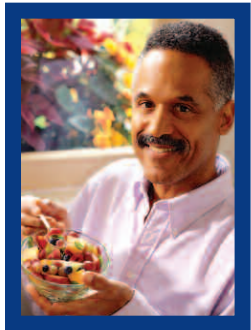


A PUBLICATION OF LOS ANGELES COUNTY DEPARTMENT OF HEALTH SERVICES
PUBLIC HEALTH

KEY INDICATORS OF HEALTH

BY SERVICE PLANNING AREA



Health indicators are useful tools for monitoring the health of the population and communicating with multiple audiences about opportunities to improve health. These indicators are designed to reflect the broad contributors to health—social and physical environments, behaviors, and health conditions. Most importantly, they invite action by an increasingly broad range of individuals and organizations who share some responsibility for health, even if their primary mission falls outside the traditional domain of health care or public health.

The conditions represented by these indicators point to real opportunities for action. History has shown the high rate of “return” on public health investments. In fact, investments in prevention during the past century are estimated to account for 25 of the 30 years gained in average life expectancy in the U.S. For example, vaccines to protect children from polio and other infectious diseases, improvements in motor vehicle safety, safer and healthier foods, and clean drinking water, have saved lives and prevented disability. Furthermore, the costs associated with preventable disease and disability are high. For example, in Los Angeles County, the direct medical and indirect costs of obesity are estimated at \$3.4 billion, and smoking at \$4.3 billion, annually.

Wise investments in policy and program-based strategies can yield enormous payoffs whether implemented in schools, worksites, health care facilities, or in community settings. Policy interventions can be especially cost-effective ways to prevent disease and disability. Examples include implementing nutritional standards on school campuses, taxes on alcohol, and protocols to enhance workplace safety. In health care settings, smoking cessation counseling by physicians and age-appropriate cancer screening are examples of cost-effective ways to prevent disease and improve health outcomes. Community-based interventions may include improving physical activity curricula in schools, upgrading parks and recreation facilities, and providing safe after-school activities for youth. Proven effective approaches to improving health exist, and we must utilize them to get the highest return on our collective investment.

We hope that the information in this report provides a rich snapshot of health in Los Angeles County. Please note that statistical comparisons to the “average” should not always suggest that the average is desirable or acceptable. For example, the fact that smoking rates have declined to their lowest level in over two decades of monitoring is good news; however, none would argue that a smoking rate above zero yields the best possible health outcomes. We encourage your feedback and partnership in attaining better health for all.

Jonathan E. Fielding

Jonathan E. Fielding, MD, MPH
Director of Public Health and Health Officer



INTRODUCTION

This publication, *Key Indicators of Health*, provides data for over 60 health indicators for L.A. County and each of the county's eight Service Planning Areas (or SPAs). These areas form the organizational basis for many efforts to improve health. As such, it is vital that we track health indicators at the SPA level over time. As depicted in the population ranking (at right), many of L.A. County's SPAs are comparable with several U.S. states in total population. Visit any of the Public Health Programs or contact any of the eight SPA Offices at www.lapublichealth.org.



POPULATION RANKING

Populations of L.A. County SPAs and individual U.S. states by rank.

1. California	31. Iowa
2. Texas	32. Mississippi
3. New York	33. Kansas
4. Florida	34. Arkansas
5. Illinois	35. Utah
6. Pennsylvania	36. Nevada
7. Ohio	37. SPA 2-San Fernando (1,981,961)
8. Michigan	38. New Mexico
9. L.A. County (9,519,338)	39. West Virginia
10. New Jersey	40. SPA 3-San Gabriel (1,734,254)
11. Georgia	41. Nebraska
12. North Carolina	42. SPA 8-South Bay (1,500,185)
13. Virginia	43. Idaho
14. Massachusetts	44. SPA 7-East (1,285,210)
15. Indiana	45. Maine
16. Washington	46. New Hampshire
17. Tennessee	47. Hawaii
18. Missouri	48. SPA 4-Metro (1,144,083)
19. Wisconsin	49. Rhode Island
20. Maryland	50. SPA 6-South (955,054)
21. Arizona	51. Montana
22. Minnesota	52. Delaware
23. Louisiana	53. South Dakota
24. Alabama	54. North Dakota
25. Colorado	55. Alaska
26. Kentucky	56. SPA 5-West (613,191)
27. South Carolina	57. Vermont
28. Oklahoma	58. District of Columbia
29. Oregon	59. Wyoming
30. Connecticut	60. SPA 1-Antelope Valley (305,400)

