



CITY OF GLENDALE

Glendale Commission on the Status of Women
Prepared by Mount Saint Mary's University

report on the status of women and girls

A Message from the Commission

The Glendale Commission on the Status of Women (CSW) created its first Report on the Status of Women in 2004-2006; and followed a decade later by its 2015-2016 Report on the Status of Women and Girls. Both reports presented research on key issues affecting women and girls in the City and brought much-needed attention to issues such as domestic violence, the impact of education, and the disparity in pay between men and women.

The Glendale CSW has commissioned a new report for 2022-2023. The new Report on the Status of Women and Girls, prepared in collaboration with Mount Saint Mary's University, assesses and compiles the latest data and trends making an impact on the lives of more than 98,000 women and girls who make up 51% of Glendale's population.

The new report provides a snapshot of the City through the lens of Glendale's women and girls across seven key areas: Demographics, Education, Employment and Earnings, Poverty, Health, Safety, and Leadership. The following pages also include comparisons to findings in the 2015-2016 study, charting progress made and highlighting persistent gender gaps that remain, as well as the effects of the COVID-19 global pandemic.

The Glendale CSW is inspired by a vision of a City where the fully realized potential of all women and girls enriches the entire community; where all women and girls have equal rights, opportunities and choices exercised freely, comfortably and safely; where all women and girls have a strong voice and equal participation in the affairs of the community; and where diversity is celebrated.

It is our hope that this report will reveal the areas where we are closest to realizing this vision -- and help focus our attention on the areas where work still needs to be done.

This report was funded by a grant from the California Commission on the Status of Women.

City of Glendale Commission on the Status of Women

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Introduction and Limitations of the Data

The 2022-2023 Report on the Status of Women and Girls in Glendale is based on reliable statistics gathered primarily by surveys of large sample sizes. The most frequently cited data source is the annual American Community Survey (ACS) program of the U.S. Census Bureau. One of the significant limitations of the published ACS data tables is the classification of race and ethnicity. The ACS data are reported into 5 single-race groups plus a multiracial group. The Latinx population is the only ethnic group reported separately, along with the number of white individuals excluding those of Hispanic origin. This report, based on a statistical interpretation of data, generally limits racial/ethnic categories to four groups which account for 96% of Glendale's population. Single race categories include African American, Asian American, and white (including all ethnic groups except Latinx).¹ The fourth group in this Report includes people of any race who identify a Hispanic/Latinx ancestry.

The U.S. Census Bureau collects information on ancestry and every five years publishes a set of Selected Population Detailed Tables. Statistical data on the Armenian population are available through these tables, but the most recent data at the time of preparing this report was for 2011-2015.² Since the Armenian community comprises the dominant ethnic community in Glendale, the lack of recent Census data relevant to this group limits the understanding of the status of Glendale women in terms of race/ethnicity. The data on Armenian women was released after the completion of this report. To account for this gap in the research, we have incorporated that data into a separate report. Roughly 1 in 3 Glendale residents identifies as having Armenian ancestry. (Just under 1 in 5 Glendale residents identifies as having a Hispanic origin.) Because Armenians and other Middle Eastern and North African populations are not currently a racial or ethnic category in U.S. Census Surveys, these populations are classified as white and are included in data about white people. Please keep this in mind as you read Report information relative to white women: the figures are heavily influenced by the Armenian population but are not specific to any one ethnic group. Unfortunately, the data as currently collected do not allow a disaggregation of Armenian women which would illuminate their status.

Additional **limitations found in all survey data-driven reports** include the following.

- *Survey data and sample size.* Where survey data are used, responses are generally from the perspective of the respondent and there is no validation of the accuracy of the response. However, one of the most important limitations of survey data in large studies is sample size—and whether the respondents from the sample are representative of the population as a whole. For this reason, most survey results are reported with a margin of error that gives a range of values that probably contains the correct value. For simplicity, this Report does not give the margin of error and often uses rounded values; the margin of error can be found in the

¹ Glendale's populations of those native to the U.S. and its territories (American Indian, Alaska Native, Native Hawaiian, and Pacific Islander) are so small that statistical data are generally suppressed or have such large sample errors as to be unreliable.

² The release date of updated Selected Population Detailed Tables (Armenian) is not available on the U.S. Census Bureau website.

reference sources cited. The margin of error can be minimized by using larger samples as, for example, by pooling data from several years.

- *Use of multiple-year data.* The margin of error in statistical results can be decreased by using larger sample sizes. For example, the U.S. Census Bureau publishes 5-year data tables which have the advantage of smaller margins of error and smooth out anomalies that may arise in single-year counts. In this Report, where trends are noted, non-overlapping 5-year data summaries are used.
- *Geographical limitations of the data.* While the American Community Survey allows parsing of data specific to Glendale, other databases are collated on a more regional or county-wide population. In this report where data are not specific to Glendale, regional data or data for the county as a whole is included for context. In particular, the Report cites data from the following:
 - The Service Planning Area (SPA) level used by the Los Angeles County Department of Public Health. Glendale is in the San Fernando Service Planning Area 2; the city makes up 22% of the population of SPA 2.
 - Comparison data at the county level. Glendale is a part of Los Angeles County and comprises about 2% of the county's population. However, Glendale's population is distinct from that of the county as a whole—both racially because of its higher proportion of white women and ethnically because of its prominent Armenian American community—so this information is generally added for context only.
 - Maternal health information is available at the regional level for the tri-county area of Los Angeles, Ventura, and Santa Barbara counties. Hospital statistics for Glendale are included where relevant and publicly available.
- *Most recent data available.* In general, the larger the database, the more time needed to compile and validate the data. The largest database referenced in this Report is the U.S. Census American Community Survey (ACS). In Fall 2022 when this Report was being prepared, the most recent data available were for 2021, released in mid-September of 2022. The most recent 5-year estimates were for 2020, an average of 2016-2020 survey data. Smaller county health surveys are not generally carried out annually but are on a multi-year cycle; the most recent results available from the Los Angeles County Health Survey are from the 2018 survey. The California Health Interview Survey (CHIS) is carried out annually.
- *The impact of disruptive events.* Survey or recorded data are snapshots taken at a particular point in time when the data are collected. Disruptive events at the respondents' level or global level will influence responses. In 2020, a major modern disruptive event occurred when the COVID-19 global pandemic was declared. As a result, the U.S. Census Bureau was not able to collect reliable data on all traditional topics in 2020. In lieu of the traditional data collected by the ACS, the U.S. Census ACS program rapidly developed and carried out assessments at the national and state levels through a biweekly series of "pulse" surveys. The immediate impact of the pandemic might be seen by comparing pre-pandemic data of 2019 to data from 2021.

Despite the limitations inherent in the data presented in this Report, trends in data over the past 5-10 years impacting women and girls of Glendale can be seen, as well as data which suggest societal and economic norms are in transition. Particularly in these areas of transition it will be important to monitor

the impact of emerging trends on gender, race, and ethnicity. It is important that data-driven decisions guide the development and implementation of policies which will promote and sustain progress in equity. All of Glendale's residents will benefit in a society which values all community partners.

Please see the Editor's Note for a definition of terms used in this Report.

Executive Summary

The 2022-2023 Report on the Status of Women and Girls in Glendale is an update of a similar report published in 2015-2016 which generally referenced 2014 data. In these rapidly changing times, and especially with the impact of the COVID-19 pandemic beginning in 2020, the Commission recognizes the importance of a more current understanding of women in the community and the challenges they are facing.

This Report draws from published databases to inform the issues from a woman's perspective. It relies heavily on the American Community Survey (ACS) carried out annually by the U.S. Census Bureau for demographic data, several California health surveys for health information, and law enforcement agencies for safety information, among other sources. Please see the Introduction to the Report on page 6 to better understand the limitations of the data presented.

Significant findings of the 2022-2023 Report on the Status of Women and Girls in Glendale include the following.

Demographics

- The largest ethnic group in Glendale is Armenian American; just over one-third of Glendale's population identifies as having Armenian ancestry. Over the past decade the percentage of Armenians in Glendale has varied from 34% (2006-2010) to 37% (2011-2015); over the period 2017-2021, an average of 35% of Glendale residents reported an Armenian ancestry.
- The City of Glendale's Latina population has increased from 19% in 2014 to 21% in 2021. At the same time, the proportion of women who identify as "white" (including all ethnicities except those of Hispanic origin) has decreased from 61% in 2014 to 57% in 2021.³ The proportion of Asian American women has remained constant at about 16%. The African American population remains too small to be given statistically meaningful information on a one-year count, but over a 5-year period (2016-2020), African American women have comprised 2% of Glendale's women.
- The median age of Glendale's women is decreasing. The median age in 2014 was 43.5 years and in 2021 that has dropped to 41 years.

³ The U.S. Census Bureau gathers limited data specifically related to Armenian and other Middle Eastern populations. While individuals with ancestries (e.g., Armenian) may identify with any race, many are included as white. Unfortunately, data specifically for Armenians and ethnic groups (other than Hispanic) are not currently disaggregated in many databases used in this Report.

- In 2021, 29% of Glendale households are headed by women; this is down from 33% in 2014. These households tend to have higher rates of poverty, especially where children are in the home.

Education

- In 2021-2022, 45% of students enrolled in Glendale Unified School District (GUSD) grades K-12 identified as Armenian. The largest language group among English Learners was Armenian, comprising 13% of all GUSD students; this proportion is about the same as in 2013-2014.
- While the Latina population of Glendale is increasing, the proportion of Latinas in Glendale's public schools appears to be decreasing. In 2013-14, 54% of girls enrolled in Glendale Unified School District (GUSD) were classified as white, including Armenians; 24% identified as Latina. In 2021-2022, 58% of those enrolled were classified as white (which generally includes Armenian students) and 20% are Latina. One percent of enrolled girls is African American; 15% are Asian American or Filipina.
- Glendale women are attaining a higher level of education today than earlier in the decade. In 2014, 39% of women aged 25 years and over had a minimum of a 4-year college degree; in 2021 that has risen to 50% of women. At the same time, the proportion of women with less than a high school diploma has dropped from 15% in 2014 to 10% in 2021.
- Glendale women also have attained a higher level of education than women in the county; in 2021, 50% of Glendale women held a bachelor's degree or higher compared to 36% of Los Angeles County women.

Employment and Earnings

- The unemployment rate of Glendale women decreased from 2014 when it was 8.9% to 2019 when it had dropped to 5.4%. After a bumpy year in 2020, when unemployment rates of women and men reached as high as 18%, the 2021 annual unemployment rate of women and men had dropped back to 8.4%. Unemployment rates in 2022 have continued to decrease so that by December 2022, the unemployment rate was at just over 4%.
- Women's earnings have continued to rise. Median earnings of full-time working Glendale women increased 36% from \$45,234 in 2014 to \$61,404 in 2021. In 2021, the median earnings of women in Los Angeles County were \$52,495.
- The gender earning gap between Glendale women and men is less than that across the county and the state. In 2021, full-time working Glendale women earned 94% of what men earned; this is compared to Los Angeles County where women earned 90% of what men earned.

Poverty

- The poverty rate of Glendale women has decreased from 17% in 2014 to 14% in 2021, but it is still higher than the poverty rate for men (12% in 2021). From 2017-2021, 17% of white (including Armenian) women, 26% of Latinas, 11% of African American and 5% of Asian American women live on income below the Federal Poverty Level (FPL).
- Of Glendale's females who live in poverty, 1 in 4 (26%) are children under the age of 18 years and 1 in 4 (24%) are women over the age of 65 years.

- Fifteen percent of family households headed by single women live in poverty; in these households where women are single mothers caring for children under the age of 18 years, 1 in 4 (23%) lives in poverty.

Health

- The life expectancy from birth of Glendale women and men was calculated from 2016 data to be 83.7 years. While we do not yet know the impact of COVID-19 on life expectancy at the local level, the 2020 life expectancy of Californians was 1.9 years less than it was in 2019 (80.9 years and 79.0 years, respectively).
- The two leading causes of death of women and men in the San Fernando Service Planning Area (SPA 2) in 2019 were coronary heart disease and Alzheimer's disease. Death rates from heart disease had decreased by 25% from 2010; during this same time period, the death rate for Alzheimer's disease, a disease that disproportionately affects women, had increased by 64%. In 2020, COVID-19 replaced Alzheimer's disease as the second leading cause of death in Los Angeles County.
- The pregnancy-related death rate of California mothers appears to be increasing. In 2018-2020, the pregnancy-related death rate of mothers in the Los Angeles, Ventura and Santa Barbara county region was 16.8 deaths of mothers (per 100,000 live births), up from 14.1 in 2015-2017. While these data are not specific to Glendale women, increasing mortality rates and racial inequity are of concern. In California, African American infants die at more than twice the rate of white infants and African American mothers die at nearly 4 times the rate of white mothers from pregnancy-related causes within one year of birth or the end of pregnancy.
- Some positive health indicators for Glendale women: the percentage of uninsured women has decreased from 14% in 2014 to 7% in 2021; roughly 3 out of 4 women have been vaccinated for pneumonia and influenza; and a greater percentage of Glendale adults meet the physical activity guidelines in 2018 than in 2015 (37% and 35%, respectively).

Safety

- Glendale has a relatively low crime rate, especially when compared to the city of Los Angeles (1 crime/100,000 population compared to 7 crimes/100,000 population). The majority of violent crimes are classified as aggravated assault.
- Glendale women report less physical domestic violence inflicted by an intimate partner than women in Los Angeles County (10% and 16%, respectively).
- However, sexual violence in Glendale does not seem to be decreasing. While there were fewer rapes reported in 2021 than in 2019 (15 and 17, respectively), monthly crime reports in 2022 suggest the number of rapes in 2022 will outnumber those in 2021.

