Appendix A

Marin County Community Health Needs Assessment Health Need Profiles

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Indicator Key

Throughout the health need profiles, California state average estimates are included where available for reference. Differences between Marin County and California state estimates are not necessarily statistically significant, and are color coded as follows:

Marin County performs ≥ 1% (or units) better than California

Marin County performs within 1% (or units) better or worse than California, or no California are data available

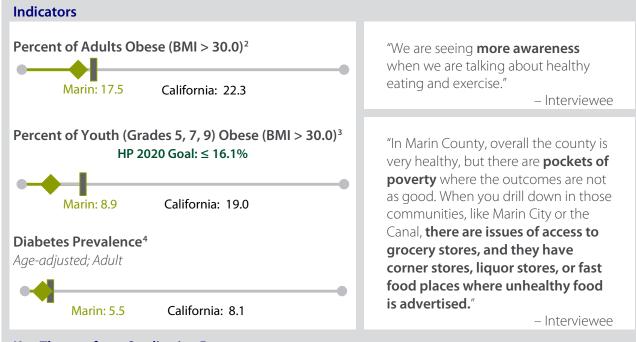
Marin County performs ≥ 1% (or units) worse than California



Obesity and Diabetes

Overweight and obesity are strongly related to stroke, heart disease, some cancers, and type 2 diabetes. These chronic diseases represent some of the leading causes of death nationwide. Although some indicators demonstrate better health In Marin County than California State on average, there is still a high prevalence of adults and youth in Marin County who are overweight or obese. Data also indicate that Marin County residents have a higher risk of heart disease compared to California residents on average, and that they experience limited access to affordable healthy food. Primary data corroborates lack of healthy and affordable food as a need, and issues related to healthy eating and active living arose as key themes in focus groups and interviews. Low-income residents, older adults, and youth are also disproportionately face barriers to healthy eating and active living.

Key Data



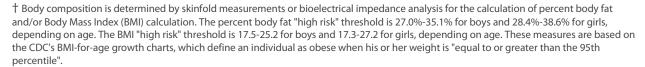
Key Themes from Qualitative Data

Economic Disparities Drive Health Disparities

- Few affordable grocery stores
- Healthy food options are more expensive than calorie dense, less nutritious options
- Stigma associated with accessing healthy eating resources such as food banks



- Pace of life and reliance on technology as drivers of poor eating habits and exercise habits
- Healthy eating and active living as drivers of positive mental health outcomes



Note: California state average estimates are included for reference. Differences between Marin County and California state estimates are not necessarily statistically significant.



Obesity and Diabetes (continued)

Supporting Data and Key Drivers

Supporting Data: Related He	ealth Outcomes	
Diabetes Mortality, Adult Age-adjusted mortality rate per 100,000 population ⁵	Diabetes Prevalence, Older Adult % of Medicare fee-for-service population with diabetes ⁶	Diabetes Hospitalizations Rate of diabetes-related discharge per 10,000 discharges ⁷
8.9 20.8 Marin California	15.2 26.6 Marin California	5.1 10.4 Marin California
Overweight, Adult % of adults with BMI between 25.0 and 30.08	Overweight Youth % of 5,7,9 grade with "Needs Improvement" for body composition ⁹	
30.8 35.9 Marin California	16.3 19.3 Marin California	
Stroke Mortality, Adult Age-adjusted mortality rate per 100,000 pop. 10	Ischaemic Heart Disease Prevalence, Older Adult % of Medicare fee-for-service population ¹¹	Heart Disease Prevalence, Adult % of adults with any kind of heart disease 12. *
27.6 37.4 Marin California	23.6 37.4 Marin California	7.6 6.1 Marin California
Driver: Healthy Eating		
Fruits and Vegetables, Adults % adults consuming < 5 servings of fruit and vegetables 13	WIC Authorized Food Stores % of food stores authorized to accept WIC program benefits per 100,000 pop vegetables 14	Low Food Access % of population with low food access 15 17 1 1 / 2
64.3 /1.5 Marin California	9.0 15.8	Marin California
Fruits and Vegetables-Youth % youth age 2-13 consuming <5 servings of fruit and vegetables ¹⁶	Marin California	
50.1 47.4		
Marin California		

^{*}Unstable county estimate; findings should be interpreted with caution.

Obesity and Diabetes (continued)

Driver: Physical Activity

Adult Activity

% adults with no leisure time activity 17

10.3

16.6

iviaii

California

Youth Fitness

% youth in grades 5,7,9 with "high risk" or "needs improvement" aerobic capacity²⁰

23.7

35.9

Marin

California

Youth Activity

% of youth in Marin County who exercised vigorously for at least 20 minutes during 4 or more of the past 7 days 18

75.C

% of 7th graders

67.0

% of 9th arader:

54.0

% of 11th graders

Physical Environment

% population living ½ mile from a park 19

68.0

58.6

Marin

California

"Having resources to eat right, to exercise— all the preventive things are luxuries for lower income folks."

- Interviewee

Driver: Clinical Care

Diabetes Management

% diabetic Medicare patients with HbA1c test²¹

84.1

81.5

Marin

California

Driver: Social and Economic Risks

Food Insecurity

% population experiencing food insecurity²²

11.5

10.

Marin

California

Poverty and Food Access % of low-income pop. with low food access²³

2.0

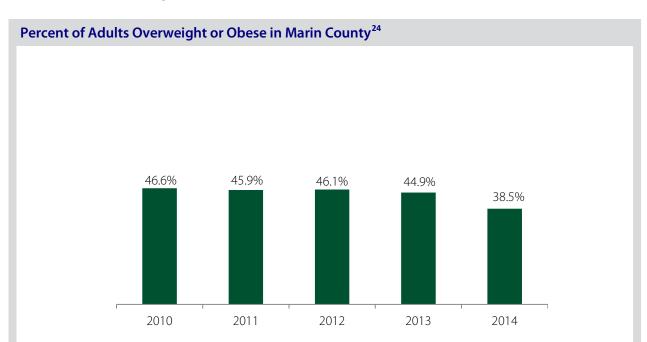
3.4

Marin

California

Obesity and Diabetes (continued)

Trends and Disparities



The percent of adults who are overweight or obese has been slowly decreasing over time since 2010. Monitoring this trend in future years is important to identify if the decline continues.

Populations with Greatest Risk in Marin County

Age disparities

Interviewees and focus group participants noted that older adults are disproportionately impacted by this health issue. Access to healthy food and the ability to maintain a healthy lifestyle are more limited for older adults, particularly those living on a fixed and low income.

Overall, trends in youth obesity in Marin County remain constant. While youth in focus groups emphasized that Marin County provides a supportive environment to make healthy dietary and lifestyle choices, interviewees noted that children and adolescents are a particularly vulnerable population because developing healthy habits during youth sets the foundation for healthy eating and active living during adulthood. One interviewee said, "I'm focusing more on adolescents, [with] a broader look at nutrition – where are they eating and how are they eating. I see more kids grabbing food whenever they can, even if it's healthy. They eat on the run a lot and then not at all. Eating habits, and when they eat as well, are important."

Targeted initiatives in specific school districts seek to reduce disparities in youth obesity. Evaluations of these programs may provide additional information about how youth weight status is changing over time.

Obesity and Diabetes (continued)

Examples of Existing Community Assets†

Clinics and Schools





Parks and Recreations



Community Recommendations for Change[†]

Changes in clinical care

- Increase linguistically and culturally appropriate services
- Increase nutritionist services in community clinics
- Change payment structure so that healthcare workers are not dis-incentivized to talk about upstream HEAL factors

Changes in built environment

- Increase education about HEAL for the whole family
- Increase safe places to exercise in low income communities
- Create more affordable exercise/gym facilities

 \dagger Assets and recommendations excerpted from qualitative data. For a comprehensive list of county assets and resources, reference http://211bayarea.org/marin/.

¹ "Obesity Health Risks," Harvard School of Public Health, Obesity Prevention Source, accessed November 2015, http://www.hsph.harvard.edu/obesity-prevention-source/obesity-consequences/health-effects/.

² Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2012.

³ California Department of Education, FITNESSGRAM® Physical Fitness Testing, 2013-14.

⁴ Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2012.

⁵ California Department of Public Health, County Health Profile Marin County, 2011-13.

⁶ Centers for Medicare and Medicaid Services, 2012.

⁷ California Office of Statewide Health Planning and Development, OSHPD Patient Discharge Data. Additional data analysis by CARES, 2011.

⁸ Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES, 2011-12.

⁹ California Department of Education, FITNESSGRAM® Physical Fitness Testing, 2013-14.

¹⁰ University of Missouri, Center for Applied Research and Environmental Systems. California Department of Public Health, Death Public Use Data, 2010-12.

¹¹ Centers for Medicare and Medicaid Services, 2012.

¹² California Health Interview Survey, 2013-14.

¹³ Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse, 2005-09.

¹⁴ US Department of Agriculture, Economic Research Service, USDA - Food Environment Atlas, 2011.

¹⁵ US Department of Agriculture, Economic Research Service, USDA - Food Environment Atlas, 2010.

¹⁶ California Health Interview Survey, 2011-12.

¹⁷ Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, 2012.

¹⁸ California Healthy Kids Survey, 2013-14.

¹⁹ US Census Bureau, Decennial Census. ESRI Map Gallery, 2010.

²⁰ California Department of Education, FITNESSGRAM® Physical Fitness Testing, 2013-14.

²¹ Dartmouth College Institute for Health Policy and Clinical Practice, Dartmouth Atlas of Health Care, 2012.

²² Feeding America. Child Food Insecurity Data, 2012.

²³ US Department of Agriculture, Economic Research Service, USDA - Food Access Research Atlas, 2010.

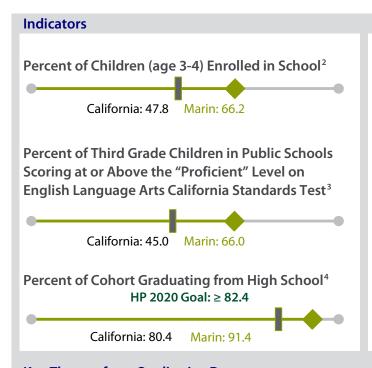
²⁴ California Health Interview Survey, 2010-14.

Education



Educational attainment is linked to health: people with low levels of education are prone to experience poor health outcomes and stress, whereas people with more education are likely to live longer, practice healthier behaviors, experience better health outcomes, and raise healthier children.¹ While some education outcomes, such as high school graduation rate, are higher for Marin County than the rest of California, disparities, particularly among English Language Learners, African American, and Latino students, indicate that education is a high concern in the county. In secondary data, English Language Learners are less likely to pass the high school exit exam in Math and English Language Arts compared to their peers in Marin County and compared to English Language Learners on average in California. In primary data, community members and key stakeholders highlighted education as an important health need and recommended strategies to improve county-wide access and decrease disparities such as increasing investment in early childhood education.

Key Data



"We're making strides in expanding early childhood education [ECE] in Marin City because high school graduation rates can be linked to ECE so we have to move upstream, starting from parents ability to care for their children and institutional partners that can provide excellent services for young folks so they're fully developed."

- Interviewee

Key Themes from Qualitative Data

- The educational gap is wide for immigrants and English-language learners.
- There is a need for more awareness around bullying in schools.
- Students feel a great deal of pressure to succeed academically.
- College courses are expensive and unattainable for many, particularly undocumented immigrants.

Note: California state average estimates are included for reference. Differences between Marin County and California state estimates are not necessarily statistically significant.

Education (continued)



Supporting Data

Early Childhood Education

Head Start programs rate % of children enrolled in Head Start, per 10,000 children under age 5.5

California

English Language Learners

English Language Performance (Grade 10) % of all students versus English language learners (grade 10) who passed the California High School Exit Exam in English Language Arts⁶

California: ELL

Math Performance (Grade 10)

% of all students versus English language learners (grade 10) who passed the California High School Exit Exam in Math⁷

California: ELL

Retention/Discipline

Expulsion

Rate of expulsion per 100 enrolled K-12 public school students8

Suspension

Rate of suspension per 100 enrolled K-12 public school students9

Bullying

Bullying

Percent of 11th grade students reporting harassment or bullying on school property within the past 12 months for any reason. 10

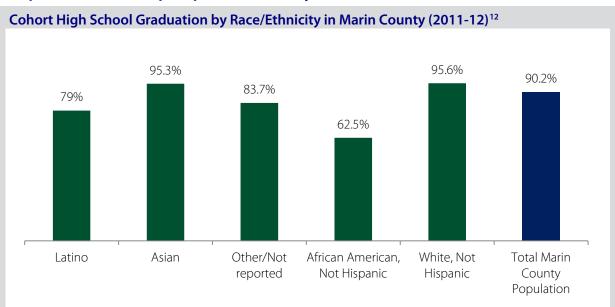
Post-Secondary Education

Population Educational Attainment % of population age 25+ with Associates Degree or higher11

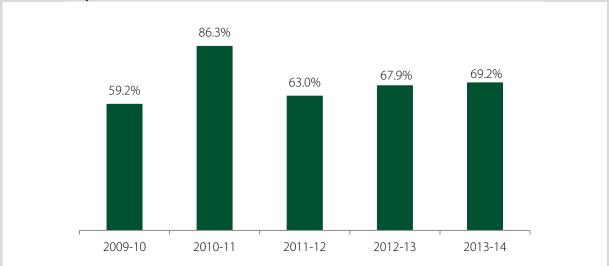
Marin County Community Health Needs Assessment Education (continued)



Populations Disproportionately Affected



Percent of Cohort Graduating High School Among English Language Learner Students in Marin County¹³



Disparities in education attainment persist in Marin County. In particular, **African American** and **Latino** students have are less likely to graduate high school with their cohort. **English Language Learners** are also less likely to graduate in four years; this trend is increasing overall since 2009-10. "Student achievement for low-income students and students of color in Marin falls far below the achievement of more advantaged students in the County. The gap in achievement begins at an early age and increases over time." ¹⁴

Education (continued)



Assets and Recommendations

Examples of Existing Community Assets†

School Districts



First 5 Commission



Community Organizations/Collaboratives



Community Recommendations for Change[†]

- Take a cross-sectorial approach and collaboration to close gaps in educational attainment (e.g., public sector, schools, philanthropy, nonprofit, business communities, etc.)
- Change approaches to addressing needs from a single-issue perspective to a holistic perspective—recognizing that housing, economic security, access to health insurance, and education are inter-related and impact health.
- Support and target resources for universal preschool—early childhood education is essential for future educational success.

† Assets and recommendations excerpted from qualitative data. For a comprehensive list of county assets and resources, reference http://211bayarea.org/marin/.

¹ "Exploring the Social Determinants of Health: Education and Health," Robert Wood Johnson Foundation, Accessed October 19, 2015, http://www.rwjf.org/content/dam/farm/reports/issue_briefs/2011/rwjf70447.

² US Census Bureau, American Community Survey, 2014.

³ California Department of Education, Standardized Testing and Reporting (STAR) Results, 2013.

⁴ California Department of Education, 2013.

⁵ US Department of Health & Human Services ,Administration for Children and Families. 2014.

⁶ California Department of Education, 2013-14.

⁷ Ibid.

⁸ California Department of Education, 2013.

⁹ Ibid

¹⁰ California Department of Education, California Healthy Kids Survey and California Student Survey (WestEd), 2011-13.

¹¹ US Census Bureau, American Community Survey, 2009-13.

¹²California Department of Education, 2011-13.

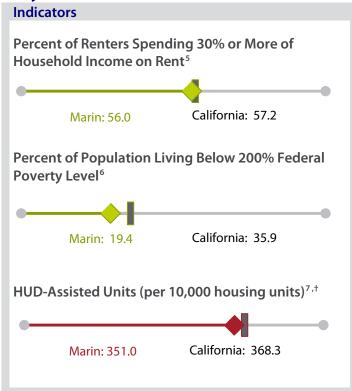
¹³ California Longitudinal Pupil Achievement Data System (CALPADS), 2009-2014.

¹⁴ Marin Community Foundation, School Readiness in Marin County, 2014.

Economic & Housing Insecurity

Economic security is very strongly linked to health; having limited economic resources can impact access to opportunities to be healthy, including access to healthy food, medical care, and safe environments. In addition to good paying jobs, access to stable and affordable housing is also an essential foundation for good health. Substandard housing and homelessness tends to exacerbate other physical and mental health issues. High cost of living contributes to both economic and housing issues. In Marin County, the cost of living is higher in the county than California average, as is the Gini Coefficient of Income Inequality, revealing blind spots in traditional poverty measures. Additionally, 1,309 individuals are homeless, 835 of which are unsheltered. Lack of affordable housing was a key issue raised by community residents and stakeholders. Furthermore, reports indicate that the low-income Canal neighborhood of San Rafael and the African American population in Marin City face risk of displacement due to gentrification. 3.4

Key Data



"Marin tied for the most expensive housing - as San Francisco and New York City. What that means is that **people who are most vulnerable get squeezed out**. They are already in the worst housing, and as rent goes up with no rent control, [and stifled development], more people are getting squeezed out. People come from San Francisco, but people who were living in Marin, the working poor, they are pushed out."

Interviewee

"It's the combination of pay, no housing, and the limits on development. More and more people have housing insecurities. Then they can't address other health issues or take care of basic needs like buying medication."

Interviewee

Key Themes from Qualitative Data

Lack of affordable housing

- Increase in cost of housing
- Overcrowded housing
- Increase in homelessness
- Housing affordability tied to income inequality

Employment Opportunities

- Strong economy in Marin, though jobs are limited and service jobs pay minimum wage
- Lack of transportation to jobs

† Reports counts of all housing units receiving assistance through the US Department of Housing and Urban Development (HUD). Assistance programs include Section 8 housing choice vouchers, Section 8 Moderate Rehabilitation and New Construction, public housing projects, and other multifamily assistance projects. Units receiving Low Income Housing Tax Credit assistance are excluded from this summary. This measure does not indicate the need for HUD-Assisted Units, which may be lower in Marin County than other parts of the state.

Note: California state average estimates are included for reference. Differences between Marin County and California state estimates are not necessarily statistically significant.



Supporting Data and Key Drivers

Supporting Data: Housing Quality

Vacant Housing Units % of housing units that are vacant^{8,†}

7.6 | 8.6

Overcrowded Rental Environments % of renter occupied households with more than one person per room⁹

7.4 | 13.3

"Housing is not affordable, so there are families living with other families and multiple children sharing bedrooms. People cannot afford their own home to live here. This is a difficult situation, mentally and emotionally and leads to [poor] health outcomes as well."

— Interviewee

Supporting Data: Poverty and Unemployment

Gini Coefficient of Income Inequality is **0.5164** in Marin County, compared to **0.4782** in California State. This indicates a *more uneven distribution of income* among households in Marin County compared to across the state.¹⁰

Children in Poverty

% of children (age < 18) living below 100% of Federal Poverty Level 11,44

8.9

22.2

Marin

California

Older Adults in Poverty

% of adults (age 65+) living below 100% of Federal Poverty Level 12,14

5.5

Marin

9.9

California

Unemployment Rate

% of civilian non-institutionalized population age 16 and older that is unemployed 13

4.2

7.4

rin California

Driver: Education

Population with Less than High School Education

% population age 25+ with no high school diploma¹⁴

7.6

18.8

Marin

California

3rd Grade Reading Proficiency

% of all public school students tested in 3rd grade who scored proficient or advanced on the English Language Arts California Standards Test ¹⁵

66.0

46.0

Marin

California

Driver: Cost of Living

Median Household Income¹⁶

\$91k | \$61K

Marin California

Living Wage

Annual income required to support one adult and one child¹⁷

\$61k | \$53k

Marin

California

"If we address some of the

housing and economic issues for people in poverty, their health outcomes change dramatically. It's not just talking about healthy

It's not just talking about healthy eating. How do we change the economics?"

Interviewee

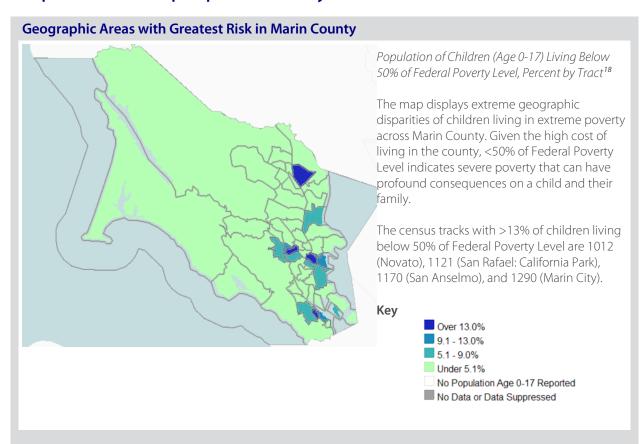
†† Due to high cost of living, income <100% of FPL indicates severe poverty in Marin County.

[†] Vacant housing reported as an indicator of blight across the city. Research demonstrates links between foreclosed, vacant, and abandoned properties with reduced property values, increased crime, increased risk to public health and welfare, and increased costs for municipal governments. (U.S. Department of Housing and Urban Development, Evidence Matters, Winter 2014).



Economic & Housing Insecurity(continued)

Populations Disproportionately Affected



Populations with Greatest Risk in Marin County

Interviewees and focus group participants emphasized those least able to afford quality housing are the low-income, aging, and youth populations and single mother families in Marin County, and particularly in Canal and West Marin.