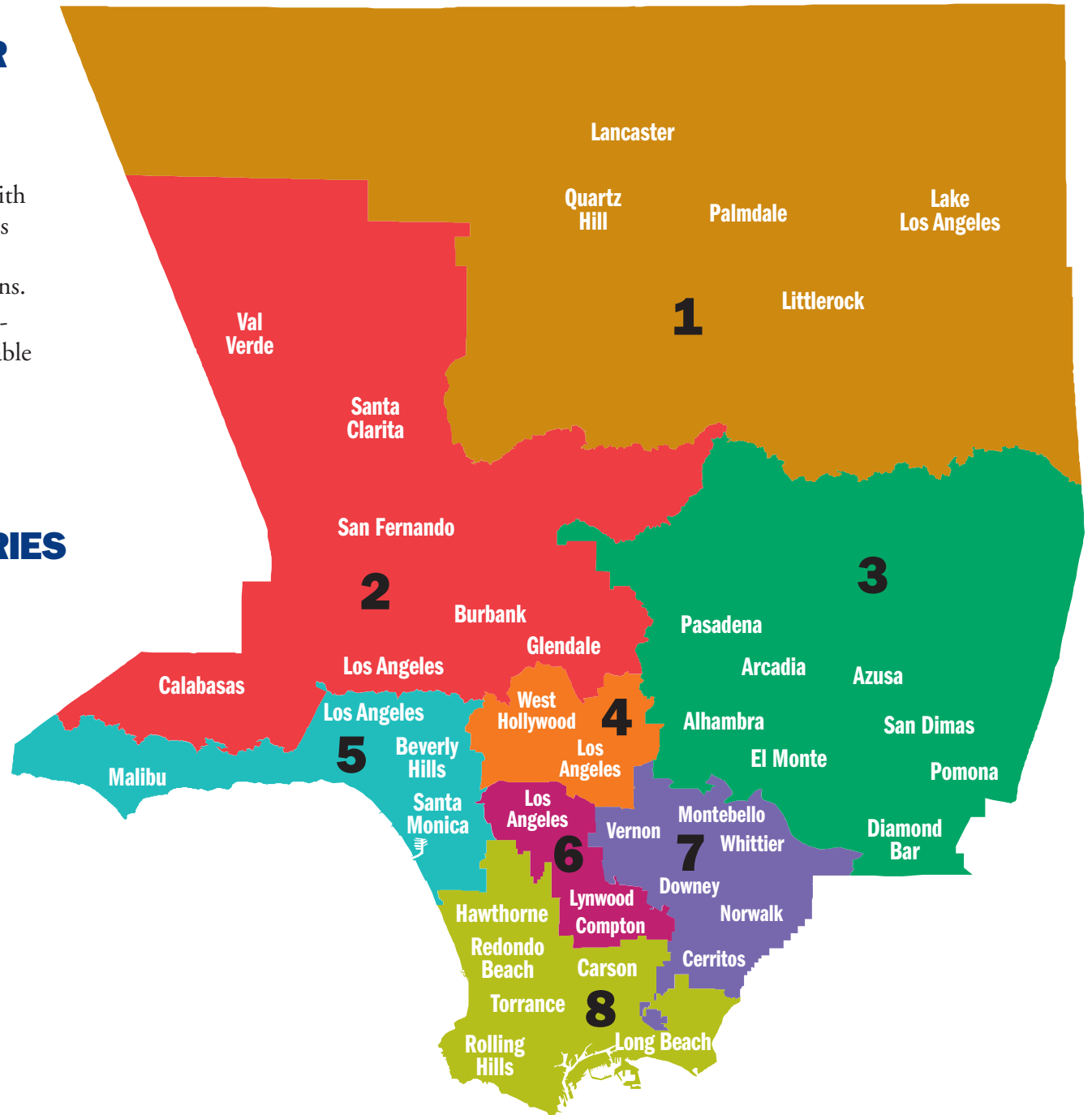
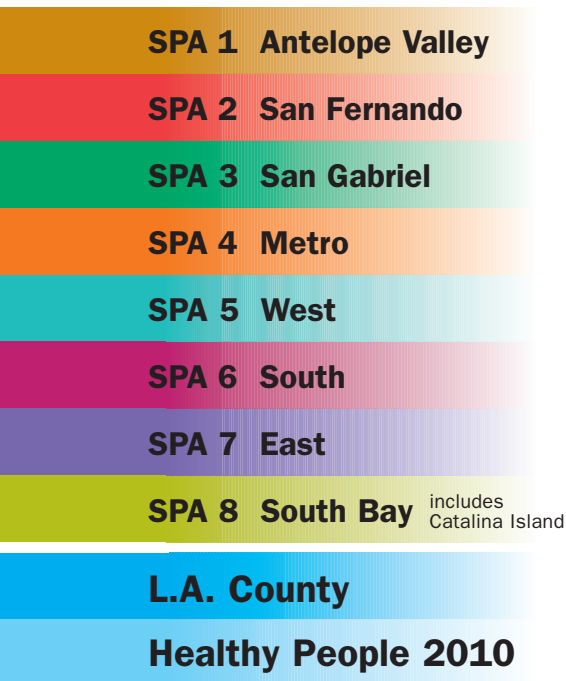
A USER'S GUIDE TO COLOR

Each SPA is designated by a specific color, as seen below and at right, that is continued throughout this publication.

