

# Wellness

## Section Highlights

Residents Without Health Insurance ..... 7.6%

Young Children's Mental Health Care Need ..... Up 145% in 5 Years

Substantiated Child Abuse ..... Increasing

Overweight Students ..... 2 in 5

Overweight Adults ..... 2 in 3

Veteran Requests for Assistance ..... Up 60% in 10 Years

## A Success Story

*The California University of Science and Medicine (CUSM) welcomed its inaugural class of 64 future physicians in July 2018, partnering with Arrowhead Regional Medical Center (ARMC) and Prime Healthcare Foundation. The medical school, known as CalMed, was conceived by Dr. Prem Reddy and Dr. Dev GnanaDev to address the shortage of physicians in the Inland Empire and scarcity of medical school slots in California. Currently operating out of the former Everest College building, CUSM's permanent campus will be constructed adjacent to ARMC and should be ready by July 2020. Community-focused partnerships allow CalMed to make connections between academic medicine and the surrounding community to improve health outcomes for area residents. When CalMed reaches its full capacity, it will have close to 500 medical students and hundreds of allied health students. This will result in over a billion dollars in economic benefit to our community over a decade.*

# Rate of Uninsured Continues to Decline

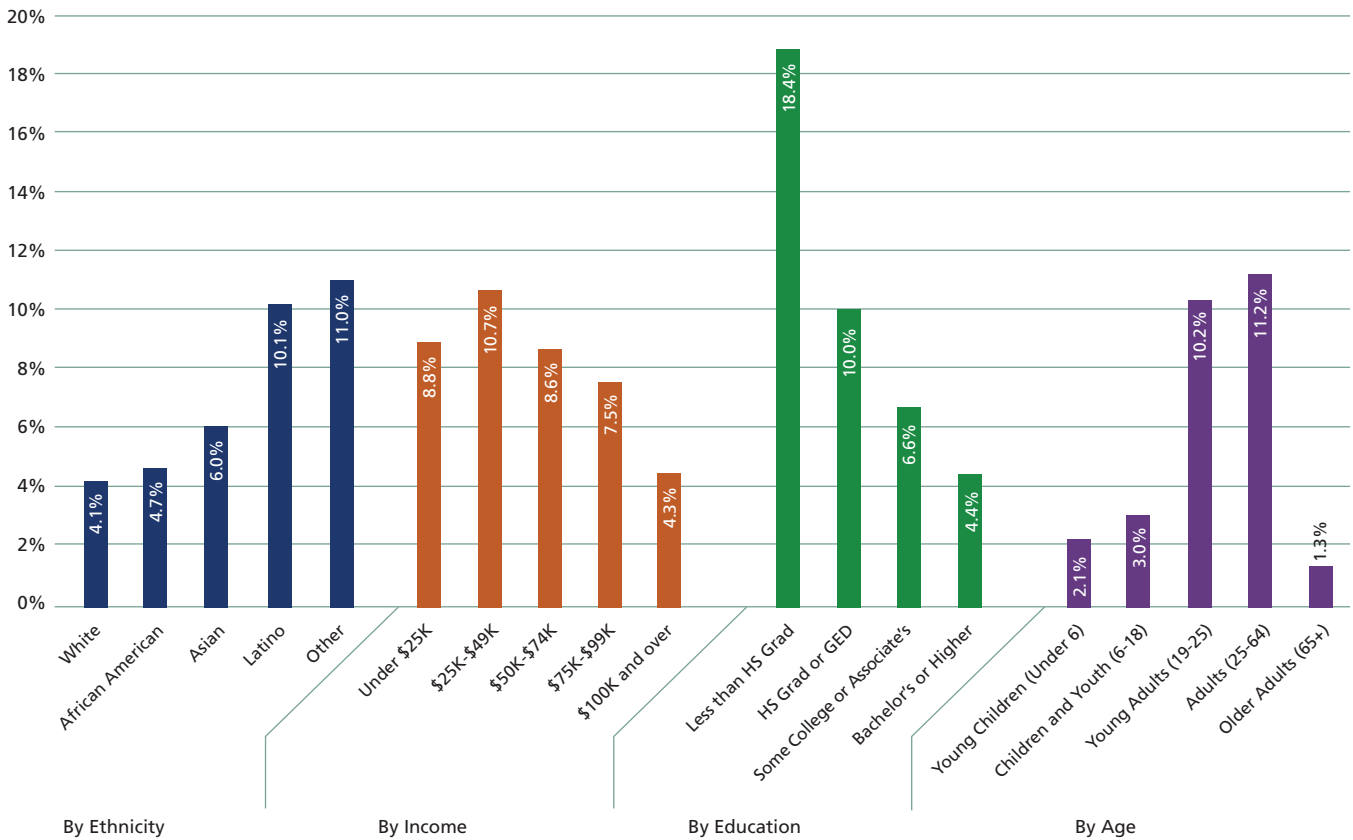
Individuals who have health insurance and a usual source of care are more likely to seek routine health care and take advantage of preventative health screening services than those without such coverage. The result is a healthier population and more cost-effective health care. Delaying or not receiving needed medical care may result in more serious illness, increased complications, and longer hospital stays. With the implementation of the Affordable Care Act (ACA), more people are receiving access to health care; however, a regional shortage of doctors, particularly primary care physicians, may restrict timely access to care. This indicator measures the percentage of residents without health insurance coverage, the number of residents per primary care physician, and whether residents have a usual source of care or delayed care. Also shown is Medi-Cal enrollment.

## How is San Bernardino County Doing?

The percentage of uninsured residents declined for seventh consecutive year:

- In 2017, 7.6% of San Bernardino County residents were uninsured, a drop of 13 percentage points from 2012, when 20.6% of residents were uninsured.
- This is lower than the United States (8.7% uninsured) and all peer counties compared, except for Orange County (7.4% uninsured) and California (7.2%).
- Those in the category “other” (which includes American Indian and Alaska Native alone, some other race alone, or two or more races) were the racial or ethnic group most likely to be uninsured (11.0%), followed by Latinos (10.1%).
- When broken out by household income, those with incomes in the second to lowest range (\$25,000 to \$49,000) were the most likely to be uninsured (10.7%).
- 18.4% of those with less than a high school diploma were uninsured, compared with 4.4% of those with a college degree.
- At 11.2%, adults (ages 25–64 years old) were the age group most likely to be uninsured.
- 2.1% of children under age six were uninsured.

## Uninsured by Race/Ethnicity, Income, Education, and Age San Bernardino County, 2017



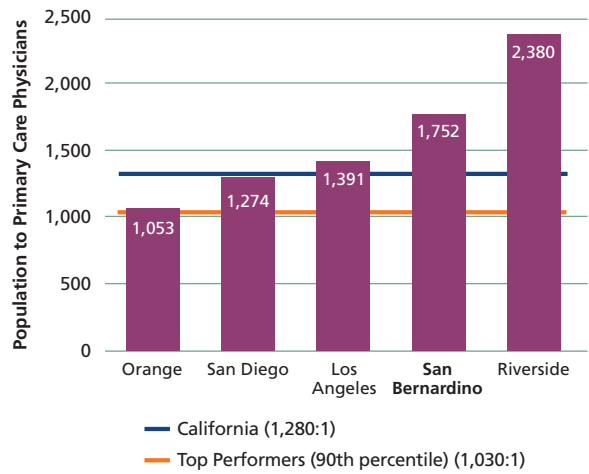
Note: Asian includes Native Hawaiian/Pacific Islander. White is non-Hispanic. Latino is of any race. Other includes American Indian and Alaska Native alone, some other race alone, or two or more races. Educational attainment data is for the population age 25 and over.

Source: U.S. Census Bureau, American Community Survey, 1-Year Estimates (<http://factfinder2.census.gov>)

Compared to neighboring counties, more San Bernardino County residents have a usual place to go for medical care:

- According to the 2016 California Health Interview Survey (CHIS), 86.5% of people under age 65 had a usual place to go when they were sick or needed health advice, a higher proportion than California and all neighboring counties compared, except San Diego (86.7%).
- However, 11.8% of San Bernardino County residents under age 65 delayed or did not get the medical care that they needed, higher than the state and all neighboring counties compared.
- There are 1,752 people for each primary care physician in San Bernardino County, higher than the state and all neighboring counties compared, except Riverside County. The national target ratio (consisting of “top performers” in the top 10%) is 1,030 for each primary care physician.<sup>1</sup>

Number of Residents per Primary Care Physician County Comparison, 2018



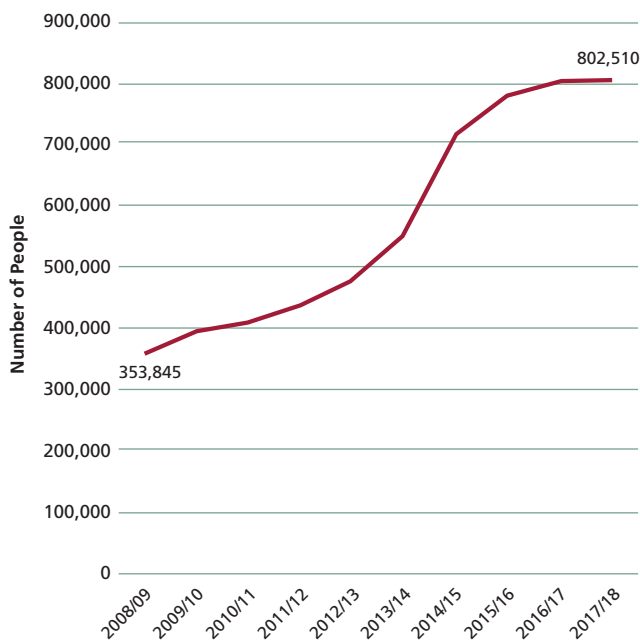
Source: County Health Rankings and Roadmaps ([www.countyhealthrankings.org](http://www.countyhealthrankings.org))

Medi-Cal Enrollment in San Bernardino County

Medi-Cal, a health care program for certain low-income populations, has seen significant increases since the roll out of the Affordable Care Act, which expands eligibility and requires health insurance coverage.

