COMMUNITY HEALTH ASSESSMENT PRESENTATION: SOUTH REGION

Presented by Christopher O'Malley and Maria Peña

Presented to South Region Leadership Team

County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit

April 10th, 2023

COUNTY OF SAN DIEGO HHSA HEALTH AND HUMAN SERVICES AGENCY PUBLIC HEALTH SERVICES

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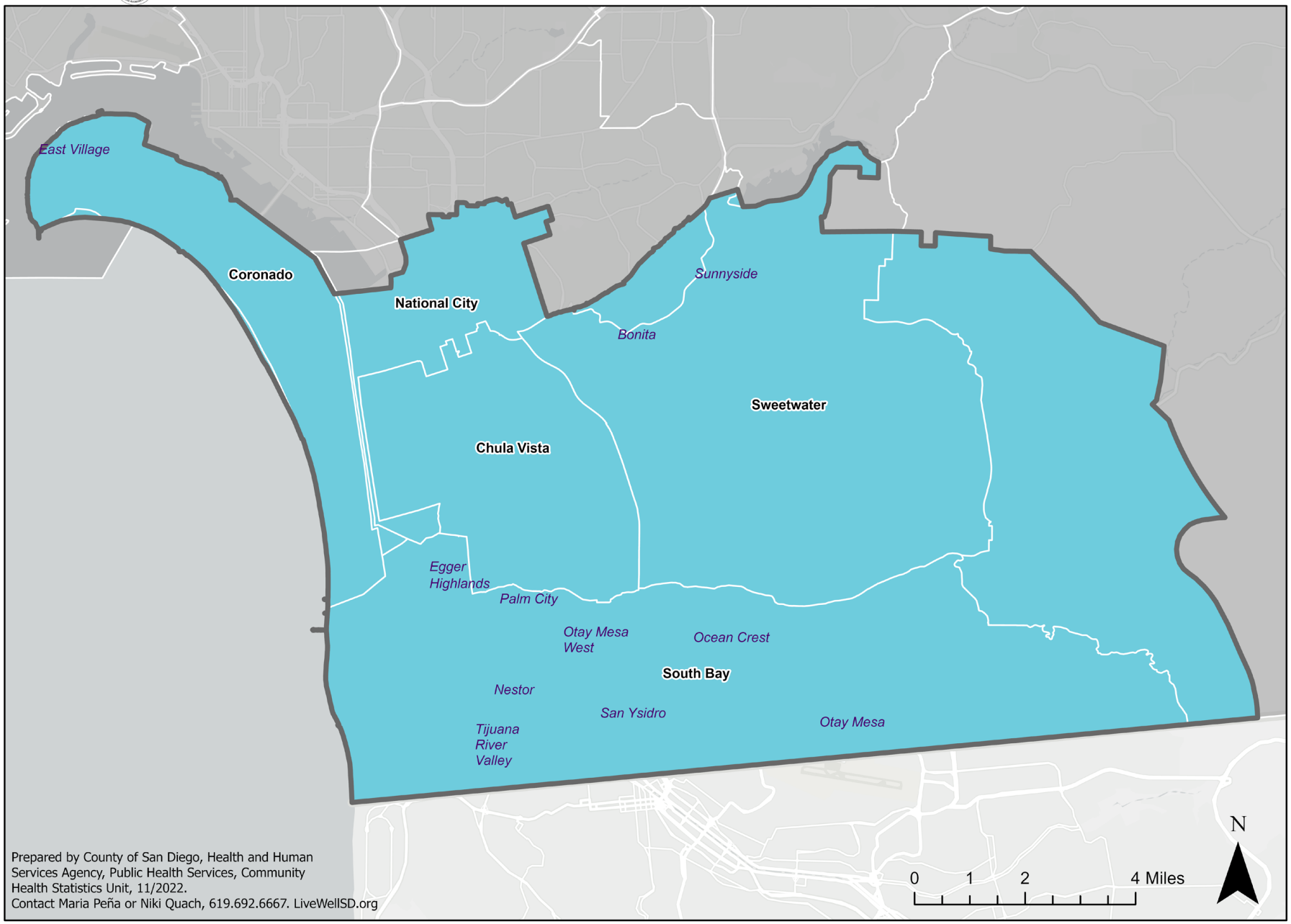
San Diego County Health and Human Services Agency
South Region and its Neighborhoods



Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 11/2022.
Contact Maria Peña or Niki Quach, 619.692.6667. LiveWellSD.org

LIVE WELL SAN DIEGO

Cities in South Region

- Chula Vista
- Coronado
- Imperial Beach
- National City
- San Diego*
- Unincorporated Area*

**Portion only*

South Region Zip Codes

- 91902
- 91910
- 91911
- 91913
- 91914
- 91915
- 91932
- 91950
- 92118
- 92135
- 92154
- 92155
- 92173

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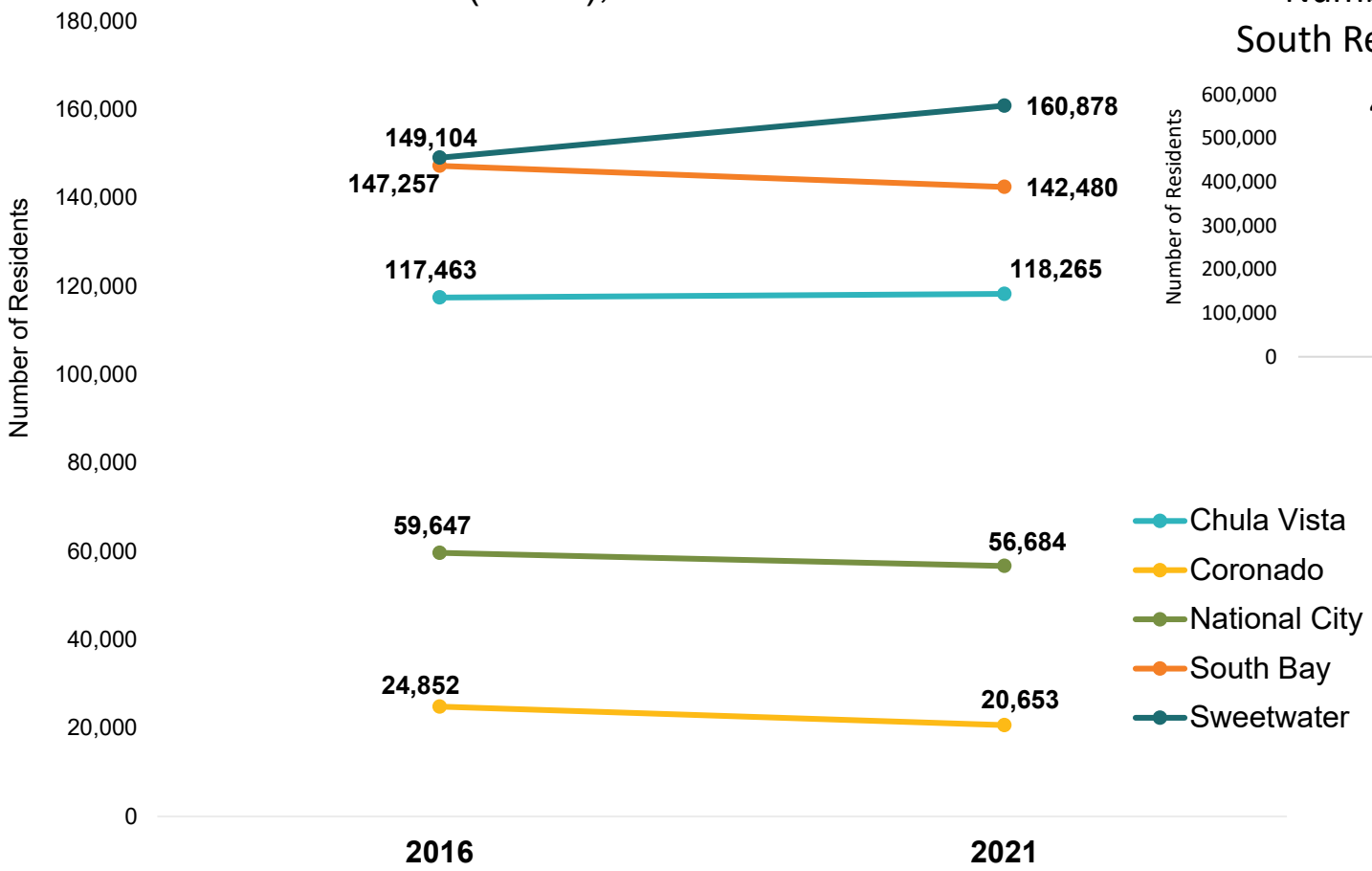
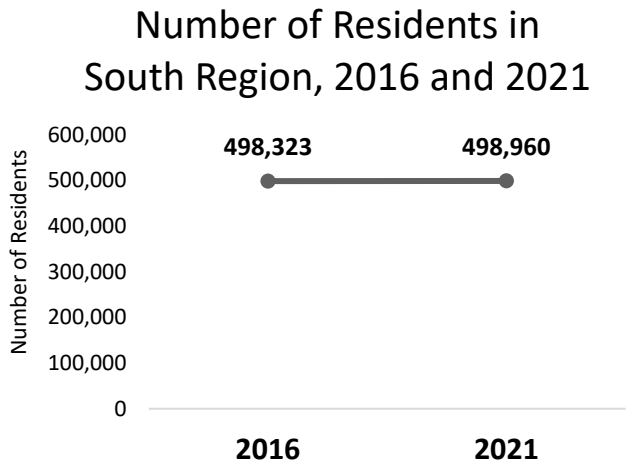
POPULATION



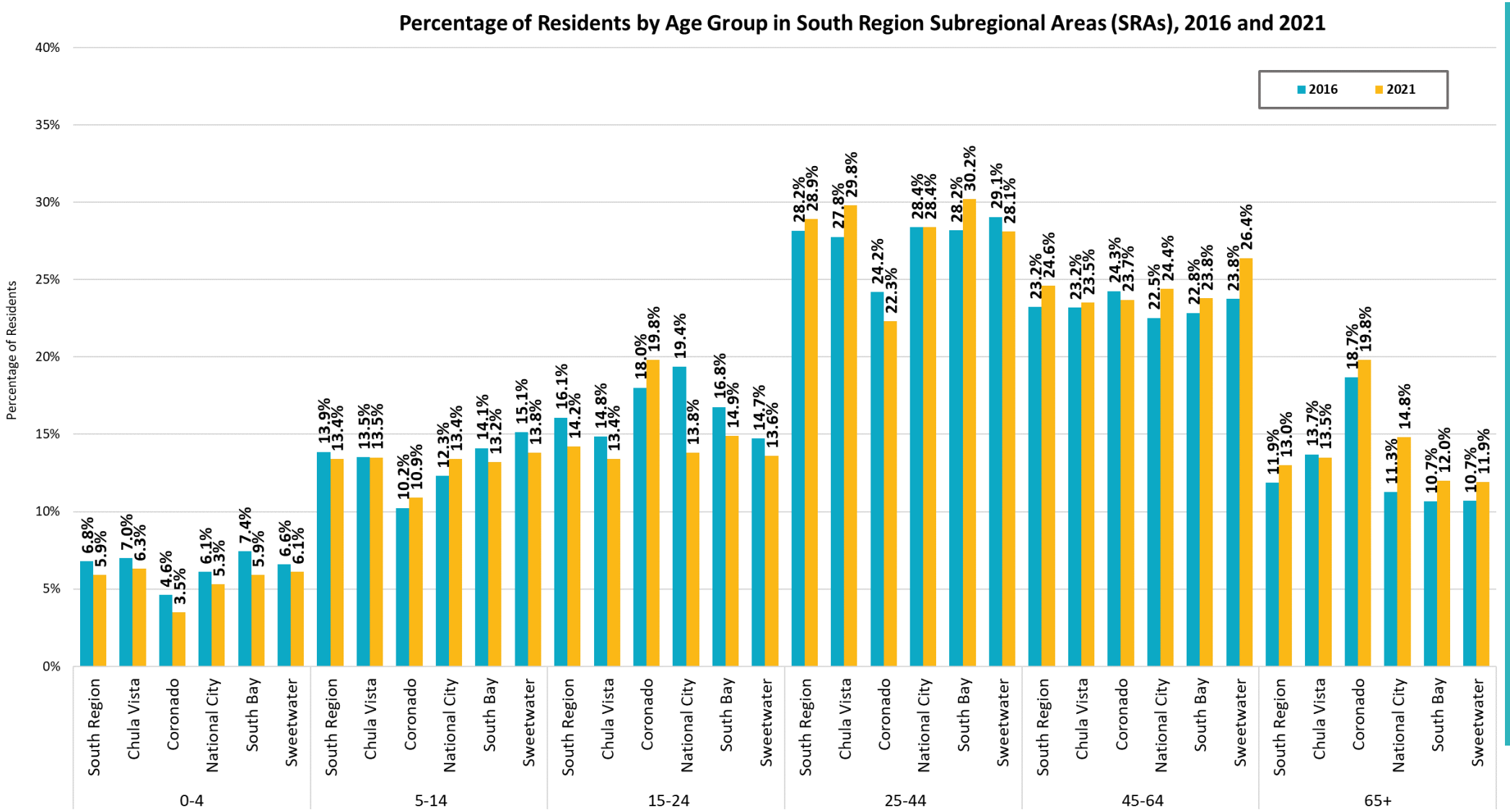


In 2021, South Region was home to 498,960 residents or 15.1% of San Diego County's population.

- Overall, the number of residents in South Region remained stable between 2016 and 2021, with an increase of 0.1%.
  - The population living in Sweetwater SRA increased by nearly 8% from 2016 to 2021.
  - Coronado, National City, and South Bay SRAs experienced a 17%, 5%, and 3% population decrease, respectively, between 2016 and 2021.

Source: U.S. Census Bureau; 2012-2016 American Community Survey 5-Year Estimates, Table B01001; 2017-2021 American Community Survey 5-Year Estimates, Table B01001.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2023.

POPULATION BY AGE



- Overall, the number of residents ages 0 to 24 decreased in South Region between 2016 and 2021, while all other age groups saw population increases.
- The South Region older adult population ages 65 years and older increased by 10% between 2016 and 2021.

Source: U.S. Census Bureau; 2012-2016 American Community Survey 5-Year Estimates, Table B01001; 2017-2021 American Community Survey 5-Year Estimates, Table B01001.
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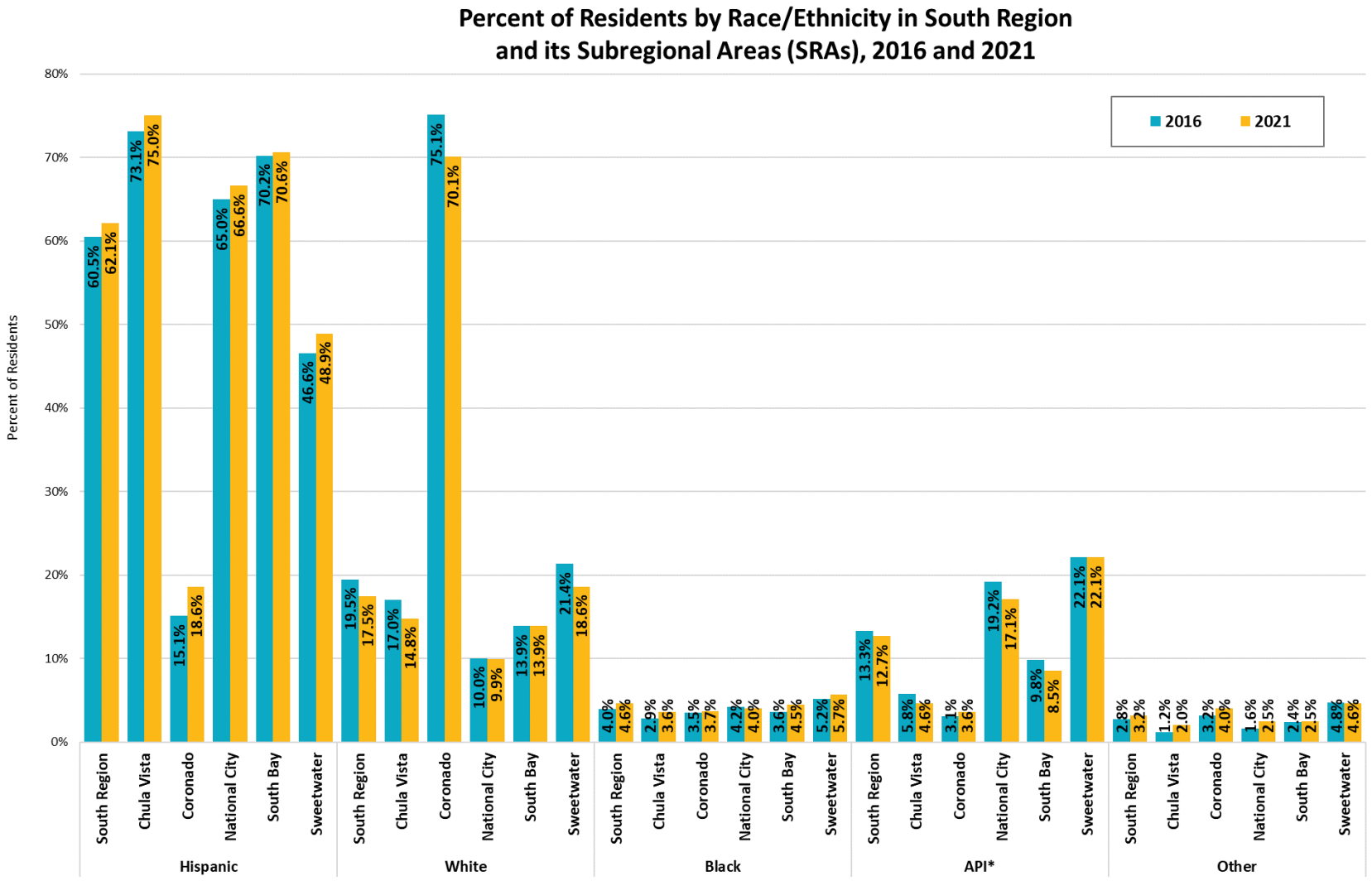
POPULATION BY RACE/ETHNICITY



In 2021, Hispanic residents made up 62% of South Region's population.

- 3 out of every 4 Chula Vista SRA residents were Hispanic in 2021.
- Coronado SRA notably had the lowest proportion of Hispanic residents in 2016 and 2021.
- Sweetwater and National City SRAs had the highest proportion of non-Hispanic Asian/Pacific Islanders in 2021.
- In 2021, Sweetwater SRA had the highest proportion of non-Hispanic Black residents in South Region.

*Asian Pacific/Islander.
Source: U.S. Census Bureau; 2012-2016 American Community Survey 5-Year Estimates, Table B03002; 2017-2021 American Community Survey 5-Year Estimates, Table B03002.
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LANGUAGE SPOKEN AT HOME*

Geography	Speak English Only	Speak a Non-English Language at Home and Speak English "very well"	Speak Spanish and English less than "very well"	Speak API** Language and English less than "very well"	Speak Other Language and English less than "very well"
South Region	**40.5%**	**38.4%**	**17.7%**	**3.1%**	**0.3%**
Chula Vista	34.9%	39.9%	23.5%	1.4%	0.2%
Coronado	84.8%	12.0%	2.0%	0.5%	0.8%
National City	28.0%	43.9%	20.4%	7.3%	0.4%
South Bay	33.3%	40.6%	23.5%	2.4%	0.3%
Sweetwater	49.6%	36.9%	9.3%	4.0%	0.3%
San Diego County	**63.3%**	**23.7%**	**8.2%**	**3.3%**	**1.6%**

- In 2021, 2 out of 5 residents aged 5 years and older (40.5%) in South Region spoke only English at home and nearly 2 out of 5 spoke a non-English language at home and spoke English “very well”.
- In South Region, Coronado SRA notably had the highest proportion of residents aged 5 years and older speaking only English at home (84.8%) in 2021 and South Bay SRA the lowest (33.3%).

**Among population 5 years and older **Asian/Pacific Islander.*
Source: U.S. Census Bureau; 2017-2021 American Community Survey 5-Year Estimates, Table DP02.
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FOOD INSECURITY

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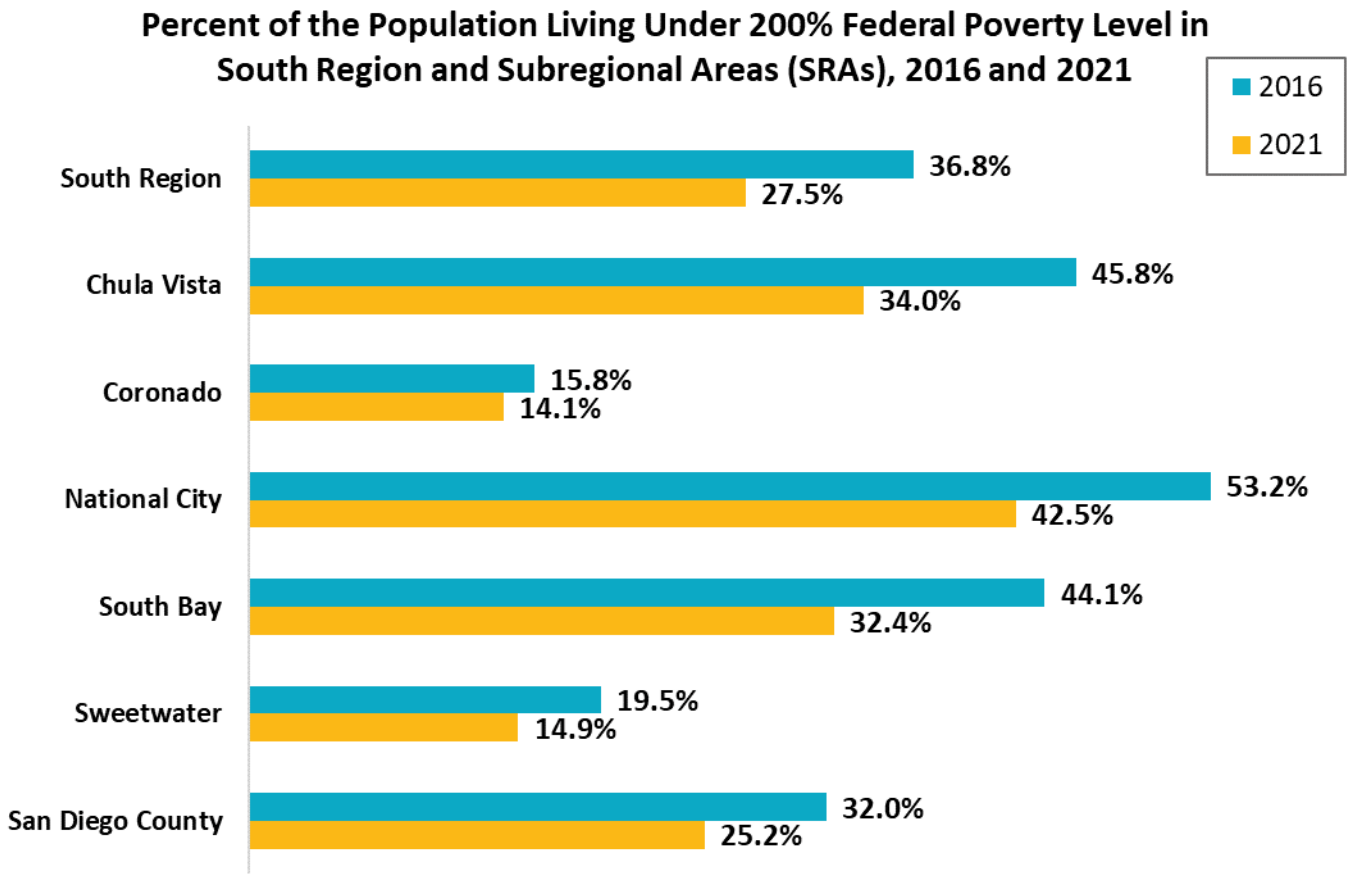
POVERTY



Between 2016 and 2021, proportion of population living below 200% FPL decreased from 36.8% to 27.5%.

- National City SRA, followed by Chula Vista and South Bay SRAs, had the highest proportions of people living under 200% FPL in 2016 and 2021.
- Coronado and Sweetwater SRAs had lower proportions of people living under 200% FPL compared to the county overall in 2016 and 2021.

Source: U.S. Census Bureau; 2012-2016 American Community Survey 5-Year Estimates, Tables B17024, DP03; 2017-2021 American Community Survey 5-Year Estimates, Tables B17024, DP03.
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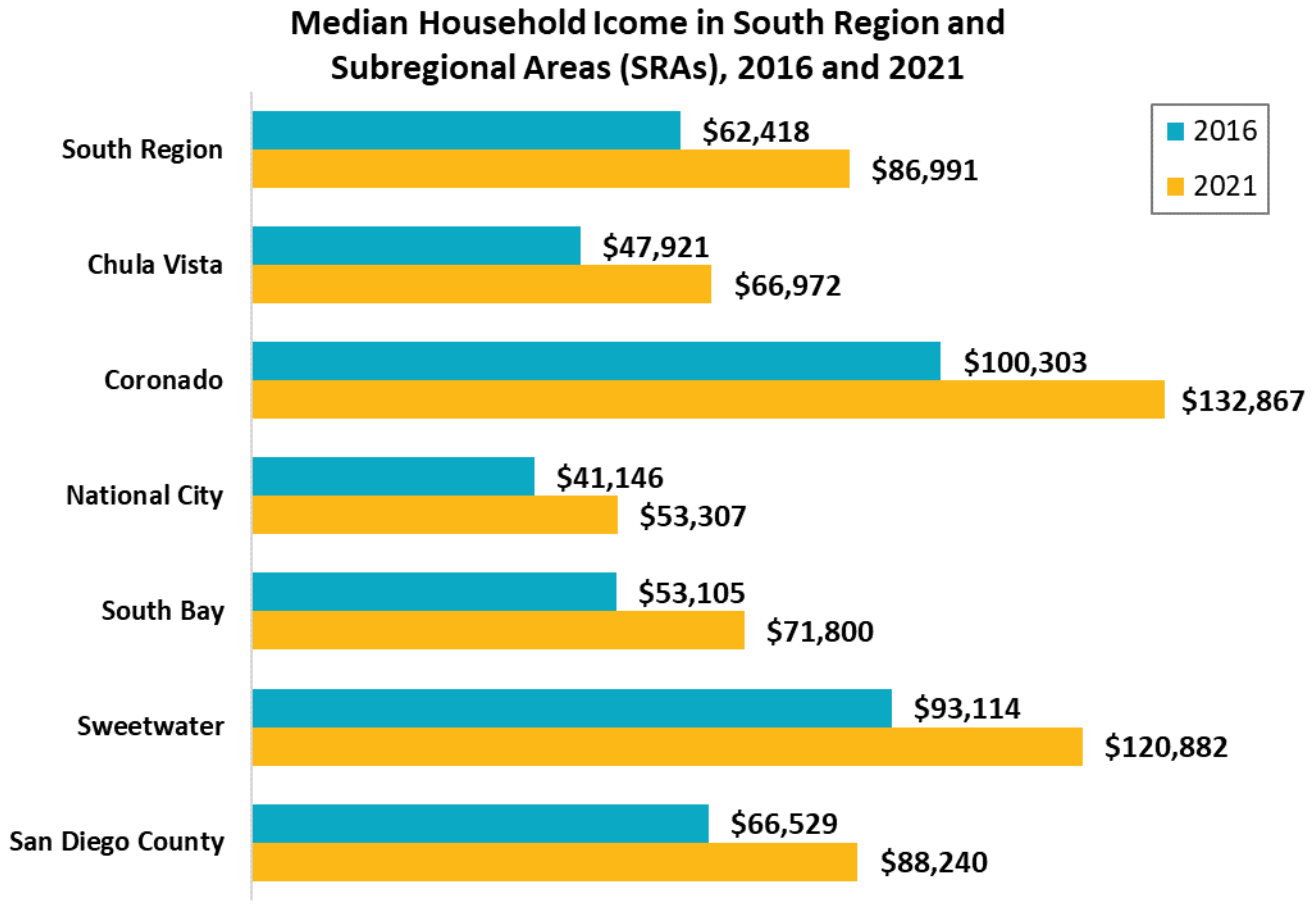
INCOME



Median Household Income

Between 2016 and 2021, the median household income in South Region increased from $62,418 in 2016 to $86,991 in 2021.

- Except for Coronado and Sweetwater SRAs, all South Region subregional areas had lower median household incomes than the county overall in 2016 and 2021.
- Coronado SRA, followed by Sweetwater SRA, had the highest median household income in 2016 and 2021.
- National City and Chula Vista SRAs had the lowest median households incomes in South Region in 2016 and 2021.

