

# 2019 Community Health Needs Assessment Community Engagement Summary



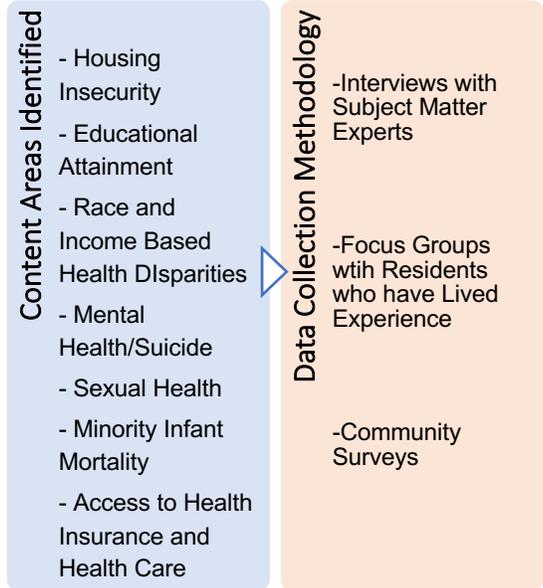
Kaiser Foundation Hospital  
Panorama City Medical Center

# Community Engagement Summary

Kaiser Permanente: Panorama City Medical Center CHNA 2019

## 2019 Community Health Needs Assessment

The purpose of the 2019 Community Health Needs Assessment (CHNA) was to engage community members in a collaborative process to identify and prioritize the most pressing health needs in their communities. Engagements with residents were guided by learning questions (see below). These questions were developed after reviewing existing secondary data regarding health outcomes and their contributing factors. For further questions about the CHNA methodology, community engagement, and primary and secondary data analyses, please contact [CHNA-communications@kp.org](mailto:CHNA-communications@kp.org).



## Engagement Process

Individuals from a wide range of sectors were engaged during the CHNA process in order to gather a wide range of perspectives. Input was obtained from two groups of stakeholders: (1) **Subject Matter Experts** (SMEs) who had content knowledge about relevant learning questions; and (2) **Community Residents** living in the Antelope Valley and Panorama City service areas who could speak to the lived experience of issues identified in the learning questions.

- › **Subject Matter Experts.** SME interviews were conducted with medical doctors, public health experts, community leaders, and staff members of community-based organizations.

Engagement Type	Total	# of Participants
Survey	7	512
SME Interviews	15	20*
Focus Groups	5	45

\*Some SME interviews included multiple participants

- › **Community Residents.** Residents were engaged through five focus group discussions and seven surveys about 1) the greatest health and safety concerns in the general community and 2) the greatest health, housing, and educational needs among local community college students.

### Learning Questions: At-a-Glance

- 1) What social and/or economic factors in the area are driving/contributing to crowded housing?
- 2) What aspects of crowded housing are driving/contributing to poor health outcomes?
- 3) What type of educational information and resources are available to community residents, that address the areas of poor mental health, higher prevalence of obesity among adults, and cancer?
- 4) To what extent are residents aware of the educational information and resources available within their communities?
- 5) What are the barriers to achieving higher education?
- 6) How does low income impact the daily lives of community members and what factors contribute to keeping income low?
- 7) What factors are contributing to the negative health outcomes among Black residents?
- 8) What is driving the high suicide rate among White residents?
- 9) What is contributing to the above average HIV rate compared to the state and Southern California?
- 10) What factors are contributing to the above average infant death rate among minorities?

## Learning Framework Summary

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**Themes Across Engagements:** The key takeaways throughout discussions with community members and subject matter experts are highlighted below.



### Lived Experience with Health Needs

- Economic insecurity leaves residents with little time or money to maintain their health.
- Lack of affordable housing in the region has contributed to high rates of housing insecurity and homelessness among older adults, undocumented immigrants, and former foster youth.



### Contributing Factors to Health Needs

- Lack of appointment availability prevents residents from accessing adequate health care.
- Regional geography and lack of adequate public transportation limits residents' access to resources.
- Health education & awareness efforts are not available to those who speak languages other than English.



### Disparities Across Race and Place

- Black women and their infant children have less access to care and worse health outcomes.
- Generational stress and racial bias compounds existing medical conditions among minority community members and prevents their access to equitable health care.



### Resources and Opportunities

- Expand mental health resources for youth
- Increase OBGYN providers that treat 'high-risk' patients
- Expand awareness efforts to inform community members about available support resources

## Housing and Health Outcomes

Interviewees and focus group members were asked to discuss insights and lived experiences with crowded housing, housing insecurity, and homelessness including: (1) primary health concerns, (2) conditions of housing and neighborhoods, (3) perceived health effects of conditions, (4) the resources available to address the concerns, (5) barriers to accessing care and housing assistance, and (6) the services/interventions they would like to have to address the issues.

