

# 2008 Community Assessment

*Health & Quality of Life in San Mateo County*



## EXECUTIVE SUMMARY

Sponsored by  
**The Healthy Community Collaborative  
of San Mateo County**

March 2008

We are pleased to deliver the fifth Community Needs Assessment of the San Mateo County community. This needs assessment identifies opportunities and challenges for government agencies, community organizations, and health care providers to modify policy to improve the health and quality of life in San Mateo County. It is our hope that the report will be used to help guide the efforts of the many excellent and effective programs and services currently provided in our community, as well as inspire new programs that focus on the most critical health care needs of our diverse population. The needs assessment could not have been completed without the tremendous input and many hours of dedication from our members.

The assessment affirms that San Mateo County compares favorably to our state and the nation on many health and quality of life measures. For the majority of San Mateo County residents, our community is viewed as a wonderful place to live, work, raise a family, and lead a healthy life.

However, the report shows that there are certain segments of the population in San Mateo County that do not experience good health and a high quality of life. It also shows that some less than optimal health and quality of life issues are more prevalent here than in other parts of the state and country. We hope that from this needs assessment, the community can build on its strengths and focus its ongoing efforts on the key health problems experienced by people living here.

One recurring theme of the report is that economic status has a significant effect on many health and quality of life indicators. Individuals with lower incomes report more difficulty accessing community assets and greater obstacles to fulfilling basic needs. Additionally, we found that even those with adequate means do not have adequate environmental and social support to take advantage of simple lifestyle activities that would promote health, reduce chronic disease, and prolong life.

While many of the health issues presented here are complex and interrelated and require changes in public policy, the environment, and the healthcare system, there are many things individuals can do to be healthier. We strongly encourage every resident to take at least these five steps toward a healthier future:

- 1) Eat at least five servings of fruits and vegetables per day.
- 2) Exercise at least 20-30 minutes on most days of the week.
- 3) Don't smoke.
- 4) Maintain a proper weight.
- 5) If you drink alcohol, drink in moderation, no more than 1-2 drinks per day.

A copy of the executive summary and the complete report with detailed statistical findings and analysis is available at various public and health libraries. It can also be downloaded on the Internet at:

**<http://www.plsinfo.org/healthysmc>**

The complete assessment report has a wealth of information and we encourage you to review it.

Sincerely,

*The Healthy Community Collaborative of San Mateo County*

# ACKNOWLEDGEMENTS

As noted previously, this assessment process was a collaborative effort on the part of many organizational leaders throughout the county, and we wish to acknowledge their contributions to promoting the health and well-being of San Mateo County. The following organizations and their representatives comprise the Healthy Community Collaborative of San Mateo County:

- ☐ Carole Groom, Co-Chair, *Vice President, Community Relations*  
**Mills-Peninsula Health Services**
- ☐ Scott Morrow, MD, MPH, Co-Chair, *Health Officer*  
**San Mateo County Health Department**
- ☐ Ellen Dunn-Malhorta, *Director, Planning & Evaluation Services*  
**Health Plan of San Mateo**
- ☐ Francine Serafin-Dickson, *Executive Director*  
**Hospital Consortium of San Mateo County**
- ☐ Pamela Smith Martin, *Regional Vice President*  
**Hospital Council of Northern & Central California**
- ☐ Stacey Wagner, *Director, San Mateo Area Public Affairs*  
**Kaiser Permanente, San Mateo Area**
- ☐ Stephan Wahl, *Community Health & Benefit Manager*  
**Kaiser Permanente, San Mateo Area**
- ☐ Candace Roney, *Executive Director, Community Partnerships*  
**Lucile Packard Children's Hospital**
- ☐ Laura Bent, *Executive Director*  
**Peninsula Family YMCA**
- ☐ Pat Michelin, *Program Manager*  
**Peninsula Library System Community Information Program**
- ☐ Srija Srinivasan, *Director of Health Policy & Planning*  
**San Mateo County Health Department**
- ☐ James Miller, *Management Analyst, Family Health Services*  
**San Mateo County Health Department**
- ☐ Dave Hook, *Director, Community Relations & Marketing*  
**San Mateo Medical Center**
- ☐ Jan Norton, *Manager, Community Outreach*  
**Seton Medical Center**
- ☐ Cheryl Sinclair, *Manager, Community Outreach & Business Development*  
**Seton Medical Center Coastside**
- ☐ Marie Violet, *Manager, Health & Wellness Services*  
**Sequoia Hospital**
- ☐ Frank Lalle, *Program Officer*  
**Silicon Valley Community Foundation**
- ☐ Andy Coe, *Chief Government & Community Relations Officer*  
**Stanford Hospitals & Clinics**
- ☐ Anne Hipskind, *Project Coordinator, Community Outreach*  
**Youth & Family Enrichment Services**

# INTRODUCTION

## SCOPE OF THIS ASSESSMENT

### About the Assessment Effort

The Healthy Community Collaborative of San Mateo County is a group of San Mateo County organizations interested in the community's health. As in 1995, 1998, 2001 and 2004, the Collaborative has come together once again to conduct a community needs assessment of San Mateo County as a follow-up to these earlier studies. Note that, for the purposes of this assessment, "community health" is not limited to traditional health measures. This definition includes indicators relating to the quality of life (e.g., affordable housing, child care, education and employment), environmental and social factors that influence health, as well as the physical health of the county's residents. This reflects the Collaborative's view that community health is affected by many factors and cannot be adequately understood without consideration of trends outside the realm of health care.

The **2008 Community Assessment: Health & Quality of Life in San Mateo County** is designed to serve as a tool for guiding policy and planning efforts, and the information provided here should be used to formulate strategies to improve our quality of life. For participating not-for-profit hospitals, this assessment will also serve to assist in developing Community Benefit Plans pursuant to Legislative Bill 697. In conducting this assessment, the goals of the Healthy Community Collaborative are twofold:

- ❑ To produce a functional, comprehensive community needs assessment that can be used for strategic planning of community programs and as a guideline for policy and advocacy efforts; and
- ❑ To promote collaborative efforts in the community and develop collaborative projects based on the data, community input, and group consensus.

As with prior community assessment efforts, it is anticipated that we will be able to identify not only what problems need to be addressed, but also the strengths of San Mateo County. This assessment draws on data housed in the county and builds on previous research conducted to this end.

### About This Summary

This report brings together a wide array of community health and quality of life indicators in San Mateo County gathered from both primary and secondary data sources. As with previous assessments, this project was conducted by Professional Research Consultants, Inc. (PRC) on behalf of the Healthy Community Collaborative of San Mateo County.

This summary, as well as the full report, are available at various public and health libraries. These can also be downloaded on the Internet at <http://www.plsinfo.org/healthysmc>. If you have questions about this report, please contact Dr. Scott Morrow at (650) 573-2519.

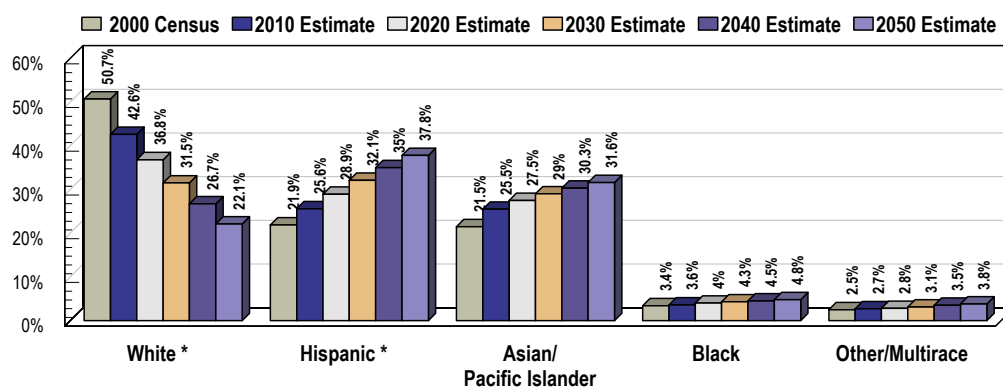
# EXECUTIVE SUMMARY

## Community Description

**KEY FINDING:** San Mateo County is among the most culturally and ethnically diverse counties. Asian and Hispanic residents, along with seniors, are expected to continue to become increasingly greater proportions of the population. We are not adequately prepared for this enormous demographic shift.

- In California, San Mateo County is one of the highest cost counties to live in, with a household median income of \$85,500. The demographics of its citizenry are racially/ethnically diverse including Caucasian, Hispanic, African-American, Asian, Pacific Islander, and other ethnicities. 711,031 residents live within 531 square miles along a peninsula with 54 miles of ocean coastline. It is a mix of urban and suburban regions, with a coastside community, most of which is accessible by public transportation (with the exception of certain regional isolated areas).
- The San Mateo County population is growing modestly, but becoming much more diverse racially and ethnically. It is also becoming increasingly older. Still, the percentage change in the San Mateo County population due to natural increase (more births than deaths) is the highest in the state. The percentage change due to foreign immigration, 2000 to 2004, is the second highest. The county also experienced domestic migration out of the county, mitigating the overall population increase.

### Race/Ethnicity, San Mateo County



Source: P3 Population Projections by Race / Ethnicity, Gender and Age for California and Its Counties 2000–2050. State Department of Finance. July 2007.

Note: \* Hispanics may be of any race, and might be represented in race categories as well (e.g., White). In other words, these race/ethnicity groupings are not mutually exclusive.

**KEY FINDING:** There are two San Mateo Counties: one for the economic “haves” and one for the economic “have nots.” The gap between these two is growing.