Data for L.A. County is highlighted along with notations that show whether a particular SPA is faring better  or worse  than the County average, based on statistical comparisons.

In addition, the Healthy People 2010²¹ objectives are provided where available and comparable to the indicator.

SERVICE PLANNING AREAS (SPAs) BOUNDARIES



HEALTH BEHAVIORS

Approximately 40% of all deaths in the United States are linked to smoking, physical inactivity, poor nutrition, alcohol abuse, and other drug use.²⁰ Many community-based and health care provider interventions have been proven to reduce these and other health risk behaviors, and to increase health-promoting behaviors.

Alcohol and Drug Use

- Rate of drug-related death among adults (age-adjusted per 100,000 population)²
- Percent of all adults who binge drink—had 5 or more alcoholic drinks (4 for women) on at least one occasion in the past 30 days^{1a}
- Percent of teens ages 14–17 who drink—consumed at least one alcoholic drink in the past 30 days³ (*Los Angeles Unified School District only*)

Tobacco Use

- Percent of adults who smoke cigarettes¹
- Percent of teens ages 14–17 years who smoke cigarettes³ (*Los Angeles Unified School District only*)

Overweight Children⁴

- Percent of children in grades 5, 7 & 9 who are overweight (BMI above the 95th percentile)

Overweight and Obese Adults^{1b}

- Percent of adults who are overweight (25.0 ≤ BMI < 30.0)

	Healthy People 2010	Los Angeles County	Antelope Valley SPA 1	San Fernando SPA 2	San Gabriel SPA 3	Metro SPA 4	West SPA 5	South SPA 6	East SPA 7	South Bay SPA 8
Rate of drug-related death among adults (age-adjusted per 100,000 population) ²	1.0	9.6	9.8	7.6	6.6	10.4	8.5	11.2	10.6	10.1
Percent of all adults who binge drink—had 5 or more alcoholic drinks (4 for women) on at least one occasion in the past 30 days ^{1a}	6.0	17.1	15.8	16.2	14.9	19.8	18.5	16.1	19.1	17.3
Percent of teens ages 14–17 who drink—consumed at least one alcoholic drink in the past 30 days ³ (<i>Los Angeles Unified School District only</i>)	N/A	41.6	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Percent of adults who smoke cigarettes ¹	12.0	15.6	20.6	15.1	14.8	17.0	14.3	14.2	15.0	16.9
Percent of teens ages 14–17 years who smoke cigarettes ³ (<i>Los Angeles Unified School District only</i>)	16.0	13.9	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Percent of children in grades 5, 7 & 9 who are overweight (BMI above the 95th percentile)	5.0	21.2	18.1	18.0	21.2	24.3	16.2	25.5	25.0	19.6
Percent of adults who are overweight (25.0 ≤ BMI < 30.0)	N/A	35.4	39.1	37.0	34.8	34.5	26.4	35.0	41.2	33.9

- Percent of adults who are obese (BMI ≥ 30)

Physical Activity

- Percent of adults who are physically active—obtain recommended amount of exercise each week^{1c}
- Percent of adults who are sedentary¹

Nutrition¹

- Percent of adults who consume five or more servings of fruits and vegetables a day

N/A	19.3	24.7	15.9	17.7	17.2	10.6	30.0	23.6	21.2
N/A	47.3	45.4	48.0	44.0	51.8	55.6	44.5	47.6	44.6
N/A	42.6	44.4	41.8	44.3	39.0	33.3	47.4	44.7	44.0
N/A	12.1	12.8	12.9	12.2	11.9	16.7	8.9	10.9	11.2

N/A =Data were not available where noted

● =SPA statistically better off than the L.A. County average (p<0.05)

● =SPA statistically worse off than the L.A. County average (p<0.05)



- Rates of **binge drinking**, when calculated among only those who reported any drinking in the past month, were 32% among adults and 49% among teens (ages 14-17 years).^{1a & 3}
- Adult **obesity** increased from 14% in 1997 to 19% in 2002.^{1b}
- Adult **obesity** was highest among African-Americans (31%) followed by Latinos (24%), Whites (16%), and Asians/Pacific Islanders (6%).^{1b}
- 25% of boys and 18% of girls attending public schools in grades 5, 7 and 9 are **overweight**.⁴
- **Physical activity** does not have to be strenuous in order to be beneficial.
- Participating in 30 minutes of moderate **physical activity** (e.g., walking) each day improves health and reduces the risk of developing diseases.¹⁹
- There are over one million adult **smokers** in Los Angeles County.¹
- Adult cigarette **smoking** decreased from 18% in 1999 to 16% in 2002.¹
- The rate of **smoking** among men (20%) is nearly twice that of women (11%).¹
- Among women, rates of **smoking** are higher among African-Americans (19%) and Whites (16%) compared to Asians/Pacific Islanders (7%) and Latinas (7%).¹

