

Improving Health in Central Stockton

Kentfield Community Health Needs Assessment



Funded by the Sierra Health Foundation



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The Data Co-Op expresses its gratitude to the Sierra Health Foundation for supporting this critically important needs assessment work in Stockton. Without the vision and support of the foundation this work would not have been possible.

It is important that the Data Co-Op thank the Community Partnership for Families (CPF) of San Joaquin. It was CPF who came up with the original idea of focusing on the Kentfield neighborhood. In addition, CPF allowed the Data Co-Op to have meetings at both its Diamond Cove II and Kentfield Family Resource Centers. CPF also assisted the Data Co-Op in setting up meetings with the City of Stockton, the Stockton Police Department, and the Kentfield Action Team.

Community Assessment Team

A critical component of the Kentfield Community Health Assessment centered on the establishment of a Community Assessment Team. This approach, adopted as a strategy from similar work done in North Carolina, centered on including a full range of community experts in order to offer comprehensive feedback the research effort. Along with our research team the Community Assessment Team included the following individuals:

- Robert Botto – Jacoby Center, University of the Pacific
- Shené Bowie – San Joaquin County Public Health Services
- Roy Childs, Ph.D. – Jacoby Center, University of the Pacific
- Officer Loreen Gamboa – Stockton Police Department
- Carolyn Godwin – City of Stockton
- Sue Marks – City of Stockton
- John New – Stockton Unified School District
- Sarah Nov – Community Partnership for Families
- Tina Orallo – San Joaquin County Public Health Services
- Karen Pfister – San Joaquin County Public Health Services
- Jennifer Robles – Stockton Unified School District
- Nirali Shah – San Joaquin County Public Health Services

It is important to note that Karen Pfister and Nirali Shah were invaluable resources throughout the course of this project. Not only did they supply a vast amount of public health and census data, but they generated all of the maps found within this assessment report.



Introduction

In order to identify the health needs in one of the most impoverished areas of the Central Valley, we proposed, via the Sierra Health Foundation's Responsive Grants Program, to implement a comprehensive community health assessment in the highly diverse Kentfield area of Stockton, California. While there has been a significant effort put into the Kentfield community over the last few years (e.g., positive changes in infrastructure, community policing efforts, etc.), a comprehensive health needs assessment has not been conducted in Kentfield. Before the provision of direct services can take place, it is essential that a community has current data on specific health needs. Moreover, before health-based programs can even begin to assist with the health issues in locations like central Stockton, such providers and the community need to be knowledgeable about what these issues are. While it is true that monies can be given for direct services, the overall health issues in central Stockton need to be fully understood if real change is to occur. Through this needs assessment process the goal was to provide the Kentfield community with a health planning tool that could guide the community, health care providers, and city leaders to sustained change.

The key questions centered on the following: What are the health concerns in Kentfield and, of these, what are the most pressing issues? From there the question was: What is the community's plan for moving forward? The health assessment that was conducted was modeled after the North Carolina Community Health Assessment Initiative and included the establishment of a community assessment team. The central goal of this work was to have central Stockton gain a comprehensive understanding of the health concerns of the community by identifying, collecting, analyzing, and disseminating information on community assets, strengths, resources, and needs.

Map of the Kentfield Neighborhood

Boundaries: Calaveras (south), March Lane (north),
El Dorado (west), UPRR (east)



Satellite Image of the Kentfield Neighborhood in Stockton, California



It is our hope as a research organization that the knowledge gained from this project will allow for effective health promotion and that through this project, Kentfield residents and the City of Stockton will gain access to a guide for community change. The goal with this work is to provide information that will empower residents, health care providers, and the City of Stockton as they continue their work of structured change.



Background on the Kentfield Neighborhood

Background data (from the U.S. Census 2000) on the Kentfield neighborhood indicates that the community is highly impoverished and has been facing numerous challenges. The unemployment rate (8.1%) exceeds that for the city (7.3%) and the county (6.2%). In addition, over half of the neighborhood residents (54.6%) were not in the labor force compared to 41.1% city wide. It is important to point out that 6.8% of the neighborhoods' residents work in professional occupations compared to the much higher figures of 17.2% for the city and 16.0% for the county as a whole.

Over half of those that rent (58.0%) pay more than 30% of their income to rental costs; this compares to 50.0% for the city.

Many face excessive housing costs and overcrowded housing conditions. Specifically, 44.7% of rentals are overcrowded (with more than one person per room), compared to the citywide figure of 26.5%. The units are more likely to be older and are valued below those citywide.

One third of families (33.8%) were raised by single mothers, and nearly half (46.0%) were living below poverty level. Nearly two-thirds of children below 18 (61.0%) are poor. Both of these rates are roughly double compared to the rates for Stockton as a whole (Stockton's overall poverty rate being 23.9% and 33.0% of the city's children are classified as poor). This neighborhood also has the highest portion of households receiving public assistance.

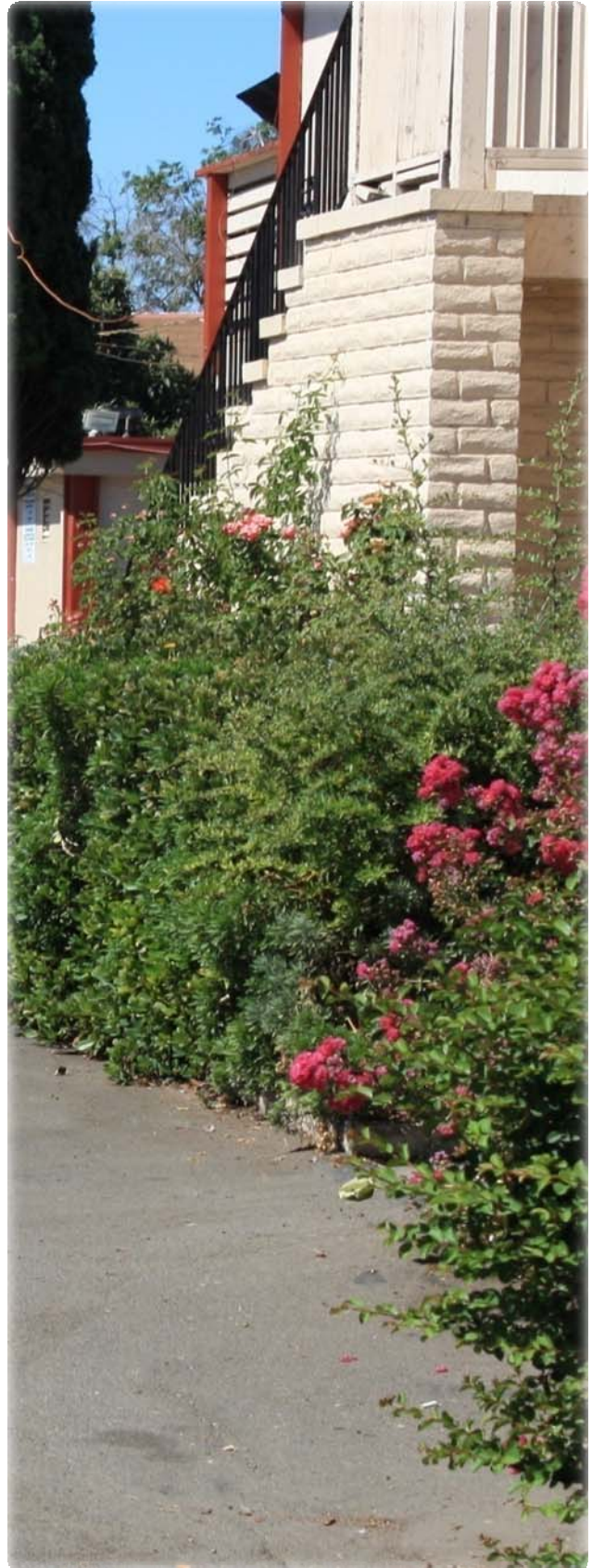
With respect to ethnicity, data indicates that 15.3% of residents are African American compared to 11.0% citywide. One-third of San Joaquin residence (30.5%) are Hispanic, the same is true in Stockton (32.2%) as well as in Kentfield (31.3%). Two in five residents in Kentfield (40.5%) were under 18.

Adult residents in Kentfield were more likely to have dropped out of school, be unemployed, or out of the labor force, and were far less likely to be employed in professional occupations. Households in the Kentfield neighborhood were also more likely to have single mothers, have incomes below \$25,000, live below the poverty level, and receive public assistance.

Kentfield is a highly unique area within Stockton. The heart of this highly dense region is found within the 95207 zip code. The population of this zip code tops 40,000 people. Within Kentfield the population is approximately 7,000. The overall Kentfield area begins at Calaveras River to the south and extends north to March Lane. The area then extends west to El Dorado and east to the Union Pacific Railroad tracks (UPRR). This community faces tremendous challenges with language barriers as a high percentage of Southeast Asian residents live in this area. Thus, many residents are isolated which prevents the development of strong social connection to neighbors (City of Stockton). In addition, Kentfield is home to a considerable refugee population.

The diverse population in Kentfield includes those who are Cambodian, Hmong, Laotian, Vietnamese, and Hispanic. A central goal of this health assessment was to have issues affecting these families identified so that health providers could effectively assist these families in need.

The aim of the work is to look into overall community health. For decades this area of Stockton has been plagued by a host of issues stemming from extreme poverty and the lack of life chances. In general, Stockton has been a regional hot spot for homicides, gang activity, and juvenile crime. Community data from this area of Stockton paints a picture of what is a very serious situation. There is also extremely high neighborhood transition and mobility. Along with the issue of renting versus owning, only 35.0% of the residents lived in the neighborhood five years ago. In addition, data from the Community Partnership for Families indicates that 24.0% of families coming into their Kentfield-based center do not have health insurance.





Community Assets

As part of a review of community assets, the research team facilitated a focus group with the project's Community Assessment Team. This group provided the following feedback about the strengths within the community:

- The Kentfield Action Team (KAT)
- The church in the Community
- The various non-profits serving the community:
 - Asian Pacific and Self-Development and Residential Association (APSARA)
 - Community Partnership for Families (CPF)
 - El Concilio
 - United Cambodian Families (UCF)
- The Stockton Police Department (Officer Loreen Gamboa and other officers)
- The City of Stockton
- The neighborhood park
- Specific community leaders
- Health partners
- Local schools
- Not identified during the focus group
 - National Night Out
 - New housing developments



Identification of Key Data Points and Health Needs in the Kentfield Neighborhood

With respect to ethnicity, data indicates dramatic differences between Kentfield and the City of Stockton. More specifically, Table 1 indicates that 36.6% of the Kentfield residents are Asian compared to 16.2% of the City of Stockton. In addition, 14.3% of Kentfield residents are African American compared to 9.2% for the City of Stockton.

Ethnicity	Stockton	Kentfield
	306,656	7,271
White	35.4%	12.1%
Black	9.2%	14.3%
Alaska Native	0.6%	0.3%
Asian	16.2%	36.6%
Native Hawaiian/Pacific Islander	0.3%	0.5%

With respect to age, data indicates that residents in Kentfield are younger, on average, as compared to the City of Stockton. In Figure 1 data indicates that the median age for females is 23.6 in Kentfield compared to 31.8 when looking at Stockton as a whole. The median age for males in Kentfield is 21.8 compared to 29.3.

Figure 1
Median Age of Males and Females in Stockton and Kentfield

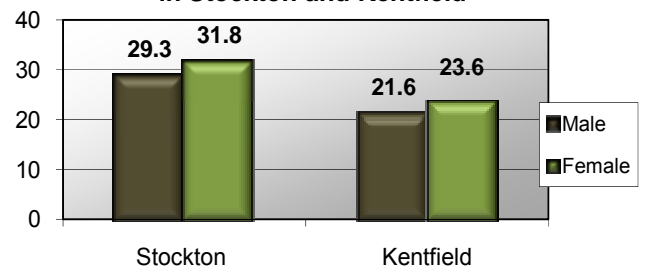
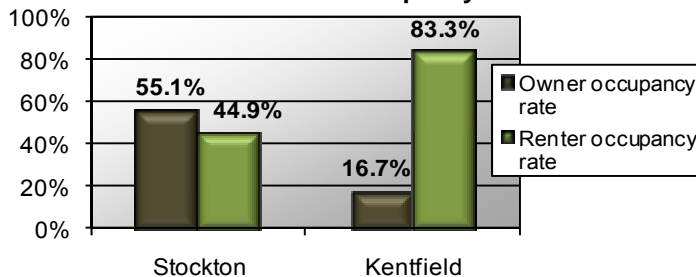
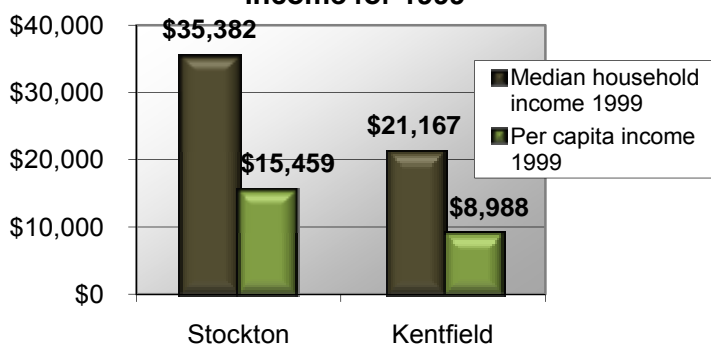


Figure 2
Owner vs. Renter Occupancy



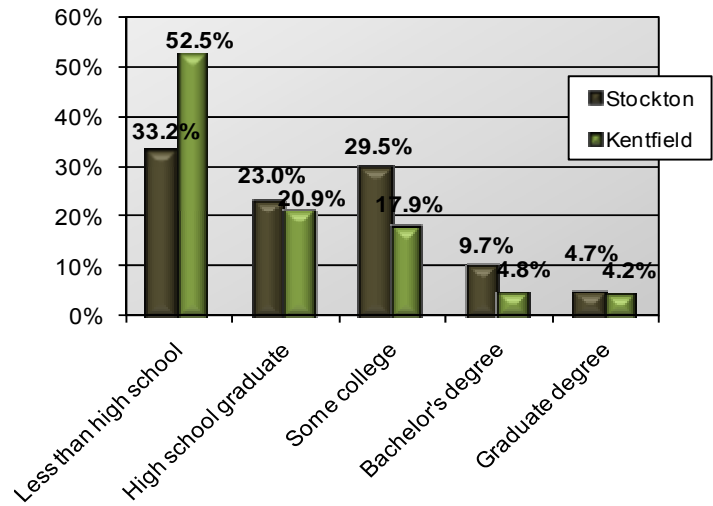
As was noted above, a high majority of the tenants in the Kentfield neighborhood rent versus own their homes. Data in Figure 2 indicates that 83.3% of Kentfield residents rent their homes compared to 44.9% of residents in the City of Stockton as a whole.