Aging Population

- Older adults in Marin County are the "hidden poor," with limited, fixed incomes, but not eligible for federal support
- Caregivers can't afford to live in Marin County
- Increasing population of older adults who are homeless because they are priced out of the rental market

Youth

- Unsafe and overcrowded living environment places young people at risk for abuse
- Homeless youth need rehabilitation and residential substance treatment programs
- Abusive home environments lead to homelessness



Economic & Housing Insecurity(continued)

Assets and Recommendations

Examples of Existing Community Assets[†]

Renaissance Center Marin (Job Development)





Marin City Community Development



Community Recommendations for Change[†]

Workforce development

- Support workforce development programs
- Develop employment options for older adults and people with disabilities
- Improve transportation support to jobs

Address rising costs of housing and living

- Political leadership (e.g., County and Health and Human Services) to direct resources towards innovative solutions to addressing affordable housing need (e.g., high-density housing with mixed-incomes and interdependent communities)
- Increase access to affordable child care

Strengthen educational opportunities

- Focus on early childhood education
- Work in collaboration with other sectors (e.g., schools) to break silos and address needs

† Assets and recommendations excerpted from qualitative data. For a comprehensive list of county assets and resources, reference http://211bayarea.org/marin/.

10 Ibid.

¹¹ Ibid.

¹² Ibid.

¹³ Ibid.

¹ "Health & Poverty," Institute for Research on Poverty, Accessed October 19, 2015, http://www.irp.wisc.edu/research/health.htm.

² Marin County Homeless Point-in-Time Census and Survey, 2015.

³ Marin Grassroots and Center for Community Innovation, UC Berkeley, "Canal: An Immigrant Gateway in San Rafael at Risk," 2015.

⁴ Marin Grassroots and Center for Community Innovation, UC Berkeley, "Marin City: Historic African-American Enclave at Risk," 2015.

⁵ US Census Bureau, American Community Survey, 2010-14.

⁶ US Census Bureau, American Community Survey, 2009-13.

⁷ US Department of Housing and Urban Development, 2013.

⁸ US Census Bureau, American Community Survey, 2009-13.

⁹ Ibid.

¹⁵ California Department of Education, Standardized Testing and Reporting (STAR) Results, 2013.

¹⁶ US Census Bureau, American Community Survey, 2009-13.

¹⁷ Calculated from *livingwage.mit.edu*; 2015.

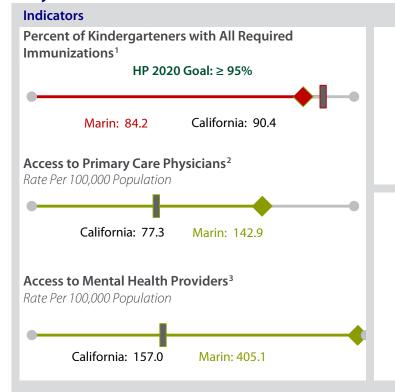
¹⁸ US Census Bureau, American Community Survey, 2009-13.

Access to Health Care



Access to comprehensive, affordable, quality physical and mental health care is critical to the prevention, early intervention, and treatment of health conditions. While Marin County scores better than the California state average with respect to many indicators measuring healthcare access, the county continues to work towards providing affordable and culturally competent care for all residents. This area was identified as a health need because indicators measuring the percent of insured population receiving Medi-Cal and the percent of kindergarteners with all required immunizations scored worse than state benchmarks, and because barriers to access including limited physicians accepting public insurance and limited access to specialty care were key themes in focus groups and interviews. With the implementation of the Affordable Care Act (ACA), a majority of adults in Marin County are able to access insurance coverage and access regular healthcare. However, disparities persist. Specifically, lower income residents have difficulty accessing specialty services and mental health services. Additionally, older adults in Marin County – specifically, the "hidden poor" – face challenges in accessing care.

Key Data



"Many physicians in Marin County are at capacity. They are more likely to fill their schedule with patients that are commercially insured because the **payment rates** are better."

—Interviewee"

I think mental health services still remain a real challenge and that's probably because of the lack of adequate compensation for medical services and the lack of service providers who are willing to see patients in our vulnerable communities who carry public insurance."

Interviewee

Key Themes from Qualitative Data

- As a result of the Affordable Care Act, more Marin residents have health care coverage.
- Low-income residents lack access to mental health services, particularly outpatient services.
- It is more difficult for Medi-Cal patients to access specialty care services.
- There are limitations to dental coverage, it often does not cover prevention services.
- Providers who see low-income patients are at capacity.

Note: California state average estimates are included for reference. Differences between Marin County and California state estimates necessarily statistically significant.

Marin County Community Health Needs Assessment

Access to Health Care (continued)

Supporting Data and Key Drivers

Supporting Data

Federally Qualified Health Centers Rate per 100,000 population⁴

California

Lack of Primary Care Professionals % of population living in a primary care health professional shortage area^{5,†}

Marin

16,774

Number of approved Covered California applications in Marin County during first and second ACA enrollment periods (January 2014 -February 2015)6

Driver: Insurance

Uninsured Population, Adult % of population without health insurance (age 18-64)⁷

Uninsured Population, Children % of child population (<age 19) without health insurance⁸

Insured Population Receiving Medi-Cal

% of insured population receiving Medi-Cal⁹

Supporting Data: Indicators of Health Care Access and/or Utilization

Breast Cancer Screening % of female Medicare enrollees with mammogram in past 2 years ¹⁰

California

Pap Test

% of females age 18+ with regular pap test (ageadjusted) 11

Marin

California

Colon Cancer Screening

% of adults age 50+ who self-report ever having had a sigmoidoscopy or colonoscopy (ageadjusted) 12

Marin

California

Vaccinated Older Adults % of adults age 65+ who have ever received a pneumonia vaccination 13

Preventable Hospital Events Preventable hospitalization rate among Medicare enrollees, per 1,000 population 14,++

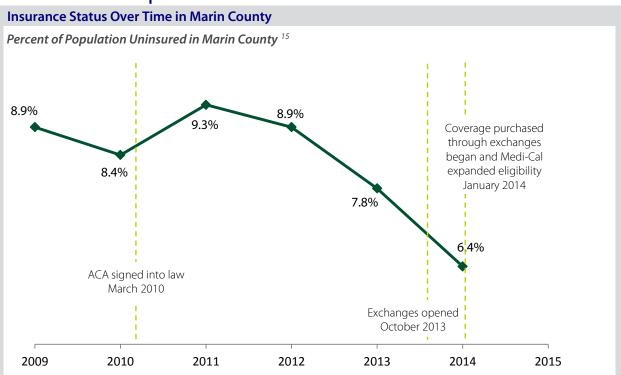
† Primary Care Health Professional Shortage Area (HPSA) is defined as an area with 3,500 or more people per primary care physician (U.S. Department of Health and Human Services, http://www.hrsa.gov/shortage/). As a note, there is no generally accepted ratio of physician to population ratio. Care needs of an individual community will vary due to a myriad of factors. Additionally, this indicator does not take into account the availability of additional primary care services provided by Nurse Practitioners and Physician Assistants in an area.

†† This indicator reports the patient discharge rate for conditions that are ambulatory care sensitive (ACS). ACS conditions include pneumonia, dehydration, asthma, diabetes, and other conditions which could have been prevented if adequate primary care resources were available and accessed by those patients.



Access to Health Care (continued)

Trends and Disparities



This graph demonstrates yearly estimates of the percent of the total population in Marin County that was uninsured over the previous five years. Since the Covered California Insurance Exchange Marketplace opened in 2013 and coverage through Covered California plans began in 2014, the percent of the population that is uninsured has decreased to 6.4%.

While a greater percentage of the population is insured following health care reform implementation, focus group participants noted challenges to accessing care such as health centers that seem unable to meet high demands and a lack of transportation to health care.

"I think another challenge in Marin, is to go from San Rafael to Novato feels like you're going to New York. People in San Rafael don't know Novato is part of Marin County, and Sausalito and the west side, Point Reyes, is way over the hill. It's broken into pockets, which makes access difficult."

-Interviewee

Populations with Greatest Risk in Marin County

Age disparities

Older adults in Marin County, particularly the "hidden poor" have less access to health services as a result of isolation, lack of financial resources, and transportation issues.

Other disparities

Lower income residents have difficulty accessing care, particularly specialty care.



Access to Health Care (continued)

Assets and Recommendations

Examples of Existing Community Assets[†]

Community Organizations (e.g., Whistlestop)



Community Clinics and Mobile Clinics



Community Recommendations for Change[†]

- Provide more specialist services
- Provide more mental health services, particularly outpatient services for lower income residents
- Develop models to encourage physicians to see patients with less profitable insurance
- Continue funding and support for adolescent health services
- Enhance transportation opportunities, particularly for older adults

† Assets and recommendations excerpted from qualitative data and Marin County CHNA Collaborative Input. For a comprehensive list of county assets and resources, reference http://211bayarea.org/marin/.

¹ California Department of Public Health Immunization Branch, Immunization Branch, Kindergarten Assessment Results, 2014-15.

² US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File, 2012.

³ University of Wisconsin Population Health Institute, County Health Rankings, 2014.

⁴ US Department of Health & Human Services, Center for Medicare & Medicaid Services, Provider of Services File, 2014.

⁵ US Department of Health & Human Services, Health Resources and Services Administration, Health Resources and Services Administration, 2015.

⁶ Marin County Department of Health and Human Services, 2015.

⁷ US Census Bureau, American Community Survey, 2014.

⁸ Ibid

⁹ Ibid.

¹⁰ Dartmouth College Institute for Health Policy & Clinical Practice, Dartmouth Atlas of Health Care, 2012.

¹¹ Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse, 2006-12.

¹³ Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System, 2006-12.

¹⁴ Dartmouth Atlas of Healthcare, 2012.

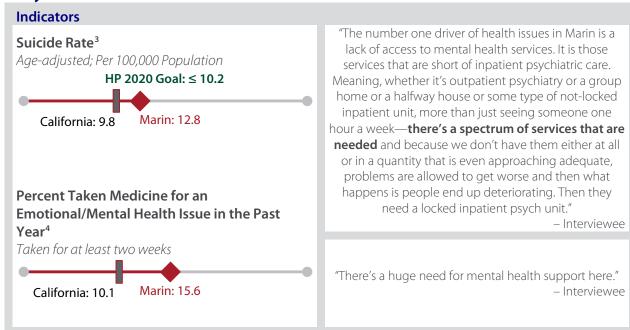
¹⁵ US Census Bureau, American Community Survey, 2009-2014..

Mental Health



Mental health includes emotional, behavioral, and social well-being. Poor mental health, including the presence of chronic toxic stress or psychological conditions such as anxiety, depression or Post-Traumatic Stress Disorder, has profound consequences on health behavior choices and physical health.¹² Secondary data identified specific areas in which Marin County residents demonstrate higher need than California residents on average, including suicide rate, taking medicine for an emotional/mental health issue, and reporting needing mental health or substance abuse treatment among adults. Mental health was also raised as a key concern among community members and other key stakeholders, who discussed barriers to accessing treatment among other key themes. Mental health issues frequently co-occur with substance abuse and homelessness. Racial disparities in Marin County are evident, and the Latino population was highlighted in primary data as a population of concern. Youth, older adults and incarcerated individuals were also noted as particularly high-risk populations for mental health concerns.

Key Data



Key Themes from Qualitative Data

Barriers to treatment

- Limited outpatient services
- Limited services along the spectrum of care
- Associated stigma, particularly among older adults and immigrants
- Non-acute needs are not met

Awareness

- Placed lower on hierarchy of needs or not grouped with primary care needs

Co-morbidity

- Co-occurrence with prescription drug use or alcoholism

Note: California state average estimates are included for reference. Differences between Marin County and California state estimates are not necessarily statistically significant.

Mental Health (continued)



Supporting Data and Key Drivers

Supporting Data: Mental Health Among Older Adults

Depression, Older Adults

% of Medicare beneficiaries with depression⁵

11.2 | 13.4

Mental or Physical Disability

% of older adults living with a mental, physical, or emotional disability⁶

California

Supporting Data: Mental Health Among Youth

Depression, Youth

% of 11th grade students who felt sad or hopeless almost every day for 2 weeks or more

26.7 | 32.5

California

Suicidal Thoughts, Youth

of 11th graders in Marin County have seriously considered suicide in the past 12 months.8

Bullying, Youth

% of 11th grade students who report harassment or bullying on school property within the past 12 months for any reason ⁹

1./ | 27.6

"My daughter was bullied a lot, which is what started everything. No matter how much we complained to the school, it just seemed like there was never any assistance. They made it seem like it was her."

- Focus group participant

Driver: Access to Mental Health Care

Adults Needing Treatment

% of adults reporting need for treatment for mental health, or use of alcohol/drug^{10,}*

19.5 | 15.9

Mental Health Providers

Rate of mental health providers per 100,000 population¹¹

405.1 | 157.0

"The number one issue is access to care... It's not an evenly distributed problem. It is especially true when it comes to mental health services. We have more psychiatrists per capita than any other county but for indigent populations it is almost impossible to find a psychiatrist who will see you on an outpatient basis."

Interviewee

Driver: Substance Abuse and Homelessness

Drug-Poisoning Deaths

Total number of deaths in Marin County due to drug-poisoning in 2011. 12

Homelessness

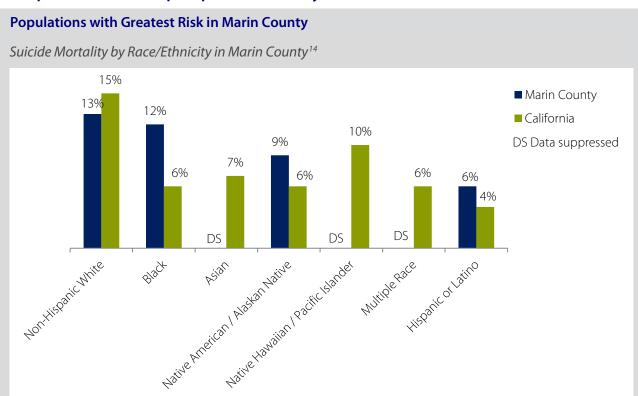
Total number of homeless individuals in Marin County. 13

^{*}Unstable county estimate; findings should be interpreted with caution.



Mental Health (continued)

Populations Disproportionately Affected



Other Vulnerable Populations Identified in Qualitative Data

Disparities by age:

- Children 0-5 years old are particularly vulnerable to stress and adversity.
- Older adults have less awareness or face greater stigmatization around mental health.
- Older adults living alone may have less social support.

Disparities by geography:

- Geographically isolated communities struggle to access resources.
- Residents of **Canal** were noted as a particular community at risk.

Disparities by race/ethnicity:

 Latino residents were noted as a population of particularly high risk in interviews and focus groups. Other notable disparities:

- Single parents are less likely to have time to access mental health services, and are more likely to experience high levels of stress.
- Immigrants suffer disproportionately from stigma in accessing services.
- Incarcerated individuals may not receive adequate mental health care.

Mental Health (continued)

Assets and Recommendations

Examples of Existing Community Assets†

Nonprofits





FQHCs / Safety Net Clinics / Wellness Clinics



Community Recommendations for Change

Increase awareness:

- Increase education about mental health to decrease stigma
- Increase funding for mental health outreach and education (not just direct services)

Increase access to services:

- Increase free or low cost mental health services
- Increase trauma-informed care
- Increase coordinated care
- Bring mental health services closer to Latino communities
- Staff bilingual mental health providers

Work across sectors:

- Address basic needs, including access to affordable housing
- Involve faith-based communities in social service outreach around mental health
- Integrate mental health services into community life
- Link Marin City Jail to social services for mental illness, substance abuse, alcoholism

⁹ California Healthy Kids Survey, 2011-13.

.....

[†] Assets and recommendations excerpted from qualitative data. For a comprehensive list of county assets and resources, reference http://211bayarea.org/marin/.

¹ Chapman DP, Perry GS, Strine TW. "The Vital Link Between Chronic Disease and Depressive Disorders," Preventing Chronic Disease, 2005; 2(1):A14.

² Felitti VJ, Anda RF, Nordenberg D, Williamson DF, Spitz AM, Edwards V, Koss MP, Marks JS, "Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults: the Adverse Childhood Experiences (ACE) Study." American Journal of Preventive Medicine ,1998; 14:245–258.

³ University of Missouri, Center for Applied Research and Environmental Systems. California Department of Public Health, Death Public Use Data, 2010-12.

⁴California Health Interview Survey, 2014.

⁵ Centers for Medicare and Medicaid Services, 2012.

⁶ California Health Interview Survey, 2014.

⁷ California Healthy Kids Survey, 2013-14.

⁸ Ibid.

¹⁰ California Health Interview Survey, 2014.

¹¹ University of Wisconsin Population Health Institute, County Health Rankings, 2014.

¹² RxSafe Marin Report Card; California Department of Public Health Vital Statistics, 2011.

¹³ Marin County Homeless Point-in-Time Census and Survey, 2015.

¹⁴ University of Missouri, Center for Applied Research and Environmental Systems. California Department of Public Health, Death Public Use Data. 2010-12.

Substance Abuse



Substance abuse, including use or abuse of tobacco, alcohol, prescription drugs, and illegal drugs, can have profound health consequences. Substance abuse was identified as a health need of concern in multiple existing data sources, as well as in interviews and focus groups. In particular, use and abuse of prescription drugs is recognized as a health need of concern. Among youth, percentages of students reporting binge drinking and being "high" from drug use are higher for Marin County than California overall. Interview and focus group participants identified Fairfax, West Marin, and Canal as areas of high risk for drug abuse.

Key Data



Key Themes from Qualitative Data

- Prescription drugs are readily available
- Perceptions that drug use among youth is treated more casually in Marin than elsewhere
- Youth abuse of Adderall or Ritalin, particularly among middle and upper-class youth
- Methamphetamine use
- Stigma as a deterrent to seeking help for substance abuse problems
- Substance abuse issues co-occur with homelessness and mental health issues
- Substance abuse, particularly opioid abuse, used to "self-medicate"

Note: California state average estimates are included for reference. Differences between Marin County and California state estimates are not necessarily statistically significant.

*Unstable estimate; findings should be interpreted with caution.

Interviewee

Substance Abuse (continued)



Supporting Data and Key Drivers

Supporting Data: Substance Abuse Among Youth

Tobacco Use, Youth % of 11th grade students using cigarettes any time within last 30 days4

California

Driving Under Influence, Youth % of 11th grade students reporting driving after drinking (respondent or by friend) 5

Marijuana Use, Youth % of 11th grade students reporting marijuana use within the last 30 days ⁶

Marin

California

Supporting Data: Tobacco and Alcohol Use

Tobacco Use % of population smoking cigarettes (age adjusted)7

Alcohol-related Arrests Rate of arrests for alcohol related offenses (per 100,000)⁸

1,501.0 | 1,203.0

Alcohol Access Liquor store rate (per 100,000)9

California

Supporting Data: Drug Use

Total Deaths Drug poisoning deaths (total) 10

Marin 2013

Unintentional Deaths Drug poisoning deaths (unintentional) 11

Narcotic Drug Use

Median number of pills per narcotic prescription 13

Access to Prescription Drugs

% of RxSafe Marin Survey respondents think it would be very or somewhat easy to obtain prescription pain, sleep, or calming medication from a doctor in their community 1

Leftover Prescription Drugs 12

% of RxSafe Marin Survey respondents had pills leftover from last pain medication prescription

% of those with pills leftover kept, sold, or gave away the leftover pills

% of RxSafe Marin Survey respondents reported having expired, unused or leftover prescription medication in their home currently

Key Themes About Drivers

- Social isolation and a lack of activities are drivers of substance
- Untreated mental health problems are drivers of substance abuse
- Substance abuse problems are drivers of poor health outcomes
- Lower income individuals have fewer resources for recovery

"Substance abuse is a huge issue but I put it in a bucket with mental health issues, because frequently [...] there's a connection there

[...]."

-Interviewee

Substance Abuse (continued)



Populations Disproportionately Affected, Assets, and Recommendations

Geographic Areas with Greatest Risk in Marin County

Interviewees and focus group attendees indicated that Fairfax, West Marin, and Canal are areas of high concern for substance abuse issues.

Populations with Greatest Risk in Marin County

Residents who do not have the financial resources to obtain expensive rehabilitation treatment, but whose income is too high to qualify for public programs and low-income treatment options, were identified as a population of high concern.

Examples of Existing Community Assets[†]

Non-Medical Detoxification Programs (e.g., Vine Detoxification Program)



Outpatient and Residential Treatment Centers (e.g., Marin Treatment Center, Center Point)



Community Recommendations for Change[†]

"There's the whole issue of harm reduction versus recovery. Sometimes you have to make sacrifices. I used to go to the needle exchange. Some people would say they're facilitating my using, but it helped me from catching Hepatitis C and A."

- Focus Group Participant

- Look to other county models of addressing substance abuse, particularly those that embrace partnerships among community organizations including schools
- Increase in activities for youth, particularly at night
- Parent education and outreach related to youth substance abuse
- There is a need for recovery programs for women
- Need for medically assisted detox facility

"'[We] should be looking at models where agencies are partnering with preschool, schools, health care centers, wellness centers, where they are physically on site."

† Assets and recommendations excerpted from qualitative data and Marin County CHNA Collaborative. For a comprehensive list of county assets and resources, reference http://211bayarea.org/marin/.

⁴ Ibid.

5 Ibid.

-Interviewee

⁸ California Community Prevention Initiative (CPI), 2008. ⁹ US Census Bureau, County Business Patterns. Additional data analysis by CARES, 2012.