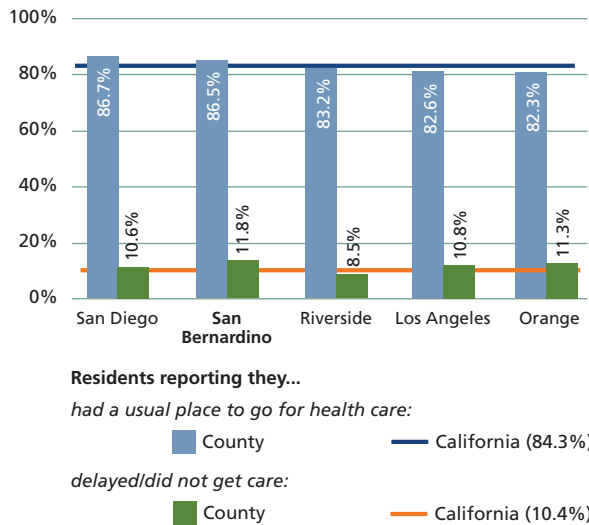
- In 2018, Medi-Cal enrollment increased less than one percent from the previous year.
- However, in the 10-year period between 2009 and 2018, overall Medi-Cal enrollment more than doubled (127% increase).

Enrollment in Medi-Cal San Bernardino County, 2009-2018



Source: San Bernardino County Human Services

Health Care Access (Under Age 65) County Comparison, 2016



Source: California Health Interview Survey

Hospitals and Medical Facilities

There are 26 hospitals serving residents and visitors to San Bernardino County, including two trauma centers: Loma Linda University Medical Center and Arrowhead Regional Medical Center (ARMC). The ARMC operates three community Family Health Centers (FHCs) for primary care, and the only burn center serving San Bernardino, Riverside, Inyo and Mono counties.

Source: State of California, Office of Statewide Planning and Development OSHPD (<http://gis.oshpd.ca.gov/atlas/places/list-of-hospitals/county/san-bernardino>)

<sup>1</sup> Primary care physicians include practicing physicians under age 75 specializing in general practice medicine, family medicine, internal medicine, and pediatrics.

## Early Prenatal Care Rates Decrease

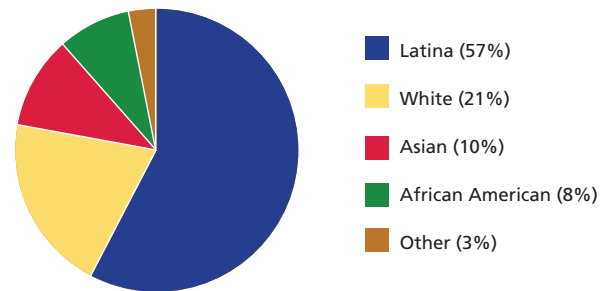
Increasing the number of women who receive early prenatal care (in the first trimester of pregnancy) can improve birth outcomes and lower health care costs by reducing the likelihood of complications during pregnancy and child-birth. Babies born to mothers who do not get prenatal care are three times 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 health problems and correct health-compromising behaviors that can be particularly damaging during the initial stages of fetal development.<sup>1</sup> This indicator tracks early prenatal care rates for San Bernardino County, including detail by race and ethnicity.

### How is San Bernardino County Doing?

In 2016, early prenatal care rates decreased:

- Early prenatal care for San Bernardino County mothers declined 1.3 percentage points to 82.3% in 2016, but this rate remains above the national Healthy People 2020 objective of 77.9%.
- In 2016, levels of early prenatal care worsened for White, Latina, and African American mothers. It stayed the same for Asian mothers.
- White mothers have the highest early prenatal care rate (83.9%), followed by Latina mothers (83.4%).
- The majority of births in San Bernardino County are to Latina mothers (57%), followed by White mothers (21%), Asian mothers (10%) and African American mothers (8%).
- Over the past 10 years, the number of live births in San Bernardino County decreased 12%, from 35,193 live births in 2007 to 31,114 in 2016.

Live Births by Race and Ethnicity  
San Bernardino County, 2016



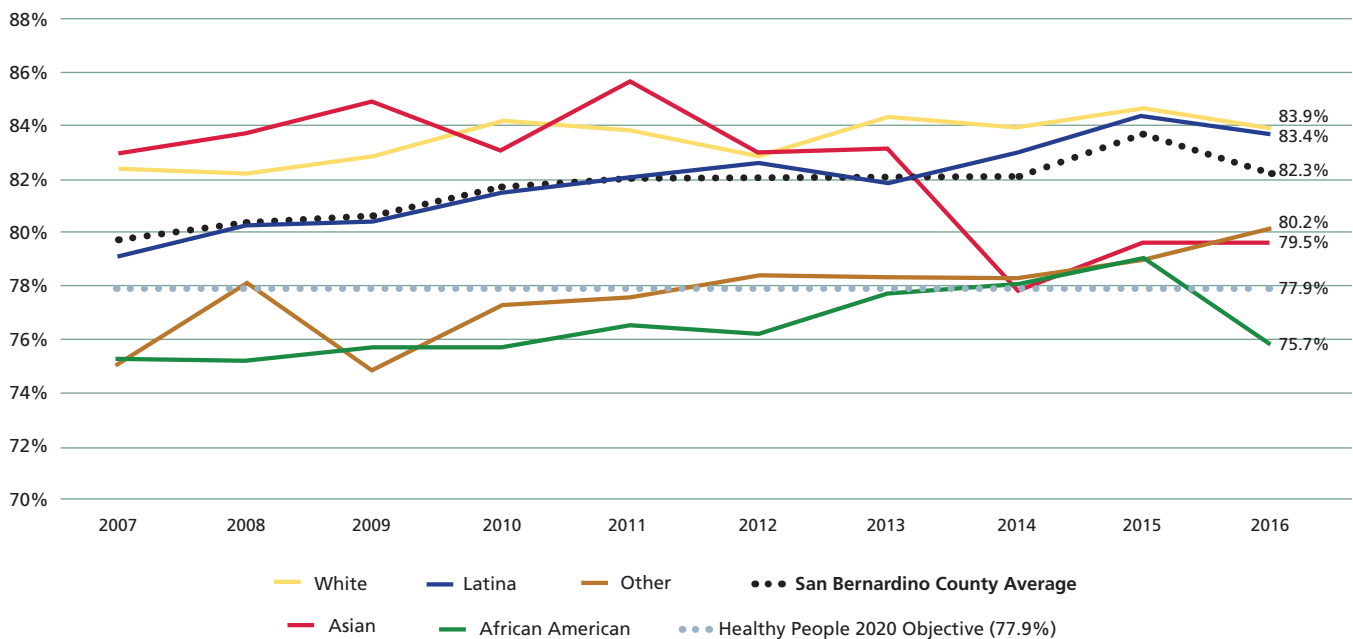
Note: Chart does not include 283 births with unknown or missing race/ethnicity.

Source: County of San Bernardino, Department of Public Health analysis of California Department of Public Health, Center for Health Information and Statistics, Birth Statistical Master File

### What is Healthy People 2020?

Healthy People 2020 is a national health promotion and disease prevention initiative that establishes national objectives to improve the health of all Americans, to eliminate disparities in health, and to increase the years and quality of healthy life.

Percentage of Mothers Receiving Early Prenatal Care by Race and Ethnicity  
San Bernardino County, 2007-2016



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

Source: County of San Bernardino, Department of Public Health analysis of California Department of Public Health, Center for Health Information and Statistics, Birth Statistical Master File

<sup>1</sup> Child Trends (<http://www.childtrends.org/?indicators=late-or-no-prenatal-care>)

## Child Deaths Increase

Awareness of the leading causes of death for children can lead to intervention strategies to help prevent mortality. Many of these deaths are preventable through preconception health care, early and ongoing prenatal care, and outreach to parents and caregivers. 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.