Figure 3
Median Household Income vs Per Capita income for 1999



Data in Figure 3 centers on median household income and per capita incomes and indicates that Kentfield faces serious issues around poverty. More specifically, the median household income for Kentfield was \$21,167 compared to \$35,382 for the City of Stockton. The per capita income for Kentfield was \$8,988 compared to \$15,453 for Stockton. In addition, over half of the households (57.0%) have incomes below \$25,000.

Figure 4
Educational Attainment
(population <25 years)

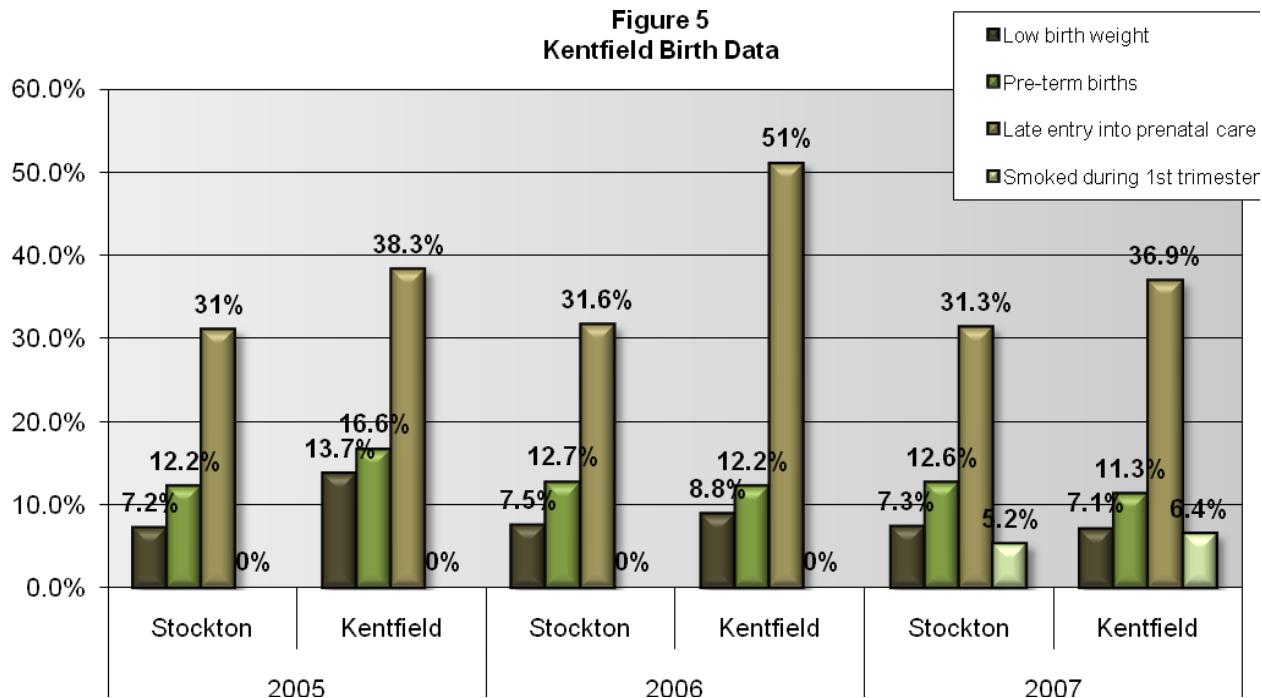


Data in Figure 4 on educational attainment indicates that over half (52.5%) of the residents in Kentfield (as compared to 33.2% in Stockton) have less than a high school education. Moreover, in the Kentfield area 73.4% of the residents have a high school education or less as compared to 52.5% in Stockton as a whole.

Table 2				
	BMI Data			
	20 years and older		Ages 13-19	
	Kentfield	Stockton	Kentfield	Stockton
Underweight	1.8%	3.4%	8.7%	3.0%
Normal	40.5%	41.3%	73.9%	64.3%
Overweight	27.9%	29.7%	8.7%	18.9%
Obese	29.7%	25.6%	8.7%	13.8%
Total Overweight or Obese	57.6%	55.3%	17.4%	32.7%

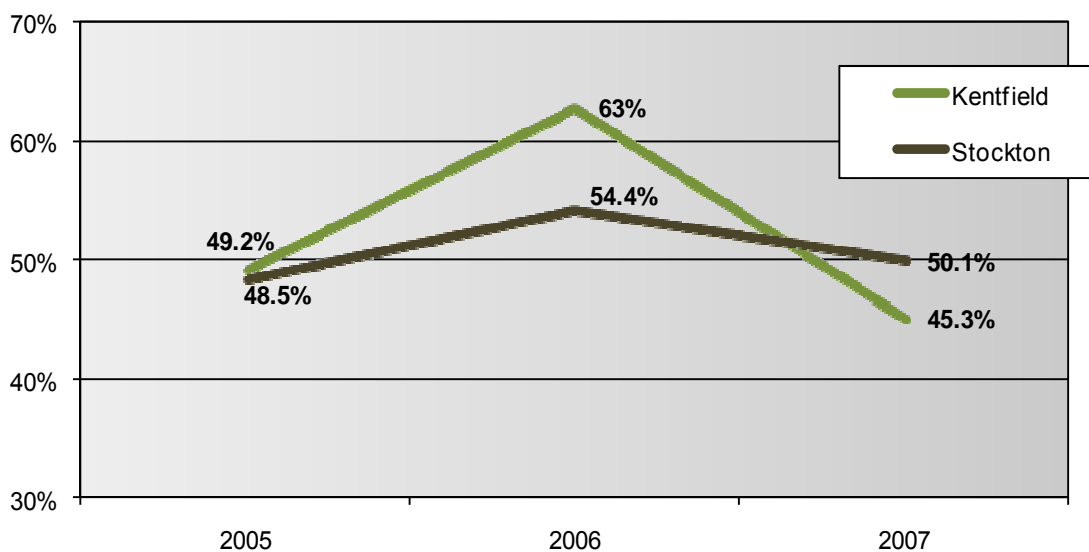
Data specific to body mass index (BMI) indicates that Kentfield residents 20 years of age or older have a slightly higher BMI (overweight or obese) than residents in Stockton (57.6% compared to 55.3%). Conversely, teenagers (residents 13 to 19) in Kentfield have considerably lower BMI rates than teenagers in Stockton as a whole (17.4% compared to 32.7% respectively).

**Figure 5
Kentfield Birth Data**



Findings in Figure 5 provide data on low-birth weight, pre-term births, late entry into prenatal care, and whether a mother smoked during the 1st trimester of pregnancy. While data findings are similar for Kentfield and Stockton in some cases, 2007 data indicate that the percentage of late entry into prenatal care is higher in Kentfield as compared to Stockton as a whole.

**Figure 6
Live Birth Rate for 13-19 year olds**





Kentfield has very high rates of Chlamydia and Gonorrhea. With respect to Chlamydia, the infection rate is 118.3 infections per 100,000 persons. The Kentfield census tract has the 6th highest Chlamydia rate in San Joaquin County.

Table 3 Chlamydia Infection Rate	
Census Tract	Chlamydia Rate (per 100,000)
22	173.8
1	155.5
6	144.4
3	130.1
8	124.6
33.09 (Kentfield)	118.3
25.02	117.0
23	115.4
4.02	114.4
25.01	107.3

In terms of Gonorrhea, the infection rate is 31.3 infections per 100,000 persons. The Kentfield census tract has the 7th highest Gonorrhea rate in San Joaquin County.

Table 4 Gonorrhea Infection Rate	
Census Tract	Gonorrhea Rate (per 100,000)
22	84.4
21	51.4
8	39.7
1	39.4
25.01	38.5
4.02	34.1
33.09 (Kentfield)	31.3
33.06	30.1
33.11	28.6
20	28.1

Kentfield Crime Data

The Stockton Police Department provided crime data for the Kentfield neighborhood from 2002 to 2008. Overall crime data is found to decrease dramatically from 2005 to 2008 from a high 546 total crimes to 256.

With respect to specific types of crime, Table 5 indicates that thefts were found to increase in 2008 from 59 in 2006 and 61 in 2007 to 68 in 2008. It should be added that while there were no arsons in 2006 and 2007 there were 2 in 2008. Table 6 provides crime data for 2008 by month. July 2008 had the highest crime total.

Table 7 provides data on calls for service to the Kentfield community. Calls for service were found to decrease from 2007 to 2008 from 3,879 to 3,283.

Table 5
Kentfield Crime Data (2002 – 2008)

Types of Crime	2002	2003	2004	2005	2006	2007	2008
Homicide	0	1	1	0	1	1	1
Rape	3	8	2	0	4	3	2
Robbery	26	24	27	56	32	54	24
Aggravated Assault	42	55	53	68	53	57	42
Domestic Violence	28	27	27	20	28	39	11
Burglary - Business	9	7	6	16	23	23	8
Burglary - Residential	43	54	49	104	53	63	36
Burglary - Auto	45	51	57	77	92	57	26
Theft	84	120	91	118	59	61	68
Auto Theft	81	82	85	84	71	55	36
Arson	4	0	1	3	0	0	2
TOTAL	365	429	399	546	416	413	256

Kentfield Crime Data, cont.

Table 6													
Kentfield Crime Data – 2008 by Month													
Types of Crime	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	TOTAL
Homicide	1	0	0	0	0	0	0	0	0	0	0	0	1
Rape	0	0	0	0	0	1	0	0	1	0	0	0	2
Robbery	1	1	1	2	1	1	6	1	2	2	4	2	24
Aggravated Assault	5	3	6	6	5	2	5	2	4	1	2	1	42
Domestic Violence	0	1	1	0	1	1	3	1	0	2	0	1	11
Burglary - Business	0	0	0	2	1	0	0	1	3	1	0	0	8
Burglary - Residential	2	1	3	6	3	4	4	3	0	2	3	5	36
Burglary - Auto	2	1	7	1	3	2	5	0	1	0	1	3	26
Theft	4	2	5	2	7	6	10	6	9	7	4	6	68
Auto Theft	6	4	3	0	3	3	4	5	2	1	3	2	36
Arson	0	0	0	1	1	0	0	0	0	0	0	0	2
TOTAL	21	13	26	20	25	20	37	19	22	16	17	20	256

Table 7													
Calls for Service in Kentfield													
2002 – 2008													
Year	Month												Total
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
2002	316	283	310	356	357	310	319	370	329	326	313	372	3961
2003	290	238	356	337	331	315	348	326	333	344	278	310	3806
2004	365	320	337	316	328	317	342	399	409	334	322	325	4114
2005	289	309	383	406	396	394	419	422	423	451	382	332	4606
2006	360	299	341	328	323	347	323	333	329	338	275	269	3865
2007	311	280	328	346	376	308	355	307	292	330	324	322	3879
2008	277	269	274	310	303	261	385	270	257	250	229	198	3283
Totals	2208	1998	2329	2399	2414	2252	2491	2427	2372	2373	2123	2128	27,514



Community Survey

In order to obtain primary (or firsthand, original) data from Kentfield community residents on global community health and personal health, the research team disseminated a community survey to Kentfield residents.

This survey was designed in collaboration with the Community Assessment Team. In addition, the research team adopted specific measures from the 2008 San Joaquin County Community Health Assessment (SJCCHA) in order to include measures had been used in an overall county survey.

The survey (found in this work's appendix) included global issues on health such as perceptions of safety, neighborhood concerns (such as domestic violence, drug-related crime, property crime, etc.), housing, the relationship with the police department, street safety, etc. In addition, the survey included questions on personal health and respondents' demographic background.

The survey was mailed out to residents in houses, duplexes, triplexes and a telephone survey method was used for the neighborhood's apartment complex areas. For the telephone survey work we partnered with the Harold S. Jacoby Center for Public Service and Civic Leadership at the University of the Pacific.

Demographics of Survey Participants

- 60.3% of the participants were female and 39.7% were male
- Average age was 45.7 years old
- Employment status
 - Full-time: 25.6%
 - Part-time: 12.0%
 - Unemployed: 14.3%
 - Retired: 24.8%
 - Other: 23.3%
- Renting versus owning
 - Rent: 57.4%
 - Own: 42.6%
- People in household
 - 3 (14.4%)
 - 2 (20.5%)
 - 1 (15.1%)
 - 4 (19.9%)
 - 5 (16.4%)
 - 6 or more (13.8%)
- Time living in Kentfield
 - Median: 9 years
 - Range: 1 month to 45 years
 - Mode: 1 year
- Primary mode of transportation
 - Personal car (84.4%)
 - Walking (4.8%)
 - Bus (3.4)
 - Other (7.5%)



Survey Sample

The total number of surveys we collected was 150. While not scientifically representative, the data was drawn from a random sample in the case of mailed surveys. In addition, telephone survey work centered on comprehensive phone list. Thus, data from this survey should be viewed as meaningful for the community to study. The confidence interval for the work is approximately 8.0%.

Additional Participant Background Data

In terms of ethnicity, 29.7% of the Kentfield survey respondents were Asian, 26.9% were Hispanic, 16.6% were White, 8.3% were Black, 13.8% were multi-ethnic, and 4.9% were another ethnicity. Table 8 indicates that while the survey is not fully representative of each ethnic group living in Kentfield, important and sizeable percentages of respondents were from the Asian and Hispanic populations.