¹ California Health Interview Survey, 2014.

² California Healthy Kids Survey, 2011-13.

⁷ Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse. US Department of Health & Human Services, Health Indicators Warehouse, 2006-12.

¹⁰ California Department of Public Health (CDPH) Vital Statistics. Accessed via RxSafe Marin Report Card, 2011, 2013.

 ¹² RxSafe Marin County Survey, 2015.
 ¹³ RxSafe Marin; Controlled Substance Utilization Review and Evaluation System (CURES), California Prescription Drug Monitoring Program (PDMP), 2013.

¹⁴ RxSafe Marin County Survey, 2015.

Oral Health



Tooth and gum disease can lead to multiple health problems such as oral and facial pain, problems with the heart and other major organs, as well as digestion problems. Oral health was identified as a health need because secondary data indicate that many adults, particularly adults older than 65, do not have dental insurance coverage and many find it difficult to afford dental care. Oral health care access also arose as a key theme in primary data; some key informants shared that oral health access may have increased slightly in West Marin with the Coastal Health Alliance's new full-time Dental Clinic, but it is still not enough, particularly for underserved populations. Additionally, key informants and focus group participants report that dental insurance is limited and specialty care is not affordable.

Key Data



Key Themes from Qualitative Data

- Specialty dental care is not affordable. There is coverage to extract a tooth but not specialty care to prevent extractions or other issues related to poor oral health.
- Community Clinic and other providers are not able to meet the demand for affordable care.

Populations at Greatest Risk in Marin County

Data regarding oral health is not available at the sub-county level to identify whether specific communities are more impacted than others. However, key informants shared that oral health care is particularly challenging for underserved populations, particularly those without dental insurance coverage.

Note: California state average estimates are included for reference. Differences between Marin County and California state estimates are not necessarily statistically significant.

^{*}Unstable estimate; findings should be interpreted with caution.

Oral Health (continued)



Supporting Data and Key Drivers

Supporting Data: Access to Care		
Access to Providers Dentists, Rate per 100,000 population ⁵	Lack of Oral Health Professionals % of population living in Health Professional Shortage Area (HPSA)- Dental ⁶	Dental Care Affordability, Youth % of population age 5-17 unable to afford dental care ^{7,*}
106.1 77.5	0.0 4.9 Marin California	4.7 6.3
Supporting Data: Dental Insurar		
Dental Insurance, Older Adult % of adults age 65+ with dental insurance ⁸	Dental Insurance, Adult % adults with dental insurance ⁹	
46.6 52.7	56.7 59.1	
Marin California	Marin California	
Driver: Health Behaviors		
Children with Inadequate Nutrition % population age 2-13 with inadequate fruit/vegetable consumption 10	Adults with Inadequate Nutrition % adults with inadequate fruit/ vegetable consumption 11	
50.1 47.4	64.3 71.5	
Marin California	Marin California	
Driver: Social and Economic Risk		
Children in Poverty % of children under age 18 living below 200% of Federal Poverty Level 12	Population in Poverty % of population living below 200% of Federal Poverty Level ¹³	
17.8 47.3	19.4 35.9	
Marin California	Marin California	

 $[\]hbox{*Unstable estimate; findings should be interpreted with caution.}$

Oral Health (continued)



Assets and Recommendations

Examples of Existing Community Assets†

Marin Dental Clinics



Oral Health Prevention and Education Efforts



Community Recommendations for Change[†]

- Co-locate dental care within community health centers
- Support a dental mobile van or mobile clinic

† Assets and recommendations excerpted from qualitative data and Marin County CHNA Collaborative. For a comprehensive list of county assets and resources, reference http://211bayarea.org/marin/.

¹ "Healthy Smile, Healthy You: The Importance of Oral Health," Delta Dental Insurance, accessed October 28, 2015, https://www.deltadentalins.com/oral health/dentalhealth.html

² Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Additional data analysis by CARES, 2006-10.

³ California Health Interview Survey, 2013-14.

⁴ Ihid

⁵US Department of Health & Human Services, Health Resources and Services Administration, Area Health Resource File, 2013.

⁶US Department of Health & Human Services, Health Resources and Services Administration, Health Professional Shortage Areas, March

⁷ California Health Interview Survey, 2009.

⁸ California Health Interview Survey, 2007.

⁹California Health Interview Survey, 2013-14.

¹⁰ Ibid

¹¹Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators Warehouse, 2005-09

¹² US Census Bureau, American Community Survey, 2009-13.

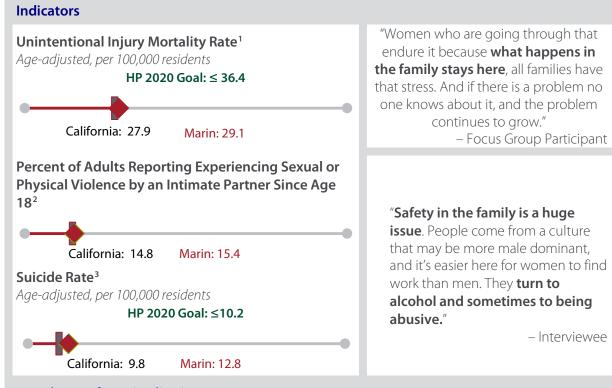
¹³ Ibid



Marin County Community Health Needs Assessment Violence and Unintentional Injury

Violence and injury prevention are broad topics that cover many issues including motor vehicle accidents, drowning, overdose, and assault or abuse, among others. In Marin County, this area was identified as a health need because of data related to domestic violence, as well as key drivers of violence such as alcohol abuse. Additionally, racial disparities in intimate partner violence and homicide exist. Marin County also experiences high rates of unintentional injury mortality and drunk driving among youth. Violence and injury also arose as a health need through key themes in interviews and focus groups as well. Community residents and other key stakeholders identified mental health and substance abuse as drivers of unintentional injury and injury due to violence.

Key Data



Key Themes from Qualitative Data

Family Violence

- Domestic violence prevalent in the county
- Violent homes can be difficult to escape; women face stigma in telling others about violence at home

Community Violence

- Gang violence was a theme among specific geographic regions, including in Canal
- Drunk driving is an issue among youth
- In some communities, distrust of law enforcement perpetuates violence



Interviewee

Note: California state average estimates are included for reference. Differences between Marin County and California state estimates are not necessarily statistically significant.

Marin County Community Health Needs Assessment Violence and Unintentional Injury (continued)

Supporting Data and Key Drivers

Supporting Data: Family Violence

Rate of Calls for Assistance Domestic violence calls per 1,000 population⁴

Domestic Violence Injuries Rate Rate among females age 10+ per 100,000^{5,†}

Child Abuse

Rate of substantiated claims of child maltreatment per 1,000 children age 0-176

HP 2020 Goal: ≤8.5

Driver: Alcohol Abuse

Excessive Drinking, Adult % of adults estimated to be drinking excessively, age-adjusted7

"When you look at alcohol consumption, our biggest issue is the amount people drink, not just children but adults. Fortunately we have clogged freeways so we don't see traffic accidents [due to drunk driving] that other areas see but we **do have violence and alcohol** [issues], even suicide is extremely important."

Interviewee

Supporting Data: Community Violence

Homicide

Age-adjusted mortality rate per 100,000 residents8

HP 2020 Goal: <5.5

Marin

California

Violent Crime

Rate per 100,000 population⁹

202.7 | 425.0

Marin

California

"We have an issue with the police in Marin City- an issue with harassment. ... [My daughter] was stopped the other day because the police could not read the [car] tag. It brought up a lot of anxiety, PTSD (post-traumatic stress), for her and her children. [Perception is] the police's job is to train people how to hand cuff people."

- Focus Group Participant

Supporting Data: Injury and Violence Among Youth

Drunk Driving, Youth % of 11th grade students reporting driving after drinking (respondent or by friend) 10

Marin

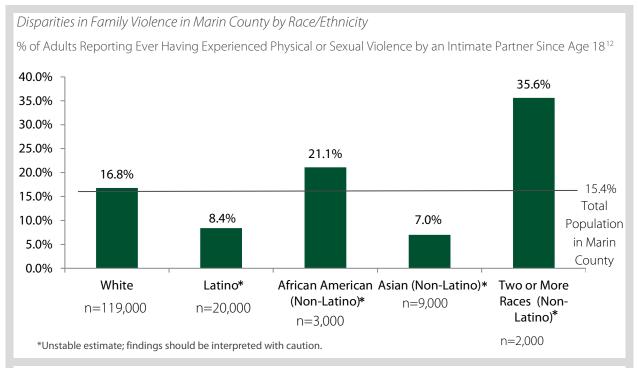
Gang Activity, Youth

% of 11th grade students reporting current gang involvement¹¹

[†] This indicator reports the rate of non-fatal emergency department visits coded as "batter by spouse/partner" (ICD-9 classification E-9673). These rates are likely underestimates (e.g., because not all crimes are reported, and not everyone goes to the hospital for domestic violence injuries for a variety of reason.



Populations Disproportionately Affected



Disparities in Community Violence in Marin County

While local data on homicide mortality is not available for all racial and ethnic subgroups due to small sample size, **Non-Hispanic Blacks** in Marin County suffer a disproportionately high homicide mortality rate (4.9 per 100,000 residents) compared to the average across racial/ethnic subpopulations (1.5 per 100,000 residents). This trend mirrors the disparity in homicide rates demonstrated across California. ¹⁴

Geographic disparities may also exist in the impact of community violence across Marin County. Residents in **Marin City** in particular noted police harassment as a significant concern in their community. **Canal** was mentioned as a region with particularly high gang violence; **San Rafael High School** was also noted as having a reputation for youth in gangs.

Marin County Community Health Needs Assessment Violence and Unintentional Injury (continued)

Assets

Examples of Existing Community Assets†

Law enforcement agencies, victim assistance through the District Attorney's Office, and Domestic Violence and Sexual Assault Crisis Providers



Coalition of Schools / Department of Education



Coordinated Community Resources
Network (community based
agencies, law enforcement, and
other government agencies who
work together to strengthen
response systems)



† Assets excerpted from qualitative data and Marin County CHNA Collaborative. For a comprehensive list of county assets and resources, reference http://211bayarea.org/marin/.

¹ Centers for Disease Control and Prevention, National Vital Statistics System, 2011-13.

² California Health Interview Survey, 2009.

³ University of Missouri, Center for Applied Research and Environmental Systems. California Department of Public Health, Death Public Use Data, 2010-12.

⁴ California Department of Justice, Criminal Justice Statistics Center. Accessed via Kidsdata.org, 2013.

⁵ 3-year averages for 2011-2013 generated using the California EpiCenter data platform for Overall Injury Surveillance, 2011-13.

⁶ California Child Welfare Indicators Project (CCWIP), 2014.

⁷ Centers for Disease Control and Prevention, Behavioral Risk Factor Surveillance System. Accessed via the Health Indicators, 2006-12.

⁸ University of Missouri, Center for Applied Research and Environmental Systems. California Department of Public Health, Death Public Use Data, 2010-12.

⁹ Federal Bureau of Investigation, FBI Uniform Crime Reports. Additional analysis by the National Archive of Criminal Justice Data. Accessed via the Inter-university Consortium for Political and Social Research, 2010-12.

¹⁰ California Department of Education, California Healthy Kids Survey and California Student Survey (WestEd), 2011-13.

¹¹ Ibid.

¹² University of California Center for Health Policy Research, California Health Interview Survey, 2009.

¹³ University of Missouri, Center for Applied Research and Environmental Systems. California Department of Public Health, Death Public Use Data, 2010-12.

¹⁴ Centers for Disease Control and Prevention, National Vital Statistics System. Accessed via CDC WONDER, 2009-13.

	Core/ Related	Indicator	Kaiser Indicator					l					1		Difference							
			Name	MATCH Category	Measure Type	Population Denominator	HP 2020 Value	nrevious	Greater Bay Area	State Benchmark	National Benchmark	Benchmark k used to score	Desired Direction	Value for Marin County	from the Benchmark Value	Data Source	Marin Greater Ba previous data Area data year year	State data year	a National data year		statisticall	County data statistically unstable
		Dentists, Rate per 100,000 Pop.	Access to Dentists Access to	Clinical Care	Rate	258,365	n/a		7	77.5	63.2	State	Above benchmark Above	106.1	28.6	US Department of Health & Human US Department of		2013	2013	2013		
		Primary Care Physicians, Rate per 100,000 Pop. Num ber of approved MediCal applications during first		Clinical Care	Rate	256,069	n/a		7	77.3	74.5	State	benchmark	142.9	65.68	Health & Human Marin County		2012	2012	2012		
	Core	and second ACA enrollment periods (Jan 2014 - April Num ber of approved Covered California applications	n/a	Clinical Care	Number				n	no data	no data	n/a	n/a	14277	n/a	Department of Health Marin County				2014-15		
		during first and second ACA enrollment periods (Jan Percentage of new managed MediCal members who	n/a	Clinical Care	Number				n	no data	no data	n/a	n/a	16774	n/a	Department of Health				2014-15		
		enrolled between July 2014 and March 2015 who were Mental Health Care Provider Rate (Per 100,000	n/a Access to	Clinical Care	Percentage				n	no data	no data	n/a	n/a Above	45.5%	n/a	Partnership Healthplan of University of				2014-15		
		Population)		Clinical Care	Rate	264,639	n/a		1	157.0	134.1	State	benchmark	405.1	248.08	Wisconsin Population		2014	2014	2014		
		Percent of child population without health insurance (<age 18)<="" td=""><td>n/a</td><td>Social and Economic Factors</td><td>Percentage</td><td>53,783</td><td></td><td></td><td>5.</td><td>5.4%</td><td>6.0%</td><td>State</td><td>Below benchmark</td><td>2.7%</td><td>-2.70%</td><td>US Census Bureau, American Community</td><td></td><td>2014</td><td>2014</td><td>2014</td><td></td><td></td></age>	n/a	Social and Economic Factors	Percentage	53,783			5.	5.4%	6.0%	State	Below benchmark	2.7%	-2.70%	US Census Bureau, American Community		2014	2014	2014		
		Percent of adults age 65+ with dental insurance for all or part of past year	n/a	Clinical Care	Percentage	37,000			5	52.7%	no data	State	Above benchmark	46.6%	-6.10%	California Health Interview Survey		2007		2007		
		Percent of adult population without health insurance (age 18-64)	n/a	Social and Economic Factors	Percentage	153,255			1	17.3%	16.3%	State	Below benchmark	9.7%	-7.60%	US Census Bureau, American Community		2014	2014	2014		
		Percent of population without health insurance	n/a	Social and Economic Factors	Percentage	248,491			1	17.8%	14.9%	State	Below benchmark	8.9%	-8.90%	US Census Bureau, American Community		2009-13	2009-13	2009-13		
		Percent of population receiving MediCal/Medicaid	n/a	Social and Economic Factors	Percentage				1-	14.0%	no data	State	Below benchmark	19.5%	5.50%	US Census Bureau, American Community		2014		2014		
Access to Care		Percent of kindergarteners with all required immunizations	n/a	Clinical Care	Percentage		>=95.0		91	90.4%	no data	State	Above benchmark	84.2%	-6.20%	CDPH Immunization Branch (data accessed		2015		2009-14		
		Percentage of adults age 65+ who have ever received a pneumonia vaccination	n/a	Clinical Care	Percentage						67.5%	State	Above benchmark	64.3%	0.90%	Centers for Disease Control and		2006-12	2006-12			
		Percent Uninsured Population	Insurance -	Social & Economic Factors	Percentage	248,491	n/a				14.9%	State	Below benchmark	8.9%	-8.87%	US Census Bureau, American Community		2009-13	2009-13	2009-13		
ı	Related	Federally Qualified Health Centers, Rate per 100,000 Population	Federally Qualified Health		Rate	252,409	n/a				1.9	State	Above benchmark	4.0	1.99	US Department of Health & Human		2014	2014	2014		
			Health	Clinical Care									Below	0.0%		US Department of Health & Human						
		Percentage of Population Living in a HPSA Preventable Hospital Events Discharge Rate (Per 10,000	Preventable		Percentage	252,409	n/a				34.1%	State	Below		-25.18%	California Office of		2015	2015	2015		
		Pop.; Age-Adjusted) Preventable hospitalization rate among Medicare	Hospital Events		Rate	no data	n/a				no data	State	benchmark Below	44.8	-38.42	Statewide Health Dartmouth Atlas of		2011		2011		
		enrollees / preventable hospital events per 1,000	n/a Insurance -	Clinical Care	Rate						59.3	State	benchmark Below	30.2	-15.1	Health Care US Census Bureau,		2012	2012	2012		
		Percent of Insured Population Receiving Medicaid	Health	Social & Economic Factors	Percentage	248,491	n/a				20.2%	State	benchmark Below	10.4%	-12.98%	American Community US Department of		2009-13	2009-13	2009-13		
		Percentage of Population Living in a HPSA Percent Female Medicare Enrollees with Mammogram	Profession/al Cancer	Clinical Care	Percentage	252,409	n/a		4.	1.9%	32.0%	State	benchmark Above	0.0%	-4.93%	Health & Human Dartmouth College		2015	2015	2015		
		in Past 2 Year Percent Adults Females Age 18+ with Regular Pap	Screening - Cancer	Clinical Care	Percentage	2,189	n/a		5!	59.3%	63.0%	State	benchmark Above	65.0%	5.71%	Institute for Health Centers for Disease		2012	2012	2012		
		Test(Age-Adjusted) Percent Adults Screened for Colon Cancer (Age-	Screening - Pap Cancer	Clinical Care	Percentage	162,215	n/a		7	78.3%	78.5%	State	benchmark Above	79.0%	0.70%	Control and Centers for Disease		2006-12	2006-12	2006-12		
		Adjusted)	Screening - Housing -	Clinical Care	Percentage	80,384	n/a		5	57.9%	61.3%	State	benchmark Below	70.0%	12.10%	Control and US Census Bureau,		2006-12	2006-12	2006-12		
		Vacant Housing Units, Percent Percent of owner-occupied housing units where costs		Physical Environment	Percentage	111,351	n/a		8.	3.6%	12.5%	State	benchmark Below	7.6%	-1.05%	American Community US Census Bureau,		2009-13	2009-13	2009-13		
		exceed 30% of household income Percent of renter-occupied housing units where	-	Social and Economic Factors	Percentage	64,596	n/a		3	39.3%	28.5%	State	benchmark Below	38.3%	-1.01%	American Community US Census Bureau,		2009-13	2009-13	2009-13		
	Core	rent/utilities exceeds 30% of household income Percent Occupied Housing Units with One or More	n/a Housing -	Social and Economic Factors	Percentage	38,316	n/a		5	57.2%	52.3%	State	benchmark Below	56.0%	-1.20%	American Community US Census Bureau,		2010-14	2010-14	2010-14		
		Substandard Conditions		Physical Environment	Percentage	102,912	n/a		4	18.4%	36.1%	State	benchmark Below	44.1%	-4.25%	American Community US Department of		2009-13	2009-13	2009-13		
Access to Housing		HUD-Assisted Units, Rate per 10,000 Housing Units	Assisted	Physical Environment	Rate	204,572	n/a		3	368.3	384.3	State		351.0	-17.35	Housing and Urban Marin County		2013	2013	2013		
		Total number of homeless individuals	n/a	Social and Economic Factors	Number				n	no data	no data	n/a	n/a	1309	n/a	Homeless Point-in-				2015		
		Total number of unsheltered homeless individuals	n/a	Social and Economic Factors	Number				n	no data	no data	n/a	n/a	835	n/a	Marin County Homeless Point-in-				2015		
F	Related	Percent of renter-occupied housing units where rent/utilities exceeds 30% of household income	n/a	Social and Economic Factors	Percentage				5-	54.1%	48.3%	State		53.2%	-0.90%	US Census Bureau, American Community		2009-13	2009-13	2009-13		
		Percent of renters spending 30% or more of household income on rent	n/a	Social and Economic Factors	Percentage				5	66.9%	52.3%	State	Below benchmark	55.3%	-1.58%	US Census Bureau, American Community		2009-13	2009-13	2009-13		
		Percent of renter occupied households living in overcrowded environments (>1 persons/room)		Physical Environment	Percentage				1	13.3%	6.2%	State	Below benchmark	7.4%	-5.90%	US Census Bureau, American Community		2009-13	2009-13	2009-13		
		Percent Adults with Asthma	Asthma - Prevalence	Health Outcomes	Percentage	187,509	n/a		1	14.2%	13.4%	State	Below benchmark	13.8%	-0.41%	Centers for Disease Control and		2011-12	2011-12	2011-12		
	Core	Percent of childre age 2- 18 ever diagnosed with asthma	n/a	Health Outcomes	Percentage	52,000			1	15.7%	no data	State	Below benchmark	9.8%	-5.90%	California Health Interview Survey		2014		2014	;	×
	COLE	Tuberculosis incidence per 100,000 population	n/a	Health Outcomes	Rate		<=1.0		5.	5.9	no data	State	Below benchmark	5.2	-0.7	California Department of Public Health /		2013		2013		
		Asthma Hospitalization Discharge Rate (Per 10,000 Pop.; Age-Adjusted)	Asthma - Hospitalizations	Health Outcomes	Rate	no data	n/a		8.	3.9	no data	State	Below benchmark	2.9	-6.01	California Office of Statewide Health		2011		2011		

