

Community Health Improvement Partners

**Qualitative Research Findings
Needs Assessment Study**

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STRATA
RESEARCH

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I. INTRODUCTION AND METHODOLOGY

Strata Research (Strata) partnered with the Community Health Improvement Partners (CHIP) to execute qualitative focus groups among various demographic segments throughout San Diego County. The various organizations of CHIP sent invitations to local hospitals, recreational centers, Senior centers, and other communal areas throughout the county. These invitations asked people to call a toll free number if they were interested in participating in focus groups about current health issues in San Diego. This toll free number connected the respondent directly with Strata's telephone center, where an interviewer was waiting to conduct a survey that would determine whether or not they qualified for one of the focus groups.

In addition to the inbound calls received from the invitations, Strata also conducted the interviews via random digital dial (RDD) based on San Diego County zip codes. In total, we recruited for 9 groups, stratified by the following:

- Seniors ages 65 and older
- Older adults ages 45 – 64
- Adults ages 25 – 44
- Young adults ages 19 – 24
- Parents of children ages 0 – 14
- Adolescents ages 15 – 18
- Uninsured
- Insured
- Spanish

The groups were held April 13th, 14th, and 15th at Strata's research center in San Diego. The groups were two hours in length, and we spoke with approximately 9 respondents in each.

II. HEALTH ISSUES: UNAIDED

Respondents were asked on an unaided basis to discuss all current health concerns they personally have living in San Diego County*. The following were the most commonly mentioned health concerns throughout the 9 groups:

- Availability of health care
- Access to insurance
- Treatment of patients
- Education and prevention
- Prescription drugs

Availability of General Healthcare

One of the most common health concerns among all groups is the availability of healthcare in general, namely with regard to the accessibility of getting an appointment and the time spent waiting at the doctor's office. Many respondents indicated that they will "wait it out" if they do not feel well, rather than going through the hassles to see a doctor. The amount of time spent waiting at the doctor's office for one's appointment to begin and the time it takes to schedule an appointment in the first place are major deterrents to receiving general health care. Cost per visit, or co-payments, were also mentioned as concerns regarding the availability of health care.

- *"It's a four hour wait, and it's really expensive" – Adult*
- *"If cost went up every year, and so did the quality of care, that would be one thing. But that's not happening" – Older Adult*
- *"If you're paying for healthcare, you should be able to get an appointment, not wait 4 weeks" – Young Adult*
- *"When I have 4 kids at home and have to pay a co-pay for all of them at the same time, I make a home remedy" – Adult*

Some adolescents mentioned a particular concern with access to contraceptives and birth control, and mentioned Planned Parenthood as being a solution to such concerns; however, the time spent waiting at the clinic is a major deterrent to seeking help, and many simply do not use birth control as a result.

* This is with the exception of Parents, who were asked to discuss concerns they have about their children

Access to Insurance

The difficulty in availability and cost of attaining insurance was mentioned by all who were not insured, as well as some who were. Constant increase in rates was the top concern by those worried about access to insurance, followed by ability to receive insurance, since not all jobs offer an insurance program, and those that do don't always offer affordable, quality insurance programs.

- *“We don't have insurance because we can't afford it” - Uninsured*
- *“I turned down a couple of jobs because they didn't offer full coverage, or any at all. If it's not full coverage, they'll cover you but not you're family” – Young Adult*
- *“I've been offered healthcare, but I couldn't afford it. When I make \$8 an hour, and they want \$150 a month, it's just not feasible” – Uninsured*
- *“Even if we have insurance, that doesn't mean it's quality” – Parent*
- *“If you're not employed, it's nearly impossible to get” – Older Adult*

Treatment of Patients

Additionally, the manner in which the patient is treated was a large concern, with many mentioning anecdotes of spending numerous hours in the waiting room and only a few minutes with the doctor. The majority of people we spoke with voiced strong concerns and frustrations about the lack of personal attention received from their doctors and healthcare providers. Also, there was a general concern that doctors are quick to give a brief check-up and not probe further into issues that may not be apparent, but could be a concern.

- *“You're rushed in and rushed out, and not given any personal attention” – Senior*
- *“I have a vibration in my ear, and instead of looking at it, they tell me not to listen to loud music. I have a concern and they tell me it's nothing and not to worry, but they never looked at it. They were in such a hurry” – Young Adult*
- *“I have severe allergies and all they would give me is nasal spray. I had an HMO and they wouldn't give me shots for my allergies. The treatment you get and the lack of care are why I left that insurance” – Adult*
- *“If I don't bring it up, it's not mentioned by my doctor. He checks basic things and that's it” - Insured*

Another concern with the treatment of patients is misdiagnosis by doctors and lack of referrals to other doctors or specialists, which many felt tied into the lack of personal attention received. These factors, for some, have grown into a mistrust of their doctor and doctors in general.

