CATALINA ISLAND HEALTH

An affiliate of UCI Health

COMMUNITY HEALTH NEEDS ASSESSMENT

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June 2026

STROUDWATER

Scenic Avalon Harbor by Ryan Longnecker
Credit: Love Catalina Island Tourism Authority

TABLE OF CONTENTS

ACKNOWLEDGEMENTS

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EXECUTIVE SUMMARY - OVERVIEW

Catalina Island Health (CIH) engaged Stroudwater Associates to assist with the development of their 2026 Community Health Needs Assessment (CHNA). Stroudwater also assisted CIH with their prior CHNA in 2023.

The hospital CHNA is a document required by Section 501 (r) (3) of the Internal Revenue Service (IRS) to be developed every three years. Once this CHNA is adopted, CIH will then develop an implementation strategy to address the key community health needs identified.

To complete this analysis, CIH and Stroudwater Associates completed interviews with 30 local health and community leaders, representing a broad cross-section of residents and service providers on Catalina Island, and received online survey responses from 183 community members.

Primary and secondary data sources, including U.S. Census, National Institutes of Health (NIH), Centers for Medicare & Medicaid Services (CMS), Centers for Disease Control and Prevention (CDC) and Love Catalina Island Tourism, were combined with internal CIH data to inform the analysis.

EXECUTIVE SUMMARY – COMMUNITY

Catalina Island Health serves the residents and visitors of Santa Catalina Island, a Channel Island 22 miles off the coast of southern California. The island is reachable by ferry service from locations in Los Angeles County and Orange County, as well as by private helicopter service. Ferry transport takes about an hour. Helicopter transport takes 15 minutes.

Catalina Island has an estimated population of just under 3,700 year-round residents. About 93% of residents live in the incorporated city of Avalon. Another major population center is the unincorporated village of Two Harbors on the northwest side of the island. The island's ZIP Code is 90704 (Avalon). 63% of the population is between the ages of 18 and 64, and the total population is expected to decline by 2.9% over the next five years except for the 65+ age cohort, which is projected to grow by 11.8% over the next five years.

In 2025, over 1.2 million tourists visited the island. Tourism peaks in July, with over 161,000 visitors on average between 2023 and 2025.

Catalina Island is racially diverse, with fewer than 50% of residents identifying as white. Ethnically, over 52% of island residents are Hispanic, and just under half speak Spanish at home.

EXECUTIVE SUMMARY – SOCIAL DETERMINANTS OF HEALTH

Multiple factors in a community can impact overall health, affecting general well-being and health outcomes. Community health on Catalina Island is subject to challenges both within and beyond the physical healthcare system, including:

Social Determinants	Catalina Island Highlights
Demographics	An aging population that is racially and ethnically diverse, with a higher-than-average percentage of veterans and people with cognitive and mobility disabilities.
Economic Stability	A per capita income that is below the national average, with higher-than-average percentages of children and seniors in poverty.
Neighborhood and Physical Environment	High housing costs and low housing occupancy, and transportation barriers due to geography.
Education	A high chronic absence rate among students.
Food	Higher-than-average percentages of adults with food insecurity.
Community	Loneliness and a lack of social and emotional support among residents.
Health System	A designated shortage of primary care and mental health providers, and fewer available specialist providers than in non-rural communities.
Health Behaviors	Higher-than-average percentages of residents who binge drink, smoke cigarettes, and who report frequent physical distress or fair or poor general health.
Health Outcomes	Higher-than-average percentages of residents with cancer, depression, and chronic conditions such as COPD, heart disease, diabetes, obesity, high blood pressure, and stroke.

EXECUTIVE SUMMARY – HEALTH NEEDS

IRS regulations charge CIH with developing this Community Health Needs Assessment, but addressing the needs of the community will involve many organizations outside of CIH. Below are the most prominent health needs on Catalina Island, based on data analysis, survey results, and stakeholder interviews.

Health Need	Description
Patient Navigation, Access, and Costs	Navigating a complex healthcare system and its associated costs is critical for a healthy community, particularly one that is rural, older, or has demographic or health factors that can impede access to care.
Specialist Care	Providing appropriate levels of specialty care to meet the specific needs of the community despite the geographic and cost constraints of island living.
Behavioral and Mental Health	Maintain access to critical behavioral and mental health and related substance abuse counseling services.

INTRODUCTION AND PURPOSE

Bellanca Bicycles
Credit: Love Catalina Island Tourism Authority

COMMUNITY HEALTH NEEDS ASSESSMENT - OVERVIEW

Definition

- A Community Health Needs Assessment ("CHNA") is a process to evaluate the health needs of a community or specific populations within it and to use the findings to address those needs and create improvement and change.

Process

- CHNAs are informed by primary and secondary data sources and are designed to be collaborative. Primary data sources used in this CHNA include a community survey completed by 184 people and in-person interviews with 10 groups of community stakeholders. Secondary data sources include public, proprietary, and internal Catalina Island Health ("CIH") data. The survey, interview, and data are compiled into a public report that identifies priorities for the community to address.

Impact

- The collaborative CHNA process and the resulting report, along with its list of actionable priorities, help inform the attention and strategy of the community and Catalina Island Health, with the goal of creating a more effective, focused, and equitable healthcare delivery system.

CHNA PROCESS DETAILS

Primary Data Sources
Stroudwater Associates, in collaboration with CIH, created an online survey that was distributed to Catalina Island residents through social media posts, the CIH website, word of mouth, and at a health fair run by CIH. Survey questions were provided in both English and Spanish. The survey was open for responses from March 19, 2026, through May 10, 2026. At the close of the survey, 183 community members had responded.

In addition, CIH identified approximately 30 people for in-person interviews with Stroudwater. These interviewees included community leaders, city council members, public safety officials, board members, and local leaders of tourism and nonprofits.

Secondary Data Sources
Stroudwater compiled data on the health status of Catalina Island through public data repositories, including the U.S. Census, NIH, CMS, and CDC. Propriety data were used for some measures, including population growth projections, and CIH provided de-identified aggregate patient utilization data. Where available, statistics were shown for the Avalon ZIP Code (90704) compared to benchmarks for Los Angeles County, California, and the United States.

Reporting
Stroudwater submitted a draft report to CIH representatives on May 26th, 2026. A final report was presented to CIH Leadership and was released to the public in June of 2026.

SOCIAL DETERMINANTS OF HEALTH

Two Harbors
Credit: Love Catalina Island Tourism Authority

SOCIAL DETERMINANTS OF HEALTH

- The social determinants of health exemplify how multiple factors in a community can impact overall health, including general well-being and health outcomes. For this CHNA, statistics were examined within each section in concert with possible health implications for the community.

Demographics

Economic Stability

Neighborhood and Physical Environment

Education

Food

Community

Healthcare System

Health Behaviors

Health Outcomes

DEMOGRAPHICS

Catalina Art Festival
Credit: Love Catalina Island Tourism Authority

DEMOGRAPHICS

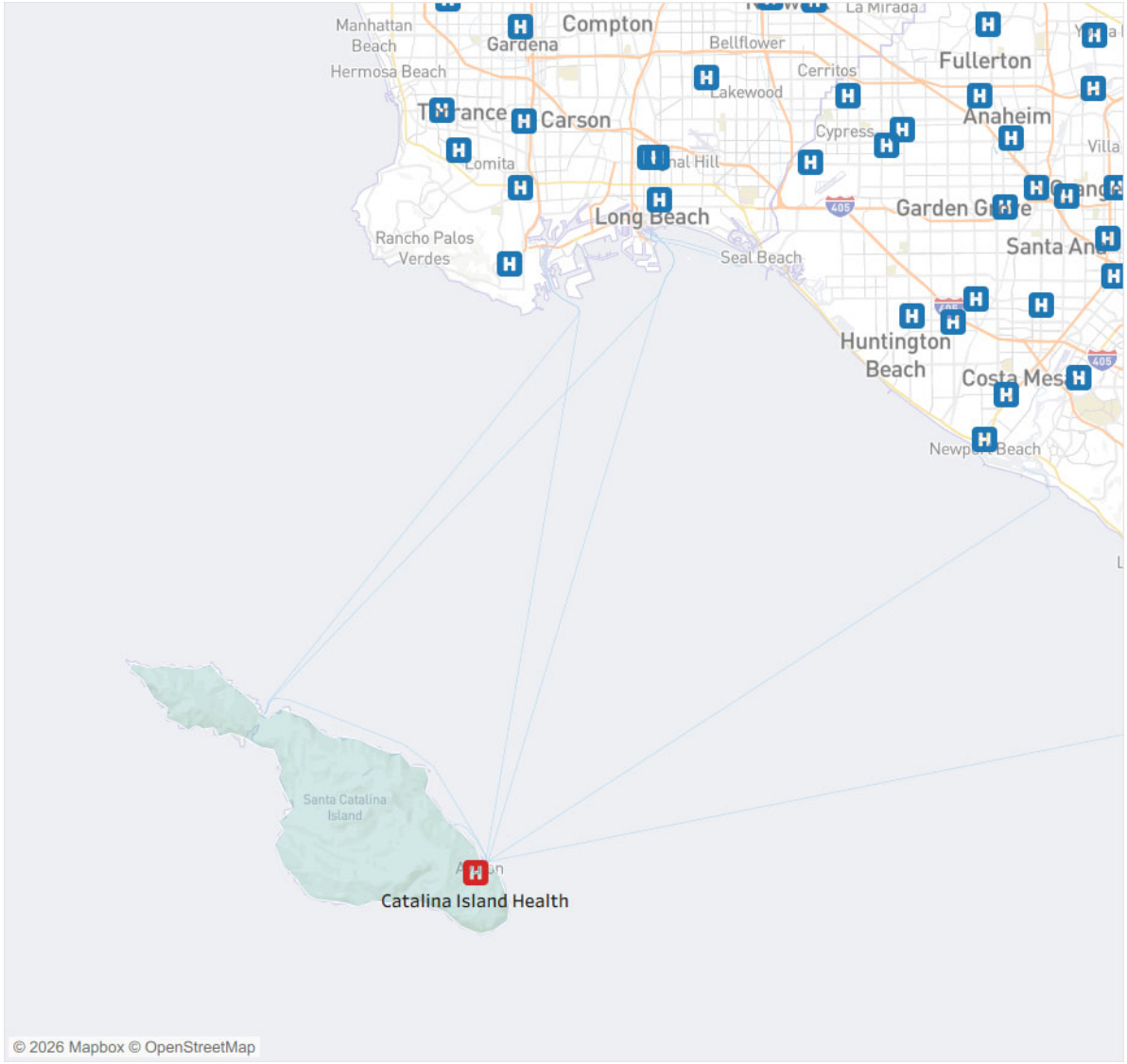
Demographics include the geography where people live, trends in population size, the racial/ethnic makeup of the population, their ages, and any special characteristics or circumstances of the population. The following statistics were analyzed for Catalina Island.

- Service area
- Population growth
- Visitor statistics, including use of Catalina Island Health services
- Population by race and ethnicity
- Median age
- Veteran, disability, and foreign-born populations

Key findings include:

Statistic Analyzed	Key Findings
Population Growth	The island's overall population is projected to decline by 2.9% in the next five years. This is a change from the prior CHNA estimates which had projected slight positive growth. However, the over 65+ population is expected to increase by over 11%.
Population Growth of Tourism	Annual visits to the island have increased year over year since a pandemic-affected low in 2021. Tourism brought over $18 million in revenue in 2025. Visits tend to peak in July of each year.
Race/Ethnicity	Catalina Island is racially diverse, with fewer than 50% of residents identifying as white. Ethnically, over 52% of island residents are Hispanic, and just under half speak Spanish at home.
Veterans and Disabled	The island has a slightly higher percentage of residents who are veterans, and more residents that report cognitive and mobility disabilities compared to local, state, and national benchmarks.

SERVICE AREA



Source: HRSA

Catalina Island is one of California's Channel Islands and lies 22 miles off the coast of southern California. The island covers 76 square miles, but 88% of it remains under a conservancy trust and is protected from development.

Catalina Island Medical Center is a Critical Access Hospital and the only hospital on the island, serving the island's full-time residents, part-time residents, commuting workers, and visitors.

POPULATION GROWTH

The current population in the Avalon ZIP Code (90704) is estimated at 3,665 year-round residents and is projected to decrease by 2.9%, or 106 individuals, over the next five years. However, the population aged 65 and older is projected to increase by nearly 12%. Female and male populations are expected to decrease by similar percentages across age groups.

Population estimates for Catalina have decreased since the prior CHNA, which had shown over 4,000 residents and a 2.6% growth projection.

Total Population

Current (2026)	Projected (2031)	5 Year Change (#)	5 Year Change (%)
3,665	3,559	-106	-2.9%

Age	Current (2026)	Projected (2031)	5 Year (#)	5 Year (%)
0-17	683	629	-54	-7.9%
18-44	1,367	1,311	-56	-4.1%
45-64	935	859	-76	-8.1%
65+	680	760	80	11.8%

Female Population

Current (2026)	Projected (2031)	5 Year Change (#)	5 Year Change (%)
1,821	1,770	-51	-2.8%

Age	Current (2026)	Projected (2031)	5 Year (#)	5 Year (%)
0-17	373	331	-42	-11.3%
18-44	606	594	-12	-2.0%
45-64	479	439	-40	-8.4%
65+	363	406	43	11.8%

Male Population

Current (2026)	Projected (2031)	5 Year Change (#)	5 Year Change (%)
1,844	1,789	-55	-3.0%

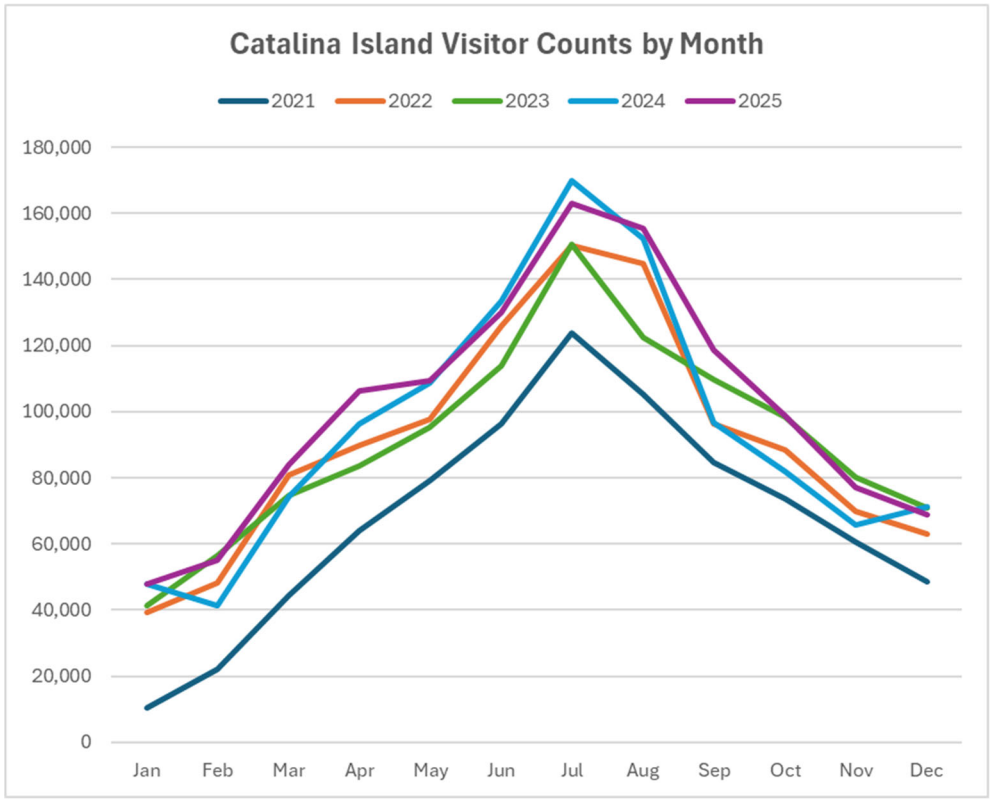
Age	Current (2026)	Projected (2031)	5 Year (#)	5 Year (%)
0-17	310	298	-12	-3.9%
18-44	761	717	-44	-5.8%
45-64	456	420	-36	-7.9%
65+	317	354	37	11.7%

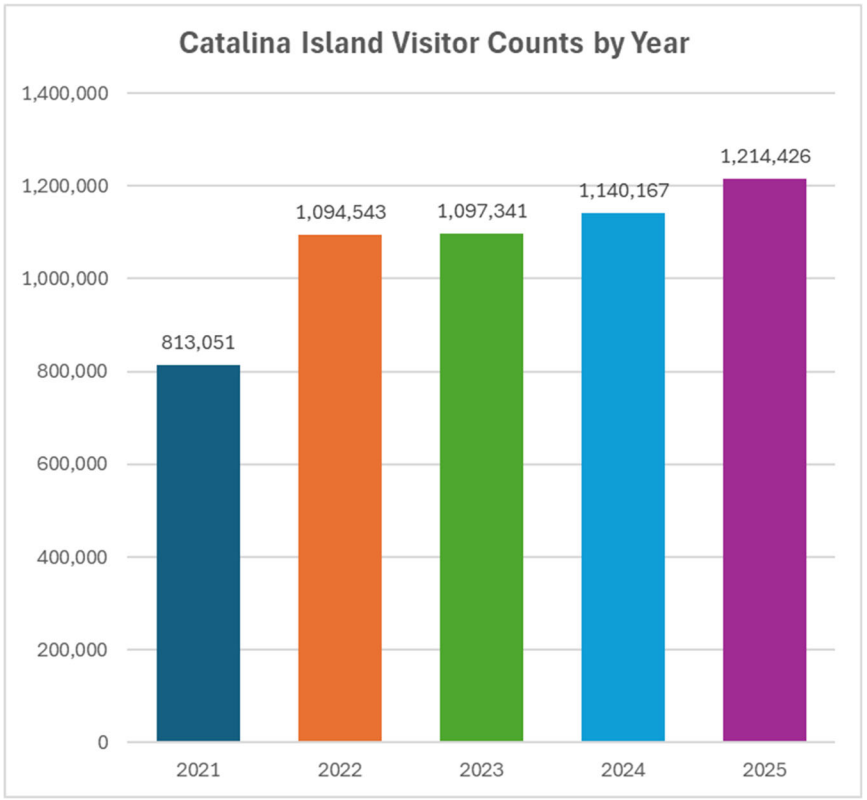
Source: Claritas

CATALINA ISLAND VISITOR STATISTICS

- On average, over 1.1 million people visit the island each year, with visits spiking to over 158,500 each July. In 2025, Catalina Island saw $18,143,194 in visitor-driven revenue.

	Year	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Totals
Visitor Counts by Month and Year	**2021**	10,521	22,225	44,413	63,911	79,176	96,208	123,901	105,214	84,579	73,760	60,449	48,694	813,051
	2022	39,221	48,116	80,747	89,865	97,690	125,942	150,446	144,834	96,266	88,523	69,807	63,086	1,094,543
	2023	41,437	56,313	74,761	83,609	95,307	113,765	150,647	122,399	109,623	98,544	80,067	70,869	1,097,341
	2024	47,895	41,366	74,278	96,442	108,815	133,367	169,942	152,491	96,678	81,944	65,595	71,354	1,140,167
	2025	48,004	54,988	84,005	106,233	109,375	129,854	163,124	155,432	118,770	98,686	76,959	68,996	1,214,426
Average (excluding 2021)		44,139	50,196	78,448	94,037	102,797	125,732	158,540	143,789	105,334	91,924	73,107	68,576	1,136,619

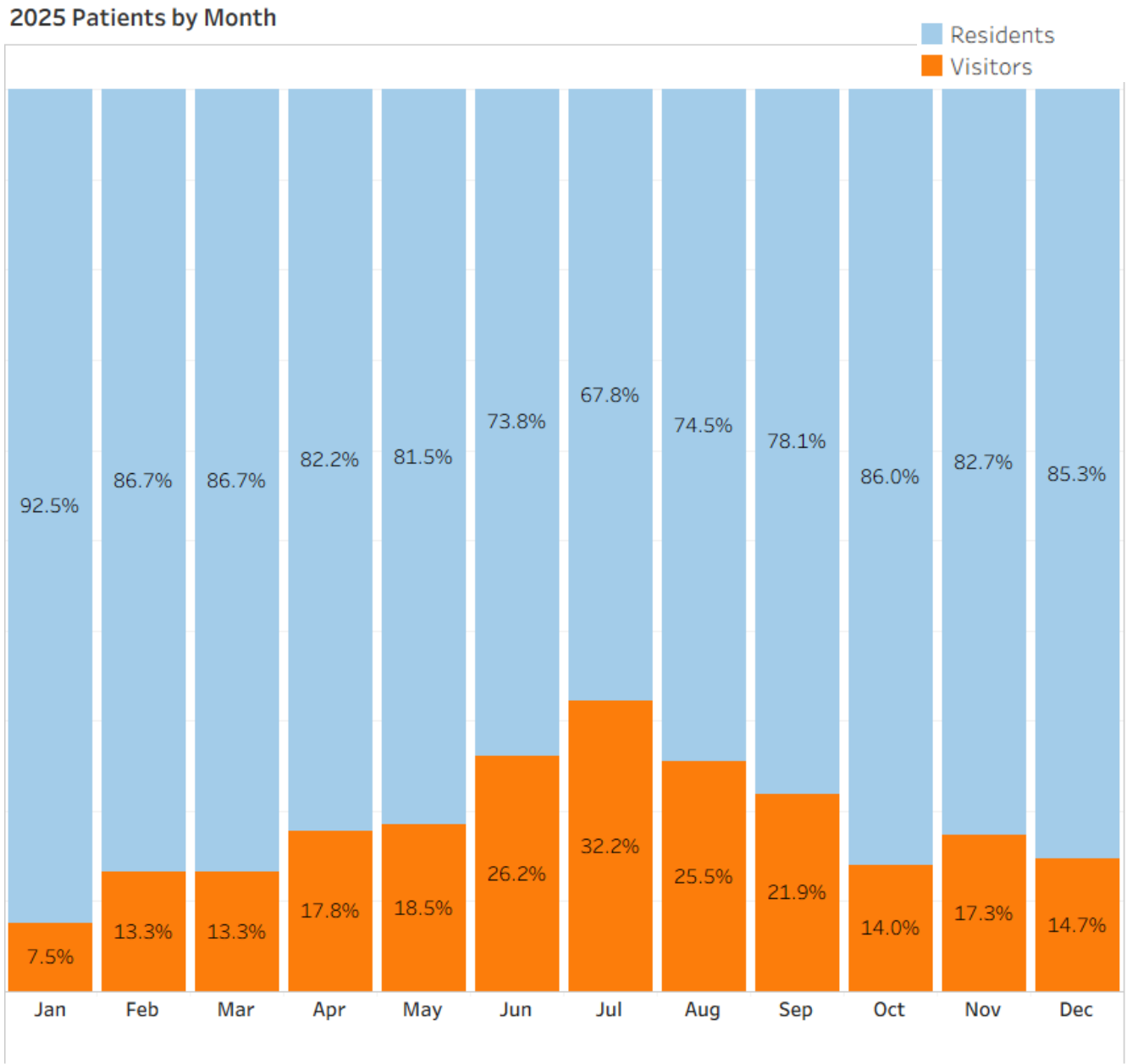




Source: Love Catalina Island. (n.d.). *Catalina Island Visitor Statistics: Visit Catalina Island*. Catalina Island Chamber of Commerce & Visitors Bureau https://assets.simpleviewinc.com/simpleview/image/upload/v1/clients/catalinaislandccvb/10_year_jan_26_fbe9abdb-c409-47c6-9995-5c1036f6f4ca.pdf.

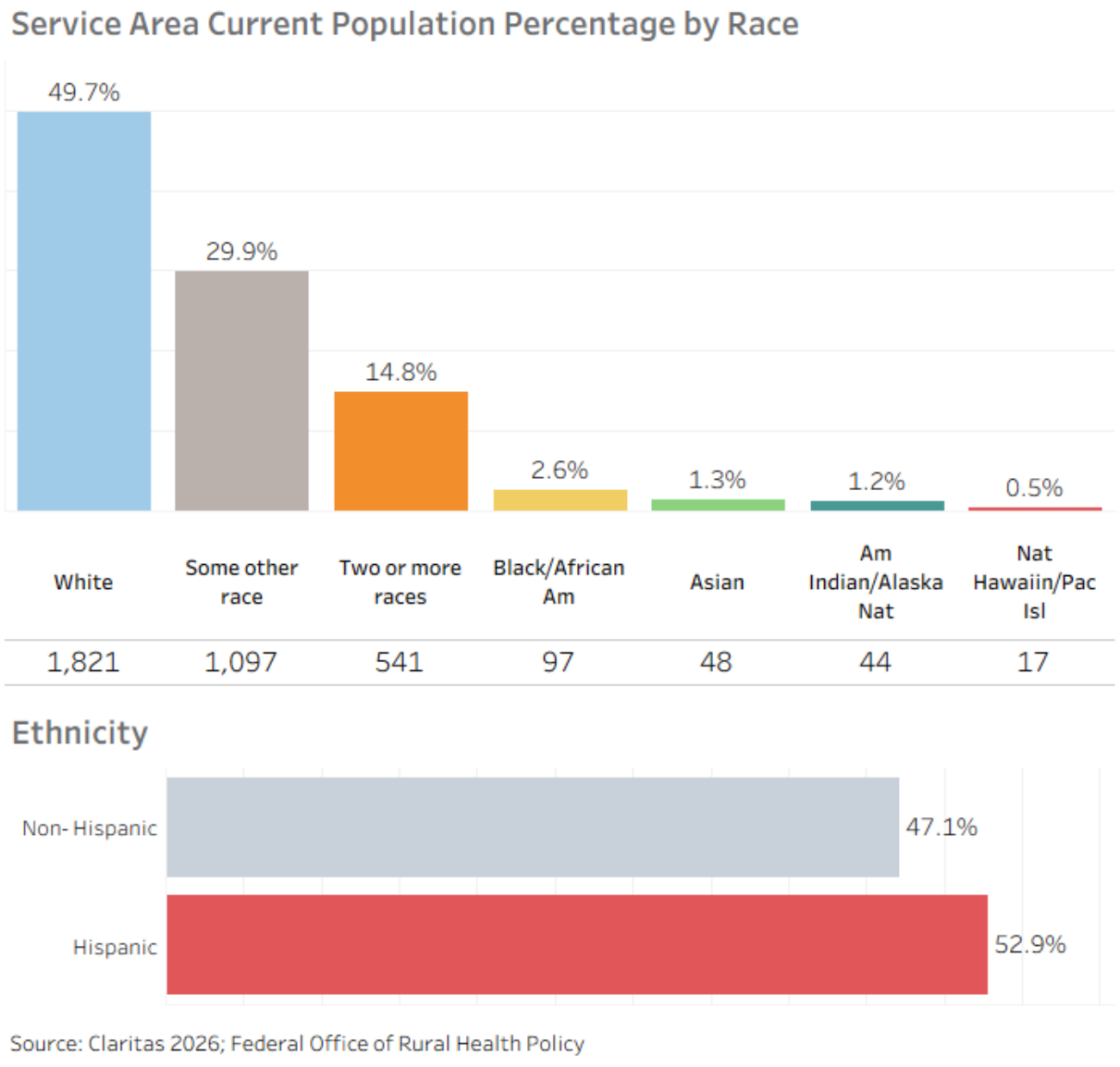
CIH UTILIZATION, RESIDENTS VS. VISITORS

- Over 32% of patients at CIH facilities in July of 2025 were non-residents. Visitor utilization of CIH hospital and clinic services peaks July when most people visit the island.



Source: CIH Administration

POPULATION BY RACE AND ETHNICITY



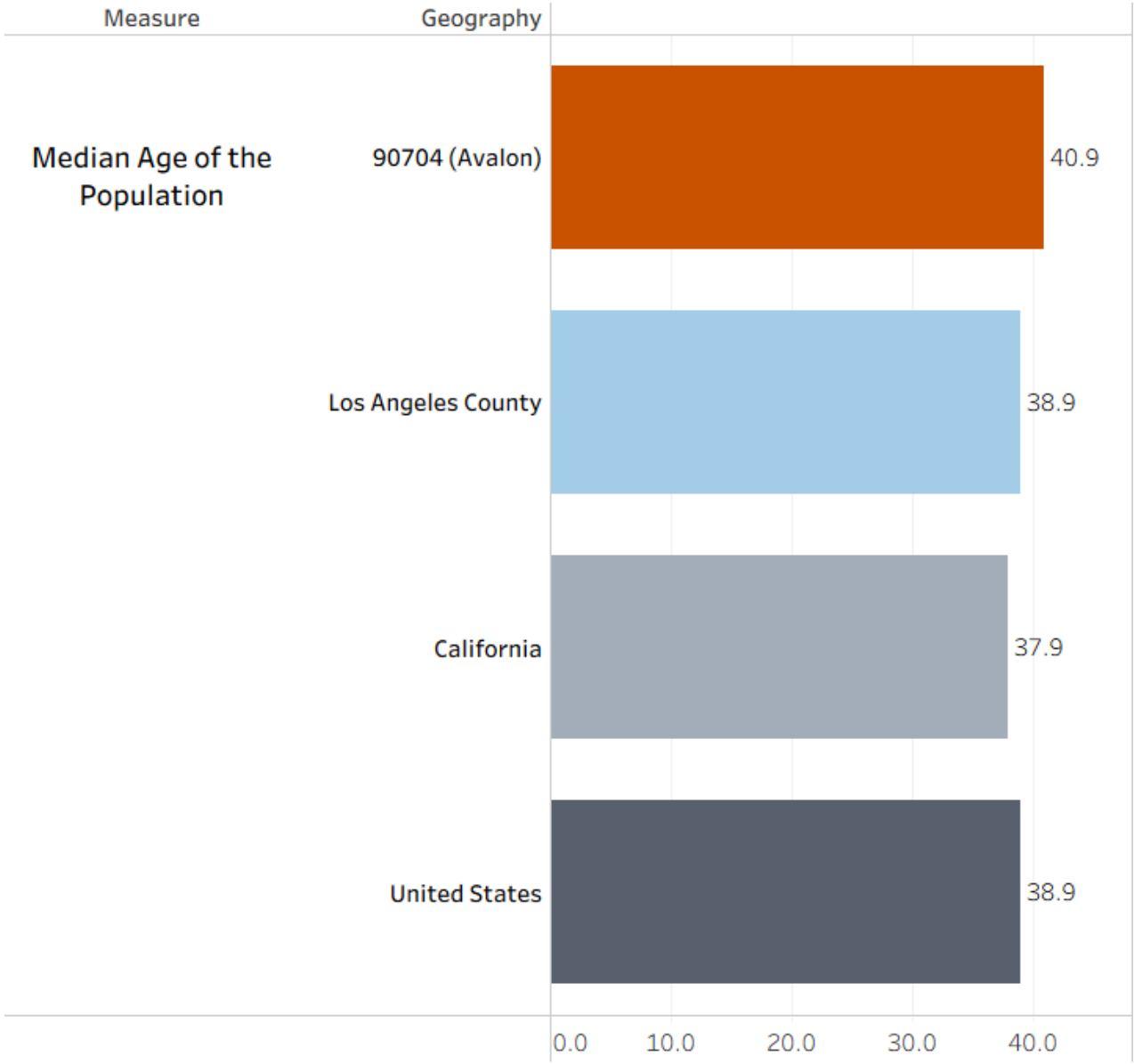
Source: Claritas 2026; Federal Office of Rural Health Policy

- The population on Catalina Island is racially diverse, with under 50% identifying as white, about 30% categorized as "Some other race," and nearly 15% categorized as two or more races.
- Ethnically, a majority of the population (52.9%) is Hispanic.
- CIH makes efforts to provide Spanish-language services for island residents where applicable.
- This statistic is for the Avalon ZIP Code (90704).
- Previous CHNA demographics showed a higher percentage of the white population (54%) and a higher percentage of the Hispanic population (58%).

"Good bilingual staff at the clinic." – Community stakeholder

MEDIAN AGE OF THE POPULATION

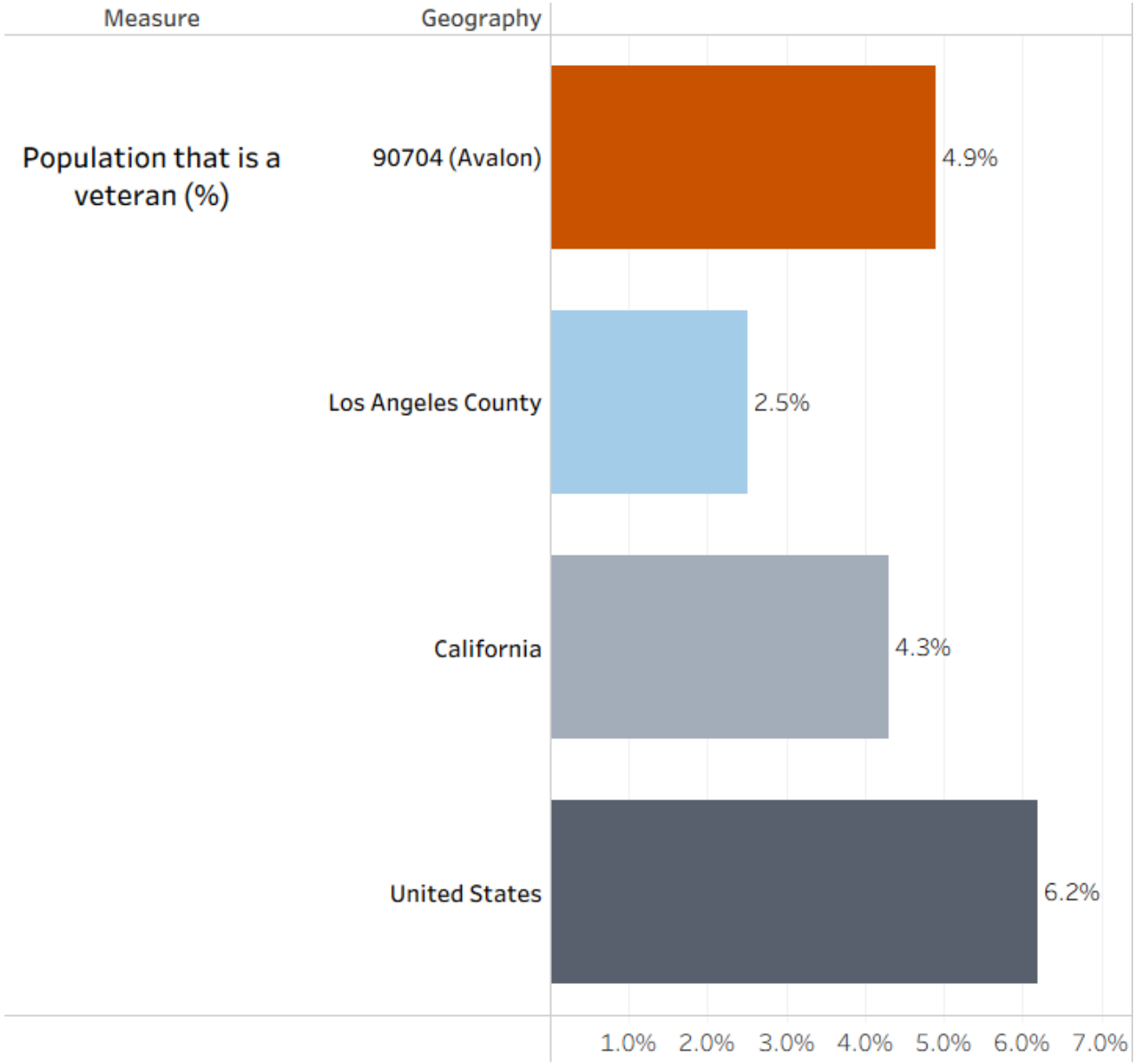
- The median age of the population is 40.9 for the Avalon ZIP Code (90704).
- This is slightly higher than Los Angeles County, California, and the United States, and is reflected in the growth projections for the over-65 population.
- Nationally, most rural areas are older than state and national averages.



Source: Census Reporter Profile
Source Detail: U.S. Census Bureau (2024). American Community Survey 1-year estimates.