While community stakeholders expressed that housing insecurity and homelessness impact people from every walk of life, some populations are especially prone to crowded housing and homelessness. This includes former foster youth, the formerly incarcerated, older adults, Veterans, people struggling with mental illness and/or substance abuse, and increasingly, the undocumented due to recent immigration crackdowns. Crowded housing and homelessness are caused by a wide range of factors and lead to a host of poor health outcomes including poor mental health, obesity, cardiovascular disease, diabetes, asthma, and stroke.

### **What factors in the area are contributing to housing insecurity and how does it impact resident health?**

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#### **Cost of Living and Housing Availability**

Cost of living has continued to increase, while wages have stagnated and even decreased. In Panorama City, utility costs have gone up 20% in the last 3 years. Many residents in the region are underemployed or unemployed and unable to afford high rental deposits, forcing them to live in multigenerational households or renting rooms from strangers. With the growing population and increasing costs of living, affordable multi-unit housing is increasingly in demand; however, zoning laws prevent builders to meet this demand.

#### **Public Pushback**

A barrier to solutions such as building shelters or permanent supportive housing is NIMBYism (Not in My Backyard) a type of public pushback due to unsupported misconceptions about the population being served and the impact on the community. Additional barriers in the Antelope Valley Service Area include negative perceptions of the region.

#### **Awareness of Resources**

Many people are unaware of existing housing support resources. A majority of residents surveyed indicated that affordable housing is a lacking community resource (68%), and that they do not know how to access housing resources that do exist (71%).

#### **Learning Question**

1. What social and/or economic factors in the area are driving/contributing to crowded housing?
2. What aspects of crowded housing are driving/contributing to poor health outcomes?

#### **Contributing Data**

- **6 SME interviews** conducted with 10 people
- **3 Focus Groups** conducted with 32 people

## **Violence and Safety**

Safety concerns in crowded homes include child abuse, sexual assault, and domestic violence. Additionally, scarce parking in crowded neighborhoods often require far walks late at night, increasing the risk of violence. Those living in cramped quarters are more likely to be exposed to poor sanitation, leading to an increased spread of infections.

## **Homelessness**

Health concerns leading to or as a result of homelessness include substance abuse, mental illness, lack of access to care and needed medications, chronic and communicable diseases, violence and lack of safety, hunger, and malnutrition. Additionally, homelessness can exacerbate existing health conditions and expose people to new illnesses.

“Mental health is the biggest concern. If a person is mentally stable prior to homelessness, that soon comes to an end. People can't be scared and exposed to the elements without it becoming an emotional issue. We really HAVE to do something about mental illness treatment: it's not cutting it and it's cruel and inadequate.”

– Subject Matter Expert

## **Resources**

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Resources in the community that address housing insecurity include: LA Family Housing (LAFH), Family Promise, and Bridge to Home.

Resources that address crowded housing are: YWCA, Salvation Army, Chrysalis, WIC, Northeast Valley Health Corporation, and Family Promise.

Resources that focus on the homeless include: Santa Clarita Valley Mental Health Center, Henry Mayo Newhall Hospital, Hotels for Crisis, Homeless Connect Days, Valley Food Bank, NEVHC's Health Care for the Homeless Program, LA Family Housing and Winter Shelters, and Hope of the Valley Rescue Mission.

## **Opportunities for Further Action**

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Efforts to reduce overcrowding and homelessness should include increased affordable housing, transitional housing, rent control, section 8 housing and vouchers, permanent supportive housing, and emergency shelters. Additionally, public awareness campaigns should work to reduce stigma by educating the general population about the reality of homelessness and its many faces: families, women, children, the elderly, veterans; people just like them.

Case management and wraparound care must be employed to address housing, health, substance abuse, and mental health needs concurrently. This should include vouchers for job skills training. Lastly, efforts to raise awareness about existing community resources need to be expanded.

## Available Resources

Access to comprehensive quality health care is important for the achievement of health equity and for increasing the quality of life. Limited access can dramatically impact people's health outcomes and awareness of available resources can increase a person's ability to access care.

### What educational information and resources are available in the community and are residents aware of these resources?

There are important health resources and educational health information available to residents in the Antelope Valley and Panorama City Service Area communities. However, community stakeholders expressed that residents do not know how to access

*"People don't know [resources in the community] exist and resources have difficulty finding the communities that need them."*

– Subject Matter Expert

these resources and that need exceeds the capacity of these resources. 66% of mental health providers surveyed in the Northeast San Fernando Valley and

80% of mental health providers surveyed in the Antelope Valley said that people do not access mental health resources because **they do not know where to go for help**. This was affirmed through resident survey responses; 47% of residents surveyed reported they did not know how to access **health** resources and 58% of residents surveyed reported they did not know how to access **mental health** resources.

