



LIVE WELL  
SAN DIEGO

# NON-HISPANIC ASIAN BRIEF

Health and Well-Being Outcomes  
Among the non-Hispanic Asian  
Population in San Diego County,  
2019-2021

County of San Diego | Health and  
Human Services Agency | Public  
Health Services | Community  
Health Statistics Unit

Prepared September 2023



*This page is intentionally left blank.*

## Non-Hispanic Asian Brief: Health and Well-Being Outcomes Among the non-Hispanic Asian Population in San Diego County, 2019-2021

September 21, 2023

All materials in this document are in the public domain and may be reproduced and copied without permission. However, citation to source is appreciated. Suggested citation:

County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit. Non-Hispanic Asian Brief: Health and Well-Being Outcomes Among the Non-Hispanic Asian Population in San Diego County, 2019-2021. September 21, 2023.

This document was developed under the Community Health Statistics Unit of the County of San Diego Public Health Services Department and is in support of Live Well San Diego. Data presented in this brief is the most recent data available.

### Inquiries regarding this document may be directed to:

Community Health Statistics Unit  
5469 Kearny Villa Road, San Diego, CA 92123  
(619) 692-6667  
[www.SDHealthStatistics.com](http://www.SDHealthStatistics.com)



*This page is intentionally left blank.*

## Table of Contents

Introduction .....	1
Methodology .....	1
Dashboard .....	2
Demographics .....	2
Health and Well-Being .....	2
Healthcare Access and Utilization .....	6
Life Expectancy .....	8
Health Outcomes .....	8
Behavioral Health .....	8
Non-Communicable (Chronic) Diseases .....	9
Communicable (Infectious) Diseases .....	13
Injury .....	15
Maternal and Child Health .....	16
Conclusion .....	17
Data Sources .....	19

*This page is intentionally left blank.*

## Introduction

This health and wellbeing brief presents information about the health and wellbeing of non-Hispanic Asian residents of San Diego County. The information presented in the brief include demographics, social determinants of health, health status and health behaviors, medical encounter, and death data from the California Department of Public Health and California Health Interview Survey.

## Methodology

Medical encounter data was obtained from the California Department of Health Care Access and Information (HCAI), Emergency Department Database and Patient Discharge Database and included discharge from an acute care facility (hospitalization), discharge from an in-patient chemical or psychiatric facility (in-patient treatment), and/or discharge from an emergency department (ED). Discharges were not unduplicated patients; therefore, the same individual may have been discharged more than once and/or from multiple facilities. Death data came from the California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vitals Records Business Intelligence System (VRBIS).

Medical encounter and death rates were calculated as the average rate for 2019 to 2021. Crude rates were calculated per 100,000 residents of San Diego County treated at a state-licensed facility in San Diego County. Population estimates from 2019 to 2021 were derived from San Diego Association of Governments (SANDAG).

Health indicators selected were based on the San Diego County Community Profiles, which contain medical encounter and death rates for approximately 70 conditions. The 3-year aggregated rates for these health indicators were de-identified for fewer than 11 events and are only at the county-level of geography to protect patient privacy and allow for more stable rate calculations.

Maternal and child health data come from the State of California, Department of Public Health, Center for Health Statistics and Informatics, Birth and Fetal Death Statistical Master Files, Birth Public Use Files, and California Comprehensive Birth Files. Numbers were censored and rates were not calculated when the number of events were fewer than 5. Average numbers and rates were calculated to obtain 3-year aggregated estimates.

Demographic, health and well-being, and health care access and utilization indicators were derived from California Health Interview Survey (CHIS), conducted by the University of California Los Angeles (UCLA), Center for Health Policy Research. Data from 2019 to 2021 surveys were aggregated and only statistically stable estimates were included in this brief. Due to the statistical instability of a 3-year aggregate from 2019 to 2021, the health insurance indicator is a 4-year aggregate of prevalence from 2018 to 2021.

Some limitations of this data:

- CHIS, medical encounter, and death data only include and apply to non-Hispanic Asian residents in San Diego County. Percentages, counts, and rates may be different for Asian residents, regardless of Hispanic ethnicity.
- Asian population data is not disaggregated, or separated out by subgroups, and therefore the differences are unreported. Some Asian subgroups may experience higher rates of poor health outcomes and/or limited healthcare access and utilization.
- Medical encounter data represent discharges, or visits, instead of the number of individual patients when the counts and rates are produced. Therefore, a person may be discharged multiple times in a year or from more than one facility.

For more information regarding data and methodology, visit the [2020 Community Profiles Data Guide and Data Dictionary Dashboards](#) and [2021 Community Profiles Data Guide and Data Dictionary Dashboards](#).

## Dashboard

Data from this brief can also be accessed and viewed on the 2019-2021 non-Hispanic Asian Dashboard. This dashboard is an interactive tool that displays demographics, health and wellbeing, healthcare access and utilization, conditions by health outcome, leading causes of health outcomes, and maternal and child health indicators. To access the 2019-2021 non-Hispanic Asian Dashboard, please click [here](#).

## Demographics

From 2019 to 2021, there were 352,805 non-Hispanic (nH) Asian residents in San Diego County, which represented 10.6% of San Diego County's population.

The majority of nH Asian residents in San Diego County were adults ages 18 to 64 years (66.9%). The nH Asian population had a higher proportion of females (56.5%) than males (43.5%). The nH Asian population was primarily heterosexual (91.8%), while the remainder were lesbian, gay, bisexual, queer, or another minority sexual orientation (LGBQ). Among nH Asian adult residents in San Diego County, 60.9% were married or lived with their partner, 26.8% were single and never married, and 12.3% were separated, divorced, widowed, or had another marital status.

Regarding education levels, nH Asian adult residents had a higher proportion of college attainment or higher (82.2%) compared to the overall county population from 2019 to 2021 (69.7%). Exactly 67.0% of the nH Asian adult population were employed part-time (20 hours or less per week) or full-time (21 hours or more per week), while 64.3% of the overall county adult population were employed part-time or full-time.

Although nH Asian residents in San Diego County had a higher proportion of households with an annual income of \$20,000 or less compared to the overall county population (13.3% versus 12.9%), they also had a higher proportion of households making \$80,001 or more per year. Over half (54.8%) of nH Asian households earned an annual income of \$80,001 or more, which was nearly 9% greater than the proportion of the San Diego County households who earned \$80,001 or more per year (46.1%) from 2019 to 2021.

Despite high employment and annual household income among the nH Asian population, 21.2% still lived below 200% federal poverty level (FPL). Among nH Asian residents who lived below 200% FPL, 31.9% of adults were food insecure, 21.6% received food stamps, 18.9% received Supplement Security Income (SSI), and 5.3% received Temporary Assistance for Needy Families (TANF) or California Work Opportunity and Responsibility to Kids (CalWORKs). Non-Hispanic Asian residents living below 200% FPL generally were less likely to utilize public assistance programs compared to overall San Diego County residents from 2019 to 2021.



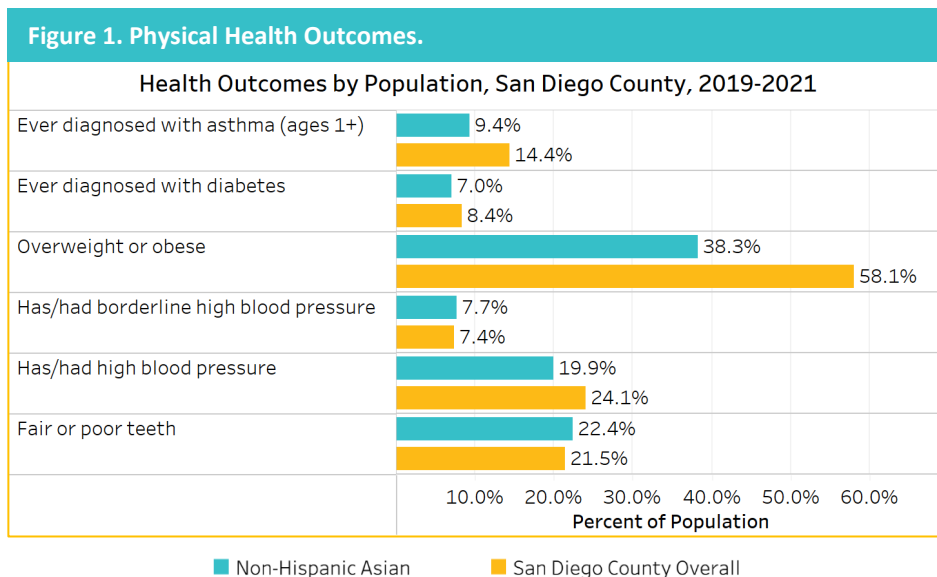
## Health and Well-Being

### PHYSICAL HEALTH

On a scale of poor to excellent health, a lower proportion of non-Hispanic (nH) Asian residents reported having fair or poor health (7.7%) compared to the overall county population (9.5%) from 2019 to 2021. Compared to



