

information within and behind this report.

## **CAP Products**

The Community Assessment Project comprehensive report, past reports, and cross tabulation exports are available to view and download online at: www.appliedsurveyresearch.org/scccap

Customized reports detailing specific topic areas, geographic regions, and demographic profiles are available by contacting Applied Survey Research.

Also available at no charge is the Summary Report of the Year 23, Community Assessment Project findings, produced by Dignity Health Dominican Hospital.

### **About The Researcher**



Applied Survey Research (ASR) is a social research firm dedicated to helping people build better communities by collecting meaningful data, facilitating information-based planning, and developing custom strategies. ASR was founded on the principle that

community improvement, initiative sustainability, and program success are closely tied to the assessment of needs, evaluation of community goals, and development of appropriate responses.

The Santa Cruz County Community Assessment Project is a prime example of a comprehensive evaluation of the needs of the community. Its goal is to stimulate dialogue about trends and to encourage informed strategies for shaping future policies and effective actions.

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#### **CAP Overview**

The Santa Cruz County Community Assessment Project (CAP) is entering its third decade, with 2017 marking the 23<sup>rd</sup> year of the project. The CAP was convened in 1994 through a collaboration of the United Way of Santa Cruz County and Dominican Hospital, with Applied Survey Research (ASR) as their research partner.

In 2016, the CAP was restructured to offer alignment with national measures of wellbeing, namely the Social Determinants of Health (SDOH). It is through this lens that the CAP data are presented in the executive summary and throughout the comprehensive report. While the CAP assesses quality of life across a broad range of topic areas, all data have been organized under the SDOH key areas: Economic Stability;

Education; Social and Community Context; Health and Health Care; and Neighborhood and Built Environment. The CAP features over 80 indicators and approximately 190 measures across these areas, including both primary and secondary data. Biennially, ASR conducts a telephone survey of a representative sample of Santa Cruz County residents; 2017 marks a new survey year. Complementary secondary data is collected from a myriad of sources at the national, state, and local level.

Together with community stakeholders, the CAP is accomplished through a five step process designed by ASR (see left). One of the five steps of the community improvement process involves collaboration, while other steps focus on community action in order to achieve goals and sustain the project.

# ASR's 5 Step Assessment Process



#### Collaboration

Gather a leadership team and project oversight committee that includes diverse perspectives and represents the community



#### Data Collection.

Develop a data collection strategy, prioritize data indicators, collect and analyze available data



#### Reporting.

Create a comprehensive report that clearly presents the data in a way that is meaningful and useful to the community



#### Action: Community Convening.

Spread the word and create an action plan to make meaningful change based upon the needs of your community



#### Sustainability\_

Establish a plan to revisit the data, evaluate the outcomes of your actions and develop the funding to continue the assessment cycle

## The CAP in Action

The CAP is nationally recognized as one of the oldest projects of its kind; communities throughout the United States and Canada replicate this model.

The CAP was featured in Santa Cruz County's application and award of the first Robert Wood Johnson Foundation's Culture of Health Prize in 2013. The prize is annually awarded to six communities in America that are making strides to become healthier and more equitable communities. Since that time, the CAP has been nationally featured by the National Academies of Science, Institute of Medicine's Roundtable for Population Health Improvement. In 2007, the CAP was chosen as one of the best community indicator projects in the United States, winning first place in the Community Indicators Consortium Innovation Awards sponsored by the Brookings Institution in Washington D.C.

The CAP, at its core, is an actionable document. Below are a sampling of the ways the CAP is being utilized to affect change across Santa Cruz County.

#### **Identifying Health Needs and Leveraging Resources**

The CAP helps The Santa Cruz Community Health Centers (SCCHC) to understand and respond to gaps in health access and disparities that exist along the lines of race and income. The CAP is a consistent source of timely, local data that allows the SCCHC to leverage funding to improve community health and insights in order to respond to community health needs.

The Public Health Division of the Santa Cruz County Health Services Agency is pursuing Public Health Accreditation, and are utilizing the data from the CAP to help complete various components of their required Community Health Assessment. The Public Health Division also utilizes CAP data in grant applications, specifically demographics, housing information, obesity, nutrition, and physical activity data.

#### **Utilizing Data to Reduce Disparities**

As a data driven department, the Santa Cruz County Probation Department has used data from the annual CAP report in a number of ways, including improvement of services for Latino youth and residents residing in South County, securing a grant to help renovate juvenile hall and expand youth programming, securing funding to expand programming, particularly for Latino youth and families, and development of a proposal to put in place a culinary arts program at juvenile hall.

The CAP report supports the Probation Department's work around reducing racial and ethnic disparities, particularly for juveniles in the justice system. This type of work necessitates that any practice and policy changes are based on data. The annual demographics provided in the CAP allow the Probation Department to stay ahead of emerging trends and to prepare in order to be culturally and linguistically responsive to the needs of their clients.

#### **Creating Communities for Youth to Thrive**

Ecology Action (EA) used the CAP data regarding childhood obesity rates and overall population physical activity levels to assess where youth bike safety and encouragement programs were most needed, and to paint a picture of wellness in South County for a 2011 statewide grant proposal. The detailed CAP data about the disproportionate presence of childhood obesity in South County allowed EA to present a compelling picture of students' lives, and ultimately led to being awarded the grant amidst a very competitive field. The funding allowed EA to deliver new bicycle safety and encouragement programs in three South County schools, these programs began in 2012 and continue today.

The Criminal Justice Council's Youth Violence Prevention Task Force (YVTF) used the unique information found in the CAP to help inform their strategic planning process. Indicators specific to the CAP and the household survey gauge how well the county is doing at creating strong communities where youth can thrive. As they move into the implementation of their strategic plan, this data will help the YVTF track their success over time.

#### **Publications**

The CAP is profiled in *Community Quality of Life Indicators, Best Practices III,* a book about best practices in community indicator projects throughout the world<sup>1</sup> and in the Organization for Economic Co-operation and Development's (OECD) *Statistics, Knowledge and Policy 2007: Measuring and Fostering the Progress of Societies*.<sup>2</sup> The United States General Accounting Office (GAO) determined that the CAP project was a best practice methodology for indicator reports. In 2010, the CAP project was featured in an article entitled "Connecting Data to Action: How the Santa Cruz County Community Assessment Project Contributes to Better Outcomes for Youth" in the Applied Research in Quality of Life Journal (ARIQ) focused on community indicators that are used as tools for social change. In 2011, the CAP was featured in a book entitled *Diversity and Community Development: An Intercultural Approach*.

# Legend

ltem	Description
<b>78</b> 7	Denotes a telephone survey question.
٨	Indicates sample size is too small to calculate, as small numbers are unstable and can be misinterpreted.
*	Indicates statistically significant differences in survey responses between sub-groups in the 2015 telephone survey data. Absence of this symbol indicates <i>no</i> statistical significance differences between sub-groups for the 2015 data. Footnotes at the bottom of each table/chart indicate which specific comparisons are significant.
Regions	
North County	Bonny Doon, Capitola, Davenport, Live Oak, Santa Cruz, Scotts Valley, and Soquel
South County	Aptos, Corralitos, Freedom, La Selva Beach, Pajaro, and Watsonville
San Lorenzo Valley	Ben Lomond, Boulder Creek, Brookdale, Felton, Lompico, Mount Hermon, and Zayante
National Goals and Object	tives
Healthy People 2020	Healthy People 2020 identifies nearly 600 objectives with 1,200 measures to improve the health of all Americans. This label is applied to corresponding and related measures within the CAP report.
Healthy People 2020	Leading Health Indicators (LHI) are a subset of Healthy People 2020 that communicate high priority focus areas. This label is applied to corresponding and related measures within the CAP report.
	Social Determinants of Health (SDOH) are indicators that relate to creating social and physical environments aimed towards promoting well-being for all.

<sup>&</sup>lt;sup>1</sup>Sirgy, J., Phillips, R., Rahtz, D. (2007). Community Quality of Life Indicators, Best Practices III. The International Society for Quality of Life Studies, (ISOOI S).

<sup>&</sup>lt;sup>2</sup>Organization for Economic Co-operation and Development. (2008). Statistics, Knowledge, and Policy 2007: Measuring and Fostering the Progress of Societies, (OECD).

# **Executive Summary**

The health of Santa Cruz County residents does not begin at the doctor's office, but at their home, school, workplace, neighborhood, and in their community. In part, health is determined by the opportunities, both social and economic, that are afforded to residents throughout their lifetime. Disparities that arise as a consequence of these opportunities, or lack thereof, offer context to why some in our county thrive while others only survive.

In order to put greater focus on both Santa Cruz County's successes and areas for improvement, the CAP report began in 2016 to integrate national measures and objectives aimed towards improving health through the application of the Healthy People 2020 targets, including Leading Health Indicators (LHI), throughout the report where applicable. Incorporated among the Healthy People 2020 indicators are specific goals that relate to the Social Determinants of Health (SDOH).

SDOH are components of a person's environment that impact how they experience health and well-being throughout the span of their life, such as access to basic needs including housing and food, in addition to education and healthcare.<sup>3</sup> The SDOH shed light on the health inequities and resource disparities that exist within our community. Health inequities are unfair and avoidable outcomes within societal structures, and are measured as the differences between distinct populations.<sup>4</sup> These disparities arise out of unequal distribution of resources at all levels: local, national, and international.<sup>5</sup>

It is through this lens that the CAP data are presented below, organized in relationship to the five key areas of SDOH, which are: Economic Stability; Education; Social and Community Context; Health and Health Care; and Neighborhood and Built Environment.<sup>6</sup> Please note that beyond the executive summary, the entire comprehensive report was restructured in 2017 to align with these five categories, transitioning away from the original six sub-sections. By considering Santa Cruz County data in relationship to national goals and objectives, our community can utilize the framework provided by Healthy People 2020, the Leading Health Indicators, and the Social Determinants of Health to take actionable steps towards advancing the quality of life for all of our residents.



<sup>&</sup>lt;sup>3</sup> Office of Disease Prevention and Health Promotion. (2016). Social Determinants of Health, Healthy People 2020. Retrieved October 20, 2016 from http://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health.

<sup>&</sup>lt;sup>4</sup> Boston Public Health Commission. (2013) Health of Boston's Children: Parent and Caregiver Perspectives.

<sup>&</sup>lt;sup>5</sup> Centers for Disease Control and Prevention. (2014). NCHHSTP Social Determinants of Health. Retrieved October 21, 2016 from http://www.cdc.gov/nchhstp/socialdeterminants/definitions.html

<sup>&</sup>lt;sup>6</sup> Office of Disease Prevention and Health Promotion. (2016). Social Determinants of Health, Healthy People 2020. Retrieved October 20, 2016 from http://www.healthypeople.gov/2020/topics-objectives/topic/social-determinants-health.

# **Economic Stability**

Poverty



13.7%

of Santa Cruz County's population were living below the poverty level

CALIFORNIA: 16.8%

Basic Needs

22.5%

of CAP survey respondents reported that they went without one or more basic needs at anytime in the past 12 months.

WHITE: 14.5%

LATINO: 36.1%\*

\*Statiscally significant

**Employment** 

6.9%

Unemployment rate in Santa Cruz County

CALIFORNIA: 5.4% **UNITED STATES: 4.9%**  All 4 local iurisdictions have seen a decrease over the past 7 years

Housing Stability

16.4%

of homes in the Santa Cruz-Watsonville Metro Area were affordable to Median Income Families

UNITED STATES: 60.3%

A decrease of 52% between 2010 and 2017

Families who experienced housing burden\*

\*Families who spent 30% or more of their income on housing

MORTGAGE HOLDER HOUSEHOLDS

HOUSEHOLDS

Enrollment in Higher

#### Education

Childcare

# 30% shortfall

in child care capacity for working families (children under age 6) in Santa Cruz County. This percentage of children represents a shortfall of 2,986 child care spaces (full- or part-time).

Language and Literacy

34%

of Santa Cruz County 3rd graders met or exceeded grade standards in English language arts/ literacy and are ready for future coursework

High School Graduation

85.8%

Santa Cruz County cohort outcome graduation rate

CALIFORNIA: 83.2%

WHITE:

90.8%

LATINO:

82.3%

HP 2020: CABRILLO COLLEGE: 87% 12,255

> UC SANTA CRUZ: 18,783

Education



# **Health and Health Care**

County Health Ranking\*

21 SOCIAL & ECONOMIC **FACTORS** 

39 PHYSICAL



\*Santa Cruz County's rank out of 57 of the counties in California

Shown for two sub-categories of the Health Factors category. A higher number represents worse outcomes

Access to Health Care

87.9%

of CAP survey respondents reported they had a regular source of health care.

HP 2020-95%

**WHITE: 92.2% LATINO: 79.5%\*** 

\*Statiscally significant

69.2%

of CAP survey respondents reported they had dental care in the past 12 months

Infant Mortality

LATINO: 56.9%\* \*Statiscally

WHITE:

76.5%

significant

Health Insurance



91.8%

Currently insured adults (ages 18-64) in Santa Cruz County

HP 2020: 100%

CALIFORNIA: 88.1%

Prenatal Care

84.0%

Santa Cruz County residents with 1st trimester prenatal care

HP 2020: 77.9%

Less than adequate prenatal care

> **WHITE: 7.6% LATINO: 18.7%**

infant deaths per 1,000 live births in Santa Cruz County

HP 2020: 6.0 CALIFORNIA: 4.6 **WHITE: 5.0** LATINO: 8.0

Pre-term Births<sup>1</sup>

10.2% Santa Cruz

County

11.6% County females ages ≤ 19

Low-Birth Weight<sup>2</sup> Babies

8.0% Santa Cruz County

9.4% County females ages ≤ 19

HP 2020: 7.8% WHITE: 5.7% **LATINA: 7.3%** 

Pre-term births are all births before 37 weeks gestation.

<sup>2</sup> Low-birth weight are all babies born weighing less than 2,500 arams.

HP 2020: 11.4% WHITE: 7.1%

**LATINA: 9.1%** 

# **Health and Health Care (Continued)**

Overall Health

81.6%

of CAP survey respondents described their overall health as "Excellent, Very Good, or Good"



HP 2020: 79.8% **WHITE: 84.4%** LATINO: 78.4%\* Asthma

4.0



residents per 10.000 were hospitalized in Santa Cruz County CALIFORNIA: 7.0

Selected Causes of Death

18.1

drug-induced deaths per 100,000 residents in Santa Cruz County

CALIFORNIA: 11.8 HP 2020: 11.3

suicide deaths per 100,000 residents in Santa Cruz County

CALIFORNIA: 10.3 HP 2020: 10.2

# **Social and Community Context**

Social Cohesion

CAP survey respondents who strongly agree or agree with the statement: People in this neighborhood help each other out



WHITE



95.6%

of CAP survey respondents who often or sometimes feel they have someone to turn to when they need help

WHITE: 96.4% LATINO: 93.9%

Civic Participation

84.1%

of Santa Cruz County registered voters voted in the 2016 general election

CALIFORNIA: 75.3%

29.6%

of CAP survey respondents who joined a protest or demonstration in the last 12 months

WHITE: 32.6% LATINO: 19.3%\*

> \*Statiscally significant

Discrimination

15.3%

of CAP survey respondents felt discriminated against. Of those, 53.1% felt race/ ethnicity was the reason

Incarceration Jail population, Santa Cruz

47.2% 42.5%

County



WHITE: HISPANIC:

AFRICAN AMERICAN: 7.0%

**Neighborhood and Built Environment** 

Healthy Foods

50.3%

of adults (ages 18 and older) in Santa Cruz County always have access to affordable fresh fruits and vegetables in their neighborhood.

CALIFORNIA: 48.4%

Crime and Violence

38.5

per 1.000 residents was the Santa Cruz County crime rate

CALIFORNIA: 30.2

VIOLENT CRIME RATE: 4.0 PROPERTY

34.4

CRIME RATE:

Juvenile Arrests, Santa Cruz County



WHITE: HISPANIC: BLACK: 66.3% 27.1% 4.3%

3.4

homicide deaths per 100.000 residents in Santa Cruz County

HP 2020: 5.5 CALIFORNIA: 4.8



1.810,519



pounds of pesticide applied in Santa Cruz County

CALIFORNIA: 212,846,042

6.9 6.4 pounds pounds per resident per acre in Santa Cruz County CALIFORNIA: 5.7 (RESIDENT)

CALIFORNIA: 2.1 (ACRE)

168



zero

days of beach closures in Santa Cruz County

Average reported residential water use (in gallons per capita, per day) by water district

CITY OF SANTA CRUZ SCOTTS VALLEY SAN LORENZO VALLEY

SOQUEL CREEK

WATSONVILLE CITY 89.1 HP 2020

Mode of transportation for commuting to work among Santa Cruz County residents

68.3% drove alone



8.6% carpooled



26.8

average travel time to work for mins. Santa Cruz County residents



zero

unhealthy days (Air Quality Index) for sensitive groups in Santa Cruz County



# **2017 Community Heroes**

The CAP has annually honored community heroes, special individuals whose efforts help move Santa Cruz County toward the achievement of the established CAP community goals. These true-life heroes can be found throughout the community and are wonderful examples of making Santa Cruz County a better place to live.

A special thank you goes to the Santa Cruz Sentinel Newspaper for sponsoring the annual selection of the Community Heroes. Each year the Santa Cruz Sentinel, in association with the United Way, seeks nominations from the public, of people who have worked toward meeting a CAP community goal in the past year.



Photo Credit: Paul Schraub Photography

Top Row (L-R): Roy Sikes, Nora Caruso, Ron Indra Middle Row (L-R): Steve McKay, Denise Pitman-Rosas, Nathan Nguyen, Peggy Benedum Bottom Row (L-R): Jonathan Pilch, Kristy Shulman, Dr. Sepideh Walthard

Not pictured: Holly Hughes, Charles "Stoney" Brook, Gabriella Grant, Rich Casale, Mary Lou Goeke

# **Community Goals**

The purpose of the following community goals are to focus attention and energy to improve the quality of life for the people of Santa Cruz County. As such, these community goals are generally broad in nature. Detailed action plans involving people from all sectors of the community must be developed to realize the community goals. These community goals are not intended to endorse or oppose any particular project or initiative. They do, however, chart the course for collective action to create a better future for the people of Santa Cruz County.

#### **Economic Stability**

- Goal 1: By the year 2020, reduce the winter unemployment rate by one-half percent, creating 725 new winter jobs in Santa Cruz County.
- Goal 2: By the year 2020, increase the housing stock by 1,000 units in Santa Cruz County.
  - » Community Hero: Steve McKay

#### **Education**

- Goal 1: By the year 2020, all students will be fully connected and engaged with their school community, and will see their school as a welcoming, essential, and safe place.
  - » Community Hero: Ron Indra
- Goal 2: By the year 2020, all students will have broader access to courses and enrichment activities, including visual and performing arts, career technical education and digital technology.
  - » Community Hero: Jonathan Pilch
- Goal 3: By the year 2020, all students will be provided sufficient behavior, health, and counseling services to succeed in their chosen educational and career pathways.

#### Health and Health Care

- Goal 1: By the year 2020, all Santa Cruz County residents will have a regular source of primary care and integrated behavioral health services with a focus on:
  - Decreasing disparities
    - » Community Hero: Dr. Sepideh Walthard
  - Decreasing reliance on Emergency Rooms as a regular source of health care
    - » Community Hero: Holly Hughes
  - Increasing access to mental health and substance use disorder treatment.
    - » Community Hero: Kristy Shulman
- Goal 2: By the year 2020, obesity in Santa Cruz County will be reduced by 10%.

## **Social and Community Context**

- Goal 1: By the year 2020, more Santa Cruz County residents will build meaningful social bridges across differences in age, race, ethnicity, class, and culture.
  - » Community Hero: Peggy Benedum
- Goal 2: By the year 2020, schools and communities will be safe, supportive, and engaging places for children, youth, and families.
  - » Community Hero: Gabriella Grant
- Goal 3: By the year 2020, more Santa Cruz County residents will feel empowered to experience and pursue long-term quality of life.
  - » Community Hero: Nora Caruso

#### **Neighborhood and Built Environment**

#### **Public Safety**

- Goal 1: By the year 2020, the juvenile crime rate will be reduced by 10% through the use of culturally
  responsive evidence based strategies that promote positive interaction and reduce conflict with public
  safety officials.
- Goal 2: By the year 2020, there will be a 20% reduction in youth reporting gang involvement, resulting in a 10% reduction of gang related criminal activity.
  - » Community Hero: Denise Pitman-Rosas
- Goal 3: By the year 2020, there will be a 10% decrease in arrests or citations of individuals with chronic SUD/COD through the increase of on-demand treatment for adults with such disorders.
  - » Community Hero: Charles "Stoney" Brook
- Goal 4: By the year 2020, the violent crime rate of 18 to 25 year olds will be reduced by 10% through the use of targeted gang involvement intervention strategies, including restorative practices, street outreach, and alternatives to adult gang involvement.

#### **Natural Environment**

- Goal 1: By the year 2020, residential per capita water use will be sustained at or under 2013 baseline levels through 2020.
  - » Community Hero: Roy Sikes
- Goal 2: By the year 2020, 5% of homes in Santa Cruz County will have a solar electric or hot water system.
- Goal 3: By the year 2020, stewardship actions for our waters will be increased by 10%.
  - » Community Hero: Rich Casale

 Goal 4: By the year 2020, 50 miles of urban bike and multi-use trails will be constructed within Santa Cruz County to decrease traffic, increase active transportation, and connect urban areas to open spaces.

» Community Hero: Nathan Nguyen

Lifetime Achievement Award: Mary Lou Goeke

See the Appendices for a list of CAP Community Heroes from previous years.

# Acknowledgements

We wish to acknowledge all of those individuals serving on the CAP Steering Committee whose commitment of time, resources, and expert counsel have guided the CAP over the past twenty-three years. A special thank you is extended to the generous financial sponsors of the CAP.

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Community Action Board

Community Bridges

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County of Santa Cruz Human Services Pajaro Valley Community Health Trust

Department

Sutter Maternity and Surgery Center

Dominican Hospital

UC Santa Cruz

Encompass Community Services

United Way of Santa Cruz County

First 5 Santa Cruz County

Volunteer Center

Goodwill of the Central Coast

Watsonville Community Hospital

A very special thank you to all of those who contributed and helped locate secondary data for this year's CAP report. Agencies and organizations are cited as sources, the assistance of individuals has been critical.

# Demographics

Demographics describe a region's population across different areas, including gender, age, race/ethnicity, and language.

Santa Cruz County Dem	nographic Profile1	3
Population	18	
Basic Demographics		9

# Santa Cruz County Demographic Profile

Demographics describe a region's population across different areas, including gender, age, race/ethnicity, and language. Demographic trends are useful for program planning and strategizing funding priorities to meet the needs of a diverse population.

# **Population**

#### **Total Population**

	2010	2011	2012	2013	2014	2015	2016
Santa Cruz County	263,054	264,298	266,776	269,419	271,804	274,146	274,673
California	37,349,363	37,691,912	38,041,430	38,332,521	38,802,500	39,144,818	39,250,017

Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates

#### Jurisdictional Distribution, Santa Cruz County

	2010	2011	2012	2013	2014	2015	2016	2017
Capitola	9,918	9,948	9,986	10,002	10,047	10,124	10,136	10,162
Santa Cruz	59,946	61,384	61,994	62,578	62,992	64,025	64,632	65,070
Scotts Valley	11,580	11,617	11,678	11,778	11,919	12,090	12,143	12,163
Watsonville	51,199	51,380	51,751	52,010	52,291	52,659	52,891	53,015
Unincorporated	129,739	130,432	131,509	132,732	133,812	134,958	136,086	136,193

Source: California Department of Finance. (2017). Table 2: E-4. 2010-2016 January Population Estimates for Cities, Counties and the State.

# **Basic Demographics**

#### Sex Distribution, Santa Cruz County

	2010	2011	2012	2013	2014	2015	2016
Female	50.1%	50.1%	50.3%	50.5%	50.2%	50.4%	50.4%
Male	49.9%	49.9%	49.7%	49.5%	49.8%	49.6%	49.6%

Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

#### Race/Ethnicity Distribution, Santa Cruz County

	2010	2011	2012	2013	2014	2015	2016
Asian	4.4%	4.4%	4.0%	4.4%	4.3%	4.4%	4.9%
Black	0.8%	1.0%	1.0%	0.8%	0.8%	0.8%	1.0%
Hispanic/Latino	32.2%	32.7%	32.7%	32.9%	33.2%	33.3%	33.5%
White	59.7%	58.8%	58.7%	58.3%	58.1%	57.6%	57.6%
Multi-Race	2.3%	2.6%	2.9%	3.4%	3.3%	3.5%	2.7%
Other	0.6%	0.5%	0.7%	0.1%	0.3%	0.4%	0.3%

Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

# Age Distribution, Santa Cruz County

	2010	2011	2012	2013	2014	2015	2016
Under 5 Years	5.6%	5.7%	5.6%	5.9%	5.5%	5.4%	5.3%
5-19 Years	21.0%	19.5%	20.1%	19.5%	19.5%	19.2%	19.5%
20-34 Years	20.9%	23.1%	21.9%	22.5%	22.5%	22.9%	21.5%
35-64 Years	41.3%	40.2%	40.1%	39.6%	39.1%	38.2%	38.8%
65 Years and Above	11.1%	11.6%	12.2%	12.5%	13.4%	14.3%	14.9%

Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

Households <sup>1</sup> by	/ Type.	Santa	Cruz	County	,
----------------------------	---------	-------	------	--------	---

	2010	2011	2012	2013	2014	2015	2016
Non-Family Households	36.9%	37.2%	38.0%	39.1%	35.9%	37.7%	37.1%
Family Households	63.1%	62.8%	62.0%	60.9%	64.1%	62.3%	62.9%
Married-Couple Family	45.1%	46.8%	47.0%	47.6%	48.2%	47.8%	46.9%
Female Householder Family (No Husband Present)	12.3%	10.9%	10.0%	9.7%	11.7%	11.1%	10.2%
Male Householder Family (No Wife Present)	5.7%	5.2%	5.0%	3.6%	4.2%	3.4%	5.8%
Total Households	91,264	94,775	93,253	93,982	96,127	93,317	96,257
Percentage with Persons Under 18 Years	31.9%	30.3%	30.1%	26.6%	30.1%	29.2%	30.4%
Percentage with Persons 65 Years and Older	23.5%	23.8%	26.3%	26.9%	27.5%	30.9%	31.8%
Total Population in Households	241,449	253,650	255,178	257,627	259,829	261,519	261,966
Average Household Size	2.65	2.68	2.74	2.74	2.70	2.80	2.72
Average Family Size	3.18	3.25	3.32	3.39	3.21	3.39	3.31

Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

<sup>&</sup>lt;sup>1</sup> Households refer to an occupied housing unit, while a householder refers to a person in whose name the housing unit is rented or owned. This person must be at least 15 years old. A family household refers to a household in which there is at least 1 person present who is related to the householder by birth, marriage, or adoption.

# Language Spoken at Home (Ages 5 Years and Older), Santa Cruz County

2010	2011	2012	2013	2014	2015	2016
69.1%	67.8%	68.1%	67.7%	67.6%	68.2%	67.6%
30.9%	32.2%	31.9%	32.3%	32.4%	31.8%	32.4%
2.5%	2.9%	2.9%	3.1%	2.8%	2.7%	3.1%
25.6%	26.5%	25.5%	26.0%	26.3%	26.0%	26.5%
2.2%	2.5%	2.9%	2.9%	2.9%	2.6%	2.3%
0.5%	0.3%	0.6%	0.3%	0.4%	0.5%	0.5%
248,383	249,132	251,704	253,575	256,877	259,307	260,165
	69.1% 30.9% 2.5% 25.6% 2.2%	69.1%     67.8%       30.9%     32.2%       2.5%     2.9%       25.6%     26.5%       2.2%     2.5%       0.5%     0.3%	69.1%     67.8%     68.1%       30.9%     32.2%     31.9%       2.5%     2.9%     2.9%       25.6%     26.5%     25.5%       2.2%     2.5%     2.9%       0.5%     0.3%     0.6%	69.1%       67.8%       68.1%       67.7%         30.9%       32.2%       31.9%       32.3%         2.5%       2.9%       2.9%       3.1%         25.6%       26.5%       25.5%       26.0%         2.2%       2.5%       2.9%       2.9%         0.5%       0.3%       0.6%       0.3%	69.1%         67.8%         68.1%         67.7%         67.6%           30.9%         32.2%         31.9%         32.3%         32.4%           2.5%         2.9%         2.9%         3.1%         2.8%           25.6%         26.5%         25.5%         26.0%         26.3%           2.2%         2.5%         2.9%         2.9%         2.9%           0.5%         0.3%         0.6%         0.3%         0.4%	69.1%         67.8%         68.1%         67.7%         67.6%         68.2%           30.9%         32.2%         31.9%         32.3%         32.4%         31.8%           2.5%         2.9%         2.9%         3.1%         2.8%         2.7%           25.6%         26.5%         25.5%         26.0%         26.3%         26.0%           2.2%         2.5%         2.9%         2.9%         2.9%         2.6%           0.5%         0.3%         0.6%         0.3%         0.4%         0.5%

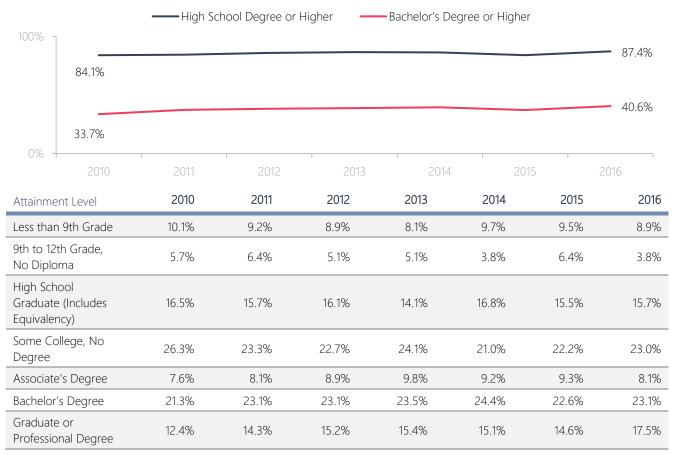
Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

# Veteran Status, Santa Cruz County

veterari Status, Sa	inta Craz Co	arrey					
	2010	2011	2012	2013	2014	2015	2016
Civilian Veterans (Ages 18 and Older)	6.7%	6.1%	6.2%	5.3%	4.9%	4.8%	4.9%
Total Civilian Population (Ages 18 Years and Older)	207,535	209,323	211,393	213,233	217,577	219,946	220,049

Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

# Adult (Ages 25 Years and Older) Educational Attainment, Santa Cruz County



Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates

#### Adult (Ages 25 Years and Older) Educational Attainment by Jurisdiction - 2011 to 2015

	High School Degree or Higher	Bachelor's Degree or Higher
Capitola	92.5%	46.0%
Santa Cruz	84.3%	51.5%
Scotts Valley	96.7%	49.4%
Watsonville	56.1%	9.9%

Source: United States Census Bureau. (2017). 2011-2015 American Community Survey 5-year estimates.

# **Economic Stability**

Economic Stability accounts for one of the five determinant areas in the Social Determinants of Health framework. Indicator factors include: poverty, employment, food insecurity, and housing instability.

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# **Economic Stability Snapshot**

Tourism



9.490

jobs in Santa Cruz County were generated by tourism

Median Family Income

\$92,200

in Santa Cruz County

CALIFORNIA: \$77,359 UNITED STATES: \$71,062

42.4%

of CAP survey respondents reported their family income was in the range of \$75,000 or more for the year

**Employment** 

6.9%

Unemployment rate in Santa Cruz County

CALIFORNIA: 5.4% UNITED STATES: 4.9%

All 4 local jurisdictions have seen a decrease over the past 7 years

Housing Stability

16.4%

of homes in the Santa Cruz-Watsonville Metro Area were affordable to Median Income Families

UNITED STATES: 60.3%

A decrease between 2010 and 2017 Families who experienced housing burden\*

\*Families who spent 30% or more of their income on housing

**MORTGAGE HOLDER** HOUSEHOLDS

RENTER HOUSEHOLDS

Poverty 13.7%



of Santa Cruz County's population were living below the poverty level

CALIFORNIA: 16..8%

Social Services

26,426

people in Santa Cruz County who on average were served monthly by CalFresh

93,774

people in Santa Cruz County receiving aid from 1 or more public assistance programs

Basic Needs

22.5%

of CAP survey respondents reported that they went without 1 or more basic needs at anytime in the past 12 months.

WHITE: 14.5% LATINO: 36.1%\*

\*Statiscally significant

Snapshot displays the most recent available data. Arrows shown reflect Santa Cruz County trends.







No arrow indicates no trend available



# **Community Goals for 2020**

- Goal 1: By the year 2020, reduce the winter unemployment rate by one-half percent, creating 725 new winter jobs in Santa Cruz County.
- Goal 2: By the year 2020, increase the housing stock by 1,000 units in Santa Cruz County.

Community Hero: Steve McKay

# **Economic Vitality**

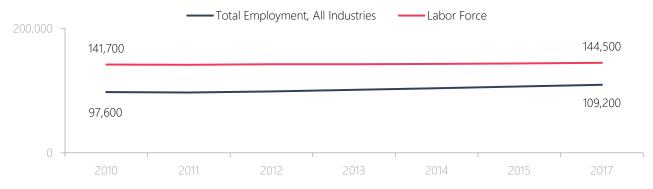
Examining employment and revenue by sector helps us understand the changing composition of jobs within the region and the strength of the economy.

Agriculture is one of the two largest employment sectors in Santa Cruz County, and the county has a high concentration of jobs in this sector as compared to the state (more than three times as many jobs on a proportional basis).<sup>7</sup> The total value of crops produced in Santa Cruz County has been increasing over time. Processing, transportation, marketing, employment, and other farm-related services significantly multiply the reported gross production values to benefit the local economy.<sup>8</sup>

Alongside agriculture, tourism ranks as one of the top employers and revenue-producing industries in Santa Cruz County, generating over \$700 million in direct travel expenditures annually. There are approximately three million visitor trips taken to Santa Cruz County each year. <sup>9</sup> Visitor dollars help to support Santa Cruz County by providing business and tax revenues which contribute to local employment; open space, beaches, and parks; and locally owned small businesses. <sup>10</sup>

#### **Net Job Growth**

## **Total Employment All Industries, Santa Cruz County**



Source: State of California Employment Development Department, Labor Market Information Division. (2017). 2010-2016 Industry Employment & Labor Force

Note: Industry employment figures represent rounded numbers

<sup>&</sup>lt;sup>7</sup> Santa Cruz County 2014 Economic Vitality Study

<sup>&</sup>lt;sup>8</sup> Santa Cruz County Agricultural Commissioner (2014) 2008-2014 Santa Cruz County Crop Report

<sup>&</sup>lt;sup>9</sup> Visit Santa Cruz County (VSCC). Tourism Facts. Accessed on July 26, 2016 from http://www.santacruzca.org/partners/tourism-facts.php.

<sup>&</sup>lt;sup>10</sup> Visit Santa Cruz County (VSCC). Tourism Facts. Accessed on July 26, 2016 from http://www.santacruzca.org/partners/tourism-facts.php.

# **Employment by Industry Type, Santa Cruz County**

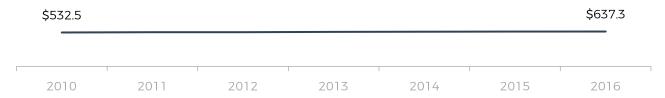
	2010	2011	2012	2013	2014	2015	2016
Government	20,300	20,300	20,400	20,600	21,100	21,400	21,800
Education & Health Services	15,100	15,400	15,800	16,500	16,900	17,300	17,500
Retail Trade	11,400	11,300	11,400	11,500	11,800	12,000	12,500
Leisure & Hospitality	10,900	11,100	11,600	12,200	12,900	13,600	13,900
Professional & Business Services	9,100	9,500	9,700	9,700	9,500	9,700	9,700
Manufacturing	5,500	5,400	5,700	6,000	6,200	6,700	7,000
Mining, Logging, & Construction	3,000	2,900	3,000	3,200	3,400	3,700	4,500
Wholesale Trade	3,500	3,400	3,400	3,500	3,500	3,500	3,500
Financial Activities	3,300	3,100	3,200	3,400	3,500	3,500	3,600
Transportation, Warehousing, & Utilities	1,500	1,500	1,400	1,400	1,300	1,500	1,500
Information	900	900	800	800	800	800	800
Other Services	3,700	3,600	3,800	4,100	4,300	4,500	4,600
Total Employment, Non-farm Industries	88,000	88,200	90,100	92,900	95,200	98,300	100,900
Total Employment, Farm Industries	9,600	8,600	8,400	8,300	8,500	8,300	8,300

Source: State of California Employment Development Department, Labor Market Information Division. (2017). 2010-2016 Industry Employment & Labor Force

Note: Industry employment figures represent rounded numbers.

# **Agricultural Production**

#### Annual Crop Production Value (in Millions of Dollars), Santa Cruz County



Source: Santa Cruz County Agricultural Commissioner. (2017). 2010-2016 Santa Cruz County Crop Report.

Note: Annual crop production value shown does not include timber.

# Annual Crop Production Value (in Millions of Dollars) by Production Type, Santa Cruz County

	2010	2011	2012	2013	2014	2015	2016
Total Crops Value	\$527.8	\$562.9	\$563.9	\$595.9	\$611.2	\$620.5	\$632.8
Berries	\$324.6	\$363.2	\$367.9	\$390.1	\$395.8	\$404.0	\$438.5
Nursery/ Ornamental Crops	\$118.8	\$122.6	\$113.5	\$107.9	\$119.7	\$119.1	\$93.6
Vegetables	\$61.8	\$55.8	\$57.8	\$74.2	\$72.2	\$80.4	\$75.3
Tree and Vine Products	\$16.7	\$14.7	\$18.1	\$16.8	\$16.2	\$9.7	\$18.1
Livestock and Animal Products	\$5.8	\$6.6	\$6.5	\$6.9	\$7.3	\$7.3	\$7.4
Timber Farming	\$4.8	\$2.8	\$2.3	\$3.4	\$5.3	\$4.9	\$4.5

Source: Santa Cruz County Agricultural Commissioner. (2017). 2010-2016 Santa Cruz County Crop Report.

#### **Tourism**

# Number of Jobs Generated by Tourism, Santa Cruz County

7,580						9,490 ———
2010	2011	2012	2013	2014	2015	2016p
Source: Dean Runyan  The estimates for 20						

# Tourism Revenue (in Millions of Dollars), Santa Cruz County

Revenue Type	2010	2011	2012	2013	2014	2015	2016p <sup>1</sup>
Direct Travel Spending	\$711.5	\$759.4	\$770.4	\$789.0	\$818.5	\$839.7	\$849.1
Industry Earnings	\$191.8	\$200.4	\$208.3	\$221.5	\$241.2	\$264.5	\$287.9
Local Tax Receipts	\$21.2	\$22.4	\$23.2	\$24.8	\$27.1	\$29.4	\$31.2
State Tax Receipts	\$37.2	\$37.6	\$36.0	\$37.9	\$39.2	\$39.1	\$38.7

Source: Dean Runyan Associates. (2017). 2000-2016p California Travel Impacts by County.

<sup>&</sup>lt;sup>1</sup>The estimates for 2016 are preliminary; finalized data unavailable until spring 2018.

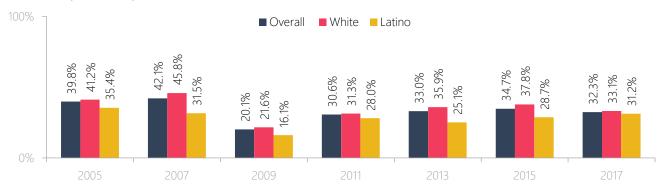
# Financial Wellbeing, Income & Employment

Income, employment status, and overall financial well-being affect's one's ability to acquire resources for healthy living and impacts the overall health of a community. For example, unemployment is associated with higher rates of self-reported poor health, long-term illness, higher incidence of risky health behaviors (e.g. alcoholism, smoking), and increased mortality. With regards to income inequality, research demonstrates that people have a shorter life expectancy in places with higher levels of income inequality.

In 2017, 32.3% of overall survey respondents answered "yes" to feeling better financially this year than last year, a decline of 19% over the past 12 years. While a sizable majority (84.7%) of survey respondents answered that they currently have a transaction account (checking or savings) with a bank or a credit union, a significant difference exists between White (95.5%) and Latino (66.3%) survey respondents. There has been a 27% increase between 2009 and 2017 in overall survey respondents who report annual family income of \$75,000 or more per year. During this same time period, those reporting annual family income between \$35,000 and \$74,999 has declined by 18%.

#### **Financial Wellbeing**

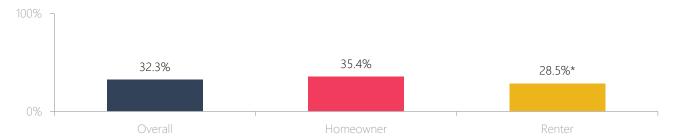
# To you feel you are better off financially this year than last year? (Respondents answering "Yes") – By Ethnicity



2017- Overall n: 784; White n: 426; Latino n: 285.

Source: Applied Survey Research. (2017). 2005-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA. Note: Prior to 2009, the survey question stated "Do you feel you are better off economically this year than last year?

# To you feel you are better off financially this year than last year? (Respondents answering "Yes") By Housing Status – 2017

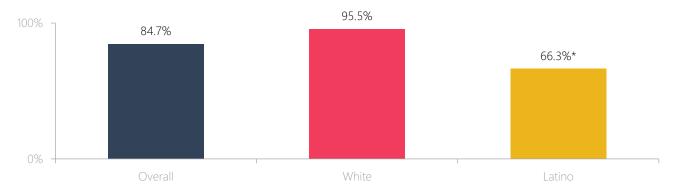


2017- Overall n: 784; Homeowner n: 429; Renter n: 311.

Source: Applied Survey Research. (2017). 2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

\*Significance testing: Renters were significantly less likely than homeowners to respond that they felt better off financially this year than last year.

# To you currently have a transaction account, checking or savings, with a bank or credit union? (Respondents answering "Yes") By Ethnicity – 2017



2017- Overall n: 776: White n: 426: Latino n: 280.

Source: Applied Survey Research. (2017). 2005-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

\*Significance testing: Latino respondents were significantly more likely than White respondents to indicate that they did not have a transaction account

#### Household Income

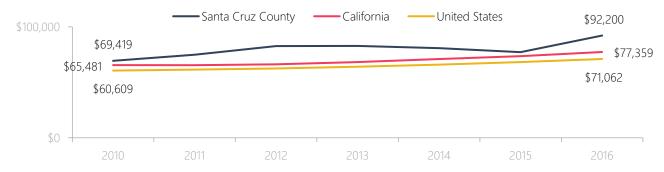
#### Per Capita Personal Income

	2010	2011	2012	2013	2014	2015
Santa Cruz County	\$47,729	\$49,439	\$52,256	\$52,908	\$54,585	\$57,257
California	\$43,315	\$45,820	\$48,312	\$48,471	\$50,988	\$53,741
United States	\$40,277	\$42,453	\$44,267	\$44,462	\$46,414	\$48,112

Source: U.S. Department of Commerce, Bureau of Economic Analysis. (2017). 2010-2015 Regional Economic Information System.

Note: Data presented are the most recent available.

# Median Family Income<sup>1</sup>



Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

<sup>&</sup>lt;sup>1</sup> Median Family Income divides income distribution into two equal groups, with half of local families having incomes greater than the median and half having incomes less than the median. The median family income is the sum of monetary income received in the previous calendar year by all household members 15 years old and over, including household members not related to the householder.