Leadership

- The number of Glendale women owning an incorporated business has increased by 33% from 2016 to 2021; in 2021, 1,885 Glendale women were self-employed in their own businesses.

- Glendale has elected women to represent them in the State Assembly and on the Los Angeles County Board of Supervisors. Two of the five Glendale City Council members and the City Clerk are women. Women currently hold 3 out of 7 City positions and 4 out of the 5 elected positions on the Glendale Unified School District school board as well as on the Glendale Community College board.
- Glendale’s City Council has appointed women volunteers to 42% of the seats on the City’s Boards and Commissions. No women serve on the Audit Committee or the Civil Service Commission; no men serve on the Arts and Culture Commission or the Commission on the Status of Women. Since women comprise 51% of the City’s population, they are under-represented on the City of Glendale’s Boards and Commissions.

Demographics

Population

The population of Glendale is estimated to be 192,376, comprising 2% of the population of L.A. County. Fifty-one percent of Glendale’s residents are female.⁴

Veteran status

There are nearly 2500 military veterans living in Glendale; they comprise about 2% of the population. There are about 40 women (2% of the veteran population) who have served in the military.⁵

Racial/ethnic distribution

The majority of Glendale’s residents are categorized as white (including all ethnicities such as Armenian but excluding Hispanic), while L.A. County is nearly half (49%) Latinx. The racial/ethnic distribution of women reflects the difference between Glendale and L.A. County.⁶

Race and Ethnicity of Women in Glendale and Los Angeles County

	Glendale, 2016-2020 ⁷	Glendale, 2021	L.A. County, 2021
African American	2%	N/A*	8%
Asian American	15%	16%	16%
Latina	19%	21%	49%
White	61%	57%	24%
Other	4%	6%	4%

**Note: The white population includes all survey respondents classified as white, excluding persons who also identify as having a Hispanic origin. Roughly one-third of Glendale women (and men) identify as*

⁴ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table B01001: *Sex by Age*. <http://data.census.gov>

⁵ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S2101: *Veteran Status*. <http://data.census.gov>

⁶ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Tables B01001, B01001D, H, I: *Sex by Age*. <http://data.census.gov>

⁷ U.S. Census Bureau. 2020 American Community Survey 5-Year Estimates. Tables B01001, B01001B, D, H, I: *Sex by Age*. <http://data.census.gov>

having an Armenian heritage. Glendale’s African American population is too small to be statistically stable in a one-year count. A 5-year pool of data (2016-2020) provides a more reliable estimate of the racial/ethnic distribution of women.

Since 2014, Glendale’s population of Latinas has increased from 19% to 21%. Over this same time frame there has been a decrease in the proportion of women who are identified as “white” from 61% in 2014 to 57% in 2021. The count of African American women remains too small to be statistically reliable in one-year estimates.⁸

Glendale’s Armenian American Community⁹

The Armenian American community in the United States is an important and distinct cultural component of the population that is categorized as white by the U.S. Census Bureau. Glendale is home to the second-largest Armenian population in the country, trailing only the much larger city of Los Angeles.¹⁰

The Armenian American Community in Los Angeles County¹¹

	Glendale		Los Angeles City		L.A. County	
	Population (Armenian)	% Total population	Population (Armenian)	% Total population	Population (Armenian)	% Total population
2006-2010	65,434	34%	73,256	2%	179,279	2%
2011-2015	72,470	37%	82,074	2%	196,075	2%
2016-2020	69,660	35%	81,311	2%	188,805	2%

Note: These data are based on a data pool of five consecutive years; they are not disaggregated by gender.

While more Armenian Americans live in the City of Los Angeles than in Glendale, they comprise only 2% of the population in the City of Los Angeles. Just over 1 in 3 Glendale residents (35%) identified as having Armenian ancestry over the 5-year period from 2016 to 2020.¹²

⁸ U.S. Census 2014 American Community Survey 1-Year Estimates. Table B01001 and Tables B01001D, H, I: *Sex by Age*. <http://data.census.gov>

⁹ Note: There are relatively little data on Glendale’s Armenian American Community through the U.S. Census Bureau, and none that provide a disaggregated look at gender.

¹⁰ World Atlas: *U.S. States with the Largest Populations of Armenian Americans*. Retrieved November 2022. <https://www.worldatlas.com/articles/states-with-the-largest-populations-of-armenian-americans.html>

¹¹ U.S. Census Bureau. 2010, 2015, and 2020 American Community Survey 5-Year Estimates. Table B04006: *People Reporting Ancestry*. <http://data.census.gov>

¹² U.S. Census Bureau. 2020 American Community Survey 5-Year Estimates. Table: B04006: *People Reporting Ancestry*. <http://data.census.gov>

Sexual Orientation/Gender Identity¹³

	2015	2018	2021
Heterosexual	96%	91%	92%
Gay/Lesbian	2%*	3%*	3%
Bisexual	1%*	6%*	4%
Asexual or other	1%*	0.3%*	2%*
Cisgender	100%*	99%*	99%*
Transgender		0.6%*	1%*

Note: These data are responses from women and men 18 years and over to the San Fernando Valley Service Planning Area (SPA 2) California Health Interview Survey. Due to small sample sizes, entries marked with an asterisk are statistically unstable and caution should be used in interpreting the data. A blank column indicates suppressed results due to small sample size.

A very slow increase in diversity of sexual orientation appears to be in progress; the proportion of transgender population is still around 1% or less.

Age

In general, the median age of women tends to be older than the median age of men. In Glendale, the median age for women is 41 years compared to 38 years for men. As a group, women within the “white” category (including Armenian and Middle Eastern/North African women but excluding Latinas) have a median age of 44 years, while Latinas represent the youngest group with a median age of 33 years.¹⁴

Median Ages (in Years)

	Glendale	L.A. County	California
Men	38	37	37
Women	41	39	39
African American Women	40	41	39
Asian American Women	39	45	42
Latina	33	34	31
White Women (all ethnicities, excluding Hispanic)	44	46	48

Note: Median ages have been rounded.

The older population of Glendale is primarily female. Girls comprise 47% of Glendale’s children 0-17 years, while women comprise 59% of the senior population 75 years and older (and 65% of those 85 years and older).¹⁵

¹³ 2015-2021 California Health Interview Survey (CHIS). Subject Areas: Demographic/Sexual Orientation and Gender Identity. UCLA Center for Health Policy Research. The Fielding School of Public Health.

<https://ask.chis.ucla.edu>

¹⁴ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Tables B01002, B01002B, D, H, I: Median Age. <http://data.census.gov>

¹⁵ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table B01001: Sex by Age. <http://data.census.gov>

Households

In 2021, there were an estimated 70,831 households in Glendale, of which 36% are owner-occupied and 64% are rental units. One in three (32%) are nonfamily households¹⁶—a householder living alone or with non-partners only—while 68% are occupied by families with an average size of 3 persons.¹⁷

Select Characteristics of Glendale Households by Percentage of Total Households

	2021	2014
Total households	70,831	72,163
Nonfamily households	22,692 (32%)	21,402 (30%)
• Women Households * Living Alone	12,157 *10,051	13,325 *11,426
• Men Households * Living Alone	10,535 *6,966	8,077 *5,987
Family households	48,139 (68%)	50,761 (70%)
• Married couple households	• 35,661	• 35,644
• Female-headed households (no spouse present)	• 8,186	• 10,680
• Male-headed households (no spouse present)	• 4,292	• 4,437

Note: Women/men living alone is a subset of women/men nonfamily households. Percentages are based on total households.

Relative to 2014, the proportion of nonfamily households in 2021 has grown and the proportion of family households has diminished from 70% to 68%. The number of households headed by single women continues to outnumber households headed by single men by nearly two to one. The percentage of households headed by unmarried partners has grown from 4% in 2014 to 6% in 2021.¹⁸

Glendale's homes sheltered a population of just over 190,000 in 2021.¹⁹ Of this population, there are

- 54,000 children under the age of 18 years,
- 10,100 women who live alone,
- 7,000 men who live alone, and
- 730 women and men who are in same-sex relationships, either as married or unmarried couples.

¹⁶U.S. Census Bureau. 2014 and 2021 American Community Survey 1-Year Estimates. Table B11010: *Nonfamily Households by Sex of Householder by Living Alone by Age of Householder*. <http://data.census.gov>

¹⁷ U.S. Census Bureau. 2014 and 2021 American Community Survey 1-Year Estimates. Table S1101: *Households and Families*. <http://data.census.gov>

¹⁸ U.S. Census Bureau. 2014 and 2021 American Community Survey 1-Year Estimates. Table DP02: *Selected Social Characteristics in the United States*. <http://data.census.gov>

¹⁹ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table B09019: *Household Type (Including Living Alone) by Relationship*. <http://data.census.gov>

Relationship status

A greater percentage of Glendale’s women today are single than in the year 2000; and a smaller percentage are married than at the turn of the century. In 2021, among women 15 years and older:

- 33% have never been married,
- 48% are married, and
- 19% are single women who are either widowed or divorced.²⁰

These figures are not significantly different from those reported in the 2015-2016 City of Glendale Report on the Status of Women and Girls.²¹

Language spoken at home

Over half (53%) of Glendale residents have immigrated to the City from another country, while just over 1 in 3 (35%) of County residents are immigrants. Roughly one in three Glendale residents (34%) speak only English. While a wide range of languages is spoken in homes across Glendale and the county, Glendale’s population is culturally very distinct from that of the county.²²

Percentage of Glendale’s Residents and Languages Spoken at Home

	Glendale	Los Angeles County
English only	34%	45%
Spanish	14%	38%
Indo-European (other than Spanish) <ul style="list-style-type: none">• Armenian²³	40% 37%*	6% 2%
Asian and Pacific Island languages	10%	10%
Other languages	2%	1%

Note: The Indo-European languages represent over 400 different languages, including Armenian, which is widely spoken in the Armenian diaspora. The data for Armenian spoken in Glendale homes (marked by an asterisk) is from a summary of 2011-2015 data.

Source: U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates

Aside from English, one of the Indo-European languages other than Spanish is spoken in 40% of Glendale homes; Armenian is the major language other than English and appears to be spoken in about 37% of Glendale homes.²⁴ Over half (59%) of those speaking Armenian in their homes rate themselves as

²⁰ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table B12001: Sex by marital status for the population 15 years and over. <http://data.census.gov>

²¹ 2015-2016 Report on the Status of Women and Girls: City of Glendale. Glendale Commission on the Status of Women and Mount Saint Mary’s University. <https://www.glendaleca.gov/home/showpublisheddocument/37541/636324614239470000>

²² U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table C16005: Nativity by language spoken at home by ability to speak English for the population five years and over. <http://data.census.gov>

²³ U.S. Census Bureau. 2015 American Community Survey 5-Year Estimates (for Glendale); 2021 American Community Survey 1-Year Estimates (for Los Angeles County). Table B16001: Language Spoken at Home by Ability to Speak English for the Population 5 Years and Over.

²⁴ U.S. Census Bureau. 2011-2015 American Community Survey 5-Year Estimates. (This is the most recent information for Glendale in this data table) Table B16001: Languages Spoken at Home and Ability to Speak English for the Population 5 Years and Over. <http://data.census.gov>

speaking English “less than very well.” In the county as a whole, Spanish is the major language other than English spoken in homes.²⁵

Education

K-12 students

Enrollment. The Glendale Unified School District (GUSD) is comprised of 21 elementary schools, five middle schools, and six high schools, as well as several sites for specialized programs.²⁶ Enrollment in the Glendale Unified School District (GUSD) in 2021-2022 was 24,213 pupils, 48% of whom are girls. In 2014-15, just over 26,000 students were enrolled with 48% girls.²⁷

The racial/ethnic profile of girls enrolled in Glendale’s public K-12 schools is significantly different from the county profile, where Latinas comprise nearly two-thirds of the population. In Glendale, 58% of girls enrolled in K-12 public schools are classified as white (including Armenian, but not Hispanic origin) and 20% are Latina of any race.²⁸ Across Los Angeles County, 13% of girls are white and 66% are Latina.

Table 1. Percentage Distribution of Girls in K-12 Public Schools by Race/Ethnicity: 2021-22

	GUSD	L.A. County	California
Number of girls in sample	11,669	648,973	2,864,033
African American	1%	7%	5%
Alaska Native/Native American	0.1%	0.2%	0.5%
Asian American, not Hispanic	11%	8%	9%
Filipina, not Hispanic	4%	2%	2%
Pacific Islander	0.1%	0.3%	0.4%
Latina	20%	66%	56%
White, not Hispanic	58%	13%	21%
Multiracial, not Hispanic	4%	3%	4%
Not reported		0.9%	1%

Source: California Department of Education.

Armenian American students enrolled in Glendale Unified School District (GUSD). In 2021-2022, 45% of all students enrolled in GUSD identified as Armenian: 45% of girls (5,212) and 45% of boys (5,696).²⁹ The district has an Armenian dual immersion program which begins in elementary school with 50% of content taught in Armenian and which continues through high school with student electives in the

²⁵ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table B16001: Languages Spoken at Home and Ability to Speak English for the Population 5 Years and Over. <http://data.census.gov>

²⁶ GUSD Schools, sites and specialized programs. <http://www.gusd.net/Page/593>

²⁷ California Department of Education. K-12 Public School Enrollment, Glendale Unified: 2021-22 Enrollment by Ethnicity and Grade. <http://dq.cde.ca.gov/>

²⁸ California Department of Education. K-12 Public School Enrollment, District enrollment by Gender, Grade and Ethnic designation for 2021-2022. <http://dq.cde.ca.gov/>

²⁹ Glendale Unified School District. (2016). GUSD District-at-a-Glance: Selected Demographics and Information. Selected Demographics and Information. www.gusd.net/cms/lib

Armenian language; 871 students (489 girls and 382 boys) are enrolled.³⁰ There is the opportunity for students to receive a Seal of Biliteracy in Armenian.

