

**Healthier San Joaquin County
Community Assessment 2011**

www.healthfiersanjoaquin.org

San Joaquin County's Health Profile: Useful Data to Improve Our Future

Sponsored by the
San Joaquin County
Community Health
Assessment Collaborative



Background of the Project

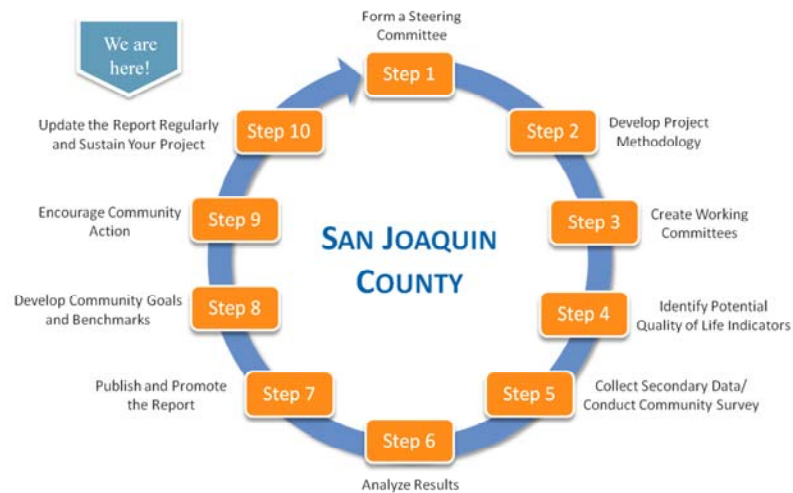
- The San Joaquin County Community Health Assessment Collaborative formed in 2004.
- Purpose: to produce a functional and comprehensive county health profile.
- Overall goal: to inform and engage local stakeholders and community members in order to promote and develop collaborative efforts based on reliable data, community input and group consensus.

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- Collaborative evolved from the 2001 Needs Assessment Group.
- It has grown to more than **15 agencies with 9 financial sponsors**.
- Collaborative members and financial contributors are listed on the back of the executive summary tri-fold and in the introduction of the comprehensive report.

Community Assessment Project



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- At this point, the collaborative has completed steps 1-9 of the Community Improvement Cycle, which included the development of the methodology, the creation of a 20-person committee which worked to identify the optimal quality of life indicators, the collection of secondary data from multiple agencies and electronic databases, the collection of more than 2,300 telephone and face-to-face surveys, and the development of community goals and benchmarks.
- Now we are continuing to update the report and look into new ways of sustaining the project.



Methodology

- English and Spanish telephone surveys were completed with over 430 randomly selected county residents.
- 1,950 face-to-face surveys were collected at different sites and community agencies throughout the county.
- Secondary (pre-existing) data were collected for over 50 indicators from a variety of sources.

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- More than 50 indicators were developed with input from the collaborative and based on credible data.
- California Health Interview Survey (CHIS) data are also included.
- Besides health data there are also data on demographics, economics, housing, self-sufficiency and a section on youth.
- **Telephone survey:** More than 430.
- **Face-to-Face survey:** 1,950 completed. Many community agencies assisted with survey collection. Face-to-Face Surveys were used because we wanted to interview diverse ethnicities, including those without phones and those from lower income households.



County Demographics

- In 2010, the population of the county was 694,293.
 - Since 2004, there was a 10% population increase.
- According to the U.S. Census Bureau, 39% of San Joaquin County residents over age five spoke a language other than English in their home in 2009.
 - Of the total population, 26% spoke Spanish.
- In 2010, Caucasians made up 40% of the county population while Hispanics make up 36%.
 - By 2020, it is projected that there will be a higher percentage of Hispanics than Caucasians.
 - » 2015: Hispanics (38%), Caucasians (36%)
 - » 2020: Hispanics (39%), Caucasians (33%)

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- Most respondents (both telephone and face-to-face surveys) had lived in the county for more than five years.

