

community health & wellness

More mothers are getting prenatal care, youth are improving their fitness levels, and asthma rates are declining. Yet, fully two-thirds of adults are overweight or obese, and diabetes is on the rise. There was a 25% jump in the death rate for young children, with motor vehicle accidents topping the list of causes. The 2010 Census showed a fifth of San Bernardino County families with children are living in poverty, which is evidenced by sharp inclines in public assistance programs and more families living doubled- or tripled-up.

Veteran's Collaborative Maximizing Resources

The Veterans & Military Community Collaborative is made up of San Bernardino County's Veterans Affairs and Behavioral Health Department, and the Loma Linda VA Healthcare System. Their purpose is to better inform veterans and service members of benefits they have earned, and to ensure that resources are maximized and not duplicated. They work together to improve access to behavioral and medical healthcare, readjustment counseling, and monetary benefits. At the same time, they educate the community regarding the special needs and contributions of these most-deserving citizens. Their efforts are making a difference: in 2010, the Collaborative received the National Association of Counties Achievement Award for improved service.

Prenatal Care Improves Again

Description of Indicator

This indicator measures the percentage of live births to San Bernardino County women who began prenatal care during the first three months of pregnancy, including racial and ethnic detail.

Why is it Important?

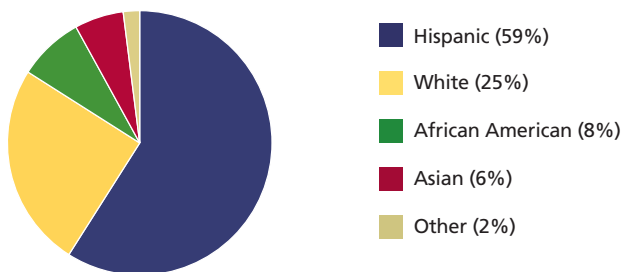
Increasing the number of women who receive early prenatal care (in the first trimester of pregnancy) can improve birth outcomes and lower health care costs by reducing the likelihood of complications during pregnancy and childbirth. Babies born to mothers who do not get prenatal care are three times more likely to have a low birth weight and five times more likely to die than those born to mothers who do get care. Early prenatal care allows women and their health care providers to identify and, when possible, treat or correct health problems and health-compromising behaviors that can be particularly damaging during the initial stages of fetal development.¹ Late or no prenatal care substantially increases the likelihood an infant will require admission to a Neonatal Intensive Care Unit or require a longer stay in the hospital, at substantial personal and economic cost to the family and health care system.²

How is San Bernardino County Doing?

In 2009, early prenatal care rates improved slightly:

- San Bernardino County’s early prenatal care rate was 80.9%.
- This is an improvement of less than one percentage point over the previous year, and a three-point increase since 2000.
- San Bernardino County’s rate is higher than the national Healthy People 2020 objective of 77.9%, but lower than the statewide average and all peers compared.
- Asian mothers have the highest rate of care (85.4%), followed by White mothers (82.9%), and Hispanic mothers (80.5%).
- The majority of births are to Hispanic mothers (58.7%), followed by White mothers (25.3%), and African American mothers (8.4%).

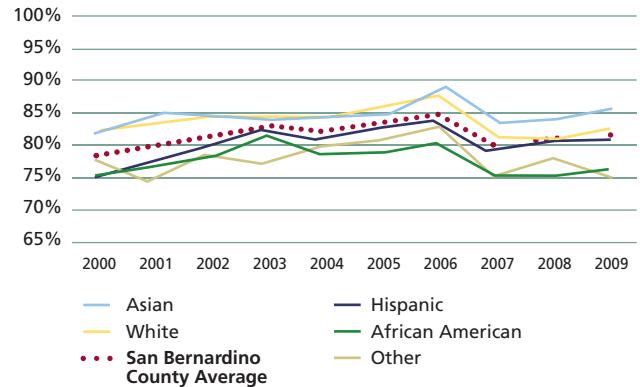
Live Births by Race and Ethnicity San Bernardino County, 2009



Source: California Department of Public Health (www.apps.cdph.ca.gov/vsq/default.asp)

¹ Healthy San Bernardino County (www.healthysanbernardinocounty.org)
² Saied B., Amini, Patrick AA., Catalano and Leon I. Mann, “Effect of Prenatal Care on Obstetrical Outcome”, Journal of Maternal-Fetal and Neonatal Medicine 1996 5:3, 142-150.

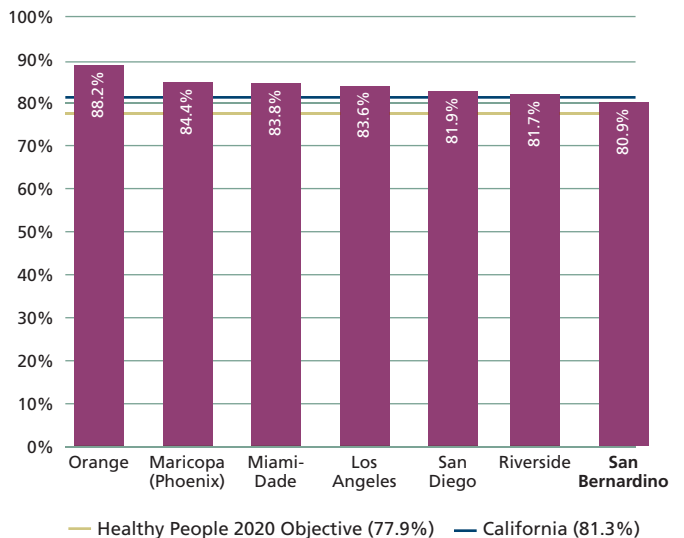
Percent of Mothers Receiving Early Prenatal Care by Race and Ethnicity San Bernardino County, 2000-2009



Note: The ethnic category “Hispanic” includes any race; the racial categories “White,” “Asian,” and “African American” are all non-Hispanic. “Asian” includes Asian and Pacific Islander. “Other” includes the categories of two or more races and American Indian/Native Alaskan.

Source: California Department of Public Health (www.cdph.ca.gov/data/statistics/Pages/default.aspx)

Percent of Mothers Receiving Early Prenatal Care County Comparison, 2009



Note: Las Vegas data are not available for 2009.

Sources: California Department of Public Health (www.apps.cdph.ca.gov/vsq/default.asp); Arizona Department of Health Services (www.azdhs.gov/plan/report/abs/index.htm); Florida Department of Health, Bureau of Vital Statistics (www.floridacharts.com/charts/chart.aspx)

What is Healthy People 2020?

Healthy People 2020 is a national health promotion and disease prevention initiative which establishes national objectives to improve the health of all Americans, eliminate disparities in health, and increase the years and quality of healthy life. Healthy People 2020 objectives were modified significantly from Healthy People 2010, in most cases resulting in a more achievable objective.

Connecting the Dots

A drop in Prenatal Care could have long term impacts on the Leading Causes of Death for Children Under Five.



Long-term Trend Remains Downward

Description of Indicator

This indicator measures the leading causes of death for infants less than one year old and children ages one through four in San Bernardino County (shown as raw number of deaths). Also shown are deaths for children ages birth through four years due to all causes compared to neighboring California counties (shown as number of deaths per 100,000 children).