Source: U.S. Census Bureau; 2012-2016 American Community Survey 5-Year Estimates, Tables B17024, DP03; 2017-2021 American Community Survey 5-Year Estimates, Tables B17024, DP03.
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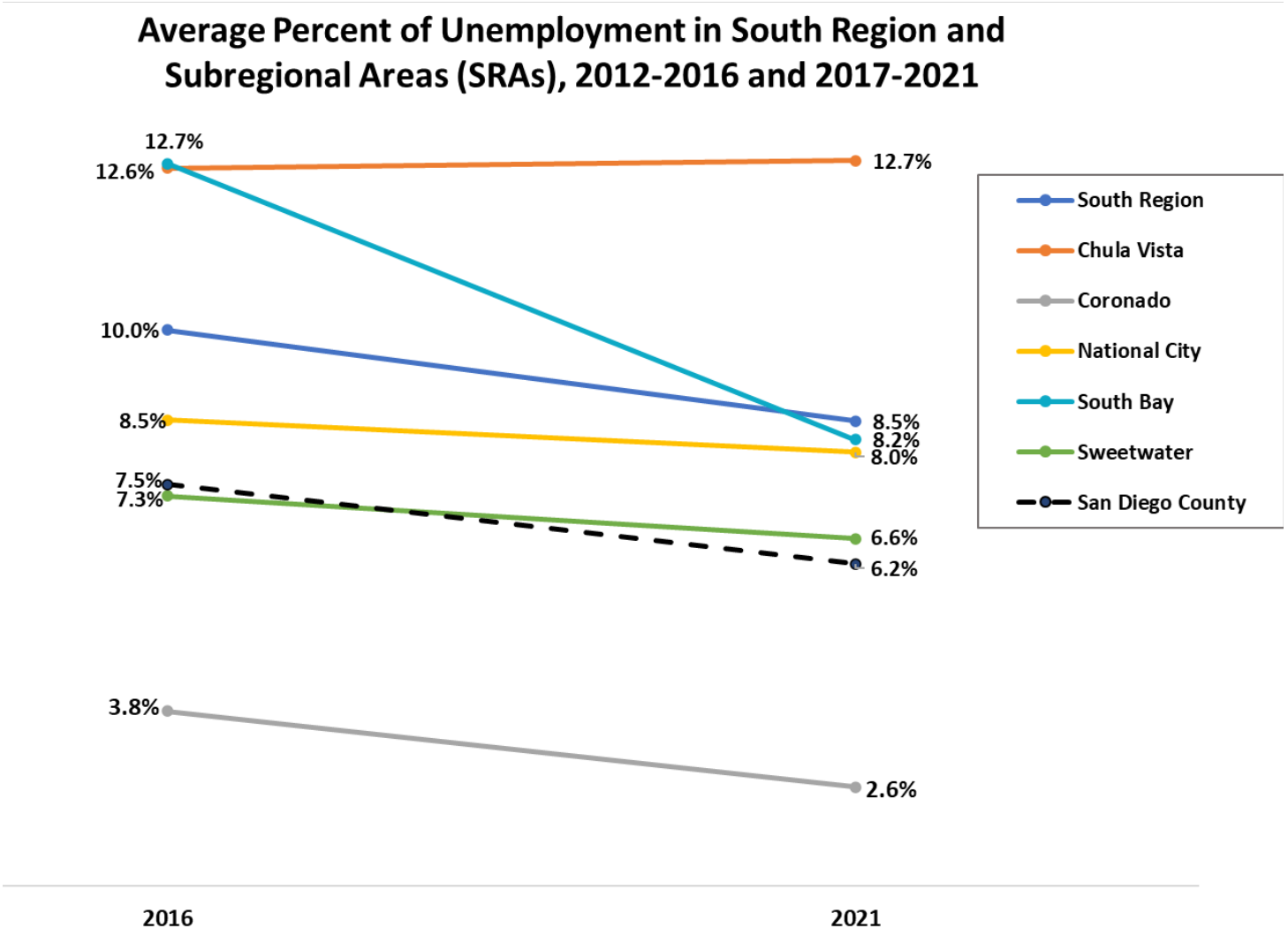
UNEMPLOYMENT

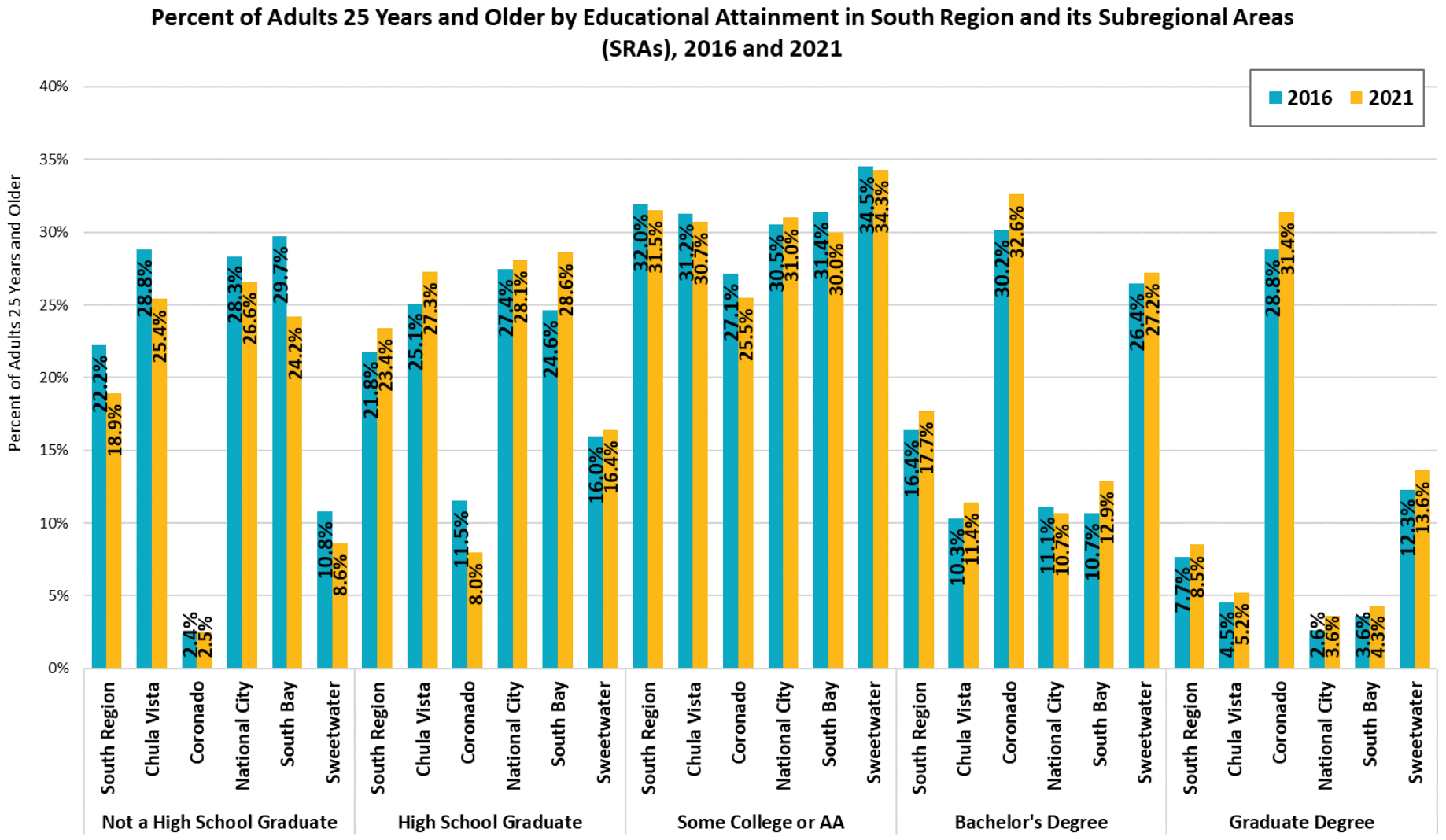


South Region had the highest percent unemployment among the HHSA Regions in 2016 and 2021.

- The percent of unemployed residents 16 years and older in South Region decreased from 10% in 2016 to 8.5% in 2021.
- Except for Coronado SRA, all South Region subregional areas had higher percent of unemployment than the county overall in 2021.
  - Among South Region communities, Chula Vista SRA had the highest percent of unemployment in 2021.
  - Between 2016 and 2021, the percent of unemployment decreased the most in South Bay SRA.

**Percent unemployed was derived from the number of unemployed persons out of the 16 year and older eligible labor force. Eligible labor force includes employed civilians, unemployed, and persons in the armed forces.*
Source: U.S. Census Bureau; 2012-2016 American Community Survey 5-Year Estimates, Table DP03; 2017-2021 American Community Survey 5-Year Estimates, Table DP03.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2023.

EDUCATIONAL ATTAINMENT



Educational attainment in South Region

- In 2021, South Region had the highest percent of adults 25 years and older without a high school diploma and the lowest percent with a bachelor's degree or higher than any other region in the county.
- Chula Vista and National City SRAs had the lowest percentage of adults 25 years and older with a bachelor's degree or higher in South Region in 2021.
- In South Region, Coronado and Sweetwater SRAs had the highest proportion of adults 25 years and older with a bachelor's degree or higher in 2016 and 2021.

Source: U.S. Census Bureau; 2012-2016 American Community Survey 5-Year Estimates, Tables DP02; 2017-2021 American Community Survey 5-Year Estimates, Tables DP02.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2023.

HOMELESSNESS

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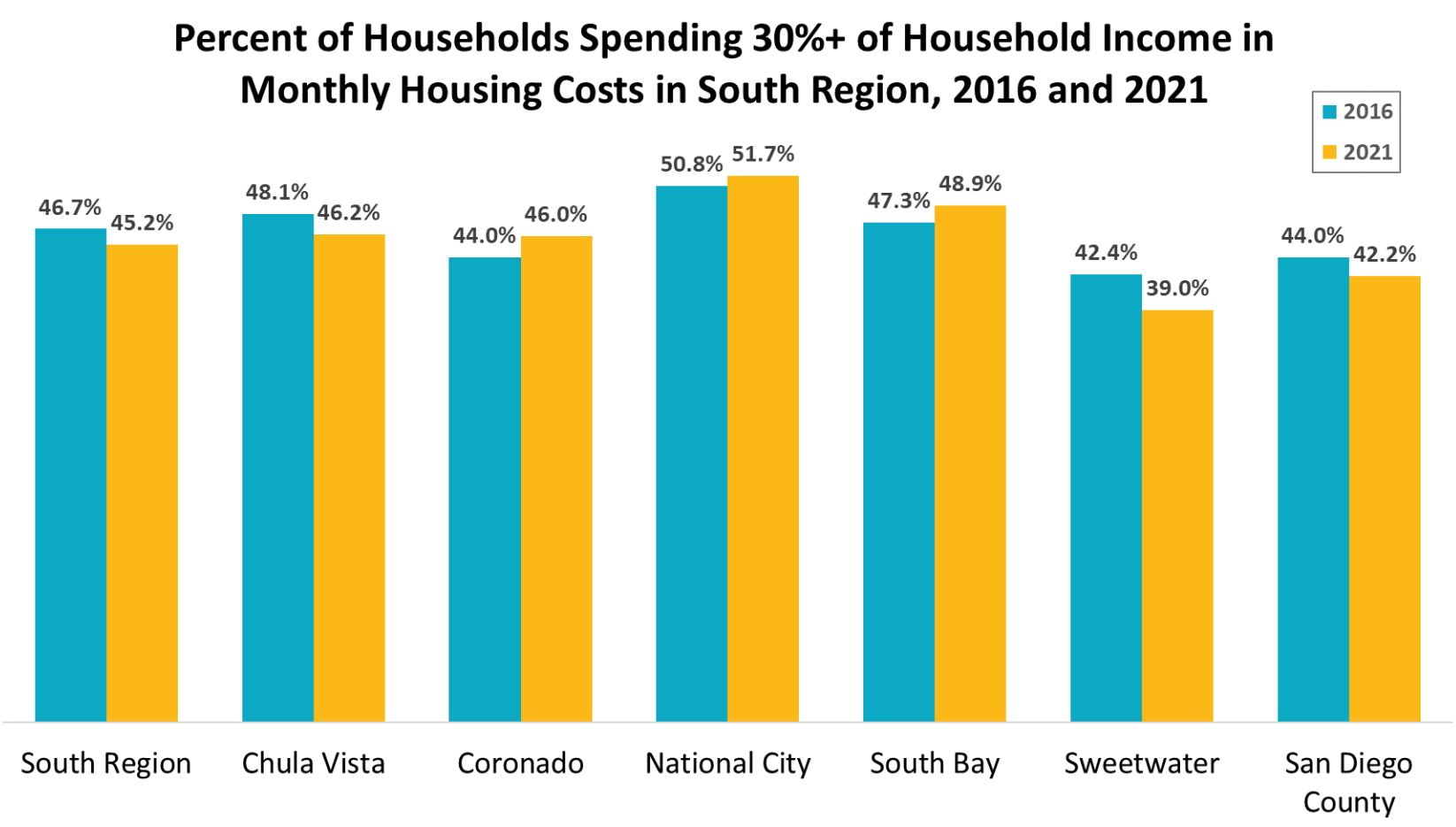
HOUSING CHARACTERISTICS

Compared to the county overall, South Region had a higher percent of households spending 30%+ of their household income in housing costs and a higher median gross rent in 2021.



Geography	Median Rent (2016)	Median Rent (2021)
South Region	$ 1,501	$ 2,004
Chula Vista	$ 1,291	$ 1,727
Coronado	$ 2,568	$ 2,936
National City	$ 1,105	$ 1,341
South Bay	$ 1,272	$ 1,778
Sweetwater	$ 2,016	$ 2,571
San Diego County	**$ 1,395**	**$ 1,842**

Geography	Median House Value (2016)	Median House Value (2021)
South Region	$ 405,178	$ 586,713
Chula Vista	$ 273,642	$ 403,288
Coronado	$ 1,324,657	$ 1,715,371
National City	$ 296,831	$ 447,667
South Bay	$ 311,608	$ 494,243
Sweetwater	$ 443,668	$ 618,137
San Diego County	**$ 454,600**	**$ 627,200**

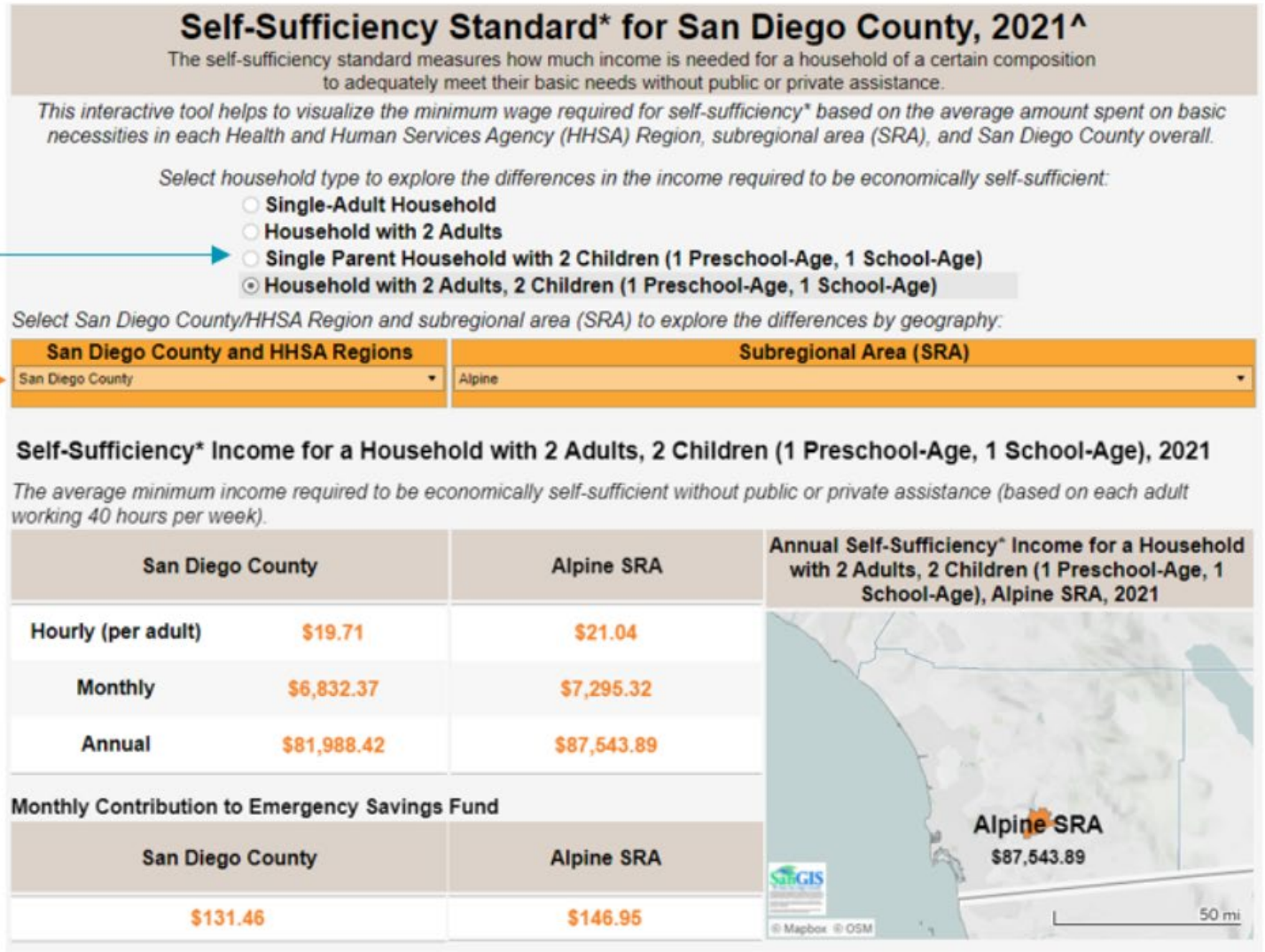
Source: U.S. Census Bureau; 2012-2016 American Community Survey 5-Year Estimates, Tables S2503, DP04; 2017-2021 American Community Survey 5-Year Estimates, Tables S2503, DP04.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2023.

SELF-SUFFICIENCY

- This interactive tool helps to visualize the minimum wage required for self-sufficiency* based on the average amount spent on necessities in each Health and Human Services Agency (HHSA) region, subregional area (SRA), and San Diego County overall.
- Select household type to explore the differences in the income required to be economically self-sufficient.

Select household type

Use the drop-down filters to choose geography



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

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

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

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

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

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

San Diego County and HHSA Regions	Subregional Area (SRA)
San Diego County	Alpine

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

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

	San Diego County	Alpine SRA
Hourly (per adult)	$19.71	$21.04
Monthly	$6,832.37	$7,295.32
Annual	$81,988.42	$87,543.89

Monthly Contribution to Emergency Savings Fund

San Diego County	Alpine SRA
$131.46	$146.95

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

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

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

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

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

- ○ **Single-Adult Household**
- ○ **Household with 2 Adults**
- ○ **Single-Parent Household with 2 Children (1 Preschool-Age, 1 School-Age)**
- ◉ **Household with 2 Adults, 2 Children (1 Preschool-Age, 1 School-Age)**

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

San Diego County and HHSA Regions	Subregional Area (SRA)
South Region	South Bay

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

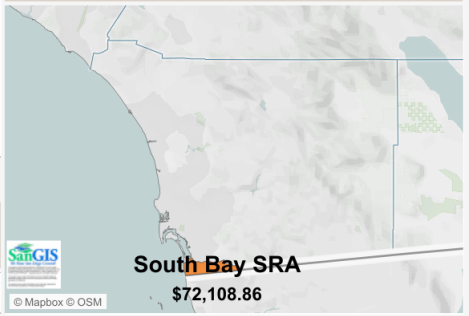
The average minimum income required to be economically self-sufficient without public or private assistance (based on each adult working 40 hours per week).

	South Region	South Bay SRA
Hourly (per adult)	$18.72	$17.33
Monthly	$6,490.04	$6,009.07
Annual	$77,880.53	$72,108.86

Monthly Contribution to Emergency Savings Fund

South Region	South Bay SRA
$120.00	$103.91

Annual Self-Sufficiency* Income for a Household with 2 Adults, 2 Children (1 Preschool-Age, 1 School-Age), South Bay SRA, 2021

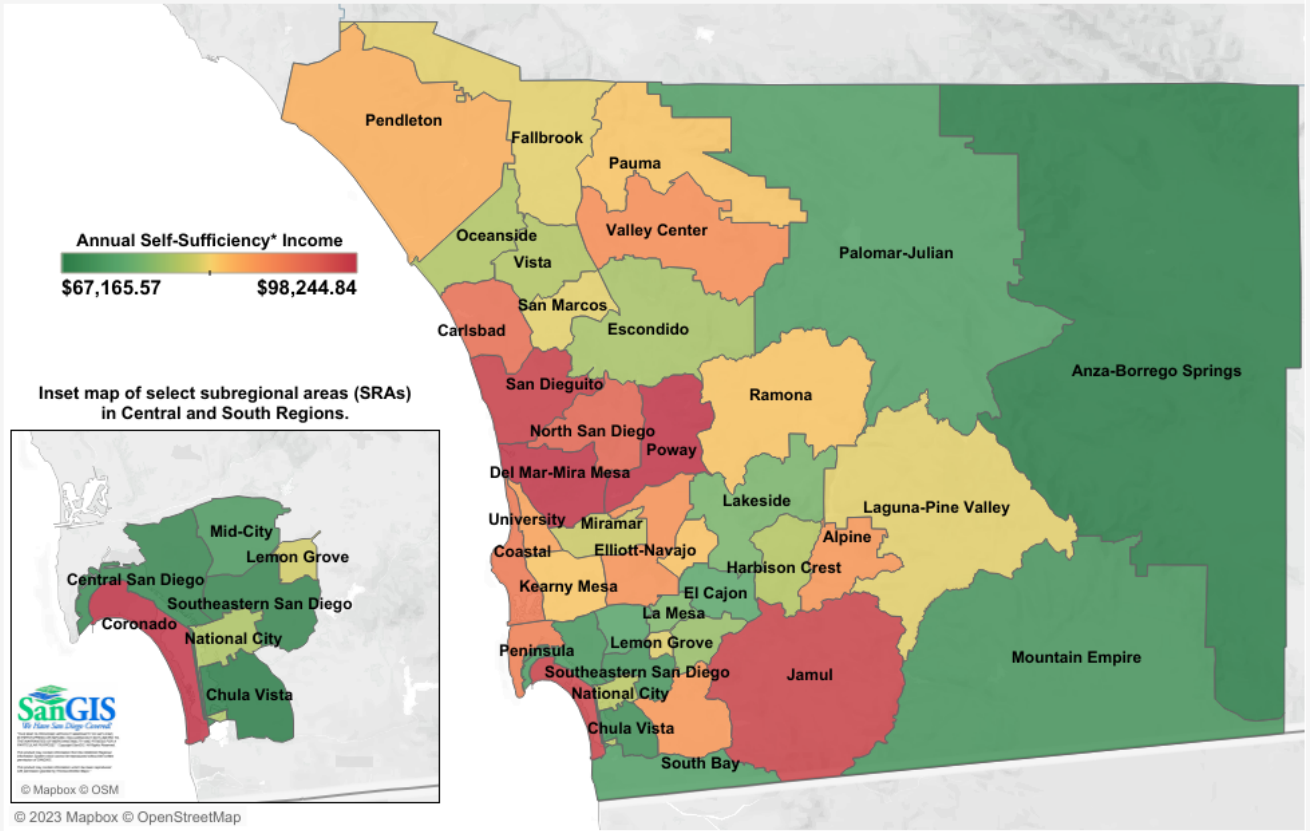


Monthly Expenses for a Household with 2 Adults, 2 Children (1 Preschool-Age, 1 School-Age), 2021

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

	South Region	South Bay SRA
Housing	$1,718.58	$1,532.72
Transportation	$1,149.75	$1,150.10
Childcare	$1,346.96	$1,226.04
Food	$926.00	$926.00
Healthcare	$491.69	$398.88
Taxes	$701.27	$647.43
Miscellaneous	$563.30	$523.37
Child Care Tax Credit	($51.66)	($51.33)
Child Tax Credit	($173.75)	($143.75)
Earned Income Tax Credit	($182.08)	($200.40)

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



*The Self-Sufficiency Standard measures how much income is needed for a household of a certain composition to adequately meet their basic needs without public or private assistance. (http://www.selfsufficiencystandard.org/). ^Estimates based on the most recent data available. See the San Diego County Self-Sufficiency Standard Brief on www.SDHealthStatistics.com for detailed information on methodology.

Sources

Household with 2 adult, 2 children; Single parent household with 2 children: The Family Needs Calculator for California 2021. Center for Women's Welfare and the Insight Center for Community Economic Development. https://insightcced.org/family-needs-calculator/. Health care expenditure: 2021 Community Analyst ESRI Medical Expenditures. Average amount spent on health care. Accessed October 2021. California 2019 CHIP (Children's Health Insurance Program) Fact Sheet. Housing: U.S. Census Bureau; 2015-2019 American Community Survey 5-Year Estimates, Table B25105. U.S. Department of Housing and Urban Development, 2021 Fair Market Rents (40th Percentile Rents), HUD's Office of Policy Development and Research (PD&R), https://www.huduser.gov/portal/datasets/fmr.html#2021_query. Child care cost: The YMCA of San Diego County. 2021 Average cost of child care in San Diego by zip code. https://www.ymcasd.org/community-support/childcare-resource-service/family-resources/choosing-child-care/cost-child-care. Accessed November 2021. Transportation cost: The Housing and Transportation Affordability Index, The Center for Neighborhood Technology (CNT). https://htaindex.cnt.org/. Accessed November 2021. Tax data: Internal Revenue Service. Individual Income Tax Statistics—2019 ZIP Code Data (SOI). https://www.irs.gov/statistics/soi-tax-stats-individual-income-tax-statistics-2019-zip-code-data-soi. Accessed October 2021.

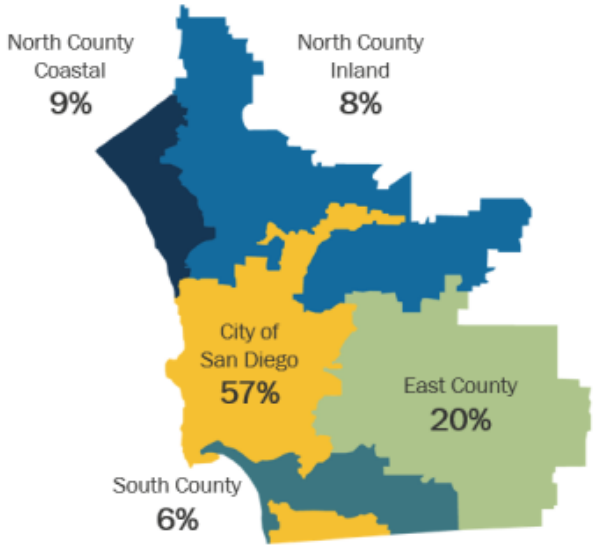
Single adult household; Household with 2 adults: The Family Needs Calculator for California 2021. Center for Women's Welfare and the Insight Center for Community Economic Development. https://insightcced.org/family-needs-calculator/. Health care expenditure: 2021 Covered California Data, 2021 Products by Zip Code. https://hbex.coveredca.com/data-research/. 2015-2019 American Community Survey 5-Year Estimates, Table S0101. Average annual dollars spent out of pocket per person on medical care in 2019, PolicyMap and Quantitative Innovations. Accessed December 2021. Housing: U.S. Department of Housing and Urban Development, 2021 Fair Market Rents (40th Percentile Rents), HUD's Office of Policy Development and Research (PD&R), https://www.huduser.gov/portal/datasets/fmr.html#2021_query. Accessed December 2021.Transportation cost: The Housing and Transportation Affordability Index, The Center for Neighborhood Technology (CNT). https://htaindex.cnt.org/. Accessed November 2021. 2015-2019 American Community Survey 5-Year Estimates, Table B19215.

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

2022 POINT-IN-TIME DATA

Region Breakdown

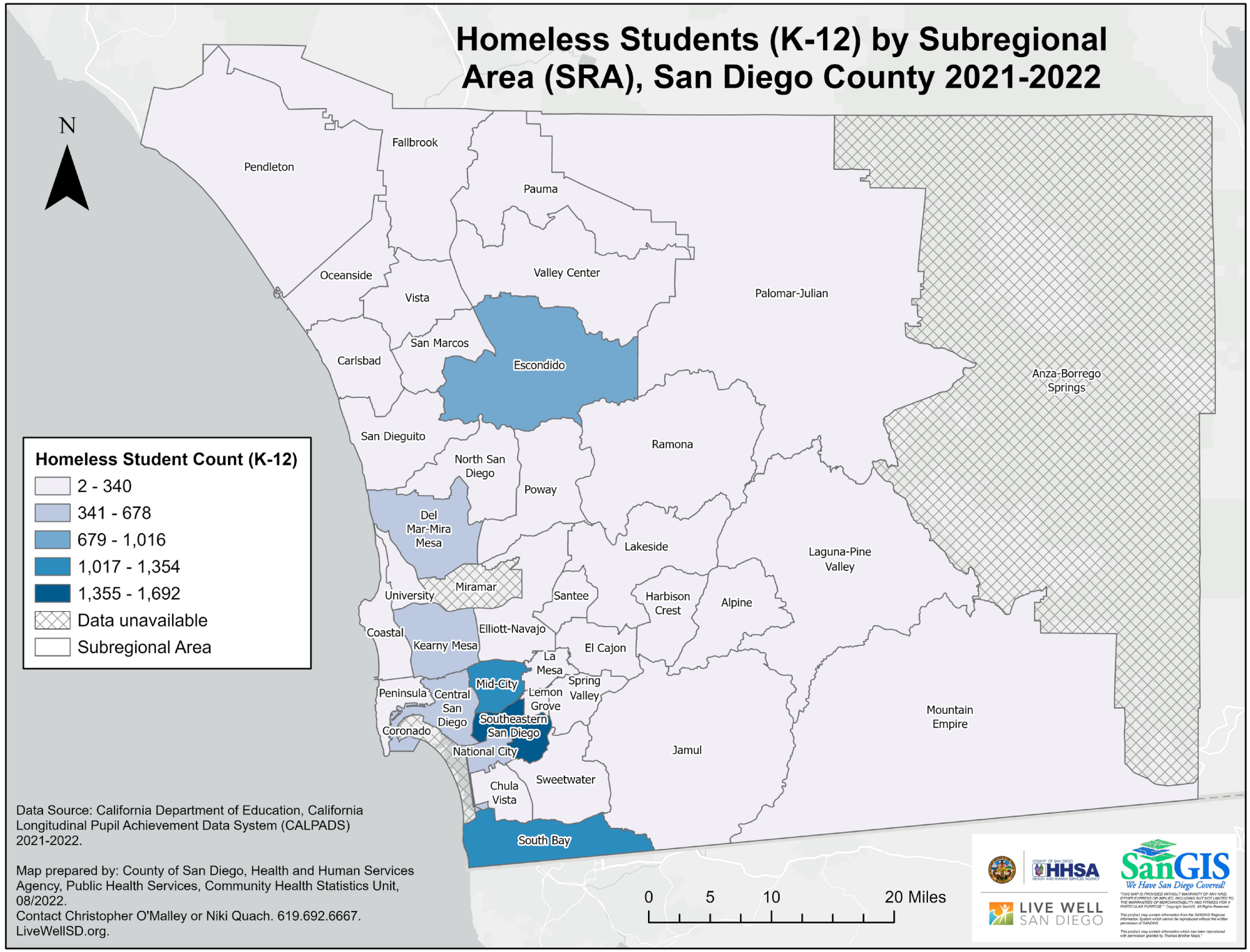
	% of the Region	Total Homeless Persons
City of San Diego	57%	4801
North County Inland	8%	697
North County Coastal	9%	745
South County	6%	493
East County	20%	1691



	Sheltered				2022 Unsheltered	2020 Unsheltered	2020-2022 Unsheltered Change
City	ES	TH	SH	Total	Total Unsheltered	Total Unsheltered	% Change
San Diego City	1,711	568	28	2,307	2494	2283	9.2%
Carlsbad	43	0	0	43	75	94	-20.2%
Chula Vista (Sweetwater)	41	62	0	103	206	212	-2.8%
Coronado	0	0	0	0	1	16	-93.8%
El Cajon	683	440	0	1,123	185	310	-40.3%
Encinitas (San Deiguito, Solana Beach & Del Mar)	25	12	0	37	76	47	61.7%
Escondido (NC Metro & Hidden Meadows)	150	14	8	172	182	264	-31.1%
Imperial Beach	0	0	0	0	25	16	56.3%
La Mesa	1	17	0	18	35	52	-32.7%
Lemon Grove	0	0	0	0	31	18	72.2%
National City	0	9	0	9	149	125	19.2%
Oceanside	78	118	0	196	318	242	31.4%
Poway	0	0	0	0	23	15	53.3%
San Marcos	0	0	0	0	12	8	50.0%
Santee	90	9	0	99	48	25	92.0%
Vista (Bonsall)	41	0	0	41	76	51	49.0%
Unincorporated	173**			173			
Alpine (Crest-Dehesa)	0	0	0	0	1	1	0.0%
Fallbrook	0	0	0	0	25	51	-51.0%
Lakeside	0	0	0	0	63	24	162.5%
Ramona	0	0	0	0	21	20	5.0%
Spring Valley (Casa de Oro)	0	0	0	0	60	97	-38.1%
TOTAL	**3,036**	**1,249**	**36**	**4,321**	**4,106**	**3,971**	

Source: Regional Taskforce for the Homeless. WeAllCount: 2022 San Diego Region. Available at: https://www.rtfhsd.org/wp-content/uploads/2022-San-Diego-Region-FINAL_05192022-1.pdf; Regional Taskforce for the Homeless. WeAllCount: 2022 San Diego Region Cities Sheltered and Unsheltered Breakdown. Available at: https://www.rtfhsd.org/wp-content/uploads/2022-San-Diego-Region-Cities-Sheltered-and-Unsheltered-Breakdown-FINAL_05182022.pdf

Homeless Students (K-12) by Subregional Area (SRA), San Diego County 2021-2022



Data Source: California Department of Education, California Longitudinal Pupil Achievement Data System (CALPADS) 2021-2022.