VETERAN POPULATION

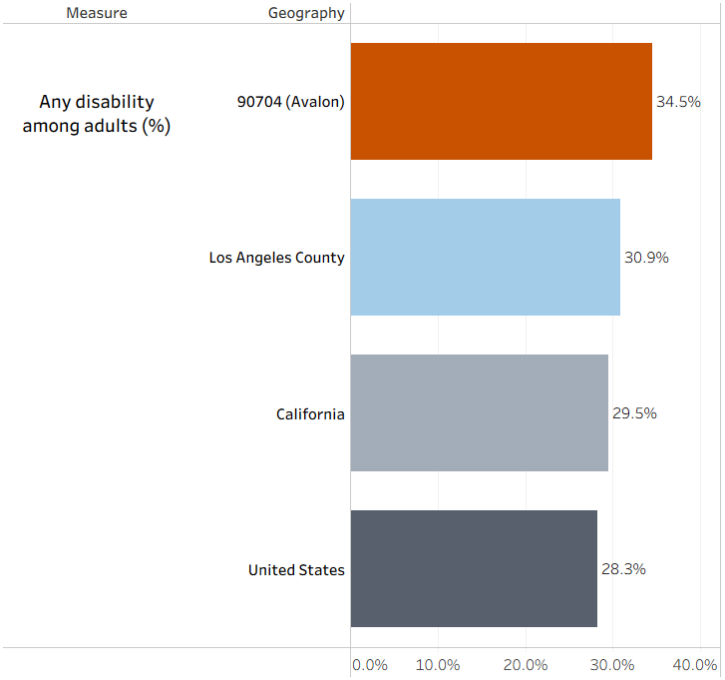
- About 5% of the Catalina Island population is of veteran status, which is nearly twice the Los Angeles County benchmark and closer to the United States percentage.
- Veteran populations can present unique health challenges for providers, but Veterans Administration coverage allows for greater utilization of healthcare services among the population.
- Data for the previous CHNA showed a higher percentage of veterans, at 6.7%.



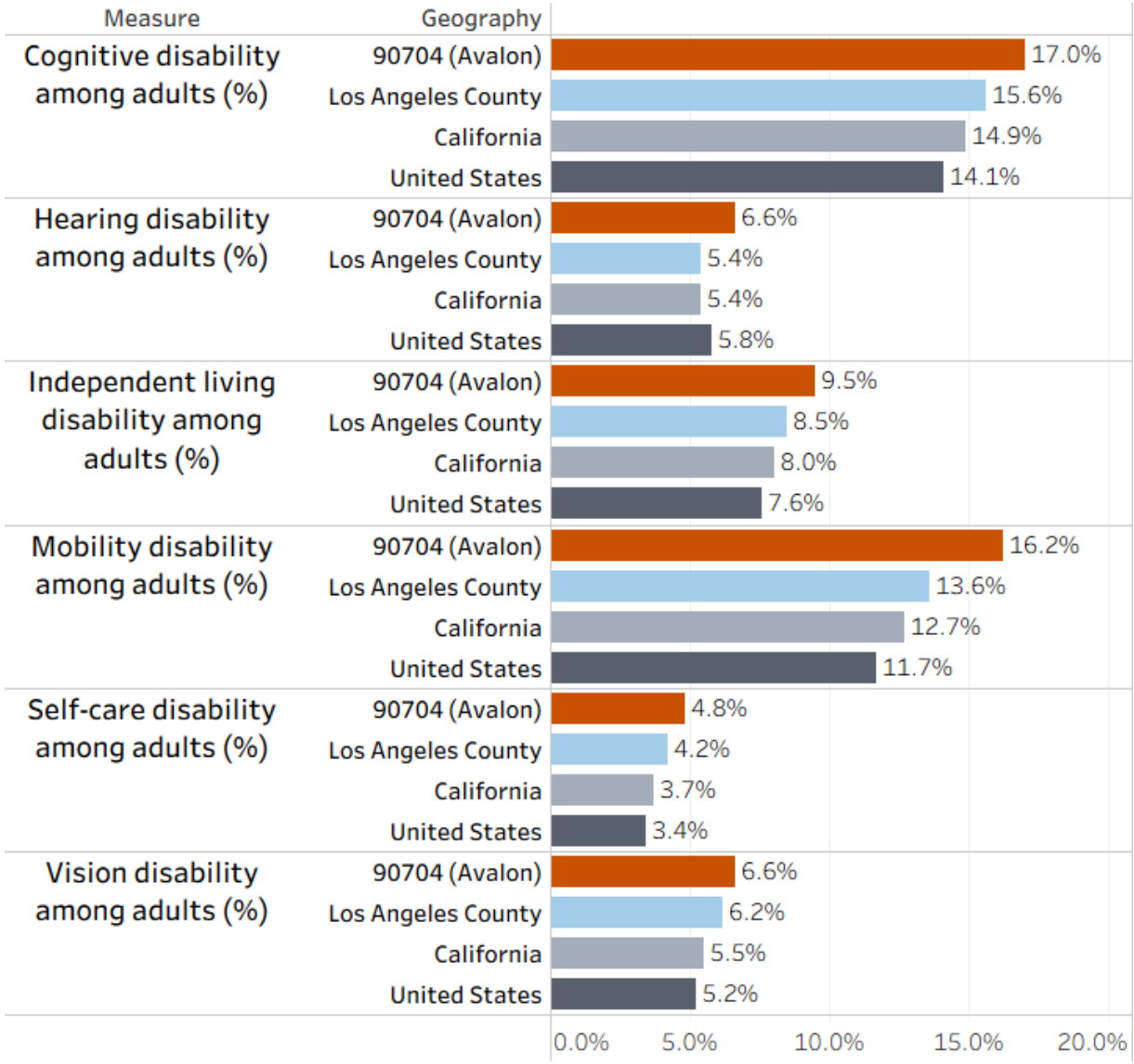
Source: Census Reporter Profile
Source Detail: U.S. Census Bureau (2024). American Community Survey 1-year estimates.

DISABILITY POPULATIONS

- Related to, but not independent of, the veteran population is the percentage of residents with any disability. A higher percentage of adult island residents has any type of disability. Of note are cognitive and mobility disabilities, which exceed state and national averages.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

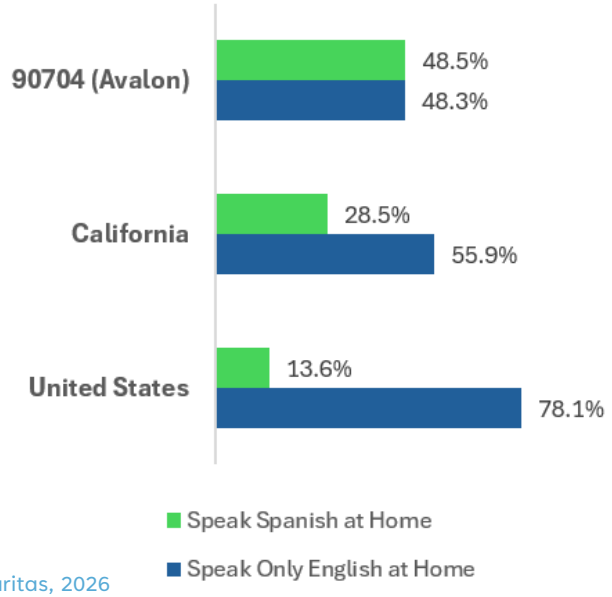


Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

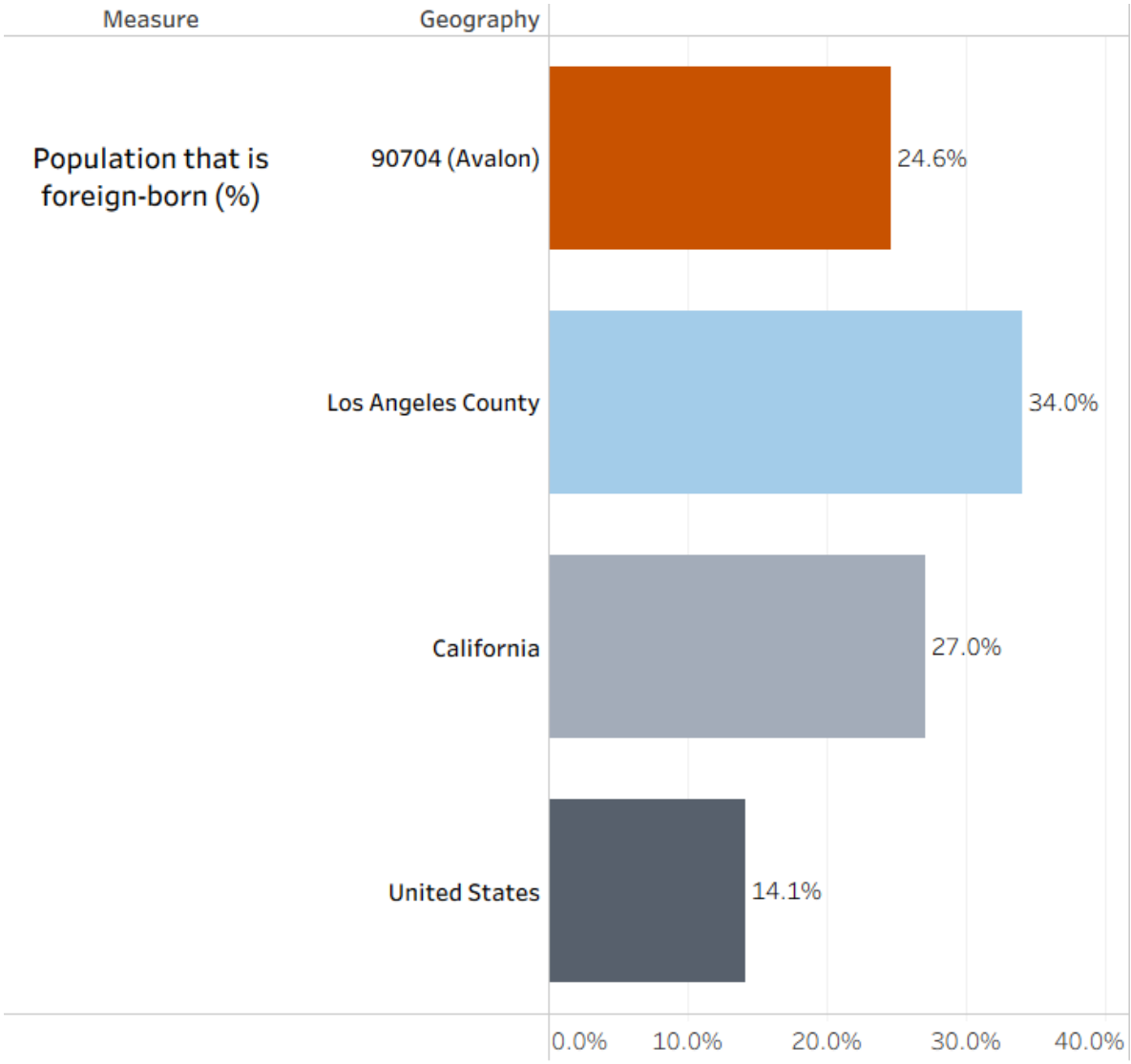
"Physical therapy at CIH is really good." – Community stakeholder

FOREIGN-BORN POPULATION AND LANGUAGES SPOKEN

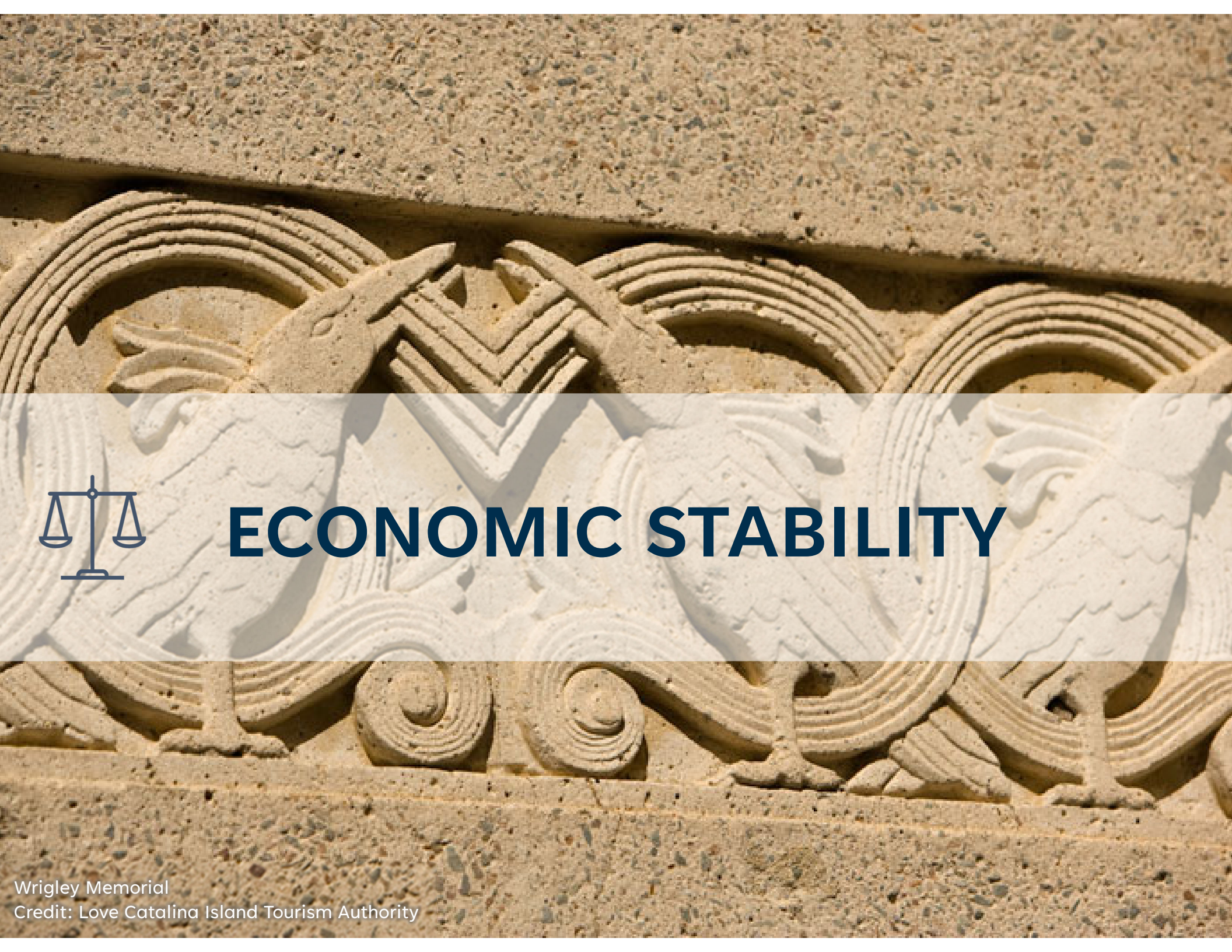
- Foreign-born people make up about a quarter of the island population.
- From a health needs perspective, these populations may need assistance navigating the healthcare system, in addition to translation services.
- Nearly 50% of residents are Spanish-speaking, and less than half of households are English-only speaking.



Source: Claritas, 2026



Source: Census Reporter Profile
Source Detail: U.S. Census Bureau (2024). American Community Survey 1-year estimates.



ECONOMIC STABILITY

Wrigley Memorial
Credit: Love Catalina Island Tourism Authority

ECONOMIC STABILITY

Economic stability examines issues pertaining to income, poverty, and unemployment within a community. Economic stability directly impacts the health of individuals and communities, and lower-income communities are often at greater risk of poor health outcomes. The following statistics were analyzed for Catalina Island.

- Income level
- Poverty level, including children and seniors
- Insurance
- Uninsured adults
- Labor force and employment rate

Key findings include:

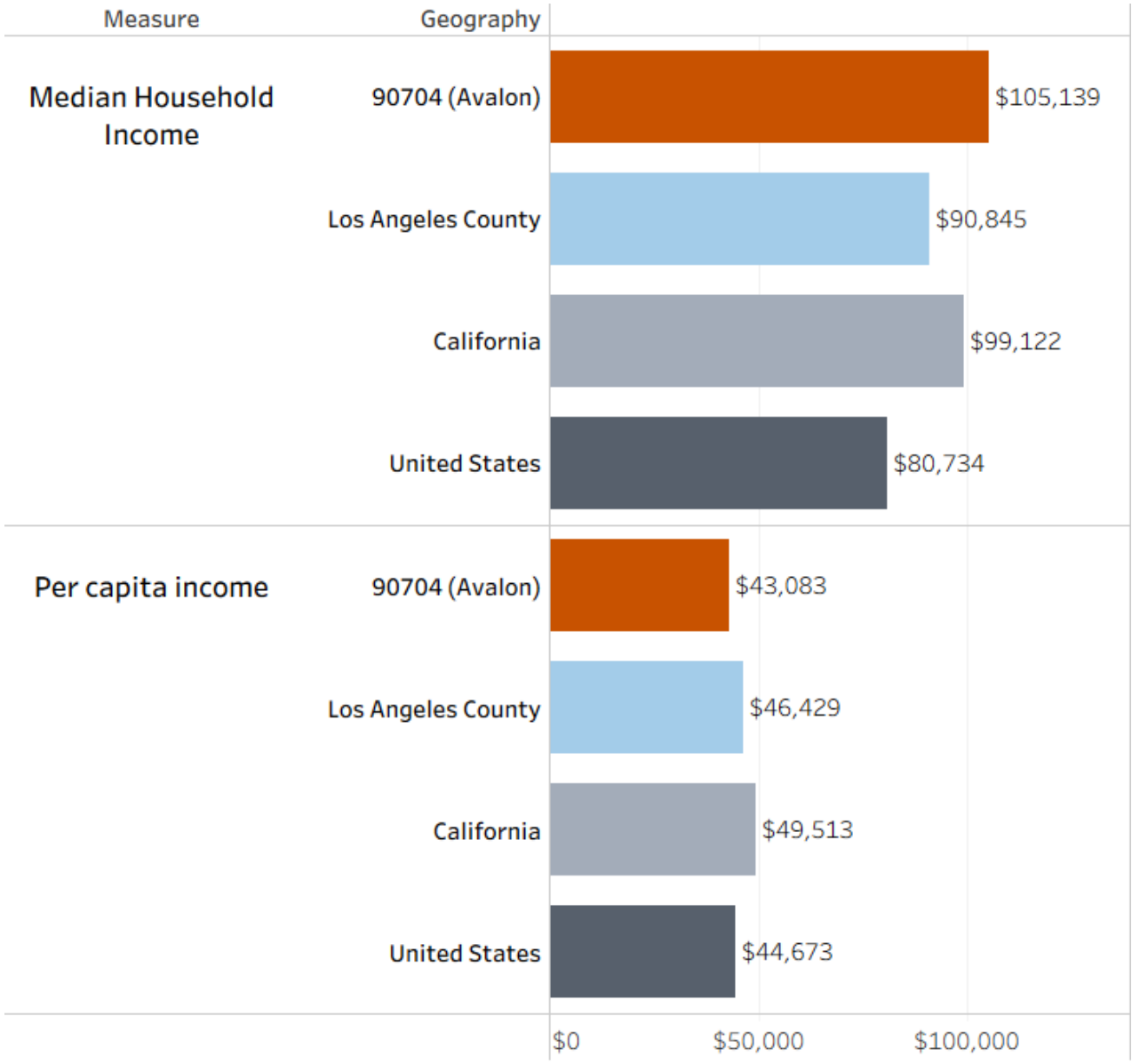
Statistic Analyzed	Key Findings
Income Level	The median household income on the island is high compared to benchmarks at over $105,000, but on a per-capita basis, it is lower than each benchmark.
Poverty Level	Catalina Island has fewer people below the federal poverty line compared to state and national averages, but the percentage of both children and seniors in poverty exceeds those averages.
Insurance	Coverage estimates show that while most residents (48%) currently have private health insurance, that is expected to decline in the next ten years as the aging population transitions to Medicare coverage. The next highest form of insurance behind private is Medicaid (19.1%). Uninsured rates among adults (18-64) are higher than benchmarks. These estimates and projections do not account for recent federal changes to insurance programs. Regardless of coverage, stakeholder interviews indicate there is a lack of clarity among residents as to what insurances are accepted by CIH.
Employment	Labor force data shows that Avalon City at 100% employment, which is an improvement from prior CHNA findings, and likely a result of the post-pandemic recovery of tourism to the island.

INCOME LEVEL

- Median household income for the Avalon ZIP Code is about $15,000 higher than in Los Angeles County, and $5,000 higher than the California median.
- Per capita income, however, is below the United States average, at just over $43,000.

“We have a diverse population, and the clinic does the best they can.”

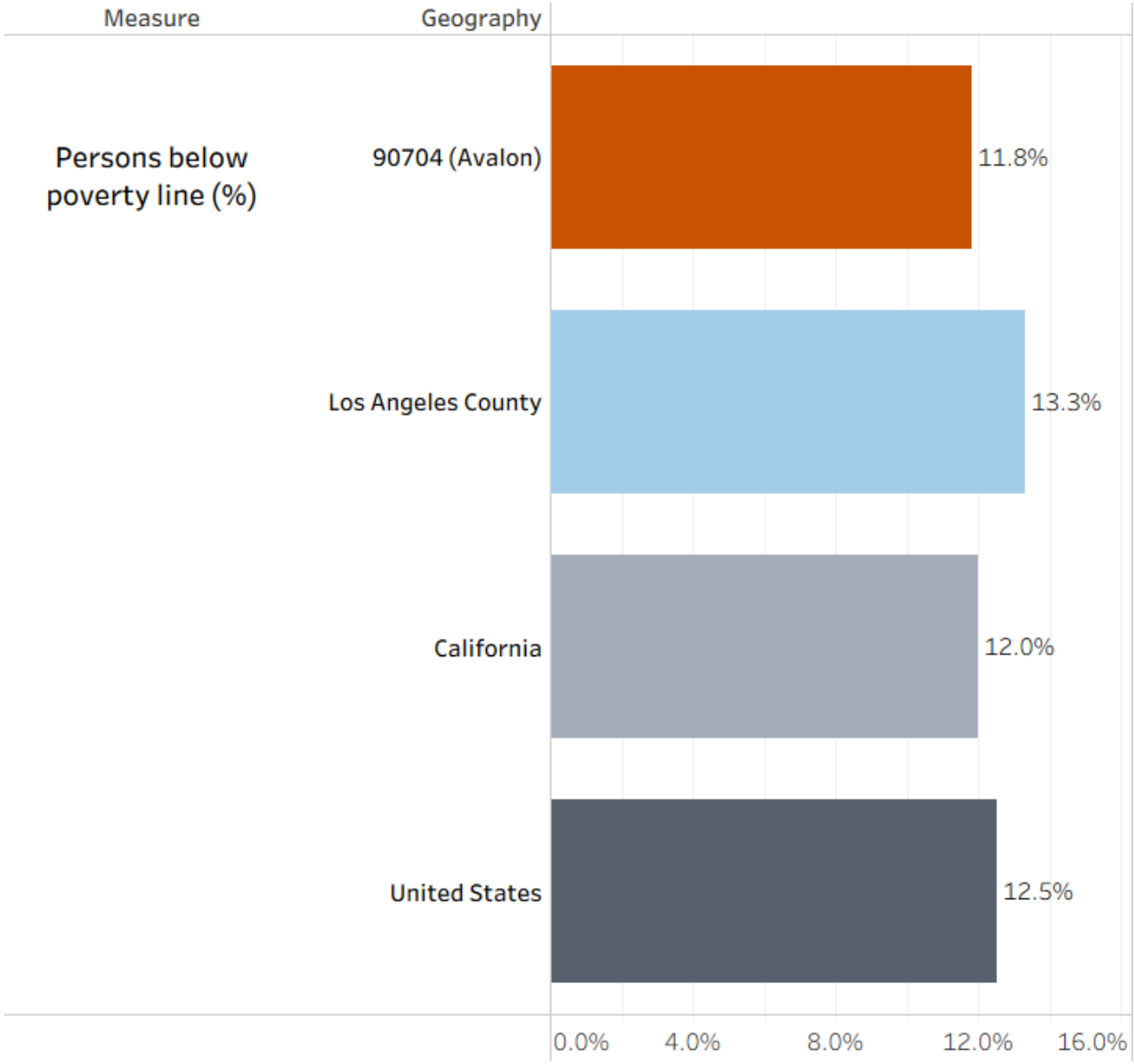
– Community stakeholder



Source: Census Reporter Profile
Source Detail: ACS 2024 5-year

POVERTY LEVEL – TOTAL POPULATION

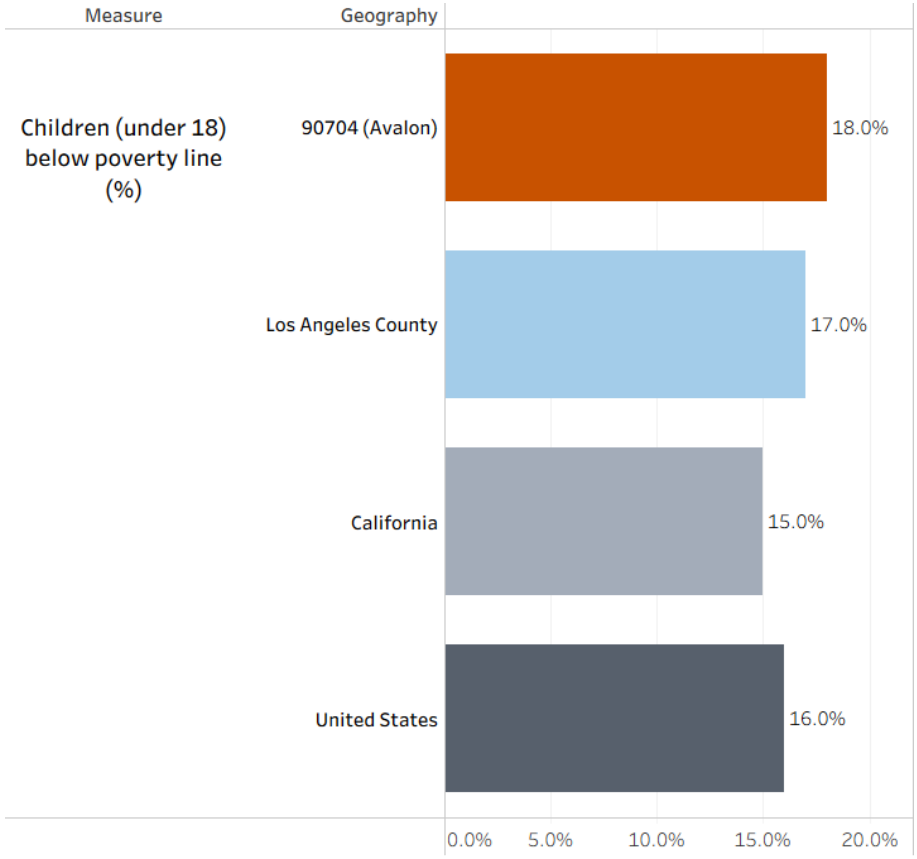
- The island has a lower percentage of persons living below the federal poverty line compared to county, state, and national averages.
- Although lower than benchmarks, these populations still need access to public health options and assistance made available to them, particularly in an isolated island community.
- Compared to 2023 CHNA findings, the overall poverty level on Catalina increased slightly from 11.5% to 11.8%, while Los Angeles County's level declined from 14.2% to 13.3%.



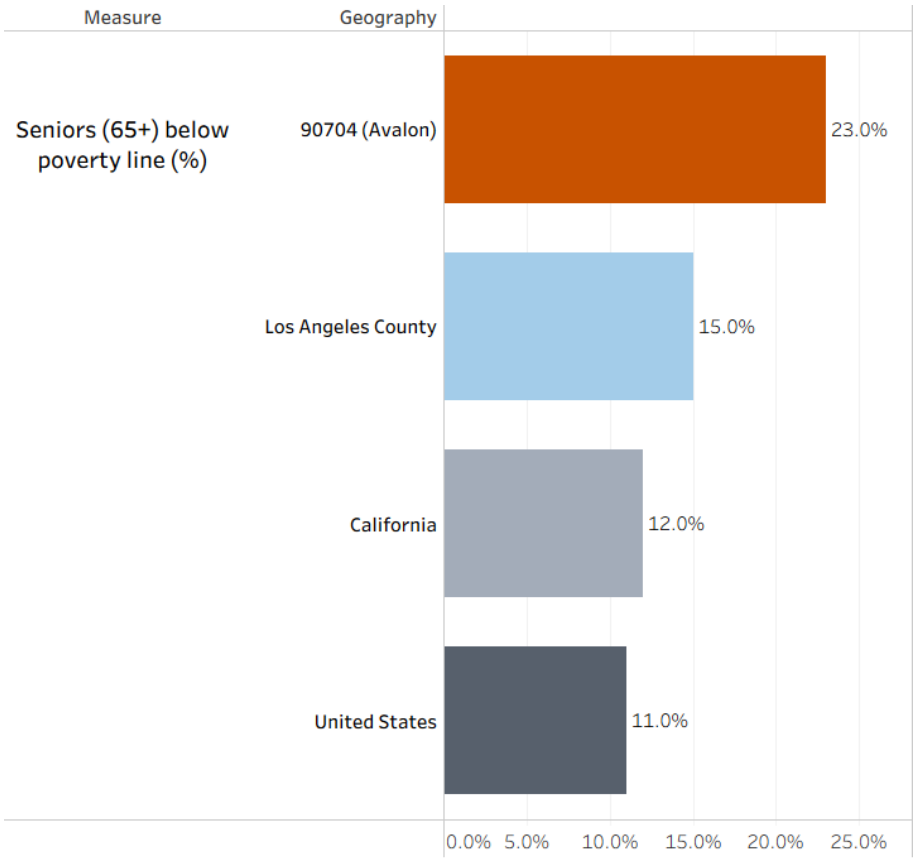
Source: Census Reporter Profile
Source Detail: U.S. Census Bureau (2024). American Community Survey 1-year estimates.

POVERTY LEVEL – CHILDREN & SENIORS

- Poverty levels among the island's children are close to the Los Angeles County benchmark, which is slightly higher than the state and nation. Among seniors, however, the percentage is much greater than the county, state, and national benchmark, with 23% of the population falling below the federal poverty line. Based on current population estimates (680 persons aged 65+), this calculates to 156 full-time senior residents of the island facing poverty.



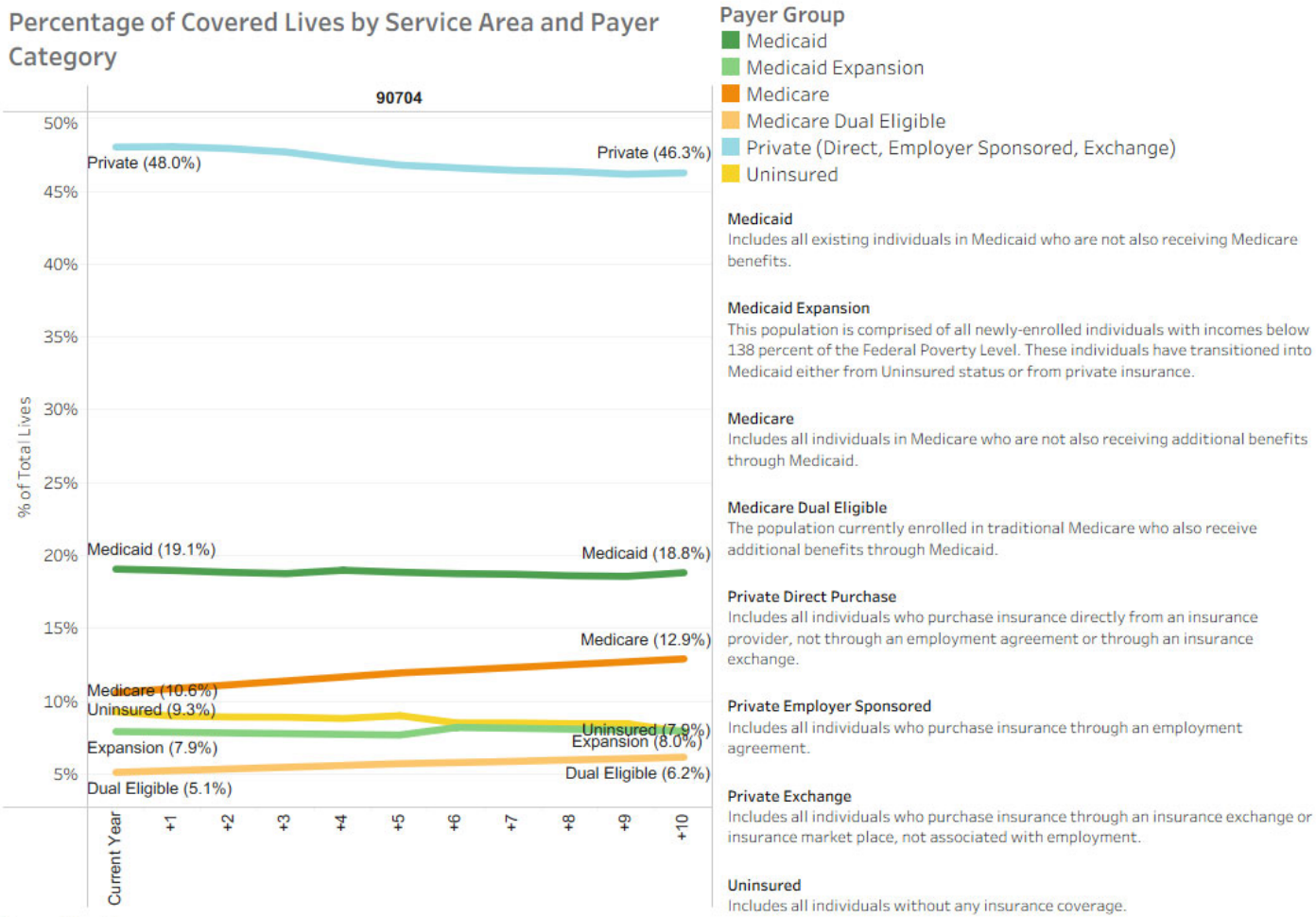
Source: Census Reporter Profile
Source Detail: U.S. Census Bureau (2024). American Community Survey 1-year estimates.



Source: Census Reporter Profile
Source Detail: U.S. Census Bureau (2024). American Community Survey 1-year estimates.

INSURANCE COVERAGE ESTIMATES

- The graph below shows estimated percentages of persons by insurance coverage type (Payer Group) for the Avalon ZIP Code (90704) and expected changes over 10 years, not accounting for changes in policies or coverage state-wide or nationally.
- Nearly half of the population (48%) is estimated to have private health insurance coverage. Medicaid (Medi-Cal) is second at 19.1%, followed by Medicare (10.6%).
- Medicare coverage percentages are expected to increase to 12.9% as that population cohort expands.

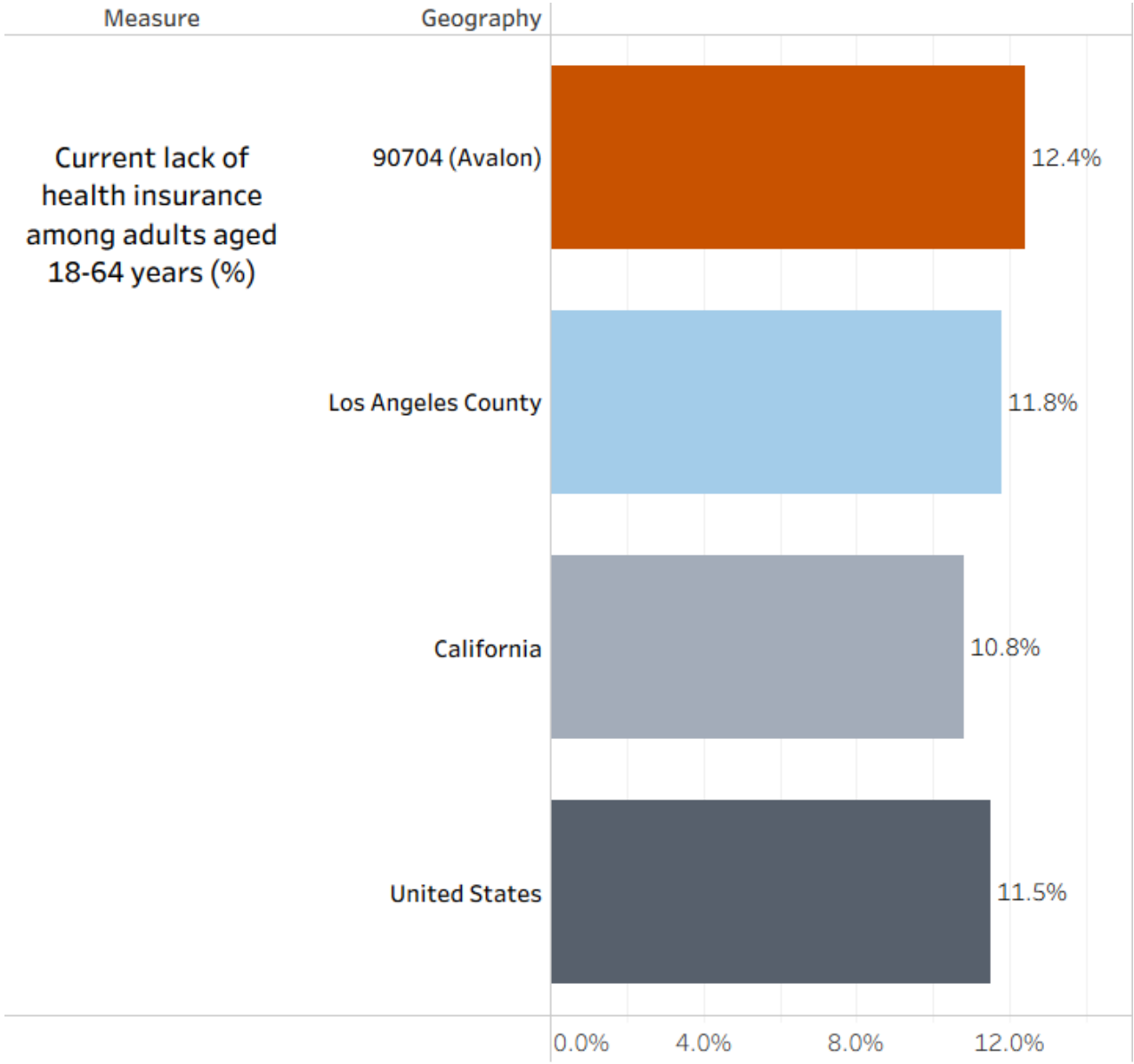


Source: Merative

"The clinic doesn't accept my insurance. We hear that a lot in the ED."
– Community stakeholder

UNINSURED ADULTS

- Children and senior populations have public options for health insurance coverage, such as Children's Health Insurance Programs (CHIP) or Medicare.
- Among adult island residents between the ages of 18-64, 12.4% currently lack any health insurance coverage, exceeding county, state, and national benchmarks.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

LABOR FORCE AND UNEMPLOYMENT RATE

- According to annual average data from the California Employment Development Department (March 2026), Avalon City was at full employment as of 2024, compared to the Los Angeles County unemployment rate of 5.8%.
- Avalon City has a labor force of about 1,900 people, which includes all people over 16 who are either employed or unemployed.
- Recent visitor trends, which are a key driver of the island's employment base, show an increase in visits and economic activity compared to the pandemic-era of 2021 and 2022.