		Heal	th Indicators							Benchmarl	k			Needs Sco	ore		D	ata Details	s		
Potential Health Needs	Core/ Related	Indicator	Kaiser Indicator Name	MATCH Category	Measure Type	Population Denominator		Marin county previous time point	Greater	State Benchmark	National Benchmark	Benchmark used to score	Desired Direction	Value for Marin County	Difference from the Benchmark Value	Data Source	Marin Greater Bay previous data Area data year year	State data year	a National data year	County	State data County data statisticall y unstable unstable
		Percent Occupied Housing Units with One or More Substandard Conditions	Housing - Substandard	Physical Environment	Percentage	102,912	n/a			48.4%	36.1%	State	Below benchmark Below	44.1%	-4.25%	US Census Bureau, American Community California Department		2011-12	2011-12	2011-12	
		Chronic lower respiratory disease morality rate (age- adjusted), per 100,000 population	n/a	Health Outcomes	Rate					35.5	42.1	State	benchmark	21.6	-13.9	of Public Health;		2011-13	2011-13	2011-13	
Asthma and COPD		Percentage of Days Exceeding Ozone Standards, Pop. Adjusted Average	Air Quality - Ozone (O3)	Physical Environment	Percentage	252,409	n/a			2.5%	0.5%	State	Below benchmark	0.0%	-2.47%	Centers for Disease Control and		2008	2008	2008	
		Percent Population Smoking Cigarettes(Age-Adjusted)		Health Behaviors	Percentage	198,881	n/a			12.8%	18.1%	State	Below benchmark	11.0%	-1.80%	Centers for Disease Control and		2006-12	2006-12	2006-12	
	Related	Cigarette Expenditures, Percentage of Total Household Expenditures	Tobacco Expenditures	Health Behaviors	Percentage	no data	n/a			1.0%	1.6%	State	Below benchmark	suppresse	c n/a	Nielsen SiteReports		2014	2014	2014	
	neiatea	Percentage of Days Exceeding Particulate Matter Standards, Pop. Adjusted Average	Air Quality - Particulate	Physical Environment	Percentage	252,409	n/a			4.2%	1.2%	State	Below benchmark	5.2%	1.05%	Centers for Disease Control and		2008	2008	2008	
		Percent Adults with BMI > 30.0 (Obese)	Obesity (Adult)	Health Outcomes	Percentage	197,845	n/a			22.3%	27.1%	State	Below benchmark	17.5%	-4.82%	Centers for Disease Control and		2012	2012	2012	
		Percent Adults Overweight	Overweight (Adult)	Health Outcomes	Percentage	181,818	n/a			35.9%	35.8%	State	Below benchmark	30.8%	-5.01%	Centers for Disease Control and		2011-12	2011-12	2011-12	
		Percent Obese Among Children (grades 5, 7, 9)	Obesity (Youth)	Health Outcomes	Percentage	7,276	n/a			19.0%	no data	State	Below benchmark	8.9%	-10.11%	California Department of Education,		2013-14		2013-14	
		Percent Overweight Among Children (grades 5, 7, 9)	Overweight (Youth)	Health Outcomes	Percentage	7,276	n/a				no data	State	Below benchmark	16.3%	-2.98%	California Department of Education,	t	2013-14		2013-14	
		Annual Breast Cancer Incidence Rate (Per 100,000	Cancer			-,	,-						Below			National Institutes of					•
		Pop.)	Incidence -	Health Outcomes	Rate	127,211	<= 40.9			122.4	122.7	State	benchmark Below	143.7	21.3	Health, National California Department		2007-11	2007-11	2007-11	
		Colorectal cancer mortality rate (age-adjusted)	n/a	Health Outcomes	Rate					13.9	no data	State	benchmark Below	10.3	-3.6	of Public Health California Department		2011-13		2011-13	
		Breast cancer mortality rate (age-adjusted)	n/a	Health Outcomes	Rate					20.7	no data	State	benchmark Below	18.2	-2.5	of Public Health California Department		2011-13		2011-13	
		Lung cancer mortality rate (age-adjusted)	n/a	Health Outcomes	Rate					33.6	no data	State	benchmark Below	28.6	-5	of Public Health California Department		2011-13		2011-13	
		Prostate cancer mortality rate (age-adjusted) Cancer, Age-Adjusted Mortality Rate (per 100,000	n/a Mortality -	Health Outcomes	Rate					20.2	no data	State	benchmark Below	16.2	-4	of Public Health University of		2011-13		2011-13	
	Core	Population) Annual Cervical Cancer Incidence Rate (Per 100,000	Cancer Cancer	Health Outcomes	Rate	252,409	<= 160.6			157.1	no data	State	benchmark Below	146.7	-10.42	Missouri,Center for National Institutes of		2010-12		2010-12	
		Pop.)	Incidence -	Health Outcomes	Rate	127,211	<= 7.1			7.8	7.8	State	benchmark	5	-2.8	Health,National National Institutes of		2007-11	2007-11	2007-11	
		Annual Colon and Rectum Cancer Incidence Rate (Per 100,000 Pop.)	Cancer Incidence -	Health Outcomes	Rate	250,666	<= 38.7			41.5	43.3	State	Below benchmark	40.4	-1.1	Health,National		2007-11	2007-11	2007-11	
		Annual Prostate Cancer Incidence Rate (Per 100,000 Pop.)	Cancer Incidence -	Health Outcomes	Rate	123,455	n/a			136.4	142.3	State	benchmark	174.2	37.8	National Institutes of Health, National		2007-11	2007-11	2007-11	
		Annual Invasive Melanoma Indicence Rate Among Males (Per 100,000 Pop.; age-adjusted)		Health Outcomes	Rate		n/a			186.6	no data	State	Below benchmark	351.9	165.3	Melanoma incidence in Marin County,		2011		2011	
		Annual Invasive Melanoma Indicence Rate Among Females (Per 100,000 Pop.; age-adjusted)	Cancer	Health Outcomes	Rate		n/a			65.6	no data	State	Below benchmark	152.4	86.8	Melanoma incidence in Marin County,		2011		2011	
		Annual Lung Cancer Incidence Rate (Per 100,000 Pop.)	Incidence - Lung	Health Outcomes	Rate	250,666	n/a			49.5	64.9	State	Below benchmark	44.8	-4.7	National Institutes of Health,National		2007-11	2007-11	2007-11	_
		Estimated Adults Drinking Excessively Age-Adjusted Percentage)	Alcohol - Excessive	Health Behaviors	Percentage	198,881	n/a			17.2%	16.9%	State	Below benchmark	19.5%	2.30%	Centers for Disease Control and		2006-12	2006-12	2006-12	
		Alcoholic Beverage Expenditures, Percentage of Total Food-At-Home Expenditures	Alcohol - Expenditures	Health Behaviors	Percentage	no data	n/a			12.9%	14.3%	State	Below benchmark	suppresse	c n/a	Nielsen Site Reports		2014	2014	2014	
		Liquor Stores, Rate (Per 100,000 Population)	Liquor Store Access	Physical Environment	Rate	252,409	n/a			1002.0%	1035.0%	State	Below benchmark	872.0%	-1.3	US Census Bureau,County		2012	2012	2012	
Cancers		Percent Adults Overweight	Overweight (Adult)	Health Outcomes	Percentage	181,818	n/a			35.9%	35.8%	State	Below benchmark	30.8%	-5.01%	Centers for Disease Control and		2011-12	2011-12	2011-12	
		Percent Adults with BMI > 30.0 (Obese)	Obesity (Adult)	Health Outcomes	Percentage	197,845	n/a			22.3%	27.1%	State	Below benchmark	17.5%	-4.82%	Centers for Disease Control and		2012	2012	2012	
		Percent of women age 55+ with mammogram in past 2 years	n/a	Clinical Care	Percentage	51,000				83.9%	81.2%	State	Above benchmark	88.2%	4.30%	California Health Interview Survey		2012	2007	2012	x
		Percent Female Medicare Enrollees with Mammogram in Past 2 Year	Cancer Screening -	Clinical Care	Percentage	2,189	n/a			59.3%	63.0%	State	Above benchmark	65.0%	5.71%	Dartmouth College Institute for Health		2012	2012	2012	
		Percent Adults with Inadequate Fruit / Vegetable Consumption	Low Fruit/Vegetable	Health Behaviors	Percentage	196,267	n/a			71.5%	75.7%	State	Below benchmark	64.3%	-7.20%	Centers for Disease Control and		2005-09	2005-09	2005-09	
		Fruit / Vegetable Expenditures, Percentage of Total Food-At-Home Expenditures	Fruit/Vegetable	Health Behaviors	Percentage	no data	n/a				12.7%	State	Above benchmark			Nielsen Site Reports		2014	2014	2014	
	Related	Percent Population with Low Food Access	Food Security -	Social & Economic Factors	Percentage	252,409	n/a				23.6%	State	Below benchmark	17.1%	2.74%	US Department of Agriculture,Economic		2010	2010	2010	
		Percent Population Smoking Cigarettes(Age-Adjusted)		Health Behaviors	Percentage	198,881	n/a				18.1%	State	Below benchmark		-1.80%	Centers for Disease Control and			2006-12	2006-12	
						130,001	11/4				37.0%	National	Below benchmark	44.2%	7.20%	Centers for Disease		2000-12	2006-12		
		Percent of adults currently or formerly using tobacco Cigarette Expenditures, Percentage of Total Household	Tobacco	Health Behaviors	Percentage	no doto	n/a						Below			Control and		2014			
		Expenditures Percent Adults Females Age 18+ with Regular Pap	Cancer	Health Behaviors	Percentage	no data	n/a				1.6%	State	benchmark Above	suppresse		Nielsen Site Reports Centers for Disease		2014	2014	2014	
		Test(Age-Adjusted) Percent Population with no Leisure Time Physical	Screening - Pap Physical		Percentage	162,215	n/a				78.5%	State	benchmark Below		0.70%	Control and Centers for Disease			2006-12	2006-12	
		Activity	In/activity	Health Behaviors	Percentage	198,426	n/a			16.6%	22.6%	State	benchmark	10.3%	-6.29%	Control and		2012	2012	2012	

Health Indicators									Benchmark Needs Score						Data Details							
Potential Health Needs	Core/ Related	Indicator	Kaiser Indicator Name	MATCH Category	Measure Type	Population Denominator	HP 2020 Value	Marin county previous time point	Greater	State Benchmark	National Benchmark	Benchmark used to score	Desired Direction	Value for Marin County	Difference from the Benchmark Value	Data Source	Marin previous data year	Greater Bay Area data year	State data year	a National data year	County s	tate data County data tatisticall statistically unstable unstable
		Percent Adults Screened for Colon Cancer (Age- Adjusted)	Cancer Screening -	Clinical Care	Percentage	80,384	n/a			57.9%	61.3%	State	Above benchmark	70.0%	12.10%	Centers for Disease Control and California Department			2006-12	2006-12	2006-12	
		Rank of pesticides use among California counties Pounds of pesticides applied and rank among California	n/a	Physical Environment	Rank					n/a	n/a	State	n/a	45.00	n/a	of Pesticide California Department					2013	
		counties Percentage of Days Exceeding Particulate Matter	n/a Air Quality -	Physical Environment	Number						n/a	n/a	n/a	84,836	n/a	of Pesticide Centers for Disease			2013		2013	
		Standards, Pop. Adjusted Average Percent of children age 3-4 enrolled in school (includes	Particulate	Physical Environment	Percentage	252,409	n/a			4.2%	1.2%	State	n/a Above	5.2%	1.05%	Control and US Census Bureau,			2008	2008	2008	
		Head Start, licensed child care, nurseries, Pre-K, Head Start Programs Rate (Per 10,000 Children Under	n/a	Social and Economic Factors	Percentage	no data				47.8%	47.1%	State	benchmark Above	66.2%	18.40%	American Community US Department of			2014	2014	2014	
		Age 5) 3rd grade reading proficiency (Percentage of all public	n/a	Social and Economic Factors	Rate	13932				6.34	7.62	State	benchmark Above	6.46	0.12	Health & Human Standardized Testing			2014	2014	2014	
	Core	school students tested in 3rd grade who scored Percent increase in DDS autism cases from 1990 to	n/a	Social and Economic Factors	Percentage Percent					45.0%	no data	State Greater Bay	benchmark Relow	66.0%	21.00%	and Reporting (STAR) Autism Society, San			2012-13		2012-13	
		2015	n/a	Health Outcomes	Change				1554%	no data	no data	Area	benchmark	281.0%	-1273.00%	Francisco Bay Area;		1990-2015			1990-2015	
Child Mental and Emotional		Percentage of public school children in grades K-12 receiving special education services whose primary Percent of children in foster care system for more than	n/a	Health Outcomes	Percentage					12.0%	no data	State	Below benchmark Above	8.1%	-3.90%	Special Tabulation by the California Dept. of California Child	F		2013-14		2013-14	
Development		8 days but less than 12 months with 2 or less	n/a	Social and Economic Factors	Percentage					86.6%	no data	State	benchmark	81.8%	-4.80%	Welfare Indicators			2014		2014	
		Percent of children age 0-12 considered in excellent or very good health	n/a	Health Outcomes	Percentage	36,000				78.7%	no data	State	Above benchmark	93.3%	14.62%	California Health Interview Survey			2014		2014	x
	Polated	Percent of children 4 months-5 years at moderate or high risk of developmental delay	Percent of children 4	Health Outcomes	Percentage	no data	n/a			23.1%	26.2%	State	Below benchmark	no data	n/a	National Survey of Children's Health			2011-12	2011-12		
		Percent of children no longer in foster care system afte 12 months Pounds of pesticides applied and rank among California	n/a	Social and Economic Factors	Percentage	no data	n/a			38.3%	no data	State	Above benchmark	suppresse	ec n/a	California Child Welfare Indicators California Department			2013		2013	
		counties	n/a	Physical Environment	Number					193,597,806	n/a	State	n/a	84,836	n/a	of Pesticide			2013		2013	
		Percentage of Days Exceeding Particulate Matter Standards, Pop. Adjusted Average	Air Quality - Particulate	Physical Environment	Percentage	252,409	n/a			4.2%	1.2%	State	Below benchmark	5.2%	1.05%	Centers for Disease Control and			2008	2008	2008	
		Percentage of Population Potentially Exposed to Unsafe Drinking Water Percentage of Days Exceeding Ozone Standards, Pop.	Safety Air Quality -	Physical Environment	Percentage	257,059	n/a			2.7%	10.3%	State	benchmark Below	0.6%	-2.06%	University of Wisconsin Population Centers for Disease			2012-13	2012-13	2012-13	
		Adjusted Average Percentage of Weather Observations with High Heat	Ozone (O3) Climate &	Physical Environment	Percentage	252,409	n/a			2.5%	0.5%	State	benchmark Below	0.0%	-2.47%	Control and National Oceanic and			2008	2008	2008	
	Core	Index Values:%		Physical Environment	Percentage	3,285	n/a			0.6%	4.7%	State	benchmark Below	0.0%	-0.63%	Atmospheric			2014	2014	2014	
		Percentage of Weeks in Drought (Any) Heat-related Emergency Department Visits, Rate per		Physical Environment	Percentage	no data	n/a			92.8%	45.9%	State	benchmark Below	89.1%	-3.69%	US Drought Monitor California Department	t		2012-14	2012-14	2012-14	
		100,000 Population Asthma Hospitalization Discharge Rate (Per 10,000	Health - Heat Asthma -	Physical Environment	Rate	125	n/a			11.1	no data	State	benchmark Below	6.2	-4.88	of Public Health, California Office of			2005-12		2005-12	
		Pop.; Age-Adjusted)	Asthma -	Health Outcomes	Rate	no data	n/a			8.9	no data	State	benchmark Below	2.9	-6.01	Statewide Health Centers for Disease			2011		2011	
		Percent Adults with Asthma	Prevalence Low Birth	Health Outcomes	Percentage	187,509	n/a			14.2%	13.4%	State	benchmark Below	13.8%	-0.41%	Control and California Department	,		2011-12	2011-12	2011-12	
		Percent Low Birth Weight Births	Weight Transit - Road	Health Outcomes	Percentage	252,409	n/a			6.8%	no data	State	benchmark Below	6.2%	-0.63%	of Public Health, Environmental			2011		2011	
mate and Health		Total Road Network Density (Road Miles per Acre) Percentage of Population within Half Mile of Public	Network Density Transit - Public	Physical Environment	Rate	828	n/a			4.3	2.0	State	benchmark Above	2.1	-2.15	Protection Agency, Environmental			2011	2011	2011	
		Transit Population Weighted Percentage of Report Area		Physical Environment	Percentage	247,686	n/a			15.5%	8.1%	State	benchmark Above	5.6%	-9.90%	Protection Agency, Multi-Resolution Land			2011	2011	2011	
		Covered by Tree Canopy		Physical Environment	Percentage	252,409	n/a			0.15	0.25	State	benchmark Below	0.32	16.42%	Characteristics US Census Bureau,			2011	2011	2011	
		Percentage of Housing Units with No Air Conditioning Pounds of pesticides applied and rank among California	Health - No	Physical Environment	Percentage	111,214	n/a			33.8%	11.4%	State	benchmark	no data		American Housing California Department	t		2011, 201	3	2011, 2013	
	Related	counties Diabetes Hospitalization Discharge Rate (Per 10,000	n/a Diabetes	Physical Environment	Number					193,597,806	n/a	State	n/a Below	84,836	n/a	of Pesticide California Office of			2013		2013	
		Pop.; Age-Adjusted) Average Number of Mentally Unhealthy Days per	Hospitalizations Mental Health -	Health Outcomes	Rate	no data	n/a			10.4	no data	State	benchmark Below	5.11	-5.29	Statewide Health Centers for Disease			2011		2011	
		Month Heart Disease, Age-Adjusted Mortality Rate (per	Poor Mental Mortality -	Health Outcomes	Rate	198,881	n/a			3.6	3.47	State	benchmark Below	3.0	-0.6	Control and University of			2006-12	2006-12	2006-12	
		100,000 Population)		Health Outcomes	Rate	252,409	<= 100.8			163.2	no data		benchmark Below		-55.25	Missouri, Center for Centers for Disease			2010-12		2010-12	
		Percent Adults with BMI > 30.0 (Obese)	,,,,,	Health Outcomes	_	197,845	n/a				27.1%		benchmark Below		-4.82%	Control and California Department	t		2012	2012	2012	
		Percent Obese Among Children (grades 5, 7, 9)	Obesity (Youth) Heart Disease	Health Outcomes	Percentage	7,276	n/a			19.0%	no data	State	benchmark Below	8.9%	-10.11%	of Education, California Health			2013-14		2013-14	
		Percent Adults with Heart Disease Heart Disease, Age-Adjusted Mortality Rate (per	Prevalence Mortality -	Health Outcomes	Percentage	198,000	n/a			6.1%	no data	State	benchmark Below	7.6%	1.50%	Interview Survey University of			2013-14		2013-14	x
	Core	100,000 Population) Percent of Medicare fee-for-service population with		Health Outcomes	Rate	252,409	<= 100.8			163.2	no data	State	benchmark Below	107.9	-55.25	Missouri,Center for Centers for Medicare			2010-12		2010-12	
		ischaemic heart disease Stroke, Age-Adjusted Mortality Rate (per 100,000	n/a Mortality -	Health Outcomes	Percentage					37.4%	28.6%	State	benchmark Below		-13.78%	and Medicaid Services University of	5			2012	2012	
		Population)	Stroke	Health Outcomes	Rate	252,409	n/a			37.4	no data	State	benchmark	27.6	-9.83	Missouri, Center for			2010-12		2010-12	