In 2021-2022, one in five (4,937) GUSD students were classified as English Learners (ELs); over half of EL students (62%) speak Armenian.³¹ In addition to EL students, there were another 3,798 Armenian students who tested as Fluent English Proficient (FEP). Collectively, Armenian EL and FEP students comprise 28% of GUSD enrollment. The next largest language group of EL and FEP students are Spanish speakers, comprising just over 9% of GUSD enrolled students.

Graduation rates. The four-year high school graduation rate of the nearly 2,000 girls and boys in the 2020-21 cohort of students in the Glendale Unified School District was 92%, compared with 82% of students in the County and 84% across the state.³²

Table 2. High School Graduation Rates: 2020-21

	GUSD	L.A. County	California
Number pupils in cohort	1,960	116,311	500,179
Graduation rate	92%	82%	84%
• Girls	• 95%	• 86%	• 87%
• Boys	• 89%	• 79%	• 80%

Source: California Department of Education

As is true in the county and statewide, the high school graduation rate for girls is greater than that for boys. In Glendale, the graduation rate of girls in the 2020-21 cohort was 95% while that for boys was 89%. Sixty percent of Glendale girls who graduated from high school in four years met admission requirements for the University of California and the California State University.

Educational attainment

Glendale women tend to be better educated than women in Los Angeles County as a whole—and better educated than California women. Focusing on women 25 years and older, only 10% of Glendale women have less than a high school degree, compared with 19% of women across the county.³³

³⁰ Glendale Unified School District website. www.gusd.net/page/1161

³¹ Ed Data (Education Data Partnership). An online tool selected for Glendale Unified (data set). www.ed-data.org/district/Los-Angeles/Glendale-Unified/

³² California Department of Education. 2020-21 Four-Year Adjusted Cohort Graduation Rate. Glendale Unified School District. <http://dq.cde.ca.gov/>

³³ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S1501: Educational Attainment. <http://data.census.gov>

Table 3. Educational Attainment of Women, 25 Years and Older

	Glendale	L.A. County	California
No high school diploma	10%	19%	15%
High school diploma	19%	20%	20%
Some college, no degree	13%	18%	20%
Associate degree	8%	8%	9%
Bachelor's degree	32%	23%	23%
Graduate/professional degree	18%	13%	14%

Source: U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates

In 2021, 50% of Glendale women hold a minimum of a bachelor's degree; in 2014, that figure was 39%.³⁴

Educational attainment is not the same among women of different races/ethnicity.

Table 4. Educational Attainment of Glendale Women by Race/Ethnicity: 2021

	Less than high school	High school diploma	Bachelor's degree	Graduate or Professional degree
All women	10%	19%	32%	18%
African American	N	N	N	N
Asian American	2%	6%	51%	18%
Latina	20%	22%	25%	9%
White	10%	22%	27%	20%

Note: These percentages do not include those who have attained some college experience or an associate degree. Among white women (including Armenian women) are those of all ethnicities except Hispanic. "N" means that results for African American women at this level of detail are suppressed due to the small sample size. For the 2017-2021 five-year period, 95% of African American women and men 18 years and over held a high school degree or higher; 56% held a bachelor's degree or higher.³⁵

Source: U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates

Glendale's women tend to be better educated than the city's men. Among Glendale adults 25 years and over who have attained a bachelor's degree, 55% are women and 45% are men. Additionally, among those who hold a graduate or professional degree, 55% are women.³⁶

³⁴ U.S. Census Bureau. 2014 American Community Survey 1-Year Estimates. Table S1501: *Educational Attainment*. <http://data.census.gov>

³⁵ U.S. Census Bureau. 2021 American Community Survey 5-Year Estimates. Table S1501: *Educational Attainment*. <http://data.census.gov>

³⁶ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S1501: *Educational Attainment*. <http://data.census.gov>

Employment and Earnings

Employment

More than two-thirds (69%) of Glendale’s 58,352 women between the ages of 20 and 64 years are employed. This is slightly higher than the 66% of women across the county and state who are employed. Over half (58%) of Glendale’s mothers with children under the age of 6 years are employed.³⁷

The 2021 unemployment rate of women in Glendale was 8.9%: this unemployment rate was higher than that for men (7.8%) and for women across the state (8.4%).³⁸

Table 5. Annual Unemployment Rates for Women: 2012-2021³⁹

	2012	2014	2019	2021
Glendale	9.0%	8.9%	5.4%	8.9%
L.A. County	11.0%	8.5%	4.8%	9.1%
California	10.7%	8.0%	4.8%	8.4%

Note: These unemployment figures are for women ages 20-64 years.

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

The unemployment rate had been trending downward from 2012 through 2019, but when the pandemic was declared in March 2020, unemployment quickly rose. A detailed look at Glendale’s employment rate for women and men from January 2019 through December 2022 illustrates the impact of COVID-19 on employment and suggests an encouraging trend as unemployment rates continue generally downward reaching pre-pandemic levels.

Table 6. Monthly Unemployment Rates for Glendale Women and Men (Not Seasonally Adjusted)⁴⁰

	January	April	September	December
2019	4.7%	3.8%	4.0%	3.8%
2020	4.5%	17.8%	11.9%	10.0%
2021	10.4%	10.3%	8.0%	5.9%
2022	6.5%	4.5%	4.2%	4.2%

Source: California Employment Development Department

Earnings

A positive story is found in the earnings of Glendale’s women. In 2014, the rounded median earnings for full-time working Glendale women were just over \$45,200; in 2021 median earnings are just over \$61,000 representing a 36% increase from 2014 data. The 2021 earnings estimates for Glendale women

³⁷ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S2301: *Employment Status*. <http://data.census.gov>

³⁸ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S2301: *Employment Status*. <http://data.census.gov>

³⁹ U.S. Census Bureau. American Community Survey 1-Year Estimates for the years indicated. Table S2301: *Employment Status*. <http://data.census.gov>

⁴⁰ Unemployment Rates Historical Data. California Employment Development Department. Online data tool accessed at: <https://labormarketinfo.edd.ca.gov/cgi/dataanalysis/areaselection.asp?tablename=labforce>

are higher than those for women across L.A. County (\$52,495) and higher than for women across the state (\$57,373).⁴¹

Table 7. Median Earnings and the Gender-Earning Gap for Full-Time Workers

	Glendale		L.A. County		California	
	Women	Men	Women	Men	Women	Men
2021						
Median earnings	\$61,404	\$65,633	\$52,495	\$58,588	\$57,373	\$65,324
Gender earnings gap (full-time, year-round)	94%		90%		88%	

Note: The gender wage gap is presented as a percentage of women’s earnings against men’s earnings.

Source: U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates.

The Gender Earning Gap: Across the county, state and nation, women tend to have smaller median earnings than men. This gender-based earning gap has generally been roughly constant or very slowly shrinking over recent years as women make equity gains in the workplace. Since 2015, for example, women in California have earned 86-88% of what men earn while across the nation women have earned 80-82% of what men earn. In 2021, Glendale full-time working women earn 94% of what men earn, meaning that for every \$100 men earn, women earn \$94 (based on median earnings).

Median earnings among women differ widely by race and ethnicity.⁴²

Table 8. Median Earnings of Full-Time Working Glendale Women by Race/Ethnicity and the Gender Earning Gap: 2021

	All Women	African American	Asian American	Latina	White (all ethnicities except Hispanic)
Median Earnings	\$61,404	\$61,273	\$69,829	\$53,647	\$61,608
Earnings relative to all men	94%	93%	106%	82%	94%
Earnings relative to white men	81%	81%	92%	71%	81%

Note: For this table, the median earnings of Glendale men who work full-time, year-round are \$65,633; white men earn \$75,634. Earnings for both white women and men (which include Armenian individuals) are significantly impacted by the Armenian population, although the precise effect is unmeasured.

Source: U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates

White men as a group have traditionally been the highest earners among full-time workers. Relative to Glendale’s full-time working white men, Asian American women come closest to matching their earnings

⁴¹ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table B20017: *Median Earnings in the Past 12 Months (in 2021 Inflation-Adjusted Dollars) by Sex by Work Experience in the Past 12 Months for the Population 16 Years and Over with Earnings in the Past 12 Months.* <http://data.census.gov>

⁴² U.S. Census Bureau. American Community Survey 1-Year Estimates. Tables B20017B, D, H, I: *Median Earnings in the Past 12 Months (in 2021 Inflation-Adjusted Dollars) by Sex by Work Experience in the Past 12 Months for the Population 16 Years and Over with Earnings in the Past 12 Months.* <http://data.census.gov>

with earnings 92% of white men. Latinas earn 71 cents for each dollar earned by white men (based on median earnings).

Occupations

Differences in earnings can partly be accounted for by the different occupations in which workers are engaged. The U.S. Census Bureau clusters occupations into five categories for tracking: occupations in management, business, sciences, and arts; service; sales and office; natural resources, construction, and maintenance; and production, transportation, and material moving.

Glendale women hold nearly half (48%) of the full-time jobs in management, business, sciences, and the arts; they hold more than half of service jobs (52%), and sales and office jobs (55%). The number of women working in natural resources, construction, and maintenance as well as in production, transportation, and material-moving jobs is significantly less than men (4% and 10% of jobs in these respective clusters are held by women).

Table 9. Percentage of Glendale Full-Time Working Women and Men in Each Occupational Cluster and Median Earnings: 2021

	Percent Women in Occupational Cluster ⁴³	Median Earnings ⁴⁴	
		Women	Women’s Earnings as a Percent of Men
All occupations	44%	\$61,489	94%
Management, business, sciences, and arts	48%	\$77,765	86%
Service	52%	\$27,184	87%
Sales and office	55%	\$56,378	116%
Natural resources, construction, and maintenance	4%	-	-
Production, transportation, and material moving	10%	\$61,239	151%

Note: A dash means that the small sample size has led to suppression of the results. These figures are for full-time, year-round workers 16 years and over.

Source: U.S. Census Bureau. 2021 American Community Survey, 1-Year Estimates

While there are many types of jobs within each occupational cluster, this table suggests that some of the highest paying occupations for women based on median earnings are in management, business, sciences, and arts. The six highest-paying types of jobs (in terms of median salaries) in this occupational

⁴³ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S2402: *Occupation by sex for the full-time, year-round civilian employed population 16 years and over.* <http://data.census.gov>

⁴⁴ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S2412: *Occupation by Sex and Median Earnings in the Past 12 Months (in 2021 Inflation-Adjusted Dollars) for the Full-Time, Year-Round Civilian Employed Population 16 Years and Over.* <http://data.census.gov>

cluster include two types of occupations in which women comprise more than half the workforce: legal occupations and health diagnosing and treating practitioners.⁴⁵

Table 10. Highest-Paying Occupations for Glendale Women in Management, Business, Sciences and Arts: 2021

Occupations	Median salary of women ⁴⁶	Percentage of workforce that is female
Legal occupations	\$153,777	56%
Life, physical, and social sciences	\$117,895	32%
Health diagnosing and treating practitioners	\$94,583	52%
Architecture and engineering	\$84,953	8%
Management occupations	\$83,406	45%
Computer and mathematical	\$74,706	11%

Note: These figures are based on the 2021 single-year survey. Note that occupational clusters include a wide variety of jobs. For example, “legal occupations” include attorneys as well as clerical support workers. “Health diagnosing and treating practitioners” includes surgeons and physicians, as well as nurses; this category does not include health technologists, technicians or healthcare support.

Source: U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates.

Some of the higher-paying occupations are held predominantly by men: 92% of architecture and engineering jobs, 89% of computer and mathematical jobs, and 68% of jobs in the sciences are held by men.

There have been some dramatic changes in the representation of Glendale women in occupational fields in the past decade. For example, from 2014 to 2021 the representation of Glendale women has increased in:

- legal occupations from 39% to 56%, and
- management positions from 33% to 45%.

Over the same time period, the percentage of Glendale women has decreased in:

- health diagnosing and treating practitioners from 72% to 52%, to a more equitable representation of women and men in the field, and
- computer and mathematical occupations from 22% to 11%.

Additionally, in Glendale as across the county and state, some types of jobs remain stereotypically female with roughly 2/3 or more of the workforce comprised of women.

⁴⁵U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S2402: *Occupation by sex for the full-time, year-round civilian employed population 16 years and over.* <http://data.census.gov>

⁴⁶U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S2412: *Occupation by Sex and Median Earnings in the Past 12 Months (in 2021 Inflation-Adjusted Dollars) for the Full-Time, Year-Round Civilian Employed Population 16 Years and Over.* <http://data.census.gov>

Table 11. Occupations Predominantly Held by Glendale Women

	Percentage of workforce that is female ⁴⁷	Women’s median salary ⁴⁸
Educational instruction and library jobs	80%	\$72,828
Community and social service jobs	66%	\$54,418
Office and administrative support	65%	\$55,801
Healthcare technologists and technicians	63%	\$40,992

Source: U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates.

Poverty

Measuring poverty

In this report, we use the federal poverty level (FPL) as the “official” threshold by which to measure poverty. When incomes fall below this threshold, the individual or family unit is “living in poverty.” In 2021, the FPL for an individual is \$13,788. For a family of four with two children under the age of 18 years, the FPL is defined as \$27,479.⁴⁹ Geographic location and any variation in the cost of living does not impact the FPL: the same threshold is used to determine poverty of an individual living in urban Glendale as for an individual living anywhere else in the United States.