### How is San Bernardino County Doing?

In 2016, the overall death rate for children under five years of age in San Bernardino County increased:

- The number of infant deaths increased 21%, from 165 in 2015 to 199 in 2016.
- The number of deaths among children ages one through four increased 10%, from 30 deaths in 2015 to 33 deaths in 2016.
- The overall death rate for children under five increased 19% between 2015 and 2016.
- However, the 10-year trend for San Bernardino County is gradually downward.
- Congenital defects/chromosomal abnormalities and maternal pregnancy complications affecting the newborn continue to top the list of leading causes of infant deaths.
- Accidents and congenital defects/chromosomal abnormalities were the leading causes of death for young children (one to four years old).
- Of the 10 deaths due to accidents for children ages one to four years old, seven were due to drownings, two were due to accidental strangulation or suffocation, and one was due to motor vehicle collision.

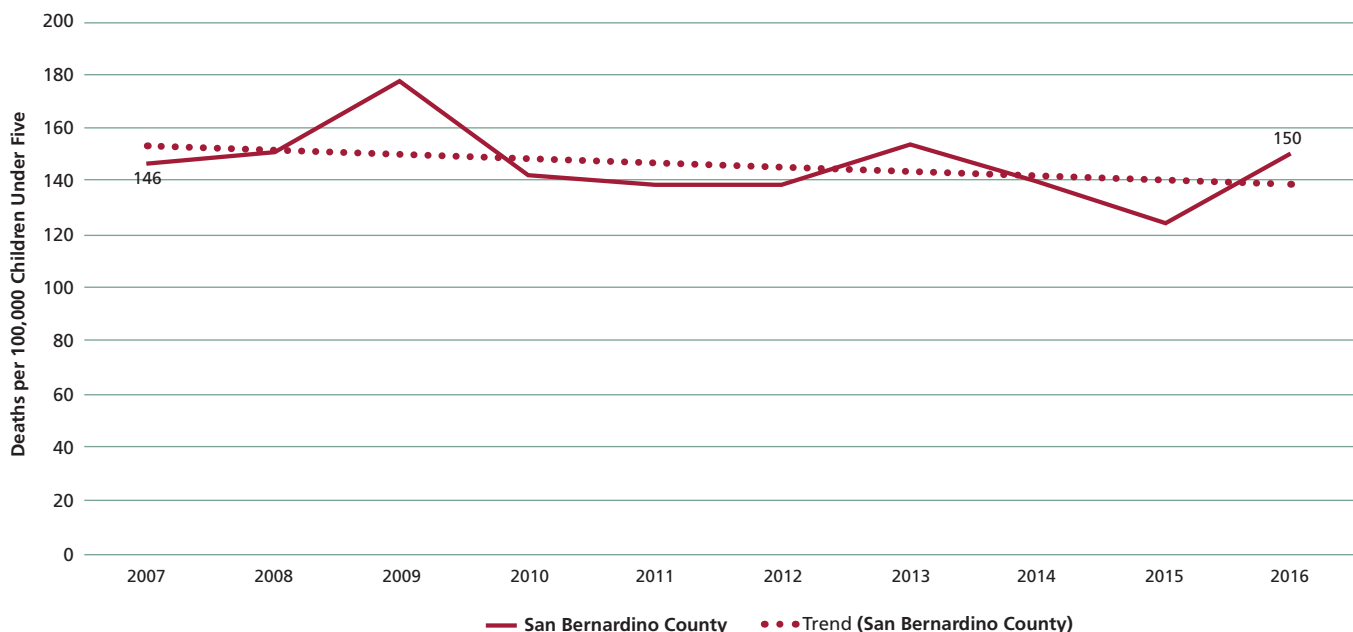
### Leading Causes of Death for Infants and Young Children San Bernardino County, 2016

Cause of Death	Number of Deaths	
	Infants (Under Age One)	Young Children (Ages 1-4)
Congenital Defects/Chromosomal Abnormalities	42	5
Maternal Pregnancy Complications Affecting Newborn	26	2
Prematurity/Low Birth Weight	14	16
Complications of placenta, cord & membranes	7	3
Respiratory distress of newborn	5	3
Intestinal Disease (Necrotizing enterocolitis) of Newborn	4	3
Sudden Infant Death Syndrome	3	3
Chronic Respiratory Disease	3	3
Gastritis, Duodenitis, and Noninfective Enteritis and Colitis	3	3
Pulmonary Hemorrhage	3	3
Bacterial Sepsis of Newborn	3	3
Cardiomyopathy	3	3
All other	83	16
<b>TOTAL</b>	<b>199</b>	<b>33</b>

With the exception of accidents, 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 analysis of California Department of Public Health, Center for Health Information and Statistics, California Death Statistical Master File

### Death Rate Due to All Causes for Children Under Five San Bernardino County, 2007-2016



Sources: County of San Bernardino, Department of Public Health analysis of California Department of Public Health, Center for Health Information and Statistics, California Death Statistical Master File; California Department of Finance: 2010-2060 - Population Projections by Race/Ethnicity, Detailed Age, & Gender

# Reports of Substantiated Abuse and Neglect Increase

Foster care placement is often the final act to protect children from abuse and neglect after attempts have been made to stabilize their families. In order to lessen the trauma associated with being removed from their parents, the goal is to place children with people who are familiar to them, such as relatives, extended family members and/or their siblings whenever possible. These placements not only promote emotional wellbeing, they also maintain family connections and the cultural and familial rituals to which the children are accustomed. This indicator tracks confirmed child abuse and neglect reports (substantiated allegations), the number of children entering foster care, and the percentage of children maintaining their family connections while in foster care.

## How is San Bernardino County Doing?

Child abuse and neglect reports for San Bernardino County continue to increase:

- In 2017, San Bernardino County had 10.0 substantiated child abuse and neglect allegations per 1,000 children, the highest rate among neighboring counties compared.
- For children from birth through age five, the rate of substantiated allegations is 14.6 per 1,000 children, compared with California's rate of 11.0 per 1,000 children.
- Between 2016 and 2017, there was an 11% rise in the number of substantiated child abuse and neglect allegations, from 5,230 to 5,789 reports, respectively.

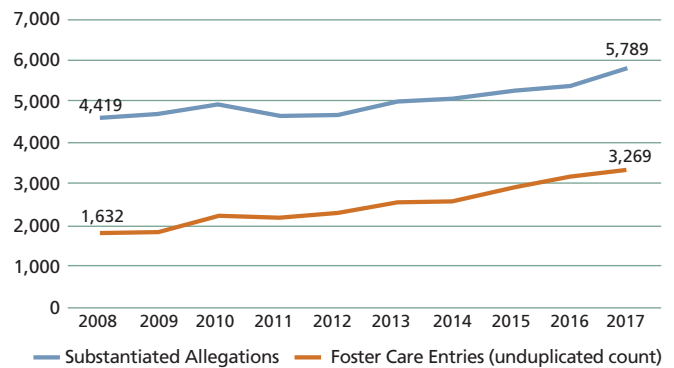
There was also an increase in the number of children entering the foster care system from 2016:

- In 2017, there were 3,269 children entering foster care, up 7% from 2016 when 3,068 children entered foster care.
- When looking at the relationship between substantiated allegations and foster care placement, 56% of substantiated allegations in San Bernardino County resulted in foster care placement, a much higher proportion than the state and all counties compared.
- San Bernardino County's rate of children entering foster care (5.6 per 1,000 children) is greater than the statewide average of 3.1 per 1,000 children and all other counties compared.
- The rate of foster care entry is higher for children from birth through age five (9.2 per 1,000 children). California's rate for children birth through age five entering foster care is 5.0 per 1,000 children.

The number of children placed with relatives has dropped:

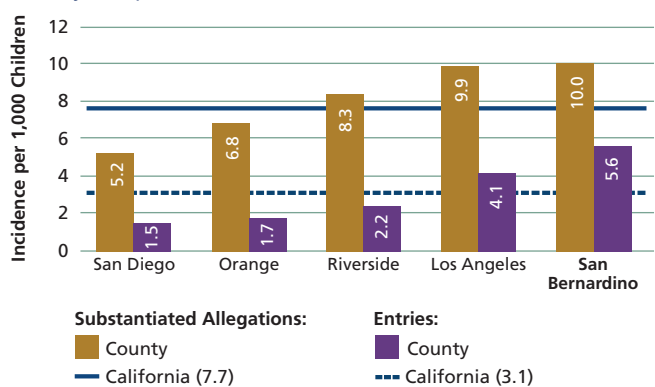
- According to a point-in-time count on January 1, 2018, 32.0% of the children in foster care were placed with relatives, compared with 36.6% in 2018.
- San Bernardino County has the lowest rate of placement with relatives among all neighboring counties compared, except Riverside County (29.8%).
- In San Bernardino County, 70.8% of the children in foster care were placed with some or all of their siblings and 45.7% of the children were placed with all siblings (compared with the state placement rates of 70.6% and 49.1%, respectively). San Bernardino County's placement with siblings ranks lowest among neighboring counties, except San Diego (69.0% and 51.8%, respectively).

