OC Community Indicators 2017

TABLE OF CONTENTS

INTRODUCTION

In addition to annually tracking progress on a broad range of issues important to Orange County, the 2017 Community Indicators Report continues to focus attention on three topics that are so pivotal to Orange County's future that we must remain committed to advancing their progress: Children's Health, the Opportunity Gap, and Housing.

This year, the Children's Health Pivot Point drills down into the issue of children's mental health. While the statistics point to many Orange County children and youth in need, there is a groundswell of community efforts to reduce stigma and get our children and families the services they need.

As this year's Opportunity Gap Pivot Point shows, the time is ripe to educate and train workers for "middle-skill" jobs in Orange County. These jobs – which pay higher-than-average-wages, but do not require a four-year college degree – are growing. Improving middle-skill job education and training will go a long way toward supporting a thriving Orange County economy.

Housing – in short supply and largely unaffordable – remains a stubborn problem that threatens the county's ability to remain nationally competitive. Two case studies are highlighted with lessons learned that can be used to make continued progress.

The report's core indicators detail how Orange County is doing in terms of the economy, housing, income, education, health, public safety and infrastructure. These indicators reveal many strengths, as well as many challenges to the county's health and economic stability. Positive trends include job growth and low unemployment, growth in students' academic performance, and a low crime rate. At the same time, ongoing challenges include the growing prevalence of chronic disease among adults, a cost of living 87% higher than the national average, and rents and home prices that are out of reach for many common occupations – further hampering future economic growth and workforce availability.

The Orange County Community Indicators will continue to report our progress and challenges. We hope you will join in the dialogue and action to address the important issues facing this place we call home.

ORANGE COUNTY PROFILE

PLACE

799 Land area (square miles)	**42** Miles of coastline	**3,942** Persons per square mile	**34** Cities and several large unincorporated areas	**8%** of the California population lives in OC on **0.5%** of the state's land area

PEOPLE

|		
3,181,371 Population 2016	**3,558,718** Population 2040	**12%** Percent growth

Age

Orange County residents age 65 and older are the only age group that is projected to grow proportionate to the other age groups in the next 25 years. All other age groups will shrink proportionately. While this growth in the number of seniors mirrors national trends, the growth is more pronounced in Orange County than the nation.

SENIOR POPULATION GROWING WHILE ALL OTHERS SHRINK

Projected Change in Age Group Proportions of Total Orange County Population, 2016 and 2040

Color	Age Group
Green	0-5
Purple	6-17
Red	18-24
Blue	25-44
Gray	45-64
Orange	65+
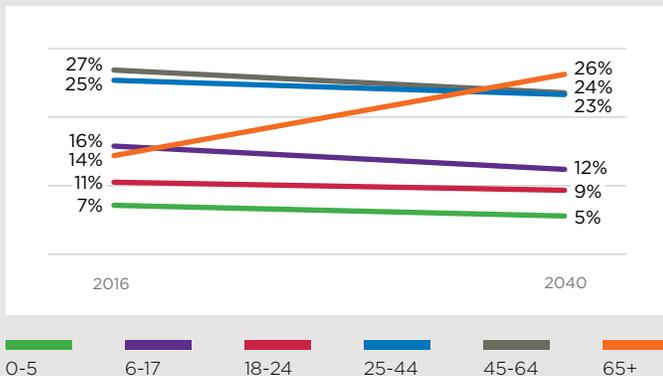
THE DEPENDENCY PRINCIPLE

Demographic trends like those occurring in Orange County may have serious ramifications. The fewer people of working age, the fewer there are to sustain schools, pensions and other supports to the youngest and oldest members of a population. In 25 years, the burden on the average working age resident to financially support the dependent population will be substantially higher than it is today.

NUMBER OF WORKING AGE RESIDENTS FOR EACH DEPENDENT RESIDENT (0-17 AND 65+)

2 2016	**1** 2040

Race/Ethnicity

Orange County is becoming increasingly diverse, with no one race or ethnicity comprising a majority. A prosperous Orange County is one in which all residents have the best possible opportunities for quality education, health, employment, and overall wellbeing. Orange County schools, businesses, nonprofits, philanthropic and government agencies are laying the foundation today for Orange County's long-term prosperity by working to ensure that all residents, regardless of background, have the tools they need to be successful.

OC WILL REMAIN DIVERSE INTO THE FUTURE

Projected Change in the Three Largest Racial and Ethnic Group Proportions of Total Orange County Population, 2016 and 2040

Color	Group
Green	White
Purple	Latino
Red	Asian
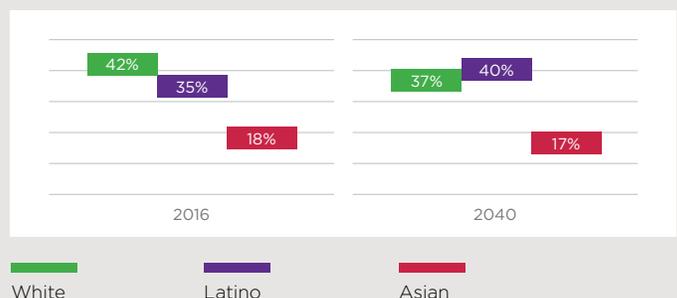
Foreign Born

31%
are foreign born

51%
of foreign born are U.S. citizens

46%
of all residents over age five speak a language other than English at home

Civic Engagement

62%
of the voting-eligible population voted in the 2016 General Election

Education

16%
of adults over age 25 have less than a high school diploma

39%
of adults over age 25 have a Bachelor's degree or higher

ECONOMY

$78,428
Median household income (2015)

3.7%
Unemployment rate (Feb 2017)

$745,000
Median single-family home price (Dec 2016)

Poverty

ONE-QUARTER OF LATINO CHILDREN LIVE IN POVERTY

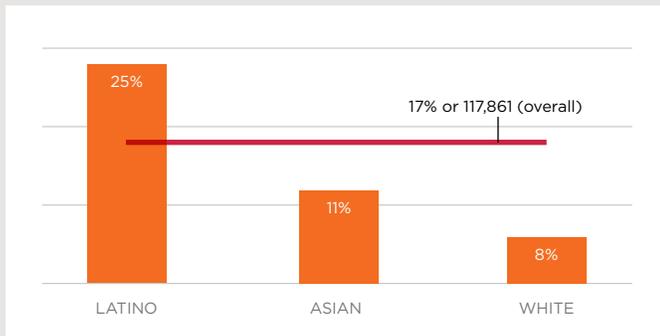Percentage of Orange County Children (Age 0-17) in Poverty by Three Largest Racial and Ethnic Groups, 2015

25% — LATINO
11% — ASIAN
8% — WHITE
17% or 117,861 (overall)

13% Orange County residents living in poverty

17% Orange County children in poverty

34% of Orange County neighborhoods have a high concentration of families that are financially unstable

Poverty data reveal that educational attainment is the single greatest protective factor against a lifetime in poverty. What is more, this is becoming increasingly true. Families with a householder with a Bachelor's degree have largely maintained their high level of financial stability over the past decade, whereas families below this level of educational attainment have increasingly slipped below the poverty line.

EDUCATIONAL ATTAINMENT INCREASINGLY PROTECTS FAMILIES AGAINST POVERTY

Percentage of Families in Poverty by Educational Attainment of the Householder in Orange County, 2011-2015

23% → 26%
11% → 13%
5% → 7%
3% → 3%

2011 2012 2013 2014 2015
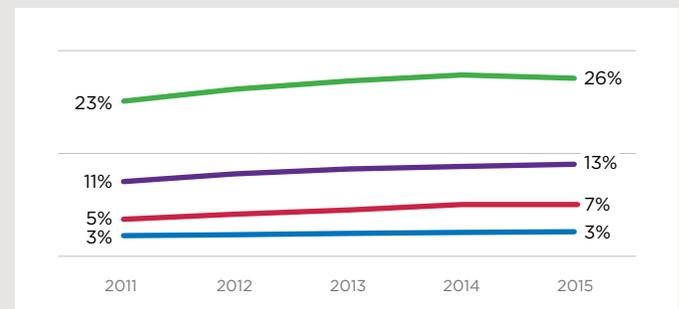
Less than high school graduate
High school graduate
Some college or associate's degree
Bachelor's degree or higher

Data Notes

For the dependency principle analysis, the "working age" productive population is calculated using those ages 18-64. While many residents over age 65 continue working, this is the approximate age that residents may begin drawing on benefits such as pensions, social security, and Medicare.

The racial and ethnic categories presented are the three largest in Orange County and are not mutually exclusive. Latino includes children of any race who are of Hispanic or Latino ethnicity. Asian includes the race Asian alone and includes both Hispanic and non-Hispanic. White, non-Hispanic includes only White alone and non-Hispanic. Projection data by race/ethnicity and age have been updated by the source.

Children's Health and Wellbeing

FOCUS ON CHILDREN'S MENTAL HEALTH

Nearly two-thirds of children needing mental health care receive the services they need. Yet, the rate of Orange County children and youth hospitalized for a mental health condition is rising, particularly depression-related hospitalizations. The suicide rate among youth has not changed significantly in recent years, averaging approximately 12 youth suicides in Orange County annually. Over one-third of Orange County child care providers have had to expel a child due to challenging behavior. What do these trends say about children's mental health in Orange County? What are we doing to address needs and gaps, and what is at stake if we do not? The answers to these questions can help guide our collective work going forward.
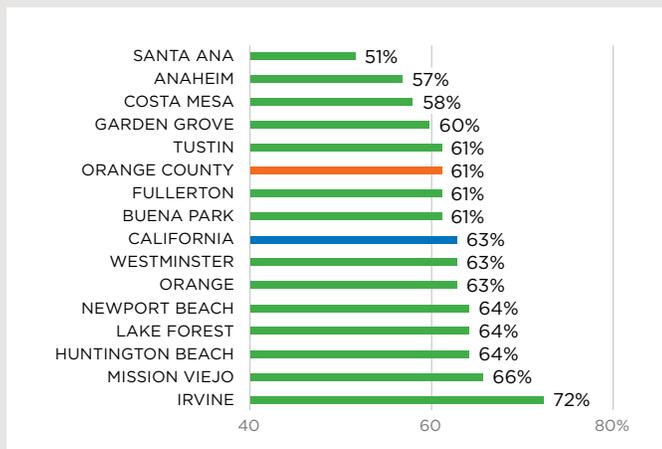
WHAT ARE THE TRENDS?

On average, 61% of Orange County children needing mental health treatment or counseling received the care they needed according to a 2012 survey. Access to care varied by city, with 51% of Santa Ana children getting the care they needed and up to 72% of Irvine children receiving the care they needed. In January 2014, the Affordable Care Act expanded services to Medi-Cal beneficiaries experiencing mild to moderate mental health impairment, making mental health services available to them through CalOptima, Orange County's Managed Care Plan. This has filled a gap in services to this population of youth whose mental health condition may have formerly been covered under a patchwork of state programs. The effect of this change on children receiving needed mental health care has not yet been evaluated.

61% OF ORANGE COUNTY CHILDREN WHO NEED MENTAL HEALTH CARE GET IT

Percentage of Children Ages 2-17 who Need Mental Health Treatment or Counseling and Who Have Received Mental Health Services in the Past 12 Months, 2011/12

City	Percentage
SANTA ANA	51%
ANAHEIM	57%
COSTA MESA	58%
GARDEN GROVE	60%
TUSTIN	61%
ORANGE COUNTY	61%
FULLERTON	61%
BUENA PARK	61%
CALIFORNIA	63%
WESTMINSTER	63%
ORANGE	63%
NEWPORT BEACH	64%
LAKE FOREST	64%
HUNTINGTON BEACH	64%
MISSION VIEJO	66%
IRVINE	72%

Note: Only cities with over 70,000 residents are included in the analysis.

Sources: Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health, "Advancing data-in-action partnerships for children and children with special health care needs in California counties and cities using synthetic estimation from the 2011/12 National Survey of Children's Health"; and 2008-2012 American Community Survey (November 2016), retrieved from kidsdata.org in March 2017

13-20%

Youth under age 18 in the U.S. living with a mental health condition in any given year

Source: Centers for Disease Control and Prevention (www.cdc.gov/mmwr/preview/mmwrhtml/su6202a1.htm)

52,500

Estimated number of Orange County youth ages 13 to 18 living with a mental health condition

Source: Calculation using National Institute of Mental Health prevalence estimate of 20% and Department of Finance projections (2017 youth population)
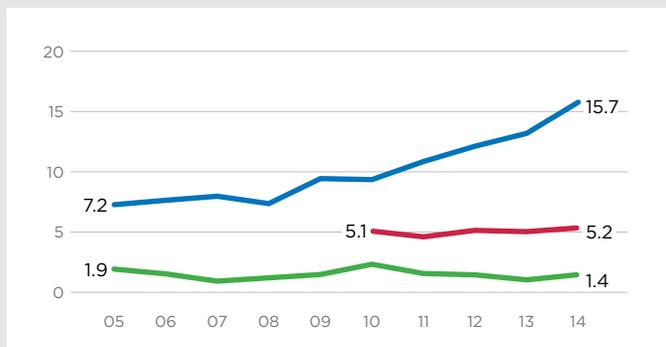
DEPRESSION HOSPITALIZATIONS, SUICIDE IDEATION, SUICIDES AND SELF-HARM

The hospitalization rate for major depression among children and youth in Orange County increased 117% between 2005 and 2014. A survey of Orange County high school students revealed that 23% of girls and 15% of boys reported they "seriously considered committing suicide" in the 12 months preceding the survey.[1] Between 2005 and 2014, the number of Orange County youth suicides ranged from eight to 19 annually, or an average of 12 suicides each year. There were 11 youth suicides in 2014, which is equivalent to a rate of 1.4 suicides per 100,000 youth. The suicide rate is lower in Orange County than statewide (kidsdata.org). Nationwide, suicide is the second leading cause of death for youth and young adults (ages 10-14 and 15-24).[2]

Suicide deaths are only a part of a larger problem, namely the much more prevalent non-fatal self-inflicted or intentional injuries. Previous research has shown that untreated mental illness (e.g., mood disorders and schizophrenia) are strong contributing factors to self-inflicted injury.[3] In 2014, there were 345 self-inflicted injury hospitalizations of youth and young adults ages five to 20 in Orange County. This is equivalent to 5.2 hospitalizations per 10,000 Orange County youth. Orange County has a higher rate of self-harm hospitalizations among youth than the statewide average of 4.3.

DEPRESSION HOSPITALIZATIONS FOR CHILDREN AND YOUTH CONTINUE TO RISE

Major Depression or Mood Disorder Hospitalizations per 10,000 (Ages 0-17), Self-Inflicted Injury Hospitalizations per 10,000 (Ages 5-20) and Suicide Deaths per 100,000 (Ages 0-19) in Orange County, 2005-2014

— Hospitalizations for Major Depression per 10,000 (Ages 0-17)
— Self-Harm Hospitalizations per 10,000 (Ages 5-20)
— Suicides per 100,000 (Ages 0-19)

ADVERSE CHILDHOOD EXPERIENCES

There is a growing body of research that demonstrates that the toxic stress associated with adverse childhood experiences (ACE), which are often cumulative, can disrupt healthy development. ACE's can lead to behavioral and emotional problems during childhood and adolescence, and these impacts can continue into adulthood (kidsdata.org). In Orange County, an estimated 17% of children have suffered **two or more** of the following adverse experiences:

1 socioeconomic hardship
2 divorce/separation of parent
3 death of parent
4 parent served time in jail
5 witness to domestic violence
6 victim of neighborhood violence
7 lived with someone who was mentally ill or suicidal
8 lived with someone with alcohol/drug problem
9 treated or judged unfairly due to race/ethnicity

NEARLY ONE IN SIX CHILDREN HAS SUFFERED ADVERSE EXPERIENCES

Percentage of Children Having Suffered Two or More Adverse Childhood Experiences in Orange County and California, 2011-2012

Orange County	California
17%	18%

Sources: Child and Adolescent Health Measurement Initiative, Data Resource Center for Child and Adolescent Health, "Advancing data-in-action partnerships for children and children with special health care needs in California counties and cities using synthetic estimation from the 2011/12 National Survey of Children's Health;" and 2008-2012 American Community Survey (June 2016), retrieved from kidsdata.org in March 2017

◄ *Sources: Office of Statewide Planning & Development Patient Discharge Data; Orange County Statistical Master Death File; Orange County Health Care Agency, Research and Planning; CDC WISQARS (retrieved from kidsdata.org, March 2017); and California Department of Finance, Table P-3*

[1]California Department of Education, California Healthy Kids Survey and California Student Survey (WestEd), 2011-13, retrieved from kidsdata.org, March 2017

[2]Centers for Disease Control and Prevention, 2014

[3]Orange County Health Care Agency and Sheriff-Coroner, "Risk Factors for Teen Self-Inflicted Suicide Injury and Suicide in Orange County," May 2015 (www.ochealthinfo.com/about/admin/pubs/selfharm)

CHALLENGES IN CHILD CARE SETTINGS

The Early Childhood Mental Health Collaborative, founded in 2014 and featured in last year's Pivot Point, came together to address the need for support of children with behavioral problems in preschool or child care settings. The Collaborative partners long observed that some children were struggling with behavioral health issues in child care settings, yet the providers were not equipped to help these children. A recently completed survey of child care providers conducted by the Social Science Research Center at California State University, Fullerton validates and supports these beliefs.

- 37% of providers reported having asked a child to leave their program permanently due to problematic behavior

- 21% of providers have either refused to accept a new child into their program because of problematic behaviors, or hypothetically would refuse to accept a child for these reasons

The survey also found that 25% of children in Orange County child care settings with perceived special needs, including behavior challenges, had not received intervention services. The Collaborative observed gaps in the mental health service system for young children that might be contributing to these findings. For example, early intervention for developmental conditions is typically provided through the Regional Center of Orange County (one of 21 nonprofit centers throughout California that provides and coordinates services for individuals with developmental disabilities); however, the Regional Center's Early Start program supports infants and toddlers with a developmental delay in social-emotional development, not young children with diagnoses of mental health conditions. In addition, most Orange County school districts do not deem children eligible for special education services when the child is under the classification of emotional disturbance. Further, many insurance plans do not cover the diagnostic and treatment needs of very young children with mental health conditions. Finally, there is the challenge of meeting the needs of children who have borderline cases or behavioral challenges that don't meet thresholds for developmental delay or psychiatric diagnosis, but who would benefit from early intervention services that would perhaps prevent ever being formally

diagnosed. An innovative pilot program, featured in the section devoted to what is being done, seeks to overcome these barriers to services.

CHILD CARE PROVIDERS' SURVEY REVEALS CHALLENGES

Results from Survey of Orange County Child Care Providers, 2016

37%
of Orange County child care providers report they have had to expel a child

21%
of Orange County child care providers have refused or would refuse a new child due to problematic behaviors

25%
of children with perceived special needs in Orange County child care have not received any intervention services

Source: Social Science Research Center at California State University, Fullerton

DEMAND FOR BEHAVIORAL HEALTH SERVICES FOR CHILDREN

Help Me Grow Orange County is a countywide resource for families with children from birth through age eight that have questions or concerns about their children's development, behavior or learning and need support accessing services. Any concerned party can call the helpline or contact Help Me Grow online for assistance. Help Me Grow reports there was an increase in the percentage of contacts for children's behavioral concerns (18% of all concerns in 2015, up from 15% in 2013), as well as an increase in referrals for mental health counseling (11% in 2015, up from 5% in 2013).

REQUESTS FOR HELP WITH BEHAVIORAL ISSUES RISE

Percentage Of Help Me Grow Orange County Contacts for Child's Behavioral Concerns and Percentage Of Referrals for Mental Health Counseling for Child, 2013 and 2015
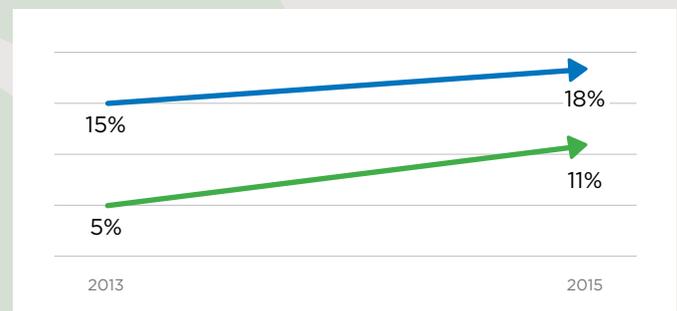
Legend:
- Percentage of all Help Me Grow contacts for behavioral concerns
- Referrals through Help Me Grow for mental health counseling

Chart values: 15% (2013), 18% (2015); 5% (2013), 11% (2015)

Source: Help Me Grow – Orange County, "Help Me Grow Three Year Report, 2013 through 2015, (www.helpmegrowoc.org/files/HMG%20Report%20Three%20Year%20Report%20(2013%20through%202015).pdf)

INTERPRETING THE TRENDS

On the one hand, some of these statistics can be interpreted positively. For example, increasing depression hospitalizations could signal increasing access to needed inpatient care for youth. Additionally, the stable and lower than average youth suicide rate in Orange County, compared to the higher and growing rate in California, could be interpreted positively. And, increasing calls for behavioral health support for children could signal increased awareness of behavioral health care and reduced stigma around seeking help.

On the other hand, the hospitalization statistic could signal a growing need to address children's mental health concerns early enough to avoid hospitalization. Further, any youth suicide can be viewed as a prevent-able tragedy. And other measures, including the difficulties experienced by child care providers serving children with behavior challenges and the proportion of teens who have seriously considered suicide, suggest we have room for progress in preventing, identifying, and addressing youth behavioral health needs.

WHAT IS AT STAKE?

What is at stake if we don't meet our children's mental health needs from early childhood through their teen years? Population growth alone will require increasing service. For every new 1,000 residents, for example, current prevalence rates suggest another 200 individuals with mental health conditions ranging from mild-to-moderate to severe. Further, mental illness is not an isolated condition; for every child with a mental health condition, there is a ripple effect on family, friends, the school and community.

The downstream effects, as children grow into adults, are also costly, both personally and economically. Without expanded prevention and treatment, the county will face a growing cohort of people with diminished potential to lead a life in wellness and impaired ability to contribute to society. Absenteeism due to depression costs Orange County employers and taxpayers an estimated $69.8 million annually and medical costs are nearly $1 billion. Prevention may reduce these

personal and economic costs by establishing interventions before conditions worsen to crisis levels that lead to expulsion, poor development, hospitalization, or even suicide.

$898.2 Million	**$69.8 Million**
Estimated medical costs of depression in Orange County (2017)	Estimated cost of absenteeism due to depression in Orange County (2010)

Sources: Centers for Disease Control and Prevention, Chronic Disease Calculator (www.cdc.gov/chronicdisease/resources/calculator/index.htm); California Department of Finance Population Estimates

WHAT IS BEING DONE?

There is growing recognition of the issue and more resources being allocated. In 2004, for example, California voters passed the Mental Health Services Act (MHSA), which targets millions of dollars statewide to mental health prevention and treatment. Locally, those MHSA funds are being put to good use. There are many agencies and nonprofits doing important work identifying and addressing needs. A sampling of noteworthy local initiatives are described in this section.

EXPANDING PREVENTION AND REDUCING STIGMA THROUGH EDUCATION

The **With Hope Foundation** takes the message of suicide prevention to approximately 16,000 of Orange County's middle and high school students each year. Before providing students with the tools to know the signs and where to seek help, each assembly begins with the presenter sharing a personal experience of loss. This openness to talking about depression and suicide helps break down students' reticence to talk about a difficult subject and opens them up to the message of intervention. Fully 92% of students who have participated in a With Hope assembly report that they now know the signs of depression and suicide and feel confident in taking the steps to seek help.

The programs and services provided by the **National Alliance on Mental Illness-Orange County** (NAMI-OC) are largely centered around reducing stigma, increasing understanding and providing practical tools through education and support. NAMI-OC's education programs are tailored for youth, adults, parents, teachers, and health care professionals. Depending on the audience, they include education about youth mental illness, parenting skills, caring for siblings, self-care, and issues frequently faced by parents and school personnel. The goal is to give parents insight, understanding and empowerment to support their child.

The funds made available by the Mental Health Services Act have led to many prevention and intervention programs administered by the Orange County **Health Care Agency** (HCA) in both the community and school settings.

Programs are wide-ranging, from a 24 hour/7 days a week crisis hotline, to curricula for elementary, middle and high school students about mental health wellness and substance abuse prevention, to a Violence Prevention Program aimed at preventing bullying and cyber-bullying. HCA has also established "OCLinks" – an information and referral line that links residents with behavioral health services. They also offer family support and intervention at a variety of community sites such as family resource centers, schools, and probation sites.

The **Orange County Department of Education** offers professional development for all school staff on prevention and early identification of student mental health issues, school district policy development related to suicide prevention, and training on youth social-emotional development, including stress management and mindfulness for both teachers and students.

PUPIL SUICIDE PREVENTION POLICIES

Starting in 2017/18, all county offices of education, school districts, and other public schools serving students in grades 7-12 in California must adopt a **Pupil Suicide Prevention Policy**. At minimum, the policy must address procedures relating to suicide prevention, intervention, and "postvention," including specifically addressing the needs of high-risk populations, such as youth with disabilities, youth experiencing homelessness, or LGBTQ (lesbian, gay, bisexual, transgender or questioning) youth. The law also requires districts to provide training for teachers on how to identify the signs and symptoms of suicide ideation and how to refer a student for assistance to the appropriate school district professionals.

BREAKING DOWN THE BOTTLENECK IN DIAGNOSIS

For children with autism, early intervention is key to improving a child's developmental outcomes, but the wait time for a comprehensive diagnostic evaluation can slow the referral process. As a result, **CalOptima**, Orange County's Medi-Cal Managed Care Health Plan, initiated an incentive program as a creative way to expand screenings for autism and other developmental delays. The program offers financial incentives for primary care physicians to be trained on the screening tool and additional payments to do the screening. The training is being provided in collaboration with the Center for Autism and Neurodevelopmental Disorders.

Motivated by the awareness that Major Depressive Disorder often goes undiagnosed and untreated among adolescents, CalOptima has also launched a physician incentive program to increase depression screening in primary care for 12 year old children – the beginning stage of adolescence. Physicians will be encouraged to complete the depression screening during an annual visit and refer for behavioral health services, if needed.

TO ADEQUATELY PREVENT, IDENTIFY AND TREAT BEHAVIORAL CHILDREN'S EMOTIONAL HEALTH LIKE WE CARE FOR THEIR

INCREASING ACCESS TO INPATIENT CARE

Sometimes the most appropriate response to a mental health crisis is inpatient care. However, Orange County currently has no inpatient beds for children under the age of 12 and a shortage of beds for teens. In addition, it is very difficult to provide inpatient care for a child or teen with a mental health challenge and a chronic physical illness. To address these needs, **CHOC Children's** is opening an 18-bed inpatient mental health center in April 2018. This center will provide a safe and nurturing environment for the child or teen while a comprehensive outpatient plan is developed.

CHOC Children's, in partnership with the Health Care Agency, has also launched an outpatient Co-occurring Clinic – the first in California – to assist children and teens struggling with both mental and physical health issues. Chronic physical illnesses like diabetes, epilepsy, inflammatory bowel disease, asthma and cancer place young patients as much as two-to-five times higher risk for depression, anxiety, and other issues than their healthier peers. The Co-occurring Clinic's clinical psychologists and licensed clinical social workers collaborate with medical specialists to reduce the impact of one condition on the other.

FILLING SERVICE GAPS FOR YOUNG CHILDREN

Preschool and other child care and early education settings provide a pivotal opportunity to connect children to early intervention services. The **Early Childhood Mental Health Collaborative** is working on a pilot project to address the gap in services particularly for children who exhibit behavior and/or mental health concerns but do not have a formal diagnosis. The pilot will provide consultation services to a network of child care providers interested in increasing their knowledge about early mental health and skills in providing care and parent communication. The results of the pilot will also further inform efforts such as parenting programs, auxiliary services, and partnerships with assessment and clinical services through organizations such as CHOC Children's and other qualified providers of pediatric mental health services.

WHAT MORE CAN WE DO?

While youth mental health awareness and acceptance is certainly growing, there is still much to do. The stigma remains entrenched. Risk factors persist. Needs are going unmet. For these reasons, our work continues.

First, we must work to *prevent adverse childhood experiences* from happening in the first place by supporting or expanding programs that encourage the five protective factors for healthy families and child development: parental resilience, social connections, support for families in times of need, knowledge of parenting and child development, and support for healthy social and emotional development in young children.[4]

Further, as a community, it is important to *increase education* about depression, anxiety, self-harm and suicide, and reduce the stigma of mental health conditions by promoting the understanding that they have neurochemical causes and are not the result of poor character or a choice.

We must *increase early identification* of mental health conditions. To do so, it will be necessary to expand ongoing, and create new, incentives for health care providers within private and public insurance networks to conduct developmental screenings for young children and depression screenings for older children. It is also important to build the mental health workforce by increasing training and incentive programs to expand mental health practitioners' experience with treating children and youth, and pediatricians' knowledge about prevention, intervention, and referral.

Finally, continued and expanded *integration of the system of care* (schools, government, nonprofits, health care), will remain essential to lasting progress.

[4]Center for the Study of Social Policy, "Strengthening Families: A Protective Factors Framework"

HEALTH PROBLEMS IN CHILDREN, WE MUST CARE FOR OUR PHYSICAL HEALTH

Opportunity Gap

FOCUS ON MIDDLE-SKILL OCCUPATIONS

The national economy currently suffers from a skills gap, as thousands of jobseekers entering the labor force simply do not have the skills that employers need. This labor force skills gap threatens the future economic growth of the nation, and Orange County is not immune. Current growth in middle-skill jobs – particularly within health care, advanced manufacturing, and information technology sectors – suggests that technical education and training can help address the gap while creating higher paying jobs for Orange County residents.

LOTS OF JOBS; NOT ENOUGH SKILLED CANDIDATES

Business consulting and research firm, Deloitte, predicts that, nationwide, the skills gap will leave two million jobs unfilled by 2025 in manufacturing alone. Nationally, 45% of Human Relations managers reported difficulty finding qualified candidates to fill open positions, and only 42% of employers agreed that recent graduates are ready for work. Nearly half (45%) of U.S. employers say lack of skills is the main reason for entry-level job vacancies, followed by lack of workplace competencies, such as basic computer skills and "soft skills" like the ability to communicate appropriately and show up on time. This is a solvable problem.

45%
of HR managers report difficulty finding qualified candidates for open positions

42%
of employers believe recent graduates are ready for work

45%
of U.S. employers cite lack of skills as the main reason for entry-level vacancies

TOP 3 REASONS FOR JOB VACANCIES

47%
Lack of technical skills

40%
Lack of workplace competencies

36%
Lack of applicants

Source: Orange County Business Council report Closing Orange County's Skills Gap: Preparing to Meet Employer Demand for Middle-Skill Occupations (2016)

WHAT IS A MIDDLE-SKILL JOB?

