

# Sutter County Community Health Assessment

2022

UNDERSTANDING HEALTH  
AND WELLNESS IN  
SUTTER COUNTY



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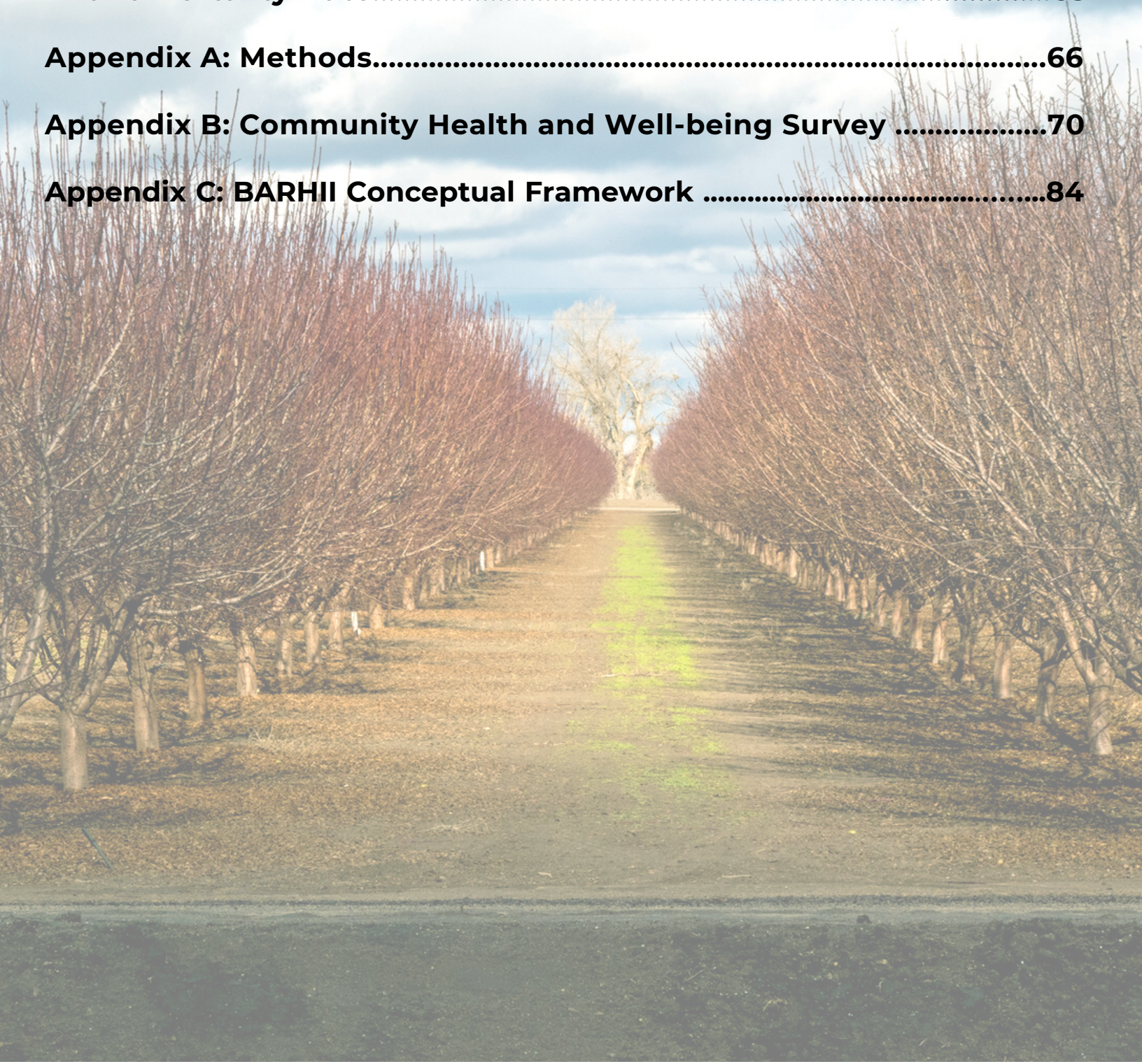


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## Community Perspectives and Guidance:

- E- Center
- Hands of Hope
- Faith Based Organizations
- FREED
- Live Oak City Council
- Regional Housing Authority
- Sutter County Local Government
- Tri-Counties Breastfeeding alliance
- Yuba City City Council
- Yuba-Sutter Food Bank
- Yuba City Parks and Recreation
- Yuba City Senior Center
- Yuba City Unified School District School Nurse Program
- Various Community Groups

## Community Health Improvement Plan Priorities:

- Adventist Health and Rideout
- Alliance for Hispanic Advancement Ampla Health
- Anthem / Blue Cross
- California Health and Wellness/ Health Net
- Downtown Business Association (Yuba City)
- Harmony Health
- Live Oak Unified School District
- Pathways
- Peach Tree Health
- Regional Housing Authority
- Sutter North Medical Group
- Sutter County Sheriff's Department
- Sutter County Superintendent of Schools
- Yuba-Sutter Transit

## **Public Health Community Health Assessment Staff:**

- Tammy Andersen, Project Director/ Health Program Specialist
- Harmanpreet Chauhan, MS, MPH, CHES, Public Health Epidemiologist
- Brian Cowan, MPH, Health Education and Promotion Coordinator
- John Floe, MMOM, CCPS, Community Services Program Manager
- Sharon Gonzal, MAML, Office Assistant III
- Lexy Kidd, Accreditation Coordinator
- Kelly Knox, Health Program Specialist
- Rachel Licea, Office Assistant III
- Sarah Ludwick, RN, PHN, Maternal, Child, and Adolescent Health Director
- Phuong Luu, MD, MHS, FACP, Health Officer
- Ymelda Mendoza-Flores, Homeless Services Coordinator
- Leah Northrop, MPA, Public Health Branch Director
- Maria Rodriguez, Medical Clerk II
- Rudy Rodriguez, Prevention Services Coordinator
- Kim Sangha, Social Worker III
- Diane Scott, Medical Clerk
- Reetu Sehra, Health Program Specialist

## **Former Public Health Leadership and Community Health Assessment Staff:**

- Amerjit Bhattal, RN, PHN, Sutter County Public Health Director
- Michelle Balter, RN, PHN, Director of Nursing
- Ranjit Chima, MPH, Health Education and Promotion Coordinator
- Lou Anne Cummings, MD, MPH Health Officer
- Ariston Dumarán, RN, PHN, Public Health Nurse
- Seemab Haider, MPH, Health Program Specialist
- Robert Herrick, PhD, Public Health Epidemiologist
- Michael Kinnison, MD, Health Officer
- Manuela Loebig, MS, Health Program Specialist
- Maria Heredia, RN, PHN, Supervising Nurse Manager
- Cynthia Martinez, Resource Specialist
- Pang Vang, MPH, Health Program Specialist

# EXECUTIVE SUMMARY

This Community Health Assessment report belongs to the community—it was developed with community participation and serves Sutter County community members. Community use of this report is encouraged.

## Understanding Health

The Sutter County Community Health Assessment represents the collaborative process to gain insight and analyze the state of health in our community. This assessment helps to understand illnesses affecting community members, how they experience illness and factors influencing health and well-being. The Sutter County Community Health Assessment was conducted to help Sutter County Health and Human Services Department, the Public Health Branch, and its partners learn about the state of health in Sutter County, identify top health priorities and direct resources to address these issues.



Trevor Hancock, 1993, Health Promotion International, Vol. 8, No. 1

The Community Health Assessment and the priorities identified in this report will act as the foundation for the Community Health Improvement Plan for Sutter County. This plan will detail the activities the Public Health Branch and its partners will focus on addressing over the next three to five years.

# BACKGROUND

## Why is data important?

Examining data about health is an important part of this Community Health Assessment. To explore the overall health status of the community, statistics about health in Sutter County were collected and carefully analyzed. The information explored included causes of death, infectious diseases, and chronic illnesses. Demographic information, including income, housing, age, race and ethnicity, language, and education was also analyzed. The relationships between health and the factors that affect health are discussed in this report.

Statistics help to understand the health of the community, but they do not provide the entire picture. How people in Sutter County experience health is as important as data about illness and demographics. Information about how community members experience health was collected through community surveys and community conversations (focus groups) where residents had the opportunity to share their thoughts, ideas, and perspectives on health in Sutter County. These community voices helped to shape and complete the understanding of health in Sutter County.

### Health issues in Sutter County

When looking at health data for Sutter County the top health issues were:

- **Life expectancy** varies greatly dependent on where a person lives with major differences occurring in communities only separated by a few miles.
- The top causes of death in Sutter County are **heart disease, cancer- most commonly lung cancer, cerebrovascular disease (including stroke), and chronic lower respiratory diseases, which are lung diseases such as asthma and chronic obstructive pulmonary disease.**
- **Sexually transmitted diseases**-chlamydia, gonorrhea, and syphilis- have increased greatly and continue to increase each year.

# METHODS AND COMMUNITY ENGAGEMENT

## Community Voices

### **Community Conversations-Focus Groups:**

Seven conversations were held in 2019 with community members representing a variety of populations in Sutter County. These groups included senior citizens, LGBTQ adults, LGBTQ youth, Spanish speakers, school nurses, and parent groups at schools in two different districts and geographic regions in Sutter County.



- During these conversations, community members shared their experiences with illnesses and wellness as well as their thoughts and opinions about health in Sutter County. The topics discussed included access to healthcare, the types of health issues community members struggle with, aspects that either promote or take away from wellness in Sutter County, and available resources. These conversations provided valuable insight into our community's perspectives on health and wellness and identified the major health issues residents experience.

### **The conversations were reviewed, and four major issues were identified:**

- Access to healthcare
- Chronic illness
- Mental Health
- Access to resources

### **Four major issues were identified:**

- Access to healthcare, including mental health, is limited for some Sutter County residents. Cited reasons include lack of readily available transportation, providers concentrated in one area (Yuba City), and many providers not accepting Medi-Cal.
- Community members struggle with chronic illnesses, including cardiovascular disease, diabetes, high cholesterol, and obesity. Participants indicated that more education about these topics and about healthy living are both welcomed and needed.

- Mental health is an important issue for our community and affects people of all ages. Issues identified include the effects of bullying, suicide, and disconnection from social networks and community for various reasons, including aging.

"I love this place, but I feel like I'm a shadow"- Focus group participant about aging and living in Sutter County.

- Access to health-related resources may also be limited. The available resources that participants did not identify were as important as what they did. While some participants identified many community resources, most identified a few or none at all. This is an area for further exploration and shows that knowledge of available resources plays an important role in the ability of community members to access health care services and resources that promote health .

"This is a great place to live. This place, even though lacking in some things, it is a fantastic place. I had my chance to live anywhere in the world that I wanted to live. I chose Yuba City. This area here has so much to offer." Focus group participant

**Community Health and Well-being Survey:** Members of the Sutter County community shared their perspectives, thoughts, and opinions about health and well-being through the Sutter County Health and Well-being Survey. The survey was open for four months from October 2018 through January 2019. The survey and information on how to complete the survey was shared throughout the community through social media, the Sutter County website, radio broadcast, in local newspapers, and distributed at targeted community locations. The top health issue identified by 45.41% of survey respondents was homelessness. Other health issues most concerning to community members who responded to the survey were drug use with 41.58% of survey respondents identifying it as a top health issue, obesity indicated by 32.65%, and mental health indicated by 25.25% of all survey respondents. The Community Health and Well-Being Survey and the results from survey respondents can be found in Appendix B of this assessment.

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# Health Priorities

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**Determining Priorities:** Community stakeholder forums were held in 2019 in Yuba City and Live Oak where those who serve the Sutter County community had the opportunity to learn about the major health issues in the community, the perspectives and issues identified in survey responses and focus groups, and the factors that affect health. An additional forum was also held at the Sutter County Public Health Branch to give public health staff the opportunity to provide their experience and knowledge to the conversation. Those who attended these forums had the opportunity to participate in the conversations and activities that helped determine which health issues to focus on over the next three to five years. During these discussions several priorities rose to the top of the list, including adverse childhood experiences / building a resilient community, sexually transmitted infections, and homelessness.

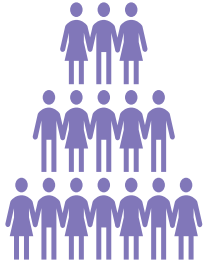
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**These priorities will act as the foundation of our Community Health Improvement Plan, which will detail activities the Public Health Branch and its community partners will focus on addressing over the next three to five years.**

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**Considerations:** Much of the community engagement and conversations for this Community Health Assessment were conducted between 2019 and 2020. The Sutter County Community Health Assessment draft and feedback survey were also distributed to the community between 2019-2020. However due to the COVID-19 pandemic, work completing this Community Health Assessment was put on hold to address COVID-19 and community needs. Community health assessment efforts were resumed in the fall of 2021, with updated community health data and completion of the Sutter County Community Health Assessment in April 2022.

# Community Health Priorities



**Building Resilient Communities**



**Homelessness**



**Sexually Transmitted Diseases**

# SUTTER COUNTY COMMUNITY PROFILE



Courtesy of the California History Room, California State Library, Sacramento, California

# Sutter County

Sutter County is a largely rural and agricultural community. The county's deep agricultural roots are heavily entwined with its history. Stone fruit, rice, and nut growing and processing are historically major agricultural activities in the region and remain the top ten agricultural crops produced in the county. Immigrants following in the footsteps of the County's founder and namesake, John Sutter, have come to the region to take advantage of its agricultural potential for generations. Many of these immigrants have stayed and made Sutter County their home. The rich agricultural traditions remain a vital part of the Sutter County community and continue to draw people to the region.

The county's geographical features include the iconic Sutter Buttes—a ring of volcanic lava domes—that can be clearly seen from Yuba City, the county seat and most populous city. The Feather River runs along the Eastern boundary of the county, separating Yuba City from its “twin city,” Marysville, which lies in Yuba County. The proximity of the cities and the fact that they are in different counties has created a unique partnership between Sutter and Yuba counties. This partnership has resulted in the sharing of some key services and resources, including Sutter-Yuba Behavioral Health, California's only bi-county behavioral health system, serving both Sutter and Yuba County residents.



Residents from Sutter and Yuba counties also share many health resources, such as the region's only hospital, Adventist Health + Rideout Hospital in Marysville. While Sutter County does not have a hospital system within its borders, it does have several federally qualified health centers (FQHCs), private practitioners, and the Sutter North Surgical Center. However, Sutter County is classified as a designated health professionals shortage area for both primary care and mental health. Furthermore, while there are dental care providers in the county, a recent oral health needs assessment indicated that increased access to dental care may be needed. Residents may encounter barriers to accessing healthcare, especially specialist care, as indicated during focus groups.

## References

- 1) Sutter County Office of the Agricultural Commissioner, 2011. Sutter County Crop and Livestock Report. 2011.
- 2) Sutter County Office of the Agricultural Commissioner, 2018. Sutter County Crop and Livestock Report. 2018.

# The Local Public Health System

Public health departments are tasked with protecting the health of the communities they serve, but they do not do this alone--they are part of a larger public health system within a defined area. This system represents the collaboration between the public health department and its partners to address the complex health issues in the community. Health is made up of the physical and mental status of a person as well as the social, economic, and environmental conditions surrounding each person also known as the social determinants of health. Public health systems protect and promote health by helping to make sure that every person in a given community has the same opportunities for achieving optimal health and wellness.

## Health Disparities:

Not all members of the community have the same opportunities and some experience barriers to health such as poor air and water quality, income and economic class, lack of transportation, lack of access to health care resources or access to healthy foods, lack of employment opportunities and institutional discrimination. The BARHII Framework (Figure 1) shows how the conditions in which a person lives, learns, works, and plays directly influences their health behaviors, illness, injury, and mortality. These community and social conditions are mostly out of a person's control, yet directly impact health outcomes and create health disparities across populations. The term "disparity" is often interpreted to only mean racial or ethnic disparities; but many types of disparities exist in Sutter County. For example, if a health outcome is seen to a greater or lesser extent between different groups in the community, then a disparity exists.

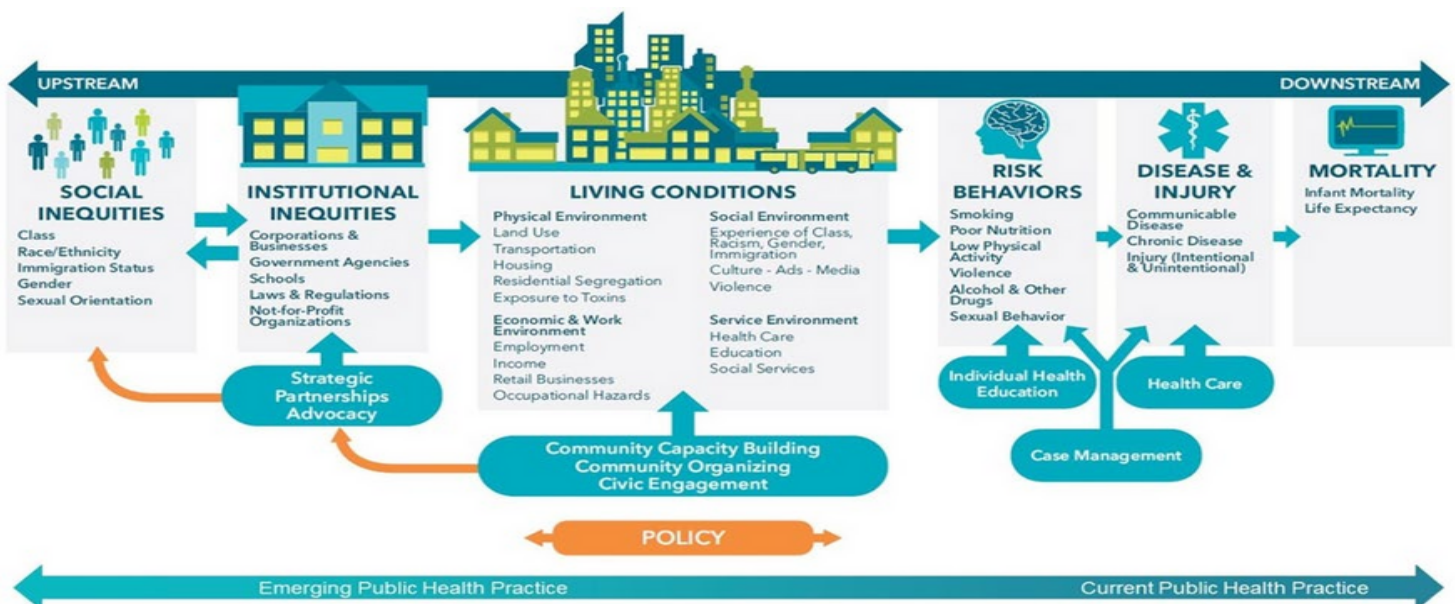


Figure 1: Bay Area Regional Health Inequities Initiative (BARHII) Conceptual Framework, 2006. \*See Appendix C for larger version

**Addressing Disparities:** To address these disparities in health it is essential to take a closer look at our community and understand how and why they happen. County Community Health Rankings provide valuable information about how health outcomes and behaviors in Sutter County compare to other counties across California. This information helps to understand what influences the health of residents and identify the challenges to health that exist in communities only separated by a few miles. This information is essential for the Sutter County Public Health Branch and its partners to identify and address the community conditions and obstacles that affect the health of the community. Recognizing and identifying health disparities is the first step in closing gaps and improving the health and well-being of all Sutter County residents. County Health Rankings and the Healthy Places Index will be discussed further in the assessment.

### **Public Health in Sutter County:**

The Sutter County Public Health Branch works to build and maintain relationships with community partners to make sure that the local public health system is active and functioning in the community. This partnership promotes and protects the health and well-being of residents by addressing the complex health issues that affect both populations that experience greater health risks and the Sutter County community as a whole.

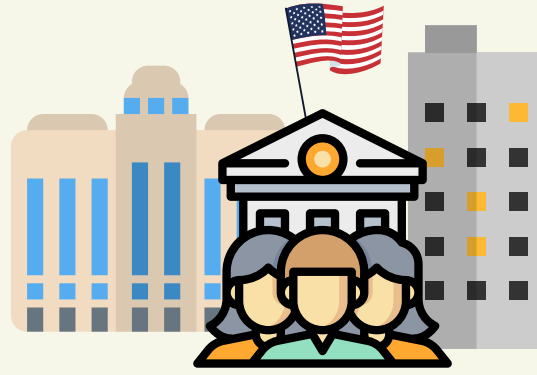
The local public health system in Sutter County includes the Sutter County Public Health Branch and community partners, including:

- Government partners such as the County Environmental Health Department, Sutter-Yuba Behavioral Health, the Sheriff's Department, and the Sutter Animal Services Association;
- Healthcare systems and providers like the Rideout + Adventist healthcare system, Ampla Health, Harmony Health, Peachtree, and Sutter North medical providers;
- Community partners such as Head Start/the E Center, University of California Cooperative Extension, the Regional Housing Authority; and
- Community agencies like the Downtown Business Association and local business owners.

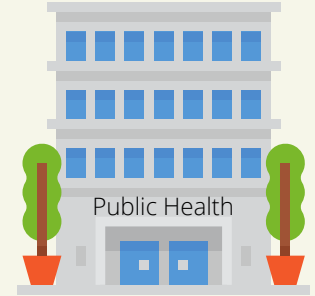
#### References:

- 1) Social Determinants of Health. Let's Get Healthy California. Accessed December 8, 2021. <https://letsgethealthy.ca.gov/sdoh/>
- 2) Bay Area Regional Health Inequities Initiative. Accessed December 9, 2021. <https://www.barhii.org/barhii-framework>

Local business owners,  
media, and other  
community  
stakeholders



US, State, and  
Local  
government



The local public health  
system: Sutter County  
Public Health



Community service agencies,  
housing, law enforcement,  
transportation, and recreation  
services.



Local health care system  
and providers



Faith based  
organizations and  
education

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# Sutter County Assets and Resources:

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The Sutter County community is rich with many assets and resources that help promote the health and well-being of residents. Community members can get physically active by accessing one of 25 local parks and green spaces, biking along the Yuba-Sutter bike path, or enjoying a day in the sun at the Gauche Aquatic Park. Sutter County seniors can join in one of the many activities or groups the Yuba City Senior Center has to offer. Local partners and stakeholders have joined together to form the Sutter-Yuba Homeless Consortium to provide assistance and address the barriers that those experiencing homelessness in the community may experience. Local programs such as Family S.O.U.P., the Yuba-Sutter Resiliency Connection, and Sutter-Yuba Behavioral Health Prevention and Early Intervention services work to empower and build resiliency in families, youth, and the community as a whole. Groups like the Punjabi-American Heritage Society, the Jakara Movement, Tri-County Diversity, California Tribal TANF Partnership and the California Indian Manpower Consortium provide support and celebrate the diversity of our residents. Rich agricultural roots are highlighted during local farmers markets and the annual Peach Festival celebrating Sutter and Yuba County agriculture, where residents from both Sutter and Yuba Counties can enjoy fresh fruits and vegetables grown in the region. While many assets and resources exist in the community, the Sutter County Public Health Branch and its partners work to promote access for all members of the community and increase the resources to achieve health equity in Sutter County. **The Low Cost and No Cost Resources for Sutter County** guide can be found at the [Sutter County Public Health Branch website](#).




















# DEMOGRAPHIC AND SOCIOECONOMIC PROFILE



Courtesy of the California History Room, California State Library, Sacramento, California

# Overall Snapshot

	Sutter County	California	How We Compare
Median Income	\$63,502	\$78,672	
County Health Ranking in 2021	37	Out of 58	
High School Graduation Rate	79.8%	83.9%	
Life Expectancy Rate	78.9	81.7	
Heart Disease Death Rate	89.3	80.7	
Cancer- All Types Death Rate	148.5	128.3	
Lung Cancer Death Rate	32.3	22.9	
Cerebrovascular Disease Death Rate	52	37	
Chronic Lower Respiratory Disease Death Rate	39.3	28.5	
Chlamydia Infection Rates	313.2	542.7	
Gonorrhea Infection Rates	150.3	199.0	
Syphilis Infection Rates	28.7	19.5	
Adult Reported Physical Inactivity	25%	18%	
Food Environment Index <small>*Food Environment Index and definition can be found in Health Risk Factors section of this report</small>	7.1	8.8	
Adult Smoking Rates	12%	11%	
Adverse Childhood Experiences 1-3 ACEs	45%	46%	
Infant Mortality Rate	6.4	4.3	

\*Rates are calculated per 100,000 population

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# Rates

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## Why Are Rates Used in the Community Health Assessment?

Rates were used in this Community Health Assessment to help measure and assess the state of health and well-being in Sutter County. Rates are important for comparisons among different populations or groups. Rates help us measure the frequency or how quickly a disease is occurring within a specific population over a period of time and help to measure the pattern and risk of the disease continuing to occur. This information can be used to compare disease and disease risk factor rates among different groups in our community and see how Sutter County's health compares both in California and nationwide.

**Incidence Rate:** This is defined as the number of new cases (incidence) of a disease over a specific period. The numerators are the number of new cases in the racial/ethnic groups during the period. The denominators are the total number of Sutter County residents who identify as a particular racial/ethnic group. The result is multiplied by 100,000 to help understand the impact of the disease.

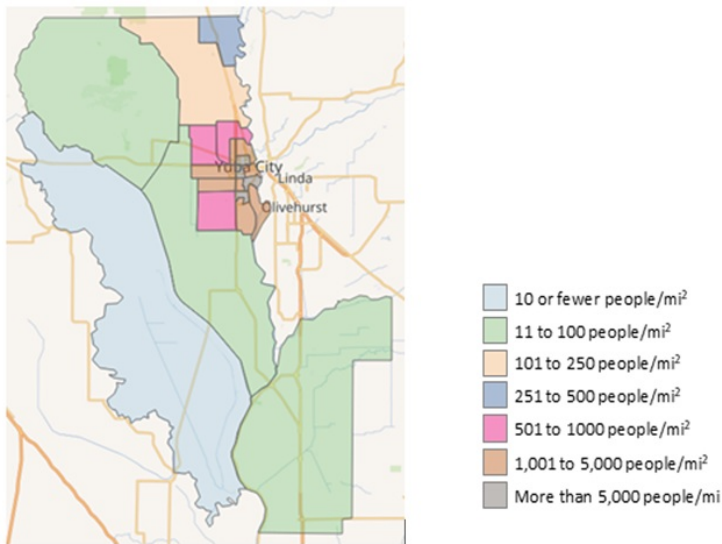
To ensure data stability and create the most accurate picture of the state of health in Sutter County, rates were calculated using data on the incidence of new disease cases pooled together over a period of 5 years. More information about rates and how they are used to help understand health outcomes can be found at the [Centers for Disease Control and Prevention Principles of Epidemiology](#).

# POPULATION AND GEOGRAPHIC OVERVIEW

## Sutter County Overview:

Sutter County is located in the northern part of California, north of Sacramento. It is bordered to the north by Butte County, to the west by Colusa and Yolo Counties, Sacramento County to the south, and Placer and Yuba Counties to the east. Sutter County has two cities, Yuba City and Live Oak. Other unincorporated communities include East Nicolaus, Meridian, Nicolaus, Rio Oso, Robbins, Sutter and Trowbridge. The majority of Sutter County lies in the flood plain between the Sacramento and Feather Rivers (average elevation 30ft); with portions extending to the east across the Feather River south of the Bear River. The Sutter Buttes, a small volcanic mountain range with peaks rising above 2000 ft. elevation, covers most of the northwest part of Sutter County. Two major highways, CA-20 and CA-99, traverse the county, crossing in Yuba City. Other major highways include CA-113, which heads south to Yolo County, and CA-70, which heads northeast towards Marysville in Yuba County.

Figure 1: Sutter County Population Density



## Population and Density:

The Department of Finance reported the population of Sutter County as 99,633 as of April 1, 2020 (1). By population, Sutter County is the 37th largest county in California. Sutter County's land area is 602.5 square miles, for an average population density of 157.3 people per square mile (people/mi<sup>2</sup>) in 2019 (1). This is less than the average for California, but larger than the US average. Within Sutter County, population density varies widely by location (Figure 2). Most Sutter County residents live along the CA-99 corridor in Yuba City (67,536 people) or Live Oak (8,840 people). The south and west portions of Sutter County largely consist of sparsely populated agricultural land. The Sutter Buttes dominate the northwest corner of Sutter County and are primarily undeveloped.

Table 1: Sutter County Population Density (people/ M<sup>2</sup>)

Geography	
California	253.5
Sutter County	160.9
United States	92.8

## References:

1. U.S. Census Bureau QuickFacts: Sutter County, California. Accessed April 12, 2022. <https://www.census.gov/quickfacts/suttercountycalifornia>

# NEIGHBORHOOD AND COMMUNITY

## Why It Is Important:

The neighborhoods in which people live have a major impact on their health and well-being (1). Environmental conditions such as polluted air, unsafe water, income, employment, high rates of violence and unsafe housing conditions negatively influence population health. In Sutter County large differences in health can be seen in neighborhoods only separated by a few miles. Identifying these differences and exploring why they exist in certain neighborhoods is the first step in making sure that all members of the community have the opportunity to live healthy lives.

## Where We Are Now:

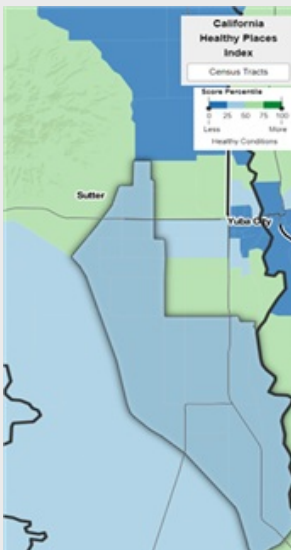
In 2021, Sutter County ranked 37 out of 58 (1 is the most healthy) healthiest counties in California (2). Between 2016 and 2021, Sutter County's health ranking fell from 27 to 37, indicating a decline in health conditions and health outcomes in our community. The County Health rankings are largely based on the social determinants of health, health outcomes and health behaviors; to improve health rankings in Sutter County the factors that contribute to the decline in health and overall health ..

## Those Most Affected:

The Healthy Places Index helps us take a closer look at the factors that shape health in Sutter County and identify which areas of the community experience less opportunities for health and poor health outcomes. Sutter County has an overall Healthy Places Index score of 35.7, indicating that Sutter County has more resources for health and better community conditions than 35.7% of all counties in California. The Healthy Places Index also explores how community conditions and health inequities differ between neighborhoods. For example, residents living in the area bound by Live Oak Boulevard, Eager Road, Tierra Buena Road, Butte House Road, and Stabler Lane experience community conditions healthier than 66.8% of all California census tracts, while residents living in the area between the Feather River, Colusa Avenue, Cooper Avenue and Franklin Road experience community conditions healthier than just 8.7% of California census tracts (3). In this area lower rates of employment, income, education, two parent households, home ownership and higher rates of alcohol availability and rent overburdened households exist; all factors contributing to poorer community conditions and negatively impacting health.

Life expectancy rates in Sutter County also reflect the corresponding Healthy Places Index scores; with the same neighborhoods that experience the highest Healthy Places Index scores also experiencing the highest average life expectancy rates and the lowest Healthy Places Index scoring neighborhoods experiencing the lowest average life expectancy rates in the county. Life expectancy rates will be discussed further in this assessment. In addition, California and Sutter County residents also face considerable risk from climate change to human health and health outcomes. The climate change exposures and the groups of our community at greater risk of exposure can be further explored: <https://skylab.cdph.ca.gov/CCHViz/>

With the continued decline in the county health rankings, it is essential to explore and address the information highlighted by the Healthy Places Index, differences in life expectancy rates, and the social determinants of health to achieve improved health and well-being in Sutter County. The COVID-19 pandemic has also emphasized the differences in health, vulnerability, and access to resources across social, economic, and racial groups and further reinforced the importance of addressing inequities for population health. The information collected and presented in this community health assessment will highlight those in the community most impacted by chronic and communicable diseases and inform future equitable health programs and interventions in Sutter County.