- Economically, San Mateo County thrived in the late 1990s during the technology boom in California and the rapid rise in visitor and business travel through San Francisco International Airport. However, after the dotcom bust of 2000, the county experienced significant job loss. For low-income individuals and families, the overall economy does not translate to improved economic security. In order to subsist, low-income residents

sometimes work two or three jobs, working longer hours with fewer benefits. They live paycheck to paycheck, leaving them vulnerable to transportation emergencies, medical crises, and insecure housing circumstances. Low-income individuals and families live on the verge of instability.

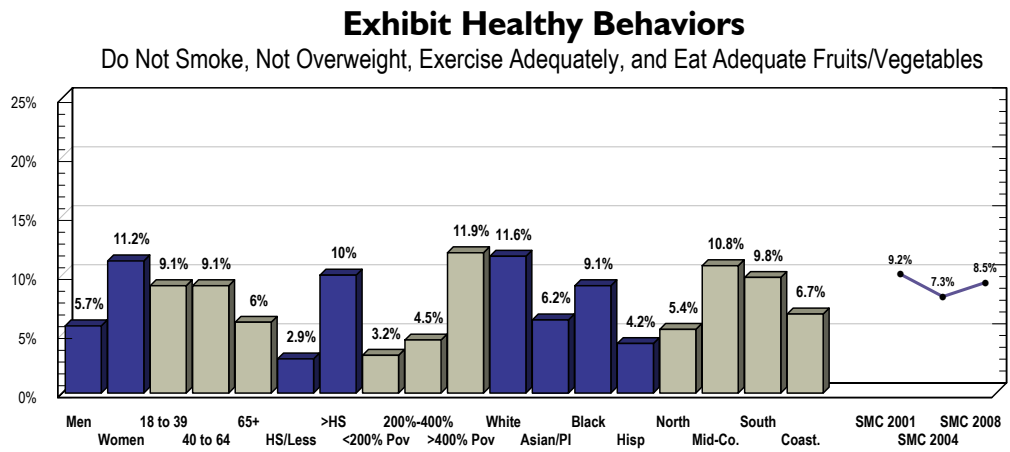
## Health in San Mateo County

### HEALTHY BEHAVIORS

**KEY FINDING:** The actual causes of premature death are rooted in behavior, and it is estimated that as many as 50% of premature deaths are due to health risk behaviors such as tobacco use, poor diet, a lack of exercise, alcohol use, etc. Despite this, the vast majority of our community do not exhibit the most basic healthy behaviors.

**KEY FINDING:** Individual health behaviors are deeply influenced by public policy and place (i.e., neighborhood conditions) to a far greater degree than we recognize. The health of San Mateo County can be improved through a greater focus by all organizations on public policy changes and place-based strategies.

- Fewer than one in 10 San Mateo County adults exhibit multiple general healthy behaviors typically associated with the prevention of chronic disease.
  - Men, seniors, persons with lower education levels, those with lower incomes, and Asian and Hispanic respondents demonstrate the lowest proportions with all of these healthy behaviors. North County residents report the lowest prevalence among the four county regions.

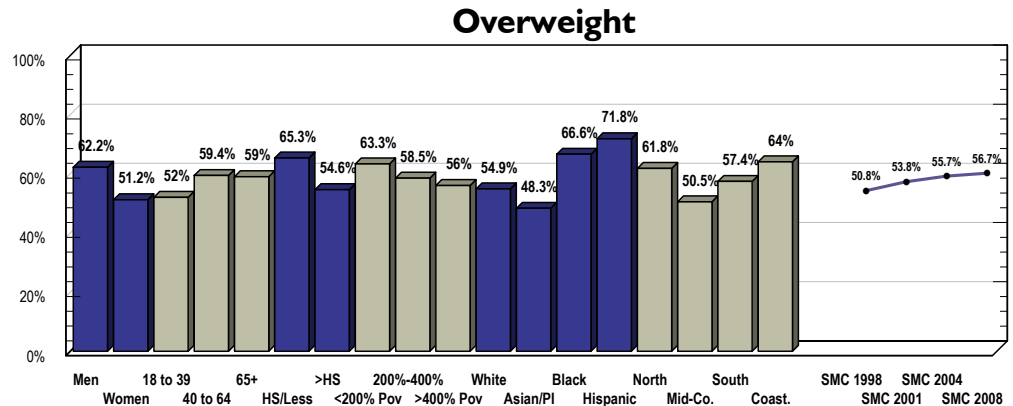


Source: 2001/2004/2008 San Mateo County Health/Quality of Life Surveys. Healthy Community Collaborative of San Mateo County. August 2001/2004/2007. (Professional Research Consultants).

Note: Includes respondents satisfying ALL of the following criteria: do not smoke cigarettes; is not overweight based on body mass index; exercises at least three times per week for at least 20 minutes; eats five or more servings per day of fruits and/or vegetables.

- Currently, a majority of San Mateo County adults are overweight. While overweight prevalence remains below the national average, it has increased significantly in the county over the past decade.
  - Based on reported heights and weights, 56.7% of San Mateo County respondents are overweight. This represents a *statistically significant increase* in overweight prevalence when compared to the 50.8% found in 1998. Nationwide, however, an even higher proportion (66.1%) of adults are overweight.

- Most San Mateo County respondents (54.0%) do not participate in regular, vigorous physical activity, meaning they do not engage in activities that cause heavy sweating or large increases in breathing or heart rate at least three times a week for 20 or more minutes on each occasion. This finding is *significantly better* than the 64.1% found in 2001 but similar to 2004 findings. Still, the prevalence of inactivity in San Mateo County is notably higher among: persons aged 65 and older (67.5%); persons with a high school education or less (59.0%); those with annual household incomes <400% poverty (approximately 62%); and non-white respondents (approximately 58%).



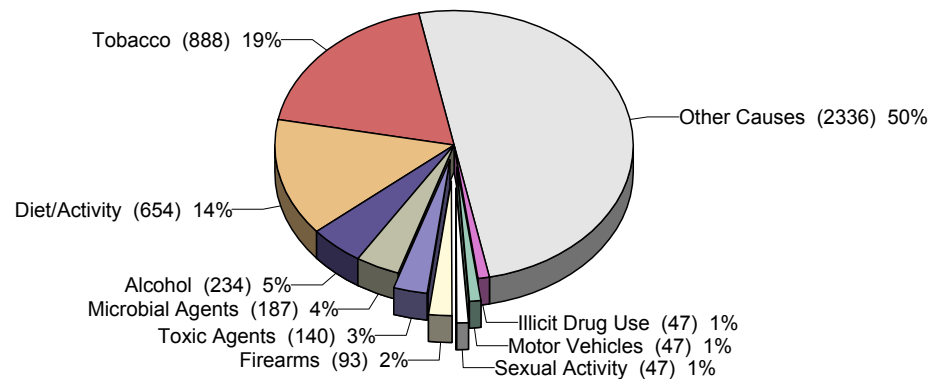
Source: 1998/2001/2004/2008 San Mateo County Health/Quality of Life Surveys. Healthy Community Collaborative of San Mateo County. August 1998/2001/2004/2007. (Professional Research Consultants).

- Notes:
1. Asked of all respondents.
  2. "Overweight" is defined as having a Body Mass Index (BMI, a ratio of height to weight) equal to or greater than 25.

- This year's survey found that TV/video watching or video gaming was greatest among 16- to 17-year-olds (35.5% of whom were reported to watch three or more hours of TV, videos or video games per day).
- The environment is shaped by public policy. It is estimated that as many as half of all premature deaths in the county are due to health risk behaviors such as poor diet a lack of exercise, tobacco use, alcohol use, etc. These risk behaviors are influenced by public policies that shape community and neighborhood environments. Family history and genetics are also strong and non-modifiable predictors of mortality.

### Actual Causes of Death in San Mateo County

(Estimated Number of 2002-2004 Annual Average Deaths Presented in Parentheses)



- Sources:
1. U.S. Department of Health and Human Services, as Presented in the Journal of American Medical Association (McGinnis & Foege, 1993).
  2. County Health Status Profiles 2006. California Department of Health Services and California Conference of Local Health Officers.

## HEALTHCARE SERVICES

**KEY FINDING:** Quality health care services in the county are, for the most part, not a problem. Access and affordability are a significant problem. The lack of a comprehensive healthcare “system” is a failing, unsustainable model.

**KEY FINDING:** More than one out of four San Mateo County adults believe access to mental health, substance abuse, and dental services in the county are “fair” or “poor.”

- Evaluations of the health care services received in the county appear to be improving, and most give favorable evaluations of the ease of accessing local health care (61.2% “excellent/very good,” 25.1% “good”). The majority of those living in San Mateo County consider their own health to be “excellent” or “very good.” However, it does appear that health status is declining somewhat as our population ages, with more reporting health that is only “good” or “fair,” and more residents reporting health-related activity limitations.
- Lower-income residents have poorer utilization of and access to health care, particularly dental care, but also physician care and other types of health care services. Most area residents have a physician to whom they go for medical services. Still, access to health care services remains a concern. In particular, mental health and substance abuse services are seen as increasingly difficult to access.
  - Among surveyed parents of children aged 1 to 17, 75.7% report that their child has visited a dentist for a routine checkup in the past year. This proportion is lower among Mid-County respondents (67.4%).
- This year, an estimated 67,000 non-elderly adults are without health insurance in San Mateo County, representing a significantly higher proportion of the adult population than reported in previous years. In addition to lack of insurance, appointment availability, lack of transportation, and cost of prescriptions are significant barriers for many San Mateo County residents.
- Among 2008 survey respondents who are employed for wages or who are self-employed, 23.7% report that their job does not offer health benefits to employees, *up significantly* from 19.8% in 2001, but similar to 1998 and 2004 findings. The lack of job-based health insurance has an uneven impact across the county:
  - Women, seniors, those with less than a high school education, and respondents living below the 200% poverty threshold much more often report that health benefits are not available to them through their employer.
  - Nearly one out of three Hispanic respondents (31.5%) report having jobs that do not offer health benefits.
  - Coastside residents more often report that health benefits are not available to them through their employer (36.1%).
- Access to healthcare for children is *significantly better* than 2001 findings (16.4% and 21.7% “fair/poor” ratings, respectively). Again, sharp differences are found between lower-income and higher-income adults with regard to perceived access to child health services.



