



INYO COUNTY COMMUNITY HEALTH ASSESSMENT REPORT

May 29, 2024

Prepared for:
Inyo County Health and Human Services

Prepared by:
Stantec



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Table of Contents

EXECUTIVE SUMMARY	I
METHODS	i
COMMUNITY PROFILE	ii
SOCIAL DETERMINANTS OF HEALTH	iv
ENVIRONMENTAL FACTORS	xii
HEALTH BEHAVIORS	xii
HEALTH STATUS AND OUTCOMES	xvi
ACRONYMS / ABBREVIATIONS.....	XVIII
INTRODUCTION	1
INYO COUNTY COMMUNITY HEALTH ASSESSMENT.....	2
Methods	2
Interpreting This Report	2
Primary Data Collection	4
Secondary Data Collection.....	6
Data Caveats and Limitations	7
Community Profile	8
Geography.....	8
Age	10
Sex/Gender	11
Race/Ethnicity	12
Language	15
Marital Status	16
1 SOCIAL DETERMINANTS OF HEALTH	1
1.1 Education Access & Quality	2
1.2 Economic Stability	2
Employment	2
Income	5
Food insecurity.....	6
1.3 Neighborhood & Built Environment	7
Housing Security & Conditions	7
Local Built Environment	11
1.4 Social and Community Context	13
Social Support Networks and Community Cohesion Characteristics	13
Bullying and Harassment within Schools	14
Crime and Incarceration	15
Discrimination.....	16
Violence	19
1.5 Healthcare Access & Quality	20
Healthcare Facility Accessibility, Capacity, and Distribution.....	20
Health Insurance Coverage and Access to Affordable Care	26
Healthcare Workforce Capacity and Distribution	29
2 ENVIRONMENTAL FACTORS.....	30
2.1 Air Quality	30
2.2 Climate.....	31



3	HEALTH BEHAVIORS	32
3.1	Health Risk Behaviors	33
	Cigarette & E-Cigarette Use	33
	Substance Use and Misuse	34
	Sexual Behaviors and Reproductive Health	35
3.2	Health Protective Factors	36
	Maternal and child health	36
	Physical activity	38
	Healthy eating	39
	Preventative health behaviors.....	40
4	HEALTH STATUS & OUTCOMES	42
4.1	Chronic Diseases	46
	Cancer	46
	Cardiovascular Disease and Stroke.....	47
	Chronic Lower Respiratory Diseases.....	52
	Obesity	54
	Diabetes	55
	Chronic Liver Disease and Cirrhosis.....	57
	Alzheimer's Disease.....	57
4.2	Infectious Diseases	58
	Sexually Transmitted Infections	58
	HIV	61
	Influenza and Pneumonia	62
	Coronavirus Disease 2019.....	62
	Valley Fever	64
4.3	Accidents and Unintentional Injuries	64
4.4	Maternal and Child Health.....	65
4.5	Mental Health	66
4.6	Oral Health	68
	COMMUNITY ASSETS AND RESOURCES.....	70
	Description of community organizations and programs that promote health among Inyo County community members	70
	Identification of key stakeholders and roles in community health	70
	REFERENCES	71
	APPENDIX	A-1
A.	INYO COUNTY 2023 COMMUNITY HEALTH SURVEY QUESTIONNAIRE	A-1
B.	INYO COUNTY 2023 COMMUNITY HEALTH SURVEY RESPONSES	B-1



Executive Summary

This community health assessment provides an understanding of Inyo County's current health status and key health needs and issues through comprehensive data collection and analysis. Through this assessment, the County of Inyo Department of Health and Human Services (Inyo HHS) gathered critical local knowledge and perceptions about the conditions of the community, the health of residents and the capacity of the local public health system to meet the community's needs, in order to inform the public, stakeholders, and policymakers.

This assessment evaluates **Social Determinants of Health**, **Environmental Factors**, **Health Behaviors**, and **Health Status and Outcomes**.

METHODS

The Inyo County community health assessment is a compilation and synthesis of multiple streams of both new and existing data. Primary data were collected by Inyo HHS through a survey tool deployed between August 18 and October 31, 2023. A total of 281 Inyo County community members completed the survey.

Secondary data, or existing data collected previously by large organizations and institutions, were collected from the following sources:

- United States Census Bureau
- Centers for Disease Control and Prevention
- Environmental Protection Agency
- Federal Bureau of Investigations
- Feeding America
- National Cancer Institute
- KidsData
- County Health Rankings
- State of California



COMMUNITY PROFILE

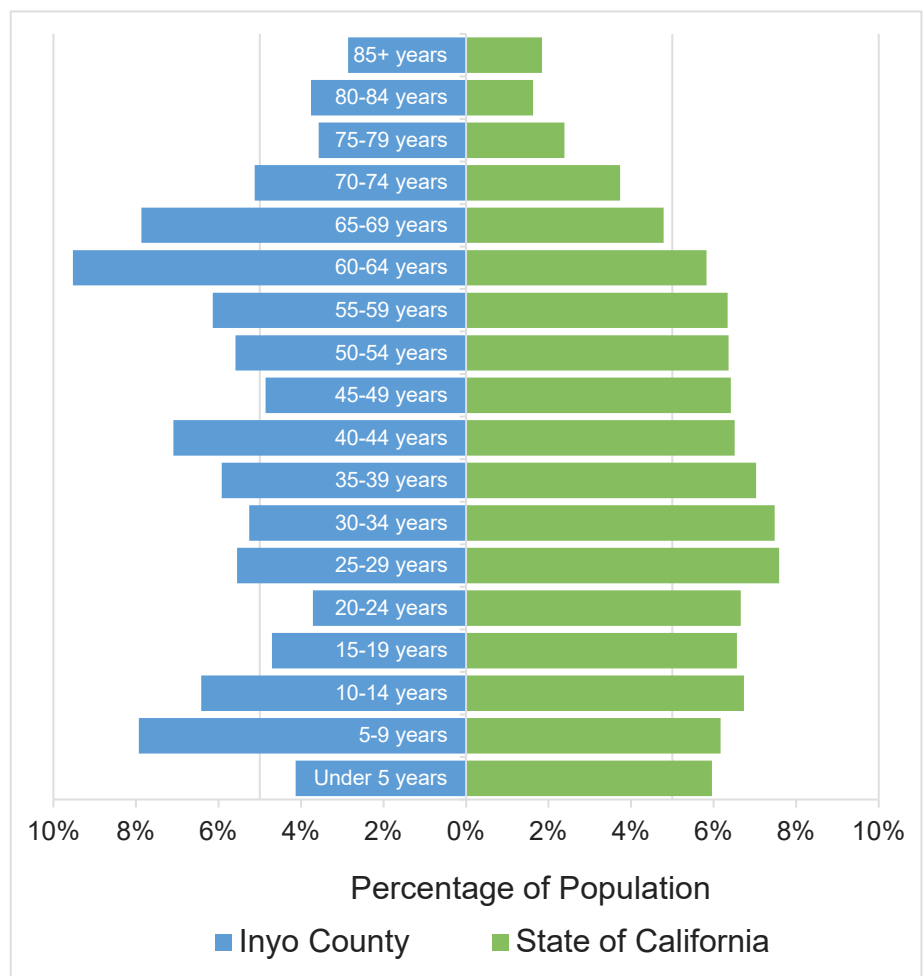
Inyo County is the second-largest county in California with an area of 10,227 square miles. Inyo County (population of 19,016) is one of 27 rural counties in California (California State Association of Counties; United States Census Bureau "2020 Decennial Census"). Most of the population lives in the following incorporated cities and census designated places: Bishop (n=3,800), Dixon Lane-Meadow Creek (n=2,835), West Bishop (n=2,481), Lone Pine (n=1,580), and Big Pine (n=1,570), based on the 2021 ACS 5-year estimates (United States Census Bureau "2017-2021 ACS 5-year Estimates"). Additionally, there are approximately 15 smaller communities in Inyo County with populations of less than 1,000 (United States Census Bureau "2017-2021 ACS 5-year Estimates").



19,016

Inyo County Population

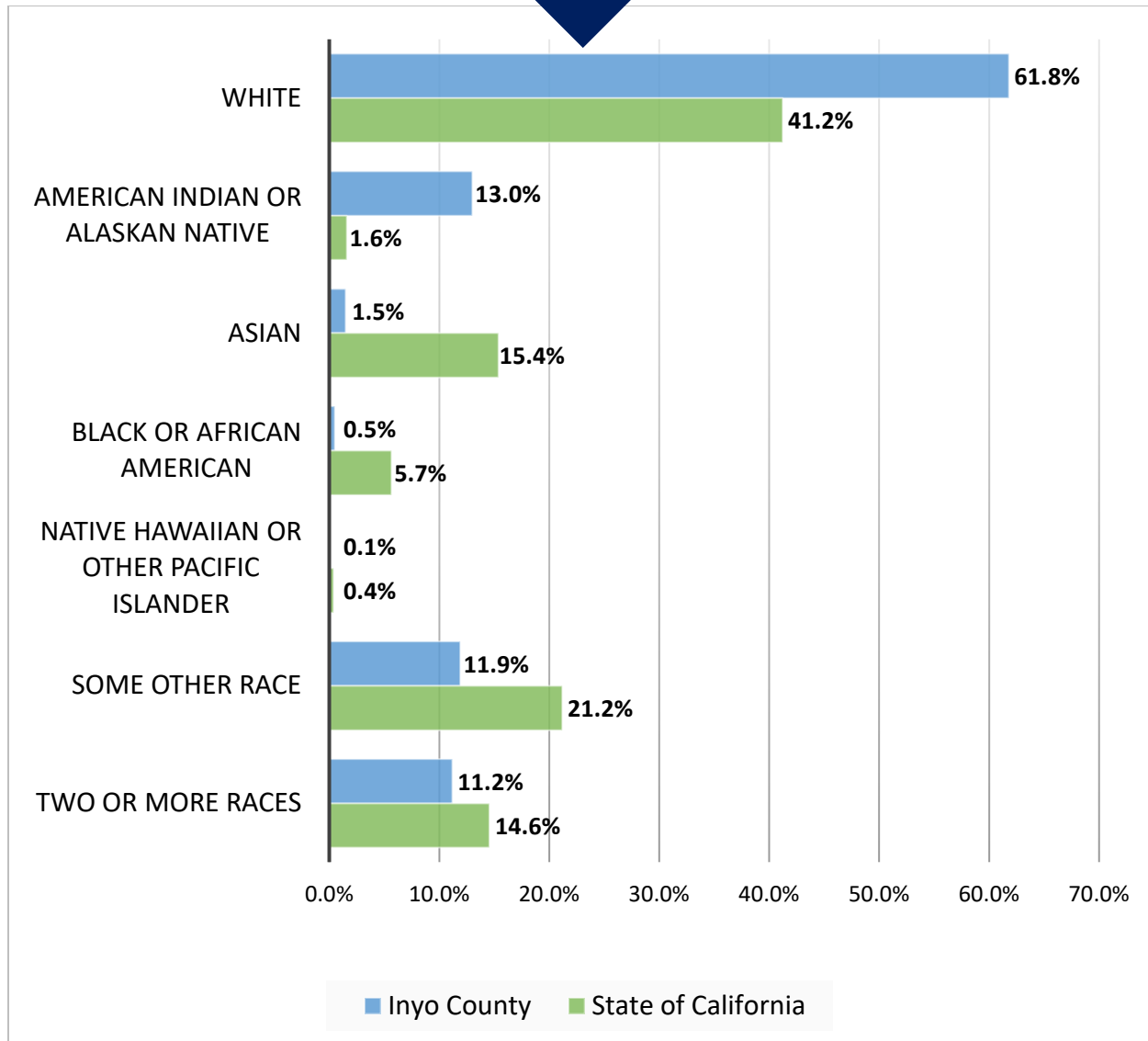
**Inyo County
has a median
age of 44.5
years.**



Source: United States Census Bureau "2017-2021 ACS 5-year Estimates"



Inyo County features an American Indian/Alaskan Native population that is proportionally approximately ten times that of California.



Source: United States Census Bureau "2020 Decennial Census"



SOCIAL DETERMINANTS OF HEALTH

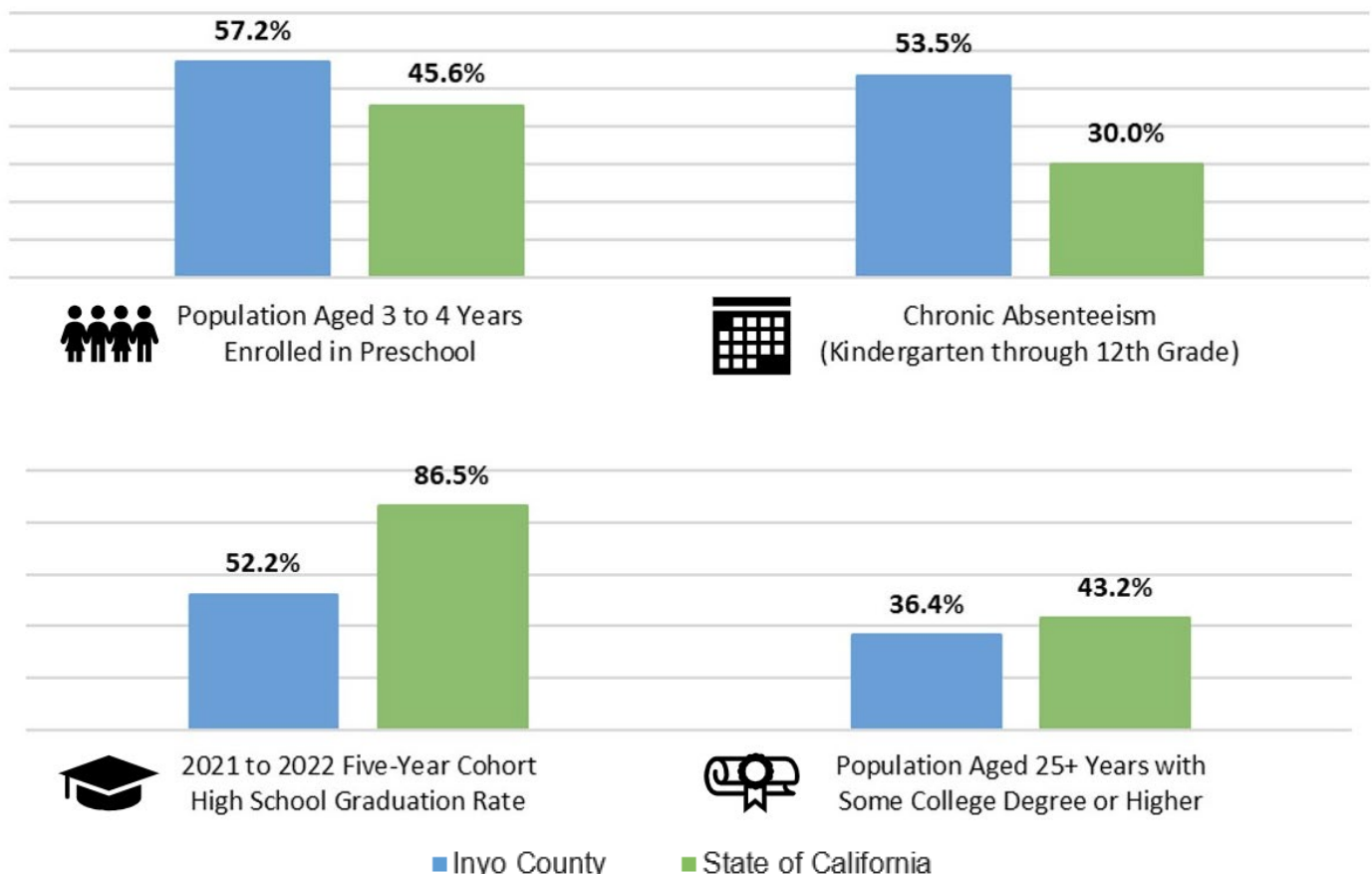
Social determinants of health are non-medical factors that are related to the ways people live, work, learn, and age and can impact health status and quality of life.

The social determinants of health included in this report cover the following areas:

- Education Access and Quality
- Economic Stability
- Neighborhood and Built Environment
- Social and Community Context
- Healthcare Access and Quality

EDUCATION ACCESS AND QUALITY

Education is associated with healthier and longer lives. Higher education levels are associated with reduced risk for premature death and conditions such as heart disease, high blood pressure, diabetes, anxiety, and depression, as well as positive impacts on employment options, permitting access to higher-quality housing, psychosocial resources, and improved social connectivity.





Inyo County 2023 Community Health Survey: Key Findings

- Minority groups experience higher rates of discouragement by a teacher or advisor from seeking higher education than non-minority groups.



ECONOMIC STABILITY

Economic stability is directly impacted by employment and poverty, and relates to an individual's ability to afford healthy foods, healthcare, and housing.

Employment	Civilian Unemployment Rate (range, 2017-2021)	2.3% - 3.0%	2.8% - 4.8%
	Percent of Population Claiming Veteran Status	9.0%	4.8%
Income	Median Income	\$60,925	\$84,097
	Percent of Population Living in Poverty	10.8%	12.3%



			
Food Insecurity	Food Insecurity Rate	10.2%	10.5%
	Percent of Low-Income Residences with Limited Access to Groceries	8.0%	3.0%

NEIGHBORHOOD AND BUILT ENVIRONMENT

The neighborhood and built environment encompass areas where people live, work, learn, play, age, and worship. There are a number of factors related to the health and safety risks of a neighborhood or built environment, including housing security and conditions the local built environment.



There are **7,823** occupied households out of **9,457** housing units in **Inyo County**.

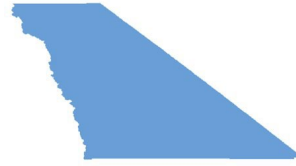


The average number of people who occupy a housing unit is **2.3**.

Inyo County 2023 Community Health Survey: Key Findings

- The majority of survey respondents selected “**affordable housing**” as the top component of a healthy community.
- When asked what would most improve the environment in the community, almost half of respondents selected “**more affordable housing options for residents.**”
- When asked what would most improve their life, a majority of respondents selected “**affordable housing.**”





Monthly Costs			
		Inyo County	California
	Median Mortgage	\$2,050	\$2,548
	Median Rent	\$988	\$1,698
Vacancy Status			
		Inyo County	California
	Rental Vacancy Rate	0.7	1.0
	Owner Vacancy Rate	3.5	3.9



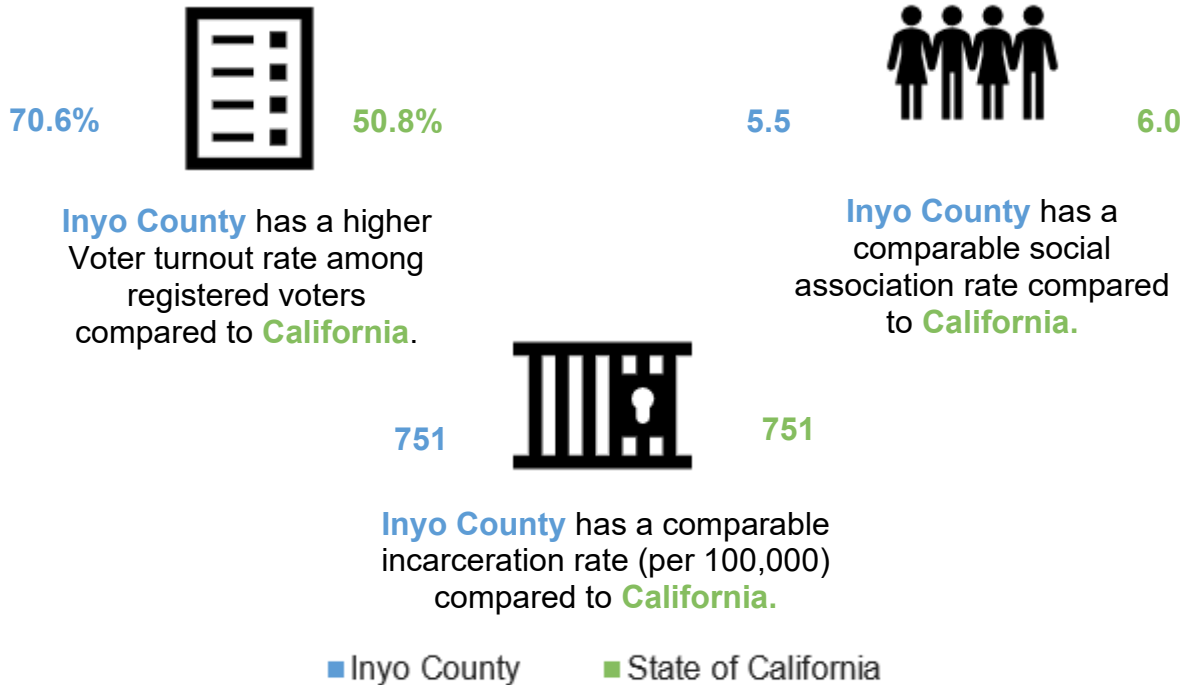
42.1% of all tobacco retailers in **Inyo County** sold vape products; **75%** of all tobacco retailers near schools in Inyo County sold flavored tobacco products.



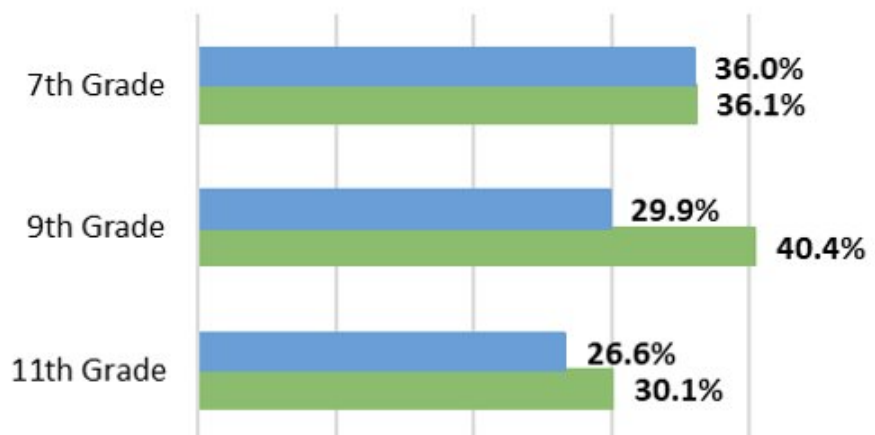
5.3% of tobacco retailers in **Inyo County** sold alcohol and had alcohol ads either positioned near candy/toys or below three feet in height.



SOCIAL AND COMMUNITY CONTEXT

Social and community context refers to the relationships individuals have and foster within their own communities, including social support from family, friends, co-workers and community members. These social support networks help mitigate the potential harmful effects of factors beyond individuals' control.



Experienced some bullying/harassment....



Rate of...		
Violent Crime (per 100,000)	600	421
Juvenile Delinquency Arrents (per 1,000)	57.5	6.5
Domestic Violence Calls for Assistance (per 1,000)	12	6.1
Children with Reports of Abuse or Neglect (per 1,000)	71.5	43.5

Inyo County 2023 Community Health Survey: Key Findings

- Most respondents felt neutral about community involvement and representation in health decisions.
- American Indian/Alaska Native participants reported more discrimination in two out of the top three experiences than any other racial group.
- Hispanic/Latino participants reported more discrimination than Non-Hispanic/Latino participants.
- Women participants reported discrimination at higher proportions than men participants.

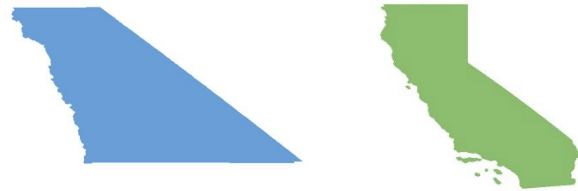
HEALTHCARE ACCESS AND QUALITY

Healthcare access and quality are directly tied to a community's health and wellbeing. Access to high quality preventative care or treatment for health conditions is critical for improving health outcomes and reducing or eliminating disparities in health, and may be impacted by factors such as insurance, provider or transportation availability, or affordability of care.



Inyo County 2023 Community Health Survey: Key Findings

- The top three reported barriers to obtaining healthcare were 1) not enough specialists, 2) doctor appointments are scheduled out too far, and 3) not enough doctors.
- 30% of respondents selected “expensive healthcare or medication costs” for barriers in accessing healthcare services or medication.
- A majority of respondents use health insurance as their method of accessing healthcare.



Population to Primary Care Providers	1,200:1	1,230:1
Population to Dental Providers	1,460:1	1,100:1
Population to Mental Health Providers	210:1	240:1



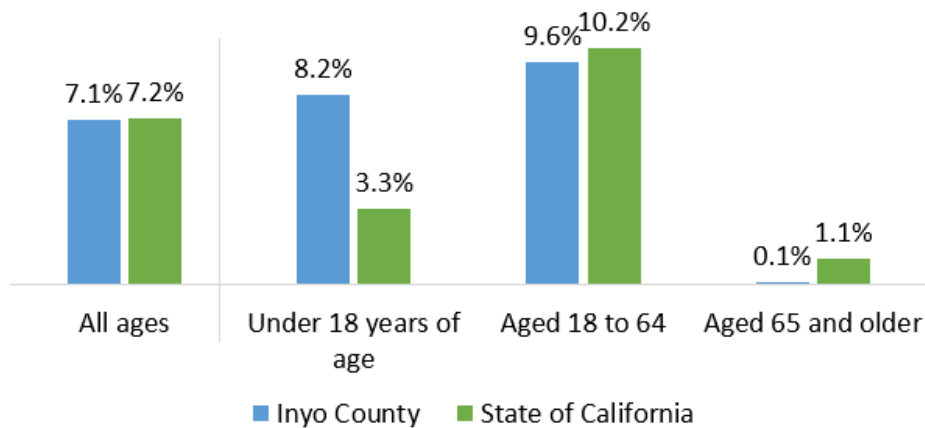
Inyo County has a shorter average length of stay in the hospital compared to **California**.



Inyo County has a higher rate of preventable hospitalizations per 100,000 Medicare beneficiaries compared to **California**.



Percent of individuals who are uninsured, 2021



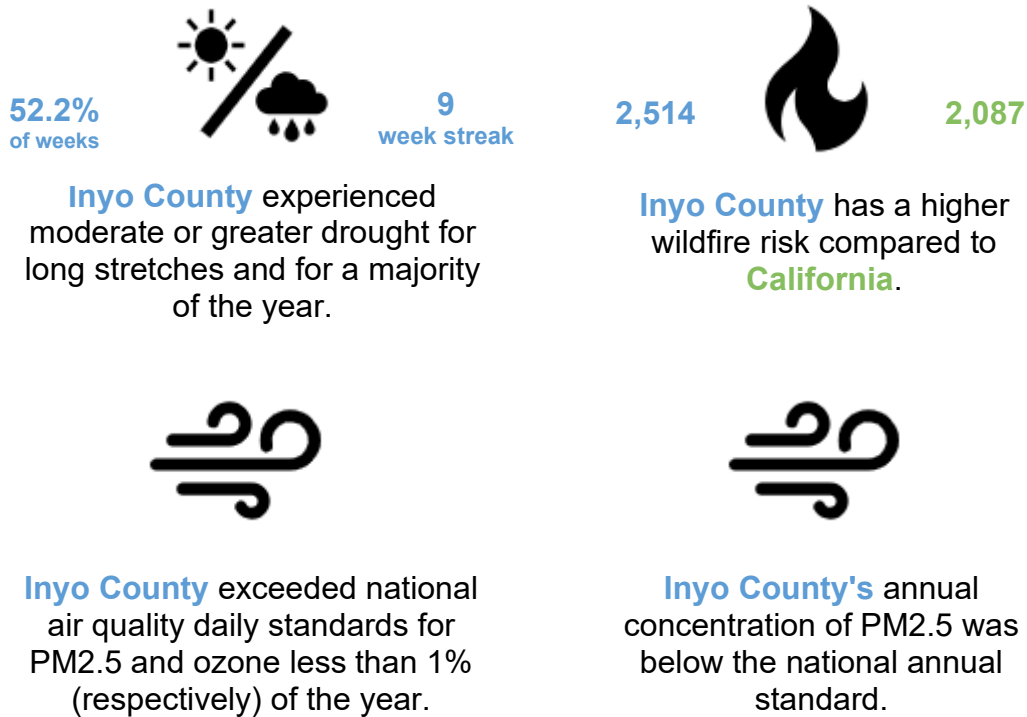
Top 3...

Causes of hospitalization	Hospitalizations with the highest median costs	Hospitalizations with the longest average length of stay
<ol style="list-style-type: none"> 1. COVID-19 2. Septicemia (except in labor) 3. Osteoarthritis 	<ol style="list-style-type: none"> 1. Cardiac and circulatory congenital anomalies 2. Aortic, peripheral, and visceral artery aneurysms 3. Burns 	<ol style="list-style-type: none"> 1. Paralysis 2. Late effects of cerebrovascular disease 3. Cancer of thyroid



ENVIRONMENTAL FACTORS

Environmental factors refer to conditions of the natural and built environment that affect a community's health, and reflect the connection between space, place, and health.

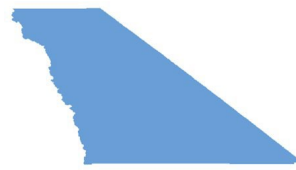


HEALTH BEHAVIORS

Health behaviors are health-related practices and routines that can improve or reduce the health of community members.

Health risk behaviors increase the risk of disease, injury or death, and can include tobacco or cigarette and e-cigarette use, substance use, and risky sexual activity.





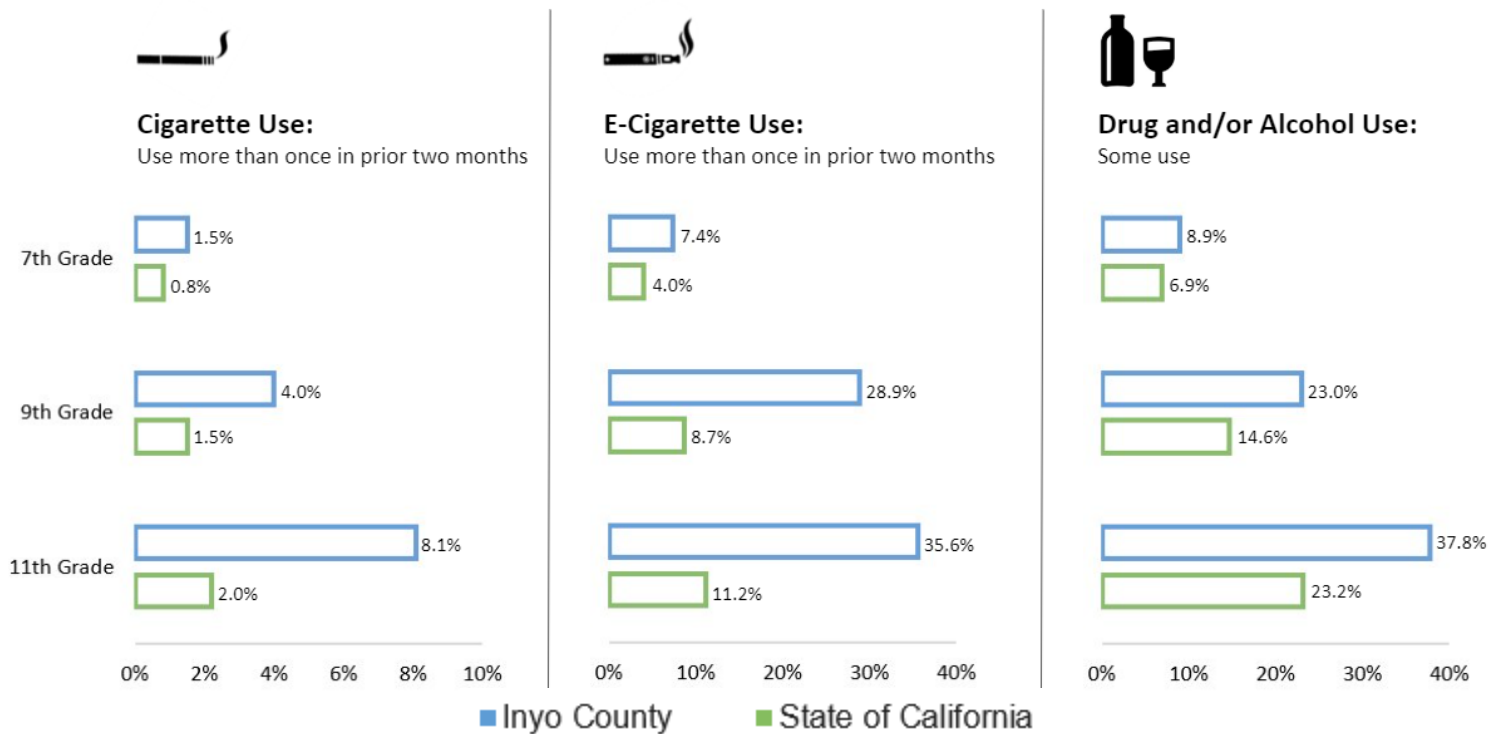
Drugs/Alcohol

Percent of current adult smokers	12.9%	11.3%
Percent of adults reporting excessive drinking	22.4%	18.4%
Drug-induced age-adjusted mortality rate	58.5	21.4
Opioid-related age-adjusted overdose mortality rate	41.6	18.0

Reproductive Health

Rate of adolescent mothers (per 1,000)	24.6	10.3
Percent of 13-year-olds vaccinated for HPV	20%	30%





Inyo County 2023 Community Health Survey: Key Findings

- 11% of respondents selected “tobacco use (including smoking, vaping, and/or chewing)” as a behavior that most negatively impacts health in their community.
- 33% of respondents selected “tobacco use (including smoking, vaping, and/or chewing)” as a concern faced by youth in their community.
- 33% of respondents selected “mental health and substance use disorder programs for parents” as one of the greatest needs of children and their families in the Inyo County community.

Health protective factors lower the risk of negative health outcomes, and can include strong and supportive relationships, including parenting relationships, physical activity, health eating habits and preventative healthcare access.



Percent of....