Housing and Foreclosures

- There were 13,798 notices of default (the first step in the foreclosure process) in 2009, up from only 3,381 in 2006.
- 73% of telephone respondents and 74% of face-to-face respondents reported that *more than* one-third of their household income is spent on rent/housing costs in 2010.
 - The U.S. Department of Housing and Urban Development (HUD) defines affordable housing as costing *no more than* 30% of a household's annual income. Spending much more than 30% impacts residents' ability to afford other basic needs such as health care, food, and child care.

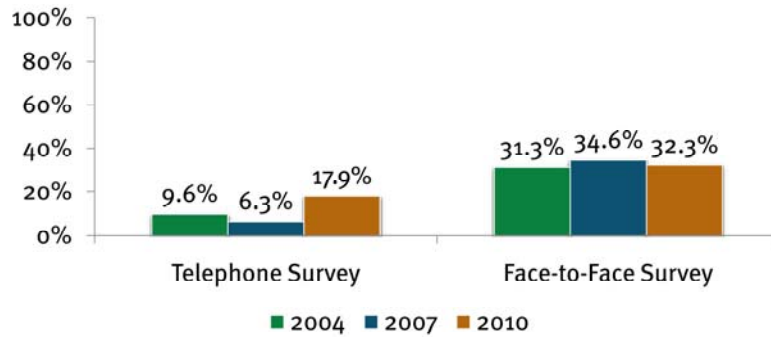
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- Even though home values have plunged, it is still difficult to secure a home loan. In combination with an economy that is in a recession, is causing San Joaquin County's housing market to suffer. Currently, San Joaquin County joins the Bay Area, Merced and Stanislaus among the California counties/regions with the highest probability of mortgage default.
- The number of default notices in San Joaquin County has increased 308% over the last three years, from 3,381 in 2006 to 13,798 in 2009. However, there was nearly a 11% decrease between 2008 and 2009.

Basic Needs

In any given month, do you find you or your family having to go without basic needs such as food, housing, child care, health care or clothing? (Respondents answering “Yes”)



2004: Telephone Survey N=428, Face-to-Face Survey N=1,960; 2007: Telephone Survey N=429, Face-to-Face Survey N=1,938; 2010: Telephone Survey N=428, Face-to-Face Survey N=1,938
Source: Healthier San Joaquin County Community Assessment, Telephone and Face-to-Face Surveys, 2004, 2007 and 2010.

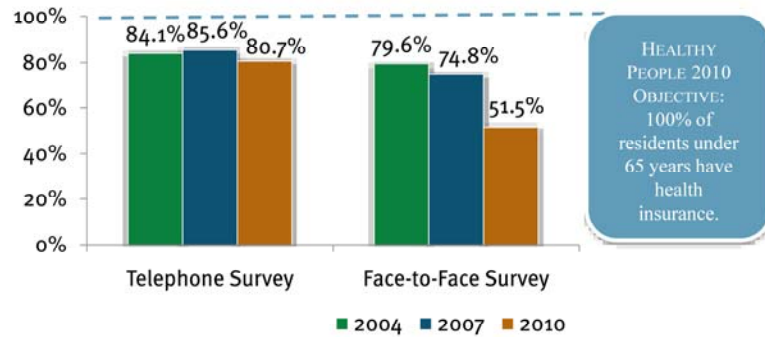
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- Of the telephone survey respondents who had gone without basic needs, 49% went without food, 47% went without health care, and 38% went without clothing.
- Of the face-to-face survey respondents who went without basic needs, 56% went without health care, 54% without dental care, and 31% without a variety of food.

Adult Health Insurance Coverage

Adult Respondents Who Currently Have Health Insurance Coverage, 2004, 2007, and 2010



2004: Telephone Survey N=429, Face-to-Face Survey N=2,001; 2007: Telephone Survey N=429, Face-to-Face Survey N=1,970; 2010: Telephone Survey N=430, Face-to-Face Survey N=1,930
Source: Healthier San Joaquin County Community Assessment, Telephone and Face-to-Face Surveys, 2004, 2007 and 2010.