- *“My doctor tries to do everything himself, and never refers me to anyone else. He never ran any tests, and my shoulder still hurts” – Adolescent*
- *“For 5 years I had pain in my stomach and back, and I was never diagnosed with anything. When I switched insurance companies, I had one visit and my doctor found the problem” – Insured*
- *“I go into the doctor and say I think I have the flu, so he gives me antibiotics, but doesn’t look at me.” – Young Adult*
- *Antibiotics are given away too easily, without even seeing if it’s the appropriate one” – Parent*
- *“My husband was diagnosed as having leg problems, when it really was internal bleeding as a result of a ruptured blood clot” – Older Adult*
- *“I have a major issue with doctors prescribing things wrong, and misleading us by pretending to know what they’re talking about when they don’t” – Adolescent*

Education and Prevention

The desire for further education was apparent in all groups, as was the interest in understanding and learning how to take preventative measures to avert illness. Some expressed interest in being educated on alternative forms of medication as well.

- *“I’m more worried about prevention. I want to know what’s out there, like any potential problems” – Young Adult*
- *“You need to start by educating kids so that they get in the habit of being healthy young, and can continue throughout life” – Senior*
- *“When people get into Senior centers, they should have an evaluation, then be taught how to live healthy and eat well” – Senior*

About a third of respondents mentioned that they educate themselves by reading up on current health issues or concerns, with the majority citing the Internet as a good resource for education. A few write down questions for the doctor before going in for an appointment, and another couple, namely uninsured, simply self diagnose based on their findings.

Parents are also particularly concerned with education for their children, but more in terms of substance abuse, STDs, and safe sex.

- *“There needs to be more education; teach kids about these issues (substance abuse) and how to prevent them” – Parent*
- *“Have more sex education – not the kind where you ‘don’t do it’, but the kind where you say ‘if you’re going to do it, this is how to be safe” - Parent*

Prescription Drugs

Cost of and access to prescription drugs was also a large concern, mainly among seniors, who worry about their insurance putting a cap on the amount of drugs one can use, as well as doctors prescribing drugs not covered by insurance. This was also a concern among uninsured, who are so concerned with the cost, they often look to alternative forms of medicine in many cases.

- *“I belong to an HMO, but there’s a cap on the amount of drugs you can get” – Senior*
- *“Some of the drugs my doctor prescribes, Medi-Cal and Medi-Care won’t cover, and I can’t afford them” - Senior*
- *“I go to K-Mart, Wal-Mart, wherever, and try to find a temporary fix” – Uninsured*
- *“I use Echinacea and other things for colds, but I’ve tried homeopathic remedies for pain and they don’t work” – Uninsured*

Other overriding health concerns mentioned unaided among these groups were nutrition, respiratory issues and the environment (air pollution from the SD fires were mentioned frequently), and cost of dental visits and treatments. The cost of dental treatment was a particular concern among uninsured, while nutrition was mentioned by almost all respondents in the adolescent group.

III. HEALTH ISSUES: AIDED

Respondents were handed a list of health issues that were identified by the US Department of Health and Social Services as the 2010 Leading Health Issues, and with the list, each respondent put an asterisk next to three of the twenty options that were of most concern to them personally. Respondents were then asked to identify which one issue of the three was **the** most important health issue in their minds. While answers varied among the different demographic segments, there were overriding correlations between the groups, both in primary concerns, as well as overall concerns for the community and themselves personally. The following table illustrates the overall number of mentions for each concern, as well as the primary concerns revealed by all 9 groups.

Health Concerns	Mentions	% *	Primary Concern	%**
Access to quality health services	44	68%	17	26%
Physical activity and fitness	26	40%	3	5%
Environmental health (including air and water quality, and hazardous waste)	24	37%	4	6%
Nutrition and overweight	24	37%	5	8%
Cancer	20	31%	3	5%
Oral and dental health	19	29%	3	5%
Arthritis, osteoporosis, and chronic back conditions	16	25%	7	11%
Immunization and infectious diseases	16	25%	2	3%
Heart disease and stroke	15	23%	3	5%
Family planning (including achieving planned pregnancies and preventing unintended pregnancies)	13	20%	1	2%
Diabetes	11	17%	1	2%
Maternal, infant and child health	11	17%	1	2%
Sexually transmitted diseases (not including HIV/AIDS)	10	15%	1	2%
Substance abuse (including drugs and alcohol)	10	15%	4	6%
Tobacco use	10	15%	1	2%
Respiratory diseases (including asthma, COPD and sleep apnea)	9	14%	3	5%
Injury and violence prevention	8	12%	1	2%
Mental health and mental disorders	7	11%	1	2%
Health promotion and disease prevention for persons with disabilities	6	9%	3	5%
HIV/AIDS	4	6%	1	2%

* Percentages do not add up to 100%, as this was a multiple response question and each respondent gave a maximum of 3 responses

** Due to rounding, percentages may add to be slightly higher than 100%

Access to Quality Healthcare

Overall, access to quality healthcare was the most frequently mentioned health concern in the 2004 Needs Assessment Qualitative Research Study. In fact, all demographic groups we spoke with chose access to quality health care as their primary or secondary health concern. Not surprisingly, however, while adolescents chose access to quality healthcare as their second most prominent concern, there was a sense that the concern was more for future access, as many were quoted saying “my parents take care of that” when discussing specific issues such as scheduling appointments and paying for medication.

