

# The Gateway Cities Air Quality Action Plan

# COMMUNITY MEDICAL NEEDS ASSESSMENT

# Final

September 2011

#### PREPARED FOR:

Los Angeles County Metropolitan Transportation Authority (Metro) and

**Gateway Cities Council of Governments** 

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# **Acronyms**

ACS American Community Survey

APIs Asian/Pacific Islanders

AQAP Air Quality Action Plan

CHIS California Health Interview Survey

CMNA Community Medical Needs Assessment

COPD chronic obstructive pulmonary disease

CVD cardiovascular disease

ED emergency department

EIR Environmental Impact Report

EIS Environmental Impact Statement

FFV Fresh fruits and vegetables

GCCOG Gateway Cities Council of Governments

HD Health District

HIV human immunodeficiency virus

HPSA Health Professional Shortage Area

HWDD Healthcare Workforce Development Division

I Interstate

LACDPH Los Angeles County Department of Public Health

Metro Los Angeles County Metropolitan Transportation Authority

MI Myocardial infarction

MUA Medically Underserved Area

MUP Medically Underserved Population

OSHPD Office of Statewide Health Planning and Development

PA Physical activity

SES socio-economic status

SPA service planning areas

SR State Route

WRMA Walter R. McDonald & Associates, Inc.

#### 1. Introduction

The Los Angeles County Metropolitan Transportation Authority (Metro) and its funding partners are preparing the Interstate (I) -710 Corridor Project Environmental Impact Report (EIR)/Environmental Impact Statement (EIS) to analyze alternatives for improving the I-710 from Ocean Boulevard in the city of Long Beach to the State Route (SR) -60, a distance of 18 miles. The purposes of the I-710 Corridor Project, as stated in the EIR/EIS Notice of Preparation, are to:

- Improve air quality and public health;
- Improve traffic safety;
- Address design deficiencies;
- Address projected traffic volumes; and
- Address projected growth in population employment, and economic activities related to goods movement.

The Gateway Cities Air Quality Action Plan (AQAP) is a study requested by the I-710 Oversight Policy Committee in 2004 and subsequently supported by the Metro Board. It will assess how best to continue to improve air quality and public health by addressing both near-term and long-term measures for emissions reductions. The Gateway Cities Council of Governments (GCCOG) is responsible for preparing the AQAP with administrative management and support from Metro.

This Community Medical Needs Assessment (CMNA) is one component of the AQAP. The objectives of the CMNA are to profile the existing health conditions, assess the effectiveness of medical care, and assess future community medical need in the Gateway Cities. Health conditions and medical need are characterized in the CMNA by a select set of indicators related to:

- Health outcomes;
- Factors that contribute to population health (e.g., access to and quality of medical care);
- The effectiveness of existing medical care; and
- Health resources available to the communities in the study area.

The CMNA is organized into the following sections:

# 1.1 Gateway Cities and Los Angeles County Planning Boundaries

This section provides a description of the Gateway Cities and their locations within Los Angeles County, as well as the Los Angeles County planning and service boundaries used for the purposes of data collection and reporting within the CMNA.

#### 1.2 Data Sources Presented in the CMNA

This section describes the primary data sources used in this report, including the timeframe and geography that the data represents, and the limitations of the data.

# 1.3 Demographic Characteristics of the Gateway Cities

This section summarizes the demographic characteristics of residents in the Gateway Cities, using 2005-2009 American Community Survey estimates from the U.S. Census.

# 1.4 Health, Medical Need, and Quality of Life

This section presents findings from the literature about the connections between health, medical need, access to health care services, and quality of life.

# 1.5 Existing Conditions of Health and Medical Need in the Gateway Cities

This section presents findings about current health and medical need conditions in the Gateway Cities, and how these conditions compare to those in Los Angeles County overall. Sub-sections here present data about specific indicators of health and medical need.

## 1.6 Summary

This section presents a summary of CMNA findings about the current state of health and medical need in the Gateway Cities.

### 1.7 Recommendations

Based on the findings, this section provides some basic recommendations focused on improving health outcomes and access to care in the Gateway Cities.

# 1.8 Appendices

Following these sections of the report, there are four appendices that present additional detail about the indicators discussed in the previous sections. These appendices also contain additional data not presented in the previous sections of the CMNA.

# 2. Gateway Cities and Los Angeles County Planning Boundaries

Southern California's Gateway Cities are located in southeastern Los Angeles County. Over two million people live in the Gateway Cities. The area is home to the Port of Long Beach and neighbors the Port of Los Angeles, the busiest container ports in the U.S.

The following are the Gateway Cities:



<sup>&</sup>lt;sup>1</sup> The city of Avalon, located on Catalina Island, was excluded from the data presented in this report.

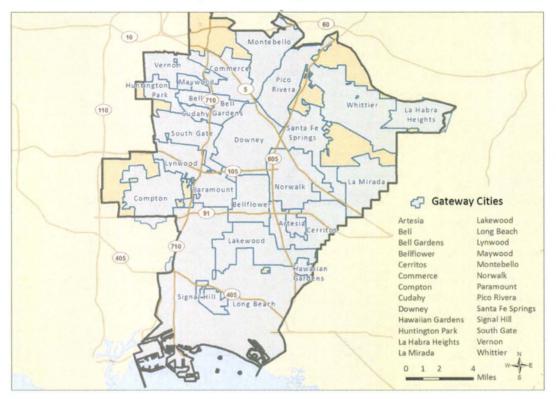


Figure 2-1. Gateway Cities

# 2.1 Public Health Planning and Service Boundaries

Los Angeles County is divided into eight service planning areas (SPA) for health care planning purposes, and the Los Angeles County Department of Public Health (LACDPH) collects and summarizes many health metrics at the SPA level. The Gateway Cities are located within SPAs 6, 7, and 8. SPAs 6 and 8 include relatively few Gateway Cities, and include areas outside of the Gateway Cities. For this reason, data at the SPA level is not as specific to the Gateway Cities as other estimates described below; however, data at the SPA level is still useful for understanding conditions of health and medical need in the Gateway Cities. SPA level data is presented in this report when data is not available at a smaller geographic level.

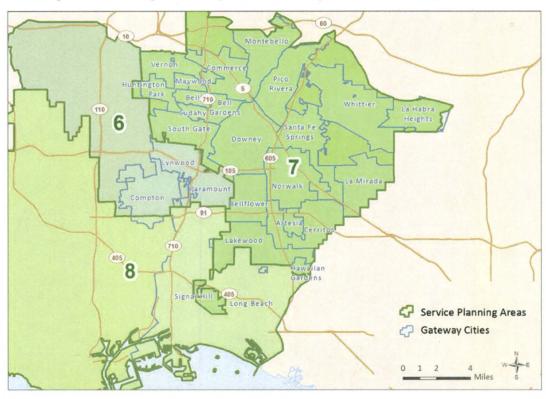


Figure 2-2. Los Angeles County Service Planning Areas and Gateway Cities

Using census tract boundaries within each of the SPAs, the LACDPH has specified 26 health districts within Los Angeles County that are responsible for planning and providing public health services according to the health needs of the local communities. There are seven health districts within the Gateway Cities area, and data at this geographic level is a closer fit with the boundaries of the Gateway Cities. The seven health districts within the Gateway Cities are presented below:

- Bellflower (Health District [HD] 6)
- Compton (HD 12)
- East LA (HD 16)
- Long Beach (HD 40)
- San Antonio (HD 58)
- Whittier (HD 91)
- Harbor (HD 31)

It should be noted that the Harbor Health District (HD 31) was excluded from this report, as only one Gateway City (the city of Avalon located on Catalina Island) is located in the larger Harbor Health District (see map below), and including the entire Harbor Health District area would skew the findings from the specific Gateway Cities area.

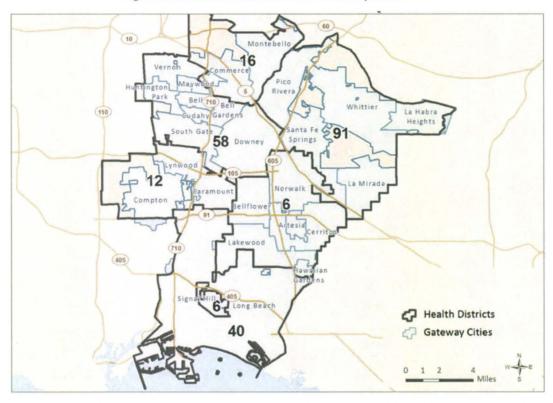


Figure 2-3. Health Districts in the Gateway Cities

#### 2.2 Data Sources Presented in the CMNA

# 2.2.1 U.S. Census Bureau, 2005-2009 American Community Survey 5-Year Estimates

The U.S. Census Bureau's American Community Survey (ACS) is an ongoing, yearly survey. ACS data is collected from a sample of the population in the United States and Puerto Rico to create estimates for the larger U.S. population. The 2005-2009 ACS estimates are based on data collected over a 5-year time period, and represent the average characteristics of population and housing during this time period.

Demographic data for each of the Gateway Cities is presented in comparison to Los Angeles County in Appendix A, and a summary of findings from this data is presented in the "Demographic Characteristics of the Gateway Cities" section.

#### 2007 Los Angeles County Health Survey

The Los Angeles County Health Survey is a population based telephone survey that has been conducted by the LACDPH since 1997, and is focused on the health of Los Angeles County residents. In 2007, a total of 7,200 adults (ages 18 years or older) residing in Los Angeles County were interviewed for the Adult survey, and 5,728 interviews were conducted among the parents (primarily mothers) of children ages 17 years or under.

Data from the 2007 Los Angeles County Health Survey is presented throughout the CMNA report, and shows data from the health districts in the Gateway Cities compared to that from Los Angeles County overall. While some of the estimates from the Los Angeles County Health Survey included in this report may be statistically unstable (relative standard error >23%), the data provides an indication of issues of potential medical need that should be explored further by planning staff and policy makers.

See Appendix B for additional data from Los Angeles County Health Survey.

# Mortality in Los Angeles County 2007, Los Angeles County Department of Public Health

This report from the LACDPH summarizes information on deaths in Los Angeles County from a wide range of health conditions, including chronic diseases, infectious diseases, lifestyle-related conditions (access to services, neighborhood safety, etc.), and intentional and unintentional injuries. The CMNA uses data from this report to compare rates of death and premature death among the Los Angeles County health districts within the Gateway Cities.

# Office of Statewide Health Planning and Development (OSHPD) 2009 Hospitalization and Emergency Department Visit Data

The Office of Statewide Health Planning and Development (OSHPD) routinely collects data on hospital discharges from every licensed acute care hospital in California, excluding federal hospitals, as well as emergency department (ED) visits from hospitals in the state. Hospitalization and ED visit data includes information such as age, gender, race/ethnicity, and diagnosis. Diagnosis for hospitalization and ED visits are based on the International Classification of Disease, Ninth Revision, Clinical Modification (ICD-9-CM).

See Appendix C for additional OSHPD hospitalization and ED visit data for the Gateway Cities health districts. Note that all rates for hospitalization and ED visits presented in this report are reported per 10,000 residents.

## 2009 California Health Interview Survey (CHIS)

The California Health Interview Survey (CHIS) is a statewide health survey that is conducted every 2 years, and focuses on a wide range of health topics. In 2009, CHIS surveyed more than 47,000 adults, more than 12,000 teens and children, and more than 49,000 households in California. CHIS is conducted by the UCLA Center for Health Policy Research, in collaboration with the California Department of Public Health, and Department of Health Care Services.

Throughout the CMNA, CHIS data from 2009 is presented for the Los Angeles County SPAs that intersect the Gateway Cities, in comparison to data from Los Angeles County overall. CHIS does not have data available at the Health District level. While some of the CHIS estimates for the SPAs may be statistically unstable, the data presented in this report provides an indication of issues of potential medical need that should be explored further by planning staff and policy makers.

Additional CHIS data is provided in Appendix D.

# Office of Statewide Health Planning and Development, 2010 Shortage Designation Data

The Office of Statewide Health Planning and Development's Healthcare Workforce Development Division (HWDD) collects, analyzes and publishes data about California's healthcare workforce and health professional training in order to identify areas of the state in which there are shortages of health professionals and service capacity.

Data from the HWDD Shortage Designation Program is presented in this CMNA report in order to highlight shortage areas and populations with high medical need in the Gateway Cities.

# 3. Health, Medical Need, and Quality of Life

Chronic and acute health problems have an impact on quality of life and long-term health. Struggling with poor health increases vulnerability to exposure to adverse environmental, social, economic, and political conditions and circumstances.

Rates of diseases are one of the more apparent measures of the health of a population. Prevalence of diseases or negative health conditions is rarely distributed evenly amongst a population. Certain communities may have a higher risk for disease outcomes due to a variety of factors including income, housing adequacy, access to medical care, stable health insurance, nutrition, employment conditions, parenting resources, neighborhood environmental quality, and community violence and stress.

Patterns of health and disease outcomes often reflect patterns of social and economic circumstances. <sup>2,3</sup> Many people of color experience a wide range of serious health issues at higher rates than do whites, including breast cancer, heart disease, stroke, diabetes, hypertension, respiratory illness, and pain-related problems. On average, African Americans, Native Americans, Pacific Islanders, and some Asian American groups live shorter lives and have poorer health outcomes than whites. According to the Centers for Disease Control and Prevention, nationally, African American men die on average 6.1 years sooner than white men (69.6 vs. 75.7 years), while African American women die 4.3 years sooner than white women (76.5 vs. 80.8 years). People of color are likely to be less wealthy, to have less education, and to live in segregated communities with underfunded schools, insufficient services, poor transportation and housing, and higher levels of exposure to toxic and environmental hazards. <sup>4</sup>

For individuals, income is one of the strongest and most consistent predictors of health and disease in the public health research literature. Nationally, individuals with the lowest average family incomes (\$15,000-\$20,000) are three times more likely to die prematurely as those with higher family incomes (greater than \$70,000). For a number of U.S. cities it has also been shown that every additional \$12,500 in household income buys one year of life expectancy (up to an income of \$150,000). Poorer adults are also three times as likely to have a chronic disease that limits their activity, twice as likely to have diabetes, and nearly 50% more likely to die of heart disease. Additionally, being low-income is a risk factor for low birth weight babies, injuries and violence, and most cancers. Children in low-income families are seven times as likely to be in poor or fair health as compared to high-income families.

<sup>&</sup>lt;sup>2</sup> McGinnis, M., & Williams-Russo P. 2002. Journal of Health Affairs v. 21 (2).

<sup>&</sup>lt;sup>3</sup> California Newsreel. 2008. Backgrounders from the Unnatural Causes Health Equity Database.

<sup>&</sup>lt;sup>4</sup> California Newsreel. 2008. Backgrounders from the Unnatural Causes Health Equity Database.

<sup>&</sup>lt;sup>5</sup> Yen, I., & Bhatia, R. 2002. "How Increasing the Minimum Wage Might Affect the Health Status of San Francisco Residents: A Discussion of the Links Between Income and Health, Working Paper."

<sup>&</sup>lt;sup>6</sup> Yen IH, Bhatia R. 2002. How Increasing the Minimum Wage Might Affect the Health Status of San Francisco Residents: A Discussion of the Links Between Income and Health. Working Paper.

<sup>&</sup>lt;sup>7</sup> Iton, Tony. Neighborworks Conference, March 2, 2011. A Health Equity Focused Model For Building Healthy Communities

<sup>&</sup>lt;sup>8</sup> California Newsreel. 2008. Backgrounders from the Unnatural Causes Health Equity Database.

<sup>&</sup>lt;sup>9</sup> California Newsreel. 2008. Backgrounders from the Unnatural Causes Health Equity Database.

The relationship between income and health is mediated through access to medical care, stable health insurance, nutrition, employment conditions, parenting resources, leisure and recreation, housing adequacy, neighborhood environmental quality, and community violence and stress. <sup>11</sup>

Individuals who live in poor, disadvantaged neighborhoods tend to have inferior health outcomes. <sup>12</sup> One of the reasons for this disparity is that living in a disadvantaged neighborhood reduces the likelihood of having a usual source of healthcare and of obtaining recommended preventive services, while it increases the likelihood of having unmet medical needs. <sup>13</sup> Individuals living in neighborhoods with greater healthcare resources may be more likely to use primary care due to shorter travel distances required to see a provider and greater provider choice. <sup>14</sup> Healthcare resources are not distributed equally among neighborhoods, with areas of greater wealth having greater healthcare resources. <sup>15,16</sup> The types of industries in a community also affect the presence of healthcare resources since certain types of employers are more likely to provide private health insurance coverage, which has higher reimbursement rates than public insurance. <sup>17</sup> Additionally, populations with a greater percentage of the very young or elderly may demand more healthcare since these demographics have greater healthcare needs, drawing more providers to an area. <sup>18</sup>

Primary care is defined as care that gives patients entry into the healthcare system, coordinates healthcare services for patients, provides care to the same patient over time, is comprehensive, and takes into account the patient's societal context outside the healthcare system. <sup>19</sup> The use of this type of healthcare over time improves individual and population health by helping patients prevent and control

<sup>&</sup>lt;sup>10</sup> Yen, I. H., & Syme, S. L. 1999. "The Social Environment and Health: A Discussion of the Epidemiologic Literature." Annual Review of Public Health 20:287-308.

<sup>&</sup>lt;sup>11</sup> Iton, A. 2006. "Tackling the Root Causes of Health Disparities Through Community Capacity Building." In Tackling Health Inequities Through Public Health Practice: A Handbook for Action. Hofrichter R., ed. Washington, DC: The National Association of County & City Health Officials and The Ingham County Health Department 115-136.

<sup>&</sup>lt;sup>12</sup> Prentice, J.C. 2006. "Neighborhood Effects on Primary Care Access in Los Angeles." Social Science & Medicine 62:1291-1303.

<sup>&</sup>lt;sup>13</sup> Kirby, J.B., & Kaneda, T. 2005. "Neighborhood Socioeconomic Disadvantage and Access to Health Care." Journal of Health and Social Behavior 46 (1): 15-31.

Prentice, J.C. 2006. "Neighborhood Effects on Primary Care Access in Los Angeles." Social Science & Medicine 62:1291-1303.

<sup>&</sup>lt;sup>15</sup> Prentice, J.C. 2006. "Neighborhood Effects on Primary Care Access in Los Angeles." Social Science & Medicine 62:1291-1303.

<sup>&</sup>lt;sup>16</sup> Fossett, J.W., Perloff, J.D., Kletke, P.R., & Peterson, J.A. 1992. "Medicaid and Access to Child Health Care in Chicago." Journal of Health Politics, Policy and Law 17(2), 273–298.

<sup>&</sup>lt;sup>17</sup> Prentice, J.C. 2006. "Neighborhood Effects on Primary Care Access in Los Angeles." Social Science & Medicine 62:1291-

<sup>&</sup>lt;sup>18</sup> Prentice, J.C. 2006. "Neighborhood Effects on Primary Care Access in Los Angeles." Social Science & Medicine 62:1291-1303.

<sup>&</sup>lt;sup>19</sup> Prentice, J.C. 2006. "Neighborhood Effects on Primary Care Access in Los Angeles." Social Science & Medicine 62:1291-1303.

illnesses.<sup>20</sup> Research has found that access to primary care can help to mitigate the negative effects of lower socio-economic status (SES) and income inequality on health.<sup>21</sup> Social capital, healthcare resources, and where one lives have been shown to be predictors of an individual's ability to access primary care.<sup>22,23</sup> The difference in ability to access primary care is one of the factors that explains individual-level health disparities between neighborhoods.<sup>24</sup>

The timely use of primary care has a role in preventing morbidity and hospitalizations from a number of chronic diseases, including asthma and diabetes. Research has specifically found that Federally Qualified Health Centers in medically underserved areas can lower preventable hospitalization rates. <sup>25</sup>

Access to health services including preventive care, primary care, and tertiary care often depends on whether a person has health insurance. <sup>26,27,28</sup> Individuals without health insurance frequently forego timely health care, suffer more severe illness, and are more likely to die a premature death than their insured counterparts. Annually nationwide, 18,000 premature deaths are attributable to lack of health coverage. <sup>29</sup> Evidence suggests that death rates among hospitalized patients without health insurance are higher than among patients with insurance. <sup>30</sup> Another study showed that among those without insurance, those who are chronically ill are even less likely than those with acute conditions to get the health care services they need. <sup>31</sup>

<sup>&</sup>lt;sup>20</sup> Prentice, J.C. 2006. "Neighborhood Effects on Primary Care Access in Los Angeles." Social Science & Medicine 62:1291-1303.

<sup>&</sup>lt;sup>21</sup> Prentice, J.C. 2006. "Neighborhood Effects on Primary Care Access in Los Angeles." Social Science & Medicine 62:1291-1303.

<sup>&</sup>lt;sup>22</sup> Kirby, J.B., & Kaneda, T. 2005. "Neighborhood Socioeconomic Disadvantage and Access to Health Care." Journal of Health and Social Behavior 46 (1): 15-31.

<sup>&</sup>lt;sup>23</sup> Prentice, J.C. 2006. "Neighborhood Effects on Primary Care Access in Los Angeles." Social Science & Medicine 62:1291-1303.

<sup>&</sup>lt;sup>24</sup> Prentice, J.C. 2006. "Neighborhood Effects on Primary Care Access in Los Angeles." Social Science & Medicine 62:1291-1303.

<sup>&</sup>lt;sup>25</sup> Epstein A.J. 2001. "The Role of Public Clinics in Preventable Hospitalizations Among Vulnerable Populations." Health Services Research 36(2): 405-20.

<sup>&</sup>lt;sup>26</sup> Centers for Disease Control and Prevention. 1995. "Health Insurance Coverage and Receipt of Preventive Health Services." Morbidity and Mortality Weekly Report 44: 219-225.

<sup>&</sup>lt;sup>27</sup> Weissman, J.S., & Epstein, A.M. 1993. "The Insurance Gap: Does It Make a Difference?." Annual Review of Public Health 14: 243-270.

<sup>&</sup>lt;sup>28</sup> U.S. General Accounting Office (GAO). 1998. "Health Insurance: Coverage Leads to Increased Health Care Access for Children." GAO/HEHS-98-14. Washington, DC: GAO.

<sup>&</sup>lt;sup>29</sup> Institute of Medicine. January 2004. "Insuring America's Health: Principles and Recommendations." Committee on the Consequences of Uninsurance.

<sup>&</sup>lt;sup>30</sup> Reinhardt, U.E. 1994. "Coverage and Access in Health Care Reform." New England Journal of Medicine 330: 1452-1453.

<sup>&</sup>lt;sup>31</sup> Hafner-Eaton, C. 1993. "Physician Utilization Disparities Between the Uninsured and Insured: Comparisons of the Chronically III, Acutely III, and Well Non-Elderly Populations." Journal of the American Medical Association 269: 787-792

Having health insurance coverage is significantly associated with access to medical checkups. <sup>32</sup> Poverty and having a lower income limit access to many important health-enabling resources, including health insurance. 33 Even among higher-income adults, lack of health insurance has been associated with significantly decreased use of recommended health care services. 34 Lack of access to preventive care can lead people to go without care, allowing minor problems to become more urgent medical emergencies.35

Additional barriers to obtaining health care services include a lack of appropriate referrals, travel distance to the provider, communication problems, child care limitations, lack of transportation, lack of time or information, and unavailability of specialists. 36,37,38 Additionally, people with a usual source of health care are more likely than those without a usual source of care to receive a variety of preventive health care services. 39,40

<sup>&</sup>lt;sup>32</sup> Faulkner, L.A., & Schauffler, H.H. 1997. "The Effect of Health Insurance Coverage on the Appropriate Use of Recommended Clinical Preventive Services." American Journal of Preventive Medicine 13: 453-458.

<sup>&</sup>lt;sup>33</sup> 2006. "Tackling Health Inequities Through Public Health Practice: A Handbook for Action." Washington, DC: The National Association of County & City Health Officials and The Ingham County Health Department 115-136.

<sup>&</sup>lt;sup>34</sup> Ross, J. S., Bernheim, S.M., Bradley, E.H., Teng, H.M., & Gallo, W.T. 2007. "Use of Preventive Care By the Working Poor in the United States." Preventive Medicine 44 (3): 254-259

<sup>35</sup> Kushel, M.B., Vittinghoff, E., & Haas, J.S. 2001. "Factors Associated with the Healthcare Utilization of Homeless Persons." Journal of the American Medical Association 285(2): 200-206.

<sup>&</sup>lt;sup>36</sup> Epstein A.J. 2001. "The Role of Public Clinics in Preventable Hospitalizations Among Vulnerable Populations." Health Services Research 36(2): 405-20.

