UPDATE

A bi-monthly newsletter of the Solano County Health & Social Services Department.

Promoting Healthy Tomorrows

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RECENT DATA ON THE PUBLIC'S HEALTH

This issue of UPDATE focuses on the health of the County's residents. Many sources of data exist on residents' health but two are especially important because between them, they report on a wide range of key factors that impact health and related issues. These are the California Health Interview Survey (CHIS) which is conducted every two years and the annual County Health Status Profiles published by the California Department of Public Health. This edition focuses on results of the California Health Interview Survey that was conducted in 2007 along with other data on health.

The CHIS is a statewide, scientific survey that collects a variety of data from residents of the 58 counties. It was first implemented by the California Department of Health Services (now California Department of Public Health) and UCLA, in 2001, in response to a need for health, demographic and other data, on California's residents.

The Survey is now conducted solely by UCLA every two years through interviewers calling households using random telephone numbers. The Survey is actually three separate surveys geared towards three groups: adults (age 18 and over), adolescents (ages 11 -17) and children (ages zero -10). Adults respond for their children. Adolescents respond for themselves with the permissions of their parents/guardians. Besides providing data by county, the CHIS provides data by race/ethnicity, age, gender and income.

Solano County has used the Survey's results in many ways since 2001. Some of the ways have included planning the projects in the Master Settlement Agreement's strategic plans, monitoring the health status of residents and responding to organizational and individual data requests.

The County Health Status Profiles is published each year by the California Department of Public Health. That Department collects data on selected causes of illness, death and other health indicators. The report ranks all of the State's 58 counties from best (1) to worst (58). For most indicators, the overall rates for the State and the national Healthy People 2010's objectives are also included. These data are extremely useful to counties for purposes of planning, monitoring, allocating resources and comparisons with other counties and the State.

Key Findings from the (CHIS) California Health Interview Survey for Solano County

- Chronic diseases and deaths from them pose problems.
- Smoking has increased over the years of the CHIS.
- Overweight/obesity has not changed over the years of the CHIS.
- Fewer adults were insured in 2007 compared to 2005.
- Fewer adults visited a doctor in the past year in 2007 versus 2005.

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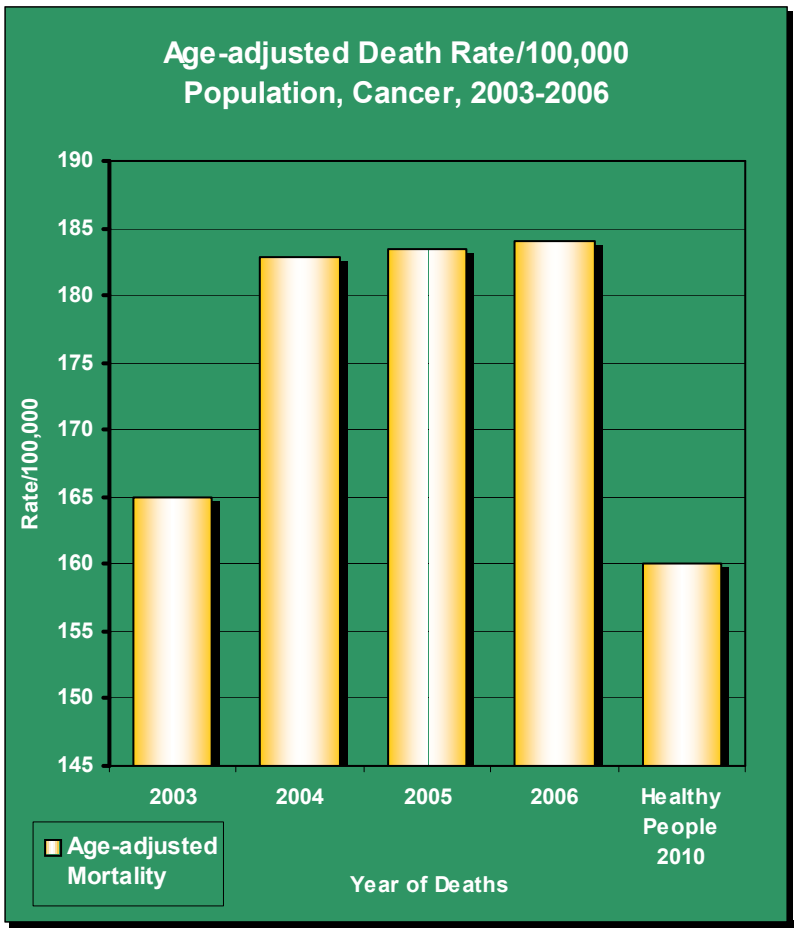
THREE LEADING CAUSES OF DEATH

The California Department of Public Health annually publishes County Health Status Profiles. The data are obtained from death certificates which are then sent to the National Center for Health Statistics where they are coded for causes of death. The three leading causes of death in Solano County are cancer, heart disease and stroke, in that order.

