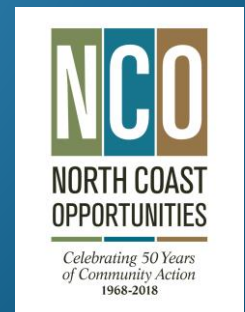
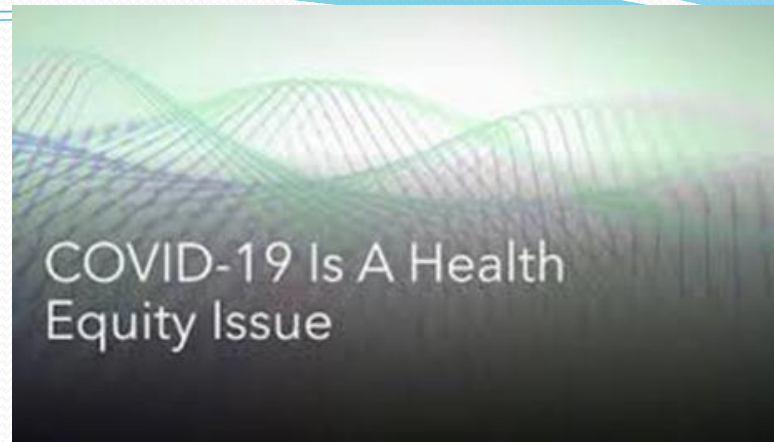


Equity and the Social Determinants of Health in the Time of COVID-19

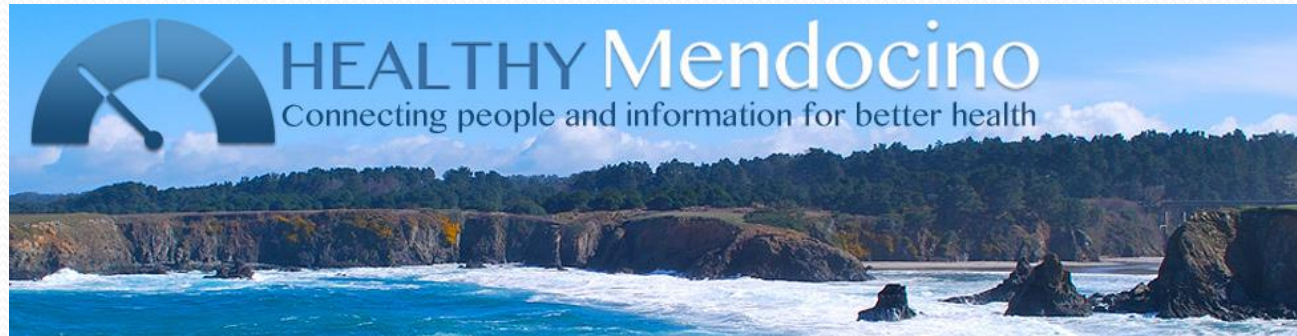
A presentation by Healthy
Mendocino
www.healthymendocino.org





The impacts of COVID-19 have disproportionately affected communities of color in regions throughout the country due to underlying inequities in access to healthcare, communications and the Social Determinants of Health.

In this presentation, Healthy Mendocino will discuss the health priorities in Mendocino County as identified in the last Community Health Needs Assessment and how community health issues have been impacted by COVID-19.

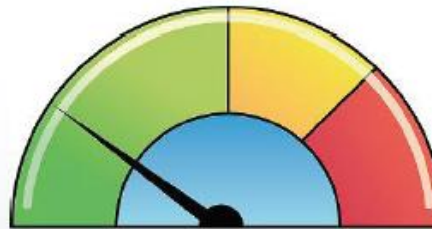


What We Do:

Healthy Mendocino is a central hub for cross-sector collaboration to improve community health. Our website provides localized health data, resources, best practices, and recommendations to inspire strategic action. We collect continuous community feedback about the most pressing health issues in the county to help inform our partners' next steps.

Community Health Needs Assessment

Conducts the collaborative Community Health Needs Assessment (CHNA) every 3 years



Provides critical Mendocino County health data updated in real time



Fosters collaboration by building relationships, sharing resources and engaging the community



Healthy Mendocino

Our Mission:

Healthy Mendocino works to improve quality of life in Mendocino County by encouraging informed dialogue about the actions local residents and organizations can take to improve community health.

Our Values:

- Collaboration and Partnership
- Catalyzing change by identifying gaps and sharing evidence-based best practices to help create innovative solutions
- Building relationships by connecting people, ideas and actions



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Healthy Mendocino Projects

COVID-19 Resource Library



Health Resources



Recursos en español



- Healthy Mendocino Roundtable
- Listening Tours
- Website pages and collaborations
 - COVID-19 Resource Library on the website English and Spanish
 - Mask/ COVID Awareness Project and Vaccine Awareness Project
 - MOVE 2030, Mendocino Opportunities for Building a Vibrant Economy
 - Tribal News
 - Mendocino Coast Healthcare Foundation
 - Childhood Trauma Action Team, ACEs Community Resilience Team
 - Inland and North Coast Housing projects
 - Oral Health
 - CalFresh
- New collaborations and resource webpages coming soon
 - Tribal Recognition Project
 - Governor's 100 Day Homeless Challenge with the Continuum of Care (COC)
 - ACEs Community Resilience Team partnership



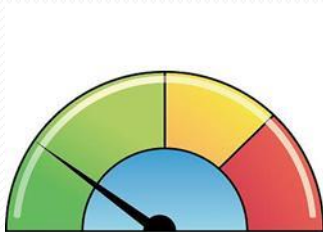
Healthy Mendocino Projects

Food for Thought: COVID-19 and Shaping Our Community

- Webinars with local community leaders
 - Food for Thought: COVID-19 and Shaping Our Community
 - Social Services & Vulnerable Populations
 - Workforce & Economy
 - Community Connection & Resilience
 - A Conversation with the Diversity, Equity, and Inclusion Task Force
 - A Conversation on Youth Mental Health: Response, Recovery, Resilience



- Local Featured Articles
 - Mendocino Coast Children's Fund Breath Easy Project
 - Women's Well-Being Index
 - Project Sanctuary Trains Youth Advocates to Help Prevent Teen Dating Violence
 - Teen Vaping Guide
 - Health Equity and the Social Determinants of Health
 - Responding to Education Inequity in the Age of COVID
 - Local Heros: Promotores de Salud
 - Creating Healthy Environments with Language Justice
 - CalFresh: An Underutilized Program with a Big Impact
 - Food Insecurity Index



- New indicators
 - Arrests for Rape; Arrests for Violent Crimes; Arrests for Homicide by Year
 - Domestic Violence calls for assistance and rate per 1,000 population
 - E-Cigarettes and Vaping Use
 - Poor Mental Health for 14+ Day



2019 Community Health Needs Assessment (CHNA)



2019 Mendocino County Community Health Needs Assessment A Summary of Key Findings

*A collaborative project to identify priorities and
establish initiatives with specific goals and strategies for a healthier Mendocino County*

October 2019





2019 Community Health Needs Assessment



MENDOCINO COMMUNITY HEALTH CLINIC, INC.



The 2019 CHNA is the second collaborative CHNA process coordinated by Healthy Mendocino.

Thirteen Mendocino County agencies provided funding and representatives to the CHNA Planning Group to conduct this assessment process that began in September 2018.



2019 Community Health Needs Assessment



- The purpose of the CHNA process is to identify the most pressing health priorities facing Mendocino County residents and commit to a coordinated set of strategies to improve the health and well-being of our residents.
- The CHNA findings are used to inform the prioritization of health issues and the development of action-oriented plans for addressing the most significant issues identified by community partners.
- Healthy Mendocino shares information between sectors to engender collaboration and gathers continuous community feedback to share with agencies to help inform their next steps in improving community health.