Access to healthcare was defined as availability to insurance, doctor’s appointments, and medication, as well as affordable insurance, appointments, and medication. The ability to be seen by a physician and be able to afford the visit and medication is the overriding definition of access to healthcare.

- *“To be able to afford it” – Adult*
- *“The ability to see the right person, and if that doctor doesn’t know, they refer you to the right person who does” – Senior*
- *“If you’re paying for healthcare, you should be able to get an appointment without waiting three weeks” – Young Adult*

The term quality was defined by respondents as the manner in which the patient is treated: being able to quickly get an appointment with a doctor, not having to wait for hours or in a crowded room to be seen by the doctor, and having personal attention from the physician so as to not feel like a number. Such concerns were voiced in the unaided mentions of the concern for general healthcare, as well as in this aided discussion.

- *When you go in for a broken finger, and they can see that you have melanoma, and they don’t mention it but just treat the finger, that’s not quality” – Insured*
- *“Accurate diagnosis, cleanliness, and follow-ups are important” – Older Adult*
- *“Be more concerned with individuals, and not leave so fast after appointments” – Parent*
- *“Quality means less waiting. No one comes up and tells you how long the doctor is going to be, or what’s going on”- Adult*

Additionally, the ability to see the same doctor numerous times, and have long term, ongoing care, is defined as quality, and is very important to parents, and

- *“Quality is customer service too. I pay so much, and I don’t even know who my primary physician is” – Parent*
- *“Quality is constant check-ups. My doctor comes in, measures my son, says he’s growing and that’s that: ‘See you in a month’. My son is an epileptic and that’s all they do. When I call for an appointment, I get put off until much later” – Parent*

Physical Activity and Fitness

Physical activity and fitness received the second highest number of mentions in total, with older adults, adults, Seniors, and Hispanics revealing particular concern for this issue. Many respondents feel that physical activity and fitness are essential elements in maintaining one's health, and are the best ways to prevent health problems from occurring in the first place, and there is a concern that the positive effects of physical activity are being taken for granted.

- *“Physical activity is about health now, not just looking good” – Older Adult*
- *“It's the biggest part of my life. I'm active and I feel perfectly healthy” – Adult*
- *“We need to educate [others], because exercise is just as important as dieting” – Senior*
- *“It's important because if you start young, it's an early prevention to problems you get when you're older” - Adolescent*

Nutrition and Obesity

Older adults and young adults mainly discussed their concern with obesity being the cause of other health issues such as cholesterol, diabetes, and heart disease, while Seniors, adults, insured, and adolescent groups were more concerned with nutrition as prevention to later health issues.

- *“Obesity is a source for causing a lot of other issues; cholesterol and diabetes are both results” – Older Adult*
- *“[Heart disease and stroke] go back to people's diets too. People don't care what they eat; they just eat what's put in front of them”- Senior*
- *“It's important because if you start young, it is an early prevention to problems you get when you're older” – Adolescent*
- *“I think by having a good diet and watching your weight, you prevent future issues” – Adult*
- *“Schools should do more to educate kids, since obesity is such a problem” - Insured*

Surprisingly, nutrition and obesity were not mentioned as concerns that parents currently have for their children, even though adolescents, insured, and young adults expressed concern for the lack of nutritional options currently offered in schools.

- *“There’s too much junk at school. They sell sodas, chips, candy, and never salads or water” – Insured*
- *“The school lunches are nasty. Why can’t they give us good food?” - Adolescent*

Environmental Health (including air and water quality, and hazardous waste)

The quality of air and water was a concern voiced in many of the groups, and many respondents expressed specific concern for the air and water quality in San Diego as a result of the recent fires, in addition to general pollution and the heavy usage of cars in California. Older adults and Hispanics in particular mentioned a concern about the affect the poor quality of the air will have on asthma and other respiratory issues, while other groups, such as young adults, adolescents, and some adults placed more concern on the condition of the water for drinking and swimming. Insured and other adults emphasized the pollution caused by traffic and cars, in addition to poor quality of water.