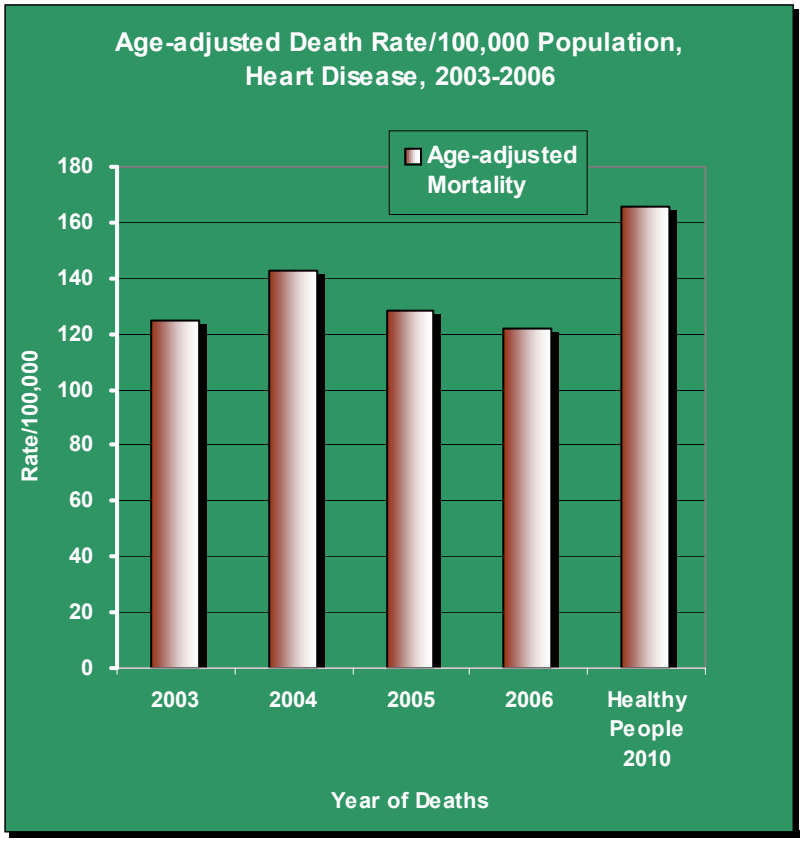


Deaths from Cancer

The death rates from all cancers had been rising since 2003 and did not meet the Healthy People 2010 objective of 160/100,000 population of the County. Cancer is second to heart disease in leading causes of death in the U.S., but was the leading cause in Solano County in 2006.

The County ranked 49 of the 58 counties (58 being the worst) in death rates from cancer in 2006 (184/100,000). In comparison, California had a rate of 159/100,000 population and met the Healthy People 2010 objective.

Many studies are showing that a healthy diet rich in fruits and vegetables and regular physical activity can prevent some cancers.

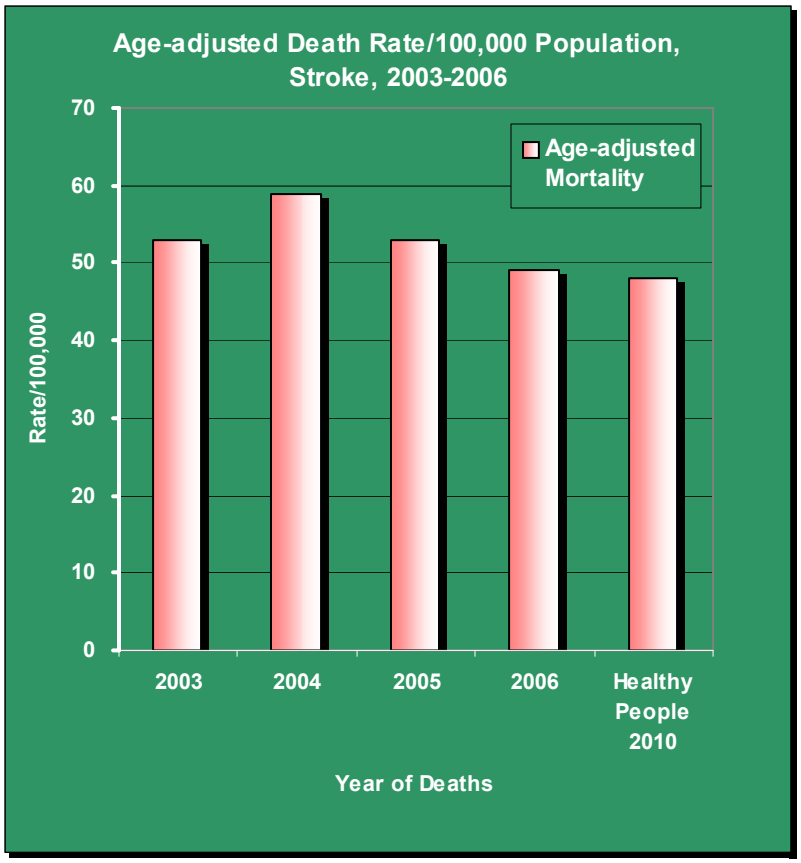


Deaths from Heart Disease

Heart disease was not the leading cause of death in Solano County in 2006, as mentioned on the previous page-that distinction went to cancer. Heart disease ranked as the second leading cause. Nevertheless, heart disease is a major factor in loss of life. The chart shows that the County has met the Healthy People 2010 objective since 2003.

