

Orange County

Maternal Child and Adolescent Health Community Profile 2017-18

Demographics

Our Community

Total Population ¹	3,097,966
Total Population, African American	45,500
Total Population, American Indian/ Alaskan Natives	6,457
Total Population, Asian/Pacific Islander	579,232
Total Population, Hispanic	1,066,140
Total Population, White	1,326,819
Total Live Births ²	37,256

Our Mothers and Babies

% of women delivering a baby who received prenatal care beginning in the first trimester of their pregnancy ²	89.6%
% of births covered by Medi-Cal ²	39.4%
% of women ages 18-64 without health insurance ³	21.8%
% of women giving birth to a second child within 24 months of a previous pregnancy *	39.5%
% live births less than 37 weeks gestation ²	7.9%
Gestational diabetes per 1,000 females age 15-44	8.0
% of female population 18-64 living in poverty (0-200% FPL) ³	29.2%
Substance use diagnosis per 1,000 hospitalizations of pregnant women*	8.6
Unemployment Rate ⁴	7.8

Our Children and Teens

Teen Birth Rate per 1,000 births (ages 15-19) ²	18.7
Motor vehicle injury hospitalizations per 100,000 children age 0-146	21.8
% of children, ages 0-18 years living in poverty (0-200% FPL) ³	38.7%
Mental health hospitalizations per 100,000 age 15-24*	1,241.6
Children in Foster Care per 1,000 children ⁵	3.4
Substance abuse hospitalization per 100,000 aged 15-24*	719.3

Data sources: ¹ CA Dept. of Finance population estimates for Year 2015, January 2013; ² CA Birth Statistical Master Files 2011-2013 Annual Average, 3 year average; ³ California Health Interview Survey, 2014; ⁴ [State of California, Employment Development Department, February 2017](#); ⁵ [Data from CA Child Welfare Indicators Project, UC Berkeley Point in Time Jul 2015](#); ⁶ [California Department of Public Health, Safe and Active Communities Branch](#); *Data carried over from the Community Profile 2015-2016. Not updated.

About Our Community – Health Starts Where We Live, Learn, Work, and Play

1. Orange County is located on the Southern California Coast. The northwestern part of the county lies on the coastal plain of the Lost Angeles Basin, while the southeastern end rises into the foothills of the Santa Ana Mountains. It is the State's 3rd largest county and 6th largest in the nation. With 799 square miles of land, it is the smallest county in Southern California, but with 34 cities, it remains one of the most densely populated areas in the U.S. Most of OC's population reside to the east with largely unincorporated, rural areas, to the west.

2. OC is famous for its tourism with attractions like Disneyland, Knott's Berry Farm and many popular beaches along its 42 miles of coastline. Orange County is the headquarters of many Fortune 500 companies. Key county industries include tourism, business/professional services, technology, health services, construction, biomedical sciences, computer software/hardware, and defense/aerospace.

3. OC has 200+ miles of hiking trails, 125+ miles of bikeways, and over 137,000 acres of city, county, state, and federal parks and beaches. Nearly 87% of county residents live close to a park, compared to 74% of Californians overall. Orange County's walkability is classified as "car-dependent" (OC city median Walk Score® of 47), but it slightly better than walkability Statewide (median of 41).