#### Median Household Income (Inflation Adjusted Dollars) by Ethnicity

	2010	2011	2012	2013	2014	2015	2016
Santa Cruz County							
Hispanic or Latino	\$42,127	\$45,862	\$51,891	\$50,003	\$46,890	\$45,411	\$55,653
White	\$67,003	\$70,859	\$73,141	\$73,218	\$78,300	\$74,093	\$82,094
California							
Hispanic or Latino	\$45,185	\$44,377	\$44,401	\$45,800	\$47,434	\$49,682	\$52,403
White	\$66,638	\$67,040	\$68,530	\$70,786	\$73,017	\$75,933	\$79,353

Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

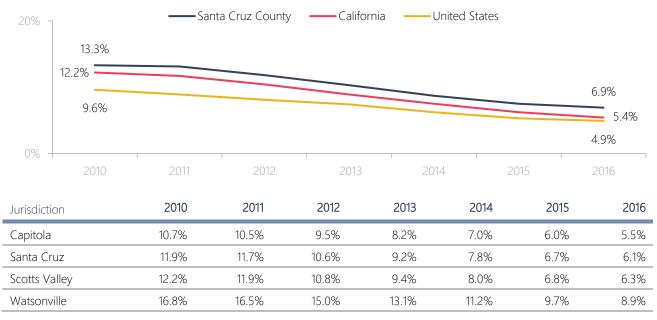
#### ■ Which income range best describes your family income for the year?

Income Category	2009	2011	2013	2015	2017
\$34,999 or less	34.0%	41.9%	36.3%	37.0%	30.8%
\$35,000 to \$74,999	32.7%	28.5%	29.1%	28.6%	26.8%
\$75,000 or more	33.3%	29.5%	34.4%	34.4%	42.4%
Total Respondents	746	659	643	696	700

Source: Applied Survey Research. (2017). 2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

Note: 2017 Survey: "We don't need to know exactly, but could you tell me if your household's annual income from all sources before taxes falls within one of the following categories?"

# Employment Unemployment Rate



Source: U.S. Department of Labor (2017). 2010-2016 Bureau of Labor Statistics. State of California Employment Development Department, Labor Market Information Division. (2017). 2010-2015 Industry Employment & Labor Force.

Note: These data are not seasonally adjusted

Note: Unincorporated data unavailable.

#### January (Winter) Unemployment Rate

	2010	2011	2012	2013	2014	2015	2016	2017
Santa Cruz County	16.0%	15.9%	14.9%	13.5%	11.7%	10.2%	9.2%	8.8%
California	12.7%	12.6%	11.4%	10.2%	8.5%	7.2%	5.9%	5.5%
United States	9.8%	9.1%	8.3%	8.0%	6.6%	5.7%	4.9%	4.8%

Source: State of California Employment Development Department, Labor Market Information Division. (2017). 2010-2017 Industry Employment & Labor Force. U.S. Department of Labor (2017). 2006-2016 Bureau of Labor Statistics.

What is your employment status? By Ethnicity										
Category	2005	2007	2009	2011	2013	2015	2017			
Employed full-time	38.1%	33.5%	33.0%	32.3%	37.4%	36.8%	37.1%			
White	38.0%	29.6%	30.3%	27.5%	34.2%	32.2%	33.5%			
Latino	40.5%	47.6%	40.9%	43.9%	47.9%	45.3%	41.0%			
Retired	22.5%	33.9%	25.6%	29.0%	27.6%	24.9%	28.6%			
White	28.9%	38.5%	32.9%	35.7%	33.9%	36.9%	37.5%			
Latino	2.0%	19.5%	6.7%	8.2%	8.4%	8.7%	13.1%			
Self-employed	8.1%	8.4%	11.7%	11.9%	9.5%	11.6%	10.7%			
White	10.1%	10.7%	13.4%	13.3%	11.3%	12.5%	13.3%			
Latino	1.8%	0.8%	5.1%	8.4%	4.5%	9.0%	7.5%			
Unemployed	9.5%	5.8%	10.6%	10.5%	9.1%	7.8%	5.6%			
White	5.3%	4.1%	8.2%	9.5%	6.2%	6.5%	5.2%			
Latino	21.2%	11.8%	16.2%	14.9%	15.7%	8.9%	7.6%			
Employed part-time	11.7%	9.9%	10.4%	10.4%	11.9%	12.1%	11.2%			
White	11.5%	11.0%	10.7%	8.6%	10.7%	8.9%	8.1%			
Latino	12.1%	5.1%	9.1%	16.5%	16.0%	16.2%	18.2%*			
Other <sup>1</sup>	10.0%	8.5%	8.6%	6.0%	4.5%	6.8%	6.7%			
White	6.3%	6.2%	4.5%	5.4%	3.8%	3.0%	2.4%			
Latino	22.4%	15.2%	21.9%	8.2%	7.4%	11.8%	12.5%*			
Total Respondents	705	702	846	713	706	779	770			
White	494	497	595	500	495	422	423			
Latino	159	158	190	161	159	288	277			

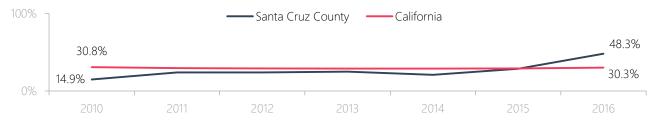
Source: Applied Survey Research. (2017). 2005-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

<sup>&</sup>lt;sup>1</sup>Other contains the categories of: Homemaker, parent, or caregiver; Student; and Volunteer. The option of "volunteer" was added in 2013.

<sup>\*</sup>Significance testing: Latino respondents were significantly more likely to be employed part-time, a student, or a homemaker, parent, or caregiver.

# Youth Employment

### Percentage of Employed Youth (Ages 16-19)



Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

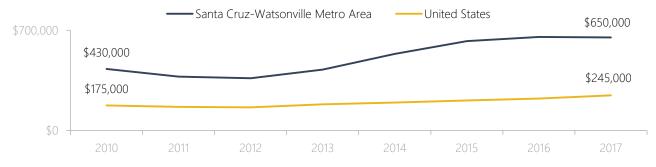
# Housing



Affordable, quality, and stable housing is central to the health, diversity, and economic vitality of a community. When housing is affordable, low- and moderate income families are able to put nutritious food on the table, receive necessary medical care, and provide reliable daycare for their children. Moreover, the development of affordable housing increases spending and

employment in the surrounding economy, acts as an important source of revenue for local governments, and reduces the likelihood of foreclosure and its associated costs. Without a sufficient supply of affordable housing, employers can be at a competitive disadvantage because of their subsequent difficulty attracting and retaining workers.<sup>11</sup>

# Affordable Housing Median Sale Price (All Home Types<sup>1</sup>)



Source: National Association of Home Builders, (2017). 2010-2017 NAHB - Wells Fargo Housing Opportunity Index (HOI), 1st Quarter,

Note: State level data unavailable.

<sup>1</sup>Includes new and existing condominiums and other types of homes.

32

<sup>&</sup>lt;sup>11</sup> Center for Housing Policy and the MacArthur Foundation. 2011. The Role of Affordable Housing in Creating Jobs and Stimulating Local Economic Development: A Review of the Literature.

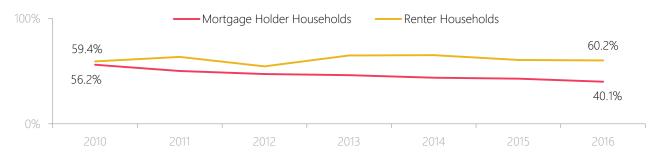
#### Percentage of Homes Affordable for Median Income Families



Source: National Association of Home Builders. (2017). 2010-2017 NAHB - Wells Fargo Housing Opportunity Index (HOI), 1st Quarter.



# Housing Burden<sup>1</sup> by Housing Status, Santa Cruz County



Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates

Note: The proportion of all households that spend more than 30% of income on housing and the proportion of renter households that spend more than 50% of income on housing are Social Determinant of Health indicators per Healthy People 2020. There are no associated targets with these indicator, they are deemed informational.

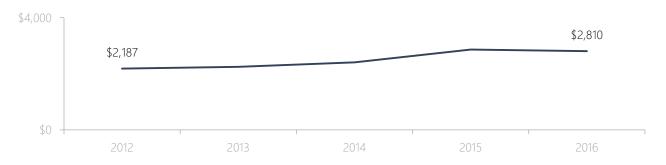
#### Estimate of Average (50th Percentile) Rents, Santa Cruz County

Number of Bedrooms	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017
0 bedrooms	\$1,160	\$1,212	\$1,058	\$1,039	\$1,051	\$1,146	\$1,064	\$1,253
1 bedroom	\$1,363	\$1,424	\$1,248	\$1,257	\$1,271	\$1,387	\$1,289	\$1,486
2 bedrooms	\$1,784	\$1,864	\$1,627	\$1,700	\$1,750	\$1,876	\$1,725	\$1,975
3 bedrooms	\$2,598	\$2,714	\$2,341	\$2,191	\$2,217	\$2,418	\$2,285	\$2,620
4 bedrooms	\$2,779	\$2,904	\$2,413	\$2,444	\$2,473	\$2,698	\$2,555	\$2,942

Source: U.S. Department of Housing and Urban Development. (2017). 2010-2017 HUD USER Data Sets.

<sup>&</sup>lt;sup>1</sup> The U.S. Department of Housing and Urban Development defines the housing burden as Families who pay more than 30 percent of their income for housing and may have difficulty affording necessities such as food, clothing, transportation, and medical care.

#### Median Single Family Residence<sup>1</sup> Rental Price, Santa Cruz County



Source: Zillow. (2017). 2010-2016 Zillow Home Value Index Comparisons.

#### Social Characteristics



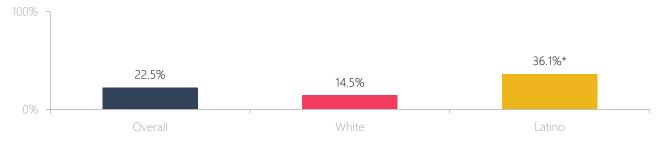
Social indicators, such as poverty and self-sufficiency, provide quantitative evidence of social well-being and illuminate social challenges, trends, and conditions useful for policy making, social spending, and the monitoring and evaluation of programs and policies. Too many individuals continue to experience hardship and difficulty making ends meet as evidenced by

the data presented in this section. Moreover, specific populations bear a heavier burden.

In 2017, just over one-fifth (22.5%) of overall survey respondents went without one or more basic needs in the past 12 months (e.g., food, childcare, housing); Latino respondents (36.1%) were significantly more likely than White respondents (14.5%) to indicate they had gone without one or more basic need. Renters (40.0%) were over four times as likely as homeowners (9.2%) to indicate they had gone without one or more basic needs, a statically significant difference.

#### **Basic Needs**

# Respondents who found themselves having to go without one or more basic needs at any time in the past 12 months. By Ethnicity – 2017



2017- Overall n: 739; White n: 408; Latino n: 263.

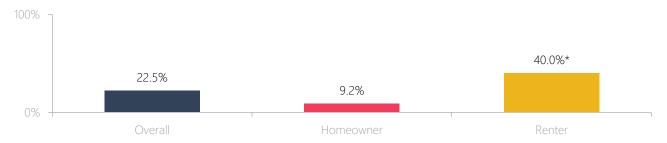
Source: Applied Survey Research. (2017). 2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

\*Significance testing: Latino respondents were significantly more likely than White respondents to indicate that they went without basic needs in 2017

Note: Original survey question reads: "At any time in the past 12 months, did you find yourself having to go without any of the following: ..." Chart reflects survey respondents that went without one or more basic needs. Basic needs include: food, childcare, health care, utilities, housing, and transportation.

<sup>&</sup>lt;sup>1</sup>Residence includes single family homes, condominiums, and co-ops.

# Respondents who found themselves having to go without one or more basic needs at any time in the past 12 months. By Housing Status – 2017



2017 - Overall n: 739; Homeowner n: 405; Renter n: 288.

Source: Applied Survey Research. (2017). 2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

#### **Poverty Level**

# Percentage of Population Living Below the Poverty Level by Age

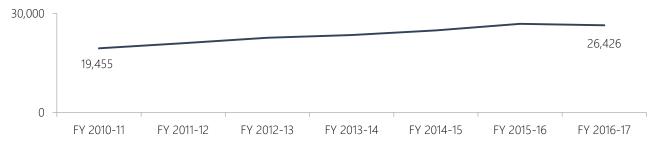
	2010	2011	2012	2013	2014	2015	2016
Santa Cruz County	14.6%	14.8%	13.4%	14.9%	16.8%	16.1%	13.7%
0-5 Years Old	18.0%	15.0%	13.7%	18.6%	19.0%	22.5%	18.5%
6-17 Years Old	16.9%	13.9%	11.9%	18.3%	22.1%	18.4%	13.3%
18-64 Years Old	14.8%	17.4%	15.8%	15.4%	17.4%	16.9%	14.8%
65+ Years Old	8.5%	9.5%	8.0%	6.6%	7.4%	8.0%	7.8%
California	15.8%	16.6%	17.0%	16.8%	16.4%	15.3%	16.8%
0-5 Years Old	23.6%	24.3%	25.3%	24.8%	23.4%	22.3%	20.7%
6-17 Years Old	21.2%	22.1%	23.1%	22.8%	22.4%	20.6%	19.5%
18-64 Years Old	14.5%	15.3%	15.6%	15.6%	15.3%	14.3%	13.2%
65+ Years Old	9.7%	10.0%	10.4%	10.4%	10.6%	9.9%	10.3%

Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates

Note: The proportion of persons living in poverty is a Social Determinant of Health indicator per Healthy People 2020. There is no associated target with this indicator, it is deemed informational.

#### **Social Services**

# Average Number of People Served Monthly by CalFresh, Santa Cruz County



Source: County of Santa Cruz Human Services Department. (2017). *Personal Correspondence with program representative*.

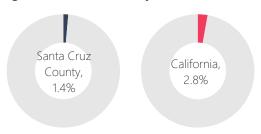
<sup>\*</sup>Significance testing: Renters were significantly more likely to respond that they had gone without basic needs in 2017.

### Average Monthly CalFresh Caseload, Santa Cruz County

	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17
CalFresh Caseload	12,075	13,054	14,530	14,569
CalFresh Applications	1,161	1,042	1,062	974

Source: County of Santa Cruz Human Services Department. (2017). Personal Correspondence with program representative.

### Percent of Population Receiving CalWORKs, January 2017



Source: CalWORKs. (2017). 2017 Monthly Statistical Report.

### Average Monthly Caseload, Santa Cruz County

	FY 2010-11	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17
General Assistance	162	196	174	171	171	212	241
CalWORKs	2,366	2,226	2,059	1,974	1,884	1,722	1,599

Source: County of Santa Cruz Human Services Department. (2017). Personal Correspondence with program representative.

# Number of People Receiving Aid from One or More Public Assistance Programs, Santa Cruz County



Source: County of Santa Cruz Human Services Department. (2017). Personal Correspondence with program representative.

# **Food Security**



Access to affordable, healthy food is a critical component for health and well-being. Researchers have found that food insecurity is associated with malnutrition, particularly as it relates to inadequate consumption of nutritious foods such fresh fruit and vegetables. Research suggests that food insecurity increases the likelihood of hospitalizations,

developmental and mental health problems, poor disease managements and increases health care spending. Moreover, research suggests that food insecurity triggers compensatory behaviors such as skipping meals or binge eating when food is available, often on low-cost and nutritionally poor foods. 13,14

# ★ At any time in the past 12 months, did you find yourself having to go without food, by Housing Status – 2017



2017 - Overall n: 739; Homeowner n: 405; Renter n: 288.

Source: Applied Survey Research. (2017). Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA. \*Significance testing: Renter respondents were significantly more likely to answer that they had gone without food in the past 12 months.

<sup>&</sup>lt;sup>12</sup> Drewnowski A, Darmon N. The economics of obesity: dietary energy density and energy cost. Am J Clin Nutr July 2005;82(suppl):265S–73S.

<sup>&</sup>lt;sup>13</sup> Edin, Kathryn, Melody Boyd, James Mabli, Jim Ohls, Julie Worthington, Sara Greene, Nicholas Redel, and Swetha Sridharan. 2013. "SNAP Food Security In-Depth Interview Study: Final Report" Family Programs Report. U.S. Department of Agriculture, Food and Nutrition Service.

<sup>&</sup>lt;sup>14</sup> Bruening M, Maclehose R, Loth K, Story M, Neumark-Sztainer D. Feeding a family in a recession: Food insecurity among Minnesota parents. Am J Public Health. 2012 March; 102(3): 520–526. 9.

### **Food Insecurity**

	2014	2015
Food Insecure Individuals		
Santa Cruz County	35,940	33,820
California	5,401,770	4,885,220
Food insecurity rate <sup>1</sup>		
Santa Cruz County	13.4%	12.6%
California	13.9%	12.5%

Source: Gundersen, C., et al. *Map the Meal Gap 2011-2016: Food Insecurity and Child Food Insecurity Estimates at the County Level.* Feeding America, 2016.

Note: Rates are determined using data from the 2001-2014 Current Population Survey on individuals in food insecure households. Data shown are most recent. Caution should be used when comparing rates year to year as methodology has changed.

<sup>1</sup>Food Insecurity Rate refers to the percentage of the population that experienced food insecurity at some point during that year. Food insecurity refers to the USDA's measure of lack of access, at times, to enough food for an active, healthy life for all household members and limited or uncertain availability of nutritionally adequate food.

# Number of People Served by the Second Harvest Food Bank, Santa Cruz County



	I			
FY 2013-14		FY 2014-15		FY 2015-16
Jurisdiction	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17
Capitola	3.1%	2.4%	2.8%	3.1%
Santa Cruz	33.6%	24.0%	25.7%	23.7%
Scotts Valley	2.3%	5.8%	5.9%	3.3%
Watsonville	35.8%	43.9%	41.5%	39.5%
Unincorporated	25.2%	23.9%	24.1%	30.4%

Source: Second Harvest Food Bank of Santa Cruz County. (2017). 2013-2017 Personal Correspondence with program representative.

Note: Reporting methodology changed in Fiscal Year 2013-14 to show data for June through July.

### Percentage of People Served by the Second Harvest Food Bank by Ethnicity

	FY 2014-15	FY 2015-16	FY 2016-17
Latino	62.4%	62.3%	59.7%
White	31.6%	27.7%	32.5%
African American	1.6%	1.5%	1.4%
Asian	1.4%	1.4%	1.6%
Native American	0.5%	0.5%	0.4%
Pacific Islander	0.3%	0.2%	0.3%
Other	2.2%	6.4%	3.7%

Source: Second Harvest Food Bank of Santa Cruz County. (2017). 2014-2017 *Personal Correspondence with program representative*. Note: Other reported an increase from 2.2% to 6.4% because a large school district changed the way they report ethnicity.

### Percentage of Students Receiving Free or Reduced Cost Meals



Source: California Department of Education. (2017). 2010-2017 Educational Demographics Unit.



Education accounts for one of the five determinant areas in the Social Determinants of Health framework. Indicator factors include: high school graduation, enrollment in higher education, and early childhood education.

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UC Santa Cruz	60

# **Education Snapshot**

#### Child Care

### 30% shortfall

in child care capacity for working families (children under age 6) in Santa Cruz County. This percentage of children represents a shortfall of 2,986 child care spaces (full- or part-time).

### Language and Literacy

# 34%



of Santa Cruz County 3rd graders met or exceeded grade standards in English language arts/literacy and are ready for future coursework

### 38%

of Santa Cruz County 3rd graders met or exceeded grade standards in mathematics and are ready for future coursework

### High School Graduation



85.8% Santa Cruz County cohort outcome

graduation rate

CALIFORNIA: 83.2%

HP 2020: 87% WHITE: 90.8%

LATINO: 82.3%

Readiness for Higher Education

#### 54.5%



CALIFORNIA: 45.4%

**WHITE: 60.0% LATINO: 49.5%** 

\*High school courses in which the student received a minimum grade of "C" or better; meeting minimum admission standards

Enrollment in Higher Education

CABRILLO COLLEGE: 12,255

UC SANTA CRUZ: 18,783



Snapshot displays the most recent available data. Arrows shown reflect Santa Cruz County trends.







No arrow indicates no trend available



# Community Goals for 2020

Goal 1: By the year 2020, all students will be fully connected and engaged with their school community, and will see their school as a welcoming, essential, and safe place.

Community Hero: Ron Indra

Goal 2: By the year 2020, all students will have broader access to courses and enrichment activities, including visual and performing arts, career technical education and digital technology.

Community Hero: Jonathan Pilch

Goal 3: By the year 2020, all students will be provided sufficient behavior, health, and counseling services to succeed in their chosen educational and career pathways.

# Child Care / Early Childhood Education

Several decades of research clearly demonstrate that high-quality, developmentally appropriate early childhood education (ECE) programs produce short- and long-term positive effects on children's cognitive and social development.<sup>15</sup> Moreover, studies of the costs and long-term benefits of high-quality ECE programs have consistently found substantial savings derived over the course of years and decades such as: reduced need for remedial and special education, reduced incarceration rates, and lower rates of teen pregnancy. Analyses of the costs and benefits of ECE have found impressive returns on investment to the public, delivering a 13% per year return on investment. Additionally, research has found that high-quality and reliable child care increases worker productivity and improves businesses' bottom line.<sup>1617</sup>

#### Number of Spaces in Child Care Centers and Homes - 2014

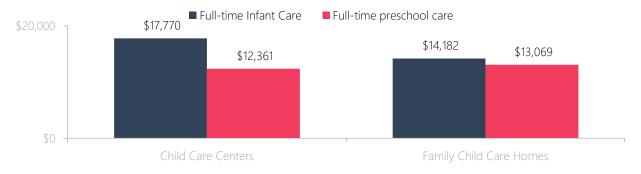
	0-1 Years	2-5 Years	0-5 Years
Licensed Child Care Centers	309	3,486	3,795
Licensed Family Child Care Homes	861	2,321	3,182
Total	1,170	5,807	6,977

Source: California Child Care Resource & Referral Network, California Child Care Portfolio (2015).

Note: The Portfolio Report provided family child care homes spaces as a total, not by age. The age-specific totals for FCCH listed in the table above are estimated based on the age distribution of FCCH's for the current year.

Note: Based on Section 13 of the LPC template. This table does not include the number of spaces in licensed and unlicensed centers and after-school programs for school-aged children, ages 6-12. There are different sources for these data which cannot be reconciled into an unduplicated total count

### Average Annual Full-time Cost of Child Care, Santa Cruz County - 2016



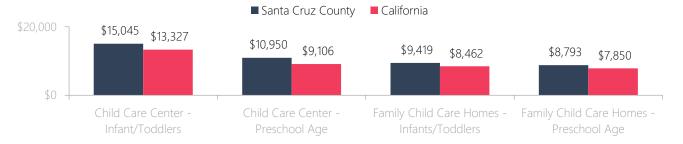
Source: California Child Care Resource & Referral Network, California Child Care Portfolio (2017).

<sup>15</sup> NAEYC. A Call for Excellence in Early Childhood Education. Accessed on July 29, 2016 from https://www.naeyc.org/policy/excellence.

<sup>&</sup>lt;sup>16</sup> University of California, Berkeley, Center for Labor Research and Education. 2011. Economic Impacts of Early Care and Education in California.

<sup>&</sup>lt;sup>17</sup> Heckman, James, The Life-cycle Benefits of an Influential early Childhood Program. Accessed on October 17, 2017 from https://heckmanequation.org/the-heckman-equation/

# Average Annual Cost of Child Care - 2015



Source: California Child Care Resource & Referral Network, California Child Care Portfolio (2015); Cost data are from the Child Care Regiona Market Rate Survey, 2014. Retrieved from http://www.kidsdata.org/topic/1849/child-care-cost-agefacility/table#fmt=2358&loc=370&tf=79&ch=984,985,222,223&sortColumnId=0&sortType=asc.

### Child Care Capacity for Working Families under Age 6 - 2014-15

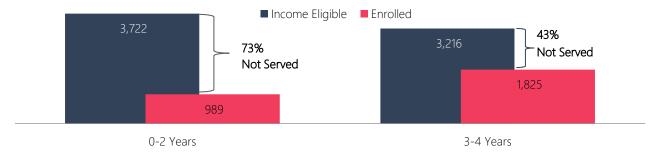
Category	0-1 Years	2-5 Years	Total (0-5 Years)
Children in Working Families	2,910	7,053	9,963
Number of part-time or full-time spaces (capacity)	1,170	5,807 <sup>1</sup>	6,977
Licensed Child Care Centers	309	3,486	3,795
Licensed Family Child Care Homes	861	2,321 <sup>1</sup>	3,182
Shortfall in Capacity	(1,740)	(1,246)	(2,986)
Shortfall as Percentage of Children	60%	18%	30%

Source: "Children in Working Families" totals are from AIR Early Learning Needs Assessment Tool. Licensed capacity totals are from the 2015 Child Care Portfolio of the California Child Care Resource & Referral Network.

Note: To estimate the overall shortfall in capacity, the number of spaces available are subtracted from the number of children estimated in need.

<sup>1</sup>The R&R Network publishes only the total FCCH spaces, without specifying by age group. The age-group estimates in the table are based on the proportion of FCCH spaces by age group that existed in 2015, as provided by Santa Cruz COE.

#### Low-Income Children under Age 5 Enrolled in Subsidized Child Care - 2014-2015

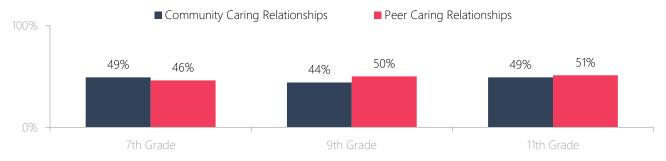


Source: Applied Survey Research. (2016). Santa Cruz County Early Care and Education Needs Assessment. Project AIR Early Learning Needs Assessment Tool, Santa Cruz COE.

### **Youth Assets**

Developmental assets are a set of skills, experiences, relationships, and behaviors that enable young people to develop into successful and contributing adults. Studies of more than 5 million young people across the United States (as well as studies in other countries) show that the more developmental assets young people acquire, the better their chances of succeeding in school and becoming happy, healthy, and contributing members of their communities and society. <sup>18</sup> Importantly, they are less likely to engage in a wide range of high-risk behaviors, such as violence, trouble in school, and drug and alcohol use. <sup>19</sup> Examples of developmental assets include service to others, self-esteem, sense of purpose, and having adult role models. <sup>20</sup>

# Percentage of Students with a "High" Level by Relationship Type $^{1,2}$ and Grade Level, Santa Cruz County -2014-15



Source: West Ed for California Department of Education. (2015). *California Healthy Kids Survey, Santa Cruz County*.

<sup>1</sup>Community Caring Relationships include the following survey questions: "Outside of my home and school, there is an adult who...really cares about me... notices when I am upset about something... ...whom I trust.

<sup>2</sup>Peer Caring Relationships include the following survey questions: "I have a friend about my own age who... really cares about me...who talks with me about my problems...who helps me when I'm having a hard time."

<sup>&</sup>lt;sup>18</sup> Search Institute. Accessed on August 2, 2016 from http://www.search-institute.org/research/developmental-assets.

<sup>&</sup>lt;sup>19</sup> Search Institute. Accessed on August 2, 2016 from http://www.search-institute.org/research/developmental-assets.

<sup>&</sup>lt;sup>20</sup> Project Cornerstone. Accessed on August 2, 2016 from http://www.projectcornerstone.org/html/developmentalassets.html.

### **Student Enrollment**

Student enrollment provides insight into the shifting demographic composition of a region. Nationally, enrollment in public elementary and secondary schools increased from 48.5 million to 50.0 million between 2003 and 2013, and is projected to continue increasing. <sup>21</sup> Additionally, the number of White students enrolled in public elementary and secondary schools is decreasing while, in contrast, the number who are Hispanic is increasing, reflecting demographic shifts in the population<sup>22</sup>; data suggests that Santa Cruz County is mirroring this national shift.

### Student Enrollment, Santa Cruz County

38,974 40,462

2010-11	2011-12	2012-13	2013-14	2014-15	2015-	16 201	6-17
School District	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17
County Office of Education	1,389	1,106	1,393	1,349	1,289	1,352	1,286
Bonny Doon Union Elementary	114	129	132	127	146	165	163
Happy Valley Elementary	135	133	127	129	134	132	125
Live Oak Elementary	2,108	2,061	2,118	2,081	2,108	2,106	2,069
Mountain Elementary	120	123	132	131	120	124	118
Pacific Elementary	110	110	104	106	108	115	106
Pajaro Valley Unified	19,542	19,914	20,001	20,362	20,438	20,354	20,400
San Lorenzo Valley Unified	4,025	4,264	4,444	4,514	4,613	4,644	4,921
Santa Cruz City Elementary	2,257	2,336	2,360	2,351	2,361	2,294	2,206
Santa Cruz City High	4,718	4,691	4,716	4,666	4,731	4,643	4,582
Scotts Valley Unified	2,574	2,506	2,479	2,474	2,482	2,545	2,505
Soquel Union Elementary	1,879	1,895	1,954	2,005	2,054	1,979	1,981
California	6,217,113	6,214,204	6,214,199	6,236,672	6,235,520	6,226,737	6,228,235

Source: California Department of Education. (2017). 2010-2017 *Educational Demographics Office*.

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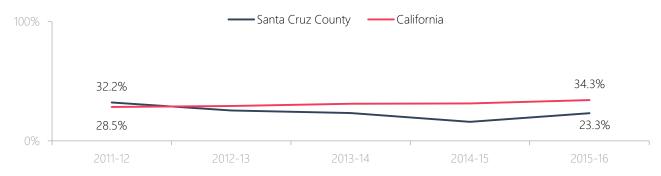
<sup>&</sup>lt;sup>21</sup> National Center for Education Statistics. Accessed on August 2, 2016 from http://nces.ed.gov/programs/coe/indicator\_cge.asp.

<sup>&</sup>lt;sup>22</sup> National Center for Education Statistics. Accessed on August 2, 2016 from http://nces.ed.gov/programs/coe/indicator\_cge.asp.

### **Absenteeism**

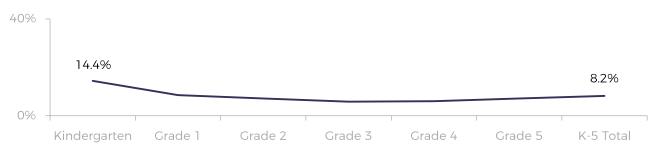
California Legislature defines a truant as a student missing more than 30 minutes of instruction without an excuse three times during the school year. Chronic absenteeism is when a student misses 10 percent of a school year for any reason. Students who are chronically absent are more likely to fall behind in reading and math, and are less likely to graduate from high school.<sup>23</sup> Chronic absenteeism increases achievement gaps at the elementary, middle, and high school levels. Because students raised in poverty benefit the most from being in school, one of the most effective strategies for providing pathways out of poverty is to ensure low-income students are in school every day. <sup>24</sup>

#### **Truancy Rate**



Source: California Department of Education. (2017). 2010-2017 Educational Demographics Office.

### Percentage of Students that are Chronically Absent by Grade Level, Santa Cruz County<sup>1</sup> – 2014



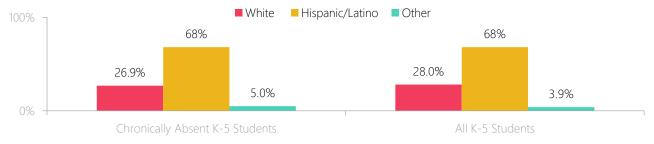
Source: Santa Cruz County, Keeping Kids in School (KKIS) Collaborative. (2014).

Santa Cruz County data is represented by the following school districts: Santa Cruz City, Pajaro Valley, Live Oak, and San Lorenzo Valley.

<sup>&</sup>lt;sup>23</sup> Johns Hopkins University, School of Education, Center for Social Organization of Schools. 2012. *The Importance of Being in School: A Report on Absenteeism in the Nation's Public Schools* 

<sup>&</sup>lt;sup>24</sup> Johns Hopkins University, School of Education, Center for Social Organization of Schools. 2012. *The Importance of Being in School: A Report on Absenteeism in the Nation's Public Schools*.

# Percentage of Students that are Chronically Absent Compared to All Students by Ethnicity, Santa Cruz County<sup>1</sup> – 2014



Source: Santa Cruz County, Keeping Kids in School (KKIS) Collaborative. (2014).

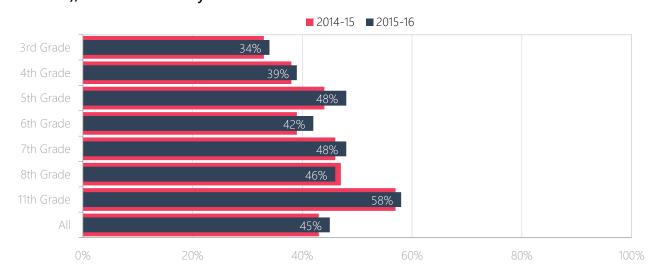
Santa Cruz County data is represented by the following school districts: Santa Cruz City, Paiaro Valley, Live Oak, and San Lorenzo Valley.

#### **Test Scores**

Standardized tests assesses knowledge and skills that students need to be successful in school, such as critical reading, mathematics, science, and writing skills. Assessments promote high-quality teaching and student learning, and set a course to ensure that all California students are well prepared to enter college and careers in today's competitive global economy.<sup>25</sup>

In 2014, the California Assessment of Student Performance (CAASPP) was established to replace the Standardized Testing and Reporting (STAR) Program, in order to include assessments for the new Common Core State Standards (CCSS). CAASPP encompasses the Smarter Balance Assessments Consortium (SBAC) system which is based on CCSS for English language arts/literacy, and math.

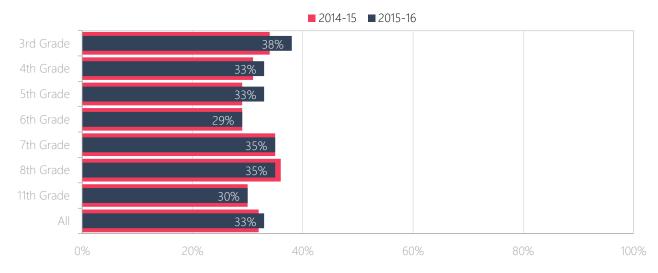
# California Assessment of Student Performance (CAASPP) English Language Arts/Literacy Achievement Level Distribution (Students who met or exceeded standards), Santa Cruz County – 2014-15 and 2015-16



Source: California Assessment of Student Performance and Progress. (2017). 2014-2016 Test Results for English Language Arts/Literacy.

<sup>&</sup>lt;sup>25</sup>California Department of Education. Assessment Information. Accessed on August 2, 2016 from http://www.cde.ca.gov/ta/tq/ai/.

# Mathematics Achievement Level Distribution (Students who met or exceeded standards), Santa Cruz County – 2014-15 and 2015-16

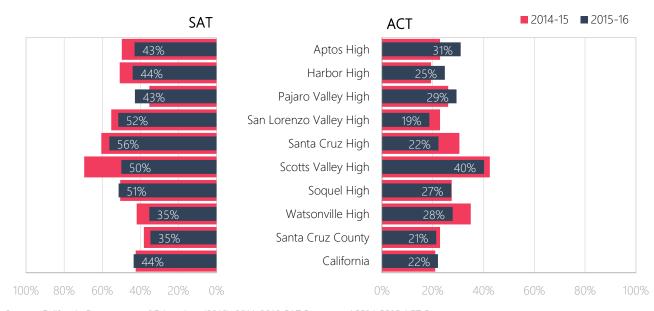


Source: California Assessment of Student Performance and Progress. (2017). 2014-2016 Test Results for Mathematics.

Note: Standards not met includes students who nearly met standards.

**SAT and ACT** 

# Percentage of $9^{th}$ - $12^{th}$ Grade Students Who Took the SAT or ACT by High School, Santa Cruz County – 2014-15 and 2015-16



Source: California Department of Education. (2016). 2014-2016 SAT Report and 2014-2016 ACT Report.

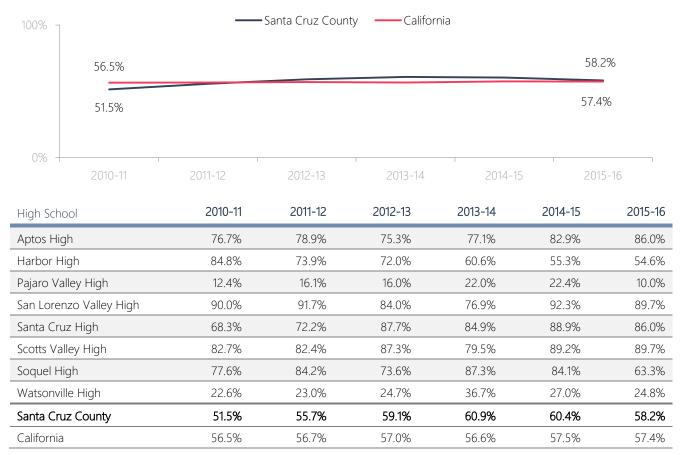
# Average SAT<sup>1</sup> Score



Source: California Department of Education. (2017). 2010-2016 SAT Report.

<sup>&</sup>lt;sup>1</sup>The SAT is a national college admissions test. It tests students' knowledge of subjects that are necessary for college success: reading, writing, and mathematics. It is typically taken by high school juniors and seniors. Scores are out of 2400 possible points on a nonlinear curve. Visit the College Board's website for information on how the tests are scored at https://www.collegeboard.org/. Each section of the SAT is scored on a scale of 200-800, with two writing sub scores for multiple-choice questions and the essay.

# Percentage of ACT<sup>1</sup> Scores of 21 or Higher



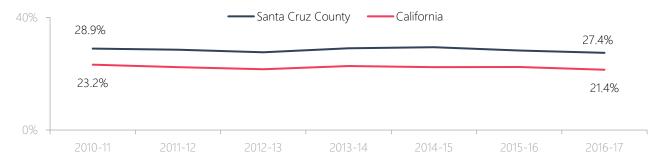
Source: California Department of Education. (2017). 2010-2016 SAT Report.

<sup>&</sup>lt;sup>1</sup>The ACT is a national college admissions test. It tests students' knowledge of subjects that are necessary for college success: reading, English, math, and science. It is typically taken by high school juniors and seniors. Scores range from 1 to 36 possible points.

#### **Diverse Learners**

America's schools are responsible for meeting the educational needs of an increasingly diverse student population. Diverse student learners include children working to learn the English language, students with disabilities, Native American students, homeless students, the children of migrant workers, and neglected or delinquent students. English Learners (ELs) are the fastest- growing student population within the United States and a large achievement gap exists between ELs and their non-EL classmates. Schools are striving to provide a wide range of resources and support to ensure that all students have the opportunity to succeed in college and in a career.

# English Language Learners Percentage of English Learner Students



Source: California Department of Education, (2017), 2010-2017 Educational Demographics Office,

# Percentage of English Learner Students by School District

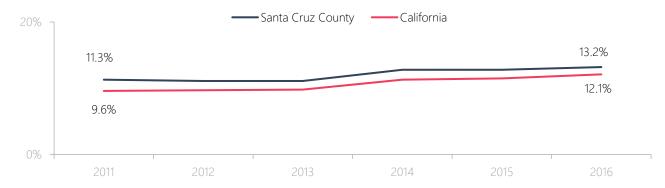
	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17
County Office of Education	26.1%	15.8%	18.4%	17.4%	13.8%	13.9%	14.1%
Bonny Doon Union Elementary	0.9%	1.6%	0.8%	0.0%	1.4%	1.2%	2.5%
Happy Valley Elementary	0.0%	0.8%	1.6%	1.6%	1.5%	3.0%	4.0%
Live Oak Elementary	31.6%	32.3%	32.6%	32.7%	33.5%	34.5%	31.4%
Mountain Elementary	2.5%	3.3%	0.8%	0.0%	0.0%	0.8%	1.7%
Pacific Elementary	10.9%	9.1%	10.6%	12.3%	13.0%	13.0%	16.0%
Pajaro Valley Unified	45.9%	45.4%	44.0%	46.5%	47.3%	44.7%	43.4%
San Lorenzo Valley Unified	1.1%	1.3%	1.8%	1.7%	2.0%	2.3%	2.7%
Santa Cruz City Elementary	27.2%	25.7%	24.4%	25.7%	25.0%	26.0%	25.7%
Santa Cruz City High	7.9%	7.7%	6.7%	7.2%	7.6%	8.7%	8.9%
Scotts Valley Unified	1.7%	2.1%	1.7%	2.3%	3.0%	2.0%	2.2%
Soquel Union Elementary	14.0%	12.1%	13.2%	11.8%	12.4%	10.0%	11.1%

Source: California Department of Education. (2017). 2010-2017 Educational Demographics Office.

<sup>&</sup>lt;sup>26</sup> U.S. Department of Education, 2010, Diverse Learners.

<sup>&</sup>lt;sup>27</sup> U.S. Department of Education. 2010. *Diverse Learners*.

# Special Education Special Education Enrollment



Source: California Department of Education. (2017). 2010-2017 Educational Demographics Office.

<b>Special Education</b>	<b>Enrollment by</b>	, Disability Type <sup>1</sup>
Special Education	LIII OIIIII EIIL DY	/ Disability Type

	2011	2012	2013	2014	2015	2016
Autism						
Santa Cruz County	5.8%	5.9%	6.4%	6.8%	7.1%	7.8%
California	8.8%	9.6%	10.4%	12.0%	12.6%	13.9%
Deaf						
Santa Cruz County	0.4%	0.4%	0.4%	0.5%	0.6%	0.3%
California	0.5%	0.5%	0.5%	0.5%	0.5%	0.4%
Emotional Disturbance						
Santa Cruz County	3.0%	3.2%	2.9%	2.7%	2.7%	3.0%
California	4.4%	4.3%	4.1%	3.5%	3.4%	3.3%
Hard of Hearing						
Santa Cruz County	2.1%	2.0%	2.3%	3.0%	2.8%	2.3%
California	1.2%	1.2%	1.2%	1.5%	1.4%	1.4%
Intellectual Disability						
Santa Cruz County	4.1%	4.4%	4.3%	3.9%	4.1%	3.9%
California	6.3%	6.3%	6.3%	6.2%	6.1%	5.8%
Learning Disability						
Santa Cruz County	49.1%	49.6%	50.0%	43.4%	43.0%	42.9%
California	46.4%	45.9%	45.5%	40.0%	39.6%	38.9%
Multiple Disability						
Santa Cruz County	1.1%	1.2%	1.1%	1.1%	0.9%	0.8%
California	0.7%	0.8%	0.8%	0.9%	0.9%	0.9%
Orthopedic Impairment						
Santa Cruz County	2.0%	1.9%	1.8%	1.6%	1.6%	1.4%
California	2.0%	1.9%	1.8%	1.8%	1.7%	1.5%

Other Health Impairment						
Santa Cruz County	5.9%	6.3%	6.1%	7.4%	8.6%	11.0%
California	8.9%	9.5%	10.2%	10.0%	10.6%	12.0%
Speech or Language Impairment						
Santa Cruz County	25.8%	24.2%	23.9%	28.7%	27.7%	26.3%
California	19.8%	19.0%	18.4%	22.8%	22.3%	21.2%
Traumatic Brain Injury						
Santa Cruz County	0.2%	NA	NA	0.1%	0.2%	0.0%
California	0.3%	0.3%	0.3%	0.2%	0.2%	0.2%
Visual Impairment						
Santa Cruz County	0.6%	0.6%	0.6%	0.6%	0.5%	0.3%
California	0.6%	0.6%	0.6%	0.6%	0.5%	0.5%
Santa Cruz County Total Special Education Enrollment	4,408	4,372	4,449	5,165	5,193	5,336
California Total Special Education Enrollment	599,770	605,549	613,061	705,279	717,961	754,337

Source: California Department of Education. (2017). 2010-2017 Educational Demographics Office.

