



EAST OAKLAND

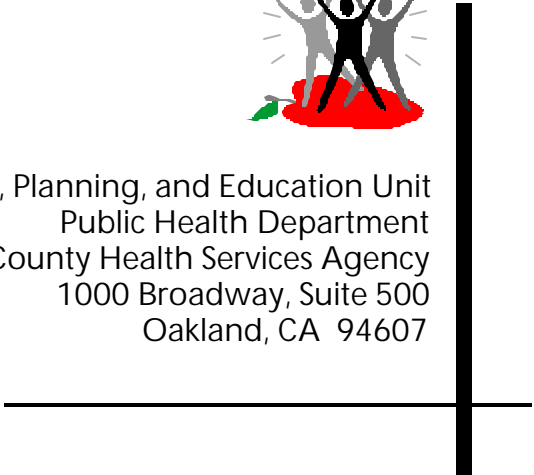
Community Information Book 2001

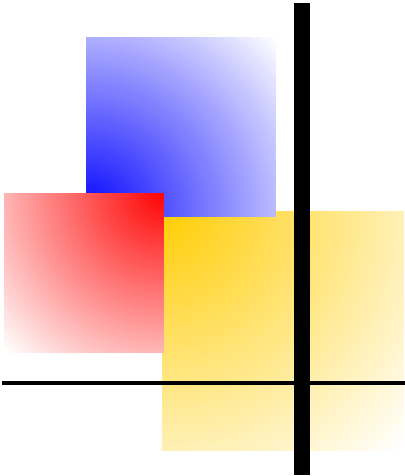


Summer Youth Mural Project, East Oakland Youth Development Center (EOYDC)
<http://www.bdirect.com/EOYDC/Eoydc.htm>



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EAST OAKLAND

Community Information Book 2001

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Table of Contents

	<p>Introduction</p> <p>Community Maps</p>	1
	<p>Neighborhood History</p>	6
	<p>Demographics and Social Profile</p> <p>Census 2000 • Population Characteristics • Households • Languages Spoken • Income • Poverty • Employment and Occupations • Education • Housing</p>	10
	<p>Health Indicators</p> <p>Maternal and Child Health 25</p> <p>Overall Births • Infant Deaths • Low Birth Weight • Early Prenatal Care • Teen Births • Child Abuse and Neglect</p> <p>Hospitalization 35</p> <p>Leading Causes • Asthma • Diabetes • Injury</p> <p>Overall Deaths 48</p> <p>Leading Causes</p>	
	<p>Education</p> <p>School Profiles</p>	53
	<p>Government</p> <p>City Council • Alameda County Board of Supervisors • State Assembly and Senate • U.S. Congress and Senate</p>	59
	<p>References</p>	75

Introduction

Why a community information book?

The Alameda County Public Health Department is working together with neighborhood residents to build healthier communities. Partnerships are being formed for the Public Health Department to share health information with residents and for residents to share information on the assets and strengths of their communities with the Public Health Department. Information on the community assets, health problems, and community concerns are all important in order to make effective, long-term change and build healthier communities.



This information book is meant to be a useful tool and a way to share Public Health information with the community. As Community Health Teams and residents join together to look at strengths of the community, information on community assets and strengths can be added to this book.

The purpose of the community information book is to:

- describe the geography of the community and those who live in it
- look at the health and social issues that are affecting the community.

Who is this book for?

This book is for community health team members, public health nurses, community outreach workers, anyone who works or lives in the community and wants to find out about the neighborhood and its health issues, or wants to plan programs or activities in the community.

How should Community Health Teams and Community Partners use this book?

Here are some ways that you can use the community information book:

- Orient new staff to the community or reinforce the knowledge of old-timers
- Prioritize and/or plan for programs and activities

- Identify issues that are important to the community
- Write grants
- Use as a starting point for, or in addition to, your own collection of information about the community

We need your help!

Community residents and people working in the community are the experts! Help us improve this community information book by letting us know what you think about it and how we can improve it. Please contact us at:

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Community Maps

Information contained in this community information book covers the East Oakland portion of Alameda County Public Health Department's Community Health Team Area in Supervisorial District 4. The map on the next page shows where all the Community Health Team Areas are located.

The census tracts included in this information book are 4073-4076, 4084-4089, 4091-4097, 4102-4104. You can see this area shaded in light green on the map on the last page of this section.



Alameda County Public Health Department Community Health Team Areas

Community Health Team Areas - 1998 Population and Census Tract Definition:

North Oakland
Population: 29,210
Tracts: 4007-4014, 4028

West Oakland
Population: 19,052
Tracts: 4015-4019, 4021-4027

Chinatown/San Antonio
Population: 38,217
Tracts: 4030-4031, 4033, 4054-4060

Fruitvale
Population: 47,725
Tracts: 4061-4063, 4065-4066, 4070-4072

East Oakland
Population: 75,054
Tracts: 4073-4076, 4084-4089, 4091-4097, 4102-4104

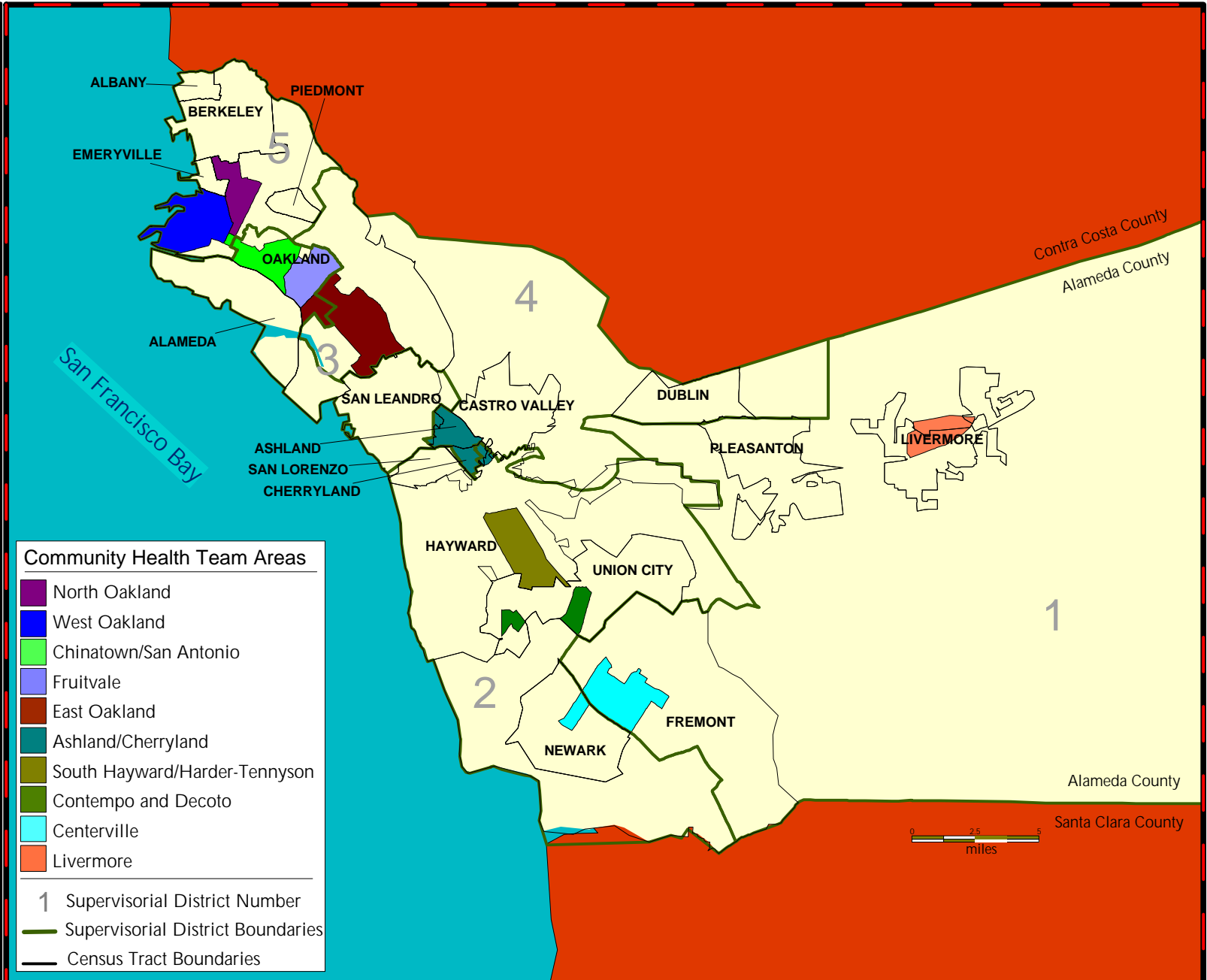
Ashland/Cherryland
Population: 29,593
Tracts: 4337-4340, 4355-4356

S Hayward/Harder-Tennyson
Population: 32,782
Tracts: 4374-4378, 4382.01, 4382.02

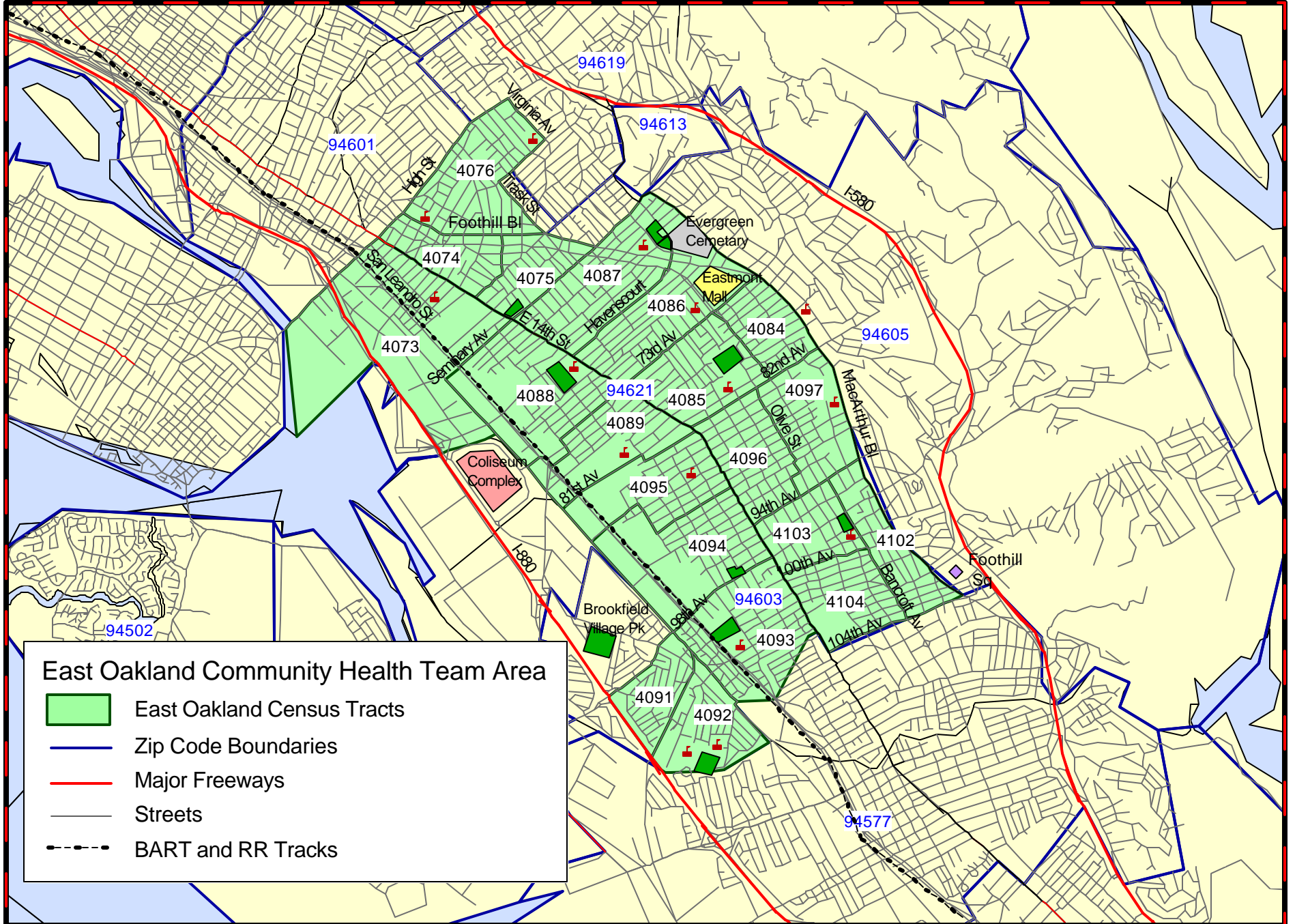
Contempo and Decoto
Population: 20,796
Tracts: 4402, 4403.04, 4403.06, 4403.08

Centerville
Population: 47,439
Tracts: 4417, 4419.02, 4425-4428, 4445

Livermore
Population: 10,676
Tracts: 4514



East Oakland Community Health Team Area



Neighborhood History

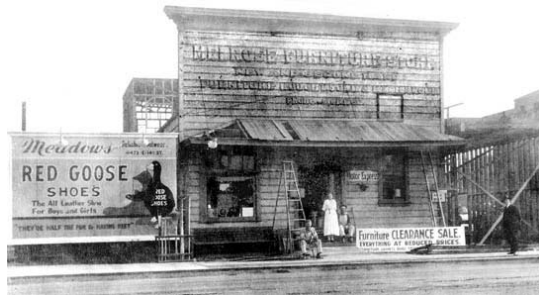
History of East Oakland

East Oakland has a long and colorful history. Here is a brief account of the history of Central East Oakland and Elmhurst from Oakland Citizens Committee for Urban Renewal's (OCCUR) Neighborhood Profiles.

Central East Oakland

Henry Fitch, an explorer, was sailing to Marin County when he lost his way and docked in the Oakland Estuary in 1850. Enchanted by the beauty of the land, he decided against continuing his journey to the north. He remained in the area and soon purchased a parcel of land near what is now the Oakland Coliseum. There he created the small rural district of Fitchburge, the new home for many early settlers of East Oakland. Soon after Fitchburge was founded in the 1850's, local cattlemen founded the village of Melrose a short distance to the north. This location was ideal for the cattlemen because of its proximity to the railroad line. Manufacturing operations and factories moved into the area, followed by residents attracted by the employment opportunities and the environment of orchards and flowers. This was the beginning of industrial activity in Central East Oakland.

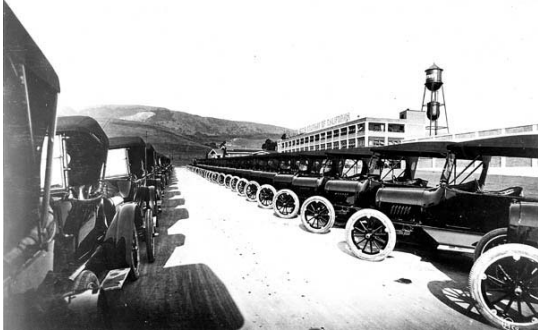
Mills Seminary was established by Cyrus Taggart Mills in Central East Oakland in 1865. It lent its name to Seminary Avenue before becoming Mills College in 1885. Mr. Mill's interest in horticulture led to the development of the campus into a landscaped, park-like island. Mills College became the largest women's college in the West, and has established a reputation as one of the finest liberal arts colleges in the United States today.



Family Business in 19th Century Melrose
Courtesy of the Oakland History Room at the Oakland Public Library.

Melrose and Fitchburge were annexed to the city of Oakland in 1909. In 1916 General Motors built a Chevrolet auto plant at 73rd Avenue and MacArthur Boulevard. This factory helped to promote Oakland's reputation as an industrial center. Several other car companies followed Chevrolet into Oakland, attracted by the convenience of the railroads, as well as Oakland's central position in the U.S. Pacific Coast market.

The large influx of factory workers led to rapid home construction in the late 1920's. Between 1920 and 1924 alone, 13,000 new homes were built in Oakland, many of which were built along Havenscourt, 55th Avenue, and Seminary Avenue. During the 30's, and 40's, planning began for the Maxwell Park development. By the 1950's, the Maxwell Park development had constructed hundreds of homes in the hilly area surrounding Mills College. This was a model development for innovative urban housing and planning.



*Chevrolet Plant, 1916
Courtesy of the Oakland History Room at the
Oakland Public Library.*

Industry continued to flourish through the 1930's, World War II and the 1950's. Soon thereafter, however, business began to change. Plants and factories moved out of Central East Oakland into new locations where the work and production could be done faster and for less expense. By 1963, the Chevrolet Plant at 73rd and MacArthur had become obsolete and in 1965 the plant was demolished and replaced with the Eastmont Mall.