**Substantiated Allegations and Foster Care Entries**  
San Bernardino County, 2008-2017



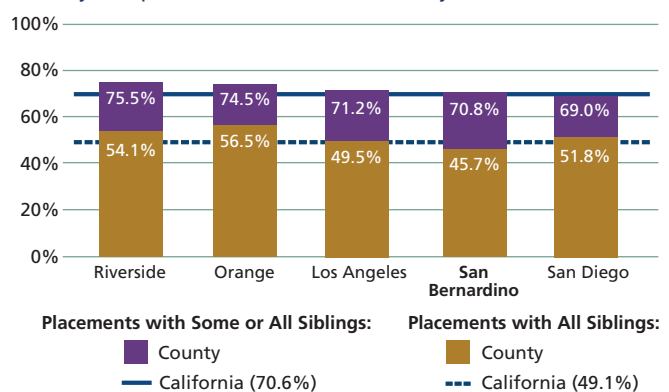
Source: University of California Berkeley, Center for Social Services Research, Child Welfare Research Center ([http://cssr.berkeley.edu/ucb\\_cbildwelfare/default.aspx](http://cssr.berkeley.edu/ucb_cbildwelfare/default.aspx))

**Substantiated Allegations and Foster Care Entries**  
County Comparison, 2017



Source: University of California Berkeley, Center for Social Services Research, Child Welfare Research Center ([http://cssr.berkeley.edu/ucb\\_cbildwelfare/default.aspx](http://cssr.berkeley.edu/ucb_cbildwelfare/default.aspx))

**Foster Youth Placed with Some or All Siblings**  
County Comparison and California, January 2018



Source: University of California Berkeley, Center for Social Services Research, Child Welfare Research Center ([http://cssr.berkeley.edu/ucb\\_cbildwelfare/default.aspx](http://cssr.berkeley.edu/ucb_cbildwelfare/default.aspx))

## More Students are Overweight or Obese

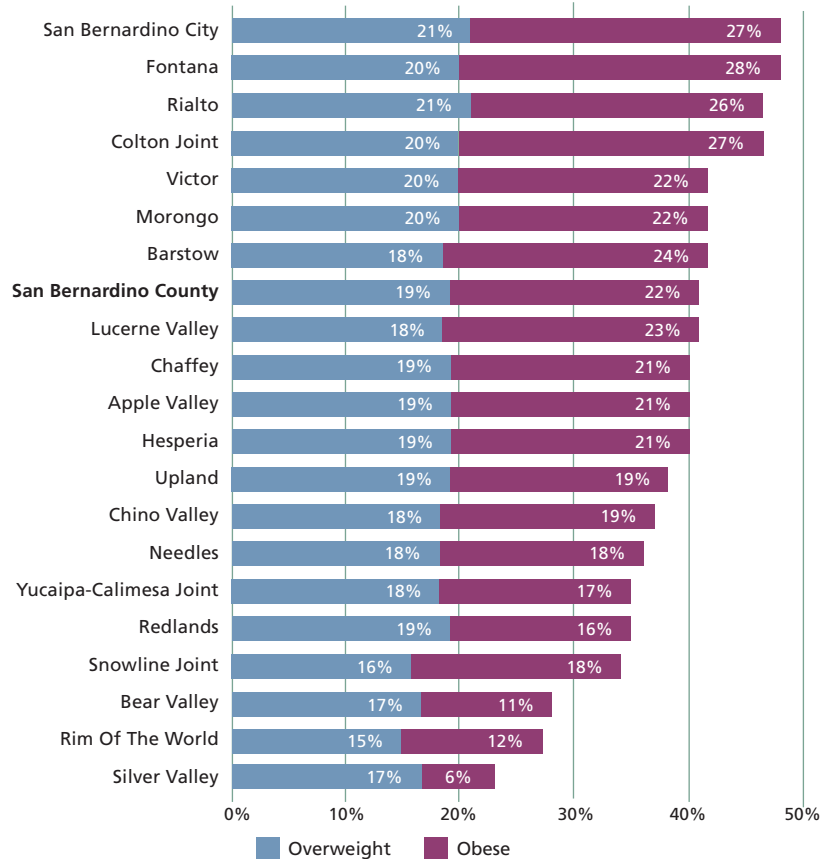
Overweight children are more likely to become overweight or obese adults. A sedentary lifestyle and being overweight are among the primary risk factors for many health problems and premature death. Maintaining a healthy body weight may have positive impacts on physical and mental health, as well as reduce health care costs. This indicator measures the proportion of students in fifth, seventh and ninth grades with an unhealthy body composition (overweight or obese) using the California Department of Education (CDE) Physical Fitness Test. It also measures the weight status of adults.

### How is San Bernardino County Doing?

Approximately two out of five students in San Bernardino County schools are considered overweight or obese:

- In 2017, an average of 41.4% of San Bernardino County students in the grades tested were overweight or obese (had an unhealthy body composition), compared to 38.9% statewide.
- This is an increase from 2016 when 40.1% of students in San Bernardino County were overweight or obese.
- Of the San Bernardino County students with an unhealthy body composition in 2017, 22.0% were considered to be far outside the healthy range (“Needs Improvement – Health Risk” or obese), while the remaining 19.4% were designated as “Needs Improvement” (overweight).
- San Bernardino City school district had the highest proportion of overweight students (48.2%).
- Silver Valley World school district had the lowest proportion of overweight students (22.5%).

Percentage of Students Overweight or Obese by School District  
San Bernardino County, 2017

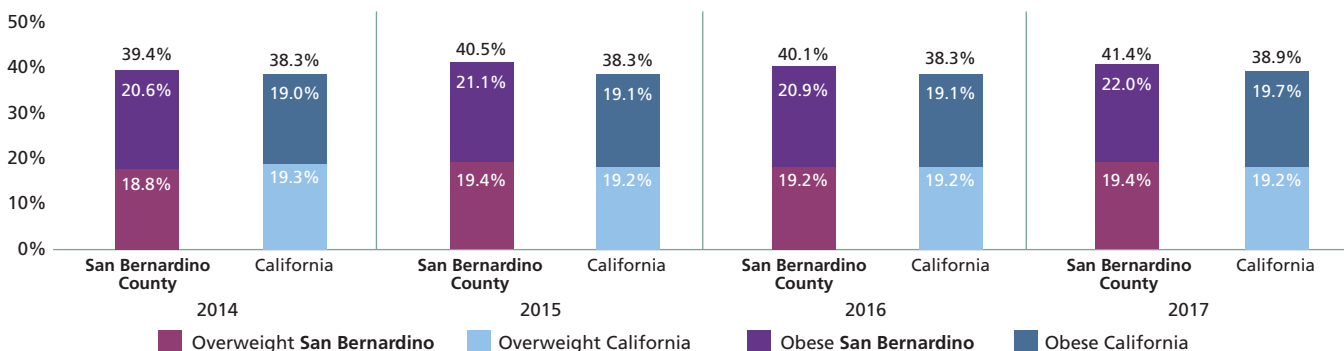


Due to unstable data (fewer than 50 students tested), Baker Valley school district is not included in the chart above.

Note: Chaffey and Victor represent combined data of the high school districts and their feeder school districts. Chaffey includes Chaffey Joint Union High School District and the elementary districts of Alta Loma, Central, Cucamonga, Eriwanda, Mountain View, Mt. Baldy, and Ontario-Montclair. Victor includes Victor Valley Union High School District and the elementary schools Victor, Adelanto, Oro Grande and Helendale.

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

Percentage of Children Overweight and Obese  
San Bernardino County and California, 2014 - 2017



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



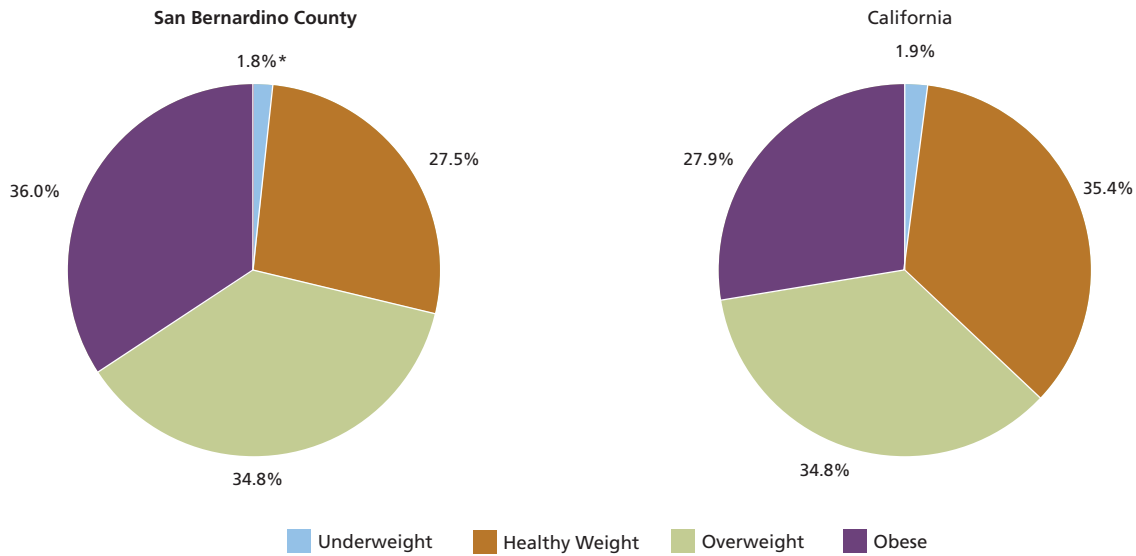
## OVERWEIGHT AND OBESITY (Continued)

Seventy-one percent of San Bernardino County adults are overweight or obese:

- In 2016, 34.8% of San Bernardino County adults were considered overweight and 36.0% obese; 27.5% had a healthy body weight.
- In comparison, 35.4% of adults in California had a healthy body weight.