Preventative Health

Women aged 21 to 65 who underwent cervical cancer screening*

85.2%

79.7%

Women aged 50 to 74 who received a mammogram in prior two years

72.4%

76.3%

Individuals who underwent colon cancer screening

56.4%

78.8%

Maternal & Child Health

Births receiving first trimester prenatal care

86.4%

87.9%

Births with initiated breastfeeding in early postpartum

94.5%

93.5%

Kindergarteners with all required vaccines

97.0%

94.3%

Dietary Health

Consumption of 5 or more daily servings of fruits or vegetables among 2- to 17-year-olds

15.4%

21.8%

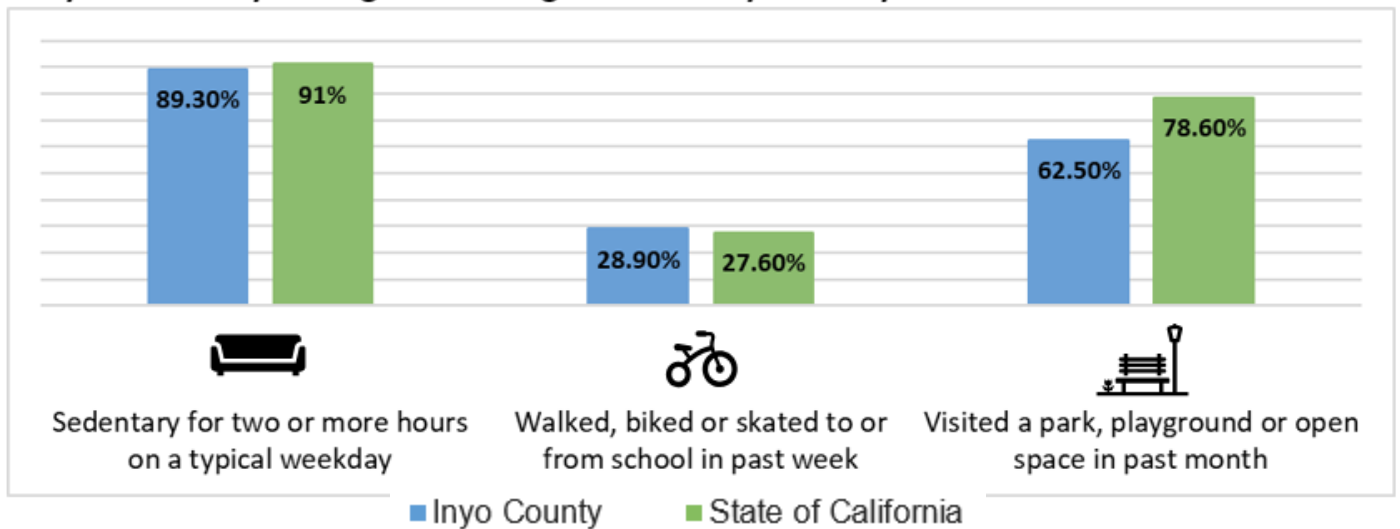
Consumption of soda 7 times or more per week among adults

7.0%

9.7%

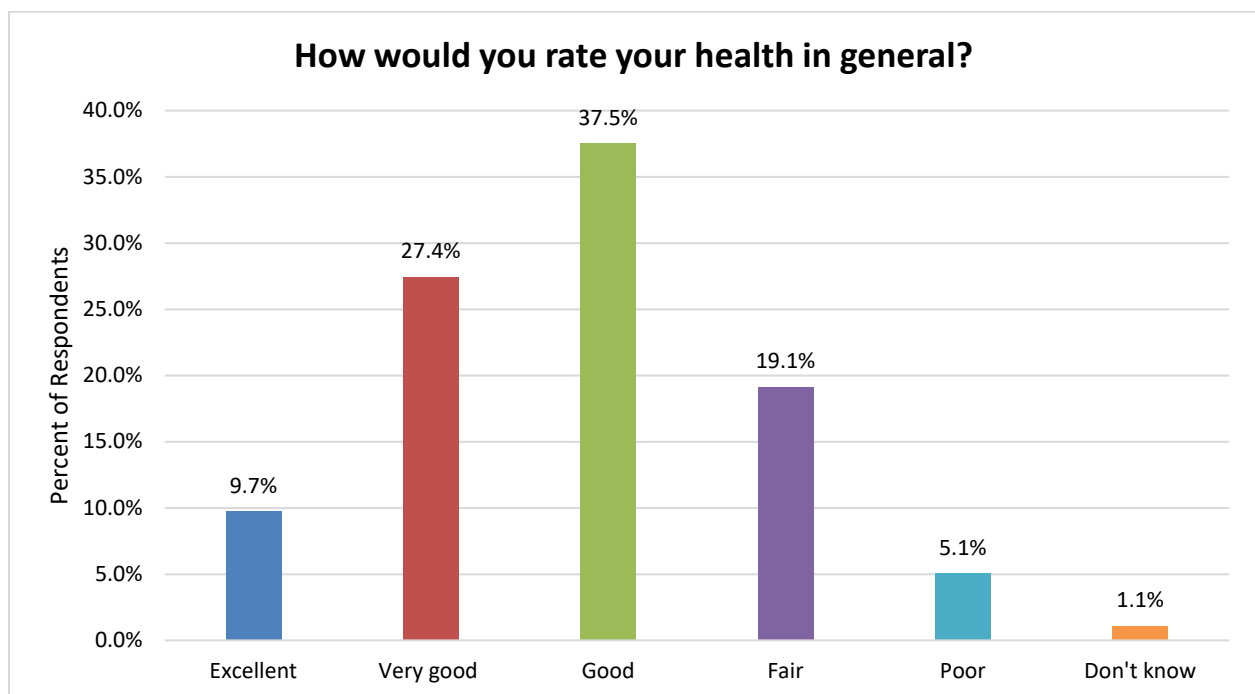


Physical Activity among Children Aged 2-17 in Inyo County and State of California



HEALTH STATUS AND OUTCOMES

Health status is a measure of how individuals perceive their health and is an important predictor of health outcomes, which indicate the experienced physical and mental health status of community.



Top 10 Causes of Death in Inyo County

1. All Cancers
2. Accidents
3. Coronary Heart Disease
4. Drug Overdose
5. Chronic Lower Respiratory Disease
6. Cerebrovascular Disease (Stroke)
7. Chronic Liver Disease and Cirrhosis
8. Diabetes
9. Motor Vehicle Crashes
10. Alzheimer's Disease

Inyo County 2023 Community Health Survey: Key Findings

The top 3 health concerns identified by respondents are:

1. Chronic Disease
2. 'Other', including:
 - Weight,
 - Orthopedic issues,
 - Mental health, and
 - Cost of healthcare
3. Mental Health



Acronyms / Abbreviations

µg	Microgram
ACE	Adverse Childhood Experiences
CDC	Centers for Disease Control and Prevention
CHA	Community Health Assessment
CHIP	Community Health Improvement Plan
EPA	Environmental Protection Agency
FOBT	Fecal occult blood test
FQHC	Federally Qualified Health Center
GACH	General Acute Care Hospital
GED	General Educational Diploma
Inyo HHS	County of Inyo Department of Health and Human Services
m ³	Cubic meter
MAPP	Mobilizing for Action through Planning and Partnership
n	Number
NAAQS	National Ambient Air Quality Standard
NOS	Not otherwise specified
ppm	Parts per million
PQI	Prevention Quality Indicators
SNAP	Supplemental Nutrition Assistance Program



Introduction

A community health assessment provides an understanding of a community's current health status and key health needs and issues through comprehensive data collection and analysis. This information helps the public, stakeholders, and policymakers justify the most effective allocation of resources to meet community needs.

This assessment was performed by the County of Inyo Department of Health and Human Services (Inyo HHS), with data collection and assessment preparation support from Stantec. Inyo HHS is comprised of the Behavioral Health, Public Assistance and Aging, and Public Health and Prevention Divisions, which together provide a safety net of services and public benefits created to strengthen resiliency and well-being in the Inyo community. Together with the support of partners across the public health system and members of the community, Inyo HHS gathered critical local knowledge and perceptions about the conditions of the community, the health of residents and the capacity of the local public health system to meet the community's needs.

The findings of Inyo County's community health assessment are presented here in the form of a community health profile, which will be used to inform the prioritization of health issues and develop the Community Health Improvement Plan (CHIP). The community health assessment is divided into four main sections preceded by an overview of the community health assessment process and the Inyo County population and followed by community resources and appendices:



1. Social Determinants of Health



2. Environmental Factors



3. Health Behaviors



4. Health Status & Outcomes

Inyo County Community Health Assessment

Methods

The community health assessment for County of Inyo, California (Inyo County) identifies and elevates local insights and broad trends regarding the health of the Inyo community in order to identify priorities for action. This is done by creating actionable insights from data. The Inyo County community health assessment is a compilation and synthesis of multiple streams of both new and existing data.

Disease patterns of a community are influenced by the interaction of demographic, social, and environmental factors (Gillam et al.). Consideration of demographic factors – like age, sex, race, or ethnicity – provides insight as to why disease trends may occur, informing public health interventions specific to the community's needs. Most importantly, an understanding of the diversity of a community is essential in identifying health inequities and gaps in healthcare.

INTERPRETING THIS REPORT

Helpful information to support the interpretation of the data and findings will be provided throughout this document. This first occurrence includes a glossary of terms that are often used when communicating scientific data as well as references used throughout this report.

Interpreting this Report
Categories of Data
Primary Data: <ul style="list-style-type: none">• Data collected by Inyo HHS, through tools such as surveys and interviews designed to understand the community's needs.
Secondary Data: <ul style="list-style-type: none">• Existing data collected by large organizations and institutions, such as census records.
Qualitative Data: <ul style="list-style-type: none">• Data that describe qualities or characteristics and are often presented as narratives.
Quantitative Data: <ul style="list-style-type: none">• Data that can be counted or compared on a numeric scale.



Interpreting this Report
Rates Rates represent the number of disease incidents, injuries, deaths, or other health outcomes divided by the total population. Rates are typically expressed per 1,000, 10,000, or 100,000. As an example, 300 cases of a disease would be expressed as a rate of: $300 \text{ (cases)} / 19,016 \text{ (total Inyo County population)} = 0.015776$ or $0.015776 * 100,000 = 1,577.6 \text{ per } 100,000$
Mortality, Prevalence, and Incidence Mortality rates represent the number of deaths divided by the total population. Mortality rates can be general or cause specific. Prevalence can be expressed as a percentage or a rate and represents the number of people who are living with a disease or condition divided by the total population. Incidence rates represent the number of <i>newly diagnosed</i> cases of a disease divided by the total population.
Age-Adjustment Age-adjustment is a statistical process applied to rates of disease, death, injuries, or other health outcomes to allow communities with different age distributions to be compared.
Sample size The number of respondents to a survey or the number of participants in a study; often represented by “n=”
Statistical significance Statistical significance is a measure of the likelihood that a relationship between two values is caused by something other than chance.
Comparisons between Inyo County and California Throughout this report, comparisons are made between Inyo County and the state of California through charts, tables, and figures. In each of these comparisons, Inyo County is represented in blue , and California is represented in green .



PRIMARY DATA COLLECTION

Primary data were collected through the administration of a community health needs assessment survey, called the Inyo County 2023 Community Health Survey (Community Health Survey). Survey questions were selected by Inyo HHS, drawing largely from established, validated survey instruments where possible. The survey consisted of 53 questions. See Appendix A for the full survey.

The Inyo County Community Health Survey for 2023 was administered from August 18, 2023, to October 31, 2023, for a total of 10 weeks. The survey was made available in English and Spanish, through paper and online versions. The paper survey also included a QR code that led the participant to the online survey should they choose to complete the survey online. The online survey was distributed through the SurveyMonkey platform. Survey participants were recruited through convenience sampling through the following mechanisms:

- Online at HHS website and social media accounts
- QR Code on Flyers and Physical copies
- Physical copies at HHS office
- Physical copies at community and senior centers
- Physical copies and tablets with in-person presence (i.e., tabling) at community events, meetings, and flu clinics

Physical copies (with QR codes) of the Community Health Survey were placed at all senior centers and county buildings in Bishop, Big Pine, Independence, Long Pine and Tecopa cities and/or areas respectively. Tabling at community events and meetings in efforts to maximize survey participation took place at the following locations: Kids Zone Day, Climbers Coalition (via Zoom), Inyo SAR Meeting, Laws Good Old Days, Bishop and Big Pine Downtown Markets, Pow Wow, Eastern Sierra Pride, Choo Choo Sawp Meet, Bishop City Council Meeting, and numerous soup kitchens in Bishop and Big Pine. Flu clinics were attended with Inyo HHS public health staff including Olancha, Lone Pine, Big Pine and Independence Fire Clinics, Home Street, Death Valley and Tecopa School clinics, and Furnace Creek. Surveys that were completed with physical copies were collected at each location and entered into SurveyMonkey administratively.

There were four drawings for health and wellness prizes throughout the data collection period. Participants in the Inyo County Community Health Survey could voluntarily complete a raffle entry form to register. Raffle winners were selected once per month during the survey collection period using a random selection method; if a winner was not able to be contacted, a replacement winner at random was then selected. Four participants were able to successfully receive their health and wellness prizes for completing the survey.

A total of 285 Inyo County community members completed the survey (approximately 1.9% of Inyo County's population over the age of 18). Four out of the 285 responses did

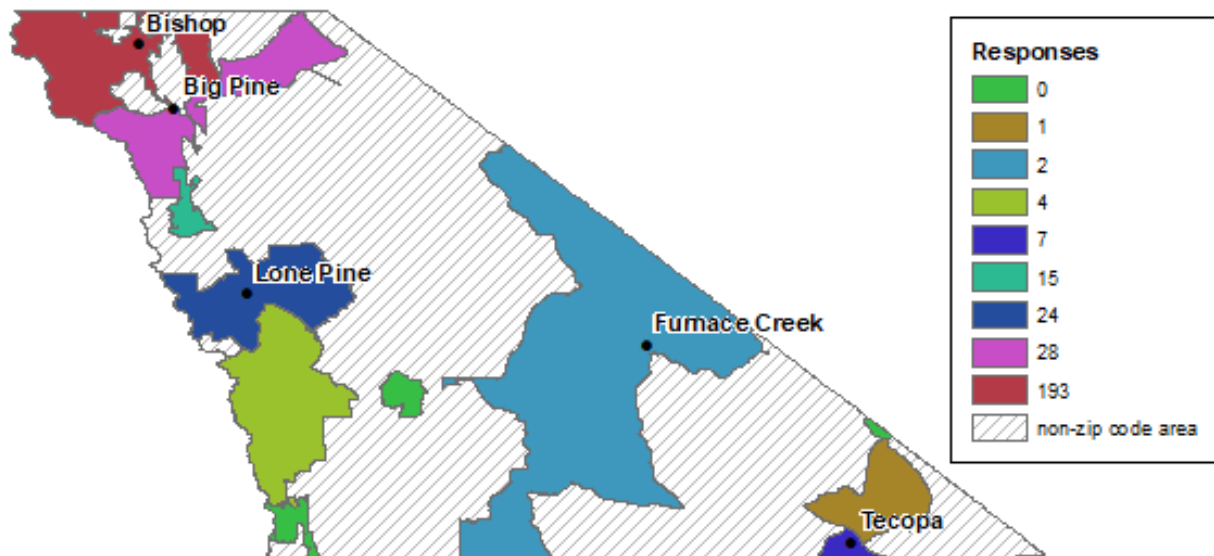


not select an Inyo County zip code as their residence and responded that they do not currently live in Inyo County and were therefore excluded from further analyses. The remaining 281 respondents to the Inyo County 2023 Community Health Survey were included in this report.

Stantec cleaned and analyzed the survey data. Due to the small sample size of the Community Health Survey, all data should be interpreted with caution and any conclusions should consider the low sample size.

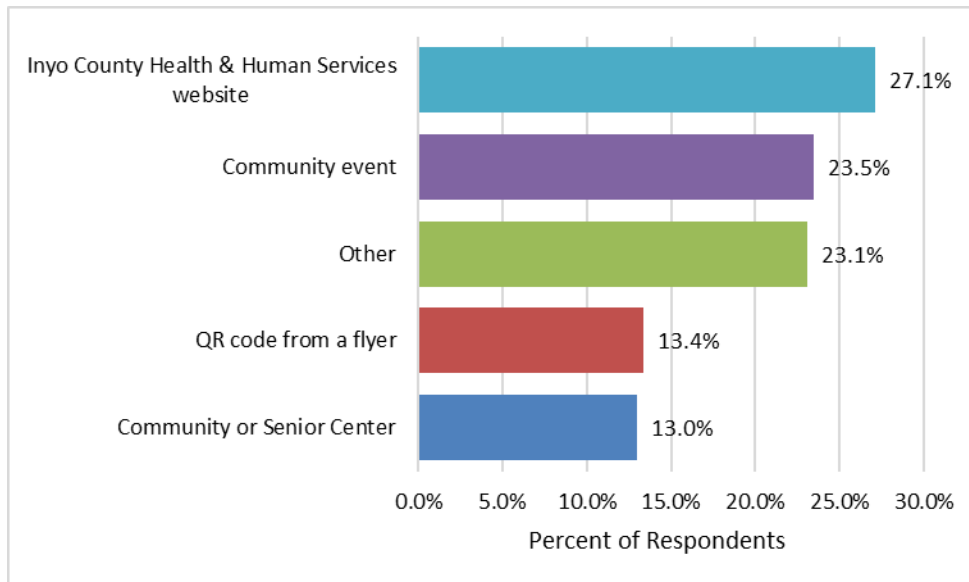
Most of the respondents live in the 93514-zip code and used the Inyo HHS website to access the survey.

Geographic distribution of zip code of survey respondents



Not pictured: ZCTA 93515: 6 responses

How did survey respondents access the survey?



SECONDARY DATA COLLECTION

In addition to the primary data collected, this assessment includes quantitative data obtained from numerous secondary sources, representing national, state, and local organizations.

Key Sources include:

- United States Census Bureau
- Centers for Disease Control and Prevention
- Environmental Protection Agency
- Federal Bureau of Investigations
- Feeding America
- National Cancer Institute
- KidsData
- County Health Rankings
- State of California:
 - Department of Public Health
 - Secretary of State
 - Health and Human Services Agency



DATA CAVEATS AND LIMITATIONS

To the extent possible, data were collected to represent all of Inyo County and its population. Some indicators were not able to be addressed or investigated in depth due to the limitations of the data available or collected.

- All data represent a point or period in time; some sections of this assessment have more recent data while others have data from previous years. The most current data available were collected at the time of writing.
- Due to the small population size of Inyo County, some data featured too small of sample sizes to be reported; these are identified throughout the report to inform interpretation. When possible, data that reported Inyo County specific counts and rates were selected. In some instances, regional data that included multiple counties were used.
- The population of California is large, so rates tend to be relatively steady over time. The small population size of Inyo County leads to variable rates which makes comparisons to California rates at any one time point in time variable as well. Except where specifically noted, the differences between Inyo County and California rates are not statistically significant.



Community Profile

GEOGRAPHY

Inyo County is the second-largest county in California with an area of 10,227 square miles. Historically, the lands that presently comprise Inyo County have been the homeland for the Mono tribe, Coso people, Timbisha, Kawaiisu, and Northern Paiute Native Americans (County of Inyo "Inyo County History"). As of February 2022, there are five federally recognized Native American tribes: the Bishop Paiute Tribe, the Big Pine Paiute Tribe of the Owens Valley, the Fort Independence Indian Community of Paiute Indians, the Lone Pine Paiute Shoshone Tribe, and the Timbisha Shoshone Tribe (County of Inyo "Policy and Protocol for Tribal Consultation"; US DOI).

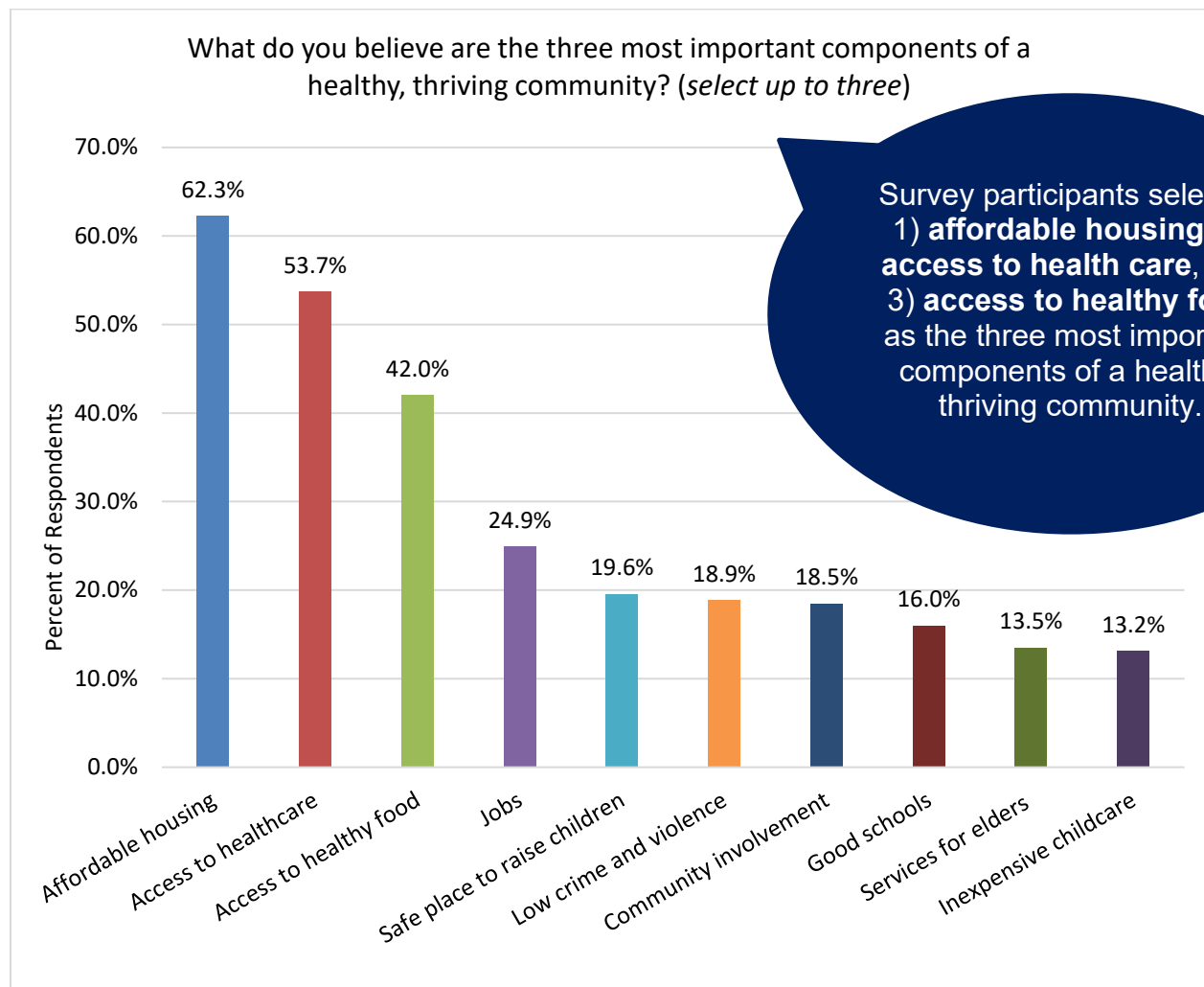
Surrounded by the Sierra Nevada, White Mountains, and Inyo Mountains and home to Death Valley National Park, Inyo County boasts a unique geographic landscape and great natural diversity. Specifically, Inyo has the greatest elevation difference among all counties in the contiguous United States (National County Gazetteer). Inyo County has a mostly arid climate with only 46 square miles of water (0.5%) (National County Gazetteer). There are a total of 22 official wilderness areas in the county that are part of the National Wilderness Preservation System and maintained by the Bureau of Land Management, National Parks Service, or National Forest Service. Among these is Death Valley National Park, the hottest and driest place in North America.

Inyo County (population of 19,016) is one of 27 rural counties in California (the 31 remaining counties in California are classified as either urban (n=14) or suburban (n=17)) (California State Association of Counties; United States Census Bureau "2020 Decennial Census"). Most of the population lives in the following incorporated cities and census designated places: Bishop (n=3,800), Dixon Lane-Meadow Creek (n=2,835), West Bishop (n=2,481), Lone Pine (n=1,580), and Big Pine (n=1,570), based on the 2021 ACS 5-year estimates (United States Census Bureau "2017-2021 ACS 5-year Estimates"). Additionally, there are approximately 15 smaller communities in Inyo County with populations of less than 1,000 (United States Census Bureau "2017-2021 ACS 5-year Estimates").



Inyo County 2023 Community Health Survey: Community Profile Spotlight

The results below from the 2023 Community Health Survey provides a snapshot of the Community Profile in showcasing how community members responded to what they believe are the three most important components of a healthy and thriving community. The data presentation will be similar throughout the report for highlighting results and information from Inyo County's 2023 Community Health Survey. Results will be limited to the top 10 answer choices, but full results can be found in Appendix A.



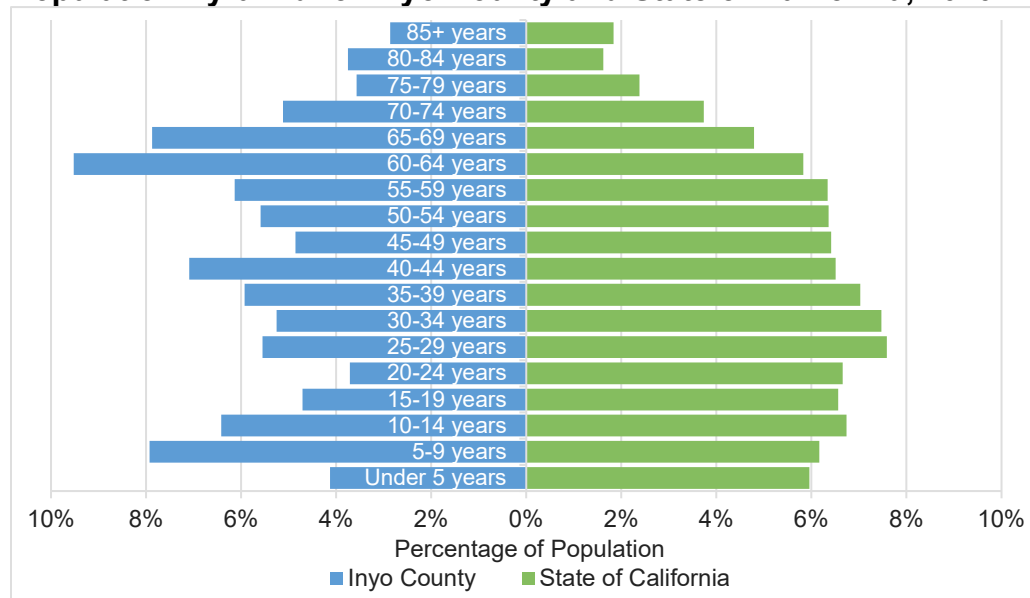
Source: Inyo County 2023 Community Health Survey



AGE

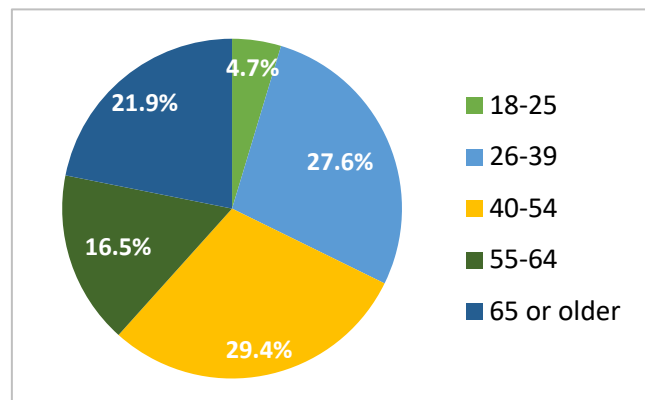
The median age in Inyo County is 44.5; however, there is a slightly larger proportion of very young and elderly people in Inyo as compared to California (United States Census Bureau "2017-2021 ACS 5-year Estimates"). Like many other rural counties, there is a larger elderly population in Inyo; however, there is also a uniquely large proportion of younger children as well. As shown on the population pyramid below, the three greatest proportions of the population in Inyo are between the ages 5 and 9 (n=1,491; 7.9%), 60 and 64 (n=1,791; 9.5%), and 65 and 69 (n=1,480; 7.9%) (United States Census Bureau "2017-2021 ACS 5-year Estimates").

Population Pyramid for Inyo County and State of California, 2020



Source: United States Census Bureau "2017-2021 ACS 5-year Estimates"

All respondents to the Inyo County Community Health Survey for 2023 were at least 18 years old, with the largest proportion in the 40-54 age group. The 18-25 age group is the smallest proportion and is likely under-represented.



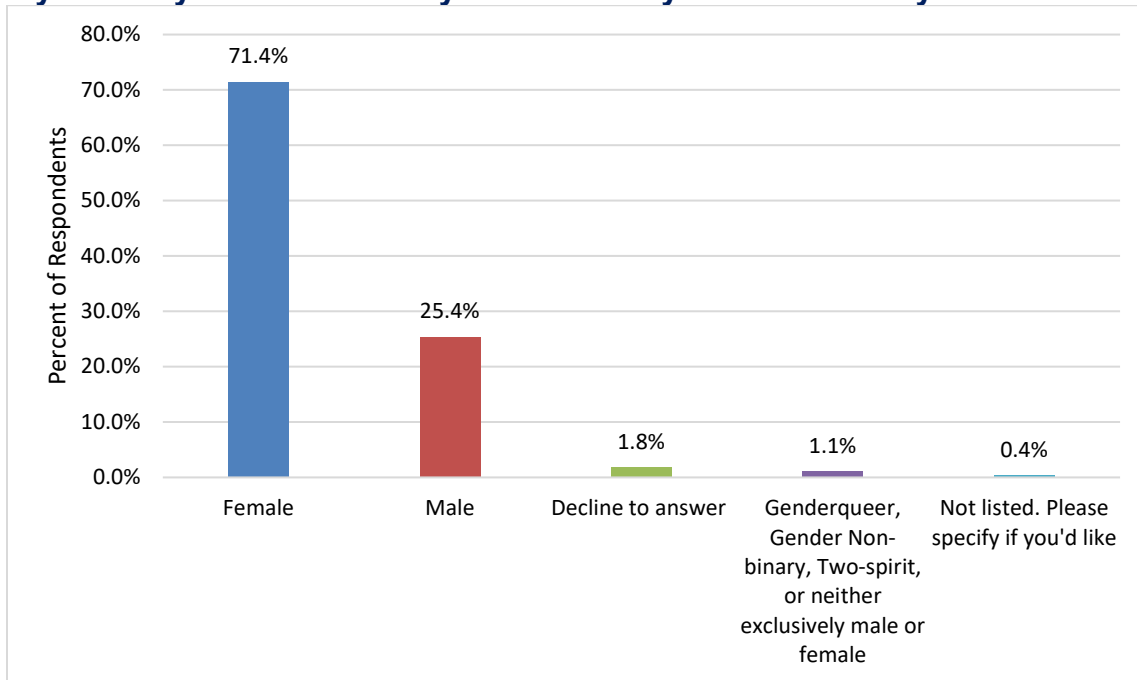
Source: Inyo County 2023 Community Health Survey



SEX/GENDER

The majority of the Inyo County 2023 Community Health Survey respondents identified as female, even though the sex distribution in Inyo County is split between males (50.8% and females 49.2%) (United States Census Bureau "2017-2021 ACS 5-year Estimates").

Inyo County 2023 Community Health Survey: Gender Identity Distribution



Source: Inyo County 2023 Community Health Survey

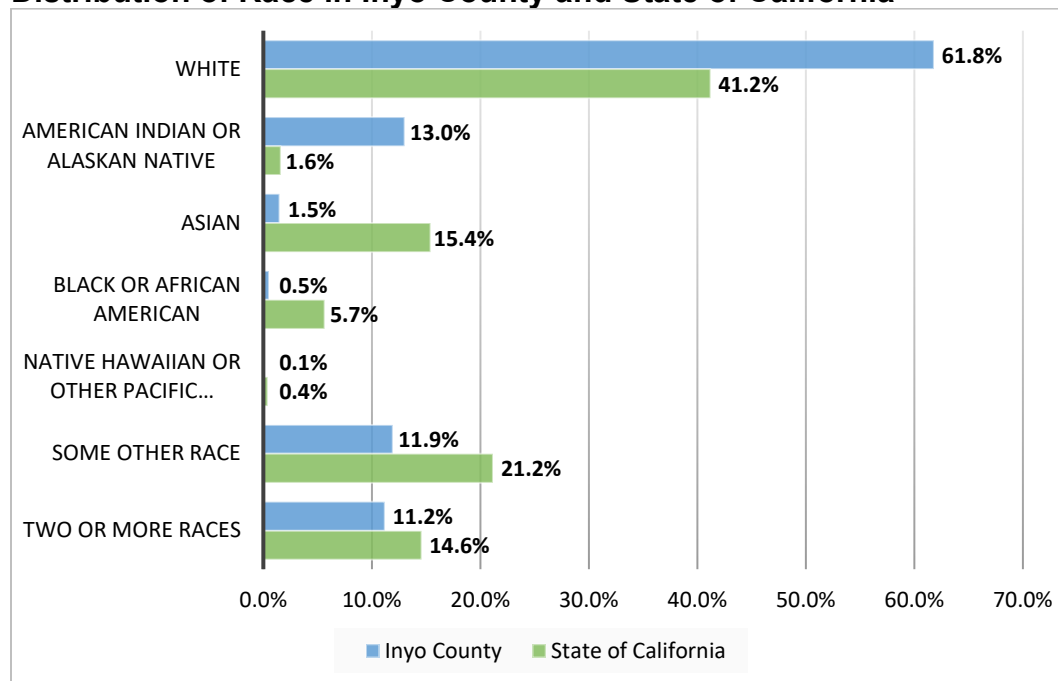


RACE/ETHNICITY

Interpreting this Report
Ethnicity
These terms are used, sometimes independently and sometimes in combination, to discuss ethnicity throughout this report.
Hispanic: A person who is Spanish-speaking and/or descended from a Spanish-speaking population
Latino: A person with ancestry in Latin America
Latinx: Gender-neutral alternative to the separate terms, <i>Latino</i> and <i>Latina</i> , which refer to gender

In general, Inyo County is less diverse than California with a notable exception of the American Indian or Alaskan Native population, which is proportionally almost ten times that of California. Additionally, 7.0% of individuals in Inyo County are foreign-born; however, of these individuals, approximately half (45.1%) are naturalized U.S. citizens (United States Census Bureau "2017-2021 ACS 5-year Estimates").

Distribution of Race in Inyo County and State of California

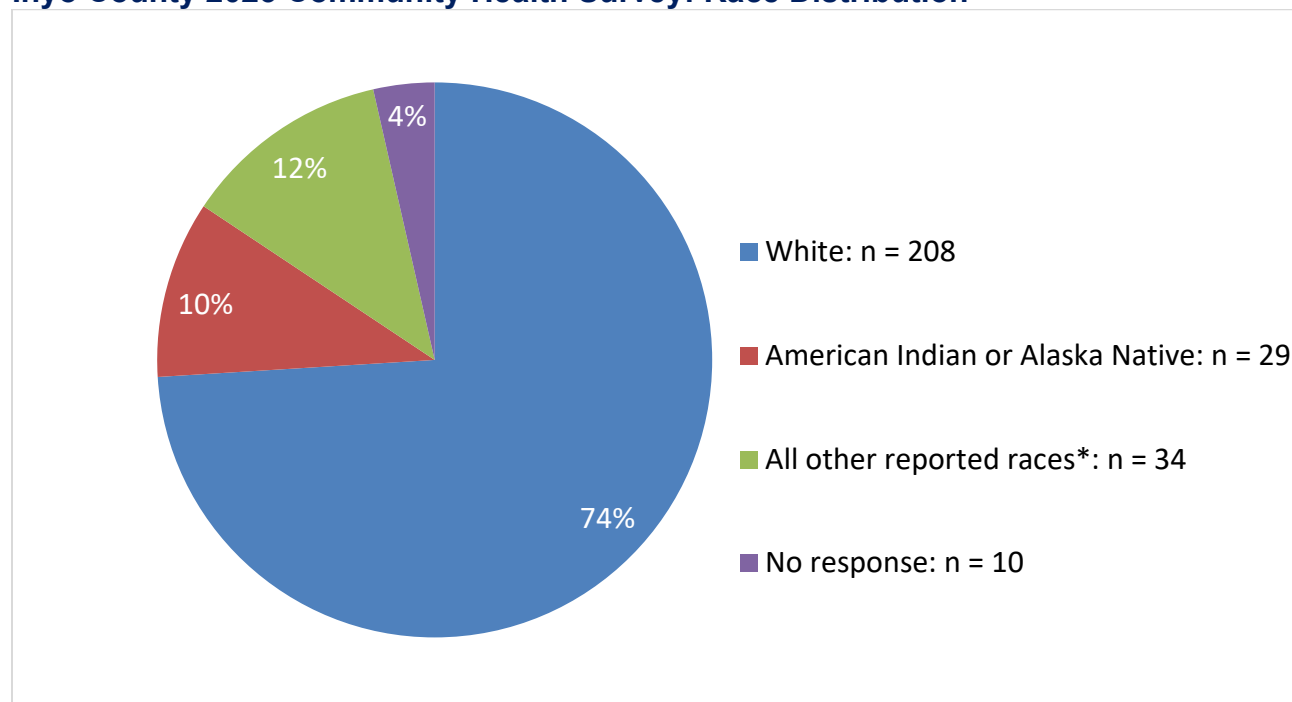


Source: United States Census Bureau "2020 Decennial Census"



While the Inyo County 2023 Community Health Survey successfully recruited representative proportions of American Indian or Alaskan Native residents, there was over-representation in the White community and under-representation in other racial groups. Due to the low number of responses within other racial groups, they were combined for any analysis by racial group. This limits the ability to detect differences in responses and opinions between these smaller groups.

Inyo County 2023 Community Health Survey: Race Distribution



Source: Inyo County 2023 Community Health Survey

*includes participants who chose: "other race" (n=21), "multiple races" (n=7), "Black or African American" (n=2), "Asian Indian" (n=1), "Chinese" (n=1), "other Asian" (n=1), or "other Pacific Islander" (n=1)



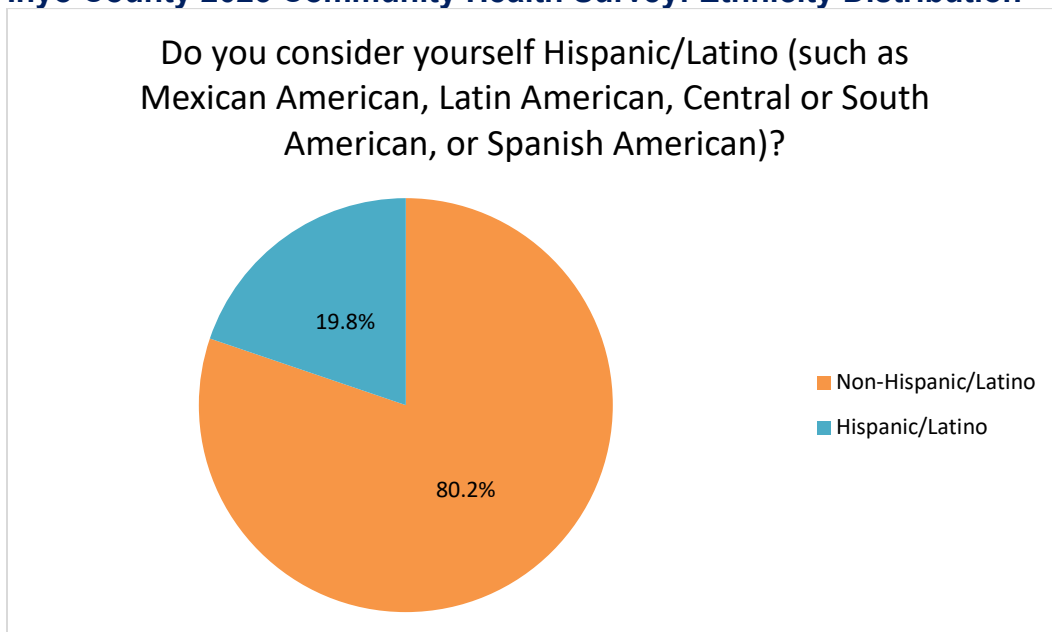
Tribal affiliation of participants who provided information:

Tribal Affiliation	Count
Bishop Paiute	6
Big Pine Paiute	5
Lone Pine Paiute-Shoshone	1
Paiute	1
Fort Independence Paiute	1
San Carlos Apache	1
Choctaw Nation of Oklahoma	1
Navajo (dine)	1
Total	17

Source: Inyo County 2023 Community Health Survey

Approximately one-quarter of the population in Inyo County is Hispanic or Latino (23.1%) (United States Census Bureau "2020 Decennial Census"). However, the proportion of this population was slightly lower among survey respondents.