Monthly Labor Force Data for Cities and Census Designated Places (CDP)
Annual Average 2024 - Revised
Data Not Seasonally Adjusted

Area Name	Labor Force	Employ-ment	Unemployment Number	Unemployment Rate	Census Ratios Emp	Census Ratios Unemp
Los Angeles County	5,109,800	4,812,600	297,200	5.8%	1.000000	1.000000
Avalon city	1,900	1,900	0	0.0%	0.000401	0.000000

CDP is "Census Designated Place" - a recognized community that was unincorporated at the time of the 2019-2023 5-Year American Community Survey (ACS).

Notes:
1) Data may not add due to rounding. All unemployment rates shown are calculated on unrounded data.
2) These data are not seasonally adjusted.

Source: Labor Force and Unemployment Rate for Cities and Census Designated Places California Employment Development Department, March 2026

	90704 (Avalon)	California	United States
Average Travel Time, Workers Worked Away From Home	12 min	31 min	29 min

Source: Claritas, 2026

"This is a high-end community, but most work two or three jobs."
– Community stakeholder

NEIGHBORHOOD AND PHYSICAL ENVIRONMENT

Catalina Island Golf Cart Rental
Credit: Love Catalina Island Tourism Authority

NEIGHBORHOOD AND PHYSICAL ENVIRONMENT

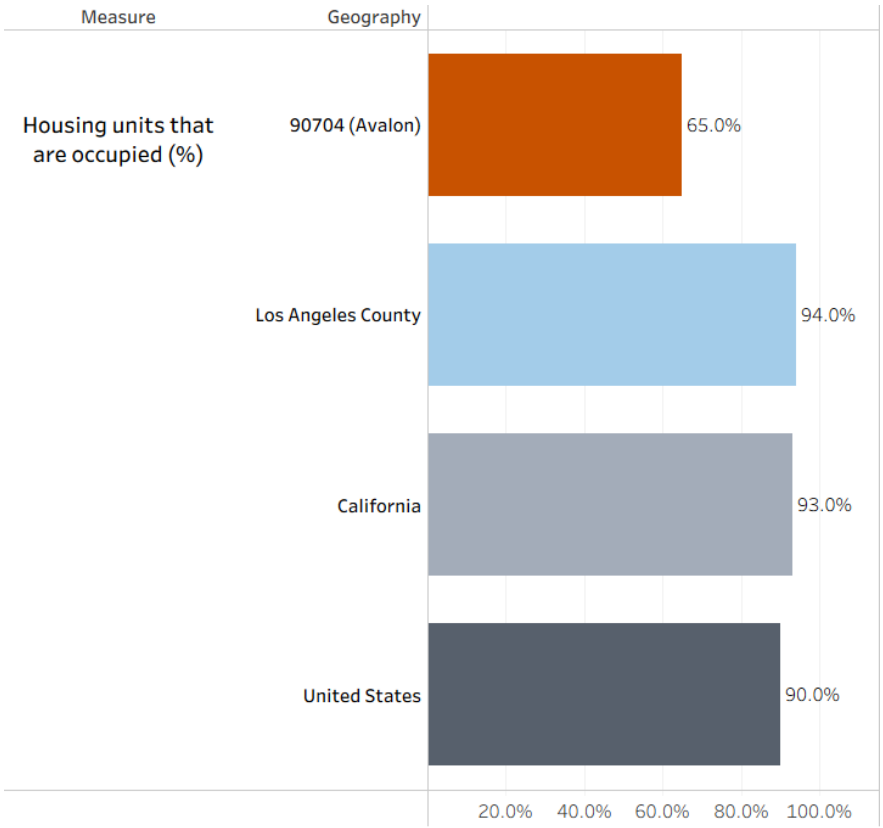
Where individuals live and how they access care are critical to the overall health of a community. Insufficient housing directly leads to poor health outcomes, as it can expose individuals to harsh environmental conditions. The availability of public transportation enables the community to access not only health services but also proper food sources. The following statistics were examined for Catalina Island:

- Housing Occupancy
- Housing Insecurity and Vacancy
- Housing Costs and Value
- Utility Costs
- Broadband and Transportation

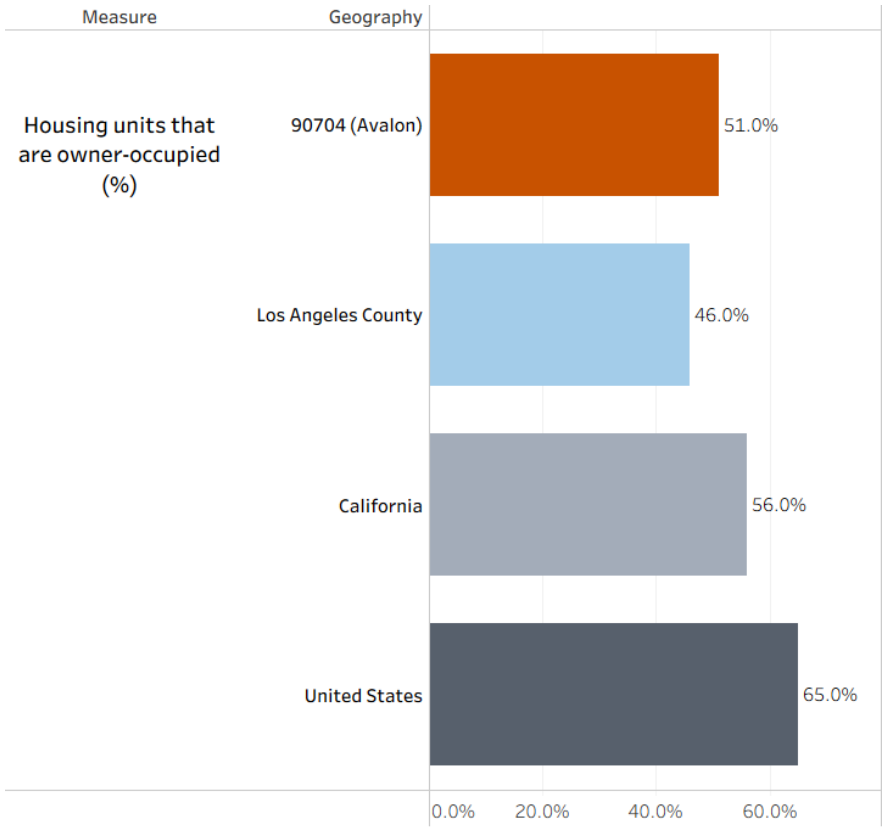
Statistic Analyzed	Key Findings
Housing Vacancy	35% of housing units on Catalina Island are unoccupied, reflecting a strain on housing resources for residents and workers, who report higher than state and national averages of housing insecurity.
Housing Costs and Value	Median home values are 10% higher than Los Angeles County, 25% higher than California, and 50% higher than the United States benchmark.
Utility Costs	Resident's utility costs are not markedly greater than benchmarks. However, these data do not reflect recent increases in costs.
Broadband	The island has high rates of broadband internet access in households compared to state and national averages, which is an important factor as CIH works to expand telehealth services to residents, but it becomes slow and/or unstable at peak seasons. An undersea fiber cable between the island and Huntington Beach is scheduled to be completed in three years.
Transportation	Transportation access for island residents is in line with the rest of Los Angeles County, but transportation burdens become more pronounced when accessing off-island healthcare services, many of which require a significant time and cost commitment.

HOUSING OCCUPANCY

- Housing availability and affordable housing on Catalina Island are challenges for residents, as expressed in one-on-one interviews and reflected in statistical data. Only 65% of housing units in the Avalon ZIP Code are occupied at any time. These percentages are much lower than those in Los Angeles County, the state, and the national average. However, rental units (non-owner-occupied) percentages are closer to county and state benchmarks. This suggests a number of unoccupied homes (likely second homes or vacation rentals) that are not available as full-time rental units.



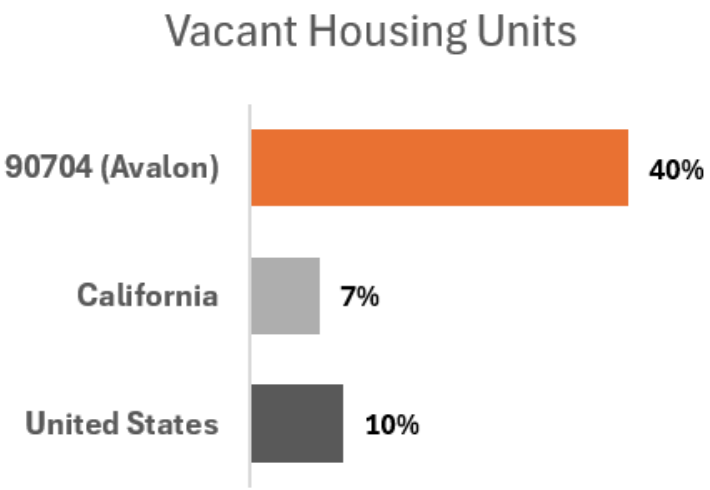
Source: Census Reporter Profile
Source Detail: U.S. Census Bureau (2024). American Community Survey 1-year estimates.



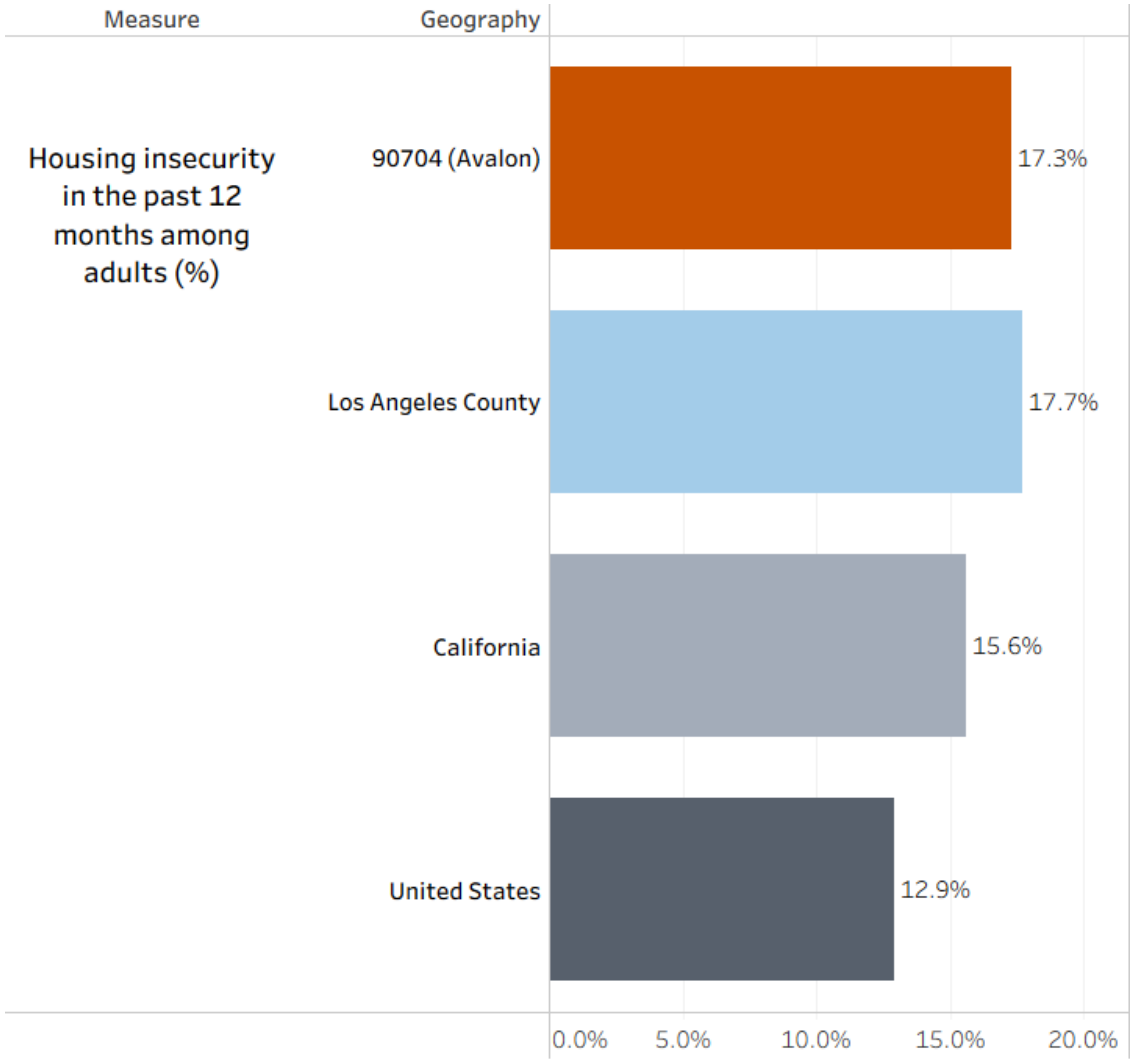
Source: Census Reporter Profile
Source Detail: U.S. Census Bureau (2024). American Community Survey 1-year estimates.

HOUSING VACANCY AND INSECURITY

- 40% of the island's housing units are vacant at any time. This has increased from 33% in prior CHNA findings. Too many vacation rentals and second homes leave fewer housing options for families and individuals who live and work full-time on Catalina Island.
- Housing insecurity among adults in the Avalon ZIP Code is aligned with Los Angeles County but above state and national percentages.



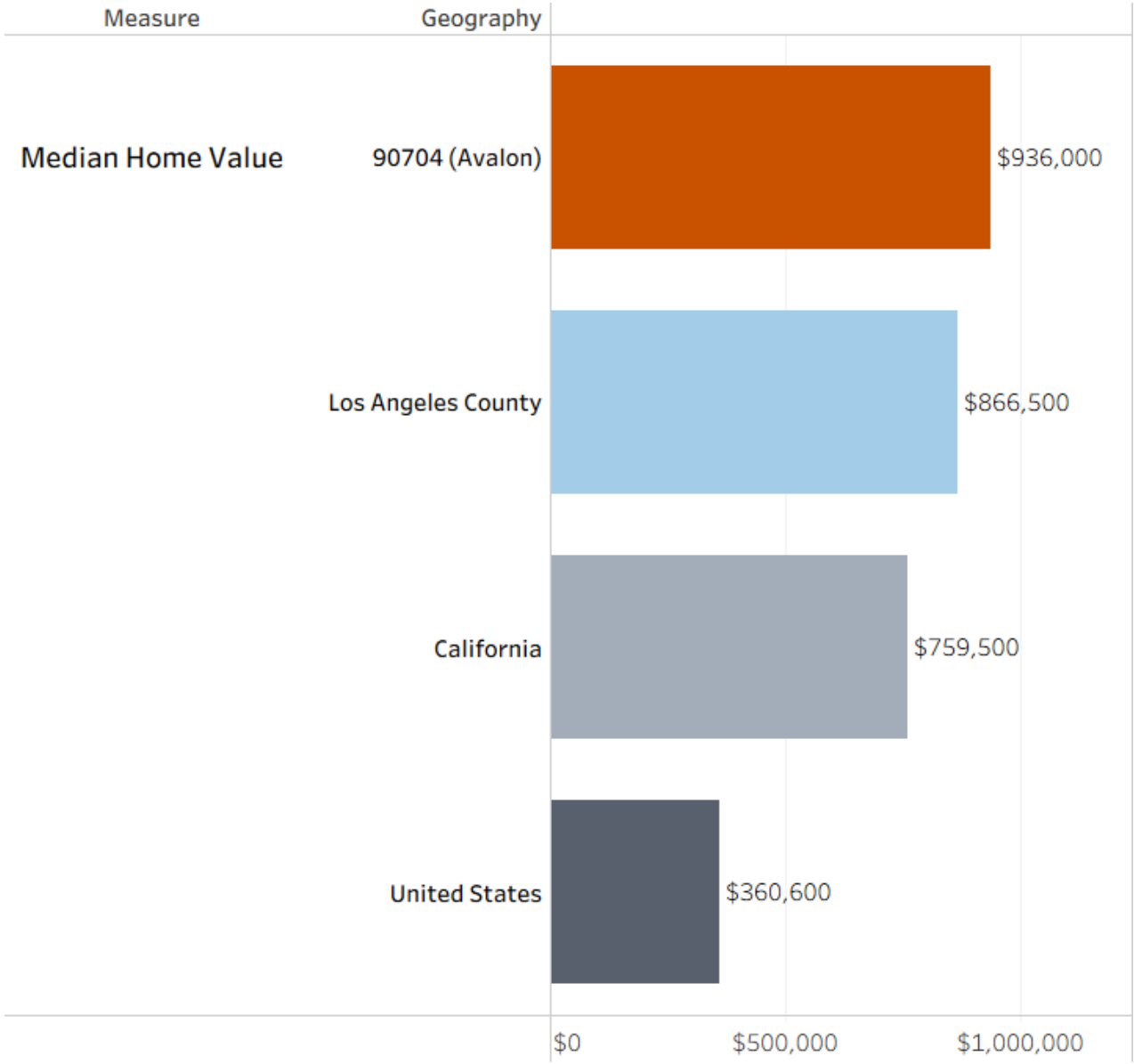
Source: Claritas, 2026



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

HOUSING COSTS AND VALUE

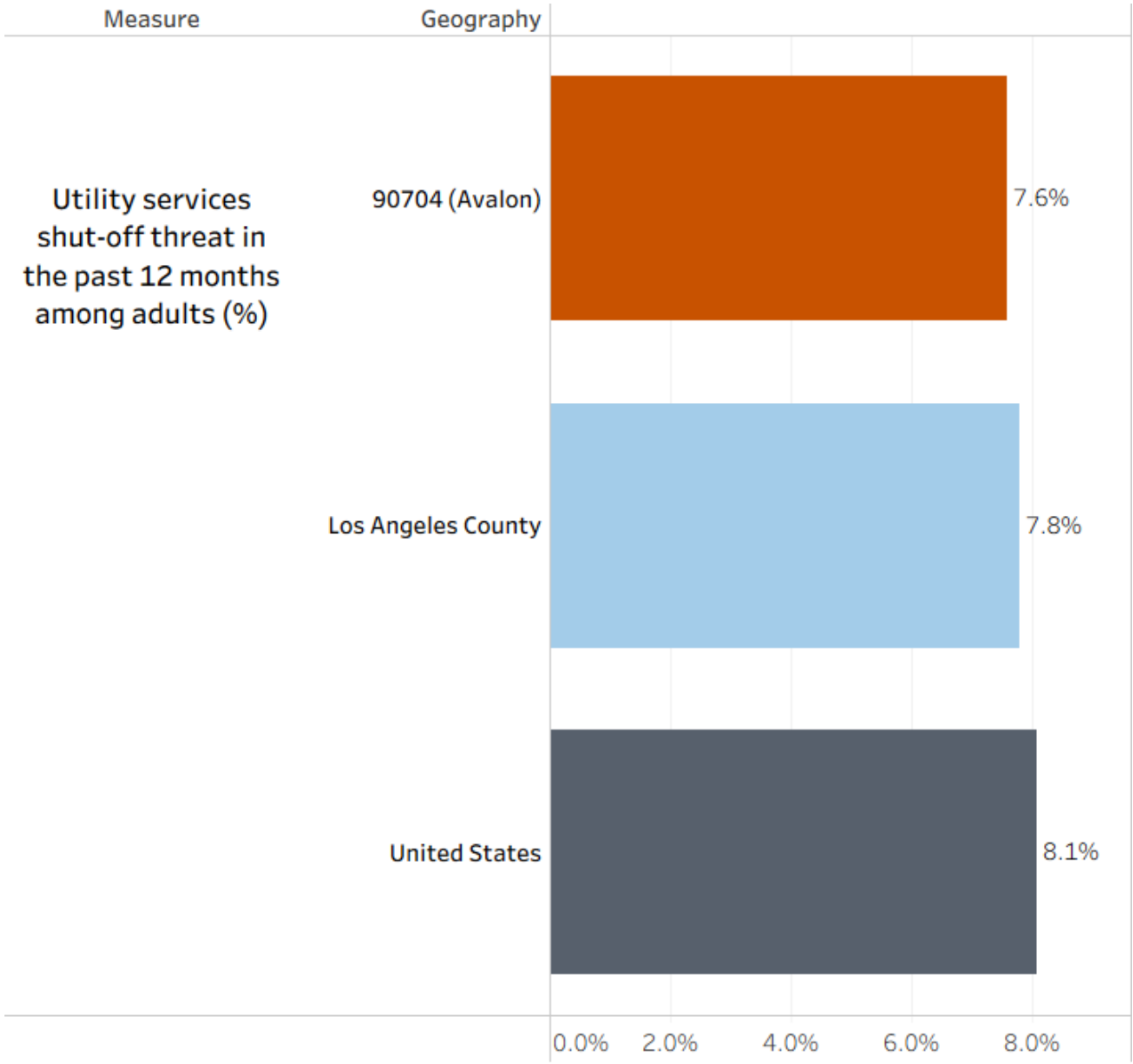
- Affordable housing is a key issue when it comes to the recruitment of new health professionals to the area, including clinical support staff, advanced practice providers, and physicians.
- The median home value on Catalina Island is $936,000.
- For comparison, the median value is 8% higher than the Los Angeles County median, 23% higher than the state median, and nearly three times higher than the United States median home value.



Source: Census Reporter Profile
Source Detail: U.S. Census Bureau (2024). American Community Survey 1-year estimates.

UTILITY COSTS

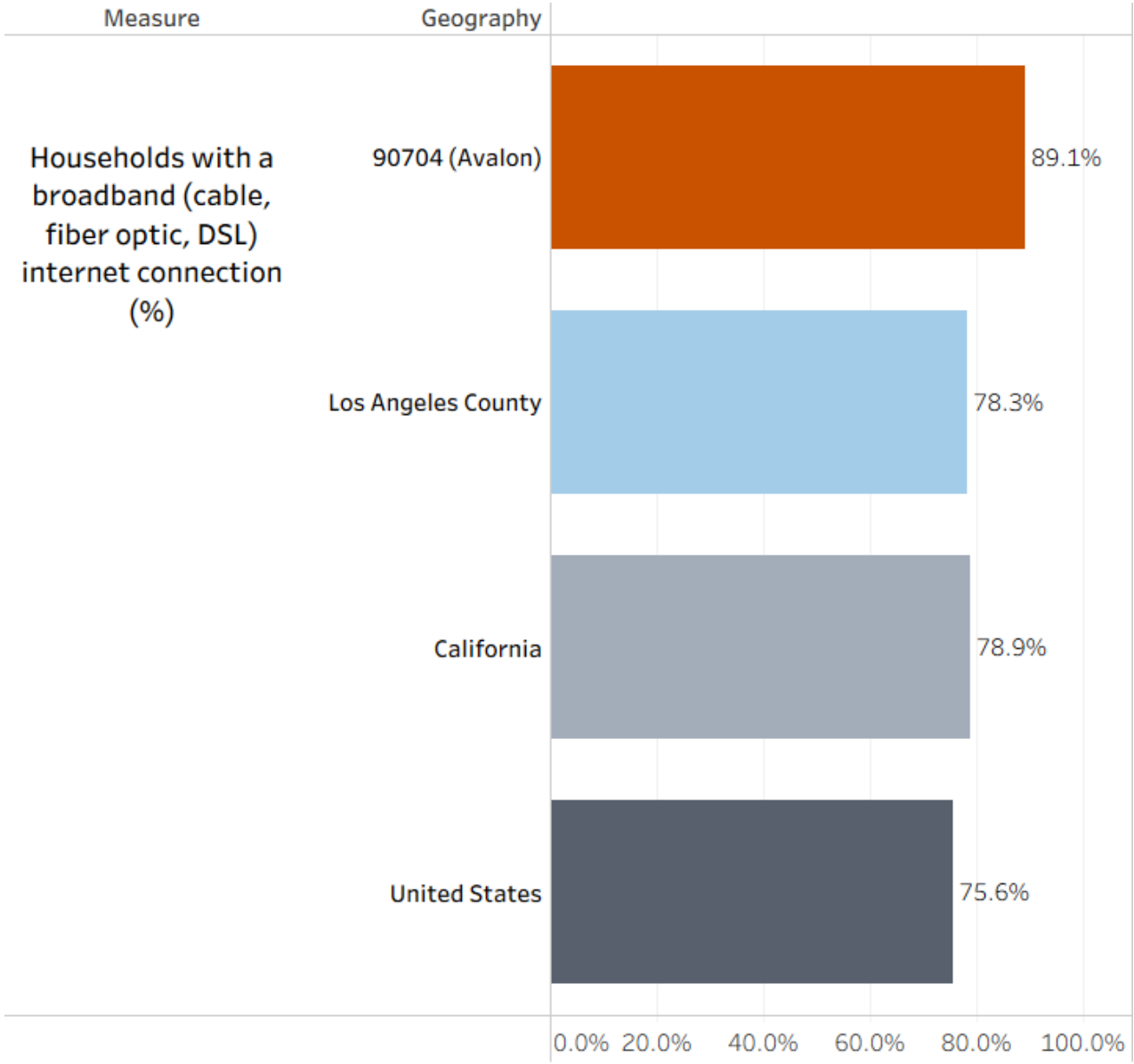
- Just under 8% of Catalina Island residents face the threat of having their utilities suspended for nonpayment.
- Stakeholder interviews indicate that higher living costs in general are a challenge on Catalina Island, such as prices for gasoline and groceries.
- The benchmark data do not reflect recent utility costs, which are increasing.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

BROADBAND ACCESS

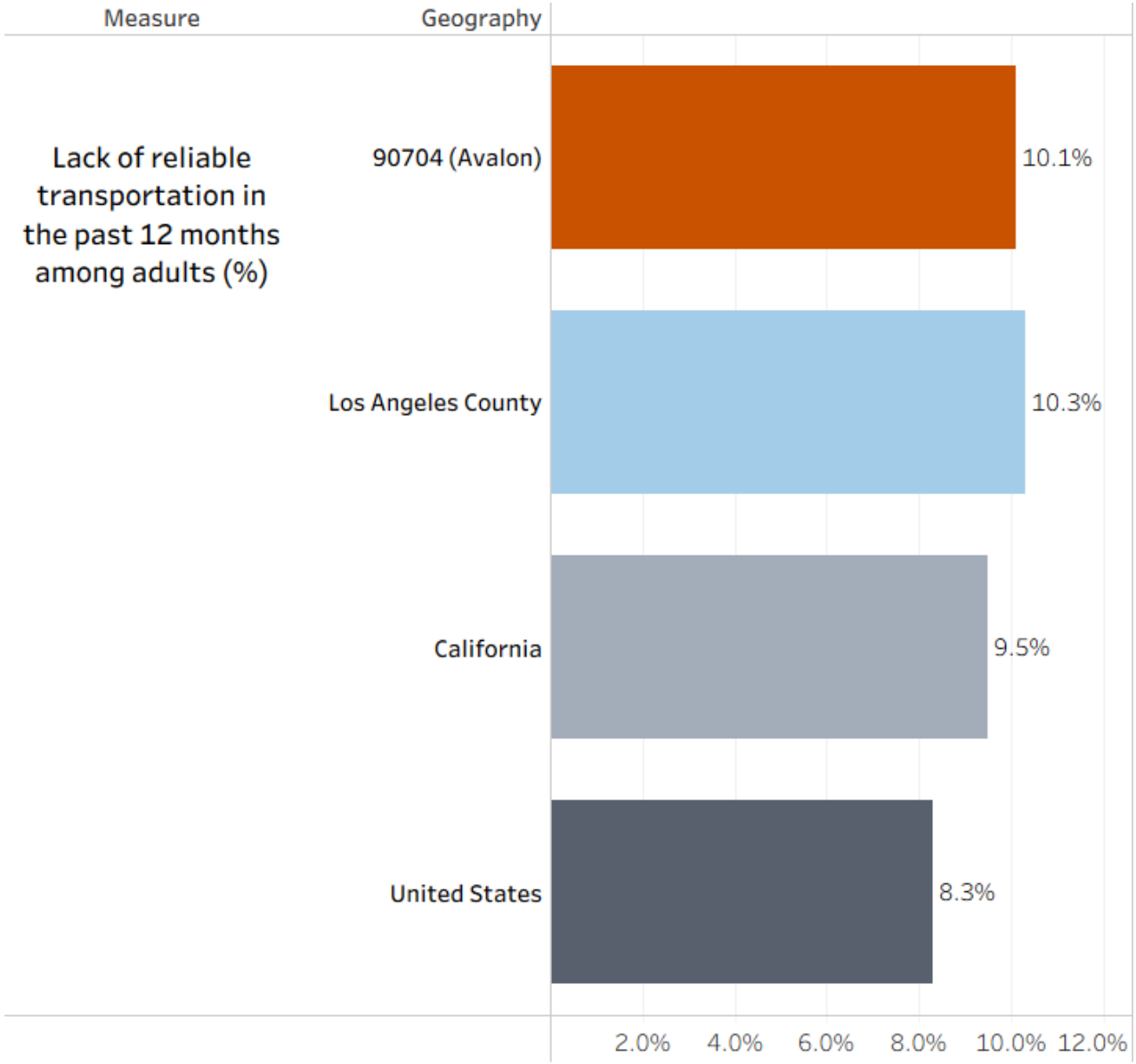
- The island has a higher percentage of households with some form of broadband internet connection than local and national benchmarks.
- Broadband internet is a key factor in an island community for healthcare access, as reliable connections are required for telehealth services. Since the previous CHNA, CIH, along with other advocate groups on the island, has successfully lobbied for more secure, reliable, and private internet connectivity.
- In December of 2025, the California Public Utilities Commission approved funding for an undersea fiber cable connecting Avalon to Huntington Beach, to be completed in 3 years.



Source: U.S. Census Bureau
Source Detail: Internet Subscriptions in Household American Community Survey 5-year estimates (2020-2024)

TRANSPORTATION

- Over 10% of Catalina Island residents lack reliable transportation, which may reflect transportation barriers presented by island life, including the time and cost associated with ferrying off-island for healthcare and other services.
- A key theme among interviewees was the difficulty of off-island transport for emergency services. The helicopter is the quickest, most direct form of emergency transport, but flights are often limited by weather, time of day, or other visibility issues, and the ferry service is not equipped for medical transport of non-stable patients.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

EDUCATION

Ruzak Vinyard
Credit: Love Catalina Island Tourism Authority

EDUCATION

Education has been shown to be directly linked to the health of an individual or a community. Higher education correlates with higher income, better health behavior education, and greater access to healthcare services. The following statistics were examined for Catalina Island:

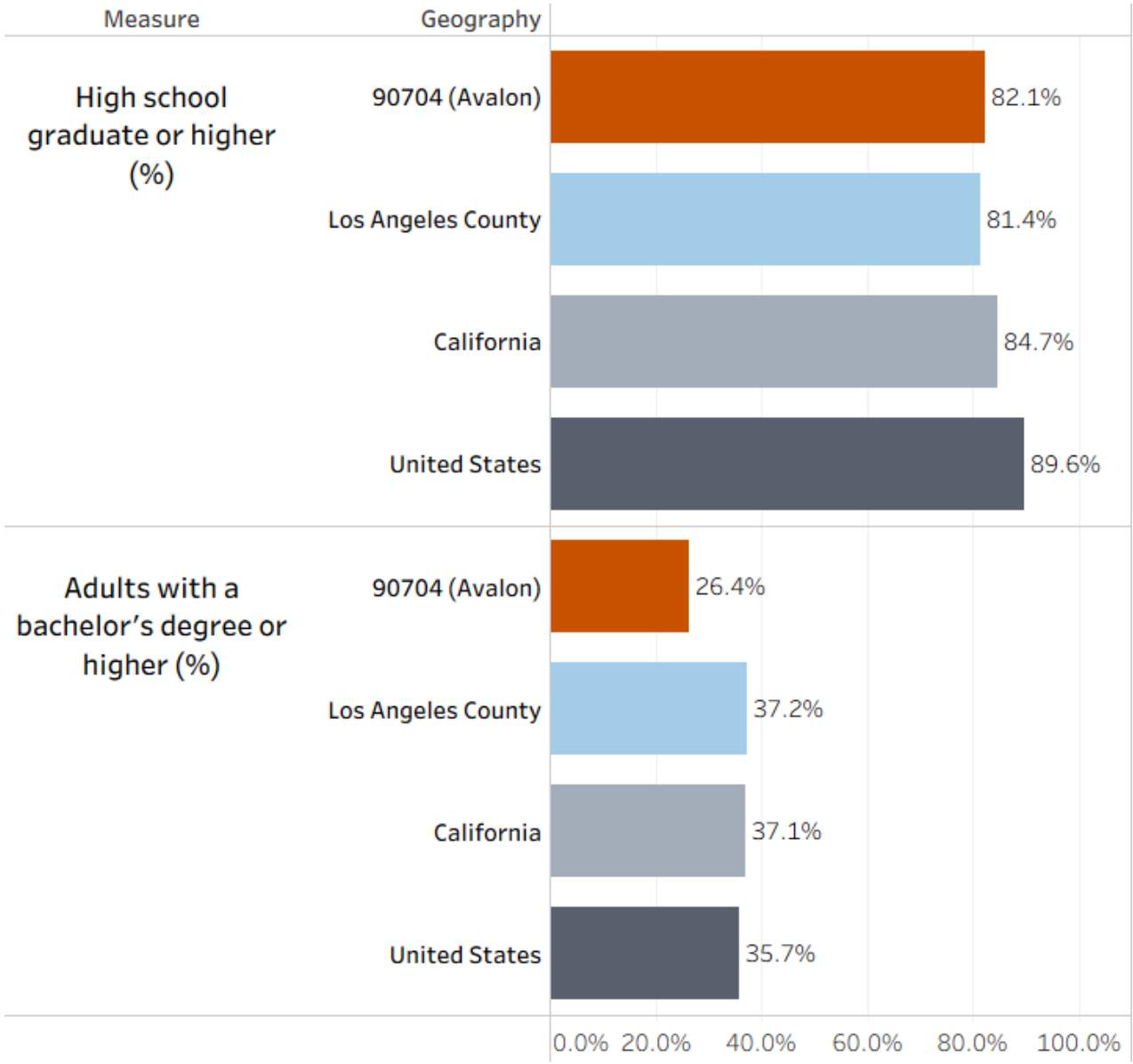
- Educational Attainment
- Preschool and College Enrollment
- Absence Rate
- Graduation Rate
- Suspension Rate

Key findings include:

Statistic Analyzed	Key Findings
Education Attainment	Over 82% of Catalina Island residents have at least a high school education, which is lower than state and national averages. Fewer island residents have post-high school education, compared to state and national averages.
Preschool and College Enrollment	Over 5% of island children are enrolled in preschool/nursery, which exceeds state and national averages, but college enrollment is below average.
Absence Rate	The chronic absence rate among Avalon TK-12 School students is high at 37.6% vs. 17.1% for all California school students, and has increased by 3.9% from the prior year, which the California percentage has declined by 1.5%. The post-pandemic high was over 53% in 2022.
Graduation Rate	The island's school graduation rate has stayed close to the state benchmark, with over 85% of students graduating.
Suspension Rate	Avalon TK-12 schools have had declining rates of student suspensions since a high of 5.9% in 2019, and current rates are below the California benchmark.

