a bachelor’s degree or higher.

Compared to those in other SES communities, residents in the low SES communities had the highest 5-year average unemployment rate at 8.7% between 2018-2022. Moreover, residents in the low SES communities had the highest proportion of households receiving food stamps/SNAP at 16.2% compared to those in other SES communities.

Furthermore, nearly 1 in 10 (9.5%) residents in the low SES communities did not have health insurance in 2022.

MODERATELY LOW¹⁷

A quarter (25.2%) of San Diego County residents lived in the moderately low SES communities in 2022. Among those in the moderately low SES communities, 6.0% were 0-4 years old, 10.9% were 5-14 years old, 12.8% were 15-24 years old, 32.7% were 25-44 years old, 23.5% were 45-64 years old, and 14.2% were 65 years and older. Additionally, the moderately low SES communities were 40.2% Hispanic, 43.7% NH White,

4.8% NH Black, 6.3% API, 0.2% NH AIAN, 0.5% NH Other, and 4.4% two or more races.

Among adults 25 years and older in the moderately low SES communities, 12.9% were not a high school graduate, 19.0% were high school graduates, 32.0% had some college or an associate degree, 36.1% had a bachelor’s degree or higher in 2022.

Between 2018-2022, the moderately low SES communities had a 5-year average unemployment rate of 5.7%, and in 2022, the proportion of households receiving food stamps/SNAP was 8.5%.

Moreover, nearly 1 in 10 (9.5%) residents in the moderately low SES communities did not have health insurance in 2022.

MODERATELY HIGH¹⁷

About 1 in 5 San Diego County residents (20.4%) lived in the moderately high SES communities in 2022. Among those in the moderately high SES communities, 5.9% were 0-4 years old, 10.6% were 5-14 years old, 14.4% were 15-24 years old, 30.5% were 25-44 years old, 23.3% were 45-64 years old, and 15.3% were 65 years and older. Over half of residents (56.8%) in the moderately high SES communities were NH White, 24.1% were Hispanic, 2.9% were NH Black, 10.4% were NH API, 0.4% were NH AIAN, 0.4% were NH Other, and 4.9% were two or more races.

Among adults 25 years and older in the moderately high SES communities, 7.5% were not a high school graduate, 16.7% were high school graduates, 30.0%

had some college or an associate degree, and 45.8% had a bachelor’s degree or higher.

Between 2018-2022, the moderately high SES communities had a 5-year average unemployment rate of 5.2%, and in 2022, 6.1% of the moderately high SES households received food stamps/SNAP.

Additionally, the proportion of those in the moderately high SES communities who did not have health insurance was 5.5% in 2022.

HIGH¹⁷

In 2022, 12.8% of San Diego County residents lived in the high SES communities. Among those in the high SES communities, 5.1% were 0-4 years old, 12.6% were 5-14 years old, 12.2% were 15-24 years old, 28.3% were 25-44 years old, 25.6% were 45-64 years old, and 16.1% were 65 years and older. Additionally, among those in the high SES communities, 29.9% were Hispanic, 48.7% were NH White, 3.2% were NH Black, 12.7% were NH API, 0.3% were NH AIAN, 0.4% were NH Other, and 4.7% were two or more races.

Over half of adults 25 years and older (51.9%) in the high SES communities had a bachelor’s degree or higher, followed by 29.4% with some college or an associate degree, 13.2% were high school graduates, and 5.5% did not graduate high school.

The high SES communities had a 5-year average unemployment rate of 5.5% between 2018-2022, and in 2022, 3.9% of the moderately high SES communities received food stamps/SNAP.

DEMOGRAPHICS



While a majority did have health insurance, 1 in 20 (5.1%) residents in the high SES communities did not have health insurance in 2022.

HIGHEST¹⁷

In 2022, 15.2% of San Diego County residents lived in the highest SES communities. Among those in the highest SES communities, 5.9% were 0-4 years old, 13.1% were 5-14 years old, 10.3% were 15-24 years old, 26.6% were 25-44 years old, 27.7% were 45-64 years old, and 16.5% were 65 years and older. Additionally, the highest SES communities were 13.6% Hispanic, 52.0% NH White, 1.8% NH Black, 26.2% API, 0.2% NH AIAN, 0.4% NH Other, and 5.9% two or more races.

Nearly 2 in 3 adults (63.5%) had a bachelor's degree or higher, 4.9% did not graduate high school, 9.8% had a high school degree, 21.8% had some college or an associate degree, among adults 25 years and older in the highest SES communities.

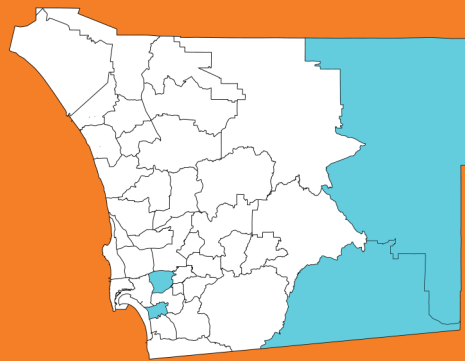
Compared to those in other SES communities, residents in the highest SES communities had the lowest 5-year average unemployment rate at 4.8% between 2018-2022.

In 2022, compared to those in other SES communities, those in the highest SES communities had the lowest proportion of households receiving food stamps/SNAP at 3.3%.

Compared to those in other SES communities, those in the highest SES communities had the lowest proportion of residents who did not have health insurance at 3.5% in 2022.



LOWEST SOCIOECONOMIC STATUS



NON-COMMUNICABLE (CHRONIC) DISEASES

Among non-communicable (chronic) conditions, the highest death rates among those in the lowest socioeconomic communities were for overall heart disease, overall cancer, and chronic kidney disease in 2022. The death rates for overall heart disease and chronic kidney disease were higher than San Diego County overall. In the lowest SES communities, overall heart disease, overall hypertensive diseases, and asthma had the highest emergency department (ED) discharge rates, while overall heart disease, overall hypertensive diseases, and diabetes had the highest hospitalization rates among non-communicable (chronic) conditions. The ED discharge rates and hospitalization rates for these conditions were all higher for those in the lowest SES communities than San Diego County overall.

ASTHMA

In 2022, asthma generally had a high ED discharge rate among non-communicable (chronic) conditions among those in the lowest SES communities. Among the lowest SES communities, Mountain Empire subregional area (SRA) residents had the highest ED discharge rate due to asthma (402.5 per 100,000).

CHRONIC KIDNEY DISEASE

For residents in the lowest SES communities, chronic kidney disease (CKD) generally had a high non-communicable (chronic) death rate in 2022. Specifically, National City SRA had the highest death rate due to CKD (97.8 per 100,000) among those in the lowest SES communities. Additionally, National City SRA

had the highest death rate due to CKD compared to all other SRAs in other SES communities.

DIABETES

Compared to those in other SES community groups, residents in the lowest SES communities had the highest hospitalization rate due to diabetes in 2022. Among those in the lowest SES communities, Mountain Empire SRA had the highest hospitalization rate due to diabetes (427.2 per 100,000), which was 2.6 times higher than San Diego County (161.9 per 100,000), and the highest compared to all other SRAs in other SES communities.

OVERALL CANCER

In 2022, among non-communicable (chronic) conditions, overall cancer generally had a high death rate among those in the lowest SES communities, with the highest death rate in the lowest SES community of National City SRA (149.9 per 100,000).

OVERALL HEART DISEASE

Residents in the lowest SES communities had the highest non-communicable (chronic) rates of death, ED discharge, and hospitalization due to overall heart disease in 2022. Additionally the lowest SES communities had the highest hospitalization rate compared to all other SES community groups. Among those living in the lowest SES communities, National City SRA had the highest rate of death (187.8 per 100,000) due to overall heart disease, while Mountain Empire SRA had the highest rates of ED discharge (2,628.6 per 100,000) and hospitalization (2,144.1 per

100,000). Specifically, Mountain Empire SRA's hospitalization rate due to overall heart disease was 2.1 times higher than San Diego County (1,008.4 per 100,000). Moreover, Mountain Empire SRA had the highest ED discharge and hospitalization rates due to overall heart disease compared to all other SRAs in the other SES communities.

OVERALL HYPERTENSIVE DISEASES

Compared to residents in other SES community groups, those living in the lowest SES communities had the highest hospitalization rate due to overall hypertensive diseases in 2022. Among the lowest SES communities, residents in the National City SRA had the highest death rate (48.9 per 100,000) while residents in Mountain Empire SRA had the highest ED discharge (419.6 per 100,000) and hospitalization (693.0 per 100,000) rates due to overall hypertensive diseases. The hospitalization rate due to overall hypertensive diseases in Mountain Empire SRA was 2.1 times higher than San Diego County (331.0 per 100,000). Additionally, Mountain Empire SRA had the highest hospitalization rate due to overall hypertensive diseases compared to all other SRAs in the other SES communities.

COMMUNICABLE (INFECTIOUS) DISEASES

Among communicable (infectious) conditions, the highest death rate was due to COVID-19 and the leading ED discharge rates were due to COVID-19, flu, and urinary tract infection among residents in the lowest SES communities in 2022. Additionally, the highest hospitalization rates were due to COVID-19, flu,

pneumonia, and urinary tract infection, while chlamydia, gonorrhea, and syphilis were the highest incidence rates for residents in the lowest SES communities in 2022. All ED discharge and incidence rates due to these conditions were higher than San Diego County overall and hospitalization rates due to pneumonia and urinary tract infection were higher than San Diego County overall.

COVID-19

Compared to other SES community groups, residents in the lowest SES communities had the highest death and hospitalization rates due to COVID-19 in 2022. Among those living in the lowest SES community groups, National City SRA residents had the highest rates of death (74.2 per 100,000) and ED discharge (1,615.8 per 100,000) due to COVID-19. Additionally, Mountain Empire SRA had the highest hospitalization rate due to COVID-19 (429.6 per 100,000), which was 2.3 times higher than San Diego County overall (184.8 per 100,000).

FLU

Among communicable (infectious) conditions, residents in the lowest SES communities generally had high rates of ED discharge and hospitalization due to the flu in 2022. In the lowest SES communities, National City SRA had the highest ED discharge rate (592.5 per 100,000), while Mid-City SRA had the highest hospitalization rate (19.4 per 100,000) due to the flu.

PNEUMONIA

For residents in the lowest SES communities, rates of

ED discharge and hospitalization due to pneumonia were generally high among communicable (infectious) conditions in 2022. In the lowest SES communities, National City SRA residents had the highest rates of ED discharge and hospitalization due to pneumonia (179.6 per 100,000 and 119.9 per 100,000, respectively).

URINARY TRACT INFECTION

Compared to residents in other SES community groups, the lowest SES communities had the highest ED discharge rate due to urinary tract infection in 2022. Among those living in the lowest SES communities, National City SRA had the highest ED discharge and hospitalization rates due to urinary tract infection (899.6 per 100,000 and 157.8 per 100,000, respectively).