Today, Central East Oakland is characterized by the strength of its working class politics and activism. This is the community in which the celebrated Community School of the Black Panthers existed in the 1970's. It is the community where Midnight Basketball and meaningful public housing safety patrols were initiated. Central East Oakland is a bold combination of citizens, youth centers, employment projects, women's organizations, churches, and men's groups diligently working to find a new direction and maintain a proud community.

Elmhurst

In the late 1880's the area now known as Elmhurst was made up of farmhouses scattered among groves of elm trees. In 1877, the Southern Pacific Rail service began and this small country village was one of the last stops on the railroad line. In 1896, the Oakland, San Leandro, and Hayward Electric Railway Company began service between Oakland and Hayward on a route that is now East 14th Street. A major power plant and roundhouse were built for the railroad near the corner of 98th Avenue and East 14th Street and the area grew rapidly. With the train station as its nucleus, Elmhurst received a constant stream of newcomers.



*Downtown Elmhurst at the turn of the 20th Century
Courtesy of the Oakland History Room at the Oakland
Public Library.*

Real estate in the village was considerably less expensive than in the central parts of Oakland. This enabled laborers, who worked in the canneries and factories, to purchase homes and raise families away from the hustle and bustle of the "city". Elmhurst, originally an autonomous country village, was annexed to the City of Oakland in 1911.

In response to a wave of blue-collar workers who streamed into Oakland to work in the defense plants and shipyards during World War II, large, multi-family housing units were built in Elmhurst. Longtime Elmhurst residents remember working in the die-casting businesses, canneries, and glass manufacturing plants that thrived in the area in the 1940's through the 1960's. After the war, the plants shut down or relocated to more cost effective areas. As a result, Elmhurst experienced a long period of debilitating unemployment, poverty, and increased crime.

Between the 1960's and the 1980's Elmhurst became the center for new housing and new populations. Many of the West Oakland's residents moved into the Elmhurst community after being displaced by such Urban Renewal Projects as the Main Post Office and the Grove Shafter Freeway. This resulted in a dramatic increase in the district's African-American population.

Today, Elmhurst, Oakland's most eastern district, remains a proud and close knit community, made up of numerous neighborhood associations and block clubs. Once solidly middle-class, it now is challenged by a high level of persistent unemployment and its by-products, including poverty and crime. These issues are being tackled head-on by organizations such as the Sobrante Park Neighborhood Collaborative, the Elmhurst

Community District Board, and the Brookfield Neighborhood Association. These are just a few of the active organizations in Elmhurst.

Elmhurst is also the proud home of the Elmhurst Pride Day (formerly the Elmhurst Day Parade), the East Oakland Youth Development Center, Allen Temple, Center of Hope, and their Development Corporations. The positive work of these numerous organizations helps to paint a positive outlook for this community.

Source: OCCUR, "Central East Oakland Neighborhood Profiles" and "Elmhurst Neighborhood Profiles"

Demographic & Social Profile

Knowing who lives in the neighborhood is one way to get to know the community in which you live or work. This section describes the social and demographic characteristics of East Oakland residents. Demographic characteristics are information about the population, such as race, ethnicity, age, and sex.

The information contained in this section comes from different sources. We have used the most recent data available, including the new 2000 Census data. At this time, only the total population and race/ethnicity information are available through Census 2000. Therefore, we rely on 1999 estimates for other social and demographic information.



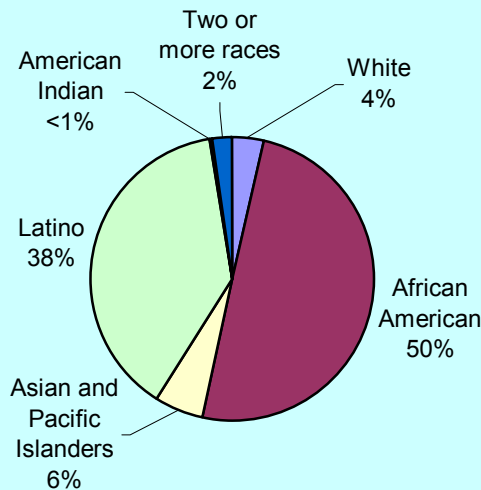
Census 2000

The latest figures from Census 2000 show that 87,943 people live in East Oakland, an increase of 16% since 1990. The race and ethnicity information from the Census show that East Oakland is home to people of diverse cultures and backgrounds.



- East Oakland consists of 50% African Americans, 38% Latinos, 6% Asian and Pacific Islanders, 4% Whites, 2% residents reporting two or more races, and less than 1% American Indians. In Alameda County, the racial and ethnic make-up is 41% Whites, 21% Asian/Pacific Islanders, 19% Latinos, 15% African Americans, 4% residents reporting two or more races, and less than 1% American Indians.
- Of the Asian and Pacific Islanders, approximately 20% are Native Hawaiians and other Pacific Islanders, and 80% are Asians.

East Oakland Racial and Ethnic Composition, 2000

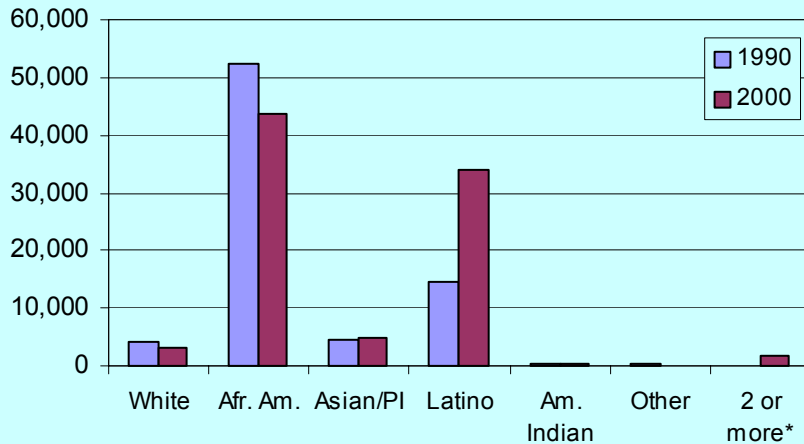


Total Population = 87,943

Source: Census, 2000

- The East Oakland Latino population grew the fastest, by 132% from 1990 to 2000 to 33,827.
- The Asian and Pacific Islander population also experienced an increase in East Oakland between 1990 and 2000 of 13% reaching 4,902.
- The African American population experienced a decrease by 16% to 43,744. The White population also decreased by 24% between 1990 and 2000, to a population of 3,217.

**East Oakland Racial and Ethnic Composition,
1990 vs. 2000**



Total Population 1990 = 75,912
 Total Population 2000 = 87,943

*Information on multiracial residents was collected for the first time in the 2000 Census. Therefore, 1990 comparison is not available.

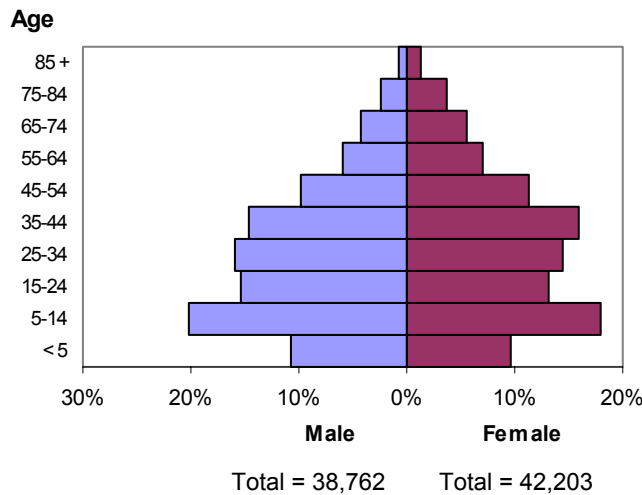
Source: Census, 1990 and 2000

Population Characteristics

East Oakland is an intergenerational neighborhood with men and women of all ages. The 2000 Census data on age and sex is not yet available. The following information is based on 1999 estimates.

- In 1999, East Oakland had slightly more women (52%) than men (48%). This was similar to Alameda County, which had 51% women and 49% men.
- Children under 14 years of age made up 29% of the community in East Oakland, as compared to 21% in Alameda County as a whole.
- Seniors (65 and older) made up 9% of the East Oakland population, as compared to 11% countywide.

East Oakland Age Distribution by Sex, 1999



Source: Claritas, 1999



Households

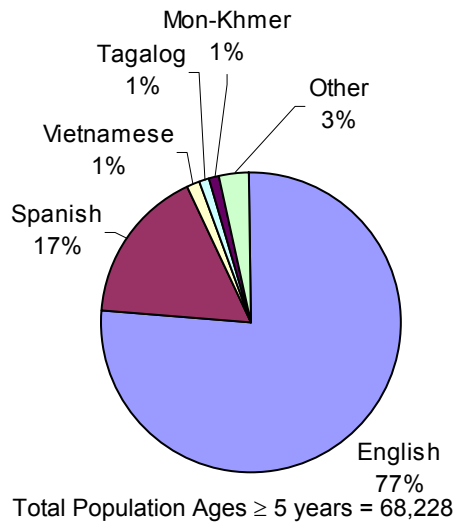
In 1999, there were 26,022 households in East Oakland, a 5.7% increase over the 24,627 households counted in 1990.

Languages Spoken

.....

People in East Oakland speak many different languages. The most recent data for languages spoken in the neighborhoods is from 1990. While the population in East Oakland has changed significantly since 1990, this information provides a sense of the diversity of languages spoken in the neighborhood.

East Oakland Language Spoken at Home, 1990



Source: Census, 1990

- In 1990, 77% of East Oakland residents age 5 years and older spoke only English at home.
- About 17% spoke Spanish at home, and 1% each spoke Vietnamese, Tagalog, and Mon-Khmer, and 3% spoke some other language at home. This included people who can speak English in addition to other languages.

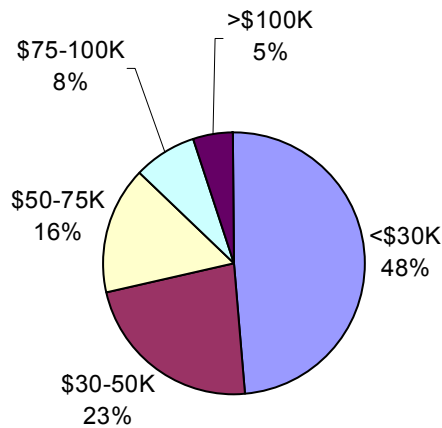


Income

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Income level is often associated with the health status of a community. Higher income is generally associated with better health status and access to health care, while lower income is often associated with poorer health status and less access to health care.

East Oakland Household Income Distribution, 1999



Total Number of Households = 26,022

Source: Claritas, 1999

- Almost half (48%) of households in East Oakland earned an income of less than \$30,000 in 1999, as compared to 28% in Alameda County as a whole.
- In 1997, half of all households in Alameda County earned more than \$46,795 (U.S. Census Bureau). In 1999, in East Oakland, half of the households in the richest census tract earned more than \$44,063. Half of the households in the poorest census tract in East Oakland earned less than \$16,812 (Claritas).



Poverty

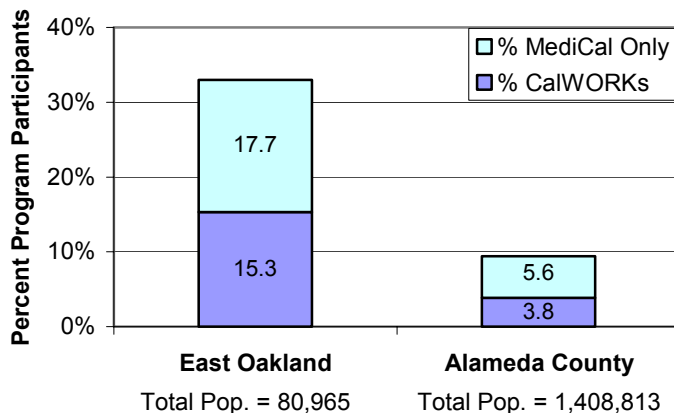
There are different ways to measure the number of people living in poverty. One way is through their participation in government programs that are available to low-income families. This section discusses people's participation in two programs: CalWORKs and Medi-Cal. The percent of people who participate in these two programs helps us estimate the number of people who are living in poverty in East Oakland. Because not everyone who is poor participates in these programs, the estimates are conservative.

CalWORKs and Medi-Cal Participation

CalWORKs: California's welfare program is called California Work Opportunity and Responsibility to Kids or CalWORKs. It gives cash aid and services to eligible families with children. It was previously known as AFDC (Aid to Families with Dependent Children) and GAIN (Greater Avenues to Independence). The number of people who participate in CalWORKs is an estimate of the number of children and parents living in poverty.

Medi-Cal provides health insurance coverage to low-income families and individuals who are elderly or disabled. More people are eligible for Medi-Cal than for CalWORKs. The Medi-Cal data presented here represents people who participate only in Medi-Cal. All CalWORKs participants are eligible for Medi-Cal. However, Medi-Cal participants who are also enrolled in CalWORKs are not included here to prevent overlap. Looking at the number of people who participate in Medi-Cal in addition to CalWORKs participation will give us a sense of the number of people living in poverty.

**CalWORKs and Medi-Cal Only Participation
East Oakland vs. Alameda County, 12/1999**

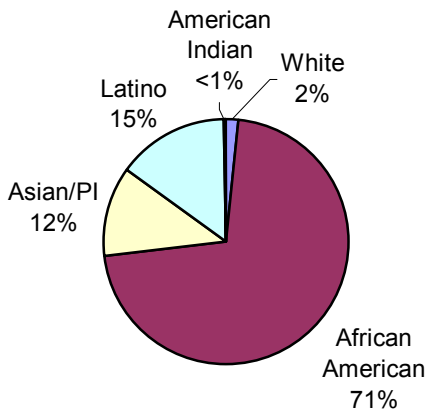


➤ In December 1999, one-third (33%) of East Oakland residents were participating in either CalWORKs or Medi-Cal only. This compares to about 9.4% countywide.

Source: Alameda County Social Services Agency

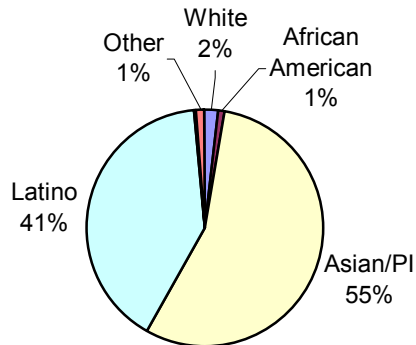
- About 36% of the children under 18 in East Oakland were participating in CalWORKs, as compared to 10.8% countywide.
- CalWORKs participants were 71% African American, 15% Latino, 12% Asian/Pacific Islander, 2% White, and less than 1% American Indian. Among the Asian/Pacific Islanders, participants were primarily Vietnamese and Cambodian.
- About 55% of Medi-Cal participants were Asian/Pacific Islander, 41% were Latino, 1% were African American, 2% were White, and 1% were of some other race/ethnicity. Of the Asian and Pacific Islanders, most were Pacific Islanders.