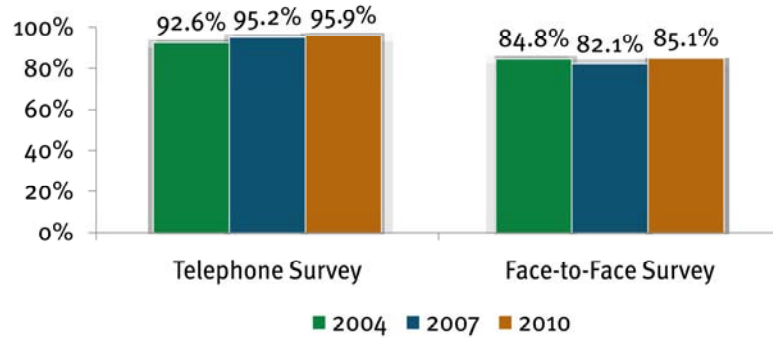
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- Of survey respondents with health insurance, 96% of telephone survey and 88% of face-to-face survey respondents indicated that their insurance covered at least a portion of their medical prescriptions.
- Since 2001, neither California nor San Joaquin County met the Healthy People 2010 Objective of having 100% health insurance coverage for the population under the age of 65.

Children Health Insurance Coverage

Do your children have health insurance? (Respondents answering “Yes”)



2004: Telephone Survey N=183, Face-to-Face Survey N=1,287; 2007: Telephone Survey N=156, Face-to-Face Survey N=1,060; 2010: Telephone Survey N=165, Face-to-Face Survey N=1,392
Source: Healthier San Joaquin County Community Assessment, Telephone and Face-to-Face Surveys, 2004, 2007 and 2010.

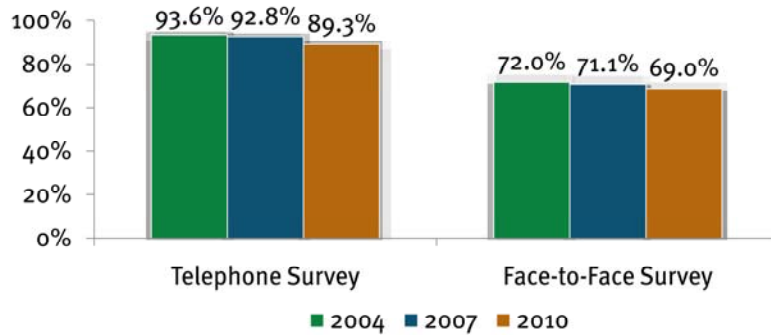
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- Since 2001, both the state of California and San Joaquin County have seen increases in health insurance coverage for children 0-17.
- According to the California Health Interview Survey, nearly all children ages 0-17 in San Joaquin County were insured in 2007 (97%).

Health Care Access and Utilization

If you needed health care in the last 12 months, were you able to receive it? (Respondents answering “Yes”)



2004: Telephone Survey N=274, Face-to-Face Survey N=1,420; 2007: Telephone Survey N=251, Face-to-Face Survey N=1,418; 2010: Telephone Survey N=246, Face-to-Face Survey N=1,091
Source: Healthier San Joaquin County Community Assessment, Telephone and Face-to-Face Surveys, 2004, 2007 and 2010.

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- 11% of telephone survey respondents indicated they needed health care but were unable to receive it. (2010)
- 31% of face-to-face survey respondents indicated they needed health care but were unable to receive it. (2010)

Access to Health Care

Top 5 Reasons Why Respondents Were Unable to Receive Health Care in the Past 12 Months

2010 Telephone Survey		2010 Face-to-Face Survey	
No insurance	77.2%	No insurance	63.6%
Could not afford it	39.8%	Could not afford it	29.0%
Could not afford co-pay	34.0%	Transportation issues	28.0%
Insurance would not cover it	28.3%	Unable to communicate due to language/barriers	24.3%
Lack of services or services unavailable	28.5%	Didn't know where to go	12.5%

Source: San Joaquin County Community Health Assessment, Telephone Survey, 2010, Multiple response question with 26 respondents offering 87 responses. San Joaquin County Community Health Assessment, Face-to-Face Survey, 2010, Multiple response question with 321 respondents offering 689 responses.