Middle-skill jobs require education beyond a high school diploma, but less than a four-year college degree. This often means a certification or associate's degree from a community college, or an employer-led training program.

The information economy – where knowledge is a primary source of value – has created relatively high-paying, sector-specific jobs that provide pathways into the skilled economy for jobseekers without four-year college degrees. A 2015 Brookings Institute report found that "older middle-skill" jobs in production, clerical work, and construction have declined due to automation, while "new middle-skill" jobs in health care, professional services, and other fields have grown. Given the skills and training needed for new middle-skill jobs, these positions are disproportionately affected by the skills gap.

ORANGE COUNTY'S MIDDLE-SKILL ECONOMY

New middle-skill jobs are thriving in Orange County. As many as 41 of the 50 occupations projected by California's Employment Development Department to create the most jobs in Orange County over the next decade will not require a four-year degree, and many are middle-skill jobs offering upward mobility and paying above average wages, giving individuals and families the opportunity to become

financially stable and resilient.. A 2016 Orange County Business Council (OCBC) report, "Closing Orange County's Skills Gap: Preparing to Meet Employer Demand for Middle-Skill Occupations," funded by JP Morgan Chase's *New Skills at Work* initiative, found that there was 25% growth in middle-skill jobs in Orange County between 2003 and 2015, with continued projected growth of 15% over the next decade.
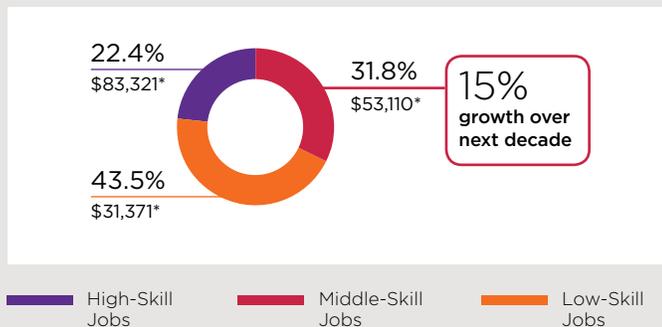
17,678

Middle-skill job openings in Orange County per year over the next decade

25%

Middle-skills job growth since 2003, faster than overall county employment growth

Source: Orange County Business Council report Closing Orange County's Skills Gap: Preparing to Meet Employer Demand for Middle-Skill Occupations (2016)

However, there are simply too few qualified candidates to meet this demand. OCBC's study using real-time labor market software found that middle-skill job openings are significantly harder to fill than other job openings, taking an average of 57 days to fill. Overall, Orange County had 121,533 total middle-skill job openings in 2016.

WELL-PAID MIDDLE-SKILL JOBS ARE GROWING IN ORANGE COUNTY

Distribution of Jobs in Orange County by Skill Level (2016) and Projected Growth in Middle-skill Jobs (2014-2024)

22.4%
$83,321*

31.8%
$53,110*

15% growth over next decade

43.5%
$31,371*

■ High-Skill Jobs   ■ Middle-Skill Jobs   ■ Low-Skill Jobs

*Average annual salary

Source: Orange County Business Council report Closing Orange County's Skills Gap: Preparing to Meet Employer Demand for Middle-Skill Occupations (2016)

Contributing to the dearth of skilled employees is the fact that the job growth is happening in sectors that rely on new technology. Orange County's three largest middle-skill industries are health care, information technology, and advanced manufacturing. Together, these industries account for approximately one-half (48%) of the county's middle-skill jobs. To meet employer's needs, the rapid technological advancement in all three industries requires continually-updated education and training programs, which often lag employer demand, resulting in a lack of qualified candidates for open positions.

### THREE INDUSTRIES COMPRISE NEARLY HALF OF MIDDLE-SKILL JOBS

Healthcare   Information Technology   Advanced Manufacturing

Almost half of the county's middle-skill jobs

Source: Orange County Business Council report Closing Orange County's Skills Gap: Preparing to Meet Employer Demand for Middle-Skill Occupations (2016)

An analysis of middle-skills job postings in 2017 found that Irvine and Anaheim account for over a third of new middle-skill jobs in Orange County; the two cities had 25,254 and 19,495 middle-skill job postings, respectively.

TOP LOCATIONS FOR ORANGE COUNTY'S 2017 MIDDLE-SKILL JOBS

Top Locations for Orange County's 2017 Middle Skills Jobs
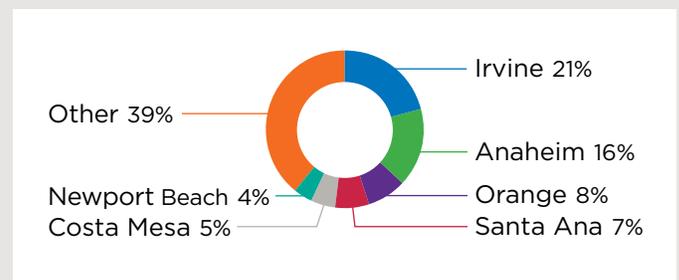
Other 39%

Irvine 21%

Anaheim 16%

Newport Beach 4%

Orange 8%

Costa Mesa 5%

Santa Ana 7%

Source: Orange County Business Council report Closing Orange County's Skills Gap: Preparing to Meet Employer Demand for Middle-Skill Occupations (2016)

ONE IN 10 JOBS ARE IN HEALTH CARE

Orange County's health care industry grew from 7% of county employment in 2000 (96,400 jobs) to 11% in 2016 (175,000 jobs). Growth is expected to continue for the foreseeable future as Orange County's population ages and the industry undergoes a transformation fueled by technological advancement, creating a range of jobs from entry-level to advanced positions.

Many of health care's fastest growing occupations are middle-skills jobs. For example, Registered Nurses account for almost half of this sector's 10,000 average monthly online job postings.

In 2015, Registered Nurse employment in Orange County was more than double the next largest category, Medical Assistants. This trend is expected to continue through at least 2024, when there will be an estimated 22,520 Registered Nurses in Orange County earning an average salary of $90,199 (in 2016). Other fast growing middle-skill occupations include Licensed Practical Nurses, Laboratory Technicians, Dental Hygienists, and Health Technologists, earning salaries ranging from $45,000 to $92,000.

REGISTERED NURSES TOP 2016 MONTHLY JOB POSTINGS

Health Care Average Monthly Job Postings in Orange County, 2016

OCCUPATION	AVERAGE ONLINE JOB POSTINGS PER MONTH (2016)
REGISTERED NURSES	1,684
LICENSED PRACTICAL / VOCATIONAL NURSES	363
SOCIAL AND HUMAN SERVICE ASSISTANTS	275
MEDICAL ASSISTANTS	256
DENTAL ASSISTANTS	196
PHYSICAL THERAPISTS	144
HOME HEALTH AIDES	120
MEDICAL & CLINICAL LABORATORY TECHNICIANS	37
DENTAL HYGIENISTS	24
HEALTH TECHNOLOGISTS & TECHNICIANS	23

Source: The Conference Board Help Wanted OnLine™ (HWOL) data series

50% OF HEALTH CARE JOBS DO NOT REQUIRE A BACHELOR'S DEGREE

Health Care Job Posting Characteristics in Orange County, 2016

DEGREE REQUIRED	
LESS THAN BACHELOR'S	50.5%
BACHELOR'S	36.5%
GRADUATE OR PROFESSIONAL DEGREE	13.0%

SALARY LEVEL	
$75,000+	41.1%
$50,000 - $74,999	18.4%
$35,000 - $49,999	20.4%
>$35,000	20.1%

Source: Burning-Glass – Labor Insights; OCBC analysis

INFORMATION TECHNOLOGY JOBS SPAN SEVERAL INDUSTRIES

The information technology (IT) industry provides computer, communication, and software technology products, software, and services and can be divided into two categories. "Vertical IT" companies specialize in providing hardware, software, and related services to businesses and consumers. "Horizontal IT" refers to other industries that employ IT professionals to provide in-house IT services in settings as diverse as health care, education, manufacturing, finance, retail, and government. Almost every industry sector has a growing 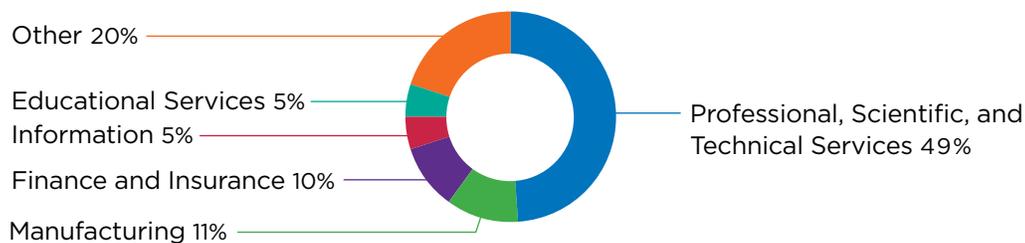horizontal IT presence – in other words, IT jobs in non-IT settings – reflecting the proliferation of IT throughout workplaces.

The high rate of new IT job creation – rather than replacement – signifies a growing industry. For example, Web Developers are predicted to grow by nearly 50%, while Software Developers (Applications) and Computer Systems Analysts are predicted to grow by more than 25%. These jobs also earn significantly higher than average pay, with average 2016 salaries ranging from $78,765 to $110,275.

OCCUPATION	EMPLOYMENT 2014	EMPLOYMENT 2024	ESTIMATED PERCENT GROWTH 2014-2024	AVERAGE SALARY 2016
WEB DEVELOPERS	2,680	3,990	48.9%	$78,765
COMPUTER SYSTEMS ANALYSTS	4,930	6,300	27.8%	$96,722
SOFTWARE DEVELOPERS, APPLICATIONS	9,400	11,780	25.3%	$110,275
COMPUTER USER SUPPORT SPECIALISTS	6,290	7,580	20.5%	$60,261
DATABASE ADMINISTRATORS	1,520	1,830	20.4%	$90,087
COMPUTER NETWORK SUPPORT SPECIALISTS	1,760	2,090	18.8%	$70,355
INFORMATION SECURITY ANALYSTS	710	840	18.3%	$98,933
COMPUTER NETWORK ARCHITECTS	1,400	1,640	17.1%	$115,155
NETWORK AND COMPUTER SYSTEMS ADMINISTRATORS	4,560	5,310	16.4%	$89,661
SOFTWARE DEVELOPERS, SYSTEMS SOFTWARE	6,850	7,950	16.1%	$121,475
COMPUTER PROGRAMMERS	4,350	4,320	-0.7%	$83,341

Source: California Employment Development Department, OES Dataset

IT MIDDLE-SKILL JOBS ARE SCATTERED ACROSS MANY INDUSTRIES

Other 20%
Educational Services 5%
Information 5%
Finance and Insurance 10%
Manufacturing 11%
Professional, Scientific, and Technical Services 49%

Source: Burning Glass-Labor Insight; OCBC analysis

RESURGENCE OF MANUFACTURING JOBS IN ORANGE COUNTY

Manufacturers currently employ approximately 155,000 workers in Orange County. A variety of factors have contributed to the resurgence of Orange County manufacturing, including "on-shoring" (the return of American manufacturing from abroad), technological advances, and the county's competitive advantage in several specialized manufacturing fields. Unlike IT, growth in the middle-skill job openings in this cluster is driven by replacement needs (e.g., filling positions as baby boomers retire) rather than the creation of new positions. California's Economic Development Department found that approximately one fourth of all California job postings are f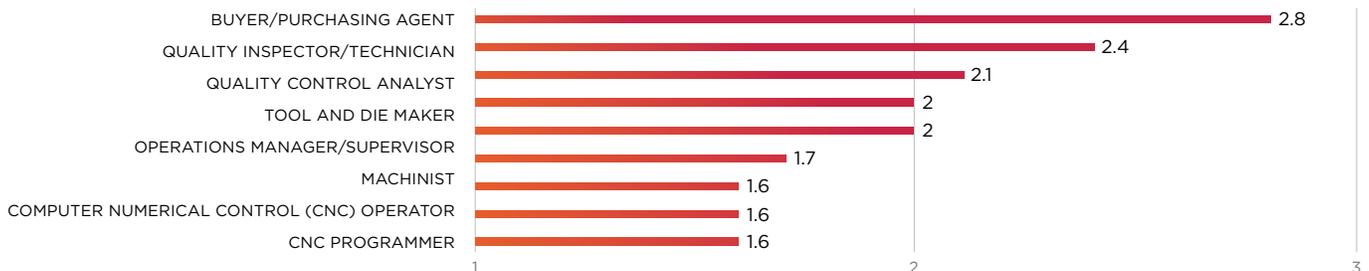or manufacturing-related positions, suggesting that these replacement needs will continue to create job openings for the foreseeable future.

While projected employment growth in manufacturing is not as robust as in health care and IT, nor are the salaries as high, growth is projected in several specific high-value occupations which are concentrated in Orange County. These include jobs within the advanced manufacturing sector, including medical devices, pharmaceuticals, aerospace, computer and electronic products. These advanced manufacturing jobs produce high-tech products or use advanced automated processes. Orange County has significant concentrations of middle-skill jobs in advanced manufacturing.

OCCUPATION	EMPLOYMENT 2014	EMPLOYMENT 2024	ESTIMATED PERCENT GROWTH 2014-2024	AVERAGE SALARY 2016
LABORERS AND FREIGHT, STOCK AND MATERIAL MOVERS	25,870	30,070	16.2%	$26,823
MACHINISTS	5,270	6,120	16.1%	$42,422
PACKERS AND PACKAGERS	8,970	9,620	7.2%	$24,663
TEAM ASSEMBLERS	14,810	15,870	7.2%	$28,805
INSPECTORS, TESTERS, SORTERS, SAMPLERS, AND WEIGHTERS	6,980	7,410	6.2%	$41,391
FIRST-LINE SUPERVISORS OF PRODUCTION AND OPERATING WORKERS	6,170	6,470	4.9%	$57,927
SEMICONDUCTOR PROCESSORS	1,240	1,270	2.4%	$35,828
HELPERS – PRODUCTION WORKERS	6,510	6,550	0.6%	$24,549
ELECTRICAL AND ELECTRONIC EQUIPMENT ASSEMBLERS	5,140	5,140	0.0%	$30,347
ELECTROMECHANICAL EQUIPMENT ASSEMBLERS	1,150	1,150	0.0%	$30,582

MIDDLE-SKILLS JOBS IN ADVANCED MANUFACTURING ARE HEAVILY CONCENTRATED IN OC

Orange County Employment Concentration Above National Average in Select Advanced Manufacturing Jobs not Requiring a Bachelor's Degree, Location Quotient 2017

Occupation	Location Quotient
BUYER/PURCHASING AGENT	2.8
QUALITY INSPECTOR/TECHNICIAN	2.4
QUALITY CONTROL ANALYST	2.1
TOOL AND DIE MAKER	2
OPERATIONS MANAGER/SUPERVISOR	2
MACHINIST	1.7
COMPUTER NUMERICAL CONTROL (CNC) OPERATOR	1.6
CNC PROGRAMMER	1.6

Note: Location Quotient is an analytical measure of market concentration of an occupation in an area, with 1 being the national average and anything greater than 1 indicating a concentration representing more jobs than the national average.

Source: Burning Glass – Labor Insight; OCBC analysis

CLOSING THE SKILLS GAP

Filling employer middle-skill needs in health care, information technology, and advanced manufacturing will go a long way towards ensuring Orange County's economic growth and competitiveness. Because middle-skill jobs are higher paying on average, Orange County residents with these skills will be better positioned to live and work here. The close link between these three industries and technological change, however, creates challenges as well as opportunities because educators must constantly update curricula to avoid obsolescence.

This, then, is the challenge for Orange County to close the skills gap: help students and mid-career professionals acquire in-demand technical skills in continually evolving industries. Several innovative programs to do just that are in full swing in Orange County.

TALLER SAN JOSE HOPE BUILDERS

Founded by the Sisters of St. Joseph of Orange in 1995, **Hope Builders** serves as a broker between young adults who face many barriers to employment, and employers who seek skilled, reliable workers. Hope Builders provides disadvantaged young adults (ages 18-28) with job training, life skills and job placement programs in partnership with local businesses and educators. The program has empowered almost 5,500 young adults with the tools to transform their lives; 100% of Hope Builders' participants are low-income, unemployed or underemployed, 80% are deficient in basic math and reading skills, 50% are parents, and 76% are impacted by violence.

Hope Builders offers two pathways to in-demand middle-skills jobs in health care. The Administrative Billing & Coding and Clinical Medical Assisting programs include 16-weeks of hands-on skills training, four-week internships at partnering medical clinics, and job placement with employment partners including St. Joseph Heritage Medical Group, St. Jude Heritage Medical Group and MemorialCare Health System. Participants also receive ongoing counseling and support to help them retain employment.

In 2016, Hope Builders prepared more than 250 young adults for health care jobs and 81% of those placed into jobs retained their employment for six months or more. By 2026, Hope Builders is committed to leveraging the untapped potential of more than 2,600 disadvantaged young adults – back to work, back to school, back to the community.

ORANGE COUNTY WORKFORCE INNOVATION FUND IT CLUSTER COMPETITIVENESS PROJECT

In 2013, the United States Department of Labor awarded a $3 million Workforce Innovation Fund grant from the U.S. Department of Labor to the **County of Orange/Orange County Development Board** (OCDB) to create an initiative targeting Orange County's IT skills and competitiveness. Over a six-month period, in partnership with OCBC, the project brought together educational leaders and top Orange County IT executives to develop more effective IT training programs. The result was the IT Cluster Initiative, which aims to address the needs of county IT employers. The IT Cluster Initiative has implemented several pilot projects, including the development of new IT training programs tailored to employer needs, updates of current curricula, and an IT talent pipeline including a web-based internship portal.

YOUTH CAREER CONNECTIONS INITIATIVE

In collaboration with the OC Pathways initiative and in conjunction with United Way's Destination Graduation initiative, **United Way** launched Youth Career Connections in late 2016 to infuse classroom learning with real-world experiences. United Way is connecting students and teachers directly to Orange County employers so they are prepared for lifelong success by graduating both college- and career-ready. The initiative has been launched in partnership with the Anaheim Union High School District, the Garden Grove Unified School District and a set of local corporations in order to connect students and teachers at four local high schools with work-based learning experiences with local business in a variety of sectors. Opportunities include: tours or field trips for students at local work sites, teacher "pitch sessions" to provide teachers feedback on the relevance of their lesson plans to today's workforce needs, sharing local corporate leaders' career journeys, providing teachers with "externships" at local businesses to better align

curriculum and instruction, and providing internship opportunities for students between their junior and senior years at local companies for 4-6 weeks.

In addition to Youth Career Connections, the United Way is developing a new workforce development initiative that supports their FACE 2024 goal to reduce the percentage of financially unstable families by 25% by 2024. This program, implemented in collaboration with other key stakeholders, will be a combination of an apprenticeship and job placement program, which will incorporate labor market analysis, employer engagement, mentoring, career navigation, case management, professional coaching and scholarships for certifications. The intent of this initiative is to help unemployed or underemployed adults with children become financially stable by accessing training needed to take advantage of local middle-skill career opportunities.

OC PATHWAYS

The **Orange County Department of Education** (OCDE) is committed to equipping every student with the competencies they need to thrive in the 21st century. Working with Orange County's 27 school districts, nine community colleges, multiple universities, local chambers of commerce and business and community partners, OCDE has launched a major initiative called OC Pathways (ocpathways.com) to help make this commitment a reality.

Through OC Pathways, OCDE collaborates across institutions to align secondary and post-secondary efforts in the areas of curriculum, school counseling, and work force development. Many K-14 classes include work-based learning experiences with local business and industry sites, including virtual field trips, mentoring, and internships.

Enrollment in OC Pathways in the three key middle-skills sectors has grown between 2014/15 and 2015/16.

SUBSTANTIAL GROWTH IN CAREER-TECH ENROLLMENT IN KEY SECTORS

K-12 Enrollment in Career-Technical Education in Three Sectors in Orange County, 2014/15 and 2015/16
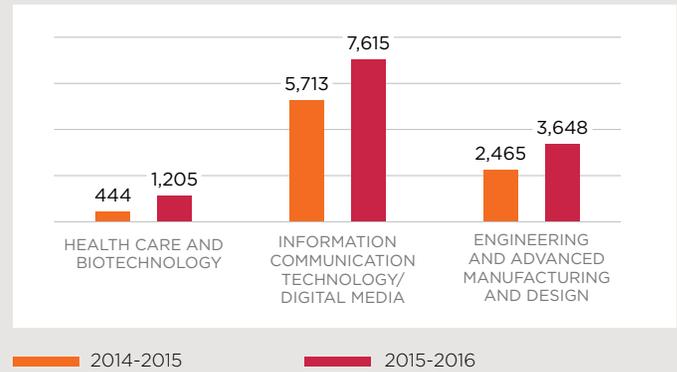
Source: Orange County Department of Education

California Partnership Academies

California Partnership Academies are small learning communities within larger high schools for students in grades 10 to 12 with a specific career focus. A team of teachers works with the same group of students over several years, linking instruction across disciplines and over time. Employers provide internships and other opportunities for students to learn outside the classroom.

THIS IS THE CHALLENGE FOR ORANGE COUNTY: HELP STUDENTS AND TECHNICAL SKILLS IN TECHNOLOGY-DRIVEN INDUSTRIES THAT ARE

Career and Technical Education

Career and Technical Education (CTE) in Orange County is at the forefront of preparing students to be college-and career-ready. Within CTE, occupations and career specialties are grouped into fifteen "Industry Sectors" based on a set of common knowledge and skills that prepare learners for a full range of opportunities. These programs lead to an industry-recognized credential or certificate at the postsecondary level or an associate or baccalaureate degree.

CAREER AND TECHNICAL EDUCATION IN ORANGE COUNTY

PROGRAM	PARTNERS	REACH
CENTRAL ORANGE COUNTY CTE PARTNERSHIP (CTEP) ocde.us/ctep **14,600** students currently enrolled	Santa Ana Unified School District Garden Grove Unified School District Orange Unified School District	Serves 20 comprehensive high schools in these districts, with courses and programs in 13 of the 15 state industry sectors
COASTLINE ROP coastlinerop.net **9,694** students currently enrolled	Huntington Beach Union High School District Irvine Unified School District Newport-Mesa Unified School District Saddleback Valley Unified School District Tustin Unified School District	Serves 22 comprehensive high schools, 5 continuation schools, and 4 alternative schools, with courses and programs in 13 of the 15 state industry sectors
COLLEGE AND CAREER ADVANTAGE (CCA) www.ccadvantage.org **10,562** students currently enrolled	Capistrano Unified School District Laguna Beach Unified School District	Serves 9 comprehensive high schools within these districts, with courses and programs in 14 of the 15 state industry sectors
NORTH ORANGE COUNTY ROP nocrop.org **15,000** students currently enrolled	Anaheim Union High School District Brea Olinda Unified School District Fullerton Joint Union High School District Los Alamitos Unified School District Placentia-Yorba Linda Unified School District	Serves 25 comprehensive high schools within these districts, with courses and programs in 14 of the 15 state industry sectors

Data Notes

The Opportunity Gap Pivot Point summarizes key features of the Orange County Business Council's report, "Closing Orange County's Skills Gap: Preparing to Meet Employer Demand for Middle-Skill Occupations." Visit www.ocbc.org to view the complete report.

MID-CAREER PROFESSIONALS ACQUIRE IN-DEMAND CONSTANTLY EVOLVING.

Housing

There are two chief ways to tackle the problem of out-of-reach housing in Orange County: bring earnings up or bring costs down. The Opportunity Gap Pivot Point explores one potential avenue for bringing earnings up by supporting a specific group of higher-wage jobs in Orange County – middle-skill jobs. This Pivot Point explores bringing costs down by increasing the supply of housing, particularly affordable, workforce housing. As adequate housing supply remains a major issue confronting Orange County, this feature examines the trends, what is at stake, and lessons learned from cities and developers that are addressing this complex issue.

THE HOUSING CONTINUUM

Every community has diverse housing needs, ranging from supportive housing to rental housing to homeownership. Since people have different needs and desires due to family size, budget, proximity to work or school, or access to special services, there can't be a one-size-fits all approach to housing our residents. This Pivot Point focuses on workforce housing, which generally falls within the rental housing portion of the continuum.

| Supportive Housing	Rental Housing	Homeownership
• Permanent shelter for the homeless • Housing with provision of, or access to, services for people with special needs (e.g., veterans, elderly, recently homeless families)	• Rental housing affordable to very low and low income residents • Moderate and luxury rentals	• Multi- or single-family homes purchased by the individual or family • Homes range from moderate to luxury homes

HOUSING SUPPLY: TOO LITTLE AND TOO EXPENSIVE

In 2015, there were 10,771 building permits issued in Orange County – 65% for single-family units and 35% for multi-family units. This equates to a rate of 3.4 building permits issued per 1,000 people in Orange County. This is a higher rate than California and neighboring counties, but much lower than other states that are experiencing job growth at higher rates than the national average. According to *Forbes*, among the top 10 U.S. cities building the most housing between 2011 and 2014, three are in Texas (Austin, Houston, and Dallas), two in North Carolina (Raleigh and Charlotte), and two in Florida (Orlando and Jacksonville).[1] No city in California made the list, despite job growth in Orange County, neighboring counties, and the state overall that outpaced the national average between 2012 and 2016.[2]

The Regional Housing Needs Assessment, prepared by the Southern California Association of Governments, established eight-year targets for construction of new homes between 2014 and 2021. These targets are based on the average income levels of residents in each of Orange County's 35 jurisdictions. Orange County is falling far short in the low and very low income categories. According to the 21 jurisdictions reporting in Orange County, new construction in 2014 and 2015, combined, comprised only 8% of the housing units needed for very low income residents (making under $50,000 for a family of four), and only 11% of the homes needed for low income residents ($50,000 to $74,999 a year for a family of four). Homes affordable to moderate income families ($75,000 to $99,999 for a family of four) have already exceeded the need at 135% of the target; while above moderate homes are at 66% in the first two years alone.

ORANGE COUNTY IS BUILDING HOUSING FASTER THAN CALIFORNIA OVERALL, BUT SLOWER THAN OTHER STATES WITH HIGH JOB GROWTH

Ratio of Building Permits Issued per 1,000 Residents in Orange County, 2015
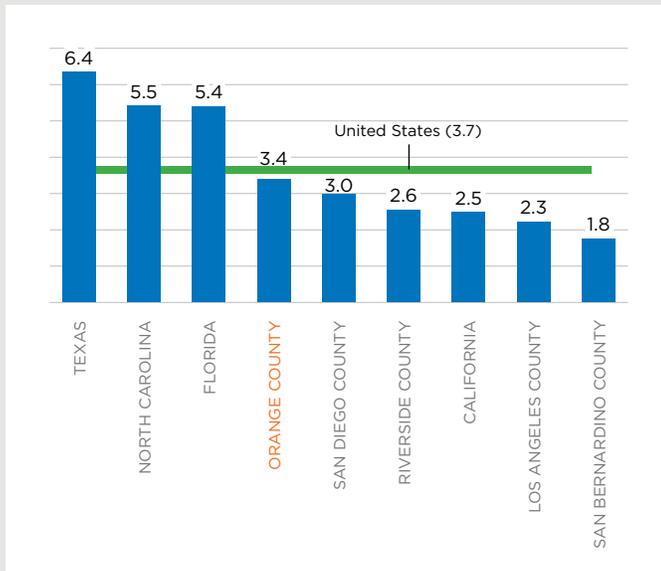
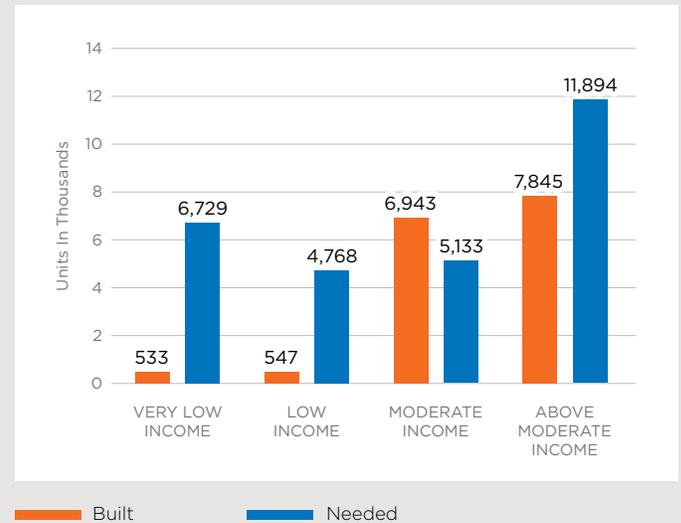*Sources: U.S. Department of Housing and Urban Development, State of the Cities Data Systems (SOCDS); and 2015 Census*

ORANGE COUNTY'S HOME BUILDING IS MOSTLY FOR HIGHER INCOMES

Progress Toward Regional Housing Needs in Orange County, 2014 and 2015

Source: Community Indicators analysis of Regional Housing Needs Assessment by selected Orange County jurisdictions.

[1]Kotkin, Joel. "The Cities Doing The Most To Address The U.S. Housing Shortage. *Forbes*. Forbes Magazine, 17 Dec. 2015. Accessed March 2017.

[2]Bureau of Labor Statistics, Quarterly Census of Employment and Wages, 3rd Quarter employment change, 2012-2016 *(https://data.bls.gov/cew/apps/data_views/data_views.htm#tab=Tables)*

$745,000
Median price for a single-family home in Orange County

$92,000
Income needed to qualify for an entry-level home

$27.62
Hourly wage needed to afford a median-priced one-bedroom rental unit (equates to annual income of $57,440)

$39,769 annually or **$19.12** per hour
Median annual salary or hourly wage in Orange County for all occupations

68%
of Orange County jobs pay less than $27.62

Sources: California Association of Realtors; California Employment Development Department, First Quarter 2016 Occupational Employment Statistics Survey; Community Indicators Report analysis of Fair Market Rent data from the U.S. Department of Housing and Urban Development (www.huduser.org) using the methodology of the National Low Income Housing Coalition (www.nlihc.org)

As evidenced in the Opportunity Gap Pivot Point, there is a huge opportunity to educate and train workers for middle-skill jobs in Orange County. These jobs, which pay higher-than-average wages, are growing. If, as a county, we can improve middle-skill job education and training, it will go a long way toward supporting the health of Orange County's economy. And yet, the average annual salary for those middle-skill jobs is approximately $53,000 – less than what is needed to afford a median one-bedroom rental unit in Orange County ($57,440), and far less than what is needed to qualify to purchase an entry-level home ($92,000), requiring dual-incomes to afford housing.

WHAT'S AT STAKE?

Ingredients for a robust economy include living-wage jobs that are plentiful and growing, and a current and future workforce that is both growing and appropriately skilled. To support the workforce, there must be enough housing at diverse price points to meet workers' needs. As Orange County competes with less costly communities that have adequate housing and job growth, it will become harder to retain or attract a skilled workforce. If housing and rental markets remain undersupplied, residents with lower-paying jobs will continue to be priced out of the market. For the workforce that remains, there will be two divergent effects of these trends. For those with well-paying jobs, the social burden of supporting the growing older adult population will fall on them and them alone. For those with low-paying service jobs, overcrowding and homelessness will continue to grow, perpetuating a persistent and growing underclass with diminished opportunity for personal advancement.