<sup>&</sup>lt;sup>1</sup> For more information regarding disability types, visit: http://www.cde.ca.gov/ta/tg/ca/disablecodes.asp

# **High School Graduation & College Readiness**

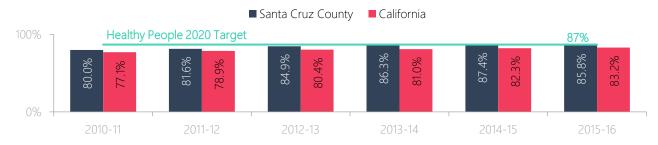




High school graduation and college readiness are important measures of how well a region prepares its youth for future success. High school graduates earn higher salaries, have better self-esteem, more personal life satisfaction, fewer health problems, and less involvement in criminal activity as compared to high

school dropouts.<sup>28</sup> High school graduation can be measured by the cohort graduation rate at which students enter 9<sup>th</sup> grade and graduate within four years (including GED or special education certificate of completion). College readiness can be measured by the proportion of youth that complete high school and meet entrance requirements for the University of California (UC) or California State University (CSU). Examining high school graduation rates and college readiness by socioeconomic variables sheds light on the inequality of educational achievement in a region.

# Cohort<sup>1</sup> Outcome Graduation Rates



School District	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16
District						
Pajaro Valley Unified	81.6%	85.9%	88.6%	89.7%	93.6%	88.3%
San Lorenzo Valley Unified	90.1%	96.3%	94.4%	96.8%	96.8%	95.7%
Santa Cruz City High	90.2%	90.5%	89.8%	91.9%	89.7%	92.5%
Scotts Valley Unified	96.7%	96.7%	97.9%	97.7%	98.8%	96.9%
Ethnicity						
Hispanic/Latino	73.1%	74.7%	80.4%	82.6%	83.9%	82.3%
White	86.7%	88.7%	90.6%	90.8%	92.3%	90.8%

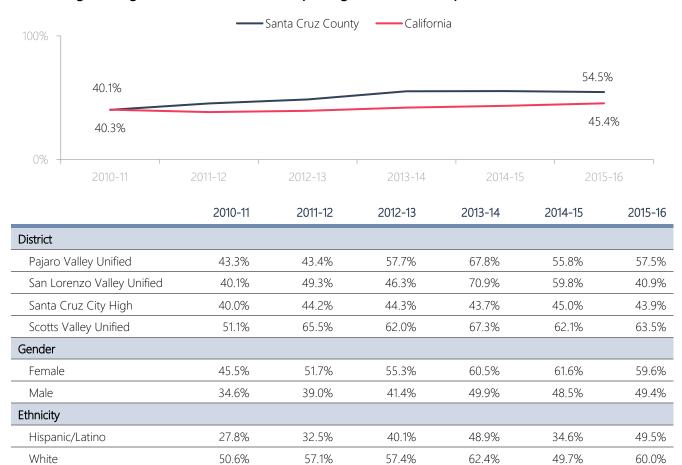
Source: California Department of Education. (2017). 2010-2016 *Educational Demographics Office*.

Note: Increase in the proportion of students who graduate with a regular diploma 4 years after starting 9<sup>th</sup> grade is both a Social Determinant of Health indicator and Leading Health Indicator per Healthy People 2020. Indicator has a target of 87% of students awarded a high school diploma 4 years after starting 9<sup>th</sup> grade with a desired increase associated with the indicator.

<sup>&</sup>lt;sup>1</sup> A cohort is a group of students that could potentially graduate during a four-year time period (grade 9 to grade 12).

<sup>&</sup>lt;sup>28</sup> Math and Reading Help. (n.d.). The importance of a high school diploma. Retrieved May 9th 2013 from http://mathandreadinghelp.org/articles/The\_Importance\_of\_a\_High\_School\_Diploma.html

# Percentage of High School Graduates Completing All UC/CSU Required Courses<sup>1</sup>



Source: California Department of Education. (2017). 2010-2016 Educational Demographics Office.

<sup>&</sup>lt;sup>1</sup> High school courses in which the student has received a minimum grade of "C" or better that are accepted by the University of California and the California State University system as meeting their minimum admission standards.

# **Higher Education**

Higher education is a critical mechanism for socioeconomic advancement and an important driver of economic mobility within society. Moreover, higher education is important for intergenerational mobility. Without a college degree, children born in the bottom income quintile have a 45 percent chance of remaining there as adults. With a degree, they have less than a 20 percent chance of staying in the bottom quintile of the income distribution and a roughly equal chance of ending up in any of the higher income quintiles. <sup>29</sup> Additionally, a well-educated workforce is vital to our nation's future economic growth. Companies and businesses require a highly skilled workforce to meet the demands of today's increasingly competitive global economy.

# Cabrillo College

# Cabrillo College Headcount (Enrollment)



	1		ı		1	1	
Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2	015 Fal	12016
Age Group	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015	Fall 2016
Under 18 Years	4.4%	3.5%	3.6%	3.7%	4.3%	5.6%	5.9%
Age 18-20 Years	30.3%	31.2%	31.8%	30.7%	29.0%	29.9%	33.6%
Age 21-24 Years	19.2%	19.9%	22.0%	22.2%	22.0%	21.4%	22.1%
Age 25-30 Years	14.5%	14.5%	14.5%	14.8%	14.8%	14.6%	14.1%
Age 31-40 Years	11.5%	11.5%	10.6%	11.1%	11.8%	11.5%	9.7%
Age 41-50 Years	9.3%	9.1%	7.7%	7.3%	7.3%	6.9%	5.1%
Age 51-60 Years	7.0%	6.4%	5.9%	6.2%	6.1%	5.5%	4.7%
Age 61 Years & Older	3.8%	3.9%	3.9%	4.0%	4.6%	4.5%	4.6%

Source: Cabrillo College. (2017). 2010-2016 Planning & Research Office. Personal Correspondence with program representative.

<sup>&</sup>lt;sup>29</sup> U.S. Department of the Treasury with the U.S. Department of Education. 2012. *The Economics of Higher Education*.

# Cabrillo College Degrees and Certificates Awarded

1,632	
	1,321

2010-11	2011-12	2012-13	2013-14	2014-15	2015-	16 201	6-17
	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17
Degree Type							
Associate of Arts	34.2%	40.8%	50.1%	33.8%	36.3%	36.4%	36.3%
Associate of Science	21.6%	24.4%	25.2%	31.1%	32.9%	32.5%	36.6%
Certificates of Achievement (18+ Units)	31.9%	19.6%	10.6%	17.7%	13.8%	15.2%	13.4%
Skills Certificate (<18 Units)	12.4%	15.2%	14.1%	17.5%	16.9%	15.9%	13.8%
Ethnicity							
African American	1.1%	1.4%	1.0%	1.1%	0.9%	0.6%	1.6%
Asian	2.8%	2.2%	1.7%	1.0%	3.0%	1.9%	2.8%
Filipino	1.5%	0.9%	1.1%	1.0%	1.1%	1.1%	1.1%
Hispanic/Latino	27.9%	31.1%	34.7%	37.4%	37.6%	42.2%	42.9%
Native American	0.8%	0.8%	0.4%	1.0%	1.2%	0.4%	0.6%
Pacific Islander	0.9%	0.5%	0.8%	0.3%	0.3%	0.1%	0.4%
White	56.7%	55.2%	52.8%	50.1%	50.6%	47.7%	44.2%
Multiple/Other	1.0%	0.8%	2.3%	5.0%	2.4%	4.5%	5.1%
Unknown	7.5%	7.1%	5.1%	3.2%	2.9%	1.5%	1.3%

Source: Cabrillo College. (2017). 2010-2017 Planning & Research Office. Personal Correspondence with program representative.

# Cabrillo College's Disabled Student Programs and Services (DSPS) Enrollment

Disability Type	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17
Learning Disabilities (LD)	32.8%	31.7%	29.5%	27.5%	25.6%	24.7%	27.8%
Psychological Disabilities	15.3%	14.3%	13.9%	14.4%	14.5%	16.0%	18.6%
Mobility Impaired	10.7%	10.4%	10.2%	8.7%	8.2%	7.7%	6.1%
Acquired Brain Injuries (ABI)	11.4%	10.9%	10.2%	11.0%	11.7%	10.6%	11.1%
Developmentally Delayed Learners (DDL)	8.2%	8.2%	8.5%	9.3%	8.8%	8.5%	8.6%
Deafness or Other Hearing Impairments	2.2%	2.4%	2.1%	2.2%	2.1%	1.7%	1.5%
Blindness or Other Significant Visual Impairments	1.4%	1.1%	1.2%	1.0%	1.1%	1.1%	1.3%
Speech & Language Programs	0.6%	0.5%	0.5%	0.5%	0.5%	0.3%	0.2%
Attention Deficit Disorder (ADHD)	NA	NA	NA	NA	NA	NA	5.9%
Autism Spectrum	NA	NA	NA	NA	NA	NA	1.3%
Other Health Impairments	17.6%	20.7%	23.8%	25.5%	27.6%	29.4%	17.5%
Total Number of Students Enrolled in DSPS	322	386	418	399	431	489	311

Source: Cabrillo College. (2017). 2010-2017 Planning & Research Office. Personal Correspondence with program representative.

# UC Santa Cruz UC Santa Cruz Total Enrollment



Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015	Fall 2016
Age Group	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015	Fall 2016
Under 18 Years	2.5%	2.8%	2.2%	2.6%	2.6%	2.6%
Age 18-20 Years	58.4%	61.0%	61.5%	60.8%	60.4%	61.8%
Age 21-24 Years	34.6%	31.7%	31.8%	32.0%	32.4%	30.9%
Age 25-28 Years	2.6%	2.7%	2.8%	2.9%	2.9%	2.9%
Age 29-32 Years	1.0%	0.8%	0.9%	0.8%	0.8%	0.9%
Age 33 & Older	0.9%	0.9%	0.8%	0.8%	0.8%	0.9%

Source: University of California - Santa Cruz. (2017). 2010-2016 Office of Institutional Research and Policy Studies.

# **UC Santa Cruz Degrees Awarded**



2010-11	2010-11 2011-12		2013-14	2014-15		2015-16	
	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	
Degree Type							
Bachelors Awarded	3,701	4,301	4,038	3,766	3,896	4,016	
Masters Awarded	311	290	271	252	288	378	
Doctorates Awarded	148	172	160	179	151	175	
Ethnicity							
White	35.4%	34.6%	33.6%	31.8%	30.3%	28.9%	
Asian	32.9%	32.3%	32.4%	32.9%	32.8%	31.8%	
Hispanic/Latino	12.7%	13.6%	14.9%	15.4%	16.7%	17.5%	
American Indian	0.6%	0.6%	0.7%	0.7%	0.7%	0.7%	
African American	2.8%	3.2%	3.2%	3.3%	3.2%	3.4%	
Other	15.6%	15.7%	15.2%	15.9%	16.3%	17.7%	

Source: University of California - Santa Cruz. (2017). 2010-2016 Office of Institutional Research and Policy Studies.

# UC Santa Cruz Disability Resource Center (DRC) Enrollment

Disability Type	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17
Learning Disabilities (LD)	24.2%	20.6%	18.1%	17.6%	15.6%	11.6%	9.2%
Attention Deficit Disorder (ADD)/ Attention Deficit Hyperactivity Disorder (ADHD)	23.1%	25.9%	25.4%	22.0%	18.4%	15.6%	18.0%
Psychological Disability	23.8%	25.8%	27.2%	30.9%	37.2%	43.8%	49.5%
Acquired Brain Injuries (ABI)	0.6%	1.3%	1.1%	1.8%	1.8%	1.2%	0.6%
Chronic System Condition	9.6%	10.4%	11.7%	10.8%	13.4%	12.5%	13.4%
Asperger's Syndrome or Disorder, Autism Spectrum	3.1%	2.7%	3.8%	3.7%	3.8%	3.6%	4.0%
Mobility or Orthopedic Impairment	11.5%	9.7%	8.7%	7.1%	4.6%	3.5%	2.3%
Blind or Low Vision	2.3%	1.6%	1.7%	0.8%	0.8%	1.1%	1.1%
Hearing Impairment, Hard of Hearing, or Deaf	1.6%	1.8%	1.6%	1.8%	1.7%	1.3%	0.8%
Other Functional Disability	0.1%	0.1%	0.7%	3.4%	2.7%	5.8%	1.1%
Total Number of Students Enrolled in DRC	685	790	878	967	1,146	1,515	1,944

Source: State of California Postsecondary Education Commission. (2017). 2010-2017.

Note: These data do not include students with temporary injuries/conditions that are still served by the DRC. Temporary conditions include broken bones and repetitive stress with a duration expecting to end within 3-6 months.

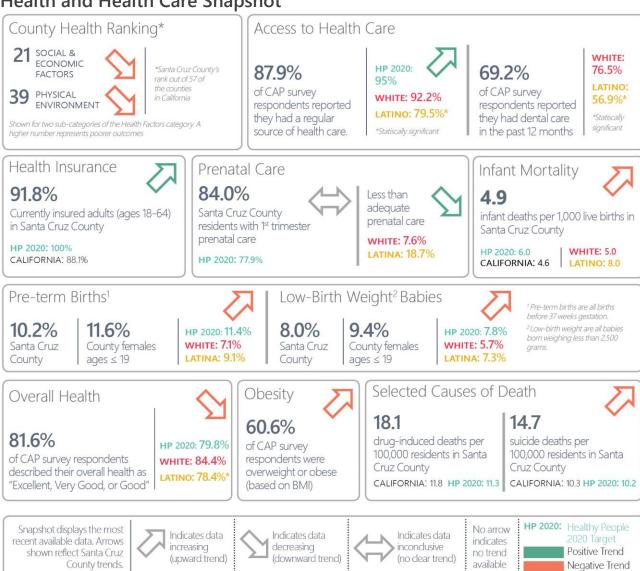
# Health and Health Care

Health and Health Care accounts for one of the five determinant areas in the Social Determinants of Health framework. Indicator factors include: access to health care and access to primary care.

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# Health and Health Care Snapshot



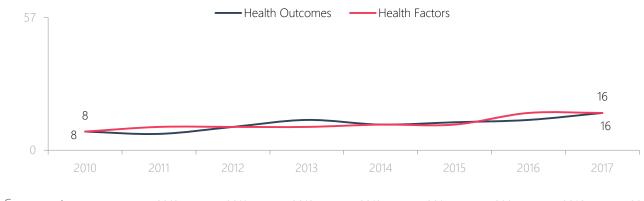
# **Community Goals for 2020**

- Goal 1: By the year 2020, all Santa Cruz County residents will have a regular source of primary care and integrated behavioral health services with a focus on:
  - Decreasing disparities
    - Community Hero: Dr. Sepideh Walthard
  - Decreasing reliance on Emergency Rooms as a regular source of health care
    - Community Hero: Holly Hughes
  - Increasing access to mental health and substance use disorder treatment.
    - » Community Hero: Kristy Shulman
- Goal 2: By the year 2020, obesity in Santa Cruz County will be reduced by 10%.

# **County Health Rankings**

The County Health Rankings provide a snapshot of a community's health. The Rankings are based on a model of population health that emphasizes the many factors that, if improved, can help make communities healthier places to live, learn, work, and play.<sup>30</sup> Health outcomes in the Rankings represent how healthy a county is and measures two types of health outcomes: how long people live (length of life) and how healthy people feel while alive (quality of life). Health factors in the Rankings represent what influences the health of a county and measures four types of health factors: health behaviors, clinical care, social and economic, and physical environment factors. Policies and programs may target health outcomes directly, or tackle the variety of factors that help to determine those outcomes.

### County Health Rankings, Santa Cruz County in Relationship to California Counties<sup>1</sup>



Components	2010	2011	2012	2013	2014	2015	2016	2017
Health Outcomes								
Length of Life	6	7	10	10	10	18	20	19
Quality of Life	7	7	13	20	12	11	16	14
Health Factors								
Health Behaviors	2	1	3	4	6	7	17	12
Clinical Care	19	24	13	12	6	7	11	7
Social & Economic Factors	14	17	23	21	16	20	19	21
Physical Environment	37	5	10	9	23	22	25	39

Source: University of Wisconsin, Population Health Institute. (2017). *County Health Rankings*. Madison, WI.

<sup>&</sup>lt;sup>1</sup>2010 through 2012 county health rankings are out of 56 counties in California (out of a possible 58). 2013-2017 county health rankings are based on 57 counties within California (out of a possible 58). A higher ranking represents worse outcomes, a lower rank is desirable.

<sup>&</sup>lt;sup>30</sup> Robert Wood Johnson Foundation. *County Health Rankings & Roadmaps*. Accessed on August 2, 2016 from http://www.countyhealthrankings.org/our-approach.

#### Access to Health Care



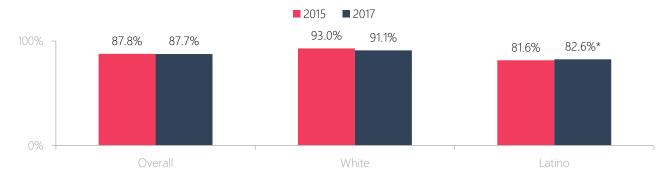


Individuals without a dependable source of health care have more difficulties obtaining needed care, receive fewer preventive health services, are more likely to wait until their conditions worsen before seeking treatment, and are more likely to require hospitalization compared to those who have a dependable

source of health care.<sup>31, 32</sup> Children's access to primary health care is especially important to monitor healthy growth and development<sup>33</sup> and to prevent everyday illnesses from progressing into more serious problems. Children with a usual source of care are more likely to utilize preventive services and to have better health outcomes and fewer disparities overall.<sup>34</sup>

Survey respondents in 2017 (87.7%) reported at similar percentages to 2015 (87.8%) that in the past 12 months they were able to receive the health care that they needed. Of survey respondents who reported they were unable to receive needed health care in 2017, those respondents aged 65 and older were significantly more likely (54.9%) than any other age group to respond that it was "too expensive." While eighty-eight percent (87.9%) of overall survey respondents reported having a regular source of medical health care, this percentage falls short of the Healthy People 2020 goal of 95% of persons having a source of ongoing care.

# In the past 12 months, were you able to receive the health care you needed? (Respondents answering "Yes") By Ethnicity



2017 - Overall n: 792; White n: 428; Latino n: 292.

Source: Applied Survey Research. (2017). Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

Note: Survey question was modified in 2015 and is therefore not comparable to previous years

\*Significance testing: Latino respondents were significantly less likely than White respondents to respond "Yes" to being able to receive the health

66

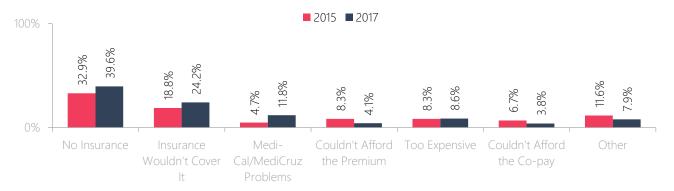
<sup>&</sup>lt;sup>31</sup> U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality. (2011). National Healthcare Disparities and Quality Report. Washington, D.C.

<sup>&</sup>lt;sup>32</sup> Billings, J., Bidman, A.B., Grumbach, K., et al. (1995). Preventable hospitalizations and access to health care. Journal of American Medical Association, 274(4): 305-311.

<sup>&</sup>lt;sup>33</sup> ChildStats.gov. *America's Children: Key National Indicators of Well-Being*. Usual Source of Health Care. 2015. http://www.childstats.gov/americaschildren/care2.asp. Accessed October 21, 2105.

<sup>&</sup>lt;sup>34</sup> U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau. Child Health USA 2014. Rockville, Maryland: U.S. Department of Health and Human Services, 2014.

### The square of the square if you needed health care and were unable to receive it, why couldn't you receive it?



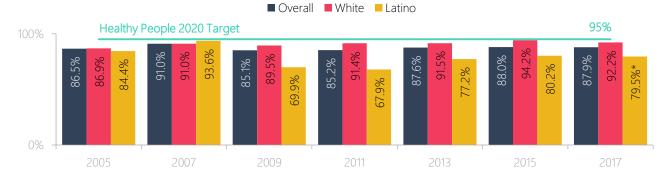
2017 - Overall n: 37

Source: Applied Survey Research. (2017). Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

Note: Survey question was modified in 2015 and is therefore not comparable to previous years

Note: Please refer to Appendices (available online at www.appliedsurveyresearch.org/scccap) for cross tabulation data.

# Do you have a regular source of medical health care? (Respondents answering "Yes") By Ethnicity



2017 - Overall n: 789; White n: 428; Latino n: 288

Source: Applied Survey Research. (2017). 2005-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

Note: Increase in the proportion of persons of all ages who have a specific source of ongoing care is a Social Determinant of Health indicator per Healthy People 2020. Indicator has a target of 95% of persons with a source of ongoing care (all ages) with a desired increase associated with the indicator.

Note: Survey question in 2017 was changed from "Do you have a regular source of health care?"

\*Significance testing: Latino respondents were significantly less likely than White respondents to have a regular source of medical health care in 2017.

#### **Health Insurance**





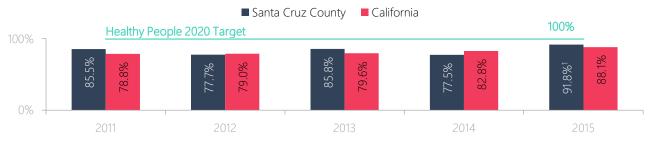
A lack of health insurance coverage is a significant barrier to accessing health services. Families and individuals without health insurance coverage often have unmet health needs, receive fewer preventive services, suffer delays in receiving appropriate care and experience more hospitalizations.<sup>35</sup>

Children who have health insurance learn better in school; miss fewer days of school; are more likely to have a regular source of primary care; and are less likely to be hospitalized for conditions that could have been treated by a primary care physician.<sup>36</sup>

Covered California is the state's health insurance marketplace for the federal Patient Protection and Affordable Care Act.<sup>37</sup> Coverage began in 2014 and includes unsubsidized coverage and subsidized coverage. Subsidized coverage varies from premium assistance, where health services are available on a sliding-scale basis, to no-cost Medi-Cal. Through subsidized care, individuals and families receive federal assistance to reduce the cost of premiums and out-of-pocket expenses for health coverage.<sup>38</sup>

#### Health Insurance





Source: UCLA Center for Health Policy Research. (2017), California Health Interview Survey, 2011-15.

Note: Increase in the proportion of persons with medical insurance is both a Social Determinant of Health indicator and a Leading Health Indicator per Healthy People 2020. Indicator has a target of 100% of persons with medical insurance (<65) with a desired increase associated with the indicator

Note: Data shown are most recent available.

68

<sup>&</sup>lt;sup>1</sup> Data statistically unstable.

<sup>35</sup> U.S. Department of Health and Human Services. (2011). Healthy People 2020 objectives. Retrieved from http://healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=1.

<sup>&</sup>lt;sup>36</sup> Bernstein J, Chollet D, Peterson S. *How Does Insurance Coverage Improve Health Outcomes?*. ISSUE BRIEF 2010. Available at: http://www.mathematica-mpr.com/~/media/publications/pdfs/health/reformhealthcare\_ib1.pdf. Accessed October 21, 2015.

<sup>&</sup>lt;sup>37</sup> Covered California. (2014). Covered California health insurance plans. Retrieved from http://www.coveredca.com/PDFs/CC-health-plans-booklet-rev4.pdf

<sup>&</sup>lt;sup>38</sup> Covered California. (2014). Covered California health insurance plans. Retrieved from http://www.coveredca.com/PDFs/CC-health-plans-booklet-rev4.pdf

# Children Currently Insured (Ages Birth through 17)

	2011	2012	2013	2014	2015
Santa Cruz County	88.7%	84.5%	87.4%	85.0%	100.0%1
Children Birth-4 Years	95.9% <sup>1</sup>	100.0% <sup>1</sup>	68.0% <sup>1</sup>	100.0% <sup>1</sup>	100.0% <sup>1</sup>
Children 5-11 Years	88.0% <sup>1</sup>	100.0% <sup>1</sup>	100.0% <sup>1</sup>	100.0% <sup>1</sup>	100.0% <sup>1</sup>
Children 12-14 Years	100.0% <sup>1</sup>	77.9% <sup>1</sup>	100.0% <sup>1</sup>	65.4% <sup>1</sup>	100.0% <sup>1</sup>
Children 15-17 Years	100.0% <sup>1</sup>	95.0% <sup>1</sup>	100.0% <sup>1</sup>	100.0% <sup>1</sup>	100.0% <sup>1</sup>
California	85.6%	85.5%	86.2%	88.1%	96.7%
Children Birth-4 Years	96.4%	96.7%	98.3%	97.0% <b>1</b>	96.9% <sup>1</sup>
Children 5-11 Years	96.2%	96.4%	97.3%	95.1% <sup>1</sup>	96.8%
Children 12-14 Years	94.9%	94.2%	95.4% <sup>1</sup>	95.3% <sup>1</sup>	98.6% <sup>1</sup>
Children 15-17 Years	96.4%	93.5%	95.7%	95.2% <sup>1</sup>	94.2% <sup>1</sup>

Source: UCLA Center for Health Policy Research. (2015). California Health Interview Survey, 2011-15.

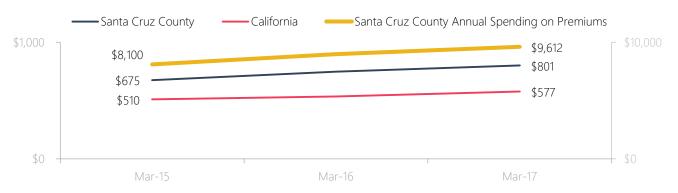
Note: Data shown are most recent available.

#### Individuals Enrolled in Covered California

	March 2015	March 2016	March 2017
Santa Cruz County	14,050	14,560	12,650
California	1,318,960	1,384,640	1,386,280

Source: Covered California. (2017). March 2014-2016 Enrollment Data. Sacramento, CA.

# Average Gross Premium<sup>1</sup>, Covered California Enrollees



Source: Covered California. (2017). March 2014-2016 Enrollment Data. Sacramento, CA.

<sup>&</sup>lt;sup>1</sup>Statistically unstable due to a low number of respondents.

<sup>&</sup>lt;sup>1</sup>Data represent unsubsidized premiums. Premium data is at the "policy" level, which is not necessarily the member level: many policies include more than one member.

# Low-Income Health Insurance Central California Alliance for Health Members Enrolled in Medi-Cal, Santa Cruz County

							69,077
33,561							
2010	2011	2012	2013	2014	2015	2016	2017
		2013	2014		2015	2016	2017
Medi-Cal Expansion <sup>1</sup> Category		0	14,011	1	6,661	19,944	20,573
All Other Categories		41,508	47,529	47	7,668	49,943	48,504
Both Programs		41,508 <sup>2</sup>	61,540 <sup>2</sup>	64	1,329	69,887	69,077

Source: Central California Alliance for Health. (2017). Membership enrollment report. Unpublished data. Scotts Valley, CA

Note: Overall data reflects members enrolled as of December for 2013 and 2014, and as of April for 2015 and forward.

<sup>&</sup>lt;sup>1</sup>Medi-Cal Expansion as a result of the Affordable Care Act (ACA) came into effect on January 1, 2014. The Medi-Cal Expansion Category reflects members enrolled under an ACA Medi-Cal eligibility code.

<sup>&</sup>lt;sup>2</sup>Totals for 2013 and 2014 show slight increase from previously reported numbers due to retro-eligibility in the Medi-Cal program.

### Central California Alliance for Health Members Enrolled in Medi-Cal by Characteristic, Santa Cruz County

·	2010	2011	2012	2013	2014	2015	2016	2017
Primary Care Provider Ty	/pe							
Clinic	14,582	13,160	12,190	13,303	16,290	28,027	32,128	31,416
Private Practice	15,178	10,798	13,289	17,125	19,411	22,657	23,098	22,985
Administrative Members (Not Linked) <sup>1</sup>	3,801	9,785	10,224	9,529	11,495	13,645	14,661	14,676
Ethnicity								
White	32%	32%	31%	28%	29%	33%	32%	31%
Hispanic	59%	58%	59%	60%	56%	46%	51%	52%
Other	9%	8%	10%	12%	15%	21%	17%	17%
Region								
South County <sup>2</sup>	55%	56%	54%	56%	54%	49%	49%	51%
North County <sup>3</sup>	44%	43%	42%	41%	43%	46%	44%	46%
Out of County	1%	1%	4%	3%	4%	5%	7%	3%

Source: Central California Alliance for Health. (2017). [Membership enrollment report]. Unpublished data. Scotts Valley, CA.

Note: Reported enrollment data are as of April 30 of each year.

<sup>&</sup>lt;sup>1</sup> Central California Alliance for Health changed their patient designation in 2011. The number of administrative members increased due to this change. The total number of administrative members includes members not yet linked to a primary care provider (PCP) in the 30-day initial period during which a member selects a PCP, as well as members with other health coverage (primarily Medicare)

<sup>&</sup>lt;sup>2</sup> Central California Alliance for Health defines South County as including the areas of Freedom and Watsonville.

<sup>&</sup>lt;sup>3</sup> Central California Alliance for Health defines North County as including the areas of Santa Cruz, Scotts Valley, Davenport, Felton, Ben Lomond, Boulder Creek, Brookdale, Aptos, Capitola, and Soquel.

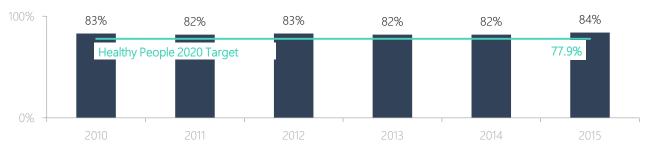
#### **Prenatal Care**



Pregnancy can provide an opportunity to identify existing health risks in women and to prevent future health problems for women and their children. The risk of and pregnancy-related complications and maternal and infant mortality can be reduced by increasing access

to quality care.<sup>39</sup> Regular prenatal care lowers the risk of adverse birth outcomes, including preterm and low birth weight babies.<sup>40</sup> Prenatal care is comprehensive medical care for pregnant women, including screening and management for risk factors and health conditions, and education to promote a healthy pregnancy.<sup>41</sup> Women are advised to seek prenatal care in the first trimester of pregnancy and to have quality prenatal care visits throughout their pregnancy.<sup>42</sup>

### All Births with Prenatal Care during the First Trimester, Santa Cruz County Residents



Source: County of Santa Cruz, Public Health Department. (2016). Births, Santa Cruz County, 2015. Santa Cruz County, CA.

Note: Increase in the proportion of pregnant women who receive prenatal care beginning in first trimester is an indicator per Healthy People 2020. Indicator has a target of 77.9% of pregnant women beginning prenatal care in the first trimester with a desired increase associated with the indicator.

Note: Data shown are most recent available. Due to Santa Cruz County Hepatitis A outbreak, 2016 data unavailable at time of publication.

#### All Births with Less Than Adequate Prenatal Care by Ethnicity, Santa Cruz County Residents

	2010	2011	2012	2013	2014	2015
White	12.0%	14.0%	12.3%	9.6%	8.8%	7.6%
Latina	21.8%	20.4%	20.6%	18.9%	16.8%	18.7%
Other	16.7%	16.8%	19.5%	8.2%	13.1%	13.9%

Source: County of Santa Cruz, Public Health Department. (2016). Births, Santa Cruz County, 2015. Santa Cruz County, CA.

Note: "Other" race category includes Asian, Black, Pacific Islander, Native American/Alaska Native, multi-race, and others not listed.

Note: Data shown are most recent available. Due to Santa Cruz County Hepatitis A outbreak, 2016 data unavailable at time of publication.

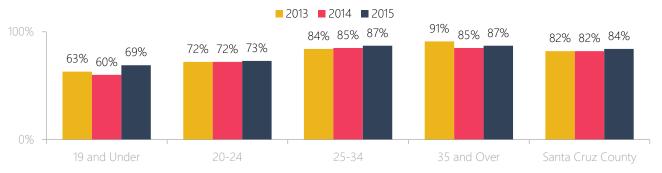
<sup>&</sup>lt;sup>39</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed on August 9, 2016 from https://www.healthypeople.gov/2020/topics-objectives/topic/maternal-infant-and-child-health.

<sup>&</sup>lt;sup>40</sup> What is PedNSS/PNSS? *Centers for Disease Control and Prevention* 2011. Available at: http://www.cdc.gov/pedness/what\_is/pnss\_health\_indicators.htm. Accessed October 2015.

<sup>&</sup>lt;sup>41</sup> What is prenatal care and why is it important? *Eunice Kennedy Shriver Institute of Child Health and Human Development* 2013. Available at: http://www.nichd.nih.gov/health/topics/pregnancy/conditioninfo/pages/prenatal-care.aspx. Accessed October 28, 2015.

<sup>&</sup>lt;sup>42</sup> Office of Women's Health, U.S. Department of Health and Human Services. Pregnancy. *Prenatal care and tests* 2010. Available at: http://www.womenshealth.gov/pregnancy/you-are-pregnant/prenatal-care-tests.html. Accessed October 2015.

#### Births with 1st Trimester Prenatal Care by Age Group, Santa Cruz County Residents



Source: County of Santa Cruz, Public Health Department. (2016). *Births, Santa Cruz County*, 2013-2015. Santa Cruz County, CA.

Note: Data shown are most recent available. Due to Santa Cruz County Hepatitis A outbreak, 2016 data unavailable at time of publication.

#### **Birth Outcomes**



The total number of births in a community is important for anticipating the needs of the population when planning for services.<sup>43</sup> When babies are born at low birth weight throughout a community, it may indicate a need for improving the health of pregnant mothers through prenatal care services and reducing environmental stressors.<sup>44</sup>

Children born preterm (before 37 weeks of gestation) or at a low birth weight (<2,500 grams or 5.5 pounds) are at increased risk for both immediate as well as long-term health problems.<sup>45</sup> Infant mortality, much like low birth weight, is an indicator of maternal health, reflecting access to health care and socioeconomic conditions.<sup>46</sup>

Teen parents and their children are often at greater risk for experiencing negative short- and long-term consequences in the areas of health, school, and economic success, as compared to parents who wait to have children.<sup>47</sup> Research from the National Campaign to Prevent Teen and Unplanned Pregnancy links teen pregnancy to preterm births, low birth weight, and a host of social issues, including poverty, responsible fatherhood, and overall well-being.<sup>48</sup>

<sup>&</sup>lt;sup>43</sup> Fertility and Birth Rates. *Child Trends* 2015. Available at: http://www.childtrends.org/?indicators=fertility-and-birth-rates. Accessed October 28, 2015.

<sup>&</sup>lt;sup>44</sup> Community Health Network. (2011). *High-Risk Newborn—Low Birth weight*. Retrieved January 4, 2011 from http://www.ecommunity.com/health/index.aspx?pageid=P02382.

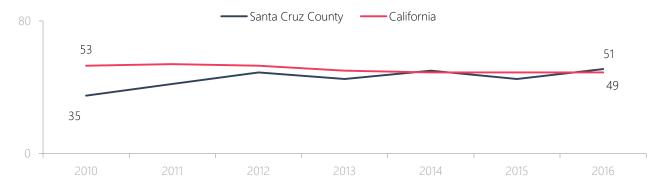
<sup>&</sup>lt;sup>45</sup> Preterm Birth and Low Birth Weight. *Child Health USA* 2014. Available at: http://mchb.hrsa.gov/chusa14/health-status-behaviors/infants/preterm-birth-low-birth-weight.html. Accessed October 28, 2015.

<sup>&</sup>lt;sup>46</sup> Infant Mortality Summary - Kidsdata.org. *Kidsdata.org*. Available at: http://www.kidsdata.org/topic/54/infant-mortality/summary#jump=why-important. Accessed October 28, 2015.

<sup>&</sup>lt;sup>47</sup> Kaye K, Stewart Ng A. TEEN CHILDBEARING, EDUCATION, AND ECONOMIC WELLBEING. *Why It Matters: Teen Childbearing, Education, and Economic Wellbeing* 2012. Available at: https://thenationalcampaign.org/sites/default/files/resource-primary-download/childbearing-education-economicwellbeing.pdf. Accessed October 2015

<sup>&</sup>lt;sup>48</sup> National Campaign to Prevent Teen and Unplanned Pregnancy. *Why it matters: Teen pregnancy*. 2012. Accessed November 2015 from: http://www.thenationalcampaign.org/why-it-matters/wim teens.aspx

Total Births
Birth Rate per 1,000 Women<sup>1</sup>



Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

<sup>1</sup>Women with births in the past 12 months ages 15 to 50 years.

#### All Births (All Ages), Santa Cruz County Residents

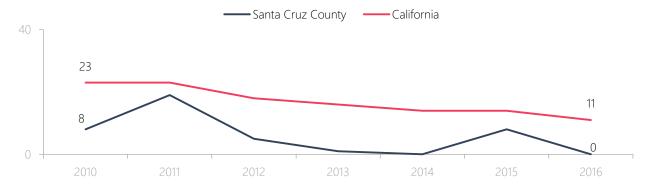
	2010	2011	2012	2013	2014	2015
Race/Ethnicity						
Asian & Pacific Islander	3%	3%	3%	4%	3%	3%
Black	1%	0%	1%	1%	0%	1%
Latina	58%	57%	55%	54%	56%	56%
White	38%	38%	40%	40%	38%	40%
Other <sup>1</sup>	1%	1%	1%	2%	3%	1%
Deliveries by Payment Method						
Medi-Cal	55%	54%	52%	52%	53%	50%
Private Insurance	43%	44%	45%	46%	45%	47%
Other	<1%	<1%	<1%	<1%	<1%	<1%
No Insurance	2%	2%	2%	3%	2%	2%
Santa Cruz County Total All Births	3,170	3,222	3,075	2,866	3,069	2,833

Source: County of Santa Cruz, Public Health Department. (2016). Births, Santa Cruz County, 2010-2015. Santa Cruz County, CA.

Note: Data shown are most recent available. Due to Santa Cruz County Hepatitis A outbreak, 2016 data unavailable at time of publication.

<sup>&</sup>lt;sup>1</sup> "Other" race includes Native Americans, mixed races, and other groups not listed.

#### Birth Rate per 1,000 Adolescents (Ages 15-19)



Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

#### Births to Adolescents (Ages 15-19) among Santa Cruz Residents

	2010	2011	2012	2013	2014	2015
All Births						
African American	0.3%	0.0%	1.2%	0.0%	0.4%1	0.7%
Asian and Pacific Islander	0.3%	0.3%	0.0%	0.4%	0.0%1	0.0%
White	8.9%	6.9%	7.4%	5.1%	7.6% <sup>1</sup>	5.8%
Latina	74.0%	71.8%	75.6%	64.1%	67.0% <sup>1</sup>	92.8%
Other/Unknown	1.3%	1.3%	2.7%	0.4%	1.3% <sup>1</sup>	0.0%
Age of Mother						
Under 15 Years	0.3%	1.6%	0.8%	0.4%	0.9%1	0.0%
15-17 Years	28.9%	26.0%	27.5%	21.9%	23.7% <sup>1</sup>	25.4%
18-19 Years	55.6%	52.7%	58.5%	47.7%	51.8% <sup>1</sup>	74.6%
Santa Cruz County Total Adolescent Births	304	319	258	256	224 <sup>1</sup>	138

Source: County of Santa Cruz, Public Health Department. (2016). Births, Santa Cruz County, 2015 Santa Cruz County, CA.

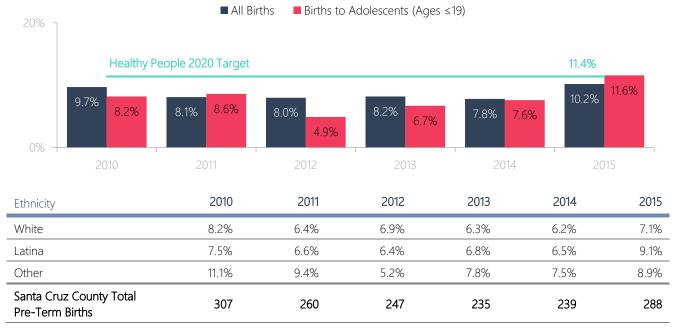
Note: Data shown are most recent available. Due to Santa Cruz County Hepatitis A outbreak, 2016 data unavailable at time of publication.

<sup>&</sup>lt;sup>1</sup>Births to teens includes births that were not Santa Cruz County residents in 2013-2014.

#### Pre-Term and Low-Birth Weight Births

#### Healthy People 2020

#### Births with Babies Born Pre-Term<sup>1</sup>, Santa Cruz County Residents



2010 n: White=1,181, Latina=1,808, Other=138; 2011 n: White=1,209, Latina=1,820, Other=138; 2012 n: White=1,195, Latina=1,674, Other=153; 2013 n: White=1,097, Latina=1,569, Other=167; 2014 n: White=1,144, Latina=1,688, Other=203; 2015 n: White=1,111, Latina=1,560, Other=123.

Source: County of Santa Cruz, Public Health Department. (2016). Births, Santa Cruz County, 2010-2015. Santa Cruz County, CA.

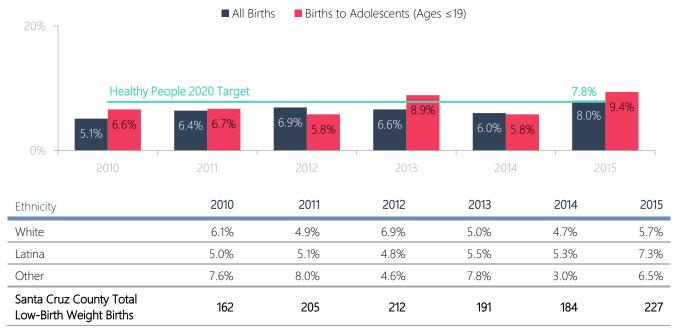
Note: Reduce total preterm births is a Leading Health Indicator per Healthy People 2020. Indicator has a target of 11.4% of total preterm live births (<37 weeks gestation) with a desired decrease associated with the indicator.

Note: Data shown are most recent available. Due to Santa Cruz County Hepatitis A outbreak, 2016 data unavailable at time of publication.

<sup>1</sup>Includes preterm and very pre-term. All births before 37 weeks.



#### Births with Babies Born at Low Birth Weight<sup>1</sup>, Santa Cruz County Residents



2015 n: White=1.111, Latina=1.560, Other=123.

Source: County of Santa Cruz, Public Health Department. (2016). Births, Santa Cruz County, 2010-2015. Santa Cruz County, CA.

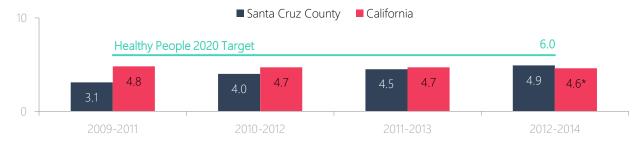
Note: Reduce low birth weight (LBW) is an indicator per Healthy People 2020. Indicator has a target of 7.8% low birth weights infants (<2,500 with a desired decrease associated with the indicator.

 $^{1}\mbox{Babies}$  born weighing less than 2,500 grams.

Note: Data shown are most recent available. Due to Santa Cruz County Hepatitis A outbreak, 2016 data unavailable at time of publication.

#### **Infant Mortality**

### Infant Mortality Rate per 1,000 live births (children under one year of age)



Source: California Dept. of Public Health, Death Statistical Master Files; CDC, Linked Birth / Infant Death Records. (Oct. 2016)

Note: Figures are presented as rates over three-year periods.

\*Data that are unreliable based on fewer than 20 infant deaths

Note: Reduce the rate of all infant deaths (within 1 year) is a Leading Health Indicator per Healthy People 2020. Indicator has a target of 6.0 all infant deaths (per 1,000 live births, <1 year) with a desired decrease associated with the indicator.

