

# Determining Orange County Community Health Improvement Plan (OCCHIP) Priority Issues

As part of Orange County's HCA's Community Health Assessment (CHA), in-person and virtual convenings were held during the summer and fall of 2023 to determine the community's priorities across health conditions and social determinant of health. Each of the 174 participants represented either an organization or community in Orange County. Consensus on topics were obtained using the Delphi scoring process, a widely accepted group-based prioritization process. Results of the process revealed the following three health conditions as priority issues for the upcoming 2024-2026 Orange County Community Health Improvement Plan (OCCHIP): Mental Health, Substance Use, and Diabetes/Obesity. Understanding that social determinants of health (such as housing, access to education, economic stability, etc.) affect a wide range of health outcomes and risks, community stakeholders also reviewed the CHA and identified the following three health determinants as priority issues: Housing/Homelessness, Care Navigation, and Economic Disparities. The OCCHIP will establish work groups to determine goals, objectives, and key strategies for each of these areas through January 31, 2024, in order to develop a comprehensive plan to move our communities forward together.

## OCCHIP Health Priority Issues

Based on its Community Health Assessment process in 2023, **three health conditions** were identified for action for the Orange County Health Improvement Plan 2024-2026.



### Mental Health

#### Why is this a Priority Issue?

Nearly 1 in 2 US residents will develop a mental illness over their lifetime. Mental disorders can increase risk for some of the leading causes of death in the United States, such as heart disease, stroke, and diabetes. Depression and anxiety can be barriers to the regular practice of important health behaviors, like physical activity and healthy eating, and make people more likely to smoke or abuse drugs.

#### Key Findings:

- According to the California Health Interview Survey, 14.6% of Orange County adults report experiencing likely serious psychological distress in the past year.
- 14.0% of Orange County 11<sup>th</sup> graders considered suicide in the past year (California Department of Education).
- Orange County teens (47.1%) were more likely than they peers statewide (36.7%) to need help with emotional or mental health problems (CHIS)

#### Community Guide Recommendations

To address mental health in our communities, the Community Preventive Services Task Force recommends collaborative care for the management of depressive disorders; mental health benefits legislation; targeted and universal school-based cognitive behavioral therapy programs; clinic-based depression care management; and home-based depression care management.

For more information see: <https://www.thecommunityguide.org/topics/mental-health.html>;  
<https://www.samhsa.gov/resource-search/ebp>



## Substance Use

### Why is this a Priority Issue?

Drug and alcohol abuse cause roughly 160K deaths annually in the United States with increases in opioid and fentanyl related overdoses being of particular concern. Tobacco use is the leading preventable cause of death and though smoking rates have decreased over the past decade, increased vaping among youth has put such public health gains at risk.

### Key Findings:

- According to the California Department of Education, 15.0% of Orange County 11<sup>th</sup> graders had used alcohol or drugs in the last 12 months.
- Though Orange County's drug induced death rate (15.6 per 100K) is lower than those of the State (17.8) and US (32.4) overall, there have been recent increases in this metric that are concerning.
- Areas of north and south Orange County experienced greater increases in drug and alcohol mortality rates from the 2010-12 to 2019-21 periods.

### Community Guide Recommendations

To address substance use in our communities, the Community Preventive Services Task Force recommends family-based interventions; dram shop liability; electronic screening and brief intervention (e-SBI); enhanced enforcement of laws prohibiting sales to minors; increased alcohol taxes; maintaining limits on days and hours of sale; and regulation of alcohol outlet density.

For more information see: <https://www.thecommunityguide.org/topics/substance-use.html>;  
<https://www.thecommunityguide.org/pages/task-force-findings-excessive-alcohol-consumption.html>;  
<https://www.samhsa.gov/resource-search/ebp>  
<https://thecommunityguide.org/topics/tobacco.html>



# Diabetes and Obesity

## Why is this a Priority Issue?

Obesity increases the risk of many diseases and health conditions, including heart disease, type 2 diabetes, cancer, hypertension, stroke, liver and gallbladder disease, respiratory problems, and osteoarthritis. Obesity is the second leading preventable cause of death in the United States and *Healthy People 2030* has established obesity among children and adolescents as a *Leading Health Indicator*. Obesity, along with related poor diet and physical inactivity, are important contributors to the more than 30 million cases of diabetes in the US today. Poorly controlled diabetes can lead to a range of complications, like amputations, vision loss, and kidney damage.

## Community Guide Recommendations

To address [diabetes](#) in our communities, the Community Preventive Services Task Force recommends combined diet and physical activity promotion programs; intensive lifestyle interventions for type 2 diabetes patients; interventions engaging community health workers for diabetes management and prevention; lifestyle interventions to reduce risk of gestational diabetes; mobile phone applications used within healthcare systems for type 2 diabetes self-management; and team-based care for patients with type 2 diabetes. To address [obesity](#), the Task Force recommends behavioral interventions to reduce recreational sedentary screen time among children; digital health interventions for adolescents with overweight/obesity; worksite programs; technology-supported multicomponent coaching or counseling interventions; multicomponent interventions to increase availability of healthier foods and beverages in schools; meal or fruit and vegetable snack interventions to increase healthier foods and beverages provided in schools, alone or combined with physical activity interventions.

For more information see:

<https://www.thecommunityguide.org/topics/diabetes.html>;

<https://www.thecommunityguide.org/topics/obesity.html>;

<https://www.thecommunityguide.org/topics/nutrition.html>;

<https://www.thecommunityguide.org/topics/physical-activity.html>

<https://www.whitehouse.gov/wp-content/uploads/2022/09/White-House-National-Strategy-on-Hunger-Nutrition-and-Health-FINAL.pdf>

## Key Findings:

- According to the California Health Interview Survey, 24.2% of adults in Orange County are obese.
- Orange County's diabetes death rate was 14.9 per 100K, which was higher than the *Healthy People 2030* target of 13.7.
- Both diabetes and obesity are more prevalent in parts of north and central Orange County, suggesting important county disparities in these key public health challenges.

