

FLAGLER COUNTY

COMMUNITY HEALTH NEEDS



Assessment
2019

2019 Flagler County Community Health Needs Assessment

Sponsored by:

AdventHealth

Flagler Cares

Florida Department of Health-Flagler

Halifax Health

Produced by: Flagler Cares, Inc.

Data Supported by: Office of Planning and Performance Management, Florida Department of Health in Volusia County

Acknowledgements: Thank you to the Flagler County Community Health Needs Assessment Partner organizations and Leadership Team members who committed extensive time, expertise and resources toward this collaborative assessment process and who continue to be focused improving the health and wellbeing in our county.



There are many factors that influence the health and wellbeing of a community. These include health behaviors, access to health care, social and economic status, and the physical environment. It is important to identify and measure all these factors to improve community health outcomes and understand the inequities preventing some people from living long, happy lives.

The Florida Department of Health in Flagler County (DOH-Flagler) refers to this report as the Flagler County Community Health Needs Assessment (Flagler CHA) which identifies key needs and issues through systematic, comprehensive data collection and analysis by a Leadership Team selected to represent the community at large.

The Flagler CHA now exists as a resource to serve as the basis of the Community Health Improvement Plan (CHIP): a strategic plan, external to DOH-Flagler, outlining how to address the identified areas of need. DOH-Flagler is accredited under the standards of the Public Health Accreditation Board, as is every health department in Florida. The Flagler CHA will facilitate connecting this health department with those in other counties and provides the important public health service of assessment.

The Flagler CHA and supplemental materials are available online at <http://flagler.floridahealth.gov/programs-and-services/community-health-planning-and-statistics/community-planning/index.html>. To provide feedback or request additional information, please contact DOH-Flagler at (386) 313-7114.



Community Benefit is a strategic arm of AdventHealth. The 2019 Flagler Community Health Needs Assessment serves as the guide for identifying 2020 – 2022 Health Priorities.

AdventHealth will use the Community Health Needs Assessment in collaboration with community partners to develop, implement and track the 2020-2022 Community Health Plan. Partnership collaboration and accountability will maximize efforts to produce positive outcomes impacting the health of communities served, delivering the promise to feel whole. Feel Whole is the AdventHealth brand promise to the entire community.

Engagement at a grassroots level, helps to address social determinants of health that drive communities to wellness, to feeling whole.

HALIFAX HEALTH



For over 90 years, Halifax Health has been committed to implementing solutions to identified health needs. As the designated safety-net hospital in the region, Halifax Health is responsible for expanding access to care and enhancing services to support the needs of the under-served and underinsured community while ensuring the provision of quality healthcare to all residents in a fiscally responsible manner.

The Flagler Community Health Needs Assessment (CHA) was developed under the leadership of the Department of Health in Flagler County in collaboration with Halifax Health, AdventHealth, other healthcare providers and local community leaders for the additional purpose of meeting the Community Health Needs Assessment (CHNA) requirements of non-profit hospitals as defined by the Affordable Care Act and the Internal Revenue Service. The resulting collection of information will assist Halifax Health in the development of its updated 2020-2023 Community Health Improvement Plan.



Flagler Cares is pleased to have had the opportunity to partner with the health leaders within Flagler County to facilitate the Community Health Needs Assessment process. This document, along with the identified Priority Health issues, will serve as the foundation of the Community Health Improvement Plan that will guide the work of many organizations in Flagler County, including Flagler Cares.

Flagler Cares strives to focus the collective effort of the community on the priorities identified to implement new strategies and create expanded health and human service capacity within Flagler County.

Periodic progress reports will be developed and shared with the community at large to keep the community engaged in its own health journey as the real drive behind the Community Health Improvement Plan.

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Executive Summary

Flagler County embarked on a Community Health Needs Assessment process in November 2018 culminating with the publication of this report in September 2019. The process was spearheaded and resourced by four community organizations:

- AdventHealth
- Flagler Cares
- Florida Department of Health-Flagler County
- Halifax Health

The Community Health Needs Assessment Process included three components:



A County Health Survey reaching 3,692 respondents in Volusia & Flagler counties



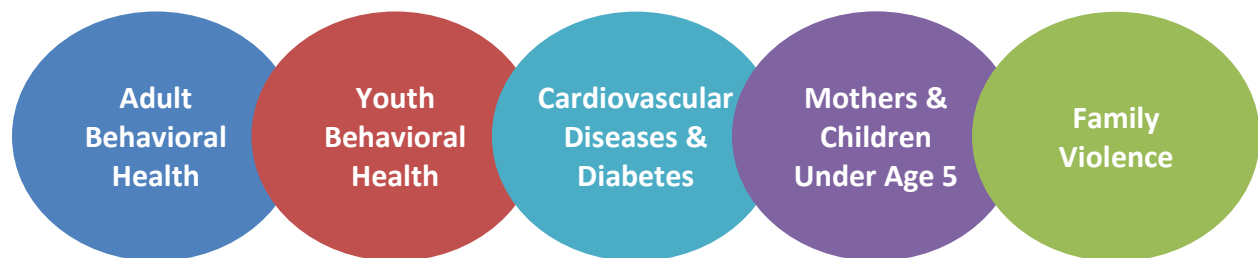
Analysis of population-health data organized into 10 health issues



A Leadership Team of representatives from 19 Flagler County organizations

2020-2022 Priority Health Issues

After a review of data collected and analyzed, the Leadership Team identified five priority health issues to focus on beginning in 2020.



Turning Assessment into Action

Organizations involved in the CHNA process and other community organizations will be engaged in specific action steps and activities to collaboratively address the identified priority health issues, including:

- Sharing the findings with community leaders and elected officials
- Using CHNA data to inform specific actions organizations can take to address health issues in Flagler County
- Participating in community collaborations and coalitions working to improve health outcomes

Community Health Needs Assessment (CHNA)

Purpose

The purpose of this assessment is to provide a general snapshot of the current health of the community. Many factors shape the health of a community, including the places where people live, learn, work and play. It is important to identify and measure all these factors to improve community health outcomes and understand the inequities preventing some people from living long, happy lives. Access to social, educational and economic opportunities, known as the social determinants of health, have as much impact on wellness as healthy eating, physical activity and access to medical services. To improve the health and quality of life of a community, it is necessary to address not only the multiple social determinants of health, but also to move from a focus on sickness and disease to one based on prevention and wellness. Sustained and broad community involvement is necessary to address the strategic health issues of a community—no single organization, no matter how well resourced or powerful, can tackle these issues alone.

To address these challenges, the Flagler County CHNA partners are committed to working together to achieve broad impact on the health of our community. This report takes stock of the county's health and wellbeing and is designed for use by various audiences. It provides data that will hopefully be used widely to support community health improvement efforts, including:

- Hospital-based community benefit plans
- Organizational strategic plans
- Action planning by new and existing multi-agency collaboratives
- Grant applications for new financial resources

2019 CHNA Partners

The 2019 CHNA process in Flagler County was resourced by four community organizations committed to the health of Flagler residents. Each partner provided financial support and leadership resources throughout the community health needs assessment process and have committed to leading strategies within their systems, and collaboratively with other organizations, to address the identified Priority Health Issues for 2020-2022.



Assessment Components

The Flagler CHNA process included three major components that informed the process to identify county-level priority health issues for 2020-2022. The CHNA process began with dialogue among the project partners in November of 2018 and culminated with the creation of this report published in September 2019. The subsequent Community Health Planning process is anticipated to occur throughout the summer and conclude with a formal Community Health Improvement Plan by 2020.



Community Survey

A primarily Internet-based county health survey was implemented that included 31 questions about quality of life, community health concerns, and social determinants of health. In Volusia and Flagler counties, 3,692 individuals completed the survey, including 966 Flagler residents.



Analysis of Statistical Data

Publicly available population-level health data was collected and organized into 10 health issues. The data was analyzed, and a summary of the data was presented as *Indicators of Concern* for each health issue. This summary included a review of data trends, county and state comparison and magnitude of impact.



Leadership Team

Leaders from key community sectors were invited to participate in a review of primary and secondary data and to engage in a dialogue regarding the selection of Priority Health Issues for 2020-2022. The team included leaders from public health, hospitals, county government, businesses and organizations that serve the community's most vulnerable citizens.

Flagler County CHNA Leadership Team

Leaders from 19 Flagler County organizations served on the Leadership Team, including:

| | |
|--|---|
| AdventHealth | Early Learning Coalition of Flagler & Volusia |
| Azalea Health | Family Life Center |
| Business & Community Leaders | Flagler Cares |
| City of Bunnell | Flagler Free Clinic |
| City of Flagler Beach | Flagler Schools |
| City of Palm Coast | Florida Department of Health-Flagler |
| Commission on Housing and Homelessness of Volusia & Flagler Counties | Halifax Health |
| County of Flagler | SMA Healthcare |
| Department of Children and Families | United Way of Volusia/Flagler Counties |

Selecting Priority Health Issues

The Flagler County CHNA Leadership Team utilized an action-oriented decision framework to review information and data collected and to guide their dialogue leading to the identification of Priority Health Issues for action during the 2020-2022 implementation cycle. The framework included considerations for data review and analysis, potential implementation strategies for short and long-term action. Primary (County Health Survey results) and secondary (over 300 health indicators) data were distributed to the Leadership Team for their review and analysis prior to meetings on May 2 and June 21, 2019.

Priority Health Issue Considerations

- **Magnitude:** What is the number of people affected by the issue?
- **Severity:** What is the risk of morbidity and mortality associated with the issue?
- **Impact on Vulnerable Populations:** Does the issue particularly impact vulnerable populations?
- **Trend Direction:** Has the trend improved or worsened in the last five years?
- **Comparison:** How does the county status compare to the state?
- **Relationship to other Issues:** Does the issue affect other problems?
- **Importance of the Issue:** How important is this issue to the community?

Solution Considerations

- **Efficacious Intervention:** Are there successful strategies to address this issue? Is there a positive cost-benefit to addressing the issue? How resource intensive are strategies to address this issue?
- **Community Readiness:** How likely is the community to support strategies to address the issue?
- **Current Capacity:** Does the community have existing resources and capacity to address the issue?
- **Economic Impact:** What is the cost of NOT addressing the issue?

Priority Health Issues & Implications for Action

- **Issues with Technical Fixes.** Issues that can be addressed by relatively straightforward policy or practice changes supported by a strong evidence base. *Examples: vaccinations, trauma informed care approaches*
- **Complex Problems Requiring Complex Solutions.** Issues that call for long-term, complex, multi-sector interventions. *Examples: mental illness and substance abuse, interpersonal violence*
- **Root Causes.** Issues that interact with each other in a vicious cycle, within and across generations, and contribute to high-risk environments, unhealthy behaviors, injury, illness, & death. *Examples: poverty, crime*
- **System-Level Barriers to Effective Action.** Issues that hinder effective action to improve health outcomes and the environment in which health outcomes develop. *Examples: working ineffectively across sectors, systemic underfunding of interventions targeting social determinants of health*

Process Limitations

The purpose of this assessment is to provide a general snapshot of the current health of the community. Although a wide variety of health data is available at the county level, there were limitations in the depth and breadth of data available. For some health indicators, the available data can be several years old and may no longer be representative of the community. For some data, local details concerning socioeconomic, demographic, or geographic distribution were not available and some significant health events can occur in small numbers and hamper the ability to conduct meaningful subgroup analyses by race, ethnicity, or gender.

The County Health Survey design and process also had limitations. The convenience sampling methodology used for the survey is a non-probability sampling technique that relies on the collection of data from populations within easy reach of the researcher. This method was selected for ease and budget restrictions but limits the use of the findings as results are not representative of the entire population. The survey process was also primarily an Internet-based survey which tends to cause underrepresentation of lower income, less educated and minority households.

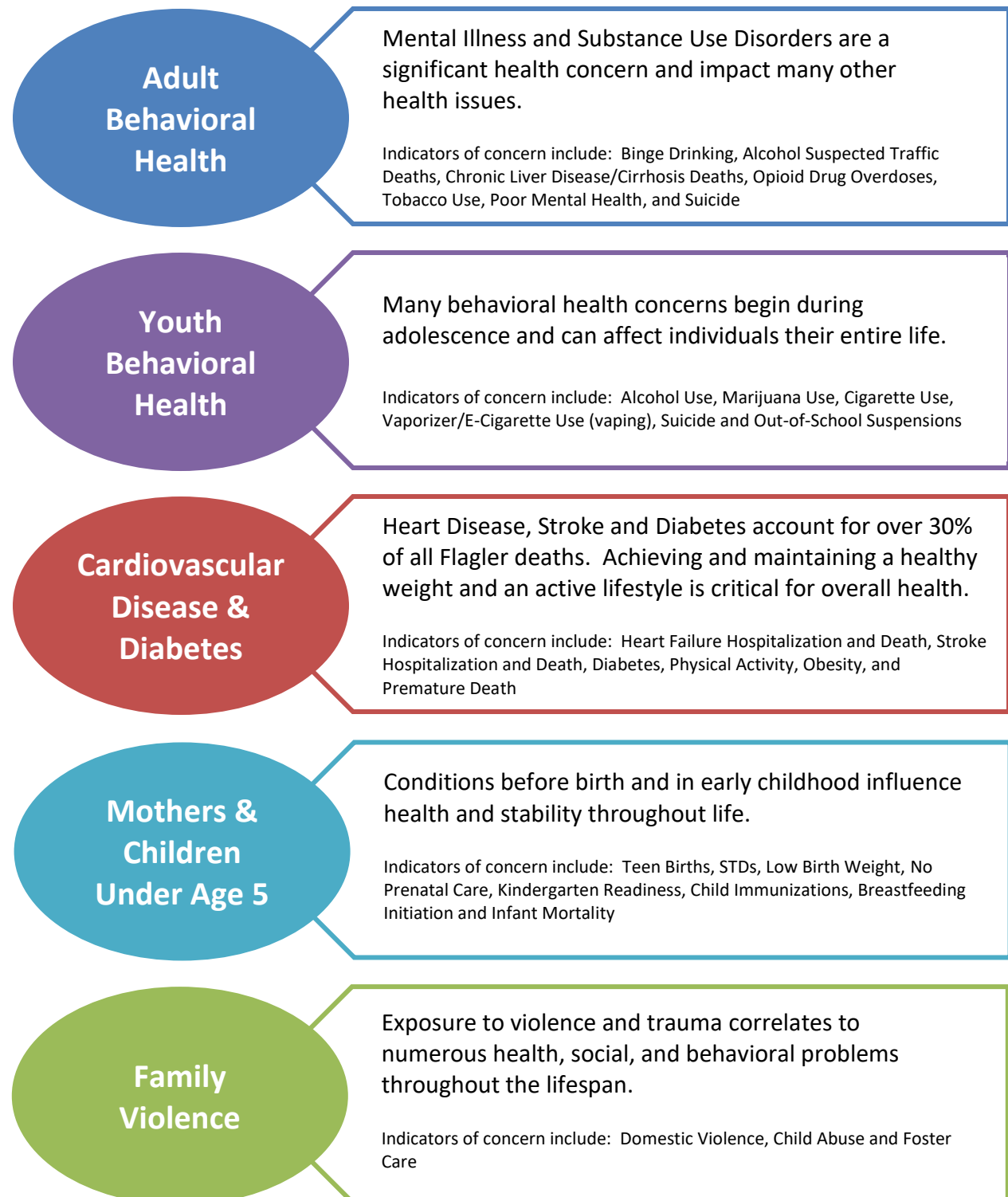
Turning Assessment into Action

The partnering organizations are committed to sharing and monitoring the progress of activities implemented independently and collaboratively in response to the 2019 CHNA findings and identified Priority Health Issues. Other organizations will be encouraged to contribute to action steps, including:

- Sharing the findings with community leaders and elected officials
- Using CHNA data to inform specific actions organizations can take to address health issues in Flagler County
- Participating in community collaborations and coalitions working to improve health outcomes

2020-2022 Priority Health Issues

The 2019 Community Health Needs Assessment activities in Flagler County culminated with the identification of five health priorities for future health improvement activities.

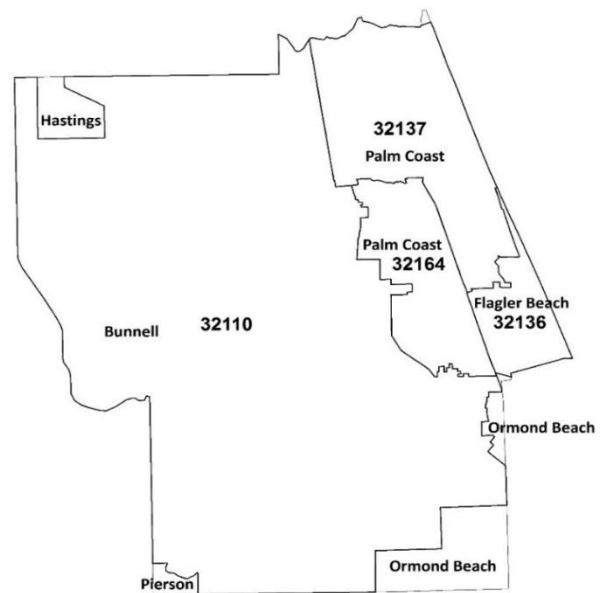


Flagler County Demographics

Flagler County, so named for Henry Morrison Flagler who built the Florida East Coast Railway, is on the east coast of the U.S. State of Florida. Flagler County encompasses 571 square miles in an area consisting of 485 square miles of land and 86 square miles of water in Northeast Florida. It is approximately 30 miles south of downtown Jacksonville with a diverse geography and culture. The Atlantic Ocean defines the eastern boundary of the county for 19 miles.

Flagler County is comprised of five municipalities - Beverly Beach, Bunnell, Flagler Beach, Marineland, and Palm Coast. The municipalities have incorporated about 48 percent of the land within Flagler County. The majority of the county's population lives in Palm Coast and the city of Bunnell has the largest land mass.

Flagler County was home to 110,510 individuals in 2017. The largest city in Flagler County is Palm Coast with an estimated population of 86,516. The City of Bunnell is the county seat with 2,907 residents. Just over 18% of the population live in unincorporated Flagler County.



2017 Population

| City | Estimate | Percent |
|--------------------------------|----------|---------|
| Beverly Beach | 400 | 0.4% |
| Bunnell | 2,907 | 2.6% |
| Flagler Beach | 4,985 | 4.4% |
| Marineland | 17 | 0.0% |
| Palm Coast | 86,516 | 74.5% |
| Unincorporated Flagler County* | 15,685 | 18.1% |
| TOTAL Flagler County | 110,510 | 100.0% |

Source: U.S. Census Bureau

*Calculated by subtracting total of city populations from county population

2017 Population by Sex

| Gender | Estimate | Percent |
|--------|----------|---------|
| Male | 53,251 | 48.2% |
| Female | 57,259 | 51.8% |
| Total | 110,510 | 100.0% |

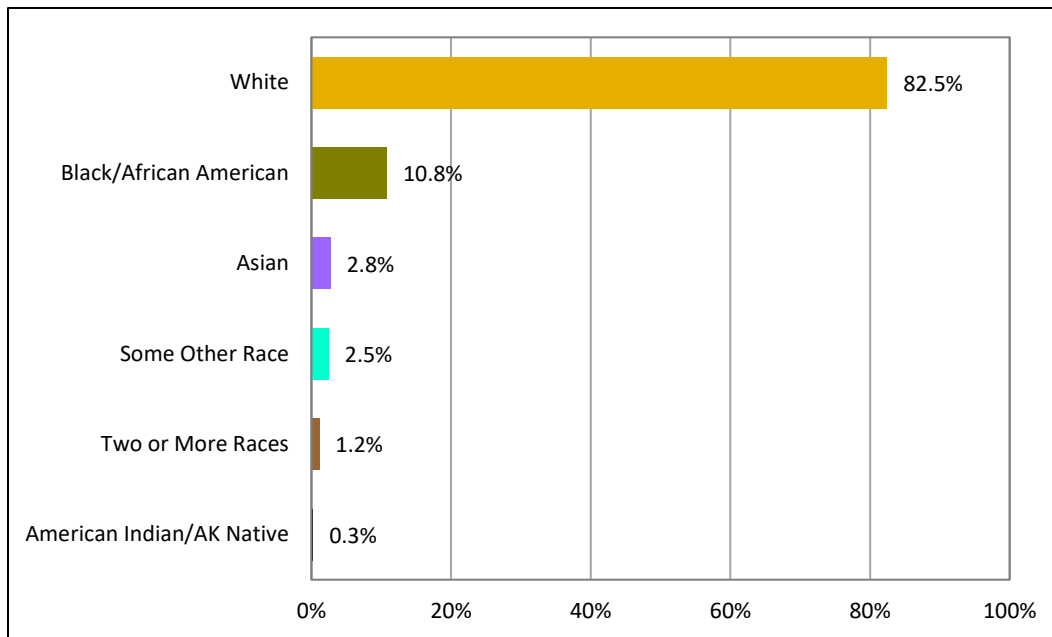
Source: U.S. Census Bureau, 2017 American Community Survey 1-Year Estimates

2017 Population by Ethnicity

| Ethnicity | Estimate | Percent |
|---------------------|----------|---------|
| Hispanic/Latino | 11,546 | 10.4% |
| Not Hispanic/Latino | 98,964 | 89.6% |
| Total | 110,510 | 100.0% |

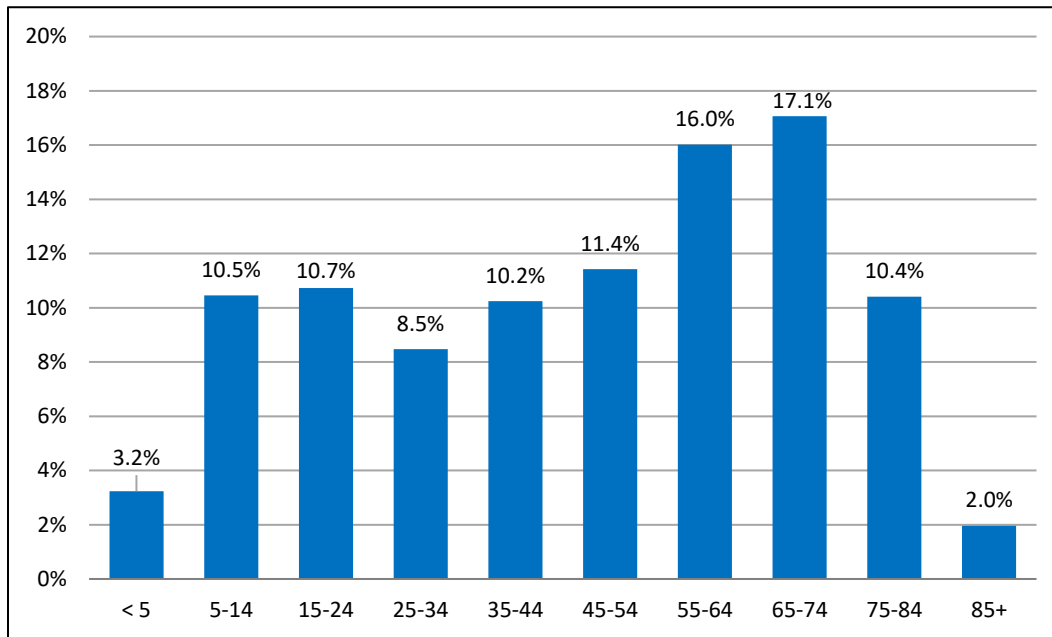
Source: U.S. Census Bureau, 2017 American Community Survey 1-Year Estimates

2017 Population by Race



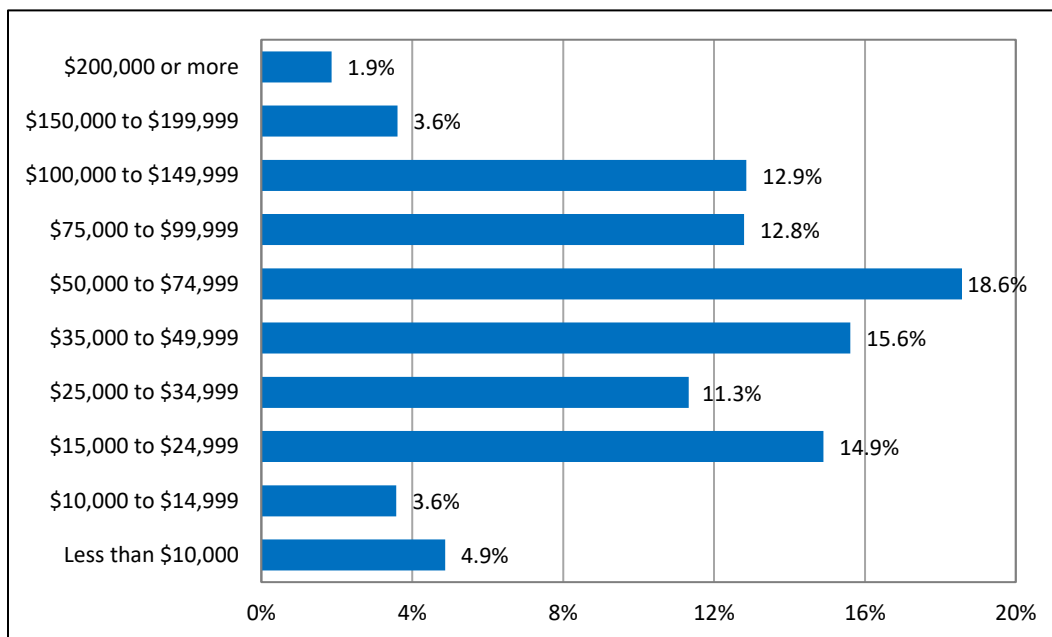
Source: U.S. Census Bureau, 2017 American Community Survey 1-Year Estimates

Population by Age Group



Source: U.S. Census Bureau, 2017 American Community Survey 1-Year Estimates

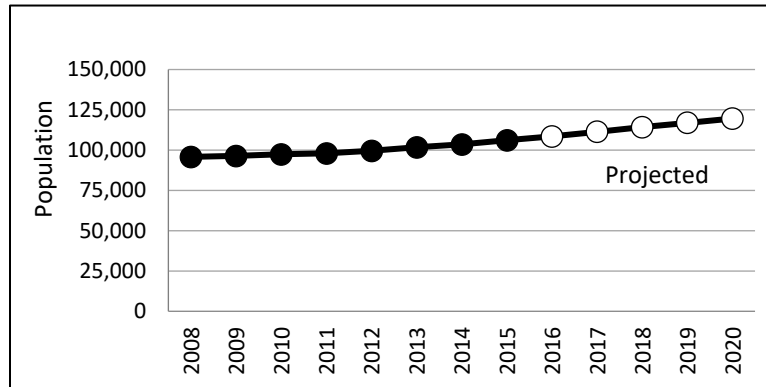
2017 Household Income Brackets



Source: U.S. Census Bureau, 2017 American Community Survey 1-Year Estimates

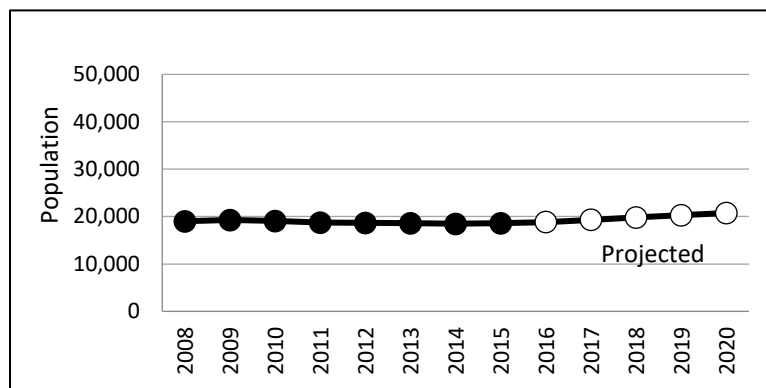
Flagler Population Trends

Flagler General Population



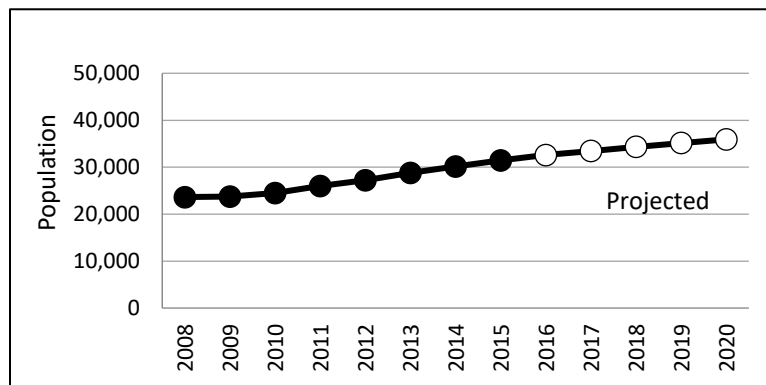
Source: Florida Health CHARTS, The Florida Legislature, Office of Economic and Demographic Research

Flagler Population Under 18



Source: Florida Health CHARTS, The Florida Legislature, Office of Economic and Demographic Research

Flagler Population 65 and Over



Source: Florida Health CHARTS, The Florida Legislature, Office of Economic and Demographic Research

County Health Survey 2019

Methodology

The 2019 County Health Survey in Volusia and Flagler Counties relied primarily on an Internet-based survey (which was collected using SurveyMonkey) to reach as many respondents as possible within the limits of the project budget. The online survey was available in English and Spanish via www.countyhealthsurvey.com. Paper surveys, also available in Spanish and English, were utilized to reach individuals without convenient access to the Internet and were manually entered. The survey was open from January to March 2019. There were 3,692 completed surveys: 2,722 Internet surveys and 970 paper surveys.

The online and paper surveys were promoted and distributed through email communication, community meetings, postings on various websites, social media posts and promotional items and paper surveys made available at partners' places of business. Based on the survey response audience, initiatives were developed to distribute additional surveys and conduct focus groups to reach underrepresented populations.



The 31-question survey included questions regarding perceived quality of life and health of the community, health concerns, barriers to health care, use of health care, health care needs and demographic information.

Survey respondents were asked “where is your permanent residence?” and of the 3,668 completed surveys:

- 2,608 reported they lived in Volusia County (70.5%)
- 966 reported they lived in Flagler County (26.3%)
- 102 reported they lived in another Florida County (2.8%)
- 7 reported they lived outside of Florida and 9 provided no response to the question (0.4%)

Only the 966 Flagler respondents are included in this presentation of survey results.

Limitations

Convenience Sampling: A convenience sampling methodology was used for the 2019 County Health Survey. The convenience sampling process is a non-probability sampling technique that relies on the collection of data from populations within easy reach of the researcher. In this case, community agencies were asked to promote the survey with their customers, staff and other stakeholders. This method was selected for ease and budget restrictions. Convenience sampling is much different from a random sampling methodology where the survey population is randomly sampled to gain responses from every population subset.

Limitations and Cautions with Convenience Sampling: Convenience sampling can lead to the under-representation or over-representation of particular groups within the sample. This was the case with the 2019 County Health Survey for several subsets of the Flagler County population including males and individuals ages 18-24 who were underrepresented. It is important to understand that convenience samples do not produce representative results because of the inherent biases. The results presented here cannot be considered representative of the entire population.

Limitations of Internet Surveys: Although paper surveys were made available, the survey process relied primarily on the Internet survey. Internet surveys tend to underrepresent lower-income, less educated and minority households.

Community Health Survey Respondent Demographics

| Age | Flagler | |
|--------------|------------|--------------|
| | Number | Percent |
| Less than 18 | 3 | 0.3 |
| 18-24 | 46 | 4.8 |
| 25-34 | 77 | 8.0 |
| 35-44 | 153 | 15.8 |
| 45-54 | 217 | 22.5 |
| 55-64 | 220 | 22.8 |
| 65+ | 150 | 15.5 |
| No response | 100 | 10.4 |
| Total | 966 | 100.0 |

| Race Identification <i>Race: Which group do you most identify with?</i> <i>(Check ONE selection)</i> | Flagler | |
|---|------------|--------------|
| | Number | Percent |
| Asia | 3 | 0.3 |
| Black/African American | 59 | 6.1 |
| Hawaiian Native/ Pacific Islander | 1 | 0.1 |
| Mixed Race | 27 | 2.8 |
| Native American/ Alaskan Native | 7 | 0.7 |
| Other Race | 32 | 3.3 |
| White/Caucasian | 740 | 76.6 |
| No response | 97 | 10.0 |
| Total | 966 | 100.0 |

| Ethnic Identification <i>Ethnicity: Which group do you most identify with?</i> <i>(Check ONE selection)</i> | Flagler | |
|--|------------|--------------|
| | Number | Percent |
| Hispanic/Latino | 63 | 6.5 |
| Not Hispanic/Latino | 762 | 78.9 |
| No response | 141 | 14.6 |
| Total | 966 | 100.0 |

| Gender | Flagler | |
|--------------|---------|---------|
| | Number | Percent |
| Female | 719 | 74.4 |
| Male | 149 | 15.4 |
| No Response | 98 | 10.1 |
| Total | 966 | 100.0 |

| Marital Status | Flagler | |
|----------------|---------|---------|
| | Number | Percent |
| Single | 170 | 17.6 |
| Married | 555 | 57.5 |
| Divorced | 102 | 10.6 |
| Widowed | 40 | 4.1 |
| No response | 99 | 10.2 |
| Total | 966 | 100.0 |

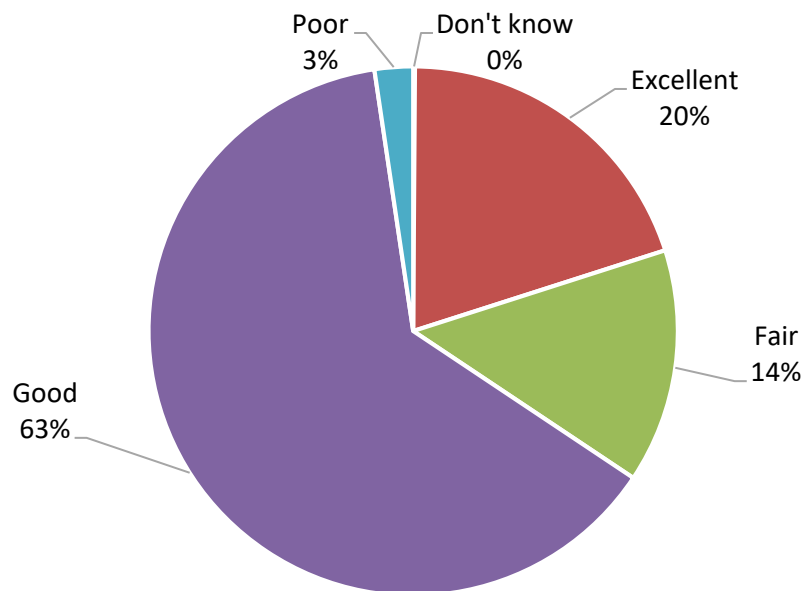
| Education <i>Education: Please check the highest level completed: (Check ONE selection)</i> | Flagler | |
|--|---------|---------|
| | Number | Percent |
| Elementary/Middle School | 1 | 0.1 |
| High School Diploma or GED | 95 | 9.8 |
| Technical/Community College | 113 | 11.7 |
| 4-year College/Bachelor's degree | 255 | 26.4 |
| Graduate/Advanced degree | 203 | 21.0 |
| Some college | 193 | 20.0 |
| No response | 106 | 11.0 |
| Total | 966 | 100.0 |

| Employment Status | Flagler | |
|--------------------|---------|---------|
| | Number | Percent |
| Employed full-time | 529 | 54.8 |
| Employed part-time | 59 | 6.1 |
| Unemployed | 27 | 2.8 |
| Self-employed | 37 | 3.8 |
| Not seeking work | 7 | 0.7 |
| Retired | 136 | 14.1 |
| Homemaker | 23 | 2.4 |
| Student | 11 | 1.1 |
| Other | 39 | 4.0 |
| No response | 98 | 10.1 |
| Total | 966 | 100.0 |

| Annual Household Income | Flagler | |
|-------------------------|------------|--------------|
| | Number | Percent |
| Less than \$10,000 | 42 | 4.3 |
| \$10,000 to \$19,999 | 52 | 5.4 |
| \$20,000 to \$29,999 | 94 | 9.7 |
| \$30,000 to \$49,999 | 165 | 17.1 |
| \$50,000 to \$74,999 | 190 | 19.7 |
| \$75,000 to \$99,999 | 118 | 12.2 |
| \$100,000 or more | 168 | 17.4 |
| No response | 137 | 14.2 |
| Total | 966 | 100.0 |

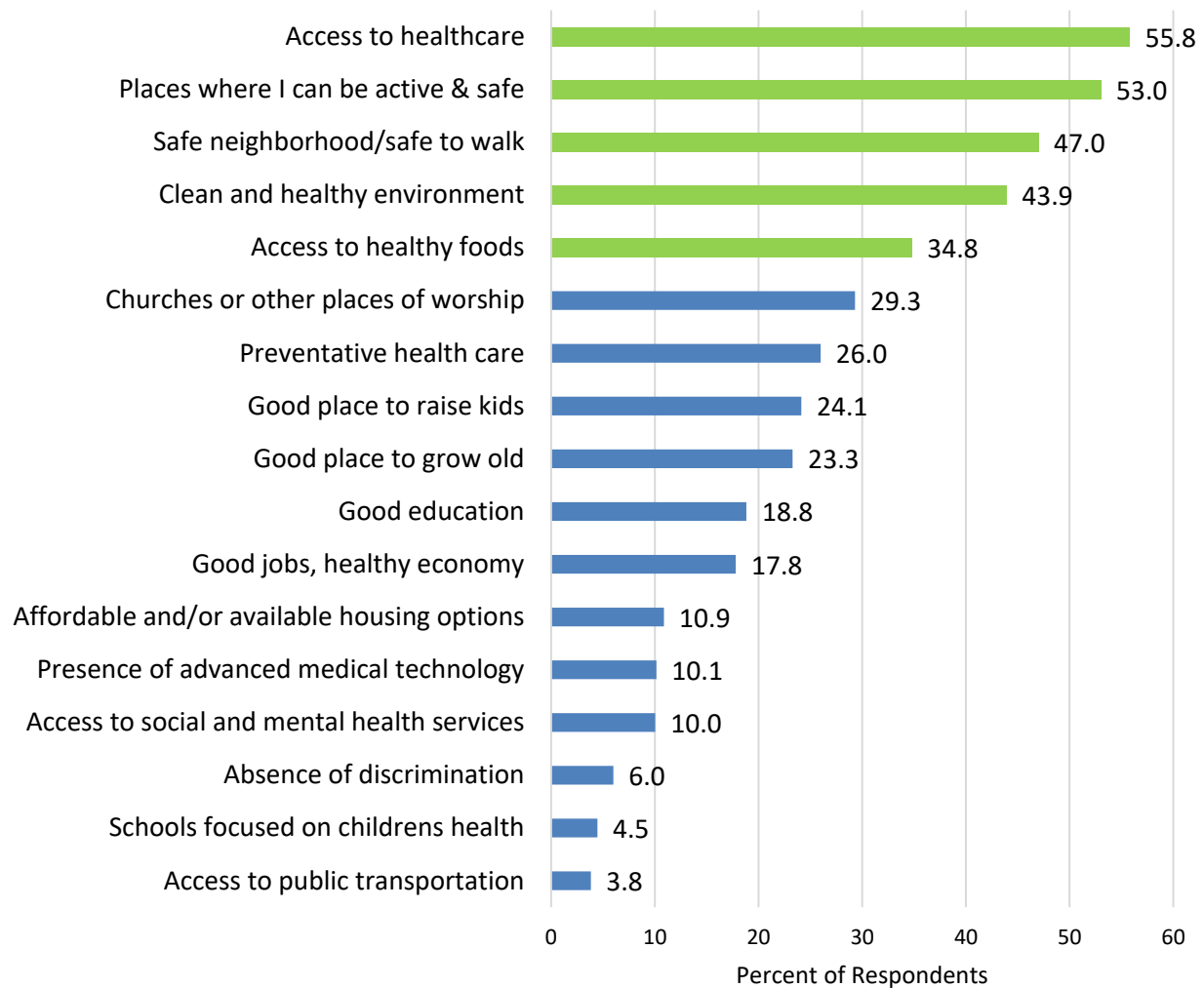
Overall Health

Survey Question: How do you rate your overall health?



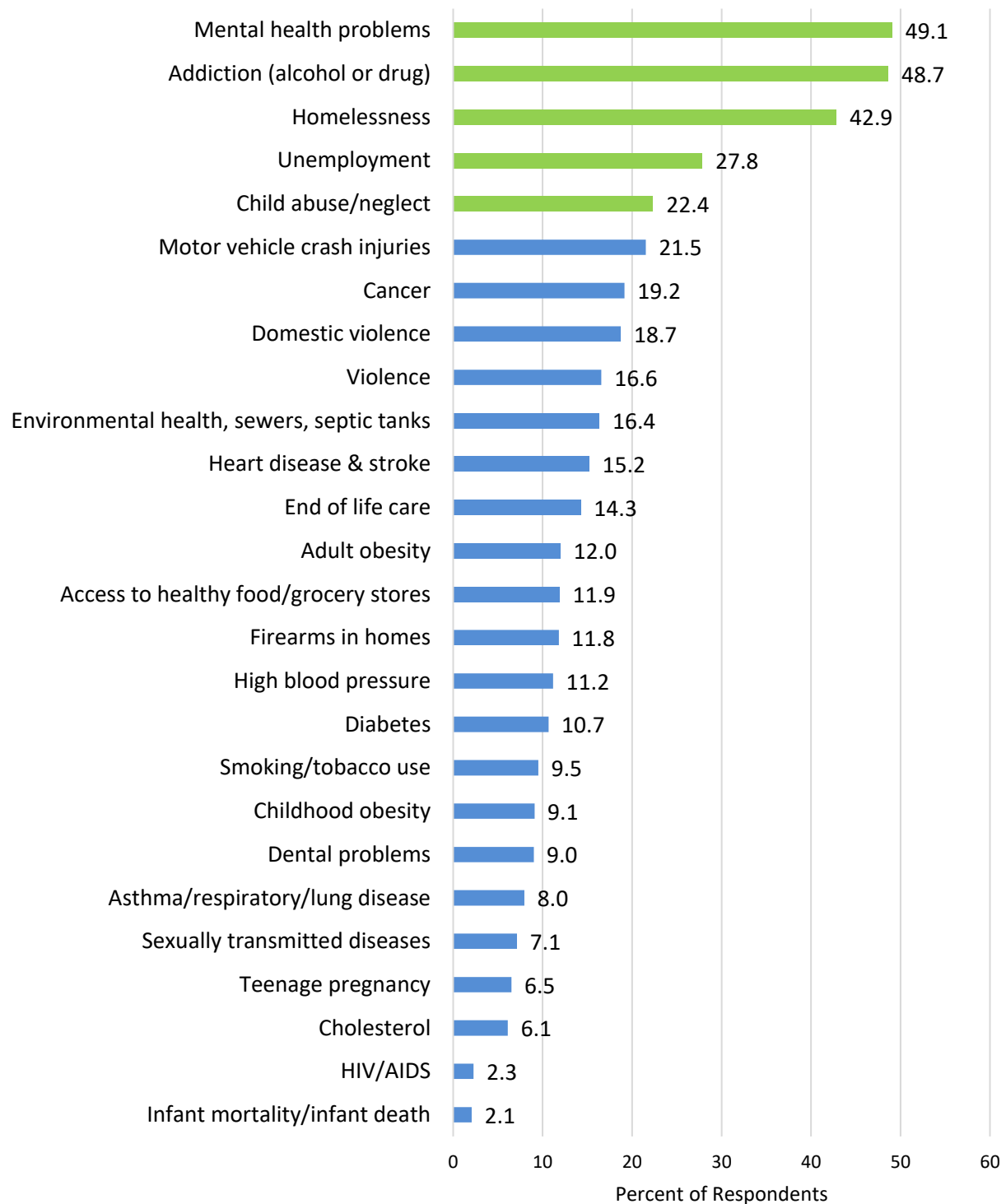
Things that Allow YOU To Be Healthy Where You Live

Survey Question: Check up to 5 things that allow YOU to be healthy where you live.



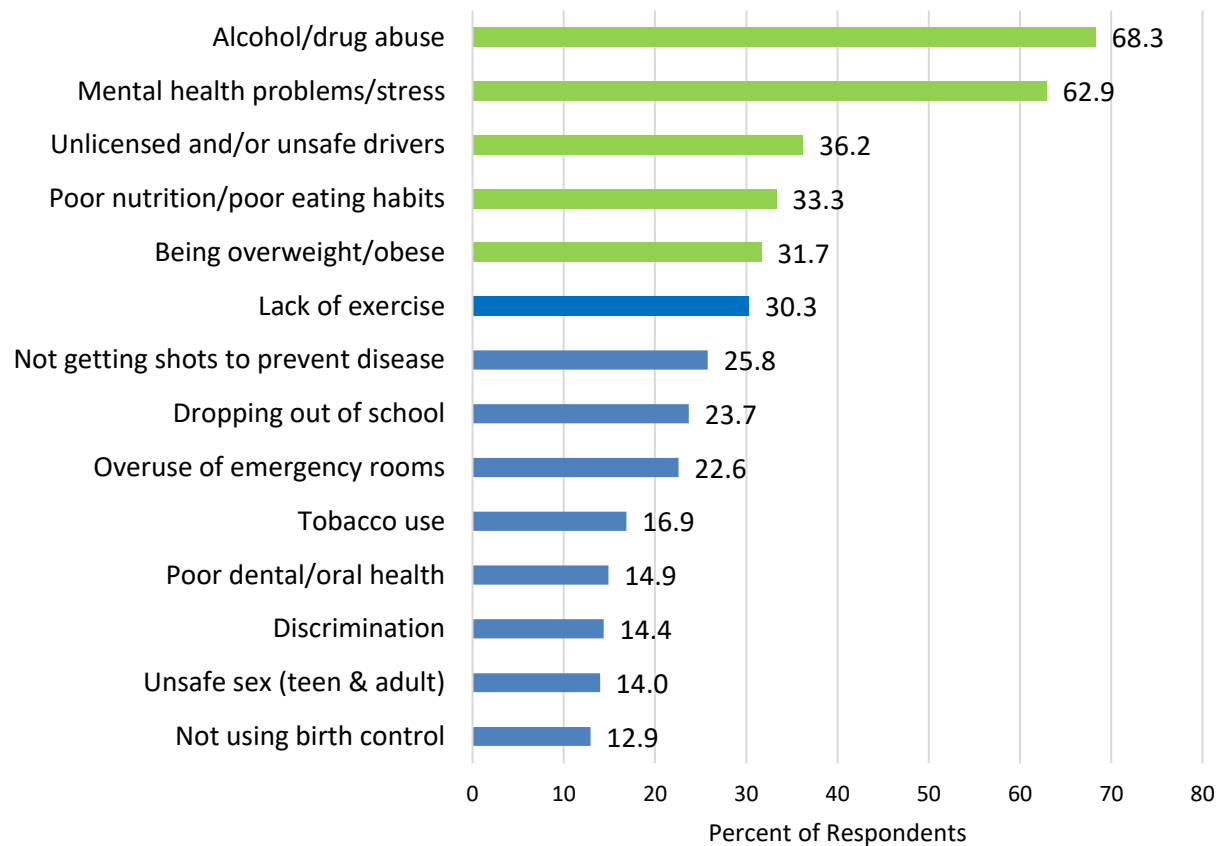
Health Issues YOU Are Most Concerned About

Survey Question: Check up to 5 health issues YOU are most concerned about in your county.



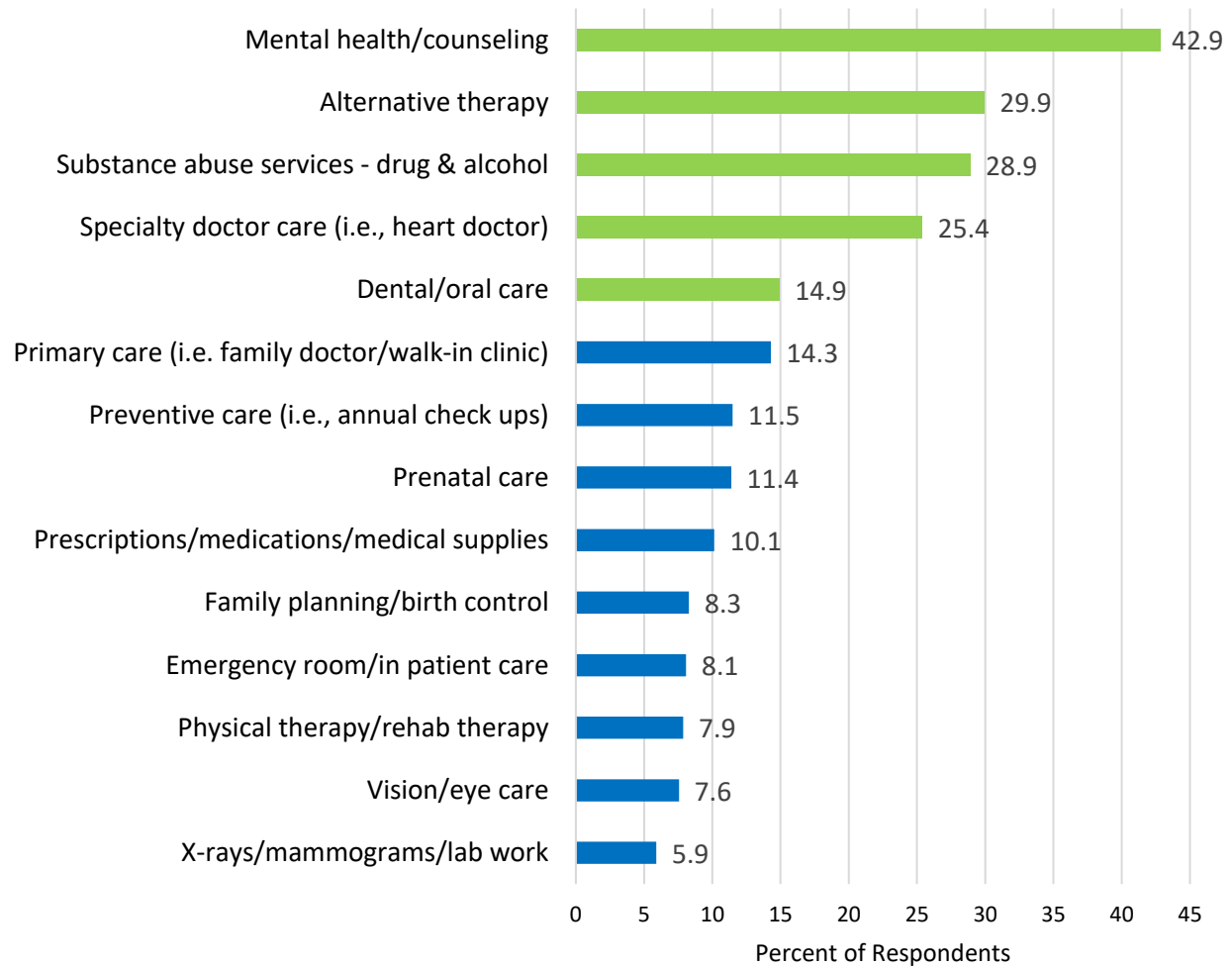
Unhealthy Behaviors YOU Are Most Concerned About

Survey Question: Check up to 5 unhealthy behaviors YOU are most concerned about in your county.



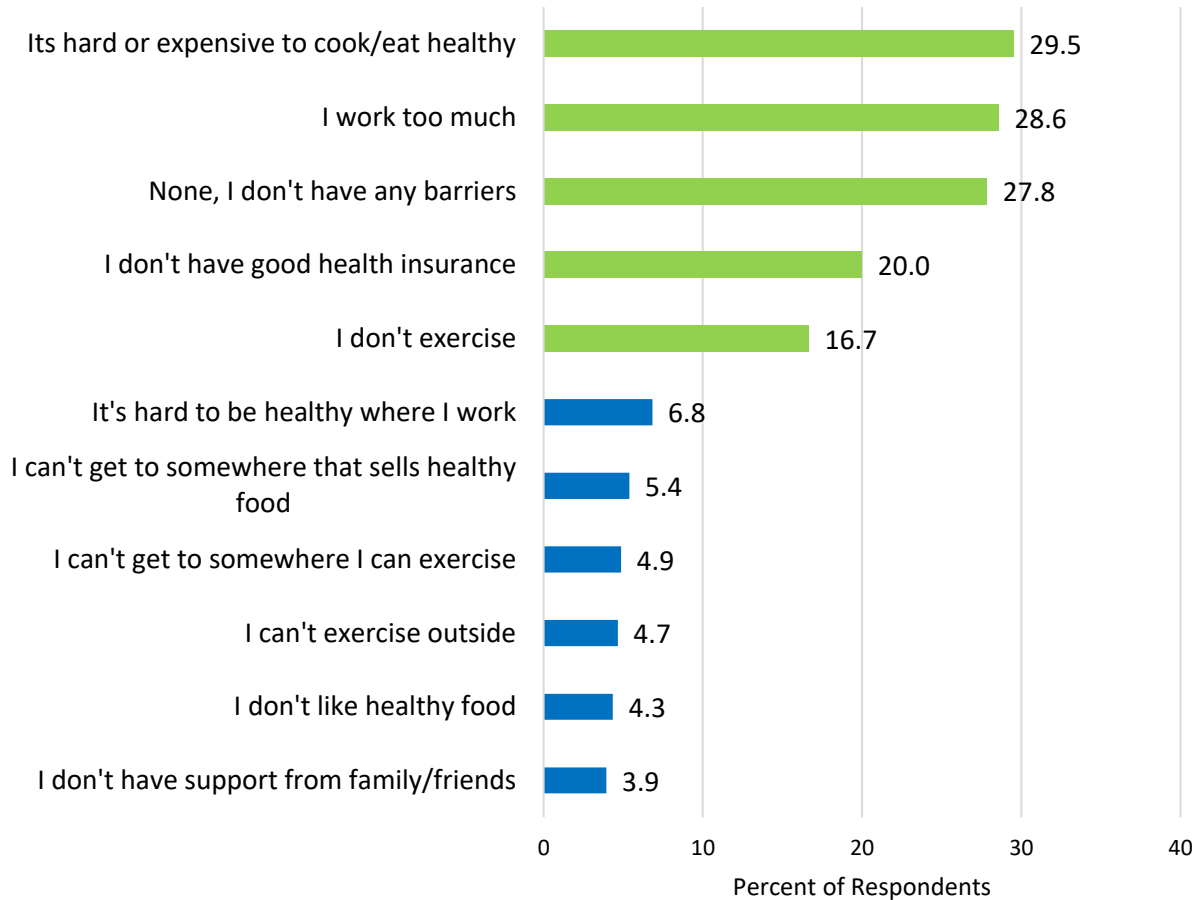
Health Services that Are Difficult to Obtain

Survey Question: What health care services are difficult to obtain in your community?
(Check ALL that apply)



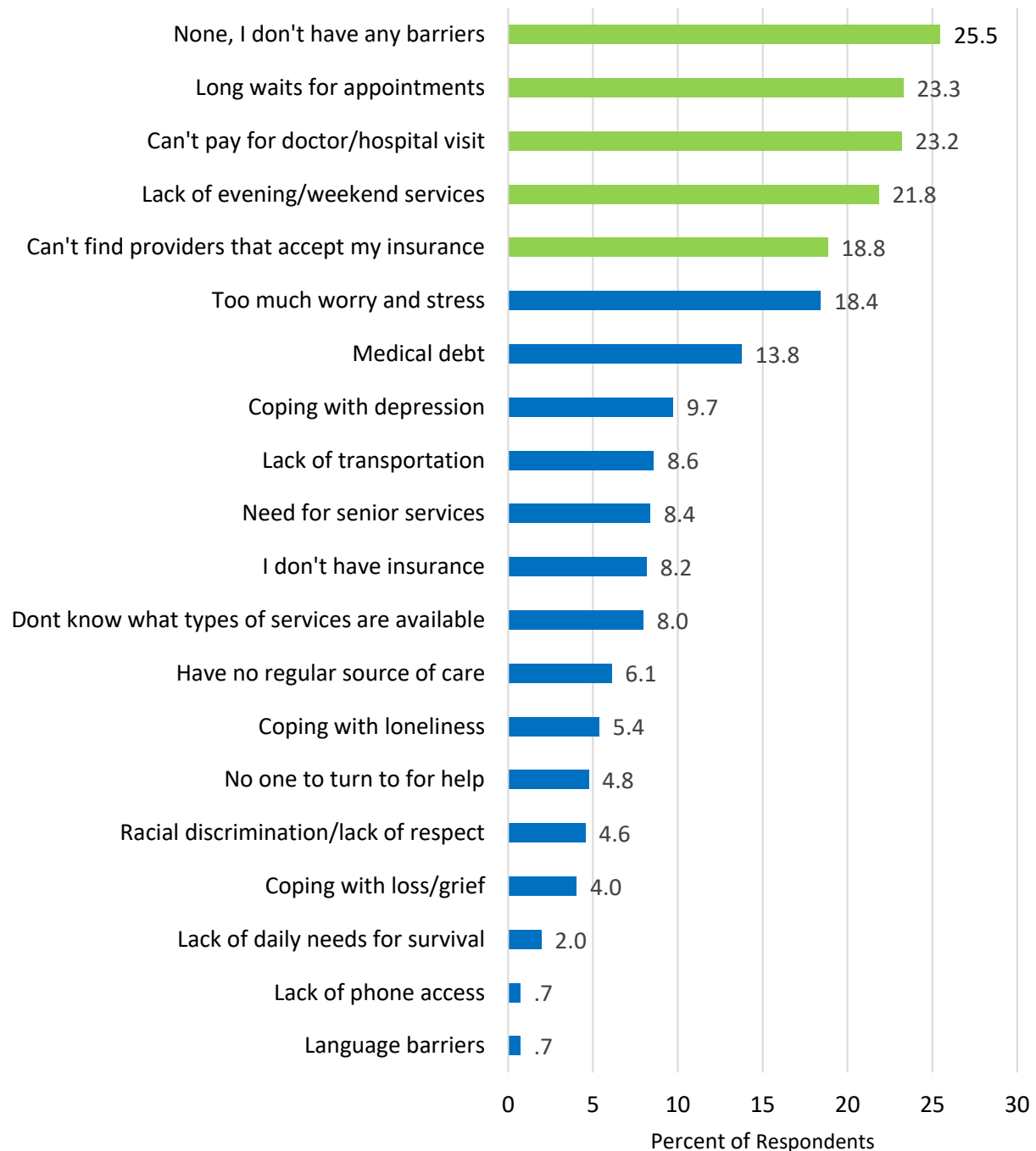
Barriers for YOU to Get or Stay Healthy

Survey Question: What do you feel are barriers for YOU getting or staying healthy in your county?
(Check ALL that apply):



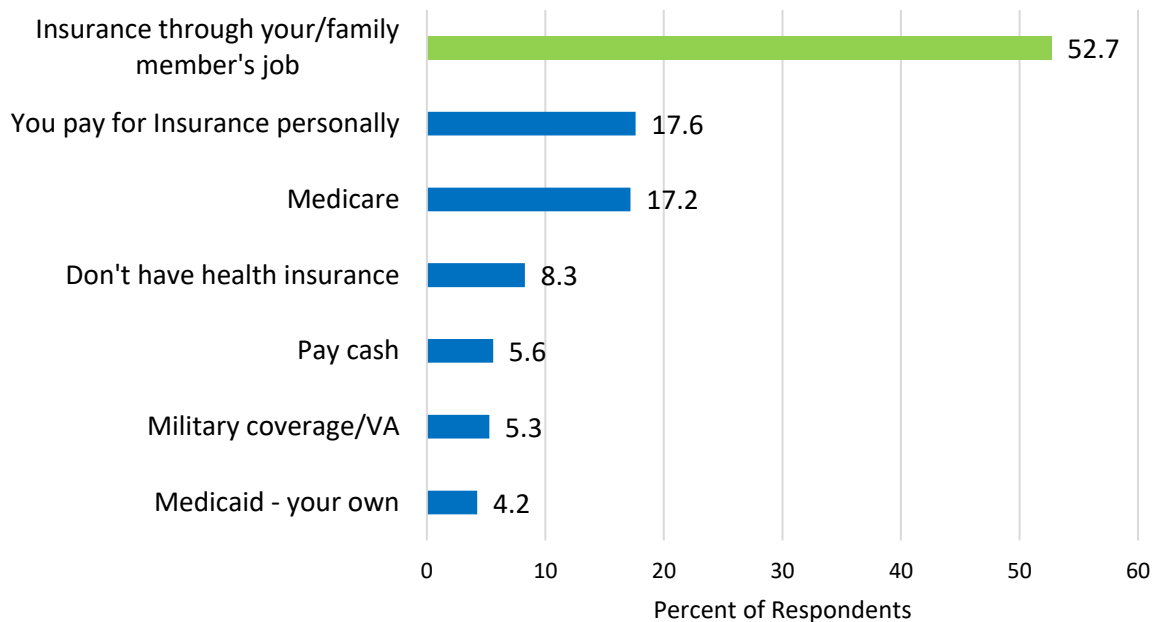
Barriers for YOU to get Health Care

Survey Question: What do you feel are barriers for YOU getting health care in your county?
(Check ALL that apply)



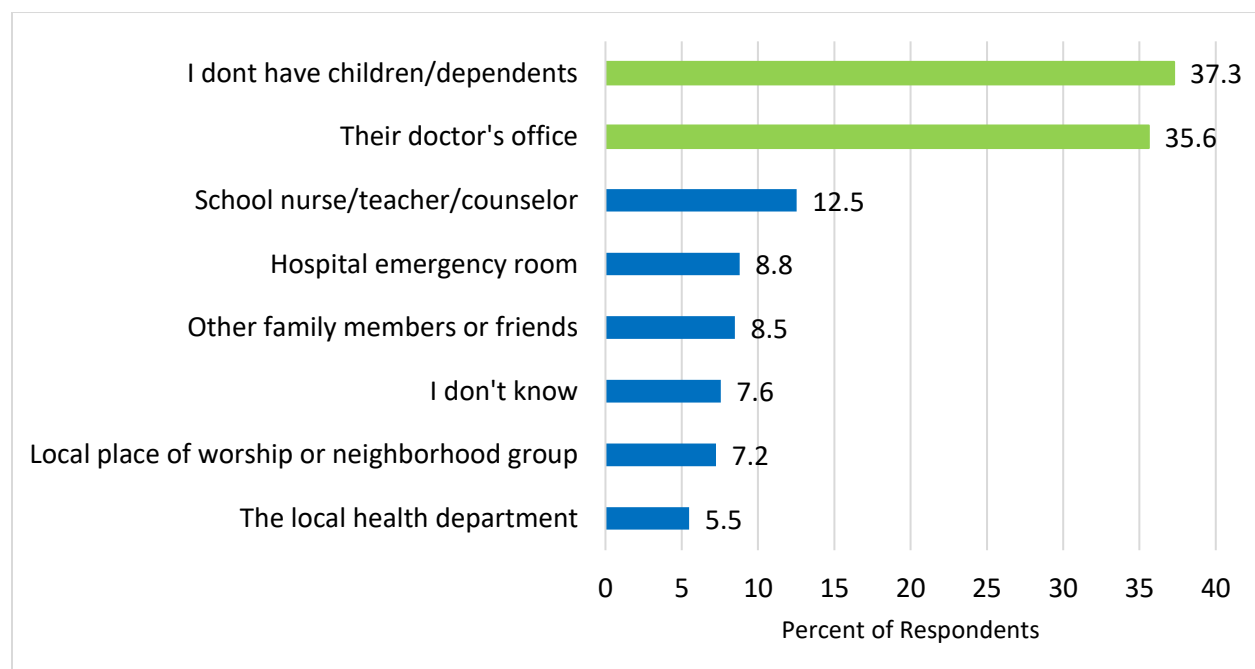
Health Coverage

Survey Question: How is your health care covered? (Check ALL that apply)



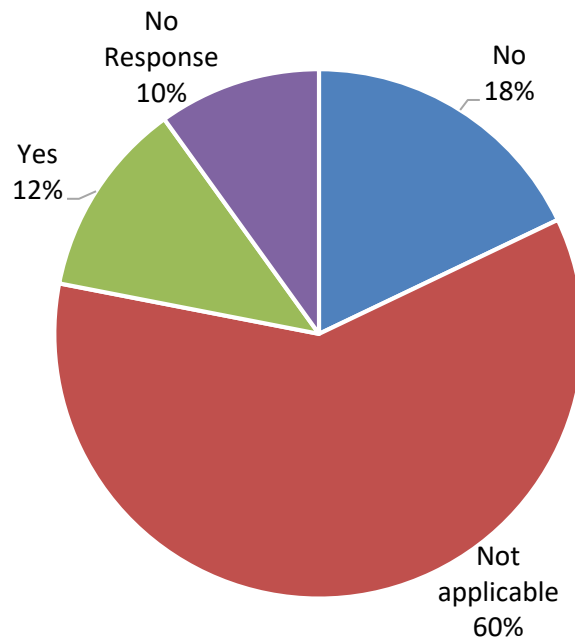
Where You Would Go if You Were Concerned About Your Child

Survey Question: Where would you go if you were worried about your child's mental, physical or social health? (Check ALL that apply)



Child Care

Survey Question: Do problems getting child care make it difficult for you to work or study?