<sup>&</sup>lt;sup>37</sup> U.S. Department of Health and Human Services, 2010. "Healthy People 2010." Office of Disease Prevention and Health Promotion HP 2010 Objective 1-6.

<sup>&</sup>lt;sup>38</sup> Weinick, R.M., Zuvekas, S.H., & Drilea, S.K. 1997. "Access to Health Care—Sources and Barriers, 1996. MEPS Research Findings No. 3. AHCPR Pub. No. 98-0001. Rockville, MD: Agency for Health Care Policy and Research (AHCPR).

<sup>&</sup>lt;sup>39</sup> Moy, E., Bartman, B.A., & Weir, M.R. 1995. "Access to Hypertensive Care: Effects of Income, Insurance, and Source of Care." Archives of Internal Medicine 155(14): 1497-1502.

<sup>&</sup>lt;sup>40</sup> Ettner, S.L. 1996. "The Timing of Preventive Services for Women and Children: The Effect of Having a Usual Source of Care." American Journal of Public Health 86: 1748-1754.

# 4. Demographic Characteristics of the Gateway Cities

The demographic characteristics of a community can help to expose potential risk factors for a variety of health outcomes. For example, as noted above, income is one of the strongest and most consistent predictors of health and disease in the public health research literature, and individuals who live in poor, disadvantaged neighborhoods consistently have inferior health outcomes. <sup>41,42</sup> Age, occupation, housing, unemployment, and commuting patterns have also been shown to be factors that can affect health outcomes.

Below, demographic characteristics of Los Angeles County and the Gateway Cities based on data from the U.S. Census Bureau's 2005-2009 American Community Survey (ACS) are summarized. <sup>43</sup> Additional detail about these findings is presented in Appendix A.

# 4.1 Poverty and Income

The 2008 Census Bureau's ACS indicated that there were high rates of poverty in Los Angeles County, with more than 21% of children in the county living in extreme poverty, and rates of extreme poverty were nearly two and a half times higher for Latinos and African Americans as they were for Whites in the county. More than half (55.4%) of the families living in extreme poverty in 2008 included adults who had worked part or full time during the year. <sup>44</sup> In 2008, an estimated 30% of Los Angeles County's more than 3 million full-time workers earned less than \$25,000 per year—well below the amount needed to support a family. <sup>45</sup>

2005-2009 ACS estimates show that 12 of the 26 Gateway Cities have a higher percentage of individuals living below the poverty level than in Los Angeles County overall. The cities with the highest percentages of individuals living in poverty were Bell Gardens and Huntington Park, where 24% of individuals live below the poverty level.

More than 65% of the Gateway Cities had median household incomes that were below the estimated median household income for Los Angeles County. The lowest median household income of all of the Gateway Cities was in Huntington Park (\$35,340), and the highest was in La Habra Heights (\$129,861).

<sup>&</sup>lt;sup>41</sup> Yen, I., & Bhatia, R. 2002. "How Increasing the Minimum Wage Might Affect the Health Status of San Francisco Residents: A Discussion of the Links Between Income and Health, Working Paper."

<sup>&</sup>lt;sup>42</sup> Prentice, J.C. 2006. "Neighborhood Effects on Primary Care Access in Los Angeles." Social Science & Medicine 62: 1291-1303.

<sup>&</sup>lt;sup>43</sup> Note that the U.S. Census ACS figures represent the average characteristics of population and housing from 2005-2009, and may not reflect recent economic events and trends.

<sup>&</sup>lt;sup>44</sup> Los Angeles Alliance for a New Economy. September, 2009. "Los Angeles on the Edge: An Analysis of Health and Income Data from the U.S. Census Bureau."

<sup>&</sup>lt;sup>45</sup> Los Angeles Alliance for a New Economy. September, 2009. "Los Angeles on the Edge: An Analysis of Health and Income Data from the U.S. Census Bureau."

# 4.1.1 Occupation and Economic Hardship

In 2008, leisure and hospitality services, other services (which includes laundry services, domestic work, and janitorial services) and construction were the industries with the highest proportion of workers living in economic hardship in Los Angeles County. <sup>46</sup> According to the ACS estimates, half of the Gateway Cities are estimated to have higher percentages of working age people employed in service industries compared to the county overall. The city of Hawaiian Gardens has the highest percentage of working age people employed in the service industry (26.8%).

# 4.1.2 Unemployment

Between 2007 and 2009, unemployment in Los Angeles County increased by 7.2%. <sup>47</sup> The percentage of unemployed is higher than U.S. Census estimates for the county overall in 12 out of the 26 Gateway Cities.

## 4.1.3 Age and Education

The median age in Los Angeles County is 33.8 years. Of the Gateway Cities, La Habra Heights has the highest median age (45.4 years), and Cudahy has the lowest (25.4 years).

Nearly 62% of the Gateway Cities have high school graduation rates among adults 25 years and older that are lower than in the county overall. Of the Gateway Cities, Cudahy had the lowest percentage of high school graduates (41.5%).

One trend that stood out from the U.S. Census data for the Gateway Cities is that higher median age and lower population tends to also correlate with higher household income and increased levels of education.

# 4.1.4 Housing Overcrowding

Half of the Gateway Cities are considered to have higher percentages of severe overcrowding (1.51 or more occupants per room) than are found in the county overall. More than 17% of housing units in Huntington Park are considered to be severely overcrowded, the highest percentage in the study area.

#### 4.1.5 Travel Time to Work

The average travel time to work for the population living in the Gateway Cities is very similar to that in Los Angeles County overall, an estimated 29 minutes.

<sup>&</sup>lt;sup>46</sup> Los Angeles Alliance for a New Economy. September, 2009. "Los Angeles on the Edge: An Analysis of Health and Income Data from the U.S. Census Bureau."

<sup>&</sup>lt;sup>47</sup> Los Angeles Alliance for a New Economy. September, 2009. "Los Angeles on the Edge: An Analysis of Health and Income Data from the U.S. Census Bureau."

In all of the Gateway Cities, an overwhelming majority of people commute to work alone (by car, van, or truck). Carpooling was the second most popular mode of commuting, followed by use of public transportation.

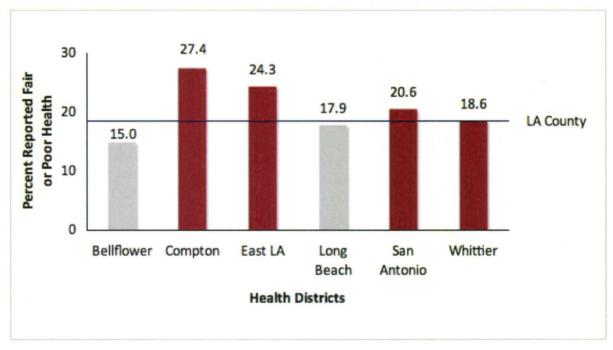
# 5. Existing Conditions of Health and Medical Need in the Gateway Cities

The following section presents data about the current rates and prevalence of health outcomes in the Gateway Cities, and where possible, shows how these outcomes compare to those in the rest of Los Angeles County.

#### 5.1 Self-Rated Health

Results from the 2007 Los Angeles County Health Survey indicate that more than 18% of adults in Los Angeles County reported their health status as being fair or poor. This percentage was higher in the San Antonio Health District (HD 58), Whittier Health District (HD 91), Compton Health District (HD 12) and East LA Health District (HD 16) of the Gateway Cities.

Figure 5-1. Percent of Adults that Reported Fair or Poor Health Status, Gateway Health Districts, 2007



Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

# 5.2 Asthma and Respiratory Illness

#### 5.2.1 Asthma

Asthma is a serious public health problem throughout the world and the most common chronic disease among children. Asthma is defined as a chronic inflammatory disorder of the airways, and causes repeated episodes of wheezing, breathlessness, chest tightness, and nighttime or early morning coughing. Asthma attacks can range in severity from inconvenient to life threatening. Causes of asthma include genetic predisposition, allergies, air pollution—including exposure to tobacco smoke—and possibly viral infections early in life. Taking medicine and avoiding the triggers that can cause an attack can help to control asthma. 49

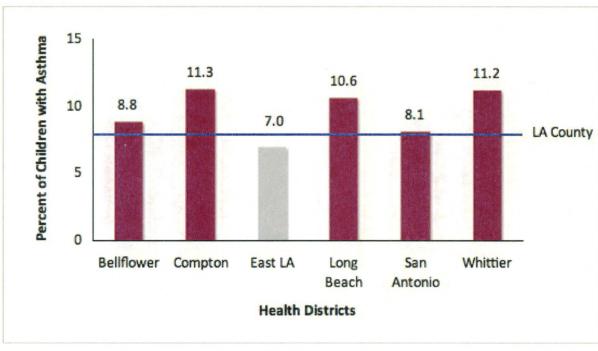


Figure 5-2. Prevalence of Children with Asthma, Gateway Health Districts, 2007

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Apart from the East LA Health District (HD 16), children in the Gateway Cities health districts have a higher prevalence of asthma than Los Angeles County overall. For adults, half of the health districts have a lower prevalence of asthma than the county.

<sup>&</sup>lt;sup>48</sup> Community Action to Fight Asthma, Briefing Kit. Available at http://www.rampasthma.org/wp-content/uploads/2010/04/RAMPFAQWeb.pdf

<sup>&</sup>lt;sup>49</sup> Centers for Disease Control and Prevention

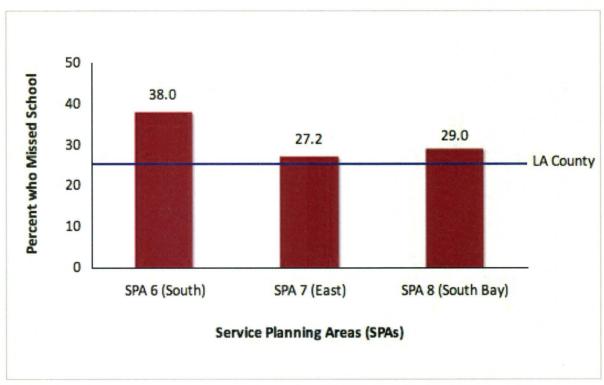
Table 5-1. Adult Asthma Prevalence, 2005

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
6.5%	8.0%	8.2%	2.9%	7.0%	4.1%	4.7%

Source: 2005 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

School age children in Los Angeles County missed an estimated 3.1 days of school in 2007 as a result of asthma. This finding was higher for the Compton Health District (HD 12), Long Beach Health District (HD 40), and Whittier Health District (HD 91), where the estimation was more than 4 days of school missed due to asthma.

Figure 5-3. Percent of Children and Teens who Missed ≥ 1 Day of School Due to Asthma, Gateway Cities Service Planning Areas (SPAs), 2009



Source: 2009 California Health Interview Survey

Results from the 2009 CHIS show that compared to Los Angeles County overall, a higher percentage of children and teens in all of the SPAs that intersect the Gateway Cities have missed more than one school day due to asthma. This survey also found that a higher percentage of people in both SPA 6 and SPA 8 have visited the ED due to asthma compared with the overall percentage in Los Angeles County.

Hospitalizations and ED visits due to asthma in Los Angeles County and in the state of California declined overall between 2000 and 2009; however, asthma hospitalizations and ED visits increased between 2007 and 2009.

Table 5-2. ER Visits Due to Asthma (current asthmatics), 2009

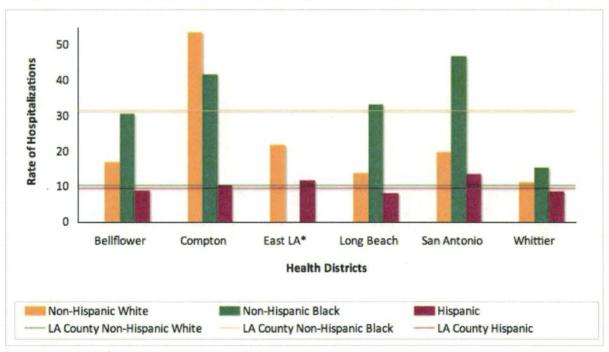
LA County	SPA 6 (South)	SPA 7 (East)	SPA 8 (South Bay)
9.5%	10.4%	7%	15.4%
Source: 2009 California He	2011/0		

Hospitalization data from 2009 shows the following about the Gateway Cities:

#### Asthma Hospitalization and ED Visit Rates by Race

- Asthma hospitalization and ED visit rates for Non-Hispanic Whites were higher in the Gateway Cities than in Los Angeles County.
- In all of the Gateway Cities health districts apart from the Bellflower Health District (HD 6) and Whittier Health District (HD 91) rates for ED visits related to asthma for Non-Hispanic Blacks were higher than those in the county.
- In the health districts of East LA (HD 16), Compton (HD 12), and San Antonio (HD 58) rates of asthma hospitalizations for all categories of race were higher than those in Los Angeles County.

Figure 5-4a. Asthma Hospitalization Rates (per 10,000 residents), Gateway Health Districts, 2009



<sup>\*</sup> No data available for East LA Non-Hispanic Black

Source: OSHPD 2009

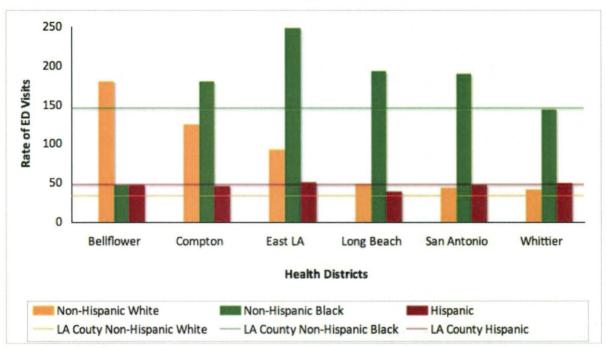


Figure 5-4b. Rates of ED Hospitalizations Due to Asthma (per 10,000 residents), Gateway Health
Districts, 2009

Source: OSHPD 2009

### Asthma Hospitalization and ED Visit Rates by Age and Sex

- Asthma-related hospitalization rates for nearly every age category and for both sexes were higher than county rates in all Gateway Cities health districts except the Whittier Health District (HD 91), where rates were lower than those in the county.
- The Compton Health District (HD 12), Long Beach Health District (HD 40), and San Antonio Health District (HD 58) all had higher asthma hospitalization rates than the county for children ages 0 to 4 years old.
- In all of the Gateway Cities health districts, apart from the Whittier Health District (HD 91), the overall rates of total ED visits for asthma adjusted by age and sex were higher than in the county. In the Compton Health District (HD 12) and Long Beach Health District (HD 40) the rates of total ED visits for asthma for every category of age and for both males and females were higher than in the county.

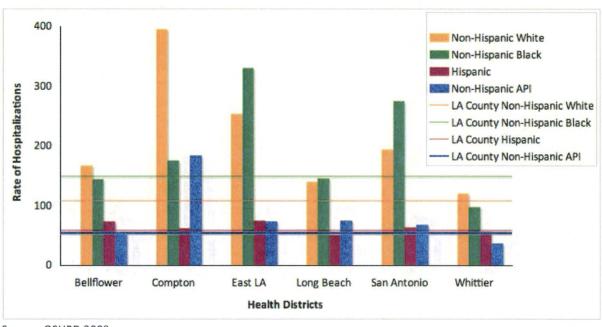
# 5.2.2 Respiratory Illness

In 2009, data for Los Angeles County shows that the race/ethnicity categories of Non-Hispanic Others <sup>50</sup>, Non-Hispanic Blacks, and Non-Hispanic Whites had the highest hospitalization and ED visit rates for respiratory illness.

#### Respiratory Illness Hospitalization and ED Visit Rates by Race

- In the Compton Health District (HD 12), East LA Health District (HD 16), and San Antonio Health District (HD 58) hospitalization and ED visit rates for respiratory illness for all race/ethnicity categories were higher than the rates in Los Angeles County.
- In all of the health districts in the Gateway Cities hospitalization rates for Non-Hispanic Whites were higher than the county.
- For all of the Gateway Cities health districts except for the Whittier Health District (HD 91) ED visit rates for respiratory illness for Non-Hispanic Asian/Pacific Islanders (APIs), Non-Hispanic Blacks, and Non-Hispanic Whites were higher than the corresponding rates in Los Angeles County.

Figure 5-5a. Respiratory Illness Hospitalization Rates (per 10,000 residents), Gateway Health Districts, 2009



Source: OSHPD 2009

<sup>&</sup>lt;sup>50</sup> People who identify as a race other than Hispanic, Non-Hispanic Asian Pacific Islander (API), Non-Hispanic Black, or Non-Hispanic White.

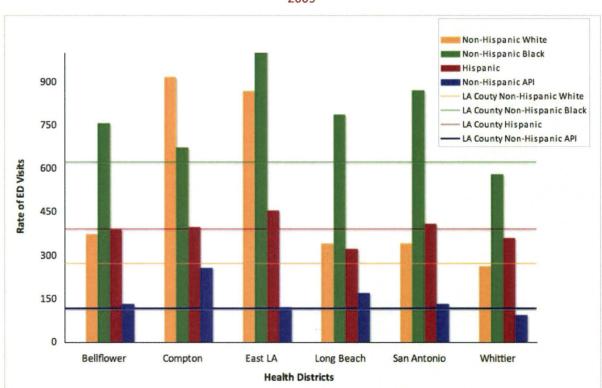


Figure 5-5b. Rates of ED Visits for Respiratory Illness (per 10,000 residents), Gateway Health Districts, 2009

Source: OSHPD 2009

#### 5.3 Diabetes

Diabetes is a disease in which blood glucose levels are above normal. Diabetes is the seventh leading cause of death in the United States. Type 2 diabetes is the most common form of diabetes; according to the California Health Interview Survey, in Los Angeles County, 86% of adult diabetics have type 2 diabetes. In this form of diabetes, either the body does not produce enough insulin or organs do not respond adequately to insulin. Type 2 diabetes is more common in African Americans, Latinos, Native Americans, Asian Americans, Native Hawaiians and other Pacific Islanders, as well as the elderly population. <sup>51,52</sup> Risk factors for diabetes include being overweight, physical inactivity, family history of diabetes, age, pre-diabetes, gestational diabetes or giving birth to a baby weighing 9 pounds or more, and high blood pressure. Uncontrolled diabetes can damage the eyes, kidneys, nerves, heart, and blood vessels, and reduce the body's ability to fight infections. <sup>53</sup>

Diabetes has been the sixth leading cause of death in Los Angeles County for each of the past 10 years, and it has been among the top 10 causes of premature death (i.e., people who die younger than the age

<sup>&</sup>lt;sup>51</sup> Centers for Disease Control and Prevention. Available at http://www.cdc.gov/diabetes/consumer/learn.htm

<sup>&</sup>lt;sup>52</sup> American Diabetes Association. Available at http://www.diabetes.org/diabetes-basics/type-2/

<sup>&</sup>lt;sup>53</sup> Mortality in Los Angeles County 2007, Los Angeles County Department of Public Health.

of their life expectancy are considered to have died prematurely) in the county for 8 of the past 10 years. County-wide in 2007, diabetes was the second leading cause of death for Hispanics. Blacks and Hispanics had higher death rates related to diabetes than Whites and APIs. Data from the 2007 Los Angeles County Health Survey indicates that, apart from the Long Beach Health District (HD 40), the prevalence of diabetes among the adult population in the Gateway Cities is higher than that in Los Angeles County.

Table 5-3. Prevalence of Diabetes among Adults, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Diabetes	8.7%	11.3%	12.4%	11.0%	8.3%	9.5%	12.7%

In 2009, Non-Hispanic Blacks and those in the Non-Hispanic Other category of race and ethnicity as well as those age 65 and older had the highest rates of hospitalizations and ED visits related to diabetes in Los Angeles County.

#### Diabetes Hospitalization and ED Visit Rates by Race, Age, and Sex

- In all of the Gateway Cities health districts diabetes-related hospitalization rates for Non-Hispanic Whites and most other categories of race, ethnicity, age, and sex were higher than rates in Los Angeles County.
- For all of the Gateway Cities health districts diabetes-related ED visit rates were also higher than those in the county in terms of age (for those age 35 and over), sex, and most categories of race and ethnicity.

# 5.4 Hypertension

High blood pressure, or hypertension, increases the risk for heart disease and stroke, the first and third leading causes of death in the United States. About 1 in 3 adults in the U.S. have high blood pressure. <sup>54</sup>

The 2007 Los Angeles County Health Survey shows that nearly one-quarter of the population in Los Angeles County has been diagnosed with hypertension. Apart from the Long Beach Health District (HD 40) and San Antonio (HD 58) Health District, this survey shows that a higher percentage of the population in the Gateway Cities has been diagnosed with hypertension compared to the county. Hypertension diagnoses are particularly high in the Compton Health District (HD 12).

<sup>&</sup>lt;sup>54</sup> Centers for Disease Control and Prevention

Table 5-4. Prevalence of Hypertension among Adults, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hypertension	24.7%	26.4%	32%	28.3%	24%	19.6%	29.1%

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

#### 5.5 Heart Disease and Heart Attacks

As of 2007, Los Angeles County had achieved the overall national Healthy People 2010 target for heart disease. However, in 2007, coronary heart disease, the most common of all heart disease conditions, was still the leading cause of death in Los Angeles County for males and females, all race/ethnic groups, in every health district, and among the population age 45 years and older. Risk factors for coronary heart disease include age, male gender, race, tobacco smoking, high cholesterol, high blood pressure, being overweight, excessive alcohol consumption, previous heart attack or angina, and family history of early heart disease. Numerous epidemiologic studies have also found an association between air pollution and hospitalizations for heart attacks and other forms of heart disease. There are some heart disease risk factors that can't be controlled including age (risk increases for men older than 45 and for women older than 55 years) and family history of early heart disease.

#### 5.5.1 Heart Disease

The tables below show that based on the 2007 Los Angeles County Health Survey, an estimated 7.7% of Los Angeles County's adult population had been diagnosed with heart disease, and that this percentage is higher in the Bellflower (HD 6), East LA (HD 16), and Long Beach (HD 40) Health Districts. The Los Angeles County Health Survey also found that the percentage of people with high cholesterol, one of the risk factors for heart disease, was higher than the county average in the Bellflower (HD-6), Compton (HD 12), and Whittier (HD 91) Health Districts.

<sup>&</sup>lt;sup>55</sup> Mortality in Los Angeles County 2007, Los Angeles County Department of Public Health.

<sup>&</sup>lt;sup>56</sup> Vermylen J., Nemmar A., Nemery B., & Hoylaerts M.F. 2005. "Ambient Air Pollution and Acute Myocardial Infraction." Journal of Thrombosis Haemostasis 3:1955-1961.5.

Von Klot S., Petters A., Aalto P., Bellander T., Berglind N., D'Ippoliti D., Elosua R., Hormann A., Kulmala M., Lanki T., Lowel H., Pekkanen J., Picciotto S., Sunyer J., & Forastiere F. 2005. "Health Effects of Particles on Susceptible Subpopulations (HEAPSS) Study Group." Ambient air pollution is associated with increased risk of hospital cardiac readmission of myocardial infarction survivors in five European cities. 112(20):3073-9.
 6.

<sup>&</sup>lt;sup>58</sup> Pope, C.A. III, Muhlestein, J.B., May, H.T., Renlund, D.G., Anderson, J.L., & Horne, B.D. 2006. "Ischemic Heart Disease Events Triggered by Short-Term Exposure to Fine Particulate Air Pollution. Circulation 114(23): 2443-8.

<sup>&</sup>lt;sup>59</sup> California Department of Public Health, Environmental Health Tracking Program. Data and Information and Heart Attacks, available at http://www.ehib.org/page.jsp?page\_key=12

Table 5-5. Prevalence of Heart Disease and High Cholesterol, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Heart Disease	7.7%	7.9%	7.7%	8.9%	10.3%	6.9%	6.9%
Cholesterol	29.1%	35.1%	30.1%	27.9%	28.2%	23.5%	35.6%

Since 2000, state and county data show there has been a significant decrease in the number of hospitalizations and ED visits due to heart attacks. 60 2009 data for Los Angeles County shows that males, those in the age categories of 35-64 and 65 and older, and those in the racial/ ethnic categories of Non-Hispanic Other, Non-Hispanic White, and Non-Hispanic Black had the highest rates of cardiovascular disease (CVD) hospitalizations, and ED visits. The following describes CVD hospitalizations and ED visits for the Gateway Cities.

#### CVD Hospitalization and ED Visit Rates by Race

- For all health districts in the Gateway Cities, Non-Hispanic Whites had higher rates of CVD hospitalizations and ED visits than they did in the county.
- Rates of CVD hospitalizations were higher than in the county for all race/ethnicity categories in the East LA Health District (HD 16), the San Antonio Health District (HD 58), and for all except Hispanic in the Compton Health District (HD 12).
- In the Compton Health District (HD 12) ED visit rates for CVD for all categories of race and ethnicity except for Hispanic were higher than in the county.