Poverty status

Using the above metrics, 13% of Glendale’s residents live below the federal poverty level. As elsewhere, the poverty rate of Glendale women and girls is higher than that for men and boys.⁵⁰

Table 12. Poverty Rates: 2021

	Glendale	L.A. County	California	United States
Women	14%	15%	13%	14%
Men	12%	13%	11%	12%
Overall	13%	14%	12%	13%

Note: Percentages have been rounded.

Source: U.S. Census 2021 American Community Survey 1-Year Estimates.

⁴⁷ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S2402: *Occupation by sex for the full-time, year-round civilian employed population 16 years and over*. <http://data.census.gov>

⁴⁸ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S2412: *Occupation by Sex and Median Earnings in the Past 12 Months (in 2021 Inflation-Adjusted Dollars) for the Full-Time, Year-Round Civilian Employed Population 16 Years and Over*. <http://data.census.gov>

⁴⁹ U.S. Census Bureau. *Historical Poverty Thresholds*. (2022) <http://census.gov/data/tables/time-series/demo/income-poverty/historical-poverty-thresholds.html>

⁵⁰ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S1701: *Poverty Status in the Past 12 Months*. <http://data.census.gov>

Not all racial/ethnic groups are affected equally by poverty; in general, women of color are much more likely to live in poverty.⁵¹ A positive sign is that the *one-year* 2021 overall poverty rate of Glendale’s women and girls has decreased by three percentage points since 2014, although the *one-year* poverty rate of Latinas has increased by six percentage points (from 15% to 21%) over that time frame.

Table 13. Percentage of Glendale Women and Girls by Race/Hispanic Ethnicity Who Live in Poverty: Five-Year Averages 2010-2014 and 2017-2021

Data year	All women	African American	Asian American	Latina	White
2010-2014	15%	13%	9%*	16%	18%
2017-2021	15%	11%	5%	26%	17%
2017-2021, Los Angeles County	15%	25%	12%	18%	10%

Note: Five-year estimates of poverty were used in order to capture poverty rates of Glendale’s African American and Asian American women.

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

The five-year estimates of poverty indicate that poverty rates of women of all races have decreased except for Latinas which has increased by 10 percentage points. When disaggregated by race/Hispanic ethnicity, the five-year poverty rates of Glendale’s women classified as white (including Armenian and Middle Eastern/North African women) and of Latinas is higher than for women across Los Angeles County.

Poverty and age

Of Glendale’s nearly 14,000 women and girls who live in poverty:⁵²

- 7% are under the age of 5 years;
- 26% are under the age of 18 years; and
- 24% are over the age of 65 years.

It should be noted that while the poverty rate in 2021 for Glendale women across all age groups is 14%, the poverty rate among women who are 75 years and older is 19%. One in five women over the age of 75 years (roughly 1,900 women) live on incomes below the Federal Poverty Level.

Poverty and families

Poverty is particularly difficult for families: 9% of all families in Glendale live below the federal poverty level. Among families with children, those headed by single women caring for their own or other related children are far more likely to live in poverty than married-couple families.⁵³

⁵¹ U.S. Census Bureau. American Community Survey 1- and 5-Year Estimates for the years listed. Multiple year pooling of data is necessary in order to statistically represent all of Glendale’s four major racial/ethnic groups. Tables B17001, B17001B, D, H, I: *Poverty status in the past 12 months, by Sex by Age*. <http://data.census.gov>

⁵² U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Percentages are derived from Table B17001: *Poverty status in the past 12 months, by sex by age*. <http://data.census.gov>

⁵³ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table CP03: *Comparative Economic Characteristics*. <http://data.census.gov>

Table 14. Percentage of Glendale Families Living in Poverty: 2021

	Glendale	L.A. County	California	United States
Married-couple families	8%	7%	5%	5%
• With children under 18 years	• 11%	• 8%	• 7%	• 6%
Single women households	15%	20%	21%	24%
• With children under 18 years	• 23%	• 31%	• 29%	• 34%

Source: U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates.

Homelessness

Glendale participates in an annual homeless count, with the 2022 “point-in-time” count carried out on February 25, 2022.⁵⁴ While a full count was not made in 2021 due to COVID-19, the lowest numbers of homeless individuals counted most recently were in 2017 and 2020 when there were just under 170 homeless persons in the city.⁵⁵

Table 15. City of Glendale Homeless Counts: 2015-2022

	2015	2018	2020	2022
Total count	208	260	169	225
Sheltered population	41%	40%	56%	54%

Source: City of Glendale.

Over three-quarters of the 2022 sheltered population (77%) identified as white (which may also include individuals with Armenian ancestry), 16% as Black, and 5% as Asian. Nearly half (49%) of the sheltered population identified as Latinx.

Of Glendale’s homeless individuals, 103 were unsheltered. Among the unsheltered population, 38% identified as white (which may include Armenian individuals), 11% as Black, 10% as Armenian, and 6% as Asian. One-third (32%) did not specify a race or ethnicity, and the remaining 5% identified either as multiracial or Native/Alaskan.⁵⁶

Glendale has worked to provide shelter for its homeless residents, and now provides temporary or permanent housing for over half of those without a home. Note that Glendale’s 2022 homeless population increased by 33% from January 2020; in the interval between these counts, the COVID-19 pandemic was declared.

⁵⁴ Note: The Point-in-Time Homeless Count is a requirement of the City’s participation in the U.S. Department of Housing and Urban Development Continuum of Care (CoC) program in place throughout the nation to assess the nation’s homeless population and thus to inform its coordination and funding of services and care for this population. Such counts are carried out through the CoC’s across the County and State.

⁵⁵ City of Glendale Homeless Count Archives. 2022 Homeless Count: Comprehensive Report contains cited data. www.glendaleca.gov/government/departments/community-services-parks/human-services/homeless-services/homeless-count-archive

⁵⁶ Percentages are rounded and do not add to 100%.

Table 16. Racial/Ethnic Distribution of Glendale’s Homeless Population: 2022

	Glendale’s homeless population ⁵⁷	Glendale’s population as a whole ⁵⁸
African American	15%	2%
Asian American	4%	15%
White	64%	60%
Multiple Races	1%	3%
Latinx	36%	20%
Other/No response	15%	0.6%

Note: Among the homeless population, those identifying with Latinx ethnicity could also identify with any race, therefore percentages in this column will not add to 100%. In the Census data for Glendale’s population as a whole, the percentage is for one race only; Latinx can be any race. Given racial choices of the Census survey, Armenians are generally categorized as white.

Source: City of Glendale and U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates.

When compared with the City’s overall population, African Americans and Latinx women and men are vastly over-represented among the homeless.

Among Glendale’s 2022 homeless population, there were 180 adults over the age of 18 years. Eighty-seven (39%) of the homeless identified as female, 126 identified as male, and one person identified as transgender. Nearly 5% did not respond to this question.

Impact of COVID-19. Among the 33 unsheltered adults in Glendale who reported homelessness for the first time in 2021-2022, three major factors that contributed to their homelessness include:

- loss of employment, cited by 25% of unsheltered individuals;
- unexpected illness, cited by 15%; and
- lack of affordable housing due to high rents and stagnating income, with 13% indicating they could not afford a rent increase.

While none of these factors is specifically tied to COVID-19 in the homeless survey, the pandemic negatively impacted each of these factors. As businesses shut down in 2020-2022 in an effort to control the outbreak of the virus, many individuals experienced a loss of employment and/or a reduction in work hours. And many people suffered from the disease itself. The lack of affordable housing is prevalent throughout much of Southern California, a problem made worse in 2020-2022 as incomes were reduced.

In the 2022 Glendale Community Health Needs Assessment, a partnership between Dignity Health and Adventist Health, focus groups were used to gather community input to help prioritize community

⁵⁷ City of Glendale Homeless Count Archives. *2022 Glendale Homeless Count: Comprehensive Report.* www.glendaleca.gov/government/departments/community-services-parks/human-services/homeless-services/homeless-count-archive

⁵⁸ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table DP05: *ACS Demographic and Housing Estimates.* <http://data.census.gov>

needs. It is notable that affordable housing in the city ranked among the top five concerns by all focus groups; in the Armenian Society focus group, it was prioritized as number 1.⁵⁹

The reasons an individual may become homeless are complex, but some common circumstances contributing to homelessness have emerged over the years. In 2022, among Glendale's 180 homeless adults, 19% identified serious mental issues and 3% identified substance use disorders. Among Glendale's 2022 homeless adults, 11% identified as survivors of domestic violence. While the gender of the respondents citing these issues is not reported, domestic violence is known to disproportionately impact women and girls. (See the Chapter on Safety for further discussion of domestic violence and its impact on women.)

Health

Life expectancy

Over the past decade, the life expectancy of Los Angeles County residents increased, reaching 82.4 years (from birth) in 2019. Women in the county had a life expectancy of 85.2 years, compared to 79.6 years for men.⁶⁰ Residents of the San Fernando Service Planning Area (SPA 2),⁶¹ which includes the City of Glendale, had a life expectancy at birth of 83 years. The life expectancy of Glendale's residents was calculated from 2016 data to be 83.7 years.⁶²

We have yet to understand the impact of COVID-19 on life expectancy at local levels, but nationwide COVID-19 decreased life expectancy of women and men by an average of 1.8 years. In California, the life expectancy of women and men decreased 1.9 years—from 80.9 years in 2019 to 79.0 years in 2020.⁶³

Leading causes of death

From 2010-2019, mortality rates in the county and in the San Fernando SPA 2 decreased overall by 3%. Death from heart disease remained the number 1 “killer” over the past decade and is the cause of more than twice the number of deaths from the second leading cause. The good news is that the rate of death

⁵⁹ Glendale Community Health Needs Assessment: 2022. (June 2022). Dignity Health – Glendale Medical Hospitals and Health Centers, in partnership with Adventist Health Glendale.

<https://www.dignityhealth.org/content/dam/dignity-health/pdfs/chna/2022-chna/gmhhc-chna-22.pdf>

⁶⁰ *Patterns in Mortality and Life Expectancy in Los Angeles County, 2010-2019*. (May 2022) Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology.

http://www.publichealth.lacounty.gov/epi/docs/2019_Mortality_Report_FINAL_052022.pdf

⁶¹ Note: Health data for the San Fernando Service Planning Area (SPA 2) will be included throughout this chapter; it is the most localized data for Glendale residents, although most of the data cited in this section are not disaggregated by gender. Glendale is a part of SPA 2 and accounts for 22% of its population.

⁶² Los Angeles County Department of Public Health. *City and Community Health Profiles, 2018: Glendale*. (June 2018). <http://publichealth.lacounty.gov/ohae/docs/cchp/pdf/2018/Glendale.pdf>

⁶³ Arias, E.; Xu, J.; Tejada-Vera, B.; Murphy, S.; and Bastian, B. (August 2022). *U.S. State Life Tables: 2020*. National Vital Statistics Report 71 (2). Reports can be downloaded at <https://www.cdc.gov/nchs/products/index.htm>

from heart disease also saw one of the greatest decreases in the past decade, along with decreases in mortalities from lung cancer.⁶⁴

Table 17. Mortality Rates for Leading Causes of Death in Los Angeles County and the San Fernando SPA 2: 2010-2019

	L.A. County		San Fernando SPA 2		
	2019	Change from 2010		2019	Change from 2010
All causes of death	578.9	-6%	All causes of death	560.5	-3%
Coronary heart disease	97.4	-29%	Coronary heart disease	102.2	-25%
Alzheimer’s disease	39.1	58%	Alzheimer’s disease	47.5	64%
Stroke	33.9	-6%	Stroke	30.2	-6%
Diabetes mellitus	26.7	27%	COPD	25.1	-6%
COPD	25.6	-14%	Lung cancer	22.1	-28%
Lung cancer	21.7	-34%	Diabetes mellitus	20.4	22%

Note: In this study, cancer is disaggregated by location/body site of the disease. These data are not disaggregated by gender. Mortality rates equal the number of deaths from that cause compared to 100,000 population; these rates are adjusted for age.

Source: Los Angeles Department of Public Health

While the mortality rates for most of the diseases among the top 10 “killers” have decreased, there has been an alarming increase in the mortality rate from Alzheimer’s and from diabetes. These mortality rates are not specific for Glendale itself, but there are two general trends that should be noted as having a potential impact on the health of Glendale women and men. For Los Angeles County:

1. Alzheimer’s disease disproportionately affects women, and it is on the rise. In the county, the 2019 mortality rate from Alzheimer’s was 42.1 for women and 33.9 for men; moreover, the change in mortality rate over the decade has been greater for women (62%) than for men (52%).
2. Diabetes, too, is on the rise. Men are more prone to death from diabetes than women (mortality rate of 33.4 for men compared to 21.2 for women), and the change in mortality rate over the decade has been greater for men than for women (30% for men compared to 22% for women).

These diseases do not impact all racial or ethnic groups equally, although the mortality rates of Los Angeles County women by race and ethnicity show the leading cause of death for every group is coronary heart disease followed by Alzheimer’s disease.⁶⁵

⁶⁴ *Patterns in Mortality and Life Expectancy in Los Angeles County, 2010-2019.* (May 2022) (Table B-2) Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology.

http://www.publichealth.lacounty.gov/epi/docs/2019_Mortality_Report_FINAL_052022.pdf

⁶⁵ *Patterns in Mortality and Life Expectancy in Los Angeles County, 2010-2019.* (May 2022) Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology.

http://www.publichealth.lacounty.gov/epi/docs/2019_Mortality_Report_FINAL_052022.pdf

Table 18. Mortality Rate of Los Angeles County Women from Leading Causes of Death by Race and Ethnicity: 2019

	Number of deaths per 100,000 women (adjusted for age)				
	All women	African American	Asian American	Latina	White
Coronary heart disease	69.4	106.9	48.9	55.7	78.3
Alzheimer’s disease	42.1	48.1	24.5	33.5	53.6
Stroke	31.7	45.8	25.0	31.0	30.8
COPD	21.9	27.0	7.9	11.9	34.0
Diabetes	21.2	34.9	19.0	26.4	14.3
Breast cancer	19.1	29.5	14.8	14.2	21.7

Note: Mortality rates are the number of deaths/100,000 population and are adjusted for age.