- *“The fires really affected [my respiratory issues]. I was really sick for a while” – Older Adult*
- *“After the fires, especially, the water is so bad, you can’t even drink it” – Adult*
- *“I surf and see cheeto bags in the water, and then five minutes later, I see dolphins in the same place. It’s bad for them, and it’s bad for me” – Young Adult*
- *“San Diego dumps their sewage three miles out, but with the right current, it comes back” - Insured*
- *“Half the time you go to the bay, it says do not get in the water, and there’s trash all over the park. It puts a damper on things” – Adolescent*
- *“You open your window for a few hours and there’s a thick, black film. It’s exhaust” – Adult*
- *“I see people driving all the time with smoke coming out of their cars, and no one does anything” - Insured*

The respondents from the Seniors group made a mention about the importance of air and water quality, but did not perceive it as a major concern. It was not a prominent concern among the uninsured group, and was not mentioned at all.

Cancer

Cancer was a prominent issue among 6 of the 9 groups, with the exception of the insured, adolescent, and adult groups. The majority of those who were concerned with the disease revealed that their concern was based on personal experience, either having had cancer themselves, or seeing friends or family members who were inflicted. Most comments heard in each group when probed to discuss why it was a concern were “I had it” or “my husband / wife / mother / father had it.” In addition to personal experience, the main cause to be concerned about cancer was the frequency with which people contract a disease that comes without warning.

- *“These days, everything gives you cancer. Everyone who dies is dying from cancer. It’s so common; you can get it from your cell phone. You’re going to get it and you can’t avoid it, so that is a major concern for me” – Young Adult*
- *“So many people have it. It’s the silent assassin; people don’t know until it’s too late. People come in and seem perfectly healthy, but the next day, the doctor calls. I think it’s something people really need to be more educated on; there are so many types now” – Young Adult*
- *“My family was perfectly fine, then one day, two had cancer. It’s lethal and sneaks up on you” – Parent*
- *“My whole family has gotten cancer. When you have a person at risk, they don’t give you any special treatment. I know they can’t give CAT scans to everyone, but what about high-risk people?” – Parent*

Oral and Dental Health

The cost of maintaining good oral and dental health was the main factor that caused respondents to be concerned with this issue. The uninsured group voiced the most concern with oral and dental health compared to any other group because of the cost of check-ups and procedures when one does not have insurance. Hispanics, who were concerned that many insurance companies do not include dental care in their coverage, echoed this cost concern, as did young adults and insured. Adults expressed a particular concern about the lack of options in terms of availability of insurance and providers. Interestingly, while cost was the main concern for all other groups who mentioned this issue, the insured group expressed concern for possible malpractice, questioning the amount and doses of drugs being administered.

- *“Access to a dentist is worse than to a doctor” – Uninsured*
- *“The co-pay on dental insurance is so ridiculous, I don’t even try to afford it” – Uninsured*
- *“It’s too expensive” – Young Adult*
- *“I don’t have dental insurance but I do get a check-up each year and just pay for it. It’s a huge issue, though, because there aren’t that many dental providers out there” – Adult*
- *“They gave me drugs for my wisdom teeth and my mom told me not to take them so I didn’t; they were overmedicating me” – Insured*
- *“I’m always worried that they will pull a tooth unnecessarily” - Insured*

IV. HEALTH ISSUES: SPECIFIC TO DEMOGRAPHIC GROUPS

Substance Abuse

The issue of substance abuse was extremely important among adolescents and parents, and with the exception of Seniors, no other group mentioned concern for the issue. Adolescents revealed that substance abuse is very prominent in schools, and that drugs and alcohol are easily accessible. However, the largest issue brought up by adolescents is the fear that help is not accessible for such issues.

- *“It’s a big issue among high school students because a lot of people use drugs and drink, and I don’t know what the long term effects would be when you do it when you’re not old enough” – Adolescent*
- *“You can get that stuff anywhere nowadays” – Adolescent*
- *“The big problem is with kids who want to stop or help someone, but it’s too hard to bring it up to other people because you don’t want them to get them or yourself in trouble. Like if someone overdoses, where do you take them? I don’t know anywhere you can take them anonymously” - Adolescent*

Parents in particular are concerned about the lack of prevention measures and education that are being offered surrounding substance abuse, in addition to feeling somewhat helpless by not knowing what is currently out there and being offered to kids.

- *“There needs to be after school programs. Kids need to be motivated to do something, not just sit at home after school and do nothing. That’s when they start doing drugs” – Parent*
- *“I’d like some classes I can take my kids to; topics she won’t listen to me about, like condoms, sex, AIDS, etc.” – Parent*
- *“The drug and sex scene nowadays is so different then when I was a kid, so how do I know what to look for?” - Parent*

Arthritis, Osteoporosis, and Chronic Back Conditions

Arthritis, osteoporosis, and chronic back conditions were particularly a concern among the uninsured and Hispanic groups because of personal experience.