## References:

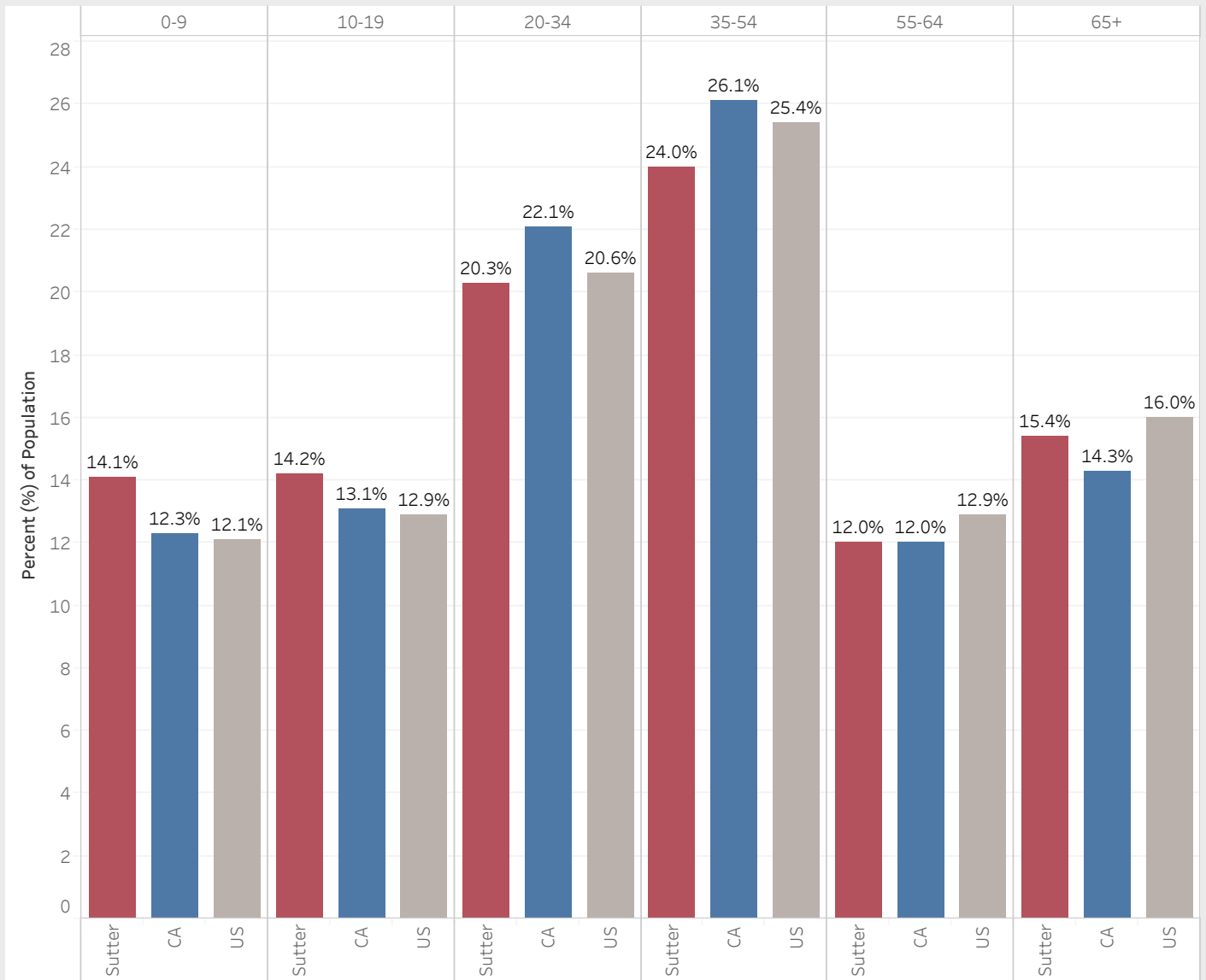
1. Neighborhood and Built Environment. Health People 2030. Accessed February 10, 2022.
2. California. County Health Rankings and Roadmaps. Accessed February 2, 2022. <https://health.gov/healthypeople/objectives-and-data/browse-objectives/neighborhood-and-built-environment>
3. California Healthy Places Index. Accessed February 2, 2022. <https://healthyplacesihttps://www.countyhealthrankings.org/ndex.org>
4. CDC/ATSDR Social Vulnerability Index. Accessed February 2, 2022. <https://www.atsdr.cdc.gov/placeandhealth/svi/index.html>

# AGE DISTRIBUTION

## Age Distribution:

In 2020, US Census population estimates showed that 50.1% of residents in Sutter County were female and 49.9% were male (1). In addition, roughly 14.1% of the population was under age 9, 14.2% were between age 10-19, 20.3% were between age 20-34, 24.0% were between age 35-54, 12.0% were between age 55-64, and 15.4% were above the age of 65. Figure 1 illustrates the differences in age between Sutter County and the state/country.

Figure 1: Age Distribution by Geography (2020)



## References:

1. Census - Table Results. Accessed April 20, 2022. [https://data.census.gov/cedsci/table?q=united%20states&t=Age%20and%20Sex&g=0400000US06\\_0500000US06101](https://data.census.gov/cedsci/table?q=united%20states&t=Age%20and%20Sex&g=0400000US06_0500000US06101)
2. Census - Table Results. Accessed April 20, 2022. [https://data.census.gov/cedsci/table?q=Sutter%20County&t=Race%20and%20Ethnicity&g=0100000US\\_0400000US06](https://data.census.gov/cedsci/table?q=Sutter%20County&t=Race%20and%20Ethnicity&g=0100000US_0400000US06)

# RACE/ETHNICITY DISTRIBUTION

## Race/Ethnicity Distribution:

The racial and ethnic diversity of Sutter County differs from that of California and the United States, as shown in Figure 2. In Sutter County, 63.7% of the population is White, of which 31.3% are Hispanic or Latino, 16.6% are Asian, 9.9% are 2 or more races, 2.0% are Black or African American, 1.1% are American Indian and Alaska Native, and 0.6% are Native Hawaiian or other Pacific Islander. Most Asian residents in Sutter County are from India or Pakistan. Sutter County is home to one of the largest Punjabi communities in the United States and largest Sikh communities outside of India (2). Yuba City is famous for its large Punjabi-American community, and the annual festival in November celebrating the Sikh sacred text draws in tens of thousands of attendees each year from all over the world.

Figure 1: Ethnicity Distribution by Geography (2020)

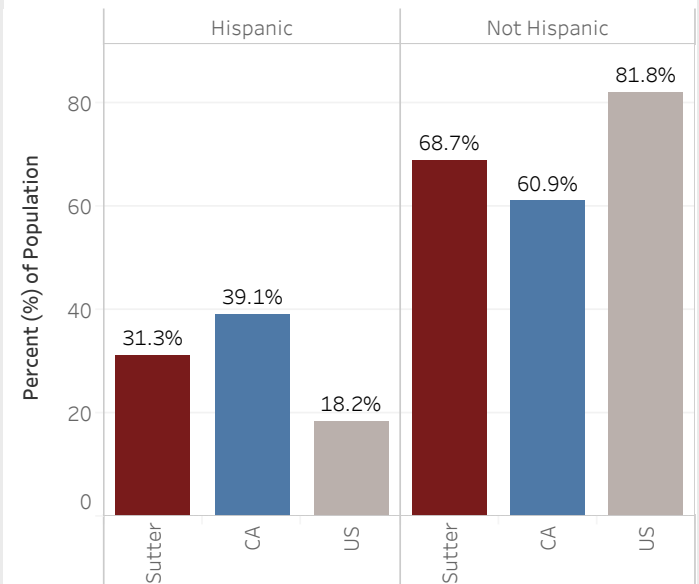
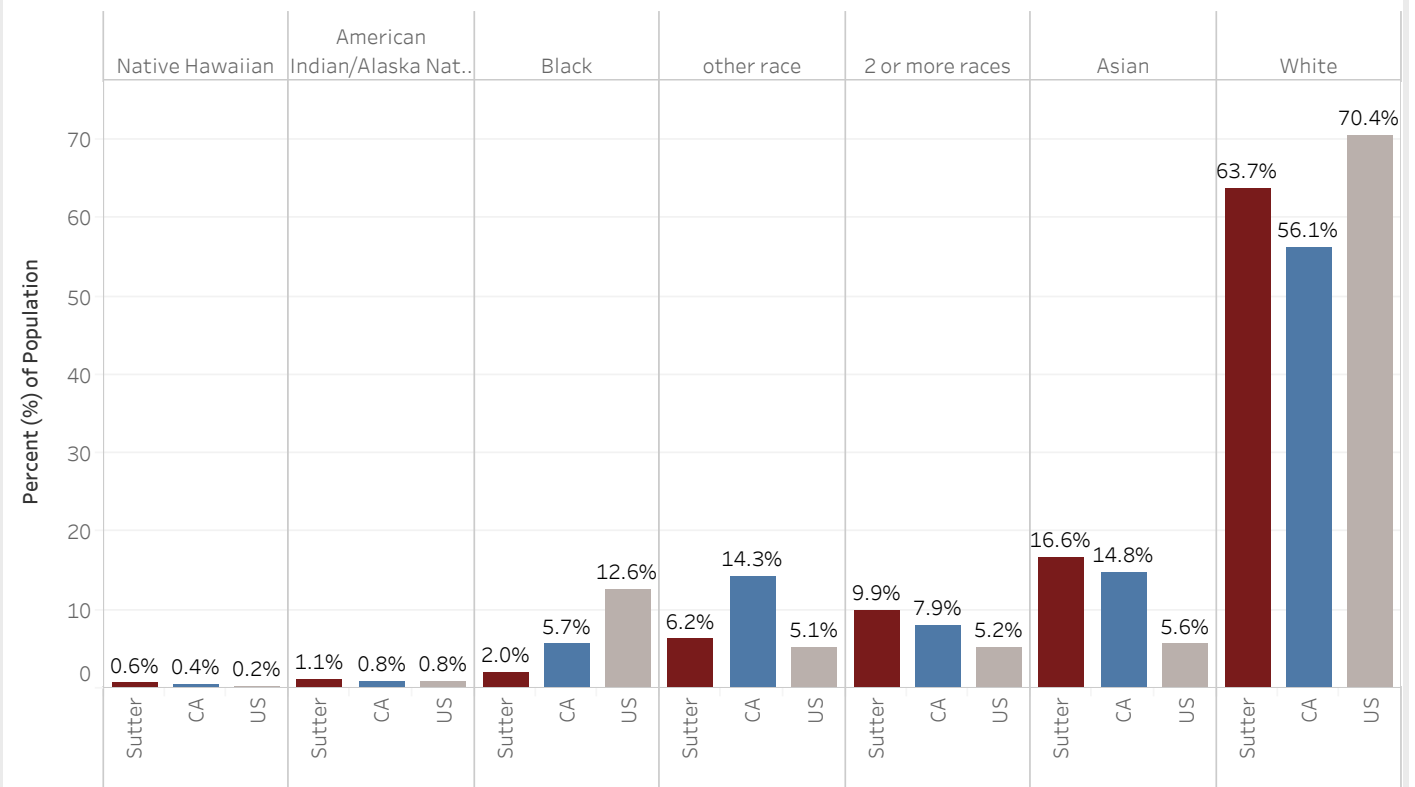


Figure 2: Race Distribution by Geography (2020)



## References:

1. Census - Table Results. Accessed April 20, 2022. [https://data.census.gov/cedsci/table?q=Sutter%20County&t=Race%20and%20Ethnicity&g=0100000US\\_0400000US06](https://data.census.gov/cedsci/table?q=Sutter%20County&t=Race%20and%20Ethnicity&g=0100000US_0400000US06)
2. Sutter VV. Sikh Temples | Visit Yuba Sutter. Accessed November 1, 2021. <https://visityubasutter.com/activity/sikh-temples>

# DISABILITY

## Disability:

While having a disability does not mean someone is unhealthy or cannot be healthy, people with disabilities face many barriers to good health. Almost 13% of Sutter County Residents are living with one or more disabilities (Figure 1), higher than California (10.6%), but comparable to the United States (12.7%) (1). The most common disability in Sutter County, California, and the United States is ambulatory. Ambulatory disability includes having difficulty walking or climbing stairs. Figure 2 highlights the proportion of different disabilities in Sutter County, California, and the United States.

Figure 1: Proportion of Population Living with a Disability (2020)

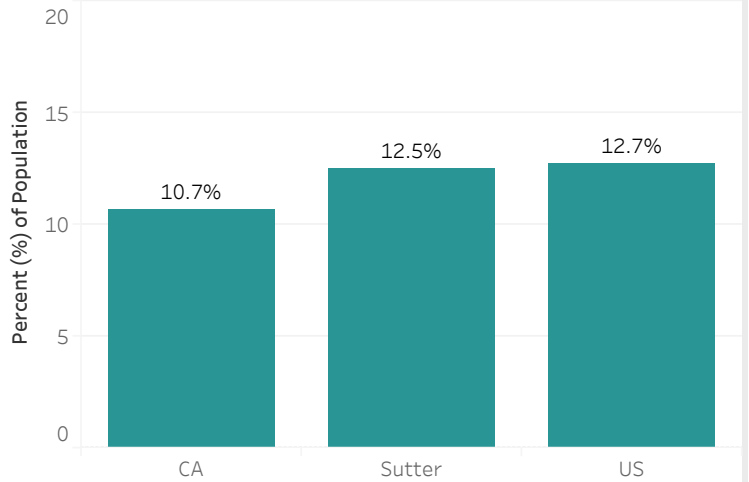
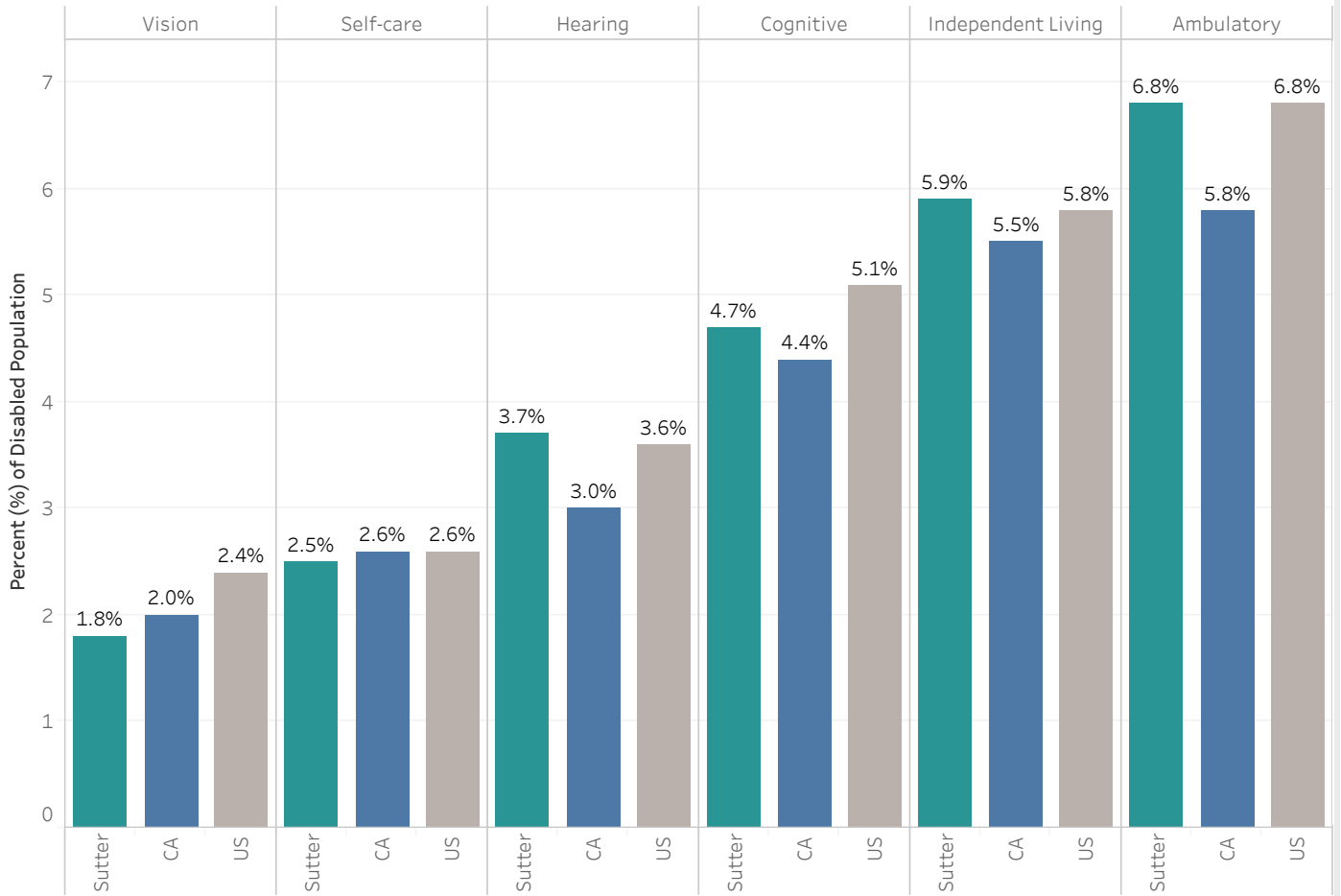


Figure 2: Proportion of Disabled Population by Disability Type



## References:

1. Census - Table Results. Accessed April 20, 2022. [https://data.census.gov/cedsci/table?q=Sutter%20County&t=Disability&g=0100000U0\\_0400000U06](https://data.census.gov/cedsci/table?q=Sutter%20County&t=Disability&g=0100000U0_0400000U06)

# PLACE OF BIRTH & LANGUAGE

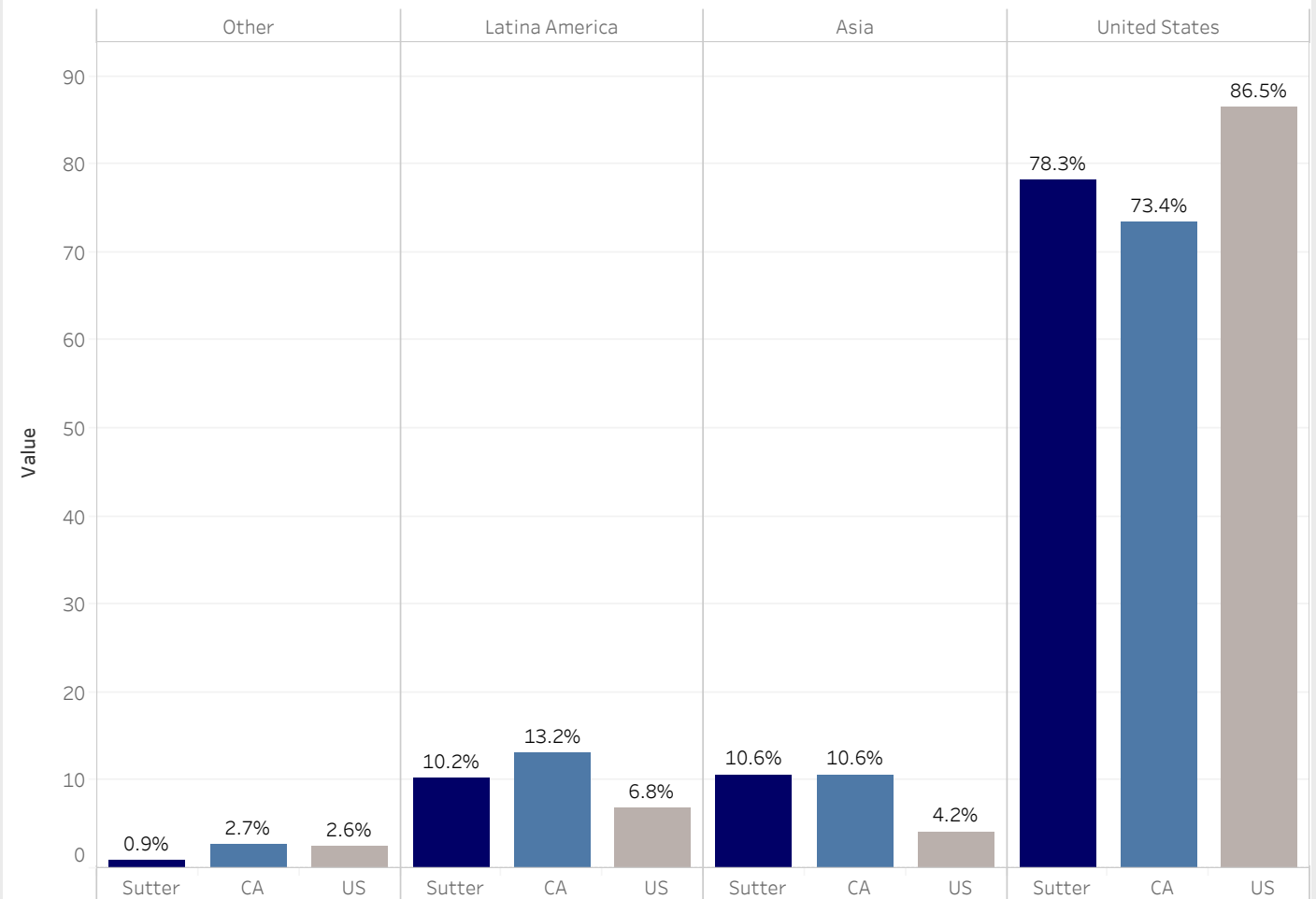
## Place of Birth:

Roughly 79% of Sutter County residents were born in the United States and 21% were born outside the United States (1). Foreign born Sutter County residents were mostly born in Asia (50.4%) and Latin America (48.6%). (Figure 1). The "Other" category (2.9%) combines those born in Africa, Oceania, Europe, and Canada.

## Language Spoken and English Fluency:

People with limited English proficiency face unique challenges to maintaining good health. They may need trained interpreters and/or require documents translated to their native language to fully understand issues related to their health or to accessing services. About 65% of Sutter County residents speak only English at home and 35% speak a language other than English at home (2). Roughly 56% of those who speak a language other than English at home speak Spanish, 41% speak other Indo-European languages (example: Punjabi, Hindi, and others), and 3% speak Asian and Pacific Island languages (example: Hmong, Tagalog, and others).

Figure 1: Place of Birth (2020)



## References:

1. Census - Table Results. Accessed April 20, 2022.

[https://data.census.gov/cedsci/table?q=Sutter%20County&t=Place%20of%20Birth&g=0100000US\\_0400000US06&tid=ACSDT5Y2020.B05002](https://data.census.gov/cedsci/table?q=Sutter%20County&t=Place%20of%20Birth&g=0100000US_0400000US06&tid=ACSDT5Y2020.B05002)

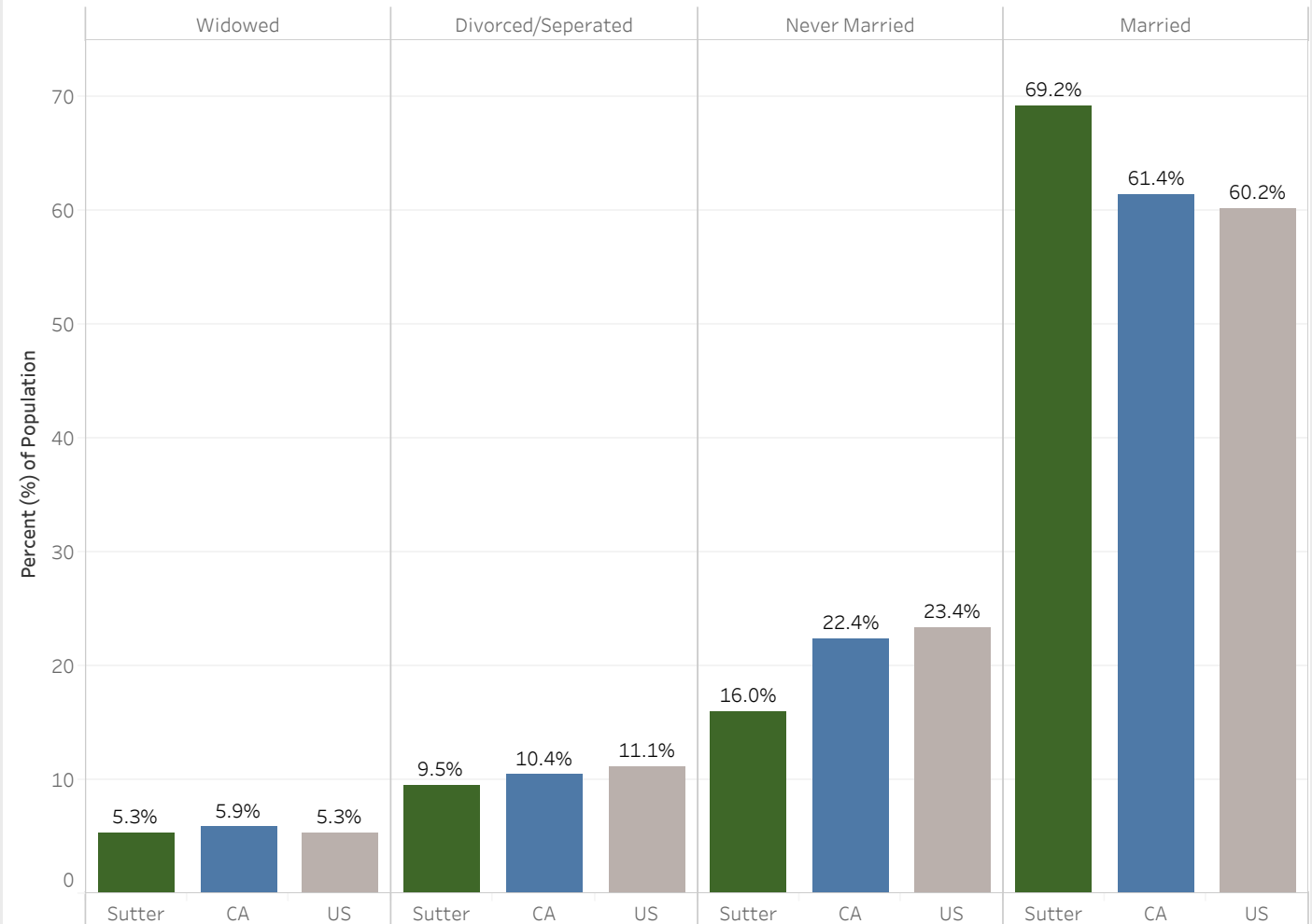
# MARITAL STATUS

## Marital Status and Household Structure:

Roughly half (69.2%) of Sutter County residents over the age of 15 are currently married (Figure 1); this is higher than both the California and US averages (1). A smaller proportion of Sutter County residents also report being divorced, compared to California and the US. Sutter County has similar rates of people widowed (5.3%) as both California and the US. Conversely, there are fewer never married residents of Sutter County (16.0%) than California (22.4%) or the US (23.4%).

The US Census Bureau defines a household as everyone who lives in a single housing unit. Housing units are houses, apartments, single rooms or group of rooms that are separate living quarters. Sutter County had approximately 33,039 households in 2020; the average household includes 3 people.

**Figure 1: Marital Status by Geography (2020)**



### References:

1. Census - Table Results. Accessed April 20, 2022.

[https://data.census.gov/cedsci/table?q=Sutter%20County&t=Place%20of%20Birth&q=0100000US\\_0400000US06&tid=ACST5Y2020.S0503](https://data.census.gov/cedsci/table?q=Sutter%20County&t=Place%20of%20Birth&q=0100000US_0400000US06&tid=ACST5Y2020.S0503)

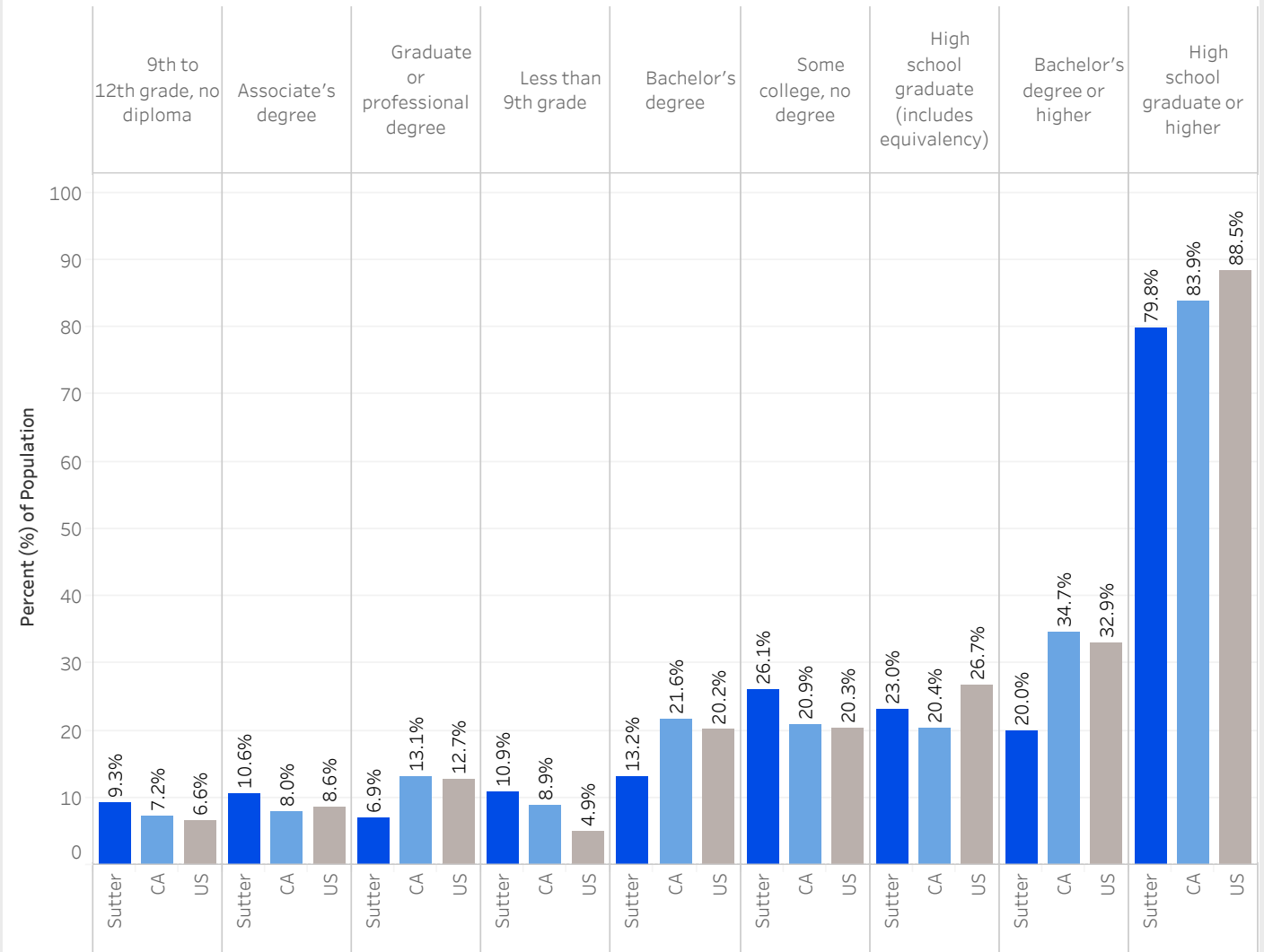
# EDUCATION

## Education:

Education influences health and longevity through many factors, including better health behaviors, increased health knowledge, higher incomes, and social and psychological aspects like greater sense of control over factors that affect your life and stronger social support networks (1). People with less education are more likely to have chronic diseases, such as heart disease and diabetes, and are increasingly more likely to have risk factors that predict disease, such as smoking and obesity.