SOCIAL & PHYSICAL ENVIRONMENT

Conditions in the social and physical environment exert powerful influences on individual health. Efforts to maximize the health of the population must include policies and other interventions that support family and neighborhood cohesion, strengthen social networks, improve educational opportunities, foster a strong economy, and promote safe workplaces and clean environments.

Air Quality

- Percent of days (per year) that state standards for air quality were not met⁵
- Percent of children ages 0–5 years who are regularly exposed to tobacco smoke at home^{1d}

Poverty⁸

- Percent of population with household incomes less than 100% of the Federal Poverty Level

Neighborhood Safety¹

- Percent of adults who believe their neighborhood is safe

Places to Play¹

- Percent of children ages 1–17 years whose parents say that they can easily get to a park, playground or other safe place to play

Education⁶

- Public high school dropout rate

	Healthy People 2010	Los Angeles County	Antelope Valley SPA 1	San Fernando SPA 2	San Gabriel SPA 3	Metro SPA 4	West SPA 5	South SPA 6	East SPA 7	South Bay SPA 8
Air Quality (Days not meeting standards)	N/A	23.6	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Air Quality (Tobacco smoke exposure)	10.0	6.8	16.8	4.4	6.1	6.5	7.3	8.5	6.5	7.4
Poverty	N/A	15.9	14.3	12.4	12.6	22.6	11.2	28.0	14.2	15.3
Neighborhood Safety	N/A	79.4	87.5	83.9	87.7	65.2	90.8	54.4	80.9	80.9
Places to Play	N/A	83.1	84.4	85.7	84.5	74.8	90.7	71.7	89.4	84.5
Education (Dropout rate)	N/A	14.8	9.8	12.0	6.8	25.6	14.1	27.4	13.1	17.7

Reading to Child¹

- Percent of children ages 0–5 years who are read to daily by a parent or family member

Television Viewing¹

- Percent of children ages 6 months to 17 years who watch 3 or more hours of television per day

Parental Support¹

- Percent of children ages 0–5 years whose parents say it is “very” or “somewhat” easy to find someone to talk to when they need advice about raising their child

Child Care¹

- Percent of children ages 0–5 years for whom parents report difficulty finding adequate childcare

N/A	43.0	37.4	45.9	41.8	44.3	65.6	34.8	36.3	45.9
N/A	27.1	29.4	22.5	24.7	26.3	12.6	35.1	28.4	31.6
N/A	81.5	85.1	83.5	83.0	72.7	92.2	73.5	80.5	86.7
N/A	37.6	31.5	45.2	30.2	45.9	26.5	43.4	37.3	29.2

N/A =Data were not available where noted

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- The percentage of days that state standards for **air quality** were not met increased from 14% in 1999 to 24% in 2002.⁵
- Research has shown that **safe neighborhood** environments positively influence physical activity.¹³
- **Reading to children** positively impacts outcomes such as language development, emergent literacy and reading achievement.¹⁴
- Research has shown a correlation between childhood obesity and total hours of sedentary behavior (including **television watching**). Minimizing television viewing is a possible intervention for reducing childhood obesity.¹⁵

HEALTH STATUS

Health is a state of physical, mental, and social well-being, and not merely the absence of disease. Health includes the ability to function effectively in the face of changing circumstances. People’s perceptions of their health and level of function are among the strongest predictors of life expectancy and health care utilization.

Perceived Health¹

- Percent of adults reporting their health to be fair to poor
- Percent of children ages 0–17 years who are perceived by their parents to be in fair to poor health

Activity Limitation Among Adults¹

- Average number of days (in past month) when regular daily activities were limited due to poor physical/mental health

Disability^{1f}

- Percent of adults with a disability


Disability and Special Health Care Needs Among Children^{1g}


- Percent of children ages 0–17 years that have special health care needs

	Healthy People 2010	Los Angeles County	Antelope Valley SPA 1	San Fernando SPA 2	San Gabriel SPA 3	Metro SPA 4	West SPA 5	South SPA 6	East SPA 7	South Bay SPA 8
Perceived Health ¹	N/A	21.6	18.8	18.4	21.4	24.9	12.1	30.1	24.6	21.0
Activity Limitation Among Adults ¹	N/A	15.5	10.0	13.2	12.3	23.1	6.4*	24.6	16.2	12.4
Disability ^{1f}	N/A	2.5	2.8	2.2	2.7	2.7	1.8	2.7	2.3	2.5
Disability and Special Health Care Needs Among Children ^{1g}	N/A	19.0	22.9	18.2	17.5	19.0	16.4	20.4	18.2	22.4
	N/A	15.0	22.6	15.4	13.6	10.2	23.4	14.6	15.0	15.7

