2025 Community Health Needs Assessment

HSAB Meeting
October 7, 2025

HOSPITAL ASSOCIATION of San Diego & Imperial Counties

SDSU | Institute for Public Health

SAN DIEGO CHNA

COMMUNITY HEALTH NEEDS ASSESSMENT

The CHNA aims to

identify, understand, and prioritize

the health-related needs of San Diego County communities.

https://hasdic.org/chna/

2025 CHNA Participating Hospitals & Health Systems

- Alvarado Parkway Institute Behavioral Health System
- Aurora San Diego Behavioral Health Care
- Grossmont Healthcare District
- Kaiser Permanente
- Palomar Health – Reimagining Healthcare
- Paradise Valley Hospital
- County of San Diego Health and Human Services Agency
- Rady Children's Health
- Scripps
- Select Specialty Hospital
- Sharp
- Tri-City Medical Center
- UC San Diego Health
- VA – U.S. Department of Veterans Affairs – VA San Diego Healthcare System

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CHNA Research Partner since 2012

Practice arm of the School of Public Health

Facilitates high-quality public health practice

Recipient of the ASPPH Harrison C Spencer Award for 2025

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2025 CHNA Research Guidelines

- Academic & Analytical
- Actionable
- Accessible
- Accountable
- Community based

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CHNA Health Equity Framework

Equity

We commit to research and community engagement strategies that purposefully seek to quantify and describe inequities that disproportionately impact our disadvantaged populations due to structural components.

Inclusion

We commit to meaningful engagement with community organizations, community members, and leaders who serve diverse populations. We understand the importance of sharing a space for listening and honoring perspectives of those with lived experiences.

Empathy

We commit to employing a trauma-informed approach that works to break stigma by creating safe and meaningful opportunities to engage community members and community partners.

Responsibility

We commit to using evidence-informed research methods, analyzing the best available data, and making it available to community members and community partners.

Accountability

We commit to sharing the results of our research as well as our plans to address the findings with everyone who participates.

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Primary Research Questions

What are the most pressing needs of our community?

How can hospitals & health systems help address those needs?

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Data Sources

- 2-1-1 San Diego Community Information Exchange (CIE) Client Profile Report
- CA Department of Health Care Access & Information (HCAI)
- California Health Interview Survey (CHIS)
- CDC Morbidity and Mortality Weekly Report (MMWR)
- Census Bureau - American Community Survey (ACS)
- Centers for Disease Control and Prevention (CDC) CASPER Report
- County of San Diego Community Health Statistics Unit (CHSU) Data
- San Diego Association of Governments (SANDAG) Data
- Youth Risk Behavior Survey (YRBS)

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COMMUNITY HEALTH NEEDS ASSESSMENT

Community Engagement Overview

40

Interviews & Focus Groups

465

Field Interviews

1,037

Online Community Survey

Total

1,625

Number of individuals who participated in the CHNA overall

HASD&IC Collaborative Focus Groups & Key Informant Interviews Participating Organizations

- Alcohol & Drug Service Provider Association (ADSPA) Executive Committee
- Alliance for Regional Solutions*
- California State University San Marcos Basic Needs Department*
- Disability Advocate
- Fallbrook Union High School District*
- Family Health Centers of San Diego
- Global Communities' Healthy Start San Diego (HSSD) Birth Worker Initiative*
- Imperial Beach Clinic*
- Interfaith Community Services*
- Jackie Robinson YMCA*
- JIREH Providers
- Juvenile Court and Community Schools*
- Kitchens for Good*
- Legal Aid Society of San Diego/CCHEA
- Lived Experience Advisors (LEA)
- Lived Experience Advisors (LEA)*
- MAAC*
- National School District
- North County LGBTQ Resource Center*
- North County Lifeline*
- PATH San Diego
- PsychArmor*
- Rural Health Discharge Program
- San Diegans for Healthcare Coverage
- San Diego American Indian Health Center
- San Diego County Department of Public Health*
- San Diego County Public Health Services - Maternal, Child, and Family Health Services
- San Diego Human Trafficking and CSEC Advisory Council Health Sub-Committee & Survivor Services Sub-Committee, La Maestra Community Health Centers
- San Diego Hunger Coalition
- San Diego PACE Vista (San Ysidro Health)*
- San Diego Refugee Communities Coalition
- San Diego Youth Services
- San Ysidro Health Center
- The San Diego LGBT Community Center
- TrueCare*
- Veterans' Health Expert
- YMCA Child Resource Center*
- YMCA of San Diego County

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Online Community Survey

- Informed by the 2022 CHNA survey
- Available in English and Spanish
- Utilized a snowball sampling strategy

Field Interviews

2 Coalitions & 15 Community Partners

San Diego County Promotores Coalition

San Diego Refugee Communities Coalition

Horn of Africa

Arab Community Center of San Diego مركز الجالية العربية في سان دييغو
مجدل
MAJDAL

neighborhood HEALTHCARE

Somali Family Service of San Diego

DEDICATED TO BUILDING THRIVING COMMUNITIES

Haitian Bridge Alliance

The Bridge

Karen Organization of San Diego

Refugee Assistance Center

SLAVICS.ORG
STAND WITH UKRAINE

United Women of East Africa Support Team

MAAC

LICENSE TO FREEDOM

Strengthening SBCS Communities

Somali Bantu Community of San Diego

Southern Sudanese Community Center

Field Interview Languages

Field interview participants *identified that they spoke these languages at home:*

Amharic	Arabic	Burmese	Dari	English
Farsi	Haitian Creole	Karen	Karenni	Kibembe
Kizigua	Oromo	Pa'O	Pashto	Russian
Somali	Spanish	Sudanese Arabic	Swahili	Tigrinya
		Ukrainian		

CHWs, promotores, *and* ***staff translated*** *interviews* ***on the spot*** *in the following languages:*

Amharic	Arabic	Assyrian/Neo-Aramaic	Burmese	Chinese
Dari	English	Farsi	French	Haitian Creole
Japanese	Karen	Karenni	Kizigua	Kurdish
Oromo	Pashto	Russian	Somali	Spanish
Swahili	Tigrinya	Ukrainian	Vietnamese	

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Identifying Top Community Needs