2019 Mendocino County
Community Health Needs
Assessment

APPENDIX A
Community Health Survey
October 2019



2019 Mendocino County
Community Health
Needs Assessment

APPENDIX B
Key Informant
Interviews/Survey
October 2019



2019 Mendocino County
Community Health Needs
Assessment

APPENDIX C
Community Health Status
Assessment
October 2019

- **The Community Health Survey (Appendix A)** provides residents' opinions about health status, access to services, and any barriers to obtaining health care. A total of 1,324 residents completed the Survey.
- **The Key Stakeholder Interviews/Key Leader Survey (Appendix B)** identifies views on health and well-being in Mendocino County among key stakeholders in the community. Thirty-four formal and informal leaders in the community were interviewed.
- **The Community Health Status Assessment (Appendix C)** uses secondary data from a variety of sources such as vital statistics data, accident and injury rates, infectious and chronic disease rates, and others, to illuminate the health status of Mendocino County and its residents.



2019 Community Health Needs Assessment Priority Areas



The Group identified the following 3 top Priority Areas based on the analysis of the primary and secondary data sources and the Key Informant Interviews as the leading Community Health Needs in Mendocino County:

- 1. Mental Health**
- 2. Domestic Abuse**
- 3. Substance Abuse**



Figure 11

Residents and Key Leaders agree on the top 6 most important health problems in Mendocino County

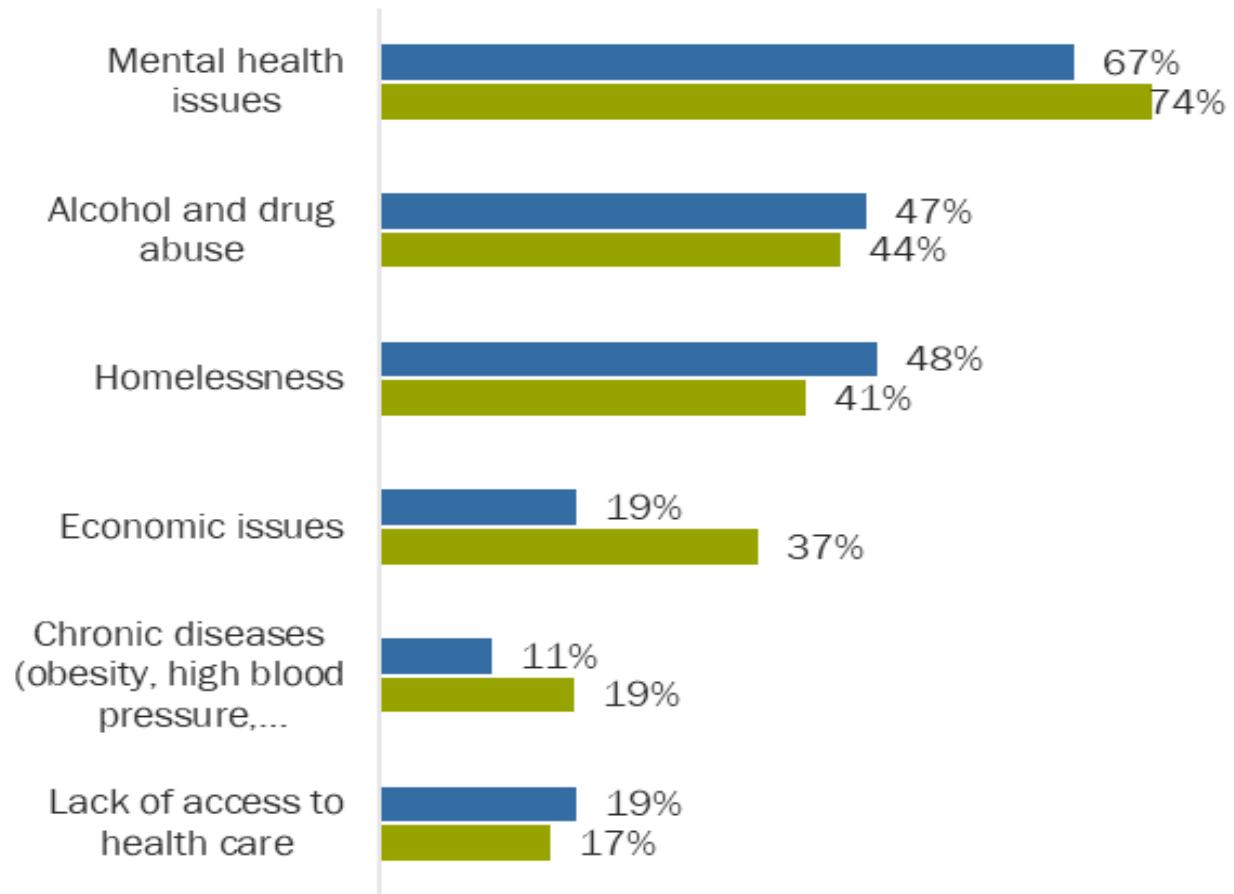
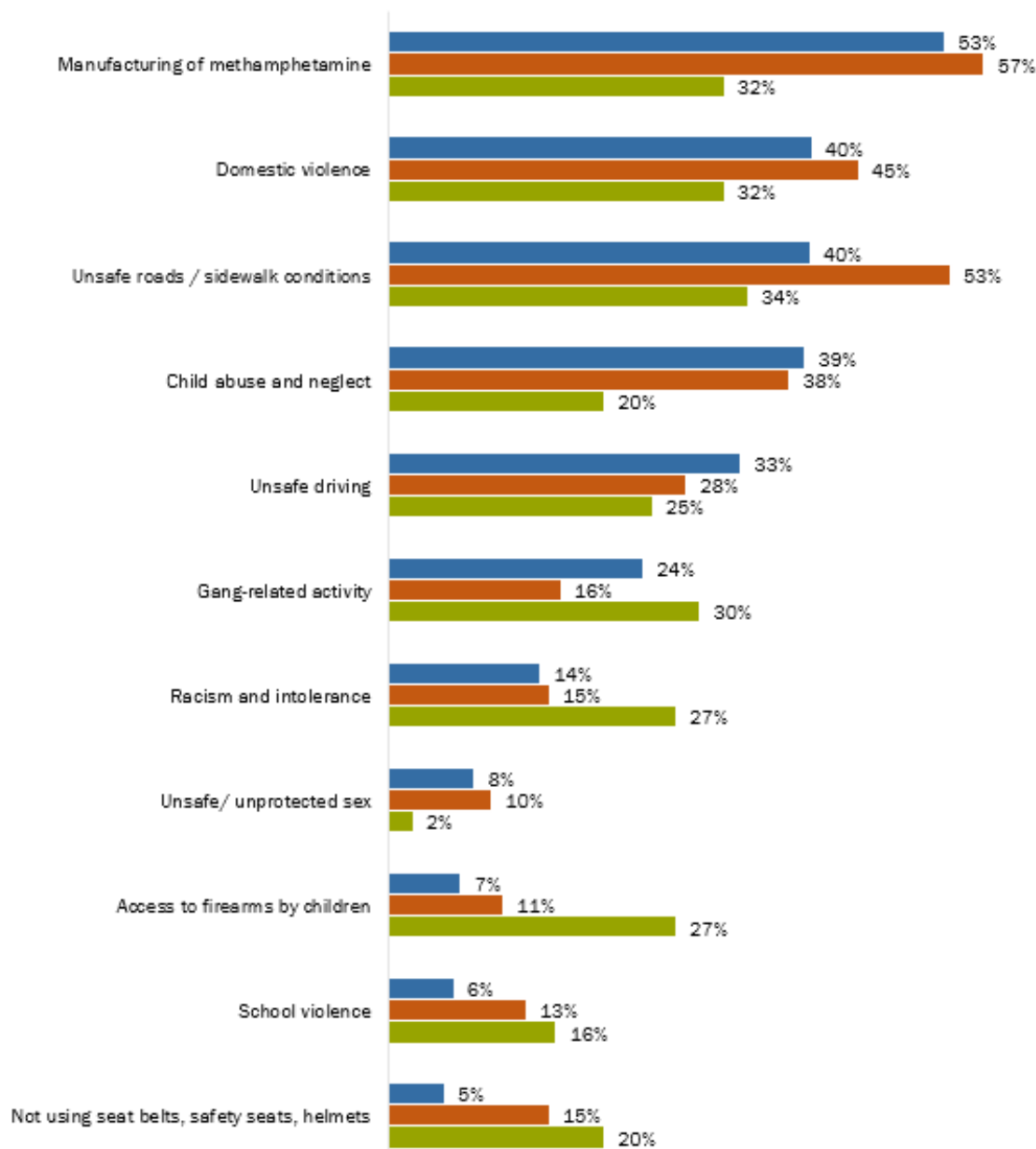