Inyo County 2023 Community Health Survey: Ethnicity Distribution

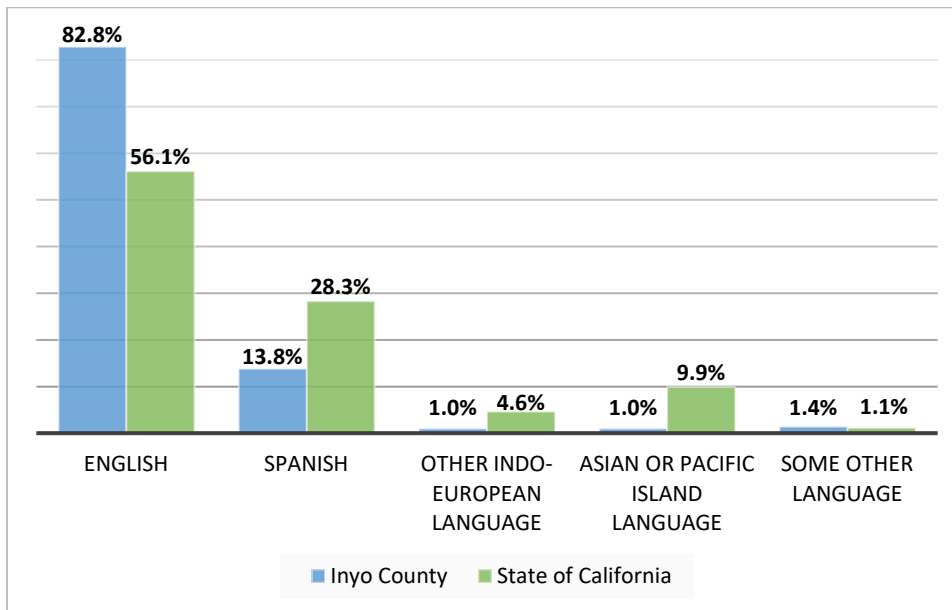


Source: Inyo County 2023 Community Health Survey



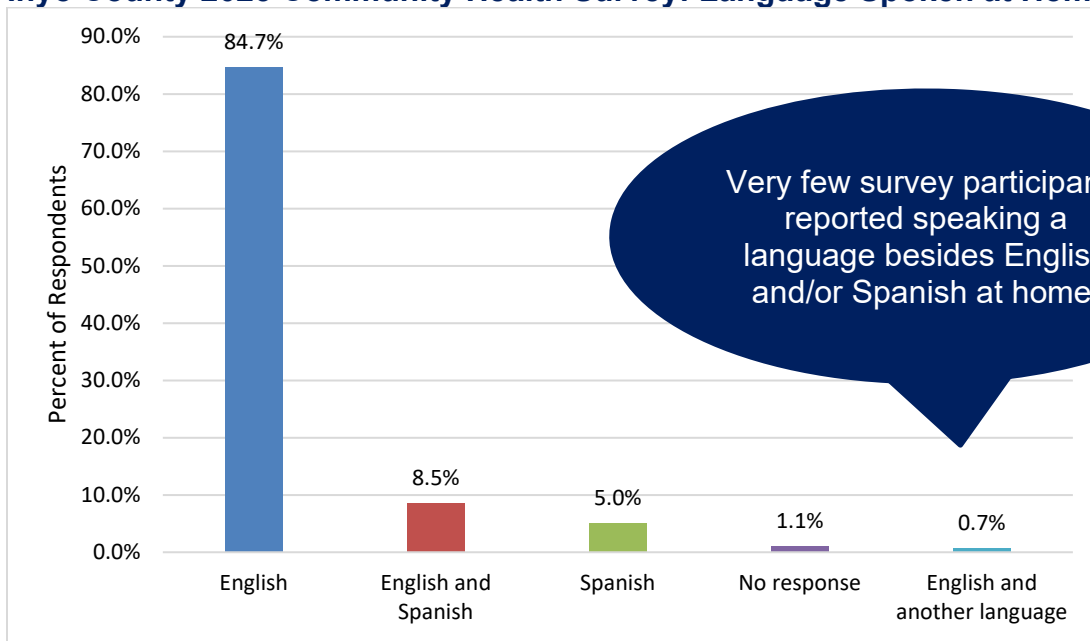
LANGUAGE

Although English is the predominant language spoken in both Inyo County and California, the state has a greater proportion of language diversity compared to Inyo County (United States Census Bureau "2017-2021 ACS 5-year Estimates").



Source: United States Census Bureau "2017-2021 ACS 5-year Estimates"

Inyo County 2023 Community Health Survey: Language Spoken at Home



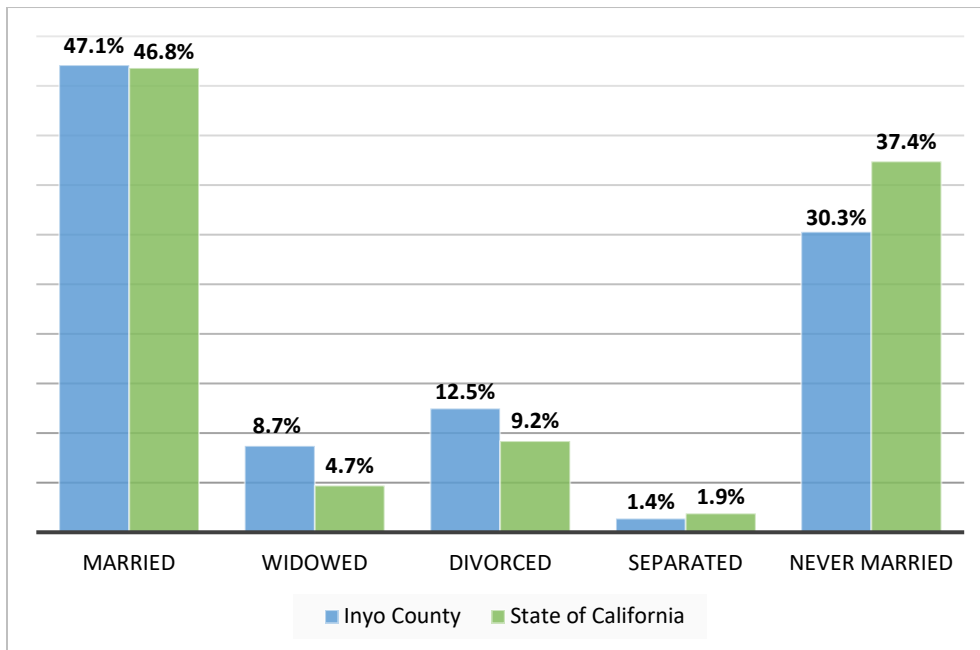
Source: Inyo County 2023 Community Health Survey



MARITAL STATUS

Inyo County residents have similar proportions of married and separated individuals compared to the state, but have higher proportions of widowed and divorced individuals and lower proportions of people who have never been married (United States Census Bureau "2017-2021 ACS 5-year Estimates").

Marital status among individuals aged 15 and over



Source: United States Census Bureau "2017-2021 ACS 5-year Estimates"



1 Social Determinants of Health

Social determinants of health are non-medical factors that are related to the ways people live, work, learn, and age and can impact health status and quality of life (US HHS "Social Determinants of Health").

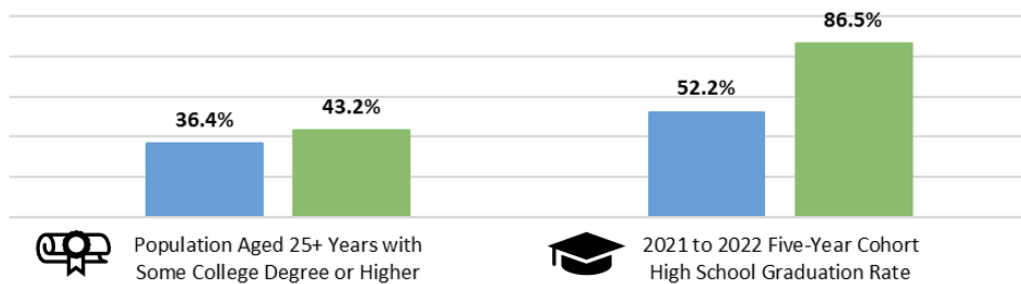
- They may be related to the conditions of daily life, like the availability of safe public transportation, the accessibility of grocery stores with healthy foods, or the language one speaks with friends and family; however, social determinants of health also include wider forces and systems such as racism, climate change, and the economic policies of a particular community (US HHS "Social Determinants of Health").
- These factors can either directly or indirectly impact health, for example, the inability to access healthy foods – possibly due to lack of transportation or lack of grocery stores with healthy food choices – could have a negative impact on the community's overall nutrition, increasing risk for a variety of chronic illnesses such as obesity (US HHS "Social Determinants of Health").
- Other social determinants of health – such as racism or not speaking English – could lead to increased stress for individuals, which can raise risk for a variety of health outcomes like cardiovascular disease (US HHS "Social Determinants of Health").



Education Access & Quality

Education – specifically higher education – is associated with reduced risk for premature death and conditions such as heart disease, high blood pressure, diabetes, anxiety, and depression (US HHS "Education Access and Quality"). It has been suggested that education improves health outcomes through positive impacts on employment options, thereby permitting access to higher-quality housing, preferable psychosocial resources, and higher social status and improved social connectivity (US HHS "Education Access and Quality").

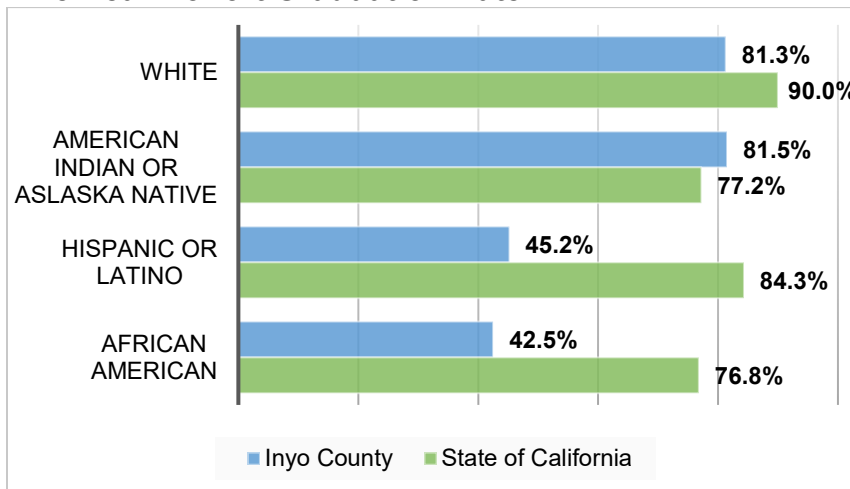
Although Inyo County and California have similar percentages of population aged 25+ with some college degree or higher, Inyo County has a lower 2021 to 2022 five-year cohort high school graduation rate.



Source: CDE; United States Census Bureau "2017-2021 ACS 5-year Estimates"

Differences in graduation rate are even more evident when grouped by race/ethnicity CDE.

Five-Year Cohort Graduation Rate



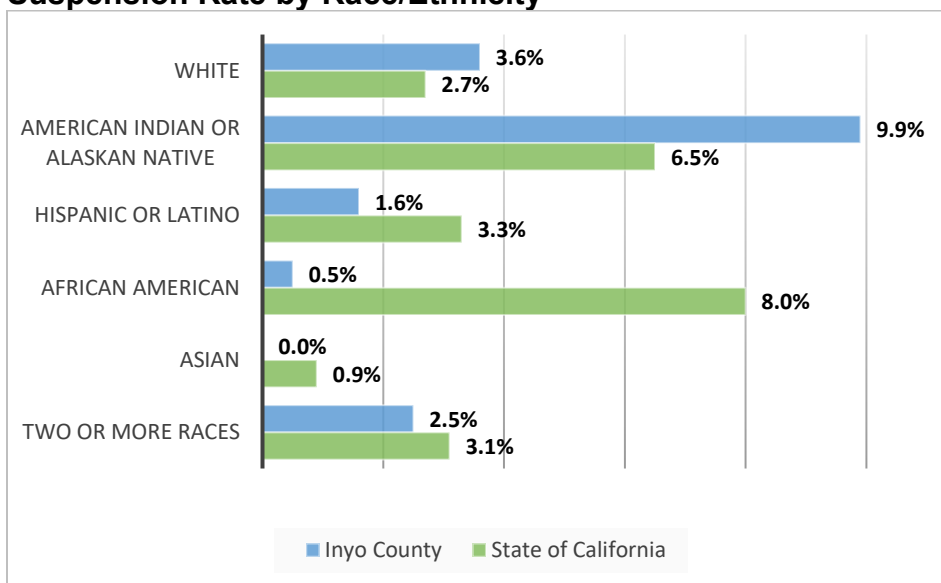
Source: CDE



Furthermore, little under one fourth of all high school students in Inyo County (23.9%) enrolled in a postsecondary institution of higher education (e.g., college or university) within 12 or 16 months of completing high school for the 2019-2020 school year (CDE).

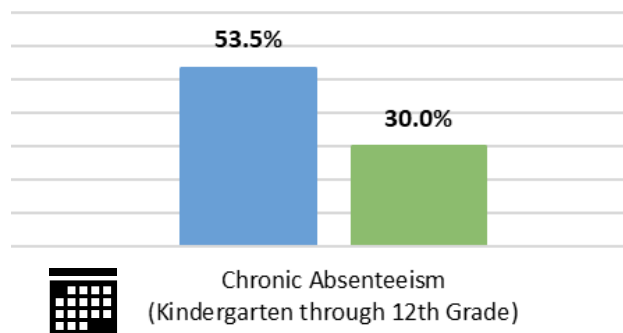
Racial disparities are also seen in suspension rates. The American Indian or Alaskan Native population has both higher rates of suspension than other racial groups in Inyo County and compared to the American Indian or Alaskan Native population in the state (CDE).

Suspension Rate by Race/Ethnicity



Source: CDE

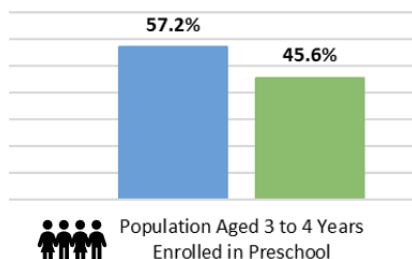
Inyo County also has a higher kindergarten through twelfth grade chronic absenteeism rate compared to California (CDE).



Source: CDE



Early childhood education has been related to future developmental and educational outcomes as well (Anderson et al.; Currie; Karoly et al.). Inyo County has proportionally more of the population between ages 3 and 4 are enrolled in preschool compared to California (SparkMap; United States Census Bureau "2017-2021 ACS 5-year Estimates").



Source: United States Census Bureau "2017-2021 ACS 5-year Estimates"

Community Health Spotlight

Childcare Costs

Average annual costs for childcare in Inyo County is \$14,236 for infants and \$8,891 for preschoolers. Given the median household income in Inyo County is \$60,925, childcare cost accounts for approximately 14.5% to 23.4% of a household's income (United States Census Bureau "2017-2021 ACS 5-year Estimates").

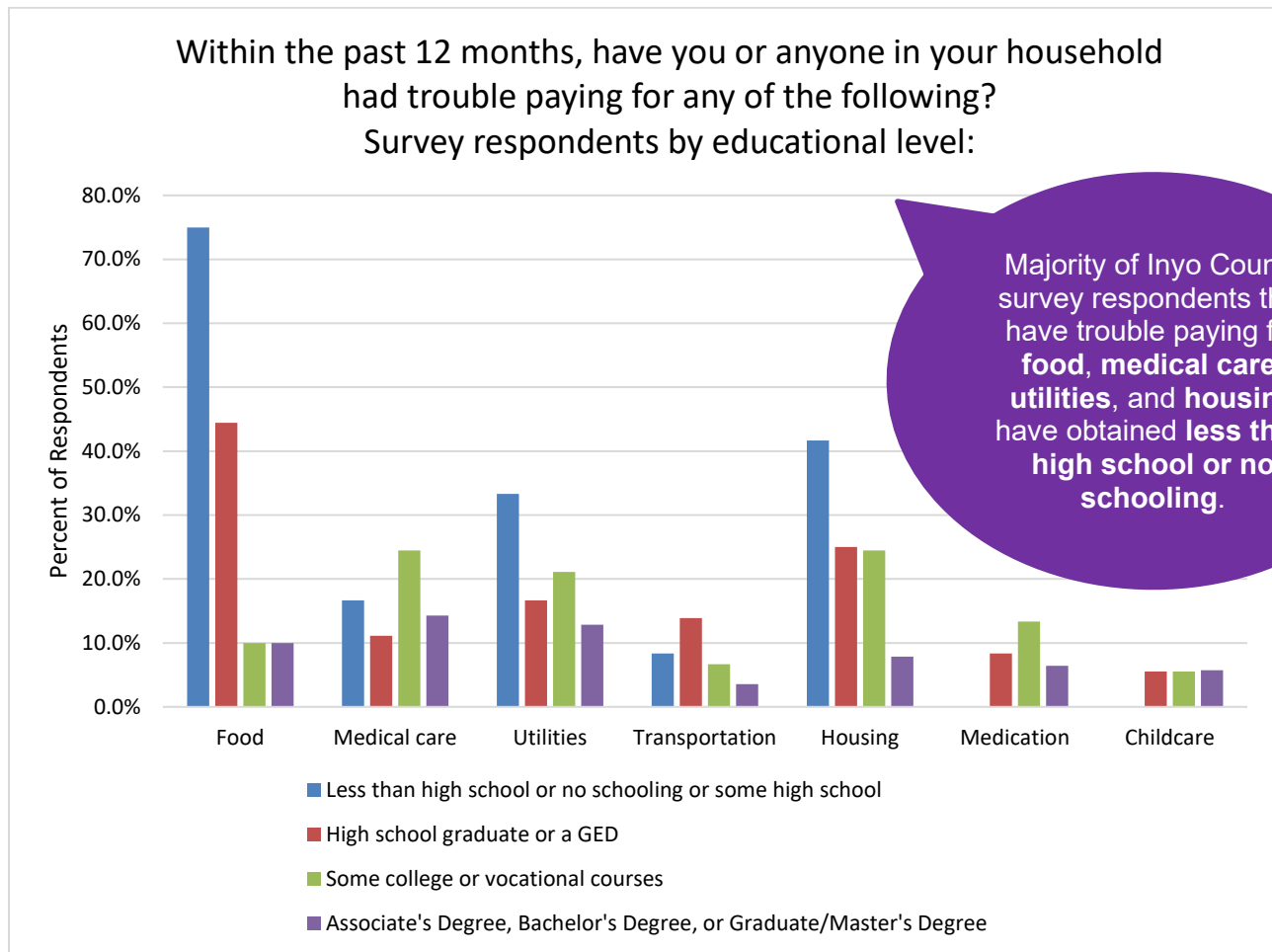
Interpreting this Report

Financial Constraints and Educational Attainment

The information presented below on financial constraints and educational attainment from the Inyo County 2023 Community Health Survey represents percentages of responses from the survey question "In the past 12 months, have you or anyone in your household had trouble paying for any of the following: (select all the apply)." This data was then grouped by reported highest level of education completed.

However, data should be interpreted with caution due to the size of smaller demographic groups within the Community Health Survey respondents. For example, only 12 survey participants selected "less than high school or no school" or "some high school" as their highest completed level of education.

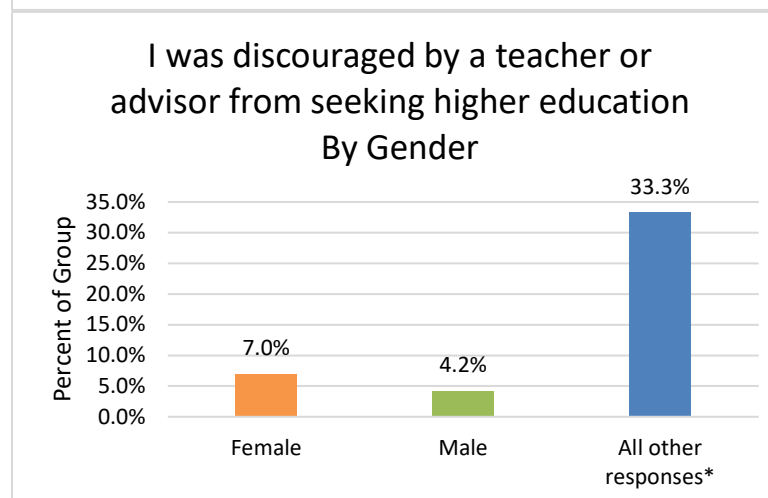
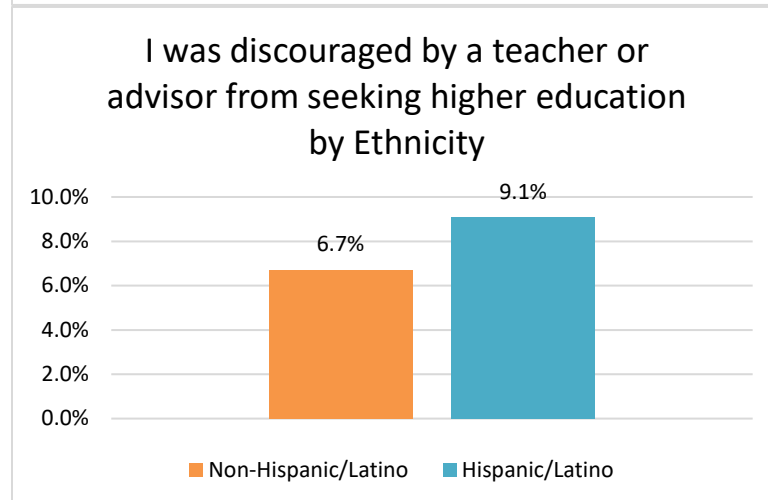
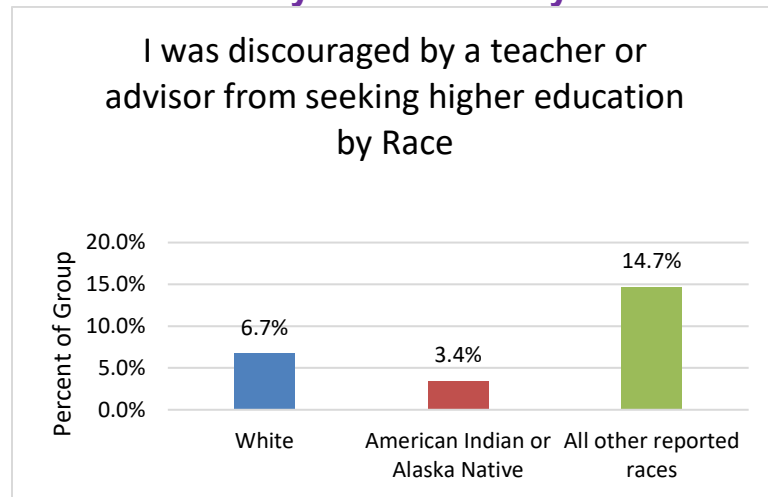
Inyo County 2023 Community Health Survey – Financial Constraints and Educational Attainment Spotlight



Source: Inyo County 2023 Community Health Survey



2023 Community Health Survey – Education Equity Spotlight



Minority groups experience higher rates of discouragement by a teacher or advisor from seeking higher education than non-minority groups.

Source: Inyo County 2023 Community Health Survey

*includes participants who chose: "Genderqueer, Gender Non-binary, Two-spirit, or neither exclusively male or female" (n=1), "Not listed" (n=1), and "Decline to answer" (n=1)



Economic Stability

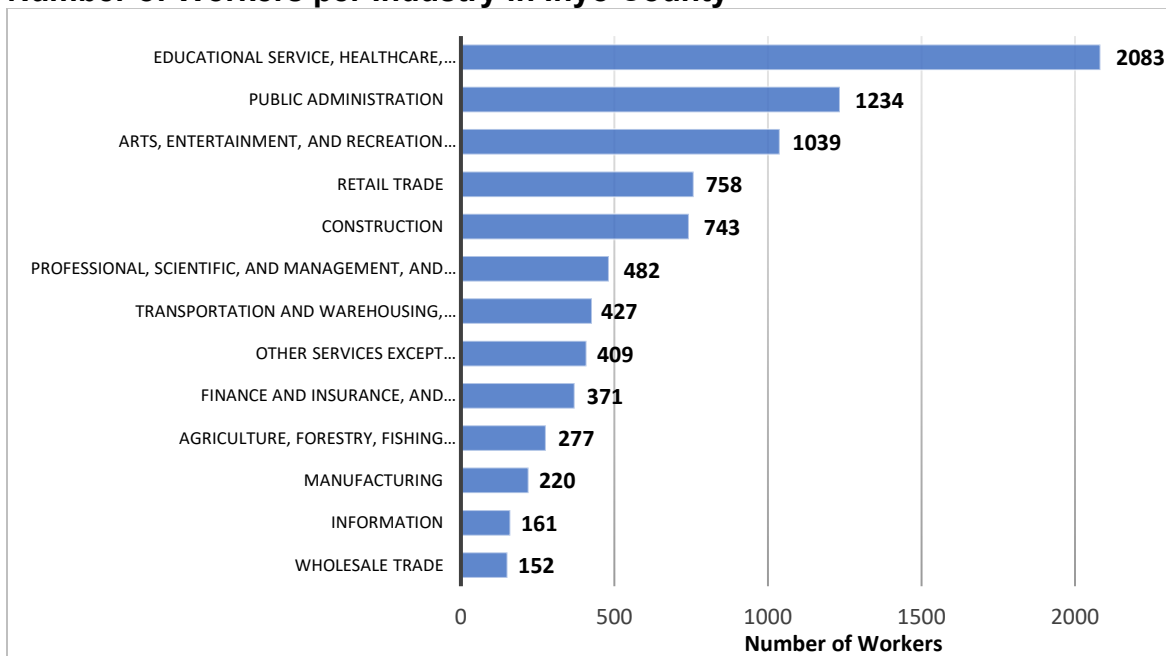
Economic stability is directly impacted by employment and poverty and relates to an individual's ability to afford healthy foods, healthcare, and housing (US HHS "Economic Stability"). Generally, steady employment allows individuals to live healthier lives because they are more likely to be able to afford healthcare and healthy foods, for example, and are less likely to live in poverty (US HHS "Economic Stability"). Unemployment within a community can negatively impact various health behaviors and outcomes.

However, employment alone may not guarantee that individuals do not live in poverty and as a result, income is also an important factor to consider when addressing economic stability and poverty within a community (US HHS "Economic Stability"). Related to both income and employment is food security. Access to nutritious foods leads to healthier communities and stronger outcomes throughout all stages of life (US HHS "Economic Stability").

EMPLOYMENT

The top three employment categories (by employee count and percentage of employed population) in Inyo County are educational services, health care, and social assistance (24.9%), public administration (14.8%), and arts, entertainment, and recreation, and accommodation and food services (12.4%) (US HHS "Economic Stability").

Number of Workers per Industry in Inyo County

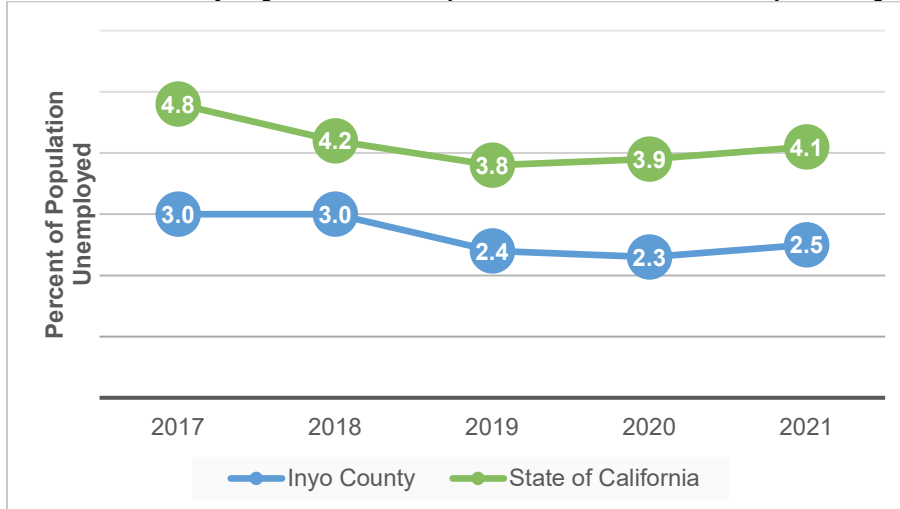


Source: United States Census Bureau "2017-2021 ACS 5-year Estimates"



Inyo County's annual civilian unemployment rate ranged between 2.3% and 3.0% between 2017 and 2021, which was lower each year than California's annual civilian unemployment rates that ranged between 3.8% and 4.8% for the same time period (United States Census Bureau "2017-2021 ACS 5-year Estimates").

Annual Unemployment Rate (in civilian labor force) for Inyo County and California

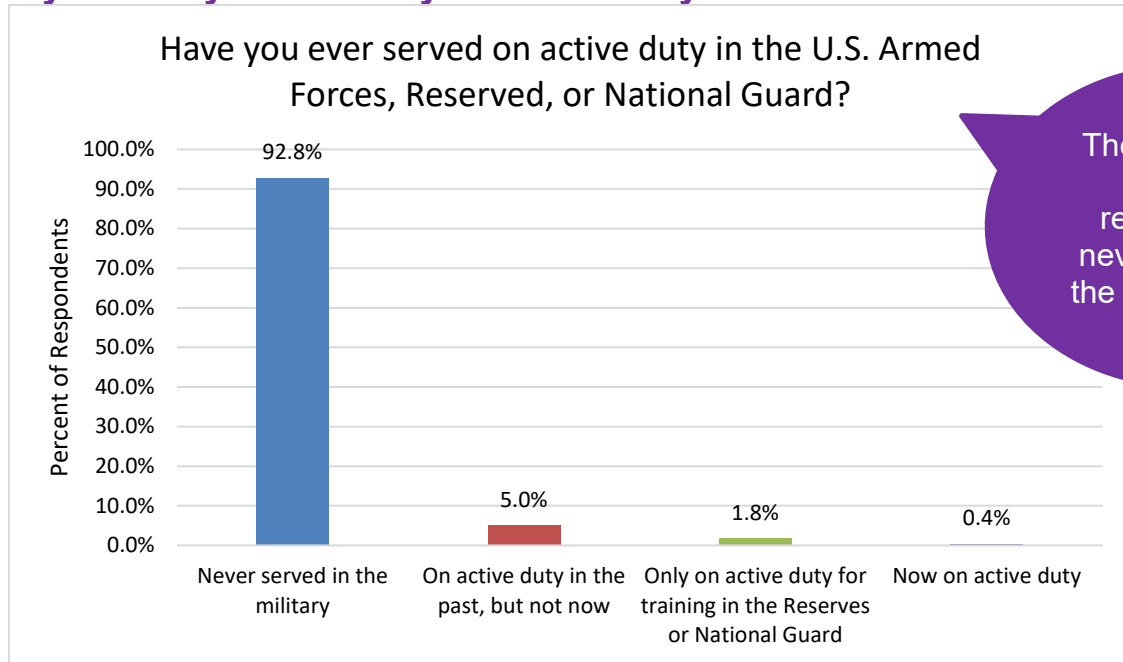


Source: United States Census Bureau "2017-2021 ACS 5-year Estimates"

Relative to California with 4.8% of the population claiming veteran status, Inyo County has almost double the proportion of veterans with 9.0% (n=1,327) of the population of Inyo County claiming veteran status (United States Census Bureau "2017-2021 ACS 5-year Estimates"). Almost all veterans residing in Inyo County are male (97.6%) (United States Census Bureau "2017-2021 ACS 5-year Estimates").



Inyo County Community Health Survey 2023 – Veteran Status



Source: Inyo County 2023 Community Health Survey



INCOME

The median household income in Inyo County is \$60,925. According to the 2021 American Community Survey, 10.8% (n=1,989) of the Inyo County population was living in poverty in 2021 (United States Census Bureau "2017-2021 ACS 5-year Estimates"). In the United States, poverty is defined yearly by the Department of Health and Human Services to determine eligibility for federal programs and benefits, such as Medicaid for health insurance (Medi-Cal in California) or the Supplemental Nutrition Assistance Program (SNAP) for food-purchasing assistance (HealthCare.gov).

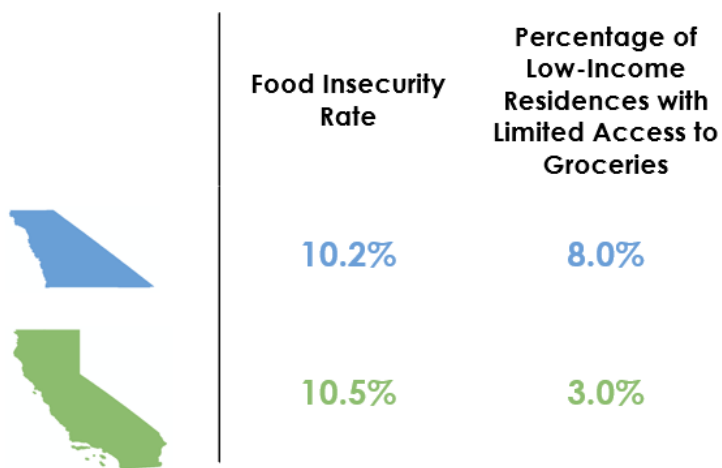
Interpreting this Report
Federal Poverty Level
For the year 2023, the federal poverty level for a one-person household was \$14,580, and \$30,000 for a four-person household (CDPH "2023 Federal Poverty Guidelines"). Some programs such as Medi-Cal determine eligibility by the percentage an individual or household is below the poverty level based on their modified adjusted gross income (Disability Rights California). For example, for an individual, someone who is under 138% of the federal poverty level would be eligible for expanded Medi-Cal coverage based on income. That is, someone who has a modified adjusted gross income of \$20,121 per year or $\$20,121 / \$14,580 \times 100\% = 138\%$ would be eligible for expanded Medi-Cal based on income alone (CDPH "2023 Federal Poverty Guidelines").

In 2021, the rate of living in a household impacted by poverty was higher among residents younger than 18 years old (14.2%; n=565) relative to residents aged 18 to 64 (10.3%; n=1,041) (United States Census Bureau "2017-2021 ACS 5-year Estimates"). Approximately one fourth of the population (25.7%) was under 200% of the federal poverty level in 2021, and 7.6% of households receive CalFresh Program (known federally as SNAP) benefits (CDPH "California Community Obesity Profiles"; iCalifornia Food Stamps). This is slightly lower than the rates observed in California: 28.5% of individuals live in households under 200% of the federal poverty level (i.e., \$23,828 annual income for an individual or \$49,025 for a family of four), and 9.5% of households receive SNAP benefits statewide (CDPH "California Community Obesity Profiles").




FOOD INSECURITY

Regular access to nutritious and high-quality food is imperative to maintaining physical health. The food insecurity rate is defined by food insecurity and its state- and county-level linked indicators: poverty, unemployment, homeownership, median income, percentage of households with at least one disabled person, and percentage of households that are Black or Hispanic (Feeding America).



Source: County Health Rankings 2023; Feeding America 2021

In 2020, there were 94.7 fast food establishments per 100,000 people in Inyo County compared to 80.4 per 100,000 people in California (SparkMap). Of the six census tracts in Inyo county, one census tract was considered a food desert in 2019 (SparkMap). Over the entire county, a total of 3,378 individuals were reported as living in food deserts in 2019 (SparkMap; USDA).