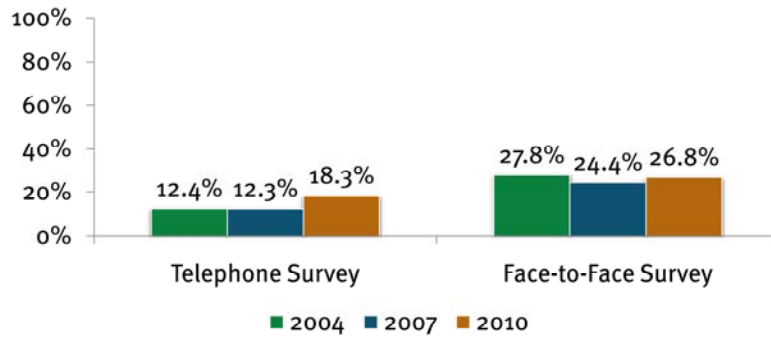
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- The percentage of telephone survey respondents who reported that they didn't get care because they had no insurance increased from 50% in 2007 to 77% in 2010.
- The percentage of face-to-face survey respondents who reported that they didn't get care because they had no insurance slightly decreased from 69% in 2007 to 64% in 2010.
- Nearly 1 in 4 face-to-face survey respondents reported going without the care they needed because they were unable to communicate due to language barriers.

Emergency Department Use

Do you use the emergency department for your main source of care? (Respondents answering “Yes”)



2004: Telephone Survey N=425, Face-to-Face Survey N=1,843; 2007: Telephone Survey N=429, Face-to-Face Survey N=1,856; 2010: Telephone Survey N=427, Face-to-Face Survey N=1,823
Source: Healthier San Joaquin County Community Assessment, Telephone and Face-to-Face Surveys, 2004, 2007 and 2010.

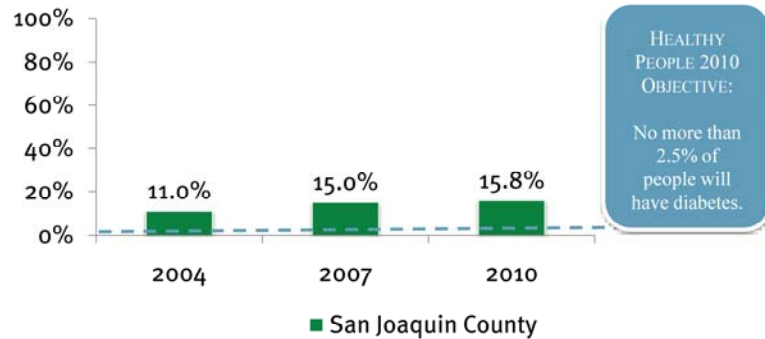
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- Residents without health insurance or with limited provider choices often use the emergency department for their primary care as well as for emergencies. Emergency department usage for primary care is often an indicator of a lack of access to care. Delaying care until care is urgent often results in poorer health outcomes and increased health care costs.
- More residents relied on emergency departments as their main source of health care in 2010 than in 2007.

Chronic Disease - Diabetes

Telephone Survey Respondents Who Have Been Diagnosed with Diabetes



2004 N: 426; 2007 N: 429; 2010 N: 430.

Source: Healthier San Joaquin County Community Assessment, Telephone Survey, 2004, 2007 and 2010.

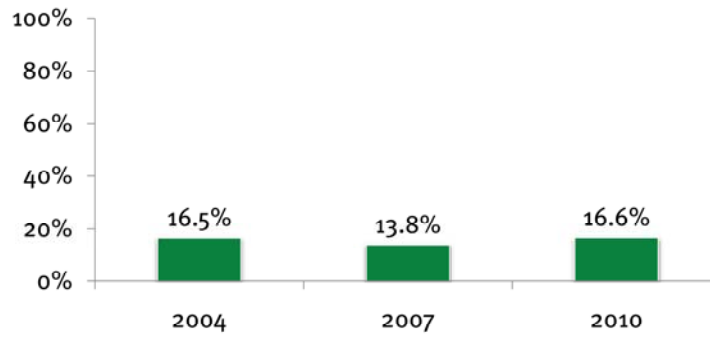
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- Between 2004 and 2010, the percentage of respondents receiving diabetes treatment also increased from 79% to 84%; however, a smaller percentage received a management plan from their doctor in 2004 (97%) than in 2010 (80%).