Map prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 08/2022.
Contact Christopher O'Malley or Niki Quach. 619.692.6667.
LiveWellSD.org.

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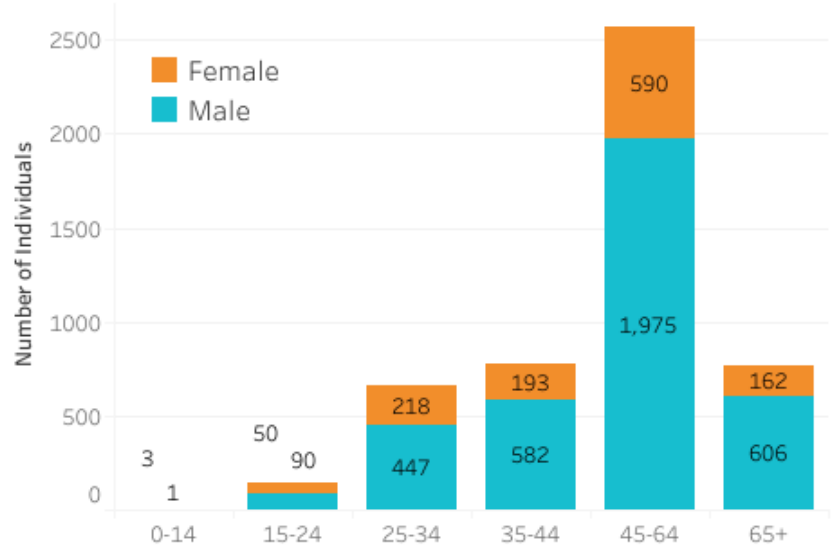
2020 Hospital Discharge Data for Persons Experiencing Homelessness

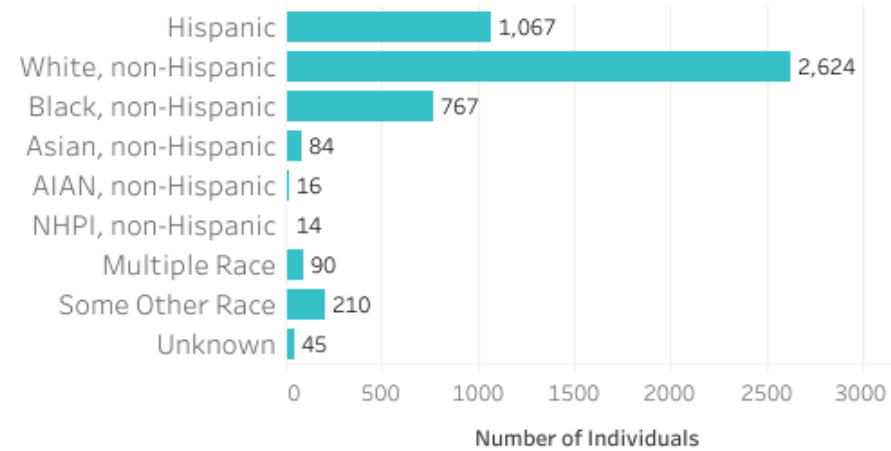
Number of Individuals Experiencing Homelessness Discharged from the Hospital	Total Number of Hospital Discharges Experiencing Homelessness	Average Number of Visits per Person
4,917	9,099	1.9

Median Age	Age Range
53	0 to 91 years old

Gender by Age



Race/Ethnicity



Preferred Language Spoken

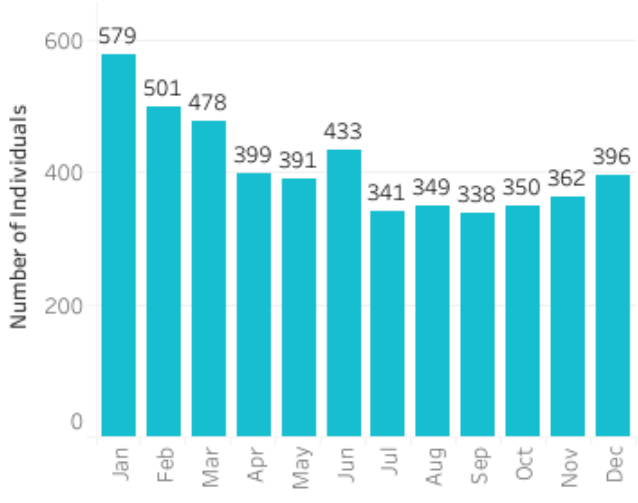
English	4,715
Spanish	187
Other	10
Unknown	4

Footnote: Additional discharges of the same individual were removed from the total. All hospitalizations represent acute care facilities only. AIAN: American Indian/Alaska Native. NHPI: Native Hawaiian/Pacific Islander. Source: California Department of Health Care Access and Information (HCAI), Patient Discharge Data, 2020. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 06/2022.

2020 Hospital Discharge Data for Persons Experiencing Homelessness

Admittance Day of Week and Month

Sun	685
Mon	738
Tues	706
Wed	707
Thurs	692
Fri	700
Sat	689



Average Length of Stay: 7 days

Top 10 Primary Diagnoses

Septicemia	688
Skin and subcutaneous tissue infections	473
Alcohol-related disorders	226
Heart failure	216
Diabetes mellitus with complication	180
Poisoning by drugs, initial encounter	160
Traumatic brain injury (TBI); concussion, initial encounter	99
Fracture of the lower limb (except hip), initial encounter	98
Chronic obstructive pulmonary disease and bronchiectasis	83
Pneumonia (except that caused by tuberculosis)	78

Top 5 Facility Zipcodes

92103	2,489
91942	499
92123	405
92025	327
92056	233

Top 5 Expected Sources of Payment

Medi-Cal	3,454
Medicare	1,102
Self-Pay	146
Private Coverage	121
Other Government	81

Top 3 Patient Dispositions

Discharged to home or self care (routine discharge)	3,072
Discharged/transferred to skilled nursing facility (SNF) with Medicare certification in in anticipation of skilled care	813
Left against medical advice or discontinued care	421

Footnote: Additional discharges of the same individual were removed from the total. All hospitalizations represent acute care facilities only. Source: California Department of Health Care Access and Information (HCAI), Patient Discharge Data, 2020. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 06/2022.

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2020 Hospital Discharge Data for Persons Experiencing Homelessness

Top 10 Primary Diagnoses

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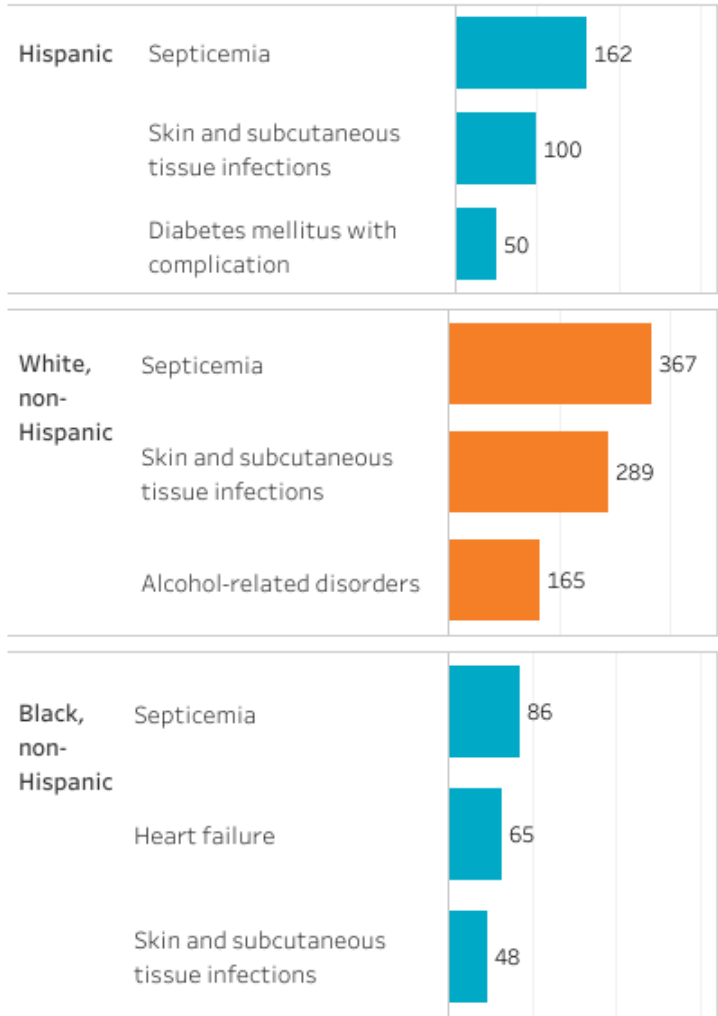
Traumatic brain injury (TBI); concussion, initial encounter	99
Fracture of the lower limb (except hip), initial encounter	98
Chronic obstructive pulmonary disease and bronchiectasis	83
Pneumonia (except that caused by tuberculosis)	78

Top 10 Primary Diagnoses by Age Group**

	15-24	25-34	35-44	45-64	65+
Alcohol-related disorders		28	36	133	27
Chronic obstructive pulmonary disease and bronchiectasis				54	26
Diabetes mellitus with complication	8	12	31	102	27
Fracture of the lower limb (except hip), initial encounter	8	13	25	46	6
Heart failure			13	156	43
Pneumonia (except that caused by tuberculosis)		12	16	40	8
Poisoning by drugs, initial encounter	7	36	33	70	14
Septicemia	18	103	111	356	100
Skin and subcutaneous tissue infections	10	88	104	222	49
Traumatic brain injury (TBI); concussion, initial encounter	5	17	15	49	13

Top 3 Primary Diagnoses for 3 Most Common Race/Ethnicities*



Footnote: Additional discharges of the same individual were removed from the total. All hospitalizations represent acute care facilities only. *Hispanic, Non-Hispanic White, and Non-Hispanic Black make up 91% of homeless individuals who presented to the emergency department (ED) in 2020. **Counts less than 5 were surpressed. Ages 0-14 had no top 10 diagnoses greater than 5. Source: California Department of Health Care Access and Information (HCAI), Patient Discharge Data, 2020. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 06/2022.

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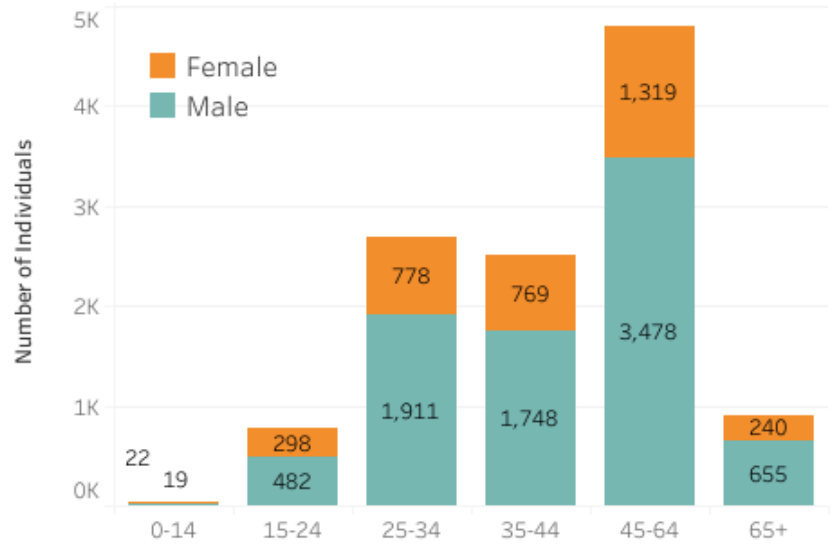
2020 Emergency Department Data for Persons Experiencing Homelessness

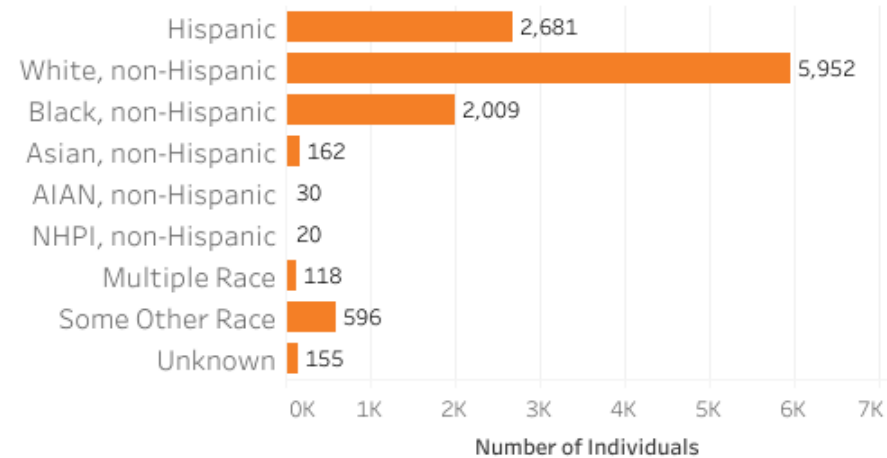
Number of Individuals Experiencing Homelessness Discharged from the ED	Total Number of ED Discharges Experiencing Homelessness	Average Number of Visits per Person
11,723	39,431	3.4

Median Age	Age Range
44	0 to 95 years old

Gender by Age*



Race/Ethnicity



Preferred Language Spoken

English	11,336
Spanish	321
Other	39
Unknown	25

Footnote: Additional discharges of the same individual were removed from the total. AIAN: American Indian/Alaska Native. NHPI: Native Hawaiian/Pacific Islander.
*Individuals with unknown gender or age are not included in count of gender by age.
Source: California Department of Health Care Access and Information (HCAI), Emergency Department Discharge Data, 2020. ..

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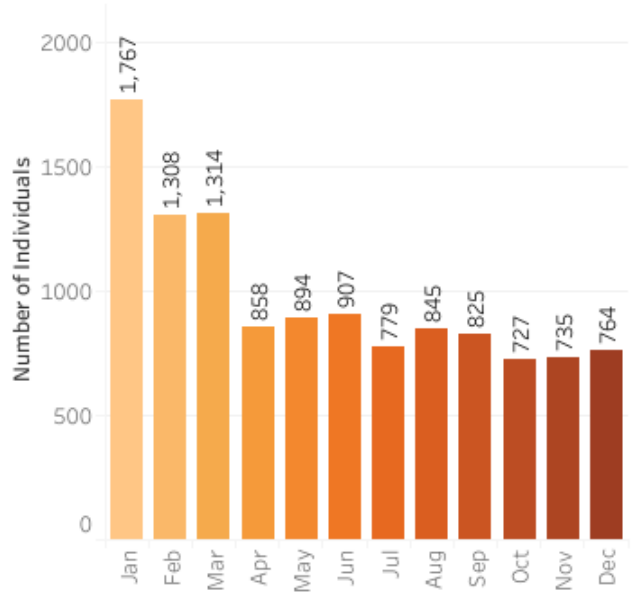
2020 Emergency Department Data for Persons Experiencing Homelessness

Service Day of Week and Month

Sun	1,515
Mon	1,674
Tues	1,673
Wed	1,767
Thur	1,761
Fri	1,682
Sat	1,651



Top 10 Primary Diagnosis Groups

Skin and subcutaneous tissue infections	802
Alcohol-related disorders	528
Suicidal ideation/attempt/intentional self-harm	527
Schizophrenia spectrum and other psychotic disorders	522
Musculoskeletal pain, not low back pain	440
Abdominal pain and other digestive/abdomen signs and symptoms	385
Superficial injury; contusion, initial encounter	382
Nonspecific chest pain	328
Stimulant-related disorders	285
Respiratory signs and symptoms	262

Top 5 Facility Zipcodes

92103	5,978
91942	1,619
92123	984
92025	773
92056	531

Top 5 Expected Sources of Payment

Medicaid (Medi-Cal)	8,087
Self Pay	1,208
Medicare Part B	1,208
Health Maintenance Organization (HMO)..	582
Health Maintenance Organization	159

Top 3 Patient Dispositions

Discharged to home or self care (routine discharge)	10,333
Left against medical advice or discontinued care	461
Discharged/Transferred to a psychiatric hospital or psychiatric distinctpart unit of a hospital	408

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

Source: California Department of Health Care Access and Information (HCAI), Emergency Department Discharge Data, 2020.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 06/2022.

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2020 Emergency Department Data for Persons Experiencing Homelessness

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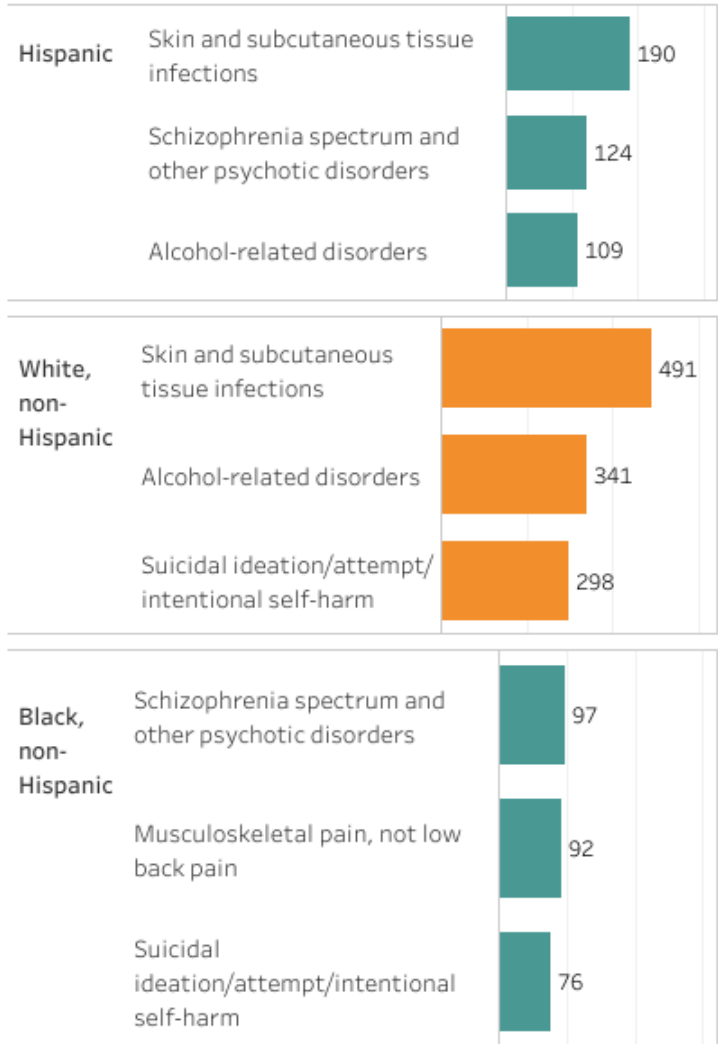
Nonspecific chest pain	328
Stimulant-related disorders	285
Respiratory signs and symptoms	262

Top 10 Primary Diagnosis Groups by Age Group**

	15-24	25-34	35-44	45-64	65+
Abdominal pain and other digestive/abdomen signs..	22	81	92	160	28
Alcohol-related disorders	8	91	101	279	48
Musculoskeletal pain, not low back pain	13	83	79	218	47
Nonspecific chest pain	12	50	58	174	33
Respiratory signs and symptoms	5	38	48	143	27
Schizophrenia spectrum and other psychotic disord..	45	164	144	154	15
Skin and subcutaneous tissue infections	39	220	214	301	27
Stimulant-related disorders	24	109	73	72	6
Suicidal ideation/attempt/intentional self-harm	60	149	126	179	13
Superficial injury; contusion, initial encounter	28	101	69	143	40

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



Footnote: Additional discharges of the same individual were removed from the total. *Hispanic, Non-Hispanic White, and Non-Hispanic Black make up 91% of homeless individuals who presented to the emergency department (ED) in 2020. **Counts less than 5 were surpressed. Ages 0-14 had no top 10 diagnoses greater than 5. Source: California Department of Health Care Access and Information (HCAI), Emergency Department Discharge Data, 2020. Prepared by: Count..

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BEHAVIORAL AND MENTAL HEALTH

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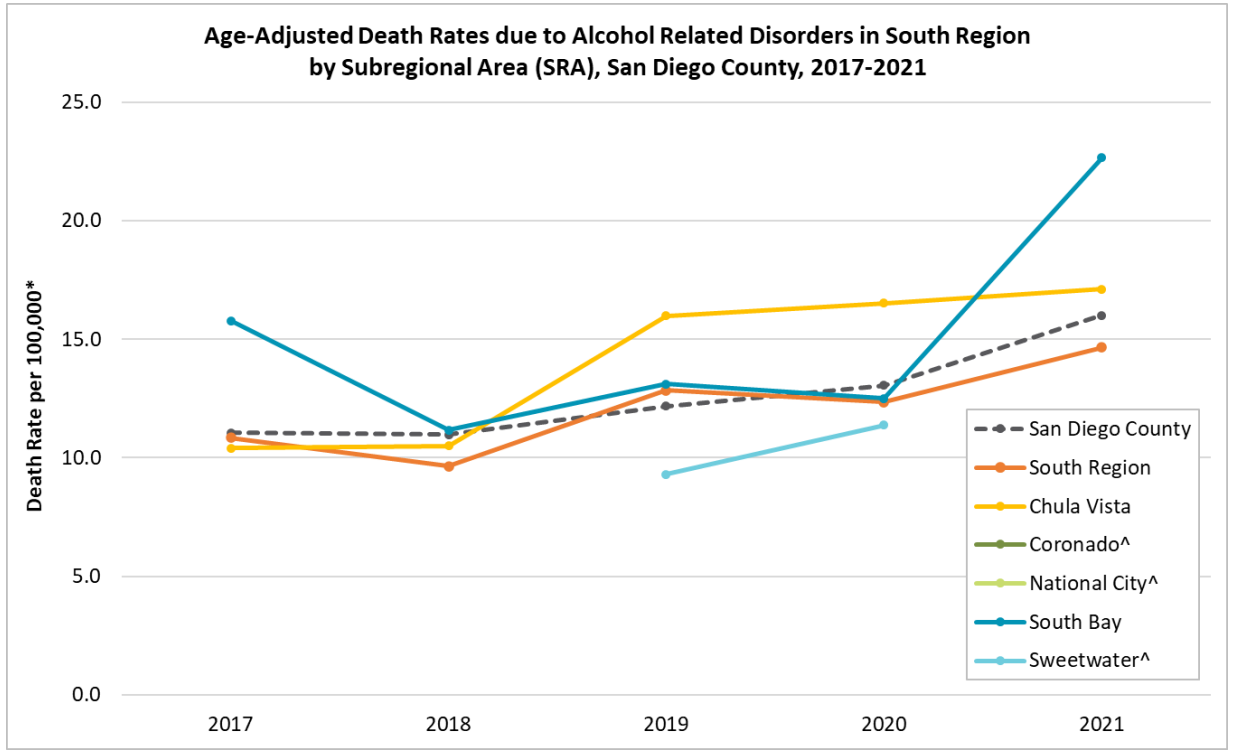
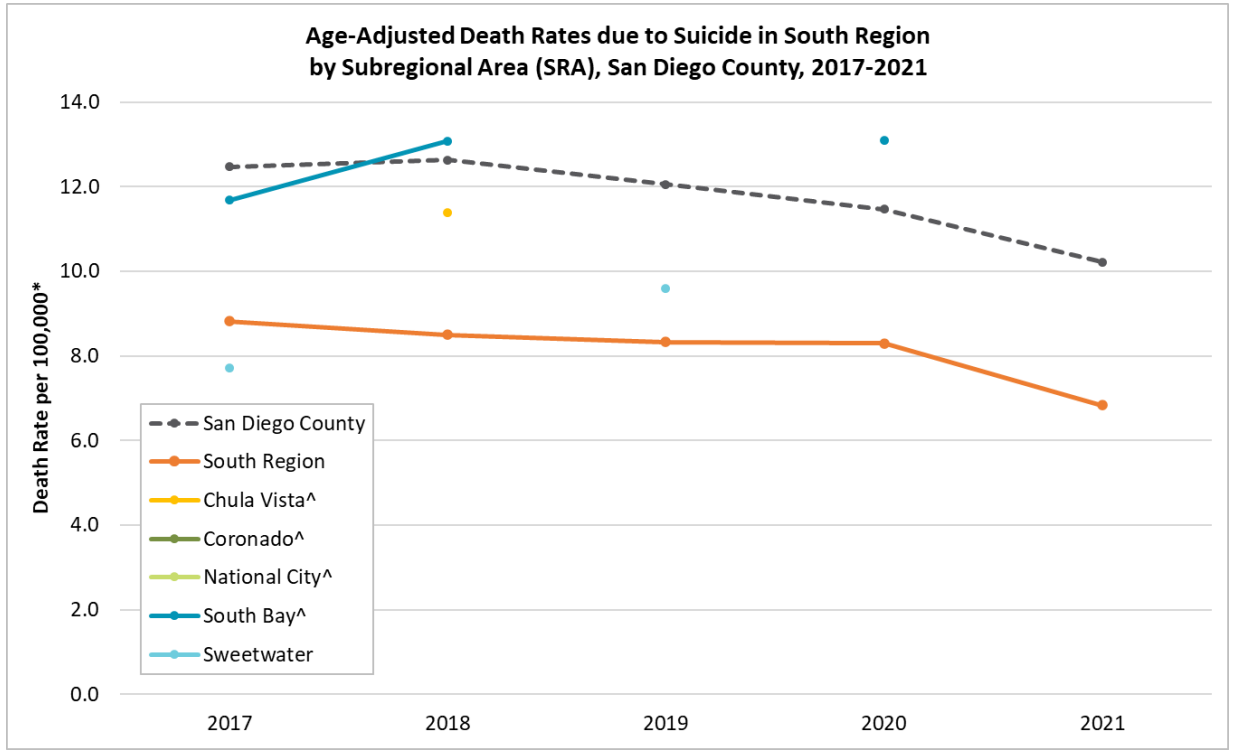
BEHAVIORAL HEALTH INDICATORS – DEATH RATES, 2017-2021



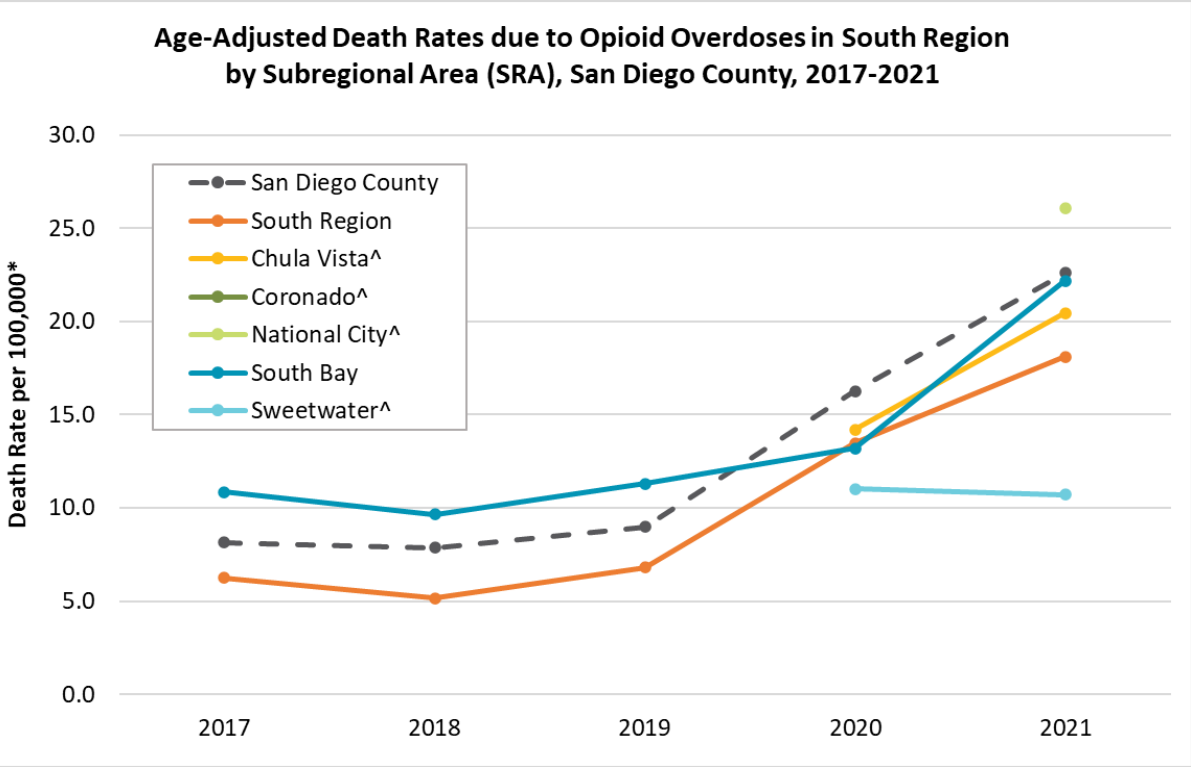


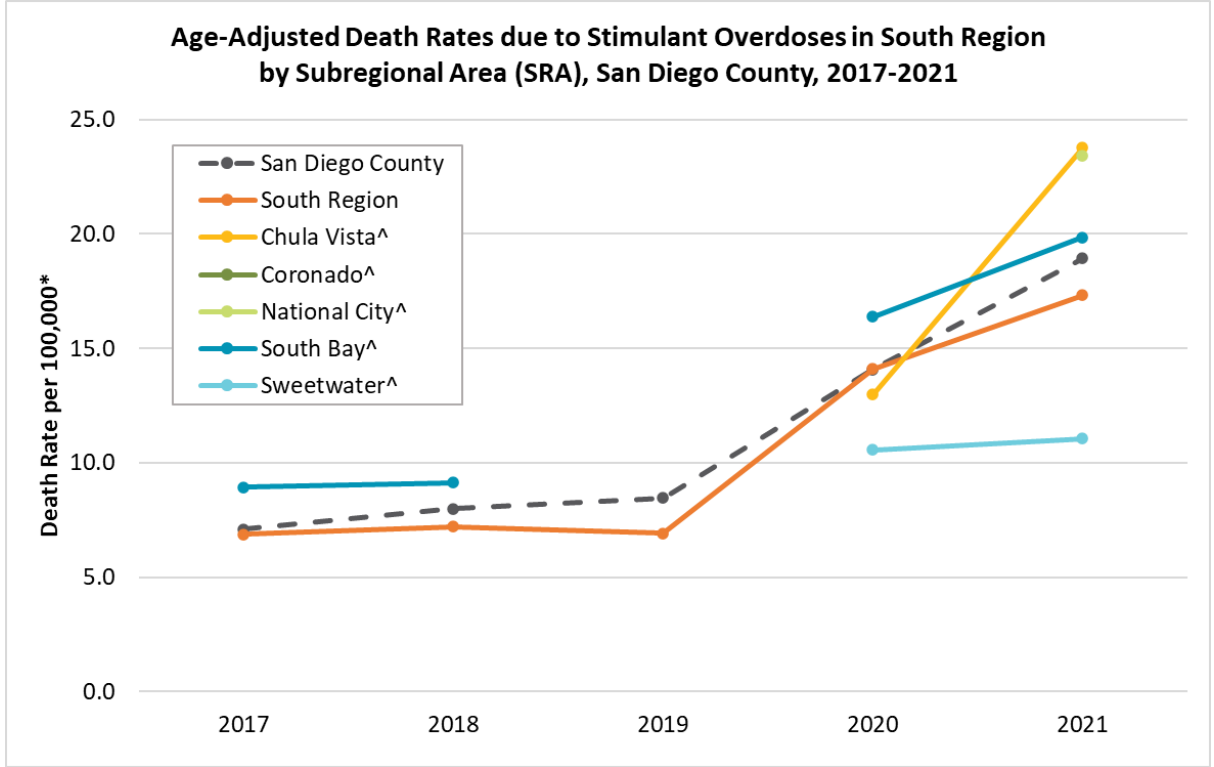
Among South Region SRAs, **Chula Vista SRA** had the greatest increase (64.5%) in the age-adjusted death rate due to alcohol related disorders from 2017-2021.