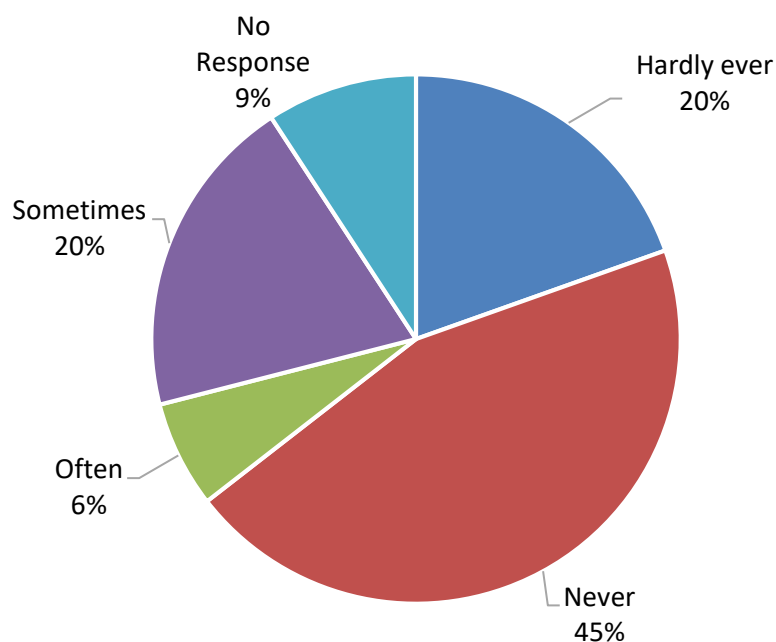


| Survey Questions | Yes | No | Don't Know/ Not Sure | No response |
|--|-------|-------|-------------------------|----------------|
| Safety: Are you afraid you might be hurt in your apartment building or house? | 5.2% | 75.1% | 10.2% | 9.5% |
| Safety: Do you have a safe place or is there someplace where you feel safe? | 84.6% | 3.9% | 2.4% | 9.1% |
| Stable Housing: Are you worried or concerned that in the next 2 months you may not have stable housing that you own, rent, or stay in as part of a household? | 8.4% | 77.3% | 4.8% | 9.5% |

| Survey Question: Within the last 12 months: | Yes | No | Don't Know/ Not Sure | No response |
|---|--------------|--------------|-------------------------|----------------|
| Utilities: Has the utility company shut off your services for not paying your bills? | 5.2% | 85.2% | 0.7% | 8.9% |
| Food Insecurity: Did you ever eat less because there wasn't enough money for food? | 16.8% | 73.0% | 0.7% | 9.5% |
| Food Insecurity: Did you worry if your food would run out before you got money to buy more? | 17.7% | 71.4% | 1.0% | 9.8% |
| Healthcare Costs: Was there a time you needed to see a doctor but could not because of cost? | 32.0% | 57.2% | 1.0% | 9.7% |
| Transportation: Ever had to go without health care because you didn't have a way to get there? | 6.8% | 82.8% | 0.7% | 9.6% |

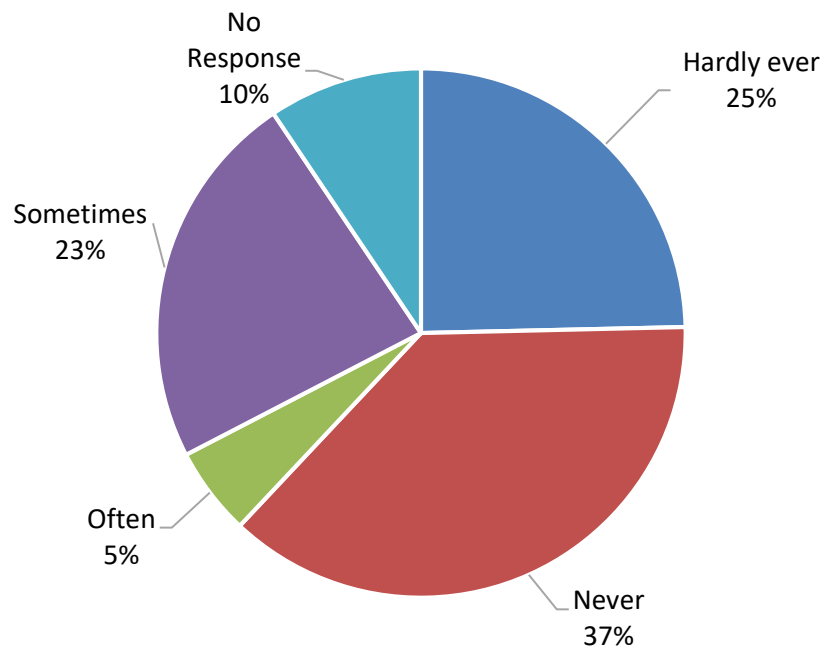
Social Isolation

Survey Question: How often do you feel that you lack companionship?



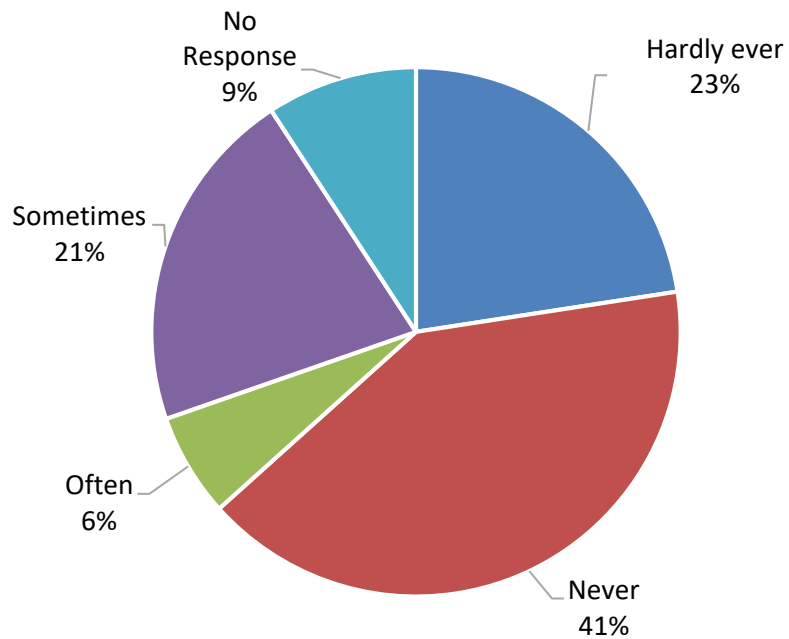
Social Isolation

Survey Question: How often do you feel left out?



Social Isolation

Survey Question: How often do you feel isolated from others?



Flagler County Health Issues

The following section includes a collection of data graphs, tables and maps depicting population-level data for indicators organized into 10 identified health issues, including:

Priority Health Issues

1. Adult Behavioral Health
2. Youth Behavioral Health
3. Cardiovascular Diseases & Diabetes (and Healthy Eating & Physical Activity)
4. Mothers & Children Under Age 5
5. Family Violence

Other Health Issues

6. Respiratory Disorders and Cancer
7. Communicable & Infectious Diseases
8. Availability of Health Resources
9. Injuries
10. Social & Economic Issues

All Priority Health Issues viewed through a Social Determinants of Health Lens

Tips for Reviewing Health Indicator Data in the Following Sections

There are important components of each data indicator to note prior to interpretation, including:

- **Scale:** The scale for each indicator is different. It may appear that graphs on the same page are visually similar but notice the range between tick marks on each indicator.
- **Range of the y-axis (vertical axis):** Make sure you note the starting number on the y-axis (vertical axis) on each graph. For the purposes of clarity and space efficiency, some of the graphs will start the y-axis at a number other than 0. Be cautious when reviewing these graphs as the trends can appear exaggerated.
- **Trends:** When an indicator with a small number of occurrences is graphed, the trend lines can appear to move up and down significantly. Carefully consider the differences in each data point and the scale and range of the y-axis.
- **Crude Rate:** Unless otherwise noted, all graphs in the Community Health Needs Assessment portray a crude rate. This rate is calculated using the total number of events in a specified time period divided by the total number of individuals in the population who are at risk for these events and multiplying by 1,000, 10,000 or 100,000, etc. Crude rates are influenced by the underlying age distribution of the population.

- **Key for Indicators of Concern: Trend, Comparison, # Impacted columns**

Arrows up and down   denote trend direction or that data is higher or lower than Florida.

Green color denotes positive trend or comparison and **red** denotes negative trend or comparison.

The number impacted by issue for most recent year is provided, if available.

Important Terms

3-Year Rolling Rate is a calculation to analyze data points by creating a series of sums of different subsets of the full data set. A rolling rate is commonly used with time series data to smooth out short-term fluctuations and highlight longer-term trends or cycles. The three-year rolling rate is calculated on the sum of an indicator over 3-year, rolling time periods.

Age-adjusted Rate is the most common adjustment for public health data. The age-adjustment process removes differences in the age composition of two or more populations to allow comparisons between these populations independent of their age structure. The result is a figure that represents the theoretical risk of incidence for a population, if the population had an age distribution identical to that of a standard population.

1. Adult Behavioral Health

Behavioral health is a term that covers the full range of mental and emotional well-being – from coping with daily life challenges to the often-complex treatment of mental illnesses, such as major depression or bipolar disorder, as well as substance use disorders and other addictive behaviors. Now more than ever, health experts across all fields are recognizing the important link between good behavioral health and good overall health.

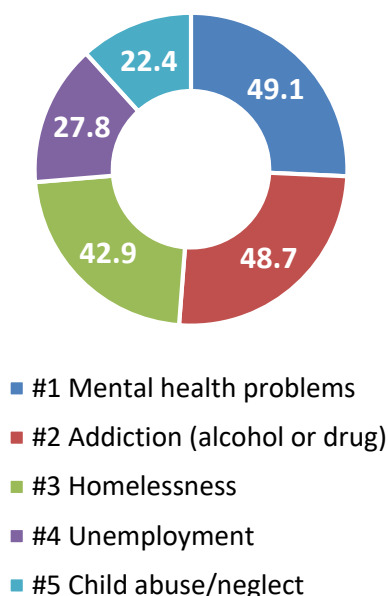
Mental Health

According to The Substance Abuse and Mental Health Services Administration (SAMHSA), good mental health is essential to overall health and personal well-being. The ability to lead a healthy, balanced and productive life stems, in part, from an individual's ability to handle emotions. Emotional problems can impair a person's thinking, feelings, and behavior and, over time, can become increasingly serious and disabling. Mental illnesses, such as depression and anxiety, affect a person's ability to participate in health-promoting behaviors. In turn, problems with physical health, such as chronic diseases, can have a serious impact on mental health and decrease a person's ability to participate in treatment and recovery.

Substance Use and Tobacco Use

Drug and alcohol abuse and addiction have negative consequences for individuals and for society. Estimates of the total overall costs of substance abuse in the United States, including productivity and health- and crime-related costs, exceed \$600 billion annually according to the National Institutes of Health. This includes approximately \$193 billion for illicit drugs, \$193 billion for tobacco, and \$235 billion for alcohol. As staggering as these numbers are, they do not fully describe the breadth of destructive public health and safety implications of drug abuse and addiction, such as family disintegration, loss of employment, failure in school, domestic violence, and child abuse.

Survey Snapshot: Top Five Health Issues You Are Most Concerned About



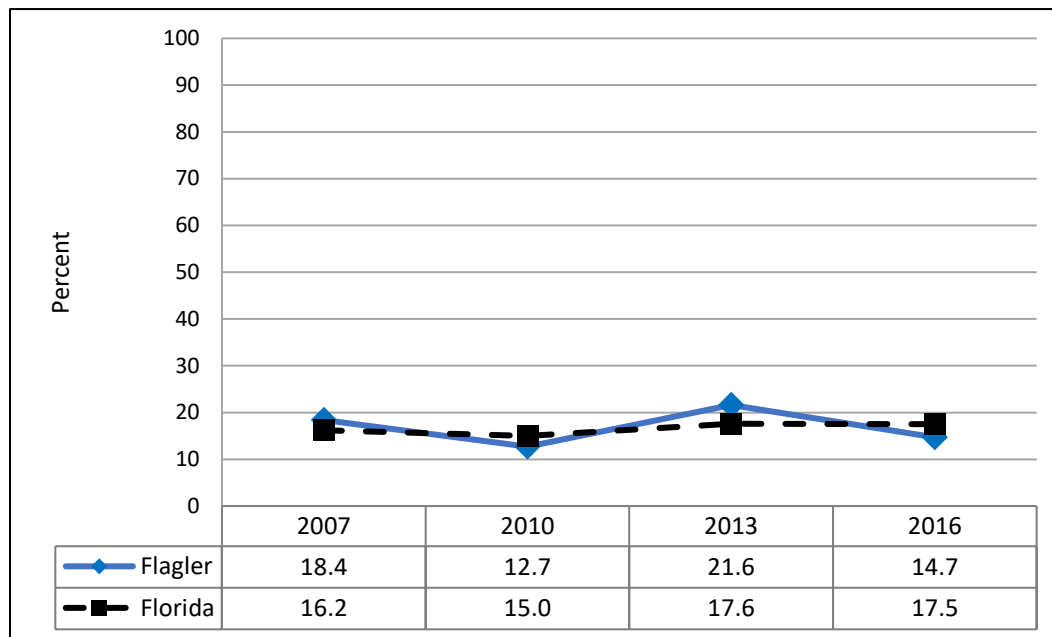
Indicators of Concern

| | | Trend | Comparison | # Impacted |
|---|--|-------|------------|------------|
| Alcohol-suspected Traffic Deaths | Figure 1.4. Alcohol-suspected motor vehicle crash deaths has increased and is higher than Florida rate | ↑ | ↑ | 6 |
| Chronic Liver Disease/Cirrhosis Deaths | Figure 1.5. Flagler's death rate is higher than Florida and the rate of death for Hispanics has increased. | ↑ | ↑ | 20 |
| Opioid Drug Overdoses | Figure 1.9. Flagler's death from Opioid overdoses has increased as has its use among individuals seeking treatment for addiction. | ↑ | | 12 |
| Tobacco Use | Figure 1.11. The percent of Flagler women and black individuals using tobacco exceeds the Florida percent. | | ↑ | |
| Poor Mental Health | Figure 1.12. 9.3% of Flagler adults had 14 or more poor mental health days in the last month and 12.6% have a depressive disorder (both figures are lower than Florida) | | ↓ | |
| Suicide | Figure 1.15. Flagler has the highest suicide rate in Florida in 2017 and the rate is increasing. | ↑ | ↑ | 29 |

Indicators Included:

| Indicator | Reference |
|--|-------------|
| Adults Who Engage in Heavy or Binge Drinking | Figure 1.1 |
| Alcohol-suspected Motor Vehicle Traffic Crashes | Figure 1.2 |
| Alcohol-suspected Motor Vehicle Traffic Crash Injuries | Figure 1.3 |
| Alcohol-suspected Motor Vehicle Traffic Crash Deaths | Figure 1.4 |
| Chronic Liver Disease and Cirrhosis 3-Year Age-adjusted Death Rate | Figure 1.5 |
| Chronic Liver Disease and Cirrhosis Age-adjusted Death Rate, by Gender | Figure 1.6 |
| Most Common Primary Drug of Choice at Intake (Adults Entering Substance Abuse Treatment at SMA Healthcare) | Figure 1.7 |
| Opioid Related Age-adjusted Hospitalization Rate | Figure 1.8 |
| Opioid Related Age-adjusted Death Rate | Figure 1.9 |
| Adults Who Are Current Smokers | Figure 1.10 |
| Adults Who Had Poor Mental Health on 14 or More of the Past 30 Days | Figure 1.11 |
| Adults Who Have a Depressive Disorder | Figure 1.12 |
| Average Number of Unhealthy Mental Days in the Past 30 Days | Figure 1.13 |
| Suicide 3-Year Age-adjusted Death Rate | Figure 1.14 |
| Suicide 3-Year Death Rate, Ages 19-21 | Figure 1.15 |
| Suicide Age-adjusted Death Rates, by Gender | Figure 1.16 |
| Baker Act Involuntary Exam Initiations (All Ages) | Figure 1.17 |
| Number of Membership Associations (Social Associations) | Figure 1.18 |

Figure 1.1 Adults Who Engage in Heavy or Binge Drinking

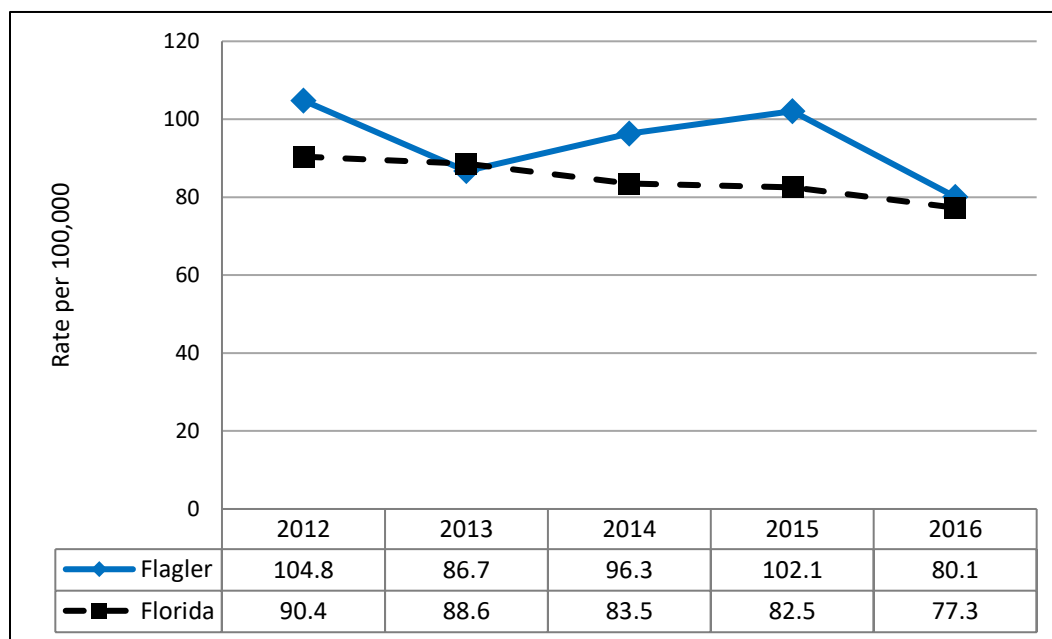


Source: Florida Behavioral Risk Factor Surveillance System

Note: Black=Non-Hispanic Black; White=Non-Hispanic White

Note: No data indicates sample size less than 30 which would yield statistically unreliable estimates

Figure 1.2 Alcohol-suspected Motor Vehicle Traffic Crashes



Source: Florida Department of Highway Safety and Motor Vehicles

Figure 1.3 Alcohol-suspected Motor Vehicle Traffic Crash Injuries

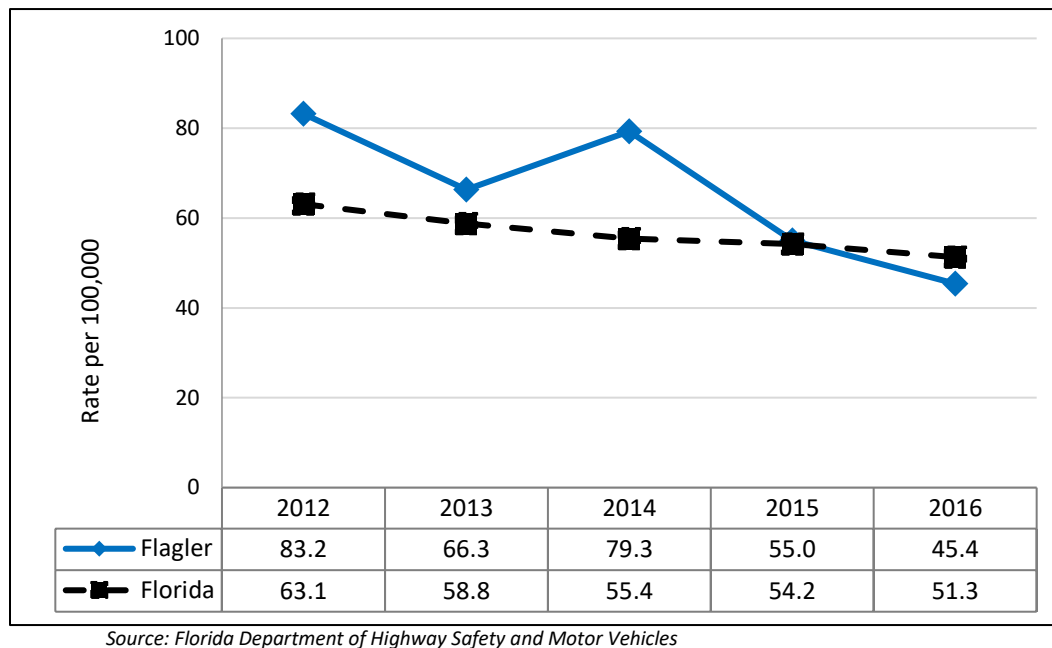


Figure 1.4 Alcohol-suspected Motor Vehicle Traffic Crash Deaths

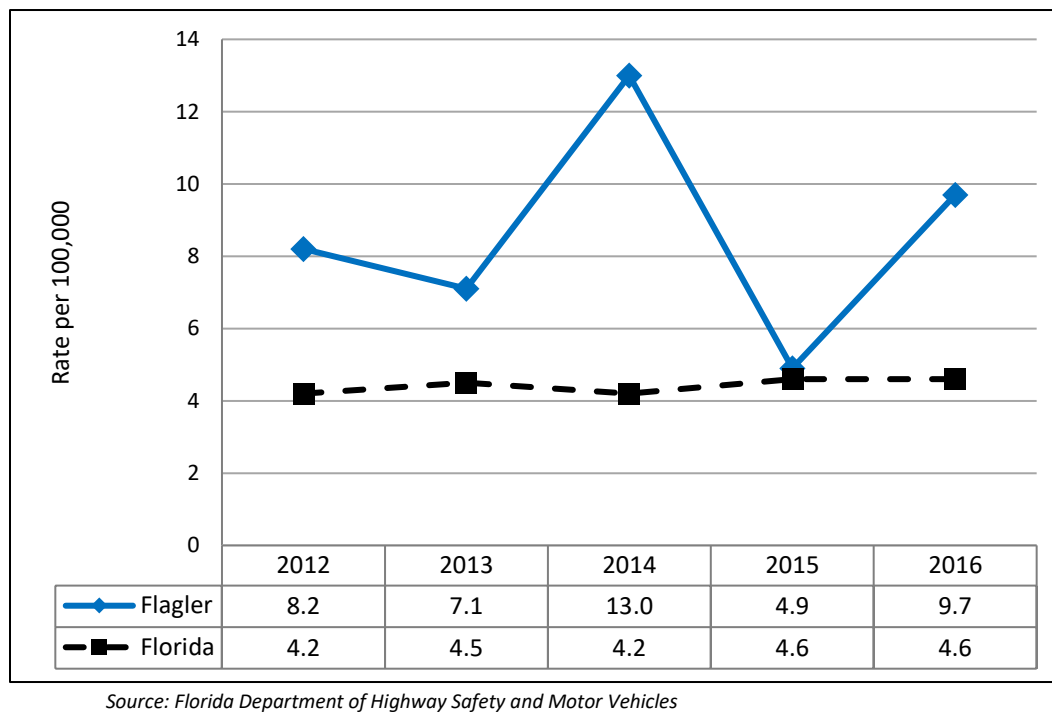
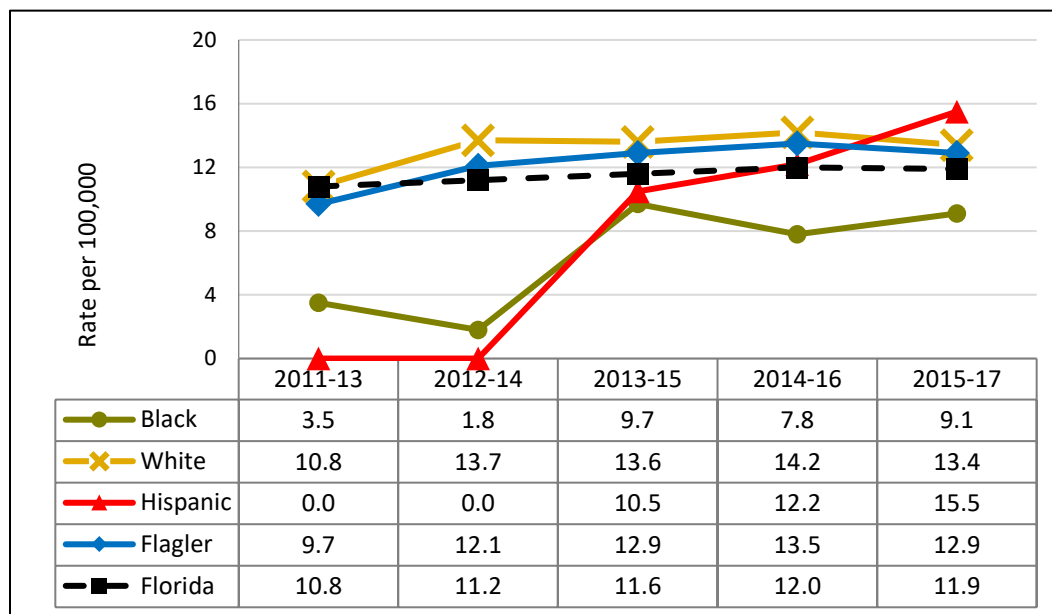


Figure 1.5 Chronic Liver Disease and Cirrhosis Age-adjusted Death Rate, 3-Year Rolling Rates



Source: Florida Department of Health, Bureau of Vital Statistics

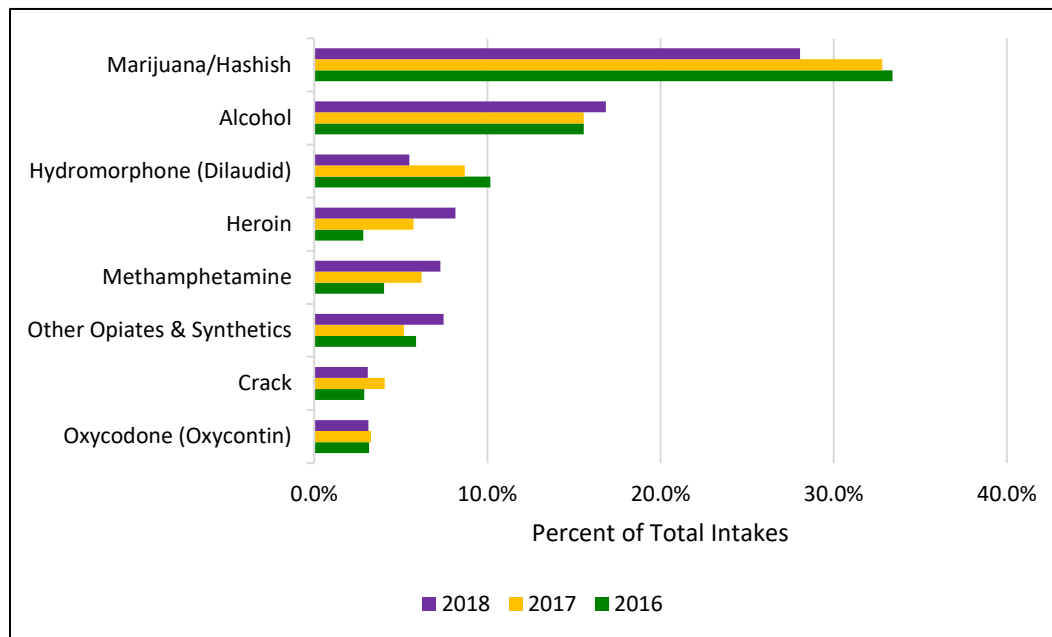
Figure 1.6 Chronic Liver Disease and Cirrhosis Age-adjusted Death Rate, 3-Year Rolling Rates, by Gender

| Years | Male | | Female | |
|-----------|-------|------|--------|------|
| | Count | Rate | Count | Rate |
| 2011-2013 | 24 | 13.3 | 17 | 6.9 |
| 2012-2014 | 34 | 16.3 | 19 | 8.7 |
| 2013-2015 | 41 | 19.2 | 17 | 7.6 |
| 2014-2016 | 45 | 21.0 | 19 | 7.1 |
| 2015-2017 | 40 | 19.3 | 19 | 7.4 |

Source: Florida Department of Health, Bureau of Vital Statistics

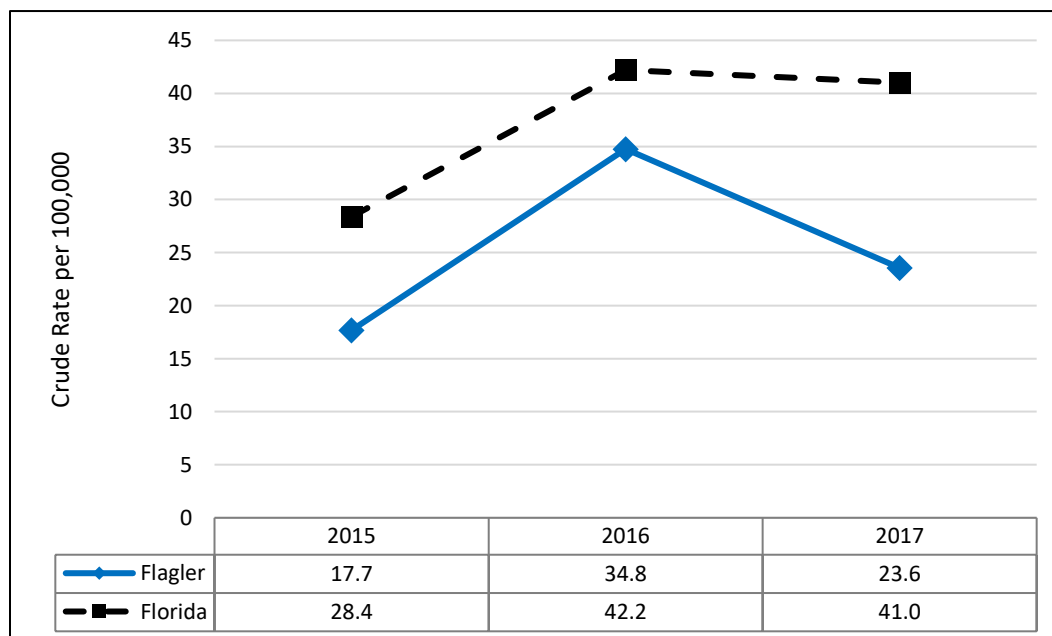
Note: Rates are per 100,000

Figure 1.7 Most Common Primary Drug of Choice at Intake (Flagler County and Volusia County Adults entering Substance Abuse Treatment at SMA Healthcare)



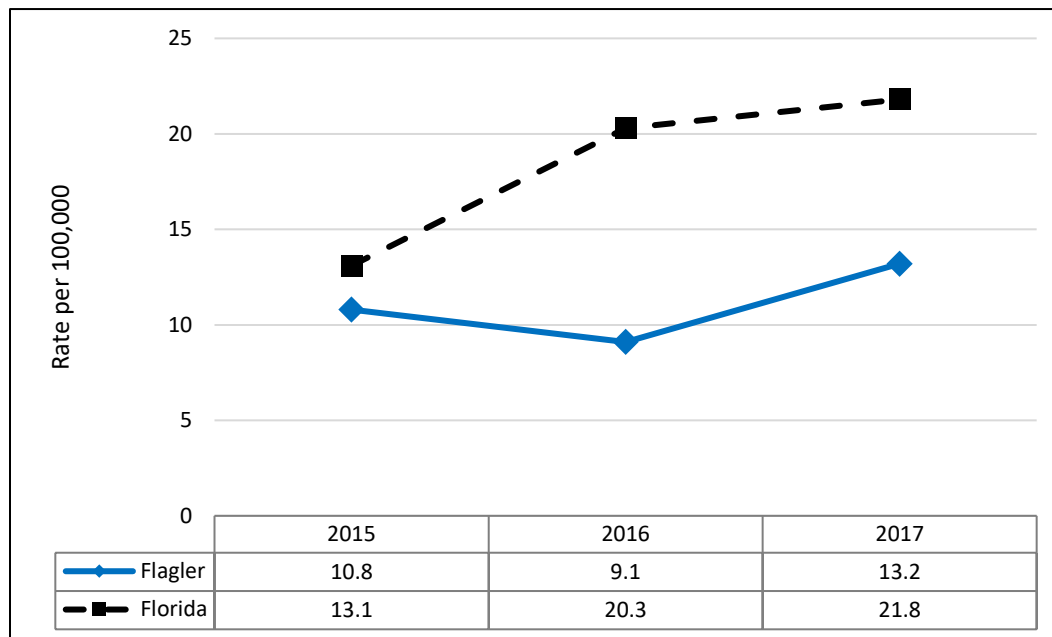
Source: SMA Healthcare

Figure 1.8 Opioid-involved Non-fatal Overdose Hospitalizations Crude Rate



Source: Florida Department of Health, data supplied by UF FROST
Note: Data is provisional

Figure 1.9 Opioid Overdose Age-adjusted Death Rate



Source: Florida Department of Health, data supplied by UF FROST
 Note: Data is provisional

Figure 1.10 Adults Who Are Current Smokers

| Adults who are current smokers, 2016 | Flagler | Florida |
|--------------------------------------|---------|---------|
| | Percent | Percent |
| Total – Overall | 15.5 | 15.5 |
| Men | 11.2 | 17.8 |
| Women | 18.6 | 13.3 |
| Non-Hispanic, White | 16.0 | 17.8 |
| Non-Hispanic, Black | 21.4 | 12.4 |
| Hispanic | NA | 11.7 |
| 18-44 | 26.5 | 17.0 |
| 45-64 | 20.0 | 19.0 |
| 65 & Older | 7.7 | 8.4 |
| < High School | NA | 25.5 |
| High School/GED | 23.0 | 18.7 |
| > High School | 12.8 | 11.5 |
| < \$25,000 | 25.0 | 23.5 |
| \$25,000-\$49,999 | 20.9 | 16.5 |
| \$50,000 or More | 7.8 | 10.3 |

Source: Florida Behavioral Risk Factor Surveillance System
 NA=Not available due to respondent counts of less than 30

Figure 1.11 Adults Who Had Poor Mental Health on 14 or More of the Past 30 Days

| Adults who had poor mental health days on 14 or more of the past 30 days, 2016 | Flagler | Florida |
|--|---------|---------|
| | Percent | Percent |
| Total – Overall | 9.3 | 11.4 |
| Men | 6.9 | 9.5 |
| Women | 11.0 | 13.2 |
| Non-Hispanic, White | 10.0 | 12.2 |
| Non-Hispanic, Black | 11.0 | 10.8 |
| Hispanic | NA | 9.9 |
| 18-44 | 14.4 | 12.5 |
| 45-64 | 11.9 | 13.0 |
| 65 & Older | 5.0 | 7.3 |
| < High School | NA | 15.3 |
| High School/GED | 11.2 | 12.1 |
| > High School | 7.6 | 10.1 |
| < \$25,000 | 20.6 | 17.8 |
| \$25,000-\$49,999 | 7.6 | 11.9 |
| \$50,000 or More | 3.6* | 7.6 |

Source: Florida Behavioral Risk Factor Surveillance System

NA=Not available due to respondent counts of less than 30

*Indicates the difference observed between the county and state measure is statistically significant

Figure 1.12 Adults Who Have a Depressive Disorder

| Adults who have ever been told they have a depressive disorder, 2016 | Flagler | Florida |
|--|---------|---------|
| | Percent | Percent |
| Total – Overall | 12.6 | 14.2 |
| Men | 8.6 | 10.4 |
| Women | 15.4 | 17.8 |
| Non-Hispanic, White | 13.2 | 16.6 |
| Non-Hispanic, Black | 11.0 | 9.8 |
| Hispanic | NA | 12.1 |
| < High School | NA | 19.3 |
| High School/GED | 12.3 | 14.7 |
| > High School | 12.3 | 12.9 |
| < \$25,000 | 24.9 | 20.6 |
| \$25,000-\$49,999 | 10.6 | 14.9 |
| \$50,000 or More | 7.7 | 9.9 |

Source: Florida Behavioral Risk Factor Surveillance System

NA=Not available due to respondent counts of less than 30

Figure 1.13 Average Number of Unhealthy Mental Days in the Past 30 Days

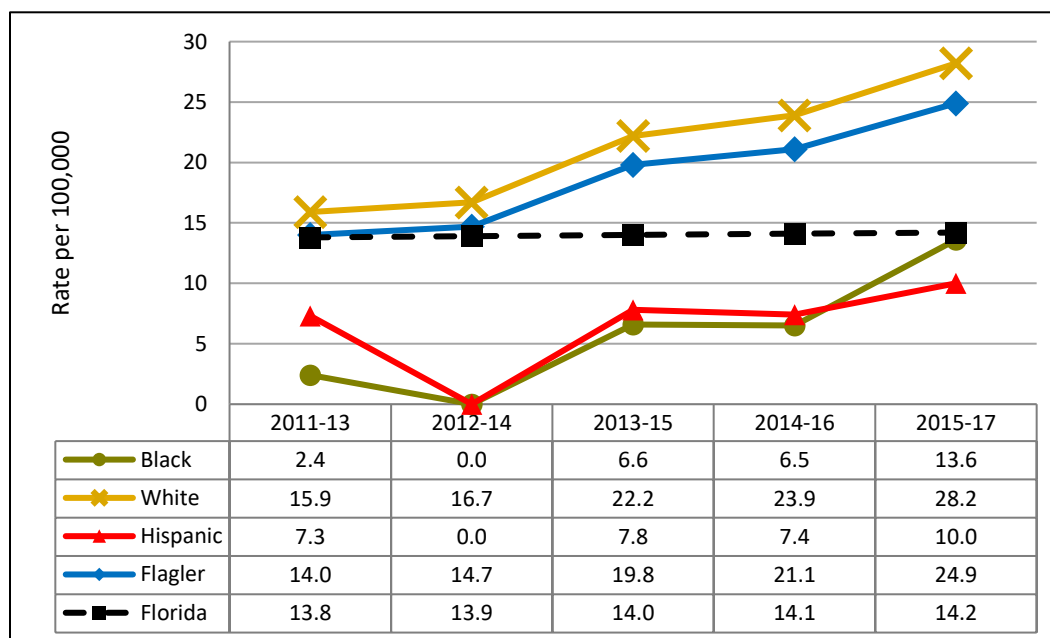
| Average number of unhealthy mental days in the past 30 days, 2016 | Flagler | Florida |
|---|---------|---------|
| | Number | Number |
| Total – Overall | 3.1 | 3.6 |
| Men | 1.9 | 3.0 |
| Women | 3.9 | 4.1 |
| Non-Hispanic, White | 3.3 | 3.8 |
| Non-Hispanic, Black | 3.4 | 3.5 |
| Hispanic | NA | 3.1 |
| 18-44 | 5.0 | 4.0 |
| 45-64 | 3.9 | 3.9 |
| 65 & Older | 1.6 | 2.3 |
| < High School | NA | 4.6 |
| High School/GED | 3.7 | 3.8 |
| > High School | 2.8 | 3.2 |
| < \$25,000 | 6.8 | 5.3 |
| \$25,000-\$49,999 | 2.6 | 3.7 |
| \$50,000 or More | 1.4* | 2.6 |

Source: Florida Behavioral Risk Factor Surveillance System

NA=Not available due to respondent counts of less than 30

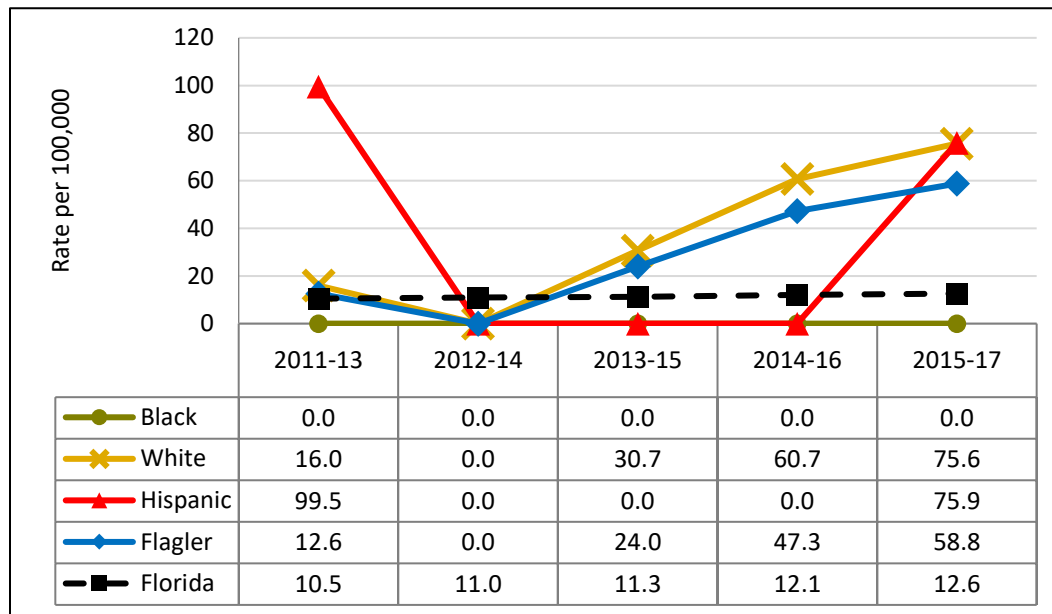
*Indicates the difference observed between the county and state measure is statistically significant

Figure 1.14 Suicide Age-adjusted Death Rate, 3-Year Rolling Rates



Source: Florida Department of Health, Bureau of Vital Statistics

Figure 1.15 Suicide Death Rate, Ages 19-21, 3-Year Rolling Rates



Source: Florida Department of Health, Bureau of Vital Statistics

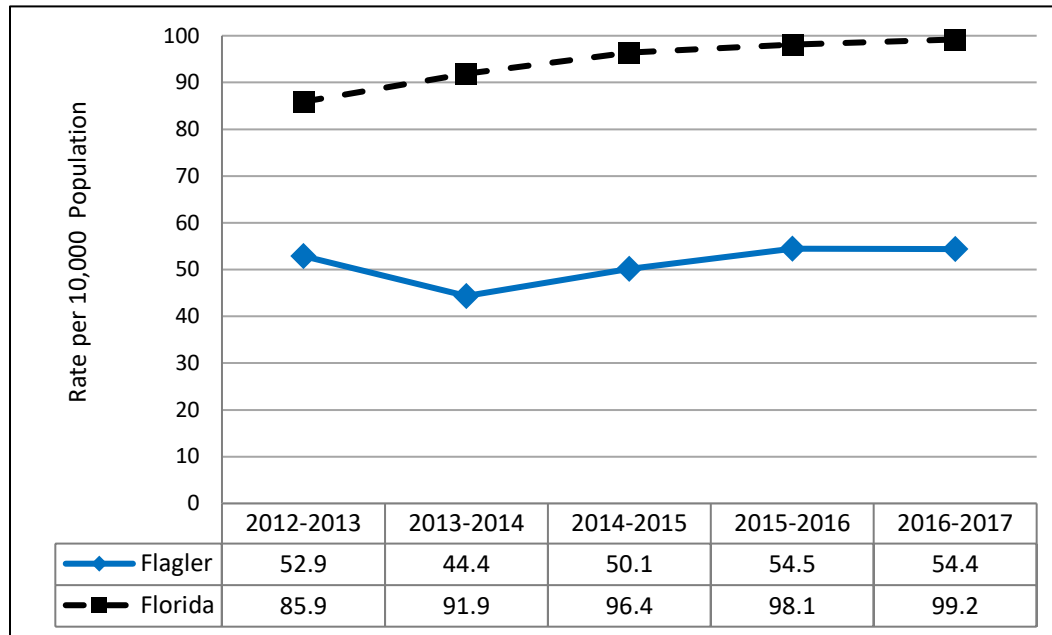
Figure 1.16 Age-adjusted Suicide Death Rate, 3-Year Rolling Rates, by Gender

| Years | Male | | Female | |
|-----------|-------|------|--------|------|
| | Count | Rate | Count | Rate |
| 2011-2013 | 34 | 23.4 | 9 | 5.6 |
| 2012-2014 | 36 | 22.8 | 12 | 7.5 |
| 2013-2015 | 49 | 31.4 | 14 | 9.0 |
| 2014-2016 | 44 | 28.0 | 22 | 14.8 |
| 2015-2017 | 55 | 37.7 | 22 | 13.2 |

Source: Florida Department of Health, Bureau of Vital Statistics

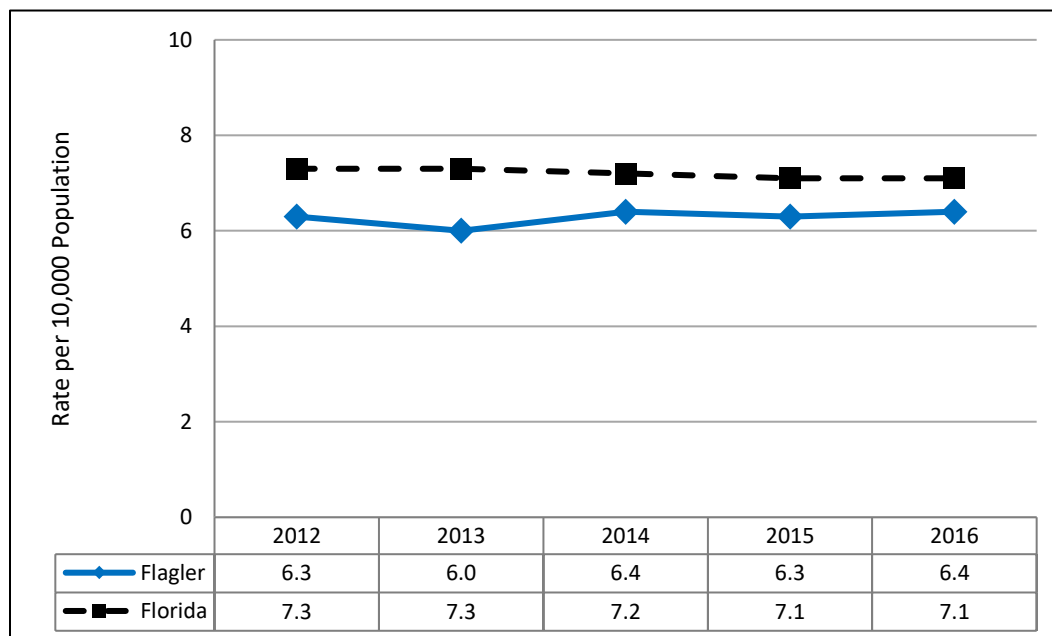
Note: Rate is per 100,000

Figure 1.17 Baker Act Involuntary Exam Initiations (All Ages)



Source: Baker Act Reporting Center, College of Behavioral and Community Sciences, University of South Florida

Figure 1.18 Number of Membership Associations



Source: County Business Patterns

2. Youth Behavioral Health

Mental Health

According to the U.S. Department of Health and Human Services Office of Adolescent Health, important mental health habits—including coping, resilience and good judgment—help adolescents to achieve overall wellbeing and set the stage for positive mental health in adulthood. It is estimated that approximately one in five adolescents has a diagnosable mental disorder, such as depression and/or anxiety disorders and that less than half of adolescents with psychiatric disorders are thought to have received any kind of treatment in the last year.

According to SAMHSA an estimated 1.7 million young adults ages 18 to 25 in the United States had a serious mental illness, and their prognosis was greatly enhanced when the early signs and symptoms were discovered and treated during adolescence. Mental health disorders can disrupt school performance, harm relationships, and lead to suicide (the third leading cause of death among adolescents). Barriers such as not recognizing the symptoms early on, or fear of labeling and stigma regarding mental health disorders, inhibit some adolescents and their families from seeking help.

Substance Use

Substance use among youth can affect growth and development, especially brain development, and can contribute to the development of adult health problems, such as heart disease, high blood pressure, and sleep disorders.

The earlier youth start using substances, the greater their chances of continuing to use substances and developing substance use problems later in life. When teens begin drinking at an early age, they increase the chance of becoming addicted to or continuing to abuse substances later in life.

| Indicators of Concern | | Trend | Comparison | # Impacted |
|-------------------------------|---|-------|------------|------------|
| Alcohol Use | Figure 2.1 and 2.2. Flagler middle and high school students use alcohol at a slightly higher rate than Florida, but the rate has been decreasing since 2008. (same for binge drinking) | ↓ | ↑ | |
| Marijuana Use | Figure 2.5 and 2.6. Flagler middle school students reported a higher rate of marijuana use than Florida and the trend increased between 2016 and 2018. Flagler high school students reported marijuana use increased from 2014-2018. | ↑ | ↑ | |
| Cigarette Use | Figure 2.7 and 2.8. Reported cigarette use among Flagler middle and high school students has declined, but the high school rate is higher than Florida. | ↓ | ↑ | |
| Vaporizer/ E-Cigarette Use | Figure 2.9. The middle and high school use of Vaporizers/E-cigarettes has increased since 2016 and far exceeds cigarette use among middle and high schoolers. (data only collected since 2016) | ↑ | | |

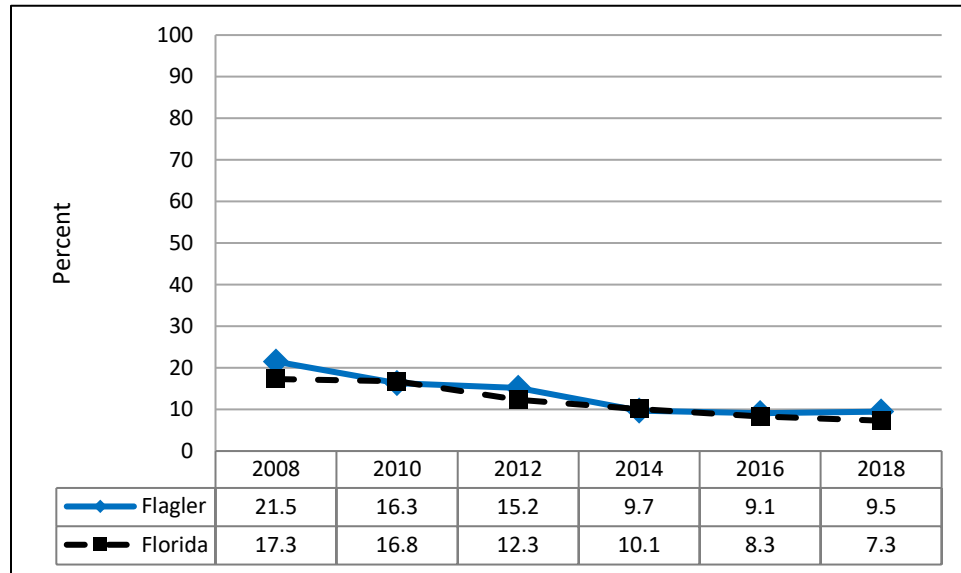
Indicators of Concern

| | | Trend | Comparison | # Impacted |
|----------------------------------|--|-------|------------|------------|
| Suicide | Figure 2.11. Flagler's suicide rate among youth age 12-18 is higher than Florida, peaking in 2013-15 (although a relatively small number/count) | | ↑ | 3 |
| Out-of-School Suspensions | Figure 2.14. Flagler's K-12 Out-of-School Suspension rate is higher than Florida and has been increasing since 2014. | ↑ | ↑ | 1,022 |

Indicators Included:

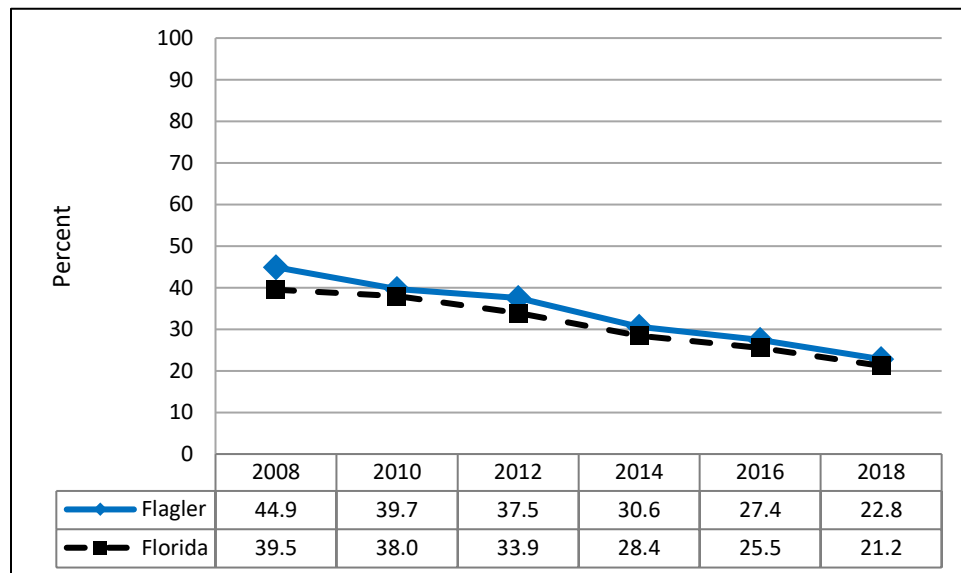
| Indicator | Reference |
|---|-------------|
| Middle School Students Who Used Alcohol in Past 30 Days | Figure 2.1 |
| High School Students Who Used Alcohol in Past 30 Days | Figure 2.2 |
| Middle School Students Reporting Binge Drinking | Figure 2.3 |
| High School Students Reporting Binge Drinking | Figure 2.4 |
| Middle School Students Who used Marijuana/Hashish in the Past 30 Days | Figure 2.5 |
| High School Students Who used Marijuana/Hashish in the Past 30 Days | Figure 2.6 |
| Middle School Students Smoking Cigarettes in the Past 30 Days | Figure 2.7 |
| High School Students Smoking Cigarettes in the Past 30 Days | Figure 2.8 |
| Middle and High School Students Using Vaporizer/E-Cigarette in Past 30 days | Figure 2.9 |
| Children in School Grades K-12 with Emotional/Behavioral Disability | Figure 2.10 |
| Suicide Deaths, Ages 12-18 | Figure 2.11 |
| Non-Fatal Hospitalizations for Self-Inflicted Injuries, Ages 12-18 | Figure 2.12 |
| Delinquency Arrests | Figure 2.13 |
| Out-of-School Suspensions K-12 | Figure 2.14 |

Figure 2.1 Middle School Students Who Used Alcohol in the Past 30 Days



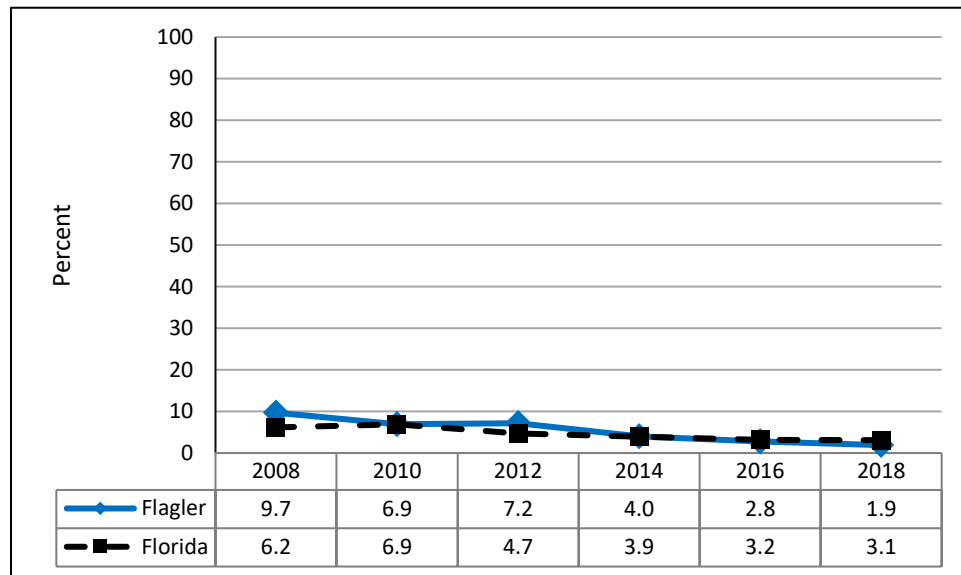
Source: Florida Youth Substance Abuse Survey (FYSAS)

Figure 2.2 High School Students Who Used Alcohol in the Past 30 Days



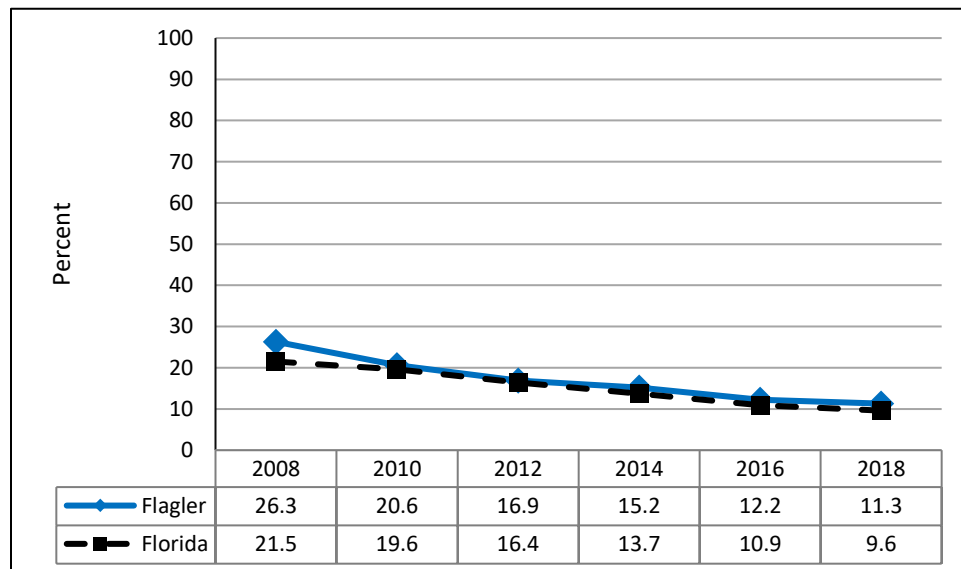
Source: Florida Youth Substance Abuse Survey (FYSAS)

Figure 2.3 Middle School Students Reporting Binge Drinking



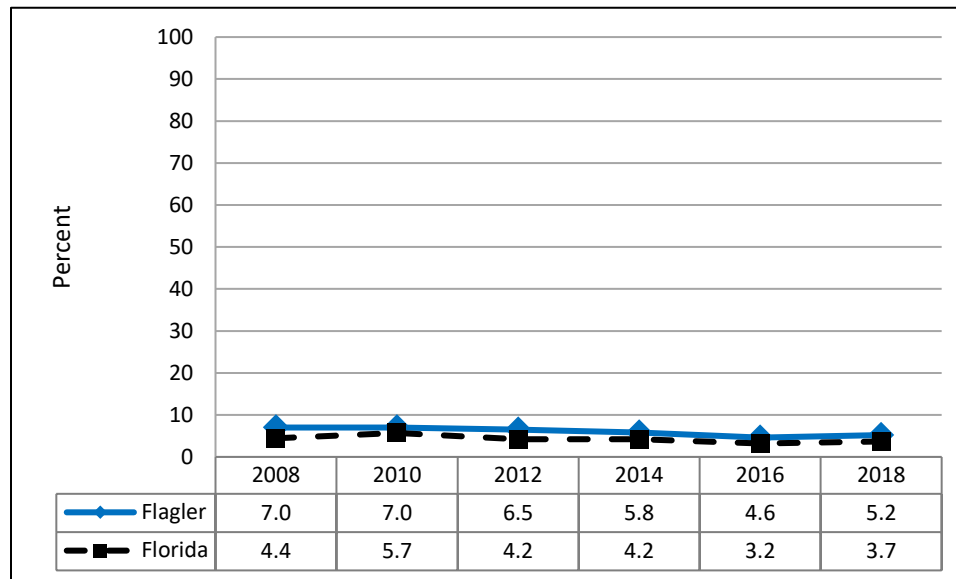
Source: Florida Youth Substance Abuse Survey (FYSAS)