the overall county population, nH Asian residents had fewer diagnoses for asthma, diabetes, obesity, and high blood pressure (**Figure 1**). From 2019 to 2021, 9.4% of nH Asian residents ages one year and older were ever diagnosed with asthma, 7.0% of nH Asian adult residents were ever diagnosed with diabetes, 38.3% of nH Asian adult residents were obese or overweight, and 19.9% of nH Asian adult residents were ever diagnosed with high blood pressure. Although a lower proportion of nH Asian adult residents had ever had high blood pressure, 7.7% of nH Asian adult residents had borderline high blood pressure, which was slightly higher than the overall county population (7.4%). A higher proportion of nH Asian residents also reported having fair or poor teeth conditions compared to the overall total county population (22.4% versus 21.5%).



Outcomes are among adults (18+), unless stated otherwise.  
 Data Sources: UCLA Center for Health Policy Research, California Health Interview Survey (CHIS), 2019-2021. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

## COVID-19

From 2020 to 2021, a lower proportion of non-Hispanic (nH) Asian adult residents in San Diego County reported that they ever had or thought that they had COVID-19 compared to the overall county population (10.3% versus 15.5%). When asked about whether or not they would get the COVID-19 vaccine when it becomes available, over half (54.9%) of the nH Asian adult population reported that they already received at least one dose of the COVID-19 vaccine compared to the 57.6% of the overall county population who received at least one COVID-19



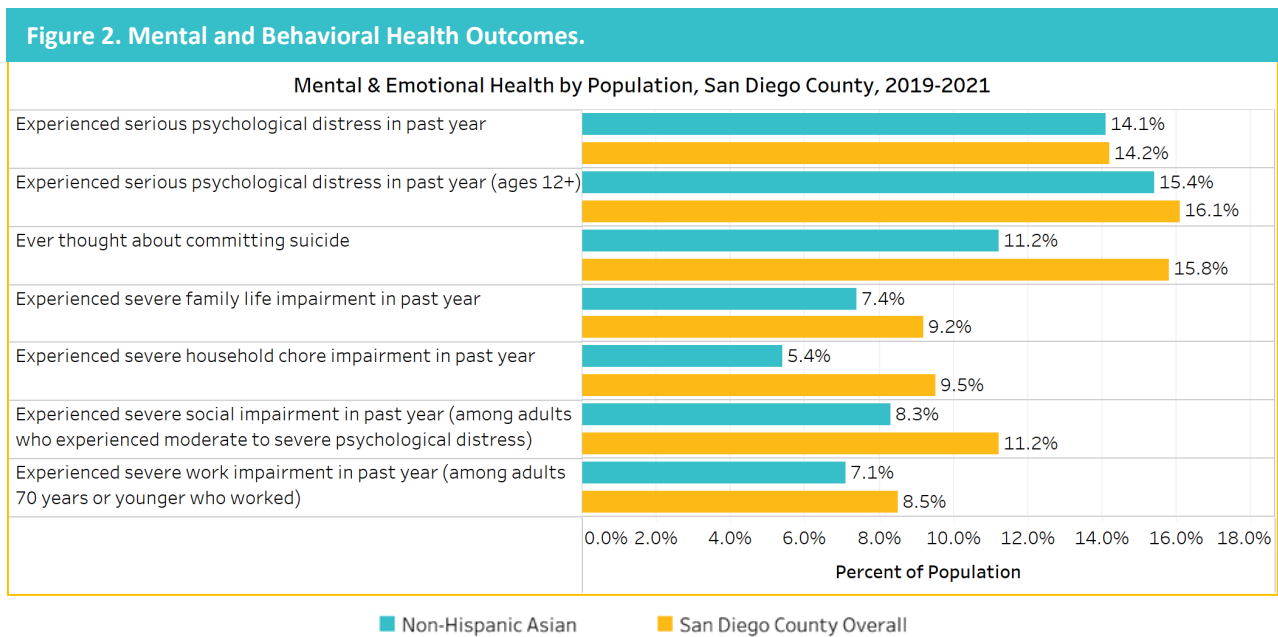
vaccine dose in 2021. Nearly 20% of nH Asian adult residents reported that they would get vaccinated when the vaccine becomes available while 25.2% would not consider getting vaccinated.

From 2020 to 2021, increased hate crimes and bias treatments were directed at the Asian population due to associations with the COVID-19 pandemic. During this time, 5.2% of the nH Asian adult population in San Diego County reported they were treated unfairly because of their race/ethnicity due

to the COVID-19 pandemic, which was greater than the 2.3% of the overall county population who claimed they were treated unfairly.

### MENTAL AND BEHAVIORAL HEALTH

Regarding mental health, a similar proportion of the non-Hispanic (nH) Asian adult population experienced serious psychological stress in the past year compared to the overall county population (14.1% versus 14.2%) from 2019 to 2021. Psychological distress did not greatly impact their family life, household chores, social life, or work life, as there was a lower proportion of nH Asian adult residents who experienced severe impairment in any of those aspects compared to the overall county residents (**Figure 2**).



Outcomes are among adults (18+), unless stated otherwise.

Data Sources: UCLA Center for Health Policy Research, California Health Interview Survey (CHIS), 2019-2021. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

### INJURY AND VIOLENCE

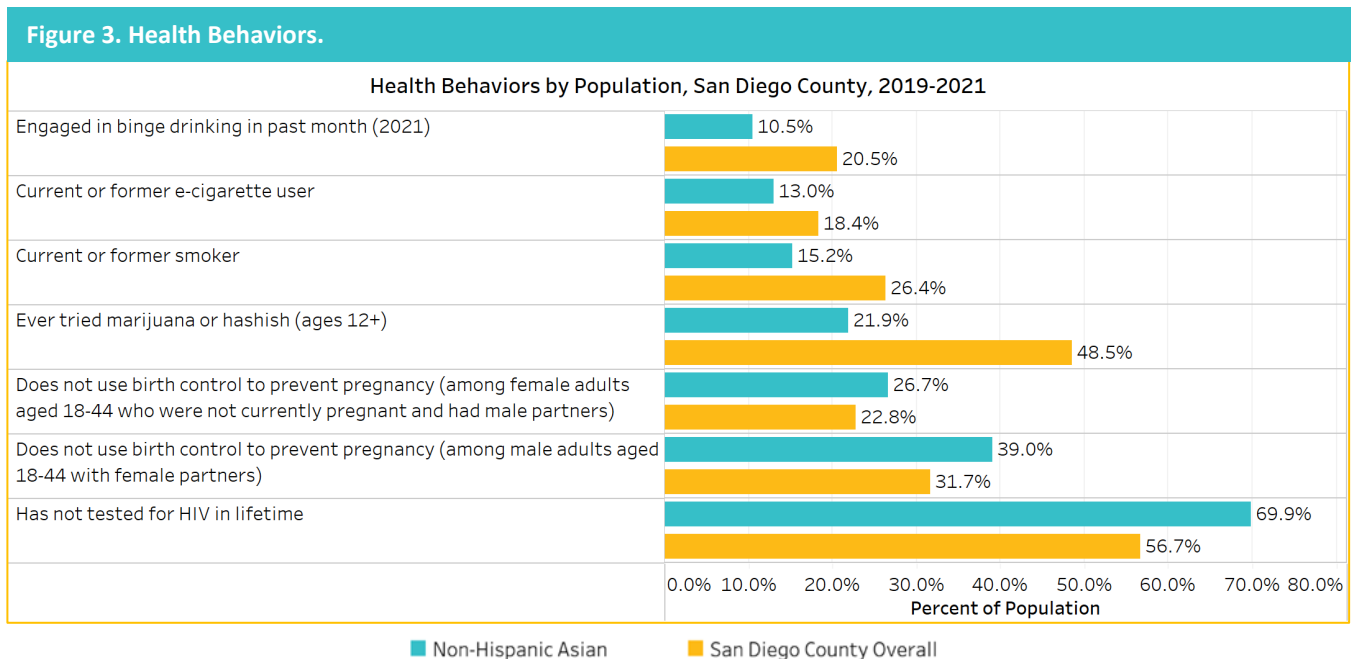
In 2021, nearly half (48.9%) of non-Hispanic (nH) Asian adult residents in San Diego County reported experiencing one or more adverse childhood experiences (ACEs) in their lifetime, which was a lower proportion than that of the adult residents in the overall county (66.9%).