- *“It’s particularly important among women” – Older Adult*
- *“I have it and it runs in my family” – Uninsured*
- *“I’m 26, and I’ve been popping vicadin twice a day for my back since I was 19. What is going to happen when I’m 40?” – Uninsured*

Heart Disease and Stroke

Seniors and older adults found heart disease and stroke to be significant concerns currently in their lives for similar reasons to cancer: it's prominent, occurs frequently, and sneaks up on the patient.

- *“Heart disease and stroke are important because they're one of the biggest killers these days, even more than cancer” – Senior*
- *“It's silent; it can affect anyone, no matter how healthy, and it just sneaks up on you” – Older Adult*
- *“I had no problems, no indication. I ran 3 miles a day, 3 times a week. No indication” – Older Adult*

Mental Health and Mental Disorders

The Hispanic group was the only one to recognize mental health and mental disorders as being current issues with which they are concerned today. Some stated that there is a terrible shortage of programs designed to meet the needs of families with these issues, and that the schools are ill equipped to effectively teach the children and offer guidance to parents.

STDs

Although STDs was mentioned briefly by parents, adolescents were the only group to mention STDs as being a prominent concern in their lives. While a couple of respondents in the adolescent group felt that the availability of information and contraceptives was not an issue, most agreed that the availability of information, particularly in schools, as well as getting access to treatment, is an issue.

- *“In school, all they teach is abstinence, but that's not helping. It's not realistic, and they can tell us not to do something, but we're going to do in anyway, so they should tell us at least how to be safe” – Adolescent*
- *“I've waited 6 hours before (at Planned Parenthood), with nowhere to sit. They offer good care, and you get it for free, but getting in is the issue” – Adolescent*
- *“I think we're educated about STDs because we go out and find it through places like Planned Parenthood and magazines, but the schools do nothing for it” – Adolescent*

Interestingly, no one in any of the groups mentioned HIV / AIDS as being a health concern. When probed why no one had mentioned it, an older adult explained, and other groups echoed that:

- *“It's not a concern because we are very well educated as how not to get it, and funding is very substantial for this disease, so it's not as big of a concern” - Older Adult*

The following tables reflect the specific overall mentions and the top health concerns revealed by each demographic group.

Seniors

Health Concerns	Mentions	Top Concern
Access to quality health services	6	1
Physical activity and fitness	6	1
Nutrition and overweight	5	1
Heart disease and stroke	4	1
Arthritis, osteoporosis, and chronic back conditions	3	1
Health promotion and disease prevention for persons with disabilities	2	1
Environmental health (including air and water quality, and hazardous waste)	2	1
Tobacco use	2	1
HIV/AIDS	1	
Mental health and mental disorders		1

Older Adults

Health Concerns	Mentions	Top Concern
Access to quality health services	7	4
Nutrition and overweight	5	2
Cancer	4	
Heart disease and stroke	3	1
Physical activity and fitness	3	
Respiratory diseases (including asthma, COPD and sleep apnea)	2	
Arthritis, osteoporosis, and chronic back conditions	1	
Diabetes	1	1
Environmental health (including air and water quality, and hazardous waste)	1	1
Immunization and infectious diseases	1	

Young Adults

Health Concerns	Mentions	Top Concern
Access to quality health services	3	2
Cancer	3	
Environmental health (including air and water quality, and hazardous waste)	3	
Arthritis, osteoporosis, and chronic back conditions	2	
Family planning (including achieving planned pregnancies and preventing unintended pregnancies)	2	
Heart disease and stroke	2	
Immunization and infectious diseases	2	1
Injury and violence prevention	2	
Oral and dental health	2	

Adolescents

Health Concerns	Mentions	Top Concern
Sexually transmitted diseases (not including HIV/AIDS)	5	1
Access to quality health services	4	2
Physical activity and fitness	4	
Substance abuse (including drugs and alcohol)	4	3
Cancer	3	
Environmental health (including air and water quality, and hazardous waste)	3	1
Family planning (including achieving planned pregnancies and preventing unintended pregnancies)	3	1
Nutrition and overweight	3	
Tobacco use	3	
Arthritis, osteoporosis, and chronic back conditions	2	1
Diabetes	2	
Heart disease and stroke	2	
Immunization and infectious diseases	2	
Respiratory diseases (including asthma, COPD and sleep apnea)	1	

Parents of Children ages 0 - 14

Health Concerns	Mentions	Top Concern
Access to quality health services	6	1
Maternal, infant and child health	4	1
Sexually transmitted diseases (not including HIV/AIDS)	4	
Cancer	3	2
Immunization and infectious diseases	3	
Oral and dental health	3	
Arthritis, osteoporosis, and chronic back conditions	2	
Diabetes	2	
Environmental health (including air and water quality, and hazardous waste)	2	1
Family planning (including achieving planned pregnancies and preventing unintended pregnancies)	2	
Injury and violence prevention	2	
Mental health and mental disorders	2	
Substance abuse (including drugs and alcohol)	2	1
HIV/AIDS	1	
Tobacco use	1	