EDUCATIONAL ATTAINMENT

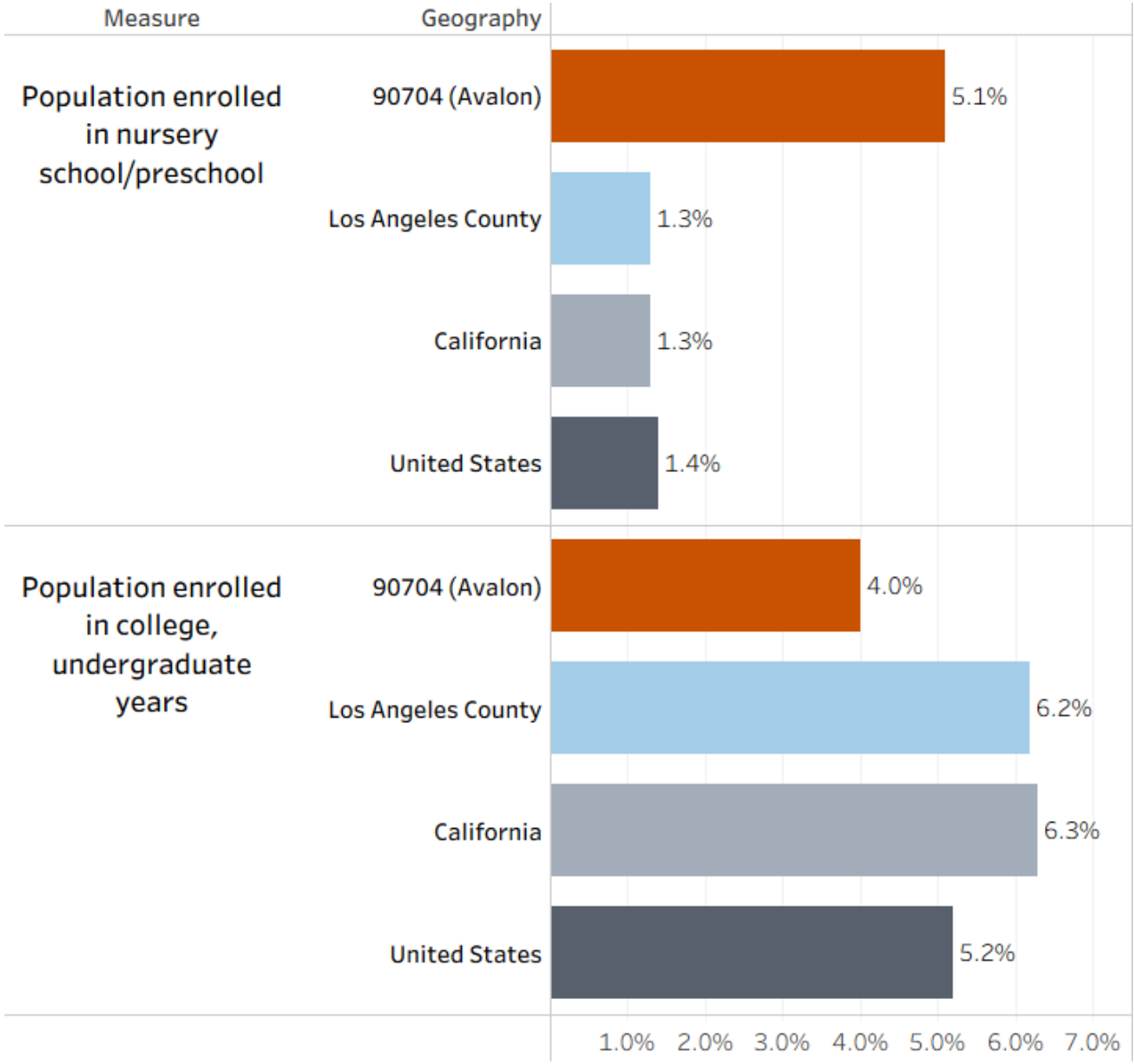
- Over 82% of Catalina Island residents have at least a high school education, which is lower than state and national averages.
- Fewer island residents have post-high school education compared to state and national averages.



Source: Census Reporter Profile
Source Detail: U.S. Census Bureau (2024). American Community Survey 1-year estimates.

PRESCHOOL AND COLLEGE ENROLLMENT

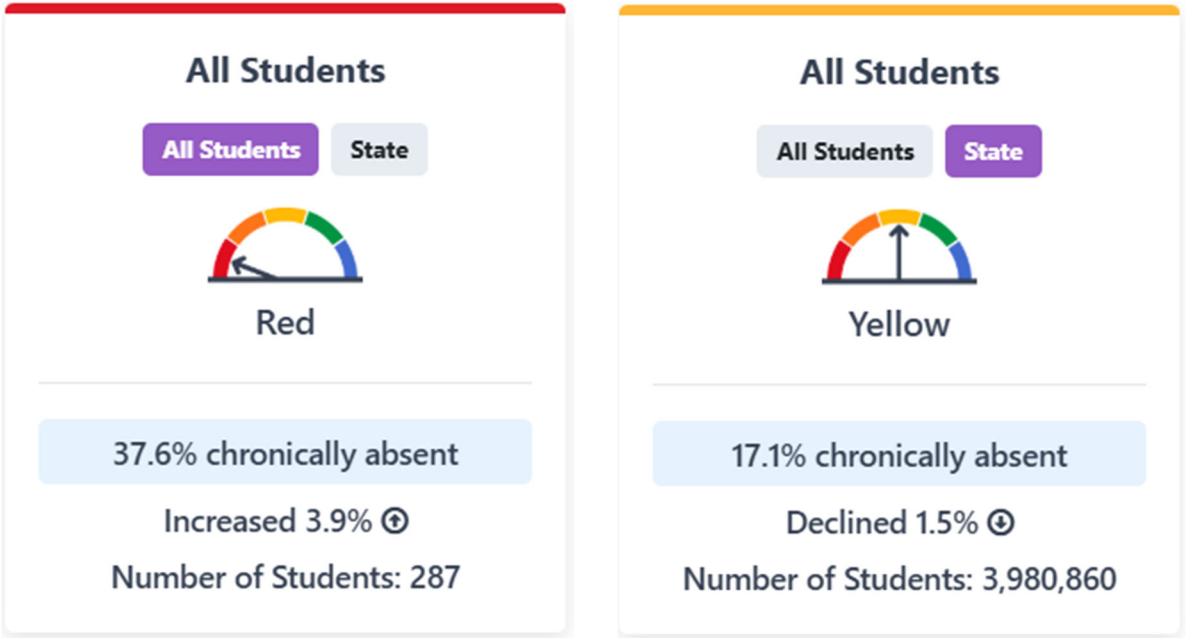
- Early education enrollment percentages for Catalina Island children greatly exceed state and national averages, with over 5% of the population enrolled in a nursery school/preschool.
- For older children, however, the percentages fall below averages, with only 4% of the population enrolled in college compared to 6.2% in Los Angeles County, 6.3% in California, and 5.2% in the United States.
- Early education plays an important role in establishing good lifelong healthy habits and presents an opportunity for CIH to partner with school providers on nutrition, exercise, and other health-related programs.

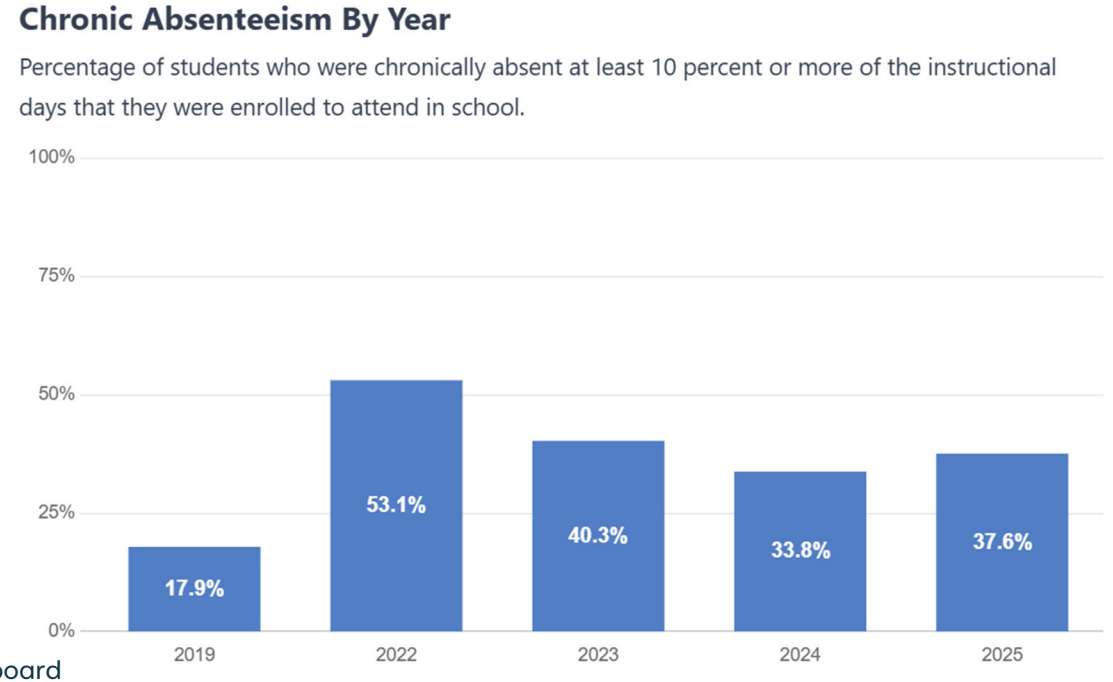


Source: Census Reporter Profile
Source Detail: U.S. Census Bureau (2020-2024). School Enrollment by Level of School for the Population 3 Years and Over American Community Survey 5-year estimates.

EDUCATION – CHRONIC ABSENCE RATE

- Avalon TK-12 School, part of the Long Beach Unified School District, shows a rate of 37.6% of chronically absent students in 2025. This is an increase of 3.9% from the prior year, although the rate was trending downward from a post-pandemic high of 53.1%.
- For comparison, the state of California rate was 17.1% for 2025, which was a 1.5% decline from the prior year.
- Post-pandemic absenteeism continues to be a challenge for many school districts in the United States. From a health needs perspective, absent students miss regular health education and can fall below the radar of school personnel, who might overlook emerging health needs.

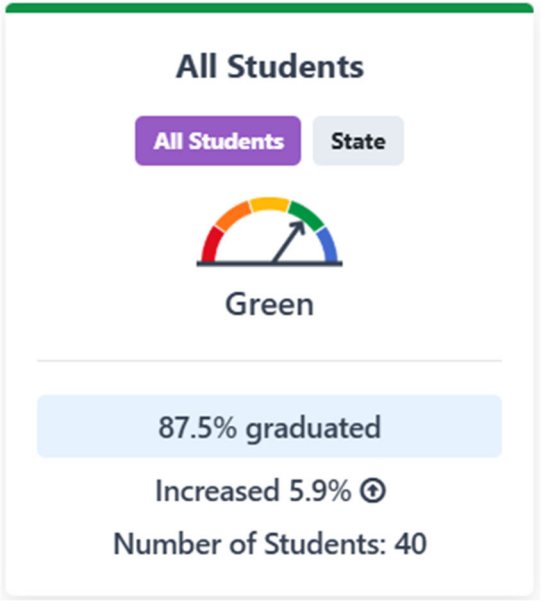


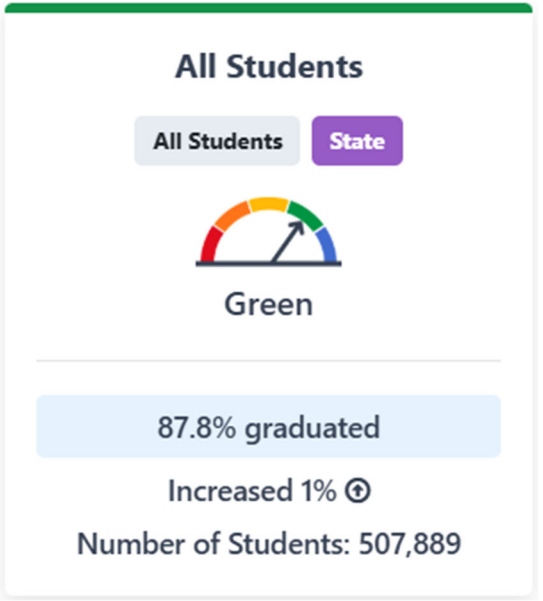


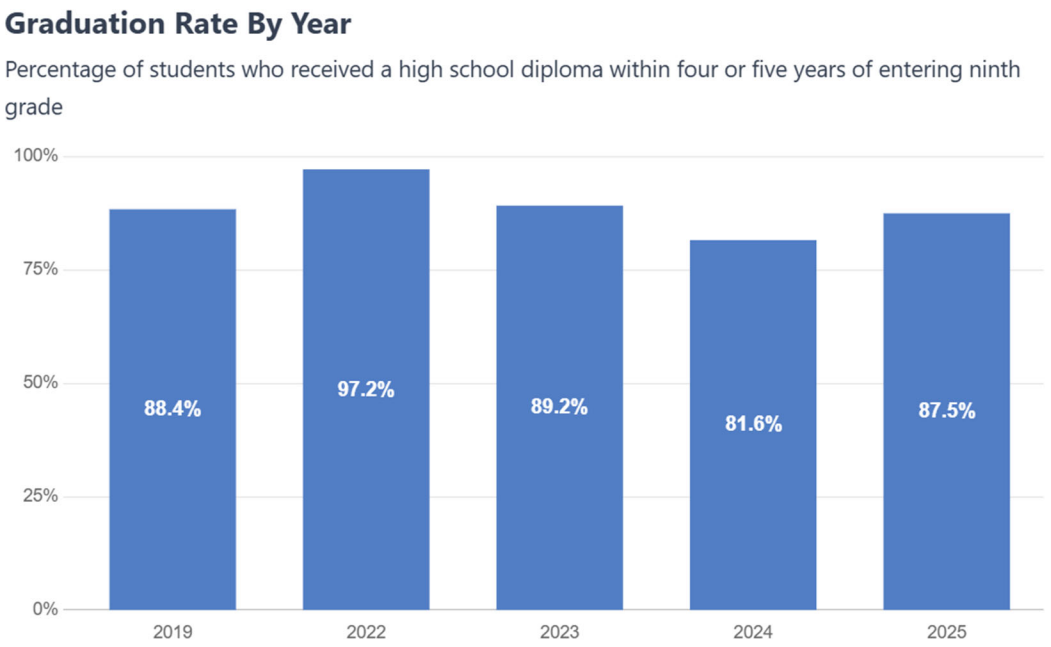
Source: California Department of Education School Dashboard

EDUCATION – GRADUATION RATE

- Avalon schools have performed well to keep graduation rates near the state benchmark.
- In 2025, 87.5% of students graduated from Avalon High School, which was a 5.9% increase from the prior year. California's state rate was 87.8%.
- In the post-pandemic year of 2022, the school graduated 97.2% of students.







Source: California Department of Education School Dashboard

EDUCATION – SUSPENSION RATE

- Avalon TK-12 schools have had declining rates of student suspensions since a high of 5.9% in 2019.
- The 2025 rate was only 0.7%, compared to 2.9% of all California schools.

All Students

All Students | State

Blue

0.7% suspended at least one day

Declined 0.6%

Number of Students: 460

All Students

All Students | State

Green

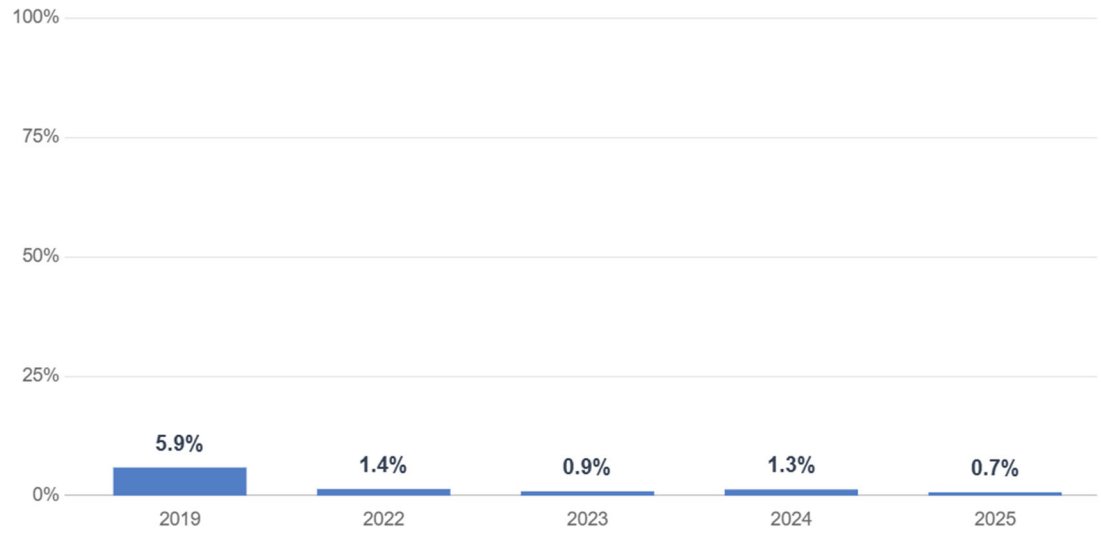
2.9% suspended at least one day

Declined 0.4%

Number of Students: 5,961,200

Suspension Rate By Year

Percentage of students who were suspended.



Source: California Department of Education School Dashboard

Visitors Center
Credit: Love Catalina Island Tourism Authority

FOOD

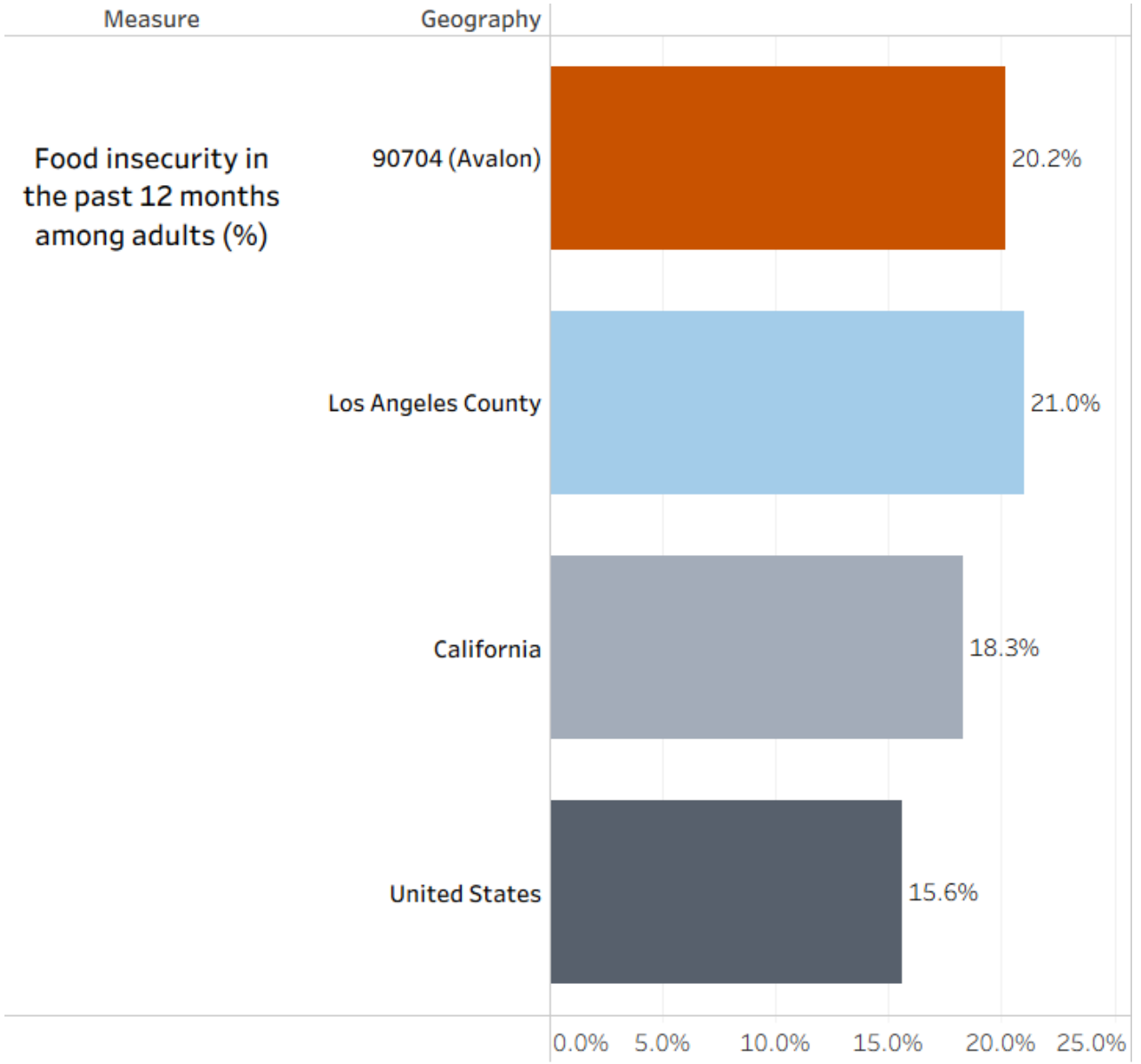
Access to affordable, nutritious food and the maintenance of a healthy diet are important facets of health. Poor nutrition has been shown to lead to higher mortality and incidences of chronic disease. The following statistics were analyzed for Catalina Island.

- Food Insecurity
- Nutrition Assistance – Adults
- Nutrition Assistance – Households with Children

Statistic Analyzed	Key Findings
Food Insecurity	Over 20% of the island's adult residents, or an estimate total of over 600 people, have occasional limited or uncertain access to adequate nutritious food needed to maintain health.
Nutrition Assistance – Adult Population	The island's adult population receiving food stamps is also aligned with the Los Angeles County percentage. Of note, however, is that the percentage of food insecure is higher than the percentage receiving food assistance, suggesting a gap in the reach of nutritional assistance programs.
Nutrition Assistance – Households with Children	2% of Catalina Island households with children present receive Food Stamps/SNAP benefits, which is below averages for the county, state, and United States.

FOOD INSECURITY

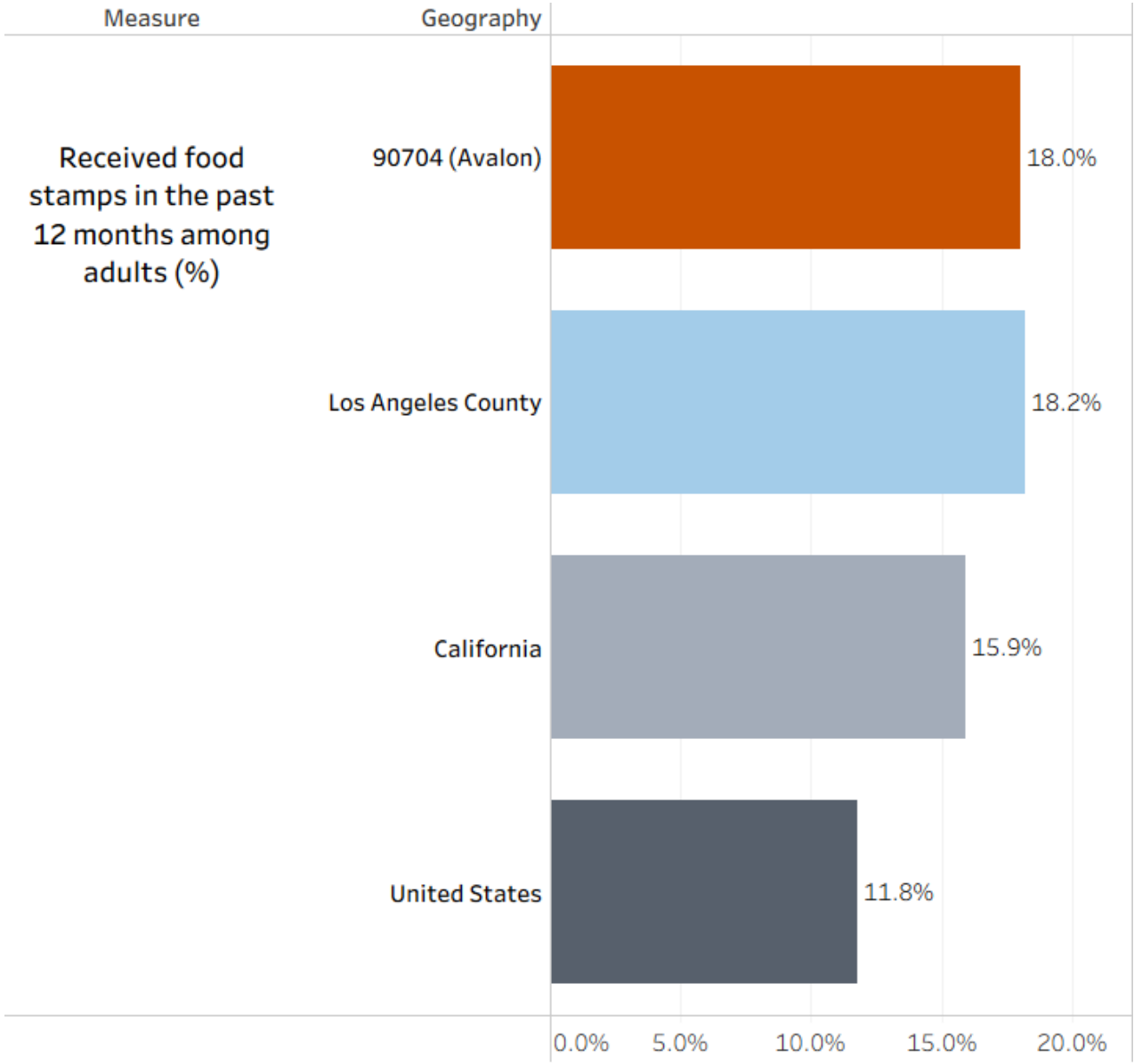
- Food insecurity, which means limited or uncertain access to adequate nutritious food needed to sustain health, affects over 20% of the island's adult residents, or an estimated total of over 600 people.
- The percentage is aligned with the Los Angeles County percentage. Both are higher than state and national averages.
- Previous CHNA data showed that food access was not an issue on Catalina Island.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

NUTRITION ASSISTANCE – ADULT POPULATION

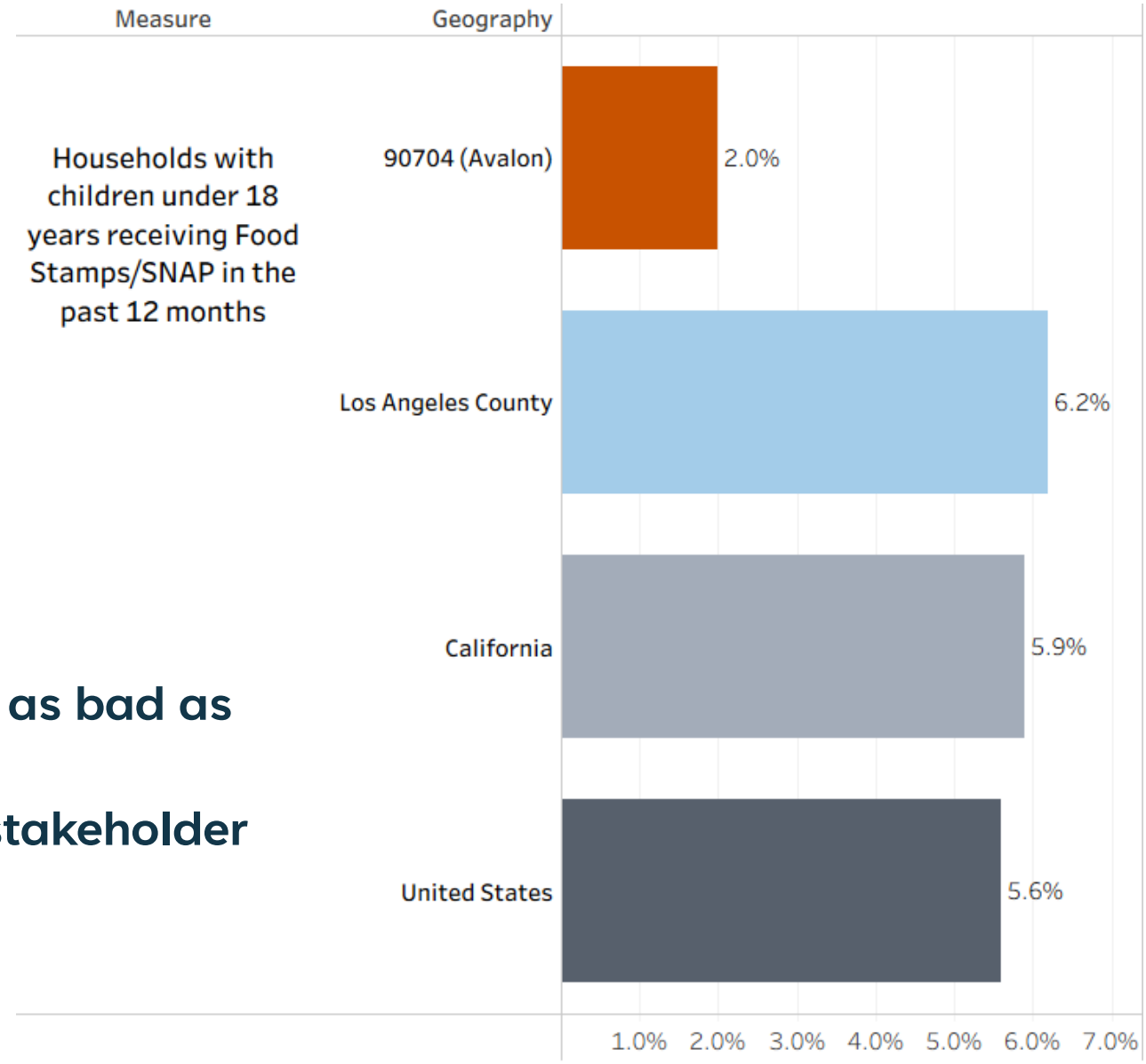
- Similarly, the percentage of the adult population receiving supplemental nutrition assistance, or food stamps, is aligned with the L.A. County percentage.
- Although nutritional assistance is being utilized, there appears to be a gap between food stamp utilization and the food-insecure population.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

NUTRITION ASSISTANCE – HOUSEHOLDS WITH CHILDREN

- 2% of Catalina Island households with children present receive Food Stamps/SNAP benefits, which is below the averages for the county, state, and United States.



"Food insecurity is not as bad as before."

– Community stakeholder

Source: Census Reporter Profile
Source Detail: U.S. Census Bureau (2020-2024). Receipt of Food Stamps/SNAP in the Past 12 Months by Presence of Children Under 18 Years by Household Type for Households American Community Survey 5-year estimates

COMMUNITY

Catalina Island at Sunset
Credit: Love Catalina Island Tourism Authority

COMMUNITY

Social cohesion, social isolation, and crime rates are examples of indicators that comprise the Community aspect of the social determinants of health. The following statistics were analyzed for Catalina Island.

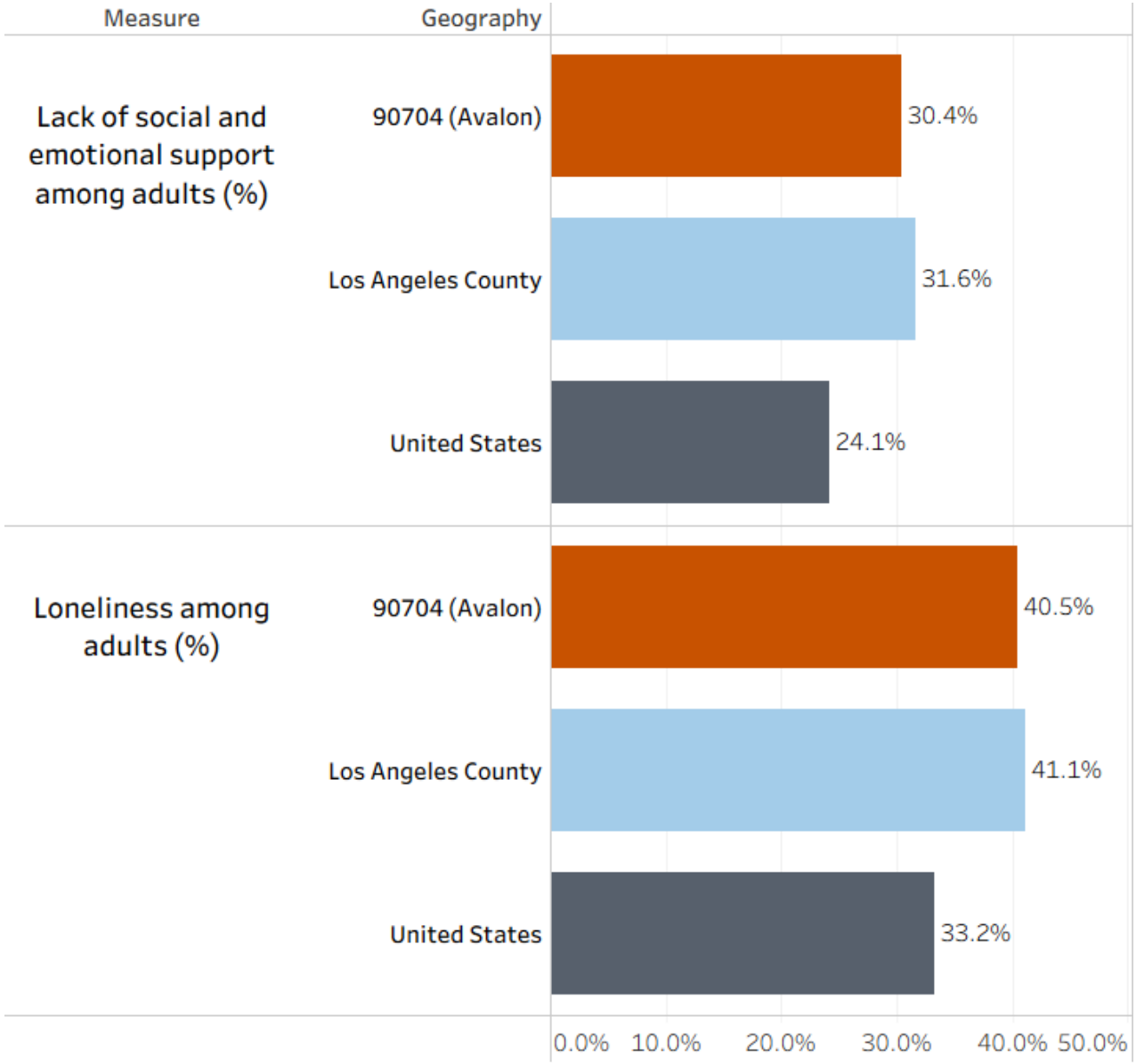
- Social/emotional support
- Property crime
- Violent crime
- Crime details

Key findings include:

Statistic Analyzed	Key Findings
Social/Emotional Support	Almost 31% of adult residents report a lack of social and emotional support and almost 42% report feeling lonely. While these percentages are similar to Los Angeles County's, the small population on Catalina and island living in general can exacerbate these challenges for residents and can directly impact overall health and wellbeing.
Property Crime	Avalon City has much lower rates of property crime, including burglary, larceny-theft, and motor vehicle theft compared to other rural California cities.
Violent Crime	Avalon City also has rates of violent crime that are over twice as low as other rural California cities. Violent crime includes murder/manslaughter, rape, robbery, and aggravated assault.
Crime Details	Detailed crime statistics show generally positive rates and incidents for Avalon City. Although reported incidences are low (2), the rate for rape (53.7) exceeds the state and national averages.