East Oakland Race/Ethnicity of CalWORKs Participants, 12/1999



Total CalWORKs Participants = 12,392*

East Oakland Race/Ethnicity of Medi-Cal Only Participants, 12/1999



Total Medi-Cal Only Participants = 14,331*

*Estimates based on 1999 population

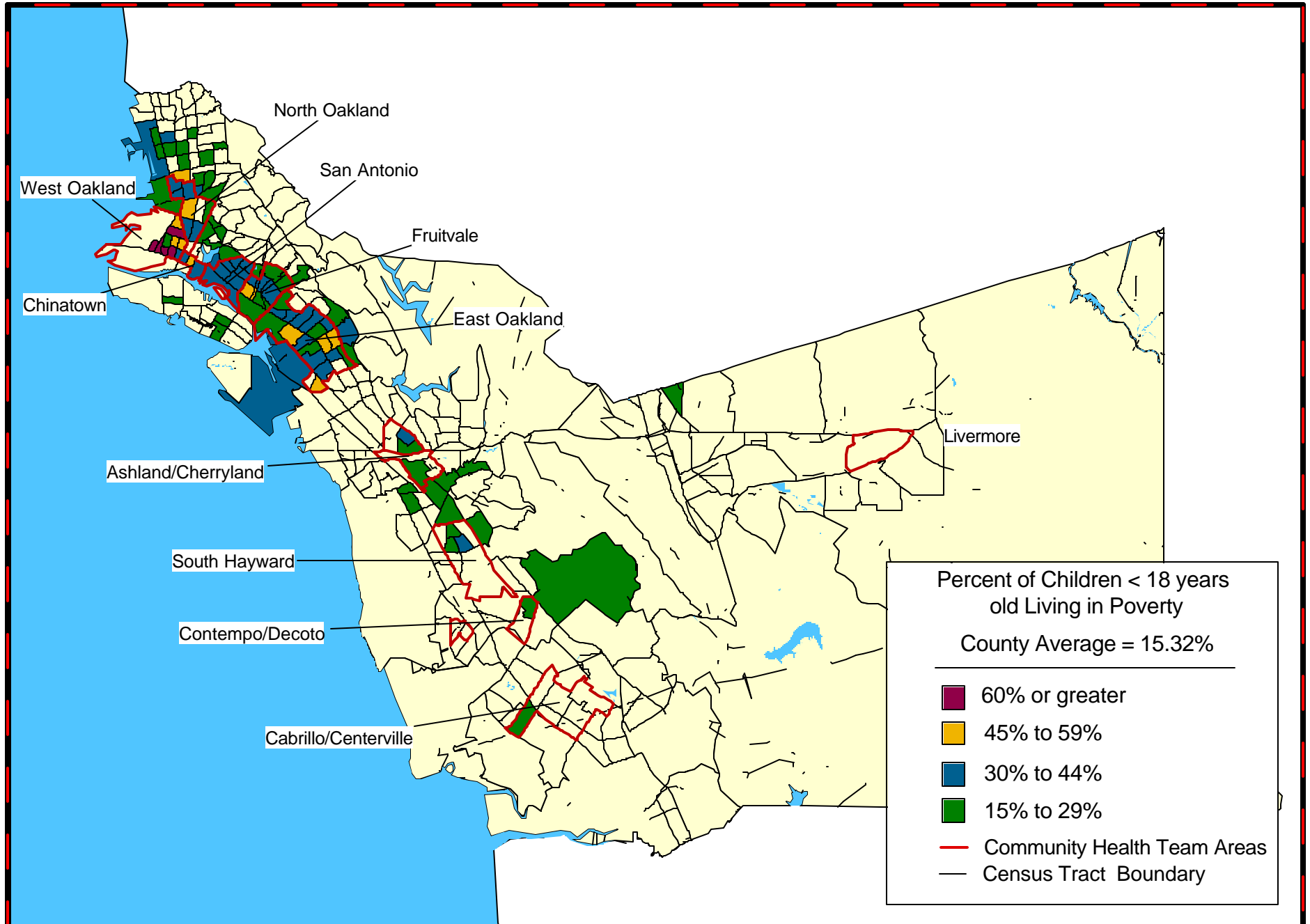
Source: Alameda County Social Services Agency, Claritas 1999

Children Living in Poverty

Another way to look at poverty is through a ceiling (maximum income) established by the federal government. According to this method, people living under a certain income level are considered poor. At this time, only 1990 data is available on poverty by census tract. The map on the following page shows the percent of children living in poverty in 1990. While a lot has changed since 1990, the map gives us a sense of where poor children live.



Percent of Children in Poverty by Census Tract, Alameda County 1990



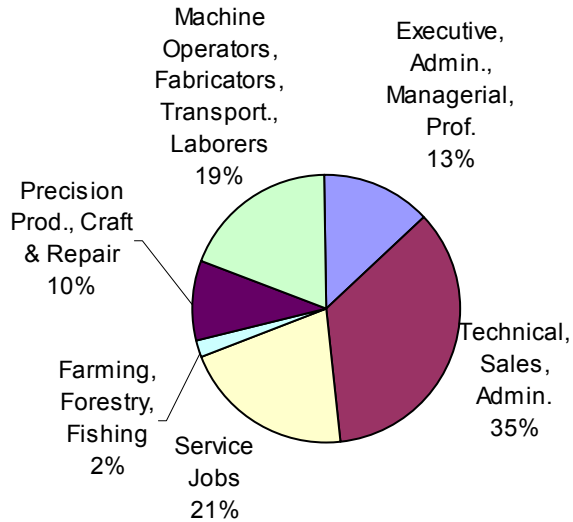
Source of Data: 1990 Census; Produced by: Alameda County Public Health Department CAPE Unit and Information Systems March, 2000

Employment and Occupations

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About 26,975 people in East Oakland age 16 years and older were employed in 1999 and held a variety of jobs.

East Oakland Occupations, 1999



Total Population Ages 16+ years Employed = 26,975

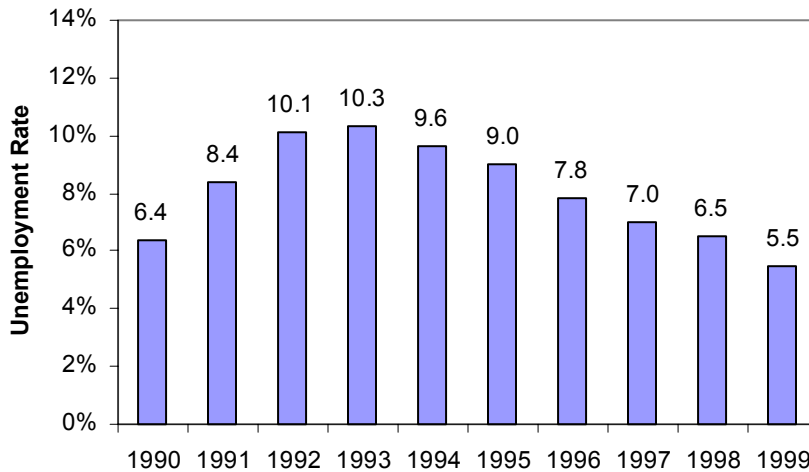
Source: Claritas. 1999

- Approximately 35% of employed East Oakland residents worked in technical, sales, and administrative occupations. These included electrical technicians, computer programmers, retail workers, secretaries, and postal clerks.
- Firefighters, police, housekeepers, childcare workers, cooks, waiter/waitresses, janitors, and hairdressers were categorized as service occupations and made up 21% of East Oakland workers.

- Machine operators, fabricators, transportation operators, and laborers made up 19% of the workers in East Oakland. These included assemblers, truck drivers, crane and tower operators and construction laborers.
- About 13% were employed in executive, administrative, managerial, and professional occupations. These included executives, engineers, teachers, lawyers, and nurses.
- Ten Percent of East Oakland workers were employed in precision production, craft, and repair occupations. These included mechanics, skilled construction workers, sheet metal workers, and bakers.
- A few (2%) worked in farming, forestry, and fishing occupations.

Neighborhood unemployment rates were not available. However, we can look at unemployment trends for the City of Oakland.

Average Annual Unemployment Rate, Oakland, 1990-1999



Source: California Dept. of Finance. 2000

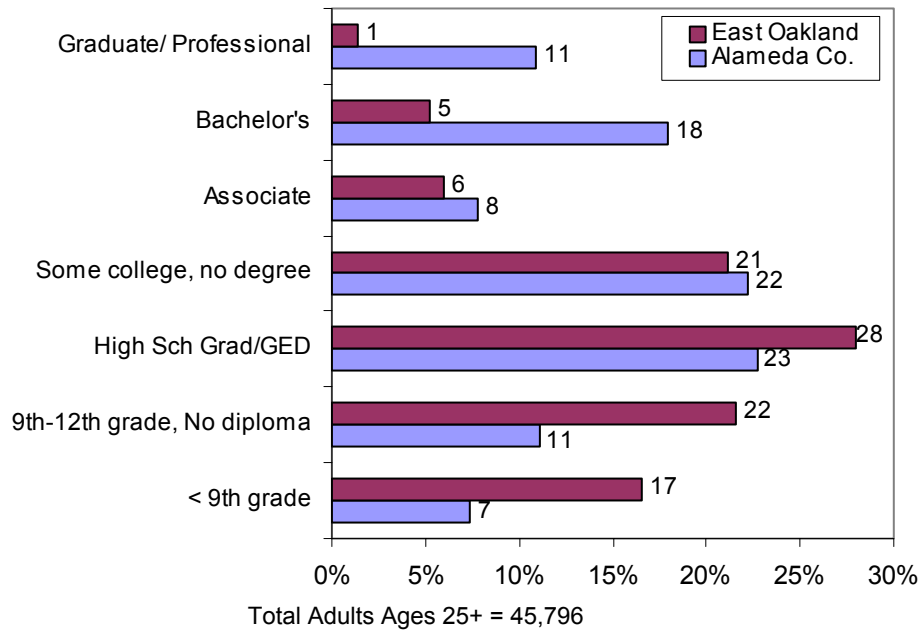
- In 1999, approximately 5.5% of Oakland residents age 16 or older were unemployed and were looking for work. This is compared to 3.4% in Alameda County as a whole.
- Unemployment in Oakland has declined steadily since 1993.



Education

Education is an important part of neighborhood well-being. People in East Oakland had varying levels of education.

East Oakland Educational Attainment, 1999



Source: Claritas. 1999

- In East Oakland, about 6% of residents aged 25 and older had completed college (bachelor's degree) or held a graduate/professional degree. For Alameda County as a whole this figure was 29%.
- About 21% in East Oakland had completed some college (but had not graduated) and 6% had completed an associate degree. This was similar to 22% who had attended some college and 8% who had completed an associate degree in Alameda County as a whole.
- Approximately 28% of East Oakland residents had graduated from high school or passed the General Educational Development (GED) exam. In Alameda County as a whole, only 23% had finished high school or held a GED certificate.
- Almost 40% of East Oakland residents ages 25 and over did not have a high school degree. This figure was 18% in Alameda County as a whole.



Housing

The Bay Area's housing situation has changed rapidly within the past few years. Up-to-date information on housing in the neighborhoods is not available at this time, but here is some city-level information.

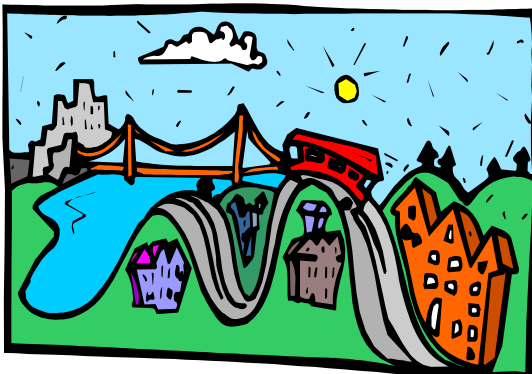


Oakland/Alameda County Housing Estimates, 2000

Area	Number of Housing Units	Vacancy	Average Number of Persons per Household
Oakland	155,676	6.7 %	2.7
Total Alameda County	536,495	5.0 %	2.8

Source: California Department of Finance, 2000

- In Oakland, there were about 155,676 housing units in the year 2000. This was almost 30% of the total housing units in Alameda County.
- Approximately 6.7% of housing units in Oakland were vacant in 2000.
- On average, there were 2.7 persons per household in Oakland.



Health Indicators

This section covers health information on 1) maternal and child health, 2) hospitalization and 3) deaths. Each topic includes several indicators. For each indicator, we have used the most recent data available for the neighborhood and made comparisons to Alameda County. Also, whenever possible, we have included comparisons to the Healthy People 2000 objective, age and race breakdowns, and trends.

In presenting neighborhood level information, we faced many limitations due to the small number of cases. Sometimes we were not able to provide breakdowns by age and race, so we present the overall rates only. In some instances, we could not calculate a reliable rate and only provide the number of cases. We also use three-year averages for some indicators to make rates from small numbers more reliable.

What is a Health Indicator?

A measure of health and wellbeing in a population.

Why Look at Health Indicators?

- To help identify areas of need
- To monitor changes and trends in the health of the community
- To serve as a guide in planning programs

What are Healthy People 2000 Objectives?

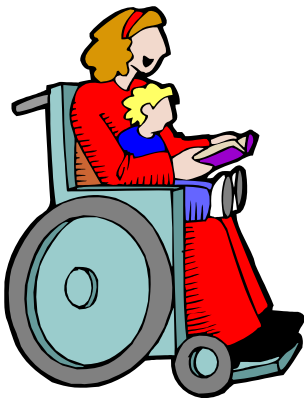
Healthy People 2000 objectives are benchmarks developed by the U.S. Department of Health and Human Services to measure and improve the public's health. Many local, state, and national organizations use these objectives for health planning and action.

Healthy People 2000 objectives are organized into three main goals:

1. Increase the years of healthy life for Americans,
2. Reduce health disparities among Americans, and
3. Achieve access to preventive services for all Americans.

To achieve these goals, Healthy People 2000 has set objectives for specific health indicators.





Maternal and Child Health

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Pregnant women and their infants are key members of the community. The health of mothers and their babies is often used as an important measure of the overall health of a community.



Factors associated with healthy mothers and babies include:

- Receiving early quality prenatal care
- Giving birth between ages 19 - 34
- Non-smoking mothers and fathers
- Drug and alcohol-free parents
- Good nutrition


This section discusses indicators traditionally chosen to represent the status of maternal and child health in a community. These include overall births, infant deaths, low birth weight, early entry into prenatal care, teen births, and child abuse/neglect.

Overall Births

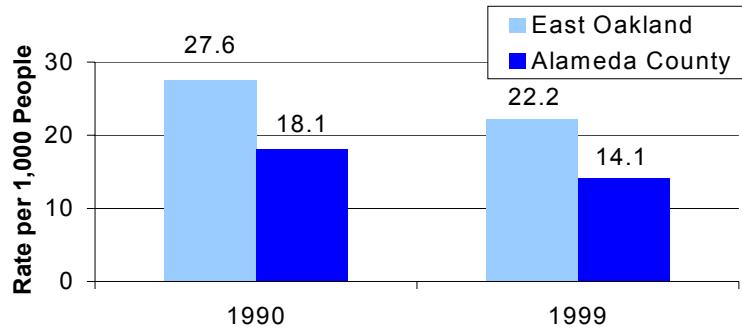
Births contribute to the general growth of the community, and tell us about the future make-up of the community.

Birth Rate:

Number of babies born alive per 1,000 people.



Birth Rate, East Oakland vs. Alameda County 1990 and 1999

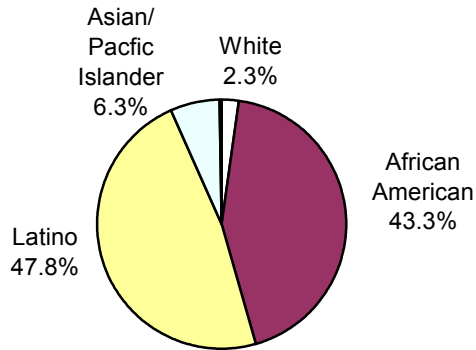


Source: Birth Files, Alameda County Public Health Department (ACPHD); Claritas 1999 pop estimates

- In 1999, there were 1,801 live births in East Oakland.
- In 1999, East Oakland residents were having more babies per 1,000 people (22.2 births per 1,000 people) than in Alameda County as a whole (14.1 per 1,000 people).
- In the last decade, rate of births in East Oakland decreased by 19% from 27.6 births per 1,000 people in 1990 to 22.2 per 1,000 in 1999.

Race/Ethnicity of All Births, East Oakland 1999

Total Births = 1801



Source: Birth Files, ACPHD

- In 1999, the greatest number of births in East Oakland was to Latinas (47.8%), followed by African Americans (43.3%). About 6.3% of all births were to Asian/Pacific Islanders and 2.3% were to Whites.
- The majority (73.6%) of births were to mothers ages 20 to 34 years, 17% were to teen girls ages 19 or under, and 9.4% were to women ages 35 and older.
- In 1999, 55% of the mothers had at least a high school diploma, compared to the County rate of 79%.

Infant Deaths

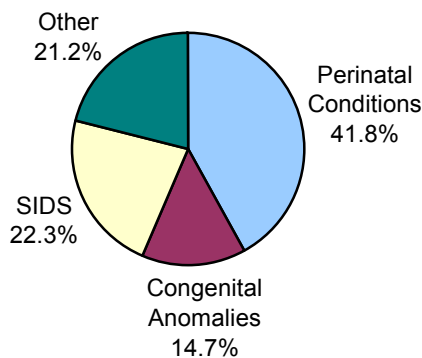
Infant Death:

The death of a baby before the first birthday.

Rate of infant deaths is often used to measure the health status of a community, as it signifies the overall health of mothers and their ability to access health care. It is highly sensitive to changes in the social, physical, and economic environment of the community.