- Over two-thirds of 2008 survey respondents have some type of insurance coverage that pays for some or all of their routine dental care. However, 31.7% do not (representing nearly 180,000 county adults). The dental uninsured prevalence has *increased significantly* since the 1998 survey.

**KEY FINDING:** The Internet is likely to replace physicians in the near future as the place where most people get most of their healthcare information.

- When asked where they get most of their health care information, 30.2% of survey respondents mentioned their **physician**, while 25.0% mentioned the **Internet**. Use of the Internet to obtain health-related information continues to grow dramatically in San Mateo County, although older adults and lower-income residents are less likely to have used this informational tool.

## MATERNAL & INFANT HEALTH

**KEY FINDING:** The proportion of births with adequate prenatal care has risen steadily among Black and Hispanic women, lessening the racial health disparities that have persisted in prenatal care.

- Regarding maternal and infant health in San Mateo County, mortality and prenatal care indicators are improving, especially among Blacks, lessening the racial disparity that has persisted. Still, while rates of early and adequate prenatal care show consistent improvement, Black women and Hispanic women have the highest proportions of births receiving less than adequate prenatal care, late or no prenatal care.

**KEY FINDING:** The rise in C-section rates is a disturbing trend.

- The proportion of births delivered by C-section has dramatically increased 43.8% since 1990, from 17.6% in 1990 to 25.3% in 2004.
- Also of concern is that the proportion of low-weight births has increased in the county over the past decade. San Mateo County has not seen the targeted improvement in the prevalence of low-birthweight and very low-birthweight births, and concern remains about the associated health and economic costs. It is important that we understand and continue to address this issue.
- Breastfeeding initiation rates are consistently good, particularly in comparison to California rates. Breastfeeding duration rates need to be improved.

## CHILD & ADOLESCENT HEALTH

- Childhood immunization is crucial in the prevention of many infectious diseases once considered commonplace. The Healthy People 2010 target is to increase the percentage of two-year-olds who are current on their immunizations to 90% or more. Currently, we can document eight in 10 San Mateo County children who are adequately covered and up-to-date at age 24 months; using other data analysis techniques, it is likely that we are very close to the 90% targeted coverage level. Vaccine coverage/immunization rates have consistently improved in our county compared to California and other regions in the state.

**KEY FINDING:** Our children are not doing much better than adults in exhibiting healthy behaviors. This will severely impact their future health.

- In addition to protecting children from disease, it is just as important to instill habits of healthy living early on. Still, more San Mateo County low-income children aged 5 through 19 are overweight or to be at risk for being overweight than seen among low-income children statewide. On a positive note, San Mateo County children appear to be spending less time watching television or playing video games than found in previous assessments. However, there remain significant disparities in the physical fitness standards results between races/ethnicities.
- Watching television, videos or video games is a leading sedentary behavior in youth. In the 2008 San Mateo County Health & Quality of Life Survey, 15.5% of parents report that their child watches less than one hour per day (*significantly higher* than found in 2004). In contrast, 22.1% report that he/she watches three hours or more per day. Overall usage appears to be *decreasing* in comparison with previous years, but remains far from optimal.
- In 2006, only 37.3% of San Mateo County 7<sup>th</sup> graders met basic fitness requirements, as determined by the California Department of Education, although this proportion is better than the statewide average. Six in 10 students do not meet the basic requirements. There is a notable difference among students by gender and by race/ethnicity, with boys and Black and Latino students demonstrating the lowest prevalence of physical fitness.

**KEY FINDING:** Adolescents engage in a variety of risky behaviors such as alcohol and drug use, tobacco use, violence, and sexual behavior. It is important to encourage in our children and adolescents those assets which will deter harmful behaviors and promote healthy development.

**KEY FINDING:** Key adolescent assets where additional effort should be placed are: 1) increasing the amount of sustained caring and supportive adult/youth relationships; and 2) increasing meaningful participation of youth in community activities.

- Only 5.9% of parents of children aged 11 to 17 state that, to the best of their knowledge, their child is currently sexually active. This differs greatly (by a factor of between five and 10) from responses from children aged 11 to 17 when asked if they, themselves, are sexually active.
- Adolescent pregnancies, a majority of which are among Hispanic females, continue to decline in San Mateo County, and remain well below the statewide rate. The disparity between prenatal care among pregnant teens and older pregnant women has narrowed due to a favorable increase in proper prenatal care among adolescent mothers. Still, working to reduce teen pregnancies remains important because, not only are adolescents at greater risk for poor birth outcomes, but teen pregnancy is also a leading contributor to the cycle of poverty in young families.
- The California Healthy Kids Survey (CHKS) was designed to measure the 41 developmental assets as defined by the Search Institute and Project Cornerstone. These are a set of “building blocks” that help shape adolescents into “healthy, caring and responsible” adults. Analysis of CHKS results correlates various risk behaviors with having a low, moderate or high number of these developmental assets. In other words, students reporting a “moderate” or “high” level of external assets are much less likely to take part in risky behaviors.

- In the 2003-04 survey, San Mateo County 7<sup>th</sup> graders more often score a “high” level of both external and internal assets than found among students statewide. However, asset levels among 9<sup>th</sup> and 11<sup>th</sup> graders are similar to, or even slightly below, California averages.
- In the 2008 San Mateo County Health & Quality of Life Survey, only 3.6% of parents reported that they were aware of the 40 Developmental Assets for Youth Initiative (similar to 3.9% reported in 2004). Awareness this year was higher among Black (7.8%) and Hispanic (6.0%) parents.

## SENIOR HEALTH

**KEY FINDING:** The proportion of adults aged 60 and older is expected to roughly double over the next four decades, and Hispanics and Asians are projected to increase their representation considerably in the older population. As the fastest-growing population segment, the health and social needs of older adults require increasing attention.

- ☐ Currently, more than one out of three area seniors lives alone, and nearly one out of five lives below the 200% poverty threshold. Further, seniors in San Mateo County report much higher prevalence of debilitating chronic conditions, such as arthritis, diabetes, heart disease, high cholesterol, high blood pressure, and chronic lung disease. Rates of diabetes, asthma and chronic lung disease are increasing among the senior population, and this is something which needs to be explored further.
- ☐ In recent years, there seems to be an improvement in pneumonia vaccine coverage among seniors in San Mateo County.

**KEY FINDING:** Falls are a key issue leading to hospitalization, loss of independence, and death among seniors. More resources should be directed toward this preventable condition.

- ☐ 77.6% of deaths due to unintentional falls occurred among people aged 65 years and older.

## MORTALITY

**KEY FINDING:** Looking at mortality rates, we are healthier now than any time in the past. However, there are storm clouds on the horizon and, unless things change, our children will lead shorter lives than ours.

- ☐ Area death rates are declining for many of the leading causes of death in San Mateo County and many remain below rates for the State of California. Many are also approaching the Healthy People 2010 targets. Despite this, there remain large disparities in death rates by race/ethnicity.
- ☐ Years of potential life lost (YPLL) is an important indicator for the aggregate impact of early deaths on population dynamics and productivity. It is a measure, by death category, of the number years of life cut short, relative to the average life expectancy of the population (75 years was used for this report). The total number of YPLL for all causes in San Mateo County has declined from 43,674 in 1990 to 31,191 in 2004.

## CANCER

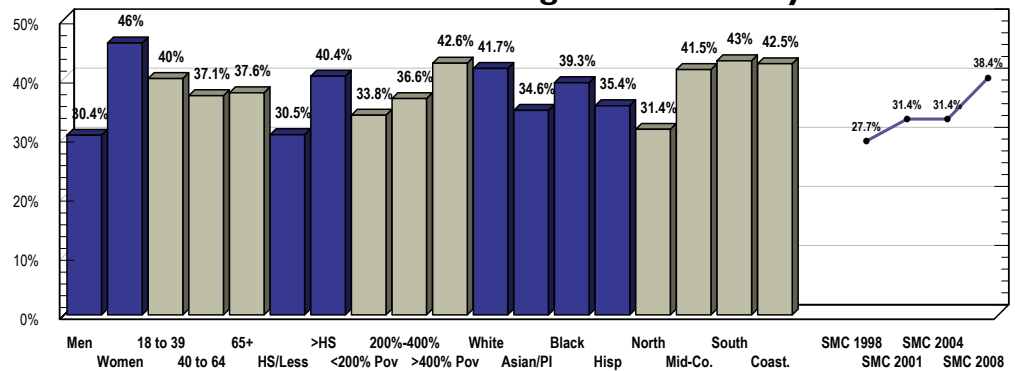
**KEY FINDING:** Cancers are a leading cause of death in San Mateo County. Area incidence and mortality rates vary dramatically by race/ethnicity.