CHLAMYDIA

In 2022, residents in the lowest SES communities had the highest incidence rate of chlamydia compared to other SES community groups. Among those living in the lowest SES communities, Mid-City SRA had the highest incidence rate of chlamydia (994.4 per 100,000).

GONORRHEA

Those in the lowest SES communities had the highest incidence rate of gonorrhea compared to residents in other SES community groups in 2022. Among the lowest SES communities, those living in Mid-City SRA had the highest incidence rate due to gonorrhea (522.2 per 100,000).

SYPHILIS

Compared to residents in other SES community groups, those living in the lowest SES communities had the highest incidence rate of syphilis in 2022. In the lowest SES communities, Mid-City SRA residents had the highest incidence rate due to syphilis (79.1 per 100,000).

INJURY

In 2022, among the lowest SES communities, poisoning had the highest injury-related death rate, while assault, falls, and motor vehicle injuries were the highest injury-related ED discharge rates. Additionally, falls, motor vehicle injuries, and poisoning were the leading injury-related hospitalization rates for those in the lowest SES communities. The rates of ED discharge and hospitalization for these conditions were all higher than San Diego County overall.

ASSAULT

Among injury conditions, assault generally had a high ED discharge rate for those in the lowest SES communities in 2022. In the lowest SES communities, Mid-City SRA residents had the highest ED discharge rate due to assault (361.2 per 100,000).

FALLS

Falls had the highest injury-related ED discharge and hospitalization rates for those in the lowest SES communities in 2022. Compared to those in other SES community groups, residents in the lowest SES communities had the highest hospitalization rate due to falls. Among those in the lowest SES communities, Mountain Empire SRA had the highest ED discharge rate (2,870.7 per 100,000) and Anza-Borrego Springs SRA had the highest hospitalization rate (814.4 per 100,000) due to falls. Additionally, Mountain Empire SRA and Anza-Borrego Springs SRA had the highest rates due to falls for ED discharge and hospitalization, respectively, compared to all other SRAs in the SES communities.

MOTOR VEHICLE INJURIES

In 2022, motor vehicle injuries generally had high injury-related ED discharge and hospitalization rates among those in the lowest SES communities. Compared to those in other SES communities, the lowest SES communities had the highest ED discharge and

hospitalization rates due to motor vehicle injuries. Specifically, Mountain Empire SRA had the highest ED discharge and hospitalization rates due to motor vehicle injuries (1,200.1 per 100,000 and 425.8 per 100,000, respectively) among those in the lowest SES communities and compared to all other SRAs in other SES communities.

POISONING

In the lowest SES communities, poisoning generally had high death and hospitalization rates among injury conditions in 2022. Among those in the lowest SES communities, Mid-City SRA had the highest rates of death and hospitalization due to poisoning (27.1 per 100,000 and 86.9 per 100,000, respectively).

BEHAVIORAL HEALTH

Among behavioral health conditions, all opioid overdoses and alcohol-related disorders were the highest death rates for residents in the lowest SES communities in 2022. Additionally, alcohol-related disorders, anxiety and fear-related disorders, and suicide attempt/ideation/intentional self-harm were the highest behavioral health-related ED discharge rates, while alcohol-related disorders, suicide attempt/ideation/attempt/intentional self-harm, and all opioid overdoses were the highest behavioral health-related hospitalization rates for the lowest SES communities. The ED discharge rates due to alcohol-related disorders, anxiety and fear-related disorders, and suicide, and the hospitalization rates due to all opioid overdoses and suicide attempt/ideation/intentional self-harm were higher for residents in the lowest SES communities than San Diego County overall.

ALCOHOL-RELATED DISORDERS

Among those in the lowest SES communities, alcohol-related disorders generally had high rates of behavioral health-related death, ED discharge, and hospitalization in 2022. Compared to those in other SES community

groups, residents in the lowest SES communities had the highest ED discharge rate due to alcohol-related disorders. Among the lowest SES communities, residents in Mid-City SRA had the highest rates of death (15.0 per 100,000) and hospitalization (56.7 per 100,000), while Mountain Empire SRA had the highest ED discharge rate due to alcohol-related disorders (433.6 per 100,000) .

ALL OPIOID OVERDOSES

In 2022, all opioid overdoses generally had high behavioral health-related hospitalization and death rates for those in the lowest SES communities. Among the lowest SES communities, Mid-City SRA residents had the highest death and hospitalization rates due to all opioid overdoses (21.5 per 100,000 and 19.4 per 100,000, respectively).

ANXIETY AND FEAR-RELATED DISORDERS

Compared to those in other SES communities, residents in the lowest SES communities had the highest ED discharge rate due to anxiety and fear-related disorders in 2022. Specifically, Mid-City SRA had the highest ED discharge rate due to anxiety and fear-related disorders among the lowest SES communities (291.0 per 100,000).

SUICIDE

Among behavioral health conditions, suicide attempt/ideation/intentional self-harm generally had high rates of ED discharge and hospitalization for those in the lowest SES communities in 2022. Among the lowest SES communities, Mountain Empire SRA had the highest ED discharge rate (393.1 per 100,000) and Mid-City SRA had the highest hospitalization rate (24.0 per 100,000) due to suicide attempt/ideation/intentional self-harm.

ALZHEIMER’S DISEASE AND RELATED DEMENTIAS (ADRD)

Although the rates of death, ED discharge, and

hospitalization were generally lower compared to other SES groups, among the lowest SES communities Mid-City SRA had the highest rates of ED discharge (17.1 per 100,000) and hospitalization (12.6 per 100,000) due to Alzheimer's disease and related dementias, while National City SRA had the highest death rate (101.0 per 100,000) in 2022.

MATERNAL AND CHILD HEALTH

Residents in the lowest SES communities had a lower percentage of newborns that received early prenatal care than San Diego County overall and the lowest compared to all other SES community groups in 2022. Additionally, those in the lowest SES communities had a higher percentage of newborns with a low birth weight or born preterm compared to San Diego County and the highest compared to those living in other SES community groups.

EARLY PRENATAL CARE

Compared to residents in other SES community groups, those living in the lowest SES communities had the lowest percentage of mothers receiving early prenatal care in 2022. Among the lowest SES communities, Anza-Borrego Springs SRA residents had the lowest percentage of mothers receiving early prenatal care (60.3%). Additionally, Anza-Borrego Springs SRA had a lower percentage of mothers receiving early prenatal care than San Diego County overall (86.7%), and the lowest percentage of mothers receiving early prenatal care compared to any other SRA in the other SES communities.

PRETERM BIRTHS

Residents living in the lowest SES communities had the highest percentage of preterm births compared to those in other SES community groups in 2022. Specifically, National City SRA had the highest percentage of preterm births (11.9%) in the lowest SES communities. Furthermore, National City SRA had a higher percentage

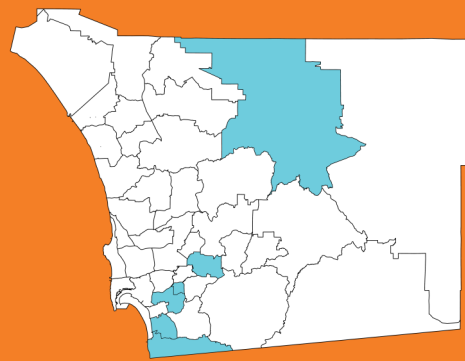
of preterm births compared to all other SRAs in other SES communities and San Diego County overall (8.9%).

LOW BIRTH WEIGHT

In 2022, residents in the lowest SES communities had the highest percentage of newborns with a low birth weight compared to other SES community groups. Among those in the lowest SES communities, National City SRA had the highest percentage of newborns with a low birth weight (8.8%). Additionally, National City SRA had a higher percentage of newborns with a low birth weight compared to San Diego County overall (7.0%).



LOW SOCIOECONOMIC STATUS



NON-COMMUNICABLE (CHRONIC) DISEASES

Those in the low SES communities had the highest non-communicable (chronic) death rates due to chronic kidney disease, overall cancer, and overall heart disease in 2022. Additionally, among non-communicable conditions, asthma, overall heart disease, and overall hypertensive diseases had the highest ED discharge rates, while overall cancer, overall heart disease, and overall hypertensive diseases had the highest hospitalization rates among residents in the low SES communities. The death, ED discharge and hospitalization rates for these conditions in the lowest SES communities were all higher than San Diego County overall.

ASTHMA

Compared to residents in other SES community groups, those living in the low SES communities had the highest ED discharge rate due to asthma in 2022. Among residents in the low SES communities, Southeastern San Diego SRA had the highest ED discharge rate due to asthma (405.5 per 100,000), which was 2.0 times higher than San Diego County (207.0 per 100,000), and was the highest rate compared to all other SRAs in other SES communities.

CHRONIC KIDNEY DISEASE

In 2022, residents living in the low SES communities had the highest death rate due to chronic kidney disease (CKD) compared to residents in other SES community groups. Among the low SES communities, El Cajon SRA residents had the highest death rate due to CKD (87.3 per 100,000).

OVERALL CANCER

Among non-communicable (chronic) conditions, overall cancer generally had high rates of death and hospitalization for residents living in the low SES communities in 2022. Compared to those living in other SES community groups, those living in the low SES communities had the highest hospitalization rate due to overall cancer. Among residents in the low SES communities, Lemon Grove SRA had the highest rates of death and hospitalization due to overall cancer (208.6 per 100,000 and 344.6 per 100,000, respectively).

OVERALL HEART DISEASE

In 2022, overall heart disease had the highest non-communicable (chronic) rates of death, ED discharge and hospitalization for residents living in the low SES communities. Compared to those living in other SES community groups, residents in the lowest SES communities had the highest death and ED discharge rates due to overall heart disease. Among those living in the low SES communities, Palomar-Julian SRA had the highest death and hospitalization rates (502.8 per 100,000 and 1,570.6 per 100,000, respectively), while Southeastern San Diego SRA had the highest ED discharge rate due to overall heart disease (2,579.0 per 100,000). Additionally, Palomar-Julian SRA had the highest rate of death due to overall heart disease compared to all other SRAs in other SES communities, with a rate 3.4 times higher than San Diego County overall (149.9 per 100,000).

OVERALL HYPERTENSIVE DISEASES

Among non-communicable conditions, overall hypertensive diseases generally had high ED discharge and hospitalization rates for residents living in the low SES communities in 2022. Compared to those living in other SES community groups, those living in the low SES communities had the highest ED discharge rate due to overall hypertensive diseases. Lemon Grove SRA had the highest ED discharge rate and Southeastern San Diego SRA had the highest hospitalization rate due to overall hypertensive diseases among residents in the low SES communities (477.8 per 100,000 and 557.2 per 100,000, respectively). Additionally, Lemon Grove SRA had the highest ED discharge rate due to overall hypertensive diseases compared to all other SRAs in other SES communities.

