

Santa Clara County

Maternal Child and Adolescent Health Community Profile 2017-18

Demographics

Our Community

Total Population ¹	1,850,595
Total Population, African American	42,996
Total Population, American Indian/ Alaskan Natives	4,189
Total Population, Asian/Pacific Islander	610,835
Total Population, Hispanic	503,403
Total Population, White	634,335
Total Live Births ²	23,296

Our Mothers and Babies

% of women delivering a baby who received prenatal care beginning in the first trimester of their pregnancy ²	85.4%
% of births covered by Medi-Cal ²	28.4%
% of women ages 18-64 without health insurance ³	14.7%
% of women giving birth to a second child within 24 months of a previous pregnancy *	35.8%
% live births less than 37 weeks' gestation ²	8.3%
Gestational diabetes per 1,000 females age 15-44	12.3
% of female population 18-64 living in poverty (0-200% FPL) ³	23.2%
Substance use diagnosis per 1,000 hospitalizations of pregnant women*	11.2
Unemployment Rate ⁴	7.9

Our Children and Teens

Teen Birth Rate per 1,000 births (ages 15-19) ²	16.7
Motor vehicle injury hospitalizations per 100,000 children age 0-146	11.0
% of children, ages 0-18 years living in poverty (0-200% FPL) ³	28.4%
Mental health hospitalizations per 100,000 age 15-24*	1,140.7
Children in Foster Care per 1,000 children ⁵	2.6
Substance abuse hospitalization per 100,000 aged 15-24*	510.7

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

Santa Clara County (SCC) is located at the southern end of the San Francisco Bay and has a total area of 1,304 square miles. Framed by the Diablo Mountain Range on the east and the Santa Cruz Mountains on the west, SCC is the 6th largest county in California and is the most populated among neighboring counties. There are 15 cities within SCC and although a significant portion of the county is unincorporated ranch and farmland, 1% of our population lives in rural areas of the County. The County of Santa Clara has a culture, rich in its history, ethnic diversity (over 100 languages and dialects are spoken), artistic endeavors, sports venues and academic institutions. According to the Census Bureau, in 2015, major industries in SCC include manufacturing (17.7%), professional, scientific/tech services (15.1%), healthcare (10.5%), retail trade (8.8%) and educational services (8.1%). The technology industry has a large presence with major employers include Cisco Systems, Apple Inc., Google, and E Bay Inc. Other major industries include hospitals/surgery centers (Santa Clara Valley Medical Center), learning institutions (San Jose State University), entertainment venues (SAP Center), agriculture (Christopher Ranch LLC.) and aerospace/satellite/space research (Lockheed Martin & NASA). Government employees account to 9.7% of SCC workforce. Although Santa Clara Valley offers many areas of open space for parks and recreation; a recent assessment on the health

status of SCC children identified areas of improvement around neighborhood safety in predominantly poor communities and communities of color. SCCPHD Chronic Disease & Injury Prevention Program has launched a Healthy Cities Campaign to address active, safe and healthy cities through policies and resources.

Health System – Health and Human Services for the MCAH Population

Ongoing efforts of accreditation has propelled our department and the MCAH program to engage with countywide stakeholders to address a multitude of health disparities, issues and concerns with a collaborative and collective spirit. The MCAH program has been able to utilize existing partnerships and collaborations to enhance and improve new and existing efforts that impact the MCH population. With active involvement in a 2nd training cohort with GARE (Government Alliance on Race and Equity) and participation in the department wide leadership committee addressing race and health equity, MCAH staff is gaining a deeper understanding on this issue, working across multiple county departments to further enhance work/projects. With our participation with the regional efforts of T2 (Trauma Transformed), MCAH is taking a lead role in building collective impact in SCC in addressing ACEs (Adverse Childhood Experiences) in SCC and building community resiliency.

Other initiatives that address maternal/women's, perinatal, adolescent, child, infant health and children with special health care needs include, but not limited to the following:

- Universal prenatal screening using 4PsPlus tool in the County Ambulatory Health Care System through PRIME Funding streams
- Facilitating SCC Maternal Mental Health Collaborative
- Providing services with the Black Infant Health Program
- Providing leadership to the Adolescent Pregnancy Prevention Network focusing on adolescent sexual and reproductive health
- Multi agency collaboration to provide public health nursing (PHN) comprehensive case management to children ages 0-5 that are open to Child Protective Services/Department of Family and Children Services
- Participating in ongoing collaboration with DFCS with Children/Youth with Special Health Care Needs and identified CSEC youth and management of foster care children on psychotropic medication
- Nurse Family Partnership Program, offering long-term nurse case management
- Active participation and collaboration with other local jurisdictions with similar priority problems: i.e.: Pediatric obesity and maternal mental health

Assessing the following areas: Access to prenatal care, child care providers with nutrition, physical activity, and lactation accommodation and breast milk handling plans and education on child passenger safety and intimate partner violence/domestic violence.

Health Status and Disparities for the MCAH Population

In 2014-15, Santa Clara County was ranked the 7th fastest growing county in California and had a job growth of 3.5% in 2016. However, with one of the highest rental markets in California and the annual median income over \$96,000 the wealth gap widens and health disparities persist. Currently, Hispanics (27%) and African American (3%) making up 30% of our population. These two racial groups are shown to be disproportionately impacted by identified health disparities in SCC. While problems such as gestational diabetes, all races are showing an increase in incidence with SCC (rate 12.3/100 females) faring worse than the State (rate 8.7/100 females) with Asian/Pacific Islanders with the highest rate of 17.2/100 females. Poverty, recent immigration, political climate, lack of access to safe neighborhoods/healthy foods/transportation, cultural beliefs and language barriers, violence and lack of knowledge of the available resources and services all contribute to health disparities in our county.

SCC is an overall affluent county with ample providers caring for pregnant women and children located throughout our diverse communities. Limited providers and resources continue to exist for behavioral and dental health. Locations where social services are provided are easily accessible by public transportation and dispersed throughout the county. Although there are ample providers/services, transportation can still be a barrier for many in accessing care. Additional barriers include public knowledge and awareness of services available or eligibility, cultural beliefs and practices, socioeconomic and ecologic factors and social stigma of receiving care for behavioral health issues.

Our PHD acknowledges the role historical trauma, ACEs, racism and structural racism plays in the health of individuals and in communities. Resources have been dedicated to educate PHD Staff as well as other county department staff on building momentum toward change in addressing government's role in health equity. MCAH and BIH staff are active participants and leaders in this effort. In 2015 the SCC Health and Hospital System/PHD was requested by the Board President to conduct a comprehensive children's health assessment. This brought together traditional and nontraditional stakeholders to identify priorities, creating equitable, action-oriented programs, policies and practices to improve the lives of all children, youth and their families in Santa Clara County. With the release of the assessment in 2016 and 2017, areas of improvement includes culturally competent services, bullying against children of color and LGBTQ youth, family financial disparities, and navigation and access to health care.