LEAVING ORANGE COUNTY

In some cases, the very people who are critical to ensuring a thriving economy are leaving Orange County, likely because they can't afford to live here, threatening the national competitiveness of the region. Studies suggest families are migrating to other parts of the state and country that boast cheaper housing and lower costs of living, or growing high wage jobs and incomes.[3] Outside of our neighboring counties, Phoenix is the top destination for Orange County households moving out of county, followed by Las Vegas. Also among the top 20 destinations are Seattle, Austin, San Antonio, New York, Salt Lake City and other California cities.[4] With some exceptions, a less expensive housing market is a feature of these competitor regions.

[3]Fox, J. "Where American is Moving," Bloomberg View (Accessed March 2017 from bloombergview.com)

Kotkin, J. and Toplansky, M. "OC Model: A vision for Orange County's Future," Chapman University, Center for Demographics & Policy

[4]U.S. Census Bureau (https://flowsmapper.geo.census.gov/map.html#)

16 OUT OF 20 TOP DESTINATIONS FOR ORANGE COUNTY MOVERS HAVE LOWER COST HOUSING MARKETS

Top 20 Destinations of Orange County Households Moving Out of County (2010-2014) Compared to Typical Home Values (2016)

DESTINATION COUNTY	STATE	NUMBER OF HOUSEHOLDS MOVING OUT OF ORANGE COUNTY	TYPICAL HOME VALUE (2016 Q4)	
1 LOS ANGELES	CALIFORNIA	29,327	$545,479	■
2 RIVERSIDE	CALIFORNIA	17,609	$340,125	■
3 SAN BERNARDINO	CALIFORNIA	7,165	$305,971	■
4 SAN DIEGO	CALIFORNIA	6,334	$530,456	■
5 MARICOPA	ARIZONA	2,742	$251,691	■
6 CLARK	NEVADA	1,958	$239,943	■
7 KERN	CALIFORNIA	1,640	$207,722	■
8 ALAMEDA	CALIFORNIA	1,487	$731,177	■
9 SANTA CLARA	CALIFORNIA	1,467	$922,511	■
10 SAN FRANCISCO	CALIFORNIA	1,405	$1,048,166	■
11 SAN LUIS OBISPO	CALIFORNIA	1,201	$558,009	■
12 KING	WASHINGTON	1,173	$509,476	■
13 SANTA BARBARA	CALIFORNIA	1,066	$593,589	■
14 VENTURA	CALIFORNIA	954	$571,771	■
15 TRAVIS	TEXAS	892	$307,982	■
16 SACRAMENTO	CALIFORNIA	884	$334,185	■
17 NEW YORK	NEW YORK	858	$913,126	■
18 FRESNO	CALIFORNIA	788	$236,229	■
19 SALT LAKE	UTAH	782	$283,704	■
20 BEXAR	TEXAS	740	$154,611	■

▬ Above Orange County Typical Value ($686,018)   ▬ Below Orange County Typical Value ($686,018)

Sources: U.S. Census Bureau, Census Flows Mapper, 2010-2014 (https://flowsmapper.geo.census.gov/map.html#); National Association of Realtors (http://economistsoutlook.blogs.realtor.org/category/economic-updates/local-market-data/)

The three declining age groups in Orange County are adults ages 25 to 44, children and youth (five to 17) and young children (under five). If the trend that has been occurring for several years continues, Orange County will become an unbalanced community, losing its future workforce at the same time adults over age 55 rise in proportion to the rest of the population.

WORKERS IN THEIR PRIME AND FAMILIES LEAVING ORANGE COUNTY AS SENIORS SETTLE IN

Percent of Population by Age Under 45, Orange County, 2005-2015

- Young Children (Under 5)
- Young Adults (18-24)
- Children and Youth (5-17)
- Younger-Middle Adults (25-44)
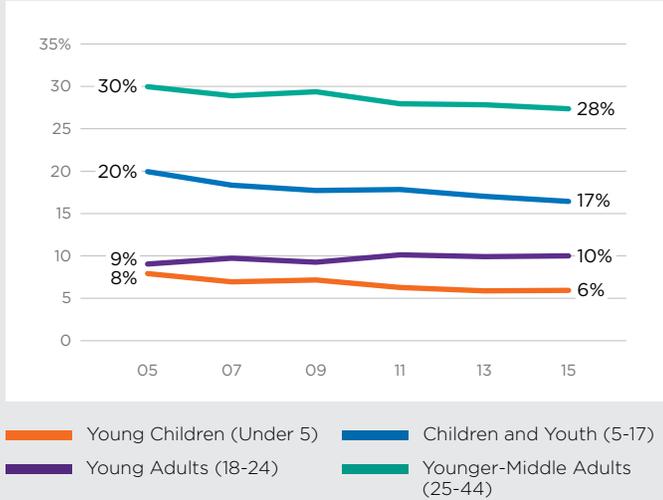
Source: U.S. Census Bureau, American Community Survey, 1-year Estimates

Percent of Population by Age 45 and Over Orange County, 2005-2015

- Middle Adults (45-54)
- Older Adults (65+)
- Older-Middle Adults (55-64)
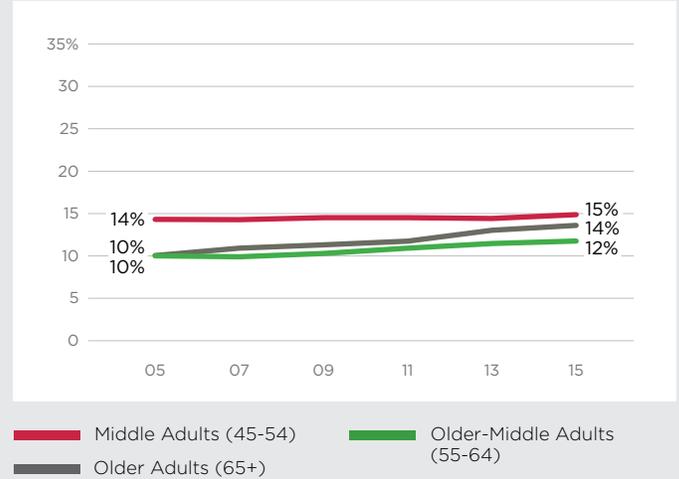
Source: U.S. Census Bureau, American Community Survey, 1-year Estimates

Many of Orange County's stubborn problems – highlighted annually in this report – are influenced by high housing costs. Clearly, homelessness, overcrowding, and family financial instability are directly linked to high housing costs. But other factors are indirectly linked. When a family spends 50% or more of their income on housing, they have less remaining to pay for health care and healthy foods,

affecting overall health. With parents working two or more jobs to afford housing, they may lack the time to help children with homework or afford afterschool enrichment, affecting educational achievement. In sum, Orange County's housing crisis has wide-ranging and harmful impacts on the wellbeing of a substantial portion of the county's individuals and families.

STUBBORN PROBLEMS

High Cost of Living	Stagnant Incomes	Increased Overcrowding
Orange County's cost of living is almost double the U.S. average (87% higher)	Median incomes have not increased in 10 years ($78,428 in 2015 vs. $82,570 in 2006, after adjusting for inflation)	K-12 students living doubled- or tripled up due to economic hardship has grown 119% in 10 years

FINDING SOLUTIONS THAT WORK IN ORANGE COUNTY

While there are barriers to building affordable housing such as community opposition and lack of financing, as detailed in last year's Housing Pivot Point, innovative and affordable housing projects have been built recently in Orange County. These projects offer case studies to be mined for lessons that can be applied to other projects in the county.

CASE STUDY 1

Oakcrest Terrace, Savi Ranch
Yorba Linda

Oakcrest Terrace was built on a former car dealership property in Yorba Linda. Opening in March 2017, it includes 69 apartments (one-, two- and three-bedrooms) affordable to residents making 30% to 60% of the area median income. The development includes a community center with a computer lab, meeting space and afterschool program.

CASE STUDY 2

Clark Commons
Buena Park

Clark Commons is a 70-unit housing community in Buena Park, with one-, two-, and three-bedroom apartments also affordable to residents making 30% to 60% of the county's area median income. The nearly two-acre site previously housed a blighted retail center, the City's Public Works Yard, and commercial/industrial developments. The new development includes a community center, computer lab, and tot lot.

OPPORTUNITY SITES FOR HOUSING AND MIXED-USE DEVELOPMENT

At a time when there is little undeveloped land available for residential projects, there remains one abundant development opportunity – underutilized and vacant retail centers along transit corridors. Major contraction of the retail industry over the past decade along with the elimination of redevelopment funding for revitalization efforts have created a considerable inventory of underutilized property. Orange County has hundreds of miles of such corridors, many which also have high frequency bus service provided by the Orange County Transportation Authority, a key factor for workforce housing. In response to the shifting economic landscape for retail and the need to reexamine alternative development options, Urban Land Institute of Orange County has launched a major year-long initiative to explore and promote this opportunity. The 2018 Orange County Community Indicators report will check in on the progress of this initiative.

WHAT WORKED?

These case study developments did not disrupt the character of an existing residential neighborhood by rezoning from single-family to higher density use. Rather, each project took a parcel of vacant or underutilized non-residential land and turned it into residential housing that blends in with the surrounding community.

Additionally, both properties are in job-rich areas with access to amenities that residents need. This was essential not only for the residents' wellbeing, but made the projects competitive in their applications for federal tax credit financing. Access to transit and other amenities such as grocery stores, medical offices, schools and parks are key to being competitive for affordable housing tax credits.

Residents of the newly developed Oakcrest Terrace community are within walking distance of employment opportunities, as well as restaurants and retail. The affordable housing developer, National CORE, worked with the Orange County Transportation Authority (OCTA) to create two bus stops, bringing transit service back to the area, so that its residents would have access to job opportunities and other amenities via public transit.

Similarly, Clark Commons, built by Jamboree, is within one block of a bus stop on Beach Boulevard, with high frequency bus service provided by OCTA. Offices, retail, restaurants and a hotel are also within walking distance, as is Downtown Buena Park. The Mabel L. Pendleton Elementary School is across the street from Clark Commons.

Community support was essential to the success of both apartment communities. In Yorba Linda, National CORE made extensive efforts to engage the community and gain their support. Their efforts were successful because they showed the community that it is their local workforce – for example, teachers, police officers and nurses – that are in the 30% to 60% income range served by the project. And, local residents were given first priority to rent the apartments. It took less than two months to fully lease Oakcrest Terrace and it currently has a long waiting list.

Clark Commons is the second project that Jamboree has built in Buena Park. This project benefited from earlier community engagement efforts, including tours for elected officials and residents of completed affordable apartment communities built by Jamboree. For Clark Commons, the developer worked collaboratively with several community partners, including nearby schools, the library, North Orange County ROP, and St. Jude's Hospital. In this way, they identified the needs of the community and found ways to help fill those needs, including creating a community meeting space, and supporting children's literacy and summer programs.

In each case, the city was a partner in the affordable housing project. The City of Yorba Linda contributed about 20% of the funding to build Oakcrest Terrace, using former redevelopment agency funds. The City of Buena Park sold Jamboree the land (previously a city yard) with a long-term payback provision and no upfront payment required. The city also filled the shortfall in funding for the project, lending $2.8 million. These local contributions were critical to making the projects financially viable.

Finally, these affordable workforce housing projects look no different than market-rate apartments. They are built with high-quality materials; Clark Commons is LEED (Leadership in Energy and Environmental

ORANGE COUNTY MUST DEVELOP STRATEGIES TO BUILD ENOUGH HOUSING AT

COMPETE WITH LESS COSTLY PLACES THAT HAVE AN INCREASING NUMBER OF

Design)-certified Gold as an energy efficient development. Without insider knowledge, anyone would drive by these developments unaware that they are affordable housing.

LEGISLATION TO FURTHER AFFORDABLE HOUSING

While affordable housing developers are working with cities and residents to build workforce housing that fits the needs and constraints of the 34 individual cities in Orange County, the Association of California Cities–Orange County (ACC-OC) is working with legislators on a new law that would give local jurisdictions flexibility in how they can spend affordable housing funds.

When redevelopment agencies were dissolved in 2012, many local jurisdictions became "housing successors," given the job of investing their Low and Moderate Income Housing Funds (LMIHF). LMIHF are generated from property tax revenues on housing assets built by redevelopment agencies, and are set aside specifically for building affordable housing. Since 2012, these funds have stagnated, been depleted or are producing a much lower revenue stream. Consequently, cities must wait for their housing funds to accumulate enough money to build affordable housing, which means it can be very slow-going.

New legislation would allow cities to pool their funds to develop affordable housing, and to broaden allowable expenditures to include homelessness prevention and services.

DIVERSE PRICE POINTS TO MEET OUR RESIDENTS' NEEDS IN ORDER TO HIGHER WAGE JOBS AND ADEQUATE HOUSING.

Economy

EMPLOYMENT

At 3.5% in December 2016, Orange County's unemployment rate indicates the county has achieved pre-recession employment levels as unemployment continues to fall. The December 2016 unemployment rate of 3.5% is well below the 10-year high of 10.1%, which was hit several times in 2010, and below the December 2016 state and national rates of 5.0% and 4.5%, respectively. (At time of publication, Orange County's February 2017 unemployment rate was 3.7%.)

UNEMPLOYMENT RATE NEARING PRE-RECESSION LOWS

Unemployment Rate in Orange County, California and United States, 2006-2016
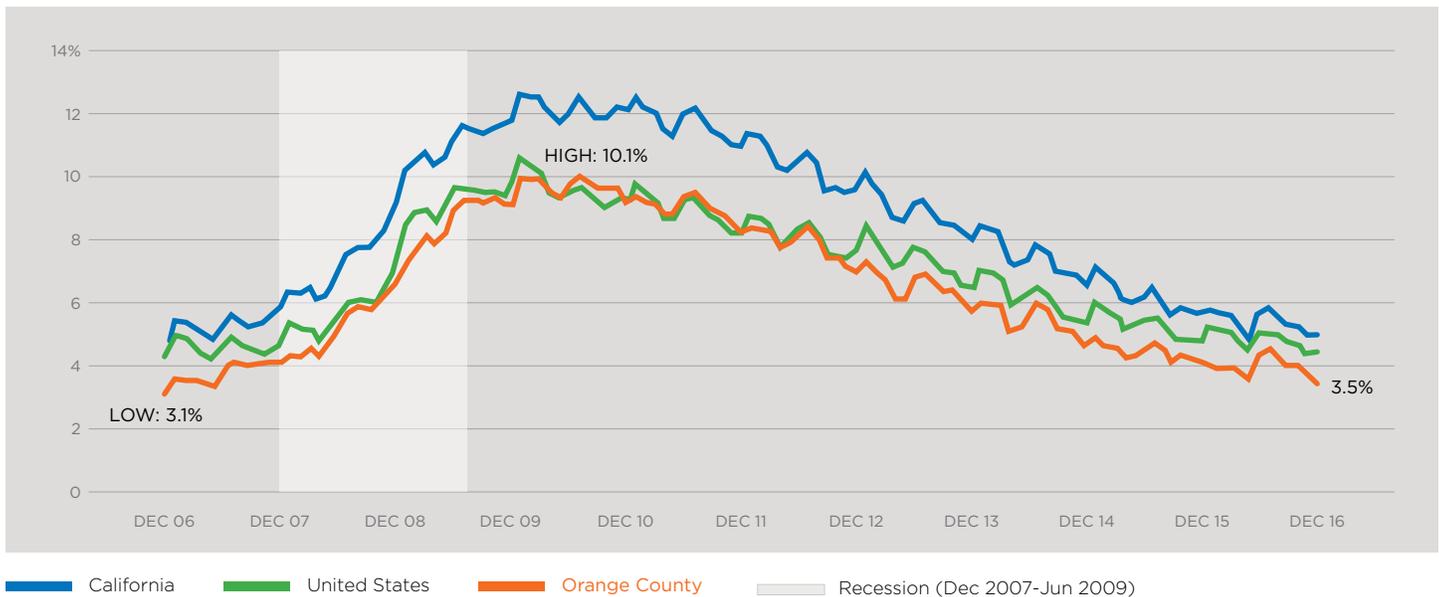
Source: California Employment Development Department (www.labormarketinfo.edd.ca.gov) and Bureau of Labor Statistics (www.bls.gov/data/)

The 10 industry clusters tracked account collectively for over half of Orange County jobs. Among the four large sectors tracked, Health Services led job growth, increasing 24% between 2006 and 2015. Tourism employment reached pre-recession levels in 2011 and overall grew 19% since 2006. The Construction sector, as well as Business and Professional Services have taken longer to rebound, but both have steadily added jobs since the end of the recession. Among the smaller sectors tracked, Biomedical jobs grew 29%, followed by Computer Software showing 12% growth between 2006 and 2015. The remaining clusters have not yet regained pre-recession numbers. Since 2006, Communication, Energy and Environment, and Defense and Aerospace experienced the sharpest declines, down 37%, 22% and 20%, respectively.

Between 2014 and 2015, average salaries in the four large sectors experienced an uptick after 10 years of lackluster growth. Among the smaller sectors, average salaries in the Energy and Environment, Computer Software, Computer Hardware, and Communication sectors all outpaced inflation, growing between 6% and 15% between 2006 and 2015, depending on the sector. Defense and Aerospace witnessed the largest decline in average salaries (down 5%).

JOB GROWTH IN FOUR LARGE SECTORS CONTINUES; LARGE SECTORS SEE SALARY UPTICKS

Employment and Average Salaries in Orange County Clusters with More than 40,000 Jobs, 2006-2015

AMONG SMALLER SECTORS, BIOMED AND SOFTWARE DRIVE JOB GROWTH; SALARIES OUTPACE INFLATION IN ALL SMALLER SECTORS EXCEPT BIOMED

Employment and Average Salaries in Orange County Clusters with 40,000 Jobs or Fewer, 2006-2015
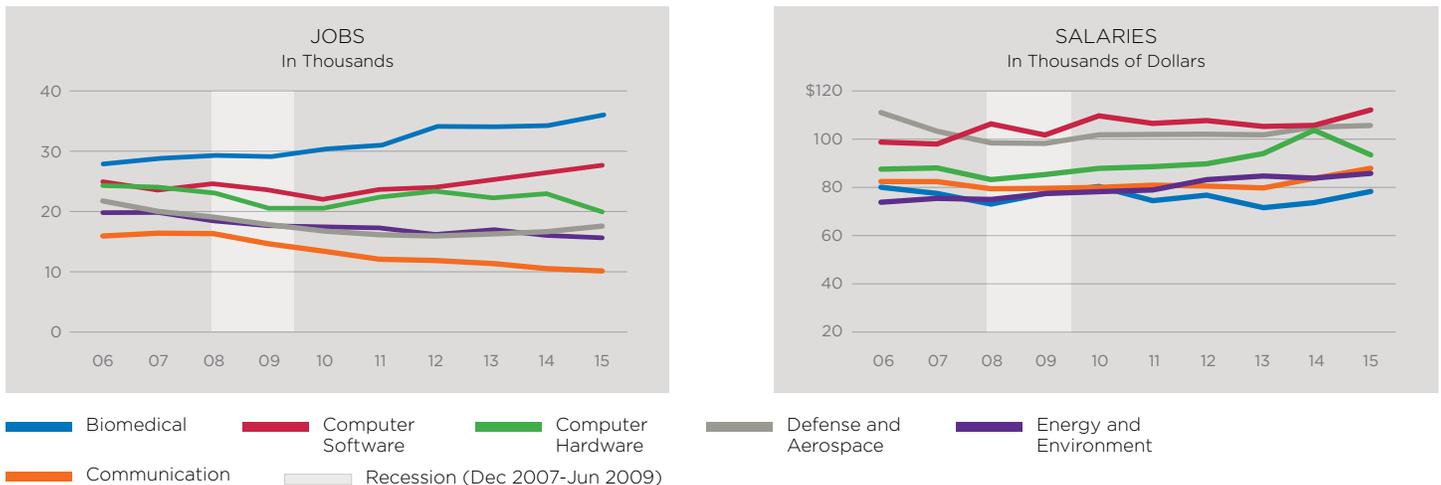
Sources: California Employment Development Department; Bureau of Labor Statistics, Inflation Calculator

Data Notes

Average salaries have been inflation-adjusted to 2015 dollars.

Economy

HIGH-TECH DIVERSITY AND GROWTH

Orange County has higher employment concentration than the national average in 14 out of 19 high-tech industries, making it tied for the 2nd most diverse high-tech economy in the nation. Orange County's overall high-tech employment concentration is 1.5 compared to the national average of 1.0, placing it 23rd out of 200 large metro areas in 2015.

Orange County's one-year growth in high-tech sector output continued to rise above the national average in 2015 (101.9 compared to 100.0). Five-year high-tech sector output growth climbed sharply to 107.4 in 2015.

ORANGE COUNTY RISES FROM 3RD TO 2ND MOST DIVERSE HIGH-TECH SECTOR IN NATION

Number of High-Tech Industries with Employment Above the National Average (out of 19 industries) in Orange County Compared to 200 Metro Areas (Selected Peers Shown), 2015
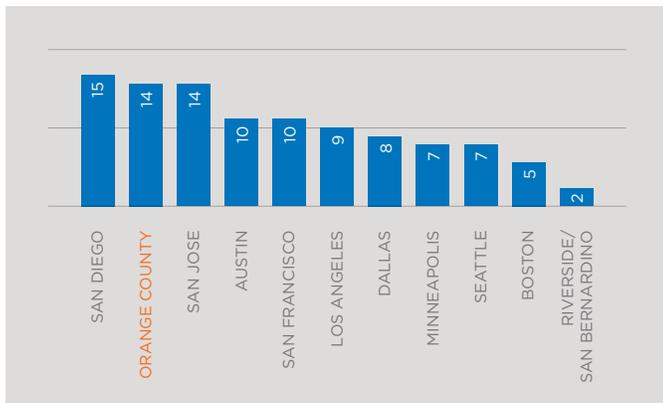
Source: Milken Institute, Best Performing Cities Report (www.milkeninstitute.org)

### ORANGE COUNTY REMAINS ABOVE THE NATIONAL AVERAGE IN HIGH-TECH EMPLOYMENT

High-Tech Sector Employment Concentration in Orange County Compared to 200 Metro Areas, 2015
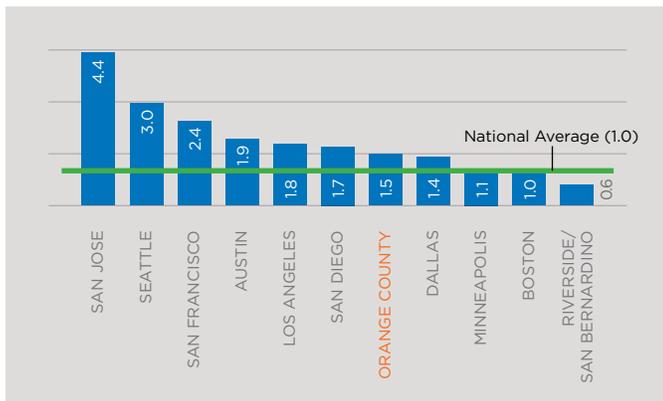
Source: Milken Institute, Best Performing Cities Report (www.milkeninstitute.org)

HIGH-TECH SECTOR GROWTH CONTINUES UPWARD TRAJECTORY

High-Tech Sector Output Growth in Orange County Relative to the National Average, 2006-2015
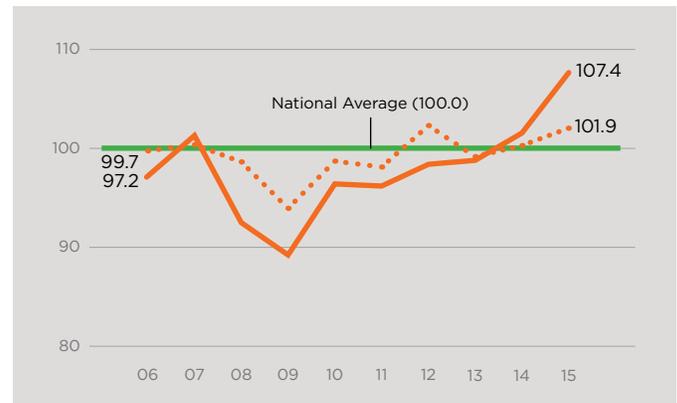
Orange County One-Year Relative Output Growth
Orange County Five-Year Relative Output Growth

Source: Milken Institute, Best Performing Cities Report (www.milkeninstitute.org)
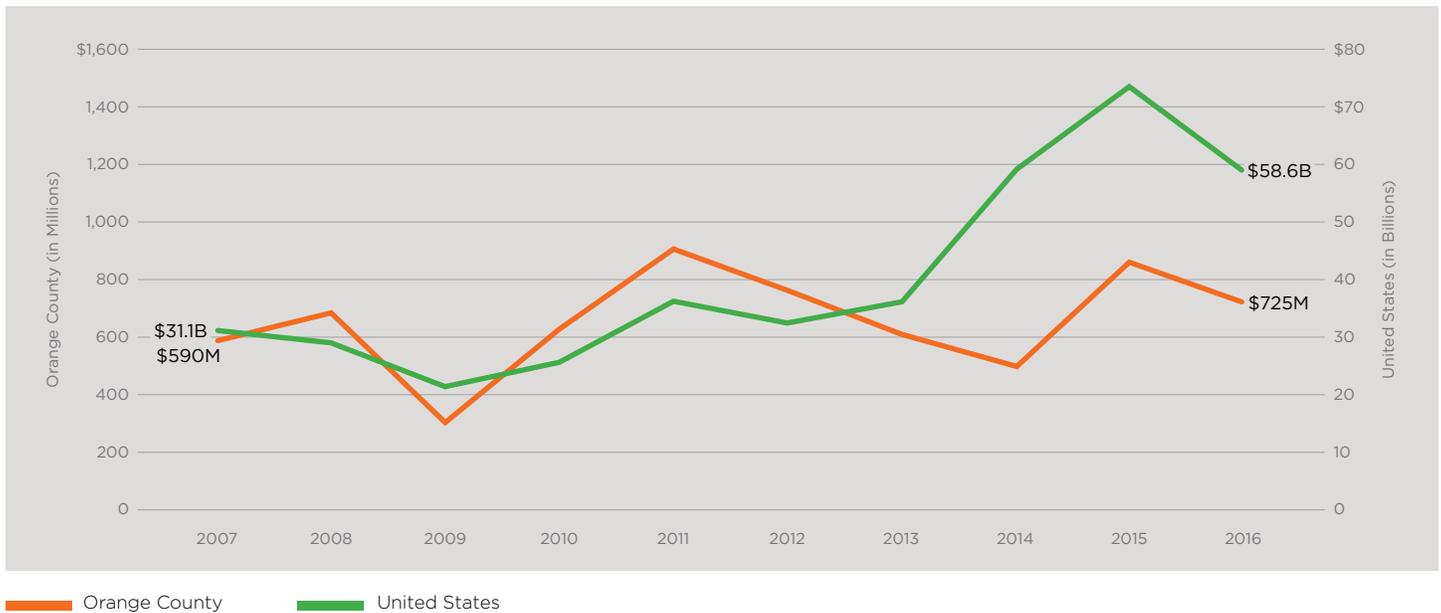
Data Notes

The diversity of Orange County's high-tech economy is measured by counting the number of high-tech sector industries out of 19 that have employment concentrations above the national average. Employment concentration is relative to a national average of 1.0, where results below 1.0 signal lower employment in a particular industry than the national average and results above 1.0 signal greater employment in a particular industry than the national average. High-tech sector output growth is relative to the national average of 100.0.

INNOVATION

After sharp growth in 2015, venture capital funding fell 15% in Orange County in 2016. This drop mirrors the 20% nationwide drop in venture capital funding between 2015 and 2016. Orange County's 2016 share of national venture capital was approximately 1.2%, which is less than the previous 10-year average of 1.9% of total national venture capital. In 2016, software businesses once again garnered the largest amount of venture capital, accounting for 36% of total venture capital investments in Orange County. The mobile and telecommunication sector accounted for 13% of total 2016 venture capital investments in Orange County, as did the media and entertainment sector.

VENTURE CAPITAL INVESTMENT DIPS

Venture Capital Investment in Orange County and United States, 2007-2016

Orange County   United States

Source: PwC MoneyTree Report prepared PricewaterhouseCoopers and CB Insights (www.pwc.com/us/en/technology/moneytree.html)

Data Notes

Data for United States venture capital investment totals have been updated retroactively since previously presented.

HOUSING AFFORDABILITY

The median home sale price for an existing single-family home rose 6.4% in one year, from $700,000 in December 2015 to $745,000 in December 2016. Despite this one-year rise, the percentage of first-time homebuyers able to afford an entry-level home did not change between third quarter 2015 and 2016, remaining at 43%. First-time buyers need a minimum income of approximately $92,000 to qualify to purchase an entry-level home priced at approximately $629,000 (or 85% of the Orange County median). Orange County is 27% less affordable for first-time buyers than the most affordable period in recent years, in 2011, when 59% of first-time buyers could afford an entry-level home. Orange County is less affordable than all peers compared, including the notoriously expensive San Francisco Bay Area.

