

SA2020[®]

IMPACT REPORT

2018

RIPPLES OF CHANGE

Dear San Antonio,

How do you change a city? You ask the people there what matters to them. You listen. You plan. And then you move—together.

San Antonio is the only large city in the United States that has a community vision developed by the people who call our city home, a nonprofit organization responsible for driving progress toward that vision, and more than 160 multi-sector partner organizations actively aligning to that vision.

This coordination is essential because Community Results cannot be achieved by one organization working alone. This coordination also reflects the shared responsibility envisioned by the community eight years ago under Family Well-Being:

“The entire community—individuals, businesses, local government, nonprofits, and faith-based organizations—takes responsibility for our collective well-being...”

Today, we know 70% of the community indicators we track to measure success on our shared vision are moving in the right direction. We also know that we have more work to do.

This report, delivered annually, is part of SA2020’s organizational strategy to redesign, and even disrupt, the way results are achieved. We do this, in part, by telling San Antonio’s story—the whole story.

The story that shows we are one of the top cities for college-educated millennial growth and number one in income segregation. The story that shows our tech industry is booming and our underemployment rate remains flat, well below our goal. The story that shows that we will double our population in the next 20 years and over one-third of our current population is burdened by housing costs.

At SA2020, we celebrate our collective successes and we highlight our shared challenges. We are committed to holding the community accountable to making progress toward our shared goals. We ask funders to replace transactions to nonprofits with strategic partnerships that improve people’s lives. We elevate complex community challenges that touch all Cause Areas: internet access that allows our students to apply for college without additional barriers; complete streets that help our families get to school and work safely by walking, riding, or wheeling as they need; neighborhood development that allows for mixed-income housing that won’t displace our neighbors.

Thank you for reading this report and making a commitment to learn even more about San Antonio. By transparently reporting on San Antonio’s progress toward our shared vision, the entire community is able to see where we are making strides and where we are falling short, always able to advocate for and lead change. At SA2020, we believe everyone is capable of affecting change, including you.

Let’s do this!