Figure 7
Ethnicity of Survey Respondents

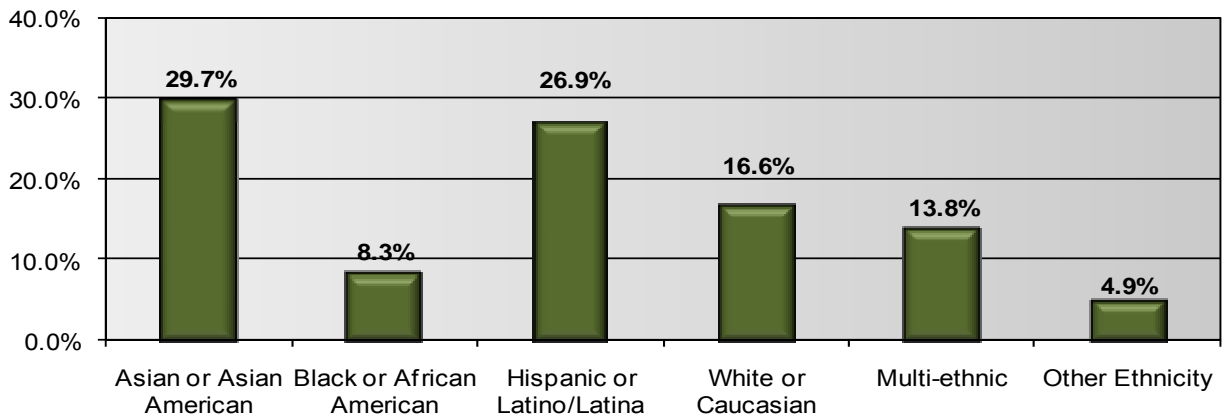
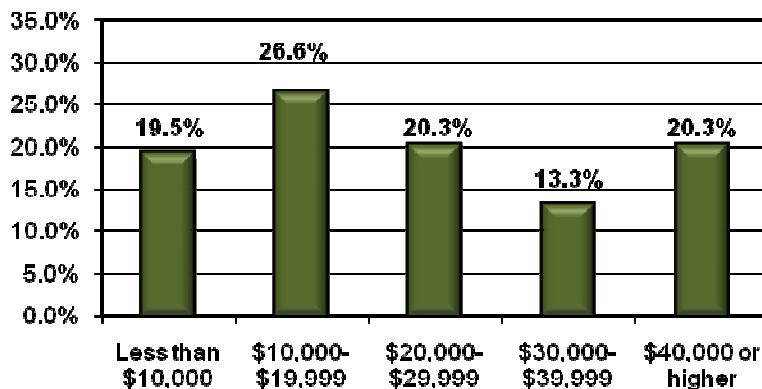


Table 8		
Overall Kentfield Demographics vs. Survey Respondents		
	Kentfield	Survey Respondents
Total population	7,271	145
White	12.1%	16.6%
Black	14.3%	8.3%
AI/Alaska Native	0.3%	0.7%
Asian	36.6%	29.7%
NH/PI	0.5%	1.4%
Hispanic	32.7%	26.9%

Figure 8
Annual Household Income



With respect to Figure 8 and the income of survey respondents, data findings indicate that 46.1% of participants had an annual household income of less than \$20,000. Data on employment status is found in Figure 9. These data show that 18.8% of respondents were unemployed at the time of the survey. Data from the SJCCHA, 2008, indicated that 13.8% of the population in Stockton and 12.0% of the county population earned less than \$20,000.

Figure 9
What is your employment status?

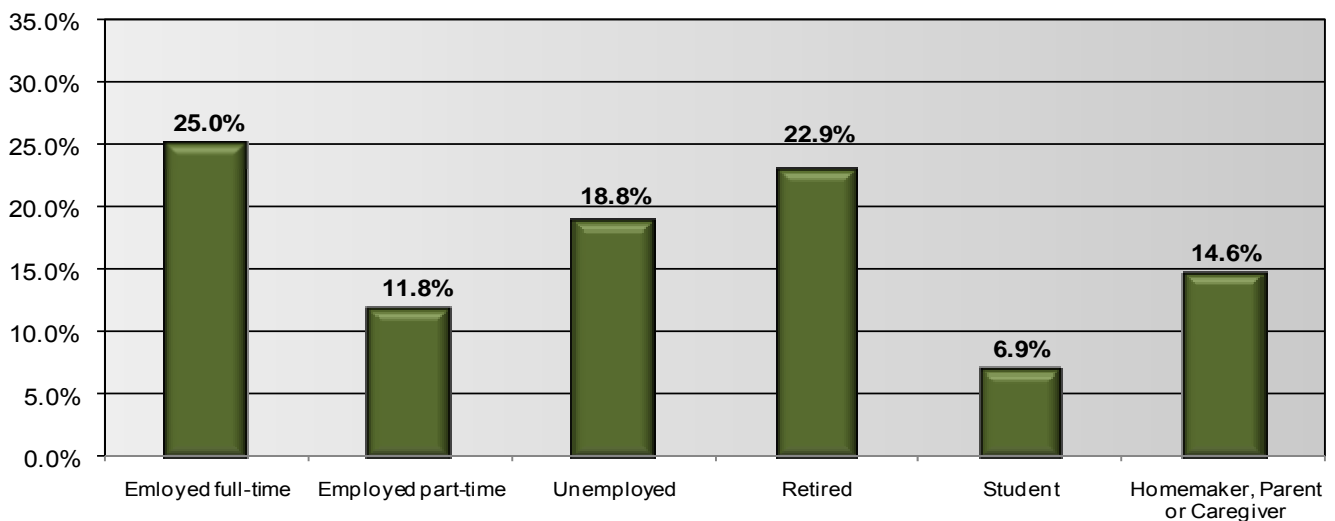
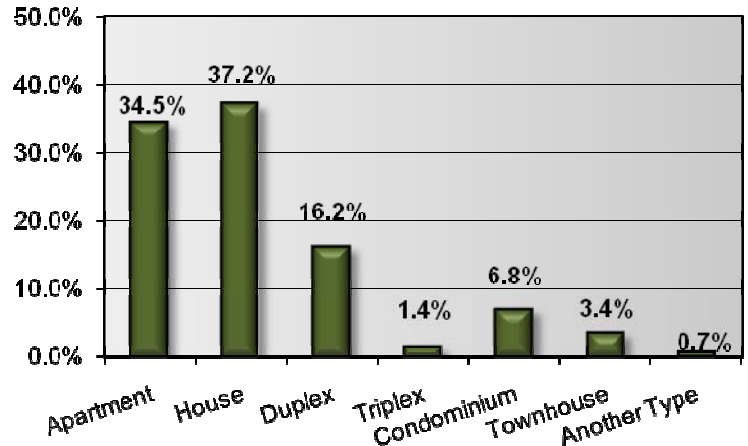


Figure 10
What type of home do you live in?



Data in Figure 10 indicates that 37.2% of respondents lived in a house, 34.6% lived in an apartment and 16.2% lived in a duplex. Additional survey data indicated that 57.4% of participants were renters and 42.6% owned their residence. It is important to note that Census tract data on Kentfield indicates that 83.3% of Kentfield residents rent their place of residence.

Community Problems, Key Needs, and Key Strengths

Figures 11 and 12 indicate the key issues that were identified by survey respondents. These include: gangs, vandalism, graffiti, drug abuse, drug-related crime, alcohol abuse, and violent crime.

- Asian, Black, Hispanic, and multi-ethnic respondents were more concerned about alcohol abuse than were white respondents.
- Black, Hispanic, and multi-ethnic respondents were more concerned about drug abuse than were white respondents.
- Retired residents were more concerned about drug abuse as compared to respondents with a different employment status.
- Black and multi-ethnic respondents were more concerned about gangs than other ethnic groups.
- Homeowners were more concerned about drug-related crime and graffiti as compared to renters.
- Renters were more concerned with access to schools, transportation to schools, and garbage dumping as compared to homeowners.

Figure 11
Key Issues in Neighborhood

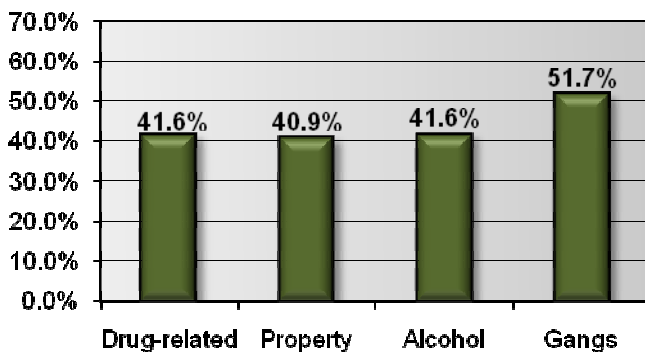


Figure 12
Key Issues in Neighborhood

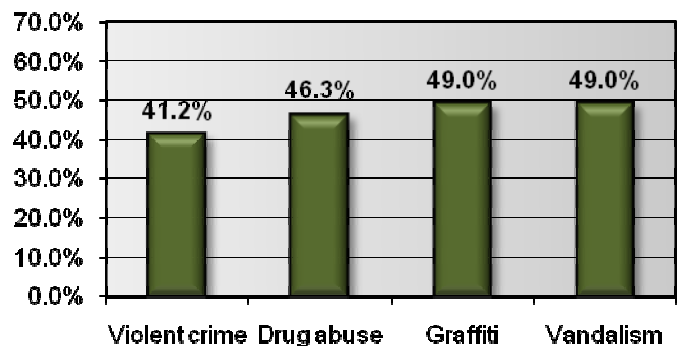




Figure 13 and 14 identifies a set of key needs within the Kentfield community. These are:

- Kentfield needs more community resources.
- Kentfield needs a neighborhood watch program.
- Cars drive too fast in Kentfield.
- The majority of survey respondents do not feel safe walking in the neighborhood after dark.
 - Female participants were more concerned about this issue as compared to men (75.6% of females compared to 51.8% of men).
- The majority of participants would move out of Kentfield if given the chance.
- Pedestrian safety is a problem in Kentfield.
- There is a need for adequate places for children to play in Kentfield.
 - Female participants were more concerned about this issue as compared to men.
- Park safety is a concern.

Figure 13
Key Needs in the Kentfield Community
Percent Disagreeing or Strongly Disagreeing

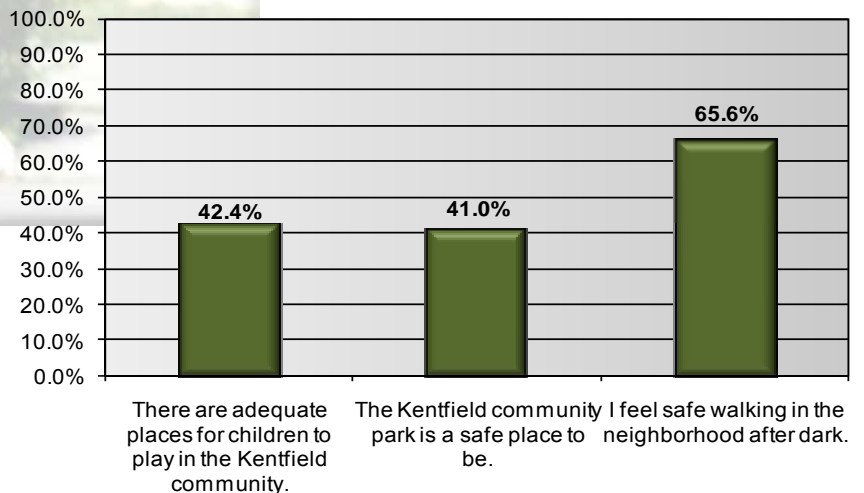
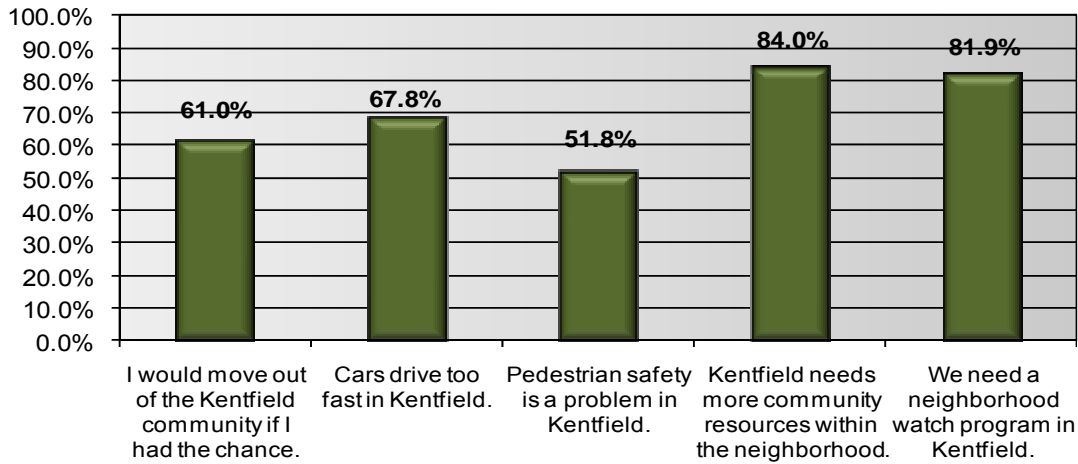


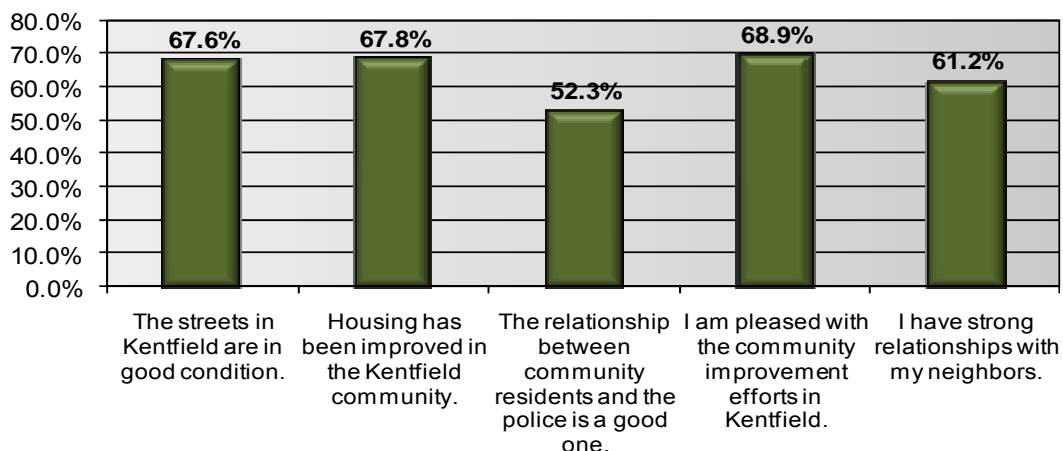
Figure 14
Key Needs in the Kentfield Community
Percent Agreeing or Strongly Agreeing



Along with the needs within the community, respondents noted that the following are strengths within the community:

- The community improvement efforts.
- Housing improvements.
- The streets are in good condition.
- Strong relationships with neighbors.
- The relationship between the residents and the police is a good one.
 - Homemakers, parents, caregivers and retired respondents were more likely to think that the relationship with the police is a good one.

Figure 15
Strengths in the Kentfield Community
Percent Agreeing or Strongly Agreeing





25.0% of respondents cannot find fruit and vegetables of good quality within walking distance of their home.

Health Issues in Kentfield

- 75.1% of survey respondents had health insurance; however, part-time and unemployed residents were less likely to have health coverage.
- 39.0% of respondents did not exercise in the last 7 days of the survey.
- 37.1% had been diagnosed with high blood pressure.
- 34.7% had been diagnosed with high cholesterol.
 - Retired respondents were more likely to have been diagnosed with high blood pressure, high cholesterol, and heart disease.
- One third (33.3%) of respondents' children do not have dental insurance.
- 29.7% had eaten less than they should have because there was not enough money to buy food.
- Homemakers, parents, or caregivers along with unemployed residents were more likely to have eaten less due to money concerns.
- 26.0% of respondents had not visited the dentist for two or more years; 3.4% had never gone to the dentist.
 - Women indicated that they went to the dentist more often than men.
- 25.0% of respondents cannot find fruit and vegetables of good quality within walking distance of their home.
- 24.1% had gone without basic needs.
- 18.8% had used the emergency room as their main source of health care.