Figure 2.4 High School Students Reporting Binge Drinking



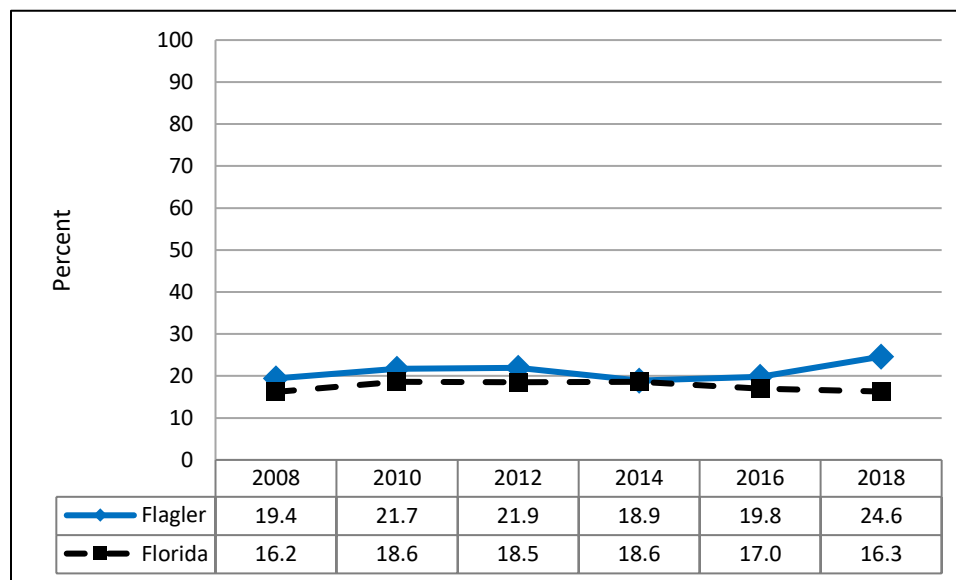
Source: Florida Youth Substance Abuse Survey (FYSAS)

Figure 2.5 Middle School Students Using Marijuana/Hashish in the Past 30 Days



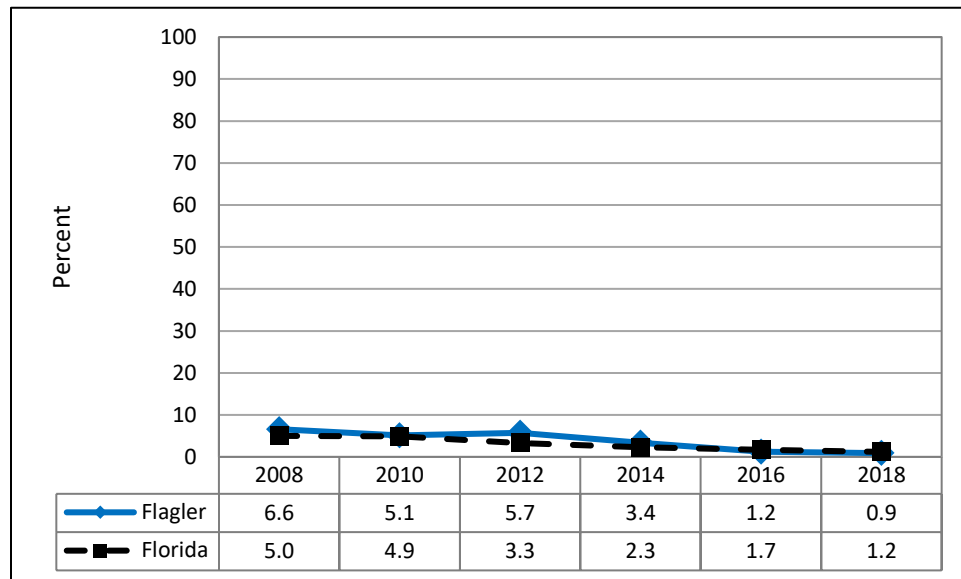
Source: Florida Youth Substance Abuse Survey (FYSAS)

Figure 2.6 High School Students Using Marijuana/Hashish in the Past 30 Days



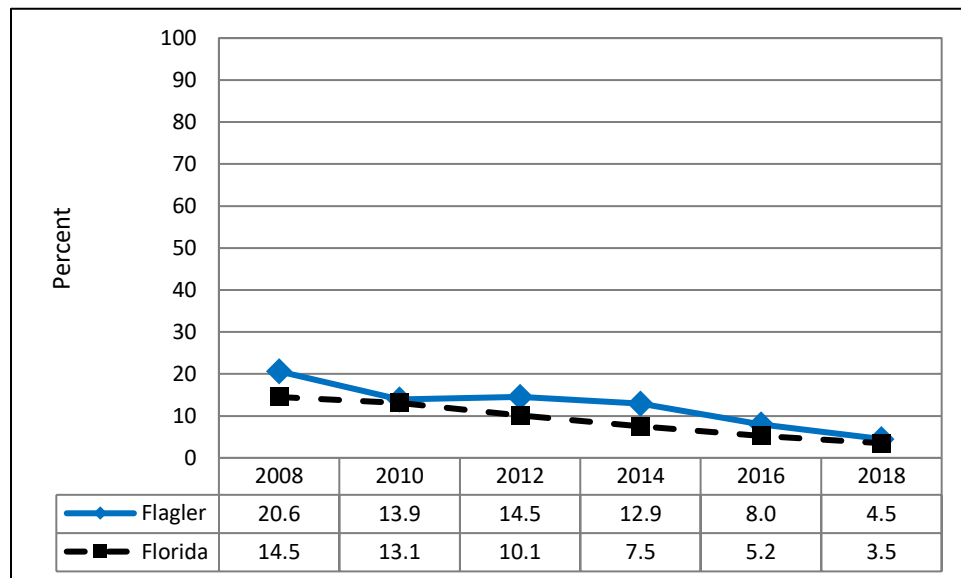
Source: Florida Youth Substance Abuse Survey (FYSAS)

Figure 2.7 Middle School Students Smoking Cigarettes in the Past 30 Days



Source: Florida Youth Tobacco Survey (FYTS)

Figure 2.8 High School Students Smoking Cigarettes in the Past 30 Days



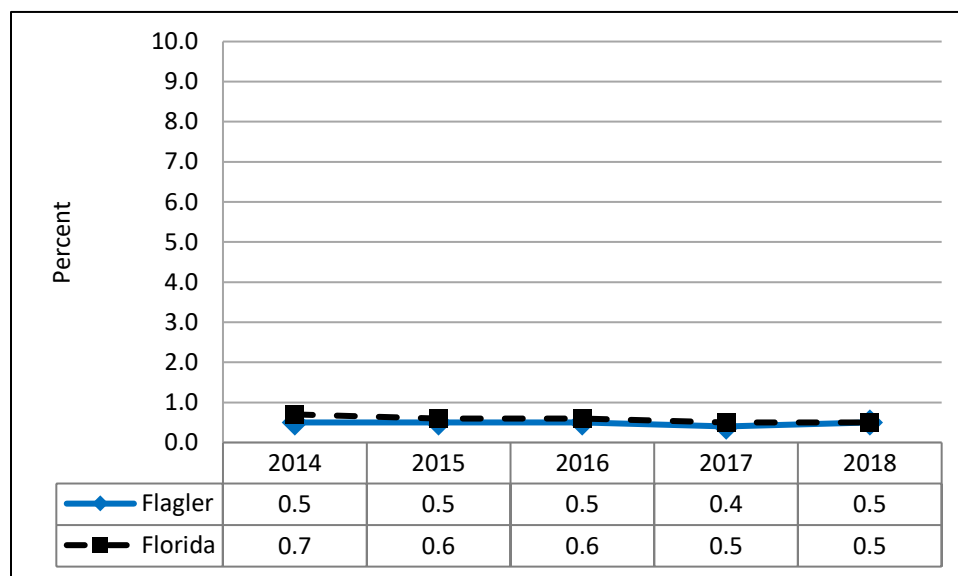
Source: Florida Youth Tobacco Survey (FYTS)

Figure 2.9 Middle and High School Students Using Vaporizer/E-Cigarette in Past 30 days

| Year | Flagler Percent | | Florida Percent | |
|------|-----------------|-------------|-----------------|-------------|
| | Middle School | High School | Middle School | High School |
| 2018 | 6.6 | 19 | 6.4 | 19.2 |
| 2016 | 6.5 | 12.4 | 5.1 | 12.8 |

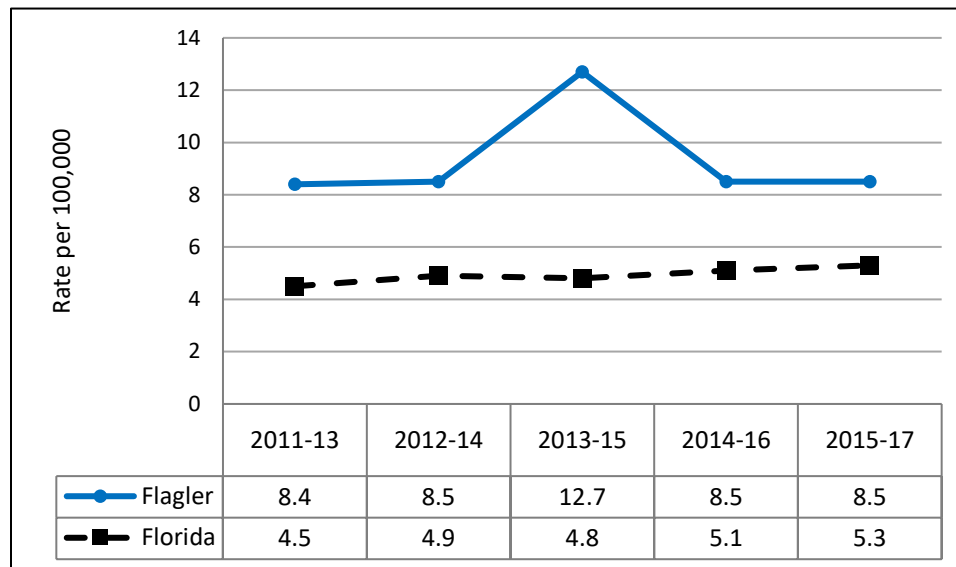
Source: Florida Youth Tobacco Survey (FYTS)

Figure 2.10 Children in School Grades K-12 with Emotional/Behavioral Disability



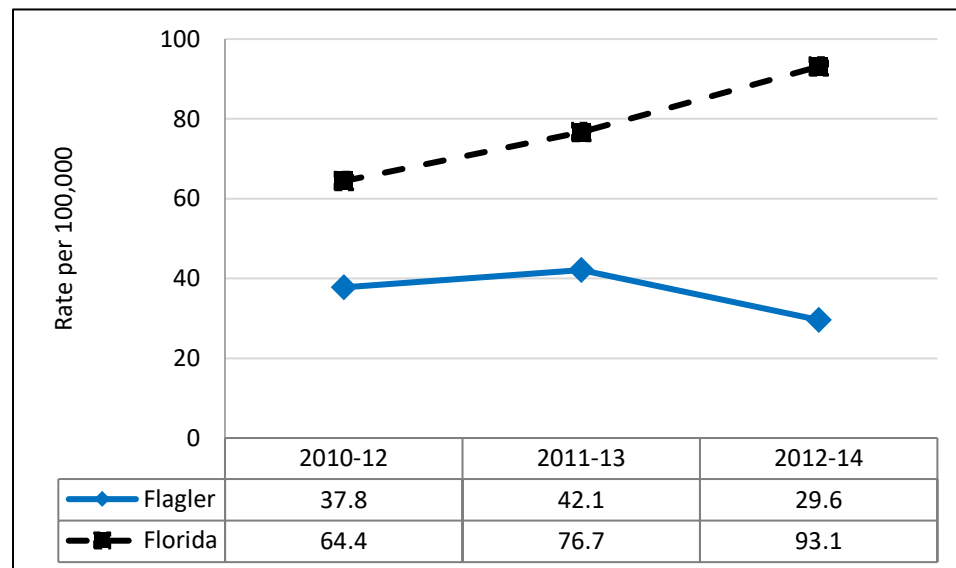
Source: Florida Department of Education, Education Information and Accountability Services (EIAS)

Figure 2.11 Suicide 3-Year Death Rate Ages 12-18



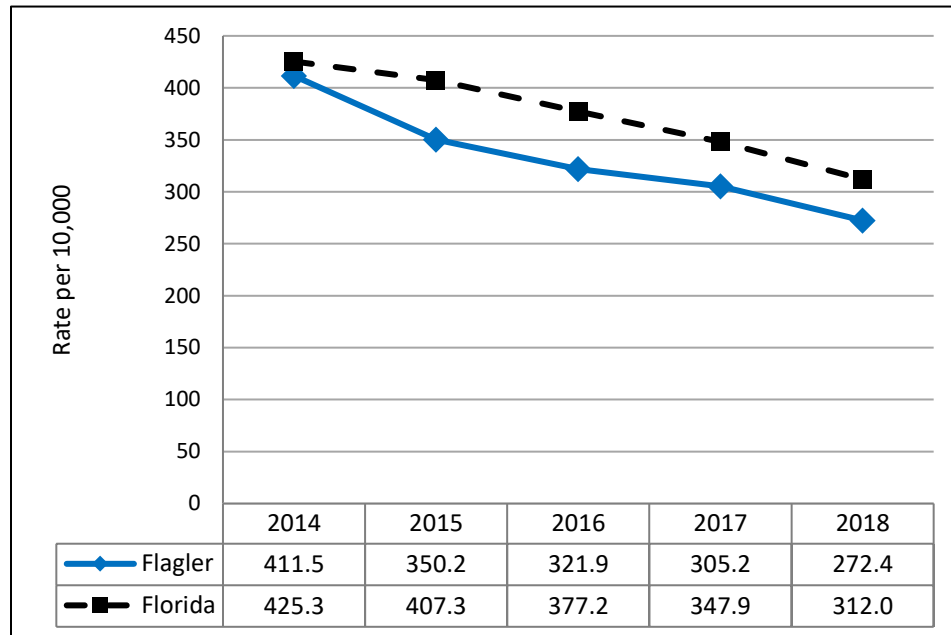
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 2.12 Non-fatal Hospitalizations for Self-inflicted Injuries, Ages 12-18, 3-Year Rolling Rates



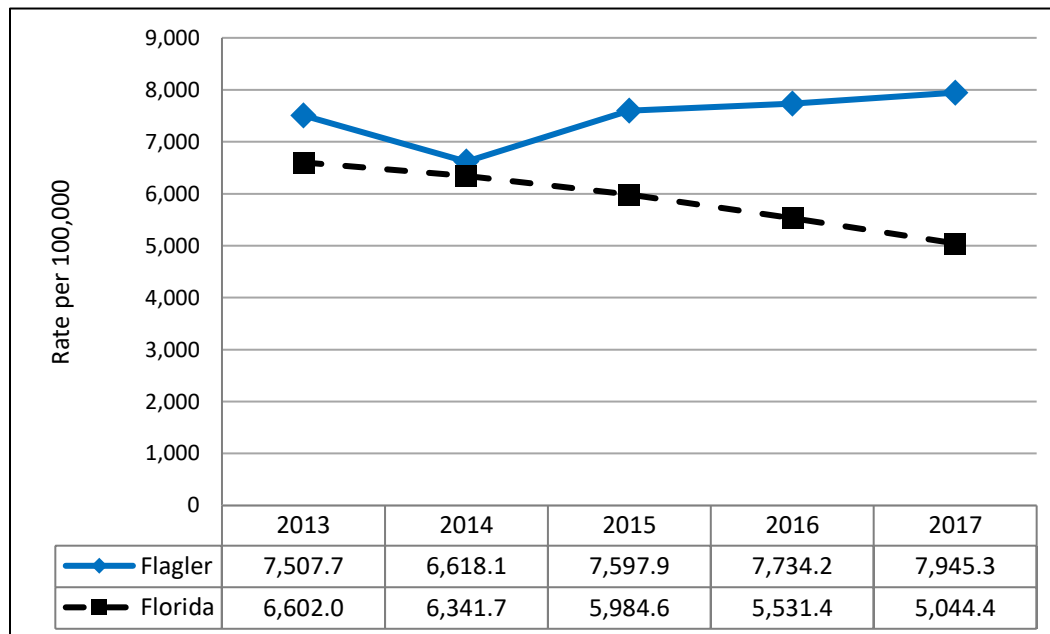
Source: Florida Agency for Health Care Administration (AHCA)

Figure 2.13 Delinquency Arrests



Source: Florida Department of Juvenile Justice

Figure 2.14 Out-of-School Suspensions K-12



Source: Florida Department of Education, Education Information and Accountability Services (EIAS)

3. Chronic Disease: Cardiovascular Diseases and Diabetes (including the shared modifiable risk factors of healthy eating & physical activity)

Chronic diseases and conditions—such as heart disease, stroke, cancer, and diabetes—are among the most common, costly, and preventable of all health problems. These conditions shorten lives, reduce quality of life, and create considerable burden for caregivers.

According to the Centers for Disease Control and Prevention (CDC):

- Six in 10 adults in the U.S. have a chronic disease and four in 10 have two or more.
- Heart Disease, Stroke and Diabetes are three of the eight leading causes of death in Volusia County and account for over 30% of all deaths.

Health risk behaviors contribute significantly to this high prevalence of chronic diseases. Four of these health risk behaviors—lack of exercise or physical activity, poor nutrition, tobacco use, and drinking too much alcohol—cause much of the illness and early death related to chronic diseases and conditions.

| Leading Causes of Death | | # | % |
|-------------------------|-----------------------------------|-----|------|
| 1 | Cancer | 313 | 23.5 |
| 2 | Heart Disease | 290 | 21.7 |
| 3 | Stroke | 100 | 7.5 |
| 4 | Chronic Lower Respiratory Disease | 98 | 7.3 |
| 5 | Unintentional Injury | 63 | 4.7 |
| 6 | Alzheimer's Disease | 43 | 3.2 |
| 7 | Diabetes | 40 | 3.0 |
| 8 | Suicide | 31 | 2.3 |

Heart Disease: The term "heart disease" refers to several types of heart conditions. The most common type of heart disease in the United States is coronary artery disease, which affects the blood flow to the heart. Decreased blood flow can cause a heart attack.

Cerebrovascular Disease or Stroke: A stroke occurs when blood vessels carrying oxygen to the brain become clogged (or burst), thereby cutting off the brain's supply of oxygen. Each year, approximately 795,000 people in the U.S. will suffer a new or recurrent stroke. The risk of stroke more than doubles with each decade of life for those that are 55 and older.

Diabetes: Diabetes is a disease in which blood glucose levels are above normal. Diabetes can cause serious health complications including: heart disease, blindness, kidney failure, and lower-extremity amputations.

Survey Snapshot: What do you feel are barriers for you getting or staying healthy in Flagler County?

#1 Response: It's hard or expensive to cook/eat healthy

Healthy Eating and Physical Activity: Achieving and maintaining a healthy weight is a critical component of overall health and is only achieved through a lifestyle that includes healthy eating, regular physical activity, and balancing the number of calories you consume with the number of calories your body uses.

Regular physical activity can help people manage their weight as well as reduce their risk for chronic disease. According to guidelines set by the Centers for Disease Control and Prevention (CDC), children and adolescents should get 60 minutes or more of physical activity per day, and adults 18 years and older should get 150 minutes of physical activity per week. Most people do not get the recommended

amount of daily activity. Regular physical activity has a wide array of health benefits including weight control, muscle and bone strengthening, improved mental health and mood, and improved life expectancy.

The availability of healthy, affordable foods contributes to a person's diet and risk of related chronic disease. According to the CDC, fewer than one in ten children and adults eat the recommended daily amount of vegetables.

Indicators of Concern

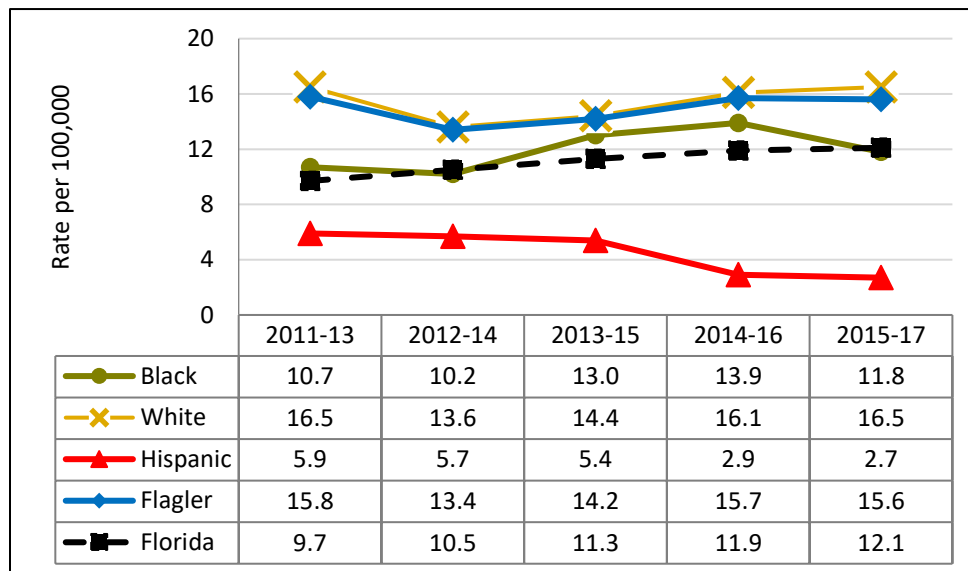
| | | Trend | Comparison | # Impacted |
|--------------------------------------|---|-------|------------|------------|
| Heart Failure Death | Figure 3.1. The Flagler death rate for heart failure is higher than Florida and highest for white individuals. | | ↑ | 33 |
| Heart Failure Hospitalization | Figure 3.2. Flagler hospitalization rates for Congestive Heart Failure are lower than Florida except among black individuals—that rate is higher. | | ↑ | 2,135 |
| Stroke Hospitalization | Figure 3.7. The Flagler hospitalization rate for stroke is higher for black individuals than other groups. | | ↑ | 422 |
| Stroke Death | Figure 3.4. The Flagler death rate for stroke is increasing for Flagler and is increasing significantly for Hispanic individuals. The Flagler stroke death rate has been higher than Florida for the past three years. | ↑ | ↑ | 113 |
| Diabetes | Figure 3.8. The percent of adults with diabetes in 2016 is higher in Flagler than Florida. | | ↑ | |
| Obesity | Figure 3.24. The percent of adults who are obese increased in Flagler between 2013 and 2016. | ↑ | | |
| Premature Death | Figure 3.28. The Years of Potential Life Lost (YPLL) rate for Flagler County was higher than Florida for 4 of the 5 past years and increased from 2016 to 2017. | ↑ | ↑ | |

Indicators Included:

| Indicator | Reference |
|---|-------------|
| Heart Failure Age-adjusted Death Rate | Figure 3.1 |
| Congestive Heart Failure Age-adjusted Hospitalization Rate | Figure 3.2 |
| Age-adjusted Heart Failure Death Rate, by Gender | Figure 3.3 |
| Coronary Heart Disease Age-adjusted Hospitalization Rate | Figure 3.4 |
| Coronary Heart Disease Age-adjusted Death Rate | Figure 3.5 |
| Coronary Heart Disease Age-adjusted Death Rate, by Gender | Figure 3.6 |
| Stroke Age-adjusted Hospitalization Rate | Figure 3.7 |
| Stroke Age-adjusted Death Rate | Figure 3.8 |
| Stroke Age-adjusted Death Rate, by Gender | Figure 3.9 |
| Diabetes Age-adjusted Death Rates | Figure 3.10 |
| Preventable Hospitalizations Under 65 from Diabetes Per 100,000 | Figure 3.11 |

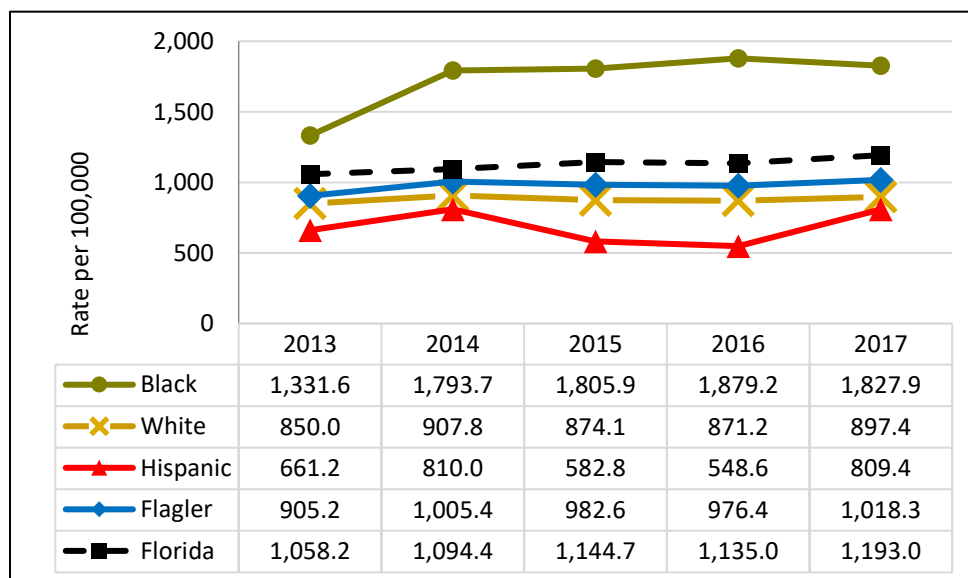
| Indicator | Reference |
|---|------------------|
| Diabetes Hospitalizations, Ages 12-18 | Figure 3.12 |
| Adults with Diagnosed Diabetes | Figure 3.13 |
| Diabetes Age-adjusted Death Rate, by Gender | Figure 3.14 |
| Diabetic Medicare Enrollees ages 65-75 that Receive HbA1c Monitoring | Figure 3.15 |
| Middle School and High School Students Without Sufficient Vigorous Physical Activity | Figure 3.16 |
| Adults Who Meet Muscle Strengthening Recommendations | Figure 3.17 |
| Adults Who Are Inactive or Insufficiently Active | Figure 3.18 |
| WIC Children >=2 Years Who Are Overweight or Obese | Figure 3.19 |
| Middle and High School Student Weight | Figure 3.20 |
| Middle School Students Reporting BMI at or above 95th percentile | Figure 3.21 |
| High School Students Reporting BMI at or above 95th percentile | Figure 3.22 |
| Adults Who Are Overweight | Figure 3.23 |
| Adults Who Are Obese | Figure 3.24 |
| Adults Who Are at a Healthy Weight | Figure 3.25 |
| Adults Who Said Their Overall Health Was “Good” to “Excellent” | Figure 3.26 |
| Average Number of Unhealthy Physical Days in the Past 30 Days | Figure 3.27 |
| Premature Death – Years of Potential Life Lost (YPLL) | Figure 3.28 |
| Preventable Hospital Stays – Number of Hospital Stays for Ambulatory-Care Sensitive Conditions per 100,000 Medicare Enrollees | Figure 3.29 |
| Preventable Hospitalizations Under Age 65 from All Conditions | Figure 3.30 |
| Access to Exercise Opportunities | Figure 3.31 |

Figure 3.1 Heart Failure Age-Adjusted Death Rate, 3-Year Rolling Rates



Source: Florida Department of Health, Bureau of Vital Statistics

Figure 3.2 Congestive Heart Failure Age-Adjusted Hospitalization Rate



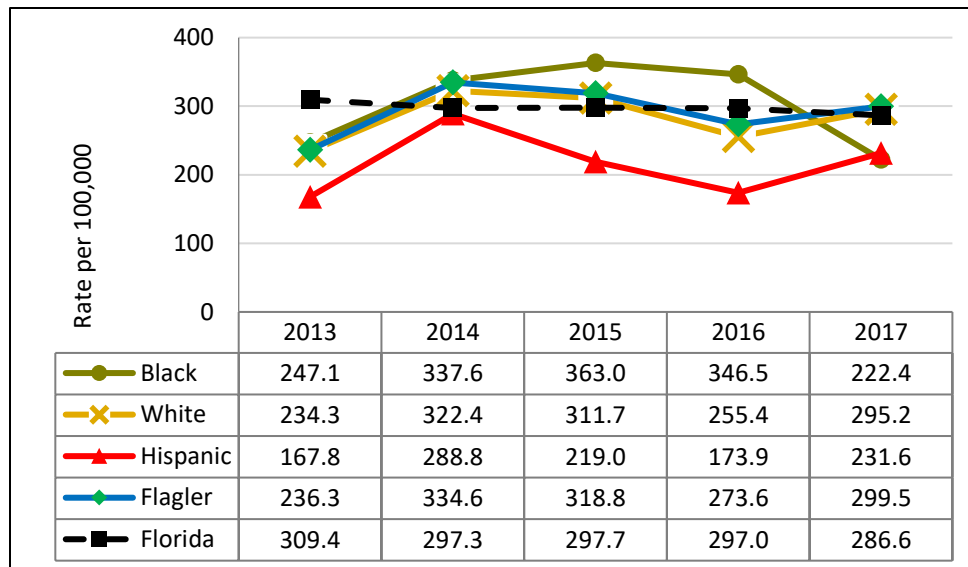
Source: Florida Agency for Health Care Administration (AHCA)

Figure 3.3 Age-adjusted Heart Failure Death Rate, 3-Year Rolling Rates, by Gender

| Years | Male | | Female | |
|---------|-------|------|--------|------|
| | Count | Rate | Count | Rate |
| 2011-13 | 40 | 18.4 | 39 | 13.7 |
| 2012-14 | 37 | 15.3 | 35 | 11.9 |
| 2013-15 | 44 | 17.0 | 39 | 11.8 |
| 2014-16 | 45 | 16.9 | 49 | 14.3 |
| 2015-17 | 49 | 17.8 | 49 | 13.6 |

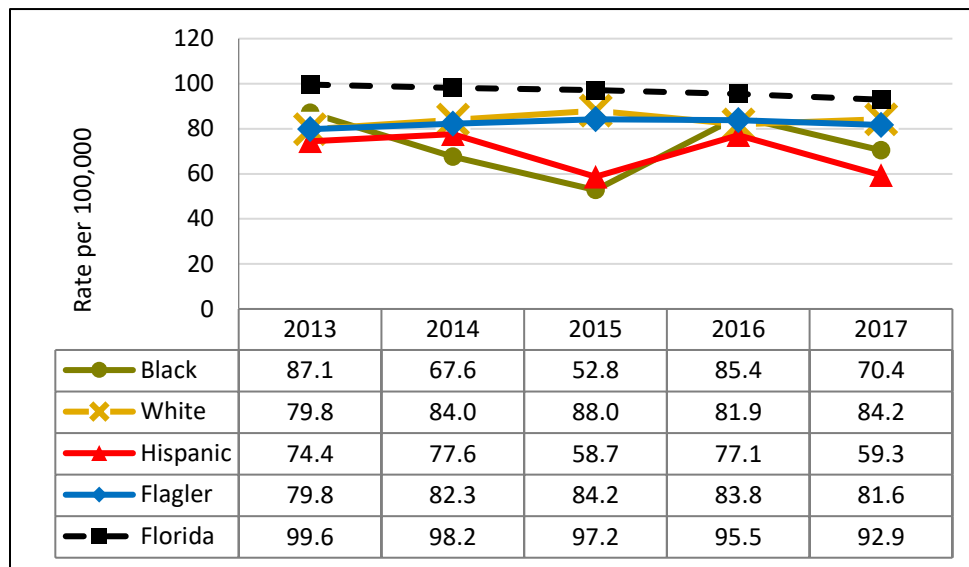
Source: Florida Department of Health, Bureau of Vital Statistics
Note: Rates are per 100,000

Figure 3.4 Coronary Heart Disease Age-adjusted Hospitalization Rate



Source: Florida Agency for Health Care Administration (AHCA)

Figure 3.5 Coronary Heart Disease Age-adjusted Death Rate



Source: Florida Department of Health, Bureau of Vital Statistics

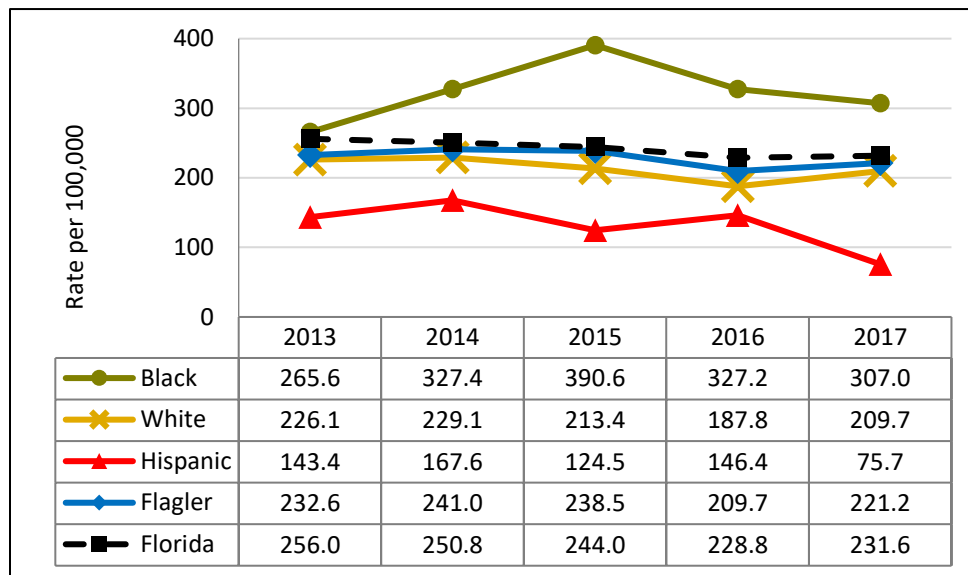
Figure 3.6 Coronary Heart Disease Age-adjusted Death Rate, 3-Year Rolling Rates, by Gender

| Years | Male | | Female | |
|---------|-------|-------|--------|------|
| | Count | Rate | Count | Rate |
| 2011-13 | 242 | 106.8 | 135 | 47.6 |
| 2012-14 | 262 | 110.1 | 147 | 49.5 |
| 2013-15 | 282 | 115.7 | 163 | 53.0 |
| 2014-16 | 286 | 112.0 | 187 | 58.2 |
| 2015-17 | 286 | 106.7 | 211 | 62.0 |

Source: Florida Department of Health, Bureau of Vital Statistics

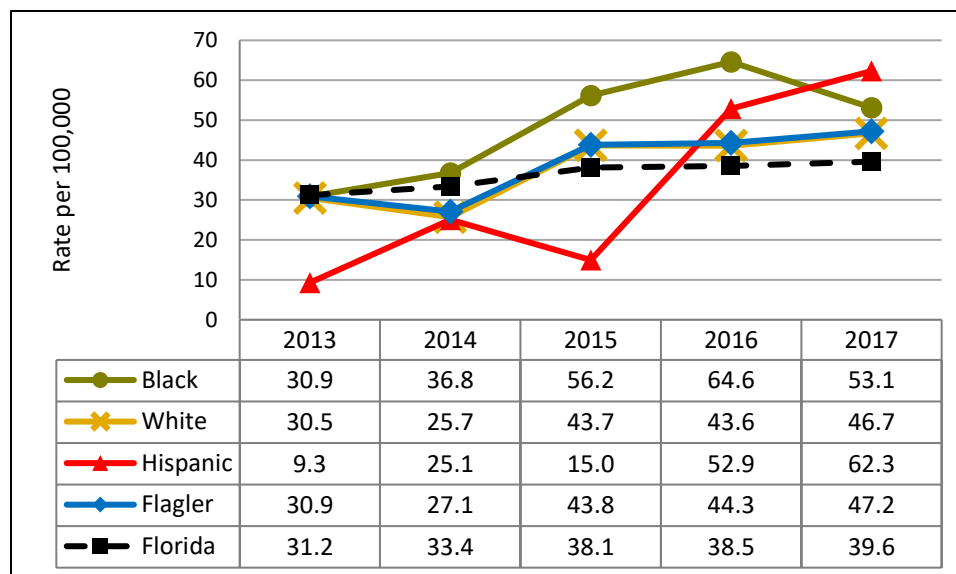
Note: Rates are per 100,000

Figure 3.7 Stroke Age-adjusted Hospitalization Rate



Source: Florida Agency for Health Care Administration (AHCA)

Figure 3.8 Stroke Age-adjusted Death Rate



Source: Florida Department of Health, Bureau of Vital Statistics

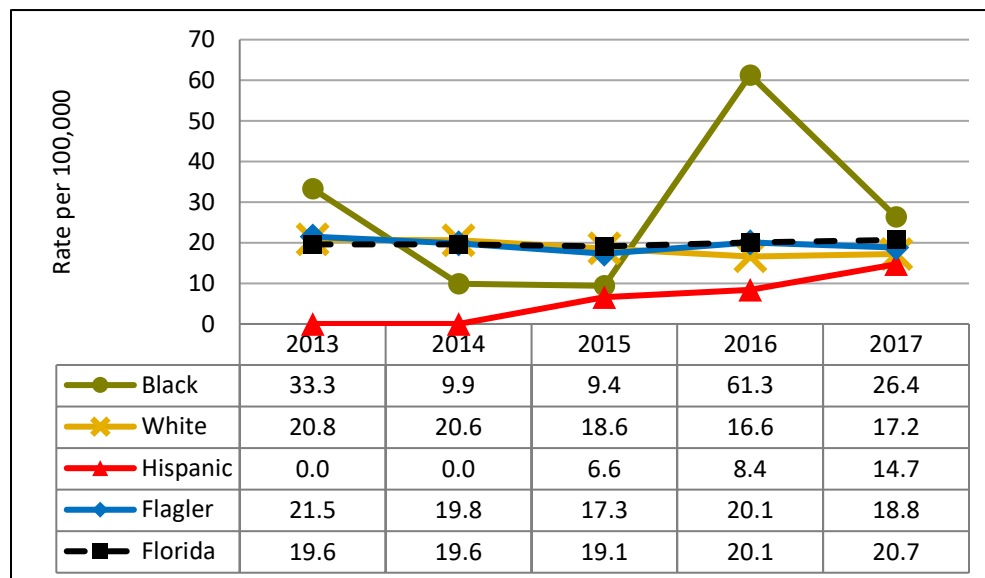
Figure 3.9 Stroke Age-adjusted Death Rate, 3-Year Rolling Rates, by Gender

| Years | Male | | Female | |
|---------|-------|------|--------|------|
| | Count | Rate | Count | Rate |
| 2011-13 | 68 | 30.3 | 87 | 30.7 |
| 2012-14 | 60 | 24.4 | 93 | 30.8 |
| 2013-15 | 77 | 30.9 | 113 | 36.7 |
| 2014-16 | 94 | 36.7 | 132 | 39.7 |
| 2015-17 | 115 | 42.7 | 159 | 45.9 |

Source: Florida Department of Health, Bureau of Vital Statistics

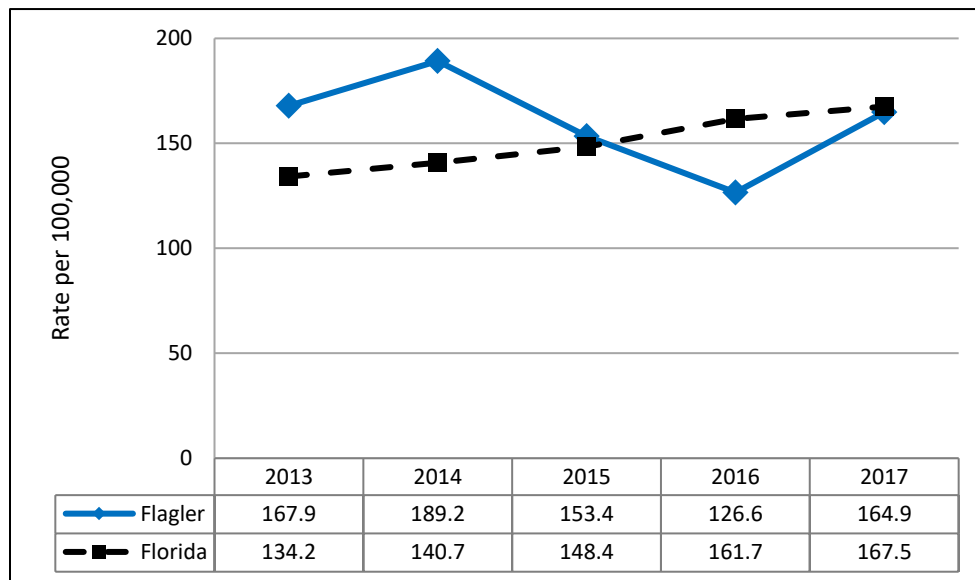
Note: Rates are per 100,000

Figure 3.10 Diabetes Age-Adjusted Death Rates



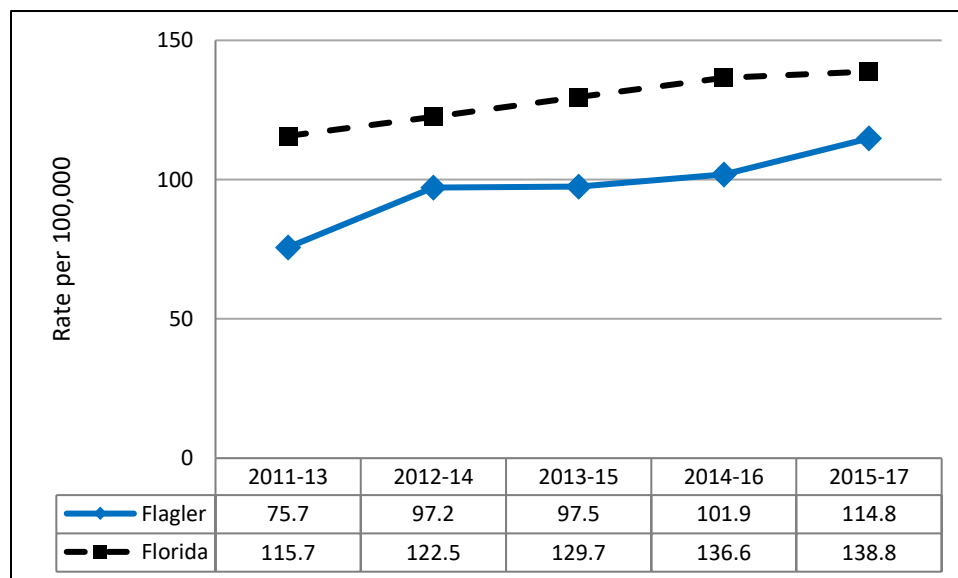
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 3.11 Preventable Hospitalizations Adults Under 65 from Diabetes



Source: Florida Agency for Health Care Administration

Figure 3.12 Diabetes Hospitalizations Ages 12-18, 3-Year Rolling Rates



Source: Florida Agency for Health Care Administration (AHCA)

Figure 3.13 Adults with Diagnosed Diabetes

| Adults who have ever been told they had diabetes, 2016 | Flagler | Florida |
|--|---------|---------|
| | Percent | Percent |
| Total – Overall | 13.6 | 11.8 |
| Men | 18.0 | 12.5 |
| Women | 10.5 | 11.0 |
| Non-Hispanic, White | 11.7 | 11.5 |
| Non-Hispanic, Black | 32.8 | 14.5 |
| Hispanic | NA | 10.9 |
| 18-44 | 2.3 | 3.4 |
| 45-64 | 10.4 | 13.4 |
| 65 & Older | 20.9 | 23.5 |
| < High School | NA | 18.6 |
| High School/GED | 11.3 | 12.6 |
| > High School | 13.5 | 9.7 |
| < \$25,000 | 13.9 | 16.6 |
| \$25,000-\$49,999 | 13.9 | 11.9 |
| \$50,000 or More | 14.3 | 8.0 |

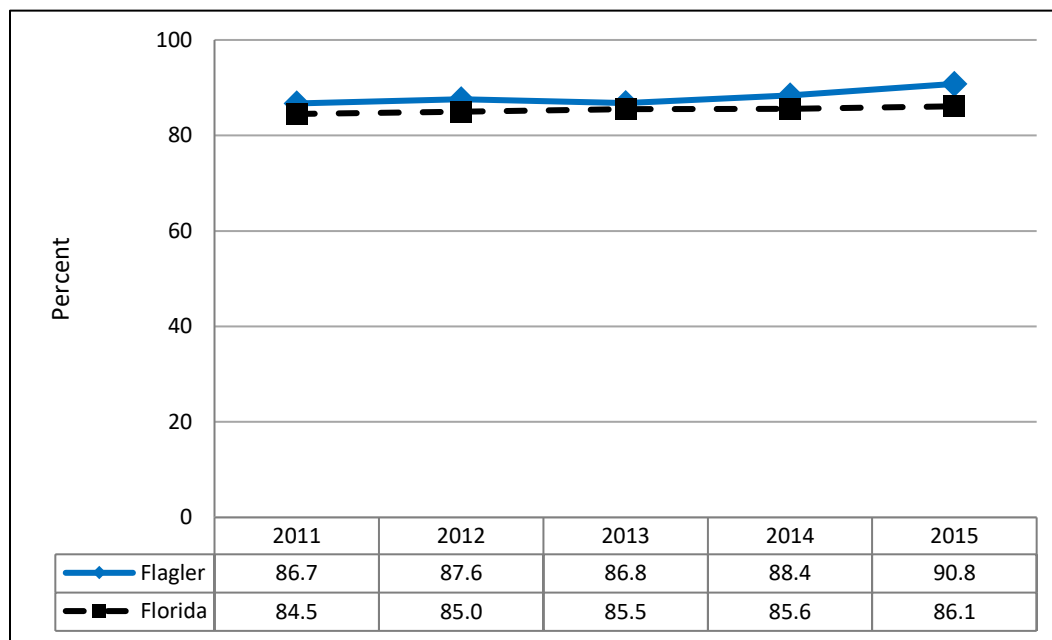
Source: Florida Behavioral Risk Factor Surveillance System
NA=Not available due to respondent counts of less than 30

Figure 3.14 Diabetes Age-adjusted Death Rate, 3-Year Rolling Rates, by Gender

| Years | Male | | Female | |
|---------|-------|------|--------|------|
| | Count | Rate | Count | Rate |
| 2011-13 | 66 | 28.7 | 49 | 17.2 |
| 2012-14 | 68 | 29.5 | 49 | 17.1 |
| 2013-15 | 74 | 28.9 | 36 | 11.6 |
| 2014-16 | 75 | 28.0 | 31 | 11.1 |
| 2015-17 | 74 | 25.9 | 37 | 12.5 |

Source: Florida Department of Health, Bureau of Vital Statistics
Note: Rates are per 100,000

Figure 3.15 Diabetic Medicare Enrollees Ages 65-75 that Receive HbA1c Monitoring



Source: Dartmouth Atlas of Health Care

Figure 3.16 Middle School and High School Students Without Sufficient Vigorous Physical Activity

| Students Without Sufficient Vigorous Physical Activity | Flagler 2014 | Florida 2014 | Flagler 2016 | Florida 2016 |
|--|--------------|--------------|--------------|--------------|
| | Percent | Percent | Percent | Percent |
| Middle School Students | 74.5 | 75.2 | 74.6 | 78.3 |
| High School Students | 76.0 | 78.5 | 78.6 | 80.6 |

Source: Florida Youth Tobacco Survey (FYTS)

Figure 3.17 Adults Who Meet Muscle Strengthening Recommendations

| Adults who meet muscle strengthening | Flagler | Florida |
|--------------------------------------|---------|---------|
| | Percent | Percent |
| Total – Overall | 31.7 | 38.2 |
| Men | 35.8 | 42.9 |
| Women | 28.4 | 33.5 |
| Non-Hispanic, White | 32.5 | 38.0 |
| Non-Hispanic, Black | NA | 38.5 |
| Hispanic | NA | 37.2 |
| 18-44 | 41.5 | 45.1 |
| 45-64 | 35.7 | 34.3 |
| 65 & Older | 24.8 | 31.0 |
| < High School | NA | 23.9 |
| High School/GED | 28.2 | 36.5 |
| > High School | 32.7 | 41.1 |
| < \$25,000 | 31.4 | 31.8 |
| \$25,000-\$49,999 | 33.0 | 37.8 |
| \$50,000 or More | 28.5* | 42.1 |

Source: Florida Behavioral Risk Factor Surveillance System

NA=Not available due to respondent counts of less than 30

*Indicates the difference observed between the county and state measure is statistically significant

Figure 3.18 Adults Who Are Inactive or Insufficiently Active

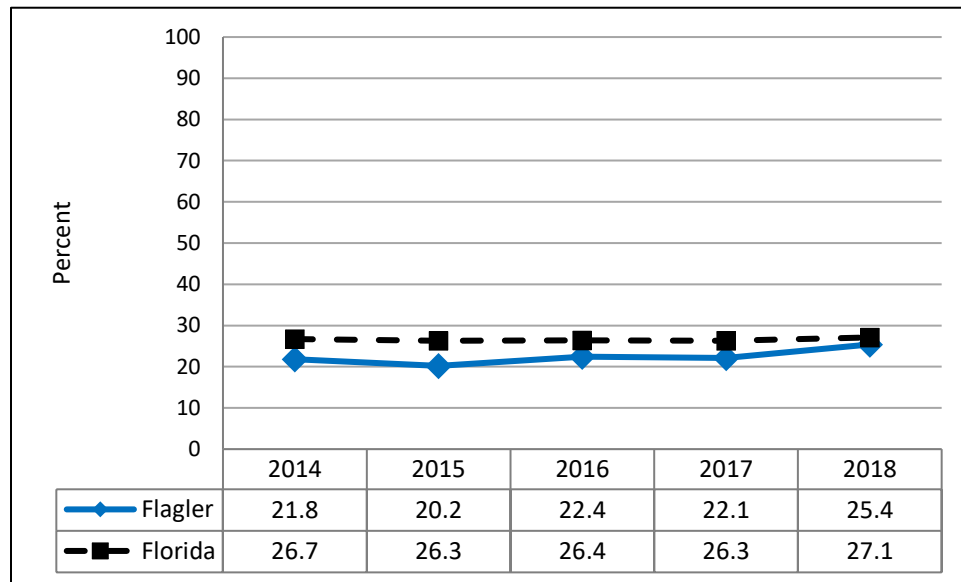
| Adults who are inactive or insufficiently active, 2016 | Flagler | Florida |
|--|---------|---------|
| | Percent | Percent |
| Total – Overall | 47.3* | 56.7 |
| Men | 37.4* | 53.5 |
| Women | 54.1 | 59.7 |
| Non-Hispanic, White | 45.0 | 51.7 |
| Non-Hispanic, Black | 64.6 | 61.7 |
| Hispanic | NA | 65.3 |
| 18-44 | 56.3 | 55.9 |
| 45-64 | 43.8* | 58.4 |
| 65 & Older | 46.2 | 55.9 |
| < High School | NA | 73.3 |
| High School/GED | 58.3 | 63.1 |
| > High School | 41.1 | 48.4 |
| < \$25,000 | 55.9 | 67.5 |
| \$25,000-\$49,999 | 56.0 | 57.6 |
| \$50,000 or More | 28.8* | 42.2 |

Source: Florida Behavioral Risk Factor Surveillance System

NA=Not available due to respondent counts of less than 30

*Indicates the difference observed between the county and state measure is statistically significant

Figure 3.19 WIC Children >= 2 Years Who are Overweight or Obese



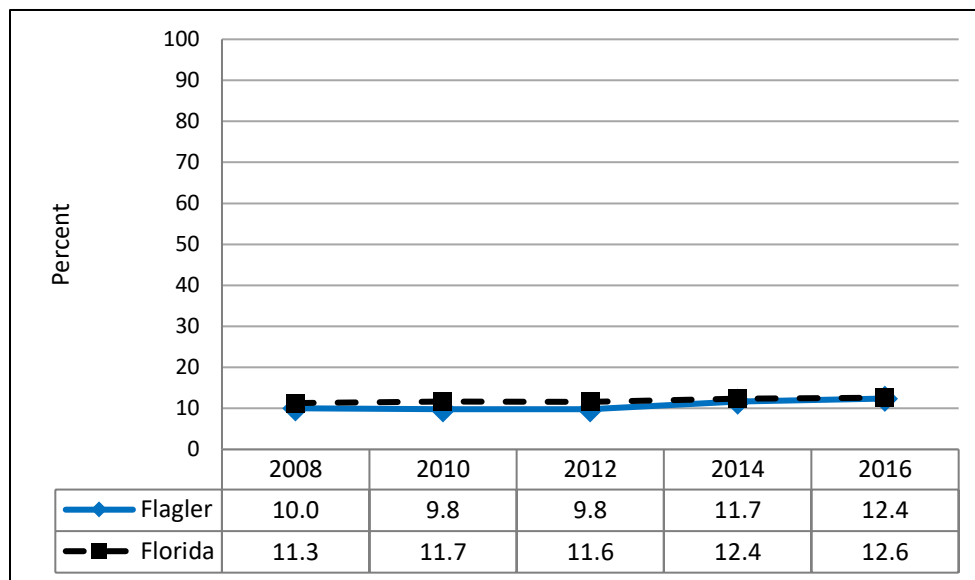
Source: Florida Department of Health, WIC and Nutrition Services

Figure 3.20 Middle and High School Student Weight

| Middle and High School Student Weight | Flagler 2014 | | Florida 2014 | | Flagler 2016 | | Florida 2016 | |
|---------------------------------------|---------------|-------------|---------------|-------------|---------------|-------------|---------------|-------------|
| | Middle School | High School | Middle School | High School | Middle School | High School | Middle School | High School |
| | Percent | | Percent | | Percent | | Percent | |
| Healthy Weight | 69.5 | 71.0 | 65.9 | 68.8 | 65.2 | 68.3 | 65.3 | 67.1 |
| Underweight | 4.3 | 3.9 | 5.4 | 3.4 | 7.9 | 4.0 | 5.2 | 3.6 |
| Overweight | 14.4 | 13.9 | 16.3 | 15.5 | 14.5 | 15.5 | 16.9 | 15.9 |
| Obese | 11.7 | 11.2 | 12.4 | 12.3 | 12.4 | 12.3 | 12.6 | 13.3 |

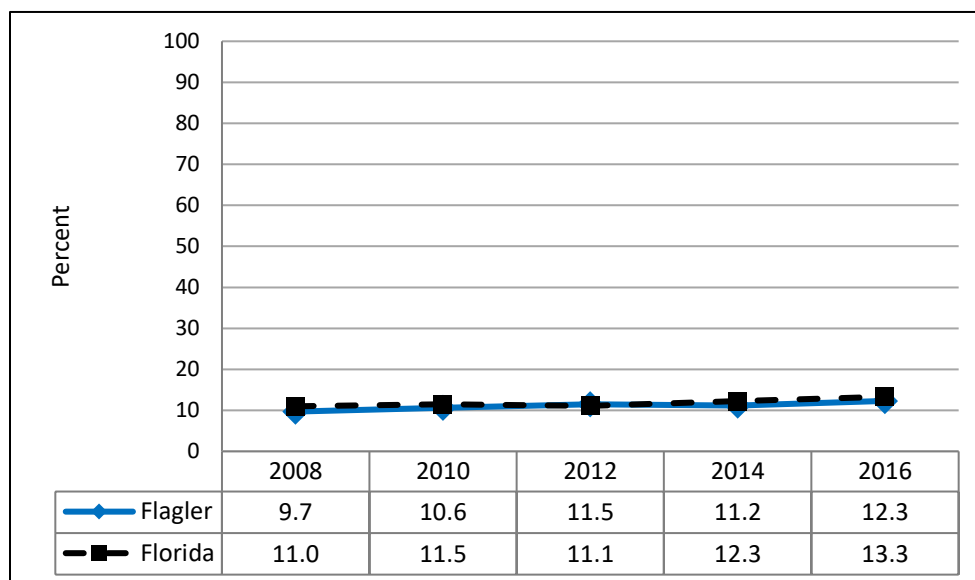
Source: Florida Youth Tobacco Survey (FYTS)

Figure 3.21 Middle School Students with BMI At or Above the 95th Percentile



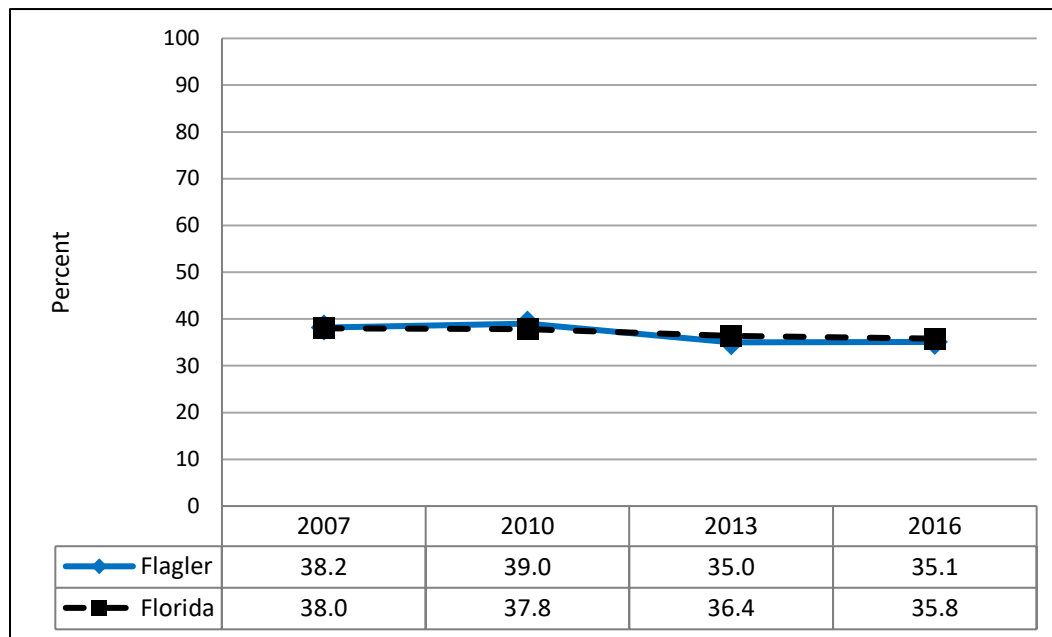
Source: Florida Department of Health, Bureau of Epidemiology

Figure 3.22 High School Students with BMI At or Above the 95th Percentile



Source: Florida Department of Health, Bureau of Epidemiology

Figure 3.23 Adults Who Are Overweight

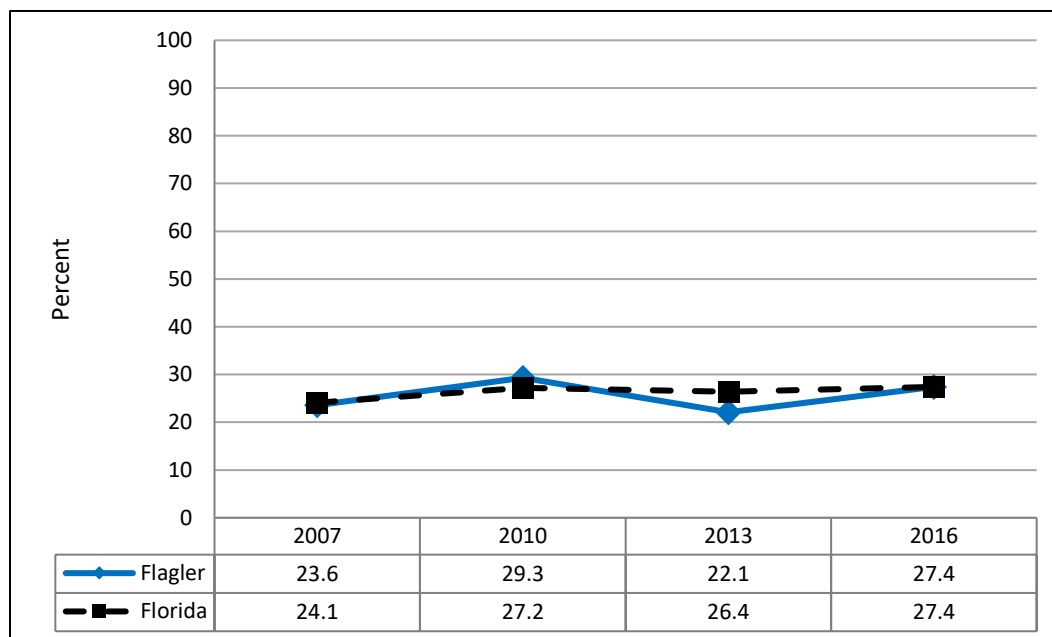


Source: Florida Behavioral Risk Factor Surveillance System

Note: Black=Non-Hispanic Black; White=Non-Hispanic White

Note: Blank cells indicate a sample size less than 30, which would yield statistically unreliable estimates

Figure 3.24 Adults Who Are Obese

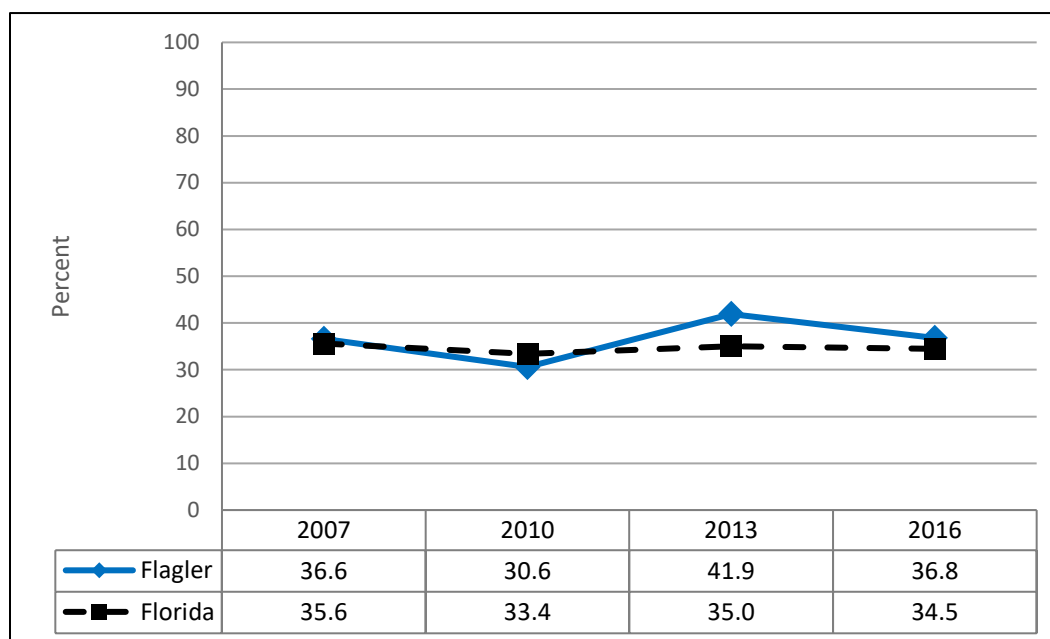


Source: Florida Behavioral Risk Factor Surveillance System

Note: Black=Non-Hispanic Black; White=Non-Hispanic White

Note: Blank cells indicate a sample size less than 30, which would yield statistically unreliable estimates