SOCIAL/EMOTIONAL SUPPORT

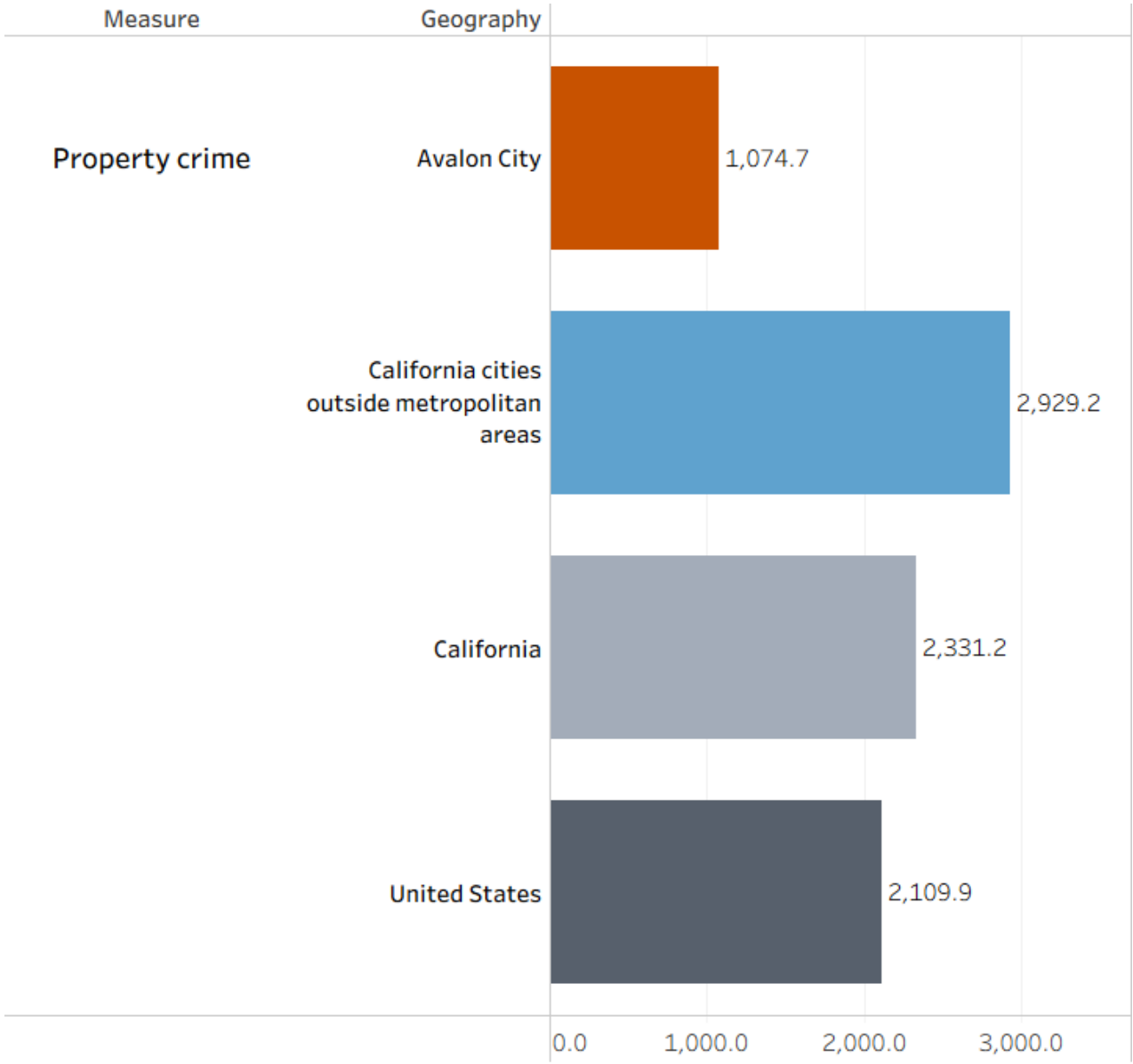
- About 31% of the island's adult residents report a lack of social and emotional support, and 41.7% report loneliness. These percentages align with Los Angeles County averages but are over 6 and 8 percentage points higher than the national average, respectively.
- A lack of social connection can manifest as poor health-related issues, such as obesity, depression, or suicide.
- Community connections, organizations, and events are a key factor in overcoming social isolation and helping lonely people live healthier lives.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

PROPERTY CRIME

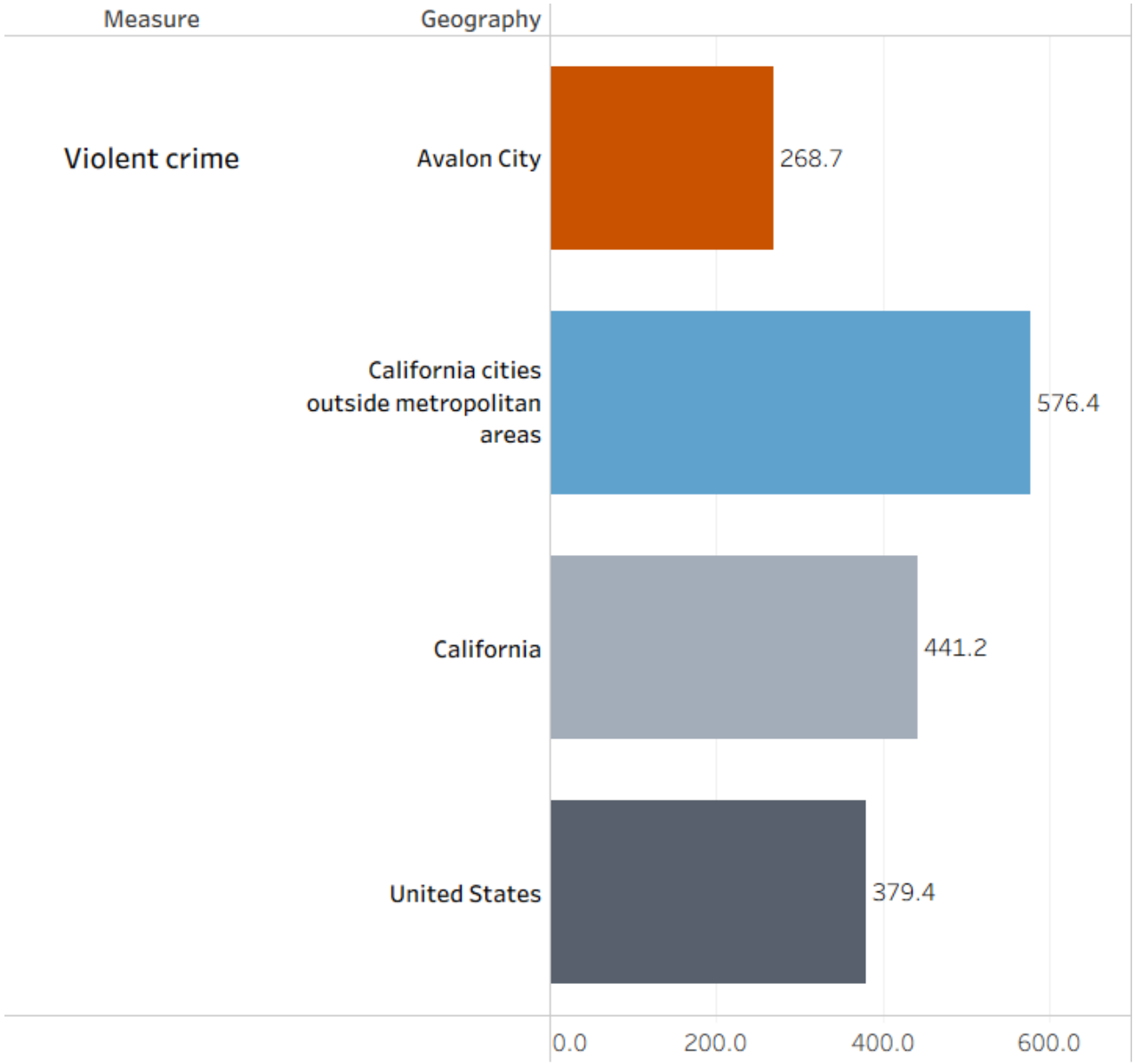
- The rate of property crime per 100,000 population in the city of Avalon is 63% lower compared to other California cities outside metropolitan areas.
- The rate is 54% below state and 49% below national benchmarks as well.
- Property crime includes burglary, larceny-theft, and motor vehicle theft.



Source: FBI Uniform Crime Reporting Program, 2019
Source Detail: Per 100,000 population

VIOLENT CRIME

- Similarly, the overall rate of violent crime is much lower than in other non-metro California cities, the state, and the nation.
- Avalon city's violent crime rate is 268.7 incidents per 100,000 population, compared to 576.4 in California cities outside metropolitan areas – a rate that is 115% higher.
- Violent crime includes murder and non-negligent manslaughter, rape, robbery, and aggravated assault.



Source: FBI Uniform Crime Reporting Program, 2019
Source Detail: Per 100,000 population

CRIME DETAIL

- More detailed crime statistics compared to state and national averages show generally positive rates and incidences for Avalon city among the individual property crime categories of burglary (7 incidences), larceny-theft (28 incidences), and motor vehicle theft (5 incidences).
- Among individual violent crime categories were 0 murders and non-negligent manslaughter incidences, 2 reported incidences of rape, 0 robbery incidences, and 8 incidences of aggravated assault. Although reported incidences are low, the rate for rape (53.7) exceeds the California (37.5) and U.S. rate (42.6); it is lower compared to other non-metropolitan cities in the state.

	Avalon		California cities outside metropolitan areas		California		United States	
	Incidences	Rate[1]	Incidences	Rate[1]	Incidences	Rate[1]	Incidences	Rate[1]
Property crime	**40**	**1074.7**	**7,837**	**2929.2**	**921,114**	**2331.2**	**6,925,677**	**2109.9**
Burglary	7	188.1	1,649	616.4	152,555	386.1	1,117,696	340.5
Larceny-theft	28	752.3	5,254	1963.8	626,802	1586.3	5,086,096	1549.5
Motor vehicle theft	5	134.3	934	349.1	141,757	358.8	721,885	219.9
Violent crime	**10**	**268.7**	**1,542**	**576.4**	**174,331**	**441.2**	**1,245,410**	**379.4**
Murder and nonnegligent manslaughter	0	0.0	12	4.5	1,690	4.3	16,425	5.0
Rape	2	53.7	192	71.8	14,799	37.5	139,815	42.6
Robbery	0	0.0	254	94.9	52,301	132.4	267,988	81.6
Aggravated assault	8	214.9	1,084	405.2	105,541	267.1	821,182	250.2

[1]Per 100,000 population

Source: FBI Uniform Crime Reporting Program, 2019

HEALTHCARE SYSTEM

Chimes Tower
Credit: Love Catalina Island Tourism Authority

HEALTHCARE SYSTEM

Healthcare System analyzes health services available to the community, including preventive medicine and treatment. Access to health services affects both health behaviors and health outcomes within a community. The following statistics were examined for Catalina Island:

- Services available on-island
- Access to providers
  - Routine checkups
- Shortage areas
- Dental care
- Preventive care

Key findings include:

Statistic Analyzed	Key Findings
Services available	CIH provides an adequate array of services for a rural community, including a 24-hour emergency department, acute care inpatient and rehabilitation, long-term care, and diagnostic laboratory and radiology services. Primary care, care management, mental health care, and physical and occupational therapy offerings are supplemented with visiting specialists or telehealth.
Access to Providers	Over 69% of adult residents of the island had visited a doctor for a routine checkup in the past year, which is a percentage in line with county, state, and national comparisons.
Shortage areas	The island is classified as a Health Professional Shortage Area (HPSA) for mental health and primary care, with an estimated shortage of 0.25 and 0.76 Full Time Equivalent providers (FTE), respectively. Scores indicate a medium priority for clinician assignment for both disciplines.
Dental Care	Catalina Island falls 1 percentage point below county, state and national averages for dental visits, and has a lower percentage of residents over 65 years of age with tooth loss. The island is not designated as a Dental Health HPSA, although 50.3% of survey respondents identified it as a need.

CATALINA ISLAND HEALTH (CIH) SERVICES

- CIH provides island residents and visitors with a 24/7 emergency room staffed by physicians from the University of California, Irvine (UCI), acute care services, rehabilitation, and long-term care in a Skilled Nursing Facility (SNF). The hospital also provides diagnostic laboratory and radiology services, including CT scans, digital x-rays, and ultrasounds. A tele-radiology program enables UCI providers to analyze images on the mainland.
- The Catalina Primary Care Clinic is housed in the lower level of the hospital, offering primary care and wellness checks, mental health services, care management, physical therapy, and occupational therapy.
- Visiting specialists augment the on-island services with regular office hours in Avalon or virtually. Visiting specialist services include podiatry, orthopedic surgery, interventional cardiology, urology, ophthalmology, and dermatology.
- The hospital owns and operates a pharmacy, Leo's Catalina Drugstore, as well as a wellness MedSpa offering residents and visitors facial rejuvenation and hydration treatments.
- CIH offers health services for island employers and their employees, including physicals, screenings (hearing, heart, disease), drug and alcohol testing, and vaccinations.

"The quality of the ED docs is fantastic."
– Community stakeholder

TOP – CIH exterior, MIDDLE – Clinic exterior, BOTTOM – Leo's Catalina Drugstore exterior (source: CIH)

HEALTH PROFESSIONAL SHORTAGE AREAS (HPSA)

Medical Service Study Area (MSSA) 78.1/Avalon

Discipline/ Designation Type	HPSA FTE Short	HPSA Score	PC MCTA Score	Designation Date	Update Date
Mental Health/ High Needs Geographic HPSA	0.25	11 out of 26	NA	05/04/2018	09/22/2025
Primary Care/ Geographic HPSA	0.76	14 out of 26	11 out of 25	12/19/1984	03/31/2026

Source: data.HRSA.gov – HPSA Find

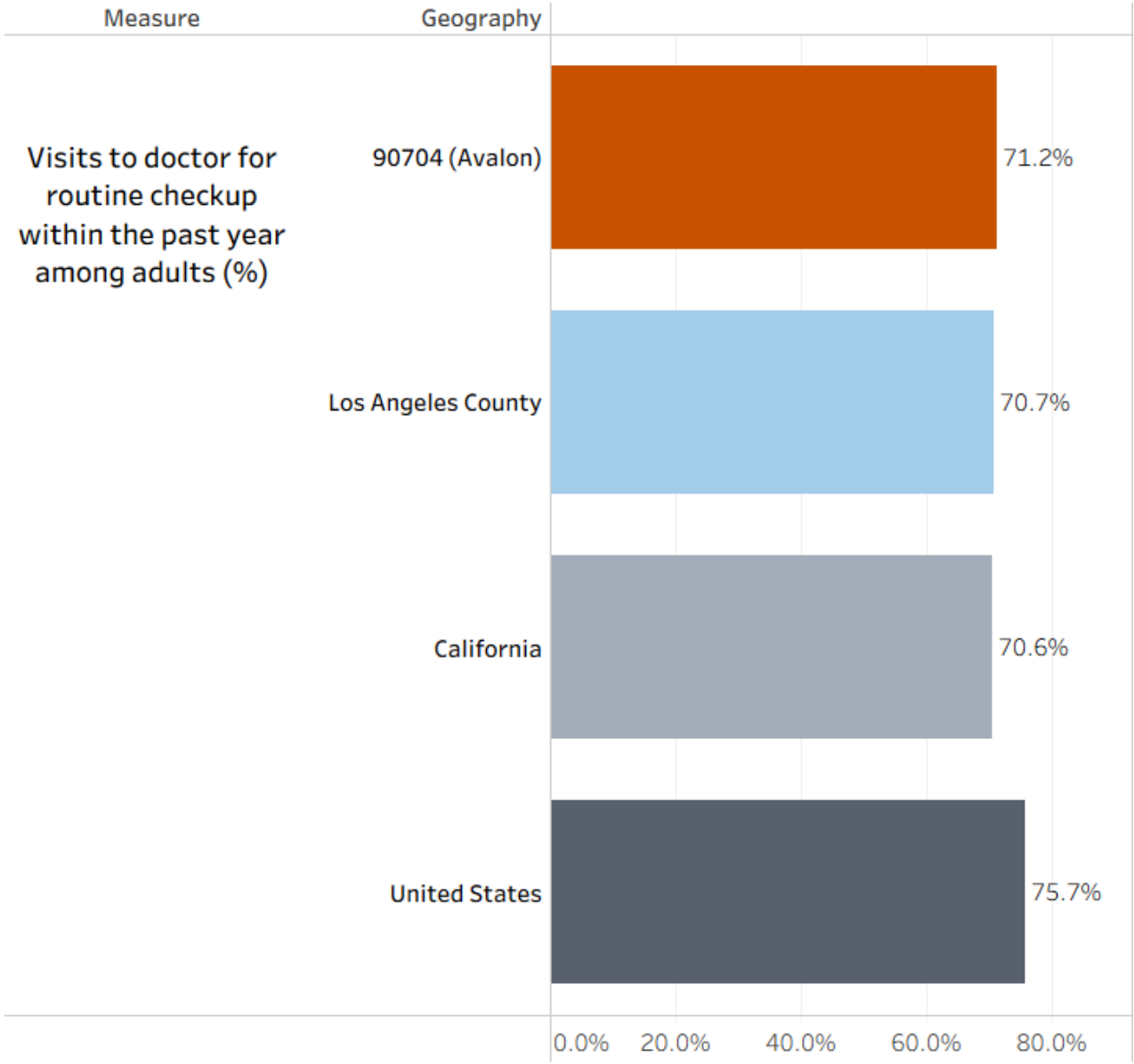
HPSA FTE Short This attribute represents the number of full-time equivalent (FTE) practitioners needed in the HPSA so that it will achieve the population to practitioner target ratio. The target ratio is determined by the type (discipline) of the HPSA.

HPSA Score/PC MCTA Score These scores help in determining priorities for assignment of clinicians. The scores range from 0 to 26 or 0 to 25, where the higher the score, the greater the priority.

- Catalina Island is designated as a Health Professional Shortage Area for mental health and primary care by the Health Resources and Services Administration (HRSA).
- Based on HRSA methodology, the island is short 0.25 Full-Time Equivalent (FTE) mental health providers and 0.76 FTE primary care providers. For reference, 1.0 FTE equals 1 full-time provider with a standard work schedule.
- Scores indicate that the island is in the middle in terms of priority of need.
- The island has not been designated a dental health shortage area, but 50.3% of survey respondents cited access as an improvement need.

ACCESS TO PROVIDERS

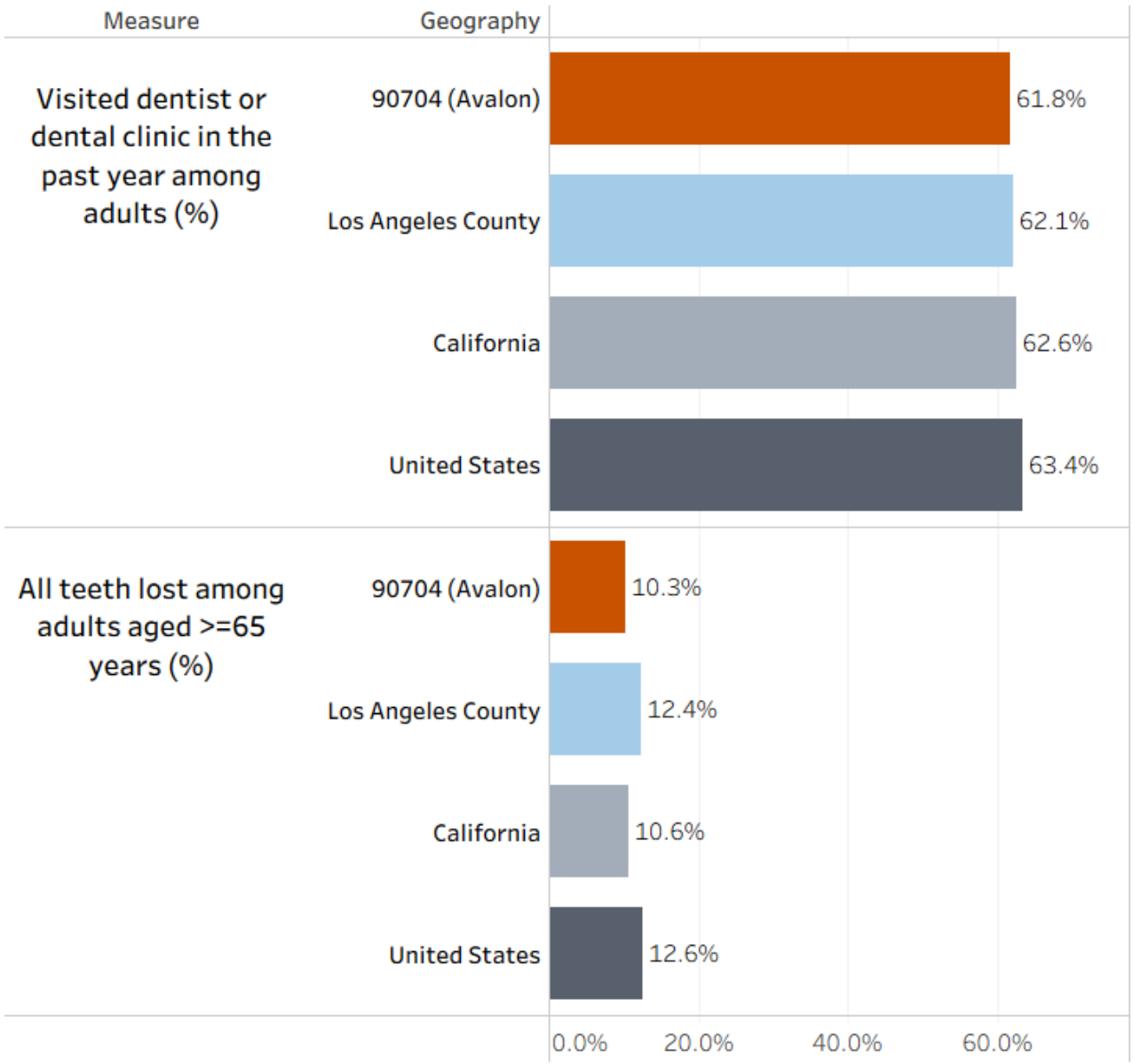
- Catalina Island is a rural community and is anticipated to have reduced access to a broader contingent of healthcare providers compared to state and national averages.
- Rural healthcare access is a challenge throughout the United States, and Catalina Island's challenges are not unique.
- However, ZIP Code percentages are in line with county and state for adults who visited a doctor for a routine checkup within the past year.
- Primary care access and routine visits are foundational to overall health outcomes for all geographies, both rural and urban.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

DENTAL CARE

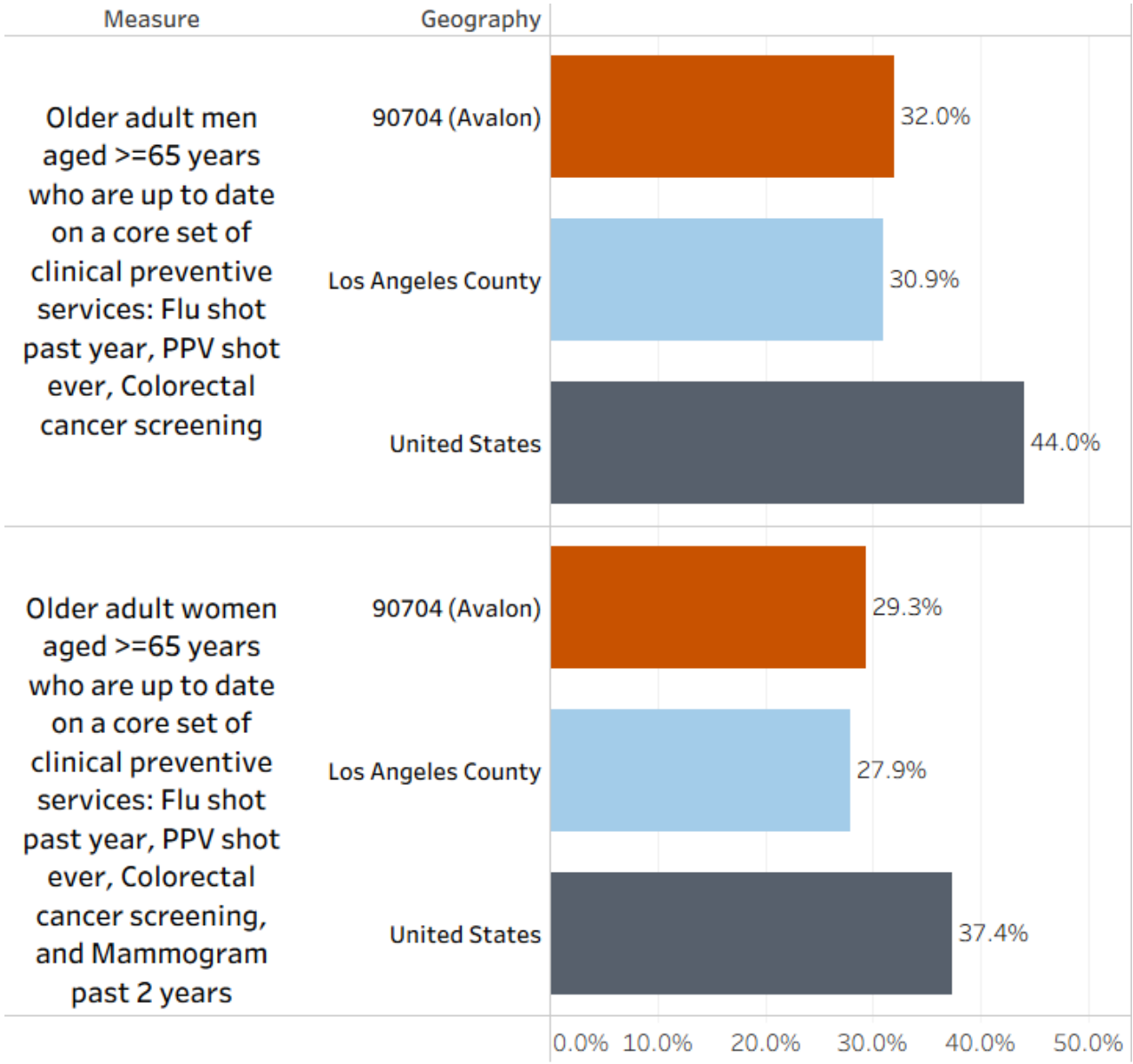
- Catalina Island is about equal to Los Angeles County and 1 to 2 points below state and national averages for dental care, with over 61% of adult residents visiting a dentist or dental clinic in the past year.
- Dental-related health outcomes, such as tooth loss among adults over 65, are 1.8 percentage points lower than the Los Angeles County percentage, 10.6% vs. 12.4%.
- Like primary care, dental care is critical to overall health outcomes for all ages.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2022

PREVENTIVE CARE

- Older men and women on Catalina Island are receiving core clinical services on par with the rest of Los Angeles County but fall below the national average by 9 percentage points (for men) and 8.1 percentage points (for women).
- Catalina's current percentages for these measures are similar to those in the prior CHNA, but the national average for both has increased, indicating a greater nationwide trend for preventive flu and PPV shots and cancer screenings.



Source: PLACES: Local Data for Better Health, 2023 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2020, Avalon values are crude prevalence

HEALTH BEHAVIORS

Catalina Horseback Adventures
Credit: Love Catalina Island Tourism Authority

HEALTHCARE BEHAVIORS

Healthcare behaviors have a significant impact on an individual's and a community's health. Poor health behaviors and lack of vaccinations and screenings contribute to poor health outcomes. Statistics examined for Catalina Island include:

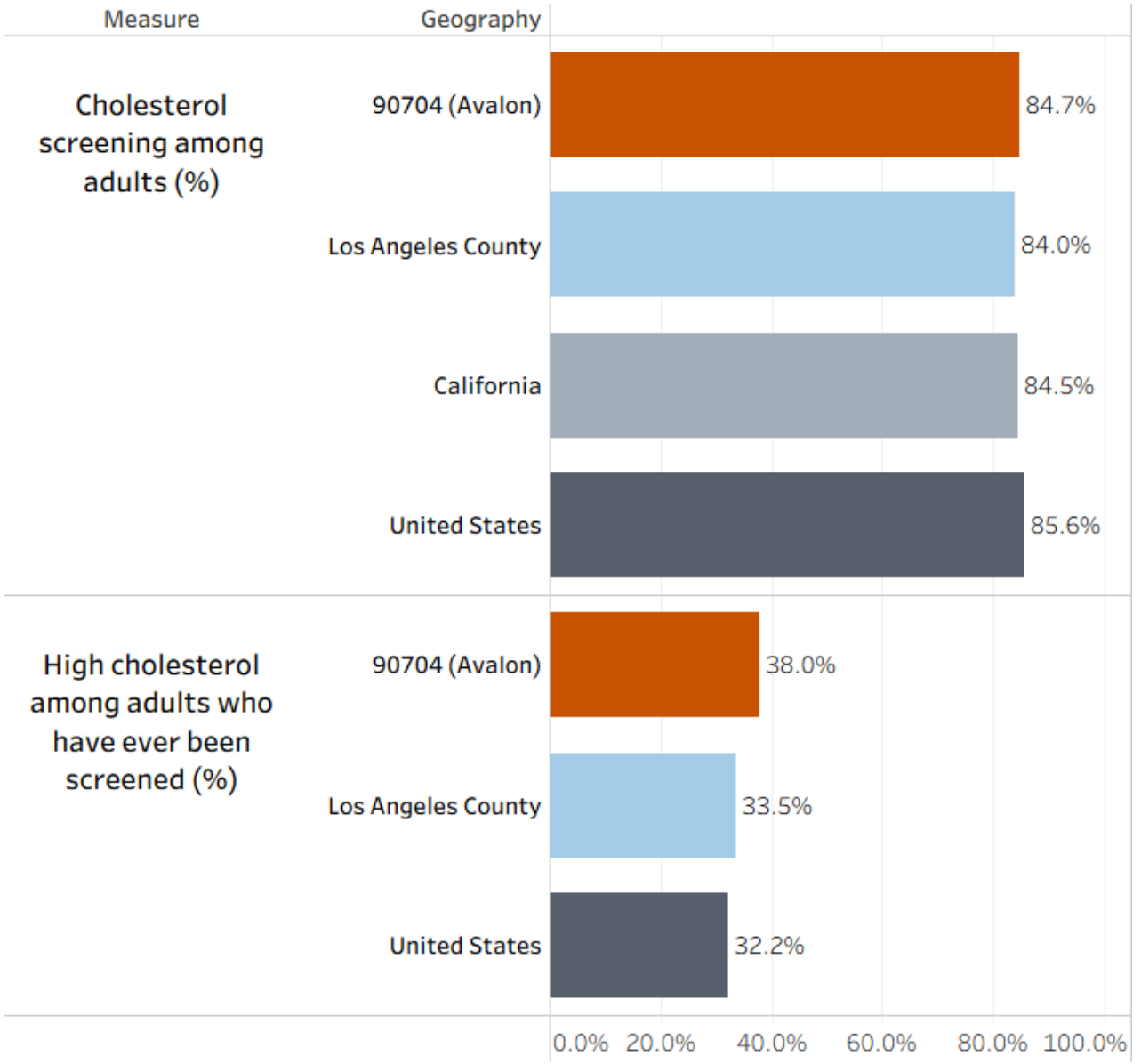
- Screenings
- High-Risk Health Behaviors

Key findings include:

Statistic Analyzed	Key Findings
Screenings	Screening percentages among island residents for cholesterol, high cholesterol, and colorectal cancer, as well as mammography among women aged 50-74 meet or exceed state and national averages, indicating that residents are cognizant of the need for preventive care and are not facing unreasonable barriers to receiving it.
High Risk Health Behaviors	The island has slightly higher percentages of residents who report binge drinking or current cigarette use, and who report fair or poor general health.

SCREENINGS

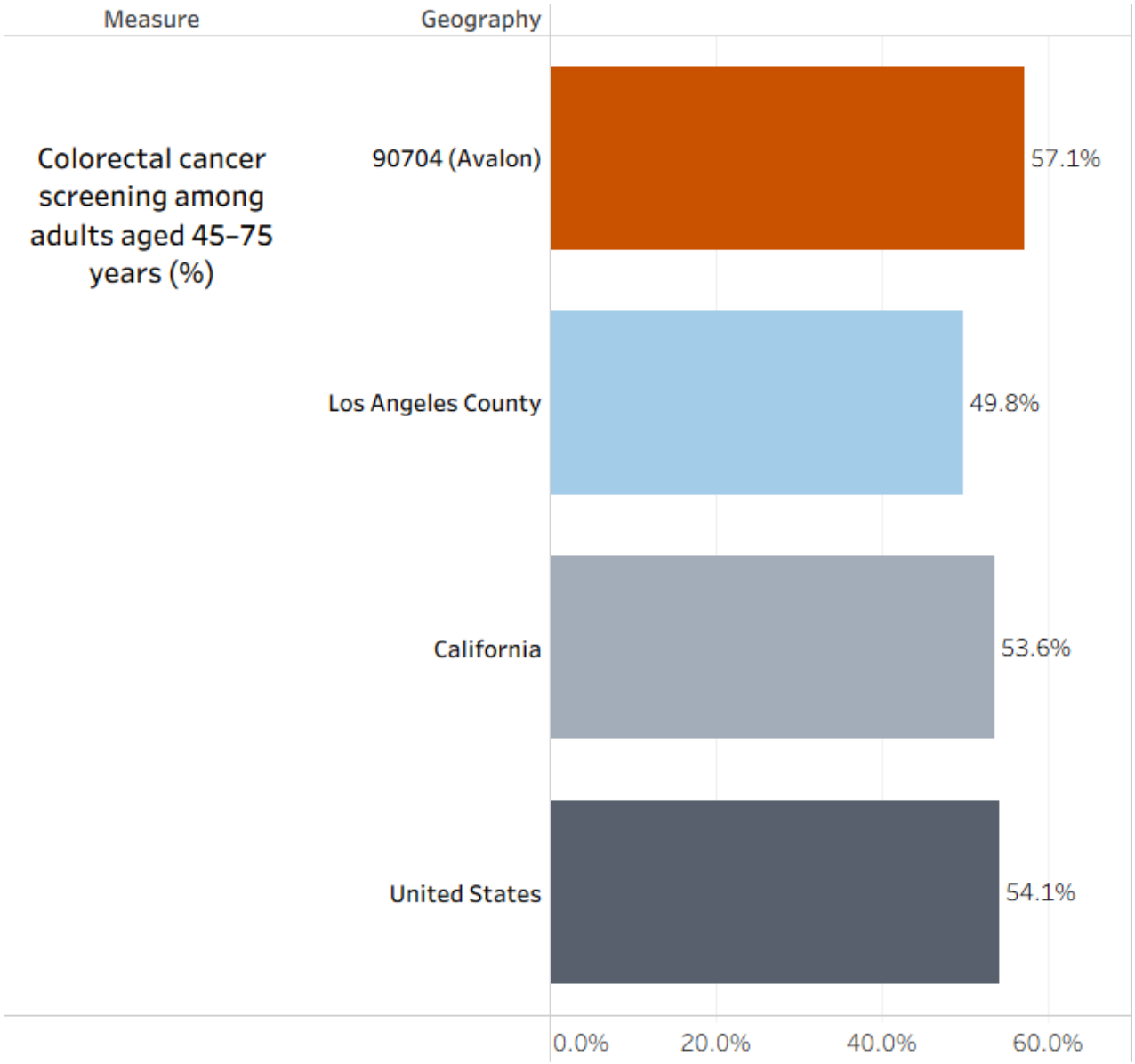
- Catalina Island adult residents are screened for high cholesterol in percentages aligned with the state and national averages, which comports with statistics showing regular checkups and preventive care visits.
- 38% of adult residents who have been screened were diagnosed with high cholesterol, which is 5.8 percentage points higher than the national average.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

SCREENINGS

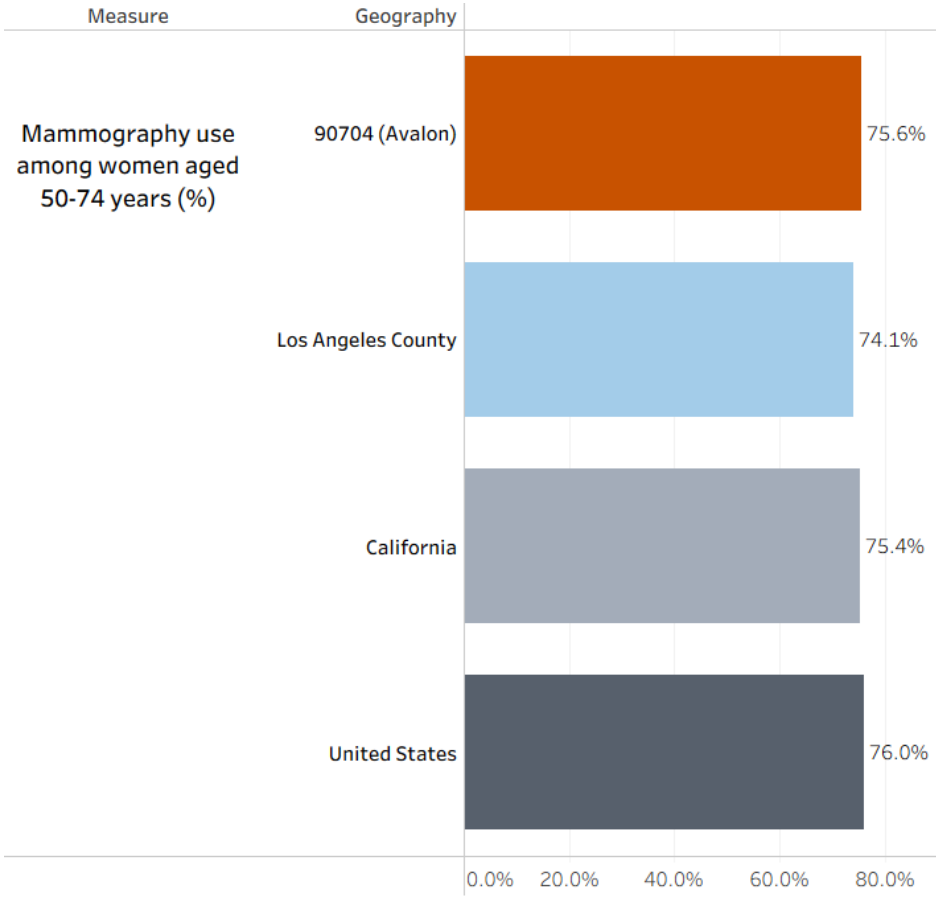
- Screenings to detect colorectal cancer among the island's adult residents aged 45-75 are 3.5 and 3 percentage points higher than state and national averages, respectively.
- Previous CHNA data showed a similar percentage of colorectal cancer screenings among island residents (57.9%), although that measure was for adults 50-75.
- Respondents in interviews noted that residents who test positive for cancer often want to be treated and recover on-island, as opposed to traveling to Long Beach or other parts of the mainland, and have expressed a desire for CIH to explore offering on-island infusion services.