In terms of sexual violence, from 2019 to 2021, 4.0% of nH Asian adult residents reported having sex without consent at some point of their life, which was lower than the 9.8% of the adult population in San Diego County who had sex without consent. Additionally, nH Asian adult residents in San Diego County reported experiencing less physical or sexual violence by intimate partners since age 18 compared to the overall county adult population in 2021 (12.6% versus 17.6%). In 2021, a higher proportion of nH Asian adult residents were somewhat or very worried about gun violence victimization compared to the overall county adult population (66.1% versus 38.7%).

## HEALTH BEHAVIORS

As shown in **Figure 3**, there was a lower proportion of non-Hispanic (nH) Asian adult residents who engaged in binge drinking in the past month compared to the adult population of the overall county in 2021 (10.5% versus 20.5%). NH Asian adult residents reported smoking (15.2%) and using e-cigarettes (13.0%) less frequently than San Diego County residents overall (26.4% and 18.4%, respectively). Over 1 in 5 nH Asian residents ages 12 and older tried marijuana or hashish at least once in their lifetime (21.9%), which was less than the 48.5% of the overall county population.

From 2019 to 2021, non-Hispanic Asian adult residents generally had a higher prevalence of sexual health risk behaviors compared to overall San Diego County residents. Over a quarter, or 26.7%, of the nH Asian female adult population aged 18-44, who were not currently pregnant and had male partners, did not use birth control to prevent pregnancy. In comparison, 22.8% of the overall county female adult population aged 18-44, who were not currently pregnant and had male partners, did not use birth control. Additionally, 39.0% of nH Asian male adults aged 18-44 with female partners reported not using birth control to prevent pregnancy, which was higher than the 31.7% of the overall county male population aged 18-44 with female partners. From 2019 to 2021, a large majority of nH Asian adults had never been tested for HIV in their lifetime (69.9%), which was also higher than the proportion of the overall county adult population who also had never been tested for HIV (56.7%).



Outcomes are among adults (18+), unless stated otherwise.

Data Sources: UCLA Center for Health Policy Research, California Health Interview Survey (CHIS), 2019-2021. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

## NEIGHBORHOOD/PLACE OF RESIDENCE

Over 60% of the non-Hispanic (nH) Asian adult population owned a home (61.5%) in San Diego County while 32.6% rented from 2019 to 2021. Home ownership was greater among the adult nH Asian population than the overall county adult population, while home rental was lower. From 2019 to 2021, a slightly higher proportion of adult nH Asian residents felt safe some or none of the time compared to the overall county adult population

(9.6% versus 9.0%). Although there was a higher proportion of the adult nH Asian population who felt less safe, more adult nH Asian residents agreed or strongly agreed that their neighbors can be trusted (83.6% versus 82.9%) and are helpful compared to the overall county residents (84.0% versus 79.3%). Among adults with children under 18, 14.7% of nH Asian residents agreed or strongly agreed that their neighbors did not get along, which was slightly higher than the 14.1% of the overall county residents.

## Healthcare Access and Utilization

### HEALTH INSURANCE

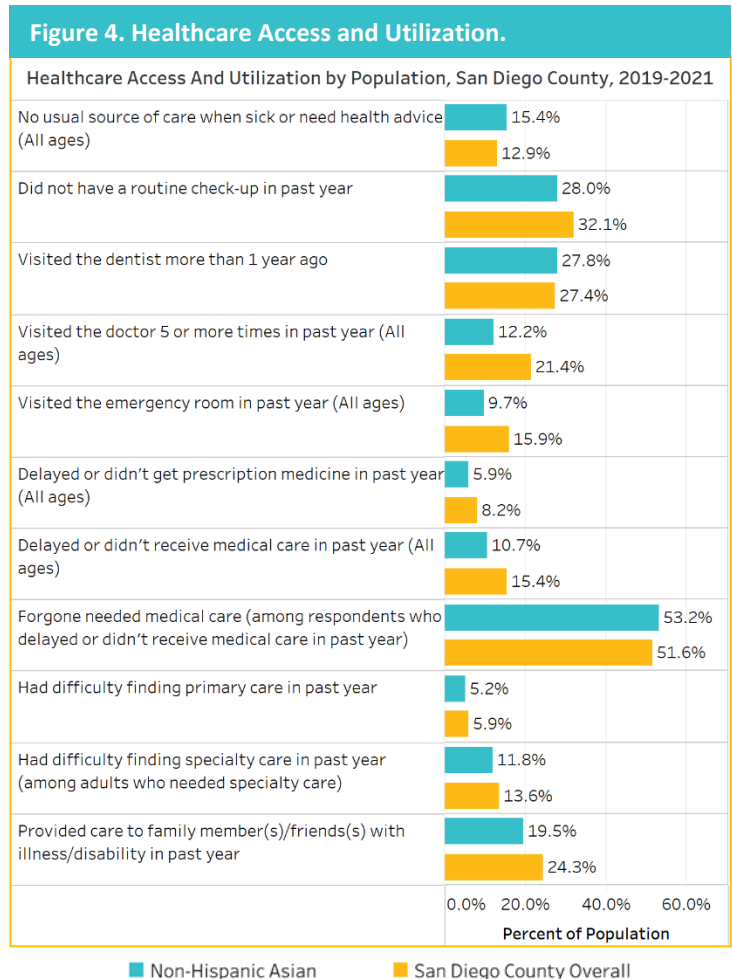
From 2019 to 2021, 6.5% of non-Hispanic (nH) Asian residents in San Diego County did not have health insurance, which was similar to the 6.6% of the overall county population who were uninsured. Among nH Asian residents who were insured, 62.1% received their health insurance from their employers, 22.6% had Medicare or Medicaid, and 8.7% received some other type of health insurance.

Almost a quarter of nH Asians did not have dental insurance (23.7%) from 2019 to 2021, which was lower than the proportion of residents living in the overall county (29.2%). A similar proportion of nH Asian residents did not visit the dentist within the last year compared to the overall county residents (27.8% versus 27.4%).

### HEALTHCARE ACCESS AND UTILIZATION

In terms of healthcare access and utilization, nH Asian adult residents were less likely to miss their routine check-up in the past year compared to the overall county adult population (28.0% versus 32.1%). From 2019 to 2021, 15.4% of the nH Asian population did not have any usual source of care when they were sick or needed health advice compared to the 12.9% of the overall county population. Additionally, a lower proportion of nH Asian residents reported visiting the doctor 5 or more times in the past year and visiting the emergency room in the past year compared to the overall county population.

Almost 6% of nH Asian residents delayed or didn't get their prescription medicine in the past year and over 10% delayed or didn't receive medical care in the past year. Among those who delayed or didn't receive medical care in the past year, 53.2% of nH Asian residents forgone the needed medical care, which was higher than the 51.6% of San Diego County residents. When it came to finding medical care, 5.2% of nH Asian adult residents had difficulty finding primary