HOME SALE PRICES CONTINUE TO CLIMB; FASTER GROWTH IN ORANGE COUNTY THAN STATEWIDE

Median Existing Single-Family Home Sale Price in Orange County and California, December 2007-December 2016
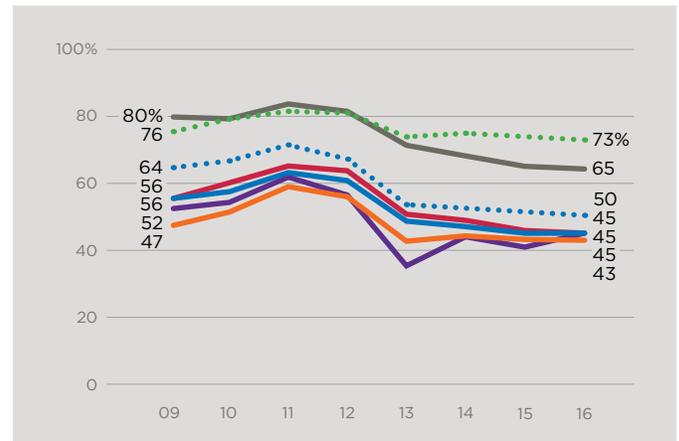

Source: California Association of Realtors (www.car.org/marketdata/data/housingdata/)

AFFORDABILITY REMAINS FLAT, AT 43% OF FIRST-TIME BUYERS ABLE TO AFFORD AN ENTRY-LEVEL ORANGE COUNTY HOME

Regional Comparison of the Percentage of First-Time Homebuyers Able to Afford an Entry-Level Home, 2009-2016
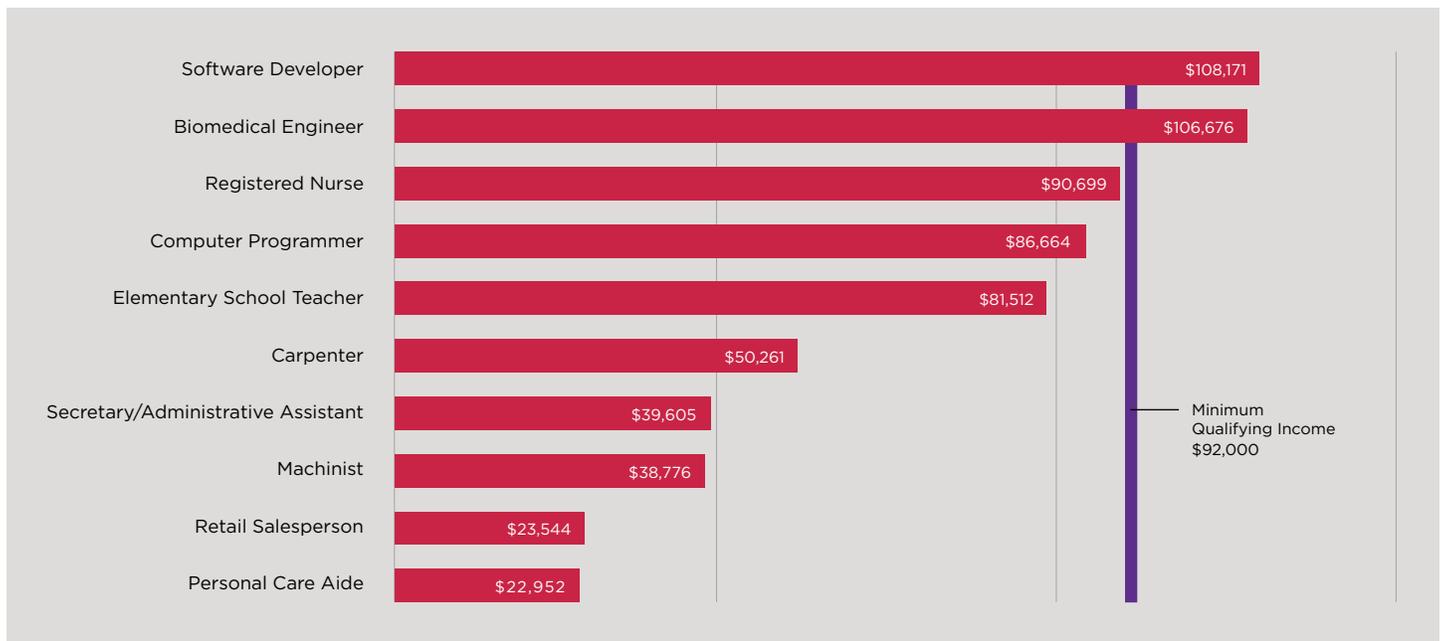

Source: California Association of Realtors (www.car.org)

When comparing median salaries in a selection of common or growing occupations to the minimum income needed to qualify for an entry-level home, only two of the selected occupations would qualify: software developers and biomedical engineers. The remaining occupations would not qualify, including nurses and computer programmers, which both slipped below the minimum qualifying income between 2015 and 2016.

HOMEOWNERSHIP SLIPS OUT OF REACH FOR NURSES AND PROGRAMMERS

Minimum Income Needed to Afford an Entry-Level Home Compared to Median Salaries in Selected Occupations in Orange County, Third Quarter 2016

Occupation	Salary
Software Developer	$108,171
Biomedical Engineer	$106,676
Registered Nurse	$90,699
Computer Programmer	$86,664
Elementary School Teacher	$81,512
Carpenter	$50,261
Secretary/Administrative Assistant	$39,605
Machinist	$38,776
Retail Salesperson	$23,544
Personal Care Aide	$22,952

Minimum Qualifying Income $92,000

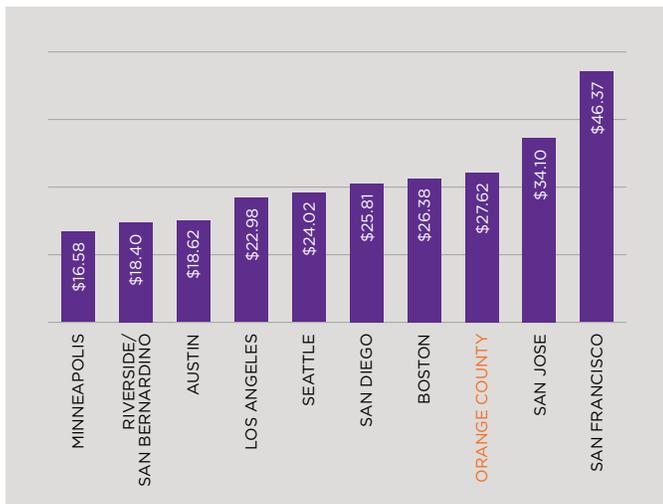*Sources: California Association of Realtors; California Employment Development Department*

RENTAL AFFORDABILITY

In 2017, the hourly wage needed to afford a median-priced one-bedroom unit was $27.62, equivalent to an annual income of $57,440. This Housing Wage is up from $25.46 in 2016 and above the previous five-year average of $25.37. Workers earning above minimum wage, but below the Housing Wage of $27.62 may experience increased economic insecurity, as a larger proportion of their earnings must go towards housing. High rent burden can also lead to overcrowding and homelessness.

Due to increases in the California minimum wage over the past three years, the number of hours per week a minimum wage earner must work to afford a median priced one-bedroom unit in Orange County declined from 126 hours per week in 2014, when the minimum wage was $8 per hour, to 105 hours per week in 2017 at $10.50 per hour. However, housing costs rose faster than the minimum wage increased between 2016 and 2017; a minimum wage earner would have to work more hours per week in 2017 than they had to in 2016. Future graduated increases in the minimum wage, which were signed into law in April 2016, may further reduce rent burden if rising housing costs do not continue to exceed wage increases.

$28/HOUR NEEDED TO AFFORD A ONE-BEDROOM IN ORANGE COUNTY

Regional Comparison of the Hourly Wage Needed to Afford a One-Bedroom Unit, 2017

Region	Hourly Wage
MINNEAPOLIS	$16.58
RIVERSIDE/SAN BERNARDINO	$18.40
AUSTIN	$18.62
LOS ANGELES	$22.98
SEATTLE	$24.02
SAN DIEGO	$25.81
BOSTON	$26.38
ORANGE COUNTY	$27.62
SAN JOSE	$34.10
SAN FRANCISCO	$46.37

Sources: Community Indicators Report analysis of Fair Market Rent data from the U.S. Department of Housing and Urban Development (www.huduser.org) using the methodology of the National Low Income Housing Coalition (www.nlihc.org)

MINIMUM WAGE INCREASES INSUFFICIENT IN THE FACE OF ORANGE COUNTY'S HEFTY RENT BURDEN

Rental Market Affordability in Orange County, 2016 and 2017

	2016	2017
MEDIAN MARKET RENT (MONTHLY)		
ONE BEDROOM	$1,324	$1,436
TWO BEDROOM	$1,672	$1,813
THREE BEDROOM	$2,327	$2,531
AMOUNT A HOUSEHOLD WITH ONE MINIMUM WAGE EARNER CAN AFFORD TO PAY IN RENT (MONTHLY)	$520	$546
NUMBER OF HOURS PER WEEK A MINIMUM WAGE EARNER MUST WORK TO AFFORD A ONE-BEDROOM APARTMENT	102	105

Sources: Community Indicators Report analysis of Fair Market Rent data from the U.S. Department of Housing and Urban Development (www.huduser.org) using the methodology of the National Low Income Housing Coalition (www.nlihc.org); California Employment Development Department (www.edd.ca.gov)

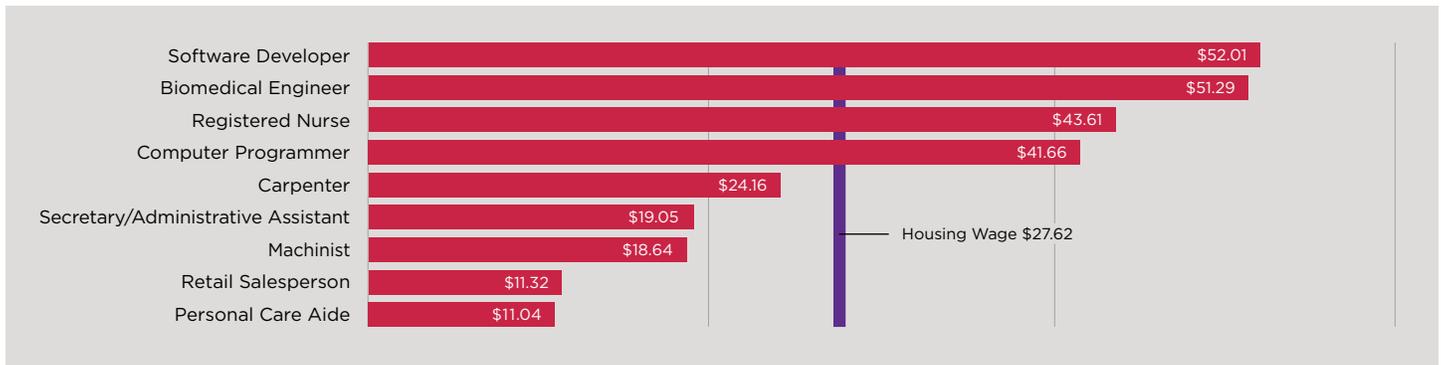### HOUSING CHOICE VOUCHERS: A STRATEGY TO PREVENT HOMELESSNESS

Vouchers allow households to choose housing in the private market. Households with vouchers pay about 30 percent of their income on rent, and the local Housing Authority pays the remainder of the rent to the landlord. Research shows that vouchers can prevent homelessness. For example, one study showed that 80% of families who left a shelter with a housing subsidy had stable housing after three years, while the share of stably-housed families who left a shelter without a subsidy was just 18%. However, nationwide, fewer than one in four households that are eligible receive any form of federal housing assistance due to a lack of funding. This pattern plays out in Orange County as well; the number of vouchers allocated to local Housing Authorities would need to be quadrupled to meet demand.

Source: National Alliance to End Homelessness, factsheet "FY2016 Appropriations: Housing Choice Voucher Program" (www.endhomelessness.org/)

In Orange County, median hourly wages for carpenters, machinists and administrative assistants are too low to afford median rent for a one-bedroom unit. Wages for personal care aides and retail salespersons are lower still, less than half the amount needed to afford a one-bedroom unit. For these lower-income workers, a substantial proportion of their personal income must go toward housing, leaving less for other basic needs and unexpected expenses. High rent burden can also lead to overcrowding, when families double- or triple-up in a house to save money on rent, or homelessness if a family or individual gets behind on rent or cannot afford the upfront costs of renting.

RENT BURDEN IS HIGH FOR MANY LOWER-WAGE WORKERS

Hourly Wage Needed to Afford a Median One-Bedroom Unit in Orange County (2017) Compared to Median Local Wages in Selected Occupations (3rd Quarter 2016)

| Occupation	Wage
Software Developer	$52.01
Biomedical Engineer	$51.29
Registered Nurse	$43.61
Computer Programmer	$41.66
Carpenter	$24.16
Secretary/Administrative Assistant	$19.05
Machinist	$18.64
Retail Salesperson	$11.32
Personal Care Aide	$11.04

Housing Wage $27.62

Sources: Community Indicators Report analysis of Fair Market Rent data from the U.S. Department of Housing and Urban Development using the methodology of the National Low Income Housing Coalition (2017 Housing Wage); California Employment Development Department Occupational Employment Statistics (3rd Quarter 2016)

The four Housing Authorities serving Orange County provided rental assistance (vouchers) to approximately 21,983 low-income households in 2016. There are an estimated 81,088 households in total on the four waiting lists for rental assistance in Orange County. To meet current demand, the number of vouchers allotted to Housing Authorities serving Orange County would need to be nearly quadrupled.

Data Notes

Since applicants may apply for rental assistance from any Housing Authority, the potential duplication on wait lists among the four Housing Authorities serving Orange County is addressed by discounting the sum of the number of households on all four wait lists (95,398 in 2016) by an estimated duplication rate of 15%. The Housing Wage calculation uses the common definition of affordability, which is spending no more than 30 percent of income on rent.

NEARLY 60,000 HOUSEHOLDS AWAIT RENTAL ASSISTANCE SUPPORT

Number of Households on Orange County Housing Authorities' Waiting Lists and Households Assisted, 2012-2016

Year	Households Assisted	Households on Waiting List
12	22,229	
13	22,700	
14	21,716	87,872
15	22,038	77,194
16	21,983	81,088
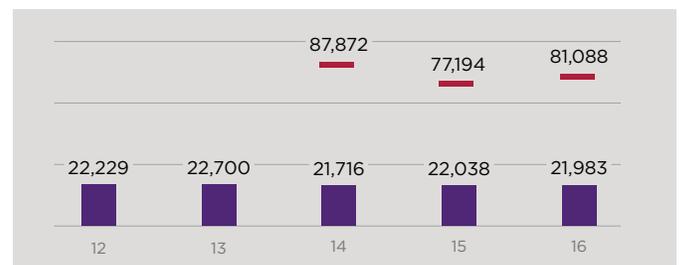
■ Households Assisted
■ Households on Waiting List (Discounted for Potential Duplication)

Sources: Anaheim Housing Authority; Garden Grove Housing Authority; Santa Ana Housing Authority; Orange County Housing Authority; Housing and Urban Development (https://pic.hud.gov/pic/RCRPublic/rcrmain.asp)
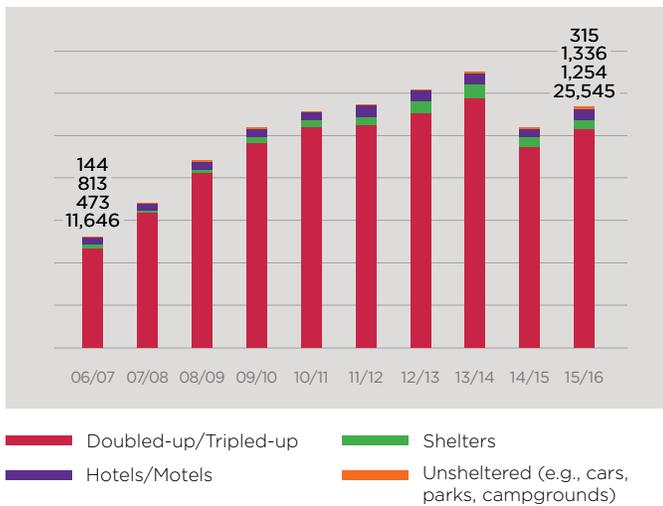
Housing

HOUSING SECURITY

In 2015/16, there were 28,450 Pre-K through 12th grade students who were identified as homeless or living in unstable housing arrangements. Most of these students (25,545) live in families that are doubled- or tripled-up with another family. This number has grown 119% since 2006/07, when 11,646 students were living doubled-up. Since 2006/07, the number of students living in motels rose 64%, while the number students living in shelters rose 165% and the number of unsheltered students rose 119%.

At 5.8% of total enrollment, Orange County has proportionately more students with insecure housing than the statewide average and all California regions compared except Riverside/San Bernardino.

28,450 ORANGE COUNTY STUDENTS ARE HOMELESS OR DOUBLED-UP WITH ANOTHER FAMILY

Homeless and Housing Insecure Students in Orange County by Primary Nighttime Residence, 2006/07-2015/16

Legend:
- Doubled-up/Tripled-up
- Hotels/Motels
- Shelters
- Unsheltered (e.g., cars, parks, campgrounds)

Source: California Department of Education

ORANGE COUNTY'S HOMELESS STUDENT RATE REMAINS ABOVE THE STATE AVERAGE

Regional Comparison of Homeless and Housing Insecure School Age Students by Percent of Total Enrollment, 2015/16

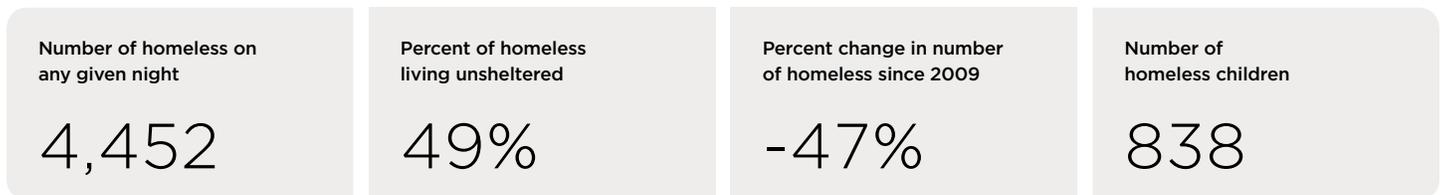*Source: California Department of Education*

Data Notes

Due to a change made to the California Department of Education student data collection system, CALPADS, a student's homeless status did not automatically transfer from 2013/14 to 2014/15, resulting in a temporary decline in the official number of students identified as homeless in 2014/15.

Progress on the development of the Year-Round Emergency Shelter/Multi-Service Center at 1000 N. Kraemer Place in Anaheim continues. In September 2016, the County of Orange selected Mercy House to operate and maintain the future center. The new facility will renovate an existing industrial building to provide shelter and services for 200 people in an effort to transition individuals experiencing homelessness into stable, permanent housing. To allow the facility to be operational as soon as possible, the facility will be built in phases, with Phase I completed by late spring 2017, enabling occupancy of 100 individuals, and Phase 2 completed by summer 2018.

HOMELESS IN ORANGE COUNTY

Point-in-Time Count Results, 2015

Number of homeless on any given night	Percent of homeless living unsheltered	Percent change in number of homeless since 2009	Number of homeless children
4,452	49%	-47%	838

Source: Orange County 2-1-1, 2015 Point-in-Time Count and Survey (www.ocpartnership.net)

DEFINING HOMELESSNESS

The Point-in-Time (PIT) estimates are based on the U.S. Housing and Urban Development (HUD) department definition of homelessness, which includes individuals and families living in shelters or living unsheltered. The federal law that governs the identification of homeless and housing insecure school-age students presented in this indicator also includes in the definition of "homeless" families housed in motels or hotels and families doubled- or tripled-up due to economic hardship. The 2015 PIT took place on January 24, 2015 and seasonal emergency shelters were open. The 2017 PIT took place on January 28, 2017 and results are expected in the summer of 2017.
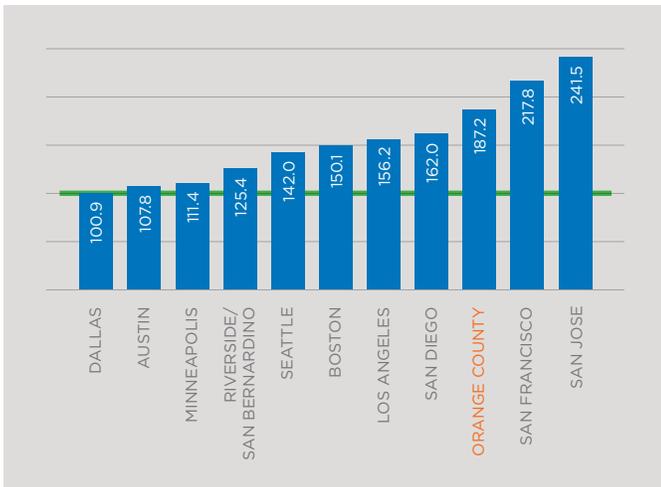
$ Income

COST OF LIVING AND HOUSEHOLD INCOME

In 2016, Orange County's cost of living index value of 187.2 was the third highest among peer markets and 87% higher than the national average of 100. Orange County's high cost of living is driven by high housing costs, which account for 30% of the index and are estimated to be 356% higher than the national average. The cost of living calculation also includes food and groceries, transportation, utilities, health care, and miscellaneous expenses.

While Orange County's overall cost of living is 87% higher than the national average, the county's median family income is only 41% higher than the nation's median. This unfavorable differential is more pronounced in Orange County than all peers compared except Los Angeles, San Francisco and San Diego, which experience a somewhat larger gap between cost of living and income. A large gap puts the squeeze on many residents, particularly those earning less than median income and trying to buy or rent in high-cost housing markets like Orange County.

ORANGE COUNTY 87% MORE EXPENSIVE THAN NATIONAL AVERAGE
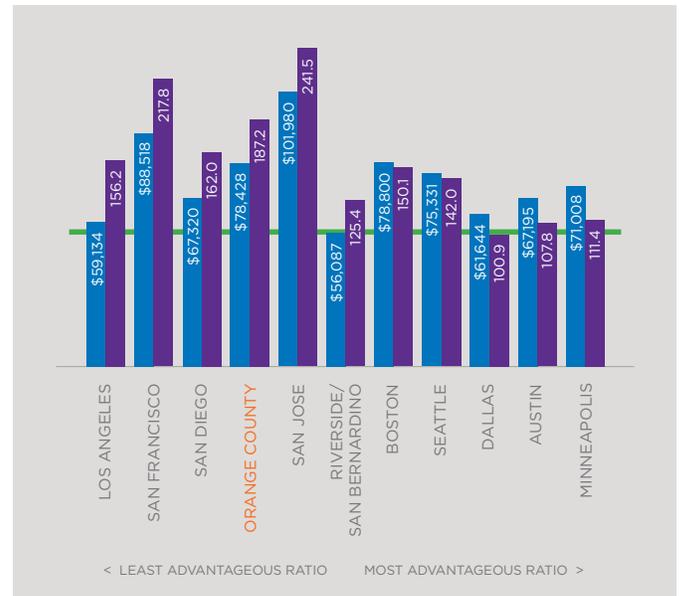
Regional Comparison of Cost of Living, 2016

Values by city:
- DALLAS: 100.9
- AUSTIN: 107.8
- MINNEAPOLIS: 111.4
- RIVERSIDE/SAN BERNARDINO: 125.4
- SEATTLE: 142.0
- BOSTON: 150.1
- LOS ANGELES: 156.2
- SAN DIEGO: 162.0
- ORANGE COUNTY: 187.2
- SAN FRANCISCO: 217.8
- SAN JOSE: 241.5

▬ United States Average (100)

Source: Sperling's Best Places (www.bestplaces.net)

CALIFORNIA REGIONS ENDURE LARGEST DIFFERENTIALS BETWEEN INCOME AND COST OF LIVING AMONG AREAS COMPARED

Regional Comparison of Median Household Income (2015) Compared to Cost of Living (2016)

Values by region (Household Income / Cost of Living Index):
- LOS ANGELES: $59,134 / 156.2
- SAN FRANCISCO: $88,518 / 217.8
- SAN DIEGO: $67,320 / 162.0
- ORANGE COUNTY: $78,428 / 187.2
- SAN JOSE: $101,980 / 241.5
- RIVERSIDE/SAN BERNARDINO: $56,087 / 125.4
- BOSTON: $78,800 / 150.1
- SEATTLE: $75,331 / 142.0
- DALLAS: $61,644 / 100.9
- AUSTIN: $67,195 / 107.8
- MINNEAPOLIS: $71,008 / 111.4

< LEAST ADVANTAGEOUS RATIO   MOST ADVANTAGEOUS RATIO >

▬ Household Income   ▬ Cost of Living Index
▬ United States Median Household Income ($55,775) and Cost of Living (100)

Sources: U.S. Census Bureau, American Community Survey, 1-Year Estimates; Sperling's Best Places (www.bestplaces.net)

At $78,428 in 2015, Orange County's median household income increased for the third consecutive year when adjusted for inflation, rising 3% from 2014, but remaining down 5% since 2006. The longer-term decline is due to lackluster median income growth combined with a cumulative inflation rate of 18% between 2006 and 2015.

INCOME GROWTH OUTPACES INFLATION FOR THIRD CONSECUTIVE YEAR; REMAINS BELOW PRE-RECESSION LEVELS

Median Household Income in Orange County, California and United States, 2006-2015 (Inflation-Adjusted to 2015 Dollars)

Orange County	California	United States
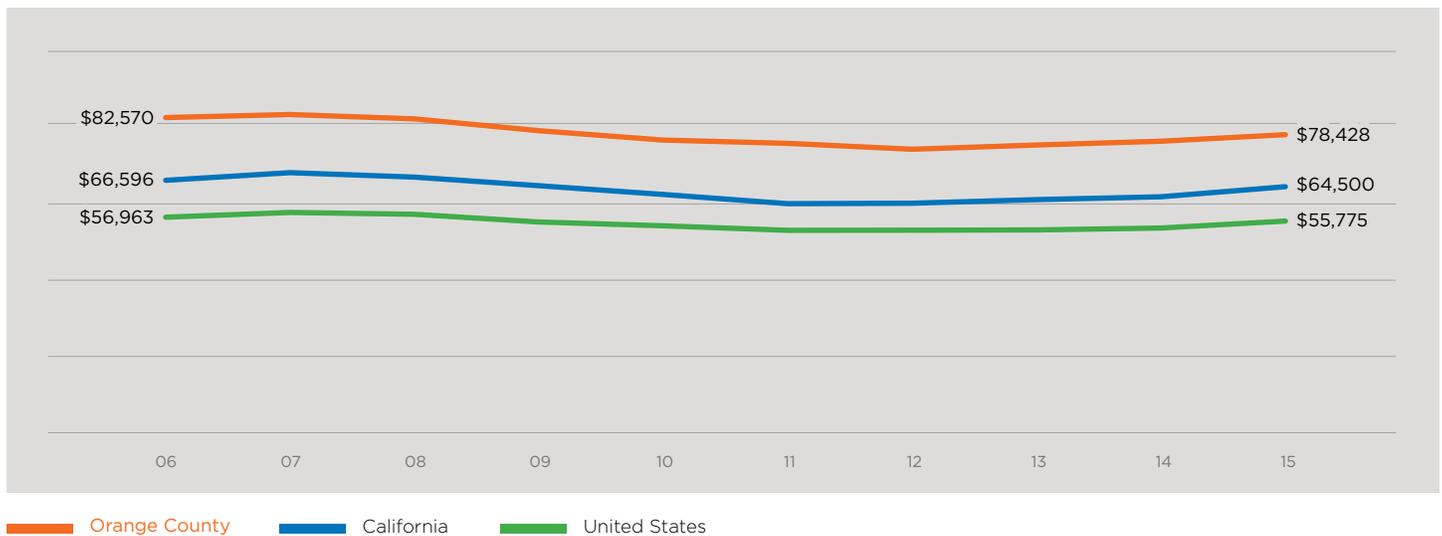
Sources: U.S. Census Bureau, American Community Survey, 1-Year Estimates (http://factfinder.census.gov/); U.S. Bureau of Labor Statistics, Inflation Calculator (www.bls.gov/data/inflation_calculator.htm)

$ Income
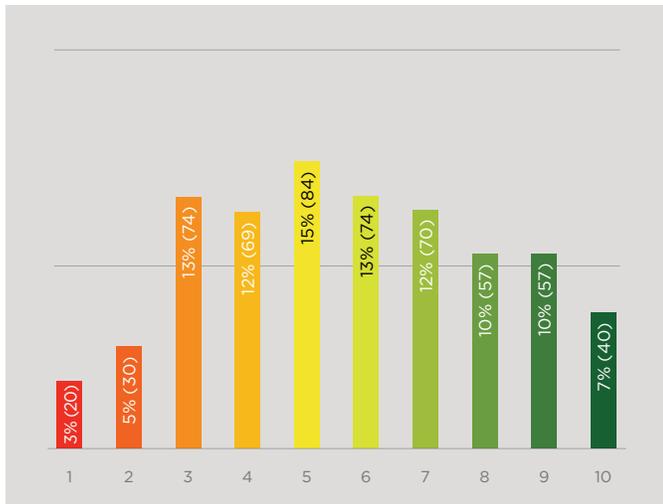
FAMILY FINANCIAL STABILITY

The 2015 Family Financial Stability Index for Orange County (FFSI-OC) reveals that 34% of neighborhoods had low levels of family financial stability (scores of 1, 2, 3, and 4). The FFSI-OC measures the financial stability of families with children under 18 by Orange County neighborhood and is a composite of three metrics: family income, employment status, and amount of household income spent on rent. The 2015 FFSI-OC score of 34% is an improvement since tracking began in 2012, when 39% of neighborhoods were unstable. The improvement in financial stability is driven largely by declining unemployment, while income and rent burden have not improved markedly.

At the city level, the cities with the lowest levels of family financial stability all had scores of 3 on the 2015 FFSI-OC: Anaheim, La Habra, San Juan Capistrano, and Stanton.

FFSI Score

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

| Least Stable | Unstable | Moderately Stable | Stable | Most Stable |
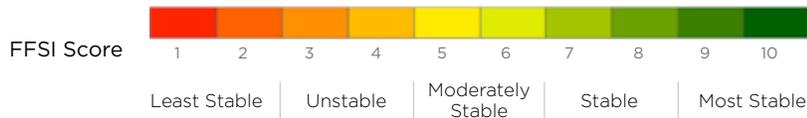
MOST NEIGHBORHOODS HAVE HIGH LEVELS OF FAMILY FINANCIAL STABILITY

FFSI-OC Scores: Percent (and Count) of Orange County Neighborhoods, 2015
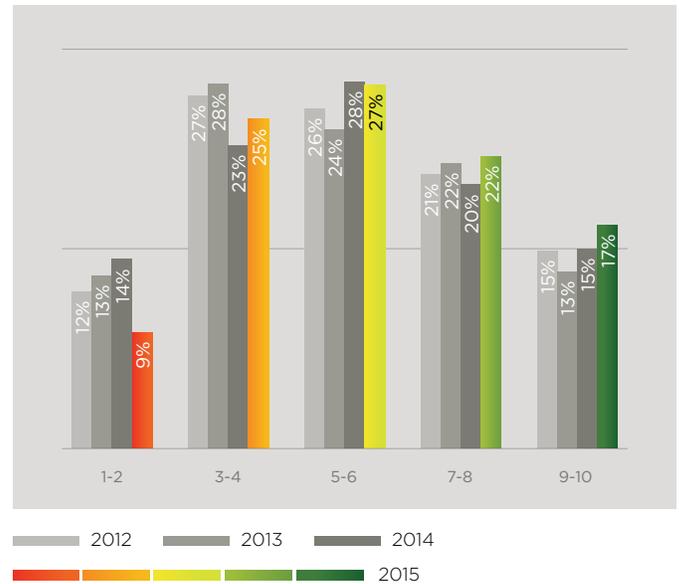

Note: Percentages have been rounded.