The County ranked 26 of 58 in death rates from heart disease in 2006 and the State had a higher rate of 133/100,000 population.

A healthy diet, regular physical activity and not smoking can prevent a diagnosis of and death from heart disease.



Deaths from Stroke

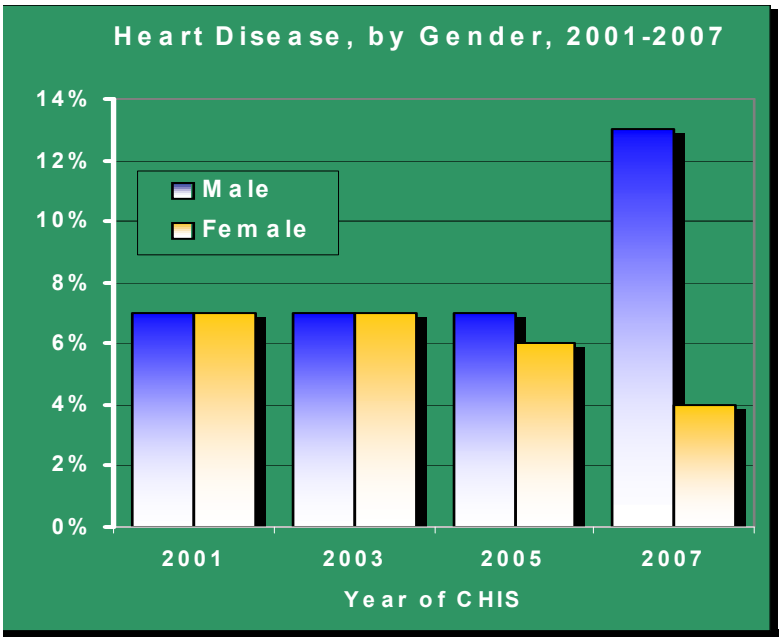
Stroke is the third leading cause of death in the Nation and the County. The County's rate had decreased since 2004 and for the first time in 2006, it came close to meeting the Healthy People 2010's objective of 48/100,000 population.

Solano ranked 42 of 58 in deaths from stroke in 2006 and had a higher rate than the State (40/100,000).

Uncontrolled high blood pressure and smoking are major factors in stroke. Again, overweight/obesity can cause blood pressure to rise.

THE PUBLIC'S HEALTH: CHRONIC DISEASES/ CONDITIONS (Source: CHIS)

This section provides data on selected chronic conditions for Solano County's adults, 18 years and older, by gender. Gender is important because differences exist, between the genders, in relation to access to care, diagnosis and treatment. Females tend to live longer due, in part, to their accessing care more often, possibly identifying diseases before they become life-threatening.



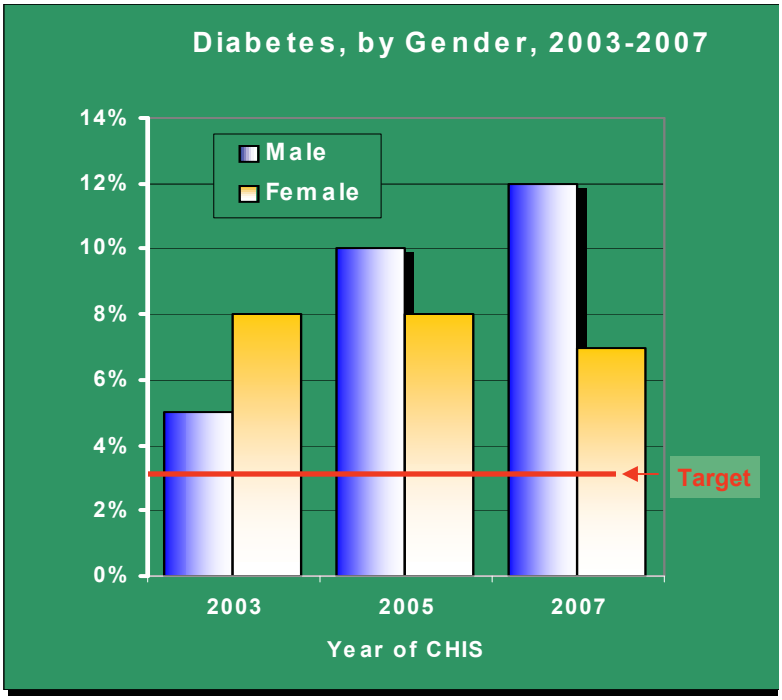
Heart Disease

The rates of heart disease diagnosis in the County, between the genders, had been similar up to 2007.