Figure 3.25 Adults Who Have a Healthy Weight



Source: Florida Behavioral Risk Factor Surveillance System

Note: Black=Non-Hispanic Black; White=Non-Hispanic White

Note: No data indicates sample size less than 30 which would yield statistically unreliable estimates

Figure 3.26 Adults Who Said Their Overall Health Was “Good” to “Excellent”

| Adults who said their overall health was “good” to “excellent”, 2016 | Flagler | Florida |
|---|---------|---------|
| | Percent | Percent |
| Total – Overall | 85.2* | 80.5 |
| Men | 87.5 | 81.4 |
| Women | 83.5 | 79.7 |
| Non-Hispanic, White | 84.6 | 82.3 |
| Non-Hispanic, Black | 90.5 | 81.3 |
| Hispanic | NA | 74.8 |
| 18-44 | 92.1 | 86.1 |
| 45-64 | 83.6 | 77.1 |
| 65 & Older | 83.3* | 75.7 |
| < High School | NA | 57.3 |
| High School/GED | 80.2 | 78.9 |
| > High School | 88.3 | 87.1 |
| < \$25,000 | 72.6 | 65.4 |
| \$25,000-\$49,999 | 88.1 | 83.2 |
| \$50,000 or More | 90.7 | 91.6 |

Source: Florida Behavioral Risk Factor Surveillance System

NA=Not available due to respondent counts of less than 30

*Indicates the difference observed between the county and state measure is statistically significant

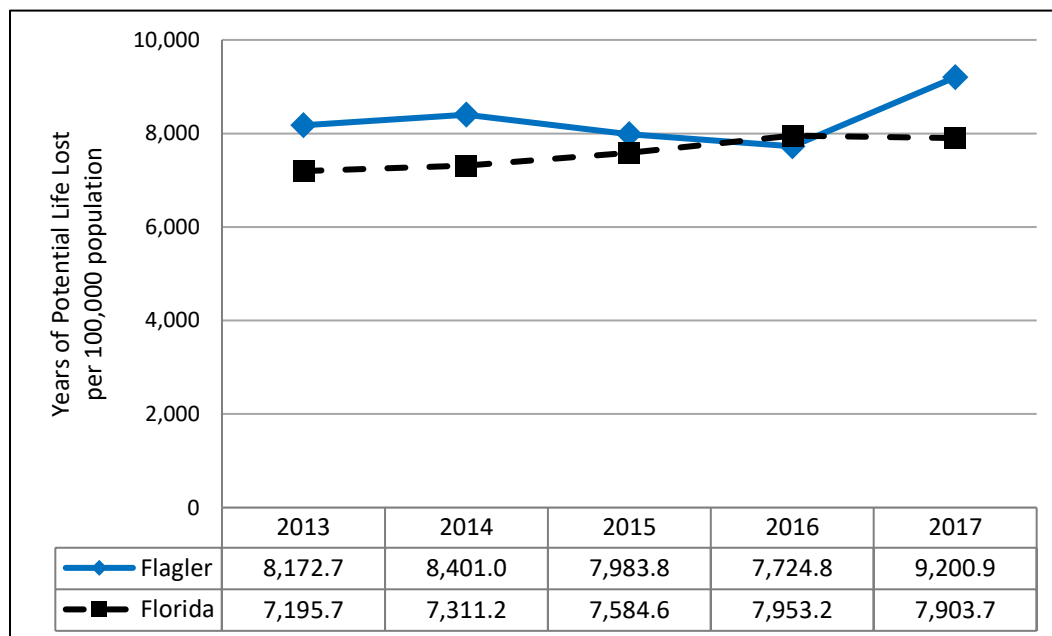
Figure 3.27 Average Number of Unhealthy Physical Days in the Past 30 Days

| Average number of unhealthy physical days in the past 30 days, 2016 | Flagler | Florida |
|---|---------|---------|
| | Percent | Percent |
| Total – Overall | 4.1 | 4.0 |
| Men | 2.9 | 3.7 |
| Women | 5.0 | 4.3 |
| Non-Hispanic, White | 4.5 | 4.4 |
| Non-Hispanic, Black | 1.6 | 3.6 |
| Hispanic | NA | 3.6 |
| 18-44 | 2.3 | 2.7 |
| 45-64 | 5.8 | 5.0 |
| 65 & Older | 3.6 | 4.9 |
| < High School | NA | 5.9 |
| High School/GED | 5.9 | 4.2 |
| > High School | 3.2 | 3.5 |
| < \$25,000 | 6.9 | 6.6 |
| \$25,000-\$49,999 | 2.8 | 3.6 |
| \$50,000 or More | 2.4 | 2.4 |

Source: Behavioral Risk Factor Surveillance System (BRFSS)

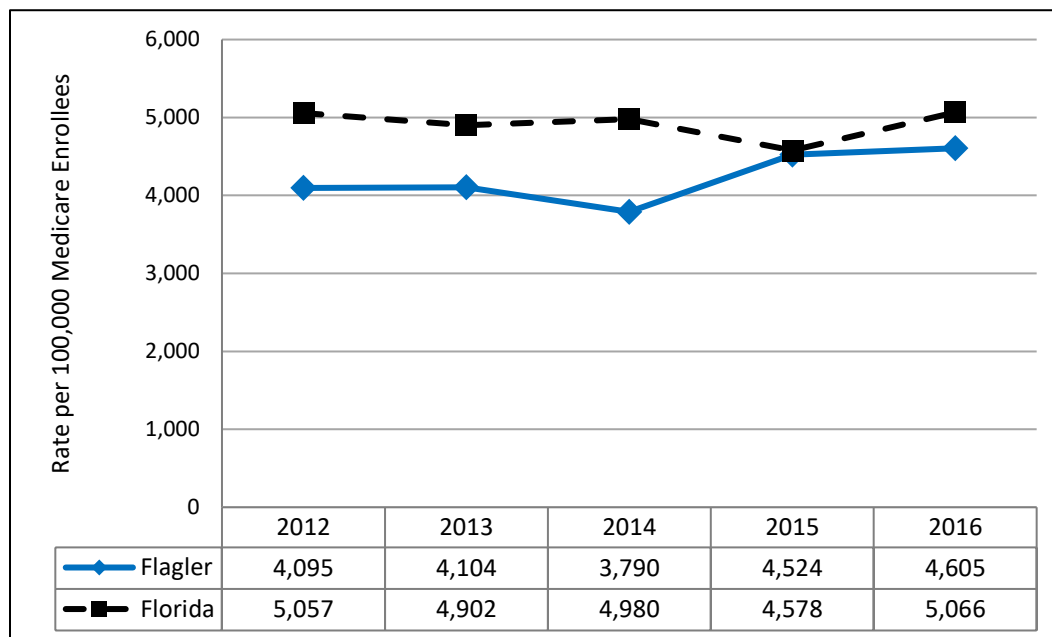
NA=Not available due to respondent counts of less than 30

Figure 3.28 Premature Death – Years of Potential Life Lost (YPLL)



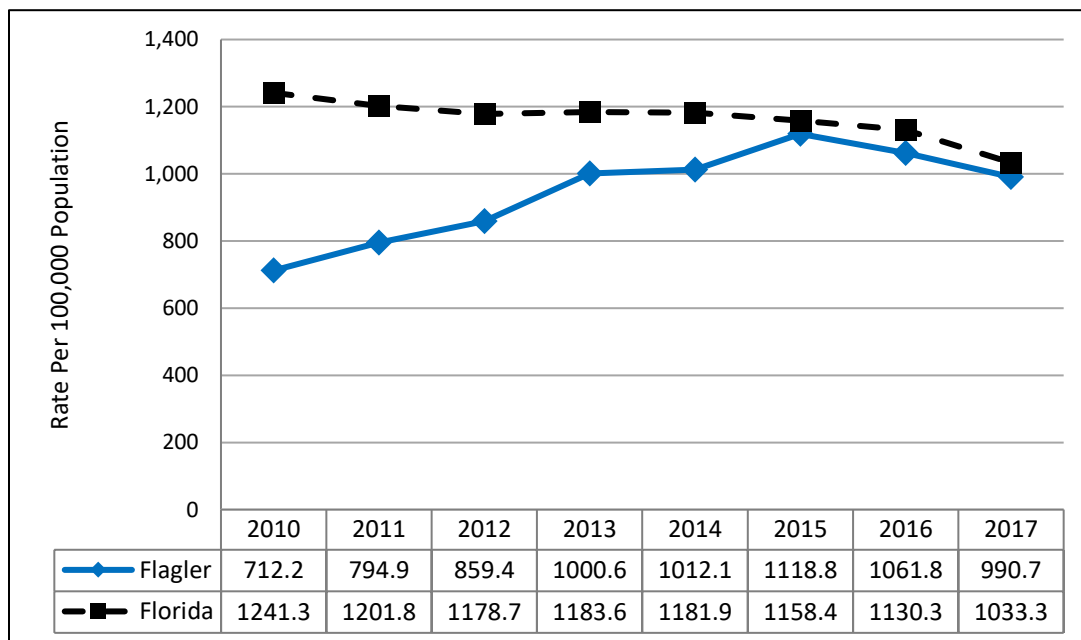
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 3.29 Preventable Hospital Stays – Number of Hospital Stays for Ambulatory-Care Sensitive Conditions per 100,000 Medicare Enrollees



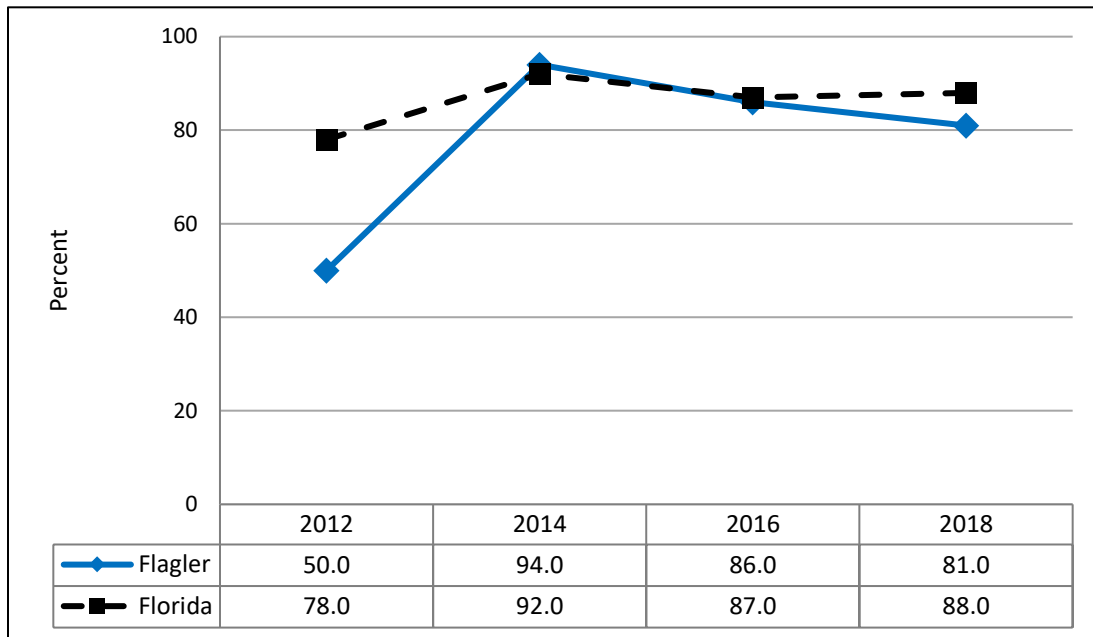
Source: Dartmouth Atlas of Health Care

Figure 3.30 Preventable Hospitalizations Under Age 65 from All Conditions



Source: Florida Agency for Health Care Administration (AHCA)

Figure 3.31 Access to Exercise Opportunities



Source: Business Analyst, Delorme map data, ESRI, & US Census Tigerline Files

4. Mothers and Children Under Age 5

Improving the well-being of mothers, infants, and children is an important public health goal for the United States. Their well-being determines the health of the next generation and can help predict future public health challenges for families, communities, and the health care system as cited by Healthy People 2020. There is now extensive evidence that conditions before birth and in early childhood influence health in adult life. For example, low birth weight is now known to be associated with increased rates of high blood pressure, heart disease, stroke and diabetes.

Factors Affecting Pregnancy, Infant and Child Health:

- Preconception health status
- Age
- Access to appropriate preconception and inter-conception health care
- Poverty
- Socio-demographic factors (family income, physical and mental health of parents and caregivers)

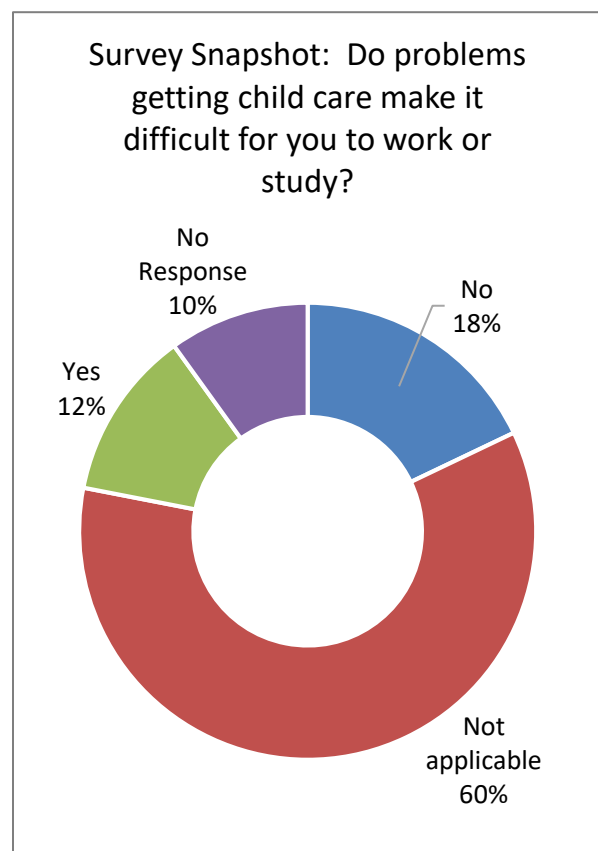
Low Birth Weight: Birth weight is one of the strongest predictors of an infant's health and survival. Low birth weight is often associated with premature birth. Babies born with a low birth weight are more likely to require specialized medical care and there may be risk of infant death or long-term disability.

Fetal Mortality: Fetal mortality is the death of a fetus or baby after 20 weeks' gestation.

Infant Mortality: Infant mortality is the death of a live-born baby during the first year of life. Pre-term birth (<37 weeks gestation) is a major contributor to infant mortality.

Births to Mothers with First Trimester Prenatal Care: Prenatal care refers to the medical care that women receive during pregnancy. Babies born to mothers who do not receive prenatal care are three times more likely to have a low birth weight and five times more likely to die than those born to mothers who do get care. To achieve the greatest benefit for both the mother and baby, it is recommended that women begin prenatal visits in the first trimester of pregnancy or as soon as pregnancy is suspected or confirmed.

Early Child Development: According to the World Health Organization, early childhood development is considered to be the most important phase in life which determines the quality of health, well-being, learning and behavior across the life span. It is a period of great opportunity but also of great vulnerability to negative influences. It constitutes a unique phase for capitalizing on developmental forces to prevent or minimize disabilities and potential secondary conditions.



Indicators of Concern

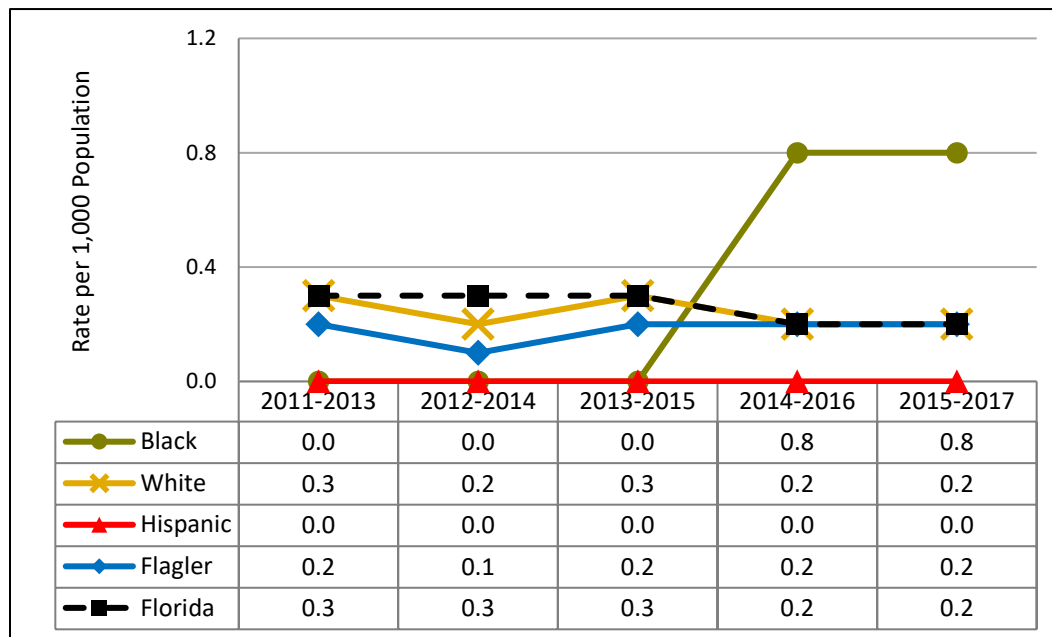
| | | Trend | Comparison | # Impacted |
|-------------------------------------|--|-------|------------|------------|
| Teen Births | Figure 4.2. Births to Flagler mothers age 15-19 increased from 2015 to 2017 and the latest rate is higher than Florida. | ↑ | ↑ | 28 |
| STDs | Figure 4.14. The Flagler rate of bacterial STDs among women 15-34 has steadily increased since 2013. | ↑ | | 416 |
| Low/Very Low Birth Weight | Figure 4.16 and 4.17. The rate of very low birth weight babies born to black Flagler women has increased since 2012 and exceeds the Florida rate. The rate of low birth weight babies born to black Flagler mothers is also higher than the Florida rate. | ↑ | ↑ | 9 |
| Births with no Prenatal Care | Figure 4.23. Births to Flagler women with no prenatal care has steadily increased for black women since 2011 and increased in the last 3 years for white women and all women in Flagler. | ↑ | | 13 |
| Kindergarten Readiness | Figure 4.27. The percent of Flagler children “Ready for Kindergarten” is lower than Florida. | | ↓ | |
| Child Immunizations | Figure 4.28. The percent of Flagler children fully immunized has decreased from 2016 to 2018 and the Flagler percent was lower than Florida in 2017 and 2018. | ↓ | ↓ | 819 |
| Breastfeeding Initiation | Figure 4.29. The percent of Flagler moms who initiated breastfeeding has been lower than Florida for the last 5 years. The percent of black moms who initiative breastfeeding is lower than all other groups. | | ↓ | 653 |
| Infant Mortality | Figure 4.33. The Flagler rate of infant mortality for Hispanic babies has increased since 2011 and is higher than all other groups. | ↑ | | 6 |

Indicators Included:

| Indicator | Reference |
|---|-------------|
| Births to Mothers, Ages 10-14 | Figure 4.1 |
| Births to Mothers, Ages 15-19 | Figure 4.2 |
| Births to Mothers Who Were at a Healthy Weight at the Time Pregnancy Occurred | Figure 4.3 |
| Births to Overweight Mothers at the Time Pregnancy Occurred | Figure 4.4 |
| Births to Obese Mothers at the Time Pregnancy Occurred | Figure 4.5 |
| Births to Mothers 19 and Over Without High School Education | Figure 4.6 |
| Births Among Unwed Mothers, Ages 15-19 | Figure 4.7 |
| Births Among Unwed Mothers, Ages 20-54 | Figure 4.8 |
| Repeat Births to Teenage Mothers, Ages 15-17 | Figure 4.9 |
| Repeat Births to Teenage Mothers, Ages 15-19 | Figure 4.10 |
| Repeat Births to Teenage Mothers, Ages 18-19 | Figure 4.11 |
| Births with Inter-Pregnancy Interval < 18 Months | Figure 4.12 |
| Resident Live Births to Mothers Who Smoked During Pregnancy | Figure 4.13 |
| Bacterial STDs (Women 15-34) | Figure 4.14 |
| Females >17 Who Engage in Heavy or Binge Drinking | Figure 4.15 |

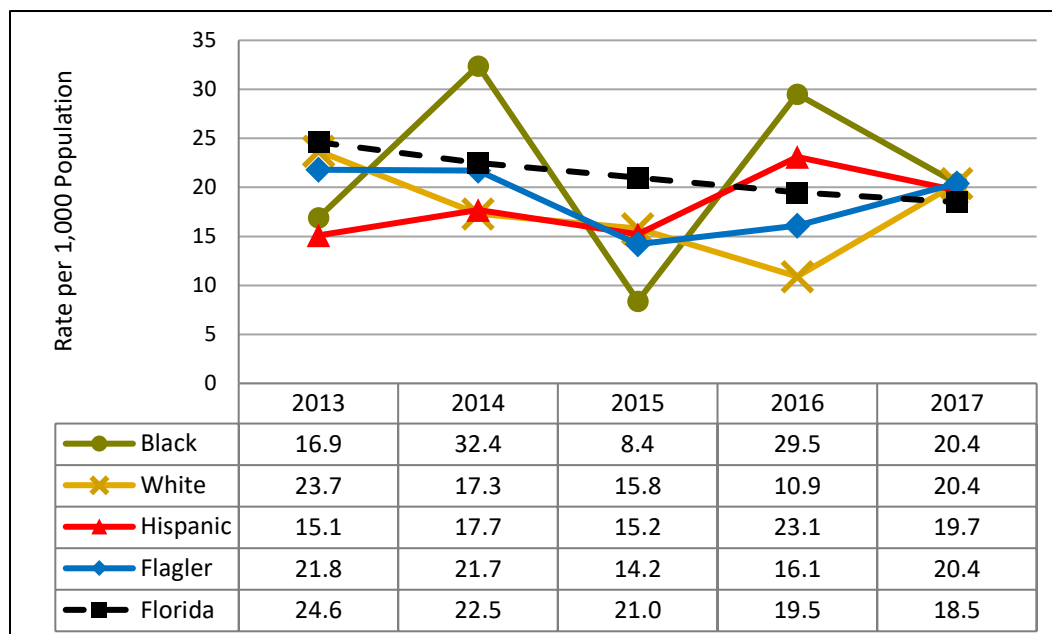
| Indicator | Reference |
|---|--------------------|
| Very Low Birth Weight (Live Births Under 1500 Grams) | Figure 4.16 |
| Low Birth Weight (Live Births Under 2500 Grams) | Figure 4.17 |
| Multiple Births (Twins, Triplets, or More) | Figure 4.18 |
| Preterm Births (< 37 Weeks Gestation) | Figure 4.19 |
| Fetal Deaths | Figure 4.20 |
| Births with Adequate Prenatal Care (Kotelchuck index) | Figure 4.21 |
| Prenatal Care Entry in First Trimester | Figure 4.22 |
| Births to Mothers with No Prenatal Care | Figure 4.23 |
| Licensed Child Care Centers and Homes | Figure 4.24 |
| Children in School Readiness Programs (Subsidized Child Care) | Figure 4.25 |
| Children Participating in Voluntary Pre-K Programs | Figure 4.26 |
| School Readiness at Kindergarten Entry | Figure 4.27 |
| Kindergarten Children Fully Immunized | Figure 4.28 |
| Mothers who Initiate Breastfeeding | Figure 4.29 |
| Children Ages 1-5 Receiving Mental Health Treatment Services | Figure 4.30 |
| Neonatal Mortality (0-27 days) | Figure 4.31 |
| Postneonatal Mortality (28-364 days) | Figure 4.32 |
| Infant Mortality (0-364 days) | Figure 4.33 |
| Deaths from SUIDS (Sudden Unexpected Infant Death Syndrome) | Figure 4.34 |
| Asthma Hospitalizations, Ages 1-5 | Figure 4.35 |

Figure 4.1 Births by Mothers Age 10-14, 3-Year Rolling Rates



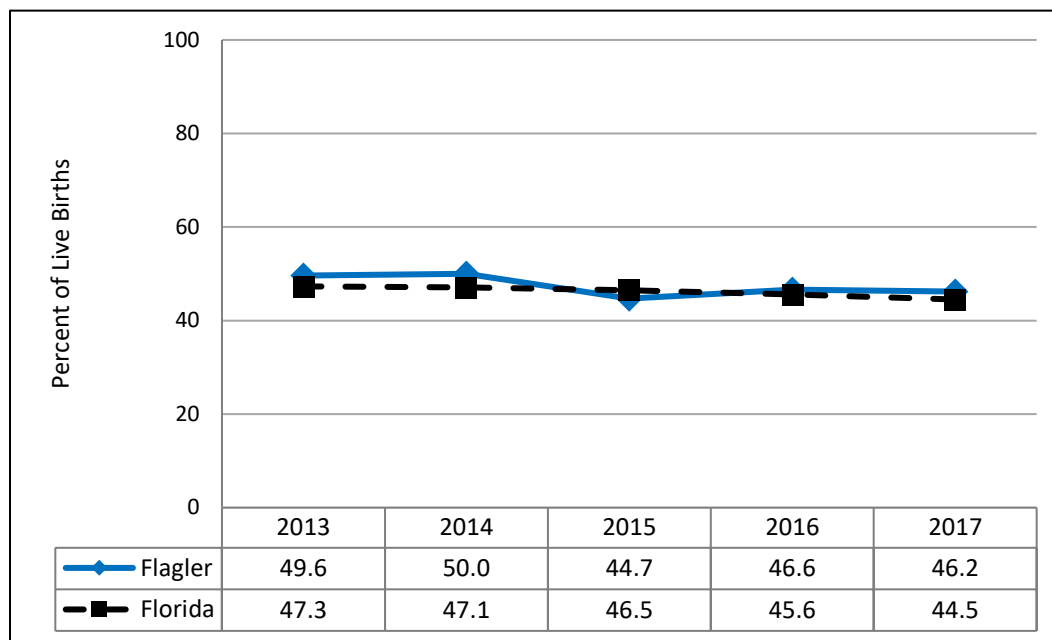
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.2 Births by Mothers Age 15-19



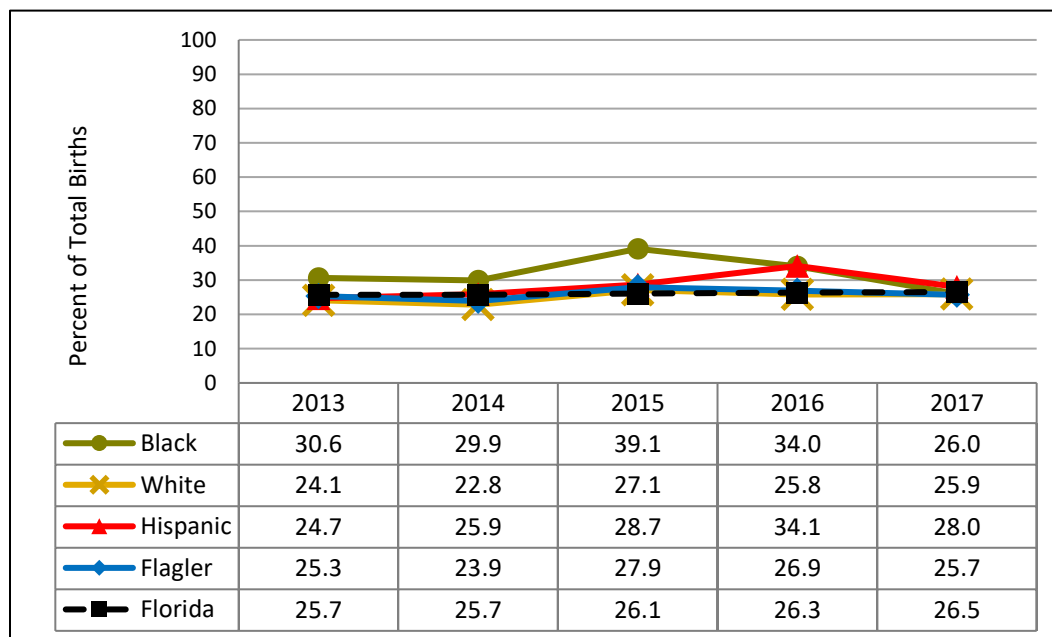
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.3 Births to Mothers Who Were at a Healthy Weight at the Time Pregnancy Occurred



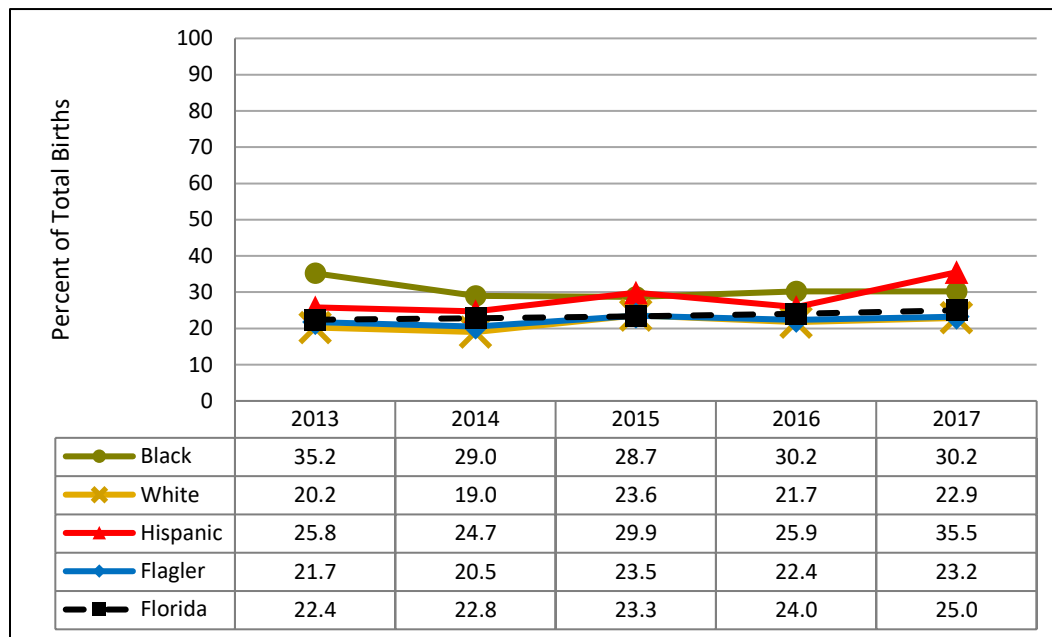
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.4 Births to Overweight Mothers at Time Pregnancy Occurred



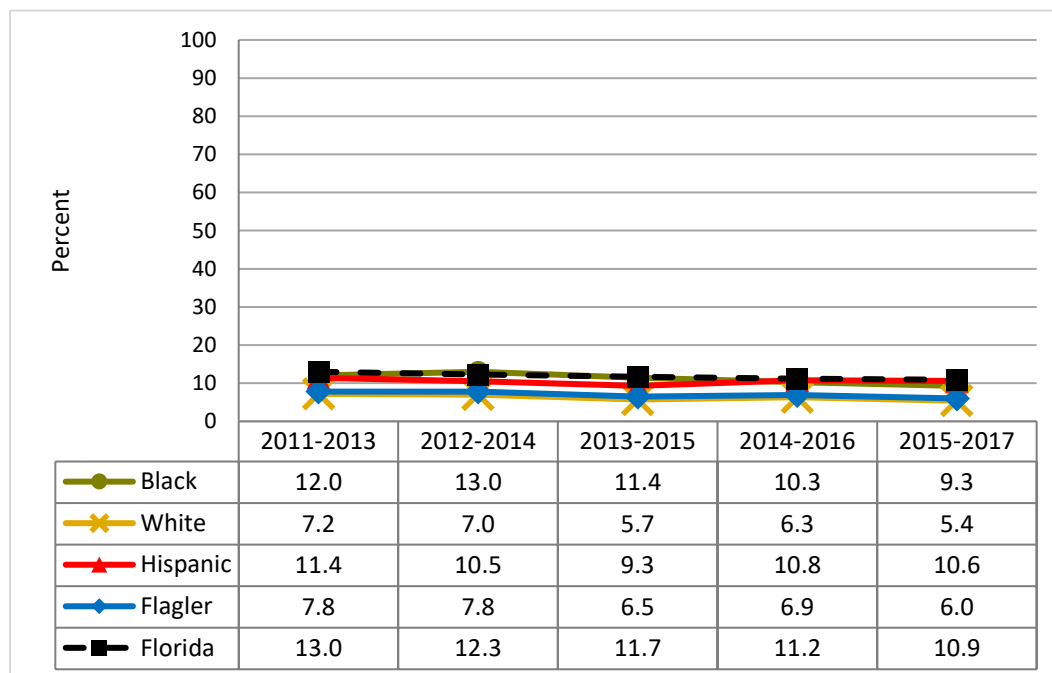
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.5 Births to Obese Mothers at Time Pregnancy Occurred



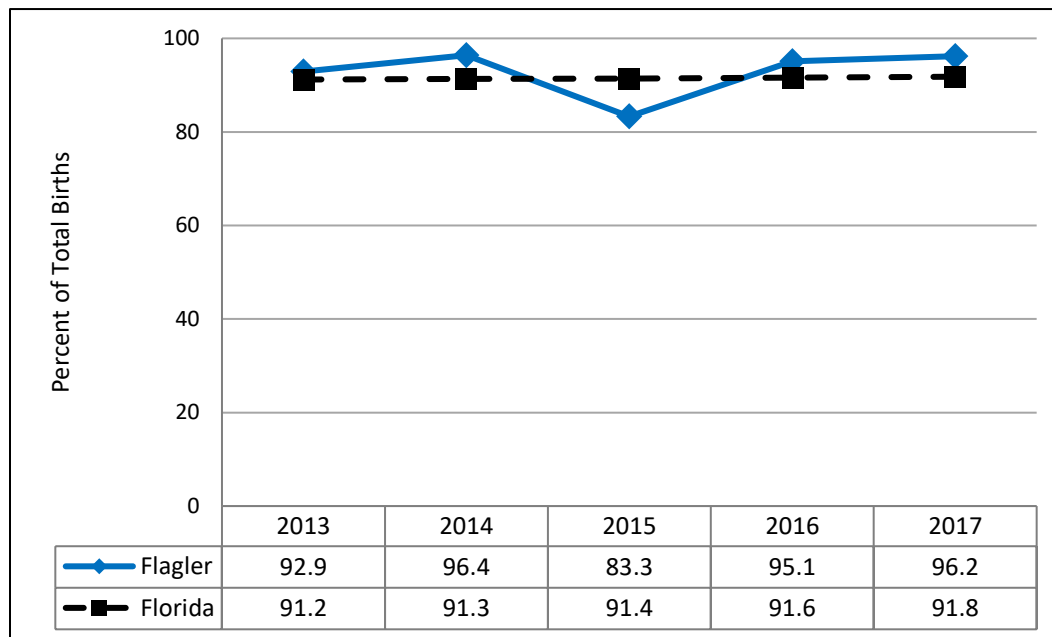
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.6 Births to Mothers 19 and Over Without High School Education, 3-Year Rolling Rates



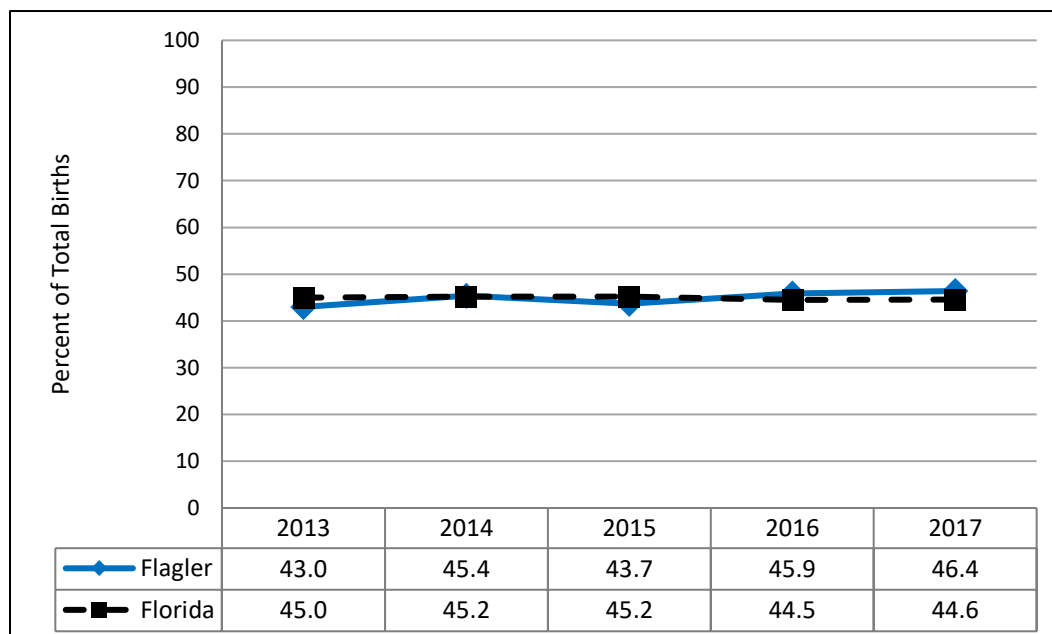
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.7 Births to Unwed Mothers Ages 15-19



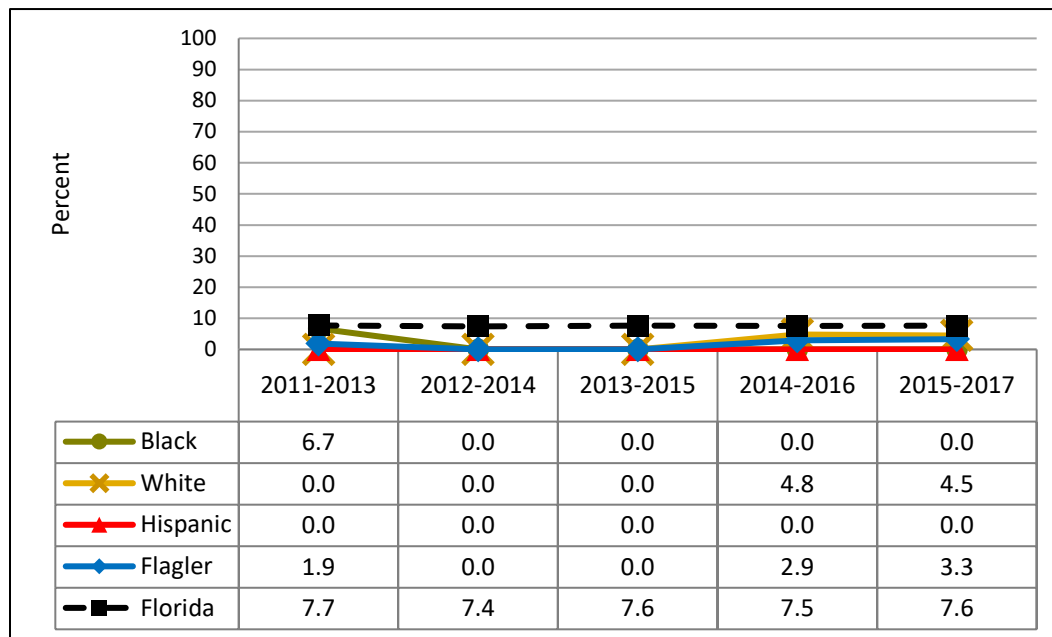
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.8 Births to Unwed Mothers Ages 20-54



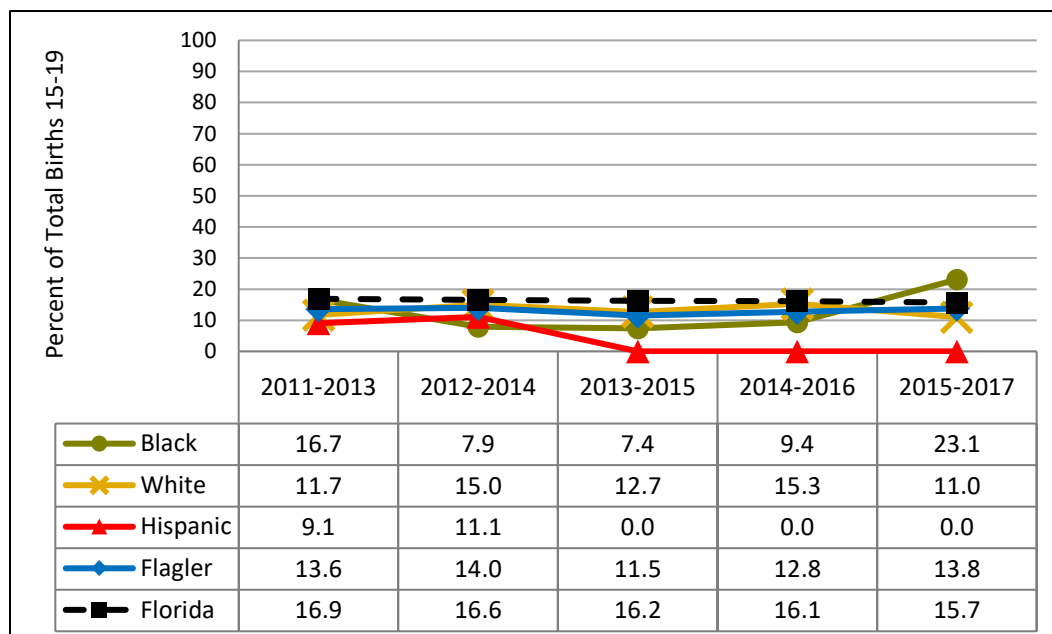
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.9 Repeat Births to Mothers, Ages 15-17, 3-Year Rolling Rates



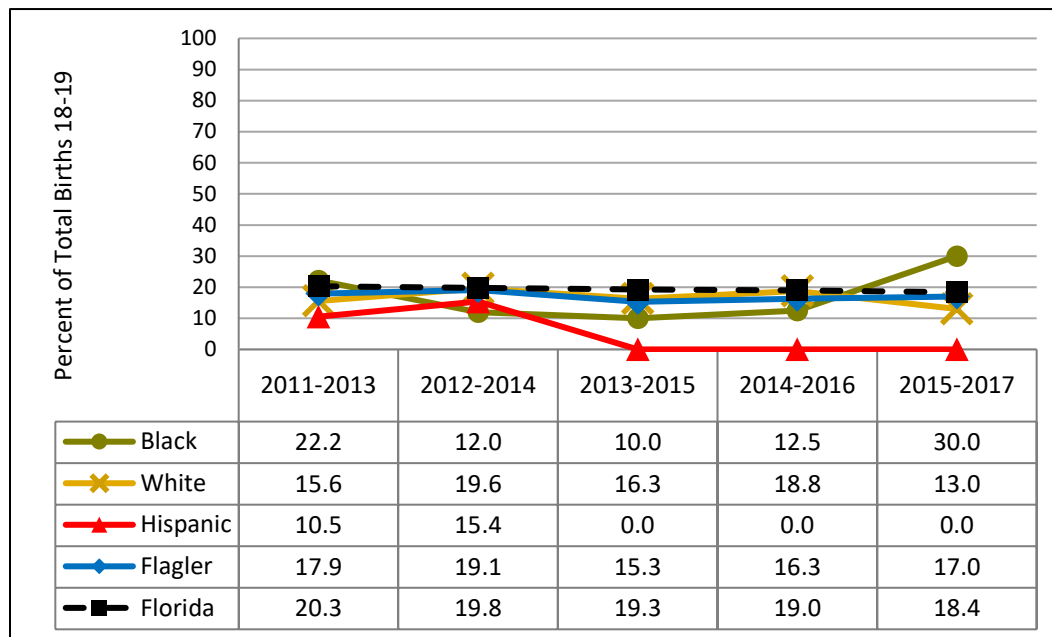
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.10 Repeat Births to Mothers Ages 15-19, 3-Year Rolling Rates



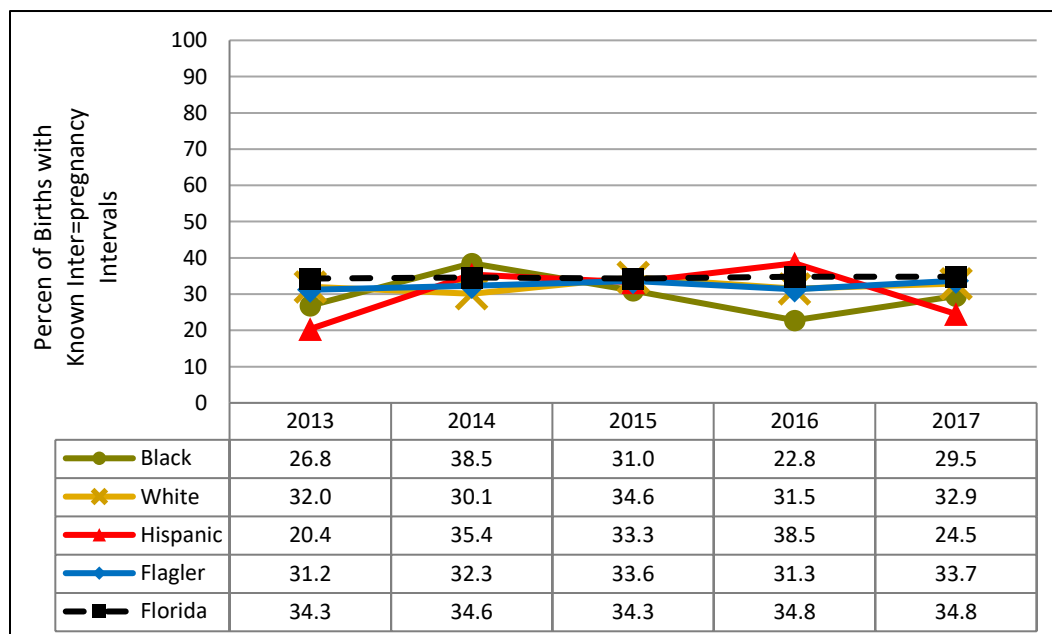
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.11 Repeat Births to Mothers Ages 18-19, 3-Year Rolling Rates



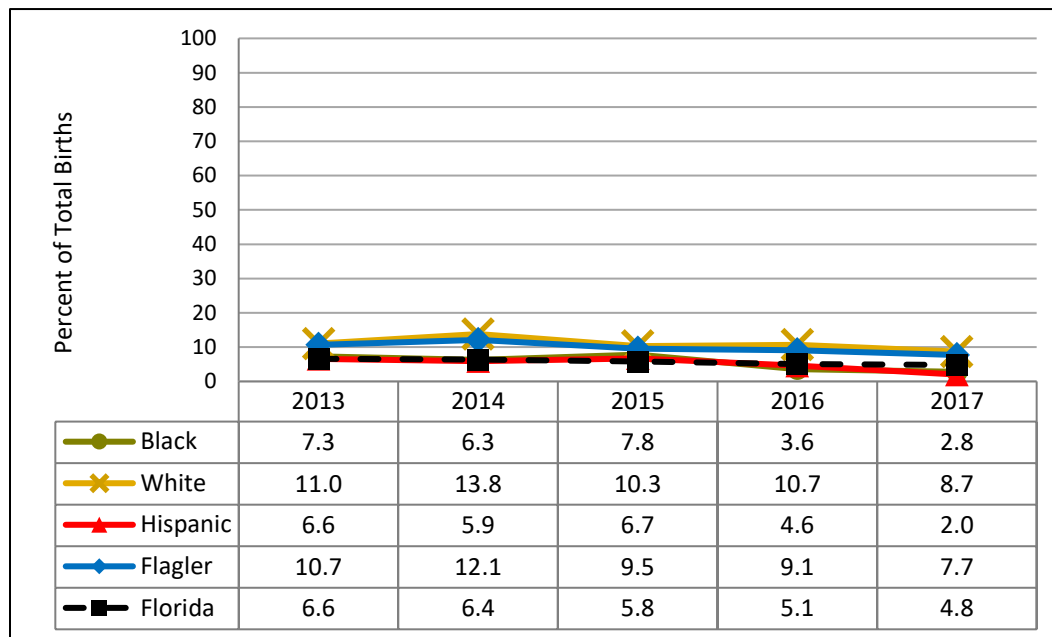
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.12 Births with Inter-Pregnancy Interval < 18 Months



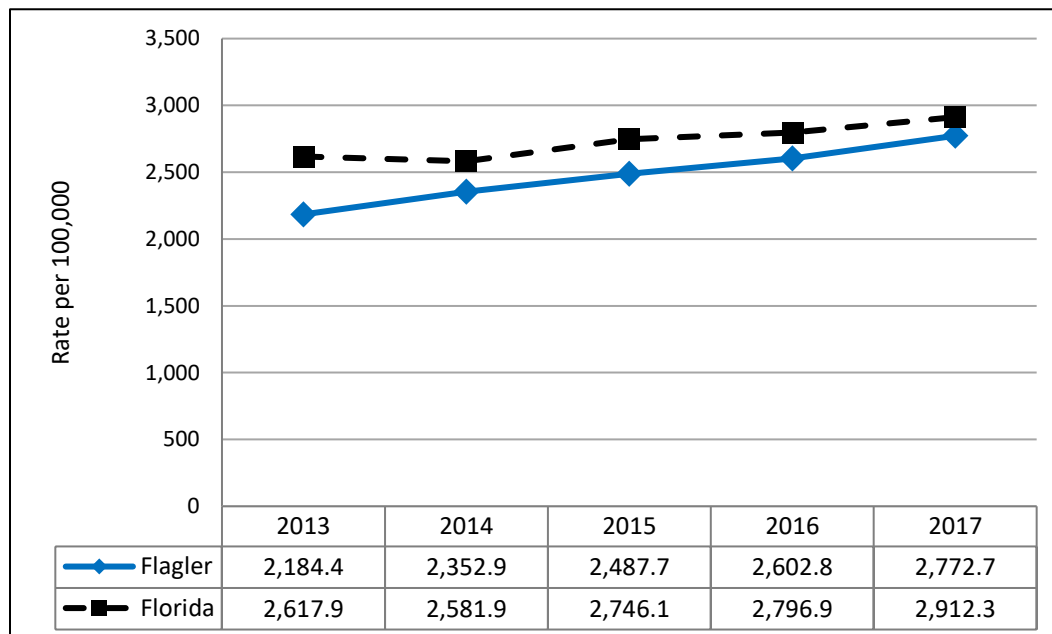
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.13 Births to Mothers who Reported Smoking During Pregnancy



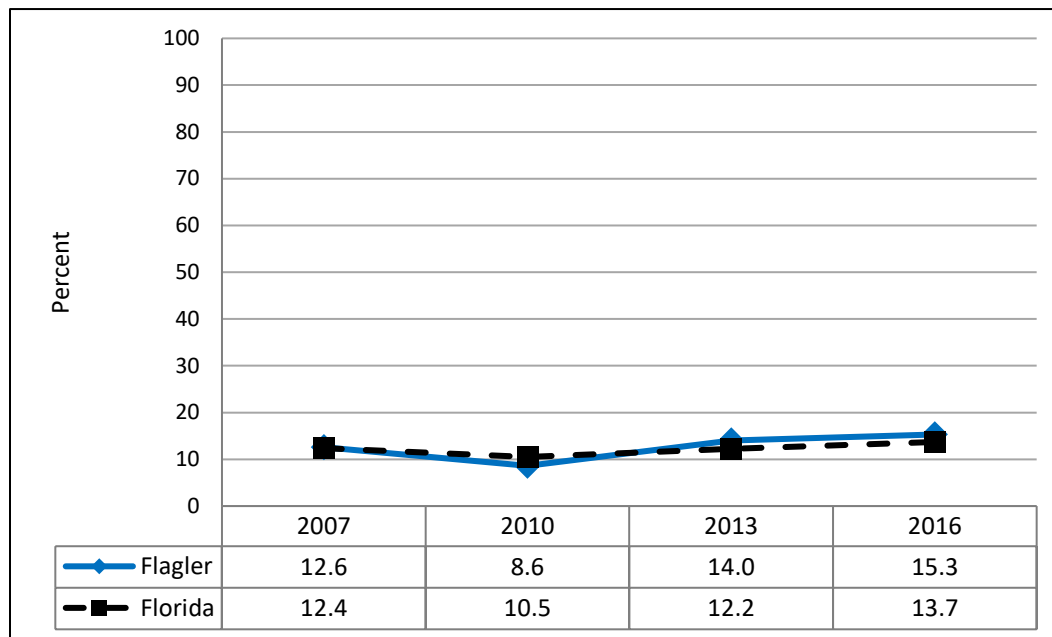
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.14 Bacterial STDs (Women 15-34)



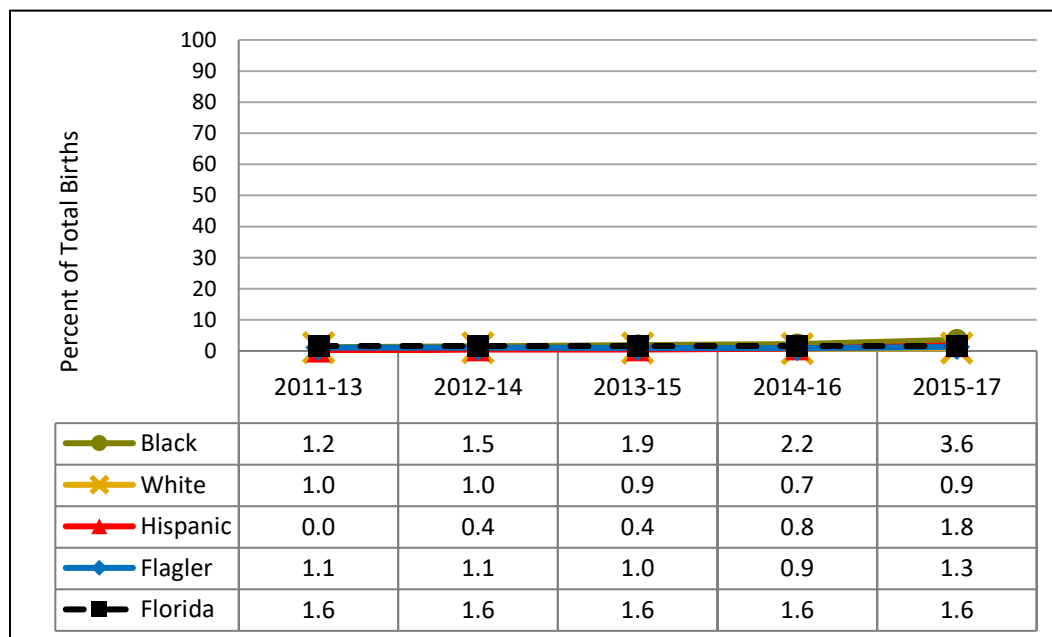
Data Source: Florida Department of Health, Bureau of STD Prevention & Control

Figure 4.15 Females >17 who Engage in Binge Drinking



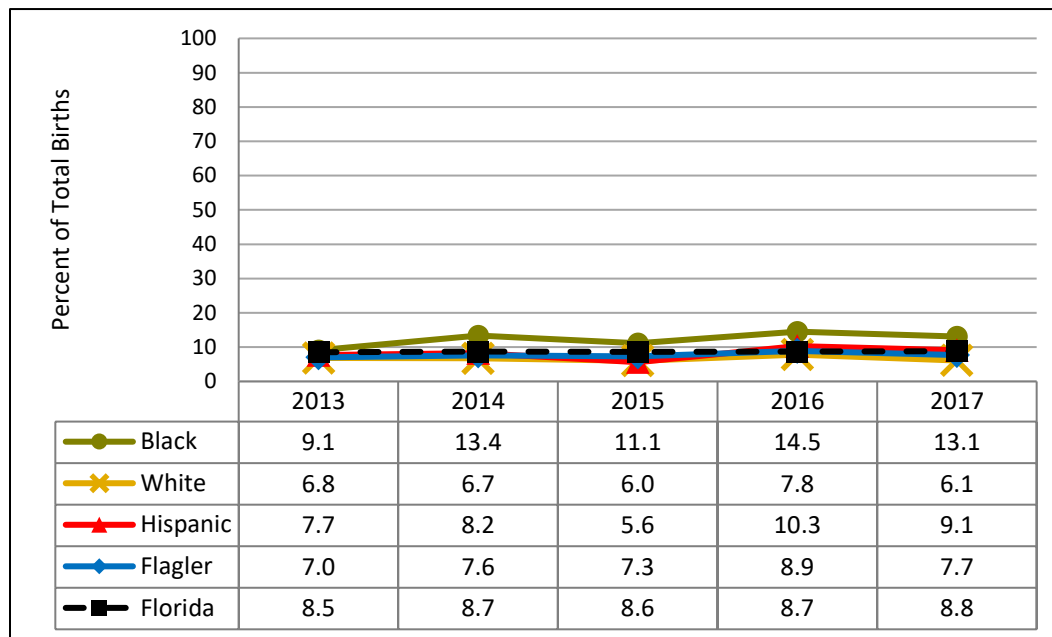
Source: Florida Behavioral Risk Factor Surveillance Systems

Figure 4.16 Live Births Under 1500 Grams (Very Low Birth Weight), 3-Year Rolling Rates



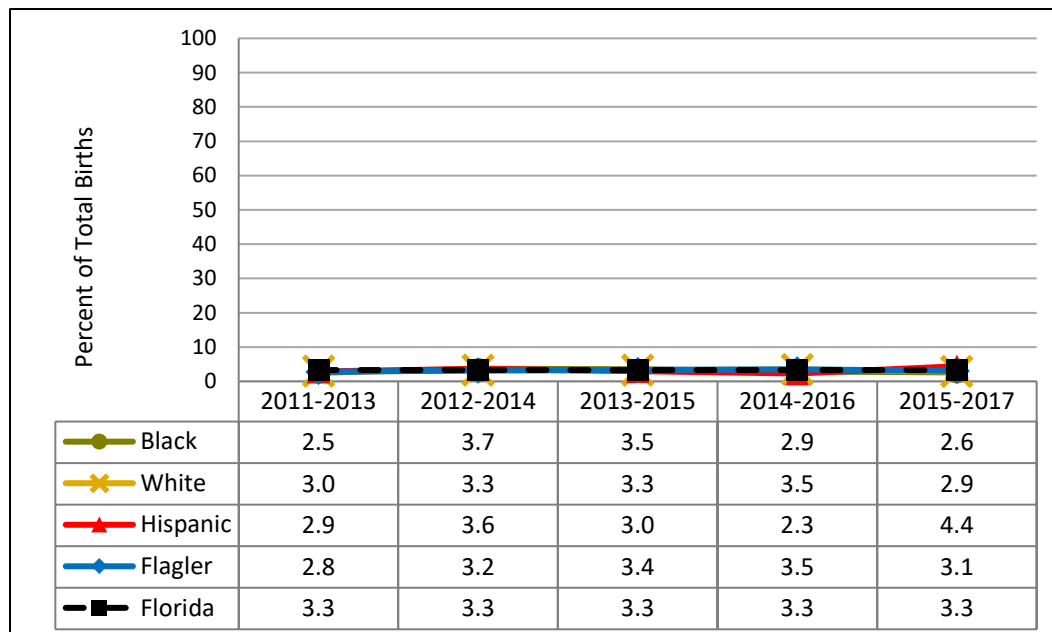
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.17 Live Births Under 2500 Grams (Low Birth Weight)



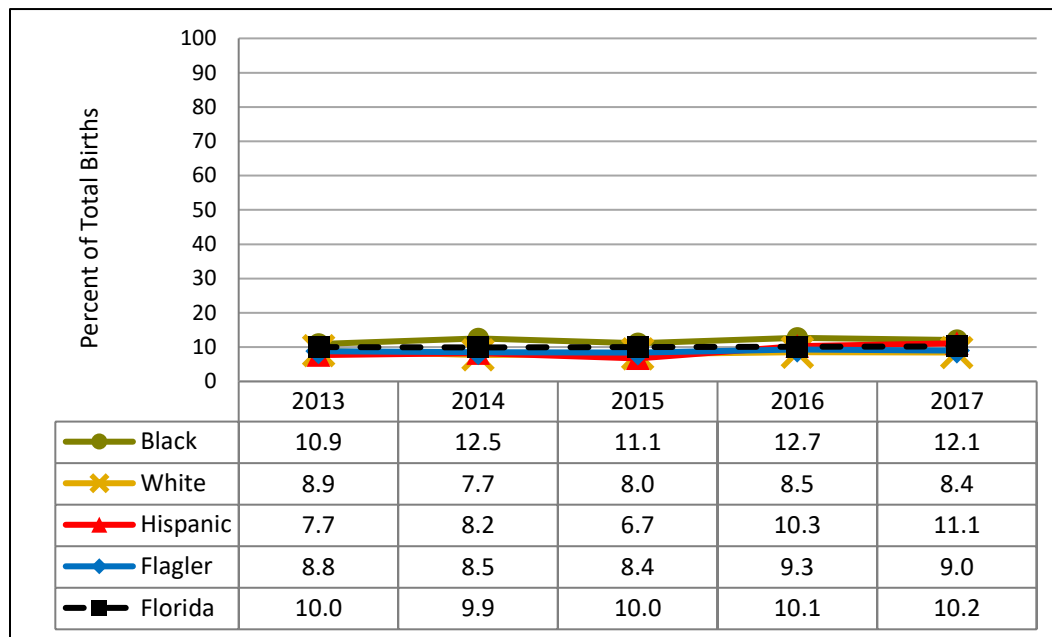
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.18 Multiple Births (Twins, Triplets, or More), 3-Year Rolling Rates