<sup>&</sup>lt;sup>60</sup> California Department of Public Health, Environmental Health Tracking Program, Heart Attack Hospitalizations and Emergency Department Visits.

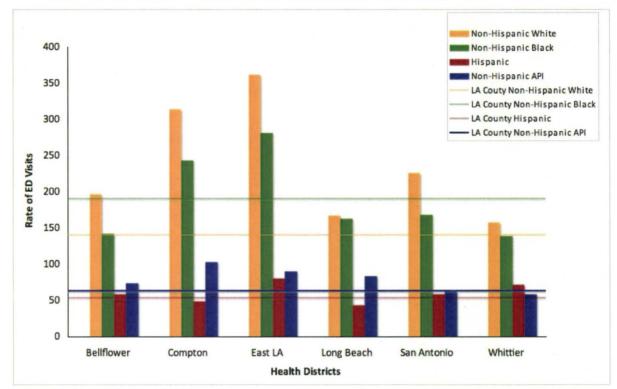


Figure 5-6. Rates of ED Visits for CVD (per 10,000 residents), Gateway Health Districts, 2009

Source: OSHPD 2009

### CVD Hospitalization and ED Visit Rates by Age and Sex

- In the Gateway Cities health districts, for nearly all categories of age and for both sexes, rates of CVD hospitalizations were higher than rates in Los Angeles County.
- In the Gateway Cities health districts, for nearly all categories of age and for both sexes, rates of ED visits for CVD were higher than rates in Los Angeles County, except for in the Whittier Health District (HD 91).

#### 5.5.2 Heart Attacks

In Los Angeles County in 2009, males ages 65 and over, as well as those in the racial/ethnic categories of Non-Hispanic Other, Non-Hispanic White, and Non-Hispanic Black, had the highest rates of hospitalizations and ED visits due to heart attack (myocardial infarction; MI). Hospitalization data also shows the following about the Gateway Cities:

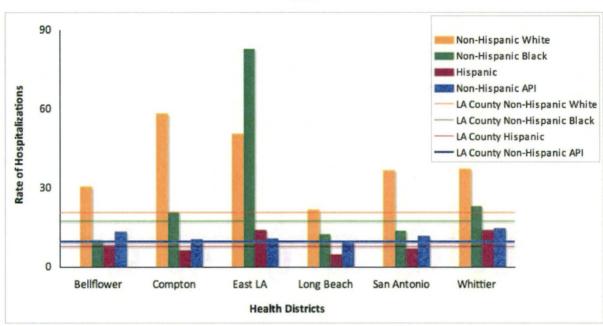


Figure 5-7. Rate of Hospitalizations for Heart Attack (per 10,000 residents), Gateway Health Districts, 2009

Source: OSHPD 2009

- The East LA Health District (HD 16) and Compton Health District (HD 12) had the highest average hospitalization rates for heart attacks among the Gateway Cities health districts for all races and ethnicities.
- For all ages (above 35 years) and both sexes, the Gateway Cities health districts had higher hospitalization and ED visit rates for heart attacks compared to Los Angeles County.
- In all of the Gateway Cities health districts rates for ED visits among Non-Hispanic Whites were higher than in Los Angeles County.

# 5.6 Obesity and Overweight

Overweight and obesity refer to ranges of weight that are greater than what is generally considered healthy for a person's height. The terms also identify ranges of weight that have been shown to increase the likelihood of chronic diseases and other health problems such as heart disease, certain types of cancer, type 2 diabetes, stroke, arthritis, breathing problems, and psychological disorders such as depression. <sup>61,62</sup>

The 2007 Los Angeles County Health Survey found that the percentage of adults who were obese was higher in all of the Gateway City health districts than in Los Angeles County overall. Similarly, the

<sup>&</sup>lt;sup>61</sup> Centers for Disease Control and Prevention

<sup>&</sup>lt;sup>62</sup> U.S. Department of Health and Human Services, Office of the Surgeon General.

percentage of overweight adults in all Gateway City health districts except for the Bellflower (HD 6) and San Antonio (HD 58) Health Districts was higher than the county overall.

Table 5-6. Obesity and Overweight Prevalence in Adults, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Obese	22.2%	24%	34%	25.7%	31.2%	28.9%	27.4%
Overweight	35.9%	35.6%	37%	40.7%	36.9%	35.2%	47.3%

# 5.7 Physical Activity

People of all ages who are physically active are healthier, less likely to develop many chronic diseases, and have better aerobic fitness than those who are physically inactive. Participating in regular physical activity can lead to improved cardiorespiratory (aerobic) fitness and muscular strength, bone health, cardiovascular and metabolic health biomarkers, favorable body composition (percentages of muscle, bone, and fat), and reduced symptoms of depression. <sup>63</sup>

According to the 2007 Los Angeles County Health Survey, approximately 47% of adults in Los Angeles County do not meet recommended guidelines for physical activity, with more than 36% of adults engaging in minimal to no physical activity. Rates of physical activity for adults in the Compton (HD 12), East LA (HD 16), Long Beach (HD 40), San Antonio (HD 58), and Whittier (HD 91) Health Districts are lower than Los Angeles County averages.

<sup>&</sup>lt;sup>63</sup> Centers for Disease Control and Prevention

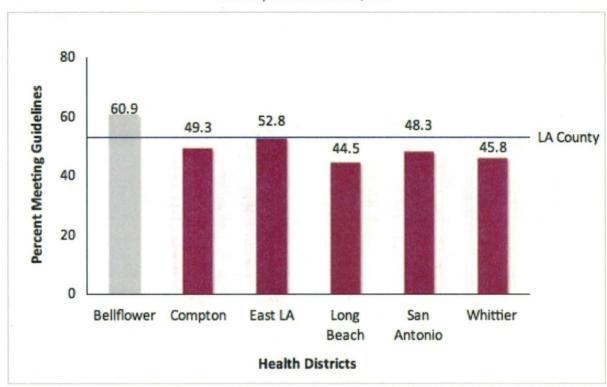


Figure 5-8. Percentage of Adults Who Meet Physical Activity Guidelines, Gateway Health Districts, 2007

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health

For children, the Los Angeles County Health Survey found that over 62% of children in Los Angeles County do not meet recommended guidelines for physical activity. In most of the Gateway Cities health districts, with the exception of the Compton (HD 12) and East LA (HD 16) Health Districts, children are getting more physical activity than the county averages.

Table 5-7. Percentage of Children Who Do Not Meet Physical Activity Guidelines, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
62.4%	51.7%	64.1%	66.3%	59.2%	52%	58.1%

One of the barriers to meeting physical activity guidelines is lack of access to places to be physically active. In Los Angeles County, when surveyed, approximately 16% of parents did not rate their community as a pleasant place to be physically active for themselves and their children. This percentage is similar for most of the Gateway Cities health districts, with the Compton Health District (HD 12) having the highest percentage and the Bellflower Health District (HD 6) having the lowest.

Table 5-8. Adults Who Do Not Feel There Are Safe Places to be Physically Active in Their Neighborhood, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
14.2%	10.6%	38.8%	14.7%	21.8%	20.6%	7.3%

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health

Table 5-9. Parents Who Did Not Rate Their Community as a Pleasant Place for Their Child to be Physically Active, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
16.6%	10.3%	25%	14.9%	15.6%	17.6%	13.1%

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health

#### 5.8 Mental Health

Positive mental health is associated with improved health outcomes. Adequate housing, safe neighborhoods, equitable jobs and wages, quality education, and equity in access to quality health care are all factors that can impact mental health. Only an estimated 17% of adults in the U.S. are considered to be in a state of optimal mental health. The most common type of mental illness is depression, which affects more than 26% of the U.S. adult population. By the year 2020, some estimate that depression will be the second leading cause of disability throughout the world. 64

Research has shown that mental disorders, such as depression, are strongly related to the occurrence, successful treatment, and course of many chronic diseases including diabetes, cancer, cardiovascular disease, asthma, and obesity and many risk behaviors for chronic disease such as, physical inactivity, smoking, excessive drinking, and insufficient sleep. <sup>65</sup>

Seven percent (7%) of the Gateway Cities area is considered to have a shortage of mental health professionals, and this includes more than half (65%) of the city of Compton. (See Mental Health HPSA on page 31.)

The 2009 California Health Interview Survey shows that more than 10% of adults in Los Angeles County have visited a doctor in the past year for mental, emotional, alcohol, or drug related problems. The 2007 Los Angeles County Health Survey found that more than 13% of the adult population of Los Angeles County has been diagnosed with depression, and that this percentage was higher in the East LA (HD 16), Long Beach (HD40), San Antonio (HD58), and Whittier (HD 91) Health Districts.

<sup>&</sup>lt;sup>64</sup> Centers for Disease control and Prevention. Available at http://www.cdc.gov/mentalhealth/basics.htm

<sup>&</sup>lt;sup>65</sup> Centers for Disease control and Prevention. Available at http://www.cdc.gov/mentalhealth/basics.htm

In the Bellflower (HD 6), Compton (HD 12), and San Antonio (HD 58) Health Districts, the percentage of people at risk for serious mental illness was higher than in Los Angeles County overall.

Table 5-10. Adult Depression, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Depression	13.6%	10.7%	12.7%	15.2%	17%	14.2%	14.5%

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Table 5-11. Adults at Risk for Serious Mental Illness, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
4.7%	7.8%	7.6%	-	3.2%	6.1%	2.5%

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health

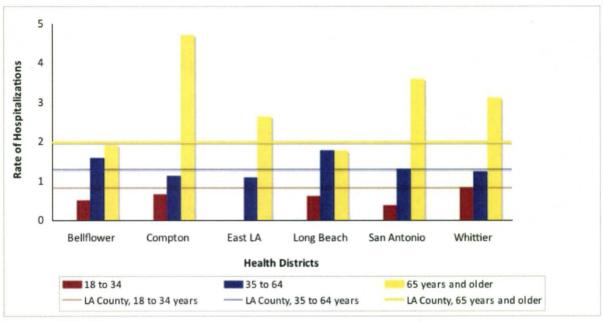
#### Mental Health Hospitalizations and ED Visit Rates by Race, Age, and Sex

In 2009, those in Los Angeles County who were 65 years and older, females, and those in the racial/ethnic category of Non-Hispanic Other had the highest rate of hospitalization related to depression. Non-Hispanic Whites and Non-Hispanic Blacks also had high rates of hospitalization and ED visits related to depression. Rates of ED visits related to depression were significantly higher than hospitalization rates. The age group with the highest rate of ED visits related to depression was 18 to 34 years.

Hospitalization data from 2009 shows the following about depression-related hospitalization and ED visits in the Gateway Cities:

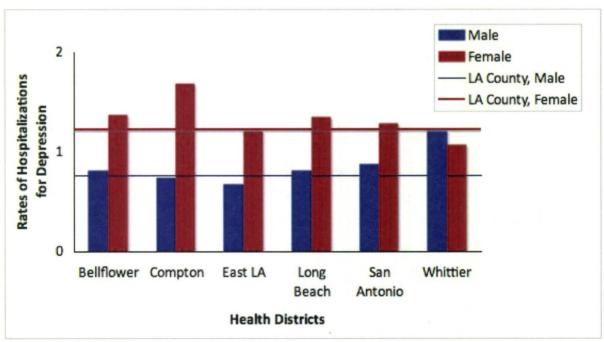
- In the Gateway Cities, apart from the East LA Health District (HD 16), all categories of age and sex had higher rates of hospitalizations related to depression than in Los Angeles County overall.
- The East LA Health District (HD 16), however, has consistently higher than county rates of ED visits related to depression, for all races and ethnicities as well as age and sex categories.
- Apart from the Whittier Health District (HD 91), for all ages and both sexes all of the Gateway Cities health districts have higher than county rates of ED visits related to depression.

Figure 5-9a. Rates of Hospitalization Related to Depression (per 10,000 residents), by Age, Gateway Health Districts, 2009



Source: OSHPD 2009

Figure 5-9b. Rates of Hospitalization (per 10,000 residents) Related to Depression, by Sex, Gateway Health Districts, 2009



## 5.9 Activity Limitation and Unhealthy Days Due to Physical or Mental Health

The 2007 Los Angeles County Health Survey found that, on average, there were 2.1 days per month where an adult's activities were limited due to poor physical or mental health. Half of the health districts in the Gateway Cities area reported higher than County average activity limitation days for adults. The number of mental or physical "Unhealthy Days" reported by adults in the Gateway Cities was close to the Los Angeles County average, although this number was higher for the Long Beach Health District (HD 40).

Table 5-12. Activity Limitation Days for Adults, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
2.1	1.8	3.0	1.3	1.9	2.7	2.2

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Table 5-13. Adult Unhealthy Days, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Unhealthy Days	5.4 days	5.2 days	5.3 days	5.3 days	7 days	5.1 days	5 days

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

## 5.10 Hospitalizations

Significant disparities in quality and access to care among racial and ethnic groups continue to persist in California. Despite trends that show a reduction in these disparities throughout the decade, the rate at which people in California are hospitalized is very different for different racial and ethnic groups. For every 1,000 people in the state, there are 130 hospitalizations for Blacks and 110 for Whites. The rates are much lower for Hispanics (86), Asian or Pacific Islanders (67)<sup>66</sup>, and Native Americans (39). However, rates for Native Americans in particular are suspected to be statistically biased due to significant undercounting. Preventable hospitalization rates from 2000 to 2007 were consistently higher for Blacks, especially in outpatient care, while Hispanics showed the greatest reduction in disparities compared with other racial groups during this period.<sup>67</sup>

<sup>&</sup>lt;sup>66</sup> In OSHPD data, Asian/Pacific Islander patients are combined into a single group. However, this methodological homogeneity may obscure variations in health status and healthcare utilization across the various Asian/Pacific Islander populations and do not reflect expected differences in language and cultural practices.

<sup>&</sup>lt;sup>67</sup> Office of Statewide Health Planning and Development. Racial and Ethnic Disparities in Healthcare in California. California Fact Book. Winter 2010

The most significant disparities for hospitalizations are seen in outpatient settings, and not for hospital inpatients, suggesting that once patients are admitted as inpatients to a hospital, their outcomes are relatively similar across race or ethnic groups. High racial and ethnic disparity rates for outpatient care may be attributable to poor access to care or to the quality of outpatient care, a combination of both factors, or to a high prevalence of disease or health conditions among a specific population. <sup>68</sup>

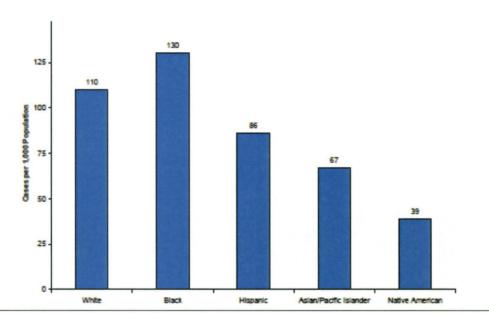


Figure 5-10. Hospitalizations per 1,000 Population by Race and Ethnicity, California, 2007

Source: Office of Statewide Health Planning and Development. Racial and Ethnic Disparities in Healthcare in California. California Fact Book. Winter 2010

## 5.10.1 2009 Hospitalizations and ED Visits in the Gateway Cities

The following tables show rates of hospitalization and ED visits by race and by age and sex for the Gateway City health districts in comparison to Los Angeles County, for 2009. Additional detail about hospitalization and ED visit data is presented in Appendix C.

The tables below show the following about hospitalization and ED visits in the Gateway Cities:

#### **Hospitalization Rates by Race**

In all of the Gateway Cities health districts rates of hospitalization for Non-Hispanic Whites were higher in 2009 than those in Los Angeles County.

<sup>&</sup>lt;sup>68</sup> Office of Statewide Health Planning and Development. Racial and Ethnic Disparities in Healthcare in California. California Fact Book, Winter 2010

- In the Compton Health District (HD 12), East LA Health District (HD 16), and San Antonio Health District (HD 58) rates of hospitalizations for all race and ethnicity categories were higher than those in Los Angeles County.
- In the Whittier Health District (HD 91), for all race/ ethnicities apart from Non-Hispanic White, hospitalization rates were lower than countywide rates.

#### **ED Visit Rates by Race**

- For all Gateway Cities health districts rates of ED visits among Hispanics were higher than in the county.
- In all of the Gateway City health districts except for the Whittier Health District (HD 91) rates of ED visits for Non-Hispanic API, Non-Hispanic Blacks, and Non-Hispanic Whites were higher than in the county.

#### Hospitalization Rates by Age and Sex

■ For all of the Gateway Cities health districts except the Whittier Health District (HD 91), age-adjusted rates for the total number of hospitalizations (by age and sex) were higher than in Los Angeles County.

#### **ED Visit Rates by Age and Sex**

- For all of the Gateway Cities health districts except for the Whittier Health District (HD 91), ageadjusted rates for the total number of ED visits (for age and sex) were higher than those in the county.
- In the Compton Health District (HD 12) rates of ED visits for all ages and both sexes were higher than in Los Angeles County.
- For all of the Gateway Cities health districts rates of ED visits for children ages 5 to 17 were higher than in the county.

Table 5-14. Crude Rates (per 10,000 residents) for All Hospitalizations for Gateway Cities Health
Districts by Race and Ethnicity

Race	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	882.72	951.09	985.52	1060.61	843.69	901.18	839.34
Non-Hispanic API	684.3	697.68	1150.29	851.12	897.47	699.82	587.94
Non-Hispanic Black	1640.53	1570.85	1834.7	2798.01	1732.6	2228.76	1588.57
Non-Hispanic Other	2182.91	1424.34	3423.25	2511.76	761.59	3038	1029.99
Non-Hispanic White	1282.19	1502.61	4013.81	3109.98	1671.11	1895.48	1338.68

Table 5-15. Age-Adjusted Rates (per 10,000 residents) for All Hospitalizations for Gateway Cities
Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	2311.95	2058.04	2222.7	2143	2027.45	1915.12	1634.12
5 to 17 years	196.82	233.61	242.09	237.8	232.77	216.83	174.37
18 to 34 years	844.45	779.75	1007.42	826.85	801	754.86	651.84
35 to 64 years	838.62	970.97	1441.47	959.39	1171.86	909.57	792.63
65 years and over	3003.73	3499.48	4602.62	3764.2	3408.07	4077.36	2824.68
Female	1225.78	1292.19	1738.14	1391.54	1374.45	1362	1045.4
Male	970.34	1083.94	1409.49	1078.64	1135.71	1072.28	882.75
Total	1094.43	1182.44	1568.46	1228.98	1250.79	1213.04	958.48

Table 5-16. Crude Rates (per 10,000 residents) for All ED Visits for Gateway Cities Health Districts by Race and Ethnicity

Race	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	2619.06	2728.75	2773.77	3012.68	2459.65	2622.87	2641.8
Non-Hispanic API	1071.45	1195.25	1616.86	1268.19	1447.01	1116.95	927.44
Non-Hispanic Black	4988.35	5378.73	5288.76	10976.82	6166.83	6517.56	4358.91
Non-Hispanic Other	7908.93	4741.94	12939.38	9200.38	3142.77	9437.82	2815.88
Non-Hispanic White	2841.87	3859.56	8488.1	7693.74	3686	3829.89	2763.86

Table 5-17. Age-Adjusted Rates (per 10,000 residents) for All ED Visits for Gateway Cities Health
Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	5171.65	4446.07	5555.94	5517.22	4199.17	4774.03	4179.78
5 to 17 years	1897.34	2000.08	2165.42	2189.54	1960.16	1986.77	1904.82
18 to 34 years	2822.89	2581.93	3161.75	2592.69	2753.94	2270.02	2326.03
35 to 64 years	2346.88	2655.38	3851.1	2916.68	3353.13	2557.84	2238.08
65 years and over	4291.14	5050.65	6927.76	5652.67	4775.81	5965.03	4217.76
Female	2988.87	3123.27	4235.53	3495.85	3416.02	3235.61	2757.77
Male	2638.35	2758.55	3516.74	2955.05	2965.95	2686.63	2402.58
Total	2813.16	2941.34	3880.53	3230.22	3190.19	2967.44	2580

# 5.11 Mortality and Premature Mortality

## 5.11.1 Mortality

From 1999 to 2007, there has been no change in the ranking of the six leading causes of death in Los Angeles County. Coronary heart disease has been the leading cause, followed by stroke, lung cancer, emphysema/chronic obstructive pulmonary disease (COPD), pneumonia/influenza, and diabetes. However, from 1998 through 2007, the overall death rate in Los Angeles County decreased by 22%, from 797 to 624 deaths per 100,000 people. Over the last 10 years in particular, the County has experienced significant declines in mortality for many specific causes of death. For example, there has been a:

- 38% decline in the death rate from coronary heart disease;
- 35% decline in the death rate from stroke; and a

23% decline in the death rate from lung cancer.

These trends, however, do not reveal the existing geographic, gender, and racial/ethnic disparities in patterns of death. For example, for 11 of the 15 leading causes of death (and premature death) in Los Angeles County, the highest death rates were among black males, and the largest overall increase in deaths from unintentional alcohol poisoning in 2007 were among Hispanic men. Mortality and premature mortality data for each of the health districts listed below demonstrate some of the disparities that currently exist in the Gateway Cities.

Table 5-18. Leading Causes of Death by Health District of Residence in Los Angeles County, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
<b>#1</b> cause of deaths	Coronary Heart Disease	Coronary Heart Disease	Coronary Heart Disease	Coronary Heart Disease	Coronary Heart Disease	Coronary Heart Disease	Coronary Heart Disease
<b>#2</b> cause of deaths	Stroke	Emphysema/ COPD	Stroke	Stroke	Emphysema/ COPD	Stroke	Stroke
#3 cause of deaths	Lung Cancer	Stroke	Lung Cancer	Diabetes	Lung Cancer	Diabetes	Lung Cancer
#4 cause of deaths	Emphysema/ COPD	Lung Cancer	Homicide	Liver Disease	Stroke	Emphysema/ COPD	Emphysema/ COPD
<b>#5</b> cause of deaths	Pneumonia/ influenza	Diabetes	Diabetes	Lung Cancer	Pneumonia/ influenza	Lung Cancer	Diabetes

## 5.11.2 Premature Mortality

People who die younger than the age of their life expectancy are considered to have died prematurely. For example, a person who is expected to live to 75 years of age but dies at age 63 has lost 12 years of expected life, while a person who lives to age 80 will have exceeded life expectancy and not lost any years of expected life. The following data is based on calculations of the years of expected life that were lost for each cause of death in Los Angeles County. 69

<sup>&</sup>lt;sup>69</sup> Mortality in Los Angeles County 2007, Los Angeles County Department of Public Health.

Table 5-19. Leading Causes of Premature Death by Health District of Residence in Los Angeles County, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
#1 cause of deaths	Coronary Heart Disease	Coronary Heart Disease	Homicide	Coronary Heart Disease	Coronary Heart Disease	Homicide	Coronary Heart Disease
#2 cause of deaths	Homicide	Motor Vehicle Crash	Coronary Heart Disease	Liver Disease	Homicide	Coronary Heart Disease	Motor Vehicle Crash
#3 cause of deaths	Motor Vehicle Crash	Homicide	Motor Vehicle Crash	Motor Vehicle Crash	Motor Vehicle Crash	Motor Vehicle Crash	Lung Cancer
#4 cause of deaths	Drug Overdose	Suicide	Stroke	Homicide	HIV	Liver Disease	Homicide
#5 cause of deaths	Liver Disease	Lung Cancer	Lung Cancer	Stroke	Drug Overdose	Drug Overdose	Liver Disease
Source: Mo	ortality in Los Ar	ngeles County 2	007, Los Ang	geles County [	Department of F	Public Health.	

In 2007, 45% of all deaths in Los Angeles County were among persons less than 75 years of age. Coronary heart disease, homicide, and motor vehicle crashes have been the three leading causes of premature death since 1998. The following are some of the findings about premature death from the 2007 Los Angeles County Department of Public Health's "Mortality in Los Angeles County" report. 70

- In 2007, homicide was first-leading cause of premature death and the third-leading cause of death for Hispanic and black males.
- Intimate partner violence, poor access to quality education, lack of employment opportunities, youths with excessive unstructured free time, gang affiliation, alcohol and substance abuse, witnessing and experiencing violence, and access to firearms have all been identified as risk factors related to homicide.
- In 2007, motor vehicle crashes were the leading cause of death for children aged 1 to 14 years, and the second-leading cause of premature death for persons aged 15 to 44 years.
- For the past 10 years, liver disease has been a leading cause of premature death in Los Angeles County. Death rates from liver disease continue to be higher for men than for women, and among the highest for Hispanic men.
- Sustained heavy alcohol consumption is the leading cause of cirrhosis, or scarring of the liver. Chronic hepatitis also causes liver damage. Both viral infections as well as non-viral causes such as autoimmune diseases, alcoholism, and exposure to certain drugs or environmental toxins can lead to these two types of liver disease.