Figure 9

All Respondents, Native Americans and Hispanics/Latinos say the biggest safety problems are manufacturing meth, domestic violence and unsafe roads / sidewalks

n=1,324

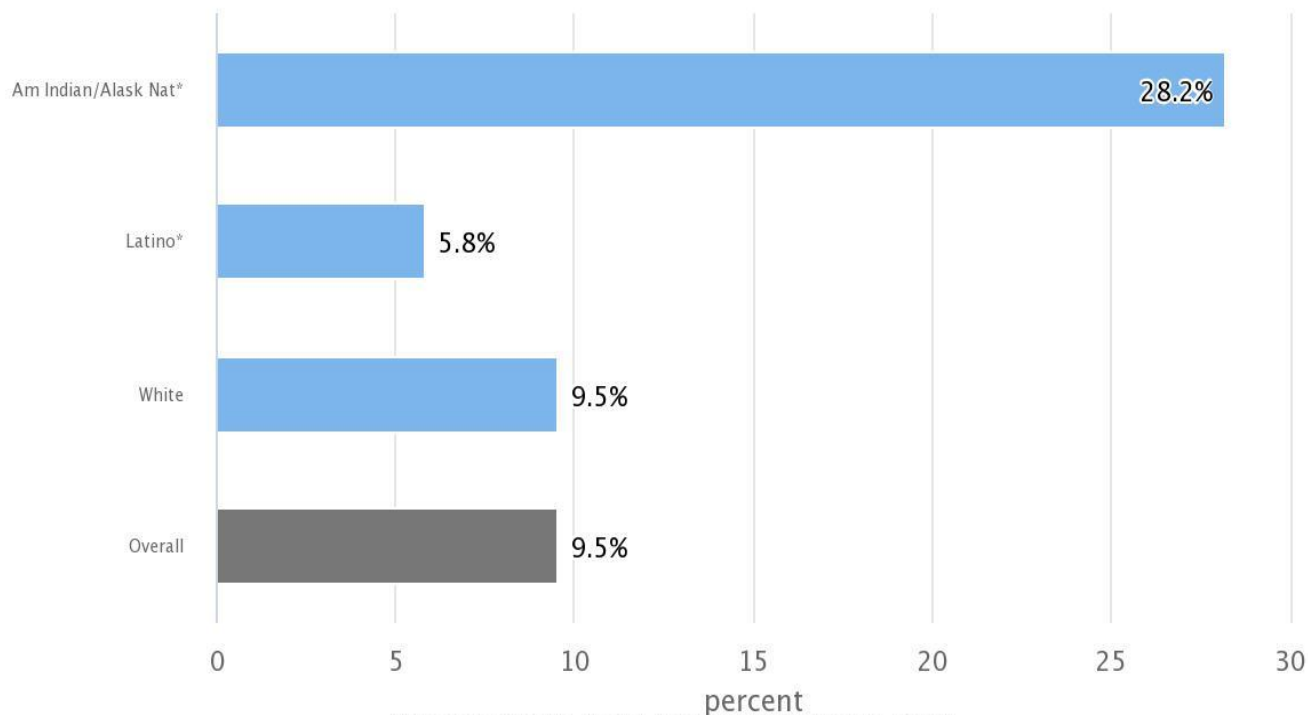




Healthy Mendocino Data on Mental Health

13.4% of adults report frequent mental distress
9.5% of adults report serious psychological distress

Adults with Likely Serious Psychological Distress by Race/Ethnicity
County: Mendocino



Source: California Health Interview Survey (2013-2015)

*Value may be statistically unstable and should be interpreted with caution.



Healthy Mendocino Data on Mental Health

Age Adjusted Death Rate Due to Suicide (per 100,000 people)

21.3

deaths/ 100,000 population

COMPARED TO



CA Counties



CA Value
(10.4)



US Value
(13.6)



Prior Value
(23.6)



Trend



HP 2020 Target
(10.2)

Technical note: Data compiled by CDPH using the California Comprehensive Master Death Files.

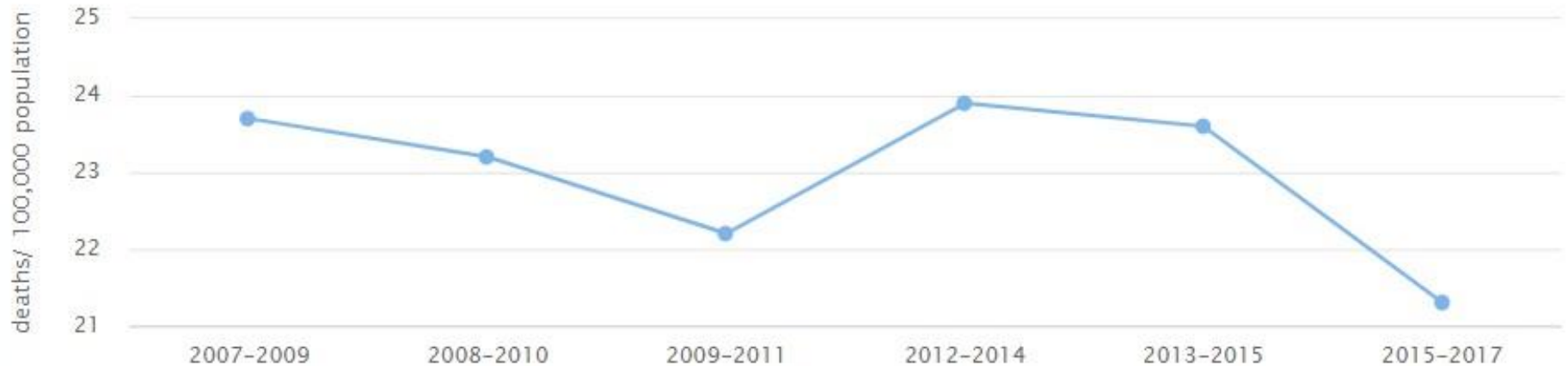
Source: California Department of Public Health [↗](#)