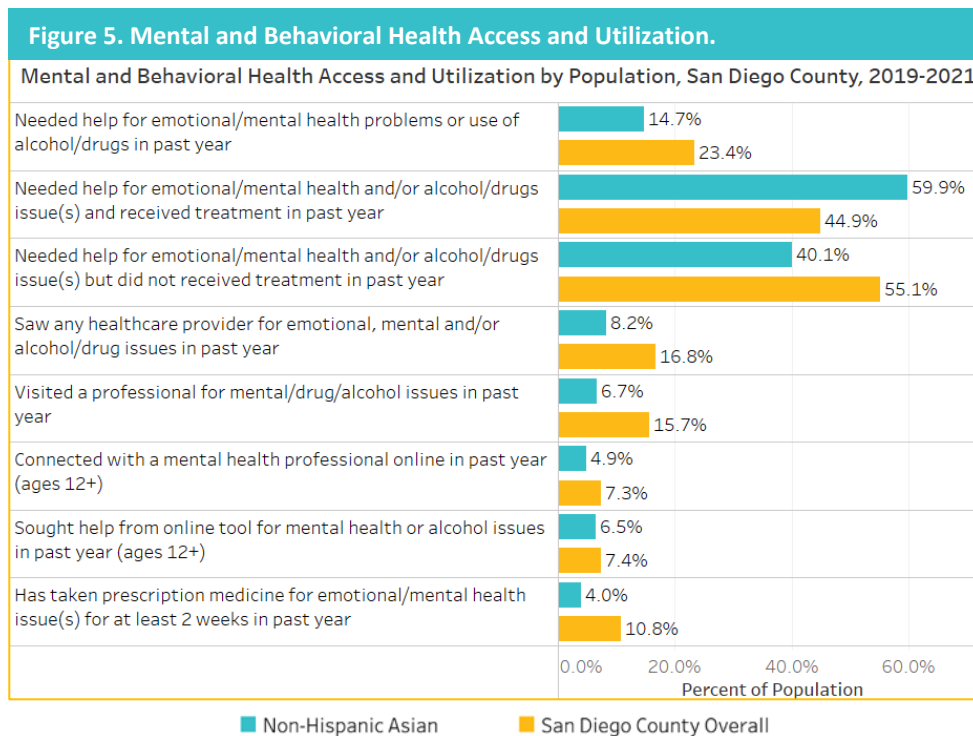
Outcomes are among adults (18+), unless stated otherwise.  
 Data Sources: UCLA Center for Health Policy Research, California Health Interview Survey (CHIS), 2019-2021. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

care in the past year and 11.8% of nh Asian adults who needed specialty care had difficulty finding care in the past year. **Figure 4** displays healthcare access and utilization among the non-Hispanic Asian population and overall San Diego County population.

### MENTAL AND BEHAVIORAL HEALTH ACCESS AND UTILIZATION

From 2019 to 2021, non-Hispanic (nH) Asian adult residents were less likely to report needing help for their emotional and/or mental health problems or use of alcohol or drugs in the past year compared to the overall county residents (14.7% versus 23.4%) (**Figure 5**). However, among those who needed help, nH Asian residents were more likely to seek out treatment for their emotional and/or mental health problems or use of alcohol or drugs compared to the overall county residents (59.9% versus 44.9%). There was also a lower proportion of nH Asian adult residents who saw any healthcare provider or professional for any emotional, mental, and/or alcohol or drug issues in the past year compared to adult residents in San Diego County.

In terms of utilizing online mental health resources, lower proportions of nH Asian residents ages 12 years and older connected with a mental health professional online (4.9% versus 7.3%) and sought help from an online tool for their mental health or alcohol issues in the past year compared to the overall county residents (6.5% versus 7.4%) from 2019 to 2021. Additionally, 4.0% of the nH Asian adult population took a prescription medicine for their emotional or mental health issues for at least 2 weeks in the past year, which was lower than the 10.8% of the overall county adult population.



Outcomes are among adults (18+), unless stated otherwise.

Data Sources: UCLA Center for Health Policy Research, California Health Interview Survey (CHIS), 2019-2021.

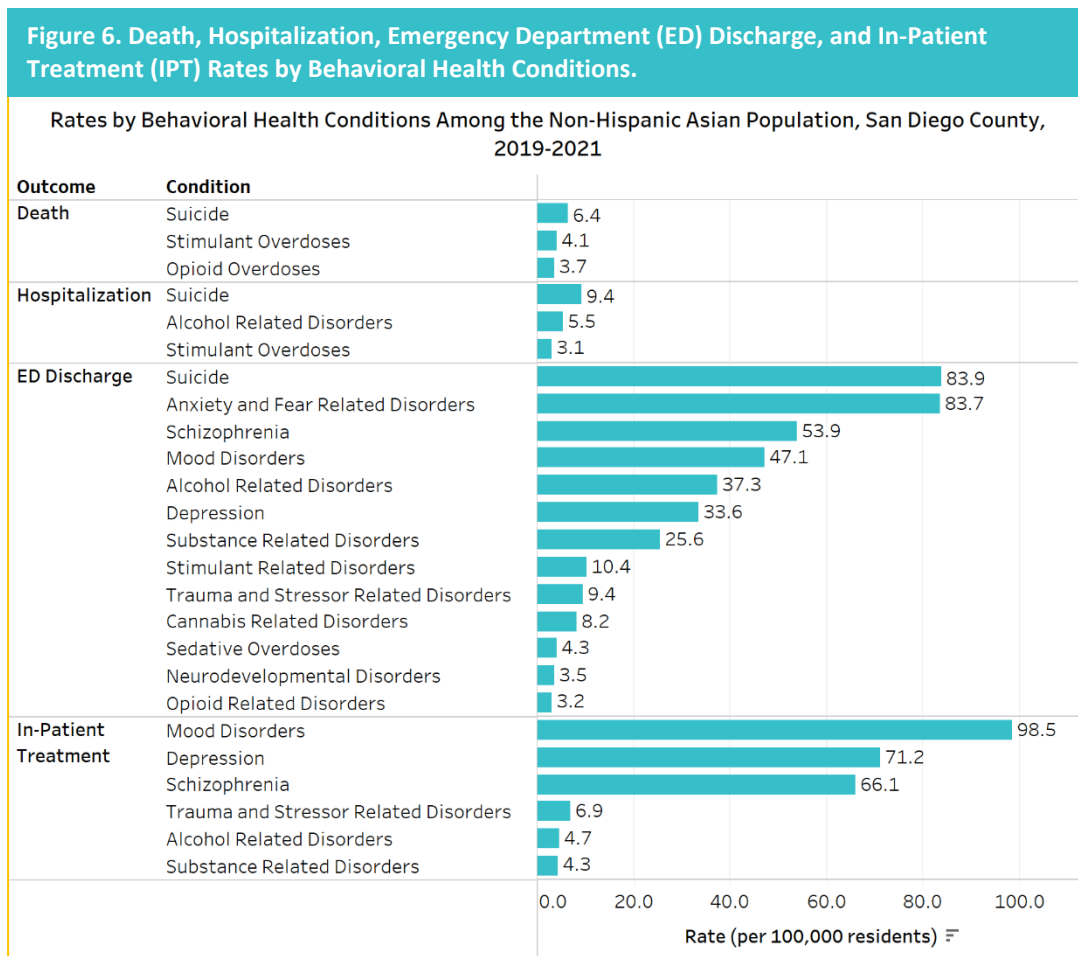
Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

## Life Expectancy

Life expectancy is one of the Top 10 Indicators measured for the County of San Diego’s Live Well San Diego vision for healthier, safer, and thriving communities. From 2019 to 2021, the average life expectancy among non-Hispanic Asian residents in San Diego County was 86.2 years, while the average life expectancy among San Diego County residents overall was 81.5 years.

## Health Outcomes

### Behavioral Health



Data Sources: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS), 2019-2021. *The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.* California Department of Health Care Access and Information (HCAI), Emergency Department Database and Patient Discharge Database, 2019-2021. San Diego Association of Governments (SANDAG) Population Estimates, 2019 (v05/2020), 2020 (v09/2022), and 2021 (v09/2022). *Population estimates for 2020 and 2021 were derived using the 2010 Census and data should be considered preliminary.* Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

## DEATH

From 2019 to 2021, suicide accounted for the highest rate of death due to any behavioral health conditions among non-Hispanic (nH) Asians in San Diego County (6.4 per 100,000), followed by stimulant overdoses (4.1 per 100,000) and opioid overdoses (3.7 per 100,000). Rates of death due to behavioral health conditions were lower among nH Asians compared to the overall county population.

## HOSPITALIZATION

Suicide attempt/ideation made up the highest rate of hospitalization among nH Asian residents in San Diego County, in terms of behavioral health conditions, from 2019 to 2021 (9.4 per 100,000), followed by alcohol related disorders (5.5 per 100,000), and stimulant overdoses (3.1 per 100,000). Hospitalization rates due to behavioral health conditions among nH Asian residents were lower than hospitalization rates of the overall county population.

## EMERGENCY DEPARTMENT DISCHARGE

nH Asian residents in San Diego County had lower emergency department (ED) discharge rates due to behavioral health conditions compared to the overall county population from 2019 to 2021. Among behavioral health conditions, suicide attempt/ideation accounted for the highest rate of ED discharge among nH Asian residents in San Diego County (83.9 per 100,000), followed by anxiety and fear related disorders (83.7 per 100,000) and schizophrenia (53.9 per 100,000).