<sup>&</sup>lt;sup>70</sup> Mortality in Los Angeles County 2007, Los Angeles County Department of Public Health.

- In 2007, human immunodeficiency virus (HIV) was the fourth-leading cause of premature death for black males and the second-leading cause of death for black males aged 25 to 44 years.
- For the Long Beach Health District in particular, HIV remains an important cause of premature death.

The figure below shows that half of the health districts in the Gateway Cities have higher death rates than that in Los Angeles County. The Long Beach (HD 40) and Compton (HD 12) Health Districts are among the five health districts in the county with the highest overall death rates.

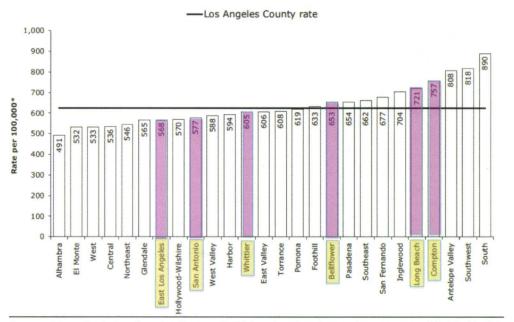


Figure 5-11. Death Rates by All Causes of Death, by Health District of Residence

Source: Mortality in Los Angeles County 2007, Los Angeles County Department of Public Health

## 5.12 Health Professional Shortage Areas (HPSA)

The federal Health Professional Shortage Area (HPSA) designation identifies areas having a shortage of healthcare providers. HPSA designation is based on health practitioner to population ratios and the presence of barriers to accessing health care services, such as travel distance. Because obtaining health care may be difficult as a result of short supply, an area that is designated as a HPSA is eligible to qualify for additional funding from California and federal entities including for Medicare reimbursement, education loan repayment, and certain training programs. Below, designated HPSA's within the bounds of the Gateway Cities are described and mapped.

## 5.12.1 Health Professional Shortage Area (HPSA) for Primary Care

A Primary Care HPSA is a designated geographic area with a shortage of primary care providers/physicians.

■ Thirteen percent (13%) of the Gateway Cities area is considered to be within a Primary Care HPSA, compared to Los Angeles County overall, where 11% of the total area is considered to be a Primary Care HPSA.

Nearly all of the cities of Cudahy, Vernon (which has a very small population), and Huntington Park, and more than half of the cities of Bell, Signal Hill, and Maywood are within Primary Care HPSAs. Only small areas of the cities of Commerce, Compton, and Lynwood fall within a Primary Care HPSA.

The table below describes the proportion of each of the Gateway Cities that is considered to be a Primary Care HPSA.

Table 5-20. Proportion of the Gateway Cities Within a Primary Care HPSA

Bell	69%
Commerce	1%
Compton	5%
Cudahy	97%
Huntington Park	87%
Long Beach	20%
Lynwood	2%
Maywood	57%
Signal Hill	52%
South Gate	35%
Vernon	96%

Source: California Office of Statewide Health Planning and Development, Administrative Services, Health Information, and Workforce Development Divisions. July, 2010.

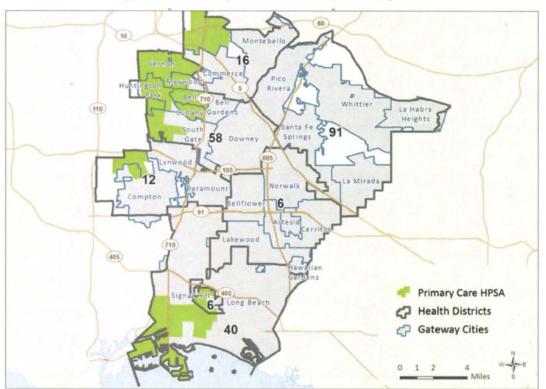


Figure 5-12. Primary Care HPSAs in the Gateway Cities

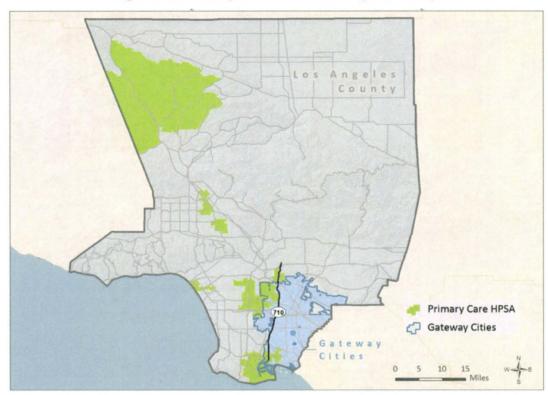


Figure 5-13. Primary Care HPSAs in Los Angeles County

# 5.12.2 Health Professional Shortage Area (HPSA) for Mental Health

A Mental Health HPSA is a designated geographic area with a shortage of mental health providers including psychiatrists and mental health professionals.

- Seven percent (7%) of the Gateway Cities area is considered to be within a Health Professional Shortage Area for Mental Health, compared to Los Angeles County, where only 0.53% of the area is considered to be a Mental Health HPSA.
- More than half of the city of Compton is considered to be a shortage area for mental health professionals.

The table below describes the specific Gateway Cities that include a Mental Health HPSA.

Table 5-21. Proportion of the Gateway Cities Within a Mental Health HPSA

Compton	65%	
Long Beach	14%	
Lynwood	1%	
Paramount	1%	

Source: California Office of Statewide Health Planning and Development, Administrative Services, Health Information, and Workforce Development Divisions. July, 2010.

Montebello

Vernon

16

Hubtington Maywood Commerce Rivers
Park Belicing Bell
Gudahy Gardens
South
Gate 58 Downey
Springs

Santa Fe
Springs

South
Gate 58 Downey
Springs

La Mirada

Compless

Mental Health HPSA
Health Districts
Gateway Cities

40

0 1 2 4

Miles 8

Figure 5-14. Mental Health HPSA in the Gateway Cities

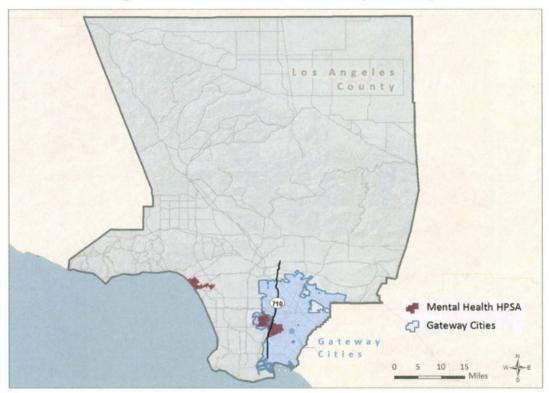


Figure 5-15. Mental Health HPSA in Los Angeles County

# 5.12.3 Health Professional Shortage Area (HPSA) for Dental

A Dental HPSA is decided on the basis of availability of dentists and dental auxiliaries.

Only very small portions of two of the Gateway Cities include a Dental HPSA, and overall, 0.22% of Los Angeles County is considered to be a Dental HPSA.

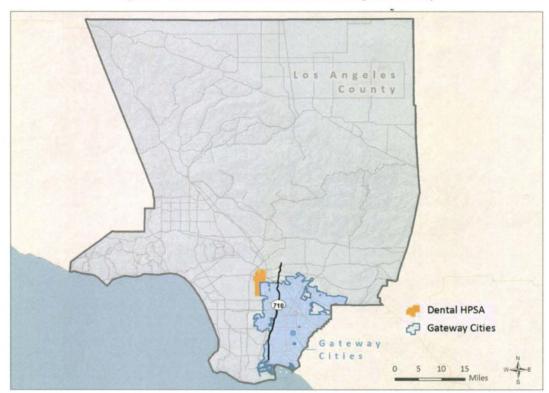


Figure 5-16. Dental Health HPSA in Los Angeles County

Nineteen percent (19%) of the Gateway Cities are covered by any of the three HPSAs (Primary Care, Mental Health, and Dental). The three areas in the Gateway Cities do not overlap; however, all three are within cities located on the western edge of the Gateway Cities.

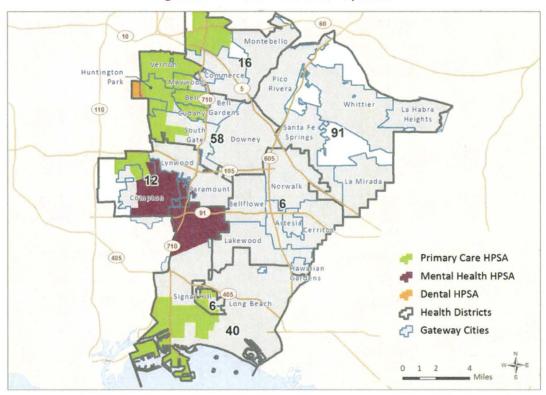


Figure 5-17. HPSAs in the Gateway Cities

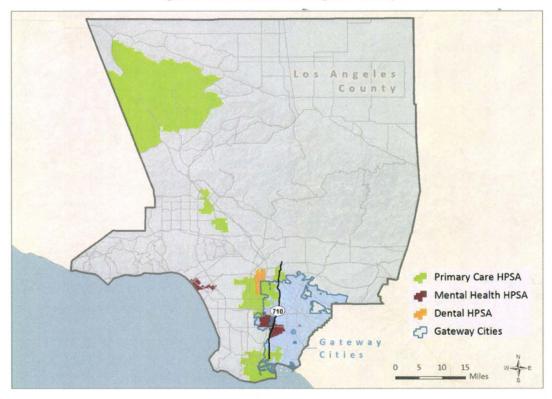


Figure 5-18. HPSAs in Los Angeles County

# 5.13 Medically Underserved Areas (MUA) and Medically Underserved Populations (MUP)

A Medically Underserved Area (MUA) and/or a Medically Underserved Population (MUP) is a federal designation based on demographic characteristics of an area that includes: (1) percentage of population below 100% poverty level; (2) percentage of population age 65 and over; (3) infant mortality rate; and (4) number of primary care physicians per capita. The designation is used for federal grant eligibility to enhance access to primary healthcare. Eligibility promotes development of community health centers, migrant health centers, federally qualified health centers, and rural health clinics.

## 5.13.1 Medically Underserved Areas

Nineteen percent (19%) of the Gateway Cities area is considered to be a MUA. Nearly all of the cities of Vernon (which has a very small population) and Lynwood, and more than half of the cities of Compton, Cudahy, and Bell Gardens are considered to be MUAs. Similarly to the findings above for HPSAs, these areas are all on the western side of the Gateway Cities.

Table 5-22. Proportion of the Gateway Cities Considered to be Medically Underserved

Bell	33%
Bell Gardens	51%
Commerce	20%
Compton	61%
Cudahy	62%
Huntington Park	13%
Long Beach	31%
Lynwood	79%
Maywood	45%
Montebello	34%
Paramount	22%
Pico Rivera	1%
Vernon	95%

Source: California Office of Statewide Health Planning and Development, Administrative Services, Health Information, and Workforce Development Divisions. June 2010.

Montebello

Wernon

16

Hubiangton Maywool Commerce
Rivera

Santa Fe
South Gate
Springs

South Gate
Springs

Norwalk
La Mirada
Regista

La Mirada

Regista

Medically Underserved
Area

Health Districts

Gateway Cities

O 1 2 4

Miles

Miles

Miles

Montebello

Whittier
La Habra
Heights

Medically Underserved
Area

Health Districts

Gateway Cities

Figure 5-19. Medically Underserved Areas in the Gateway Cities

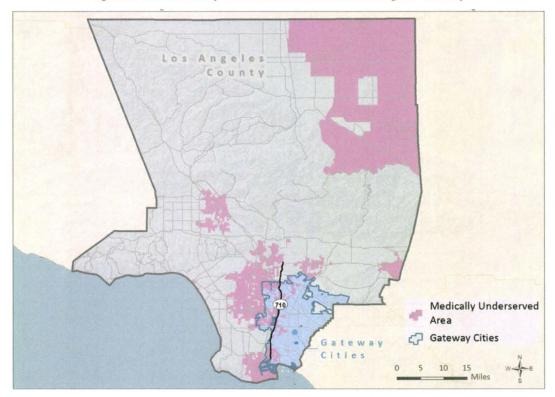


Figure 5-20. Medically Underserved Areas in Los Angeles County

## 5.13.2 Medically Underserved Populations

Only two percent (2%) of the Gateway Cities area, located in South Gate and Downey, is considered to have MUPs. In Los Angeles County overall, 0.48% of the population is considered to be medically underserved.

Table 5-23. Medically Underserved Populations in the Gateway Cities

South Gate	62%
Downey	3%
	Statewide Health Planning and Development, alth Information, and Workforce Development
Divisions, June 2010.	

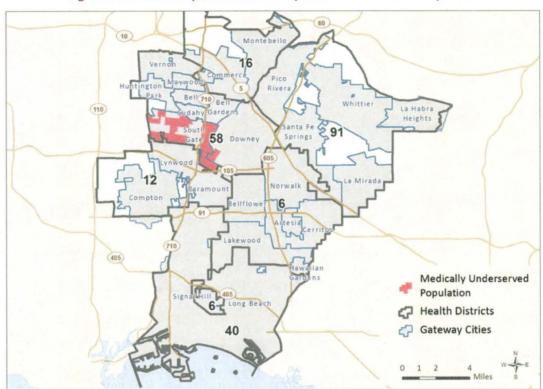


Figure 5-21. Medically Underserved Populations in the Gateway Cities

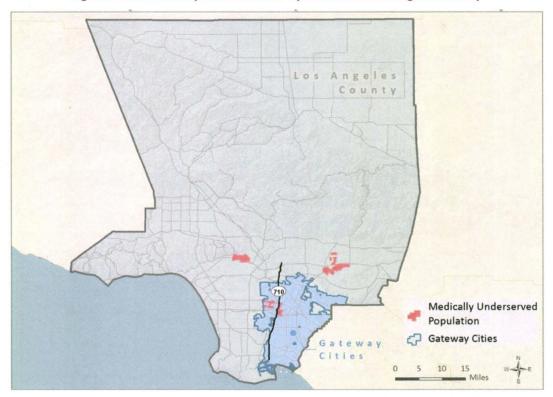


Figure 5-22. Medically Underserved Populations in Los Angeles County

# 5.14 Location of Healthcare Facilities in the Gateway Cities

The type of health services that are located in a community can ultimately impact the health outcomes of local residents. The presence of medical facilities can help to provide residents with the resources they need to make healthy choices in their lives. The location of these resources and their proximity to where people live help determine whether people use them, how often, and how they access them (e.g., by walking or driving). In particular, research has found that Federally Qualified Health Centers in MUAs can lower preventable hospitalization rates.<sup>71</sup>

The following table describes the type of healthcare facilities that are located in each of the Gateway Cities health districts. The Compton Health District (HD 12) has the fewest number of primary care and specialty care clinics, as well as hospitals per capita (per 100,000 people). The Bellflower Health District (HD 6) has the higher number of specialty care clinics and hospitals, and the East LA Health District (HD 16) has the highest number of primary care clinics per 100,000 people.

Fig. 2001. "The Role of Public Clinics in Preventable Hospitalizations Among Vulnerable Populations." Health Services Research 36(2):405-20.

<sup>&</sup>lt;sup>72</sup> Note that hospitals and disproportionate share hospitals are twice represented, both in the "Hospitals" row as well as the "Disproportionate Share Hospitals" row.

Table 5-24. Distribution of Healthcare Facilities in the Gateway Cities

	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
HD Population (2009)	370, 281	289,419	221,857	495,759	453,361	336,956
Primary Care Clinics	7	5	16	19	12	9
Specialty Care Clinics	110	28	27	98	47	54
Hospitals	6	2	3	8	4	4
Disproportionate Share Hospitals <sup>73</sup>	1	2.	3	3	2	1

Source: California Office of Statewide Health Planning and Development, Administrative Services, Health Information, and Workforce Development Divisions. November, 2010. July 1, 2005-2009 Population Estimates, prepared by Walter R. McDonald & Associates, Inc. (WRMA) for Los Angeles County ISD.

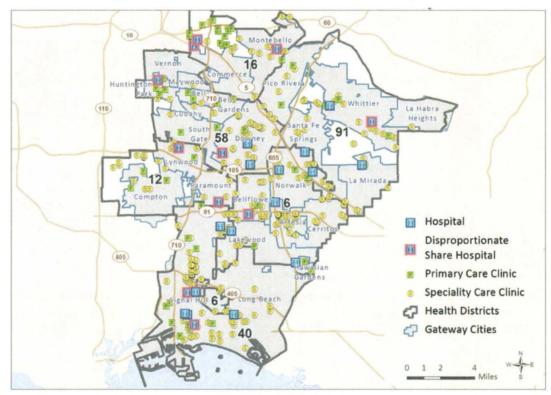


Figure 5-23. Healthcare Facilities Within the Gateway Cities

#### 5.15 Access to Health Care Services

Data from the 2007 Los Angeles County Health Survey and the 2009 California Health Interview Survey provides additional insight into the ability of populations in the Gateway Cities to access health care

<sup>&</sup>lt;sup>73</sup> Disproportionate share hospitals are those that that serve a significantly disproportionate number of low-income patients

services. Below are some highlights from this data, please see Appendix B and Appendix D for additional detail about this data.

Results from the 2009 California Health Interview Survey show that compared to Los Angeles County, a higher percentage of the population living in SPA 6 and SPA 7 have not visited a doctor in the past year.

Table 5-25. Adults, Teens, and Children Who Have Not Visited a Doctor in the Past Year, 2009

22.4% 13.7%
/

According to the 2007 Los Angeles County Health Survey, nearly half of adults in the county found the availability of quality, affordable healthcare in their community was fair to poor. In the Whittier Health District (HD 91) this percentage was over 70%, and in the Compton Health District (HD 12) this percentage was over 80%.

Table 5-26. Fair/ Poor Availability of Quality, Affordable Healthcare Services in Community, 2007

LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
46.4%	39%	84.4%	42.9%	45.3%	38.2%	71.6%
	os Angeles Coun		; Office of Health	n Assessment and	d Epidemiology, I	Los Angeles

More than 25% of the adult population and nearly 15% of children in Los Angeles County had difficulty accessing medical care, according to the Los Angeles County Health Survey. These percentages were higher for the Compton (HD 12), East LA (HD 16), and San Antonio (HD 58) Health Districts. The percentage of parents who had difficulty accessing medical care for their children due to transportation problems in the Compton Health District (HD 12) was twice that in the county overall.

The tables of data below from the Los Angeles County Health Survey show that, compared to Los Angeles County, a higher percentage of the adult population in the East LA (HD 16) and San Antonio (HD 58) Health Districts do not have a regular source of care. Only the San Antonio (HD 58) and Whittier (HD 91) Health Districts have higher than county estimates for children who do not have a regular source of care.

Table 5-27. Adults Who Do Not Have a Regular Source of Health Care, 2007

LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
19.2%	17.0%	14.9%	22.4%	14%	23.1%	15.5%
Source: 20	007 Los Angeles (	County Health Su	over Office of He	alth Assessment a	nd Enidomiology	Los Angolos

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Table 5-28. Parents Who Reported No Regular Source of Health Care for Their Children, 2007

LA	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
County	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
7.4%	6.2%	6.6%	4.7%	7.3%	9.1%	7.7%

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

The California Health Interview Survey found that a higher percentage of people with a regular source of care go to a doctor's office, Kaiser, or another health maintenance organization (HMO) than to a community or government clinic or hospital.

Table 5-29. Usual Source of Health Care for Adults, 2009

<b>与一种,这个种类的</b>	LA County	SPA 6 (South)	SPA 7 (East)	SPA 8 (South Bay)
Doctor's Office/ Kaiser/ HMO	58.5%	42.2%	56.3%	63%
Community or Government Clinic/ Community Hospital	23.1%	30.4%	25.2%	20.7%
Source: 2009 California Health In	terview Survey			

#### 5.15.1 Access to Care for Health Problems

According to the 2007 Los Angeles County Health Survey:

- Just below 12% of adults in Los Angeles County could not afford to see a doctor for a health problem. This percentage was slightly higher in the East LA Health District (HD 16) and above 16% in the San Antonio Health District (HD 58).
- Over 7% of parents in Los Angeles County could not afford a medical check-up/physical exam for their child. This percentage was higher in all of the Gateway Cities health districts except for the Long Beach (HD 40) and Whittier (HD 91) Health Districts.
- Over 7% of parents in Los Angeles County could not afford for their child to see a doctor in the case of an illness. This percentage was slightly higher in the Compton (HD 12) and East LA (HD 16) Health Districts, and nearly 5% higher in the San Antonio Health District (HD 58).

#### 5.15.2 Access to Mental Health Care

According to the 2007 Los Angeles County Health Survey:

Nearly 6% of adults in Los Angeles County could not afford mental health care. This percentage was higher in the San Antonio Health District (HD 58) and highest in the Compton Health District (HD 12).

#### 5.15.3 Access to Dental Care

According to the 2007 Los Angeles County Health Survey:

- Over 22% of adults in Los Angeles County could not afford dental care. This percentage was higher in the Compton (HD 12), East LA (HD 16), and San Antonio (HD 58) Health Districts.
- Compared to Los Angeles County overall, a higher percentage of the population in the Compton (HD 12), San Antonio (HD 58), and Whittier (HD 91) Health Districts could not afford dental care for their children.

#### 5.16 Health Insurance

In 2008, the U.S. Census Bureau estimated that 22.3% (2.2 million) of Los Angeles County residents lacked health insurance, more than any other county in the nation. In the state of California, an estimated 17.8% of the population was uninsured in 2008, as was 15.1% in the nation at this time. The 2008 American Community Survey Census estimates also found that the majority (83%) of those uninsured in Los Angeles County are between the ages of 18 and 65, with 12.9% of children and only 3.3% of the elderly lacking insurance. <sup>74</sup>

The Los Angeles County Health Survey found that approximately 19% of adults in Los Angeles County were uninsured in 2007. For the East LA (HD 16) and San Antonio (HD 58) Health Districts, this percentage was 23.4% and 28.6% respectively. The survey also found that compared to the county, a higher percentage of children (ages 0-17) in the Bellflower (HD 6), Compton (HD 12), East LA (HD 16), and San Antonio (HD 58) Health Districts were uninsured in 2007.

- For adults age 65 and under who are insured, the Los Angeles County Health Survey found that a higher percentage of the population was insured privately (vs. through Medi-Cal) for all health districts and Los Angeles County.
- Older adults in Los Angeles County and the Gateway Cities health districts are covered by a range of health insurance plans, the majority of which are publicly funded.
- Compared to Los Angeles County, children in the Compton (HD 12), East LA (HD 16), and San Antonio (HD 58) Health Districts are more often insured through public programs (vs. private health insurance).

<sup>&</sup>lt;sup>74</sup> Los Angeles Alliance for a New Economy. Los Angeles on the Edge: An Analysis of Health and Income Data from the U.S. Census Bureau. September, 2009.

Table 5-30. Type of Insurance for (Insured) Adults (65 years and under), 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Medi-Cal	15.8%	10.2%	27.7%	26.6%	19.4%	26.8%	7.6%
Private	60.8%	71.7%	48.9%	45.4%	62.4%	39.5%	70.5%

Type of insurance for non-elderly adults (18-64 years old)

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Table 5-31. Type of Insurance for Insured Older Adults (65+ years old), 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Medi-Medi	26.8%	22.0%	34.3%	50.6%	19.8%	23.8%	21.9%
Medicare & Private	28.9%	27.7%	22.6%	18.7%	31.3%	26.0%	37.1%
Medicare (only)	33.8%	40.5%	31.2%	20.6%	30.2%	35.8%	37.4%

Type of insurance for older adults (65+ years old)

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

Table 5-32. Type of Insurance for Children (0-17 years), 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Healthy Families	10.7%	12.7%	14.2%	16.9%	7.7%	13.9%	13.4%
Medi-Cal	35.6%	18.7%	51.6%	45.0%	41.7%	41.3%	28.1%
Private	45.4%	59.3%	26.0%	25.8%	47.4%	32.1%	51.7%

Insurance types for children 0-17 years old.

Source: 2007 Los Angeles County Health Survey; Office of Health Assessment and Epidemiology, Los Angeles County Department of Public Health.

