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Community Health Status Report





Community Health Status Report

2014

Santa Barbara County Public Health Department

Acknowledgements

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F8KWaras

What is 3-4-50?

The 3-4-50 concept is defined as three behaviors (poor diet, physical inactivity and tobacco use) which contribute to four chronic diseases (vascular disease (which includes heart disease and strokes), cancer, lung disease, and type 2 diabetes) causing over 50 percent of all deaths worldwide. Throughout the nation and in Santa Barbara County, the four chronic diseases impact the quality of life and result in premature death for many of our residents.

Why do we collect health related data?

Our health matters. It impacts each and every person who lives, works, studies and plays in the county – regardless of age, gender, race, income or sexual orientation. Collecting data and analyzing trends gives us a better understanding of where we are and how we,

as a community and as the Public Health Department, should focus our attention and resources.

We have focused our data collection and analysis on three behaviors and four chronic diseases with the scientific understanding that the quality and longevity of life of our residents is greatly influenced by these key factors.

Our health matters. It impacts each and every person who lives, works, studies and plays in the county.

How can we use the data?

Monitoring the community's health is a core function of public health and we hope that you will find this report helpful as a tool for both learning and planning. We will continue to work with individuals, families and communities to promote healthy behaviors. We will continue to work on policies that make the healthy choices the easy choices. We will continue to do all that we can to protect the public's health and give everyone the opportunity to live a long, healthy life.

Special thanks go out to the public health staff that labored tirelessly to compile and analyze the data contained in this report.



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Introduction

Santa Barbara County Public Health Department

he mission of the Santa Barbara County Public Health Department is to improve the health of our communities by preventing disease, promoting wellness, and ensuring access to needed health care. Our vision is: **Healthier communities through leadership**, partnership, and science.

The Public Health Department works with community members and organizations to:

- 9 Prevent epidemics and the spread of disease
- Protect against environmental hazards
- Prevent injuries
- Promote healthy behaviors
- © Respond to disasters and assist communities in recovery
- Ensure the quality and accessibility of health services

The Santa Barbara County Public Health Department offers a number of programs and services designed to promote health, and treat and prevent disease. For a complete listing of programs and services, visit

our website at www.sbcphd.org and click the "Programs and Services" link, or call 805-681-5100. Information on a variety of health issues is available from the US National Library of Medicine at www.nlm.nih.gov, and from the Centers for Disease Control at www.cdc.gov.





Report Overview

he theme of this report is 3 - 4 - 50; referring to the fact that three unhealthy behaviors (poor diet, physical inactivity, and tobacco use) contribute to four diseases (vascular disease, cancer, lung disease, and type 2 diabetes) that cause over 50% of deaths in Santa Barbara County. In this report, we investigate these leading causes of death and preventable diseases.

Additional information about other leading causes of death, disease, and health issues, such as communicable diseases like tuberculosis, sexually transmitted infections, accidental deaths, and maternal and child health, including teen births and prenatal care, is available on the PHD website at www.sbcphd.org.

Health Ranking

than the state average (35 vs. 52), higher diabetes screening levels (87% vs. 81%) and higher levels of mammography (69% vs 62%). For more information go to www.countyhealthrankings.org/california/santa-barbara.

n the 2013 County Health Rankings produced by the Robert Wood Johnson Foundation and the University of Wisconsin Population Health Institute, Santa Barbara County ranked 14th on Health Outcomes and Health Factors out of the 57 counties reporting in California. The County ranked 18th on Mortality or length of life, 12th on the Health Behaviors of area residents, 10th in terms of the Physical Environment, 19th on Social and Economic conditions, and 16th for Clinical Care. Santa Barbara County residents were healthier than the state average on several specific behaviors, including adult smoking (11% of adults in Santa Barbara County vs. 14% statewide), adult obesity (20% vs. 24%), physical inactivity (16% vs. 18%), and sexually transmitted infections (338/1000 adults vs. 404/1000). Santa Barbara also had fewer hospital stays

healthy Mise for life

3 Behaviors

hree behaviors contribute to the majority of deaths in Santa Barbara County: poor diet, physical inactivity, and tobacco use. These behaviors directly correlate to vascular disease – heart disease and stroke, cancer, lung disease, and type 2 diabetes. Each behavior is discussed below, in addition to alternative behaviors for improved health, and an explanation of the services provided by Santa Barbara County to prevent these behaviors.

1) Poor Diet

nhealthy eating behaviors coincide with increased risk for type 2 diabetes, vascular disease, and cancers. Unhealthy eating behaviors are defined as consuming diets high in sugar, saturated fat, and salt.

One example of an unhealthy eating behavior is the consumption of soda, which is associated with increased body weight. In addition, high soda intake correlates to lower intakes of milk, calcium, and other nutrients. Soda intake is linked to an increased risk of several medical problems, especially diabetes. (http://www.ncbi.nlm.nih.gov/pubmed/17329656, Yale)

The 2011-2012 California Health Interview Survey found 12.8% of county children and teens had consumed 2 or more sodas or sugary drinks the day prior (vs. 15% for the entire state).

Prevention

here are specific eating behaviors and dietary patterns that can reduce the risk for chronic disease and obesity. For example, diets rich in fruits and vegetables, nuts, beans, fish, and whole grains are shown to reduce the risk of vascular disease and cancers compared to diets that include red and processed meats, highly processed and fast food, and soda. (http://www.ncbi.nlm.nih.gov/pubmed/12791618, Tufts University)

The 2011-2012 California Health Interview Survey found 39.8% of county residents had not visited fast food establishments in the prior week compared to 34.7% for the state. In the county, 42.1% of children were found to eat 5 or more servings of fresh fruit and vegetables each day (52.6% statewide).

In an effort to promote healthy eating in Santa Barbara County, the county offers free and reduced meals in schools, diet education in schools, WIC services which teach mothers about healthy nutrition for their family and provides them easier access to healthy foods. The Food Bank of Santa Barbara County also provides nutrition education services and donates six and a half million meals to Santa Barbara County residents each year based on one and a half pounds per meal.