COMMUNICABLE (INFECTIOUS) DISEASES

Among communicable (infectious) conditions in the low SES communities, the highest death rate was due to COVID-19 and the leading ED discharge rates were due to COVID-19, urinary tract infection, and flu in 2022. Additionally, the highest hospitalization rates were due to COVID-19, urinary tract infection, and pneumonia among the low SES communities. All death, ED discharge, and hospitalization rates for these conditions were higher than San Diego County overall. Residents in the low SES communities also had higher incidence rates of chlamydia, gonorrhea, and syphilis than San Diego County overall.

COVID-19

COVID-19 had the highest communicable (infectious)

rates of death, ED discharge, and hospitalization among those in the low SES communities in 2022.

Furthermore, compared to other SES community groups, residents in the low SES communities had the highest ED discharge rate due to COVID-19. Among the low SES communities, El Cajon SRA had the highest death and hospitalization rates (66.3 per 100,000 and 332.6 per 100,000, respectively), while Chula Vista SRA had the highest ED discharge rate due to COVID-19 (1,699.8 per 100,000).

FLU

Compared to residents in other SES community groups, those living in the low SES communities had the highest ED discharge rate due to flu in 2022. Residents of El Cajon SRA had the highest ED discharge rate due to flu among the low SES communities and compared to all other SRAs (621.4 per 100,000).

PNEUMONIA

Those living in the low SES communities had the highest rates of ED discharge and hospitalization due to pneumonia compared to residents in other SES community groups in 2022. Among the low SES communities, Lemon Grove SRA had the highest ED discharge rate (213.7 per 100,000), while El Cajon SRA had the highest hospitalization rate due to pneumonia (135.3 per 100,000).

URINARY TRACT INFECTION

Compared to residents in other SES community groups, those living in the low SES communities had the highest hospitalization rates due to urinary tract infection in

2022. Additionally, those in the low SES communities, generally had a high ED discharge rate due to urinary tract infection. South Bay SRA had the highest ED discharge rate (965.9 per 100,000) and El Cajon SRA had the highest hospitalization rate due to urinary tract infection (181.7 per 100,000) among residents in the low SES communities and compared to all other SRAs in other SES communities.

CHLAMYDIA

The incidence rate of chlamydia was slightly higher among the low SES communities than San Diego County overall in 2022. Specifically, South Bay SRA had the highest incidence rate of chlamydia in the low SES communities (780.9 per 100,000).

GONORRHEA

In 2022, the incidence rate of gonorrhea was slightly higher in the low SES communities compared to San Diego County overall. In the low SES communities, Lemon Grove SRA residents had the highest incidence rate of gonorrhea (340.3 per 100,000).

SYPHILIS

Compared to San Diego County overall, the incidence rate of syphilis was slightly higher in the low SES communities in 2022. Specifically, Southeastern San Diego SRA had the highest incidence rate of syphilis among the low SES communities (47.2 per 100,000).

INJURY

Among the low SES communities, motor vehicle injuries, poisoning, and traumatic brain injury had the highest injury-related death rates in 2022. The rates of death due to motor vehicle injuries and poisoning were higher among residents in the low SES communities than San Diego County overall. Assault, falls, and motor vehicle injuries had the highest injury-related ED discharge rates, while falls, motor vehicle injuries and poisoning had the highest injury-related hospitalization

rates in the low SES communities. The ED discharge and hospitalization rates for these conditions were also higher among those in the low SES communities compared to San Diego County overall.

ASSAULT

Compared to residents in other SES community groups, those living in the low SES communities had the highest ED discharge rate due to assault in 2022. Among the low SES communities, residents living in Southeastern San Diego SRA had the highest ED discharge rate due to assault (410.9 per 100,000).

FALLS

In 2022, falls had the highest ED discharge and hospitalization rates among injury conditions for residents living in the low SES communities. Compared to residents in other SES community groups, those living in the low SES communities had the highest ED discharge rate due to falls. Among those living the low SES communities, El Cajon SRA had the highest ED discharge rate (2,746.3 per 100,000) and Palomar-Julian SRA had the highest hospitalization rate (663.0 per 100,000) due to falls.

MOTOR VEHICLE INJURIES

Among injury conditions, motor vehicle injuries generally had high death, ED discharge, and hospitalization rates for residents living in the low SES communities in 2022. Compared to residents in other SES community groups, those living in the low SES communities had the highest death rate due to motor vehicle injuries. In the low SES communities, residents in Southeastern San Diego SRA had the highest death and ED discharge rates (15.4 per 100,000 and 886.6 per 100,000, respectively), while South Bay SRA had the highest hospitalization rate due to motor vehicle injuries (117.0 per 100,000). Additionally, Southeastern San Diego SRA had the highest death rate due to motor vehicle injuries compared to all other SRAs in other SES

communities.

POISONING

Poisoning generally had high injury-related death and hospitalization rates for residents living in the low SES communities in 2022. Compared to those living in other SES community groups, those living in the low SES communities had the highest hospitalization rate due to poisoning. Among those living in the low SES communities, Southeastern San Diego SRA had the highest death rate (42.4 per 100,000) and Lemon Grove SRA had the highest hospitalization rate (165.9 per 100,000) due to poisoning. Additionally, Lemon Grove SRA had the highest hospitalization rate due to poisoning compared to all other SRAs, at 2.3 times the rate of San Diego County (73.4 per 100,000).

TRAUMATIC BRAIN INJURY

In 2022, among injury conditions, traumatic brain injury generally had a high death rate for residents living in the low SES communities, with the highest death rate in the low SES community of Southeastern San Diego SRA (13.4 per 100,000).

BEHAVIORAL HEALTH

Among those in the low SES communities, alcohol-related disorders and all opioid overdoses had the highest death rates in 2022, which were higher than San Diego County overall. Alcohol-related disorders, anxiety and fear-related disorders, and suicide attempt/ideation/intentional self-harm had the highest ED discharge rates, while alcohol-related disorders, all opioid overdoses, and suicide attempt/ideation/intentional self-harm had the highest hospitalization rates among behavioral health conditions in 2022. The ED discharge and hospitalization rates for these conditions were higher among those in the low SES communities compared to San Diego County overall.

ALCOHOL-RELATED DISORDERS

Among behavioral health conditions, alcohol-related disorders generally had high death, ED discharge, and hospitalization rates among residents living in the low SES communities in 2022. Compared to those living in other SES community groups, those living in the low SES communities had the highest hospitalization rate due to alcohol-related disorders. Among residents living in the low SES communities, El Cajon SRA had the highest death rate (25.5 per 100,000), while Lemon Grove SRA had the highest ED discharge and hospitalization rates due to alcohol-related disorders (512.9 per 100,000 and 119.0 per 100,000 respectively). Additionally, Lemon Grove SRA had the highest ED discharge rate due to alcohol-related disorders compared to all other SRAs in other SES communities.

ALL OPIOID OVERDOSES

Among those in the low SES communities, all opioid overdoses generally had high death and hospitalization rates among behavioral health conditions in 2022. Compared to those living in other SES community groups, those living in the low SES communities had the highest hospitalization rate due to all opioid overdoses. Specifically, Southeastern San Diego SRA had the highest death rate (28.2 per 100,000) and South Bay SRA had the highest hospitalization rate (33.0 per 100,000) due to all opioid overdoses among those living in the low SES communities. Moreover, South Bay SRA’s hospitalization rate due to all opioid overdoses was 2.0 times higher than San Diego County (16.1 per 100,000).

ANXIETY AND FEAR-RELATED DISORDERS

Among behavioral health conditions, anxiety and fear-related disorders generally had a high ED discharge rate among residents living in the low SES communities in 2022. Specifically, Southeastern San Diego SRA had the highest ED discharge rate due to anxiety and fear-

related disorders among those living in the low SES communities and compared to all other SRAs in other SES communities (320.4 per 100,000).

SUICIDE

Compared to those living in other SES community groups, those living in the low SES communities had the highest ED discharge and hospitalization rates due to suicide attempt/ideation/intentional self-harm. El Cajon SRA had the highest ED discharge rate (375.5 per 100,000) and South Bay had the highest hospitalization rate (34.3 per 100,000) due to suicide attempt/ideation/intentional self-harm among those living in the low SES communities. Additionally, South Bay SRA’s hospitalization rate due to suicide attempt/ideation/intentional self-harm was the highest compared to all other SRAs in other SES communities.

ALZHEIMER’S DISEASE AND RELATED DEMENTIAS (ADRD)

Among the low SES communities, the ED discharge and hospitalization rates due to Alzheimer’s disease and related dementias (ADRD) were slightly higher than San Diego County overall in 2022. Among those living in the low SES communities, El Cajon SRA had the highest ED discharge rate and Chula Vista SRA had the highest hospitalization rate due to ADRD (32.4 per 100,000 and 25.3 per 100,000).

MATERNAL AND CHILD HEALTH

Residents in the low SES communities had a lower percentage of newborns that received early prenatal care than San Diego County overall and the second lowest compared to all other SES community groups in 2022. Additionally, those in the lowest SES communities had a higher percentage of newborns with a low birth weight or born preterm compared to San Diego County and the second highest compared to those living in other SES community groups.

EARLY PRENATAL CARE

Residents living in the low SES communities had the second lowest percentage of mothers receiving early prenatal care in 2022 compared to those in other SES community groups. Specifically, Palomar-Julian SRA had the lowest percentage of mothers receiving early prenatal care among those living in the low SES communities (78.0%). Furthermore, Palomar-Julian SRA had a lower percentage of mothers receiving early prenatal care compared to San Diego County overall (86.7%).

PRETERM BIRTHS

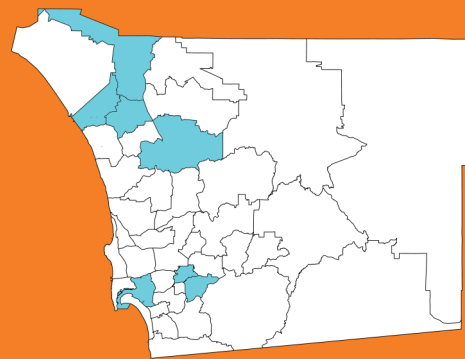
Those living in the low SES communities had the second highest percentage of preterm births compared to those in other SES community groups in 2022. Among those in the low SES communities, Lemon Grove SRA had the highest percentage of preterm births (10.1%). Additionally, compared to San Diego County overall (8.9%), Lemon Grove SRA had a higher percentage of preterm births.

LOW BIRTH WEIGHT

Residents in the low SES communities had the second highest percentage of newborns with a low birth weight compared to other SES community groups in 2022. Among those in the low SES communities, Lemon Grove SRA had the highest percentage of newborns with a low birth weight (8.2%), and a higher percentage of newborns with a low birth weight than San Diego County overall (7.0%).