Depression made up the highest rate of ED discharge among nH Asian residents regarding mood disorders from 2019 to 2021 (33.6 per 100,000). Stimulant related disorders accounted for the highest ED discharge rate due to any substance related disorders among nH Asian residents in San Diego County (10.4 per 100,000).

## IN-PATIENT TREATMENT

From 2019 to 2021, in-patient treatment (IPT) rates due to behavioral health conditions were lower among nH Asian residents than the total county population. For nH Asian residents, mood disorders (98.5 per 100,000), specifically depression (71.2 per 100,000), were the leading rates of IPT among behavioral health conditions, followed by schizophrenia (66.1 per 100,000).

## Non-Communicable (Chronic) Diseases

### DEATH

Among non-communicable (chronic) diseases, non-Hispanic (nH) Asians had the highest death rates due to overall cancer (131.9 per 100,000), followed by overall heart disease (112.7 per 100,000), from 2019 to 2021. Generally, nH Asian residents in San Diego County had lower death rates due to non-communicable (chronic) diseases, excluding stroke, diabetes and cancer, than the overall total population.

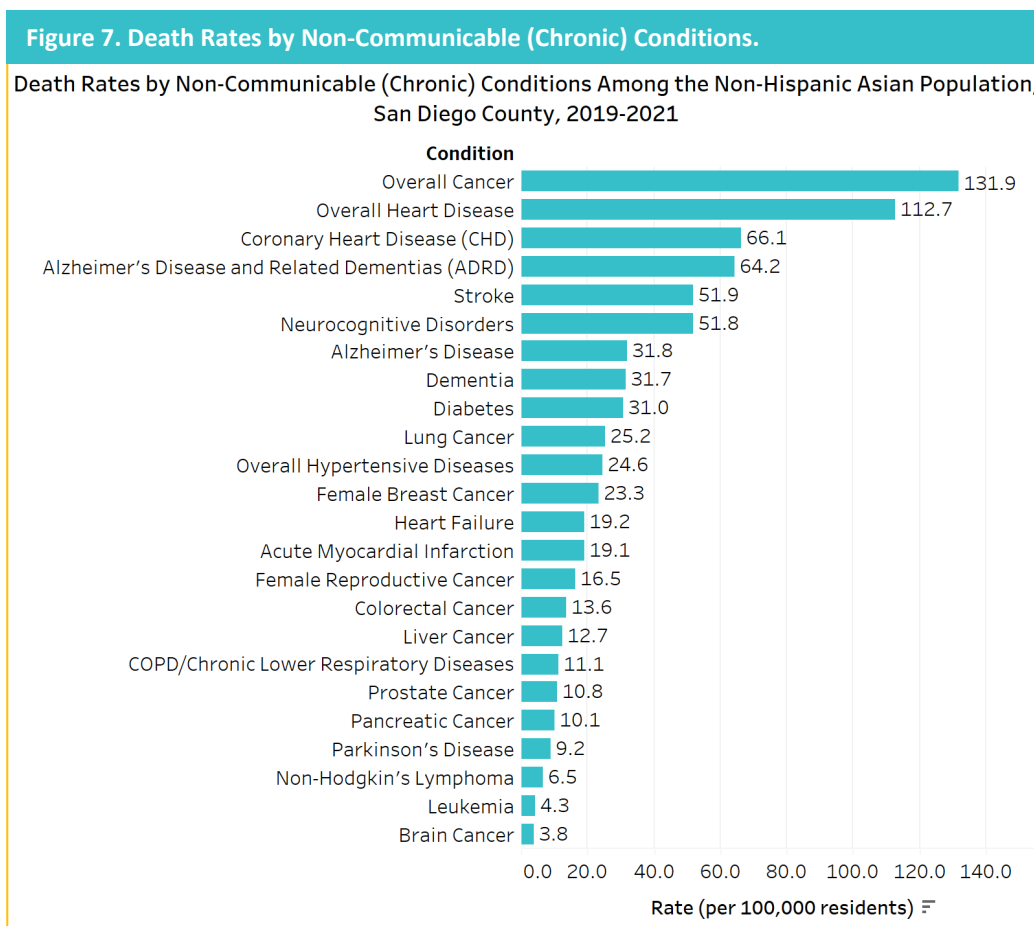
From 2019 to 2021, the death rate due to overall cancer among nH Asian residents in San Diego County was 131.9 per 100,000 residents. Lung cancer (25.2 per 100,000), female breast cancer (23.3 per 100,000), female reproductive cancer (16.5 per 100,000), colorectal cancer (13.6 per 100,000), and liver cancer (12.7 per 100,000) accounted for the highest rates of death due to any cancer conditions among nH Asian residents. Among the listed types of cancers, nH Asian residents had higher death rates of lung cancer, female breast cancer,

colorectal cancer, liver cancer, and Non-Hodgkin’s Lymphoma compared to the overall total population in San Diego County.

The death rate due to overall heart disease among nH Asian residents in San Diego County was 112.7 per 100,000 residents from 2019 to 2021. Among the listed heart diseases, coronary heart disease (CHD) made up the highest death rate among nH Asian residents (66.1 per 100,000), followed by overall hypertensive diseases (24.6 per 100,000), heart failure (19.2 per 100,000), and acute myocardial infarction (19.1 per 100,000).

From 2019 to 2021, the death rate due to Alzheimer’s Disease and Related Dementias (ADRD) among nH Asian residents in San Diego County was 64.2 per 100,000 residents. Neurocognitive disorders accounted for the highest death rate due to any ADRD conditions (51.8 per 100,000), followed by Alzheimer’s Disease (31.8 per 100,000), dementia (31.7 per 100,000), and Parkinson’s Disease (9.2 per 100,000).

From 2020 to 2021, 8 out of 10 leading causes of death among nH Asian residents in San Diego County were due to the following non-communicable (chronic) diseases: cancer, heart disease, stroke, diabetes, Alzheimer’s Disease, hypertensive diseases, COPD/chronic lower respiratory diseases, and Parkinson’s Disease.



Data Sources: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS), 2019-2021. *The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.* San Diego Association of Governments (SANDAG) Population Estimates, 2019 (v05/2020), 2020 (v09/2022), and 2021 (v09/2022). *Population estimates for 2020 and 2021 were derived using the 2010 Census and data should be considered preliminary.* Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