However, in 2007, males had a rate that had almost doubled from previous years and was over three times the rate of females. The reasons for that phenomenon are unknown.

On the other hand, the rate among females dropped by one-third, in 2007 when compared to previous rates.

Heart disease was the second leading cause of death in the County in 2006.



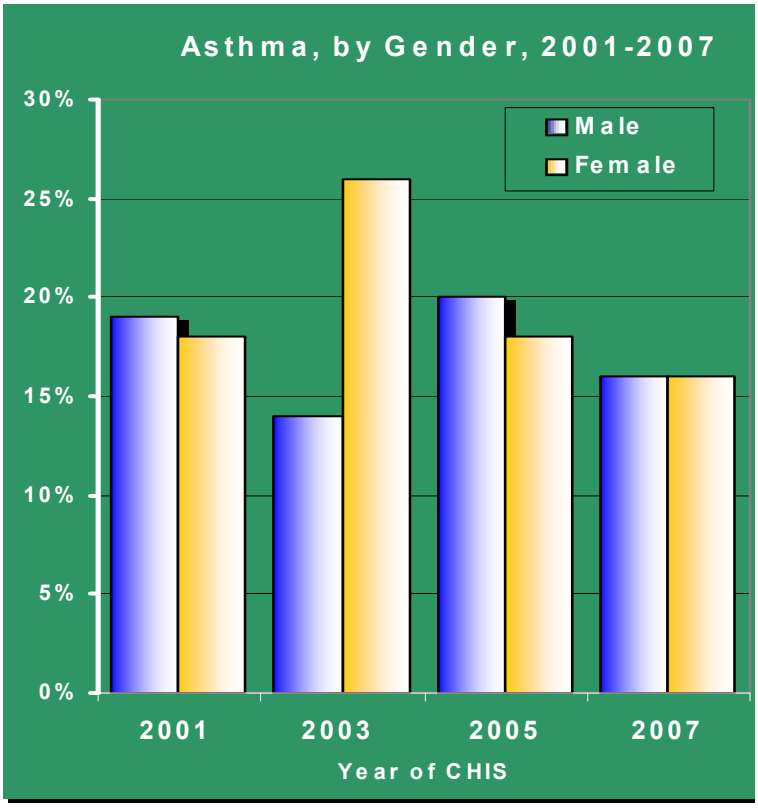
Diabetes

The diabetes rate for males has increased since 2003 and that increase was significant. The rate among females has remained flat.

Healthy People 2010 has a target of 3% as the Nation's guide to health.

The County's rates remain well above the target. In 2007 the rate for men was 4 times and for women 2.5 times more than the target.

Diabetes, in the United States, has been on the rise with the increasing rates of overweight and obesity. Losing weight through a healthy diet and regular physical activity are major strategies in decreasing the rate of diabetes.

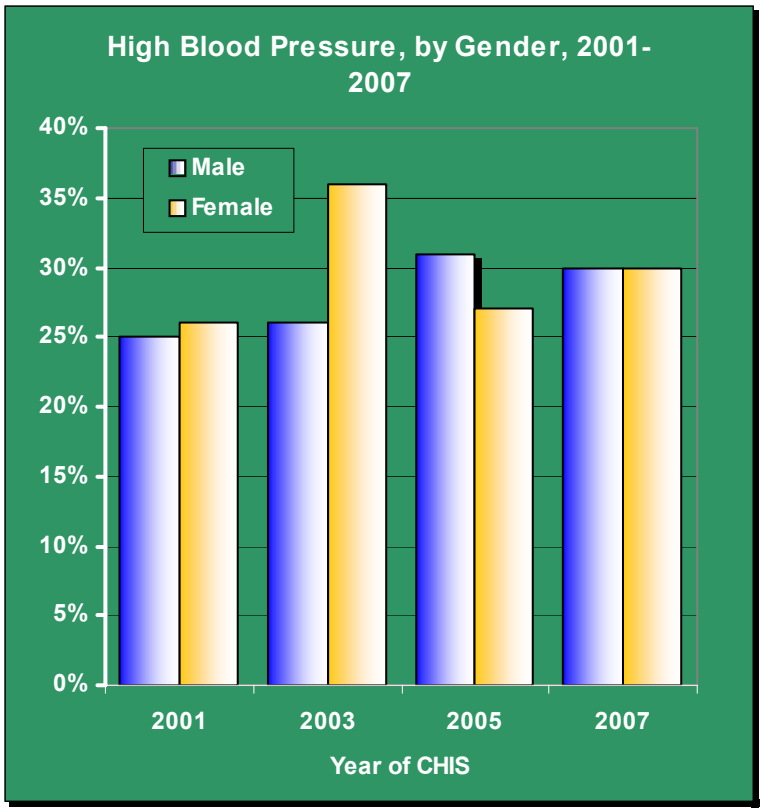


Asthma

Solano County has the highest rate of asthma in the State (CHIS). Adolescents (ages 11-17) have higher rates than the County as a whole.