Source: Los Angeles County Department of Public Health

African American women are much more prone to death by coronary heart disease, stroke, diabetes, and breast cancer than women in other racial/ethnic groups, a fact not unique to the county. White women are more likely to die from Alzheimer’s and COPD than other groups. Latinas and Asian American women are least likely to die from breast cancer. Asian American women have the smallest mortality rate for each of the leading diseases in the table above, with the exception of diabetes.

Impact of COVID-19. In March 2020, the COVID-19 pandemic was declared in the country as the number of Southern Californians infected with the novel coronavirus rapidly grew. By the end of 2020, COVID-19 was the second leading cause of death in Los Angeles County. Among all adults living in the county—regardless of gender, race or ethnicity—COVID-19 became one of the top three causes of death that year.⁶⁶ In Service Planning Area 2, the mortality rate of COVID-19 was 87.4 (deaths per 100,000 residents), second only to that of coronary heart disease which had a mortality rate of 108.9.

Aside from the insertion of COVID-19 as a leading cause of death in 2020. The age-adjusted mortality rate of nearly all leading diseases causing death increased in 2020 compared to 2019. The exceptions for Los Angeles County women are mortality rates for COPD, breast cancer and lung cancer, which decreased in 2020 relative to 2019 mortality rates.

Premature death of women. If we limit the causes of death to women younger than 75 years of age, breast cancer figures among diseases with the highest death rates. Additionally, breast cancer ranks highest among diseases in terms of years of potential life lost (YPLL).^{67 68}

⁶⁶ *Mortality in Los Angeles County, 2020. Provisional Report.* Los Angeles County Department of Public Health. Office of Health Assessment and Epidemiology. May 2022. <http://www.publichealth.lacounty.gov/epi/>

⁶⁷ *Patterns in Mortality and Life Expectancy in Los Angeles County, 2010-2019.* (May 2022) Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology. http://www.publichealth.lacounty.gov/epi/docs/2019_Mortality_Report_FINAL_052022.pdf

⁶⁸ *Mortality in Los Angeles County, 2020: Provisional Report.* Los Angeles County Department of Public Health. Office of Health Assessment and Epidemiology. (May 2022) http://publichealth.lacounty.gov/epi/docs/2020_Mortality_Brief_FINAL_052022.pdf

**Table 19. Premature Death Rate from Disease
(in Potential Years of Life Lost): Los Angeles County Women**

	2019 YPLL
Breast cancer	220
Coronary heart disease	202
Diabetes	127
Stroke	110
Lung cancer	72

Note: The YPLL death rates are age-adjusted and are based on the number of potential years of life lost (before age 75) per 100,000 women. Leading causes of premature death include unintentional drug overdoses (ranked 3rd), motor vehicle crashes (ranked 5th), and suicide (ranked 9th).

Source: Los Angeles County Department of Public Health

In Service Planning Area 2, breast cancer is the 10th leading cause of premature death among women.

Table 20. Mortality Rates from Breast Cancer of Los Angeles County Women by Race/Ethnicity: 2019⁶⁹

	Ranked cause of death	Number of deaths	Age-adjusted death rate
All women	6	1,193	19.1
African American	5	177	29.5
Asian American	7	166	14.8
Latina	5	320	14.2
White	6	510	21.7

Note: Men also die from breast cancer, but it is not a leading cause of death.

Source: Los Angeles Department of Public Health

In SPA 2, 276 women died of breast cancer in 2019, amounting to an age-adjusted death rate of 19.4 deaths per 100,000 SPA 2 women. These data are not disaggregated by race.

While the data in Tables 18-21 are not specifically for Glendale women, there are three generalizations relevant to the health of all women.

- 1) The death rates of most of the diseases in 2020 are greater than for 2019 (COPD, breast cancer and lung cancer are the exceptions for Los Angeles County women). This is attributed in part to the fact that women and men delayed getting medical care during the pandemic because of the risk of exposure to COVID-19 or disruption of the healthcare system.
- 2) Breast cancer is the leading cause of premature death of women in terms of potential years of life lost. Because of its relatively high death rate and because it strikes those young women least likely to suspect it, it is often detected at a late stage when treatment is less effective.
- 3) African American women are twice as likely as Asian American and Latinas to die from breast cancer.

⁶⁹ *Patterns in Mortality and Life Expectancy in Los Angeles County, 2010-2019.* (May 2022) Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology.
http://www.publichealth.lacounty.gov/epi/docs/2019_Mortality_Report_FINAL_052022.pdf

Infant and maternal health

In 2019, there were about 21,700 babies born in the San Fernando Service Planning Area (SPA 2); 71 died within the first year of birth.⁷⁰ Of these births, 552 were to teen mothers and 1,580 were low birth birthweight; 1,967 were pre-term live births. These are all factors associated with increased risk of infant mortality.

Over the period 2017-2019, the infant mortality in California was 4.2 infants per 1,000 babies who died within one year of birth; in Los Angeles County the rate was 3.9 infant deaths per 1,000 within one year of birth.⁷¹ Nearly 95% of infants who die within 1 year of age in the state are linked to birth defects.

The 2018 Community Health Profile of Glendale indicated that the rate of infant mortality in the city was 3.5 infant deaths per 1,000 live births, a mortality rate that is lower than the county’s 2018 infant mortality rate of 4.2.⁷²

Health outcome studies show that exclusive breastfeeding is associated with improved infant and childhood health, as well as with decreased rates of childhood obesity.⁷³ In Los Angeles County, 93% of mothers initiate breastfeeding and 62% exclusively breastfed their infants at birth. Birthing mothers at the three hospitals in Glendale roughly mirror these statistics.⁷⁴

Table 21. Prevalence of Breastfeeding in Glendale Hospitals: 2020

	Number of births	Any breastfeeding	Exclusive breastfeeding
Glendale Adventist Hospital	1,497	94%	69%
Glendale Memorial Hospital Health Center	1,081	90%	44%
USC Verdugo Hills Hospital	533	96%	64%
Los Angeles County average	88,671	93%	62%

Note: The percentages of mothers in Los Angeles County who initiated breastfeeding in 2020 is down by one percentage point from 2019.

Source: California Department of Public Health.

The health of infants is connected to the health of the mother. Mothers who die within one year of terminating a pregnancy (either by giving birth or other means) from a cause either directly or indirectly

⁷⁰ L.A. County Department of Public Health, Maternal, Child and Adolescent Health. Special Report by Service Planning Area. These figures are based on 2012-2016 data. http://ph.lacounty.gov/mch/fhop/FHOP2019/Special%20Reports_SPA_2019.pdf

⁷¹ California Department of Public Health, Center for Family Health, Maternal Child and Adolescent Health (MCAH) Division. Infant Mortality Dashboard. www.cdph.ca.gov/infant-mortality-dashboard

⁷² Los Angeles County Department of Public Health. *City and Community Profile: Glendale* (June 2018). <http://publichealth.lacounty.gov/ohae/cchp/healthProfilePDF.htm>

⁷³ See for example: Grummer-Strawn, L; Li, R; Perrine, C; Scanlon, KI; Fein, S. “Infant Feeding and Long-term Outcomes: Results from the Year 6 Follow-Up of Children in the Infant Feeding Practices Study II”. *Pediatrics*. Vol. 134: Supplement 1, S1-S3. (Sept. 1, 2014). http://pediatrics.aappublications.org/content/134/Supplement_1/S1.full.pdf+html

⁷⁴ California Department of Public Health. (2019) *California In-Hospital Breastfeeding as Indicated on the Newborn Screening Test Form Statewide, County and Hospital of Occurrence by Race/Ethnicity*. www.cdph.ca.gov/Programs/CFH/DMCAH/Breastfeeding/Pages/In-Hospital-Breastfeeding-Initiation-Data.aspx

associated with pregnancy is referred to as a pregnancy-related death. Significantly more babies die within one year of birth than their mothers die from pregnancy-related causes. Infant mortality is measured against 1,000 live births and maternal mortality is measured against 100,000 live births. About one-third of mothers who die within 1 year from the end of pregnancy die from cardio-vascular issues related to the pregnancy.

The pregnancy-related mortality rate for California showed a dramatic increase in 2020 relative to 2019 (18.6 and 12.8 deaths per 100,000 live births, respectively). In the Los Angeles county region (including Ventura and Santa Barbara counties), the pregnancy-related mortality rate for 2018-2020 is 16.8.⁷⁵ Of concern is the great racial disparity in death rates of infants and death rates of mothers.

Table 22. California Infant and Pregnancy-Related Mortality Rates by Race/Ethnicity of Mother

	Infant mortality rate for California infants (deaths/1,000 live births) ⁷⁶	Pregnancy-related mortality rate for California women (deaths/100,000 births) ⁷⁷
All races/ethnicities	4.17	18.6 (2020)
African American	8.36	45.8
Asian American	2.3	15.0
Latina	4.21	14.8
White, not Latina origin	3.45	12.6

Note: Deaths of both infants and mothers are within one year of birth or the end of pregnancy. Infant mortality data are from 2019; pregnancy-related mortality data are from 2018-2020 except where noted.

Source: California Department of Public Health, Maternal, Child and Adolescent Health Division (MCAH)

Buried in the overall infant and pregnancy-related mortality rates is the fact that the mortality rate for both African American babies and their mothers is significantly higher than for other races/ethnicities. African American babies are more than twice as likely to die within one year than white babies and African American mothers are nearly four times more likely to die from pregnancy-related causes than white women.

Chronic conditions and COVID-19

Common chronic conditions affect the quality of life for those who are afflicted—and render them more susceptible to serious illness if they are exposed to an infectious disease. In Glendale roughly 10-15% of

⁷⁵ California Department of Public Health, Center for Family Health, Maternal, Child and Adolescent Health Division. Pregnancy-related mortality dashboard. (Average rate calculated from 2018-2020 data). <https://www.cdph.ca.gov/Programs/CFH/DMCAH/surveillance/Pages/Pregnancy-Related-Mortality.aspx>

⁷⁶ California Department of Public Health, Center for Family Health, Maternal, Child and Adolescent Health Division. Infant Mortality dashboard for Los Angeles County. <https://www.cdph.ca.gov/Programs/CFH/DMCAH/surveillance/Pages/Infant-Mortality.aspx>

⁷⁷ California Department of Public Health, Center for Family Health, Maternal, Child and Adolescent Health Division. Pregnancy-related mortality dashboard. <https://www.cdph.ca.gov/Programs/CFH/DMCAH/surveillance/Pages/Pregnancy-Related-Mortality.aspx>

the population has been diagnosed with one or more chronic conditions (not including obesity, which has a higher incidence).

Table 23. Percentage of Adult Women and Men Diagnosed with a Common Chronic Condition: 2020-2021

	Glendale ⁷⁸	San Fernando (SPA 2) ⁷⁹		Los Angeles County ⁸⁰	
	Women and Men	Women	Men	Women	Men
Asthma	16%	16%	11%	16%	12%
Diabetes	11%	10%	11%	11%	13%
Heart disease	8%	5%	10%	5%	8%
Obesity (BMI≥30)	26%	28%	25%	30%	28%

Note: Percentages have been rounded. Data for Glendale are not disaggregated by gender and are estimates based on 2020 CHIS data. Data for SPA 2 and for Los Angeles County are from the 2021 CHIS survey. Figures represent the percentage of survey respondents who answered “yes” to “Have you ever been diagnosed with (asthma, diabetes, heart disease)?”

Source: 2020 and 2021 California Health Interview Survey (CHIS)

Although data specific to Glendale are limited, women in general tend to have higher incidence of asthma while a greater proportion of men than women have diabetes and heart disease.

The Impact of COVID-19. Chronic conditions compromise the body’s immune system, making it more difficult to combat infections. This was particularly evident during the COVID-19 pandemic, when a disproportionate number of those who died from the virus also suffered from a co-condition such as diabetes, asthma or other lung or heart disease. The Centers for Disease Control identified these conditions as co-factors which would make a serious illness likely if one was exposed to the novel coronavirus. In general, more women than men suffer from asthma, while a greater proportion of men suffer from diabetes.

Mental wellbeing

The last few years have been fraught with uncertainty in the face of the highly infectious novel coronavirus, which quickly spread throughout the world. Some individuals and families were pushed into poverty as businesses shut down and schools closed in an effort to control the outbreak. Income was reduced as work hours were reduced or jobs lost. People were anxious about finances and about loved ones who might contract the disease—and their own health. Women took on an extra burden as they assumed the majority of added family care when children were forced to stay home as schools and childcare centers closed.