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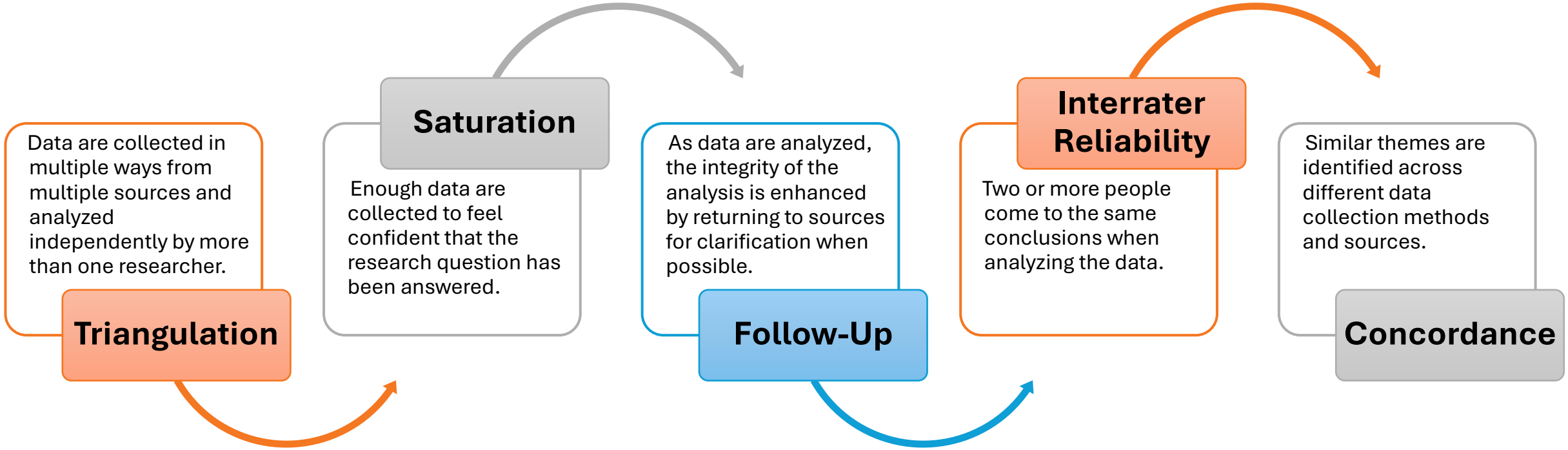


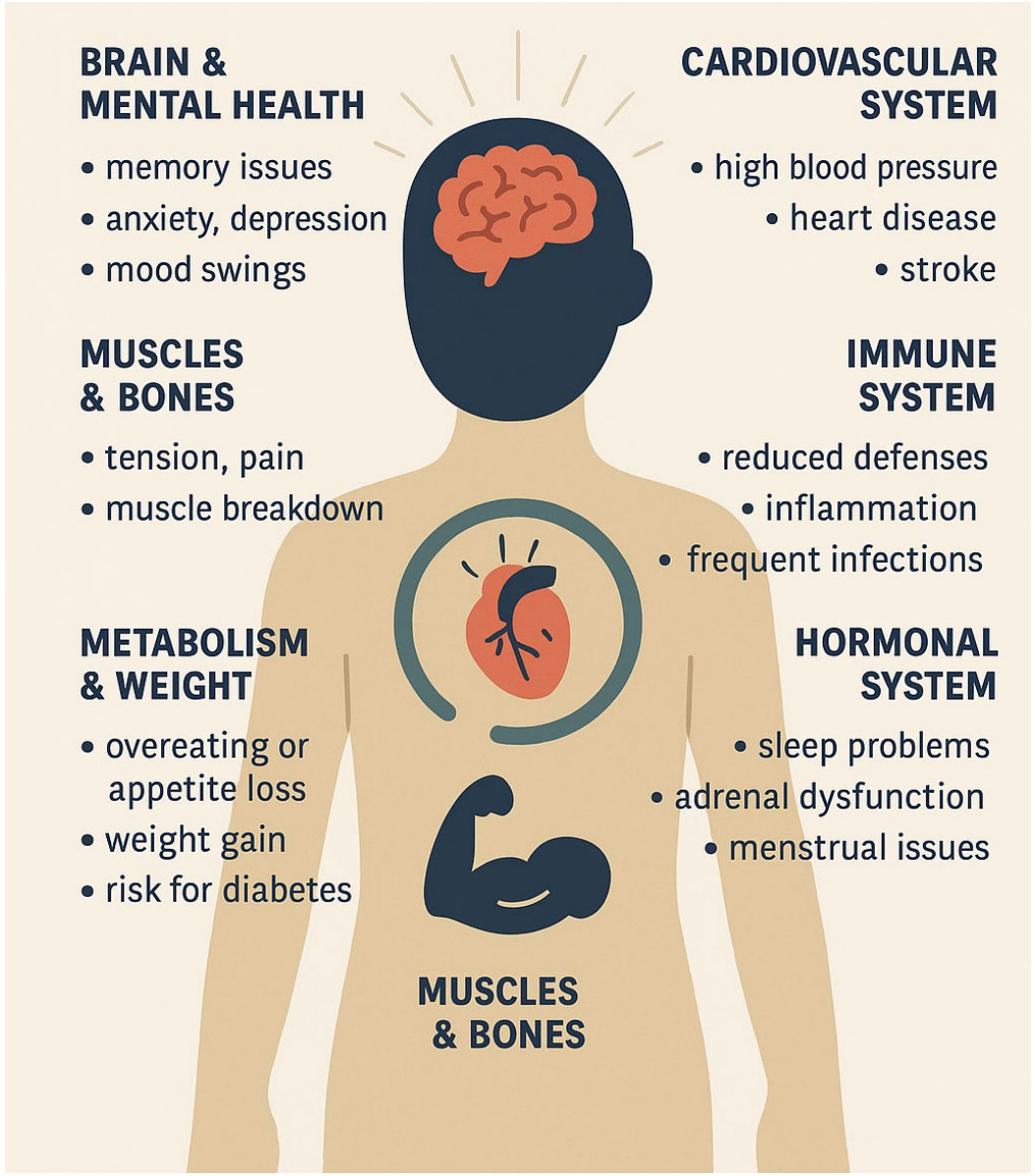
PRIMARY FINDING

Chronic Stress

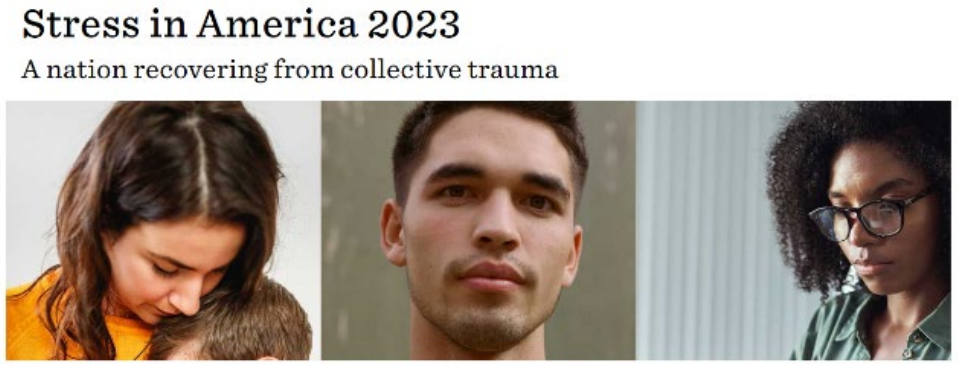
Our community is under significant, ongoing, debilitating stress.