### Weight Status of Adults

San Bernardino County and California, 2016



\* Data considered unstable and should be interpreted with caution.

Source: University of California, Los Angeles, Center for Health Policy Research, California Health Interview Survey ([www.chis.ucla.edu](http://www.chis.ucla.edu))



# County has Higher Rates of Chronic Diseases

Chronic diseases – including diabetes, high blood pressure, and heart disease – are costly yet largely preventable. Chronic illnesses contribute to approximately 70% of deaths in the United States each year and account for about 75% of the nation’s health-related costs.<sup>1</sup> This indicator reports prevalence and death data for heart disease, diabetes, and high blood pressure/stroke. Also tracked are hospitalizations due to heart disease.

## How is San Bernardino County Doing?

Between 2015 and 2016, both heart disease prevalence and deaths increased:

- In 2016, San Bernardino County’s death rate due to heart disease was 185.7 age-adjusted deaths per 100,000 residents. This marks a decrease of 22% since 2007 but a one-year increase of 2%.
- There has been an increase in the percentage of county residents who were diagnosed with heart disease – from 6.5% in 2007 to 8.2% in 2016.<sup>2</sup>
- In 2016, San Bernardino County’s prevalence rate for heart disease was the highest among neighboring counties and the state.

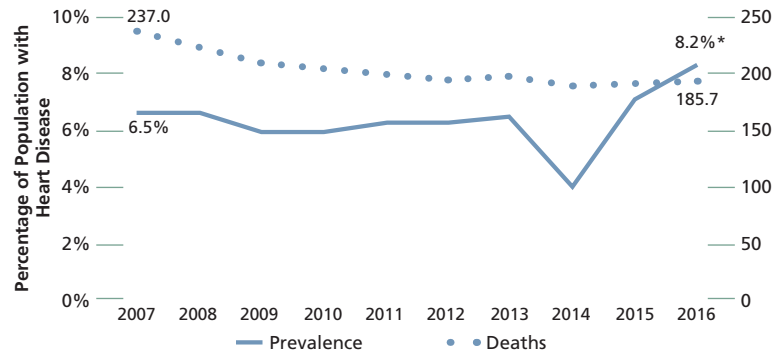
Diabetes prevalence and deaths are on the rise:

- In 2016, 11.4% of adults in San Bernardino County had been diagnosed with diabetes, higher than all counties compared and California.
- This marks an increase from 2015, when diabetes prevalence was 10.2%.
- The long-term trend is also up, with an increase of more than two percentage points since 2007, when 9.2% of adults in the county had a diabetes diagnosis.
- At 33.2 age-adjusted deaths per 100,000 residents in 2016, San Bernardino County had the state’s third highest rate of deaths due to diabetes, behind only Imperial and Kern counties, respectively.
- Deaths due to diabetes increased slightly from 32.9 in 2015 to 33.2 in 2016. The longer-term trend is also upward, increasing 8% since 2007.

Between 2015 and 2016, high blood pressure prevalence and deaths due to stroke increased:

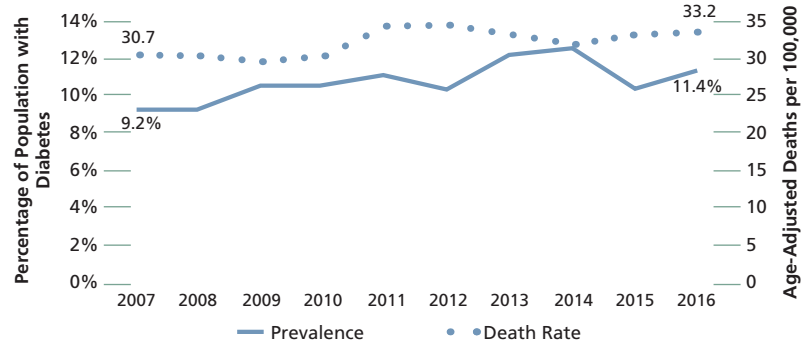
- In 2016, 31.1% of adults in San Bernardino County had high blood pressure, higher than all counties compared and California.
- This marks an increase of more than half a percentage point since 2015, when 30.5% of adults had high blood pressure.
- Of adults diagnosed with high blood pressure, 56% are taking medications to control it.
- Deaths due to strokes, which are associated with high blood pressure, have decreased 14% since 2007.<sup>3</sup>

**Heart Disease: Percentage Ever Diagnosed and Death Rates**  
San Bernardino County, 2007-2016



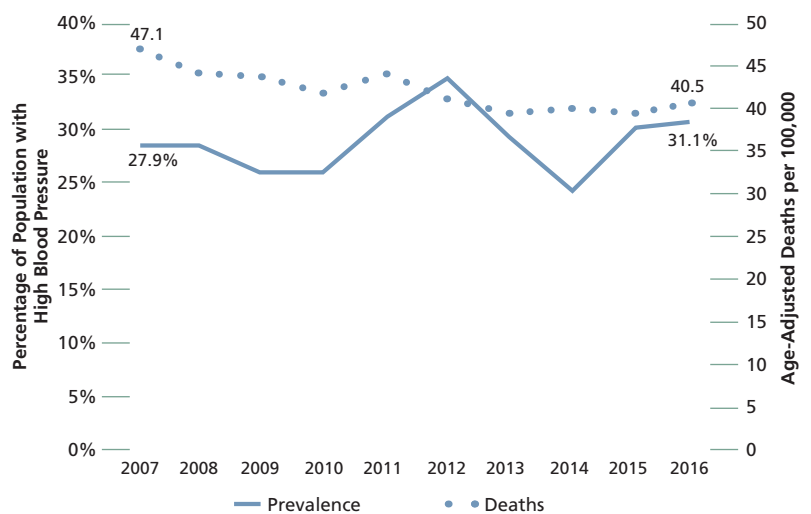
\* Data considered unstable and should be interpreted with caution.  
Sources: California Health Interview Survey, Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2016 on CDC WONDER Online Database (<http://wonder.cdc.gov/>)

**Diabetes: Percentage Ever Diagnosed and Death Rates**  
San Bernardino County, 2007-2016



Sources: California Health Interview Survey, California Department of Public Health, County Health Status Profiles ([www.cdph.ca.gov/programs/ohir/Pages/CHSP.aspx](http://www.cdph.ca.gov/programs/ohir/Pages/CHSP.aspx))

**High Blood Pressure: Percentage Ever Diagnosed and Death Rates due to Stroke**  
San Bernardino County, 2007-2016



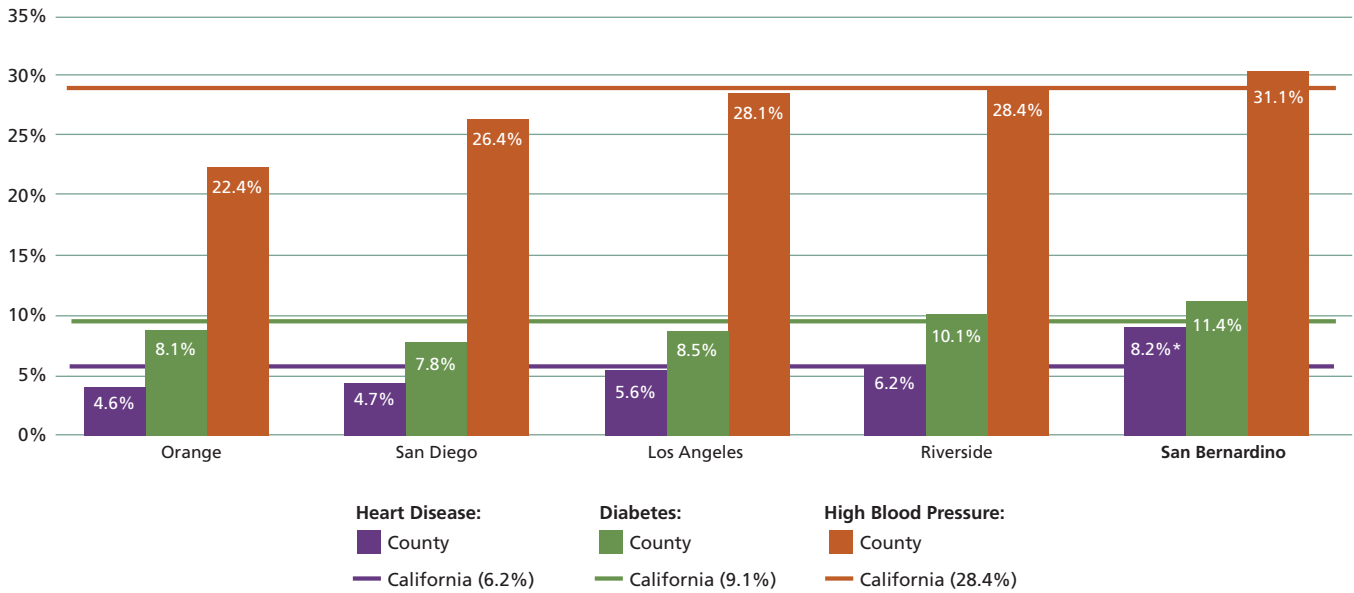
Sources: California Health Interview Survey, California Department of Public Health, County Health Status Profiles (<https://www.cdph.ca.gov/Programs/CHSL/Pages/County-Health-Status-Profi.aspx>)

<sup>1</sup> Centers for Disease Control and Prevention ([www.cdc.gov/chronicdisease/overview/index.htm](http://www.cdc.gov/chronicdisease/overview/index.htm))

<sup>2</sup> Prevalence of San Bernardino County residents who have been diagnosed with a heart disease is considered unstable for 2016. Thus, caution should be taken when interpreting the data.