Ryan T. Kuhl
Chair, Board of Directors, SA2020

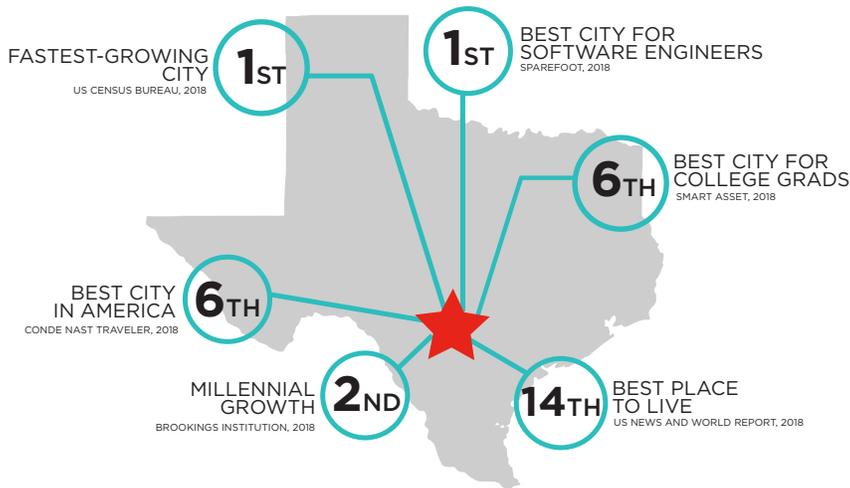


Molly Cox
President & CEO, SA2020



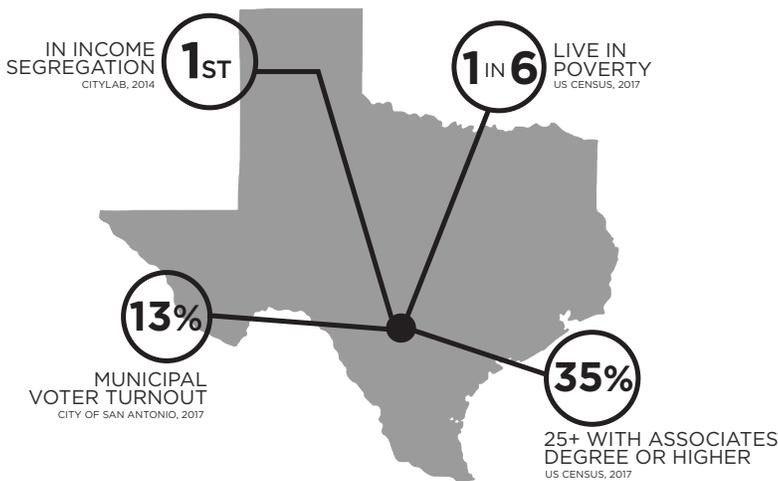
HOW TO READ THIS REPORT

Together, we envisioned a stronger San Antonio where students are provided quality educational opportunities no matter where they live, and economic prosperity is available to anyone in our community because of workforce development efforts and job potential. And we want connected neighborhoods where our families thrive and our residents are healthy. This future was not envisioned for just some in our community, but for everyone in our city.



Today, this is San Antonio.

Sixty-six people are born in or move to our city every day. In fact, we'll nearly double in size by the year 2040. San Antonio is a city of artists and innovators, and of rich culture and history. In our downtown, we just saw an investment of \$57 million in a local university that includes building a school of data science. San Antonio is second in cybersecurity—only after Washington DC, which is all right with us, really—and our unemployment rate is now under four percent. San Antonio is one of the top cities for college-educated millennial growth. And we worked together to make these things happen.



This is also San Antonio.

We are one of the leading cities for income segregation. Residents on one side of town have a shorter lifespan—by more than 20 years—than residents on another, more affluent side of our city. In addition to income and geography, race is a predictor of our community's outcomes. In San Antonio, more than one-third of our residents are burdened by housing costs, and one in six people—one in five children—live in poverty. Still, there are people in our community actively working to change these things. Together.

Change doesn't come without understanding how policies and services have historically neglected low-income communities and communities of color. In order to affect change, San Antonio must take collective responsibility for advancing community results. Change happens when we acknowledge and agree to address root causes of our community's greatest challenges. And if these challenges seem complex and big, they are. And yet...we each have the ability to affect change.

That said, to simply read this report as merely gauging “up” or “down” movement on community indicators, misses the full story of our community’s collaborative progress and collective efforts to date.

As you read, pay attention to how the 11 Cause Areas are all related and how the success of one can impact another. How incremental change in arts education, for example, can pay dividends in economic development; how an understanding of housing affordability can influence policy changes in educational attainment; and how park access can stimulate better health outcomes.

Flip to a Cause Area that’s most important to you. As you read through the Community Indicators, we ask you to also incorporate the Impact Narratives, which will paint a broader understanding of the connection between Cause Areas. Once you reach the City of San Antonio profiles, with 20 data points specific to approximated Council Districts, complement your understanding with the corresponding Cause Area sections.

Further still, in our first ever Nonprofit Partner Impact Summary, you can find a local nonprofit organization that may provide you an opportunity to move the needle on the areas that are most important to you through board service, volunteerism, and philanthropic giving.

As you read this report, we invite you to **be curious**. Ask yourself: “Why is this indicator moving?” “Why is this Cause Area lagging?” “Why do we care about this?” “What am I doing to help move the needle?” “What current programs and policies could be shifted to account for different histories and needs of our communities?” Then, **we urge you to take action**:

- 1 Become an SA2020 Partner. We partner with nonprofits, foundations, government, corporations, public institutions, higher education institutions, and member or trade organizations. SA2020.org/get-involved
- 2 Mark your calendars for May 4, 2019—Election Day—and vote. Last day to register to vote for this municipal election will be April 4, 2019. ilovesanantonio.org
- 3 Connect to SA2020 Nonprofit Partners and volunteer your time. SA2020.org/partners
- 4 Apply to serve on a city board or commission. sanantonio.gov/Clerk/Legislative/BoardsCommissions
- 5 Give to SA2020 Nonprofit Partners. SA2020.org/partners
- 6 Connect to SA2020 year-round by joining our Community Circles. bit.ly/SA2020circles
- 7 Participate in The Big Give on March 29, 2019. TheBigGiveSA.org

 Met & Exceeded	 On Track	 Progress	 Flat/Getting Worse
The SA2020 target has already been reached!	We’re making progress at a pace that will lead us to achieve the SA2020 target!	We’re moving in the right direction, but not moving rapidly enough to achieve the SA2020 target.	We’re seeing no progress, and in some cases even moving in the wrong direction.