Why is it Important?

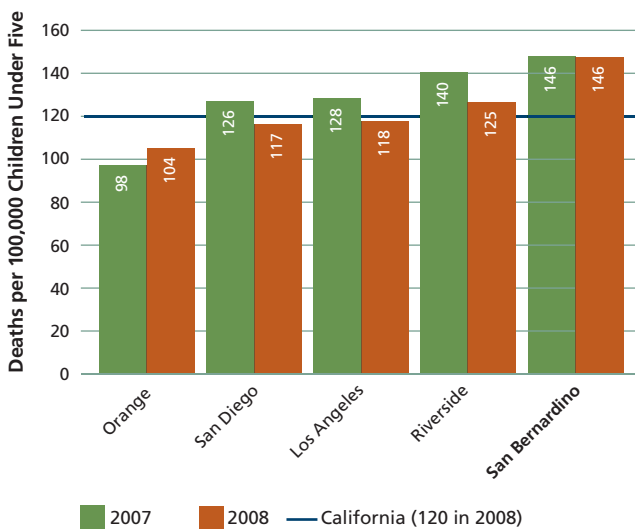
Awareness of the leading causes of death for children can lead to intervention strategies that can help prevent mortality.

How is San Bernardino County Doing?

The overall death rate for children under five years of age in San Bernardino County remained unchanged in 2008:

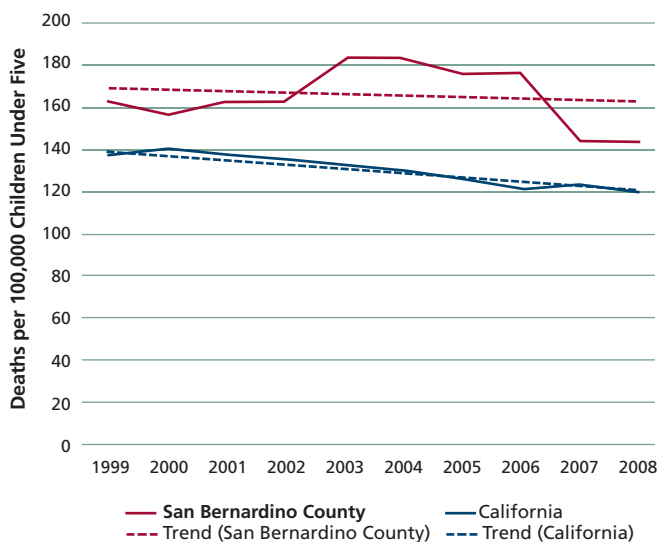
- There was a 1% decrease in the number of infant deaths, falling from 205 in 2007 to 203 in 2008.
- However, among children ages one through four there was a 25% increase, from 32 deaths in 2007 to 40 in 2008.
- The 10-year trend for San Bernardino County, as well as the state, is gradually downward.
- San Bernardino County has a consistently higher rate of death for children under five than the California average and all neighboring counties compared.
- Congenital defects (e.g. spina bifida) and chromosomal abnormalities (e.g. Down syndrome) top the list of leading causes of infant deaths.
- Accidents are the leading cause of death for young children (one to four years old).

Death Rate Due to All Causes for Children Under Five County Comparison, 2007 and 2008



Source: California Department of Public Health, Center for Health Services, Vital Statistics Query System (www.applications.dhs.ca.gov/vsq/default.asp)

Death Rate Due to All Causes for Children Under Five San Bernardino County and California, 1999-2008



Leading Causes of Death for Infants and Young Children San Bernardino County, 2008*

Cause of Death	Number of Deaths
Infants (Under Age One)	
Congenital Defects/Chromosomal Abnormalities	40
Prematurity/Low Birth Weight	36
Sudden Infant Death Syndrome	17
Cardiovascular Disorders	12
Maternal Pregnancy Complications Affecting Newborn	11
Blood Infection	11
Other Unspecified or Undefined Causes	10
Accidents	
Motor Vehicle Related	4
Assault	2
Other Accident	2
Drowning	1
All Other Causes	54
Young Children (Ages 1-4)	
Accidents	
Motor Vehicle Related	13
Drowning	3
Excessive Heat	1
Assault (Homicide)	8
Cancer	6
Endocrine, Nutritional or Metabolic Diseases	3
Nervous System Diseases	2
Congenital Defects/Chromosomal Abnormalities	2
All Other Causes	2

* 2008 cause of death data is considered preliminary. Causes with fewer than five deaths for infants and fewer than two deaths for young children are included in "All Other Causes."

Source: County of San Bernardino, Department of Public Health

Connecting the Dots

Leading Causes of Death for Children Under Five could be reduced if more families received the important preventative health care and safety counseling that they get when they have Health Care Access.



Students are Becoming More Fit

Description of Indicator

This indicator measures the physical fitness and weight status of children using two sources. The California Department of Education’s Fitnessgram – administered annually to 5th, 7th and 9th graders – measures performance in six areas including weight status. The Center for Disease Control and Prevention’s Pediatric Nutrition Surveillance System (PedNSS) tracks the percentage of children from low-income families who are considered overweight.

Why is it Important?

A sedentary lifestyle and being overweight are among the primary risk factors for many health problems. Building a commitment to fitness, maintaining a healthy body weight, and taking steps to reduce barriers to healthy eating and fitness can have positive impacts on children’s health that carry into adulthood.

How is San Bernardino County Doing?

Fitness levels improved:

- In 2010, San Bernardino County student fitness levels improved for all three grade levels tested.
- 64% of students met the aerobic capacity standard in 2010 (widely considered one of the most important components of fitness), compared to 49% in 2006.

Estimates of overweight youth show improvement:

- In 2010, 31% of the students tested for the Fitnessgram were considered to have unhealthy body weight (typically overweight). This rate has decreased 10% since 2006.¹
- San Bernardino County improved its ranking among California’s 58 counties to 19th (from 25th) among children ages two to four, but increased its ranking to 24th (from 18th) among youth ages five to 19.

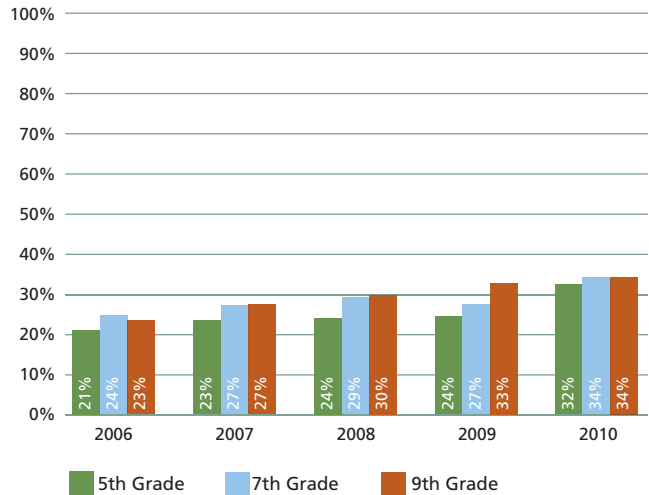
Healthy People 2020 targets for obesity are:

- 9.6% of children ages 2 to 5
- 15.7% of children ages 6 to 11
- 16.1% of children ages 12 to 19

See Prenatal Care for an explanation of Healthy People 2020.