Measurement period: 2015-2017

Maintained by: Conduent Healthy Communities Institute

Last update: May 2019

Age-Adjusted Death Rate due to Suicide

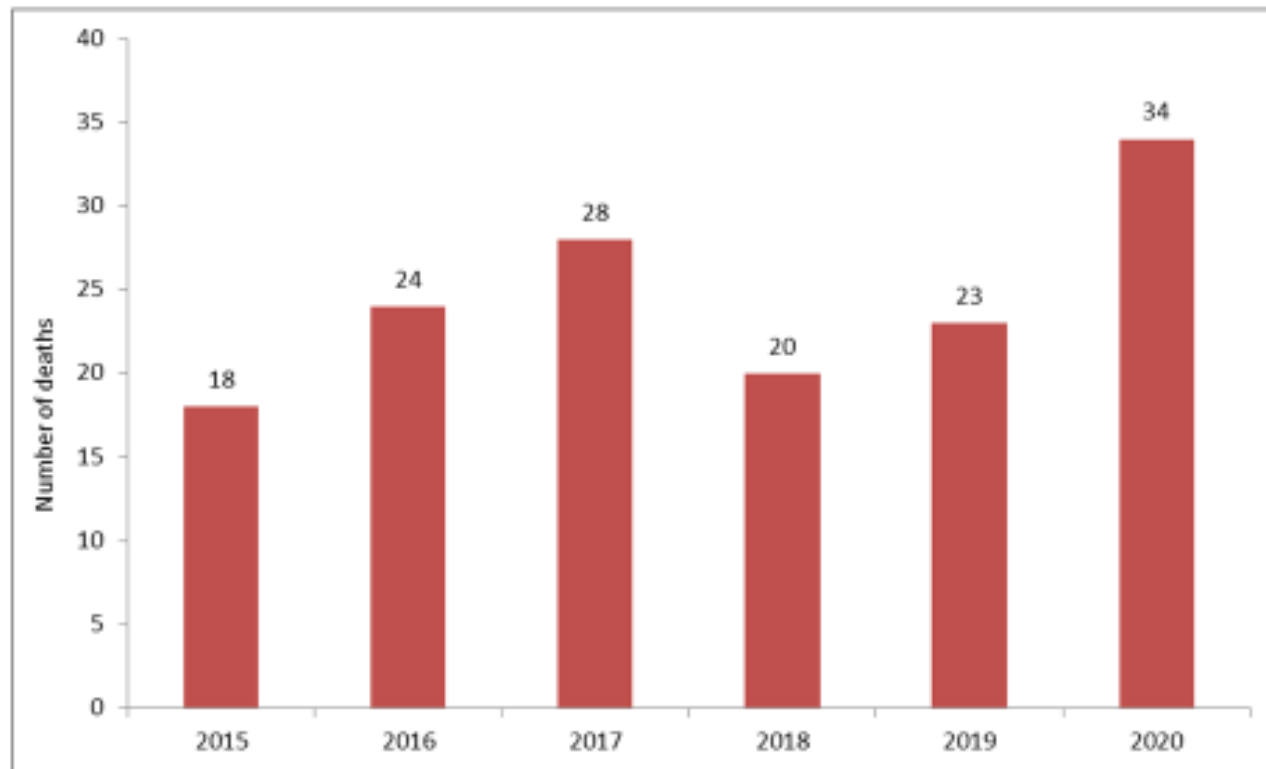




Healthy Mendocino Data on Mental Health

Suicide numbers are since the pandemic. There were 34 suicides in 2020, compared to 23 in 2019, the county statistics show.

Suicides in Mendocino County, 2015 to 2020





Healthy Mendocino Data on Domestic Violence

Substantiated Child Abuse Rate per 1,000 Children

County: Mendocino 

20.7

cases/ 1,000 children

Source: Child Welfare Dynamic Report System [↗](#)

Measurement period: 2019

Maintained by: Conduent Healthy Communities Institute

Last update: May 2020

COMPARED TO



CA Value
(7.4)



US Value
(9.2 in 2018)



Prior Value
(19.6)



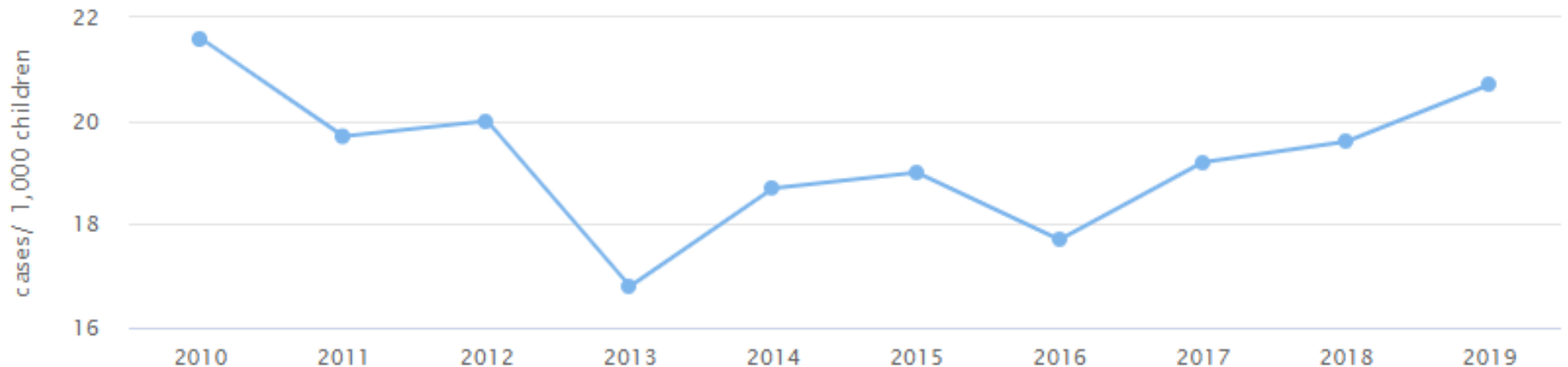
Trend



HP 2030 Target
(8.7)

Technical note: Due to frequent data revisions, please refer to the source for the most current rates.

Substantiated Child Abuse Rate





Healthy Mendocino Data on Domestic Violence

Domestic Violence Calls per 1,000 Population

County: Mendocino 

8.5

calls/ 1,000 population 18-69

Source: California Department of Justice [↗](#)

Measurement period: 2019

Maintained by: Conduent Healthy Communities Institute

Last update: January 2021

COMPARED TO



CA Value
(6.0)

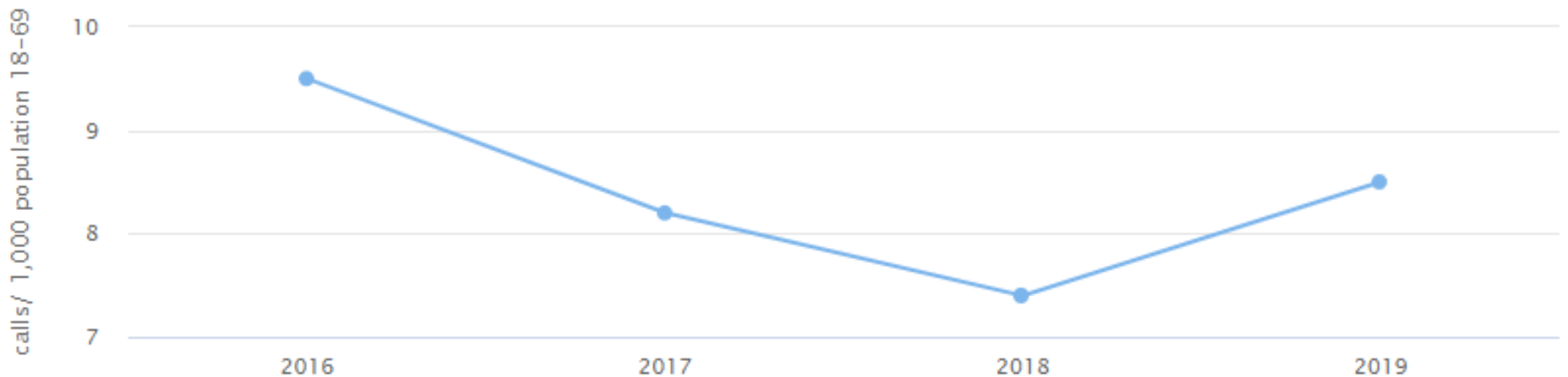


Prior Value
(7.4)



Trend

Domestic Violence Calls





Healthy Mendocino Data on Domestic Violence



- In Mendocino County, for the months of March through May of 2019, the Project Sanctuary Crisis Line received 104 calls; for the same time period in 2020, they received 230 calls – an increase of 121 percent.
- Newly obtained totals for 2020 show an increase in most violent crimes including homicides, while other crime stats, such as domestic violence, are down, though Kendall attributes this to underreporting. Good news? No, says Sheriff Kendall.



- “A lot of domestic violence and sexual crimes are discovered at the hospital and so we see reported child abuse cases being down because everybody was getting away from the doctor’s office and we didn’t have kids in school, we didn’t have people around mandated reporters. It does not mean that child abuse or domestic violence or sex crime actually dropped. It means that less of it is being reported,” Kendall said.