## 6. Summary

As this report highlights, there are common trends related to health and medical need in the Gateway Cities. All of the health districts in the Gateway Cities apart from the Whittier Health District (HD 91) have higher rates of hospitalizations and ED visits than in Los Angeles County overall. Additionally, diabetes is among the top five leading causes of death in five out of six of the health districts in the Gateway Cities, but not for Los Angeles County.

The CMNA also found that there are health conditions and medical needs that vary within the Gateway Cities. Twelve of the 26 Gateway Cities have a higher percentage of individuals living below the poverty level than in Los Angeles County overall.

More than 65% of the Gateway Cities had median household incomes that were below the estimated median household income for Los Angeles County, and the percentage of unemployed is higher than in the county overall in just under 50% of the Gateway Cities.

The following table shows where indicators of health and medical need for the Gateway Cities health districts were higher (+) or lower (-) than values for Los Angeles County overall.

Table 6-1. Summary of Health and Medical Needs in the Gateway Cities Compared to Los Angeles
County

Indicator	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Children's Asthma	+	+	-	+	+	+
Adult Asthma	+	+	-	+	-	-
Asthma Hospitalizations	+	+	+	+	+	-
Asthma ED Visits	+	+	+	+	+	-
Days of School Missed Due to Asthma	-	+	-	+	-	+
Adult Diabetes	+	+	+	-	+	+
Diabetes Hospitalizations	+	+	+	+	+	-
Diabetes ED Visits	+	+	+	+	+	+
Hypertension	+	+	+	-	-	+
Heart Disease	+	+/-	+	+	-	-
CVD Hospitalizations	1+1	+	+	+	+	+
CVD ED Visits	+	+	+	+	+	-
Acute MI Hospitalizations	+	+	+	-	+	+
Acute MI ED Visits	+	+	+	+	+	+
Cholesterol	+	+	-	-	-	+
Obesity	+	+	+	+	+	+
Overweight	-	+	+	+	-	+
Adults – Do Not Meet PA Guidelines	-"	+	+	+	+	+

Indicator	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Children – Do Not Meet PA Guidelines	-	+	+	-	-	-
Adults – No Safe Places for PA	-	+	+	+	+	-
Parents – Not a Pleasant Place for Children to be PA	-	+	-	-	+	-
Adult Depression	-	-	+	+	+	+
Hospitalizations for Depression	+	+	+/-	+	+	+
ED Visits for Depression	+	+	+	+	+	-
Adults - Activity Limitation Days	-	+	-	-	+	+
Adults – Unhealthy Days	-	-	-	+	-	-
Adults – Could Not Afford Dental Care	-	+	+	-	+	+
Parents Could Not Afford Child Dental Care	-	+	-	-	+	+
Adults – No Dental Insurance	-	-	+	-	+	-
Children – No Dental Insurance	-	-	+	-	+	-
Adults – Could Not Afford to See Doctor	-	+	+	-	+	-
Adults – Could Not Afford Mental Health Care	-	+	-	-	-	-
Adults - Could Not Afford Prescription Medication	-	+	+	-	+	-
Parents Could Not Afford Prescription for Child	-	+	-	+	+	+
Parents Could Not Afford Child Check-Up	+	+	+	-	+	-
Parents Could Not Afford Dr. Visit for III Child	-	+	+	+	+	-
Adults – No Regular Source of Care	-	-	+	-	+	-
Children – No Regular Source of Care	-	-	-	-	+	+
Adults – Difficulty Accessing Care	-	+	+	-	+	-
Adults - Difficulty Accessing Care Due to Transportation	-	+	+	+	+	-
Children – Difficulty Accessing Care	-	+	+	-	+	-

Indicator	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Parents - Difficulty Accessing Care Due to Transportation	-	+	+	+	+	+
Poor Quality, Affordable Healthcare in Community	-	+		-	-	+
Employed Without Paid Sick Leave	-	-	n/a	-	-	n/a
Insured Adults Who Were Uninsured in Last Year	+	-	-	-	+	-
Adults - Uninsured	_	-	+	-	+	-
Children - Uninsured	+	+	+	n/a	+	-
Adults – Self Reported Fair/Poor Health	-	+	+	-	+	+
Children – Reported Fair/Poor Health	+/-	+	-	-	+	-
Adults - Frequent Mental Distress	-	-	-	+	+	+
Adults Receiving Mental Health Counseling	-	n/a	-	-	+	-
Adults – Risk for Serious Mental Illness	+	+	n/a	:-	+	-
Serious Methamphetamine use in Community	+	-	+	+	+	+
Poor Availability of FFV	+	+	+	-	-	-
Adults – Fast Food	+	+	-	+	+	+
Adults – Rate Diet Unhealthy	+	+	+	+	-	+
Adults Who Smoke	-	+	+	+	+	-
All Hospitalizations	+	+	+	+	+	-
ED Visits	+	+	+	+	+	-
Acute Renal Failure Hospitalizations	+	+	-	+	+	-
Acute Renal Failure ED Visits	+	+	-	+	+	-
All Internal Causes Hospitalizations	+	+	+	+	+	-
All Internal Causes ED Visits	+	+	+	+	+	-
Cerebrovascular Disease Hospitalizations	+	+	+	+	+	-
Cerebrovascular Disease ED Visits	+	+	+	+	+	-
Nephritis Hospitalizations	+	+	-	+	+	-

Indicator	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
Nephritis ED Visits	+	+	-	+	+	-

Abbreviations used in the table above: Emergency department (ED); Cardiovascular disease (CVD); Myocardial infarction (MI); Physical activity (PA); Fresh fruits and vegetables (FFV)

## 6.1 Bellflower Health District (HD 6)

Based on the indicators described in this report, the Bellflower Health District (HD 6) has a consistently higher than county prevalence of chronic diseases (asthma, diabetes, heart disease) and conditions that lead to these chronic conditions (cholesterol, obesity) than Los Angeles County. However, the population in this area had better outcomes than in the county overall for health behaviors such as physical activity and smoking, as well as for a number of measures of access to care and some indicators of mental health.

The Bellflower Health District (HD 6) has the highest number of hospitals and specialty care clinics per capita (100,000 people) among all of the Gateway Cities health districts. Rates of both hospitalization and ED visit indicators included in this report are higher in the Bellflower Health District (HD 6) than in the county overall. Diabetes is the fifth leading cause of death in this health district, but is not among the top five causes of death in Los Angeles County. Compared to Los Angeles County, there are more premature deaths in the Bellflower area due to motor vehicle crashes, suicide, and lung cancer.

A higher percentage of children in this health district are uninsured than in the county overall, though there are no medically underserved areas or populations in the Bellflower Health District (HD 6). However, 52% of the city of Signal Hill is considered to be a primary care health professional shortage area.

## 6.2 Compton Health District (HD 12)

For more than 85% of the health and medical need measures listed in the table above, the Compton Health District (HD 12) had values that indicated health was poorer and medical need was higher than Los Angeles County overall. The data show that the Compton Health District (HD 12) has a higher prevalence of chronic health conditions (asthma, diabetes, hypertension, obesity, etc.) and behaviors that lead to these conditions (lack of physical activity, unhealthy diet, and smoking). Diabetes is the fifth leading cause of death in this health district, but is not among the top five causes of death in Los Angeles County. Compared to Los Angeles County, there are more premature deaths in the Compton area due to homicide, stroke, and lung cancer.

Hospitalization and ED visit rates were higher in the Compton Health District (HD 12) for all of the conditions listed in this report, and the data shows that the population in this area had more difficulty accessing care than in the county overall. Despite these findings, fewer adults in the Compton Health District (HD 12) are uninsured, and there was a lower rate of diagnosed depression among adults.

Portions of all of the cities in the Compton Health District (HD 12) are considered to be medically underserved areas, as well as primary care and mental health professional shortage areas. The Compton Health District (HD 12) is also the Gateway Cities health district with the fewest primary care and specialty care clinics as well as hospitals per capita (100,000 people).

## 6.3 East LA Health District (HD 16)

Data shows that the prevalence of asthma among children and adults in the East LA Health District (HD 16) was lower than in Los Angeles County overall; however, hospitalizations and ED visits for asthma were still higher than rates for the county. The prevalence of other chronic health conditions such as diabetes, hypertension, obesity and heart disease was also equal to or higher in the East LA Health District (HD 16) compared to the county, as were hospitalizations and ED visits for all causes discussed in this report, aside from acute renal failure and nephritis. Diabetes is the third leading cause of death in this health district, followed by liver disease; neither of these is among the top five causes of death in Los Angeles County. Compared to Los Angeles County, there are more premature deaths in the East LA Health District (HD 16) due to both liver disease and stroke.

There are more primary care clinics per capita (100,000 people) in the East LA Health District (HD 16) than any of the other Gateway Cities health districts. However, data about access to health care for this area was mixed, with fewer children reported to have a regular source of care than in the county, and the opposite finding for adults. More adults and children living in this area reported being uninsured.

Portions of both of the Gateway Cities in the East LA Health District (HD 16) are considered to be medically underserved areas, and a small percentage of the city of Commence is also considered to be a primary care health professional shortage area.

## 6.4 Long Beach Health District (HD 40)

The population in the Long Beach Health District (HD 40) had higher prevalence of chronic health conditions such as asthma, heart disease, and obesity, but a lower prevalence of adult diabetes and cholesterol compared to Los Angeles County. The data shows that for measures of access to care, the Long Beach Health District (HD 40) has better outcomes than the county overall; however, total hospitalization and ED visit rates were higher than in the county for all conditions discussed in this report aside from rates for acute myocardial infarction hospitalizations, which were lower when compared to the county. Compared to Los Angeles County, there are more premature deaths in the Long Beach Health District (HD40) due to HIV.

The city of Long Beach contains medically underserved areas, as well as primary care and mental health professional shortage area.

## 6.5 San Antonio Health District (HD 58)

For more than 80% of the health and medical need measures listed in the table above, the San Antonio Health District (HD 58) had values that indicated health was poorer and medical need was higher than Los Angeles County overall. Compared to Los Angeles County, however, the prevalence of chronic health

conditions in the San Antonio Health District (HD 58) was mixed. The area had a lower prevalence of adult asthma, heart disease, and hypertension, but a higher prevalence of adult diabetes and obesity. Diabetes is the third leading cause of death in this health district, but is not among the top five causes of death in Los Angeles County. Compared to Los Angeles County, there are more premature deaths in the San Antonio Health District (HD 58) due to homicide and liver disease.

Fewer adults in the San Antonio Health District (HD 58) compared to the county rated their communities as being safe/pleasant for themselves and their children to be physically active, and adults had a higher prevalence of smoking and eating fast food. Additionally, the data show that the population in this area had a harder time accessing medical care than did others in the county. Total hospitalization and ED visit rates for all of the outcomes discussed in this report were higher than in the county.

Portions of six of the eight cities in the San Antonio Health District (HD 58) have areas that are considered to be medically underserved, and are considered to be primary care health professional shortage areas. Two cities, Downey and Southgate, are areas where medically underserved populations live.

## 6.6 Whittier Health District (HD 91)

The Whittier Health District (HD 91) was the only area of the Gateway Cities where hospitalizations and ED visit rates for all measures discussed in this report were lower than in the county. There were also fewer uninsured children and adults in the Health District (HD 91) than in Los Angeles County. However, people living in this health district more often rated healthcare in their community as fair or poor, and adults more often reported their health as fair or poor than the county overall.

The prevalence of chronic health conditions including adult asthma, hypertension, diabetes, and obesity were higher in the Whittier Health District (HD 91) than in Los Angeles County. Diabetes is the fifth leading cause of death in this health district, but is not among the top five causes of death in Los Angeles County. Compared to Los Angeles County, there are more premature deaths in the Whittier area due to motor vehicle crashes and lung cancer.

Only a small percentage (1%) of one of the cities (Pico Rivera) in the Whittier Health District (HD 91) is considered a medically underserved area. There are no health professional shortage areas in Whittier.

#### 7. Recommendations

The evidence presented in the CMNA highlights issues of consistent health and medical need throughout the Gateway Cities, as well as where disparities related to these conditions exist. The findings of this report could be used to help focus efforts to better understand the root causes of poor health and medical need in the Gateway Cities, and how future program planning and policy can serve to address specific areas of need. In order to do this, it is recommended that the GCCOG considers the following as next steps to address the findings of the CMNA:

- GCCOG should convene a Health Working Group with a variety of stakeholders. The goals of the working group would be to understand and address the specific conditions that contribute to poor health and lack of access to medical care highlighted in this report. Stakeholders could include:
  - Public Agencies, particularly those responsible for:
    - routinely monitoring and planning programs to address health needs in the Gateway Cities and Los Angeles County; and
    - planning that impacts the determinants of health, such as land use, transportation, housing, and economic development;
  - Research Institutions working to understand the conditions that most impact medical need;
  - ♦ Communities of diverse age, race, culture and income in the Gateway Cities;
  - Health Based Organizations and those currently serving the Gateway Cities; and
  - Decision Makers who are responsible for developing the plans and policies that have the greatest impact on conditions of health and medical need in the Gateway Cities.
- This working group could develop a policy and program agenda that could cover topic areas such as:
  - Increasing health insurance coverage in the Gateway Cities;
  - Attracting doctors and facilities to underserved areas;
  - Addressing the root causes (e.g., air quality, access to healthy foods) of the high rates of chronic disease (e.g., diabetes) in the Gateway Cities; and
  - Addressing health disparities faced by different racial and ethnic groups, age groups, or genders.
- In order to monitor trends or changes in the conditions of health and medical need, the data and information collected for this report should be routinely updated and monitored. Future analysis of could include methods to determine statistical significance of the data.

# Appendix A

Using U.S. Census 2005-2009 American Community Survey 5-Year Estimates, the following tables compare demographic characteristics of the incorporated Gateway Cities with Los Angeles County. This and other data from the U.S. Census can be accessed at <a href="http://factfinder.census.gov">http://factfinder.census.gov</a>

Table A-1. Los Angeles County

Total Population	9,785,295
Median Household Income (in dollars)	54,828
Individuals Below Poverty Level (%)	15.4
High School Graduate or Higher (%)	75.5
Unemployment rate (%)	5
Renter Occupied Housing (%)	51.4
Severe Overcrowding (%)	4.6
Mode of Transportation to Work	
Mean Travel Time to Work (in minutes; workers 16 and over)	29
Car, truck, or van – drove alone (%)	72.2
Car, truck, or van – carpooled (%)	11.6
Public Transportation (excluding taxicab) (%)	7
Walked (%)	2.8
Other Means (%)	2.1
Worked at Home (%)	4.3
Age (%)	
Under 5 years	7.5
18 years and over	73.9
65 years and over	10.3
Median age	33.8
Race/Ethnicity (%)	
White	50.7
Hispanic or Latino	47.3
Black or African American	8.8
American Indian and Alaska Native	0.5
Asian	13
Native Hawaiian and Other Pacific Islander	0.3
Some other race	23.6
Occupation (%)	
Management, Professional, and Related Occupations	34.1
Service	17.5
Sales and Office	26.1
Farming, Fishing, Forestry	0.3
Construction, Extraction, Maintenance, Repair	8.7

Production, Transportation, Material Moving	13.4

# Table A-2. Artesia—Los Angeles County

Total Population	16,225	9,785,295
Median Household Income (in dollars)	49,569	54,828
Individuals Below Poverty Level (%)	12.4	15.4
High School Graduate or Higher (%)	79.2	75.5
Unemployment rate (%)	4.4	5
Renter Occupied Housing (%)	41.8	51.4
Severe Overcrowding (%)	5.2	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	26.0	29
Car, truck, or van – drove alone (%)	76.8	72.2
Car, truck, or van – carpooled (%)	12.9	11.6
Public Transportation (excluding taxicab) (%)	2.1	7
Walked (%)	2.7	2.8
Other Means (%)	3.5	2.1
Worked at Home (%)	2.0	4.3
Age (%)		
Under 5 years	4.4	7.5
18 years and over	77.4	73.9
65 years and over	13.3	10.3
Median age	38.7	33.8
Race/Ethnicity (%)		
White	39.8	50.7
Hispanic or Latino	31.1	47.3
Black or African American	2.7	8.8
American Indian and Alaska Native	0.2	0.5
Asian	36.8	13
Native Hawaiian and Other Pacific Islander	0.0	0.3
Some other race	16.8	23.6
Occupation (%)	And Design	
Management, Professional, and Related Occupations	29.1	34.1
Service	20.1	17.5
Sales and Office	28.9	26.1
Farming, Fishing, Forestry	0.0	0.3
Construction, Extraction, Maintenance, Repair	9.1	8.7
Production, Transportation, Material Moving	12.9	13.4

Table A-3. Bell—Los Angeles County

Total Population	36,607	9,785,295
Median Household Income (in dollars)	37,731	54,828
Individuals Below Poverty Level (%)	21.1	15.4
High School Graduate or Higher (%)	44.2	75.5
Unemployment rate (%)	4.7	5
Renter Occupied Housing (%)	72.6	51.4
Severe Overcrowding (%)	8.9	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	27.5	29
Car, truck, or van – drove alone (%)	68.2	72.2
Car, truck, or van – carpooled (%)	14.2	11.6
Public Transportation (excluding taxicab) (%)	9.6	7
Walked (%)	3.3	2.8
Other Means (%)	2.5	2.1
Worked at Home (%)	2.2	4.3
Age (%)		
Under 5 years	10.1	7.5
18 years and over	66.4	73.9
65 years and over	5.3	10.3
Median age	28.2	33.8
Race/Ethnicity (%)		
White	55.5	50.7
Hispanic or Latino	90.7	47.3
Black or African American	1.1	8.8
American Indian and Alaska Native	0.3	0.5
Asian	0.5	13
Native Hawaiian and Other Pacific Islander	0.4	0.3
Some other race	40.8	23.6
Occupation (%)		
Management, Professional, and Related Occupations	11.7	34.1
Service	17.5	17.5
Sales and Office	24.0	26.1
Farming, Fishing, Forestry	2.0	0.3
Construction, Extraction, Maintenance, Repair	12.4	8.7
Production, Transportation, Material Moving	32.4	13.4

Table A-4. Bell Gardens—Los Angeles County

Total Population	44,437	9,785,295
Median Household Income (in dollars)	38,591	54,828
Individuals Below Poverty Level (%)	24.0	15.4
High School Graduate or Higher (%)	42.8	75.5
Unemployment rate (%)	3.2	5
Renter Occupied Housing (%)	75.1	51.4
Severe Overcrowding (%)	0.8	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	27.5	29
Car, truck, or van – drove alone (%)	82.2	72.2
Car, truck, or van – carpooled (%)	11.1	11.6
Public Transportation (excluding taxicab) (%)	2.7	7
Walked (%)	0.8	2.8
Other Means (%)	0.4	2.1
Worked at Home (%)	2.9	4.3
Age (%)	903.5	
Under 5 years	10.8	7.5
18 years and over	63.1	73.9
65 years and over	5.0	10.3
Median age	26.3	33.8
Race/Ethnicity (%)	Made a	
White	54.6	50.7
Hispanic or Latino	95.2	47.3
Black or African American	1.0	8.8
American Indian and Alaska Native	0.3	0.5
Asian	0.6	13
Native Hawaiian and Other Pacific Islander	0.1	0.3
Some other race	42.2	23.6
Occupation (%)		
Management, Professional, and Related Occupations	51.0	34.1
Service	9.6	17.5
Sales and Office	29.9	26.1
Farming, Fishing, Forestry	0.0	0.3
Construction, Extraction, Maintenance, Repair	3.4	8.7
Production, Transportation, Material Moving	6.1	13.4

Table A-5. Bellflower—Los Angeles County

Total Population	72,916	9,785,295
Median Household Income (in dollars)	50,544	54,828
Individuals Below Poverty Level (%)	12.7	15.4
High School Graduate or Higher (%)	75.5	75.5
Unemployment rate (%)	4.7	5
Renter Occupied Housing (%)	61.2	51.4
Severe Overcrowding (%)	5.5	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	26.2	29
Car, truck, or van – drove alone (%)	78.5	72.2
Car, truck, or van – carpooled (%)	11.4	11.6
Public Transportation (excluding taxicab) (%)	3.1	7
Walked (%)	2.2	2.8
Other Means (%)	2.8	2.1
Worked at Home (%)	2.1	4.3
Age (%)		
Under 5 years	8.7	7.5
18 years and over	69.4	73.9
65 years and over	8.2	10.3
Median age	30.8	33.8
Race/Ethnicity (%)	9 2 2 3	
White	32.9	50.7
Hispanic or Latino	52.8	47.3
Black or African American	11.3	8.8
American Indian and Alaska Native	0.8	0.5
Asian	12.2	13
Native Hawaiian and Other Pacific Islander	0.6	0.3
Some other race	38.8	23.6
Occupation (%)		
Management, Professional, and Related Occupations	25.2	34.1
Service	17.8	17.5
Sales and Office	30.8	26.1
Farming, Fishing, Forestry	0.1	0.3
Construction, Extraction, Maintenance, Repair	10.9	8.7
Production, Transportation, Material Moving	15.2	13.4

Table A-6. Cerritos—Los Angeles County

Total Population	51,215	9,785,295
Median Household Income (in dollars)	86,497	54,828
Individuals Below Poverty Level (%)	5.6	15.4
High School Graduate or Higher (%)	92.5	75.5
Unemployment rate (%)	3.2	5
Renter Occupied Housing (%)	17.6	51.4
Severe Overcrowding (%)	0.8	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	30.1	29
Car, truck, or van – drove alone (%)	82.2	72.2
Car, truck, or van – carpooled (%)	11.1	11.6
Public Transportation (excluding taxicab) (%)	2.7	7
Walked (%)	0.8	2.8
Other Means (%)	0.4	2.1
Worked at Home (%)	2.9	4.3
Age (%)		
Under 5 years	4.5	7.5
18 years and over	76.5	73.9
65 years and over	14.6	10.3
Median age	41.7	33.8
Race/Ethnicity (%)	Sin Section	
White	23.2	50.7
Hispanic or Latino	11.3	47.3
Black or African American	7.8	8.8
American Indian and Alaska Native	0.6	0.5
Asian	59.9	13
Native Hawaiian and Other Pacific Islander	0.5	0.3
Some other race	4.5	23.6
Occupation (%)		
Management, Professional, and Related Occupations	51.0	34.1
Service	9.6	17.5
Sales and Office	29.9	26.1
Farming, Fishing, Forestry	0.0	0.3
Construction, Extraction, Maintenance, Repair	3.4	8.7
Production, Transportation, Material Moving	6.1	13.4

Table A-7. Commerce—Los Angeles County

Total Population	13,297	9,785,295
Median Household Income (in dollars)	49,500	54,828
Individuals Below Poverty Level (%)	14.6	15.4
High School Graduate or Higher (%)	52.9	75.5
Unemployment rate (%)	4.4	5
Renter Occupied Housing (%)	49.5	51.4
Severe Overcrowding (%)	7.7	4.6
Mode of Transportation to Work	February Control	<b>经产品</b>
Mean Travel Time to Work (in minutes; workers 16 and over)	27.5	29
Car, truck, or van – drove alone (%)	74.1	72.2
Car, truck, or van – carpooled (%)	16.4	11.6
Public Transportation (excluding taxicab) (%)	3.9	7
Walked (%)	3.1	2.8
Other Means (%)	1.7	2.1
Worked at Home (%)	0.8	4.3
Age (%)		
Under 5 years	7.1	7.5
18 years and over	66.1	73.9
65 years and over	10.0	10.3
Median age	28.4	33.8
Race/Ethnicity (%)		
White	55.8	50.7
Hispanic or Latino	90.7	47.3
Black or African American	2.8	8.8
American Indian and Alaska Native	1.3	0.5
Asian	1.0	13
Native Hawaiian and Other Pacific Islander	0.4	0.3
Some other race	35.9	23.6
Occupation (%)		
Management, Professional, and Related Occupations	14.8	34.1
Service	17.1	17.5
Sales and Office	28.5	26.1
Farming, Fishing, Forestry	0.2	0.3
Construction, Extraction, Maintenance, Repair	11.9	8.7
Production, Transportation, Material Moving	27.5	13.4