In 2020, Sutter County residents were less likely to have a bachelor's or graduate/professional degree than those in California or the United States (Figure 1) (2). However, Sutter County residents had a higher percentage of Associates degrees (10.6%) than California (8.0%) and the United States (8.6%). This may be attributed to access of the local Yuba Community College system. In 2019, Sutter County residents also had higher rates of people with education less than 9th grade and 9-12th grade without a high school diploma, compared to California and the United States.

**Figure 1: Higher Level of Education for Adults Age 25 or Older by Geography (2020)**



## References:

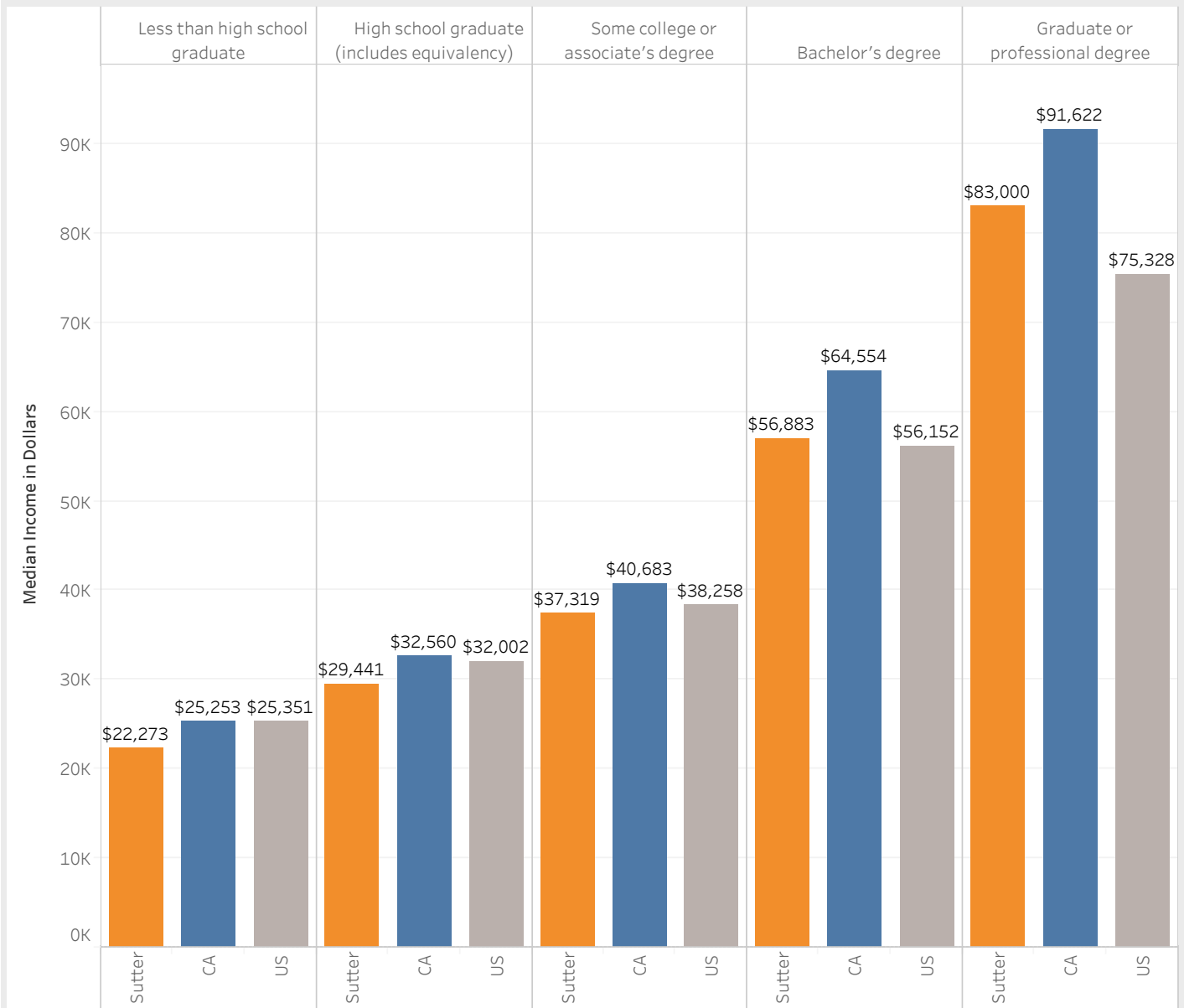
1. About Social Determinants of Health (SDOH). Published March 10, 2021. Accessed November 22, 2021. <https://www.cdc.gov/socialdeterminants/about.html>
2. Census - Table Results. Accessed April 20, 2022. [https://data.census.gov/cedsci/table?q=Sutter%20County&t=Place%20of%20Birth&g=0100000US\\_0400000US06&tid=ACST5Y2020.S0503](https://data.census.gov/cedsci/table?q=Sutter%20County&t=Place%20of%20Birth&g=0100000US_0400000US06&tid=ACST5Y2020.S0503)

# INCOME BY EDUCATION

## Income by Education:

In 2020, Sutter County residents with a Bachelor’s degree, Graduate/professional degree, or less than high school education made significantly less income than the state and national averages (Figure 3) (2,3,4). Sutter County median income was comparable to the state and national average for high school graduates and those with some college/Associates degree. Overall, Sutter County median income tends to be less than the California average. In addition, Sutter County females make less than males based on education level.

**Figure 1: Highest Level of Education for Adults Age 25 or Older by Geography (2020)**



### References:

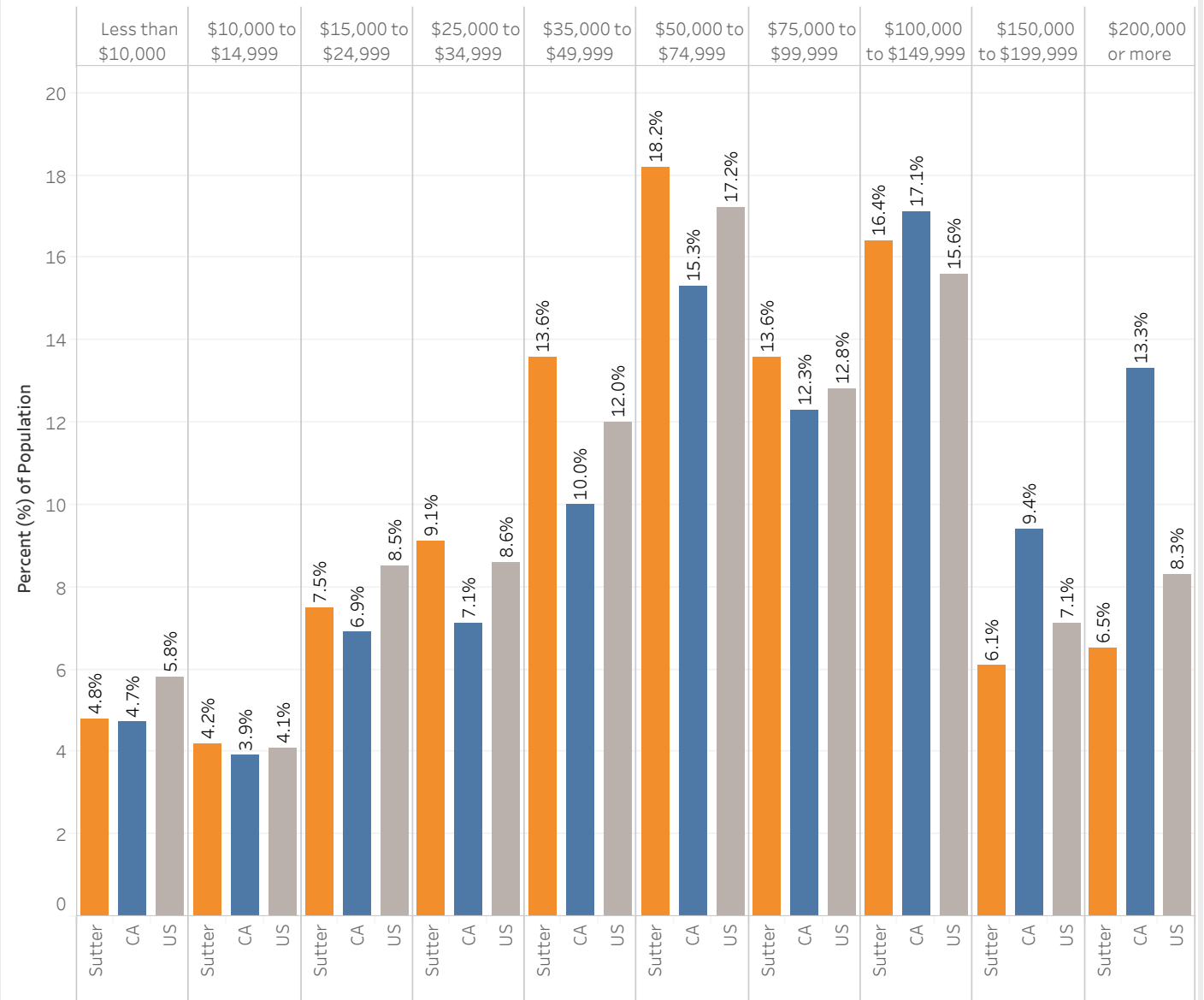
1. Census - Table Results. Accessed April 20, 2022. [https://data.census.gov/cedsci/table?q=Sutter&t=Income%20and%20Poverty&g=0100000US\\_0400000US06](https://data.census.gov/cedsci/table?q=Sutter&t=Income%20and%20Poverty&g=0100000US_0400000US06)

# MEDIAN INCOME

## Median Income:

Household income refers to the combined income of all people living in one home. As shown in Figure 1, roughly 39.2% of Sutter County residents over the age of 25 make below \$50,000 dollars, compared to California (32.6%) and the United States (39.0%) (1). Economic stability and neighborhood level factors affect health risks and outcomes, which are part of the social determinants of health (2).

Figure 1: Median Income of Adults over 25



### References:

1. Census - Table Results. Accessed April 20, 2022.

[https://data.census.gov/cedsci/table?q=Sutter&t=Income%20and%20Poverty&g=0100000US\\_0400000US06](https://data.census.gov/cedsci/table?q=Sutter&t=Income%20and%20Poverty&g=0100000US_0400000US06)

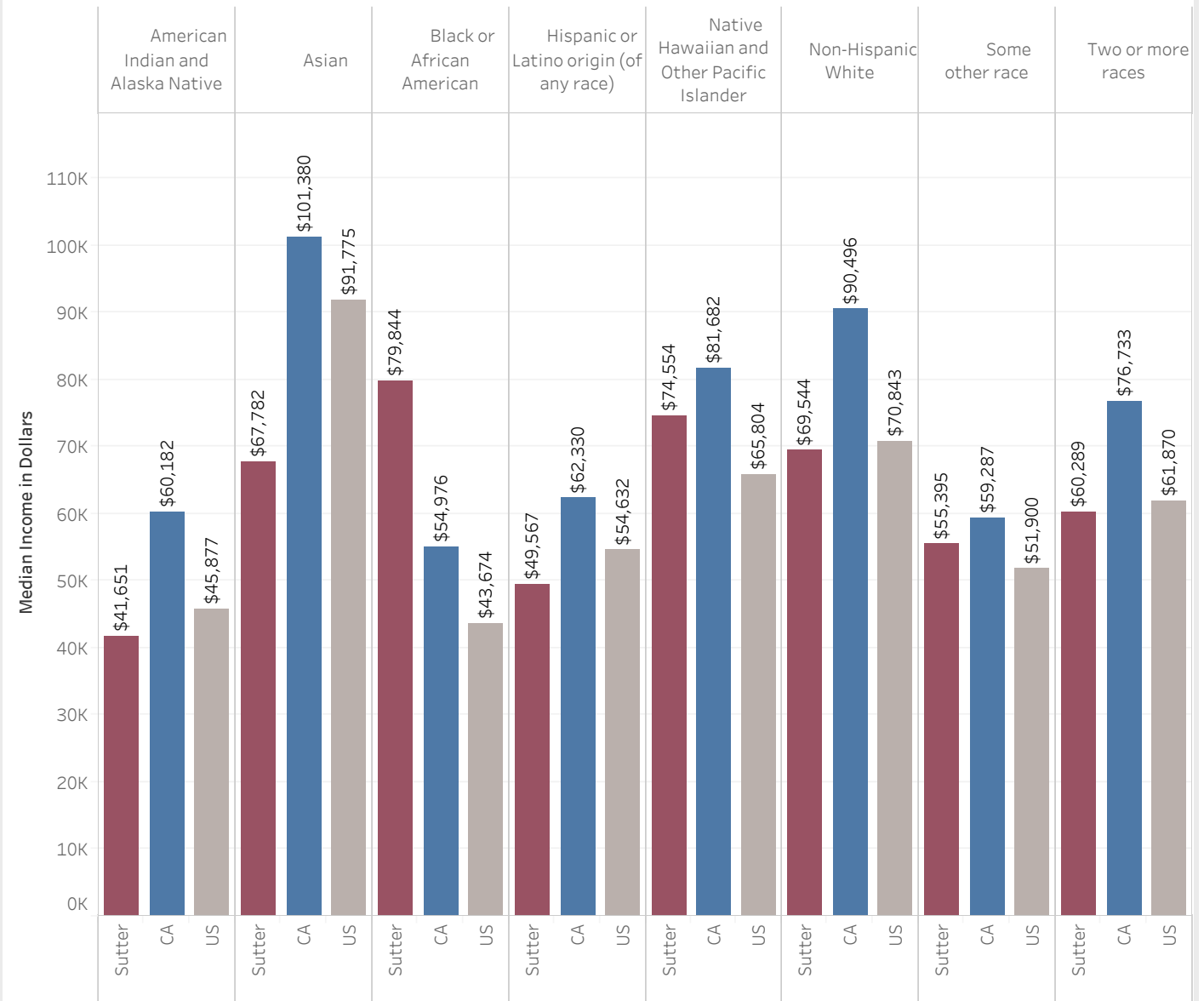
2. Census - Table Results. Accessed November 17, 2021. <https://data.census.gov/cedsci/table?q=united%20states&t=Education&tid=ACST1Y2019.S1501>

# INCOME BY RACE

## Income by Race/Ethnicity:

Figure 1 highlights race differences between income. Generally, Sutter County residents make less than California and the US, based on the racial categories. Sutter County Hispanic or Latino origin residents make \$15,000-\$20,000 less median income, compared to California and the US. Also, Sutter County Asians make \$34,000-\$44,000 less than the California and US average for those of Asian descent. Black or African Americans in Sutter County make \$25,000-36,000 more than the California and US average.

**Figure 1: Median Income by Race/Ethnicity (2020)**



### References:

1. Census - Table Results. Accessed April 20, 2022

[https://data.census.gov/cedsci/table?q=Sutter&t=Income%20%28Households,%20Families,%20Individuals%29&g=0100000US\\_0400000US06&tid=ACST5Y2020.S1903](https://data.census.gov/cedsci/table?q=Sutter&t=Income%20%28Households,%20Families,%20Individuals%29&g=0100000US_0400000US06&tid=ACST5Y2020.S1903)

# CHRONIC DISEASES



Courtesy of the California History Room, California State Library, Sacramento, California

# CHRONIC DISEASE

## Why It Is Important:

Chronic diseases are long lasting or recurrent medical conditions that shorten lives and may limit the ability for people to engage in normal activities of daily living (1). Roughly, 6 in 10 adults in the United States have a chronic disease, with 4 in 10 adults suffering from two or more chronic diseases (2). Chronic diseases are largely preventable and modifiable through lifestyle choices and behaviors. While lifestyle choices do play a role in the development of chronic diseases, they are also influenced by where we live, learn, work and play and disproportionately impact some groups of the community more than others.

## Risk Factors for Chronic Disease:

- Tobacco use and exposure to second-hand smoke
- Poor nutrition, including diets low in fruits and vegetables and high in sodium and fats
- Lack of physical activity
- Excessive alcohol use
- Age
- Genetics

## The following chronic diseases discussed in this dashboard:

1. Cancer- All Types
2. Cancer- Lung Cancer
3. Cerebrovascular Disease
4. Chronic Lower Respiratory Disease
5. Diabetes
6. Heart Disease

## What We are doing:

The Sutter County Public Health Branch provides chronic disease prevention efforts through a variety of programs. These programs aim at improving the health of Sutter County residents by providing preventative education and disease management tools for those who are living with a chronic condition. Sutter County Public Health Education and Promotion services also work to "Make the Health Choice, the Easy Choice" through policies, systems, and environmental changes that improve health outcomes for all Sutter County residents. In addition, these programs provide outreach and education regarding a variety of health and chronic disease related topics.



## References:

1. California Department of Public Health. 2020. *The Burden of Chronic Disease, Injury, and environment Exposure, Second edition*. Accessed January 15, 2022. [https://www.cdph.ca.gov/Programs/CCDC/DCDC/DCDCB/CDPH%20Document%20Library/The%20Burden%20of%20Chronic%20Disease%20Injury2020\\_%20ADA-nn-markups%20\(SCOTT\\_26May2020\).pdf](https://www.cdph.ca.gov/Programs/CCDC/DCDC/DCDCB/CDPH%20Document%20Library/The%20Burden%20of%20Chronic%20Disease%20Injury2020_%20ADA-nn-markups%20(SCOTT_26May2020).pdf)
2. Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion. Accessed January 16, 2022. <https://www.cdc.gov/chronicdisease/about/index.htm>

# CANCER-ALL TYPES

Cancer is the second leading cause of death in the United States, California, and Sutter County (1). The term "cancer" refers to a group of diseases in which abnormal cells divide uncontrollably; these cells can then spread throughout the body and invade other tissues (2). There are more than 100 types of cancer, the most common types include breast cancer, lung cancer, prostate cancer, colorectal cancer, and melanoma (3). Cancer has many causes like genetics, modifiable lifestyle factors, and environmental risk factors. Modifiable risk factors include smoking, alcohol drinking, poor diet, physical inactivity and obesity (2,4).

### Where We Are Now:

On average, cancer death rates are higher in Sutter County compared to California, but slightly lower than the US (Table 1). From 2016 to 2020, Sutter County has seen an overall slight decreasing trend in cancer deaths (Figure 1). Timely and age-appropriate cancer screenings are important in preventing cancer related deaths. For Sutter County to continue seeing reduced rates of cancer deaths, continuing to provide programs that target risk factors like smoking, drinking alcohol, physical inactivity, and promoting timely age-appropriate cancer screenings is essential.

Table 1: Cancer (All Types) Deaths per 100,000 (2020)

California	Sutter County	United States
128.3	148.5	146.5

### Those Most In Sutter County Affected:

In Sutter County, men die from cancer more frequently than women (Figure 1). From 2016 to 2020, the average age at death from cancer was 72 years; however, a quarter of those who died from cancer were 63 or younger (6). Sutter County also has higher rates of modifiable risk factors for cancer (especially smoking, physical inactivity, and obesity) compared to the state average; this is likely a contributing factor for Sutter County's higher rates of cancer deaths (Table 1). Non-Hispanic Whites and Blacks have the highest cancer death rates in Sutter County (Figure 2). Although Sutter County cancer incidence rates (398.3 cases per 100,000) are lower than the California average (402.4 cases per 100,000), the death rate is higher in Sutter County (155.9 deaths per 100,000) than California (152.4 deaths per 100,000). This shows that Sutter County likely has less timely and/or age-appropriate cancer screenings to prevent cancer deaths.

Figure 1: Heart Disease Deaths among Sutter County Residents, 2016-2020

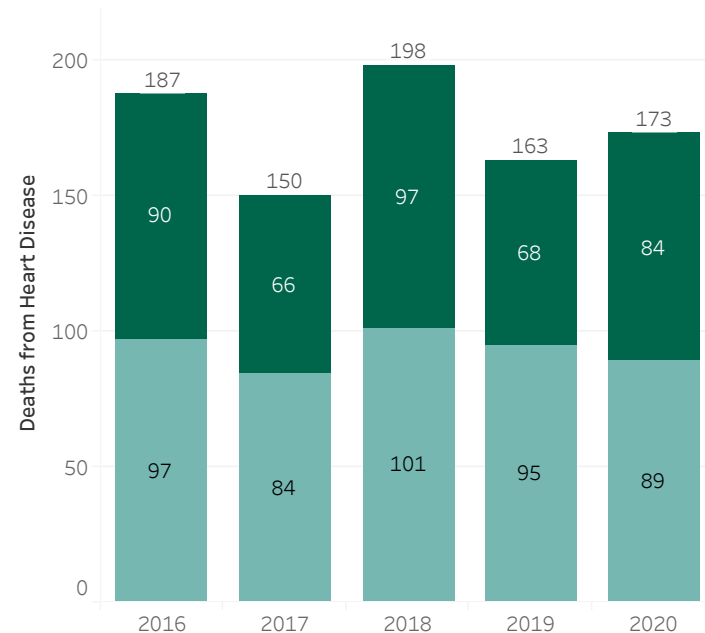
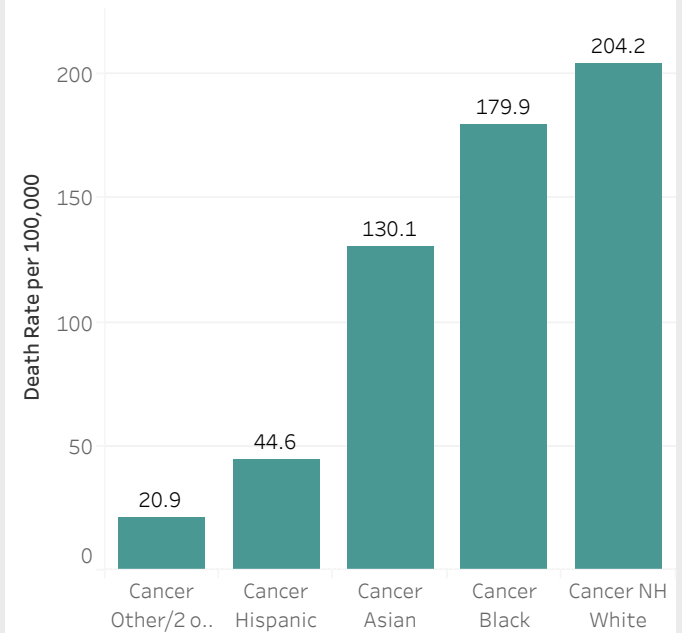


Figure 2: Average Yearly Rates of Cancer (All-Types) by Race/Ethnicity, 2016-2020



### References:

1. Products - Data Briefs - Number 427 - December 2021. Accessed April 11, 2022. <https://www.cdc.gov/nchs/products/databriefs/db427.htm>
2. Cancer- How to Prevent Cancer or Find It Early. Centers for Disease Control and Prevention. Published August 30, 2021. Accessed September 2, 2021. <https://www.cdc.gov/cancer/dpcp/prevention/index.htm>
3. Cancer Statistics. National Cancer Institute. Published September 25, 2020. Accessed September 2, 2021. <https://www.cancer.gov/about-cancer/understanding/statistics>
4. Cancer Disparities. National Cancer Institute. Published September 25, 2020. Accessed September 2, 2021. <https://www.cancer.gov/about-cancer/understanding/disparities>
5. State Cancer Profiles > Incidence Rates Table. Accessed February 10, 2022. <https://statecancerprofiles.cancer.gov/incidencerates/index.php?stateFIPS=06&areatype=county&cancer=047&stage=211&race=00&sex=0&age=001&type=incd..>

# LUNG CANCER

## Why It Is Important:

Lung cancer is the leading cause of death from cancer in Sutter County (1) and nationwide (2). Lung cancer is a cancer that begins in either the lungs or the bronchial tubes, which carry air between the lungs themselves and the throat. It is often diagnosed after it has spread from the lung, which makes it very difficult to treat and leads to low survival rates. The major risk factor for lung cancer is tobacco smoking. Many lung cancer cases are preventable.

## Where We Are Now:

Lung cancer death rates are higher in Sutter County compared to California, but lower than the US on average (Table 1). On average, from 2016 to 2020, 37 Sutter County residents die from lung cancer each year (Figure 1). Since tobacco smoke is the largest risk factor for lung cancer (4), reducing lung cancer deaths will require reducing the number of people who smoke and who are exposed to tobacco smoke.

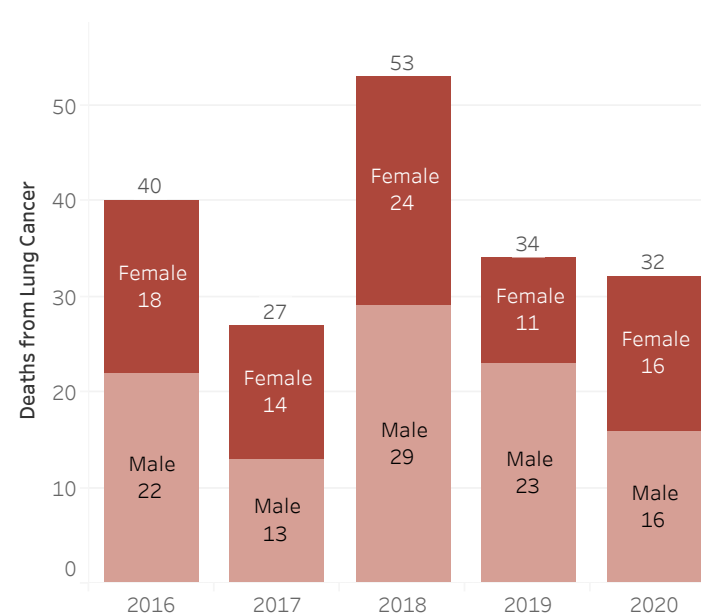
**Table 1: Lung Cancer Deaths per 100,000 (2018-2020)**

California	Sutter Coun..	United States
22.9	32.3	33.7

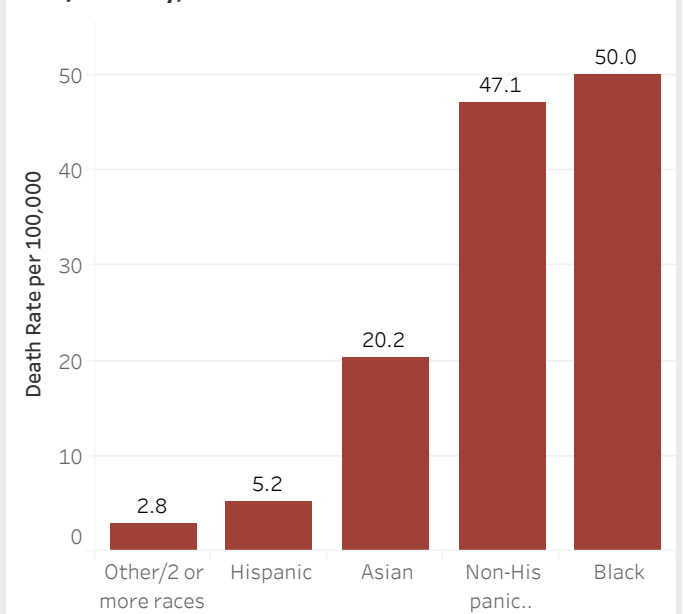
## Those Most in Sutter County Affected:

In Sutter County, men are more likely to die from lung cancer than women (Figure 1). In addition, the average age at death from lung cancer is 74 years; however, a quarter of those who died from lung cancer were 68 or younger (3). Blacks and Non-Hispanic whites have the highest death rates from Lung Cancer in Sutter County (Figure 2). Sutter County also has higher rates of tobacco smoking compared to the state average; this is likely a contributing factor for Sutter County's higher rates of lung cancer deaths (Table 1). In 2020, 12% of Sutter County were adult smokers, compared to California (11%) (5).

**Figure 1: Lung Cancer Deaths among Sutter County Residents, 2016-2020**



**Figure 2: Average Yearly Death Rates of Lung Cancer by Race/Ethnicity, 2016-2020**



**References:**

1. Lung Cancer Statistics. Centers for Disease Control and Prevention. Published June 8, 2021. Accessed November 18, 2021. <https://www.cdc.gov/cancer/lung/statistics/>
2. Sutter County Health and Human Services - Public Health Branch. 2020. *California Integrated Vital Records System*. Accessed August 24, 2021
3. Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2019 on CDC WONDER Online Database, released in 2020. Data are from the Multiple Cause of Death Files, 1999-2019, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed September 27, 2021. <http://wonder.cdc.gov/ucd-icd10.html>
4. What Are the Risk Factors for Lung Cancer?. Centers for Disease Control and Prevention. Published October 18, 2021. Accessed November 18, 2021. [https://www.cdc.gov/cancer/lung/basic\\_info/risk\\_factors.htm](https://www.cdc.gov/cancer/lung/basic_info/risk_factors.htm) ..

# CEREBROVASCULAR DISEASE (STROKE)

## Why It Is Important:

Cerebrovascular disease is a condition where normal blood flow is impaired due to problems with a blood vessel in the brain. It develops slowly over decades, and the first warning sign of cerebrovascular disease may be a stroke. Cerebrovascular disease is the fifth leading cause of death in the United States and the third leading cause of death in California and in Sutter County (1). If not fatal, cerebrovascular disease can cause serious and lifelong disability. Several medical conditions and lifestyle choices, including heart disease, high blood pressure, high blood cholesterol, tobacco use, and obesity, increase a person's risk for developing cerebrovascular disease (2). Since many of these risk factors are modifiable, cerebrovascular disease and strokes can be prevented.

## Where We Are Now:

Cerebrovascular disease death rates are substantially higher in Sutter County compared to California and the US on average (Table 1) (4). From 2016 to 2020, Sutter County has seen a slight increasing trend in cerebrovascular disease deaths (Figure 1). For Sutter County to see reduced rates of cerebrovascular disease deaths, continued implementation of health programs that target modifiable risk factors, such as tobacco use, unhealthy diet, physical inactivity, and obesity is essential.