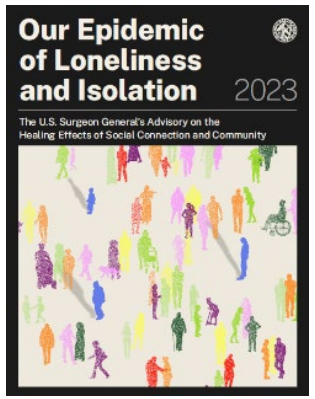
Chronic stress is severely impacting their health and their ability to manage their health care.

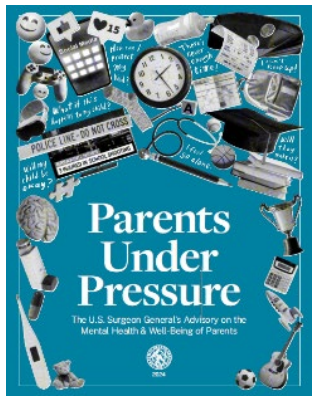
Health Effects of CHRONIC STRESS on the Body



Recent **national reports** have called attention to the **impact** of **chronic stress** on **health**…







- American Psychological Association (APA) - ***Stress in America 2023: A Nation Recovering from Collective Trauma***
- Surgeon General's Advisory - ***Our Epidemic of Loneliness and Isolation (2023)***
- Surgeon General's Advisory - ***Parents Under Pressure (2024)***

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COMMUNITY HEALTH NEEDS ASSESSMENT

2025 CHNA Findings

PRIMARY FINDING

San Diegans are Experiencing *Debilitating Stress*

To mitigate their stress, the community needs

KEY FINDINGS

- Less burden on emergency departments
- Help with crises
- Protection and care for their service providers
- Help managing health conditions
- A different kind of health experience
- Recognition & assistance with disabilties & trauma
- Better data collection, sharing and coordination

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Do you agree with the findings?

Take 3 minutes and share your feedback!

https://www.surveymonkey.com/r/2025CHNAFollowUp

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2025 CHNA FINDING

The community needs less burden on emergency departments

*"**Doctors are sending people to EDs** saying, "I can get you into see orthopedics [at the ED] because I'm not going to be able to get you in soon enough through a referral."*

*"We know that sending someone to the ED for **a mental health crisis** is not our preferred access point, but very often it ends up being the access point. Our system is picking up the slack for **resources that don't exist in the community**."*

*"**Appointments with doctors are two or three months out**, so people will go to the ED and the ED staff will tell them to go to the PCP, and when the patient can't do that because of the wait time, they go back to the ED, and the ED staff will see the same patients and will feel irritated, and the community member feels dismissed."*

Overburdened EDs

Long Wait Times for Primary and Specialty Care

Lack of Mental Health Treatment Options

Substance Use Disorders

People Experiencing Homelessness

Avoidable ED Visits

Field Interviews were a unique opportunity to ask community members about **ED utilization**

Question: Has this person received care at the Emergency Department (ED) in the last 12 months?

- **More than one third** reported that the child had visited the ED
- Of those children who had visited the ED, **74% had multiple ED visits**

*Among interviewees concerned about a **child's health**.*

- **Nearly one third** said the adult had visited the ED
- Of those adults who had visited the ED, **58% had multiple ED visits**

*Among interviewees concerned about an **adult, friend, or family member.***

Has 911 been called for an issue related to this person's health in the last 12 months?

27%

Reported that 911 had been called for the **child**.

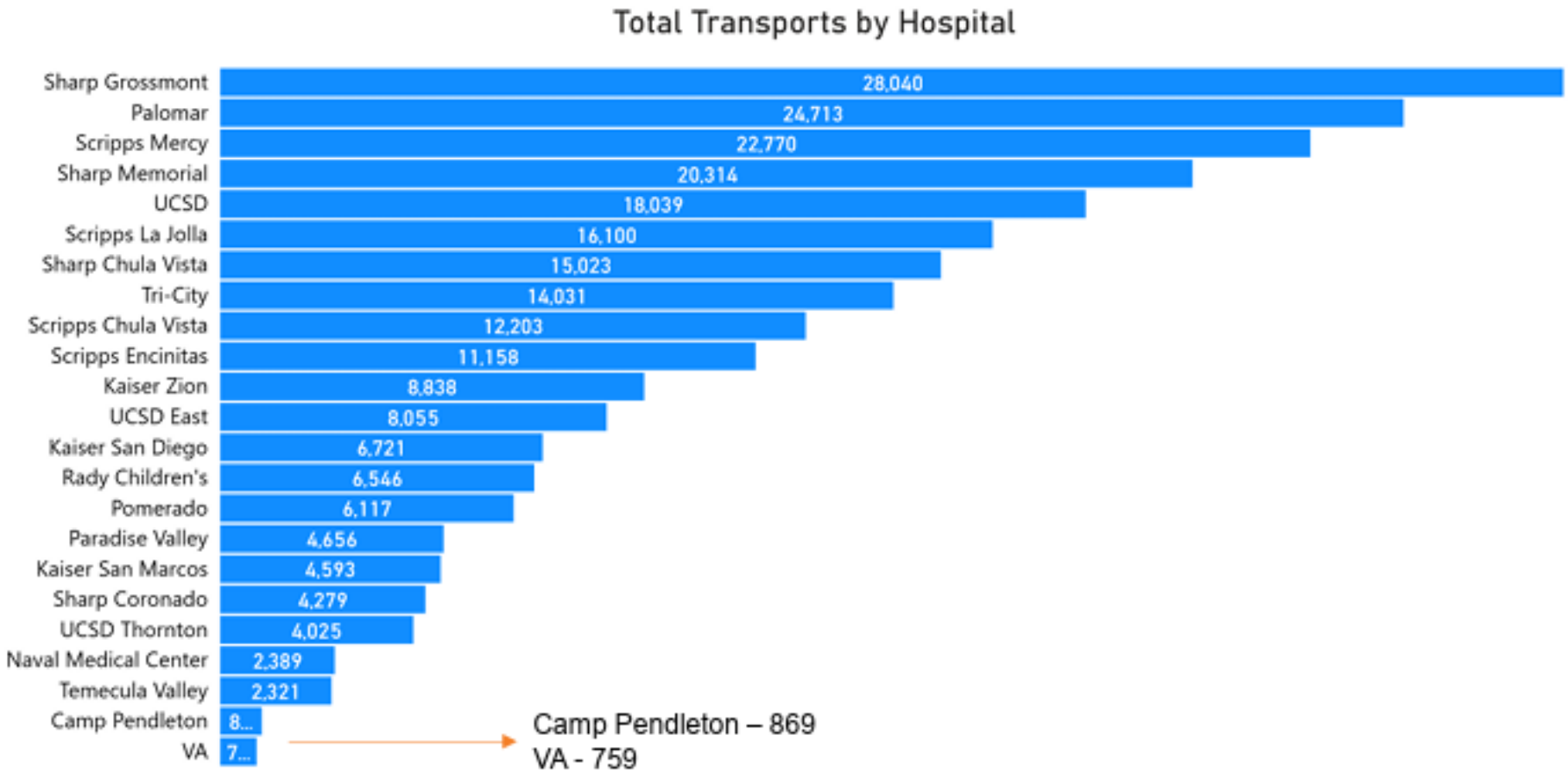
*Among interviewees concerned about a **child's** health.*