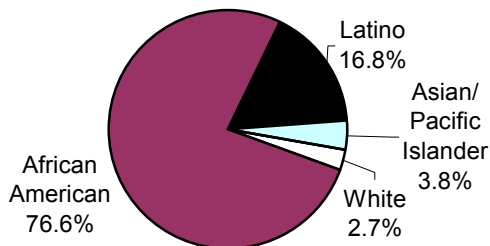
Some infant deaths, such as those caused by congenital anomalies (i.e. problems with formation of the baby before birth), are difficult to prevent. However, many infant deaths can be prevented. Examples include deaths caused by car crashes, abuse, poor nutrition, and accidents at home. Also, inadequate prenatal care, substance abuse and smoking by mother during pregnancy, preterm birth, low birth weight, and complications during pregnancy are closely related with the high risk of infant deaths.

**Causes of Infant Deaths
East Oakland 1990-98**
Total Infant Deaths = 184



Source: Death Files, ACPHD

**Race/Ethnicity of Infant Deaths
East Oakland, 1990-98**
Total Infant Deaths = 184



Source: Death Files, ACPHD

- From 1990 to 1998, there were 184 infant deaths in the East Oakland community.
- Over the last decade, 41.8% of infant deaths in East Oakland was problems that develop around the time of birth (perinatal conditions), such as infections in the mother, malnutrition and slow growth of the unborn baby, and birth trauma.
- Sudden Infant Death Syndrome (SIDS) accounted for 22.3% and congenital anomalies accounted for 14.7% of the infant deaths. Over 21% were due to some other causes.
- The majority of infant deaths (76.6%) in East Oakland have been in the African American community. About 16.8% of the infant deaths were among Latinos, 3.8% among Asian/Pacific Islanders, and 2.7% among Whites.

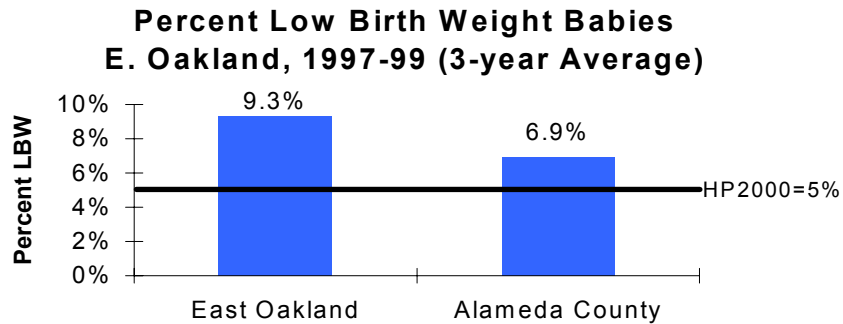
Low Birth Weight

Low Birth Weight Infants:
 Babies weighing less than 2,500 grams (5 lbs, 8 oz) at birth.

Achieving a healthy weight is crucial for a newborn's survival. Babies born with low birth weight (LBW) have a greater risk of illness and death. Therefore, improvements in infant birth weight can contribute substantially to reducing a baby's risk of illness and death.

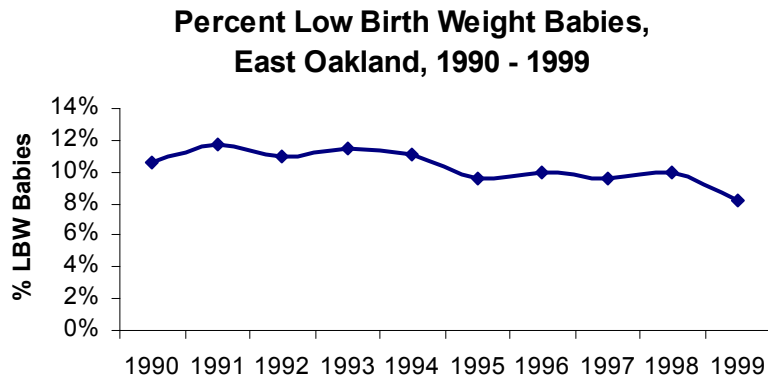


- From 1997 to 1999, about 9.3% of the babies born in East Oakland were low birth weight, as compared to the County rate of 6.9%. There were about 166 low birth weight births in East Oakland per year. The National Objective for Year 2000 for percent of babies born low birth weight is 5%.



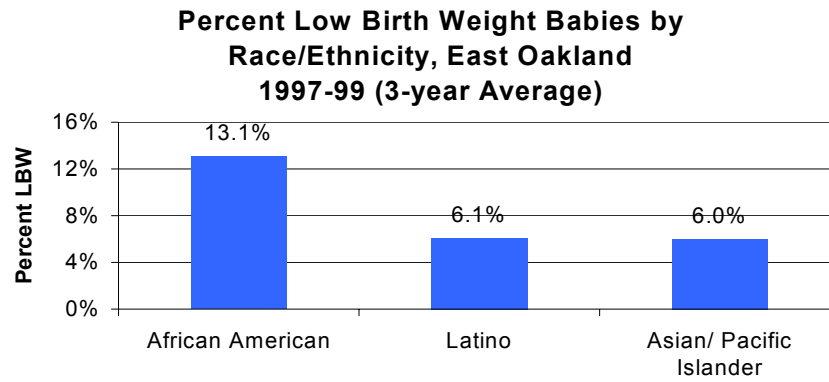
Source: Birth Files, ACPHD

- In the last decade, percent of babies born weighing less than 2,500 grams in East Oakland has declined slightly. In 1999, the percent of low birth weight babies was the lowest since 1990 at 8.2%.



Source: Birth Files, ACPHD

- African Americans had more than twice the percent of low birth weight babies than Asian/Pacific Islanders and Latinos.



Source: Birth Files, ACPHD


Note: Rates for Whites and American Indians not shown due to small numbers (statistically unreliable)



Early Prenatal Care

Prenatal Care:

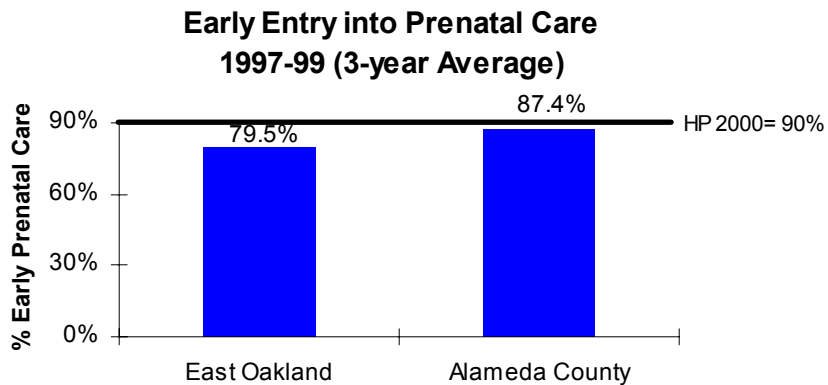
Pregnancy- related health care provided to women during pregnancy.



Pregnant women are encouraged to get prenatal care during the first three months of their pregnancy. Early prenatal care is important in:

- identifying and treating health problems early in the pregnancy to reduce future complications;
- recognizing risk factors in the mother's behavior such as drug and alcohol abuse that put the fetus at risk for poor birth outcomes;
- providing a healthy start for newborns.

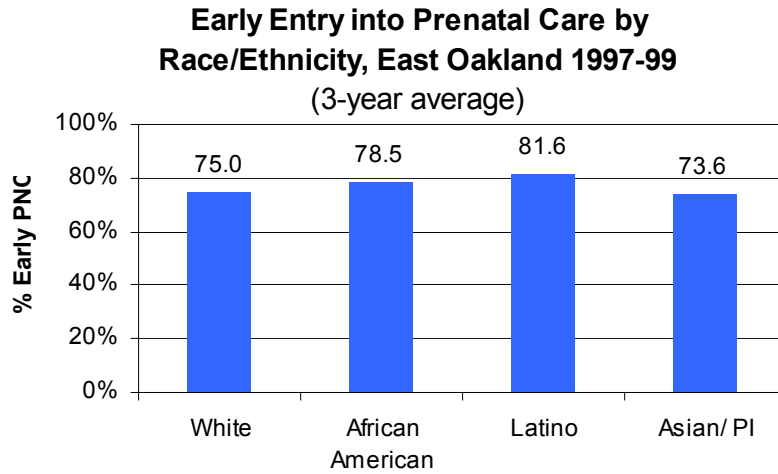
Many factors affect a woman's ability to receive early prenatal care. These include the lack of culturally appropriate pregnancy testing sites, young age of mother, and multiple previous pregnancies. Domestic violence, cultural beliefs, drug abuse, single parenthood, and poverty also can prevent women from receiving timely prenatal care.



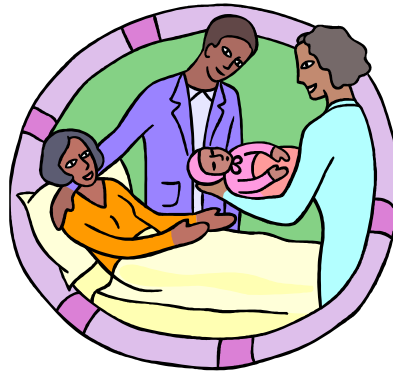
Source: Birth Files, ACPHD

- Between 1997 and 1999, most pregnant women (79.5%) in East Oakland sought early prenatal care. This compares to the County rate of 87.4% and the National Year 2000 Objective of 90%.

- From 1997 to 1999, approximately 81.6% of pregnant Latinas, 78.5% of African American, 75.0% of White and 73.6% of Asian/Pacific Islander women in East Oakland received prenatal care on time.



Source: Birth Files, ACPHD
Rates for American Indians not shown due to small numbers (statistically unreliable).



Teen Births

Youth are an important part of the community. They bring to the community many assets, including their energy and creativity. Helping young people grow up to be healthy, caring, and responsible adults is one way to build a healthy community.



The more assets young people have, the more likely they are to be healthy, succeed in school, resist danger, and persevere in difficult times. These assets include support from caring adults, high self-esteem, positive role models, and a positive view of his or her future.

These assets help youth overcome the many challenges including lack of accessible health care, poverty, lack of after-school and community activities, violence and substance abuse.

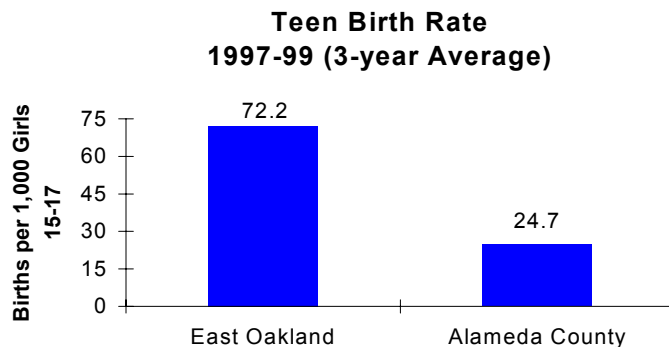
One of the major challenges teenagers face is unintentionally becoming a parent. Being a teen parent makes it more difficult for teens to achieve their educational goals, get a good job, and become financially independent.

Understanding Teen Births

Teen births are the number of babies born to girls ages 15-17.

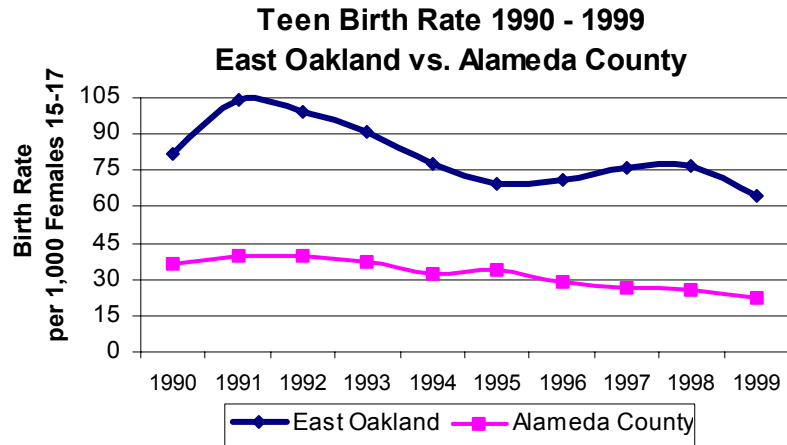
The number of teen births is not the same as the number of teen pregnancies. One study showed that about half (51%) of all teen pregnancies end in birth, 35% in abortion, and 14% in miscarriage (Guttmacher Institute, 1994). Therefore, the number of teen pregnancy may be much higher than teen birth.

- From 1997 to 1999, there was an average of 135 births per year to girls ages 15-17 in East Oakland. The rate was 72.2 births per 1,000 girls, almost 3 times the County rate of 24.7 per 1,000.

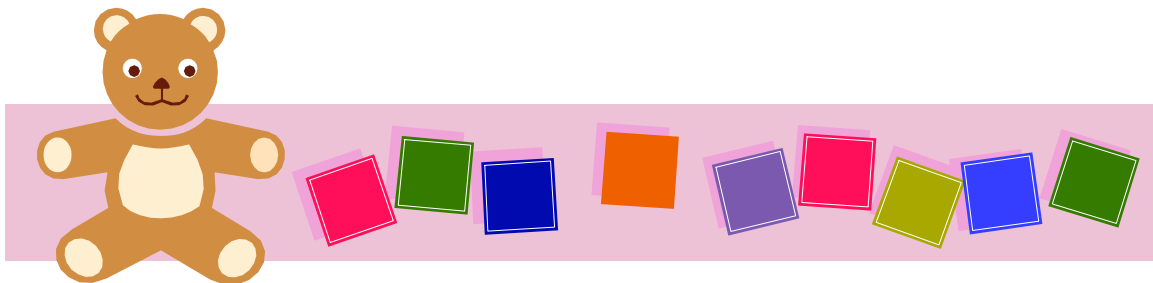


Source: Birth Files, ACPHD; Claritas 1999 estimates

- In the early 1990s, births per 1,000 teen girls in East Oakland dropped noticeably from the peak rate of 104.2 in 1991 to 69.7 per 1,000 in 1995. Since then, the teen birth rate has remained relatively constant, dropping in more recent years, reaching 64.4 per 1,000 in 1999.



Source: Birth Files, ACPHD; Claritas 1999 estimates



Child Abuse and Neglect

Rate of Child Abuse/Neglect:

Number of abused or neglected children ages 0-17 per 1,000.

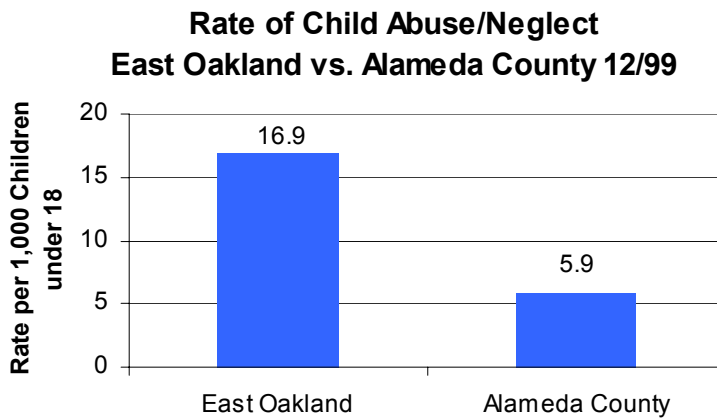


Child abuse and neglect are complex issues that need to be addressed in a multitude of ways. Child abuse consists of any act that endangers or impairs a child's physical or emotional health and development. Child abuse includes physical, emotional, and sexual abuse, as well as physical and emotional neglect.

Child abusers are found among people of all income levels, religious and ethnic groups, and are often ordinary people who are having problems coping with their own stressful life situation.

It is very difficult to measure the actual number of child abuse cases in a community. Data reported here is the number of cases that were investigated and confirmed by the Alameda County Social Services Agency as child abuse. Since many child abuse cases are not reported, this figure may underestimate the actual rate.

- The rate of child abuse cases in East Oakland cannot be calculated reliably. However, in East Oakland about 17 out of 1,000 children were confirmed as abused or neglected as of December 1999, compared with the County rate of about 6 per 1,000 children.



Source: Social Services Agency, Alameda County

Hospitalization

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Information on hospitalization provides important clues to a population's health problems. In this section, leading causes of hospitalization are shown for the zip codes that cover the East Oakland Community Health Team area. This is followed by sections on asthma, diabetes and injury hospitalizations.