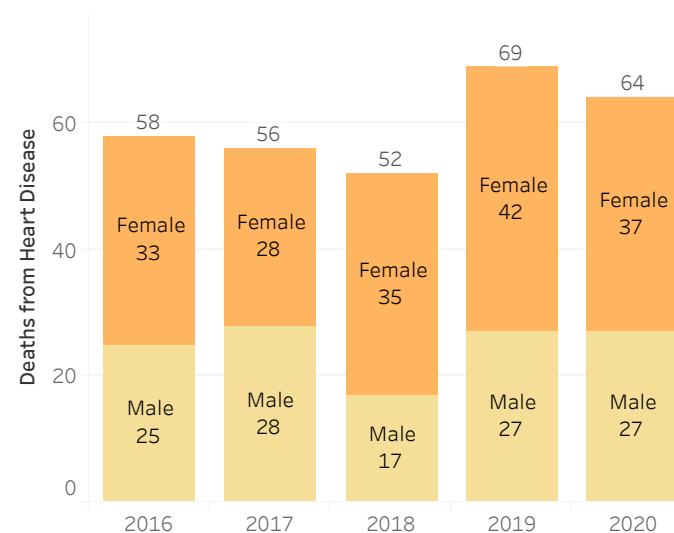
**Table 1: Cerebrovascular Disease Deaths per 100,000 (2018-2020)**

California	Sutter Cou..	United St..
37	52	37.6

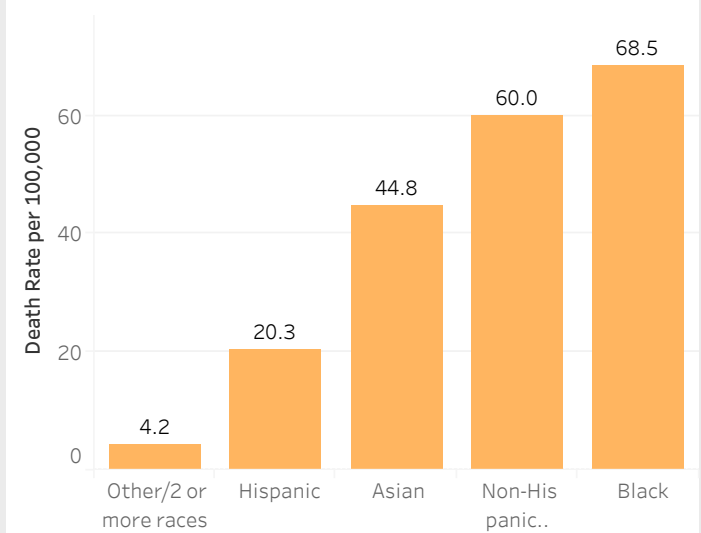
## Those Most in Sutter County Affected:

In Sutter County, deaths from cerebrovascular disease occur more frequently in women than men (Figure 1). In addition, the average age at death from cerebrovascular disease was 81 years from 2016 to 2020; however, cerebrovascular disease deaths are increasing among younger Sutter County residents. A quarter of Sutter County residents who died from cerebrovascular disease were younger than 75, and 10% were younger than 61. Non-Hispanic Whites and Blacks have the highest death rates from cerebrovascular disease in Sutter County (Figure 2).

**Figure 1: Cerebrovascular Disease Deaths among Sutter County Residents, 2016-2020**



**Figure 2: Average Yearly Death Rates of Cerebrovascular Disease by Race/Ethnicity, 2016-2020**



1. Products - Data Briefs - Number 427 - December 2021. Accessed April 11, 2022. <https://www.cdc.gov/nchs/products/databriefs/db427.htm>  
 2. Stroke Risk. Centers for Disease Control and Prevention. Published January 17, 2017. Accessed November 11, 2021. [https://www.cdc.gov/stroke/risk\\_factors.htm](https://www.cdc.gov/stroke/risk_factors.htm)  
 3. Stats of the States - Stroke Mortality. Accessed April 11, 2022. [https://www.cdc.gov/nchs/pressroom/sosmap/stroke\\_mortality/stroke.htm](https://www.cdc.gov/nchs/pressroom/sosmap/stroke_mortality/stroke.htm)  
 4. Sutter County Health and Human Services - Public Health Branch. 2020. *California Integrated Vital Records System*. Accessed August 24, 2021

# CHRONIC LOWER RESPIRATORY DISEASE

## Why It Is Important:

Chronic lower respiratory disease (CLRD) is the fourth leading cause of death nationwide and in Sutter County, and it is the fifth leading cause of death in California (1). CLRD encompasses chronic obstructive pulmonary disease (COPD), which includes chronic bronchitis and emphysema, as well as asthma. These conditions are characterized by shortness of breath caused by airway obstruction. In the US, tobacco smoke is the most significant risk factor for CLRD; quitting tobacco smoke is the best way to reduce risk of CLRD and its progression (2).

## Where We Are Now:

CLRD death rates are much higher in Sutter County compared to California and the US on average (Table 1). On average, from 2016 to 2020, 47 Sutter County residents die from CLRD each year (Figure 1). Since tobacco smoke is the largest risk factor for CLRD, reducing CLRD deaths will require reducing the number of people who smoke and who are exposed to tobacco smoke (3).

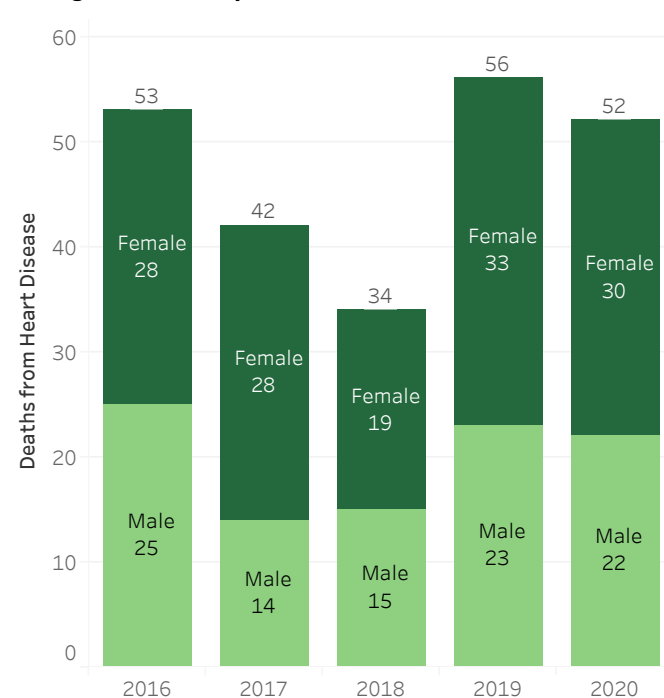
**Table 1: Chronic Lower Respiratory Disease Deaths per 100,000 (2018-2020)**

	California	Sutter County	United States
	28.5	39.3	38.1

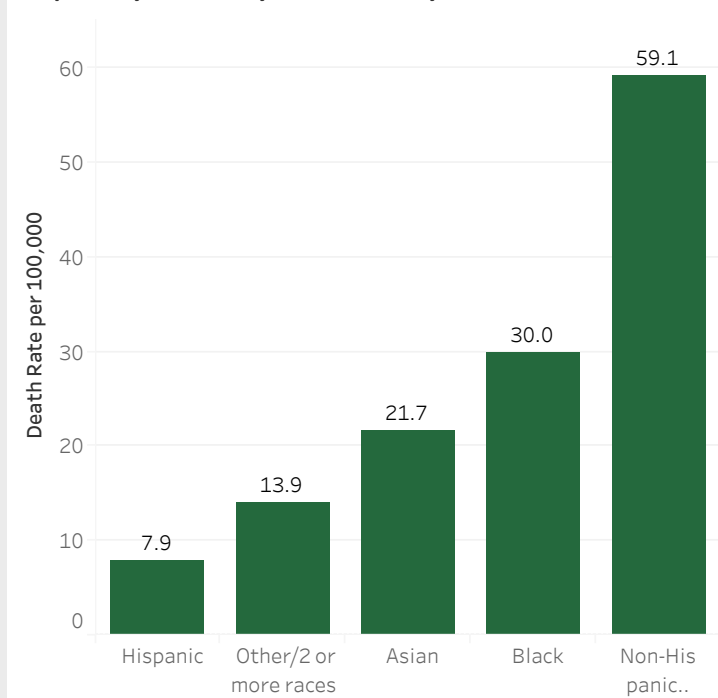
## Those Most In Sutter County Affected:

In Sutter County, deaths from CLRD occur more frequently in women than men (Figure 1). In addition, the average age at death from CLRD is 75 years. Sutter County also has higher rates of tobacco smoking compared to the state average; this is likely a contributing factor for Sutter County's higher rates of CLRD deaths (Table 1). In 2020, 12% of Sutter County are adult smokers, compared to California (11%)(4). Non-Hispanic Whites are disproportionately affected by CLRD deaths in Sutter County (Figure 2).

**Figure 1: Chronic Lower Respiratory Disease Deaths among Sutter County Residents, 2016-2020**



**Figure 2: Average Yearly Death Rates of Chronic Lower Respiratory Disease by Race/Ethnicity, 2016-2020**



**References:**

- Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2019 on CDC WONDER Online Database, released in 2020. Data are from the Multiple Cause of Death Files, 1999-2019, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed September 27, 2021. <http://wonder.cdc.gov/ucd-icd10.html>
- Stats of the States - Chronic Lower Respiratory Disease Mortality. Accessed April 11, 2022. [https://www.cdc.gov/nchs/pressroom/sosmap/lung\\_disease\\_mortality/lung\\_disease.htm](https://www.cdc.gov/nchs/pressroom/sosmap/lung_disease_mortality/lung_disease.htm)
- Basics about COPD. Centers for Disease Control and Prevention. Published June 9, 2021. Accessed November 22, 2021. <https://www.cdc.gov/copd/basics-about.html>
- Sutter County Health and Human Services - Public Health Branch. 2020. *California Integrated Vital Records System*. Accessed August 24, 2021 ..

# TYPE 2 DIABETES

## Why It Is Important:

Diabetes affects roughly 37 million Americans, of which, 90 to 95% of individuals have Type 2 Diabetes (1). Type 2 Diabetes develops over time and affects the body's ability to produce and regulate insulin. Some of the risk factors include smoking, being overweight, physical inactivity, high blood pressure, and high cholesterol (2). Serious complications associated with Type 2 Diabetes include health problems such as heart disease, vision loss and chronic kidney disease (1). People with Type 2 diabetes can take steps to manage their symptoms and lower their risk of complications.

## Where We Are Now:

Nationally, childhood obesity, physical inactivity, and Type 2 Diabetes are increasing among youth due in part to the consumption of sugary foods and drinks (1). National age adjusted prevalence is highest among Native American (33%), followed by Non-Hispanic Blacks (11.8%), Hispanics overall (11.8%), Asian American (8.4%), Non-Hispanic Whites (7.1%) and Alaska Natives (5.5%) (4). Of the Hispanic/Latino groups in the United States, Mexican Americans (18.9%) are the most affected by Type 2 Diabetes. In disaggregating Asian subgroups, Asian Indians (14.2%) are shown to be the most affected by Type 2 Diabetes.

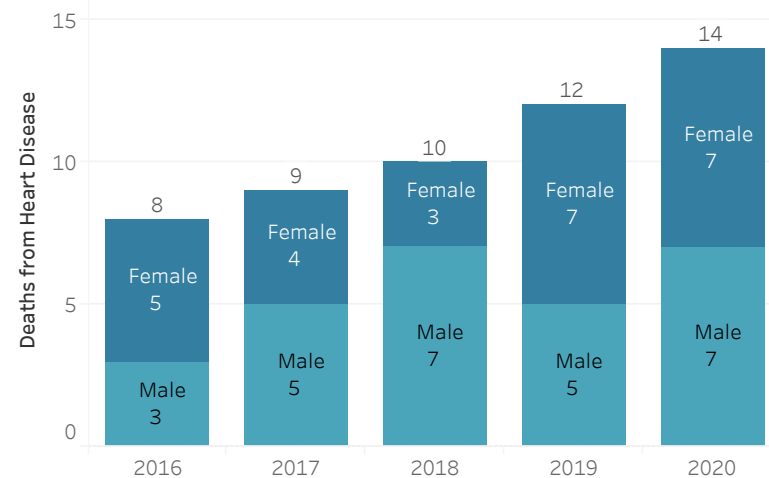
**Table 1: Type 2 Diabetes Deaths per 100,000 (2018-2020)**

California	Sutter Co..	United St..
22.3	18.4	22.6

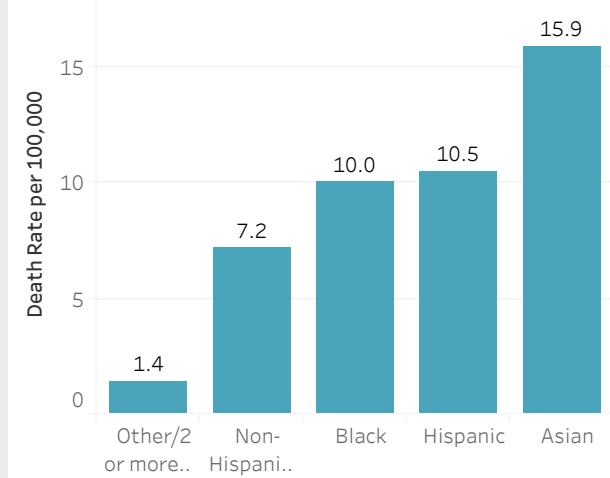
## Those Most In Sutter County Affected:

In Sutter County, deaths from Type 2 Diabetes are fairly equal in men and women (Figure 1). Asians are most affected by Type 2 Diabetes deaths in Sutter County, followed by Hispanic, black, non-Hispanic Whites, and other/multiracial (Figure 2). More than half of the Asian population in Sutter County is Punjabi, which is a sub-group of the South Asian population. South Asians have a genetic predisposition that make them more susceptible to Type 2 Diabetes (4). In addition, other behavioral risk factors, like diet and exercise, also impact the risk of developing Type 2 Diabetes.

**Figure 1: Type 2 Diabetes Deaths among Sutter County Residents, 2016-2020**



**Figure 2: Average Yearly Death Rates of Type 2 Diabetes by Race/Ethnicity, 2016-2020**



**References:**

- Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2019 on CDC WONDER Online Database, released in 2020. Data are from the Multiple Cause of Death Files, 1999-2019, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed September 27, 2021. <http://wonder.cdc.gov/ucd-icd10.html>
- Stats of the States - Chronic Lower Respiratory Disease Mortality. Accessed April 11, 2022. [https://www.cdc.gov/nchs/pressroom/sosmap/lung\\_disease\\_mortality/lung\\_disease.htm](https://www.cdc.gov/nchs/pressroom/sosmap/lung_disease_mortality/lung_disease.htm)
- Basics about COPD. Centers for Disease Control and Prevention. Published June 9, 2021. Accessed November 22, 2021. <https://www.cdc.gov/copd/basics-about.html>
- Sutter County Health and Human Services - Public Health Branch. 2020. *California Integrated Vital Records System*. Accessed August 24, 2021
- Sutter County, California. County Health Rankings & Roadmaps. Accessed March 22, 2022. <https://www.countyhealthrankings.org/app/california/2021/rankings/sutter/county/outcomes/overall/snapshot>

# HEART DISEASE

## Why It Is Important:

Heart disease is the leading cause of death in the United States, California, and Sutter County (1). "Heart disease" refers to a variety of heart conditions. In the US, the most common type of heart disease is coronary heart disease (CHD), which restricts blood flow to the heart and can lead to heart attacks (2). Several medical conditions and lifestyle choices, including high blood pressure, high blood cholesterol, smoking, diabetes, and obesity, increase a person's risk for developing heart disease (2). Since many of these risk factors are modifiable, heart disease and heart attacks can often be prevented.

## Where We Are Now:

On average, heart disease death rates are higher in Sutter County compared to California, but slightly lower than the US (Table 1). From 2016 to 2020, Sutter County has seen a slight decreasing trend in heart disease deaths (Figure 1). For Sutter County to continue to see reduced rates of heart disease deaths, it is essential to continue evidence-based health programs that target the modifiable risk factors associated with heart disease. This includes programs that address tobacco use, unhealthy diet, physical inactivity, obesity and the medical conditions related to these risk factors.

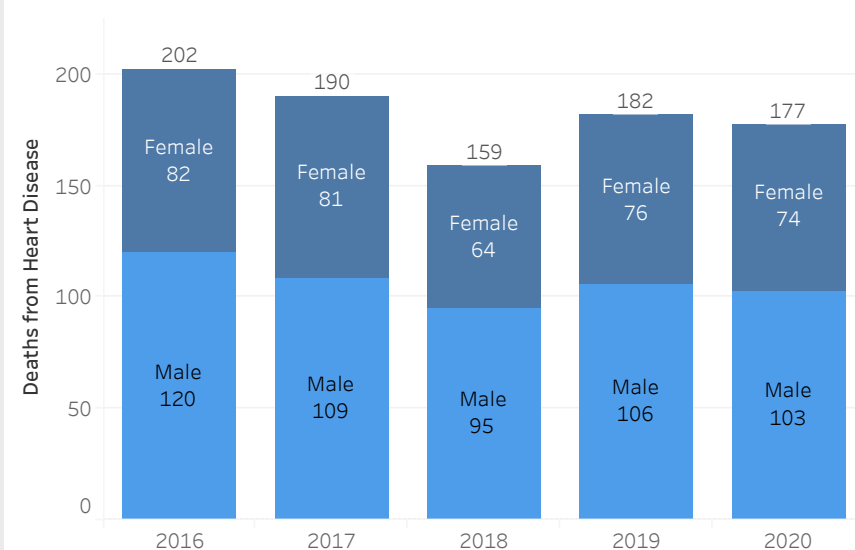
**Table 1: Heart Disease Deaths per 100,000 (2018-2020)**

California	Sutter Co..	United St..
80.7	89.3	90.2

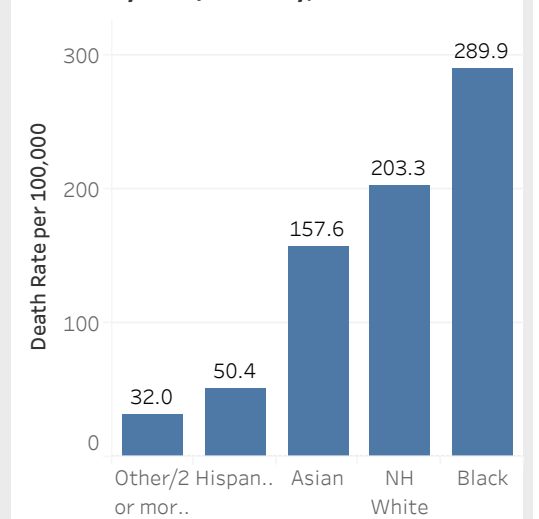
## Those Most In Sutter County Affected:

In Sutter County, men are more likely to die from heart disease than women (Figure 1). In addition, the average age at death from heart disease is 77 years; however, a quarter of those who died from heart disease were 67 or younger (3). Sutter County also has higher rates of modifiable risk factors for heart disease (especially tobacco use, physical inactivity, and obesity) compared to the state average; (Table 1). Blacks in Sutter County have the highest death rate from heart disease, followed by non-Hispanic Whites, Asians, Hispanics, and other/ 2 or more races (Figure 2).

**Figure 1: Heart Disease Deaths among Sutter County Residents, 2016-2020**



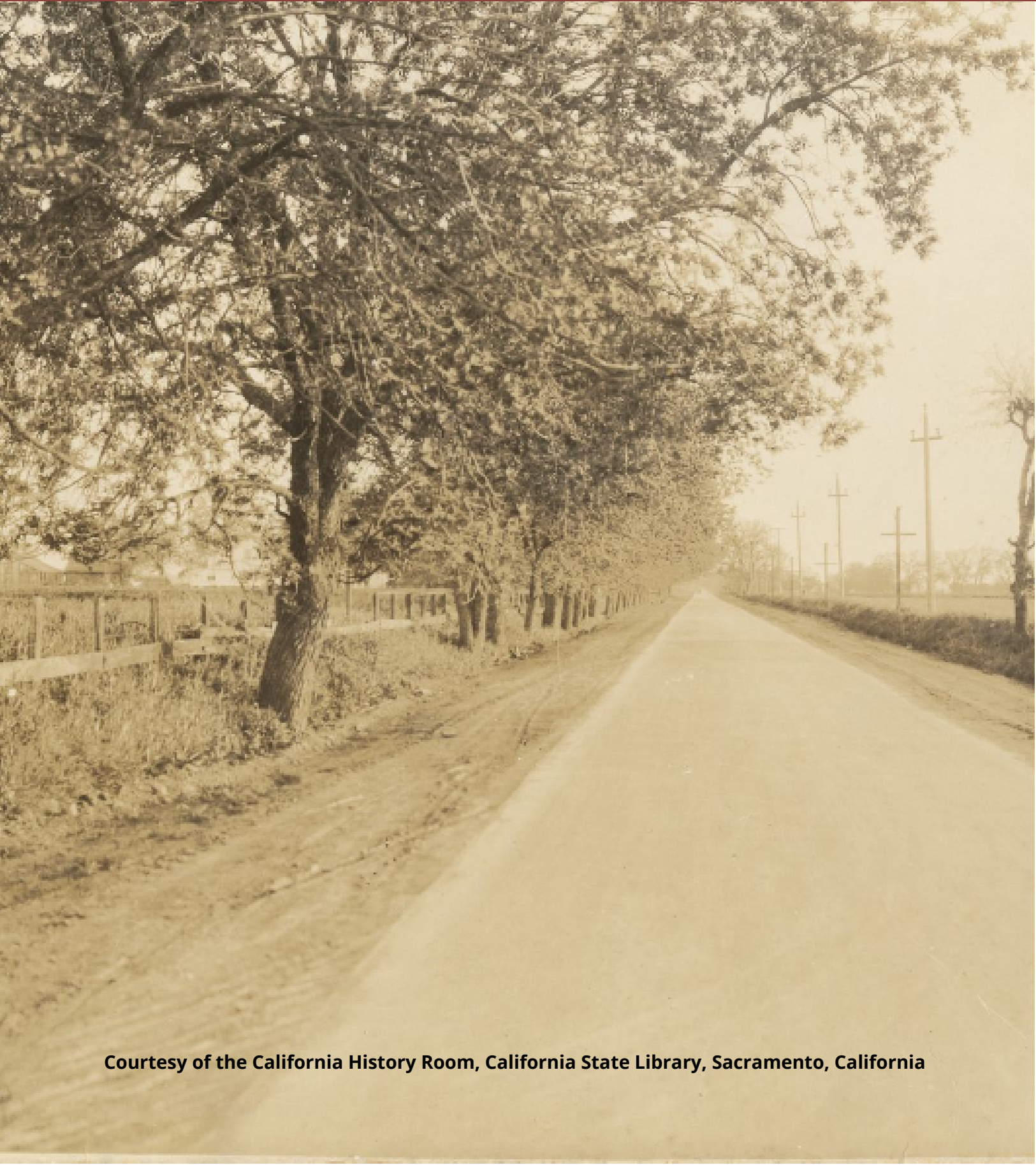
**Figure 2: Average Yearly Rates of Heart Disease by Race/Ethnicity, 2016-2020**



## References

1. Stats of the States - Heart Disease Mortality. Published February 25, 2022. Accessed April 11, 2022. [https://www.cdc.gov/nchs/pressroom/sosmap/heart\\_disease\\_mortality/heart\\_disease.htm](https://www.cdc.gov/nchs/pressroom/sosmap/heart_disease_mortality/heart_disease.htm)
2. Centers for Disease Control and Prevention, National Center for Health Statistics. Underlying Cause of Death 1999-2019 on CDC WONDER Online Database, released in 2020. Data are from the Multiple Cause of Death Files, 1999-2019, as compiled from data provided by the 57 vital statistics jurisdictions through the Vital Statistics Cooperative Program. Accessed August 24, 2021. <http://wonder.cdc.gov/ucd-icd10.html>
3. Products - Data Briefs - Number 427 - December 2021. Accessed April 11, 2022. <https://www.cdc.gov/nchs/products/databriefs/db427.htm>
4. About Heart Disease. Centers for Disease Control and Prevention. Published January 13, 2021. Accessed August 30, 2021. <https://www.cdc.gov/heartdisease/about.htm> ..

# COMMUNICABLE DISEASES



Courtesy of the California History Room, California State Library, Sacramento, California

# COMMUNICABLE DISEASE

## Why It Is Important:

Communicable diseases are illnesses that spread from one person to another through contact with contaminated objects or surfaces, bodily fluids and blood products, bites from insects or animals, or through the air (1). Communicable diseases are a serious public health issue, and the prevention and control of these diseases is a major focus for public health departments. There are many ways to prevent the spread of communicable diseases. Vaccinations have helped eliminate or greatly reduce communicable disease threats (1). Proper handwashing, especially after handling food or using the toilet, making sure the food we eat and water we drink is safe, avoiding people who are sick and practicing safe sex such as using condoms are important components in disease prevention.

## Sexually Transmitted Diseases (STDs)

*Factors Contributing to Surge in Sexually Transmitted Diseases (3) :*

1. Drug use, unstable housing, and stigma have contributed to the increase in sexually transmitted diseases.
2. Decreased condom use, especially among vulnerable groups has increased the risk of infection.
3. Funding cuts to prevention and treatment programs has led to clinic closures, limited screening, decreases in staff, and reduced follow up for patients, which have also contributed to the increase in STDs.

**The following communicable diseases discussed in this dashboard:**

1. Chlamydia
2. Chronic Hepatitis C
3. COVID-19
4. Gonorrhea
5. Syphilis
6. Tuberculosis

## What We Do at Sutter County:

The Sutter County Communicable Disease Program works to prevent and control the spread of communicable diseases in our community. It works to contain these diseases by investigating who is sick and who else might get sick, providing vaccines, educating healthcare providers and the community about communicable diseases, and collecting and reporting the data essential to tracking the spread of these diseases.

## Targets for Improvement (2,3):

1. Improve public education and sexually transmitted disease awareness.
2. Increase routine screening for sexually transmitted disease, especially in populations at high risk.
3. Provider education and support to assess risk factors and screen for, diagnose, and treat sexually transmitted diseases.
4. Increase access to prenatal care for pregnant women, including routine third-trimester syphilis testing.

## References:

1. Communicable Disease. American Public Health Association. Accessed February 7, 2022. <https://www.apha.org/topics-and-issues/communicable-disease>
2. CDC Newsroom. CDC. Published January 1, 2016. Accessed September 7, 2021. <https://www.cdc.gov/media/releases/2021/p0125-sexually-transmitted-infection.html>
3. STDs Continue to Rise in the U.S. Press Release | CDC. Published October 7, 2019. Accessed September 7, 2021. <https://www.cdc.gov/nchhstp/newsroom/2019/2018-STD-surveillance-report-press-release.html>

# CHLAMYDIA

## Why It Is Important:

Chlamydia infections can have serious health consequences. For women, chlamydia can cause permanent damage to the reproductive system, which can make it difficult or impossible to conceive. Chlamydia also increases the risk of premature birth and can even cause potentially fatal ectopic pregnancies. During childbirth, a mother infected with chlamydia can pass the infection to her child, which can lead to an eye infection or pneumonia in the newborn (1). Nationwide, chlamydia cases increased 19% from 2015 to 2019 (2).

## Where We Are Now:

Rates of chlamydia infections appear to be much lower in Sutter County compared to California and the US (Table 1). From 2016 to 2019, Sutter County has seen a slight increasing trend in chlamydia infections, with approximately 350 new chlamydia diagnoses per year; however, this rate dropped substantially in 2020 (Figure 1). This decrease is likely attributed to changes in reporting guidelines by the California Department of Public Health (CDPH). As of October 1, 2019, chlamydia infections are no longer required to be reported to local health departments (5).

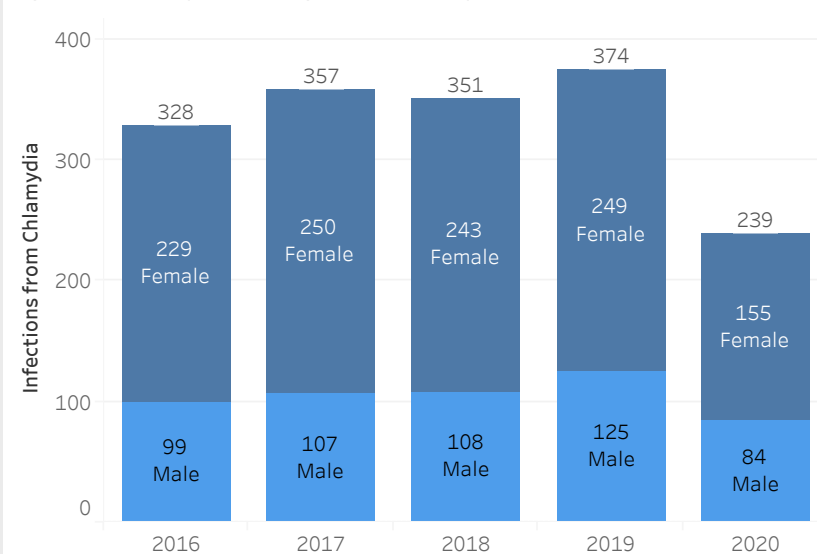
**Table 1: Chlamydia Infections per 100,000 (2020)**

California	Sutter County	United States
542.7	313.2	539.9

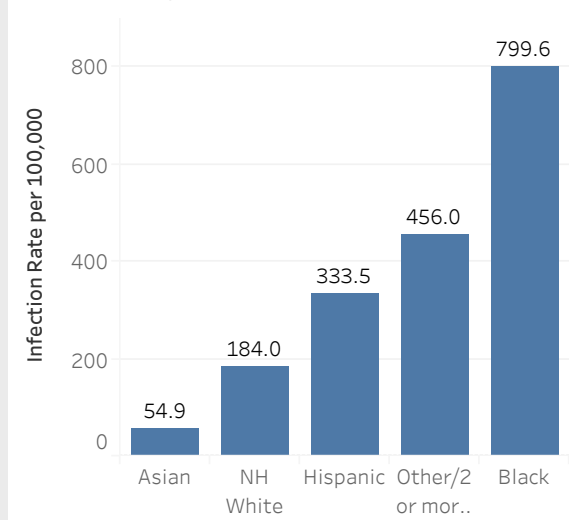
## Those Most Affected:

In Sutter County, chlamydia is diagnosed twice as often in women than men (Figure 1). While current sexually transmitted disease (STD) screening guidelines recommend annual chlamydia testing for all sexually active women younger than 25 years or who have an increased risk of contracting chlamydia (e.g., new or multiple sex partners), most men do not receive routine chlamydia testing (1). In addition, 79% of all chlamydia infections are diagnosed in people younger than 30 years (6). Black and non-Hispanic White Sutter County residents are also more likely to be diagnosed with chlamydia (Figure 2) (6).

**Figure 2: Chlamydia among Sutter County Residents, 2016-2020**



**Figure 2: Average Yearly Rates of Chlamydia by Race/Ethnicity, 2016-2020**



## References:

1. STD Facts- Chlamydia. Centers for Disease Control and Prevention. Published January 23, 2014. Accessed August 17, 2021. <https://www.cdc.gov/std/chlamydia/stdfact-chlamydia.htm>
2. Sexually Transmitted Disease Surveillance, 2019. Centers for Disease Control and Prevention. Published July 29, 2021. Accessed August 17, 2021. <https://www.cdc.gov/std/statistics/2019/default.htm>
3. All STDs Tables California, 2019. California Department of Public Health, STD Control Branch. Accessed November 22, 2021. <https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/2019-STD-Data-All-STDs-Tables.pdf>
4. Table 1. Sexually Transmitted Diseases - Reported Cases and Rates of Reported Cases, United States, 1941-2019. Centers for Disease Control and Prevention. Published April 12, 2021. Accessed August 17, 2021. <https://www.cdc.gov/std/statistics/2019/tables/1.htm>
5. Reportable Diseases and Conditions. California Department of Public Health. Published July 19, 2021. Accessed August 19, 2021. <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Reportable-Disease-and-Conditions.aspx> Sutter County Health and Human Services - Public Health Branch. 2020. Title 17, California Code of Regulations (CCR) §2500, §2593, §2641.5-2643.20, and §2800-2812 Reportable Diseases and Conditions. CalREDIE accessed August 17, 2021.