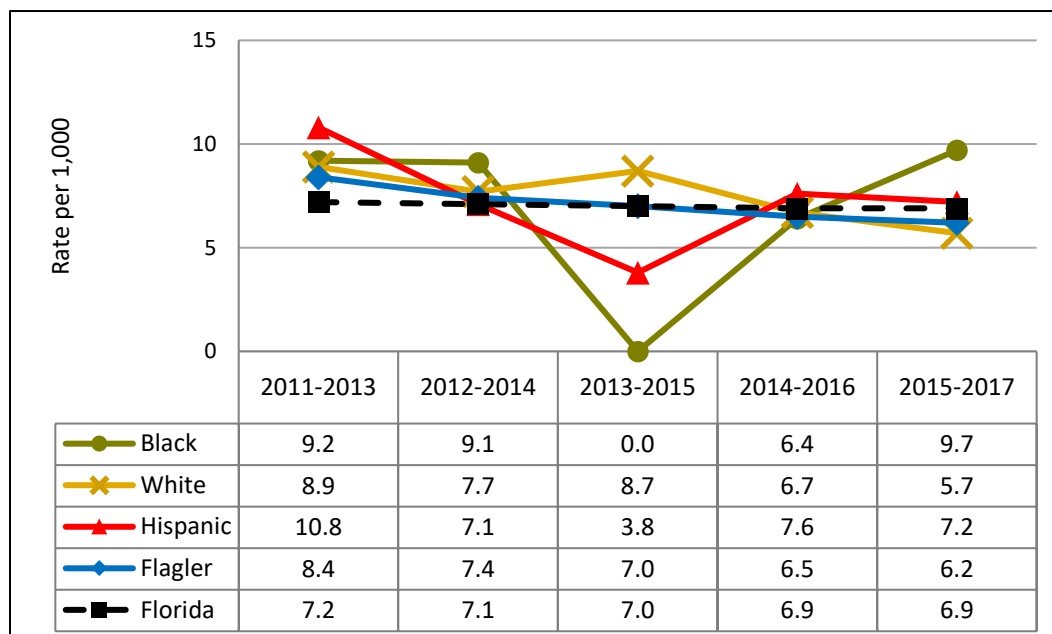
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.19 Preterm Births (<37 Weeks Gestation)



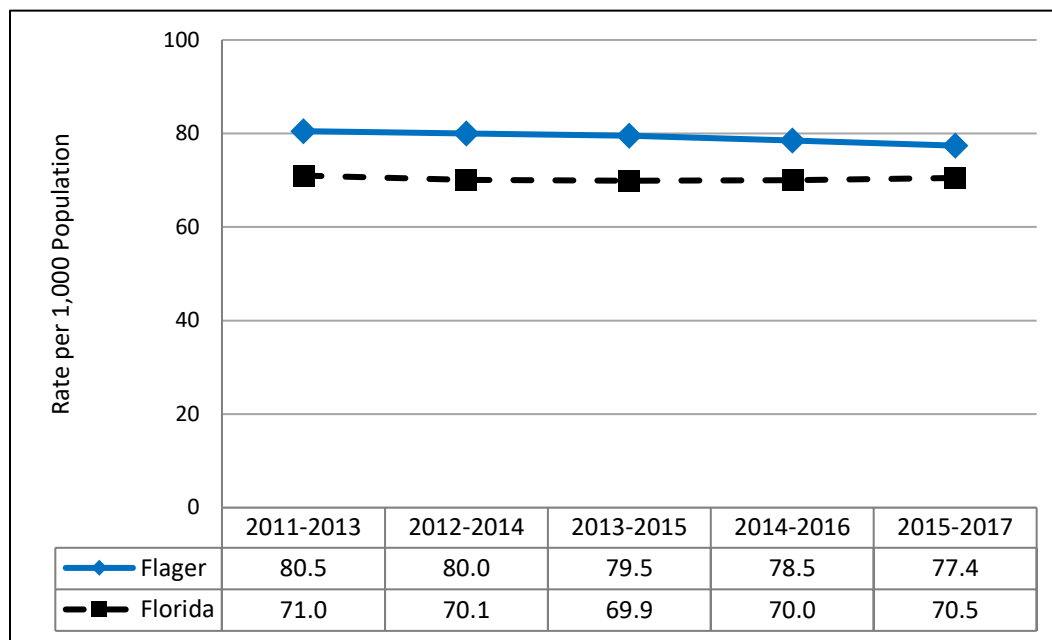
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.20 Fetal Deaths, 3-Year Rolling Rates



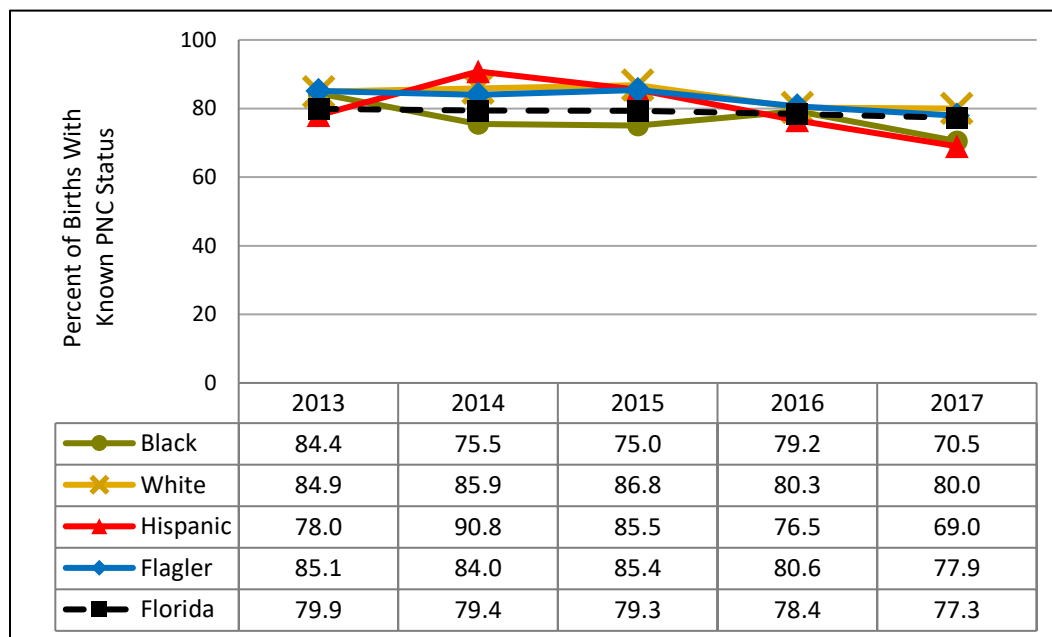
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.21 Births with Adequate Prenatal Care (Kotelchuck Index), 3-Year Rolling Rates



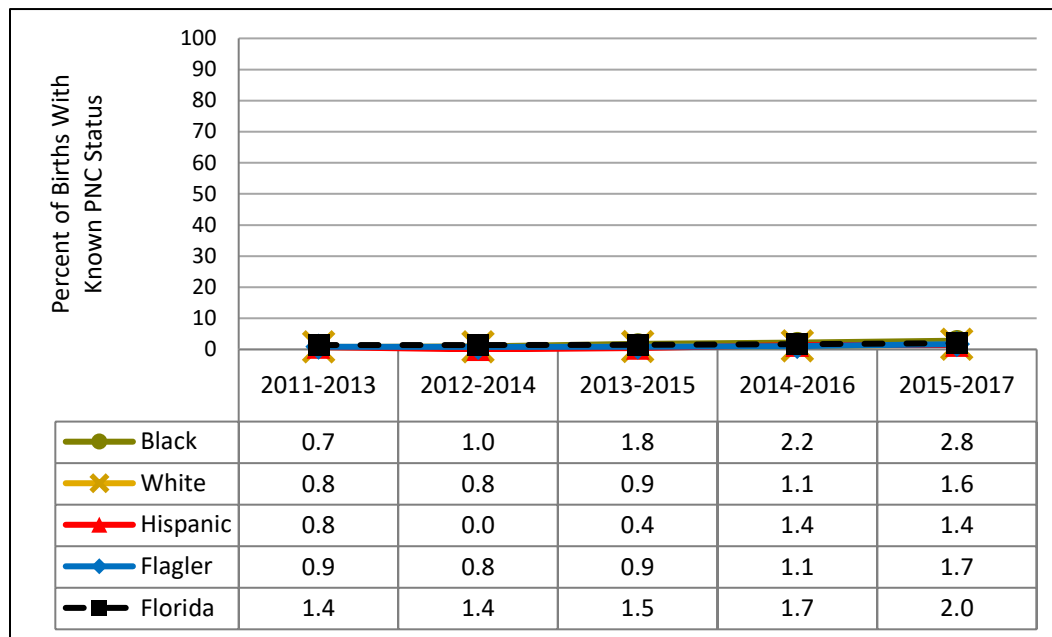
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.22 Births to Mothers with 1st Trimester Prenatal Care



Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.23 Births to Mothers with No Prenatal Care, 3-Year Rolling Rates



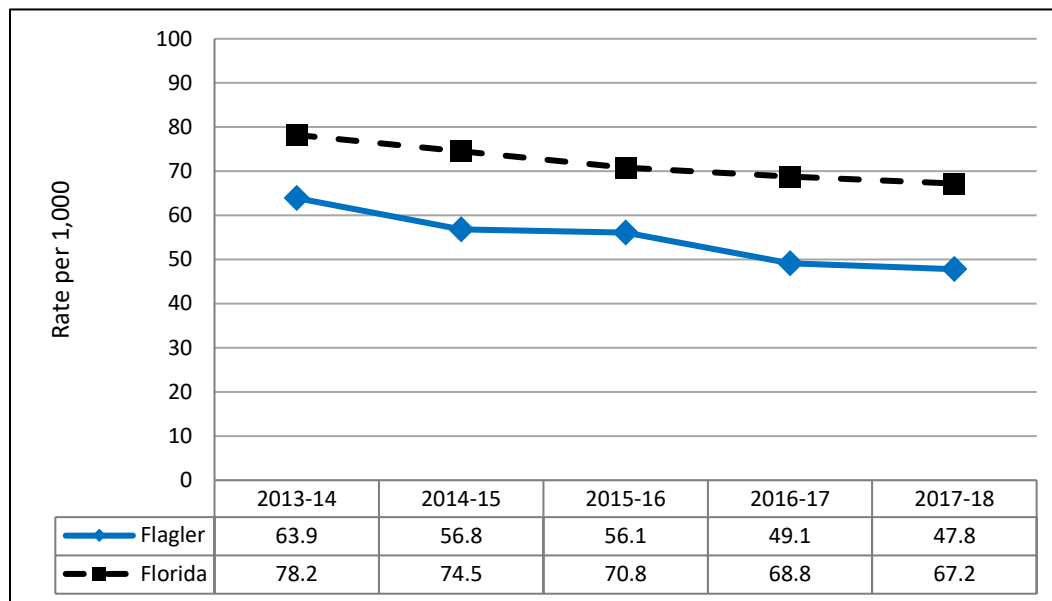
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.24 Licensed Child Care Centers and Homes

| | |
|----------------------------------|-----------|
| Child Care Providers | 42 |
| Licensed | 29 |
| Registered | 8 |
| Exempt | 4 |
| Child Care Facilities | 22 |
| Family Day Care Homes | 13 |
| Registered Family Day Care Homes | 8 |
| Large Family Child Care Homes | 2 |
| Religious Exempt | 3 |
| Public Schools | 2 |

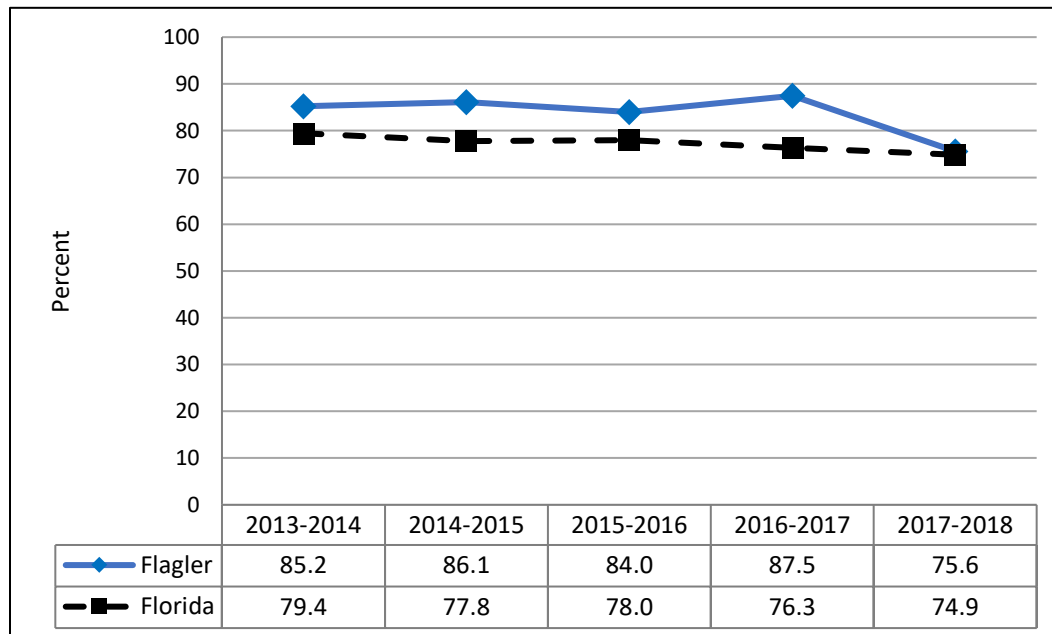
Source: Florida Department of Children and Families

Figure 4.25 Children in School Readiness Programs (Subsidized Child Care)



Source: Florida Department of Education, Office of Early Learning

Figure 4.26 Children Participating in Voluntary Pre-K Programs



Source: Florida Department of Education, Office of Early Learning

Figure 4. 27 School Readiness at Kindergarten Entry

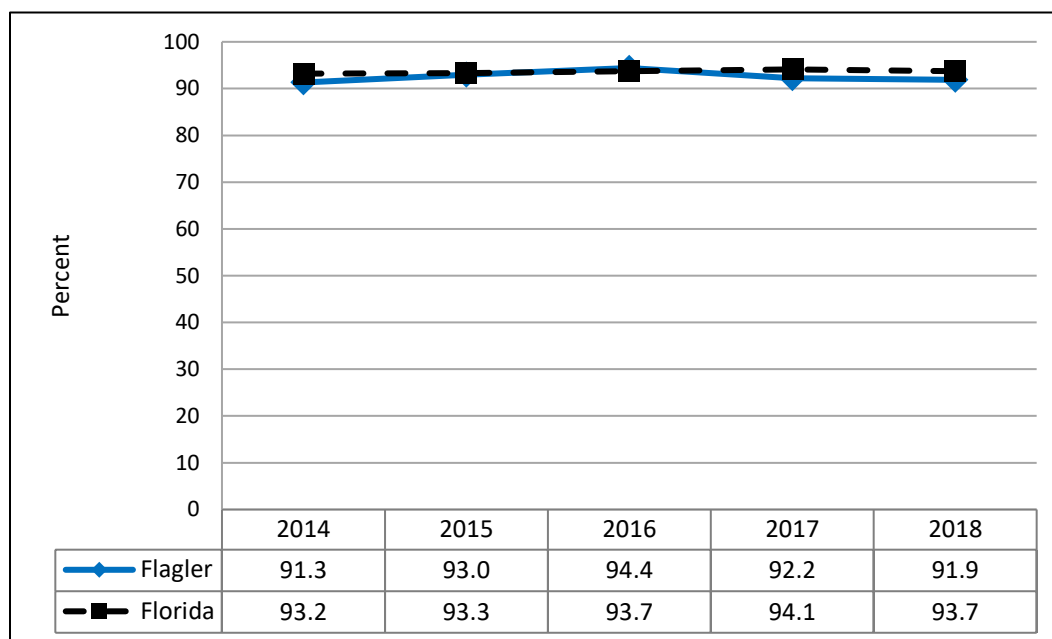
| Percent "Ready for Kindergarten" | | |
|----------------------------------|-----------------|-----------------|
| Year | Flagler Percent | Florida Percent |
| 2017 | 50.4 | 54.0 |
| 2018 | 48.8 | 52.7 |

Florida Department of Education, Office of Early Learning

Note: Ready for Kindergarten" (Scoring 500+ on Start Early Literacy Assessment)

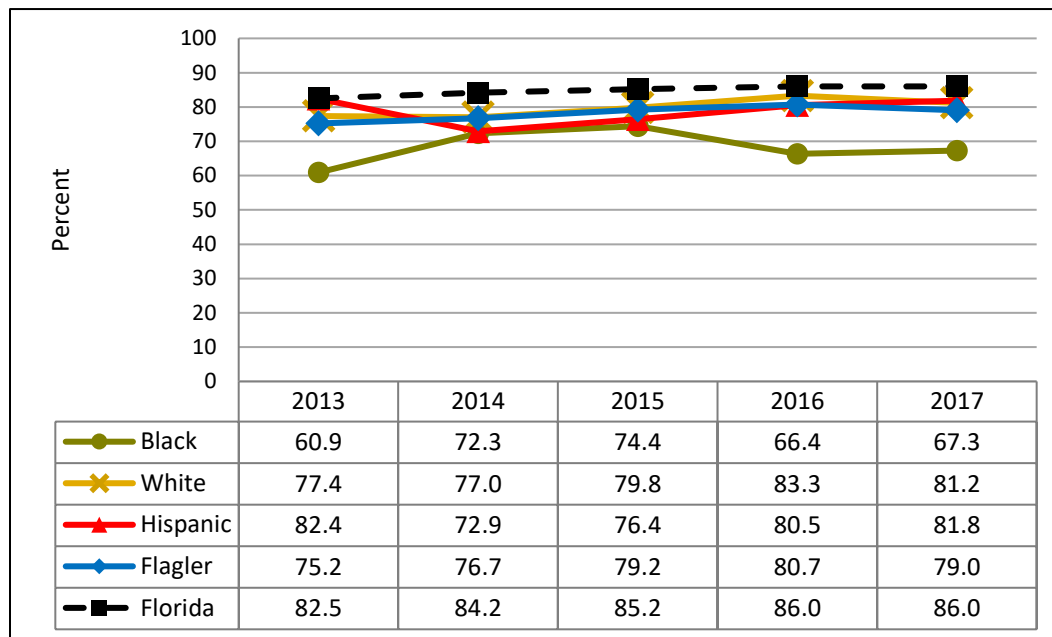
Instrument changed in 2017

Figure 4.28 Kindergarten Children Fully Immunized



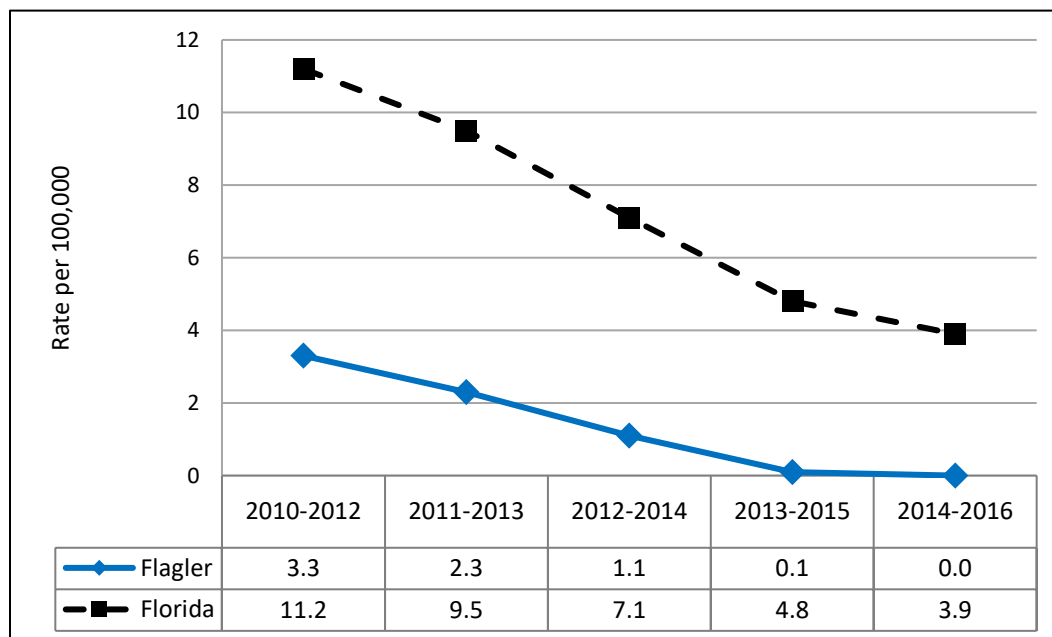
Source: Florida Department of Health, Bureau of Immunization

Figure 4.29 Births to Mothers who Initiated Breastfeeding



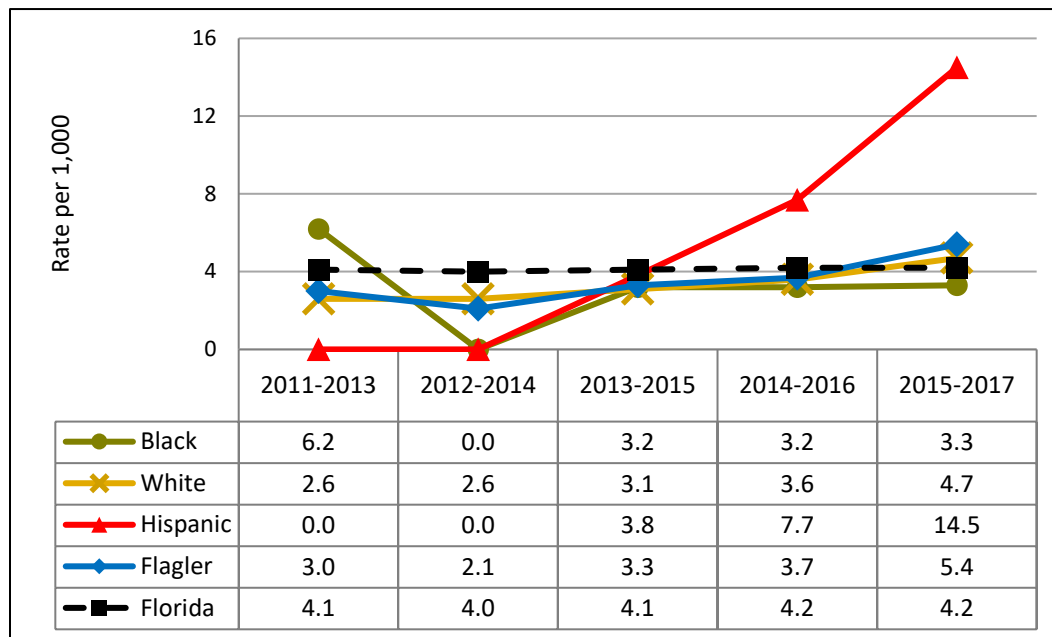
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.30 Children Ages 1-5 Receiving Mental Health Treatment Services, 3-Year Rolling Rates



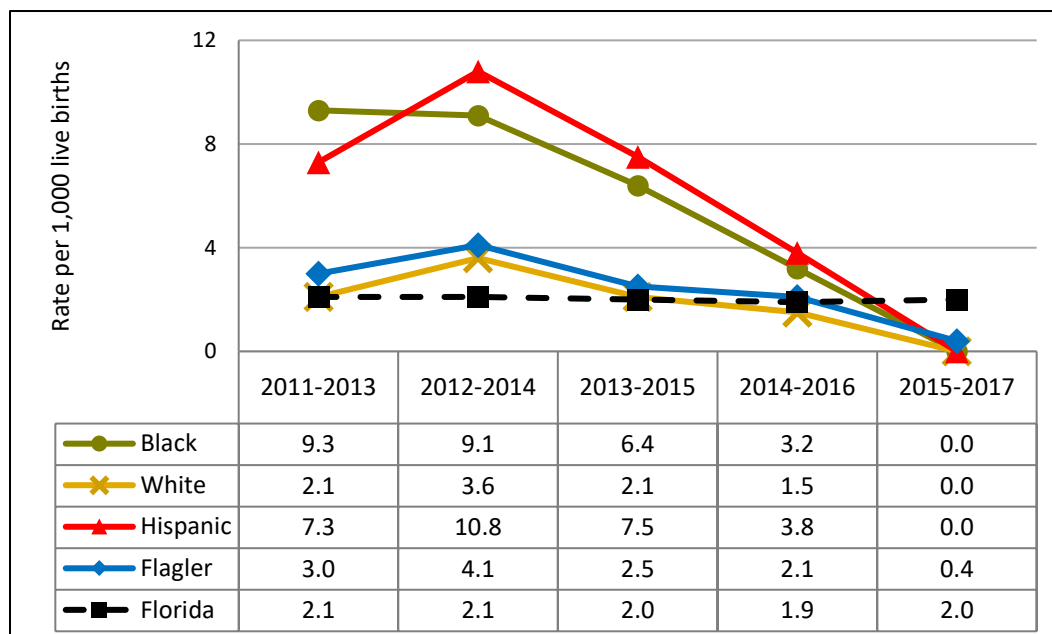
Source: Florida Department of Children and Families

Figure 4.31 Neonatal Mortality (0-27 days), 3-Year Rolling Rates



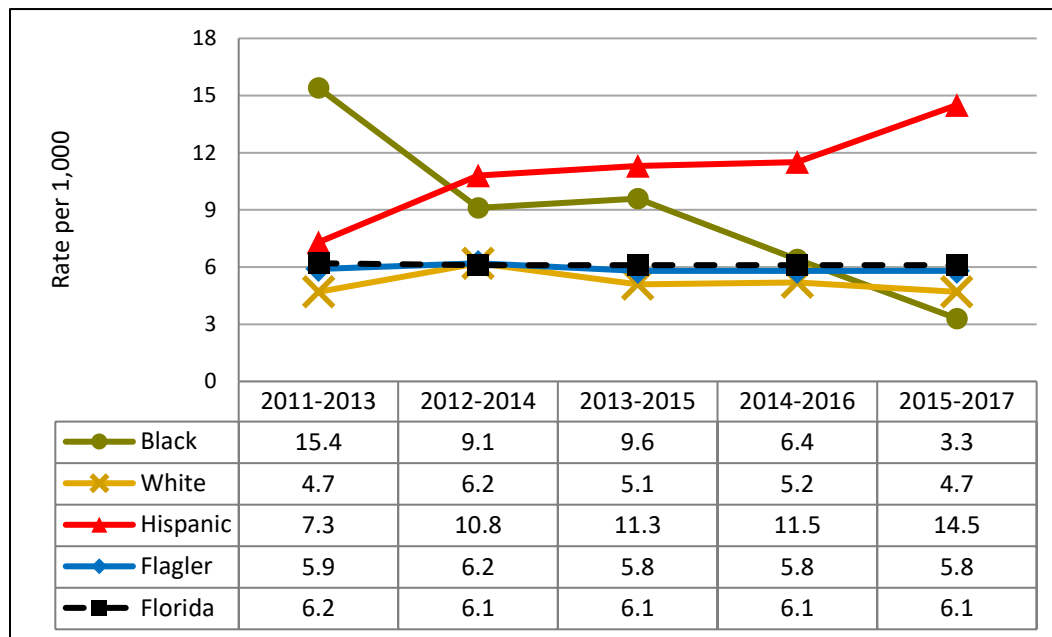
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.32 Postneonatal Mortality (28-364 days), 3-Year Rolling Rates



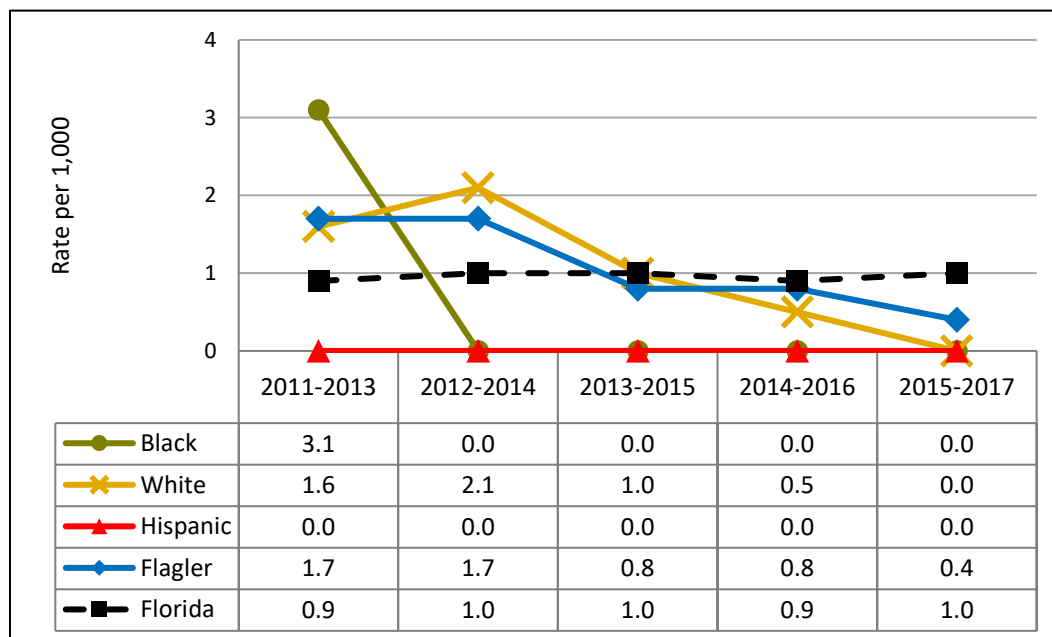
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.33 Infant Mortality (0-364 days), 3-Year Rolling Rates



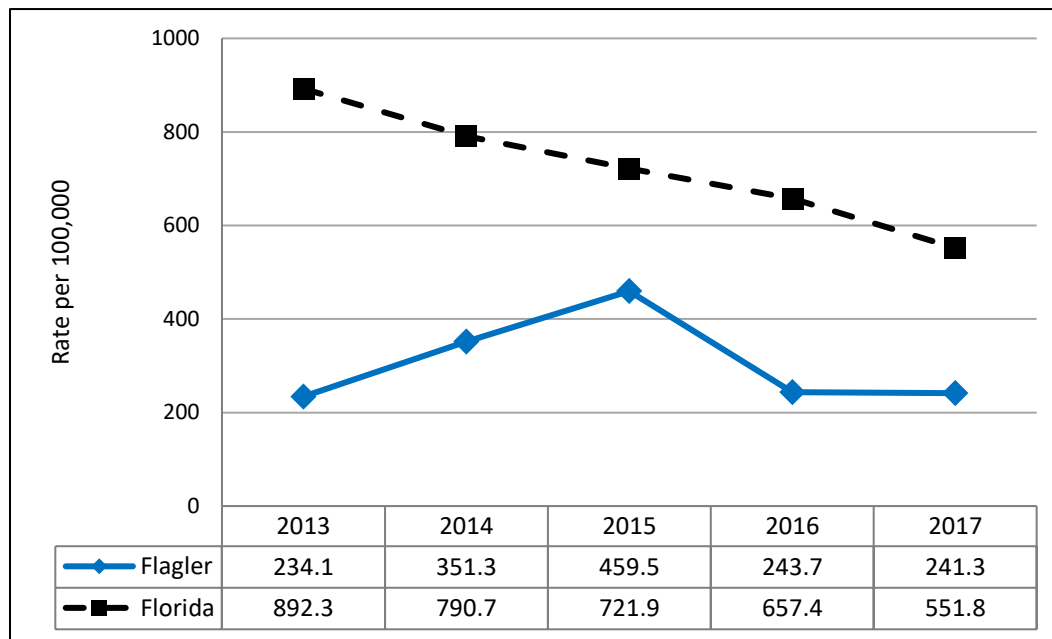
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.34 Deaths from Sudden Unexpected Infant Death Syndrome (SUIDS), 3-Year Rolling Rates



Source: Florida Department of Health, Bureau of Vital Statistics

Figure 4.35 Asthma Hospitalizations, Ages 1-5



Source: Florida Agency for Health Care Administration

5. Family Violence

Violence negatively impacts communities by reducing productivity, decreasing property values, and disrupting social services. The lasting trauma of witnessing or being a victim of violence can have life-long emotional, physical and social consequences.

Domestic Violence: Domestic Violence is any criminal offense resulting in physical injury or death of one family or household member by another family or household member, including assault, battery, sexual assault, sexual battery, stalking, kidnapping, or false imprisonment.

Domestic Violence impacts a large portion of our society. According to the Centers for Disease Control and Prevention, every minute, about 20 people are physically abused by an intimate partner in the U.S. and more than 1 in 3 women will be victims of intimate partner violence in their lifetimes, as will more than 1 in 4 men. Females ages 18 to 24 and 25 to 34 generally experienced the highest rates of intimate partner violence, and abuse is more likely to occur in relationships outside of marriage.

Child Abuse: There are several types of child abuse including physical, sexual, and emotional abuse. Most children who have reported abuse report multiple instances and types. Child abuse and neglect can have enduring physical, intellectual, and psychological repercussions into adolescence and adulthood. All types of child abuse and neglect have long lasting effects throughout life, damaging a child's sense of self, ability to have healthy relationships, and ability to function at home, work, and school.

Survey Snapshot: Top five health issues you are most concerned about in your county?

#5 Response: Child Abuse & Neglect

#8 Response: Domestic Violence

The Adverse Childhood Experiences (ACE) Study is the largest and most influential study of the relationship between childhood adversity and long-term health. As researchers followed participants over time, they discovered that a person's adverse childhood experiences had a strong correlation to numerous health, social, and behavioral problems throughout their lifespan, including being associated with adulthood high-risk health behaviors such as smoking, alcohol and drug abuse, promiscuity, and severe obesity, and correlated with ill-health including depression, heart disease, cancer, diabetes, stroke, chronic lung disease and shortened lifespan, with many of these problems tending to be co-occurring.

Indicators of Concern

| | | Trend | Comparison | # Impacted |
|-----------------------------------|--|-------|------------|------------|
| Domestic Violence Offenses | Figure 5.1. Flagler's Domestic Violence offense rate is higher than Florida. | | ↑ | 714 |
| Child Abuse | Figure 5.3. Flagler's child abuse rates for children age 5-11 exceeded Florida in 2014 to 2017 and the rate of children the same age who experienced sexual violence is higher than Florida and increasing. | ↑ | ↑ | 55 |

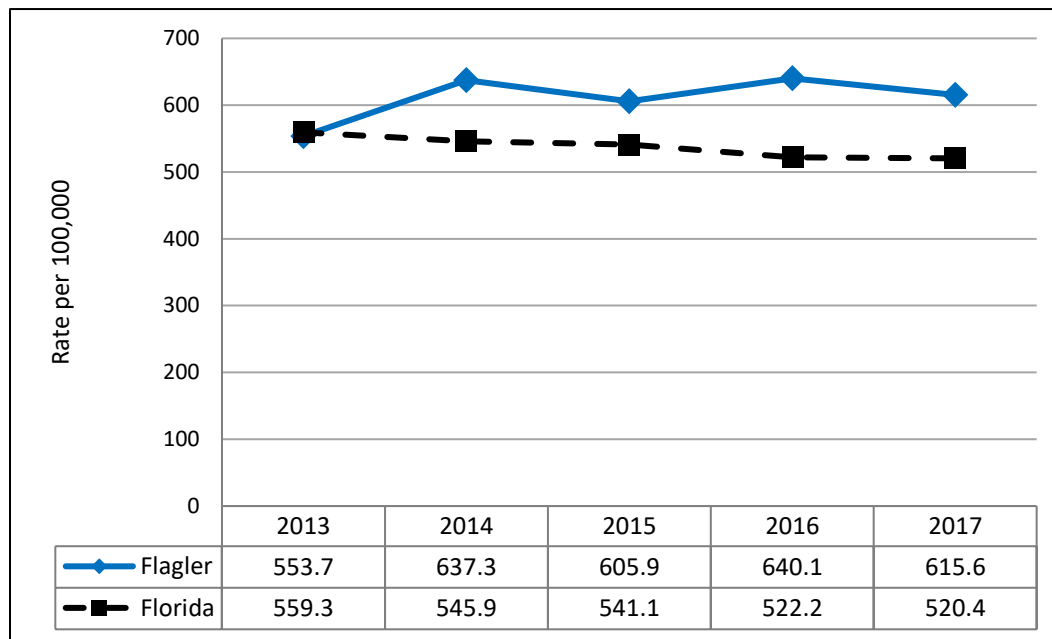
Indicators of Concern

| | | Trend | Comparison | # Impacted |
|--|---|-------|------------|------------|
| Foster Care (infants) Rates | Figure 5.4. The number of Flagler infants in foster care has been increasing since 2012. The number of infants in foster care has been higher than Florida since 2014. | ↑ | ↑ | 11 |
| Foster Care (age 1-5) Rates | Figure 5.5. The number of Flagler children age 1-5 in foster care has been increasing since 2012. | ↑ | | 23 |
| Foster Care (age 5-11, 12-17) Rates | Figure 5.6 and 5.7. The number of Flagler children age 12-17 in foster care has been increasing since 2012. | ↑ | | 33 |

Indicators Included:

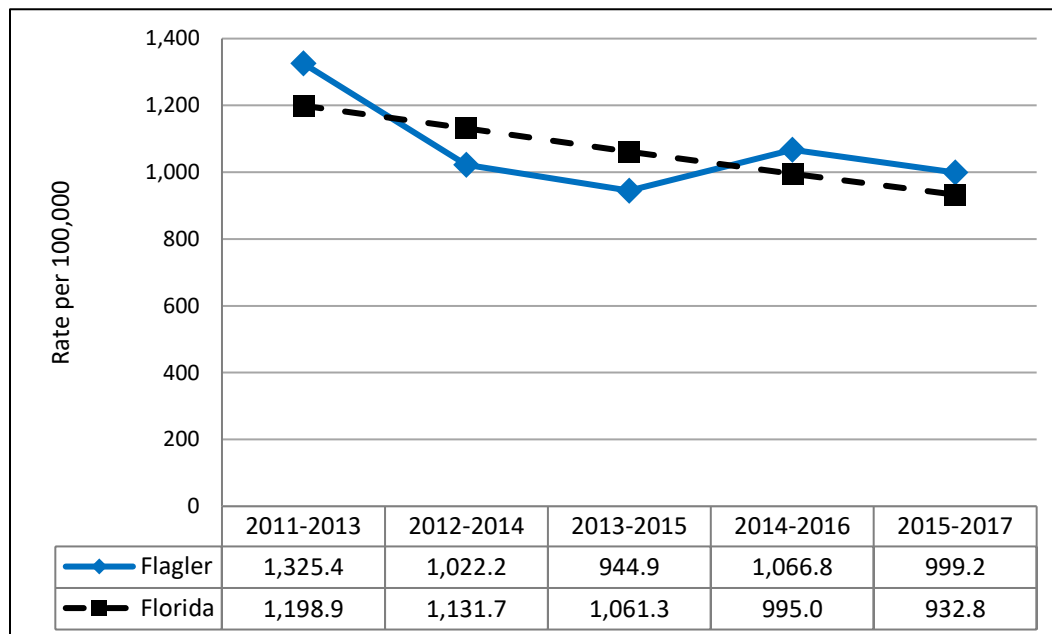
| Indicator | Reference |
|---|------------|
| Domestic Violence Offense Rate | Figure 5.1 |
| Children Experiencing Child Abuse, Ages 5-11 | Figure 5.2 |
| Children Experiences Sexual Violence, Ages 5-11 | Figure 5.3 |
| Infants in Foster Care | Figure 5.4 |
| Children in Foster Care, Ages 1-5 | Figure 5.5 |
| Children in Foster Care, Ages 5-11 | Figure 5.6 |
| Children in Foster Care, Ages 12-17 | Figure 5.7 |

Figure 5.1 Domestic Violence Offense Rate



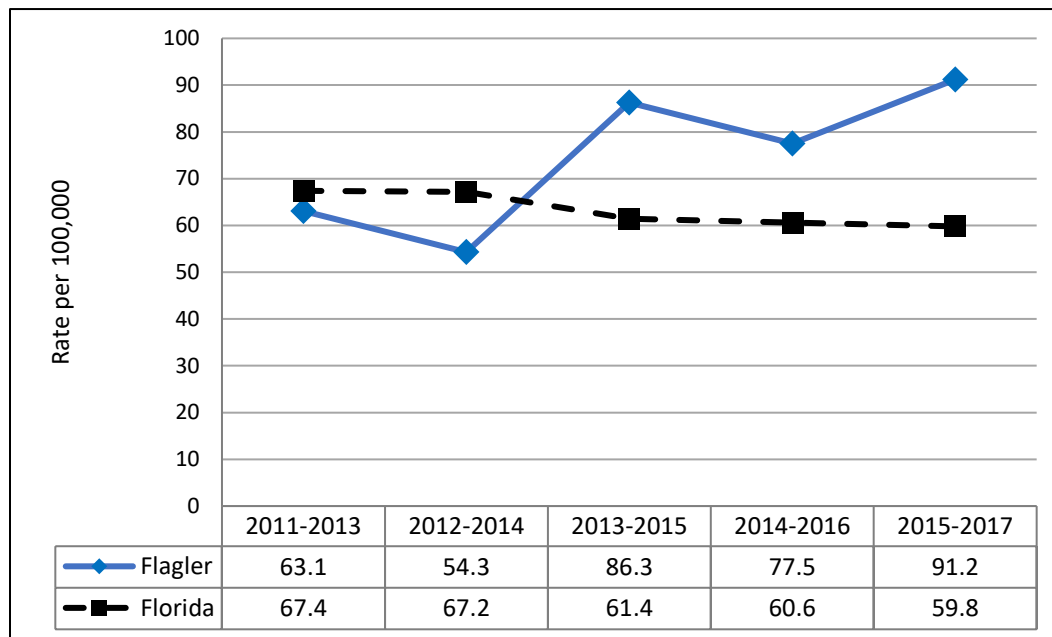
Source: Florida Department of Law Enforcement

Figure 5.2 Children Experiencing Child Abuse, Ages 5-11, 3-Year Rolling Rates



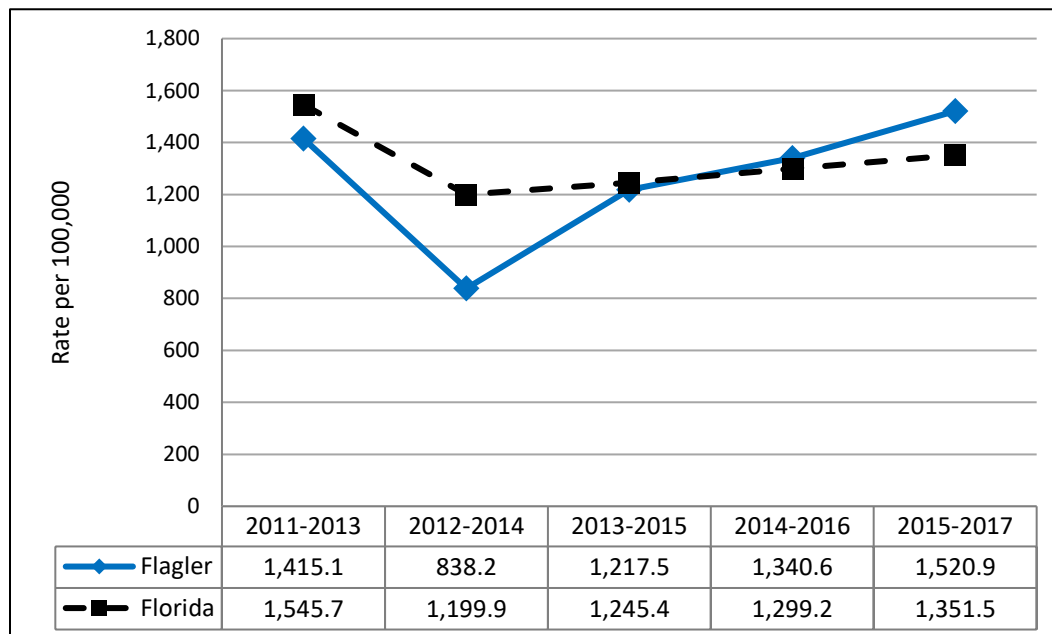
Source: Department of Children and Families, Florida Safe Families Network Data Repository

Figure 5.3 Children Experiencing Sexual Violence, Ages 5-11, 3-Year Rolling Rates



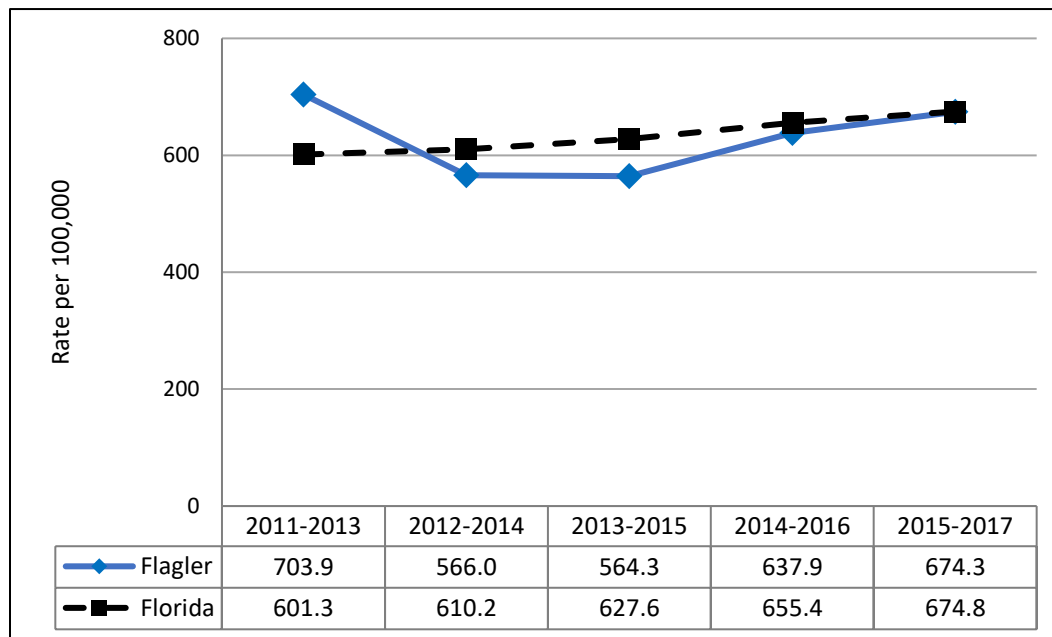
Source: Department of Children and Families, Florida Safe Families Network Data Repository

Figure 5.4 Infants in Foster Care, 3-Year Rolling Rates



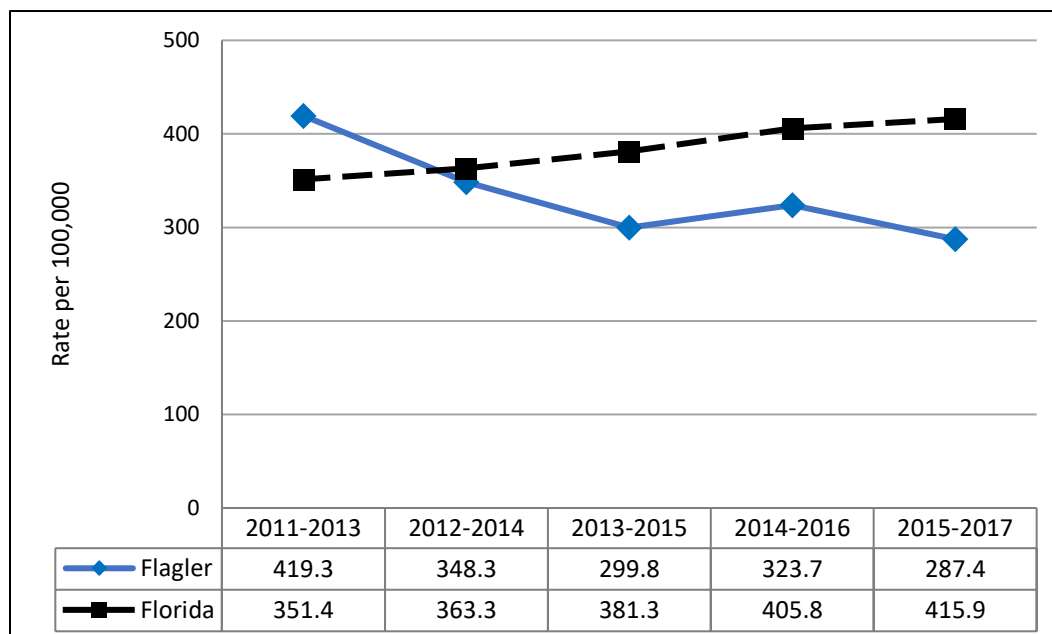
Source: Department of Children and Families, Florida Safe Families Network Data Repository

Figure 5.5 Children in Foster Care, Ages 1-5, 3-Year Rolling Rates



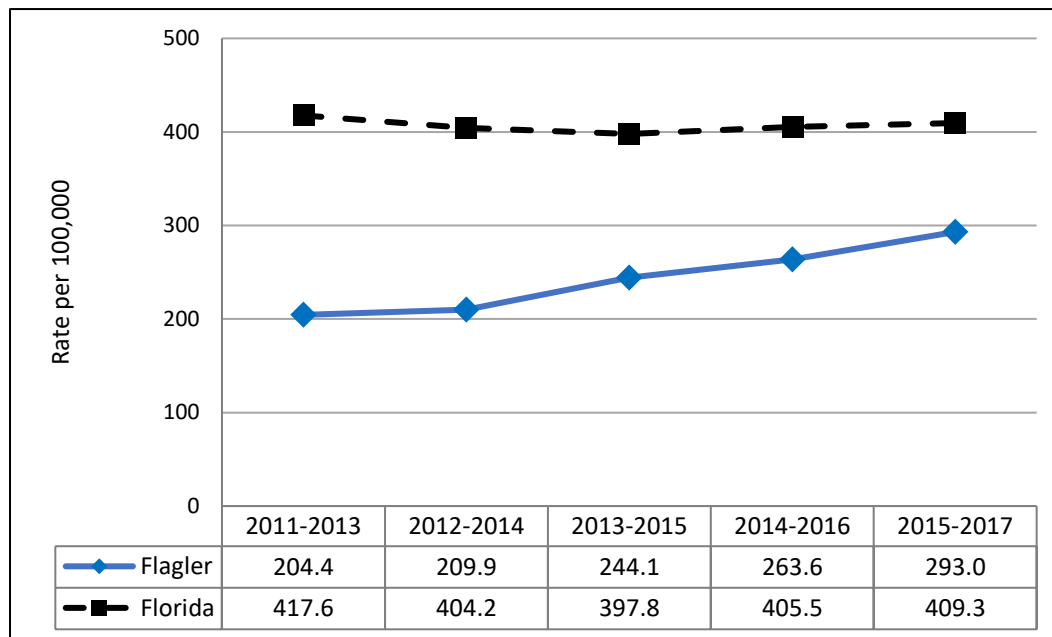
Source: Department of Children and Families, Florida Safe Families Network Data Repository

Figure 5.6 Children in Foster Care, Ages 5-11, 3-Year Rolling Rates



Source: Department of Children and Families, Florida Safe Families Network Data Repository

Figure 5.7 Children Ages 12-17 in Foster Care, 3-Year Rolling Rates



Source: Department of Children and Families, Florida Safe Families Network Data Repository

6. Respiratory Disorders & Cancer

Respiratory disease is a medical term that encompasses pathological conditions affecting the organs and tissues that make gas exchange possible and includes conditions of the upper respiratory tract, trachea, bronchi, bronchioles, alveoli, pleura and pleural cavity, and the nerves and muscles of breathing. Respiratory diseases can range from mild conditions such as the common cold, to life-threatening conditions such as COPD, pneumonia, pulmonary embolism, and lung cancer.

Asthma: Asthma causes the airways to become inflamed and hypersensitive to environmental allergens, irritants and viral infections. Although this chronic disease is most commonly diagnosed during childhood, it affects all age groups.

Chronic Lower Respiratory Disease (CLRD) and Chronic Obstructive Pulmonary Disease (COPD):

Chronic obstructive pulmonary disease, emphysema, chronic bronchitis and other respiratory illnesses are all grouped together under the name Chronic Lower Respiratory Disease. COPD is most commonly a mix of chronic bronchitis and emphysema, and usually results from tobacco use, although it can also be a result of pollutants in the air, genetic factors, and respiratory infections. There is no cure for COPD, but smoking cessation, medications, and therapy or surgery can help individuals manage their symptoms.

Cancer: Cancer is a leading cause of death in the United States and the leading cause of death in Flagler County. The National Cancer Institute (NCI) defines cancer as a term used to describe diseases in which abnormal cells divide without control and are able to invade other tissues. There are over 100 different types of cancer. Early detection and routine screening could reduce the billions of dollars spent on cancer treatment annually.

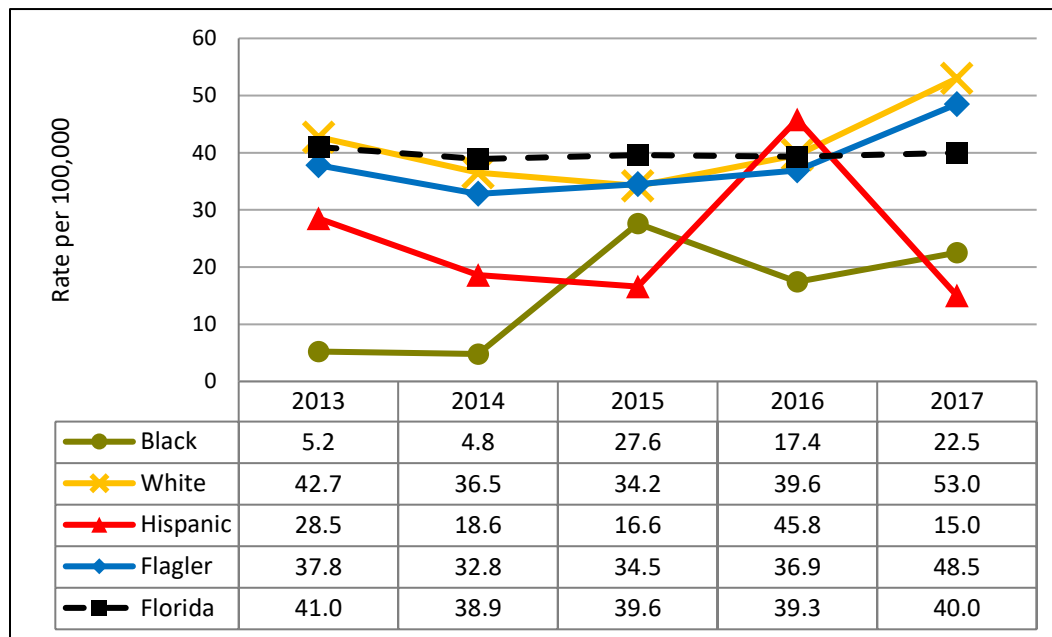
Indicators of Concern

| | | Trend | Comparison | # Impacted |
|---|--|-------|------------|------------|
| Chronic Lower Respiratory Disease (CLRD) Death | Figure 6.1. The Flagler rate of CLRD deaths is increasing since 2015 and was higher than Florida in 2017. | ↑ | ↑ | 94 |
| Asthma Hospitalizations | Figure 6.4. Asthma hospitalizations for Flagler black individuals is higher than Florida. | | ↑ | 50 |
| Colorectal Cancer Deaths | Figure 6.11. Flagler's death rate for colorectal cancer has been slightly higher than Florida since 2012. | | ↑ | 24 |
| Colorectal Incidence Rate | Figure 6.10. Flagler's incidence rate for colorectal cancer has been higher than Florida since 2012. | | ↑ | 65 |
| Prostate Cancer Deaths | Figure 6.13. Flagler's prostate cancer death rate for black individuals is higher than Florida but decreasing since 2014. | ↓ | ↑ | 14 |

Indicators Included:

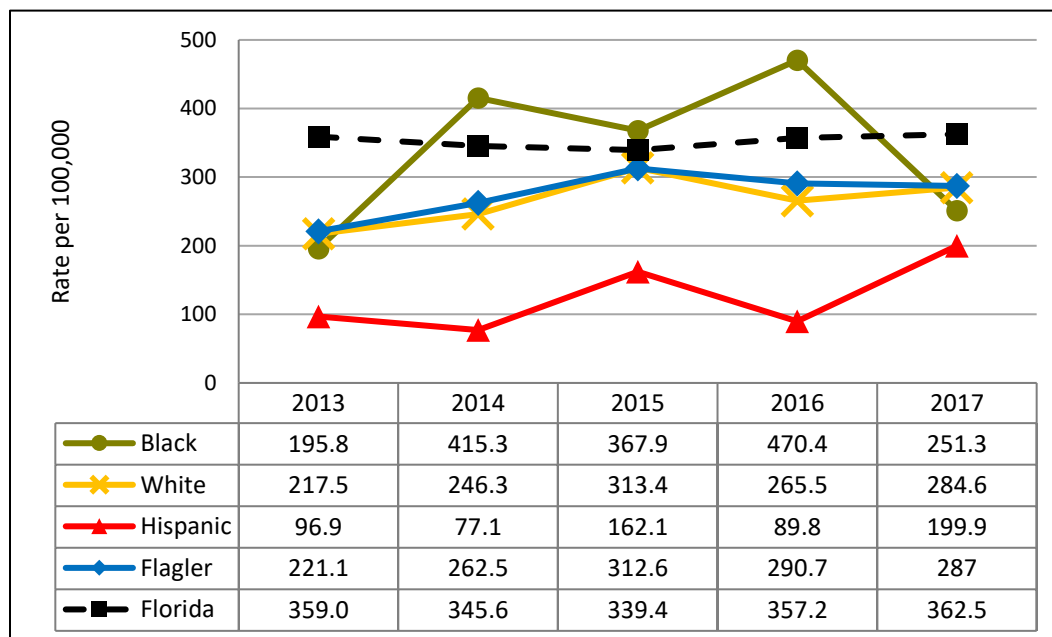
| Indicator | Reference |
|--|-------------|
| Chronic Lower Respiratory Disease (CLRD) Age-adjusted Death Rate | Figure 6.1 |
| Chronic Lower Respiratory Disease (CLRD) Age-adjusted Hospitalizations w/ Asthma | Figure 6.2 |
| Age-adjusted Hospitalizations From or With Asthma | Figure 6.3 |
| Asthma Age-adjusted Hospitalization | Figure 6.4 |
| Asthma Hospitalizations, Ages 5-11 | Figure 6.5 |
| Asthma Hospitalizations, Ages 12-18 | Figure 6.6 |
| Adults Who Currently Have Asthma | Figure 6.7 |
| Cervical Cancer 3-Year Age-adjusted Incidence Rate | Figure 6.8 |
| Cervical Cancer 3-Year Age-adjusted Death Rate | Figure 6.9 |
| Colorectal Cancer Age-adjusted Incidence Rate | Figure 6.10 |
| Colorectal Cancer Age-adjusted Death Rate | Figure 6.11 |
| Prostate Cancer Age-adjusted Incidence Rate | Figure 6.12 |
| Prostate Cancer Age-adjusted Death Rate | Figure 6.13 |
| Female Medicare Enrollees Ages 65-74 that Receive Mammography Screening | Figure 6.14 |

Figure 6.1 Chronic Lower Respiratory Disease (CLRD) Age-adjusted Death Rates



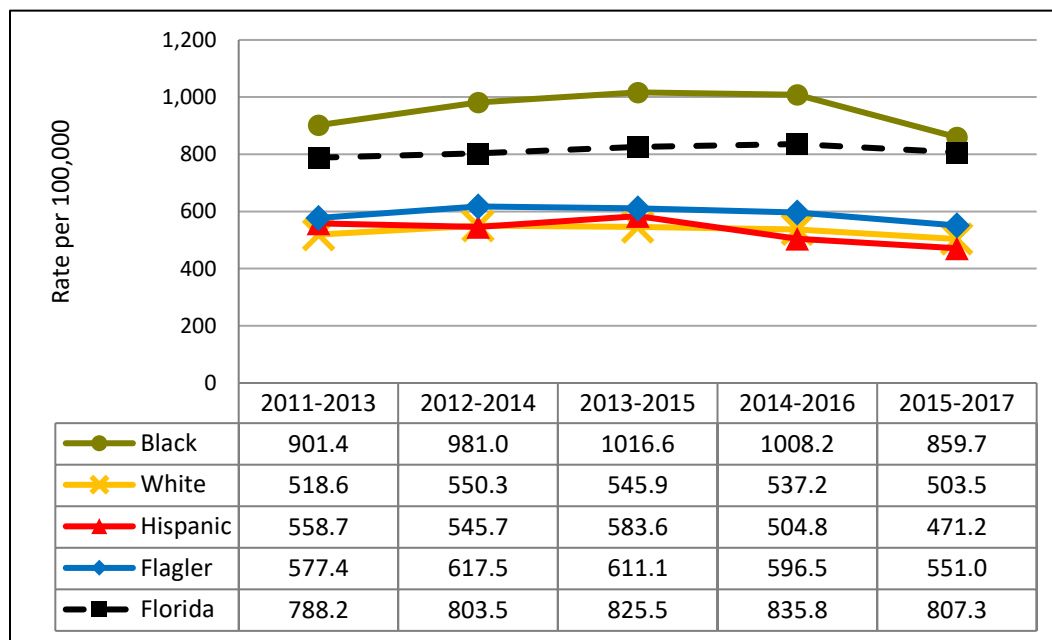
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 6.2 Chronic Lower Respiratory Disease (CLRD) Age-adjusted Hospitalizations (Including Asthma)