Source: Parsons Consulting, Inc. for Orange County United Way

FEWER NEIGHBORHOODS WITH EXTREME LEVELS OF FAMILY FINANCIAL INSTABILITY
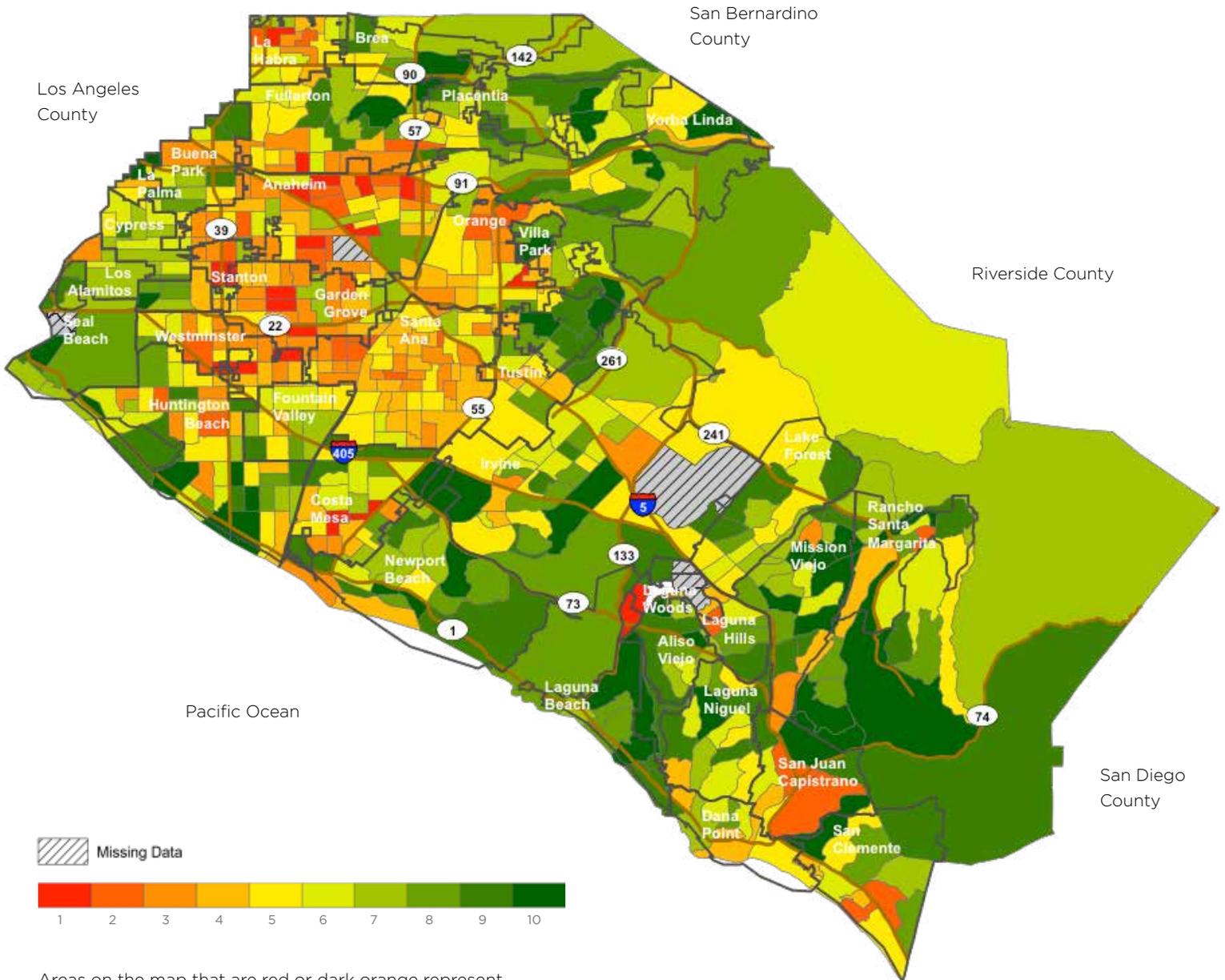
Percent of Orange County Neighborhoods by FFSI-OC Score, 2012-2015

Source: Parsons Consulting, Inc. for Orange County United Way

34% OF NEIGHBORHOODS HAVE CONCENTRATED LEVELS OF FAMILY FINANCIAL INSTABILITY

Family Financial Stability Index – Orange County: 2015 Neighborhood-Level Results

Areas on the map that are red or dark orange represent neighborhoods with low levels of family financial stability. Families in these neighborhoods are more likely to have a low income, spend more than 50% of household income on rent, and/or have one or more adults unemployed who are seeking employment. Areas on the map that are green represent areas with a higher level of families that are financially stable.

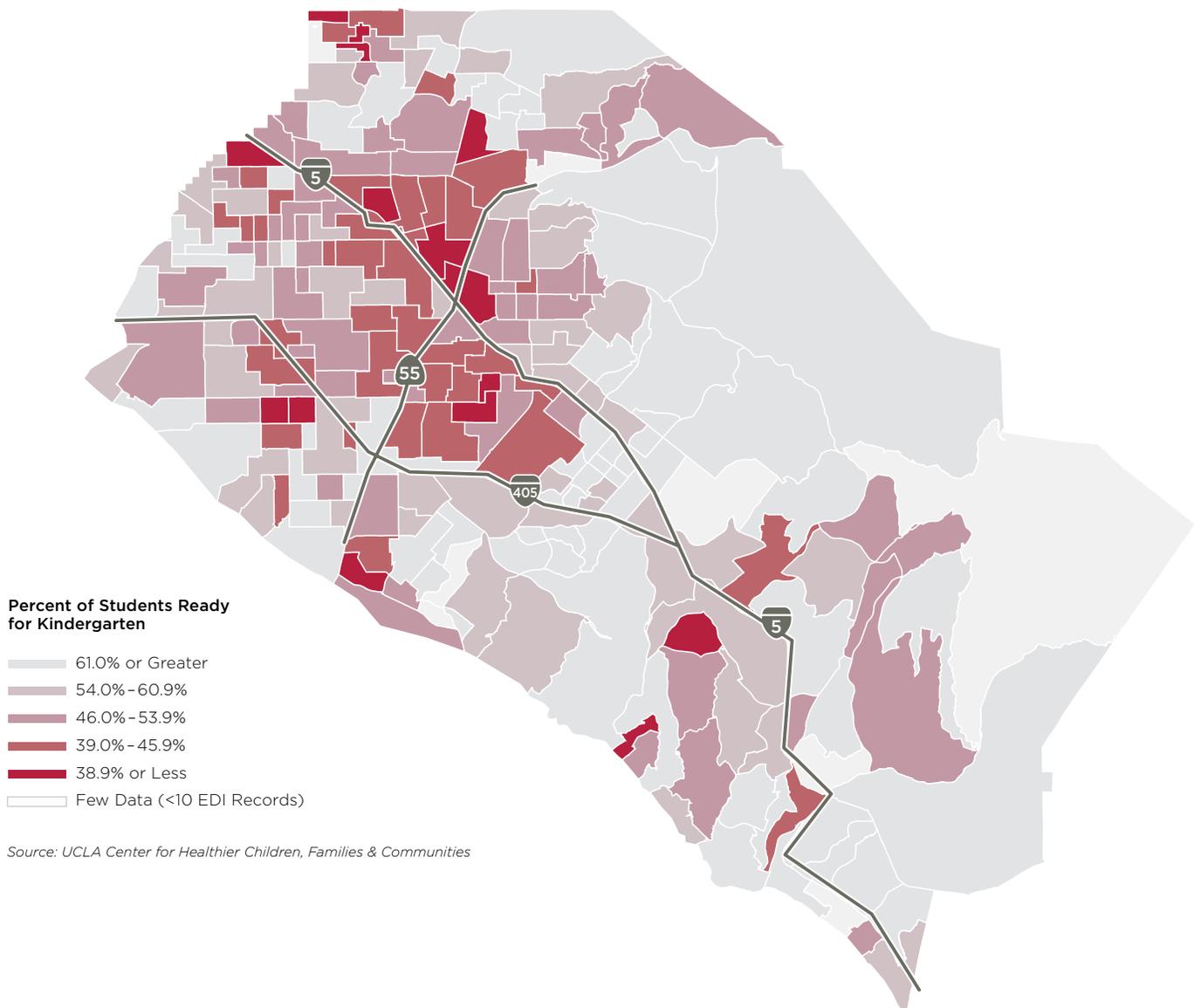*Source: Parsons Consulting, Inc. for Orange County United Way*

Education

KINDERGARTEN READINESS

In 2016, 52% of children in Orange County were developmentally ready for kindergarten, the same as in 2015. Orange County measures children's readiness for school by using the Early Development Index (EDI). The EDI tracks five areas of a child's development: physical health and well-being; communication skills and general knowledge; social competence; emotional maturity; and language and cognitive development. Kindergarteners attending public schools are assessed to determine their readiness when they first entered school. Children are considered developmentally ready for school if they are on track on all five areas.

CHILDREN'S SCHOOL READINESS VARIES BY COMMUNITY

Percentage of Children on Track in All Developmental Areas by Orange County Neighborhood, 2016

Percent of Students Ready for Kindergarten

- 61.0% or Greater
- 54.0% – 60.9%
- 46.0% – 53.9%
- 39.0% – 45.9%
- 38.9% or Less
- Few Data (<10 EDI Records)

Source: UCLA Center for Healthier Children, Families & Communities

The five areas of a child's development are measured by 16 subareas. EDI data from 2016 indicate children are most ready in the subareas of physical readiness for the school day (98%) and physical independence (90%). Children are least ready in the subareas of communication skills and general knowledge (40% not ready), gross and fine motor skills (35% not ready), and prosocial and helping behavior (31% not ready).

CHILDREN ARE LAGGING IN COMMUNICATION, MOTOR, AND SOCIAL SKILLS

Readiness in the Three (out of 16) Subareas where Children are Least Ready, Orange County, 2016

COMMUNICATION SKILLS AND GENERAL KNOWLEDGE

38% 40% 22%

GROSS AND FINE MOTOR SKILLS

35% 50% 16%

PROSOCIAL AND HELPING BEHAVIOR

38% 31% 31%

● Ready   ● Somewhat Ready   ● Not Ready
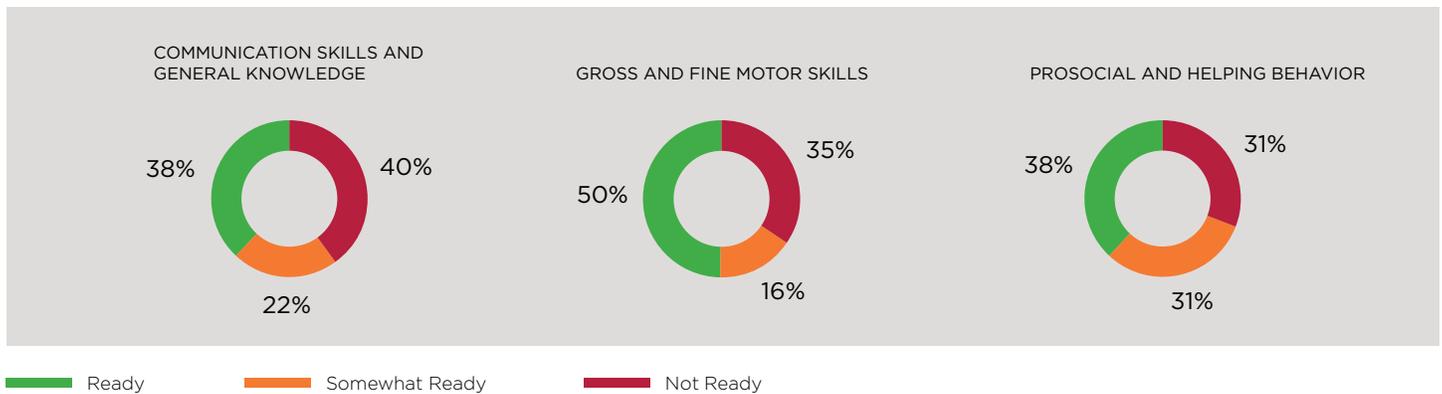
Percentages may not add to 100% due to rounding.

Source: UCLA Center for Healthier Children, Families & Communities

EARLY DEVELOPMENT INDEX SUBAREAS

LANGUAGE AND COGNITIVE DEVELOPMENT
- Interest in literacy/numeracy and memory
- Basic numeracy skills
- Basic literacy skills
- Advanced literary skills

COMMUNICATION SKILLS AND GENERAL KNOWLEDGE

SOCIAL COMPETENCE
- Readiness to explore new things
- Responsibility and respect
- Approaches to learning
- Overall social competence

PHYSICAL HEALTH AND WELL-BEING
- Physical readiness for school day
- Physical independence
- Gross and fine motor skills

EMOTIONAL MATURITY
- Anxious and fearful behavior
- Aggressive behavior
- Hyperactive and inattentive behavior
- Prosocial and helping behavior

Data Notes

The EDI is a measure of Orange County children's readiness for school, conducted while they are in kindergarten. It assesses children's development by using a 120-item questionnaire filled out by kindergarten teachers on every child in their class. The EDI does not label or identify individual children with specific problems. Instead, it looks at how experiences at home and community can help prepare children for the school environment. In 2015, comprehensive school readiness (EDI) data were available for the first time in Orange County. The EDI is the copyright of McMaster University and must not be copied, distributed, or used in any way without the prior consent of the Children and Families Commission of Orange County, UCLA or McMaster. Percentages may not add to 100% due to rounding.
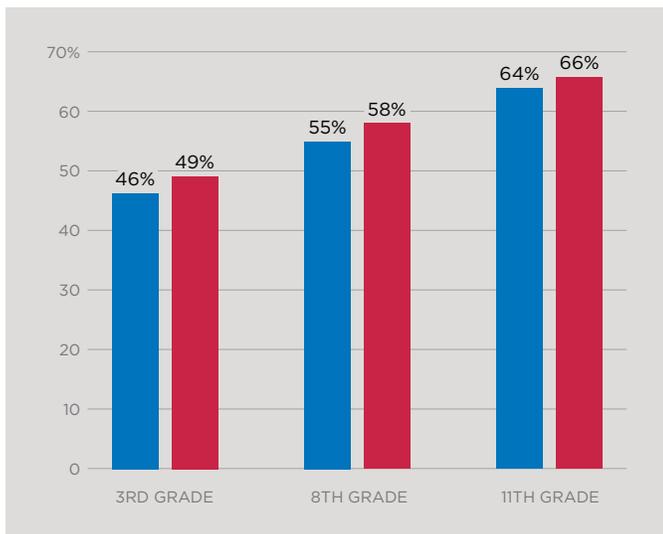
Education

ACADEMIC PERFORMANCE: LITERACY

In 2015/16, nearly half (49%) of Orange County 3rd grade students met or exceeded the statewide grade-level standard for English language arts and literacy (ELA). This proportion is an improvement from 46% the previous year and higher than the state average of 43%. Academic performance also improved in the past year for 8th grade students (up three percentage points) and 11th grade students (up two percentage points). In 2015/16, 58% of Orange County 8th graders and 66% of 11th graders met or exceeded the ELA achievement standards, compared with California averages of 48% and 59%, respectively. Student performance in literacy increases as the grade level increases.

For all grade levels combined, 57% of Orange County students tested met or exceeded grade level standards for ELA in 2015/16.[1] In comparison, 38% of economically disadvantaged students and 15% of English learners met or exceeded the performance standard for ELA. Asian students had the greatest percentage of students at or above the standard at 82%, compared with 73% for White students and 39% for Latino students. Scores among all student subgroups improved from the previous year.

LITERACY SCORES IMPROVE FOR ALL GRADES COMPARED

English Language Arts and Literacy Student Performance in Orange County, 2014/15 and 2015/16
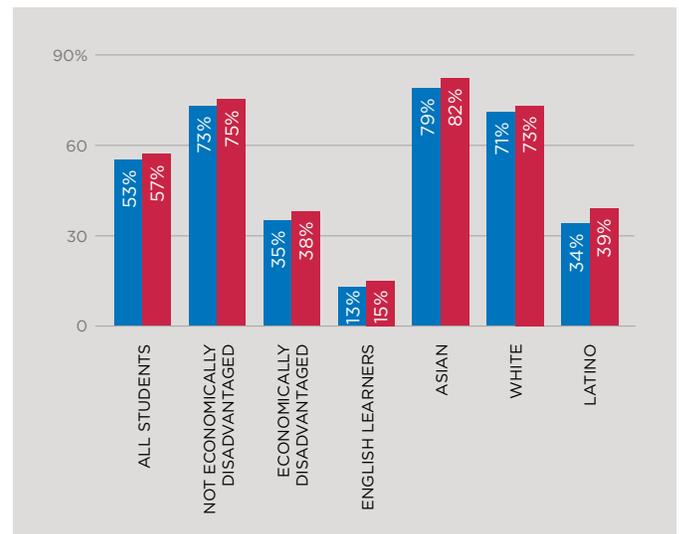

Legend: 2014/15 | 2015/16

Sources: Orange County Department of Education and California Department of Education (caaspp.cde.ca.gov/sb2016/)

ACHIEVEMENT GAPS PERSIST AMONG SUBGROUPS

Orange County Student ELA Performance by Economic Status, English Proficiency, and Race/Ethnicity, 2014/15 and 2015/16

Legend: 2014/15 | 2015/16

Sources: Orange County Department of Education and California Department of Education (caaspp.cde.ca.gov/sb2016/)

Data Notes

This is the second year that students have taken the California Assessment of Student Performance and Progress (CAASPP) with published results. This assessment, designed to demonstrate progress toward mastery of the knowledge and skills needed for likely success in future coursework, is not comparable to assessments prior to 2014/15.

[1]Grades tested include 3rd, 4th, 5th, 6th, 7th, 8th, and 11th grades.

ACADEMIC PERFORMANCE: MATHEMATICS

In 2015/16, over half (55%) of Orange County 3rd grade students met or exceeded the statewide grade-level standard for mathematics, up from 51% the previous year and higher than the state average of 46%. Academic performance also improved in the past year for 8th grade students (up three percentage points) and 11th grade students (up four percentage points). On average, Orange County 8th and 11th grade students outperformed California averages in 2015/16, which were 36% and 33%, respectively. Student performance in mathematics decreases as the grade level increases.

For all grade levels combined, 48% of Orange County students tested met or exceeded grade level standards for mathematics in 2015/16.[1] In comparison, 29% of economically disadvantaged students and 17% of English learners met or exceeded the performance standard for mathematics. Asian students had the greatest percentage of students at or above the standard at 81%, compared with 62% for White students and 27% for Latino students. Scores among all student subgroups improved from the previous year.

MATHEMATICS SCORES IMPROVE FOR ALL GRADES COMPARED

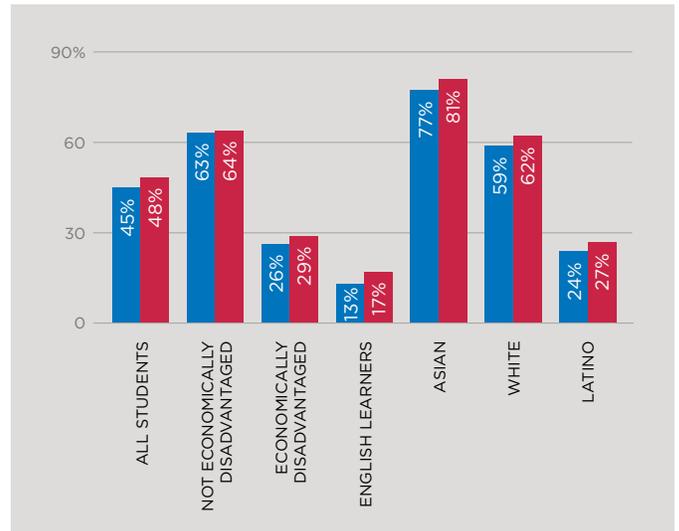Mathematics Student Performance in Orange County, 2014/15 and 2015/16
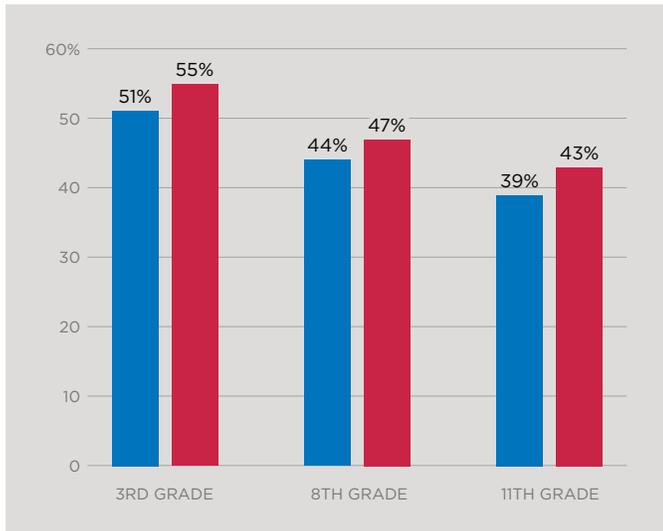
Sources: Orange County Department of Education and California Department of Education (caaspp.cde.ca.gov/sb2016/)

LESS THAN ONE-THIRD OF ECONOMICALLY DISADVANTAGED STUDENTS MEET OR EXCEED STANDARDS

Orange County Student Mathematics Performance by Economic Status, English Proficiency, and Race/Ethnicity, 2014/15 and 2015/16

Sources: Orange County Department of Education and California Department of Education (caaspp.cde.ca.gov/sb2016/)

Data Notes

This is the second year that students have taken the California Assessment of Student Performance and Progress (CAASPP) with published results. This assessment, designed to demonstrate progress toward mastery of the knowledge and skills needed for likely success in future coursework, is not comparable to assessments prior to 2014/15.

[1] Grades tested include 3rd, 4th, 5th, 6th, 7th, 8th, and 11th grades.
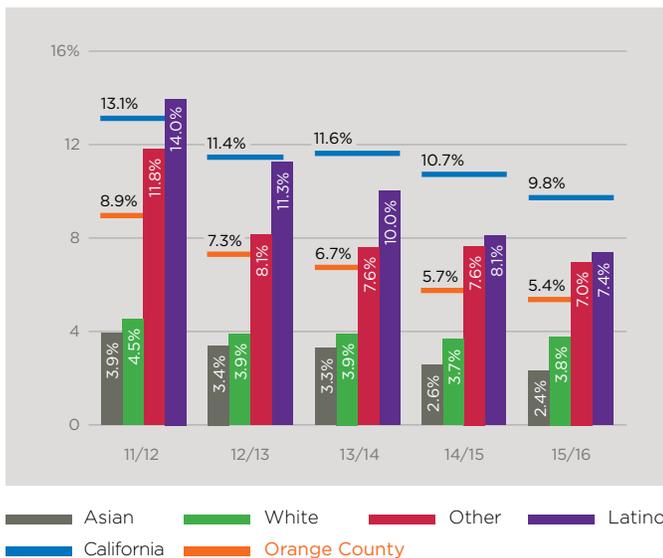
Education

HIGH SCHOOL DROPOUT RATE

In Orange County, 5.4% of students who entered 9th grade in 2012 dropped out of high school before graduating in 2016. This is lower than the statewide dropout rate of 9.8% and the lowest level since results of the new cohort tracking methodology became available in 2009/10.[1] This rate equates to 2,145 students of the class of 2015/16 dropping out.

In 2015/16, Latino students had the highest dropout rate at 7.4% and Asian students had the lowest rate at 2.4%, but all racial and ethnic groups have witnessed reductions in the percentage of dropouts since 2011/12. The dropout rate also varies by school district, with Los Alamitos Unified posting the lowest dropout rate at 0.8% and Anaheim Unified posting the highest at 6.4%. Compared to five years ago, 13 out of 15 districts had lower dropout rates in 2015/16.

A related measure is the graduation rate, which was 90.8% for the class of 2015/16. The graduation rate measures the percentage of students who receive a diploma in four years. The 9.2% of the class of 2015/16 that did not graduate in four years is made up the following: students who receive a special education certificate (0.9%) or certificate of high school equivalency or GED (0.0%), students who dropped out (5.4%), and students who are still enrolled (2.9%).
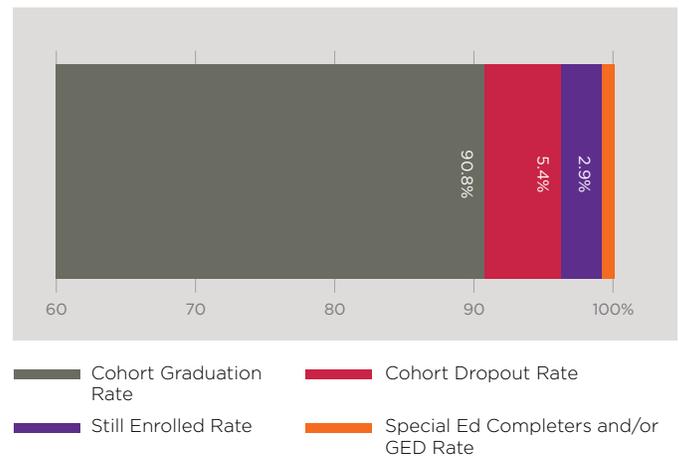
DROPOUT RATE CONTINUES TO FALL

Dropout Rate by Race/Ethnicity in Orange County, 2011/12-2015/16

Source: California Department of Education, DataQuest
(http://data1.cde.ca.gov/dataquest/)

MORE THAN 90% OF ORANGE COUNTY STUDENTS GRADUATE ON TIME
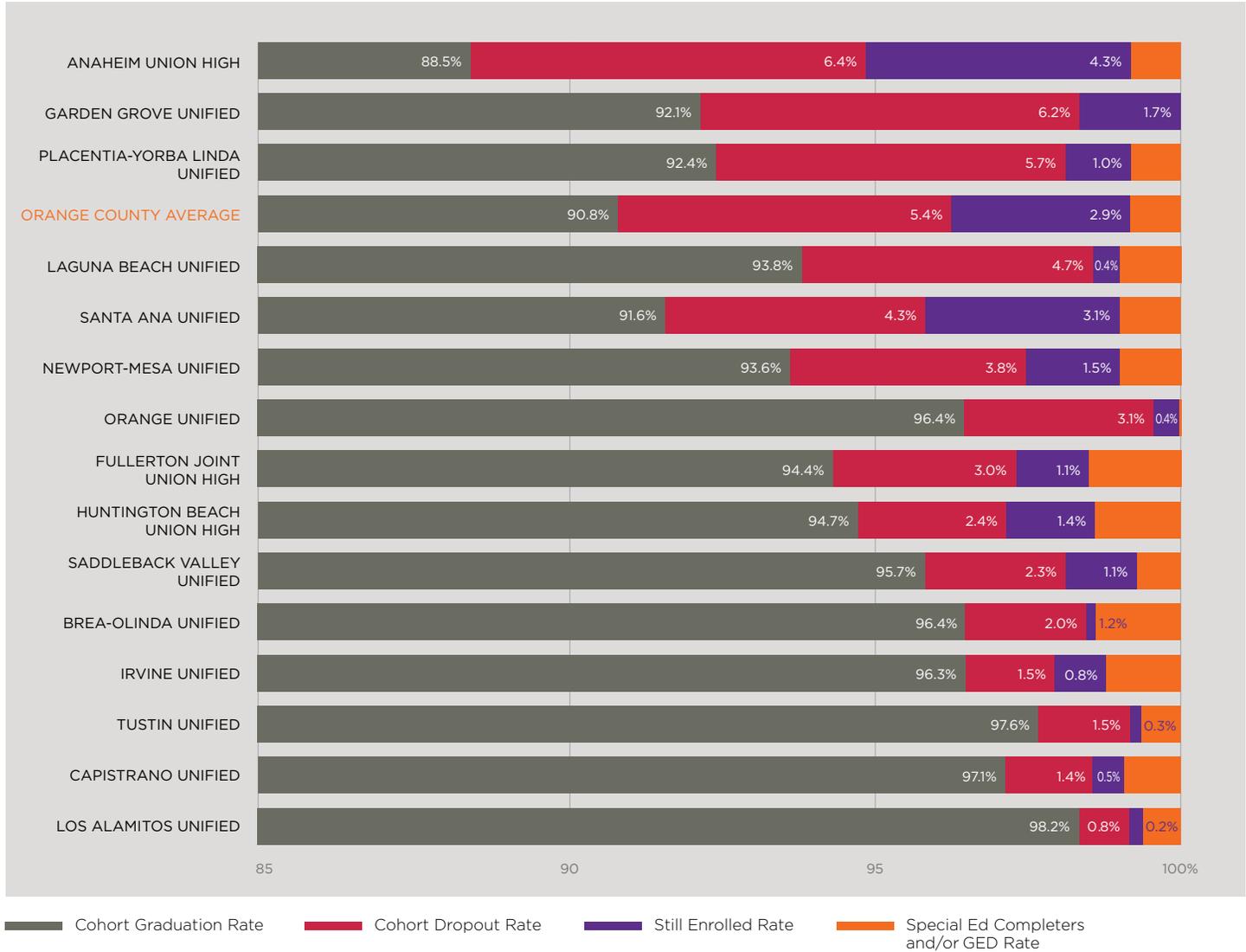
High School Student Outcomes in Orange County, 2014/15

Source: California Department of Education, DataQuest
(http://data1.cde.ca.gov/dataquest/)

[1]The California Longitudinal Pupil Achievement Data System (CALPADS), initiated in 2006, allows tracking a class of students through their four years of high school to determine what proportion of that class dropped out over that period. The class of 2009/10 is the first class for which the cohort dropout rate could be calculated.

DROPOUT RATES VARY BY DISTRICT, FROM 6.4% TO LESS THAN 1%

High School Student Outcomes by Orange County School District, 2015/16

District	Cohort Graduation Rate	Cohort Dropout Rate	Still Enrolled Rate	Special Ed Completers and/or GED Rate
ANAHEIM UNION HIGH	88.5%	6.4%	4.3%	
GARDEN GROVE UNIFIED	92.1%	6.2%	1.7%	
PLACENTIA-YORBA LINDA UNIFIED	92.4%	5.7%	1.0%	
ORANGE COUNTY AVERAGE	90.8%	5.4%	2.9%	
LAGUNA BEACH UNIFIED	93.8%	4.7%	0.4%	
SANTA ANA UNIFIED	91.6%	4.3%	3.1%	
NEWPORT-MESA UNIFIED	93.6%	3.8%	1.5%	
ORANGE UNIFIED	96.4%	3.1%	0.4%	
FULLERTON JOINT UNION HIGH	94.4%	3.0%	1.1%	
HUNTINGTON BEACH UNION HIGH	94.7%	2.4%	1.4%	
SADDLEBACK VALLEY UNIFIED	95.7%	2.3%	1.1%	
BREA-OLINDA UNIFIED	96.4%	2.0%	1.2%	
IRVINE UNIFIED	96.3%	1.5%	0.8%	
TUSTIN UNIFIED	97.6%	1.5%	0.3%	
CAPISTRANO UNIFIED	97.1%	1.4%	0.5%	
LOS ALAMITOS UNIFIED	98.2%	0.8%	0.2%	

Legend: Cohort Graduation Rate, Cohort Dropout Rate, Still Enrolled Rate, Special Ed Completers and/or GED Rate

Source: California Department of Education, DataQuest (http://data1.cde.ca.gov/dataquest/)

Data Notes

"Asian" includes Asian and Filipino. "Other" includes Native American/Alaskan Native, African American, two or more races, or not reported. Dropout data for Pacific Islander students were suppressed to protect student privacy due to fewer than 10 students dropping out.