# CHRONIC HEPATITIS C

## Why It Is Important:

Hepatitis C is a liver infection caused by the hepatitis C virus and is spread through contact with blood from an infected person (1). Today, most people become infected by sharing needles or other equipment used to prepare or inject drugs. Advanced screenings for hepatitis C in blood banks has made the risk of transmission through blood products and transfusions rare, however, people who have had blood transfusions, received blood products, or organ transplants before June 1992 when hepatitis C screenings became available, are at an increased risk of becoming infected with this virus (2). Hepatitis C infection can range from mild illness lasting a few weeks to lifelong illnesses that can result in serious health problems such as liver cancer, cirrhosis and even death. Getting tested for hepatitis C is important as timely treatment can cure most people with hepatitis C in 8 to 12 weeks (3). More than half of hepatitis C infections will become chronic. While there is no vaccine for hepatitis C, it can be prevented by avoiding sharing needles or syringes, using personal items that may come into contact with an infected person's blood like razors, nail clippers or toothbrushes and avoiding getting tattoos or body piercings from an unlicensed facility or in an informal setting.

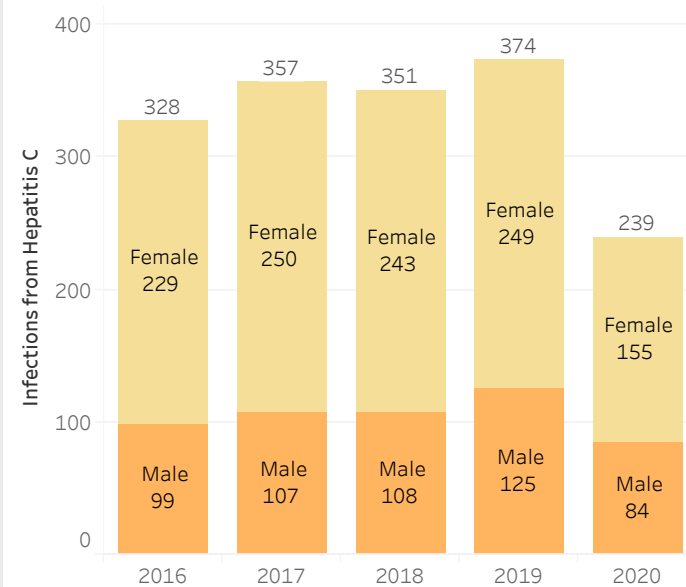
## Where We Are Now:

According to the CDC, there were 2.4 million chronic hepatitis C cases between 2013-2016 (1). In 2019, there were a total of 123,312 new chronic hepatitis C cases. National rates are 56.7 cases per 100,000 (4). In California, the 2018 rate for chronic hepatitis C was 89.1 cases per 100,000 (5).

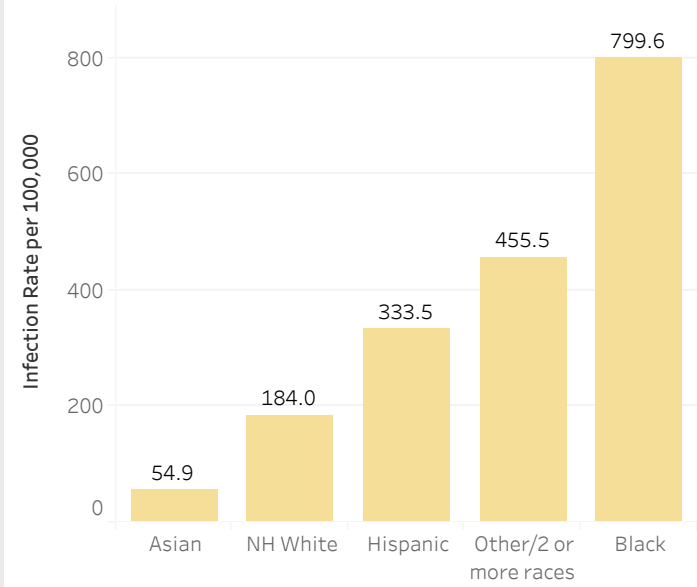
## Those Most Affected:

In Sutter County, men are more likely to be diagnosed with chronic hepatitis C, compared to women (figure 1). In 2020, Sutter County saw a decrease in chronic hepatitis C. This could be attributed to a limited access to testing during the COVID-19 pandemic. In addition, Sutter County Black residents have the highest rate of hepatitis C, followed by other/multiracial, non-Hispanic white, Asian, and Hispanic (figure 2).

**Figure 2: Hepatitis C among Sutter County Residents, 2016-2020**



**Figure 2: Average Yearly Rates of Hepatitis C by Race/Ethnicity, 2016-2020**



**References:**

1. Center for Disease Control and Prevention. Hepatitis C. Accessed March 9, 2022. <https://www.cdc.gov/hepatitis/hcv/index.htm>
2. Centers for Disease Control and Prevention. Hepatitis C Questions and Answers for Health Professionals. Accessed May 25, 2022. <https://www.cdc.gov/hepatitis/hcv/hcvfaq.htm>
3. California Department of Public Health. Hepatitis C. Accessed March 9, 2022. <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/HepatitisC.aspx>
4. Table 3.6 of 2019 Viral Hepatitis Surveillance report | CDC. Accessed May 17, 2022. <https://www.cdc.gov/hepatitis/statistics/2019surveillance/Table3.6.html>
5. Viral Hepatitis Surveillance Data. Accessed May 17, 2022. <https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/ViralHepatitisData.aspx>

# COVID-19

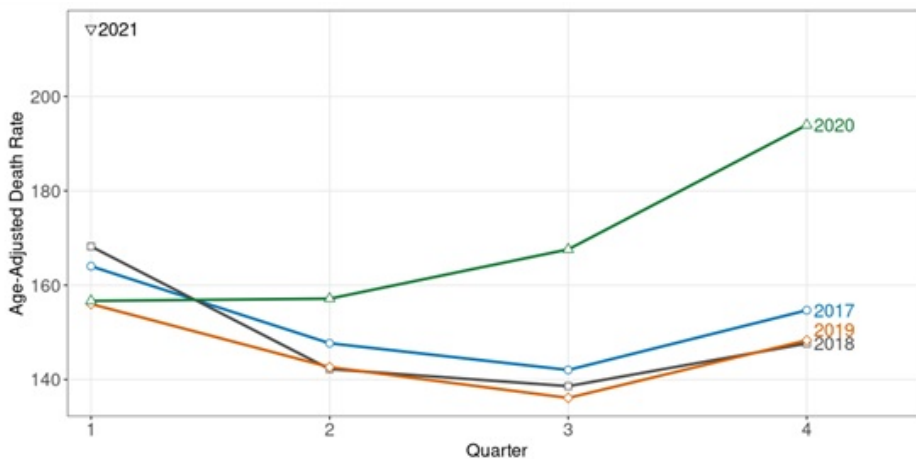
## Why It Is Important:

COVID-19 is a respiratory disease caused by SARS-CoV-2 (COVID-19), a coronavirus discovered in 2019, which is spread from person to person through airborne particles when an infected person coughs, sneezes, or talks (1). COVID-19 was declared a pandemic on March 12, 2020 by the World Health Organization and California issued a stay at home order on March 19, 2020 (2). A unique characteristic of COVID-19 was a large proportion of the infected population was asymptomatic, leading to more spreading of the disease (2). Symptoms range from mild to severe, with older adults and people with underlying medical conditions such as cardiovascular disease, diabetes, chronic respiratory disease, or cancer more likely to become severely ill or die (3).

## Those Most Affected:

In Sutter County, deaths rose by 9.3% in 2020, compared to 2019. COVID-19 was the fourth leading cause of death in 2020. The average age of death attributed to COVID-19 in 2020 was 76 years. The average length of stay for COVID-19 hospitalizations was 7.5 days. Starting December 2020, the COVID-19 vaccine became available. The vaccine was administered to residents through mass vaccinations clinics and community clinics.

Figure 1: All-Cause Death Rate by Quarter and Year, California 2017-2020 and Q1-2021



## Where We Are Now:

California deaths increased 15.9% in 2020, compared to 2019. The increase in deaths are mostly attributed to COVID-19 (4). Figure 1 shows the increased deaths in 2020, compared to 2017, 2018, and 2019. Also, there were differences in excess death by race in California: Hispanics (64.1%), Asian (21.8%), American Indian or Alaska Native (19.9%), Black (19.5%), Native Hawaiian and other Pacific Islander (19.4%), and White (7.5%) (4).

## References:

1. About COVID-19. Centers for Disease Control and Prevention. Accessed March 16, 2022. <https://www.cdc.gov/coronavirus/2019-ncov/faq.html#Basics>
2. Ciotti M, Ciccozzi M, Terrinoni A, Jiang WC, Wang CB, Bernardini S. The COVID-19 pandemic. *Critical Reviews in Clinical Laboratory Sciences*. 2020;57(6):365-388. doi:10.1080/10408363.2020.1783198
3. Coronavirus disease. World Health Organization. Accessed March 16, 2022. [https://www.who.int/health-topics/coronavirus#tab=tab\\_1](https://www.who.int/health-topics/coronavirus#tab=tab_1)
4. Chen YH, Glymour M, Riley A, et al. Excess mortality associated with the COVID-19 pandemic among Californians 18–65 years of age, by occupational sector and occupation: March through November 2020. Devleeschauwer B, ed. *PLoS ONE*. 2021;16(6):e0252454. doi:10.1371/journal.pone.0252454

# GONORRHEA

## Why It Is Important:

Gonorrhea is a common sexually transmitted disease (STD) that can have many of the same serious health consequences as gonorrhea, including damage to the reproductive system, serious health problems for babies born to women with untreated gonorrhea, and even infertility (1). Gonorrhea infections can also increase the risk of getting or transmitting HIV (1). Gonorrhea is curable with proper treatment, but it is becoming increasingly harder to treat due to emerging drug-resistant strains of the disease (1). Nationwide, gonorrhea cases increased 56% from 2015 to 2019 (2). In California, gonorrhea cases increased 47% from 2015 to 2018 (3).

## Where We Are Now:

Rates of gonorrhea infections appear to be lower in Sutter County compared to California and the US (Table 1). From 2016 to 2019, Sutter County has seen an overall increasing trend in gonorrhea infections; however, this rate dropped in 2020 (Figure 1). This decrease in gonorrhea infections in 2020 could be linked to a variety of factors, such as the improvements in the effectiveness of prevention strategies, and/or decreased STD screenings due to the COVID-19 pandemic. However, for Sutter County to continue experiencing reduced rates of infections, providing evidence-based prevention strategies and programs is essential.

Table 1: Gonorrhea Infections per 100,000 (2020)

California	Sutter County	United States
199.0	150.3	206.5

## Those Most Affected:

In Sutter County, gonorrhea is diagnosed almost equally among men and women (Figure 1). Unlike chlamydia, men with gonorrhea are more likely to have symptoms and thus get tested and diagnosed. Gonorrhea is also very common in younger people. In Sutter County 23% of all gonorrhea infections are diagnosed in people younger than 25 years, and 75% of all gonorrhea infections are diagnosed in people younger than 35 years (5). Black and non-Hispanic White Sutter County residents are also more likely to be diagnosed with gonorrhea (5).

Figure 2: Gonorrhea C among Sutter County Residents, 2016-2020

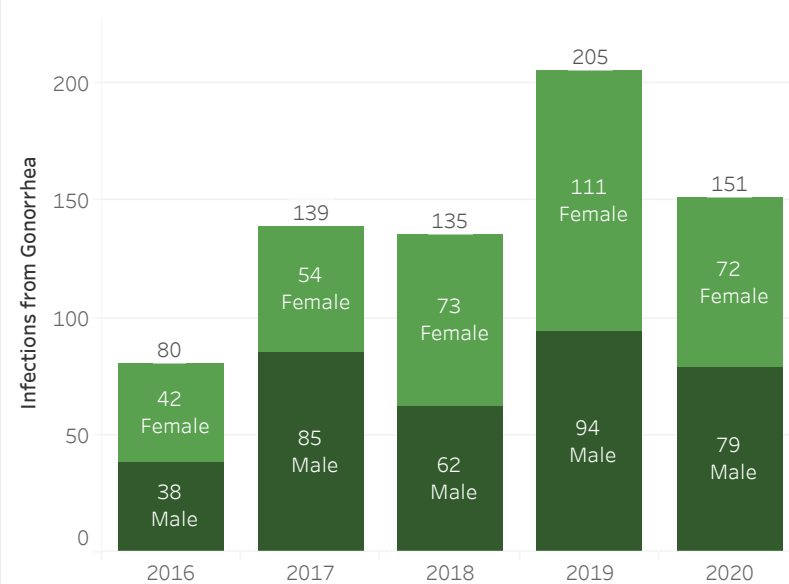
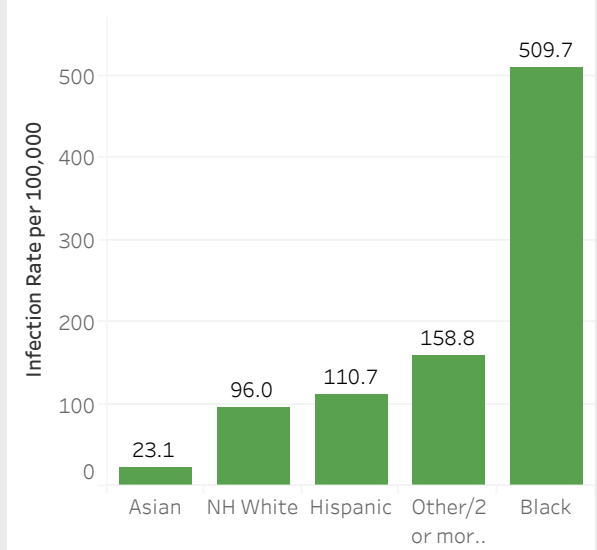


Figure 2: Average Yearly Rates of Gonorrhea by Race/Ethnicity, 2016-2020



## References:

1. STD Facts - Gonorrhea. Centers for Disease Control and Prevention. Published January 29, 2014. Accessed August 20, 2021. <https://www.cdc.gov/std/gonorrhea/stdfact-gonorrhea.htm>
2. Sexually Transmitted Disease Surveillance, 2019. Centers for Disease Control and Prevention. Published July 29, 2021. Accessed August 17, 2021. <https://www.cdc.gov/std/statistics/2019/default.htm>
3. All STDs Tables California, 2019. California Department of Public Health, STD Control Branch. Accessed November 22, 2021. <https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/2019-STD-Data-All-STDs-Tables.pdf>
4. Table 1. Sexually Transmitted Diseases - Reported Cases and Rates of Reported Cases, United States, 1941-2019. Centers for Disease Control and Prevention. Published April 12, 2021. Accessed August 17, 2021. <https://www.cdc.gov/std/statistics/2019/tables/1.htm>
5. Sutter County Health and Human Services - Public Health Branch. 2020. Title 17, California Code of Regulations (CCR) §2500, §2593, §2641.5-2643.20, and §2800-2812 Reportable Diseases and Conditions. Accessed August 17, 2021.

# SYPHILIS

## Why It Is Important:

Syphilis is a major public health issue in California and nationwide. Syphilis can affect the heart, brain, and other organs of the body (1). There are multiple stages of syphilis, including primary, secondary, latent, and tertiary (1). Syphilis can also be transmitted from mother to child, leading to congenital syphilis. Babies born with syphilis have serious health problems, including premature birth, low birth weight, birth defects, blindness, hearing loss, stillbirth, and death (1). Nationally, syphilis cases have increased 74% in 2019, compared to 2015 (2). In California, total early syphilis increased 63% and congenital syphilis increased 122% from 2015 to 2018 (3).

## Where We Are Now:

Syphilis has increased at an alarming rate in Sutter County (Figure 1). Syphilis diagnoses were 12 times higher in 2020, compared to 2016 (Figure 1). Furthermore, 2020 has been the highest year of reported syphilis diagnosis in Sutter County (5). Sutter County had 13.2 cases of primary and secondary syphilis per 100,000 residents in 2018, which is more than the US average (10.7 cases per 100,000 residents), but less than California (19.1 cases per 100,000 residents). However, there is significant growth in syphilis infections in Sutter County that must be addressed to prevent further cases.

Table 1: Syphilis Infections per 100,000 (2020)

California	Sutter County	United States
19.5	28.7	12.7

## Those Most Affected:

In Sutter County, Syphilis is diagnosed 1.5 times more frequently in men than women (5). Prior to 2017, syphilis was mostly diagnosed in men (5). In 2019, roughly 20% of women diagnosed with syphilis were pregnant (5). From 2016 to 2020, White and Hispanic residents were more likely to be diagnosed with syphilis, and about 66% of all syphilis diagnoses were in people aged 25-45 (5).

Figure 2: Syphilis among Sutter County Residents, 2016-2020

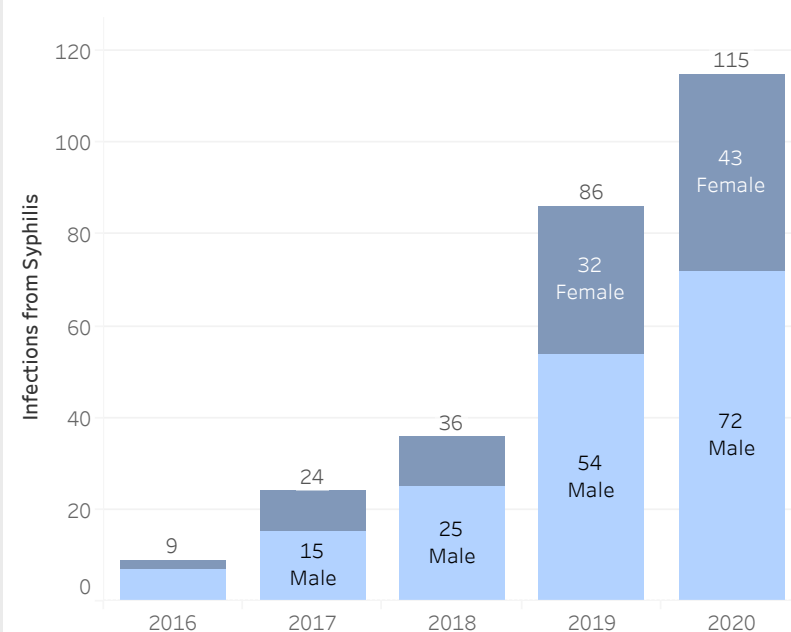
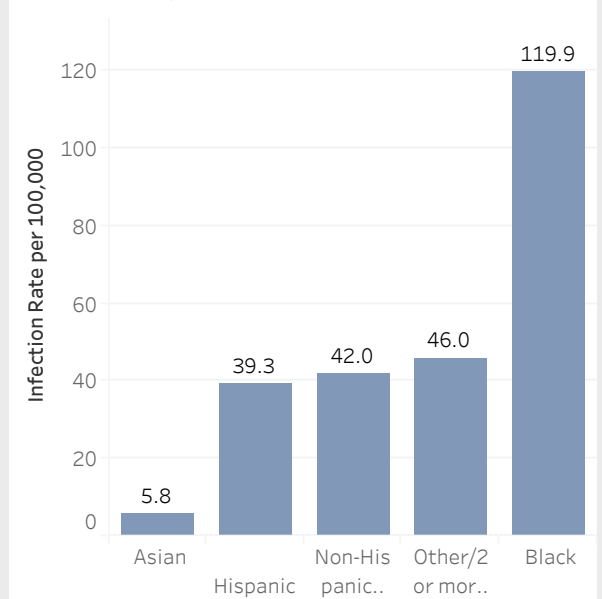


Figure 2: Average Yearly Rates of Syphilis by Race/Ethnicity, 2016-2020



## References:

1. STD Facts - Syphilis. Published November 26, 2019. Accessed June 28, 2021. <https://www.cdc.gov/std/syphilis/stdfact-syphilis.htm>
2. CDC. Sexually Transmitted Disease Surveillance, 2019. Centers for Disease Control and Prevention. Published April 13, 2021. Accessed June 28, 2021. <https://www.cdc.gov/std/statistics/2019/default.htm>
3. All STDs Tables California, 2019. California Department of Public Health, STD Control Branch. Accessed November 22, 2021. <https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/2019-STD-Data-All-STDs-Tables.pdf>
4. Table 1. Sexually Transmitted Diseases - Reported Cases and Rates of Reported Cases\*, United States, 1941-2019. Published April 12, 2021. Accessed July 29, 2021. <https://www.cdc.gov/std/statistics/2019/tables/1.htm>
5. Sutter County Health and Human Services - Public Health Branch. 2020. Title 17, California Code of Regulations (CCR) §2500, §2593, §2641.5-2643.20, and §2800-2812 Reportable Diseases and Conditions. Accessed August 17, 2021.

# TUBERCULOSIS

## Why It Is Important:

Tuberculosis (TB) is a lung infection caused by the *Mycobacterium tuberculosis* bacterium (1). TB is either *latent* or *active*. People with *latent* TB are infected, but the bacterium does not cause symptoms and is not contagious. Someone with *active* TB has symptoms and can spread the disease (1). TB is very debilitating and may be fatal. Treatment is difficult, taking up to 4 drugs per day, for up to 9 months. TB requires considerable work by a health department with each case requiring daily case management including directly-observed therapy to ensure patients with TB are managed properly, rendered non-infectious, and cured of their disease. Improperly treated TB can become drug resistant, making treatment more difficult and may lead to poor outcomes and increased mortality rates.

## Where We Are Now:

In 2019, Sutter County had a lower active TB case rate (3.9 infections per 100,000) than California (5.3 infections per 100,000).<sup>2</sup> However, Sutter County's case rate was almost 1.5 times the US average (2.7 infections per 100,000). Since 2016, tuberculosis infections in Sutter County have steadily decreased (Figure 1).

Table 1: Tuberculosis Infections per 100,000 (2020)

Californ..	Sutter County	United States
5.1	3.6	2.2

## Those Most Affected:

In Sutter County, TB is diagnosed more frequently in women than men; from 2016 to 2020, roughly 58% of all TB cases (both active and latent) were among women (5). Active TB is usually reactivated from latent TB patients. In addition, 42% of all TB diagnoses were among Asian residents, which is highlighted in Figure 2. There is a higher prevalence of TB in those born outside the United States. From 2016-2020, Asians were most affected by tuberculosis, followed by Blacks, Hispanics, Whites, and other/multiracial residents.

Figure 2: Active vs. Latent TB among Sutter County Residents, 2016-2020

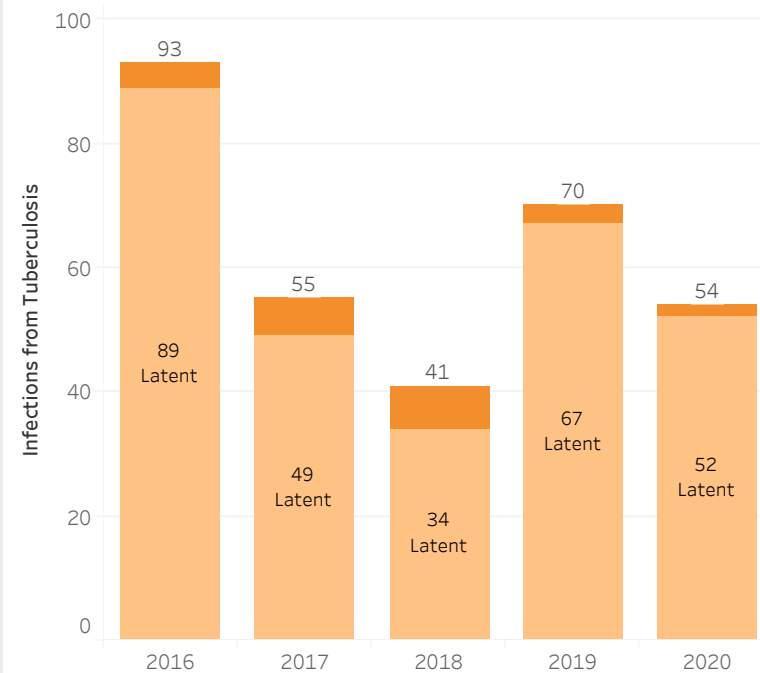
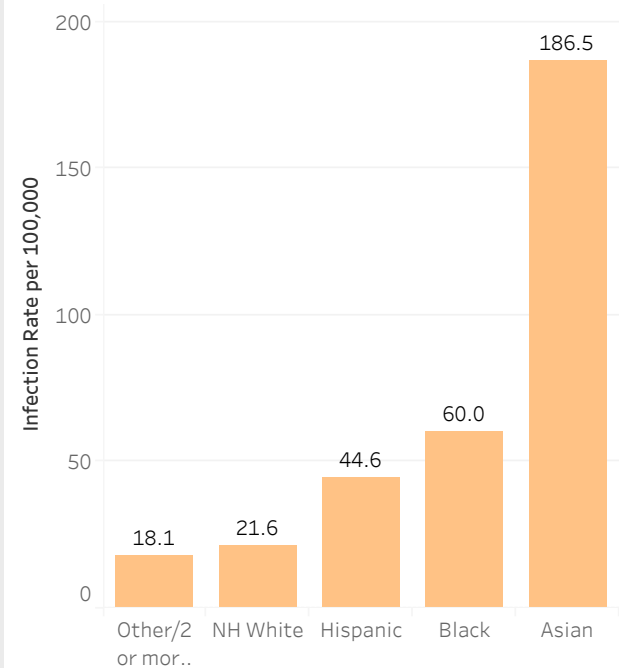


Figure 2: Average Yearly Rates of Tuberculosis by Race/Ethnicity, 2016-2020



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# HEALTH RISK FACTORS AND HEALTH INDICATORS



Courtesy of the California History Room, California State Library, Sacramento, California

# HEALTH RISK FACTORS/ HEALTH INDICATORS

## Health Risk Factors:

Health risk factors are the behaviors, characteristics, or exposures that increase the likelihood of a person developing a disease or health problem. They encompass many factors including a lack of physical activity, tobacco use, poor nutrition, homelessness, and adverse childhood experiences. Some risk factors are controllable while other risk factors are not. Having a risk factor does not always mean that a person will develop a given health problem, however, understanding these risk factors and identifying where they exist within the community is a vital component in health promotion and disease prevention.

## Health Indicators:

Health Indicators are measures that help provide a snapshot of the overall health of a population and the performance of the health system. These indicators help compare health outcomes in our community to those in California and to those in the United States. They provide an actionable assessment of community health and help identify which resources and efforts to prioritize to improve the health and well-being for all people in Sutter County. Health indicators may include measures such as life expectancy at birth, deaths from all causes, heart disease death rates, unintentional injuries, cancer death rates, and chronic lower respiratory disease death rates, among others.

## The following health risk factors/ health indicators will be discussed in this dashboard:

1. Adverse Childhood Experiences (ACEs)
2. Deaths from All Causes
3. Mental Health
4. Nutrition and Access to Healthy Foods
5. Life Expectancy at Birth
6. Oral Health
7. People Experiencing Homelessness
8. Physical Activity
9. Tobacco Use



## What We Are Doing:

The Sutter County Public Health branch provides prevention and intervention strategies that target health risk factors through various programs. The Sutter County Health Education and Promotion Unit provides outreach and education to community members to decrease tobacco use and promote physical activity, healthy eating, and increase access to dental care and improve oral health in Sutter County. The Homeless Services Unit provides outreach, case-management, and housing navigation to assist vulnerable individuals who are experiencing homelessness in Sutter County. In addition, Sutter-Yuba Behavioral Health and the Prevention and Early Intervention program aim to address and increase access to care for mental health services, substance use problems, and adverse childhood experiences. Also, the Maternal Child Adolescent Health Unit provides home visiting and outreach to address ACEs. In order to increase the health and well-being of our community it is essential to continue to provide effective health interventions and programs that target the risk factors that contribute to the development of disease and other health problems.

# ADVERSE CHILDHOOD EXPERIENCES

## Why It Is Important:

Adverse Childhood Experiences (ACEs) are the exposure to potentially traumatic events such as abuse, neglect, domestic violence, household instability, and parental mental illness or substance misuse during childhood (1). The toxic stress from ACEs can affect brain development, it can change children's hormonal and immune systems and can lead to behavioral problems, learning difficulties and physical health issues (2). Exposure to ACE's are also linked to mental health issues, substance use problems and increase the risk of developing 9 out of 10 leading causes of death in the U.S (3). ACEs are preventable- creating and sustaining safe, stable, nurturing relationships and environments for all children helps to prevent ACE's and ensure children can reach their full health and life potential (4).

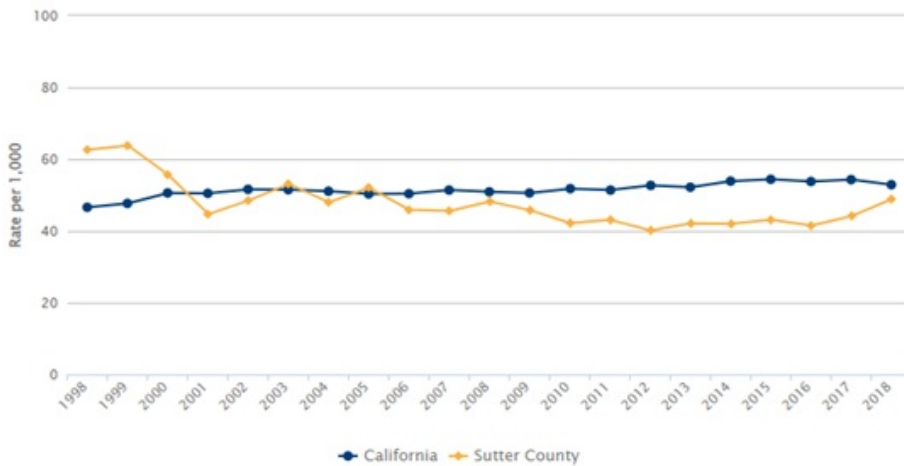
## Where We Are Now:

Complex family stressors including poverty, unemployment, divorce and untreated mental health and substance use disorders are contributing factors. Nationally, White children are less likely to have ACEs than Hispanic or Black children (6). ACEs are more prevalent among children in low-income families with 62% of children with family incomes under 200 percent of the federal poverty level having at least one ACEs (6).

