

Napa County

Maternal Child and Adolescent Health Community Profile 2017-18

Demographics

Our Community

Total Population ¹	137,634
Total Population, African American	2,471
Total Population, American Indian/ Alaskan Natives.....	531
Total Population, Asian/Pacific Islander	9,868
Total Population, Hispanic	45,137
Total Population, White.....	76,757
Total Live Births ²	1,449

Our Mothers and Babies

% of women delivering a baby who received prenatal care beginning in the first trimester of their pregnancy ²	86.6%
% of births covered by Medi-Cal ²	40.5%
% of women ages 18-64 without health insurance ³	19.5%
% of women giving birth to a second child within 24 months of a previous pregnancy *	35.6%
% live births less than 37 weeks' gestation ²	8.2%
Gestational diabetes per 1,000 females age 15-44	11.7
% of female population 18-64 living in poverty (0-200% FPL) ³	27.4%
Substance use diagnosis per 1,000 hospitalizations of pregnant women*	18.6
Unemployment Rate ⁴	8.3

Our Children and Teens

Teen Birth Rate per 1,000 births (ages 15-19) ²	20.3
Motor vehicle injury hospitalizations per 100,000 children age 0-146	14.6
% of children, ages 0-18 years living in poverty (0-200% FPL) ³	38.7%
Mental health hospitalizations per 100,000 age 15-24*	1045.8
Children in Foster Care per 1,000 children ⁵	4.3
Substance abuse hospitalization per 100,000 aged 15-24*	538.9

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

Napa County is located 50 miles northeast of San Francisco in the Bay Area of northern California, and is a longitudinal north/south valley, 42 miles long and 18 miles wide, covering 748 square miles. The county is bordered by Lake, Sonoma, Yolo, and Solano Counties. The Napa River flows north to south, and the valley is bordered by two mountain ranges on the east and west. Napa is primarily an agricultural valley and is one of the most renowned premium wine-producing regions in the world with vineyards comprising about 45,000 acres out of 504,450 acres. Approximately 57% of residents live in the city of Napa. The Napa County economy revolves around and is highly dependent on the wine industry from vineyards to wineries and supports many related industries including retail, and wholesale trade, manufacturing, transportation and warehousing, professional and business services, leisure and hospitality and transportation. The largest employers in Napa are in healthcare, hospitality, education and the wine industry. County policies promote urban-centered growth with homes and businesses concentrated in incorporated cities to protect farmland. Although Napa County has vineyards, farmland and scenic landscape and 120,000 acres of public land, it is without an open space district and has no park district or county parks

district. About 88.1% of the population lives reasonably close to a park or recreation facility, and Napa County has 13.2 recreation facilities per 100,000 people.

Health System – Health and Human Services for the MCAH Population

Napa County has two acute care/delivery hospitals with emergency rooms, and Kaiser Permanente Clinic provides primary, specialty, prenatal care and pharmacy. Kaiser serves about 30% of the population and pregnant women with Kaiser must deliver in Solano or Sonoma County. Ole Health, formerly Community Health Clinic Ole, is the only FQHC and is the safety net provider for the low-income population, and includes Queen Anne's Dental clinic for the Denti-Cal/low income clients. There are three OB-GYN medical practices who are all CPSP providers, and enhanced CPSP services are provided at Women's Perinatal Services, which are a part of Ole Health. There are 129.5 primary care physicians per 100,000 population, and 3.3 dentists per 5,000 population. Partnership HealthPlan of California is the Medi-Cal managed care plan for Napa County. Marginalization of the Latino population along with cultural and language differences, transportation issues, and difficulty navigating the social service and health care systems are barriers to accessing care. 15.8% of the Napa population is without health insurance but rates are higher for Latinos at 25.9%, unemployed at 49.5% and foreign born at 32.9%. A higher percentage of Latino residents, people with lower educational attainment and female-headed households are living in poverty compared to other groups. Latinos, socioeconomically disadvantaged students, and English language learners are overrepresented among high school dropouts.

Health Status and Disparities for the MCAH Population

Significant health disparities exist in Napa County. The Latino residents report their health as fair or poor at 3x the rate of non-Latino white residents; Latino residents, those with lower educational attainment and female heads of household have higher poverty rates; Latino residents have higher rates of unemployment, higher high school dropout rates and lower educational attainment; and obesity rates are higher in low-income adults and those without a high school education. 18.3% of low-income preschoolers are obese. Latina women have lower in hospital exclusive breastfeeding rates, and half of pregnant women on Medi-Cal enter pregnancy overweight or obese. Poverty, stress, racism, low educational attainment, language, cultural and access barriers, and low breastfeeding rates are all contributing factors to health problems including obesity, diabetes and chronic disease. Over the last 4 years, Live Healthy Napa County (LHNC) has completed a Community Health Needs Assessment and a Community Health Improvement Plan with over 80 strategies to make sustainable improvements in health in the following areas: Improve Wellness and Healthy Lifestyles; Address the Social Determinants of Health; Create and Strengthen Sustainable Partnerships for Collective Impact; and Ensure Access to High Quality Health Services and Social Supports Across the Life Course. In 2017, Live Healthy Napa County (LHNC) began working on the next Community Health Needs Assessment and a Community Health Improvement Plan to be introduced in 2018; for which the focus will be food insecurity and healthy food access. Through improved healthy retail, visibility and access of healthy foods, worksite wellness initiatives, and direct outreach and education to higher risk communities, LHNC and MCAH efforts will result in improved health outcomes within our community-wide Obesity Prevention Plan and Breastfeeding Plan goals.