Interpreting this Report	
Food Desert	
<p>Defined by USDA as a low-income census tract where a substantial share of residents has low access to a supermarket or large grocery store and at least 33% of the tract's population (or a minimum of 500 people) have low access to a supermarket or large grocery store.</p> <p>Low access can be defined in different ways. USDA uses distance thresholds of both 10 and 20 miles from the nearest supermarket or large grocery store to determine low access for rural areas.</p> <p>Some census tracts that contain supermarkets or large grocery stores may meet the criteria of a food desert if a substantial share of people within that census tract is more than ten miles (rural areas) from the nearest supermarket.</p>	
Census Tracts	
<p>Defined by the U.S. Census Bureau as small, relatively permanent statistical subdivisions of a county; census tracts typically average approximately 4,000 people (range: 1,200 to 8,000 people).</p> <p>Inyo County features six census tracts, shown to the right. The shaded tract is considered a food desert as of 2019, using both a 10- and 20-mile low access threshold.</p>	

Neighborhood & Built Environment

The neighborhood and built environment encompass areas where people live, work, learn, play, age, and worship (NASEM; US HHS "Neighborhood and Built Environment"). There are a number of factors related to neighborhood and built environment, however, two major aspects include housing security and conditions as well as the local built environment (NASEM).

HOUSING SECURITY & CONDITIONS

The link between health and housing is strong and multifaceted (Hernández and Swope). Poor housing quality, structural defects, and safety hazards – often due to aging housing infrastructure – pose an immediate and obvious physical health risk (Hernández and Swope). However, housing instability and lack of affordability often fall along lines of social inequities and related health disparities, exacerbating negative mental and physical health outcomes (Hernández and Swope).





There are **7,823** occupied households out of **9,457** housing units in **Inyo County**.

Housing units – defined as a house, an apartment, a mobile home, a group of rooms or a single room that is occupied, or intended for occupancy, as separate living quarters for one or more people.



The average number of people who occupy a housing unit is **2.3** and the average family size is **3.2**.



Vacancy status is a useful indicator of the stability and quality of houses in a community

The rental (**0.7** and **1.0**) and owner (**3.5** and **3.9**) vacancy rates are comparable between **Inyo County** and **California**.



Sources: United States Census Bureau "2017-2021 ACS 5-year Estimates"

A little under half of households are married-couple households (42.5%) and 4.7% are cohabiting couple households. Furthermore, 21.0% of households without a spouse or partner present are male and 31.7% of these households are female (United States Census Bureau "2017-2021 ACS 5-year Estimates").

\$2,050
median monthly
mortgage
\$2,548



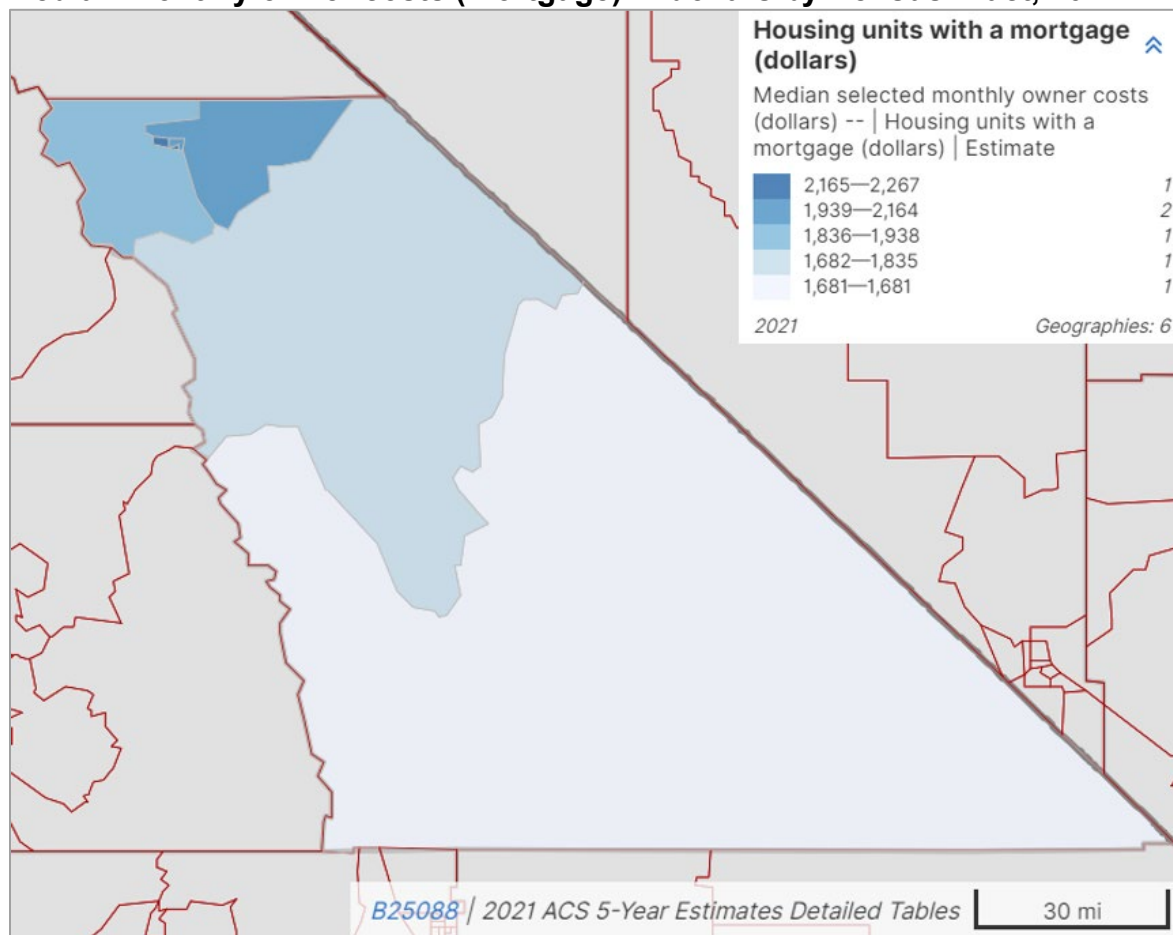
\$988
median monthly
rent
\$1,698

Median monthly housing costs, both for renters and owners, are lower in Inyo County compared to California. However, housing costs also vary across Inyo County, as shown in the following map, with higher mortgage costs concentrated in Northern Inyo County. *Tract-level rental cost data were unavailable.*

Source: United States Census Bureau "2017-2021 ACS 5-year Estimates"



Median monthly owner costs (mortgage) in dollars by Census Tract, 2021



Source: United States Census Bureau "2017-2021 ACS 5-year Estimates"

It should be noted that mortgage costs in Inyo County vary spatially; higher mortgage costs are observed in northern Inyo, whereas lower mortgage costs are observed in mid- and southern Inyo. While the specific reasons for this difference in Inyo County are not documented, a number of factors may be driving these higher housing costs in northern Inyo, including proximity to community infrastructure (e.g., grocery stores, healthcare, schools, etc.) and housing density.

Community Health Spotlight

Housing Costs

Given the median household income in Inyo County is \$60,925, housing costs accounts for approximately 19.8% of a household's income for renters and 41.0% for homeowners (United States Census Bureau "2017-2021 ACS 5-year Estimates"). By comparison, the median household income in California is \$84,097, with housing costs accounting for approximately 24.2% (median gross rent of \$1,698) of a household's income for renters and 36.4% (median monthly mortgage of \$2,548) for homeowners (United States Census Bureau "2017-2021 ACS 5-year Estimates").

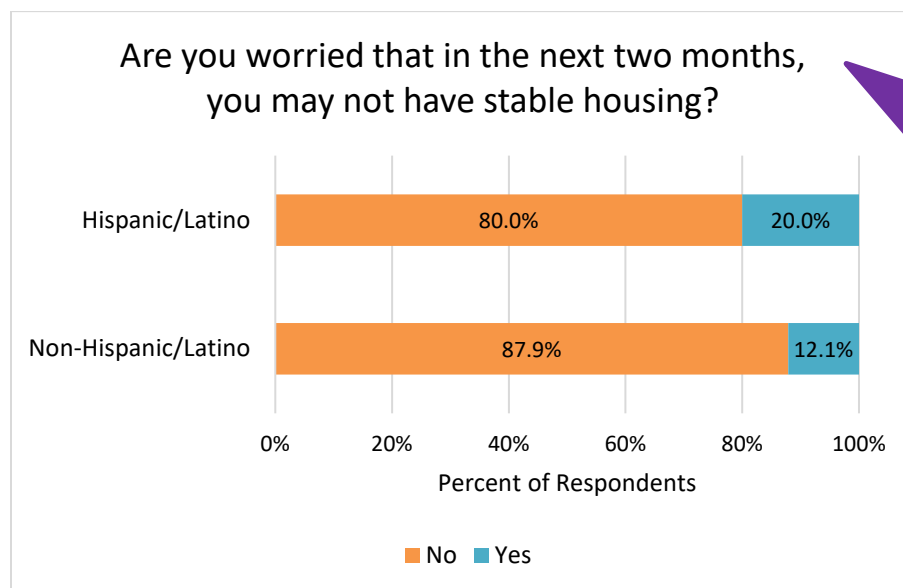


Inyo County 2023 Community Health Survey – Housing and Housing Equity Spotlight

The majority of survey respondents (62%) selected **“affordable housing”** as the top component of a healthy, thriving community.

When asked what would most improve the environment in the community, almost half of survey respondents (49%) selected **“more affordable housing options for residents.”**

When asked what would most improve their life, a majority of survey respondents (31%) selected **“affordable housing.”**



Hispanic/Latino and Non-Hispanic/Latino survey respondents reported similarly regarding stable housing.

Source: Inyo County 2023 Community Health Survey

Almost all occupied housing units in Inyo (95.1%) have access to at least one vehicle (United States Census Bureau "2017-2021 ACS 5-year Estimates"). Additionally, only 10.3% of workers above age 16 commute to work by public transit, walking, or cycling (United States Census Bureau "2017-2021 ACS 5-year Estimates").

As previously described, Inyo County has a large proportion of very young and elderly residents. While individuals in the United States spend approximately 90% of their time indoors, these populations tend to spend more time indoors and may be even more susceptible to indoor pollutants as a result (US EPA "Indoor Air Quality"). One indoor pollutant of particular concern is lead. The Lead Based Paint Poisoning Act of 1971



banned the use of lead-based paint in residences and went into effect in 1978 (CDC "Childhood Lead Poisoning Prevention, 1970s - 1980s CLPPP Timeline"). However, approximately one-third of housing structures in Inyo County were constructed prior to 1960 (i.e., 30.8%) and a little over one-third of housing structures were constructed between 1960 and 1979 (i.e., 35.3%) (SparkMap). As a result, over half of all housing structures in Inyo County were constructed prior to 1980 and thus are likely to contain lead-based paint.

LOCAL BUILT ENVIRONMENT

The local built environment encompasses the human-made spaces, systems and structures that form a community. The local built environment can impact overall community health by either promoting or preventing individual healthy behaviors (CDC "The Built Environment Assessment Tool Manual").

Proximity to recreational sites and structures, including sports and recreational facilities, has been characterized as a motive for physical activity (Pedersen et al.). As of 2020, Inyo County featured less than three recreational and fitness facilities (SparkMap). However, this is likely offset by the accessibility of greenspaces in Inyo County. Greenspaces within a community have been associated with better health, reduced stress, better air quality and overall better quality of life (Bratman et al., 2012; Ward et al., 2012). In 2020, 98.3% of people living in Inyo County lived within half a mile of a park, beach, or open space greater than one acre (CDC "National Environmental Public Health Tracking Network").

While Inyo County has a large proportion of individuals living near a greenspace, other aspects of the built environment may have an adverse impact on health outcomes. For example, the availability and marketing of consumer products that may harm human health, such as liquor or tobacco, can influence health behaviors of a community.





42.1% of all tobacco retailers in Inyo County sold vape products; 75% of all tobacco retailers near schools in Inyo County sold flavored tobacco products.



5.3% of tobacco retailers in Inyo County sold alcohol and had alcohol ads either positioned near candy/toys or below three feet in height.



No stores in Inyo County had tobacco marketing in kid-friendly locations, as compared to 35.3% of tobacco retailers across California.

Source: CDPH, Let's Get Healthy California

* This data is from before November 2022, when California voters upheld the state law, Senate Bill (SB) 793 (Chapter 34, Statutes of 2020), prohibiting tobacco retailers from selling most flavored tobacco products.

Computer and internet access are increasingly recognized as critical determinants of health, influencing healthcare outcomes through access to telehealth, as well as education and employment opportunities (County Health Rankings & Roadmaps "Broadband: A Super Determinant of Health"; NPHL). The majority of households in Inyo County have a computer (91.7%) and a broadband subscription (82.7%) (United States Census Bureau "2017-2021 ACS 5-year Estimates"). However, access to high-speed internet, as defined by download speeds up at least 25 MB per second, is lower in Inyo County (71.5% of the population) compared to California (96.9% of the population) (SparkMap).

Inyo County 2023 Community Health Survey - Environment Spotlight

When asked what would most improve the environment in the community, survey respondents selected the top three choices:

- 1) more affordable housing options for residents
- 2) increase availability of healthcare facilities and medical services
- 3) expand access to quality education and skills development programs

Source: Inyo County 2023 Community Health Survey



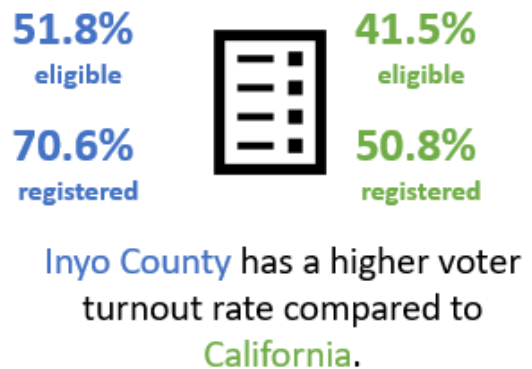
Social and Community Context

Social and community context refers to the relationships individuals have and foster within their own communities (US HHS "Social and Community Context"). These relationships include social support from family, friends, co-workers and community members (US HHS "Social and Community Context"). While there are often community-based factors that cannot be directly controlled by an individual, such as the built environment, social support networks help mitigate the potential harmful effects of uncontrollable factors (US HHS "Social and Community Context").

SOCIAL SUPPORT NETWORKS AND COMMUNITY COHESION CHARACTERISTICS

Social support networks and community cohesion refer to the relationships, networks, and sense of solidarity among members of a community (US HHS "Social Cohesion"). These social networks, and associated social support, can positively influence behavioral and psychological health outcomes, whereas social isolation can be detrimental to health and may increase mortality (Berkman and Glass; Holt-Lunstad et al.; Uchino).

One mechanism of building social capital is through civic participation (US HHS "Civil Participation"). It has been found that civic engagement, including voting and participation in local government, is related to increases in physical and mental health and wellbeing (Nelson et al.). For both the 2020 and 2022 elections, Inyo County had a higher turnout rate compared to the overall turnout in California.



Source: California Secretary of State

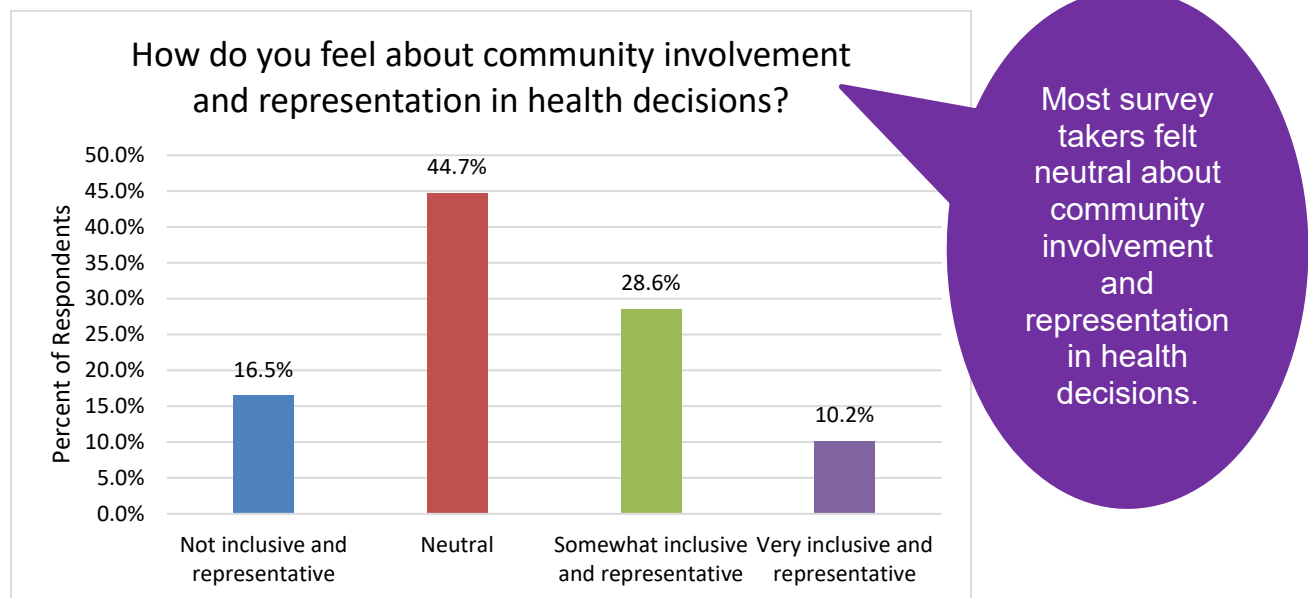


Furthermore, community cohesion in Inyo County is comparable to California, despite its rurality and geographic isolation. The social association rate measures the number of membership associations, such as civic organizations, bowling centers, golf or clubs, or sports, religious, political, labor, or professional organizations per 10,000 people.



Source: County Health Rankings & Roadmaps "California Health Rankings"

Community Health Survey 2023 – Social Cohesiveness Spotlight



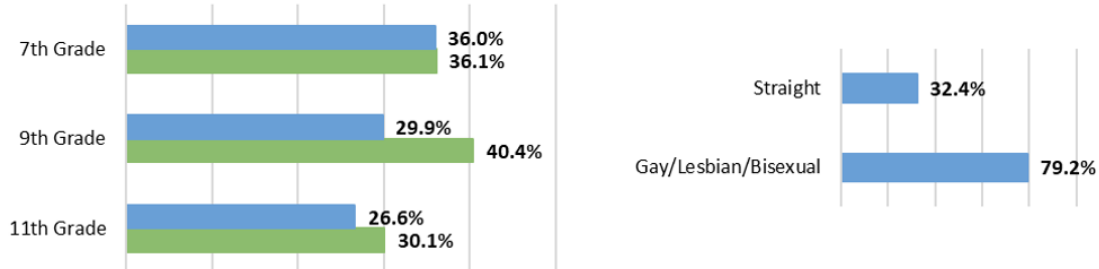
Source: Inyo County 2023 Community Health Survey

BULLYING AND HARASSMENT WITHIN SCHOOLS

Between 2017 and 2019, the greatest level of disparities in bullying or harassment in Inyo County occurred among those who identified as gay/lesbian/bisexual (KidsData). However, level of school connectedness appeared to be preventive in both Inyo County and California, with students in schools having higher school connectedness reporting less bullying (25.8% and 23.3%, respectively) than those with lower school connectedness (61.9% and 45.7%, respectively) (KidsData).



Experienced some bullying/harassment....

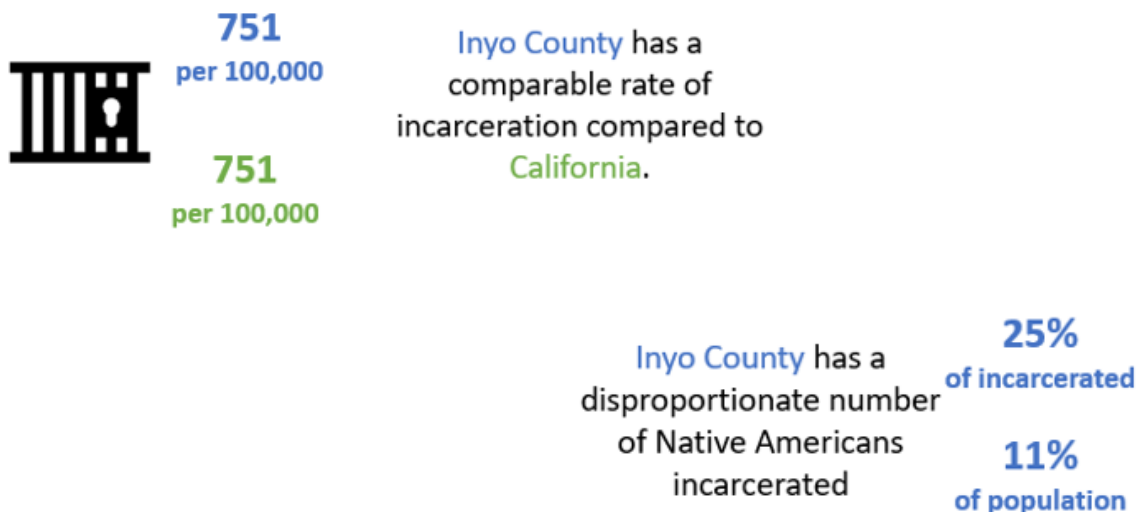


Source: KidsData

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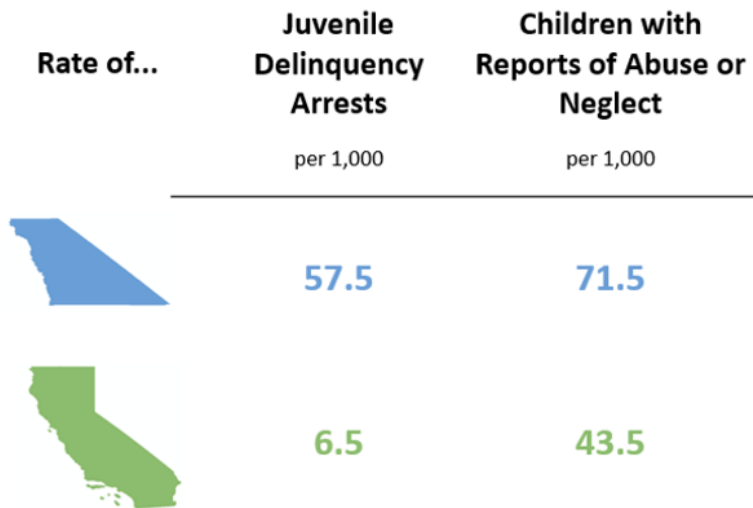
CRIME AND INCARCERATION

According to the U.S. Department of Health and Human Services Healthy People 2030, incarceration negatively impacts the physical and mental health of both the incarcerated individual and their family (US HHS "Incarceration"). These impacts are experienced both during and after incarceration. Correctional facilities lack resources to effectively care for individuals while incarcerated despite their increased risk for high blood pressure, asthma, cancer, arthritis, and various infectious diseases. Furthermore, formerly incarcerated individuals are at an increased risk for overdose and suicide following release (US HHS "Incarceration").



Source: Vera Institute of Justice





Source: KidsData

The percent of children with parent-reported adverse childhood experiences (ACE) between 2016 and 2019 was 28% for children with one parent-reported ACE and 23% for children with 2 or more parent-reported ACE for children in the combined region of Alpin, Amador, Calaveras, Inyo, Mariposa, Mono, and Tuolumne counties, as compared to 21% and 15%, respectively, for California (CDPH "Reducing Adverse Childhood Experiences"). In Inyo County, 49% of children have zero parent-reported ACEs, where in California, 64% of children have zero parent-reported ACEs (CDPH "Reducing Adverse Childhood Experiences").

DISCRIMINATION

Discrimination is a socially structured action that is unfair or unjust and harms an individual or group (Abramson et al.). The stressful experience related to discrimination negatively impacts health and quality of life for affected groups (US HHS "Discrimination"). Individuals facing discrimination due to race, ethnicity, sex, gender, sexual orientation, disability status, or other attributes are at an increased risk for adverse physical and mental health outcomes including but not limited to high blood pressure, increased infant mortality, and low birth weight (US HHS "Discrimination"). According to the National Healthcare Disparities Report, discrimination also impacts access to important socioeconomic opportunities and essential health resources (AHRQ).



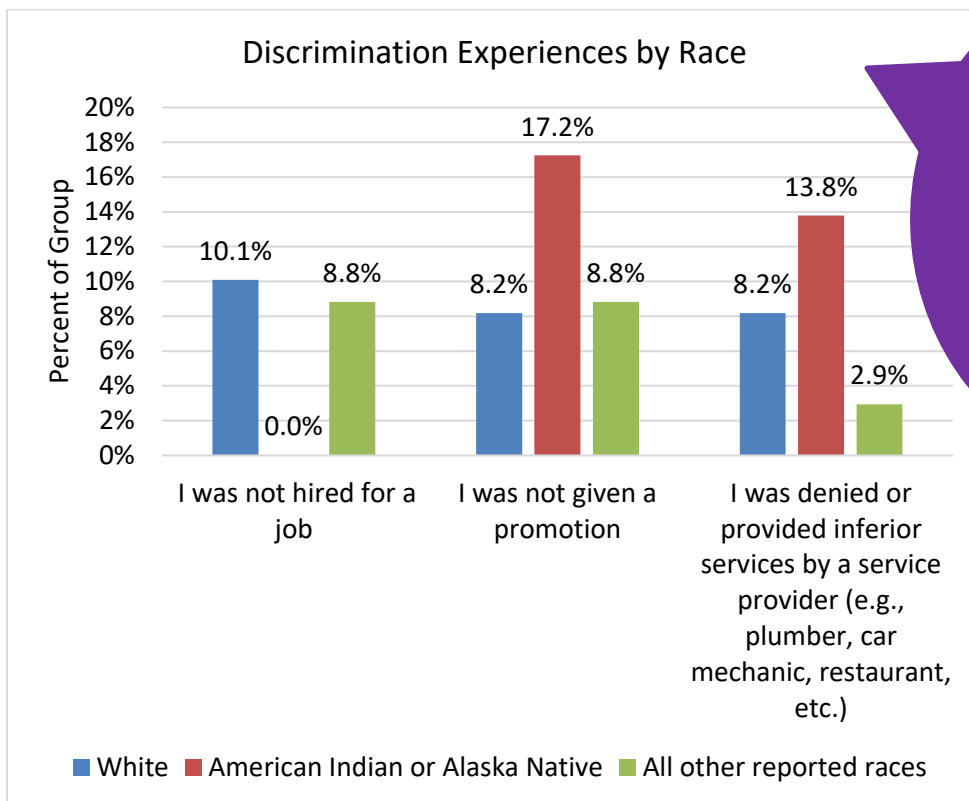
Interpreting this Report

Discrimination Experiences by Race and Gender

The information presented below on discrimination experiences by race and gender from the Inyo County 2023 Community Health Survey represents percentages of group responses from the survey question, “Have you ever felt discriminated against in any of the following ways because of your race, ethnicity, gender, age, religion, physical appearance, sexual orientation, disability status or other characteristics? (select all that apply)”.

Due to the small number of people who chose any one racial group category besides “White” and “American Indian or Alaskan Native”, all other racial groups were combined into a category “all other race/ethnicities” for these results. For example, only one survey participant reported as Asian Indian.

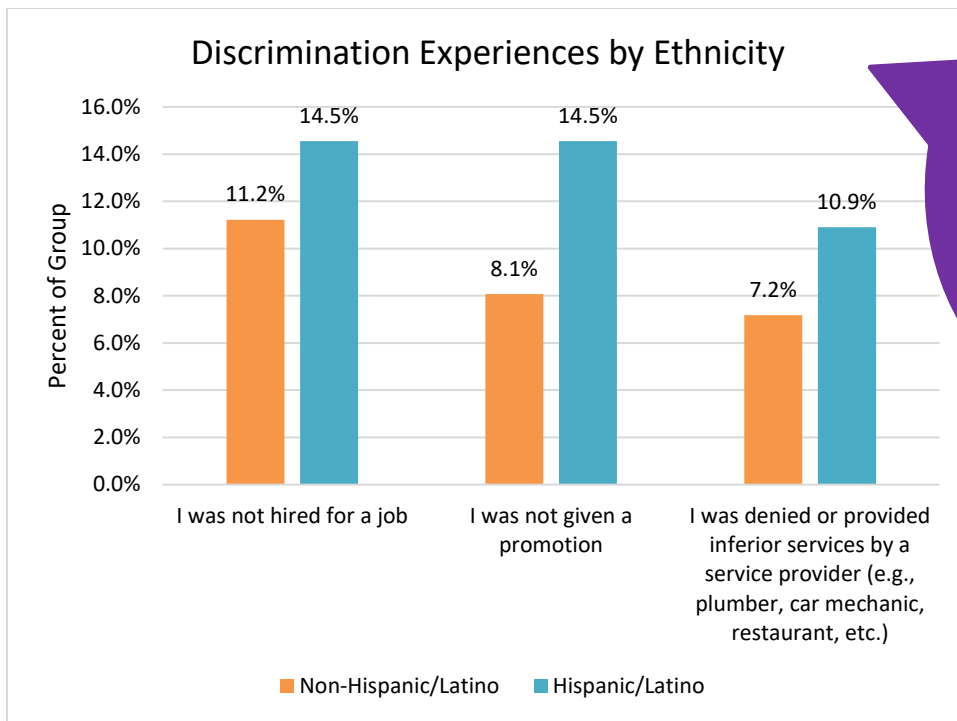
Inyo County 2023 Community Health Survey – Top 3 Discrimination Experiences by Race, Ethnicity, and Gender



American Indian or Alaska Native survey participants experienced discrimination more in two out of the top three experiences than any other racial group.

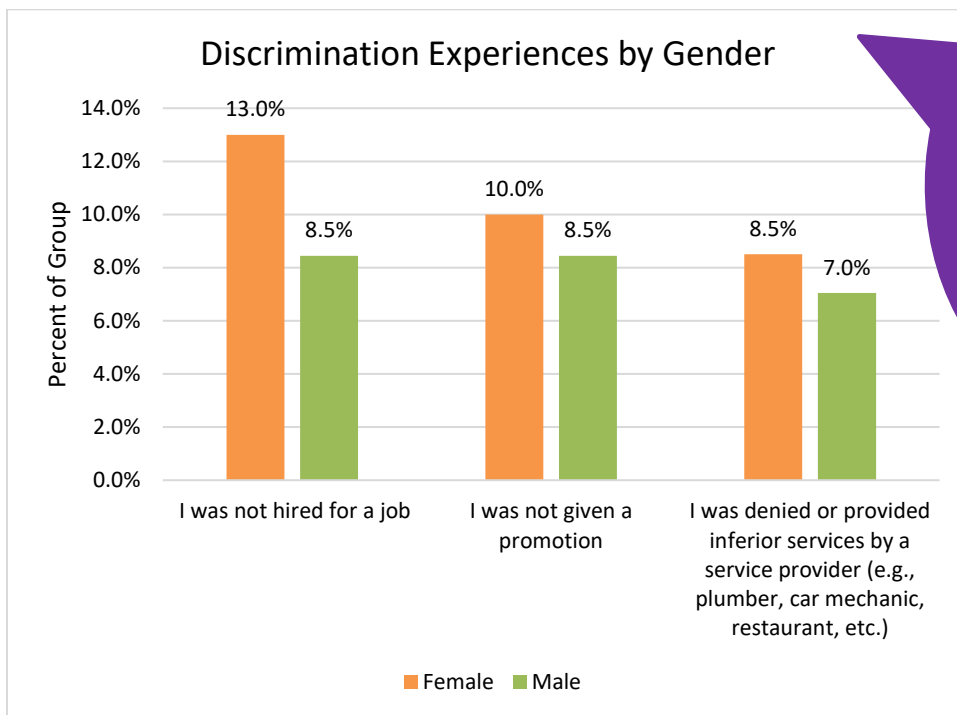
Source: Inyo County 2023 Community Health Survey





Hispanic/Latino survey participants experienced discrimination more than Non-Hispanic/Latino participants.

Source: Inyo County 2023 Community Health Survey



Women survey participants experienced discrimination at higher proportions than men survey participants.

Source: Inyo County 2023 Community Health Survey

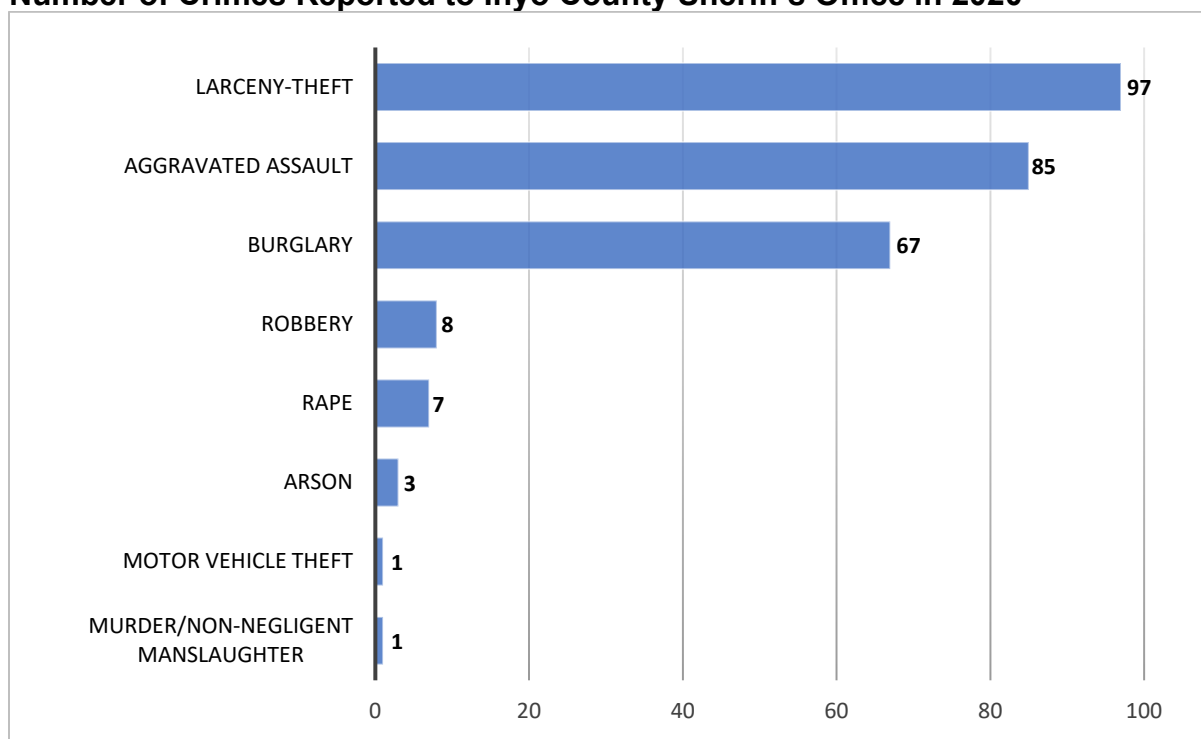


VIOLENCE

Feelings of safety within a community impact health and quality of life. Areas with high levels of crime and violence impact stress and self-rated mental and physical health, create safety concerns related to accessing greenspaces and other beneficial aspects of the built environment, and reduce social cohesion (Han et al.; Meyer et al.).

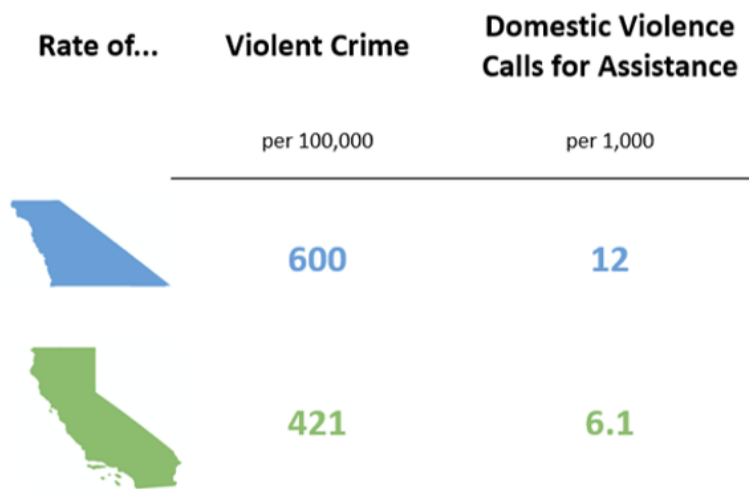
A total of 101 violent crimes and 165 property crimes were reported to the Inyo County Sheriff's Office in 2020 (FBI).

Number of Crimes Reported to Inyo County Sheriff's Office in 2020



Source: FBI





Sources: County Health Rankings & Roadmaps "California Health Rankings "; KidsData

Nationally, firearms deaths rose 8% in 2021 compared to 2020 (USA Facts). There was a total of four firearm-related deaths in Inyo County between 2019 and 2021, resulting in an age-adjusted firearm-related death rate of 6.0 as compared to an age-adjusted firearm-related death rate of 8.3 per 100,000 for California (CDPH "County Health Status Profiles 2023"). However, Inyo County data are inconsistent and vary widely from 2018-2020, 2019-2021, and 2020-2022 making any trend analysis unreliable.