HEALTH & FITNESS



In 2020, San Antonio residents are among the healthiest in the country.

San Antonio promotes well-being by providing healthy and affordable food choices, convenient access to green spaces and recreational facilities, and a robust network of physical and mental healthcare designed to eliminate existing health disparities in the community.





INDICATOR SNAPSHOT	
	Reduce Obesity
	Improve Maternal and Child Health
	Reduce Diabetes Rate
	Reduce Teen Birth Rate
	Increase Access to Health Care
	Reduce Health and Behavioral Risks

63%

 of SA2020

 Nonprofit Partners

 impact

 Health & Fitness



Reduce Obesity

Goal: Decrease the adult obesity rate by 10%

Goal Quantified	Baseline (2011)	Update (2017)
29.8%	33.1%	32.1%

Source: Texas Department of State Health Services

Progress towards meeting the 2020 goal to reduce obesity in San Antonio has varied year to year, and while this year appears better than last, the uncertainty that comes from small-sample surveys complicates interpretation. Each estimate from survey data comes with a margin of error, or confidence interval, and it's only that interval that can be trusted. For 2017, while the estimate is 32%, we can only be confident that the true percentage is somewhere between 25% and 40%. The range for 2016 was 32%-44%. Because those ranges overlap each other, we can't be sure that any change really occurred from 2016 to 2017. To understand how San Antonio is progressing—or not—on reducing obesity, the survey's sample size must be larger.



Improve Maternal and Child Health

Goal: Decrease pre-term births by 10%

Goal Quantified	Baseline (2010)	Update (2015)
11.5%	14.4%	11.9%

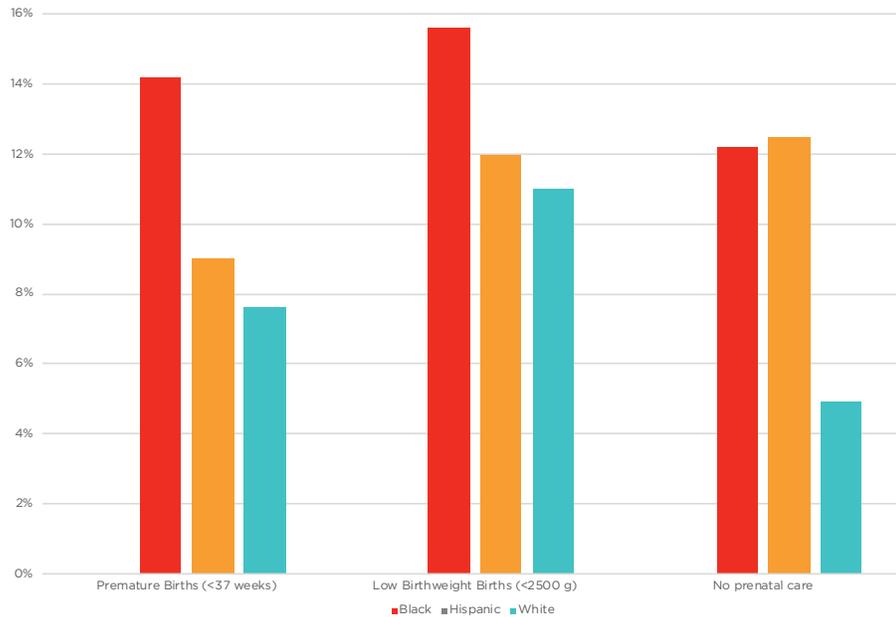
Source: San Antonio Metropolitan Health District

While we see an overall improvement in maternal and infant health, when we look at the data disaggregated, it becomes clear that we need better interventions to address the disparities that further exist by race/ethnicity. For example, of total births to Black women 14.2% were premature, 15.6% were low birthweight, and 12.2% had no prenatal care, higher than total births across the board.