Table A-8. Compton—Los Angeles County

Total Population	93,621	9,785,295
Median Household Income (in dollars)	41,890	54,828
Individuals Below Poverty Level (%)	23.7	15.4
High School Graduate or Higher (%)	59.9	75.5
Unemployment rate (%)	6.9	5
Renter Occupied Housing (%)	44.2	51.4
Severe Overcrowding (%)	8.2	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and ove	r) 28.2	29
Car, truck, or van – drove alone (%)	71.0	72.2
Car, truck, or van – carpooled (%)	16.2	11.6
Public Transportation (excluding taxicab) (%)	6.6	7
Walked (%)	1.3	2.8
Other Means (%)	2.4	2.1
Worked at Home (%)	2.5	4.3
Age (%)		
Under 5 years	10.7	7.5
18 years and over	63.8	73.9
65 years and over	7.0	10.3
Median age	26.3	33.8
Race/Ethnicity (%)		
White	27.2	50.7
Hispanic or Latino	61.9	47.3
Black or African American	34.9	8.8
American Indian and Alaska Native	0.7	0.5
Asian	0.4	13
Native Hawaiian and Other Pacific Islander	1.0	0.3
Some other race	33.7	23.6
Occupation (%)		
Management, Professional, and Related Occupations	15.6	34.1
Service	20.3	17.5
Sales and Office	26.0	26.1
Farming, Fishing, Forestry	0.5	0.3
Construction, Extraction, Maintenance, Repair	11.0	8.7
Production, Transportation, Material Moving	26.6	13.4

Table A-9. Cudahy—Los Angeles County

Total Population	24,368	9,785,295
Median Household Income (in dollars)	41,783	54,828
Individuals Below Poverty Level (%)	21.3	15.4
High School Graduate or Higher (%)	41.5	75.5
Unemployment rate (%)	5.0	5
Renter Occupied Housing (%)	81.0	51.4
Severe Overcrowding (%)	10.9	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	31.8	29
Car, truck, or van – drove alone (%)	69.9	72.2
Car, truck, or van – carpooled (%)	13.1	11.6
Public Transportation (excluding taxicab) (%)	8.8	7
Walked (%)	4.9	2.8
Other Means (%)	1.3	2.1
Worked at Home (%)	1.9	4.3
Age (%)		
Under 5 years	9.6	7.5
18 years and over	62.8	73.9
65 years and over	4.4	10.3
Median age	25.4	33.8
Race/Ethnicity (%)		
White	55.4	50.7
Hispanic or Latino	96.9	47.3
Black or African American	0.9	8.8
American Indian and Alaska Native	0.1	0.5
Asian	0.6	13
Native Hawaiian and Other Pacific Islander	0.0	0.3
Some other race	42.1	23.6
Occupation (%)		
Management, Professional, and Related Occupations	6.6	34.1
Service	19.1	17.5
Sales and Office	24.0	26.1
Farming, Fishing, Forestry	0.8	0.3
Construction, Extraction, Maintenance, Repair	12.0	8.7
Production, Transportation, Material Moving	37.5	13.4

Table A-10. Downey—Los Angeles County

Total Population	107,178	9,785,295
Median Household Income (in dollars)	58,128	54,828
Individuals Below Poverty Level (%)	10.4	15.4
High School Graduate or Higher (%)	75.7	75.5
Unemployment rate (%)	5.6	5
Renter Occupied Housing (%)	52.6	51.4
Severe Overcrowding (%)	3.6	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	26.8	29
Car, truck, or van – drove alone (%)	79.8	72.2
Car, truck, or van – carpooled (%)	12.1	11.6
Public Transportation (excluding taxicab) (%)	2.7	7
Walked (%)	1.9	2.8
Other Means (%)	1.5	2.1
Worked at Home (%)	1.9	4.3
Age (%)		
Under 5 years	8.4	7.5
18 years and over	70.0	73.9
65 years and over	9.9	10.3
Median age	31.8	33.8
Race/Ethnicity (%)		
White	58.1	50.7
Hispanic or Latino	67.9	47.3
Black or African American	3.7	8.8
American Indian and Alaska Native	0.8	0.5
Asian	7.4	13
Native Hawaiian and Other Pacific Islander	0.1	0.3
Some other race	27.5	23.6
Occupation (%)	2 7 3 3 5 5 5 5	
Management, Professional, and Related Occupations	29.6	34.1
Service	14.2	17.5
Sales and Office	31.5	26.1
Farming, Fishing, Forestry	0.2	0.3
Construction, Extraction, Maintenance, Repair	9.7	8.7
Production, Transportation, Material Moving	14.9	13.4

Table A-11. Hawaiian Garden—Los Angeles County

Total Population	15,162	9,785,295
Median Household Income (in dollars)	44,462	54,828
Individuals Below Poverty Level (%)	18.3	15.4
High School Graduate or Higher (%)	54.9	75.5
Unemployment rate (%)	5	5
Renter Occupied Housing (%)	48.4	51.4
Severe Overcrowding (%)	3.7	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	23.3	29
Car, truck, or van – drove alone (%)	71.0	72.2
Car, truck, or van – carpooled (%)	17.6	11.6
Public Transportation (excluding taxicab) (%)	2.8	7
Walked (%)	4.0	2.8
Other Means (%)	4.0	2.1
Worked at Home (%)	0.5	4.3
Age (%)		
Under 5 years	8.5	7.5
18 years and over	70.1	73.9
65 years and over	6.2	10.3
Median age	29.1	33.8
Race/Ethnicity (%)		
White	41.8	50.7
Hispanic or Latino	76.8	47.3
Black or African American	4.2	8.8
American Indian and Alaska Native	0.2	0.5
Asian	10.3	13
Native Hawaiian and Other Pacific Islander	0.4	0.3
Some other race	40.6	23.6
Occupation (%)		
Management, Professional, and Related Occupations	15.8	34.1
Service	26.8	17.5
Sales and Office	20.7	26.1
Farming, Fishing, Forestry	0.0	0.3
Construction, Extraction, Maintenance, Repair	10.5	8.7
Production, Transportation, Material Moving	26.3	13.4

Table A-12. Huntington Park—Los Angeles County

Total Population	60,817	9,785,295
Median Household Income (in dollars)	35,340	54,828
Individuals Below Poverty Level (%)	24.0	15.4
High School Graduate or Higher (%)	45.1	75.5
Unemployment rate (%)	3.8	5
Renter Occupied Housing (%)	71.6	51.4
Severe Overcrowding (%)	17.3	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	29.8	29
Car, truck, or van – drove alone (%)	64.0	72.2
Car, truck, or van – carpooled (%)	13.5	11.6
Public Transportation (excluding taxicab) (%)	13.2	7
Walked (%)	4.0	2.8
Other Means (%)	3.1	2.1
Worked at Home (%)	2.3	4.3
Age (%)		
Under 5 years	9.1	7.5
18 years and over	67.7	73.9
65 years and over	7.4	10.3
Median age	28.5	33.8
Race/Ethnicity (%)		
White	56.8	50.7
Hispanic or Latino	97.2	47.3
Black or African American	0.7	8.8
American Indian and Alaska Native	0.5	0.5
Asian	0.6	13
Native Hawaiian and Other Pacific Islander	0.1	0.3
Some other race	40.3	23.6
Occupation (%)		
Management, Professional, and Related Occupations	12.5	34.1
Service	18.0	17.5
Sales and Office	26.8	26.1
Farming, Fishing, Forestry	0.9	0.3
Construction, Extraction, Maintenance, Repair	12.5	8.7
Production, Transportation, Material Moving	29.4	13.4

Table A-13. La Habra Heights—Los Angeles County

Total Population	5,864	9,785,295
Median Household Income (in dollars)	129,861	54,828
Individuals Below Poverty Level (%)	2.6	15.4
High School Graduate or Higher (%)	93.2	75.5
Unemployment Rate (%)	4.9	5
Renter Occupied Housing (%)	1.5	51.4
Severe Overcrowding (%)	0.0	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	31.6	29
Car, truck, or van – drove alone (%)	78.7	72.2
Car, truck, or van – carpooled (%)	10.3	11.6
Public Transportation (excluding taxicab) (%)	1.3	7
Walked (%)	1.0	2.8
Other Means (%)	2.9	2.1
Worked at Home (%)	5.7	4.3
Age (%)		
Under 5 years	3.6	7.5
18 years and over	77.8	73.9
65 years and over	16.2	10.3
Median age	45.4	33.8
Race/Ethnicity (%)		
White	67.1	50.7
Hispanic or Latino	20.5	47.3
Black or African American	0.2	8.8
American Indian and Alaska Native	0.0	0.5
Asian	24.6	13
Native Hawaiian and Other Pacific Islander	0.0	0.3
Some other race	2.6	23.6
Occupation (%)		
Management, Professional, and Related Occupations	65.3	34.1
Service	9.0	17.5
Sales and Office	17.7	26.1
Farming, Fishing, Forestry	0.0	0.3
Construction, Extraction, Maintenance, Repair	5.9	8.7
Production, Transportation, Material Moving	2.2	13.4

Table A-14. La Mirada—Los Angeles County

Total Population	49,218	9,785,295
Median Household Income (in dollars)	81,736	54,828
Individuals Below Poverty Level (%)	5.6	15.4
High School Graduate or Higher (%)	87.3	75.5
Unemployment Rate (%)	3.9	5
Renter Occupied Housing (%)	18.3	51.4
Severe Overcrowding (%)	2.0	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	30	29
Car, truck, or van – drove alone (%)	82.7	72.2
Car, truck, or van – carpooled (%)	7.9	11.6
Public Transportation (excluding taxicab) (%)	2.0	7
Walked (%)	3.2	2.8
Other Means (%)	0.9	2.1
Worked at Home (%)	3.4	4.3
Age (%)		
Under 5 years	5.1	7.5
18 years and over	75.5	73.9
65 years and over	14.2	10.3
Median age	36.1	33.8
Race/Ethnicity (%)		
White	57.9	50.7
Hispanic or Latino	39.3	47.3
Black or African American	2.1	8.8
American Indian and Alaska Native	0.9	0.5
Asian	15.8	13
Native Hawaiian and Other Pacific Islander	0.0	0.3
Some other race	18.8	23.6
Occupation (%)	STOCK TO SERVICE	
Management, Professional, and Related Occupations	40.0	34.1
Service	12.8	17.5
Sales and Office	28.2	26.1
Farming, Fishing, Forestry	0.0	0.3
Construction, Extraction, Maintenance, Repair	8.4	8.7
Production, Transportation, Material Moving	10.6	13.4

Table A-15. Lakewood—Los Angeles County

Total Population	78,303	9,785,295
Median Household Income (in dollars)	76,348	54,828
Individuals Below Poverty Level (%)	4.7	15.4
High School Graduate or Higher (%)	89.0	75.5
Unemployment rate (%)	3.8	5
Renter Occupied Housing (%)	26.6	51.4
Severe Overcrowding (%)	1.7	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	27.1	29
Car, truck, or van – drove alone (%)	82.7	72.2
Car, truck, or van – carpooled (%)	9.3	11.6
Public Transportation (excluding taxicab) (%)	1.8	7
Walked (%)	1.8	2.8
Other Means (%)	1.3	2.1
Worked at Home (%)	3.0	4.3
Age (%)		
Under 5 years	6.8	7.5
18 years and over	74.4	73.9
65 years and over	11.0	10.3
Median age	36.6	33.8
Race/Ethnicity (%)		
White	53.9	50.7
Hispanic or Latino	28	47.3
Black or African American	7.3	8.8
American Indian and Alaska Native	1.1	0.5
Asian	16.7	13
Native Hawaiian and Other Pacific Islander	1.1	0.3
Some other race	14.9	23.6
Occupation (%)		
Management, Professional, and Related Occupations	35.4	34.1
Service	14.8	17.5
Sales and Office	30.8	26.1
Farming, Fishing, Forestry	0.0	0.3
Construction, Extraction, Maintenance, Repair	8.6	8.7
Production, Transportation, Material Moving	10.3	13.4

Table A-16. Long Beach—Los Angeles County

Total Population	462,823	9,785,295
Median Household Income (in dollars)	50,040	54,828
Individuals Below Poverty Level (%)	18.8	15.4
High School Graduate or Higher (%)	78.3	75.5
Unemployment rate (%)	5.8	5
Renter Occupied Housing (%)	57.5	51.4
Severe Overcrowding (%)	5.1	4.6
Mode of Transportation to Work		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Mean Travel Time to Work (in minutes; workers 16 and over)	28.2	29
Car, truck, or van – drove alone (%)	71.8	72.2
Car, truck, or van – carpooled (%)	11.9	11.6
Public Transportation (excluding taxicab) (%)	7.5	7
Walked (%)	2.7	2.8
Other Means (%)	2.2	2.1
Worked at Home (%)	3.9	4.3
Age (%)		
Under 5 years	8.2	7.5
18 years and over	72.6	73.9
65 years and over	8.8	10.3
Median age	32.2	33.8
Race/Ethnicity (%)		
White	45.0	50.7
Hispanic or Latino	40	47.3
Black or African American	13.6	8.8
American Indian and Alaska Native	0.5	0.5
Asian	12.9	13
Native Hawaiian and Other Pacific Islander	0.8	0.3
Some other race	22.8	23.6
Occupation (%)		
Management, Professional, and Related Occupations	33.2	34.1
Service	19.0	17.5
Sales and Office	26.8	26.1
Farming, Fishing, Forestry	0.2	0.3
Construction, Extraction, Maintenance, Repair	7.8	8.7
Production, Transportation, Material Moving	13.0	13.4

Table A-17. Lynwood—Los Angeles County

Total Population	69,700	9,785,295
Median Household Income (in dollars)	42,649	54,828
Individuals Below Poverty Level (%)	20.0	15.4
High School Graduate or Higher (%)	49.8	75.5
Unemployment rate (%)	6.0	5
Renter Occupied Housing (%)	50.8	51.4
Severe Overcrowding (%)	9.9	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	26.6	29
Car, truck, or van – drove alone (%)	70.9	72.2
Car, truck, or van – carpooled (%)	16.1	11.6
Public Transportation (excluding taxicab) (%)	5.6	7
Walked (%)	3.3	2.8
Other Means (%)	2.3	2.1
Worked at Home (%)	1.8	4.3
Age (%)		
Under 5 years	9.2	7.5
18 years and over	67.0	73.9
65 years and over	4.2	10.3
Median age	27.4	33.8
Race/Ethnicity (%)		
White	36.6	50.7
Hispanic or Latino	83.2	47.3
Black or African American	11.2	8.8
American Indian and Alaska Native	0.7	0.5
Asian	0.9	13
Native Hawaiian and Other Pacific Islander	0.4	0.3
Some other race	47.7	23.6
Occupation (%)		
Management, Professional, and Related Occupations	11.4	34.1
Service	17.8	17.5
Sales and Office	27.1	26.1
Farming, Fishing, Forestry	0.6	0.3
Construction, Extraction, Maintenance, Repair	12.8	8.7
Production, Transportation, Material Moving	30.3	13.4

Table A-18. Maywood—Los Angeles County

Total Population	28,080	9,785,295
Median Household Income (in dollars)	37,974	54,828
Individuals Below Poverty Level (%)	20.9	15.4
High School Graduate or Higher (%)	43.8	75.5
Unemployment rate (%)	6.7	5
Renter Occupied Housing (%)	72.5	51.4
Severe Overcrowding (%)	10.5	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	29.2	29
Car, truck, or van – drove alone (%)	65.6	72.2
Car, truck, or van – carpooled (%)	15.3	11.6
Public Transportation (excluding taxicab) (%)	8.0	7
Walked (%)	5.4	2.8
Other Means (%)	3.1	2.1
Worked at Home (%)	2.7	4.3
Age (%)		
Under 5 years	10.7	7.5
18 years and over	65.1	73.9
65 years and over	4.8	10.3
Median age	26.8	33.8
Race/Ethnicity (%)		
White	51.4	50.7
Hispanic or Latino	97.4	47.3
Black or African American	0.7	8.8
American Indian and Alaska Native	0.7	0.5
Asian	0.6	13
Native Hawaiian and Other Pacific Islander	0.0	0.3
Some other race	44.7	23.6
Occupation (%)		
Management, Professional, and Related Occupations	10.4	34.1
Service	19.7	17.5
Sales and Office	20.4	26.1
Farming, Fishing, Forestry	0.5	0.3
Construction, Extraction, Maintenance, Repair	17.1	8.7
Production, Transportation, Material Moving	31.8	13.4

Table A-19. Montebello—Los Angeles County

Total Population	61,711	9,785,295
Median Household Income (in dollars)	51,449	54,828
Individuals Below Poverty Level (%)	14.7	15.4
High School Graduate or Higher (%)	70.3	75.5
Unemployment rate (%)	5.3	5
Renter Occupied Housing (%)	51.9	51.4
Severe Overcrowding (%)	3.1	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	28.0	29
Car, truck, or van – drove alone (%)	75.7	72.2
Car, truck, or van – carpooled (%)	13.0	11.6
Public Transportation (excluding taxicab) (%)	6.6	7
Walked (%)	1.4	2.8
Other Means (%)	1.4	2.1
Worked at Home (%)	1.8	4.3
Age (%)		
Under 5 years	7.8	7.5
18 years and over	72.9	73.9
65 years and over	13.3	10.3
Median age	33.5	33.8
Race/Ethnicity (%)		
White	49.7	50.7
Hispanic or Latino	78.2	47.3
Black or African American	1.3	8.8
American Indian and Alaska Native	1.4	0.5
Asian	10.1	13
Native Hawaiian and Other Pacific Islander	0.0	0.3
Some other race	35.7	23.6
Occupation (%)		
Management, Professional, and Related Occupations	28.1	34.1
Service	18.0	17.5
Sales and Office	27.8	26.1
Farming, Fishing, Forestry	0.2	0.3
Construction, Extraction, Maintenance, Repair	8.0	8.7
Production, Transportation, Material Moving	17.9	13.4

Table A-20. Norwalk—Los Angeles County

Total Population	102,910	9,785,295
Median Household Income (in dollars)	59,070	54,828
Individuals Below Poverty Level (%)	10.3	15.4
High School Graduate or Higher (%)	71.6	75.5
Unemployment rate (%)	5.9	5
Renter Occupied Housing (%)	33.8	51.4
Severe Overcrowding (%)	3.9	4.6
Mode of Transportation to Work	TO THE STATE OF	
Mean Travel Time to Work (in minutes; workers 16 and over)	27.7	29
Car, truck, or van – drove alone (%)	75.3	72.2
Car, truck, or van – carpooled (%)	15.1	11.6
Public Transportation (excluding taxicab) (%)	3.6	7
Walked (%)	1.9	2.8
Other Means (%)	2.0	2.1
Worked at Home (%)	2.2	4.3
Age (%)		
Under 5 years	7.5	7.5
18 years and over	71.4	73.9
65 years and over	9.8	10.3
Median age	31.9	33.8
Race/Ethnicity (%)		
White	53.0	50.7
Hispanic or Latino	67.1	47.3
Black or African American	5.4	8.8
American Indian and Alaska Native	0.4	0.5
Asian	13.2	13
Native Hawaiian and Other Pacific Islander	0.1	0.3
Some other race	25.4	23.6
Occupation (%)		
Management, Professional, and Related Occupations	23.0	34.1
Service	16.9	17.5
Sales and Office	31.4	26.1
Farming, Fishing, Forestry	0.6	0.3
Construction, Extraction, Maintenance, Repair	10.0	8.7
Production, Transportation, Material Moving	18.2	13.4

Table A-21. Paramoun—Los Angeles County

Total Population	55,106	9,785,295
Median Household Income (in dollars)	42,588	54,828
Individuals Below Poverty Level (%)	18.4	15.4
High School Graduate or Higher (%)	57.8	75.5
Unemployment rate (%)	6.0	5
Renter Occupied Housing (%)	54.4	51.4
Severe Overcrowding (%)	5.6	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	26.3	29
Car, truck, or van – drove alone (%)	73.4	72.2
Car, truck, or van – carpooled (%)	14.5	11.6
Public Transportation (excluding taxicab) (%)	4.8	7
Walked (%)	2.2	2.8
Other Means (%)	3.6	2.1
Worked at Home (%)	1.5	4.3
Age (%)	The second of the second	
Under 5 years	9.5	7.5
18 years and over	65.9	73.9
65 years and over	6.1	10.3
Median age	27.9	33.8
Race/Ethnicity (%)		
White	32.5	50.7
Hispanic or Latino	78.3	47.3
Black or African American	10.9	8.8
American Indian and Alaska Native	0.7	0.5
Asian	2.1	13
Native Hawaiian and Other Pacific Islander	1.1	0.3
Some other race	50.2	23.6
Occupation (%)		BY BUILDING TO THE
Management, Professional, and Related Occupations	15.7	34.1
Service	17.2	17.5
Sales and Office	25.5	26.1
Farming, Fishing, Forestry	0.1	0.3
Construction, Extraction, Maintenance, Repair	12.1	8.7
Production, Transportation, Material Moving	29.3	13.4

Table A-22. Pico Rivera—Los Angeles County

Total Population	63,026	9,785,295
Median Household Income (in dollars)	58,179	54,828
Individuals Below Poverty Level (%)	9.4	15.4
High School Graduate or Higher (%)	64.5	75.5
Unemployment rate (%)	3.7	5
Renter Occupied Housing (%)	31.6	51.4
Severe Overcrowding (%)	4.5	4.6
Mode of Transportation to Work	Design Co.	
Mean Travel Time to Work (in minutes; workers 16 and over)	29.2	29
Car, truck, or van – drove alone (%)	76.9	72.2
Car, truck, or van – carpooled (%)	12.4	11.6
Public Transportation (excluding taxicab) (%)	3.3	7
Walked (%)	1.9	2.8
Other Means (%)	1.5	2.1
Worked at Home (%)	3.9	4.3
Age (%)		
Under 5 years	7.0	7.5
18 years and over	73.4	73.9
65 years and over	12.0	10.3
Median age	33.4	33.8
Race/Ethnicity (%)	CHEET CONTRACTOR	
White	59.2	50.7
Hispanic or Latino	91.6	47.3
Black or African American	0.6	8.8
American Indian and Alaska Native	0.8	0.5
Asian	2.1	13
Native Hawaiian and Other Pacific Islander	0.2	0.3
Some other race	35.0	23.6
Occupation (%)		
Management, Professional, and Related Occupations	20.0	34.1
Service	17.9	17.5
Sales and Office	31.4	26.1
Farming, Fishing, Forestry	0.3	0.3
Construction, Extraction, Maintenance, Repair	10.6	8.7
Production, Transportation, Material Moving	20.0	13.4

Table A-23. Santa Fe Springs—Los Angeles County

Total Population	16,895	9,785,295
Median Household Income (in dollars)	55,057	54,828
Individuals Below Poverty Level (%)	9.3	15.4
High School Graduate or Higher (%)	73.6	75.5
Unemployment rate (%)	5.1	5
Renter Occupied Housing (%)	44.1	51.4
Severe Overcrowding (%)	4.8	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	28.7	29
Car, truck, or van – drove alone (%)	80.4	72.2
Car, truck, or van – carpooled (%)	11.2	11.6
Public Transportation (excluding taxicab) (%)	3.3	7
Walked (%)	2.1	2.8
Other Means (%)	1.7	2.1
Worked at Home (%)	1.4	4.3
Age (%)		
Under 5 years	6.3	7.5
18 years and over	71.5	73.9
65 years and over	12.8	10.3
Median age	33.0	33.8
Race/Ethnicity (%)	Artist Hotel Street	
White	59.8	50.7
Hispanic or Latino	80.6	47.3
Black or African American	2.8	8.8
American Indian and Alaska Native	2.0	0.5
Asian	3.0	13
Native Hawaiian and Other Pacific Islander	0.0	0.3
Some other race	30.5	23.6
Occupation (%)		
Management, Professional, and Related Occupations	25.9	34.1
Service	17.2	17.5
Sales and Office	29.2	26.1
Farming, Fishing, Forestry	0.0	0.3
Construction, Extraction, Maintenance, Repair	6.1	8.7
Production, Transportation, Material Moving	21.5	13.4

Table A-24. Signal Hill—Los Angeles County

Total Population	10,777	9,785,295
Median Household Income (in dollars)	69,353	54,828
Individuals Below Poverty Level (%)	7.3	15.4
High School Graduate or Higher (%)	92.1	75.5
Unemployment rate (%)	6.9	5
Renter Occupied Housing (%)	50.0	51.4
Severe Overcrowding (%)	2.8	4.6
Mode of Transportation to Work		<b>第二人员会工作发生</b>
Mean Travel Time to Work (in minutes; workers 16 and over)	25.4	29
Car, truck, or van – drove alone (%)	80.3	72.2
Car, truck, or van – carpooled (%)	9.9	11.6
Public Transportation (excluding taxicab) (%)	3.2	7
Walked (%)	0.0	2.8
Other Means (%)	1.3	2.1
Worked at Home (%)	5.3	4.3
Age (%)		
Under 5 years	8.5	7.5
18 years and over	76.4	73.9
65 years and over	6.4	10.3
Median age	34.3	33.8
Race/Ethnicity (%)		
White	38.4	50.7
Hispanic or Latino	29.1	47.3
Black or African American	10.9	8.8
American Indian and Alaska Native	1.0	0.5
Asian	26.7	13
Native Hawaiian and Other Pacific Islander	0.7	0.3
Some other race	14.5	23.6
Occupation (%)		
Management, Professional, and Related Occupations	46.2	34.1
Service	10.9	17.5
Sales and Office	29.8	26.1
Farming, Fishing, Forestry	0.5	0.3
Construction, Extraction, Maintenance, Repair	2.9	8.7
Production, Transportation, Material Moving	9.7	13.4