From 2017-2021, **South Region** had a greater decrease (22.4%) in the age-adjusted death rate due to suicide compared to San Diego County overall (18.1%).

*Age-adjusted rates per 100,000 residents.
^Age-adjusted rates not calculated for fewer than 5 events for the years 2017 to 2019. Rates not calculated for fewer than 11 events for the years 2020 to 2021.
Source: California Department of Public Health, 2017-2021 California Vital Records Business Intelligence System (VRBIS); SANDAG Population Estimates.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

BEHAVIORAL HEALTH INDICATORS – DEATH RATES, 2017-2021



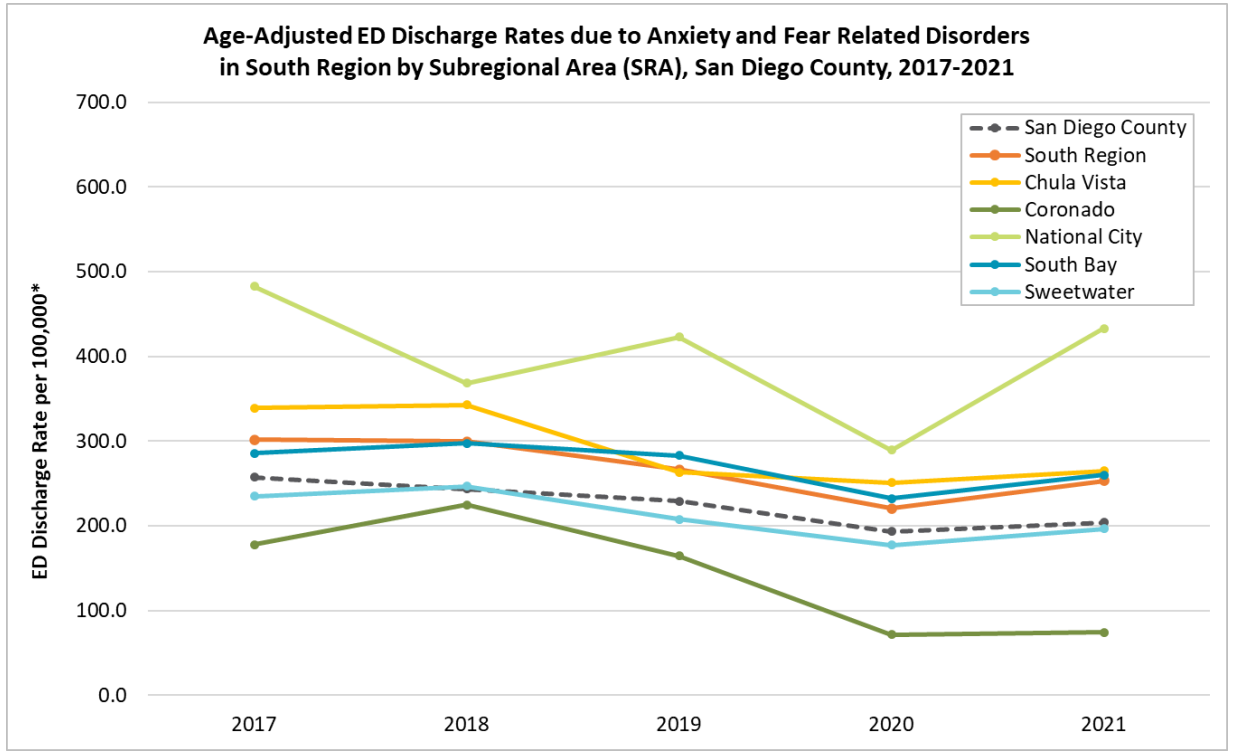


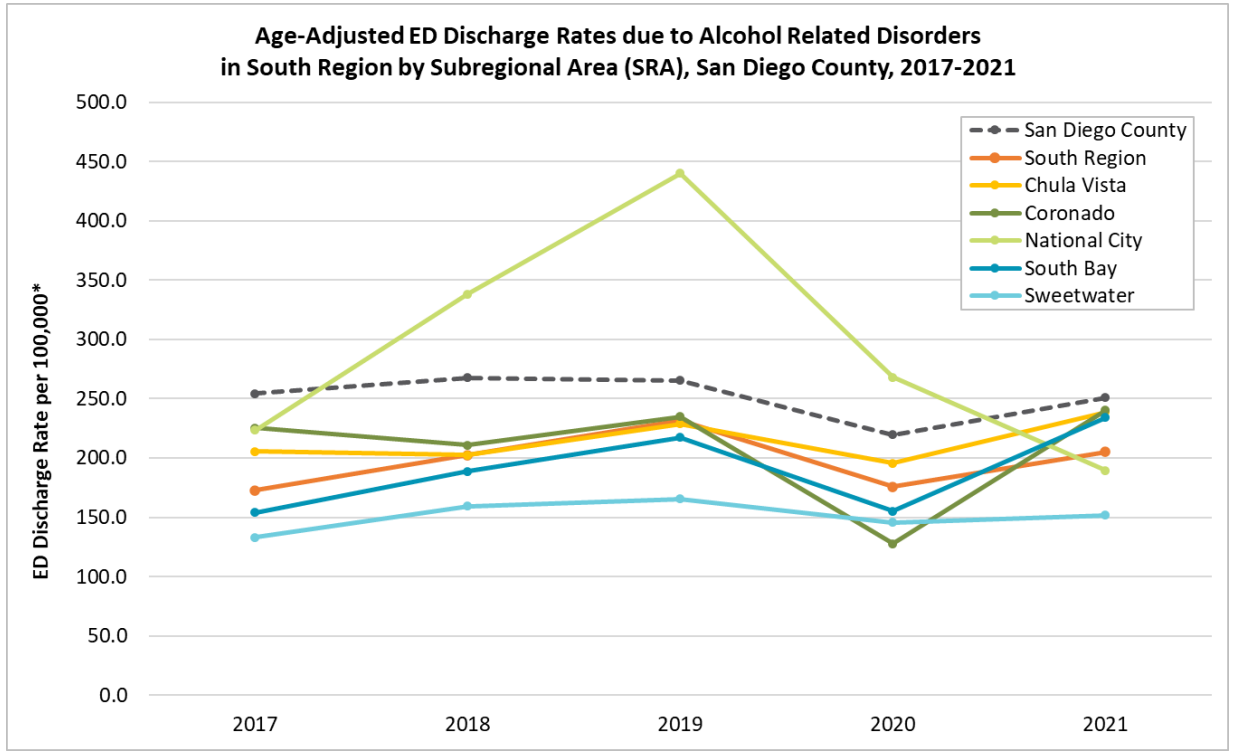
From 2017-2021, the age-adjusted death rates due to opioid overdoses increased 190.0% in **South Region**.

The age-adjusted death rates due to stimulant overdoses increased 152.0% in **South Region** from 2017-2021.

*Age-adjusted rates per 100,000 residents.
^Rates not calculated for fewer than 5 events for the years 2017 to 2019. Rates not calculated for fewer than 11 events for the years 2020 to 2021.
Source: California Department of Public Health, 2017-2021 California Vital Records Business Intelligence System (VRBIS); SANDAG Population Estimates.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

BEHAVIORAL HEALTH INDICATORS – ED DISCHARGE RATES, 2017-2021





From 2017-2019, **Coronado SRA** had the greatest decrease (58.3%) in the ED discharge rate due to anxiety and fear related disorders.

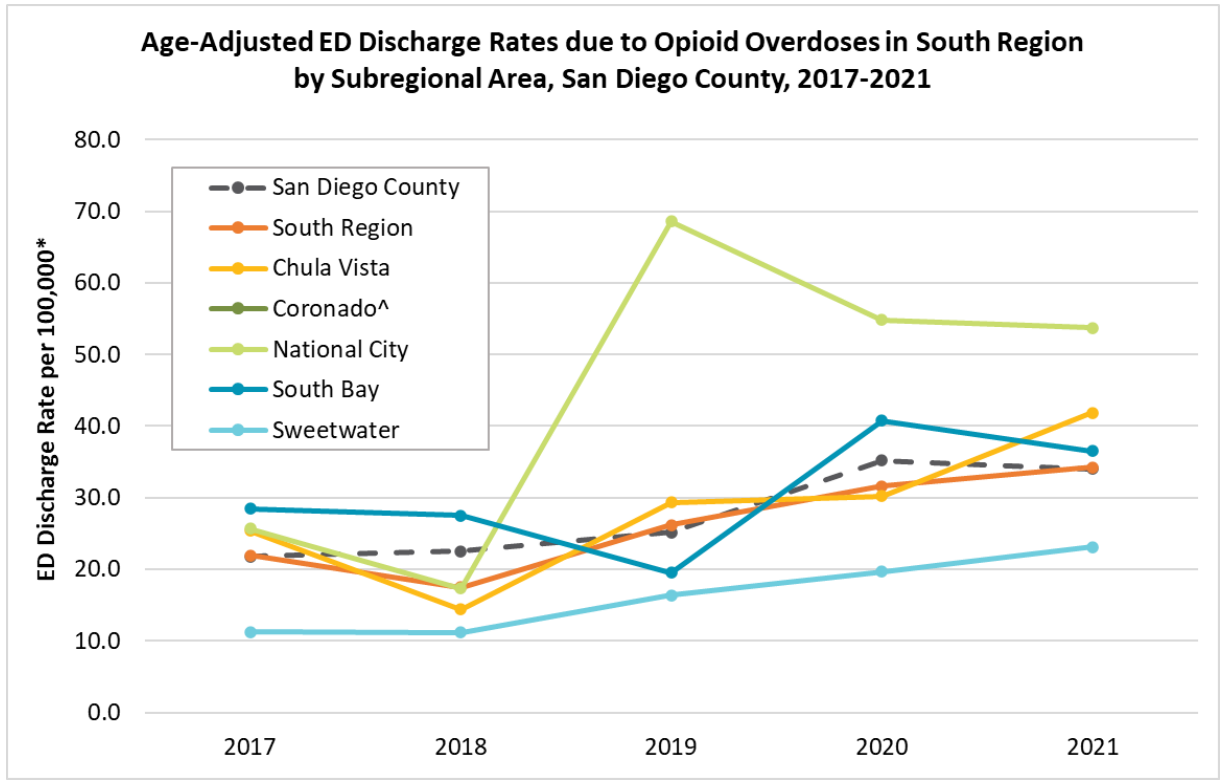
From 2017-2019, **South Bay SRA** had the greatest increase (52.0%) in the ED discharge rate due to alcohol related disorders.

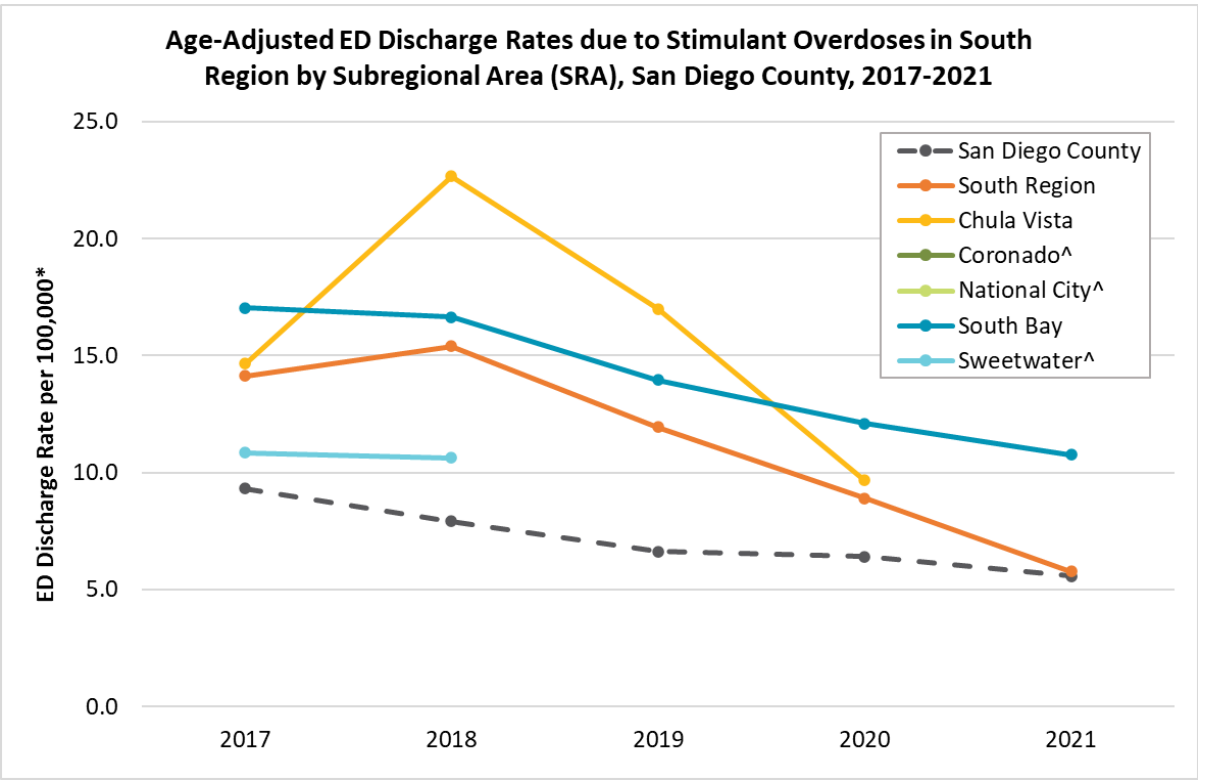
*Age-adjusted rates per 100,000 residents.

Sources: California Office of Statewide Health Planning and Development (OSHPD), Emergency Department Discharge Database and Patient Discharge Database, 2017-2019; California Department of Healthcare Access and Information (HCAI), Emergency Department Discharge Database and Patient Discharge Database, 2020-2021. San Diego Association of Governments (SANDAG) Population estimates, 2017-2021. 2020 and 2021 population estimates were derived using the 2010 Census and data should be considered preliminary.

Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

BEHAVIORAL HEALTH INDICATORS – ED DISCHARGE RATES, 2017-2021



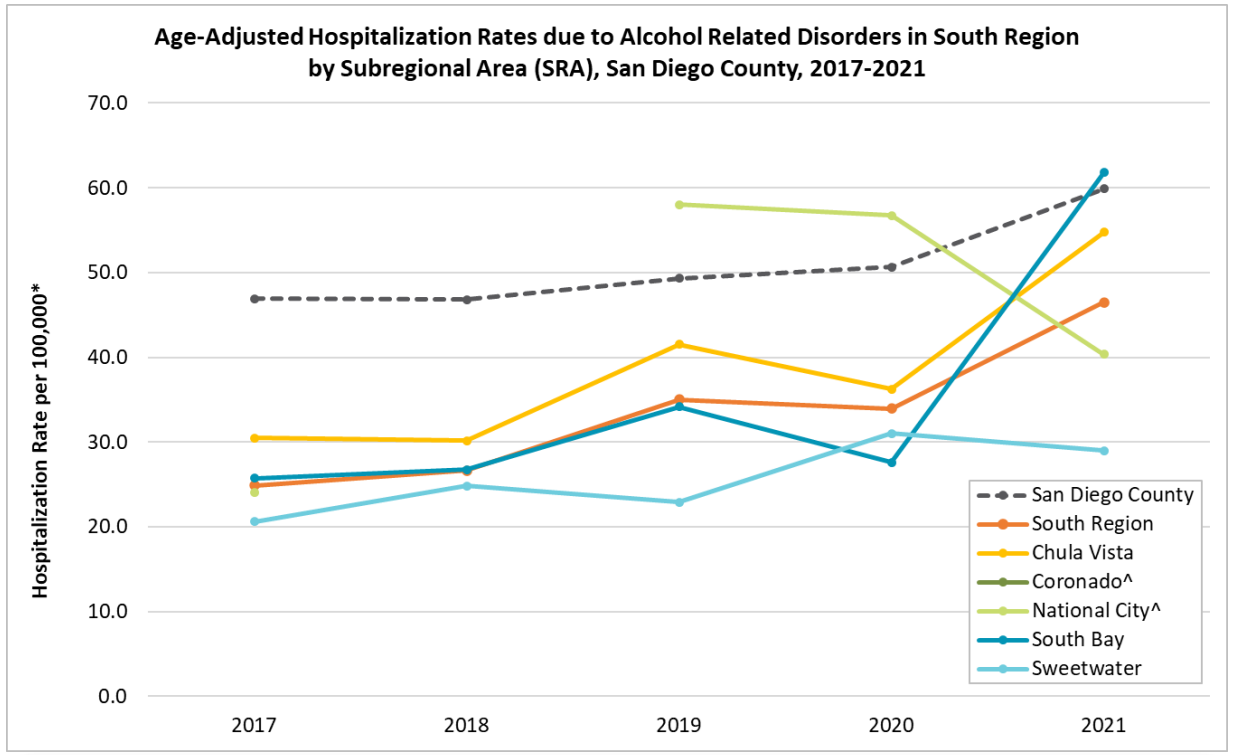


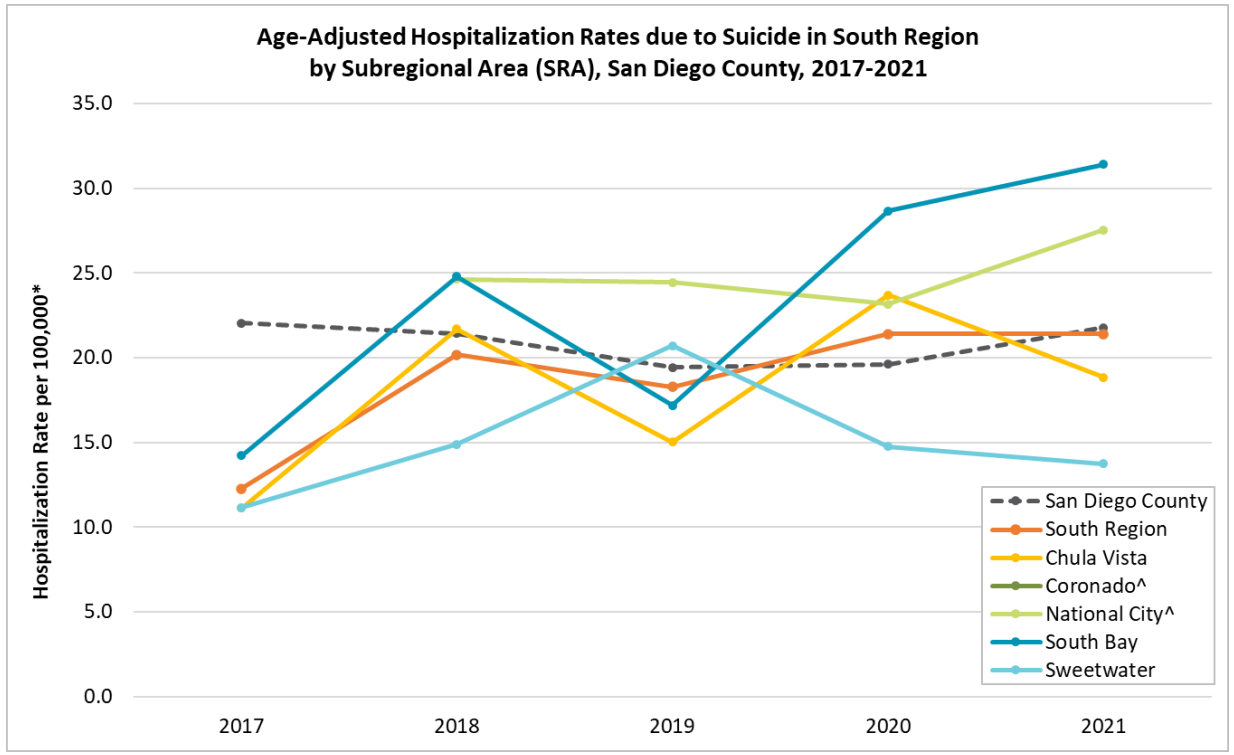
Among South Region SRAs, from 2017-2021, **National City SRA** had the greatest increase (108.9%) in the age-adjusted ED discharge rate due to opioid overdoses.

From 2017-2021, the age-adjusted ED discharge rates due to stimulant overdoses decreased 59.1% in **South Region**.

*Age-adjusted rates per 100,000 residents.
^Rates not calculated for fewer than 5 events for the years 2017 to 2019. Rates not calculated for fewer than 11 events for the years 2020 to 2021.
Sources: California Office of Statewide Health Planning and Development (OSHPD), Emergency Department Discharge Database and Patient Discharge Database, 2017-2019; California Department of Healthcare Access and Information (HCAI), Emergency Department Discharge Database and Patient Discharge Database, 2020-2021. San Diego Association of Governments (SANDAG) Population estimates, 2017-2021. 2020 and 2021 population estimates were derived using the 2010 Census and data should be considered preliminary.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

BEHAVIORAL HEALTH INDICATORS – HOSPITALIZATION RATES, 2017-2021



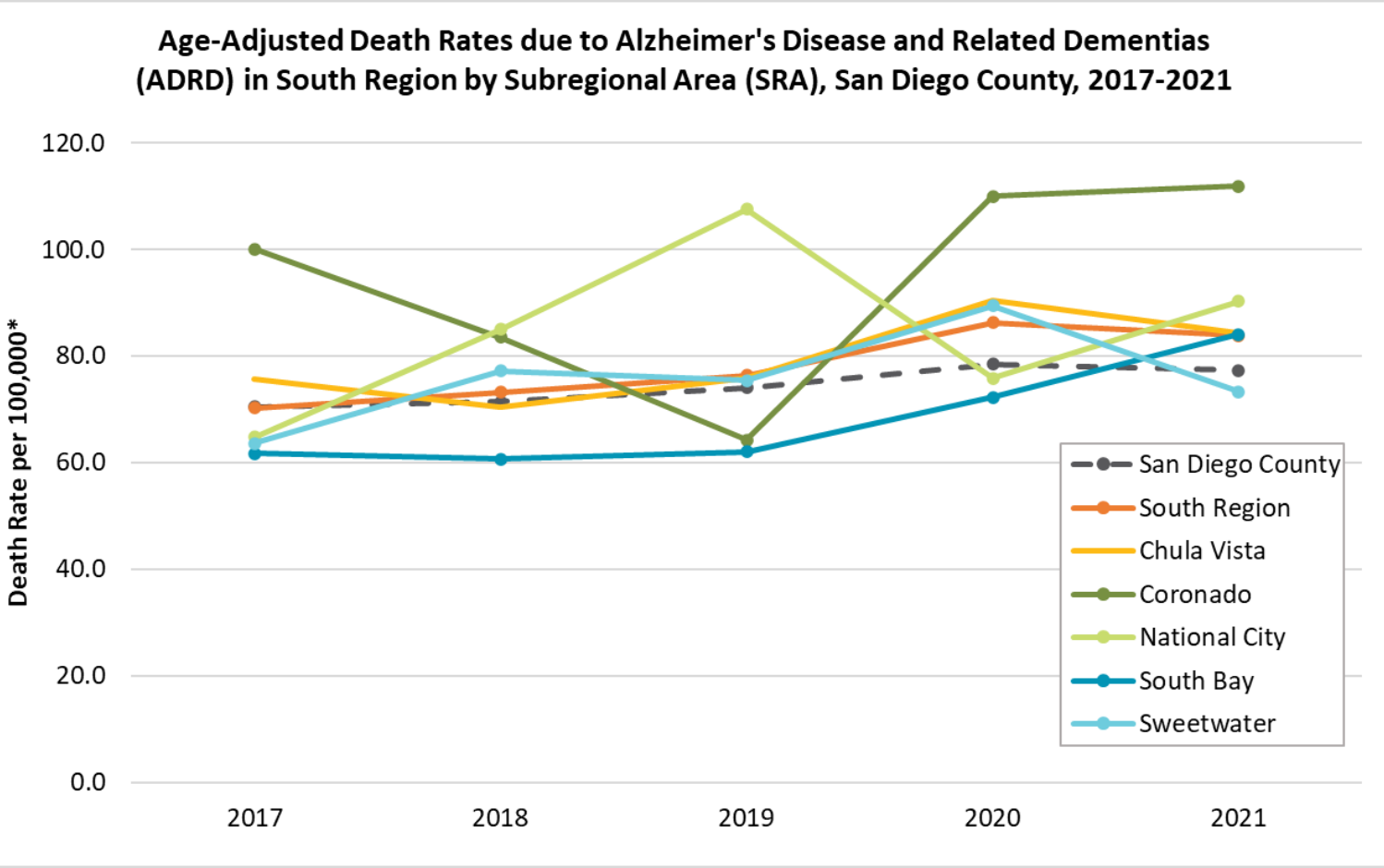


Among South Region SRAs, **South Bay SRA** had greatest increase (140.1%) in the age-adjusted hospitalization rate due to alcohol related disorders from 2017-2021.

From 2017-2021, **South Bay SRA** had the greatest increase (120.8%) in the age-adjusted hospitalization rate due to suicide from 2017-2021.