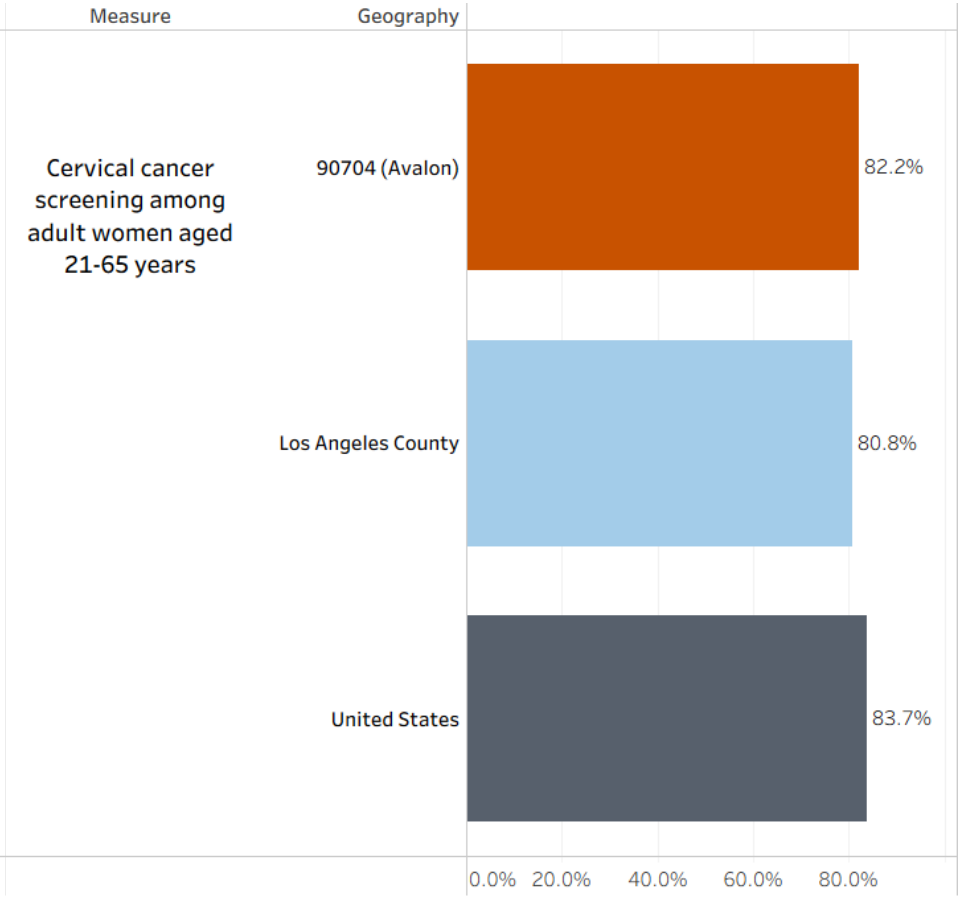
Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2022

SCREENINGS

- Mammography use among women residents aged 50-74 and cervical cancer screenings among adult women aged 21-65 match state and national averages. These screening statistics indicate that residents prioritize preventive care. CIH has provided a mobile mammography screening unit for residents annually for the past 2 years.



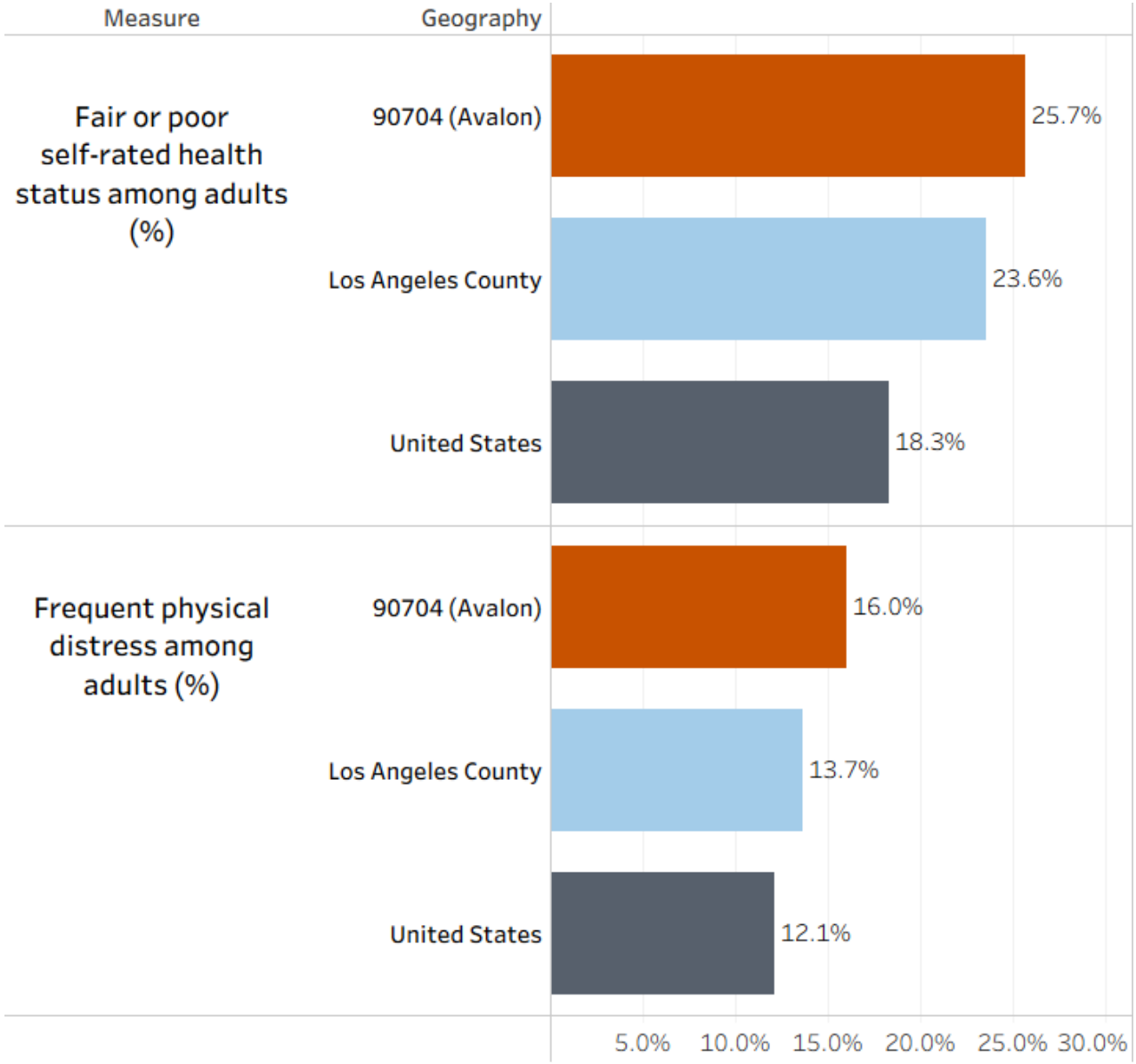
Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2022



Source: PLACES: Local Data for Better Health, 2023 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2020, Avalon values are crude prevalence

HIGH RISK HEALTH BEHAVIORS

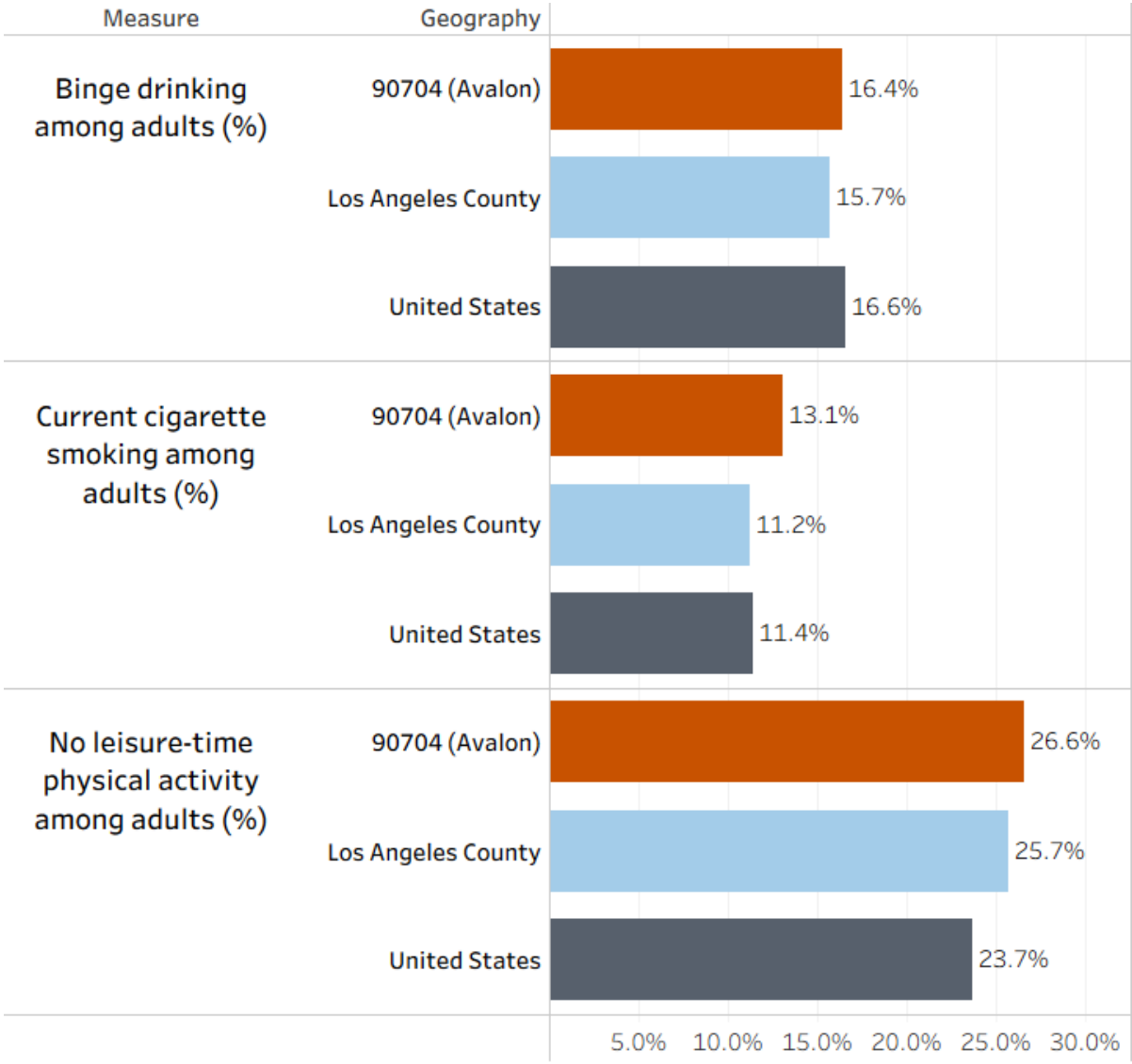
- Catalina Island adult residents, and Los Angeles County residents as a whole, self-report higher percentages of health status that is either fair or poor, compared to the United States average.
- Island adult residents have higher percentages of frequent physical distress, which is often linked to chronic conditions and related complications. Possible causes for this may be a higher-aged population or a lack of access to specialists for chronic conditions or pain.
- This can have a negative effect on a person's quality of life.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

HIGH RISK HEALTH BEHAVIORS

- 16.4% of Catalina Island residents are prone to binge drinking. Excessive drinking is defined as more than two drinks a day for men and more than one for women. This has declined from 18.6% in the prior CHNA.
- 13.1% of adult residents are current smokers, which is higher than the percentage shown in the prior CHNA (12.7%).
- While the percentages are not excessively higher than state and national averages, these behaviors are linked to greater incidences of chronic disease, such as obesity and poor cardiovascular health.
- Catalina has a higher percentage of adults (25.8%) who do not participate in leisure-time physical activity, compared to the prior CHNA percentage of 23.3.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

"Fewer transfers recently for alcohol-related issues." – Community stakeholder

HEALTH OUTCOMES

Catalina at Sunset
Credit: Love Catalina Island Tourism Authority

HEALTH OUTCOMES

Health outcomes can show the relative health of the population in the community. Typically, health outcomes result from the interplay of factors across the other elements of the social determinants of health. Statistics examined for Catalina Island include:

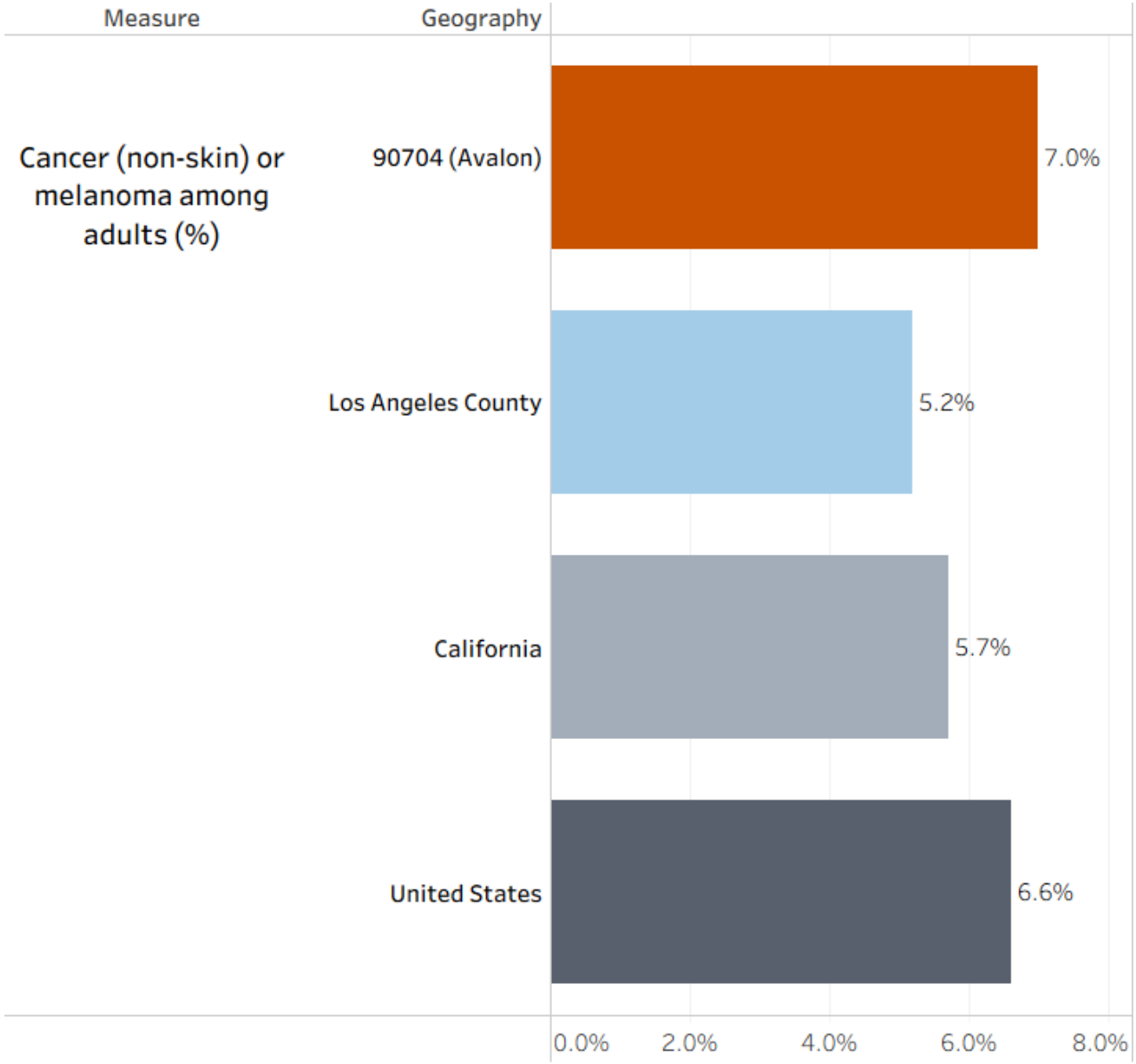
- Cancer Incidence
- Behavioral Health Outcomes
- Chronic Conditions

Key findings include:

Statistic Analyzed	Key Findings
Cancer Incidence	The percentage of island adult residents with cancer or melanoma is 1.3 percentage points higher than the state average, and 0.4 points higher than the national average.
Behavioral Health Outcomes	Depression among adults on Catalina Island exceeds the state and national averages by 1.2 and 0.9 percentage points, respectively, and nearly 18% of island adults report frequent bouts of mental distress, which exceeds the national average by 1.4 percentage points.
Chronic Conditions	Chronic condition categories among island residents that exceed at least some of the comparison benchmarks include chronic obstructive pulmonary disease (COPD), coronary heart disease (CHD), diabetes, obesity, high blood pressure, and stroke.

CANCER INCIDENCE

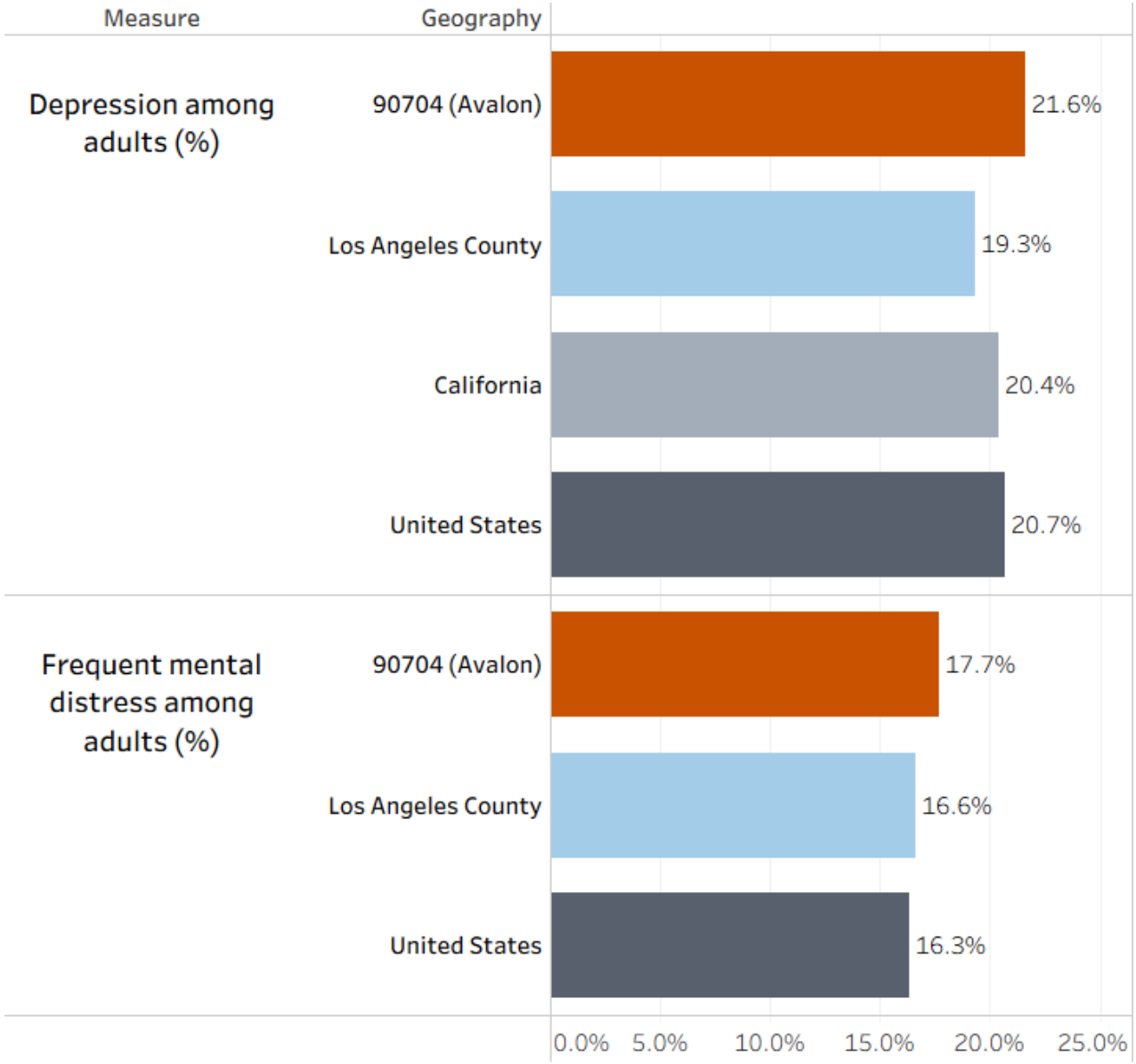
- The percentage of island adult residents with cancer or melanoma is 1.3 percentage points higher than the state average, and 0.4 points higher than the national average.
- Cancer treatment presents a challenge for island residents, as regular chemotherapy requires a long ferry ride to and from mainland infusion centers, which can be both a physical and financial burden for cancer patients.
- Most residents would prefer to recover from treatment in their homes.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

BEHAVIORAL HEALTH OUTCOMES

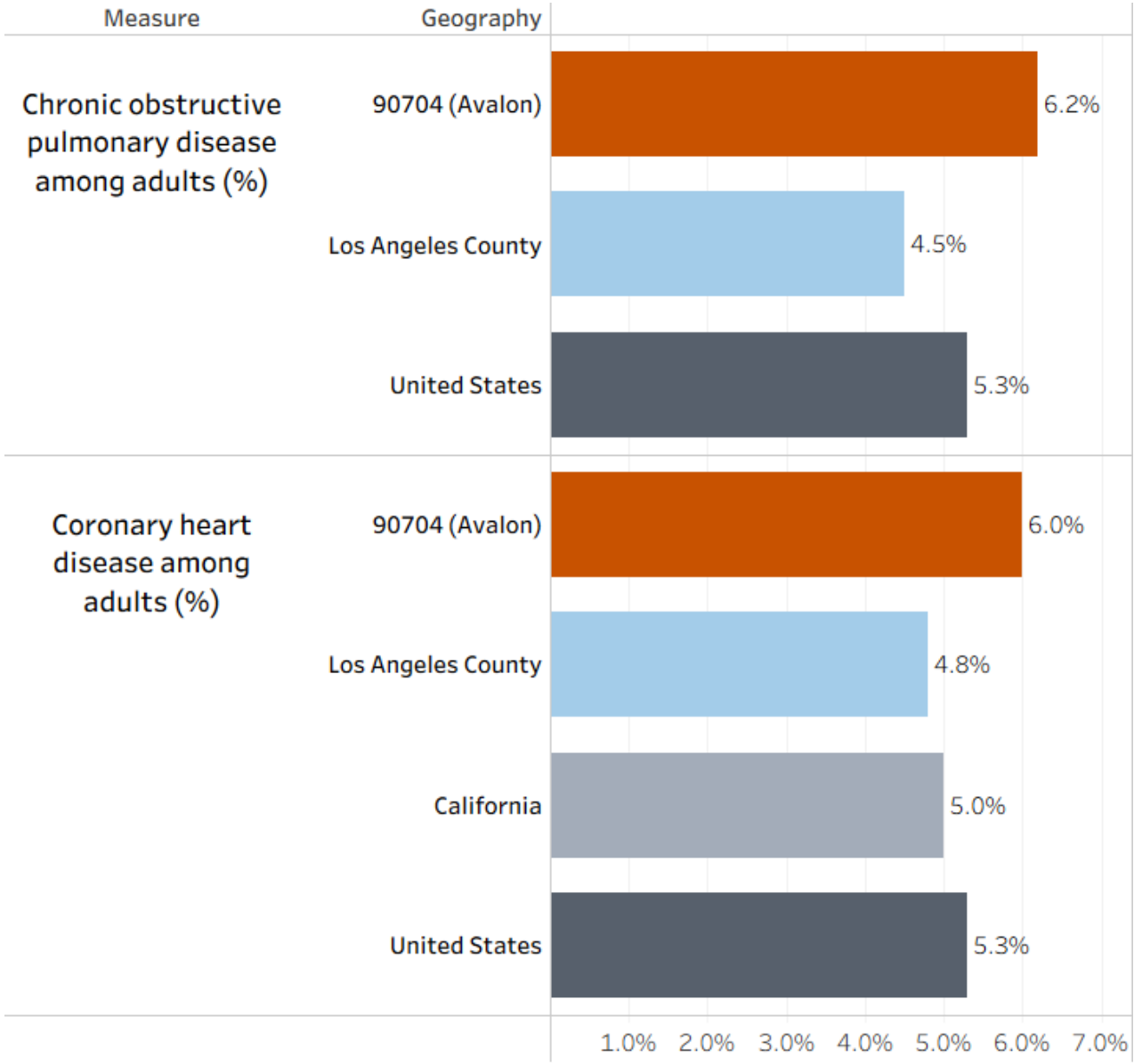
- Depression among adults on Catalina Island exceeds the state and national averages by 1.2 and 0.9 percentage points, respectively.
- This percentage is higher from the prior CHNA, which found 17.1% of adults with depression.
- Additionally, nearly 18% of island adults report frequent bouts of mental distress, which exceeds the national average by 1.4 percentage points.
- A frequent response to questions about behavioral health and related services in interviews showed that privacy continues to be a concern, as well as the availability of mental health services. Residents report that there is a specific office for mental health services, and concern about being able to seek treatment discreetly.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

CHRONIC CONDITIONS

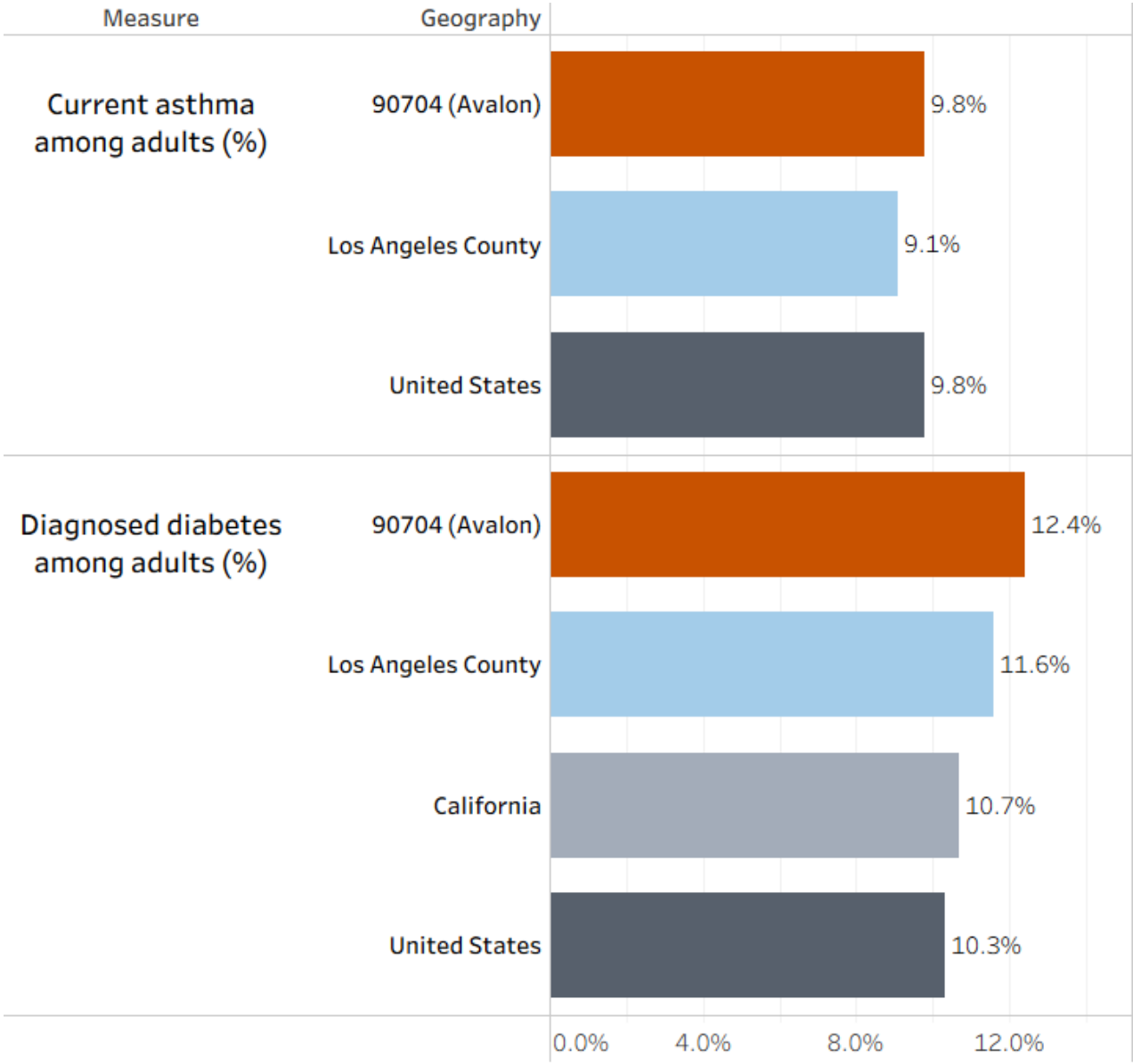
- COPD percentages among adult residents exceed L.A. County percentages by 1.7 percentage points, and by 0.9 point compared to the national average.
- The percentage of island adults with coronary heart disease is 1 point higher than the state average and 1.3 points higher than the national average.
- These percentages have not changed markedly since the prior CHNA. In 2023, the COPD percentage among adults was 6.1% (compared to 6.2% currently) and the CHD percentage was 5.5% (6.0% currently).



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

CHRONIC CONDITIONS

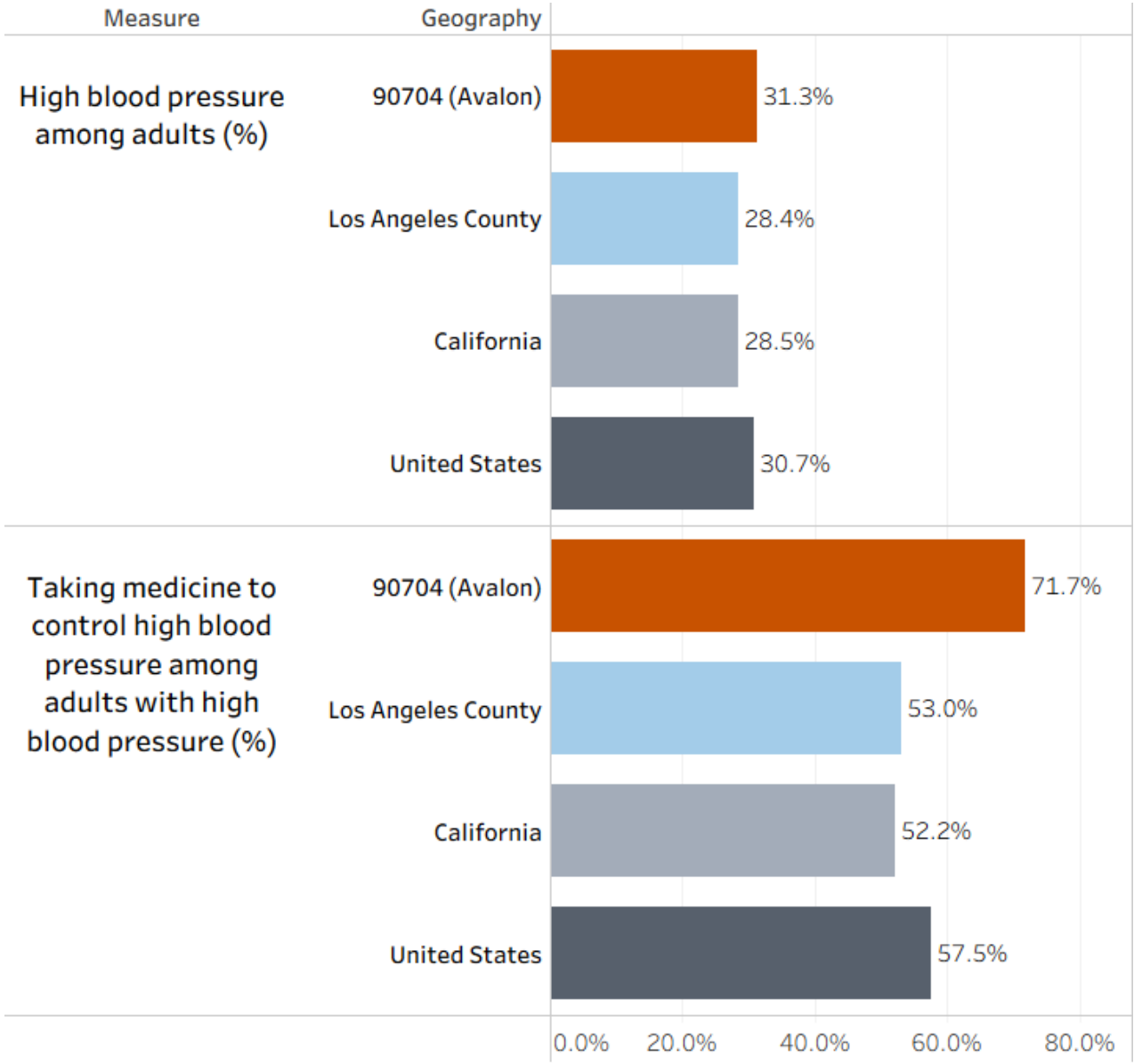
- 9.8% of the island's adults have asthma, which is aligned to the national average but 0.6 percentage points higher than the county average.
- Diagnosed diabetes among adults is 1.7 percentage points higher than the state average, and 2.1 points higher than the national average.
- The percentage of adults with diabetes has increased since the prior CHNA by 2.8 percentage points (9.6% to 12.4% currently).