<sup>3</sup> Fully 70% of strokes can be directly linked to existing high blood pressure, making high blood pressure the single most important controllable stroke risk factor.

**Percentage Ever Diagnosed with Diabetes, High Blood Pressure, or Heart Disease**  
County Comparison, 2016



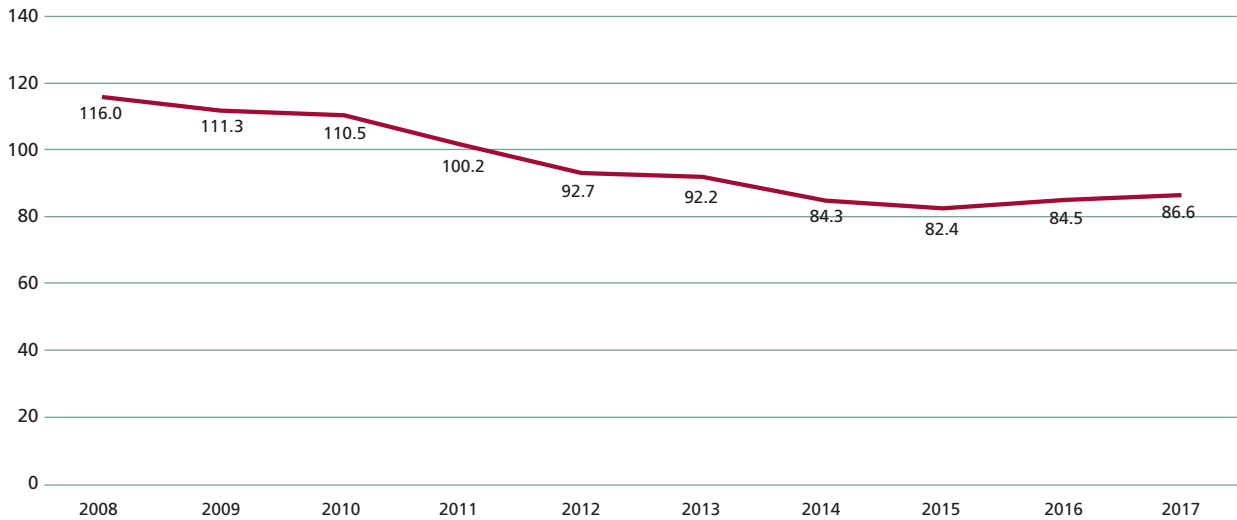
\* Data considered unstable and should be interpreted with caution.

Source: California Health Interview Survey

**Hospitalizations due to Coronary Heart Disease**

In 2017, the hospitalization rate for heart disease in San Bernardino County was 86.6 per 10,000 residents (age-adjusted). This is significantly higher than the California hospitalization rate of 69.5 per 10,000 residents.

**Heart Disease Hospitalizations (Age-Adjusted Rate per 10,000)**  
San Bernardino County, 2008-2017



Source: California Office of Statewide Health Planning and Development, American Community Survey 1-Year Estimates (2008-2017)

Note: This report presents longitudinal data for hospitalizations using 2008-2017 Census (ACS) population estimates. The San Bernardino County Community Transformation Plan also presents data related to heart disease hospitalizations. Because that plan presents a one-year snapshot for 2012, using 2010 Census population, the rates are not directly comparable.

## Fewer Clients Served by Public Mental Health System

Mental disorders are among the most common causes of disability. According to the National Institute of Mental Health, nearly one in five adults live with a mental illness (44.7 million in 2016) and an estimated one in 25 adults have a serious mental illness (10.4 million) that substantially interferes with major life activities. These statistics are even higher for adolescents, where half of teens have had a mental disorder in their lifetimes and one in five have had a severe impairment. Suicide is the 2nd leading cause of death in the United States for adolescents and young adults up to age 34, and the 10th leading cause overall, accounting for 45,000 deaths nationwide in 2016. This indicator measures the number of poverty-level residents estimated to be in need of mental health services and the number of clients served by publicly-funded county mental health programs. It also measures suicide rates by age.

### How is San Bernardino County Doing?

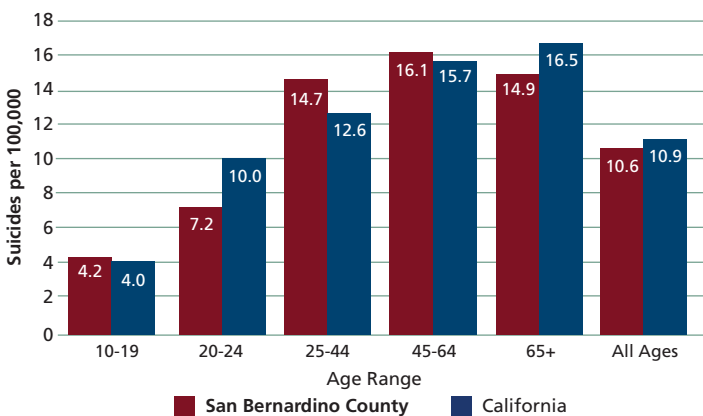
The gap between the need for mental health care and the number receiving treatment grew in 2016/17:

- After several years of steadily increasing numbers of clients served, the number of clients receiving public mental health services fell in 2016/17.
- There were approximately 21,000 low-income residents in need of mental health services in 2016/17 who did not get care. This gap between need and receipt of services is on par with the average over the past 10 years.
- Over the past five years, mental health care for children ages 0-5 has witnessed the largest increase, growing 145% in five years, followed by seniors ages 65+, growing 22%.
- Overall, more than a third (37%) of clients served in 2016/17 were aged birth through 17 years, including 3,405 children ages 0 to 5 (7% of all clients) and 8,733 adolescents (19% of all clients).
- Of the clients served during 2016/17, 40% were Latino/a, 32% were White, 17% were African American, 2% were Asian/Pacific Islander, 1% was Native American, and 8% were some other race or ethnic group, or unreported.

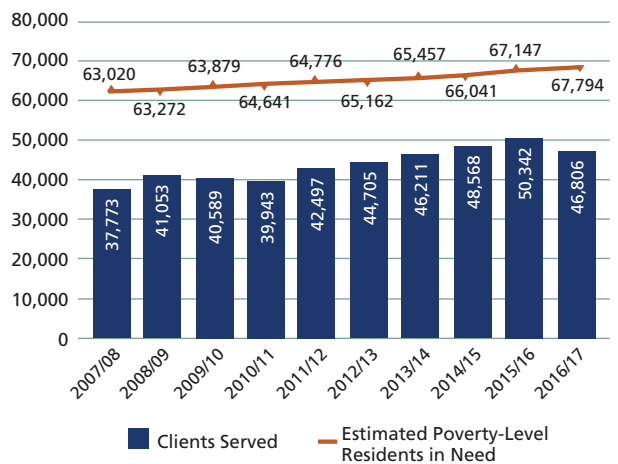
While suicide deaths fluctuate annually, general trends can be observed:

- The absolute number of suicide deaths in San Bernardino County increased in the 10-year period between 2007 and 2016, but the rate remained relatively flat due to population increases over the same period.
- Overall in 2016, San Bernardino County had a slightly lower rate of suicides per 100,000 residents than the statewide average.
- Residents between 45 and 64 years of age had the highest rate of suicide.
- Firearms, the most common cause, were used in 48% of San Bernardino County suicide deaths.