*Age-adjusted rates per 100,000 residents.
^Age-adjusted rates not calculated for fewer than 5 events for the years 2017 to 2019. Rates not calculated for fewer than 11 events for the years 2020 to 2021.
Sources: California Office of Statewide Health Planning and Development (OSHPD), Emergency Department Discharge Database and Patient Discharge Database, 2017-2019; California Department of Healthcare Access and Information (HCAI), Emergency Department Discharge Database and Patient Discharge Database, 2020-2021. San Diego Association of Governments (SANDAG) Population estimates, 2017-2021. 2020 and 2021 population estimates were derived using the 2010 Census and data should be considered preliminary.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

ALZHEIMER'S DISEASE AND RELATED DEMENTIAS (ADRD) – DEATH RATES, 2017-2021

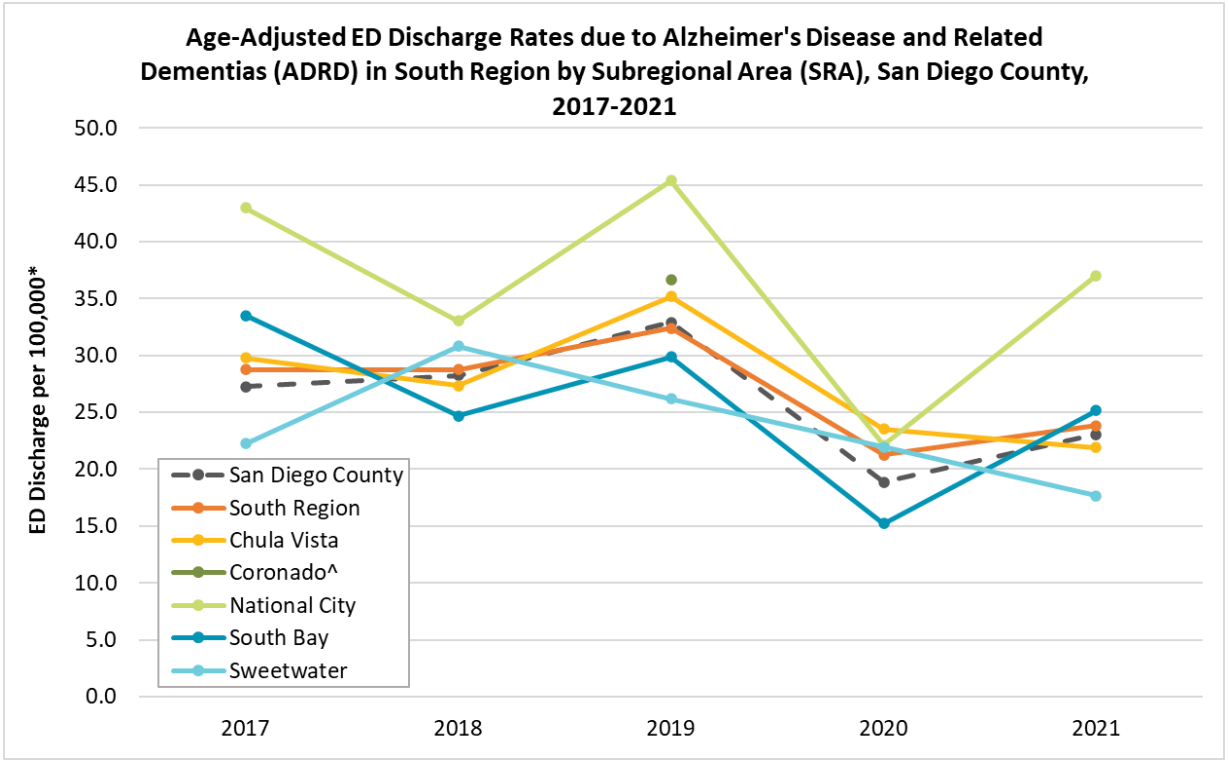


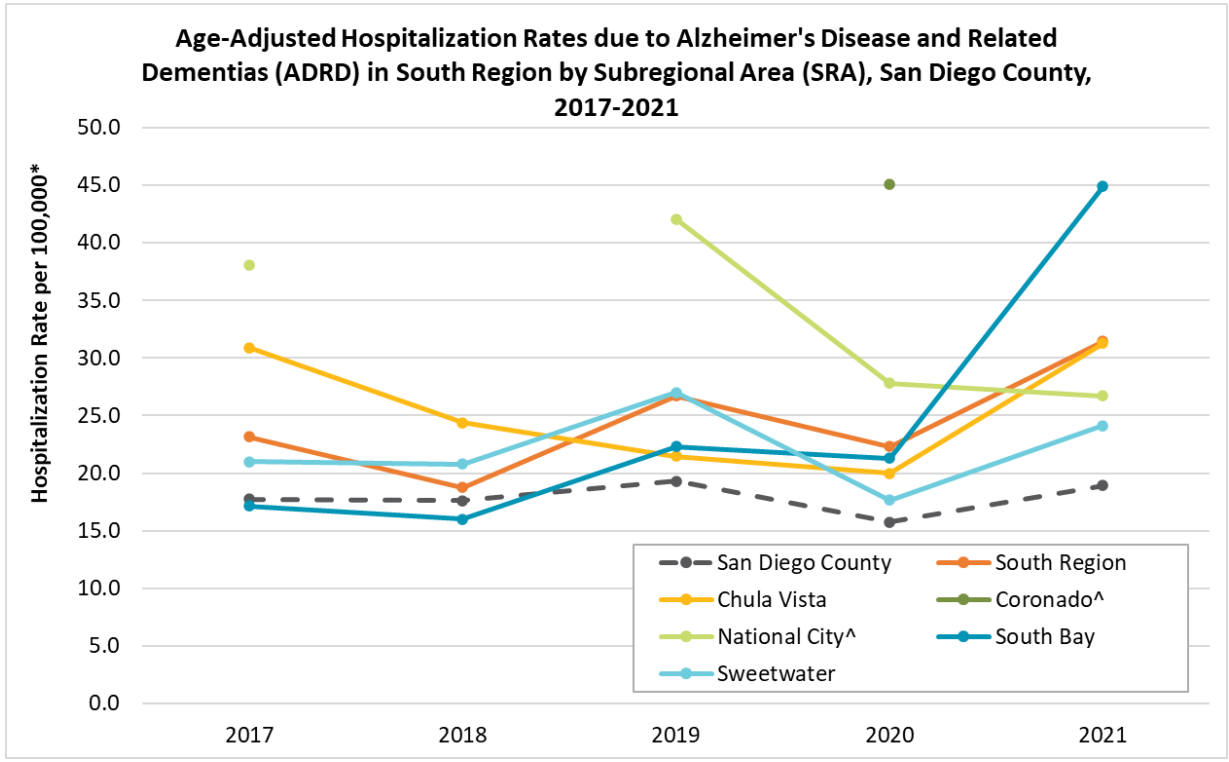
From 2017-2021, age-adjusted death rates due to Alzheimer's Disease and Related Dementias (ADRD) increased in **South Region and all its SRAs**.

Among the SRAs in South Region, **National City SRA** had the greatest increase (39.3%) in age-adjusted death rates due to Alzheimer's Disease and Related Dementias (ADRD) from 2017-2021.

*Age-adjusted rates per 100,000 residents.
Source: California Department of Public Health, 2017-2021 California Vital Records Business Intelligence System (VRBIS); SANDAG Population Estimates.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

ALZHEIMER'S DISEASE AND RELATED DEMENTIAS (ADRD) – ED DISCHARGE AND HOSPITALIZATION RATES, 2017-2021





The age-adjusted ED discharge rates due to ADRD decreased in **South Region and its SRAs**.

From 2017-2021, age-adjusted hospitalization rates due to ADRD in **South Region and all its SRAs** were generally higher compared to the hospitalization rates in San Diego County overall.

*Age-adjusted rates per 100,000 residents.
^Rates not calculated for fewer than 5 events for the years 2017 to 2019. Rates not calculated for fewer than 11 events for the years 2020 to 2021.
Sources: California Office of Statewide Health Planning and Development (OSHPD), Emergency Department Discharge Database and Patient Discharge Database, 2017-2019; California Department of Healthcare Access and Information (HCAI), Emergency Department Discharge Database and Patient Discharge Database, 2020-2021. San Diego Association of Governments (SANDAG) Population estimates, 2017-2021. 2020 and 2021 population estimates were derived using the 2010 Census and data should be considered preliminary.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

HEALTH AND WELLBEING

COUNTY OF SAN DIEGO
HHSA
HEALTH AND HUMAN SERVICES AGENCY
PUBLIC HEALTH SERVICES

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ACCREDITED HEALTH DEPARTMENT
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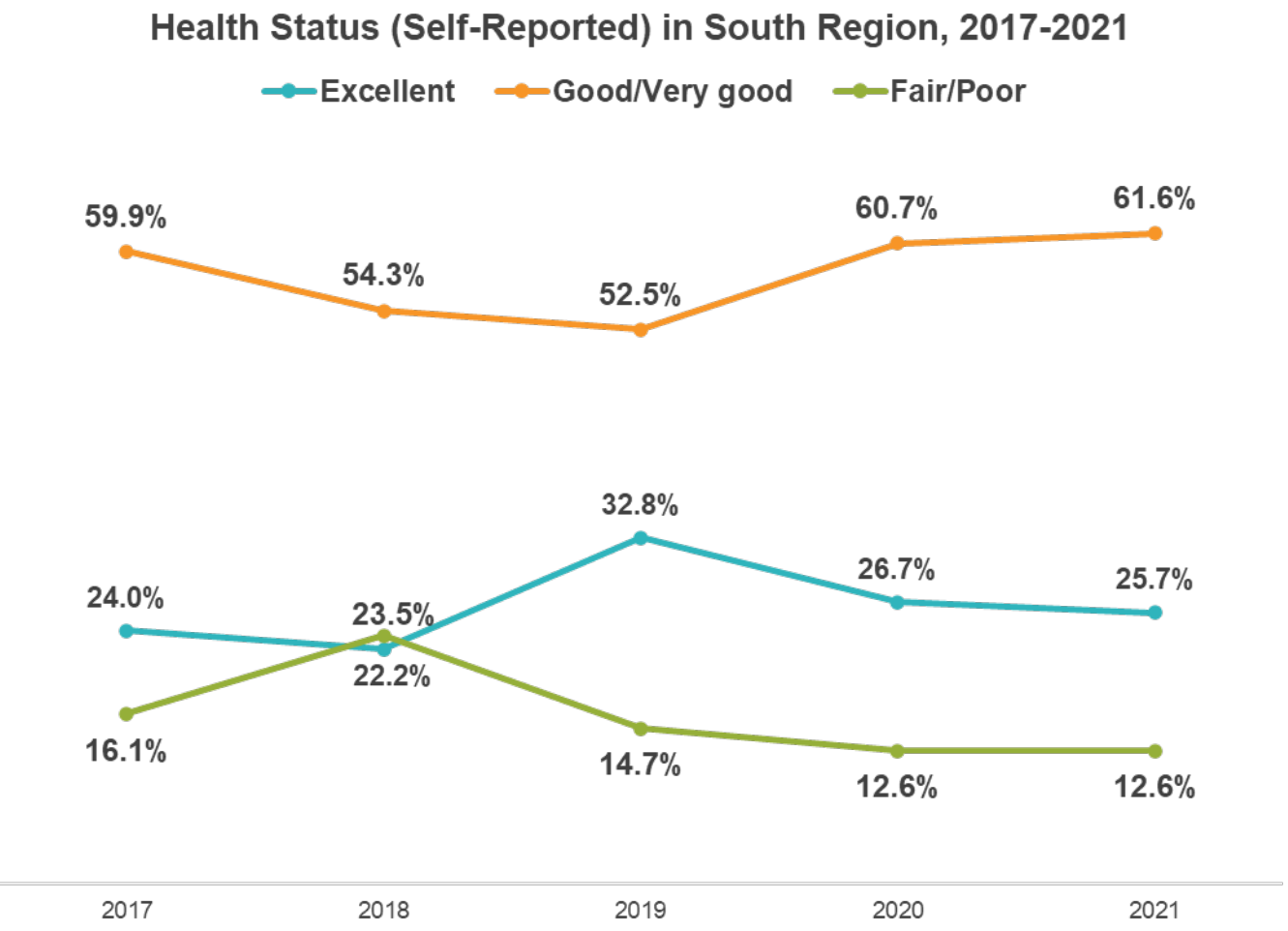
HEALTH STATUS AND USUAL SOURCE OF CARE



Percent of Residents with Usual Place to go When Sick or in Need of Health Advice, 2017-2021

Year	Percent
2017	91.1*%
2018	90.3*%
2019	84.0%
2020	90.3%
2021	84.0%

Health Status

- 1 in 8 South Region residents self-reported their health status as fair/poor in 2021.
- The percentage of residents reporting good/very good health increased from 59.9% in 2016 to 61.6% in 2021.

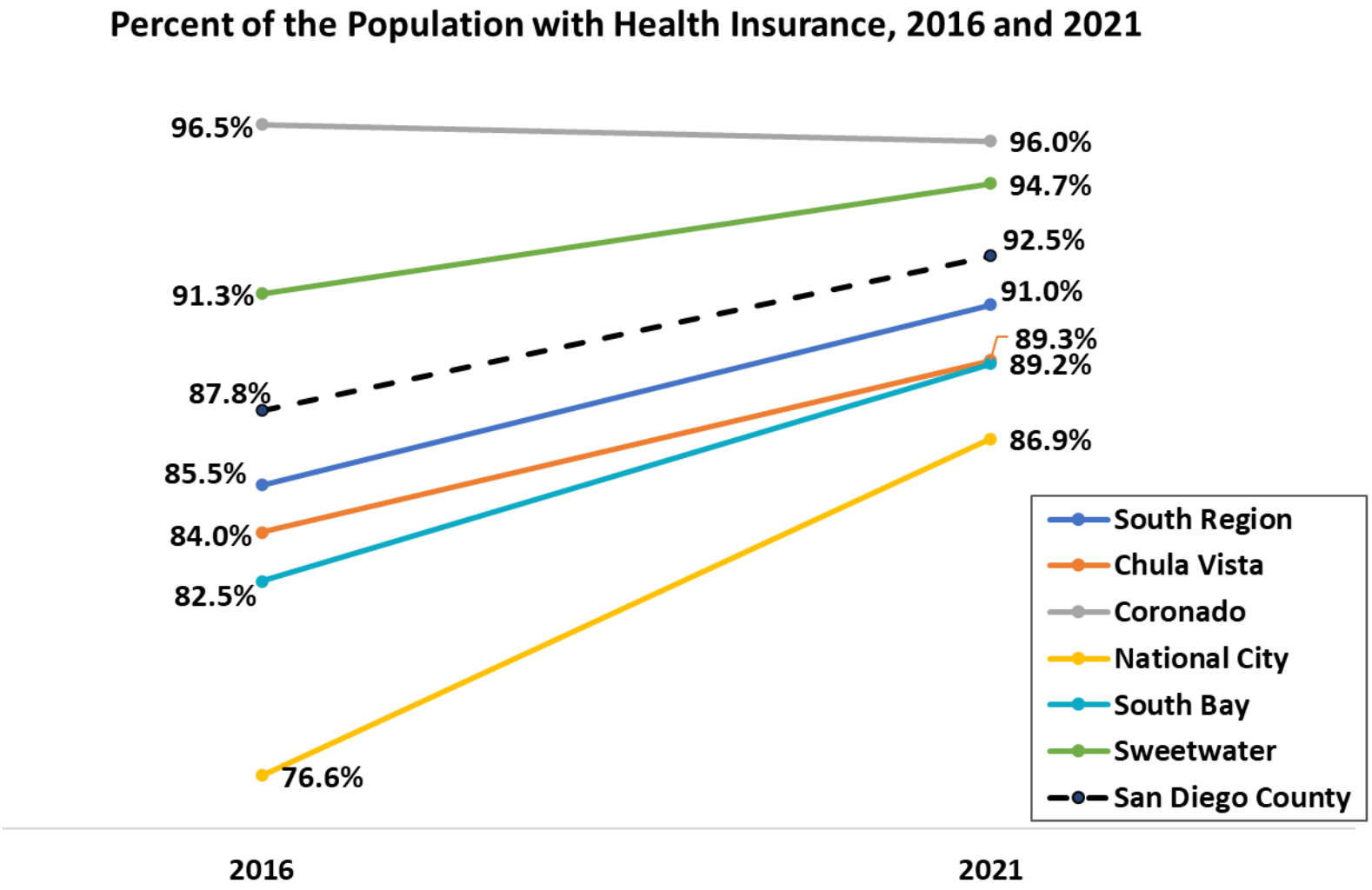
Usual Place of Care

- In 2021, 84% of South Region residents reported having a usual place to go when sick or in need of health advise.

** = statistically unstable*

Source: UCLA Center for Health Policy Research, Los Angeles, CA. California Health Interview Survey, AskCHIS 2017-2021. Available at hhtp://ask.chis.ucla.edu. Exported on April 3, 2023.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2023.

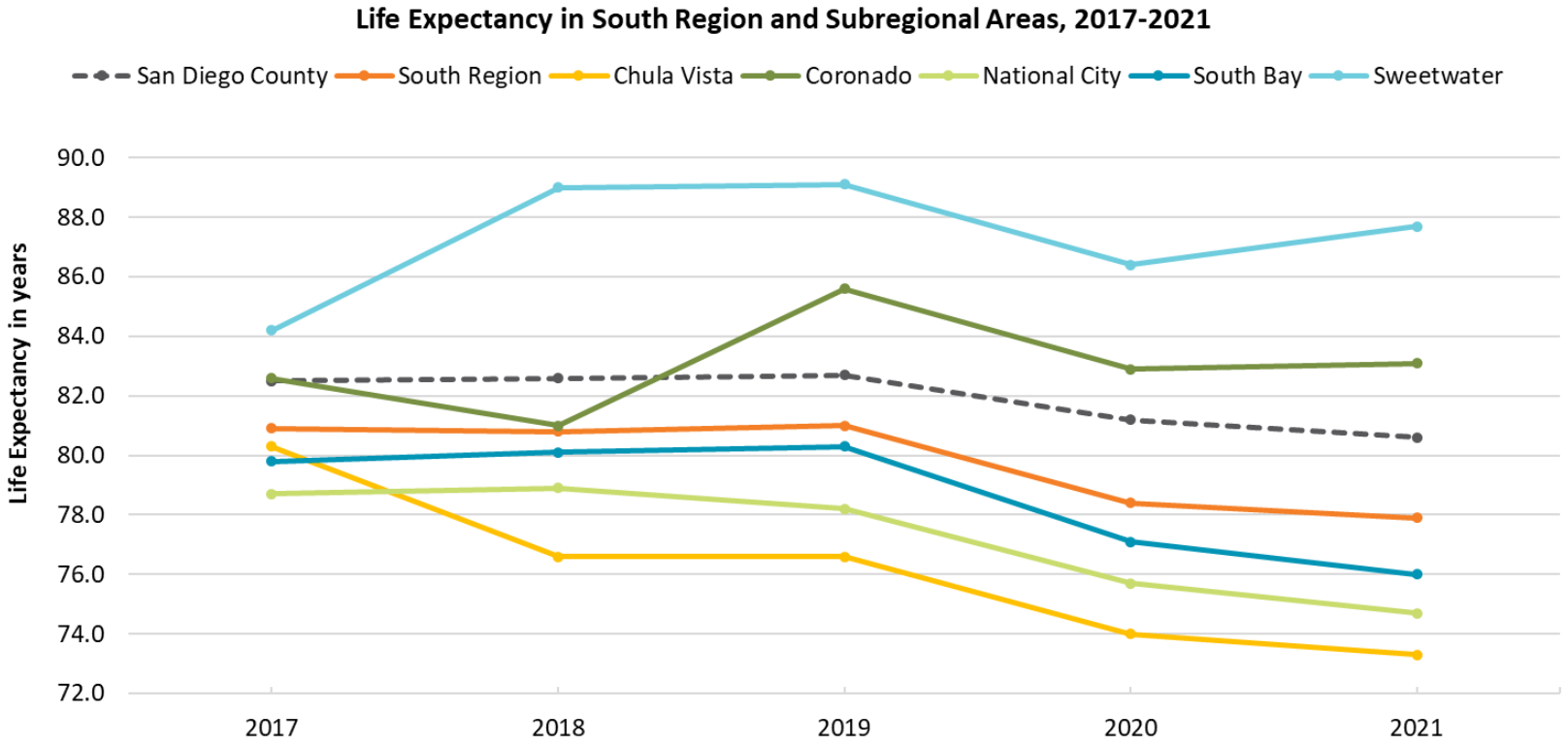
HEALTH INSURANCE

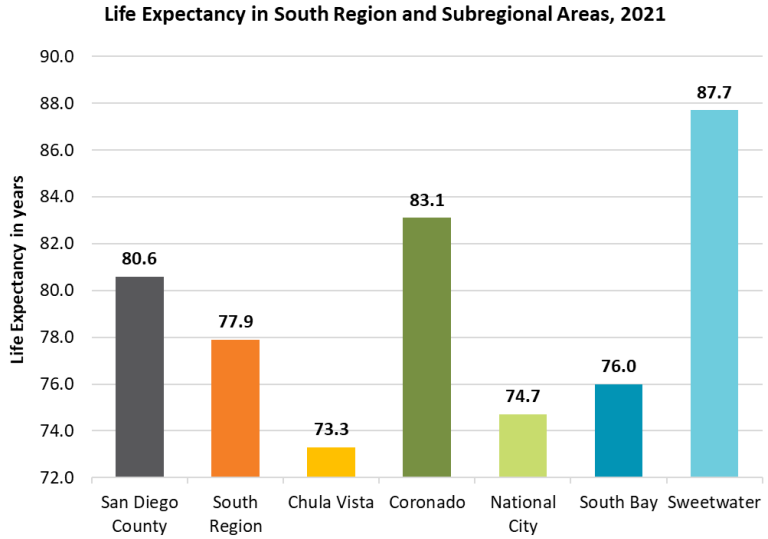


- Compared to the overall county, South Region residents were less likely to have health insurance in 2016 and 2021.
- Between 2016 and 2021, all South Region subregional areas, except Coronado, saw an increase in the proportion of residents with health insurance coverage.
- National City SRA had the lowest proportion of residents in South Region with health insurance coverage in 2016 and 2021.
- Among South Region communities, South Bay SRA had the highest increase in the proportion of residents with health insurance in 2016 and 2021.

Source: U.S. Census Bureau; 2012-2016 American Community Survey 5-Year Estimates, Table B27001; 2017-2021 American Community Survey 5-Year Estimates, Table B27001.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2023.

LIFE EXPECTANCY



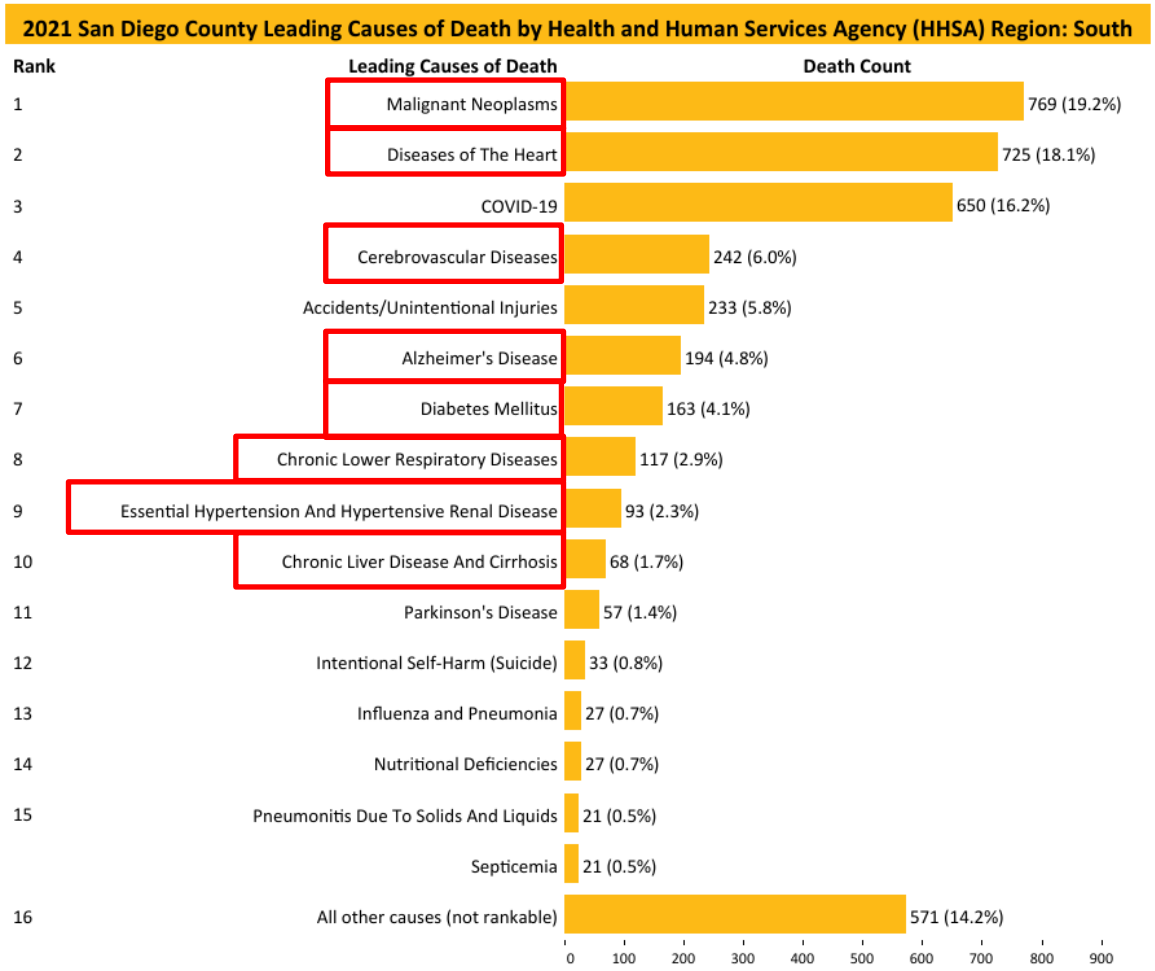


All South Region SRAs, **except Coronado and Sweetwater**, had a decrease in life expectancy from 2017-2021.

Among South Regions SRAs, **Chula Vista**, **National City**, and **South Bay** had lower life expectancies compared to South Region and San Diego County overall in 2021.

Source: California Department of Public Health, 2017-2021 California Vital Records Business Intelligence System (VRBIS); SANDAG Population Estimates.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

LEADING CAUSES OF DEATH



Leading Causes of Death among San Diego County Residents Dashboard

In 2021, **cancer** was the number one leading cause of death in South Region.

In South Region, 8 out of the top 10 leading causes of death were due to **chronic disease** in 2021.

Ranked is based on total number of deaths in each of the National Center for Health Statistics (NCHS) "rankable" categories. The top 15 leading causes of death presented here are based on the San Diego County residents for their respective years.
Cause of death is based on the underlying cause of death reported on death certificates as classified by ICD-10 codes.
Deaths for specific demographics or geographic area may not equal the total deaths for San Diego County due to missing data.
The COVID-19 pandemic was associated with incre3ases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality including Leading Causes of Death.
Source: California Department od Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, January 2023.

HEALTH OUTCOMES

COUNTY OF SAN DIEGO
HHSA
HEALTH AND HUMAN SERVICES AGENCY
PUBLIC HEALTH SERVICES

LIVE WELL SAN DIEGO

ACCREDITED HEALTH DEPARTMENT
PHAB
Advancing public health performance
PUBLIC HEALTH ACCREDITATION BOARD

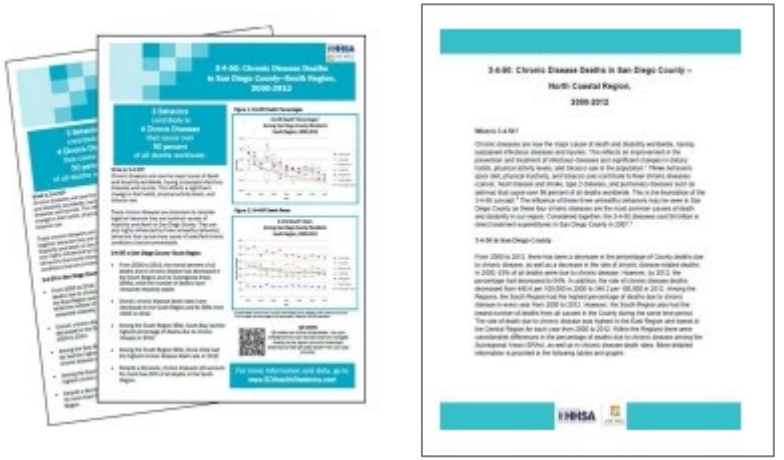
3-4-50: CHRONIC DISEASE DEATHS

The proportion of deaths due to 3-4-50 chronic diseases in San Diego County decreased from 63% in 2000 to 43% in 2021.

Improve your health by…

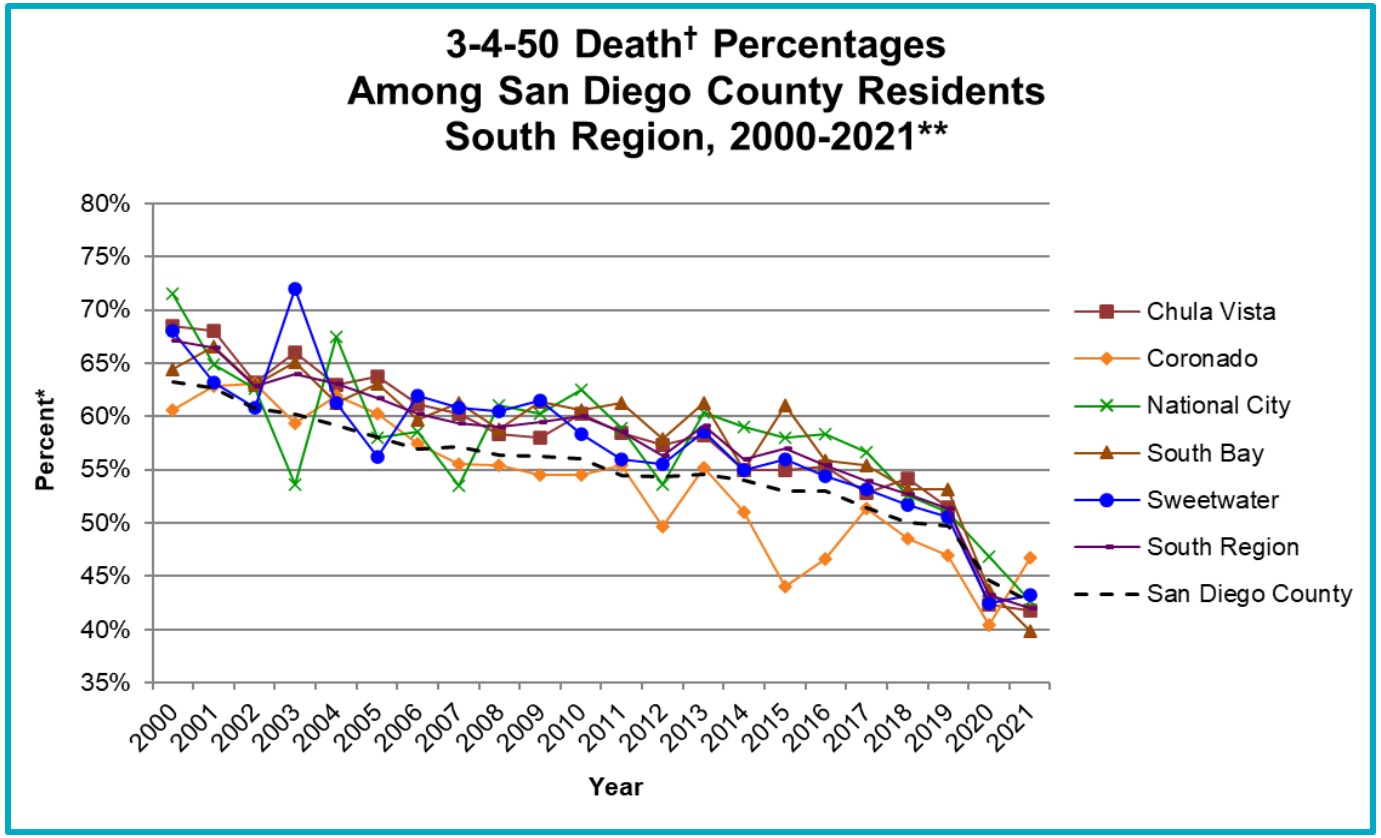
- Walking at least 30 minutes every day.
- Eating healthy foods (5 servings of fruits and vegetables).
- Not smoking.

www.sdhealthstatistics.com



3-4-50: CHRONIC DISEASE DEATHS

PERCENTAGES, TREND 2000-2021



The proportion of deaths due to 3-4-50 chronic diseases in **South Region** decreased from 67% in 2000 to 42% in 2021.