Figure 16
Key Health Issues
Percentage Answering 'No'

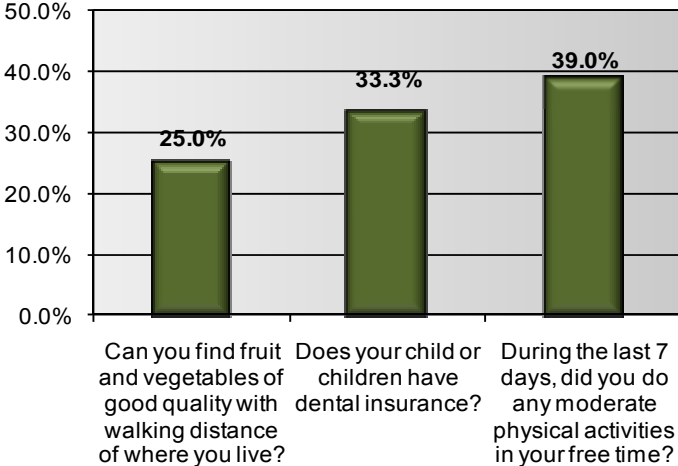


Figure 17
How long has it been since you last visited a dentist, oral hygienist, or orthodontist?

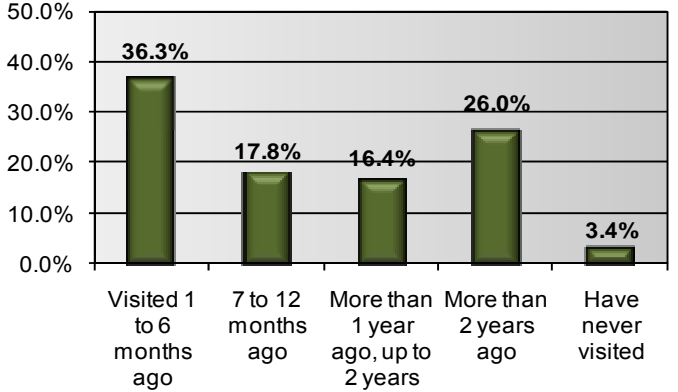


Figure 18
Key Health Issues
Percent Answering 'Yes'

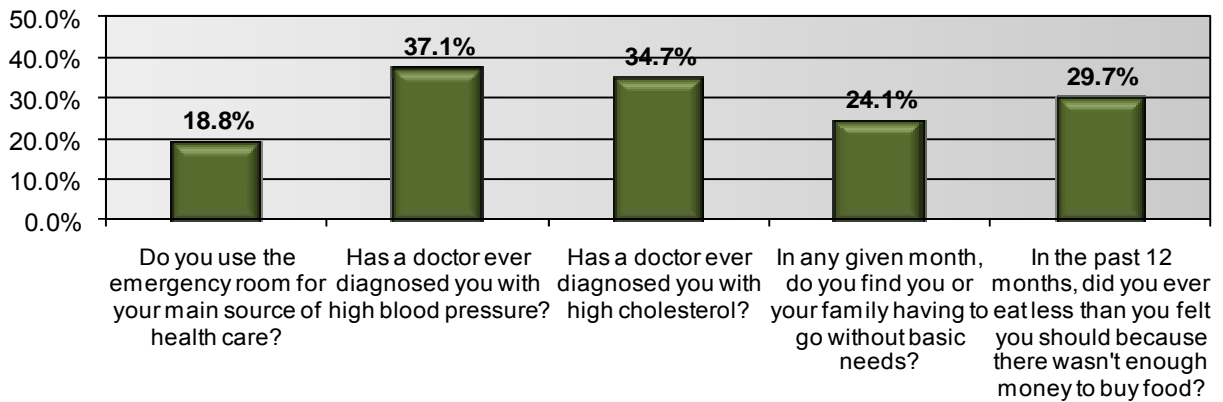
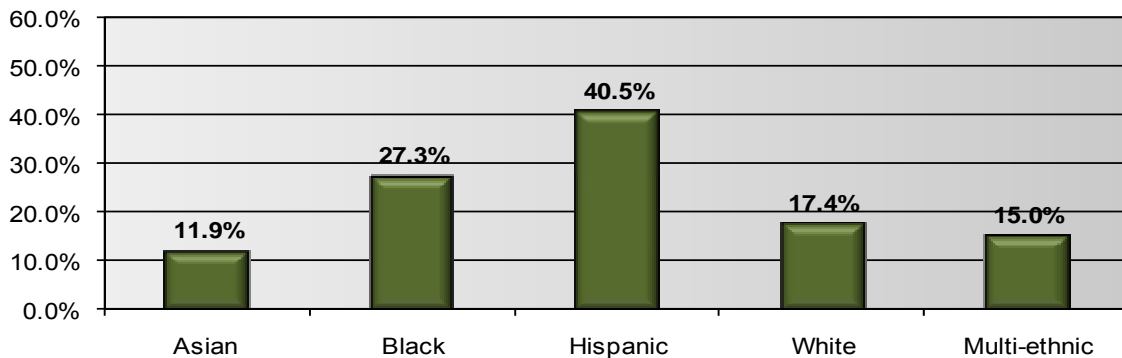


Table 9
Data Findings on Health Care – Children

Survey Items	Percent Answering 'Yes'
Does your child or children currently have health coverage?	75.9%
Does your child or children get annual health exams (physicals)?	73.8%
Does your child or children have dental insurance?	64.3%
Has your child or children ever been diagnosed with asthma?	23.8%
Has a doctor ever diagnosed any of your children with diabetes or sugar diabetes?	3.5%

Figure 19
Respondents Without a Primary Care Physician/Ethnicity





Respondents earning less than \$10,000 per year were more likely to indicate that they had difficulty with transportation to a health care provider.

Figure 20
Difficulty with Transportation to a Health Care Provider
Annual Household Income

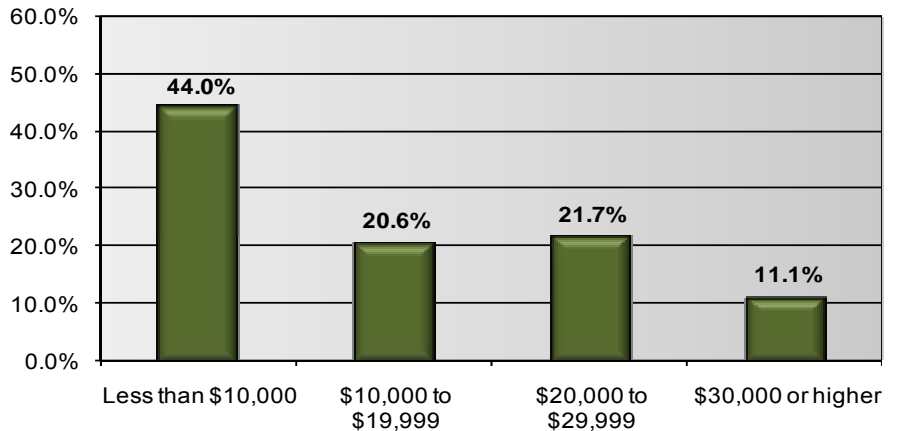


Figure 21
Would you say that, in general, your physical health is:

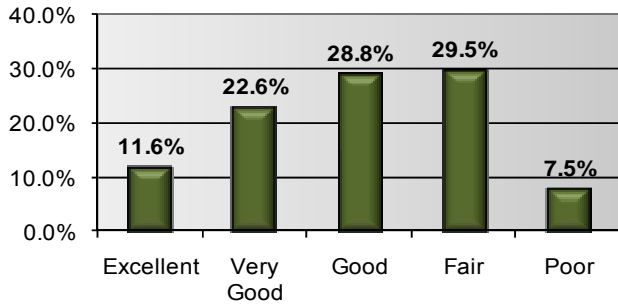
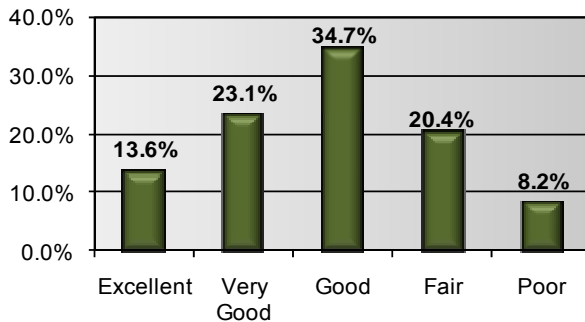


Figure 22
Would you say, in general, your mental health is:



Data on the perceptions of physical health indicate that 63.0% of respondents felt that their physical health was good, very good, or excellent. With respect to mental health, 71.4% of respondents felt their mental health was good, very good, or excellent.

Feedback from Unemployed Residents:

A range of data indicates particular health concerns for residents who are unemployed. Unemployed residents were more likely to:

- Not have a primary care physician.
- Note that their mental health was fair or poor.
- Note that their children did not get annual health exams.
- Have not gone to a dentist in over 2 years.
- Have gone without basic needs (this is along with homemakers, parents, and caregivers).
- Smoke every day.

In addition, unemployed respondents were the least likely to agree that they were pleased with community improvement efforts.

Renters Compared to Owners

Key differences were found to exist between renters and owners. Renters were more likely to:

- Have children under the age of 18 living with them.
- Not have health insurance.
- Not have a primary care physician.
- Have difficulty with transportation to a health care provider.
- Use the emergency room as their main source of health care.
- Have gone without basic needs.
- Have eaten less because there wasn't enough money to buy food.
- Indicate that their mental health is either fair or poor.

Owners were more likely to:

- Have been diagnosed with high cholesterol.

Body Mass Index (BMI)

Data on the Body Mass Index (BMI) indicated that the average BMI for respondents was 28.1 which is a reading in the overweight category. The average height was 5 feet, 4 inches and the average weight was 164 pounds.



What is needed in the Kentfield to improve health for you, your family, or the community?

- Health programs
 - Health care system (2)
 - Mobile health check-ups
 - Clinics (5)
 - Free/low cost clinic
 - Have more clinics so it'll be closer
 - Mobile health clinic
 - Transportation for disabled people
 - Public health care option from the government
 - Routine check-ups, and dental care
 - Free medical access
 - Better coverage
 - More doctors
 - Medical services; medical bills are too high.
 - Affordable health/dental care; Medicare only pays 80% and has no dental plan
 - Doctors introducing health care
 - Health programs
 - Dentists (2)
 - More medical benefits
- Additional programs/activities/resources
 - A place for hot lunches instead of downtown, hot meals on wheels, dining in Calavilla, hot foods
 - Need more adult social services and an emphasis on children's services
 - Kentfield and March Lane needs to be used as a place for children's programs; build a children's center there; need to fix the recreation center, after school programs and a community center is needed
 - Affordable, less red tape, health and job programs
 - A lot more programs
 - Playground, pool
 - Nutrition for community
 - More recreation areas for kids
 - Recreation association
 - We need another park at Kentfield because one of the swings is broken



- Police and safety

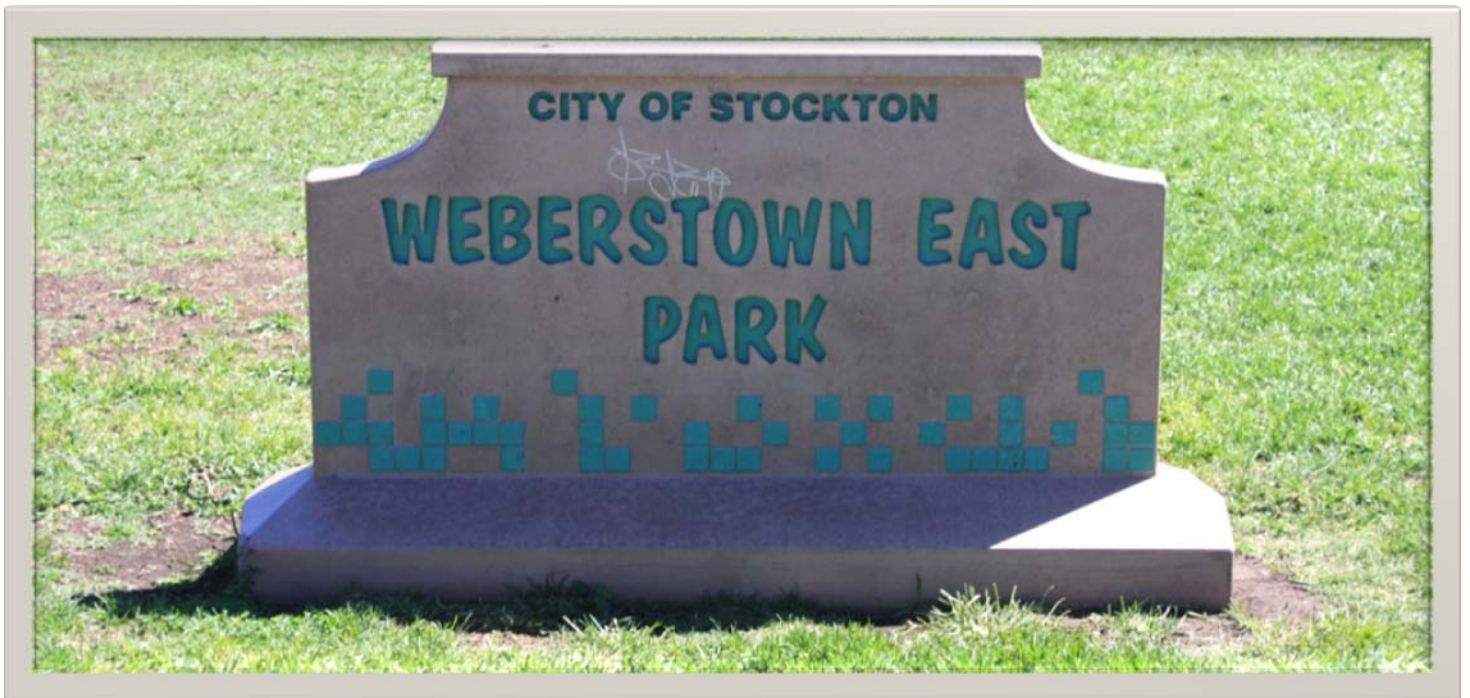
- Police officers (4), police station, security (5), night patrols, more guards especially at night and when kids get out of school, more police patrolling on a regular basis to control vandalism and graffiti
 - More security in the neighborhood
- More security guards when kids come out of school because they get beat up by bullies
- Police need to respond on 911 faster
- On-site gym or a safer route that leads to In Shape
- Fewer people driving through our neighborhood making donuts, speeding, crashing into garages and fences.
- Safety walking after dark
- Speeding cars
- Observation on drug usage and safety of kids
- Neighborhood watch (2)
 - Maybe a lookout person
- Lights because cars drive too fast, drug abuse: hopefully there's improvement