**Suicide Rate**  
San Bernardino County and California, 2016



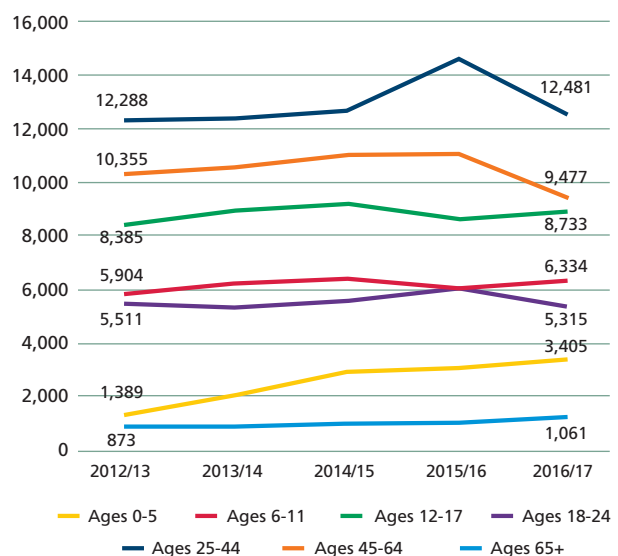
**Unduplicated Count of Clients Served by the Public Mental Health System and the Estimated Number of Poverty-Level Residents in Need of Mental Health Services**  
San Bernardino County, 2008-2017



Note: Residents in need is estimated based on 2007 California Department of Mental Health figures.

Sources: County of San Bernardino, Department of Behavioral Health, Client Services Information System; California Department of Mental Health, Persons in Need Tables

**Unduplicated Count of Clients Served by the Public Mental Health System by Age**  
San Bernardino County, 2013-2017



Source: County of San Bernardino, Department of Behavioral Health, Client Services Information System

<sup>1</sup>National Institute of Mental Health ([www.nimh.nih.gov/health/statistics/index.shtml](http://www.nimh.nih.gov/health/statistics/index.shtml))

# Treatment Admissions and Substance-Related Deaths Grow

A broad spectrum of public health and safety problems are directly linked to the disease of substance use disorder, including addiction, traffic accidents, domestic violence, crime, unintended pregnancy, and serious conditions such as cancer, liver disease, HIV/AIDS, and birth defects. Youth who engage in drinking and substance use early are more likely develop alcohol dependence later in life and are more likely to experience changes in brain development that may have life-long effects, including problems with memory and normal growth and development.<sup>1</sup> This indicator presents a variety of commonly-used indicators to help gauge the extent of substance use disorder (SUD) in San Bernardino County. These include trends in SUD-related admissions to County treatment facilities, serious (injury or fatal) alcohol-involved auto collisions, and SUD-related deaths.

## How is San Bernardino County Doing?

SUD-related treatment continues to grow:

- In 2016/17, SUD-related admissions to County treatment facilities rose 8% in one year, led by increases in admissions for alcohol addiction (+18%) and methamphetamine addiction (+10%).
- Over the past five years, overall admissions grew 40%, driven by admissions related to alcohol (+119%) and opiates (+102%).
- 22% of clients receiving SUD services also received County mental health services in 2016/17, while 48% have received mental health services in their lifetimes.<sup>2</sup>

There were fewer alcohol-involved accidents in 2017 than the previous year:

- Between 2016 and 2017, alcohol-involved collisions fell 5% compared to a 1% decrease statewide.
- In 2017, 11% of serious collisions in San Bernardino County involved alcohol, compared to 10% of collisions statewide.
- Over the past five years, alcohol-involved collisions rose from 47 collisions per 100,000 San Bernardino County residents in 2013 to 53 collisions per 100,000 residents in 2017.
- In 2017, alcohol-involved collisions claimed 90 lives in San Bernardino County.

Drug-induced and alcohol-related deaths increased:

- Since the 10-year low in 2012 of 9.2 drug-induced deaths per 100,000 residents, drug-induced deaths in San Bernardino County increased steadily to a 2016 rate of 11.3 deaths per 100,000. Despite the rise, the county's 2016 rate is better than the statewide rate of 12.2 per 100,000.
- Deaths caused by chronic liver disease and cirrhosis, which are often associated with substance use disorder, increased, from 13.0 per 100,000 in 2007 to 15.5 per 100,000 in 2016. The county has more chronic liver disease and cirrhosis deaths than the statewide average (12.2 per 100,000 in 2016).<sup>3</sup>

### The Mental Health/Substance Abuse Connection

Mental health and substance use disorder are often interconnected. More than 8.9 million people nationally are reported to have co-occurring mental health and substance use disorders. When treated concurrently, treatments are found to be more effective. Treating the whole person improves wellbeing by leading to reductions in addiction relapse, reemergence of psychiatric symptoms, and utilization of crises intervention services.

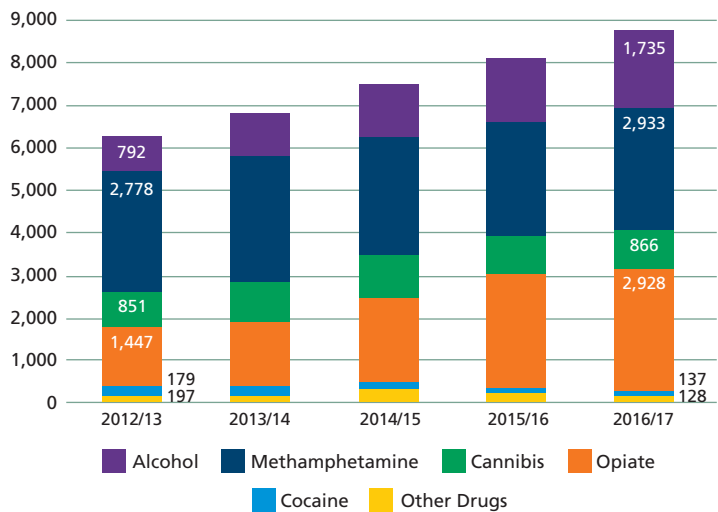
Source: County of San Bernardino, Department of Behavioral Health

<sup>1</sup> Centers for Disease Control and Prevention ([www.cdc.gov/alcohol/fact-sheets/underage-drinking.htm](http://www.cdc.gov/alcohol/fact-sheets/underage-drinking.htm))

<sup>2</sup> San Bernardino County CalOMS dataset

<sup>3</sup> California Department of Public Health, County Health Status Profiles ([www.cdph.ca.gov/Programs/CHSI/Pages/County-Health-Status-Profiles.aspx](http://www.cdph.ca.gov/Programs/CHSI/Pages/County-Health-Status-Profiles.aspx))

Substance Use Disorder-Related Admissions to County-Funded Treatment Services, San Bernardino County, 2013-2017



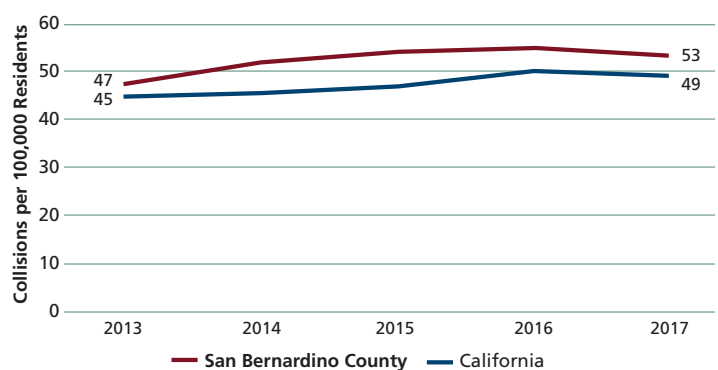
Source: County of San Bernardino, Department of Behavioral Health, CalOMS Dataset

**Inland Empire Opioid Crisis Coalition**

The San Bernardino County Department of Behavioral Health is an active participant in the Inland Empire Opioid Crisis Coalition. The coalition has enlisted a law and justice champion to better connect with law enforcement, including launching a pilot program with a local police department to train officers to attend to opioid overdoses. In partnership with the Inland Empire Health Plan and Riverside and San Bernardino counties, the coalition developed an opioid awareness video, which has had over 200,000 views thanks to widespread release on social media: <https://goo.gl/1cK4HE>.

Source: County of San Bernardino, Department of Behavioral Health

Alcohol-Involved Serious Collisions per 100,000 Residents San Bernardino County and California, 2013-2017



Sources: California Highway Patrol (<http://iswitr.chp.ca.gov/Reports/jsp/OTSReports.jsp>); California Department of Finance, Table E-2

# Veteran Requests for Assistance Increase

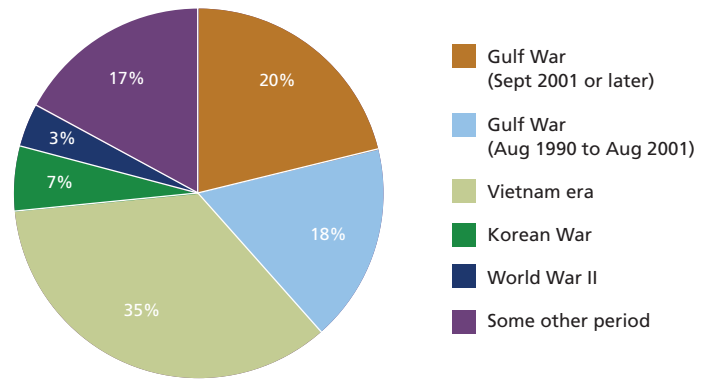
Veterans from all eras reside in San Bernardino County, with needs ranging from aging and adult services to children’s services, and from transitional assistance to public health. Strengthening support networks for soldiers and their families may reduce the long-term individual and societal impacts of war. Financial benefits obtained for veterans results in local spending, job creation, and tax revenue. This indicator provides information about veterans in San Bernardino County, including demographic trends, economic and educational outcomes, counts of requests for assistance from County Veterans Affairs, benefits received per veteran, and information on veterans experiencing homelessness.