- Overall cancer mortality rates in San Mateo County declined slightly from 1990-1994 to 2000-2004. The mortality rates in San Mateo County remain higher than the Healthy People 2010 target of 159.9, but they are anticipated to reach the target by 2010.
- Lung cancer is by far the leading cause of cancer death, followed by colorectal cancer, female breast cancer and prostate cancer.
  - The overall incidence rate of lung cancer for 1999-2003 was 53.7 and the rate in males was significantly higher than in females; however, incidence rates have declined more dramatically in males in recent years.
  - The Healthy People 2010 target for female breast cancer mortality is 22.3 deaths. From 2000-2004, the average county mortality rate due to female breast cancer was 23.8. Overall, the mortality rate declined by 25.6% from 32.0 in 1990-1994 to 23.8 in 2000-2004. The highest average rates (2000-2004) were in White females and Black females; conversely, the lowest average rates were among Hispanic and Asian females. San Mateo County is likely to reach the Healthy People 2010 objective by 2010.
  - In San Mateo County, the mortality rate due to prostate cancer in males has declined in the previous decade, mainly due to a recent decline (13.0% from 28.4 in 1998-2002 to 24.7 in 2000-2004). In San Mateo County from 2000-2004, the average overall mortality rate (24.7) meets the Healthy People 2010 target of 28.8 deaths. Black males have consistently had the highest prostate cancer mortality rates in comparison with males of other race/ethnicities in San Mateo County. From 2000-2004 the average Black mortality rate was 71.5, more than twice the rate of White, Asian, and Hispanic males in San Mateo County, as well as the Healthy People 2010 target.
  - Overall colorectal cancer mortality rates declined significantly from 22.4 in 1990-1994 to 16.9 in 2000-2004, a trend also observed nationally. Asians and Hispanics had the lowest colorectal cancer mortality rates, and Blacks and Whites had the highest rates. Only the colorectal cancer mortality rates for Hispanics satisfy the Healthy People 2010 objective (13.9).
- In terms of risk-reduction, one in ten San Mateo County respondents is classified as a “current” smoker, similar to 2004 and 2001 findings, but significantly below levels recorded in the initial 1998 assessment.
- Costs of tobacco use:
  - Average retail price of a pack of cigarettes in California (taxes included): \$4.34
  - California state cigarette and sales taxes per pack: \$1.16
  - Smoking attributable medical costs in California per pack of cigarettes sold: \$15.10

**KEY FINDING:** Few residents consume adequate amounts of fruits/vegetables, however, this appears to be slowly improving. Access to fresh fruits and vegetables is still an issue in some areas.

- Survey respondents report eating an average of 4.19 servings of fruits (2.12 servings) and vegetables (2.07 servings) per day, well below the recommended five daily servings. Only 38.4% eat the recommended level, though this is much higher than previous findings. Men, persons with a high school education or less, Asians, Hispanics, and North County residents report among the lowest fruit/vegetable consumption.

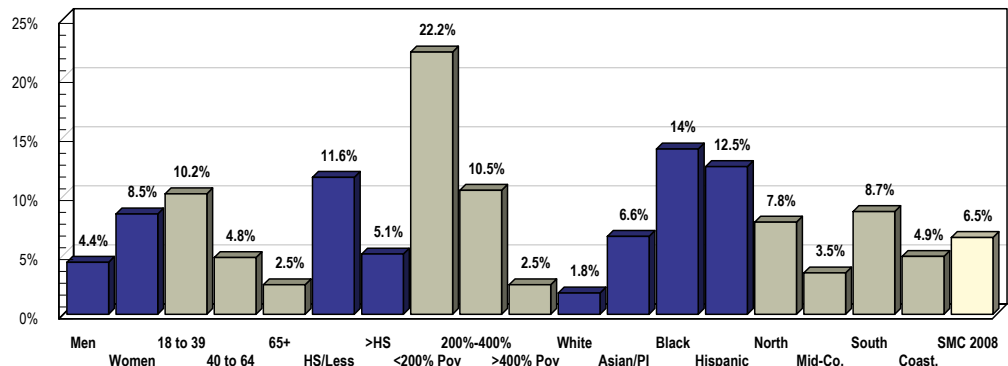
### Eat Five or More Servings of Fruits and/or Vegetables Per Day



Source: 1998/2001/2004/2008 San Mateo County Health/Quality of Life Surveys. Healthy Community Collaborative of San Mateo County. August 1998/2001/2004/2007. (Professional Research Consultants).  
 Note: Asked of all respondents.

- Overall, 77.0% of San Mateo County survey respondents rate the ease of accessing affordable fresh fruits and vegetables as “excellent” or “very good.” Another 16.5% rate it as “good.” In contrast, 6.5% of respondents believe that access to affordable fresh fruits and vegetables is “fair” or “poor.” Higher “fair/poor” evaluations are noted among women, young adults, persons with a high school education or less, those living below the 200% poverty threshold, Blacks, Hispanic respondents, and residents living in the North County and South County regions.

### Access to Affordable Fresh Fruits and Vegetables Is "Fair/Poor"



Source: 2008 San Mateo County Health/Quality of Life Surveys. Healthy Community Collaborative of San Mateo County. August 2007. (Professional Research Consultants).  
 Note: Percentages represent combined “fair” or “poor” responses.

## HEART DISEASE & STROKE

**KEY FINDING:** Heart disease and stroke death rates continue to decline, while reported prevalence of high blood pressure and high blood cholesterol continues to rise.

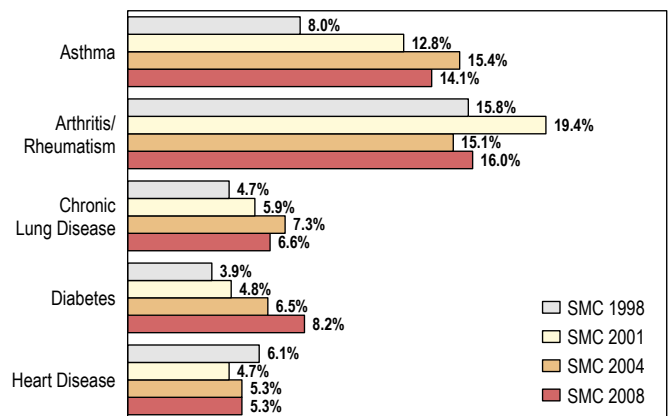
- Although it is a leading cause of death in San Mateo County, the death rate due to coronary heart disease is well below the statewide rate and satisfies the Healthy People 2010 objective.
  - The 2000-2004 San Mateo County rate for all heart disease (172.2, including coronary heart disease and other disease of the heart) approaches the Healthy People 2010 goal of 166.0 and will likely meet the objective by 2010. Because heart disease accounts for 1 in 4 deaths in San Mateo County, it heavily influences the overall mortality rate. Thus, the heart disease mortality rates also decreased from 1990-1994 to 2000-2004, and the distribution by gender and racial/ethnic groups mirrored the overall mortality rate.
- In all, 85.3% of San Mateo County adults exhibit one or more risk factors for heart disease and stroke, marking an unfavorable increase in cardiovascular risk since the initial 1998 assessment.
  - A total of 28.5% of San Mateo County adults say they have been told more than once by a health care professional that they have high blood pressure. This prevalence is statistically similar to the national prevalence (27.1%), it has *increased significantly* in San Mateo County since the 1998 study and it remains approximately 78% above the Healthy People 2010 target ( $\leq 16\%$ ).
  - A total of 30.7% of San Mateo County adults report that a doctor or other health professional has diagnosed them with high blood cholesterol. This rate has *increased significantly* in the county since 1998 and is about 80.6% higher than the Healthy People 2010 target ( $17\leq\%$ ).

## CHRONIC DISEASE

**KEY FINDING:** Since 1998, there have been significant increases in the prevalence of asthma, chronic lung disease and diabetes among San Mateo County adults.

- There has been a *statistically significant trend in higher prevalence* of diabetes, asthma and chronic lung disease specifically among San Mateo County seniors since 1998.
- The 2008 San Mateo County Health & Quality of Life Survey revealed 8.2% of the adult population with diabetes

**Prevalence of Chronic Illness**



Source: 1998/2001/2004/2008 San Mateo County Health/Quality of Life Surveys. Healthy Community Collaborative of San Mateo County. August 1998/2001/2004/2007. (Professional Research Consultants).

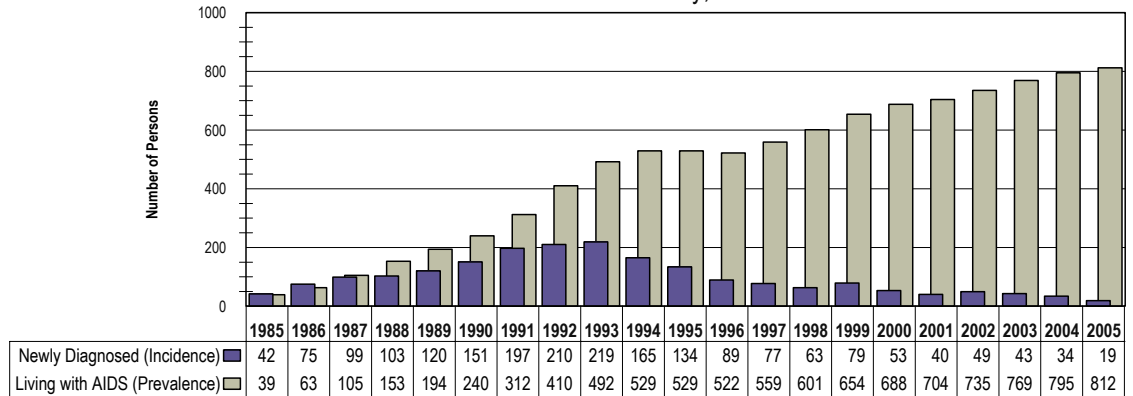
(excluding diabetes experienced only during pregnancy), representing approximately 46,500 San Mateo County adults. This percentage is comparable to the 2004 findings, but is *significantly higher* than the level reported in 1998 and 2001.