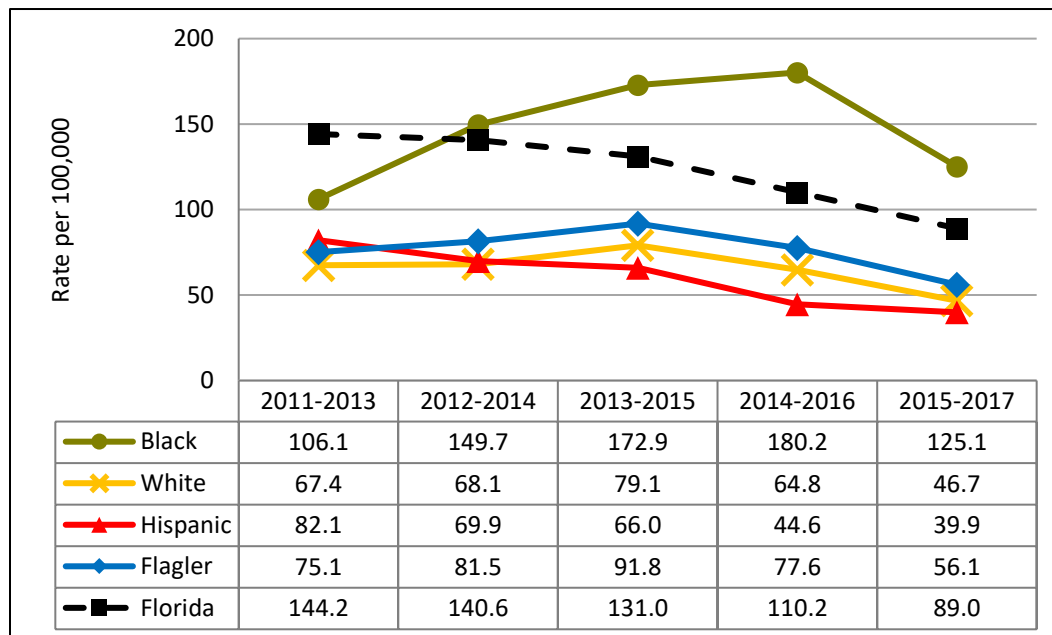
Source: Florida Agency for Health Care Administration

Figure 6.3 Age-adjusted Hospitalizations From or With Asthma, 3-year Rolling Rates



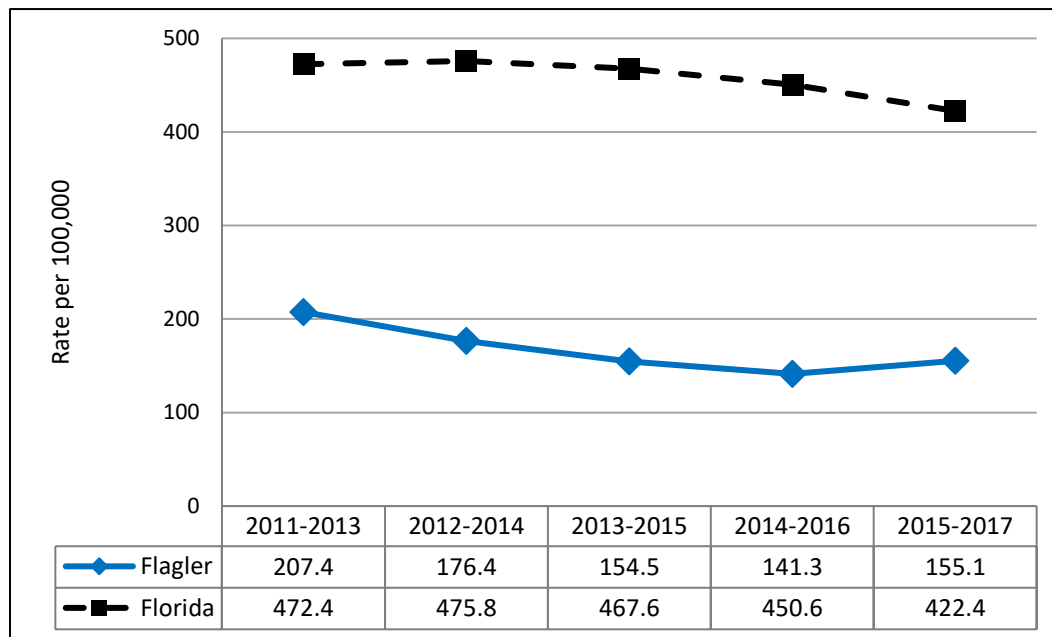
Source: Florida Department of Health, Bureau of Vital Statistics
 Note: Includes both primary and contributing diagnoses

Figure 6.4 Asthma Age-adjusted Hospitalizations, 3-year Rolling Rates



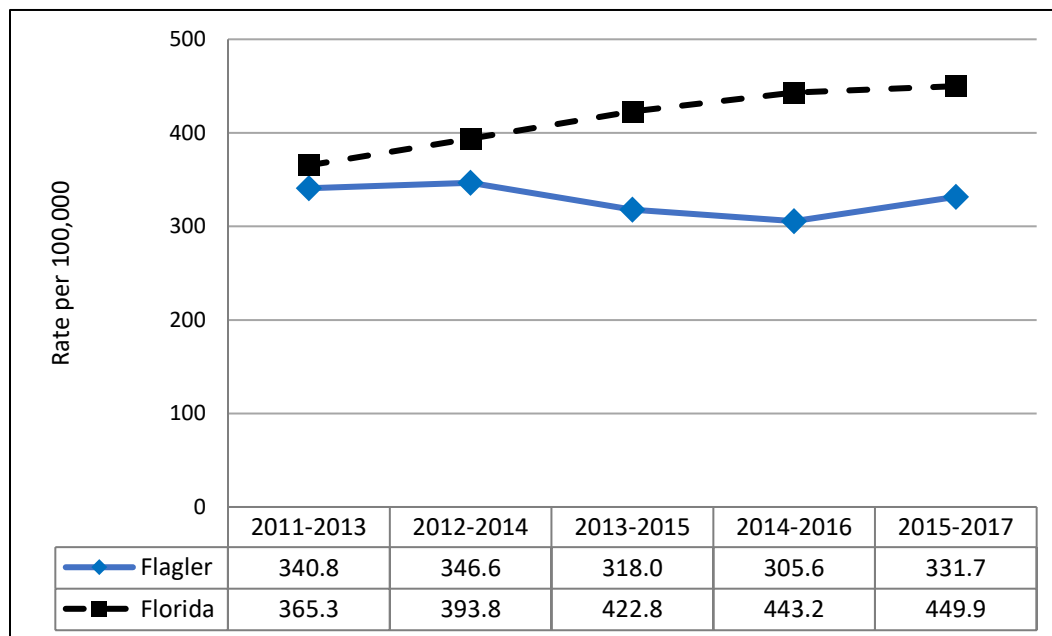
Source: Florida Department of Health, Bureau of Vital Statistics
 Note: Includes primary diagnoses only

Figure 6.5 Asthma Hospitalizations, Ages 5-11, 3-year Rolling Rates



Source: Florida Agency for Health Care Administration
 Note: Includes both primary and contributing diagnoses

Figure 6.6 Asthma Hospitalizations, Ages 12-18, 3-year Rolling Rates



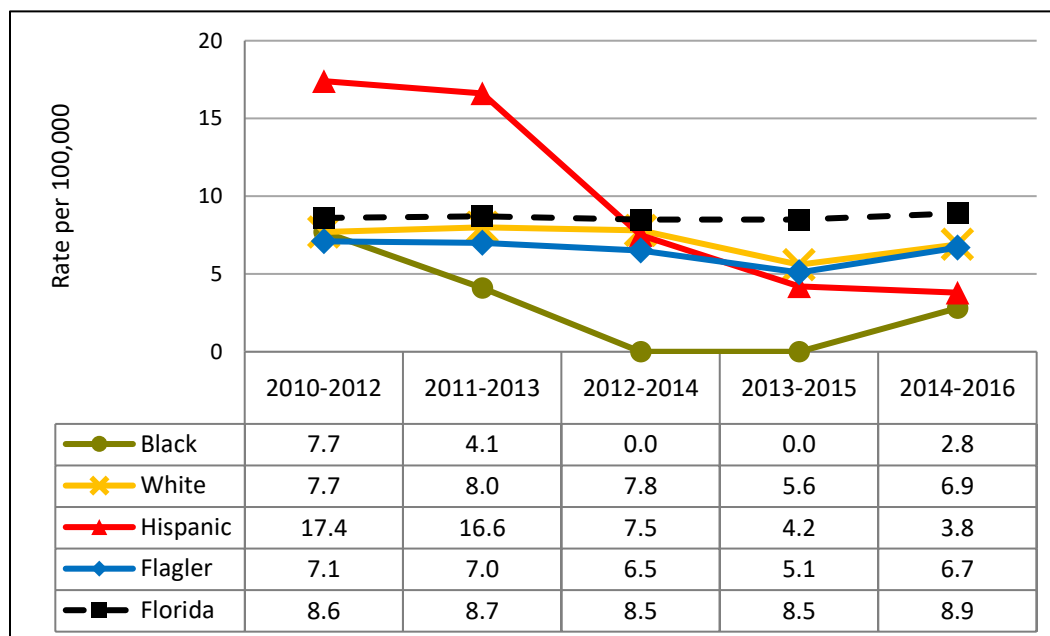
Source: Florida Agency for Health Care Administration
 Note: Includes both primary and contributing diagnoses

Figure 6.7 Adults Who Currently Have Asthma

| Adults who currently have asthma, 2016 | Flagler | Florida |
|--|---------|---------|
| | Percent | Percent |
| Total – Overall | 5.7 | 6.7 |
| Men | 4.0 | 5.2 |
| Women | 6.9 | 8.2 |
| Non-Hispanic, White | 5.8 | 6.9 |
| Non-Hispanic, Black | 9.3 | 7.6 |
| Hispanic | NA | 5.9 |
| 18-44 | 7.0 | 6.6 |
| 45-64 | 5.1 | 7.6 |
| 65 & Older | 5.6 | 5.9 |
| < High School | NA | 8.9 |
| High School/GED | 4.9 | 6.7 |
| > High School | 5.4 | 6.3 |
| < \$25,000 | 12.7 | 9.1 |
| \$25,000-\$49,999 | 3.4 | 5.8 |
| \$50,000 or More | 4.3 | 6.0 |

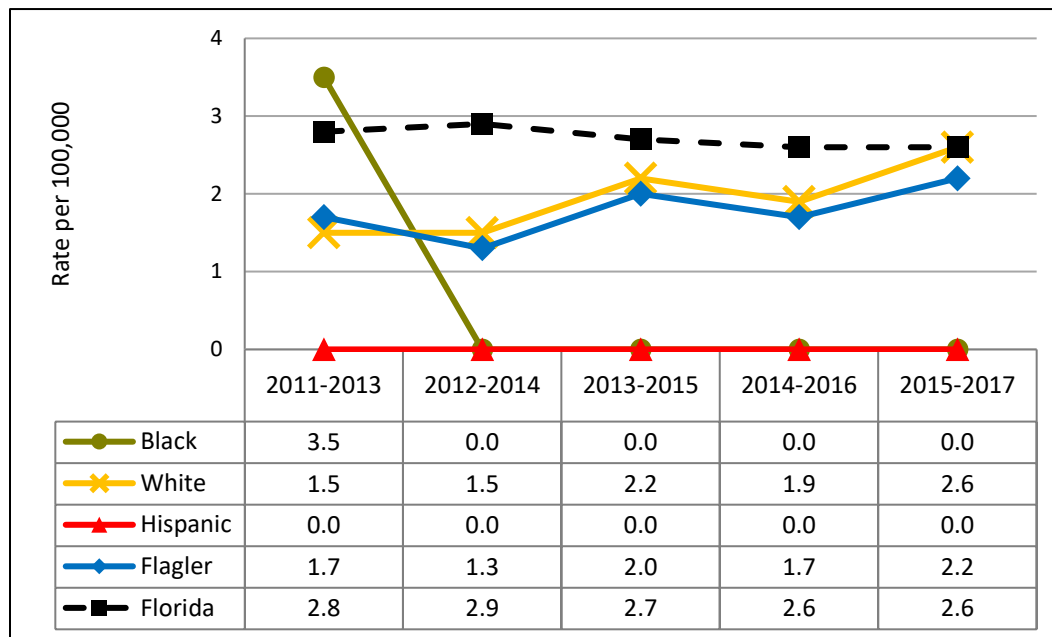
Source: Florida Behavioral Risk Factor Surveillance System
 NA=Not available due to respondent counts of less than 30

Figure 6.8 Age-adjusted Cervical Cancer Incidence, 3-Year Rolling Rates



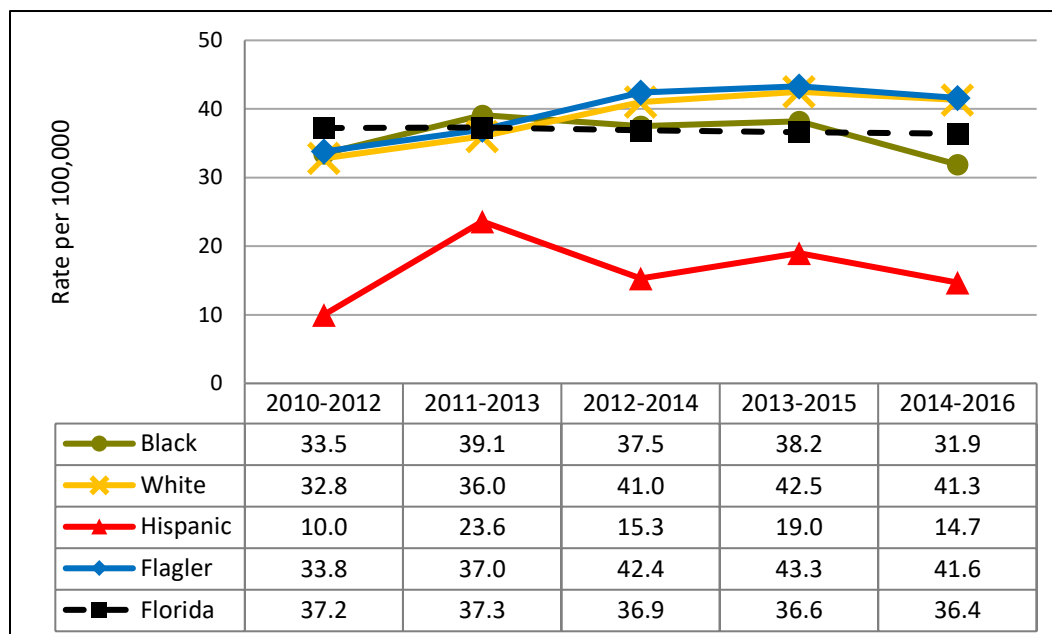
Source: University of Miami (FL) Medical School, Florida Cancer Data System

Figure 6.9 Age-adjusted Cervical Cancer Deaths, 3-Year Rolling Rates



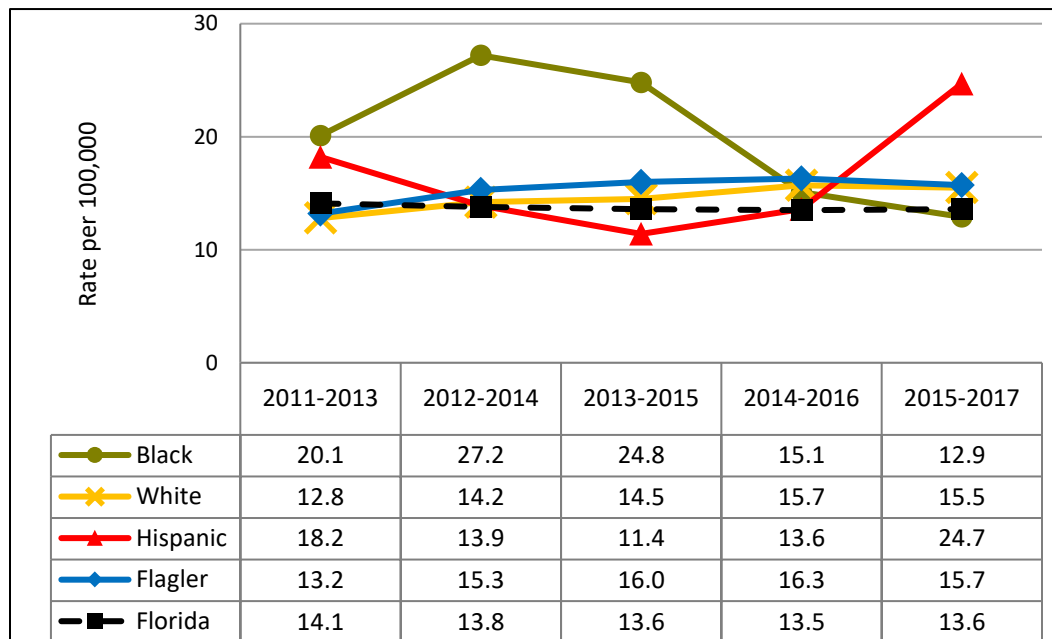
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 6.10 Colorectal Cancer Age-adjusted Incidence, 3-Year Rolling Rates



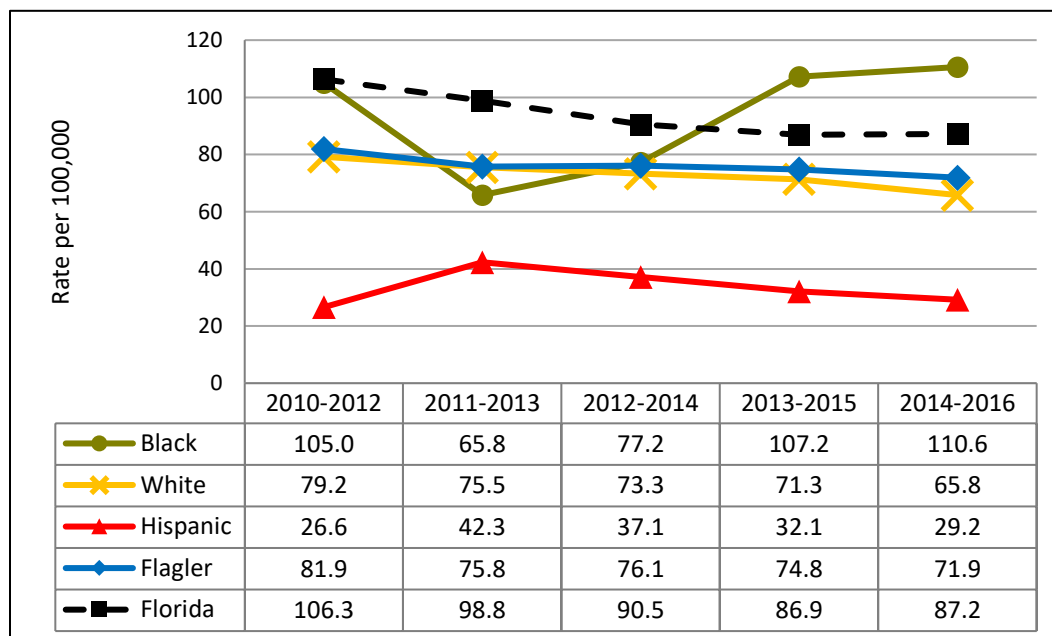
Source: University of Miami (FL) Medical School, Florida Cancer Data System

Figure 6.11 Colorectal Cancer Age-adjusted Deaths, 3-Year Rolling Rates



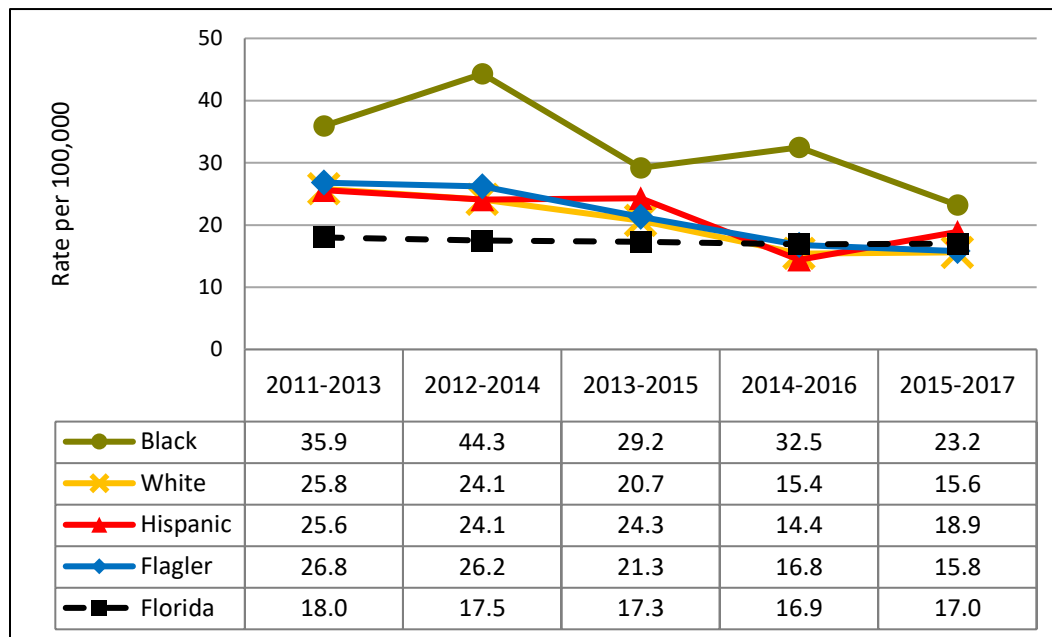
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 6.12 Prostate Cancer Age-adjusted Incidence, 3-Year Rolling Rates



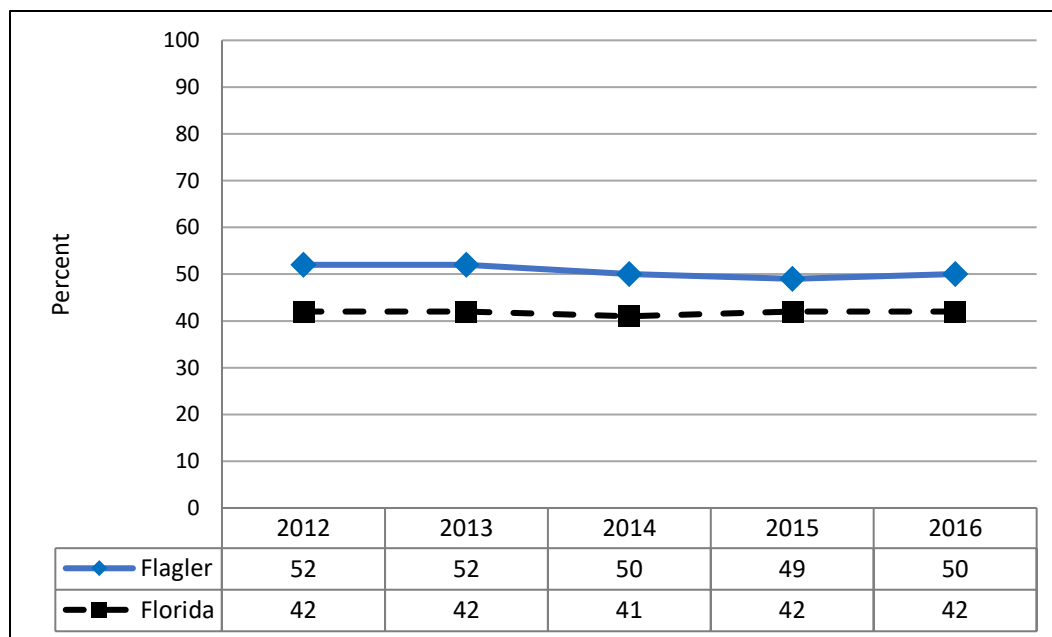
Source: University of Miami (FL) Medical School, Florida Cancer Data System

Figure 6.13 Prostate Cancer Age-adjusted Deaths, 3-Year Rolling Rates



Source: Florida Department of Health, Bureau of Vital Statistics

Figure 6.14 Female Medicare Enrollees Ages 65-74 that Receive Mammography Screening



Source: Dartmouth Atlas of Health Care

7. Communicable & Infectious Diseases

Communicable diseases spread from one person to another or from an animal to a person. The spread is often through airborne viruses or bacteria but can also happen via bodily fluids. There are many ways to prevent the spread of disease. Vaccinations have helped eliminate or greatly reduced disease threats. Proper handwashing, especially before and after handling food and using the toilet, helps keep germs at bay. Other important ways to slow or stop disease transmission are by ensuring the food we eat and water we drink is safe, avoiding people who are sick and practicing safe sex.

| Indicators of Concern | | Trend | Comparison | # Impacted |
|--------------------------|--|-------|------------|------------|
| HIV Testing | Figure 7.2. The Flagler percent of adults who have been tested for HIV is lower than Florida. | | ↓ | |
| HIV Cases | Figure 7.3. The Flagler rate of newly reported HIV cases has been increasing for all race/ethnicities since 2013. The rate for Flagler black individuals has been higher than Florida since 2013. | ↑ | ↑ | 10 |
| HIV Death Rate | Figure 7.5. The HIV/AIDS death rate for Flagler is increasing for black individuals | ↑ | | 2 |
| Bacterial STDs | Figure 7.6. Flagler's rate of bacterial STDs has increased since 2013 but is lower than Florida. | ↑ | ↓ | 413 |
| Tuberculosis (TB) | Figure 7.11. Flagler's rate of TB cases has increased since 2013 and is now higher than Florida. | ↑ | ↑ | 5 |
| Hepatitis B | Figure 7.13. Flagler's acute hepatitis B rate has increased since 2013 but is still lower than Florida. | ↑ | ↓ | 3 |

Indicators Included:

| Indicator | Reference |
|---|-------------|
| Adults Who Received a Flu Shot in the Past Year | Figure 7.1 |
| Percentage of Adults Who Have Ever Been Tested for HIV | Figure 7.2 |
| Newly Reported HIV Cases | Figure 7.3 |
| Newly Reported AIDS Cases | Figure 7.4 |
| HIV/AIDS Age-adjusted Death Rate | Figure 7.5 |
| Bacterial STDs (Gonorrhea, Chlamydia & Infectious Syphilis) | Figure 7.6 |
| Bacterial STDs (Gonorrhea, Chlamydia & Infectious Syphilis), Ages 15-19 | Figure 7.7 |
| Selected Vaccine Preventable Diseases | Figure 7.8 |
| Pertussis Reported | Figure 7.9 |
| Meningococcal Disease Reported | Figure 7.10 |
| Tuberculosis (TB) Cases Reported | Figure 7.11 |
| Hepatitis A Cases Reported | Figure 7.12 |
| Hepatitis B, Acute Cases Reported | Figure 7.13 |
| Pneumonia/Influenza 3-Year Age-adjusted Resident Death Rate | Figure 7.14 |

Figure 7.1 Adults Who Received a Flu Shot in The Past Year

| Adults who have received a flu shot in the past year, 2016 | Flagler | Florida |
|--|---------|---------|
| | Percent | Percent |
| Total – Overall | 42.9* | 35.0 |
| Men | 39.2 | 32.8 |
| Women | 45.5* | 37.0 |
| Non-Hispanic, White | 43.8 | 39.8 |
| Non-Hispanic, Black | 33.1 | 26.3 |
| Hispanic | NA | 27.6 |
| 18-44 | 23.5 | 23.0 |
| 45-64 | 32.2 | 32.7 |
| 65 & Older | 59.0 | 57.4 |
| < High School | NA | 31.4 |
| High School/GED | 38.8 | 32.1 |
| > High School | 45.1 | 37.3 |
| < \$25,000 | 42.0 | 29.8 |
| \$25,000-\$49,999 | 35.2 | 34.3 |
| \$50,000 or More | 45.0 | 37.7 |

Source: Florida Behavioral Risk Factor Surveillance System

NA=Not available due to respondent counts of less than 30

*Indicates the difference observed between the county and state measure is statistically significant

Figure 7.2 Adults Who Have Ever Been Tested for HIV

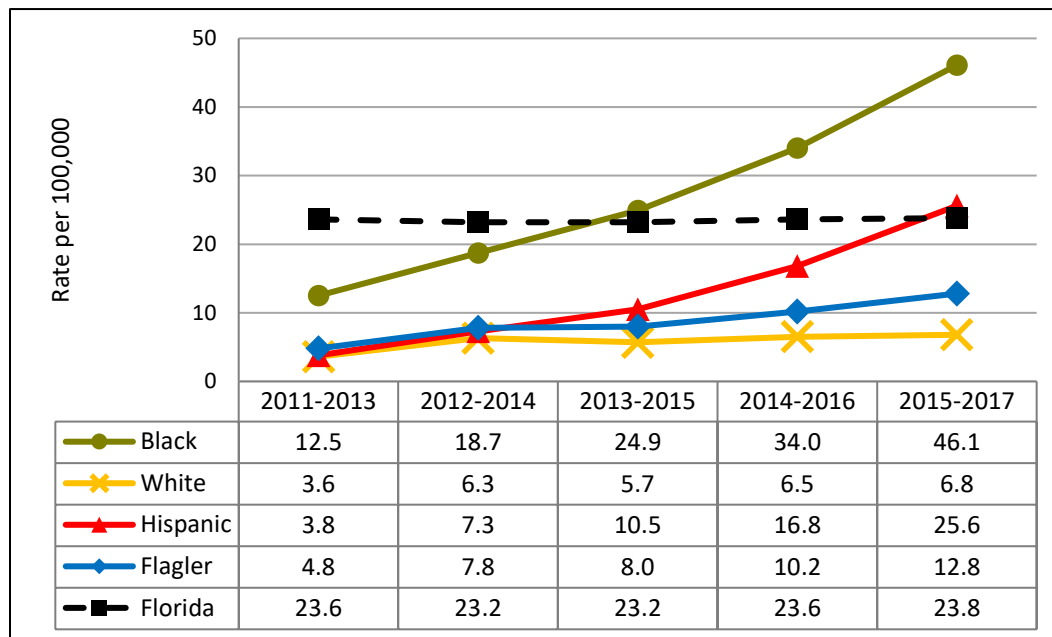
| Adults who have ever been tested for HIV, 2016 | Flagler | Florida |
|--|---------|---------|
| | Percent | Percent |
| Total – Overall | 33.5* | 46.9 |
| Men | 32.6* | 45.8 |
| Women | 34.2* | 48.0 |
| Non-Hispanic, White | 33.2 | 39.8 |
| Non-Hispanic, Black | 37.9* | 64.8 |
| Hispanic | NA | 55.9 |
| 18-44 | 62.7 | 58.8 |
| 45-64 | 34.4* | 50.5 |
| 65 & Older | 21.1 | 21.6 |
| < High School | NA | 48.9 |
| High School/GED | 28.8* | 43.1 |
| > High School | 37.1* | 48.5 |
| < \$25,000 | 33.8* | 52.7 |
| \$25,000-\$49,999 | 41.4 | 45.7 |
| \$50,000 or More | 30.8* | 46.7 |

Source: Florida Behavioral Risk Factor Surveillance System

NA=Not available due to respondent counts of less than 30

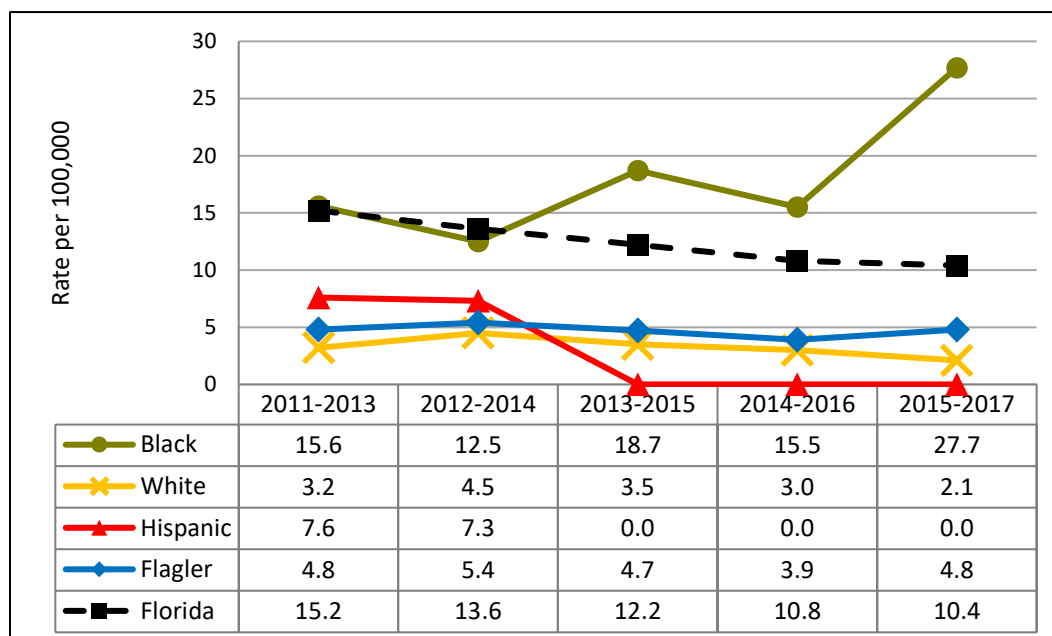
*Indicates the difference observed between the county and state measure is statistically significant

Figure 7.3 Newly Reported HIV Cases, 3-Year Rolling Rates



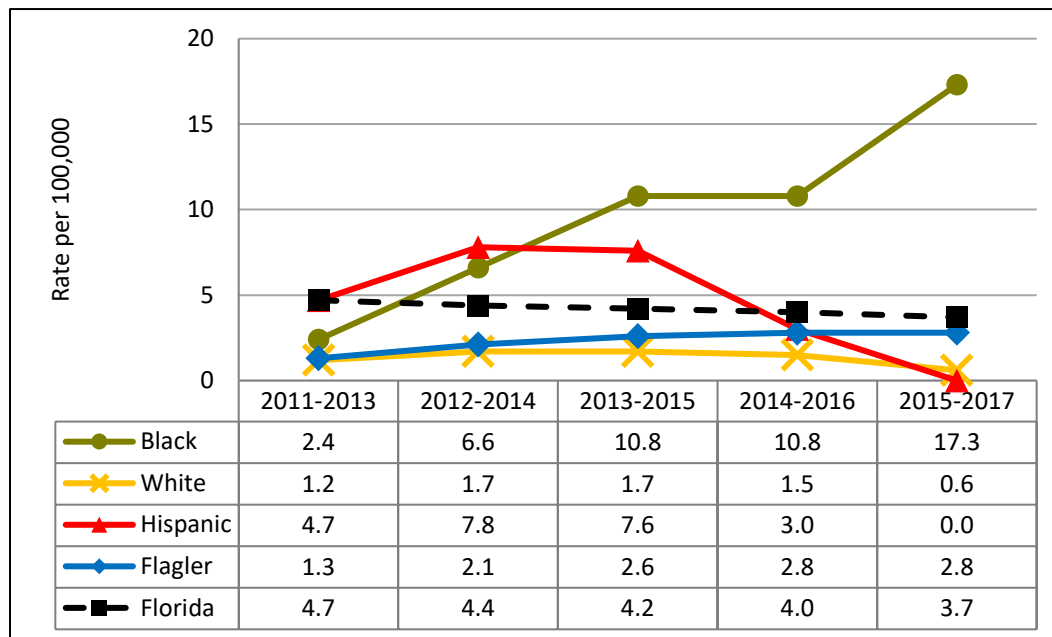
Source: Florida Department of Health, Bureau of HIV/AIDS
 Note: Black=Non-Hispanic Black; White=Non-Hispanic White

Figure 7.4 Newly Reported AIDS Cases, 3-Year Rolling Rates



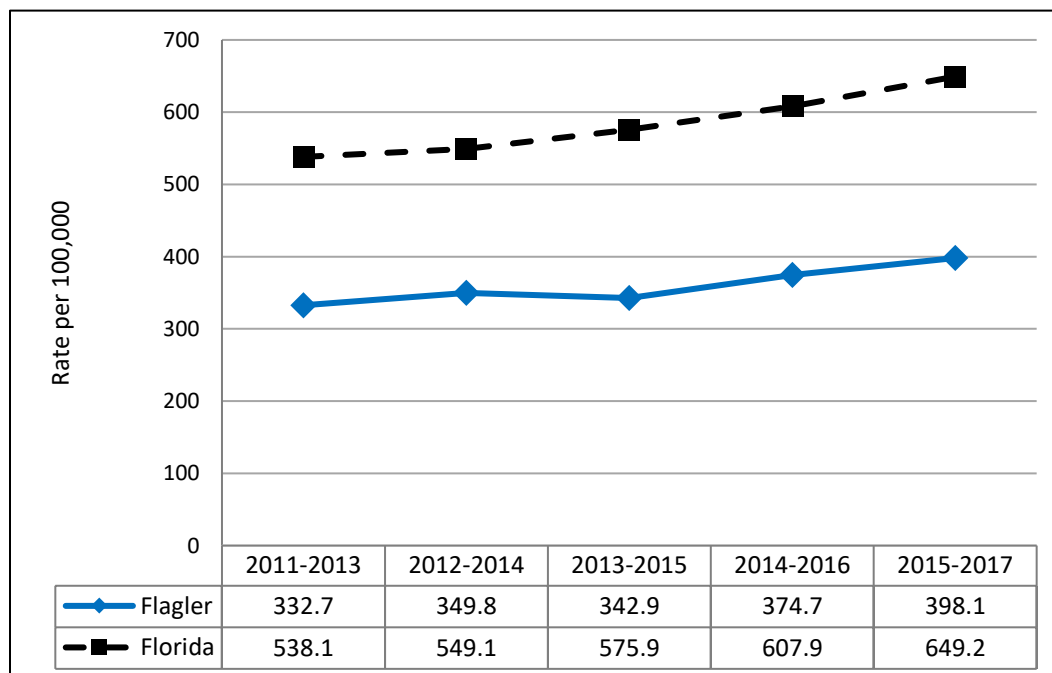
Source: Florida Department of Health, Bureau of HIV/AIDS
 Note: Black=Non-Hispanic Black; White=Non-Hispanic White

Figure 7.5 HIV/AIDS Age-adjusted Death Rate, 3-Year Rolling Rates



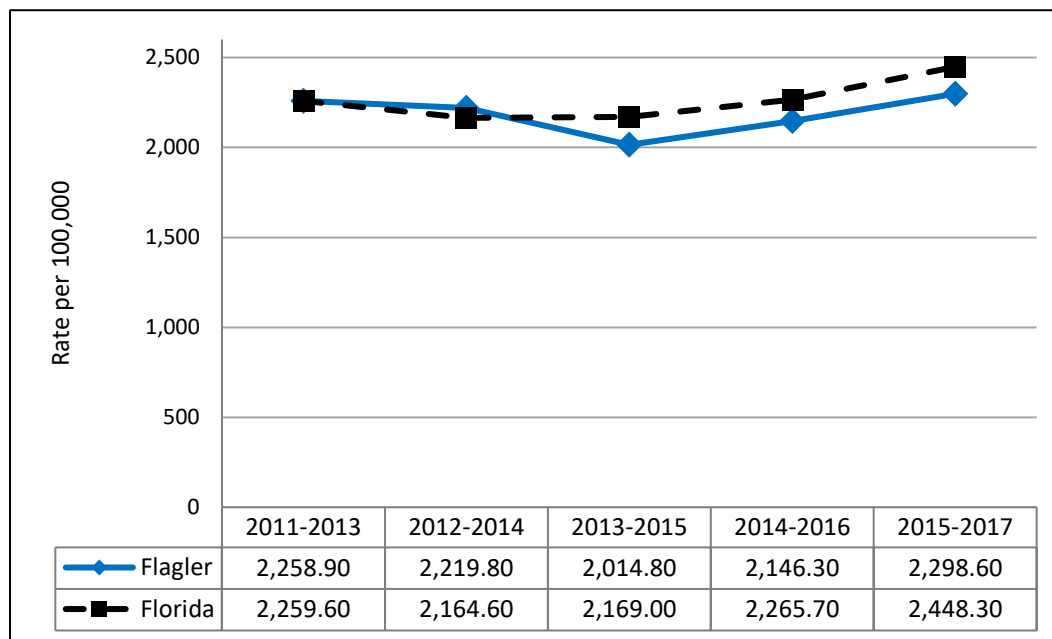
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 7.6 Bacterial STDs (Gonorrhea, Chlamydia, & Infectious Syphilis), 3-Year Rolling Rates



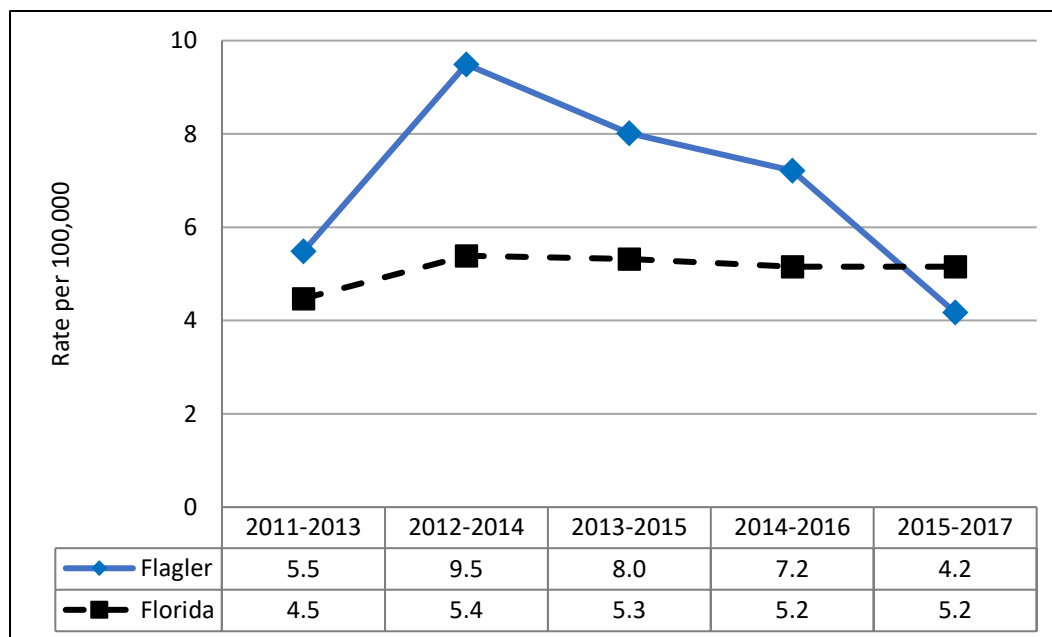
Source: Florida Department of Health, Bureau Communicable Disease

Figure 7.7 Bacterial STDs (Gonorrhea, Chlamydia, & Infectious Syphilis), Ages 15-19, 3-Year Rolling Rates



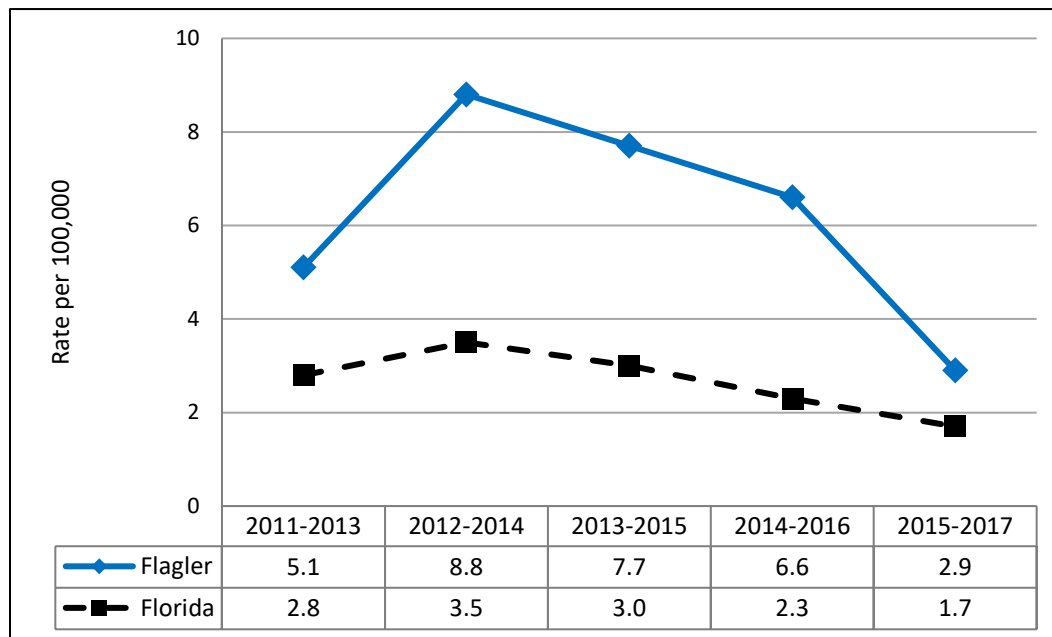
Source: Florida Department of Health, Bureau Communicable Disease

Figure 7.8 Selected Vaccine Preventable Diseases



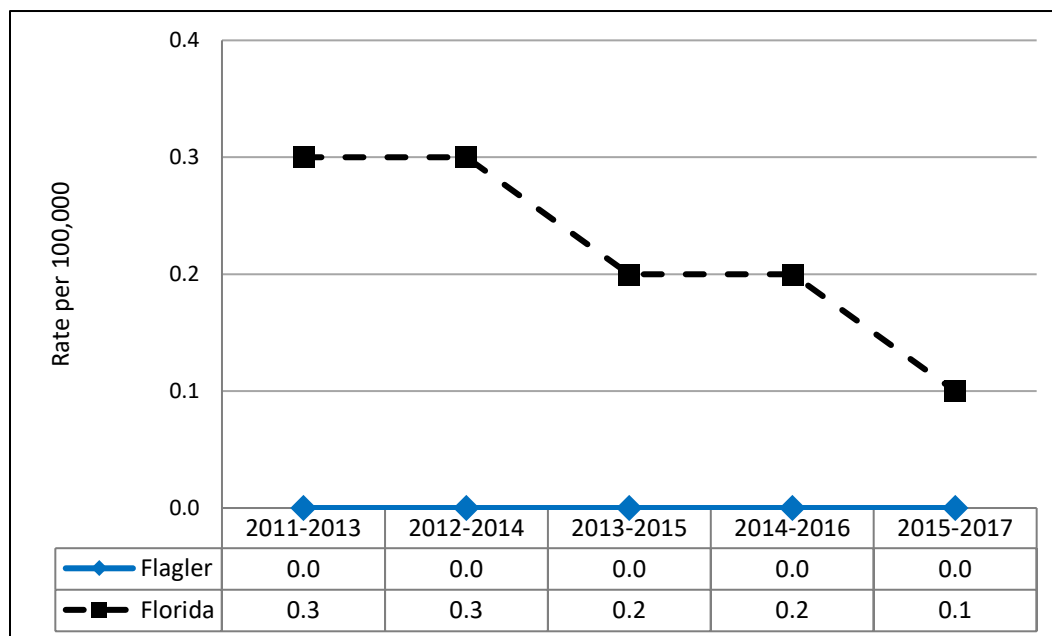
Source: Florida Department of Health, Bureau of Epidemiology

Figure 7.9 Pertussis Reported, 3-Year Rolling Rates



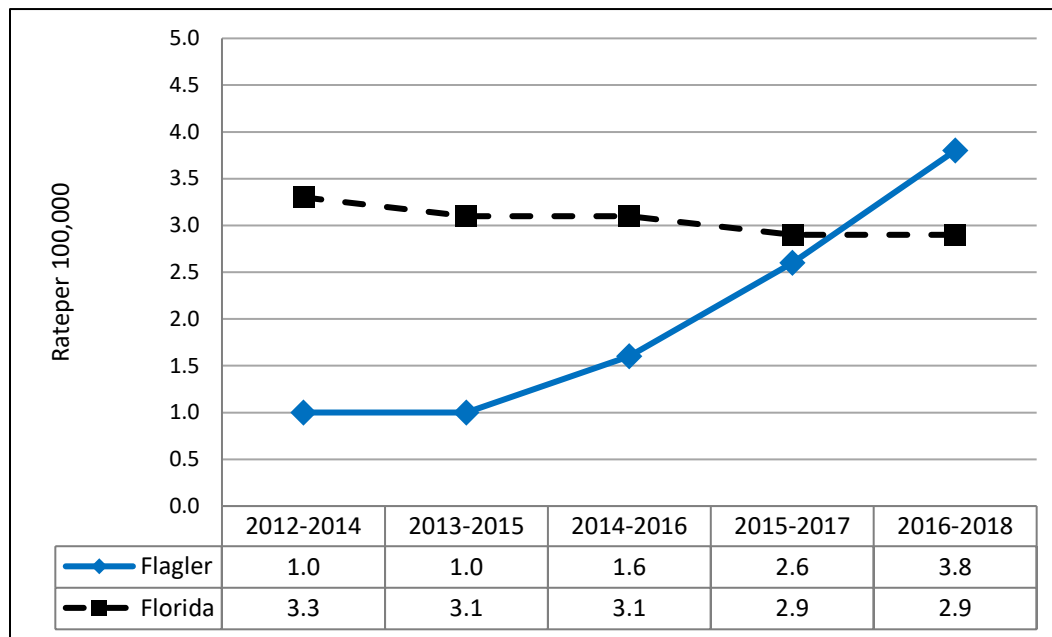
Source: Merlin, Florida's Web-Based Reportable Disease Surveillance System

Figure 7.10 Meningococcal Disease Reported, 3-Year Rolling Rates



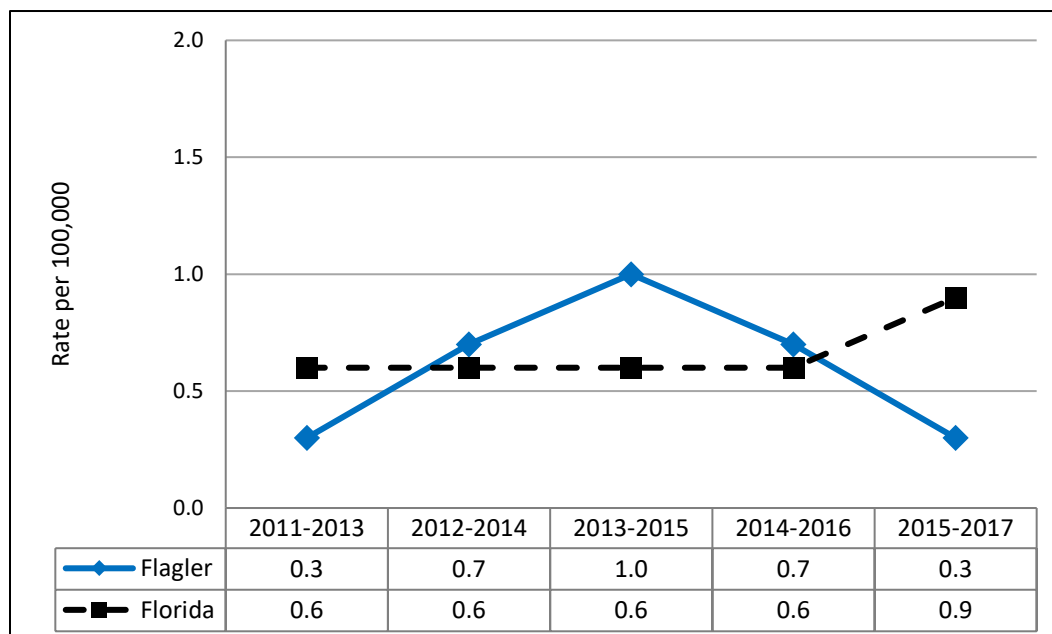
Source: Florida Department of Health, Bureau of Epidemiology

Figure 7.11 Tuberculosis (TB) Cases Reported, 3-Year Rolling Rates



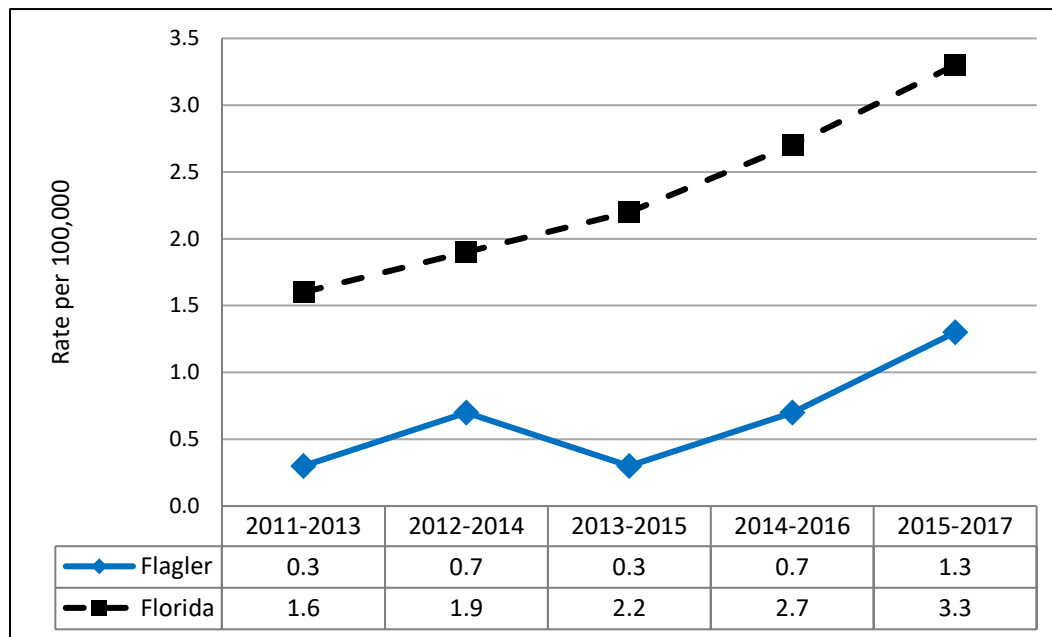
Source: Florida Department of Health, Division of Disease Control and Health Protection, Tuberculosis Section

Figure 7.12 Hepatitis A Cases Reported, 3-Year Rolling Rates



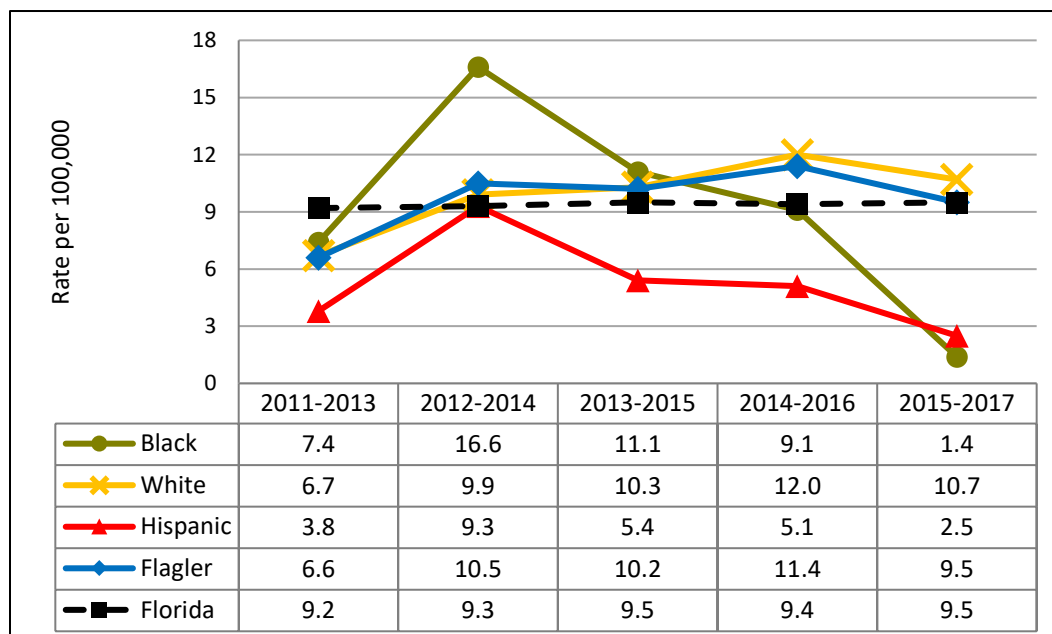
Source: Merlin, Florida's Web-Based Reportable Disease Surveillance System

Figure 7.13 Hepatitis B, Acute Cases Reported, 3-Year Rolling Rates



Source: Merlin, Florida's Web-Based Reportable Disease Surveillance System

Figure 7.14 Age-Adjusted Influenza/Pneumonia Deaths, 3-Year Rolling Rates



Source: Florida Department of Health, Bureau of Vital Statistics

8. Availability of Health Resources

Access to comprehensive quality health care services is important for the achievement of health equity and for increasing the quality of a healthy life for everyone (Healthy People 2020). The Healthy People 2020 health target is to increase the proportion of people with a primary care provider to 83.9 percent. Access to health services means the timely use of personal health services to achieve the best health outcomes. It requires three distinct steps: gaining entry into the health care system; accessing a health care location where needed services are provided; and finding a health care provider with whom the patient can communicate and trust.

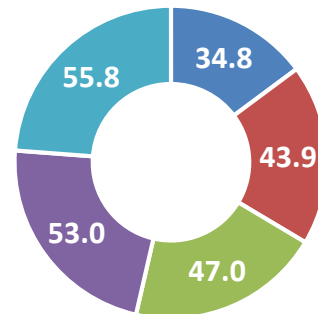
Access to Health Care Impacts:

- Overall physical, social, and mental health status
- Prevention of disease and disability
- Detection and treatment of health conditions
- Preventable deaths and life expectancy

Barriers to Accessing Health Care Services: Barriers include the lack of availability, high cost and lack of insurance coverage. These barriers can lead to unmet health needs and delays in receiving appropriate care. Barriers can also contribute to the inability to get preventive services and hospitalizations that could have been prevented.

With the changing landscape of health insurance, it is essential that quality health insurance remains accessible to our most vulnerable populations and that this insurance links them to the appropriate provider(s) for ongoing care. Increasing access to health care will impact Flagler residents' ability to reach their full potential, positively affecting their quality of life and the overall wellbeing of the community.