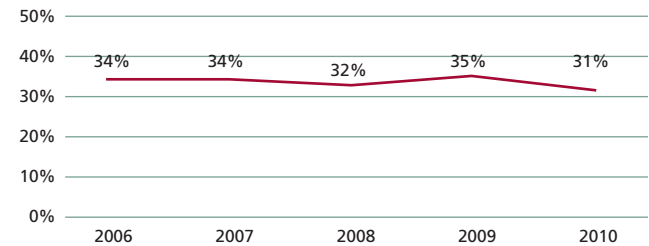
¹ A small percentage (estimated at roughly 2%) of these proportions include underweight youth. Results by grade were aggregated and averaged.

Physically Fit Youth: Percent of Students Acheiving Six out of Six Fitness Standards
San Bernardino County, 2006-2010



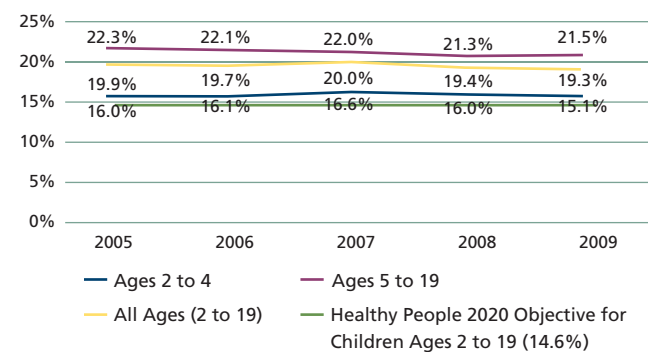
Source: California Department of Education (<http://data1.cde.ca.gov/dataquest>)

Percent of 5th, 7th, and 9th Grade Students with Unhealthy Body Composition
San Bernardino County, 2006-2010



Source: California Department of Education (<http://data1.cde.ca.gov/dataquest>)

Percent Overweight Among Low-Income Youth
San Bernardino County, 2005-2009



Source: Centers for Disease Control and Prevention, Pediatric Nutrition Surveillance System (www.dhcs.ca.gov/services/cbdp/Pages/PedNSS2009.aspx)

Connecting the Dots

The Physical Fitness of Children can have a direct affect on Chronic Disease prevention and life-long health.



More Students Lack Stable Housing

Description of Indicator

This indicator measures San Bernardino County families' progress toward housing stability by tracking the availability of rental assistance and the number of public school students who are homeless or living in unstable housing arrangements. For additional countywide housing trends, see Housing Demand, Housing Affordability, and Rental Affordability.

Why is it Important?

Increasing rent or mortgage costs, foreclosure, loss of a job, or simply not having enough money to afford the high up-front costs of renting or buying a home are challenges that can force many families into living conditions they would not choose otherwise. Living doubled- or tripled-up due to economic constraints can place stress on personal relationships, housing stock, public services and infrastructure. When shared housing is not an option, the result can be homelessness.

How is San Bernardino County Doing?

Most residents seeking rental assistance will wait many years for a voucher unless conditions or funding levels change:

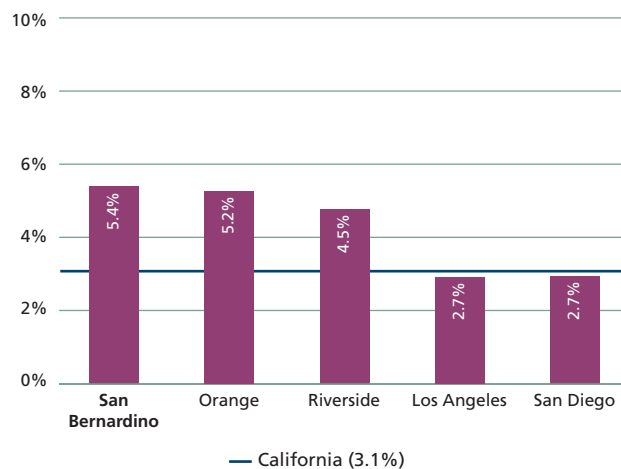
- As of May 2011, there were approximately 25,000 applicants waiting for a Housing Choice Voucher.
- During 2010, the San Bernardino Housing Authority used all of its allocated vouchers to assist an average of 7,500 households each month.
- The voucher supply remains limited because housing authorities have not had the opportunity to apply to the federal government for additional housing vouchers since 2003.

Federal law requires public school districts to report the number of students living in shelters or unsheltered in cars, parks or campgrounds, as well as in motels, or with another family due to economic hardship:

- In 2009/10, 22,660 San Bernardino County students, mostly in grades K-12, were identified as living in one of these unstable housing conditions.¹
- This represents approximately 5% of total enrollment.
- Families living doubled- or tripled-up in a home due to economic hardship are the largest cohort with 86% living in these conditions.
- Additionally, 6% of students live in shelters, 5% live unsheltered in cars, parks or campgrounds, and 3% live in motels.
- These figures represent a total increase of 28% over 2008/09 figures.
- On a per-enrollment basis, San Bernardino County has more students who are homeless or living without stable housing than the California average and the southern California counties compared.

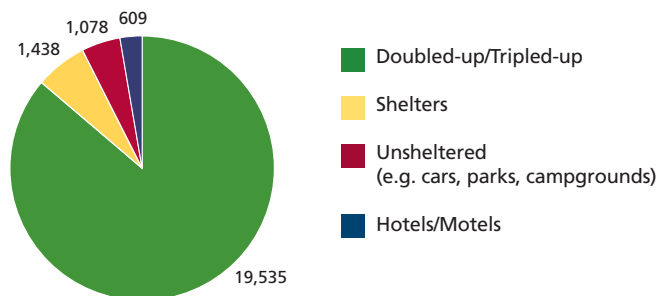
¹ This figure includes 449 homeless pre-kindergarten children participating in San Bernardino County Superintendent of Schools pre-K programs. Data are as of December 17, 2010.

Percent of Total Enrollment of Students Identified as Homeless or Lacking Stable Housing
County Comparison, 2009/10



Sources: California Department of Education, according to information provided by school districts on their Local Education Agency Reporting Form Title 1, Part A and Homeless Education Consolidated Application

Primary Nighttime Residence of Students Identified as Homeless or Lacking Stable Housing
San Bernardino County, 2009/10



Source: California Department of Education, according to information provided by school districts on their Local Education Agency Reporting Form Title 1, Part A and Homeless Education Consolidated Application

Throwaway Kids?

School districts are not required to count the number of homeless students who are unaccompanied youth (persons under 18 living without a parent or guardian), but a subset of districts in San Bernardino County determined that 658 of their homeless students in 2009/10 were unaccompanied youth. Since this was not a comprehensive survey, this number is likely an undercount. These students live in shelters, "couch surf," or are unsheltered, sleeping in quarters not meant for human habitation. Unaccompanied youth are highly likely to be victims of physical or sexual abuse prior to leaving or being kicked out of their homes, and they often come from homes where one or both parents abused drugs or alcohol.

