

Calaveras County

Maternal Child and Adolescent Health Community Profile 2017-18

Demographics

Our Community

Total Population ¹	45,214
Total Population, African American	380
Total Population, American Indian/ Alaskan Natives.....	569
Total Population, Asian/Pacific Islander	667
Total Population, Hispanic	4,851
Total Population, White.....	37,420
Total Live Births ²	337

Our Mothers and Babies

% of women delivering a baby who received prenatal care beginning in the first trimester of their pregnancy ²	79.3%
% of births covered by Medi-Cal ²	50.9%
% of women ages 18-64 without health insurance ³	16.9%
% of women giving birth to a second child within 24 months of a previous pregnancy *	31.0%
% live births less than 37 weeks gestation ²	8.4%
Gestational diabetes per 1,000 females age 15-44	7.2
% of female population 18-64 living in poverty (0-200% FPL) ³	29.2%
Substance use diagnosis per 1,000 hospitalizations of pregnant women*	37.9
Unemployment Rate ⁴	14.5

Our Children and Teens

Teen Birth Rate per 1,000 births (ages 15-19) ²	22.3
Motor vehicle injury hospitalizations per 100,000 children age 0-146	23.7
% of children, ages 0-18 years living in poverty (0-200% FPL) ³	39%
Mental health hospitalizations per 100,000 age 15-24*	1,742.6
Children in Foster Care per 1,000 children ⁵	9.1
Substance abuse hospitalization per 100,000 aged 15-24*	979.8

Data sources: ¹ CA Dept. of Finance population estimates for Year 2015, January 2013; ² CA Birth Statistical Master Files 2011-2013 Annual Average, 3 year average; ³ California Health Interview Survey, 2014; ⁴ [State of California, Employment Development Department, February 2017](#); ⁵ [Data from CA Child Welfare Indicators Project, UC Berkeley Point in Time Jul 2015](#); ⁶ [California Department of Public Health, Safe and Active Communities Branch](#); *Data carried over from the Community Profile 2015-2016. Not updated.

About Our Community – Health Starts Where We Live, Learn, Work, and Play

Calaveras is a geographically diverse county of 1020 square miles located in the Sierra foothills approximately 65 miles southeast of Sacramento and 40 miles east of Stockton in California. There are twenty zip codes, one incorporated city and four larger towns. The county is rural with a population density of 44 persons per square mile. Each community has its own distinct identity and is separated from the other communities by long distances over rural roads. Three communities were severely affected by the 2015 Butte Fire which burned 549 homes, affecting the population, the local economy, the local property values, and the environment.

Service industries (education, health, and social services) are the largest local employers. Ranching, agriculture, government, and tourism are the other significant sources of income in the county. Since September 2015, the cannabis growing industry has grown by leaps and bounds bringing new residents and new challenges with it.

Walkability in the county is limited due to rural roads with little to no shoulder, rare sidewalks, dangerous curves, and long distances to desired destinations. Still, the number of residents who walk to work (3%) remains higher than the number of

those who use public transit (1%). Calaveras County does continue to participate in a Safe Routes to Schools program which encourages walking by building or improving infrastructure that provides safe areas in which to walk.

Due to its rural setting, Calaveras County has abundant open space which supports a diversity of plant and animal life as well as preservation of natural resources, managed production of resources, and recreation. A large part of Calaveras County natural resources were destroyed in the September 2015 Butte Fire which burned a total of 70, 868 acres. While some of those acres are in Amador County, the majority is in Calaveras County. Due to perfect fire conditions, the fire burned extremely hot and fast, leaving behind a scorched earth in which little survived. In the past 18 months the recovery process for humans, wildlife and land has been slow. Another factor involved is tree mortality due to drought and bark beetle. Areas not affected by the Butte Fire have still experienced a huge loss of trees. This will have an effect on residents, local climate, wild life, tourism, and the economy for many years.

Health System – Health and Human Services for the MCAH Population

Maternal/Women’s Health and Perinatal/Infant Health: As there are no obstetricians and no birthing hospital in Calaveras County, agencies and community organizations work to help women get in to prenatal care by providing information on and referrals to providers in neighboring counties. Expectant women are assessed for their need for health care coverage and assisted in getting the specific coverage they need so they can see an obstetrician of their choice when possible. . Mothers receive assistance with changing theirs and/or the infant’s health care coverage if needed, so they can be seen by local providers after delivery. Perinatal mood and anxiety disorders in Calaveras women are being addressed by a partnership coalition between Calaveras and Amador counties. The coalition offers education and support to healthcare and family service providers so that they can better help their patients and clients. Breastfeeding support for families and education for employers on how to support breastfeeding employees is provided by another partnership coalition between Calaveras and Amador counties. Another barrier to getting in to health care is the lack of available and easy to access transportation which is a challenge that agencies and community organizations continue to address.

A Calaveras County Oral Health Task Force is providing information to local elected government officials on the status of dental care for all ages in in the county and the effect it is having on the health, education, and employment of county residents. This affects the economic status of the county as well. Calaveras County currently has no Denti-Cal or pediatric dentists. The Task Force provided support to a local community organization, The Resource Connection, which applied for and received grant funding to build a sustainable source of affordable and accessible dental care for the underserved in the county.

Calaveras Public Health continues to provide a variety of services to the county residents through a variety of programs. The Tobacco Prevention Program continues to work with Calaveras youth on tobacco prevention activities. The SNAP-Ed Program continues to provide nutrition education. Fit for the Future educates elementary school children on physical activity and healthy nutrition. Chronic Disease Self-Management workshops are offered to all adults of any age who want to live with their chronic disease in the most informed and healthiest way possible.

Health Status and Disparities for the MCAH Population

Women in Calaveras County have even less local access to family planning services due to the loss early this year of the only FPACT program which served high school students The local health care system provides family planning services only to established patients. All other women looking for those services must travel out of the county. This lack of locally available services could be a contributing factor in the rate of chlamydia and gonorrhea in the county. Per CDPH, the chlamydia rate was 138.1 in 2015. The rate for gonorrhea in 2015 was 40.1. The rate for syphilis in 2015 was 11.2. Substance use is also a barrier to women getting in to preventive care services. Lack of transportation is frequently another barrier to getting those services.

Obesity is a health issue not easily resolved in our county due to few resources for weight loss support. There are also communities which have limited access to fresh fruits and vegetables. Physical activity opportunities are limited by an environment with unsafe roads and few parks or safe areas of open space for families to participate in those activities. While there are some fitness facilities, their fees put them out of reach for low-income families.

Children and adults are affected by the lack of Denti-Cal dentists in the county which in turn affects the county as a whole. Children with dental pain or other issues are at greater risk for missing school or falling behind in their education which affects funding received by the school districts. Adults may be unemployable due to missing teeth. Their nutrition status may suffer due to missing teeth or dental pain, leading to poor overall health. All of this affects the economic status of the county.

Mental health services provided by the county behavioral health services program is limited to only those with severe symptoms. The local health care system is unprepared to take on the increase in mental health issues of even their established patients. The local hospital-affiliated medical clinics do have a psychiatrist on staff as well as two LCSWs and they do accept Medi-Cal, giving residents a local option for mental health services.