Births for Women of All Ages by Race/Ethnicity in Bexar County, 2015

Source: Texas Department of State Health Services, Online Query System (<http://healthdata.dshs.texas.gov/VitalStatistics/Birth>)



Reduce Diabetes Rate

Goal: Decrease percentage of adults with diabetes by 10%

Goal Quantified	Baseline (2011)	Update (2016)
11.8%	13.1%	10.7%

Source: Texas Department of State Health Services

While the estimate itself appears to show that we have exceeded our 2020 goal for reducing the rate of diabetes, this indicator relies on the same small-sample survey data as obesity and presents the same problems in trending over time. Because the confidence intervals overlap in every year since 2010, we can't say for certain that any reduction has truly been achieved. As always, more valid and reliable data remains crucial. The SA2020 Health Dividend shows that a 1% decrease in the San Antonio metro region's diabetic population—approximately 1,700 fewer people with diabetes—could result in an annual savings of \$16.1 million in medical and associated costs (CEOs for Cities, *San Antonio SA2020 City Dividends*, 2014).



Reduce Teen Birth Rate

Goal: Reduce teen birth rate by 50%

Goal Quantified	Baseline (2010)	Update (2015)
25.5	51.5	32.5

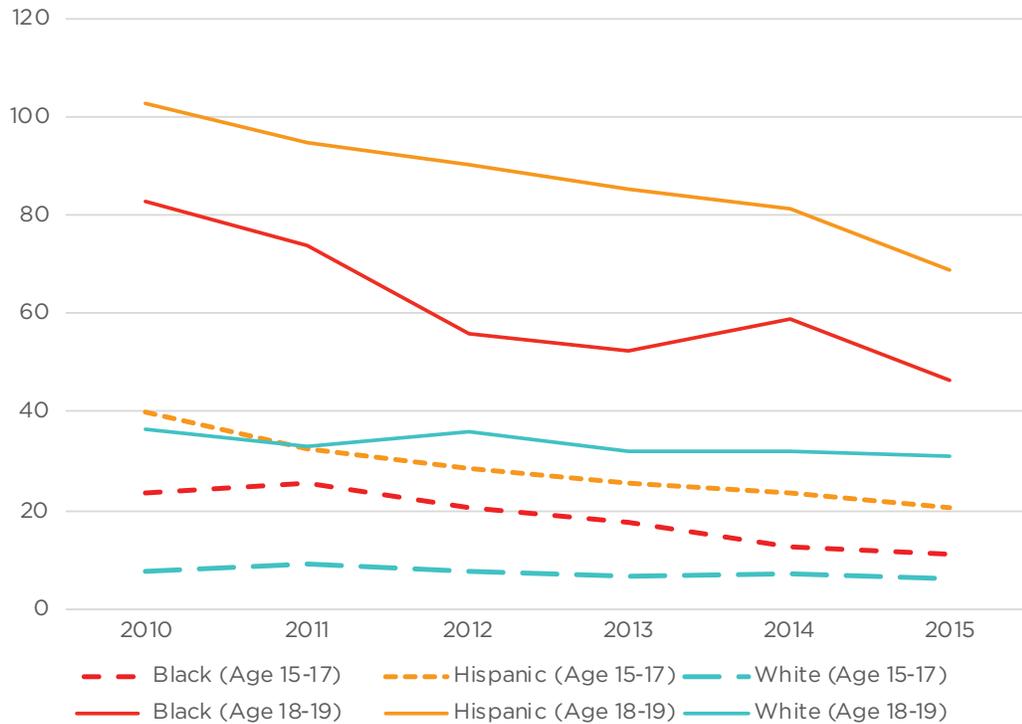
Source: San Antonio Metropolitan Health District

After reaching the 2020 target of reducing the teen birth rate by 15% in 2012, the San Antonio Teen Pregnancy Prevention Collaborative created a bolder goal for 2020—a reduction of 25%—and hit that target by 2014. While the most recent numbers have not been finalized and are expected in January 2019, we continue to trend in the right direction as of 2015. When the total teen birth rate is disaggregated we see a meaningful reduction across race/ethnicity, but a wide gap persists between White young mothers and young mothers of color, particularly Latinas. Tracking teen pregnancy data in the aggregate for 15-19 year-olds hides the racial/ethnic disparities among younger versus older mothers.