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

CHRONIC CONDITIONS

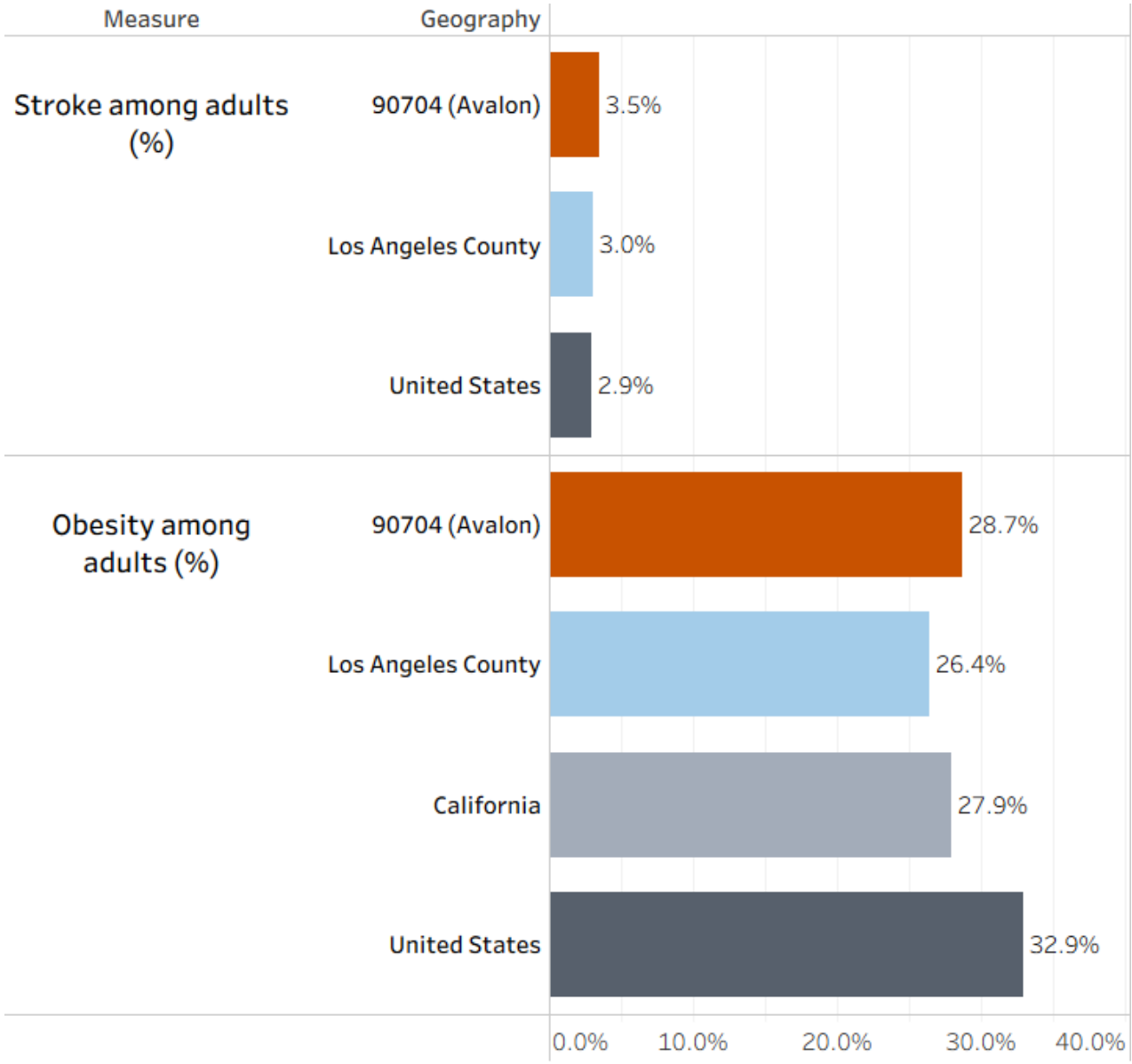
- 31.3% of adult residents have high blood pressure, which exceeds the California average by 2.8 percentage points and the national average by 0.6 points.
- 71.7% of those with high blood pressure are taking medicine to control it, which exceeds the state average by nearly 20 percentage points, and the national average by 14.2 percentage points.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

CHRONIC CONDITIONS

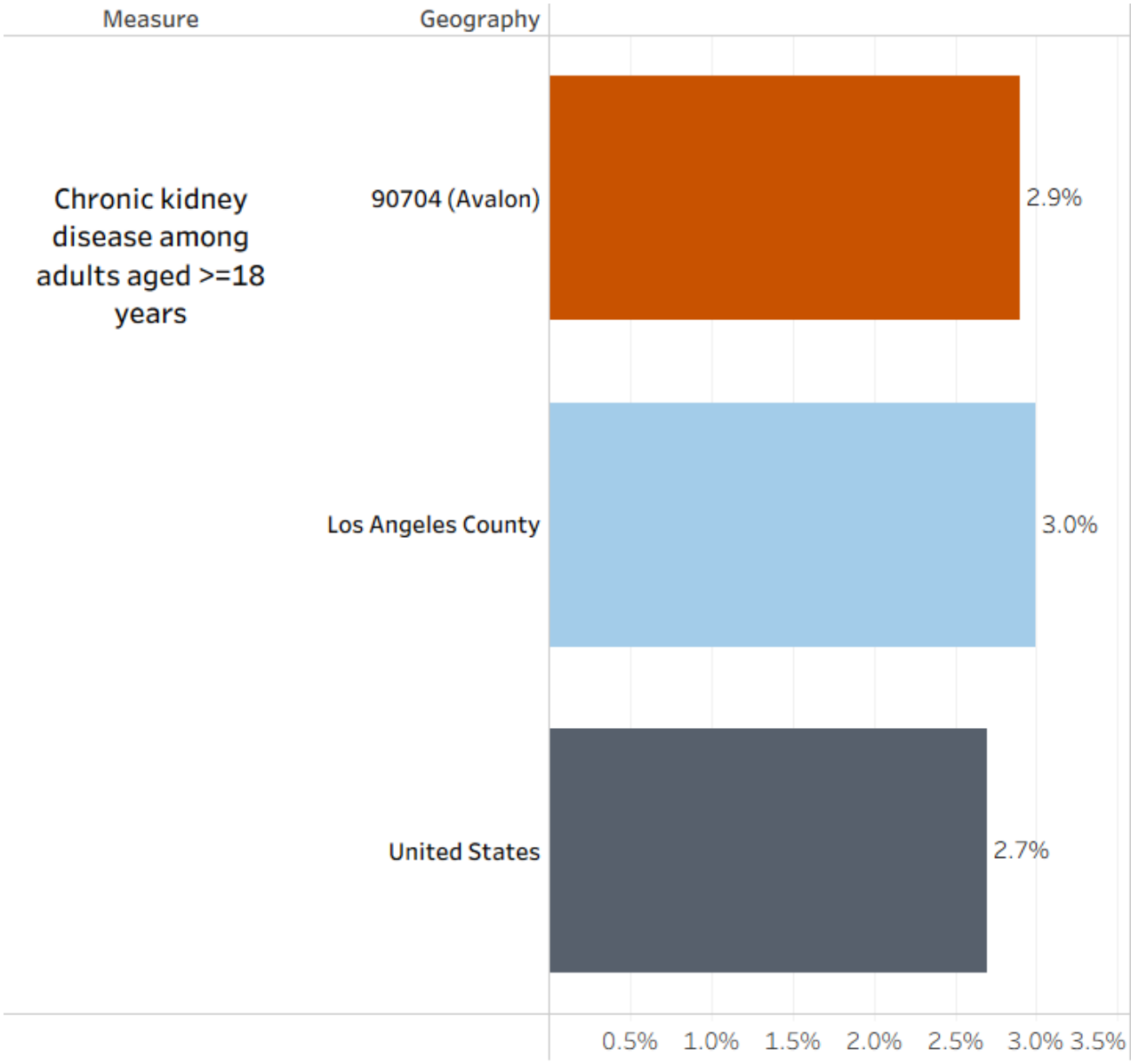
- Percentages of adult island residents who have suffered a stroke are 0.6 percentage points higher than the national average.
- Obesity percentages exceed the state benchmark by 0.8 percentage points, but are still below the national average.
- The percentage of obese adult residents is not markedly different from the prior CHNA findings.



Source: PLACES: Local Data for Better Health, 2025 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2023

CHRONIC CONDITIONS

- 2.9% of island adults have chronic kidney disease. Both the Avalon ZIP Code and Los Angeles County are not markedly higher than the United States benchmark of 2.7%.



Source: PLACES: Local Data for Better Health, 2023 release
Source Detail: Behavioral Risk Factor and Surveillance System (BRFSS), 2021, Avalon values are crude prevalence

Catalina Island Health is asking for your help in conducting a community health needs assessment (CHNA). A CHNA is a required process for a hospital to identify and analyze the health needs of the community it serves. It helps the hospital prioritize strategy and services to meet identified needs.

We value the opinions of our community members and hope you will take 10 minutes to submit your responses.

Your answers are confidential and your input is critical.

The survey is open to the public. Please share the survey link with other community members who may be interested in participating.

Thank you,
Catalina Island Health

CATALINA ISLAND HEALTH
An affiliate of UCI Health

TAKE THE COMMUNITY HEALTH NEEDS ASSESSE SURVEY!

Use the camera app on your smar the QR Code above and open

PLEASE RESPOND BY APRI

CATALINA ISLAND HEALTH

An affiliate of UCI Health

Catalina Island Health Community Health Survey

Encuesta de Salud Comunitaria de Catalina

unos 5 minutos.

1. How easy is it to get health care on Catalina Island?
¿Qué tan fácil es obtener atención médica en la Isla Catalina?

- ○ Very easy | *Muy fácil*
- ○ Easy | *Fácil*
- ○ So-So | *Más o menos*
- ○ Hard | *Difícil*
- ○ Very Hard | *Muy difícil*

2. How good is the health care here?
¿Qué tan buena es la atención médica aquí?

SURVEYS AND INTERVIEWS

SURVEY RESULTS

An online survey helped to capture a broader understanding of the community's perception of healthcare issues and challenges on Catalina Island. The survey was distributed by CIH via a weblink, email, and local postings, and was promoted at a health fair hosted by CIH. A QR Code was created and posted so users can easily access the survey on their mobile phones. Some facts about the survey respondents:

- **183** people responded to the survey, a much higher response rate compared to 2023, which had 69 respondents.
- Most (**36.6%)** respondents were between the ages of 45 and 64. **17%** were under age 45.
- **74.7%** were female.
- **91.8%** were full-time residents of Catalina Island. **1.6%** commuted to the island for work.
- **78%** described themselves as White, and **19.8%** were Multiracial or Multicultural.
- **26.6%** described themselves as Hispanic or Latino.
- **51.1%** described their own health as Good.
- **67.6%** had private insurance and **23.1%** had Medicare.
- **57%** had at least some college education.
- Just over **43%** reported an annual income of more than $100,000.

SURVEY RESULTS

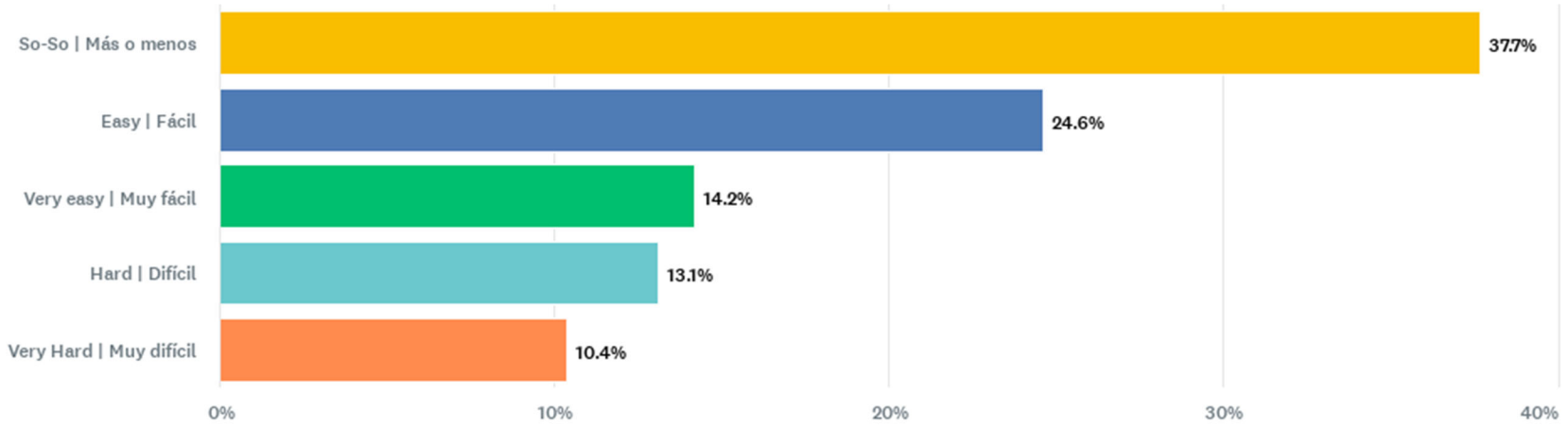
Key Findings	
Access	37.7% said ease of access to care on Catalina Island was “So-So”
Quality	37.7% also described the quality of care on Catalina as “So-So”
Barriers to On-Island Care	53% said cost was a barrier to local care, followed relatedly by “Insurance not accepted” at 37.6%
After Hours	41.5% picked the CIH ED as their choice for after-hours care on the island
Off-Island Care	91.3% said they went off-island for care in the past 3 years
Reason for Off-Island Care	61.8% chose “Service not available here” as the reason for going off-island, and 53.5% picked “Better specialist care”
Barriers to Off-Island Care	51.8% said the cost of the boat/ferry/flight was the hardest part about going off-island for care
Community Concerns	“Drugs or alcohol use” (75.8%) and “Mental health/anxiety/depression” (57.9%) where chosen as the biggest health problems on the island
Top 3 CIH Needs	“Specialist care on-island” (64.2%), “Dental care” (50.3%), and “Mental health/counseling services” (33.5%) were the 3 things CIH should improve in the next 3 years, although “Women’s health”, “More clinic hours”, and “Senior care” had similar percentages to mental health needs

SURVEY RESULTS

Q1

183 responses

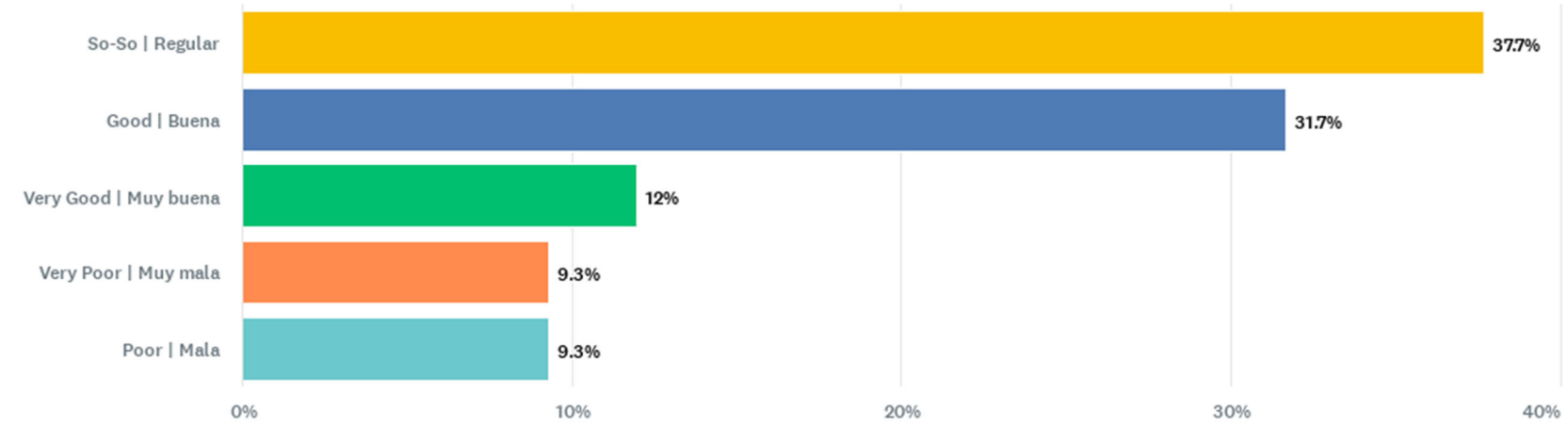
How easy is it to get health care on Catalina Island?¿Qué tan fácil es obtener atención médica en la Isla Catalina?



Q2

183 responses

How good is the health care here?¿Qué tan buena es la atención médica aquí?

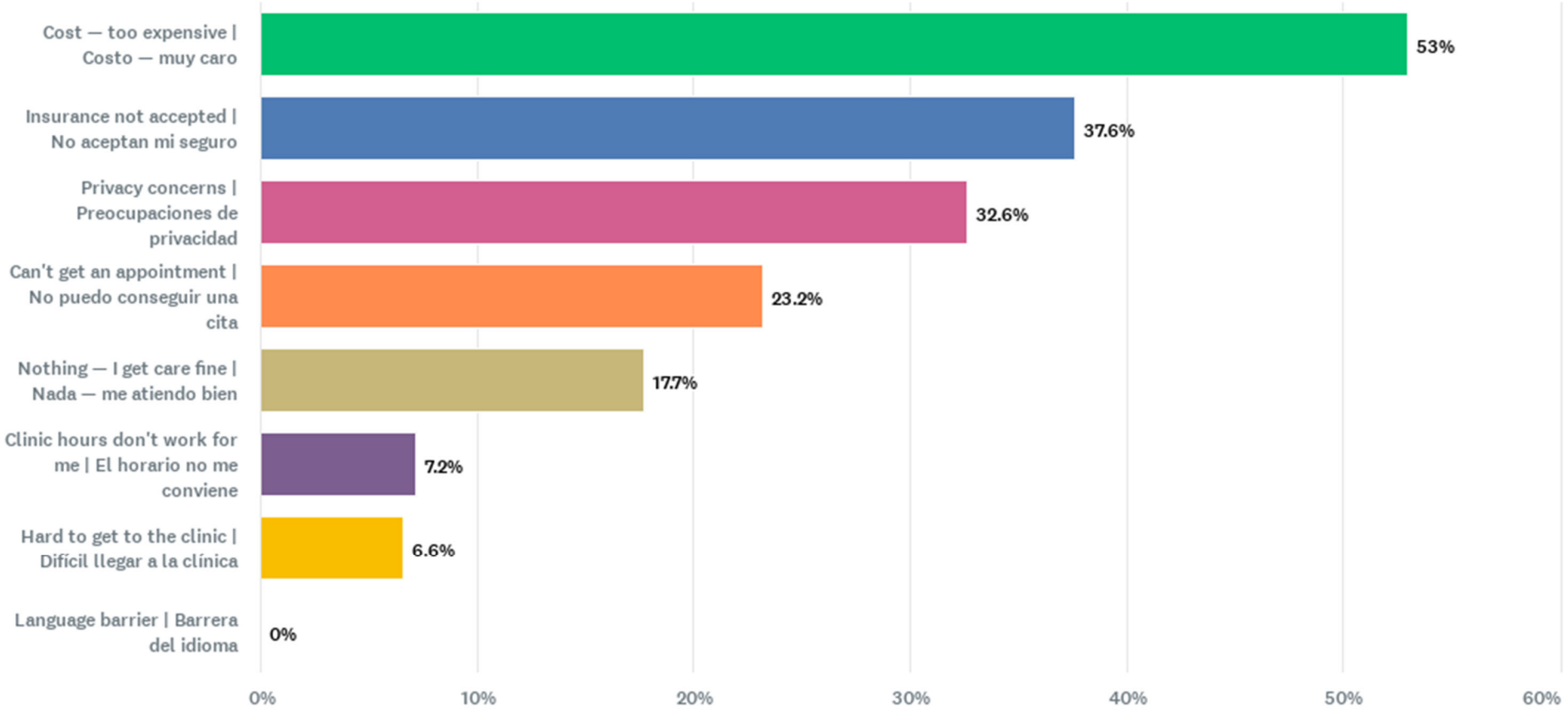


SURVEY RESULTS

Q3

181 responses

What has STOPPED you from getting care on Catalina? (check all that apply)¿Qué le ha IMPEDIDO recibir atención en Catalina? (marque todo lo que aplique)

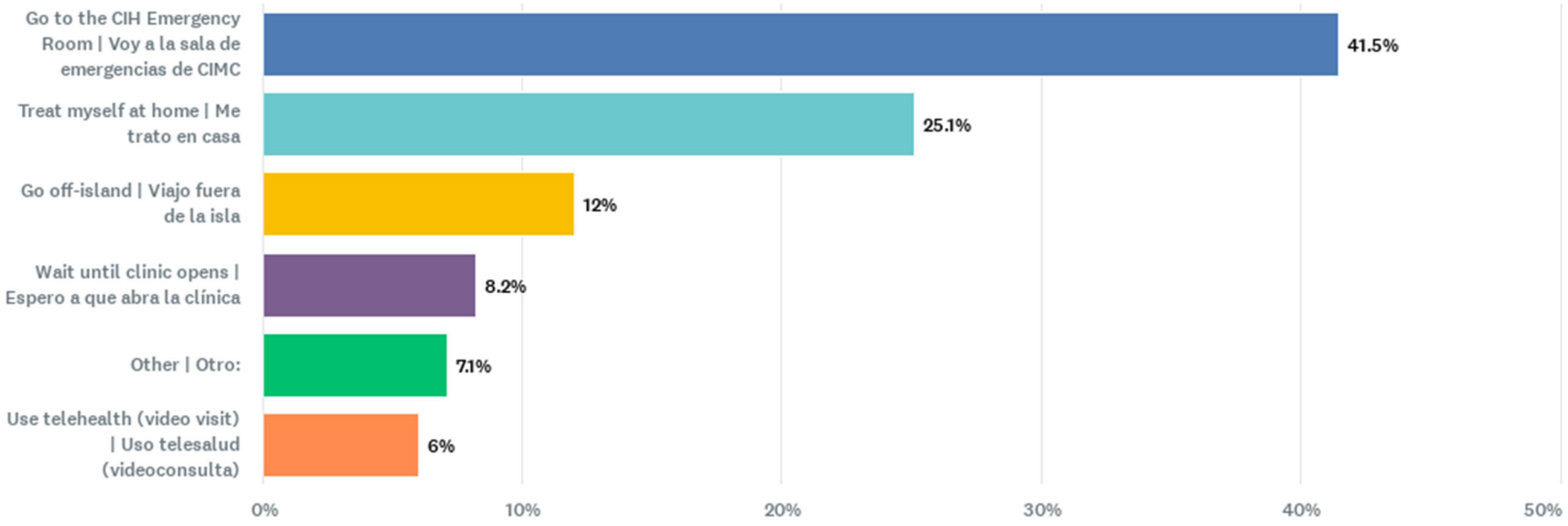


SURVEY RESULTS

Q4

183 responses

When you need care after hours (nights or weekends), what do you do FIRST?Cuando necesita atención fuera de horario (noches o fines de semana), ¿qué hace PRIMERO?

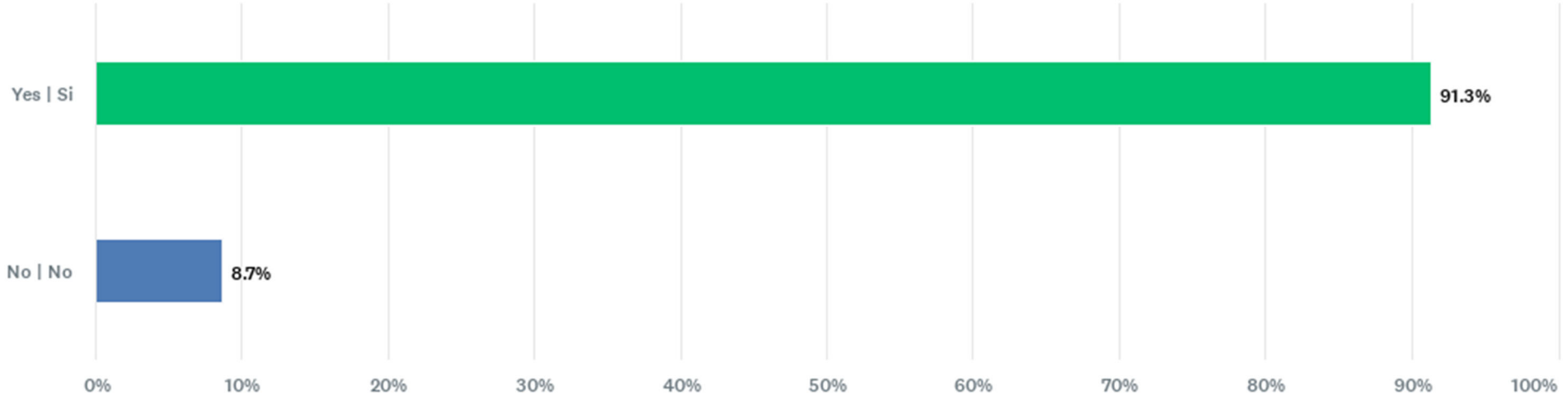


SURVEY RESULTS

Q5

183 responses

In the past 3 years, did you go off-island for health care? | En los últimos 3 años, ¿salió de la isla para recibir atención médica?

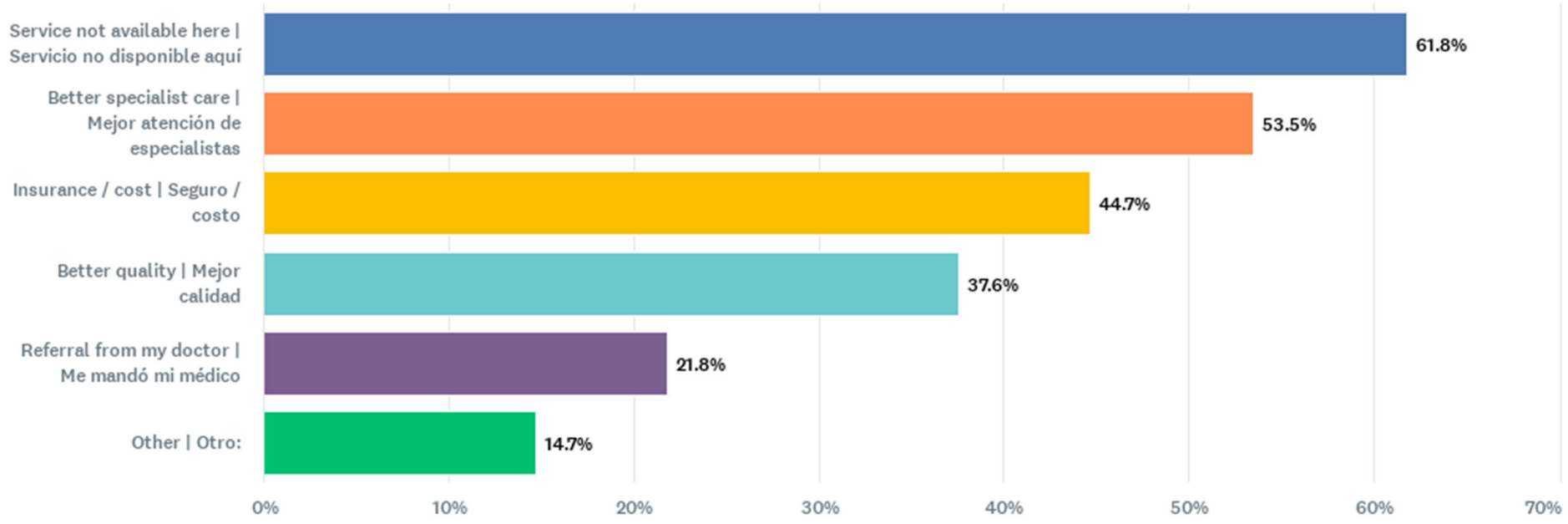


SURVEY RESULTS

Q6

170 responses

If YES — why did you go off-island? (check all that apply)Si SÍ — ¿por qué salió de la isla? (marque todo lo que aplique)

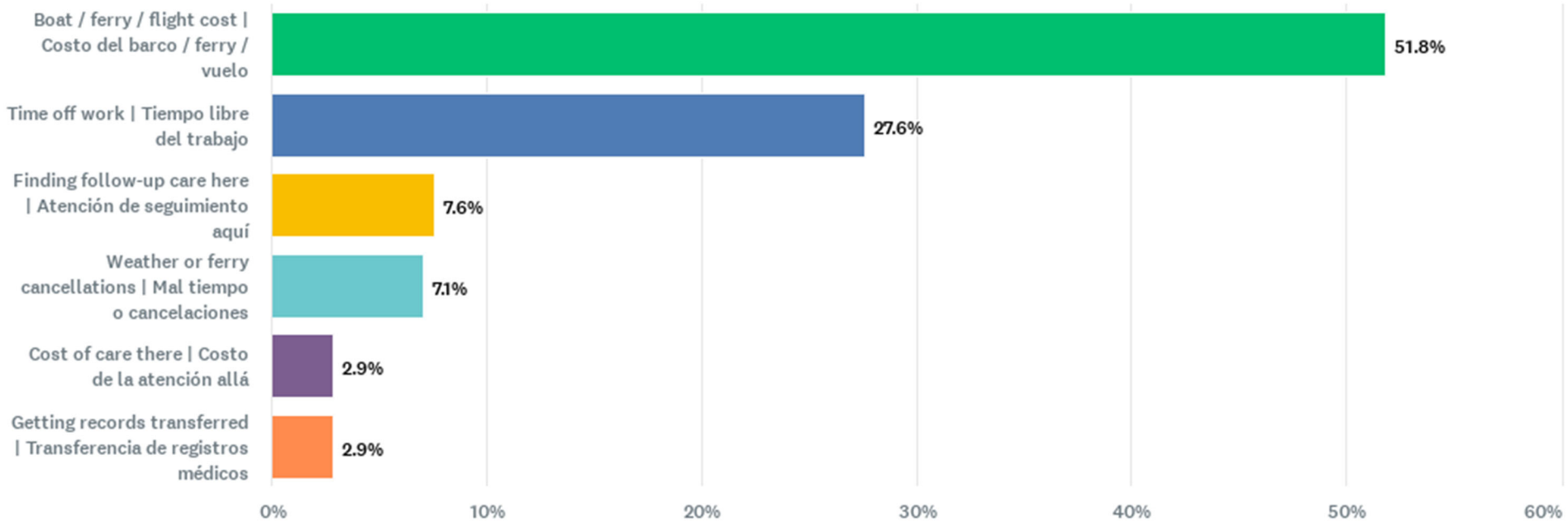


SURVEY RESULTS

Q7

170 responses

If YES — what was the HARDEST part about going off-island? (pick 1)Si SÍ — ¿cuál fue la parte MÁS DIFÍCIL de salir de la isla? (elija 1)

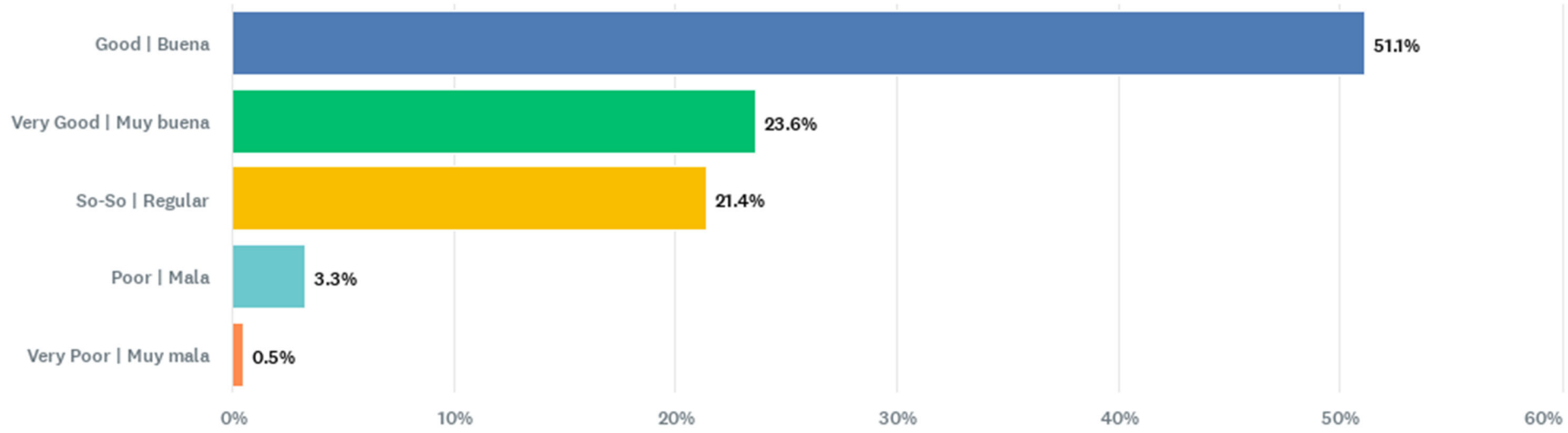


SURVEY RESULTS

Q8

182 responses

How would you describe your own health?¿Cómo describiría su propia salud?

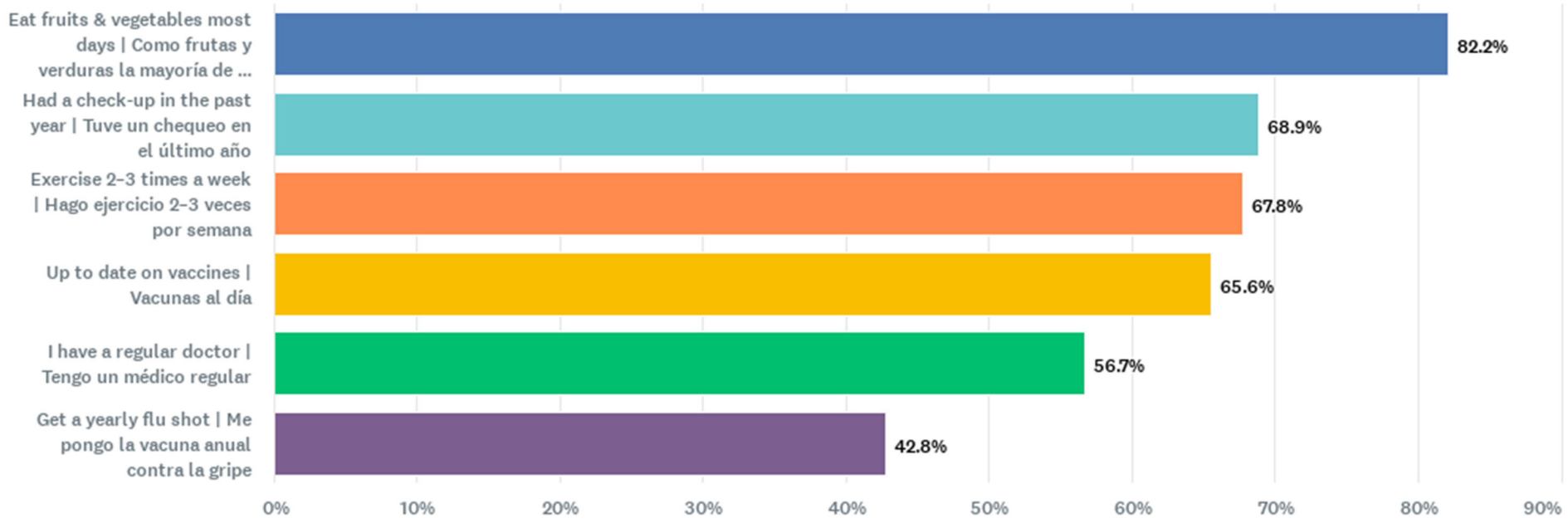


SURVEY RESULTS

Q9

180 responses

Check the healthy habits you do regularly: (check all that apply)Marque los hábitos saludables que practica regularmente: (marque todo lo que aplique)

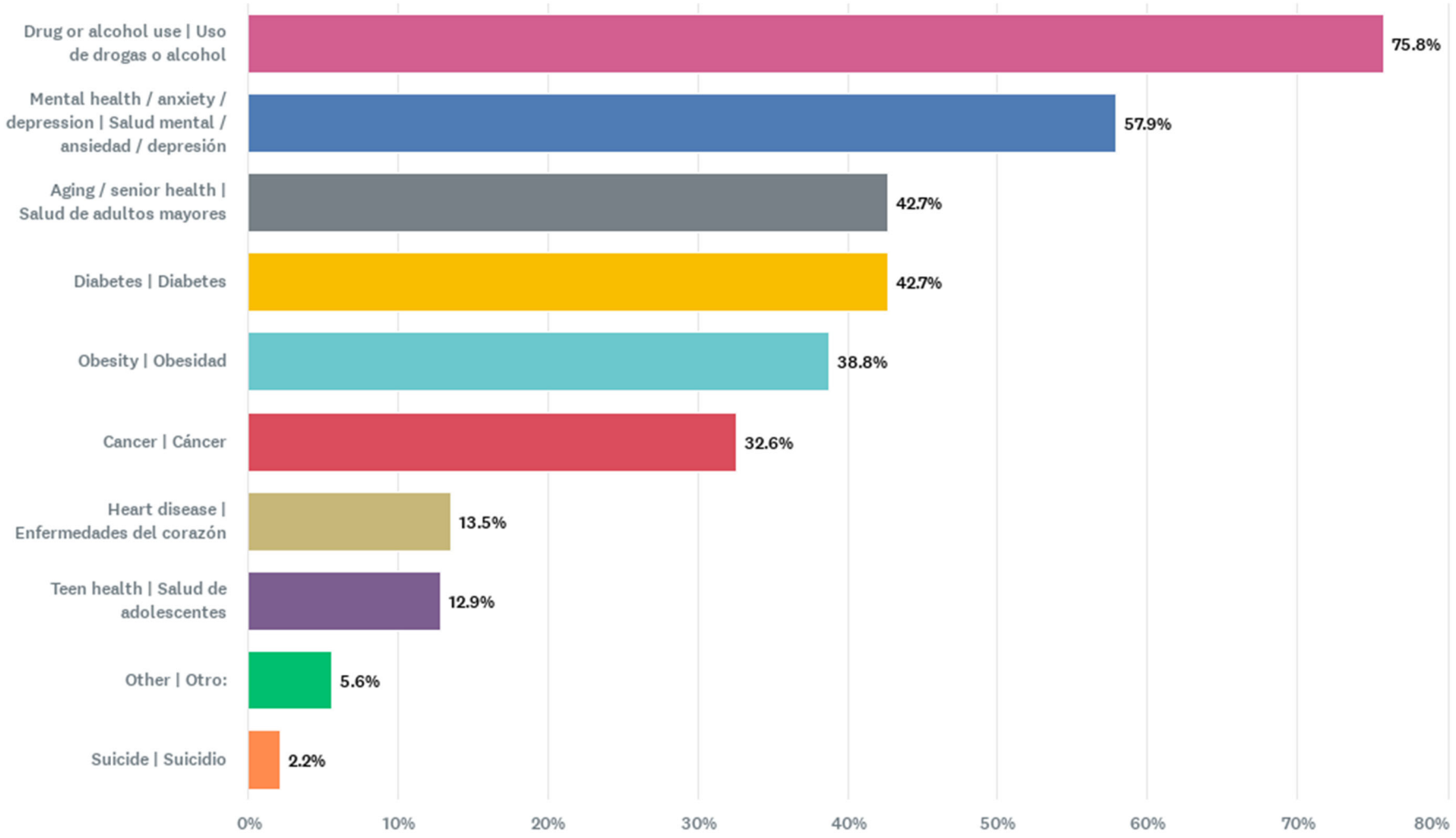


SURVEY RESULTS

Q10

178 responses

What are the BIGGEST health problems in your community? (pick up to 3)¿Cuáles son los MAYORES problemas de salud en su comunidad? (elija hasta 3)