COLLEGE READINESS

In 2015/16, over half (51%) of Orange County students completed the necessary coursework to be eligible for admission to University of California (UC) or California State University (CSU) campuses. This rate of 51% is 10 percentage points higher than the previous 15-year average of 41% and surpasses the statewide rate of 45%.

The long-term trend for most races and ethnicities is gradual improvement. However, the gap between the racial or ethnic groups with the highest and lowest eligibility rates (Asian and Latino students, respectively) remains substantial and persistent, showing little lasting improvement. Asian students are the most likely to be UC/CSU eligible (75%), but comprise only 18% of all high school graduates. Latino students are the least likely to be UC/CSU eligible (34%), but comprise 44% of all high school graduates.

UC/CSU ELIGIBILITY CONTINUES TO GROW

Percentage of High School Graduates that are UC/CSU Eligible in Orange County, 2006/07-2015/16
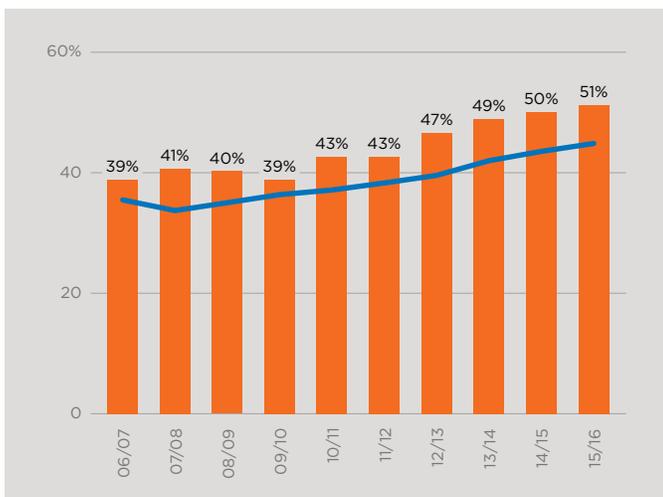
Source: California Department of Education, DataQuest (http://data1.cde.ca.gov/dataquest/)

ALL THREE LARGEST RACE/ETHNIC GROUPS IMPROVE, BUT GAP PERSISTS

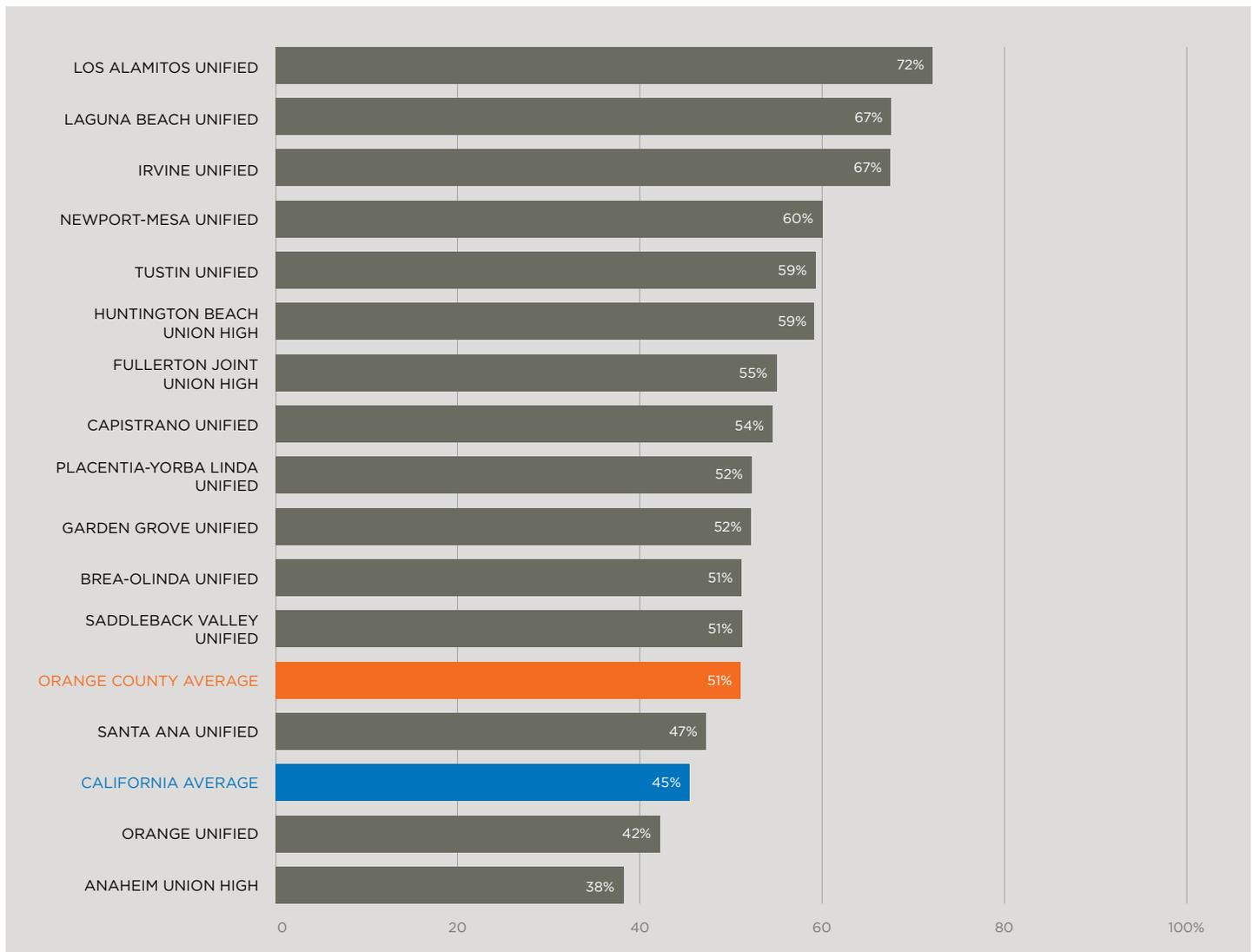Percentage of High School Graduates Eligible for UC/CSU by Race/Ethnicity in Orange County, 2006/07 – 2015/16
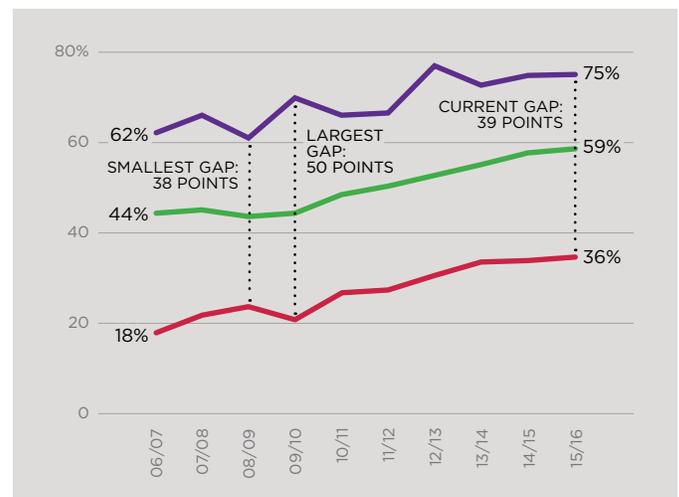
Source: California Department of Education, DataQuest (http://data1.cde.ca.gov/dataquest/)

There are also wide geographic disparities in UC/CSU eligibility, ranging from a high of 72% of students eligible at Los Alamitos Unified to a low of 38% at Anaheim Union High.

ELIGIBILITY BY DISTRICT RANGES FROM 72% TO 38%

Percentage of Graduates that are UC/CSU Eligible, by District in Orange County, 2015/16

District	Percentage
LOS ALAMITOS UNIFIED	72%
LAGUNA BEACH UNIFIED	67%
IRVINE UNIFIED	67%
NEWPORT-MESA UNIFIED	60%
TUSTIN UNIFIED	59%
HUNTINGTON BEACH UNION HIGH	59%
FULLERTON JOINT UNION HIGH	55%
CAPISTRANO UNIFIED	54%
PLACENTIA-YORBA LINDA UNIFIED	52%
GARDEN GROVE UNIFIED	52%
BREA-OLINDA UNIFIED	51%
SADDLEBACK VALLEY UNIFIED	51%
ORANGE COUNTY AVERAGE	51%
SANTA ANA UNIFIED	47%
CALIFORNIA AVERAGE	45%
ORANGE UNIFIED	42%
ANAHEIM UNION HIGH	38%

Source: California Department of Education, DataQuest (http://data1.cde.ca.gov/dataquest/)

Data Notes

Data are for public high school graduates who have fulfilled minimum course requirements to be eligible for admission to University of California (UC) or California State University (CSU) campuses. For more information about UC/CSU eligibility, visit: www.ucop.edu/agguide/. "Asian" includes Asian, Pacific Islander, and Filipino. "Other" includes African American, Native American/Alaskan Native, two or more races, or not reported.

HIGH SCHOOL STEM PARTICIPATION

Career Technical Education (CTE) course-taking in STEM subjects (Science, Technology, Engineering and Mathematics) at the high school level grew substantially in 2014/15, up by a total of 40% between 2012/13 and 2014/15. Courses related to information technology grew 151% and engineering course enrollment grew 16%. Health sciences-related course enrollment did not change and energy-related course enrollment fell 47%.

Advanced Placement (AP) course-taking in STEM subjects has grown over the past three years in Orange County high schools. Between 2012/13 and 2014/15, enrollment in computer science AP courses grew 42%, AP science enrollment grew 27%, and AP math enrollment grew 6%.

CTE COURSE ENROLLMENT GROWS 40% IN THREE YEARS

Enrollment in Career-Technical Education (CTE) in Orange County High Schools, 2013-2015

AP STEM COURSE-TAKING GROWS IN ORANGE COUNTY HIGH SCHOOLS

Enrollment in Advanced Placement (AP) STEM Courses in Orange County High Schools, 2013-2015

Legend:
- Information and Communication Technologies
- Health Science and Medical Technology
- Engineering and Architecture
- Energy and Utilities

Source: California Department of Education, DataQuest

Legend:
- Computer Science
- Mathematics
- Science
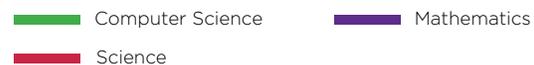
Source: California Department of Education, DataQuest

Most Orange County high school students have access to STEM-related AP courses, but this access is not universal, nor standardized across schools. The first year of AP Calculus ("AB" level) is the most widely taught STEM-related AP class, available at all high schools in three-quarters of Orange County school districts with high school students. A broad range of AP courses provides students with options to continue in a STEM subject that is a good fit for their college and career pursuits.

ADVANCED PLACEMENT (AP) CALCULUS AND BIOLOGY WIDELY TAUGHT

Proportion of Orange County High Schools with Enrollment in AP STEM Courses Within Each School District, 2014/15

District	Number of High Schools in District	MATH			SCIENCE					TECH	
		AP CALCULUS AB	AP CALCULUS BC	AP STATISTICS	AP BIOLOGY	AP CHEMISTRY	AP PHYSICS B	AP PHYSICS C	AP ENVIRONMENTAL SCIENCE	AP COMPUTER SCIENCE A	AP COMPUTER SCIENCE AB
ANAHEIM UNION HIGH	9	All	None	Some	Some	Some	Some	Some	Some	None	None
BREA-OLINDA UNIFIED	1	All	All	All	All	All	All	All	All	All	None
CAPISTRANO UNIFIED	7	All	All	All	All	Some	Some	All	All	Some	None
FULLERTON JOINT UNION HIGH	6	Some	All	All	All	All	All	All	All	All	None
GARDEN GROVE UNIFIED	7	All	Some	All	All	Some	Some	Some	Some	Some	None
HUNTINGTON BEACH UNION HIGH	6	All	Some	All	All	All	All	All	All	Some	None
IRVINE UNIFIED	4	Some	Some	All	All	All	All	None	Some	Some	Some
LAGUNA BEACH UNIFIED	1	All	All	None	All	None	All	None	None	None	None
LOS ALAMITOS UNIFIED	1	All	All	All	All	All	All	All	All	All	None
NEWPORT-MESA UNIFIED	5	Some	Some	None	Some	All	Some	Some	Some	Some	None
ORANGE UNIFIED	4	All	Some	Some	All	All	Some	None	Some	None	None
PLACENTIA-YORBA LINDA UNIFIED	4	All	Some	All	All	All	All	None	Some	Some	None
SADDLEBACK VALLEY UNIFIED	4	All	All	Some	All	Some	Some	Some	Some	None	None
SANTA ANA UNIFIED	8	Some	Some	Some	Some	Some	Some	None	Some	None	None
TUSTIN UNIFIED	3	All	All	All	All	Some	All	None	All	None	None

Legend: ■ All (green)   ■ Some (yellow)   ■ None (red)

Source: California Department of Education, Staff Assignment and Course Data (www.cde.ca.gov/ds/sd/df/filesassign.asp)

# Education

STEM-RELATED DEGREES

Driven by robust one-year growth in information and computer science degrees (+29%) and engineering degrees (+16%), the overall number of science, technology, engineering and mathematics (STEM) undergraduate and graduate degrees conferred by large Orange County universities grew 6% between 2014/15 and 2015/16. Over the past five years, STEM-related degrees granted in all areas have grown, with the exception of biological sciences. The proportion of all degrees that are STEM-related increased from 23% of all degrees granted in 2011/12 to 29% in 2015/16.

STRONG GROWTH IN INFO TECH AND ENGINEERING DRIVES INCREASE IN STEM-RELATED DEGREES

STEM-Related Undergraduate Degrees Conferred at Orange County Universities, 2012-2016
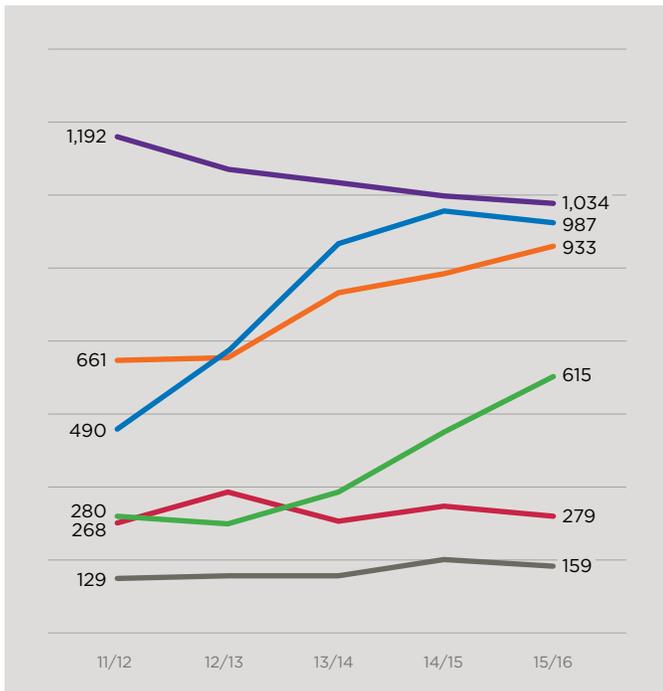
STEM-Related Graduate Degrees Conferred at Orange County Universities, 2012-2016
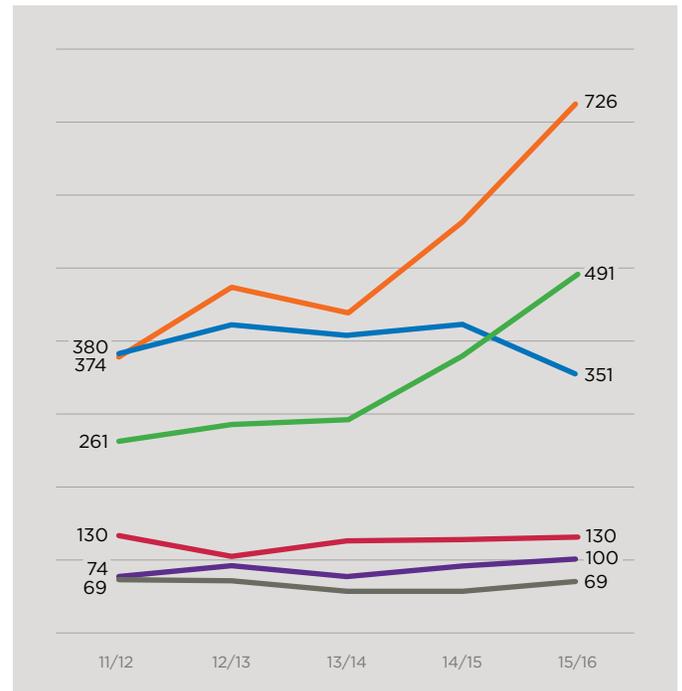
Legend: Biological Sciences · Engineering · Health Professions · Physical Sciences · Information and Computer Sciences · Mathematics

Sources: California State University, Fullerton; Chapman University; and University of California, Irvine

STEADY GROWTH IN STEM-RELATED DEGREES

College Degrees Granted and Proportion that are STEM-Related in
Orange County, 2012-2016
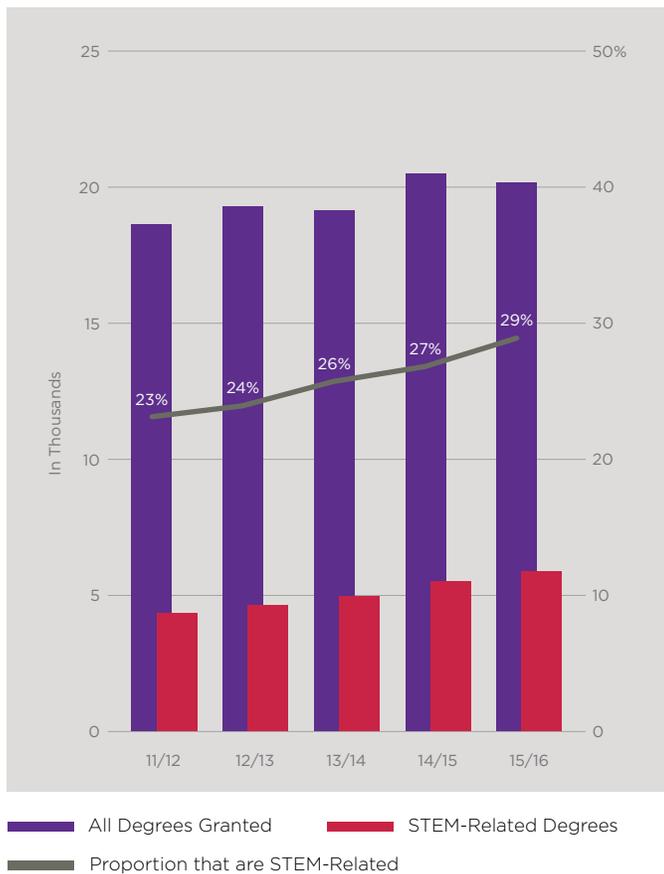
Sources: California State University, Fullerton; Chapman University; and University
of California, Irvine

Health

HEALTH CARE ACCESS

The proportion of uninsured Orange County residents dropped again between 2014 and 2015, from 12% to 9% as implementation of the Affordable Care Act continued. This drop is on top of a five percentage point drop between 2013 and 2014, from 17% uninsured to 12%. Orange County's level of uninsured as of 2015 is on par with the state and nation (all approximately 9%).

Largely driven by the adoption of the federal Affordable Care Act (ACA) and the state Medi-Cal for All Children law, Medi-Cal enrollment in Orange County increased 86% between 2013 (before the ACA) and 2016. The largest increase in enrollment over this period was among residents 19 to 40 years old, growing 301%. This was followed by 264% growth among residents ages 41 to 64. Enrollment among children age six to 18 grew 40% and enrollment among seniors rose 29%. Enrollment among children under six grew 9% between 2013 and 2016. Overall, in 2016, Orange County enrollment in Medi-Cal stood at 773,854 members.

RATE OF UNINSURED FALLS TO 9% IN 2015

Uninsured (All Ages) in Orange County, California and United States, 2011-2015

Source: U.S. Census Bureau, American Community Survey, 1-Year Estimates (http://factfinder2.census.gov)

MEDI-CAL ENROLLMENT CONTINUES TO RISE

Medi-Cal Membership in Orange County, 2010-2016
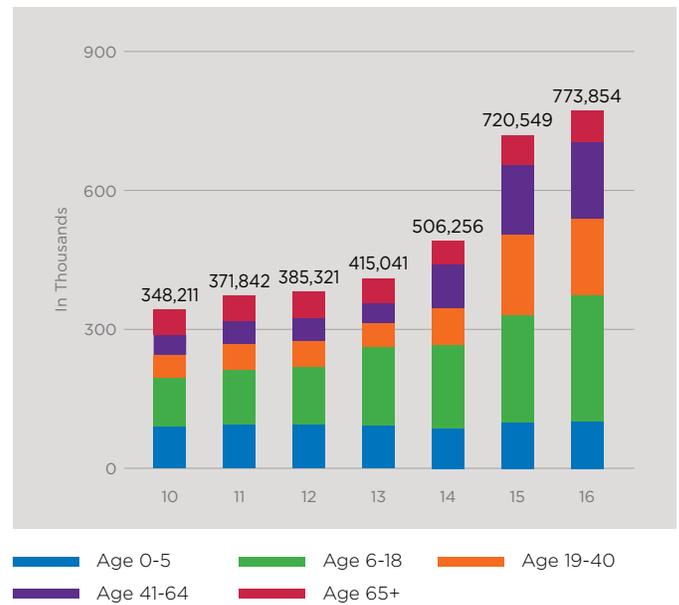
Source: CalOptima

The drop in uninsured in 2015 was absorbed largely by public insurance, including Medicare, military or VA insurance programs, or Medicaid. Between 2014 and 2015, the number of Orange County residents with public insurance grew 13%, followed by 3% growth in the number of people with both public and private insurance, and no change in the number covered wholly by private insurance. Meanwhile, the proportion of uninsured residents fell by 24% between 2014 and 2015.

In 2015, 58% of Orange County residents had private insurance, with approximately 48% obtaining it through an employer and 10% through direct purchase. Over a quarter (29%) of residents had some sort of public insurance, with 10% enrolled in Medicare, military or VA insurance programs either alone or in combination with a private source, and 19% enrolled in means-tested insurance programs like Medicaid or other public insurance programs. Orange County residents' coverage by type is similar to national averages.

RECENT DROP IN UNINSURED LARGELY ABSORBED BY PUBLIC COVERAGE

Health Insurance Coverage by Type in Orange County, 2009-2015
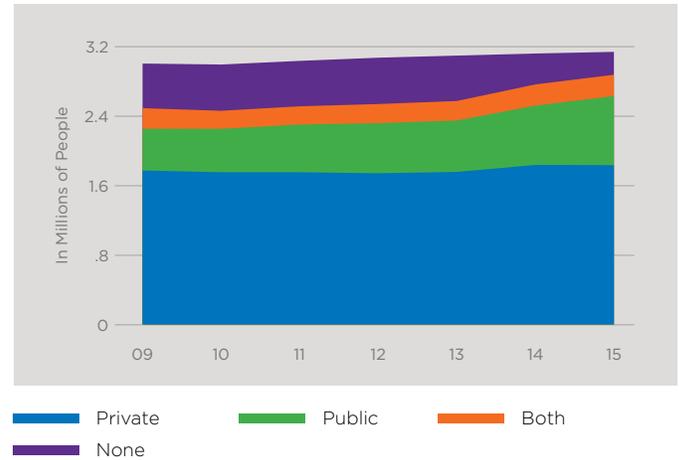
Source: U.S. Census Bureau, American Community Survey

Health

HEALTH CARE ACCESS – CONTINUED

When viewing insurance coverage by race and ethnicity, income level, educational status, and age, all groups experienced reductions in the uninsured between 2014 and 2015. However, 27% of residents who did not complete high school still did not have insurance in 2015 and 17% of Latino residents were uninsured. Adults ages 18 to 64 comprised the age group with the greatest proportion of uninsured (13%) and low-middle income individuals (earning $25,000-$49,000) were the income bracket most likely to be uninsured (15%).

WIDE VARIATION IN COVERAGE PERSISTS, BUT ALL GROUPS IMPROVED AGAIN

Uninsured in Orange County by Race/Ethnicity, Income, Education and Age, 2014 and 2015

BY RACE/ETHNICITY	
WHITE	4%
ASIAN	6%
LATINO	17%

BY INCOME	
UNDER $25K	13%
$25K-$49K	15%
$50K-$74K	13%
$75K-$99K	10%
$100K AND OVER	5%

BY EDUCATION	
LESS THAN HS GRAD	27%
HS GRAD OR GED	13%
SOME COLLEGE OR ASSOCIATE'S	8%
BACHELOR'S OR HIGHER	4%

BY AGE	
YOUNG CHILDREN (UNDER 6)	2%
CHILDREN AND YOUTH (6-17)	4%
YOUNG ADULTS (18-24)	13%
ADULTS (25-64)	13%
OLDER ADULTS (65+)	1%

☐ 2014   ▉ 2015

Source: U.S. Census Bureau, American Community Survey, 1-Year Estimates (http://factfinder2.census.gov)
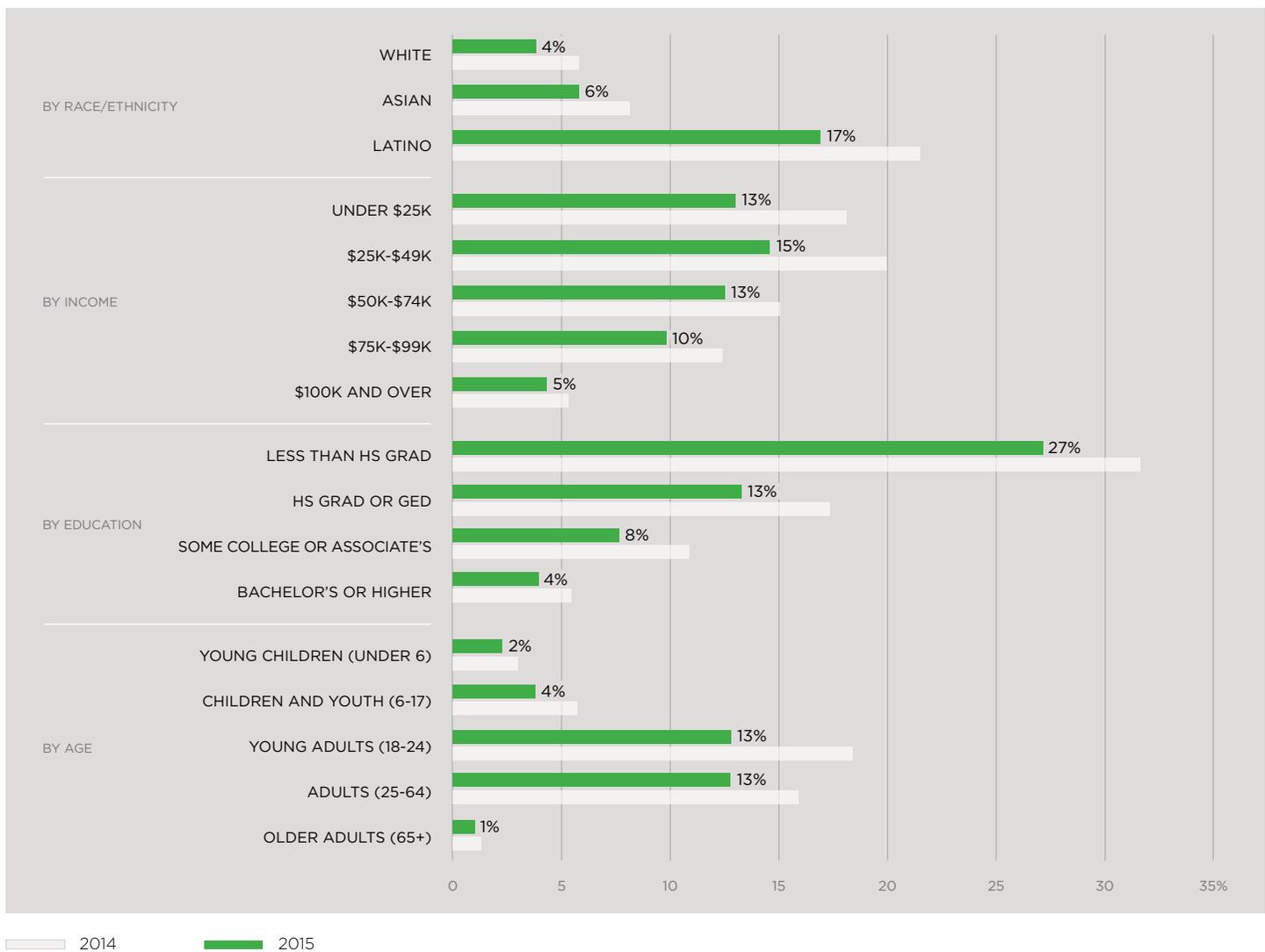
HEALTH CARE UTILIZATION

Fewer Orange County residents delayed needed medical care in 2015, perhaps in part due to increasing rates of health insurance coverage. However, more residents reported they do not have a "medical home," or a usual source of care.

FEWER RESIDENTS DELAY GETTING NEEDED HEALTH CARE

Percentage of Orange County Population Delaying Medical Care or Without a Usual Source of Care, 2011-2015
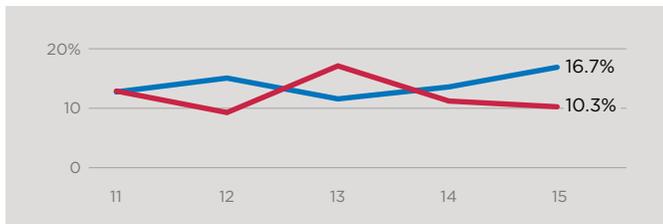
Source: California Health Interview Survey (http://ask.chis.ucla.edu/main/default.asp)

Community clinic use has grown substantially over the past 10 years (+114%). While seniors make up the smallest number of clinic users, their usage has grown the fastest (+323%). Clinic usage among children has also increased notably, growing 123% between 2006 and 2015 for children ages five to 12. All age groups had double- or triple-digit increases in clinic utilization, including adults aged 20 to 34 (+93%) and 35 to 64 (+155%). This growth in clinic usage is in part due to the increase in the number of Orange County clinics serving residents, from 41 in 2006 to 57 in 2015.