N/A =Data were not available where noted

*May be unstable—based on a small number

 =SPA statistically better off than the L.A. County average (p<0.05)

 =SPA statistically worse off than the L.A. County average (p<0.05)



- Among adults and children, **fair to poor health status** is inversely associated with income: 38% of adults and 25% of children living at or below poverty (<100% FPL) are in **fair to poor health**; 8% of adults and 4% of children with household incomes above 300% FPL are in fair to poor health.¹
- The **average number of days that normal daily activities are limited due to poor physical or mental health** in the past month are highest among those with incomes below poverty (4 days) and lowest among those with incomes above 300% of poverty (1.6 days).¹
- In Los Angeles County, an estimated 398,000 **children have special health care needs** and 1,298,000 **adults are disabled**.^{1g & 1f}
- An estimated 18 million children in the United States have special health needs. **Children with special health care needs** have, or are at increased risk for, physical, developmental, or behavioral conditions and require healthcare services beyond what is considered usual or routine.¹⁶

Colorectal Cancer Screening¹

- Percent of adults ages 50 years or older having a blood stool test within the past 2 years

Cervical Cancer Screening¹

- Percent of women ages 18 years or older having a Pap smear within the past 3 years

Mammography¹

- Percent of women ages 50 years or older having a mammogram within the past 2 years

Access to Dental Care¹

- Percent of adults who did not obtain dental care (including check-ups) in the past year because they could not afford it

N/A	32.2	28.5	33.1	30.3	32.3	32.6	31.4	30.9	35.3
N/A	85.2	84.1	85.5	82.9	80.4	87.9	90.4	84.9	87.4
N/A	77.2	77.5	77.6	77.4	70.8	78.1	78.5	78.2	78.8
N/A	24.1	21.4	21.5	24.2	29.6	18.9	27.2	26.6	22.1

N/A =Data were not available where noted

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- There are 1,755,000 **uninsured persons** in L.A. County; 1,459,000 are non-elderly adults (ages 18–64 years).^{1h}
- Latinos (40%) have the highest percentage of **uninsured** non-elderly adults compared to Asians/Pacific Islanders (21%), African-Americans (15%), and Whites (13%).^{1h}
- The number of individuals in the U.S. **without health insurance** increased from 41.2 million in 2001 to 43.6 million in 2002. At the same time, health care spending increased to \$1.6 trillion.¹⁷
- Latinos (27%) and Asians/Pacific Islanders (22%) had higher proportions of adults with no **regular source of care** compared to Whites (12%) and African-Americans (10%).¹
- Among the elderly, Asians/Pacific Islanders (83%) and Whites (72%) had higher **vaccination** rates for influenza than Latinos (68%) and African-Americans (42%).¹
- More African-Americans (90%) and Latinas (89%) had **Pap smears** within the past 3 years compared to Whites (84%) and Asians/Pacific Islanders (76%).¹

HEALTH OUTCOMES

Chronic diseases (e.g., heart disease, cancer, diabetes) account for over 80% of premature death and disability in the county, and many are preventable. Infectious diseases (e.g., tuberculosis, HIV/AIDS) are also largely preventable. Optimizing infant and child health and development is important as both determine future health and well-being.

Asthma¹ⁱ

- Percent of children ages 0–17 years with current asthma
- Percent of adults with current asthma

Diabetes¹

- Percent of adults diagnosed with diabetes

Hypertension¹

- Percent of adults diagnosed with hypertension

Depression¹

- Percent of adults diagnosed with depression

AIDS¹⁰

- Incidence of AIDS (annual new cases per 100,000 population)

Syphilis¹¹

- Incidence of primary and secondary syphilis (annual new cases per 100,000 population)