- More safety laws, police station
- No drug abuse, alcohol abuse, or polluting the air with cigarette smoke

- Issues that center on apartments

- Make sure new apartments have better clientele!
- Property owners and apartment owners need to maintain their yards and property (referring to 200-900 block of Bianchi Road) and keep an eye on renters. The renewed apartment complexes need to sustain long-term excellent property management skills in order to prohibit bad elements from arising and living there.
- Reduction of the percent of rental property
- Apartments needs remodeling
- Streets need work

- Roads
 - Also the embankment between Claremont and Sousa on Bianchi Road is in dire need of attention. The dirt embankment is not maintained, graffiti bound, looking shabby and unkept.
 - The islands located on Sousa and Claremont are hideous looking and dilapidated. The area on Bianchi near the railroad tracks is trashy and full of graffiti and hobos sit out and sleep there.
 - Speed bumps
 - Crosswalks on Jamestown and sidewalk
 - Walkways – make them more attractive for people to walk on.
- Additional comments
 - Resident spirit
 - More available and safe outdoor activities
 - Who owns the Bianchi Park? It needs to be cleaned up - clean up the dirty parks
 - Support
 - Insurance
 - More silence
 - A lot of dedicated work
 - Everything
 - Anything can help
 - Nothing, I want to move out too expensive



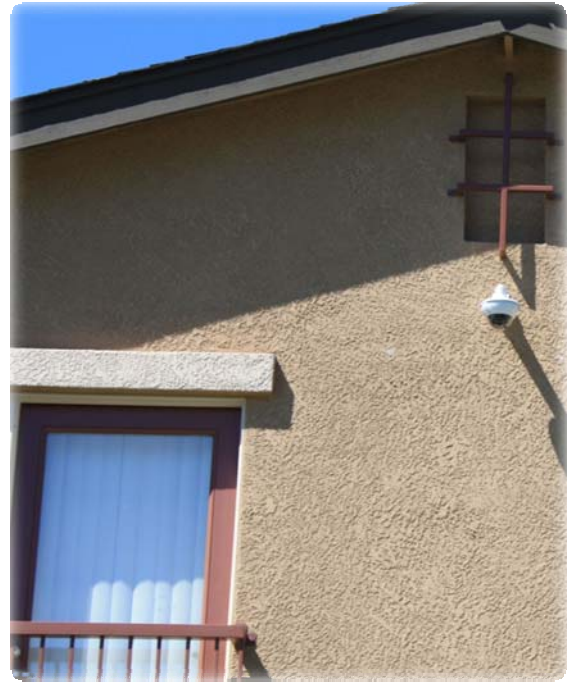
Hmong-Based Research Event

As part of the Kentfield Community Health Assessment effort, we attempted to hold a focus group for Hmong residents in Kentfield. Attendance at this event was sparse with only two adults and one juvenile providing feedback. However, we were able to gain some very important insights on the community. In the end, this research event could probably be better described as an interview. It should be noted that when the conversation first began, only one respondent was in attendance. Later in the conversation, others joined the meeting including some family members.

When asked, what kinds of problems the Kentfield neighborhood is facing, it was noted that there really wasn't any at the moment because many Hmong residents had just moved out of the community. This was a key finding to learn that the Hmong population in the community had recently changed. The main respondent noted that the previous problems had been:

- Children going out too much, always going out
- Car theft
 - Usually occurs at 5:00 a.m.
 - Batteries are stolen as well as anything that can be sold
 - It happens at least three times a year, sometimes once a month.
- Fighting
- Breaking fences

When asked whether or not gangs were a concern in the community, the main respondent noted that they were not a concern at the moment due to the note above about Hmong people moving out. He added that if more people moved back into the neighborhood, there would be more Hmong gangs. He added that youth aged 14 to 18



were more likely to get involved with gangs and that people aged 40 and over had no connection to gangs.

In terms of particular health issues facing the Kentfield neighborhood, it was noted that the health concerns centered on the elderly.

We asked about other issues that were affecting Hmong residents, it was noted that there are not enough Hmong residents in the area and that kids don't have friends of the same culture to play with. In addition, it was added that kids have a hard time making new friends from other cultures. For elders, they do not have other Hmong residents to visit and communicate with.

It was also added that there was no transportation for the elderly for appointments. The respondent noted that there was a need for the elders to teach the Hmong culture to the younger kids and a need to have programs and/or a facility for activities for the elderly.

He added that such a center could be used for language teaching. In fact, the respondent noted that main reason that he attended the research event was that he wanted to see such a cultural and language center in place. A second participant noted that she agreed with this idea.

- Other counties have programs but not in Kentfield, not even Stockton. As far as he knew Fresno and Sacramento have programs to help the Hmong community but not Stockton.

He noted that younger kids are not learning the Hmong language and that they could if there was a facility. This respondent added that the Hmong language is fading from the kids and that they are speaking a mixture of Hmong and English. It was also added that there was a need for afterschool programs so that children have something to do. Moreover, it was noted that an after school program would be beneficial for Hmong children so that they can learn the Hmong language and do homework. The respondent noted that the following were some of the strengths or good things about Kentfield:

- Shopping Centers
 - Food 4 Less
 - The mall
- A clinic is nearby
- Schools and a bus stop are nearby
- Kentfield is near Delta College
- Everything is close by so there's no need for transportation

Specific needs that were detailed were:

- A community building for the residents would be a good resource
 - The respondent did not know about the Villa Monterey building
- More outreach

When asked what else the respondent would like to add he noted:



As is noted above, one child provided some feedback at the event. While this child was too shy to offer feedback verbally she provided some written comments. These comments were:

- Are there particular health issues that are concerns in the Kentfield neighborhood?
 - No, because people don't give a damn whether or not the people that they know get hurt or shot.
- Are there particular issues that are affecting Hmong residents?
 - Yes, because we Hmong people might be hated by others by how we are or the problem they have with us in this neighborhood.
- Good things about the Kentfield neighborhood:
 - Your family is there for you and for the people...to protect or care for you.
- Resources to help community:
 - People need to learn of what they have in life [and] not to be someone that will be bad in life.
- Anything else to add?
 - People need to like one another...instead of hating.
 - People should be together as one...and not hate the people who ain't their kind.

Cambodian Community Expert, Savong Lam – Reflections and Observations on Kentfield and Resident Interviews:

For the Cambodian residents in Kentfield there is an importance of community, of staying together, being close-knit. The relationship with neighbors is strong.

Most of the Cambodian residents have health insurance...they have MediCal. The issue with health access with the residents is that they are going to two main doctors because the doctor either speaks Khmer or has a translator.

The majority of families are on disability. The parks are not kid-friendly as there are oftentimes older adults and older youth or gangs present. The concern with speeding comes up all the time.

Residents are concerned that there is no school in their area. This is a particular issue with respect to transportation to school. If a child misses the bus, the child might not be able to get to school.

Within the Cambodian culture people are quiet. They don't advocate. There is an acceptance of who people perceive as those in authority. There is a trust issue. The focus on a political process is not part of the Cambodian experience.

Appendix

Kentfield Community Health Needs Assessment

About the Kentfield Community:

1. Please indicate if any of the following are problems in the Kentfield community (check all that apply).

<input type="checkbox"/> Domestic Violence 28.9%	<input type="checkbox"/> Drug-related crime 41.6%	<input type="checkbox"/> Property crime 40.9%
<input type="checkbox"/> Alcohol abuse 41.6%	<input type="checkbox"/> Gangs 51.7%	<input type="checkbox"/> Violent crime 41.2%
<input type="checkbox"/> Drug abuse 46.3%	<input type="checkbox"/> Graffiti 49.0%	<input type="checkbox"/> Vandalism 49%
<input type="checkbox"/> Access to schools 28.2%	<input type="checkbox"/> Transportation to schools 30.2%	<input type="checkbox"/> Garbage dumping 33.6%
<input type="checkbox"/> Other problems: _____		

2. Do you feel safe in your neighborhood all of the time, most of the time, some of the time, or none of the time?

- All of the time 16.4%
- Most of the time 32.9%
- Some of the time 40.4%
- None of the time 10.3%

3. How clean or sanitary is the Kentfield neighborhood?

- Cleaner than most parts of Stockton 25.4%
- About the same as most parts of Stockton 62.0%
- Worse than most parts of Stockton 12.7%

4. Please indicate your level of agreement with respect to the following:

	Strongly Agree	Agree	Neither	Disagree	Strongly Disagree
The Kentfield community park is a safe place to be.	5.8%	25.9%	27.3%	23.7%	17.3%
The streets in the Kentfield community are in good condition.	6.9%	60.7%	11.7%	13.8%	6.9%
Housing has been improved in the Kentfield community.	15.1%	52.7%	19.9%	6.2%	6.2%
I feel safe walking in the neighborhood after dark.	5.4%	19.6%	9.5%	25.7%	39.9%
The relationship between community residents and the police is a good one.	12.2%	40.1%	23.8%	16.3%	7.5%
I am pleased with the community improvement efforts in Kentfield.	16.9%	52.0%	20.9%	7.4%	2.7%
Kentfield needs more community resources within the neighborhood.	32.6%	51.4%	13.9%	0.7%	1.4%
I have strong relationships with my neighbors.	22.4%	38.8%	17.0%	15.0%	6.8%
I would move out of the Kentfield community if I had the chance.	28.1%	32.9%	15.1%	16.4%	7.5%
There are adequate places for children to play in the Kentfield community.	4.9%	32.6%	20.1%	25.7%	16.7%
Cars drive too fast in Kentfield.	33.6%	34.2%	14.1%	12.1%	6.0%
Pedestrian safety is a problem in Kentfield.	25.9%	25.9%	25.2%	20.4%	2.7%
We need a neighborhood watch program in Kentfield.	43.6%	38.3%	10.1%	6.7%	1.3%

About Your Health and Well Being

5. Please answer the following questions that pertain to health.

	Yes	No	Don't Know
Have you needed health care in the last 12 months?	57.6%	41.0%	1.4%
If yes, were you able to receive the health care you needed?	74.3%	23.8%	1.9%
Do you currently have health insurance?	71.5%	27.1%	1.4%
Do you currently have your own doctor or primary care physician?	76.6%	23.4%	0.0%
The last time you saw a doctor, did you have a hard time understanding the doctor?	12.4%	86.2%	1.4%
Transportation to a health care provider is difficult for me.	20.8%	79.2%	0.0%
Do you use the emergency room for your main source of health care?	18.8%	79.2%	2.1%
Has a doctor ever diagnosed you with asthma?	11.7%	87.6%	0.7%
Has a doctor ever diagnosed you with diabetes or sugar diabetes?	16.0%	83.3%	0.7%
Has a doctor ever diagnosed you with high blood pressure?	37.1%	61.5%	1.4%
Has a doctor ever diagnosed you with high cholesterol?	34.7%	63.9%	1.4%
Has a doctor ever diagnosed you with any kind of heart disease?	11.9%	87.4%	0.7%
Do you travel out of San Joaquin County for health care?	11.0%	89.0%	0.0%
In any given month, do you find you or your family having to go without basic needs such as food, housing, child care, health care, or clothing?	24.1%	73.1%	2.8%
In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money to buy food?	29.7%	69.7%	0.7%
Can you find fruit and vegetables of good quality within walking distance of where you live?	73.5%	25.0%	1.5%
Do you have children living with you under the age of 18?	52.1%	47.1%	0.7%
If yes, please answer the five questions below.			
Does your child or children currently have health coverage?	75.9%	19.3%	4.8%
Does your child or children get annual health exams (physicals)?	73.8%	22.6%	3.6%
Does your child or children have dental insurance?	64.3%	33.3%	2.4%
Has your child or children ever been diagnosed with asthma?	23.8%	73.8%	2.4%
Has a doctor ever diagnosed any of your children with diabetes or sugar diabetes?	3.5%	94.1%	2.4%

6. Would you say that in general, your physical health is:

- Excellent 11.6% Very good 22.6% Good 28.8% Fair 29.5% Poor 7.5%

7. Would you say that in general, your mental health, which includes stress, depression, and problems with emotions, is:

- Excellent 13.6% Very good 23.1% Good 34.7% Fair 20.4% Poor 8.2%

8. How long has it been since you last visited a dentist, oral hygienist, or orthodontist?

- Have never visited 3.4%
 1 to 6 months ago 36.3%
 7 to 12 months ago 17.8%
 More than 1 year, up to 2 years ago 16.4%
 More than 2 years ago 26.0%

9. During the last 7 days, did you do any moderate physical activities in your free time for at least 10 minutes (moderate physical activities make you breathe somewhat harder than normal)?
- Yes 61% No 39%
 - 9a. If yes, on how many days did you do this? Average days = 4.2 days
10. Do you currently smoke cigarettes or cigars or use smokeless tobacco (chew, snuff)?
- Every day 16.6% Some days 6.1% Not at all 78.2%
11. Considering all types of alcoholic beverages, during the past 30 days about how many times did you have more than 5 drinks on one occasion? Average times = .65 times
12. How many times during the past 7 days have you eaten fast food (McDonald's, Wendy's, Burger King, Taco Bell, Domino's Pizza, etc.)? Average times = 1.6 times
13. How many times during the past 7 days has your child or children eaten fast food (McDonald's, Wendy's, Burger King, Taco Bell, Domino's Pizza, etc.)? Average times = 1.2 times
14. About how much do you weigh without shoes? Average weight = 162.1 pounds
15. About how tall are you without shoes? Average height = 5' 4"
16. What is needed in the Kentfield community to improve health for you, your family, or for the community?
-

Demographics/Background

17. Sex: Male 39.7% Female 60.3%
18. How old are you? Average age = 45.7
19. What is your ethnicity? (Please select one or more of the following)
- American Indian or Alaska Native 0.7%
 - Native Hawaiian or Pacific Islander 1.4%
 - Asian or Asian American 29.7%
 - Black or African American 8.3%
 - Hispanic or Latino/Latina 26.9%
 - White or Caucasian 16.6%
 - Multi-Ethnic, Describe: 13.8%
 - Other, Please Describe: 2.8%
20. What is your primary language? _____

21. Which income range best describes your **annual household** income?

- Less than \$10,000 19.5%
- \$10,000 to \$19,999 26.6%
- \$20,000 to \$29,999 20.3%
- \$30,000 to \$39,999 13.3%
- \$40,000 to \$49,999 7.8%
- \$50,000 to \$59,999 4.7%
- \$60,000 to \$69,999 3.9%
- \$70,000 to \$79,999 0.8%
- \$80,000 or higher 3.1%

22. What is your employment status (check all that apply)?

- Employed full-time 25.0%
- Employed part-time 11.8%
- Unemployed 18.8%
- Retired 22.9%
- Student 6.9%
- Homemaker, parent, caregiver 14.6%