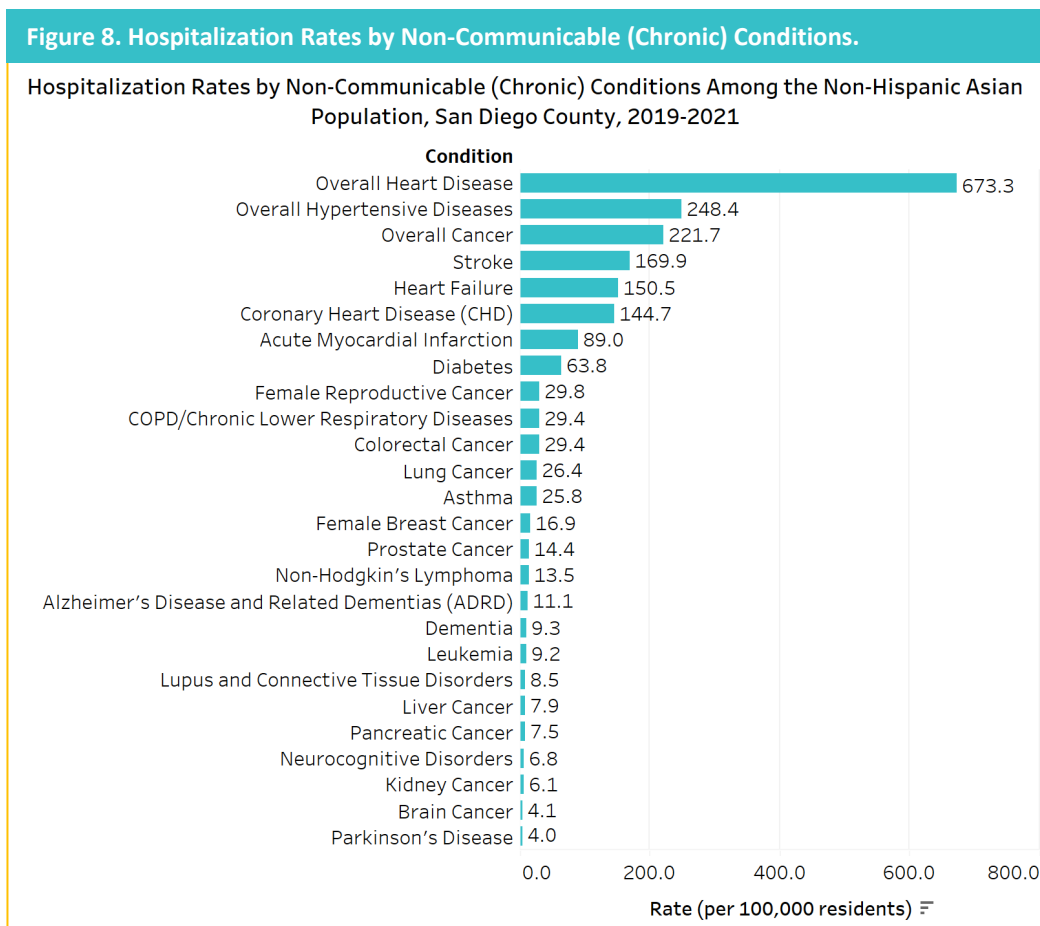


## HOSPITALIZATION

From 2019 to 2021, the highest rate of hospitalization due to any non-communicable (chronic) diseases among nH Asian residents in San Diego County was due to overall heart disease (673.3 per 100,000). Among heart diseases, overall hypertensive diseases accounted for the highest hospitalization rate among nH Asian residents (248.4 per 100,000), followed by heart failure (150.5 per 100,000), coronary heart disease (CHD) (144.7 per 100,000), and acute myocardial infarction (89.0 per 100,000).

From 2019 to 2021, the hospitalization rate due to overall cancer among nH Asian residents in San Diego County was 221.7 per 100,000 residents. Among cancer conditions, female reproductive cancer (29.8 per 100,000), colorectal cancer (29.4 per 100,000), and lung cancer (26.4 per 100,000) had the highest hospitalization rates among nH Asian residents. Non-Hispanic Asian residents had higher hospitalization rates due to liver cancer, lung cancer, and Non-Hodgkin’s Lymphoma than the overall total population in San Diego County from 2019 to 2021.

Asthma accounted for the highest hospitalization rate due to COPD/chronic lower respiratory diseases among nH Asian residents (25.8 per 100,000). Among ADRDs, dementia account for the highest hospitalization rate among non-Hispanic Asian residents (9.3 per 100,000), followed by neurocognitive disorders (6.8 per 100,000) and Parkinson’s Disease (4.0 per 100,000).

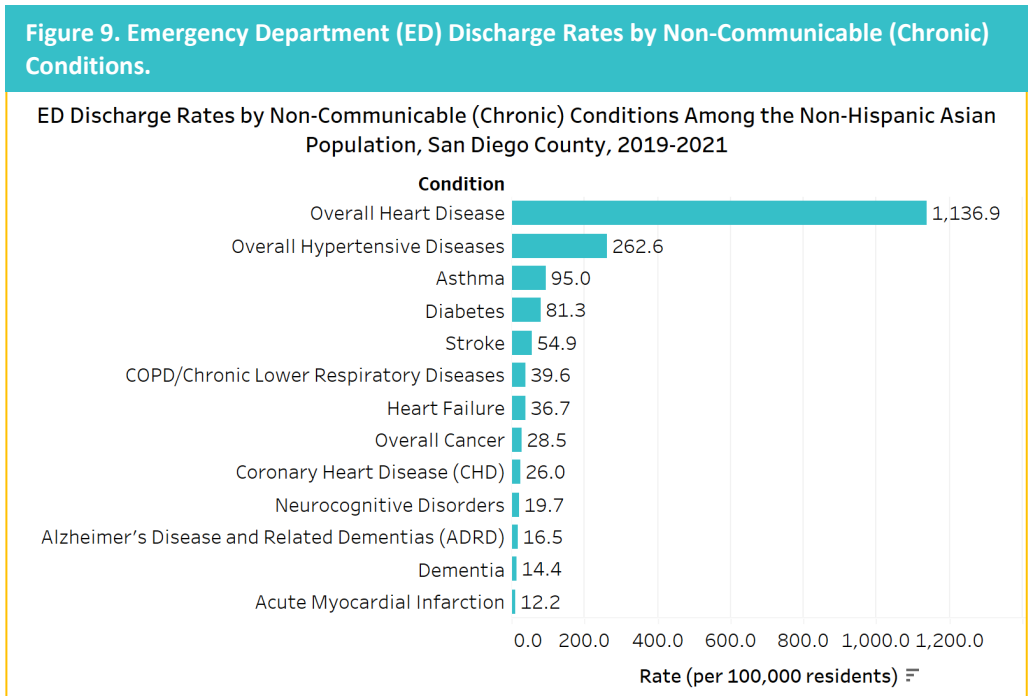


Data Sources: California Department of Health Care Access and Information (HCAI), Patient Discharge Database, 2019-2021. San Diego Association of Governments (SANDAG) Population Estimates, 2019 (v05/2020), 2020 (v09/2022), and 2021 (v09/2022). *Population estimates for 2020 and 2021 were derived using the 2010 Census and data should be considered preliminary.* Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

## EMERGENCY DEPARTMENT DISCHARGE

Among non-communicable (chronic) diseases, nH Asian residents had the highest emergency department (ED) discharge rates due to overall heart disease (1,136.9 per 100,000). Generally, nH Asian residents had lower ED discharge rates due to non-communicable (chronic) diseases than the overall county population.

Overall hypertensive diseases made up the highest ED discharge due to any heart disease among nH Asian residents (262.6 per 100,000). Among COPD/Chronic Lower Respiratory Diseases, asthma accounted for the highest ED discharge rate among nH Asian residents (95.0 per 100,000). Among ADRD conditions, neurocognitive disorders accounted for the highest ED discharge rate among nH Asian residents (19.7 per 100,000).

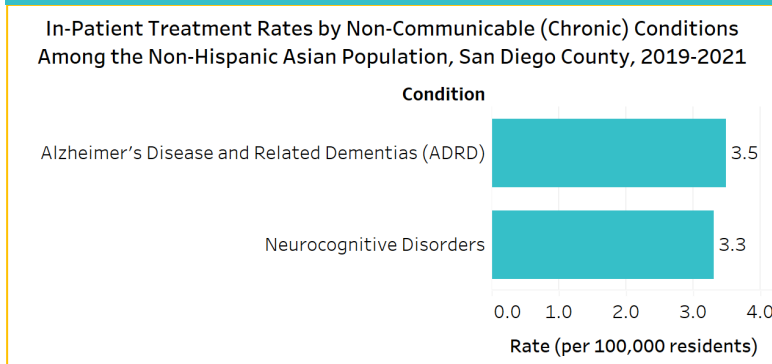


Data Sources: California Department of Health Care Access and Information (HCAI), Emergency Department Database, 2019-2021. San Diego Association of Governments (SANDAG) Population Estimates, 2019 (v05/2020), 2020 (v09/2022), and 2021 (v09/2022). *Population estimates for 2020 and 2021 were derived using the 2010 Census and data should be considered preliminary.* Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

## IN-PATIENT TREATMENT

From 2019 to 2021, Alzheimer's Disease and Related Dementias (ADRD) accounted for the highest in-patient treatment (IPT) rate due to any non-communicable (chronic) diseases among nH Asian residents (3.5 per 100,000). Among ADRD conditions, neurocognitive disorders accounted for the highest IPT rate among nH Asian residents in San Diego County (3.3 per 100,000). Similar to ED discharges, nH Asian residents had lower IPT rates due to non-communicable (chronic) conditions compared to the overall county population from 2019 to 2021.