**Figure 1: Child Abuse and Neglect in Sutter County and California (1998-2018)**

### Reports of Child Abuse and Neglect

Year(s): 1998 to 2018



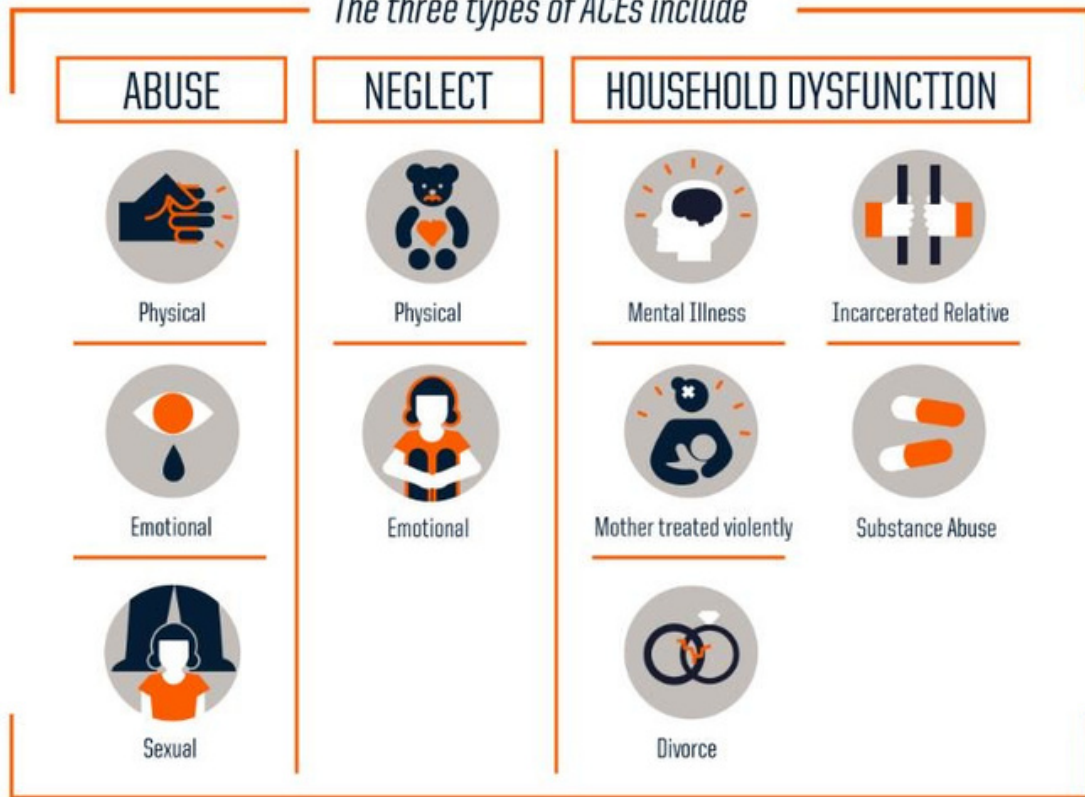
	Sutter	California
1-3 ACEs	45%	46%
4 or more ACEs	15%	16%

## References:

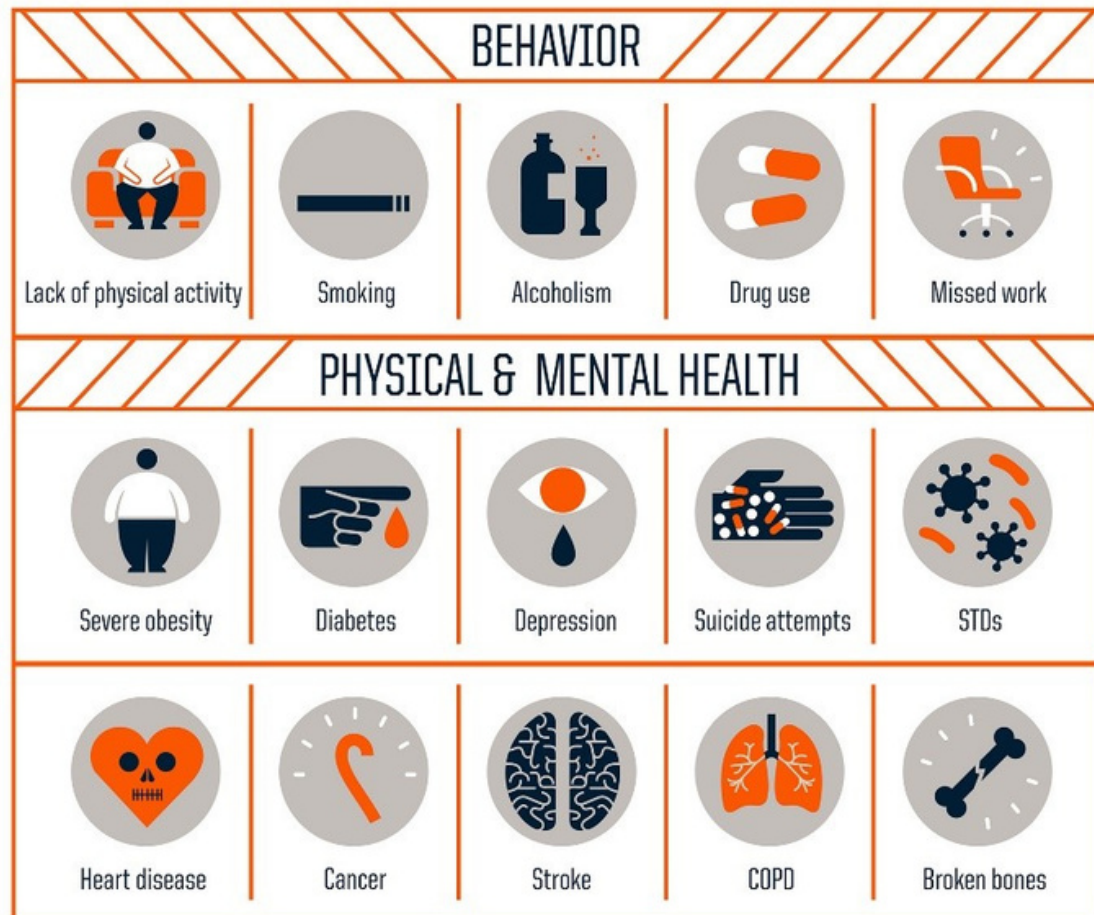
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5. Let's Get Healthy California, Reversing Adverse Childhood Experiences. Accessed March 23, 2022. <https://letsgethealthy.ca.gov/goals/healthy-beginnings/adverse-childhood-experiences/>
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# Adverse Childhood Experiences

The three types of ACEs include



## Possible Risk Outcomes



# DEATHS FROM ALL CAUSES

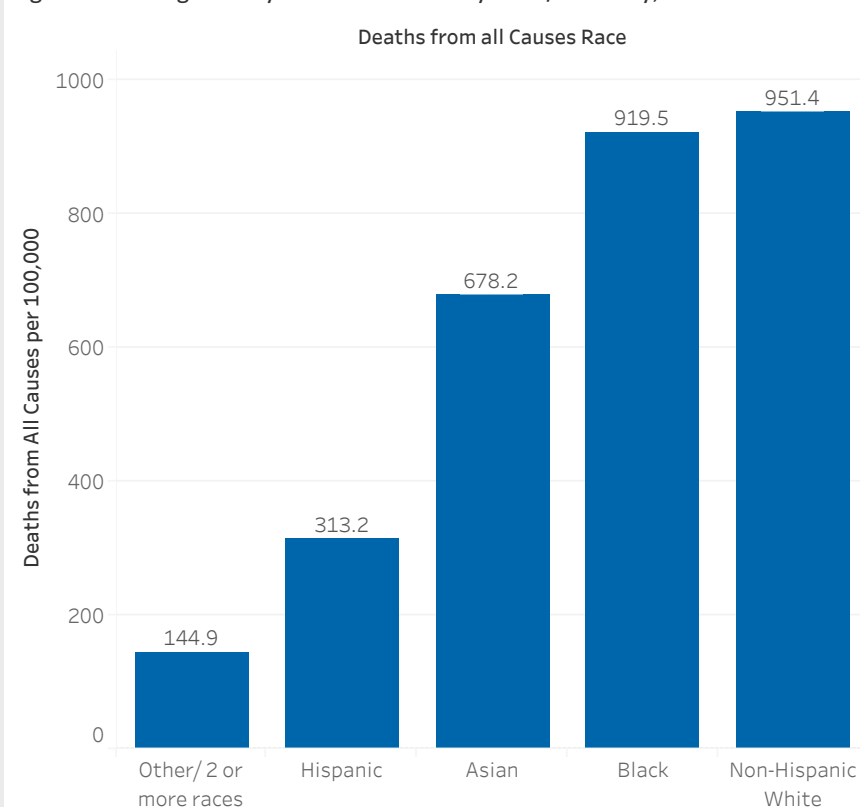
## Why It Is Important:

Deaths from all causes is the total number of deaths per year. It is another method to sum the many factors that influence health and wellness into one number. The lower the number of deaths per year, the healthier the population. Nationwide, deaths from all causes were on a steady decline from 2017 to 2019 (1,2). However, provisional estimates show that there was a 17.7% increase in the number of deaths in 2020 compared with 2019 (3). These estimates indicate that COVID-19 was the third leading cause of death in the US in 2020 and was largely responsible for the substantial increase in total deaths from 2019 to 2020. However, large increases in deaths also occurred for several other leading causes in 2020, such as heart disease, diabetes, unintentional injuries, and Alzheimer's disease (4).

## Where We Are Now:

Sutter County has a higher rate of deaths from all causes than either the US or California (Table 1). Many of the same factors that reduce life expectancy at birth in Sutter County also increase the death rate. These include lower access to quality medical care, higher rates of tobacco use, lack of physical activity, and unhealthy diet. From 2016 to 2020, an average of 859 Sutter County residents died each year (Figure 1). There was a notable spike in deaths in 2020, a 10.6% increase from the previous year, that can be largely attributed to COVID-19.

Figure 1: Average Yearly Rates of Deaths by Race/Ethnicity, 2016-2020



## Those Most Affected:

The average age at death for Sutter County residents from 2016 to 2020 was 73 years (2). The top 5 causes of death in Sutter County (listed from highest to lowest) are heart disease, cancer, cerebrovascular disease, chronic lower respiratory disease, and unintentional injuries (6). Figure 1 shows the average death rates from 2016-2020; Non-Hispanic Whites have the highest death rate, and 2 or more races/other and Hispanic have the lowest death rate (6).

Table 1: Death Rates per 100,000 in 2020

	California	Sutter County	US
	705.3	811.6	835.4

## References:

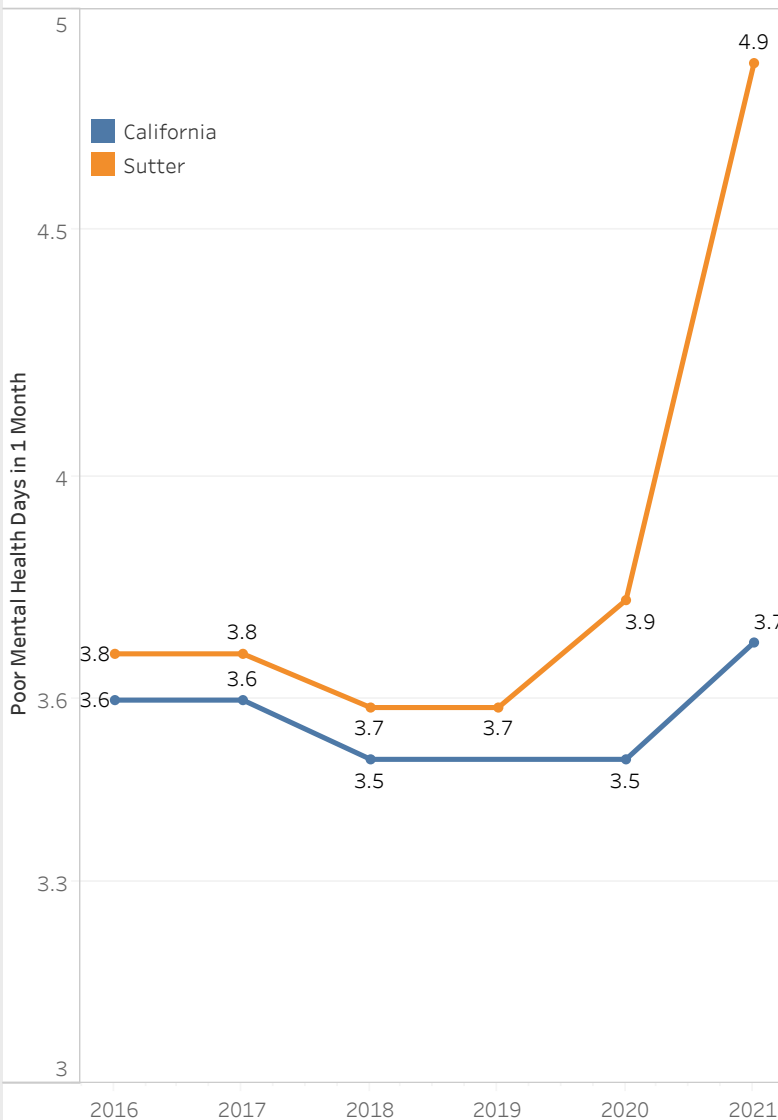
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# MENTAL HEALTH

## Why It Is Important:

Mental health encompasses our total social, emotional, and psychological well-being and is a critical part, along with physical health, in achieving and maintaining optimal wellness (1). Persons living with mental illness are at greater risk for substance use disorders, cardiovascular disease, and other chronic diseases. Furthermore, 20% of people experiencing homelessness and 70% of youth in the juvenile justice system live with a mental health condition. Globally, lost productivity due to depression and anxiety alone costs \$1 trillion every year (2).

**Figure 1: Poor Mental Health Days in one Month (2016-2021)**



## Where We Are Now:

Each year 1 in 5 Americans experiences a mental health condition, with 17% of youth ages 6 to 17 living with a mental health disorder (2). California suicide rate is 10.7 per 100,000 residents, which is lower than the United States rate (14 per 100,000 residents) (3). In 2021, Sutter County residents reported experiencing overall more poor mental health days in the past 30 days (4.9) compared to both California (3.7) and the U.S. (3.8) (4). Poor mental health days is measured by taking an average of mentally unhealthy days among residents in the past 30 days.

## Those Most Affected:

16% of Sutter County residents reported experiencing more frequent mental distress, chronic and likely severe mental health issues, compared to California (11%) (4). Receiving services and treatment is an important component to recovery for those experiencing the signs and symptoms of mental illness, however Sutter County was designated as a mental health professional shortage area, making access to services difficult (5). In 2020, Sutter County's mental health provider ratio was 300 patients to 1 mental health provider, which is worse than the California average (280 patients to 1 provider) (4).

### References:

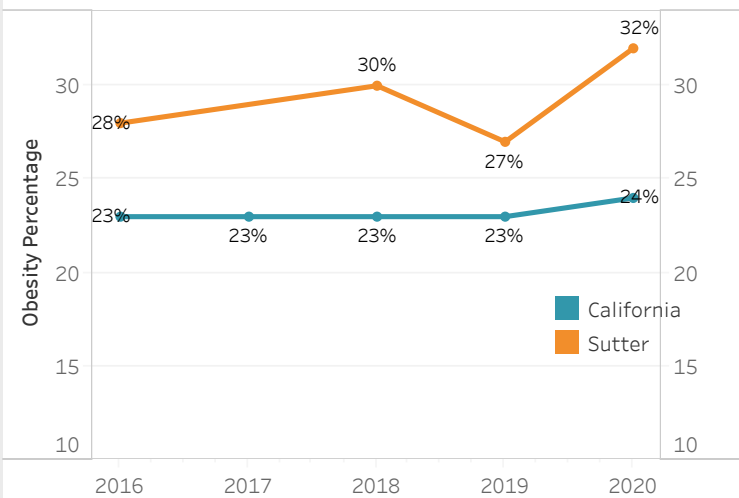
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2. Facts and Statistics California. National Alliance on Mental Illness. March 15, 2022. <https://namica.org/what-is-mental-illness/facts-statistics/>
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# NUTRITION AND FOOD ACCESS

## Why It Is Important:

Good nutrition is essential in maintaining health and well-being across the lifespan. People with healthy nutrition and eating patterns live longer and are at a lower risk of developing serious health problems. Healthy nutrition is not just an individual problem, it is largely influenced by where we live and having access to sufficient and affordable food for a healthy life. Research has shown that communities with low access to healthy affordable foods and high concentrations of fast-food outlets and relatively high-priced convenience stores have higher rates of obesity, diabetes, and other health problems (1).

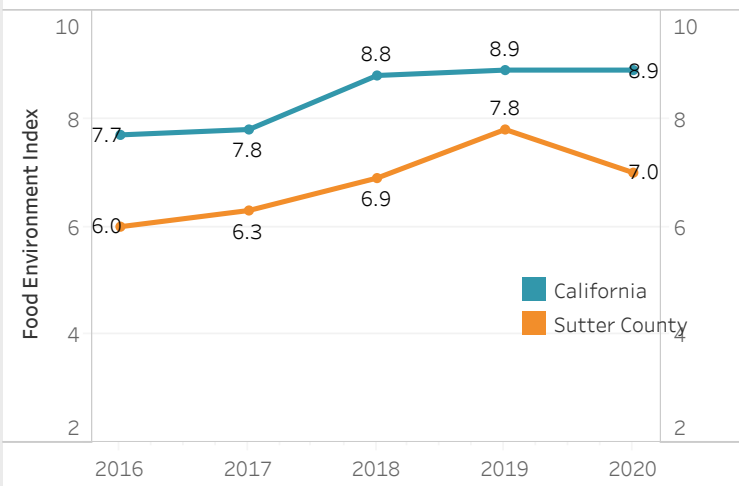
**Figure 2: Obesity Prevalence of Sutter County and California (2016-2020) (4)**



## Where We Are Now:

In 2019, 56.9% of Sutter County residents had low access to healthy foods (3). The Food Environment Index measures food access by assessing residents proximity to healthy foods and income levels within a defined area. Figure 1 shows that Sutter County has a Food Environment Index score of 7.1, which is lower than California (8.8) and the U.S. (8.7) (4), indicating that residents in Sutter County have less opportunities and face barriers in making healthy food choices compared to the state and nationwide. Low access to healthy foods may be a contributing factor in higher obesity rates in Sutter County (30%) than the state average (24%), as well as high chronic disease rates in our community (4).

**Figure 1: Food Environment Index for Sutter County and California (2016-2020) (4)**



## Those Most Affected:

Residents living in low-income, rural, and minority communities are more likely to experience poor food access to the healthy foods. In addition, in 2019, 13.9% of Sutter County residents experienced food insecurity, or the lack of access, at times, to enough food for an active and healthy life, compared to both California and the US (10.2%) (6). The California CalFresh Healthy Living Program builds partnerships with various community organizations to provide outreach, nutrition education classes, and works to improve upon the policies, systems, and environmental conditions that impact the health and well-being of Sutter County residents.

## References:

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# LIFE EXPECTANCY AT BIRTH

## Why It Is Important:

Life expectancy at birth is roughly how long a group of infants would live based on their shared experiences (1). It's a method to sum the many factors that influence health and wellness into one number. The higher the average life expectancy at birth, the healthier the population. Life expectancy can be affected by several factors, such as living standards, education, lifestyle, and healthcare services (2).

## Where We Are Now:

The average life expectancy at birth in Sutter County is 78.9 years. This is comparable to the national average of 78.8 years but is lower than California at 81.7 years. The average life expectancy differs greatly based on where a person lives in Sutter County, with the lowest life expectancy rates (72.9 years) for babies born in Yuba City in the area bounded by CA-20, CA-99, Queens Avenue and Market Street.

## Those Most Affected:

In Sutter County, on average, Hispanic residents have the highest life expectancy at 86.2 years, followed by Asian residents (85.7 years), Black residents (78.2 years), and White residents (76.0 years). Overall, women lived longer than men in Sutter County, California, and the United States (Female: 80.8 years, Male: 77.2 years) (5).

Figure 1: Sutter County Life Expectancy by Race (2017-2019)

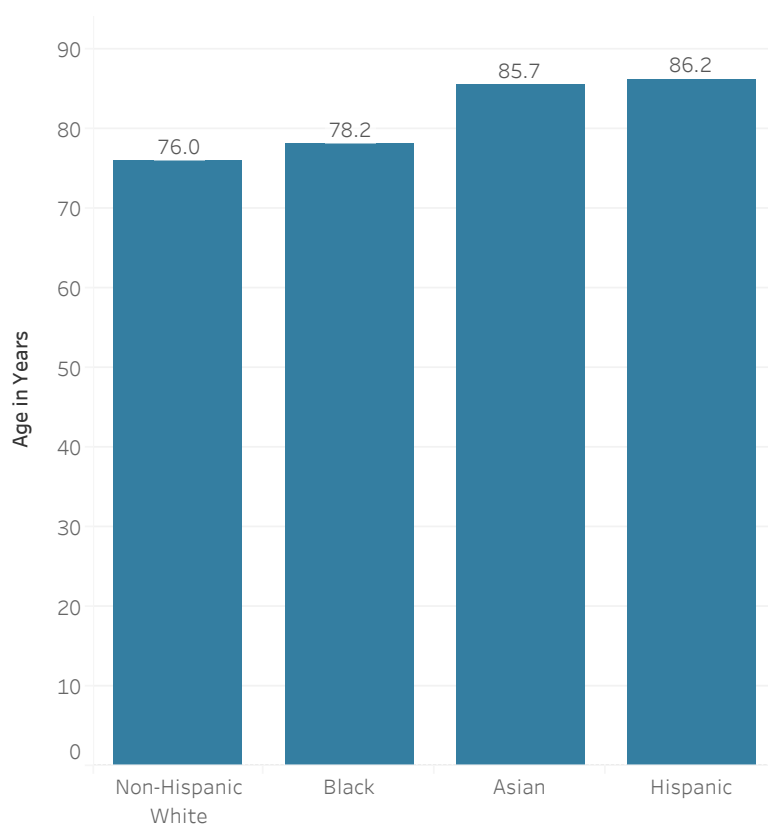
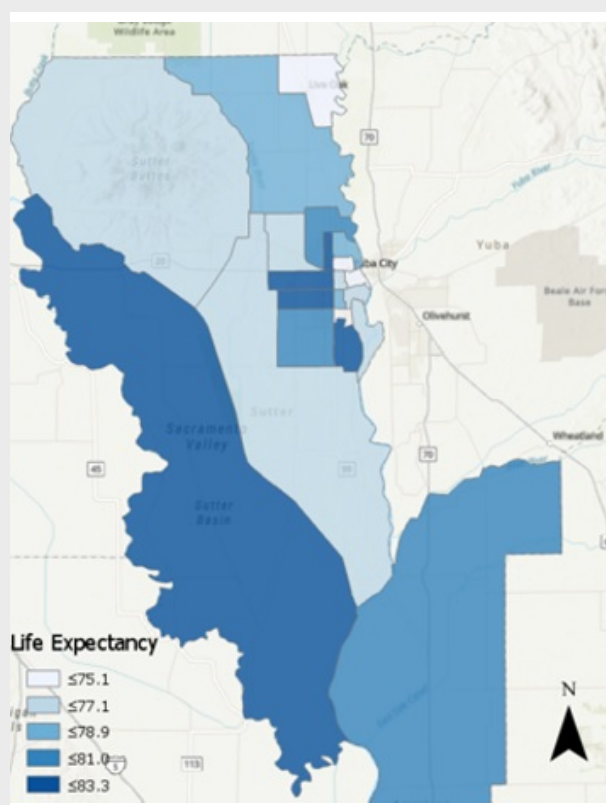


Figure 2: Sutter County Life Expectancy Map (2019)



## References:

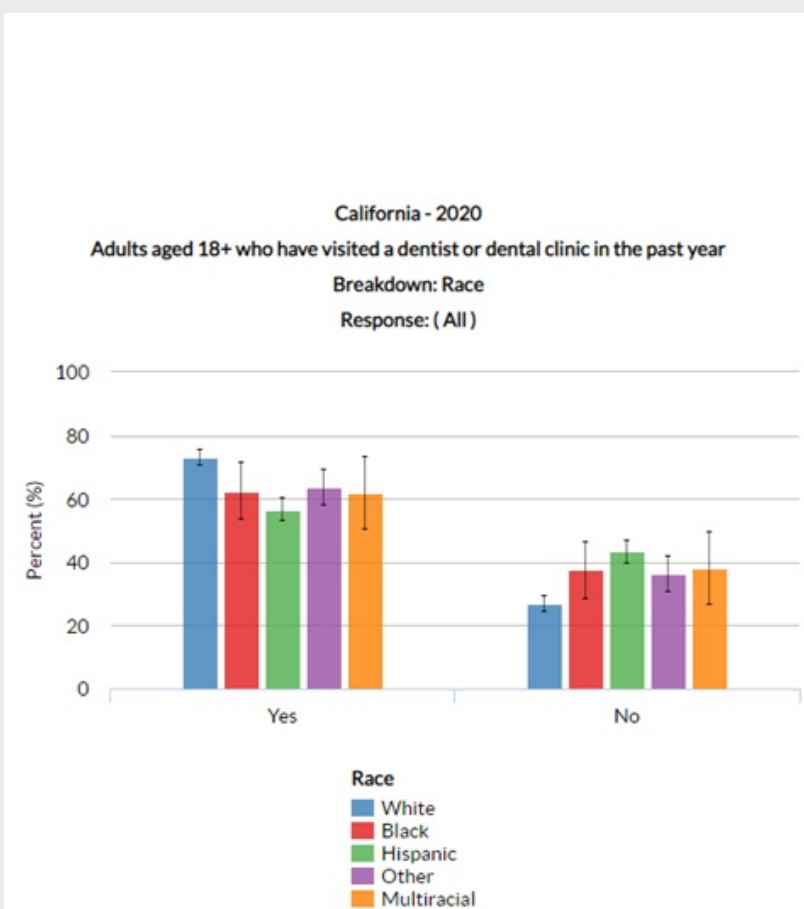
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# ORAL HEALTH

## Why It Is Important:

Oral health is an essential component of general health and well-being for all ages and can affect the ability to eat, smile, show emotions, and communicate effectively (1). Oral health is much more than healthy teeth, it encompasses the health of the entire mouth including the throat, tongue, lips, salivary glands, and jaw. The three oral health conditions that most affect overall health and quality of life are cavities, severe gum disease, and severe tooth loss (1). Factors that contribute to poor oral health and gum disease include tobacco use, sugar consumption, alcohol and substance use, and poor oral hygiene. Poor oral health is also associated with other chronic diseases such as diabetes and heart disease (2).

**Figure 1: Visited a Dentist in the Past Year in California (2020)**



Data Source: Behavioral Risk Factor Surveillance System(BRFSS)

## Where We Are Now:

In the United States one in four adults aged 20 to 64 have cavities (1). Also, 66.7% of individuals in the United States have visited a dentist or dental clinic in 2020, compared to 67.4 in California (2). In California, White residents are more likely to visit a dentist in 2020 (73.2%), compared to Other (63.8%), Black (62.5%), Multiracial (61.9%), and Hispanic (56.7%) (3).

## Those Most Affected:

Children from low-income families are twice as likely to have cavities as children from higher-income families (1). Sutter County has a dental provider to patient ratio of 1,330 patients for every 1 provider, which is lower than both California (1,150:1) and the U.S. (1,210:1) (4). Furthermore, 21% of Sutter County Health and Well-Being Survey respondents reported needing dental care in the last year but were unable to receive it, further demonstrating the need for increased oral health provider access and resources in the community.

## References:

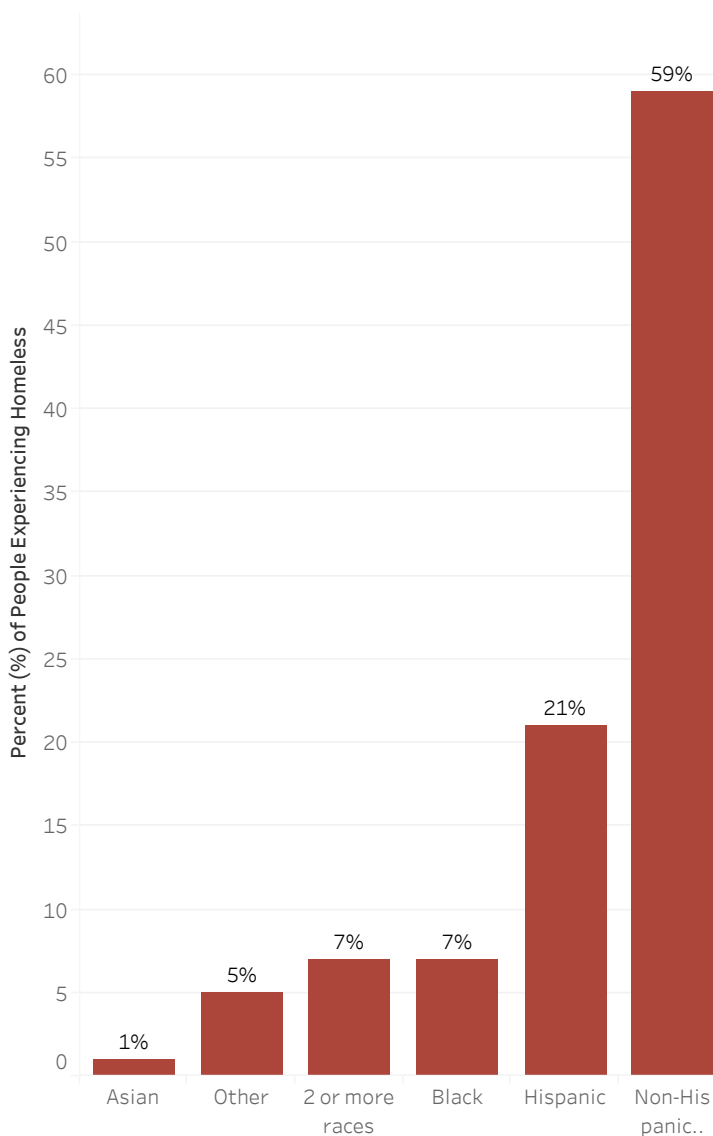
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# PEOPLE EXPERIENCING HOMELESSNESS

## Why It Is Important:

Homelessness is defined as not having a regular nighttime residence and staying in a public or private place not meant for human habitation; or a publicly- or privately- operated shelter (1). Individuals experiencing homelessness are at a significantly higher risk of developing chronic illnesses, communicable diseases, substance use disorders and becoming victims of violence. People experiencing homelessness are also more likely to be hospitalized and stay longer in the hospital (2).

**Figure 1: Sutter County's Homeless Population by Race/Ethnicity (2021)**



## Where We Are Now:

Between 2019 and 2020 homelessness has increased both in California (6.8%) and nationwide (2%) (3). Homelessness in Sutter County has doubled since 2007, with the largest increase in homelessness between 2009 and 2011, after the 2008-2009 Great Recession (4). In 2021, 371 people were homeless in Sutter County based on the Point In Time Count (PIT), a count of all unsheltered and sheltered people experiencing homelessness in Sutter County conducted yearly by the [Sutter-Yuba Homeless Consortium](#).

## Those Most Affected:

People experiencing homelessness in Sutter County are more likely to have substance use problems, mental and behavioral health conditions, physical disabilities or chronic medical conditions than Sutter County residents who are housed. Non-Hispanic White residents in Sutter County are more likely to be homeless than people from any other race or ethnic group (Figure 1). These differences may partially be explained by stronger family and community support structures among the Hispanic and Asian populations in Sutter County. The Sutter County Homeless Services program provides outreach, case management, advocacy, and housing navigation to those experiencing homelessness in Sutter County to address health problems and barriers to housing.

## References:

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# PHYSICAL INACTIVITY

## Why It Is Important:

Physical activity is important in building and maintaining health. Active people generally live longer and are at less of a risk of developing health problems such as heart disease, type 2 diabetes, obesity, and some cancers. People who are insufficiently active have a 20-30% increased risk of death compared to those who are sufficiently active (1). Only half of US adults get the physical activity they need to help prevent chronic illnesses, which contributes to the \$117 billion in annual health care costs associated with inadequate physical activity (2). Increasing physical activity is a larger societal issue, not just an individual problem; therefore, creating more opportunities for people to access programs and places for physical activity and safe routes to walk, run, bike or move is essential.