⁷⁸ Published estimates based on the 2020 California Health Interview Survey (CHIS), for the AskCHIS Neighborhood Edition. Data are not disaggregated by gender. UCLA Center for Health Policy Research, the Fielding School of Public Health. Exported November 2022. <http://askchisne.ucla.edu>

⁷⁹ 2021 California Health Interview Survey. Subject Area: Health Conditions; Subject area for obesity: Health Behavior. UCLA Center for Health Policy Research, the Fielding School of Public Health. <http://ask.chis.ucla.edu>

⁸⁰ 2021 California Health Interview Survey. Subject Area: Health Conditions; Subject area for obesity: Health Behavior. UCLA Center for Health Policy Research, the Fielding School of Public Health. <http://ask.chis.ucla.edu>

In times of heightened stress, one can feel nervous or on edge or even worse, begin to experience a sense of hopelessness. Before the COVID-19 pandemic was declared in March 2020, 19% of California women had been diagnosed with depression; in 2020, more than 50% of California women reported experiencing mild to severe symptoms of depression.⁸¹

In 2018, 19% of Glendale adults who responded to the Los Angeles County Health Survey indicated that they had been diagnosed with depression; 17% of adults across the county indicated the same.⁸² These figures are not inconsistent with the experiences of adults across the state. While no timely data measuring the impact on Glendale women during the pandemic has been found, it is likely that they experienced similar feelings of heightened anxiety and occasional depression during the early days of the pandemic.

The California Health Interview Survey (CHIS) gives some insight to the mental wellbeing of adults in SPA 2. The 2019 and 2021 survey responses indicate that respondents who were likely to have experienced a “serious psychological episode in the past 12 months” increased, likely due in large part to disruptions resulting from the COVID-19 pandemic.⁸³

Table 24. Percentage of Adults Likely to have had a Serious Psychological Episode in the Past 12 Months: 2019 and 2021

	San Fernando SPA 2		Los Angeles County	
2019	2019	2021	2019	2021
Women	11%	18%	14%	20%
Men	11%	12%	11%	13%

Note: The California Health Interview Survey (CHIS) team considers responses to several questions on the survey that probe the interference of mental issues with normal social, professional, and familial functioning to determine whether a “serious psychological episode” has occurred.

Source: California Health Interview Survey

The Neighborhood Edition of the California Health Interview Survey, which based its estimates on 2020 CHIS data, reported that 11% of Glendale’s adults were “likely to have had a serious psychological episode in the past 12 months” (up slightly from 10% in 2018 and 2016).⁸⁴

⁸¹ Center for Disease Control and Prevention, National Centers for Chronic Disease Prevention and Health Promotion. (2019) Behavioral Risk Factor Surveillance Program (BRFSS) Prevalence and Trends Data. www.cdc.gov/BRFSS/brfssprevalence ; U.S. Census Bureau. (2020). Household Pulse Survey. Weeks 21-39. Health: Table 2b: Symptoms of Depression Experienced in the Last 7 Days, by Select Characteristics: California. <http://census.gov/programs-surveys/household-pulse-survey/data.html>

⁸²2018 Los Angeles County Health Survey. Los Angeles County Department of Public Health. <http://publichealth.lacounty.gov/ha/LACHSDataTopics2018.htm>

⁸³ 2019 and 2021 California Health Interview Survey. Subject Area: Mental and Emotional Wellbeing. <http://ask.chis.ucla.edu>

⁸⁴ Published estimates based on the 2020 California Health Interview Survey (CHIS), for the AskCHIS Neighborhood Edition. UCLA Center for Health Policy Research, the Fielding School of Public Health. Exported November 2022. <http://askchisne.ucla.edu>

In the 2022 Glendale Community Health Needs Assessment, community partners indicated that mental health was one of the highest health priorities in Glendale. Those who were interviewed listed some issues, barriers, and challenges that community members face relative to accessing mental health treatment, including:⁸⁵

- societal stigma and cultural norms associated with recognizing and seeking treatment for mental health issues,
- language barriers when interacting with health care professionals,
- limited access due to cost with a limited number of mental health professionals who accept insurance payments, and
- lack of sufficient funding for mental health services.

Behaviors that impact health

While not all factors governing general health status are subject to individual decisions, individuals have some control of their health status by getting medical care when needed, practicing preventive health, and maintaining healthy habits.

Access to and utilization of medical care. In 2021, 10% of women (6% of men) in SPA 2 reported they had difficulty finding a primary care doctor who would see them or who were accepting new patients. Among those who needed to see a medical specialist, 17% of women (16% of men) indicated they had difficulty finding specialty care; 13% of women and 5% of men indicated that their insurance was not accepted by the specialist.⁸⁶

Medical insurance mitigates the costs associated with healthcare. Over the past few years, the percentage of Glendale’s uninsured population has dropped from 14% in 2014 to 7% in 2021.⁸⁷

Table 25. Percentage of Glendale Non-Institutionalized, Civilian Population Who are Uninsured

	2014	2016-2020	2021
Total	14%	7%	7%
18 years or under	5%	3%	3%
19-64 years			
• Employed	• 17%	• 10%	• 9%
• Unemployed	• 29%	• 16%	• 21%
• Not in labor force	• 12%	• 10%	• 9%
Women	13%	6%	6%
Men	16%	8%	7%

Source: U.S. Census 2014, 2021 American Community Survey 1-Year Estimates; 2020 5-Year Estimates

⁸⁵ Glendale Community Health Needs Assessment: 2022. (June 2022). (See page 106). Dignity Health – Glendale Medical Hospitals and Health Centers, in partnership with Adventist Health Glendale.

<https://www.dignityhealth.org/content/dam/dignity-health/pdfs/chna/2022-chna/gmhhc-chna-22.pdf>

⁸⁶ 2021 California Health Interview Survey. Topic: Access and Utilization/Barriers to Care: Difficulty in the past 12 months in finding needed primary care/specialty medical care. <http://ask.chis.ucla.edu>

⁸⁷ U.S. Census Bureau. 2014 and 2021 American Community Survey 1-Year Estimates; 2020 5-Year Estimates. Table S2701: Selected Characteristics of Health Insurance Coverage in the United States. <http://data.census.gov>

Despite more than 90% of the population being insured for medical services, in 2021 during the pandemic roughly 1 in 4 (23%) Californians delayed seeking needed medical care. In 2020 an estimated 23% of Glendale adults delayed prescriptions or medical services, compared to 21% in 2016 and 21.5% in 2018.⁸⁸ In 2021, when questioned why they had delayed getting needed health care, women in SPA 2 responded as follows:⁸⁹

- 28% due to insurance-related reasons (e.g., lack of insurance, cost of care, etc.)
- 15% due to healthcare barriers (i.e., health center closed, difficult to get an appointment, etc.)
- 23% due to personal reasons
- 34% due to COVID (e.g., didn't want to risk visiting a health center)

In Glendale, community input into the 2022 Health Needs Assessment indicated that language barriers (especially with the Armenian- and Spanish-speaking populations) played a significant role in avoiding getting needed health care.⁹⁰

There are several funded Community Health Care Centers in the Glendale area which provide primary care for uninsured and medically underserved populations. Despite the presence of these centers, the 2022 Glendale Community Health Needs Assessment estimates that over 100,000 low-income residents (those with incomes less than twice the Federal Poverty Level) are not being served by these clinics.⁹¹

Preventive Care: Screenings for women. Being up to date on recommended vaccines and screenings plays an important role in safeguarding the health of women. Regular screenings are recommended to increase the probability of early discovery when treatment can be more effective in putting the disease into remission and increasing the odds of survival. A mammogram and a Papanicolaou (Pap) test for specified age groups are recommended in order to reduce the risk of death from breast and cervical cancers. Between 70-80% or more of women throughout the county and in Glendale are current in these two areas.⁹²

⁸⁸ Published estimates based on the 2020 California Health Interview Survey (CHIS), for the AskCHIS Neighborhood Edition. UCLA Center for Health Policy Research, the Fielding School of Public Health. Exported November 2022. <http://askchisne.ucla.edu>

⁸⁹ 2021 California Health Interview Survey. Topic: Access and Utilization: Main reason delayed or had forgone needed medical care. <http://ask.chis.ucla.edu>

⁹⁰ Glendale Community Health Needs Assessment: 2022. (June 2022). (See page 52). Dignity Health – Glendale Medical Hospitals and Health Centers, in partnership with Adventist Health Glendale. <https://www.dignityhealth.org/content/dam/dignity-health/pdfs/chna/2022-chna/gmhhc-chna-22.pdf>

⁹¹ Glendale Community Health Needs Assessment: 2022. (June 2022). (See page 50). Dignity Health – Glendale Medical Hospitals and Health Centers, in partnership with Adventist Health Glendale. <https://www.dignityhealth.org/content/dam/dignity-health/pdfs/chna/2022-chna/gmhhc-chna-22.pdf>

⁹² L.A. County Health Survey, 2018. L.A. County Department of Public Health. www.publichealth.lacounty.gov/ha/LACHSDataTopics2018.htm

Table 26. Percentage of Women Who Reported Having a Mammogram and a Pap Test: 2018

	Mammogram	Pap test
Age group/frequency	50-74 years of age within past 2 years	21-65 years of age within past 3 years
Glendale	71%	78%
L.A. County	77%	81%

Source: Los Angeles County Health Survey, 2018.

Preventive Care: Vaccinations. Most recently, vaccines for COVID-19 have been highly recommended to mitigate the serious effects of the novel coronavirus that results in COVID-19. As of November 2022, unvaccinated Californians were nearly three (2.9) times more likely to die from COVID-19 than those who were fully vaccinated with the primary series of doses (no booster).⁹³ As of January 2023, 73% of California’s population is fully vaccinated; 61% have been vaccinated and received a booster. Of those fully vaccinated, 53% are women.⁹⁴

By March 10, 2023, nearly 60,000 Glendale residents had contracted the virus and just over 1,000 Glendale residents had died from the disease.⁹⁵ Nearly three-fourths (71%) of Glendale residents (6 months and over) had received at least one dose of the vaccine and 66% had been fully vaccinated. Older adults fared better: 86% of adults 65 years and over had received at least one dose of the vaccine and 80% were fully vaccinated.⁹⁶

Preventive care: Vaccination against pneumonia and influenza. While only 2% of the deaths in San Fernando SPA 2 are attributed to pneumonia and influenza,⁹⁷ these deaths can often be prevented by immunization. Over 70% of Glendale’s older residents, who are predominantly women, are immunized against these diseases.⁹⁸

Table 27: Percentage of Women and Men Who Reported Having Received a Pneumonia or Influenza Shot: 2018

	Pneumonia	Influenza
Age group/frequency	65+ years/ever had a vaccination	65+ years /within past year
Glendale (2016)	73%	73%
L.A. County	72%	73%

Source: Los Angeles County Health Survey, 2018.

⁹³ California Department of Public Health (2022). Tracking COVID-19 in California. Accessed January 5, 2023. covid19.ca.gov/state-dashboard

⁹⁴ California Department of Public Health (2022). Vaccination Data. Accessed January 5, 2023. covid19.ca.gov/vaccination-progress-data/#overview

⁹⁵ COVID-19 Dashboard: Locations and Demographics. Los Angeles County Department of Public Health. (accessed March 12, 2023). <http://publichealth.lacounty.gov/media/coronavirus/locations.htm>

⁹⁶ Los Angeles County COVID-19 Vaccine Dashboard, Los Angeles County Department of Public Health. (accessed March 12, 2023). <http://publichealth.lacounty.gov/media/coronavirus/vaccine/vaccine-dashboard.htm>

⁹⁷ Patterns in Mortality and Life Expectancy in Los Angeles County, 2010-2019. (May 2022) Los Angeles County Department of Public Health, Office of Health Assessment and Epidemiology. http://www.publichealth.lacounty.gov/epi/docs/2019_Mortality_Report_FINAL_052022.pdf

⁹⁸ L.A. County Health Survey, 2018. L.A. County Department of Public Health. www.publichealth.lacounty.gov/ha/LACHSDATATopics2018.htm

Across the county, a greater percentage of older women than men have been vaccinated for pneumonia (75% and 69%, respectively); a greater percentage of men (75%) have received a recent flu shot than women (72%).

As the 2022 Glendale Community Health Needs Assessment reports, seniors are more likely than younger adults and children to be vaccinated annually for influenza. Among SPA 2 residents in 2018, only 46% of adults 18 years and older received a flu shot in the last year. However, the majority of children (59%) who are 6 months to 17 years, and seniors (67%) received a flu shot in the past year.⁹⁹

Healthy Habits: Nutrition and Physical Activity. A healthy lifestyle includes a nourishing diet and physical activity. While recent gender-disaggregated data for Glendale are not generally available, the Los Angeles County Health Surveys conducted roughly every 3 years and the annual California Health Interview Surveys indicate that over one-third of Glendale residents are physically active. Less than 15% meet the guidelines for consumption of fruit and vegetables. These results have not significantly improved since 2015.

Table 28. Physical Activity and Nutrition Patterns of Glendale Adults¹⁰⁰

Physical activity	2015	2018
Percent of adults meeting recommended aerobic and muscle strengthening guidelines (150 minutes/week, including 2 days of muscle-strengthening activity)	35%	37%
Nutritional habits		
Percent meeting guidelines for daily fruit and vegetable consumption (5 or more servings/day)	14%	13%

Note: Estimates for Glendale are not disaggregated by gender; they are derived from responses to the Los Angeles County Health Survey.

Source: Los Angeles County Health Survey

Safety

Neighborhood safety

On the 2018 Los Angeles County Health Survey, a remarkable 100% of Glendale adults responded that they perceived their neighborhoods to be safe from crime.¹⁰¹ In 2021, just under 1% of adults in SPA 2 *never* felt safe in their neighborhood; only 1 in 4 women (and 1 in 3 men) felt safe all of the time.¹⁰²

⁹⁹ Glendale Community Health Needs Assessment: 2022. (June 2022). (See page 113). Dignity Health – Glendale Medical Hospitals and Health Centers, in partnership with Adventist Health Glendale.

<https://www.dignityhealth.org/content/dam/dignity-health/pdfs/chna/2022-chna/gmhhc-chna-22.pdf>

¹⁰⁰ Los Angeles Health Survey, 2015 and 2018. Los Angeles County Department of Public Health. For 2015 data: Los Angeles County Department of Public Health City and Community Health Profiles, 2018: Glendale.