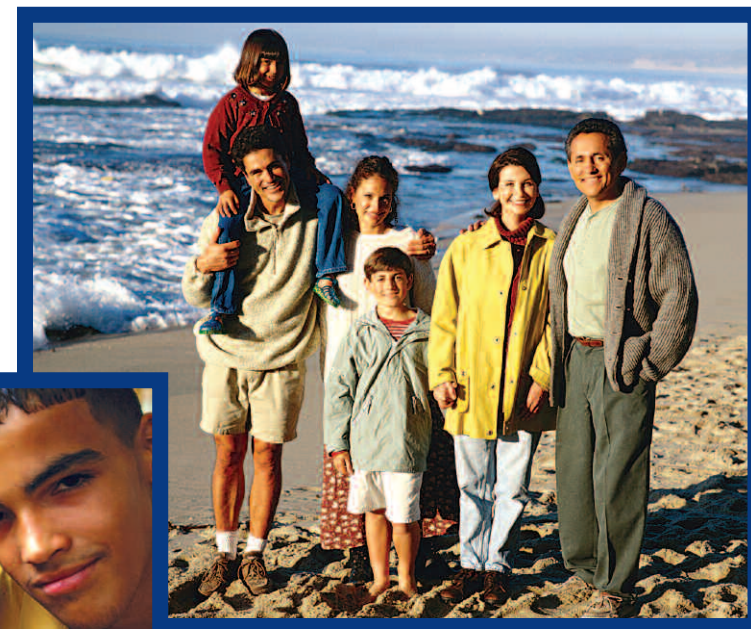
	Healthy People 2010	Los Angeles County	Antelope Valley SPA 1	San Fernando SPA 2	San Gabriel SPA 3	Metro SPA 4	West SPA 5	South SPA 6	East SPA 7	South Bay SPA 8
Asthma (Children 0–17)	N/A	7.9	12.3	8.4	7.5	5.3	13.0	5.9	6.9	9.8
Asthma (Adults)	N/A	6.1	10.0	5.8	5.7	4.8	5.7	6.9	6.2	6.6
Diabetes	2.5	7.2	6.9	6.3	6.8	6.8	4.2	9.2	9.4	8.0
Hypertension	16.0	20.4	22.3	18.7	20.3	18.8	16.7	25.4	20.4	22.4
Depression	N/A	9.8	9.4	10.8	9.0	10.7	11.7	6.6	9.8	9.7
AIDS	1.0	15.8	7.1	10.8	7.4	43.3	8.0	18.0	8.7	20.6
Syphilis	0.2	4.0	0.6	2.0	0.8	17.7	4.2	2.5	1.5	2.3

Tuberculosis ¹²										
• Incidence of tuberculosis (annual new cases per 100,000 population)	1.0	11.1	4.6	8.2	11.7	21.2	5.0	12.4	8.9	10.3
Low Birth Weight ^{7b}										
• Percent of low weight births (per 100 live births)	5.0	6.7	7.3	6.5	6.4	6.8	6.4	7.3	6.1	6.7
• Percent of low weight African-American births (per 100 live births)	5.0	11.8	12.5	11.3	10.9	14.6	10.3	12.2	10.8	11.0
Teen Birth ⁷										
• Rate of births to teens (per 1,000 live births to mothers 15–19 years)	N/A	44.4	52.1	35.0	43.3	35.1	8.4	85.7	50.8	40.8
Infant Mortality ^{7c}										
• Infant death rate (per 1,000 live births)	4.5	5.4	9.4	5.3	4.8	6.1	3.7	6.5	4.7	5.0
• African-American infant death rate (per 1,000 live births)	4.5	11.4	28.4	7.7	10.8	12.2	6.3	11.9	11.0	8.8
Cancer Mortality ²										
• Cancer death rate (age-adjusted per 100,000 population)	159.9	164.5	182.9	162.6	156.6	149.0	150.1	209.0	158.5	170.6
Breast Cancer Mortality ²										
• Breast cancer death rate (age-adjusted per 100,000 population)	22.3	23.5	24.2	24.8	23.6	18.4	20.9	22.6	22.8	26.2
Cervical Cancer Mortality ²										
• Cervical cancer death rate (age-adjusted per 100,000 population)	2.0	3.5	2.1	2.1	2.5	4.0	1.3	6.9	3.9	5.8
Lung Cancer Mortality ²										
• Lung cancer death rate (age-adjusted per 100,000 population)	44.9	39.8	52.6	39.9	37.7	33.5	34.4	51.0	35.7	44.3
Cardiovascular Disease Mortality ²										
• Coronary heart disease death rate (age-adjusted per 100,000 population)	166.4	199.9	225.2	192.2	193.1	186.2	144.2	268.3	203.1	211.7
Diabetes Mortality ²										
• Diabetes death rate (age-adjusted per 100,000 population)	N/A	22.9	24.3	18.2	19.2	27.3	10.5	38.3	33.2	21.0
Stroke Mortality ²										
• Stroke death rate (age-adjusted per 100,000 population)	48.0	50.5	53.6	46.4	45.8	46.1	45.3	70.2	48.4	56.5
• Stroke death rate for African-Americans (age-adjusted per 100,000 population)	48.0	75.1	74.4	70.2	61.3	59.7	66.5	84.0	76.9	80.8
Suicide ²										
• Suicide rate among adults ages 55 years and older (per 100,000 population)	N/A	13.0	16.8	14.8	9.4	12.6	12.5	6.2	9.3	19.1
Unintentional Injury ²										
• Death rate attributed to motor vehicle crashes (age-adjusted per 100,000 population)	9.2	9.4	21.4	9.8	8.0	8.6	4.7	13.5	7.4	8.4
• Unintentional injury death rate among children ages 0–17 years (per 100,000 population)	N/A	5.8	13.1	6.1	5.3	6.2	3.7	6.3	3.6	4.6
Homicide ²										
• Homicide rate among adolescents and young adults ages 15–34 years (per 100,000 population)	N/A	25.6	14.1	15.5	15.5	23.3	12.9	78.6	19.4	26.5