### Learning Question

3. What type of educational information and resources are available to community residents, that address the areas of poor mental health days, higher prevalence of obesity among adults, and cancer?
4. To what extent are residents aware of the educational information and resources available within their communities?

### Contributing Data

- **10 SME interviews** conducted with 14 people
- **3 Focus Groups** conducted with 24 people

## Resources

Selected resources include: El Nido Family Centers, Hillview Mental Health, MEND, Hope of the Valley Rescue Mission, San Fernando Valley Community Mental Health Center, Olive View-UCLA Medical Center, San Fernando Community Health Center, National Alliance on Mental Illness (NAMI), ACCESS, Mental Health America (MHA), Los Angeles County Department of Mental Health (DMH), Child and Family Center, Children's Center of Antelope Valley, Hathaway Sycamore, Bartz-Altadonna Community Health Center, Child and Family Guidance Center

*"Many [mental health] resources exist, but there is not enough funding to go around to serve all the people that need it. Ethnic and low-income communities have even less access."*

– Subject Matter Expert

## Opportunities for Further Action

Recommendations to improve awareness of available community resources included:

- Community health navigators to walk individuals through various aspects of accessing care, including education, insurance, paperwork, billing, medications, goal-setting, and care planning.
- Materials and presentations available in the multiple languages

## Educational Attainment

Engagement activities with SMEs and residents were conducted to identify barriers to achieving higher education within the Antelope Valley and Panorama City area.

### What are the barriers to achieving higher education?

#### Cost & Financial Limitations

The most frequently mentioned barrier to attaining higher education was the high cost. College students and SMEs alike spoke about the increasing challenges associated with high tuition, transportation prices, and cost of housing. SMEs also noted that there are restrictions within their agencies on how many and how frequently they can provide bus tokens or transportation coupons/vouchers to students and community members.

*“Many can’t afford public transportation...if you look at the monthly bus passes, they’re about \$100 a month.” – Subject Matter Expert*

*“For low-income young adults, they may start college, but it becomes difficult to continue because they’re helping to financially support their families.” – Subject Matter Expert*

#### Learning Question

5. What are the barriers to achieving higher education?

#### Contributing Data

- 4 SME Interviews
- 2 Survey Initiatives (n=304)

#### Family and Work Commitments

Counselors within the region indicated that time commitments such as family and work priorities were potential barriers to students attending higher education institutions. More than half (55%) of student respondents also selected “time” as a barrier they experience in working towards their degree. About two in five students selected specific barriers like work priorities (46%) and family commitments (41%). SMEs also identified family commitments to be a potential barrier to obtaining higher education, especially within Hispanic or Latino families, where a person may prioritize familial and cultural obligations over education.

*“I think that there are cultural barriers, a lot with our Latino cultures. The culture is to stay and contribute to the family. They place a lot of importance on contribution and responsibilities.” – Subject Matter Expert*

#### Lack of Education about Support Services and Resources

SMEs described challenges promoting support services and resources to encourage community members to seek higher education. As a result, community members are often severely uninformed about the types of supports and resources available in the area for individuals trying to pursue higher education. One in five (20%) students surveyed reported that lack of guidance was a barrier to obtaining their degree. Counselors within the region also indicated barriers to pursuing higher education include lack of awareness of college opportunities and limited knowledge of the financial aid process.

*“They think what they grow up in...It isn’t that [these students] don’t know [college is] a possibility, they just don’t see it modeled.” – Subject Matter Expert*

*“There is a lack of awareness of available adult education resources.” – Subject Matter Expert*

*“[There is a] lack of knowledge, not knowing how to look for education...the community isn’t really aware and don’t know where to go.” – Subject Matter Expert*

## Low Motivation to Pursue Higher Education

SMEs mentioned that some youth may not seek higher education because they have a lower motivation to pursue college opportunities. They stated that it can be challenging to communicate with youth about college and career pathways in a meaningful and engaging way. Additionally, they spoke about other contributing factors that lower motivation to pursue college opportunities such as cultural background, youth mindset, and lack of role models/mentors that can educate youth about the benefits of pursuing higher education.

*“Students have a mindset of this is how things are...To dispel [this mindset] and educate them is a process...but conversations don’t always change mindsets.” – Subject Matter Expert*

*“One challenge is that we don’t necessarily know how today’s youth view the world and what is most important to them...the challenge...is finding the youth and getting them engaged.” – Subject Matter Expert*

## Lack of Affordable Childcare and Support

College students within the Antelope Valley and Panorama City area are different from the traditional college student. Among survey respondents, nearly half (43%) of students were over the age of 30, which may result in greater challenges in obtaining their degrees if these individuals have children in their care. Interviewees indicated that the lack of affordable childcare for students limits their ability to finish their degrees. There is a need for more programs that assist parents pursuing educational opportunities.