The East Oakland Community Health Team area lies primarily in zip codes 94603 and 94621. Parts of the area also lie in 94601 and 94605, but these zip codes are not included in this section.

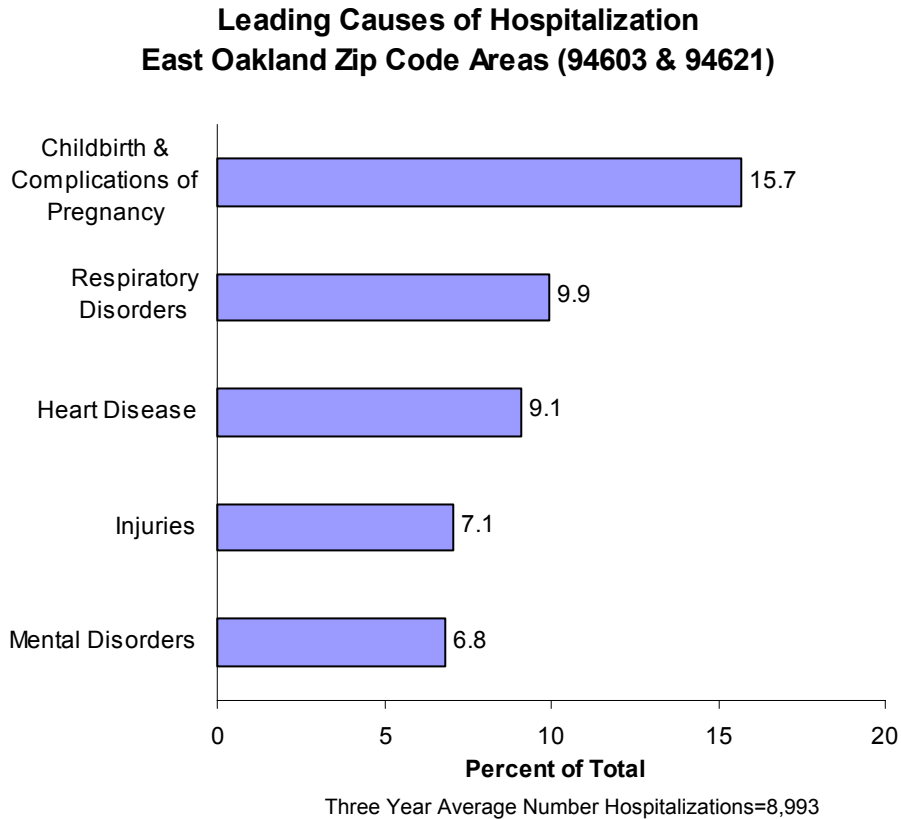
What do the Hospitalization Data tell us?

- They tell us about those illnesses or injuries that are serious enough to get people admitted to the hospital.
- They tell us the number of hospital discharges. Thus, a person hospitalized twice is counted twice.
- They give us information at the zip code level, so if a zip code covers a large area, we cannot know if the illnesses are evenly dispersed within that zip code or if they are concentrated in certain areas.
- They do not tell us about the prevalence of a given illness in the population since many who have the illness are not hospitalized for it.



Leading Causes of Hospitalization

- There was an average of 8,993 hospitalizations per year (1996-1998) in the East Oakland area.



Source: Office of Statewide Health Planning and Development

- *Childbirth and complications of pregnancy* was the leading cause of hospitalization. Many such births are completely normal deliveries or deliveries with routine complications. Others involve more serious complications.*
- *Respiratory disorders* were the second leading cause, followed by heart disease, injuries, and mental disorders. Respiratory Disorders commonly include upper respiratory infections, bronchitis, pneumonia, and asthma.

* Common complications include tubal pregnancy, miscarriage, maternal high blood pressure, early labor, late delivery, breech presentation, problems with placenta or umbilical cord, cesarean or previous cesarean, fetal distress, perineal tearing, forceps or vacuum delivery.

- *Heart Disease* commonly includes high blood pressure, heart attack, blood clot in the lungs, irregular heart beat, heart failure and other kinds of heart disease, both acute and chronic.
- The most common types of *injuries* were fractures, followed by head injuries, other types of wounds, and poisoning.
- *Mental disorders* commonly include alcohol and drug dependence and associated psychotic states, schizophrenic disorders, other types of psychotic disorders, depression, and adjustment reaction disorders.
- Digestive system disorders, which are seen among the five leading causes of hospitalization for some race/ethnic groups in the next section, commonly include ulcers, appendicitis, abdominal hernias, gastroenteritis, colitis, chronic liver disease, diseases of the gall bladder and pancreas.

The leading causes of hospitalization vary among different racial/ethnic groups and by community. The table below shows the leading causes of hospitalization for each race/ethnic group. The numbers in parentheses reflect the yearly average number of hospitalizations for a given cause.

Leading Causes of Hospitalization by Race/Ethnicity (3-Year Average, 1996-98), Zip Codes 94603 & 94621

Rank	Latino	African American	Asian/ Pacific Islander	White
1	Childbirth/Comp Preg* (528)	Respiratory Disorders (664)	Childbirth/Comp Preg* (62)	Mental Disorders (97)
2	Respiratory Disorders (103)	Heart Disease (657)	Respiratory Disorders (36)	Heart Disease (73)
3	Digestive system (92)	Childbirth/Comp Preg* (648)	Digestive system (17)	Respiratory Disorders (67)
4	Injuries (84)	Injuries (458)	Cancer (16) Heart Disease (16)	Injuries (59)
5	Heart Disease (53)	Mental Disorders (451)	Injuries (14)	Childbirth/Comp Preg* (58)

Note: Ranks for American Indians are not shown due to the small number of hospitalizations.
*Includes complications of both childbirth and pregnancy.

- Among Latinos, childbirth and complications of pregnancy was the leading cause of hospitalization, followed by respiratory disorders, digestive system disorders, injuries and heart disease.
- Among African Americans, respiratory disorders were the leading cause of hospitalization, followed by heart disease, childbirth and complications of pregnancy, injuries and mental disorders.
- Among Asian/Pacific Islanders, childbirth and complications of pregnancy was the leading cause of hospitalization, followed by respiratory disorders, digestive system disorders, cancer, heart disease, and injuries.
- Among Whites, mental disorders were the leading cause of hospitalization, followed by heart disease, respiratory disorders, injuries and childbirth and complications of pregnancy. Whites were the only group for whom mental disorders were the leading cause of hospitalization.
- Asian/Pacific Islanders were the only racial/ethnic group for which cancer ranked in the top five. Further work is needed to see if Asian/Pacific Islanders have higher rates of hospitalization for cancer or if cancer ranks in the top five simply because other illnesses seen in other racial/ethnic groups, such as mental disorders, do not.

Hospitalization for Asthma

Asthma is a serious respiratory condition that affects about 10 million people in the United States. It is more common among children than adults. The level of asthma in the population is thought to be increasing. Environmental factors, including both indoor and outdoor air pollution, may have contributed to this increase. Access to health services is important for proper treatment of asthma.

What is an Age-Adjusted Rate?

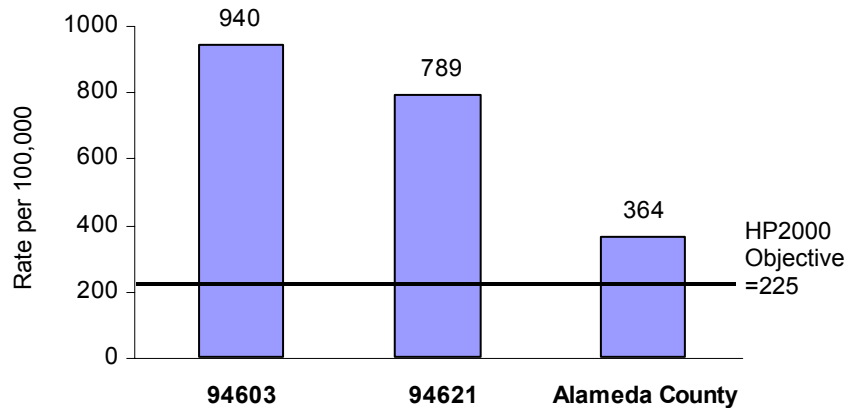
It is a single, summary number that reflects the rate of hospitalizations across different age groups, but in a way that is comparable to other populations (communities, counties or states) with age groups of different sizes. (See note in section on overall deaths).

- From 1996 to 1998, asthma hospitalization rates were highest among children 14 years and under. There was an average of 268 asthma hospitalizations per year in the 94603 and 94621 zip code areas of East Oakland. Among these, 147 (55%) were children 14 and under.

- The age-adjusted rate of asthma hospitalizations in the 94603 zip code was 940 per 100,000 children age 14 and under, and it was 789 in 94621.

- The community rate was over 2 times higher than that for children in the county as a whole, and it was 3 to 4 times higher than the national Healthy People 2000 objective of 225 per 100,000 children 14 and under.

Age-Adjusted Rates of Asthma Hospitalization Children Age 14 and Under (1996-98 Three-Year Average)



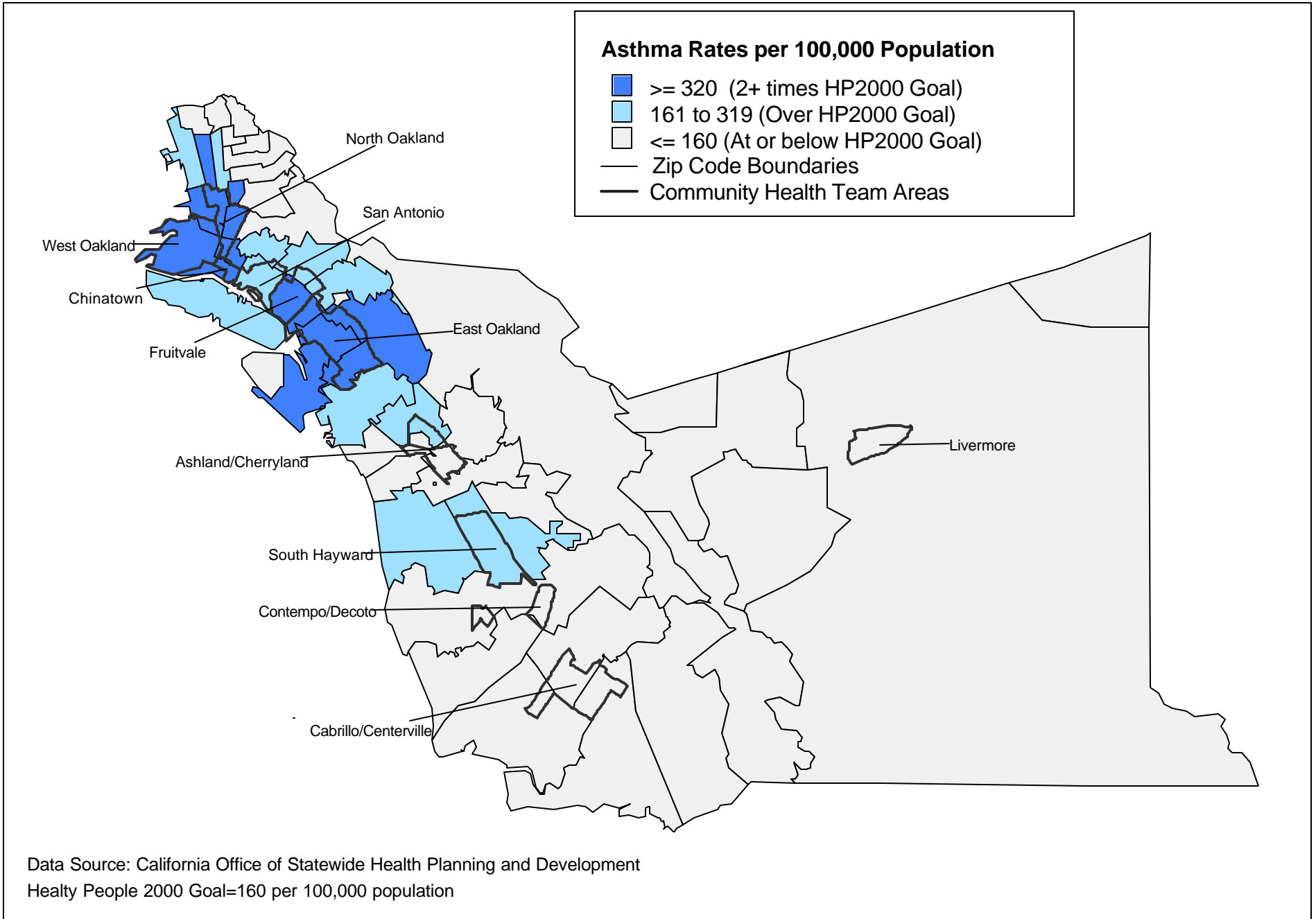
Source: Office of Statewide Health Planning and Development

A map of asthma hospitalization rates for all Alameda County zip codes is shown on the next page. These are age-adjusted rates per 100,000 people and are for the total population.

- The age-adjusted rate for all asthma hospitalizations in the 94603 zip code was 413.5 per 100,000 population and it was 478.0 in the 94621 zip code. (Rates were based on a three-year average of 131 and 137 hospitalizations per year, respectively, in the two zip code areas).
- These local rates are 2.5 to 3 times the Healthy People 2000 national objective of 160 asthma hospitalizations per 100,000 population, for all ages (note that this objective is slightly lower than that established for children 14 and under).
- For Alameda County the comparable rate was 175.2, not far above the national objective.

Higher rates of hospitalization for asthma may mean that there is more asthma in the population. It may also mean that those who have asthma do not obtain the medical care they need to manage their asthmatic condition. Without proper health care, asthmatics are more likely to have a severe attack that results in admission to the hospital.

Age-Adjusted Asthma Hospitalization Rates in Alameda County, 1996-1998 (3-Year Average)



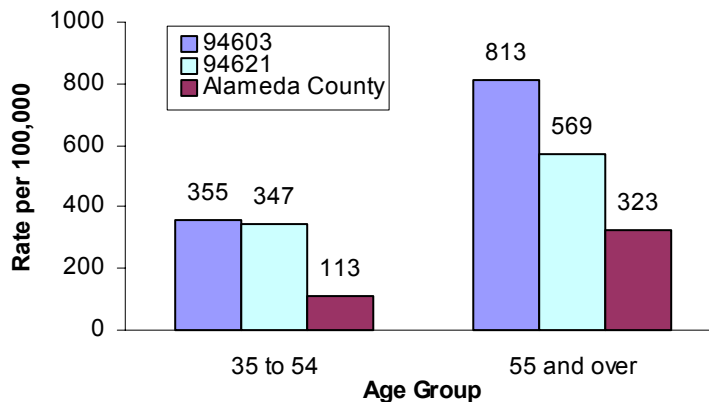
Hospitalization for Diabetes

There are two forms of diabetes, Type I (insulin dependent) and Type II (non-insulin dependent). About 90% of diabetes is Type II. It is estimated that about half of the Type II cases are the result of obesity. Diet, exercise, and weight control, therefore, are thought to be the primary prevention strategy for reducing Type II diabetes.

What is an Age-Specific Rate?

It is the rate of a disease in a single age group. It is the count of hospitalizations in a given age group divided by the population in that age group and expressed in units of 100,000. Age-specific rates are presented when it is important to show which age groups are most affected by an illness.