#### Infant Mortality Rate<sup>1</sup> per 1,000 live births by Ethnicity

Region		Hispanic		White		Black	Asi	an/Pacific Islander	All Ra	ce/Ethnic Groups
Santa Cruz County	2011-13	2012-14	2011-13	2012-14	2011-13	2012-14	2011-13	2012-14	2011-13	2012-14
Infant Deaths	8.7	8.0	4.7	5.0	0.0	0.0	0.0	0.0	14.0	14.7
Death Rate	5.1 <sup>2</sup>	4.9 <sup>2</sup>	4.0 <sup>2</sup>	4.4 <sup>2</sup>	-	-	-	-	4.6 <sup>2</sup>	4.9 <sup>2</sup>
California										
Infant Deaths	1,134.3	1,088.7	538.0	524.3	256.0	263.3	243.3	237.3	2,365.7	2,318.0
Death Rate	4.6	4.5	3.9	3.8	9.7	10.2	3.6	3.3	4.7	4.6

Source: California Department of Public Health, County Health Status Profiles, 2016-17.

#### **Immunizations**



Immunizations are a cost-effective and successful health care intervention to help children avoid getting numerous infectious diseases. <sup>49</sup> The recommended 4:3:1:3:3:1 immunization schedule protects against 16 diseases including, polio, pertussis, and measles. An annual flu

shot is also recommended.<sup>50</sup>

<sup>&</sup>lt;sup>1</sup>Three-Year Average Birth Cohort Infant Death Rate

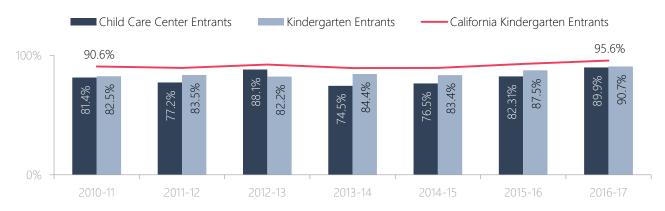
<sup>&</sup>lt;sup>2</sup>Rates deemed unreliable based on fewer than 20 data elements

<sup>-</sup>Rates, percentages, and confidence limits are not calculated for zero events.

<sup>&</sup>lt;sup>49</sup> U.S. Department of Health and Human Services, Healthy People 2020. Immunization and Infectious Diseases. *Immunization and Infectious Diseases*. Available at: http://www.healthypeople.gov/2020/topics-objectives/topic/immunization-and-infectious-diseases. Accessed November 2015

<sup>&</sup>lt;sup>50</sup> U. S. Department of Health and Human Services, Centers for Disease Control and Prevention, Parents' Guide to Childhood Immunizations. *Centers for Disease Control and Prevention* 2015. Available at: http://www.cdc.gov/vaccines/pubs/parents-guide/default.htm. Accessed November 2015.

# Child Care Centers and Kindergarten Entrants with All Required Immunizations, Santa Cruz County



	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17		
Child Care Center Entrants (ages 2 years to 4 years)									
Number of Children	3,348	3,347	2,998	3,297	3,163	3,121	3,460		
Number of Child Care Centers	89	99	88	95	93	88	107		
Percentage with Permanent Medical Exemptions	0.3%	0.4%	0.5%	0.4%	0.6%	1.1%	1.1%		
Percentage with Personal Belief Exemptions <sup>1</sup>	7.0%	7.1%	7.9%	7.0%	7.6%	5.8%	3.4%		
Percentage Needing One or More Immunizations (Conditional Entrants)	11.3%	15.4%	11.9%	18.2%	15.4%	10.7%	3.4%		
Kindergarten Entrants (ages 4 year	s to 6 years)								
Number of Students	3,452	3,637	3,580	3,637	3,680	3,567	3,338		
Number of Schools	64	63	65	60	63	68	65		
Percentage with Permanent Medical Exemptions	0.1%	0.2%	0.3%	0.3%	0.3%	0.4%	1.4%		
Percentage with Personal Belief Exemptions	9.8%	9.1%	9.6%	9.5%	9.4%	8.8%	1.2%		
Percentage Needing One or More Immunizations	7.6%	7.3%	8.0%	5.8%	6.6%	NA <sup>1</sup>	4.0%²		

Source: California Department of Health Services, Immunization Branch. (2016). *Child care assessment results*. Sacramento, CA. KidsData.org, Kindergartners with All Required Immunizations (2016).

Note: Increases in the percentage of children aged 19 to 35 months who receive the recommended doses of DTaP, polio, MMR, Hib, hepatitis B, varicella and pneumococcal conjugate vaccine (PCV) is a Leading Health Indicator per Healthy People 2020. Indicator has a target of 80% children receiving the recommended doses of DTaP, polio, MMR, Hib, hepatitis B, varicella and pneumococcal conjugate vaccine (PCV) by age 19-35 months with a desired increase associated with the indicator. Please note that individual targets are not listed above as dataset shown is not directly comparable to the Healthy People 2020 goal as written.

Note: Immunizations required for entry into California child care centers are: at least four doses of the Diphtheria, Tetanus, and Pertussis (DTP) vaccine; at least three doses of the Polio vaccine; at least one dose of the Measles, Mumps, and Rubella (MMR) vaccine; at least one dose of the

Haemophilus Influenza Type B (Hib) vaccine; at least three doses of the Hepatitis B vaccine; and at least one dose of the Varicella (Chickenpox) vaccine or physician documentation of having had chickenpox. Entry into California kindergartens requires these immunizations: at least four doses of the Diphtheria, Tetanus, and Pertussis (DTP) vaccine; at least three doses of the Polio vaccine; at least one dose of the Measles, Mumps, and Rubella (MMR) vaccine; at least three doses of the Hepatitis B vaccine; and at least one dose of the Varicella (Chickenpox) vaccine or physician documentation of having had the chickenpox.

Note: Data shown are more recent available.

<sup>1</sup>Aggregate data unavailable.

<sup>2</sup> Includes students overdue for immunizations and students reported as attending independent study who do not receive classroom-based instruction or home-based private schools or receiving IEP services.

#### **Oral Health**



Oral health is essential to overall health. Good oral health improves a person's ability to speak, smile, smell, taste, touch, chew, swallow, and make facial expressions to show feelings and emotions.<sup>51</sup> However, oral diseases, from cavities to oral cancer, cause pain and disability.

Good self-care, such as brushing with fluoride toothpaste, daily flossing, and professional treatment, is key to good oral health. Health behaviors that can lead to poor oral health include: tobacco use, excessive alcohol use, and poor dietary choices.<sup>52</sup> Barriers that can limit a person's use of preventive interventions and treatments include: limited access to and availability of dental services; lack of awareness of the need for care; cost; and fear of dental procedures.<sup>53</sup> There are also social determinants that affect oral health. People with lower levels of education and income, and people from specific racial/ethnic groups, have higher rates of oral diseases. Additionally, people with disabilities and other health conditions are more likely to have poor oral health.<sup>54</sup>

Between 2013 and 2017, there has been a 19% decline among survey respondents who have reported that they had dental care in the past 12 months; a similar decline exists between ethnicities over this same time period. In 2017, Latino survey respondents (56.9%) were significantly more likely than White survey respondents (76.5%) to report that they had not had dental care in the past 12 months.

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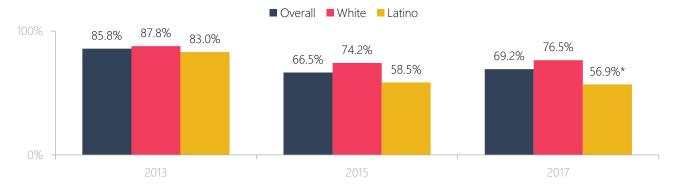
<sup>&</sup>lt;sup>51</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed December 2015 from https://www.healthypeople.gov/2020/topics-objectives/topic/oral-health.

<sup>&</sup>lt;sup>52</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed December 2015 from https://www.healthypeople.gov/2020/topics-objectives/topic/oral-health.

<sup>&</sup>lt;sup>53</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed December 2015 from https://www.healthypeople.gov/2020/topics-objectives/topic/oral-health.

<sup>&</sup>lt;sup>54</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed December 2015 from https://www.healthypeople.gov/2020/topics-objectives/topic/oral-health.

# In the past 12 months, have you had dental care? (Respondents answering "Yes") By Ethnicity



2017 - Overall n: 791; White n: 427; Latino n: 292

Source: Applied Survey Research. (2017). 2013-2017 Santa Cruz County Community Assessment Project, Telephone Survey.

Note: Increase the proportion of children, adolescents, and adults who used the oral health care system in the past year is a Leading Health Indicator per Healthy People 2020. Indicator has a target of 49% of children, adolescents, and adults who visited the dentist in the past year (age adjusted, 2+ years) with a desired increase associated with the indicator. Please note that individual targets are not listed above as dataset shown is not directly comparable to the Healthy People 2020 goal as written.

\*Significance testing: Latino respondents were significantly more likely than White respondents in 2017 to report that they had not had dental care in the past 12 months.

#### Never had a Dental Visit (Ages 2-17), Santa Cruz County

	2011/12	2013/14
Santa Cruz County		
Ages 2-11	7.2%	15.5%
Ages 12-17	NA	NA
California		
Ages 2-11	10.3%	8.9%
Ages 12-17	1.4%	2.1%

Source: Kidsdata.org, (2016). Length of Time Since Last Dental Visit, 2011-2014.

Note: NA indicates that sample size was lower than 50 or the estimated percentage was less than 0.1%.

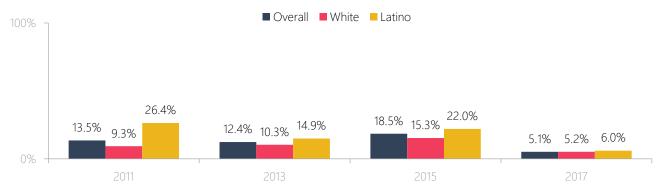
#### Mental Health

Mental health is a state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with challenges. Mental health is essential to personal well-being, family and interpersonal relationships, and the ability to contribute to community or society.<sup>55</sup>

Mental health plays a major role in people's ability to maintain good physical health. Mental illnesses, such as depression and anxiety, affect people's ability to participate in health-promoting behaviors. In turn, problems with physical health, such as chronic diseases, can have a serious impact on mental health and decrease a person's ability to participate in treatment and recovery.<sup>56</sup>

When asked about their mental health, the percentage of CAP overall survey respondents (5.1%) in 2017 that reported they had felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities dropped from 18.5% in 2015. In 2017, White and Latino survey respondents responded at similar levels, 5.2% and 6.0%, respectively. In 2017, survey respondents were also asked about whether they experience excessive, unreasonable worry as part of the same 'check all that apply' question; this additional response option could account for the large decrease between 2015 and 2017 survey results.

# The During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities? (Respondents answering "Yes") By Ethnicity



2017 - Overall n: 782; White n: 426; Latino n: 288.

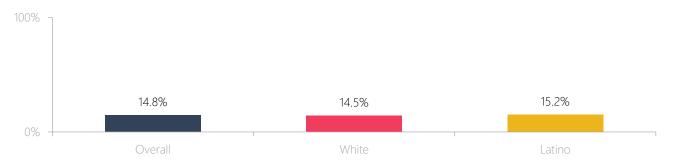
Source: Applied Survey Research. (2017). 2011-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

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<sup>&</sup>lt;sup>55</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed December 2015 from https://www.healthypeople.gov/2020/topics-objectives/topic/mental-health-and-mental-disorders.

<sup>&</sup>lt;sup>56</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed December 2015 from https://www.healthypeople.gov/2020/topics-objectives/topic/mental-health-and-mental-disorders.

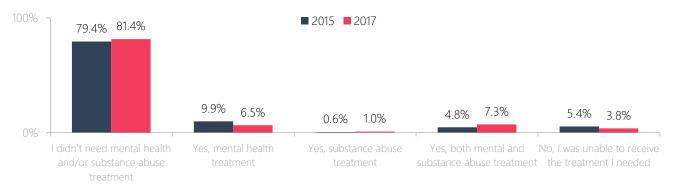
# Turing the past 12 months, did you experience excessive, unreasonable worry about events or activities, such as work, school, your health, or politics? (Respondents answering "Yes") By Ethnicity – 2017



2017 - Overall n: 782; White n: 426; Latino n: 288

Source: Applied Survey Research. (2017). Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

### ☐ In the past 12 months, were you able to receive the mental health and/or substance abuse treatment you needed?

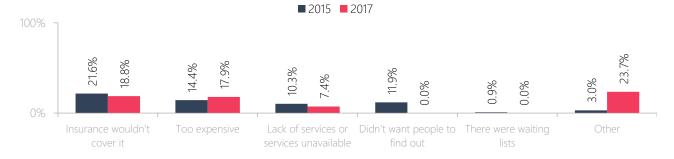


2017 - Overall n: 783.

Source: Applied Survey Research. (2017). 2015-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA. Note: Survey question was modified in 2015 and is therefore not comparable to previous years.

Note: Survey language was changed in 2017 from "substance abuse treatment" to "drug and alcohol treatment".

#### The Why didn't you receive the mental health and/or substance abuse treatment you needed?



2017 – Overall n. 23 respondents offering 28 responses

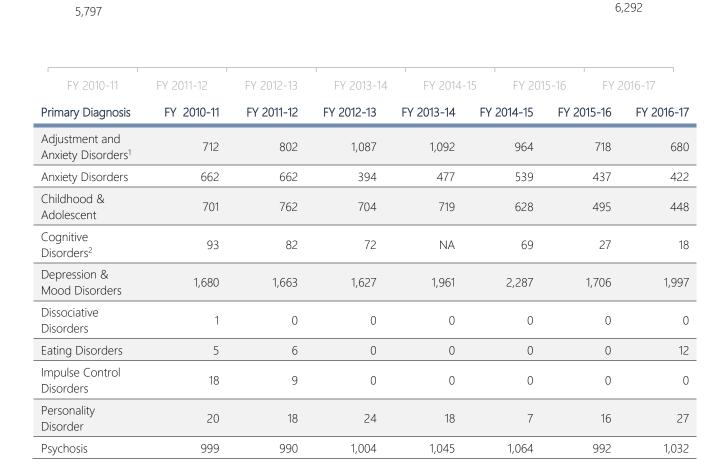
Source: Applied Survey Research. (2017). 2015-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

#### Adult Respondents (Ages 18 and Older) Who Indicated That, in the Past 12 Months, They...

	2011	2012	2013	2014	2015				
Needed to See a Professional for Problems with Their Emotional/ Mental Health or Alcohol/ Drug Use									
Santa Cruz County	20.2%	28.8%	21.7%	26.7%	28.5%				
California	16.3%	15.2%	17.3%	15.9%	17.6%				
Had Seen a Health Care Provider for Problems with Their Emotional or Mental Health or Alcohol/Drug Use									
Santa Cruz County	14.6%	21.8%	19.5%	20.7%	30.8%				
California	12.5%	11.8%	12.8%	12.0%	14.1%				
Had taken Prescription Medication for Their Mental Health or Emotional Problems Almost Daily for Two Weeks or More									
Santa Cruz County	13.9%	16.5%	17.5%	13.1%	18.3% <sup>1</sup>				
California	10.6%	9.6%	10.9%	10.1%	12.0%				

Source: UCLA Center for Health Policy Research. (2017). California Health Interview Survey, 2011-15.

#### People Seen for Mental Health Services, Santa Cruz County



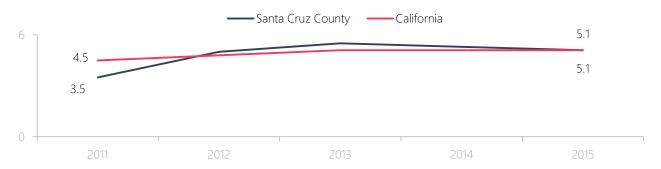
<sup>&</sup>lt;sup>1</sup>Data statistically unstable.

Sexual & Gender Disorders	4	4	5	5	4	2	2
Sleep Disorders	0	0	0	0	0	0	0
Somatic Disorders <sup>3</sup>	2	4	0	2	3	2	2
Substance-Related Disorders <sup>4</sup>	94	132	144	158	179	189	221
Other Disorders	806	793	657	972	451	1,580	1,431

Source: Santa Cruz County Mental Health Services Agency. (2015). Personal correspondence with program representative.

Note: Data are unduplicated counts. Data shown are most recent available.

### Adolescent Hospitalizations Rate per 1,000 for Mental Health Issues, among Ages 5-19 Years Santa Cruz County and California



#### Adolescent Hospitalizations Rate per 1,000 for Mental Health Issues, Santa Cruz County

Age Group	2011	2012	2013	2014	2015
5-14 years	1.5	2.9	3.1	2.5	2.4
15-19 years	6.2	8.5	9.4	9.9	9.5

Source: KidsData.org. (2017). California Healthy Kids Survey Hospitalizations for Mental Health Issues, by Age Group, 2011-2015.

Note: Number of hospitalizations for mental health issues per 1,000 adolescents by age group, ages 5-19.

<sup>&</sup>lt;sup>1</sup>Category renamed in 2015-16.

<sup>&</sup>lt;sup>2</sup> Delirium and Dementia are now classified under Cognitive or Neurocognitive disorders.<sup>51</sup>

<sup>&</sup>lt;sup>3</sup> Somatic symptom and related disorders were previously classified as Somatofrom disorders.<sup>58</sup>

<sup>&</sup>lt;sup>4</sup> Category specifically includes "Drug and Alcohol" in 2015-16.

<sup>&</sup>lt;sup>57</sup> American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders: DSM-5. Washington, D.C: American Psychiatric Association

<sup>&</sup>lt;sup>58</sup>American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders: DSM-5. Washington, D.C: American Psychiatric Association.

#### **Physical Health and Activity**



Healthy diets and achievement and maintenance of healthy body weights reduce the risk of chronic diseases and promote health.<sup>59</sup> Efforts to change diet and weight should address individual behaviors, as well as the policies and environments that support these behaviors in

settings such as schools, worksites, health care organizations, and communities. For example, having healthy food available and affordable in food retail and food service settings allows people to make healthier food choices. When healthy foods are not available, people may settle for foods that are higher in calories and lower in nutritional value.<sup>60</sup>

Regular physical activity can improve health and quality of life regardless of age or the presence of a chronic disease or disability. Among adults and older adults, physical activity can lower the risk of early death, stroke, type 2 diabetes, breast and colon cancer, and depression.<sup>61</sup> Among children and adolescents, physical activity can improve bone health and muscle fitness, decrease levels of body fat, and reduce symptoms of depression.<sup>62</sup> Other positive outcomes among children and adolescents tied to regular physical activity include improved performance at school and a decreased likelihood of acquiring risky behaviors.<sup>63</sup>

For adults 18 to 64 years old, the Centers for Disease Control and Prevention (CDC) recommends at least 2 hours and 30 minutes of mixed moderate-intensity, vigorous-intensity, and muscle strengthening activities each week.<sup>64</sup> Children and adolescents 6 to 17 years should have 60 minutes (1 hour) or more of physical activity each day.<sup>65</sup>

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<sup>&</sup>lt;sup>59</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed December 2015 from https://www.healthypeople.gov/2020/topics-objectives/topic/nutrition-and-weight-status.

<sup>&</sup>lt;sup>60</sup> Centers for Disease Control and Prevention. Overweight an. *Healthy Food Environments*. Accessed December 2015 from http://www.cdc.gov/obesity/strategies/healthy-food-env.html.

<sup>&</sup>lt;sup>61</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed on August 9, 2016 from https://www.healthypeople.gov/2020/topics-objectives/topic/physical-activity.

<sup>&</sup>lt;sup>62</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed on August 9, 2016 from https://www.healthypeople.gov/2020/topics-objectives/topic/physical-activity.

<sup>&</sup>lt;sup>63</sup> Vigorous Physical Activity by Youth. *Child Trends Databank* 2014. Available at: http://www.childtrends.org/?indicators=vigorous-physical-activity-by-youth. Accessed November 4, 2015.

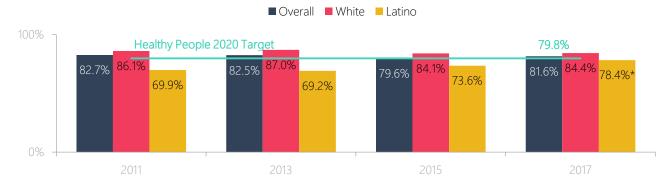
<sup>&</sup>lt;sup>64</sup> Centers for Disease Control and Prevention. (2011). *Physical activity guidelines*. Retrieved 2014 from http://www.cdc.gov/physicalactivity/everyone/guidelines/.

<sup>&</sup>lt;sup>65</sup> Centers for Disease Control and Prevention. Physical Activity. *How much physical activity do children need?* Accessed on August 9, 2016 from http://www.cdc.gov/physicalactivity/basics/children/.

#### **Physical Activity and Health**

Since 2011, survey respondents overall have consistently described their general health as "Excellent, Very Good, or Good" (81.6% in 2017) at percentages exceeding the Healthy People 2020 target of 79.8%. In 2017, Latino survey respondents (78.4%) were significantly less likely than White survey respondents (84.4%) to describe their health as "Very Good" or "Excellent". Over the past ten years there has been a steady increase year-over-year (20% between 2007 and 2017), in the number of overall survey respondents who were obese and overweight based on BMI calculation (60.6% in 2017). Latino survey respondents (72.1%) were more likely than White survey respondents (53.2%) to be obese or overweight in 2017.

## How would you describe, in general, your overall health? (Respondents answering "Excellent, Very Good, or Good") By Ethnicity



2017 - Overall n: 786; White n: 429; Latino n: 285

Source: Applied Survey Research. (2017). 2011-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

Note: Increase the proportion of adults who self-report good or better physical health is an indicator per Healthy People 2020. Indicator has a target of 79.8% of adults self-reporting good or better physical health (age-adjusted, ≥18 years) with a desired increase associated with the indicator. Please note that the CAP telephone survey question is slightly different, however the premise of the question remains aligned.

\*Significance testing: Latino respondents were significantly less likely than White respondents to report excellent or very good health in 2017.

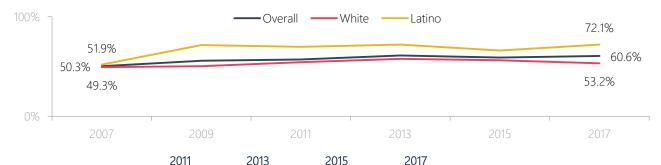
#### Students Achieving Physical Fitness Goals (in At Least 5 Out of 6 Fitness Areas) by Grade Level

	2010-11	2011-12	2012-13	2013-14	2014-15	2015-16
Santa Cruz County						
5 <sup>th</sup> Grade	48.9%	47.9%	50.1%	50.4%	49.3%	50.2%
7 <sup>th</sup> Grade	55.9%	55.8%	57.1%	53.3%	57.3%	53.0%
9 <sup>th</sup> Grade	61.4%	60.9%	57.1%	59.1%	63.4%	62.5%
California						
5 <sup>th</sup> Grade	48.4%	48.6%	48.6%	49.9%	49.5%	49.0%
7 <sup>th</sup> Grade	54.9%	55.0%	55.3%	56.5%	56.0%	55.5%
9 <sup>th</sup> Grade	59.4%	59.4%	59.5%	61.6%	61.1%	60.1%

Source: California Department of Education. (2017). Physical fitness test report. Sacramento, CA.

Note: The Fitness Areas include aerobic capacity, body composition, abdominal strength, trunk extensor strength, upper body strength, and flexibility.

## Toverweight and Obese Adult Respondents in Santa Cruz County (Based on BMI) By Ethnicity

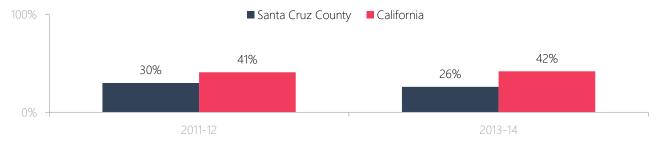


Obese	Healthy People 20	Healthy People 2020 Target: 30.5%						
Obese	21.3%	23.9%	22.7%	21.0%				
White	18.1%	22.1%	19.8%	16.0%				
Latino	34.8%	29.9%	29.2%	29.2%				
Other	15.6%	24.0%	17.1%	17.7%				
Overweight	35.8%	37.2%	36.3%	39.7%				
White	36.2%	35.6%	36.5%	37.2%				
Latino	34.9%	42.1%	36.8%	42.8%				
Other	35.0%	39.1%	33.0%	41.9%				

2017 - Overall n: 774; White n: 425; Latino n: 283; Other n: 65.

Source: Applied Survey Research. (2017). 2007-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA. Note: Reduce the proportion of adults who are obese is a Leading Health indicator per Healthy People 2020. Indicator has a target of 30.5% of obesity among adults (age adjusted, 20+ years) with a desired decrease associated with the indicator.

### Nutrition Children (ages 2-17) Drinking One or More Sugar-Sweetened Beverages per Day



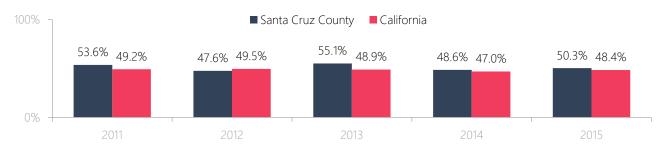
Source: Kidsdata.org. (2016). Children Drinking One or More Sugar-Sweetened Beverages Per Day, 2011-2014.

#### Children Who Ate Fast Food Two or More Times in the Past Week by Age Group

	2011/12	2013/14
Santa Cruz County		
Ages 2-11	9.7%	11.3%
Ages 12-17	NA	NA
Total Ages 2-17	22.9%	16.3%
California		
Ages 2-11	33.2%	36.8%
Ages 12-17	43.7%	43.4%
Total Ages 2-17	37.2%	39.4%

Source: Kidsdata.org. (2016). Children Who Ate Fast Food Two or More Times in the Past Week, by Age Group, 2011-2014.

### Adult Respondents (Ages 18 and Older) Who Always Have Access to Affordable Fresh Fruits and Vegetables in Their Neighborhoods



Source: UCLA Center for Health Policy Research. (2015). California Health Interview Survey, 2011-2015.

Note: Data shown are most recent available.

#### Diabetes

Diabetes is a disease in which blood glucose levels are above normal.<sup>66</sup> More than 29 million Americans are living with diabetes, and 86 million are living with prediabetes, a serious health condition that increases a person's risk of type 2 diabetes and other chronic diseases.<sup>67</sup> Diabetes can cause serious health complications including heart disease, blindness, kidney failure, and lower-extremity amputations.<sup>68</sup> In 2013, diabetes was the seventh leading cause of death in the United States (and may be underreported).<sup>69</sup>

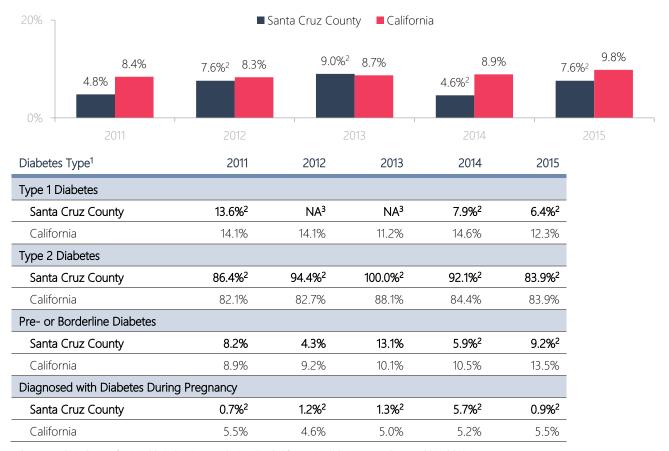
<sup>&</sup>lt;sup>66</sup> Centers for Disease Control and Prevention. *Basics about Diabetes*. Accessed on August 9, 2016 from http://www.cdc.gov/diabetes/basics/diabetes.html.

<sup>&</sup>lt;sup>67</sup> Centers for Disease Control and Prevention. Chronic Disease Prevention and Health Promotion. *Working to Reverse the US Epidemic: At A Glance 2016.* Accessed on August 9, 2016 from http://www.cdc.gov/chronicdisease/resources/publications/aag/diabetes.htm.

<sup>&</sup>lt;sup>68</sup> Centers for Disease Control and Prevention. *Basics about Diabetes*. Accessed on August 9, 2016 from http://www.cdc.gov/diabetes/basics/diabetes.html.

<sup>&</sup>lt;sup>69</sup> Centers for Disease Control and Prevention. Chronic Disease Prevention and Health Promotion. *Working to Reverse the US Epidemic: At A Glance 2016.* Accessed on August 9, 2016 from http://www.cdc.gov/chronicdisease/resources/publications/aag/diabetes.htm.

#### Adult Respondents (Ages 18 and Older) Who Have Ever Been Diagnosed with Diabetes



Source: UCLA Center for Health Policy Research. (2017). California Health Interview Survey, 2011-2015.

Note: 2001 to 2009 CHIS data were collected over a 9-month period. Beginning June 15, 2011, CHIS data will be collected continuously over a two-year period. 2011-2012 CHIS data were collected from June 15, 2011 through January 14, 2013.

Note: Data presented are the most recent available.

<sup>1</sup>For more information regarding the different types of diabetes, visit: https://www.niddk.nih.gov/health-information/diabetes/types

<sup>&</sup>lt;sup>2</sup>Statistically unstable due to a low number of respondents

<sup>&</sup>lt;sup>3</sup>No data available.

#### Substance Use (Alcohol, Tobacco and Other Drugs)



Almost 95% of people with substance use problems are considered unaware of their problem. Advances in research have led to the development of evidence-based strategies to effectively address substance abuse. Substance abuse is now understood as a disorder that develops in adolescence and, for some individuals, will develop into a chronic illness that will

require lifelong monitoring and care.<sup>71</sup> Substance abuse has a major impact on individuals, families, and communities. The effects of substance abuse contribute to costly social, physical, mental, and public health problems.<sup>72</sup>

Among youth, nicotine use increases health risk factors, including alcohol and illicit drug use, and anti-social behaviors. Alcohol use among youth is associated with a host of negative outcomes including poor performance in school and adoption of other risky behaviors. Binge drinking, or drinking 5 or more drinks in a row, is a common consequence of youth underage drinking and is linked to alcohol poisoning, sexually transmitted infections, and injury (both intentional and unintentional).<sup>74</sup>

Greater access to retail alcohol outlets, such as liquor stores and bars, is correlated with higher levels of alcohol consumption.<sup>75</sup> High outlet density is also associated with higher levels of violent crime, assault, child maltreatment and abuse, and homicide.<sup>76</sup>

<sup>&</sup>lt;sup>70</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed on August 9, 2016 https://www.healthypeople.gov/2020/topics-objectives/topic/substance-abuse.

<sup>&</sup>lt;sup>71</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed on August 9, 2016 https://www.healthypeople.gov/2020/topics-objectives/topic/substance-abuse.

<sup>&</sup>lt;sup>72</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed on August 9, 2016 https://www.healthypeople.gov/2020/topics-objectives/topic/substance-abuse.

<sup>&</sup>lt;sup>73</sup> World Health Organization, Tobacco Free Initiative (TFI). 2015. Health effects of smoking among young people. *WHO*. Available at: http://www.who.int/tobacco/research/youth/health\_effects/en/. Accessed November 10, 2015.

<sup>&</sup>lt;sup>74</sup> Fact Sheets - Underage Drinking. *Centers for Disease Control and Prevention* 2014. Available at: http://www.cdc.gov/alcohol/fact-sheets/underage-drinking.htm. Accessed October 2015.

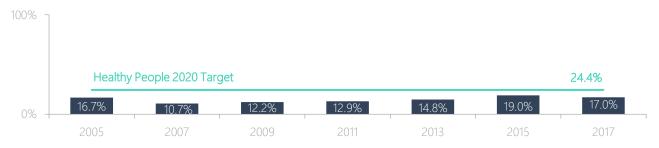
<sup>75</sup> Kypri, K., Bell, M.L., Hay, G.C., & Baxter, J. (2008). Alcohol outlet density and university student drinking: A national study. Addiction 103(7): 1131–1138. doi: 10.1111/j.1360-0443.2008.02239.x

<sup>&</sup>lt;sup>76</sup> Pereira, G., Wood, L., Foster, S., & Haggar, F. (2013). Access to alcohol outlets, alcohol consumption, and mental health. PLoS ONE 8(1): e53461. doi:10.1371/journal.pone.0053461; and Gruenewald et al. (1995). Ecological models of alcohol outlets and violent assaults: crime potentials and geospatial analysis. Society for the Study of Addiction, 2006.

#### **Alcohol Use and Availability**

In 2017, 17.0% of survey respondents reported that they had binge drank alcoholic beverages (5 or more drinks on an occasion) "one or more times" in the past 30 days, similar to previous years.

Considering all types of alcoholic beverages, during the past 30 days about how many times did you have 5 or more drinks on an occasion? An occasion is considered about 2 hours. (Respondents answering "One or more times")

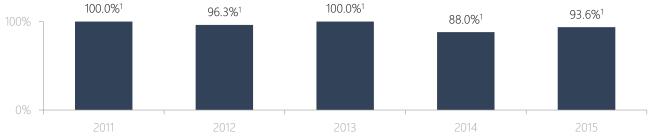


2017 - Overall n: 774.

Source: Applied Survey Research. (2017). 2005-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

Note: Reduce the proportion of persons engaging in binge drinking during the past 30 days – adults aged 18 years and older is a Leading Health Indicator per Healthy People 2020. Indicator has a target of 24.4% binge drinking in past month among adults (18+ years) with a desired decrease associated with the indicator. Please note that the CAP telephone survey question is slightly different, however the premise of the question remains aligned.

### Adolescents who did not engage in binge drinking in the past month, Santa Cruz County



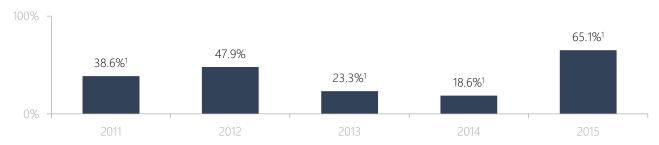
Source: UCLA Center for Health Policy Research. (2015). California Health Interview Survey, 2011-2015.

'Data statistically unstable.

Note: Reduce the proportion of persons engaging in binge drinking during the past month—adolescents aged 12 to 17 years is an indicator per Healthy People 2020. Indicator has a target of 8.6% binge drinking in past month—Adolescents (12–17 years) with a desired decrease associated with the indicator. Please note that individual targets are not listed above as dataset shown is not directly comparable to the Healthy People 2020 goal as written.

Note: Data shown are most recent available.

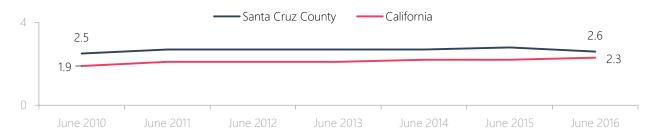
#### Adolescents who have ever had an alcoholic drink, Santa Cruz County



Source: UCLA Center for Health Policy Research. (2017). California Health Interview Survey, 2011-2015.

<sup>1</sup>Data statistically unstable.

#### Retail Alcohol Outlets<sup>1</sup> per 1,000 People



	June 2010	June 2011	June 2012	June 2013	June 2014	June 2015	June 2016
Santa Cruz County	689	707	717	730	739	755	707
California	71,599	79,298	80,450	81,590	82,738	83,891	89,980

Source: State of California, Department of Alcoholic Beverage Control. (2016). *Alcoholic beverage licenses report*.

California Department of Finance (2015). E-1: City/county population estimates with annual percent change.

<sup>1</sup>Includes both on-sale and off-sale outlets.

#### Number of Retail Alcohol Outlets by Jurisdiction

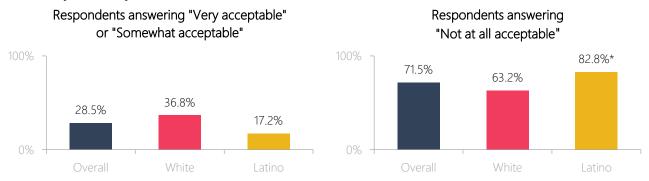
	June 2010	June 2011	June 2012	June 2013	June 2014	June 2015	June 2016
Capitola							
Number of Retail Outlets	59	59	64	66	67	71	70
Outlets per 1,000 People	5.8	5.9	6.4	6.6	6.6	7.1	6.9
Percentage of County Retail Outlets	8.6%	8.4%	8.9%	9.0%	9.1%	9.4%	9.9%
Santa Cruz							
Number of Retail Outlets	245	256	259	271	274	274	249
Outlets per 1,000 People	4.1	4.3	4.2	4.3	4.3	4.3	3.9
Percentage of County Retail Outlets	35.6%	36.3%	36.1%	37.1%	37.1%	36.3%	35.2%
Scotts Valley							
Number of Retail Outlets	40	41	43	48	48	50	48
Outlets per 1,000 People	3.4	3.5	3.7	4.1	4.0	4.2	4.0
Percentage of County Retail Outlets	5.8%	5.8%	6.0%	6.6%	6.5%	6.6%	6.8%
Watsonville							
Number of Retail Outlets	104	107	107	102	104	105	102
Outlets per 1,000 People	2.0	2.1	2.1	2.0	2.0	2.0	1.9
Percentage of County Retail Outlets	15.1%	15.2%	14.9%	14.0%	14.1%	13.9%	14.4%
Unincorporated							
Number of Retail Outlets	240	243	238	243	246	255	238
Outlets per 1,000 People	1.7	1.9	1.8	1.9	1.8	1.9	1.8
Percentage of County Retail Outlets	34.8%	34.4%	33.2%	33.3%	33.3%	33.8%	33.7%

Source: California Department of Alcoholic Beverage Control. (2016). *Alcoholic beverage licenses report.* http://www.abc.ca.gov/California Department of Finance. (2016). *E-1: City/County population estimates with annual percent change.* 

#### **Acceptance of Adult Alcohol Provision**

In 2017, over one-quarter (28.5%) of overall survey respondents responded that they think it is "very acceptable" or "somewhat acceptable" for adults to provide alcohol to persons under 21 in their home. Latino survey respondents (82.8%) were significantly more likely than White survey respondents (63.2%) to answer "not at all acceptable" to this question.

### ★ How acceptable do you think it is for adults to provide alcohol to persons under 21 in their home? By Ethnicity – 2017



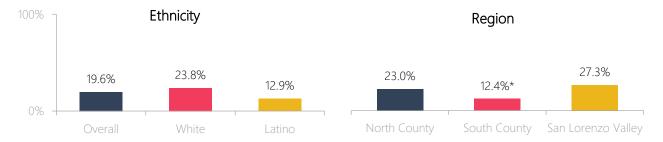
2017 - Overall n: 771; White n: 416; Latino n: 285.

Source: Applied Survey Research. (2017). 2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA. Note: Survey question from 2015 not comparable.

#### Community Acceptance of Marijuana Use

In 2017, one-fifth (19.6%) of overall survey respondents responded that they think it is "very acceptable" or "somewhat acceptable" for adults to provide marijuana to persons under 21 in their home; regionally, San Lorenzo Valley survey respondents (27.3%) reported higher percentages than North County (23.0%) and South County (12.4%) survey respondents.

### ★ How acceptable do you think it is for adults to provide marijuana to persons under 21 in their home? (Respondents answering "Very acceptable" or "Somewhat acceptable") - 2017



2017 - Overall n: 768; White n: 415; Latino n: 283. Regions: North County n: 264; South County n: 263; San Lorenzo Valley n: 239. Source: Applied Survey Research. (2017). 2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

\*Significance testing: South County respondents were significantly less likely than North County or San Lorenzo Valley respondents to respond "Somewhat acceptable" in 2017.

<sup>\*</sup>Significance testing: Latino respondents were significantly more likely than White respondents to answer "not at all acceptable" in 2017.

#### **Prescription Drug Use**

Five percent (4.5%) of survey respondents in 2017 reported that on "one or more days" they took any prescription drug that either was not prescribed for them or due to the feeling or experience it caused, this question was changed in 2017 and is thus not comparable to previous year data.

The During the past 30 days, on how many days have you taken any prescription drug that was not prescribed for you or that you took only for the feeling or experience it caused? (Respondents answering "one or more days") By Ethnicity – 2017



2017 - Overall n: 783; White n: 423; Latino n: 289.

Source: Applied Survey Research. (2017). 2011-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

Note: Not comparable to previous years' data. Survey question changed in 2017. Previous version asked, "During the past 30 days, on how many days have you taken a prescription drug that was not prescribed to you?"

#### **Substance Use by Students**

### Self-Reported Substance Use in the Past 30 Days, Santa Cruz County

	2009-11	2012-14	2014-15	2016-17			
Alcohol <sup>1</sup>	Healthy People 2020 Tar	get: 16.6%					
9 <sup>th</sup> Grade	28%	23%	19%	16%			
11 <sup>th</sup> Grade	40%	34%	34%	25%			
Marijuana	Healthy People 2020 Tar	rget: 6.0%					
9 <sup>th</sup> Grade	23%	18%	17%	14%			
11 <sup>th</sup> Grade	30%	26%	26%	25%			
Inhalants							
9 <sup>th</sup> Grade	6%	2%	2%	1%			
11 <sup>th</sup> Grade	4%	2%	2%	1%			
Prescription pair	n medications <sup>2</sup>						
9 <sup>th</sup> Grade	-	-	4%	3%			
11 <sup>th</sup> Grade	-	-	7%	4%			
Other drug, pill,	Other drug, pill, or medicine <sup>3</sup>						
9 <sup>th</sup> Grade	-	-	3%	2%			
11 <sup>th</sup> Grade	-	-	3%	2%			

Source: West Ed for California Department of Education. (2017). California Healthy Kids Survey, Santa Cruz County.

Note: Reduce the proportion of adolescents reporting use of alcohol or any illicit drugs during the past 30 days is a Leading Health indicator per Healthy People 2020. Indicator has a target of 16.6% of adolescents using alcohol or illicit drugs in past 30 days (12-17 years old); and reduce the proportion of adolescents reporting use of marijuana during the past 30 days is an indicator per Healthy People 2020. Indicator has a target of 6.0% of adolescents using marijuana in past 30 days (12-17 years old). Both indicators have a desired decrease associated. Please note that the California Healthy Kids Survey question is worded differently, however the premise of the question remains aligned.

<sup>1</sup>Alcohol use refers to at least one drink.

<sup>&</sup>lt;sup>2</sup> Prescription pain medications to get "high" or for reasons other than prescribed. Data not comparable prior to 2014

<sup>&</sup>lt;sup>3</sup> Other drug, pill, or medicine to get "high" or for other than medical reasons. Data not comparable to prior to 2014.

#### Self-Reported Substance Use in the Past 30 Days, California

	2009-11	2011-13	2013-15
Alcohol <sup>1</sup>			
9 <sup>th</sup> Grade	24%	20%	19%
11 <sup>th</sup> Grade	33%	33%	29%
Marijuana			
9 <sup>th</sup> Grade	15%	15%	13%
11 <sup>th</sup> Grade	21%	24%	20%
Inhalants			
9 <sup>th</sup> Grade	6%	5%	4%
11 <sup>th</sup> Grade	5%	5%	4%
Prescription pain medications <sup>2</sup>			
9 <sup>th</sup> Grade	-	-	5%
11 <sup>th</sup> Grade	-	-	6%
Other drug, pill, or medicine <sup>3</sup>			
9 <sup>th</sup> Grade	-	-	4%
11 <sup>th</sup> Grade	-	-	5%

Source: West Ed for California Department of Education (2017). California Healthy Kids Survey, School Climate Substance Use and Well-being Among California Students.

Note: Questions regarding use of Methamphetamines, Cocaine, and Psychedelics were not asked of students in 2013-15.

<sup>1</sup>Alcohol use refers to at least one drink.

#### Students Who Reported Using Tobacco in the Last 30 Days by Grade, 2016-17



Source: West Ed for the California Department of Education. (2017). California Healthy Kids Survey (CHKS), Santa Cruz County and California. San Francisco, CA.