Sources: San Bernardino County Superintendent of Schools; MacLean, MG et. al., "Homeless adolescents' path to separation from family: Comparison of family characteristics, psychological adjustment, and victimization," *Journal of Community Psychology*, 1999

Connecting the Dots

Family Housing Security is a significant contributor to the ability of children to maintain and improve Academic Performance.



Nearly One-Fourth of Children Live in Poverty

Description of Indicator

This indicator measures San Bernardino County families' progress toward self-sufficiency and economic stability by tracking enrollment in core public assistance programs and the proportion of children living in low income families, as measured by the number of children eligible for free or reduced price school meals.

Why is it Important?

The challenges associated with poverty – including stress, strained family relationships, substandard housing, lower educational attainment, limited employment skills, unaffordable child care, and transportation difficulties – make it hard for low income families to obtain and maintain employment. Economic stability can have lasting and measurable benefits for both parents and children.

How is San Bernardino County Doing?

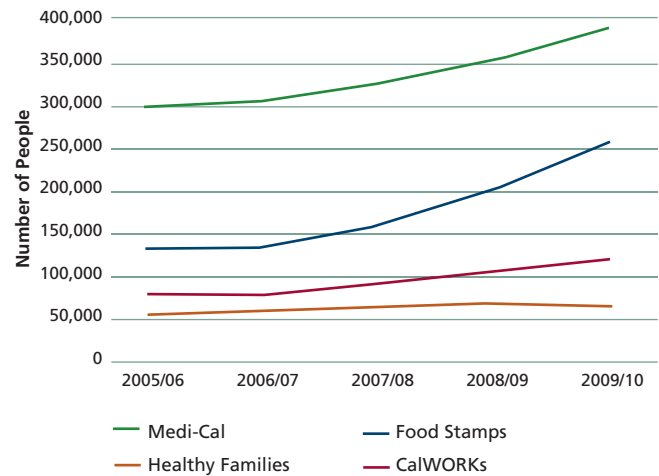
Public assistance enrollment continues to rise:

- In 2010, the number of people receiving Food Stamps (252,033) rose 25% in a single year, while CalWORKs cash assistance enrollment rose 13% to 121,177 recipients.
- Medi-Cal participation rose 11% to 391,351 participants, while Healthy Families enrollment declined 6% to 63,920 children participating.
- San Bernardino County is home to 4.8% of California's households; however, a disproportionate 7.6% of the approximately 911,000 California households receiving cash public assistance or Food Stamps reside in San Bernardino County.

The increase in the number of low income families continues:

- In the 2009/10 school year, 63.4% of students lived in low income families and were eligible for free or reduced price school meals, up from 61.2% in 2008/09.
- A child is eligible if his or her family's income is below 185% of the poverty level (e.g. \$40,793 for a family of four in 2010).¹
- Over the past 10 years, eligibility has increased 25% in San Bernardino County, compared to 19% growth statewide.
- Census poverty data indicates that in 2009, 19.1% of San Bernardino County families with children lived in poverty while 14.1% of adults lived in poverty.²
- Fully 23.8% of all San Bernardino County children lived in poverty.²
- The poverty level is approximately \$22,000 for a family of four.^{1,3}

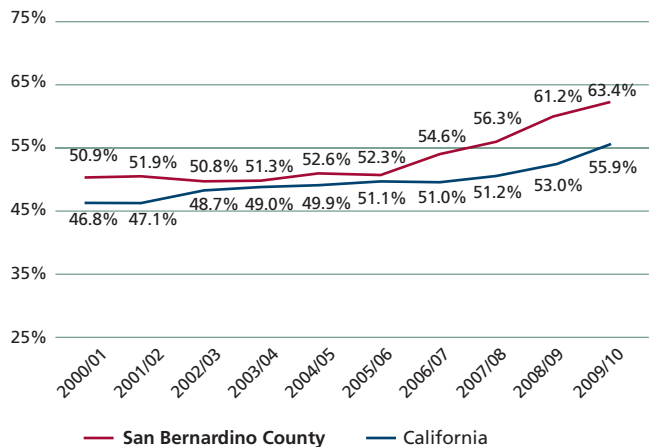
Major Public Assistance Program Enrollment San Bernardino County, 2006-2010



Note: Food Stamps and Medi-Cal counts include all persons who receive Medi-Cal and Food Stamps - both those who receive CalWORKs and those who do not.

Sources: San Bernardino County Human Services

Children Eligible for Free or Reduced Priced School Meals San Bernardino County and California, 2001-2010



Source: California Department of Education, DataQuest (<http://data1.cde.ca.gov/dataquest/>)

Program Descriptions

Most programs require income and asset limitations, as well as citizenship or permanent legal resident status. Other eligibility factors may apply such as county or state residency, age, or time in the program (time-limits).

- **CalWORKs** provides cash benefits for the care of low income children.
- **Food Stamps** provides low income households with assistance for the purchase of food.
- **Medi-Cal** is a health care program for certain low income populations.
- **Healthy Families** is a health insurance program for children under 19 years who do not qualify for free (zero share-of-cost) Medi-Cal.

¹ Health and Human Services Federal Poverty Guidelines 2010 (<http://aspe.hhs.gov/poverty/10poverty.shtml>)

² American Community Survey, 2009 (www.census.gov)

³ U.S. Census Bureau Poverty Thresholds 2009 (www.census.gov/hhes/www/poverty/data/threshld/index.html)

Connecting the Dots

Family Income Security is the single greatest need for ensuring Family Housing Security.



Veteran Benefit Payments Increase Nearly 20%

Description of Indicator

This indicator measures the percent of veterans living in San Bernardino County as well as expenditures per veteran and federal benefit dollars obtained by the San Bernardino County Department of Veterans Affairs.

Why is it Important?

Tracking the veteran population highlights both the need for services and the support provided. Veterans from all eras reside in San Bernardino County, with needs that range from aging and adult services to children's services, and from transitional assistance to public health. Strengthening support networks for veterans and their families may reduce the long-term individual and societal impacts of war.

How is San Bernardino Doing?

San Bernardino County ranks in the middle among regions compared for the proportion of veterans in its population:

- In 2010, approximately 5.7% of San Bernardino County's population was comprised of veterans.
- The number of veterans living in San Bernardino County is declining. The veteran population went from 134,921 in 2001 to 117,188 in 2010, and is projected to decline further in the future.
- In terms of expenditures per veteran, in 2010, San Bernardino County spent more than Orange County and Phoenix but less than the state average and other regions compared.