		Неа	Ith Indicators							Benchmari	(Needs Sco	re			Da	ata Detail:	s	
Potential Health Needs	Core/ Related	Indicator	Kaiser Indicator Name	MATCH Category	Measure Type	Population Denominator	HP 2020 Value	Marin county previous time point	Greater	State Benchmark	National Benchmark	Benchmark used to score	Desired Direction	Value for Marin County	Difference from the Benchmark Value	Data Source	Marin previous data year	Greater Bay Area data year	State data year	National data year	Marin State data County da County statisticall statisticall data year y unstable unstable
		Percent Population with no Leisure Time Physical Activity	Physical In/activity Physical	Health Behaviors	Percentage	198,426	n/a		:	16.6%	22.6%	State	Below benchmark	10.3%	-6.29%	Centers for Disease Control and California Department	,		2012	2012	2012
		Percent Physically Inactive	In/activity	Health Behaviors	Percentage	7,276	n/a		į	35.9%	no data	State	benchmark Above	23.7%	-12.20%	of Education, US Census	L		2013-14		2013-14
		Percent Population Within 1/2 Mile of a Park Recreation and Fitness Facilities, Rate (Per 100,000	Park Access Recreation and	Physical Environment	Percentage	252,409	n/a				no data	State	benchmark Above		9.38%	Bureau,Decennial US Census			2010		2010
		Population)	•	Physical Environment	Rate	252,409	n/a				9.4	State	benchmark Below		15.52	Bureau, County Centers for Disease			2012	2012	2012
		Percent Population Smoking Cigarettes(Age-Adjusted) Cigarette Expenditures, Percentage of Total Household	Tobacco	Health Behaviors	Percentage	198,881	n/a				18.1%		benchmark Below		-1.80%	Control and					2006-12
		Expenditures Estimated Adults Drinking Excessively (Age-Adjusted	Alcohol -	Health Behaviors	Percentage	no data	n/a				1.6%	State	benchmark Below	suppresse		Nielsen Site Reports Centers for Disease			2014	2014	2014
CVD/Stroke		Percentage) Alcoholic Beverage Expenditures, Percentage of Total Food-At-Home Expenditures	Excessive Alcohol - Expenditures	Health Behaviors Health Behaviors	Percentage Percentage	198,881 no data	n/a n/a				16.9% 14.3%	State State	benchmark Below benchmark	19.5% suppresse	2.30%	Control and Nielsen Site Reports			2006-12	2006-12	2006-12 2014
		Liquor Stores, Rate (Per 100,000 Population)	Liquor Store Access	Physical Environment	Rate	252,409	n/a				10.4	State	Below benchmark	8.7	-1.3	US Census Bureau,County			2012	2012	2012
	Related	Percent Adults Overweight	Overweight (Adult)	Health Outcomes	Percentage	181,818	n/a				35.8%	State	Below benchmark	30.8%	-5.01%	Centers for Disease Control and					2011-12
		Percent Adults with BMI > 30.0 (Obese)		Health Outcomes	-	197,845	n/a				27.1%		Below benchmark	17.5%	-4.82%	Centers for Disease Control and			2012	2012	2012
		Percent Overweight Among Children (grades 5, 7, 9)	Overweight (Youth)	Health Outcomes	Percentage	7,276	n/a		:	19.3%	no data	State	Below benchmark	16.3%	-2.98%	California Department of Education,			2013-14		2013-14
		Percent Obese Among Children (grades 5, 7, 9)	Obesity (Youth)	Health Outcomes	Percentage	7,276	n/a		:	19.0%	no data	State	Below benchmark	8.9%	-10.11%	California Department of Education,	t		2013-14		2013-14
		Percent of adults (age 18+) who have ever been diagnosed with high blood pressure Percent of Medicare fee-for-service population	n/a	Health Outcomes	Percentage				:	26.1%	28.2%	State	Below benchmark Below	18.8%	-7.30%	Centers for Disease Control and Centers for Medicare			2006-12	2006-12	2006-12
		diagnosed with high blood pressure Percent of Medicare fee-for-service population	n/a	Health Outcomes	Percentage				9	51.5%	55.5%	State	benchmark Below	41.5%	-10.00%	and Medicaid Services Centers for Medicare	s		2012	2012	2012
		diagnosed with high cholesterol	n/a Diabetes	Health Outcomes	Percentage				4	42.1%	44.8%	State	benchmark Below	39.7%	-2.40%	and Medicaid Services Centers for Disease	5		2012	2012	2012
		Percent Adults with Diagnosed Diabetes (Age-Adjusted Diabetes Hospitalization Discharge Rate (Per 10,000) Prevalence Diabetes	Health Outcomes	Percentage	197,942	n/a		8	8.1%	9.1%	State	benchmark Below	5.5%	-2.55%	Control and California Office of			2012	2012	2012
		Pop.; Age-Adjusted)	Hospitalizations	Health Outcomes	Rate	no data	n/a			10.4	no data	State	benchmark	5.1	-5.29	Statewide Health US Census Bureau,			2011		2011
		Total Population	n/a	Demographics	Number					37,659,181	n/a	n/a	n/a	254,643	n/a	American Community US Census Bureau,			2009-13		2009-13
		Families with Children (% of total households)	n/a	Demographics	Percentage				ŝ	32.7%	29.6%	n/a	n/a	29.4%	n/a	American Community US Census Bureau,			2009-13	2009-13	2009-13
		Percent Male Population	n/a	Demographics	Percentage						49.2%	n/a	n/a		n/a	American Community US Census Bureau,					2009-13
		Percent Female Population	n/a	Demographics	Percentage						50.8%	n/a	n/a		n/a	American Community US Census Bureau,					2009-13
		Population under Age 18	n/a	Demographics	Percentage						23.7%	,	n/a n/a	20.6%	n/a n/a	American Community US Census Bureau, American Community			2009-13		2009-13 2009-13
		Percent Population Age 0-4 Percent Population Age 5-17	n/a n/a	Demographics Demographics	Percentage Percentage						17.3%	n/a	n/a	15.3%	n/a	US Census Bureau, American Community					2009-13
		Percent Population Age 18-24	n/a	Demographics	Percentage						10.0%		n/a	5.9%	n/a	US Census Bureau, American Community					2009-13
		Percent Population Age 25-34	n/a	Demographics	Percentage						13.4%		n/a	9.6%	n/a	US Census Bureau, American Community					2009-13
		Percent Population Age 35-44	n/a	Demographics	Percentage				:	13.7%	13.1%	n/a	n/a	14.0%	n/a	US Census Bureau, American Community			2009-13	2009-13	2009-13
		Percent Population Age 45-54	n/a	Demographics	Percentage				1	13.9%	14.3%	n/a	n/a	16.4%	n/a	US Census Bureau, American Community			2009-13	2009-13	2009-13
		Percent Population Age 55-64	n/a	Demographics	Percentage				:	11.1%	12.1%	n/a	n/a	15.8%	n/a	US Census Bureau, American Community US Census Bureau,			2009-13	2009-13	2009-13
		Percent Population Age 65+	n/a	Demographics	Percentage				:	11.8%	13.4%	n/a	n/a	17.6%	n/a	American Community US Census Bureau,			2009-13	2009-13	2009-13
		Percent of Population 75y+	n/a	Demographics	Percentage					5.4%	6.0%	n/a	n/a	7.7%	n/a	American Community US Census Bureau,			2009-13	2009-13	2009-13
		Median Age in Years	n/a	Demographics	Age				3	35.4	37.3	n/a	n/a	44.8	n/a	American Community US Census Bureau,			2009-13	2009-13	2009-13
		Veteran Population (% of total population)	n/a	Demographics	Percentage				6	6.7%	9.0%	n/a	n/a	7.6%	n/a	American Community			2009-13	2009-13	2009-13
		Percent Population Rural	n/a	Demographics	Percentage						19.1%		n/a	6.5%	n/a	U.S. Census Bureau			2010	2010	2010
		Percent Population Urban	n/a	Demographics	Percentage						80.9%		n/a		n/a	U.S. Census Bureau US Census Bureau,			2010	2010	2010
]	Percent Population Hispanic	n/a	Demographics	Percentage			l	3	37.9%	16.6%	n/a	n/a	15.5%	n/a	American Community			2009-13	2009-13	2009-13

		Hea	Ith Indicators							Benchmari	,			Needs Sco	re			Data Detai	ils	
Potential Health Needs	Core/ Related	Indicator	Kaiser Indicator Name	MATCH Category	Measure Type	Population Denominator	HP 2020 Value	Marin county previous time point	Greater Bay Area	State	National	Benchmark used to score	Desired Direction	Value for Marin County	Difference from the Benchmark Value	Data Source	Marin Greater previous data Area da year year	Bay State dat		Marin State data County data County statisticall statistically data year y unstable unstable
		Percent Population Foreign-Born	n/a	Demographics	Percentage				2	27.0%	13.0%	n/a	n/a	19.0%	n/a	US Census Bureau, American Community		2009-13	2009-13	2009-13
		Percent Population not a U.S. Citizen	n/a	Demographics	Percentage				1	.4.3%	7.1%	n/a	n/a	10.6%	n/a	US Census Bureau, American Community		2009-13	2009-13	2009-13
		Population Geographic Mobility Percent of the population that speak English less than	n/a	Demographics	Percentage				4	1.9%	6.0%	n/a	n/a	7.4%	n/a	US Census Bureau, American Community US Census Bureau,		2009-13	2009-13	2009-13
		"very well"	n/a	Demographics	Percentage				1	.9.4%	8.6%	n/a	n/a	9.3%	n/a	American Community US Census Bureau,		2009-13	2009-13	2009-13
		Percent of linguistically isolated households Percent Population Age 5+ with Limited English	n/a	Demographics	Percentage				1	.0.3%	4.7%	n/a	n/a	4.8%	n/a	American Community US Census Bureau,		2007-11	2007-11	2007-11
		Proficiency	n/a	Demographics	Percentage				1	9.4%	8.6%	n/a	n/a Above	9.3%	n/a	American Community US Census Bureau,		2009-13	2009-13	2009-13
		Median household income Living Wage - Annual income required to support	n/a	Social and Economic Factors	Dollars				\$	61,094	\$53,046	n/a	benchmark	\$90,839	n/a	American Community calculated from		2009-13	2009-13	2009-13
		household with two adults* Living wage - Annual income required to support one	n/a	Social and Economic Factors	Dollars				\$	39,988	n/a	n/a	n/a	\$46,991	n/a	livingwage.mit.edu calculated from		2015		2015
İ		adult and one child*	n/a	Social and Economic Factors	Dollars				\$	552,544	n/a	n/a	n/a	\$61,096	n/a	livingwage.mit.edu US Census Bureau,		2015		2015
		Median year housing units builts Percent of children under age 18 living below 200% of	n/a	Physical Environment	Year				1	.974	1976	n/a	n/a Below	1966	n/a	American Community US Census Bureau,		2009-13	2009-13	2009-13
		Federal Poverty Level	n/a Poverty -	Social and Economic Factors	Percentage				4	7.3%	44.6%	State	benchmark Below	17.8%	-29.50%	American Community US Census Bureau,		2013	2013	2013
		Percent Population in Poverty	Population Poverty -	Social & Economic Factors	Percentage	247,026	n/a		1	.5.9%	15.4%	State	benchmark Below	7.7%	-8.20%	American Community US Census Bureau,		2009-13	2009-13	2009-13
		Percent Population with Income at or Below 200% FPL	Population Poverty -	Social & Economic Factors	Percentage	247,026	n/a		3	15.9%	34.2%	State	benchmark Below	19.4%	-16.50%	American Community US Census Bureau,		2009-13	2009-13	2009-13
		Percent Population Under Age 18 in Poverty Percent of people living below 50% of Federal Poverty	Children Below	Social & Economic Factors	Percentage	247,026	n/a		2	2.2%	21.6%	State	benchmark Below	8.9%	-13.21%	American Community US Census Bureau,		2009-13	2009-13	2009-13
		Line	n/a	Social and Economic Factors	Percentage				6	5.9%	6.8%	State	benchmark Below	3.6%	-3.30%	American Community US Census Bureau,		2009-13	2009-13	2009-13
		Percent People 65 years or Older In Poverty Percent Single Female Headed Households living below	n/a	Social and Economic Factors	Percentage				9).9%	9.4%	State	benchmark Below	5.5%	-4.40%	American Community US Census Bureau,		2009-13	2009-13	2009-13
		100% of Federal Poverty Line	n/a	Social and Economic Factors	Percentage				2	9.9%	33.3%	State	benchmark Above	15.2%	-14.70%	American Community US Census Bureau,		2009-13	2009-13	2009-13
		Percent of Families Earning over \$75,000/year	n/a	Social and Economic Factors	Percentage				4	16.8%	42.8%	State	benchmark Above	68.9%	22.10%	American Community US Census Bureau,		2009-13	2009-13	2009-13
	Core	Median household income	n/a	Social and Economic Factors	Dollars				\$	61,094	\$53,046	State	benchmark Above	\$90,839	29745	American Community US Census Bureau,		2009-13	2009-13	2009-13
		Per capita income Living wage - Annual income required to support one	n/a	Social and Economic Factors	Dollars				\$	29,527	\$28,154	State	benchmark	\$56,791	27264	American Community calculated from		2009-13	2009-13	2009-13
		adult and one child* Living Wage - Annual income required to support	n/a	Social and Economic Factors	Dollars				\$	52,544	n/a	State	n/a	\$61,096	n/a	livingwage.mit.edu calculated from		2015		2015
		household with two adults*	n/a	Social and Economic Factors	Dollars				\$	39,988	n/a	n/a	n/a Below	\$46,991	n/a	livingwage.mit.edu US Census Bureau,		2015		2015
		Gini coefficient of income inequality	n/a	Social and Economic Factors	Proporotion				0).4782	0.4735	State	benchmark Below	0.5164	0.0382	American Community US Census Bureau,		2009-13	2009-13	2009-13
		Population receiving MediCal/Medicaid	n/a	Social and Economic Factors	Percentage				1	4.0%	no data	State	benchmark Below	19.5%	5.50%	American Community US Census Bureau,		2014		2014
		Percent of households with public assistance income	n/a Economic	Social and Economic Factors	Percentage				4	1.0%	2.8%	State	benchmark Below	1.8%	-2.20%	American Community US Department of		2009-13	2009-13	2009-13
		Unemployment Rate Percentage of civilian non-institutionalized population	Security -	Social & Economic Factors	Percentage	140,102	n/a		7	.4%	6.3%	State	benchmark Below	4.2%	-3.20%	Labor, Bureau of US Census Bureau,		2015	2015	
		age 16 or older unemployed	n/a Education - High	Social and Economic Factors	Percentage				7	7.3%	6.2%	State	benchmark Above	4.8%	-2.50%	American Community California Departmen	t	2009-13	2009-13	2009-13
Economic Security		Cohort Graduation Rate	School	Social & Economic Factors	Percentage	2,226	>= 82.4%		8	30.4%	no data	State	benchmark Above	91.4%	10.98%	of Education California Dept. of		2013		2013
		High school graduation rate 3rd grade reading proficiency (Percentage of all public	n/a	Social and Economic Factors	Percentage				8	80.8%	no data	State	benchmark Above	90.8%	10.00%	Education, California Standardized Testing		2014		2014
		school students tested in 3rd grade who scored	n/a Liquor Store	Social and Economic Factors	Percentage				4	15.0%	no data	State		66.0%	21.00%	and Reporting (STAR) US Census		2012-13		2012-13
		Liquor Stores, Rate (Per 100,000 Population) Percent Students Eligible for Free or Reduced Price		Physical Environment	Rate	252,409	n/a		1	.0.0	10.4	State	benchmark Below	8.7	-1.3	Bureau,County National Center for		2012	2012	2012
		Lunch	for Food Security -	Social & Economic Factors	Percentage	31,693	n/a		5	6.3%	51.7%	State	benchmark Below	25.6%	-30.70%	Education Statistics, US Census Bureau,		2012-13	2012-13	2012-13
		Percent Population Receiving SNAP Benefits	Population Dignity	Social & Economic Factors	Percentage	247,458	n/a		1	.0.6%	15.2%	State	benchmark Below	3.7%	-6.92%	Small Area Income & Dignity Health		2011	2011	2011
		Dignity Community Health Index	Community Insurance -	Social and Economic Factors	Number				n	ı/a	n/a	n/a	benchmark Below	2.5		Community Need US Census Bureau,				
		Percent of Insured Population Receiving Medicaid	Population Insurance -	Social & Economic Factors	Percentage	248,491	n/a		2	3.4%	20.2%	State		10.4%	-12.98%	American Community US Census Bureau,		2009-13	2009-13	2009-13
	Related	Percent Uninsured Population Average Daily School Breakfast Program Participation	Uninsured Food Security -	Social & Economic Factors	Percentage	248,491	n/a		1	7.8%	14.9%	State		8.9%	-8.87%	American Community US Department of		2009-13	2009-13	2009-13
		Rate		Social & Economic Factors	Percentage	no data	n/a		3	3.9%	4.2%	State	benchmark	no data		Agriculture,Food and		2013	2013	

		Hea	alth Indicators							Benchmarl	k			Needs Sco	re			Dat	a Details			
Potential Health Needs	Core/ Related	Indicator	Kaiser Indicator Name	MATCH Category	Measure Type	Population Denominator		Marin county previous time point	Greater	State Benchmark	National Benchmark	Benchmark used to score	Desired Direction	Value for Marin County	Difference from the Benchmark Value	Data Source	Marin G previous data year	Greater Bay Area data year	tate data year	National data year	County	State data County data statisticall statistically y unstable unstable
		Percentage of the Population with Food Insecurity	Food Security - Food Insecurity Housing -	Social & Economic Factors	Percentage	252,759	n/a		1	16.2%	15.9%	State	Below benchmark Below	11.5%	-4.72%	Feeding America US Census Bureau,		20	012	2012	2012	
		Vacant Housing Units, Percent Percentage of Households where Housing Costs Exceed		Physical Environment	Percentage	111,351	n/a		8	3.6%	12.5%	State	benchmark Below	7.6%	-1.05%	American Community US Census Bureau,		20	009-13	2009-13	2009-13	
		30% of Income Percent Occupied Housing Units with One or More	Burdened Housing -	Physical Environment	Percentage	102,912	n/a				35.5%	State	benchmark Below	43.8%	-2.05%	American Community US Census Bureau,				2009-13	2009-13	
		Substandard Conditions	Substandard Housing -	Physical Environment	Percentage	102,912	n/a				36.1%	State	benchmark Below	44.1%	-4.25%	American Community US Department of					2009-13	
		HUD-Assisted Units, Rate per 10,000 Housing Units Proportion of renter occupied households living in overcrowded environments (>1 persons/room)	Assisted n/a	Physical Environment Physical Environment	Rate Percentage	111,214	n/a				1468.2 6.2%	State State	benchmark Below benchmark	351.0 7.4%	-1048.09 -5.90%	Housing and Urban US Census Bureau, American Community				2013	2013	
		Percentage of Workers Commuting More than 60 Minutes	Economic Security -	Social & Economic Factors	Percentage	108,758	n/a				8.1%	State	Below benchmark	11.5%	1.35%	US Census Bureau, American Community					2009-13	
		Percentage of Households with No Motor Vehicle	Economic Security -	Social & Economic Factors	Percentage	102,912	n/a				9.1%	State	Below benchmark	5.0%	-2.81%	US Census Bureau, American Community					2009-13	
		Percent Population Age 25+ with No High School Diploma	Education - Less than High	Social & Economic Factors	Percentage	187,029	n/a		1	18.8%	14.0%	State	Below benchmark	7.6%	-11.14%	US Census Bureau, American Community		20	009-13	2009-13	2009-13	
		Percent of population age 25+ with Associate's degree or higher	n/a	Social and Economic Factors	Percentage				3	38.4%	36.7%	State	Above benchmark	60.9%	22.50%	US Census Bureau, American Community		20	009-13	2009-13	2009-13	
		Percent of English language learners (grade 10) who passed the California High School Exit Exam in English Percent of English language learners (grade 10) who	n/a	Social and Economic Factors	Percentage				3	38.0%	n/a	State	Above benchmark Above	26.0%	-12.00%	California Department of Education California Department		20	013-14		2013-14	
		passed the California High School Exit Exam in Math Percent of children age 3-4 enrolled in school (includes	n/a	Social and Economic Factors	Percentage				5	54.0%	n/a	State	benchmark Above	37.0%	-17.00%	of Education US Census Bureau,		20	013-14		2013-14	
Education	Core	Head Start, licensed child care, nurseries, Pre-K,	n/a Education -	Social and Economic Factors	Percentage	no data			4	17.8%	47.1%	State	benchmark Below	66.2%	18.40%	American Community California Department		20	014	2014	2014	
		Percentage of Grade 4 ELA Test Score Not Proficient	Reading Below Education -	Social & Economic Factors	Percentage	2492	<= 36.3%		3		n/a	State	benchmark Above		-17.00%	of Education US Census Bureau,			012-13		2012-13	
		Percentage of Population Age 3-4 Enrolled in School	School Education - High	Social & Economic Factors	Percentage	no data	n/a				47.1%	State	benchmark Above		18.41%	American Community California Department				2014	2014	
		Cohort Graduation Rate 3rd grade reading proficiency (Percentage of all public school students tested in 3rd grade who scored	School n/a	Social & Economic Factors	-	2,226	>= 82.4				no data	State State	benchmark Above benchmark	91.4%	10.98%	of Education Standardized Testing and Reporting (STAR)			013 012-13		2013	
		Head Start Programs Rate (Per 10,000 Children Under Age 5)	n/a Education - Head Start	Social and Economic Factors Social & Economic Factors	Percentage Rate	13932	n/a				no data	State	Above benchmark	6.5	12.00%	US Department of Health & Human				2014	2012-13	
		Chlamydia Infection Rate (Per 100,000 Pop.)	STD - Chlamydia	Health Outcomes	Rate	255,031	n/a		4	144.9	456.7	State	Below benchmark	190.6	-254.31	US Department of Health & Human				2012	2012	•
		Gonorrhea Incidence (rate of gonorrhea cases per 100,000 population)	n/a	Health Outcomes	Rate				8	38.3	106.7	State	Below benchmark	32.4	-55.9	U.S. Department of Health & Human		20	012	2012	2012	
	Core	AIDS Incidence (newly <i>diagnosed</i> cases) (Per 100,000 Pop.)	n/a STD - HIV	Health Outcomes	Rate				8	3.1	n/a	State	Below benchmark Below	3.4	-4.7	California Department of Public Health, Marin data source:		20	011-13		2011-13	
HIV/AIDS/STDs		Population with HIV / AIDS, Rate (Per 100,000 Pop.) HIV Hospital Discharge Rate (Per 10,000 Pop.; Age-	Prevalence STD - HIV	Health Outcomes	Rate	250,259	n/a		3	310.1	289.0	State	benchmark Below	221.4	-88.69	County of Marin, California Office of		20	012	2012	2012	
		Adjusted)		Health Outcomes	Rate	no data	n/a		2	2.0	no data	State		1.7	-0.27	Statewide Health California Office of		20	011		2011	-
	Related	HIV hospitalizations as percentage of total discharges	n/a STD - No HIV	Clinical Care	Percentage	no data	n/a				no data	State	Below	0.1%	-0.06%	Statewide Health Centers for Disease		20	011		2011	
		Percent Adults Never Screened for HIV / AIDS Suicide, Age-Adjusted Mortality Rate (per 100,000	Screening Mortality -	Clinical Care	Percentage	170,311	n/a				62.8%	State	benchmark Below		-2.79%	Control and University of				2011-12	2011-12	
		Population) Poor mental health (likely has serious psychological	Suicide	Health Outcomes	Rate	252,409	<= 10.2				no data	State	benchmark Below	12.8	3.03	Missouri,Center for California Health			010-12	2007	2010-12	u.
		distress during past year) Percentage of Medicare Beneficiaries with Depression	n/a Mental Health - Depression	Health Outcomes Health Outcomes	Percentage Percentage	198,000 28,460	n/a				8.5% 15.5%	State	benchmark Below benchmark		-3.20%	Interview Survey Centers for Medicare and Medicaid Services				2007	2014	X
		Mental Health Care Provider Rate (Per 100,000 Population)	Access to	Clinical Care	Rate	264,639	n/a				134.1	State	Above benchmark		248.08	University of Wisconsin Population				2014	2014	
		Percent reporting taken prescription medicine for emotional/mental health issue in past year (taken for		Clinical Care	Percentage	198,000	n/a				no data	State	Below benchmark	15.6%	5.50%	California Health Interview Survey		20	014		2014	
	Core	Percent of adults with a physical, mental or emotional disability	n/a	Health Outcomes	Percentage	198,000			2	28.5%	29.9%	State	Below benchmark	23.9%	-4.60%	California Health Interview Survey		20	014	2011-12	2014	
		Percent of adults age 65+ with a physical, mental or emotional disability	n/a	Health Outcomes	Percentage	43,000			5	51.0%	51.9%	State	Below benchmark	57.7%	6.70%	California Health Interview Survey California Healthy		20	014	2011-12	2014	
		Percent of 11th grade students who seriously considered committing suicide in the past 12 months Percent of 11th grade students who felt sad or	n/a	Health Outcomes	Percentage	no date	n/a		1	17.0%	no data	n/a	Below benchmark Below	18.0%	1.00%	California Healthy Kids Survey California Healthy		20	011-13		2013-14	
Mental Health		hopeless almost everyday for 2 weeks or more so that Youth suicide attempt rate (emergency room or	n/a	Health Outcomes	Percentage				3	32.5%	no data	State	benchmark Below	26.7%	-5.80%	Kids Survey California Department		20	011-13		2011-13	
		hospitalization) (Per 100,000 residents ages 12-24)	n/a	Health Outcomes	Rate				2	235.0	no data	State Marin County	benchmark Below		-77	of Public Health, RxSafe Marin Report		20	000-11		2000-11	
		Drug poisoning deaths (total) Percent of adults who report needing to see a	n/a Mental Health -	Health Outcomes	Number	400.00-		21.00			no data	2011	benchmark Below		18.00	California Health	2011				2013	
		professional	Needing Mental	Health Outcomes	Percentage	198,000	n/a		1	15.9%	no data	State	benchmark	19.5%	3.60%	Interview Survey		20	013-14		2013-14	×