Table A-25. South Gate—Los Angeles County

Total Population	96,360	9,785,295
Median Household Income (in dollars)	42,556	54,828
Individuals Below Poverty Level (%)	17.4	15.4
High School Graduate or Higher (%)	49.4	75.5
Unemployment rate (%)	5.4	5
Renter Occupied Housing (%)	54.9	51.4
Severe Overcrowding (%)	8.1	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	29	29
Car, truck, or van – drove alone (%)	73.2	72.2
Car, truck, or van – carpooled (%)	13.6	11.6
Public Transportation (excluding taxicab) (%)	7.2	7
Walked (%)	2.2	2.8
Other Means (%)	2.1	2.1
Worked at Home (%)	1.7	4.3
Age (%)		
Under 5 years	9.7	7.5
18 years and over	67.5	73.9
65 years and over	6.6	10.3
Median age	28.5	33.8
Race/Ethnicity (%)		
White	50.8	50.7
Hispanic or Latino	94.7	47.3
Black or African American	0.4	8.8
American Indian and Alaska Native	0.6	0.5
Asian	0.7	13
Native Hawaiian and Other Pacific Islander	0.0	0.3
Some other race	46.0	23.6
Occupation (%)		
Management, Professional, and Related Occupations	14.3	34.1
Service	19.1	17.5
Sales and Office	29.4	26.1
Farming, Fishing, Forestry	0.5	0.3
Construction, Extraction, Maintenance, Repair	11.5	8.7
Production, Transportation, Material Moving	25.2	13.4

Table A-26. Vernon—Los Angeles County

Total Population	63	9,785,295
Median Household Income (in dollars)	76,563	54,828
Individuals Below Poverty Level (%)	17.5	15.4
High School Graduate or Higher (%)	66.0	75.5
Unemployment rate (%)	5.7	5
Renter Occupied Housing (%)	82.6	51.4
Severe Overcrowding (%)	0.0	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	28	29
Car, truck, or van – drove alone (%)	95	72.2
Car, truck, or van – carpooled (%)	0.0	11.6
Public Transportation (excluding taxicab) (%)	0.0	7
Walked (%)	5.0	2.8
Other Means (%)	0.0	2.1
Worked at Home (%)	0.0	4.3
Age (%)		
Under 5 years	0.0	7.5
18 years and over	84.1	73.9
65 years and over	22.2	10.3
Median age	34.5	33.8
Race/Ethnicity (%)		
White	61.9	50.7
Hispanic or Latino	74.6	47.3
Black or African American	0.0	8.8
American Indian and Alaska Native	3.2	0.5
Asian	11.1	13
Native Hawaiian and Other Pacific Islander	0.0	0.3
Some other race	17.5	23.6
Occupation (%)		CE MARIE RESERVAN
Management, Professional, and Related Occupations	30.0	34.1
Service	25.0	17.5
Sales and Office	22.5	26.1
Farming, Fishing, Forestry	0.0	0.3
Construction, Extraction, Maintenance, Repair	17.5	8.7
Production, Transportation, Material Moving	5.0	13.4

Table A-27. Whittier—Los Angeles County

Total Population	82,169	9,785,295
Median Household Income (in dollars)	64,973	54,828
Individuals Below Poverty Level (%)	8.0	15.4
High School Graduate or Higher (%)	82.4	75.5
Unemployment rate (%)	4.5	5
Renter Occupied Housing (%)	33.1	51.4
Severe Overcrowding (%)	2.1	4.6
Mode of Transportation to Work		
Mean Travel Time to Work (in minutes; workers 16 and over)	29.5	29
Car, truck, or van – drove alone (%)	79.7	72.2
Car, truck, or van – carpooled (%)	10.2	11.6
Public Transportation (excluding taxicab) (%)	2.7	7
Walked (%)	2.6	2.8
Other Means (%)	1.9	2.1
Worked at Home (%)	2.9	4.3
Age (%)		
Under 5 years	7.1	7.5
18 years and over	73.0	73.9
65 years and over	11.4	10.3
Median age	34.3	33.8
Race/Ethnicity (%)		
White	58.0	50.7
Hispanic or Latino	64.5	47.3
Black or African American	0.9	8.8
American Indian and Alaska Native	0.9	0.5
Asian	3.2	13
Native Hawaiian and Other Pacific Islander	0.2	0.3
Some other race	33.8	23.6
Occupation (%)	NT PARTY	
Management, Professional, and Related Occupations	34.2	34.1
Service	14.1	17.5
Sales and Office	30.3	26.1
Farming, Fishing, Forestry	0.2	0.3
Construction, Extraction, Maintenance, Repair	8.6	8.7
Production, Transportation, Material Moving	12.5	13.4

# Appendix B

The tables below present data from the 2007 Los Angeles County Health Survey, and compare the Gateway Cities health districts (HD 6, HD 12, HD 16, HD 40, HD 58, HD 91) to Los Angeles County.

Estimates are based on self-reported data by a random sample of 7,200 Los Angeles County adults, representative of the adult population in Los Angeles County. 95% confidence intervals are available but not included here because of the amount of data already being presented. It should be noted that some of the estimates presented in the tables below may be statistically unstable (relative standard error >23%) and therefore may not be appropriate to use for planning or policy purposes. For more about the Los Angeles County Health Survey, including methodology and to access the survey tool, please visit <a href="https://www.publichealth.lacounty.gov/ha/hasurveyintro.htm">www.publichealth.lacounty.gov/ha/hasurveyintro.htm</a>

Table B-1. Children's Asthma Prevalence, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
7.9%	8.8%	11.3%	7.0%	10.6%	8.1%	11.2%

#### Table B-2. Average Days of School/Daycare Missed Due to Asthma in Past Year, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
3.1	2.5	3.7	1.6	3.8	2.2	4.3

#### Table B-3. Adult Asthma Prevalence, 2005

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
6.5%	8.0%	8.2%	2.9%	7.0%	4.1%	4.7%

#### Table. B-4. Prevalence of Diabetes Among Adults, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Diabetes	8.7%	11.3%	12.4%	11.0%	8.3%	9.5%	12.7%

#### Table B-5. Prevalence of Hypertension Among Adults, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hypertension	24.7%	26.4%	32%	28.3%	24%	19.6%	29.1%

# Table B-6. Prevalence of Heart Disease and High Cholesterol, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Heart Disease	7.7%	7.9%	7.7%	8.9%	10.3%	6.9%	6.9%
Cholesterol	29.1%	35.1%	30.1%	27.9%	28.2%	23.5%	35.6%

# Table B-7. Obesity and Overweight Prevalence in Adults, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Obese	22.2%	24%	34%	25.7%	31.2%	28.9%	27.4%
Overweight	35.9%	35.6%	37%	40.7%	36.9%	35.2%	47.3%

# Table B-8. Percentage of Adults Who Do Not Meet Physical Activity Guidelines, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
46.9%	39.1%	50.7%	47.2%	55.5%	51.7%	54.2%

# Table B-9. Percentage of Children Who Do Not Meet Physical Activity Guidelines, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
62.4%	51.7%	64.1%	66.3%	59.2%	52%	58.1%

# Table B-10. Adult Depression, 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Depression	13.6%	10.7%	12.7%	15.2%	17%	14.2%	14.5%

# Table B-11. Activity Limitation Days for Adults, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
2.1	1.8	3.0	1.3	1.9	2.7	2.2

#### Table B-12. Adult Unhealthy Days, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
5.4 days	5.2 days	5.3 days	5.3 days	7 days	5.1 days	5 days

# Table B-13. Adults Who Could Not Afford Dental Care, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
22.3%	19.6%	24.1%	23.8%	19.4%	29%	22.7%

# Table B-14. Parents Who Could Not Afford Dental Care for Their Children, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
15.3%	14.2%	17%	12.1%	14.4%	21%	17.7%

#### Table B-15. Adults Who Do Not Have Dental Insurance Coverage, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
43%	36.2%	42.2%	50.4%	38.3%	54.1%	39.1%

# Table B-16. Children Who Do Not Have Dental Insurance Coverage, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
27.2%	24.1%	22.9%	31.5%	24%	30.5%	26.7%

# Table B-17. Adults Who Could Not Afford to See a Doctor for a Health Problem, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
11.8%	8.1%	14%	12.3%	8.3%	16.1%	10.3%

# Table B-18. Parents Who Could Not Afford a Medical Check-Up or Physical Exam for Their Child, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
7.2%	7.7%	7.8%	9.8%	5%	8.8%	5.6%

# Table B-19. Parents Who Could Not Afford for Their Child to See a Doctor for Illness, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
7.2%	3.3%	8.1%	7.7%	7.2%	11.9%	6.8%

# Table B-20. Adults Who Could Not Afford Mental Health Care, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
5.9%	3%	9.3%	5%	5.1%	5.3%	4.6%

#### Table B-21. Adults Who Could Not Afford Prescription Medication, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
12.1%	11.7%	22.7%	12.7%	7.5%	17.7%	11%

# Table B-22. Parents Who Could Not Afford Prescription Medication for Their Children, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
8.5%	5.4%	9.9%	8.2%	9.7%	12.4%	9.4%

#### Table B-23. Adults Who Do Not Have a Regular Source of Health Care, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
19.2%	17.0%	14.9%	22.4%	14%	23.1%	15.5%

# Table B-24. Parents Who Reported No Regular Source of Health Care for Their Children, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
7.4%	6.2%	6.6%	4.7%	7.3%	9.1%	7.7%

#### Table B-25. Adults Who Had Difficulty Accessing Medical Care, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
27.3%	20%	30.2%	27.5%	22.2%	37.8%	22.2%

# Table B-26. Parents Who Had Difficulty Accessing Medical Care for Their Children, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
14.7%	14.4%	16.3%	17.8%	10.1%	18.6%	9.3%

# Table B-27. Adults Who Had Difficulty Accessing Medical Care Due to Transportation Problems, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
7.4%	7%	11.3%	8.3%	9%	8.4%	3.8%

# Table B-28. Parents Who Had Difficulty Accessing Medical Care for Their Children Due to Transportation Problems, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
5.9%	3.0%	13.5%	8.9%	6.7%	6.6%	8.6%

# Table B-29. Adults Who Find That the Availability of Quality, Affordable Healthcare Services in Their Community is Fair/Poor, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
46.4%	39%	84.4%	42.9%	45.3%	38.2%	71.6%

#### Table B-30. Currently Insured Adults Who Were Uninsured at Some Point in the Past Year, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
9.6%	9.7%	7.8%	7.7%	7.9%	18.6%	4.8%

# Table B-31. Employed Adults Without Paid Sick Leave, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
53.7%	47.1%	28.8%	-	37.4%	48.3%	-

# Table B-32. Uninsured Adults (18+ years old), 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
19.1%	15.6%	14.6%	23.4%	16%	28.6%	16.8%

# Table B-33. Uninsured Children (0-17 years), 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
7%	8.7%	7.5%	10.3%	-	10.9%	4.9%

# Table B-34. Type of Insurance for (Insured) Adults (65 years and under), 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Medi-Cal	15.8%	10.2%	27.7%	26.6%	19.4%	26.8%	7.6%
Medicare	1.3%	-	6.7%	-	-	2.3%	-
Private	60.8%	71.7%	48.9%	45.4%	62.4%	39.5%	70.5%
Type of insu	rance for non-e	lderly adults (2	18-64 years old	d)			

# Table B-35. Type of Insurance for Insured Older Adults (65+ years old), 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Medi-Medi	26.8%	22.0%	34.3%	50.6%	19.8%	23.8%	21.9%
Medicare & Private	28.9%	27.7%	22.6%	18.7%	31.3%	26.0%	37.1%
Medicare (only)	33.8%	40.5%	31.2%	20.6%	30.2%	35.8%	37.4%
Medi-Cal (w/o Medicare)	2.7%	-	-	-	-	-	-
Private	6.3%	-	-	-	10.7%	14.4%	-
Type of insurance	for older adu	lts (65+ years	old)				

# Table B-36. Type of Insurance for Children (0-17 years), 2007

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Healthy Families	10.7%	12.7%	14.2%	16.9%	7.7%	13.9%	13.4%
Medi-Cal	35.6%	18.7%	51.6%	45.0%	41.7%	41.3%	28.1%
Private	45.4%	59.3%	26.0%	25.8%	47.4%	32.1%	51.7%
Insurance type	es for children 0-1	7 years old					

# Table B-37. Self-Reported Fair/Poor Health Status Among Adults, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
18.5%	15%	27.4%	24.3%	17.9%	20.6%	18.6%

# Table B-38. Fair/Poor Health Status Reported for Children, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
8.4%	8.4%	10.7%	7.5%	6.8%	13.5%	8.3%

# Table B-39. Frequent Mental Distress Among Adults, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
9.3%	8.6%	8.5%	8.4%	11.4%	12%	10.4%

# Table B-40. Adults at Risk for Serious Mental Illness, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
4.7%	7.8%	7.6%	-	3.2%	6.1%	2.5%

# Table B-41. Adults Receiving Mental Health Counseling, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
5.5%	4.3%	-	4.6%	4.5%	5.6%	2.5%

# Table B-42. Seriousness of Methamphetamine Use in the Community, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
57.7%	58.9%	51.5%	61.1%	62%	74.4%	60.6%

# Table B-43. Poor Availability of Quality of Fresh Fruit and Vegetables, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
5.4%	6.7%	6.7%	5.9%	4.9%	4.4%	2.7%

# Table B-44. Adult Fast Food Consumption, 2007

LA County	Bellflower	Compton (HD	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
40.2%	48.4%	44.1%	37%	46.3%	48.8%	47.3%

# Table B-45. Adults Who Rate Their Diet as Unhealthy, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
12.6%	14.4%	20.6%	17.6%	13.9%	9.6%	19.8%

# Table B-46. Adults Who Currently Smoke, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
14.3%	13.1%	15.3%	14.4%	17.6%	16.9%	10.2%

# Table B-47. Adults Who Did Not Respond That There Are Safe Places to be Physically Active in Their Neighborhood, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
14.2%	10.6%	38.8%	14.7%	21.8%	20.6%	7.3%

# Table B-48. Parents Who Did Not Rate Their Community as a Pleasant Place for Their Child to be Physically Active, 2007

LA County	Bellflower	Compton	East LA	Long Beach	San Antonio	Whittier
	(HD 6)	(HD 12)	(HD 16)	(HD 40)	(HD 58)	(HD 91)
16.6%	10.3%	25%	14.9%	15.6%	17.6%	13.1%

# Appendix C

The following tables present hospitalization and emergency department (ED) visit data for facilities within the Gateway Cities health districts as well as for Los Angeles County, for 2009. The rates presented below were prepared by the California Department of Public Health, from data compiled by the Office of Statewide Health Planning and Development (OSHPD). Zip-code level population estimates are from ESRI 2009, and County-level population estimates are from the California Department of Finance, 2009. Further descriptions of the data sources, calculations, and limitations can be at <a href="http://www.ehib.org/page.jsp?page\_key=23">http://www.ehib.org/page.jsp?page\_key=23</a>.

Crude rates (per 10,000 residents) are presented in the tables below for:

- Hospitalizations by health district and for Los Angeles County, by race/ethnicity
- ED visits by health district and for Los Angeles County, by race/ethnicity

95% confidence intervals are available but not included here because of the amount of data already being presented.

Age-adjusted rates (per 10,000 residents, and 95% confidence intervals) are presented in the tables below for are presented in the tables below for:

- Hospitalizations by health district and for Los Angeles County, by age, and by sex
- ED visits by health district and for Los Angeles County, by age, and by sex

The following are the ICD9 codes (International Statistical Classification of Diseases and Related Health Problems) for the health outcomes that are listed in the tables below.

Causes for Hospitalization and ED visits	ICD-9 Code			
All Causes	<all codes=""></all>			
All Internal Causes	0-799.9			
Acute Renal Failure	584			
Asthma	493			
Cerebrovascular Disease	430-438			
Cardiovascular (CVD) Disease	390-398, 402, 404-429, 440-448			
Depression	300			
Diabetes	250			
Acute Myocardial Infarction (MI)	410			
Nephritis	580-589			
Respiratory Illness	460-519			

Additional considerations that were made for the preparation of this data:

Counts less than 5 were suppressed.

- All rates are per 10,000 California residents. There was an effort to de-duplicate the hospitalization records, i.e., remove multiple records for the same person, same event. This is different from repeat visits (i.e., same person, separate events), which were not removed.
- As is common with most demographic data, race and ethnicity are collected/estimated as separate variables.
- In the OSHPD data, the race/ethnicity of the patient is how the individual self-identifies (or is reported by parent in the case of a child). If they refuse or don't know, it's listed as 'unknown.'
- In the population data (ESRI), there is a separate category for multiple races. OSHPD data does not have a separate multi-race category; the documentation states: 'Multiracial patients may choose any one of the categories that is at least partially accurate (including "other")'. So for this analysis, those identifying as "multiple races" is included in the "Non-Hispanic Other" category, and bias is assumed to be random.
- Zip codes do not have exact spatial boundaries, change very frequently, and can cross city and county boundaries. They have been known to change from year to year, and sometimes, within a year.

## C.1 All Hospitalizations

Table C-1. Crude Rates (per 10,000 residents) for All Hospitalizations for Gateway Cities Health
Districts, by Race and Ethnicity

Race	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	882.72	951.09	985.52	1060.61	843.69	901.18	839.34
Non-Hispanic API	684.3	697.68	1150.29	851.12	897.47	699.82	587.94
Non-Hispanic Black	1640.53	1570.85	1834.7	2798.01	1732.6	2228.76	1588.57
Non-Hispanic Other	2182.91	1424.34	3423.25	2511.76	761.59	3038	1029.99
Non-Hispanic White	1282.19	1760.17	4013.81	3109.98	1671.11	1895.48	1338.68

Table C-2. Age-Adjusted Rates (per 10,000 residents) for All Hospitalizations for Gateway Cities Health
Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	2311.95	2058.04	2222.7	2143	2027.45	1915.12	1634.12
5 to 17 years	196.82	233.61	242.09	237.8	232.77	216.83	174.37
18 to 34 years	844.45	779.75	1007.42	826.85	801	754.86	651.84

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
35 to 64 years	838.62	970.97	1441.47	959.39	1171.86	909.57	792.63
65 years and over	3003.73	3499.48	4602.62	3764.2	3408.07	4077.36	2824.68
Female	1225.78	1292.19	1738.14	1391.54	1374.45	1362	1045.4
Male	970.34	1083.94	1409.49	1078.64	1135.71	1072.28	882.75
Total	1094.43	1182.44	1568.46	1228.98	1250.79	1213.04	958.48

# C.2 Emergency Department Visits

Table C-3. Crude Rates (per 10,000 residents) for All ED Visits for Gateway Cities Health Districts, by Race and Ethnicity

Race	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	2619.06	2728.75	2773.77	3012.68	2459.65	2622.87	2641.8
Non-Hispanic API	1071.45	1195.25	1616.86	1268.19	1447.01	1116.95	927.44
Non-Hispanic Black	4988.35	5378.73	5288.76	10976.82	6166.83	6517.56	4358.91
Non-Hispanic Other	7908.93	4741.94	12939.38	9200.38	3142.77	9437.82	2815.88
Non-Hispanic White	2841.87	3859.56	8488.1	7693.74	3686	3829.89	2763.86

Table C-4. Age-Adjusted Rates (per 10,000 residents) for All ED Visits for Gateway Cities Health
Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	5171.65	4446.07	5555.94	5517.22	4199.17	4774.03	4179.78
5 to 17 years	1897.34	2000.08	2165.42	2189.54	1960.16	1986.77	1904.82
18 to 34 years	2822.89	2581.93	3161.75	2592.69	2753.94	2270.02	2326.03
35 to 64 years	2346.88	2655.38	3851.1	2916.68	3353.13	2557.84	2238.08
65 years and over	4291.14	5050.65	6927.76	5652.67	4775.81	5965.03	4217.76
Female	2988.87	3123.27	4235.53	3495.85	3416.02	3235.61	2757.77
Male	2638.35	2758.55	3516.74	2955.05	2965.95	2686.63	2402.58
Total	2813.16	2941.34	3880.53	3230.22	3190.19	2967.44	2580

## C.3 Asthma

Table C-5. Crude Rates (per 10,000 residents) for Asthma Hospitalizations for Gateway Cities Health
Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	9.51	8.96	10.65	11.96	8.17	13.68	8.8
Non-Hispanic API	6.05	7.51	17.2	n/a	9.85	7.76	3.78
Non-Hispanic Black	31.57	30.84	41.76	n/a	33.32	47.09	15.45
Non-Hispanic Other	22.75	13.6	63.96	28.22	7.19	60.72	12.29
Non-Hispanic White	10.27	17.04	53.72	22	13.98	19.8	11.32

Table C-6. Age-Adjusted Rates (per 10,000 residents) for Asthma Hospitalizations for Gateway Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	22.44	20.37	28.98	17.02	25.21	22.71	16.11
5 to 17 years	8.68	10.05	13.03	7.24	9.06	8.53	7.39
18 to 34 years	3.94	2.94	4.52	2.87	4.79	4.12	3.25
35 to 64 years	10.03	10.14	28.95	13.29	14.7	14.23	8.3
65 years and over	29.21	37.11	61.39	42.85	28.57	78.54	22.6
Female	13.13	13.3	29.24	17.79	15.64	22.21	10.46
Male	9.88	11.53	18.49	8.5	11.63	15.93	7.77
Total	11.65	12.57	24.4	13.73	13.83	19.53	9.31

Table C-7. Crude Rates (per 10,000 residents) for ED Visits for Asthma for Gateway Cities Health
Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	47.54	47.86	46.99	51.94	39.52	47.93	50.25
Non-Hispanic API	13.75	17.22	30.1	12.12	25.13	11.2	13.01

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Non-Hispanic Black	146.33	48.33	180.56	248.34	193.59	190.31	144.18
Non-Hispanic Other	124.95	79.22	289.21	108.18	62.83	146.17	35.64
Non-Hispanic White	33.61	180.94	125.86	93.06	48.59	44.64	41.35

Table C-8. Age-Adjusted Rates (per 10,000 residents) for Asthma ED Visits for Gateway Cities Health
Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	111.4	99.79	148.11	85.62	112.75	100.09	103.32
5 to 17 years	68.23	78.43	95.07	54.57	73.89	60.8	64.87
18 to 34 years	41.93	41.98	52.66	37.45	45.57	28.47	34.8
35 to 64 years	35.57	35.29	77	50.11	56.05	37.04	34.84
65 years and over	40.63	43.46	93.73	66.16	44.37	82.61	38.71
Female	51.8	52.49	89.89	58.09	62.22	52.16	47.21
Male	45.91	47.53	72.19	45.58	55.84	45.9	43.36
Total	49.08	50.47	81.81	52.51	59.43	49.66	45.72

# C.4 Respiratory Illness

Table C-9. Crude Rates (per 10,000 residents) for Respiratory Illness Hospitalizations for Gateway
Cities Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	58.12	73.76	62.52	75.4	51.24	64.32	57.41
Non-Hispanic API	53.51	55.66	184.91	73.96	74.96	68.09	36.93
Non-Hispanic Black	149.19	144.75	176.34	331.13	146.78	274.67	97.84
Non-Hispanic Other	157.97	108.03	369.86	192.85	44.6	283.34	67.6
Non-Hispanic White	107.53	167	396.01	253.81	139.9	195.02	119.99

Table C-10. Crude Rates (per 10,000 residents) for Respiratory Illness ED Visits for Gateway Cities
Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	390.68	391.49	399.96	457.48	323.81	409.6	360.32
Non-Hispanic API	116.49	133.45	258.01	121.24	170.9	132.72	94.42
Non-Hispanic Black	621.92	759.11	673.96	1357.62	787.36	873.06	581.87
Non-Hispanic Other	911.87	580.14	1865.96	1161.81	389.91	1178.32	296.21
Non-Hispanic White	273.06	375.59	917.88	869.71	342.63	342.37	262.37

## C.5 Acute Renal Failure

Table C-11. Crude Rates (per 10,000 residents) for Acute Renal Failure Hospitalizations for Gateway

Cities Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	4.89	5.65	4.05	5.14	4.34	5.04	6.65
Non-Hispanic API	7.13	6.34	23.65	15.76	8.85	13.79	6.71
Non-Hispanic Black	18.76	23.03	20.04	n/a	16.5	17.66	n/a
Non-Hispanic Other	15.52	12.8	72.14	n/a	4.8	31.48	14.75
Non-Hispanic White	12.47	21.37	n/a	20.3	14.14	23.83	15.25

Table C-12. Age-Adjusted Rates (per 10,000 residents) for Acute Renal Failure Hospitalizations for Gateway Cities Health Districts Error! Bookmark not defined.