MODERATELY LOW SOCIOECONOMIC STATUS



NON-COMMUNICABLE (CHRONIC) DISEASES

Among non-communicable (chronic) conditions, the highest rates of death among those in the moderately low socioeconomic SES communities were due to chronic kidney disease, overall cancer, and overall heart disease in 2022. The death rates for overall cancer and overall heart disease were higher among residents in the moderately low SES communities than San Diego County overall. Additionally, the highest non-communicable (chronic) ED discharge rates were due to asthma, overall heart disease, and overall hypertensive diseases, while the highest non-communicable (chronic) hospitalization rates were due to overall cancer, overall heart disease, and overall hypertensive diseases among the moderately low SES communities.

ASTHMA

In 2022, residents in the moderately low SES communities generally had a high ED discharge rate of asthma among non-communicable (chronic) conditions. Specifically, residents in the moderately low SES community of Spring Valley SRA had the highest ED discharge rate due to asthma (308.7 per 100,000).

CHRONIC KIDNEY DISEASE

Among non-communicable (chronic) conditions in 2022, chronic kidney disease generally had a high death rate among residents living in the moderately low SES communities, with the highest death rate in the moderately low SES community of La Mesa SRA (87.6 per 100,000).

OVERALL CANCER

In the moderately low SES communities, overall cancer generally had high rates of non-communicable (chronic) rates of death and hospitalization in 2022. Compared to those living in other SES communities, those in the moderately low SES communities had the highest death rate due to overall cancer. La Mesa SRA had the highest death and hospitalization rates due to overall cancer among those in the moderately low SES communities (208.3 per 100,000 and 314.9 per 100,000, respectively).

OVERALL HEART DISEASE

In 2022, the highest non-communicable (chronic) rates of death, ED discharge, and hospitalization were due to overall heart disease for the moderately low SES communities. Specifically, Fallbrook SRA had the highest death rate (223.5 per 100,000) and Spring Valley had the highest ED discharge and hospitalization rates due to overall heart disease among the low moderately low SES communities (2,243.8 per 100,000 and 1,309.5 per 100,000, respectively).

OVERALL HYPERTENSIVE DISEASES

Among those in the moderately low SES communities, overall hypertensive diseases generally had high non-communicable (chronic) ED discharge and hospitalization rates in 2022. In the moderately low SES communities, Spring Valley SRA residents had the highest rates of ED discharge and hospitalization due to overall hypertensive diseases (412.9 per 100,000 and 410.1 per 100,000, respectively).

COMMUNICABLE (INFECTIOUS) DISEASES

In 2022, among communicable (infectious) conditions, COVID-19 and pneumonia had the highest rates of death for those in the moderately low SES communities, with rates higher than San Diego County overall. Additionally, COVID-19, urinary tract infection, and the flu had the highest communicable (infectious) rates of ED discharge among those in the moderately low SES communities, while COVID-19, urinary tract infection, and pneumonia were the highest communicable (infectious) hospitalization rates for those in the moderately low SES communities. Gonorrhea and syphilis incidence rates were slightly higher for residents in the moderately low SES communities than San Diego County overall.

COVID-19

In 2022, COVID-19 had the highest communicable (infectious) disease rates of death, ED discharge, and hospitalization for those in the moderately low SES communities. Specifically, Spring Valley SRA had the highest rates of death, ED discharge, and hospitalization due to COVID-19 among residents in the moderately low SES communities (53.4 per 100,000, 1,445.6 per 100,000, and 268.5 per 100,000, respectively).

FLU

Among those in the moderately low SES communities, flu had a slightly higher ED discharge compared to San Diego County overall in 2022. Further, in the moderately low SES communities, Spring Valley SRA residents had the highest ED discharge rate due to flu

(475.3 per 100,000).

PNEUMONIA

Compared to those in other SES communities, residents in the moderately low SES communities had the highest death rate due to pneumonia in 2022. Among those living in the moderately low SES communities, Escondido SRA had the highest rates of death and ED discharge due to pneumonia (11.7 per 100,000 and 203.1 per 100,000, respectively). Additionally, Escondido SRA had the highest death rate due to pneumonia compared to all other SRAs in other SES communities. Further, pneumonia generally had a high communicable (infectious) disease hospitalization rate among residents living in the moderately low SES communities, with the highest hospitalization rate in the moderately low SES community of Spring Valley SRA (116.0 per 100,000).

URINARY TRACT INFECTION

In 2022, urinary tract infection had a slightly higher ED discharge rate among the moderately low SES communities compared to San Diego County overall. Specifically, Spring Valley SRA had the highest rates of ED discharge and hospitalization among those living in the moderately low SES communities (805.3 per 100,000 and 149.5 per 100,000, respectively).

GONORRHEA

In 2022, among those living in the moderately low SES communities, Central San Diego SRA had the highest incidence rate of gonorrhea (747.6 per 100,000), with a rate 3.2 times higher than San Diego County (234.1 per

100,000). Additionally, Central San Diego SRA had the highest incidence rate of gonorrhea compared to all other SRAs in other SES communities.

SYPHILIS

In 2022, among those living in the moderately low SES communities, Central San Diego SRA had the highest incidence rate of syphilis (167.4 per 100,000), with a rate 4.9 times higher than San Diego County (34.4 per 100,000). Additionally, Central San Diego SRA had the highest incidence rate of syphilis compared to all other SRAs in other SES communities.

INJURY

Among those in the moderately low SES communities, falls, poisoning, and traumatic brain injury had the highest injury-related death rates in 2022. The death rates due to these injury conditions were higher among those in the moderately low SES communities than San Diego County overall. In the moderately low SES communities, the highest injury-related ED discharge rates were due to assault, falls, and motor vehicle injuries, while the highest injury-related hospitalization rates were due to falls, hip fractures, and poisoning. The ED discharge rate due to assault and hospitalization rates due to poisoning and hip fractures were higher among residents in the moderately low SES communities than San Diego County overall.

ASSAULT

Among those in the moderately low SES communities, assault generally had a high ED discharge rate among injury conditions in 2022. Central San Diego SRA had the highest ED discharge rates due to assault (459.3 per 100,000) among residents in the moderately low SES communities and the highest rate compared to all other SRAs in other SES communities.

FALLS

Among injury conditions, moderately low SES

communities generally had higher death, ED discharge, and hospitalization rates due to falls in 2022. Compared to residents in other SES communities, those in the moderately low SES communities had the highest death rate due to falls. Oceanside SRA had the highest death rate (20.0 per 100,000), Spring Valley SRA had the highest ED discharge rate (2,552.4 per 100,000), and La Mesa SRA had the highest hospitalization rate (611.4 per 100,000) due to falls among residents in the moderately low SES communities.

HIP FRACTURES

In 2022, among injury conditions, hip fractures generally had a high hospitalization rate for those in the moderately low SES communities, with the highest rate in La Mesa SRA rate (110.8 per 100,000).

MOTOR VEHICLE INJURIES

Among those in the moderately low SES communities, motor vehicle injuries generally had higher injury-related ED discharge rates in 2022. Spring Valley SRA residents had the highest ED discharge rate due to motor vehicle injuries among the moderately low SES communities (791.1 per 100,000).

POISONING

Compared to residents in other SES communities, those in the moderately low SES communities had the highest death rate due to poisoning in 2022. Central San Diego SRA had the highest death rate due to poisoning (55.2 per 100,000) among those living in the moderately low SES communities. Additionally, Central San Diego SRA had the highest death rate due to poisoning compared to all other SRAs in other SES communities.

TRAUMATIC BRAIN INJURY

In 2022, those in the moderately low SES communities had the highest death rate due to traumatic brain injury compared to residents in other SES communities. Oceanside SRA had the highest death rate due to

traumatic brain injury (21.4 per 100,000) among residents in the moderately low SES communities, and the highest death rate compared to all other SRAs in other SES communities.

BEHAVIORAL HEALTH

Among behavioral health conditions, alcohol-related disorders, all opioid overdoses, and suicide had the highest rates of death for those in the moderately low SES communities in 2022. Death rates due to these conditions were higher than San Diego County overall. Among residents in the moderately low SES communities, the highest behavioral-health related ED discharge rates were due to alcohol-related disorders, and suicide attempt/ideation/intentional self-harm, while the highest behavioral-health related hospitalization rates were due to alcohol-related disorders, schizophrenia, and substance use/abuse/dependency in 2022. The ED discharge rates due to alcohol-related disorders and suicide attempt/ideation/intentional self-harm and hospitalization rates due to alcohol-related disorders, schizophrenia, and substance use/abuse/dependency were similar or higher in those in the moderately low SES communities than San Diego County overall.

ALCOHOL-RELATED DISORDERS

Among those in the moderately low SES communities, alcohol-related disorders generally had high death, ED discharge, and hospitalization rates among behavioral health conditions in 2022. Central San Diego SRA had the highest death and ED discharge rates (28.1 per 100,000 and 501.5 per 100,000, respectively), while La Mesa SRA had the highest hospitalization rate due to alcohol-related disorders (114.5 per 100,000) among those in the moderately low SES communities.

ALL OPIOID OVERDOSES

Compared to residents in other SES communities, those in the moderately low SES communities had the highest

death rate due to all opioid overdoses in 2022. Among the moderately low SES communities, residents in Central San Diego SRA had the highest death rate due to all opioid overdoses (43.6 per 100,000), which was 2.0 times higher than San Diego County (21.8 per 100,000), and the highest death rate compared to all other SRAs in other SES communities.

SCHIZOPHRENIA

Compared to residents in other SES communities, those in the moderately low SES communities had the highest hospitalization rate due to schizophrenia in 2022. Among those in the moderately low SES communities, Central San Diego SRA had the highest hospitalization rate (24.0 per 100,000), which was 3.8 times higher than San Diego County (6.4 per 100,000), and the highest hospitalization rate compared to all other SRAs in other SES communities.

SUBSTANCE USE/ABUSE/DEPENDENCY

In 2022, the moderately low SES communities had the highest hospitalization rate due to substance use/abuse/dependency compared to residents in other SES communities. Among residents in the moderately low SES communities, Central San Diego SRA had the highest hospitalization rate due to substance use/abuse/dependency (38.4 per 100,000), which was 5.7 times higher than San Diego County (6.7 per 100,000), and the highest hospitalization rate compared to all other SRAs in other SES communities.

SUICIDE

Residents in the moderately low SES communities had the highest death rate due to suicide compared to those living in other SES communities in 2022. Central San Diego SRA had the highest death rate due to suicide (17.4 per 100,000) among those in the moderately low SES communities and compared to all other SRAs in other SES communities. Additionally, residents in the moderately low SES communities had a

slightly higher ED discharge rate compared to San Diego County overall. Specifically, in the moderately low SES communities, Spring Valley SRA residents had the highest ED discharge rate due to suicide attempt/ ideation/intentional self-harm (314.1 per 100,000).