Survey Snapshot: Top Five Things That Allow You to be Healthy Where You Live



- #1 Access to healthcare
- #2 Places where I can be active & safe
- #3 Safe neighborhood/safe to walk
- #4 Clean and healthy environment
- #5 Access to healthy foods

Indicators of Concern

| | | Trend | Comparison | # Impacted |
|-----------------------------------|---|-------|------------|------------|
| Health Resources | Figure 8.1. Flagler's rate for health resources per population are lower than Florida in every category. | | ↓ | |
| Births Covered by Medicaid | Figure 8.4. Flagler's percent of births covered by Medicaid is slightly higher than Florida and significantly higher for black individuals. | | ↑ | 395 |
| Provider Resources | Figure 8.9, 8.10 and 8.11. Flagler has a much lower ratio of primary care physicians, dentists and mental health providers to population than Florida. | | ↓ | |

Indicators Included:

| Indicator | Reference |
|--|-------------|
| Health Resource Capacity: Health Department, Physicians, Hospital Beds and Nursing Home Beds | Figure 8.1 |
| Children < 5 Covered by MediKids | Figure 8.2 |
| Adults with Any Type of Health Care Insurance Coverage | Figure 8.3 |
| Births Covered by Medicaid | Figure 8.4 |
| Births to Uninsured Women ("Self-Pay" Checked on Birth Certificate) | Figure 8.5 |
| Females 18-64 Who Have Health Care Insurance Coverage | Figure 8.6 |
| Adults Who Have a Personal Doctor | Figure 8.7 |
| Adults Who Rate Their Health Status as "Fair" Or "Poor" | Figure 8.8 |
| Primary Care Physicians | Figure 8.9 |
| Dentists | Figure 8.10 |
| Mental Health Providers | Figure 8.11 |

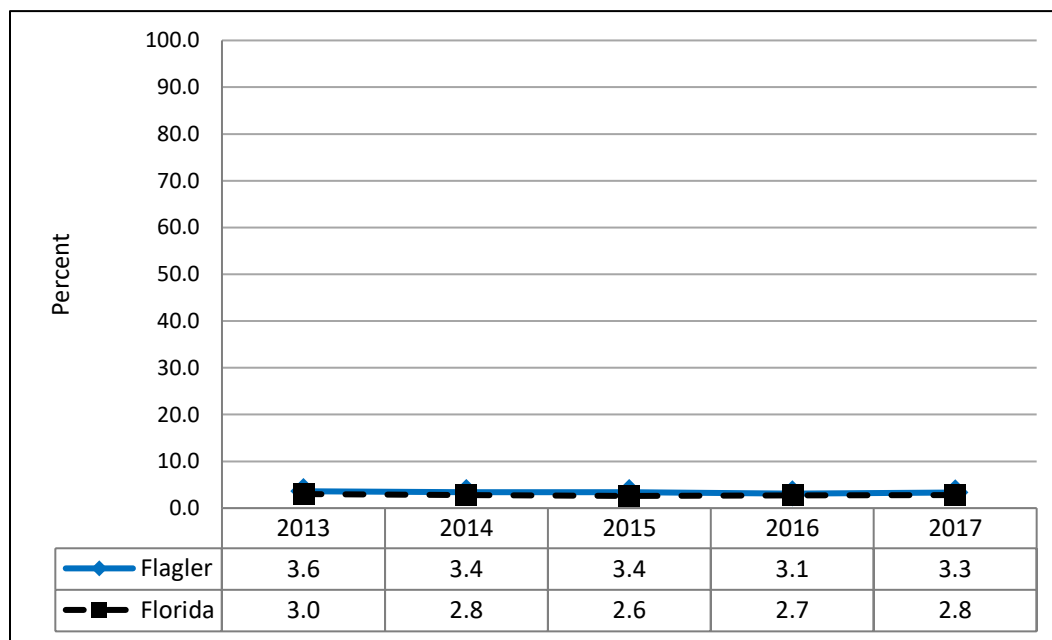
Figure 8.1 Health Resource Capacity

| Category | Type | Flagler County | | Florida |
|------------------------|--------------------------------|----------------|------------------|------------------|
| | | Number | Rate per 100,000 | Rate per 100,000 |
| Health Department 2017 | Full-Time Employees | 48 | 45.8 | 47.0 |
| Physicians FY 2017-18 | Total Licensed Physicians | 168 | 158.4* | 310.6 |
| | Total Licensed Family Medicine | 17 | 16.0 | 19.2 |
| | Total Licensed Internists | 27 | 25.5* | 47.8 |
| | Total Licensed OB/GYN | 6 | 5.7 | 9.5 |
| | Total Licensed Pediatricians | 3 | 2.8 | 22.3 |
| Hospital Beds 2017 | Total Acute Care Beds | 99 | 93.3* | 253.5 |
| | Total Hospital Beds | 99 | 93.3* | 312.3 |
| | Total Specialty Beds | 0 | 0.0 | 58.8 |
| Nursing Home Beds 2017 | Total Nursing Home Beds | 240 | 226.3* | 407.6 |

Source: Florida Agency for Health Care Administration, Florida Department of Health Physician Workforce Surveys

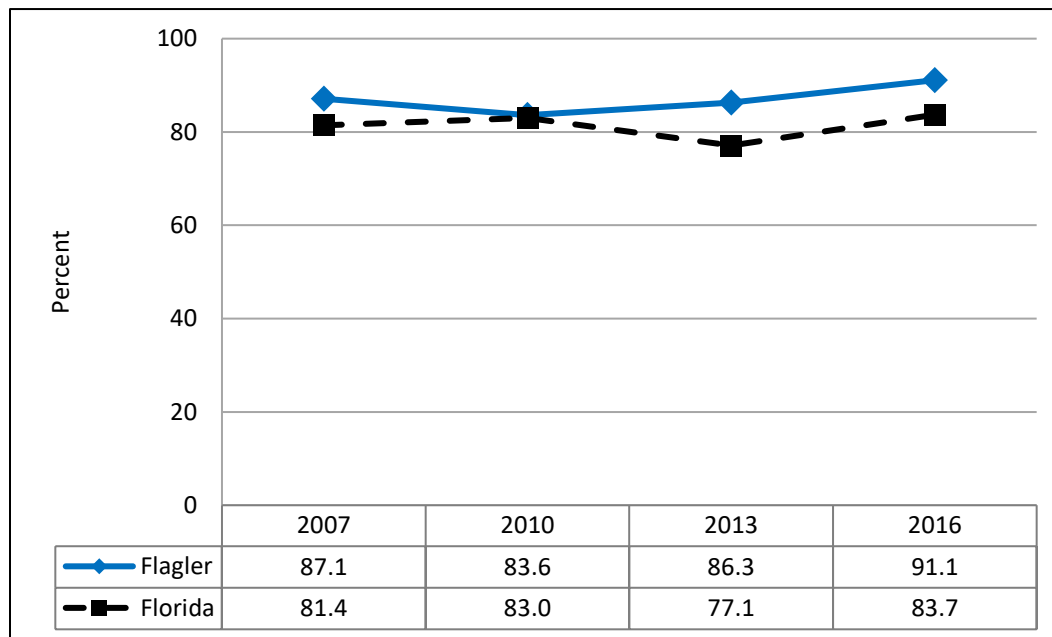
*Indicates that the difference observed between the 2013 county and state measures is statistically significant

Figure 8.2 Children <5 Covered by MediKids



Source: Florida Agency for Health Care Administration (AHCA)

Figure 8.3 Adults with Any Type of Health Care Insurance Coverage

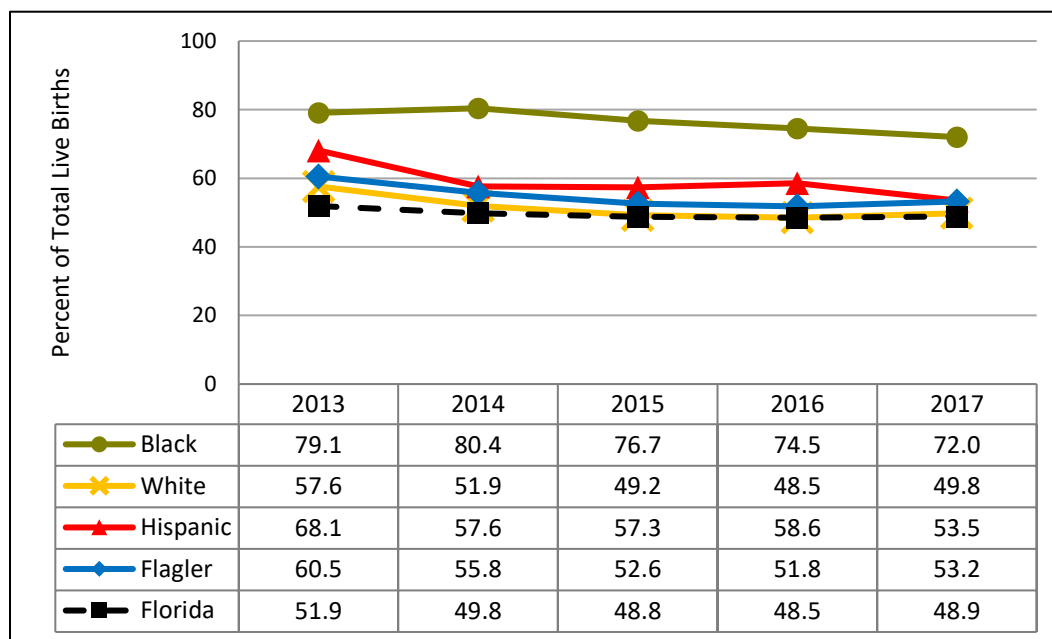


Source: Florida Behavioral Risk Factor Surveillance System

Note: Black=Non-Hispanic Black; White=Non-Hispanic White

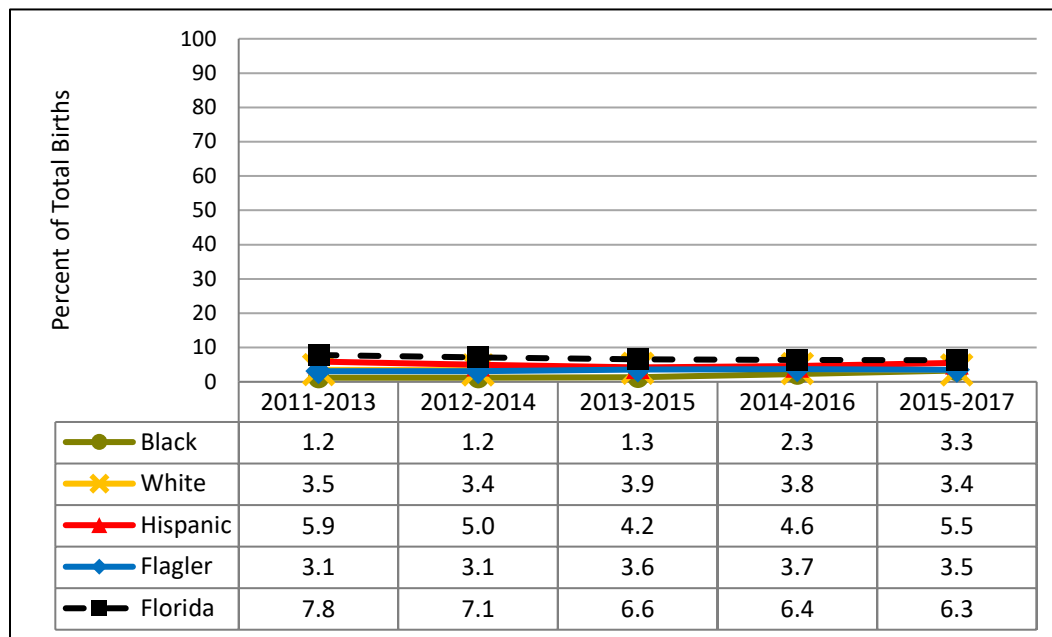
Note: No data indicates sample size less than 30 which would yield statistically unreliable estimates

Figure 8.4 Births Covered by Medicaid



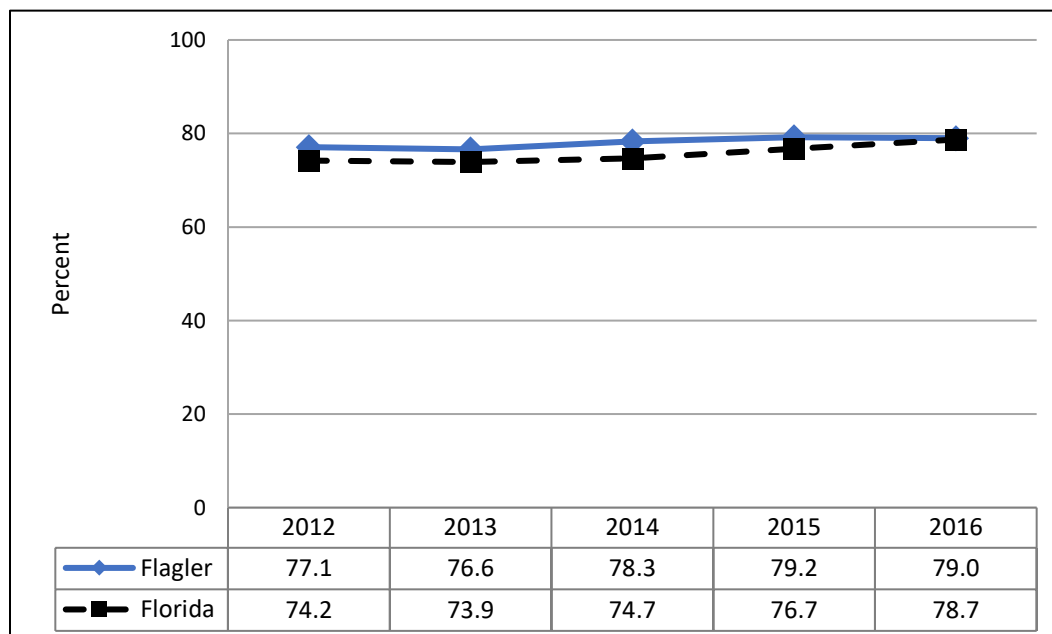
Source: Florida Department of Health, Bureau of Vital Statistics

Figure 8.5 Births to Uninsured Women ("Self-Pay"), 3-Year Rolling Rates



Source: Florida Department of Health, Bureau of Vital Statistics

Figure 8.6 Females 18-64 Who Have Health Care Insurance Coverage



Source: US Bureau of the Census, American Community Survey

Figure 8.7 Adults Who Have a Personal Doctor

| Adults who have a personal doctor 2016 | Flagler | Florida |
|--|---------|---------|
| | Percent | Percent |
| Total – Overall | 82.2* | 72.0 |
| Men | 83.4* | 66.5 |
| Women | 81.3 | 77.1 |
| Non-Hispanic, White | 81.4 | 78.6 |
| Non-Hispanic, Black | 88.5* | 70.9 |
| Hispanic | NA | 57.7 |
| 18-44 | 46.5 | 54.3 |
| 45-64 | 85.9 | 78.0 |
| 65 & Older | 94.5 | 93.2 |
| < High School | NA | 57.5 |
| High School/GED | 80.0* | 68.5 |
| > High School | 83.2 | 77.3 |
| < \$25,000 | 72.4 | 64.9 |
| \$25,000-\$49,999 | 81.4 | 72.4 |
| \$50,000 or More | 88.7* | 79.7 |

Source: Florida Behavioral Risk Factor Surveillance System

NA=Not available due to respondent counts of less than 30

*Indicates the difference observed between the county and state measure is statistically significant

Figure 8.8 Adults Who Rate Their Health Status as "Fair" or "Poor"

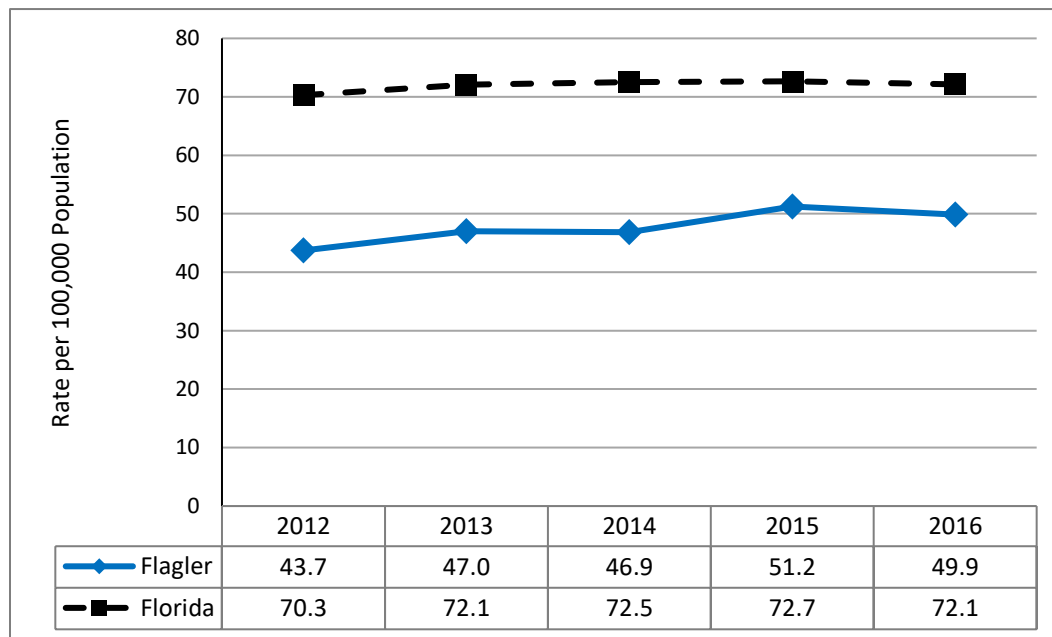
| Adults who rate their health status as "fair" or "poor" | Flagler 2013 | Florida 2013 | Flagler 2016 | Florida 2016 |
|---|--------------|--------------|--------------|--------------|
| | Percent | Percent | Percent | Percent |
| Total – Overall | 13.4 | 19.5 | 14.8* | 19.5 |
| Men | 12.3 | 18.4 | 12.5 | 18.6 |
| Women | 14.4 | 20.6 | 16.5 | 20.3 |
| Non-Hispanic, White | 11.7 | 17.7 | 15.4 | 17.7 |
| Non-Hispanic, Black | NA | 19.7 | 9.5 | 18.7 |
| Hispanic | NA | 24.0 | NA | 25.2 |

Source: Florida Behavioral Risk Factor Surveillance System

NA=Not available due to respondent counts of less than 30

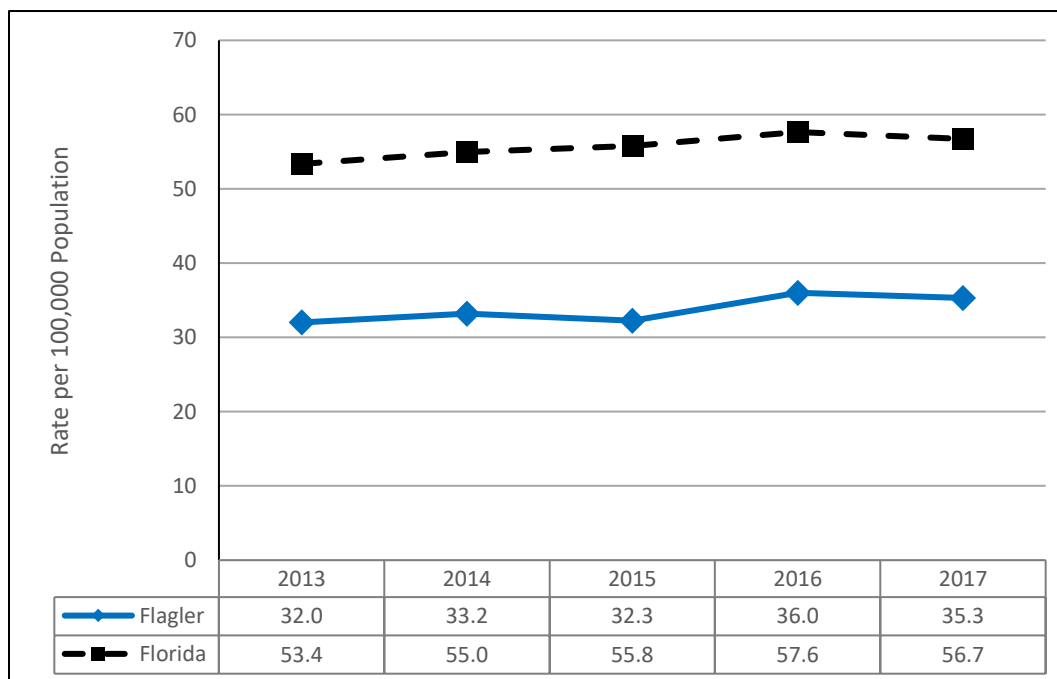
*Indicates the difference observed between the county and state measure is statistically significant

Figure 8.9 Primary Care Physicians



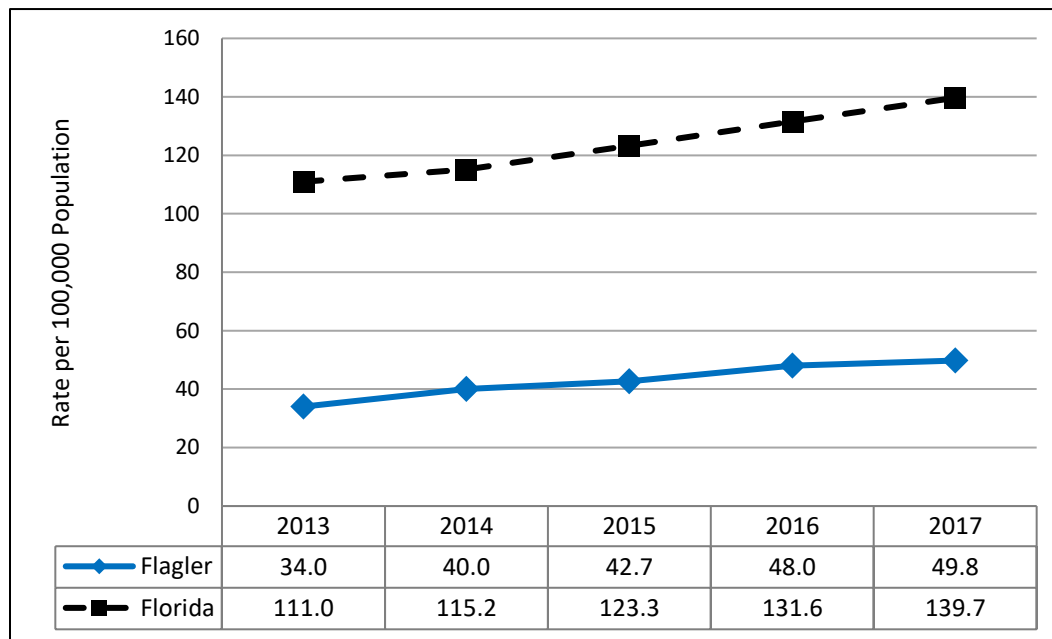
Source: Florida Department of Health, Division of Medical Quality Assurance

Figure 8.10 Dentists



Source: Area Health Resource File/National Provider Identification File

Figure 8.11 Mental Health Providers



Source: CMS, National Provider Identification

9. Injuries

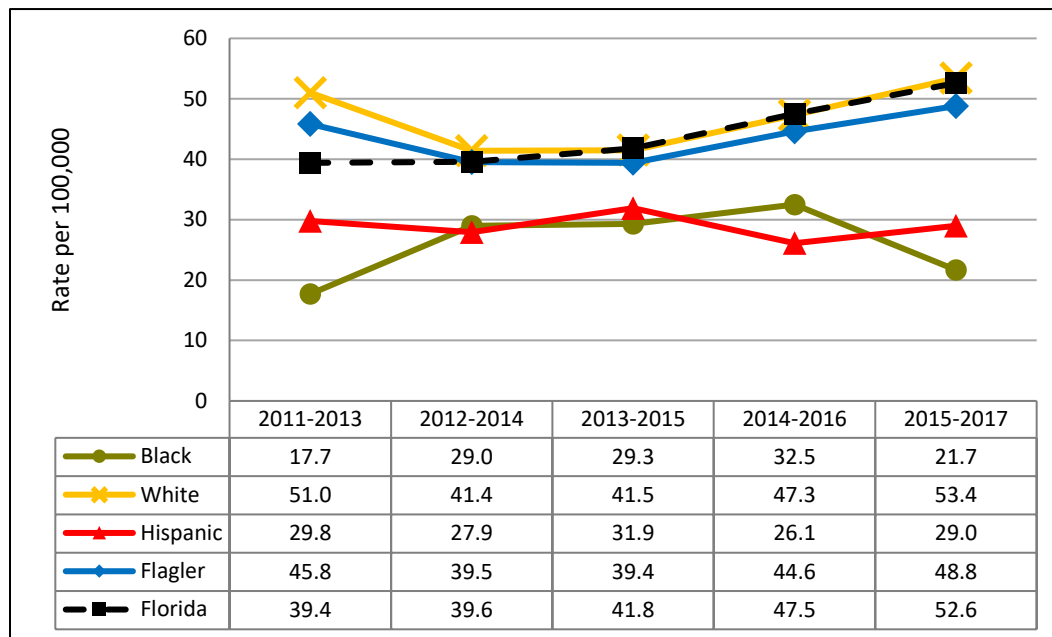
According to the CDC, almost 30% of all Emergency Room visits are injury related and, in Flagler County, unintentional injuries are the 5th leading cause of death. The major categories of injury are unintentional (accidental) and intentional. Unintentional injuries include those that result from motor vehicle collisions, falls, fires, poisonings, drownings, suffocation, choking, animal bites, recreational and sports-related activities. By noting the prevalence and type of injuries found in various age groups, targeted prevention strategies can be developed to prevent future injuries from occurring.

| Indicators of Concern | | Trend | Comparison | # Impacted |
|--------------------------------|--|-------|------------|------------|
| Unintentional Injury Deaths | Figure 9.1. Flagler's unintentional injury death rate has increased since 2013 but is slightly lower than Florida. | ↑ | ↓ | 60 |
| Motor Vehicle Crash Death Rate | Figure 9.6. Flagler's motor vehicle crash death rate is higher than Florida and has increased since 2013. | ↑ | ↑ | |
| Injury Death | Figure 9.10. Flagler's rate of deaths due to injury is increasing since 2014 and was higher than Florida in 2017. | ↑ | ↑ | |

Indicators Included:

| Indicator | Reference |
|---|-------------|
| Unintentional Injuries 3-Year Age-adjusted Death Rate | Figure 9.1 |
| Non-Fatal Injury Emergency Department Visits, Young Children (Ages 0-4) | Figure 9.2 |
| Non-Fatal Injury Emergency Department Visits, School Aged Children (Ages 5-19) | Figure 9.3 |
| Non-Fatal Injury Emergency Department Visits, Adults (Ages 20-64) | Figure 9.4 |
| Non-Fatal Injury Emergency Department Visits, Seniors (Ages 65 and Older) | Figure 9.5 |
| Motor Vehicle Crashes 3-year Age-adjusted Death Rate | Figure 9.6 |
| Hospitalizations from Unintentional Falls, Age 65+ | Figure 9.7 |
| Non-Fatal Injury Emergency Department Visits for Motor Vehicles Injuries, Youth | Figure 9.8 |
| Non-Fatal Injury Emergency Department Visits for Motor Vehicles Injuries, | Figure 9.9 |
| Deaths Due to Injury | Figure 9.10 |

Figure 9.1 Unintentional Injuries Age-adjusted Death Rates, 3-year Rolling Rates



Source: Florida Department of Health, Bureau of Vital Statistics

Figure 9.2 2017 Non-Fatal Injury Emergency Department Visits, Young Children (Ages 0-4)

| Mechanism | Flagler | | Florida | |
|------------------------------------|------------|----------------|----------------|----------------|
| | Number | Rate per 1,000 | Number | Rate per 1,000 |
| Bite/Sting | 24 | 5.5 | 15,250 | 13.6 |
| Cut, Pierce | <5 | | 4,335 | 3.9 |
| Drowning, Submersion | <5 | | 307 | 0.3 |
| Fall | 54 | 12.4 | 56,617 | 50.4 |
| Fire, Flame | <5 | | 362 | 0.3 |
| Firearm | <5 | | 8 | 0.0 |
| Hot Object, Substance | 5 | 1.2 | 2,510 | 2.2 |
| Machinery | <5 | | 55 | 0.0 |
| Motor Vehicle Traffic | 7 | 1.6 | 5,557 | 4.9 |
| MV Traffic - Occupant | 6 | 1.4 | 4,766 | 4.2 |
| Motor Vehicle Non-Traffic | <5 | | 146 | 0.1 |
| Natural, Environmental | <5 | | 431 | 0.4 |
| Not E Coded | 342 | 78.8 | 9,736 | 8.7 |
| Other Specified, Child/Adult Abuse | <5 | | 472 | 0.4 |
| Other Specified, Foreign Body | 39 | 9.0 | 9,335 | 8.3 |
| Other Specified & Classifiable | 6 | 1.4 | 3,478 | 3.1 |
| Other Specified & NEC | <5 | | 61 | 0.1 |
| Overexertion | <5 | | 3,124 | 2.8 |
| Pedalcyclist, Other | <5 | | 501 | 0.4 |
| Pedestrian, Other | <5 | | 89 | 0.1 |
| Poisoning | 35 | 8.1 | 4,352 | 3.9 |
| Struck By/Against | 13 | 3.0 | 16,898 | 15.0 |
| Suffocation | <5 | | 78 | 0.1 |
| Transport, Other | <5 | | 227 | 0.2 |
| Unspecified | 7 | 1.6 | 14,365 | 12.8 |
| Total | 532 | 122.6 | 148,314 | 131.9 |

Source: Florida Agency for Health Care Administration

Figure 9.3 2017 Non-Fatal Injury Emergency Department Visits, School Aged Children (Ages 5-19)

| Mechanism | Flagler | | Florida | |
|------------------------------------|--------------|----------------|----------------|----------------|
| | Number | Rate per 1,000 | Number | Rate per 1,000 |
| Bite/Sting | 21 | 1.3 | 19,024 | 5.5 |
| Cut, Pierce | 14 | 0.9 | 21,130 | 6.1 |
| Drowning/Submersion | 0 | 0.0 | 90 | 0.0 |
| Fall | 64 | 4.0 | 93,143 | 26.8 |
| Fire, Flame | 0 | 0.0 | 664 | 0.2 |
| Firearm | 0 | 0.0 | 566 | 0.2 |
| Hot Object, Substance | 0 | 0.0 | 3,053 | 0.9 |
| Machinery | 0 | 0.0 | 335 | 0.1 |
| Motor Vehicle Traffic | 40 | 2.5 | 37,402 | 10.8 |
| MV Traffic - Occupant | 30 | 1.9 | 27,797 | 8.0 |
| MV Traffic – Other/Unspecified | 5 | 0.3 | 4,480 | 1.4 |
| Motor Vehicle Non-Traffic | 0 | 0.0 | 1,544 | 0.4 |
| Natural, Environmental | 0 | 0.0 | 1,552 | 0.4 |
| Not E Coded | 1,324 | 82.4 | 32,281 | 9.3 |
| Other Specified, Child/Adult Abuse | 0 | 0.0 | 1,157 | 0.3 |
| Other Specified, Foreign Body | 37 | 2.3 | 7,971 | 2.3 |
| Other Specified & Classifiable | 0 | 0.0 | 8,799 | 2.5 |
| Other Specified & NEC | 0 | 0.0 | 929 | 0.3 |
| Overexertion | 11 | 0.7 | 26,407 | 7.6 |
| Pedalcyclist, Other | 0 | 0.0 | 4,978 | 1.4 |
| Pedestrian, Other | 0 | 0.0 | 647 | 0.2 |
| Poisoning | 38 | 2.4 | 5,608 | 1.6 |
| Struck By/Against | 40 | 2.5 | 73,494 | 21.1 |
| Suffocation | 0 | 0.0 | 50 | 0.0 |
| Transport, Other | 0 | 0.0 | 3,120 | 0.9 |
| Unspecified | 19 | 1.2 | 44,808 | 12.9 |
| Total | 1,608 | 100.0 | 388,752 | 111.7 |

Source: Florida Department of Health, Office of Injury Prevention

Figure 9.4 2017 Non-Fatal Injury Emergency Department Visits, Adults (Ages 20-64)

| Mechanism | Flagler | | Florida | |
|------------------------------------|--------------|----------------|------------------|----------------|
| | Number | Rate per 1,000 | Number | Rate per 1,000 |
| Bite/Sting | 55 | 1.0 | 41,012 | 3.5 |
| Cut, Pierce | 61 | 1.1 | 78,895 | 6.6 |
| Drowning/Submersion | 0 | 0.0 | 66 | 0.0 |
| Fall | 132 | 2.4 | 209,819 | 17.7 |
| Fire, Flame | 0 | 0.0 | 2,782 | 0.2 |
| Firearm | 0 | 0.0 | 2,288 | 0.2 |
| Hot Object, Substance | 5 | 0.1 | 9,606 | 0.8 |
| Machinery | 0 | 0.0 | 4,631 | 0.4 |
| Motor Vehicle Traffic | 181 | 3.3 | 178,069 | 15.0 |
| MV Traffic - Motorcyclist | 5 | 0.1 | 8,347 | 0.7 |
| MV Traffic - Occupant | 133 | 2.5 | 133,580 | 11.2 |
| MV Traffic – Other/ Unspecified | 24 | 0.4 | 26,858 | 2.3 |
| Motor Vehicle Non-Traffic | 0 | 0.0 | 5,227 | 0.4 |
| Natural, Environmental | 0 | 0.0 | 6,235 | 0.5 |
| Not E Coded | 3,113 | 57.5 | 87,250 | 7.3 |
| Other Specified, Child/Adult Abuse | 0 | 0.0 | 1,952 | 0.2 |
| Other Specified, Foreign Body | 77 | 1.4 | 16,486 | 1.4 |
| Other Specified & Classifiable | 7 | 0.1 | 16,605 | 1.4 |
| Other Specified & NEC | 0 | 0.0 | 4,186 | 0.4 |
| Overexertion | 59 | 1.1 | 83,236 | 7.0 |
| Pedalcyclist, Other | 0 | 0.0 | 6,245 | 0.5 |
| Pedestrian, Other | 0 | 0.0 | 2,283 | 0.2 |
| Poisoning | 128 | 2.4 | 32,742 | 2.8 |
| Struck By/Against | 105 | 1.9 | 126,960 | 10.7 |
| Suffocation | 0 | 0.0 | 213 | 0.0 |
| Transport, Other | 0 | 0.0 | 6,588 | 0.6 |
| Unspecified | 58 | 1.1 | 144,490 | 12.2 |
| Total | 3,981 | 73.5 | 1,067,866 | 89.9 |

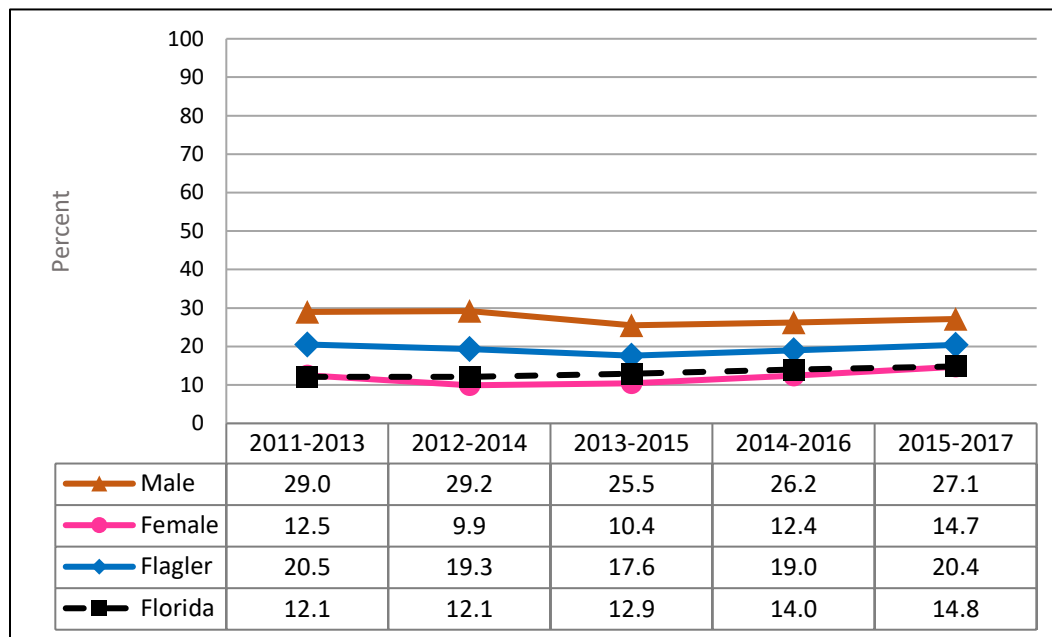
Source: Florida Department of Health, Office of Injury Prevention

Figure 9.5 2017 Non-Fatal Injury Emergency Department Visits, Seniors (Ages 65 and Older)

| Mechanism | Flagler | | Florida | |
|------------------------------------|--------------|----------------|----------------|----------------|
| | Number | Rate per 1,000 | Number | Rate per 1,000 |
| Bite/Sting | 14 | 0.4 | 7,840 | 1.9 |
| Cut, Pierce | <5 | | 12,144 | 3.0 |
| Drowning/Submersion | <5 | | 6 | 0.0 |
| Fall | 68 | 2.2 | 178,388 | 43.8 |
| Fire, Flame | <5 | | 311 | 0.1 |
| Firearm | <5 | | 96 | 0.0 |
| Hot Object, Substance | <5 | | 1,225 | 0.3 |
| Machinery | <5 | | 869 | 0.2 |
| Motor Vehicle Traffic | 13 | 0.4 | 20,983 | 5.2 |
| MV Traffic - Occupant | 8 | 0.3 | 16,015 | 3.9 |
| Motor Vehicle Non-Traffic | <5 | | 580 | 0.1 |
| Natural, Environmental | <5 | | 1,923 | 0.5 |
| Not E Coded | 1,603 | 50.9 | 30,511 | 7.5 |
| Other Specified, Child/Adult Abuse | <5 | | 86 | 0.0 |
| Other Specified, Foreign Body | 33 | 1.0 | 4,088 | 1.0 |
| Other Specified & Classifiable | <5 | | 2,469 | 0.6 |
| Other Specified & NEC | <5 | | 216 | 0.1 |
| Overexertion | <5 | | 10,985 | 2.7 |
| Pedalcyclist, Other | <5 | | 1,163 | 0.3 |
| Pedestrian, Other | <5 | | 427 | 0.1 |
| Poisoning | 18 | 0.6 | 3,623 | 0.9 |
| Struck By/Against | 15 | 0.5 | 21,077 | 5.2 |
| Suffocation | <5 | | 162 | 0.0 |
| Transport, Other | <5 | | 750 | 0.2 |
| Unspecified | <5 | | 32,113 | 7.9 |
| Total | 1,764 | 56.0 | 332,035 | 81.5 |

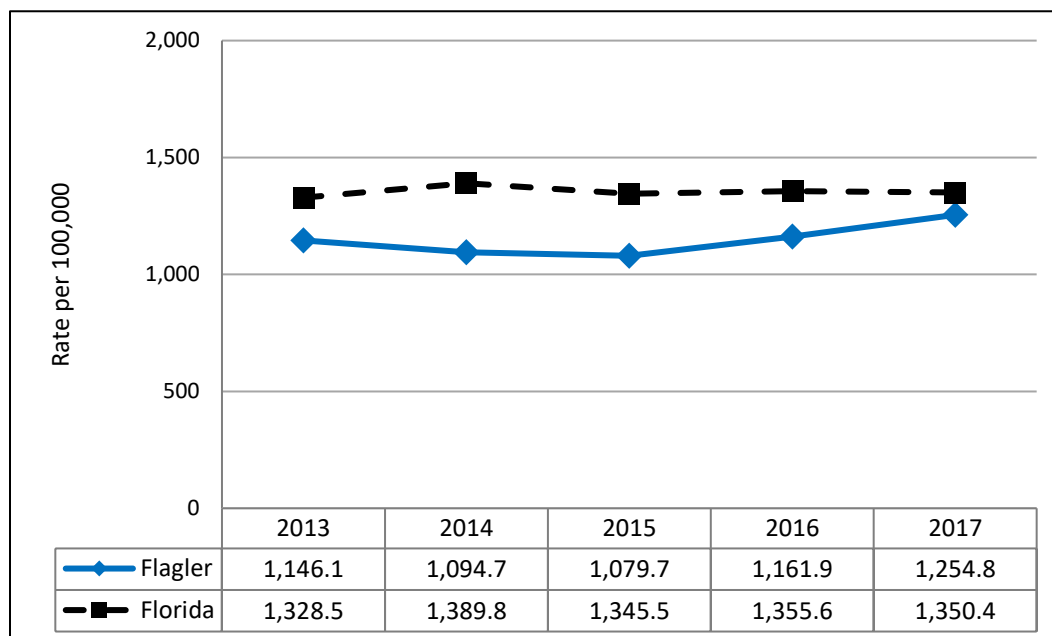
Source: Florida Department of Health, Office of Injury Prevention

Figure 9.6 Motor Vehicle Crashes Age-adjusted Death Rate, 3-year Rolling Rates



Source: Florida Department of Health, Bureau of Vital Statistics

Figure 9.7 Hospitalizations from Unintentional Falls, Ages 65+



Source: Agency for Health Care Administration, Hospital Discharge Data

Figure 9.8 2017 Non-Fatal Injury Emergency Department Visits for Motor Vehicle Injuries, Youth

| Under Age Five | Flagler | | Florida | |
|--------------------------------|----------------|-----------------------|----------------|-----------------------|
| Mechanism | Number | Rate per 1,000 | Number | Rate per 1,000 |
| MV Traffic - Occupant | 6 | 1.4 | 4,766 | 4.2 |
| Ages 5-19 | Flagler | | Florida | |
| Mechanism | Number | Rate per 1,000 | Number | Rate per 1,000 |
| MV Traffic - Motorcyclist | 0 | 0.0 | 1,168 | 0.3 |
| MV Traffic - Occupant | 30 | 1.9 | 27,797 | 8.0 |
| MV Traffic – Other/Unspecified | 5 | 0.3 | 4,840 | 1.4 |
| MV Traffic - Pedalcyclist | 0 | 0.0 | 2,631 | 0.8 |
| MV Traffic - Pedestrian | 0 | 0.0 | 966 | 0.3 |

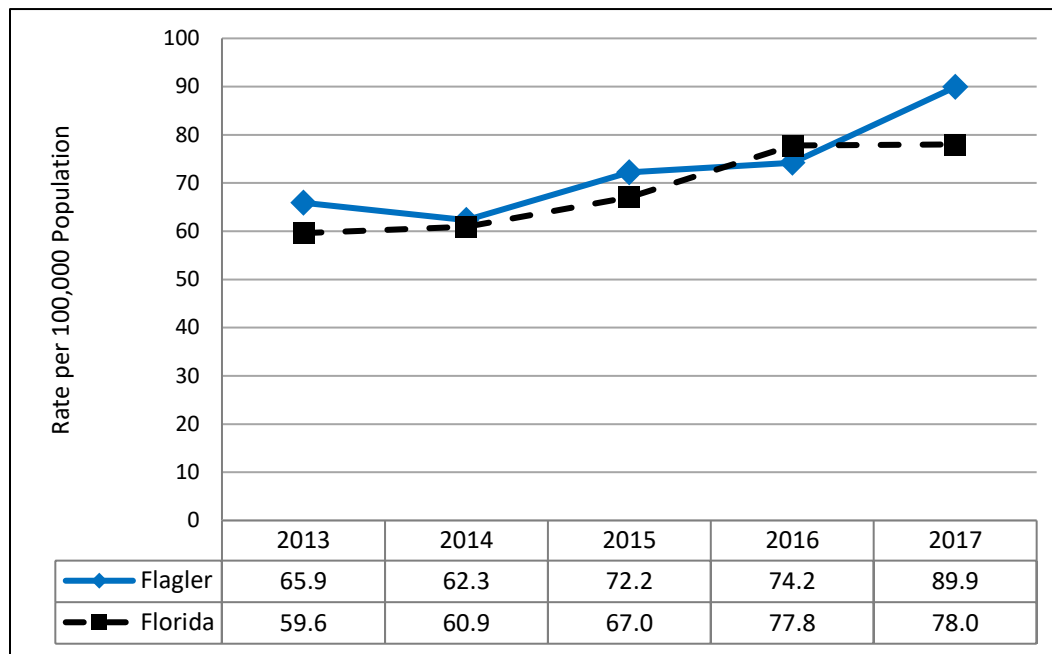
Source: Florida Department of Health, Office of Injury Prevention

Figure 9.9 2017 Non-Fatal Injury Emergency Department Visits for Motor Vehicle Injuries, Adults

| Ages 20-64 | Flagler | | Florida | |
|--------------------------------|----------------|-----------------------|----------------|-----------------------|
| Mechanism | Number | Rate per 1,000 | Number | Rate per 1,000 |
| MV Traffic - Motorcyclist | 5 | 0.1 | 8,347 | 0.7 |
| MV Traffic - Occupant | 133 | 2.5 | 133,580 | 11.2 |
| MV Traffic – Other/Unspecified | 24 | 0.4 | 26,858 | 2.3 |
| MV Traffic - Pedalcyclist | 0 | 0.0 | 5,511 | 0.5 |
| MV Traffic - Pedestrian | 0 | 0.0 | 3,773 | 0.3 |
| Ages 65 and Older | Flagler | | Florida | |
| Mechanism | Number | Rate per 1,000 | Number | Rate per 1,000 |
| MV Traffic - Motorcyclist | <5 | | 489 | 0.1 |
| MV Traffic - Occupant | 8 | 0.3 | 16,015 | 3.9 |
| MV Traffic – Other/Unspecified | <5 | | 3,126 | 0.8 |
| MV Traffic - Pedalcyclist | <5 | | 772 | 0.2 |
| MV Traffic - Pedestrian | <5 | | 581 | 0.1 |

Source: Florida Department of Health, Office of Injury Prevention

Figure 9.10 Deaths Due to Injury



Source: Florida Department of Health, Bureau of Vital Statistics

10. Social & Economic Issues

Social and economic factors, such as income, education, employment, community safety, and social supports can significantly affect how well and how long we live. These factors affect our ability to make healthy choices, afford medical care and housing, manage stress, and more. Healthy People 2020 highlights the importance of addressing the social determinants of health by including them in one of the four overarching goals for the decade. According to the National County Health Rankings, “Social and Economic Factors” account for over 40% of the health of a community.

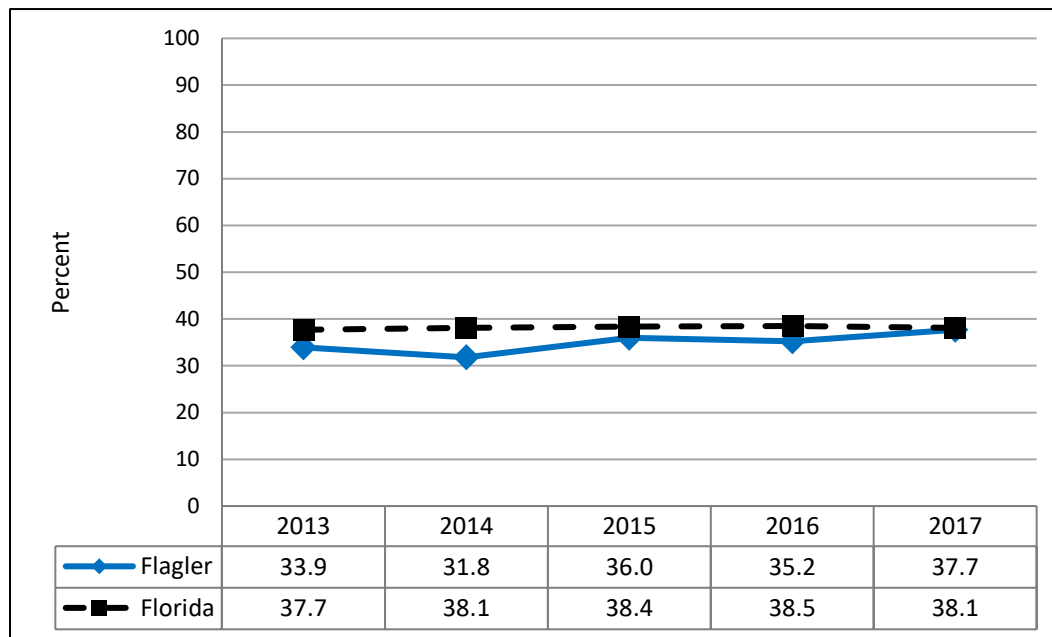
| Indicators of Concern | | Trend | Comparison | # Impacted |
|--------------------------|---|-------|------------|------------|
| Unemployment Rate | Figure 10.11. Flagler’s unemployment rate is slightly higher than Florida but is decreasing. | ↓ | ↑ | |
| Free/Reduced Price Lunch | Figure 10.17 and 10.18. The percent of elementary and middle school students eligible for free/reduced price lunches increased from 2017 to 2018 and is now higher than Florida. (a proxy measure for low income) | ↑ | ↑ | 3,747 |
| Food Insecurity | Figure 10.19. Flagler’s food insecurity rate is slightly higher than Florida. | | ↑ | |
| Uninsured Children | Figure 10.20. Flagler’s percent of uninsured children has decreased but is consistently higher than Florida. | ↓ | ↑ | |
| Housing Cost Burden | Figure 10.22. Over 30% of Flagler households spend more than 30% of their income on housing an all workers in the top 20 occupations are estimated to be housing burdened based on median wages. | | | |
| Homelessness | Figure 10.24. The Flagler number of individuals counted during the Point In Time count in 2019 was more than double the 2018 number. | ↑ | | 130 |
| Student Homelessness | Figure 10.25. The Flagler number of homeless students has increased. | ↑ | | 529” |

Indicators Included:

| Indicator | Reference |
|---|-------------|
| Children in Single Parent Households | Figure 10.1 |
| High School Graduation Rate | Figure 10.2 |
| Population 25 Years and Over Without a High School Diploma or Equivalency | Figure 10.3 |
| Population 25 Years and Older, Some College but No Degree | Figure 10.4 |
| Adults age 25-44 with Some Post-secondary Education | Figure 10.5 |
| Population Age 5+ that Speak English Less Than Very Well | Figure 10.6 |
| Households Where No One Age 14 & Over Speaks English Only or "Very Well" | Figure 10.7 |

| Indicator | Reference |
|---|------------------|
| Adults Who Are Limited in Any Way in Any Activities because of Physical, Mental, or Emotional Problems | Figure 10.8 |
| Per Capita Income | Figure 10.9 |
| Median Household Income | Figure 10.10 |
| Unemployment Rate | Figure 10.11 |
| Income Inequality (Gini Index) | Figure 10.12 |
| Families Below Poverty Level | Figure 10.13 |
| Individuals Below Poverty Level | Figure 10.14 |
| Population Under Age 18 Below Poverty Level | Figure 10.15 |
| Ratio of Household Income at the 80 th Percentile to Income at the 20 th Percentile | Figure 10.16 |
| Elementary School Students Eligible for Free/Reduced Price Lunch | Figure 10.17 |
| Middle School Students Eligible for Free/Reduced Price Lunch | Figure 10.18 |
| Food Insecurity Rates | Figure 10.19 |
| Uninsured Children | Figure 10.20 |
| Owner-Occupied Housing Units | Figure 10.21 |
| Occupied Households with Monthly Housing Costs of 30% or More of Household Income | Figure 10.22 |
| Wage and Rent Affordability Comparison for Top Occupations | Figure 10.23 |
| Annual Point in Time Homelessness Count | Figure 10.24 |
| Homeless Students | Figure 10.25 |
| Workers Who Used Public Transportation | Figure 10.26 |
| Larceny Offense Rate | Figure 10.27 |
| Burglary Offense Rate | Figure 10.28 |
| Motor Vehicle Theft Offense Rate | Figure 10.29 |
| Robbery Offense Rate | Figure 10.30 |
| Murder Offense Rate | Figure 10.31 |
| Violent Crime Rate | Figure 10.32 |
| School Environmental Safety Incidents | Figure 10.33 |

Figure 10.1 Children in Single Parent Households

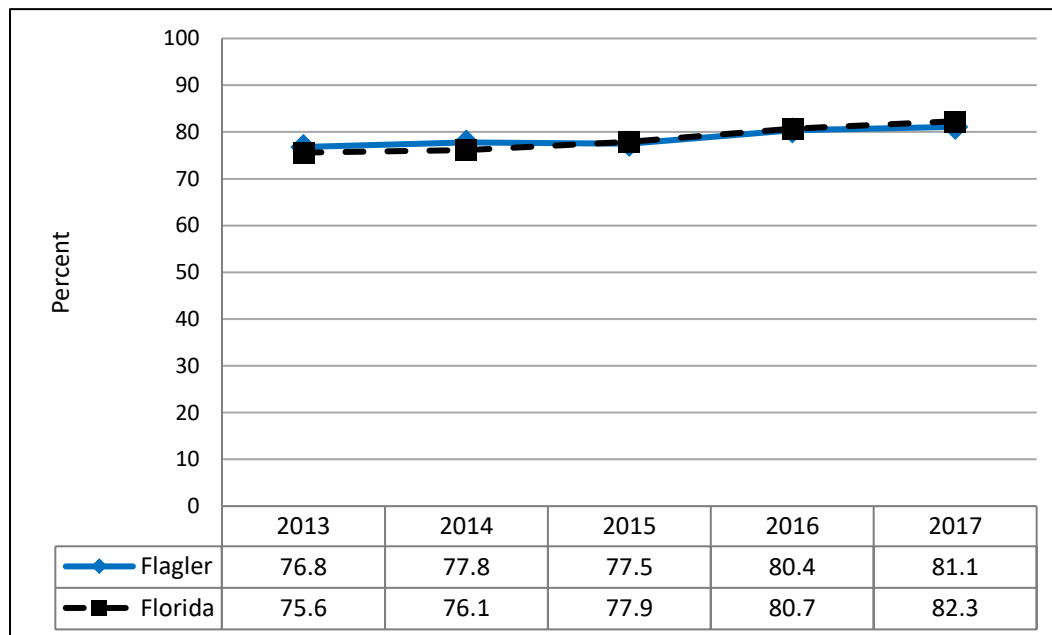


Source: US Bureau of the Census, American Communities Survey

Note: Male householder single parent households are typically less than 10% of family households and the percentage has increased in recent years

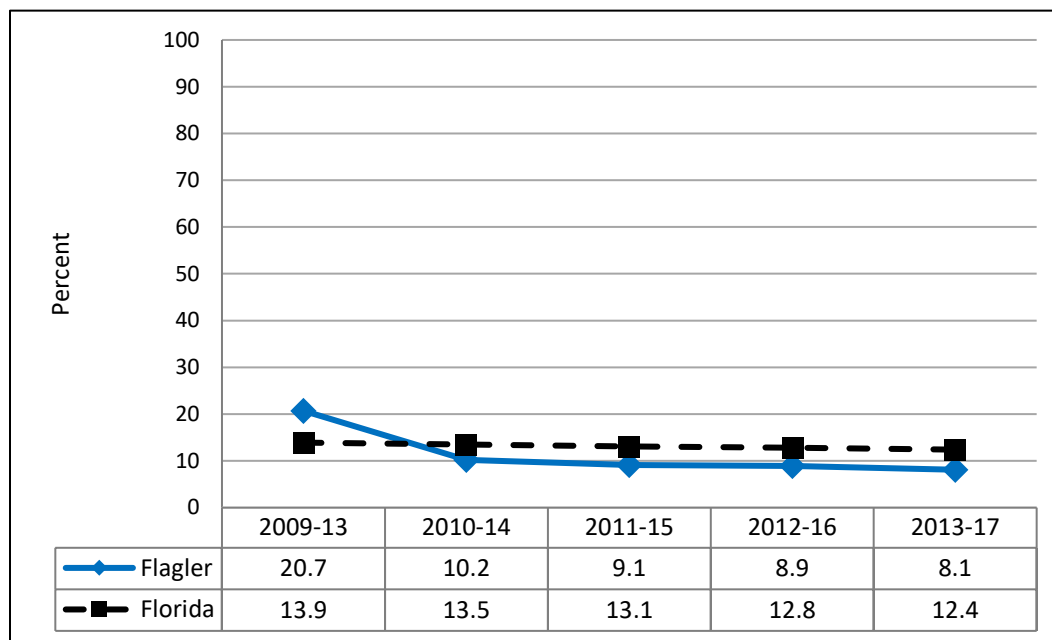
Note: Female householder single-parent households are typically about 25% to 30% of family households

Figure 10.2 High School Graduation Rate



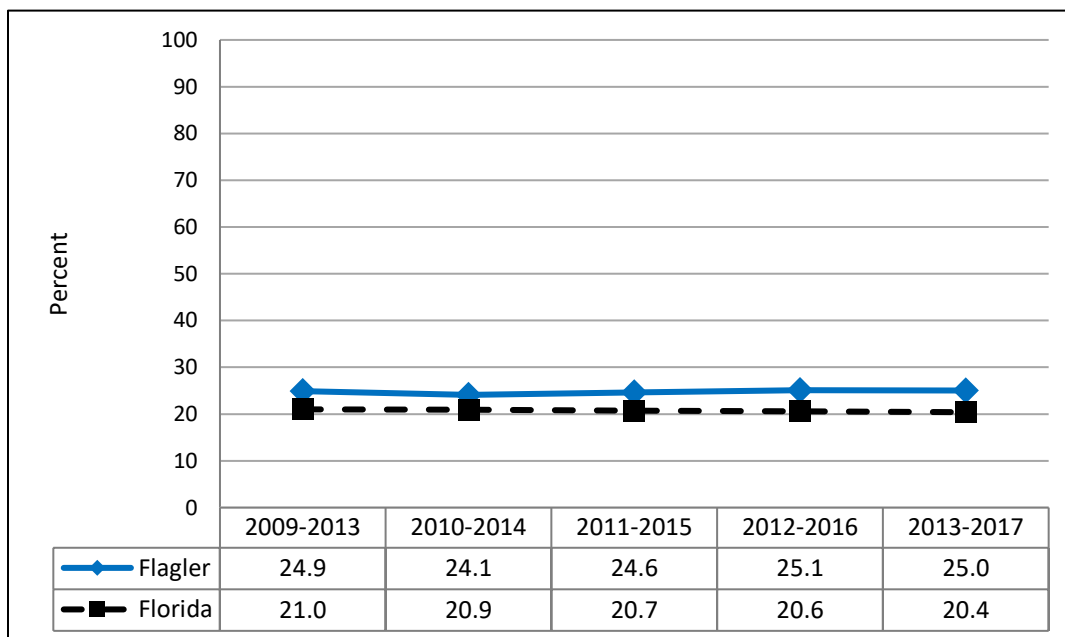
Source: Florida Department of Education, Education Information and Accountability Services (EIAS)

Figure 10.3 Individuals 25 Years and Over with No High School Diploma or GED, 5-year Estimates



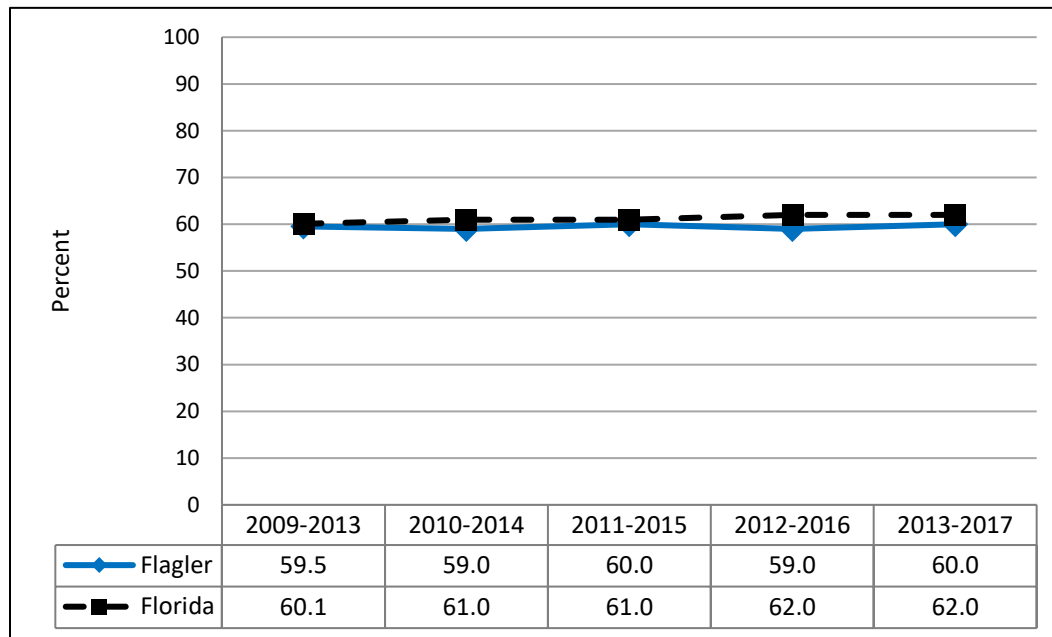
Source: US Bureau of the Census, American Communities Survey 5-Year Estimates

Figure 10.4 Population 25 Years and Over, Some College but No Degree



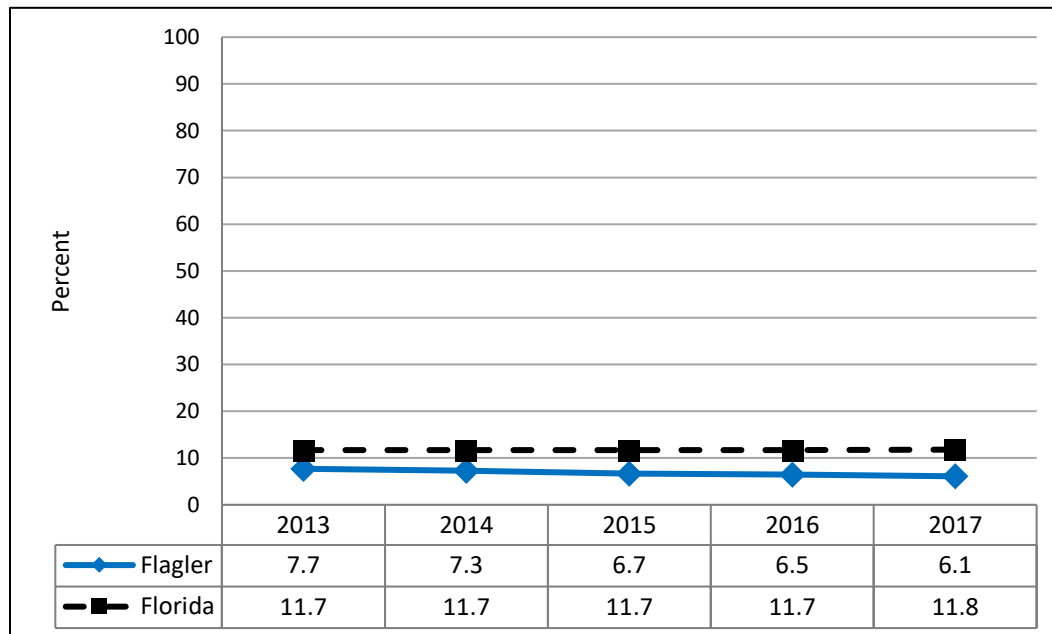
Source: US Bureau of the Census, American Communities Survey 5-Year Estimates

Figure 10.5 Adults Ages 25-44 with Some Post-Secondary Education



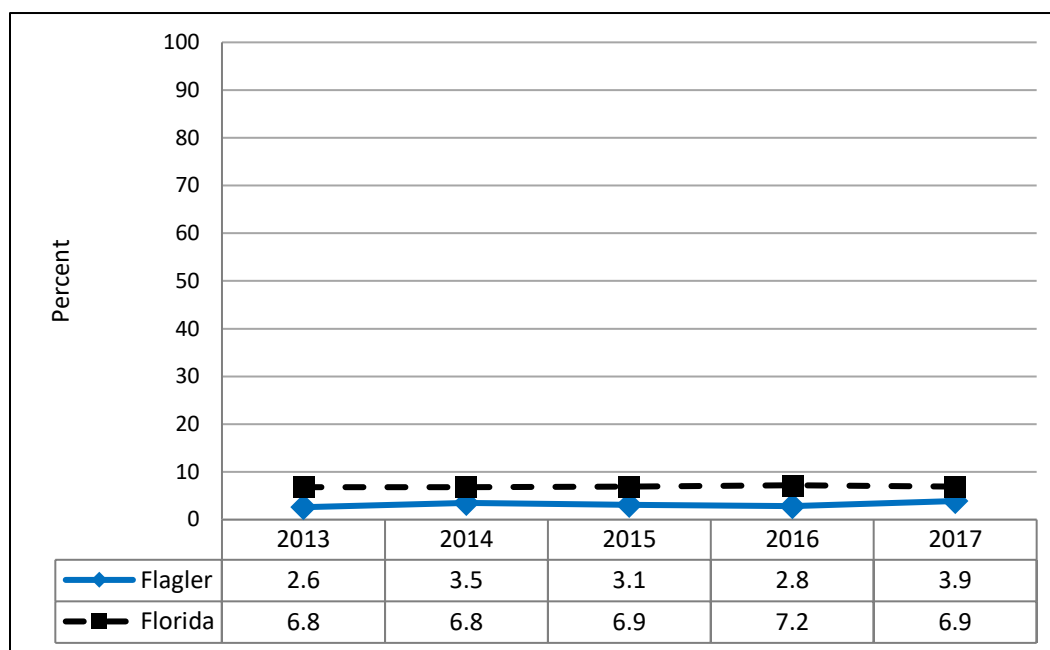
Source: US Bureau of the Census, American Communities Survey 5-Year Estimates

Figure 10.6 Population 5+ that Speaks English Less than Very Well



Source: US Bureau of the Census, American Communities Survey

Figure 10.7 Household Where No One Age 14 & Over Speaks English Only or Speaks English “Very Well”



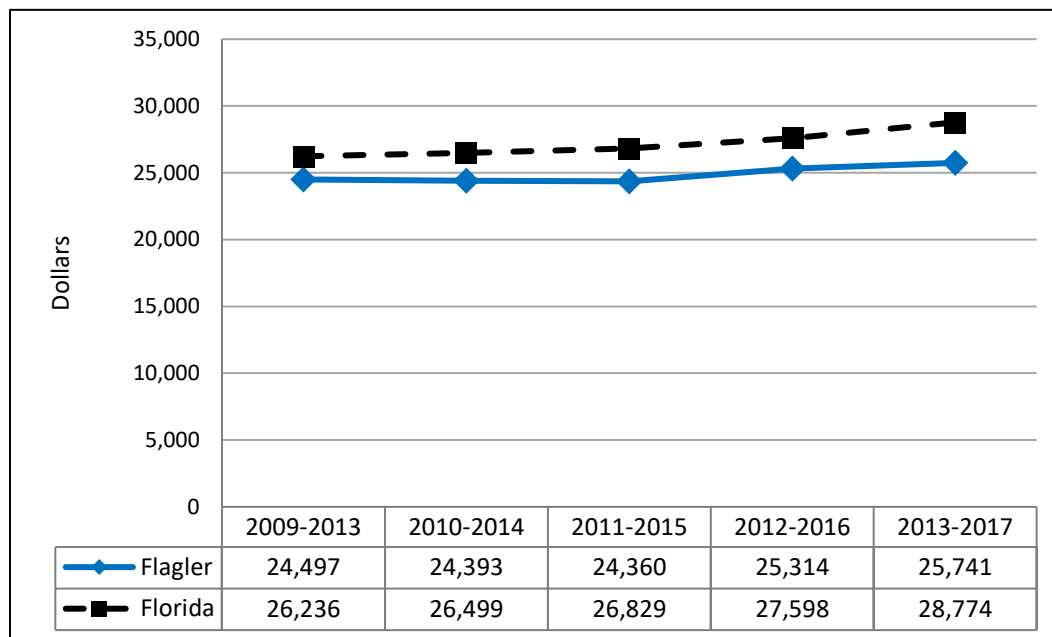
Source: US Bureau of the Census, American Communities Survey