Health System – Health and Human Services for the MCAH Population

- Perinatal Mood and Anxiety Disorder (PMAD) – This is an Orange County Perinatal Council (OCPC) collaborative project. The goal is to increase provider awareness of perinatal mood and anxiety disorders, a tool was developed for provider utilization and resources provided for referrals to low cost or no cost services.
- Safe Sleep – Safe Sleep Orange County Collaborative rolled out a training for healthcare providers and has partnered with a local birthing hospital to implement and evaluate a Safe Sleep Initiative that assesses newborn infant safe sleep environment, educates parents about safe sleep, and provides a portable crib to families in need through locally established Cribs for Kids® partner organization.
- Exclusive Breastfeeding – Partnering with stakeholders on using clear, consistent messaging on benefits of breastfeeding; conducting community outreach via OCPC; developing a clinical provider tool and educational outreach plan; adapting the Prenatal Guide to Breastfeeding and Baby Behavior to be utilized by providers in the prenatal setting. Also currently assessing needs and providing technical assistance to birthing hospitals in meeting "Baby Friendly" status.
- Prenatal Care/Prematurity/Patient Education Strategies – The Orange County Perinatal Council (OCPC) Collaborative continues to meet regularly to identify and work on issues and disparities related to early and adequate prenatal care access. Current activities continue to focus on analysis of barriers to prenatal care from relevant information sources in order to better identify, implement, and evaluate targeted interventions. Continue with engagement of Public Health Services Prenatal and Home Visiting Programs to discuss and support the development and implementation of an integrated system for early and timely client referral and intervention. Planning, development and promotion of the everywomanoc.com website – a preconception/interconception/postpartum up to baby's first year patient education project.
- Immunizations – Assessment and monitoring of required vaccinations for children at day care centers and schools (KG and 7th grade), increasing community awareness about importance of timely vaccination through Orange County Immunization Council (OCIC), and participation in the State's Immunization Registry (CAIR).
- Orange County Care Coordination Collaborative for Kids (OCC3) Partnership – The collaborative is focused on improving care for children with special health care needs by creating a cooperative care coordination system.
- Teen Pregnancy: Public Health Services and Community Home Visitation Programs currently provide culturally tailored behavioral interventions to address the needs of pregnant and parenting teens, improve infant outcomes, and prevent repeat teen pregnancies.
- Nutrition Education and Obesity Prevention – Nutrition and Physical Activity Collaborative (NuPAC) coordinates community partner efforts to reduce obesity, improve healthy eating, and increase physical activity.

Health Status and Disparities for the MCAH Population

Orange County is remarkable in its diversity and income distribution. While the overall rates for many poor health outcomes impacting the MCAH population are better than HP 2020 goals and state averages and continue to show improvement, there are distinct geographic areas and populations within OC that remain challenged by health disparities, poverty, and unaffordable housing. According to the U.S. Census, 17.6% of Orange County's children were living in poverty on 2014. In 2014/2015, 19.9% of children under 18 years old received CalFresh, a 192% increase in the number of children since 2005/2006 at 6.8%. Financially unstable neighborhoods are located mostly in north/north-central OC, where large percentages of Latino children reside.

Key health disparities impacting MCAH in OC include:

- Racial and ethnic disparities in the rates of early prenatal care. According to the 2016 CoC report, “In Orange County, 91.6% of White women received early prenatal care in the first trimester followed by Hispanic (85.0%), Black (82.6%) and Asian (82.0%) women. The growth in disparity between race/ethnicity groups was most pronounced between White women and Asian women. HCA examined the significant drop in prenatal care among Asian women between 2013 and 2014 and found the drop to be correlated to the increase in Asian self-pay deliveries, which is associated with “birth tourism.”

- Higher rates of teen births in Hispanics
- Lower rates of exclusive breastfeeding with racial disparities
- Higher rates of obesity in Hispanics and Pacific Islanders
- Higher rates of gestational diabetes in the Latino population and in the central and northern areas of OC.
- Higher rates of low birth weight and preterm infants in women under age 20 years and over age 35 years.
- Higher rates of gestational diabetes in Asian/Pacific Islander women.
- Lower rates of kindergarten immunizations in south and coastal areas of OC.
- Disparities in the rate of hospitalizations with substance use diagnosis for pregnant females age 15-44 with Blacks (29.7) and Whites (13.2) at a significantly higher rate than Hispanics (7.3) and API (1.2).
- Disparities in the rate of substance-affected diagnosis for still- or live-born infants 0 to 89 days with Blacks (35.5) and Hispanics (25.3) at significantly higher rates than Whites (19.4) and API (12.7). The Hispanic rates are higher than the State.

Progress continues to impact health outcomes, resulting in lower teen births for all racial/ethnic groups; declines in overall rates of preterm births and infant deaths.