Healthcare Access & Quality

Healthcare access and quality are directly tied to a community's health and wellbeing. Access to high quality preventative care or treatment for health conditions is critical for improving health outcomes and reducing or eliminating disparities in health. Access to care may be impacted by factors such as insurance, provider or transportation availability, or affordability of care (US HHS "Health Care Access and Quality").

HEALTHCARE FACILITY ACCESSIBILITY, CAPACITY, AND DISTRIBUTION

As of 2021, there were 14 healthcare facilities in Inyo County, located in Bishop (n=10) and Lone Pine (n=4) (CDPH "Cal Health Find Database").

Licensed and Certified Healthcare Facilities in Inyo County (October 2021)

Facility Type	Counts
Community Clinic	3
Federally Qualified Health Center (FQHC)	3
General Acute Care Hospital (GACH)	2
Skilled Nursing Facility	2
Rural Health Clinic	2
Home Health Agency	1
Hospice	1
Total	14

In 2021, a total of 648 patients were admitted from the emergency department at Northern Inyo Hospital, and a total of 50 patients were admitted from the emergency department at Southern Inyo Hospital (HCAI "AHRQ Quality Indicators").

The average length of stay in the hospital in Inyo was 7.1 days, as compared to 9.0 days in California (CDPH "California Community Burden of Disease Engine (CCB)"). In 2022, there were 16 readmissions per 100 admissions in Inyo County, equivalent to California's readmission rate of 16 per 100 admissions (CMS; SparkMap). Inyo County reported lower rates of readmission among Black Medicare beneficiaries, 15 per 100 admissions, in comparison to California, 16 per 100 admissions (CMS; SparkMap). Other reported races and ethnicities rate of readmission were equivalent to California rate or had insufficient data.

Interpreting this Report**Preventable Hospitalizations**

Defined as hospital stay that could have been prevented with appropriate preventative care and effective management of existing health conditions. Specifically, diagnoses fall into at least one of the following categories: diabetes with short-term complications, diabetes with long-term complications, uncontrolled diabetes without complications, diabetes with lower-extremity amputation, chronic obstructive pulmonary disease, asthma, hypertension, heart failure, angina without a cardiac procedure, dehydration, bacterial pneumonia, or urinary tract infection (CMS; HCAI "AHRQ Quality Indicators"; SparkMap).

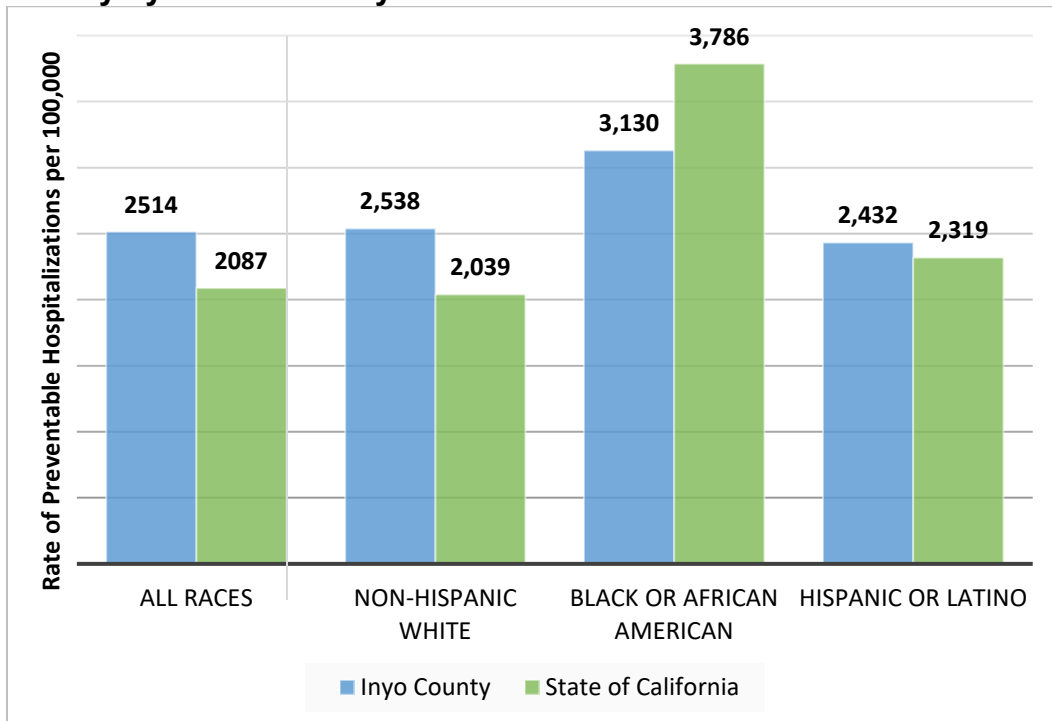
The most common driver of preventable hospitalizations is limited or no access to high quality primary and preventative care. Access to preventative care is in turn impacted



by factors such as access to insurance, affordability of care, provider availability, and transportation resources.

In 2020, there were higher rates of preventable hospitalizations per 100,000 Medicare beneficiaries in Inyo County compared to California (CMS; SparkMap).

Rate of Preventable Hospitalizations per 100,000 Medicare beneficiaries in Inyo County by Race/Ethnicity



Source: CMS; SparkMap



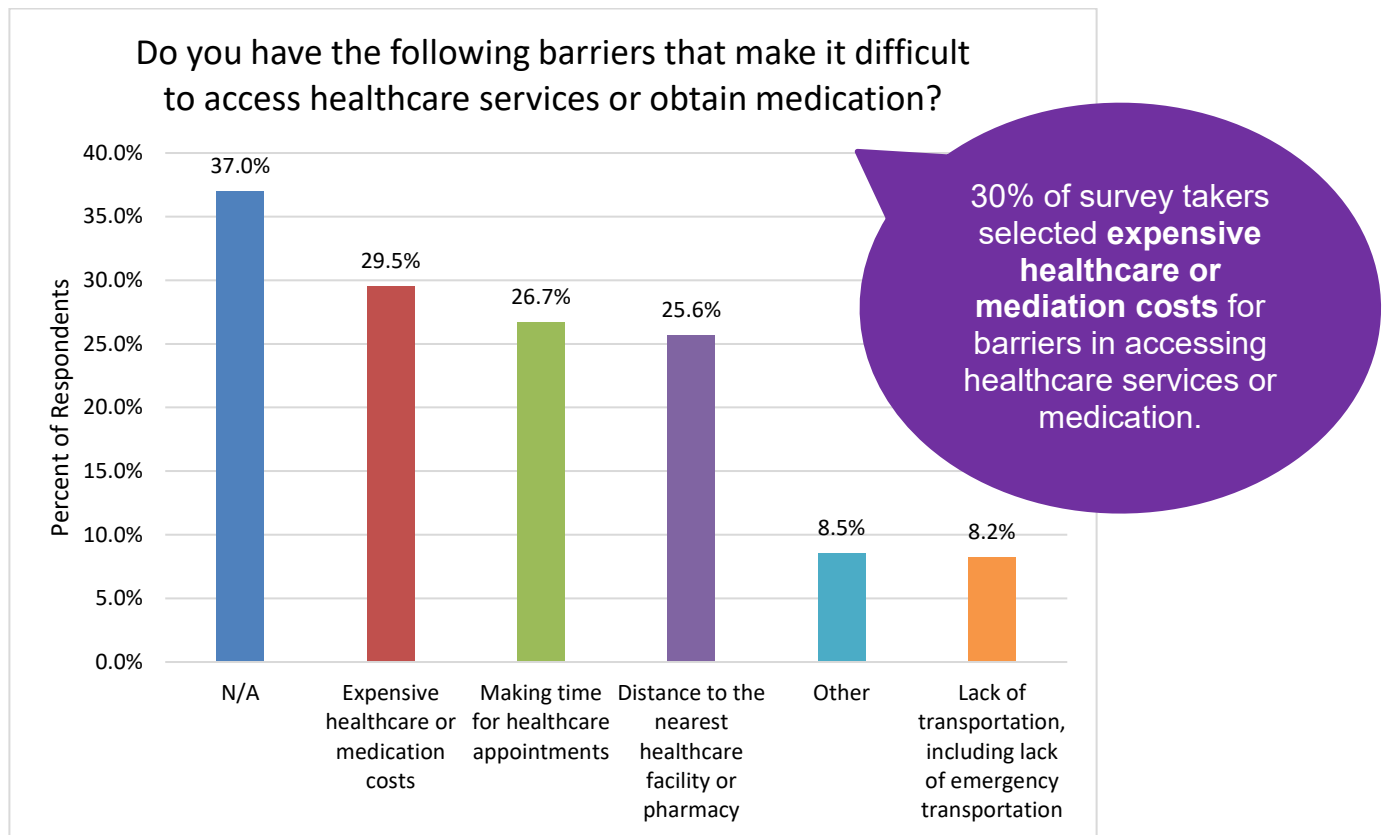
Across both hospitals, the top causes of hospitalization, the hospitalizations with the highest median costs, and the hospitalizations with the longest average length of stay in Inyo County in 2021 are shown in the table below. For comparison, the top 10 causes of hospitalization in California are shown in the first column. Causes of hospitalization on the Inyo County list that do not appear in California's list are in **bold text** (CDPH "California Community Burden of Disease Engine (CCB)"). These causes of hospitalization may be indicative of the unique demographics or health behaviors of the residents of Inyo County.

Most common causes of hospitalization in California and Inyo County as well as the hospitalization categories with the highest median costs and the longest average length of stay in Inyo County.

Top 10 causes of hospitalization in California	Top 10 causes of hospitalization in Inyo County	Hospitalizations with the highest median costs in Inyo County	Hospitalizations with the longest average length of stay in Inyo County
<ol style="list-style-type: none"> 1. septicemia (except in labor) 2. COVID-19 3. hypertension with complications and secondary hypertension 4. mood disorders 5. other complications of birth, puerperium affecting management of mother 6. schizophrenia and other psychotic disorders 7. acute cerebrovascular disease 8. diabetes mellitus with complications 9. complication of device, implant, or graft 10. acute myocardial infarction 	<ol style="list-style-type: none"> 1. COVID-19 2. septicemia (except in labor) 3. osteoarthritis 4. other complications of birth, puerperium affecting management of mother 5. fracture of neck of femur (hip) 6. diabetes mellitus with complications 7. pneumonia (except that caused by tuberculosis or sexually transmitted disease) 8. complications of surgical procedures or medical care 9. mood disorders 10. prolonged pregnancy 	<ol style="list-style-type: none"> 1. cardiac and circulatory congenital anomalies 2. aortic, peripheral, and visceral artery aneurysms 3. burns 	<ol style="list-style-type: none"> 1. paralysis 2. late effects of cerebrovascular disease 3. cancer of thyroid



Inyo County 2023 Community Health Survey – Healthcare Access & Quality Spotlight



Source: Inyo County 2023 Community Health Survey

Community Health Survey takers selected the top three barriers to obtaining healthcare:

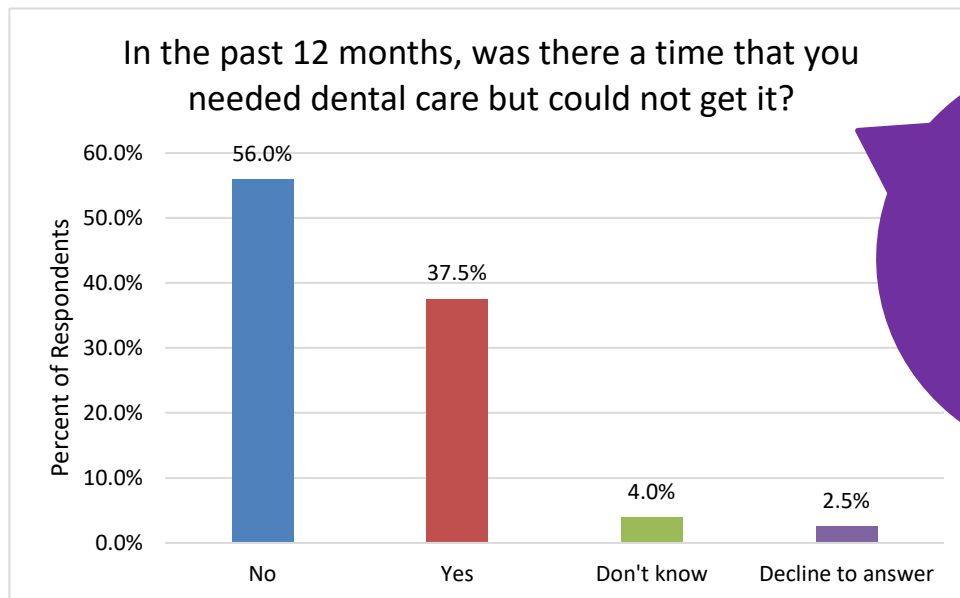
1. **Not enough specialists**
2. **Doctor appointments are scheduled too far out**
3. **Not enough doctors**

Source: Inyo County 2023 Community Health Survey

For full list of options chosen by Community Health Survey respondents please refer to Appendix A



Inyo County 2023 Community Health Survey – Oral Healthcare Access & Quality Spotlight



Majority of survey takers were able to receive dental care when they needed it in the past 12 months.

Source: Inyo County 2023 Community Health Survey

Inyo County CHA Survey takers selected the top 3 barriers to obtaining dental care*:

1. **Could not afford the cost**
2. **Other***
3. **Insurance did not cover the recommended procedure(s)**

* For full list of options chosen by Inyo County Community Health Survey respondents please refer to Appendix A

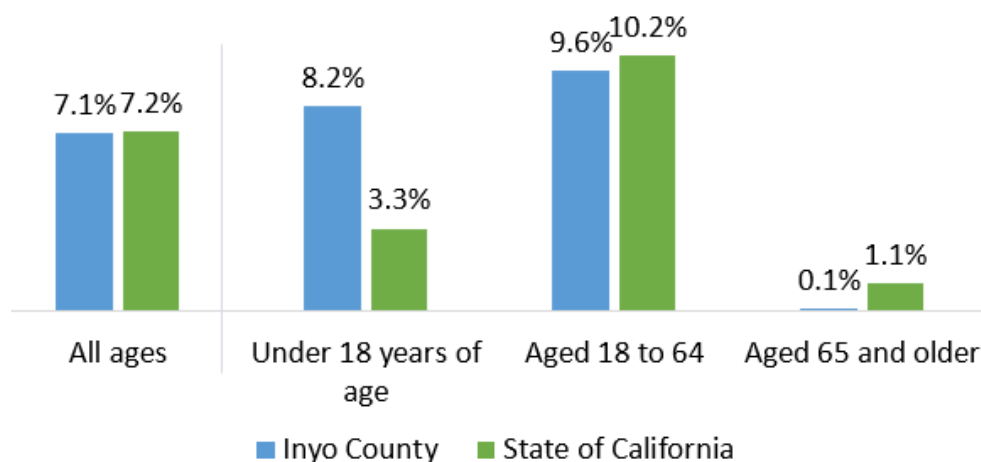
** For full list of Other open-ended responses, please refer to Inyo HHS



HEALTH INSURANCE COVERAGE AND ACCESS TO AFFORDABLE CARE

According to 2021 American Community Survey 5-year estimates from the U.S. Census Bureau, 92.9% (n=17,152) of individuals in Inyo County have health insurance coverage, comparable to the statewide insured rate in California of 92.8% (United States Census Bureau "2017-2021 ACS 5-year Estimates"). However, the percent of uninsured individuals varies by age group with those under 18 years old experiencing higher rates of being uninsured in Inyo County compared to California.

Percent of individuals who are uninsured by age group

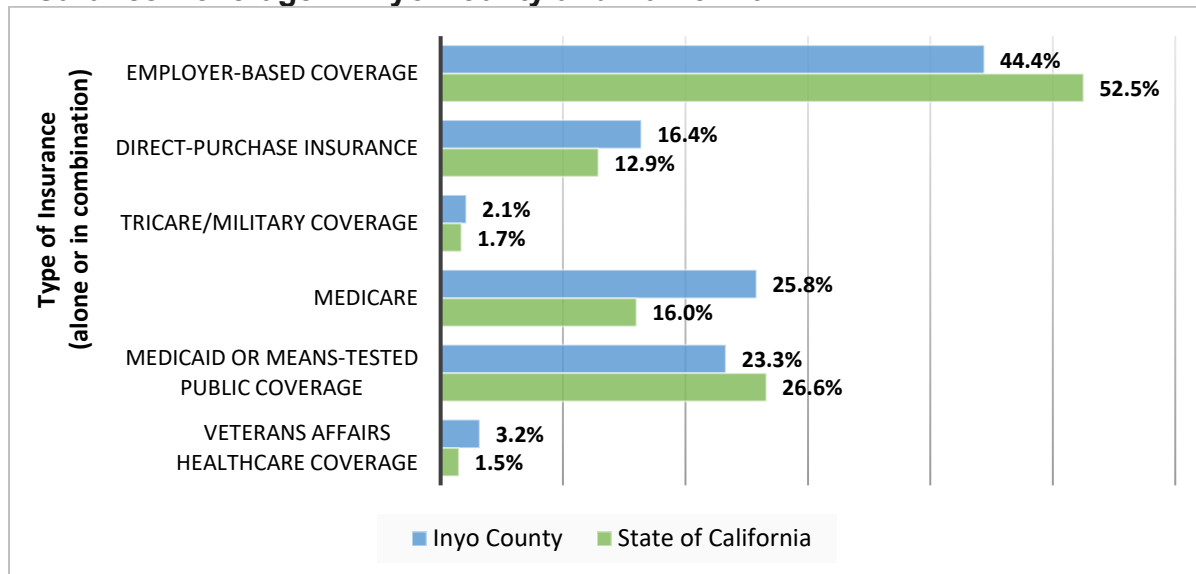


Source: Sparkmap – ACS 5-year estimates, 2021

In Inyo County, 65.6% of individuals have private health insurance, which includes employer-based coverage alone or in combination, direct-purchase insurance alone or in combination, and Tricare/military coverage alone or in combination. These private insurance rates are similar to those across California (United States Census Bureau "2017-2021 ACS 5-year Estimates").

Additionally in Inyo County, 44.4% of individuals have public health coverage, which includes Medicare coverage alone or in combination, Medicaid/means tested public coverage alone or in combination, and VA health care coverage alone or in combination (United States Census Bureau "2017-2021 ACS 5-year Estimates").

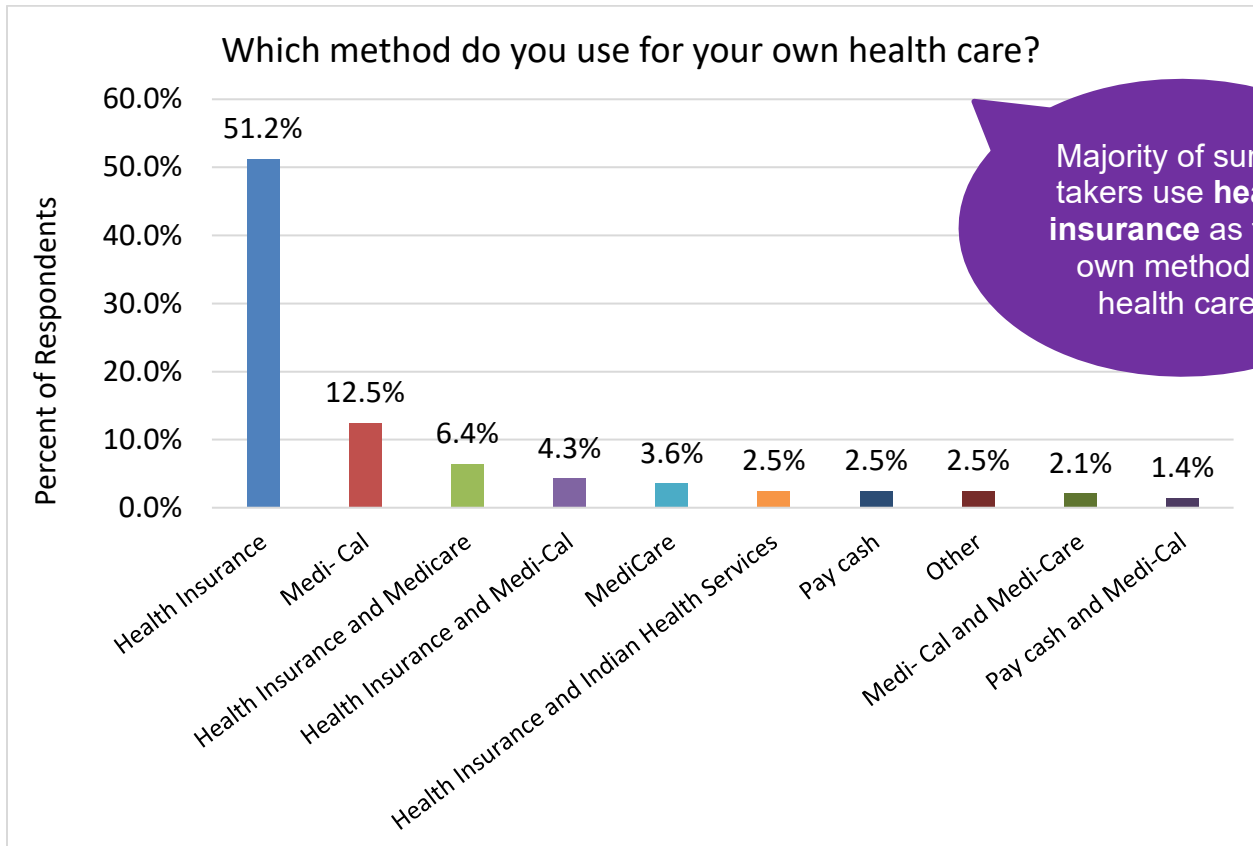
Insurance Coverage in Inyo County and California



Source: SparkMap; United States Census Bureau "2017-2021 ACS 5-year Estimates"



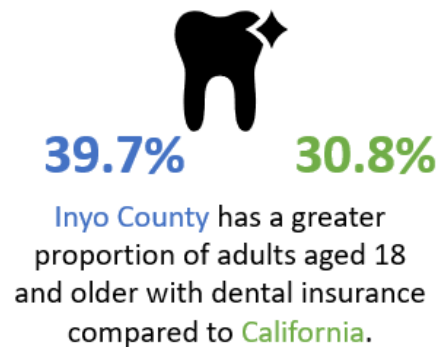
Inyo County 2023 Community Health Survey – Healthcare Methods Spotlight



Source: Inyo County 2023 Community Health Survey

For full list of options chosen by Community Health Survey respondents please refer to Appendix A

A major factor impacting the status of a community's health—specifically oral health—is access to dental health services. Although less than half of Inyo County adults aged 18 years and older have dental insurance, it is a larger proportion compared to California (UCLA Center for Health Policy Research).



HEALTHCARE WORKFORCE CAPACITY AND DISTRIBUTION

A ratio of the population (first number or numerator) to healthcare providers (second number or denominator) is one way to measure healthcare accessibility. Specifically, the ratio indicates how many people in a given area would be distributed to each provider if the entire population sought care. A lower ratio signals better accessibility, as providers are responsible for fewer patients. Compared to the statewide ratio in California of 1,100 residents per dentist, the Inyo County ratio is higher at 1,460 residents per dentist. This suggests reduced dental care accessibility for Inyo County residents relative to the average Californian.

Population to Provider Ratio		
	Inyo County	California
Population to Primary Care Providers	1,200:1	1,230:1
Population to Dental Provider	1,460:1	1,100:1
Population to Mental Health Provider	210:1	240:1

Source: County Health Rankings & Roadmaps "California Health Rankings "



2 Environmental Factors

The connection between space, place, and health – also known as the geospatial determinants of health – manifests in the natural and built environment of a community, a community’s connectivity, and the social and behavioral institutions of a community (ATSDR, Place and Health).

- Some examples of geospatial determinants of health include: environmental contamination and catastrophes, climate exposures, naturally-occurring compounds in an environment linked to disease, transportation systems, water and electrical distribution systems, the availability of safe public spaces, and cultural traditions, among others (ATSDR, Place and Health).
- For example, in Inyo County, possible climate exposures that may impact health in this area include extreme heat and increasing average temperatures, wildfires, air pollution and drought among other issues related to water shortage.

Air Quality

Interpreting this Report
Air Pollution Standards
<p>The Clean Air Act requires EPA to maintain National Ambient Air Quality Standards (NAAQS) for six pollutants that are considered harmful to public health and the environment, including PM_{2.5} and ozone (US EPA "Reviewing National Ambient Air Quality Standards (NAAQS): Scientific and Technical Information").</p> <ul style="list-style-type: none">• The national standard for annual PM_{2.5} is 12.0 µg/m³.• The national standard for daily (24-hour) PM_{2.5} is 35.0 µg/m³.• The national standard for daily (8-hour maximum) ozone is 0.07 ppm.

Air pollution is a leading environmental threat to human health (CDC, National Environmental Public Health Tracking). The two most important air pollutants of concern are ground-level ozone and fine particulate matter (PM_{2.5}) due to their association with serious chronic health conditions such as bronchitis and asthma (NOAA Air Resources Laboratory). The annual average ambient concentration of PM_{2.5} in Inyo County as of 2019 is 5.2 µg/m³, well below the national standard for annual PM_{2.5} of 12.0 µg/m³ (CDC "National Environmental Public Health Tracking Network"). Inyo County exceeded



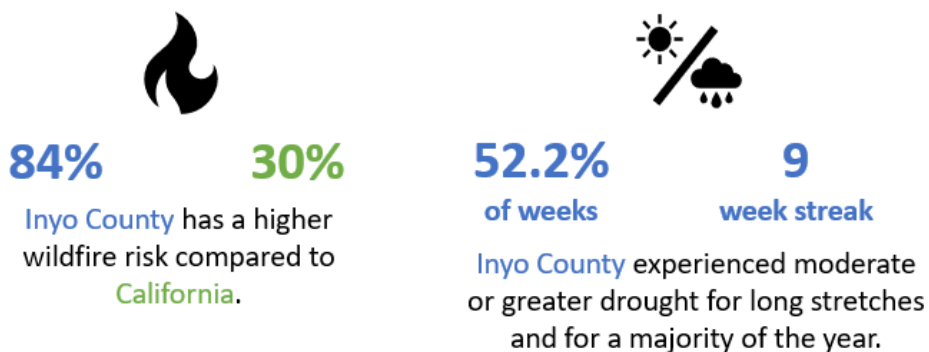
national air quality daily standards for PM_{2.5} and ozone less than 1% (respectively) of the year in 2019 (CDC "National Environmental Public Health Tracking Network").

Climate

The changing climate can impact human health by intensifying existing health threats and leading to the emergence of novel health threats (CDC "Climate Effects on Health"). For example, extreme heat events can lead to significant increases in heat stroke, cardiovascular disease, respiratory disease, cerebrovascular disease, and death (CDC "Temperature Extremes"). In 2021, Inyo County experienced 44 extreme heat days between May and September (CDC "National Environmental Public Health Tracking Network").

Nationwide, the patterns of precipitation, drought, and wildfire events are changing and intensifying, increasing the risk of air and water quality impacts, as well as emergency conditions, which may have significant impacts on the health of Inyo County residents (CDC "Temperature Extremes"). Specifically, drought is associated with increased mortality among rural adults aged 25 to 64, worsening air quality that exacerbates chronic conditions and may contribute to poor birth outcomes and water quality that increases exposure to contaminants such as heavy metals and bacteria (Hayden et al.). Further, exposure to wildfire smoke increases risk for hospitalization or death, and destruction due to wildfire may cause loss of livelihood and displacement, increasing risk for poor mental health and worsened psychosocial wellbeing (Hayden et al.)

Wildfire risk is modeled based on inputs such as fire fuels, weather, human influence, and fire movement (US EPA "EJScreen: Environmental Justice Screening and Mapping Tool"). In Inyo County the wildfire risk is approximately 2.8 times higher than California (US EPA "EJScreen: Environmental Justice Screening and Mapping Tool"). Inyo County experienced a moderate or greater drought in over half of the weeks in 2021, which included nine consecutive weeks of moderate or greater drought (CDC "National Environmental Public Health Tracking Network").



Source: CDC "National Environmental Public Health Tracking Network"; US EPA "EJScreen: Environmental Justice Screening and Mapping Tool"



3 Health Behaviors

Health behaviors are health-related practices and routines that can improve or reduce the health of community members (County Health Rankings & Roadmaps "Health Behaviors").

- Can be protective of health status or pose a health risk.
- Informed by the choices and infrastructure available where people live, learn, work, and play including tobacco use, diet and exercise, alcohol and drug use, and sexual activity.
- Not the only factors determining individual or community health, but instead intersect with other factors, such as social determinants of health, to influence overall health.
- For example, locations with an inability to access healthy foods – possibly due to lack of transportation or lack of grocery stores – negatively impacts the ability of community members to make health nutritional choices, increasing risk for a variety of chronic illnesses such as obesity (US HHS "Social Determinants of Health").

Top 5 Behaviors Identified by the Community That Most Negatively Impact Community Health in Inyo County

1. Drug misuse (e.g., prescription drugs, marijuana, opioids, etc.)
2. Alcohol misuse
3. Domestic violence
4. Life stress or difficult coping with life's stressors
5. Poor eating habits

Majority of survey takers (67%) chose **drug misuse** as the behavior that most negatively impacted community health.

Source: Inyo County 2023 Community Health Survey



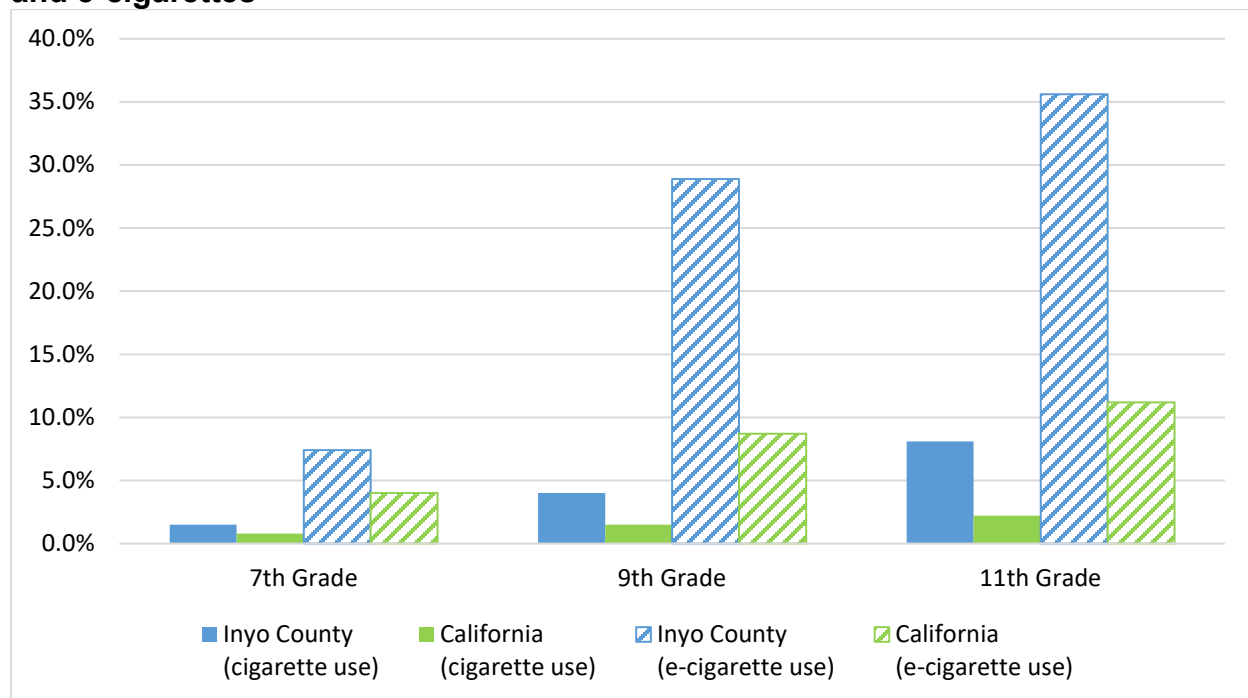
Health Risk Behaviors

Health risk behaviors increase the risk of disease, injury or death, and can include tobacco or cigarette and e-cigarette use, substance use, and risky sexual activity (Tariq and Gupta).

CIGARETTE & E-CIGARETTE USE

In Inyo County, an estimated 12.9% of adults 18 years of age and older were current smokers as of 2020, which is comparable to the percentage of adult, current smokers in California (11.3%) (SparkMap). However, between 2017 and 2019, more Inyo County students (surveyed at 7th, 9th, and 11th grades) reported smoking cigarettes one or more days in the past month compared to students in California (KidsData). Similarly in the same timeframe, but at higher frequencies, more Inyo County students reported e-cigarette use one or more days in the past month compared to students in California (KidsData). Additionally, of the students in Inyo County in grades 7, 9, and 11 who reported e-cigarette use in the past 30 days, 1.2%, 5.0%, and 17.0%, respectively, reported using e-cigarettes for 20-30 days in the past month. Students in Inyo County and California reported use of both types of tobacco products with increased frequency in higher grade levels.

Percentage of Inyo County and California students who reported use of cigarettes and e-cigarettes



Source: KidsData



Only 11% of Community Health Survey takers selected **“tobacco use (including smoking, vaping, and/or chewing)”** as a behavior that most negatively impacts health in their community.

33% Community Health Survey takers selected **“tobacco use (including smoking, vaping, and/or chewing)”** as a concern faced by youth in their community.

Source: Inyo County 2023 Community Health Survey

SUBSTANCE USE AND MISUSE

Drug-induced deaths represent a notable mortality burden in Inyo County (CDPH "County Health Status Profiles 2023"). Between 2019 and 2021, Inyo County had an age-adjusted drug-induced mortality rate of 58.5 per 100,000 (CDPH "County Health Status Profiles 2023"). In contrast, California had an age-adjusted drug-induced mortality rate of 21.4 per 100,000 for the same period (CDPH "County Health Status Profiles 2023").

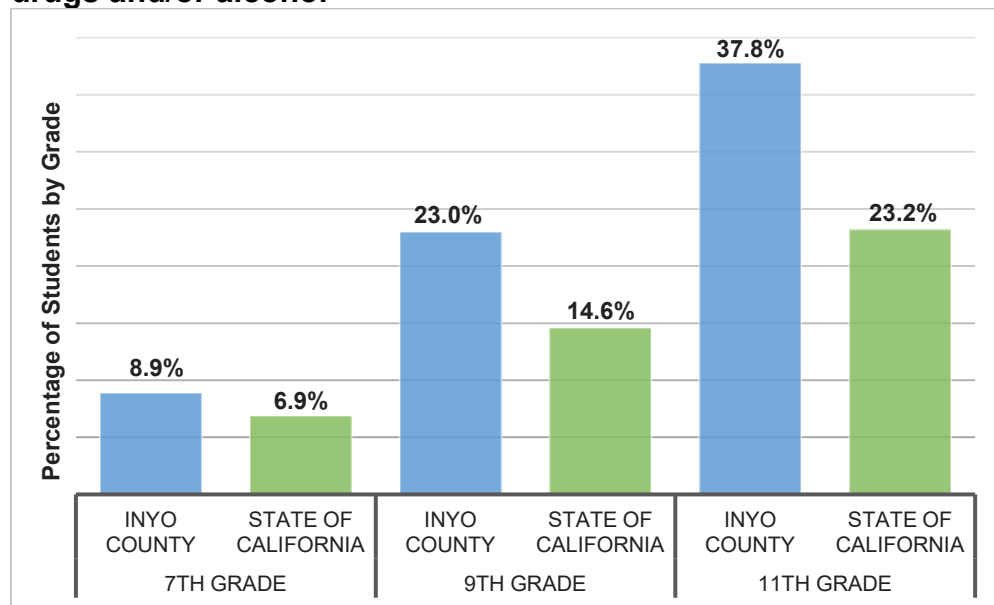
The prevalence of opioid prescriptions in Inyo County is lower than that of California: 26.6 per 100 persons and 28.5 per 100 persons, respectively in 2020 (CDC "Opioid Dispensing Rate Maps"). However, Inyo County experiences a greater burden of opioid-related overdose deaths. According to the California Overdose Surveillance Dashboard, Inyo County had a rate of 41.6 opioid-related overdose deaths per 100,000 residents, as compared to 18.0 per 100,000 residents in California (CDPH "California Overdose Surveillance Dashboard").

With regards to alcohol use, 22.4% of adults in Inyo County aged 18 or older reported excessive drinking in the past 30 days in 2020 as compared to 18.4% in California (Sparkmap Report; County Health Rankings, Excessive Drinking). In Inyo County, 21% of driving deaths were alcohol-impaired between the years 2016 and 2020, as compared to 28% in California (County Health Rankings & Roadmaps "Excessive Drinking").