CLINIC USE CONTINUES TO GROW, ESPECIALLY AMONG CHILDREN AND SENIORS

Orange County Community or Free Clinic Utilization by Age, 2006-2015
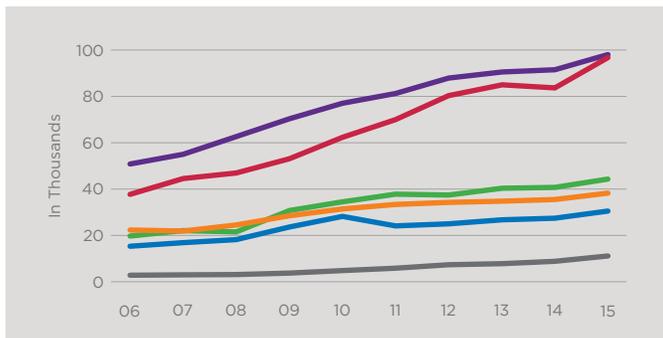
Source: Primary Care and Specialty Clinics Annual Utilization Data, Office of Statewide Health Planning and Development (OSHPD)

As community clinic visits grow, so do scheduled non-emergency visits to emergency departments. Meanwhile, between 2014 and 2015, the number of visits to emergency departments for minor and low/moderate injuries or conditions fell, suggesting residents may be using clinics instead of emergency departments for non-serious injuries or conditions. Overall, the number of visits to emergency departments grew between 2011 and 2015.

FEWER MINOR AND LOW/MODERATE EMERGENCY DEPARTMENT VISITS

Emergency Department Visits in Orange County Hospitals by Type (Not Resulting in Admission) and Scheduled Non-Emergency Visits Seen in an Orange County Emergency Department, 2011-2015

Source: Annual Utilization Report of Hospitals Database, Office of Statewide Health Planning and Development (www.oshpd.ca.gov/HID/Hospital-Utilization.html#Complete)
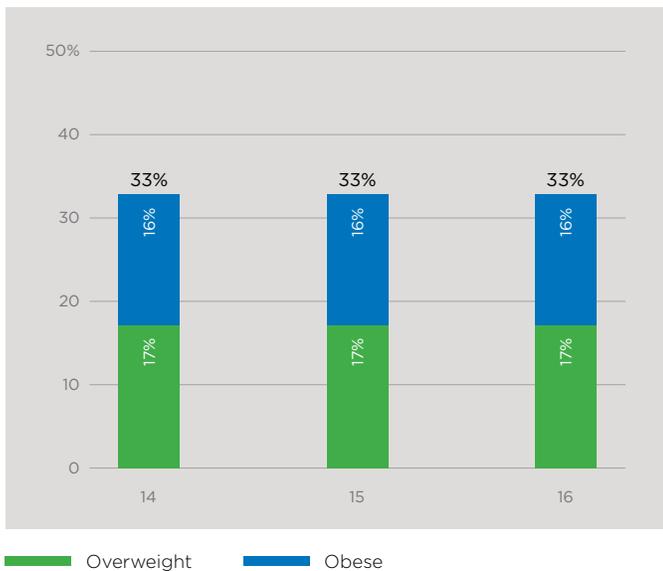
Health

OVERWEIGHT AND OBESITY

Weight status for youth has not changed over the past three years. In 2016, an average of 33% of Orange County students in 5th, 7th and 9th grades were overweight or obese compared to 38% statewide, which is also unchanged over the past three years. Of the 33% of Orange County students with an unhealthy body composition in 2016, 16% were considered to be obese, while 17% were considered overweight. Santa Ana and Anaheim school districts had the highest proportion of overweight youth in 2016, while Laguna Beach and Irvine school districts had the lowest proportion.

33% OF STUDENTS TESTED ARE OVERWEIGHT OR OBESE

Percent of Students with Unhealthy Body Composition in Orange County, 2014-2016

Source: California Department of Education Physical Fitness Test (http://data1.cde.ca.gov/dataquest/)

MORE OVERWEIGHT STUDENTS IN CENTRAL ORANGE COUNTY

Percent of Students with Unhealthy Body Composition by School District in Orange County, 2016
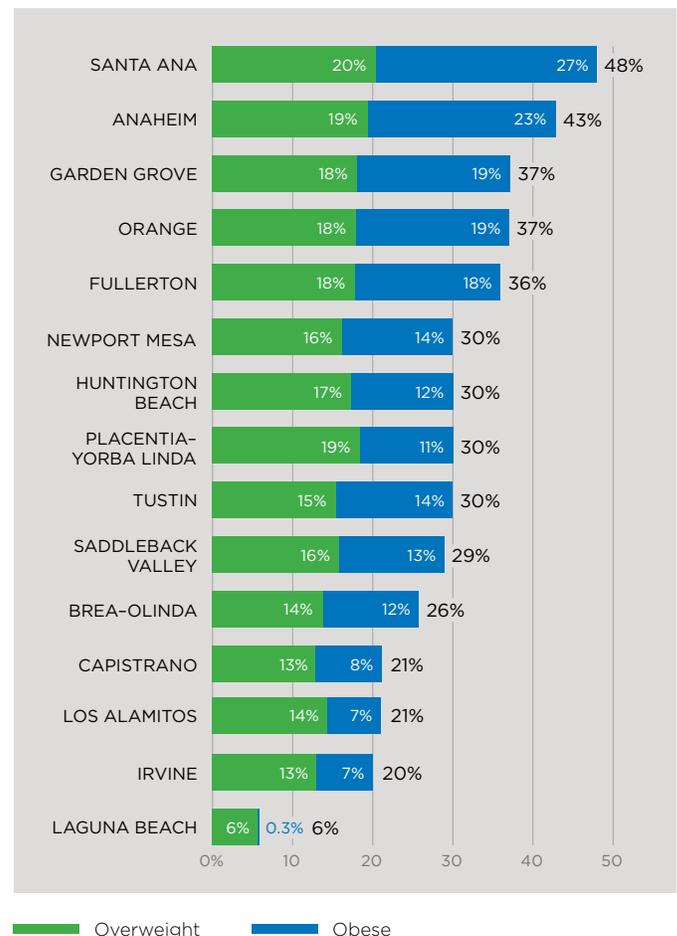
Source: California Department of Education Physical Fitness Test (http://data1.cde.ca.gov/dataquest/)

Weight status data for adults in 2015 show an improvement in the proportion of residents with a healthy weight, from 37% in 2014 to 44% in 2015. Statewide, the proportion of residents with a healthy weight in 2015 was 35%, which was the same as the nationwide proportion. The 12 percentage point drop in overweight residents between 2014 and 2015 was partially absorbed by the six percentage point increase in obese residents.

IMPROVEMENT IN HEALTHY WEIGHT IN 2015

Weight Status of Adults in Orange County, 2007-2015
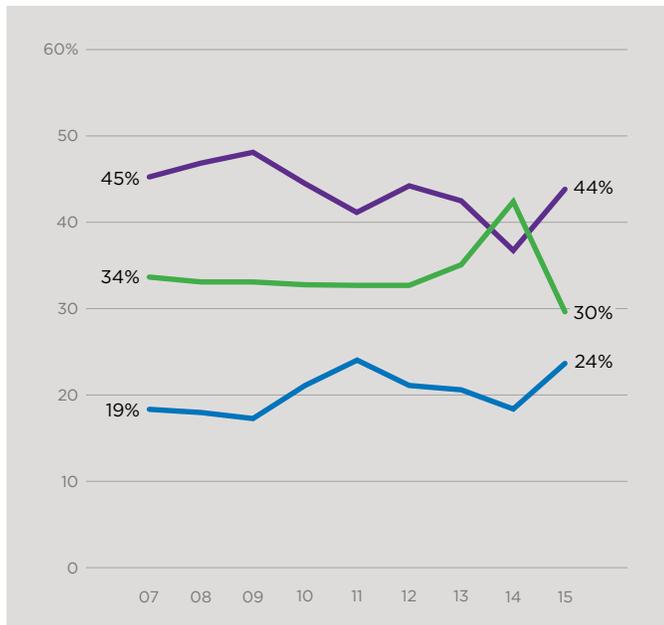
Source: California Health Interview Survey

MORE ORANGE COUNTY RESIDENTS HAVE A HEALTHY WEIGHT THAN THE STATE AND NATION

Weight Status of Adults in Orange County, California, and United States, 2015
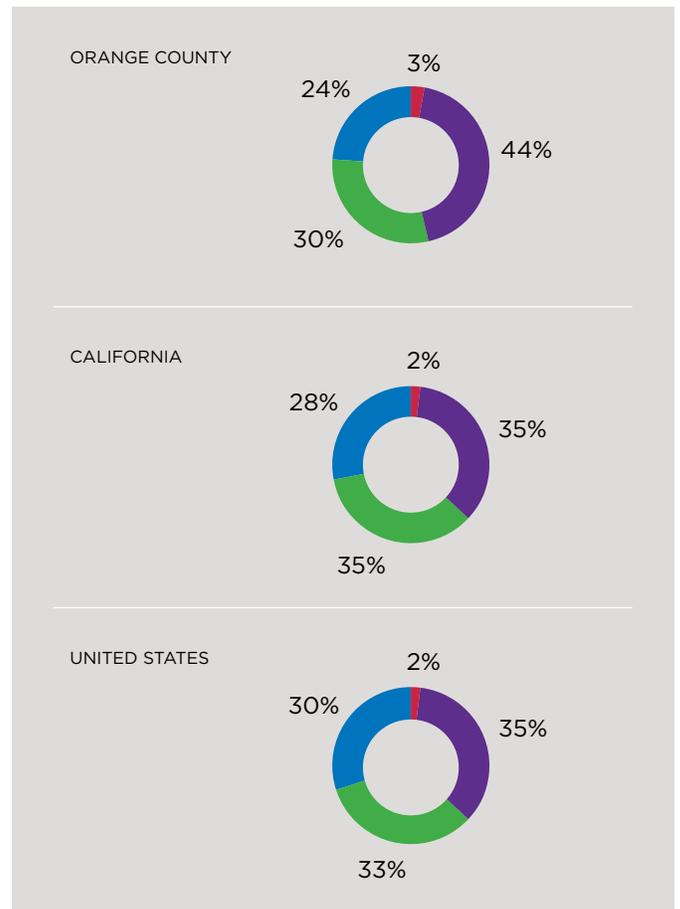
Sources: California Health Interview Survey; National Health Interview Survey

Data Notes

In 2014, the California Department of Education modified the body composition standards to be more aligned with the Center for Disease Control percentiles to identify lean, normal, overweight, and obese students. The category "Needs Improvement" approximates overweight, while the category "Needs Improvement – Health Risk" approximates obesity. Anaheim, Fullerton and Huntington Beach represent combined data of the high school districts and their feeder elementary school districts. Charter schools and Orange County Department of Education alternative programs are not included. National data are sourced to the National Health Interview Survey. State and county data are sourced to the California Health Interview Survey.

Health

CHRONIC DISEASE

According to the Orange County Health Care Agency, chronic diseases contribute to approximately 60% of deaths in Orange County each year. Nationwide, the Centers for Disease Control and Prevention reports that chronic diseases account for about 86% of health-related costs. Four modifiable health risk behaviors – including a sedentary lifestyle, poor nutrition, tobacco use, and excessive alcohol consumption – are responsible for much of the illness, suffering, and early death related to chronic diseases. In Orange County, deaths due to reported chronic diseases are declining, but the percentage of people diagnosed and living with chronic diseases is rising over the long-term.

CHRONIC DISEASE PREVALENCE GROWS, WHILE DEATH RATES FALL ▬▬ Prevalence •••••• Death Rate

Diabetes Prevalence and Death Rate in Orange County, 2005-2015

Sources: California Health Interview Survey (http://ask.chis.ucla.edu/main/); California Department of Public Health, County Health Status Profiles (www.cdph.ca.gov/programs/ohir/Pages/CHSP.aspx)

DIABETES

In 2015, 7.8% of Orange County adults had been diagnosed with diabetes in their lifetimes, compared to 5.8% of adults in 2005. While more residents are living with diabetes, fewer are dying of the disease than 10 years ago; there has been a 18% decline in the diabetes death rate between 2005 and 2014.

Heart Disease Prevalence and Death Rate in Orange County, 2005-2015
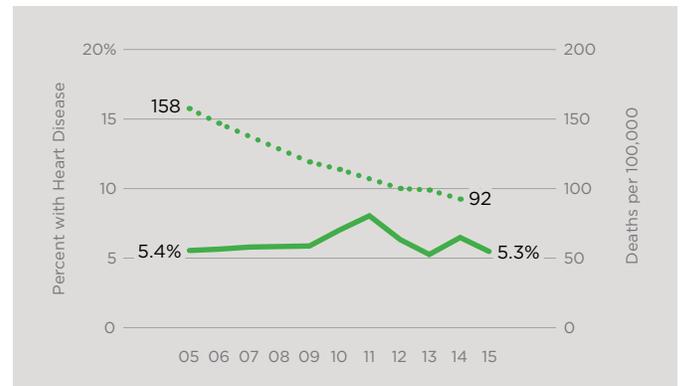
Sources: California Health Interview Survey (http://ask.chis.ucla.edu/main/); California Department of Public Health, County Health Status Profiles (www.cdph.ca.gov/programs/ohir/Pages/CHSP.aspx)

HEART DISEASE

The percentage of Orange County adults with heart disease was 5.3% in 2015, which is nearly the same rate as in 2005 (5.4%). Meanwhile, medical advances have led to a 42% decline in the death rate for heart disease in the 10-year period between 2005 and 2014.

CHRONIC DISEASE PREVALENCE IN CHILDREN

Epidemiologic studies suggest that as many as one out of four children in the U.S., or 15 to 18 million children age 17 years and younger, suffer from a chronic health problem. In the U.S. alone, nine million children suffer from asthma and approximately 13,000 children are diagnosed with Type 1 diabetes annually. As many as 200,000 children nationwide live with either Type 1 or Type 2 diabetes. Type 2 diabetes is still extremely rare in children and adolescents (0.22 cases per 1,000 youth) but these rates are increasing rapidly with rising obesity rates.

Source: Compas, B. E., et. al. (2012). Coping with Chronic Illness in Childhood and Adolescence. Annual Review of Clinical Psychology (retrieved April 24, 2015 from http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3319320/)
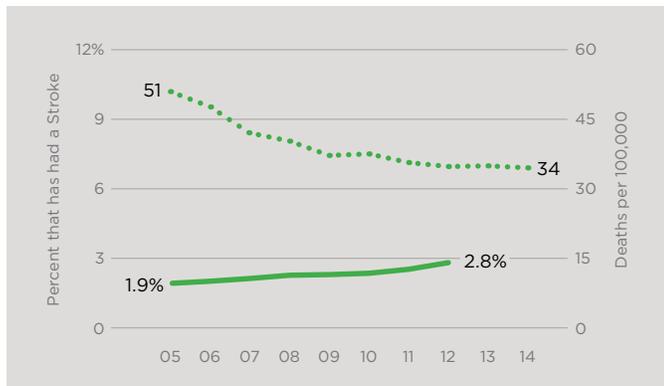
Stroke Prevalence and Death Rate in Orange County, 2005-2014

Sources: California Health Interview Survey (http://ask.chis.ucla.edu/main/); California Department of Public Health, County Health Status Profiles (www.cdph.ca.gov/programs/ohir/Pages/CHSP.aspx)

Asthma and Chronic Lower Respiratory Disease Prevalence and Death Rate in Orange County, 2005-2015

Sources: California Health Interview Survey (http://ask.chis.ucla.edu/main/); California Department of Public Health, County Health Status Profiles (www.cdph.ca.gov/programs/ohir/Pages/CHSP.aspx)

STROKE

The percentage of Orange County adults who have experienced a stroke rose from 1.9% in 2005 to 2.8% in 2012; however, fewer are dying from a stroke. Between 2005 and 2014, the death rate for stroke fell 33%.

ASTHMA/CHRONIC LOWER RESPIRATORY DISEASE

Asthma prevalence rose sharply again in 2015, growing from 5.3% in 2013, to 8.0% in 2014 and 10.7% in 2015. Conversely, deaths due to chronic lower respiratory disease (which includes asthma) fell in 2014, continuing a long-term downward trend, falling 18% between 2005 and 2014.

Data Notes

Prevalence and death data is not available for all years for all diseases or causes of death. Death data reflect three-year averages and are age-adjusted. For example, "2014" is an average of 2012, 2013 and 2014 data. Counties with varying age compositions can have widely disparate death rates since the risk of dying is largely a function of age. Age-adjusted rates control for this variability.
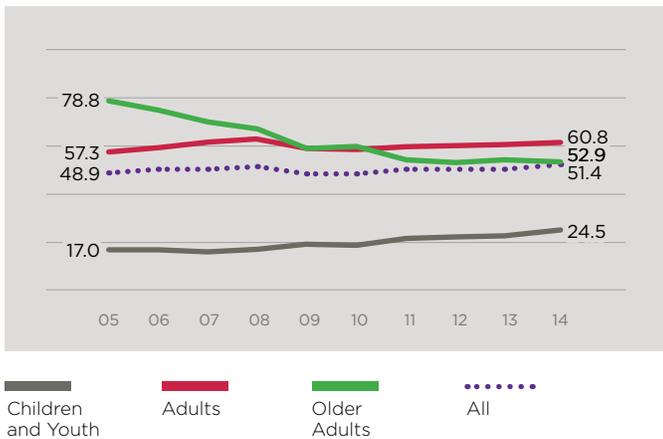
MENTAL HEALTH AND SUBSTANCE ABUSE

In 2014, there were 51.4 mental health and substance abuse-related hospitalizations per 10,000 residents in Orange County. This rate of behavioral health hospitalizations is less than the statewide rate of 61.1 per 10,000 California residents. Over the past decade, the behavioral health hospitalization rate remained relatively steady, but two groups in particular witnessed substantial – and opposite – shifts. The hospitalization rate among older adults (age 65 and older) declined 33% since 2005. Conversely, the hospitalization rate among children and youth (0-17) increased 44% since 2005. Collectively, behavioral health admissions made up 6% of all Orange County hospitalizations in 2014, the same rate as in 2013.

Among children and youth, the most common diagnosis leading to hospitalization was major depression, which has risen 117% since 2005. Major depression was also among the most frequent reasons for a behavioral health admission among older adults, as well as the category "other," which includes cognitive disorders such as dementia. Among non-senior adults, substance-related hospitalizations were most common and have increased 18% since 2005.

DEPRESSION IS MOST FREQUENT REASON FOR HOSPITALIZATION

Mental Health or Substance Abuse Hospitalizations per 10,000 by Age and Disorder in Orange County, 2014
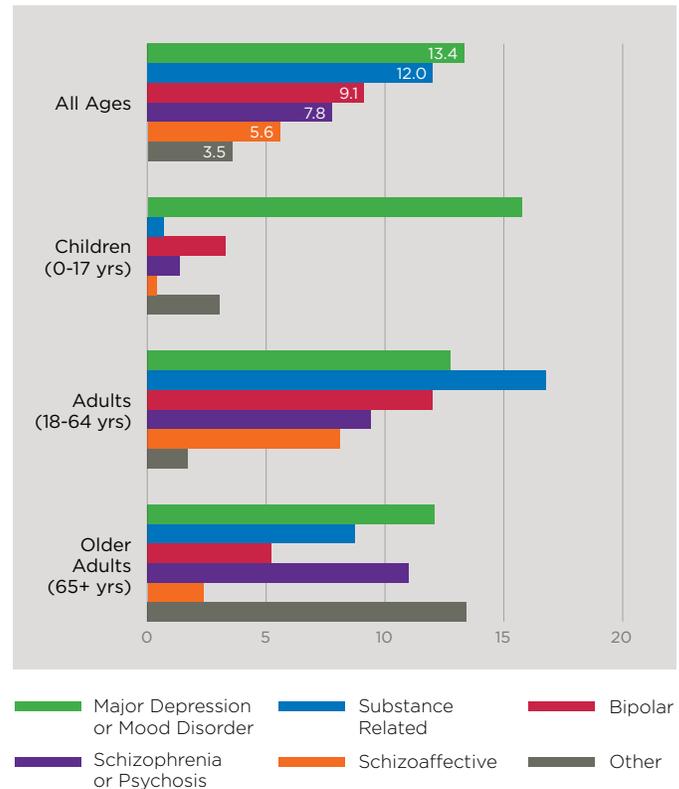
YOUTH HOSPITALIZATIONS RISE; OLDER ADULT HOSPITALIZATIONS FALL

Mental Health and Substance Abuse Hospitalizations per 10,000 by Age in Orange County, 2005-2014

Sources: Office of Statewide Planning & Development Patient Discharge Data prepared by Orange County Health Care Agency, Research and Planning; California Department of Finance; U.S. Census Bureau, American Community Survey

Sources: Office of Statewide Planning & Development Patient Discharge Data prepared by Orange County Health Care Agency, Research and Planning; U.S. Census Bureau, American Community Survey

Between 2005 and 2014, substance abuse-related deaths increased. The drug-induced death rate grew by 33%, while deaths due to chronic liver disease and cirrhosis rose 11%. During the same period, suicide deaths in Orange County rose 21%.

MENTAL HEALTH- AND SUBSTANCE ABUSE-RELATED DEATH RATES CONTINUE TO RISE

Substance Abuse and Mental Health-Related Deaths per 100,000 in Orange County, 2005-2014

Legend:
- **Chronic Liver Disease and Cirrhosis** (red)
- **Suicide** (green)
- **Drug-Induced** (blue)

Source: California Department of Public Health, County Health Status Profiles (www.cdph.ca.gov/programs/ohir/Pages/CHSP.aspx)

WELLBEING OF OLDER ADULTS

In 2015, an estimated 9.4% of Orange County seniors were living in poverty. Compared to 10 years ago, when 6.3% of seniors were in poverty, or just under 20,000 seniors, the 2015 rate doubles the number of seniors in poverty to nearly 40,000. A senior is considered in poverty if their annual income falls under $11,367 (living alone) or $14,342 (two people).

NEARLY 1 IN 10 SENIORS LIVE ON LESS THAN $15,000 PER YEAR

Percentage of Residents Age 65 and Over in Poverty in Orange County, California and United States, 2006-2015

9.1%
8.4%

6.3%

9.9%
9.4%
9.0%

06 07 08 09 10 11 12 13 14 15

— California   — United States   — Orange County
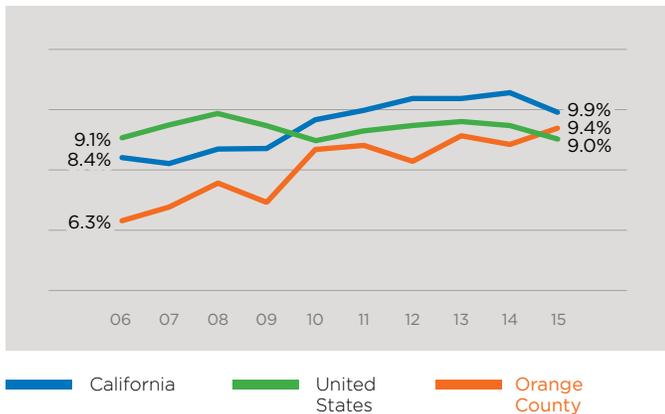
Source: U.S. Census Bureau, American Community Survey, 1-Year Estimates

19% OF CALIFORNIA SENIORS IN POVERTY

California Seniors in Poverty (19.1%) when Local Housing, Cost of Living, Social Safety Net Benefits, Medical Costs and Other Needs are Factored In

ONE IN FIVE
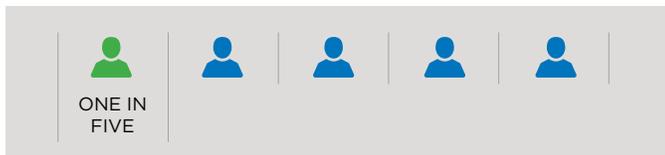
Source: 2013 California Poverty Measure, Public Policy Institute of California and Stanford Center on Poverty

In 2014, 44.1 per 10,000 Orange County older adults were hospitalized for a mental health condition, a slight decrease over the previous year and a substantial decrease since 2005 when there were 71.5 mental health-related hospitalizations per 10,000 older adults. Sharp declines in hospitalizations for major depression and schizophrenia are behind the 38% decrease in hospitalization rates. These declines are attributed to a reduction in depressive symptoms among the oldest residents (age 80+), an increase in seniors with no symptoms, and an increase in prescription drug coverage by Medicare leading to more older adults taking anti-depressant medications.

MENTAL HEALTH HOSPITALIZATIONS AMONG SENIORS CONTINUES LONG-TERM DOWNWARD TREND

Orange County Older Adult Mental Health Hospitalizations per 10,000 by Disorder, Selected Years 2005-2014

26.3
23.6

14.1

7.5

13.4
13.4
12.1

5.2

05 07 08 09 10 11 12 13 14

— Bipolar   — Major Depression or Mood Disorder

— Schizophrenia, Psychosis or Schizoaffective   — Other (including dementia)
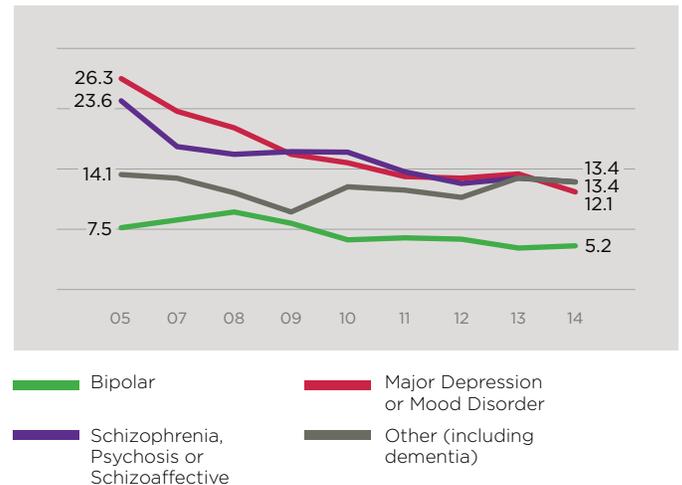
Sources: 2005, and 2007-2014 Office of Statewide Planning & Development Patient Discharge Data prepared by Orange County Health Care Agency, Research and Planning; U.S. Census Bureau, American Community Survey, 1-Year Estimates

There was a 5% dip between 2013 and 2014 for deaths due to Alzheimer's Disease; however, over the past 10 years, the death rate due to Alzheimer's Disease has risen faster in Orange County (+56%) than statewide (+36%). Direct costs nationally of Alzheimer's Disease and other dementias are estimated to be $259 billion in 2017 and projected to be as high as $1.1 trillion by 2050.

ALZHEIMER'S DISEASE DEATH RATE DIPS IN 2014

Age-Adjusted Deaths per 100,000 due to Alzheimer's Disease in Orange County and California, 2005-2014
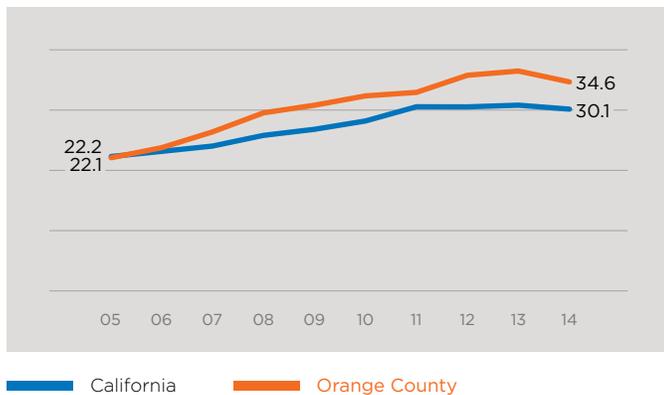
California   Orange County

Source: California Department of Public Health, County Health Status Profiles (/www.cdph.ca.gov/programs/ohir/Pages/CHSP.aspx)

Older adults' need for social support services has largely outpaced population growth. There was a 138% increase in CalFresh enrollment between 2012 and 2016, a 38% increase in Medi-Cal enrollment, and a 15% increase in the in-home supportive services caseload. Over the same period, the older adult population grew 18%. The number of home delivered and congregate meals served to seniors declined somewhat in 2016.

SENIOR ENROLLMENT IN MEDI-CAL, CALFRESH AND IN-HOME SUPPORTIVE SERVICES GROWS

Older Adult Support Services in Orange County, 2012-2016

Meals Served   In-Home Supportive Services
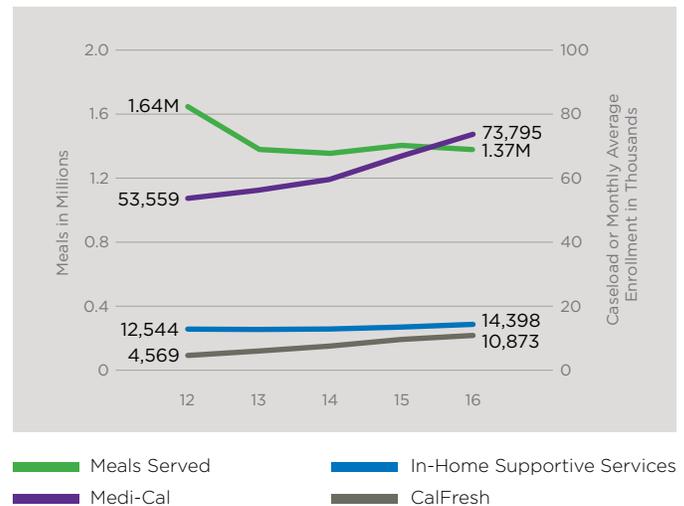
Medi-Cal   CalFresh

Sources: County of Orange Social Services Agency (IHSS, Medi-Cal, CalFresh); Orange County Community Services/Office on Aging (meals)

Data Notes

Explanations for the declines in mental health hospitalization among seniors are sourced to: Ayyagari, P. et. al. (May 2015) "Does prescription drug coverage improve mental health? Evidence from Medicare Part D," Journal of Health Economics, and Zivin, K. et. al. (December 2013) "Trends in Depressive Symptom Burden Among Older Adults in the United States from 1998 to 2008," Journal of General Internal Medicine. Schizoaffective disorder is defined as a condition in which a person experiences a combination of schizophrenia symptoms, such as hallucinations or delusions, and of bipolar mood disorder symptoms, such as mania or depression (Mayo Clinic). Costs due to Alzheimer's are sourced to the Alzheimer's Association (http://www.alz.org/facts/). The data source for Alzheimer's Disease death rates has been changed since previously reported.

Safety

CHILD ABUSE AND NEGLECT

Between 2006 and 2015, child abuse reports (allegations) increased 37%, while confirmed reports of abuse (substantiated allegations) fell 38%. The long-term reduction in substantiated allegations may reflect Orange County Social Services Agency's focus on preventative measures. Over the same 10-year period, entries to foster care also fell 36%. Despite the 10-year decline, between 2014 and 2015, both substantiated allegations and entries to foster care rose for the second consecutive year, increasing 4% and 13%, respectively. When possible, the Orange County Social Services Agency keeps families intact while providing stabilizing services. This may account for the fact that only 21% of confirmed reports in Orange County resulted in foster care placement in 2015, compared to 40% statewide. Entries include first-time entries and reentries into the foster care system; not all reentries stem from a substantiated allegation.