Teen Birth Rate by Race/Ethnicity, 2015

Source: Texas Department of State Health Services, Online Query System (<http://healthdata.dshs.texas.gov/VitalStatistics/Birth>)



Increase Access to Health Care

Goal: Increase percentage of population under 65 with health insurance coverage by 10%

Goal Quantified	Baseline (2010)	Update (2017)
82.9%	75.4%	81.5%

Source: US Census Bureau

San Antonio remains on track to reach its goal of increasing access to healthcare. This, of course, has far reaching implications for preventative care, including: reducing obesity and diabetes rates, improving mental health, and reducing health and behavioral risks. But access isn't merely about having health insurance. Improving access includes strengthening transportation to medical facilities, increasing affordability of prescription drugs and other out-of-pocket costs, and increasing availability of providers across neighborhoods.



Reduce Health and Behavioral Risks

Goal: Decrease 3-year moving average of total years of potential life lost before age 75 by 10%

Goal Quantified	Baseline (2010)	Update (2014)
5,969	6,632	6,381

Source: San Antonio Metropolitan Health District

The most recent data available for reducing health and behavioral risks shows progress being made. Because of delays processing vital statistics data at the state level, the data was not available in 2015 and there was no report for 2016. This is measured by the number of years of life lost due to premature death, which is defined by a standard cut-off age in a population to obtain a total sum of the life-years lost before age 75.

H-E-B BODY ADVENTURE



HEALTH & FITNESS

At the H-E-B Body Adventure, a four-story exhibit at the Witte Museum, visitors of all ages test their strength, practice relaxation techniques, choose healthy meal options, and view the innerworkings of the digestive system. Visitors interact with each part of the exhibit while scanning a card that collects anonymous responses to questions about their eating and exercise habits. In 2017, the museum recorded half a million responses, compiling unprecedented local health data.

The breakdown of visitors during the museum’s free Tuesdays showed people coming from all over San Antonio, almost equally distributed by zip code and representing multiple generations. Grandparents who had gone to the Witte when they were kids, were bringing their grandkids.

Martha Tovar brought her four-year-old grandson, Mario, last fall. The exhibit, she said, is “so important for San Antonio,” because it teaches residents to eat healthy and exercise. Martha took a video of Mario while he monitored his heart rate and talked to him about eating fruits and vegetables. “It’s what you’re teaching your child, that’s what they’re going to learn,” she said.

Considered one of the most unique museum exhibits in the country, the **H-E-B Body Adventure is drawing national attention for the innovative ways in which it is promoting healthy behaviors**, and even further, influencing local policy and funding to better meet the needs of San Antonians.

The H-E-B Body Adventure is shining a bright light on where to make targeted policies and investments. The data is published annually in the annual H-E-B Body Adventure Report. A few years ago, a cluster of young people acknowledged they didn’t have safe places to play near their homes, so local government used the data to guide funding for “pocket parks.” These small parks are designed and managed by people living in the neighborhoods in which they’ll reside. In addition to being places for physical activity, parks also provide spaces for connecting with neighbors, thereby promoting general well-being and mental health.



Build a Balanced Meal

Instead of focusing on limited moments within a clinical setting, the museum is able to reshape behaviors of San Antonians and policymakers alike. **“We can prescribe change, but a museum, you guys can inspire it,”** said Dr. Bryan Bayles, curator of Anthropology and Health at the Witte, his eyes wide, recounting the excitement he felt during a community partner input session.

The H-E-B Body Adventure, now in its fifth year, was mostly recently recognized by the Robert E. Wood Johnson Foundations Culture of Health Prize awarded to four cities improving the health and well-being of residents, including San Antonio. “If we’re going to turn the needle on these health behaviors, it’s not going to happen in the clinic alone, it’s not going to be any one force that does it,” added Bryan. “It’s going to be a collaboration.”





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