Adults

Health Concerns	Mentions	Top Concern
Access to quality health services	6	4
Physical activity and fitness	5	1
Environmental health (including air and water quality, and hazardous waste)	4	
Immunization and infectious diseases	3	
Maternal, infant and child health	3	
Nutrition and overweight	3	1
Oral and dental health	3	1
Cancer	2	
Diabetes	2	
Family planning (including achieving planned pregnancies and preventing unintended pregnancies)	2	
Respiratory diseases (including asthma, COPD and sleep apnea)	1	1

Uninsured

Health Concerns	Mentions	Top Concern
Access to quality health services	5	
Oral and dental health	4	
Arthritis, osteoporosis, and chronic back conditions	3	3
Cancer	3	
Immunization and infectious diseases	3	1
Diabetes	2	
Health promotion and disease prevention for persons with disabilities	2	1
Physical activity and fitness	2	
Respiratory diseases (including asthma, COPD and sleep apnea)	2	1
Environmental health (including air and water quality, and hazardous waste)	1	
Family planning (including achieving planned pregnancies and preventing unintended pregnancies)	1	
Mental health and mental disorders	1	
Nutrition and overweight	1	

Hispanic

Health Concerns	Mentions	Top Concern
Access to quality health services	4	1
Environmental health (including air and water quality, and hazardous waste)	4	
Physical activity and fitness	4	1
Nutrition and overweight	3	
Oral and dental health	3	1
Cancer	2	1
Health promotion and disease prevention for persons with disabilities	2	1
Heart disease and stroke	2	1
HIV / AIDS	2	1
Injury and violence prevention	2	1
Maternal, infant and child health	2	
Mental health and mental disorders	2	
Substance abuse (including drugs and alcohol)	2	
Tobacco Use	2	
Arthritis, osteoporosis, and chronic back conditions	1	1
Respiratory diseases (including asthma, COPD and sleep apnea)	1	
Sexually transmitted diseases (not including HIV/AIDS)	1	

Insured

Health Concerns	Mentions	Top Concern
Environmental health (including air and water quality, and hazardous waste)	4	
Nutrition and overweight	4	1
Oral and dental health	4	1
Access to quality health services	3	2
Family planning (including achieving planned pregnancies and preventing unintended pregnancies)	3	
Arthritis, osteoporosis, and chronic back conditions	2	1
Diabetes	2	
Heart disease and stroke	2	
Immunization and infectious diseases	2	
Injury and violence prevention	2	
Maternal, infant and child health	2	
Mental health and mental disorders	2	
Physical activity and fitness	2	
Respiratory diseases (including asthma, COPD and sleep apnea)	2	1
Substance abuse (including drugs and alcohol)	2	
Tobacco use	2	

V. CURRENT RESOURCES

When looking for information on current health issues or concerns, the majority of respondents indicated that they look online. Other top mentions included asking their doctor and calling the information line on the back of their medical card.

Specific organizations mentioned throughout the groups as doing a good job providing information for particular concerns, or as coming to mind as resources for these concerns, are as follows:

Environmental Questions:

- County resources – publications, websites, community groups
- Phone book
- CAFTA

Weight Questions:

- 5 a Day Campaign Organization
- Doctor
- Parents

Health and Nutrition Questions

- Senior center
- Jenny Craig

Physical Activity and Fitness

- Personal trainer
- YMCA

Family Planning

- Church
- Doctor
- Parents
- Free clinic, such as Planned Parenthood
- Girl Scouts
- YMCA

Cancer

- American Cancer Society
- American Lung Association
- Doctor

Other organizations mentioned as being good resources for general information about health concerns and issues in San Diego County are:

- Urgent Care
- 911
- Sign on San Diego
- AARP
- Insurance website
- Teen help line
- Free family magazines (offered at grocery stores and some restaurants)
- Health and Human Services

Specific medical organizations mentioned multiple times in these groups as doing well as maintaining care for respondents are:

- Kaiser Permanente
- Scripps
- PacifiCare
- Sharp
- Tri Care
- UCSD
- Healthy Families
- Universal Care

Infoline – 211

Approximately half of all respondents we spoke with were aware of infoline. Those who were cited it as a positive source for health information, and those who were unaware showed extreme interest in the possibility of using the system. When asked where 211 should be advertised, suggestions included:

- General media, including billboards, television, and radio
- In schools (but not give the flyer to the children - rather post the flyer on a bulletin board the parents will see, or send directly home)
- Magnets
- Pamphlets in the mail
- Buses
- Advertise in the Penny Saver
- Presentations in schools
- Public service announcements