CONFIRMED CHILD ABUSE AND ENTRIES TO FOSTER CARE ROSE AGAIN IN 2015

Allegations, Substantiated Allegations and Entries to Foster Care in Orange County, 2006-2015
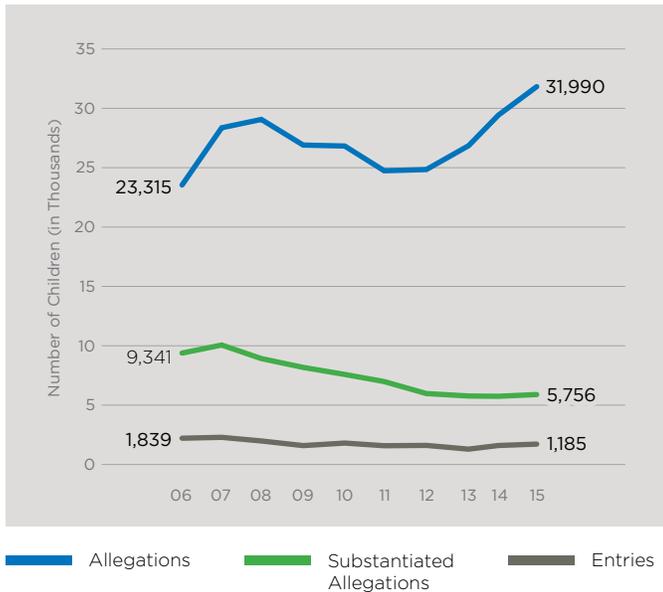
Source: University of California Berkeley, Center for Social Services Research, Child Welfare Research Center (http://cssr.berkeley.edu/ucb_childwelfare/)

ORANGE COUNTY IS MID-RANGE AMONG PEERS FOR SUBSTANTIATED CHILD ABUSE

Regional Comparison of Substantiated Child Abuse Allegations and Entries to Foster Care, 2015
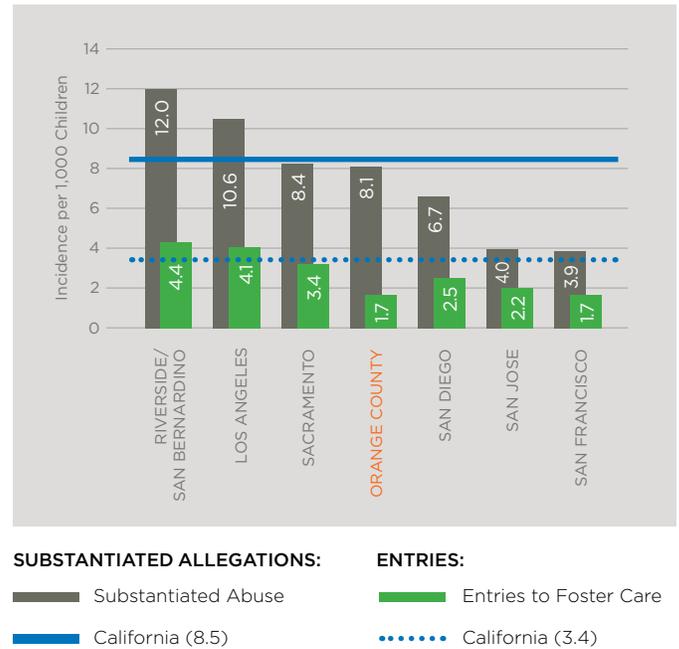
Source: University of California Berkeley, Center for Social Services Research, Child Welfare Research Center (http://cssr.berkeley.edu/ucb_childwelfare/)

CRIME RATE

Orange County's crime rate increased 23% between 2014 and 2015. This increase was driven by a 15% increase in violent crime and a 24% increase in property crime, which comprises most crime in Orange County and nationwide. This is the second consecutive year that violent crime increased in Orange County, moving from 194 violent crimes per 100,000 residents in 2013 to 227 violent crimes per 100,000 residents in 2015. Violent crime increased in all regions compared except Seattle. Orange County's crime rate is lower than the state and national averages and all peer regions compared except San Diego. Crime rate analysis includes violent crimes (homicide, rape, robbery, and aggravated assault) and property crimes (burglary, larceny-theft, motor vehicle theft, and arson).

VIOLENT AND PROPERTY CRIME RATES JUMP IN 2015

Crime Rate in Orange County, 2006-2015
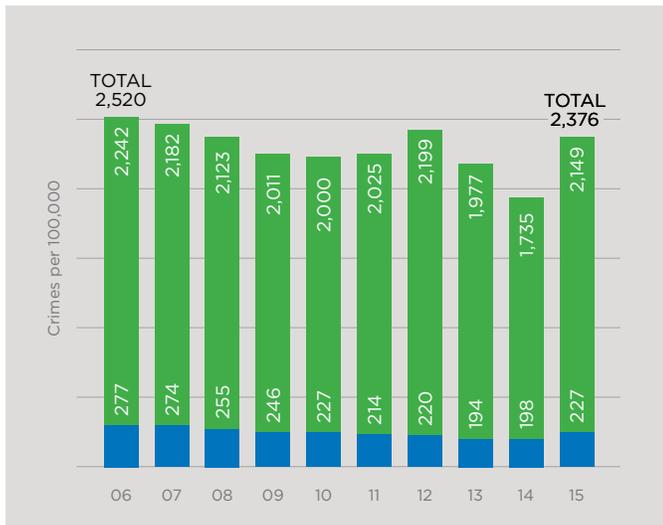
Source: Federal Bureau of Investigation, Uniform Crime Reporting Program
(ucr.fbi.gov/ucr-publications)

ORANGE COUNTY HAS THE SECOND LOWEST OVERALL CRIME RATE COMPARED TO PEERS

Regional Comparison of Crime Rate, 2015
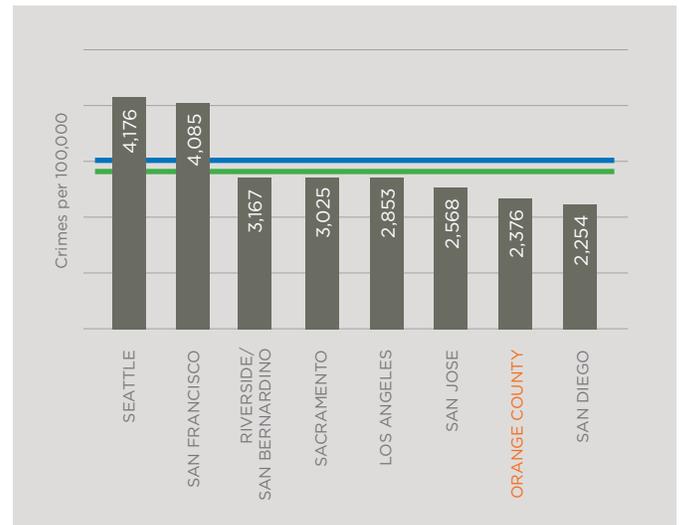
Source: Federal Bureau of Investigation, Uniform Crime Reporting Program
(ucr.fbi.gov/ucr-publications)

JUVENILE CRIME

In 2015, there were 15 arrests per 1,000 juveniles in Orange County. This is lower than the statewide rate of 18 arrests per 1,000 juveniles. Orange County's juvenile arrest rate equates to a total of 4,829 juvenile arrests in 2015, down significantly from the 14,021 juvenile arrests 10 years earlier in 2006. Juvenile arrests comprised 6% of all arrests in Orange County in 2015.

School expulsions dropped substantially in the 2014/15 school year, and are low compared to the statewide average. Students are expelled due to violent or defiant behavior, or for committing a drug or weapon offense on school grounds.

### ORANGE COUNTY'S JUVENILE ARREST RATE DROPPED 27% IN ONE YEAR

Juvenile Arrest Rate, Ages 10-17, Orange County, 2006- 2015
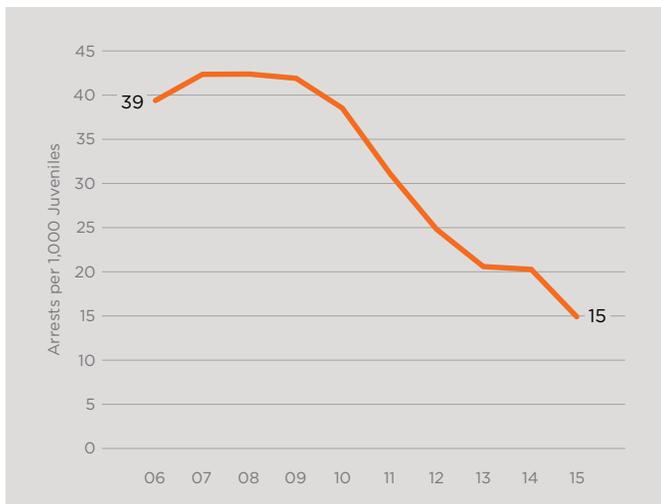
Sources: California Department of Justice, Criminal Justice Statistics Center (http://oag.ca.gov/crime); California Department of Finance (www.dof.ca.gov)

ORANGE COUNTY STUDENT EXPULSIONS DROPPED SUBSTANTIALLY IN 2014/15

Expulsion Rate in Orange County and California, 2012-2015
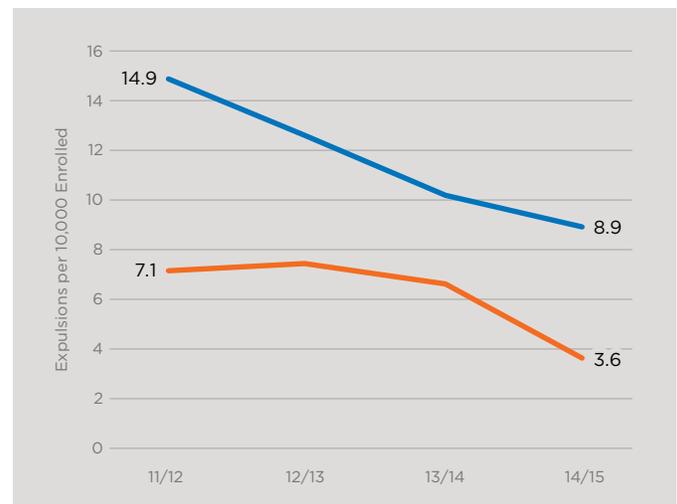
Orange County   California

*Source: Department of Education, DataQuest (http://data1.cde.ca.gov/Dataquest/)*

DRINKING AND DRIVING

There were 220 victims (fatalities or severe injuries) in alcohol-involved collisions in Orange County in 2015, down 17% from 10 years ago. Victims of alcohol-involved collisions comprised 23% of victims in all traffic collisions in Orange County, lower than the statewide average of 25%. The proportion of victims in alcohol-involved collisions declined for the state and all regions compared in 2015.

On a per capita basis, Orange County's rate of alcohol-involved fatalities and severe injuries decreased 23% over 10 years, dropping from 9.0 victims per 100,000 Orange County residents in 2006 to 7.0 victims per 100,000 in 2015. Accidents with minor injuries are not counted in this analysis due to wide variation in reporting by jurisdictions

VICTIMS OF ALCOHOL-RELATED COLLISIONS DROP 17% IN 10 YEARS

Number and Percentage of Traffic Fatalities and Severe Injuries that Involved Alcohol in Orange County and California, 2006-2015
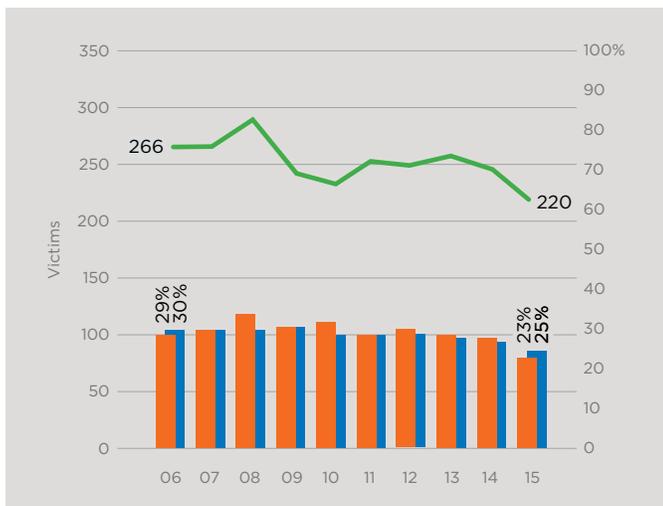
PERCENTAGE OF ALL TRAFFIC VICTIMS THAT INVOLVED ALCOHOL
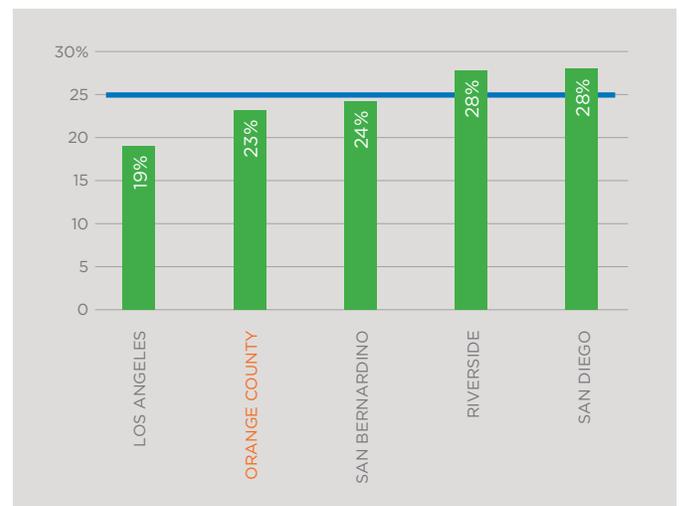
- Orange County
- California

NUMBER OF VICTIMS OF ALCOHOL-INVOLVED ACCIDENTS

- Victims

Source: Statewide Integrated Traffic Records System (SWITRS), California Highway Patrol

ORANGE COUNTY FELL BELOW THE STATEWIDE AVERAGE FOR THE PROPORTION OF ALCOHOL-INVOLVED CRASH VICTIMS

County Comparison of Percentage of Traffic Fatalities and Severe Injuries that Involved Alcohol, 2015

- County
- California (25%)

Source: Statewide Integrated Traffic Records System (SWITRS), California Highway Patrol
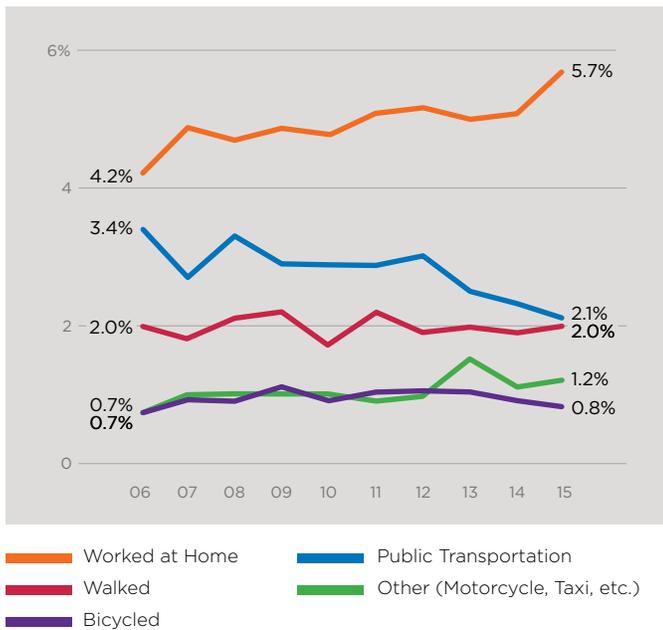
Infrastructure

TRANSPORTATION

In 2015, most (79%) Orange County workers age 16 and over drove to work alone. This is the same proportion as the previous year. Carpooling has gradually decreased over 10 years, from 11.3% in 2006 to 9.2% in 2015. Use of public transportation has also declined, from 3.4% in 2006 to 2.1% in 2015. Meanwhile, working at home (5.7%) continues to increase, along with commuters using other means of transportation, such as motorcycles and taxis. Bicyclists comprised 0.8% of all commuters.

Investment in bikeways in Orange County is gradually increasing, including off-street paved bike paths (Class I), on-road striped and signed bicycle lanes (Class II) and on-road, shared-lane, signed bicycle routes (Class III). In 2016, there were 1,120 miles of bikeways in Orange County, an increase of 12% since 2011.
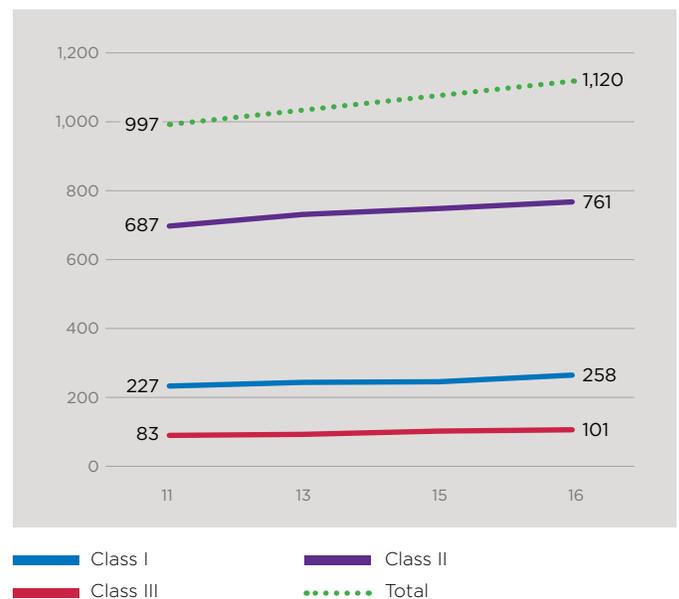
WORKING AT HOME INCREASES AGAIN

Mode of Travel to Work in Orange County, 2006-2015

Worked at Home, Public Transportation, Walked, Other (Motorcycle, Taxi, etc.), Bicycled

Source: U.S. Census Bureau, American Community Survey, 1-Year Estimates

MILES OF BIKEWAYS GRADUALLY INCREASING

Miles of Bikeways in Orange County, 2011-2016

Class I, Class II, Class III, Total

Source: Orange County Transportation Authority

INVESTING IN INFRASTRUCTURE FOR ACTIVE TRANSPORTATION

In March 2016, drawing from federal funds, the Orange County Transportation Authority (OCTA) awarded more than $19.5 million to cities and the County of Orange to design and construct bikeways. Projects include Main Street/El Camino Real improvements in Tustin, protected bicycle lanes on Bristol Street in Santa Ana, a bicycle boulevard on Wilshire Avenue in Fullerton, extension of the bikeway and walkway on Coast Highway in Dana Point, and bicycle corridor improvements in Garden Grove.
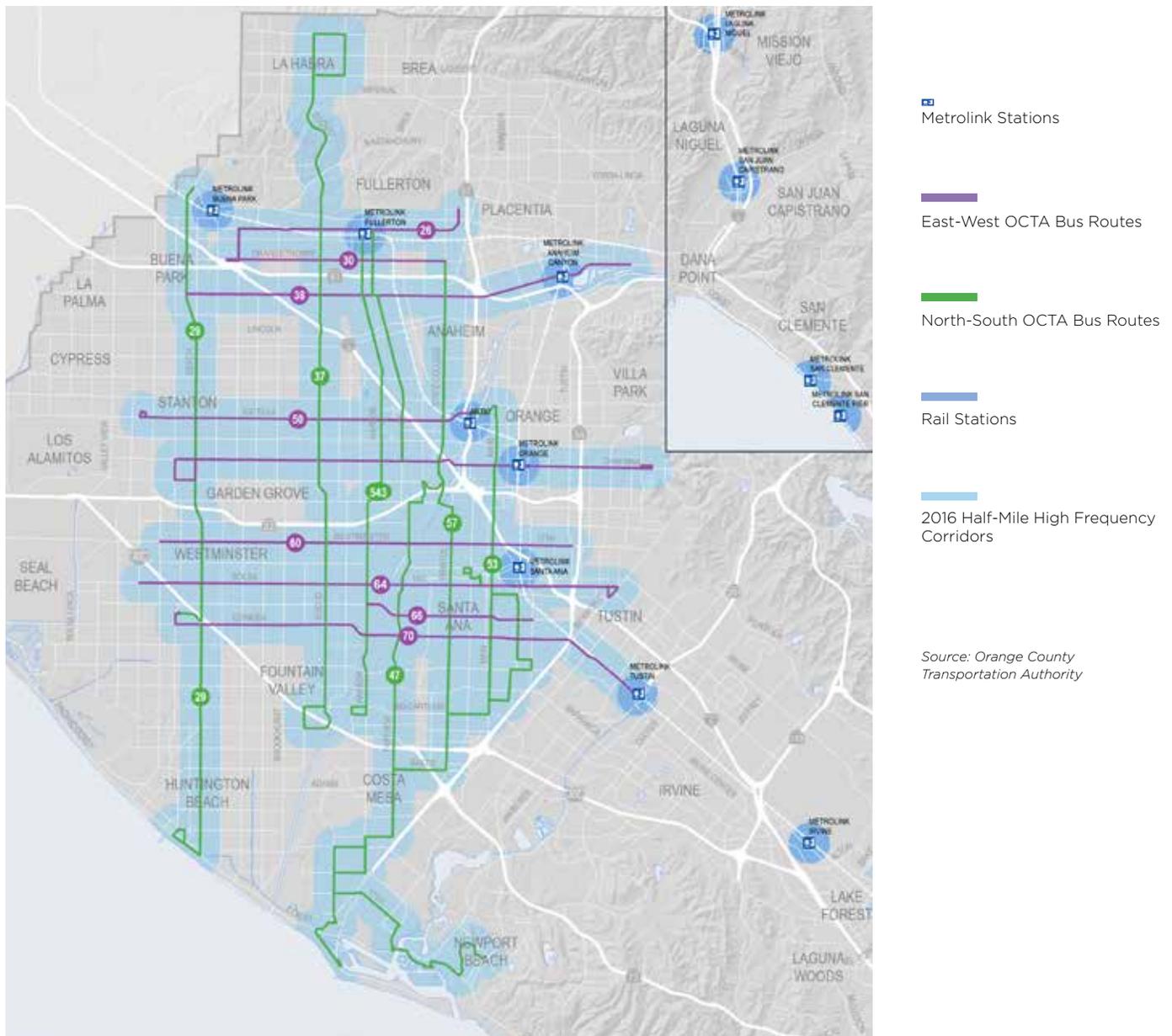
Source: Orange County Transportation Authority

OCTA is developing a set of mobility indicators to provide decision-makers and the public an understanding of Orange County transportation-related trends. The 2018 Orange County Community Indicators report will include an update on OCTA's efforts and may incorporate additional transportation indicators as appropriate.

The Orange County Transportation Agency tracks residents' access to "high quality transit corridors" or HQTC, where the time between buses serving stops along these routes is 15 minutes or better during weekday peak periods. In 2016, 39% of Orange County's population lived within one-half mile of access to a HQTC, an increase of eight percentage points since 2014. Half of all passenger activity (50%) occurs on buses traveling on these corridors, up from 40% in 2014.

39% OF ORANGE COUNTY RESIDENTS LIVE NEAR HIGH-QUALITY BUS CORRIDORS

High-Frequency Transit Corridors in Orange County, 2016

Metrolink Stations

East-West OCTA Bus Routes

North-South OCTA Bus Routes

Rail Stations

2016 Half-Mile High Frequency Corridors

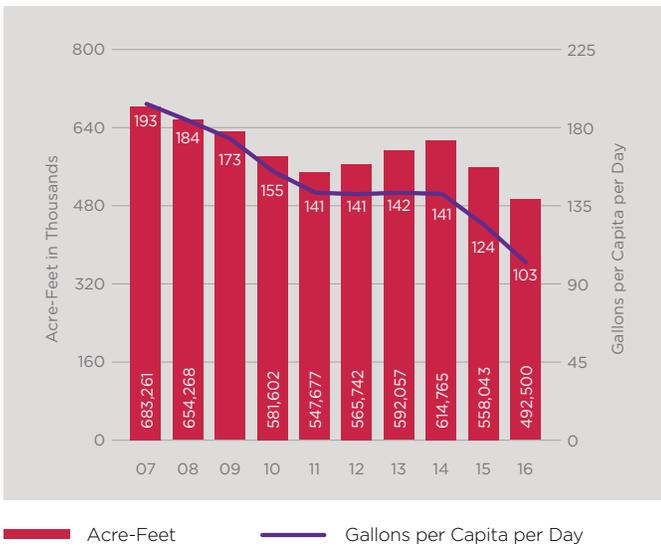*Source: Orange County Transportation Authority*

WATER USE AND SUPPLY

Over the past 10 years, per capita potable water consumption in Orange County has fallen 47%. Statewide mandatory urban water restrictions, which went into effect in June 2015, prompted increased conservation and water recycling. The result was a 12% drop in acre-feet of water used in Orange County between 2014/15 and 2015/16, on top of a 9% drop the year before. Countywide in 2015/16, potable water consumption was an average of 103 gallons per capita per day (GPCD), down from 124 the year before – already well below the county's SB 7-7X target of 158 GPCD by 2020. Statewide water restrictions were lifted in June 2016 for water suppliers that certified they could meet water demand for three consecutive dry years.

The cost of water varies by source. Ocean water desalination and recycled water are the costliest sources, and groundwater and water transfers (imported water negotiated in addition to usual imported water) are the least costly sources. Current water consumption projections through 2030 do not include estimates for ocean water desalination; however, desalinated water is anticipated to replace some imported water in the future to a certain extent.

WATER USAGE CONTINUES TO DECLINE INTO 2016

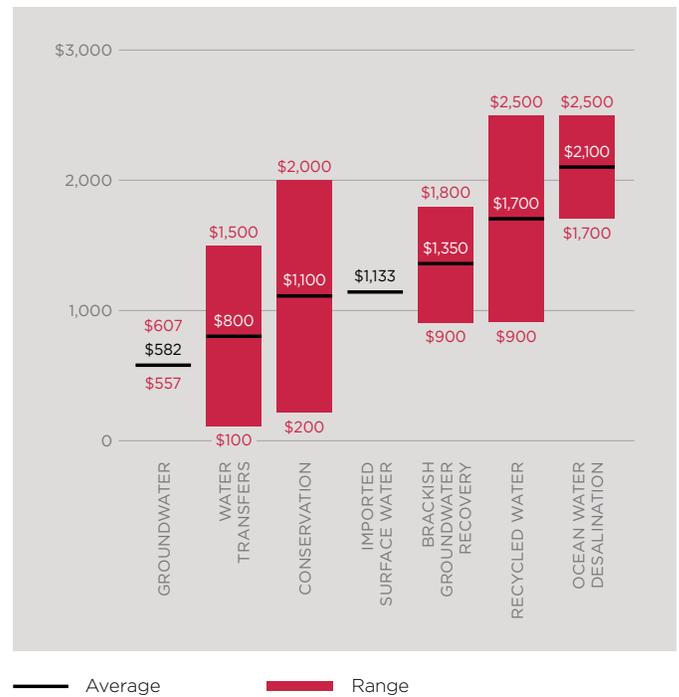Urban Water Usage in Acre-Feet and Gallons per Capita Per Day in Orange County, 2006/07-2015/16

Source: Municipal Water District of Orange County

GROUNDWATER IS THE MOST AFFORDABLE SOURCE OF WATER; DESALINATION IS THE MOST COSTLY

High, Low and Average Costs of Water by Source in Orange County, 2016

Sources: Municipal Water District of Orange County; Orange County Water District

Data Notes

Urban water usage data in acre-feet includes residential, industrial and commercial water use for a full fiscal year. The gallons per capita per day (GPCD) calculations for Orange County overall, provided by the Municipal Water District of Orange County, are calculated to comply with SB 7-7X, a 2009 water conservation law that sets an overall goal of reducing per capita urban water use by 20% by December 31, 2020. These GPCD calculations include potable water, less recycled water and indirect potable reuse water for the entire fiscal year. This measure of GPCD differs from GPCD previously reported in the Community Indicators Report and should not be compared to previous reports. The GPCD figures by water supplier from the State Water Resource Control Board reflect residential water use only and report water usage for a single month. For 2030 water use projections by source, please see the 2016 Orange County Community Indicators Report at www.ocgov.com/about/infooc/facts/indicators.

According to residential water consumption data from December 2016, only seven Orange County water retailers reported lower per capita water consumption than the statewide average of 65 gallons per capita per day (GCPD). Wintertime water consumption is typically less than during the summer, when residents are irrigating lawns and gardens (e.g., statewide per capita residential water consumption in July 2016 was 114 GPCD).

7 OUT OF 29 ORANGE COUNTY WATER RETAILERS HAVE LOWER PER CAPITA CONSUMPTION THAN THE STATEWIDE AVERAGE

Water Consumption in Gallons per Capita per Day by Orange County Water Retailer, December 2016

Source: State Water Resource Control Board (www.waterboards.ca.gov)

DROUGHT STATUS

Water Year 2017 (beginning October 1, 2016 through September 30, 2017), notable for heavy precipitation and snowfall, is particularly remarkable because of the five dry years that preceded it. The California Department of Water Resources' (DWR) March 2017 snow survey found Sierra Nevada snowpack levels to be 185% of average for this time of year. Thirty percent of California's water supply comes from Sierra Nevada snow. Another third of California's water supply comes from groundwater. After such a long period of dry weather, the DWR notes that it will take much more than this historically wet water year for many of the state's aquifers to be replenished.

As of March 2017, Orange County remains in "moderate drought" status according to the U.S. Drought Monitor. The urban areas of neighboring counties (Los Angeles, San Bernardino, Riverside, and San Diego counties) have mostly seen their drought status improved to "abnormally dry," but none have had their drought status removed, to date.

Given California's extreme swings from drought to flood and back to drought, state officials agree that ongoing conservation and a long-term solution to the state's water needs are necessary.

Sources: California Department of Water Resources, press release, 3/1/2017 (www.water.ca.gov/recent_news.cfm); U.S. Drought Monitor, 3/7/17 (http://droughtmonitor.unl.edu)

Orange County Community Indicators Project Sponsors

Contributing Partners

Thanks to the many organizations that provided data and expertise in support of this effort.

The Orange County Community Indicators Report is part of Orange County's broad range of robust, data-rich reports that track issues of importance on a regular basis. Several issue-focused reports, available either printed or online, provide additional detail on many indicators included in the Orange County Community Indicators Report. The following is a summary of selected reports available for further review:

Annual Report on the Conditions of Children in Orange County
ochealthinfo.com/phs/about/family/occp/report/

Orange County Workforce Indicators Report
OCBoard.org
ocbc.org

Orange County Cost Study of Homelessness
unitedwayoc.org

Orange County's Healthier Together
ochealthiertogether.org

This website provides access to over 200 health, social and economic indicators via an online dashboard. Also available on this site is the Orange County Older Adult Profile.

Orange County Health Care Agency
ochealthinfo.com

The Health Care Agency publishes issue-specific reports on a regular basis. Current listings include Drug and Alcohol Overdose Hospitalization and Death in Orange County, Life Expectancy in Orange County, and several other subjects.

The State of the American Veteran: The Orange County Veterans Study
oc-cf.org

This recent, one-time study was commissioned by the Orange County Community Foundation and prepared by the USC School of Social Work Center for Innovation and Research on Veterans & Military Families.