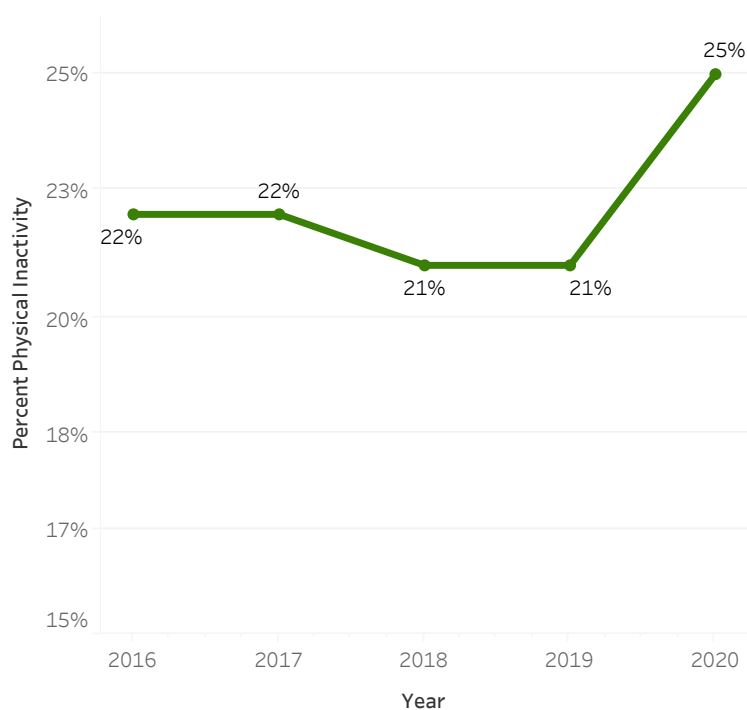
## Where We Are Now:

The Center for Disease Control and Prevention recommends children and adolescents participate in 60 minutes or more of physical activity per day and adults participate in either 150 minutes of moderate physical activity or 75 minutes of vigorous physical activity per week. In 2020, more Sutter County adults (25%) reported physical inactivity compared to California (18%) (5). Youth in Sutter County are more active than the State average, but older youth (12-17 year-olds) are much less active than younger youth (5-11 year-olds).

## Benefits to regular and adequate physical activity include:

- Reduces the risk of hypertension, coronary heart disease, stroke, diabetes, breast and colon cancer, depression and the risk of falls;
- Improves bone and functional health; and
- Critical in achieving and maintaining a healthy weight.

Figure 1: Percent Physical Inactivity (2016- 2020)



## Those Most Affected:

Low-income communities are the most affected by the lack of access to physical activity and exercise opportunities due to the lack of no-cost or low-cost sporting activities/fitness classes and lack of public transportation, insufficient sidewalks, bike lanes and paved shoulders to access these activities. In 2020, 67% of Sutter County residents had adequate access to exercise compared to California (93%) and the U.S. (91%)(3). To address physical inactivity in Sutter County the California CalFresh Healthy Living Program provides physical activity education throughout the community by promoting opportunities to sit less and move more through games and interactive learning activities, distributing physical activity promotion marketing materials, and attending key community events to spread the word on the benefits of regular physical activity and strategies to get moving.

## References:

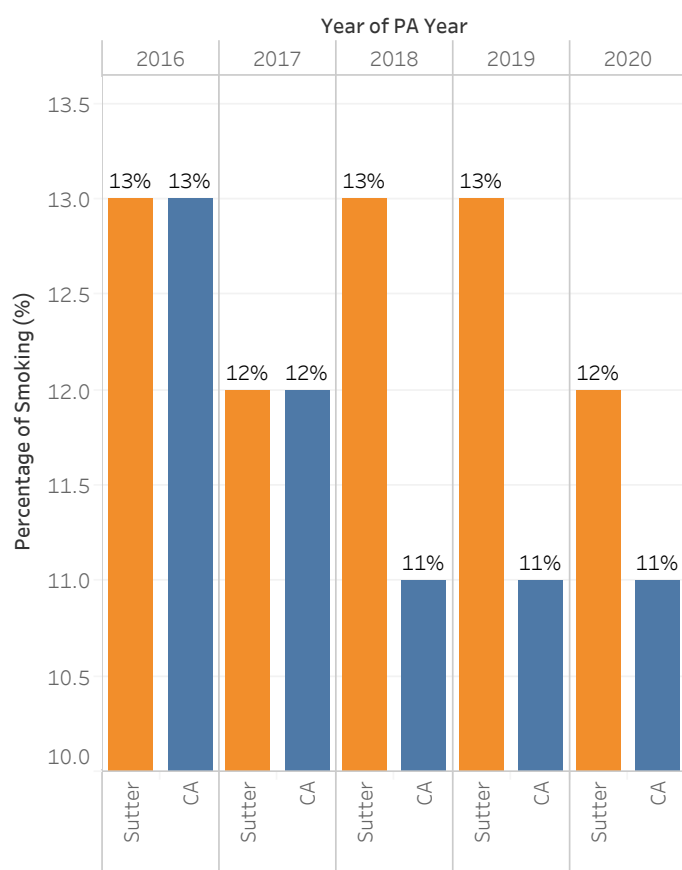
1. Global Strategy on Diet, Physical Activity, and Health. World Health Organization. Accessed March 10, 2022. from <http://www.who.int/dietphysicalactivity/pa/en/>
2. Physical Activity. Center for Disease Control and Prevention. Accessed March 10, 2022. <https://www.cdc.gov/physicalactivity/about-physical-activity/why-it-matters.html>
3. The Trust for Public Land. Yuba City. 2021. Accessed March 3, 2022. From [Yuba City, California | Trust for Public Land \(tpl.org\)](https://www.yubacity.org/Trust-for-Public-Land-tpl.org)
4. California. County Health Rankings and Roadmaps. Accessed March 22, 2022. <https://www.countyhealthrankings.org/app/california/2017/rankings/sutter/county/outcomes/overall/snapshot>

# TOBACCO USE

## Why It Is Important:

Tobacco use includes cigarettes, cigars, cigarillos, pipes, hookahs, smokeless tobacco and electronic devices or vaping. Tobacco use is a major risk factor for multiple chronic diseases, including cancer, heart disease, stroke, diabetes and chronic lower respiratory disease. On average, smokers' die 10 years earlier than non-smokers (1). More than 16 million Americans are living with a disease caused by smoking and more than 480,000 Americans die every year from tobacco related diseases (1). It is estimated that 90% of adult smokers begin their addiction as teenagers or earlier (2). The nicotine in tobacco products, including e-cigarettes, can rewire the developing brain and can escalate anxiety, mood swings, and learning difficulties. Young people are more vulnerable to the consistent presence of tobacco products in their environment, including offers from peers, exposure to secondhand tobacco smoke and e-cigarette vapor, and predatory marketing by the tobacco industry. Tobacco companies target youth by flavoring, packaging, and pricing it similar to candy. One third of underage experimentation with smoking can be attributed to tobacco industry advertising, putting youth at risk for lifelong tobacco addiction (3).

**Figure 1: Smoking Rates in Sutter County and California (2016-2020) (4)**



## Where We Are Now:

Overall, adult tobacco use is decreasing in California. Figure 1 shows a decline from 2016 (16.5% adult tobacco use) to 2019 (13.1%) (7). According to the 2021 National Youth Tobacco Survey, about 2.55 million U.S. middle and high school students reported current (past 30-day) use of a tobacco product, with e-cigarette use most common (6). Compared to the U.S., California high school students have lower reported smoking and e-cigarette use. Students who identified as LGBTQ had higher rates of overall tobacco use than those who do not identify with this group (6).

## Those Most Affected:

On average Sutter County has higher adult smoking rates than California (Figure 1) (4). Additionally, Sutter County received an overall failing grade on the 2021 State of Tobacco Control Report based on categories such as smoke free outdoor air, smoke free housing, reducing sales of tobacco products and emerging issues like restricting sales of flavored tobacco products (5). The Sutter County Tobacco Control Program aims at reducing smoking rates, increasing awareness of the health risks of tobacco use, and addressing the policy, systems, and environmental changes necessary to decrease tobacco use and exposure in Sutter County.

## References:

- Centers for Disease Control and Prevention. 2019. *Smoking and Tobacco Use: Fast Facts*. Accessed December 12, 2019. [https://www.cdc.gov/tobacco/data\\_statistics/fact\\_sheets/fast\\_facts/index.htm](https://www.cdc.gov/tobacco/data_statistics/fact_sheets/fast_facts/index.htm).
- Campaign for Tobacco Free Kids. Youth Initiatives. Accessed March 10, 2022. <https://www.tobaccofreekids.org/what-we-do/youth-programs>
- 2012 Surgeon General's report on "Preventing Tobacco Use Among Youth". [https://www.cdc.gov/tobacco/data\\_statistics/sgr/2012/index.htm](https://www.cdc.gov/tobacco/data_statistics/sgr/2012/index.htm)
- California. County Health Rankings and Roadmap. Accessed March 10, 2022. 2. 2012 Surgeon General's report on "Preventing Tobacco Use Among Youth". [https://www.cdc.gov/tobacco/data\\_statistics/sgr/2012/index.htm](https://www.cdc.gov/tobacco/data_statistics/sgr/2012/index.htm)
- American Lung Association. 2021. California Local Grades by County. Accessed March 7, 2022. [Sutter County \(lung.org\)](https://www.lung.org)
- CDC Newsroom. Center for Disease Control and Prevention. March 10, 2022. <https://www.cdc.gov/media/releases/2022/p0310-student-tobacco-products.html>
- Adult Cigarette and Tobacco Use Prevalence - California Health and Human Services Open Data Portal. Accessed March 24, 2022. <https://data.chhs.ca.gov/dataset/adult-cigarette-and-tobacco-use-prevalence>

# MATERNAL AND CHILD HEALTH



Courtesy of the California History Room, California State Library, Sacramento, California

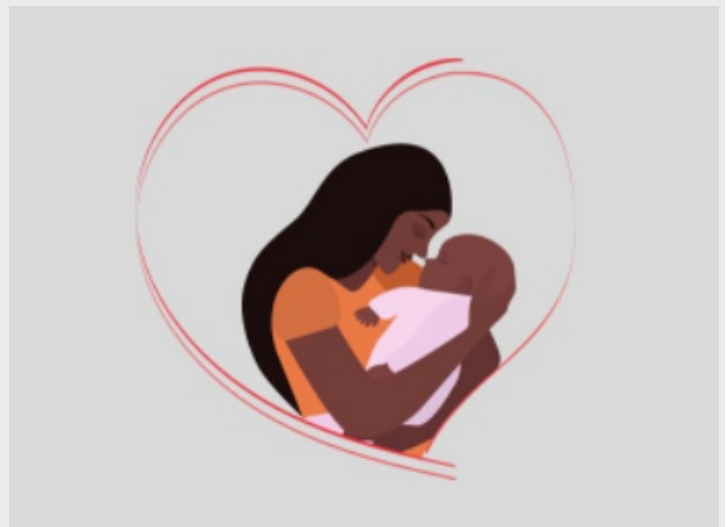
# MATERNAL AND CHILD HEALTH

## Why It Is Important:

Maternal health refers to health during pregnancy, childbirth, and the postnatal period. Maternal health influences health outcomes for the next generation and can help predict future public health challenges for families, communities, and the health care system as a whole (1). Maternal health is largely influenced by the social determinants of health, including access to health care, early intervention services, education, employment, income, and available resources. Not all members of the community have the same opportunities to access the health care resources vital to optimal maternal health. Women receiving no prenatal care are five times more likely to have a pregnancy related death than those who receive prenatal care and 25% of all U.S. women start care late in pregnancy or do not receive the recommended number of prenatal visits (2), a contributing factor to poor maternal health outcomes.

## The following will be discussed in this dashboard:

1. Perinatal Mood Disorders and Anxiety Disorders
2. Breastfeeding
3. Infant Mortality Rate



## What We Are Doing:

The Sutter County Public Health Maternal, Child and Adolescent Health (MCAH) and Womens, Infants, and Childrens (WIC) programs work to promote and improve maternal health and well-being in the community. These programs work to increase access to resources, provide breastfeeding and nutrition education, reproductive health services, safe-sleeping information, increase access to early prenatal care and conduct home visiting programs to Sutter County residents, targeting those who are at increased risk of adverse health outcomes. Providing these services and addressing the needs of the community is the first step in improving maternal health and preventing future illness and negative health outcomes in Sutter County.

## References:

1. Maternal, Infant, and Child Health. Healthy People 2020. Accessed April 20, 2022. [Maternal, Infant, and Child Health | Healthy People 2020](#)
2. Maternal Health in the United States. Maternal Health Task Force. Accessed April 20, 2022. [Maternal Health in the United States – Maternal Health Task Force \(mhtf.org\)](#)

# PERINATAL MOOD AND ANXIETY DISORDERS

## Why It Is Important:

Mood and anxiety disorders are the number one complication of childbirth. If untreated during pregnancy, perinatal mood and anxiety disorders can cause high fetal stress levels and lead to adverse birth outcomes such as preterm birth, low birth rate, small head circumference, and low Apgar score (Apgar scores indicate how well a child is doing immediately after birth). During the postpartum period, mental health disorders can negatively affect bonding, which may lead to developmental delays and behavioral problems as the child ages.

**Table 1: Depressive Symptom and Mood Disorder Hospitalization Rates per 1,000 (2013-2015)**

Location	Mood Disorder Hospitalizations per 1,000	Post Partum Depressive Symptoms per 1,000	Prenatal Depressive symptoms per 1,000
California	11.1	135.0	141.0
Sutter	14.0	121.0	122.0



## Where We Are Now:

Nationally, 1 in 7 mothers will suffer from a Perinatal Mood and Anxiety Disorder and 1 in 5 California women has a symptom of depression during or after pregnancy (1,2). Prevalence is disproportionately higher among low-income women (3). Contributing factors include high rates of poverty, lack of screening, lack of access to mental health services, and lack of knowledge in the community and among health care professionals. In the United States, 50% of pregnant women suffering with depression did not receive treatment (3).

## References:

1. Depression During and After Pregnancy. Center for Disease Control and Prevention. Accessed March 24, 2022. <https://www.cdc.gov/reproductivehealth/features/maternal-depression/index.html>
2. Maternal Mental Health. California Department of Public Health. May 2019. Accessed March 24, 2022. <https://www.cdph.ca.gov/Programs/CFH/DMCAH/CDPH%20Document%20Library/Communications/FactSheetMMH-2019-01.pdf>
3. Earls MF. Incorporating Recognition and Management of Perinatal and Postpartum Depression into Pediatric Practice. American Academy of Pediatrics. 2010; 126 (5):1032-1039. doi.org/10.1542/peds.2010-2348

# BREASTFEEDING

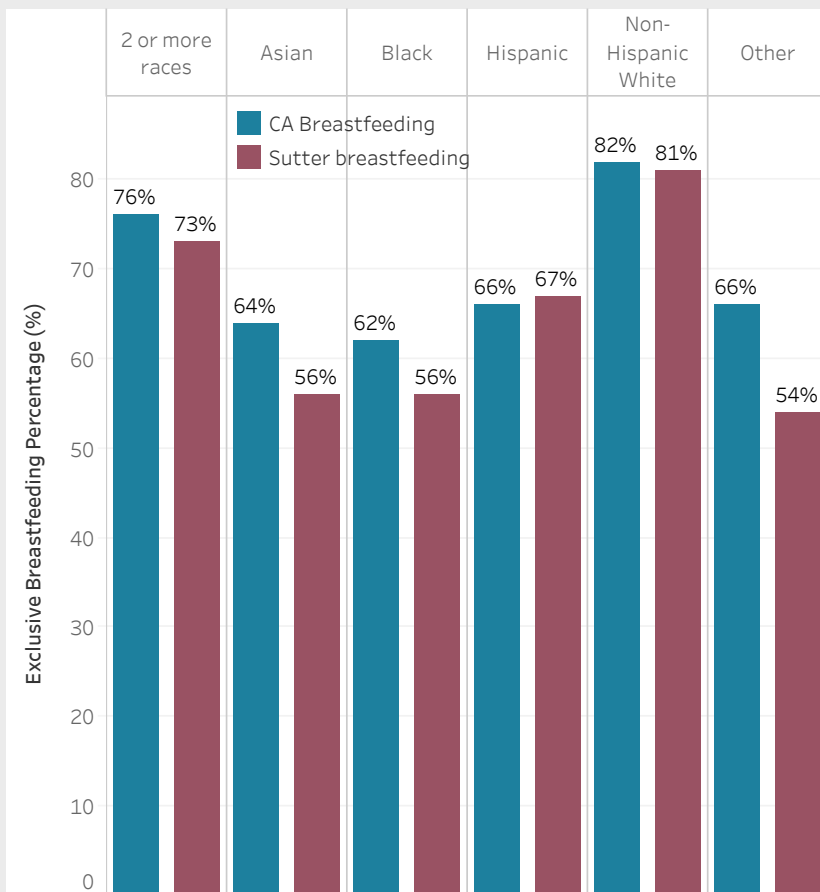
## Why It Is Important:

Breastmilk is the optimum nutrition source and provides the healthiest start for infants. It provides immediate health benefits for mothers and infants such as immune system support, rapid recovery from childbirth, and the release of mood boosting hormones (1). Breastmilk also provides a protective affect against long term health risks of chronic diseases such as asthma, obesity, and Type 1 diabetes. Benefits for mothers include lowering the risk of high blood pressure, type 2 diabetes, ovarian cancer, and breast cancer. The American Academy of Pediatrics recommends mothers feed infants breastmilk exclusively for the first 6 months of life, followed by continued breastfeeding in combination with the introduction of solid foods until at least one year of age.

## Where We Are Now:

Nationally, breast feeding has increased from 2004 (73%) to 2016 (84%) (1). Health care settings that promote breastfeeding have seen an increase from 3.8% in 2010 to 29.1% in 2020 in the United States. In Sutter County, minority groups have a lower percentage of exclusive breast feeding, compared to California in 2019 (2).

Figure 1: Exclusive Breastfeeding Percentage in Sutter County and California (2019)



## Those Most Affected:

Sutter County has consistently ranked as one of the lowest counties in California for exclusive breastfeeding rates between 2017-2019, affecting all new mothers who deliver at the local birthing hospital (1). The Sutter County Asian (56%) and African American (56%) populations are disproportionately affected, shown in Figure 1, with significantly lower breastfeeding rates compared to Whites (81%). Complex family and social dynamics create barriers to breastfeeding, including lack of family/friend support, lack of healthcare provider support, inadequate prenatal education and postpartum care, language/cultural barriers, formula marketing and insufficient workplace accommodations. The Sutter County Women, Infants, And Children (WIC) program promotes breastfeeding by providing support and education for new mothers who are part of the WIC program. Additionally, the Sutter County Maternal Child Adolescent Health (MCAH) program also provides lactation support and consultation during hospital and home visits to promote breastfeeding for new Sutter County mothers.

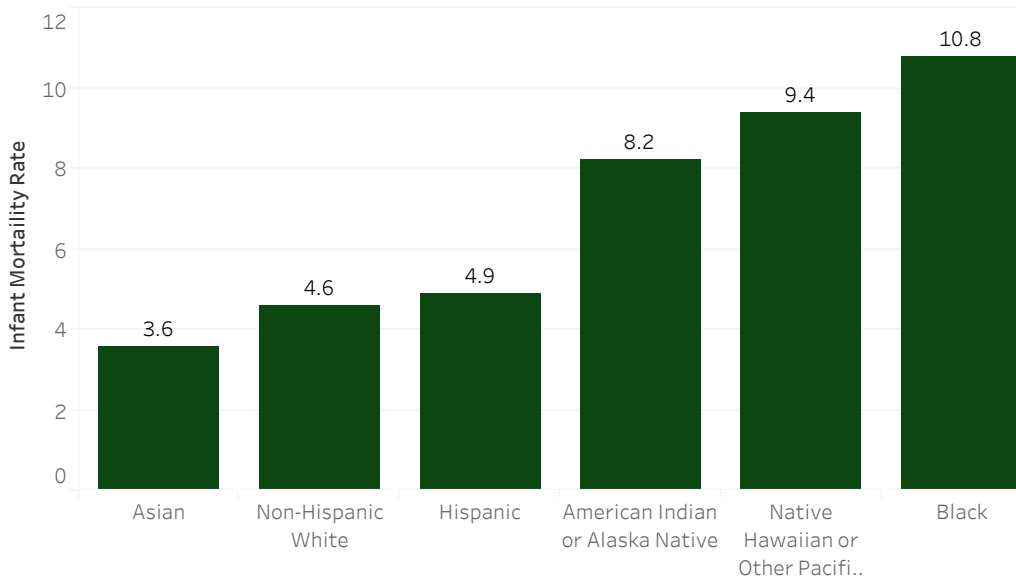
### References:

1. Depression During and After Pregnancy. Center for Disease Control and Prevention. Accessed March 24, 2022. <https://www.cdc.gov/reproductivehealth/features/maternal-depression/index.html>
2. Maternal Mental Health. California Department of Public Health. May 2019. Accessed March 24, 2022. <https://www.cdph.ca.gov/Programs/CEH/DMCAH/CDPH%20Document%20Library/Communications/FactSheetMMH-2019-01.pdf>
3. Earls MF. Incorporating Recognition and Management of Perinatal and Postpartum Depression into Pediatric Practice. American Academy of Pediatrics. 2010; 126 (5):1032-1039. doi.org/10.1542/peds.2010-2348
4. Earls MF. Incorporating Recognition and Management of Perinatal and Postpartum Depression into Pediatric Practice. American Academy of Pediatrics. 2010; 126 (5):1032-1039. doi.org/10.1542/peds.2010-2348

# INFANT MORTALITY RATE

Infant mortality rate is an indicator of the health of a specific population (1). Infant mortality rates can highlight associations between economic development, living conditions, well-being, environmental health, and access to care. Overall, women’s health status is important to have healthy babies, which includes access to care, eating healthy, physical activity, stress management, economic stability, and a healthy environment.

Figure 1: Infant Mortality Rates Per 1,000 Live Births by Race/Ethnicity in the United States (2018)



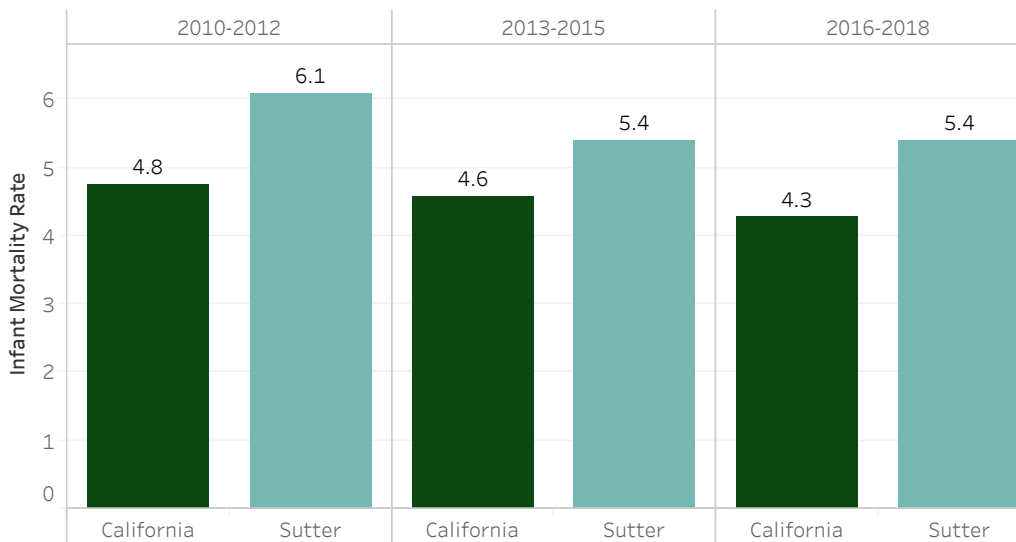
### Where We Are Now:

In the United States, roughly 21,000 infants died due to birth defects, preterm birth, injuries, sudden infant death syndrome, and maternal pregnancy complications (2). Nationally, Blacks, Native Hawaiian or Pacific Islander, and American Indian or Alaska Native had the highest infant deaths in 2018.

### Those Most Affected:

As illustrated in figure 1, infant mortality rate differed by race/ethnicity in 2018. In the United States, non-Hispanic Blacks have the highest infant mortality rate, followed by Native Hawaiian or other Pacific Islanders, American Indian or Alaska Native, Hispanics, non-Hispanic Whites, and Asians (2). Over time, infant mortality has increased in Sutter County. From 2016-2018 (Figure 2), the California infant mortality rate was 4.3 and Sutter County’s infant mortality rate was 5.4 (3). This is the most recent data provided by California Department of Public Health.

Figure 2: Infant Mortality Rate in California and Sutter County (2010-2018)



### References:

1. Depression During and After Pregnancy. Center for Disease Control and Prevention. Accessed March 24, 2022. <https://www.cdc.gov/reproductivehealth/features/maternal-depression/index.html>
2. Maternal Mental Health. California Department of Public Health. May 2019. Accessed March 24, 2022. <https://www.cdph.ca.gov/Programs/CEH/DMCAH/CDPH%20Document%20Library/Communications/FactSheetMMH-2019-01.pdf>
3. Earls MF. Incorporating Recognition and Management of Perinatal and Postpartum Depression into Pediatric Practice. American Academy of Pediatrics. 2010; 126 (5):1032-1039. doi.org/10.1542/peds.2010-2348
3. Earls MF. Incorporating Recognition and Management of Perinatal and Postpartum Depression into Pediatric Practice. American Academy of Pediatrics. 2010; 126 (5):1032-1039. doi.org/10.1542/peds.2010-2348

# APPENDIX A: METHODS

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Appendix A includes a description of the public health accreditation team, the methods, framework, and community engagement practices used to develop the Sutter County Community Health Assessment.

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## **The Sutter County Roadmap to a Healthier Community**

The Public Health Accreditation Team consisted of public health branch leadership and staff, including the Accreditation Coordinator and Public Health Epidemiologist. The Accreditation Coordinator facilitated meetings and Data Team activities.

## **The Sutter County Roadmap to a Healthier Community**

The Sutter County Roadmap to a Healthier Community is the framework upon which much of our Accreditation process is built, specifically the Community Health Assessment, Community Health Improvement Plan, Public Health Strategic Plan, and Public Health Performance Management System and associated Quality Improvement Plan. Mobilizing Action through Planning and Partnerships (MAPP) is a community-wide strategic planning tool and model made available through the National Association of County and City Health Officials (NACCHO). MAPP helps communities use broad-based partnerships and community engagement to assess the state of the community, identify the health issues that community members struggle with and implement strategies to address these issues that are unique to the community. The Public Health Accreditation Team chose to use a modified MAPP model as a basis for conducting the Sutter County Community Health Assessment. Because of its cyclic nature, significant portions of the Association for Community Health Improvement Community Health Assessment Toolkit, another evidence-based community-wide strategic planning framework, were combined with modified MAPP processes to create the Sutter County Roadmap to a Healthier Community.

# Methods

## Primary Data

Health data was critical in understanding the total health status of Sutter County, but it does not present a complete picture. It is also important to understand how our community experiences health. We partnered with the community in several ways during the Community Health Assessment so that we, as the Sutter County community, could get the best understanding of health and the factors that influence it in Sutter County. These efforts included the Health and Well-being Survey, community focus groups, stakeholder forums, and community feedback surveys.

The Sutter County Health and Well-Being Survey, which was promoted and available to the Sutter County community from October 2018 through January 2019, consisted of a main survey and four sub-surveys—Maternal Health, Oral Health, Adverse Childhood Experiences, and Life in Sutter County. The survey was translated into Spanish and it was determined that most Punjabi-speakers would be able to take the survey in English. A total of 426 surveys were completed. The top health issues that were of concern to the community include homelessness, obesity, and drug use. Additional survey and community health assessment feedback was also received between 2020-2021.

Seven community conversations—focus groups—were conducted with populations within the Sutter County community that have unique health-related experiences and perspectives. Two parent groups, members of LGBTQ groups for both youth and adults, school nurses, senior citizens, and a Spanish-language women’s support group all engaged in meaningful conversations about health and wellness and how they and their friends and family experience health in Sutter County. Between these groups, the topic areas that rose to the top were: limited access to care, limited resources or knowledge about community resources, chronic illnesses, and mental wellness related to social connectedness.

Sutter County stakeholders were engaged as participants in the Sutter County community health stakeholder forums and partnered with us in reviewing what we had learned so far and determining the most pressing health concerns for Sutter County. During the forums, participants heard about the results of the health data, survey, and focus groups. They also had the opportunity to participate in conversations and an activity that helped determine which health issues to focus on over the next three to five years. Attendee participation was substantial at each event and several priorities rose to the top of the list during our discussions. Participants were informed that the priorities from all forums would become part of the Public Health Branch determination of final priorities and would be the basis of the Community Health Improvement Plan for Sutter County. The areas identified were adverse childhood experiences and building a resilient community, community development, sexually transmitted infections, and homelessness.

## **Secondary Data**

Secondary data is the data that has already been collected by another entity, organization or for another purpose. Secondary data includes information on demographics, health status, and social determinants of health in Sutter County. The Data Team developed an initial list of key health indicators including the most common causes of death and illness, sexually transmitted infections, and mental health. The team also sought out data on key factors that affect health such as tobacco use, access to healthy food, physical activity rates, and maternal health. All indicators were reviewed, and several health issues were identified, which can be found in the health indicators and health risk factors sections of this report.

## **Community Feedback**

The preliminary findings of the 2020-2021 Community Health Assessment and feedback survey were distributed to the community on-line through the Sutter County Public Health website and promoted in the local newspaper and radio station broadcasts. Community Health Assessment Flyers with survey information and QR codes were also disseminated at targeted locations throughout the community. Community members were able to provide their thoughts on the state of health in Sutter County, the top health issues identified, and on the health assessment as a whole. A major theme identified by community members was the overall language and readability of the assessment. This feedback was assessed and integrated into the final Sutter County Community Health Assessment.

# Why Are Rates Used in the Community Health Assessment?

Rates were used in this community health assessment to help measure and assess the state of health and well-being in Sutter County. Rates are important for comparisons among different populations or groups. Rates help us measure the frequency or how quickly a disease is occurring with a specific population over a period of time and helps to measure the pattern and risk of the disease continuing to occur. This information can be used to compare disease and disease risk factor rates among different groups in our community and see how Sutter County's health compares both in California and nationwide.

**Incidence Rate:** This is defined as the number of new cases (incidence) of a disease over a specific period. The numerators are the number of new cases in the racial/ethnic groups during the period. The denominators are the total number of Sutter County residents who identify as a particular racial/ethnic groups. The result is multiplied by 100,000 to help understand the impact of the disease.

In the Community Health Assessment, the rates were calculated using new cases pooled over 5 years (2016-2020) to ensure data stability.

# APPENDIX B

## Community Health and Well-Being Survey

### Survey Findings

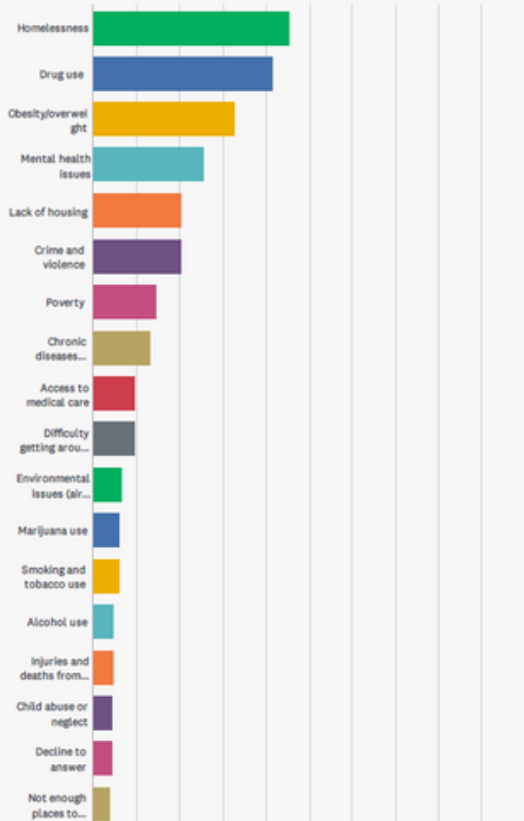
The Community Health and Well-Being Survey was distributed throughout the community between October 2018 and January 2019. This survey aimed at collecting the communities insights and experiences with health and identifying the health issues most concerning to Sutter County residents. A total of 439 survey responses were collected from community members.