**Age-Specific Diabetes Hospitalization Rates
(1996-98 Three-Year Average)**



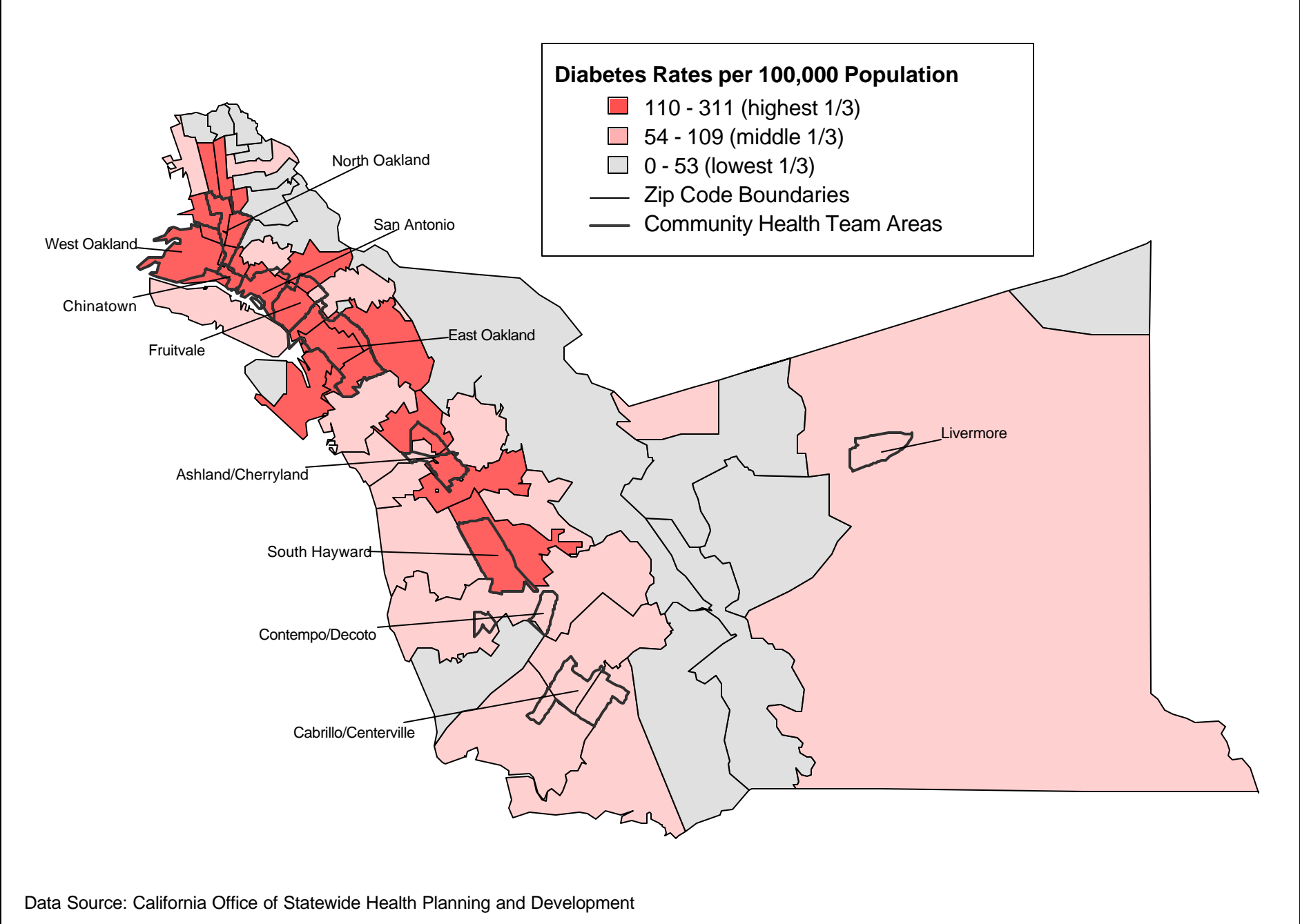
Source: Office of Statewide Health Planning and Development

- Rates of hospitalization for diabetes were highest in the oldest age groups.
- There was an average of 146 diabetes hospitalizations per year in the 94603 and 94621 zip code areas of East Oakland. Of these, 111 (76%) were among adults age 35 and older.
- Diabetes hospitalization rates in these age groups were 2 to 3 times higher than the Alameda County rate. Among those 55 and over, the rate of 813 in the 94603 zip code area is markedly higher than that in 94621.

A map of diabetes hospitalization rates for all Alameda County zip codes is shown on the next page. These are age-adjusted rates per 100,000 people and are for the total population.

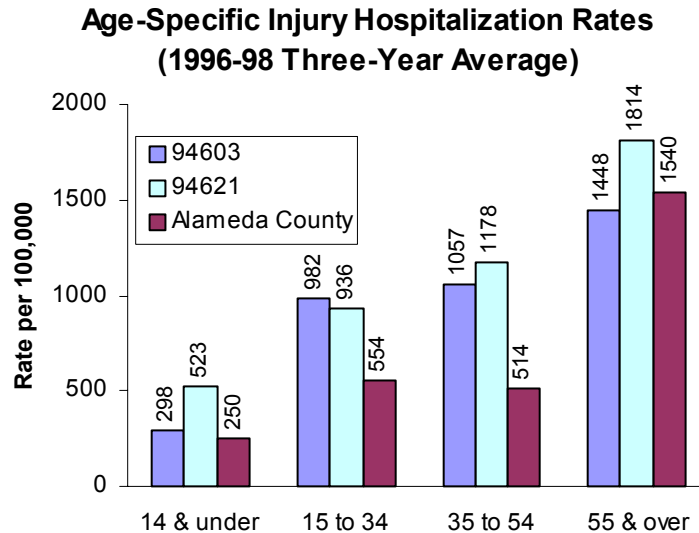
- The age-adjusted rate for diabetes hospitalization in the 94603 zip code area was 310.2 per 100,000 population, and it was 202.6 in 94621. (These rates were based on a three-year average of 91 and 55 hospitalizations per year, respectively, in the two zip code areas).
- For Alameda County the comparable rate was 100.4 per 100,000 population, one-third to one-half of the community rates.

Age-Adjusted Diabetes Hospitalization Rates in Alameda County, 1996-1998 (3-Year Average)



Hospitalization for Injury

Every year there are about 2.5 million injuries in the United States that require hospitalization. Among young people, males are hospitalized more often than females for injury, while among elderly people, females are hospitalized more often than males. The most common types of injuries are fractures, followed by poisonings, open wounds and head injuries.



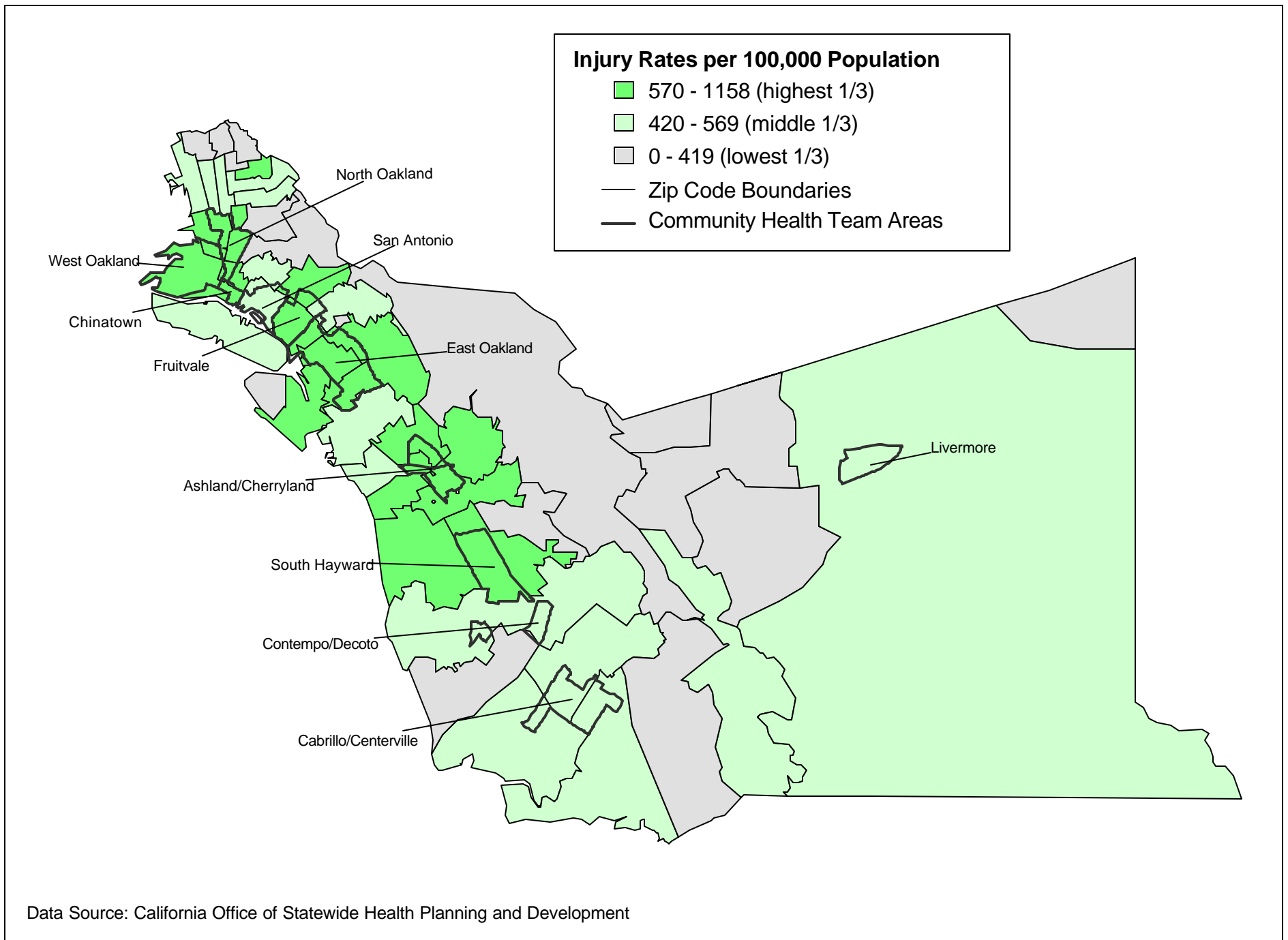
Source: Office of Statewide Health Planning and Development

- An average of 529 injury hospitalizations occurred each year in the 94603 and 94621 zip code areas of East Oakland, combined.
- The highest rate of injury hospitalization was among those aged 55 and older, most often from fractures or other unintentional injuries. Within the 94621 zip code area, the rate of injury hospitalizations in both the oldest and the youngest age groups were markedly higher than those in 94603.
- While the rates of injury hospitalization in the East Oakland area exceeded those in the rest of Alameda County, the most notable differences were in the 15-34 and 35-54 age groups.
- In East Oakland, 42% of injury hospitalizations in the 15-34 age group and 35% in the 35-54 age group were due to assault (intentional harm), while in the other age groups 8% or fewer injury hospitalizations were due to assaults.
- By comparison, in Alameda County, 22% of injury hospitalization in the 15-34 age group and 15% in the 35-54 age group were due to assault, while in the other age groups 6% or fewer injury hospitalizations were due to assault.

A map of injury hospitalization rates for all Alameda County zip codes is shown on the next page. These are age-adjusted rates per 100,000 people and are for the total population.

- The age-adjusted rates of injury hospitalization were 869.5 per 100,000 in 94603 and 987.5 per 100,000 in 94621 (based on a three-year average of 254 and 265 injury hospitalizations per year in 94603 and 94621, respectively).
- For Alameda County the comparable rate was 553.5 per 100,000 population, substantially lower than the East Oakland rates.

Age-Adjusted Injury Hospitalization Rates in Alameda County, 1996-1998 (3-Year Average)



Overall Deaths

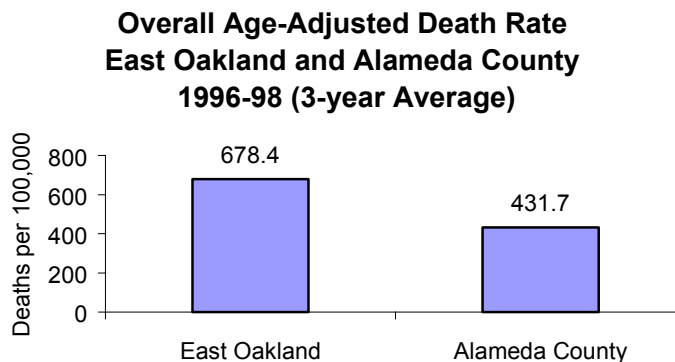
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Information on deaths plays an important role in assessing the health status of a community. Data collected from death certificates can provide information about the frequency and the seriousness of disease or injury as it occurs in a community and can guide prevention efforts. In this section, we examine how many people are dying, who is dying and of what causes, and present the overall age-adjusted death rate and the leading causes of death.

Age-Adjusted Death Rate:

An age-adjusted death rate is a measure of the number of deaths in a community that takes into account the age distribution of the population. It is expressed as the number of deaths per 100,000 people. The main purpose for using age-adjusted death rates is to compare the rates from one population to that of another population. For example, one community may have a large population of seniors, while another community may have a lot of young families with children. The community with more seniors is more likely to have a higher number of deaths than the younger community. Therefore, it is difficult to compare these two communities without taking into account the different age make-up of each community. By using this measure, we adjust for the differences in the age make-up of the community so that we can compare across different communities.

- The overall age-adjusted death rate in East Oakland for the years 1996-98 was 678.4 deaths per 100,000 residents per year.* This rate was much higher than Alameda County's rate of 431.7 deaths per 100,000.



Source: Alameda County Public Health Department Vital Statistics

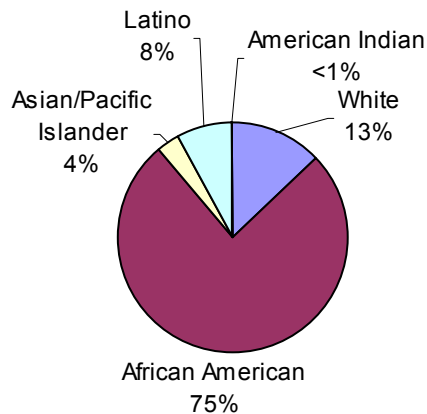
* Adjusted to 1940 US standard population

- In East Oakland, there were 1,955 deaths between 1996-1998, an average of 652 deaths per year.
- Among those who died, 54% were males and 46% were females.
- Two percent of all deaths were among infants.
- Thirteen percent of all deaths were among 25 to 44 year olds.
- Twenty-three percent of all deaths were among 45 to 64 year olds.
- Fifty-eight percent of all deaths were among adults 65 years of age or older.
- Seventy-five percent of those who died were African Americans, 13% were Whites, 8% were Latinos, and 4% were Asian/Pacific Islanders.

Overall Deaths by Race/Ethnicity

East Oakland, 1996-98

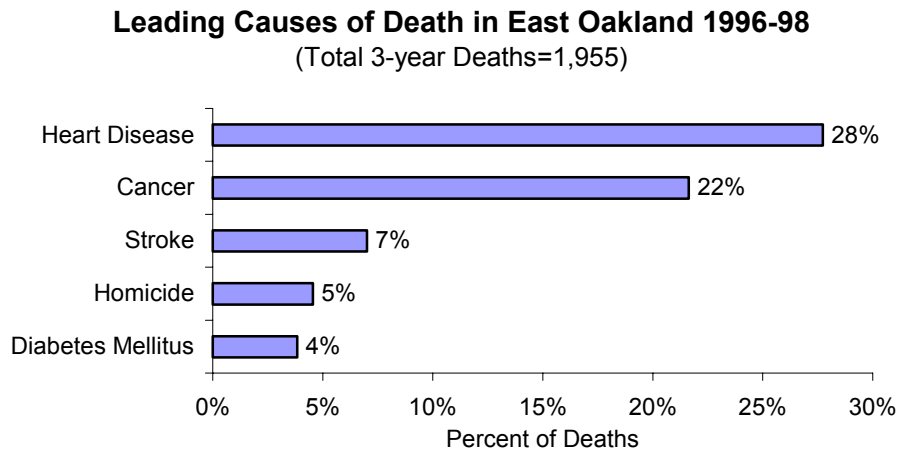
(Average Annual Deaths=652)



Source: Alameda County Public Health Department Vital Statistics

Leading Causes of Death

- The number one cause of death in East Oakland during 1996-98 was heart disease, which accounted for 28% of all deaths.
- The second leading cause of death was cancer, which made up 22% of all deaths, followed by stroke, which accounted for 7% of all deaths.
- The three leading causes of death accounted for 56% of all deaths in East Oakland and were the same as those in Alameda County as a whole.
- Homicide and diabetes ranked as the fourth and fifth leading causes of death in East Oakland.



Source: Alameda County Public Health Department Vital Statistics

Leading Causes of Death by Age

- Among youth aged 15 to 24, the number one cause of death in East Oakland was homicide, which accounted for 51% of all deaths in this age group.
- Among adults aged 25 to 44, homicide was also the leading cause of death. It accounted for 18% of all deaths in this age group. AIDS was the second leading cause of death.
- Among adults aged 45 to 64, cancer was the number one cause of death, followed by heart disease. These two causes accounted for 53% of all deaths in this age group.
- Among seniors aged 65 and older, heart disease was the number one leading cause of death and accounted for 35% of all deaths in this age group. Cancer was the second leading cause of death.