*“The high cost of...childcare [is a barrier] ...to finishing their degrees.” – Subject Matter Expert*

*“Some mothers try to come in [for programming] when their kids are in school...when their children are home, they are busy taking care of their children.” – Subject Matter Expert*

## Language Barriers

Interviewees state an increasing need for promotional materials and information to be translated into multiple, diverse languages to provide education to community members about available services and resources within the region that encourage pursuance of higher education opportunities. They also indicated that when communicating with parents, it can be challenging to convey information about college options and financial assistance when the parent has a limited understanding of English.

*“There are 10 million people in Los Angeles County. 1.5 million don’t speak English well or at all. This creates a barrier in terms of communication and for understanding available information.” – Subject Matter Expert*

*“We are in a housing development, so we do have a lot of people in need of ESL and literacy programs. We have a lot of community members that can’t read or write in their own language.” – Subject Matter Expert*

## Resources

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Selected agencies that provide support to community members to encourage higher education include: Youth Policy Institute; Los Angeles Economic Development Corporation; Antelope Valley Union High School District; California State Universities (e.g., Northridge campus); Head Start; and Antelope Valley Community College.

Counselors and other SMEs shared an expansive list of strategies that agencies/organizations in their community are engaging with to encourage higher education, such as: Naviance, a computer-based program for college and career exploration; career/guidance counselors; college-readiness programs; college and career presentations/workshops; scholarship assistance; college prep coursework; English as a Second Language programming; GED programming; educational promotion and outreach of available service agencies and

*“California State Universities...are very tuned into the barriers that keep kids from graduating. They’re really thinking a lot more about barriers such as housing, transportation, childcare, and many schools now have food pantries and clothing distribution centers.”  
– Subject Matter Expert*

higher education opportunities; literacy programming; transportation vouchers, coupons, or rebates; job placement programming; financial aid workshops; and community partnerships.

## Opportunities for Further Action

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*“Being able to have an outreach coordinator or funding to provide that information to the community on a daily basis would be ideal.”*

– Subject Matter Expert

Students ages 18-20 were significantly more likely to select lack of guidance as a barrier to obtaining their degree compared to students over 30 years old. While SMEs discussed many current strategies that their agencies employ to conduct outreach and promotion of available supports for higher education, all interviewees indicated that additional funding/staffing could enhance their efforts and encourage

more higher education pathways for youth and young adults. They also noted that community partnerships and standardized counseling curriculums within the school districts have begun. This will help agencies share resources and distribute consistent messaging to community members. There were suggestions to continue identifying community partnerships to share information to the. Counselors reported that additional focus on financial workshops and assistance should be considered in the future. Other suggestions from counselors included providing students with one-on-one assistance during high school, encouraging career and college pathway education, and utilizing mentorship programs. Lastly, interviewees recommended identifying opportunities to provide more transportation vouchers, programming for adults, online support services for students, and community outreach in appropriate languages.

## Economic Insecurity

Engagement with community members and SMEs identified several negative outcomes that individuals with economic insecurity experience including: mental illness and/or poor mental health, food insecurity, homelessness and crowded housing, lack of higher education opportunities, and increased exposure to communicable diseases.

### How does low income impact the daily lives of community members and what factors contribute to keeping income low?

#### **Cost of Living**

Continued increases in housing and food prices are contributing to a greater number of individuals in the Antelope Valley and Panorama City service areas who face economic insecurity.

Residents identified affordable housing as the primary resource lacking in their community and nearly all (96%) of San Fernando Valley and Santa Clarita Valley Homeless Coalition members selected affordable and safe housing as a resource lacking in the community. Rather than facing homelessness, those who are experiencing economic insecurity and increased cost of living are moving into housing that is unsafe but more affordable, or choosing to live with multiple families to cut costs (i.e., crowded housing). SMEs stated that crowded housing can contribute to higher transmission rates of infectious diseases and contribute to added stress and sleep deprivation.

#### **Food Access**

Half of San Fernando Valley and Santa Clarita Valley Homeless Coalition members reported that affordable and healthy food is a resource lacking in the community. Community members shared that healthy, fresh food options are not readily available at affordable prices in their neighborhoods. When living on low income wages/salaries, individuals cannot travel outside their communities to purchase healthy, fresh foods at affordable prices.