## How is San Bernardino County Doing?

Similar to trends nationwide, the number of veterans living in San Bernardino County is declining:

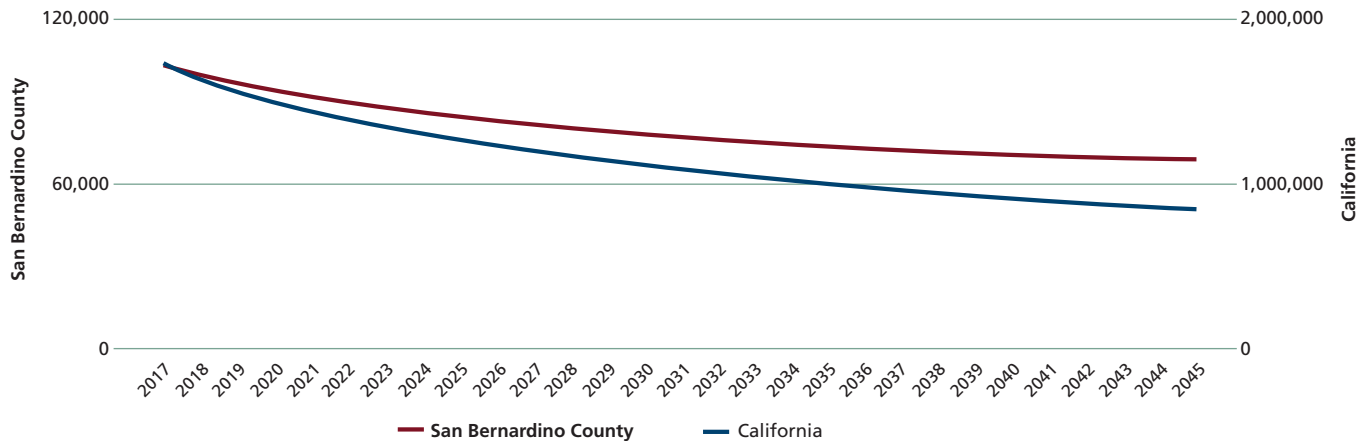
- In 2017, approximately 4.6% of San Bernardino County’s population was comprised of veterans.
- Between 2017 and 2045, the veteran population in San Bernardino County is projected to decline 33%, from an estimated 100,000 to 67,000. This is a slower decline than statewide, which anticipates a 49% decline.
- Most San Bernardino County veterans are Gulf War vets (38%), followed by Vietnam era vets (35%).
- Women comprise 9% of the total veteran population in San Bernardino County.<sup>1</sup>

Period of Service for San Bernardino County Veterans, 2017



Source: U.S. Census Bureau, American Community Survey, 1-Year Estimates, 2017, Table S2101

## Projected Change in the Veteran Population San Bernardino County and California, 2017-2045



Source: National Center for Veterans Analysis and Statistics, VetPop2016 County-Level Veteran Population by State, 2015-2045 (www.va.gov/vetdata/Veteran\_Population.asp)

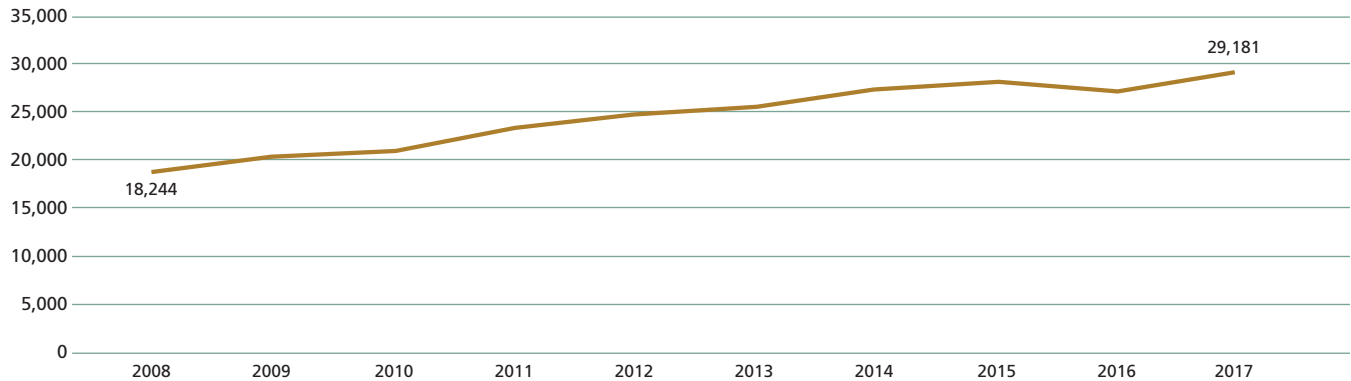
<sup>1</sup> National Center for Veterans Analysis and Statistics, VetPop2016 County-Level Veteran Population by State, 2016; California Department of Finance, Population Estimates, Table E-2, July 2016

## VETERANS (Continued)

While the overall veteran population is decreasing, the number of veterans returning home from active duty is increasing, driving increases in requests for assistance:

- Since 2008, annual requests for assistance increased 60%, to 29,181 in 2017.
- Requests for assistance include compensation for service-related injuries, pension for wartime veterans, education expenses, health care coverage, and survivor benefits.
- The average new award for state and federal benefits obtained for the veteran by San Bernardino County veterans service officers was \$9,901 per veteran in 2016/17, which is similar to the statewide average of \$10,076.<sup>2</sup>

### Requests for Assistance to the County Department of Veterans Affairs San Bernardino County, 2008-2017



Source: San Bernardino County Department of Veterans Affairs

Veterans typically fare better on most economic and educational measures:

- San Bernardino County veterans have higher income, lower unemployment, higher educational attainment, and a lower poverty rate compared to non-veterans.
- However, more veterans have a disability (32%) compared to the non-veteran population (14%).

Data from the Homeless Management Information System (HMIS) reveal the following results for homeless veterans in San Bernardino County:

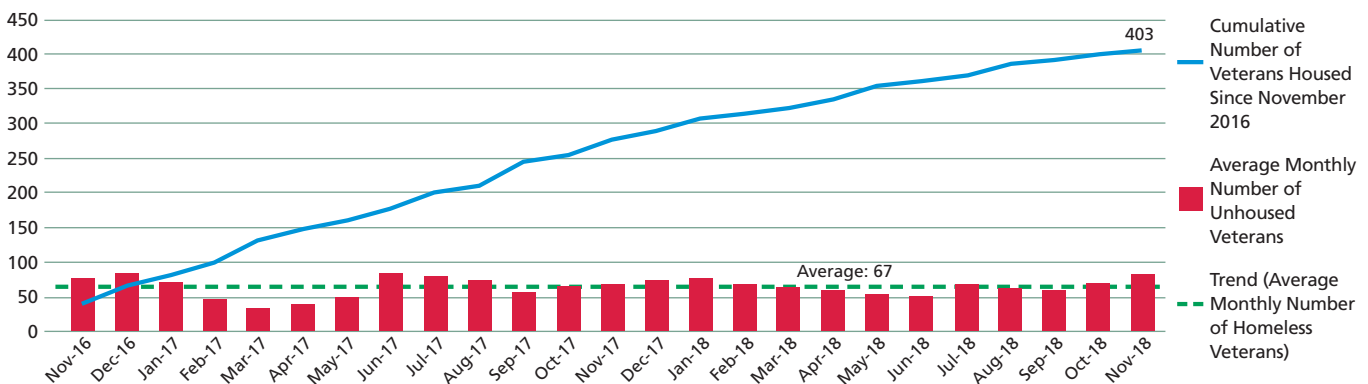
- In the two-year period between November 2016 and November 2018, a total of 403 veterans were housed.
- Over this same period, the number of homeless veterans fluctuated from a low of 34 in March 2017 to a high of 88 in June of 2017; the two-year average was 67.
- The count contracts and expands as homeless veterans are housed and new homeless veterans are identified. Consequently, over this period, the trend in the number of homeless veterans has remained steady.

### Selected Characteristics of Veterans Compared to Non-Veterans Ages 18 and Older San Bernardino County, 2017

	Veterans	Non-Veterans
Median Income	\$39,332	\$25,235
Living in Poverty	8%	14%
Unemployment Rate	5.4%	8.1%
High School Diploma or Higher	94%	79%
Bachelor's Degree or Higher	24%	20%
With a Disability	32%	14%

Source: U.S. Census Bureau, American Community Survey, 1-Year Estimates, 2017, Table S2101

### Average Monthly Number of Homeless Veterans and Cumulative Number of Veterans Housed San Bernardino County, November 2016-November 2018



Source: County of San Bernardino, Homeless Management Information System

<sup>2</sup> California Association of Veterans Service Officers, Annual Report and Directory, 2018