		Неа	Ith Indicators							Benchmark	(Needs Sco	re			Data	Details		
Potential Health Needs	Core/ Related	Indicator	Kaiser Indicator Name	MATCH Category	Measure Type	Population Denominator		nrevious	Greater Bay Area	State Benchmark	National Benchmark	Benchmark used to score	Desired Direction	Value for Marin County	Difference from the Benchmark Value	Data Source		Area data	e data Natio ear data y	county	State data County data statisticall statistically r y unstable unstable
		Total number of homeless individuals	n/a	Social and Economic Factors	Number				r	no data	no data	n/a	n/a	1309	n/a	Marin County Homeless Point-in-				2015	_
		Total number of unsheltered homeless individuals Substantiated allegations of child maltreatment (abuse	n/a	Social and Economic Factors	Number				r	no data	no data	n/a	n/a Below	835	n/a	Marin County Homeless Point-in- California Child				2015	
	Related	and neglect) per 1,000 children ages 0-17 Percent of 11th grade students who report they've	n/a	Violence/Injury Prevention	Rate		<=8.5		8	3.7	no data	State	benchmark Below	4.0	-4.7	Welfare Indicators California Healthy		201	1	2014	
		been victims of cyber bullying in the past 12 months Percent of 11th grade students reporting harassment	n/a	Health Outcomes	Percentage				2	23.2%	no data	State		23.8%	0.60%	Kids Survey California Healthy		201	1-13	2011-13	
		on school property related to their sexual orientation Percent of 11th grade students reporting harassment	n/a	Health Outcomes	Percentage				7	7.6%	no data	State	benchmark Below	6.6%	-1.00%	Kids Survey California Healthy		201	1-13	2011-13	
		or bullying on school property within the past 12	n/a Overweight	Health Outcomes	Percentage				2	27.6%	no data	State	benchmark Below	24.7%	-2.90%	Kids Survey Centers for Disease		201	1-13	2011-13	_
		Percent Adults Overweight	(Adult)	Health Outcomes	Percentage	181818	n/a		3	35.9%	35.8%	State	benchmark Rolow	30.8%	-5.01%	Control and Centers for Disease		201	1-12 2011-12	2011-12	
		Percent Adults with BMI > 30.0 (Obese)	Obesity (Adult) Overweight	Health Outcomes	Percentage	197,845	<=30.5%		2	22.3%	27.1%	State	benchmark Below	17.5%	-4.82%	Control and California Department		201	2 2012	2012	
		Percent Overweight Among Children (grades 5, 7, 9)	(Youth)	Health Outcomes	Percentage	7,276	n/a		1	19.3%	no data	State	benchmark Below	16.3%	-2.98%	of Education, California Department		201	3-14	2013-14	
		Percent Obese Among Children (grades 5, 7, 9) Percent of low income (<200% FPL) preschool children	Obesity (Youth)	Health Outcomes	Percentage	7,276	<=16.1%		1	19.0%	no data	State	benchmark Below	8.9%	-10.11%	of Education, CDPH (Pediatric	·	201	3-14	2013-14	
	Core	(age 2-4) who are obese	n/a Diabetes	Health Outcomes	Percentage				1	17.2%	no data	State		13.0%	-4.20%	Nutrition Surveillance Centers for Disease		201)	2010	
		Percent Adults with Diagnosed Diabetes(Age-Adjusted) Percent of Medicare fee-for-service population with		Health Outcomes	Percentage	197,942	n/a		8	3.1%	9.1%	State		5.5%	-2.55%	Control and Centers for Medicare		201	2 2012	2012	
		diabetes Diabetes mortality rate (age-adjusted) (Per 100,000	n/a	Health Outcomes	Percentage				2	26.6%	27.0%	State	benchmark Below	15.2%	-11.40%	and Medicaid Services California Department		201	2 2012	2012	
		Pop.) Diabetes Hospitalization Discharge Rate (Per 10,000	n/a Diabetes	Health Outcomes	Rate				2	20.8%	no data	State		8.9%	-11.90%	of Public Health, California Office of	•	201	1-13	2011-13	
		Pop.; Age-Adjusted)		Health Outcomes	Rate	no data	n/a		1	10.4	no data	State		5.1	-5.29	Statewide Health California Health		201	ı	2011	_
		Percent Adults with Heart Disease Heart Disease, Age-Adjusted Mortality Rate (per	Prevalence	Health Outcomes	Percentage	198,000	n/a		6	5.1%	no data	State	Below benchmark Below	7.6%	1.50%	Interview Survey		201	3-14	2013-14	x
		100,000 Population) Percent of Medicare fee-for-service population with	Mortality - Ischaemic Heart	Health Outcomes	Rate	252,409	<= 100.8		1	163.2	no data	State	benchmark Below	107.9	-55.25	University of Missouri, Center for Centers for Medicare		201)-12	2010-12	
		ischaemic heart disease Stroke, Age-Adjusted Mortality Rate (per 100,000	n/a Mortality -	Health Outcomes	Percentage				3	37.4%	28.6%	State		23.6%	-13.78%	and Medicaid Services University of	s	201	2 2012	2012	
		Population) Percent Adults with Inadequate Fruit / Vegetable	Stroke Low	Health Outcomes	Rate	252,409	n/a		3	37.4	no data	State	benchmark Below	27.6	-9.83	Missouri, Center for Centers for Disease		201)-12	2010-12	
		Consumption Percent Population Age 2-13 with Inadequate		Health Behaviors	Percentage	196,267	n/a		7	71.5%	75.7%	State	benchmark Below	64.3%	-7.20%	Control and California Health		200	5-09 2005-0	2005-09	
		Fruit/Vegetable Consumption Fruit / Vegetable Expenditures, Percentage of Total		Health Behaviors	Percentage	31,000	n/a		4	17.4%	no data	State	benchmark Above	50.1%	2.70%	Interview Survey		201	2	2012	
		Food-At-Home Expenditures Soda Expenditures, Percentage of Total Food-At-Home	-	Health Behaviors	Percentage	no data	n/a		1	14.1%	12.7%	State	benchmark Below	suppresse	C	Nielsen Site Reports		201	1 2014	2014	
		Expenditures	Expenditures Food Security -	Health Behaviors	Percentage	no data	n/a		3	3.6%	4.0%	State	benchmark Below	suppresse	C	Nielsen Site Reports US Department of		201	1 2014	2014	
		Percent Population with Low Food Access	Food Desert	Social & Economic Factors	Percentage	252,409	n/a		1	14.3%	23.6%	State	benchmark Below	17.1%	2.74%	Agriculture, Economic U.S. Department of	:	201	2010	2010	
		Percent of low-income population with low food access	s n/a	Physical Environment	Percentage				3	3.4%	6.3%	State		2.0%	-1.42%	Agriculture, Economic U.S. Department of	:	201	2010	2010	
		SNAP-authorized retailers (Per 1,000 Population)	n/a Food	Physical Environment	Rate				6	53.9	78.4	State		0.4	-63.51045656	Agriculture, Food and US Census Bureau,		201	1 2014	2012	
		Fast Food Restaurants, Rate (Per 100,000 Population)		Physical Environment	Rate	252,409	n/a		7	74.5	72.0	State	benchmark Above	76.1	1.56	County Business US Census		201	2011	2011	
Obesity/HEAL/ Diabetes		Grocery Stores, Rate (Per 100,000 Population) WIC-Authorized Food Stores, Rate (Per 100,000		Physical Environment	Rate	252,409	n/a		2	21.5	21.1	State		26.5	5.03	Bureau,County US Department of		201	2011	2011	
		Population) Percent Population with no Leisure Time Physical		Physical Environment	Rate	255,031	n/a		1	15.8	15.6	State		9.0	-6.78	Agriculture,Economic Centers for Disease		201	2011	2011	
		Activity (Adult)		Health Behaviors	Percentage	198,426	n/a		1	16.6%	22.6%	State		10.3%	-6.29%	Control and California Department	t	201	2 2012	2012	
		Percent Physically Inactive (Youth) Percent of 7th graders who engaged in vigorous	Inactivity	Health Behaviors	Percentage	7,276	n/a		3	35.9%	no data	State	benchmark Above	23.7%	-12.20%	of Education, California Healthy		201	3-14	2013-14	
		exercised for at least 20 minutes during 4 or more of Percent of 9th graders who engaged in vigorous	n/a	Health Behaviors	Percentage				r	no data	no data	n/a	benchmark Above	75.0%		Kids Survey California Healthy				2013-14	
	Related	exercised for at least 20 minutes during 4 or more of Percent of 11th graders who engaged in vigorous	n/a	Health Behaviors	Percentage				r	no data	no data	n/a	benchmark Above	67.0%		Kids Survey California Healthy				2013-14	
		exercised for at least 20 minutes during 4 or more of Percent of children age 2-11 drinking two or more	n/a	Health Behaviors	Percentage				r	no data	no data	n/a	benchmark Below	54.0%		Kids Survey California Health				2013-14	
		sugar sweetened beverages (other than soda) on Percent of children under 18 consuming fast food at	n/a	Health Behaviors	Percentage	32,000			1	18.8%	no data	State		20%	1.20%	Interview Survey California Health		201	1	2014	x
		least once in past week Percent of 11th grade students who report eating	n/a	Health Behaviors	Percentage	52,000			7	72.3%	70.9%	State		60.9%	-11.40%	Interview Survey California Healthy		201	2011-12	2014	
		breakfast on day of survey	n/a	Health Behaviors	Percentage				6	50.6%	no data	State	benchmark	66.6%	6.00%	Kids Survey		201	1-13	2011-13	

Part			Heal	th Indicators							Benchmark	t			Needs Sco	ore		D	ata Detail	ls			
Part		-	Indicator		MATCH Category		•		previous	Greater					Marin	from the Benchmark	Data Source	previous data Area data	State data		County	statisticall	statistically
Part					Clinical Care	Percentage					81.5%	84.6%	State	benchmark	84.1%	2.60%	Institute for Health		2012	2012	2012		
March Marc					Physical Environment	Percentage	252,409	n/a			58.6%	no data	State	benchmark	68.0%	9.38%	Bureau,Decennial		2010		2010		
Part				Breastfeeding										Above			California Department			2012			
Manual Parameter Manual Para				Breastfeeding		_								Above			California Department	:					
Ministry				Food Security -		-								Below		25.7270	US Department of			2013	2012		
Part				Security -	Social & Economic Factors	Percentage	108,758	n/a			10.1%	8.1%	State	benchmark	11.5%	1.35%			2009-13	2009-13	2009-13		
Contact Cont				Food Insecurity	Social & Economic Factors	Percentage	252,759	n/a			16.2%	15.9%	State	benchmark	11.5%	-4.72%			2012	2012	2012		
Part Section Part			Drinking Water		Physical Environment	Percentage	257,059	n/a			2.7%	10.3%	State	benchmark	0.6%	-2.06%	Wisconsin Population		2012-13	2012-13	2012-13		
Common C			weekday afternoon peak hour from 2012 to 2013 Percent decrease in bicyclist volume during average			Percentage							n/a	benchmark Above			Department of Public County of Marin,						
Part				Commute to									•	Above			US Census Bureau,						
Part				Walking/Biking/		_								Above			California Health			2009-13			
Part				Poor Dental										Below		-5.12%	Centers for Disease			2006-10		-	
Part Care			a dentist, dental hygienist, or dental clinic within past	Recent Exam	Clinical Care	Percentage	197,152	n/a			30.5%	no data	State	benchmark	18.4%	-12.10%	Control and		2013-14	2006-10	2013-14		
Process Proc				Recent Exam		Percentage	32,000	n/a			9.90%	no data	State	benchmark	7.8%	-2.10%	Interview Survey		2014		2014		x
Definition Rate Part Definition Rate Part Definition Rate Definition Rat		Core			Clinical Care	Percentage	189,000	n/a			40.9%	no data	State	benchmark	43.3%	2.40%	Interview Survey		2009		2009		
Feath Feat				Access to		· ·								Above			US Department of						
Sold Expensionse, Percentage of Total Food-Ask-Long Sold Expensionse, Percentage of Total Insurance for all or part Percentage of Total Insurance for all of the Percentage of Total Insurance for all or part Percent	Oral Health			Health										Below			US Department of						
Percent of autils with detail insurance for all organized present of autils with detail insurance for all organized present of autils age 65 with detail insurance for all organized present of autils age 65 with detail insurance for all organized present of autils age 65 with detail insurance for all organized present of autils age 65 with detail insurance for all organized present of autils age 65 with detail insurance for all organized present of autils age 65 with detail insurance for all organized present of autils age 65 with detail insurance for all organized present of autils age 65 with detail insurance for all organized present of autils age 65 with a physical, mental or emotional disability percent of autils age 65 with a physical, mental or emotional disability percent of autils age 65 with a physical, mental or emotional disability percent of autils age 65 with a physical, mental or emotional disability percent of autils age 65 with a physical, mental or emotional disability percent of autils age 65 with a physical, mental or emotional disability percent of autils age 65 with a physical, mental or emotional disability percent of autils age 65 with a physical, mental or emotional disability percent of autils age 65 with a physical, mental or emotional disability percent of autils age 65 with a physical, mental or emotional disability percent of autility age 65 with a physical, mental or emotional disability age 65 with a physical, mental or emotional disability age 65 with a physical, mental or emotional disability age 65 with a physical, mental or emotional disability age 65 with a physical, mental or emotional disability age 65 with a physical, mental or emotional disability age 65 with a physical, mental or emotional disability age 65 with a physical, mental or emotional disability age 65 with a physical, mental or emotional disability age 65 with a physical, mental or emotional disability age 65 with a physical, mental or emotional with a physical mental or emotional disability age 65 with a phy			Soda Expenditures, Percentage of Total Food-At-Home	Soft Drink										Below								•	
Part of past year			past year		Clinical Care		189,000				66.3%	no data	State	benchmark	64.0%	-2.26%	Interview Survey		2007		2007		
Principal Water Principal		Related	or part of past year	* *	Clinical Care	Percentage	37,000				52.7%	no data	State	benchmark	46.6%	-6.13%	Interview Survey		2007		2007		
Care			Drinking Water	Safety	Physical Environment	Percentage	257,059	n/a			2.7%	10.3%	State	benchmark	0.6%	-2.06%	Wisconsin Population		2012-13	2012-13	2012-13		
Percent of adults with a physical, mental or emotional disability Percent of adults with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or lower with a Disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or emotional disability Percent of adults age 65+ with a physical, mental or lower with a Disability Percent of adults age 65+ with a physical, mental or lower with a Disability Percent of adults age 65+ with a physical, mental or lower with a Disability Percent of adults age 61+ well with a Disability Percent of adults age 61+ well with a Disability Percent of adults age 61+ well with a Disability Percent of adults age 61+ well with a Disability Percent of adults age 61+ well with a Disability Percent of adults age 61+ well with a Disability Percent of adults age 61+ well with a Disability Percent of adults age 61+ well with a Disability Percent of adults age 61+ well with a Disability Percent of adults age 61+ well with a Disability Percent of adults age 61+ well with a Disability Percent of adults age 61+ well with a Disab					Clinical Care	Percentage	50,000	n/a			6.3%	no data	State		4.7%	-1.60%			2009		2009	=	Х
Percent of adults age 65+ with a physical, mental or low Bith Percent age 65+ with a physical, mental or low Bith Percent age 65+ which adults age 65+ with a physical physic			Percent of adults with a physical, mental or emotional											Below			California Health			2006-12			
Percent Low Birth Weight Births Low Birth Weight Births Percent Royalation with a Disability Percent Royalation with a Disability Percent Royalation with a Disability Percent of children age 0-12 considered in excellent or very good health Percent of children age 0-12 considered in excellent or very good health Percent Royalation with a Disability Percent Royalation with a			Percent of adults age 65+ with a physical, mental or			-		II/a						Below			California Health						
Percent Population with a Disability Percent of Children age 0-12 considered in excellance of Children age 0-12 co				Low Birth		-		n/a						Below			California Department						
Core Very good health					Demographics	Percentage	248,491	n/a			10.1%	12.1%	State		9.0%	-1.18%	American Community		2009-13	2009-13	2009-13		
Age adjusted death rate, all causes (per 100,000 Pop.) n/a Health Outcomes Rate no data <=25.7 20.4 26.0 State benchmark suppresser Child mortality, 1-4 years (per 100,000) n/a Health Outcomes Rate no data n/a 10.4 12.9 State benchmark suppresser age 75 (Per 100,000 Pop.) Alzheimer's disease mortality rate (age-adjusted) (Per 100,000 Pop.) n/a Health Outcomes Rate no data n/a 10.4 12.9 State benchmark suppresser of Public Health / US 2011-13	Overall Health	Core		n/a	Health Outcomes	Percentage	36,000				78.7%	no data	State	benchmark	93.3%	14.62%	Interview Survey		2014		2014		x
Child mortality, 1-4 years (per 100,000) Indication of the properties of the proper			Age adjusted death rate, all causes (per 100,000 Pop.)	n/a	Health Outcomes	Rate					641.1	no data	State	benchmark	524.9	-116.18	Control and		2011-13		2011-13		
Premature death/ Years of Potential Life Lost before age 75 (Per 100,000 Pop.) Alzheimer's disease mortality rate (age-adjusted) (Per 100,000 Pop.) A lealth Outcomes A lealth														benchmark Below			American Community California Department						
AZzheimer's disease mortality rate (age-adjusted) (Per 100,000 Pop.) n/a Health Outcomes Rate 30.8 no data State benchmark 38.5 7.70 of Public Health 2011-13 2011-13 Low Birth Below California Department			Premature death/ Years of Potential Life Lost before	Mortality -			no data	n/a						Below									
Low Birth Below California Department			Alzheimer's disease mortality rate (age-adjusted) (Per											Below			California Department	:		2011-13			
							252,409	n/a						Below			California Department					•	