Note: Reduce the use of cigarettes by adolescents (past month) is a Leading Health indicator per Healthy People 2020. Indicator has a target of 16.0% of adolescents cigarette smoking in the past month (grades 9-12) with a desired decrease associated with the indicator. Please note that the California Healthy Kids Survey question is worded differently however the premise of the question remains aligned; the Healthy People 2020 target applies specifically to cigarette smoking.

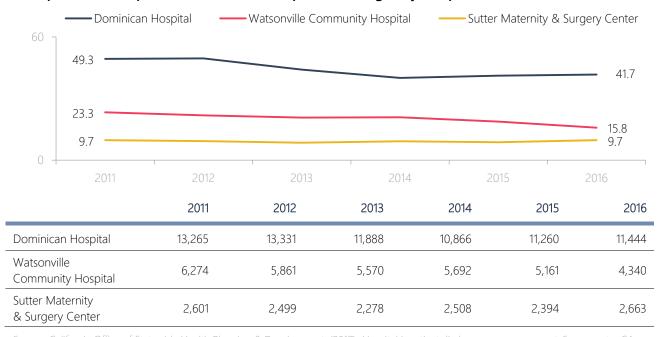
<sup>&</sup>lt;sup>2</sup> Prescription pain medications to get "high" or for reasons other than prescribed. Data not comparable to years prior to 2013

 $<sup>^3</sup>$  Other drug, pill, or medicine to get "high" or for other than medical reasons. Data not comparable to years prior to 2013.

#### **Hospitalizations and Emergency Department Visits**

Emergency department usage and hospitalizations are indicators of lack of access to primary care. Individuals and families without health insurance often use the emergency department for their primary care as well as for emergencies. Delaying medical attention until it necessitates emergency care or hospitalization often leads to poorer health outcomes and increased health care costs.<sup>77</sup>

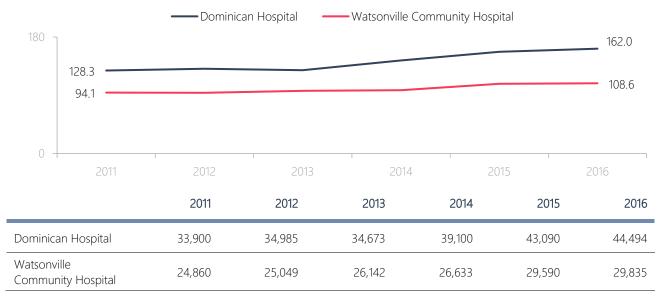
#### Rate per 1,000 People and Number of Hospital Discharges by Hospital



Source: California Office of Statewide Health Planning & Development. (2017). *Hospital inpatient discharge summary report*. Sacramento, CA. United States Census Bureau. (2017). 2010-2016 *American Community Survey 1-year estimates*.

<sup>&</sup>lt;sup>77</sup> United States Department of Health and Human Services. *National Healthcare Disparities and Quality Report*. Agency for Healthcare Research and Quality. 2010.

#### Rate per 1,000 People and Number of Emergency Department Visits by Hospital



Source: California Office of Statewide Health Planning & Development. (2017). *Hospital inpatient discharge summary report*. Sacramento, CA. United States Census Bureau. (2017). 2010-2016 *American Community Survey 1-year estimates*.

Note: Sutter Maternity & Surgery Center does not operate an emergency department.

#### **Asthma**

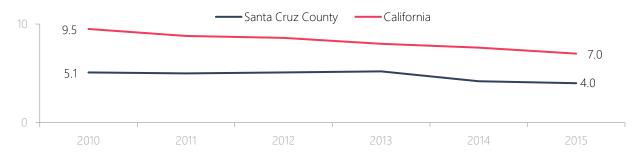


Asthma is a chronic respiratory disease characterized by episodes of reversible breathing problems due to inflammation and airway narrowing and obstruction.<sup>78</sup> These episodes can range in severity from mild to life-threatening. Risk factors for asthma currently being

investigated include having a parent with asthma; sensitization to irritants and allergens; respiratory infections in childhood; and overweight.<sup>79</sup> Asthma is considered a significant public health burden and its prevalence has been rising since 1980. Asthma affects people of every race, sex, and age. However, significant disparities in asthma morbidity and mortality exist, in particular for low-income and minority populations.<sup>80</sup>

#### Healthy People 2020

#### Age-Adjusted<sup>1</sup> Asthma Hospitalizations per 10,000 Residents



Source: California Department of Public Health. (2017). California Breathing, Santa Cruz County Asthma Profile 2010-2015.

Note: Reduce hospitalizations for asthma is an indicator per Healthy People 2020. Indicator has three separate targets based on different age distributions (under 5 years; 5 to 64 years; and 65 years and older) per 100,000 population with a desired decrease associated with the indicator. Please note that individual targets are not listed above as dataset shown is not directly comparable to the Healthy People 2020 goal as written.

<sup>1</sup> Age-adjusted rate calculations are a summary measure allowing for unbiased comparisons between groups with different age distributions in the population over time, or among diverse populations. Unless noted as age-adjusted, rates shown are age-specific rates which are also used for unbiased evaluation however among groups of the same age or age range. Age-adjusted rates and age-specific rates are not comparable.

#### Ever Diagnosed with Asthma by Ethnicity, Santa Cruz County

Santa Cruz County Total	12.1%	20.2%	20.2%	11.7%	24.1% <sup>1</sup>
White	12.0%	12.3%	25.2%	16.5% <sup>1</sup>	27.8% <sup>1</sup>
Latino	14.4% <sup>1</sup>	31.4%	16.4% <sup>1</sup>	8.1% <sup>1</sup>	19.2% <sup>1</sup>
	2011	2012	2013	2014	2015

Source: UCLA Center for Health Policy Research. (2015). California Health Interview Survey, 2011-15

<sup>1</sup>Data statistically unstable.

Note: Data shown are most recent available.

<sup>&</sup>lt;sup>78</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed September 2016 from https://www.healthypeople.gov/2020/topics-objectives/topic/respiratory-diseases.

<sup>&</sup>lt;sup>79</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed September 2016 from https://www.healthypeople.gov/2020/topics-objectives/topic/respiratory-diseases.

<sup>&</sup>lt;sup>80</sup> U.S. Department of Health and Human Services, Healthy People 2020. Healthy People 2020. Accessed September 2016 from https://www.healthypeople.gov/2020/topics-objectives/topic/respiratory-diseases.

#### **Unintentional and Intentional Injury**

Nearly 199,800 people die from injury each year—1 person every 3 minutes. Each year, millions of people are injured and survive and they are faced with life-long mental, physical, and financial problems.<sup>81</sup> In 2014, 2.5 million people were hospitalized due to injuries and 26.9 million people were treated in an emergency department for injuries.<sup>82</sup>

The category of injury is broken down into two classifications, unintentional injury, and intentional injury. Unintentional injury refers to incidents such as car accidents and falls while intentional injuries encompass self-inflicted harm and assault.<sup>83</sup>

#### **Unintentional Injuries**

#### Unintentional Non-Fatal Injuries<sup>1</sup> by Age Group, Santa Cruz County

	2010	2011	2012	2013	2014
0-4 years	1,277	1,230	1,236	1,274	1,180
5-9 years	885	845	987	980	1,028
10-19 years	2,126	2,148	2,152	2,121	2,293
20-64 years	7,695	7,749	8,281	7,979	8,411
65 years +	1,706	1,881	1,897	2,036	2,106
Santa Cruz County Total	13,689	13,853	14,553	14,390	15,018
Santa Cruz County Rate per 1,000	52.0	52.4	54.6	53.4	55.3
California Rate per 1,000	54.9	56.0	58.2	57.9	60.6

Source: California Department of Public Health. (2016). 2010-2014 EpiCenter: *Overall injury surveillance*. Sacramento, CA. United States Census Bureau. (2016). 2010-2015 *American Community Survey 1-year estimates*.

Data represents non-fatal emergency department visits resulting in treat and release or transfer to another facility.

Note: Most recent data available shown. Data unavailable at time of report deadline.

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<sup>&</sup>lt;sup>81</sup> Centers for Disease Control and Prevention. Key Injury and Violence Data. Accessed September 2016 from http://www.cdc.gov/injury/wisqars/overview/key\_data.html.

<sup>&</sup>lt;sup>82</sup> Centers for Disease Control and Prevention. Key Injury and Violence Data. Accessed September 2016 from http://www.cdc.gov/injury/wisqars/overview/key\_data.html.

<sup>&</sup>lt;sup>83</sup> Child Injury. *Centers for Disease Control and Prevention* 2012. Available at: http://www.cdc.gov/vitalsigns/childinjury/?s\_cid=bb-vitalsigns-120. Accessed November 24, 2015.

#### Unintentional Non-Fatal Injuries<sup>1</sup> by Selected Cause and Age Group, Santa Cruz County

	2010	2011	2012	2013	2014
Falls					
0-4 years	578	571	543	571	564
5-9 years	397	369	397	423	431
10-19 years	580	613	556	539	607
20-64 years	1,978	1,982	2,071	1,915	2,021
65+ years	1,110	1,211	1,178	1,263	1,317
Motor Vehicle Traffic, Occupant					
0-4 years	21	18	21	33	19
5-9 years	34	23	33	18	29
10-19 years	144	146	126	124	124
20-64 years	723	749	770	695	788
65+ years	63	64	60	68	65
Poisoning					
0-4 years	58	50	50	48	61
5-9 years	10	18	8	13	8
10-19 years	40	50	56	44	42
20-64 years	241	294	281	257	246
65+ years	34	30	34	26	34
Struck by Object					
0-4 years	175	137	161	127	109
5-9 years	142	137	200	164	137
10-19 years	521	479	473	435	485
20-64 years	896	834	884	752	846
65+ years	84	82	83	93	93
Firearms					
0-4 years	0	0	0	0	0
5-9 years	0	0	0	0	0
10-19 years	3	3	1	4	1
20-64 years	2	4	3	6	7
65+ years	0	0	0	0	0

Source: California Department of Public Health. (2016). 2010-2014 EpiCenter: Overall injury surveillance. Sacramento, CA.

<sup>1</sup>Data represents non-fatal emergency department visits resulting in treat and release or transfer to another facility.

Note: Most recent data available shown. Data unavailable at time of report deadline.

#### **Motor Vehicle Collisions**

#### Motor Vehicle Collisions – Santa Cruz County<sup>1</sup>

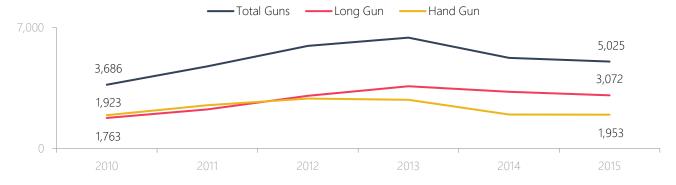


<sup>&</sup>lt;sup>1</sup>Includes state highway cases.

Source: State of California, Department of California Highway Patrol. (2017). 2013-2013 Collisions and Victims by Motor Vehicle Involved.

#### **Gun Sales**

#### Annual Gun Sales, Santa Cruz County



Source: California Department of Justice. (2016). 2010-2015 OpenJustice.

#### **Intentional Injuries**

#### Number of All Self-Inflicted Non-Fatal Injuries, Santa Cruz County by Age Group

	2010	2011	2012	2013	2014
0-4 years	0	1	1	0	0
5-9 years	0	1	1	0	0
10-19 years	79	70	86	103	113
20-64 years	186	174	172	178	163
65+ years	2	4	8	6	8
Santa Cruz County Total	267	250	268	287	284
Rate per 1,000 – Santa Cruz County	1.0	0.9	1.0	1.1	1.0
Rate per 1,000 – California	0.8	0.8	0.8	0.8	0.9

Source: California Department of Public Health. (2016). EpiCenter: Overall injury surveillance. Sacramento, CA. United States Census Bureau. (2016). 2010-2015 American Community Survey 1-year estimates.

Note: Non-fatal Emergency Department Visit (treat & release, or transfer to another facility)

Note: Most recent data available shown. Data unavailable at time of report deadline.

### Number of Intentional Non-Fatal, Hospitalization Injuries for Persons (Birth-20) by Selected Cause, Santa Cruz County

	2010	2011	2012	2013	2014
Self-Inflicted	21	16	19	30	34
Cut/Pierce	4	2	7	11	13
Poisoning	11	8	9	14	18
Other <sup>1</sup>	1	5	3	4	3
Hanging/Suffocation	0	1	0	1	0
Assault	23	17	14	10	7
Blunt Object	2	1	2	0	0
Cut/Pierce	10	12	6	5	3
Fight, Unarmed	5	1	0	3	1
Firearm	4	1	1	1	2
Other <sup>2</sup>	2	2	5	1	1
Total	44	33	33	40	41

Source: California Department of Public Health. (2016). EpiCenter: Overall injury surveillance. Sacramento, CA.

Note: Most recent data available shown. Data unavailable at time of report deadline.

<sup>&</sup>lt;sup>1</sup>Other types of Non-fatal Self-Inflicted Injuries includes Suicide Attempt by Jumping.

<sup>&</sup>lt;sup>2</sup>Other types of Non-fatal Assault Injuries includes Abuse and Neglect

#### **Communicable Diseases**

Communicable diseases are an indicator of a community's overall health and are largely preventable and/or treatable. Pertussis, or whooping cough, is a highly contagious yet preventable respiratory disease.<sup>84</sup> The uncontrollable cough most commonly affects babies and young children, although a growing number of teenagers are being affected. For children under age one, the disease can be fatal.

Sexually active adolescents are at risk of acquiring sexually transmitted infections (STIs), including chlamydia and gonorrhea which are most commonly reported in the nation among this age group. <sup>85</sup> The risk increases among teens who engage in certain behaviors, such as not utilizing condoms or other contraceptives, or having multiple sexual partners. <sup>86</sup>

Acquired Immunodeficiency Syndrome (AIDS) is the final stage of the Human Immunodeficiency Virus (HIV) infection. People at this stage of the HIV disease have severely compromised immune systems putting them at risk for opportunistic infections. AIDS requires medical intervention and treatment to prevent death.

#### **Reported Communicable Diseases**

#### Reported Cases of Selected Communicable Diseases, Santa Cruz County

	2010	2011	2012	2013	2014	2015
Chlamydia	765	744	867	1,002	912	976
Gonorrhea	46	81	99	134	176	179
Hepatitis A <sup>1</sup>	0	3	2	7	3	1
Hepatitis B (Chronic) <sup>1</sup>	19	21	44	19	55	64
Lyme Disease	7	10	7	7	6	9
Measles <sup>1</sup>	0	0	0	3	0	0
Pertussis (Whooping Cough) <sup>1</sup>	87	22	12	54	165	79
Salmonellosis	31	36	28	33	52	33
Shigellosis	7	9	7	10	8	11
Syphilis (Infectious)	13	25	28	32	45	51 <sup>2</sup>
Tuberculosis (Active)	11	10	7	5	5	2

Source: Santa Cruz County Health Services Agency. (2016). Provisional counts of selected reportable conditions by quarter and year of episode date, Santa Cruz County residents. Santa Cruz, CA.

Note: Most recent data available shown. Data unavailable at time of report deadline

<sup>&</sup>lt;sup>1</sup>Vaccine-preventable.

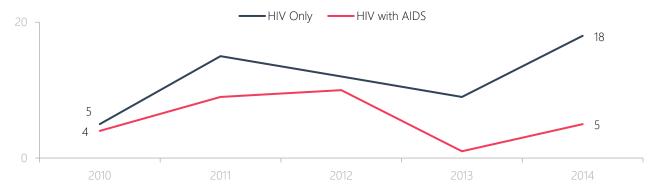
<sup>&</sup>lt;sup>2</sup>Includes all stages except the final stage (neurosyphilis).

<sup>&</sup>lt;sup>84</sup> Centers for Disease Control and Prevention. (2014). *Pertussis outbreak trends*. Atlanta, GA. Retrieved from http://www.cdc.gov/pertussis/outbreaks/trends.html

<sup>&</sup>lt;sup>85</sup> Guttmacher Institute. American Teens' Sexual and Reproductive Health. *American Teens' Sexual and Reproductive Health* 2014. Available at: http://www.guttmacher.org/pubs/fb-atsrh.html.

<sup>&</sup>lt;sup>86</sup> Sexually Active Teens. *Child Trends* 2014. Available at: http://www.childtrends.org/?indicators=sexually-active-teens. Accessed November 18, 2015.

# HIV/AIDS Number of New HIV Cases with or without AIDS by Year of Diagnosis, Santa Cruz County



Source: Santa Cruz County Public Health Department, Health Report, 2015.

Note: Most recent data available shown. Data unavailable at time of report deadline.

### Causes of Death

Healthy People 2020

Monitoring the causes of death is important for planning prevention programs and to help inform both the public and health practitioners about health risks. In 2015, the top five leading causes of death in the US were heart disease, cancer, chronic lower respiratory

diseases, accidents (unintentional injuries), and stroke.<sup>87</sup> Causes of death vary significantly between various age groups.

Suicide is the 10<sup>th</sup> leading cause of death in the US, with 42,773 caused by suicide each year.<sup>88</sup> In 2014, White males accounted for 7 of 10 suicides.<sup>89</sup> Among youth ages 15 to 24, suicide is the second leading cause of death following unintentional injury.<sup>90</sup> Research shows that risk factors for youth suicide include depression and other mental disorders, and substance-abuse disorders (often in combination).<sup>91</sup>

<sup>&</sup>lt;sup>87</sup> Centers for Disease Control and Prevention. National Center for Health Statistics, Leading Causes of Death. http://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm

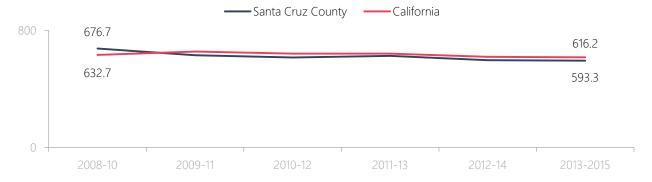
<sup>&</sup>lt;sup>88</sup> American Foundation for Suicide Prevention. Accessed September 2016 from https://afsp.org/about-suicide/suicide-statistics/.

<sup>89</sup> American Foundation for Suicide Prevention. Accessed September 2016 from https://afsp.org/about-suicide/suicide-statistics/.

<sup>&</sup>lt;sup>90</sup> Centers for Disease Control and Prevention. National Center for Health Statistics, National Vital Statistics System. Accessed September 2016 from http://www.cdc.gov/injury/images/lc-charts/leading\_causes\_of\_death\_age\_group\_2014\_1050w760h.gif.

<sup>&</sup>lt;sup>91</sup> American Psychological Association. Suicide is Preventable. Accessed September 2016 from http://www.apa.org/research/action/suicide.aspx.

## Age-Adjusted<sup>1</sup> Death Rate per 100,000 Population (Three-Year Averages)



Source: California Department of Public Health. (2017). County Health Status Profiles, 2008-2015.

Age-Adjusted<sup>1</sup> Death Rate per 100,000 Population (Three-Year Averages) by Cause of Death

	2008-10	2009-11	2010-12	2011-13	2012-14	2013-15		
All Cancers	Healthy People 202	Healthy People 2020 Target: 164.4						
Santa Cruz County	160.3	145.3	144.3	144.4	136.3	133.2		
California	151.7	156.4	153.3	151.0	146.5	143.8		
Lung Cancer	Healthy People 20	20 Target: 45.5						
Santa Cruz County	35.1	28.1	26.3	26.8	25.8	25.6		
California	36.1	36.5	34.8	33.6	31.7	30.6		
Breast Cancer (Female)	Healthy People 20	20 Target: 20.7						
Santa Cruz County	25.7	23.4	24.1	21.8	20.4	20.4		
California	20.7	21.3	20.9	20.7	20.3	19.8		
Coronary Heart Disease	Healthy People 202	20 Target: 103.4						
Santa Cruz County	111.8	97.2	83.9	81.6	76.0	72.1		
California	121.6	122.4	106.2	103.8	96.6	93.2		
Stroke	Healthy People 202	20 Target: 34.8						
Santa Cruz County	39.2	34.8	32.7	30.9	28.9	29.0		
California	37.4	38.1	36.6	35.9	34.4	34.7		
Drug-Induced <sup>2</sup>	Healthy People 202	20 Target: 11.3						
Santa Cruz County	12.4	15.9	18.8	18.4	18.5	18.1		
California	10.5	10.9	10.8	11.1	11.3	11.8		
Unintentional Injuries	Healthy People 202	20 Target: 36.4						
Santa Cruz County	31.6	32.7	32.6	33.4	34.2	37.8		
California	27.1	27.6	27.3	27.9	28.2	29.1		

<sup>&</sup>lt;sup>1</sup>Age-adjusted rate calculations are a summary measure allowing for unbiased comparisons between groups with different age distributions in the population over time, or among diverse populations. Unless noted as age-adjusted, rates shown are age-specific rates which are also used for unbiased evaluation however among groups of the same age or age range. Age-adjusted rates and age-specific rates are not comparable.

Firearm-related	Healthy People 2020	Target: 9.3				
Santa Cruz County	6.5	7.21	8.1	7.6	8.2	7.3
California	7.8	7.8	7.7	7.8	7.6	7.6
Homicide	Healthy People 2020	Target: 5.5				
Santa Cruz County	3.2	3.8	4.5	4.2	4.1	3.4 <sup>3</sup>
California	5.3	5.2	5.2	5.1	5.0	4.8
Motor Vehicle Crashes	Healthy People 2020	Target: 12.4				
Santa Cruz County	7.8	5.2	4.8	6.2	7.7	8.4
California	7.9	7.5	7.3	7.6	7.9	8.3

Source: California Department of Public Health. County Health Status Profile, 2008-2015 (2017).

Note: Reduce death rate for: overall cancer, lung cancer, female breast cancer, coronary heart disease, stroke, drug-induced, unintentional injuries, firearm-related, and motor vehicle crashes are indicators per Healthy People 2020. Reduce death rate for homicides is both a Social Determinant of Health indicator and a Leading Health Indicator per Healthy People 2020. Indicator targets are noted in table above per 100,000 population (age adjusted) with a desired decrease associated across all indicators.

### Collisions and Fatal Collisions by Motor Vehicle Involved with Bicycle – Santa Cruz County

	2013	2014	2015	2016
Fatal Collisions	3	1	0	3
Total Collisions	162	154	150	124

Source: State of California, Department of California Highway Patrol. (2017). 2013-2013 Collisions and Victims by Motor Vehicle Involved

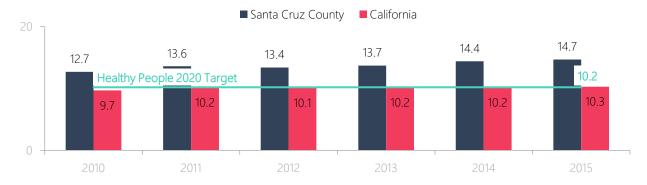
<sup>&</sup>lt;sup>1</sup> Age-adjusted rate calculations are a summary measure allowing for unbiased comparisons between groups with different age distributions in the population over time, or among diverse populations. Unless noted as age-adjusted, rates shown are age-specific rates which are also used for unbiased evaluation however among groups of the same age or age range. Age-adjusted rates and age-specific rates are not comparable.

<sup>&</sup>lt;sup>2</sup>Years prior to 2012-14 were "Drug Related" deaths.

<sup>&</sup>lt;sup>3</sup> Rates are deemed unreliable based on fewer than 20 data elements.

### **Suicides**

# Suicide Age-Adjusted<sup>1</sup> Death Rate per 100,000 People

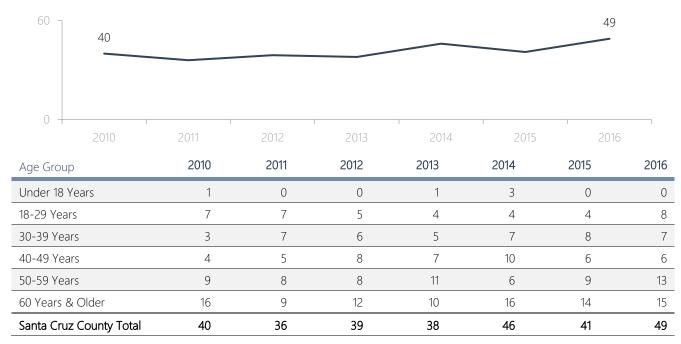


Source: California Department of Public Health. County Health Status Profile, 2010-2015 (2017).

Note: Reduce the suicide rate is a Leading Health Indicator per Healthy People 2020. Indicator has a target of 10.2 per 100,000 population (age adjusted) with a desired decrease associated with the indicator.

<sup>1</sup>Age-adjusted rate calculations are a summary measure allowing for unbiased comparisons between groups with different age distributions in the population over time, or among diverse populations. Unless noted as age-adjusted, rates shown are age-specific rates which are also used for unbiased evaluation however among groups of the same age or age range. Age-adjusted rates and age-specific rates are not comparable.

### **Number of Suicides, Santa Cruz County**



Source: Santa Cruz County Sheriff's Office. (2017). Personal Correspondence with program representative. August 2017.

# Social and Community for one of terminants ude: social onents of

Social and Community Context accounts for one of the five determinant areas in the Social Determinants of Health framework. Indicator factors include: social cohension and civic participation. Components of the previous Public Safety and Social Environment sections have been combined into this section.

Social and Community Context	
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### Social and Community Context Snapshot

### Social Cohesion

CAP survey respondents who strongly agree or agree with the statement: People in this neighborhood help each other out







95.6%

of CAP survey respondents who often or sometimes feel they have someone to turn to when they need help

WHITE: 96.4% LATINO: 93.9%

### Homelessness

2,249

people were indentified as homeless in Santa Cruz County during the 2017 Pointin-Time Count Discrimination

15.3% of CAP survey respondents felt discriminated against. Of those, 53.1% felt race/ethnicity was the reason Civic Participation

84.1%

of Santa Cruz County registered voters voted in the 2016 general election CALIFORNIA: 75.3% of CAP survey respondents who joined a protest or demonstration in the last 12 months

WHITE: 32.6% LATINO: 19.3%\*

\*Statiscally significant

Snapshot displays the most recent available data. Arrows shown reflect Santa Cruz County trends.







No arrow indicates no trend available



### **Community Goals for 2020**

- Goal 1: By the year 2020, more Santa Cruz County residents will build meaningful social bridges across differences in age, race, ethnicity, class, and culture.
  - » Community Hero: Peggy Benedum
- Goal 2: By the year 2020, schools and communities will be safe, supportive, and engaging places for children, youth, and families.
  - » Community Hero: Gabriella Grant
- Goal 3: By the year 2020, more Santa Cruz County residents will feel empowered to experience and pursue long-term quality of life.
  - » Community Hero: Nora Caruso

### **Quality of Life**

Quality of life is a broad multidimensional concept that encompasses both positive and negative aspects of life. Although health is one of the important domains of overall quality of life, there are other domains as well, including jobs, housing, schools, and the neighborhood, aspects of culture, values, and spirituality. Focusing on quality of life as an outcome can bridge boundaries between disciplines and between social, mental, and medical services.

Over a quarter (26.9%) of overall survey respondents feel that the cost of living/housing in Santa Cruz County takes away from their quality of life, followed closely by traffic (24.4%). Since 2013, cost of living/housing has risen from the fifth highest concern (13.0%) among survey respondents to the first, a 107% increase. The life satisfaction ladder captures a snapshot of well-being by asking survey respondents to rank where they land on a scale of 0-10, with 10 being their best possible life and 0 is their worse possible life. Over half (54.7%) of survey respondents rated themselves highly on this ladder (rungs 8-10), 39.5% rated themselves a 5-7, and 5.9% responded 0-4.

### ★ What do you think takes away from your quality of life in Santa Cruz County? (Top 5 Responses) - 2017

Cost of living / housing 26.9%	Traffic 24.496		Nothing takes away quality of life 18.8%	Homelessness 12.8% Gangs/Crime 11.9%	
2005	2007	2009	2011	2013	2015
1. Traffic (32.3%)	1. Traffic (31.1%)	1. Nothing takes away (18.6%)	1. Nothing takes away (19.3%)	1. Gangs/ crime (23.2%)	1. Cost of living/ housing (23.8%)
2. Cost of living/ housing (23.2%)	2. Cost of living/ housing (20.1%)	2. Traffic (13.8%)	2. Traffic (15.7%)	2. Nothing takes away (16.7%)	2. Nothing takes away (22.7%)
3. Overcrowding (12.6%)	3. Overcrowding (10.7%)	3. Cost of living/ housing (13.5%)	3. Gangs/ crime (15.2%)	3. Traffic (16.3%)	3. Traffic (19.6%)
4. Government (6.7%)	4. Gangs/ crime (9.7%)	4. Gangs/ crime (11.3%)	4. Cost of living/ housing (14.4%)	4. Homelessness (13.3%)	4. Gangs/ crime (14.1%)
	5. Homeless (9.4%)	5. Overcrowding/ unplanned growth (9.5%)	5. Overcrowding/ unplanned growth (9.0%)	5. Cost of living/ housing (13.0%)	5. Homelessness (13.0%)

2017 n: 757 Respondents offering 1,019 responses

Source: Applied Survey Research. (2017). 2005-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

Note: This was an open-ended survey question which allowed the respondent to provide any answer. Due to variance in coding, data should be compared by top responses rather than tracking individual responses over time.

<sup>&</sup>lt;sup>32</sup> Centers for Disease Control and Prevention. Health-Related Quality of Life. Accessed September 2016 from http://www.cdc.gov/hrgol/concept.htm.

# ★ What do you think takes away from your quality of life in Santa Cruz County? What don't you like about Santa Cruz County? (Top 5 responses) By Ethnicity – 2017





2017 - White n: 414 respondents offering 586 responses; Latino n: 277 respondents offering 342 responses.

Source: Applied Survey Research. (2017). 2013-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

Note: This was an open-ended survey question which allowed the respondent to provide any answer. Due to variance in coding, data should be compared by top responses rather than tracking individual responses over time.

# ★ What do you think takes away from your quality of life in Santa Cruz County? What don't you like about Santa Cruz County? (Top 5 responses) By Homeowner and Renter Status - 2017

### Homeowner Renter

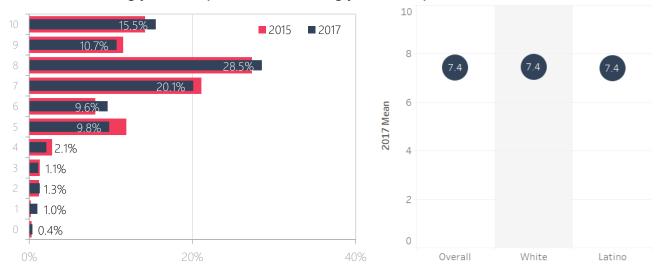


2017 - Homeowner n: 418 respondents offering 586 responses; Renter n: 293 respondents offering 380 responses.

Source: Applied Survey Research. (2017). 2013-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

<sup>\*</sup>Significance testing: Latino respondents were significantly more likely than White respondents to respond that "Nothing takes away" from life ir Santa Cruz County in 2017.

# To make the control of the satisfaction and the satisfaction are satisfaction and satisfaction and satisfaction are satisfaction.



2017 n: 785

Source: Applied Survey Research. (2017). Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

### **Social Support**

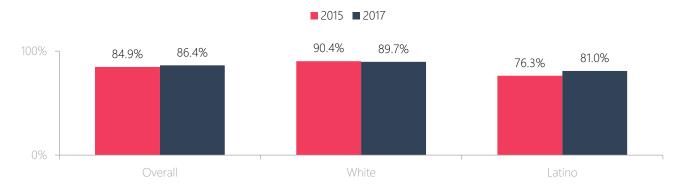
Social support means having friends and other people, including family, to turn to in times of need or crisis. Social support enhances quality of life and provides a buffer against adverse life events, and has been shown to reduce the psychological and physiological consequences of stress, and may enhance immune function. People that are supported by close relationships with friends, family, or fellow members of church, work, or other support groups are less vulnerable to ill health and premature death. Social networks, whether formal (such as a church or social club) or informal (meeting with friends) provide a sense of belonging, security, and community.

The vast majority of overall survey respondents (86.4%) in 2017 "strongly agree or agree" that people in their neighborhood help each other out. When considered by housing status, 81.0% of renters "strongly agree or agree" to this question compared to 90.0% of homeowners. Virtually all overall survey respondents (95.6%) in 2017 reported that they "often or sometimes" feel that they have someone they can turn to when they need help, similar percentages are reported among White and Latino survey respondents, 96.4% and 93.9%, respectively.

<sup>&</sup>lt;sup>93</sup> University of Minnesota. Taking Charge of Your Health and Wellbeing, Social Support. Accessed September 2016 from http://www.takingcharge.csh.umn.edu/explore-healing-practices/social-support.

<sup>&</sup>lt;sup>94</sup> University of Minnesota. Taking Charge of Your Health and Wellbeing, Social Support. Accessed September 2016 from http://www.takingcharge.csh.umn.edu/explore-healing-practices/social-support.

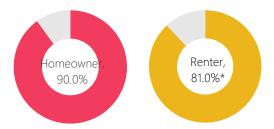
# ★ How much do you agree or disagree with the following statements about your neighborhood? (People in this neighborhood help each other out) (Respondents Answering "Agree" or "Strongly Agree") By Ethnicity - 2017



2017 - Overall n: 773; White n: 420; Latino n: 285.

Source: Applied Survey Research. (2017). 2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

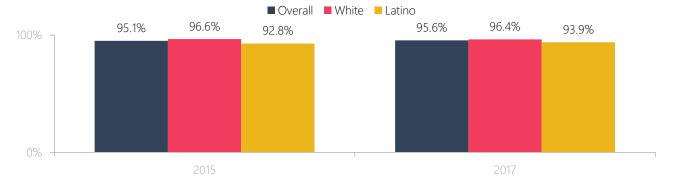
# ★ How much do you agree or disagree with the following statements about your neighborhood? (People in this neighborhood help each other out) (Respondents Answering "Agree" or "Strongly Agree") By Housing Status - 2017



2017 - Homeowner n: 426; Renter n: 302.

Source: Applied Survey Research. (2017). 2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA. \*Significance testing: Renters were significantly less likely than homeowners to respond, "Strongly Agree."

# How often do you feel that you have someone you can turn to when you need help? (Respondents Answering "Often" or "Sometimes") By Ethnicity



2017 - Overall n: 786; White n: 420; Latino n: 285

Source: Applied Survey Research. (2017). 2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

### **Persons with Disabilities**

It is important for every society to provide the resources necessary to allow all individuals to participate fully in their community, regardless of their physical, mental, or developmental disability.

### People with Any Disability by Age Group, Santa Cruz County

	2010	2011	2012	2013	2014	2015	2016
Under 5	0.8%	0.2%	1.9%	0.0%	0.6%	<0.1%	0.4%
5-17	4.8%	2.7%	4.8%	4.3%	4.6%	3.1%	8.2%
18-34	4.6%	3.9%	2.5%	3.6%	5.3%	8.0%	7.2%
35-64	9.2%	9.0%	8.8%	9.7%	7.8%	11.9%	12.2%
65-74	18.7%	18.9%	20.1%	17.9%	17.7%	20.2%	21.9%
75 & Older	48.9%	49.8%	48.2%	47.1%	38.4%	46.9%	39.2%
Santa Cruz County Population With Any Disability	24,009	23,242	23,709	24,558	23,152	31,384	32,936
Percentage of Santa Cruz County Total Population with Disability	9.3%	8.8%	8.9%	9.2%	8.6%	11.5%	12.1%

Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

### Homelessness

The pathways into and out of homelessness reflect an intricate interplay between structural factors, systems failures, and individual circumstances. Homelessness is usually the result of the cumulative impact of a number of factors, rather than a single cause. The scarcity of affordable housing in the United States, particularly in more urban areas where homelessness is more prevalent, is a major structural barrier to acquiring or maintaining housing.<sup>95</sup>

Nationally, 564,708 people were homeless on a given night in the United States in January 2015. Of that number, 36% were people in families, and 64% were individuals. Between 2014 and 2015, California had the second largest increase in homelessness (1,786). Locally, Santa Cruz County has one of the largest concentrations of individuals without housing in the country. Proceedings of the largest concentrations of individuals without housing in the country.

Sheltered versus Unsheltered Homeless Population, Santa Cruz County



Source: Applied Survey Research. (2017). Santa Cruz County 2017 Homeless Census & Survey. Watsonville, CA.

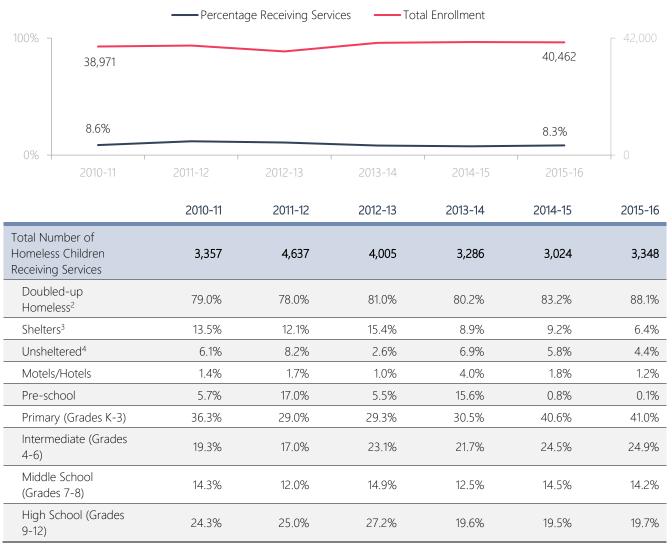
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<sup>&</sup>lt;sup>95</sup> National Alliance to End Homelessness. Snapshot of Homelessness. Accessed September 2016 from http://www.endhomelessness.org/pages/snapshot\_of\_homelessness.

<sup>96</sup> The US Department of Housing and Urban Development, 2015, The 2015 Annual Homeless Assessment Report to Congress,

<sup>&</sup>lt;sup>97</sup> The US Department of Housing and Urban Development, 2015, The 2015 Annual Homeless Assessment Report to Congress,

### Homeless Children Receiving Services under the McKinney-Vento Act<sup>1</sup>, Santa Cruz County



Homeless Children Receiving Services under the McKinney-Vento Act by Source: Santa Cruz County Office of Education. (2017). 2010-2016 Homeless Education Outreach.

Note: 2013/14 Pre-school includes infant homeless children as well. Numbers will not equal 100%, due to a small number of children not assigned to a grade.

<sup>1</sup>The McKinney-Vento was the first significant federal response to homelessness and provides federal monies for homeless programming and shelter services. The McKinney-Vento act defines homelessness as: A) means individuals who lack a fixed, regular, and adequate nighttime residence; and (B) includes—(i) children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement; (ii) children and youths who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings; (iii) children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and (iv) migratory children who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described in clauses (i) through (iii).

<sup>&</sup>lt;sup>2</sup>The term "Doubled-up Homeless" refers to two to three families housed in a single housing unit due to an inability to find permanent housing.

<sup>&</sup>lt;sup>3</sup>The "Shelter" count includes youth living in "Transitional Housing."

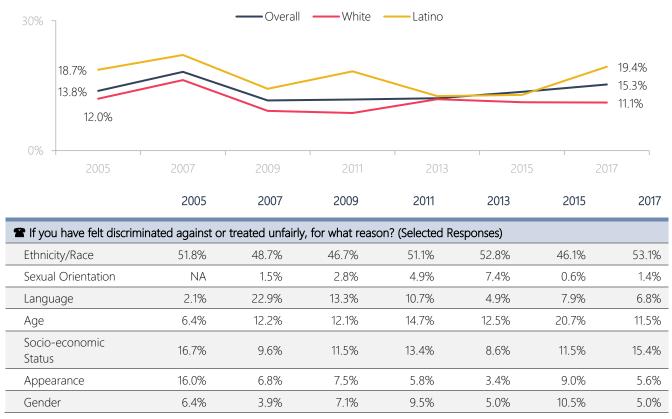
<sup>&</sup>lt;sup>4</sup>The "Unsheltered" numbers do not include migrant youth living in a homeless situation

### **Racism and Discrimination**

Racism has a significant impact both on the individuals who experience it and the wider community. Studies have consistently found that experiencing discrimination is associated with poorer physical and mental health outcomes<sup>98</sup>, such as depression, anxiety, heart disease, and breast cancer.<sup>99</sup> Further, racism presents barriers to social and economic participation which can in turn cause social exclusion and entrench disadvantage, sometimes for generations.

Fifteen percent (15.3%) of overall survey respondents in 2017 reported that they have felt discriminated against in Santa Cruz County in the last 12 months, representing a steady increase since 2009 (11.6%). Of those survey respondents, 53.1% felt the reason they were discriminated against or treated unfairly in 2017 was due to their ethnicity/race.

# The Have you felt discriminated against in Santa Cruz County in the last 12 months? (Respondents answering "Yes") By Ethnicity



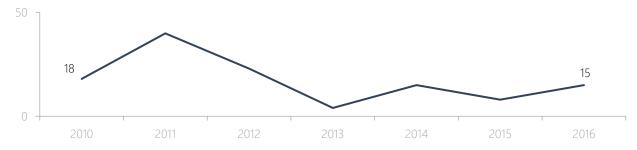
<sup>&</sup>quot;Have you ever felt discriminated against..." 2017 - Overall n: 786, White n: 429, Latino n: 290; Reason for discrimination 2017 - Overall n: 115 respondents offering 141 responses.

Source: Applied Survey Research. (2017). 2005-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

<sup>&</sup>lt;sup>98</sup> Berkman L., Kawachi I Krieger N. (2000). Discrimination and health. Social Epidemiology. Oxford: Oxford University Press: 36-75.

<sup>&</sup>lt;sup>99</sup> Harvard Kennedy School. Shorenstein Center for Media, Politics, and Public Policy. Journalist's Resource. Racial Discrimination and Health Effects: Current Research and New Areas of Study. Accessed September 2016 from http://journalistsresource.org/studies/society/race-society/racial-discrimination-health-effects.

### Number of Hate Crime<sup>1</sup> Events, Santa Cruz County



Source: California Department of Justice. (2017). 2010-2016 Hate Crimes Report.

<sup>1</sup> The Federal Bureau of Investigation (FBI) defines a hate crime as a "criminal offense against a person or property motivated in whole or in part by an offender's bias against a race, religion, disability, sexual orientation, ethnicity, gender, or gender identity."

### **Civic Engagement**



Civic engagement refers to individual and collective actions designed to identify and address issues of public concern. Ocivic engagement can take many forms, from individual voluntarism to organizational involvement to electoral participation, and can include efforts to directly address an issue, work with others in a community to solve a problem, or interact

with the institutions of representative democracy.<sup>101</sup> Studies shows that volunteers become emotionally connected to the communities they serve and sustain community involvement after volunteering.<sup>102</sup> Moreover, young people who volunteer in their communities are more likely to vote, stay actively involved in service, and feel empowered as citizens. Volunteering also helps people develop skills and confidence.

Overall survey respondents reported in 2017 that they had participated at higher levels in various civic engagement activities in the last 12 months than during the previous 2015 survey year, including: voting, attending public meetings, and communication with a local politician. Thirty-percent (29.6%) of overall survey respondents reported having joined a protest or demonstration in 2017, a 164% increase over 2015 (11.2%). In 2015, Latino survey respondents (18.9%) were statically more likely than White survey respondents (8.2%) to join a protest or demonstration; however, the statistical significance switched in 2017 (White survey respondents at 32.6%, in comparison to Latino survey respondents at 19.3%).

<sup>&</sup>lt;sup>100</sup> American Psychological Association. Civic Engagement. Accessed September 2016 from http://www.apa.org/education/undergrad/civic-engagement.aspx.