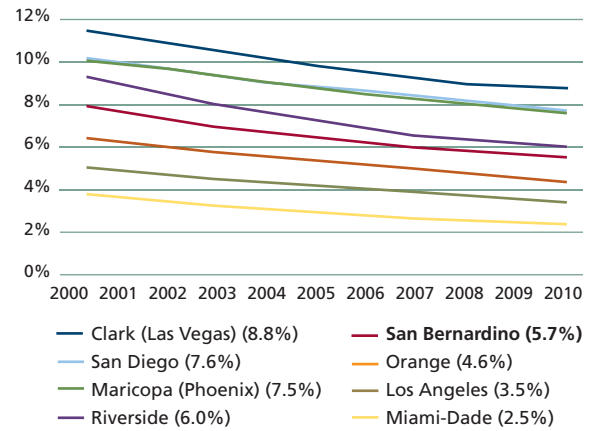
During 2009/10, the San Bernardino County Veteran Services Office obtained significant benefits for veterans:

- The combined annual value of federal monthly payments and one-time benefits obtained by San Bernardino County for veterans was \$23,731,620, a 19% increase from the previous year.
- This \$23.7 million in new federal dollars was generated at a net cost to the County of just over \$1.2 million (\$1,240,415).
- In addition to the \$23.7 million, the Veteran Services Office received \$76,124 of revenue from Medi-Cal cost avoidance, the highest amount in the state.
- The average value of monthly payments for veterans in San Bernardino County was \$575. Average monthly payments were highest in San Diego County (\$794), Riverside County (\$588) and Orange County (\$587).

Economic Impact of Supporting Veterans

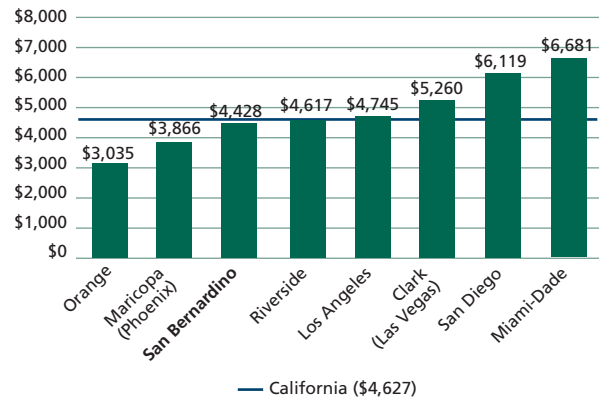
The Center for Strategic Economic Research recently completed a study of the economic impact of veterans in select California counties, including San Bernardino. The study showed that the estimated total annual economic impacts from spending supported by benefit payments obtained by County Veterans Service Offices has a multiplier effect in the county, including supporting 87 jobs, more than \$10 million of output and \$3.6 million of employee compensation.

Percentage of Population Comprised of Veterans County Comparison, 2001-2010 (2010 Data)



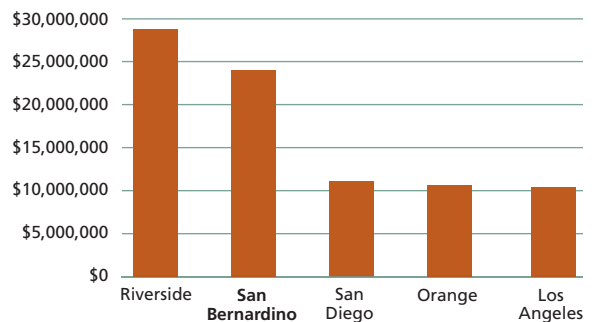
Sources: National Center for Veterans Analysis and Statistics, VetPop2007County: County-Level Veteran Population by VISA, 2000-2030 (www1.va.gov/vetdata/page.cfm?pg=15); U.S. Census Bureau (www.census.gov/popest/counties/CO-EST2008-01.html)

Expenditures per Veteran County Comparison, 2010



Source: National Center for Veterans Analysis and Statistics (www.va.gov/vetdata/)

Federal Benefit Payments Received by Veterans County Comparison, 2009/10



Source: California Department of Veterans Affairs

Connecting the Dots

Veterans are in particular need of Mental Health services as evidenced by the high proportion of suicides that are by veterans.



More Residents are Uninsured in 2009

Description of Indicator

This indicator measures health insurance coverage and the types of coverage among residents under age 65. It also shows percent of people who have a usual place to go to when sick or need health advice and the percent of people who delayed or did not get medical care in the past 12 months.

Why is it Important?

Individuals who have health insurance are more likely to seek routine health care and take advantage of preventative health screening services than those without such coverage, resulting in a healthier population and more cost-effective health care. Having a usual source of care promotes getting appropriate care when needed and increases the opportunity for receiving preventative care. Delaying or not receiving needed medical care may result in more serious illness, increased complications, and longer hospital stays.

How is San Bernardino County Doing?

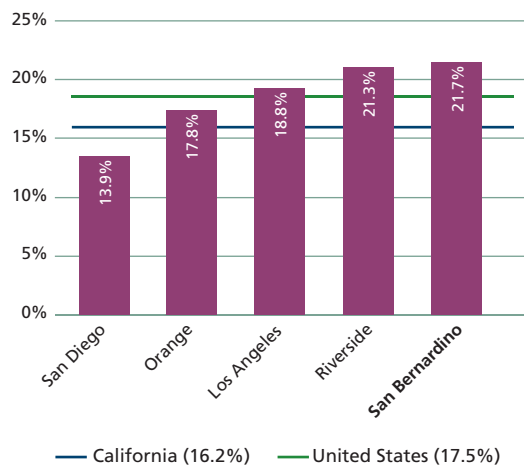
Fewer people in San Bernardino County are covered by health insurance:

- In 2009, 21.7% of residents were uninsured – a 43% increase from 2007.
- San Bernardino County’s rate of uninsured among residents under age 65 rose above the national average, and was higher than all neighboring counties.
- The majority of people under age 65 are covered by private insurance (54%), followed by publicly funded coverage (22%).

While more people in San Bernardino County have access to medical care, a higher percent of its residents delay care:

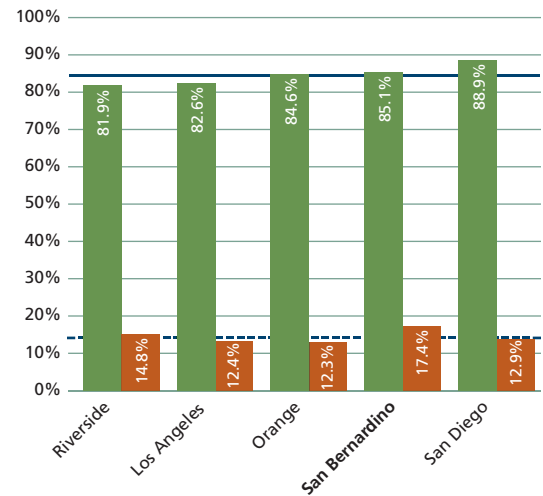
- According to the 2009 California Health Interview Survey, 85.1% of people under age 65 reported they had a usual place to go to when they were sick or needed health advice, a higher proportion than California and all counties compared except San Diego County (88.9%).
- However, 17.4% of San Bernardino County residents under age 65 reported they delayed or did not get the medical care that they needed, higher than the state and neighboring counties.
- This is an increase of 22% since 2007, when 14.3% of San Bernardino residents under age 65 delayed or did not get needed medical care.