		Heal	th Indicators							Benchmar	k			Needs Sco	re			ata Detail	s			
Potential Health Needs	Core/ Related	Indicator	Kaiser Indicator Name	MATCH Category	Measure Type	Population Denominator	HP 2020 Value	Marin county previous time point	Greater	State	National	Benchmark used to score	Desired Direction	Value for Marin County	Difference from the Benchmark Value	Marin Data Source previous d year	Greater Bay ata Area data year			County		County data statistically unstable
		Infant Mortality Rate (Per 1,000 Births)	Infant Mortality Lack of	Health Outcomes	Rate	12,775	<= 6.0		5	5.0	6.5	n/a	Below benchmark Below	3.3	-1.70	Centers for Disease Control and California Department		2006-10	2006-10	2006-10		
		Percent Mothers with Late or No Prenatal Care	Pren/atal Care	Clinical Care	Percentage	252,409	n/a		3	3.1%	no data	State	benchmark Below	no data		of Public Health,CDPH California Department		2011				
	Core	Percent of pre-term births (< 37 weeks gestation)	n/a	Health Outcomes	Percentage				8	3.8%	11.4%	State	benchmark	8.8%	0.00%	of Public Health/		2013	2013	2013		
		Percent of newborns with low birth weight	n/a	Health Outcomes	Percentage				6	5.8%	8.0%	State	Below benchmark Below	6.9%	0.10%	Centers for Disease Control and California Department		2013	2013	2013		
		Percent of newborns with very low birth rates	n/a Teen Births	Health Outcomes	Percentage				1	1.2%	1.4%	State	benchmark Below	0.9%	-0.30%	of Public Health / California Department		2013	2013	2013		
Pregnancy and Birth		Teen Birth Rate (Per 1,000 Female Pop. Under Age 20)	(Under Age 20)	Social & Economic Factors	Rate	27,504	n/a		8	3.5	no data	State	benchmark	2.7	-5.81	of Public Health,CDPH		2011		2011		
Outcomes		Pounds of pesticides applied and rank among California counties	n/a	Physical Environment	Number				1	193,597,806	n/a	n/a	n/a	84,836	n/a	California Department of Pesticide		2013				
		Percent of births by C-section to low risk women giving birth for the first time	n/a	Health Outcomes	Percentage		<=23.9%		2	26.3%	26.5%	State	Below benchmark	22.2%	-4.10%	California Department of Public Health/		2011	2011	2011		
		Percentage of Mothers Breastfeeding (Any)	Breastfeeding (Any)	Health Behaviors	percentage	2,033	n/a		9	93.0%	no data	State	Above benchmark	98.5%	5.53%	California Department of Public Health,CDPH		2012		2012		
	Related	Percentage of Mothers Breastfeeding (Exclusively)		Health Behaviors	Percentage	2,033	n/a		6	54.8%	no data	State	Above benchmark	88.5%	23.72%	California Department of Public Health,CDPH		2012		2012		
		Head Start Programs Rate (Per 10,000 Children Under Age 5)	Education - Head Start Education -	Social & Economic Factors	Rate	13,932	n/a		6	5.3	7.6	State	Above benchmark Above	6.5	0.12	US Department of Health & Human US Census Bureau,		2014	2014	2014		
		Percentage of Population Age 3-4 Enrolled in School		Social & Economic Factors	Percentage	no data	n/a		4	17.8%	47.1%	State	benchmark Below	66.2%	18.40%	American Community		2014	2014	2014		
		Percentage of the Population with Food Insecurity		Social & Economic Factors	Percentage	252,759	n/a		1	16.2%	15.9%	State	benchmark Below	11.5%	-4.72%	Feeding America Centers for Disease		2012	2012	2012		
		Percent Population Smoking Cigarettes(Age-Adjusted) Cigarette Expenditures, Percentage of Total Household		Health Behaviors	Percentage	198,881	n/a		1	12.8%	18.1%	State	benchmark Below	11.0%	-1.80%	Control and		2006-12	2006-12	2006-12		
		Expenditures Percent of 12-17 year olds binge drinking at least once		Health Behaviors	Percentage	no data	n/a		1	1.0%	1.6%	State	benchmark Below	suppresse		Nielsen Site Reports California Health		2014	2014	2014		
		in month prior Percent of 11th grade students reporting driving after	n/a	Substance Abuse/Tobacco	Percentage		<=8.6%		5	5.8%	9.5%	State	benchmark Below	16.2%	10.40%	Interview Survey California Healthy		2014	2008	2014	3	•
		drinking (respondent or by friend) Percent of 11th grade students using cigarettes any	n/a	Health Behaviors	Percentage				2	23.0%	no data	State	benchmark Below	24.2%	1.20%	Kids Survey California Healthy		2011-13		2011-13		
		time within last 30 days Percent of 11th graders reporting non-medical use of	n/a	Health Behaviors	Percentage				1	10.2%	no data	State	benchmark Below	12.1%	1.90%	Kids Survey California Healthy		2011-13		2011-13		
		Rx painkillers Number of naloxone doses administered by Emergency	n/a	Health Behaviors	Percentage				1	19.0%	no data	n/a Marin County	benchmark Below	16.0%	-3.00%	Kids Survey RxSafe Marin; Marin		2011-13		2011-13		
		Medical Services	n/a	Health Behaviors	Number			198	n	n/a	no data	2011 Marin County	benchmark Below	131	-67.00	County Emergency 2011 Controlled Substance				2013		
		Median number of pills per narcotic prescription	n/a	Health Behaviors	Number			45		n/a	no data	2011 Marin County	benchmark Below		11.00	Utilization Review and 2011 Controlled Substance				2013		
	Core	Number of controlled substance prescriptions Percent of 11th grade students reporting marijuana use	n/a	Health Behaviors	Number			403,561		n/a	no data	2011	benchmark Below		8795.00	Utilization Review and 2011 California Healthy				2013		
	20.0	within the last 30 days Percent of 11th grade students who report they've	n/a	Health Behaviors	Percentage					22.0%	no data	State	benchmark Below		10.80%	Kids Survey California Healthy		2011-13		2011-13		
		been "high" from using drugs Percent of survey respondents who think it would be	n/a	Health Behaviors	Percentage				3	38.3%	no data	State	benchmark Below		10.40%	RxSafe Marin County		2011-13		2011-13		
Substance		very or somewhat easy to obtain prescription pain,	n/a	Health Outcomes	Percentage					no data	no data	n/a Marin County	benchmark Below	48.1%		Survey California Department				2015		
Abuse/Tobacco		Drug poisoning deaths (total)	n/a	Health Outcomes	Number			13		1/a	no data	2011 Marin County	Below		18.00	of Public Health 2011 California Department				2013		
		Drug poisoning deaths (unintentional) Percent of survey respondents with pills leftover from	n/a	Health Outcomes	Number			13		1/a	no data	2011	Below		14.00	of Public Health 2011 RxSafe Marin County				2013		
		last pain medication prescription Percent of survey respondents with pills leftover from last pain medication prescription who least sold or	n/a	Clinical Care	Percentage					no data	no data	n/a	benchmark Below			RxSafe Marin County				2015		
		last pain medication prescription who kept, sold, or Percent of survey respondents with expired, unsused,	n/a	Clinical Care	Percentage					no data	no data	n/a	benchmark Below	61.7		Survey RxSafe Marin County				2015		
		or "leftover" prescription medication in their home Estimated Adults Drinking Excessively(Age-Adjusted Percentage)	n/a Alcohol - Excessive	Clinical Care Health Behaviors	Percentage Percentage	102 221	n/a			no data 17.2%	no data 16.9%	n/a State	benchmark Below benchmark		2 30%	Survey Centers for Disease Control and		2006 12	2006-12			
			Alcohol -	Health Behaviors	Percentage		n/a			12.9%	14.3%	State	Below benchmark			Nielsen Site Reports		2000-12	2014	2014		
		Rate of arrests for alcohol related offenses (felony and misdemeanor) among persons age 10 to 69 years (Per		Social and Economic Factors	Rate	data	, a			1203.0	no data	State	Below benchmark		298.00	CA-Community Prevention Initiative		2008	2017	2008		
		Percent of adult smokers who attempted to quit for at least one day in the past year	n/a	Health Behaviors	Percentage					50.7%	no data	State	Above		-17.30%	California Health Interview Survey		2008		2008		
		Chronic liver disease and cirrhosis mortality rate (Per 100,000 Pop.)	n/a	Health Outcomes	Rate		<= 8.2			11.7	no data	State	Below benchmark		-5.70	California Department of Public Health,		2014		2014		
	Related	Total number of homeless individuals		Social and Economic Factors	Number		. 0.2			no data	no data	n/a	n/a	1309	2.70	Marin County Homeless Point-in-				2011 13		
		Total number of unsheltered homeless individuals		Social and Economic Factors	Number					no data		n/a	n/a	835		Marin County Homeless Point-in-				2015		
1		I						1				/ -	1 " -									

		Hea	Ith Indicators							Benchmark	t			Needs Sco	re			ata Detail	s		
Potential Health Needs	Core/ Related	Indicator	Kaiser Indicator Name	MATCH Category	Measure Type	Population Denominator		nrevious	Greater Bay Area	State Benchmark	National Benchmark	Benchmark used to score	Desired Direction	Value for Marin County	Difference from the Benchmark Value	Data Source	Marin Greater Bay previous data Area data year year	State data year	a National data year	County	State data County data statisticall statistically y unstable unstable
		Liquor Stores, Rate (Per 100,000 Population)	Liquor Store Access	Physical Environment	Rate	252,409	n/a		1	10.0	10.4	State	Below benchmark	8.7	-1.30	US Census Bureau,County		2012	2012	2012	
		Percent of kindergarteners with all required immunizations	n/a	Clinical Care	Percentage		>= 95.0				no data	State	Above benchmark	84.2%	-6.20%	California Department of Public Health,		2015		2015	
accine Preventable		Percentage of adults age 65+ who have ever received a pneumonia vaccination	n/a	Clinical Care	Percentage						67.5%	State	Above benchmark		0.90%	Centers for Disease Control and		2006-12	2006-12	2006-12	
nfectious Disease	Core	Pertussis rate (Per 100,000 Pop.)	n/a	Health Outcomes	Rate						no data	State	Below benchmark	71.8	65.50	California Department of Public Health,		2013		2013	
		Influenza and pneumonia mortality (age-adjusted) (Per 100,000 Pop.)	n/a	Health Outcomes	Rate						no data	State	Below benchmark	10.8	-5.50	California Department of Public Health		2011-13		2011-13	
		Homicide, Age-Adjusted Mortality Rate (Per 100,000 Pop.)	Mortality - Homicide	Health Outcomes	Rate	252,409	<= 5.5				no data	State	Below benchmark	1.3	-3.87	University of Missouri,Center for		2010-12		2010-12	
		Suicide, Age-Adjusted Mortality Rate (Per 100,000 Pop.	Mortality -	Health Outcomes	Rate	252,409	<= 10.2				no data	State	Below benchmark	12.8	3.03	University of Missouri,Center for		2010-12		2010-12	
		Motor Vehicle Accident, Age-Adjusted Mortality Rate (Per 100,000 Pop.)	Mortality -	Health Outcomes	Rate	252,409	<= 12.4				no data	State	Below benchmark	0.7	-4.52	University of Missouri,Center for		2010-12		2010-12	
		Motor vehicle crash death rate (age-adjusted) (Per				252,409	ζ= 12.4						Below			Centers for Disease					
		100,000 Pop.)	n/a	Health Outcomes	Rate						no data	State	Below	3.9	-4.10	Control and U.S. Department of		2011-13		2011-13	
		Pedestrian motor vehicle death rate (Per 100,000 Pop.) Pedestrian Accident, Age-Adjusted Mortality Rate (Per	Mortality -	Health Outcomes	Rate		<=1.3				no data	State	benchmark Below	no data		Transportation, University of		2011-2013	3		
		100,000 Pop.) Youth Intentional Injuries Rate (Per 100,000) (Youth	Pedestrian Violence - Youth	Health Outcomes	Rate	252,409	<= 1.3				no data	State	benchmark Below	0.3	-1.68	Missouri,Center for 3-year averages for		2010-12		2010-12	
		Age 13 - 20) Unintentional injury mortality rate (age-adjusted) (Per		Social & Economic Factors	Rate	22,733	n/a				no data	State	benchmark Below	654.0	-84.75	2011-2013 generated Centers for Disease		2011-13		2011-13	
	Core	100,000 Pop.)	n/a Violence -	Health Outcomes	Rate		<=36.0		2	27.9	no data	State	benchmark Below	29.1	1.20	Control and 3-year averages for		2011-13		2011-13	
	core	Assault Injuries Rate (Per 100,000 Pop.) Domestic Violence Injuries Rate among Females Age	Assault (Injury) Violence -	Social & Economic Factors	Rate	254,673	n/a				no data	State	benchmark Below	190.2	-100.12	2011-2013 generated 3-year averages for		2011-13		2011-13	
		10+ (Per 100,000 Pop.)	Domestic Violence -	Social & Economic Factors	Rate	115,861	n/a		9	9.5	no data	State	benchmark Below	15.3	5.75	2011-2013 generated Federal Bureau of		2011-13		2011-13	
		Assault Rate (Per 100,000 Pop.) Substantiated allegations of child maltreatment (abuse	Assault (Crime)	Social & Economic Factors	Rate	255,060	n/a		2	249.4	246.9	State	benchmark Below	128.1	-121.33	Investigation,FBI California Child		2010-12	2010-12	2010-12	
		and neglect) per 1,000 children ages 0-17 Non-fatal emergency department visits for intentional	n/a	Health Outcomes	Rate		<=8.5		8	3.7	no data	State	benchmark Below	4.0	-4.70	Welfare Indicators California Office of		2014		2014	
Violence/Injury		injuries among youth age 13-20 Rate of non-fatal emergency department visits for	n/a	Health Outcomes	Rate				7	738.7	no data	State	benchmark Below	no data		Statewide Health California Department		2011-13			
Prevention		assault (Per 100,000 Pop.) Percent of adults reporting experiencing physical or	n/a	Social and Economic Factors	Rate				2	290.3	no data	State	benchmark Below	no data		of Public Health California Health		2011-13			
		sexual violence by an intimate partner in past year Percent of adults reporting ever experiencing physical	n/a	Social and Economic Factors	Percentage	154,000			3	3.5%	no data	State	benchmark Below	1.7%	-1.80%	Interview Survey California Health		2009		2009	
		or sexual violence by an intimate partner since age 18	n/a Violence -	Social and Economic Factors	Percentage	154,000			1	14.8%	no data	State	benchmark Below	15.4%	0.60%	Interview Survey Federal Bureau of		2009		2009	
		Robbery Rate (Per 100,000 Pop.) Rate of domestic violence calls for assistance (Per 1,000		Social & Economic Factors	Rate	255,060	n/a		1	149.5	116.4	State	benchmark Below	57.5	-92.00	Investigation,FBI California Department		2010-12	2010-12	2010-12	
		Pop.)	n/a Violence - All	Social & Economic Factors	Rate				5	5.1	no data	State		4.1	-1.00	of Justice, Criminal Federal Bureau of		2013		2013	
		Violent Crime Rate (Per 100,000 Pop.) Percentage of 11th grade students reporting current		Social & Economic Factors	Rate	255,060	n/a		4	125.0	395.5	State	benchmark Below	202.7	-222.30	Investigation,FBI California Healthy		2010-12	2010-12	2010-12	
		gang involvement Estimated Adults Drinking Excessively(Age-Adjusted	n/a Alcohol -	Social and Economic Factors	Percentage				7	7.5%	no data	State	benchmark Below	6.3%	-1.20%	Kids Survey Centers for Disease		2011-13		2011-13	
		Percentage) Alcoholic Beverage Expenditures, Percentage of Total	Excessive Alcohol -	Health Behaviors	Percentage	198,881	n/a		1	17.2%	16.9%	State	benchmark Below	19.5%	2.30%	Control and		2006-12	2006-12	2006-12	
	Related	Food-At-Home Expenditures		Health Behaviors	Percentage	no data	n/a		1	12.9%	14.3%	State	benchmark Below	suppresse	c	Nielsen Site Reports California Healthy		2014	2014	2014	
		drinking (respondent or by friend)	n/a Liquor Store	Health Behaviors	Percentage				2	23.0%	no data	State	benchmark Below	24.2%	1.20%	Kids Survey US Census		2011-13		2011-13	
		Liquor Stores, Rate (Per 100,000 Pop.)	Access	Physical Environment	Rate	252,409	n/a		1	10.0	10.4	State	benchmark Below	8.7	-1.30	Bureau,County		2012	2012	2012	
		Rape Rate (Per 100,000 Pop.)		Social & Economic Factors	Rate	255,060	n/a		2	21.0	27.3	State	benchmark	16.3	-4.66	Federal Bureau of Investigation,FBI		2010-12	2010-12	2010-12	
		Suspension Rate (Per 100 enrolled students)	Violence - School Violence -	Social & Economic Factors	Rate	65,437	n/a		4	4.0	no data	State	benchmark Below	2.1	-1.94	California Department of Education California Department		2013-14		2013-14	
		Expulsion Rate (per 100 enrolled students)		Social & Economic Factors	Rate	65,437	n/a		0	0.1	no data	State	benchmark	0.0	-0.04	of Education		2013-14		2013-14	
		Percent of English language learners (grade 10) who passed the California High School Exit Exam in English	n/a	Social and Economic Factors	Percentage				3	38.0%	n/a	State	Above benchmark	26.0%	-12.00%	California Department of Education		2013-14		2014	
		Percent of English language learners (grade 10) who passed the California High School Exit Exam in Math	n/a	Social and Economic Factors	Pecentage				5	54.0%	n/a	State	Above benchmark	37.0%	-17.00%	California Department of Education		2013-14		2014	
		Suspension Rate (per 100 enrolled students)	Violence - School	Social & Economic Factors	Rate	65,437	n/a		4	4.0	no data	State	Below benchmark	2.1	-1.94	California Department of Education		2013-14		2013-14	
		Expulsion Rate (per 100 enrolled students)		Social & Economic Factors	Rate	65,437	n/a		0	0.1	no data	State		0.0	-0.04	California Department of Education		2013-14		2013-14	
		Cohort Graduation Rate (Percent of students graduating in 4 years)	Education - High School	Social & Economic Factors	Rate	2,226	>= 82.4		8	30.4	no data	State	Above benchmark	91.4	10.98	California Department of Education		2013		2013	

		Hea	Ith Indicators							Benchmarl	k			Needs Sco	re			Data Deta	ils	
Potential Health Needs	Core/ Related	Indicator	Kaiser Indicator Name	MATCH Category	Measure Type	Population Denominator	HP 2020 Value	Marin county previous time point	Greater	State Benchmark	National Benchmark	Benchmark used to score		Value for Marin County	Difference from the Benchmark Value	Data Source	previous data Are	ater Bay State da a data year year	ta National data year	
			Teen Births										Below			California Department				
Youth Developmen	t Core	Teen Birth Rate (Per 1,000 Female Pop. Under Age 20) Percent of 11th grade students who report they've	(Under Age 20)	Social & Economic Factors	Rate	27,504	n/a		8	3.5	no data	State	benchmark Below	2.7	-5.81	of Public Health, California Healthy		2011		2011
		been victims of cyber bullying in the past 12 months	n/a	Health Outcomes	Percentage				2	23.2%	no data	State	benchmark	23.8%	0.60%	Kids Survey		2011-13		2011-13
		Percent of 11th grade students reporting harassment	.,-										Below			California Healthy				
		on school property related to their sexual orientation	n/a	Health Outcomes	Percentage				7	7.6%	no data	State	benchmark	6.6%	-1.00%	Kids Survey		2011-13		2011-13
		Percent of 11th grade students reporting harassment											Below			California Healthy				
		or bullying on school property within the past 12	n/a	Health Outcomes	Percentage				2	27.6%	no data	State		24.7%	-2.90%	Kids Survey		2011-13		2011-13
		Percentage of 11th grade students reporting current											Below			California Healthy				
		gang involvement	n/a	Social and Economic Factors	Percentage				7	7.5%	no data	State	benchmark	6.3%	-1.20%	Kids Survey		2011-13		2011-13
		Percent of children in foster care system for more than											Above			California Child				
		8 days but less than 12 months with 2 or less	n/a	Social and Economic Factors	Percentage				8	36.6%	no data	State		81.8%	-4.80%	Welfare Indicators		2014		2014
1		Percent of children no longer in foster care system after	r										Above			California Child				
		12 months	n/a	Social and Economic Factors	Percentage	no data	n/a		3	38.3%	no data	State	benchmark	suppresse	c	Welfare Indicators		2013		2013