#### **Low Educational Attainment**

SMEs also shared that low levels of education can contribute to economic insecurity. One SME mentioned that without higher education, individuals lack upward mobility for their careers, and this can inhibit one's ability to earn higher wages/salary. SMEs also spoke about the limited awareness that individuals with low education have about where and how to access resources and supports during economic hardships or assistance for housing, education, and food. Awareness of resources and services and knowing how to access them is the greatest barrier to becoming economically secure. The relationship between economic security and low educational attainment is reciprocal; not only does low educational attainment contribute to economic insecurity, but economic insecurity makes it difficult for students to attain higher education.

Interviewees shared that tuition prices and housing costs continue to be factors that contribute to students' economic insecurity and limit their educational attainment. For many students facing economic insecurity, the cost of public transportation is too great an expense for their already tight budget. SMEs indicated that the issue of being able to afford public transportation transcends to other populations within their communities, such as low-income families and homeless individuals

#### **Learning Question**

6. How does low income impact the daily lives of community members and what factors contribute to keeping income low?

#### **Contributing Data**

- **13 SME interviews** conducted with 18 people
- **5 Survey initiatives** (n=491)
- **5 Focus Groups** conducted with 45 people

## Lack of Job Opportunities

SMEs, in particular, described the additional challenges that an individual who works multiple jobs faces when making decisions about healthcare and food options for their family. Often individuals working multiple low-income wage jobs struggle to find the additional time needed to exercise regularly and shop for fresh produce and healthy food options. Individuals working multiple jobs are more likely to be sleep deprived and overweight or obese. Additionally, working multiple jobs can limit a person's ability to learn about other vocational or educational opportunities. Interviewees in the education field reported that many workshops offered to parents to learn about higher education or financial aid/assistance for college are not well attended by low-income families since parents are not available. Even when individuals seek higher education, SMEs mentioned that the lack of job opportunities within the Antelope Valley limits a person's ability to become economically secure. One SME from the Antelope Valley service area stated that students with higher education choose to leave the area in search of other job opportunities to find a job that pays a living wage and is meaningful.

*"We offer opportunities for parents to come [to workshops about higher education options], but when you work multiple jobs—when you look at lower income families, parents...can't come during school hours or to after school events."*  
– Subject Matter Expert

*"The lack of industry outside of aerospace is kind of a detriment because students who do go [out of the region] don't necessarily want to come back...but for students who don't have that interest, they don't have a bunch of job possibilities here."*  
– Subject Matter Expert

## Low Salaries and Wages

Another contributing factor to economic insecurity stems from low or stagnant salaries/wages for jobs within the area relative to neighboring areas, paired with an increasingly high cost of living. SMEs described challenges within their own organizations and agencies in hiring staff that have the skills and education to fulfill their needs due to their own funding constraints. SMEs detailed that the issues they face hiring staff are not unique to their organization or agency, and shared that they believe industries in all sectors within the area are struggling with providing higher salaries/wages to employees while keeping costs low.

*"It is very difficult to hire mental health professionals in this area, particularly in adult services...we can't compete with Kaiser or the County Department of Mental Health on salaries."*  
– Subject Matter Expert

## Access to Health Care

Further, SMEs shared that low-income families will often forgo primary healthcare and mental health services due to cost and lack of health insurance. A focus group member in North Hills mentioned that the first thing they ask before seeking additional care is "Do I have money to pay for it?"

## Resources

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Selected agencies that provide support to address economic insecurity include San Fernando Valley and Santa Clarita Valley Homeless Coalition members; Government Assistance/Social Security; Medi-Cal; Kaiser Permanente; Blue Shield; Hope of the Valley Rescue Mission; California State Universities; Salvation Army; and Section 8 Housing.

Engagement with community members and SMEs gathered a list of strategies that agencies/organizations are doing to address economic insecurity, such as: promotion and outreach of available services; supportive housing; affordable housing options; food pantries; clothing distribution; transportation vouchers/coupons; community partnerships; and policy advocacy/change.

## Opportunities for Further Action

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Efforts to improve economic insecurity should address:

- Workforce development and vocational training programs to improve employability of workforce
- Expand affordable housing efforts – housing vouchers, supportive housing, rent control

- Increase affordable food access
- Increase public transportation and improve access for lower-income residents
- Provide free or reduced cost screenings and preventative care services for underinsured and uninsured individuals
- Continue to support regional economic development initiatives to attract diverse businesses to increase higher paying employment opportunities

## Poor Health Outcomes Among Black Residents

Though Black residents make up a small portion of the service area population (3% in Panorama City and 12% in Antelope Valley), there are prevalent race-based health disparities among this racial group. Black residents in the Panorama City service area experienced above average rates of cardiovascular disease (30%), asthma (101%), stroke (42%), obesity (39%), and cancer (32%). Black residents in the Antelope Valley service area similarly experienced above average rates of cardiovascular disease (23%), asthma (67%), stroke (40%), obesity (31%), and cancer (31%). Three of these health outcomes (cardiovascular disease, stroke, and cancer) are listed as top five causes of death in Los Angeles County.