Healthy Mendocino Data on Substance Abuse

Age-Adjusted ED Visit Rate due to Opioid Overdose

County: Mendocino 

16.0

Rate per 100,000 residents

COMPARED TO



CA Counties



CA Value
(17.4)



Prior Value
(15.1)

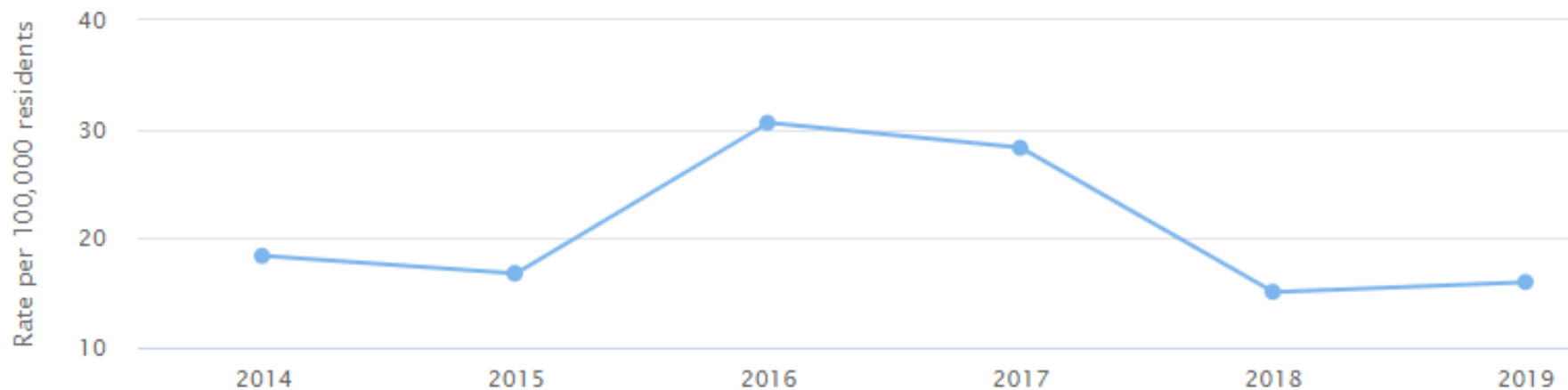


Trend

Source: [California Opioid Overdose Surveillance Dashboard](#)

Measurement period: 2019

Age-Adjusted ED Visit Rate due to Opioid Overdose (excluding Heroin)



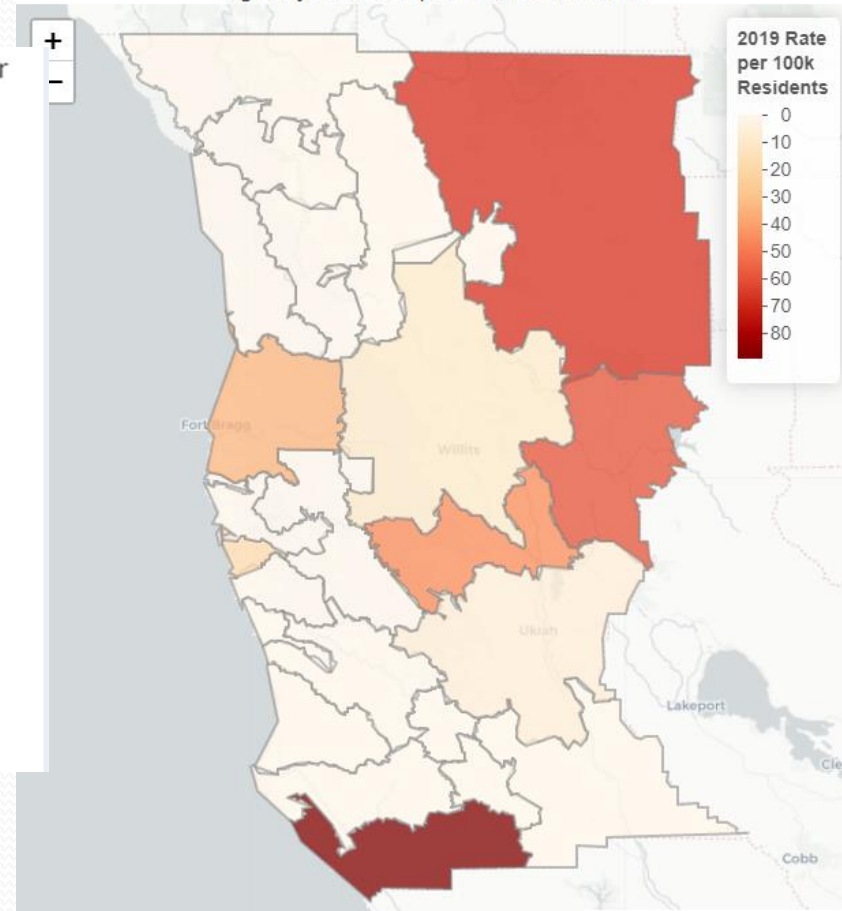


Healthy Mendocino Data on Substance Abuse

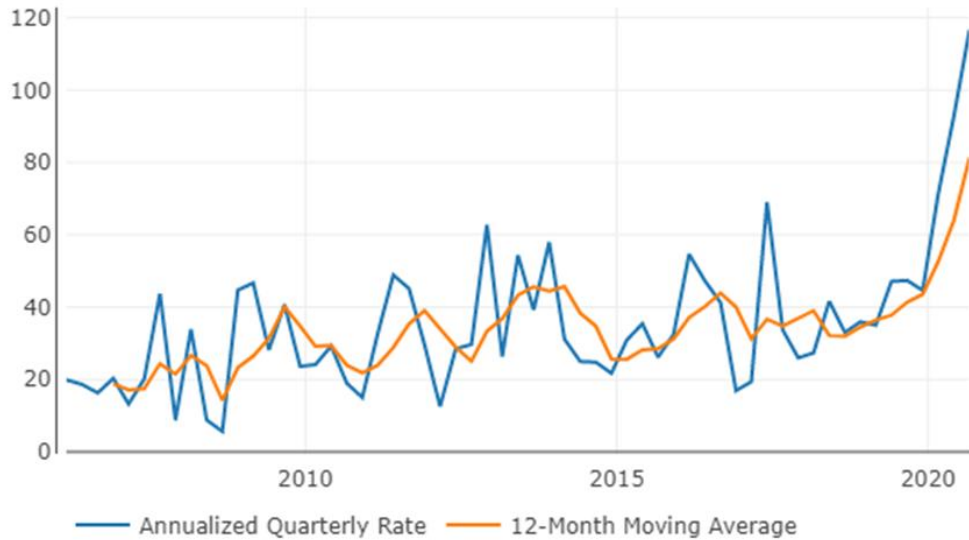
All Opioid ED Visits and Overdose Deaths per 100,000