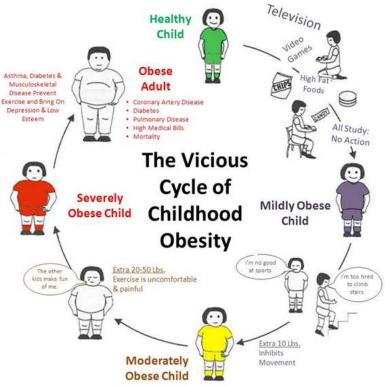
2) Physical Inactivity

ower than recommended activity levels are directly related to type 2 diabetes, vascular disease, and cancers. Low physical activity levels put a person at a higher risk for obesity, which is a mediating risk factor for the above diseases (http://www.ncbi.nlm.nih.gov/pubmed/9146444, U Alabama).

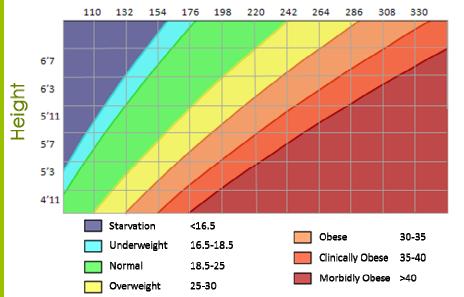
California Health Interview Survey 2011-2012 found 25.3% of county children were physically active for at least an hour every day in the previous week. The state percentage was 32.6%. Teens in the county, were slightly more active with 26.2% putting in at least an hour of activity every day in a typical week and faired considerably better than teens statewide (only 16.1%).

Obesity

poor diet and physical inactivity result in obesity. Obesity is a major problem that contributes to many chronic health problems and decreases the quality of life. Overweight and obesity are identified through a Body Mass Index (BMI) number.



Weight in Pounds



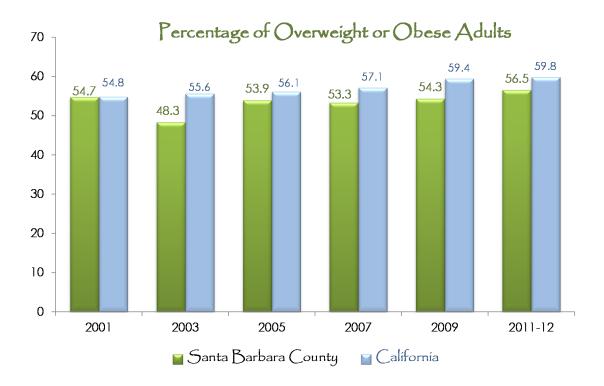
Calculating Your Body Mass Index

The BMI number is calculated from a person's weight and height. BMI provides a reliable indicator of body fatness for most people.



Percentage of Overweight or Obese Adults

According to the California Health Interview Survey, 56.5% of Santa Barbara County adults reported they were overweight or obese. This is compared to 59.8% of state residents.



Source: California Health Interview Survey 2011-12; http://ask.chis.ucla.edu/main/default.asp

Prevention

ngaging in physical activity aids in disease prevention, and also offers added health benefits such as weight management and improved psychological health.

The United States Department of Health recommends that children and adolescents do 60 minutes or more of physical activity daily. Adults should do at least 150 minutes a week of moderate intensity or 75 minutes of vigorous intensity activity throughout the week. (http://www.health.gov/paguidelines/guidelines/chapter3.aspx, http://www.health.gov/paguidelines/guidelines/chapter4.aspx)

The community design in Santa Barbara County has the power to encourage a healthy diet and active lifestyle through improved access to healthy foods and recreational facilities. "Residents of walkable neighborhoods who have good access to recreation facilities are more likely to be physically active and less likely to be overweight or obese. Residents of communities with ready access to healthy foods also tend to have more healthful diets" (Wang, http://www.ncbi.nlm.nih.gov/pubmed/19298418)

3) Tobacco Use

Smoking and use of tobacco products is the primary factor underlying many of the leading causes of death and premature death. This includes: heart disease, stroke, lung cancer and chronic obstructive pulmonary disease (COPD). The adult smoking rates shown in the chart below points to an increase in adult



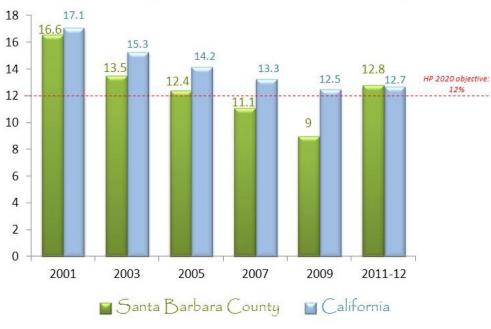
tobacco use from 9% in 2009 to 12% in 2011 in Santa Barbara County¹. At first glance, this apparent increase is alarming. However, these findings are not necessarily indicative of a rise in local tobacco use; rather they are more likely to be a reporting or statistical error. In 2009, the California Tobacco Control Program reported the adult smoking prevalence rate as 11.9%, or almost 12%. In surveys like these, there is typically a 5% margin of error, so it is not unusual that a rate would be off +/- a few percentage points. Also it should be noted that the rate had not changed dramatically during prior survey years,

thus the 12% rate is more in line with the trend data. This rate meets the Healthy People 2020 goal of 12%

and our county appears to be in line with tobacco use throughout the state.

This report focuses on and promotes healthy lifestyles, emphasizing the "quality of life". Thus, it is important to stress that for every person who dies from tobacco use, 20 more people suffer with at least one serious tobacco-related illness². Additionally, exposure to secondhand smoke has causal implications in numerous diseases. Most notably, it contributes to asthma onset and attacks in children and adults and is also the second leading cause of Sudden Infant Death Syndrome (SIDS)3.

Percentage of Adults and Teens Smoking



Source: California Health Interview Survey 2011-12; http://ask.chis.ucla.edu/main/default.asp

^{1.} Behavioral Risk Factor Surveillance System (BRFSS) 1984-2012. California Department of Public Health, California Tobacco Control Program, May 2013

^{2.} Healthy People Objectives, 2020, 8-28-13. http://www.healthypeople.gov/2020/topicsobjectives2020/overview.aspx?topicid=41

^{3.} U.S. Department of Health and Human Services: The Health Consequences of Involuntary Exposure to Tobacco Smoke: A Report of the Surgeon General—Executive Summary. U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Coordinating Center for Health Promotion, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2006

Prevention

here are health benefits associated with quitting smoking at any age, including:

- Within days reduced heart rate and blood pressure, increased sense of taste and smell
- O Within weeks improved circulation, reduced phlegm production and coughing/wheezing
- O Within months substantial improvements in lung function¹
- O Within years reduced the risk of cancer, heart disease and COPD
- O Quitting at age 30 reduced risk of premature death by more than 90%
- Θ Quitting at age 50 cuts premature death risk in half¹

Santa Barbara County offers help to tobacco users who want to quit – through community courses, referrals, and approved medications for qualified residents. Mini-grants are also provided to colleges, universities and to behavioral health agencies to help their clients, who have been shown to have high tobacco

use rates. Prevention projects focus on youth engagement, public education, policy development and advocacy. Priority areas include: reducing exposure to secondhand smoke to prevent disease, limiting access of tobacco to youth to prevent onset of nicotine addiction, enforcing local and state laws, and improving the retail environment. Of special interest is the emergence of alternative nicotine delivery devices, like electronic cigarettes which are gaining in popularity among youth² and adults and may be delaying quit attempts among current tobacco users. The program also facilitates an adult and youth coalition which provides guidance, support and activism for local projects. Finally, staff responds to inquiries and complaints about tobacco-related policy matters.