ALZHEIMER’S DISEASE AND RELATED DEMENTIAS (ADRD)

In 2022, those in the moderately low SES communities had the highest ED discharge rate due Alzheimer’s disease and related dementias (ADRD) compared to residents in other SES communities. Among residents in the moderately low SES communities, La Mesa SRA had the highest ED discharge rate due to ADRD (46.7 per 100,000) and compared to all other SRAs in other SES communities, with a rate 2.1 times higher than San Diego County (22.8 per 100,000).

PARKINSON’S DISEASE

In 2022, residents in the moderately low SES communities had a slightly higher death rate due to Parkinson’s disease compared to San Diego County overall. Among those living in the moderately low SES communities, Escondido SRA had the highest death rate due to Parkinson’s disease (14.4 per 100,000).

MATERNAL AND CHILD HEALTH

Residents in the moderately low SES communities had a higher percentage of mothers receiving early prenatal care and a higher or similar percentage of newborns with a low birth weight or born preterm compared to San Diego County overall in 2022.

EARLY PRENATAL CARE

Overall, the moderately low SES communities had a higher percentage of mothers receiving early prenatal care than San Diego County overall in 2022. However, among the moderately low SES communities, Central San Diego SRA residents had the lowest percent of mothers receiving early prenatal care (83.4%), and a lower percentage

compared to San Diego County overall (86.7%).

PRETERM BIRTHS

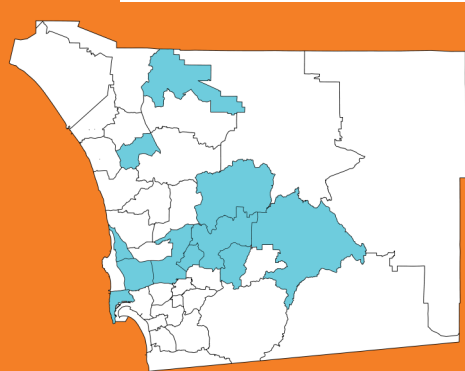
In 2022, moderately low SES communities had a slightly higher percentage of newborns born preterm compared to San Diego County overall. Among residents living in the moderately low SES communities, Escondido SRA had the highest percentage of newborns born preterm (10.8%), and a higher percentage compared to San Diego overall (8.9%).

LOW BIRTH WEIGHT

Residents in the moderately low SES communities had a similar percentage of newborns with a low birth weight than San Diego County overall in 2022. However, among residents living in the moderately low SES communities, Spring Valley SRA had the highest percentage of newborns with a low birth weight (9.2%), and a higher percentage compared to San Diego County overall (7.0%).



MODERATELY HIGH SOCIOECONOMIC STATUS



NON-COMMUNICABLE (CHRONIC) DISEASES

Among non-communicable (chronic) conditions, the highest death rates among those in the moderately high SES communities were due to chronic kidney disease, overall cancer, and overall heart disease in 2022. Compared to San Diego County overall, the death rate due to overall cancer was higher among residents in the moderately high SES communities. The highest non-communicable (chronic) ED discharge rates were due to asthma, overall heart disease, and overall hypertensive diseases, while the highest non-communicable (chronic) hospitalization rates were due to overall cancer, overall heart disease, and overall hypertensive diseases among the moderately high SES communities. The ED discharge and hospitalization rates due to overall cancer were higher among residents in the moderately high SES communities compared to San Diego County overall.

ASTHMA

Among moderately high SES communities, asthma generally had a high ED discharge rate among non-communicable conditions in 2022. In the moderately high SES communities, Harbison Crest SRA had the highest ED discharge rate due to asthma (311.9 per 100,000).

CHRONIC KIDNEY DISEASE

In 2022, among non-communicable conditions, chronic kidney disease (CKD) generally had a high death rate among those in the moderately high SES communities, with the highest death rate in the moderately high SES community of Lakeside SRA (77.0 per 100,000).

OVERALL CANCER

Among moderately high SES communities, overall cancer generally had high non-communicable (chronic) disease rates of death and hospitalization in 2022. Specifically, Lakeside SRA had the highest death rate (212.4 per 100,000) and Laguna-Pine Valley SRA had the highest hospitalization rate (483.5 per 100,000) due to overall cancer among residents in the moderately high SES communities and compared to all other SRAs in other SES communities.

OVERALL HEART DISEASE

In 2022, overall heart disease generally had high non-communicable (chronic) disease death, ED discharge, and hospitalization rates for those living in moderately high SES communities. Specifically, Harbison Crest SRA had the highest death, ED discharge, and hospitalization rates due to overall heart disease among residents living in moderately high SES communities (188.3 per 100,000, 2,405.1 per 100,000, and 1,368.2 per 100,000, respectively).

OVERALL HYPERTENSIVE DISEASES

For those in the moderately high SES communities, overall hypertensive diseases generally had high rates of ED discharge and hospitalization among non-communicable (chronic) conditions in 2022. Among those living in the moderately high SES communities, Harbison Crest SRA had the highest rates of ED discharge and hospitalization due to overall hypertensive diseases (402.6 per 100,000 and 478.2 per 100,000, respectively).

COMMUNICABLE (INFECTIOUS) DISEASES

In 2022, among communicable (infectious) conditions, COVID-19 had the highest death rate. The highest ED discharge rates were due to COVID-19, urinary tract infection, and flu, while the leading hospitalization rates were due to COVID-19, urinary tract infection, and pneumonia. The hospitalization rate due to urinary tract infection was higher among those in the moderately high SES communities compared to San Diego County overall.

COVID-19

In 2022, COVID-19 had the highest communicable (infectious) disease death, ED discharge, and hospitalization rates among those in the moderately high SES communities. Among the moderately high SES communities, Lakeside SRA had the highest death rate (71.6 per 100,000) and Harbison Crest SRA had the highest ED discharge (1,573.3 per 100,000) and hospitalization (316.5 per 100,000) rates due to COVID-19.

FLU

For those in the moderately high SES communities, flu generally had a high ED discharge rate among communicable conditions in 2022. Among those in the moderately high SES communities, Harbison Crest SRA had the highest ED discharge rate due to the flu (537.4 per 100,000).

PNEUMONIA

Among communicable conditions, pneumonia generally had a high hospitalization rate for those in the

moderately high SES communities in 2022. In the moderately high SES communities, Lakeside SRA residents had the highest hospitalization rate due to pneumonia (122.6 per 100,000).

URINARY TRACT INFECTION

In 2022, the hospitalization rate due to urinary tract infection was slightly higher among the moderately high SES communities than San Diego County overall. In the moderately high SES communities, Harbison Crest SRA residents had the highest rates of ED discharge and hospitalization due to urinary tract infection (779.6 per 100,000 and 178.3 per 100,000, respectively).

INJURY

In the moderately high SES communities, the highest injury-related death rates were due to falls and poisoning, with rates higher than San Diego County overall in 2022. Among residents in the moderately high SES communities, falls, motor vehicle injuries, and traumatic brain injury had the highest injury-related ED discharge rates, while falls, hip fractures, and poisoning had the highest injury-related hospitalization rates. The ED discharge rates due to motor vehicle injuries and traumatic brain injury were higher among residents in the moderately high SES communities compared to San Diego County overall.

FALLS

Among moderately high SES communities, falls generally had high death, ED discharge, and hospitalization rates among injury conditions in 2022. Elliott-Navajo SRA had the highest death rate (21.8 per

100,000) among the moderately high SES communities and compared to all other SRAs in other SES communities. Additionally, in the moderately high SES communities, Harbison Crest SRA residents had the highest rates of ED discharge and hospitalization (2,649.1 per 100,000 and 569.5 per 100,000).

HIP FRACTURES

Among injury conditions, hip fractures generally had a high hospitalization rate among moderately high SES communities in 2022. Elliott-Navajo SRA had the highest hospitalization rate due to hip fractures among those in moderately high SES communities (91.7 per 100,000).

MOTOR VEHICLE INJURIES

For those in the moderately high SES communities, motor vehicle injuries generally had a high ED discharge rate among injury conditions in 2022. Among the moderately high SES communities, Laguna-Pine Valley SRA had the highest ED discharge rate due to motor vehicle injuries (976.9 per 100,000).

POISONING

In 2022, poisoning generally had high rates of injury-related death and hospitalization in the moderately high SES communities. Among the moderately high SES communities, Peninsula SRA had the highest death rate and Harbison Crest SRA had the highest hospitalization rate due to poisoning (37.7 per 100,000 and 127.9 per 100,000, respectively).

TRAUMATIC BRAIN INJURY

Among injury conditions, traumatic brain injury generally had a high ED discharge rate among those in the moderately high SES communities, with the highest ED discharge rate in the moderately high SES community of Laguna-Pine Valley SRA in 2022 (375.0 per 100,000).

BEHAVIORAL HEALTH

Among behavioral health conditions, alcohol-related disorders, all opioid overdoses, and suicide had the highest death rates among those in the moderately high SES communities in 2022. Compared to San Diego County overall, the death rates due to alcohol-related disorders and suicide were higher among residents in the moderately high SES communities. Among residents in the moderately high SES communities, the highest behavioral health-related ED discharge rates were due to alcohol-related disorders, anxiety and fear-related disorders, and suicide attempt/ideation/intentional self-harm while the leading behavioral health-related hospitalization rates were due to alcohol-related disorders, all opioid overdoses, and suicide attempt/ideation/intentional self-harm. The ED discharge rate due to suicide attempt/ideation/intentional self-harm and hospitalization rates due to alcohol-related disorders and suicide attempt/ideation/intentional self-harm were higher among those in the moderately high SES communities compared to San Diego County overall.

ALCOHOL-RELATED DISORDERS

Compared to those in other SES communities, residents in the moderately high SES communities had the highest death rate due to alcohol-related disorders in 2022. Peninsula SRA had the highest death rate (34.6 per 100,000), Harbison Crest had the highest ED discharge rate (346.8 per 100,000), and Lakeside SRA had the highest hospitalization rate (129.8 per 100,000) due to alcohol-related disorders among those in the moderately high SES communities. Additionally, Peninsula SRA had the highest death rate and Lakeside SRA had the highest hospitalization rate due to alcohol-related disorders compared to all other SRAs in other SES communities. Furthermore, Lakeside SRA’s hospitalization rate (129.8 per 100,000) due to alcohol-related disorders was 2.1 times higher than San Diego County (62.8 per 100,000).

ALL OPIOID OVERDOSES

For those in the moderately high SES communities, all opioid overdoses generally had high rates of death and hospitalization among behavioral health conditions in 2022. Specifically, in the moderately high SES communities, Kearny Mesa SRA residents had the highest rates of death and hospitalization due to all opioid overdoses (15.2 per 100,000 and 16.8 per 100,000, respectively).