## COMMUNICABLE DISEASE

- The number of newly diagnosed AIDS cases peaked in 1993 and has declined steadily through 2005. The number of individuals living with AIDS has consistently increased over time. By the end of 2005, approximately 800 people in San Mateo County were living with AIDS. Note, this does not include those living with HIV that has not progressed to AIDS.

### Incidence and Prevalence of AIDS by Year

San Mateo County, 1985-2005



Source Data: San Mateo County Health Services Agency, Disease Control and Prevention Unit, HIV/AIDS Reporting System (HARS)

**KEY FINDING:** After decreasing for several years, we are beginning to see a disturbing rise in both gonorrhea and chlamydia.

- Chlamydia is the most frequently-reported infectious disease in San Mateo County and in the United States as a whole. San Mateo county rates of reported cases of gonorrhea and syphilis continue to fall, yet still do not satisfy Healthy People 2010 targets. There appear to be huge disparities in chlamydia infection by race and age. The biggest race difference is between Whites and Blacks. The most notable age disparity within a race was seen in the White female population; the incidence in 15-24 year olds (518.7) was over four times the incidence in 25 to 34 year olds (125.0).
- While county tuberculosis rates have declined in recent years, San Mateo County maintains the 13th highest tuberculosis incidence rate of the 58 California counties, and the local rate continues to be higher than the national rate. Most TB cases reported in San Mateo County occur among Asians and Pacific Islanders, most of whom are foreign-born.
- Vaccines continue to provide effective, long-lasting protection against communicable diseases. In San Mateo County, for the period between 1990 and 2006, the annual incidence of various vaccine-preventable diseases including Diphtheria, Haemophilus influenzae, Hepatitis A, Measles, Mumps, Poliomyelitis, Rubella and Tetanus has decreased or remained very low.
- Cases of pertussis have been generally on the rise and increased 550% from 6 cases in 1990 to 39 in 2006, with a high of 72 cases in 2005.

- In 2005, the most commonly reported enteric disease in San Mateo County was campylobacteriosis, followed by salmonella, then giardia and shigella. Between 1990 and 2005, rates for campylobacteriosis, salmonellosis, shigellosis, hepatitis A, and giardia decreased, while rates for E. coli O157:H7 remained stable.

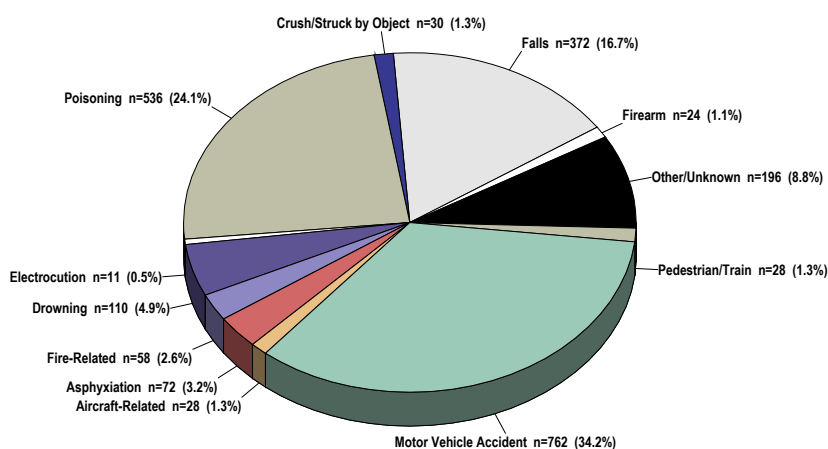
## INJURIES

**KEY FINDING:** Poisonings (including drug overdoses), firearms and motor vehicle accidents are the leading causes of injury deaths in San Mateo County.

- Firearms, motor vehicle crashes and poisonings (including drug overdoses) are the leading causes of injury deaths in San Mateo County (accounting for approximately 20% each). Unintentional injury death rates in San Mateo County decreased in recent years, but still fail to satisfy the Healthy People 2010 objective, and rates continue to be higher for males than for females.

### Major Causes of Deaths Due to Unintentional Injury

Cumulative Data, San Mateo County, 1990-2004

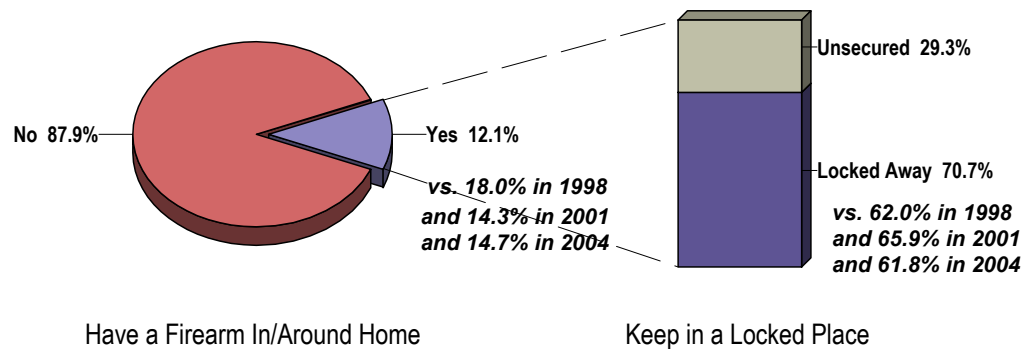


There were 2,227 total deaths due to unintentional injury from 1990-2004 (numbers have not been adjusted for comparability ratios)  
 Source Data: California Department of Health Services, Center for Health Statistics, Death Records 1990-2004

- In the 2008 San Mateo County Health & Quality of Life Survey, 12.1% of households report keeping a firearm in or around their home. This percentage is less than the 18.0% reported in 1998. Of those survey respondents keeping firearms, 70.7% say these are kept in locked places, such as locked drawers, cabinets or closets (statistically better than 1998 findings).



## Firearms in the Home



Source: 1998/2001/2004/2008 San Mateo County Health/Quality of Life Surveys. Healthy Community Collaborative of San Mateo County. August 1998/2001/2004/2007. (Professional Research Consultants).

- Area homicide and suicide rates continue to decline, but have yet to satisfy Healthy People 2010 objectives. The county homicide rate decreased 41.7% from 6.0 between 1990 to 1994 to 3.5 between 2000 to 2004. Interestingly, the homicide trend is inversely related to the economic growth curve for the 1990s, with homicide less likely during the economic boom. The rates among Whites and Asians reached the Healthy People 2010 target of 3.0 in 2000-2004. Rates were highest among Blacks; the Hispanic homicide rate was also consistently above the Healthy People 2010 goal in recent years. The homicide rate in Blacks is 15-18 times higher than in Whites.

## ADDICTIONS & SUBSTANCE USE

**KEY FINDING:** Substance use (alcohol, tobacco and other drugs) is one of the most serious threats to the health of our community. Substance use carries a significant social impact, contributing to such social conditions as homelessness, violence, poverty and disease. Youth substance use is a particular concern.

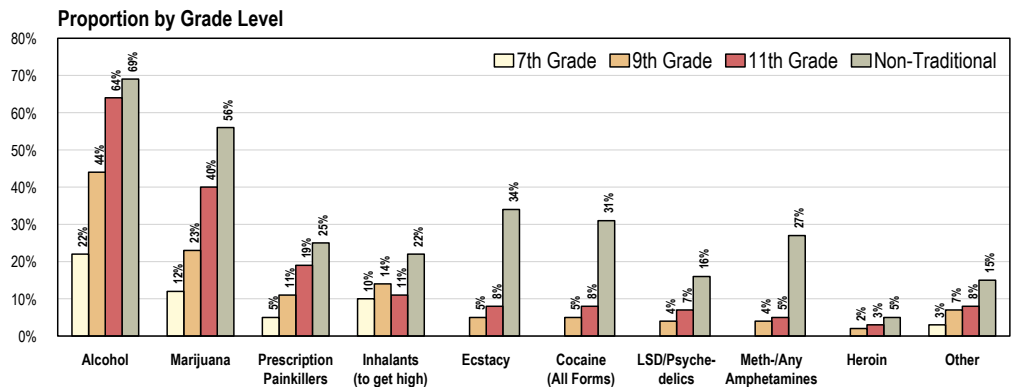
- Substance abuse and its related problems are among our society's most pervasive health and social concerns. Tobacco, alcohol and illicit drugs are serious contributing factors to numerous leading causes of death, disease and disability including: cancer, motor vehicle crashes, maternal and infant complications and many more. Substance abuse has a huge local economic impact of over \$500 million per year. Substance abuse also carries a significant social impact, contributing to such social ills as homelessness, violence and poverty.
- A total of 14.7% of San Mateo County adults are "binge" drinkers, meaning that there has been at least one occasion in the month preceding the interview on which they consumed five or more alcoholic drinks. This is similar to findings from previous years. Binge drinking in San Mateo County is highest among men (25.4%) and young adults (20.9% among those aged 18 to 39), and particularly young men aged 18 to 24 (44.8%). Persons living above the 400% poverty threshold (17.8%) also show increased incidence of binge drinking.