<http://publichealth.lacounty.gov/ohae/cchp/HealthProfilePDF.htm> For 2018 data: Los Angeles County Health Survey, 2018. <http://publichealth.lacounty.gov/ha/LACHSDataTopics2018.htm>

¹⁰¹ L.A. County Health Survey, 2018. L.A. County Department of Public Health. *Percent of residents 18+ years who perceive their neighborhoods to be safe from crime.* www.publichealth.lacounty.gov/ha/LACHSDataTopics2018.htm

¹⁰² 2021 California Health Interview Survey. Topic: Place of Residence: Housing/Neighborhood.

<http://ask.chis.ucla.edu>

- 26% of women (35% of men) felt safe all of the time,
- 61% of women (52% of men) felt safe most of the time, and
- 12% of women (12.5% of men) felt safe some of the time.

Crime in Glendale

The number of crimes in Glendale varies from year to year, and it is difficult to find a sustained trend. Over the past decade violent crime in the city hit a peak in 2017, with 274 violent crimes reported to the FBI Uniform Crime System.¹⁰³ In 2020, the number of violent crimes was reported to be 206, down from 231 in 2019. Glendale reported 220 violent crimes and 3,365 property crimes in 2021.¹⁰⁴

Table 29. Types of Crimes in Glendale and Los Angeles City: 2019¹⁰⁵

	City of Glendale	City of Los Angeles
Violent crime rate (per 1,000 residents)	1	7
Number of residents	202,601	4,015,546
Number of violent crime offenses	231	29,400
Percent of violent crimes classified as		
• murder/non-negligent manslaughter	2%	1%
• rape	7%	8%
• robbery	40%	33%
• aggravated assault	51%	59%
Number of property crimes	3305	95,704

Note: These figures are based on reports of the Glendale and Los Angeles Police Departments made to the FBI Uniform Crime Reporting System.

Source: Uniform Crime Report, FBI.

The violent crime rate in Glendale (violent crimes per 1,000 residents) is “1,” while the violent crime rate of Los Angeles City is “7”. Angelenos are seven times more likely to be a victim of a violent crime than residents of Glendale.

In monitoring crime, the Glendale Police Department identifies a set of special crimes: child abuse, simple assault, domestic violence, fraud, identity theft and vandalism. Of these specially designated crimes, women are particularly affected by domestic violence.

Domestic Violence (DV)/ intimate Partner Violence (IPV)

Women are disproportionately affected by domestic violence perpetrated by an intimate partner: according to the 2016/2017 estimates, 1 in 5 women (20%) across the U.S. have experienced contact sexual violence (e.g., rape, unwanted sexual contact) compared to 1 in 12 (8%) men. One in three

¹⁰³ Note: Violent crimes include murder and non-negligent manslaughter, rape, robbery and aggravated assault. Property crimes include burglary, larceny-theft, motor vehicle theft and arson.

¹⁰⁴ Federal Bureau of Investigation, Crime Data Explorer: California/Glendale. <http://cde.ucr.cjis.gov/https://crime-data-explorer.app.cloud.gov/pages/explorer/crime/crime-trend>

¹⁰⁵ Uniform Crime Reports. Federal Bureau of Investigation. (2019). Data retrieved using online database, Crime Data Explorer. [data set]. <http://cde.ucr.cjis.gov/LATEST/webapp/#/pages/explorer/crime/crime-trend>

women (33%) across the United States has been the victim of severe physical violence by an intimate partner, compared to 1 in 4 men (25%).¹⁰⁶

In the 2018 Los Angeles County Health Survey, residents were asked whether they had ever experienced any physical violence or unwanted sex by an intimate partner.¹⁰⁷

Table 30. Percentage of Adults Who Experienced Domestic Violence by an Intimate Partner: 2018

	Physical violence (hit, slapped, pushed, kicked, etc.)		Unwanted sex	
	Women	Men	Women	Men
Glendale	10%	11%	NA	NA
SPA 2	18%	11%	9%	1% *
Los Angeles County	16%	12%	10%	3%

Note: NA means that statistics disaggregated by gender are not available at this data source; an asterisk indicates the value may be statistically unreliable due to small sample size. Collectively, 3% of Glendale women and men reported experiencing unwanted sex by an intimate partner.

Source: 2018 Los Angeles County Health Survey

Physical violence perpetrated by an intimate partner in Glendale doesn't quite fit the pattern found in SPA 2 or the county. In many places, a greater proportion of women than men suffer severe physical violence in domestic situations. However, in the 2018 Los Angeles County Health Survey, the percentages of Glendale women and men who experienced physical violence at the hands of an intimate partner is about the same (or even slightly less) for women and men. It is not clear whether more Glendale men than women experience physical violence at the hands of an intimate partner, whether men were more active in reporting DV incidents, or whether this one-year data point is an anomaly.

Although domestic/intimate partner violence is vastly underreported, in 2021 the Glendale Police Department logged 333 calls for assistance related to domestic violence; in 2020, the number of calls was 323.¹⁰⁸ In some cities, reports of domestic violence was significantly lower in 2020 than in the previous year, attributed in part due to failure to report DV/IPV incidents during the pandemic. However, that does not appear to be the case in Glendale where the number of calls for DV/IPV assistance were about the same in 2020 as in 2019.

¹⁰⁶ Leemis, R., Friar, N., Khatiwada, L., Chen, M., Kresnow, M., Smith, S., Caslin, S., and Basile, K. (2022). The National Intimate Partner and Sexual Violence Survey: 2016/2017 Report on Intimate Partner Violence. National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. www.cdc.gov/violenceprevention/pdf/nisvs/NISVSReportonIPV_2022.pdf

¹⁰⁷ L.A. County Health Survey, 2018. L.A. County Department of Public Health. *Percent of residents 18+ years who reported ever experiencing any physical violence or unwanted sex by an intimate partner.* www.publichealth.lacounty.gov/ha/LACHSDDataTopics2018.htm

¹⁰⁸ Glendale Police Department. Monthly Crime Statistics and Activity Reports for December 2020, 2021, and August 2022. <https://glendaleca.gov/government/departments/police-department/community-outreach-resources-and-engagement-c-o-r-e/crime-prevention-programs-resources/crime-statistics-booking-logs>

Table 31. Number of Domestic/ Intimate Partner Violence Reports in Glendale: 2019-2022

	2019	2020	2021	YTD through August 2021	YTD through August 2022
Number of incidents	327	323	333	226	194

Source: Glendale Police Department

By August 2022, the number of incidents of DV was 194, down 14% from the 226 incidents a year earlier. While the number of domestic violence incidents in 2022 appears to be lower than in 2021, violent incidents by an intimate partner have not been historically diminishing in any sustained way.

One of the consequences of domestic violence can be the displacement of a person or persons from their home. Among Glendale's 225 homeless individuals counted in 2022, 20 adults identified as being homeless due to domestic violence: 18 survivors of DV were living in shelters and 2 were unsheltered.¹⁰⁹ In 2020, there were 19 adult survivors of domestic violence identified among Glendale's homeless population.

Sexual violence

Over 85% of survivors of sexual violence in the United States are women. Across the nation, 1 out of 6 women (17%) and 1 out of 33 men (3%) have been victims of rape or attempted rape in their lifetime.¹¹⁰

Based on Glendale Police Department statistics, there were 15 rapes reported in 2021, compared with 17 cases in 2019. By August of 2022, 11 rapes had been reported, compared to 9 over this time period in 2021. By 2022 numbers sexual violence is increasing, at least in the short term, and does not appear to be diminishing in the city.¹¹¹

Human trafficking

Human trafficking is the business of coercing or transporting a person for exploitation; there are two broad categories of exploitation: labor and/or sex slavery.¹¹² Across the nation, women make up about 80% of human trafficking survivors.¹¹³

California is one of three states (the other two being Florida and Texas) most affected by human trafficking. In 2021, there were 10,583 cases of human trafficking reported through the National Human

¹⁰⁹ City of Glendale Homeless Count Archives. www.glendaleca.gov/government/departments/community-services-parks/human-services/homeless-services/homeless-count-archive

¹¹⁰ Rape, Abuse, and Incest National Network (RAINN). *Victims of Sexual Violence: Statistics*. Retrieved November 2022 from www.rainn.org/statistics/victims-sexual-violence

¹¹¹ Glendale Police Department. *Monthly Crime Statistics and Activity Reports* for December 2020, 2021, and August 2022. <https://glendaleca.gov/government/departments/police-department/community-outreach-resources-and-engagement-c-o-r-e/crime-prevention-programs-resources/crime-statistics-booking-logs>

¹¹² Office of the Attorney General, State of California. See, for example, *The State of Human Trafficking in California: 2012*. While the 2012 report statistics are dated, the publication provides a good overview of human trafficking in the state. <https://oag.ca.gov/transnational-organized-crime/>

¹¹³ The National Human Trafficking Hotline. Polaris Project. Downloaded November 2022. <https://humantraffickinghotline.org/>

Trafficking Hotline. Calls made in California accounted for 13% of those cases, Texas for 9% and Florida for 7.5%.¹¹⁴ Human trafficking is a slave industry that transcends borders: California’s cases involve victims from around the world and the nation, as well as victims who may be in transition to other locations.

Since its inception in 2007, the National Human Trafficking Hotline in California has identified 12,676 cases of human trafficking through 2021.¹¹⁵ In 2021, the number of cases reported in the state was 1,334—less than the number reported in 2018 (1651). The number of cases reported in 2021 is nearly 200 less than the number reported in 2019. There is some speculation that this significant decrease in reported cases of human trafficking may have been due in part to restrictions on cross-border travel during the pandemic.

Table 32. Characteristics of Human Trafficking Cases Logged in California: 2021

Number of cases	1334
Type of trafficking	
Percent sex trafficking	84%
Percent labor or labor and sex trafficking	16%
Gender of victim	
• Percent women	86%
• Percent men	13%
• Percent gender minorities	1%
Age of victim	
• Percent adults (18 years and over)	80%
• Percent minors (under 18 years)	20%
Citizenship	
• Percent foreign nationals	54%
• Percent U.S. citizens	46%

Note: These percentages are based on the total number of responses to each question. In many cases, comprehensive information on the victim(s) or the type of trafficking involved is not provided; thus the number of responses varies by category.

Source: Polaris Project

Note that the vast majority of trafficking involves sex with female victims. The age of trafficking victims is not always known, but of those whose age is known 1 in 5 are children and 4 out of 5 are adults.

The Los Angeles-based Coalition Against Slavery and Trafficking (CAST) is the largest provider of comprehensive services to survivors of human trafficking.¹¹⁶ Of the nearly 2,000 trafficking survivors and families CAST served in 2021, 90% secured safe housing and 86% had a job or were in school.

CAST has an advocacy mission and extensive policy agenda; one part of that agenda involves securing funding for a prevalence study on human trafficking and its victims in both the County and the City of Los Angeles. This information is critical to developing a data-driven response to the human trafficking industry in the area.

¹¹⁴ The National Human Trafficking Hotline. Polaris Project. Downloaded November 2022. <https://humantraffickinghotline.org/>

¹¹⁵ The National Human Trafficking Resource Center. Polaris Project for a World without Slavery. www.traffickingresourcecenter.org/state/california

¹¹⁶ Coalition to Abolish Slavery and Trafficking, CAST-LA. See the 2021 Impact Report. www.castla.org/wp-content/uploads/2022/03/CastLA-2021ImpactReport_digital.pdf

Leadership

Glendale’s leaders can be found in many organizations of all sizes. In this section we focus on women leaders in three areas: as private business owners, where good leadership is critical to the success of a business; in not-for-profit organizations that largely focus on improving the quality of life of women and men across the area; and women in local government, where policy is developed and implemented that impacts the lives of all City residents.

Distribution of Glendale residents and type of employer

In 2021, Glendale women comprised 47% of employed adults living in the city: 43,000 women over the age of 16 years were employed either on a full-time or part-time basis.¹¹⁷ Major employment sectors include public corporations, private for-profit companies, and not-for-profit organizations; individuals may also be self-employed, either in an incorporated or unincorporated business that they own.

Table 33. Percentage of Glendale’s Working Residents by Type of Employer

	2021	Percent of women in work sector
Civilian employed population 16 years and over	90,715	47%
Private for-profit wage and salary workers	66,045	47%
• Employee of private company	• 61,354	• 48%
• Self-employed in own incorporated business	• 4,691	• 40%
Private not-for-profit wage and salary worker	6,491	60%
Government workers		
• Local	• 6,400	• 59%
• State	• 2,498	• 56%
• Federal	• 1,128	• 32%
Self-employed in own unincorporated business or unpaid family worker	8,153	28%

Note: These figures are based on the population of Glendale residents, who may not all work in the City.

Source: U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates.

The number of self-employed women owning an incorporated business has increased by 33%, from 1,416 in 2016 to 1,885 in 2021.¹¹⁸ The increase in the number of women who own and work in their own business is a testament to women’s creativity and entrepreneurial talent in the city.

Glendale women comprise the majority of the workforce in private not-for-profit organizations (60%) and of local and state government workers (58%) in Glendale or nearby communities.¹¹⁹

City of Glendale Workforce Demographics. The City of Glendale tracks the demographics of its employees. Since 2003, women have comprised roughly 30% of the City’s employees. The percentage of managerial jobs held by women increased from 31% in 2008 to 36% in 2021; the percentage of

¹¹⁷ U.S. Census 2021 American Community Survey 1-Year Estimates. Table S2408: *Class of worker by sex for the civilian employed population 16 years and over.* <http://data.census.gov>

¹¹⁸ U.S. Census Bureau. 2016 and 2021 American Community Survey 1-Year Estimates. Table S2408: *Class of worker by sex for the civilian employed population 16 years and over.* <http://data.census.gov>

¹¹⁹ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S2408: *Class of worker by sex for the civilian employed population 16 years and over.* <http://data.census.gov>

technical/professional positions held by women has increased from 45% to 49% over this same time frame.