Marin County, CA

								Warm Cour	,,							(=.1.1								
		Heal	th Indicators				Benchmark								R	ce/Ethnic	Group Data							
Potential Health Needs	Core/Relate	d Indicators	MATCH Category	Measure Type	Population Denominator	HP 2020 Value	Report Area Benchmark	Desired Direction	Non-Hispanic White	Non-Hispanic Black	Native Native America/ Alaskan Native	Non-Hispanic Asian	Non-Hispanie Native Hawiian/ Pacific Islander	Non-Hispanic Other	Non-Hispanic Multiple Race	White Alone	Black Alone	Native American/ Alaskan Vative Alone	Asian Alone	Native Hawiian/ Pacific Islander Alone	Some Other Race Alone	Multiple Race	Hispanic/ Latino (Any Race)	Not Hispanic/ Latino (Any Race)
	Core	Overweight (Youth)	Health Outcomes	Percentage	7,276	n/a	16.32%	Below benchmark	13.45%								17.12%					19.41%	22.33%	
		Low Fruit/Vegetable Consumption (Youth)	Health Behaviors	Percentage	31,000	n/a	50.10%	Below benchmark	65.70%					25.70%									27.60%	
Obesity/HEAL/ Diabetes		Physical Inactivity (Youth)	Health Behaviors	Percentage	7,276	n/a	23.72%	Below benchmark	18.08%	37.86%		19.07%			25.97%								41.41%	
Obesity/HEAL/ Diabetes	Related	Breastfeeding (Any)	Health Behaviors	percentage	2,033	n/a	98.52%	Above benchmark	98.42%	100.00%		100.00%		100.00%	98.99%								98.18%	
		Breastfeeding (Exclusive)	Health Behaviors	Percentage	2,033	n/a	88.49%	Above benchmark	90.42%	84.09%		82.61%			81.82%								87.59%	
		Walking/Biking/Skating to School	Health Behaviors	Percentage	41,558	n/a	0.385	Above benchmark	0.376	0.929				0.287									0.42	
Mental Health	Core	Mortality - Suicide	Health Outcomes	Rate	252,409	<= 10.2	12.83	Below benchmark	13.311539								12.462001		9.24451			0	6.209172	
Wenter reach		Mental Health - Needing Mental Health Care	Health Outcomes	Percentage	245,000	n/a	11.60%	Below benchmark	22.20%	40.30%				11.80%									24.90%	
Access to Care	Related	Insurance - Uninsured Population	Social & Economic Factors	Percentage	248,491	n/a	8.91%	Below benchmark	5.18%								15.67%	27.09%		7.47%	33.07%	10.98%	26.57%	5.72%
Asthma	Related	Overweight (Youth)	Health Outcomes	Percentage	7,276		16.32%	Below benchmark	13.45%								17.12%					19.41%	22.33%	
Oral Health	Core	Absence of Dental Insurance Coverage	Clinical Care	Percentage	189,000		43.30%	Below benchmark	34.44%															
		Heart Disease Prevalence	Health Outcomes	Percentage	194,000			Below benchmark	9.10%														3.80%	
	Core	Mortality - Ischaemic Heart Disease	Health Outcomes	Rate	252,409			Below benchmark	112.748139								174.54478		86.237659			49.343922		
CVD/Stroke		Mortality - Stroke	Health Outcomes	Rate	252,409			Below benchmark	27.627009								53.038065		16.952954			3.989346	20.313126	
	Related	Physical Inactivity (Youth)	Health Behaviors	Percentage	7,276			Below benchmark	18.08%	37.86%		19.07%			25.97%								41.41%	
		Overweight (Youth)	Health Outcomes	Percentage	7,276			Below benchmark	13.45%								17.12%					19.41%	22.33%	
		Mortality - Homicide	Health Outcomes	Rate	252,409			Below benchmark	0.897483								4.895692		0			0	0.7278	
Violence/Injury Prevention	Core	Mortality - Suicide	Health Outcomes	Rate	252,409			Below benchmark	13.311539								12.462001		9.24451			0	6.209172	
		Mortality - Motor Vehicle Accident	Health Outcomes	Rate	252,409			Below benchmark	0.325882								0		1.517075			2.757478	0.7278	
		Mortality - Pedestrian Accident	Health Outcomes	Rate	252,409			Below benchmark	0.106556								0		1.517075			0	0	
		Cancer Incidence - Breast	Health Outcomes	Rate	127,211		-	Below benchmark								151.8							122.5	
		Mortality - Cancer	Health Outcomes	Rate	252,409		146.68	Below benchmark	150.160192								187.18963		122.33169			81.032266	60.946421	
Cancers	Core	Cancer Incidence - Cervical	Health Outcomes	Rate	127,211		5	Below benchmark								5.9								
		Cancer Incidence - Colon and Rectum	Health Outcomes	Rate	250,666			Below benchmark								40.1							43.5	
		Cancer Incidence - Prostate	Health Outcomes	Rate	123,455			Below benchmark								184.5	244.2						171	
		Cancer Incidence - Lung	Health Outcomes	Rate	250,666			Below benchmark								45.8	54.5						37.3	
HIV/AIDS/STDs	Core Core	STD - HIV Prevalence	Health Outcomes	Rate Rate	215,041 12,775			Below benchmark	319.11 2.6	3484.32 -9999													520.53 -9999	
Maternal and Infant Health	Core	Infant Mortality	Health Outcomes		2,033			Below benchmark	98.42%	100.00%		100.00%		100.00%	00.000/								98.18%	
Maternal and Infant Health	Related	Breastfeeding (Any) Breastfeeding (Exclusive)	Health Behaviors Health Behaviors	percentage Percentage	2,033			Above benchmark	90.42%			82.61%		100.00%	98.99% 81.82%								87.59%	
		Poverty - Population Below 100% FPL	Social & Economic Factors	Percentage	2,033			Above benchmark Below benchmark	90.42%	84.09%		82.01%	1		01.02%	6.25%	24.69%	34.11%		9.39%	16.26%	8.98%	17.53%	5.98%
	Core	Poverty - Children Below 100% FPL	Social & Economic Factors	Percentage	247,026			Below benchmark	4.19%							3.2376	26.75%	61.49%		0.00%	19.77%	7.20%	20.74%	5.51%
		Education - High School Graduation Rate	Social & Economic Factors	Rate		n/a >= 82.4		Above benchmark	94.86	80.26		95.31		91.8			20.75%	01.49%		0.00%	15.77%	7.20%	83.02	3.51%
Economic Security		Education - Reading Below Proficiency	Social & Economic Factors	Percentage		>= 82.4 <= 36.3%		Below benchmark	0.98%	8.33%	0.00%			91.8									10.03%	
	Related	Education - Reading Below Proficiency Education - Less than High School Diploma (or Equivalent)		Percentage	187,029			Below benchmark	0.98%	0.3376	0.00%	1.01%				3.94%	22.17%	27.57%		19.38%	43.68%	13.82%	34.46%	3.82%
		Insurance - Uninsured Population	Social & Economic Factors	Percentage	248,491			Below benchmark	5.18%							3.94%	15.67%	27.09%		7.47%	33.07%	10.98%	26.57%	5.72%
Climate and Health	Related		Health Outcomes	Rate	252,409			Below benchmark	112.748139								174.54478		86.237659	7.4776	33.0176	49.343922		3.72%
Overall Health		Population with Any Disability	Demographics	Percentage	248,491			Below benchmark	112.740139							9.36%		19.79%	00.237039	6.70%	3.45%		4,94%	9.67%
Overall Health	core	ropulation with Arry Disability	Demographics	reiceillage	248,491	II/a	8.93%	below pericilliars								3.30%	14.80%	15.79%		0.70%	3.43%	7.33%	4.94%	9.07%

Appendix C. Community Input Tracking Form

Data Collection Method	Title/Name	Number	participant	in the focus	group self	rviewee or at li- identified as a collowing popu	a leader,	Date Input Was Gathered
Meeting, focus group, interview, survey, written correspondence, etc.	Respondent's title/role and name or focus group population	Number of participants	Health Department representative	Chronic Condition	Minority	Medically underserved	Low-income	Date of data collection
Interview	Executive Director, Apple Family Works	1		X	X		X	10/9/15
Interview	Executive Director, Canal Alliance	1						9/22/15
Interview	Executive Director, Coastal Health Alliance	1				X	Х	9/22/15
Interview	Founder & Chairman, ExtraFood.org	1						10/21/15
Interview	Deputy Executive, Homeward Bound	1					X	9/23/15
Interview	Executive Director, Huckleberry Youth Program	1			X	X	X	10/2/15
Interview	Medical Group Administrator, Kaiser Permanente Medical Center	1						10/13/15
Interview	Executive Director, Marin Center for Independent Living	1		X	X	X	X	10/1/15

Appendix C. Community Input Tracking Form

Meeting, focus group, interview, survey, written correspondence, etc.	Respondent's title/role and name or focus group population	Number of participants	Health Department representative	Chronic Condition	Minority	Medically underserved	Low-income	Date of data collection
Interview	Chief Executive Officer, Marin Community Clinics	1		X	X	X	X	9/24/15
Interview	President, Marin County Board of Supervisors	1						9/28/15
Interview	Public Health Officer, Marin County Health & Human Services	1	X					10/21/15
Interview	County Superintendent of Schools, Marin County Office of Education	1		X	X	X	X	10/2/15
Interview	Chief Administrative Officer, Marin General Hospital	1						10/2/15
Interview	Chief Administrative Officer, Novato Community Hospital	1		X	X	X	Х	9/25/15
Interview	Medical Director, RotaCare Clinic of San Rafael	1		X	X	X	X	9/22/15
Interview	Chief Executive Officer, Whistlestop	1		X	X	X	X	9/22/15
Interview	Executive Director, Marin YMCA	1		X			X	9/24/15
Interview	General Manager, Marin City Community Services District	1			X	X	X	10/2/15
Interview	Police Chief, San Rafael	1		X	X	X	X	10/21/15
Interview	Director of Special Education, Novato Unified School District	1			X			10/27/15

Appendix C. Community Input Tracking Form

Meeting, focus group, interview, survey, written correspondence, etc.	Respondent's title/role and name or focus group population	Number of participants	Health Department representative	Chronic Condition	Minority	Medically underserved	Low-income	Date of data collection
Focus Group	Marin County; Youth (English)	4		X	X		X	10/5/15
Focus Group	Marin City; Adults (English)	17		X	X	X	X	10/5/15
Focus Group	Marin County; Residents in recovery from substance abuse (English)	8		X	X	X	X	10/8/15
Focus Group	Novato; Adults (Spanish)	13		X	X	X	X	10/8/15
Focus Group	San Geronimo; Adults (English)	11		X			X	10/14/15
Focus Group	Canal; Adults (Spanish)	13		X	X	X	X	10/14/15
Focus Group	Novato; Residents experiencing homelessness (English)	14		X	X	X	X	10/13/15
Focus Group	West Marin; Adults (Spanish)	10		X	X	X	X	10/22/15

^{*} Indicates self-identification of interviewees or focus group participants as a leader, member, or representative of each specified population. In some cases, individuals did not self-identify as a representative of any of the listed groups.

Appendix D. Primary Data Collection Tools Key Informant Interview Protocol

Date:				
Interviewee ID:		Interviewee Name:		
Position:		Organization:		
Interviewer:				
Introduction				
•	and several non-profit ho	der+Company Community Research. We ospitals in Marin on a comprehensive Co	_	

You have been identified as an individual with extensive and important knowledge of the [Marin County Community / Specific subpopulation of Marin County] that can help us with the CHNA -- to help ensure that we get a clear picture of health-related issues that impact our Marin County residents. We are very interested in having you share thoughts and ideas that go beyond access to medical care, taking into consideration social, economic, and environmental factors that impact health. Your input will inform the development of the CHNA as well as a community health implementation plan for all of Marin County

This interview will take about 30-45 minutes. Our discussion today will be incorporated into the Community Health Needs Assessment for Marin County. Everything we talk about today is confidential. That means that when I write up a report of what was said, I won't use your name or any other information to identify who you are. However, there is always a chance that someone is able to identify what you said.

Do you have any questions so far?

Before we start talking about the specifics, I want to make sure you know that, during this interview: There is no right or wrong answer, just your ideas.

It's ok if you don't have an answer or opinion about a particular question. It is just as important for us to know that too. "I don't know" is an ok thing to say. And finally,

If at any time while we are talking you are not sure what I mean or have questions, do not hesitate to ask questions and let me know.

I would like to take notes and record during the interview so that I make sure that I get your statements exactly how you stated them.

Is it ok for me to take notes? Great! Just as a reminder, since I will be typing notes, there might be some short delays to make sure I am able to capture everything you say.

Is it ok for me to record our conversation?

Before we begin, do you have any questions?

Questions

- 1. a) Would you give me a brief description of your organization, and your role there?
 - b) Within Marin County, what geographic area do you primarily serve?
- 2. a) What are the **most important health needs** that have the greatest impact on overall health in Marin County?
 - b) What are the <u>specific populations</u> that are most adversely affected by the health problems you just mentioned? (e.q., Latinos, postpartum women, seniors)
 - c) The following were identified as priority health issues during the previous CHNA process in 2013:
 - i. Significant Health Issues:
 - 1. Poor mental health
 - 2. Substance abuse
 - 3. Health Care Access
 - 4. Poverty/Income inequality
 - 5. Healthy eating / Active living

Can you tell me how aware you are of these health issues? How do they impact overall health in Marin County?

- d) What existing community assets and resources could be used to address these health issues and inequities [and the health issues you think are most important]?
- 3. a) What <u>health behaviors</u> do you think have the biggest influence on the issues we just discussed in your community?
- b) The following were identified as significant health behaviors during the previous CHNA process in 2013:
 - i. Significant information about health behaviors from 2013 CHNA:
 - 1. 21.5% of adults reported that they needed help for emotional/mental health problem or use of alcohol/drugs
 - 2. 55% of 11th graders reported using alcohol or drugs, not including tobacco
 - 3. 10.4% of people were lacking a consistent source of primary care
 - 4. 8.2% of adults did not graduate high school; 63.1% of adults in Canal area of San Rafael did not graduate high school
 - 5. 70.6% of adults were getting moderate exercise

Can you tell me how aware you are of these health behaviors? How do they impact overall health in Marin County?

c) What existing community assets and resources could be used to address these health issues and inequities [i.e. the health issues we just mentioned or those you identified earlier]?

- 4. a) Are you aware of <u>social factors</u> that influence on the issues we've discussed for your clients/your community? If so, what social issues have the largest influence on these health issues?
- b) Are you aware of <u>economic factors</u> that influence the issues we've discussed for your clients/your community? If so, what economic issues have the largest influence on these health issues?
- c) The following were identified as socioeconomic conditions in Marin during the previous CHNA process in 2013:
 - i. Significant information about socioeconomic conditions:
 - 1. 45.6% of adults were paying higher than 30% of total household income for housing.
 - 2. 17.2% of residents had incomes below 200% of Federal Poverty Line
 - 3. 6.7% were unemployed
 - 4. Median household income was \$89,268
 - 5. 2.094 unmet subsidized child care slots existed in Marin

Can you tell me how aware you are of these socioeconomic conditions? How do they impact overall health in Marin County?

- d) What existing community resources could be used to address these health issues and inequities?
- 5. a) Are you aware of <u>environmental factors</u> that influence the issues we've discussed for your clients/your community? If so, which factors have the biggest influence on overall health in your community?
- b) The following were identified as environmental conditions in Marin during the previous CHNA process in 2013:
 - i. Significant information about environmental issues:
 - 1. 2.5% of housing units were overcrowded
 - 2. San Rafael had 113.9 liquor stores per every 100,000 people
 - 3. 3.8% of housing units in Marin were categorized as affordable housing
 - 4. 2.5% of housing units were overcrowded
 - 5. 24.2 recreation and fitness facility establishments were available in Marin per 100,000 residents

Can you tell me how aware you are of these environmental factors? How do they impact overall health in Marin County?

- c) What existing community resources could be used to address these health issues and inequities?
- 6. What are the **challenges** Marin County faces in addressing the health needs you mentioned previously?

	a)	Are there any current trends that may have an important impact on the health of Marin County residents?
	b)	Are there any challenges that may impact economic opportunities in the community? Access to health care services? Community engagement? Public safety?
	7.	a) Do you have suggestions for systems-level collaborations or changes that could help to address the inequities we just talked about?
		ooking across all sectors, who are some current or potential community partners that we have yet engaged who could help to impact these issues?
		rief demographics question we would like to ask. These are strictly for tracking purposes and you to answer these questions if you don't want to.
	8. 	Do you identify as a leader, representative, or member of any of the following communities? Please select all that apply. Individuals with chronic conditions Minorities Medically underserved Low-income
Those a	are all	the questions I have for you today. Do you have anything else you would like to add?
		or taking the time to have this conversation! The information that you provided will be very helpful the needs assessment but also in crafting actions to address those needs.

Focus Group Protocol

Hi everyone. My name is	and I will be facil	itating today's group. This is	and he/she will
be taking notes and may jump	in with any additional o	questions throughout the gro	up.

First, we want to thank you for agreeing to be a part of this discussion, which will last about 1-2 hours. Marin County healthcare workers really want to improve the health of your community, and many of those people are sitting at the table together to think about the best ways to do this. The information we gather today will be used as part of a collaborative needs assessment that will help Kaiser Permanente, Sutter Health, Marin General Hospital, Health and Human Services, and Healthy Marin Partnership to work together to determine what they can do to improve health in Marin County. Additionally, as a part of the Affordable Care Act, the federal government requires nonprofit hospitals to conduct community health needs assessments every three years, and to use the results of these assessments to implement plans to improve community health. This assessment will also fulfill this requirement for the hospitals.

In this health needs assessment, we want to be sure to bring in voices that are not always represented. One of the reasons we are having this focus group is because we are really interested in the needs of [XX group] across the county. Please keep this lens in mind as we talk about your experience in your community. Before we begin, I'd like to talk about a few guidelines for our discussion.

- There are no right or wrong answers.
- Every opinion counts. We will respect other's opinions. It is perfectly fine to have a different opinion than others in the group, and you are encouraged to share your opinion even if it is different.
- Everyone should have an equal chance to speak. Please speak one at a time and do not interrupt anyone else.
- Do not hesitate to ask questions if you are not sure what we mean by something.
- Because we have a limited amount of time and a lot to discuss, I may need to interrupt you to give everyone a chance to speak, or to get to all the questions.
- What's said here, stays here. Everything we discuss today is completely confidential. We will summarize what the group had to say, but will not tell anyone who said what. Your names will never be mentioned. We also ask that you not repeat what is said here outside this room.
- We'd also like to record our conversation. Our note taker will be taking notes so that we remember what people had to say, but we'd also like to record the conversation to ensure we have the most accurate information possible. Is that okay?

How do these guidelines sound to everyone? Do you have any questions before we begin?

Introductions/Background

1) Let's start by introducing ourselves. Please tell us very briefly your first name, the town/city you live in, and one thing that you are proud of about your community.

Quality of life in community

- 2) Briefly, please describe what it is like to live in your community.
- 3) From your perspective, what are the biggest health issues among [subpopulation]?
 - 3a. Of the health issues you've mentioned, which would you say are the most important or urgent to address? Why?
- 4) What do you think are some of the biggest reasons why these health issues occur in your community?
- 4b) What things keep you and your family from being as healthy as they could be?
- 5) From your perspective, what health services are lacking for you and the people you know in your community?
- 5b) From your perspective, what health services are difficult to access for you and the people you know in your community?
 - Follow up: What other challenges keep individuals from seeking help?
- 6) Has the Affordable Care Act [may also be known as Covered California, Obamacare] had any impact on you or the people you know in your community?

Community Assets, Barriers, and Gaps

- 7) Outside of healthcare, what resources exist in your community to help you and the people you know to live healthy lives?
 - 7a) What are the barriers to accessing these resources?
 - 7b) What resources are missing?

What is needed to improve health?

- 8) What do you think is [or who is] needed to improve your health or the health of the people you know in your community?
- 9) Is there anything else you would like to share with our team about the health of your community [that hasn't already been addressed]?

Please make sure to fill out the quick survey before you leave! Thank you so much for your time!

Focus Group Demographic Survey

Thank you for participating in today's discussion group. We would like to ask you a few questions to understand who attended our groups. This survey is VOLUNTARY which means that do not have to participate. It is anonymous- your answers will not be tied to your name or any other personal information and we will report answers of the group as a whole.

		Black/African A	America	an 🗆	/	Asian (if check	æd,	please	select a	choice l	oelov	v):	
		White/Caucasi			0	.	,	0	Chinese		0	Korean	
	_				0	Hmong		0	Pakista	ni	0	Laotian	
		Hispanic/Latin	0		0	Vietnamese		0	Japane	se	0		
		Native America	an		0	Filipino Other:		0	Thai		0	Native Hawaiian or Pacific Islander	
	What is your current gender identity? (Check one that best describes your current gender identity.)												
		Male				Female				Gendei	raue	er / Gender non-confo	rmina
		Trans man				Trans woma	n				•	nder identity (Fill in the	_
		Declined to ans	wer		_				_				
	(Please select all that apply.) ☐ Individuals with chronic conditions ☐ Minorities					☐ Medically underserved☐ Low-income							
							6.	Wha	ıt would	d you e	stim	ate your yealy	
4.	What	is your age gro	oup?				6.			d you e		ate your yealy	
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FOR ADMINISTRATIVE PURPOSES ONLY

Group Location: Survey ID: Today's Date: // /_/

Appendix D. Primary Data Collection Tools Prepared by Harder+Company Community Research

Appendix E. Prioritization Scoring Matrix

Instructions: For each health need, write down a score between 1 to 7 for each criterion (1 being the lowest and 7 being the highest score possible). For example, if an issue is nearly impossible to prevent, it could be assigned a 1 in "Prevention" but may receive a score of 6 in "Severity". You will then use the clickers to indicate your score for each health need and criterion. Once everyone scores each health need, the scores will be averaged and multiplied by the weighting value to determine an overall score for each health need.

Health Need	Severity	Disparities	Prevention	Leverage
	The health need has serious consequences (morbidity, mortality, and/or economic burden) for those affected.	The health need disproportionately impacts specific geographic, age, or racial/ethnic subpopulations	Effective and feasible prevention is possible. There is an opportunity to intervene at the prevention level and impact overall health outcomes.	Solution could impact multiple problems. Addressing this issue would impact multiple health issues.
Weighting	1.5	1	1.5	1
Access to Health Care				
Economic and Housing Insecurity				
Education				
Violence and Unintentional Injury				
Mental Health				
Substance Abuse				
Obesity and Diabetes				
Oral Health				