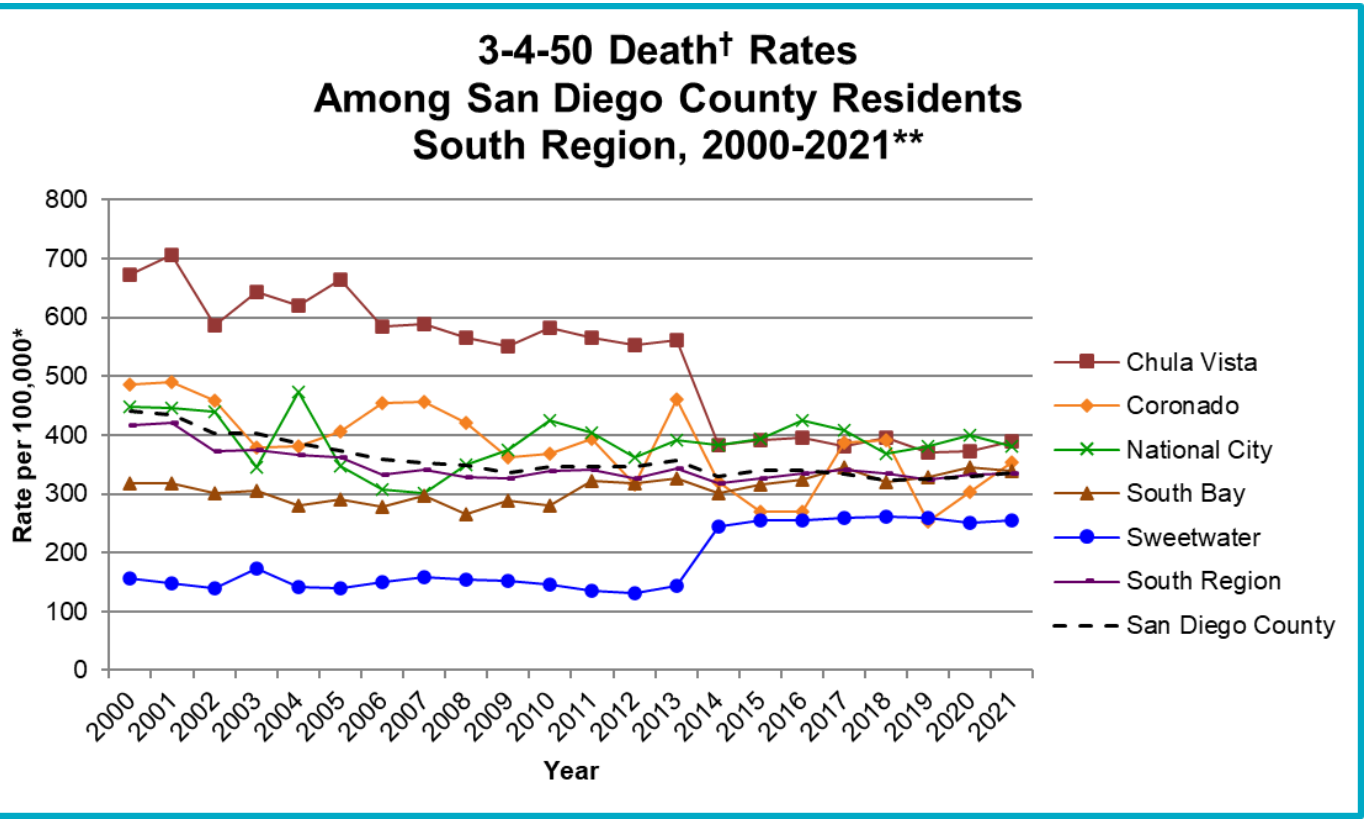
From 2000-2021, **National City SRA** had the greatest decrease in the proportion of deaths due to 3-4-50 chronic diseases (40.4%).

Among South Region SRAs, **Coronado SRA** had the highest percentage of deaths due to 3-4-50 chronic diseases (47%) in 2021.

*3-4-50 deaths as a percentage of all cause deaths. 3-4-50 percentages from 2020-2021 should be considered preliminary.
†3-4-50 deaths include stroke, coronary heart disease (CHD), diabetes, COPD, asthma, and cancer. Beginning with 2017, COPD includes chronic lower respiratory diseases (COPD/chronic lower respiratory diseases).
§Percents not calculated for fewer than 5 events for the years 2000 to 2019. Percents not calculated for fewer than 11 events for the years 2020 and 2021. Percents not calculated in cases where zip code is unknown.
**The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality including those of 3-4-50 chronic diseases.
Source: California Department of Public Health, 2000-2013 Death Statistical Master Files, 2014-2021 California Vital Records Business Intelligence System (VRBIS).
Prepared by County of San Diego (CoSD), Health and Human Services Agency (HHSA), Public Health Services (PHS), Community Health Statistics Unit, April 2023.

3-4-50: CHRONIC DISEASE DEATHS

RATES, TREND 2000-2021



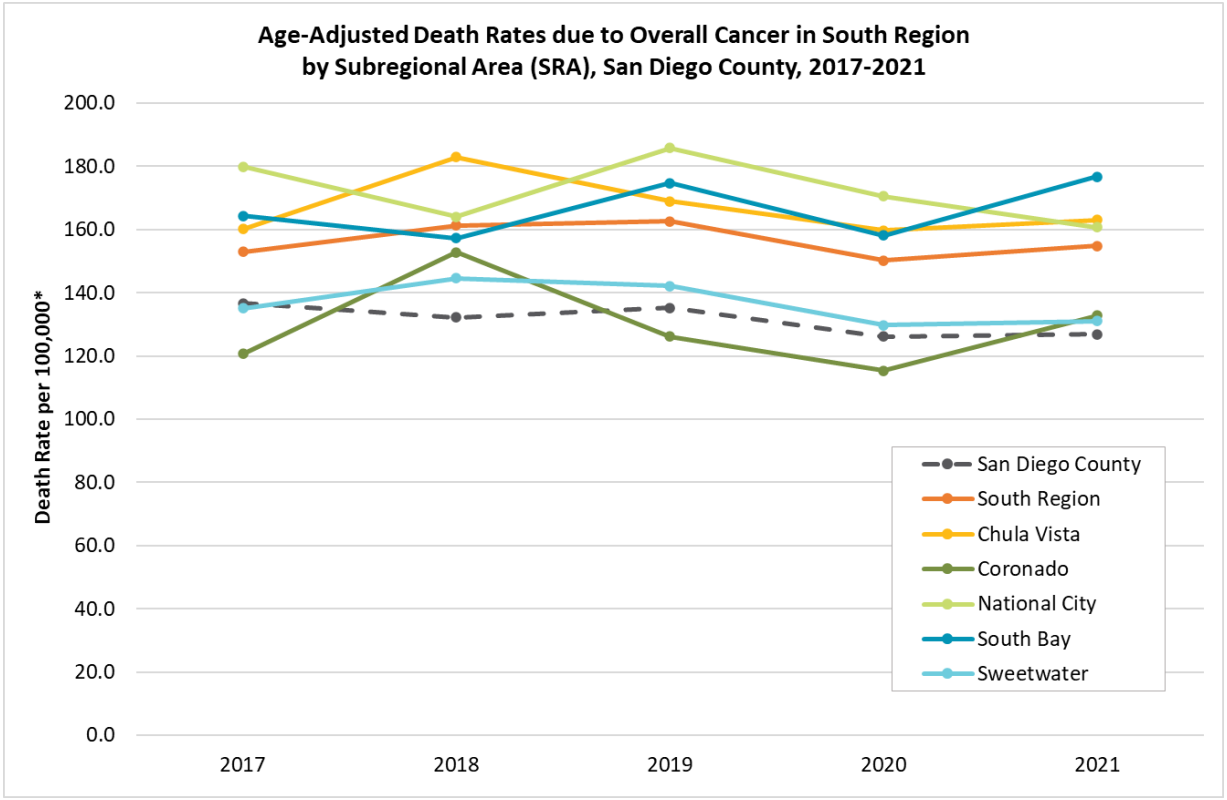
The 3-4-50 chronic disease death rate in **South Region** decreased from 415.5 per 100,000 in 2000 to 335.0 per 100,000 in 2021.

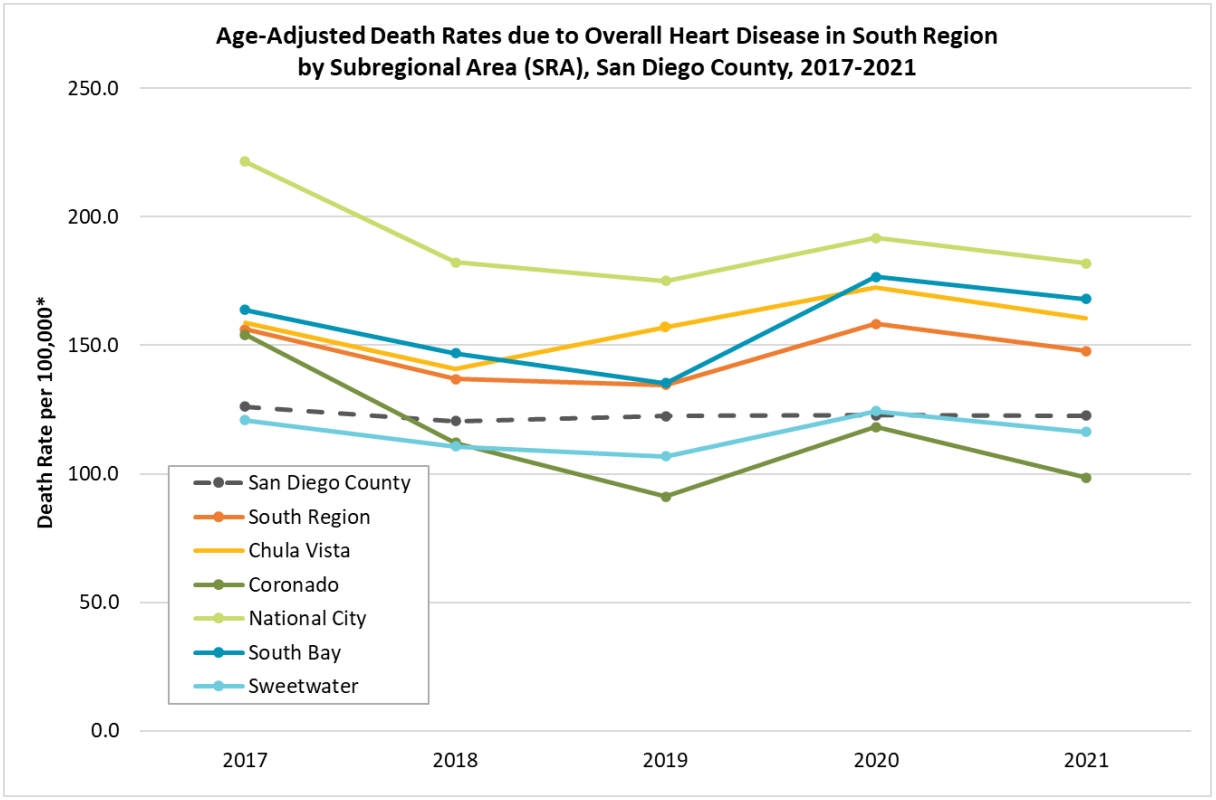
Among South Region SRAs, **Chula Vista SRA** had the highest death rate due to 3-4-50 chronic diseases (389.8 per 100,000) in 2021.

In 2021, **Sweetwater SRA** had the lowest death rate due to 3-4-50 chronic diseases (255.7 per 100,000) compared to all other South Region SRAs.

*Rates per 100,000 population. Population estimates for the years 2020 and 2021 were derived using the 2010 Census and data should be considered preliminary.
†3-4-50 deaths include stroke, coronary heart disease (CHD), diabetes, COPD, asthma, and cancer. Beginning with 2017, COPD includes chronic lower respiratory diseases (COPD/chronic lower respiratory diseases).
§Rates not calculated for fewer than 5 events for the years 2000 to 2019. Rates not calculated for fewer than 11 events for the years 2020 and 2021. Rates not calculated in cases where zip code is unknown.
**The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality including those of 3-4-50 chronic diseases.
Source: California Department of Public Health, 2000-2013 Death Statistical Master Files, 2014-2021 California Vital Records Business Intelligence System (VRBIS). SANDAG, Current Population Estimates.
Prepared by County of San Diego (CoSD), Health and Human Services Agency (HHSA), Public Health Services (PHS), Community Health Statistics Unit, April 2023.

NON-COMMUNICABLE (CHRONIC) DISEASES - DEATH RATES, 2017-2021



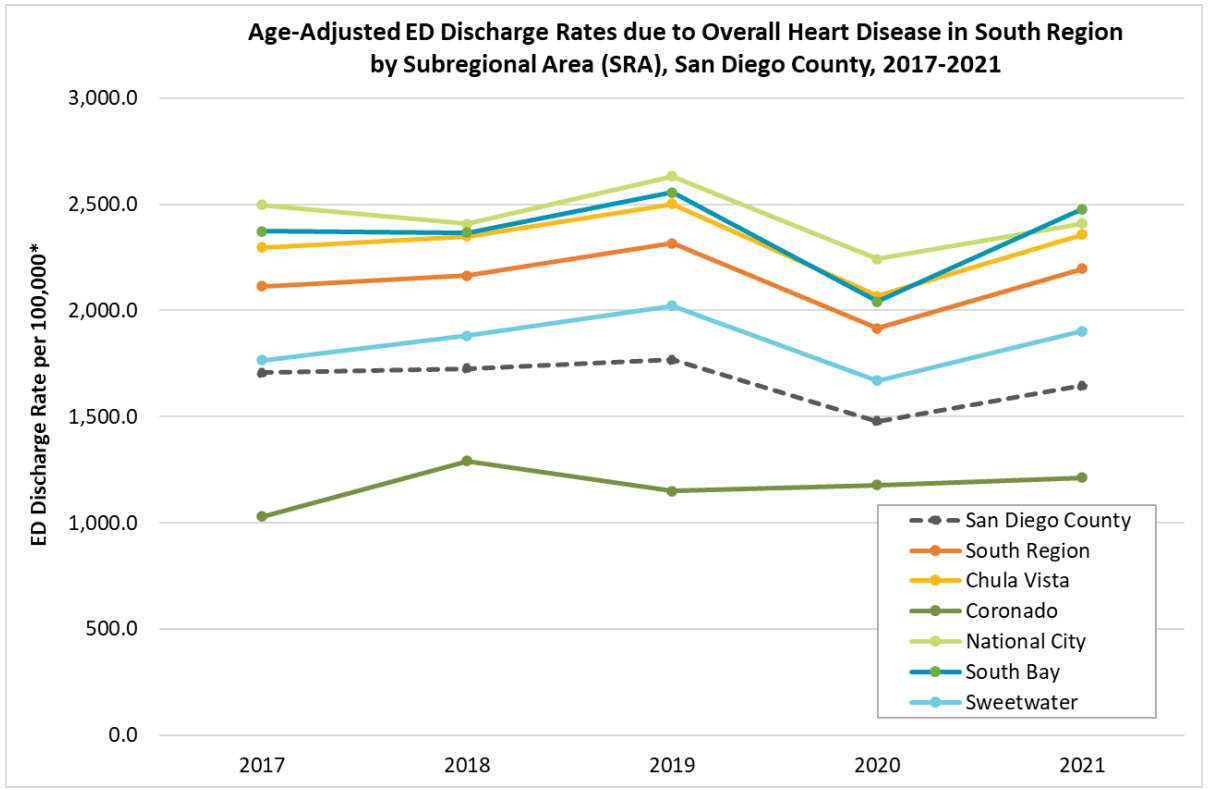


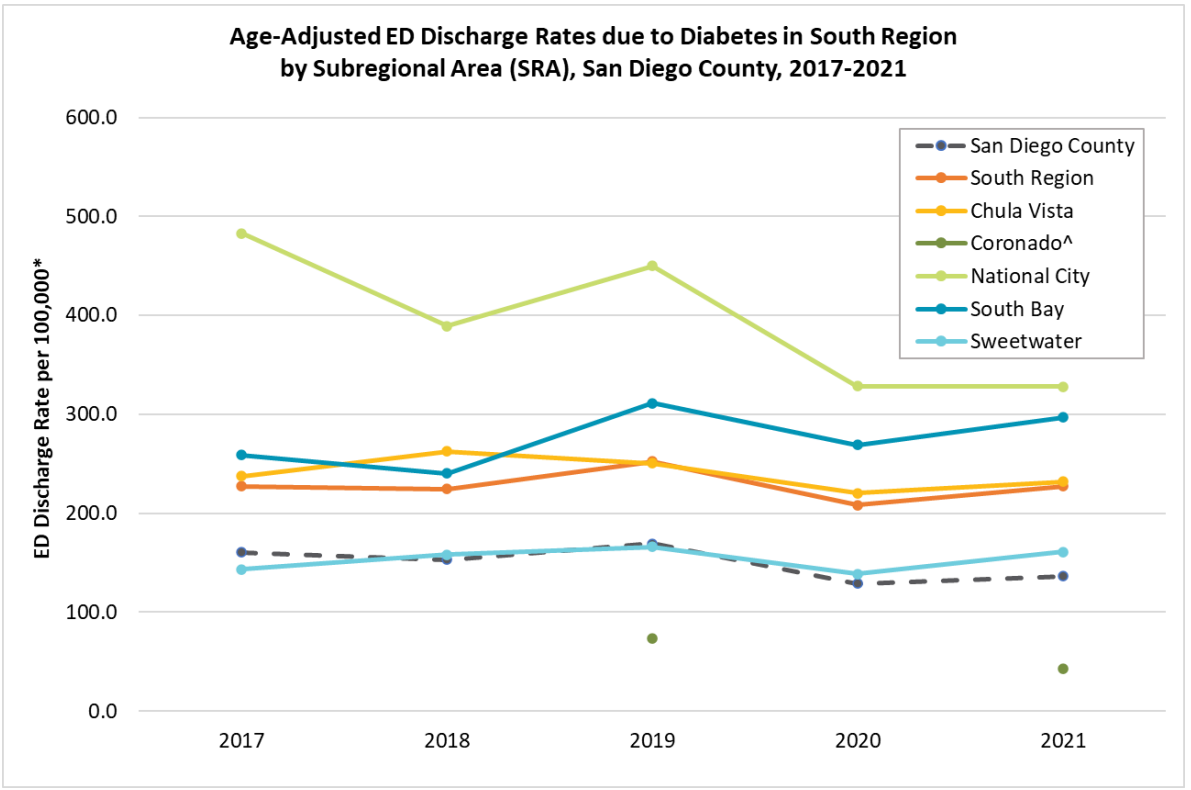
From 2017-2021, **Coronado SRA** had the greatest increase (10.1%) in the age-adjusted death rate due to overall cancer compared to all other SRAs in South Region.

Among South Region SRAs, from 2017-2021, **Coronado SRA** had the greatest decrease (36.1%) in the age-adjusted death rate due to overall heart disease.

*Age-adjusted rates per 100,000 residents.
Source: California Department of Public Health, 2017-2021 California Vital Records Business Intelligence System (VRBIS); SANDAG Population Estimates.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

NON-COMMUNICABLE (CHRONIC) DISEASES – ED DISCHARGE RATES, 2017-2021



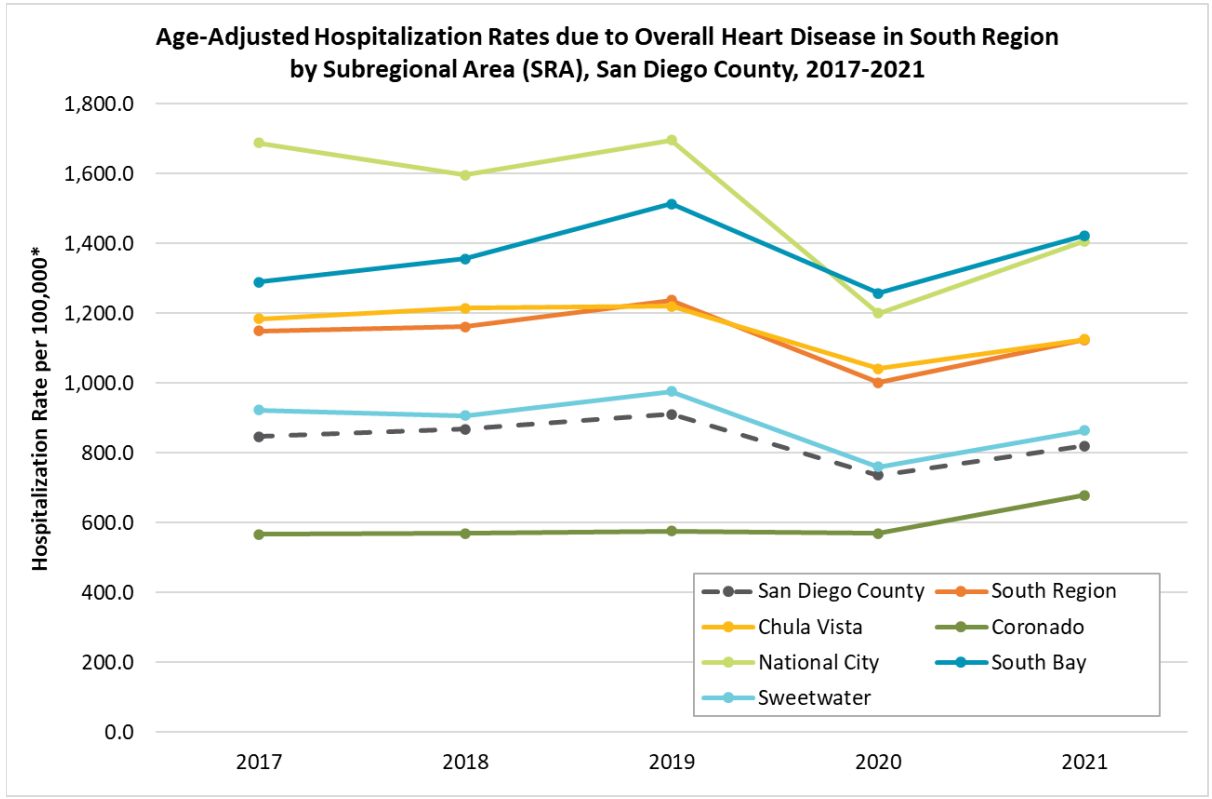


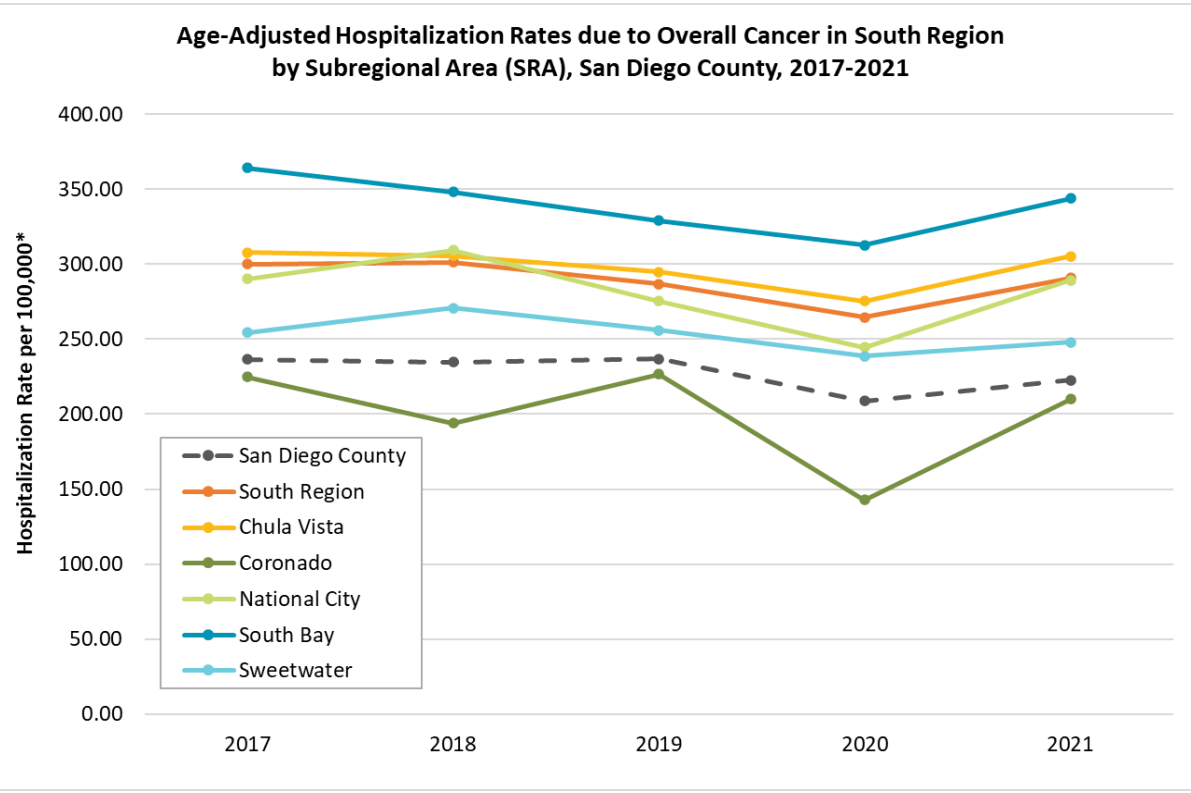
The age-adjusted ED discharge rate due to overall heart disease increased in **South Region and all its SRAs**, except National City SRA, from 2017-2021.

Among South Region SRAs, from 2017-2021, **National City SRA** had the greatest decrease (32.1%) in the age-adjusted ED discharge rate due to diabetes.

*Age-adjusted rates per 100,000 residents.
^Rates not calculated for fewer than 5 events for the years 2016 to 2019. Rates not calculated for fewer than 11 events for the year 2020 to 2021.
Sources: California Office of Statewide Health Planning and Development (OSHPD), Emergency Department Discharge Database and Patient Discharge Database, 2017-2019; California Department of Healthcare Access and Information (HCAI), Emergency Department Discharge Database and Patient Discharge Database, 2020-2021. San Diego Association of Governments (SANDAG) Population estimates, 2017-2021. 2020 and 2021 population estimates were derived using the 2010 Census and data should be considered preliminary.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

NON-COMMUNICABLE (CHRONIC) DISEASES – HOSPITALIZATION RATES, 2017-2021





From 2017-2021, **Coronado SRA** had the greatest increase (19.8%) in the age-adjusted hospitalization rate due to overall heart disease compared to all other SRAs in South Region.

From 2017-2021, the age-adjusted hospitalization rate due to overall cancer decreased in **South Region and all its SRAs**.

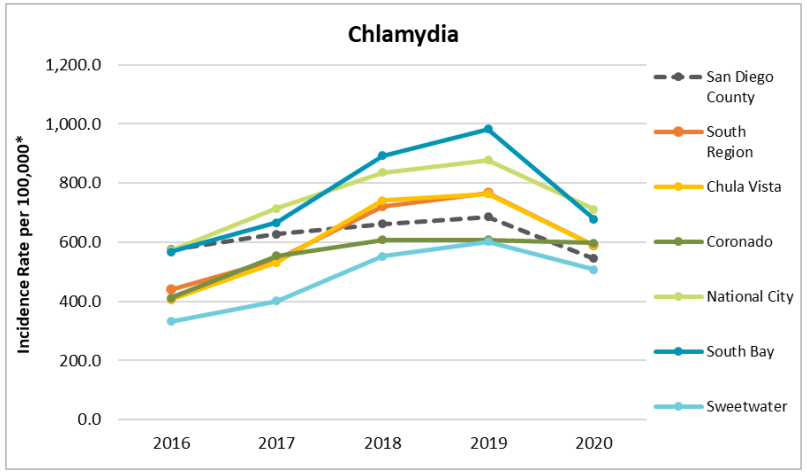
*Age-adjusted rates per 100,000 residents.
Sources: California Office of Statewide Health Planning and Development (OSHPD), Emergency Department Discharge Database and Patient Discharge Database, 2017-2019; California Department of Healthcare Access and Information (HCAI), Emergency Department Discharge Database and Patient Discharge Database, 2020-2021. San Diego Association of Governments (SANDAG) Population estimates, 2017-2021. 2020 and 2021 population estimates were derived using the 2010 Census and data should be considered preliminary.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

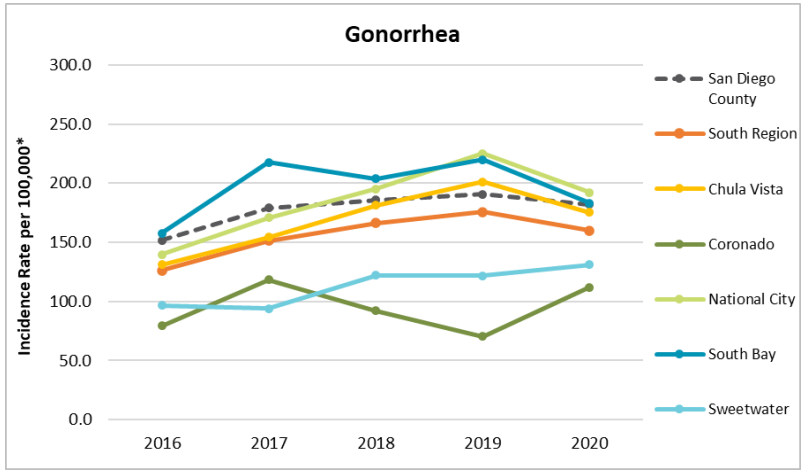
COMMUNICABLE (INFECTIOUS) DISEASES - INCIDENCE RATES, 2016-2020

LIVE WELL SAN DIEGO

Incidence Rates of Chlamydia, Gonorrhea, Syphilis, and Tuberculosis in South Region by Subregional Area (SRA), San Diego County, 2016-2020

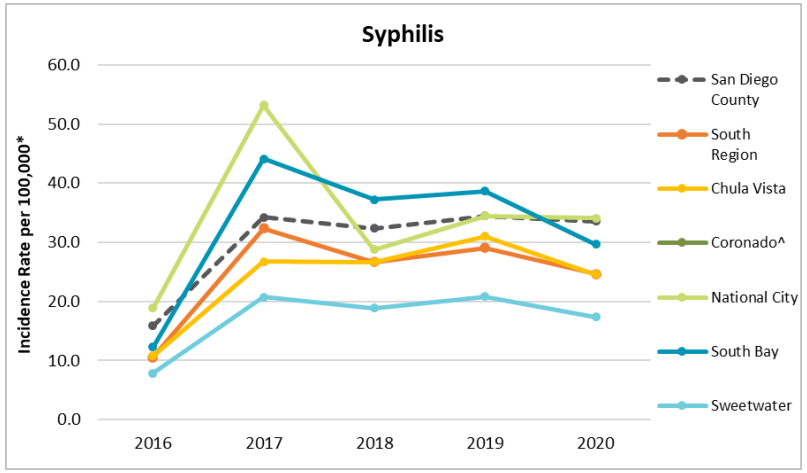
From 2016-2020, **Sweetwater SRA** had the greatest increase in the incidence rate of chlamydia (53.2%), followed by Chula Vista SRA (45.4%).