23. Do you rent or own your place of residence? Rent 57.4% Own 42.6%

24. What type of home do you live in?

- Apartment 34.5%
- House 37.2%
- Duplex 16.2%
- Other: 12.3%

25. How many people are in your household? Average = 3.6 people per household

26. How many bedrooms are in your household? Average = 2.5 bedrooms

27. How long have you lived in the Kentfield neighborhood? Average = 12.6 years

28. What is your primary mode of transportation?

- Personal car 84.4%
- Motorcycle 0.0%
- Bicycle 0.7%
- Bus 3.4%
- Walk 4.8%
- Other: 6.8%

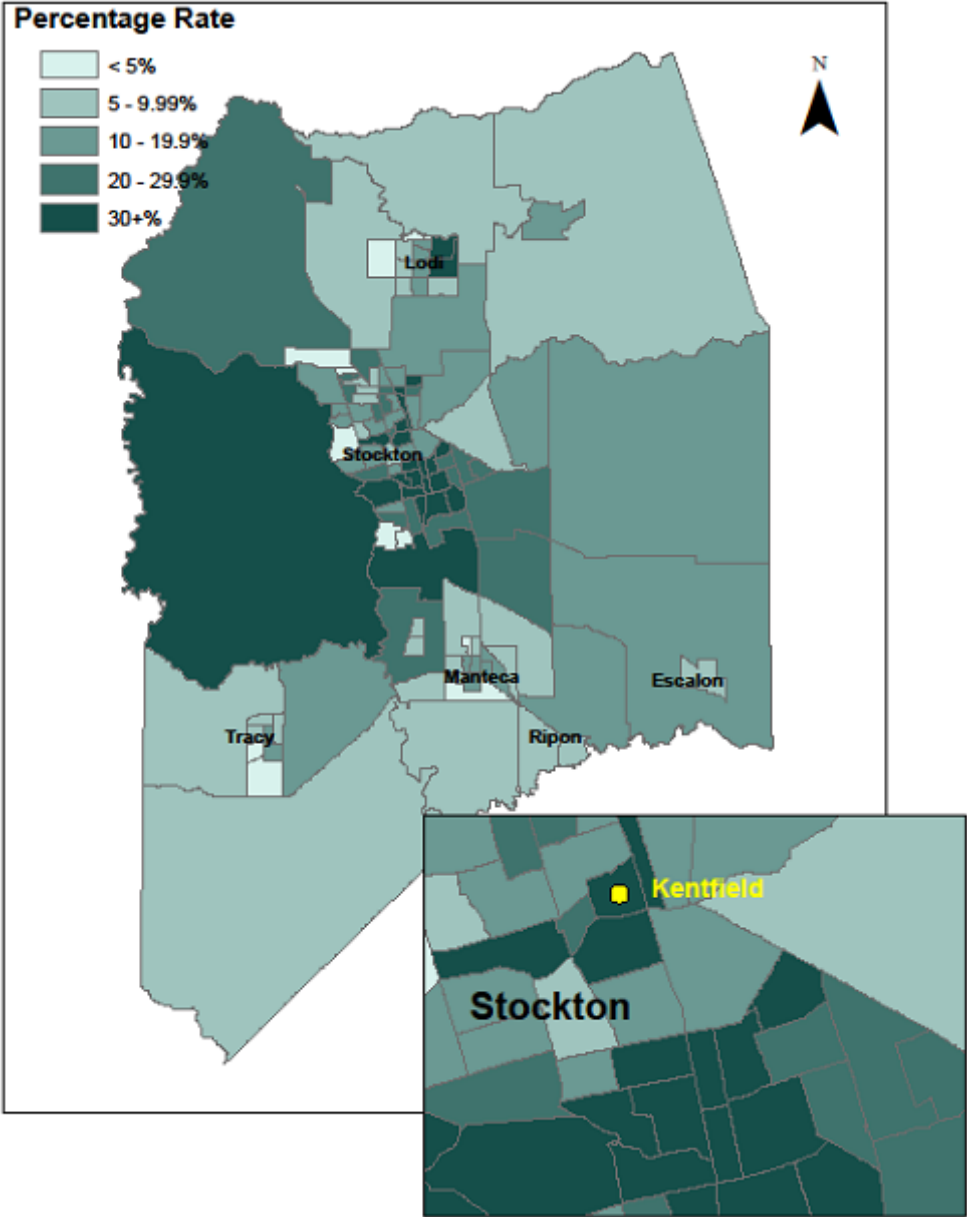
Optional

29. If you would like to be contacted to take part in a research conversation (focus group) about the Kentfield community please provide your name along with your phone number, e-mail, or address below:

Name: _____
Phone #: _____
E-mail: _____
Address: _____

Percent of Population Living in Poverty

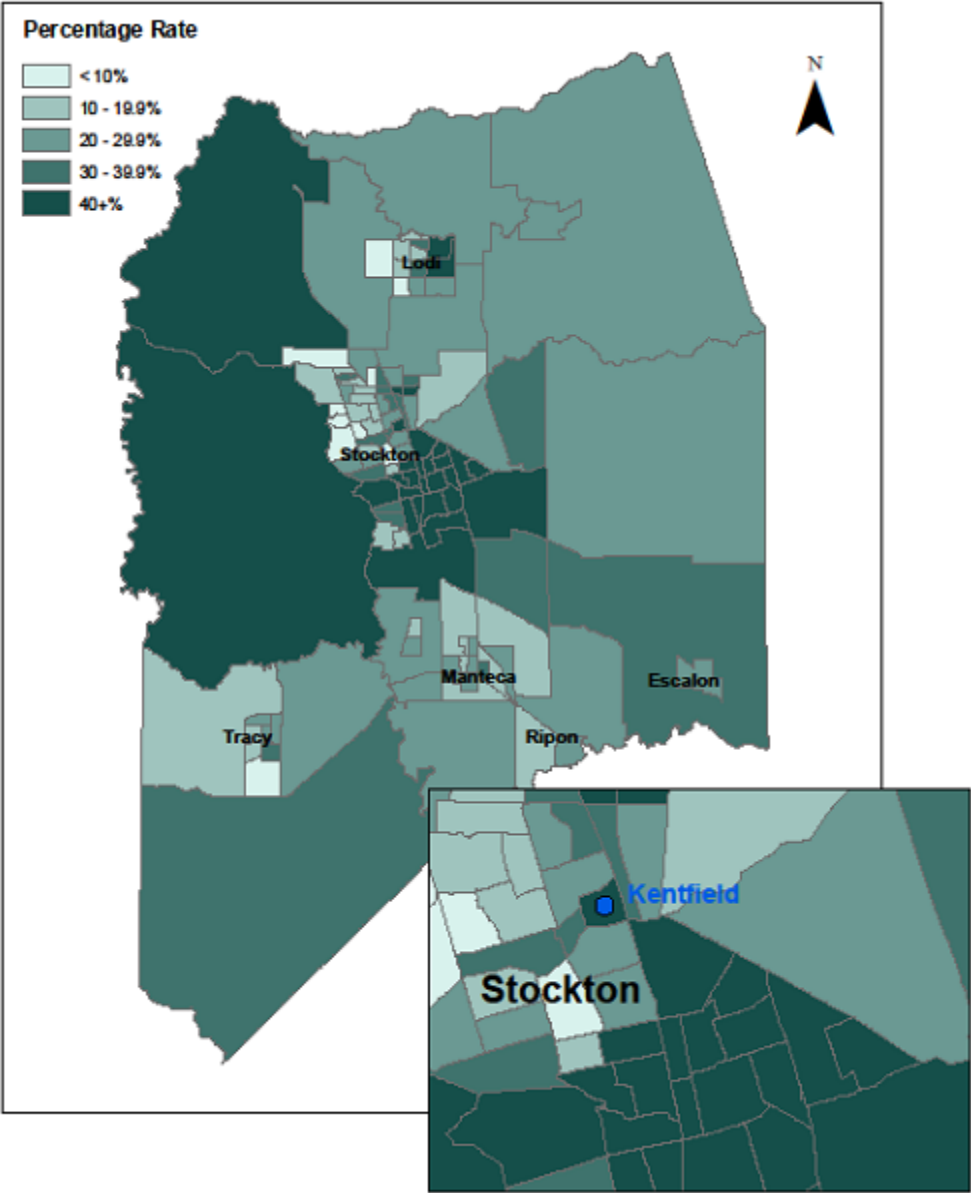
San Joaquin County, 2000



Source: Health related maps in this report were generated by San Joaquin County Public Health Services.

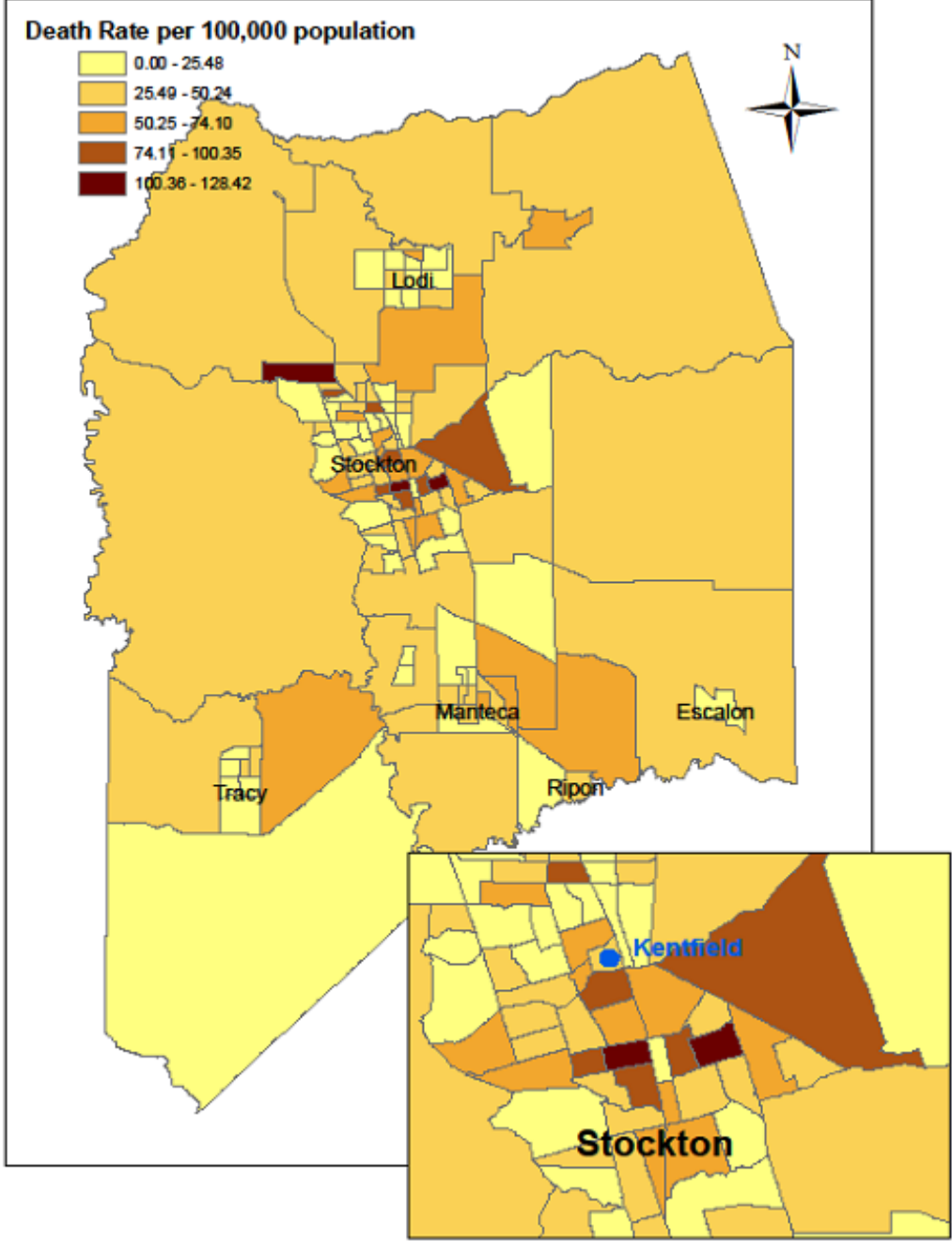
Percent of Adults (>25 years) with Less Than High School Education