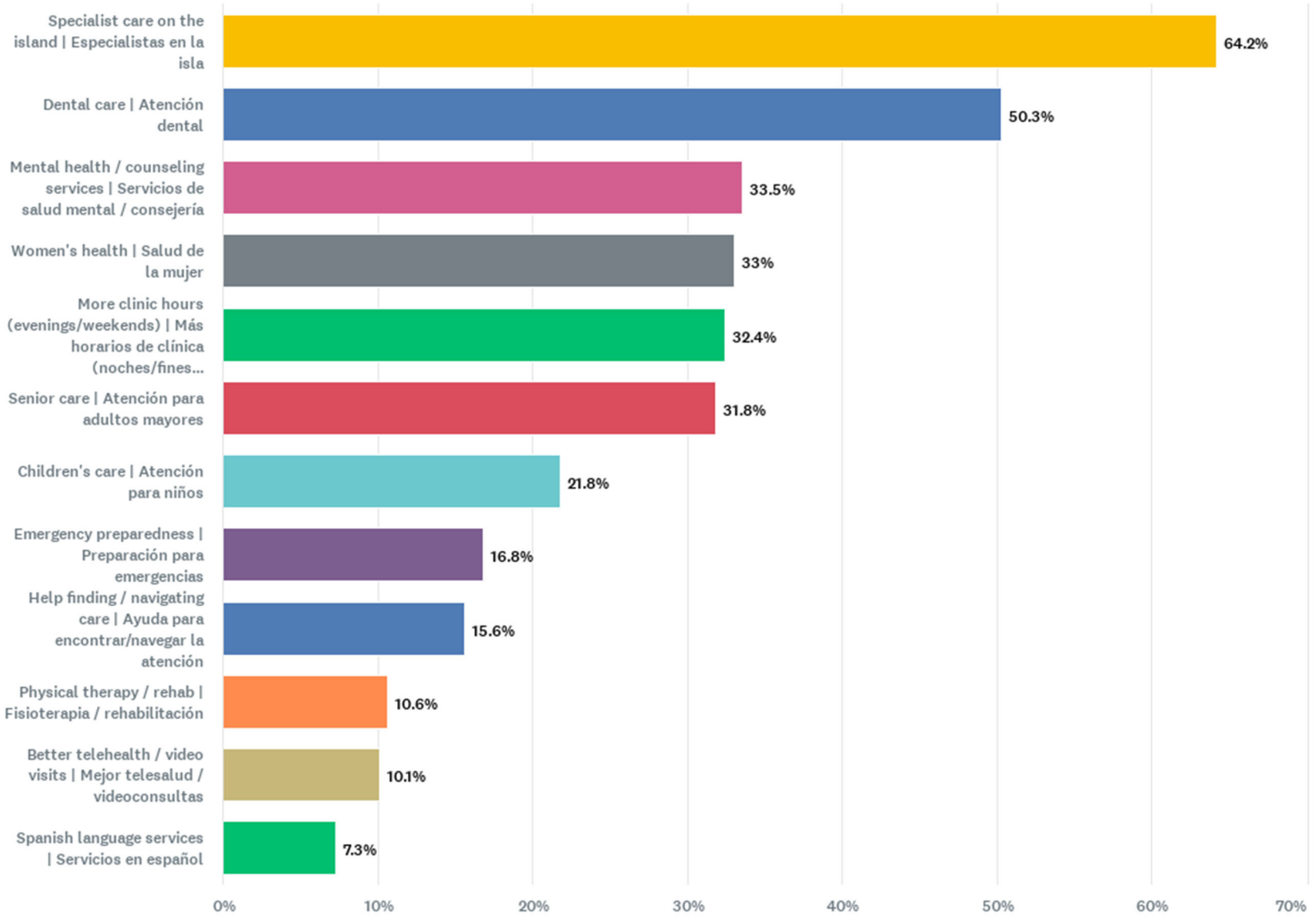


SURVEY RESULTS

Q11

179 responses

Pick the TOP 3 things CIH should improve in the next 3 years:Elija las 3 cosas MÁS IMPORTANTES que CIH debe mejorar en los próximos 3 años:



SURVEY RESULTS

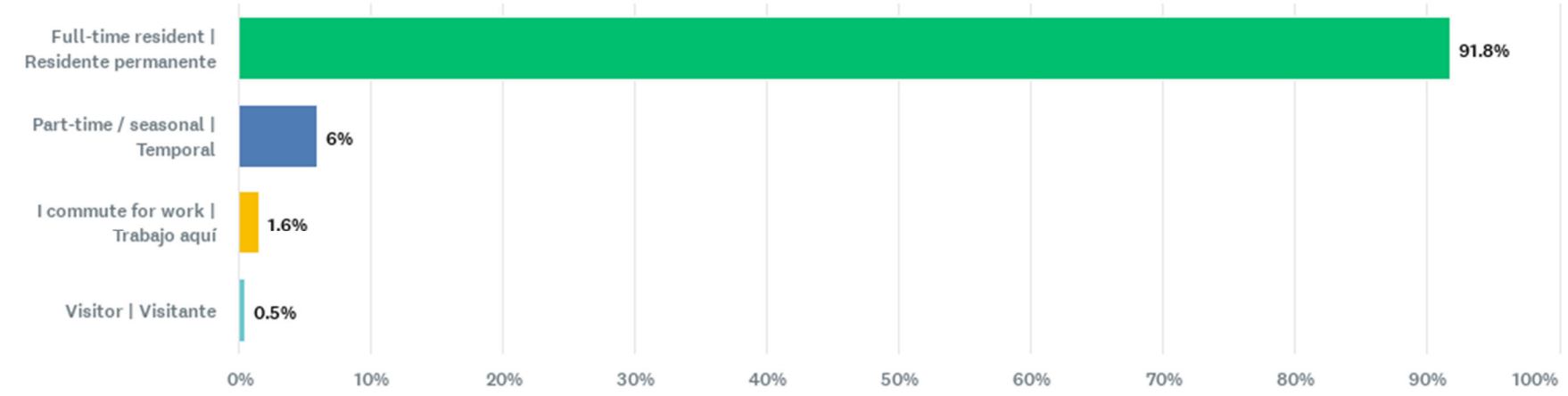
- Of those, which is YOUR #1 priority? De esas opciones, ¿cuál es su prioridad #1?

SURVEY RESULTS

Q13

183 responses

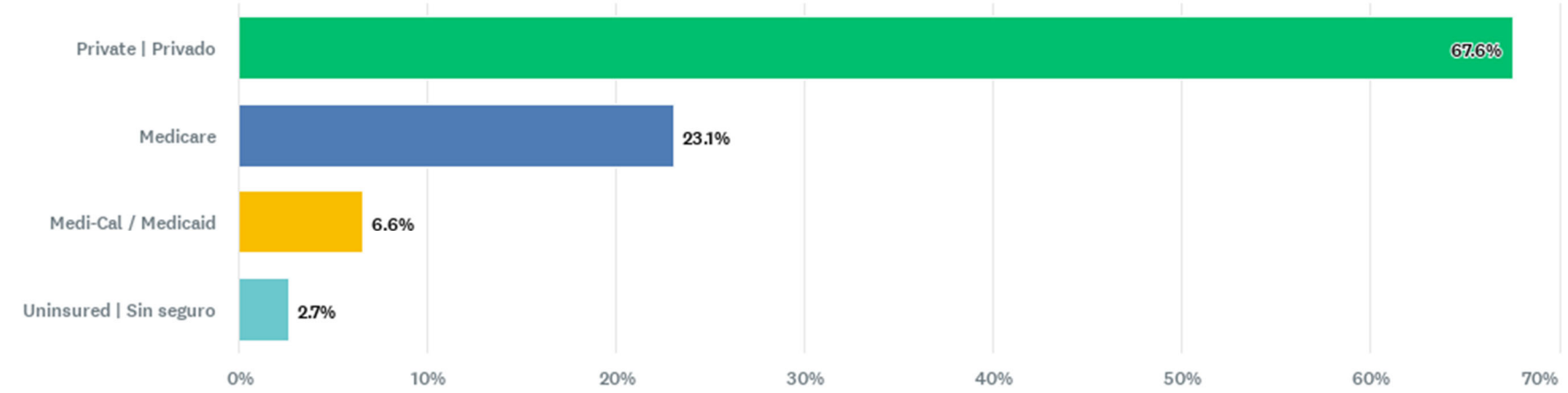
How do you live on the island?¿Cómo vive en la isla?



Q14

182 responses

Main health insurance:Seguro médico principal:

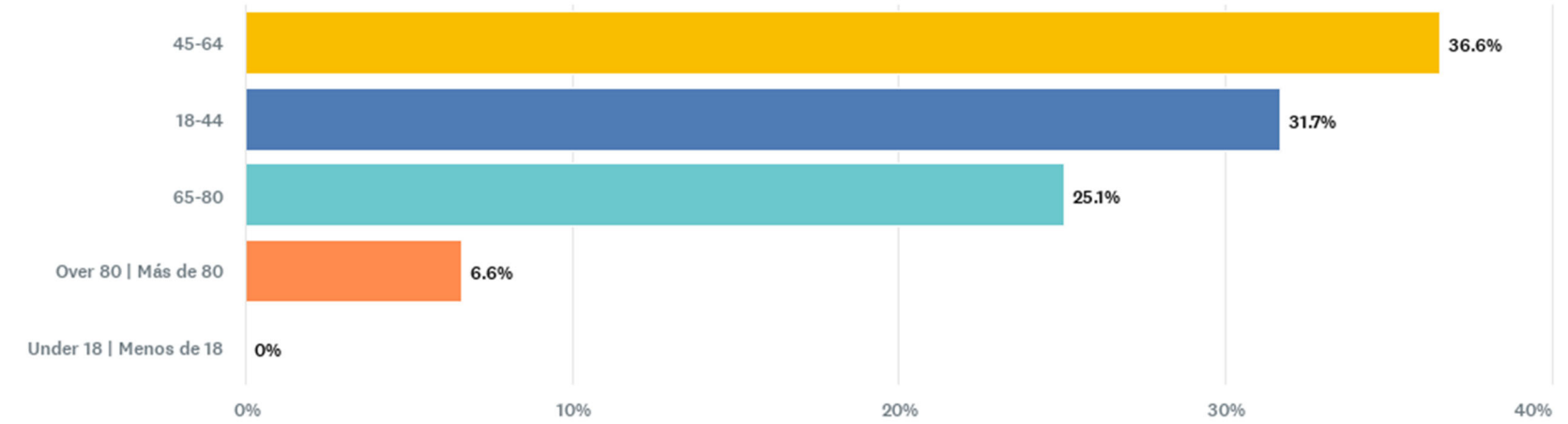


SURVEY RESULTS

Q15

183 responses

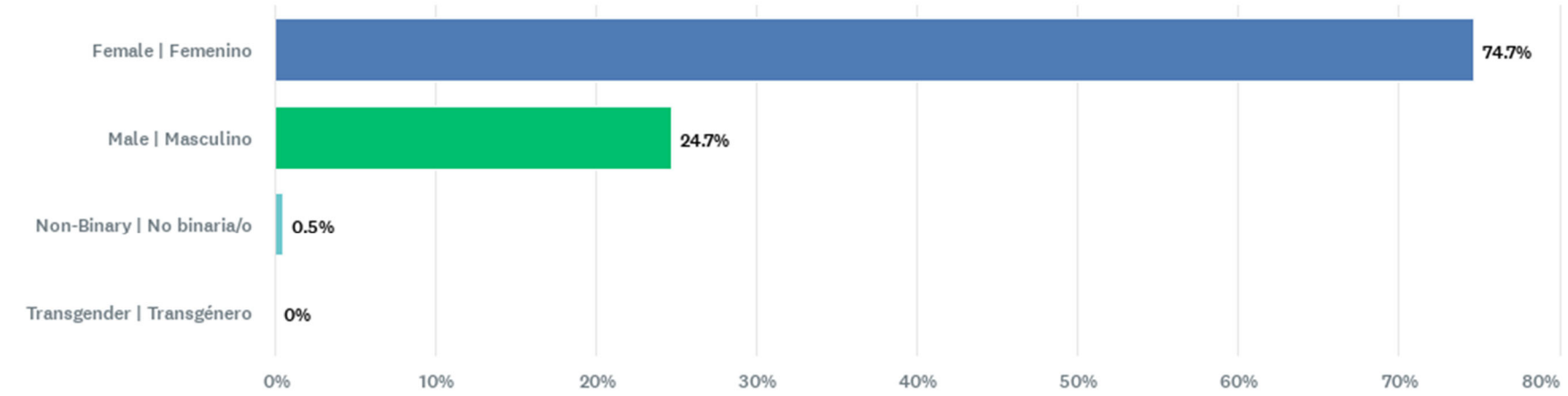
Age:Edad:



Q16

182 responses

Gender:Género:

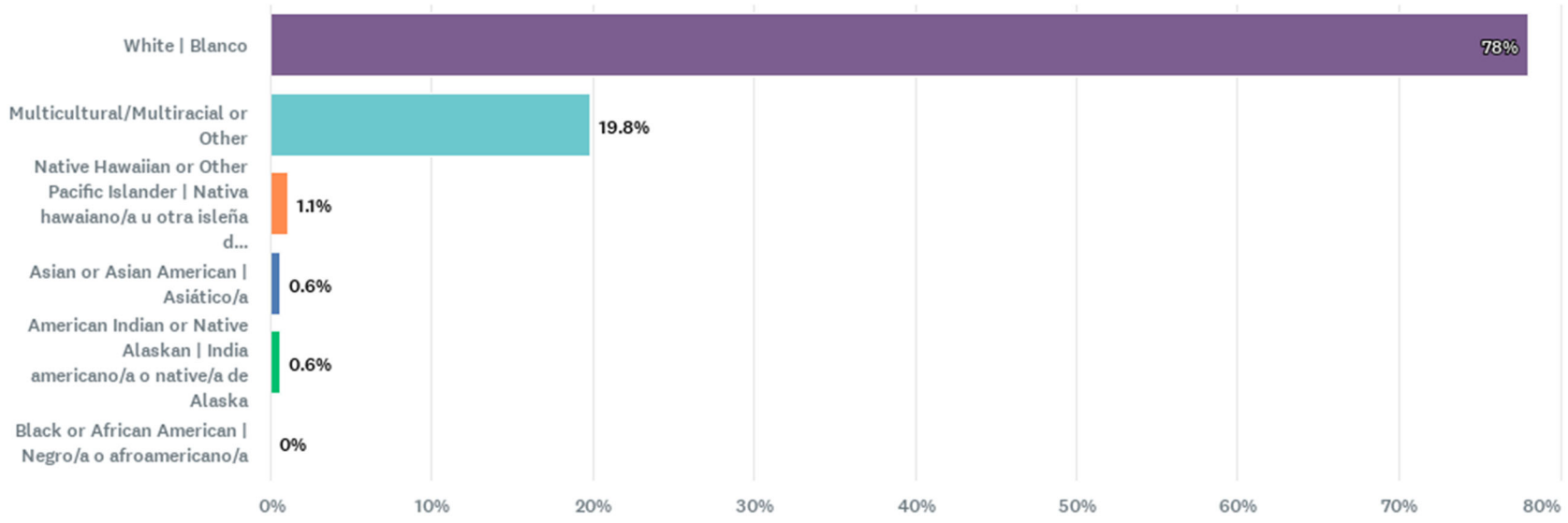


SURVEY RESULTS

Q17

177 responses

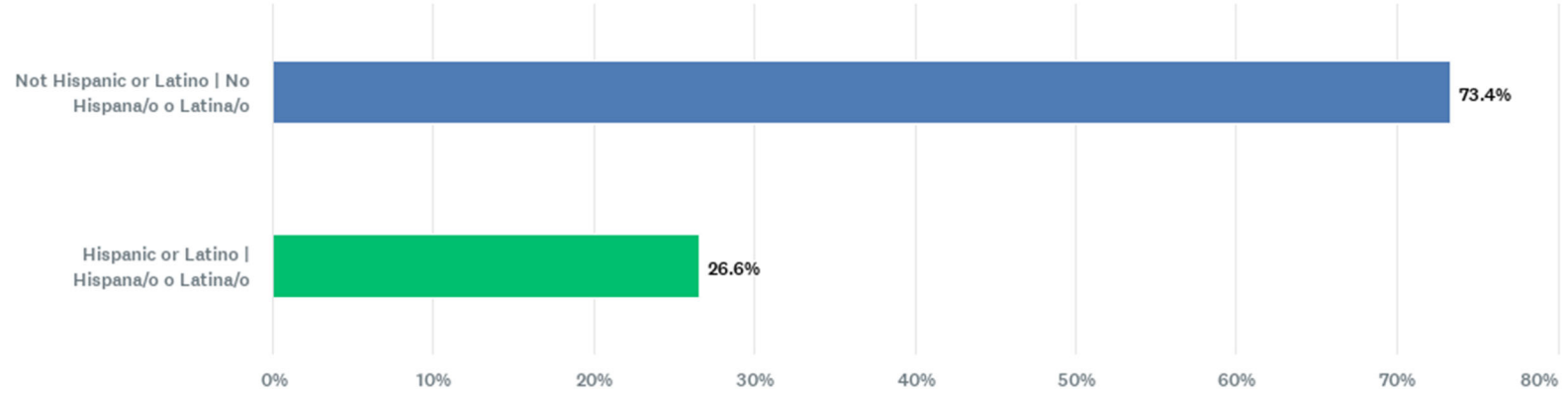
How would you describe yourself? ¿Cómo se describe?



Q18

169 responses

How would you describe yourself?¿Cómo se describe?

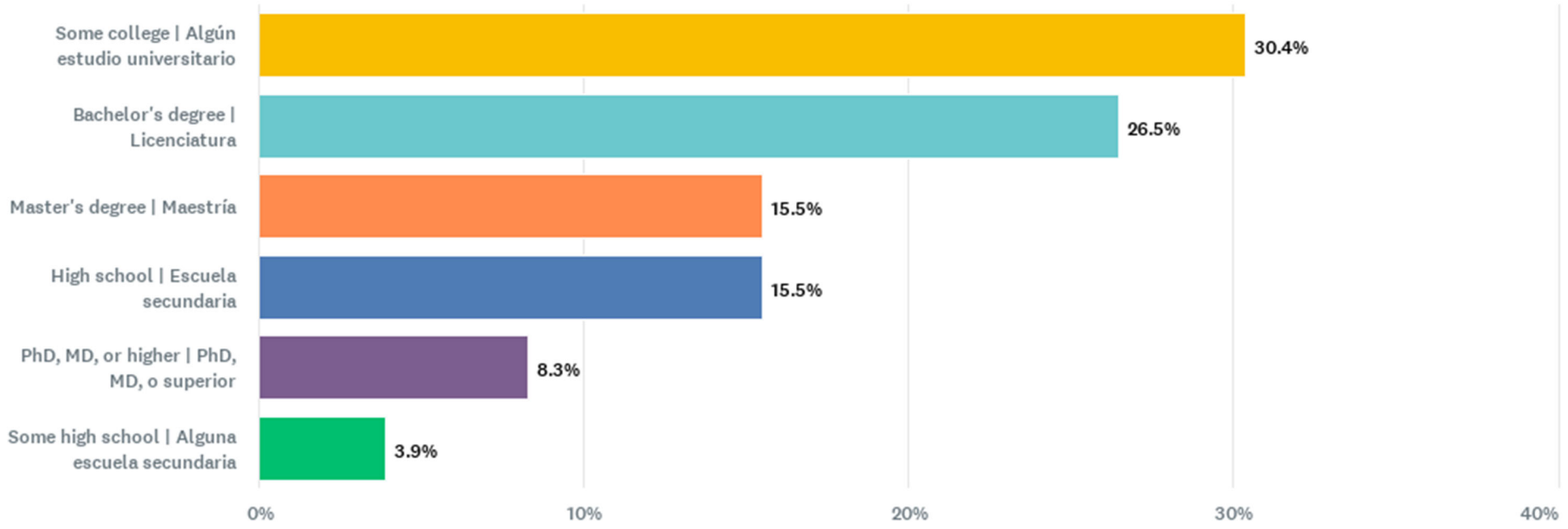


SURVEY RESULTS

Q19

181 responses

What is the highest degree or level of education you have completed?¿Cuál es el título o nivel de educación más alto que ha completado?

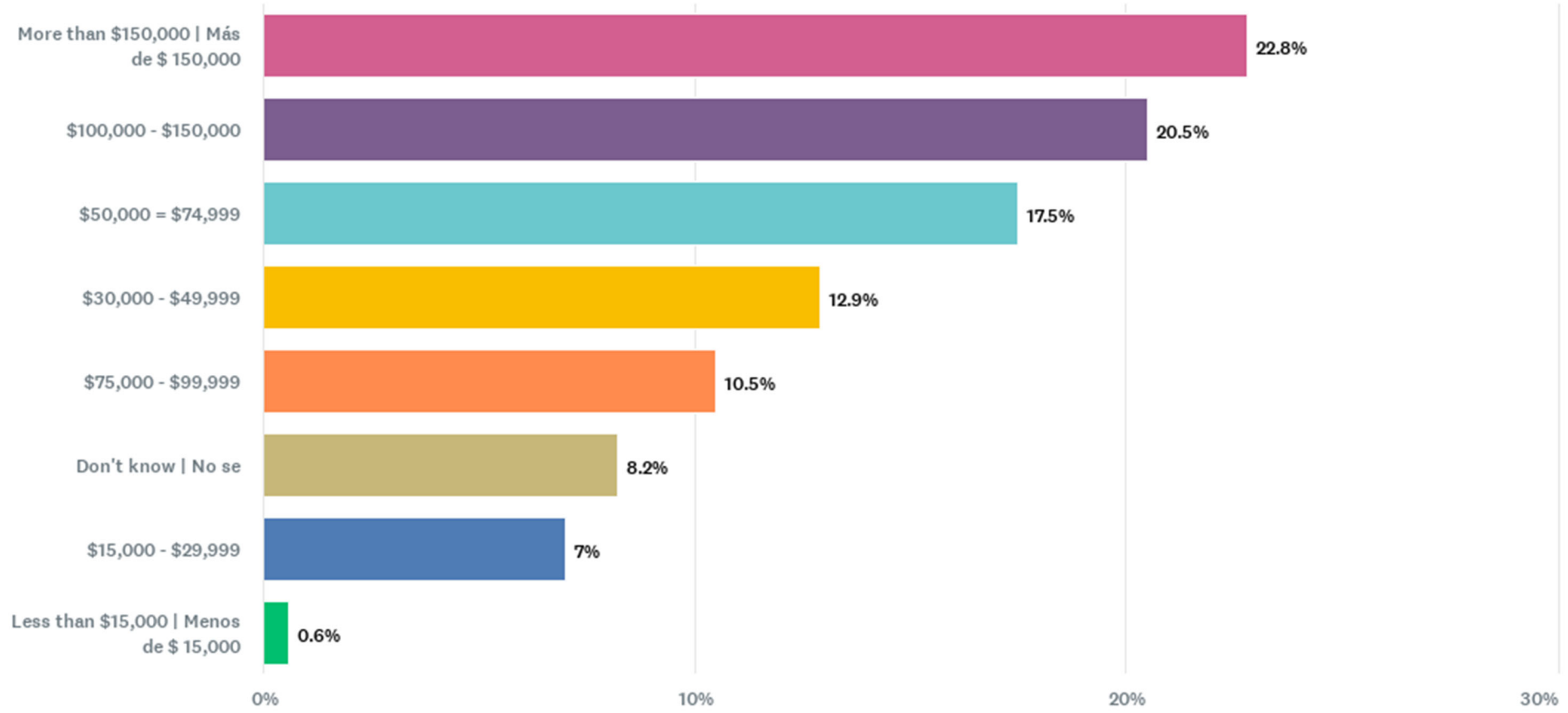


SURVEY RESULTS

Q20

171 responses

What is your annual household income?¿Cual es su ingreso anual?



INTERVIEW SUMMARIES AND THEMES

Stroudwater conducted interviews with approximately 30 community stakeholders, including community leaders, city council members, public safety officials, board members, and local leaders of tourism and nonprofits. While distilling 30 opinions into a single emphasis is not possible, some major themes emerged regarding the pressing health needs and challenges faced by island residents.

Concerns and Gaps in Care

Survey respondents reported that there are 3-4 insurance plans among the island's major employers, but not all are accepted at CIH, and even when they are, residents do not know. One repeated anecdote concerned lab costs. It was reported in interviews that on-island labs are up to 10 times more expensive than on the mainland, so residents still find it more cost-effective to travel off-island for that basic service. Travel costs off-island are still a significant concern for most, however, as are the limited transport options for emergency services. There is no dedicated boat ambulance for patients, and emergency helicopter flights are often limited by weather conditions or time of day.

Additional concerns centered on clinic and pharmacy hours, which follow a Monday-Friday operating schedule, limiting access for patients off-hours and on weekends.

The most mentioned gaps in care on the island included women's health (including pre- and post-natal care), geriatric services, and behavioral health services. Interviewees would like to see at least part-time local availability of infusion services, particularly chemotherapy and dialysis, and expanded or new part-time/visiting specialist availability, including physical therapy, pediatric dentistry, social workers and mental health counselors, dermatology, and podiatry. They noted that some of these services are available on-island, but the schedule can be inconsistent. Many agreed that expanding telehealth services is a priority for both the previously mentioned specialty services and remote diagnostics or endoscopy.

"They need to accept a variety or insurance so people don't have to travel to the mainland." – Community stakeholder

INTERVIEW SUMMARIES AND THEMES

What's Working

Several themes emerged from interviews that showed successes for healthcare delivery on Catalina Island.

Many noted that the CIH Emergency Department and Clinic provided quality care and are staffed by dedicated, knowledgeable providers. The collaboration with the University of California, Irvine (UCI) Health was seen as contributing to that quality of care.

The hospitalist program at CIH was seen as a positive, in that it helped bring continuity to the care patients received. Also lauded were the Skilled Nursing Facility and rehabilitation services offered, and the increase of swing-beds and observation utilization.

Respondents appreciated CIH's efforts to bring specialty services to the island, particularly physical therapy, and the hospital's efforts in telehealth and community education. Respondents also noted efforts to keep hospital staff local.

"Staff is professional, caring, attentive, and cautious."

– Community stakeholder

HEALTH NEEDS AND ASSOCIATED RISK FACTORS

Wrigley Memorial & Botanic Garden
Credit: Love Catalina Island Tourism Authority

Health Needs on Catalina Island

Below are the most prominent health needs on Catalina Island, based on data analysis, survey results, and stakeholder interviews.

Patient Navigation, Access, and Costs

Specialist Care

Behavioral and Mental Health

Patient Navigation, Access, and Costs

Navigating the healthcare system and its associated costs is critical for a healthy community, particularly one that is rural, older, or has demographic or health factors that can impede access to care. It is important that Catalina Island residents understand what services are available to them on-island or virtually, when those services area available, and whether the major insurance plans among island residents cover those services.

Data supporting this need:

- 52.9% of the population is Hispanic, and nearly half of residents are Spanish-speaking.
- The island's per capita income is lower than state and national averages, and an above average percentage of children and seniors are below the poverty line. 12.4% of adults lack health insurance.
- More than 9 out of 10 survey respondents said they have gone off island for healthcare in the past three years, and almost 62% said it was because the service was not available on the island.
- Many interviewees were unfamiliar with CIH initiatives like remote patient monitoring or were unsure when visiting specialists were available.
- Uncertainty around costs and insurance coverage was a recurring theme among interviewees, suggesting a need for continuing education and outreach by CIH. Interviewees noted that a lack of insurance coverage was a contributing factor for many patients who would otherwise prefer to stay on the island for care if not for that barrier.
- Survey respondents described access to care on the island as "so-so" and reported that cost was a major factor for both on-island care and a barrier to off-island care.
- Both survey respondents and interviewees noted limited clinic and pharmacy hours as a barrier to care on the island.

"Something as simple as a blood draw should not require a trip to the mainland." – Community stakeholder

Specialist Care

CIH continues to expand on its efforts to bring visiting specialists to the island, either through part-time, in-person availability, or through telehealth. CIH has instituted a remote patient monitoring and chronic condition management program, Welby Health, and should continue to identify patients and promote this service to help expand local care to island residents. Survey respondents and interviewees sought additions or expansions of the following specialties and services, with the goal of allowing residents the option to receive care without leaving the island:

- Pediatric dentistry
- Pre- and post-natal services
- Geriatric care
- Chemotherapy/infusion services
- Dialysis
- Remote endoscopy

Other specialties of emphasis based on the island's health outcomes include pulmonary care, oncology, and endocrinology.

Data supporting this need:

- The geographic and cost constraints of island living add additional pressure to challenges that face rural healthcare providers.
- Catalina has an aging population with disabilities, particularly cognitive and mobility, exceeding state and national benchmarks.
- The percentage of adults with chronic obstructive pulmonary disease (COPD), coronary heart disease (CHD), diabetes, or high blood pressure exceeds both state and national averages. Percentages of adults with obesity and stroke exceed state averages.
- Over 25% of adult residents self-report their health as "fair" or "poor," and 16% report frequent physical distress.
- Improving specialist care on the island was ranked by survey respondents as the top recommended improvement focus for CIH in the next 3 years.

Behavioral and Mental Health

Maintaining access to behavioral and mental health and related substance abuse counseling services is a challenge for many rural healthcare providers. As in the prior CHNA, this remains a challenge for Catalina Island. An additional challenge for Catalina is its island geography. A consistent interview theme regarding behavioral health and counseling services on the island was a lack of discreteness and privacy when using existing services due to the central location of the providers.

Data supporting this need:

- 21.6% of adult residents report suffering from depression
- 17.7% report frequent mental distress
- Catalina Island in designated as a Mental Health Professional Shortage Area (HPSA) with a need of 0.25 FTE mental health provider.
- 16.4% of adults report binge drinking
- Over three-quarters of survey respondents said drug or alcohol abuse was a major health problem on the island.
- 58% said mental health/anxiety/depression was a major health problem.
- Improving mental health/counseling services was chosen by survey respondents as the third-highest recommended improvement CIH should undertake in the next 3 years.

“Treating mental health and substance abuse can be a challenge in a small town with not a lot of privacy. ”

– Community stakeholder

PROGRESS TOWARDS PRIORITIES FROM PRIOR CHNA

Interior Island Cactus
Credit: Love Catalina Island Tourism Authority

Outline of Implementation Plan: Priority 1 Mental Health

Health Need	Objectives	Strategy	Resources
Mental Health	Goal II B: Ensure Adequate Supply of Primary Care Providers to Meet Service Needs	Continue to promote the availability of licensed social workers and collaborate with other providers to publicize mental health services available on Catalina Island.	Continued to utilize / provide and expand access to teletherapy
		Work to break down cultural barriers to increase patient access to provider services.	Dr. Leticia Pileski, Psychologist and Marriage and Family Therapist, created the Marriage & Family Therapy/Social Work Trainee Program which has helped break down some barriers (cultural, lifestyle, age, etc.)
		Continue to utilize and provide telepsych services.	Offer Telehealth with Mind Divers for psychiatric care
		Educate community on services available and financial options available for services.	Have educated the community about this service using ads in local newspaper, social media posts and videos, email newsletter, rack cards in English and Spanish, during the Resource Fairs held 1-2x each year

Outline of Implementation Plan: Priority 2 Housing

Health Need	Objectives	Strategy	Resources
Housing	Goal 1 B: CIH to become employer of choice in Avalon	Develop a housing policy that meets the needs of CIH and its employees	Have developed a housing policy that meets the needs of CIH employees
	Goal IV C: Improve health equity across the entire service area	Collaborate with community organizations to increase availability of long-term affordable rentals	Have collaborated with the city of Avalon for the Island Resident Resource Fair offered 1-2x each year – these have included housing rights advocacy organizations, attorneys, etc. This worked for offering some support but not necessarily increasing availability of long-term affordable rentals.
		Collaborate with organizations to increase assisted housing units on Catalina Island	Started to subsidize housing costs for those CIH positions that simply do not make enough money to afford the high rents on island. Looking into our own ways to increase housing units.

Outline of Implementation Plan: Priority 3 Specialty Access

Health Need	Objectives	Strategy	Resources
Specialty Access	Goal I C: Explore, maintain and expand services to increase patient volume and market share	• Implement hospital infusion services program • Evaluate feasibility of dialysis program • Develop comprehensive telehealth services • Create marketing campaigns around the addition of new providers and services in the community in both Spanish and English	• Added a hospitalist • Evaluated feasibility of a dialysis program • Expanded telehealth services. • Created and continue to market new providers or visiting specialists, their schedules in community via newspaper, social media, email newsletter, Athena (more targeted), as presenters for Community Health Talks, flyers around town; communicated in English and Spanish
	Goal II C: Assess specialty care needs of our service area and further develop specialty care network to meet demands	Proactively recruit specialists to come out physically and virtually to CIH	• Have added visiting specialists; currently re-evaluating to determine if contracts are beneficial to CIH and the specialists are beneficial to our community • Currently revisiting specialist contracts to include community education on specialty.
	Goal III A: Explore opportunities for mutually beneficial relationship with tertiary, regional and peer providers	Evaluate opportunities with regional providers to develop high value, mutually beneficial relationships that would benefit our service area, provide additional in person and telemedicine specialty consultation / clinic opportunities while maintaining CIH independence and flexibility to refer patients where appropriate	• Transfer agreement with Torrance Memorial • Expanded relationship with UCI to be a Clinical Affiliation in 2023

Outline of Implementation Plan: Priority 4 Care Coordination and Education

Health Need	Objectives	Strategy	Resources
Care Coordination and Education	Goal III A: Explore opportunities for mutually beneficial relationship with tertiary, regional, and peer providers	Evaluate opportunities with regional providers to develop high value, mutually beneficial relationships that would benefit our service area, provide additional in person and telemedicine specialty consultation / clinic opportunities while maintaining CIH independence and flexibility to refer patients where appropriate	• Telehealth with Mind Divers for psychiatric care is mutually beneficial and allows more telehealth for the community and more provider access. • Physical Therapists have put together a number of workout events for the community, some specialized to seniors or those with mobility challenges. • Posts on specialist and provider availability help educate the community on health services we offer.
	Goal IV D: Improve community health	Develop Community Outreach programs to improve community health (i.e., exercise programs, fitness center, yoga, nutrition, etc.)	• Community Outreach programs include: regular resource fairs bringing mostly county services over to introduce residents to them, free classes for seniors (60+) in strength training, chair yoga, dance, tai chi, etc., Community Health Talks about nutrition, diseases, street drug awareness, tips, etc., plus educational events like CPR and Stop the Bleed • Have a relationship with Tarzana Treatment Center • Work with insurance companies and community programs to help patients travel to the mainland for their specialist appointments.
		Look at opportunities for greater coordination of care for patients between the hospital, and other health organizations in the community that can contribute substance abuse support, mental health support, consistent follow up treatment, and housing.	
		Further education on health services available and healthy eating behaviors, such as nutrition services. Publicize services through primary care physicians and social media.	

APPENDIX

IRS REQUIREMENTS FOR CHNA

- The Internal Revenue Service requires hospitals to conduct a CHNA every three years. Below are the IRS requirements from Schedule H Form 990, Part V, Section B, with the corresponding section from this report:

Item	Description	Slides
3a	A definition of the community served by the hospital facility	15
3b	Demographics of the community	13 -24
3c	Existing healthcare facilities and resources within the community that are available to respond to the health needs of the community	60
3d	How data was obtained	10
3e	The significant health needs of the community	11 - 101
3f	Primary and chronic disease needs and other health issues of uninsured persons, low-income persons, and minority groups	72 - 80
3g	The process for identifying and prioritizing community health needs and services to meet the community health needs	10
3h	The process for consulting with persons representing the community's interests	10
3i	The impact of any actions taken to address the significant health needs identified in the hospital facility's prior CHNA(s)	107 - 111