#### Top Health Issues:

Survey respondents were asked questions about their experiences with health in Sutter County, what would make Sutter County a better place to live, the top health issues, and demographic information. Participants were also asked to complete a supplemental Prenatal Care and Maternal Mental Health Survey, a Oral Health and Dental Care Follow-Up Survey, and an Adverse Childhood Experience (ACEs) Follow-Up Survey. The information collected from the Sutter County Health and Well-Being Survey and supplemental surveys were used to inform the top health priorities for Sutter County.

Q8 What do you think are the three most important health issues in Sutter County? (Choose 3 responses)

Answered: 392 Skipped: 34



Survey respondents were given a list of 22 health issues and asked to select what are the three most important issues to be prioritized in their community. The top health issue identified by 45.41% of respondents was homelessness. Other health issues identified by survey respondents were drug use with 41.58% of respondents identifying it as a top health issue. Followed by overweight/obesity, indicated by 32.65% of respondents, and mental health issues identified as a top health issue by 25.51% of survey respondents.



# Sutter County Health and Wellbeing Survey – 2018-2019

Sutter County Health and Human Services Department, Public Health Division



Sutter County Public Health wants your voice! We are conducting a community health assessment that will help everyone better understand health and well-being in Sutter County, and we need your help. Please take 15 minutes to participate by sharing your thoughts and experiences with us.

Your answers are anonymous. If you do not want to answer a question, please select "decline to answer."

## Where You Live and Work

**What is your relationship with Sutter County?** *(Choose one response)*

- I live in Sutter County
- I live and work in Sutter County
- I live in Sutter County and work somewhere else
- I live somewhere else but work in Sutter County
- I go to school in Sutter County and live somewhere else
- I live in Sutter County and go to school somewhere else
- I live and work somewhere else but come here often
- I am here from time to time
- None of the above, but I'm interested in making it healthier

**What zip code do you live in?** \_\_\_\_\_

## About Your Community

The following questions are about your experience living, working and playing in Sutter County, how you feel about our community, and what would make Sutter County a healthier and happier place.

**What makes Sutter County a great place for your family to live or visit?** *(Select all that apply)*

- Affordable housing
- Arts and cultural events
- Clean environment
- Community involvement
- Good dental care
- Good dine-in restaurants
- Respects cultural, ethnic, and language diversity
- Effective disaster response
- A bright future for me and my family
- Good grocery stores
- Good healthcare
- Healthy food options and farmer's markets
- Healthy behaviors and lifestyles
- Good jobs and a strong economy
- Good programs for kids
- Low death and disease rates
- Good mental health care
- Parks or outdoor recreation
- Religious or spiritual values
- Good schools
- Strong sense of community and community pride
- Walkable and/or bikable streets and communities
- Strong family togetherness and support
- Good transportation
- None of the above
- Don't know
- Decline to answer

**How healthy a place is Sutter County to live in?** *(Choose one response)*

- Very healthy
- Healthy
- Neither healthy nor unhealthy
- Unhealthy
- Very unhealthy
- Decline to answer

**How safe is Sutter County to grow up in or raise children in?** *(Choose one response)*

- Very safe
- Safe
- Neither safe nor unsafe
- Unsafe
- Very unsafe
- Decline to answer

**Do you believe children here will have a better or worse life than their parents' generation, or will it be about the same?** *(Choose one response)*

- Better
- Worse
- About the same
- Don't know
- Decline to answer

**What does Sutter County need to be a better place to live for you and your family?** *(Select all that apply)*

- Affordable housing
- More opportunities to participate in arts and cultural events
- More respect for cultural, ethnic, and language diversity
- A stronger sense of community and community pride
- Better access to dental care
- More restaurant options
- A cleaner environment
- Better disaster response
- A brighter future for me and my family
- More walkable and bikable streets and communities
- More community involvement
- Healthier food options and more farmer's markets
- Healthier behaviors and lifestyles
- More job opportunities and a stronger economy
- More family togetherness and support
- Lower death and disease rates
- Better access to mental health care
- More parks or outdoor recreation
- Stronger religious or spiritual values
- Better schools
- Better access to health care
- Better grocery stores
- More programs for kids
- More public transportation
- None of the above
- Don't know
- Decline to answer



# Sutter County Health and Wellbeing Survey – 2018-2019

Sutter County Health and Human Services Department, Public Health Division



## What do you think are the three most important health issues in Sutter County? *(Choose 3 responses)*

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Obesity/overweight                         | <input type="checkbox"/> Lack of housing                                  | <input type="checkbox"/> Not enough places to exercise             | <input type="checkbox"/> Access to medical care                                  |
| <input type="checkbox"/> Access to dental care                      | <input type="checkbox"/> Child abuse or neglect                           | <input type="checkbox"/> Alcohol use                               | <input type="checkbox"/> Drug use  |
| <input type="checkbox"/> Injuries and deaths from traffic accidents | <input type="checkbox"/> Chronic disease (asthma, cancer, diabetes, etc.) | <input type="checkbox"/> Difficulty getting around without driving | <input type="checkbox"/> Environmental issues (air quality, water quality, etc.) |
| <input type="checkbox"/> Injuries                                   | <input type="checkbox"/> Infant death                                     | <input type="checkbox"/> Mental health issues                      | <input type="checkbox"/> Poverty   |
| <input type="checkbox"/> Homelessness                               | <input type="checkbox"/> Crime and violence                               | <input type="checkbox"/> Teen pregnancy                            | <input type="checkbox"/> Smoking and tobacco use                                 |
| <input type="checkbox"/> Marijuana use                              | <input type="checkbox"/> Suicide  | <input type="checkbox"/> Don't know                                | <input type="checkbox"/> Decline to answer                                       |
| <input type="checkbox"/> Other <i>(please specify)</i> : _____      |   |  |  |

## About You and Your Family

The following questions are about you and your family's demographics, employment, income, and living situation. We are asking about demographics to make sure we get responses from all parts of the community, and to see if there are differences in health, health care, and views of Sutter County among various groups of people here in Sutter County.

### What is your gender identity? *(Choose one response)*

- Female                       Male                       Female to male transgender    Male to female transgender  
 Gender non-conforming    Decline to answer

### If you are female, are you currently pregnant? *(Choose one response)*

- Yes                       No                       Don't know                       Decline to answer

### If you are female, have you given birth in the last year? *(Choose one response)*

- Yes                       No                       Don't know                       Decline to answer

If you are female and are either currently pregnant or gave birth in the last year, please consider completing the Prenatal Care and Maternal Mental Health Follow-Up Survey included in this packet.

### What is your age?

### Do you consider yourself to be Hispanic or Latino? *(Choose one response)*

- Yes                       No                       Don't know                       Decline to answer

### What is your race? *(Select all that apply)*

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> American Indian or Alaska Native          | <input type="checkbox"/> Asian              | <input type="checkbox"/> African-American or Black |
| <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | <input type="checkbox"/> Caucasian or White | <input type="checkbox"/> Multiracial               |
| <input type="checkbox"/> Other <i>(please specify)</i> : _____     | <input type="checkbox"/> Don't know         | <input type="checkbox"/> Decline to answer         |

### If you are Asian, which of the following best describes your national origin? *(Select all that apply)*

- |  |                                  |                                    |                                     |  |
|--|----------------------------------|------------------------------------|-------------------------------------|--|
| <input type="checkbox"/> Cambodian                             | <input type="checkbox"/> Chinese | <input type="checkbox"/> Filipino  | <input type="checkbox"/> Hmong      | <input type="checkbox"/> Indian            |
| <input type="checkbox"/> Japanese                              | <input type="checkbox"/> Korean  | <input type="checkbox"/> Pakistani | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Don't know        |
| <input type="checkbox"/> Other <i>(please specify)</i> : _____ |                                  |                                    |                                     | <input type="checkbox"/> Decline to answer |

### What is your preferred language? *(Choose one answer)*

*We are asking what language you feel most comfortable using, not whether you are fluent in English.*

- English                       Spanish                       Farsi                       Punjabi                       Hmong  
 Don't know                       Decline to answer  
 Other *(please specify)*: \_\_\_\_\_



# Sutter County Health and Wellbeing Survey – 2018-2019

Sutter County Health and Human Services Department, Public Health Division





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## What is the highest degree or level of schooling you have completed? *(Choose one answer)*

- Grades K-4
- Grades 5-6
- Grades 7-8
- Grades 9-11
- High school diploma
- GED
- Some college
- Associate's degree (such as an AA or AS)
- Bachelor's degree (such as an BA or BS)
- Master's degree (such as an MA, MS, or MBA)
- Professional degree beyond a bachelor's degree (such as an MD, DDS, DVM, LLB or JD)
- Doctorate degree (such as a PhD or EdD)
- Vocational certificate
- Don't know
- Decline to answer

## What is your current relationship status? *(Choose one response)*

- Single, never married
- In a relationship
- Married
- Separated
- Divorced
- Widowed
- Don't know
- Decline to answer

## How many other people live with you? *(Choose one response)*

- None
- One
- Two
- Three
- Four
- Five
- Six
- Seven
- Eight or more
- Decline to answer

## How many people living with you are younger than 18? *(Choose one response)*

- None
- One
- Two
- Three
- Four
- Five
- Six
- Seven
- Eight or more
- Decline to answer

## What is your current employment situation? *(Choose one response)*

- Not employed
- Self-employed
- Employed full-time
- Employed part-time
- Full-time caregiver
- Stay at home parent/guardian
- Disabled
- Retired
- Don't know
- Decline to answer
- Other *(please specify)*: \_\_\_\_\_

## How much money does your family make in a year? *(Choose one response)*

- Less than \$15,000
- \$15,001-\$25,000
- \$25,001-\$50,000
- \$50,001-\$75,000
- \$75,001-\$100,000
- More than \$100,000
- Don't know
- Decline to answer

## What is your current housing situation? *(Choose one response)*

- I own my home
- I rent my home
- I live with family
- I'm staying with friends
- I am homeless
- Don't know
- Decline to answer
- Other *(please specify)*: \_\_\_\_\_

## How much of your or your family's monthly income goes to paying rent or a mortgage? *(Choose one response)*

- None
- Less than 1/3
- 1/3 to 1/2
- More than 1/2
- I don't know
- Decline to answer

## About Your Health, Medical and Dental Care

The following questions are about your health, and your ability to get the medical, dental and vision care you need here in Sutter County.

### In general, your health is \_\_\_\_\_. *(Choose the response that best fills the blank)*

- Excellent
- Very good
- Good
- Fair
- Poor
- Don't know
- Decline to answer

### Do you have a physical condition, a developmental disability, or a mental health condition that makes it hard to live independently, get around, or do the things you want to do? *(Choose one response)*

*Some examples of these physical conditions are difficulties seeing or hearing, difficulties walking or standing, diseases like asthma or arthritis, needing oxygen, a stroke, or other injuries. A developmental disability is something you were born with, or began in childhood. Some examples are autism, cerebral palsy, Down syndrome, learning disabilities, and spina bifida. Examples of mental health conditions include depression, anxiety disorders, schizophrenia, eating disorders, bipolar disorder, and post-traumatic stress disorder.*

- Yes, and I need help from someone else to manage it
- Yes, but I can cope on my own
- No, I don't



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Please tell us how other people help support you. We are interested in social support because there are strong links between good social support and better health. On the other hand, people with little social support, especially those who feel cut off or isolated, often have worse health.

For each statement below, select the box that best describes your situation on a scale of 1 to 5, with 1 “much less than I would like” and 5 “as much as I would like.”

	5 As much as I would like	4 Almost as much as I would like	3 Some, but would like more	2 Less than I would like	1 Much less than I would like
I have people who care what happens to me					
I get chances to talk to someone I trust about my personal and/ or family problems					
I get chances to talk to someone about problems at work					
I get invitations to go out and do things with other people					
I get help when I am sick in bed					

Where do you usually go for medical care when you are not feeling well? (Choose one answer)

- Emergency room   
 Urgent care   
 Health clinic   
 VA facility   
 Doctor's office   
 I don't go  
 Other (please specify): \_\_\_\_\_   
 Don't know   
 Declined to answer

What, if anything, kept you and/or your kids from getting the medical care you needed? (Select all that apply)

- Nothing - I don't need it   
 Nothing - I get what I need   
 Nothing - My kids get what they need   
 I could not afford it  
 I couldn't get an appointment   
 I didn't want to spend the money   
 My insurance did not cover recommended procedures   
 Providers are too far away  
 Providers are not open at convenient times   
 Providers do not speak my language   
 Another provider said not to   
 I am afraid of or do not like doctors/dentists/mental health professionals  
 My kids are afraid of or do not like doctors/dentists/mental health professionals   
 I am unable to take enough time off work   
 I am too busy   
 I did not think anything was seriously wrong  
 I expected medical problems to go away   
 I had to prioritize my other needs   
 I had to put my kids' medical needs first   
 I had to prioritize my kids' other needs  
 Don't know   
 Decline to answer  
 Other (please specify): \_\_\_\_\_

In the past year, where did you get your medical, dental, and/or vision care?

- Entirely in Sutter County   
 Partially in Sutter County   
 In another county or state in the US   
 In my home country, not the United States  
 I travelled outside the US to get healthcare   
 I did not need or seek medical, dental, or vision care   
 Don't know   
 Decline to answer

In the past year, how did you pay for health insurance?

- Medi-Cal   
 Medi-Cal dental   
 Medicare   
 Medicare dental  
 County health medical services   
 Employer-provided health insurance   
 Privately purchased health insurance   
 Privately purchased dental insurance  
 Privately purchased vision insurance   
 Indian Health Service medical care   
 Indian Health Service dental care   
 VA health insurance  
 VA dental insurance   
 TRICARE health insurance   
 TRICARE dental insurance   
 Out of pocket payment  
 Other (please specify): \_\_\_\_\_



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## Additional Information We May Have Missed

We may be missing information about what makes Sutter County a great place to live, or what would make it a healthier and happier place. If so, please answer the following questions.

**What else makes Sutter County a safe and happy place to live, work, or visit?**

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**What else do we need to know if we want to make Sutter County a healthier place?**

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Thank you for taking the time to complete this survey. Your answers will help us better understand the health of our community, identify what our community does well, determine what we as a community need to improve, and help us set priorities going forward. They will be key parts of our community health assessment and improvement plans in the coming year.

If you have any questions about this survey, the process of becoming accredited, why Sutter County wants their health department accredited, or how you can help make Sutter County healthier and happier, please contact us at (530) 822-7215.



# Prenatal Care and Maternal Mental Health Follow-Up Survey– 2018-2019

Sutter County Health and Human Services Department, Public Health Division



## How old were you when you became pregnant with this child? (Choose one answer)

- 19 or younger     20-29     30-39     40 or older     Don't know     Decline to answer

## How many pregnancies, including this one, have you had? (Choose one answer)

- One     Two     Three     Four     Five or more     Don't know     Decline to answer

## Where were you living when you became pregnant with this child?

*We will only use address data to help identify gaps in access to prenatal and postpartum care.*

### City: (Choose one response)

- Yuba City     Live Oak     Sutter     Robbins     Meridian  
 Marysville     Olivehurst     Linda     Wheatland     Williams  
 Colusa     Other (please specify): \_\_\_\_\_  Don't know     Declined to answer

### State: (Choose one response)

- California     Other (please specify): \_\_\_\_\_  Don't know     Declined to answer

## When during your most recent pregnancy did you realize you were pregnant? (Choose one response)

- 0-12 weeks     13-26 weeks     27-41 weeks     Don't know     Declined to answer

## When during your pregnancy did you start receiving prenatal care? (Choose one response)

- I didn't get prenatal care     0-12 weeks     13-26 weeks     27-41 weeks     Don't know     Declined to answer

*If prenatal care began after 12 weeks, or no prenatal care received, what are some of the reasons you did not receive prenatal care, or care began after 12 weeks? (Select all that apply)*

- Found out I was pregnant after 12 weeks     I was unable to get an appointment     I could not afford it     I did not need pregnancy-related health care  
 I did not need prenatal care because this is not my first pregnancy     I did not want to get pregnancy-related health care     Another doctor said not to     I am afraid of or do not like doctors  
 My insurance did not cover pregnancy-related health care     Doctors' offices are too far away     Doctors' offices are not open at convenient times     Did not know where to go to get pregnancy-related health care  
 I wasn't able to take enough time off work     I couldn't get childcare for my other kids     I was too busy     I didn't have transportation to and from clinic visits  
 Doctors/nurses/clinic staff didn't speak my language     I had to prioritize my other needs     Don't know     Declined to answer  
 Other (please specify): \_\_\_\_\_

## How easy was it to make an appointment for pregnancy-related care before the 12th week of your pregnancy? (Choose one response)

- Very easy     Somewhat easy     Neither easy nor difficult     Somewhat difficult  
 Very difficult     Don't know     Declined to answer

*If it was difficult to make an appointment, why was it difficult to get an appointment before the 12th week of your pregnancy? (Select all that apply)*

- The clinic/clinics did not want to start my prenatal care until after 12 weeks of pregnancy     The clinic/clinics did not take my insurance     The clinic/clinics did not have appointment available until after 12 weeks of pregnancy     Doctors' offices are not open at convenient times  
 Doctors/nurses/clinic staff didn't speak my language     Clinic staff was difficult to work with     Available appointments did not fit my schedule     Don't know  
 Declined to answer     Other (please specify): \_\_\_\_\_



# Prenatal Care and Maternal Mental Health Follow-Up Survey– 2018-2019

Sutter County Health and Human Services Department, Public Health Division



**What type(s) of health insurance did you have during your pregnancy?** *(Select all that apply)*

- Anthem Blue Cross       Aetna       Blue Shield       CA Health and Wellness
- Cigna       Kaiser       Medi-Cal       Pregnancy Medi-Cal
- Tri-care       None       Don't know       Declined to answer
- Other *(please specify)*: \_\_\_\_\_

## Breastfeeding

**How do you intend to feed your new baby?** *(Select all that apply)*

- Breastfeed       Bottle-feed breastmilk       Formula feed
- Don't know yet       Declined to answer

**How do the following people think your baby should be fed in the first few weeks?**

Mark "No one in this category" if there is no one in the category, such as if you don't yet have a pediatrician for the baby.

Person	Only feed breast milk	Only feed formula	Feed both	No opinion or don't know	No one in this category
Baby's father					
Your mother					
Your mother-in-law					
Your doctor					
Baby's doctor					

**Did someone (a doctor, midwife, nurse or lactation consultant) help you with breastfeeding, such as by showing you how to breastfeed or talking to you about breastfeeding?** *(Choose one response)*

- Yes       No       Don't know       Declined to answer

*If yes, how helpful was the doctor, midwife, nurse, or lactation consultant?* *(Choose one response)*

- Not at all helpful       Not very helpful       Somewhat helpful       Helpful       Very helpful

## Maternal Dental Health

**At your prenatal care visits, has any health professional talked to you about the importance of seeing a dentist during your pregnancy?** *(Choose one response)*

- Yes       No       Don't know       Declined to answer

**During your most recent pregnancy, did you have your teeth professionally cleaned?** *(Choose one response)*

- Yes       No       Don't know       Declined to answer

**During your most recent pregnancy, did you see a dentist for a problem with your teeth or gums?** *(Choose one response)*

- Yes       No       Don't know       Declined to answer

## Maternal Mental Health

**Has any health professional talked to you about "baby blues," depression or anxiety since you became pregnant?** *(Choose one response)*

- Yes       No       Don't know       Declined to answer

*If yes, have you been screened for postpartum depression?* *(Choose one response)*

- Yes       No       Don't know       Declined to answer



# Prenatal Care and Maternal Mental Health Follow-Up Survey– 2018-2019

Sutter County Health and Human Services Department, Public Health Division



**Have you experienced any of the following in the past 7 days?** *(Select all that apply)*

- Not able to laugh or see the funny side of things
- Loss of interest or pleasure in things you used to enjoy
- Feelings of guilt, shame, or hopelessness
- Feeling worried or anxious for no reason
- Feeling scared or panicky for no reason
- Feeling unable to cope
- Difficulty sleeping due to feeling unhappy
- Often feeling sad or miserable
- Often crying due to feeling unhappy
- Thinking of harming yourself or others
- None of these symptoms
- Don't know
- Declined to answer

**If you are thinking of harming yourself or others, please call Sutter Yuba Behavioral Health's 24- hour psychiatric emergency services (crisis services) at (530)-673-8255 or Toll Free (888)-923-3800, or the National Suicide Prevention Lifeline at (800)-273-8255.**

**Do you have someone to call or go to for support if you experience symptoms of depression or anxiety in the next year?**

*(Choose one response)*

- Yes
- No
- Don't know
- Declined to answer

*If yes, who would you call or where would you go?*

---

**If you are experiencing symptoms of depression or anxiety and do not feel you have support, you can contact the following resources:**

- Postpartum Support International Warm-line: (800)-944-4773
- Postpartum Support International Weekly Online Chat on Wednesdays: [www.postpartum.net/chat-with-anexpert/](http://www.postpartum.net/chat-with-anexpert/)
- Online Postpartum Support Group: [www.ppdsupportpage.com](http://www.ppdsupportpage.com)



**We would like to know more about your oral health and your experiences with dental care. We will use your responses to these questions to help improve oral health and dental care here in Sutter County.**

**About Your Oral Health**

**Overall, how would you rate the health of your teeth and gums?** *(Choose one response)*

- Excellent     Very good     Good     Fair     Poor     Don't know     Decline to answer

**Gum disease is a common problem with the mouth. People with gum disease might have swollen gums, receding gums, sore or infected gums or loose teeth. Do you think you might have gum disease?** *(Choose one response)*

- Yes     No     Don't know     Decline to answer

**How often during the last year have you had a painful aching anywhere in your mouth?** *(Choose one response)*

- Very often     Fairly often     Occasionally     Hardly ever     Never     Don't know     Decline to answer

**How often during the last year have you had difficulty doing your usual jobs or attending school because of problems with your teeth, mouth or dentures?** *(Choose one response)*

- Very often     Fairly often     Occasionally     Hardly ever     Never     Don't know     Decline to answer

**How often during the last year have you been self-conscious or embarrassed because of your teeth, mouth or dentures?** *(Choose one response)*

- Very often     Fairly often     Occasionally     Hardly ever     Never     Don't know     Decline to answer

**Have you ever gone to the emergency room for tooth or mouth problems?** *(Choose one response)*

- Yes     No     Don't know     Decline to answer

**How many times do you brush your teeth in one day?** *(Choose one response)*

- None     One     Two     Three     Four     Five  
 Six     Seven     Eight or more     I don't have my own teeth or I use dentures     Don't know     Decline to answer

**On average, how much toothpaste do you use when brushing your teeth?** *(Choose one response)*

- I fully cover my toothbrush     I half cover my toothbrush     I use a pea sized amount     I use a smear of toothpaste  
 Don't know     Decline to answer

**Aside from brushing your teeth with a toothbrush, in the last seven days, how many times did you use dental floss or any other device to clean between your teeth?** *(Choose one response)*

- None     One     Two     Three     Four     Five  
 Six     Seven     Eight or more     I don't have my own teeth or I use dentures     Don't know     Decline to answer

**About The Dental Care You Have Received**

**What was the main reason you last visited the dentist?** *(Choose one response)*

- Went in on own for check-up, examination or cleaning     Called in by a dentist for check-up, examination or cleaning     Went for treatment of a condition that a dentist discovered at an earlier appointment  
 Something was wrong, bothering or hurting you     Don't know     Decline to answer  
 Other *(please specify)*: \_\_\_\_\_

**During the past 12 months, was there a time when you needed dental care but could not get it at that time?** *(Choose one response)*

- Yes     No     Don't know     Decline to answer



# Oral Health and Dental Care Follow-Up Survey – 2018-2019

Sutter County Health and Human Services Department, Public Health Division



**In the past 12 months, did a dentist, hygienist or other dental professional have a direct conversation with you about the benefits of giving up cigarettes or other types of tobacco to improve your dental health? (Choose one response)**

- Yes                       No                       Don't know                       Decline to answer

**In the past 12 months, did a dentist, hygienist or other dental professional have a direct conversation with you about the dental health benefits of checking your blood sugar? (Choose one response)**

- Yes                       No                       Don't know                       Decline to answer

**Have you ever had treatment for gum disease such as scaling and root planing, sometimes called deep cleaning? (Choose one response)**

- Yes                       No                       Don't know                       Decline to answer

**Have you ever been told by a dental professional that you have lost bone around your teeth? (Choose one response)**

- Yes                       No                       Don't know                       Decline to answer

**Have you ever had an exam for oral or mouth cancer in which the doctor or dentist pulls on your tongue, sometimes with gauze wrapped around it, and feels under the tongue and inside the cheeks? (Choose one response)**

- Yes                       No                       Don't know                       Decline to answer

*If you have had an oral cancer exam, when did you have your most recent oral or mouth cancer exam? (Choose one response)*

- Within the last year                       1-3 years ago                       More than 3 years ago                       Never  
 Don't know                       Decline to answer

*If you have had an oral cancer exam, what type of health care professional performed your most recent oral cancer exam? (Choose one response)*

- Doctor/physician                       Nurse or nurse practitioner                       Dentist or dental surgeon                       Dental hygienist  
 Other (please specify): \_\_\_\_\_  Don't know                       Decline to answer

### Your Beliefs About Dental Care

**On a scale of 1 to 5, where 1 is "strongly disagree" and 5 is "strongly agree," please tell us how much you agree with the following statements:**

	5 Strongly agree	4 Agree	3 Neither agree nor disagree	2 Agree	1 Strongly agree
Dental visits are only important if you have a dental emergency					
Dental visits are important even for those without teeth and/or dentures					
Regular dental visits help prevent dental problems such as tooth decay, gum disease, and/or tooth loss					
It is important to brush your teeth/dentures at least once a day					
The condition of my teeth is an important part of my overall health					
Fluoride strengthens/protects teeth and helps prevent cavities					
Dental sealants help prevent cavities					
There is a connection between gum disease and diabetes					
There is a connection between gum disease and heart disease					



# Adverse Childhood Experience (ACE) Follow-Up Survey – 2018-2019

Sutter County Health and Human Services Department, Public Health Division



We would like to know more about some of your adverse childhood experiences.

Please read each of the following questions about your childhood carefully. For each one, please check the box under **yes** if that happened to you during your first 18 years of life, or **no** if it does not.

We understand many of these statements may look the same. However, it is very important to consider each one individually and answer accordingly, even if you think another statement already covered it.

		<u>Yes</u>	<u>No</u>
1.	Did a parent or other adult in the household <u>often</u> swear at you, insult you, put you down, or humiliate you, or act in a way that made you afraid that you might be physically hurt?	<input type="checkbox"/>	<input type="checkbox"/>
2.	Did a parent or other adult in the household <u>often</u> push, grab, slap, or throw something at you, <u>or ever</u> hit you so hard that you had marks or were injured?	<input type="checkbox"/>	<input type="checkbox"/>
3.	Did an adult, or person at least 5 years older than you, <u>ever</u> touch or fondle you or have you touch their body in a sexual way, <u>or try to or actually have</u> oral, anal, or vaginal sex with you?	<input type="checkbox"/>	<input type="checkbox"/>
4.	Did you <u>often</u> feel that no one in your family loved you or thought you were important or special, or your family didn't look out for each other, feel close to each other, or support each other?	<input type="checkbox"/>	<input type="checkbox"/>
5.	Did you <u>often</u> feel that you didn't have enough to eat, had to wear dirty clothes, and had no one to protect you, or your parents were too drunk or high to take care of you or take you to the doctor if you needed it?	<input type="checkbox"/>	<input type="checkbox"/>
6.	Were your parents <u>ever</u> separated or divorced?	<input type="checkbox"/>	<input type="checkbox"/>
7.	Were any of your parents or stepparents <u>often</u> pushed, grabbed, slapped, or had something thrown at them, <u>or sometimes or often</u> kicked, bitten, hit with a fist, or hit with something hard, or ever repeatedly hit over at least a few minutes or threatened with a gun or knife?	<input type="checkbox"/>	<input type="checkbox"/>
8.	Did you live with anyone who was a problem drinker or alcoholic, or who used street drugs?	<input type="checkbox"/>	<input type="checkbox"/>
9.	Was a household member depressed or mentally ill <u>or</u> did a household member attempt suicide?	<input type="checkbox"/>	<input type="checkbox"/>
10.	Did a household member go to prison?	<input type="checkbox"/>	<input type="checkbox"/>

We would like to know more about how you feel about life and the future in Sutter County. Please read each of the following statements carefully. For each one, please answer yes if that statement describes how you feel about life in Sutter County, or no if it does not.

We understand many of these statements may look the same. However, it is very important to consider each one individually and answer accordingly, even if you think another statement already covered it.

	True	False
1. I look forward to the future here with hope and enthusiasm.	<input type="checkbox"/>	<input type="checkbox"/>
2. I might as well move because things can't get better here.	<input type="checkbox"/>	<input type="checkbox"/>
3. If things are going badly here, I know they can't stay that way forever.	<input type="checkbox"/>	<input type="checkbox"/>
4. I can't imagine what my life would be like in 10 years living here.	<input type="checkbox"/>	<input type="checkbox"/>
5. I have enough time to accomplish the things I most want to do here.	<input type="checkbox"/>	<input type="checkbox"/>
6. Living here, I expect to succeed in what concerns me most in the future.	<input type="checkbox"/>	<input type="checkbox"/>
7. My future here seems dark to me.	<input type="checkbox"/>	<input type="checkbox"/>
8. Living here, I expect to get more of the good things in life than the average person.	<input type="checkbox"/>	<input type="checkbox"/>
9. I won't get a break here, and there's no reason to believe I will in the future.	<input type="checkbox"/>	<input type="checkbox"/>
10. Living here has prepared me well for my future.	<input type="checkbox"/>	<input type="checkbox"/>
11. Living here, all I can see ahead of me is unpleasantness rather than pleasantness.	<input type="checkbox"/>	<input type="checkbox"/>
12. Living here, I don't expect to get what I really want.	<input type="checkbox"/>	<input type="checkbox"/>
13. When I look ahead to my future here, I expect I will be happier than I am now.	<input type="checkbox"/>	<input type="checkbox"/>
14. Things here won't work out for me the way I want them to.	<input type="checkbox"/>	<input type="checkbox"/>
15. Living here, I have great faith in the future.	<input type="checkbox"/>	<input type="checkbox"/>
16. I'll never get what I want here, so it's foolish to want anything.	<input type="checkbox"/>	<input type="checkbox"/>
17. Living here, it's very unlikely I will get any real satisfaction in the future.	<input type="checkbox"/>	<input type="checkbox"/>
18. The future here seems vague and uncertain to me.	<input type="checkbox"/>	<input type="checkbox"/>
19. I can look forward to more good times than bad times living here.	<input type="checkbox"/>	<input type="checkbox"/>
20. There's no use in really trying to get something I want because I probably won't get it.	<input type="checkbox"/>	<input type="checkbox"/>

# APPENDIX C

Appendix C includes the overview of the BARHII Framework. More information regarding this framework and key concepts can be found at the [Bay Area Regional Health Inequities Initiative](#).