Chronic Disease - Asthma

Telephone Survey Respondents Who Have Been Diagnosed with Asthma



2004 N: 427; 2007 N: 429; 2010 N: 431.

Source: Healthier San Joaquin County Community Assessment, Telephone Survey, 2004, 2007 and 2010.

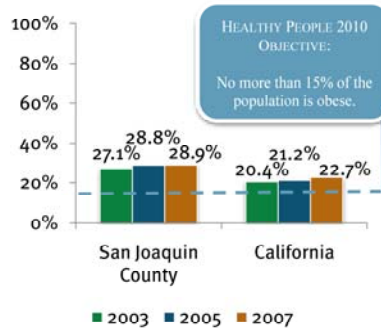
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- Results from the Healthier San Joaquin County telephone survey showed an increase in the percentage of adults with asthma from 14% in 2007 to 17% in 2010.
 - Of these individuals, more than half (52%) were receiving treatment in 2010.
 - 41% of these respondents reported having received a management plan or instructions from their doctor. This surpasses the Healthy People 2010 Objective that 30% of people with asthma will receive patient education.

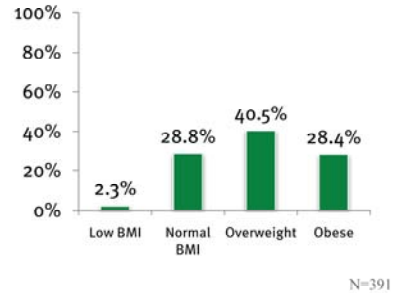
Chronic Disease – Obese Adults

Percentage of Adults Who Are Obese, 2003-2007



Source: 2003, 2005, 2007 California Health Interview Survey. San Joaquin County – 2003 N: 422,000; 2005 N: 447,000; 2007 N: 443,000. California – 2003 N: 25,597,000; 2005 N: 26,388,000; 2007 N: 26,874,000

Respondents' BMI, 2010



Source: Healthier San Joaquin County Community Assessment, Telephone Survey, 2010.

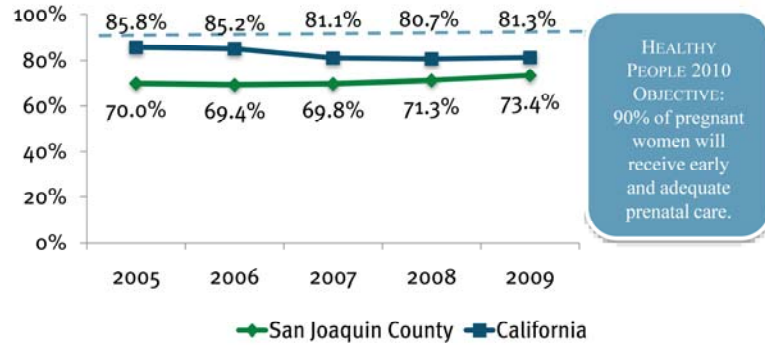
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- San Joaquin County has had consistently higher percentages of obese adults than California.
- Over 28% of adult telephone survey respondents were obese in 2010; 41% were overweight, while 2% had a low BMI.
- The Healthy People 2010 Objective is that no more than 15% of the population are obese. Neither San Joaquin County nor California has met this objective.

Early Entry into Prenatal Care

Percentage of Women Receiving Prenatal Care During Their First Trimester, 2005-2009



Source: 2005-2009 data: State of California, Department of Health Services, Birth Records, 2007. 2005-2009 data: San Joaquin County Public Health Services, Birth Records, 2010.