Any Opioid-Related Overdose Deaths - Total County Population, Mendocino, 2019

Age-Adjusted Rate per 100,000 Residents

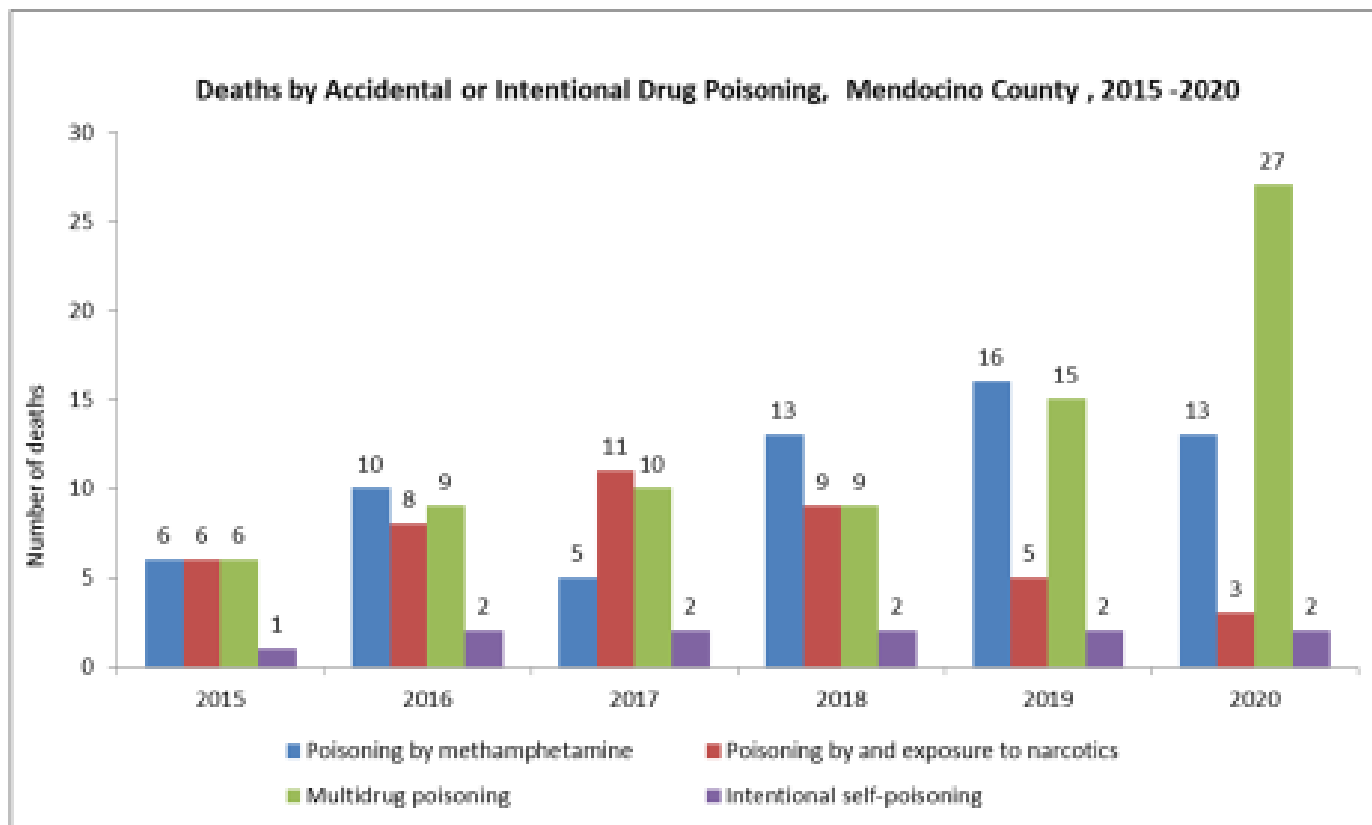


Any Opioid-Related Overdose ED Visits - Total Population Age-Adjusted Rate per 100,000 Residents
Mendocino County





Healthy Mendocino Data on Substance Abuse





Health Beyond Healthcare

Social Determinants of Health are conditions in the environments in which we are born, live, learn, work, play, worship and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

These economic, social, cultural, and environmental factors affect a wide range of health risk and outcomes and impact the health status of individuals and groups.

Health is more a function of lifestyles linked to living and working conditions than of healthcare.





Social Determinants of Health (SDOH) have a major impact on people's health, well-being, and quality of life

Examples of SDOH Conditions:

- Safe housing, transportation, and neighborhoods
- Racism, discrimination, and violence
- Education, job opportunities, and income
- Access to nutritious foods and physical activity opportunities
- Polluted air and water
- Language and literacy skills





SDOH Issues and Inequities in Mendocino County

- Transportation/geographic isolation
 - isolation from resources, jobs, economic and educational opportunities
 - not many walkable/bikeable roads outside of incorporated areas
 - toll on mental health
- Affordable housing
 - Average house Mendocino County costs: \$467,252
 - average household income: \$74,400
 - A.L.I.C.E Households: 35.5% (HM)
- Internet access, or “digital divide”
 - Almost 20% do not have access to internet (HM)





SDOH Issues and Inequities in Mendocino County Cont'd

- High trauma community
 - high poverty, child abuse, substance abuse
 - history of genocide, historical/generational trauma
 - Regional ACE scores are double the state
 - effects of high ACE scores
 - PACESconnection.org OR acesaware.org
- Lack of multicultural leaders in positions of power
- lack of industry, economic opportunity, and sense of purpose



- The Social Determinants of Health also contribute to wide health disparities and inequities.
- Just promoting healthy choices won't eliminate these and other health disparities. Instead, public health organizations and their partners in sectors like education, transportation, and housing need to take action to improve the conditions in people's environments.





Addressing Inequities

- Large health disparities exist among populations and geographic areas.
- Health inequities must be addressed up an “upstream” approach. policy change, economic incentives increasing access to care, quality education, housing, social norm change
- Individual responsibility → collective responsibility





Example: Downstream → Upstream

Objective: Decrease Prevalence of Tobacco-related Diseases

Downstream Intervention:

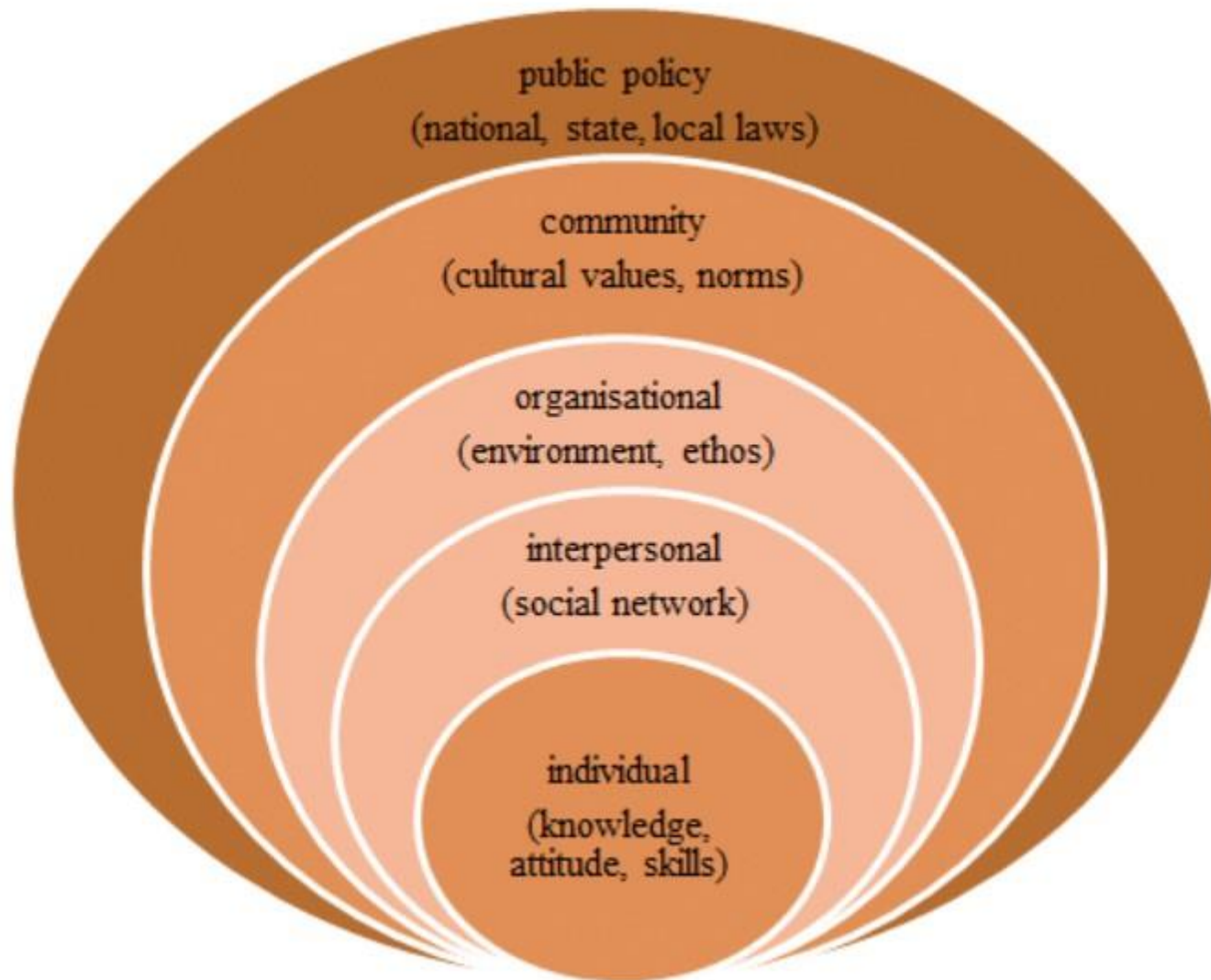
Individual-level
behavioral approach:
“Just Say No”
Campaign”