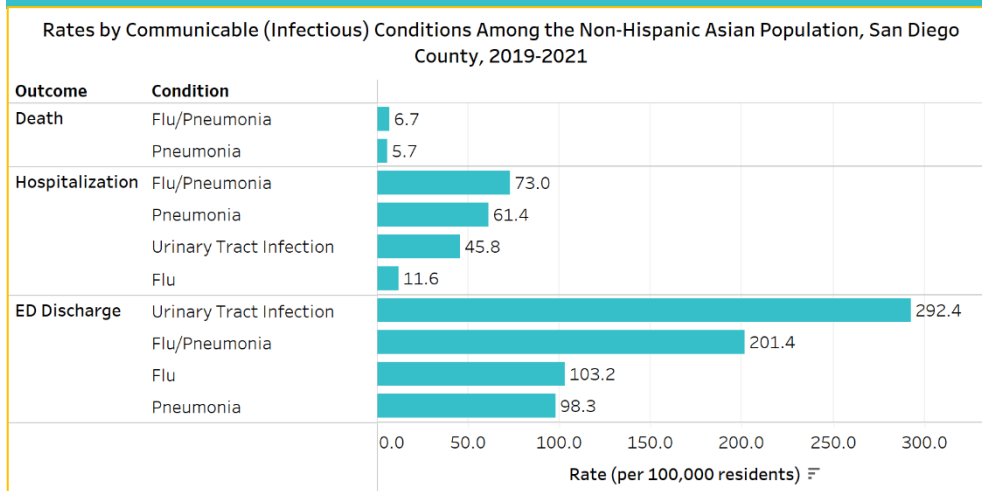
**Figure 10. In-Patient Treatment (IPT) Rates by Non-Communicable (Chronic) Conditions.**



Data Sources: California Department of Health Care Access and Information (HCAI), Patient Discharge Database, 2019-2021. San Diego Association of Governments (SANDAG) Population Estimates, 2019 (v05/2020), 2020 (v09/2022), and 2021 (v09/2022). *Population estimates for 2020 and 2021 were derived using the 2010 Census and data should be considered preliminary.* Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

## Communicable (Infectious) Diseases

**Figure 11. Death, Hospitalization, and Emergency Department (ED) Discharge Rates by Communicable (Infectious) Conditions.**



Data Sources: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS), 2019-2021. *The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.* California Department of Health Care Access and Information (HCAI), Emergency Department Database and Patient Discharge Database, 2019-2021. San Diego Association of Governments (SANDAG) Population Estimates, 2019 (v05/2020), 2020 (v09/2022), and 2021 (v09/2022). *Population estimates for 2020 and 2021 were derived using the 2010 Census and data should be considered preliminary.* Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

## DEATH

From 2019 to 2021, the death rate due to influenza (flu)/pneumonia among nH Asian residents in San Diego County was 6.7 per 100,000 residents. The death rate due to pneumonia among nH Asian residents was 5.7 per 100,000 residents. The death rates due to communicable (infectious) diseases among nH Asian residents were generally lower than the death rates among the total county population.

## HOSPITALIZATION

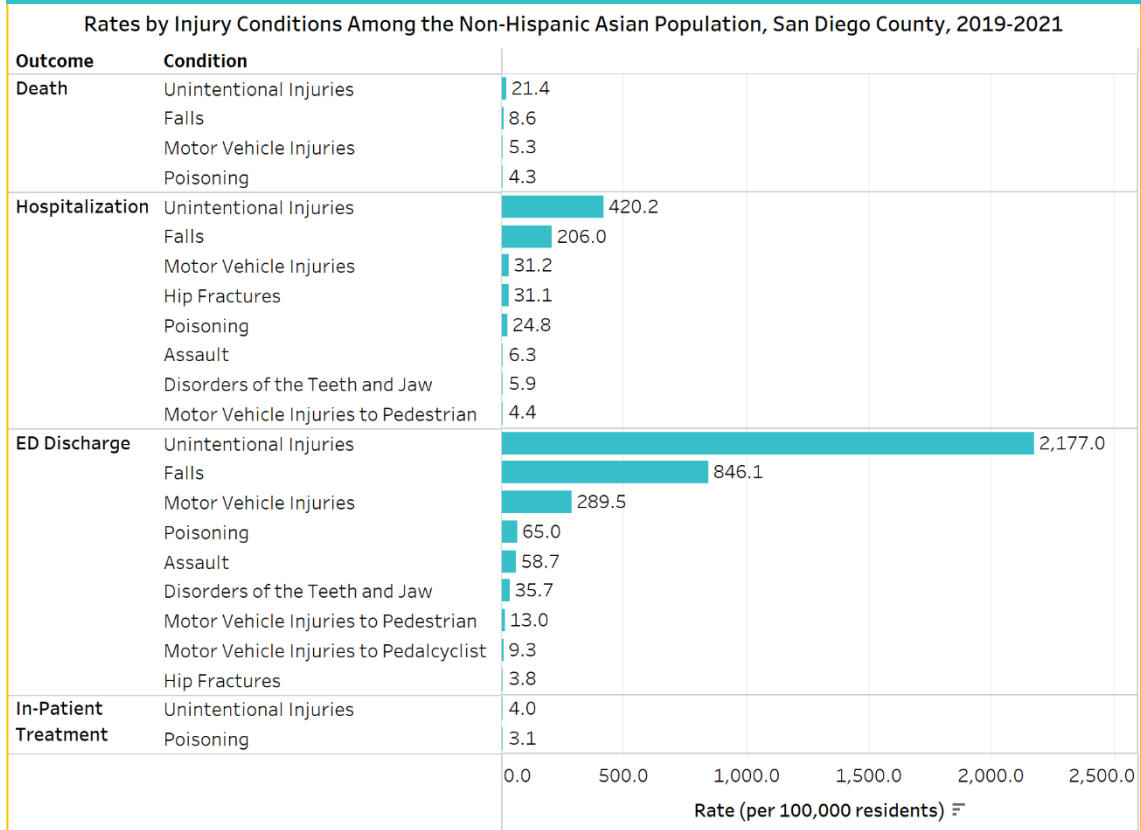
Influenza (flu)/pneumonia accounted for the highest hospitalization rate due to any communicable (infectious) diseases among nH Asian residents (73.0 per 100,000), followed by urinary tract infections (UTIs) from 2019 to 2021 (45.8 per 100,000). Between influenza (flu) and pneumonia, pneumonia accounted for a higher rate of hospitalization among nH Asian residents than influenza (flu) (61.4 per 100,000 versus 11.6 per 100,000). nH Asian residents had lower hospitalization rates due to communicable (infectious) diseases than the total county population from 2019 to 2021.

## EMERGENCY DEPARTMENT DISCHARGE

Although influenza (flu)/pneumonia had the highest rates of death and hospitalization due to any communicable (infectious) diseases among nH Asian residents in San Diego County, urinary tract infections (UTIs) had the highest rate of emergency department (ED) discharges, at a rate of 292.4 per 100,000 residents, from 2019 to 2021, followed by influenza (flu)/pneumonia (201.4 per 100,000). Between influenza (flu) and pneumonia, influenza (flu) accounted for a higher rate of ED discharge among nH Asian residents than pneumonia (103.2 versus 98.3 per 100,000). Similarly to death and hospitalization, ED discharges due to communicable (infectious) diseases among nH Asian residents were lower than the total county population.

## Injury

**Figure 12. Death, Hospitalization, Emergency Department (ED) Discharge, and In-Patient Treatment (IPT) Rates by Injury Conditions.**



Data Sources: California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS), 2019-2021. *The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.* California Department of Health Care Access and Information (HCAI), Emergency Department Database and Patient Discharge Database, 2019-2021. San Diego Association of Governments (SANDAG) Population Estimates, 2019 (v05/2020), 2020 (v09/2022), and 2021 (v09/2022). *Population estimates for 2020 and 2021 were derived using the 2010 Census and data should be considered preliminary.* Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

### DEATH

From 2019 to 2021, non-Hispanic (nH) Asian residents in San Diego County had lower rates of death due to injuries compared to the overall county population. Unintentional injuries accounted for the highest rate of death due to any injuries among nH Asian residents (21.4 per 100,000). Among unintentional injuries, nH Asian residents had the highest rate of death due to falls (8.6 per 100,000), followed by motor vehicle injuries (5.3 per 100,000) and poisoning (4.3 per 100,000).

### HOSPITALIZATION

In San Diego County, the highest injury hospitalization rate among nH Asians was due to unintentional injuries from 2019 to 2021 (420.2 per 100,000). Falls accounted for the highest hospitalization rate due to any

unintentional injuries among nH Asian residents (206.0 per 100,000), followed by motor vehicle injuries (31.2 per 100,000). The hospitalization rate due to hip fractures among nH Asian residents was 31.1 per 100,000 residents. NH Asians generally had lower injury hospitalization rates during the 3-year period compared to the total county population.