San Joaquin County, 2000



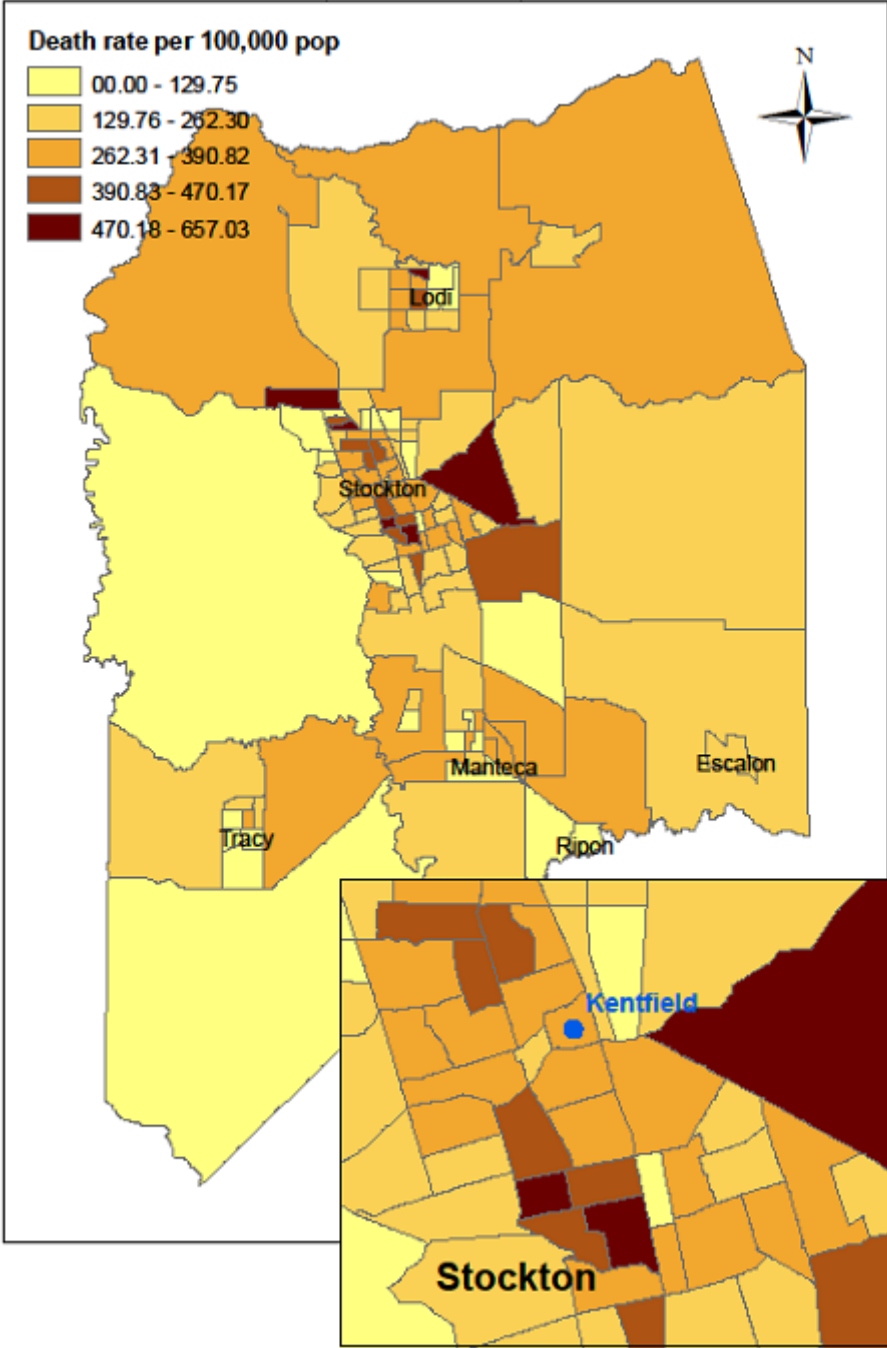
Diabetes Death Rates by Census Tract

San Joaquin County, 2005-2006



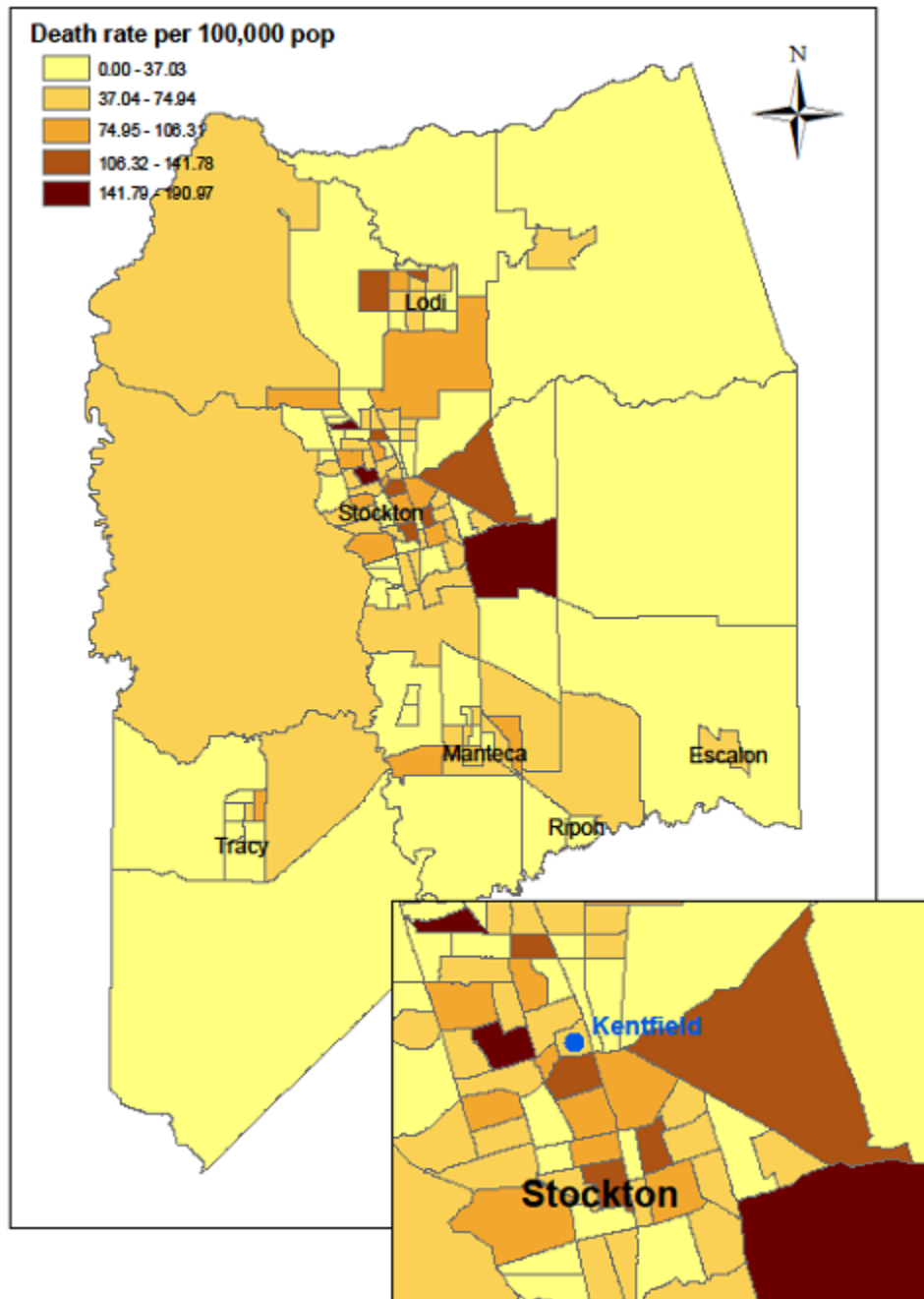
Heart Disease Death Rates by Census Tract

San Joaquin County, 2005-2006



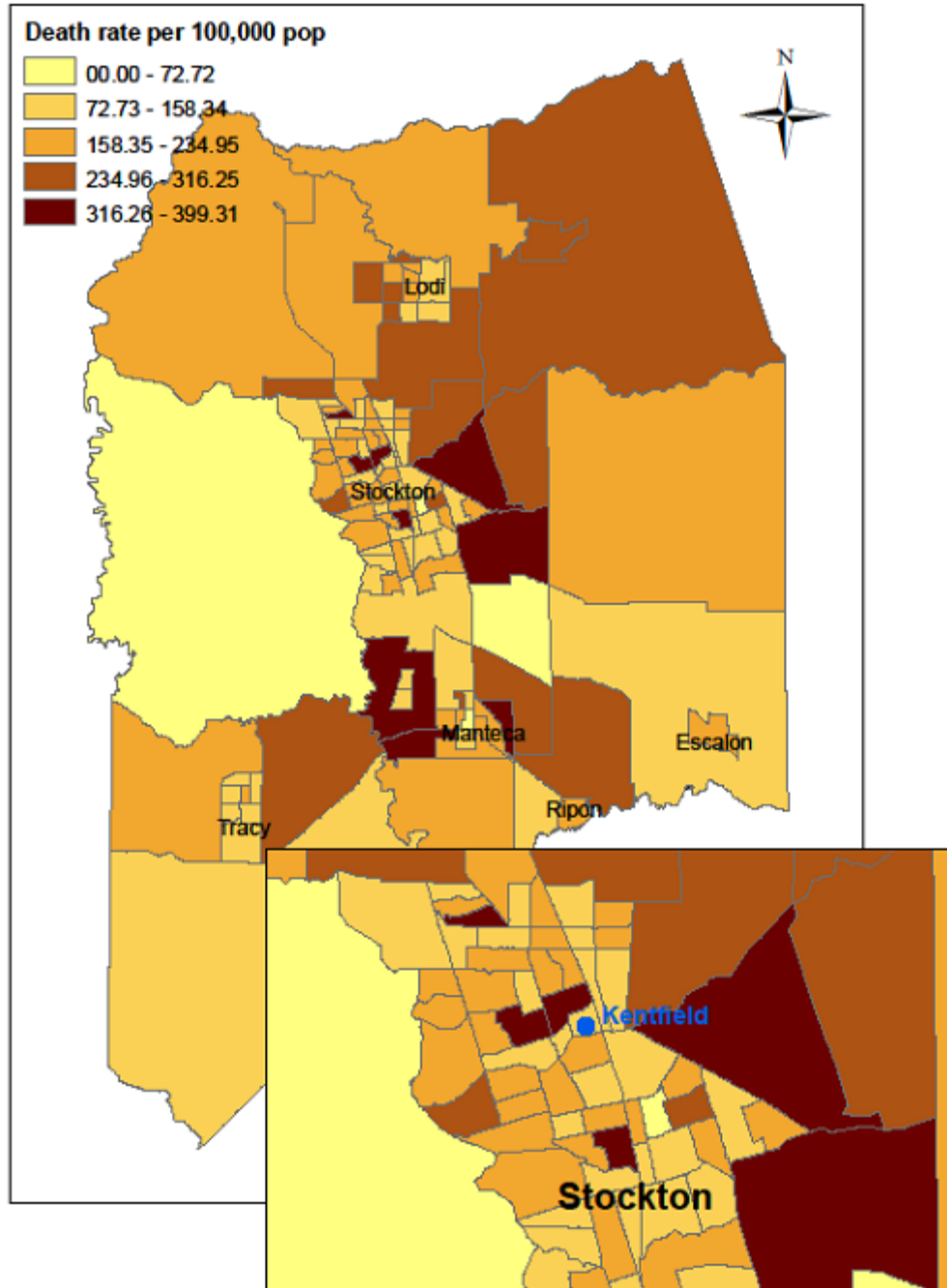
Chronic Lower Respiratory Disease Death Rates by Census Tract