ANXIETY AND FEAR-RELATED DISORDERS

Among behavioral health conditions, anxiety and fear-related disorders generally had a high rate of ED discharge rate for those in the moderately high SES communities in 2022. Harbison Crest SRA had the highest ED discharge rate due to anxiety and fear-related disorders among those in the moderately high SES communities (277.3 per 100,000).

SUICIDE

Among behavioral health-related conditions, suicide generally had a high death rate among those in the moderately high SES communities, with the highest death rate in the moderately low SES community of Kearny Mesa SRA in 2022 (12.1 per 100,000). Additionally, among the moderately high SES communities, suicide attempt/ideation/intentional self-harm generally had high behavioral health-related rates of ED discharge and hospitalization. Specifically, in the moderately high SES communities, Kearny Mesa SRA had the highest rates of hospitalization, while Harbison Crest had the highest rate of ED discharge due to suicide attempt/ideation/intentional self-harm and compared to all other SRAs in other SES communities (25.1 per 100,000 and 407.6 per 100,000, respectively).

ALZHEIMER’S DISEASE AND RELATED DEMENTIAS (ADRD)

In 2022, the moderately high SES communities had higher rates of ED discharge and hospitalization due to

Alzheimer’s disease and related dementias (ADRD) than San Diego County overall. Among the moderately high SES communities, Santee SRA had the highest rates of death and ED discharge (109.3 per 100,000 and 40.0 per 100,000, respectively), while Kearny Mesa SRA had the highest hospitalization rate due to ADRD (20.1 per 100,000).

MATERNAL AND CHILD HEALTH

In 2022, residents in the moderately high SES communities overall had slightly higher percentage of mothers receiving early prenatal care and slightly lower percentage of newborns with a low birth weight compared to San Diego County overall. The percentage of preterm births among moderately high SES communities was comparable to San Diego County overall.

EARLY PRENATAL CARE

Compared to San Diego County overall (86.7%), the moderately high SES communities had a slightly higher percentage of mothers receiving prenatal care in 2022. However, among the moderately high SES communities, Laguna-Pine Valley SRA had a lower percentage of mothers receiving early prenatal care than San Diego County and the lowest percentage of mothers receiving early prenatal care in the moderately high SES communities at 77.5%.

PRETERM BIRTHS

Although the percentage of preterm births was comparable to San Diego County, the moderately high SES community of Lakeside SRA had a higher percentage of preterm births (11.1%) than San Diego County (8.9%), and the highest among the moderately high SES communities in 2022.

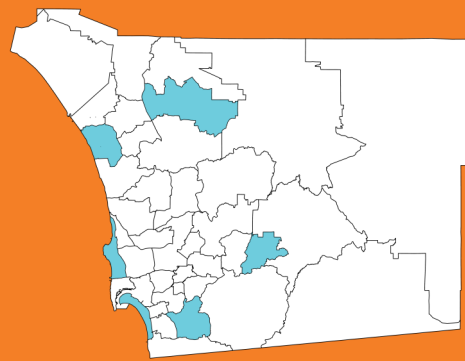
LOW BIRTH WEIGHT

In 2022, the moderately high SES communities had a slightly lower percentage of newborns with a low birth

weight compared to San Diego County overall in 2022. However, within the moderately high SES communities, Elliott-Navajo SRA residents had the highest percentage of newborns with a low birth weight (8.2%), which was also higher than San Diego County overall (7.0%).



HIGH SOCIOECONOMIC STATUS



NON-COMMUNICABLE (CHRONIC) DISEASES

In 2022, the highest rates of non-communicable (chronic) disease death among the high SES communities were due to overall cancer, overall heart disease, and stroke while the highest non-communicable (chronic) disease rates of ED discharge were due to asthma, overall heart disease, and overall hypertensive diseases. Compared to San Diego County overall, the death rate due to stroke was higher among those in the high SES communities. Among non-communicable (chronic) conditions, the leading hospitalization rates were due to overall cancer, overall heart disease, and overall hypertensive diseases for residents in the high SES communities.

ASTHMA

For those in the high SES communities, asthma generally had a high non-communicable (chronic) disease rate of ED discharge in 2022. Among the high SES communities, Alpine SRA residents had the highest ED discharge rate due to asthma (230.0 per 100,000).

OVERALL CANCER

Overall cancer generally had high non-communicable (chronic) disease rates of death and hospitalization for residents living in the high SES communities in 2022. Among those in the high SES communities, Alpine SRA had the highest rates of death and hospitalization due to overall cancer (195.7 per 100,000 and 357.2 per 100,000, respectively).

OVERALL HEART DISEASE

Among non-communicable (chronic) conditions, overall

heart disease generally had rates of high death, ED discharge, and hospitalization among those in the high SES communities in 2022. In the high SES communities, Alpine SRA residents had the highest rates of death and ED discharge (184.8 per 100,000 and 2,041.8 per 100,000, respectively), while Valley Center SRA had the highest rate of hospitalization due to overall heart disease (1,186.8 per 100,000).

OVERALL HYPERTENSIVE DISEASES

Overall hypertensive diseases generally had high rates of non-communicable (chronic) disease ED discharge and hospitalization among the high SES communities in 2022. In the high SES communities, Sweetwater SRA residents had the highest ED discharge rate, while Alpine SRA had the highest hospitalization rate due to overall hypertensive diseases (362.6 per 100,000 and 354.1 per 100,000, respectively).

STROKE

Among non-communicable conditions, stroke generally had a high death rate among those in the high SES communities in 2022. Coronado SRA had the highest death rate due to stroke (89.8 per 100,000) among those living in the high SES communities and compared to all other SRAs in other SES communities.

COMMUNICABLE (INFECTIOUS) DISEASES

Among communicable (infectious) conditions, the highest death rate was due to COVID-19, the leading ED discharge rates were due to COVID-19, urinary tract infection, and flu, while the highest hospitalization rates were due to COVID-19, pneumonia, and urinary

tract infection for residents in the high SES communities in 2022. Compared to San Diego County overall, the ED discharge rate due to pneumonia was higher among the high SES communities. Additionally, the hospitalization rates due to pneumonia and urinary tract infection were higher among the high SES communities than San Diego County overall.

COVID-19

In 2022, COVID-19 had the highest communicable (infectious) death, ED discharge, and hospitalization rates for residents in the high SES communities. Specifically, Coastal SRA had the highest death rate (31.8 per 100,000), Sweetwater SRA had the highest ED discharge rate (1,268.2 per 100,000), and Valley Center SRA had the highest hospitalization rate (235.3 per 100,000). Further, the ED discharge rate in Sweetwater SRA and the hospitalization rate in Valley Center SRA were higher than San Diego County overall.

FLU

In 2022, among communicable conditions, flu generally had a high ED discharge rate among those in the high SES communities. Among the high SES communities, Sweetwater SRA residents had the highest ED discharge rate due to the flu (359.7 per 100,000).

PNEUMONIA

For the high SES communities, pneumonia generally had a high communicable (infectious) disease rate of hospitalization in 2022. Coronado SRA had the highest hospitalization rate (143.8 per 100,000) due to pneumonia among those in the high SES communities

and compared to all other SRAs in other SES communities.

URINARY TRACT INFECTION

Urinary tract infection generally had high communicable (infectious) disease rates of ED discharge and hospitalization among the high SES communities in 2022. Among those in the high SES communities, Alpine SRA had the highest ED discharge rate (677.6 per 100,000) and Coronado SRA had the highest hospitalization rate (179.8 per 100,000) due to urinary tract infection in 2022.

INJURY

Among injury conditions, falls and poisoning had the highest death rates, while falls, motor vehicle injuries, and traumatic brain injury had the highest ED discharge rates in the high SES communities in 2022. Compared to San Diego County overall, the death rate due to falls and the ED discharge rate due to traumatic brain injury was higher among residents in the high SES communities. Additionally, falls, hip fractures, and motor vehicle injuries were the leading hospitalization rates among those in the high SES communities. Moreover, hospitalization rates due to falls and hip fractures were higher in the high SES communities compared to San Diego County overall.

FALLS

Among injury conditions, falls generally had high rates of death, ED discharge, and hospitalization among those in the high SES communities in 2022. Specifically, among those in the high SES communities, Carlsbad

SRA had the highest death rate (18.5 per 100,000), Coronado SRA had the highest ED discharge rate (2,512.6 per 100,000), and Alpine SRA had the highest hospitalization rate due to falls (555.2 per 100,000).

HIP FRACTURES

Compared to those in other SES communities, residents in the high SES communities had the highest hospitalization rate due to hip fractures in 2022. Alpine SRA had the highest hospitalization rate due to hip fractures (150.5 per 100,000) among those in the high SES communities and compared to all other SRAs in other SES communities.

MOTOR VEHICLE INJURIES

Among injury conditions, motor vehicle injuries generally had high ED discharge and hospitalization rates for those in the high SES communities in 2022. Valley Center SRA had the highest ED discharge and hospitalization rates due to motor vehicle injuries among residents in the high SES communities (703.6 per 100,000 and 124.1 per 100,000, respectively).

POISONING

In the high SES communities, poisoning generally had a high injury-related death rate in 2022. Among residents in the high SES communities, Coastal SRA had the highest death rate due to poisoning (28.0 per 100,000).

TRAUMATIC BRAIN INJURY

In 2022, among injury conditions, traumatic brain injury generally had a high ED discharge rate for residents in the high SES communities. Alpine SRA had the highest ED discharge rate (273.8 per 100,000) due to traumatic brain injury among those in the high SES communities.

BEHAVIORAL HEALTH

Among residents in the high SES communities, all opioid overdoses had the highest behavioral health-related death rate, while alcohol-related disorders,

anxiety and fear-related disorders, and suicide attempt/ideation/intentional self-harm were the leading behavioral health-related ED discharge rates in 2022. Additionally, alcohol-related disorders, all opioid overdoses, and suicide attempt/ideation/intentional self-harm were the highest behavioral health-related hospitalization rates in the high SES communities.

ALCOHOL-RELATED DISORDERS

In the high SES communities, alcohol-related disorders had the highest rates of ED discharge and hospitalization among behavioral health conditions in 2022. Specifically, among the high SES communities, Coastal SRA had the highest rate of ED discharge and Carlsbad SRA had the highest rate of hospitalization due to alcohol-related disorders (329.8 per 100,000 and 68.1 per 100,000, respectively).

ALL OPIOID OVERDOSES

For those in the high SES communities, all opioid overdoses generally had high behavioral health-related rates of death and hospitalization in 2022. Among the high SES communities, Sweetwater SRA had the highest rates of death and hospitalization due to all opioid overdoses (15.5 per 100,000 and 13.7 per 100,000).

ANXIETY AND FEAR-RELATED DISORDERS

In 2022, anxiety and fear-related disorders generally had a high behavioral health-related ED discharge rate among behavioral health conditions in the high SES communities. Specifically, Alpine SRA had the highest ED discharge rate due to anxiety and fear-related disorders among residents in the high SES communities (295.2 per 100,000).