Percent Uninsured (Under Age 65)
County Comparison, 2009



Sources: California Health Interview Survey (www.chis.ucla.edu); National Center for Health Statistics (www.cdc.gov/nchs/fastats/binsure.htm)

Health Care Access (Under Age 65)
County Comparison, 2009

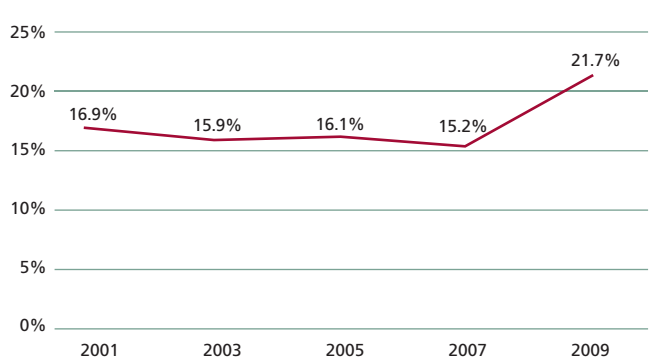


Residents reporting they...

- had a usual place to go for health care:
 - County (Green bar)
 - California (84.6%) (Blue dashed line)
- delayed/didn't get care:
 - County (Orange bar)
 - California (13.3%) (Blue dashed line)

Source: California Health Interview Survey (www.chis.ucla.edu)

Percent Uninsured (Under Age 65)
San Bernardino County, 2001-2009



Source: California Health Interview Survey (www.chis.ucla.edu)

Connecting the Dots

Health Care Access can lead to improved physical and mental health which contribute to our rankings as a county compared to the state in Health Status.



One-Third of Clients Served are Children or Youth

Description of Indicator

This indicator measures: the estimated number of adult residents likely to have psychological distress; the estimated number of poverty-level residents of any age considered “in need” due to serious mental illness, emotional disturbance, or psychological distress; and the number of clients served by publicly-funded county mental health programs.

Why is it Important?

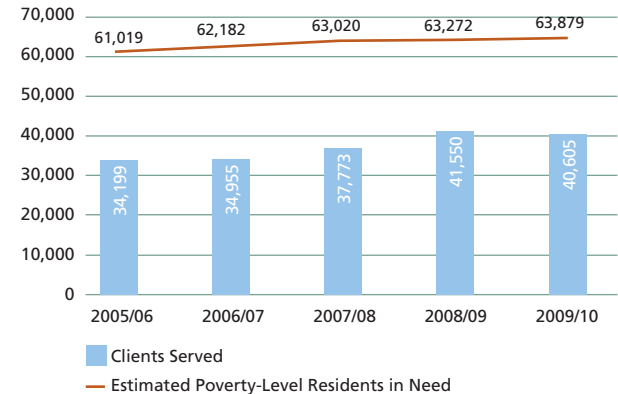
Mental illness is the leading cause of disability in the United States for those ages 15 through 44, and one in four people suffer from a diagnosable mental illness in any given year. While mental illness does not discriminate, risk factors such as lower educational attainment, unemployment, poverty, caregiver separation, neglect and abuse place many residents of San Bernardino County in jeopardy. This is especially critical for children and youth, as half of all lifetime cases of mental illness begin at age 14 and three-quarters by age 24.¹

How is San Bernardino County Doing?

The mental health needs of all low-income residents are not fully met by publicly-provided services:

- Of the estimated 812,000 low-income residents of San Bernardino County (those living below 200% of the poverty level), it is estimated that 63,879 (or 8%) have a significant and serious mental illness that needed mental health services in 2009/10.²
- In 2009/10, 40,605 unduplicated clients received public mental health services.
- In addition to public care, residents may be using other services such as private health coverage or other community nonprofit agencies to meet their mental health needs, or their needs may be going unmet.
- A total of 13,682 children ages 0 – 17 received County mental health services in 2009/10 – more than one-third of all clients served.
- Almost 14% of clients served were between 18 and 24 years, 43% were adults between 25 and 54 years, and 9% were 55 years or older.
- A higher proportion of children and older adults were served in 2009/10 compared to 2008/09.
- The racial and ethnic breakdown among clients served during 2009/10 was roughly proportionate to the county’s racial and ethnic breakdown, with the exception of Latinos and African Americans (see County Profile).

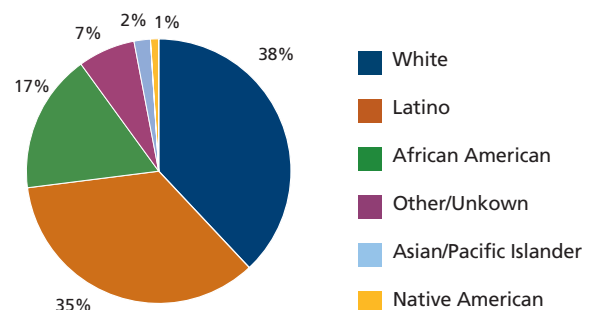
Unduplicated Count of Clients Served by the Public Mental Health System and the Estimated Number of Poverty-Level Residents in Need of Mental Health Services San Bernardino County, 2006-2010



Note: Persons in need for 2005/06, 2006/07, 2008/09, and 2009/10 are calculated using the California Department of Mental Health’s “Estimates of Need for Mental Health Services for 2007” as the benchmark. Estimated need and number of clients served have been updated since previously reported.

Sources: San Bernardino County Mental Health Plan, Behavioral Health Services, Client Services Information System; California Department of Mental Health, Series P5, Estimates of Need for Mental Health Services for California for Serious Mental Illness, 2007 (www.dmh.ca.gov/Statistics_and_Data_Analysis/Total_Population_by_County.asp); Department of Finance, Table E-2 Population and Components of Change (www.dof.ca.gov/research/demographic/reports/view.php)

Unduplicated Clients Served by the Public Mental Health System, by Race/Ethnicity San Bernardino County, 2009/10



Source: San Bernardino County Mental Health Plan, Behavioral Health Services, Client Services Information System

Disparities in Mental Health Care

A mental health disorder can impact anyone, regardless of race or ethnicity, but there are disparities among racial and ethnic groups in terms of rates of diagnosis and likelihood of seeking and receiving primary care treatment (www.cdc.gov/omhd/amh/factsheets/mental.htm). To address this issue, San Bernardino County’s Department of Behavioral Health seeks to increase public awareness of effective, community-based treatments; tailor treatments to age, gender, race and culture; and reduce financial barriers to treatment.

¹ Kessler, R, et al, National Comorbidity Survey Replication, Archives of General Psychiatry, June 2005; Substance Abuse and Mental Health Services Administration, 2002

² Persons in poverty estimate is from the 2009 California Health Interview Survey.

Connecting the Dots

Half of people with a Mental Health disorder also have a Substance Abuse problem.



Many Indicators Show Improvement

Description of Indicator

A variety of commonly used indicators are shown to help gauge the extent of alcohol and other drug (AOD) abuse. These include youth use of AOD, AOD-related deaths and arrests, admissions to treatment facilities, and alcohol-involved car collisions.

Why is it Important?