**KEY FINDING:** Binge drinking among young adults, especially males aged 18 to 24, has increased significantly over the last several years.

- Substance abuse – which crosses geographic, age and racial/ethnic lines – is often initiated in adolescence, with a majority of San Mateo County 11<sup>th</sup> graders having tried alcohol and marijuana.
- Overall drug use among adolescents in 7<sup>th</sup>, 9<sup>th</sup> and 11<sup>th</sup> grader followed showed a positive correlation with age for many of the drugs asked about in the 2004 to 2006 San Mateo County Healthy Kids Survey, including alcohol, marijuana, prescription painkillers, ecstasy, cocaine, LSD, amphetamines, and heroin. Note that 64% of 11<sup>th</sup> grade students have tried alcohol, and 40% have tried marijuana.

### Adolescent Lifetime Use of Illegal Drugs by Grade Level

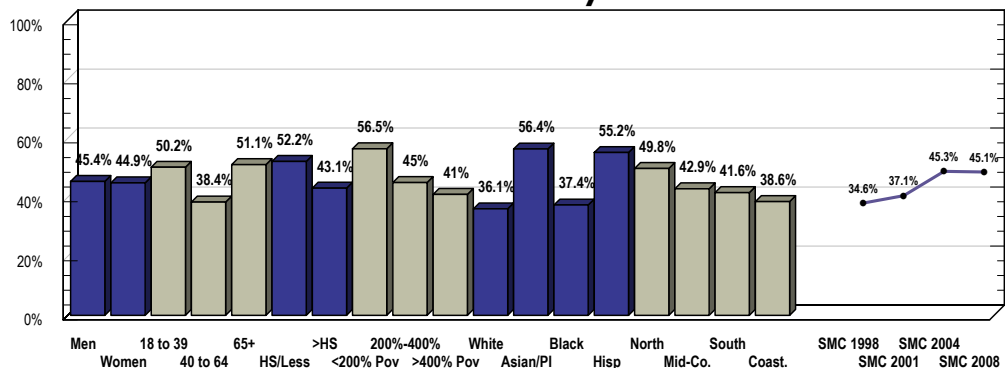
San Mateo County, 2004-2006



Source: 2004-2006 San Mateo County Healthy Kids Survey.

- Nearly one-half of San Mateo County adults say they would not know where to access treatment for a drug-related problem for themselves or a family member if needed. This proportion has *increased significantly* in comparison to the 1998 and 2001 surveys. Furthermore, this uncertainty is notably higher among younger and older adults, adults without a college education, lower-income adults, Asians/Pacific Islanders and Hispanics, and residents of the North County area

### Would Not Know Where to Access Treatment for Drug-Related Problems for Self or Family Member if Needed



Source: 1998/2001/2004/2008 San Mateo County Behavioral Risk Factor Surveys. Healthy Community Collaborative of San Mateo County. August 1998/2001/2004/2007. (Professional Research Consultants).  
 Note: Asked of all respondents.

## MENTAL HEALTH

**KEY FINDING:** Depression, isolation and loneliness are prevalent in San Mateo County. Mental health services to deal with depression are inadequate, as are the variety of community structures needed to deal with loneliness and isolation.

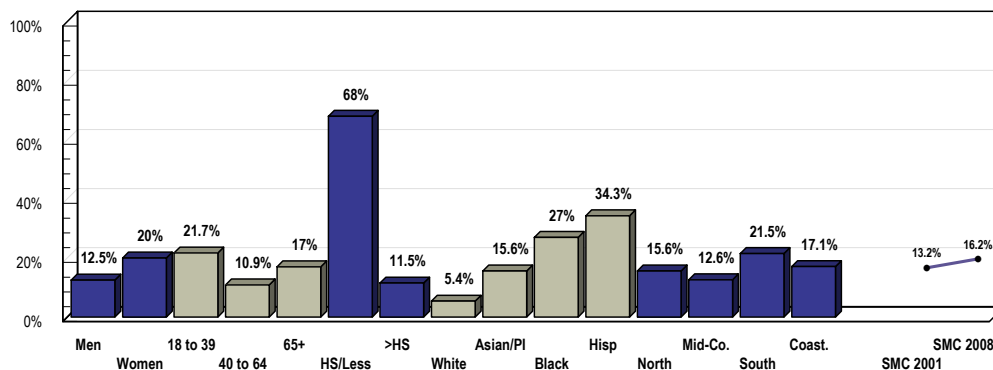
- ☐ Mental health is indispensable to personal well-being, family and interpersonal relationships, and contribution to community or society. In San Mateo County, 6.2% of area residents report a history of mental or emotional problems, while one in four experience bouts of chronic depression (this proportion is lower than found in the baseline 1998 assessment).
- ☐ A total of 25.2% of surveyed adults reported having had a period lasting two years or longer during which he or she was sad or depressed on most days. This proportion is significantly *higher* than found in 1998 and 2004, but is similar to the 2001 finding.
- ☐ A total of 6.1% of survey respondents report experiencing high stress on a daily basis, with these perceptions higher among Blacks. In addition, roughly 25% of adults experience some degree of difficulty with feelings of isolation or loneliness. Similarly, one out of four experiences some degree of difficulty with fear, anxiety or panic.

## FAMILY ISSUES

**KEY FINDING:** While San Mateo County excels by most conventional measures, there are subgroups within the population who do not share the wealth. The prosperity of recent years has led to an extremely high cost of living that significantly impacts low- and middle-income families.

- Despite high average incomes and education levels, many San Mateo County families face significant challenges. The cost of living continues to be community members' top concern for their families. While many families are financially secure and thriving, there are a considerable number who struggle simply to make ends meet. It is estimated that the total number of people "touched" by hunger in San Mateo County exceeds 160,000 (or about 22%). A racial/ethnic and economic divide also remains within the county, with minorities and lesser-educated individuals bearing the brunt of family economic hardship. Given the amount of wealth in the County, the high percentage of residents touched by hunger and issues of affordable and safe housing indicates the need to address underlying socioeconomic factors that place some residents at higher risk of poor health.
- A total of 16.2% of San Mateo County adults live below 200% of the Federal Poverty Level (FPL), according to reported household incomes and household sizes. Among respondents with less than a high school education, nearly 70% report living below the 200% FPL threshold, compared to only 11.5% of those with a high school diploma. Black and Hispanic respondents also demonstrate higher proportions than White or Asian/Pacific Islander respondents. This year's countywide finding represents a *significant increase* from the 13.2% reported in 2001 (note that 1998 and 2004 survey data are not comparable because a 185% FPL threshold was used for those data).

### Adults Living Below 200% of the Federal Poverty Level



Source: 1998/2001/2004/2008 San Mateo County Health/Quality of Life Surveys. Healthy Community Collaborative of San Mateo County. August 1998/2001/2004/2007. (Professional Research Consultants).

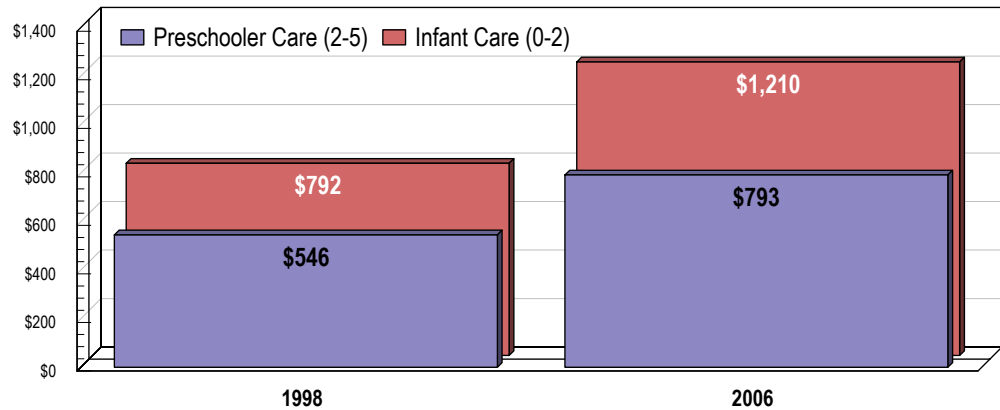
Note: Percentages represent respondents living below 200% of the federal poverty level, according to reported incomes and household sizes.

- Over one-third (34.2%) of respondents report that they or a family member have seriously considered leaving the county because of the cost of living, similar to 2004 findings, but *significantly lower* than the 41.6% found in 2001. Higher levels of dissatisfaction this year can be found among young adults, people living below the 400% poverty threshold, and Hispanic respondents.

**KEY FINDING:** A minimum-wage income in San Mateo County would be entirely consumed by child care costs for one infant.

- The cost of child care in San Mateo County continues to be among the highest in the state, making lower- and middle-incomes families struggle to find affordable alternatives for their children in order to work. Further exacerbating the issue, there are now only enough licensed childcare spaces for roughly one out of four County children with parents in the labor force.