Apart from the spike for females in 2003, their rates had remained much the same. Generally, in childhood more males than females have asthma. Later, this shifts to more females than males with asthma. 2003 was the only year in which the rate for adult females was higher than the males' rate in the County.

The cause of asthma is still unknown although theories exist. What is known are some of the incidents that trigger asthma attacks. Some triggers include air pollution, mold and certain chemicals.



High Blood Pressure

The chart shows that overall, high blood pressure rates for both males and females had risen in 2007 (from 2001). In 2007, fully 3 in 10 adults had been diagnosed with high blood pressure.

High blood pressure is a major risk factor for heart disease and stroke, the second and third leading causes of death in the County.

Some factors that cause high blood pressure include salt in the diet, genetics and being overweight/obese.

LIFESTYLE

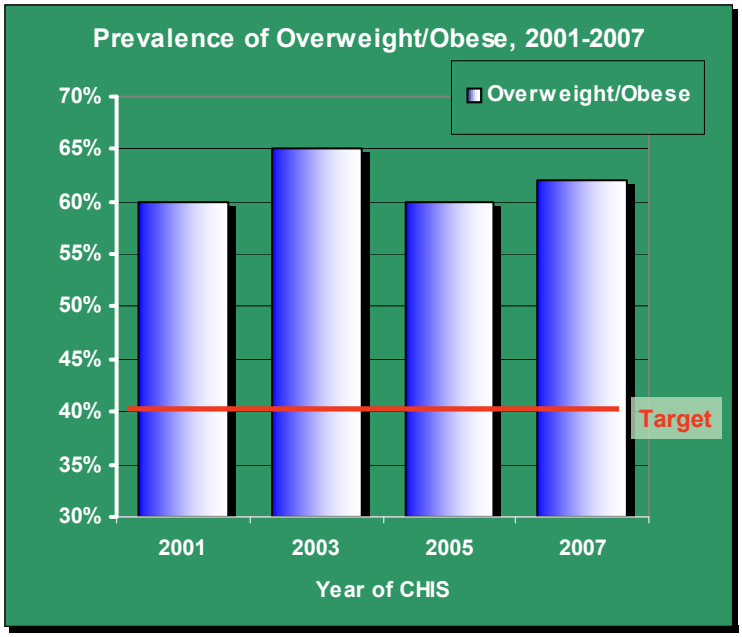
Everyone knows that a healthy lifestyle contributes to health. A major problem in society today is the increasing prevalence of overweight and obesity mostly due to unhealthy diets and lack of physical activity. Overweight and obesity are measured using the Body Mass Index (BMI) which is calculated by dividing one's weight (Kilograms) by the height (meters) squared. If the result is 18.5-25, the BMI is normal; 26-29 is overweight and greater than or equal to 30 is obese.

Overweight/Obesity

Solano County's rate had changed little over the years of the CHIS. About three in five adults were overweight/obese in 2007.

The target is the Healthy People 2010's objective. The County was over 20 percentage points higher than the target in 2007. California's rate in 2007 was 57%.

The Solano Coalition for Better Health is working on reducing overweight/obesity in the County and in African Americans, specifically through the Disparities Elimination Project.

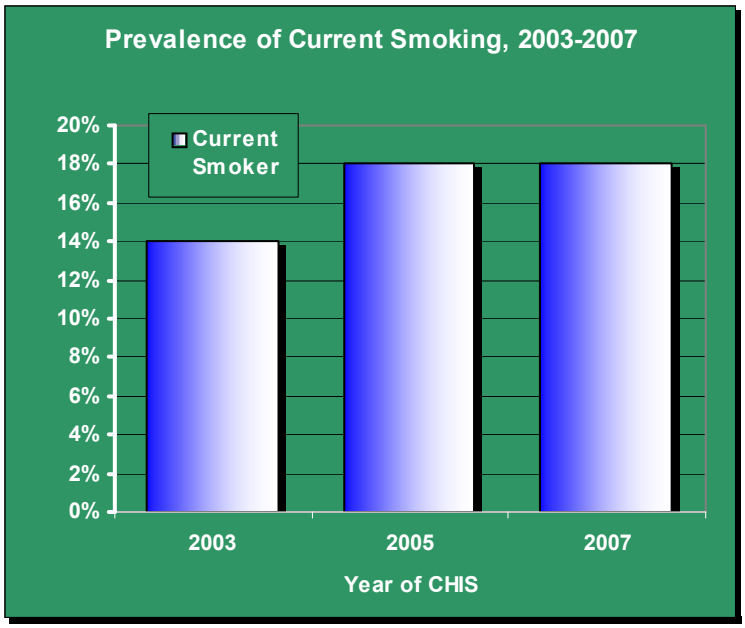


Smoking

Solano's rate had increased by four percentage points from 2003 to 2007. California's rate in 2007 was 14% (CHIS).