Subject matter experts from the Los Angeles County Department of Public Health were engaged to provide insight into why this racial group disproportionately experiences these health disparities.

### Learning Question

7. What factors are contributing to the negative health outcomes among black residents?

### Contributing Data

- **1 SME interview** conducted with 5 people
- **1 Survey** (n=116)

### What factors are contributing to negative health outcomes among Black residents?

#### Food Insecurity

Interviewees indicated that this region is a ‘food desert’ meaning there is little availability of fresh healthful foods and that the available options often are not affordable. Concerns about affordable food options were affirmed by resident survey respondents; 66% of which indicated that affordable food options were lacking in their communities. Poor access to healthful food options makes it difficult for residents to make healthier eating choices therefore increasing their risk of negative health outcomes.

Additionally, there are low breastfeeding rates in both service areas. This is a concern for public health officials because breastfeeding is linked to long-term health benefits.

#### Socioeconomic Status

Many residents in the service areas, particularly in minority communities have a low socioeconomic status and are likely to live below the poverty level. In Panorama City, 19% of Black residents and in Antelope Valley, 35% of Black residents are living below the poverty level. Many residents (68%) expressed concerns about affordable housing. With the high costs of living this leaves residents with less disposable income to afford healthful food options.

#### Geographic Isolation

In Antelope Valley, the geography makes transportation difficult and limits public transportation options. This, in turn, makes it difficult for low-income families to commute to higher paying jobs, access specialty healthcare services, and shop at more affordable grocery stores with more fresh food options. Antelope Valley is a community with long commute times and less time for cooking and exercising.

*“They come into the city to work and because it is a long drive from the Antelope Valley they have to leave earlier and arrive home later which reduces opportunities for physical activity, healthy eating, etc. ...This feeds into the high rates of diabetes, hypertension, heart disease, etc. Nationally, the current recommendation is an hour a week for physical activity and 75% of the population isn’t meeting it at all. Add to that figure higher housing costs, longer working hours, lowers socioeconomic status, they’re already doing so much to keep up. The idea that they meet those recommendations when even people in higher socioeconomic areas are having trouble to meet them...this leads to the associated difference in health outcomes.” – Subject Matter Expert*

### **Generational Trauma and Stress**

Additionally, the chronic and generational stress that is experienced in Black communities across the country is a major contributing factor to the many disparate health outcomes they experience. The stress they experience accumulates over time and turns into a physiological process by raising cortisol leading to high blood pressure and other chronic conditions.

### **Resources**

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Local community initiatives provide programming to residents to assist them make healthy choices while simultaneously establishing corner markets in communities to increase access to fresh and affordable produce. There are also efforts to implement healthy beverage policies in schools.

In addition to providing community health education workshops and events, the Department of Public Health (DPH) works directly with faith-based communities to engage and educate their congregations.

### **Opportunities for Further Action**

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DPH is working with One Degree, a technology based nonprofit organization, to develop a platform like Yelp to help residents locate the community-based resources they need. This is part of an important effort to raise awareness about available resources within the service area because oftentimes those who need the resources do not know about them. Additionally, DPH provides materials and workshops in Spanish, but struggles to provide services in other languages such as Farsi. Given that there are 16 threshold languages in Los Angeles County, the ability to provide health information (workshops, packets, etc.) in other languages is an important part of engaging community members and improving the health outcomes of minority members.

## Mental Health and Suicide

Antelope Valley and Panorama City serve area residents with lived experience concerning mental health diagnoses, suicidality and suicide loss as well as SMEs representing local prevention and intervention organizations across the region were engaged. Participants were asked about (1) factors that might explain why White residents are disproportionately affected, (2) the factors that contribute to poor mental health, (3) existing resources to address mental health concerns, (4) barriers to accessing care, and (5) the services/interventions they would like to have in their communities.

Though White residents in both service areas committed suicide nearly 70% above average when compared to other racial and ethnic groups in the service areas, participants could not elaborate as to **why** White residents experienced poor mental health and committed suicide at higher rates. Therefore, the findings below are broadly about mental health experiences, available resources, and needs in both service areas.

Concern regarding mental health was expressed by both residents and subject matter experts; 61% of community residents surveyed and 90% of physicians surveyed reported that they are concerned with mental health.