12%

Reported that 911 had been called for an adult.

*Among interviewees concerned about an **adult, friend, or family member's** health.*

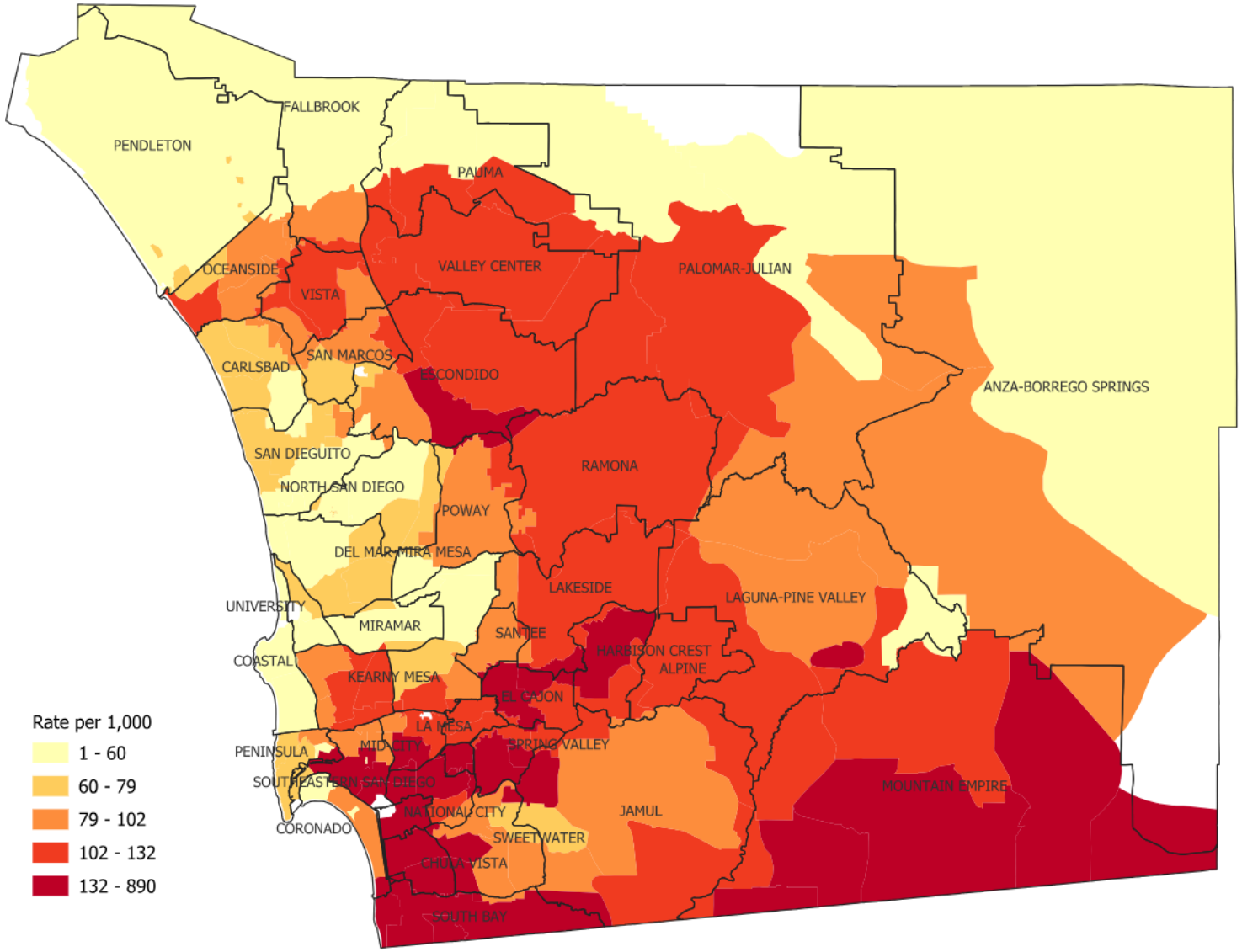
EMS System Stats
Ambulance Transports by Hospital



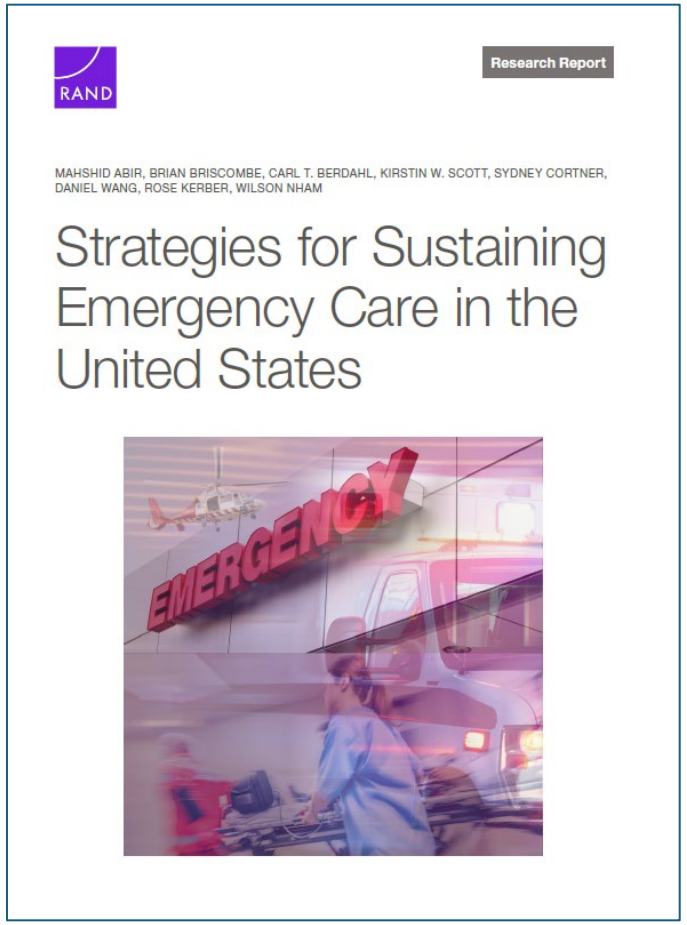
Avoidable ED Visits - 2022

Subregional Areas (SRAs) with the Highest Rates:

South Bay
Mountain Empire
Chula Vista
National City
Sweetwater
Jamul
Southeastern San Diego
National City
Lemon Grove
Spring Valley
Midcity
Kearny Mesa
La Mesa
El Cajon
Harbison Crest
Kearny Mesa
Santee
Alpine
Laguna-Pine Valley
Ramona
Lakeside
Escondido
Vista
Oceanside
Valley Center, Palomar-Julian



RAND Research Study (April 2025): Key Challenges Facing Emergency Departments - Alignment with 2025 CHNA Finding



Overcrowded Emergency Departments

- ED visits back to pre-COVID levels with **more complex & high acuity cases**
- Increase in patients: **older adults, mental health, violence survivors, veterans, unhoused, undocumented**
- Impact = **Boarding** in hallways/waiting areas & **Strain** on hospital resources

Increased Violence Towards Clinicians

- **ED overcrowding fuels patient frustration & aggression**
- Rising cases of **physical & verbal abuse**
- **Limited protections** for health care staff
- EDs seen as **high-risk workplaces**

Burned Out Workers

- **ED overcrowding + aggression** driving clinician burnout
- **Large # of ED staff workers leaving their jobs or the profession altogether**, especially female clinicians
- **Harassment** adds to **stress** of working in ED

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2025 CHNA Findings

PRIMARY FINDING

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In the past three years, have you been impacted by any of the following climate hazard events?

Online Community Survey Results

San Diego County Overall	
Extreme heat (too hot to perform routine activities or be at rest)	59.6%
Wildfire and/or wildfire smoke (exposure to unsafe conditions or difficulty breathing due to air quality)	31.9%
Extreme Rainfall/Flooding (too much water)	30.5%
Other (ex: air quality issues, water quality issues, power outages, insect infestations, or diseases from parasites/bacteria/viruses)	13.8%
Drought (not enough access to clean water)	13.4%

Field Interview Results

70% of people interviewed ***experienced at least one climate event*** within the last three years.

Nearly 48% experienced heat that prevented them from doing normal activities such as work or rest.

Nearly 16% experienced rain or flooding that caused problems for themselves or their family.

"En donde vivo los apartamentos se ponen muy calientes que a mi mamá se le baja la presión y a mi me dan muchos diles de cabeza (la migraña)" [Translation: Where I live, the apartments get so hot that my mom's blood pressure drops, and I get a lot of headaches (migraines).]

- Field Interview Participant

2025 CHNA FINDING

The Community Needs More Help with Crises:

January 2024 Floods

“One of the main things we knew was going to be an issue is the fact that if you had water a foot under your ceiling, all of your medication has been washed away, all of your medical equipment has been washed away. Of course, the storage for insulin and all these things have also gone out the window.”

- Key Informant

2025 CHNA FINDING

The Community Needs More Help with Crises:

“At least 200 to 300 homes had water up to a foot under their ceiling, completely submerged…and no one has tracked anything. No one has tracked mold exposure. No one has tracked deaths. No one has tracked mental health outcomes… no one's tracking hospitalizations, urgent care visits, primary care visits. No one is tracking all of the symptoms that come with it. I've had reports from family members … having pneumonia and then dying days later, lots of people ingested the water. We have lots of rashes and all kinds of skin conditions. And again … the specific community that was impacted has high rates of asthma, high rates of eczema, high rates of cardiovascular disease, all these things like that.”

– Key Informant

The Community Needs More Help with Crises: Sewage in the Tijuana River Valley

2025 CHNA FINDING

The Community Needs More Help with Crises:

Sewage in the Tijuana River Valley

“El olor es insoportable, y podemos enfermar.” [Translation: The smell is unbearable, and we can get sick.]

– Field Interview Participant

2025 CHNA FINDING

The Community Needs More Help with Crises: Sewage in the Tijuana River Valley

A Community Assessment for Public Health Emergency Response (CASPER) report conducted by the CDC in October 2024 documented that nearly all (94%) of the residents in the area of the Tijuana River Valley had noticed a sewage-like smell, and the vast majority indicated an **increase** in **stress** and a **decrease** in **quality of life**

80% say quality of life has been negatively impacted

77% believe air quality is not ok

71% believe household tap water is not safe to drink

65% experienced one or more behavioral health indicators of potential acute mental health issues