<sup>&</sup>lt;sup>101</sup> American Psychological Association, Civic Engagement, Accessed September 2016 from http://www.apa.org/education/undergrad/civic-engagement.aspx

<sup>&</sup>lt;sup>102</sup> Gergen, Christopher. (2012, April 17). The Benefits of Civic Engagement for Tomorrow's Leaders. Accessed September 2016 from https://www.whitehouse.gov/blog/2012/04/17/benefits-civic-engagement-tomorrows-leaders.

### The last 12 months, have you done any of the following? By Ethnicity

		Overall		White		Latino
	2015	2017	2015	2017	2015	2017
Vote	76.7%	91.3%	81.8%	95.7%	66.1%	78.6%*
Signed a petition	53.5%	54.1%	61.3%	58.5%	30.7%	40.8%*
Met with, e-mailed, called or sent a letter to any local politician	33.2%	41.3%	39.3%	48.7%	14.4%	22.8%*
Attended a town meeting, public hearing or public affair	37.4%	40.7%	39.3%	44.0%	32.4%	32.6%*
Joined an online political advocacy group	20.2%	26.7%	23.9%	30.7%	8.1%	12.7%*
Joined a protest or demonstration	11.2%	29.6%	8.2%	32.6%	18.9%	19.3%*
Other political action	1.4%	32.3%	1.3%	34.6%	0.0%	23.1%*

<sup>2017 -</sup> Overall n: 660 offering 2,134 responses; White n: 409 offering 1,439 responses; Latino n: 186 offering 438 responses.

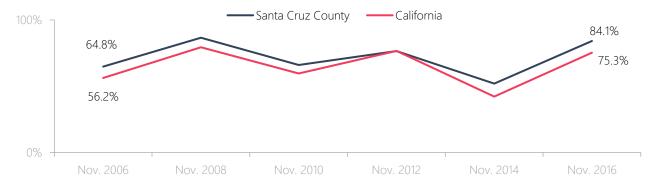
Source: Applied Survey Research. (2017). 2015-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA. Note: Multiple response question totals may not add up to 100%.

<sup>\*</sup>Significance testing: Latino respondents were significantly less likely than White respondents to vote, sign a petition, correspond with a local politician, join an online advocacy group, join a protest or demonstration attend a town meeting, public hearing or public affair,, or join a neighborhood group or association in the last 12 months.

### Voting



### Percentage of Registered Voters Who Voted in General Elections, Santa Cruz County



General Elections	Nov. 2006	Nov. 2008	Nov. 2010	Nov. 2012	Nov 2014	Nov 2016
Registered Voters	142,415	148,364	148,501	158,641	142,316	157,186
Registered Voter Turnout	92,236	128,555	98,037	121,323	74,040	132,165

Primary Elections	June 2010	June 2012	June 2014	June 2015	June 2016
Registered Voters	146,974	146,980	141,105	141,105	145,809
Registered Voter Turnout	55,084	58,526	49,143	49,143	94,928
Santa Cruz County Registered Voter Turnout	37.5%	39.8%	34.8%	34.8%	65.1%
California Registered Voter Turnout	33.3%	31.1%	25.2%	25.2%	47.7%

Source: California Secretary of State, Elections Division. (2017). 2010-2016.

Note: The proportion of persons eligible to participate in elections who are registered to vote is a Social Determinant of Health indicator per Healthy People 2020. There is no associated target with this indicator, it is deemed informational.

# Neighborhood Id Built Its for one nant areas ninants of Indicator rime and ronmental ous Public Indicator Time and Tronmental Out Public Triangent Indicator Time and Tronmental Out Public Triangent Indicator Triange

Neighborhood and Built Environment accounts for one of the five determinant areas in the Social Determinants of Health framework. Indicator factors include: crime and violence and environmental conditions. The previous Public Safety and Natural Environment sections are now housed in this section.

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### **Natural and Built Environment Snapshot Public Safety**

Concern About Crime



31.3%

of CAP survey respondents reported they were "Very Concerned" about crime in Santa Cruz County

Crime and Violence

38.5

per 1,000 residents was the Santa Cruz County crime rate

CALIFORNIA: 30.2

VIOLENT CRIME RATE: 4.0 PROPERTY CRIME RATE: 34.4

Incarceration

Juvenile Arrests, Santa Cruz County



WHITE: HISPANIC: BLACK: 27.1% 66.3% 4.3%

34

homicide deaths per 100,000 residents in Santa Cruz County

HP 2020: 5.5

CALIFORNIA: 4.8

Gang Related Cases

Incident Location of Gang Related Cases in Santa Cruz County

41.8% North County\*



\*The data shown above uses Park Avenue and Highway 1 as the dividing line

**57.2**% South County



47.2%

County



Jail population characteristics, Santa Cruz

42.5%

WHITE: HISPANIC: AFRICAN AMERICAN: 7.0%

Child Abuse Cases



5.5

substantiated cases of child abuse per 1,000 children (ages 0-17) in Santa Cruz County

CALIFORNIA: 8.0

### **Natural Environment**

Concern for the Environment

21.6%

of CAP survey respondents listed water pollution as the top response for the thing that concerns them most about the natural environment in Santa Cruz County

NORTH COUNTY: 21.4%

SOUTH COUNTY: 21.1%

SAN LORENZO VALLEY: 24.3%

Organic Farming



acres of organic farmland in Santa Cruz County

115 certified organic

producers in Santa Cruz County with more than \$5K in annual sales

million in gross organic farm sales in Santa Cruz County

**Environmental Conditions** 

1,810,519



pounds of pesticide applied in Santa Cruz County

CALIFORNIA: 212,846,042

6.9 6.4 pounds pounds per resident per acre in Santa Cruz County

CALIFORNIA: 5.7 (RESIDENT) CALIFORNIA: 2.1 (ACRE)

168



days of swim advisories in Santa Cruz County

zero

days of beach closures in Santa Cruz County

district

SCOTTS VALLEY SAN LORENZO VALLEY SOQUEL CREEK WATSONVILLE CITY

CITY OF SANTA CRUZ

Average reported residential

water use (in gallons per

capita, per day) by water

HP 2020 89.1

Mode of transportation for commuting to work among Santa Cruz County residents

68.3% drove alone (car, truck, or van)



8.6% carpooled



26.8

average travel time to work for mins. Santa Cruz County residents



zero

unhealthy days (Air Quality Index) for sensitive groups in Santa Cruz County



# Community Goals for 2020 Public Safety

- Goal 1: By the year 2020, the juvenile crime rate will be reduced by 10% through the use of culturally
  responsive evidence based strategies that promote positive interaction and reduce conflict with public
  safety officials.
- Goal 2: By the year 2020, there will be a 20% reduction in youth reporting gang involvement, resulting in a 10% reduction of gang related criminal activity.
  - » Community Hero: Denise Pitman-Rosas
- Goal 3: By the year 2020, there will be a 10% decrease in arrests or citations of individuals with chronic SUD/COD through the increase of on-demand treatment for adults with such disorders.
  - » Community Hero: Charles "Stoney" Brook
- Goal 4: By the year 2020, the violent crime rate of 18 to 25 year olds will be reduced by 10% through the use of targeted gang involvement intervention strategies, including restorative practices, street outreach, and alternatives to adult gang involvement.

### **Natural Environment**

- Goal 1: By the year 2020, residential per capita water use will be sustained at or under 2013 baseline levels through 2020.
  - » Community Hero: Roy Sikes
- Goal 2: By the year 2020, 5% of homes in Santa Cruz County will have a solar electric or hot water system.
- Goal 3: By the year 2020, stewardship actions for our waters will be increased by 10%.
  - » Community Hero: Rich Casale
- Goal 4: By the year 2020, 50 miles of urban bike and multi-use trails will be constructed within Santa Cruz County to decrease traffic, increase active transportation, and connect urban areas to open spaces.
  - » Community Hero: Nathan Nguyen

### **Public Safety**

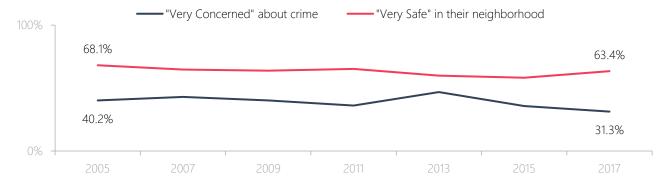
### Concern about Crime and Neighborhood Safety

A safe community is a livable community where people can go about their daily activities in an environment without fear, risk of harm or injury. <sup>134</sup> Communities can increase community safety by reducing and preventing injury and violence, as well as building strong, cohesive, vibrant, and participatory communities. Having a safe neighborhood is essential for positive child and youth development.

Neighborhoods that are unsafe are associated with high rates of infant mortality and low birth weight, juvenile delinquency, high school dropout, child abuse and neglect, and poor motor and social development among pre-school children.<sup>135</sup> Conversely, children who live in highly supportive neighborhoods have positive outcomes such as stronger connections with family, peers and community, and greater participation in out-of-school time programs, volunteering, and religious services.<sup>136</sup>

Just under two-thirds (63.4%) of survey respondents answered that they felt "Very Safe" in their neighborhoods, while 31.3% of survey respondents were "Very Concerned" about crime in Santa Cruz County. While concern about crime has seen a small decline over the past 12 years, neighborhood safety has remained fairly constant over this same period. Regionally, San Lorenzo Valley survey respondents in 2017 were significantly more likely than both North and South County survey respondents to feel "Very Safe" in their neighborhood. Renter survey respondents were significantly more likely than homeowner survey respondents to answer "Very Concerned" or "Somewhat Concerned" about both violent crime and gangs in their neighborhoods in 2017.

# How concerned are you about crime in Santa Cruz County? How safe would you say you feel in your neighborhood?



2017 - Concerned about Crime Overall n: 791; Safe in neighborhood Overall n: 788.

Source: Applied Survey Research. (2017). 2005-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

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<sup>&</sup>lt;sup>134</sup> Pan Pacific Safe Communities Network. Accessed September 2016 from http://www.ppscn.org/.

<sup>135</sup> Child Trends Data Bank, Neighborhood Safety, Accessed September 2016 from http://www.childtrends.org/?indicators=neighborhood-safety

<sup>136</sup> Child Trends Data Bank. Neighborhood Safety. Accessed September 2016 from http://www.childtrends.org/?indicators=neighborhood-safety.

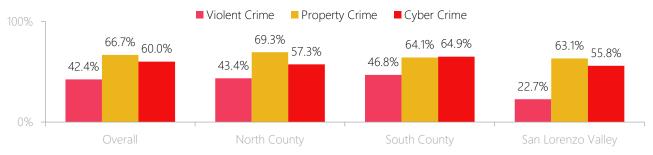
### Trime Concerns and Neighborhood Safety by Region

	2005	2007	2009	2011	2013	2015	2017		
How concerned are you about crime in Santa Cruz County? (Respondents answering "Very Concerned")									
North County	38.8%	47.5%	35.7%	33.1%	44.7%	33.4%	32.6%		
South County	45.4%	43.3%	52.0%	46.5%	53.5%	40.4%	31.6%		
San Lorenzo Valley	24.9%	25.1%	23.1%	21.6%	35.8%	31.7%	24.2%		
How safe would you say y	ou feel in your n	eighborhood (R	tespondents an	swering "Very S	afe")				
North County	63.0%	66.9%	68.1%	65.5%	59.5%	60.5%	65.7%		
South County	67.8%	54.4%	51.0%	58.9%	55.0%	48.7%	55.9%		
San Lorenzo Valley	83.0%	85.4%	83.4%	86.1%	74.2%	78.5%	78.0%*		

Crime Concerns: 2017 - North County n: 274, South County n: 267, San Lorenzo Valley n: 250; Neighborhood Safety: 2017 - North County n: 271, South County n: 269, San Lorenzo Valley n: 250.

Source: Applied Survey Research. (2017). 2005-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

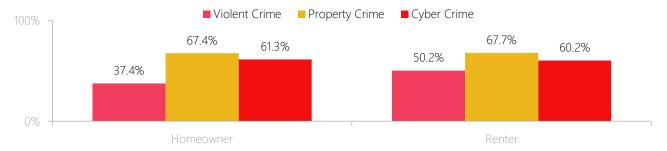
# ★ How concerned are you about Violent/Property/Cyber Crime in your neighborhood (Respondents answering "Somewhat Concerned or Very Concerned")? By Region – 2017



Violent Crime: 2017 - Overall n: 787, North County n: 271, South County n: 268, San Lorenzo Valley n: 248; Property Crime: 2017 - Overall n: 784 North County n: 270, South County n: 267, San Lorenzo Valley n: 249; Cyber Crime: 2017 - Overall n: 740, North County n: 253, South County n: 254, San Lorenzo Valley n: 235

Source: Applied Survey Research. (2017). Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

# ★ How concerned are you about Violent/Property/Cyber Crime in your neighborhood (Respondents answering "Somewhat Concerned or Very Concerned")? By Housing Status - 2017

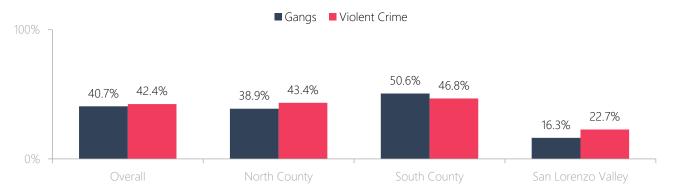


Violent Crime: 2017 - Homeowner n: 430, Renter n: 309, Property Crime: 2017 - Homeowner n: 430, Renter n: 308; Cyber Crime: 2017 - Homeowner n: 404, Renter n: 289.

Source: Applied Survey Research. (2017). Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

<sup>\*</sup>Significance testing: Respondents from San Lorenzo Valley were significantly more likely than both North and South County respondents to feel "very safe" in their neighborhood.

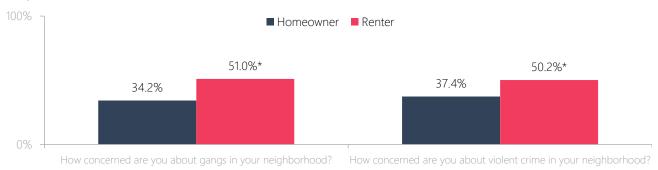
# ★ How concerned are you about Gangs/Violent Crime in your neighborhood (Respondents answering "Somewhat Concerned or Very Concerned")? By Region – 2017



Gangs: 2017 - Overall n: 781, North County n: 268, South County n: 266, San Lorenzo Valley n: 249; Violent Crime: 2017 - Overall n: 787, North County n: 271, South County n: 268, San Lorenzo Valley n: 248.

Source: Applied Survey Research. (2017). Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

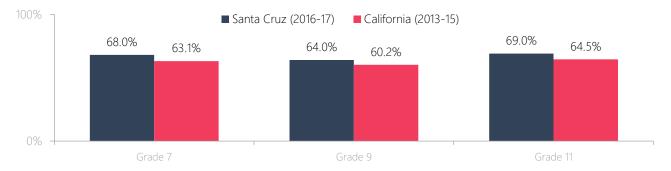
# ■ Neighborhood Safety by Housing Status – (Respondents answering "Somewhat Concerned or Very Concerned")? 2017



Crime Concerns: 2017 - Homeowner n. 430, Renter n. 309; Gang Concerns: 2017 - Homeowner n. 425, Renter n. 310

Source: Applied Survey Research. (2017). Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

## Percentage of Students Who Perceived their Safety at School as "Very Safe" or "Safe", by School District



Source: WestEd, California Healthy Kids Survey, California Department of Education. (2013-17).

<sup>\*</sup>Significance testing: Renters were significantly more likely than homeowners to answer "Very concerned" or "Somewhat concerned" about both violent crime and gangs in their neighborhoods in 2017.

### **Crime and Arrests**





Crime contributes to poorer physical and mental health for victims, perpetrators, and community members. In addition to direct physical injury, victims of violence are at increased risk of depression, substance abuse, anxiety, reproductive health problems, and suicidal behavior.<sup>137</sup>

Gangs operate in cities of all sizes throughout California and are responsible for much of the crime in the state. Research suggests that a comprehensive approach to gangs involving prevention, intervention, and suppression efforts works better than suppression efforts alone. 139

Youth who have been involved with the juvenile justice system are at increased risk of substance abuse, injury, and negative educational impacts. Many factors have been noted as contributing to crime among youth, including: poverty, exposure to violence, maltreatment, substance abuse, and mental illness. Youth who have spent time in detention are more likely to engage in criminal behavior as adults and experience increased rates of attempted suicide and other mental health disorders. You

<sup>&</sup>lt;sup>137</sup> Krug, E.G., Dalhberg, L.L., Mercy, J.A., Zwi, A.B., & Lozano, R. (Eds.). (2002). World report on violence and health. World Health Organization, Geneva, Switzerland. Retrieved from http://www.who.int/violence\_injury\_prevention/violence/world\_report/en/summary\_en.pdf

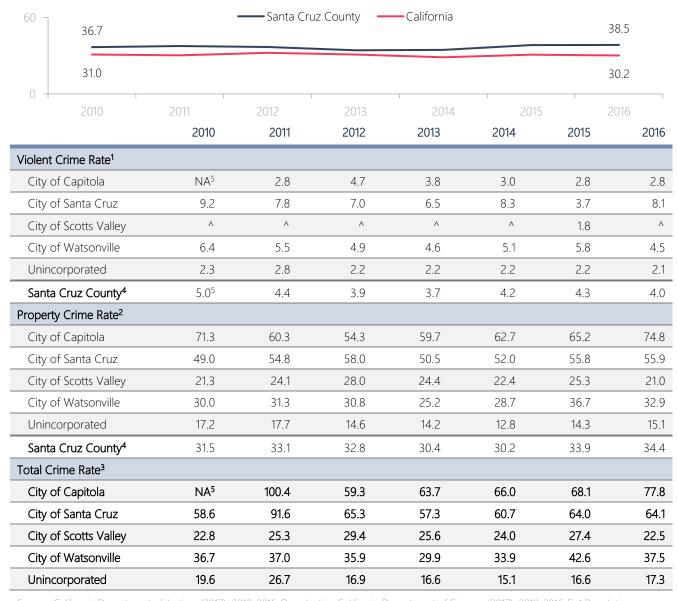
<sup>&</sup>lt;sup>138</sup> California Department of Justice, Division of Law Enforcement, Bureau of Investigation and Intelligence. (2010). Organized Crime in California. Retrieved from: http://oag.ca.gov/sites/all/files/agweb/pdfs/publications/org\_crime2010.pdf

Howell, J. C. (2007). Menacing or mimicking? Realities of youth gangs. Juvenile and Family Court Journal, 58(2), 39-50. Retrieved from: http://www.nationalgangcenter.gov/Content/Documents/Menacing-or-Mimicking.pdf

<sup>&</sup>lt;sup>140</sup> Juvenile Arrests Summary - Kidsdata.org. *Kidsdata.org*. Available at: http://www.kidsdata.org/topic/30/juvenile-arrests/summary#jump=why-important. Accessed November 23, 2015.

<sup>&</sup>lt;sup>141</sup> Prevent Juvenile Delinquency. *Policy for Results* 2015. Available at: http://www.policyforresults.org/youth/prevent-juvenile-delinquency. Accessed November 23, 2015.

Crime Rate
Crime Rate per 1,000 Residents



Source: California Department of Justice. (2017). 2010-2016 *OpenJustice*. California Department of Finance (2017). 2010-2016 *E-4 Population Estimates for Cities, Counties and the State*.

<sup>&</sup>lt;sup>1</sup>Violent crime rate includes: homicide, forcible rape, robbery, and aggravated assault.

<sup>&</sup>lt;sup>2</sup>Property crime rate includes: burglary, motor vehicle theft, and larceny-theft over \$400.

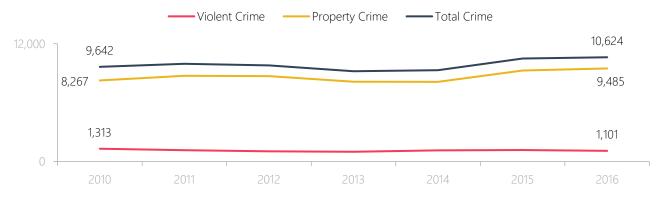
<sup>&</sup>lt;sup>3</sup> Total crime rate includes: violent crime, property crime, and arson.

<sup>&</sup>lt;sup>4</sup> Santa Cruz County totals include the California Highway Patrol, U.C. Santa Cruz, Santa Cruz Mountains Department of Parks and Recreation, and the Union Pacific Railroad

<sup>&</sup>lt;sup>5</sup> In 2012, a reporting error was discovered in the City of Capitola Uniformed Crime Report data for 2011. The Records Manager found when officers were entering information in their assault reports; they were inadvertently coding information incorrectly causing aggravated assault data to be over inflated. This occurred for at least the past five years and probably longer. Upon discovering this error, the City of Capitola corrected the problem moving forward; however, they are unable to correct data that has already been submitted.

<sup>^</sup>Rate is not calculated for numbers less than 20, as small numbers are unstable and can be misinterpreted.

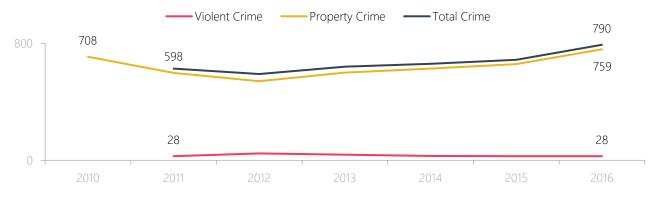
### Number of Crimes, Santa Cruz County



Source: California Department of Justice. (2017). 2010-2016 OpenJustice.

Note: In 2012, a reporting error was discovered in the City of Capitola Uniformed Crime Report data for 2011. The Records Manager found when officers were entering information in their assault reports; they were inadvertently coding information incorrectly causing aggravated assault data to be over inflated. This occurred for at least the past five years and probably longer. Upon discovering this error, the City of Capitola corrected the problem moving forward; however, they are unable to correct data that has already been submitted.

### Number of Crimes, City of Capitola

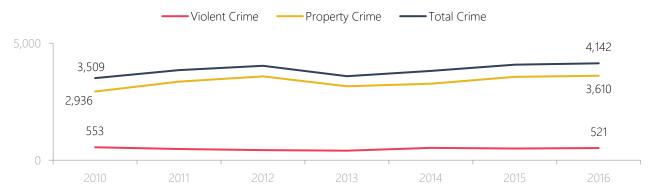


Source: California Department of Justice. (2017). 2010-2016 OpenJustice.

Note: See note under Number of Crimes, Santa Cruz County

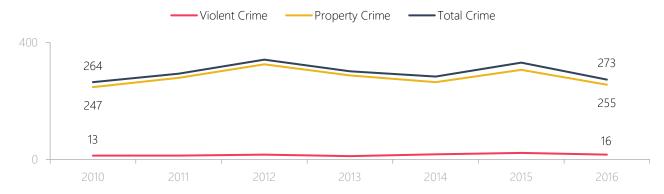
Note: Data from 2010 were unavailable.

### Number of Crimes, City of Santa Cruz



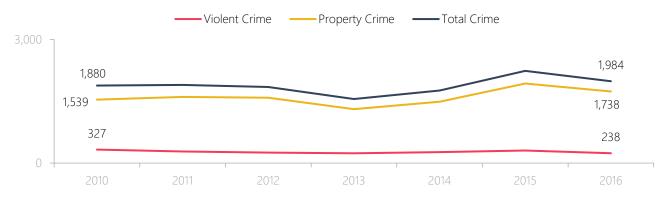
Source: California Department of Justice. (2017). 2010-2016 OpenJustice.

### **Number of Crimes, City of Scotts Valley**



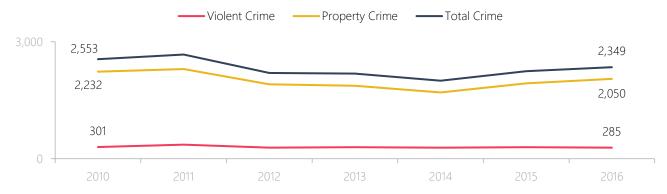
Source: California Department of Justice. (2017). 2010-2016 OpenJustice.

### Number of Crimes, City of Watsonville



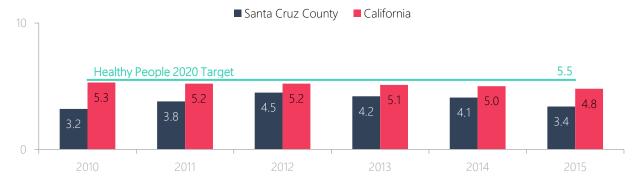
Source: California Department of Justice. (2017). 2010-2016 OpenJustice.

### Number of Crimes, Unincorporated Areas (Sheriff's Office)



Source: California Department of Justice. (2017). 2010-2016 OpenJustice.

# Homicide Age-Adjusted Death Rate per 100,000 People



Source: California Department of Public Health. (2015). Death Statistical Master Files. Sacramento, CA.

Note: Reduce the homicide rate is a Leading Health Indicator per Healthy People 2020. Indicator has a target of 5.5 per 100,000 population (age adjusted) with a desired decrease associated with the indicator.

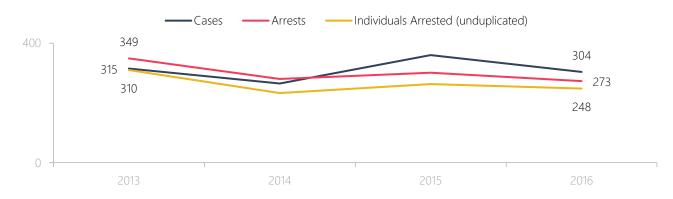
Note: Age-adjusted rate calculations are a summary measure allowing for unbiased comparisons between groups with different age distributions in the population over time, or among diverse populations. Unless noted as age-adjusted, rates shown are age-specific rates which are also used for unbiased evaluation however among groups of the same age or age range. Age-adjusted rates and age-specific rates are not comparable.

### Number of Homicides, Santa Cruz County



Source: California Department of Justice. (2017), 2010-2016 OpenJustice.

# Gang Related Gang Related Cases and Arrests

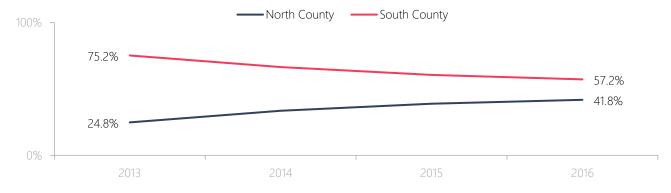


	2013	2014	2015	2016				
Jurisdiction								
City of Capitola	1.3%	1.9%	1.4%	1.6%				
City of Santa Cruz	13.7%	15.5%	29.4%	25.7%				
City of Scotts Valley	1.6%	2.3%	3.6%	3.3%				
City of Watsonville	54.9%	51.7%	50.3%	52.0%				
Unincorporated Areas (Sheriff's Office)	28.6%	28.7%	14.7%	16.8%				
Age of Unduplicated Arrestee among Gang Related Cases								
12-17	19.1%	15.9%	25.9%	17.3%				
18-25	48.7%	39.9%	41.1%	48.4%				
26 and older	32.1%	44.2%	33.0%	34.3%				

Source: Santa Cruz County Anti-Crime Team. (2016). *Personal Correspondence with program representative*.

Note: All numbers shown are the first half of the year, January through June, and do not reflect the entire year.

### **Incident Location of Gang Related Cases**

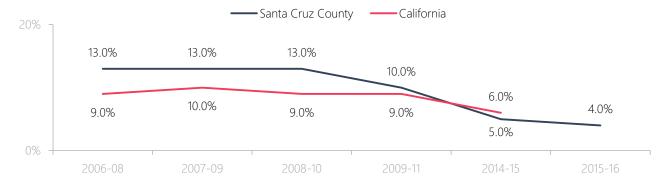


Source: Santa Cruz County Anti-Crime Team. (2016). Personal Correspondence with program representative.

Note: All numbers shown are the first half of the year, January through June, and do not reflect the entire year.

Note: North County and South County are divided at Park Avenue and Highway 1 with everything north of this line reflecting North County and everything south of this line reflecting South County.

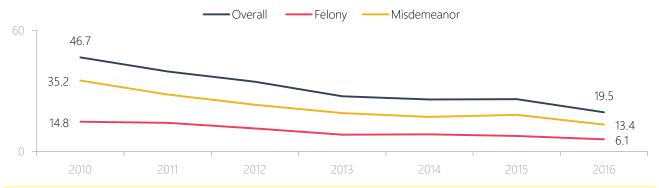
### Percentage of Students Who Reported Gang Involvement, 9th Grade Students



Source: California Healthy Kids Survey, WestEd, California Department of Education. (2017). Gang Involvement, Table A6.8, by county and statewide, 2006-2016.

Note: California data for 2015-16 were unavailable at time of publication.

### Juvenile Arrest Rate per 1,000 Youth (Ages 10-17), Santa Cruz County



Source: California Department of Justice. (2017). 2000-2016 P-2 Population Estimates for Cities, Counties and the State, 2000-2010, with 2000 and 2010 Census Counts.

### Juvenile Arrests by Jurisdiction, Santa Cruz County

	2010	2011	2012	2013	2014	2015
Juvenile Misdemeanor Arrests						
Capitola Police Department	117	60	45	56	55	23
Santa Cruz Police Department	178	180	128	96	82	68
Scotts Valley Police Department	62	45	41	25	35	26
Watsonville Police Department	272	227	218	168	121	231
Santa Cruz County Sheriff's Office	142	121	106	104	111	90
Santa Cruz County Total Juvenile Misdemeanor Arrests <sup>1</sup>	834	671	586	477	422	448
Juvenile Felony Arrests						
Capitola Police Department	14	13	14	7	6	14
Santa Cruz Police Department	67	81	78	39	47	43
Scotts Valley Police Department	22	11	9	7	7	2
Watsonville Police Department	167	155	135	105	92	92
Santa Cruz County Sheriff's Office	74	65	42	46	51	35
Santa Cruz County Total Juvenile Felony Arrests <sup>1</sup>	351	340	290	209	210	192
Total Felony and Misdemeanor Arre	ests					
Santa Cruz County Total Felony and Misdemeanor Juvenile Arrests <sup>1</sup>	1,185	1,011	876	686	632	640

Source: California Department of Justice. (2016). 2000-2020 E-4 Population Estimates for Cities, Counties and the State, 2000-2010, with 2000 and 2010 Census Counts. California Department of Justice. (2015). 2010-2015 *OpenJustice*. State of California, Department of Finance, Race/Ethnic Population with Age and Sex Detail, 2000–2050. State of California, Department of Finance, Report P-3: State and County Population Projections by Race/Ethnicity, Detailed Age, and Gender, 2010-2060. Sacramento, California, January 2016.

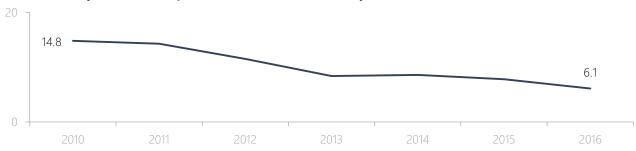
<sup>1</sup>The total of all jurisdictions will not equal Santa Cruz County total. The County total includes the California Highway Patrol, U.C. Santa Cruz, Santa Cruz Mountains Department of Parks and Recreation, and the Union Pacific Railroad.

### Juvenile Arrests by Race, Santa Cruz County

Total Felony and Misdemeanor Juvenile Arrests	1,185	1,114	876	686	632	640	484
Other	3.5%	2.5%	3.3%	2.9%	4.1%	1.9%	2.3%
White (Not Hispanic)	38.3%	34.1%	34.0%	32.9%	34.1%	25.2%	27.1%
Hispanic	55.9%	59.4%	60.6%	61.4%	58.1%	68.4%	66.3%
Black	2.3%	3.9%	2.1%	2.8%	3.7%	4.5%	4.3%
	2010	2011	2012	2013	2014	2015	2016

Source: California Department of Justice. (2017). 2010-2016 OpenJustice.

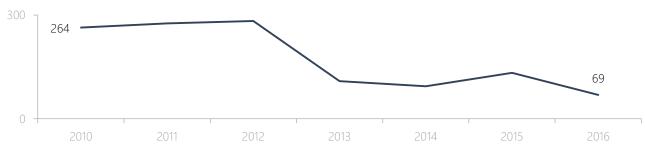
### Juvenile Felony Arrest Rate per 1,000, Santa Cruz County



Source: Santa Cruz County Probation Department. (2016). 2010-2015 California Department of Finance, Race/Ethnic Population with Age and Sex Detail

Note: Only a portion of youth who are arrested for a felony are referred to juvenile court for adjudication (formal handling by the court).

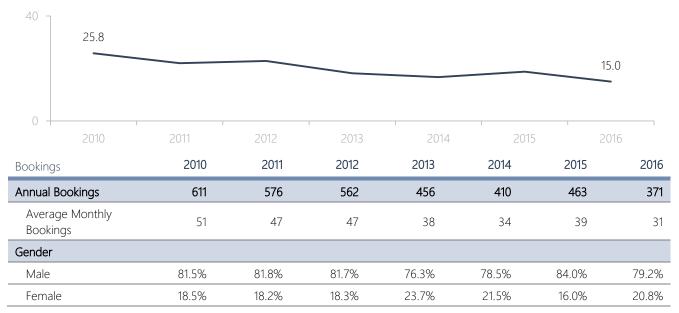
### Juvenile Felony Adjudications, Santa Cruz County



Source: Santa Cruz County Probation Department, (2017), 2010-2016

Note: Only a portion of youth who are arrested for a felony are referred to juvenile court for adjudication (formal handling by the court).

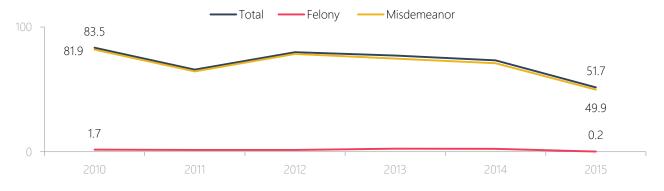
### Juvenile Hall Booking Rate per 1,000 Youth, Santa Cruz County



Source: Santa Cruz County Probation Department. (2017). 2010-2016 California Department of Finance, Race/Ethnic Population with Age and Sex Detail. Santa Cruz County Probation Department. (2017). Personal Correspondence with program representative.

### **Driving Under the Influence**

### Adult (Ages 18-69) DUI Arrest Rate per 10,000, Santa Cruz County



Source: California Department of Justice. (2016). 2010-2015 OpenJustice.

### Percentage of Adult (Ages 18-69) DUI Arrests by Ethnicity

	2010	2011	2012	2013	2014	2015
Adult Misdemeanor DUI Arrests	1,583	1,256	1,502	1,435	1,372	966
Black	2.0%	1.8%	2.1%	2.4%	1.2%	2.1%
Hispanic	39.9%	37.2%	33.7%	36.0%	36.5%	36.2%
White (Not Hispanic)	53.9%	57.1%	58.3%	56.0%	57.4%	56.7%
Other	4.2%	4.0%	5.9%	5.7%	5.0%	5.0%
Adult Felony DUI Arrests	32	27	27	47	45	36
Black	0.0%	0.0%	0.0%	2.1%	2.2%	0.0%
Hispanic	37.5%	37.0%	40.7%	31.9%	35.6%	52.8%
White (Not Hispanic)	59.4%	59.3%	59.3%	61.7%	62.2%	44.4%
Other	3.1%	3.7%	0.0%	4.3%	0.0%	2.8%
Total Adult DUI Arrests (Misdemeanor & Felony)	1,615	1,283	1,529	1,482	1,417	1,002
Black	2.0%	1.7%	2.1%	2.4%	1.2%	2.0%
Hispanic	39.9%	37.2%	33.8%	35.8%	36.5%	36.8%
White (Not Hispanic)	54.0%	57.1%	58.3%	56.1%	57.5%	56.3%
Other	4.1%	4.0%	5.8%	5.7%	4.8%	4.9%

Source: California Department of Justice. (2016). 2010-2015 OpenJustice.

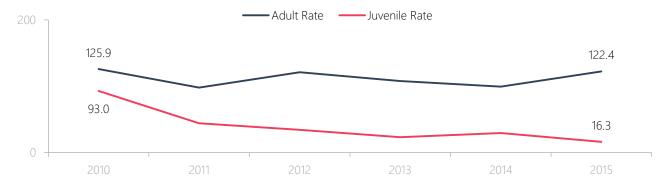
### Juvenile (Ages 10-17) Misdemeanor DUI Arrests by Ethnicity

Santa Cruz County Total Juvenile Misdemeanor DUI Arrests	16	11	25	11	7	8
White (Not Hispanic) Other	9	10	17	5	3	3
Hispanic	4	1	5	6	3	4
Black	1	0	0	0	0	1
	2010	2011	2012	2013	2014	2015

Source: California Department of Justice. (2016). 2010-2015 OpenJustice.

### Alcohol/Drug Arrests

### Adult (Ages 18-69) Drug Arrest Rate per 10,000 and Juvenile (Ages 10-17), Santa Cruz County



Source: California Department of Justice. (2016). 2010-2015 OpenJustice.

### Adult (Ages 18-69) Drug Arrest Characteristics

	2010	2011	2012	2013	2014	2015
Adult Misdemeanor Drug Arrests	1,534	1,039	1,207	1,107	981	1,994
Marijuana	22.2%	2.7%	2.7%	3.8%	2.8%	1.0%
Dangerous Drugs	8.3%	9.0%	17.5%	26.6%	29.6%	18.5%
Other Drug Violations	69.5%	88.4%	79.9%	69.6%	67.7%	80.5%
Adult Felony Drug Arrests	900	870	1,110	965	940	376
Narcotics	43.7%	41.0%	45.8%	38.9%	41.0%	44.1%
Marijuana	11.9%	9.1%	5.7%	2.5%	3.9%	8.2%
Dangerous Drugs	42.1%	49.5%	47.7%	57.6%	54.7%	45.5%
Other Drug Violations	2.3%	0.3%	0.8%	1.0%	0.4%	2.1%
Adult Total Drug Arrests	2,434	1,881	2,317	2,072	1,921	2,370
Narcotics	16.1%	19.0%	21.9%	18.1%	20.0%	7.0%
Marijuana	18.4%	5.7%	4.1%	3.2%	3.3%	2.2%
Dangerous Drugs	20.8%	27.9%	32.0%	41.0%	41.9%	22.7%
Other Drug Violations	44.7%	49.0%	42.0%	37.7%	34.8%	68.1%

Source: California Department of Justice. (2016). 2010-2015 OpenJustice.

### Juvenile (Ages 10-17) Drug Arrest Characteristics

	2010	2011	2012	2013	2014	2015
Juvenile Misdemeanor Drug Arrests	171	65	54	42	45	26
Marijuana	88.3%	76.9%	61.1%	73.8%	62.2%	65.4%
Dangerous Drugs	6.4%	6.2%	13.0%	7.1%	6.7%	11.5%
Other Drug Violations	5.3%	16.9%	25.9%	19.0%	31.1%	23.1%
Juvenile Felony Drug Arrests	49	40	33	16	27	14
Narcotics	20.4%	35.0%	36.4%	37.5%	25.9%	0.0%
Marijuana	71.4%	42.5%	36.4%	31.3%	37.0%	64.3%
Dangerous Drugs	8.2%	22.5%	27.3%	31.3%	37.0%	35.7%
Other Drug Violations	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
Juvenile Total Drug Arrests	220	105	87	58	72	40
Narcotics	4.5%	13.3%	13.8%	10.3%	9.7%	0.0%
Marijuana	84.5%	63.8%	51.7%	62.1%	52.8%	65.0%
Dangerous Drugs	6.8%	12.4%	18.4%	13.8%	33.3%	20.0%
Other Drug Violations	4.1%	10.5%	16.1%	13.8%	NA	15.0%

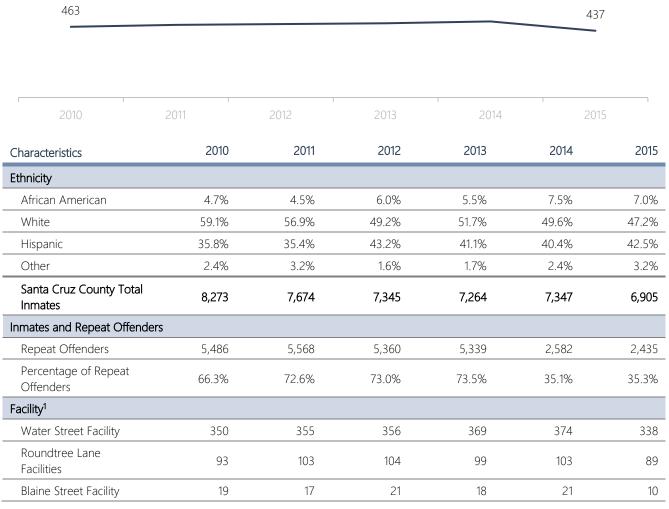
Source: California Department of Justice. (2016). 2010-2015 OpenJustice.

# Number and Percentage of All Bookings That Are Alcohol Related, Santa Cruz County

	2010	2011	2012	2013	2014	2015
Alcohol Related Bookings	5,627	5,810	5,811	5,671	5,934	5,437
Percentage of Alcohol Related Bookings	50.4%	46.5%	45.7%	46.3%	47.3%	46.1%
Total Bookings	11,153	12,488	12,704	12,238	12,560	11,792

Source: Santa Cruz County Sheriff's Office. (2016). Personal Correspondence with program representative.

# Jail Population Characteristics Average Daily Jail Population, Santa Cruz County



Source: Santa Cruz County Sheriff's Office. (2016). Personal Correspondence with program representative.

<sup>&</sup>lt;sup>1</sup>The Water Street Facility figure includes pre-trial sentenced men and women; Blaine Street Facility figure includes sentenced men and women; Roundtree Lane Facility figure includes sentenced men in medium and minimum security.

### Percentage of AB109 Cases by Sex and Ethnicity

Oct. 2011 – Sep. 2016

	·
Sex	
Male	86%
Female	14%
Ethnicity	
White	53%
Latino	36%
Black/African American	8%
Other	3%
Total Cases to date (Since Oct. 2011)	862

Source: Santa Cruz County Probation Department. (2016). Personal Correspondence with program representative.

Note: AB 109 allows for qualifying offenders with no history of violent, serious or registerable sex offenses or other exclusionary offenses to serve their sentences under local custody (in county jails as well as through community-based alternatives such as probation and rehabilitation programs).

### **Number of Sworn Officers by Jurisdiction**

	2010	2011	2012	2013	2014	2015	2016
Capitola Police Department	21	22	21	21	21	21	20
Santa Cruz Police Department	94	94	94	94	94	94	94
Scotts Valley Police Department	20	20	18	20	20	20	20
Watsonville Police Department	66	64	67	62	64	66	67
Santa Cruz County Sheriff's Office (Unincorporated Areas)	140	140	140	144	144	150	160
Santa Cruz County Total	341	340	340	341	343	351	361

Source: All Santa Cruz County Law Enforcement Jurisdictions. (2017).

### **Number of Sworn Officers by Ethnicity**

	2015	2016
Capitola Police Department	21	20
Caucasian	47.6%	55.0%
Hispanic	38.1%	35.0%
Asian	9.5%	5.0%
Black	4.8%	5.0%

Source: All Santa Cruz County Law Enforcement Jurisdictions. (2017).

Note: Santa Cruz Police Department, Scotts Valley Police Department, Watsonville Police Department, and Santa Cruz County Sheriff's Office do not track ethnicity of sworn officers.