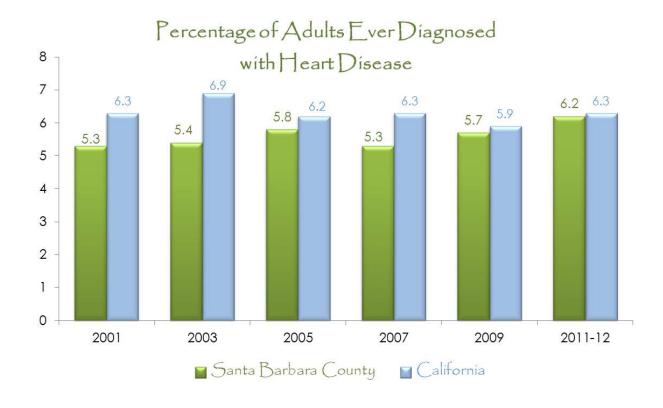
- 1. Harms of Smoking and Health Benefits of Quitting, National Cancer Institute Fact Sheet, References 17-20, accessed website November 6, 2013. http://www.cancer.gov/cancertopics/factsheet/Tobacco/cessation#r17
- 2. Centers for Disease Control and Prevention Press Release, "E-cigarette use more than doubles among U.S. middle and high school students from 2011-2012: More than 75% of youth users smoke conventional cigarettes too", 10/5/13. http://www.cdc.gov/media/releases/2013/p0905-ecigarette-use.html

4 Chronic Diseases

ach of the four chronic diseases (vascular disease, cancer, lung disease, and type 2 diabetes) that contributed to the majority of deaths in Santa Barbara County is explored below.

1) Vascular Disease- Heart Disease and Stroke

eart disease was the leading cause of premature and all deaths in Santa Barbara County in 2012, accounting for 773 deaths (Source: Statistical Master Death File, California Department of Public Health, 2012). Heart disease generally refers to clogging of arteries with cholesterol and fat deposits which restricts the flow of blood and oxygen to the heart. When the flow of blood to the heart is cut off, a heart attack results, causing permanent damage to the heart muscle. Heart disease is associated with high fat diets, lack of physical activity, and tobacco use and exposure to tobacco smoke. Family history of heart disease, older age, males, post menopausal women, and previous heart attack are also risk factors. 6.2% of local adults had been diagnosed with heart disease in 2011-2012, slightly below the state average of 6.3%.



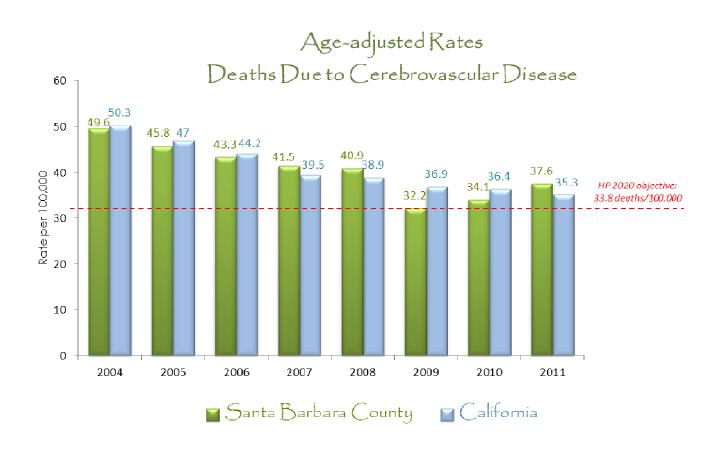
Source: California Health Interview Survey 2011-12; http://ask.chis.ucla.edu/main/default.asp

5 troke was the 3rd leading cause of all deaths (183 deaths) in Santa Barbara County in 2012 (Source: Statistical Master Death File, California Department of Public Health, 2012). A stroke occurs when the

blood supply to the brain is suddenly interrupted or when a blood vessel in the brain bursts, causing a lack of oxygen supply to the brain. Strokes can damage part of the brain causing various types of disability or impairment, and they can damage a sufficient part of the brain to cause death. High blood pressure, tobacco use, diabetes, high cholesterol, being overweight, physical inactivity, excessive alcohol use, older age, family history, and prior stroke or heart attack are risk factors for stroke. Age-adjusted stroke death rates in Santa Barbara County declined between 2004 and 2009 but the rate started to increase after 2009. In 2012, the rate of death due to stroke was 37.1% per 100,000. We have been above the target Healthy People 2020 of 33.8% and



above statewide levels in recent years (http://www.healthypeople.gov/2020/default.aspx).

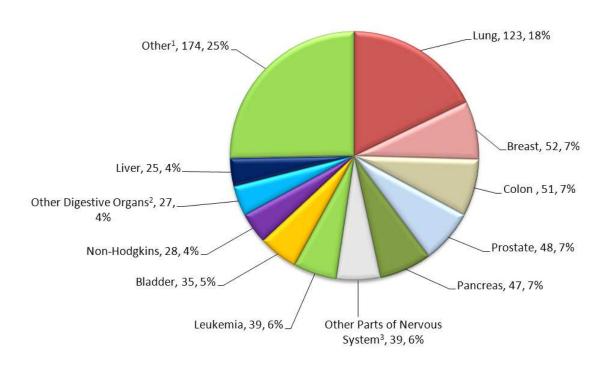


Source: California Health Interview Survey 2011-12; http://ask.chis.ucla.edu/main/default.asp

2) Cancer

onsidered as a whole, cancer was the 2nd leading cause of death in Santa Barbara County in 2012, responsible for 688 local deaths (Source: Statistical Master Death File, California Department of Public Health, 2012). Five types of cancer were responsible for approximately 46% of all cancer-related deaths. Lung cancer was responsible for the greatest number of cancer-related deaths, with 123 deaths. Breast cancer was the second most common type of deadly cancer, with 52 deaths, followed by colon cancer with 51 deaths, prostate cancer with 48 deaths and pancreatic cancer with 47 deaths. Many of the most common types of cancer are preventable with a healthy lifestyle and routine cancer screenings.