### Learning Question

8. What is driving the high suicide rate among White residents?

### Contributing Data

- **4 SME interviews** conducted with 4 people
- **3 Focus Groups** (n=24)
- **5 Surveys** (n=205)

### What is the lived experience of service area residents with poor mental health?

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#### Stress

Stress was indicated by subject matter experts in both the Antelope Valley and Panorama City service areas as the main contributing factor to poor mental health. Some causes of stress included: trauma, abuse, trouble with family, poverty, cost of living, and immigration status.

*“There is a lot of [pressure] about financial situations and this adds to emotional and mental stress.” – Focus Group Member*

#### Awareness

The second most frequently mentioned contributing factor to mental illness by providers was lack of awareness regarding available community mental health resources. This was affirmed by responses from the resident survey where 58% of residents stated that they do not know how to access mental health resources.

#### Access to Care

Difficulties accessing care came across as a primary barrier to addressing mental health concerns. Difficulties included long wait times for appointments, inconvenient hours of operation distance to providers/inadequate transportation to services, and issues relating to stigma (e.g. they do not want friends or family to know, they think they will not be listened to or believed, etc.).

*“The biggest and massive concern is mental health. Access to mental health support outside and inside of the schools. The lack of a youth facility for hospitalization in the Antelope Valley is massive...Every student identified at risk for harming themselves gets transported to Olive View, but they spend hours waiting for transport and an available bed. I think this is a deterrent for many parents to send their kids...mental health is our biggest gap.” - Subject Matter Expert*

## Cost and Coverage

Cost and poor insurance coverage were listed as barriers to accessing mental health services by interviewees. This was affirmed by Mental Health provider surveys in both service areas. Of providers surveyed, 43% felt that mental health services were not available to those without insurance and 55% felt they were only somewhat available.

## Comorbidity

Homelessness and substance use were indicated as comorbidities of mental illness in the service areas by residents and subject matter experts alike. In fact, all members (100%) of a homelessness coalition indicated that they are moderately to very concerned with mental health. Respondents stated that concurrent homelessness and substance use contributed to poor mental health and that there is a great need for additional resources in the community to treat these conditions simultaneously.

*“There is no place for the mentally ill homeless here.” – Focus Group Member*

*“...there are not enough county beds for homeless patients, therefore the ER becomes a quasi-inpatient unit...it's not a good place for severely mentally ill patients...” – Subject Matter Expert*

*“With the homeless, it is not only the [issues of] poverty, housing... [that need to be addressed], but also working with their mental health challenges.” – Focus Group Member*

*“We're seeing more people that are impaired. It's not just marijuana, we see it with meth, alcohol. People are reaching for escape tools.” – Subject Matter Expert*

## Resources

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Selected resources include: El Nido Family Centers, Hillview Mental Health, MEND, Hope of the Valley Rescue Mission, San Fernando Valley Community Mental Health Center, Olive View-UCLA Medical Center, San Fernando Community Health Center, Los Angeles County Department of Mental Health, Mental Health America (MHA), Department of Mental Health (DMH) Psychiatric Mobile Response Team (PMRT), National Alliance on Mental Illness (NAMI), Child and Family Center, Children's Center of Antelope Valley, Bartz-Altadonna Community Health Center, Hathaway Sycamore, Child and Family Guidance Center, Vista del Mar, Lucien, McKinley's Children Center, Personal Involvement Center, and Veterans Affairs.

## Opportunities for Further Action

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Improving access to care was recommended by the majority of subject matter experts engaged on this topic.

Recommendations to improve access to care included:

- Expanding inpatient services (e.g. more beds)
- Increasing the number of affordable providers
- Screenings for early detection and intervention
- Community outreach and education about available mental health resources
- Improved appointment availability (e.g. evening and weekend appointment availability)
- Youth psychiatric services
- Substance treatment
- Services for individuals experiencing homelessness
- Culturally competent services

- Providing services to address needs across the spectrum (i.e. services from early intervention to treatment for seriously persistently mentally ill individuals)

*“Public healthcare only addresses those with serious and persistent mental illness, which is necessary, but there is a continuum of mental health that needs to be addressed.” - Subject Matter Expert*

*“We don’t wait to treat people with cancer, but we do with mental health...We wait until they get severe which is a pretty immoral way of treating people.” - Subject Matter Expert*

## Sexual Health

In California 375 per 100,000 residents have HIV whereas in the Antelope Valley service area, there are 531 residents per 100,000 and in the Panorama City service area there are 556 residents per 100,000. Given these higher than average HIV rates in both service areas, subject matter experts were asked to provide their insights as to what may be contributing to such high rates.

### What is contributing to the above average STI rates in the service areas?

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Subject matter experts stated that not only were HIV rates on the rise, but so were Chlamydia, Gonorrhea, Syphilis, and Congenital Syphilis. On a survey, more than half of physicians (64%) stated that they are concerned about sexually transmitted infections (STIs). They indicated that the rise was prevalent among young people in their teens and early 20's. The transmission of Congenital Syphilis to infants was particularly concerning because even though it is easily treatable if caught early, it can cause infant mortality.