SUICIDE

Among behavioral health conditions, suicide attempt/ideation/intentional self-harm generally had high ED discharge and hospitalization rates for residents in the high SES communities in 2022. Among those in the

high SES communities, Alpine SRA had the highest ED discharge rate and Carlsbad SRA had the highest hospitalization rate due to suicide attempt/ideation/intentional self-harm (307.5 per 100,000 and 21.4 per 100,000, respectively).

ALZHEIMER’S DISEASE AND RELATED DEMENTIAS (ADRD)

Compared to those in other SES communities, those in the high SES communities had the highest death rate due to Alzheimer’s disease and related dementias (ADRD) in 2022. Coronado SRA had the highest death rate (166.2 per 100,000) due to ADRD among those in the high SES communities and compared to all other SRAs in other SES communities, with a death rate nearly twice as that for San Diego County overall (84.7 per 100,000).

PARKINSON’S DISEASE

Those in the high SES communities had the highest death rate due to Parkinson’s disease compared to those in other SES communities in 2022. Carlsbad SRA had the highest death rate (24.6 per 100,000) due to Parkinson’s disease among those in the high SES communities and compared to all other SRAs in other SES communities, with a death rate nearly twice as that for San Diego County overall (12.6 per 100,000).

MATERNAL AND CHILD HEALTH

Compared to San Diego County overall, residents in the high SES communities overall had a higher percentage of mothers receiving early prenatal care and a slightly lower percentage of newborns with a low birth weight or born preterm in 2022.

EARLY PRENATAL CARE

Overall, the high SES communities had a higher percentage of mothers receiving prenatal care than San Diego County overall in 2022. Among the high SES communities, Coronado SRA had the lowest percentage

of mothers receiving early prenatal care (84.2%), however, Coronado SRA had a higher percentage of mothers receiving early prenatal care than San Diego County overall (86.7%).

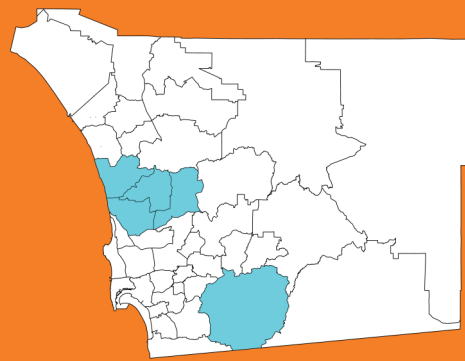
PRETERM BIRTHS

In 2022, residents in the high SES communities had a lower percentage of preterm births than San Diego County overall. Among the high SES communities, Sweetwater SRA had the highest percentage of preterm births (9.3%), however, Sweetwater SRA had a lower percentage of preterm births than San Diego County overall (8.9%).

LOW BIRTH WEIGHT

Compared to San Diego County overall, the high SES communities had a slightly lower percentage of newborns with a low birth weight in 2022. In the high SES communities, Sweetwater SRA residents had the highest percentage of newborns with a low birth weight (7.6%), however, compared to San Diego County overall (7.0%), Sweetwater SRA had a lower percentage of newborns with a low birth weight.

HIGHEST SOCIOECONOMIC STATUS



NON-COMMUNICABLE (CHRONIC) DISEASES

Chronic kidney disease, overall cancer, and overall heart disease had the highest non-communicable (chronic) disease rates of death among those in the highest SES communities in 2022. Among non-communicable (chronic) conditions, asthma, overall heart disease, and overall hypertensive diseases had the leading ED discharge rates, while overall cancer, overall heart disease, and overall hypertensive diseases had the highest hospitalization rates in the highest SES communities.

ASTHMA

For those in the highest SES communities, asthma generally had a high rate of ED discharge among non-communicable (chronic) conditions in 2022. Among the highest SES communities, Jamul SRA residents had the highest ED discharge rate due to asthma (192.2 per 100,000).

CHRONIC KIDNEY DISEASE

In 2022, among non-communicable (chronic) conditions, chronic kidney disease (CKD) generally had a high death rate among those in the highest SES communities, with the highest death rate in the highest SES community of Poway SRA (56.2 per 100,000).

OVERALL CANCER

Overall cancer generally had high non-communicable (chronic) disease rates of death and hospitalization among the highest SES communities in 2022. Among residents in the highest SES communities, Jamul SRA had the highest death rate, while San Dieguito SRA had

the highest hospitalization rate due to overall cancer (203.7 per 100,000 and 283.7 per 100,000, respectively).

OVERALL HEART DISEASE

In 2022, among those in the highest SES communities, overall heart disease generally had high non-communicable (chronic) disease rates of death, ED discharge, and hospitalization. Among the highest SES communities, Jamul SRA residents had the highest rates of death, ED discharge, and hospitalization due to overall heart disease (203.6 per 100,000, 1,945.0 per 100,000, and 1,199.4 per 100,000, respectively).

OVERALL HYPERTENSIVE DISEASES

For residents in the highest SES communities, overall hypertensive diseases generally had high non-communicable (chronic) disease rates of ED discharge and hospitalization in 2022. Specifically, among the highest SES, Jamul SRA had the highest rates of ED discharge and hospitalization due to overall hypertensive diseases (340.9 per 100,000 and 325.6 per 100,000, respectively).

COMMUNICABLE (INFECTIOUS) DISEASES

In 2022, among communicable (infectious) conditions, the highest death rate was due to COVID-19, and the leading ED discharge rates were due to COVID-19, urinary tract infection, and flu. Furthermore, the highest communicable (infectious) hospitalization rates were due to COVID-19, urinary tract infection, and pneumonia for residents in the highest SES communities.

COVID-19

COVID-19 had the highest death, ED discharge, and hospitalization rates among communicable (infectious) conditions for those in the highest SES communities in 2022. Among the highest SES communities, San Dieguito SRA had the highest death rate (29.6 per 100,000), while Jamul SRA had the highest rates of ED discharge and hospitalization due to COVID-19 (1,129.5 per 100,000 and 219.3 per 100,000).

FLU

In 2022, among communicable (infectious) conditions, flu generally had a high ED discharge rate in the highest SES communities. Among the highest SES communities, Jamul SRA residents had the highest ED discharge rate due to the flu (273.4 per 100,000).

PNEUMONIA

For those in the highest SES communities, pneumonia generally had a high hospitalization rate among communicable (infectious) conditions in 2022. Among residents in the highest SES communities, Poway SRA had the highest hospitalization rate due to pneumonia (84.5 per 100,000).

URINARY TRACT INFECTION

Urinary tract infection generally had high rates of ED discharge and hospitalization for the highest SES communities in 2022. Among the highest SES communities, Jamul SRA residents had the highest rates of ED discharge and hospitalization due to urinary tract infection (618.7 per 100,000 and 118.8 per 100,000).

INJURY

Among injury conditions, poisoning was the highest death rate, while falls, motor vehicle injuries, and traumatic brain injury were the leading ED discharge rates among residents in the highest SES communities in 2022. Additionally, falls, hip fractures, and traumatic brain injury had the highest injury-related hospitalization rates for those in the highest SES communities.

FALLS

In 2022, among injury conditions, falls generally had high rates of ED discharge and hospitalization in the highest SES communities. Among those in the highest SES communities, Jamul SRA had the highest ED discharge rate, while San Dieguito SRA had the highest hospitalization rate due to falls (1,968.2 per 100,000 and 561.1 per 100,000, respectively).

HIP FRACTURES

Among residents in the highest SES communities, hip fractures generally had a high injury-related hospitalization rate in 2022. Among highest SES communities, San Dieguito SRA residents had the highest hospitalization rate due to hip fractures (94.8 per 100,000).

MOTOR VEHICLE INJURIES

Motor vehicle injuries generally had a high injury-related ED discharge rate for residents in the highest SES communities in 2022. Among the highest SES communities, Jamul SRA residents had the highest ED discharge rate due to motor vehicle injuries (655.4 per

100,000).

POISONING

In 2022, among the highest SES communities, poisoning generally had a high injury-related death rate, with the highest death rate in the highest SES community of Del Mar-Mira Mesa SRA (12.0 per 100,000).

TRAUMATIC BRAIN INJURY

For those in the highest SES, traumatic brain injury generally had high rates of ED discharge and hospitalization among injury conditions in 2022. Among residents in the highest SES communities, North San Diego SRA had the highest ED discharge rate while San Dieguito SRA had the highest hospitalization rate due to traumatic brain injury (190.9 per 100,000 and 79.0 per 100,000).

BEHAVIORAL HEALTH

Among behavioral health conditions, alcohol-related disorders, anxiety and fear-related disorders, and suicide attempt/ideation/intentional self-harm were the leading ED discharge rates among residents in the highest SES communities in 2022. Additionally, in the highest SES communities, alcohol-related disorders and suicide attempt/ideation/intentional self-harm were the highest behavioral health-related hospitalization rates. Compared to San Diego County overall, the hospitalization rate due to suicide attempt/ideation/intentional self-harm was slightly higher among residents in the highest SES communities.

ALCOHOL-RELATED DISORDERS

In 2022, among residents in the highest SES communities, alcohol-related disorders generally had high behavioral health-related rates of ED discharge and hospitalization. Among those in the highest SES communities, San Dieguito SRA had the highest rates of ED discharge and hospitalization due to alcohol-related disorders (269.4 per 100,000 and 66.7 per 100,000).

ANXIETY AND FEAR-RELATED DISORDERS

Among behavioral health conditions, anxiety and fear-related disorders generally had a high ED discharge rate in the highest SES communities in 2022. Among the highest SES communities, Jamul SRA residents had the highest ED discharge rate due to anxiety and fear-related disorders (148.3 per 100,000).

SUICIDE

In 2022, among residents in the highest SES communities, suicide attempt/ideation/intentional self-harm generally had high behavioral health-related rates of ED discharge and hospitalization. Among those in the highest SES communities, Jamul SRA had the highest ED discharge rate, while Del Mar-Mira Mesa SRA had the highest hospitalization rate due to suicide attempt/ideation/intentional self-harm (237.2 per 100,000 and 22.8 per 100,000, respectively).

ALZHEIMER’S DISEASE AND RELATED DEMENTIAS (ADRD)

In 2022, residents in the highest SES communities had the highest hospitalization rate due to Alzheimer’s disease and related dementias (ADRD) compared to those in other SES communities. Among the highest SES communities, San Dieguito SRA had the highest rates of death, ED discharge, and hospitalization due to ADRD (112.0 per 100,000, 28.8 per 100,000, and 30.0 per 100,000, respectively). Additionally, San Dieguito SRA had the highest hospitalization rate due to ADRD compared to all other SRAs in all other SES communities.