Cancer Deaths in Santa Barbara County



Source: Statistical Master Death File, California Department of Public Health, 2012

Other¹ includes cancer of the: Brain (24), Skin (21), Ovary (19), Kidney (19), Throat (18), Myeloma/Plasma Cancer (16), Stomach (14), Oral Cavity (13), Mesothelial Cancer (9), Female Genitalia (8), Other respiratory organs not including lungs (5), Thyroid (4), Bone (1), Testicular (1), other urinary organs not including bladder (1), Hodgkins Lymphoma (1)

Other Digestive Organs² does not include throat, colon, stomach, liver and pancreas cancers

Other Parts of the Nervous System³ does not include the thyroid or brain

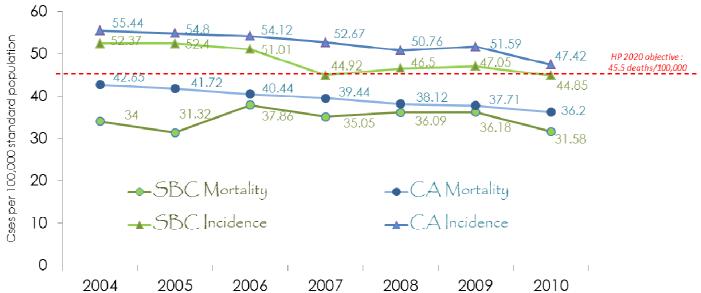


Lung Cancer

ung cancer was the leading cause of all cancer deaths and the 2nd leading cause of all deaths in Santa Barbara County in 2012 (Source: Statistical Master Death File, California Department of Public Health, 2012). Smoking and exposure to secondhand smoke is the major cause of lung cancer, but exposure to other carcinogens such as radon and asbestos are also risk factors for lung cancer.

Between 2004 and 2010, Santa Barbara County had lower rates of lung cancer and related deaths than California (http://www.ccrcal.org/). Both the state and county had lower rates of death due to lung cancer than the *Healthy People 2020* objective. In 2010 there were 197 new cases of lung cancer diagnosed in Santa Barbara County. Lung cancer deaths were probably less common locally because smoking rates are lower in Santa Barbara County than in the rest of the state.

Age-adjusted Incidence and Mortality Rates Lung and Bronchus Cancer





Breast Cancer

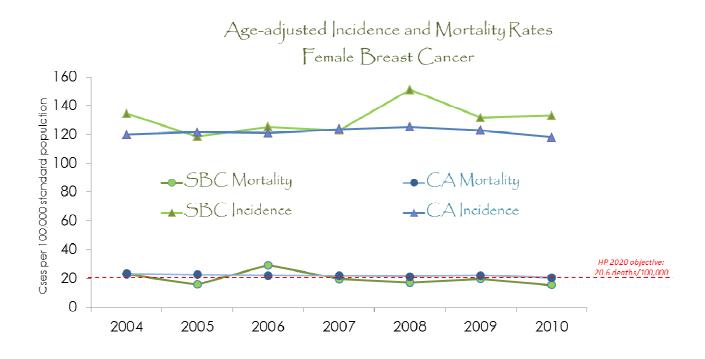
Pareast cancer was 2nd leading cause of cancer deaths, responsible for 52 female deaths in Santa Barbara County in 2012 (Source: Statistical Master Death File, California Department of Public Health, 2012). 302 new cases of breast cancer were diagnosed among local women in 2010 (http://



www.ccrcal.org/). While men can get breast cancer, it is very rare. Statewide, breast cancer is the most frequently diagnosed type of cancer among women, and is second only to lung cancer in cancer-based deaths among women (http://www.ccrcal.org/). Risk factors for developing breast cancer include older age, family history, race, early radiation of the chest area, beginning menstruation before age 12 or menopause after age 55, treatment with the drug DES, not bearing children, excessive alcohol use, being overweight, physical inactivity, and postmenopausal hormone therapy for more than five years.

Local age-adjusted death rates due to female breast cancer from 2004-2012 were comparable to the state rates (http://www.ccrcal.org/). Breast cancer prevention steps include getting annual breast exams and mammograms for

women over 40, limiting alcohol consumption, maintaining a healthy weight, and getting regular exercise. The Public Health Department offers free and low-cost breast exams through its Health Care Centers, and the Cancer Detection Program supports education and screening for eligible women.

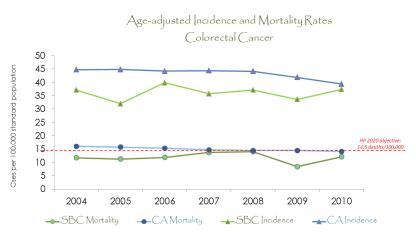


Source: http://www.ccrcal.org

Colon Cancer

olon cancer was the 3rd leading cause of all cancer deaths (51 deaths) in Santa Barbara County in 2012 (Source: Statistical Master Death File, California Department of Public Health, 2012). Also in 2010, there were 167 new cases of colorectal cancer diagnosed in Santa Barbara County (http://www.ccrcal.org/). Age adjusted rates for colon cancer are consistently lower in

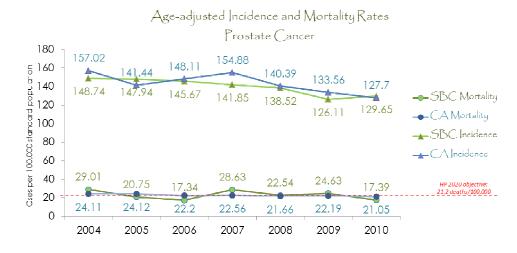
Santa Barbara County than the state rate and the Healthy People 2020 goal. Risk factors include older age, family history, inflammatory bowel disease, physical inactivity, being overweight, alcohol use, diet high in fat and low in fruits and vegetables, and smoking. Prevention steps include eating a diet low in fat and high in fruits and vegetables, getting regular exercise, and having colorectal exams, including colonoscopy, for people 50 and older.