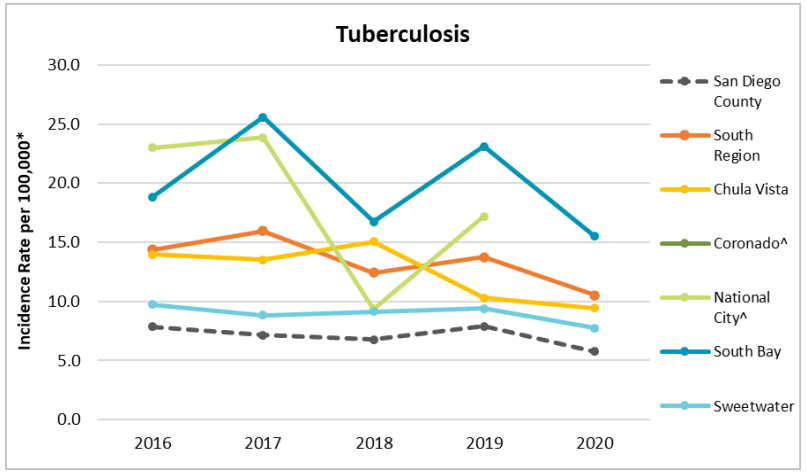




From 2016-2020, **Coronado SRA** had the greatest in the incidence rate of gonorrhea (41.3%), followed by National City SRA (35.9%).

Among South Region SRAs, **South Bay SRA** had a greater increase in the incidence rate of syphilis (141.7%) compared to South Region (133.0%).





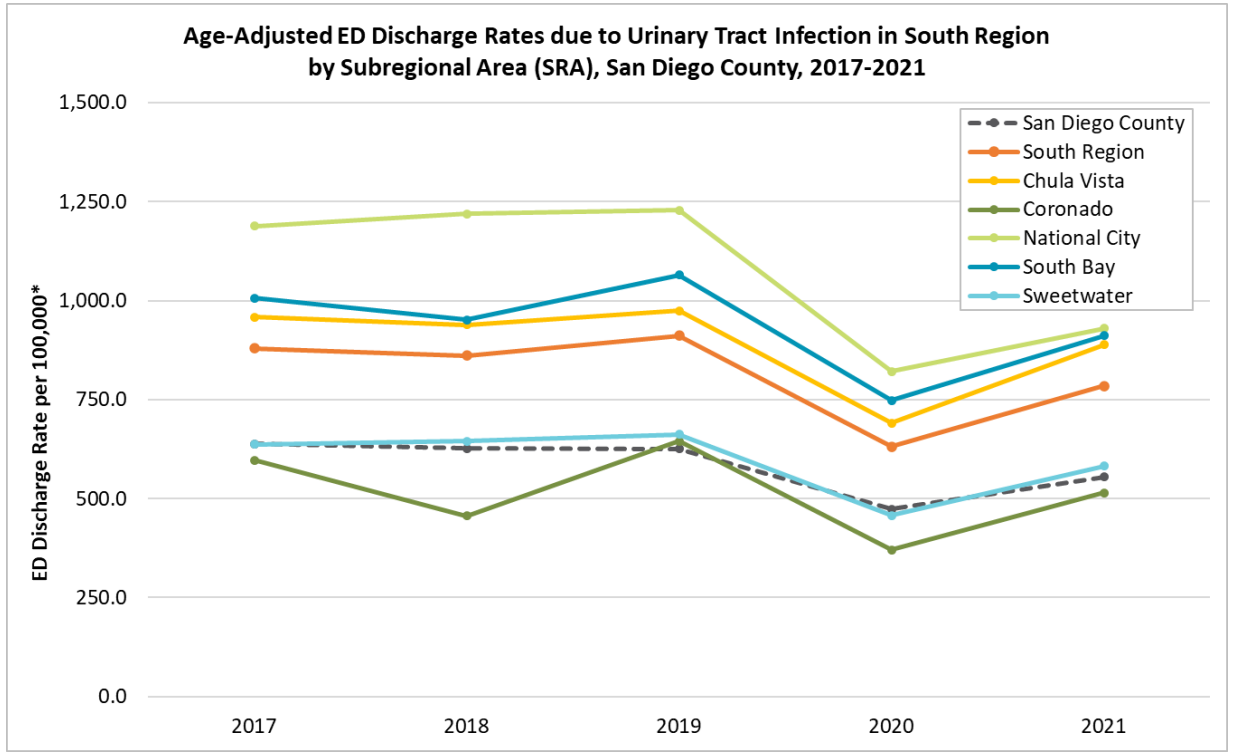
From 2016-2020, the incidence rates of tuberculosis in **South Region and all its SRAs** were higher compared to the incidence rates in San Diego County overall.

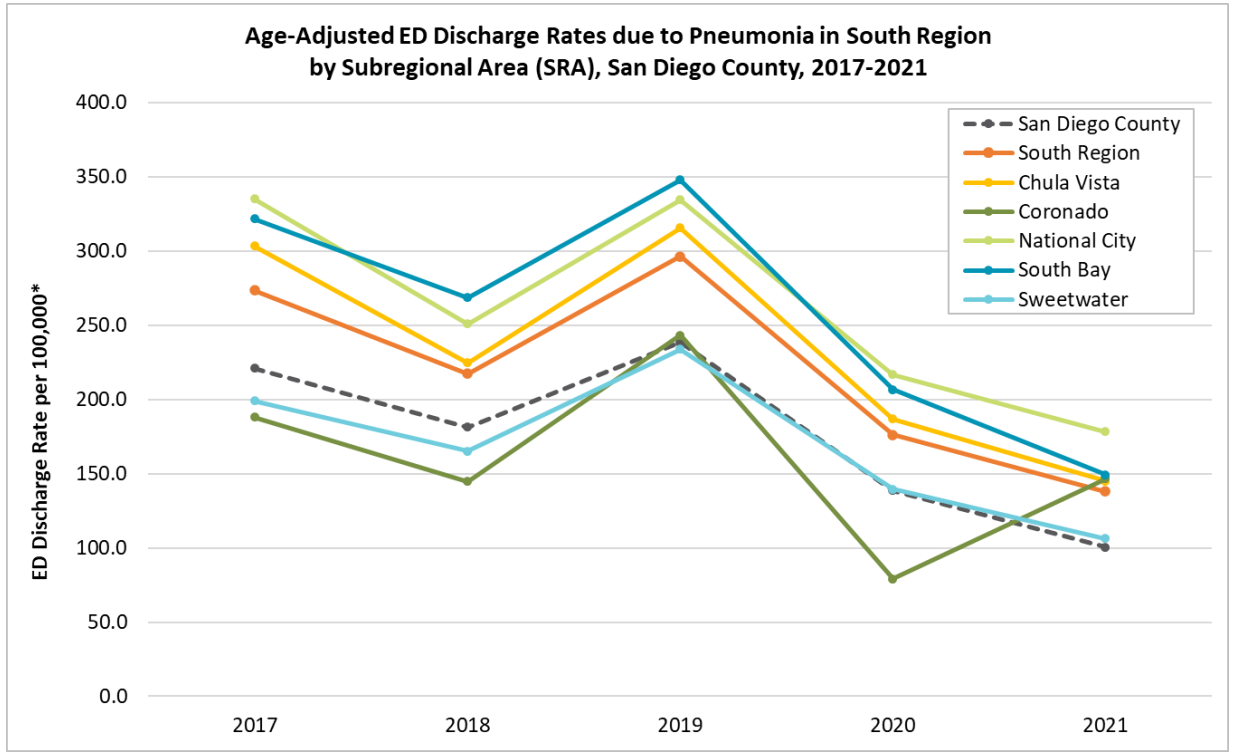
*Rates per 100,000 residents.
^Rates not calculated for fewer than 5 events for the years 2016 to 2019. Rates not calculated for fewer than 11 events for the year 2020.
Source: California Department of Public Health, 2016-2020 California Reportable Disease Information Exchange (CalREDIE). County of San Diego, Tuberculosis and Refugee Health Branch, Tuberculosis Registry, 2016-2020. SANDAG Population Estimates.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

COUNTY OF SAN DIEGO HHSA HEALTH AND HUMAN SERVICES AGENCY

PHAB Accredited Health Department

COMMUNICABLE (INFECTIOUS) DISEASES – ED DISCHARGE RATES, 2017-2021



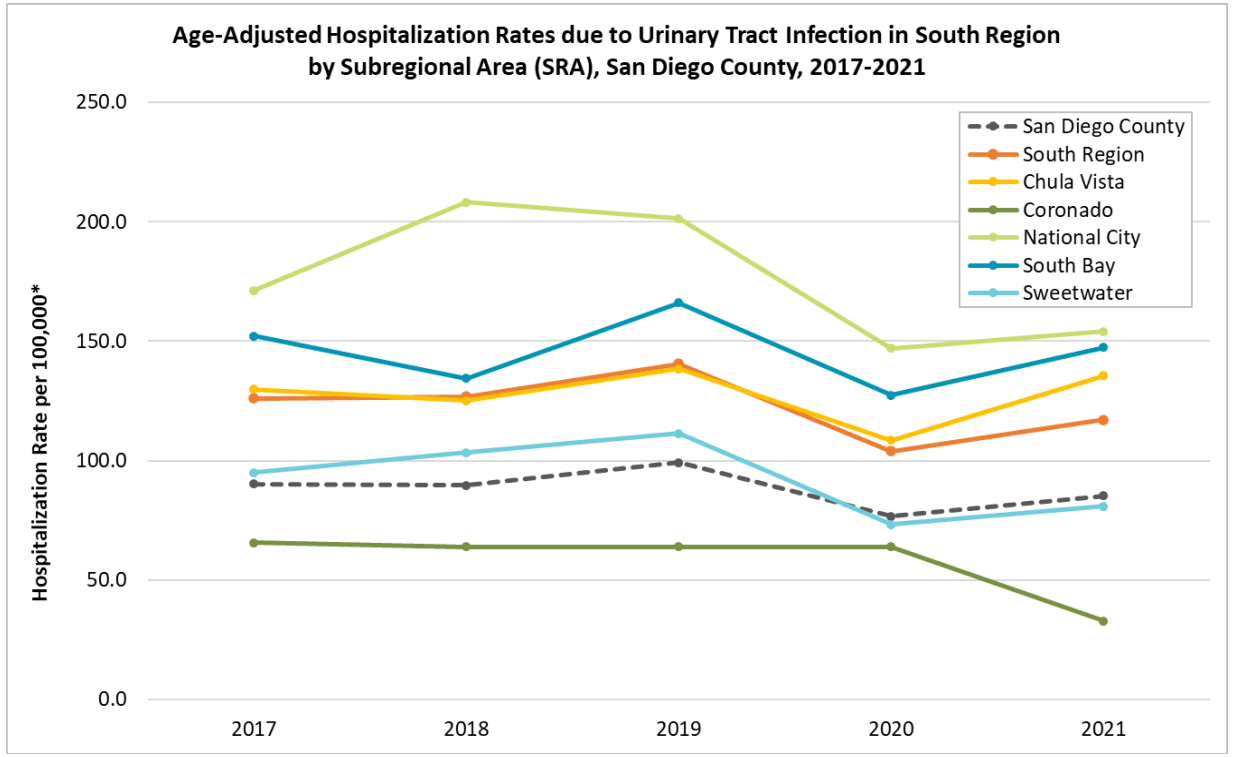


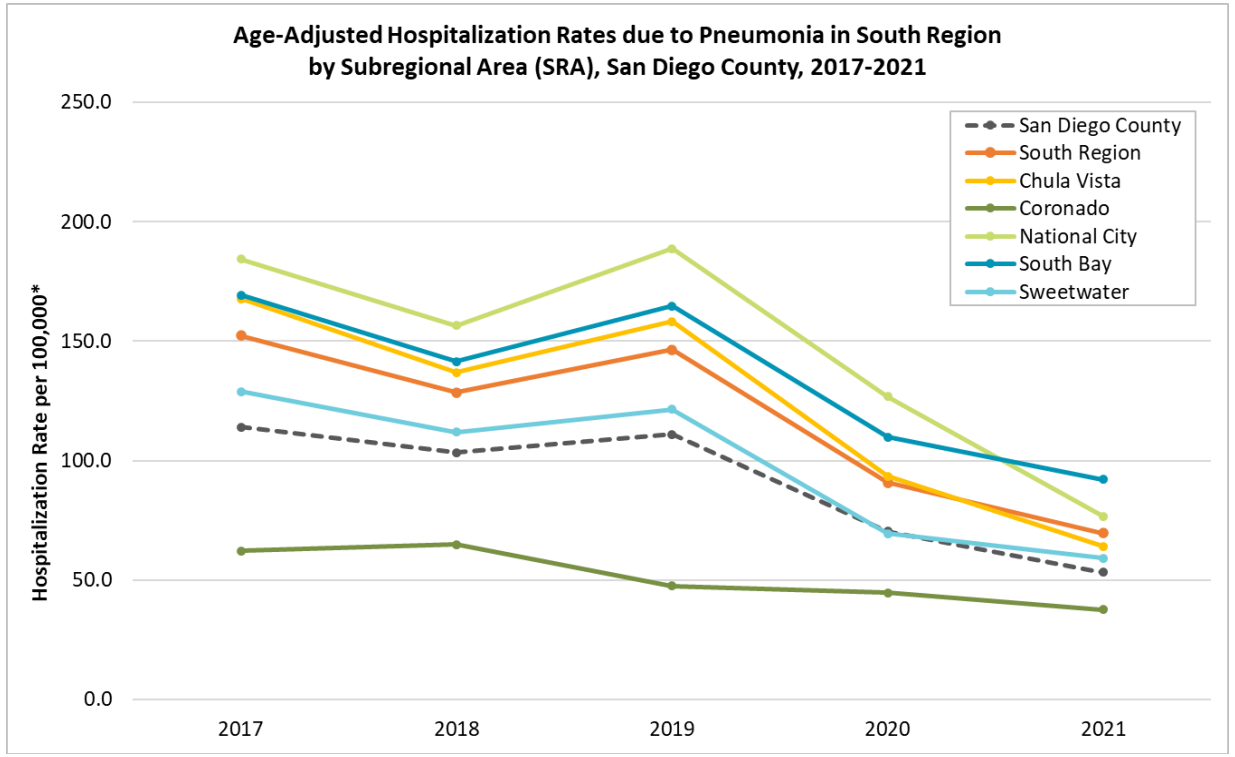
Among South Region SRAs, **National City SRA** had the greatest decrease of age-adjusted ED discharge rate due to urinary tract infection (21.8%) from 2017-2021.

From 2017-2021, **South Bay SRA** had the greatest decrease in the age-adjusted ED discharge rate due to pneumonia (53.6%).

*Age-adjusted rates per 100,000 residents.
Sources: California Office of Statewide Health Planning and Development (OSHPD), Emergency Department Discharge Database and Patient Discharge Database, 2017-2019; California Department of Healthcare Access and Information (HCAI), Emergency Department Discharge Database and Patient Discharge Database, 2020-2021. San Diego Association of Governments (SANDAG) Population estimates, 2017-2021. 2020 and 2021 population estimates were derived using the 2010 Census and data should be considered preliminary.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

COMMUNICABLE (INFECTIOUS) DISEASES – HOSPITALIZATION RATES, 2017-2021





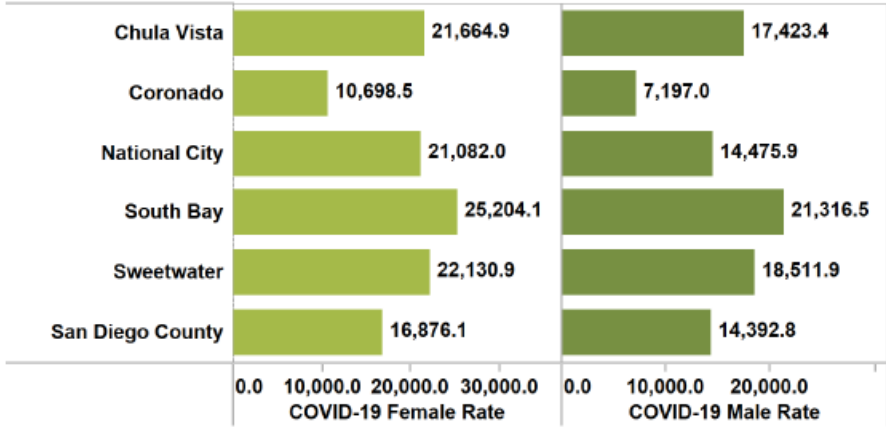
The age-adjusted hospitalization rate due to urinary tract infection decreased in South Region and all its SRAs, except **Chula Vista SRA** where the rate increased by 4.3%.

Among South Region SRAs, **Chula Vista SRA** had the greatest decrease in the age-adjusted hospitalization rate due to pneumonia (61.8%) from 2017-2021.

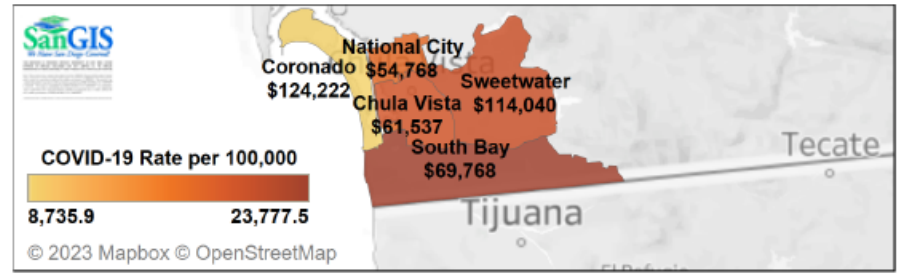
*Age-adjusted rates per 100,000 residents.
Sources: California Office of Statewide Health Planning and Development (OSHPD), Emergency Department Discharge Database and Patient Discharge Database, 2017-2019; California Department of Healthcare Access and Information (HCAI), Emergency Department Discharge Database and Patient Discharge Database, 2020-2021. San Diego Association of Governments (SANDAG) Population estimates, 2017-2021. 2020 and 2021 population estimates were derived using the 2010 Census and data should be considered preliminary.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

SAN DIEGO COUNTY CUMULATIVE COVID-19 RATE* PER 100,000 RESIDENTS BY SOUTH REGION SUB-REGIONAL AREAS^ (DATA THROUGH JANUARY 1, 2022 - DECEMBER 31, 2022)

COVID-19 RATE BY SEX, SOUTH REGION SUB-REGIONAL AREAS



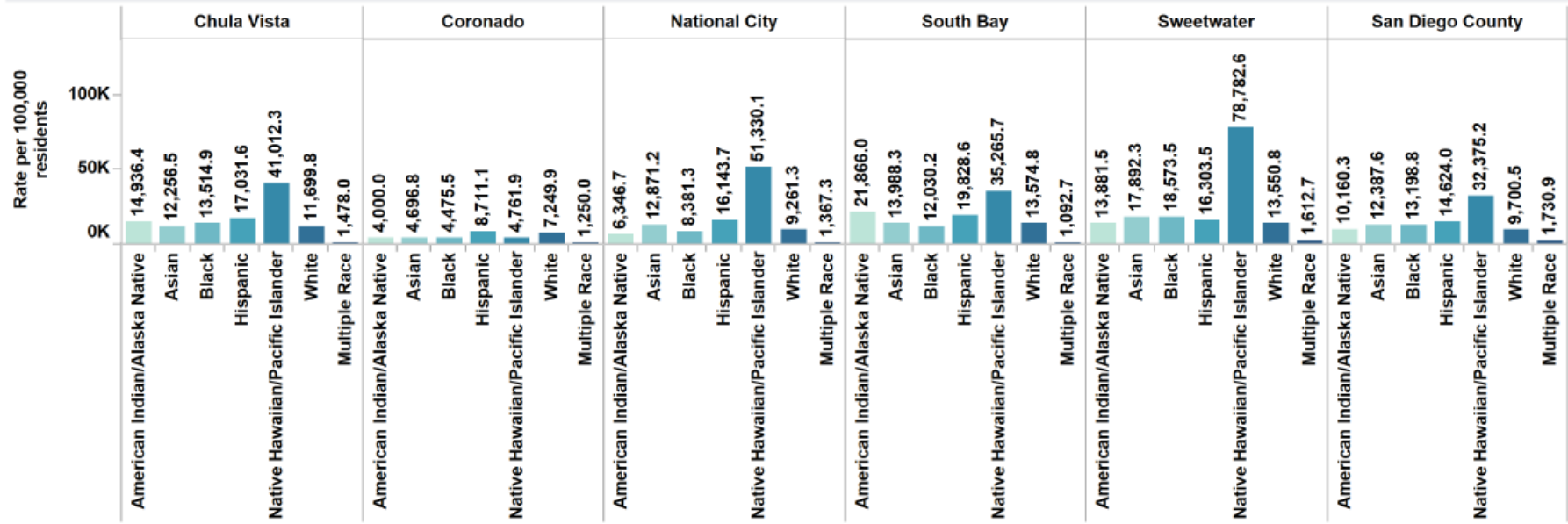
SAN DIEGO COUNTY COVID-19 RATE BY SOUTH REGION SUB-REGIONAL AREAS*** (MEDIAN HOUSEHOLD INCOME IN DOLLARS)



Median household income source: ESRI Community Analyst, 2022. *A rate is the number of cases divided by the population, usually multiplied by a constant (100,000 in the following example). For example 987 cases, divided by population of 654,321, would be a rate of 150.8 per 100,000 population. This means for every 100,000 people, 150- 151 cases would be expected. ***South Bay sub-regional area include zip codes: 91911, 91913, 91915, 91932, 92154, 92173.

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

COVID-19 RATE BY RACE/ETHNICITY**, SOUTH REGION SUB-REGIONAL AREAS



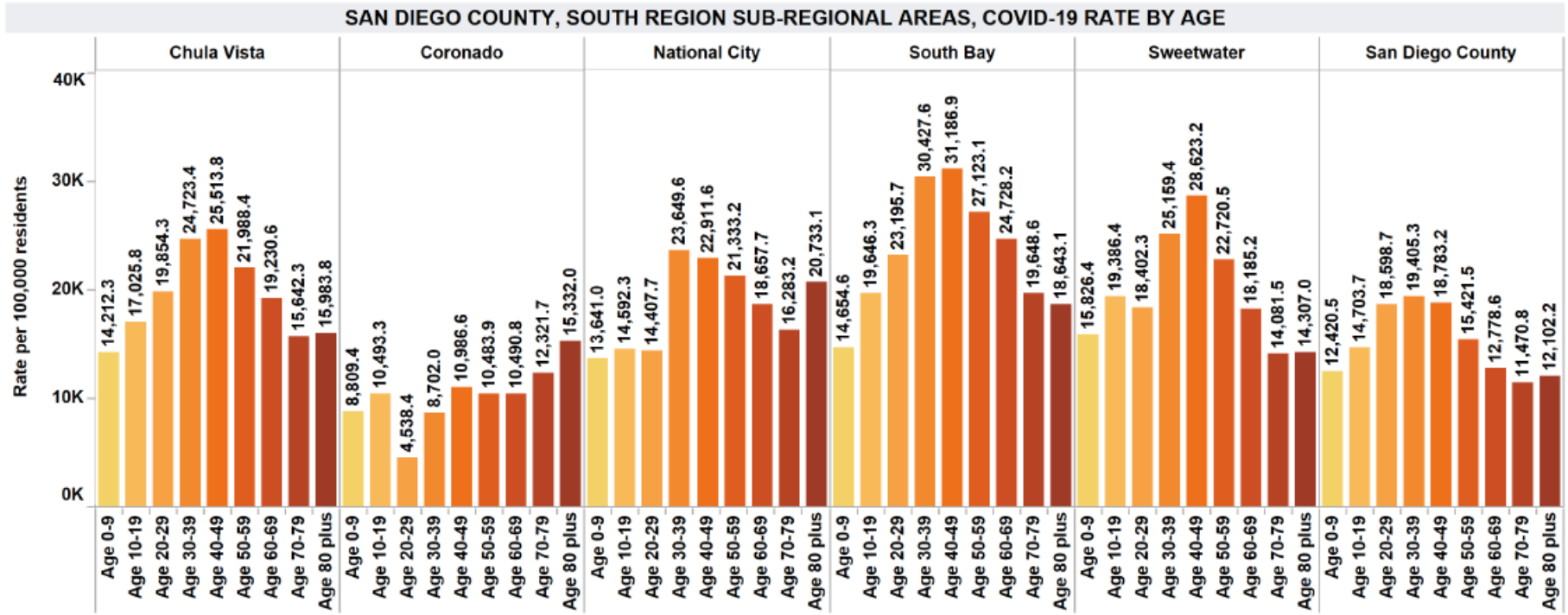
**Persons of Hispanic/Latino ethnicity may belong to any race group. All categories except Hispanic/Latino include persons for whom race is known but ethnicity is non-Hispanic or unknown. Data through 1/1/2022-12/31/2022. Data are preliminary and subject to change. More information may become available as individual case investigations are completed. ^SRA of residence, which may not be location of exposure, only cases with known zip code are included in rate calculation. Data source: San Diego County Communicable Disease Registry.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 1/27/2023.

HHSA

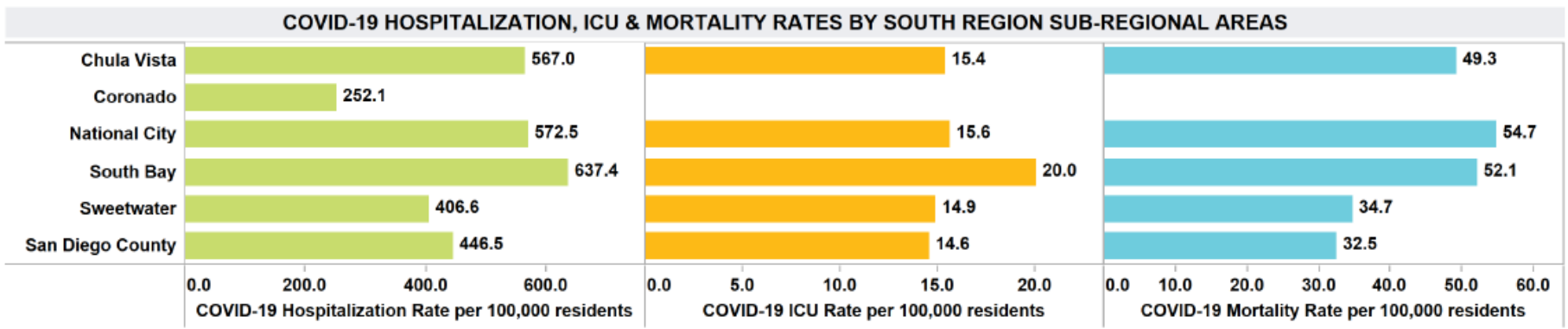
LIVE WELL SAN DIEGO

SAN DIEGO COUNTY CUMULATIVE COVID-19 RATE* PER 100,000 RESIDENTS BY SOUTH REGION SUB-REGIONAL AREAS^ (DATA THROUGH JANUARY 1, 2022 - DECEMBER 31, 2022)



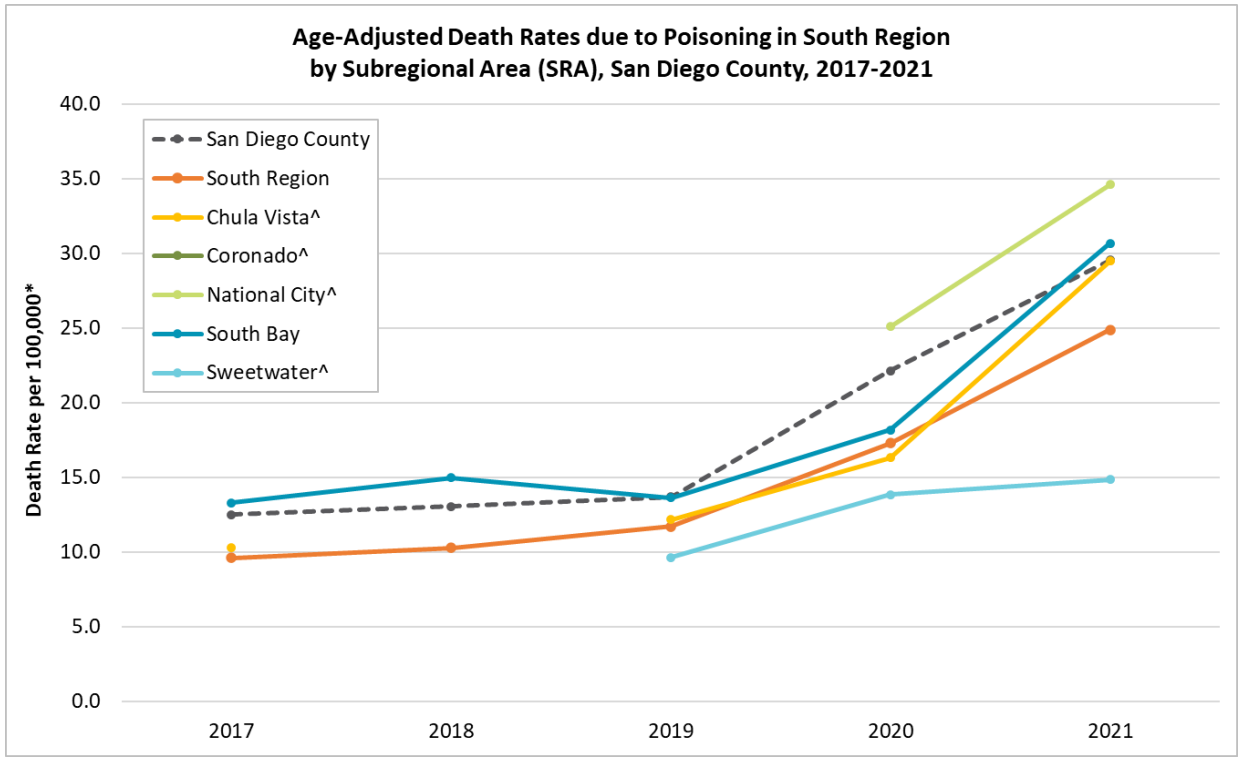
*A rate is the number of cases divided by the population, usually multiplied by a constant (100,000 in the following example). For example 987 cases, divided by population of 654,321, would be a rate of 150.8 per 100,000 population. This means for every 100,000 people, 150- 151 cases would be expected.