#### Officers per Capita by Jurisdiction

	2010	2011	2012	2013	2014	2015	2016
Capitola Police Department	1:486	1:451	1:474	1:478	1:476	1:480	1:507
Santa Cruz Police Department	1:635	1:652	1:658	1:667	1:668	1:679	1:687
Scotts Valley Police Department	1:595	1:579	1:645	1:587	1:590	1:603	1:606
Watsonville Police Department	1:796	1:800	1:768	1:837	1:811	1:796	1:788
Santa Cruz County Sheriff's Office (Unincorporated Areas)	1:959	1:928	1:932	1:915	1:922	1:900	1:849
Santa Cruz County Average	1:798	1:776	1:780	1: <b>786</b>	1: <b>785</b>	1: <b>779</b>	1:763

Source: All Santa Cruz County Law Enforcement Jurisdictions. (2017). California Department of Finance, *E-4 Population Estimates for Cities, Counties and the State, 2010-2016.* 

# **First Responders**

First responders are the first to arrive and provide aid to victims on the scene of an emergency, such as an accident, natural disaster, or terrorist attack. First responders typically include police officers, firefighters, paramedics, emergency medical technicians, and search-and-rescue personnel. They are trained to deal with a wide array of potential medical emergencies.

### Average Law Enforcement Response Time for Priority 1 (In Minutes: Seconds) by Jurisdiction

	2010	2011	2012	2013	2014	2015	2016
Capitola Police Department	3:48	3:54	3:47	3:42	3:59	4:38	4:17
Santa Cruz Police Department	4:33	4:40	5:00	5:00	5:11	5:21	5:14
Scotts Valley Police Department	2:56	2:48	2:36	2:33	2:02	2:05	2:54
Watsonville Police Department	4:09	4:30	4:30	4:14	4:13	4:52	4:37
Santa Cruz County Sheriff's Office (Unincorporated Areas)	8:52	9:16	9:42	10:13	9:38	9:58	10:31

Source: Santa Cruz Consolidated Emergency Communications Center and Scotts Valley Police Department. (2017).

Note: Priority 1 is defined as a call for assistance that involves a person or an accident.

Code 3 Average Response Time for Emergency Calls (In Minutes: Seconds) by Fire District

	2010	2011	2012	2013	2014	2015	2016
Aptos/La Selva	5:22	5:19	5:28	5:33	5:39	5:57	5:33
Ben Lomond	6:15	5:48	5:59	5:53	5:57	6:05	5:56
Boulder Creek	6:34	6:43	6:41	6:26	6:32	7:08	7:07
Branciforte	7:43	7:44	7:29	6:55	6:55	7:21	8:11
Central	4:35	4:46	4:39	4:45	4:55	5:21	5:19
Felton	5:46	5:58	5:55	5:54	5:55	6:41	6:54
Santa Cruz	4:18	3:00	4:09	4:16	4:15	4:38	4:27
Scotts Valley	5:00	4:56	4:00	5:03	5:08	5:42	5:24
Watsonville	4:17	4:24	4:31	4:44	4:46	5:28	5:05
Zayante	7:45	8:44	8:27	8:02	8:18	9:35	9:34
Urban Areas - Santa Cruz County	5:45	5:44	5:53	6:07	6:13	7:08	6:22
Rural Areas - Santa Cruz County	9:44	9:36	10:04	9:25	9:42	12:52	10:44

Source: Santa Cruz Consolidated Emergency Communications Center. (2017). Personal Correspondence with program representative.

Note: Code 3 is red lights and siren emergencies.

# Number of Fire and Medical Related Calls by Fire District

Fire Related Calls 5,767 6,094 5,943 6,136	6.630 6.6	
7/10 O/05 1 5/5 15 O/150	6,630 6,5	6,607
Aptos/La Selva 678 743 671 620	662 6	666 666
Ben Lomond 133 141 122 119	127	112 123
Boulder Creek 269 269 268 233	288 2	233 234
Branciforte 89 79 69 58	86	49 77
Central 1,163 1,205 1,103 1,192	1,215 1,2	228 1,260
Felton         228         217         178         233	265	98 202
Santa Cruz 1,503 1,580 1,702 1,873	2,096 2,2	232 2,225
Scotts Valley 464 519 455 465	481	471 479
Watsonville 1,171 1,251 1,302 1,271	1,284 1,2	298 1,260
Zayante 69 90 73 72	126	101 81
Medical Related Calls 15,810 15,824 17,034 17,141 18	8,574 19,6	662 20,120
Aptos/La Selva 1,262 1,344 1,479 1,290	1,491 1,5	44 1,542
Ben Lomond         195         223         215         212	255 2	219 284
Boulder Creek 401 473 486 521	491 5	22 498
Branciforte 46 39 52 66	66	63 52
Central 3,402 3,415 3,620 3,556	4,122 4,3	59 4,477
Felton         291         333         392         387	379 3	47 394
Santa Cruz 5,551 5,387 6,067 6,329	6,641 7,	7,128
Scotts Valley 1,149 1,194 1,182 1,182	1,359 1,3	1,374
Watsonville 3,422 3,311 3,457 3,517	3,676 4,0	30 4,247
Zayante 91 105 84 81	94	101 124

Source: Santa Cruz Consolidated Emergency Communications Center. (2017). Personal Correspondence with program representative.

#### Violence



Family violence is when someone uses abusive behavior to control and/or harm a member of their family, or someone with whom they have an intimate relationship. 142 Family violence includes many different forms of physical, sexual, emotional, and financial abuse, as well as neglect carried out by family members or intimate partners. Family violence can have

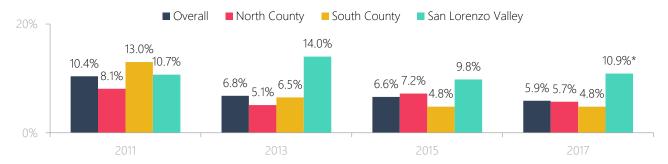
serious-and sometimes fatal consequences for victims and for those who witness the violence.

Child abuse and neglect are found in families across the social and economic spectrum. The effects of maltreatment and associated stress impact brain development and can also harm the progression of the nervous and immune systems; moreover, physical abuse results in injuries including burns and broken bones. Children who experience maltreatment are more likely to engage in high-risk behaviors, exhibit issues such as eating disorders and depression, and can also have trouble forming healthy relationships as adults. 144

### **Family Violence**

Between 2011 (10.4%) and 2017 (5.9%), there has been a 43% decline in overall survey respondents who have reported that any of their family members or friends in Santa Cruz County had experienced domestic violence or intimate partner violence in the last year. Regionally, however, San Lorenzo Valley survey respondents (10.9%) were significantly more likely to respond "Yes" to this survey question than North County (5.7%) and South County (4.8%) survey respondents.

# The Have any of your family members or friends in Santa Cruz County experienced domestic violence or intimate partner violence in the last year? (Respondents answering "Yes") By Region



2017 - Overall n: 781; North County n: 270; South County n: 265; San Lorenzo Valley n: 246.

Source: Applied Survey Research. (2017). 2011-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

<sup>\*</sup>Significance testing: Respondents from San Lorenzo Valley were significantly more likely to respond "yes" to having family members or friends in the County who have experienced domestic or intimate partner violence in the last year.

<sup>&</sup>lt;sup>142</sup> Department of Justice, Government of Canada. Accessed September 2016 from http://www.justice.gc.ca/eng/cj-jp/fv-vf/about-apropos.html.

<sup>&</sup>lt;sup>143</sup> Centers for Disease Control and Prevention. *Understanding Child Maltreatment Fact Sheet*. 2014. Available at: http://www.cdc.gov/violenceprevention/pdf/understanding-cm-factsheet.pdf. Accessed November 20, 2015

<sup>&</sup>lt;sup>144</sup> Centers for Disease Control and Prevention, Injury Prevention and Control: A Division of Violence Prevention. Child Maltreatment: Consequences. *Centers for Disease Control and Prevention* 2014. Available at: http://www.cdc.gov/violenceprevention/childmaltreatment/consequences.html. Accessed November 20, 2015.

### Rate of Domestic Violence Calls per 1,000 Population and Number of Domestic Violence Calls



Source: California Department of Justice. (2017). 2010-2016 California Criminal Justice Profile. California Department of Finance (2016). E-4 Population Estimates for Cities. Counties and the State. 2000-2020, with 2000 and 2010 Census Counts.

<sup>&</sup>lt;sup>1</sup>The total of all jurisdictions may not equal Santa Cruz County total. The County total also includes the California Highway Patrol, U.C. Santa Cruz, Santa Cruz Mountains Department of Parks and Recreation and the Union Pacific Railroad.

#### Number of Domestic Violence Cases with Weapons by Jurisdiction

	2010	2011	2012	2013	2014	2015	2016
Capitola Police Department	32	23	27	43	21	33	17
Santa Cruz Police Department	32	31	21	60	53	36	38
Scotts Valley Police Department	1	1	4	5	4	4	5
Watsonville Police Department	32	29	32	21	41	30	33
Santa Cruz County Sheriff's Office (Unincorporated Areas)	58	68	65	63	73	138	82
Santa Cruz County Total Number of Cases <sup>1</sup>	155	160	151	199	198	244	183

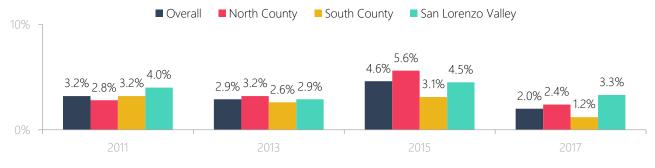
Source: California Department of Justice. (2017). 2010-2016 OpenJustice. California Department of Finance (2016). E-4 Population Estimates for Cities, Counties and the State, 2000-2020, with 2000 and 2010 Census Counts.

<sup>1</sup>The total of all jurisdictions may not equal Santa Cruz County total. The county total also includes the California Highway Patrol, U.C. Santa Cruz, Santa Cruz Mountains Department of Parks and Recreation and the Union Pacific Railroad.

#### **Elder Abuse**

Overall survey respondents who have reported that any of their family members or friends in Santa Cruz County had experienced elder abuse or neglect in the last year decreased in 2017 to 2.0% down from 4.6% in 2015.

# The Have any of your family members or friends in Santa Cruz County experienced elder abuse or neglect in the last year? (Respondents answering "Yes") By Region



2017 - Overall n: 782; North County n: 269; South County n: 267; San Lorenzo Valley n: 247.

Source: Applied Survey Research. (2017). 2011-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

	FY 2010-11	FY 2011-12	FY 2012-13	FY 2013-14	FY 2014-15	FY 2015-16	FY 2016-17
Number of Referrals to Adult Protective Services	552	496	716	555	708	992	1,299
Number of Elder Cases that are Investigated	338	317	424	422	511	635	717
Number of Dependent Adult Cases that are Investigated	124	104	176	126	177	210	243
Santa Cruz County Total Number of Cases Investigated	462	421	600	548	688	845	960

Source: Santa Cruz County Human Services Department. (2017). Personal Correspondence with program representative.

# Number of Cases of Financial Abuse among Elders (Ages 65+) and Dependent Adults (Ages 18-64), Santa Cruz County

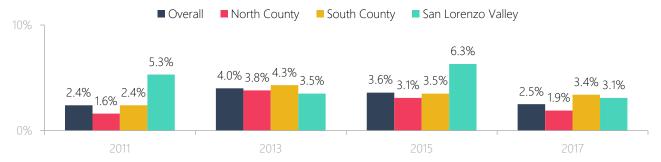


Source: County of Santa Cruz, Human Services Department (2017). Personal Correspondence with program representativ Note: Total reflects confirmed, inconclusive, and unfounded cases. Unfounded cases are not displayed in chart.

#### **Child Abuse**

Overall survey respondents who have reported that any of their family members or friends in Santa Cruz County had experienced child abuse or neglect in the last year has declined to 2.5% in 2017 down from 4.0% in 2013.

# The Have any of your family members or friends in Santa Cruz County experienced child abuse or neglect in the last year? (Respondents Answering "Yes") By Region



2017 - Overall n: 787; North County n: 270; South County n: 269; San Lorenzo Valley n: 248.

Source: Applied Survey Research. (2017). 2011-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

# Rate of Substantiated Cases of Child Abuse per 1,000 Children (Ages 0-17)



Source: Needell, B. et al. (2017). 2010-2016 *Child Welfare Services Reports for California*, University of California at Berkeley Center for Social Services Research

Note: A child is counted only once per year, in category of highest severity.

Note: Reduce nonfatal child maltreatment is an indicator per Healthy People 2020. Indicator has a target of 8.5 nonfatal child maltreatment per 1,000 population (<18 years) with a desired decrease associated with the indicator.

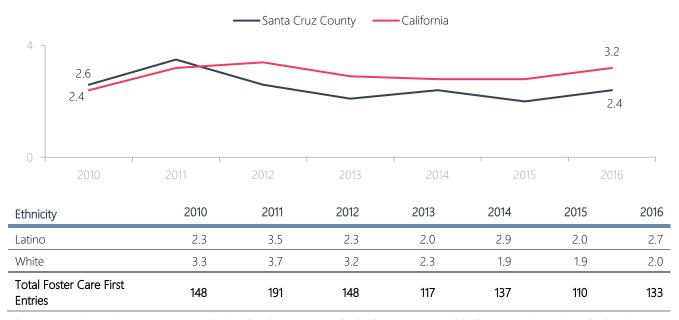
<sup>&</sup>lt;sup>1</sup> For more information regarding allegation types, visit: https://www.childwelfare.gov/pubPDFs/define.pdf

# **Child Entry into Foster Care**

Children who are victims of child abuse or neglect may be placed in foster care by the court. Foster care is care for children ages birth through 17 who are removed from their parents' or guardians' home and placed in a different setting, such as a family foster care home, relatives' home, group residential home, or an institutional care facility. It is generally held that the child's best interests are served by being with their parents, and there is often an effort to address the issues at home so as to reunite the family.<sup>145</sup>

Foster care is meant to provide temporary living arrangements for children who cannot safely remain at home due to circumstances such as inadequate housing, child maltreatment, or neglect. <sup>146</sup> Placements within foster care are meant to be short term with the intent of moving the child into a place of permanence, which can be with birth family members or an adoptive family. <sup>147</sup> Unfortunately, many children stay in foster care for extended periods of time and often go through multiple placements during this tenure. According to the Administration for Children and Families, more than one-quarter (28%) of children in foster care have been in the system for 24 months or more. <sup>148</sup>

#### Rate of First Entries into Foster Care per 1,000 Children (Ages 0-17)



Source: Needell, B. et al. (2017). 2010-2016 *Child Welfare Services Reports for California*, University of California at Berkeley Center for Social Services Research.

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<sup>&</sup>lt;sup>145</sup> Department of Health and Human Services, Administration for Children and Families. (2010). Family Preservation Services. Retrieved 2010 from http://www.childwelfare.gov/supporting/preservation/

<sup>&</sup>lt;sup>146</sup> Foster Care. *Child Trends* 2014. Available at: http://www.childtrends.org/?indicators=foster-care. Accessed November 19, 2015.

<sup>&</sup>lt;sup>147</sup> Bill Wilson Center, *Adoption/Foster Care Services*. 2015. Available at: http://www.billwilsoncenter.org/services/all/foster.html. Accessed November 19, 2015.

<sup>&</sup>lt;sup>148</sup> U.S. Department of Health and Human Services, Administration on Children, Youth and Families, Children's Bureau (2015) *The AFCARS Report, Preliminary FY 2014 Estimates as of July 2015, No. 22.* Available at: http://www.acf.hhs.gov/sites/default/files/cb/afcarsreport22.pdf. Accessed November 19, 2015

#### Exit Status after 12 months in Foster Care

	2010	2011	2012	2013	2014	2015	2016
Reunified	58.1%	53.5%	47.8%	32.9%	48.5%	51.1%	53.9%
Adopted	29.5%	29.9%	32.4%	45.7%	43.2%	35.6%	24.1%
Kin-GAP	0.0%	3.2%	10.3%	9.1%	1.5%	3.7%	3.5%
Other Guardianship	0.8%	2.5%	1.5%	3.0%	1.5%	0.0%	1.4%
Emancipated	10.9%	9.6%	6.6%	4.9%	3.0%	5.2%	3.5%
Other	0.8%	1.3%	1.5%	4.3%	2.3%	4.4%	13.5%

Source: Needell, B. et al. (2017). 2010-2016 *Child Welfare Services Reports for California*, University of California at Berkeley Center for Social Services Research.

#### **Natural Environment**

#### Concern for the Environment

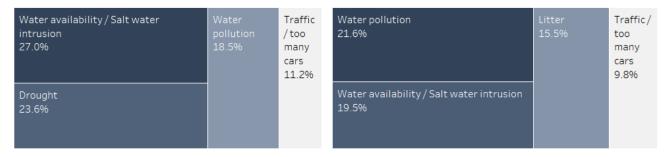
Community concerns can empower advocacy and grassroots organizations to create change around public health and safety issues. Therefore, it is important to identify which issues are most relevant to residents so that progressive planning for change can be implemented.<sup>149</sup>

Just over one-fifth (21.6%) of overall survey respondents reported water pollution as their top concern regarding the natural environment in Santa Cruz County, followed by water availability/salt water intrusion (19.5%), and litter (15.5%). Regionally, water pollution was mirrored as the top concern by North County (21.4%) and San Lorenzo Valley (24.3%) survey respondents, whereas litter was the top concern for South County survey respondents (21.5%). In 2017, the CAP survey asked respondents what actions they had taken in the past 12 months to protect or take care of our local watersheds (our rivers/oceans). Sixty-one percent (61.2%) of CAP respondents reported that they had taken independent action to learn more about local wildlife, birds or fish, followed 58.1% who installed higher efficiency water fixtures in their homes, and 57.7% who reduced stormwater and irrigation runoff from their yards.

<sup>149</sup> Minkler, M. (2005). Community Organizing and Community Building for Health, (2nd Ed). Rutgers, The State University of New Jersey.

# ★ What one thing concerns you the most about the natural environment in Santa Cruz County? (Top 4 Responses)

2015 2017



2017 n: 665 Respondents offering 889 responses

Source: Applied Survey Research. (2017). 2015-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

Note: This was an open-ended survey question which allows the respondent to provide any answer. Due to variance in coding, data should be compared by top responses rather than tracking individual responses over time.

Note: Multiple response question totals may not add up to 100%

### ★ What one thing concerns you the most about the natural environment in Santa Cruz County? (Top 4 Responses) By Region – 2017

# North County South County San Lorenzo Valley



2017 - North County n: 234 survey respondents offering 314 responses; South County n: 214 survey respondents offering 287 responses; San Lorenzo Valley n: 226 survey respondents offering 298 responses.

Source: Applied Survey Research. (2017). 2013-2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

Note: Multiple response question totals may not add up to 100%.

\*Significance testing: Respondents from San Lorenzo Valley and North County are significantly more likely to be concerned about no preservation of natural environment/ wildlife than residents in South County.

### **Environmental Stewardship**

■ What actions have you taken in the past 12 months to protect or take care of our watersheds – our river/ocean? (Top 5 Responses) – 2017

61.2% 58.1% 57.7% habitat water restoration, or active volunteer day system	Learned about local wildlife, birds or fish on my own 61.2%	Installed higher efficiency water fixtures inside my home 58.1%	Reduced stormwater and irrigation run-off from my yard 57.7%	restoration, or active volunteer day	harvest-
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2017 n: 682 Respondents offering 1,703 responses.

Source: Applied Survey Research. (2017). 2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

# ☐ In the last 12 months have you done any of the following actions to protect or take care of our watersheds - our river/ocean? (Top 4 Responses) By Region - 2017

#### South County San Lorenzo Valley North County Learned about local Installed higher Reduced Learned about Installed higher Learned about stormwater and wildlife, birds or efficiency water local wildlife, birds efficiency water local wildlife, birds fish on my own fixtures inside my irrigation run-off or fish on my own fixtures inside my or fish on my own 61.7% home from my yard 61.1% 58.6% 59.1% 63.6% 64.0% Reduced stormwater Attended a Reduced stormwater and Attended a Installed higher efficiency Attended cleanup event, cleanup from my yard habitat water fixtures inside my a cleanup event, 54.2% restoration, or home event, habitat habitat active restoration, volunteer day 22.4% or active 34.9% volunteer 29.6%

2017 - North County n: 236 offering 605 responses; South County n: 225 respondents offering 532 responses; San Lorenzo Valley n: 232 respondents offering 607 responses.

Source: Applied Survey Research. (2017). 2017 Santa Cruz County Community Assessment Project, Telephone Survey. Watsonville, CA.

\*Significance testing: Respondents in San Lorenzo Valley were significantly more likely than North or South County respondents to have installed a greywater irrigation system in the last 12 months.

#### **Protected Land**

Protected lands can take on many different forms, such as national parks, wilderness areas, community conserved areas, and nature reserves. Protected lands receive protection because of their recognized natural, ecological, and/or cultural values. Protected areas are essential for biodiversity conservation, often providing habitat and protection from hunting for threatened and endangered species. More than instruments for conserving nature, protected areas are vital to respond to some of today's most pressing challenges, including food and water security, disaster risk reduction and climate change. 150

#### Protected Lands by Access Type, Santa Cruz County - 2017



Source: The Land Trust of Santa Cruz County. Personal Correspondence with program representative. (2017). Map built by Applied Survey Research in Tableau.

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<sup>&</sup>lt;sup>150</sup> IUCS Work Parks Congress. What Are Protected Areas. Accessed September 2016 from http://worldparkscongress.org/about/what\_are\_protected\_areas.html#.

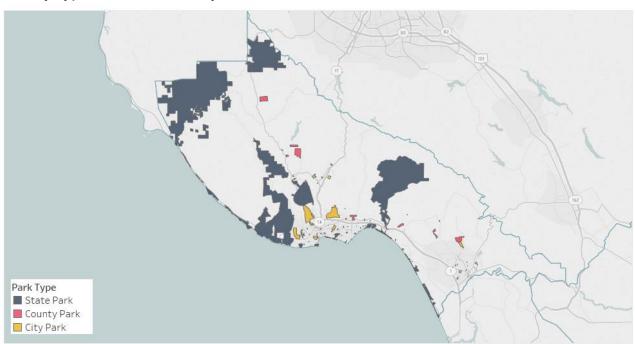
### Protected Lands by Acreage, Santa Cruz County

	2016	2017	% of Total County Land, 2017
Sand hills	270	330	0.1%
Access	702	813	0.3%
Wildlands	1,877	1,500	0.5%
Farmland	1,575	1,679	0.6%
Grazing Land	684	815	0.3%
Riparian Corridor or Right of Way Easement	8	4.24	<0.1%
Total Land Trust Protected Lands	5,116	5,116	1.8%
San Vicente Redwoods <sup>1</sup>	8,500	8,500	3.0%
Total Protected <sup>2</sup>	13,616	14,329	5.0%

Source: The Land Trust of Santa Cruz County. (2017). Personal Correspondence with program representative.

Note: Approximately 270 acres of wetlands and farmlands are being converted to public access trails over the next 5 years.

### Parks by Type, Santa Cruz County - 2017



Source: Santa Cruz County GIS Portal. (2017). Map built by Applied Survey Research in Tableau.

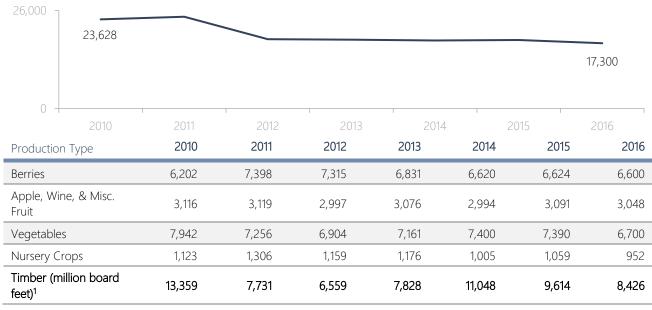
<sup>&</sup>lt;sup>1</sup>San Vicente Redwoods are protected through a partnership with the Land Trust of Santa Cruz County and three other Land Trusts.

<sup>&</sup>lt;sup>2</sup> Total acreage source: U.S. Census Bureau, QuickFacts, April 2010 Census. Santa Cruz County's total acreage is 284,909.

# **Farming & Local Produce**

Santa Cruz County agriculture contributes a total of \$1.46 billion to the local economy, including \$898 million in direct economic output; \$563 million in additional economic output in the form of expenditures by agriculture companies and their employees; and provides 11,085 jobs in the Santa Cruz County economy. Many value-added and organically produced commodities are grown in the Santa Cruz region with the number one crop being strawberries followed by raspberries. Organic farming and local farmers' markets are important facets of Santa Cruz County's agricultural community meeting the demand for more sustainable farming practices and access to affordable, locally grown food.

# Farmland Acreage Farmland Acreage, Santa Cruz County



Source: Santa Cruz County Agricultural Commissioner. (2017). 2010-2016 Santa Cruz County Crop Report.

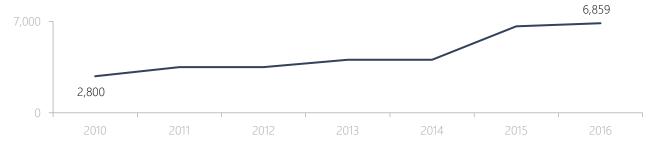
Note: Wild hav and pasture are no longer reported in the Crop Report

Timber is not included in total farmland acres (see chart above) because timber is measured in million board feet, which is not comparable.

<sup>&</sup>lt;sup>151</sup> Santa Cruz County Agricultural Commissioner, 2013. Economic Contributions of Santa Cruz County Agriculture

<sup>&</sup>lt;sup>152</sup> Santa Cruz County Agricultural Commissioner. 2015. Santa Cruz County 2015 Crop Report.

# Organic Farming Organic Farmland in Acres, Santa Cruz County



Source: Santa Cruz County Agricultural Commissioner. (2017). 2010-2016 Santa Cruz County Crop Report.

Note: 2015 and 2016 acreage include organic pasture.

#### Number of Certified Organic Producers (Annual Sales More than \$5,000) by County

	2010	2011	2012	2013	2014	2015
Monterey	80	79	80	142	141	161
San Benito	45	54	56	78	76	86
Santa Cruz	73	75	87	107	105	115
Monterey Bay Region (all 3 counties)	198	208	223	328	322	362

Source: California Department of Food and Agriculture, State Organic Program, Inspection Compliance Branch. (2016). *Personal Correspondence with program representative*.

Note: Every person engaged in the production or handling of raw agricultural products sold as organic, retailers that are engaged in the production of products sold as organic, and retailers that are engaged in the processing (as defined by the NOP) of products sold as organic, shall register with the California State Organic Program. If the expected organic gross sales exceed \$5.000, certification is required.

Note: 2016 data unavailable at time of report deadline.

#### Total Organic Farm Gross Sales (In Millions) by County

	2010	2011	2012	2013	2014	2015	2016
Monterey	\$169.0	\$170.4	\$182.7	\$214.4	\$277.3	\$335.1	\$365.2
San Benito	NA	NA	NA	\$81.0	\$102.6	\$111.3	\$93.2
Santa Cruz	\$26.1	\$27.0	\$65.0	\$90.0	\$118.9	\$113.6	\$115.5
Monterey Bay Region (all 3 counties)	\$195.1	\$197.4	\$247.7	\$385.4	\$498.8	\$560.0	\$574.0

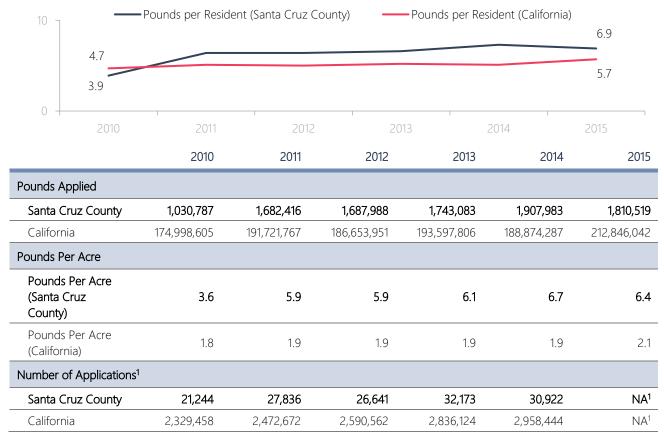
Source: County Agricultural Commissioner. (2017). 2010-2016 Santa Cruz, Monterey, San Benito, County Crop Reports.

Note: Information on San Benito's Organic Farm Gross Sales was unavailable 2010-2012.

#### Pesticide Use

Pesticide use and applications may be attributed to a variety of factors, including changes in planted acreage, crop plantings, pest pressures, and weather conditions. In addition, attempts at replacing toxic pesticides used at one pound per acre with less hazardous pest management methods require the use of several pounds per acre. This can change the number of applications or amount of pounds used without indicating an increased reliance on pesticides.

#### Pesticide Use



Source: Department of Pesticide Regulation. (2017). 2015 Annual Pesticide Use Report. Sacramento, CA. U.S. Department of Commerce. (2015). U.S. Census Bureau, State and County QuickFacts.

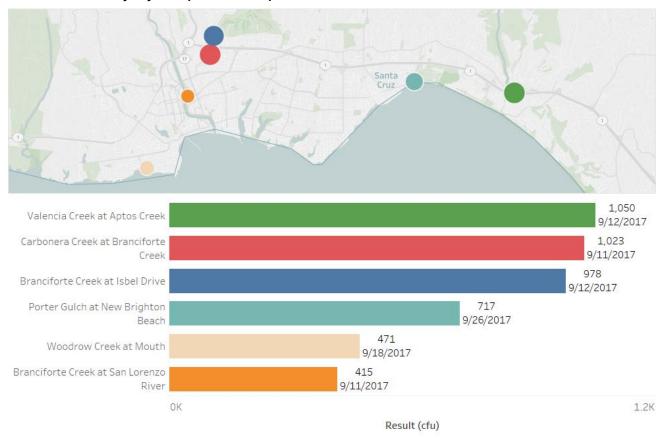
Note: These data do not include over-the-counter pesticide sales for home and business use.

<sup>&</sup>lt;sup>1</sup>Total number of pesticide applications are no longer included in the annual totals. These data were not consistently reported. Previous years data were reported for agricultural applications only.

# **Health of County Waterways**

For over 30 years, Santa Cruz County has been working to protect the region's water sources and has been collecting water samples from local creeks, lagoons, and beaches.

# Creeks and Lagoons that *Exceeded* State and County Body Contact Standards<sup>1</sup> for E. coli<sup>2</sup> Levels, Santa Cruz County, by Sample Date (September, 2017)

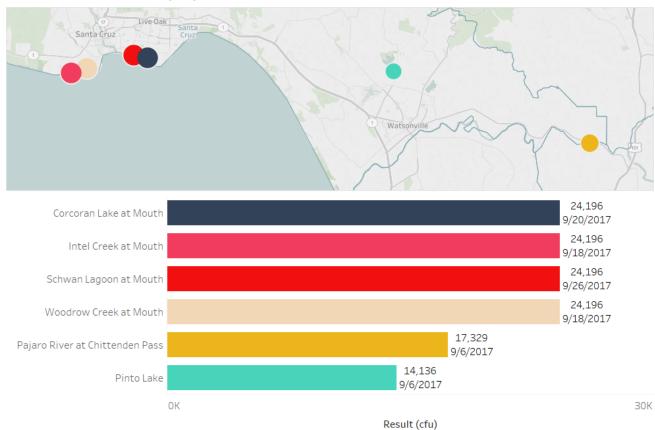


Source: Santa Cruz County Water Quality Reports. (September, 2017). Retrieved from http://gis.co.santa-cruz.ca.us/PublicWaterQuality/. Map built by Applied Survey Research in Tableau.

<sup>&</sup>lt;sup>1</sup>The maximum allowable level of bacteria is 400 colony forming units (cfu) per sample.

<sup>&</sup>lt;sup>2</sup> E. coli is found in animal feces and makes its way into our lakes and ponds through rainwater runoff. People who ingest E. coli or related bacteria by swallowing water can experience stomach cramps and diarrhea. Many public swimming areas are monitored for E. coli, and beaches are closed if the number of E. coli colonies is too high.

# Creeks and Lagoons that *Exceeded* State and County Body Contact Standards<sup>1</sup> for Total Coliform<sup>2</sup> Levels, Santa Cruz County, by Sample Date (September, 2017)



Source: Santa Cruz County Water Quality Reports. (September, 2017). Retrieved from http://gis.co.santa-cruz.ca.us/PublicWaterQuality/. Map built by Applied Survey Research in Tableau.

<sup>&</sup>lt;sup>1</sup>The maximum allowable level of total coliform is 10,000 cfu per 100ml.

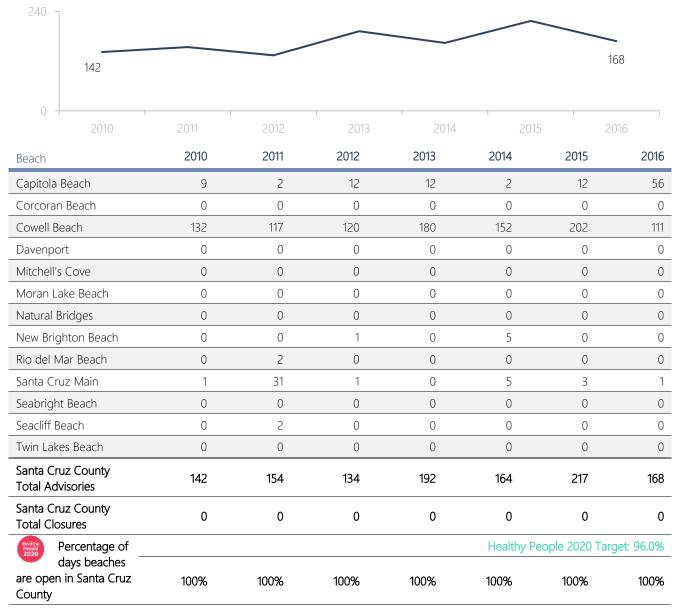
<sup>&</sup>lt;sup>2</sup> Total coliform are a commonly used bacterial indicator of sanitary quality of water. Coliforms are easy to culture and their presence is atypically indicative that other pathogenic organisms may be present.

# **Health of County Beaches**



A swim advisory is issued when there are elevated bacterial levels in the water and it is recommended that individuals not have contact with the water.

#### Swim Advisories (Number of Days), Santa Cruz County



Source: Santa Cruz County Environmental Health Services, Water Resources Division. (2017). *Personal Correspondence with program representative*. Note: Advisories to not make contact with beach water are due to elevated bacterial levels.

Note: Four waterflow deltas (San Lorenzo Rivermouth, Schwan Lagoon, Soquel Creek, and Aptos Creek) have permanent postings, and Neary Lagoon has a seasonal posting during winter

Note: Closures are water contact prohibitions due to sewage spills

Note: Increase the proportion of days that beaches are open and safe for swimming is an indicator per Healthy People 2020. Indicator has a target of 96.0% of beaches are open and safe for swimming (percent of days during beach season) with a desired increase associated with the indicator. Santa Cruz County data shown in table represents all seasons.

# Beach Report Card (Percentage of Days Receiving a "C" or Better) by Season Type, Santa Cruz County

	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17
Summer Dry	77%	85%	93%	85%	92%	85%
Winter Dry	99%	91%	100%	85%	100%	92%
Wet Weather	92%	58%	93%	76%	53%	77%

Source: Heal the Bay. (2017). Beach Report Card, 2011-2017.

Note: Grades refer to the possibility of getting sick from contaminants from swimming at the beach for 1 day. The higher the grade, the lower the chance of getting sick. Beach quality was measured at 13 locations in Santa Cruz County.

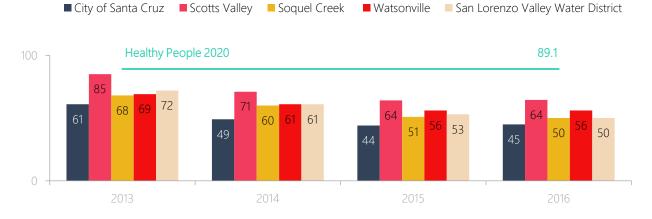
#### Water Use



Fresh, clean water is a limited resource. Droughts further limit access to clean and fresh water. Water efficiency is the smart use of water resources through water-saving technologies and steps that can be taken by residents and employers. Using water efficiently saves money,

energy, benefits the environment, and will help ensure reliable water supplies today and for future generations.<sup>153</sup>

#### Residential<sup>1</sup> Water Use Gallons per customer per day (GPCD) <sup>2</sup>



Department or District	2013	2014	2015	2016
City of Santa Cruz Water Department	61	49	44	45
Scotts Valley Water District	85	71	64	64
Soquel Creek Water District	68	60	51	50
Watsonville City Water Department	69	61	56	56
San Lorenzo Valley Water District <sup>3</sup>	72	61	53	50

Source: Scotts Valley Water District, *Personal Correspondence from program representative*. (2017). City of Santa Cruz Water Department, *Personal Correspondence from program representative*. (2017). Soquel Creek Water District, *Personal Correspondence from program representative*. (2017). Watsonville City Water Department, *Personal Correspondence from program representative*. (2017). San Lorenzo Valley Water District, *Personal Correspondence from program representative*. (2017).

Note: Reduce per capita domestic water withdrawals with respect to use and conservation is an indicator per Healthy People 2020. Indicator has a target of 89.1 gallons of domestic water usage per capita with a desired decrease associated with the indicator.

<sup>&</sup>lt;sup>1</sup> Residential includes all single and multi-family residential consumption, including residential landscape consumption.

<sup>&</sup>lt;sup>2</sup> GPCD is gallons per capita per day. The State Water Board recommends calculating residential gallons per capita per day (R-GPCD) by multiplying total monthly potable water production (TMP) by percent residential use (PRU) by unit conversion factor (C) and dividing by total population served (TPS).

<sup>&</sup>lt;sup>3</sup> San Lorenzo Valley Water District's GPCD is calculated using an estimate of 3 people per water connection

<sup>&</sup>lt;sup>153</sup> United States Environmental Protection Agency. Water Sense. Accessed September 2016 from https://www3.epa.gov/watersense/our\_water/why\_water\_efficiency.html.

#### **Total Residential Water Use (Millions of Gallons)**

Jurisdiction	2013	2014	2015	2016
City of Santa Cruz Water Department	1,916.2	1,528.1	1,372.9	1,420.6
San Lorenzo Valley Water District	552.3	472.1	411.4	415.4
Scotts Valley Water District	326.1	274.1	246.0	247.3
Soquel Creek Water District	1,006.4	880.5	746.8	731.5
Watsonville City Water Department	1,658.2	1,464.6	1,351.5	1,341.6

Source: Scotts Valley Water District, *Personal Correspondence from program representative*. (2017). City of Santa Cruz Water Department, *Personal Correspondence from program representative*. (2017). San Lorenzo Valley Water District, *Personal Correspondence from program representative*. (2017). Soquel Creek Water District, *Personal Correspondence from program representative*. (2017). Watsonville City Water Department, *Personal Correspondence from program representative*. (2017).

#### Total Commercial, Industrial, and Institutional (CII) Water Use (Millions of Gallons)

Jurisdiction	2013	2014	2015	2016
City of Santa Cruz Water Department	1,100.4	892.5	856.3	847.1
San Lorenzo Valley Water District	81.0	88.1	67.3	70.0
Scotts Valley Water District	108.7	91.4	82.0	82.4
Soquel Creek Water District	260.2	237.7	190.0	191.0
Watsonville City Water Department	1,658.2	1,464.6	1,351.5	1,341.6

Source: Scotts Valley Water District, *Personal Correspondence from program representative*. (2017). City of Santa Cruz Water Department, *Personal Correspondence from program representative*. (2017). San Lorenzo Valley Water District, *Personal Correspondence from program representative*. (2017). Soquel Creek Water District, *Personal Correspondence from program representative*. (2017). Watsonville City Water Department, *Personal Correspondence from program representative*. (2017).

#### Total Agricultural Water Use (Millions of Gallons)

Jurisdiction	2013	2014	2015	2016
City of Santa Cruz Water Department	24.4	21.4	34.0	26.1
San Lorenzo Valley Water District	0	0	0	0
Scotts Valley Water District	0	0	0	0
Soquel Creek Water District	0	0	0	0
Watsonville City Water Department	276.0	301.0	281.0	204.1

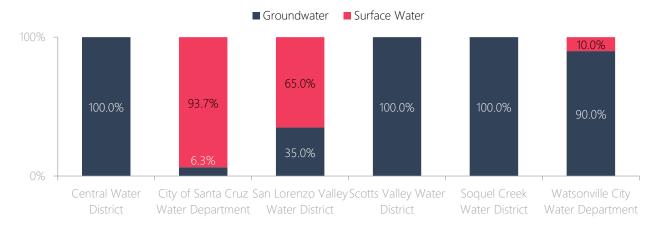
Source: Scotts Valley Water District, *Personal Correspondence from program representative*. (2017). City of Santa Cruz Water Department, *Personal* Correspondence from program representative. (2017). San Lorenzo Valley Water District, *Personal Correspondence from program representative*. (2017). Soquel Creek Water District, *Personal Correspondence from program representative*. (2017). Watsonville City Water Department, *Personal* Correspondence from program representative. (2017).

#### **Total All Water Use (Millions of Gallons)**

Jurisdiction	2013	2014	2015	2016
City of Santa Cruz Water Department	3,040.9	2,442.0	2,263.2	2,293.8
San Lorenzo Valley Water District	633.4	560.2	478.7	485.5
Scotts Valley Water District	434.8	365.4	328.0	329.7
Soquel Creek Water District	1,266.5	1,118.2	936.8	922.6
Watsonville City Water Department	2,707.6	2,449.4	2,238.6	2,165.9

Source: Scotts Valley Water District, Personal Correspondence from program representative. (2017). City of Santa Cruz Water Department, Personal Correspondence from program representative. (2017). San Lorenzo Valley Water District, Personal Correspondence from program representative. (2017). Soquel Creek Water District, Personal Correspondence from program representative. (2017). Watsonville City Water Department, Personal Correspondence from program representative. (2017).

#### Sources of Water, 2016, Selected Water Purveyors, Santa Cruz County



Source: Central Water District, Personal Correspondence from program representative. (2017). Scotts Valley Water District, Personal Correspondence from program representative. (2017). City of Santa Cruz Water Department, Personal Correspondence from program representative. (2017). San Lorenzo Valley Water District, Personal Correspondence from program representative. (2017). Soquel Creek Water District, Personal Correspondence from program representative. (2017). Watsonville City Water Department, Personal Correspondence from program representative. (2017).

Note: Groundwater refers to wells; surface water refers to creeks, rivers, and reservoir.

#### **Waste Reduction**

Solid waste refers to trash, refuse, sludges, and other discarded solid materials resulting from residential activities, and industrial and commercial operations.<sup>154</sup> Waste can be reduced by reducing, reusing, and recycling materials. For example, household waste can be reduced by learning to compost at home, using rechargeable batteries, having yard sales, and buying reusable mops, rags and sponges.<sup>155</sup>

**Total Annual Tons of Waste Disposal by Jurisdiction** 

	2010	2011	2012	2013	2014	2015
Capitola	8,083	8,049	7,881	7,790	7,556	8,307
Santa Cruz	47,129	49,702	46,380	49,672	46,788	50,949
Scotts Valley	7,966	8,127	7,846	8,435	9,007	8,565
Watsonville	37,287	35,720	33,623	34,491	37,654	46,052
Unincorporated	69,076	63,286	67,850	61,428	70,719	77,877
Santa Cruz County Total	169,541	164,884	163,581	161,816	171,724	191,750
California	30,044,845	29,742,008	29,097,960	29,946,958	30,871,915	32,923,077

Source: California Integrated Waste Management Board. (2016). Jurisdiction diversion/disposal rate detail.

Note: Annual tons of waste disposal by jurisdiction are rounded to the nearest ton.

Note: Data shown are most recent available.

Estimated Pounds of Waste Generated per Resident, per Day (Per Capita Disposal) by Jurisdiction

	2010	2011	2012	2013	2014
Capitola	4.5	4.3	4.3	4.3	4.1
Santa Cruz	4.3	4.5	4.1	4.4	4.0
Scotts Valley	3.8	3.8	3.7	4.0	4.1
Watsonville	4.0	3.8	3.6	3.7	3.9
Unincorporated	2.9	2.7	2.8	2.6	2.9
Santa Cruz County	3.5	3.4	3.4	3.3	3.5
California	4.5	4.4	4.3	4.4	4.5

Source: California Department of Resources Recycling and Recovery (CalRecycle). (2016). Jurisdiction diversion/disposal rate summary, 2010–2014, by jurisdiction. United States Census Bureau. (2016). 2010–2015. American Community Survey 1-year estimates.