Source: http://www.ccrcal.org/

Prostate Cancer

In 2012, prostate cancer was the 4th leading cause of cancer deaths among men in Santa Barbara County, with 48 related deaths (Source: Statistical Master Death File, California Department of Public Health, 2012). Older age, race (African-American men are generally at higher risk), diet, family history, and possibly inactivity are risk factors for developing prostate cancer. Local age-adjusted rates of death due to prostate cancer in 2010 were less than the state average and below the Healthy People 2020 goal. In 2010, there were 264 new cases of prostate cancer diagnosed in Santa Barbara County (http://www.ccrcal.org/). While prostate cancer cannot be prevented,

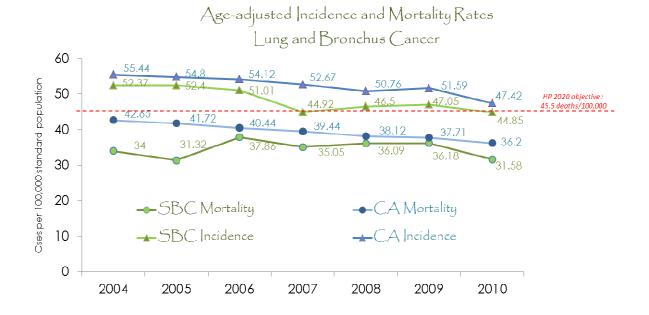


Source: http://www.ccrcal.org/

eating a diet low in fat and high in fruits and vegetables may help reduce the risk of it developing. Black men and men with a family history of prostate cancer should begin having annual Prostate Specific Antigen (PSA) tests at age 40. Men with no clear risk factors should consult their doctors about when to digital rectal have exams and/or PSA blood tests.

3) Lung Disease

ung disease or Chronic Obstructive Pulmonary Disease (COPD) including chronic bronchitis, emphysema and asthma, was the 6th leading cause of death in Santa Barbara County in 2012, responsible for 115 deaths (Source: Statistical Master Death File, California Department of Public Health, 2012). Smoking is the primary cause of COPD. There is no cure for COPD, although medications can assist with breathing difficulties. Not smoking is the best prevention for COPD.



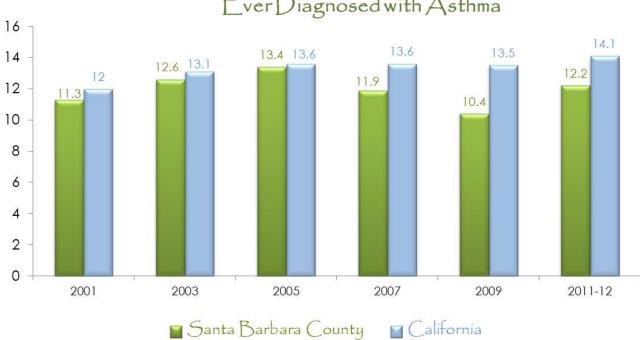
Source: http://www.apps.cdph.ca.gov/vsq/



Asthma

Asthma is a chronic inflammatory disease of the airways, characterized by airflow obstruction, wheezing, coughing, chest tightness, and shortness of breath. The causes of asthma are not known but environmental and genetic factors are believed to play a role. Allergies often are associated with asthma, but not all people with allergies suffer from asthma. Environmental risk factors include maternal smoking during pregnancy, smoking and exposure to second hand smoke, and air pollutants. Asthma diagnoses in Santa Barbara county increased from 2001-2005, but decreased from 2005-2009, with 10.4% of area residents over one year old diagnosed with asthma in 2009. The rate of asthma diagnosis began increasing in 2011/12 with 12.2% of area residents over one year of age reporting an asthma diagnosis (California Health Interview Survey; http://ask.chis.ucla.edu/main/default.asp). Asthma can generally be managed with medication and regular medical care.

Percentage of Those Age 1 Year and Older Ever Diagnosed with Asthma



Source: California Health Interview Survey 2011-12; http://ask.chis.ucla.edu/main/default.asp





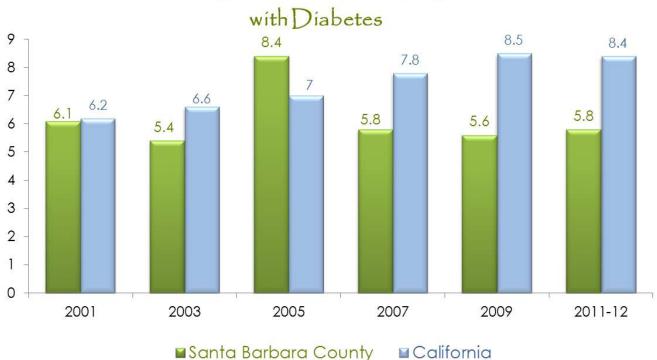
4) Diabetes

jabetes Mellitus (type 2) was the 9th leading cause of all deaths in Santa Barbara County in 2012, accounting for 68 deaths (Source: Statistical Master Death File, California Department of



Public Health, 2012). Type 2 diabetes is associated with being overweight or obese, lack of physical activity, and older age. Diabetes is generally manageable through dietary control and medication. Unmanaged, diabetes can cause blindness, kidney failure, circulatory problems, and death. In 2011/12, 5.8% of county adults reported they had been diagnosed with diabetes, with significantly higher rates among Latinos (California Health Interview Survey 2011-12; http://ask.chis.ucla.edu/main/default.asp). In 2012, Latinos had an age adjusted death rate of 20.57% due to diabetes per 100,000, compared to 18.7% per 100,000 for Whites (Source: Statistical Master Death File, California Department of Public Health, 2012).

Percentage of Adults Ever Diagnosed



Source: California Health Interview Survey 2011-12; http://ask.chis.ucla.edu/main/default.asp

Leading Causes of Death and Premature Death

n 2012 there were 2,986 deaths recorded in Santa Barbara County. More than 50% of these deaths were caused by four diseases. Heart disease and stroke caused by blocked blood vessels were the leading causes of death, accounting for 956 deaths in 2012. All types of cancer combined were the 2nd leading cause of death, with 688 deaths in 2012. Lung disease, including COPD and asthma, was the 6th leading cause of death, accounting for 115 county deaths in 2012. And type 2 diabetes was the 9th leading cause of death with 68 deaths in 2012 (Source: Statistical Master Death File, California Department of Public Health, 2012). All of these chronic conditions are significantly impacted by behavior.

