HEALTH

INTRODUCTION

Health outcomes are determined by a combination of social, economic, environmental, genetic, and behavioral factors. Due to the prominent environmental hazards and elevated social vulnerability of disadvantaged communities in the San Joaquin Valley, a large proportion of the population is at risk of experiencing adverse health outcomes.

Significant health threats in the San Joaquin Valley include poor air quality, drinking water contamination, food deserts, and limited access to quality health care. Specific groups have elevated health risks due to the barriers they face in accessing care, including linguistic and cultural barriers for immigrants, and discriminatory barriers for the LGBTQ community. These factors impact the overall health and well-being of residents, especially low-income people and people of color.

REGIONAL OVERVIEW

- The social vulnerability of communities in the San Joaquin Valley is higher than communities in the state as a whole. Low-income communities and communities of color in the San Joaquin Valley are disproportionately affected by environmental hazards and poor health outcomes.
- On average, the population of the San Joaquin Valley experiences higher rates of asthma and diabetes compared to the population statewide.
- Residents in the San Joaquin Valley have a shorter life expectancy on average compared to the population statewide.

HEALTH CARE ACCESS

The San Joaquin Valley’s Medi-Cal-eligible population has increased in absolute numbers since 2015. This increase is possibly a reflection of population growth in the San Joaquin Valley or a change in the economic circumstances of the population. These numbers underline the growing need for Medi-Cal services in the region. There is an ongoing shortage of healthcare professionals in the San Joaquin Valley. In 2015, the region had an average of 138 active physicians per 100,000 residents, compared to the statewide average of 237 active physicians per 100,000 residents. This lack of an adequate supply of health care professionals is a contributing factor to poor health outcomes.

Accessing health coverage is also challenging for the valley’s farmworkers, particularly those who are undocumented. Current estimates of the percentage of farmworkers enrolled in Medi-Cal range from 23% to 36%. The 2018 Health Equality Index identified and scored a small number of Federally Qualified Health Centers (FQHC) in the San Joaquin Valley. Only some meet the FQHC’s criteria for equity, access, and cultural competency. As one example, the number of healthcare providers that serve the LGBTQ community are limited, and gaps in health care services remain for transgender women of color and other vulnerable populations.

ADVERSE HEALTH OUTCOMES

Asthma

Asthma rates for all eight counties in the San Joaquin Valley are higher than the statewide average. According to the CalEnviroScreen statewide assessment tool, all eight counties rank in the 60th percentile or above for the number of asthma-related emergency department visits. CalEnviroScreen uses percentiles to assign scores for specific indicators, representing a relative score for a given geographic area. Higher scores indicate higher risk or exposure. Kings and Merced Counties report some of the highest numbers of asthma-related emergency department visits, ranking above the 75th percentile. The number of visits for a specific population size serves as an indicator of how susceptible the population is to environmental pollutants. It also provides valuable clues about the level of health care access (or lack thereof), since emergency room visits can more often be avoided when asthma is managed with consistent care and proper medication.
Diabetes
In each of the eight counties in the San Joaquin Valley, the percentage of adults age 20 years or older who have been diagnosed with diabetes (ranging from 9.3% to 14.2%) is higher than the percentage of adults diagnosed statewide (8.5%).xvi Fresno, Kings, Madera, Merced, and Stanislaus Counties have the highest rates in the valley. Diabetes can lead to kidney failure, vision loss, heart attack, stroke, and loss of limbs.xvi

Life Expectancy
As of 2019, life expectancy in the San Joaquin Valley ranges from 77.6 to 79.9 years.xiii This is lower than the overall life expectancy in California of 81.5 years.xiv In addition, there are significant disparities in life expectancy across demographic groups and neighborhoods, reflecting a cumulative impact of social and environmental factors.

ENVIRONMENTAL HEALTH THREATS

Poor Air Quality
The population in the San Joaquin Valley is disproportionately affected by poor air quality relative to the population of the state as a whole, enduring high concentrations of fine particulate matter (PM2.5) and ozone (smog) across the region. According to the CalEnviroScreen statewide measure, all eight counties rank above the 70th percentile for PM2.5 concentration, while Fresno, Kings, Merced, Stanislaus, and Tulare Counties rank at or above the 90th percentile.xv Higher scores indicate higher risk or exposure. PM2.5 poses a serious threat to human health, contributing to adverse respiratory conditions, cardiovascular damage, and increased mortality.xvi

Drinking Water Contamination
Based on the CalEnviroScreen statewide measure, all San Joaquin Valley counties rank at or above the 60th percentile for drinking water contaminants, indicating a higher level of exposure in the valley than the state overall. Safe, abundant, and affordable drinking water is essential for human health and has been determined a basic human right in recent California legislation.xvii High exposure to drinking water contaminants can lead to multiple health risks, including gastrointestinal illnesses, compromised cognitive development, neurological disorders, liver and kidney damage, reproductive complications, and cancer.xviii Residents are further burdened economically by the cost of paying for contaminated tap water and the bottled water they are using in its place, as well as by the costs associated with ill health.

Food Deserts
The location of full-service grocery stores shapes whether residents can access healthy and affordable food: this plays a significant role in the health of communities in the San Joaquin Valley. Many low-income neighborhoods in the valley have high numbers of residents who live more than one mile (in urban areas) or ten miles (in rural areas) from the closest supermarket, making access difficult. Between 2010 and 2015, the percentage change in low-income neighborhoods with low access to grocery stores has varied across the valley. The largest decrease in access took place in Madera (24.5%), Merced (33.2%), and San Joaquin (33.1%) Counties. During that time period, some improvements have taken place, with the greatest increase in Fresno (23.7%) and Kings (13.8%) Counties.

Citations are available at The Center web site.