Smoking is the major cause of lung cancer, accounting nationally for up to 78% of female deaths and 91% of male deaths from lung cancer (National Center for Health Statistics).

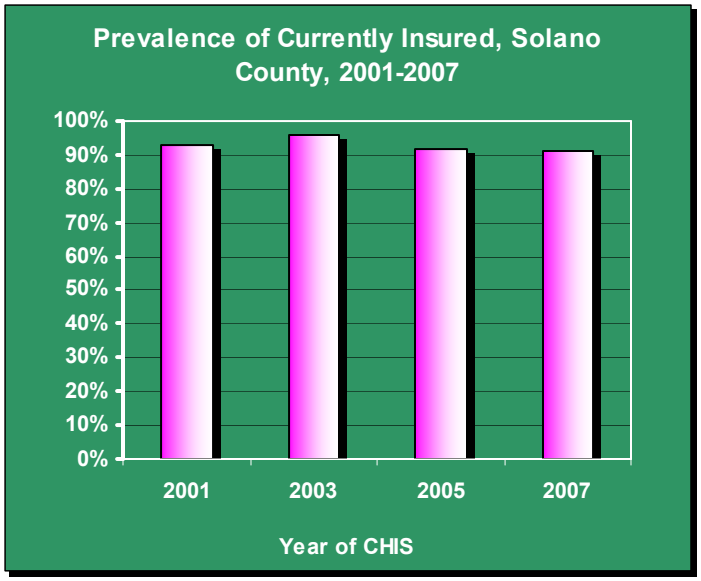
Smoking worsens many conditions, including asthma, high blood pressure, diabetes and heart disease and is a major risk factor in stroke.



ACCESS TO HEALTH CARE

Access to health care is an important factor in obtaining quality care. Some barriers, whether perceived or actual, can result in poor health. Patients may perceive barriers and delay seeking needed care, resulting in illness at a later, less treatable stage. For example, a usual source of care can serve as a guide to the system and support needed services for prevention and treatment.

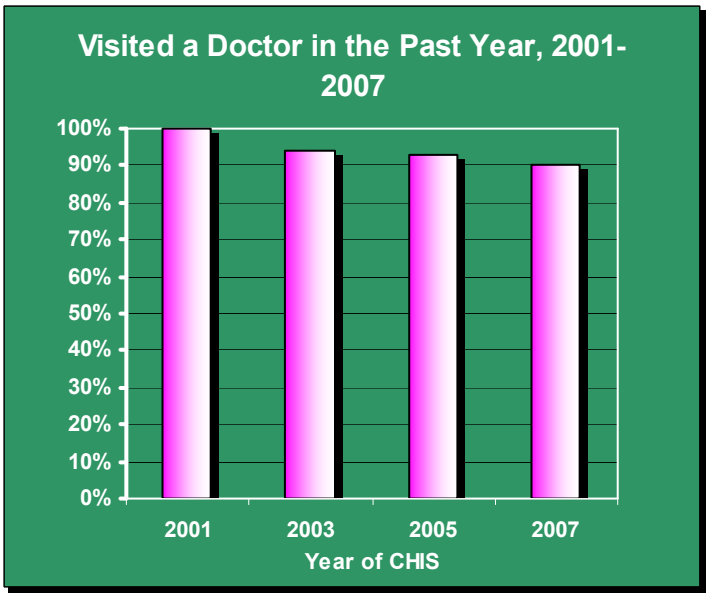
Of the major measures of access, the lack of health insurance has significant consequences. If an individual is not insured, preventative and needed care may not be obtained. The Emergency Room may be the only source of care; that care is expensive and costs society much more than preventative care or other care from a primary physician/provider.



Currently Insured

Having health insurance is one of the best predictors of access to care. The chart shows that the percentage insured in 2007 was the lowest since the CHIS began.

About nine of ten adults were insured in 2007 and the majority was covered by employers (CHIS). The State had rates between 85% and 87% over the years. Solano County's rates were higher than the State's in each year.