Death rates, adjusted to compensate for group differences in age, varied by ethnicity for some leading causes of death. For example, death rates due to diabetes and liver disease were significantly higher



among Latinos than Whites. Death rates for most leading causes of death were higher among Whites, despite the fact that Latinos faced more health risk factors, such as higher rates of poverty and lower levels of health insurance, than Whites. This is a national as well as local phenomenon referred to as the Latino health paradox.

The 10 leading causes of all death and premature death in Santa Barbara County in 2012 are listed below (Source: Statistical Master Death File, California Department of Public Health, 2012). Premature or preventable deaths are defined as deaths that oc-

curred prior to the age of 75, as the average life span in the US is nearly 80 years. The number of Potential Years of Life Lost (PYLL) by premature death is the difference between the actual age of death and 75, and is a meaningful indicator of the impact of premature death. By understanding the leading causes of premature death and the contributing factors, we can help prevent premature death and disease, and increase both the quality and length of life in Santa Barbara County.

Leading Causes of Death & Premature Death in Santa Barbara County in 2012

Total Number of Deaths (All Causes): 2,986

Total Number of Premature Deaths (All Causes): 1093
Potential Years of Life Lost (PYLL): 20,392

Leading Causes of Death	No. of Deaths	Leading Causes of Premature ¹ Death	PYLL	No. of Deaths	
1. Heart Disease	773	1. Heart Disease	3,307	213	
Stroke/Cerebrovascular Disease	183	2. Suicide	1,338	42	
3. Alzheimer's Disease	171	3. Motor Vehicle Accidents	993	29	
4. Mental/Behavioral Disorders ²	142	4. Chronic Liver Disease & Cirrhosis	972	50	
5. Lung Cancer	123	5. Accidental Drug Overdose	940	29	
6. Chronic Lower Respiratory Disease ³	115	6. Stroke/Cerebrovascular Disease	761	40	
7. Disease of the Digestive System	84	7. Unintentional Injuries ⁴	699	45	
8. Diabetes Mellitus (Type 2)	68	8. Mental/Behavioral Disorders ²	667	31	
9. Chronic Liver Disease & Cirrhosis	56	9. Diseases of the Digestive System	655	31	
10. Influenza and Pneumonia	53	10. Lung Cancer	578	60	
11. Breast Cancer	52	11. Diabetes Mellitus (Type 2)	462	26	
12. Suicide	52	12. Breast Cancer	458	31	
13. Colon Cancer	51	13. Colon Cancer	388	23	
14. Prostate Cancer	48	14. Chronic Lower Respiratory Disease ³	310	29	
15. Diseases of the Nervous System ⁵	46	15. Pancreatic Cancer	269	22	

Source: Statistical Master Death File, California Department of Public Health, 2012

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^{1.} Among ages 1-75 years

^{2.} Dementia, Schizophrenia, Mental Retardation

^{3.} Chronic Obstructive Pulmonary Disease (COPD), Emphysema,

^{4.} Does not include motor vehicle accidents, accidental drug overdoses

^{5.} Meningitis, Multiple Sclerosis, Epilepsy

Premature deaths that are more frequent in a younger population present a larger number of years of life lost for each death. Thus, suicide, which is too common among adolescents and young adults, reflects 1,338 years of lives lost for the 42 deaths in this category. Many of the causes of premature death are preventable with lifestyle and environmental changes. For example, heart disease can be reduced through dietary changes, reductions in smoking, and increased physical activity. Motor vehicle deaths can be prevented through safer driving, not drinking or using drugs while driving, and use of seatbelts. Accidental drug overdose and liver disease can be reduced through reduced use of drugs and alcohol and appropriate use of prescription medication.

The causes of death do vary between Non-Hispanic Whites and Hispanics in Santa Barbara County. This is consistent with what is seen nationwide.

Leading 10 Causes of Death in Whites Santa Barbara County 2012 Age Adjusted Rates Per 100,000 U.S. Standard Population

Cause of Death ²	No.	% of all Deaths	Crude Rate per 100,000	SB County ³
Diseases of the heart (100-109, 111,113,120-151)	614	26.5	311.0	165.7
Malignant neoplasms (C00-C97)	534	23.1	270.4	161.6
Alzheimer's disease (G30)	158	6.8	80.0	36.5
Cerebrovascular diseases (160-169)	142	6.1	71.9	37.7
Mental and behavioral disorder (F01-F99)	115	5.0	58.2	30.6
Chronic lower respiratory diseases (J40-J47)	101	4.4	51.2	27.7
Accidents (unintentional injuries) (V01-X59, Y85-Y86)	71	3.1	36.0	19.8
Diseases of the digestive system (K00-K92) ⁴	66	2.9	33.4	29.4
Diabetes mellitus (E10-E14)	41	1.8	20.8	12.3
Influenza and pneumonia (J09-J18)	40	1.7	20.3	10.9
All other causes (residual)	433	18.7	219.3	132.4
All causes	2,315	100.0	1172.4	664.6
	Diseases of the heart (100-109, 111,113,120-151) Malignant neoplasms (C00-C97) Alzheimer's disease (G30) Cerebrovascular diseases (160-169) Mental and behavioral disorder (F01-F99) Chronic lower respiratory diseases (J40-J47) Accidents (unintentional injuries) (V01-X59, Y85-Y86) Diseases of the digestive system (K00-K92) ⁴ Diabetes mellitus (E10-E14) Influenza and pneumonia (J09-J18) All other causes (residual)	Diseases of the heart (100-109, 111,113,120-151) Malignant neoplasms (C00-C97) 534 Alzheimer's disease (G30) Cerebrovascular diseases (160-169) Mental and behavioral disorder (F01-F99) Chronic lower respiratory diseases (J40-J47) 101 Accidents (unintentional injuries) (V01-X59, Y85-Y86) Diseases of the digestive system (K00-K92) ⁴ 66 Diabetes mellitus (E10-E14) Influenza and pneumonia (J09-J18) All other causes (residual) 433 All causes	Cause of Death No. Deaths Diseases of the heart (100-109, 111,113,120-151) 614 26.5 Malignant neoplasms (C00-C97) 534 23.1 Alzheimer's disease (G30) 158 6.8 Cerebrovascular diseases (160-169) 142 6.1 Mental and behavioral disorder (F01-F99) 115 5.0 Chronic lower respiratory diseases (J40-J47) 101 4.4 Accidents (unintentional injuries) (V01-X59, Y85-Y86) 71 3.1 Diseases of the digestive system (K00-K92) ⁴ 66 2.9 Diabetes mellitus (E10-E14) 41 1.8 Influenza and pneumonia (J09-J18) 40 1.7 All other causes (residual) 433 18.7 All causes 2,315 100.0	Diseases of the heart (100-109, 111,113,120-151) Malignant neoplasms (C00-C97) Alzheimer's disease (G30) Cerebrovascular diseases (160-169) Mental and behavioral disorder (F01-F99) Mental and behavioral diseases (J40-J47) Accidents (unintentional injuries) (V01-X59, Y85-Y86) Diseases of the digestive system (K00-K92) ⁴ Might be diseased (G30) Diseases of the digestive system (K00-K92) ⁴ All other causes (residual) All causes No. Deaths 100,000 100,000 111.0 26.5 311.0 270.4 280.0 80.0 1158 6.8 80.0 115 5.0 58.2 115 5.0 58.2 111 4.4 51.2 4.5 4.7 4.7 4.8 4.9 4.9 4.9 4.9 4.9 4.0 4.7 4.0 4.7 4.0 4.7 4.0 4.7 4.0 4.7 4.0 4.7 4.0 4.7 4.0 4.7 4.0 4.7 4.0 4.7 4.0 4.7 4.0 4.7 4.0 4.0