# OCCHIP Social Determinants of Health Priority Issues

Based on its Community Health Assessment process in 2023, the Orange County Community Health Improvement Plan identified **three health determinants** for action for the Orange County Health Improvement Plan 2024-2026.



## Housing and Homelessness

### Why is this a Priority Issue?

High housing costs can affect the financial resources available for other basic needs. For example, families who must spend a large portion of household income on housing tend to spend less on food, which can affect their dietary quality. Living in crowded housing can increase risk for poor school performance and behavioral problems among children, can impact birth outcomes such as low birth weight, increases risk of asthma, and may facilitate the spread of communicable diseases, such as COVID-19 and tuberculosis. Additionally, the unhoused are more likely to suffer from a range of health issues, including diabetes, hypertension, heart disease, HIV, hepatitis C, depression and substance use disorders.

### Key Findings:

- In 2022, the Orange County Point in Time count identified 5,718 individuals experiencing homelessness, which was nearly a 17% decrease from the previous 2019 count.
- Among Orange County's 5,718 unhoused individuals identified through the 2022 Point in Time count, nearly 90% were located in north or central Orange County.
- Over 31% of Orange County renting households spend at least half of their household income on housing, compared to approximately 27% of renting households nationwide
- Approximately 7.1% of Orange County's renting households average more than 1.5 occupants per room, compared to 2.6% nationwide.

### Community Guide Recommendations

To address housing or homelessness issues in our communities, the Community Preventive Services Task Force recommends tenant-based housing voucher programs and permanent supportive housing with Housing First programs. Other sets of guidance from the US Department of Housing and Urban Development and the Centers for Disease Control and Prevention are linked below.

For more information see: <https://www.thecommunityguide.org/topics/social-determinants-health.html>;  
[https://www.cdc.gov/nceh/lead/publications/final\\_companion\\_piece.pdf](https://www.cdc.gov/nceh/lead/publications/final_companion_piece.pdf);  
[https://www.huduser.gov/Publications/pdf/Strategies\\_for\\_preventing\\_Homelessness.pdf](https://www.huduser.gov/Publications/pdf/Strategies_for_preventing_Homelessness.pdf)  
<https://endhomelessness.org/resource/center-evidence-based-solutions-homelessness/>



## Care Navigation

### Why is this a Priority Issue?

Patients may experience significant issues accessing health care, including lack of transportation, cultural and language barriers, mistrust of the health care system, explicit and implicit biases in the healthcare, financial barriers, and the digital divide. Patient navigation can help address racial/ethnic disparities in health care access, access to clinical preventive services, disease screening, and treatment disparities.

### Key Findings:

- According to the California Health Interview Survey, 87.2% of interviewed Orange County residents had a usual source of care, which was higher than that observed nationally (76.0%) and higher than the *Healthy People 2030* goal.
- Approximately 16.6% of Orange County adults report delaying or having difficulty obtaining care, which was substantially higher than the *Healthy People 2030* goal (5.9%).
- Among Orange County adults, 12.3% report having difficulty finding specialty care.

### Community Guide Recommendations

To address care navigation in our communities, the Community Preventive Services Task Force recommends a whole person approach that not only helps patients access needed healthcare services, but also engages patients, families, caregivers, and systems in addressing the range of barriers to care that can negatively impact patient outcomes, including transportation, support resources, and social services, as well as cultural, psychological and attitudinal factors, such as language, health literacy, mistrust, and fear.

For more information see:

[Centers for Disease Control Evidence Based Interventions: Patient Navigation](#); [STEPS to Care: Patient Navigation](#).



# Economic Disparities

## Why is this a Priority Issue?

Those with fewer economic resources are more likely to be undereducated, live under poor housing conditions, have more dangerous and strenuous jobs, lack health insurance and a regular source of care, and live in unsafe neighborhoods. Such cumulative burdens make those who are economically disadvantaged more likely to suffer from a range of diseases, suffer more severe forms of disease, and ultimately live shorter lives. Income inequality has been rising in the United States and is at the root of many important racial/ethnic health disparities. Per Capita income is a *Healthy People 2030 Indicator*.

## Key Findings:

- In Orange County, per capita income is substantially lower among Black (\$41K), American Indian Alaskan Native (AIAN) (\$28K), and Asian Americans (\$46K) than Whites (\$62K).
- In Orange County, approximately 13.1% of Blacks, 12.8% of AIANs, 11.6% of Latinos, and 11.5% of Asian Americans live in poverty, compared 7.2% of non-Hispanic Whites.
- There are substantial socioeconomic disparities among Orange County communities across a range of indicators. Communities in the north and central parts of Orange County have been shown to have greater economic challenges through a number of social determinants of health indices, such as the [California Healthy Places Index](#).

## Community Guide Recommendations

The Community Preventive Services Task Force recommends a number of educational interventions that can enhance economic opportunities, including center-based early childhood education, full-day kindergarten programs, and high school completion programs. Additionally, the Centers for Disease Control recommend early childhood education and earned income tax credits as part of their Health Impact in Five Years initiative (HI-5).

For more information see: <https://thecommunityguide.org/topics/social-determinants-health.html>; <https://www.cdc.gov/policy/hi5/index.html>; [A Roadmap to Reducing Child Poverty](#); <https://www.americanprogress.org/article/from-poverty-to-prosperity-a-national-strategy-to-cut-poverty-in-half/>