Leading Causes of Death by Sex

- For both sexes, the top two causes of death were heart disease and cancer, the same as in the overall group.
- For males, homicide was the third leading cause of death in East Oakland. The fourth and fifth leading causes of death were stroke and unintentional injuries (except motor vehicle accidents).
- For females, stroke was the third leading cause of death, diabetes was the fourth, and influenza and pneumonia ranked fifth.

Leading Causes of Death by Race and Ethnicity

- Heart disease and cancer were the top two causes of death for all racial/ethnic groups in East Oakland.
- Among African Americans, stroke, homicide, and diabetes were the third, fourth, and fifth leading causes of death.
- Among Latinos, homicide was the third leading cause of death, stroke and unintentional injuries (except motor vehicle accidents) ranked fourth, and diabetes, suicide, and congenital anomalies ranked fifth.
- For Whites, chronic obstructive lung disease, stroke, and influenza/pneumonia ranked third, fourth, and fifth in leading causes of death.
- For Asian/Pacific Islanders, stroke was the third leading cause of death.

Leading Causes of Death by Race/Ethnicity in East Oakland, 1996-98

Rank	White	African American	Latino	Asian/Pacific Islander
1	Heart Disease (84)	Heart Disease (397)	Heart Disease (42)	Heart Disease (19)
2	Cancer (47)	Cancer (338)	Cancer (22)	Cancer (16)
3	Chronic Obstructive Lung Disease (18)	Stroke (102)	Homicide (9)	Stroke (9)
4	Stroke (17)	Homicide (78)	Stroke (8) Unintentional Injuries except Motor Vehicle Accidents (8)	*
5	Influenza and Pneumonia (16)	Diabetes (59)	Diabetes (6) Suicide (6) Congenital Anomalies (6)	*

Note: Ranks for American Indians are not shown due to the small number of deaths.

The numbers in () are 3-year total number of deaths.

* Fewer than 5 cases during the 3-year period

Source: Alameda County Public Health Department Vital Statistics

Education

School Profiles

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Schools are core institutions in the neighborhood. The table that follows contains information on schools in the Oakland Unified School District. The information is provided by the California Department of Education and is based on enrollment for the 1999-2000 school year. Terms used in the school profile tables are defined in the box below. Each school in the district is listed in alphabetical order by name.



Grade Span is the range of grade levels attending a given school. 'UG' that appears in some cases stands for 'Ungraded.'

Enrollment is the number of students formally enrolled in the school.

English Learners are those students whose primary language is not English and who are not proficient in a range of English language skills.

Four-Year Drop-out Rate is an estimate of the percent of students who would drop out in a four year period based on the single year dropout rate of 9th through 12th graders. The information is only presented for schools that have grades 9-12 attending. All other schools have '**' in the column.

Pupil/Teacher Ratio is the school enrollment divided by the number of full-time teachers.

Average Class Size is the school enrollment divided by the number of classes.

Free or Reduced Price Meals. This is the number of eligible economically disadvantaged students who are signed up for the program.

CalWORKs is the number of students participating in the California Work Opportunity and Responsibility to Kids welfare reform program.

OAKLAND UNIFIED SCHOOL DISTRICT - 1999-2000 School Year

School	Grade Span	Enrollment	English Learners	4-Year Dropout Rate	Pupil/Teacher Ratio	Avg. Class Size	Free or Reduced Price Meals	CalWORKs (formerly AFDC)
ALLENDALE ELEMENTARY	K to 6	667	340 (51.0 %)	**	18.5	21.3	483 (72.4%)	257 (38.5%)
AMERICAN INDIAN PUBLIC CHARTER	6 to 9	18	0 (0.0 %)	**	4.5	15.4	0 (0.0%)	0 (0.0%)
ARTS (ALTERNATIVE)	K to 8	180	15 (8.3 %)	**	20.0	23.0	58 (32.2%)	0 (0.0%)
BELLA VISTA ELEMENTARY	K to 6	779	477 (61.2 %)	**	20.0	21.5	739 (94.9%)	347 (44.5%)
BREWER (EDNA) MIDDLE	6 to 8	831	309 (37.2 %)	**	18.7	30.1	528 (63.5%)	170 (20.5%)
BROOKFIELD VILLAGE ELEMENTARY	K to 5	624	142 (22.8 %)	**	21.5	20.9	436 (69.9%)	60 (9.6%)
BUNCHE CONTINUATION HIGH	7 to 12	0	0 (0.0 %)	**	0.0	0.0	0 (0.0%)	0 (0.0%)
BUNCHE/WHITTON (TR/OH)	K to 12	188	12 (6.4 %)	60.7 %	10.4	0.0	0 (0.0%)	0 (0.0%)
BURBANK ELEMENTARY	K to 6	352	37 (10.5 %)	**	18.5	21.1	286 (81.2%)	204 (58.0%)
BURCKHALTER ELEMENTARY	K to 6	216	11 (5.1 %)	**	15.4	22.1	142 (65.7%)	22 (10.2%)
CARTER MIDDLE	6 to 8	473	37 (7.8 %)	**	18.9	28.8	293 (61.9%)	342 (72.3%)
CASTLEMONT SENIOR HIGH	9 to 12	1,798	533 (29.6 %)	23.4 %	21.8	26.9	793 (44.1%)	1,041 (57.9%)
CHABOT (ANTHONY) ELEMENTARY	K to 6	349	9 (2.6 %)	**	17.6	19.1	46 (13.2%)	6 (1.7%)
CLAREMONT MIDDLE	6 to 8	600	55 (9.2 %)	**	19.4	29.4	226 (37.7%)	71 (11.8%)
CLAWSON SENIOR HIGH	9 to 12	0	0 (0.0 %)	**	0.0	0.0	0 (0.0%)	0 (0.0%)
CLEVELAND ELEMENTARY	K to 6	369	216 (58.5 %)	**	18.4	20.4	238 (64.5%)	148 (40.1%)
COLE ELEMENTARY	4 to 8	341	56 (16.4 %)	**	21.3	28.8	292 (85.6%)	146 (42.8%)
COX ELEMENTARY	K to 5	1,248	510 (40.9 %)	**	20.8	21.5	723 (57.9%)	608 (48.7%)
CROCKER HIGHLANDS ELEMENTARY	K to 6	399	8 (2.0 %)	**	18.6	21.9	55 (13.8%)	14 (3.5%)
DEVELOPMENT CENTER FOR THE HAND.	UG-UE	0	0 (0.0 %)	**	0.0	0.0	0 (0.0%)	0 (0.0%)
DEWEY/BAYMART SENIOR HIGH (CONT.)	7 to 12	370	56 (15.1 %)	43.0 %	28.5	29.1	150 (40.5%)	0 (0.0%)

OAKLAND UNIFIED SCHOOL DISTRICT - 1999-2000 School Year - Continued

School	Grade Span	Enrollment	English Learners	4-Year Dropout Rate	Pupil/Teacher Ratio	Avg. Class Size	Free or Reduced Price Meals	CalWORKs (formerly AFDC)
EAST BAY CONSERVATION CORPS CH	K to 12	0	0 (0.0 %)	**	0.0	22.3	0 (0.0%)	0 (0.0%)
ELMHURST MIDDLE	6 to 8	1,014	371 (36.6 %)	**	23.0	30.9	577 (56.9%)	407 (40.1%)
EMERSON ELEMENTARY	K to 5	378	73 (19.3 %)	**	19.9	21.6	275 (72.8%)	378 (100.0%)
FAR WEST (CONT.)	9 to 12	92	15 (16.3 %)	18.2 %	19.2	18.6	15 (16.3%)	0 (0.0%)
FOSTER MIDDLE	5 to 8	403	99 (24.6 %)	**	21.2	17.8	378 (93.8%)	232 (57.6%)
FRANKLIN YEAR-ROUND ELEMENTARY	K to 6	911	648 (71.1 %)	**	18.0	20.1	793 (87.0%)	341 (37.4%)
FREMONT SENIOR HIGH	10 to 12	2,258	953 (42.2 %)	35.9 %	23.6	30.0	895 (39.6%)	1,020 (45.2%)
FRICK MIDDLE	7 to 9	760	193 (25.4 %)	**	20.0	30.6	395 (52.0%)	407 (53.6%)
FRUITVALE ELEMENTARY	K to 6	701	286 (40.8 %)	**	17.7	21.3	558 (79.6%)	250 (35.7%)
GARFIELD YEAR-ROUND ELEMENTARY	K to 6	1,025	692 (67.5 %)	**	19.7	21.6	658 (64.2%)	375 (36.6%)
GLENVIEW ELEMENTARY	K to 6	436	137 (31.4 %)	**	17.4	22.6	242 (55.5%)	76 (17.4%)
GOLDEN GATE ELEMENTARY	K to 6	349	28 (8.0 %)	**	16.6	21.1	314 (90.0%)	157 (45.0%)
GRANT SENIOR HIGH	9 to 12	0	0 (0.0 %)	**	0.0	0.0	0 (0.0%)	0 (0.0%)
GRASS VALLEY ELEMENTARY	K to 6	243	1 (0.4 %)	**	18.7	22.1	89 (36.6%)	6 (2.5%)
HARTE (BRET) MIDDLE	7 to 9	1,013	312 (30.8 %)	**	17.2	27.5	554 (54.7%)	166 (16.4%)
HAVENSCOURT MIDDLE	6 to 8	794	407 (51.3 %)	**	19.8	29.0	492 (62.0%)	363 (45.7%)
HAWTHORNE YEAR-ROUND ELEMENTARY	K to 6	1,431	1,108 (77.4 %)	**	18.4	21.1	1,222 (85.4%)	324 (22.6%)
HIGHLAND ELEMENTARY	K to 6	904	455 (50.3 %)	**	20.1	20.4	702 (77.7%)	386 (42.7%)
HILLCREST ELEMENTARY	K to 7	265	9 (3.4 %)	**	17.7	22.9	13 (4.9%)	10 (3.8%)
HOOVER ELEMENTARY	K to 4	508	67 (13.2 %)	**	20.3	21.4	475 (93.5%)	344 (67.7%)
HOWARD ELEMENTARY	K to 6	317	4 (1.3 %)	**	15.8	21.2	204 (64.4%)	35 (11.0%)

OAKLAND UNIFIED SCHOOL DISTRICT - 1999-2000 School Year - Continued

School	Grade Span	Enrollment	English Learners	4-Year Dropout Rate	Pupil/Teacher Ratio	Avg. Class Size	Free or Reduced Price Meals	CalWORKs (formerly AFDC)
HUERTA (DOLORES) LEARNING ACADEMY	0- 6	130	127 (97.7 %)	**	18.6	18.9	107 (62.9%)	0 (0.0%)
JEFFERSON YEAR-ROUND ELEMENTARY	K to 6	1,064	735 (69.1 %)	**	17.2	20.7	908 (85.3%)	331 (31.1%)
KING (MARTIN LUTHER JR.) ELEMENTARY	K to 3	418	59 (14.1 %)	**	18.2	19.0	372 (89.0%)	154 (36.8%)
KING ESTATES MIDDLE	6 to 8	556	35 (6.3 %)	**	17.9	30.6	311 (55.9%)	103 (18.5%)
LA ESCUELITA ELEMENTARY	K to 6	303	229 (75.6 %)	**	21.6	21.6	206 (68.0%)	0 (0.0%)
LAFAYETTE ELEMENTARY	K to 6	519	148 (28.5 %)	**	19.2	21.6	385 (74.2%)	199 (38.3%)
LAKEVIEW ELEMENTARY	K to 6	423	62 (14.7 %)	**	19.2	20.4	223 (52.7%)	97 (22.9%)
LANEY MIDDLE (OPPORTUNITY)	6 to 8	82	15 (18.3 %)	**	10.2	7.0	55 (67.1%)	0 (0.0%)
LAUREL ELEMENTARY	K to 6	522	240 (46.0 %)	**	18.9	20.3	409 (78.4%)	68 (13.0%)
LAZEAR ELEMENTARY	K to 6	457	380 (83.2 %)	**	16.9	21.2	361 (79.0%)	64 (14.0%)
LINCOLN ELEMENTARY	K to 6	650	500 (76.9 %)	**	20.3	21.3	506 (77.8%)	60 (9.2%)
LOCKWOOD ELEMENTARY	K to 6	910	404 (44.4 %)	**	19.0	21.0	694 (76.3%)	342 (37.6%)
LONGFELLOW ELEMENTARY	K to 6	368	20 (5.4 %)	**	16.7	20.9	245 (66.6%)	237 (64.4%)
LOWELL MIDDLE	7 to 8	679	114 (16.8 %)	**	19.4	28.2	418 (61.6%)	209 (30.8%)
MADISON MIDDLE	6 to 8	560	215 (38.4 %)	**	18.7	29.7	382 (68.2%)	142 (25.4%)
MANN (HORACE) ELEMENTARY	K to 6	542	239 (44.1 %)	**	19.4	21.1	421 (77.7%)	287 (53.0%)
MANZANITA ELEMENTARY	K to 6	950	465 (48.9 %)	**	19.4	21.5	728 (76.6%)	479 (50.4%)
MARKHAM ELEMENTARY	K to 6	638	231 (36.2 %)	**	18.7	21.0	571 (89.5%)	339 (53.1%)
MARSHALL ELEMENTARY	K to 6	189	26 (13.8 %)	**	16.4	20.0	128 (67.7%)	0 (0.0%)
MAXWELL PARK ELEMENTARY	K to 6	524	92 (17.6 %)	**	18.1	21.2	405 (77.3%)	118 (22.5%)
MCCLYMONDS SENIOR HIGH	9 to 12	670	112 (16.7 %)	46.2 %	16.2	21.5	319 (47.6%)	588 (87.8%)

OAKLAND UNIFIED SCHOOL DISTRICT - 1999-2000 School Year - Continued

School	Grade Span	Enrollment	English Learners	4-Year Dropout Rate	Pupil/Teacher Ratio	Avg. Class Size	Free or Reduced Price Meals	CalWORKs (formerly AFDC)
MELROSE ELEMENTARY	K to 6	498	404 (81.1 %)	**	20.4	22.7	468 (94.0%)	113 (22.7%)
MERRITT MIDDLE COLLEGE HIGH	9 to 12	105	4 (3.8 %)	32.5 %	13.1	21.5	22 (21.0%)	0 (0.0%)
MONTCLAIR ELEMENTARY	K to 6	351	6 (1.7 %)	**	18.6	21.5	29 (8.3%)	2 (0.6%)
MONTERA MIDDLE	6 to 8	897	54 (6.0 %)	**	19.2	29.1	169 (18.8%)	8 (0.9%)
MUNCK (CARL B.) ELEMENTARY	K to 6	334	31 (9.3 %)	**	19.6	21.8	158 (47.3%)	0 (0.0%)
OAK TREE CHARTER	0- 8	341	312 (91.5 %)	**	0.0	0.0	0 (0.0%)	0 (0.0%)
OAKLAND CHARTER ACADEMY	6 to 8	175	0 (0.0 %)	**	16.2	24.4	170 (97.1%)	0 (0.0%)
OAKLAND SENIOR HIGH	10 to 12	2,320	1,071 (46.2 %)	18.5 %	23.1	29.7	1,200 (51.7%)	847 (36.5%)
OAKLAND SPECIAL PROGRAMS	K to 12	0	0 (0.0 %)	**	0.0	0.0	0 (0.0%)	0 (0.0%)
OAKLAND TECHNICAL SENIOR HIGH	9 to 12	1,970	381 (19.3 %)	24.7 %	22.0	28.4	672 (34.1%)	497 (25.2%)
PARKER ELEMENTARY	K to 6	544	57 (10.5 %)	**	20.9	21.1	449 (82.5%)	233 (42.8%)
PERALTA YEAR-ROUND ELEMENTARY	K to 5	232	15 (6.5 %)	**	17.1	19.3	109 (47.0%)	32 (13.8%)
PIEDMONT AVENUE ELEMENTARY	K to 6	315	45 (14.3 %)	**	17.5	20.3	177 (56.2%)	59 (18.7%)
PRESCOTT ELEMENTARY	K to 6	638	175 (27.4 %)	**	21.3	21.6	483 (75.7%)	277 (43.4%)
REDWOOD HEIGHTS ELEMENTARY	K to 6	268	2 (0.7 %)	**	16.8	20.3	33 (12.3%)	6 (2.2%)
REEMS (ERNESTINE C.) ACADEMY	0- 6	269	3 (1.1 %)	**	20.7	20.7	211 (78.4%)	0 (0.0%)
ROOSEVELT MIDDLE	6 to 8	1,009	636 (63.0 %)	**	19.0	29.7	712 (70.6%)	517 (51.2%)
RUDDS DALE SENIOR HIGH	9 to 12	0	0 (0.0 %)	**	0.0	0.0	0 (0.0%)	0 (0.0%)
SANTA FE ELEMENTARY	K to 6	358	11 (3.1 %)	**	16.7	20.4	271 (75.7%)	180 (50.3%)
SEQUOIA ELEMENTARY	K to 6	379	94 (24.8 %)	**	19.3	22.2	194 (51.2%)	59 (15.6%)
SHERMAN (ELISABETH) ELEMENTARY	K to 6	281	12 (4.3 %)	**	18.7	20.4	162 (57.7%)	77 (27.4%)