^{1.} Rank is based on the number of cases in the County of Santa Barbara

Source: Statistical Master Death File, California Department of Public Health, 2012

Leading 10 Causes of Death in Hispanics in Santa Barbara County 2012 Age Adjusted Rates Per 100,000 U.S. Standard Population

Rank ¹	Cause of Death ²	No.	% of all Deaths	Crude Rate per 100,000	SB County ³
1	Diseases of the heart (100-109, 111,113,120-151)	124	24.7	65.1	134.15
2	Malignant neoplasms (C00-C97)	109	21.7	57.3	107.27
3	Accidents (unintentional injuries) (V01-X59, Y85-Y86)	26	5.2	13.7	14.99
4	Cerebrovascular diseases (160-169)	24	4.8	12.6	25.37
4	Chronic liver/ Cirrhosis (K70, K73-K74)	24	4.8	12.6	20.75
6	Diabetes mellitus (E10-E14)	21	4.2	11.0	23.86
7	Mental and behavioral disorder (F01-F99)	19	3.8	10.0	20.01
8	Diseases of the digestive system (K00-K92)*	15	3.0	7.9	15.28
9	Alzheimer's disease (G30)	11	2.2	5.8	14.14
10	Chronic lower respiratory diseases (J40-J47)	9	1.8	4.7	12.10
	All other causes (residual)	120	23.9	63.0	102.13
	All causes	502	100.0	263.7	490.06

^{1.} Rank is based on the number of cases in the County of Santa Barbara

Source: Statistical Master Death File, California Department of Public Health. 2012





^{2.} Based on the International Classification of Diseases, Tenth revision, 1992 $\,$

^{3.} State of California, Dept. of Finance, Race/Ethnic Population with Age and Sex Detail, 2000-2050. Sacramento, California, July 2007.

^{4.} Excluding chronic liver disease and cirrhosis (K70, K73-K74)

^{2.} Based on the International Classification of Diseases, Tenth revision, 1992

^{3.} State of California, Dept. of Finance, Race/Ethnic Population with Age and Sex Detail, 2000-2050. Sacramento, California, July 2007.

^{4.} Excluding chronic liver disease and cirrhosis (K70, K73-K74)

Conclusions

ccording to the data presented in this report, Santa Barbara County residents are healthier than other California residents in several categories, such as lower mortality rates for cancer and a smaller percentage of individuals' age 1 year and older ever diagnosed with asthma. There are also a number of areas where the county has displayed improvement over time. Generally, trends are in the right direction and Santa Barbara County appears strong in comparison to other counties. Our county ranks 14th in Health Outcomes and Health Factors out of the 57 California counties reporting, according to 2013 County Health Rankings (http://www.cdph.ca.gov/pubsforms/Pubs/OHIRProfiles2013.pdf).

Santa Barbara County needs to make improvements in several areas. The percentage of adults in our county who are overweight or obese is reported at 56.5%, which is lower than the state percentage of 59.8%, but far from optimal. The current high levels of obesity mean too many residents will be experiencing chronic health conditions and poor outcomes in the future. We must address obesity to ensure a healthier population.

One of the most promising insights from the data is that many of the chronic diseases, poor outcomes and many of the premature deaths could be improved through prevention. The three key behaviors of poor diet, physical inactivity and tobacco use are behaviors that we can change. The Affordable Care Act will increase the number of residents who have health care insurance, thus many more residents will have access to preventive health care. Preventive health care services will identify health needs earlier when successful outcomes are more likely.

The Public Health Department offers programs to assist residents in addressing the three key behaviors of poor diet, physical inactivity and tobacco use:

- The Women, Infants and Children (WIC) program provides supplemental foods, health care referrals, and nutrition education for low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, and to infants and children up to age five who are found to be at nutritional risk. For more information please call (805) 681-5279.
- O The Nutrition Network for a Healthy California program provides education and initiatives that promote healthy eating and physical activity in low income populations. For more information please call (805) 346-7275.
- The Tobacco Control Program provides leadership, experience and research to promote health and quality of life by advocating social norms that create a tobacco-free environment. For more information please call (805) 681-5407.

The Santa Barbara County Public Health Department has great opportunities to improve behaviors and prevent or treat disease through our Health Care Centers. The Health Care Centers are located throughout the county. Competent medical providers, armed with data and science, work with patients to promote healthy behaviors, and initiate preventive high quality services. Our healthcare practitioners are on the ground and implement the concepts that are presented in this report. Working together we can stay healthy!