VI. RESPONDENT PROFILE

Seniors

Gender	Age	Parent	Medical Insurance Provider	Education	Years being Resident	Income	Ethnicity
Female	65+	No	Kaiser Permanente	High school graduate	10+ years	Under \$20K	African American
Female	65+	No	Other	Post graduate work	10+ years	\$70K-\$80K	Caucasian
Female	65+	No	Kaiser Permanente	Some college	10+ years	\$20K-\$30K	African American
Female	65+	No	Medi-Care	High school graduate	10+ years	Under \$20K	African American
Male	65+	No	Medi-Care	Some college	6-10 years	Under \$20K	African American
Male	65+	No	Other	Post graduate work	10+ years	\$30K-\$40K	Caucasian
Male	65+	No	Do not have medical insurance	Post graduate work	3 to 5 years	Under \$20,000	Caucasian
Male	65+	No	Blue Cross	College graduate	10+ years	\$60K- \$70K	Caucasian
Male	65+	No	Medi-Care	Post graduate work	10+ years	Under \$20,000	Caucasian

Older Adults

Gender	Age	Parent	Medical Insurance Provider	Education	Years being Resident	Income	Ethnicity
Male	45-64	No	PacifiCare	Post graduate work	10+ years	\$60K-\$70K	African American
Female	45-64	No	Health Net	College graduate	10+ years	\$80K+	Caucasian
Female	45-64	Yes	Kaiser Permanente	Some college	10+ years	\$70K-\$80K	Caucasian
Male	45-64	Yes	Health Net	Post graduate work	10+ years	\$40K-\$50K	Caucasian
Male	45-64	No	Blue Cross	Post graduate work	10+ years	DK/REF	Caucasian
Male	45-64	No	Do not have medical insurance	Some college	10+ years	Under \$20K	Caucasian
Male	45-64	No	Other	Post graduate work	10+ years	\$80K+	Caucasian
Female	45-64	No	Kaiser Permanente	College graduate	10+ years	\$40K- \$50K	Caucasian
Female	45-64	No	Kaiser Permanente	College graduate	10+ years	\$80K+	Hispanic

Young Adults

Gender	Age	Parent	Medical Insurance Provider	Education	Years being Resident	Income	Ethnicity
Female	19-24	No	Do not have medical insurance	Some college	10+ years	\$20K-\$30K	African American
Male	19-24	Yes	Blue Cross	Some college	6 to 10 years	\$20K-\$30K	Hispanic
Female	19-24	Yes	Other	Some college	10+ years	\$20K-\$30K	Caucasian
Female	19-24	No	PacifiCare	College graduate	10+ years	\$20K-\$30K	Asian
Male	19-24	No	Blue Cross	College graduate	1-2 years	\$20K- \$30K	African American
Female	19-24	No	Kaiser Permanente	High school graduate	10+ years	\$80K +	Asian
Male	19-24	No	Kaiser Permanente	Some college	3-5 years	Under \$20K	Hispanic
Male	19-24	No	Do not have medical insurance	Some college	10+ years	Under \$20K	Caucasian
Female	19-24	No	Kaiser Permanente	Some college	6 to 10 years	\$70K - \$80K	Hispanic

Adolescents

Gender	Age	Parent	Medical Insurance Provider	Education	Years being Resident	Income	Ethnicity
Male	15-18	No	PacifiCare	High school graduate	6-10 years	\$60K-\$70K	Caucasian
Female	15-18	No	Other	Less than high school	10+ years	\$80K+	Caucasian
Female	15-18	No	Kaiser Permanente	Less than high school	10+ years	\$50K-\$60K	Caucasian
Female	15-18	No	Kaiser Permanente	Less than high School	10+ years	DK/REF	Asian
Male	15-18	No	Other	Less than high school	10+ years	\$40K - \$50K	Other
Male	15-18	No	Other	Less than high school	10+ years	\$30K- \$40K	Caucasian
Female	15-18	No	Do not have medical insurance	High school graduate	10+ years	Under \$20,000	Caucasian
Male	15-18	No	Blue Cross	Some college	10+ years	\$80K+	Caucasian
Female	15-18	No	PacifiCare	Less than high school	10+ years	\$40K - \$50K	Caucasian