Midstream Intervention:

Organizational
Approach: Worksite-
based programs that
increase employee
access to facilities
for physical activity
that show promise
in improving health

Upstream Intervention:

Policy Approach:
Increasing taxes on
tobacco products





Addressing Health Inequities in Historically-Oppressed Communities

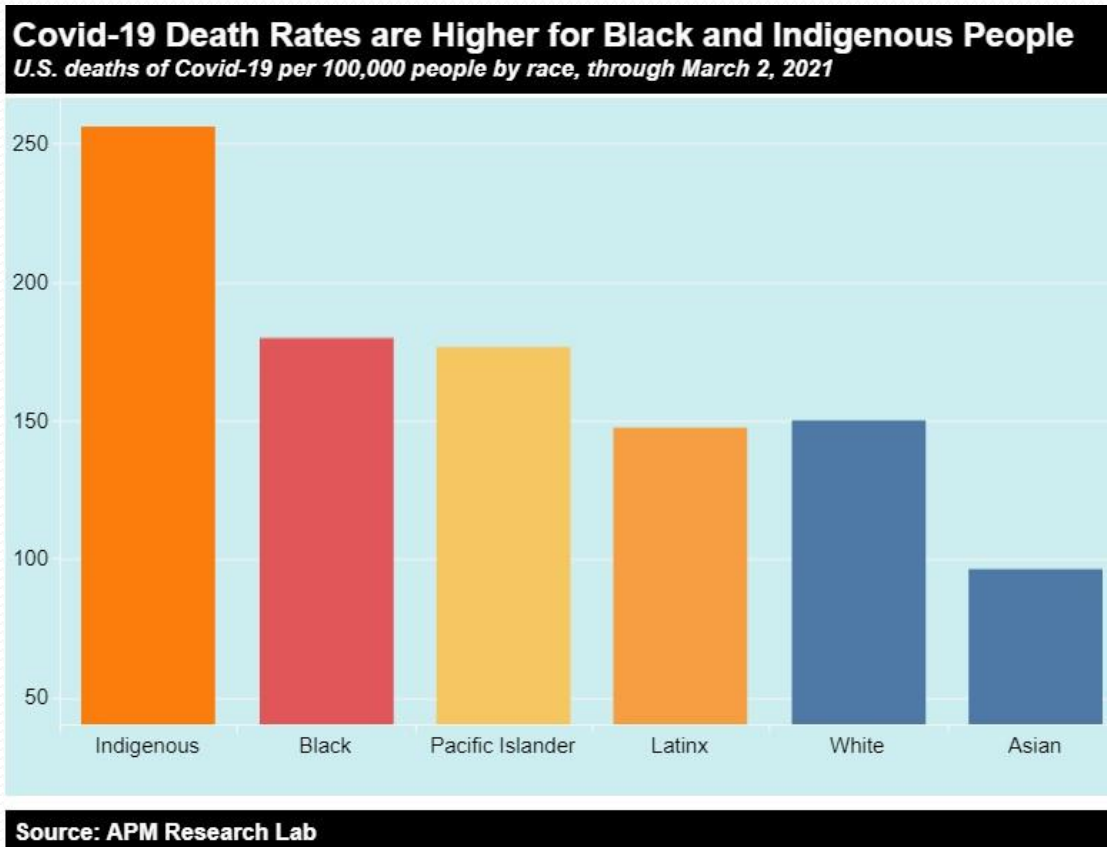
- In communities of color, health inequities exist as a result of disenfranchisement, institutionalized racism and, for Native American Tribal nations, historical genocide and its legacies.
- Addressing these health inequities requires a multifaceted approach: strategic collaboration, examination of power dynamics, entrenched power structures and internal biases, and a commitment to principles struggle and transformative healing
- Any needs identified, or solutions created must be done within or in partnership these communities and not exclusively by outside agencies or organizations.



COVID-19 and Health Disparities

COVID-19 has illuminated health disparities in communities throughout the country and widened existing gaps

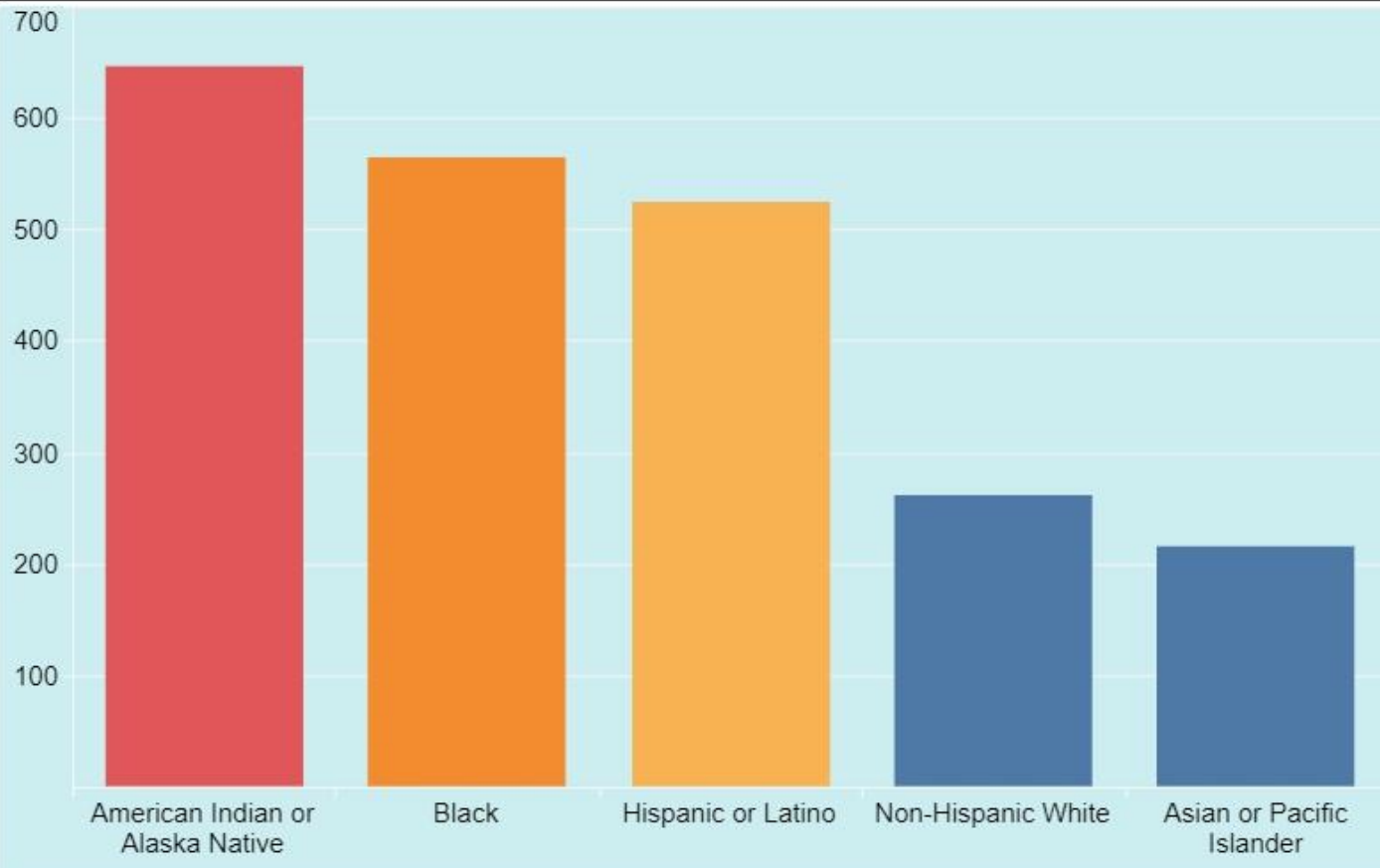
COVID-19 case disparities





Covid Hospitalization Rates are Higher for People of Color

Age-adjusted Covid-19-associated hospitalization rates by race and ethnicity, per 100,000 people