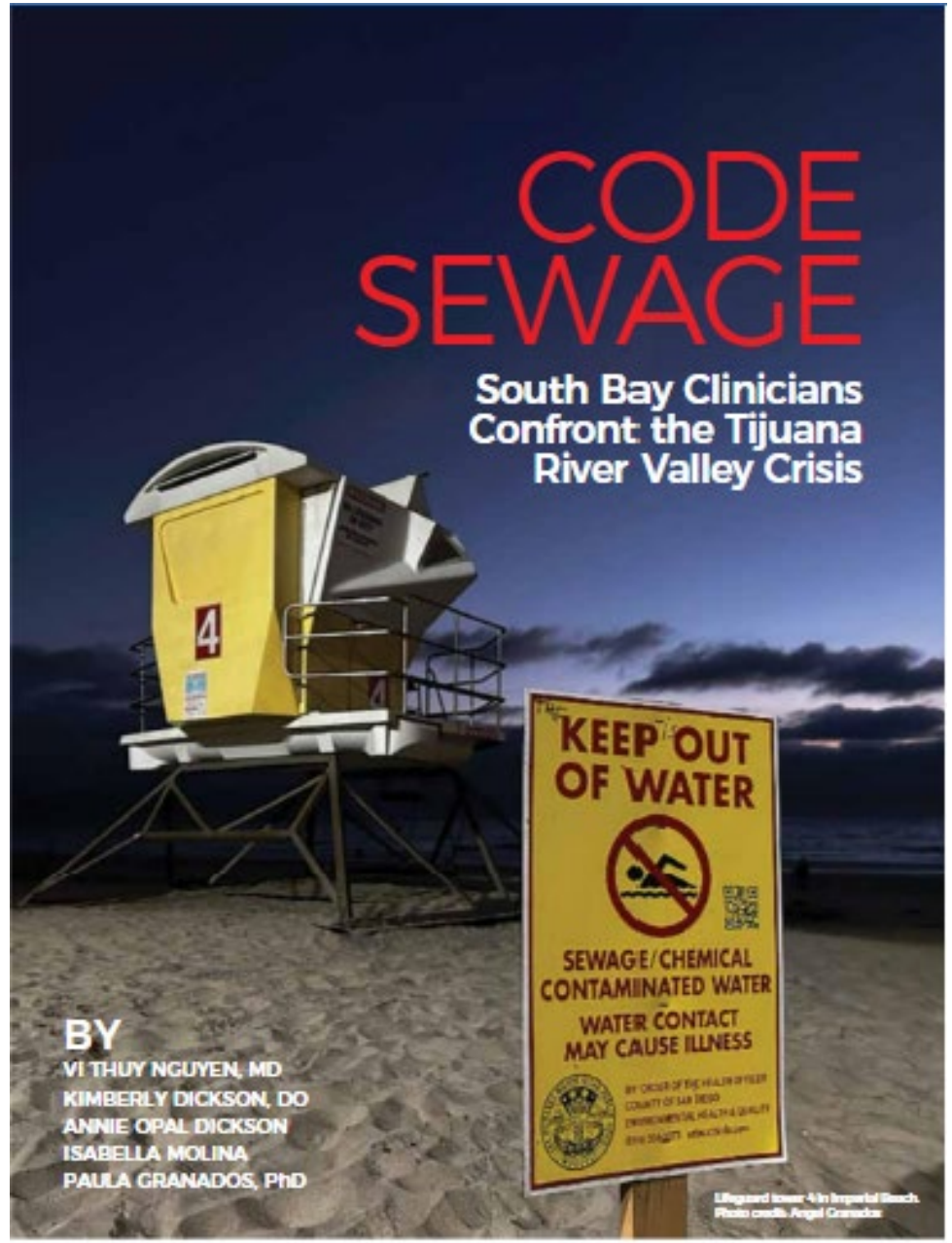
65% have had one or more worsening health conditions in the past month, including allergies, migraines, chest or lung pain and asthma

59% report increased stress

45% report at least one health symptom from the crisis. Of those, 70% said symptoms improved when they left the area.

CODE SEWAGE

South Bay Clinicians Confront the Tijuana River Valley Crisis



Lifeguard tower 4 in Imperial Beach. Photo credit: Angel Granados

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COMMUNITY HEALTH NEEDS ASSESSMENT

2025 CHNA Findings

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2025 CHNA FINDING

The Community Needs Protection and Care for Their Service Providers

While the community had **suggestions for ways** that their **health care experience** could be improved, they also frequently **praised the people who provide their care**. They were clear that they **appreciate** their **efforts** and **want** their **care providers to be protected and cared for**.

2025 CHNA FINDING

Community Awareness and Appreciation

In **field interviews**, many people expressed **appreciation** for **hospitals**, **health care systems**, and **care providers**:

"Thanks for your wonderful work. Keep it up."

"Tell them to keep doing what they are doing."

"Tell them to keep helping those in need."

"Agreadecida con los cuidados obtendios."
Translation: Thankful for the care received

"Que los servicios medicos han sido excelentes tiempo de pandemia."
Translation: "The medical services have been excellent during the pandemic"

Navigating Significant Pressures

- The community highlighted **significant pressures health care providers face**, including the **trauma experienced** during and since the **COVID pandemic** – noting that **many health care providers left the field after the pandemic**
- Participants expressed San Diego is **losing health care providers to places with a lower cost of living**, making it **challenging for new graduates and current staff to remain**
- **Workforce shortages** in **primary** and **specialty care** were also cited by the participants

"We have a problem. We don't have enough people to serve the people."

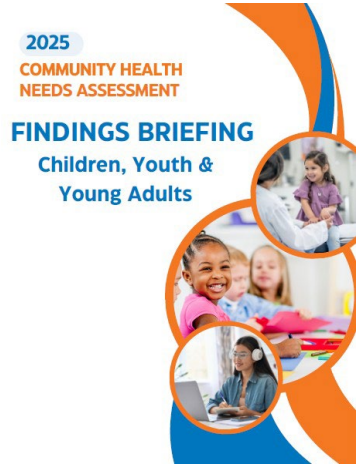
Teşekkür ederim
תודה
Hvala
ขอบคุณ
Ευχαριστώ
متشكرم
Dankon
Хвала
Tak
Gracias
Grazie
謝謝
شكرا لك
Sağol
Danke
Thank you
Merci
ご親切な身
Tack
Спасибо
Obrigado
감사합니다
Köszönöm
Dank u
Спасибі
有り難う
谢谢
Благодаря
Asante
धन्यवाद
ありがとう
Terima kasih
Mulţumesc
Dank u
شكرا
Kiitos
Dziękuję

Additional information in the report

APPENDICES

- Appendix 1: Findings Brief: Children, Youth, and Young Adults
- Appendix 2: Summary of Community Engagement
- Appendix 3: Field Interview Summary Data
- Appendix 4: Online Survey Summary Data
- Appendix 5: Hospital Discharge Data Tables
- Appendix 6: Background on 2022 CHNA Phase 1 & Phase 2
- Appendix 7: San Diego County Resources and Assets
- Appendix 8: Community Health Statistics Data Resource Guide
- Appendix 9: 2023 2-1-1 San Diego CIE Client Profile Report
- Appendix 10: San Diego Hunger Coalition Data Resource Guide

Findings Brief:
Children, Youth & Young Adults



Groups of Focus:

- **Children**
- **Youth**
- **Young Adults** (Transitional Aged Youth – TAY)
- **LGBTQIA+ Youth**

Health Concerns Include:

- **Stress**
- **Developmental Concerns** (delays, disabilities)
- **Physical Health** (asthma, dental health, diabetes, sleep, vision)
- **Mental Health** (anxiety, depression, suicide & suicidal ideation)
- **Substance Use** (alcohol, vaping & nicotine, fentanyl & other drugs)

SAN DIEGO CHNA
COMMUNITY HEALTH NEEDS ASSESSMENT

2025 CHNA Findings

Primary Finding

San Diegans are Experiencing *Debilitating Stress*

To mitigate their stress, the community needs

Other Key Findings

- Less burden on emergency departments
- Help with crises
- Recognition & assistance with disabilties & trauma
- A different kind of health experience
- Help managing health conditions
- Protection & care for their service providers
- Better data collection, sharing and coordination