**Average Monthly Cost of  
Child Care in a Licensed Child Care Center**  
(San Mateo County)

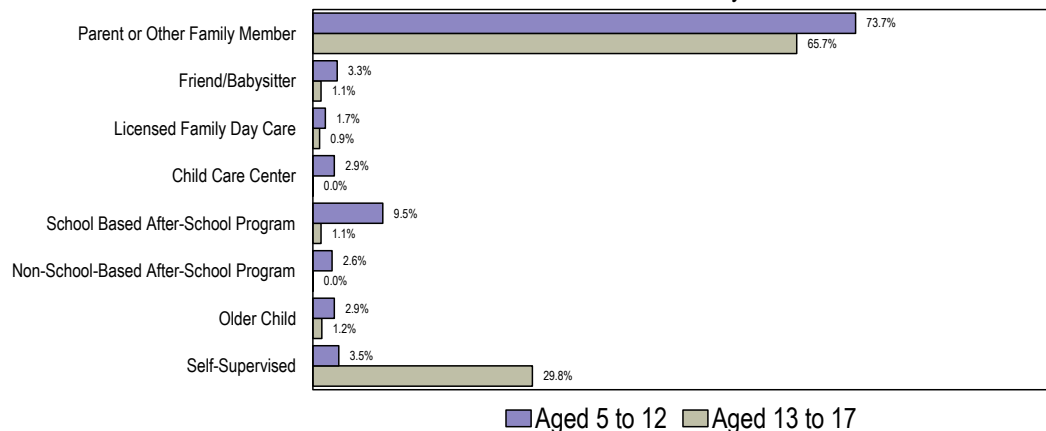


Source: Indicators for a Sustainable San Mateo County. Eleventh Annual Report Card. April 2007.  
<http://www.sustainablesanmateo.org/indicators-report/reports/2007-indicators-report/>

**KEY FINDING:** Nearly a third of youth aged 13 to 17 have no supervision after school.

- By age, younger children (aged 5 to 12) are more likely to be supervised after school by a family member or to participate in an after-school program than are older children. Nearly 30% of teens, on the other hand, self-supervise after school.

**After-School Supervision**  
San Mateo County 2008

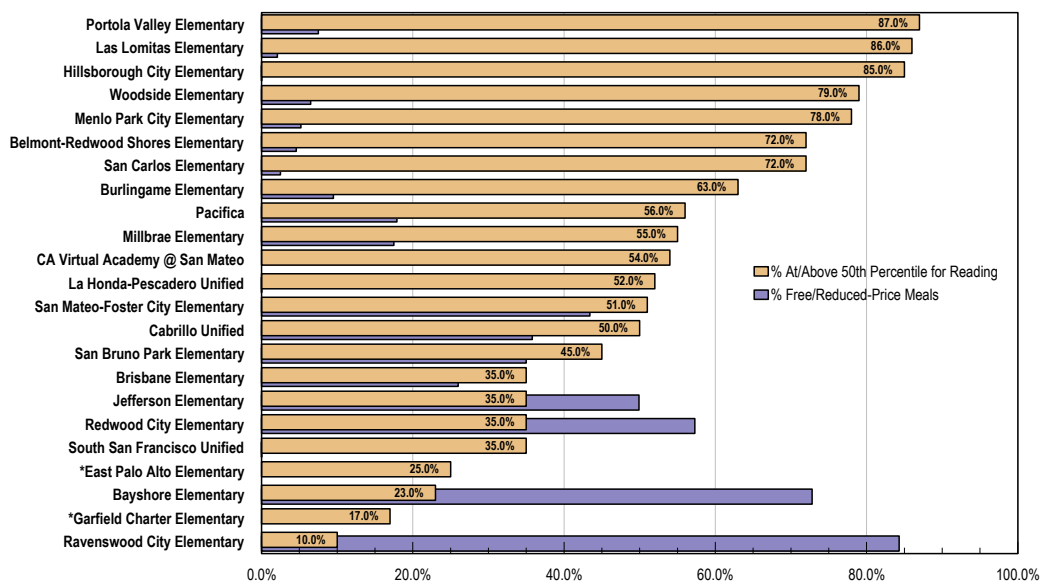


Source: 2008 San Mateo County Health/Quality of Life Surveys. Healthy Community Collaborative of San Mateo County. August 2007. (Professional Research Consultants).  
 Note: Asked of respondents with children aged 5-17 at home.

**KEY FINDING:** Disparities in childhood opportunities lead to lifelong and even multi-generational disparities in health and economic success. There is a need to increase the access of high quality comprehensive early childhood education and care to low-income families and families of color.

- Education indicators reveal that San Mateo County students generally perform better than students statewide, but again, this is not equal for all students. Nor is investment in education equal for all students. Economically disadvantaged children and English Learners generally score much lower on standardized tests, but scores also tend to be low in schools or districts with lower per-pupil spending or fewer fully credentialed teachers.

### Percent of 3rd Graders Reading At or Above the 50th National Percentile Rank by District (San Mateo County 2007)

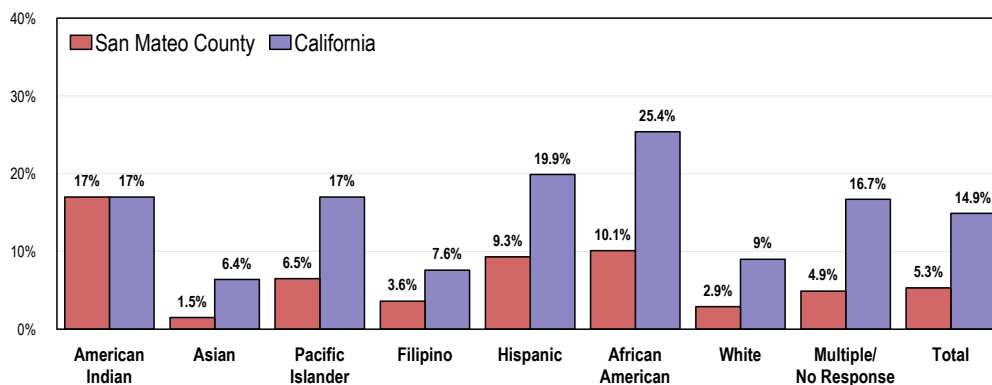


Source: California Department of Education, CAT/6 Test Scores. California Standardized Testing and Reporting (STAR), 2007.  
 \* Charter School  
 California Department of Education, Educational Demographics Unit. Prepared: 7/30/2007.

- Even though the County had a higher proportion of 3<sup>rd</sup> grade students reading at grade level than the state, it is important to note that ethnicity and income are key factors in school performance. For instance, some of the lowest test scores are found in those county districts with lower-income students.

- In 2005-06, it was estimated that 5.3% of San Mateo County high school students would drop out within a four-year period. Asian, White and Filipino students have the lowest four-year dropout rates. On the other hand, African American, Hispanic and Pacific Islander students have much higher rates; still, each of these groups is well under statewide averages.

### 4-Year Dropout Rate by Race/Ethnicity (2005-06)



Source: California Department of Education, DataQuest. Data extracted August 2007. <http://api.cde.ca.gov/reports/dataquest.asp>  
 Note: The 4-year derived dropout rate is an estimate of the percent of students who would drop out in a four year period based on data collected for a single year.  
 In 2002-03 the California Department of Education started using the National Center for Education Statistics dropout criteria.

- Family violence is also an issue that touches too many lives in San Mateo County, disproportionately impacting children of color. While domestic violence and child abuse rates are much lower than found statewide, hundreds of cases are substantiated each year. Continued prevalence of domestic violence and child abuse – the two most troubling indicators of social and environmental stressors – are still at similar levels to the previous two surveys. We need to reexamine our strategies for addressing these issues’ root causes.

**KEY FINDING:** We have criminalized biology.

- The majority of women inmates are confined in San Mateo County Jail for non-violent drug possession and property offenses, only 12% are housed for violent/weapons charges. In fact, there are a higher percentage of women confined in San Mateo County on drug possession and theft/property offenses than in the nation’s jails.
- 80% of all women inmates are confined in San Mateo County Jail reported that they had moderate to severe alcohol or drug problems.
- Most women inmates are confined in San Mateo County Jail were not lawfully employed (69%) at the time of admission to jail indicating the high rate of unemployment among these women.
- More than one-half of the pretrial women and one-third of the sentenced women housed in the San Mateo County Jail are responsible for young children. Numerous studies on female offenders and their children document that the separation of mothers from their children contributes to:
  - Five to six times higher delinquency rates among their children.

- Inability for children who are separated from their mothers to form trusting relationships and attachments to society's standards.
  - More children in foster care.
  - Additional welfare costs to society.
  - Higher rates of recidivism for women offenders.
- ☐ Men housed in the San Mateo County Jail have the following characteristics:
    - The most frequent offense for which they were confined was for personal drug use and possession.
    - Almost 60% were employed at the time of this current jail admission and most reported that they expect to be employed upon release.
    - More than one-half report using drugs and four out of ten report using them daily or several times a week.
    - Methamphetamines were the number one drug of choice.
    - Combined with drug use, nearly two thirds of the men report drug and/or alcohol abuse.
    - Only 17.2% reported being involved in treatment at the time of this arrest and few reported ever receiving treatment.
    - Almost one-third of the males are assessed by Correctional Health Services as needing residential treatment for their psychiatric disorder.
  - ☐ The latest data from the Bureau of Justice Statistics confirm that 64.2% of the inmates in local jails have an emotional problem as evidenced by a psychiatric disorder (Diagnostic and Statistical Manual of Mental Disorders). Teplin, L. (1994) found in her study of 728 male detainees at the Cook County, IL Department of Corrections in Chicago, IL that 62.4% of male detainees were assessed as having a psychiatric disorder.