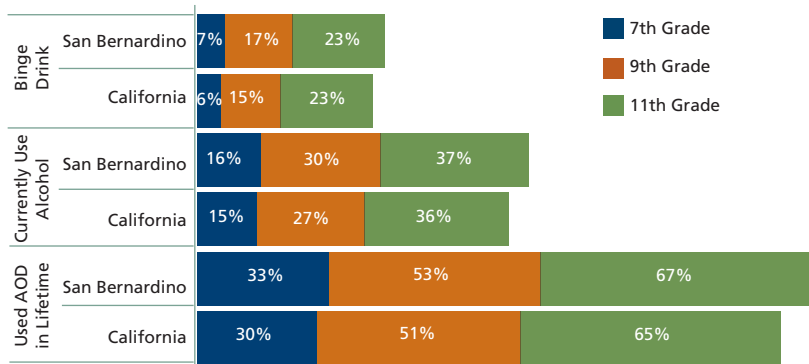
A broad spectrum of public health and safety problems are directly linked with substance abuse including addiction, traffic accidents, domestic violence, crime, unintended pregnancy, and serious conditions such as cancer, liver disease, HIV/AIDS, and birth defects.

How is San Bernardino County Doing?

While many indicators show progress, San Bernardino County tends to experience a higher substance abuse burden than the California average:

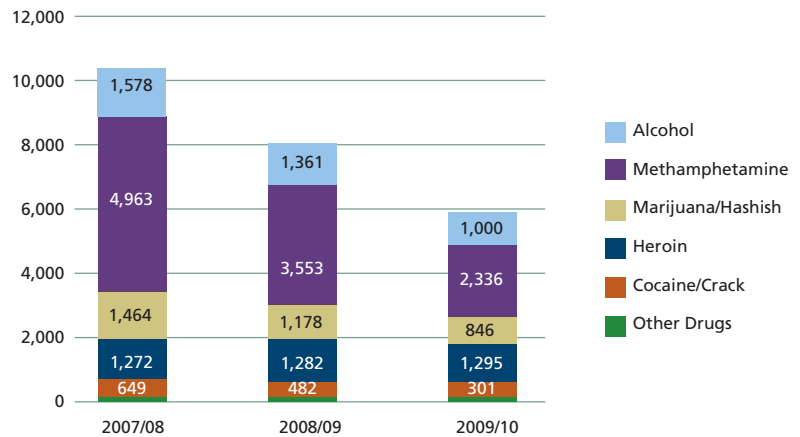
- Compared to the California average, 2007-09 survey data reveal San Bernardino County high school youth engage slightly more frequently in binge drinking and are more likely to say they have tried drugs or alcohol in their lifetimes.
- San Bernardino County youth have the same level of current alcohol use as the California average.
- San Bernardino County witnessed a 43% decline in alcohol-involved injury or fatal collisions between 2008 and 2010, the same rate of decline as the statewide average.
- In 2010, 13% of injury and fatal motor vehicle collisions in San Bernardino County involved alcohol, compared to 11% of collisions statewide.¹
- San Bernardino County's rate of death caused by chronic liver disease and cirrhosis has improved slightly over the past five years, yet remains above the statewide average. (See Health Status)
- Drug-induced deaths have remained unchanged and match the statewide average. (See Health Status)
- Between 2006 and 2009, drug-related arrests in San Bernardino County fell 30%, although alcohol-related arrests fell only 1%. Statewide, there were 19% fewer drug-related arrests and 7% more alcohol-related arrests.
- Both drug- and alcohol-related arrest rates are above the statewide averages.²
- AOD-related admissions to public treatment facilities continue to fall, dropping 43% between 2007/08 and 2009/10.
- The decrease in AOD services is largely attributable to a decrease in available funding.
- 39% of clients receiving alcohol and drug services also received mental health services.³

Percent of Youth Who Engage in Binge Drinking, Currently Use Alcohol, or Have Ever Used Alcohol and Other Drugs (AOD) San Bernardino County and California, 2007-09



Source: California Healthy Kids Survey, 2007-09 County Results: Main Report, WestEd Health and Human Development Program for the California Department of Education (<http://cbks.wested.org/reports>)

Alcohol- and Drug-Related Admissions to County-Funded Treatment Services San Bernardino County, 2008-2010



Source: San Bernardino County CalOMS dataset

The Mental Health/Substance Abuse Connection

50% of people with a serious mental illness are also affected with an addictive disorder.

Source: National Alliance on Mental Illness, 2010

¹ California Highway Patrol (<http://iswitr.chp.ca.gov/Reports/jsp/userLogin.jsp>)
² California Department of Justice, Office of the Attorney General (<http://oag.ca.gov/crime>)
³ San Bernardino County CalOMS dataset

Connecting the Dots

Substance Abuse among pregnant mothers is a serious problem that can be addressed through early Prenatal Care.



Two-Thirds of Adults are Overweight or Obese

Description of Indicator

This indicator reports asthma diagnoses for children and adults, adults with diabetes diagnoses, and overweight and obese adults.

Why is it Important?

Chronic conditions, including asthma, diabetes, and obesity and overweight, are costly yet largely preventable. Chronic illnesses cause approximately 70% of deaths in the United States each year and account for about 75% of the nation's health-related costs.

How is San Bernardino County Doing?

In 2009, San Bernardino County fared better than California and most peers compared for asthma:

- 14.7% of children and 11.6% of adults in San Bernardino County have ever been diagnosed with asthma. This marks a five-year decrease of 14% and 22%, respectively.
- San Bernardino County has the second lowest rate of adult asthma of all counties compared (higher than Orange County and tied with San Diego County).
- The county has the second highest childhood asthma diagnosis rate of counties compared.
- African-Americans had the highest rate of asthma diagnosis (22.2%), followed by Whites (13.5%) and Latinos (9.7%).

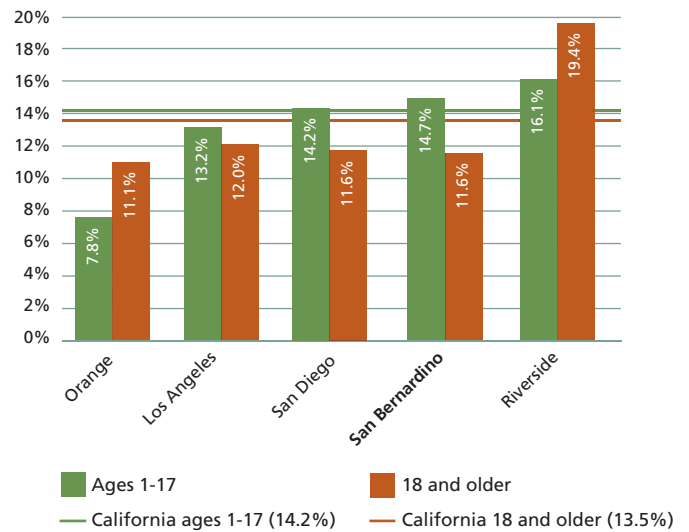
The percent of overweight and obese adults is rising:

- In 2009, 36% of San Bernardino County adults were considered overweight and 32% were obese.
- This marks a six-percentage point increase in obese adults, up from 26% in 2007.
- San Bernardino County had the highest level of overweight or obese adults (68%) compared to neighboring counties and California.