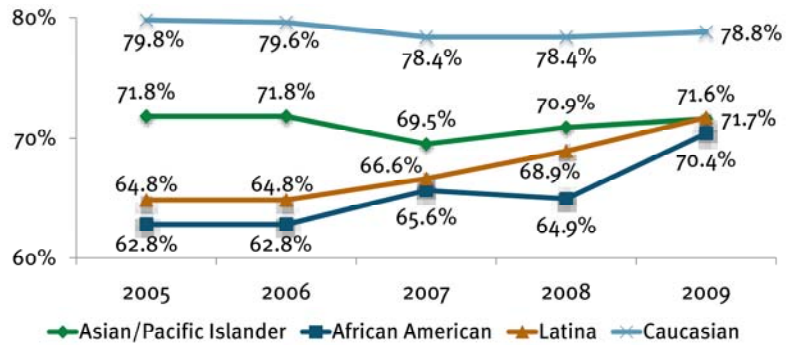
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- Both San Joaquin County and California failed to meet the Healthy People 2010 Objective that 90% of pregnant women will receive early and adequate prenatal care.
- While the percentage of San Joaquin County women who received prenatal care in their first trimester of pregnancy has been consistently lower than the state, more San Joaquin County women received prenatal care in 2009 than in previous years.

Prenatal Care – Ethnicity

Percentage of Women Receiving Prenatal Care During Their First Trimester, by Ethnicity, 2005-2009



Source: 2005-2009 data: State of California, Department of Health Services, Birth Records, 2007. 2005-2009 data: San Joaquin County Public Health Services, Birth Records, 2010.

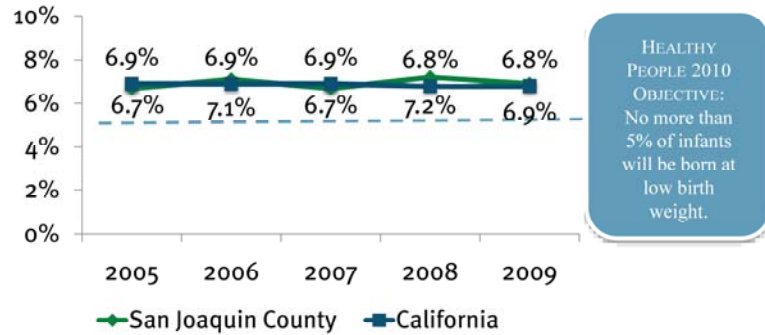
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- Caucasian women had higher percentages of first trimester prenatal care than other races/ethnicities in San Joaquin County.

Low Birth Weight Babies

Percentage of Low Birth Weight Babies, 2005-2009



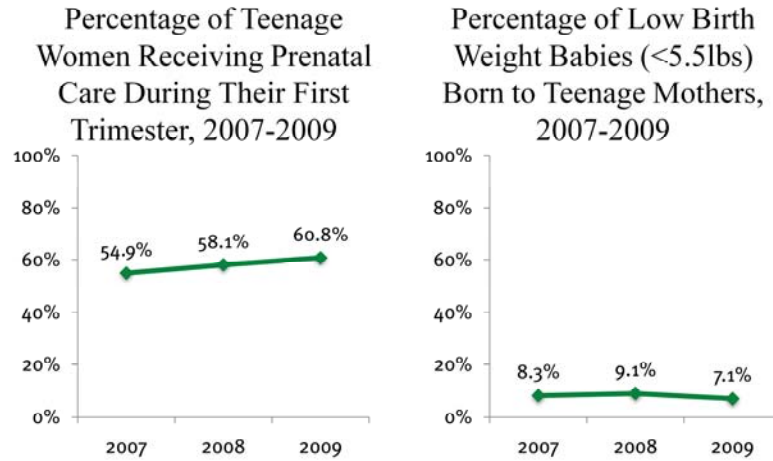
Source: 2005-2009 data: State of California, Department of Health Services, Birth Records, 2007. 2005-2009 data: San Joaquin County Public Health Services, Birth Records, 2010.

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- Low birth weight is defined as the percentage of infants born below 5.5 pounds (the average newborn weighs about 7 pounds). The most common reason for low birth weight is premature birth, however, other factors such as the mother's age, ethnicity, health and whether or not it is a multiple birth can also affect the baby's birth weight. Infants born at low birth weight are at greater risk for complications including infections, breathing problems, neurological problems and Sudden Infant Death Syndrome (SIDS).
- In 2009, the percentage of African American babies born at low birth weight was 12%, compared to 8% of Asian/Pacific Islander infants, 7% of Caucasian infants, and 6% of Latino infants.