Between 2017 and 2019, more Inyo County students (surveyed at 7th, 9th, and 11th grades) reported some drug and/or alcohol use compared to students in California (KidsData). Specifically for alcohol use in Inyo County, 4.5% of 7th grade students, 16.9% of 9th graders and 32.8% of 11th graders reported using alcohol one or more days in the last month between 2017 and 2019, as compared to 4.2% of 7th grade students, 9.3% of 9th graders and 15.9% of 11th graders for the same period in California (KidsData). This indicates that as grade level increased, alcohol use increased among students in 7th, 9th, and 11th grades in California and specifically in Inyo County.



Percentage of Inyo County and California students who reported some use of drugs and/or alcohol



Source: KidsData

33% of Community Health Survey takers selected **“mental health and substance use disorder programs for parents”** as one of the greatest needs of children and their families in the Inyo County community.

Source: Inyo County 2023 Community Health Survey

SEXUAL BEHAVIORS AND REPRODUCTIVE HEALTH

Compared to California, there is an increased rate of adolescent mothers (aged 15-19) in Inyo County. Between 2019 and 2021, the age-specific birth rate for adolescent mothers was 24.6 per 1,000 female population, which is more than twice the rate observed in California of 10.3 per 1,000 female population (CDPH "County Health Status Profiles 2023"). Access to contraceptives is critical to preventing unintended pregnancy and sexually transmitted infections among adolescents. As of 2019, 68.4% of stores in Inyo County sold condoms (including convenience stores, drug stores, pharmacies, liquor



stores, supermarkets, small markets, tobacco and vape shops, and other stores). However, only 47.4% of stores had condoms on a shelf and unlocked (CDPH "Reducing Adverse Childhood Experiences"). Further, in Inyo County 20% of thirteen-year-olds were vaccinated for HPV in 2019 compared to 30% of thirteen-year-olds in California (Children Now).

Adolescent childbearing rates are also influenced by a number of individual and community characteristics and determinants. Low adolescent childbearing rates are associated with individual characteristics, such as feeling connected to and performing well in school and feeling connected to family, as well as community characteristics, such as access to mentorship. In contrast, high adolescent childbearing rates are associated with individual characteristics such as family history of adolescent childbirth and living away from biological parents, as well as community characteristics such as high rates of violence, substance abuse and hunger (Kirby et al.; Martinez et al.). Consequently, access to condoms and HPV vaccines are only part of an effective intervention strategy; the CDC recommends that these elements be coupled with sexual risk reduction education and community engagement (Szucs et al.).

Health Protective Factors

Health protective factors lower the risk of negative health outcomes, and can include strong and supportive relationships, including parenting relationships, physical activity, health eating habits and preventative healthcare access.

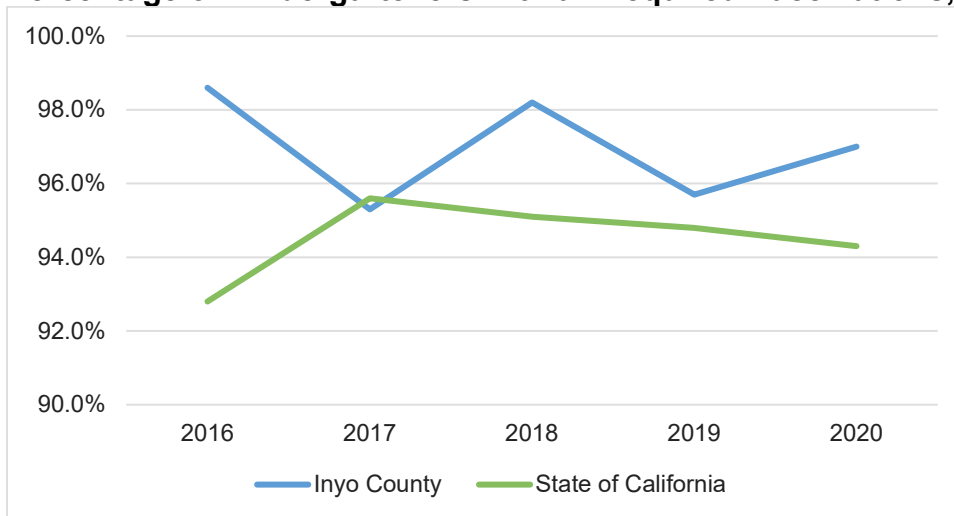
MATERNAL AND CHILD HEALTH

Maternal and child health practices in Inyo County are comparable to California. Between 2019 and 2021 in Inyo County, 86.4% of births received first trimester prenatal care (CDPH "County Health Status Profiles 2023"). In California, there was a slightly higher percentage receiving care of 87.9% (CDPH "County Health Status Profiles 2023"). In Inyo County, 94.5% of births with a known feeding method had initiated breastfeeding during the early postpartum period between 2019 and 2021, as compared to 93.5% for the same period in California (CDPH "County Health Status Profiles 2023").

The percentage of kindergarteners with all required immunizations has decreased in both Inyo County and California between 2016 and 2020, possibly due to a broader increase in vaccine hesitancy across the United States (KidsData).

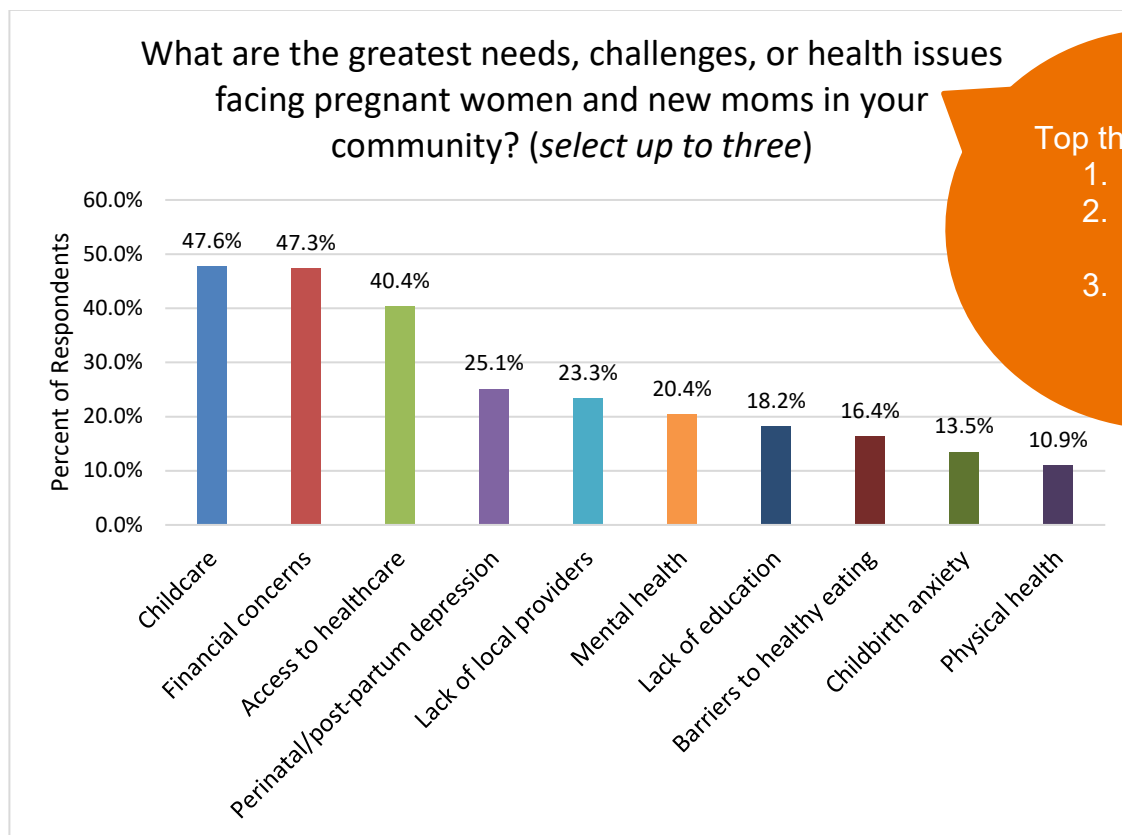


Percentage of Kindergarteners with all Required Vaccinations, 2016-2020



Source: KidsData

Inyo County 2023 Community Health Survey – Maternal and Child Health Spotlight



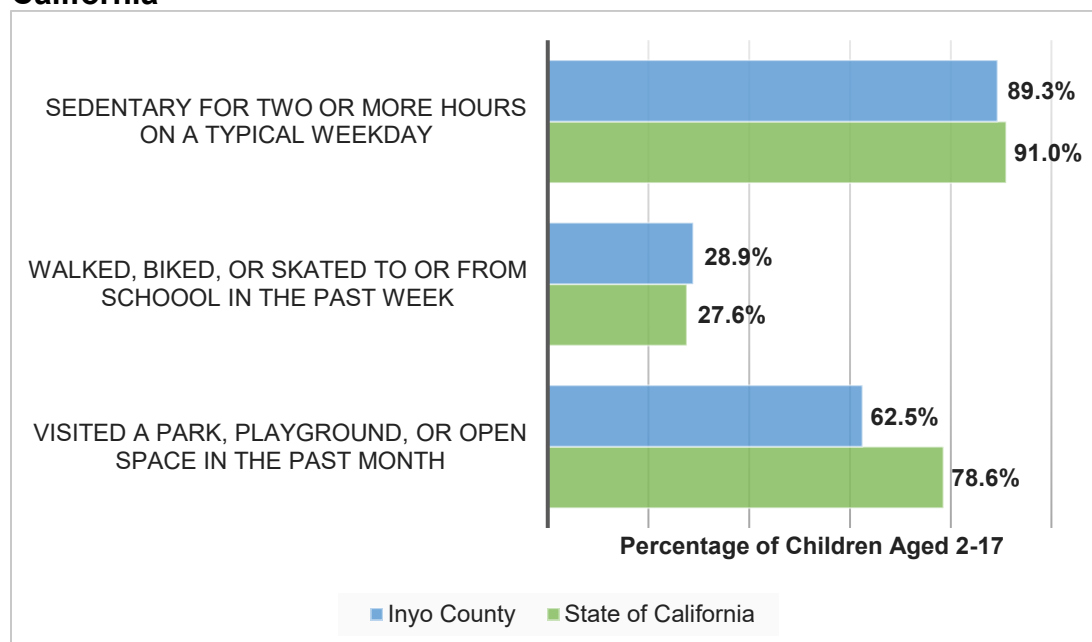
Source: Inyo County 2023 Community Health Survey



PHYSICAL ACTIVITY

Regular physical activity can not only help manage weight and minimize risk of chronic disease, but can also strength bones and muscles and promote mental health and wellbeing (CDC "Benefits of Physical Activity"). Specifically, regular physical activity can improve thinking and cognition in children and reduce short-term anxiety in adults (CDC "Benefits of Physical Activity"). Though many children aged 2 to 17 years in Inyo County report spending time at a park, playground, or open space in the last month, almost 90% of these children report being sedentary for two or more hours on a typical weekday (CDPH "California Community Obesity Profiles"). Among adults, approximately 30% of individuals report walking regularly (CDPH "California Community Obesity Profiles"). Between 2016 and 2017, 29.6% of adults in Inyo County reported that they walked regularly for transportation, fun, or exercise, which is lower than the 38.4% of California adults that walk regularly (CDPH "California Community Obesity Profiles"). The percentage of adults that walk regularly is slightly lower among SNAP-Ed eligible adults with 27.1% reporting walking regularly between 2015 and 2017 in Inyo County and 37.1% reporting walking regularly between 2016 and 2017 in California (CDPH "California Community Obesity Profiles").

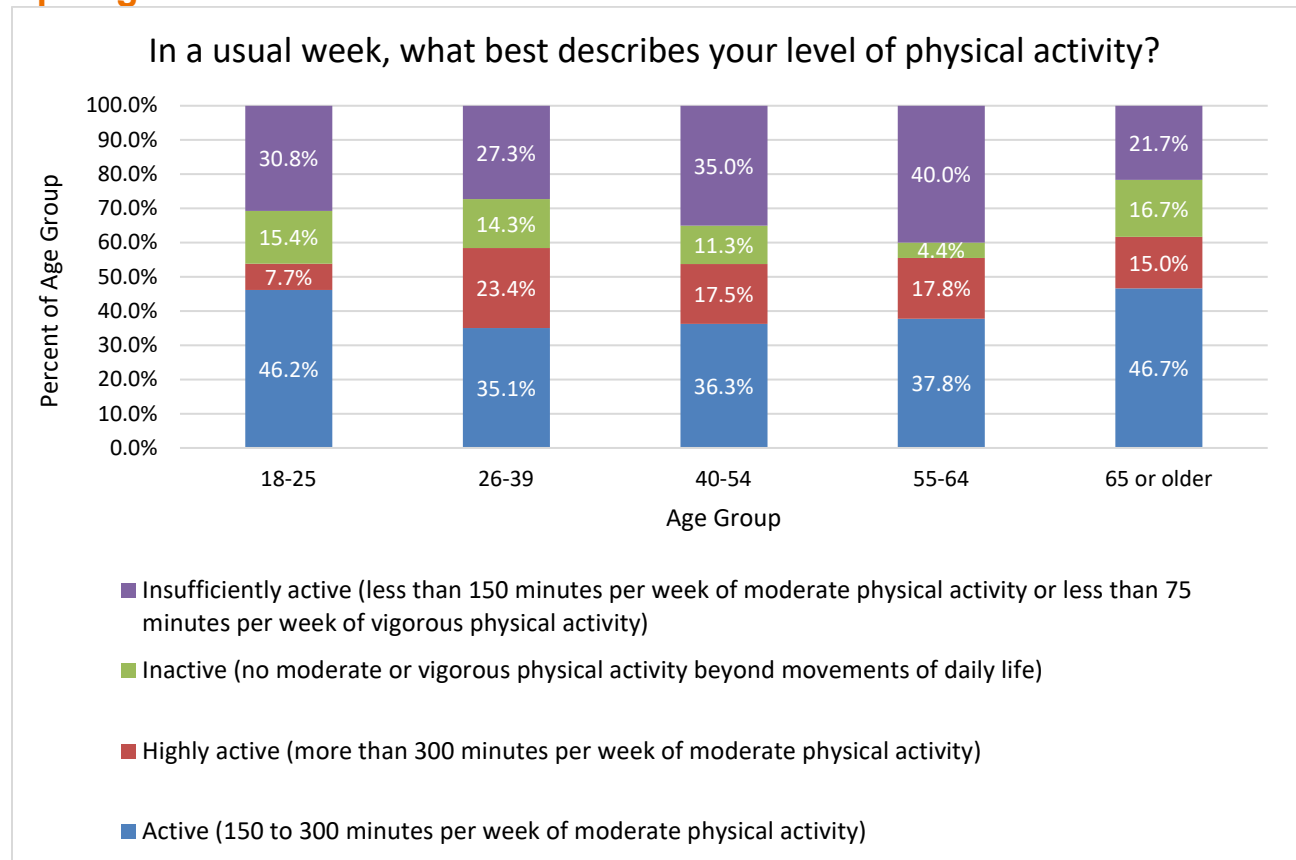
Physical Activity among Children Aged 2-17 in Inyo County and State of California



Source: CDPH "California Community Obesity Profiles"



Inyo County 2023 Community Health Survey – Physical Activity Spotlight



Source: Inyo County 2023 Community Health Survey

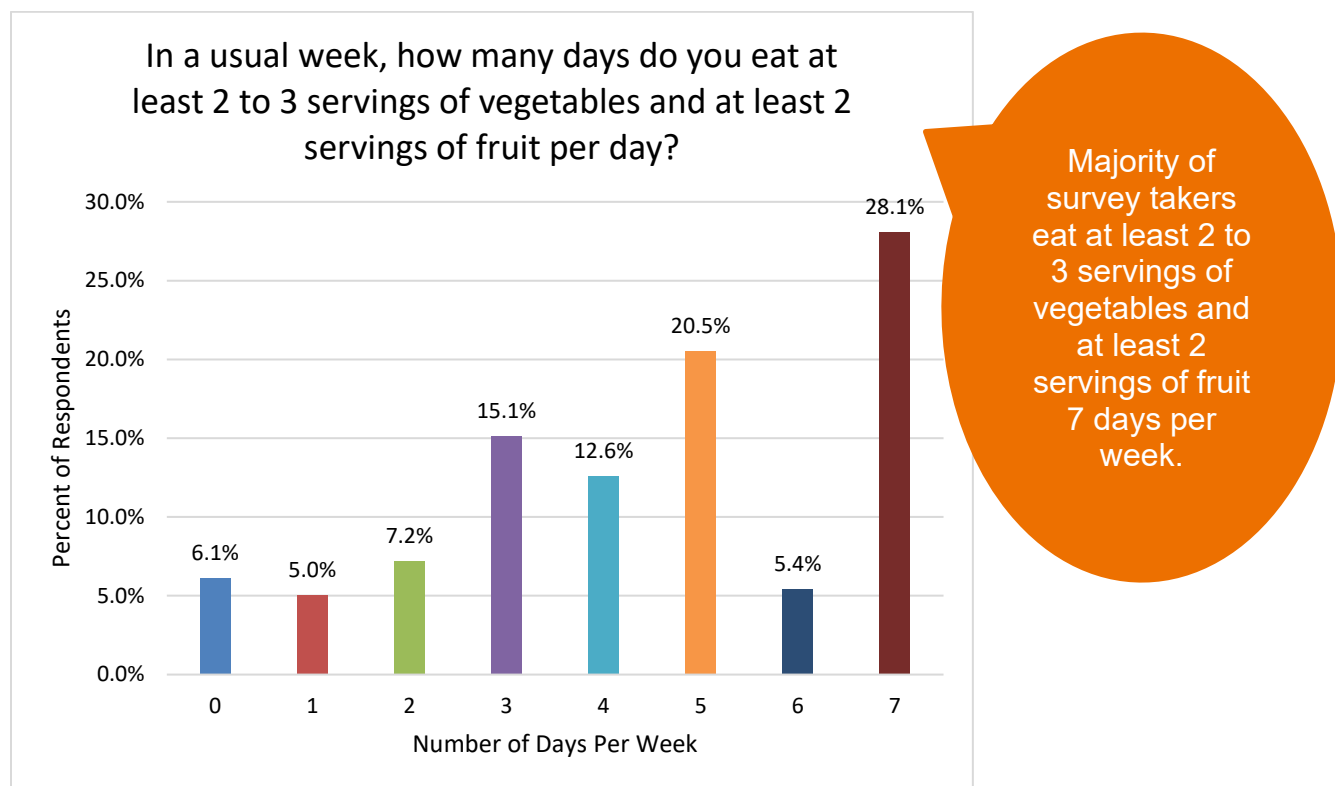
HEALTHY EATING

Healthy eating behaviors occur less frequently among children aged 2-17 years old in Inyo County as compared to California. Among 2- to 17-year-olds between 2018 and 2020, 15.4% reported consuming five or more servings of fruits and vegetables the day prior, as compared to 21.8% in California (CDPH "California Community Obesity Profiles"). An even greater difference was seen among children aged 2- to 11-years-old between 2018 and 2020: 24.9% in Inyo County and 33.2% for California (CDPH "California Community Obesity Profiles").

Between 2016 and 2017, 7.0% of adults in Inyo County reported consuming soda seven times or more a week on average (CDPH "California Community Obesity Profiles"). A slightly greater percentage reported consuming soda seven or more times a week in California: 9.7% (CDPH "California Community Obesity Profiles").



Inyo County 2023 Community Health Survey – Healthy Eating Spotlight





Source: Inyo County 2023 Community Health Survey

PREVENTATIVE HEALTH BEHAVIORS

Many cancer screening tests have been shown to detect the disease early and to reduce the risk of dying from the cancer due to early detection (CDC, Cancer Screening). Therefore, it is paramount that those meeting screening requirements undergo timely screening. Among the most common cancer screening techniques are: mammography for breast cancer among women aged 40 years or older, Pap smear for cervical cancer among women aged 18 years and older who have not had a hysterectomy, and colorectal endoscopy (sigmoidoscopy or colonoscopy) or home fecal occult blood tests (FOBTs) for colorectal cancer.



In 2020, the rates of eligible women who underwent cervical cancer screening in Inyo County were higher compared to California. However, the rates of eligible women receiving mammography in Inyo County were lower compared to California. Also in 2020, colorectal cancer screening rates were lower in Inyo County as compared to California, indicating an area for intervention.

Percentage of....	Women aged 21 to 65 who underwent cervical cancer screening*	Women aged 50 to 74 who received a mammogram in prior two years*	Individuals who underwent colon cancer screening*
	85.2%	72.4%	56.4%
	79.7%	76.3%	78.8%

Source: NCI
* Age-adjusted

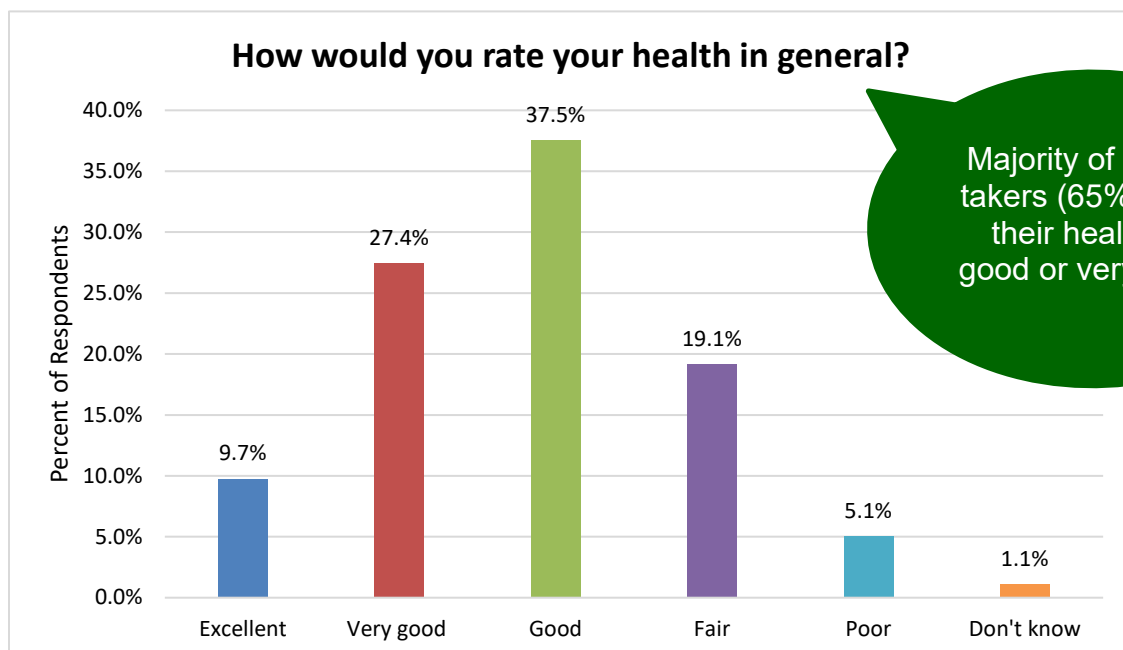


4 Health Status & Outcomes

Health status is a measure of how individuals perceive their health and is an important predictor of various health outcomes (CDC "Health Status"). Health outcomes indicate the experienced physical and mental health status of community members, as well as how long on average people within a community live (County Health Rankings & Roadmaps "Health Outcomes").

- Health outcomes can include chronic and infectious diseases, maternal and child health, mental health, and oral health.
- Both health status and outcomes are impacted by numerous factors, such as social determinants of health, environmental factors, and policy influences (County Health Rankings & Roadmaps "Health Outcomes").

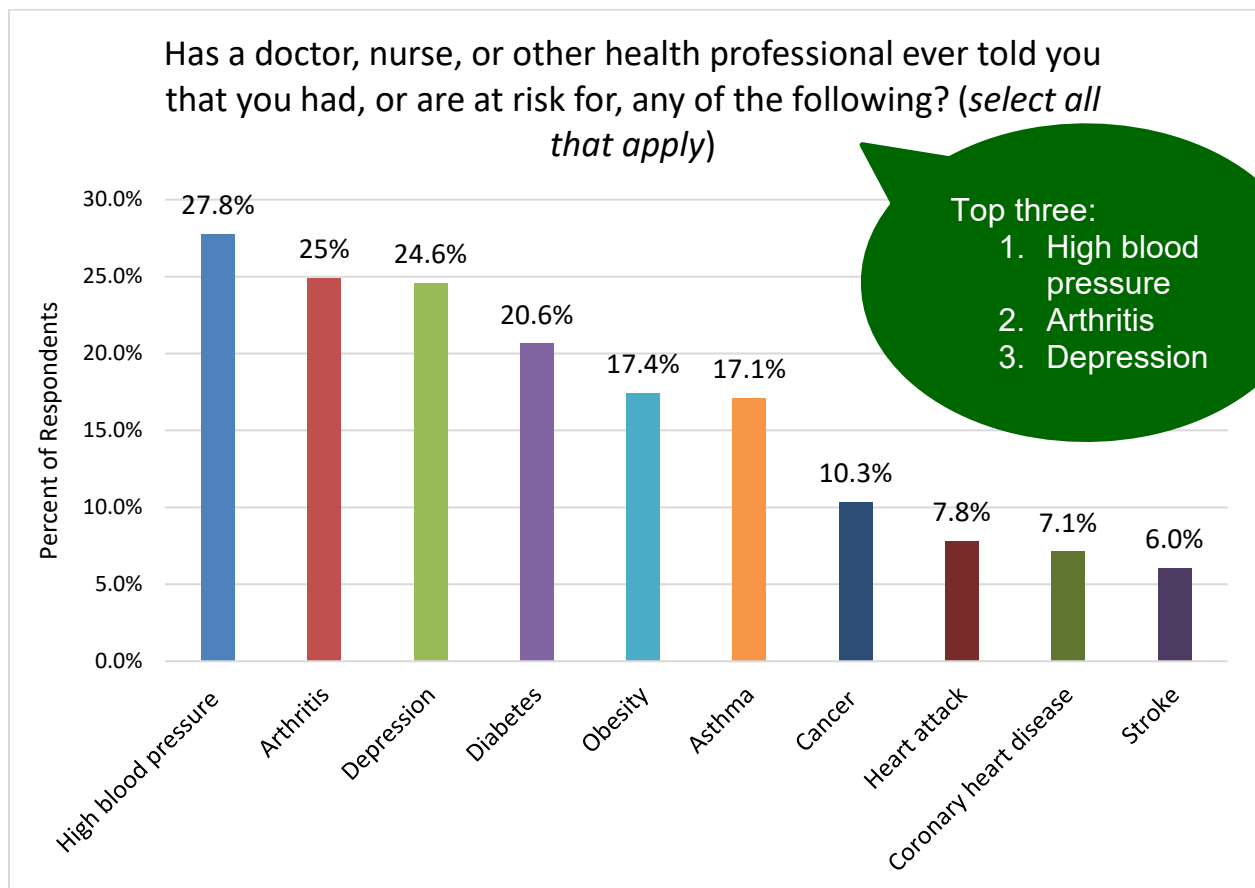
Inyo County 2023 Community Health Survey – Health Status & Outcome Spotlight



Source: Inyo County 2023 Community Health Survey



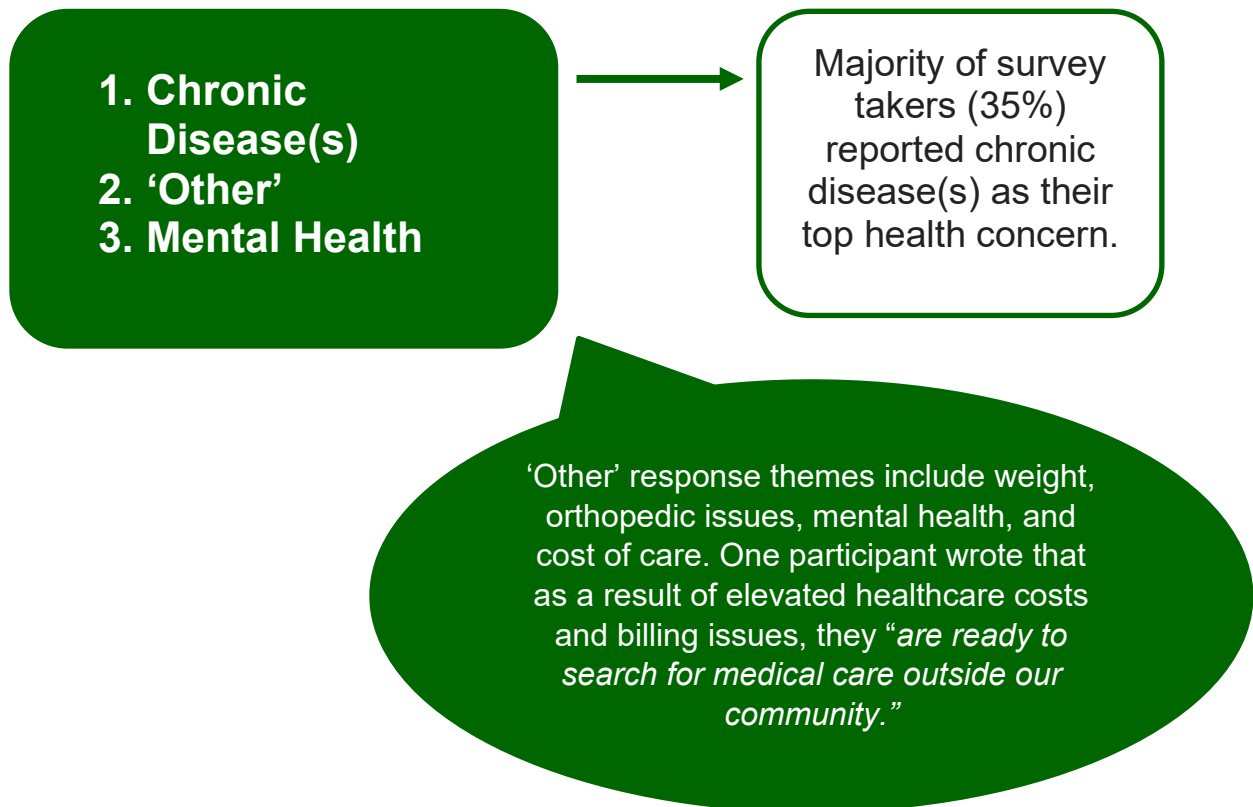
Inyo County 2023 Community Health Survey – Health Status & Outcomes



Source: Inyo County 2023 Community Health Survey



Top 3 Health Concerns Identified by Inyo County 2023 Community Health Survey Respondents



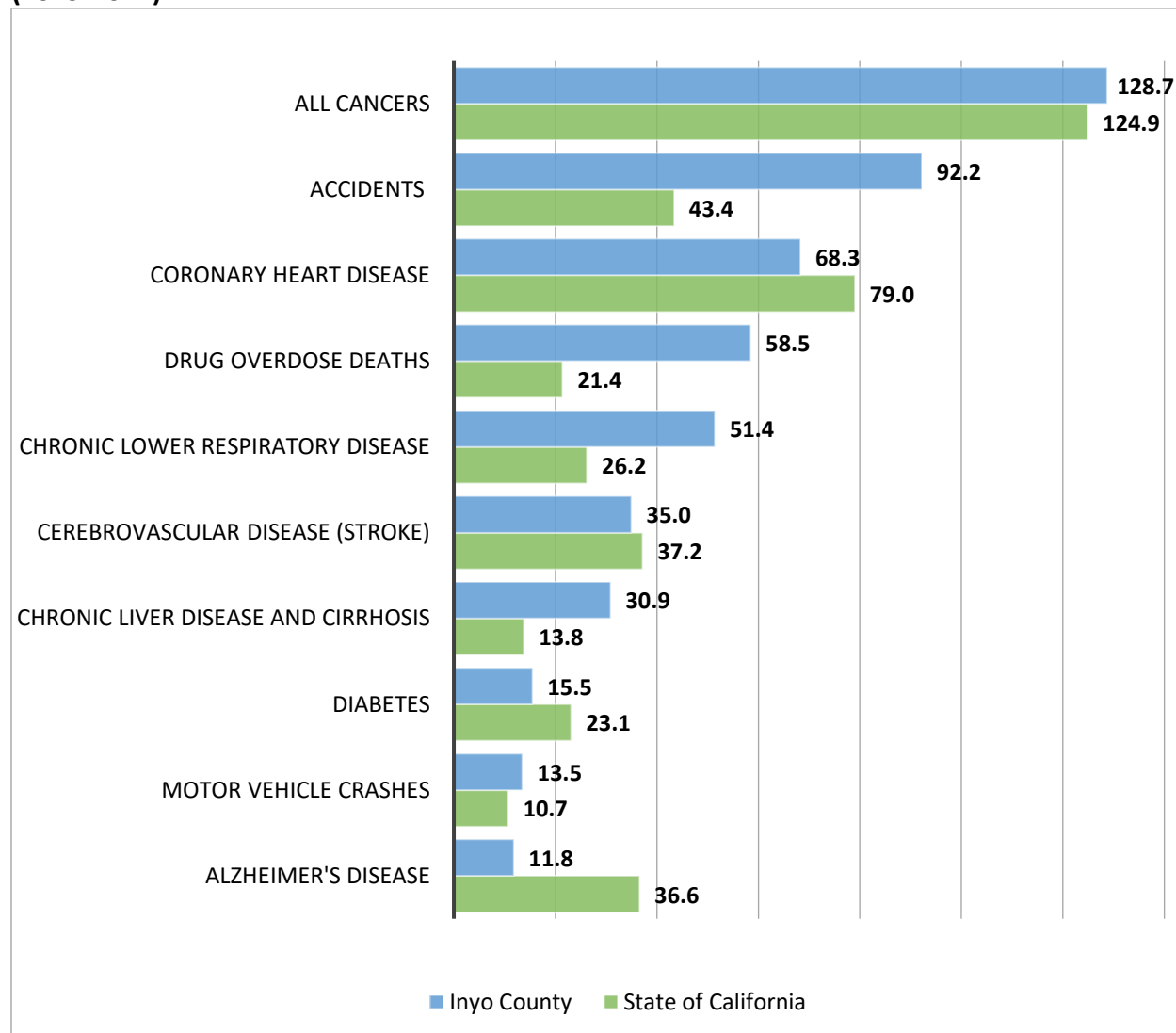
Source: Inyo County 2023 Community Health Survey

For full list of options chosen by Inyo County Community Health Survey respondents please refer to Appendix A



The age-adjusted rates of the ten leading causes of death in Inyo County from 2019 to 2021 are compared to California rates in the figure below.

Age-Adjusted Mortality Rates per 100,000 of the Ten Leading Causes of Death in Inyo County (2019-2021)



Source: CDPH "County Health Status Profiles 2023"



Chronic Diseases

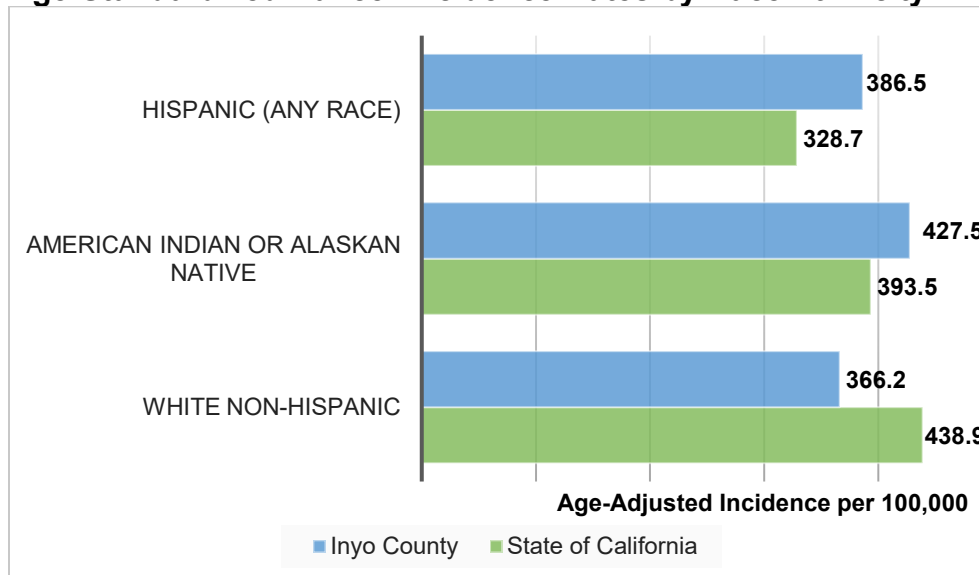
Chronic diseases are defined as conditions that last one or more years and require medical attention and/or limit day-to-day activities (CDC "About Chronic Diseases").