FINDING: The community needs help managing health conditions

Asthma

Blood Pressure

Cancer

Dental Health

Diabetes

Mental Health

2025 CHNA: Dental and Oral Health in San Diego

Online Survey

In our **online survey**, **dental services** ranked the **4th most difficult health care service to get** in San Diego County

Field Interviews

In **field interviews**, concerns with **Teeth** (dental, mouth, gums, jaw) was listed as a **top 10 health condition** for adults in **field interviews**

Emergency Department (ED) Data

In 2022, the **ED discharge rate** for "**Disorders of the Teeth**" in San Diego County was **134.28 per 100,000 people**

2-1-1 Client Data

Dental issues were among the **top 25 health concerns** reported by **2-1-1 San Diego clients** in 2023

2025 CHNA Online Survey:
Top 5 Barriers to Routine Dental Care

Costs/Copays:

41.7% noted the cost of appointments or treatments

Busy/No Time:

28.4% cited a lack of time for appointments

Insurance Denials/Coverage:

24.7% identified problems with insurance coverage

Fear or Anxiety:

23.3% reported fear or anxiety about visiting the dentist or undergoing procedures

How to Use Insurance:

16.6% did not know how or where to use their dental insurance

Children's Dental Health: Key Challenges Identified

Insurance Barriers: Parents with insurance through the Medi-Cal Dental Program report being unable to find **dentists they trust** who will **accept their insurance**

Logistical Hurdles: Parents are hesitant to take their children out of school for dental appointments

Children's Fears: Children's fear of dentistry is a significant barrier, especially for those with mental health or cognitive challenges

Community Perspectives on Dental Care Access

Insurance Difficulties

Many community members struggle to find dentists who accept their insurance

Financial & Priority Concerns

Some believe dental care is not a high health or financial priority. Others worry that dentists might "extend the process" to increase costs

Language Barriers

Challenges in finding dentists who speak a patient's primary language

Certain communities face greater dental challenges

People experiencing homelessness, seniors, immigrants, pregnant people, and children

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2025 CHNA Findings

PRIMARY FINDING

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Community Voices:

What They Need from their Health Care Experience

Respect for Time

“Que las citas al medico sean mas cercanas y no tener que esperar tanto tiempo"

Translation: Have the medical appointments be closer and not have to wait so long.

More Timely Care

"People are frustrated that they have to wait two months to see a doctor when they have an immediate health concern.”

Better Options for Transportation

"Sometimes it’s hard for people who are unable to take care of themselves to make it to the hospitals because they don’t always have someone to take them."

Better Relationships with Care Providers

“Relational care leads to better health outcomes.”

Help Navigating Systems

“I get frustrated when I call and I'm on hold for five minutes. I'm like, I don't have time for this. Got to go. I'll call you back later...”

Health care experience theme: The community needs a better relationship with their health care providers

"Relational care leads to better health outcomes."

– Key Informant

***A better relationship with their care providers includes*:**	More **time** with their health care providers
	More **empathy**
	Better **communication**
	An understanding of **racism** & **discrimination**
	An understanding of **cultural** & **identity differences**
	An understanding of the **power dynamics**

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One in **10 San Diegans lives with a disability**, and **has concerns about their health**, which was apparent in both the field interviews and online survey

Field Interviews

For participants concerned about their children's health, **more than 15%** identified **disabilities including mental health conditions** as top concerns

Online Community Survey

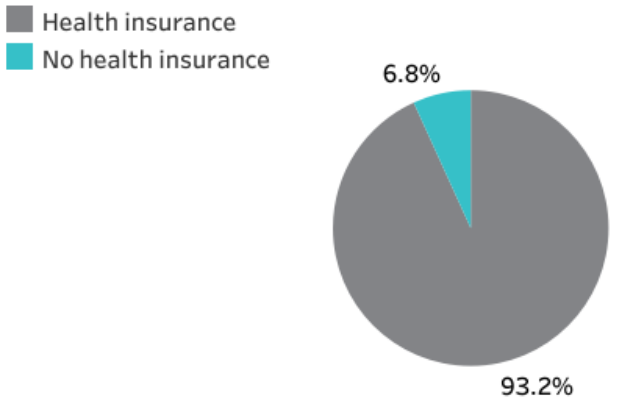
- **9% of respondents** indicated **not having accommodations** for their **disabilities**

2019-2023 Demographic Profiles

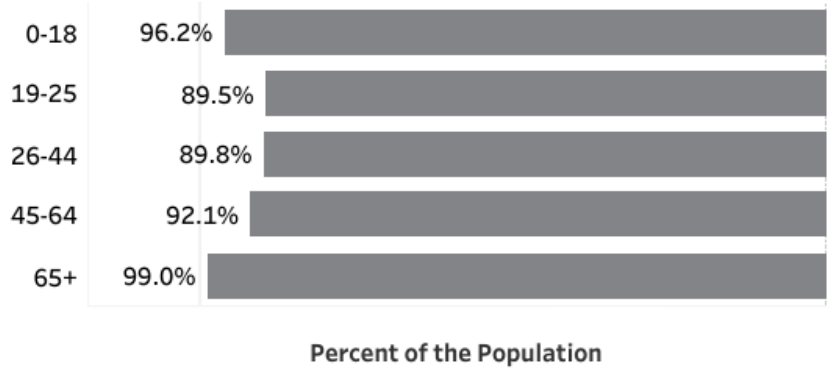
Geography
San Diego County

Health Insurance Coverage

Health Insurance Status



Percentage of the Population With Health Insurance, by Age Group



Disability Characteristics

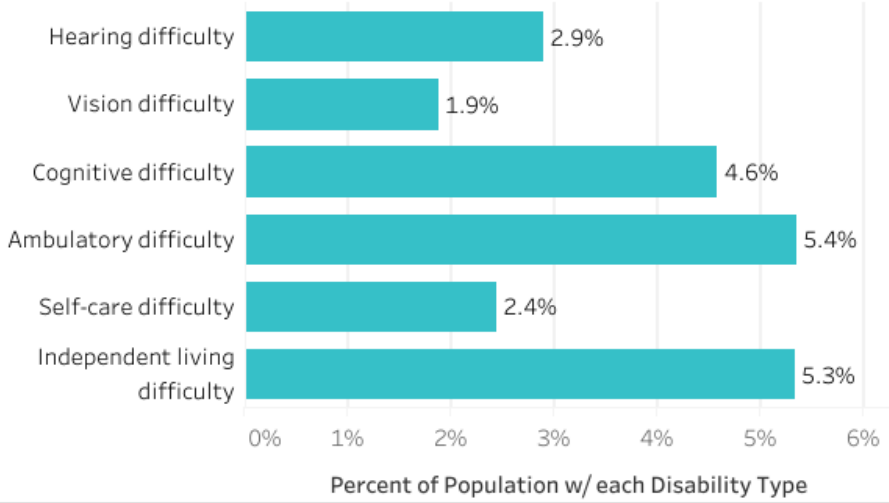
Persons with a Disability (one or more):