Note: Data shown are most recent available.

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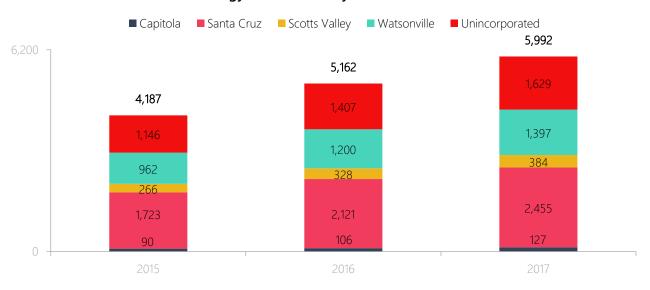
<sup>&</sup>lt;sup>154</sup> California Department of Resources Recycling and Recovery (CalRecycle). Environmental Justice Glossary. Accessed September 2016 from http://www.calrecycle.ca.gov/EnvJustice/Glossary.htm.

<sup>&</sup>lt;sup>155</sup> US Environmental Protection Agency. Reducing Water: What You Can Do. Accessed September 2016 from https://www.epa.gov/recycle/reducing-waste-what-you-can-do#Tips for Home.

# **Solar Energy**

Solar energy is among the leading forms of renewable energies which offers an alternative to the use of fossil fuels. It is also the most abundant energy resource on earth. Adoption of solar technologies continues to increase in communities throughout the nation as the price for solar becomes more economical.<sup>156</sup>

#### Number of Residential Solar Energy Installations by Jurisdiction



Source: City of Santa Cruz (2017). Climate Action Program. Personal Correspondence with program representative.

2016

#### Percentage of Households with Solar Installations by Jurisdiction

	2013	2010	2017				
Percentage of Households with Solar Installations							
Capitola	1.6%	1.9%	2.3%				
Central	7.4%	9.0%	10.5%				
Scotts Valley	5.8%	6.9%	8.3%				
Watsonville	6.8%	8.4%	9.9%				
Unincorporated	2.0%	2.5%	2.9%				
Santa Cruz County	4.0%	4.9%	5.7%				

2015

Source: City of Santa Cruz (2017). Climate Action Program. Personal Correspondence with program representative.

<sup>&</sup>lt;sup>156</sup> Energy.gov. (2016, June 6). Top 6 Things You Didn't Know About Solar Energy ... Retrieved October 25, 2016, from http://energy.gov/articles/top-6-things-you-didnt-know-about-solar-energy

# **Alternative Transportation**



Alternative transportation refers to commuting in any way other than driving alone. Examples include biking, walking, carpooling, and taking public transportation.<sup>157</sup> There are a myriad of benefits to using alternative transportation, including reduced commuting costs, reduced

stress, improved health, improved air quality, reduced peak period traffic congestion, reduced energy consumption, and less land use for parking facilities. Encouraging employees to cycle or walk to work can provide myriad benefits. These range from reduced parking costs to healthier, more productive employees.

#### Annual Transit Total Ridership<sup>1</sup>

5,844,234						5,09 <sup>-</sup>	• 1,394
2010	2011	2012	2013	2014	2015	20	)16
Туре	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014	FY 2015	FY 2016
Santa Cruz Metropolitan Transit District (SCMTD)	5,449,056	5,446,104	5,034,169	5,015,612	5,221,204	5,159,959	4,787,724
Hwy 17 Express Bus	301,104	330,340	339,048	354,058	373,348	336,805	303,667
Paracruz (Paratransit)	94,074	94,510	92,325	90,492	99,155	85,768	75,116

Source: Santa Cruz Metropolitan Transit District. (2017). Personal Correspondence with program representative.

#### Bikeway Miles, Santa Cruz County

Jurisdiction	2010	2011	2012	2013	2014	2015	2016
Capitola	14.6	14.6	14.6	14.6	14.6	14.6	15.1
Santa Cruz	57.7	57.7	57.7	57.7	58.4	59.3	59.3
Scotts Valley	16.5	16.5	16.5	16.5	16.7	16.9	16.9
Watsonville	27.2	27.5	27.5	27.5	27.5	27.5	28.0
Unincorporated	95.9	95.9	96.4	96.8	99.4	99.5	99.9
UC Santa Cruz	3.4	3.7	3.7	3.7	3.7	3.7	3.7
Santa Cruz County	215.2	215.8	216.4	216.8	220.5	221.4	222.8

Source: Santa Cruz County Regional Transportation Commission. (2017). Personal Correspondence with program representative.

Note: Totals are for bike paths (Class I bikeway) and bike lanes (Class II bikeway). Bike paths are counted as centerline miles and include one-way paths. Bike lanes are counted as directional miles.

<sup>&</sup>lt;sup>1</sup>Ridership refers to the number of trips taken in a specified time frame. There are currently no data available on the number of people who commute to work using carpool services or bicycles.

<sup>&</sup>lt;sup>157</sup> Green Plus. Alternative Transportation. Accessed September 2016 from http://gogreenplus.org/nuts-and-bolts-guide/planet-nuts-and-bolts-guide/transportation/alternative-transportation/.

<sup>&</sup>lt;sup>158</sup> Mid-Ohio Regional Planning Commission (MORPC). Benefits of Sustainable Transportation Choices. Accessed September 2016 from http://www.morpc.org/transportation/CommuterChallenge/benefits-of-alternative-transportation/index.

2016

2015

#### Bikeway Miles by Type of Facility

	2015	2016
Bicycle Lane <sup>1</sup>		
Capitola	14.4	14.9
Santa Cruz	48.5	48.5
Scotts Valley	15.6	15.6
Watsonville	18.4	18.4
Unincorporated	95.8	96.2
UC Santa Cruz	2.4	2.4
Santa Cruz County	195.1	196.0

	2013	2010
Bicycle Path <sup>2</sup>		
Capitola	14.6	15.1
Santa Cruz	59.3	59.3
Scotts Valley	16.9	16.9
Watsonville	27.5	28.0
Unincorporated	99.5	99.9
UC Santa Cruz	3.7	3.7
Santa Cruz County	221.43	222.8

Source: Santa Cruz County Regional Transportation Commission. (2017). Personal Correspondence with program representative.

# Commuting to Work by Mode of Transportation, Santa Cruz County

	2010	2011	2012	2013	2014	2015	2016
Car, Truck, or Van – Drove Alone	70.8%	71.8%	70.1%	70.6%	68.1%	68.9%	68.3%
Car, Truck, or Van – Carpooled	10.2%	9.7%	9.4%	9.3%	8.2%	10.1%	8.6%
Public Transportation (Excluding Taxicab)	2.8%	3.0%	2.7%	2.0%	2.9%	3.8%	2.6%
Walked	4.9%	3.7%	4.6%	4.0%	4.4%	3.4%	5.7%
Worked at Home	5.9%	6.8%	7.4%	7.2%	8.6%	7.4%	7.0%
Other Means <sup>2</sup>	5.3%	5.1%	5.8%	7.0%	7.9%	6.4%	7.8%
Workers 16 Years & Over	114,373	125,855	130,774	126,863	129,121	127,842	132,813
Mean Travel Time to Work (in Minutes)	25.3	25.4	25.7	25.7	26.2	26.2	26.8

Source: United States Census Bureau. (2017). 2010-2017 American Community Survey 1-year estimates.

Note: Increase trips to work made by walking and increase the proportion of persons who telecommute are indicators per Healthy People 2020. Indicators targets are based on trips to work by walking and persons who telecommute with a desired increase associated with the indicator. Please note that individual targets are not listed above as dataset shown is not directly comparable to the Healthy People 2020 goal as written.

<sup>&</sup>lt;sup>1</sup> Bicycle lanes are counted as directional miles

<sup>&</sup>lt;sup>2</sup> Bicycle paths are counted as centerline miles and include one-way paths.

<sup>&</sup>lt;sup>1</sup>Percentages represent the percentage of census responses for each mode based on the question, "What mode of transportation do you use most frequently to get to school or to work?"

<sup>&</sup>lt;sup>2</sup> Other means includes: taxicab, motorcycle, bicycle, or other means not listed.

# **Roadway Congestion**

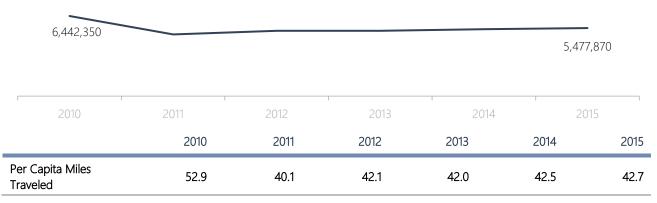
Long commutes and increasing traffic can increase stress and affect the health of community members. 159

#### Commute Time to Work<sup>1</sup>, Santa Cruz County

Commute Time	2010	2011	2012	2013	2014	2015	2016
0-14 minutes	30.3%	32.0%	27.9%	27.8%	32.3%	29.7%	31.3%
15–24 minutes	29.8%	28.1%	33.3%	31.9%	28.2%	30.1%	28.6%
25-34 minutes	14.8%	15.8%	13.4%	15.4%	12.3%	15.4%	12.6%
35-59 minutes	16.5%	14.2%	15.8%	16.4%	17.2%	14.2%	16.0%
60 minutes or more	8.6%	9.8%	9.7%	8.5%	10.0%	10.7%	11.6%

Source: United States Census Bureau. (2017). 2010-2016 American Community Survey 1-year estimates.

#### Daily Vehicle Miles Traveled (DVMT)<sup>1</sup>, Santa Cruz County



Source: California Department of Transportation. California Public Road Data 2010-2015. (2017). Sacramento, CA.

United States Census Bureau. (2017). 2010-2015 American Community Survey 1-year estimates.

Note: Total includes U.S. Fish and Wildlife Service.

Note: Cal Trans calculates Vehicle Miles Traveled (VMT) by multiplying the length of each given road segment by its traffic volume in a day.

<sup>&</sup>lt;sup>1</sup>Of workers 16 and older who do not work at home.

<sup>&</sup>lt;sup>1</sup>Of workers 16 and older who do not work at home.

<sup>159</sup> Gonzalez, O.I., Novaco, R.W. (2009). Commuting and Well-Being. Technology and Well-Being. Cambridge University Press.

# Highway 1, Estimated Peak Hour Traffic Volume<sup>1</sup>, by Number of Vehicles, Santa Cruz County

Post mile Highway Location	2010	2011	2012	2013	2014	2015
Watsonville, Airport Blvd/Roache Rd.	5,500	5,700	5,700	5,700	5,800	5,800
Freedom Blvd	7,000	6,800	6,800	6,800	7,000	7,000
Capitola, 41st Avenue	6,600	6,000	6,000	6,000	5,900	5,900
Soquel Avenue	6,900	6,400	6,400	6,400	6,300	6,300
Santa Cruz, Emeline Street	6,200	6,200	6,200	6,200	6,300	6,300
Santa Cruz, JCT. RTE. 17 North	4,600	4,800	4,800	4,800	4,950	4,950
Santa Cruz, North City Limits <sup>2</sup>	1,700	1,900	1,900	1,900	1,950	1,950

Source: California Department of Transportation. (2016). 2010-2015 Peak Hour Volume Data. Sacramento, CA.

Peak hour volume data consists of hourly volume relationships and data location. Hourly volumes are expressed as a percentage of the Annual Average Daily Traffic (AADT). Data here represents the percentage of AADT during the peak hour in the peak direction.

<sup>&</sup>lt;sup>2</sup>Represents post mile 20.611.

### **Air Quality**



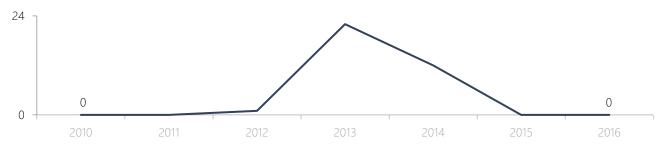


Poor air quality is harmful to people and can cause a variety of environmental problems, such as effects on wildlife, ozone depletion, and global climate change. <sup>160</sup> Some groups of people are especially sensitive to poor air quality, including those with asthma, heart disease, and COPD (long-term lung

disease). <sup>161</sup> Outdoor air quality has improved since the 1990s, but many air quality problems persist. Ground-level ozone, the main part of smog, and particle pollution are two of the many threats to air quality and public health in the United States. <sup>162</sup>

#### Healthy People 2020

# Air Quality Index, Number of Days Unhealthy for Sensitive Groups<sup>1</sup>, Santa Cruz County

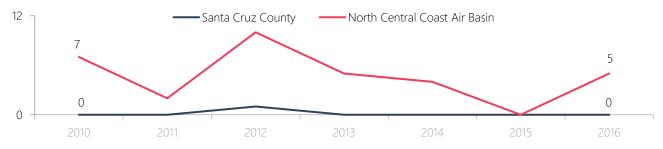


Source: Environmental Protection Agency. (2016). Air Quality Index Report, Air Data: Outdoor Air Quality Data. (2010-2016).

Note: Reduce the number of days the Air Quality Index (AQI) exceeds 100 is both a Social Determinant of Health indicator and Leading Health Indicator per Healthy People 2020. Indicators target of 1,980,000,000 are based Air Quality Index > 100 (number of days, weighted by population and Air Quality Index Value) with a desired increase associated with the indicator. Please note that individual target is not listed above as dataset shown is not directly comparable to the Healthy People 2020 goal as written.

<sup>1</sup>Unhealthy for Sensitive Groups (USG) AQI exceeds 100.

# Number of Days Exceeding the State 8-Hour Ozone Standard<sup>1</sup>



Source: Air Resource Board of California. (2017). ¡ADAM: Air quality data statistics: Ozone, number of days above state eight-hour standard.

<sup>1</sup>The California 8-Hour Ozone standard concentration is 0.070 parts per million (ppm)

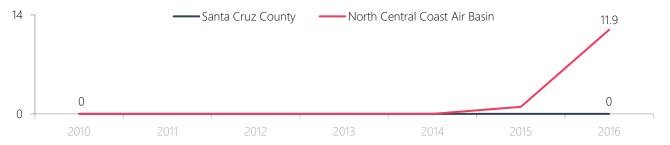
Note: North Central Coast Air Basin encompasses the Central Coast from Santa Cruz south towards Monterey.

<sup>&</sup>lt;sup>160</sup> Commonwealth of Massachusetts, Executive Office of Energy and Environmental Affairs, Department of Environmental Protection. Accessed September 2016 from http://www.mass.gov/eea/docs/dep/air/aq/health-and-env-effects-air-pollutions.pdf.

<sup>161</sup> Centers for Disease Control and Prevention. Air Quality, http://www.cdc.gov/air/.

<sup>&</sup>lt;sup>162</sup> Centers for Disease Control and Prevention. Air Quality. http://www.cdc.gov/air/.

# Number of Days Exceeding the State 8-Hour PM 2.5<sup>1</sup> Standard



Source: Air Resource Board of California. (2017). ¡ADAM: Air quality data statistics: Ozone, number of days above state eight-hour standard.

Particulate Matter 2.5 (PM 2.5) are fine particles 2.5 micrometers in diameter produced by any form of combustion including motor vehicles, power plants, residential wood burning, forest fires, and some industrial processes (Source: Air Now, Particle Pollution PM 2.5, PM 10. Retrieved from https://airnow.gov/index.cfm?action=aqibasics.particle).

<sup>&</sup>lt;sup>^</sup>Represents a National exceedance. A National exceedance is not necessarily a violation.



Appendices include methodology for the 2017 community survey, and past community heroes.

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Past Cor	nmunity	Heroes,	1996-20	16	183

## Methodology

## **Quality of Life Indicators**

The CAP community assessment model relies on clearly defined indicators in order to understand concepts or systems within the community which may be too large or complex to understand and discuss. As an example, we might ask ourselves, "Do people have adequate access to health care?" Increasing use of the emergency room for non-emergency purposes could be an indicator that they do not.

For the purposes of this project, special groups known as Technical Advisory Committees (TACs) developed the original list of quality-of-life indicators. These committees were represented by a rich mixture of professionals, advocates, and community volunteers, all of whom were experts in the respective areas under review. The TACs used special criteria to develop the quality of life indicators used for this project. These criteria stipulated that indicators need to be understandable to the general user and the public, responsive to change, relevant for policy decisions, and updated regularly.

In advance of each survey year the CAP Steering Committee reviews the list of indicators to keep up with changes within our community.

#### **Primary Data**

#### **Indicator Selection**

Measures of community progress depend upon consistent, reliable, and scientifically accurate sources of data. One of the types of data gathered for this project is primary data. The only primary data are from a telephone survey of a sample of Santa Cruz County residents. There is much to be learned from people's perceptions of their community, especially when those perceptions contradict the empirical evidence about its conditions.

In order to capture and understand the diverse perspectives of community members, Applied Survey Research conducts a telephone survey, in both English and Spanish, with over 750 randomly selected county residents. The intent of the survey is to measure the opinions, attitudes, desires, and needs of a demographically representative sample of the county's residents. Respondents are asked questions with confined options in addition to open-ended questions. The survey was conducted annually between 1995 and 2005, and biennially since 2005.

#### Sample Selection and Data Weighting

In 2017, 793 surveys were completed with county residents. Telephone contacts were attempted with a random sample of residents 18 years or older in Santa Cruz County. Potential respondents were selected based on phone number prefixes, and quota sampling was employed to obtain the desired geographic distribution of respondents across North County, South County, and the San Lorenzo Valley. In 2015 and 2017, quotas were also set for Latino respondents in order to increase the number of Latino survey respondents. In order to address the increasing number of households without landline telephone service, the sample included wireless-only and wireless/land-line random digit dial prefixes in Santa Cruz County. All cell phone numbers were dialed manually (by hand) to comply with Telephone Consumer Protection Act (TCPA) rules. While cell phone numbers are selected based on the billing address within the county boundaries, respondents were additionally screened for geography, as cell phones are not necessarily located where the number came from originally or is billed in the case of shared plans.

As previously mentioned, quotas were used with respect to respondents' location of residence. The quotas were designed to obtain sufficient samples to allow generalization to the overall population within each of the three designated geographic areas (North County, South County, and the San Lorenzo Valley). This method of sampling necessitated an over-sample of the San Lorenzo Valley due to its small size in relation to the rest of the county. The over-sampling of San Lorenzo Valley allowed for reliable comparisons with the other two regions (North County and South County). In total 793 surveys were completed, 274 in North County, 269 in South County, and 250 in San Lorenzo Valley.

Data from the 2017 survey were "weighted" along several demographic dimensions prior to data analysis. Data weighting is a procedure that adjusts for discrepancies between demographic proportions within a sample and the population from which the sample was drawn. For example, within the 2017 survey, the sample was 60% female and 40% male, whereas the population in Santa Cruz County is very near to evenly split between the two genders. When the data are weighted to adjust for the over-sampling of females, answers given by each female respondent are weighted slightly downward, and answers given by each male respondent are weighted slightly upward, thus compensating for the disproportionate sampling.

The survey data for 2017 were simultaneously weighted along the following demographic characteristics: gender, ethnicity, and geographic location. Weighting for both ethnicity and gender was performed to be region-specific, based on 2010 Census data, in order to account for differences across the three regions of Santa Cruz County. The weighted data were used in the generation of the overall frequency tables, and all of the cross-tabulations, with the exception of the regional cross-tabulations. For the regional cross-tabulations, the regional weights were dropped so that the San Lorenzo Valley oversample could be utilized.

There are important characteristics of weighted data that need to be mentioned. Within a weighted data set, the weights of each person's responses are determined by that individual's characteristics along the weighted dimensions (gender, ethnicity, geographic location). Thus, different respondents will have different weights attributed to their responses, based on each person's intersection along the three weighted demographic dimensions.

#### **Sample Representativeness**

A sample size of 793 residents provides 95% confidence that the opinions of survey respondents do not differ from those of the general population of Santa Cruz County by more than +/ -3.5%. This "margin of error" is useful in assessing how likely it is that the responses observed in the sample would be found in the population of all residents in Santa Cruz County if every resident were to be polled.

It is important to note that the margin of error is increased as the sample size is reduced. This becomes relevant when focusing on particular breakdowns or subpopulations in which the overall sample is broken down into smaller groups. In these instances, the margin of error will be larger than the initially stated interval of 3.5%.

It should be understood that all surveys have subtle and inherent biases. ASR has worked diligently with the CAP Steering Committee to reduce risks of bias and to eliminate identifiable biases. One remaining bias in this study appears in the area of respondent self-selection; the capturing of opinions only of those willing to contribute approximately 20 minutes of their time to participate in this community survey.

#### **Data Analysis**

Significance testing on the overall 2017 data was performed using proportion Z testing to determine whether differences observed within the 2017 data would be likely to be expected across the population of the entire county. In charts illustrating survey results, an asterisk indicates when statistically significant differences were found between survey subpopulations.

#### **Data Presentation**

Demographic breakdowns of survey results are presented on the web, as downloadable PDFs. The overall results remain in the report, and demographic comparisons on key indicators appear throughout the document. Question-by-question cross-tabulations for ethnicity, region, age, sex, income, housing status, and families with/without children are available on the Applied Survey Research Website at: www.appliedsurveyresearch.org.

## **Secondary Data**

Secondary (pre-existing) data were collected from a variety of sources, including but not limited to, the U.S. Census Bureau; federal, state, and local government agencies; health care institutions; and computerized sources through online databases and the Internet. Whenever possible, multiple years of data were collected to present trends. State level data were also collected for comparison to local data.

#### **Data Proofing**

Data in the report underwent extensive proofing to ensure accuracy. The data proofing protocol is a multistep process that thoroughly checks text, numbers, and formatting in the narrative, tables, and charts. The process requires each piece of data to be proofed at least three times using an adapted Responsibility Assignment Matrix.

# Past Community Heroes, 1996-2016 Year 22, 2016

Darrie Ganzhorn Pastor James and Congregation at St. Stephens Lutheran

Church Kathleen Crocetti

Deidre Hamilton

Live Oak Cradle to Career Parent Leadership **Cathy Simmons** 

Abby Bell

Mary Gaukel

Valerie Thompson Carol Williamson Paulina Moreno Margaret Gordon

Lynne Achtenberg

Youth of the Year Award: Ayla Dingman

Lifetime Achievement Award: Martina O'Sullivan

#### Year 21, 2015

Dr. Tamara Ball, University of California, Santa Cruz

Santa Cruz Works

Barbara Mason, County of Santa Cruz

Susan Freeman, Stanford Graduate School of Education

Kathleen King, CEO, Pajaro Valley Community Health Trust

Stephanie Connor-Kent, Palo Alto Medical Foundation's Pediatrics and Psychiatry Behavior Health Department

Jose Joel Vasquez, Jovenes **SANOS** 

Les Forster, Cypress Charter High School

Sarah Emmert, Youth Violence Prevention Task Force

Jorge Zamaro, Law Enforcement

Ingrid Trejo

Phil Kramer, Goodwill Industries

Maria Elena de la Garza, Community Action Board,

George Jarrow, RN, Dignity Health Dominican Hospital

Kristen Kittleson, Water Resources, County of Santa Cruz

David Robles, Ecology Action's Sustainable Transportation Group

Steve Gliessman, University of California, Santa Cruz

Andy Shatney

Lifetime Achievement Award: Deborah Blumberg

## Year 20, 2014

Brent Haddad, Center for Entrepreneurship, University of California, Santa Cruz

Carol Polhamu, Alternative Education, Santa Cruz County Office of Education

Lawrence P. Drury, GOKIDS

Gary McNeil, County of Santa Cruz Human Services Department

John Frigon, John Frigon Insurance Services

Rosalba Contreras, Salud Para La Gente

Kate Hinnenkamp, Live Oak Family Resource Center, Community Bridges

Silvia Austerlic, Hospice of Santa Cruz County

Laura Marcus, Dientes Community Dental Care

Guillermina Porraz, Salud Para La Gente

Nereida Robles, Centeotl Grupo de Danza y Baile

Fe Silva, Centeotl Grupo de Danza y Baile

Clotilde Sanchez, Volunteer, Neighborhood

Accountability Board, City of Watsonville

Peter Connery, representing **Project Homeless Connect** Steering Committee

Maggie McKay, representing **Project Homeless Connect** Steering Committee

Maria Virgen, Volunteer, Second Harvest Food Bank

Mary Masters, Bridge of **Hope Foundation** 

Charles Kieffer, Santa Cruz State Parks

Alan Schlenger, Board of Directors, Ecology Action and Santa Community Farmers Markets

#### Year 19, 2013

Faris Sabbah, MD, Pajaro Valley Unified School District Region XI Migrant Education Program

Tom Helman, Community Action Board

Ryan Coonerty, NextSpace
Jeremy Neuner, NextSpace

Mark Donnelly, Starlight Elementary School

Jim Marshall, Children's Alley Preschool

Elisa Breton, MD, Santa Cruz Women's Health Center

Maria Mead, MD, Santa Cruz Women's Health Center

Kristina Muten, MD, Santa Cruz Women's Health Center Wendy Sickles, MD, Santa Cruz Women's Health Center

Sandra Wallace, For Kids Monterey Bay

Casey Schirmer, MD, Palo Alto Medical Foundation Pediatric Weight Management Program

Fernando Giraldo, County of Santa Cruz Probation Department

Lori Butterworth, Santa Cruz and Watsonville Youth City Councils

Jonathan Fry, Santa Cruz and Watsonville Youth City Councils Will O'Sullivan, Santa Cruz Community Counseling Center Recovery Services

John Dietz, 180/180 Campaign

Jane Schwickerath, Diversity Center 60+ Senior Program

Saskia Lucas, Santa Cruz Open Streets

Tracey Marquart, Community Life Services

Nancy Macy, The Valley Women's Club of the San Lorenzo Valley

Lynn McKibbin, The Valley Women's Club of the San Lorenzo Valley Talitha Stills, The Valley Women's Club of the San Lorenzo Valley

Nesh Dhillon, Santa Cruz Community Farmers' Markets

Ross Clark, The Greenwharf Project

Michael Issacson, The Greenwharf Project

John Vesecky, The Greenwharf Project

Tiffany Wise-West, The Greenwharf Project

Lifetime Achievement Award: Chris Johnson-Lyons

#### Year 18, 2012

Ron Slack, Good Times Maura Noel, Amgen Tour Mathilde Rand, Community Volunteer

Michael Paynter, Santa Cruz County Office of Education

Sandy Davie, Santa Cruz Toddler Care Center

Curt Simmons, Plaza Lane Optometry

Alicia Fernandez, Baby Gateway

Angie Gileta, Baby Gateway

Xochitl Zaragoza, Baby Gateway

Lili Beggs, Sutter Maternity Lactation Department

Francisco Alfaro, Santa Cruz County Football Club Revolution

Chris Wentzien, Santa Cruz County Football Club Revolution

Joe Hernandez, City of Santa Cruz Police Department Josephine Salgado, Women's Crisis Support/Defensa de Mujeres

Jean Graham, Santa Cruz County Homeless Persons Health Project

Doug Keegan, Santa Cruz County Immigration Project, Community Action Board

Elizabeth Walch, Friends of the Library Scotts Valley

Susie Christensen, Friends of the Library Scotts Valley Peter McLean, Friends of the Library Scotts Valley

Bob Geyer, City of Watsonville Public Works and Utilities

Ana Rasmussen, Mesa Verde Gardens

Bruce Daniels, UCSC Ph.D. Student, Hydroclimatology

<u>Lifetime Achievement</u> <u>Award:</u> Fr. Andrew Beck and Terry Beck

#### Year 17, 2011

Irene Freiberg, First 5 SEEDS of Early Literacy Master Coach

Araceli Castillo, Salud Para La Gente

Leslie Conner, Santa Cruz Women's Health Center

Danny Keith, Second Harvest Food Bank

Monica DaCosta, Unity Temple of Santa Cruz Garrett Neier, The Museum of Art & History @ the McPherson

Sergeant Michael Harms, Santa Cruz City Police Department

Vicki Assegued, Santa Cruz County Probation Department

Carmen Arriaga-Kumasaka, Catholic Charities Elizabeth Schilling, Live Oak Family Resource Center

Adrian Lemke, Community Volunteer

Michelle Whiting, Santa Cruz Bible Church

Triple P Practitioners (Andrew Castro, Chris O'Halloran, Donica Ericsson, Celia Organista), First 5 Positive Parenting Program Betsy Clark, Santa Cruz Community Counseling Center – Community Support Services

Steve Pleich, Save Our Shores

John Ricker, County of Santa Cruz Health Agency

Lloyd Williams, Land Trust of Santa Cruz County

Lifetime Achievement Award: Kathy Howard

## Year 16, 2010

Michael Paul, Santa Cruz Goodwill Industries

Cynthia Wells, Santa Cruz Community Counseling Center

Cork Cherk, WPENS Teacher

Jeanne Carrier, WPENS Teacher

Kim Woodland, Soquel PENS Teacher

Nancy Samsel, Soquel PENS Teacher

Dara Thronton, Santa Cruz PENS Teacher Wendy Wyckoff, Santa Cruz PENS Teacher

Maggie Klepp, Santa Cruz PENS Teacher

Patty McFarland, Central California Alliance for Health

Dave McNutt

Paul Bellerjeau, Second Harvest Food Bank

Willy Elliot-McCrea, Second Harvest Food Bank

Deborah Elston, Santa Cruz Neighbors Nancy Sherrod, Court Appointed Special Advocates (CASA)

Javier G. Diaz, Community Restoration Project

Bob Katz, Katz & Lapides Law Office

Leola Lapides, Katz & Lapides Law Office

Leticia Mendoza, YWCA Watsonville

Dr. Satish Chandra, Dominican Medical Foundation Richard Crowe, St. Francis Soup Kitchen

Maria Rodriguez Castillo

Carol McMillen

Kris Beall, Watsonville Wetlands Watch

Julie Barrett Heffington, Seymour Center at Long Marine Lab

Berri Michel, Bicycle Trip

Lifetime Achievement Award: Dick Wilson

#### Year 15, 2009

Bay Federal Credit Union Preston "Boom" Boomer, Chemistry & Physics Teacher, San Lorenzo Valley High School

Sherry Lee Bryan, Ecology Action

Terry Corwin, Santa Cruz County Land Trust

Carolyn Coleman, Santa Cruz Community Counseling Center

Jody Cramer, Assisted Living Project Caroline Currie, Court Appointed Special Advocate (CASA) Volunteer

Crystal Dunniway, Assisted Living Project

Dr. Larry deGhetaldi, Palo Alto Medical Foundation, Santa Cruz Division

Pola Espinoza, Children's Education Community Leader

Kathy Fahl, Make Your Wishes Known Community Education Initiative Families Together Staff Roberta McPherson, San Lorenzo Valley Equity Committee

Dr. Nanette Mickiewicz, Dominican Hospital

Maggie Muir, Sutter Maternity & Surgery Center

Michelle LaBerge, Volunteer Attorney Coach, Mock Trial School Competition

Steve LaBerge, Volunteer Attorney Coach, Mock Trial School Competition Linda Proudfoot, Make Your Wishes Known Community Education Initiative

Raquel Ramirez Ruiz, Diabetes Health Center

Surfrider, Santa Cruz Chapter

<u>Lifetime Achievement</u>
<u>Award:</u> Jeanne Wakatsuki
Houston, Author & Public
Speaker

## Year 14, 2008

Veronica Camberos

Henry Carter

Dana Cox, RN

Peggy Downes Baskin

First 5 SEEDS Quality

Coaches

Curt Gabrielson, Watsonville Community Science Workshop

Dr. Gary Griggs, Ph.D.

Lyn Hood, Animal Evacuation Team, SCC Equine Evacuation Unit

Hospice of Santa Cruz County

Bernie Klum, MD, Watsonville Community Hospital Emergency Department

Kristi Locatelli, Animal Evacuation Team, SCC Horsemen's Association

Sandy Lydon

Salem Magariam, MD, Dominican Pediatric Clinic

Larry Markey

Anthony Musielewicz, MD, Dominican Emergency Department

Carmen Perez

Micah Posner, People Power

Pablo Reguerin, Educational Partnership Center Ginny Solari Mazry, Hospice of Santa Cruz County Volunteer

Rachel Spencer

Todd Stosuy, Animal Evacuation Team, SCC Animal Services Authority

Mary Sullivan-White, Animal Evacuation Team, SCC Horsemen's Association

Michele Violich, MD, Watsonville Health Center

#### Year 13, 2007

Mary Boyd
David Brown, Coastal
Community Preschool
Meg Campbell, COPA Leader
Michael Chavez
Ginny Clark, Hospice Caring
Project/ Friends of Hospice
Kim Clary, The Core
Cleaner Beaches Coalition
Yvette Cook, Amesti
Elementary School
Christina Cuevas, Program
Officer, Community
Foundation of Santa Cruz
County

Bob Culbertson, Watsonville Wetlands Watch

Doriz Downs, Healthy Start Program of PVUSD

Georgette Dufresne, Women's Crisis Support-Defensa de Mujeres

Jennifer Hastings, Medical Director, Planned Parenthood Mar Monte/ Westside Health

Maria Carmen Hernandez, Healthy Start Program of PVUSD Rama Khalsa, Ph.D., Director of the Santa Cruz County Health Services Agency

Katie LeBaron, Santa Cruz County Health Services Agency

Ruth Leon, Healthy Start Program of PVUSD

Robert Montague, Loaves and Fishes

Manuel Osorio, Cabrillo College

Rock Pfotenhauer, Dean of Career Education and Economic Development at Cabrillo College Cece Pinheiro, Special Parents Information Network

Stuart Rosenstein, Queer Youth Task Force of Santa Cruz County

Santa Cruz Neighbors

Jorge Savala, Healthy Start Program of PVUSD

David True, Community Action Board

UC Santa Cruz Transportation and Parking Services Department (TAPS)

#### Year 12, 2006

Sybil Anderson-Adams,
Santa Cruz Family &
Children's Services
Carmelita Austin-Schreher,
ABC Health Group
Deborah Blumberg,
Community Volunteer
Roberta Bristol, Community
Volunteer
Maria Callejas, Coastal
Community Preschool
Karina Cervantez,
Community Action Board
Linda Clevenger

Jimmy Cook, Santa Cruz

Family & Children's Services

Gail Cosby, Coastal
Community Preschool
Roberta DePiana, Coastal
Community Preschool
Patrick J. Fitz, Community
Volunteer
Veronica Foos, Santa Cruz
Family & Children's Services
Nancy Gimmons,
Watsonville Farmer's Market
Jim Howes, Santa Cruz
Police Department Public
Services Department
Suzanne Koebler
Jennifer Laskin, Teacher at

Renaissance High School

Judy Leguillon, Coastal Community Preschool Paul McGrath Lee Mercer, Second Harvest Food Bank Rob Mullens, Coastal Community Preschool Jim Naragon, Families in Transition Nell Newman, Newman's

Nell Newman, Newman's Organics

Terri Noto, Santa Cruz Family & Children's Services

Charles Paulden, Community Volunteer

Elise Perlin, Santa Cruz Family & Children's Services Bob Rittenhouse, Community Volunteer Eddie Rittenhouse, Community Volunteer

Linda Robinson, Ombudsman Program

Francisco Rodriguez, Pajaro Valley Unified School District

Robert Rodriquez

Marcia Soler, Coastal Community Preschool

Chris Tracy, Santa Cruz Family & Children's Services

Victoria Williams, Santa Cruz Family & Children's Services

Mardi Wormhoudt

#### Year 11, 2005

Foster Anderson, Shared
Adventures
Austin Armstrong,
Community Volunteer
Brenda Armstrong, Santa
Cruz County Health Services
Agency
Dave Bartlett, Court
Appointed Special
Advocates (CASA)
Kay Bartlett, Court
Appointed Special

Catherine Cooper, UCSC
Department of Psychology
Tamara Doan, Coastal
Watershed Council
Lisa Dobbins, Action Pajaro
Valley
Elizabeth Dominguez,

Elizabeth Dominguez, Cabrillo College Juan Gomez, Reclaiming Futures and Friday Night Live Clay Kempf, Regional

Diabetes Collaborative

Lynda Lewit, Santa Cruz County Health Services Agency

Scott MacDonald, Santa Cruz County Probation Department

Leslyn McCallum, Train of Consciousness

Ryan McNamara, Team Member with Quest4aCure

Maria Cristina Negrete, Community Volunteer

Matt O'Brien, Team Member with Quest4aCure

Wells Shoemaker, M.D., Physicians' Medical Group Judy Webster, Community

Volunteer

Tom Webster, Community Volunteer

Carol Whitehill, Watsonville Wetlands Watch

Danielle Winkler, Team Member with Quest4aCure Joya Winwood, Mothersong

#### Year 10, 2004

Advocates (CASA)

Luis Alejo, CRLA/Watsonville Schools Piet Canin, Bike to Work Program Cathy Cavanaugh, Community Bridges WIC Program Karen Christensen, Santa Jinny Corneliussen, Jack Farr, and Theresa Kramer, Alzheimer's Association of Santa Cruz Volunteers Melissa Cowles, Community Volunteer

Selby Drake, Suicide Prevention Center Volunteers

**Ecology Action** 

Marcia "Duffy" Grant, Community Volunteer

Anita Ibarra, Community Action Board

Gail Levine, Branciforte Elementary

Elnora Lewis, Community Volunteer

Jaime Molina, County Mental Health Services Phil Reader, Community Volunteer

Ride a Wave and Balance 4 Kids

Jerri Ross, Santa Cruz County Health Care Outreach Coalition

Patricia Schroeder, Student Health Services

Judy Williams, Community Volunteer

### Year 9, 2003

Cruz County Resource

Conservation District

Local Planning Area
Don Eggleston, New School
Jill Gallo, Community
Volunteer
Mary Hammer, Community
Volunteer
Mas Hashimoto, Japanese

American Citizens League

Dan Cope, Special Education

Roland and Violetta Law, Community Volunteers Dean Lundholm, Pleasant Acres Tenant Association Marcia Meyer, Childcare Ventures Omega Nu

Yolanda Perez-Logan, Probation Department Amy Pine, Survivors Healing Center R.E.A.L. Randy Repass, West Marine Joseph Rivers, Dragonslayers Ann Ruper, Volunteer Book Buddy Theresa Thomae, Small Business Development Center

Phyllis and Dick Wasserstrom, Community Volunteers

George Wolfe, Community Volunteer

#### Year 8, 2002

Mary Balzer, SPIN Ruth Barker, We Care Program David Beaudry, Community Builder Michael Bethke, Community Volunteer Toni Campbell

Angie Christmann, Land Trust of Santa Cruz County Jena Collier, Health Families Daniel Dodge, Community Activist Heather Hite Deutron Kebebew, UCSC

Marq Lipton, Seaside Company Ellen Moir, New Teacher Center Jorge Sanchez, Si Se Puede Paul Tutwiler, Volunteer Jim Van Houten, Community Volunteer

Linda Wilshusen, Live Oak Neighborhood Organization Martina Zamilpa, Catholic Charities

## Year 7, 2001

Jane Barr, Mid-Peninsula Housing Jess Brown, Santa Cruz County Farm Bureau Virginia Butz Alie Carey, Y.E.S. School Destiny Castillo, Y.E.S. School Amy Christey, Santa Cruz County Sheriff's Department

Aurelie Clivas, San Lorenzo Valley Healthy Start Diane Cooley, Community Volunteer Jonathan Cornejo, Head Start Blanca Corrales LaRue Foster, Ombudsman Scott Kennedy, Santa Cruz City Council

Ken Meshke Carrol Moran, UCSC **Education Partner CTR** Chrissie Morrison, Y.E.S. School Theresa Ontiveros, Planned Parenthood Sally Smith, Surfrider Foundation

Barbara Sprenger, San Lorenzo Valley Teen BoardJonas Stanley, San Lorenzo Valley Healthy Start Lillian Westerman, Santa Cruz County Office of Education Mike Wilker, CCIC Lutheran Church

## Year 6, 2000

Jay Balzar, Dientes Steve Beedle, Santa Cruz Tech Alliance Kathy Bernard, Pajaro Valley **Housing Corporation** Janet Boss, Boys and Girls Club of Santa Cruz County Noah Brown, Youth Services Judy Cox, Santa Cruz County **Probation Department** 

Pam Elders, Head Start Aranda Guillermo, c/o Don Eggleston Francisco Jimenez, Student/Magic Apple Janice Jimenez, Student/Magic Apple Rama Khalsa, Health Services Agency

Bryan Loehr, Redwood Elementary Vickie Morales, Santa Cruz County Probation Department Bob Munsey, Crow's Nest Dee O'Brian, Walnut Avenue Women's Center Dennis Osmer, Energy Services

Laura Segura-Gallardo, Watsonville Parks and Recreation Larry Tierney, Park Maintenance Siri Vaeth, Big Brothers/Big Sisters

#### Year 5, 1999

Steve Belcher, Santa Cruz Girl Scouts of the Monterey Jack O'Neill, O'Neill Sea Arcadio Viveros, Salud Para Chief of Police **Bay Volunteers** Odyssey La Gente Pat Clark, NAACP John Janzen, Silicon Systems Jane Scherich Elisabeth Vogel, Mercy **Charities Housing** Karen Delaney, Volunteer Majel Jordan, Elderday Michael Schmidt, Santa Cruz Chamber Center Irvin Lindsey, Outdoor Tim Siemsen Pam Falke Science Experience Mary Jo May Frica Terence Lisa Fraser, Principal Aptos Junior High Year 4, 1998 Linda Perez, Pajaro Valley Manny Solano, Watsonville Sue Wilson, Grandma Sue's Patricia Arana, ALTO Prevention and Student Police Department Edison Jensen, Attorney Bruce Woolpert, Granite Assistance **Triangle Speakers** Rock Susan Olsen, El Pajaro Maria Roman, Community Community Development Bill Watt, Families in for Violence Reduction Transition Year 3, 1997 Ciel Benedetto, Santa Cruz Erik Larsen, Resource Center Maria Martinez, Head Start Maggie Reynolds, Children's Women's Health Center for Nonviolence Volunteer Alliance Dana Blumrosen, Street Norm Lezin, Delta School Bob McKinley, Every Fifteen Patty Sapone, Every Fifteen Youth Program Minutes Mark Ligon, Every Fifteen Kimberly Carter, Above the Michael Pruger, Every Fifteen Ray Shurson, Every Fifteen Minutes Minutes Line Minutes Paula Mahoney, Every Fifteen Minutes Sharon Kinsey, Volunteer Year 2, 1996 Fred Keeley, SCCHO Paul Brindel, Community Mónica Morales, Brown Marion Taylor, League of **Action Board** Berets Women Voters Nancy Macy, Volunteer Judy Darnell, Volunteer Harvey Nickelson, Coast Marisa Villalon-Chapman, El Alan McCay, SCCHO Commercial Bank Comite/Esperanz Linda Fawcett, League of Terry Medina, Watsonville Women Voters Juana Ortiz-Gomez, El Police Chief Comite/Esperanza Andrea Garcia, El Michael Molesky, El Leonard Smith, Pros for Comite/Esperanza Comite/Esperanza

Youth



## community assessment project products

comprehensive report

This entire report and past reports are available to view and download at: www.appliedsurveyresearch.org.

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Data in this report can be mixed and matched to help agencies determine their clients' needs. Special reports can be created to reflect target populations, and cross-comparisons can be established with data from other projects. Customized reports are available by calling Applied Survey Research at 831.728.1356.

speakers bureau

Expert speakers are available to speak to clubs and community groups about any aspect of the Community Assessment Project. To schedule a speaker call the United Way of Santa Cruz County at 831.479.5466.