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APPENDIX

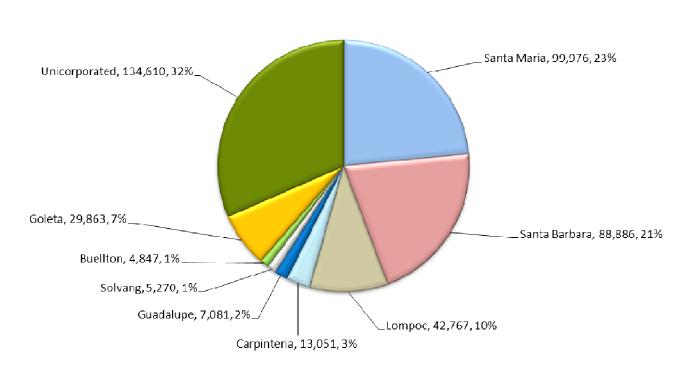
Characteristics of Santa Barbara County Residents

Age, education, income, and other factors influence health. Demographic information about the people of Santa Barbara County is provided below. This information provides a context for better understanding the health needs of our communities.

Population

The majority of Santa Barbara County residents live in the cities of Santa Maria and Santa Barbara, and the surrounding unincorporated areas (Source: State of California, Department of Finance, E-4 Population Estimates for Cities, Counties and the State, 2001-2015, with 2000 Benchmark. Sacramento, California, May 2010). Santa Maria has grown at a faster rate than other cities in the County in recent years.

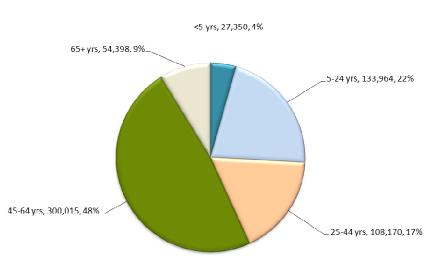
Population by City



Age

The population is generally younger in the northern part of the County, and older in the south. From 2009-2011 about 6% of the residents of the City of Santa Barbara were under 5 years old in contrast to 9.4% of the population in Santa Maria. Conversely, 9.2% of Santa Maria residents were 65 or older compared to 14% of Santa Barbara residents. (Source: State of California, Department of Finance, Population Projections for California and Its Counties 2000-2050, Sacramento, California, July 2007.)

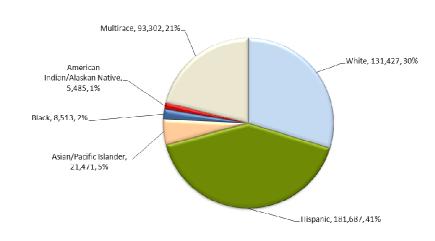
Population by Age Group



Ethnicity

While 30% of the Santa Barbara County population is White, the Hispanic population (41%) has grown significantly in recent years (Source: State of California, Department of Finance, Population Projections for California and Its Counties 2000-2050, Sacramento, California, July 2007). The

Population by Race/Ethnicity



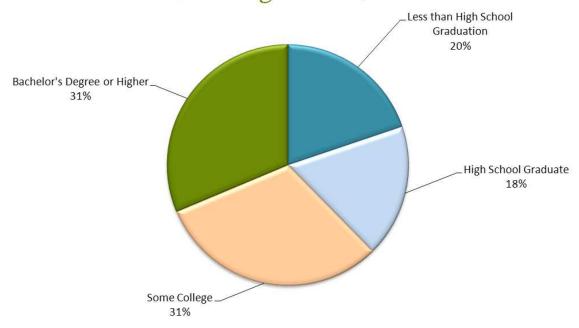
northern part of the County has a much higher percentage of Hispanic, with 71.1% of Santa Maria city residents identified as Hispanic, compared to 41.2% of Santa Barbara City residents, from 2009-2011.

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F ducation

ducation levels are moderately high in Santa Barbara County, with 62% of residents 25 and older having completed some college (Source: US Census 2009-2001 American Community Survey 3-Year Estimates). People residing in the southern part of the County tend to have higher education levels. According to US Census data for 2009-2011, 83.3% of Santa Barbara city residents 25 and older have graduated from high school compared to 61.4% in Santa Maria.

Percentage by Education Level Attainment of Those Age 25 and Older





ncome

In 2010-11, Santa Barbara County had a higher percentage of people living below the Federal Poverty Level (22.6%) than average for the State (18.7%). In 2010-11, almost one third of surveyed Hispanics in the County (33.8%) were living below the poverty level, compared to 14.7% of surveyed Whites. Since 2001 (17.1%) through 2010-11 (22.6%), there was a major increase in amount of people living below the Federal Poverty Level in Santa Barbara County (California Health Interview Survey 2011-12; http://ask.chis.ucla.edu/main/default.asp).

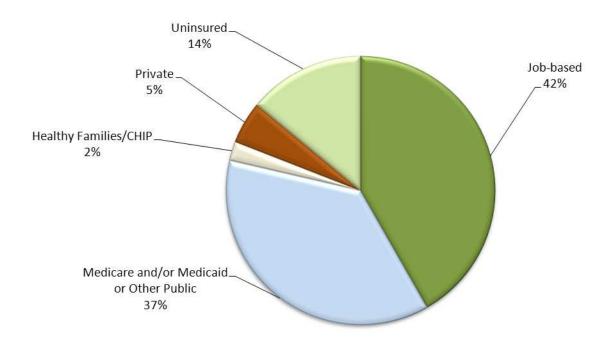


Percentage of Population Below Federal Poverty Level 25.0% 22.6% 19.0% 20.0% 17.5% 17.2% 17.1%_____ 18.7% 17.8% 16.9% 15.9% 15.7% 15.1% 14.5% 15.0% 10.0% 5.0% 0.0% 2001 2003 2005 2007 2009 2011-12 ■ Santa Barbara County ■ California

Health Insurance

ealth insurance is a key factor influencing people's access to medical care. People with health insurance are more likely to access preventive and treatment services than those without. In 2010-11, 14% of surveyed County residents had no health insurance for all or part of the year. Hispanics were much more likely than Whites to be uninsured, with 24.6% of Hispanics ages 0-64 lacking health insurance at the time of the survey, compared to 7.5% of Whites in this age group(Source: California Health Interview Survey 2011-12; http://ask.chis.ucla.edu/main/ default.asp). Health Care Reform is expected to bring major changes in health insurance coverage beginning January 2014.

Percentage of Current Health Insurance Coverages



Santa Barbara County

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Santa Maria Health Care Center 2115 Centerpointe Pkwy. Santa Maria, CA 93455 805-346-8410

Lompoc Health Care Center 301 N R St. Lompoc, CA 93436 805-737-6400

Franklin Health Care Cente<mark>r</mark> 1136 E Montecito St. Santa Barbara, CA 93103 805-568-2099

Carpinteria Health Care Center 931 Walnut Ave. Carpinteria, CA 93013 805-560-1050