### EMERGENCY DEPARTMENT DISCHARGE

Unintentional injuries accounted for the highest rate of emergency department (ED) discharge due to any injuries among nH Asian residents from 2019 to 2021 (2,177.0 per 100,000). Falls accounted for the highest ED discharge rate due to any unintentional injuries at 846.1 per 100,000 residents, followed by motor vehicle injuries (289.5 per 100,000), and poisoning (65.0 per 100,000). The ED discharge rate due to assault among nH Asian residents in San Diego County was 58.7 per 100,000 residents. ED discharge rates due to injuries were lower among nH Asian residents compared to the overall county population.

### IN-PATIENT TREATMENT

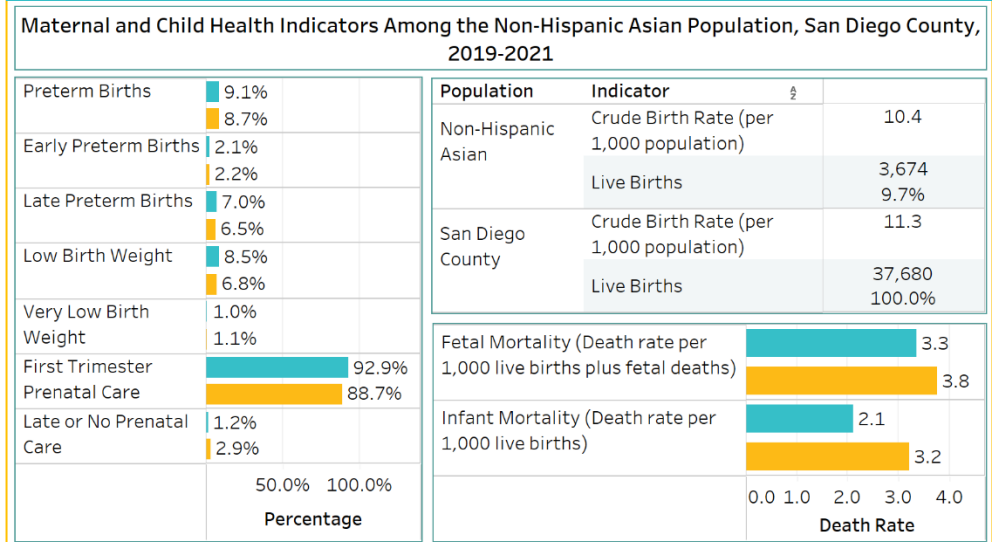
The most common cause of injury in-patient treatment (IPT) among nH Asian residents in San Diego County between 2019 to 2021, was unintentional injuries (4.0 per 100,000). Poisoning accounted for the highest IPT rate due to any unintentional injuries among nH Asian residents (3.1 per 100,000). Similarly to rates of death, hospitalization, and ED discharge, rates of IPT due to injuries were lower among nH Asian residents than the total county population.

## Maternal and Child Health

From 2019 to 2021, there were 3,674 total live births among non-Hispanic (nH) Asians in San Diego County, which represented 9.7% of the total live births in San Diego County (37,680). Over 9% (9.1%) of the live births among nH Asians in San Diego County were preterm births (prior to 37 weeks of gestation), 2.1% of which were early preterm births (prior to 34 weeks of gestation) and 7.0% of which were late preterm births (between 34 to 36 weeks of gestation).

From 2019 to 2021, 8.5% of the live births among nH Asians were low weight births at weights less than 2,500 grams while 1.0% were very low weight births at weights less than 1,500 grams. There were a higher proportion of low

**Figure 13. Maternal and Child Health Indicators.**



Data Sources: State of California, Department of Public Health, Center for Health Statistics and Informatics, Birth and Fetal Death Statistical Master Files, Birth Public Use Files, California Comprehensive Birth Files, 2019-2021. County of San Diego, Health and Human Services Agency, Public Health Services, Maternal, Child and Family Health Services. Prepared by: County of San Diego, Health and Human Services Agency, Public Health Services, Community Health Statistics Unit, September 2023.

weight births among nH Asians compared to the proportion of low weight births among the overall county population (8.5% versus 6.8%).

Among births with known prenatal care information, 92.9% of nH Asian mothers received early (first trimester) prenatal care while 1.2% received late (third trimester) or no prenatal care. A higher proportion of nH Asian mothers received early (first trimester) prenatal care compared to mothers in San Diego County overall from 2019 to 2021 (92.9% versus 88.7%).

From 2019 to 2021, the hospitalization rate due to congenital anomalies (birth defects) among nH Asians in San Diego County was 19.2 per 100,000 residents, which was lower than the hospitalization rate among the overall county population (37.6 per 100,000). The fetal mortality rate among nH Asians was 3.3 fetal deaths at 20 weeks of gestation or more per 1,000 live births and fetal deaths, which was lower than the overall San Diego County fetal mortality rate (3.8 per fetal deaths at 20 weeks of gestation or more per 1,000 live births and fetal deaths). The infant mortality rate among infants born to nH Asian mothers was also lower compared to the overall county rate (2.1 infant deaths per 1,000 live births versus 3.2 infant deaths per 1,000 live births).

## Conclusion

San Diego County is home to over 352,000 non-Hispanic Asian residents, which makes up over 10% of the county's total population. The data presented in this brief provide insight into the demographics and health outcomes of non-Hispanic Asian residents in San Diego County during the 3-year period from 2019 to 2021. This brief is an effort to provide a comprehensive health assessment of the Asian population residing in San Diego County for targeted outreach and interventions.

### KEY FINDINGS OF THIS BRIEF:

- ❖ Non-Hispanic Asian residents had higher proportions of educational attainment, employment, and annual household income than the overall county population; **however, over 20% still lived under the 200% Federal Poverty Level (FPL).**
- ❖ **Non-Hispanic Asian residents were less likely to utilize public assistance programs**, including food stamps, SSI, and TANF/CalWORKS, than the overall county population.
- ❖ Non-Hispanic Asian residents were generally healthier than the overall San Diego County population in terms of behavioral health, communicable (infectious) diseases, injuries, and maternal and child health. **However, in terms of non-communicable (chronic) diseases, non-Hispanic Asian residents had higher death rates due to stroke, diabetes, and certain types of cancers than the overall San Diego County population.**
- ❖ **Eight out of 10 leading causes of death among non-Hispanic Asian residents were due to non-communicable (chronic) diseases**, with cancer as the number one leading cause of death among non-Hispanic Asians. This indicates a need for prevention measures, including screening for cancer and monitoring of blood sugar, blood pressure, and cholesterol.
- ❖ **A lower proportion of non-Hispanic Asian residents reported practicing safe sex, such as using birth control and getting tested for HIV, compared to the overall county population.** Increased sex education and services may help to decrease sexual health risk behaviors among this population.
- ❖ A lower proportion of non-Hispanic Asian residents reported experiencing psychological distress, severe impairment in different aspects of life, and suicidal thoughts. Among those who needed help, **non-**

**Hispanic Asian residents were more likely to seek any emotional and/or mental health treatment compared to the overall county population.** Increased mental and emotional health programs and services may continue to help destigmatize the topic of mental/emotional/behavioral health, encourage use of services, and promote awareness.



## Data Sources

**California Health Interview Survey (CHIS) Data:** UCLA Center for Health Policy Research, California Health Interview Survey (CHIS), 2018-2021.

**Death Data:** California Department of Public Health, Center for Health Statistics, Office of Health Information and Research, Vital Records Business Intelligence System (VRBIS), 2019-2021. *The COVID-19 pandemic was associated with increases in all-cause mortality. COVID-19 deaths have affected the patterns of mortality.*

**Maternal and Child Health Data:** State of California, Department of Public Health, Center for Health Statistics and Informatics, Birth and Fetal Death Statistical Master Files, Birth Public Use Files, California Comprehensive Birth Files, 2019-2021. County of San Diego, Health and Human Services Agency, Public Health Services, Maternal, Child and Family Health Services.

**Morbidity (Hospitalization, Emergency Department Discharge, and In-Patient Treatment) Data:** California Department of Health Care Access and Information (HCAI), Emergency Department Database and Patient Discharge Database, 2019-2021.

**SANDAG Population Estimates:** San Diego Association of Governments (SANDAG) Population Estimates, 2019 (v05/2020), 2020 (v09/2022), and 2021 (v09/2022). *Population estimates for 2020 and 2021 were derived using the 2010 Census and data should be considered preliminary.*