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	0.11	n/a	n/a	n/a	n/a	n/a	n/a
5 to 17 years	0.18	n/a	n/a	n/a	n/a	n/a	n/a
18 to 34 years	1.17	0.99	1.42	1.13	1.01	1.38	1.57
35 to 64 years	5.94	7.99	12.34	5.86	9.29	6.69	7.03
65 years and over	53.46	71.87	97.88	43.08	58.4	69.95	48.1

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Female	7.61	10.36	13.93	7.01	9.12	10.91	8.15
Male	11.65	15.15	22.43	9.41	13.73	13.24	10.37
Total	9.35	12.39	17.51	7.96	11.21	11.83	9.14

Table C-13. Crude Rates (per 10,000 residents) for Acute Renal Failure ED Visits for Gateway Cities
Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	4.08	4.51	3.22	4.46	3.46	4.07	5.42
Non-Hispanic API	5.54	5.18	19.35	10.91	7.85	9.48	4.2
Non-Hispanic Black	15.44	16.45	18.1	n/a	13.65	11.77	n/a
Non-Hispanic Other	12.99	10.4	n/a	n/a	2.88	31.48	11.06
Non-Hispanic White	10.12	18.57	44.51	18.61	10.35	17.45	10.96

Table C-14. Age-Adjusted Rates (per 10,000 residents) for Acute Renal Failure ED Visits for Gateway
Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	n/a	n/a	n/a	n/a	n/a	n/a	n/a
5 to 17 years	0.1	n/a	n/a	n/a	n/a	n/a	n/a
18 to 34 years	1.03	1.01	1.34	1.13	0.94	1.16	1.24
35 to 64 years	4.9	6.54	10.69	4.62	7.74	5.16	5.21
65 years and over	43.45	58.54	78.43	37.18	43.71	55.44	37.68
Female	6.23	8.32	11.95	6.52	6.52	8.33	6.05
Male	9.48	12.59	17.73	7.23	11.46	10.88	8.3
Total	7.64	10.15	14.38	6.78	8.72	9.32	7.07

## C.6 All Internal Causes

Table C-15. Crude Rates (per 10,000 residents) for Hospitalizations for All Internal Causes for Gateway

Cities Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	662.65	729.3	715.26	820.72	625.42	685.29	664.17
Non-Hispanic API	530.23	561.64	982.58	699.56	701.02	580.02	454.49
Non-Hispanic Black	1289.01	1306.85	1549.25	2334.44	1449.52	1928.59	1356.85
Non-Hispanic Other	1678.57	1141.87	2672.41	1984.95	577.91	2462.33	808.75
Non-Hispanic White	1059.71	1502.61	3452.03	2604.06	1392.53	1655.14	1123.73

Table C-16. Age-Adjusted Rates (per 10,000 residents) for Hospitalizations for All Internal Causes for Gateway Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	432.56	468.74	500.13	500.13	415.3	429.45	330.81
5 to 17 years	167.85	196.92	203.85	203.85	197.67	187.35	151.46
18 to 34 years	786.03	725.08	931.45	931.45	742.08	711.79	609.82
35 to 64 years	757.51	877.53	1306.35	1306.35	1062.86	827.71	717.12
65 years and over	2649.28	3183.09	4198.21	4198.21	3010.45	3713.6	2522.11
Female	1010.85	1100.47	1507.68	1507.68	1161	1172.91	885.93
Male	736.61	865.08	1146.2	1146.2	902.01	871.81	698.83
Total	869.52	977.05	1321.5	1321.5	1026.91	1017.34	787.05

Table C-17. Crude Rates (per 10,000 residents) for ED Visits for All Internal Causes for Gateway Cities
Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	2049.04	2117.52	2125.02	2357.23	1944.76	2063.23	2044.24
Non-Hispanic API	826.8	942.32	1384.65	969.93	1165.46	878.22	714.26
Non-Hispanic Black	3946.86	4283.25	4194.54	8758.28	4947.08	5208.95	3406.28
Non-Hispanic	5800.08	3555.25	9505.01	6716.84	2398.93	7180.12	2005.9

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Other							
Non-Hispanic White	2105.76	2928.91	6577.13	5972.93	2796.56	2938.04	2092.32

Table C-18. Age-Adjusted Rates (per 10,000 residents) for ED Visits for All Internal Causes for Gateway

Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	4125.82	3465.14	4340.49	4457.24	3359.48	3794.31	3281.2
5 to 17 years	1278.28	1337.23	1479.15	1509.79	1316.04	1400.56	1254.58
18 to 34 years	2092.44	1946.65	2377.48	1959.07	2112.28	1748.94	1755.83
35 to 64 years	1850.72	2125.39	3126.38	2361.3	2703.3	2082.62	1785.26
65 years and over	3519.46	4157.27	5897.54	4646.25	3985.61	4969.92	3437.87
Female	2402.48	2522.12	3481.47	2876.15	2799.62	2672.67	2217.65
Male	1936.4	2051.26	2664.04	2206.14	2229.42	2042.37	1767.46
Total	2166.84	2284.85	3076.76	2541.41	2512.46	2360.1	1990.66

## C.7 Cerebrovascular Disease

Table C-19. Crude Rates (per 10,000 residents) for Cerebrovascular Disease Hospitalizations for Gateway Cities Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	13.25	14.72	13.25	20.52	10.99	14.94	18.07
Non-Hispanic API	18.29	19.29	17.2	25.46	21.27	15.51	13.43
Non-Hispanic Black	41.11	34.54	54.55	n/a	30.78	45.12	20.6
Non-Hispanic Other	44.37	22.41	72.3	32.93	15.35	65.21	20.89
Non-Hispanic White	31.93	48.59	64.47	113.37	44.04	53.03	36.7

Table C-20. Age-Adjusted Rates (per 10,000 residents) for Cerebrovascular Disease Hospitalizations for Gateway Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	0.53	n/a	n/a	n/a	n/a	n/a	n/a
5 to 17 years	0.24	n/a	n/a	n/a	n/a	n/a	n/a
18 to 34 years	1.66	1.64	2.16	1.52	2.24	1.66	1.15
35 to 64 years	16.95	18.6	38.2	22.02	23.79	23.84	17.91
65 years and over	132.66	164.51	232.1	179.35	155.01	170.23	125.59
Female	22.27	26.02	43.77	29.21	28.87	30.51	20.13
Male	25.48	31.55	44.81	34.61	29.73	31.33	26.87
Total	23.75	28.43	44.65	31.49	29.3	31.12	23.07

Table C-21. Crude Rates (per 10,000 residents) for Cerebrovascular Disease ED Visits for Gateway

Cities Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	12.12	14.66	11.15	18.63	10.48	13.73	16.94
Non-Hispanic API	15.48	17.6	17.2	23.04	20.13	13.79	12.59
Non-Hispanic Black	38.36	34.95	50.45	n/a	28.4	39.24	18.02
Non-Hispanic Other	44.65	24.81	52.84	42.33	9.59	85.45	11.06
Non-Hispanic White	28.79	43.88	42.98	93.06	39.4	50.35	31.58

Table C-22. Age-Adjusted Rates (per 10,000 residents) for Cerebrovascular Disease ED Visits for Gateway Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	0.35	n/a	n/a	n/a	n/a	n/a	n/a
5 to 17 years	0.24	n/a	n/a	n/a	n/a	n/a	n/a
18 to 34 years	1.69	2.3	2.55	1.68	2.18	1.84	1.01
35 to 64 years	16.15	19.29	33.48	20.25	22.72	22.99	16.49

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
65 years and over	117	148.02	200.4	159.57	135.5	155.85	111.48
Female	20.45	24.58	37.79	26.2	26.57	28.27	18.79
Male	22.57	29.52	39.29	31.32	26.15	29.28	23.08
Total	21.46	26.68	38.86	28.35	26.4	29	20.71

# C.8 Cardiovascular Disease (CVD)

Table C-23. Crude Rates (per 10,000 residents) for Cardiovascular Disease (CVD) Hospitalizations for Gateway Cities Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	58.06	61.61	52.77	93.4	44.78	62.23	78.14
Non-Hispanic API	76.61	91.77	122.55	126.09	90.09	87.91	75.96
Non-Hispanic Black	190.12	141.87	239.22	264.9	150.58	192.27	141.61
Non-Hispanic Other	218.75	141.63	325.36	230.48	61.87	260.85	86.04
Non-Hispanic White	156.82	222.84	408.29	458.54	185.03	261.14	187.78

Table C-24. Age-Adjusted Rates (per 10,000 residents) for Cardiovascular Disease (CVD)

Hospitalizations for Gateway Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	2.5	2.04	4.83	n/a	2.1	1.32	2.21
5 to 17 years	1.07	1.88	2.01	n/a	0.93	0.5	n/a
18 to 34 years	8.63	6.37	11.45	103.19	10.1	6.38	5.33
35 to 64 years	83.53	89.65	185.35	809.75	112.49	95.39	85.16
65 years and over	594.22	719.72	896.09	809.75	618.22	788.43	592.37
Female	93.68	108.8	175.15	125.53	109.17	125.01	88.76
Male	128.38	150.51	202.34	166.21	141.86	152.56	134.34
Total	109.6	127.42	187.92	143.63	124.06	138	109.11

Table C-25. Crude Rates (per 10,000 residents) for Cardiovascular Disease (CVD) ED Visits for Gateway

Cities Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	53.44	58.53	48.68	80.23	43.17	58.77	72.17
Non-Hispanic API	62.6	73.91	103.2	89.72	83.38	62.91	59.17
Non-Hispanic Black	190.28	142.28	243.08	281.46	163.44	168.73	139.03
Non-Hispanic Other	216.64	128.03	300.33	211.67	51.32	274.34	63.91
Non-Hispanic White	140.75	196.51	314.66	362.1	167.49	225.9	157.64

Table C-26. Age-Adjusted Rates (per 10,000 residents) for Cardiovascular Disease (CVD) ED Visits for Gateway Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	3.35	2.72	3.76	n/a	2.57	1.98	3.48
5 to 17 years	2.22	2.13	4.02	n/a	1.7	2.14	2.75
18 to 34 years	12.63	11.09	15.96	8.91	13.86	9.5	9.68
35 to 64 years	81.5	87.43	183.38	91.69	113.04	91.06	77.5
65 years and over	512.19	605.04	803.56	656.99	546.96	687.34	497.1
Female	88.38	101.77	166.6	106.94	104.75	117.33	81.98
Male	112.61	127.13	187.61	137.51	130.14	131.33	112.27
Total	99.66	113.26	176.82	120.52	116.32	124.64	95.64

# C.9 Depression

Table C-27. Crude Rates (per 10,000 residents) for Hospitalizations for Depression for Gateway Cities
Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	0.65	0.8	0.45	0.63	0.46	0.64	0.95
Non-Hispanic API	0.48	n/a	n/a	n/a	0.71	n/a	n/a
Non-Hispanic Black	1.3	2.06	1.93	n/a	1.59	n/a	n/a

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Non-Hispanic Other	2.02	n/a	n/a	n/a	n/a	n/a	n/a
Non-Hispanic White	1.67	2.54	n/a	n/a	1.93	2.01	1.67

Table C-28. Age-Adjusted Rates (per 10,000 residents) for Hospitalizations for Depression for Gateway

Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	n/a	n/a	n/a	n/a	n/a	n/a	n/a
5 to 17 years	0.37	0.8	n/a	n/a	n/a	n/a	n/a
18 to 34 years	0.81	0.52	0.66	n/a	0.63	0.39	0.83
35 to 64 years	1.3	1.6	1.15	1.1	1.79	1.32	1.25
65 years and over	1.99	1.91	4.72	2.66	1.76	3.59	3.13
Female	1.23	1.38	1.69	1.21	1.36	1.29	1.07
Male	0.76	0.82	0.74	0.68	0.82	0.88	1.21
Total	1	1.13	1.26	1	1.11	1.11	1.14

Table C-29. Crude Rates (per 10,000 residents) for ED Visits for Depression for Gateway Cities Health
Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	22.86	26.18	20.19	36.36	18.05	25.35	23.16
Non-Hispanic API	5.84	4.53	n/a	10.91	6.42	6.03	3.36
Non-Hispanic Black	27.1	30.84	19.07	n/a	32.05	45.12	23.17
Non-Hispanic Other	62.8	31.21	61.18	122.3	23.02	58.47	20.89
Non-Hispanic White	24.77	32.31	50.65	111.68	33.76	32.56	20.26

Table C-30. Age-Adjusted Rates (per 10,000 residents) for ED Visits for Depression for Gateway Cities
Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	0.17	n/a	n/a	n/a	n/a	n/a	n/a
5 to 17 years	7.56	7.69	6.35	11.42	6.62	11.75	7.39
18 to 34 years	37.39	34.78	33.62	52.69	29.04	36.42	32.37
35 to 64 years	26.3	30.37	28.67	57.45	34.21	33.85	26.08
65 years and over	17.01	21.01	21.19	36.32	11.7	34.64	22.63
Female	27.2	28.17	27.84	52.89	26.11	33.51	27.9
Male	17.35	19.1	16.74	28.32	19.01	22.18	15.19
Total	22.35	23.83	22.68	41.02	22.6	28.03	21.79

## C.10 Diabetes

Table C-31. Crude Rates (per 10,000 residents) for Diabetes Hospitalizations for Gateway Cities Health
Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	15.46	18.71	18.99	23.3	14.13	16.88	14.98
Non-Hispanic API	7.61	7.51	25.8	8.49	15.13	8.62	4.2
Non-Hispanic Black	40.17	37.83	49.36	n/a	46.02	86.33	36.05
Non-Hispanic Other	23.03	23.21	72.3	42.33	11.03	60.72	11.06
Non-Hispanic White	13.72	26.58	95.17	42.3	20.24	30.88	19.54

Table C-32. Age-Adjusted Rates (per 10,000 residents) for Diabetes Hospitalizations for Gateway Cities
Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	0.54	n/a	n/a	n/a	n/a	n/a	n/a
5 to 17 years	2.97	4.31	3.06	1.96	6.47	2.05	3.72
18 to 34 years	8.6	8.86	13.5	5.03	9.85	9.41	5.05

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
35 to 64 years	19.38	23.88	56.02	40.83	28.98	29.58	19.89
65 years and over	51.53	71.96	133.06	101.64	59.02	107.69	53.6
Female	14.56	17.43	36.82	24.89	21.26	24.2	13.38
Male	18.75	25.47	48.12	36.16	23.2	31.5	19.79
Total	16.56	21.17	42.08	30.09	22.14	27.57	16.29

Table C-33. Crude Rates (per 10,000 residents) for Diabetes ED Visits for Gateway Cities Health
Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	27.74	30.92	32.87	40.24	21.61	29.05	28.14
Non-Hispanic API	10.5	12.56	25.8	8.49	20.13	14.65	4.2
Non-Hispanic Black	70.07	60.45	82.8	198.68	74.9	115.75	77.24
Non-Hispanic Other	56.24	43.21	130.7	75.26	28.78	130.43	28.27
Non-Hispanic White	21.86	45.15	122.79	81.22	32.68	51.02	28.6

Table C-34. Age-Adjusted Rates (per 10,000 residents) for ED Visits for Diabetes for Gateway Cities
Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	0.71	n/a	n/a	n/a	n/a	1.1	n/a
5 to 17 years	3.58	2.73	3.96	2.44	3.98	3.58	4.97
18 to 34 years	16.26	15.3	24.67	12.05	15.89	17.37	11.49
35 to 64 years	36.68	45.23	92.8	70.92	50.76	53.4	37.6
65 years and over	78.73	107.01	227.09	170.22	89.38	161.46	86.46
Female	26.44	32.04	67.11	47.56	34.67	44.71	26.83
Male	30.71	38.14	74.72	56.32	35.99	46.89	31.6
Total	28.55	35	70.85	52.04	35.25	45.71	29.01

# C.11 Acute Myocardial Infarction (MI)

Table C-35. Crude Rates (per 10,000 residents) for Acute Myocardial Infarction (MI) Hospitalizations for Gateway Cities Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	7.67	8.5	6.48	14.06	4.99	7.01	14.18
Non-Hispanic API	9.73	13.59	10.75	10.91	10.14	12.07	14.69
Non-Hispanic Black	17.42	10.28	21	82.78	12.54	13.73	23.17
Non-Hispanic Other	34.52	31.21	58.4	37.63	6.71	35.98	11.06
Non-Hispanic White	20.59	30.78	58.33	50.76	22.02	36.92	37.28

Table C-36. Age-Adjusted Rates (per 10,000 residents) for Acute Myocardial Infarction (MI)

Hospitalizations for Gateway Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	n/a	n/a	n/a	n/a	n/a	n/a	n/a
5 to 17 years	n/a	n/a	n/a	n/a	n/a	n/a	n/a
18 to 34 years	0.4	n/a	0.53	0.91	0.38	n/a	n/a
35 to 64 years	11.8	14.15	20.01	18.91	13.81	12.6	16.24
65 years and over	71.25	92.93	99.37	102.45	64.53	90.79	111.93
Female	9.94	12.43	17.32	14.09	10.28	12.82	14.94
Male	17.88	23.29	24.35	28.11	17.43	20.32	27.1
Total	13.64	17.3	20.4	20.43	13.56	16.39	20.39

Table C-37. Crude Rates (per 10,000 residents) for Acute Myocardial Infarction (MI) ED Visits for Gateway Cities Health Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	6.03	6.05	5.41	10.86	4.02	5.91	11.13
Non-Hispanic API	7.52	9.58	n/a	9.7	8.85	6.03	10.91
Non-Hispanic Black	14.43	8.22	16.17	n/a	11.11	11.77	18.02

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Non-Hispanic Other	27.39	22.41	30.59	n/a	5.28	29.23	8.6
Non-Hispanic White	17.08	22.77	42.98	45.69	18.23	27.52	28.95

Table C-38. Age-Adjusted Rates (per 10,000 residents) for ED Visits for Acute Myocardial Infarction (MI) for Gateway Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	n/a	n/a	n/a	n/a	n/a	n/a	n/a
5 to 17 years	n/a	n/a	n/a	n/a	n/a	n/a	n/a
18 to 34 years	0.34	n/a	n/a	0.91	n/a	n/a	n/a
35 to 64 years	9.62	10.58	15.89	13.68	11.51	10.33	12.42
65 years and over	57.26	66.1	75.99	82.56	54.01	71.93	87.61
Female	8.12	9.17	13.35	10.54	8.58	10.78	11.9
Male	14.31	16.69	18.99	22.52	14.65	15.55	20.65
Total	11.02	12.53	15.83	15.91	11.33	13.11	15.85

# C.12 Nephritis

Table C-39. Crude Rates (per 10,000 residents) for Nephritis Hospitalizations for Gateway Cities Health
Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	5.64	6.85	5.08	5.82	5.36	5.98	6.94
Non-Hispanic API	7.71	6.6	23.65	15.76	9.85	14.65	7.97
Non-Hispanic Black	20.39	24.26	22.45	n/a	18.25	19.62	12.87
Non-Hispanic Other	16.79	13.6	n/a	n/a	5.28	31.48	14.75
Non-Hispanic White	13.17	22.51	75.21	23.69	15.14	24.84	16.09

Table C-40. Age-Adjusted Rates (per 10,000 residents) for Nephritis Hospitalizations by Race for Gateway Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	0.89	n/a	n/a	n/a	n/a	1.1	n/a
5 to 17 years	0.7	n/a	0.73	n/a	0.92	1.07	n/a
18 to 34 years	1.69	1.87	1.61	1.61	1.84	1.77	2.35
35 to 64 years	6.76	9.07	15.57	7.1	10.53	7.91	7.32
65 years and over	55.15	74.02	101.24	45.34	60.96	73.02	49.19
Female	8.35	11.15	15.69	8.04	10.02	12.17	8.72
Male	12.53	16.5	24.4	10.19	15.11	14.19	10.75
Total	10.16	13.43	19.35	8.88	12.35	12.96	9.65

Table C-41. Crude Rates (per 10,000 residents) for Nephritis ED Visits for Gateway Cities Health
Districts, by Race and Ethnicity

	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
Hispanic	4.99	5.42	4.67	5.19	4.48	5.17	5.96
Non-Hispanic API	6.24	5.57	19.35	10.91	9.14	9.48	5.04
Non-Hispanic Black	17.92	17.27	20.64	n/a	15.87	15.7	n/a
Non-Hispanic Other	15.52	13.6	n/a	n/a	5.28	33.73	11.06
Non-Hispanic White	10.84	19.08	47.58	20.3	11.43	18.8	11.44

Table C-42. Age-Adjusted Rates (per 10,000 residents) for ED Visits for Nephritis for Gateway Cities Health Districts

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
0 to 4 years	1.06	n/a	n/a	n/a	n/a	n/a	n/a
5 to 17 years	0.5	n/a	0.61	n/a	0.62	0.95	n/a
18 to 34 years	1.57	1.45	1.93	1.61	1.55	1.8	2.03
35 to 64 years	5.98	7.44	14.16	6.13	9.59	6.69	5.6

Age	LA County	Bellflower (HD 6)	Compton (HD 12)	East LA (HD 16)	Long Beach (HD 40)	San Antonio (HD 58)	Whittier (HD 91)
65 years and over	46.1	61.04	83.83	38.78	46.97	59.37	39.29
Female	7.11	9.01	13.71	7.62	7.54	9.69	6.47
Male	10.66	13.68	20.78	7.92	13.29	12.34	9.02
Total	8.66	11.01	16.68	7.67	10.13	10.72	7.63

# Appendix D

The following tables present findings from the 2007 and 2009 California Health Interview Survey (CHIS), comparing data from respondents in the Service Planning Areas (SPA) that encompass the Gateway Cities (see map on page 6) with responses from Los Angeles County overall.

It should be noted that because of the statistical analysis involved with making estimates, there may be some variance between the sum of the SPAs and Los Angeles County estimates as a whole. The CHIS data provides information about health outcome disparities that should be further investigated. For more about CHIS, including methodology and to access the survey tool, please visit <a href="https://www.chis.ucla.edu/about.html">www.chis.ucla.edu/about.html</a>

Table D-1. Had emergency room/urgent care visit for asthma within past 12 months (current asthmatics, all ages), 2009

LA County	SPA 6 (South)	SPA 7 (East)	SPA 8 (South Bay)
9.5%	10.4%	7%	15.4%

## Table D-2. Children and Teens Who Missed More Than One School Day Due to Asthma, 2009

LA County	SPA 6 (South)	SPA 7 (East)	SPA 8 (South Bay)
25.4%	38%	27.2%	29%

#### Table D-3. Adult Diabetics that have type II Diabetes, 2009

LA County	SPA 6 (South)	SPA 7 (East)	SPA 8 (South Bay)
86%	89.5%	84.2%	82.1%

#### Table D-4. Adults, Teens and Children Who Have Not Visited a Doctor in the Past Year, 2009

LA County	SPA 6 (South)	SPA 7 (East)	SPA 8 (South Bay)
16.7%	18.5%	22.4%	13.7%

#### Table D-5. Adults Who Had Psychological Distress During the Past Year, 2009

LA County	SPA 6 (South)	SPA 7 (East)	SPA 8 (South Bay)
7.3%	14.8%	5.5%	7.1%

Table D-6. Adults Who Needed Help in the Past Year for Mental, Emotional, Alcohol or Drug Problems, 2009

LA County	SPA 6 (South)	SPA 7 (East)	SPA 8 (South Bay)
14.1%	13.2%	11.9%	13.5%

# Table D-7. Adults Who Have Visited a Doctor in the Past Year for Mental, Emotional, Alcohol or Drug Problems, 2009

LA County	SPA 6 (South)	SPA 7 (East)	SPA 8 (South Bay)
10.3%	7.6%	8.6%	9.1%

## Table D-8. Adults Usual Source of Health Care, 2009

	LA County	SPA 6 (South)	SPA 7 (East)	SPA 8 (South Bay)
Doctor's Office/ Kaiser/ HMO	58.5%	42.2%	56.3%	63%
Community or Government Clinic/ Community Hospital	23.1%	30.4%	25.2%	20.7%
No Usual Source of Care	16.2%	22.3%	17.2%	14.3%

## Table D-9. Visited Emergency Room in the Past 12 Months, 2009

LA County	SPA 6 (South)	SPA 7 (East)	SPA 8 (South Bay)
16.7%	20.9%	18%	18.6%