Teens Births – Prenatal Care and Low Birth Weight



Source: 2007-2009 data: State of California, Department of Health Services, Birth Records, 2007. 2007-2009 data: San Joaquin County Public Health Services, Birth Records, 2010.

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- The percentage of births to teens (15-19) in San Joaquin County was consistently higher than in California from 2000 to 2009. In 2000, 14% of all births were to teen mothers which decreased to 11% in 2009.
- The rate of teen mothers who received prenatal care in their first trimester increased in 2009, and low birth weight decreased.
- Every year since 2000, more than half of San Joaquin County teen mothers received prenatal care in the first trimester of their pregnancy. However, during this same time period, between 7% and 9% of babies born to teens were born under 5.5 pounds
 - A higher percentage of births to teen mothers were at low birth weights compared to births to mothers of all ages.
 - Smaller percentages of teen mothers received prenatal care in their first trimester than San Joaquin County mothers overall.



Data Summary

- The population of San Joaquin County is growing, becoming both older and more ethnically diverse.
- The majority of county residents are covered by health and dental insurance; although, there still are those who report going without basic necessities and health services.
- The county has higher percentages of residents with chronic diseases than the state.
- Neither the county nor the state are currently meeting the Healthy People 2010 objective for prenatal care or low birth weight babies.
- There are many community organizations that are dedicated to addressing important issues in the county.
 - Several of these groups are highlighted in our comprehensive report under the title, “How We’re Making a Difference.”


How We're Making a Difference

HOW WE ARE MAKING A DIFFERENCE

CareVan

In June of 2010 "Marie" became unemployed and among her many hurdles was her inability to afford to pay for private health insurance. Marie accessed the Dorothy L. Jones Family Resource Center and was made aware of the free services provided by St. Joseph's Medical Center's CareVan.

The CareVan is a 40-foot mobile health clinic that provides free health services to people in the Stockton area who do not have health insurance or access to primary care. Medical services include: screenings, health education, referral services, medical diagnosis, treatment, pharmacy and testing. The CareVan is staffed with physicians, nurses, an administrative staff person, and an interpreter.



Photograph Courtesy of St. Joseph's Medical Center

The CareVan treats acute problems such as fever, earache, infections (including upper respiratory infections), sore throat and other illnesses as well as chronic problems such as allergies, high blood pressure, diabetes and joint pain. If the problem can't be treated at the CareVan or requires ongoing treatment, the mobile clinic staff will refer the patient to a community physician or to one of the area's many excellent medical facilities.

When Marie became ill last year she was diagnosed as pre-diabetic and was told she had high blood pressure. The staff at CareVan suggested Marie attend Diabetes Basics to a Healthy Life, one of the many classes offered by St. Joseph's at their various partner locations. It was at this class that Marie learned what it meant to be pre-diabetic and came to understand the importance of exercise and proper portion control. She now has a Diabetic Care Plan which consists of a personalized menu Marie follows to keep herself healthy. Marie also has a primary health care provider now and her provider is impressed with her healthy lifestyle changes that have resulted in lower blood pressure and cholesterol.

Marie is thankful for the support she received from the instructors, St. Joseph's Medical Center staff, the CareVan, and Dorothy L. Jones Family Resource Center. She plans to continue her involvement with St. Joseph's Medical Center and will attend the St. Joseph's Medical Center's Coping with Diabetes Support Group.

For more information or questions about CareVan services, contact (209) 461-3471 or e-mail Arline.Delacruz002@chc.edu.

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- This is an example of local story specific to health care access.
 - By highlighting existing services such as the CareVan we hope to encourage the community to take advantage of such opportunities and to encourage others to think of innovative ways of supporting our residents.

Resources Available Online

- 2005, 2008 & 2011 Comprehensive Reports
- 2005, 2008 & 2011 Executive Summaries
- 2008 & 2011 “How We’re Making a Difference” Stories
- 2005, 2008 & 2011 PowerPoint Presentations
- Links to SJC₂HAC Community Partners and a List of Financial Contributors

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- The comprehensive report complete with these highlights can be downloaded from the project website: www.healthiersanjoaquin.org.



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