Source: Center for Disease Control and Prevention, as of January 16th, 2021

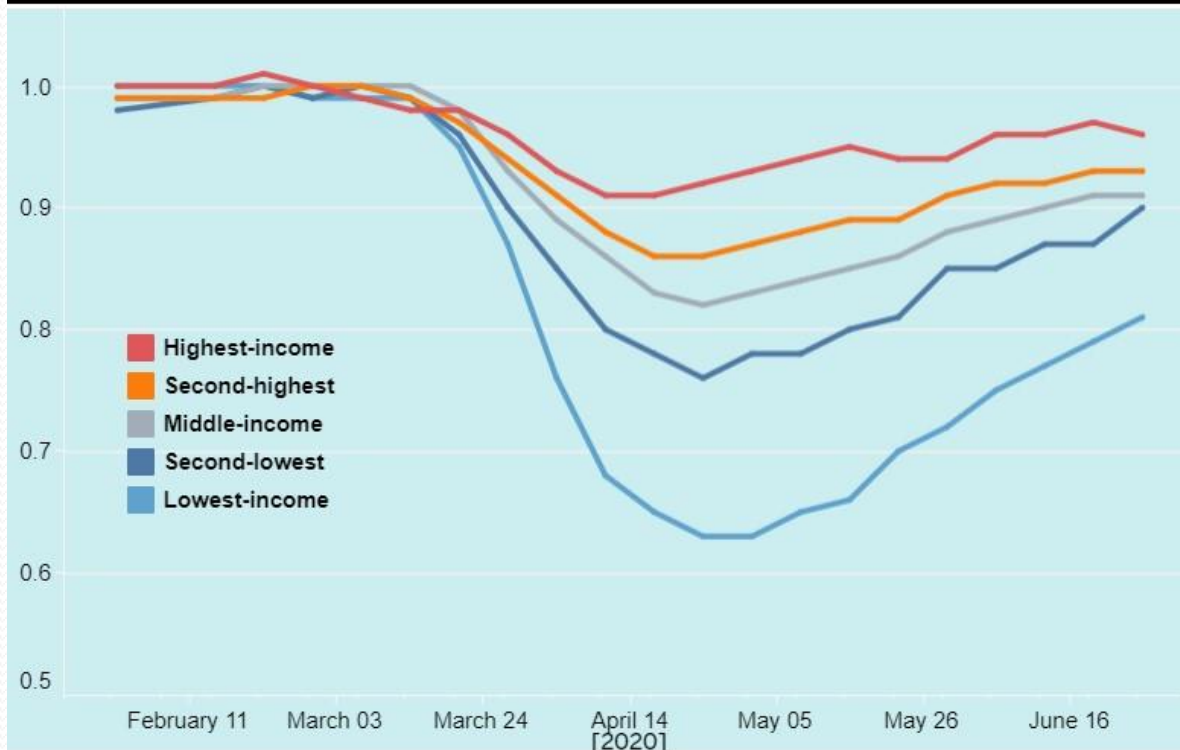


COVID-19 and Health Disparities Cont'd

Economic impacts: households earning \$45,000 a year or less were hardest hit by pandemic.

Low-Wage Workers Have Higher Pandemic Job Losses

Change in U.S. employment levels by income group, relative to February 1, 2020



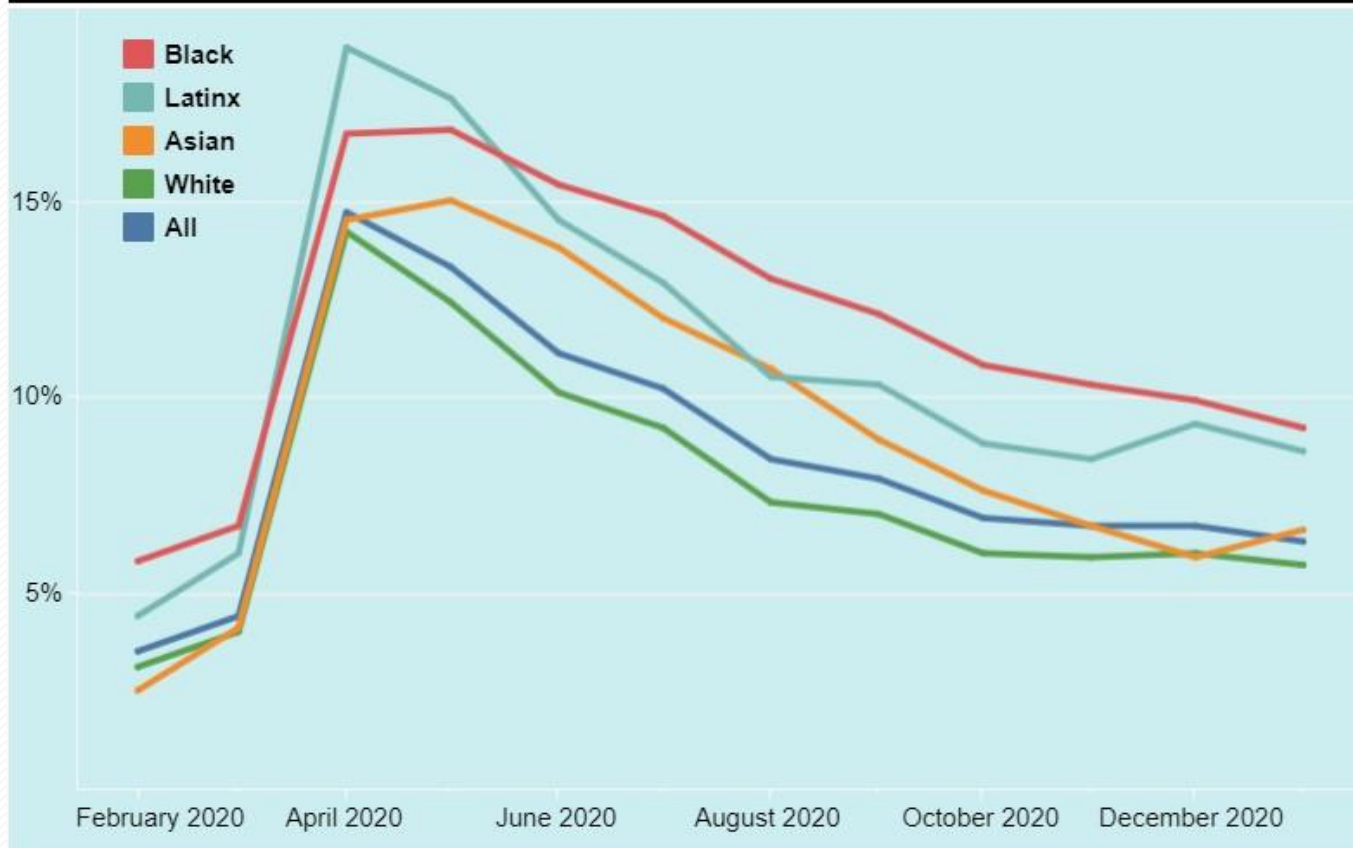
Source: Becker Friedman Institute for Economics, University of Chicago, July 2020



COVID-19 and Health Disparities Cont'd

People of Color Face Higher Unemployment Rates

U.S. unemployment by race, February 2020-January 2021



Source: Bureau of Labor Statistics



COVID-19 and Health Disparities Cont'd

Vaccine Access and Rollout



- Technology and internet connectivity inequities
- lack of multilingual support for scheduling strategies
- first-come, first served model favors those with more resources
- Industry-based priority system presented barriers for undocumented and migrant workers



What lessons have we learned at this time and what solutions can we promote to bring about greater equity to our underserved and vulnerable populations?





Projects and Collaborations Addressing SDOH Issues and Health Disparities in Mendocino County

- Promotores de Salud de Nuestra Alianza de Willits
- Diversity, Equity, and Inclusion Task Force
- NCO's Covid Awareness Project
- ACEs Community Resilience Team
- The Housing Action Teams





Feedback & Information

For more information on Healthy Mendocino, the CHNA report, and to provide us with feedback, visit the website at www.healthymendocino.org or contact Patrice Mascolo at pmascolo@ncoinc.org

Contact Molly Rosenthal at mrosenthal@ncoinc.org