OAKLAND UNIFIED SCHOOL DISTRICT - 1999-2000 School Year - Continued

School	Grade Span	Enrollment	English Learners	4-Year Dropout Rate	Pupil/Teacher Ratio	Avg. Class Size	Free or Reduced Price Meals	CalWORKs (formerly AFDC)
SIMMONS (CALVIN) MIDDLE	7 to 9	1,222	771 (63.1 %)	**	18.8	27.5	645 (52.8%)	582 (47.6%)
SKYLINE SENIOR HIGH	10 to 12	2,264	350 (15.5 %)	8.6 %	21.0	28.6	522 (23.1%)	57 (2.5%)
SOBRANTE PARK ELEMENTARY	K to 5	365	166 (45.5 %)	**	20.5	20.2	207 (56.7%)	166 (45.5%)
STREET ACADEMY (ALTER)	9 to 12	166	16 (9.6 %)	5.3 %	23.7	0.0	50 (30.1%)	0 (0.0%)
SWETT (JOHN) ELEMENTARY	K to 8	261	31 (11.9 %)	**	18.6	23.0	174 (66.7%)	23 (8.8%)
THORNHILL ELEMENTARY	K to 6	335	25 (7.5 %)	**	19.9	22.1	27 (8.1%)	2 (0.6%)
TILDEN ELEMENTARY (DEAF EDUCATION)	K	0	0 (0.0 %)	**	0.0	0.0	0 (0.0%)	0 (0.0%)
TOLER HEIGHTS ELEMENTARY	K to 3	137	7 (5.1 %)	**	21.1	22.8	109 (79.6%)	11 (8.0%)
WASHINGTON ELEMENTARY	K to 6	306	17 (5.6 %)	**	18.0	20.8	241 (78.8%)	123 (40.2%)
WEBSTER ACADEMY	K to 6	1,070	377 (35.2 %)	**	18.0	19.6	900 (84.1%)	539 (50.4%)
WEST OAKLAND COMMUNITY	6 to 8	50	0 (0.0 %)	**	25.0	21.0	0 (0.0%)	0 (0.0%)
WESTLAKE MIDDLE	6 to 8	686	270 (39.4 %)	**	17.2	27.6	442 (64.4%)	257 (37.5%)
WHITTIER ELEMENTARY	K to 6	720	399 (55.4 %)	**	19.5	21.3	538 (74.7%)	349 (48.5%)
WHITTON (OH) (CHARLES) CENTER	K to 12	0	0 (0.0 %)	**	0.0	0.0	0 (0.0%)	0 (0.0%)
District Total:	K to 12	55,051	19,344 (35.1 %)	24.1 %	19.0	26.5	32,705 (59.9%)	17,779 (32.5%)
County Total:		217,080	44,437 (20.5 %)	9.3 %	20.0	26.3	71,328 (32.6%)	28,075 (12.8%)
State Totals:		5,951,612	1,480,527 (24.9%)	11.1 %	20.9	26.7	2,809,186 (47.3%)	850,379 (14.3%)

Source: California Department of Education, Educational Demographics Unit (<http://www.cde.ca.gov>)

Government

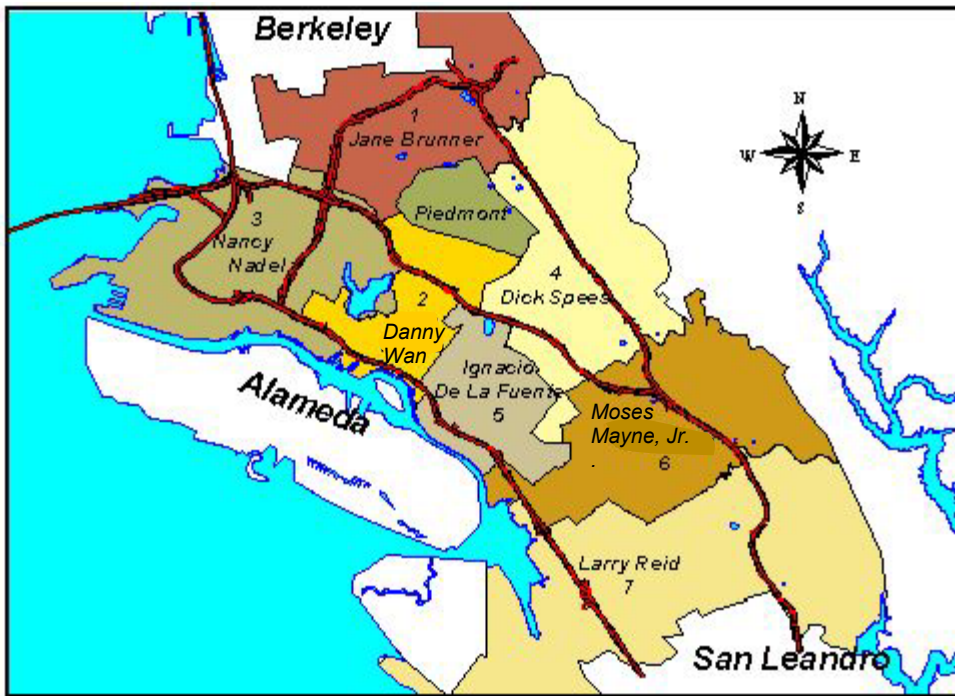
There are many levels of government, including city, county, state, and national. Below is a partial listing of elected officials that represent East Oakland. For additional information about the officials and how to contact them, please see the following pages.

	Government Districts	Elected Official
Oakland City Council	City Council District 6 City Council District 7	Moses Mayne, Jr. Larry Reid
Alameda County Board of Supervisors	County Supervisorial District 4	Nate Miley
California State Assembly	State Assembly District 16	Wilma Chan
California State Senate	State Senate District 9	Don Perata
U.S. Congress	U.S. Congress District 9	Barbara Lee
U.S. Senate		Barbara Boxer Dianne Feinstein



Oakland City Council Districts and Representatives

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Source: adapted from <http://www.oaklandnet.com/maproom/gallery/council.html>



CITY OF OAKLAND OFFICIALS:

Standing:

[Danny Wan](#) District 2 [Roland E. Smith](#) City Auditor [Henry Chang](#) At-Large [Nancy Nadel](#) District 3 [Robert C. Bobb](#) City Manager [John Russo](#) City Attorney [Larry Reid](#) District 7

Seated:

[Dick Spees](#) District 4 [Ceda Floyd](#) City Clerk [Jerry Brown](#) Mayor [Jane Brunner](#) District 1 [Ignacio De La Fuente](#) District 5 [Moses L. Mayne, Jr.](#) District 6



Moses L. Mayne, Jr.
Council Member - District 6

Phone: (510) 238-7006
FAX: 238-6129
TDD: 839-6451
Email: mmayne@oaklandnet.com

**1 Frank H. Ogawa Plaza
2nd Floor
Oakland, CA 94612**



Larry Reid

**Councilmember
7th District**

One Frank Ogawa Plaza
(One City Hall Plaza), 2nd Floor
Oakland, CA 94612
(510) 238-7007
(510) 238-6910 FAX

E-mail: lreid@oaklandnet.com

Biography



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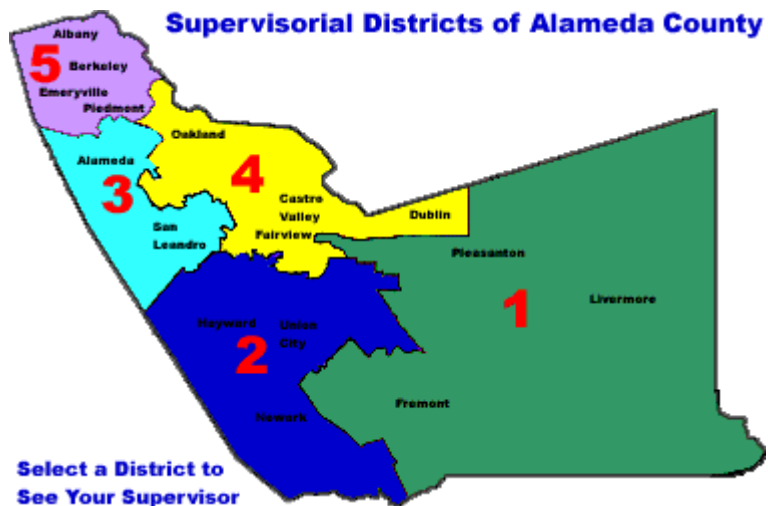


Coming Soon
 Audio Broadcast - Board of Supervisors Meeting
 Tuesdays at 9:30a.m.

District 1	District 2	District 3	District 4	District 5
				
Scott Haggerty	Gail Steele	Alice Lai-Bitker	Nate Miley	Keith Carson

Alameda County Public Hearings on Redistricting
 Tuesday, July 24, 2001 11:00 a.m.
 Board of Supervisors Chambers
 1221 Oak Street, 5th Floor, Oakland.
[Click Here for More Information](#)

Alameda County is governed by a five-member Board of Supervisors, each of whom is elected on a non partisan basis from a separate district where he/she lives. Within the broad limits established by the State Constitution, State General Law, and the Alameda County Charter, the Board exercises both the legislative and the executive functions of government. The Board of Supervisors is also the governing body for a number of "special districts" within Alameda County.



To make the supervisorial districts equal in population, the boundaries are adjusted every ten years through the process called "redistricting." That process is underway ([click here](#) for more information). Terms of office for the Supervisors are four years. Alternate elections are held every two years for three supervisors and then for two supervisors. The salary of the Board members is fixed by the Board itself. A President of the Board, chosen from the membership of the Board every two years, presides at all meetings of the Board and appoints committees to handle work involving the major programs of the County.

- As defined by the Alameda County Charter, the duties of the Board of Supervisors are as follow
- Appoint most County officers and employees, except elected officials
- Provide for the compensation of all County officials and employees
- Create [officers, boards, and commissions](#) as needed, appointing the members and fixing the terms of office
- Award all contracts for public works
- Adopt an [annual budget](#)
- Provide, publish, and enforce a complete code of rules prescribing the duties and the systems c office and management, accounts, and reports for each County department
- Have an annual audit made of all County accounts, books, and records
- Supervise the operations of departments and exercise executive and administrative authority throughout County government
- Serve as appellate body for employee grievances, planning and zoning

The Board of Supervisors meets at 8:30 a.m. for closed sessions and at 9:30 a.m. for regular calendar on Tuesday mornings at the County Administration Building, 1221 Oak Street, Oakland, in the 5th Floor Board Chambers. All meetings are open to the public, and residents are encouraged to attend. [Click here](#) for specific agenda information, or contact the Clerk, Board of Supervisors, at (510) 272-6347.

Sister Site

Alameda County has a sister county in Taiwan! Learn more about [Taoyuan, our Sister County](#).

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Alameda County Public Hearings on Redistricting
Tuesday, July 24, 2001 11:00 a.m.
Board of Supervisors Chambers
1221 Oak Street, 5th Floor, Oakland.
[Click Here for More Information](#)

ABOUT NATE MILEY



Nate Miley was elected to the Alameda County Board of Supervisors in November of 2000 and was sworn in on January 8, 2001. He will serve as chair of the Board's Transportation and Planning Committee, and will serve on the Public Protection Committee and the Unincorporated Services Committee.

Nate has been involved in community service his entire adult life. After finishing Law School at the University of Maryland in 1976, he moved to Oakland to work as a Jesuit Volunteer. Nate began his community involvement by taking a position with the Oakland Community Organizations.

In 1986, Nate created the United Seniors of Oakland and Alameda County to advocate for better senior services, such as housing and transportation. As Executive Director of the United Seniors of Oakland, he was responsible for managing the affairs of the organization, training and developing leadership among the elderly, which enabled them to address their specific needs in regards to safety, adequate transportation and other areas of concern. He and the seniors built a viable organization over 10 years of consistent and tenacious efforts.

Nate was elected to the Oakland City Council in 1990. In his role as Councilmember, he was the Chair of the Public Safety Committee. Some of his special projects included violence suppression, harm reduction, problems regarding alcohol outlets and other public health issues. He initiated programs to clean up neighborhood blight, sponsored the lead abatement program, passed the first 100% smoke-free workplace legislation in a city of this size, sponsored legislation to stem redlining in Oakland and encourage local investment in the neighborhoods, supported community-oriented policing with the first local substation and worked to reform public housing.

Nate is also a single father of two children and has lived in Oakland for more than 20 years. He brings with him a commitment and platform to improve transportation, healthcare, public safety, and social service delivery to the diverse constituents of District 4.

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Assemblywoman Wilma Chan

16th Assembly District

[\[email\]](#) **Biography**

District Address

1515 Clay Street
Suite 2204
Oakland, CA 94612
Phone: (510) 286-1670
Fax: (510) 286-1888

Wilma Chan represents the cities of Oakland, Alameda and Piedmont in the California State Assembly. Ms. Chan's legislative priorities include health care, senior services, children's programs, environmental health and sustainable economic development.

Capitol Address

P.O. Box 942849
Room 4098
Sacramento, CA 94249-0001
Phone: (916) 319-2016

Ms. Chan is the Assembly Majority Floor Whip and is a member of the Assembly Committees on Health; Human Services; Aging and Long Term Care; Public Employees, Retirement and Social Security; and Banking and Finance. Chan is Chair of the Select Committee on Children's Health.

Committees

- [Committee on Jobs, Economic Development, and the Economy](#)
- [Committee on Banking and Finance](#)
 - [Committee on Health](#)
- [Committee on Public Employees, Retirement and Social Security](#)
- [Select Committee on California's Children's Health](#)
- [Committee on Aging and Long-Term Care](#)
- [Select Committee on California - Mexico Affairs](#)

Ms. Chan is a tireless advocate for children and youth. She has taken a leadership role in developing collaborative programs for children in Oakland and Alameda. She has also led trade delegations to Asia to encourage business development and trade with the San Francisco East Bay region.

Ms. Chan was elected to the Board of Supervisors in 1994 and re-elected without opposition in 1998. On the Board of Supervisors, Ms. Chan chaired the Health Committee and served as a member of the Budget Committee and the Personnel, Administration and Legislative Committee. Ms. Chan was the first Chair of the Children and Families Commission, which is distributing \$20 million in new funds for the children's services. Ms. Chan also served on the Alameda Retirement Board.

Her accomplishments at the Board of Supervisors include:

- Expanding the number of school-based health clinics from 4 to 7.
- Working with local officials to gain release of 220 acres of the Alameda Naval Air Station land for local needs.
- Leading lobbying efforts to restore benefits to legal immigrants.
- Championing efforts to build a new Emergency Room and Critical Care Building for the Alameda County Medical Center, Highland Hospital - Oakland Campus
- Initiating a pilot welfare-to-work project in Oakland's San Antonio neighborhood.

- Developing the strategic plan on the future of health care services in Alameda County.
- Ms. Chan was the first Asian American to serve on the Board of Supervisors and the Oakland School Board.

Ms. Chan has been honored by numerous organizations for her work, including:

- California Hospital Council County Meals-on-Wheels
- Community Bank of the Bay
- National Asian Women's Health Assn.
- Native American Health Center
- Rotary International - Paul Harris Award
- High-Risk Infant Follow Up Network
- Sons in Retirement
- Alameda Breakfast Lions Club
- East Bay Asian Youth Center

Prior to her election to the Board of Supervisors, Ms. Chan was elected to the Oakland Board of Education in 1990. She also worked as Program Coordinator for Effective Parenting Information for Children, a nationally recognized school-based prevention program.

Ms. Chan holds a BA from Wellesley and an MA in Education Policy from Stanford University. She lives in Alameda with her husband, a public school teacher, and her two children.

Updated: 2/08/2001

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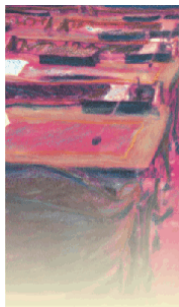
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Don Perata
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Don Perata

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