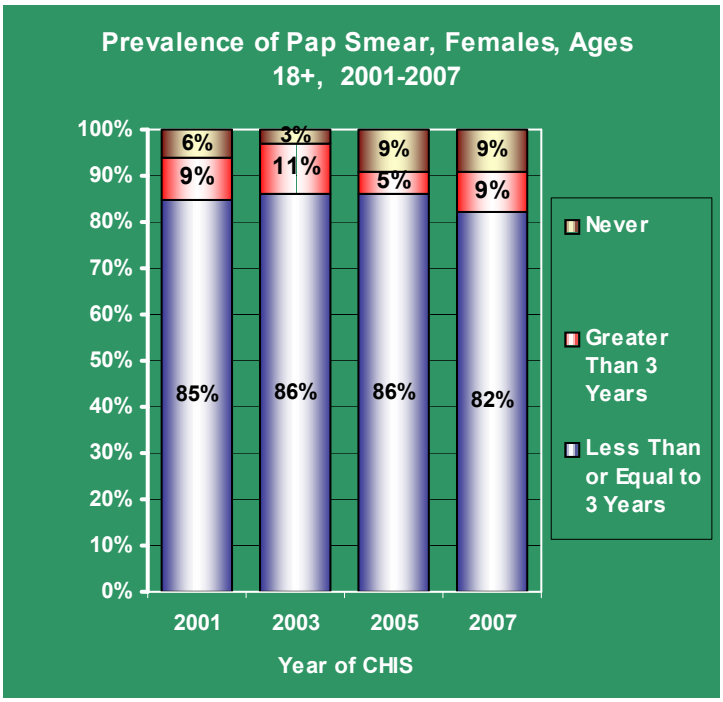
Visited a Doctor in the Past Year

Ideally, all adults 50 years of age and older should get an annual physical examination by a physician. Because of that regular, comprehensive examination, conditions can be discovered early due to laboratory tests and screening procedures.

A primary care physician is essential in receiving continuity of care and navigating the health system. The percentage of persons in Solano County having visited a doctor in the past year has decreased from almost 100% in 2001 to 90% in 2007.

SCREENING TESTS

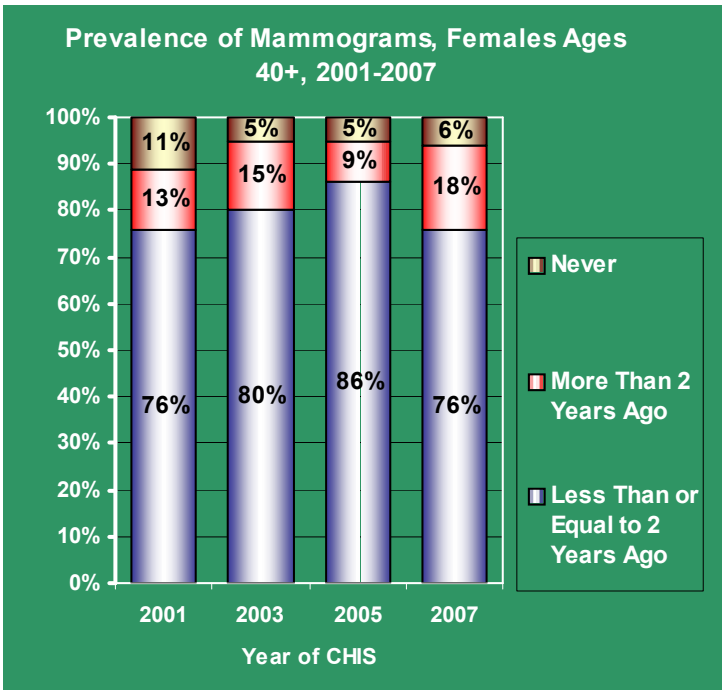
Screening tests for middle-aged adults are necessary to identify and treat a host of chronic and possibly deadly diseases. The annual physical examination is usually the time for the conduction of those tests. Some are conducted at age 40 and older and some at age 50 and older. The frequency may vary depending on the test and patients' familial histories of chronic diseases.



Pap Smear

Pap smears are used to identify cervical cancer. The Healthy People 2010's objective is for 90% of women, ages 18 and older, to have had one in the past three years.

Solano County has never met that target and from 2005 to 2007, the rate had decreased from 86% to 82%. The rate of those who had a Pap smear longer than three years ago increased from five to nine percent, from 2005 to 2007.