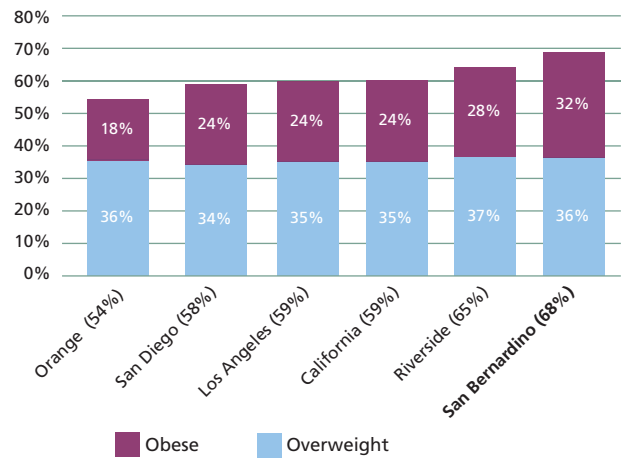
Diabetes rates are also on the rise:

- According to 2009 data, 10.6% of adults in San Bernardino County have been diagnosed with diabetes, the second highest rate among neighboring counties and California, after Los Angeles County (10.9%).
- This marks a five-year increase of 47%.
- Most of the adults with a diabetes diagnosis (71%) have Type II diabetes.

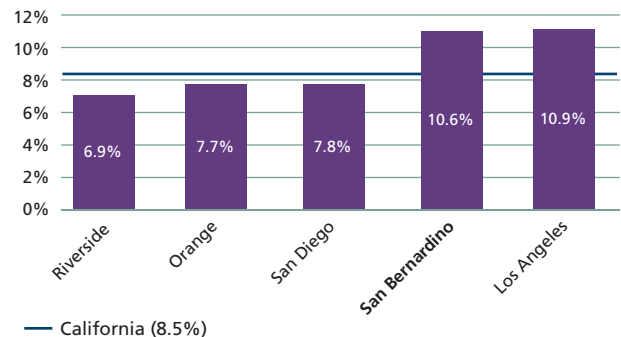
Percent Ever Diagnosed with Asthma, by Age County Comparison, 2009



Overweight and Obese Adults County and State Comparison, 2009 (Total)



Percent Ever Diagnosed with Diabetes County Comparison, 2009



Source: California Health Interview Survey

Connecting the Dots

Chronic Disease is affected not only by personal choices but also by regional issues such as Air Quality.



Overall Rates of Mortality Improve

Description of Indicator

For commonly measured health status indicators, this indicator reports mortality rates (age-adjusted deaths per 100,000 people) and progress toward the Healthy People 2020 objectives.¹

Why is it Important?

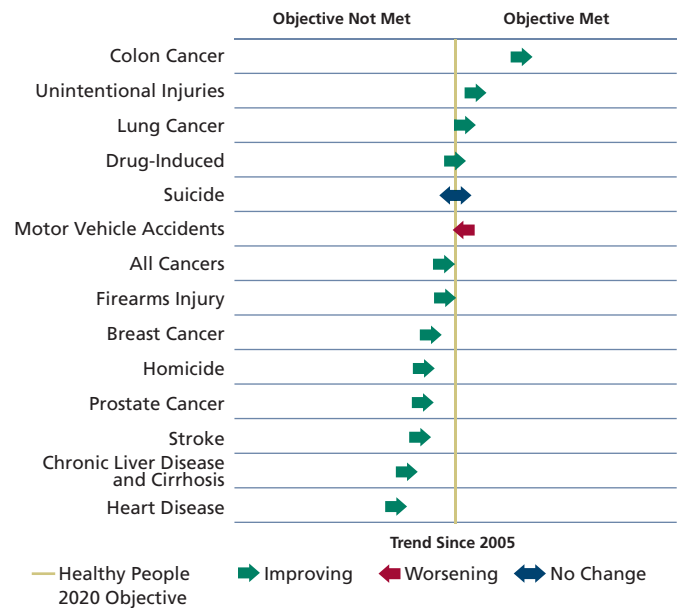
Viewing the county in relation to statewide averages and national health objectives identifies public health issues that are comparatively more or less pronounced in San Bernardino County. This information helps the development and prioritization of public health initiatives.

How is San Bernardino County Doing?

The county achieved the national objectives for five out of 14 commonly measured causes of death:²

- In 2009, San Bernardino County met the Healthy People 2020 national objectives for colon cancer, unintentional injuries, lung cancer, drug-induced deaths and suicide.
- Death rates for all major causes have improved over the past five years, except for suicide and motor vehicle accidents.
- The death rates that improved most over the past five years are those due to influenza/pneumonia and homicide.
- San Bernardino County death rates are higher than the California average for all causes compared except unintentional injuries, influenza/pneumonia and drug-induced deaths.

Age-Adjusted Death Rates: Progress Towards 2020 Objectives San Bernardino County, 2009



Note: Deaths due to Diabetes, Chronic Lower Respiratory Disease, Alzheimer's, and Influenza or Pneumonia do not have a Healthy People 2020 objective and are not included in this chart. Counties with varying age compositions can have widely disparate death rates since the risk of dying is mostly a function of age. To enable county comparisons, age-adjusted death rates, which control for the variability, are used rather than crude death rates.

Source: California Department of Public Health, County Health Status Profiles (www.cdph.ca.gov/programs/ohir/Pages/CHSP.aspx)

San Bernardino County Age-Adjusted Death Rate Ranking and Comparison to California Average, 2009

Rank Among California Counties	Cause of Death	Comparison to California Average
13	Unintentional Injuries	Better than California Average
20	Suicide	Worse than California Average
24	Drug-Induced	Worse than California Average
27	Influenza or Pneumonia	Better than California Average
29	Lung Cancer	Worse than California Average
31	Motor Vehicle Accidents	Worse than California Average
32	Firearms Injury	Worse than California Average
35	Chronic Liver Disease and Cirrhosis	Worse than California Average
38	All Cancers	Worse than California Average
39	Alzheimer's Disease	Worse than California Average
42	Stroke	Worse than California Average
45	Colon Cancer	Worse than California Average
46	Breast Cancer	Worse than California Average
46	Homicide	Worse than California Average
48	Prostate Cancer	Worse than California Average
50	Chronic Lower Respiratory Disease	Worse than California Average
53	Diabetes	Worse than California Average
56	Heart Disease	Worse than California Average

Note: Ordered by San Bernardino County's rank among California counties (one is best, 58 is worst).

Source: California Department of Health Services, County Health Status Profiles

¹ See Prenatal Care for an explanation of Healthy People 2020. Data for causes of death reflect three-year averages (e.g. 2009 data is the average of 2007, 2008, and 2009).

² Healthy People 2020 objectives were modified significantly from Healthy People 2010, in most cases resulting in a more achievable objective. Thus a comparison of this year's San Bernardino Indicator Report with the 2010 indicator report for this indicator is not recommended.

Connecting the Dots

Health Status is highly correlated with Educational Attainment: the more educated you are, the more likely you are to be healthy.