CANCER

Cancer is the leading cause of death in Inyo County with an age-adjusted mortality rate of 128.7 per 100,000 for 2019 to 2021, which is consistent with the all-cancer age-adjusted mortality rate observed in California for the same period of 124.9 per 100,000 (CDPH "County Health Status Profiles 2023"). Between 2016 and 2020, Inyo County had an annual average of 109 new cases of cancer at all sites, resulting in an age-adjusted incidence rate of 388.3 per 100,000 (NCI). Specifically, incidence was stable (i.e., did not significantly increase or decrease) within this time period (NCI).

In Inyo County, race-specific cancer incidence rates demonstrate considerable disparities. Note that data were suppressed for non-Hispanic Blacks and Asian or Pacific Islanders.

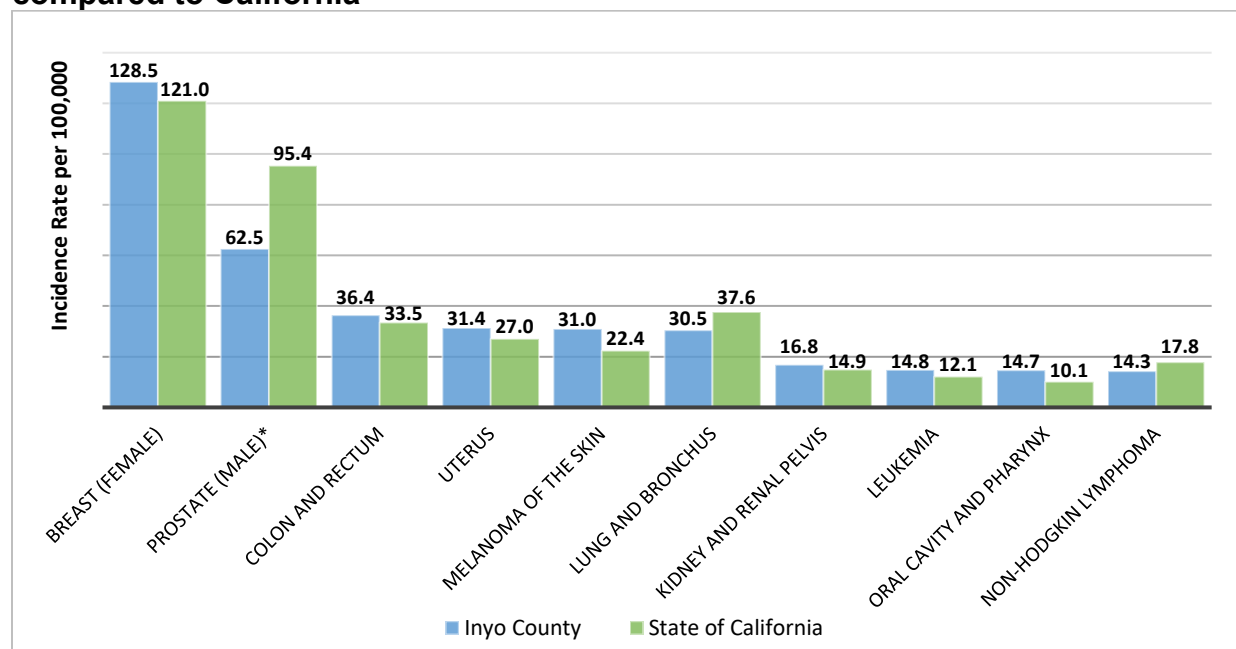
Age-Standardized Cancer Incidence Rates by Race/Ethnicity



Source: NCI



Top 10 Site-Specific Cancer Incidence Rates per 100,000 in Inyo County compared to California



Source: NCI

* Prostate (male) rates are statistically significantly different between the county and the state

Among the top five site-specific cancers in Inyo County, female breast cancer has the highest rate and is higher than California (NCI). Despite being the second highest site-specific cancer rate in Inyo County, the prostate cancer rate is statistically significantly lower than that of California (NCI, State Cancer Profiles). While the rates of uterine cancer and melanoma in Inyo County are higher than those of California, the differences are not statistically significantly different (NCI).

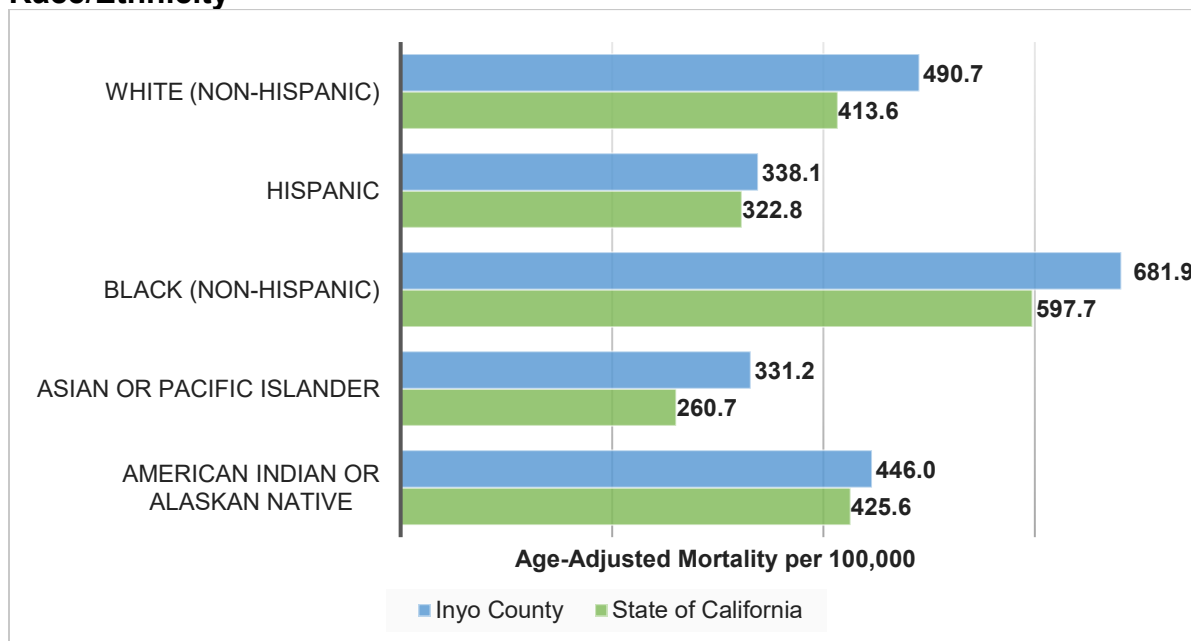
CARDIOVASCULAR DISEASE AND STROKE

Cardiovascular disease refers to a class of conditions of the heart and blood vessels that includes heart disease and stroke (AHA "What is Cardiovascular Disease?"). Inyo County has an increased rate of total cardiovascular mortality, defined as both mortality due to heart disease and mortality due to stroke, as compared to California. Among those aged 35 and older, there was an age-adjusted total cardiovascular disease mortality rate between 2018 and 2020 of 461.5 per 100,000 people in Inyo County and 380.2 per 100,000 people in California (CDC "Interactive Atlas of Heart Disease and Stroke"). Further, cardiovascular disease mortality rates are increased among all racial/ethnic groups compared to statewide rates (CDC "Interactive Atlas of Heart Disease and Stroke"). Inyo County-specific health disparities are particularly evident in the greatly



increased mortality rate among non-Hispanic Black individuals of 681.9 per 100,000 as compared to the next highest mortality rate, experienced by non-Hispanic White individuals, of 490.7 per 100,000 (CDC "Interactive Atlas of Heart Disease and Stroke"). The cardiovascular disease mortality rate among Asians or Pacific Islanders and Hispanics is less than the overall mortality rate in Inyo County (CDC "Interactive Atlas of Heart Disease and Stroke").

Age-Adjusted Cardiovascular Disease Mortality Rates, among those aged 35+, by Race/Ethnicity



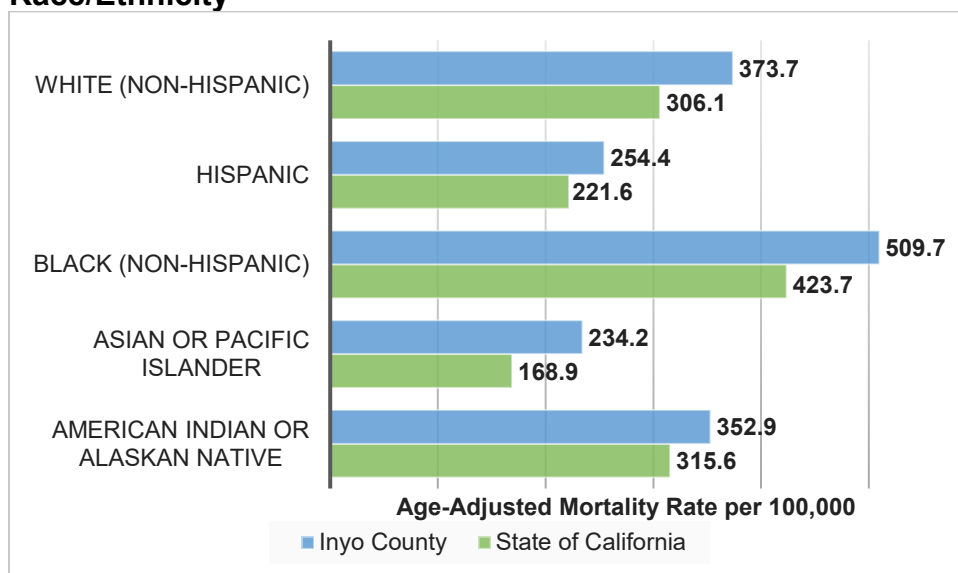
Source: CDC "Interactive Atlas of Heart Disease and Stroke"

Examination of hospitalization rates for cardiovascular disease may be illustrative of access to care and/or the severity of cardiovascular disease symptoms and conditions in Inyo County. Overall, there is a slightly lower hospitalization rate in Inyo County between 2018 and 2020 – 37.0 per 100,000 aged 65 and older – as compared to the statewide rate of 45.8 per 100,000 (CDC, Interactive Atlas of Heart Disease and Stroke). There is a slightly increased hospitalization rate among Hispanic individuals in Inyo County of 46.2 per 100,000, and a comparable hospitalization rate among non-Hispanic White individuals in Inyo County of 37.8 per 100,000 (CDC "Interactive Atlas of Heart Disease and Stroke"). There is insufficient data for hospitalization of non-Hispanic Black individuals for cardiovascular disease despite their greatly increased mortality rate which suggests that this population may not have adequate access to healthcare (CDC "Interactive Atlas of Heart Disease and Stroke").

Heart Disease

Heart disease is a term that encompasses several types of heart conditions, including the most common type of heart disease in the United States, coronary heart disease – also called coronary artery disease or ischemic heart disease (CDC "Heart Disease"). Between 2018 and 2020, Inyo County had an age-adjusted mortality rate of 333.6 per 100,000 for all heart diseases (e.g., coronary heart disease, hypertensive heart disease, etc.) among people aged 35 and older, which is greater than California's mortality rate of 272.3 per 100,000 (CDC "Interactive Atlas of Heart Disease and Stroke"). There are major disparities in heart disease mortality by race and ethnicity in Inyo County with significantly greater mortality observed among non-Hispanic Black individuals (CDC "Interactive Atlas of Heart Disease and Stroke"). Compared to the overall mortality rate in Inyo County, non-Hispanic White and American Indian or Alaskan Natives demonstrate slightly elevated heart disease mortality in Inyo County (CDC "Interactive Atlas of Heart Disease and Stroke"). Furthermore, rates of heart disease mortality are elevated across all races and ethnicities when compared to California (CDC "Interactive Atlas of Heart Disease and Stroke").

Age-Adjusted Heart Disease Mortality Rates, among those aged 35+, by Race/Ethnicity



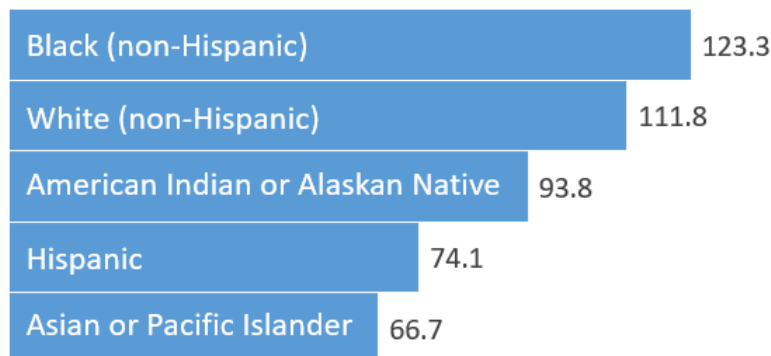
Source: CDC "Interactive Atlas of Heart Disease and Stroke"

Coronary heart disease is a specific kind of cardiovascular condition that may result from the buildup of plaque in arteries (i.e., atherosclerosis) that increases risk for a heart attack (AHA "Coronary Artery Disease - Coronary Heart Disease"). Importantly, coronary heart disease is the third greatest cause of death in Inyo County. The age-adjusted coronary heart disease mortality rate between 2019 and 2021 was 68.3 per 100,000 in Inyo County and 79.0 per 100,000 in California (CDPH "County Health Status Profiles 2023").



Additionally, there is a disparity in the mortality rate for coronary heart disease in Inyo County between 2018 and 2020, with non-Hispanic Black individuals having the highest rate (CDC "Interactive Atlas of Heart Disease and Stroke").

Age-Adjusted Coronary Heart Disease Mortality Rates per 100,000 in Inyo County, by Race/Ethnicity



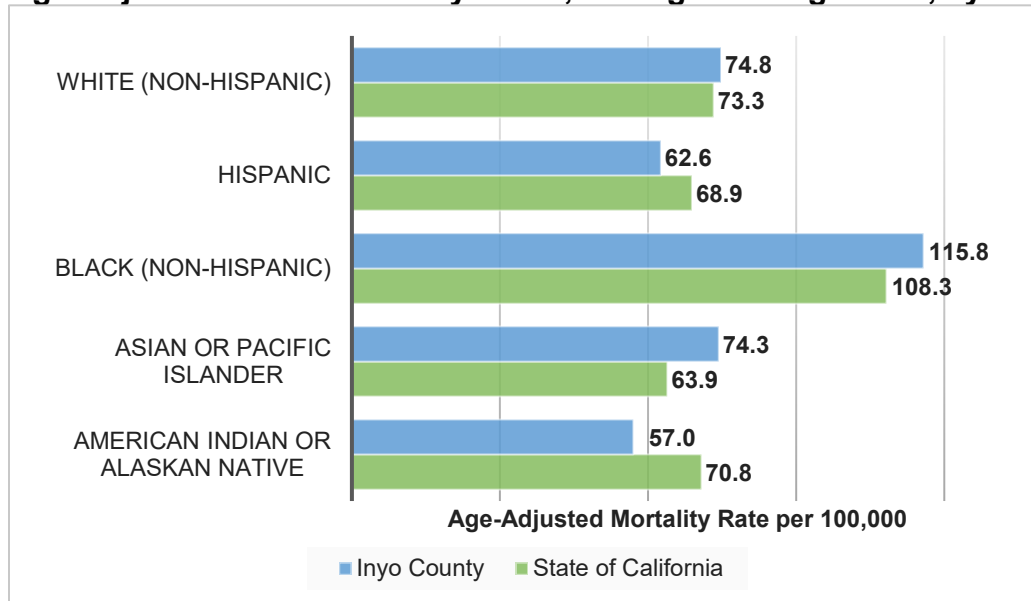
Source: CDC "Interactive Atlas of Heart Disease and Stroke"

Cerebrovascular Disease (Stroke)

Strokes are a type of cardiovascular condition that occur when either blood flow to the brain is blocked or there is sudden bleeding in the brain (NIH National Heart). The age-adjusted all stroke mortality rate among those aged 35 years and older between 2018 and 2020 in Inyo County – 76.8 per 100,000 – is higher than the rate observed in California – 73.1 per 100,000 (CDC "Interactive Atlas of Heart Disease and Stroke"). There are large disparities in stroke mortality by race and ethnicity in Inyo County. Specifically, there is an elevated mortality rate among non-Hispanic Black individuals of 115.8 per 100,000, while all other races/ethnicities experience lower mortality relative to the overall stroke mortality rate in Inyo County (CDC "Interactive Atlas of Heart Disease and Stroke"). Compared to mortality rates in California, stroke mortality in Inyo County is lower among Hispanics and American Indian or Alaskan Natives (CDC "Interactive Atlas of Heart Disease and Stroke").



Age-Adjusted Stroke Mortality Rates, among those aged 35+, by Race/Ethnicity



Source: CDC "Interactive Atlas of Heart Disease and Stroke"

Hypertension

Hypertension is the elevation of blood pressure above a normal range (CDC "High Blood Pressure Symptoms and Causes"). The risk of developing hypertension may be increased by health conditions such as diabetes or obesity, or through health behaviors such as lack of physical activity (CDC "High Blood Pressure Symptoms and Causes"). Hypertension can increase the risk of heart attack or stroke (CDC "High Blood Pressure Symptoms and Causes"). The average age-adjusted hypertension mortality rate in Inyo County from 2018 to 2020 is 136.0 per 100,000, which is lower than 139.6, the average age-adjusted hypertension mortality rate for the same period (CDC "Interactive Atlas of Heart Disease and Stroke").



Inyo County 2023 Community Health Survey – Health Status & Outcome Spotlight

Percentage of community survey takers who reported having or being at risk for hypertension.¹

27.8%



Percentage of national survey takers who reported ever having hypertension.²

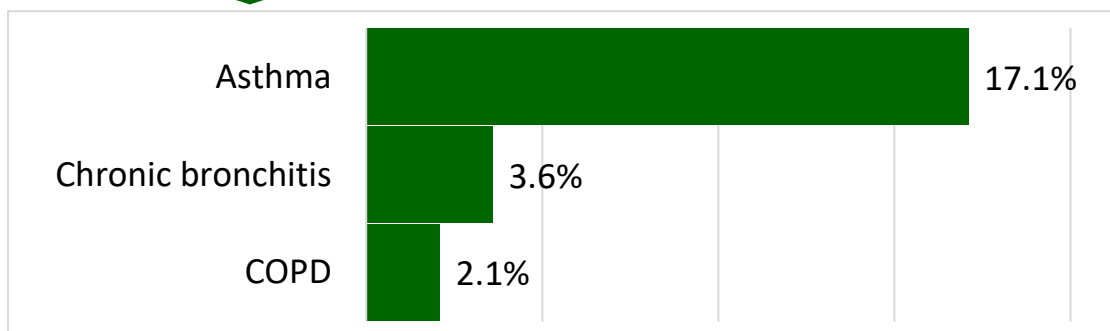
32.2%

CHRONIC LOWER RESPIRATORY DISEASES

Chronic lower respiratory disease includes four notable conditions: chronic obstructive pulmonary disease (COPD), chronic bronchitis, emphysema, and asthma. Chronic lower respiratory disease is one of the top five causes of death in Inyo County (CDPH "County Health Status Profiles 2023"). Between 2019 and 2021, Inyo County had an age-adjusted chronic lower respiratory disease mortality rate of 51.4 per 100,000, while California had a notably lower age-adjusted chronic lower respiratory disease mortality rate of 25.9 per 100,000 (CDPH "County Health Status Profiles 2023").

Inyo County 2023 Community Health Survey – Health Status & Outcome Spotlight

Percentage of survey takers who reported having or being at risk for listed chronic lower respiratory diseases.



Source: Inyo County 2023 Community Health Survey

¹ Source: Inyo County 2023 Community Health Survey

² Among adults 18 years or older in 2019; excluding gestational hypertension. Source: CDC. "Behavioral Risk Factor Surveillance System." <https://www.cdc.gov/brfss/index.html>.

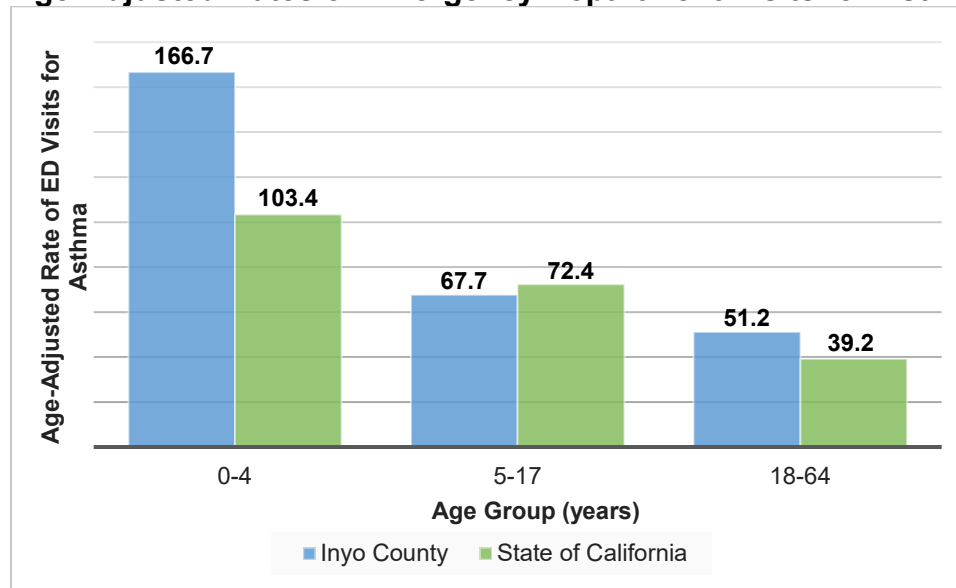


Asthma

Asthma is a disease of the lungs that causes wheezing, breathlessness, coughing, and chest tightness and occurs in both adults and children (CDC "Asthma"). Specifically, it is one of the most common chronic conditions among children in the United States (CDC "Asthma"). An asthma attack can be triggered by various environmental factors including tobacco smoke, dust, air pollution, pests such as cockroaches and mice, pet dander, mold, cleaning and disinfecting agents, among other triggers (CDC "Asthma"). In the combined region of Alpine, Amador, Calaveras, Inyo, Mariposa, Mono, and Tuolumne counties, 25.1% of individuals have reported lifetime asthma for 2019 to 2020, as compared to 15.1% for the state overall (CDPH "California Asthma Dashboard"). Specifically, among those aged 18 to 64, there was a lifetime asthma prevalence of 29.2% in the combined county region and 16.6% in California for 2019 to 2020 (CDPH "California Asthma Dashboard").

In 2014, there were a total of 92 emergency department visits recorded for asthma in Inyo County, resulting in an age-adjusted rate of 56.9 visits per 10,000 residents (CDPH "California Asthma Dashboard"). This is higher than the rate of 49.5 per 10,000 residents observed in California (CDPH "California Asthma Dashboard"). There are increased rates of visits to the emergency department for asthma among younger people (aged 0 to 17 years) as compared to those 18 years and older, a trend which is consistent with what rates for California (CDPH "California Asthma Dashboard"). However, there are elevated emergency department visit rates for those age 4 years and younger and those aged 18 to 64 years in Inyo County as compared to California (CDPH "California Asthma Dashboard").

Age-Adjusted Rates of Emergency Department Visits for Asthma, by Age Group



Source: CDPH "California Asthma Dashboard"

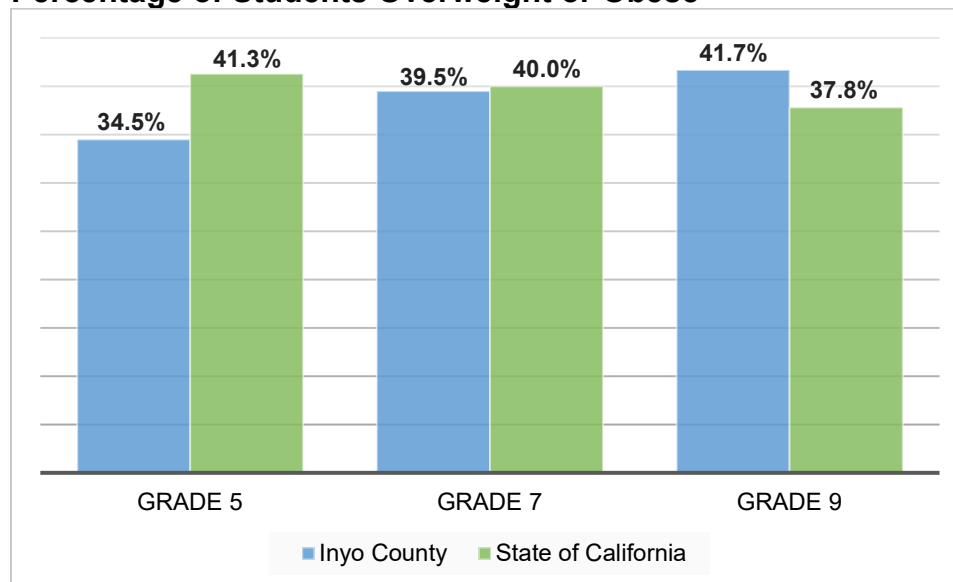


OBESITY

Obesity is a major public health concern among both adults and children due its association with overall health, certain diseases, severity of disease, and healthcare costs (CDC "About Overweight & Obesity"). Specifically, adults with obesity have an increased risk of developing heart disease, type II diabetes, and some cancers, and obesity costs the United States healthcare system approximately \$173 billion a year (CDC "About Overweight & Obesity"). As of 2021, a little over one-fourth of Inyo County adults are obese, which is similar to California: 28.7% and 28.4%, respectively (CDPH "California Community Obesity Profiles"). Relative to California, there are slightly increased rates of obesity among White and Latino individuals in Inyo County (CDPH NEOPB, California Community Obesity Profiles). Additionally, nearly two-thirds of Inyo County adults were classified as either overweight or obese (CDPH "California Community Obesity Profiles"). The prevalence of overweight/obese BMI status among adults in Inyo County between 2020 and 2021 was 65.5%, which is slightly greater than that of California at 62.0% (CDPH "California Community Obesity Profiles").

Obese children are more likely to be obese in adulthood; therefore, minimization of childhood obesity is paramount to prevent health complications later in life (CDC "About Overweight & Obesity"). In 2019, the percentage of overweight/obese public-school students in Inyo County was lower among Grade 5 students, comparable among Grade 7 students, but higher for students in Grade 9 compared to California (KidsData).

Percentage of Students Overweight or Obese

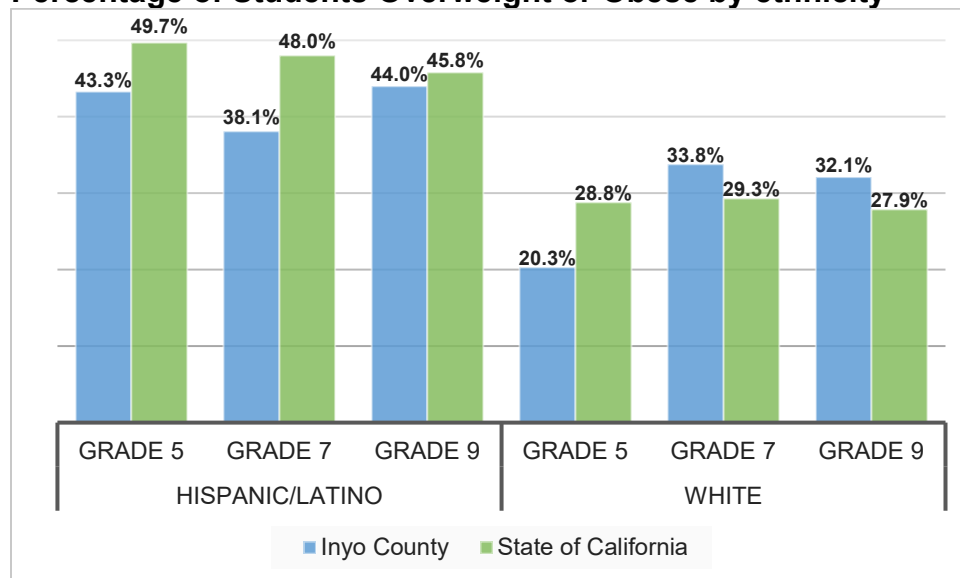


Source: KidsData

Across all grades examined, there was a greater percentage of Hispanic or Latino students that were overweight or obese than White students in Inyo County public schools, which is similarly observed in California (KidsData).



Percentage of Students Overweight or Obese by ethnicity



Source: KidsData

DIABETES

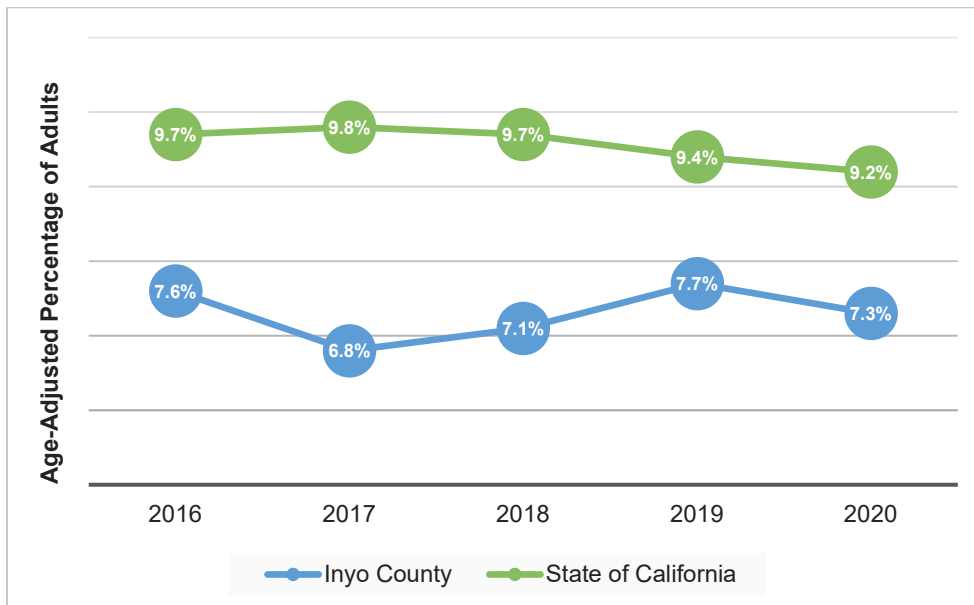
Diabetes is a chronic condition in which the body does not have enough of the metabolic hormone insulin, or the body cannot correctly use insulin (CDC "What is Diabetes?"). Diabetes can increase risk for other health problems, including vision loss, kidney disease, heart disease, and foot ulcers or infections (CDC "Prevent Diabetes Complications"). Between 90% and 95% of individuals with diabetes have type II diabetes, the type of diabetes associated with insulin resistance (CDC "Type 2 Diabetes"). Specifically, type II diabetes is linked to many lifestyle factors such as diet and physical activity (CDC "Type 2 Diabetes").

As of 2020, 7.3% of adults in Inyo County have some form of diabetes, and this rate has been mostly stable since 2016 (CDC "United States Diabetes Surveillance System"). Inyo County has a slightly lower proportion of diabetic adults as compared to California (CDC "United States Diabetes Surveillance System"). Between 2019 and 2021, there were 11 total deaths due to diabetes in Inyo County, resulting in an age-adjusted mortality rate of 15.5 per 100,000 (CDPH "County Health Status Profiles 2023"). This is lower than the rate observed in California of 23.1 per 100,000 (CDPH "County Health Status Profiles 2023"). Despite these reduced mortality rates, Inyo County has a similar risk-adjusted rate of lower-extremity amputation among patients with diabetes as California: 30.4 and 30.6 per 100,000, respectively (CDPH "County Health Status Profiles 2023").



Interpreting this Report
Risk-Adjusted Rates
Risk-adjusted rates allow for comparison across differing populations by controlling for multiple individual risk factors, such as age, sex, and poverty.

Age-Adjusted Percentages of Adults Aged 20 Years or Older with Diagnosed Diabetes, 2016-2020

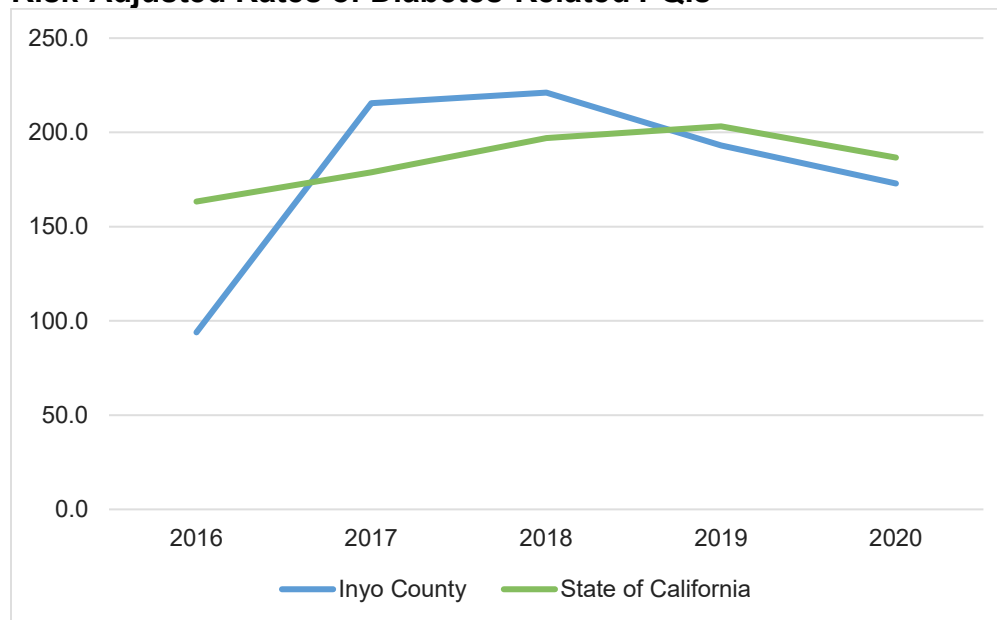


Source: CDC Diabetes Surveillance

The California Agency for Healthcare Research and Quality generates diabetes Prevention Quality Indicators (PQIs) to assess the quality of diabetes care, especially ambulatory care and diabetes complications (HCAI "AHRQ Quality Indicators"). Specifically, the diabetes-related prevention quality composite includes: diabetes short-term complications, diabetes long-term complications, uncontrolled diabetes, lower-extremity amputation among patients with diabetes (HCAI "Preventable Hospitalizations for Diabetes"). The rate of these diabetes-related PQIs increased greatly in Inyo County between 2016 and 2018 but dropped to 172.9 in 2020 (HCAI "Preventable Hospitalizations for Diabetes"). This is slightly lower than the observed risk-adjusted rate in California of 186.6 (HCAI "Preventable Hospitalizations for Diabetes").



Risk-Adjusted Rates of Diabetes-Related PQIs



Source: HCAI "Preventable Hospitalizations for Diabetes"

CHRONIC LIVER DISEASE AND CIRRHOSIS

Chronic liver disease is a progressive deterioration of liver functions for more than six months; the final stage of chronic liver disease is cirrhosis (Sharma and Nagalli). Chronic liver disease is caused by a variety of factors – including alcohol consumption, chronic hepatitis B, C, and D infection, various genetic disorders, autoimmune hepatitis, and some pharmaceutical drugs (Sharma and Nagalli). Between 2019 and 2021, Inyo County had an age-adjusted mortality rate due to chronic liver disease and cirrhosis of 30.9 per 100,000, while a mortality rate of 13.8 per 100,000 was observed in California (CDPH "County Health Status Profiles 2023").

ALZHEIMER'S DISEASE

Alzheimer's disease, the most common type of dementia, is a progressive disease that begins with mild memory loss to the ability to respond to situations and conversations with people (CDC "Alzheimer's Disease and Healthy Aging"). While death rates for many chronic diseases have been decreasing in the United States, death due to Alzheimer's disease nationwide has been increasing, possibly due to the increasing elderly population (CDC "Alzheimer's Disease and Healthy Aging"). In Inyo County, Alzheimer's disease is the tenth leading cause of death (CDPH "County Health Status Profiles 2023"). Between 2018 and 2020, there was an age-adjusted death rate for Alzheimer's disease of 11.8 per 100,000 in Inyo County (CDPH "County Health Status Profiles 2023"). This rate is notably lower than the mortality rate for California of 36.6 per 100,000 (CDPH "County Health Status Profiles 2023").



Infectious Diseases

Infectious diseases are those caused by germs (i.e., bacteria, viruses, and fungi) that enter the body and cause an infection (CDC "National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)"). Infectious diseases may be spread through air, water, food, soil, by insects or animal, or from one person to another (CDC "National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)").