◆ =Statistical comparisons with L.A. County were not performed
 =SPA statistically better off than the L.A. County average (p<0.05)
 =SPA statistically worse off than the L.A. County average (p<0.05)

HEALTH OUTCOMES CONTINUED

- Over the past 10 years, **mortality rates** in Los Angeles County for all causes decreased by 26%. Notable declines occurred for coronary heart disease (36%), lung cancer (26%), unintentional injury (29%) and homicide (51%) deaths.¹⁸
- **Diabetes** mortality rate increased 48% over the past decade.¹⁸
- The percentage of adults with **diabetes** was highest among African-Americans (9%), followed by Latinos (8%), Whites (7%) and Asians/Pacific Islanders (5%).¹
- The rate of **asthma** among adults was higher in African-Americans (10%) and Whites (8%) compared to Latinos (4%) and Asians/Pacific Islanders (4%).¹¹
- More African-American children (16%) had **asthma** compared to Whites (9%), Asians/Pacific Islanders (9%) and Latinos (6%).¹¹
- The reported incidence of **primary and secondary syphilis** in Los Angeles County increased from 0.9 per 100,000 in 1999 to 3.9 per 100,000 in 2002.¹¹
- During the past decade, **HIV/AIDS** mortality declined by 77%.¹⁸
- **Birth to teens** decreased from 50.8 per 1,000 mothers ages 15-19 years in 1999 to 44.4 per 1,000 mothers ages 15-19 years in 2002.⁷
- African-Americans (12%) had the highest proportion of **low birth weight infants** in Los Angeles County, followed by Whites (7%), Asians/Pacific Islanders (7%) and Latinos (6%).^{7b}