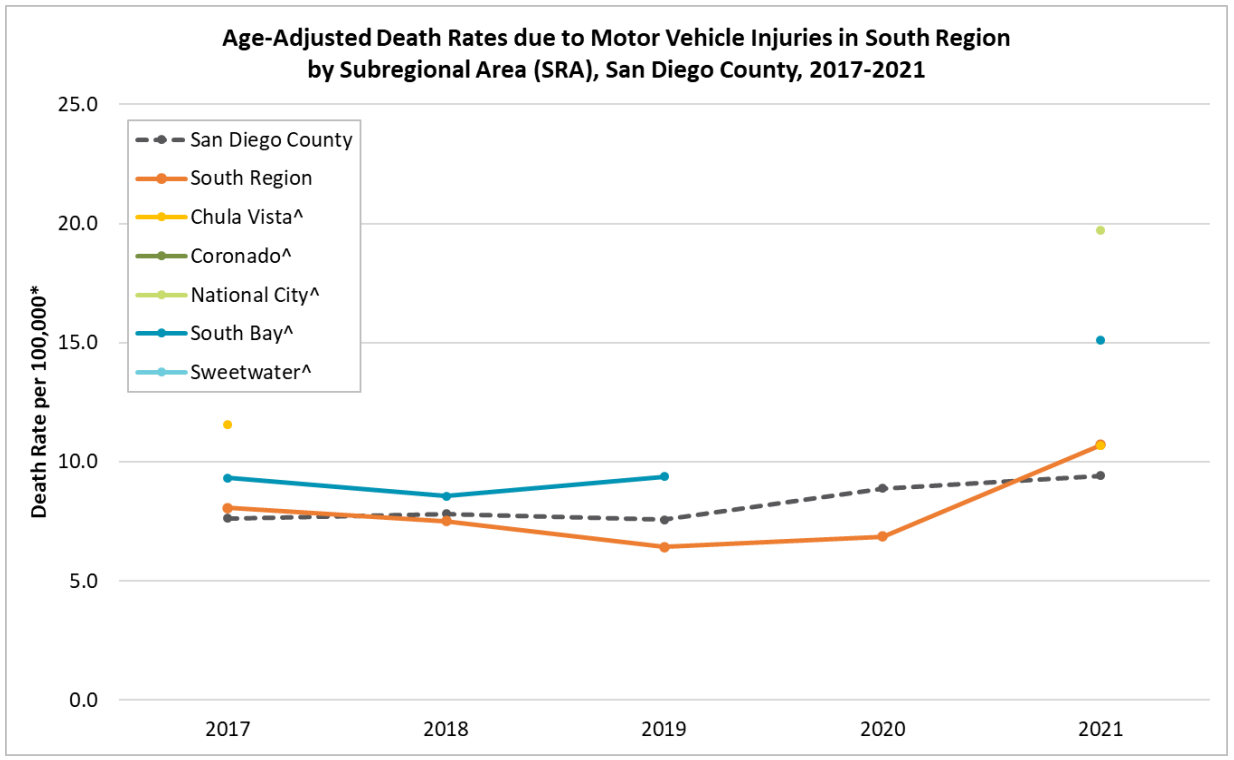
Health equity is achieved when "every person has the opportunity to 'attain his or her full health potential' and no one is disadvantaged from achieving this potential because of social position or other socially determined circumstances." -Centers for Disease Control and Prevention



Data through 1/1/2022-12/31/2022. Data are preliminary and subject to change. More information may become available as individual case investigations are completed. ^SRA of residence, which may not be location of exposure, only cases with known zip code are included in rate calculation. Data source: San Diego County Communicable Disease Registry.
Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 1/27/2023.

INJURY – DEATH RATES, 2017-2021



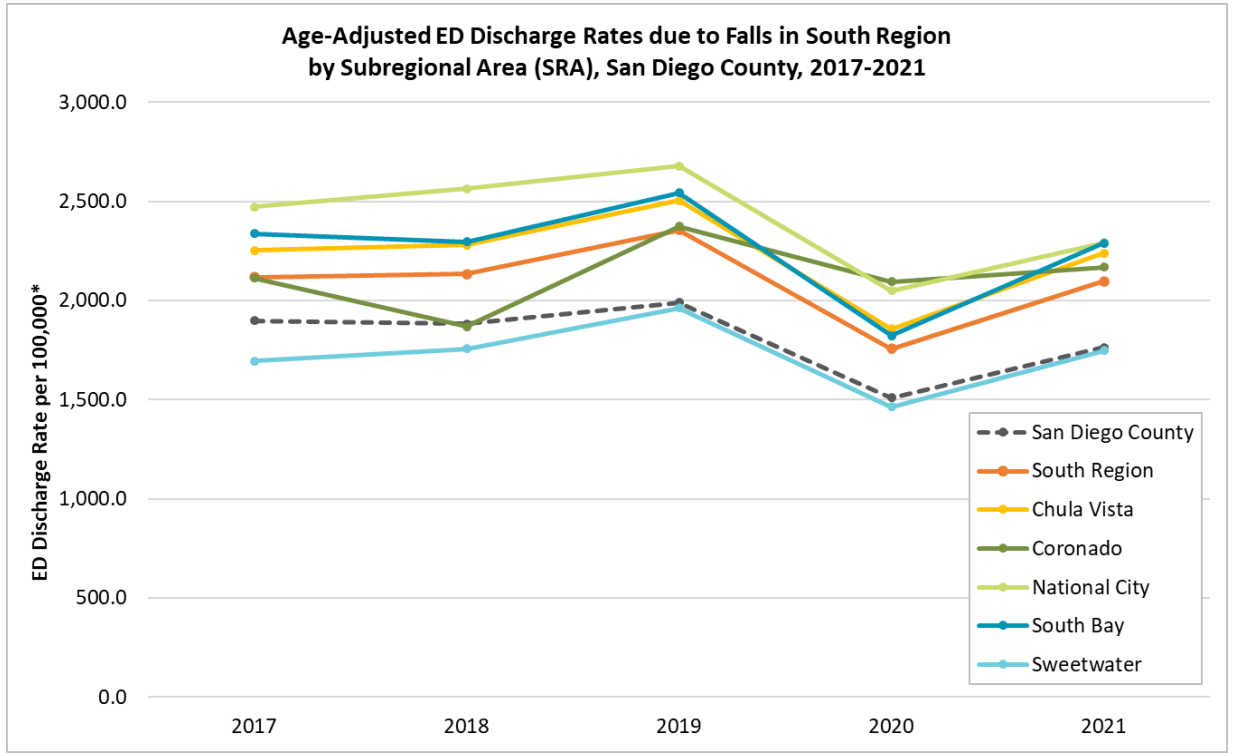


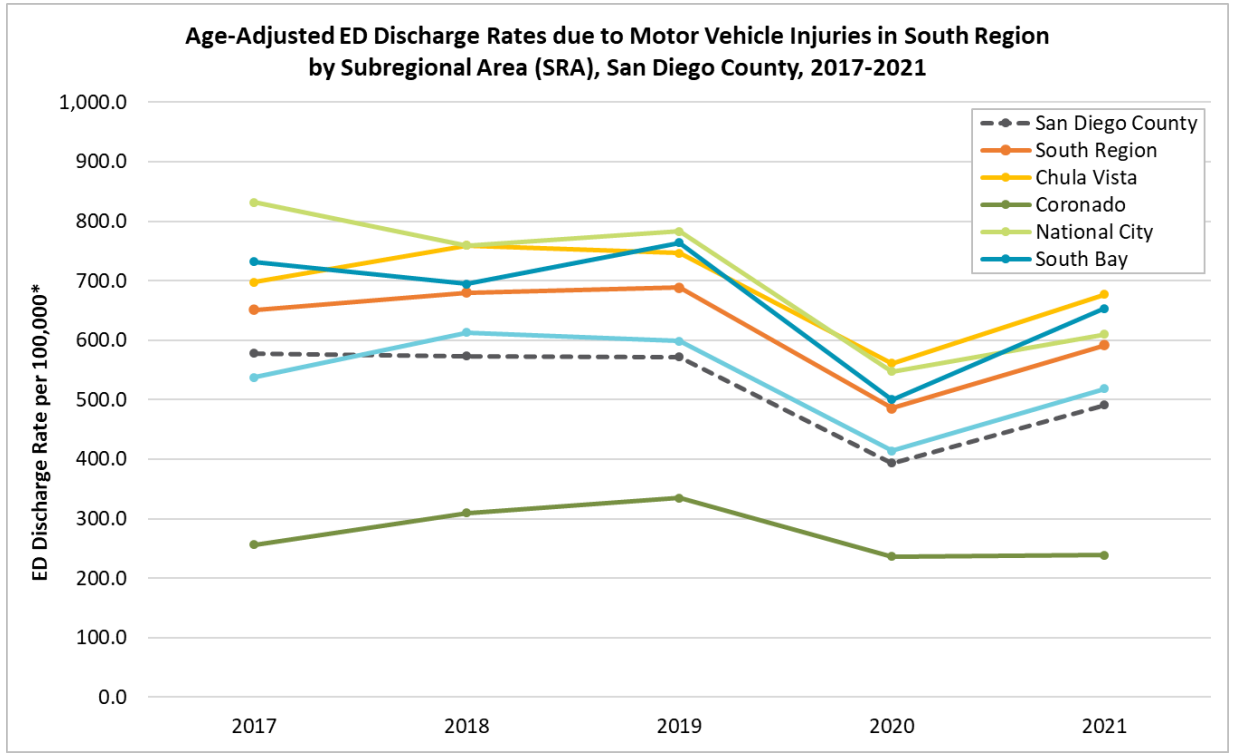
Among South Region SRAs, **Chula Vista SRA** had the greatest increase (186.4%) in the age-adjusted death rate due to poisoning from 2017-2021.

The age-adjusted death rate due to motor vehicle injuries in **South Region** increased from 8.1 per 100,000 residents in 2017 to 10.7 per 100,000 residents in 2021.

*Age-adjusted rates per 100,000 residents.
^Age-adjusted rates not calculated for fewer than 5 events for the years 2017 to 2019. Rates not calculated for fewer than 11 events for the years 2020 to 2021.
Source: California Department of Public Health, 2017-2021 California Vital Records Business Intelligence System (VRBIS); SANDAG Population Estimates.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

INJURY – ED DISCHARGE RATES, 2017-2021



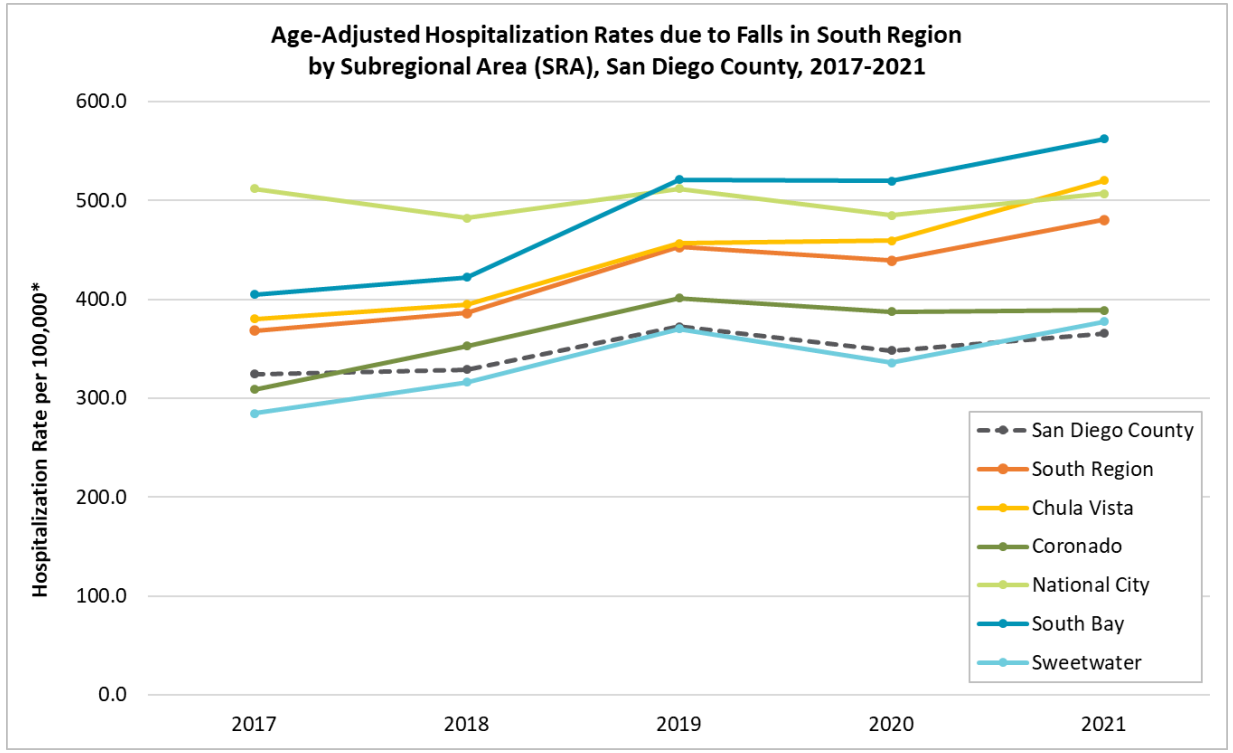


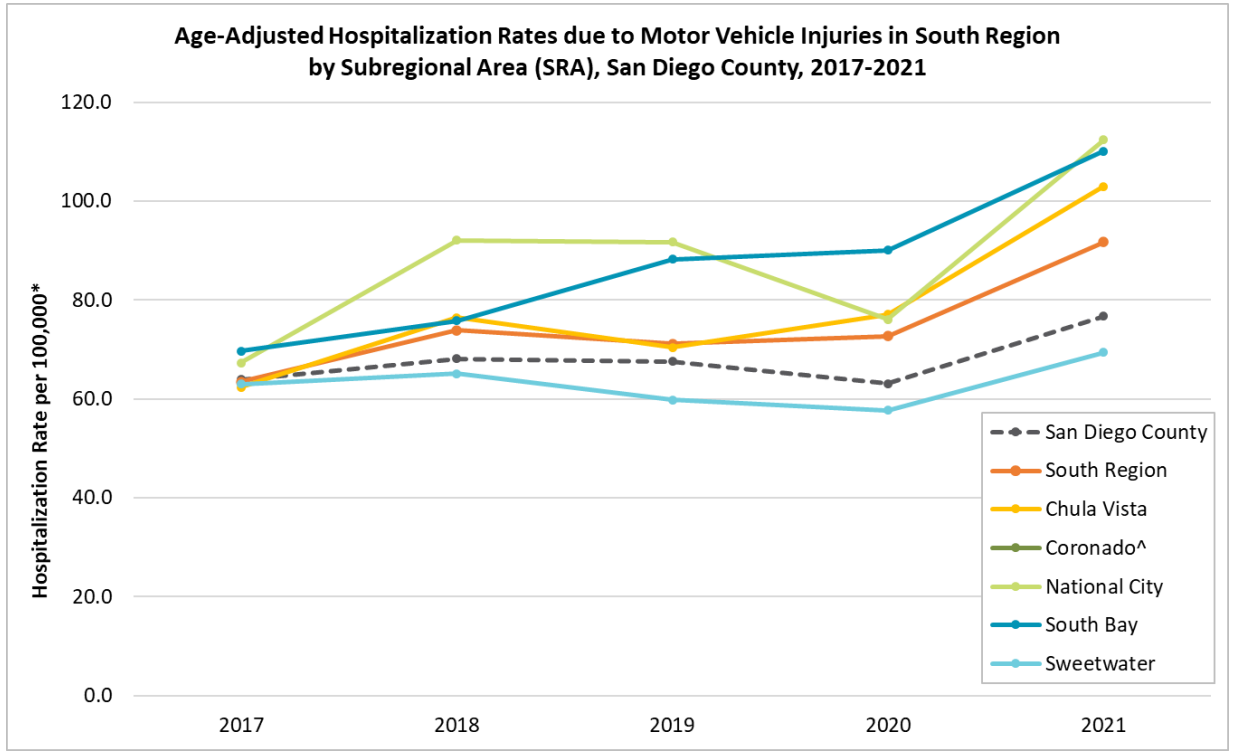
Among South Region SRAs, **Sweetwater SRA** had the greatest increase (3.2%) in the age-adjusted ED discharge rate due falls from 2017-2021.

From 2017-2021, **National City SRA** had the greatest decrease (26.7%) in the age-adjusted ED discharge rate due to motor vehicle injuries.

*Age-adjusted rates per 100,000 residents.
Sources: California Office of Statewide Health Planning and Development (OSHPD), Emergency Department Discharge Database and Patient Discharge Database, 2017-2019; California Department of Healthcare Access and Information (HCAI), Emergency Department Discharge Database and Patient Discharge Database, 2020-2021. San Diego Association of Governments (SANDAG) Population estimates, 2017-2021. 2020 and 2021 population estimates were derived using the 2010 Census and data should be considered preliminary.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

INJURY – HOSPITALIZATION RATES, 2017-2021





From 2017-2021, **South Bay SRA** had the greatest increase (38.8%) in the age-adjusted hospitalization rate due to falls, followed by Chula Vista SRA (36.8%).

Among South Region SRAs, **National City SRA** had the greatest increase (66.9%) in the age-adjusted hospitalization rate due to motor vehicle injuries from 2017-2021.

*Age-adjusted rates per 100,000 residents.
^Age-adjusted rates not calculated for fewer than 5 events for the years 2017 to 2019. Rates not calculated for fewer than 11 events for the years 2020 to 2021.
Sources: California Office of Statewide Health Planning and Development (OSHPD), Emergency Department Discharge Database and Patient Discharge Database, 2017-2019; California Department of Healthcare Access and Information (HCAI), Emergency Department Discharge Database and Patient Discharge Database, 2020-2021. San Diego Association of Governments (SANDAG) Population estimates, 2017-2021. 2020 and 2021 population estimates were derived using the 2010 Census and data should be considered preliminary.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, April 2023.

MATERNAL AND CHILD HEALTH OUTCOMES

INFANT MORTALITY (BIRTH COHORT FILE), SAN DIEGO COUNTY RESIDENCE

	2015			2016			2017			2018			2019		
	Infant Deaths	Live Births	Infant Mortality Rate	Infant Deaths	Live Births	Infant Mortality Rate	Infant Deaths	Live Births	Infant Mortality Rate	Infant Deaths	Live Births	Infant Mortality Rate	Infant Deaths	Live Births	Infant Mortality Rate
San Diego County	161	43,970	3.7	172	42,746	4	154	41,255	3.7	174	40,001	4.3	136	38,661	3.5
Health and Human Services Agency Region of Mother															
Central	31	6,938	4.5	23	6,900	3.3	31	6,511	4.8	26	6,204	4.2	23	6,009	3.8
East	29	6,579	4.4	23	6,519	3.5	25	6,473	3.9	29	6,341	4.6	20	6,056	3.3
North Central	23	7,671	3	29	7,462	3.9	28	7,156	3.9	22	7,053	3.1	25	6,977	3.6
North Coastal	18	7,024	2.6	30	6,818	4.4	19	6,418	3	26	6,451	4	12	6,141	2
North Inland	27	7,540	3.6	24	7,223	3.3	16	7,107	2.3	25	6,799	3.7	27	6,632	4.1
South	**31**	**7,916**	**3.9**	**42**	**7,519**	**5.6**	**35**	**7,333**	**4.8**	**46**	**7,145**	**6.4**	**27**	**6,775**	**4**
Unknown	<5	302	*	<5	305	*	<5	257	*	<5	8	*	<5	71	*

Infant mortality is defined as death under one year of age. - Rates are number of infant deaths per 1,000 live births. - Data are from ""birth cohort"" files which contain all birth data for infants born in a given year; data for any infant deaths are also linked to the specific birth in the file. Infant mortality statistics obtained from this file are, in some cases, more accurate than those obtained from the separate death and birth files. However, the cohort file takes longer to produce.- The large proportion of births with unknown race/ethnicity affects the accuracy of statistics by race/ethnicity.- The large proportion of births with unknown educational attainment affects the accuracy of statistics by educational attainment.*Numbers are censored and rates are not calculated when the number of events is fewer than 5 (indicated by ""<5""). Interpret with caution rates calculated for fewer than 20 events since they are considered statistically unreliable.

Source: State of California, Department of Public Health, Center for Health Statistics and Informatics, Birth Cohort Statistical Master Files.

Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Maternal, Child and Family Health Services (www.sdmcfhs.org), 6/21/2022.

CHSU PRODUCTS

COUNTY OF SAN DIEGO
HHSA
HEALTH AND HUMAN SERVICES AGENCY
PUBLIC HEALTH SERVICES

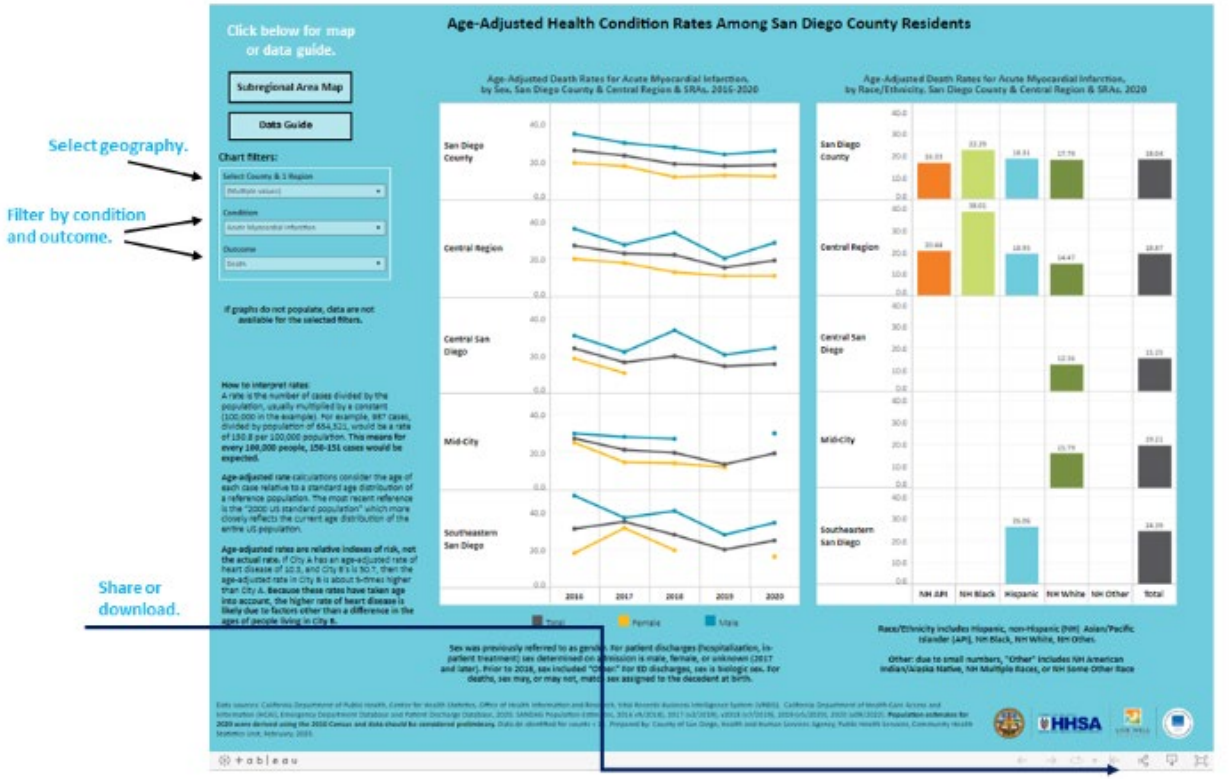
LIVE WELL SAN DIEGO

ACCREDITED HEALTH DEPARTMENT
PHAB
Advancing public health performance
PUBLIC HEALTH ACCREDITATION BOARD

HEALTH DASHBOARDS

Community Profiles
(by Region or Municipality)

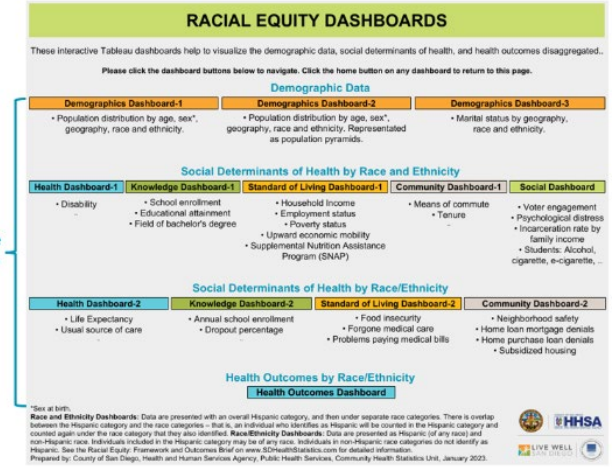
Community Profile Age-Adjusted Trends
(by Region or Municipality)



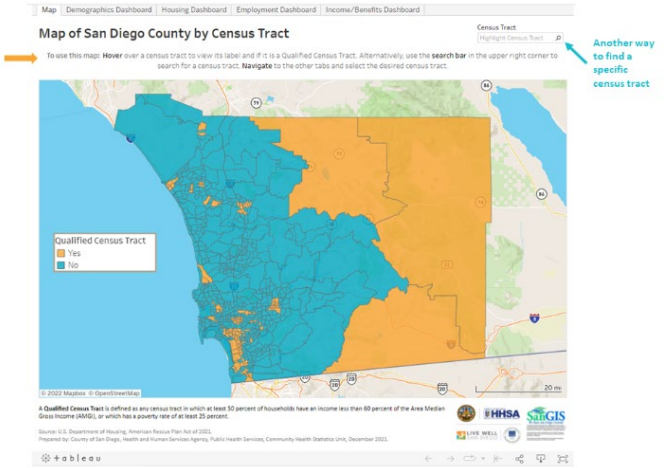
HEALTH EQUITY DASHBOARDS

Racial Equity Dashboard

Click the colored dashboard buttons on the home page to navigate to different dashboards



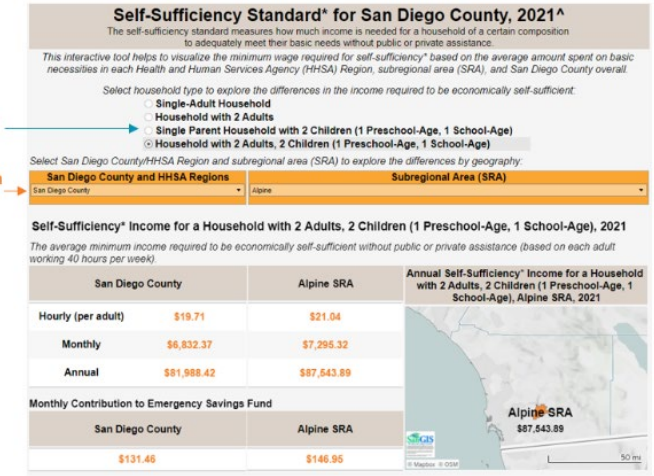
Socioeconomic Disparities Dashboard



Self-Sufficiency Dashboard

Select household type

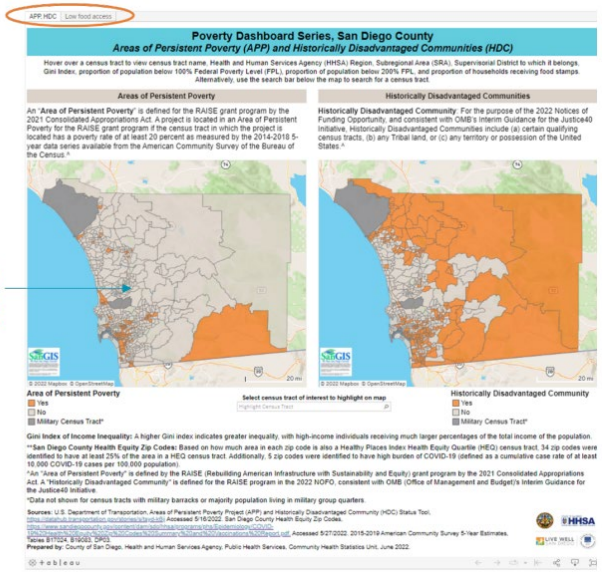
Use the drop-down filters to choose geography



Poverty Dashboard

Select tabs to navigate between topics

Hover the cursor over the census tracts in the map to view



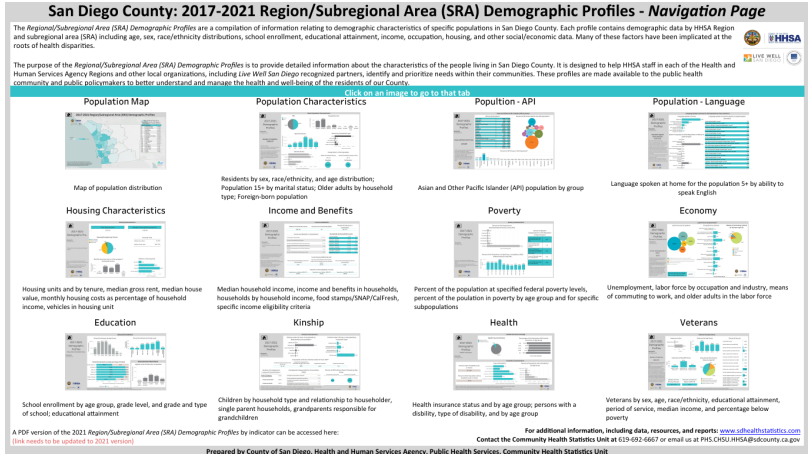
DEMOGRAPHIC PROFILES

PDF

Available for:

- Regions and Subregional Areas
- Supervisorial Districts
- Cities and the Unincorporated Area

Interactive Tableau Dashboards



Available for:

- Regions and Subregional Areas
- Supervisorial Districts
- Cities and the Unincorporated Area
- Census Tracts

Questions?

For more information, including data, resources and reports, from Public Health Services:
www.SDHealthStatistics.com

Contact Information:
Christopher O'Malley, MPH, CPH
Christopher.Omalley@sdcounty.ca.gov

Maria Peña, MPH
Maria.Pena@sdcounty.ca.gov

Community Health Statistics Unit
PHS.CHSU.HHSA@sdcounty.ca.gov

On May 17, 2016, the County of San Diego Health and Human Services Agency Division of Public Health Services received accreditation from the Public Health Accreditation Board.