SEXUALLY TRANSMITTED INFECTIONS

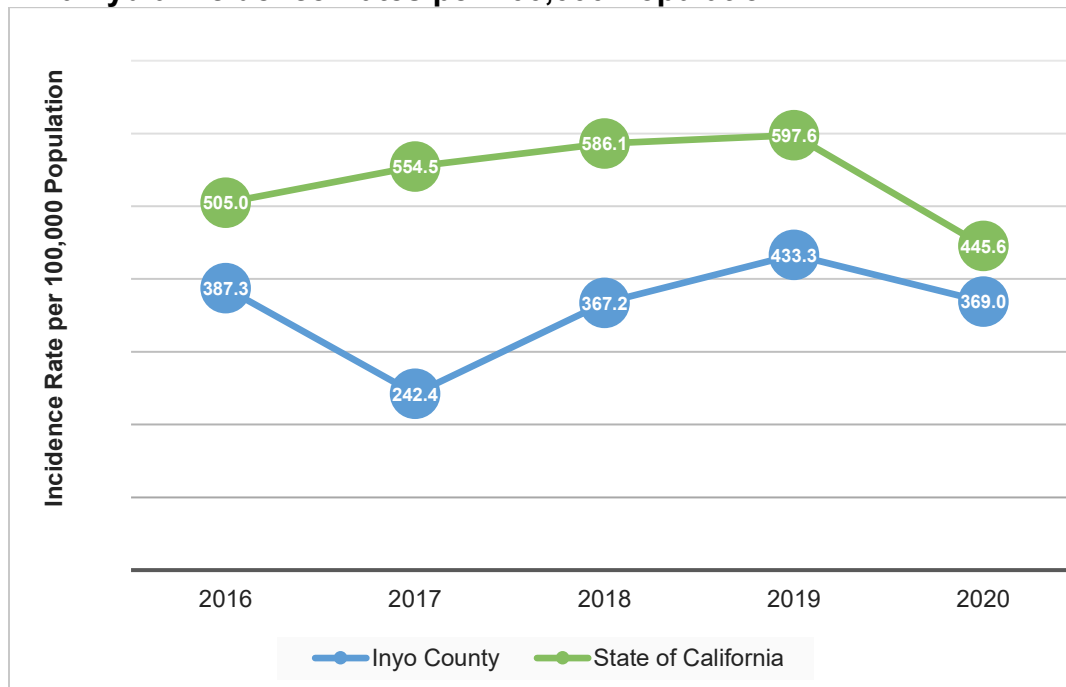
Sexually transmitted infections (STIs), also referred to as sexually transmitted diseases (STDs), are infections that pass from person to person through vaginal, oral, and anal sex (CDC "Sexually Transmitted Diseases (STDs), Diseases & Related Conditions"). STIs may also be transmitted through childbirth. There are dozens of different STIs. Many, if left untreated, can cause serious health problems, such as pelvic inflammatory disease (PID) or liver damage, and may impact fertility (CDC "Sexually Transmitted Diseases (STDs), Diseases & Related Conditions").

Chlamydia

Chlamydia is the most frequently reported bacterial STI in the United States; however, people with chlamydia often do not have symptoms (CDC "Chlamydia - CDC Detailed Fact Sheet"). If left untreated, chlamydia can lead to pelvic inflammatory disease (PID), ectopic pregnancy, preterm delivery, and reactive arthritis (CDC "Chlamydia - CDC Detailed Fact Sheet"). Chlamydia incidence in Inyo increased between 2016 and 2019 for both Inyo County and California, then decreased in 2020, possibly due to the COVID-19 pandemic (CDPH "Sexually Transmitted Diseases in California, 2021 Executive Summary "). In both Inyo County and California, chlamydia is more commonly detected in females than males. The chlamydia incidence rate among females in Inyo County is 542.1 per 100,000, which is greater than that of California (439.0 per 100,000) (CDPH "Sexually Transmitted Infection Data"). Similarly, incidence among males in Inyo is 345.2 per 100,000, which is greater than that observed in California of 286.0 per 100,000 (CDPH "Sexually Transmitted Infection Data").



Chlamydia Incidence Rates per 100,000 Population



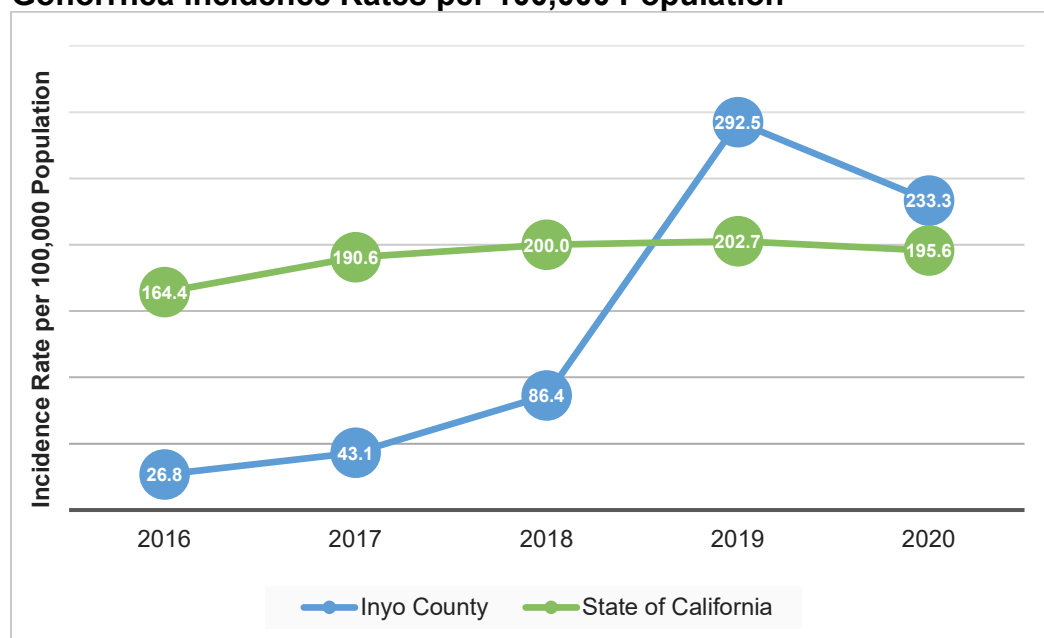
Source: CDPH, STD Control Branch, 2016-2020

Gonorrhea

Gonorrhea is the second most reported bacterial STI in the United States (CDC "Gonorrhea - CDC Detailed Fact Sheet"). The overall incidence of gonorrhea infection has greatly increased since 2016 (CDC "Sexually Transmitted Diseases (STDs), Diseases & Related Conditions"). Incidence has also increased overtime in California, but to a lesser extent when compared to Inyo (CDC "Sexually Transmitted Diseases (STDs), Diseases & Related Conditions"). In Inyo County, there is a greater incidence of gonorrhea among females than males, which may be a result of lower frequency of testing for STIs among male populations. The female-specific incidence rate is 299.8 per 100,000 in Inyo County, and the male specific-incidence rate is 154.0 per 100,000 (CDC "Sexually Transmitted Diseases (STDs), Diseases & Related Conditions"). This is the opposite of the trend observed in California, where males have an increased rate of 250.0 per 100,000 and females have a lesser rate of 140.7 per 100,000 (CDC "Sexually Transmitted Diseases (STDs), Diseases & Related Conditions").



Gonorrhea Incidence Rates per 100,000 Population



Source: CDC "Sexually Transmitted Diseases (STDs), Diseases & Related Conditions", 2016-2020

Syphilis

The number of reported syphilis cases has increased since 2000 and 2001 when it was at an all-time low (CDC, Syphilis). Syphilis occurs in different stages according to the time since infection and the severity of symptoms. The primary stage describes the onset of the disease when individuals are usually symptomless but have sores on the skin (CDC "Syphilis - CDC Detailed Fact Sheet"). The secondary stage describes the point in time when individuals develop a rash and more severe symptoms like fever, aches, and fatigue (CDC "Syphilis - CDC Detailed Fact Sheet"). These two stages are when syphilis is treatable; progression to the tertiary stage of disease can be fatal (CDC "Syphilis - CDC Detailed Fact Sheet"). Between 2016 and 2020, primary and secondary syphilis was reported only in 2019 at an incidence rate of 5.4 per 100,000 in Inyo County (CDC "Syphilis - CDC Detailed Fact Sheet"). The incidence rate of primary and secondary syphilis ranged from 3.9 per 100,000 to 7.8 per 100,000 between 2016 and 2020 in California (CDC "Syphilis - CDC Detailed Fact Sheet"). Additionally, there were no cases of congenital syphilis – babies born with syphilis – between 2016 and 2020 in Inyo County (CDC "Syphilis - CDC Detailed Fact Sheet"). Between 2016 and 2020, there was a total of 1,759 case of congenital syphilis throughout California (CDC "Syphilis - CDC Detailed Fact Sheet").



Community Health Spotlight

HPV

Human papillomavirus (HPV) is a common infection; according to the Centers for Disease Control and Prevention, more than 42 million Americans are infected with types of HPV that can cause disease, and approximately 13 million Americans become infected with HPV each year (CDC "Human Papillomavirus (HPV)").

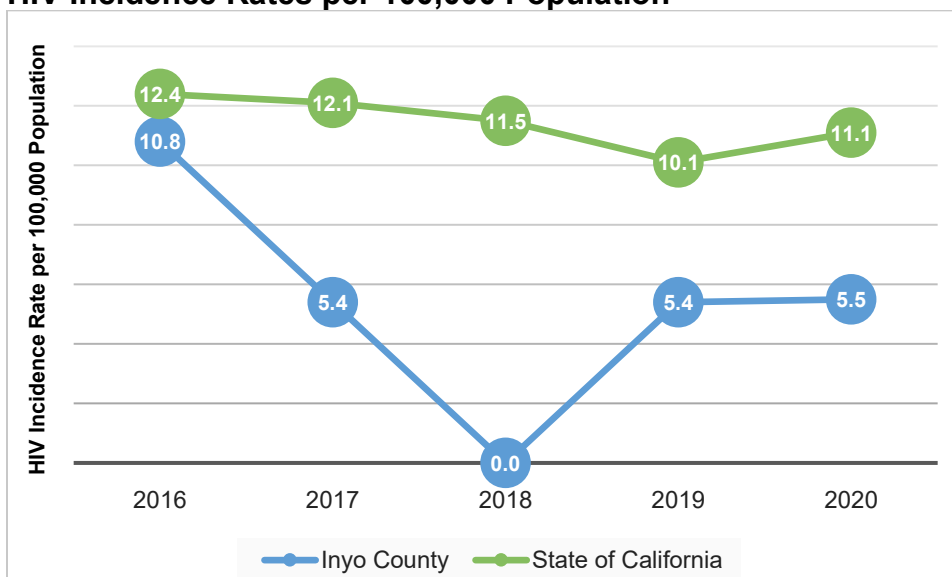
Approximately 9 out of 10 HPV infections resolve on their own within two years. However, some HPV infections may last longer, and can lead to cancers of the cervix, vagina, vulva, penis, anus, or back of throat (CDC "Human Papillomavirus (HPV)"). HPV vaccinations can prevent over 90% of these cancers caused by HPV, as well as precancerous cells that can lead to cancer (CDC "Human Papillomavirus (HPV)").

HIV

Human immunodeficiency virus, or HIV, can be spread through anal or vaginal sex, sharing needles, syringes, and other drug injection equipment, and rarely through other bodily fluids such as saliva if the fluids come in contact with an open sore or wound (CDC "Ways HIV Can Be Transmitted"). HIV infection can progress to acquired immunodeficiency syndrome, or AIDS, in which the immune system is severely weakened, which can result in other infections and illnesses (CDC "About HIV").

The incidence of HIV has greatly decreased between 2017 and 2021 in Inyo County, while rates in California have remained relatively stable (CDPH "California HIV Surveillance Report - 2021"). Specifically, there were no new cases of HIV reported in 2019 (CDPH "California HIV Surveillance Report - 2021").

HIV Incidence Rates per 100,000 Population



Source: CDPH "California HIV Surveillance Report - 2021", 2016-2020



Among those diagnosed and living with HIV in Inyo County in 2021, 81.0% were in care, meaning they had at least one CD4, viral load, or HIV-1 genotype test during the year 2021 (CDPH, California HIV Surveillance Report). Additionally, 81.0% were virally suppressed, meaning they had less than 2000 copies of HIV per milliliter of blood and could not transmit the virus to others (CDPH "California HIV Surveillance Report - 2021").

INFLUENZA AND PNEUMONIA

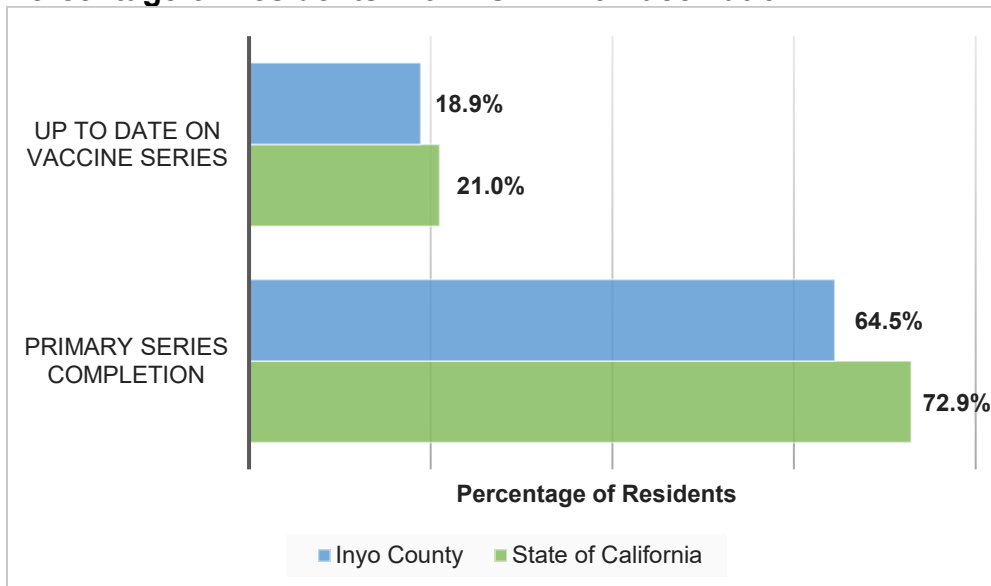
Influenza, also known as the flu, is a common but contagious respiratory illness caused by influenza viruses (CDC "About Flu"). Similarly, pneumonia is an infection of the lungs that can be caused by a variety of viruses, including influenza, respiratory syncytial virus, and SARS-CoV-2 (CDC "Pneumonia "). Some people – such as the elderly, young children, pregnant people, and adults with certain chronic health conditions – are at greater risk for complications and death due to influenza and pneumonia (CDC "About Flu"; US HHS "Oral Health in America: A Report of the Surgeon General"). Deaths due to influenza and pneumonia is one of the top ten causes of death and the top infectious disease cause of death in Inyo County (CDPH "County Health Status Profiles 2023"). Between 2019 and 2021, Inyo County had an age-adjusted influenza and pneumonia death rate of 6.9 per 100,000 (95% CI: 2.8-14.1), compared to a rate of 11.5 per 100,000 for California (95% CI: 11.3-11.7) (CDPH "County Health Status Profiles 2023").

CORONAVIRUS DISEASE 2019

Coronavirus disease 2019 (COVID-19) is a respiratory virus that spreads through droplets or other very small particles that contain the virus (CDC "About COVID-19"). The COVID-19 pandemic began in March 2020, but due to the efficacy of vaccination, treatments, and testing in minimizing the spread and severity of COVID-19, the COVID-19 Public Health Emergency was ended in the United States on May 11, 2023 (CDC "End of the Federal COVID-19 Public Health Emergency (PHE) Declaration"). Despite this, the virus that causes COVID-19 is constantly changing, leading to new variants of the virus that may be more infectious; therefore, there will continue to be new cases of COVID-19 (CDC, COVID-19). Since the start of the pandemic, there has been a total of 6,072 confirmed COVID-19 cases in Inyo County (SparkMap). The infection rate in Inyo County is 33,757.7 per 100,000, which is much greater than the rate observed in California of 30,652.7 per 100,000 (SparkMap). This may be attributable to incomplete vaccine coverage (CDPH "COVID-19 Vaccination Data").

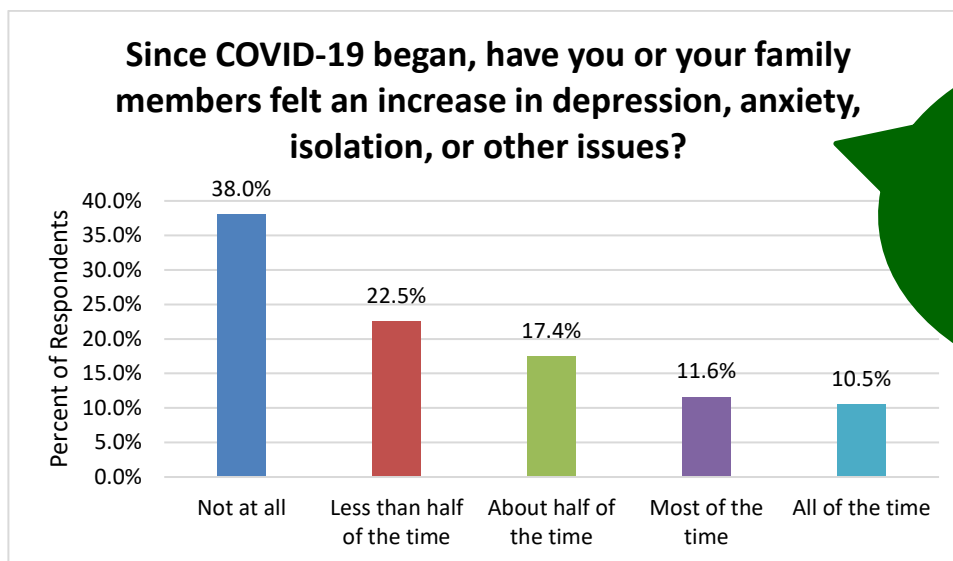


Percentage of Residents with COVID-19 Vaccination



Source: CDPH – Snowflake COVID-19 Vaccination Data Repository, 2023

Inyo County 2023 Community Health Survey – COVID-19 and Mental Health Spotlight



Majority of survey takers reported “not at all” for increase mental health issues following COVID-19.

Source: Inyo County 2023 Community Health Survey



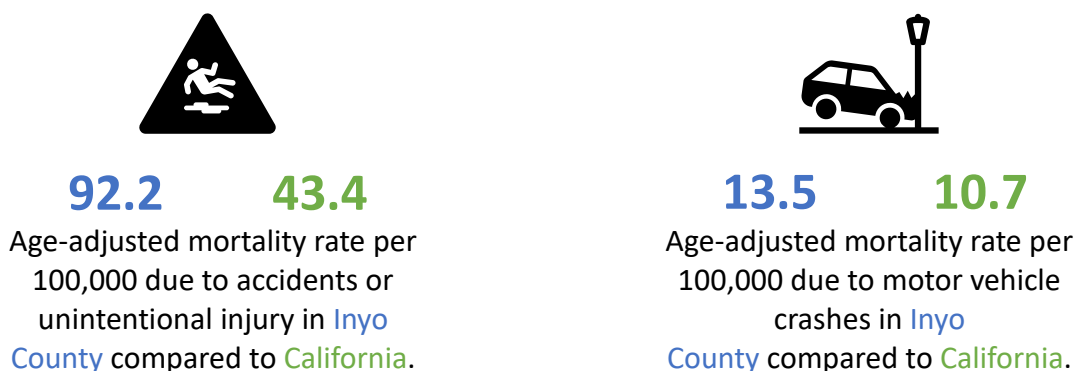
VALLEY FEVER

Coccidioidomycosis, also known as Valley Fever, is a respiratory infection that is symptomatically similar to pneumonia and caused by a fungus found in the southwestern United States and south-central Washington state (CDC "Fungal Diseases Valley Fever (Coccidioidomycosis)"). Specifically, the fungus thrives in areas with hot and dry climates, but the geographic range of the disease may be expanding due to climate change (CDC "Fungal Diseases Valley Fever (Coccidioidomycosis)"). Prior to 2020, Inyo County did not have any reported Valley Fever cases; however, the disease was reported in Inyo County in 2020 and has increased in incidence since (CDPH "Epidemiologic of Summary of Valley Fever (Coccidioidomycosis) In California, 2020-2021"). In 2021, the incidence of Valley Fever was 16.5 per 100,000 population, but this was less than the rate observed in California of 20.1 per 100,000 population (CDPH "Epidemiologic of Summary of Valley Fever (Coccidioidomycosis) In California, 2020-2021").

Accidents and Unintentional Injuries

Unintentional injuries include poisonings (drugs, alcohol, fumes, pesticides, etc.), motor vehicle crashes, falls, fire, drowning, suffocation, and any other external cause of death (US HHS "Injury Prevention". Therefore, although mortality rates for motor vehicle crashes are reported separately here, they are also counted within the larger category of accidents and unintentional injuries.

Between 2019 and 2021, Inyo County has a greater rate of deaths due to both accidents and unintentional injuries and motor vehicle crashes (n=8) as compared to California (CDPH "County Health Status Profiles 2023"). During this same time period, they were the second and ninth leading causes of death in Inyo County, respectively (CDPH "County Health Status Profiles 2023").



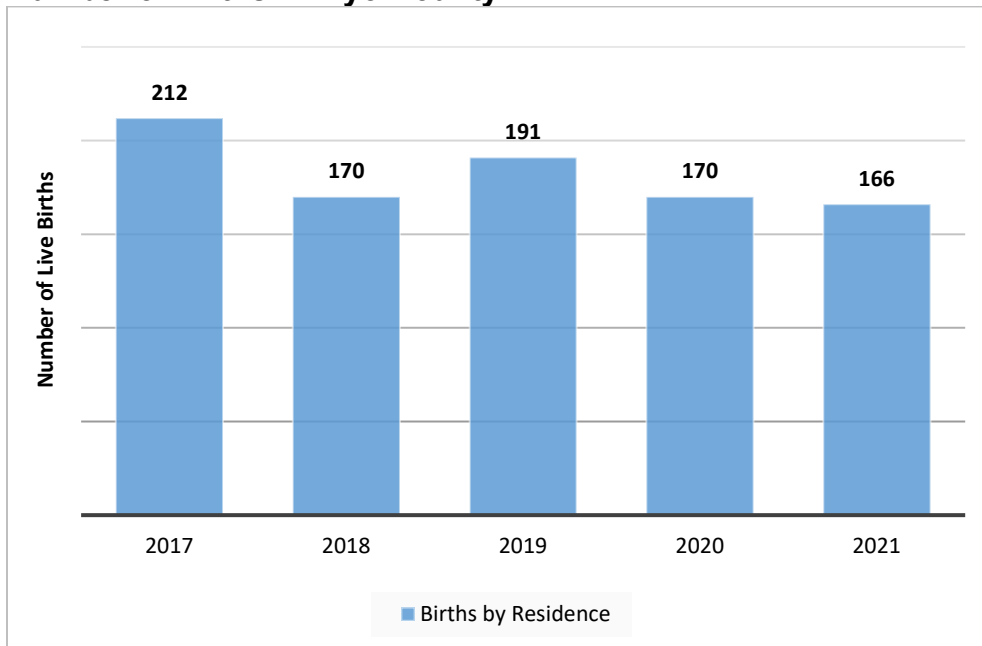
Source: CDPH "County Health Status Profiles 2023"



Maternal and Child Health

Early, consistent, high-quality care is essential to promote a health pregnancy and birth and improve birth outcomes. The number of births in Inyo County has remained mostly stable between 2017 and 2021, with 166 reported in 2021 (CDPH "Live Birth Profiles by County").

Number of Births in Inyo County

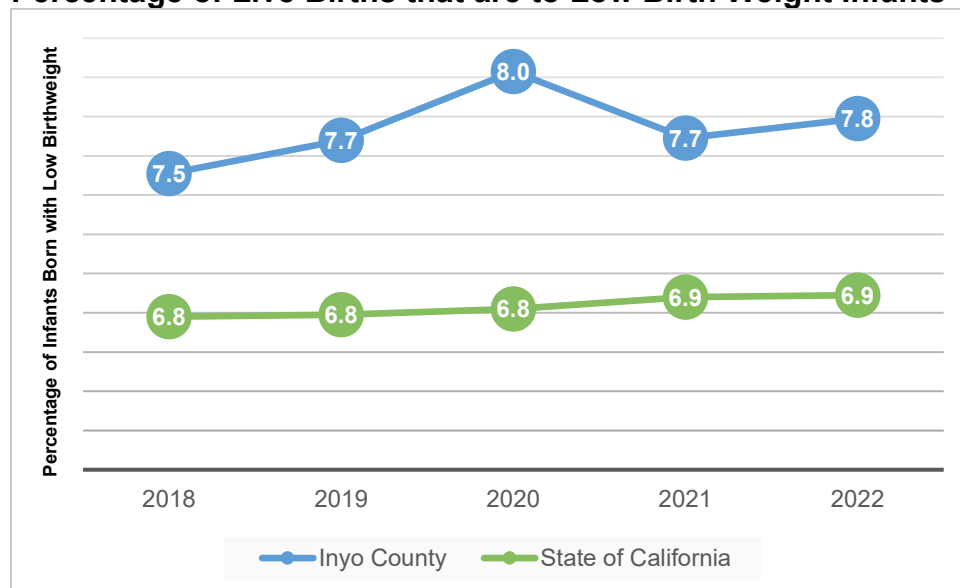


Source: CalHHS – Birth Statistical Master File, 2017-2021

The percentage of live births that are low birthweight has consistently been higher in Inyo County when compared to California between 2018 and 2022 (CDPH "County Health Status Profiles 2023"). There were fewer than 11 total infant deaths between 2018 and 2020 in Inyo County, resulting in an infant mortality rate of less than 3.7 per 100,000 (CDPH "County Health Status Profiles 2023").



Percentage of Live Births that are to Low Birth Weight Infants



Source: CDPH "County Health Status Profiles 2023", 2018-2022

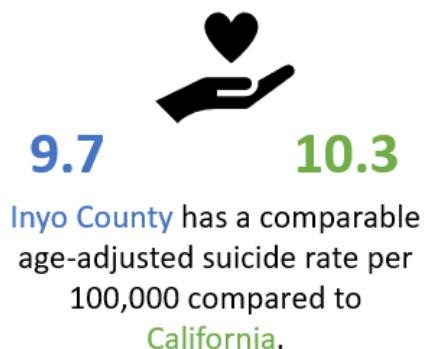
Mental Health

Mental health refers to the social, emotional, and psychological wellbeing of individuals, and determines how we handle stress and relate to others (CDC "About Mental Health"). There are over 200 different mental illnesses, and some more common ones include generalized anxiety disorder, major depression, and bipolar disorder (CDC "About Mental Health"). Mental health can also impact physical health. For example, people with depression have increased risk for chronic conditions like diabetes, heart disease, and stroke (CDC "About Mental Health"). Moreover, those with chronic conditions are at greater risk for developing mental illnesses (CDC "About Mental Health").

Inyo County residents self-reported having, on average, 4.4 mentally unhealthy days in the last 30 days in 2022 and 5.1 in 2023 (County Health Rankings & Roadmaps "California Health Rankings "). While this number has increased in Inyo County, the number reported by residents across California overall was similar for 2022 and 2023 (County Health Rankings & Roadmaps "California Health Rankings "). Between 2020 and 2023, 140.3 of individuals at risk for depression per 100,000 in Inyo County reported that they have severe depression, as compared to 135.8 per 100,000 in California (MHA).

In Inyo County, 140.3 survey takers per 100,000 reported that they frequently had suicidal ideation, as compared to 150.0 survey takers per 100,000 in California (MHA). The age-adjusted suicide rate in Inyo County for 2019 to 2021 was comparable to the rate of California for the same period (CDPH 2023, County Health Status Profiles).

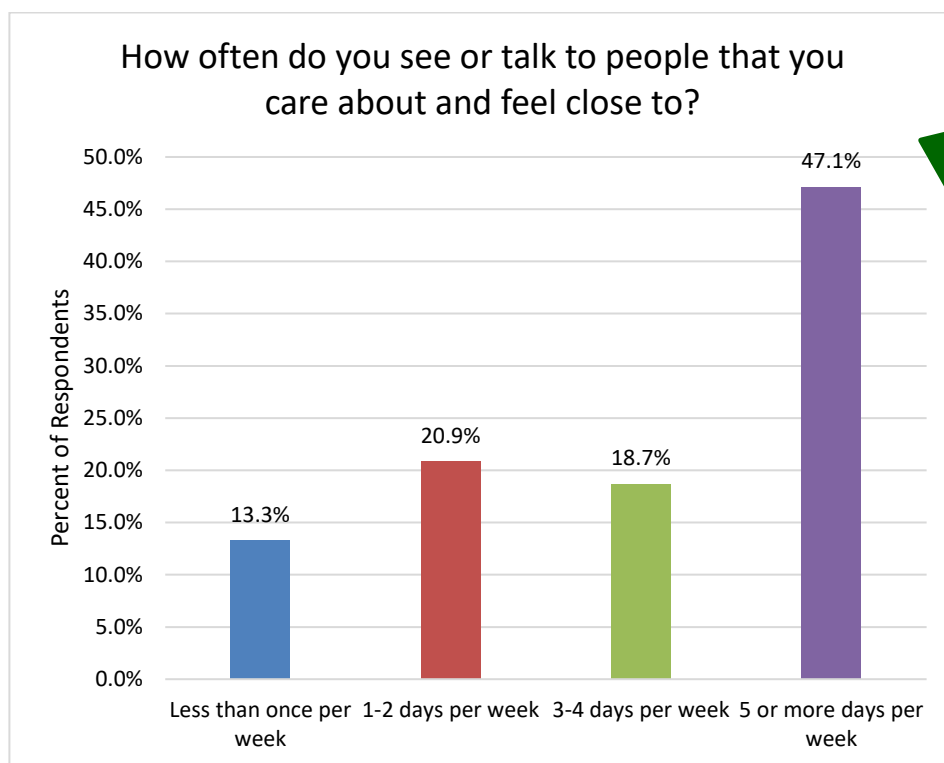




Source: CDPH "County Health Status Profiles 2023"

Among students in grades 9 and 11 between the years 2017 and 2019, approximately 21% of students in each grade level reported seriously considering attempting suicide in the previous year compared to approximately 16% of students in 9th and 11th grades in California (KidsData). Additionally, from 2017 to 2019, 27.0% of students in 7th grade, 36.5% of students in 9th grade, and 35.5% of students in 11th grade reported experiencing depression-related feelings (KidsData).

Inyo County 2023 Community Health Survey – Mental Health Spotlight



Majority of survey takers see or talk to people that they care about or feel close to five or more days per week.

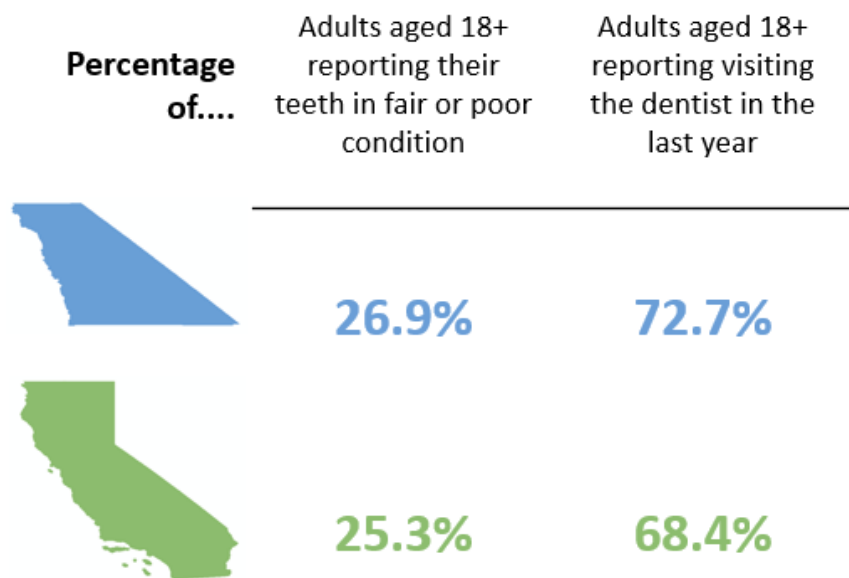
Source: Inyo County 2023 Community Health Survey



Oral Health

Oral health refers to the health of not only teeth, but also the gums and mouth as part of the entire craniofacial system (CDC "Oral Health Conditions"). The health and hygiene of the mouth is essential to eat, speak and smile, making oral health an essential part of our function and wellbeing (CDC "Basics of Oral Health"). The most common diseases that impact oral health are cavities (i.e., tooth decay), gum disease, and oral cancers (CDC "Oral Health Conditions"). Furthermore, oral health is linked to many other chronic conditions. For example, poor oral health is associated with diabetes, stroke, and heart disease (US HHS "Oral Health in America: A Report of the Surgeon General"). Additionally, other general health risk factors, such as tobacco use and poor diet, have a major impact on overall oral health (US HHS "Oral Health in America: A Report of the Surgeon General").

In 2020, a little more than one-fourth of Inyo County adults aged 18 years or older self-reported teeth in fair or poor condition which was comparable to the state (UCLA Center for Health Policy Research). In Inyo County, a higher proportion of adults aged 18 years or older reported visiting the dentist in the past year in California (UCLA, California Health Interview Survey).

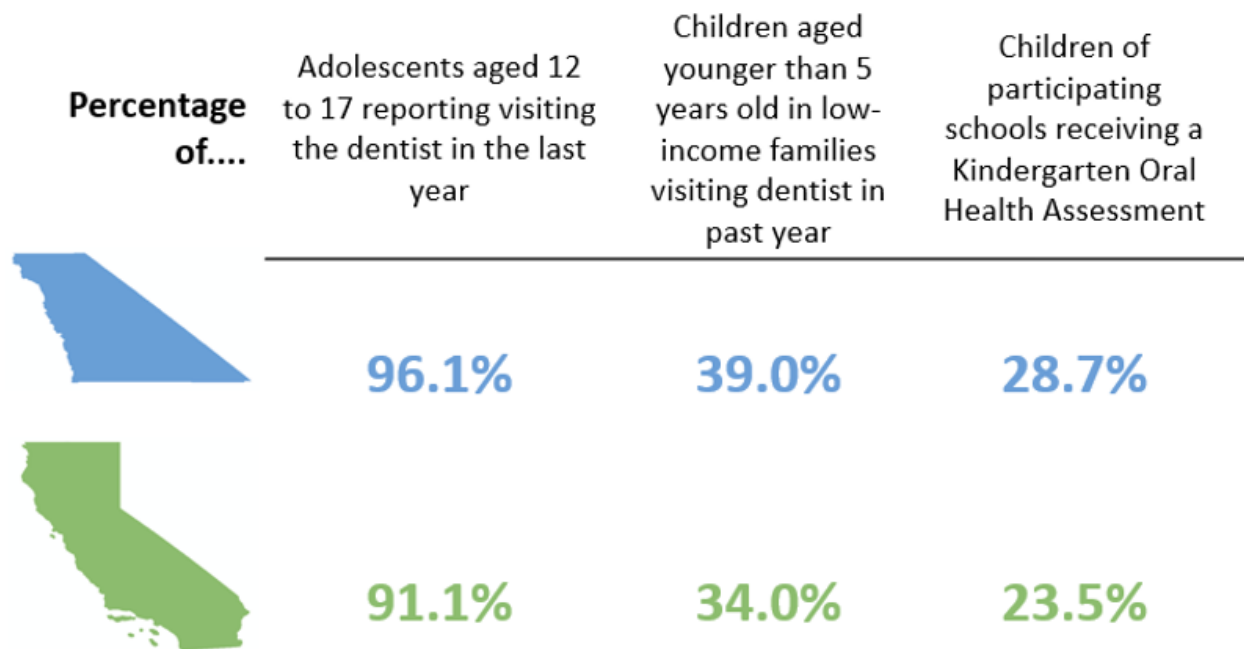


Source: UCLA, California Health Interview Survey

According to the CDC, children with poor oral health are more likely to miss school and receive lower grades compared to children with strong oral health (CDC "Children's Oral Health"). Therefore, it is vital for overall health and wellbeing that children and



adolescents maintain proper dental hygiene. In 2020, the majority of both Inyo County and California adolescents aged 12 to 17 years reported visiting a dentist in the past year (UCLA Center for Health Policy Research). However, in that same year, less than half of children between birth and 5 years old in low-income families visited the dentist in the last year in both Inyo County and California (Children Now). Per California law, all students enrolled in kindergarten, or in first grade in a public school must submit proof of oral health assessments performed by a licensed or registered dental health professional (CDA). As of the 2021-2022 school year, 28.7% of children in the 16.7% of schools in Inyo County participating in the program have reported receiving a Kindergarten Oral Health Assessment (KOHA), while only 23.5% of children in California enrolled in the program reported receiving a KOHA (CDA).



Source: CDA; Children Now; UCLA Center for Health Policy Research

Community Assets and Resources

Description of community organizations and programs that promote health among Inyo County community members

Identification of key stakeholders and roles in community health



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APPENDIX



Appendix A Inyo County 2023 Community Health Survey

A. Inyo County 2023 Community Health Survey Questionnaire

B. Inyo County 2023 Community Health Survey Responses