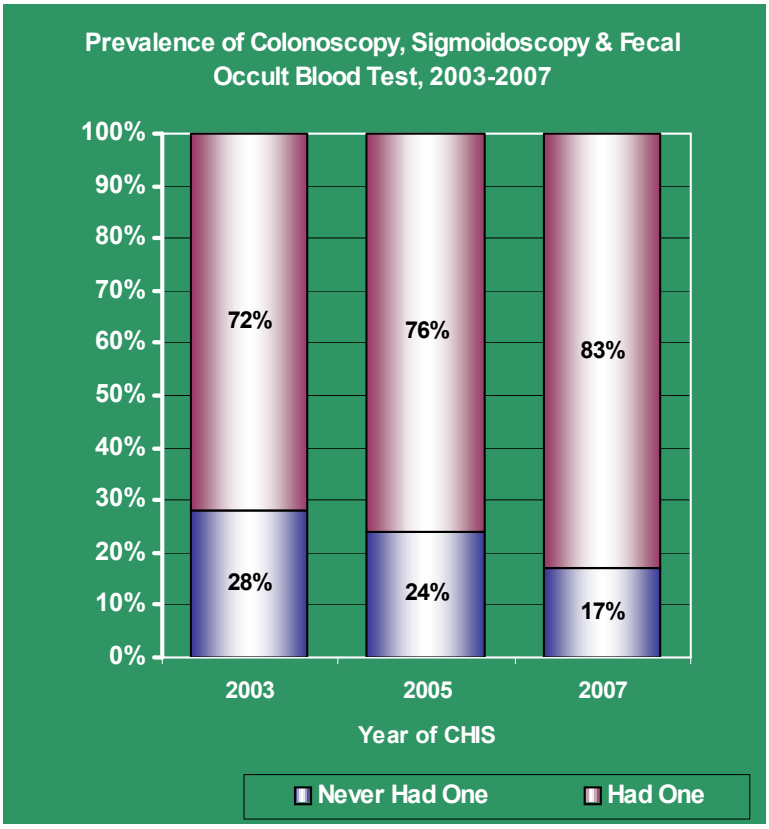
Mammogram

Women 40-49 years of age should have a mammogram every two years and once a year after age 50. The rate of "never" has decreased by almost a half since 2001. Solano County has met the Healthy People 2010's objective of 70% of females age 40 or above having had a mammogram within the targeted two-year period.

The rate of those getting a mammogram, more than two years ago, doubled in 2007 when compared to 2005.

Breast cancer is the most diagnosed cancer in women.

SCREENING TESTS, CONTINUED



Prevalence of Sigmoidoscopy, Colonoscopy & Fecal Occult Blood Test

The County's rate of having had a colonoscopy had increased over the years from 7 in 10 to over 8 in 10 in 2007.

At age 50 and older, adults should have a colonoscopy every 10 years if there is no history of colon cancer in their immediate families and every five years if there is history.

The sigmoidoscopy examines the sigmoid colon, a section of the colon. The fecal occult blood test checks for blood in the stool.

Colon cancer is one of the most preventable cancers and risk factors include genetics, fatty diet, obesity and smoking.

The **Health & Social Services (H&SS) Index** combines workload data from 14 key services provided by H&SS, along with data on unemployment in Solano County, to provide a monthly indicator of community demand for health and social services.

All of the monthly numbers — clients served, program caseloads, number of unemployed, referrals, etc. — are added together and then converted into an index score. The January 2003 total serves as the index bench line figure of 1,000. The index scores for subsequent months reflect change from the January level. Like the Dow Jones or NASDAQ, higher scores suggest positive developments — fewer people looking for work or requiring the services that H&SS provides, for example. Falling numbers suggest increasing need for H&SS's safety net services.

Please note: The index is not a direct measure of need. Many socioeconomic factors influence need. At the same time, various factors, such as eligibility guidelines and available revenues, influence the amount of service that H&SS can provide regardless of need or demand for service. (Some Medi-Cal enrollment figures for more recent months are estimates or projections based on historical trends. Some other recent data is preliminary and may change.)

INDICATOR	Jan-03	Jan-04	Jan-05	Sep-05	Mar-06	Sep-06	Mar-07	Sep-07	Mar-08	Sep-08	Mar-09
Number Unemployed	13,800	13,800	12,700	10,800	10,900	9,500	10,400	11,200	13,200	15,300	23,700
Number of I&R Calls	2,772	2,655	2,440	2,206	2,481	2,326	1,615	1,804	876	1,099	1,138
CalWORKs Cash Assistance Recipients	9,405	10,402	11,068	11,561	12,290	12,437	12,621	13,091	13,629	13,976	14,638
New CalWORKs Applications & Restoration Re-	521	469	452	514	452	454	430	456	498	522	449
Food Stamp Recipients	11,515	13,761	16,174	17,588	19,132	20,130	20,860	21,296	23,308	25,544	29,203
General Relief Recipients	256	385	442	588	699	653	685	737	768	1,101	907
Medi-Cal Enrollment*	49,059	53,268	54,856	57,588	58,054	57,113	57,485	58,650	60,083	61,230	61,221
Elder or Dependent Adult Abuse Reports	98	106	108	88	100	100	116	104	103	145	134
Elder or Dependent Adult Abuse Confirmed	40	36	31	29	27	34	38	39	41	36	38
In-Home Supportive Services (IHSS) Authorized	2,254	2,324	2,422	2,487	2,561	2,608	2,595	2,633	2,746	2,826	2,944
Child Abuse Referrals	390	387	333	358	400	314	360	298	364	325	358
Medical Clinic Visits	2,595	2,615	2,618	2,194	2,846	2,612	3,065	2,883	3,412	3,352	3,706
Dental Clinic Visits	447	283	364	312	388	391	360	349	359	439	435
Mental Health Clients (Insyst Count Only)	2,701	2,757	2,549	2,562	2,679	2,496	2,806	2,577	2,778	2,754	2,857
Substance Abuse Clients	699	573	659	690	761	693	856	756	751	640	681