San Joaquin County, 2005-2006



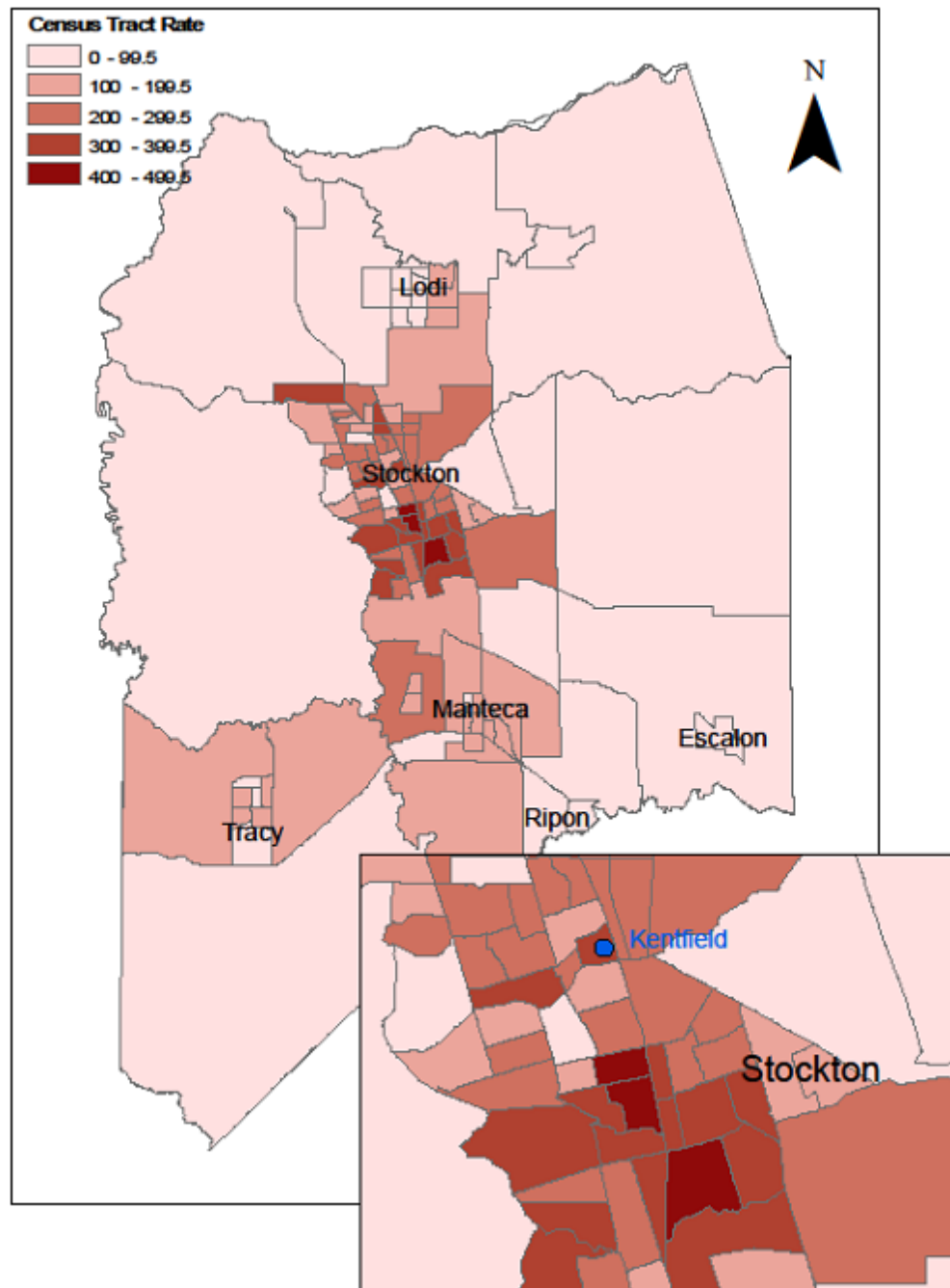
Cancer Death Rates by Census Tract

San Joaquin County, 2005-2006

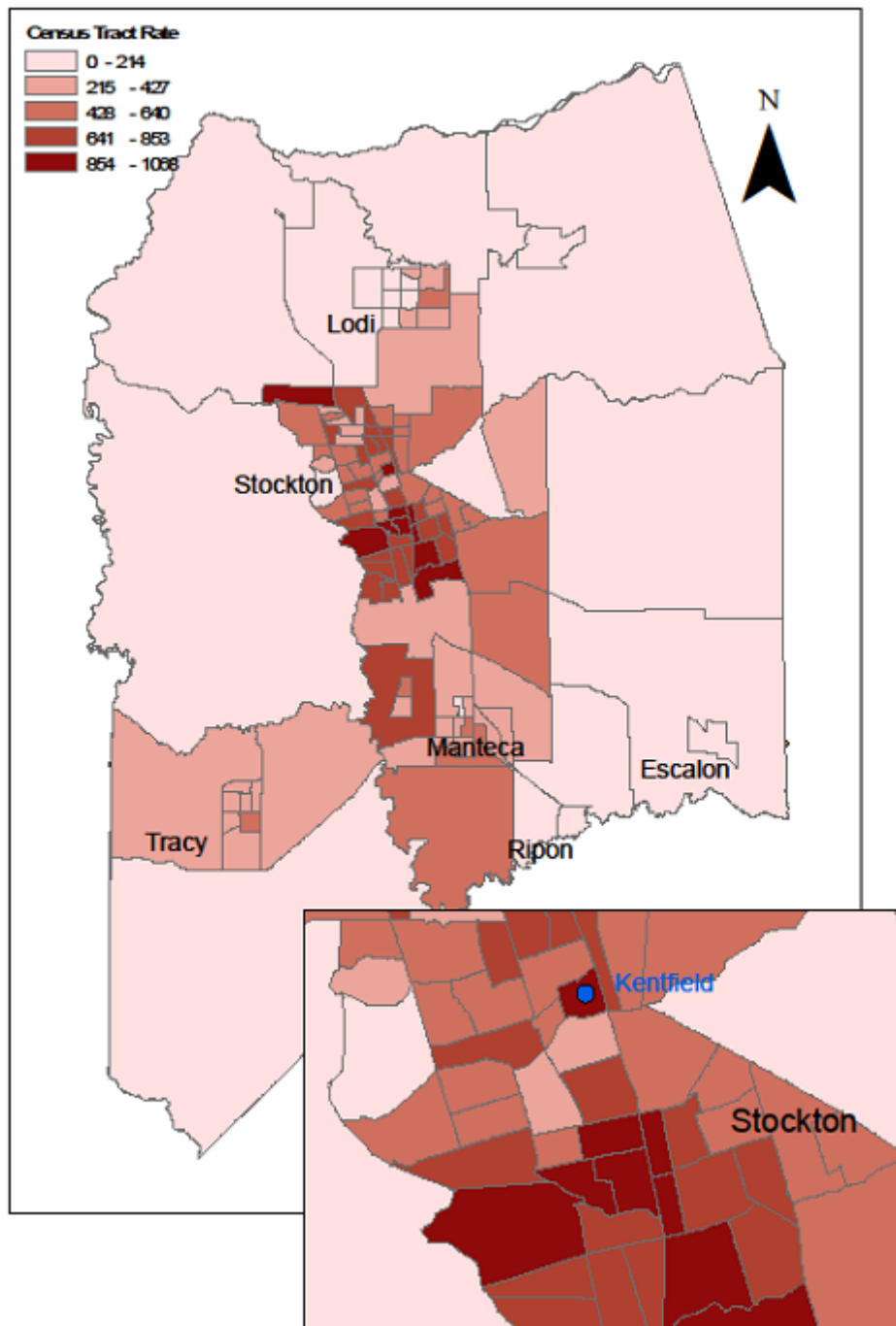


Gonorrhea Rates Per 100,000 Population

San Joaquin County, 1999-2008

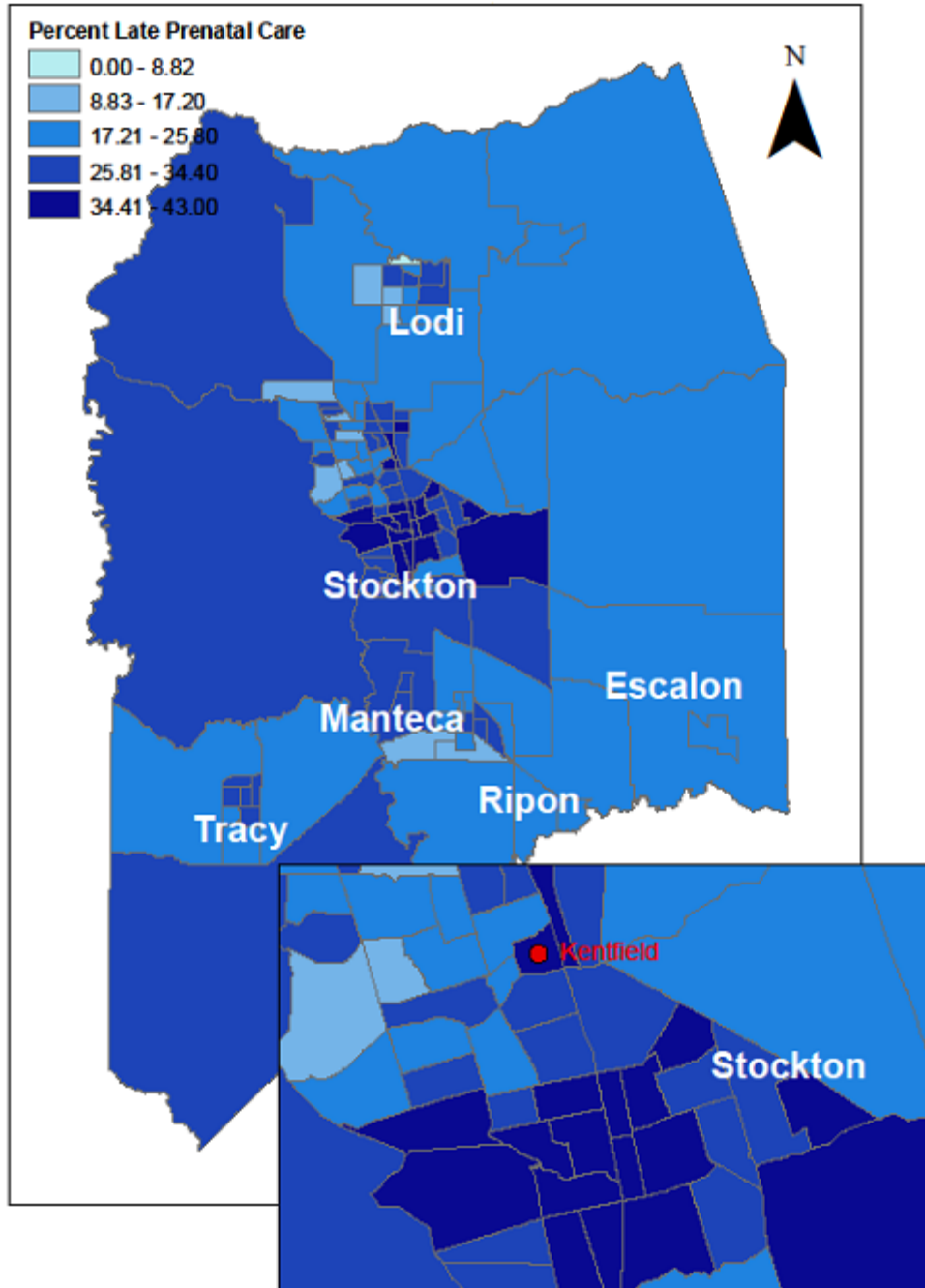


Chlamydia Rates Per 100,000 Population *San Joaquin County, 1999-2008*

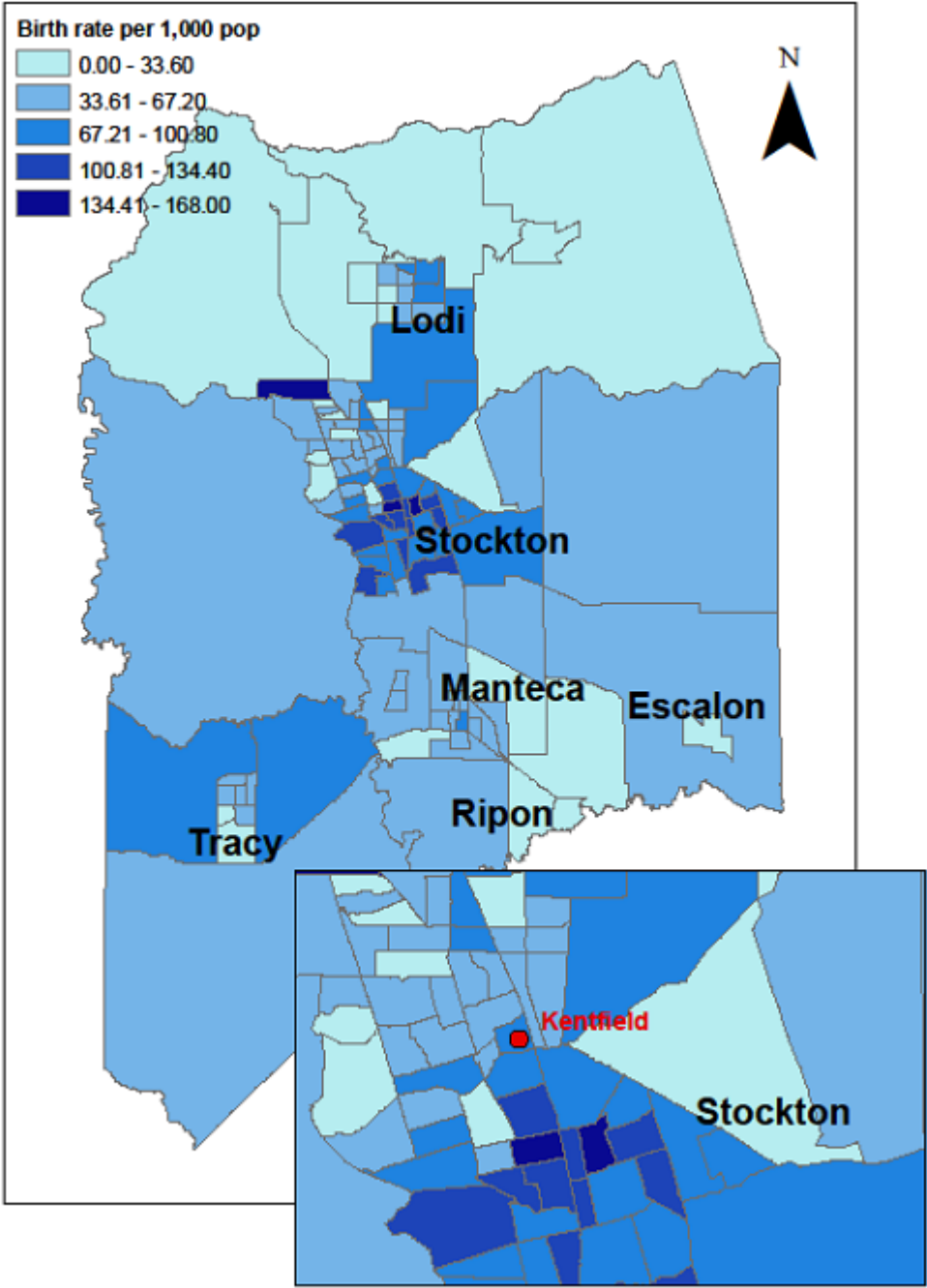


Percent of Women with Late Entry into Prenatal Care by Census Tract

San Joaquin County, 2006-2008



Live Birth Rate for 15-19 Year Olds by Census Tract *San Joaquin County, 2003-2008*



Census Data Comparisons

Stockton and Kentfield Demographics		
	Stockton	Kentfield
Total population	306,656	7,271
White	35.4%	12.1%
Black	9.2%	14.3%
AI/Alaska Native	0.6%	0.3%
Asian	16.2%	36.6%
NH/PI	0.3%	0.5%
Hispanic	34.1%	32.7%
Median age: Male	29.3	21.6
Median age: Female	31.8	23.6
Total # of households	98,287	2,028
Owner occupancy rate	55.1%	16.7%
Renter occupancy rate	44.9%	83.3%
Median household income in 1999 dollars	\$35,382	\$21,167
Per capita income in 1999 dollars	\$15,459	\$8,988
Educational attainment (population < 25 years)		
Less than high school	33.2%	52.5%
High school graduate	23.0%	20.9%
Some college	29.5%	17.5%
Bachelor's degree	9.7%	4.8%
Graduate degree	4.7%	4.2%

Census Data Comparisons, continued

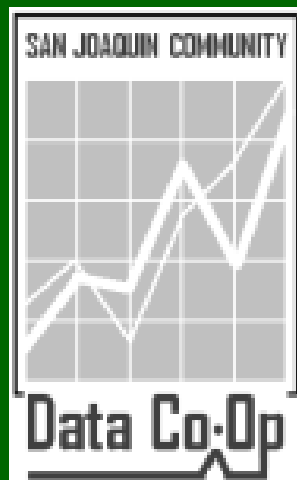
Demographics: San Joaquin County, Stockton, and Kentfield			
	San Joaquin County	Stockton	Kentfield Census Tract 33.09
Population(2000)	563, 598	242,714	7,271
% of county	100.0%	43%	1%
% of city		100%	3%
%Black	6.5%	11.0%	15.3%
vs. county	100%	168%	234%
vs. city		100%	139%
% Hispanic	30.5%	32.2%	31.3%
vs. county	100%	106%	103%
vs. city		100%	97%
% Under 18	30.9%	32.2%	40.5%
vs. county	100%	104%	131%
vs. city		100%	126%
% 65 and over	10.6%	10.4%	9.8%
vs. county	100%	98%	93%
vs. city		100%	94%
% Female headed families	20.4%	26.2%	33.8%
vs. county	100%	128%	166%
vs. city		100%	129%
% less than high school	28.8%	31.8%	52.2%
vs. county	100%	111%	183%
vs. city		100%	165%
Unemployment rate	6.2%	7.3%	8.1%
vs. county	100%	118%	130%
vs. city		100%	111%
% not in labor force	40.2%	41.1%	54.6%
vs. county	100%	102%	136%
vs. city		100%	133%
% in professional occupations	16.2%	17.2%	6.8%
vs. county	100%	106%	42%
vs. city		100%	39%
% with incomes <\$25,000	30.1%	36.5%	57%
vs. county	100%	121%	190%
vs. city		100%	156%
Median household Income	\$41,282	\$35,453	\$21,167
vs. county	100%	86%	51%
vs. city		100%	60%

Census Data Comparisons, continued

Demographics: San Joaquin County, Stockton, and Kentfield			
	San Joaquin County	Stockton City	Kentfield Census Tract 33.09
% receiving public assistance	7.2%	10.5%	29.7%
vs. county	100%	146%	412%
vs. city		100%	282%
% below poverty	17.7%	23.9%	46%
vs. county	100%	134%	259%
vs. city		100%	193%
% in same house 5 yrs ago	51.2%	48.5%	35.2%
vs. county	100%	95%	69%
vs. city		100%	72%
Abandonment Rate	0.4%	0.4%	0.3%
vs. County	100%	102%	79%
vs. City		100%	77%
Ownership Rate	60.4%	51.9%	16.1%
vs. county	100%	86%	27%
vs. city		100%	31%
% of Overcrowded Renters	23.7%	26.5%	44.7%
vs. county	100%	112%	189%
vs. city		100%	169%
% of Units built since 1990	17.6%	16%	3.8%
vs. county	100%	91%	22%
vs. city		100%	24%
Median Years Built	1973	1973	1975
vs. county	100%	100%	100%
vs. city		100%	100%
Median Year Moved	1995	1996	1998
vs. county	100%	100%	100%
vs. city		100%	100%
Median Gross Rent	\$617	\$581	\$546
vs. county	100%	94%	88%
vs. city		100%	94%

Census Data Comparisons, continued

Demographics: San Joaquin County, Stockton, and Kentfield			
	San Joaquin County	Stockton City	Kentfield Census Tract 33.09
% of Renters w/ unaffordable housing	46.1%	49.7%	57.9%
vs. county	100%	108%	125%
vs. city		100%	116%
Median Value	\$142,400	\$199,500	\$107,900
vs. county	100%	84%	76%
vs. city		100%	90%
% Value < \$50,000	6.1%	4.7%	14.7%
vs. county	100%	76%	241%
vs. city		100%	316%



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