MATERNAL AND CHILD HEALTH

Compared to San Diego County overall, residents in the highest SES communities had a higher percentage of mothers receiving early prenatal care and a lower percentage of newborns with a low birth weight or born preterm in 2022.

EARLY PRENATAL CARE

Compared to those living in other SES community groups, those living in the highest SES communities had the highest percentage of mothers receiving early prenatal care in 2022. Among the highest SES communities, Jamul SRA had the lowest percentage of mothers receiving early prenatal care (86.7%), which was the same as San Diego County overall (86.7%).

PRETERM BIRTHS

Residents in the highest SES communities had the lowest percentage of preterm births compared to those living in other SES community groups in 2022. Although lower than San Diego County overall (8.9%), San Dieguito SRA residents had the highest percentage of preterm births (8.5%) among the highest SES communities.

LOW BIRTH WEIGHT

Residents living in the highest SES communities had the lowest percentage of newborns with a low birth weight compared to those living in other SES community groups in 2022. With an equivalent percentage of newborns with a low birth weight to San Diego County overall (7.0%), Del Mar-Mira Mesa SRA had the highest percentage of newborns with a low birth weight (7.0%) among the highest SES communities.

Actions to Live Well San Diego

Creating an environment that encourage residents to live healthy, safe, and thriving lives is a priority in San Diego County. *LiveWell San Diego* plans to advance the health and overall well-being of all San Diegans through a collective effort that involves residents, community and faith-based organizations, businesses, schools, law enforcement, local city and tribal jurisdictions, and the County of San Diego. *Live Well San Diego* is a framework to help achieve health equity among all residents. To learn more, visit <https://www.livewellsd.org/>.

For more local health data and statistics, visit the County of San Diego’s [Community Health Statistics Unit website](#).

NON-COMMUNICABLE (CHRONIC) DISEASES

Eliminating tobacco use, adopting active lifestyles, eating healthier diets, and decreasing excessive use of alcohol are key transformations that can reduce the burden of non-communicable (chronic) disease among San Diego County residents.¹⁸

For more information on chronic diseases, visit the County of San Diego’s [Chronic Disease and Health Equity Unit website](#).

COMMUNICABLE (INFECTIOUS) DISEASES

Taking protective measures including vaccination and avoiding close contact with sick individuals, seeking testing and early treatment, and visiting a doctor regularly are key strategies that can reduce the burden of communicable diseases among San Diegans.¹⁹

For more information on communicable diseases visit the County of San Diego’s [Epidemiology and Immunization Services Branch website](#), the [HIV, STD, and Hepatitis Branch website](#), or the [Tuberculosis Control and Refugee Health Branch website](#).

MATERNAL AND CHILD HEALTH

The health of mothers, infants, and children are key indicators of the health of the community overall. Health outcomes often reflect the health of future generations as well as emerging public health concerns.²⁰ Prevention measures such as increased nutrition, early prenatal care, as well as cessation of smoking, alcohol consumption, and illicit drug use are all key ways to improve maternal and child health.²¹

For more information on maternal and child health, visit the County of San Diego’s [Maternal, Child and Family Health Services Branch website](#).

INJURY

Of the major causes of disability and death, injuries are among the most preventable. Increased safety education, awareness of fall prevention strategies, and investing in safer communities are key ways to reduce the burden of injury among county residents.²²



BEHAVIORAL HEALTH

Seeking help for an emotional, behavioral health, or alcohol/drug problem, engaging in activities to reduce stress, avoiding social isolation, and fostering environments that reduce the stigma of behavioral health issues are major prevention strategies that can help reduce poor behavioral health outcomes among San Diegans.²³

For more information related to behavioral health, visit the County of San Diego’s [Behavioral Health Services website](#).

Appendix. Risk Factors and Prevention Strategies

NON-COMMUNICABLE (CHRONIC) DISEASE

Tobacco use, lack of physical activity, poor diet, and abuse of alcohol are leading risk factors for the development of non-communicable (chronic) disease.¹⁸

Changes in modifiable risk factors such as tobacco use, lack of physical activity, poor diet, and abuse of alcohol, as well as increased access to and utilization of medical services, are key ways to reduce the burden of noncommunicable (chronic) disease.¹⁸

What You Can Do to Reduce Your Risk of Non-Communicable (Chronic) Disease and Live Well:

- Exercise at least 150 min/week
- Avoid smoking
- Limit alcohol consumption
- Eat more fruits & vegetables
- Visit your doctor for preventive check-ups

What Your Community Can Do to Reduce the Risk of Non-Communicable (Chronic) Disease and Live Well:

- Invest in safe parks and recreational facilities
- Increase the availability and affordability of fresh produce
- Encourage healthy behaviors
- Adopt walkable communities

COMMUNICABLE DISEASE

Prevention measures against communicable diseases, such as increased condom usage, frequent testing, seeking early treatment, completing treatment regimens, and staying current with recommended age appropriate vaccinations are key ways to reduce the burden of communicable disease.¹⁹

What You Can Do to Reduce Your Risk of Communicable Disease and Live Well:

- Get all recommended age appropriate vaccinations
- Visit your doctor regularly
- Get early treatment for infections, and complete entire treatment regimens

What Your Community Can Do to Reduce the Risk of Communicable Disease and Live Well:

- Encourage education about protective measures
- Promote vaccination opportunities
- Support public health campaigns aimed at reducing disease

MATERNAL AND CHILD HEALTH

Maternal and child health outcomes are influenced by several factors including age, race/ethnicity, socioeconomic status, and a mother’s health. Specifically, lack of prenatal care, poor nutrition, alcohol and tobacco use, and lack of physical activity are major lifestyle risk factors for adverse maternal and child health outcomes.^{20,21} The health of mothers, infants, and children are key indicators of the health of a community overall. Their health outcomes often reflect the health of future generations, as well as emerging public health concerns. Therefore, engaging in healthy behaviors associated with favorable maternal and child health outcomes has the potential to positively impact the health of the county overall.²¹

What You Can Do to Reduce Your Risk of Poor Maternal and Child Health Outcomes and Live Well:

- Seek early prenatal care
- Eat a balanced diet
- Avoid smoking, alcohol consumption, or using drugs while pregnant
- Engage in physical activity

What Your Community Can Do to Reduce the Risk of Poor Maternal and Child Health Outcomes and Live Well:

- Encourage early prenatal care
- Develop lactation policies
- Provide affordable daycare options
- Encourage enrollment in nutrition assistance programs for eligible mothers and children

INJURY

Failure to use protective equipment and active restraints, mismanagement of medication, violence, and not being aware of safety hazards increase the risk of an injury.²²

What You Can Do to Reduce Your Risk of Injury and Live Well:

- Be aware of your surroundings
- Never drink and drive
- Always wear your seatbelt
- Always wear your helmet while on a bike or skateboard

What Your Community Can Do to Reduce the Risk of Injury and Live Well:

- Invest in walkable sidewalks and safe roads
- Invest in drug and alcohol treatment programs
- Make safety a priority through education

BEHAVIORAL HEALTH

Risk factors for poor behavioral health outcomes include genetics, stress, experiencing a traumatic event, and social isolation.²³

What You Can Do to Reduce Your Risk of Poor Behavioral Health Outcomes and Live Well:

- Seek help for an emotional, behavioral health, or alcohol/ drug use problem
- Seek out healthy activities to reduce stress, and stay socially connected, such as exercising or volunteering

What Your Community Can Do to Reduce the Risk of Poor Behavioral Health Outcomes and Live Well:

- Educate residents about the warning signs of behavioral health issues
- Foster environments that reduce the stigma associated with behavioral health issues



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

Appendix. Methodology

Exploring Health Disparities in San Diego County by Socioeconomic Status is part of a series of reports exploring disparities among San Diego County residents. The goal of this report was to identify health and sociodemographic disparities which could provide local agencies, organizations, groups, services, and individuals a starting point in developing solutions to improve the health and well-being of the residents of San Diego County.

The series of reports can be found in the Health Equity Reports section of www.sdhealthstatistics.com.

Disclaimer: It should be noted that these reports are not an update of the series of health equity reports published in March of 2016 and March of 2022.

DATA SOURCES

DEMOGRAPHIC DATA

In addition to identifying health disparities, demographic information and lifestyle/behavioral data on each group was provided to highlight some of the potential contributing factors to these health outcomes.

American Community Survey (ACS): Sociodemographic and economic data from the U.S. Census Bureau’s ACS 2022 5-year estimates were used (data years 2018-2022).

HEALTH OUTCOMES DATA

Health outcome data were compiled from the County Community Health Statistics Unit’s San Diego County Community Profiles document. Specifically, death, hospitalization, and emergency department discharge rates for various health outcomes were analyzed to identify health disparities within San Diego County’s populations. Emergency department and patient discharge data provided by the California Department of Health Care Access and Information (HCAI), was grouped via the Healthcare Cost and Utilization Project (H-CUP) Clinical Classification Software (CCS) groupings. H-CUP is a family of healthcare databases and related software

tools developed through a Federal-State-Industry partnership and sponsored by the Agency for Healthcare Research and Quality (AHRQ). Mortality data was provided by the California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records and Business Intelligence System (VRBIS). Mortality codes were grouped according to the National Center for Health Statistics (NCHS) ICD-10 Mortality Codebook 2e-v1, 2017. Alzheimer’s Disease and Related Dementias (ADRD) morbidity ICD-10 codes were grouped according to the Centers for Medicare & Medicaid Services Chronic Conditions Data Warehouse. Additional information on code grouping sources for health indicators, population data, and geographies are available in Community Health Statistics Data Guide and Metadata file. Maternal and child health indicators (excluding congenital anomalies or maternal complications) were from the State of California, Department of Public Health, Center for Health Statistics and Informatics, Birth Statistical Master Files and California Comprehensive Birth Files for 2022. Chlamydia, gonorrhea, and syphilis incidence data were from the STD Morbidity Surveillance Data (California Reportable Disease Information Exchange, CalREDIE) for 2022. Tuberculosis data were obtained from the County of San Diego, Health and Human Services Agency, Tuberculosis Control, Report of Verified Case of Tuberculosis Database for 2022.

OVERALL METHODS

The overall methods used to explore health disparities among San Diego County residents were the following:

- Death and medical encounter data from the Community Health Profiles was used to first, look at chronic, communicable, injury, behavioral health, and maternal and child health outcomes.
- Subsequently, the exploration of health disparities focused on 2022 only. Each section highlights the conditions and death and/or medical encounters most relevant among the subgroup of the population.
- Where relevant, differences across groups are also mentioned in the text.

For the Socioeconomic Status (SES) Report, SES was calculated using Median Household Income (MHI) as the proxy measure. The MHI was pulled for 2022 by zip codes from ESRI Community Analyst and broken into six categories using the optimal binning procedure. Based on the lower and upper limits of the bins, each subregional area (SRA) was assigned to one of the following six SES categories: lowest, low, moderately low, moderately high, high, and highest.

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