339,293

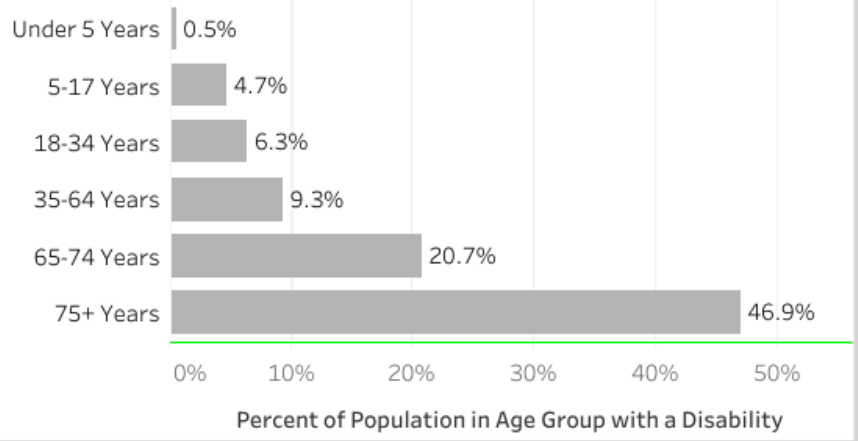
Percent of the Population with a Disability (one or more):

10.7%

Type of Disability*



Percent of Population with a Disability*, by Age Group



*Note: numbers are NOT mutually exclusive. Persons can have more than one type of disability. This is why percentages will NOT add to 100%.
Source: U.S. Census Bureau; 2019-2023 American Community Survey 5-Year Estimates, Tables B27001 and S1810.
Prepared by County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, 2025.

COUNTY OF SAN DIEGO
LIVE WELL SAN DIEGO

2025 CHNA FINDING

The Community Needs More Recognition of and Assistance with Disabilities and Trauma

Key Themes

- Allowing service animals
- Compliance with the ADA
- Improved websites and phone systems
- Assistance with documentation & eligibility
- Understanding of Trauma

SAN DIEGO CHNA
COMMUNITY HEALTH NEEDS ASSESSMENT

2025 CHNA Findings

PRIMARY FINDING

San Diegans are Experiencing *Debilitating Stress*

To mitigate their stress, the community needs

KEY FINDINGS

- Less burden on emergency departments
- Help with crises
- Protection and care for their service providers
- Help managing health conditions
- A different kind of health experience
- Recognition & assistance with disabilties & trauma
- Better data collection, sharing and coordination

2025 CHNA FINDING

The Community Needs Better Data Collection, Sharing, and Coordination

Better Data Collection in Crises

"It is so absurd and ridiculous, and we're all not just doing double data entry. ***We're just reworking the same wheel over and over again.*** *And none of us have gotten it right, and none of us have been able to share the results or the information that we have."*

– Key Informant

Flood response lacked comprehensive data on who was impacted, when, and how

Gaps in data made it difficult to assess community health impacts

Survivors' experiences were not reflected in official data

Multiple agencies involved, but limited data sharing created burdens for both survivors and providers

2025 CHNA FINDING

The Community Needs Better Data Collection, Sharing, and Coordination

Better Data Sharing between Hospitals and FQHCs

- FQHCs often lack full access to hospital electronic medical records (EMRs)
- Limited access restricts key information like imaging results and medications provided
- This gap affects continuity of care and patient outcomes

*"**We don't have the ability to share patient information electronically.** That's a big issue.... **people are readmitted to the hospital that could have been prevented** because we could have been on board and been the ones managing their care to help them through whatever they're recovering from..."*

– Focus Group Participant

2025 CHNA FINDING

The Community Needs Better Data Collection, Sharing, and Coordination

Better Data Sharing between Medical, Educational, and Social Services

- Medical, educational, and social service systems often operate in silos
- Hospitals cannot access HMIS and CIE doesn’t connect with HMIS
- School nurses lack access to EMRs
- Street medicine providers and hospitals does not share patient data, impacting care for people experiencing homelessness

“We're not all on the same platform. So, it's ***a lot of piecemealing information…”***

– Key Informant

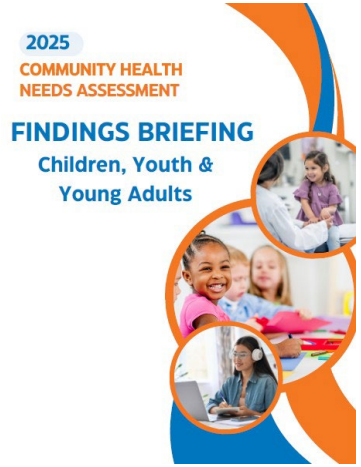
Teşekkür ederim
תודה
Hvala
ขอบคุณ
Ευχαριστώ
متشكرم
Dankon
Хвала
Tak
Gracias
Grazie
謝謝
شكرا لك
Sağol
Danke
Thank you
Merci
ご親切な身
Tack
Спасибо
Obrigado
감사합니다
Köszönöm
Dank u
Спасибі
有り難う
谢谢
Благодаря
Asante
धन्यवाद
ありがとう
Terima kasih
Mulţumesc
Dank u
شكرا
Kiitos
Dziękuję

Additional information in the report

APPENDICES

- Appendix 1: Findings Brief: Children, Youth, and Young Adults
- Appendix 2: Summary of Community Engagement
- Appendix 3: Field Interview Summary Data
- Appendix 4: Online Survey Summary Data
- Appendix 5: Hospital Discharge Data Tables
- Appendix 6: Background on 2022 CHNA Phase 1 & Phase 2
- Appendix 7: San Diego County Resources and Assets
- Appendix 8: Community Health Statistics Data Resource Guide
- Appendix 9: 2023 2-1-1 San Diego CIE Client Profile Report
- Appendix 10: San Diego Hunger Coalition Data Resource Guide

Findings Brief:
Children, Youth & Young Adults



Groups of Focus:

- **Children**
- **Youth**
- **Young Adults** (Transitional Aged Youth – TAY)
- **LGBTQIA+ Youth**

Health Concerns Include:

- **Stress**
- **Developmental Concerns** (delays, disabilities)
- **Physical Health** (asthma, dental health, diabetes, sleep, vision)
- **Mental Health** (anxiety, depression, suicide & suicidal ideation)
- **Substance Use** (alcohol, vaping & nicotine, fentanyl & other drugs)