Barriers to treatment included stigma, poor medical access, and lack of health education and awareness.

### Resources

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Selected resources include: Planned Parenthood, Catalyst Foundation, Women's Clinic in Lancaster, and Los Angeles County Department of Public Health.

### Opportunities for Further Action

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Providing community education to promote safer sex practices and inform residents about available resources was recommended to reduce the rates of STI transmissions.

#### Learning Question

9. What is contributing to the above average HIV rate compared to the state and Southern California?

#### Contributing Data

- **3 SME interviews** conducted with 7 people
- **1 Survey** (n=10)

*"We can't go into the schools. We can't even pass out information in front of the schools to let them know how to protect themselves."* – Subject Matter Expert

*"High schoolers [should be] provided better information...it should be more emphasized about the importance of having protected sex."* – Subject Matter Expert

## Minority Infant Health

Antelope Valley and Panorama City service area's minority residents as well as SMEs representing local organizations were engaged to discuss high minority infant mortality rates. In the Antelope Valley Service Area, infant mortality among minority residents was 35% above average and in the Panorama City Service Area, infant mortality among minority residents was 32% above average. Though infant mortality in minority communities is an issue in both service areas, our interviewees highlighted that the real deficit in services is in the Antelope Valley service area.

### What factors are contributing to the above average infant death rate among minorities?

#### Issues with Quality Care

Many focus group members indicated that OB-GYNs in the Antelope Valley service area, do not listen to them. They stated that even though they desired a vaginal birth, their doctors refused, which then forced them to leave the area to find providers that would enable them to have a birth of their choice. Additionally, many women are classified as high-risk which also pushes them out of the service area as no OB-GYN in the region sees high-risk patients.

*"...not every patient is high-risk, and if we label them all as high-risk, they end up with nowhere to go." – Subject Matter Expert*

#### Economic Insecurity

Due to high living costs in Los Angeles, many moms move out to the Antelope Valley. This leads to many moms becoming socially isolated. Additionally, subject matter experts indicated many moms experience homelessness and are in need of housing vouchers and other additional resources at a reduced cost. For instance, a lactation specialist costs about \$150 an hour which is really difficult to afford, but critical to helping low-income families improve rates of breastfeeding which help relieve socioeconomic disparities.

*"There are so many women that aren't in a financially stable place to afford these resources." – Subject Matter Expert*

#### Distance and Transportation

Resources in the region are often very spread out and because many women are labeled as high-risk, they are referred out and have to travel far for services. Additional barriers are created if there is no access to a vehicle or adequate public transportation.

*"When patients...have to travel 2 to 2 1/2 hours to get to [a tertiary] center...this results in higher mortality rates because they don't have a provider to go to and they don't see anyone until [something] catastrophic happens."*  
– Subject Matter Expert

#### Institutional Racism

Similar to other disparate health outcomes experienced by the Black community, the chronic and generational stress that is experienced in Black communities across the country is a major contributing factor to high infant mortality rates. The stress they experience, as a result of institutional racism, becomes physiological and impacts their and their baby's health. The bias they encounter also results in negative experiences with their providers and can create a barrier to them seeking care.

*"There is bias many women encounter from doctors, latent racism." – Subject Matter Expert*

#### Learning Question

10. What factors are contributing to the above average infant death rate among minorities?

#### Contributing Data

- **SME interviews**
  - Total of 4 interviews conducted with 9 people
- **Focus Groups**
  - Total of 1 focus group conducted with 11 people

## Resources

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Selected resources include: El Nido Family Centers, Breastfeed LA, WIC, and the Children's Bureau.

In addition to the resources available, community organizations work on policy initiatives at the local level to provide support for women experiencing homelessness, domestic violence, mental health issues and at the state level on paid family leave. There are also efforts to increase breastfeeding and survival rates in premature babies by supplying milk depots with breastmilk in NICUs. Finally, many local resources seek to improve the early life of infants by providing their mothers parenting classes, counseling, and life and career planning.

## Opportunities for Further Action

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Recommendations to better address the needs of mothers and their young children include:

- Continued educational outreach to mothers
- Physician education and cultural competency training
- OBGYNs in the Antelope Valley that are willing to see high-risk patients
- Teen mom education and home visitation programs
- Housing assistance
- Doulas
- Lactation Specialists

*"...the majority of home education programs are for adults. There are not enough programs for teens."* – Focus Group Member

*"We have a high rate of homelessness but...more agencies are trying to address these issues and to maintain a support system for moms once they have babies."* – Subject Matter Expert