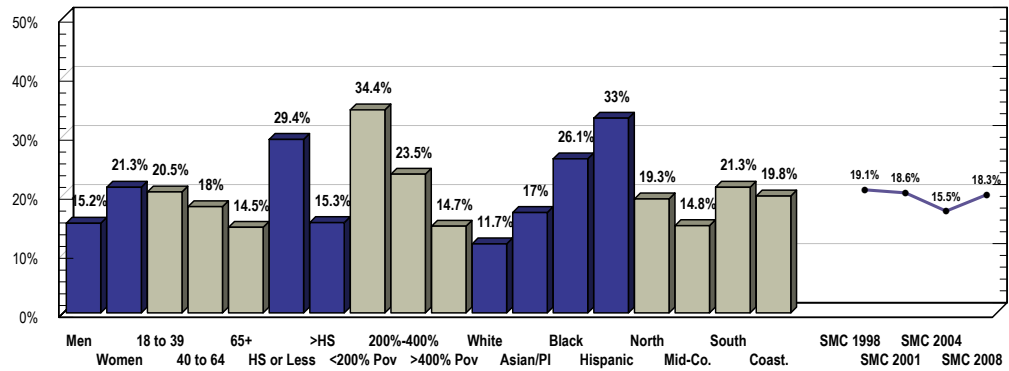
## COMMUNITY ISSUES

**KEY FINDING:** More than one out of four Black and Hispanic respondents believe racial and cultural tolerance in San Mateo County is “fair” or “poor,” and these proportions are increasing.

- ☐ San Mateo County's population reflects wide racial and ethnic diversity. In 2007, 49.5% of residents rate racial and cultural tolerance as excellent or very good, which is significantly lower than the 56.6% reported in 2004. In addition, perceptions of San Mateo County's racial and cultural tolerance varies significantly between racial/ethnic groups. Whites overwhelmingly rate San Mateo County's racial and cultural tolerance higher than Blacks and Hispanics.



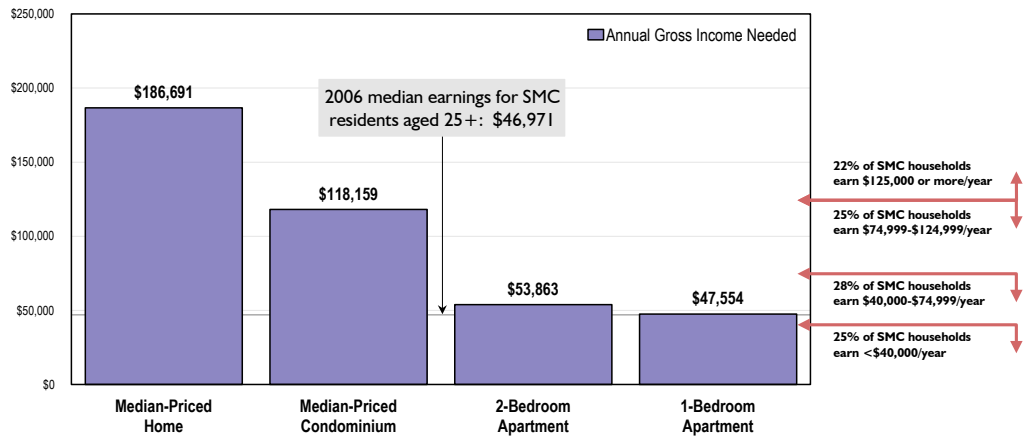
## Perceive Racial/Cultural Tolerance to Be "Fair" or "Poor"



Source: 1998/2001/2004/2008 San Mateo County Health/Quality of Life Surveys. Healthy Community Collaborative of San Mateo County. August 1998/2001/2004/2007. (Professional Research Consultants).

- In all, 14.2% of San Mateo County surveyed adults in 2008 reported experiencing some kind of **physical symptoms** (e.g., a headache, an upset stomach, tensing of your muscles, pounding heart) as a result of how they were treated based on their race at some time in the past 12 months. This proportion is notably higher among non-White respondents: Black (28.9%); Hispanic (27.2%); Asian (17.5%). Significant shares report experiencing these types of symptoms at least on a monthly basis.
- Housing and homelessness remain critical concerns for San Mateo County. Median home prices continue to climb above the state average, and it is estimated that only one out of five first-time buyers can afford home ownership. Soaring housing costs have further contributed to homelessness and displacement, and many who work in San Mateo County cannot afford to live here and, instead, commute from neighboring counties. This only increases difficulties with traffic flow and congestion.
- "Fair market rent" (as determined by the U.S. Department of Housing & Urban Development) for a two-bedroom apartment in San Mateo County in 2005 was \$1,539. This would constitute 57.4% of the income of a family living at 200% of the federal poverty level.

## Annual Gross Income Needed to Afford Median-Priced Home, Condominium, and Rents in San Mateo County, 2006

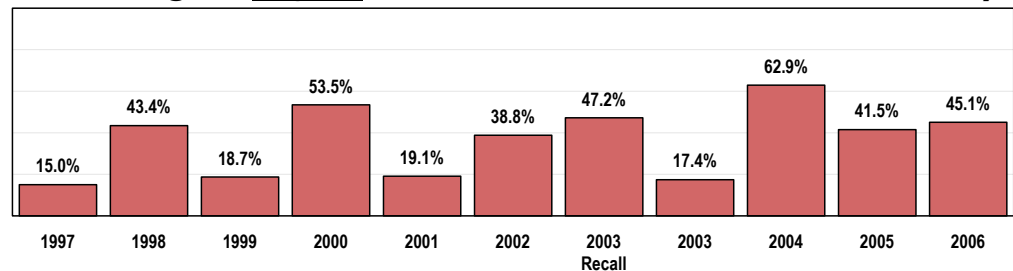


Source: Indicators for a Sustainable San Mateo County. Eleventh Annual Report Card. April 2007. U.S. Census Bureau. Census 2000. 2006 American Community Survey.

**KEY FINDING:** While public transit use is up, it remains underutilized. We should implement appropriate incentives to encourage use of public transportation.

- As found previously, most commuters to and from the county drive alone, and although public transit ridership is up, it is still used only minimally. Further, traffic congestion and waste generated by increasing numbers of people and industries continue to threaten the quality of the region's air, water, and land. Energy consumption and availability continues to be a concern in all of California, and San Mateo County is no exception.
- In 2006, Caltrain achieved its highest annual average weekday ridership level in its history, with more than 35,000 daily rides. This was a 25% increase in daily rides from 2003, the last full year before the Baby Bullets were introduced.
- In the past decade, voter turnout has ranged from a low of 15% in the 1997 off-year election to a high of 62.9% during the 2004 election. Turnout is typically highest in even years when federal and state offices are on the ballot and lowest during odd years when elections consist primarily of local offices and issues.

### Percentage of Eligible Voters Who Voted in San Mateo County



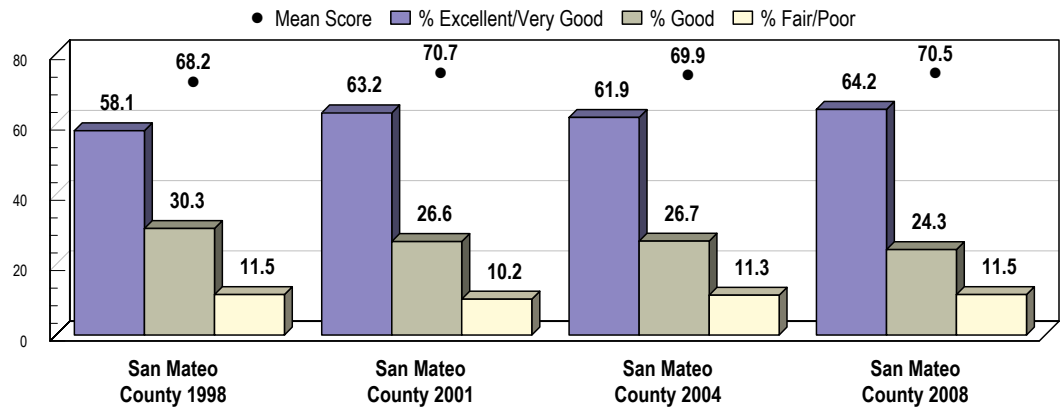
Source: Indicators for a Sustainable San Mateo County.  
Eleventh Annual Report Card. April 2007.

- San Mateo County crime rates continue to be well below both state and regional averages. Crime rates, including juvenile violent crimes, decreased considerably in the late 1990s, but now appear to be leveling off. Still, most residents feel San Mateo County is a safe place to live and work.

**KEY FINDING:** Most people feel very safe in their neighborhoods, but this varies significantly by race/ethnicity.

- When asked how safe they feel walking in their neighborhood, 64.2% of San Mateo County residents expressed “excellent” or “very good” responses, similar to 2001 and 2004 findings, and better than the baseline 1998 findings. “Fair/poor” comments continue to place just over 10%.
- In 2008, 21.8% of survey respondents indicate they feel “very connected” to their community, while 44.8% respond “somewhat connected.” A total of 22.7% say they are “not very connected” to their community and 10.7% feel “not at all connected.” Compared to 2004 and 2001 responses, residents’ feelings about their connection to the community have not changed significantly.
- A total of 46.7% of 2008 survey participants say that spirituality is “very important,” while 19.3% say it is “not important” in their lives (this marks a *significant increase* in the perceived importance of spirituality compared with 2004 findings; these findings are, however, similar to those reported in 2001).

### Community Evaluations of Neighborhood Safety



Source: 1998/2001/2004/2008 San Mateo County Health/Quality of Life Surveys. Healthy Community Collaborative of San Mateo County . August 1998/2001/2004/2007. (Professional Research Consultants).

Notes: 1. Asked of all respondents.  
2. Mean scores are calculated on a scale where "excellent"=100, "very good"=75, "good"=50, "fair"=25, and "poor"=0.