The City has a policy of also tracking Armenians who are in the city workforce independently of other ethnicities. The latest report on Glendale workforce demographics for 2021 identified 22% of all women and men working for the City as having Armenian ancestry.¹²⁰ These figures indicate an increased presence of Armenians in the City's workforce: in 2008, 14% of women and men working for the city identified as Armenian. Armenians held about 22% of all managerial positions in 2021, up from 5% in 2008.

Women-owned businesses (WOBs)

In 2017, there were 11.7 million women leading their own businesses (WOBs)¹²¹ across the U.S., representing nearly 38% of all privately-owned businesses in the nation. These women-owned businesses generated an annual revenue of \$1.8 trillion. California is home to the largest number (1,543,000) of women-owned businesses; nearly 627,000 were in the Los Angeles metropolitan area.¹²²

Information from the 2017-18 Annual Business Surveys indicates that there were about 6,000 privately-owned employer businesses in Glendale, meaning that these businesses had paid employees and met a minimum of \$1,000 revenue in 2017. Of these privately-owned employer businesses, 18% were women-owned businesses, with another 13% equally owned by a woman with a man.¹²³ Glendale's women-owned businesses employed almost 10,000 people and distributed an annual payroll of \$340 million.

Generally, women-owned businesses are smaller than the average U.S. business in terms of employment and revenue; nationally, it is estimated that over 80% of women-owned businesses have less than 10 paid employees.¹²⁴ However, businesses owned by women are showing a higher rate of growth in numbers of firms, employment, and revenue than the U.S. average. In 2021, half (49%) of new business start-ups in the U.S. were led by women entrepreneurs.¹²⁵

Not-for-profit (nonprofit) organizations

¹²⁰ City of Glendale Work Force Demographics Update: 2008 through 2021. (December 2022). City of Glendale, Internal Audit.

<https://www.glendaleca.gov/home/showpublisheddocument/69583/638090447362770000>

¹²¹ A women-owned business (WOB) is defined as any privately-owned business in which a woman holds over 50% ownership.

¹²² National Women's Business Council (2022) *2021 Annual Report: By the Numbers*.

<https://www.nwbc.gov/annual-reports/2021/#ByTheNumbers>

¹²³ U.S. Census Bureau. Economic Survey Program. 2017 Annual Business Survey Estimates. Table AB1700CSA01: *Annual Business Survey: Statistics for Employer Firms by Industry, Sex, Ethnicity, Race and Veteran Status for the U.S., States, Metro Areas, Counties and Places: 2017*. <http://data.census.gov>

¹²⁴ National Women's Business Council (2022) *2021 Annual Report: By the Numbers*.

<https://www.nwbc.gov/annual-reports/2021/#ByTheNumbers>

¹²⁵ World Economic Forum. (July 2022). *Here's what women's entrepreneurship looks like around the world*.

<https://www.Weforum.org/agenda/2022/07/women-entrepreneurs-gusto-gender/>

There are over 1.5 million nonprofit organizations in the U.S.¹²⁶ These groups are very diverse, united by the definition of a nonprofit, in which activities are dedicated to serve a cause and not for the primary motive of profit. Examples of causes include providing advisory and training services to underserved populations, social services, and environmental causes; larger nonprofits are often associated with religious or educational institutions and trade unions. Although most nonprofit organizations have a paid administrative staff, in 2017 roughly 25% of the United States population spent an average of 137 hours per year in volunteer work with nonprofits.¹²⁷ In 2018, 43% of Glendale adults reported engaging in volunteer work or community service in the past year.¹²⁸

In 2021, Glendale women make up 60% of residents who are paid staff in not-for-profit organizations; they have annual median earnings of \$56,000, compared to just under \$68,000 for men.¹²⁹

Political participation of women

Women, who make up half of the population of the nation and the state, have been woefully underrepresented in elected political positions—nationally, as well as in California. The California delegation to the Congress of the United States is comprised of 36% (20) women; of 120 seats in the California State Legislature, 33% (39) are held by women.¹³⁰

It has been noted that fewer women than men run for office in statewide executive and legislative elections. In 2022, for example, women comprised roughly 33% of candidates running for state governors across the country.¹³¹ As long as few women run, fewer women will advance to office and women will continue to be underrepresented in political decision making in the nation and in California.¹³²

State and County Representation of Glendale. Glendale is represented in the State Assembly (44th District) by Laura Friedman, (52nd District) by Wendy Carrillo and in the State Senate (25th District), by Anthony Portantino. On the 5-member County Board of Supervisors, Glendale falls into District 5,

¹²⁶ *Nonprofit Organizations in the United States – Statistics and Facts.* (September 2022) Statista Research Department. <https://www.statista.com/Topics/1390/nonprofit-organizations-in-the-us/#topicoverview>

¹²⁷ *Nonprofit Organizations in the United States – Statistics and Facts.* (September 2022) Statista Research Department. <https://www.statista.com/Topics/1390/nonprofit-organizations-in-the-us/#topicoverview>

¹²⁸ 2018 California Health Interview Survey: Neighborhood Edition. UCLA Center for Health Policy Research, the Fielding School of Public Health. Online data tool, selected for Community Service and Glendale. [data set] Exported November 2022. <http://askchisne.ucla.edu>

¹²⁹ U.S. Census Bureau. 2021 American Community Survey 1-Year Estimates. Table S2418: *Class of Worker by Sex and Median Earnings in the Past 12 Months (in 2021 Inflation-Adjusted Dollars) for the Civilian Employed Population 16 Years and Over.* <http://data.census.gov>

¹³⁰ *California Current Numbers.* (December 2022). Center for American Women and Politics, Rutgers University. <http://www.cawp.rutgers.edu/>

¹³¹ Center for American Women and Politics (CAWP). 2022. *Women as a Percentage of 2022 Major-Party Candidates and Nominees.* Center for American Women and Politics, Eagleton Institute of Politics, Rutgers University. <https://cawp.rutgers.edu/election-watch/women-percentage-2022-major-party-candidates-and-nominees> (Accessed December 14, 2022)

¹³² Naomi Cahn, *Why Aren't There Even More Women Political Leaders?* (December 6, 2020) Forbes Leadership Strategy blog. www.forbes.com/sites/naomicahn/2020/12/06/why-arent-there-even-more-women-political-leaders

represented by Kathryn Barger. Altogether, Glendale women are well-represented on state and county governing bodies.

Local Government: Elected City Officials. Glendale is governed by an elected City Council composed of five members who serve four-year terms; each year, the Council selects one of its own members to serve as mayor for that year. The City Clerk and City Treasurer are also elected. In Glendale, women hold three out of seven (43%) of elected City official positions compared with the 39% statewide average of women in elected municipal offices.¹³³

City of Glendale Boards and Commissions. The City Council has the opportunity to encourage the viewpoints of its diverse constituents in policy development discussions. One of the duties of the Council is to appoint members to Glendale’s Boards and Commissions which serve as advisory bodies to the Council. There are 17 Glendale Boards and Commissions, 14 of which each have five members appointed by the Council.¹³⁴

Table 34. Gender Diversity on Glendale’s Volunteer Commissions and Boards

	Total	Women
Arts and Culture Commission	5	5
Audit Committee	5	0
Building and Fire Board of Appeals	5	1
Civil Service Commission	5	0
Commission on the Status of Women	5	5
Community Development Block Grant Advisory Committee	5	2
Design Review Board	5	2
Glendale Housing Authority	7	3
Glendale Water and Power Commission	5	1
Historic Preservation Commission	5	2
Parks, Recreation and Community Services Commission	5	2
Planning Commission	5	2
Sustainability Commission	5	2
Transportation and Parking Commission	5	3
TOTAL Members	72	30

Note: Data were retrieved from website on November 16, 2022 and are subject to change as terms end and vacancies are filled. This table does not include regional boards, commissions and committees on which the City of Glendale has seats including the Burbank/Glendale/Pasadena Airport Authority, the Metropolitan Water District Board, or the Vector Control District. Currently only one of approximately 25 seats on this board is filled by a woman.

Source: City of Glendale website

If a major purpose of the City’s advisory boards and within any one board itself is to represent the perspectives of the City’s residents, then the following observations are offered:

¹³³See, for example, *2022 Women in Municipal Office*. Center for American Women and Politics, Rutgers University – New Brunswick. <https://cawp.rutgers.edu/2022-women-municipal-office>. (Accessed November 18, 2022)

¹³⁴ City of Glendale, CA website. Government: City Boards and Commissions www.glendaleca.gov/government

1. There are three City commissions and one committee where there is no gender diversity—these bodies are either all male or all female—so at least the perspective from one gender is missing in issues discussed.
2. Overall, women comprise 42% of these 72 volunteer advisory positions. In a city with a majority population of women (51%), women are under-represented on the City of Glendale’s Boards and Commissions.

Elected school boards. The Glendale Unified School District (GUSD) Board of Education and the Glendale Community College Board of Trustees each are composed of 5-members elected by area. Both boards are charged with oversight and policy development that improve student learning and maintain safe and sustainable learning environments. Women currently hold 4 out of 5 of the elected positions on each board.¹³⁵

Editor’s Note

Limitations of the data

Please see the Introduction to the 2022-2023 Report on the Status of Women and Girls in Glendale for a discussion of the limitations of the data used in this report.

Some common terms used in the 2022-2023 Report on the Status of Women and Girls in Glendale

SPA. A Service Planning Area (SPA) is a geographic region within Los Angeles county, defined by the Los Angeles County of Public Health to facilitate its provision of relevant public health and clinical services across the county.

- *SPA 2.* Service Planning Area 2, covering San Fernando Valley and Santa Clarita Valley, includes the City of Glendale, along with communities of Burbank, Calabasas, Canoga Park, Canyon Country, Encino, La Canada-Flintridge, San Fernando, Sherman Oaks, Sun Valley, Van Nuys, and Woodland Hills. For additional information, go to <http://publichealth.lacounty.gov/chs/SPAMain/ServicePlanningAreas.htm>
- *ACS.* The American Community Survey, begun in 2005, replaced the decennial census long form. It is an annual survey conducted by the U.S. Census Bureau and is distributed annually to roughly 3.5 million households across the U.S., the District of Columbia and Puerto Rico. Results are modeled to represent a statistical picture of the area sampled; Glendale is one of California’s “places” for which data are collected. This 2022-2023 Report on the Status of Women and Girls in Glendale utilizes 2021 data, which were released in fall 2022 when the report was prepared. In this report we use 1-year estimates, released by the U.S. Census Bureau for areas with a minimum of 65,000 population. We also use 5-year estimates, particularly in looking at trends in data, in order to enhance statistical stability. For additional information, go to <https://www.census.gov/programs-surveys/acs>
- *CHIS.* The California Health Interview Survey, conducted annually by the UCLA Center for Health Policy Research in collaboration with the California Department of Public Health and the Department of Health Care Services.

¹³⁵ Glendale Unified School District: <http://gusd.net> ; Glendale Community College District: www.glendale.edu

Gender. The Status Report is generally written in binary terms based on the still very large proportion of the population that self-identifies in binary terms as either female or male.

- Women, girls, females. Females is the general term but is not generally favored in diversity studies. This report refers to women as females 18 years and over (unless otherwise specified) and girls as females under the age of 18 years.
- Men, boys, males. The distinction in usage is analogous to that for women, girls, females.

Racial/Ethnic classifications. Census surveys allow a single choice among several races or a multi-racial identification; a racial group is exclusively of that race on the basis of self-identification. Respondents of any race identifying a Hispanic ethnicity are tabulated separately.

- Latinx refers to a group of mixed gender, Latina to Latinx women, and Latino to Latinx men. The Census Bureau also refers to Latinx as persons of any race, but of Hispanic origin.
- African American as used in this Report includes persons who also identify as “Black”.
- Asian American, refers to a person who identifies as Asian and who is residing in the United States.
- White is generally not capitalized in this Report and includes anyone who identifies as such, excluding persons who have identified a Latin or Hispanic heritage. The white population is defined by the U.S. Census Bureau as including people having ancestors from any of the original peoples of Europe, the Middle East, or North Africa. Armenians are counted as part of the white population in U.S. Census Survey data.¹³⁶
- Armenian American or Armenian in this Report is any individual who identifies as having an Armenian ancestry.

¹³⁶ 1997 Revisions to OMB Statistical Policy Directive No. 15, Race and Ethnic Standards for Federal Statistics and Administrative Reporting-DocumentCloud. (see page19). <https://www.documentcloud.org/documents/21211671-1997-revisions-to-omb-statistical-policy-directive-no-15-race-and-ethnic-standards-for-federal-statistics-and-administrative-reporting>

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Mount Saint Mary's University Los Angeles is the only women's university in Los Angeles and one of the most diverse in the nation. The University is known nationally for its research on gender equity, its innovative health and science programs, and its commitment to community service. Mount Saint Mary's provides year-round, flexible and online programs at the undergraduate and graduate levels. **MSMU.EDU**

The mission of the **City of Glendale Commission on the Status of Women**, is to advance social justice and equity and ensure equality of rights and opportunities for all women and girls in Glendale by building new and strengthening existing bridges between the City's diverse groups, organizations, agencies and individuals; by increasing the level of knowledge in the community regarding women's issues and the status of women in our community; by encouraging and promoting participation; and by increasing visibility of women in all spheres of life in Glendale (including home, work, school, and government).