Parents of Children 0 - 14

Gender	Age	Ages of Children	Medical Insurance Provider	Education	Years being Resident	Income	Ethnicity
Female	45-64	9	Other	Some college	6-10 years	\$60K-\$70K	Caucasian
Female	25-44	12	Blue Cross	Some college	10+ years	\$20K-\$30K	African American
Female	25-44	12	Kaiser Permanente	Post graduate work	10+ years	\$30K-\$40K	Caucasian
Female	25-44	5	Kaiser Permanente	Post graduate work	10+ years	\$80K+	Caucasian
Male	25-44	13, 2	Other	Post graduate work	3 to 5 years	\$60K-\$70K	Caucasian
Male	25-44	12, 10	Blue Cross	High school graduate	10+ years	\$20K-\$30K	African American
Male	19-24	2	Kaiser Permanente	High school graduate	10+ years	\$20K-\$30K	Hispanic
Female	25-44	7,5	Kaiser Permanente	Some college	10+ years	\$50K- \$60K	Caucasian
Female	25-44	0	Kaiser Permanente	Post graduate work	1-2 years	\$30K- \$40K	Caucasian

Adults

Gender	Age	Parent	Medical Insurance Provider	Education	Years being Resident	Income	Ethnicity
Female	25-44	No	Do not have medical insurance	Post graduate work	1-2 years	\$20K-\$30K	Caucasian
Female	25-44	Yes	Blue Cross	Some college	10+ years	\$20K-\$30K	African American
Female	25-44	No	Other	College graduate	1-2 years	\$40K-\$50K	Caucasian
Female	25-44	No	Other	College graduate	1-2 years	\$30K-\$40K	Caucasian
Male	25-44	No	PacifiCare	College graduate	3-5 years	\$40K-\$50K	Caucasian
Male	25-44	No	Universal Care	College graduate	6-10 Years	\$30K- \$40K	Caucasian
Female	25-44	Yes	Kaiser Permanente	College graduate	6-10 Years	\$80K+	Caucasian
Male	25-44	No	Does not have medical insurance	Some college	1-2 Years	\$20K- \$30K	Caucasian

Uninsured

Gender	Age	Parent	Medical Insurance Provider	Education	Years being Resident	Income	Ethnicity
Female	25-44	No	Do not have medical insurance	College graduate	3-5 years	\$20K-\$30K	Caucasian
Male	25-44	No	Do not have medical insurance	High school graduate	10+ years	Under \$20K	Caucasian
Female	45-64	No	Do not have medical insurance	College graduate	10+ years	\$20K-\$30K	Caucasian
Male	45-64	No	Do not have medical insurance	High school graduate	10+ years	Under \$20K	Caucasian
Female	45-64	Yes	Do not have medical insurance	College graduate	10+ years	Under \$20K	Other
Female	45-64	No	Do not have medical insurance	High school graduate	10+ years	Under \$20K	Caucasian
Female	25-44	No	Do not have medical insurance	Some college	10+ years	Under \$20K	African American
Female	45-64	Yes	Do not have medical insurance	Some college	10+ years	Under \$20K	African American
Male	25-44	No	Do not have medical insurance	High school graduate	10+ years	Under \$20,000	Hispanic
Male	25-44	No	Do not have medical insurance	College graduate	10+ years	Under \$20K	Caucasian

Hispanic

Gender	Age	Parent	Medical Insurance Provider	Education	Years being Resident	Income	Ethnicity
Female	19-24	No	Other	College graduate	6-10 years	\$20K-\$30K	Hispanic
Female	45-64	No	PacifiCare	Some college	10+ years	\$30K-\$40K	Hispanic
Female	25-44	Yes	Sharp	College graduate	10+ years	\$20K-\$30K	Hispanic
Female	25-44	Yes	Universal Care	College graduate	10+ years	\$20K-\$30K	Hispanic
Female	25-44	Yes	Sharp	High school graduate	10+ years	Under \$20K	Hispanic
Male	45-64	Yes	PacifiCare	College graduate	10+ years	\$30K-\$40K	Hispanic
Male	25-44	No	Kaiser Permanente	College graduate	6 to 10 years	\$80,000 or more	Hispanic
Male	19-24	Yes	PacifiCare	Some college	10+ years	\$20K-\$30K	Hispanic
Male	25-44	No	Kaiser Permanente	Some college	3-5 Years	\$20K- \$30K	Hispanic

Insured

Gender	Age	Parent	Medical Insurance Provider	Education	Years being Resident	Income	Ethnicity
Male	15-18	No	Sharp	Less than high school	10+ years	\$80K+	Hispanic
Female	25-44	Yes	Sharp	Some college	10+ years	\$20K-\$30K	Hispanic
Female	45-64	No	Health Net	Some college	10+ years	\$30K-\$40K	Caucasian
Female	25-44	Yes	Other	Some college	10+ years	\$40K-\$50K	African American
Male	15-18	No	Kaiser Permanente	Less than high school	10+ years	\$50K-\$60K	Asian
Male	19-24	No	Other	Some college	10+ years	\$50K-\$60K	Caucasian
Female	25-44	No	Kaiser Permanente	College graduate	3-5 years	\$30K-\$40K	Caucasian
Male	25-44	Yes	Other	Some college	10+ years	\$80K+	Hispanic