DATA SOURCES & NOTES

- 1 Los Angeles County Department of Health Services, Office of Health Assessment and Epidemiology, Health Assessment Unit, 2002-2003, 1999-2000, 1997 Los Angeles County Health Surveys. Data are from the 2002-2003 Los Angeles County Health Survey except where noted.
 - 1a Binge Drinking: Consuming 5 or more alcoholic drinks for men and 4 or more drinks for women on at least one occasion in the past month.
 - 1b Adult Overweight and Adult Obesity: National Heart, Lung, and Blood Institute (NHLBI) clinical guidelines determine weight status based on Body Mass Index (BMI) using the respondent's weight and height.
 - 1c Adult Physical Activity: Those who meet the physical activity criteria engage in vigorous activity for at least 20 minutes at least 3 days/week or moderate activity for at least 30 minutes at least 5 days/week, or a combination of both moderate and vigorous activity on at least 5 days/week.
 - 1d Child Exposure to Tobacco Smoke: Parents reported smoking in their home and/or their child was exposed to smoke in their home on one or more days in the past 7 days.
 - 1e Child Care: Does not include 9.6% of parents responding that they did not need childcare.
 - 1f Adult Disability: defined as a positive response to any one of the following:
 - 1) Limited activity because of physical, mental, or emotional problem(s),
 - 2) Health problem requiring use of special equipment, 3) Self-perception of disabled.
 - 1g Child Special Health Needs: Children with Special Health Care Needs (CSHCN) Screening Tool from the FACCT–Foundation for Accountability. The CSHCN screener has three “definitional domains.” These are: (1) Dependency on prescription medications; (2) Service use above that considered usual or routine; and (3) Functional limitations. The definitional domains are not mutually exclusive. For example, a child with a chronic condition may meet the CSHCN screener criteria in one or more definitional domains. www.facct.org/facct/cahmiweb/chronic/Screeners/lwiscreen.htm
 - 1h Insurance: Information about health insurance coverage is based on self-reported data. Methods for collecting these data have changed in recent years. A study by the U.S. Bureau of the Census in the year 2000 found that the total number of uninsured Americans dropped by 8% (or approximately 3 percentage points) when a “verification” question was added for those who initially responded that they were without coverage. Prior Los Angeles County Health Surveys (1997 and 1999-2000) did not include this verification and therefore may have overestimated the population of uninsured. The 2002-03 estimates are lower than prior years-reflecting both real changes in coverage levels, particularly for children, but also better methods for assessing health insurance coverage.
 - 1i Current asthma definition includes those ever diagnosed with asthma by a health care provider and report still having asthma and/or having had an asthma attack in the past 12 months.
- 2 Los Angeles County Department of Health Services, Office of Health Assessment and Epidemiology, Data Collection and Analysis Unit, 2001 data. All mortality estimates are based on death certificate reporting of underlying causes of death. Death rates presented are age-adjusted to the 2000 U.S. Standard Population using age-specific rates. SPA and county age-specific rates were calculated using 2001 Population Estimation and Projection System data (July 1, 2001 PEPS estimate, data file: [poppovjul2001ccty-supspa20030715.sas7bdat](#)) provided by the Chief Administrative Office of Los Angeles County (Urban Research Division).
- 3 National Center for Chronic Disease Prevention and Health Promotion, Youth Risk Behavior Survey 2003. (L.A. Unified School District high school students).
- 4 Los Angeles County school children, grades 5, 7, and 9. Prepared by the Office of Health Assessment and Epidemiology, Los Angeles County Department of Health Services from data obtained from the 2002 California Physical Fitness Testing Program, California Department of Education. Based on data from approximately 83% of students (n=299,692).
- 5 South Coast Air Quality Management District. 2002 data.
- 6 California Department of Education. Calculated for Class of 2002 based on 9–12 grade years. A dropout is defined as a person who: was under age 21 years; was formerly enrolled in a school (in grades 7–12) or program leading toward (and had not received) a high school diploma or its equivalent; had left school for 45 consecutive school days and had not enrolled in the same or another public school or private school.
- 7 Los Angeles County Department of Health Services, Maternal, Child and Adolescent Health Program. 2001 data.
 - 7a Late Prenatal Care; received care starting in the second or third trimester.
 - 7b Low Birth Weight Infants; birth weights <2,500 grams.
 - 7c Infant Mortality; death occurring less than 365 days of age.
- 8 Los Angeles County, Chief Administrative Office, Urban Research Division, Population for Los Angeles County and SPAs: 2002 Population Estimation and Projection Systems (PEPS) Trend Analysis Series.
- 9 Los Angeles County Department of Health Services, Immunization Program. 2002 data.
- 10 Los Angeles County Department of Health Services, HIV Epidemiology Program. 2002 data.
- 11 Los Angeles County Department of Health Services, Sexually Transmitted Disease Program. 2002 data; excludes cities of Long Beach and Pasadena cases.
- 12 Los Angeles County Department of Health Services, Tuberculosis Control Program. 2002 data; excludes cities of Long Beach and Pasadena cases.
- 13 Saelens BE, Sallis JF, Black JB and Chen D. Neighborhood-Based Differences in Physical Activity: An Environment Scale Evaluation. *American Journal of Public Health* 2003; September 93 (9): 1552-1558.
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Indicator Development

A consensus set of indicators for LA County was developed in consultation with a group of advisors, both internal and external to DHS. The following resources were used to identify and select indicators:

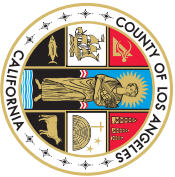
- Healthy People 2010 (including Leading Health Indicators, Health Determinants and Health Outcomes, Life Course Determinants and Prevention Oriented)
- Healthy People 2000–Consensus Health Indicators
- Outcomes Toolkit
- Improving Health in the Community (IOM)
- Community Health Status Indicators Project (ASTHO, NACCHO, PHF, HRSA)

Statistical Notes

For L.A. County Health Survey statistics (reference 1, excluding activity limitation among adults) a two-sided Z-test was performed. A T-test was used to compare average number of activity limitation days. For mortality statistics (reference 2) and morbidity statistics (references 7,10,11,12) a chi-squared was performed. Cases where SPA origin was unknown were eliminated from the analysis.

Healthy People 2010 Notes

Los Angeles County indicators were compared to Healthy People 2010 targets where appropriate and where definitions for each were consistent, if not exact.



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Sexually Transmitted Disease Program
Tuberculosis Control Program
Los Angeles County Children's Planning Council
South Coast Air Quality Management District
Los Angeles County, Chief Administrative Office,
Urban Research Division

RESOURCES

**For information about improving health
indicators visit these additional web sites:**

Healthy People 2010 indicator goals
Center for Disease Control and Prevention
wonder.cdc.gov/DATA2010/objsearch.htm

Prevention practices in clinical settings
U.S. Preventive Services Task Force
www.ahrq.gov/clinic/prevenix.htm

Smart investments in prevention
Partnership for Prevention
www.prevent.org

*Strategies for protecting the health
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**For additional information about public
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