Figure 10.8 Adults Who Are Limited in Any Way in Any Activities because of Physical, Mental, or Emotional Problems

| Adults who are limited in any way in any activities because of physical, mental, or emotional problems, 2016 | Flagler | Florida |
|--|---------|---------|
| | Percent | Percent |
| Total – Overall | 20.0 | 21.2 |
| Men | 14.6 | 20.5 |
| Women | 23.8 | 21.8 |
| Non-Hispanic, White | 20.3 | 25.4 |
| Non-Hispanic, Black | 18.3 | 18.1 |
| Hispanic | NA | 13.9 |
| 18-44 | 10.0 | 13.2 |
| 45-64 | 25.9 | 26.4 |
| 65 & Older | 20.2 | 27.1 |
| < High School | NA | 28.3 |
| High School/GED | 23.4 | 21.2 |
| > High School | 18.1 | 19.4 |
| < \$25,000 | 29.4 | 29.7 |
| \$25,000-\$49,999 | 16.7 | 21.2 |
| \$50,000 or More | 15.4 | 14.7 |

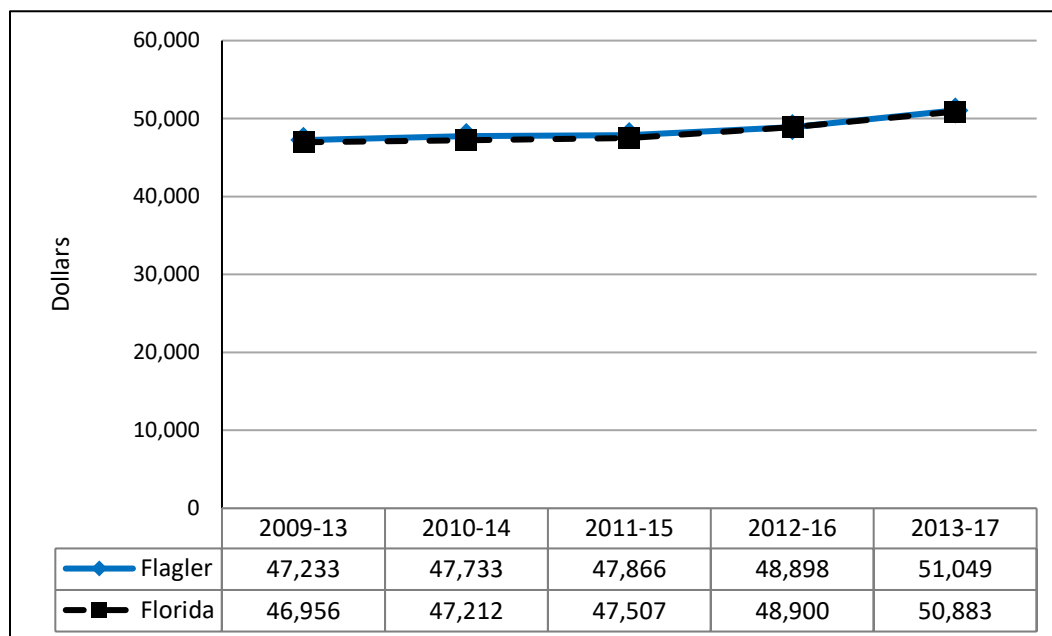
Source: Florida Behavioral Risk Factor Surveillance System
NA=Not available due to respondent counts of less than 30

Figure 10.9 Per Capita Income



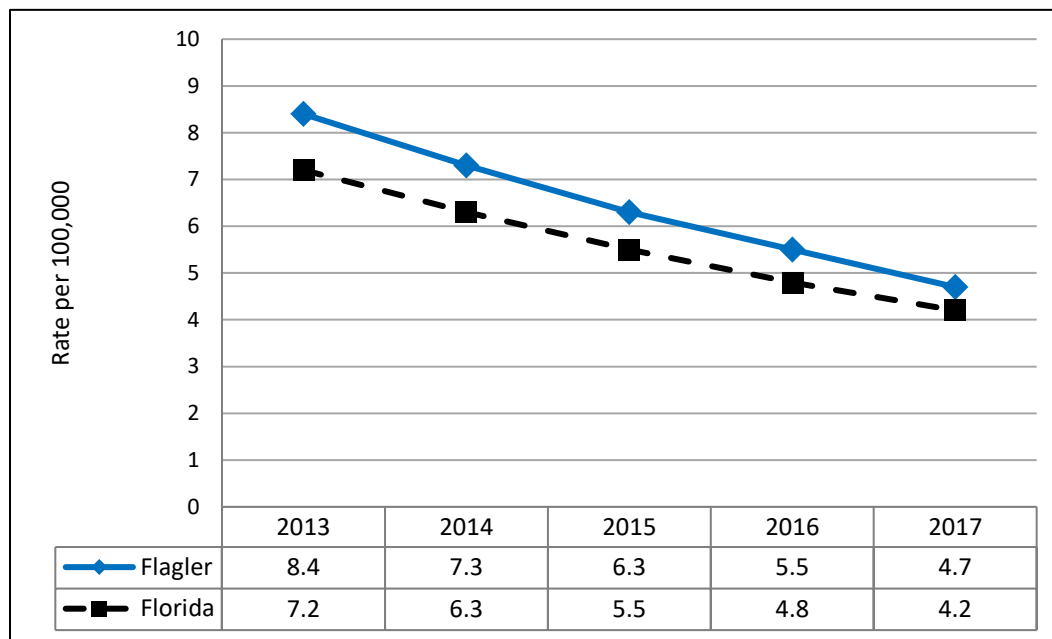
Source: US Bureau of the Census, American Communities Survey 5-Year Estimates

Figure 10.10 Median Household Income, 5-year Estimates



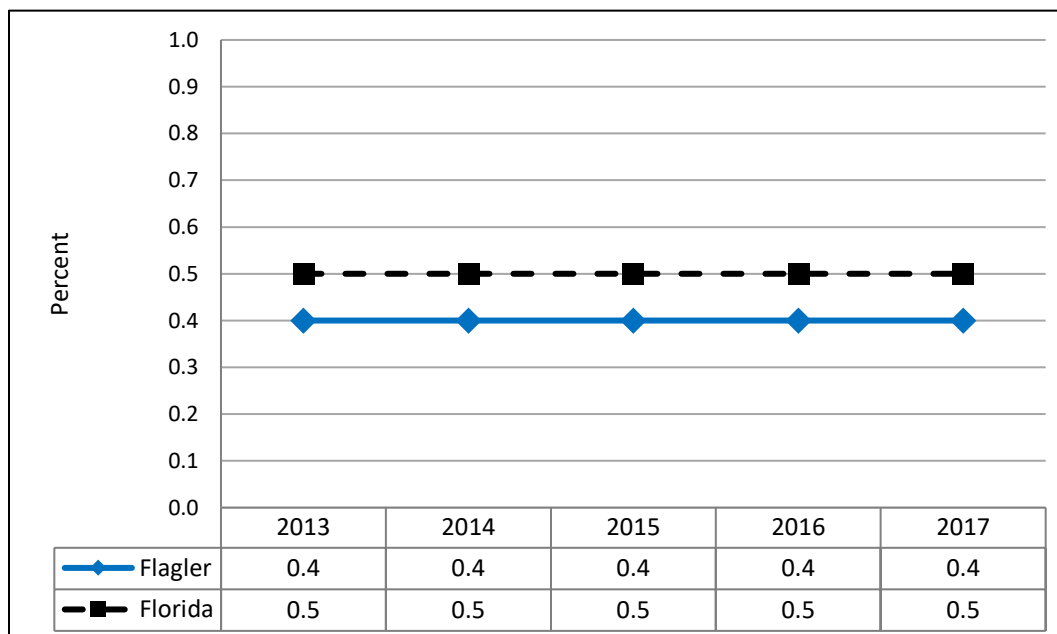
Source: US Bureau of the Census, American Communities Survey 5-Year Estimates

Figure 10.11 Unemployment Rate



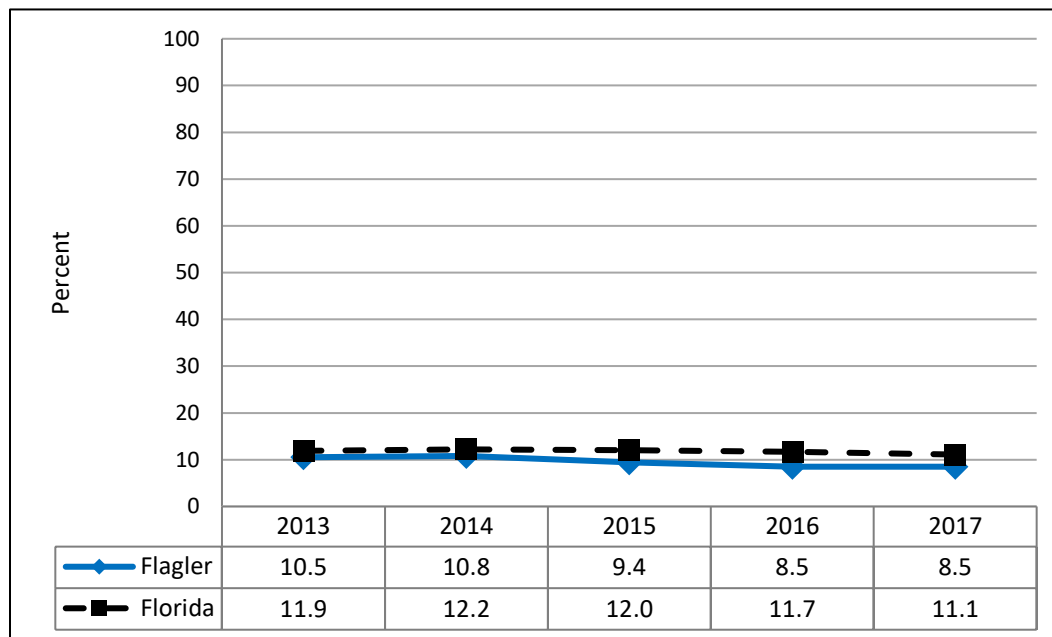
Source: US Department of Labor, Bureau of Labor Statistics

Figure 10.12 Income Inequality (Gini Index)



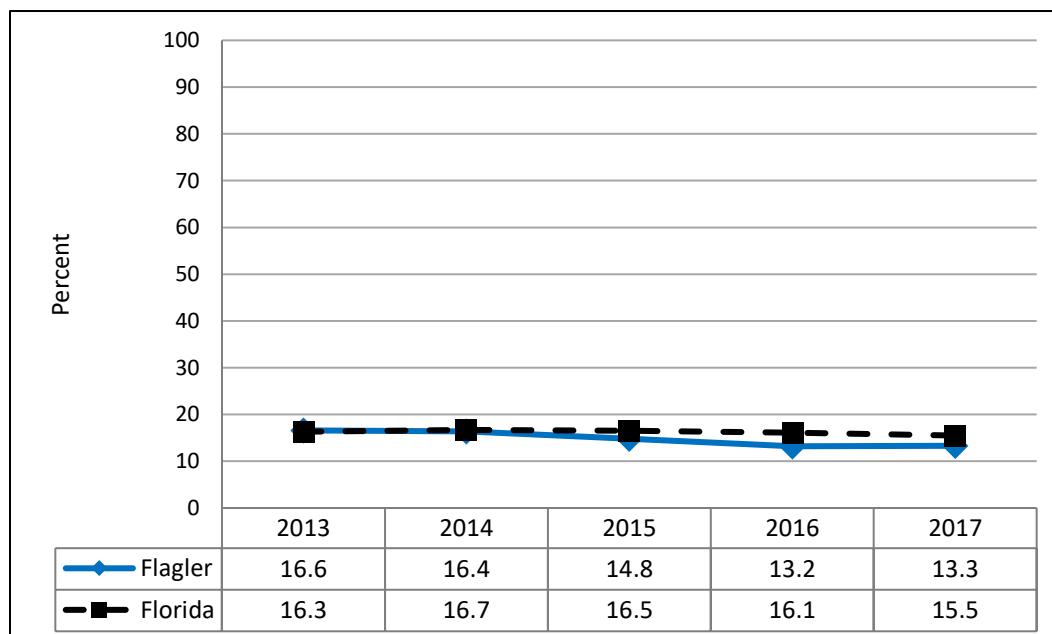
Source: US Bureau of the Census, American Communities Survey

Figure 10.13 Families Below Poverty Level



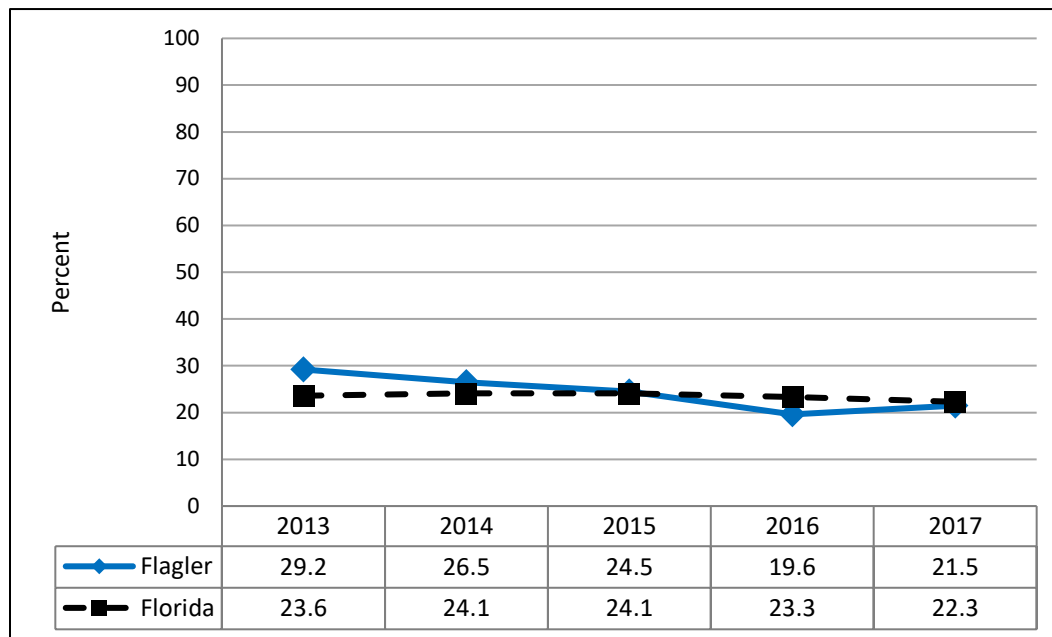
Source: US Bureau of the Census, American Communities Survey

Figure 10.14 Individuals Below Poverty Level



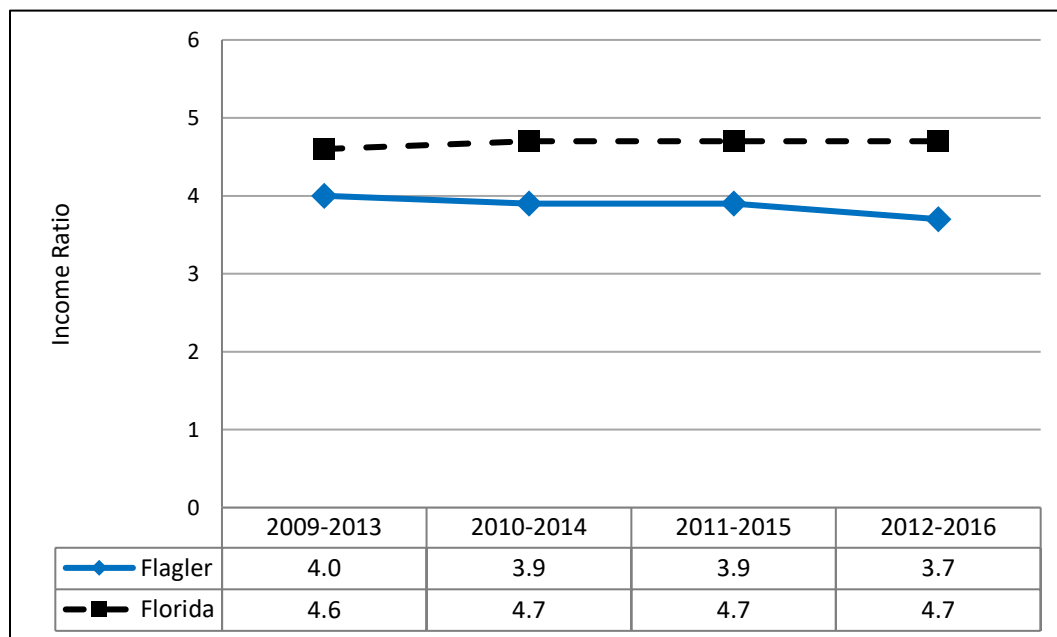
Source: US Bureau of the Census, American Communities Survey

Figure 10.15 Individuals Under 18 Below Poverty Level



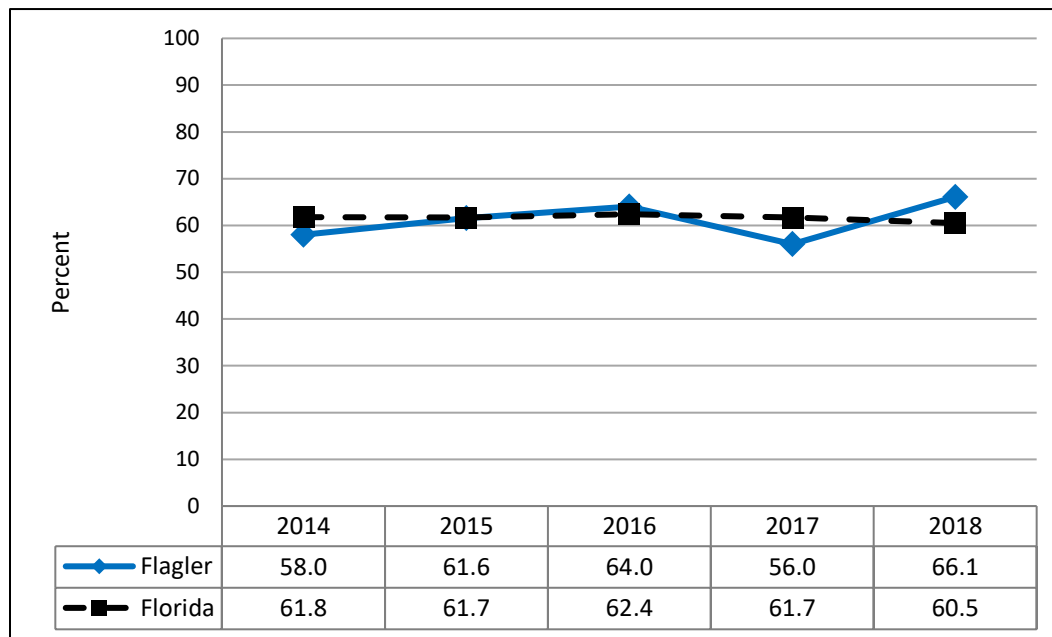
Source: US Bureau of the Census, American Communities Survey

Figure 10.16 Ratio of Household Income at the 80th Percentile to Income at the 20th Percentile



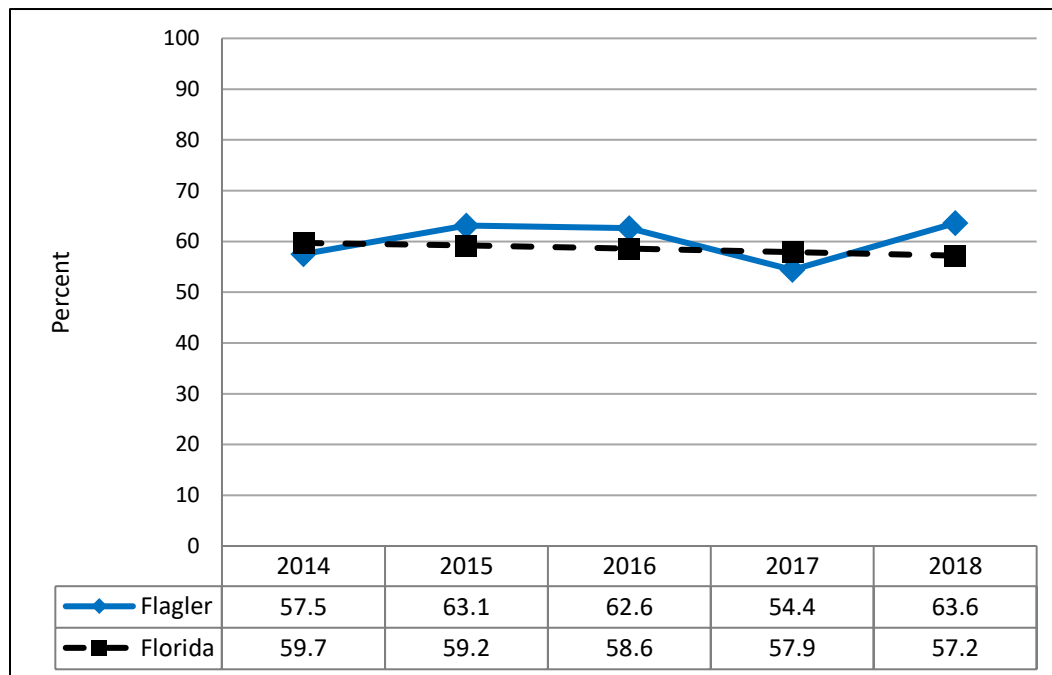
Source: US Bureau of the Census, American Communities Survey 5-year estimates

Figure 10.17 Elementary School Students Eligible for Free/Reduced Price Lunch



Source: Florida Department of Education, Education Information and Accountability Services (EIAS)

Figure 10.18 Middle School Students Eligible for Free/Reduced Price Lunch



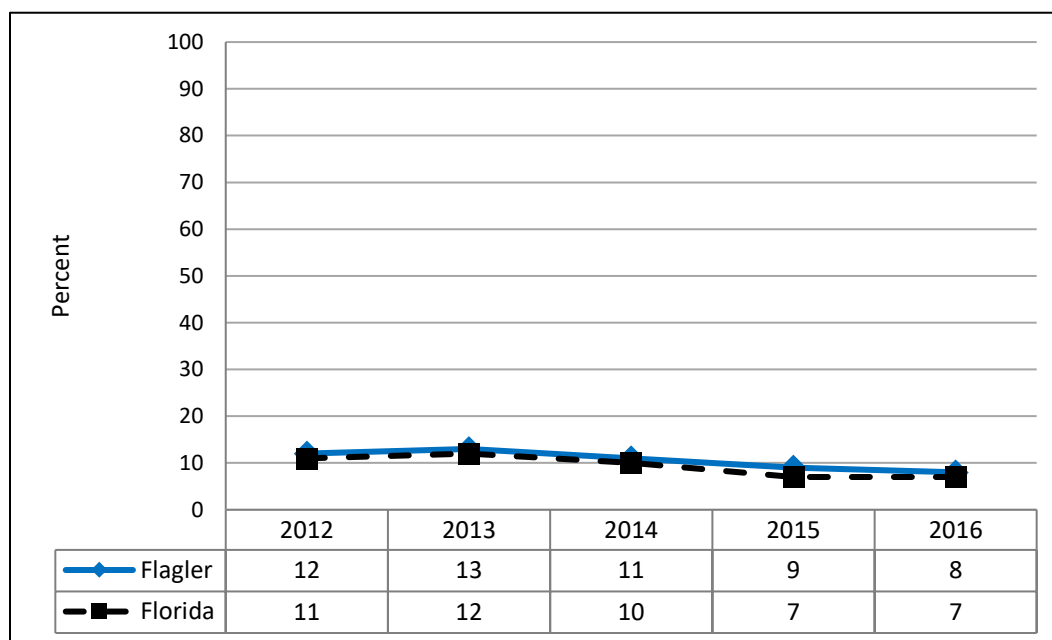
Source: Florida Department of Education, Education Information and Accountability Services (EIAS)

Figure 10.19 Food Insecurity Rates

| | Flagler Percent | Florida Percent |
|------|--------------------|--------------------|
| 2014 | 15.9 | 16.2 |
| 2015 | 15.3 | 15.1 |
| 2016 | 14.1 | 13.9 |

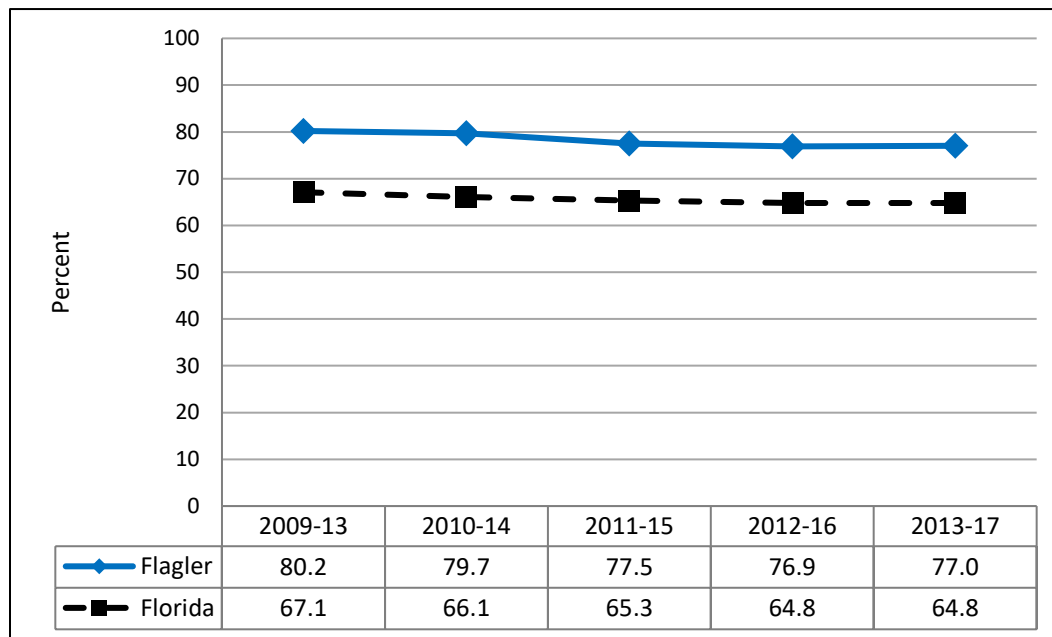
Source: Feeding America, Map the Meal Gap

Figure 10.20 Uninsured Children



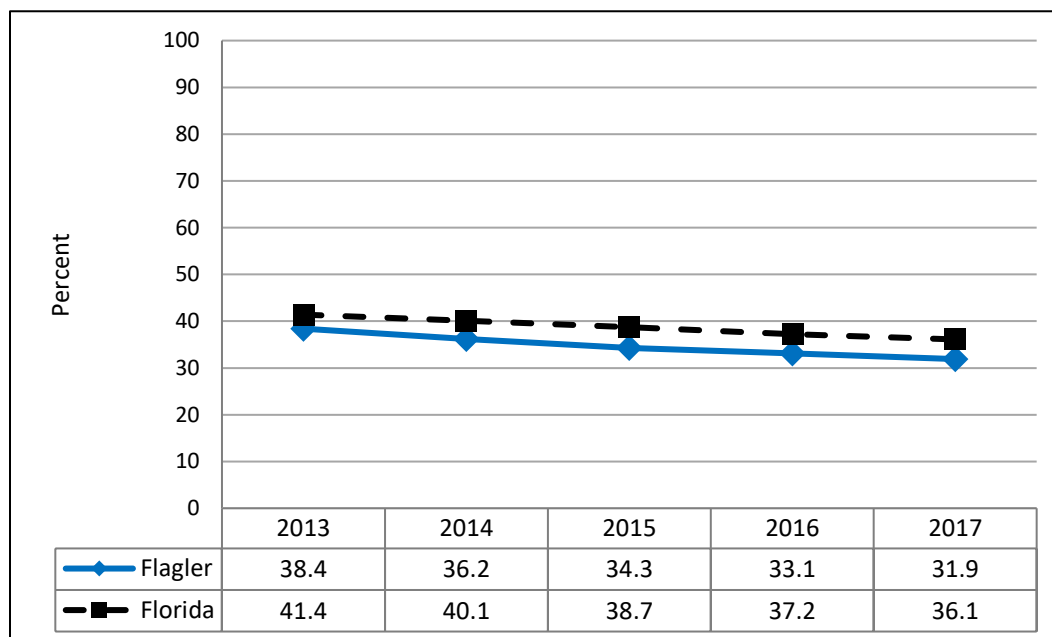
Source: 2008 - 2016 Small Area Health Insurance Estimates (SAHIE) using the American Community Survey (ACS)

Figure 10.21 Owner-Occupied Housing Units, 5-year Estimates



Source: US Bureau of the Census, American Communities Survey 5-Year Estimates

Figure 10.22 Occupied Households with Monthly Housing Costs of 30% or More of Household Income



Source: US Bureau of the Census, American Communities Survey

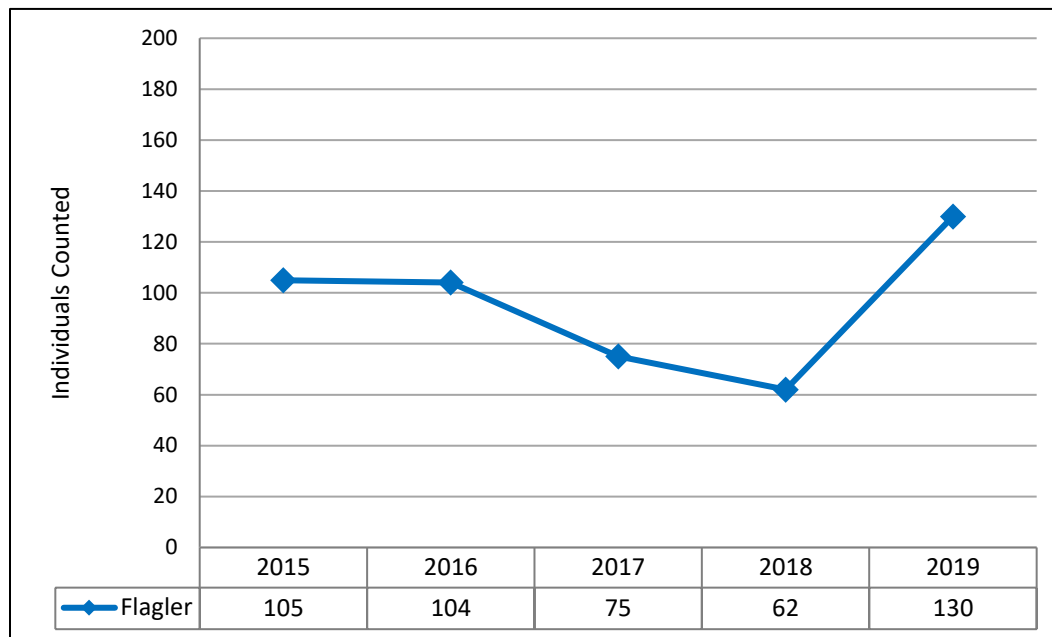
Figure 10.23 Rent and Wage Comparisons for Top 20 Occupations

Estimates based on 2-bedroom Fair Market Rent of \$1,028 per month. Thirty percent or less of income spent on housing is considered “affordable”.

| Occupation | # of Workers in 2017 | Median Wage Worker | | |
|---|----------------------|--------------------|----------------------|--------------------------|
| | | Hourly Wage | Max. Affordable Rent | % Income Needed for 2 BR |
| Retail Salespersons | 8,510 | \$10.39 | \$520 | 59.4% |
| Cashiers | 7,700 | \$9.19 | \$460 | 67.1% |
| Waiters and Waitresses | 5,770 | \$10.77 | \$539 | 57.3% |
| Secretaries and Administrative Assistants, Except Legal, Medical, | 5,270 | \$14.66 | \$733 | 42.1% |
| Landscaping and Groundskeeping Workers | 3,210 | \$11.75 | \$588 | 52.5% |
| Janitors and Cleaners | 2,850 | \$10.22 | \$511 | 60.4% |
| Cooks, Restaurant | 2,790 | \$12.02 | \$601 | 51.3% |
| Maids and Housekeeping Cleaners | 2,300 | \$9.51 | \$476 | 64.9% |
| Receptionists and Information Clerks | 1,970 | \$13.02 | \$651 | 47.4% |
| Licensed Practical and Licensed Vocational Nurses | 1,590 | \$19.50 | \$975 | 31.6% |
| Bartenders | 1,440 | \$10.63 | \$532 | 58.0% |
| Construction Laborers | 1,380 | \$13.60 | \$680 | 45.4% |
| Carpenters | 1,370 | \$16.44 | \$822 | 37.5% |
| Automotive Service Technicians and Mechanics | 1,230 | \$16.84 | \$842 | 36.6% |
| Dishwashers | 1,190 | \$9.92 | \$496 | 62.2% |
| Police and Sheriff's Patrol Officers | 1,010 | \$19.92 | \$996 | 31.0% |
| Electricians | 890 | \$18.48 | \$924 | 33.4% |
| Pharmacy Technicians | 710 | \$13.38 | \$669 | 46.1% |
| Security Guards | 690 | \$11.00 | \$550 | 56.1% |
| Firefighters | 660 | \$17.66 | \$883 | 34.9% |

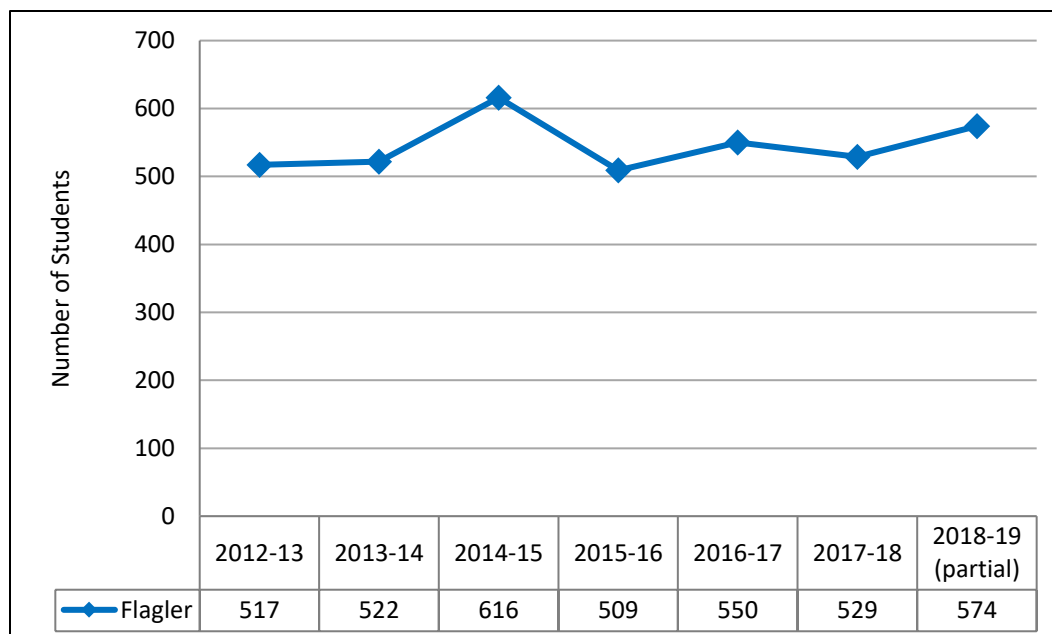
Source: Shimberg Center for Housing Studies, UF

Figure 10.24 Annual Point-in-Time Homelessness Count



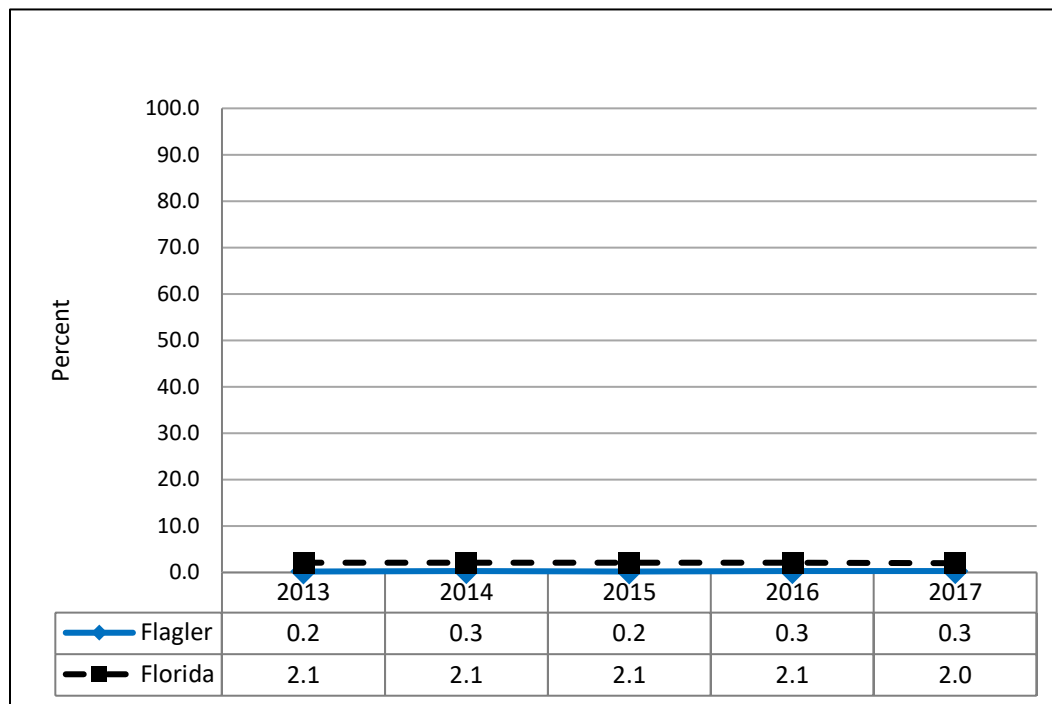
Source: Volusia Flagler County Coalition for the Homeless (CoC FL-504)

Figure 10.25 Homeless Students



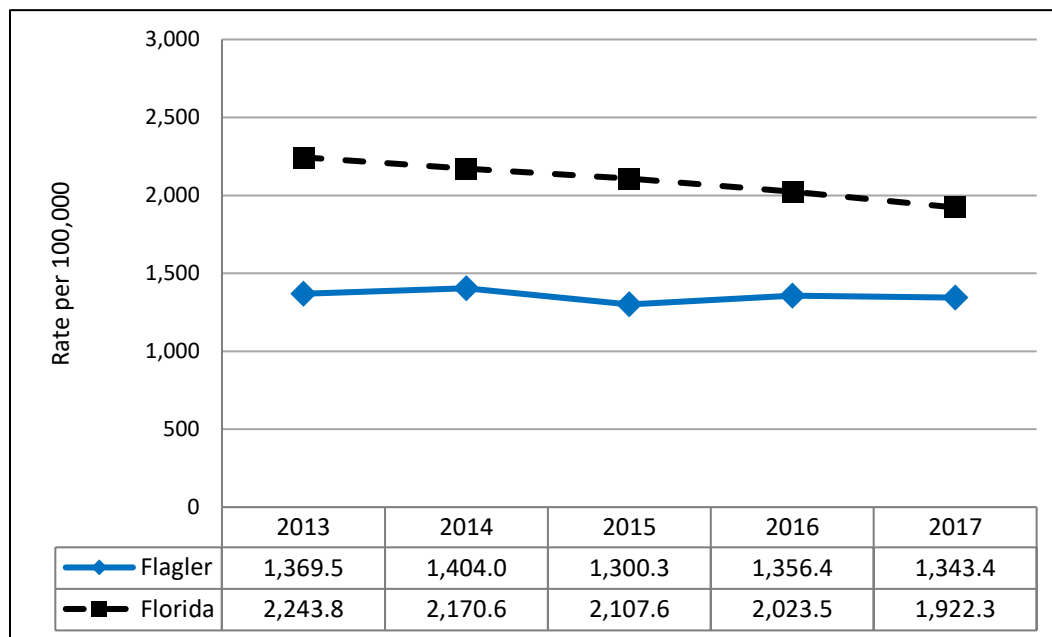
Source: Flagler Schools, Families in Transition Program

Figure 10.26 Workers Who Used Public Transportation



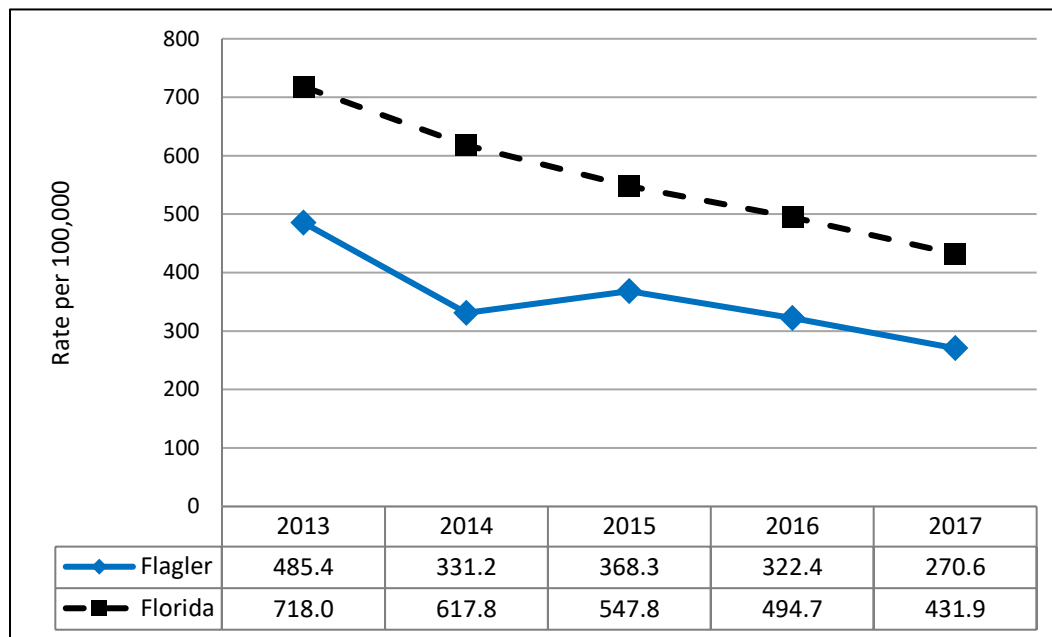
Source: US Bureau of the Census, American Communities Survey

Figure 10.27 Larceny Offense Rate



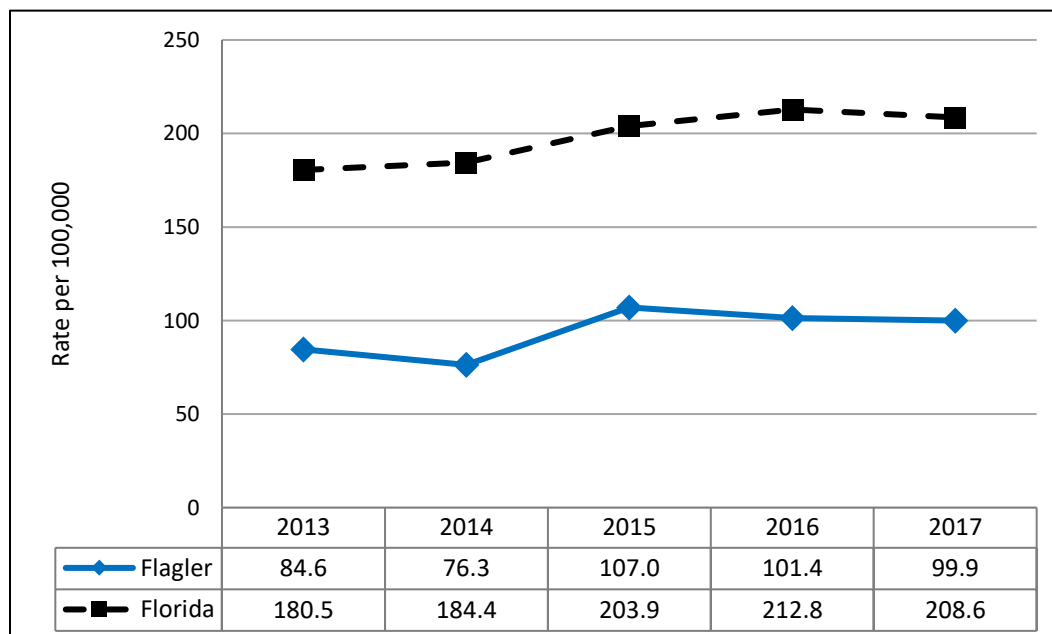
Source: Florida Department of Law Enforcement

Figure 10.28 Burglary Offense Rate



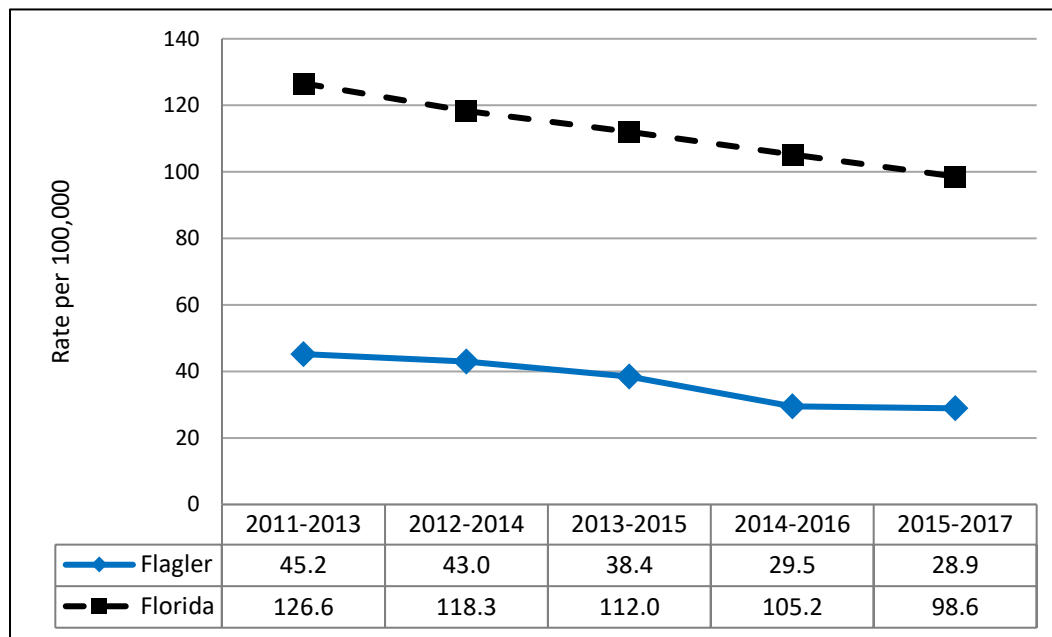
Source: Florida Department of Law Enforcement

Figure 10.29 Motor Vehicle Theft Offense Rate



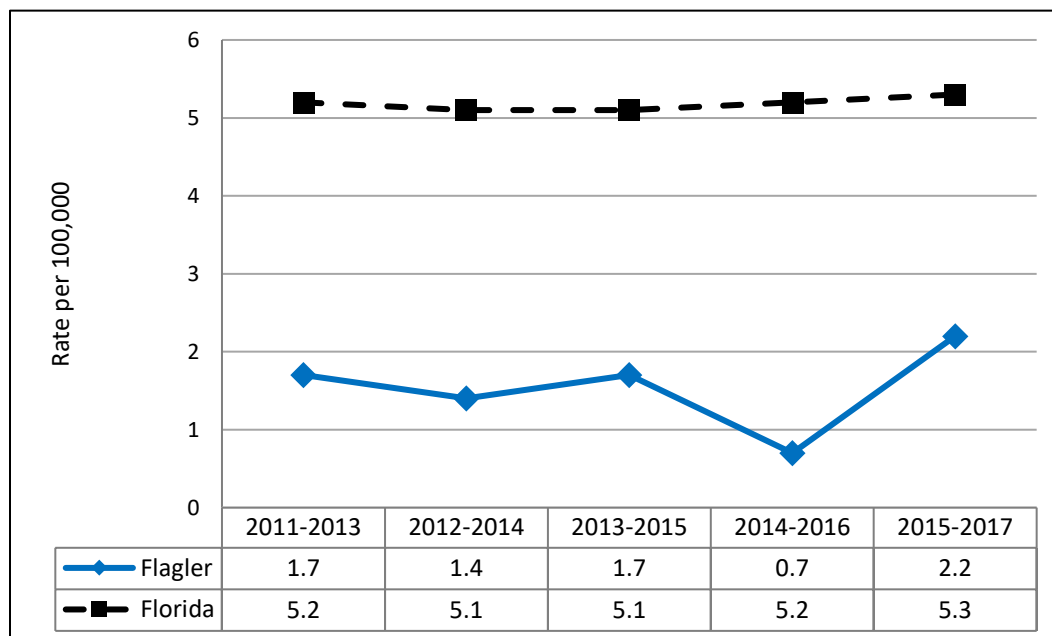
Source: Florida Department of Law Enforcement

Figure 10.30 Robbery Offense Rate, 3-year Rolling Rates



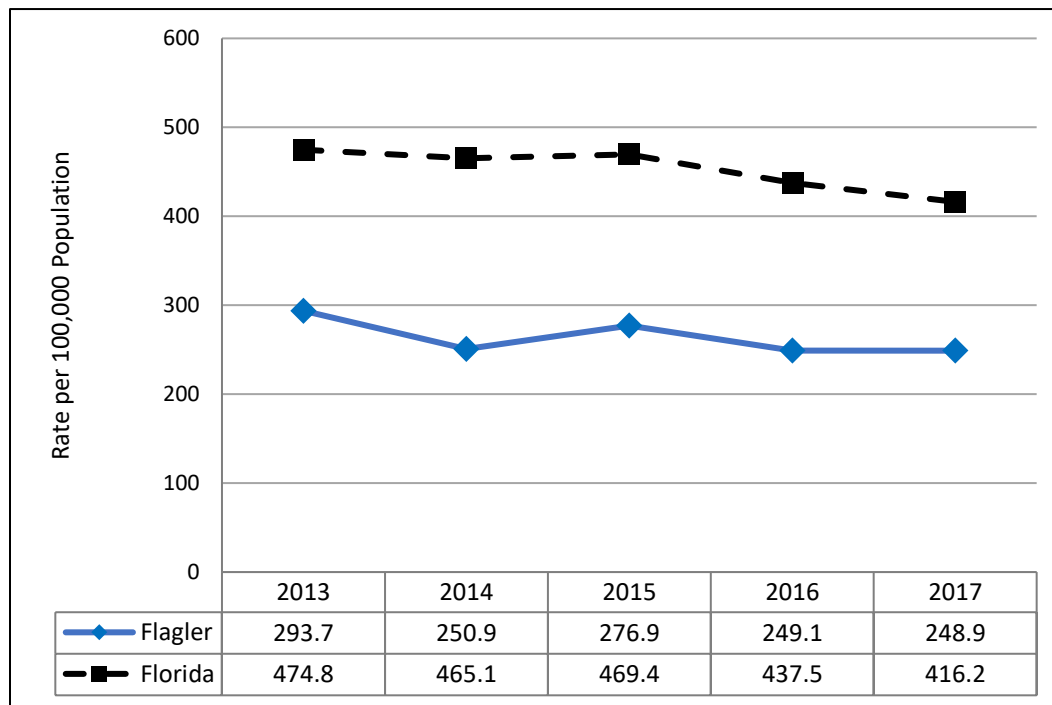
Source: Florida Department of Law Enforcement

Figure 10.31 Murder Offense Rate, 3-year Rolling Rates



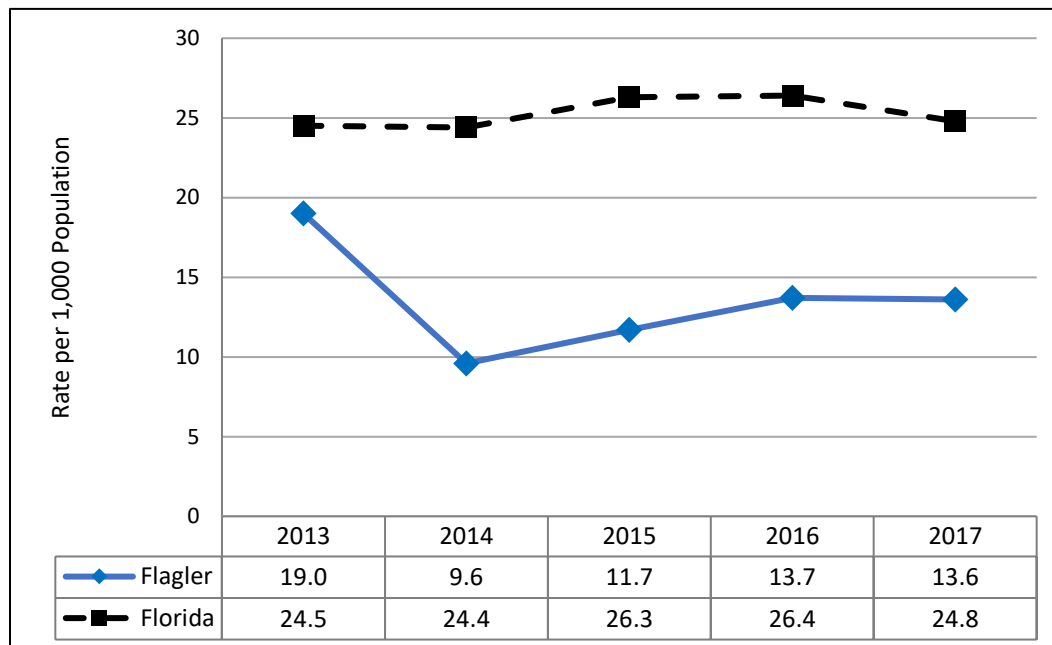
Source: Florida Department of Law Enforcement

Figure 10.32 Violent Crime Rate



Source: Florida Department of Law Enforcement

Figure 10.33 School Environmental Safety Incidents



Source: Florida Department of Education, Office of Safe Schools

Appendix A. Acknowledgments

The dedication, expertise, and leadership of many organizations and people made this 2019 Volusia County Community Health Needs Assessment (CHNA) possible. We sincerely thank everyone who made this project possible and look forward to collaboration on the health improvement strategies to be implemented. This shared ownership of community health among diverse stakeholders will be the cornerstone of our success.

Flagler County CHNA Partners

- **AdventHealth:** Deborah McNabb, Steve Jenkins, Russell Mariott
- **Florida Department of Health-Flagler County:** Robert Snyder
- **Halifax Health:** Bob Williams, Sharon Warriner
- **Flagler Cares:** Carrie Baird

Florida Department of Health in Volusia County, Office of Planning and Performance Management

- Thomas Bryant III; Dr. Laureen Husband; Marisol Bahena; Lynn Kennedy; Akisia Hicks-German

Flagler County CHNA Leadership Team

- AdventHealth Central Florida Division – North: Deborah McNabb, Community Benefits Director; Russell Marriot, Executive Director of Marketing
- AdventHealth Palm Coast: Wally DeAquino, COO; Lauren Dye, Marketing Director
- Azalea Health: Laura Spencer, CEO
- Business/Community Leader: Barbara Revels, Coquina Shore Construction, Inc.
- City of Bunnell: City Manager Dr. Alvin Jackson
- City of Flagler Beach: City Manager Larry Newsom
- City of Palm Coast: Beau Falgout, Assistant City Manager
- Commission on Homelessness and Housing of Volusia/Flagler: Jeff White, Executive Director
- County of Flagler: County Commission Chair Donald O’Brien; County Administrator Jerry Cameron
- Department of Children and Families: Charles Puckett, Circuit 7 Community Development Administrator
- Department of Health-Flagler: Bob Snyder, Health Officer; Gretchen Smith, Communications Manager/PIO
- Early Learning Coalition of Flagler/Volusia: D.J. Lebo, CEO
- Family Life Center: Trish Giaccone, CEO
- Flagler Cares: Dr. Bickel, President of the Board of Directors
- Flagler Schools: Lynette Shott, Executive Director of Community & Student Engagement
- Flagler Free Clinic: Peggy Hengeveld, Board Chair
- Halifax Health: Sharon Warriner, Grant Writer, Business Development
- SMA Healthcare: Ivan Cosimi, CEO; Alicia Vincent, VP of Flagler Services; Chet Bell, Management Consultant
- United Way of Volusia/Flagler Counties: Courtney Edgcomb, President; Taylor Duguay, Director of Community Impact

Appendix B. Data Sources

The secondary data included in this document was gathered, formatted and analyzed in partnership with the Florida Department of Health in Volusia County Office of Planning and Performance Management. Special thanks are extended to the staff for their significant contribution to this project.

The majority of the data was pulled directly from the Florida Department of Health **Florida Health CHARTS** system that is an assemblage of data from over 25 programs and agencies. Throughout this document, the specific data source noted in the **Florida Health CHARTS** system was listed for each graph, table or map even if the data was gathered through the **Florida Health CHARTS** system.



www.flhealthcharts.com

American Health Resource Files

<https://data.hrsa.gov/topics/health-workforce/ahrf>

Baker Act Reporting Center, University of South Florida

<https://www.usf.edu/cbcs/baker-act/>

Centers for Disease Control (CDC)

<http://www.cdc.gov/>

Dartmouth Atlas Project

<https://www.dartmouthatlas.org/>

Feeding America, Map the Meal Gap

<https://map.feedingamerica.org/>

Flagler Schools

www.flaglerschools.com

Florida Agency for Health Care Administration

www.ahca.myflorida.com

Florida Department of Children and Families

www.myflfamilies.com, <http://centerforchildwelfare.fmhi.usf.edu/>

Florida Safe Families Network Data Mart/Data Registry

Florida Youth Substance Abuse Survey

<https://www.myflfamilies.com/service-programs/samh/prevention/fysas/>

Florida Department of Education

www.fldoe.org

Education Information & Accountability Services; Office of Early Learning; Office of Safe Schools

Florida Department of Elder Affairs

<http://elderaffairs.state.fl.us/>

Florida Department of Health

www.floridahealth.gov, <http://www.flhealthcharts.com>

Bureau of Epidemiology; Bureau of HIV/AIDS; Bureau of Immunization; Bureau of STD Prevention and Control; Bureau of TB & Refugee Health; Bureau of Vital Statistics; Division of Medical Quality Assurance; Florida Behavioral Risk Factor Surveillance System; Florida Department of Health Physician Workforce Surveys; Florida Youth Tobacco Survey; Office of Injury Prevention; WIC and Nutritional Services

Florida Department of Highway Safety and Motor Vehicles

www.flhsmv.gov

Florida Department of Juvenile Justice

www.djj.state.fl.us

Florida Department of Law Enforcement

www.fdle.state.fl.us

Merlin, Florida's Web-Based Reportable Disease Surveillance System

<http://www.floridahealth.gov>

Shimberg Center for Housing Studies, Florida Housing Data Clearinghouse

<http://flhousingdata.shimberg.ufl.edu/>

SMA Healthcare

<https://smahealthcare.org/>

University of Florida, Drug-Related Outcomes Surveillance and Tracking System (FROST)

<https://frost.med.ufl.edu/>

University of Miami (FL) Medical School, Florida Cancer Data System

<https://fcds.med.miami.edu/inc/welcome.shtml>

University of South Florida, Baker Act Reporting Center

<https://www.usf.edu/cbcs/baker-act/>

U.S. Bureau of the Census

<http://www.census.gov>

American Community Survey, American Community Survey 1-year estimates, American Community Survey 5-year estimates; County Business Patterns

U.S. Department of Labor, Bureau of Labor Statistics

<http://www.bls.gov>

Volusia/Flagler County Coalition for the Homeless

<http://www.vfcch.org/>

Appendix D. 2019 County Health Survey Instrument

Spanish version also available

Creating a Healthier Flagler & Volusia: 2019 Community Survey

We need your assistance to better understand the health of Volusia & Flagler counties. You can help by completing this health survey. The survey results will be used to compile the community health needs assessment. Thank you!

1. Where do you live? ☐ Flagler ☐ Volusia ☐ Another Florida County ☐ Outside of Florida 2. Zip code: _____

3. How do you rate your overall health? (Check **ONE**) ☐ Excellent ☐ Good ☐ Fair ☐ Poor ☐ Don't know

4. Check up to 5 things that allow **YOU** to be healthy where you live:

- | | | |
|--|---|--|
| <input type="checkbox"/> Churches or other places of worship | <input type="checkbox"/> Good place to raise kids | <input type="checkbox"/> Absence of discrimination |
| <input type="checkbox"/> Access to health care | <input type="checkbox"/> Good jobs, healthy economy | <input type="checkbox"/> Presence of advanced medical technology |
| <input type="checkbox"/> Places where I can be active & safe | <input type="checkbox"/> Good education | <input type="checkbox"/> Good place to grow old |
| <input type="checkbox"/> Access to public transportation | <input type="checkbox"/> Safe neighborhood/safe to walk | <input type="checkbox"/> Schools focused on children's health |
| <input type="checkbox"/> Affordable and/or available housing options | <input type="checkbox"/> Preventative health care | <input type="checkbox"/> Access to healthy foods |
| <input type="checkbox"/> Access to social and mental health services | <input type="checkbox"/> Clean and healthy environment | <input type="checkbox"/> Other _____ |

5. Check up to 5 health issues **YOU** are most concerned about in your county:

- | | | |
|---|---|--|
| <input type="checkbox"/> Asthma/respiratory/lung disease | <input type="checkbox"/> Addiction – alcohol or drug | <input type="checkbox"/> Child abuse/neglect |
| <input type="checkbox"/> End of life care | <input type="checkbox"/> Mental health problems | <input type="checkbox"/> Teenage pregnancy |
| <input type="checkbox"/> Environmental health, sewers, septic tanks | <input type="checkbox"/> Cancer | <input type="checkbox"/> HIV/AIDS |
| <input type="checkbox"/> Heart disease & stroke | <input type="checkbox"/> Diabetes | <input type="checkbox"/> Domestic violence |
| <input type="checkbox"/> Infant mortality/infant death | <input type="checkbox"/> Motor vehicle crash injuries | <input type="checkbox"/> Adult obesity |
| <input type="checkbox"/> Sexually transmitted diseases | <input type="checkbox"/> Firearms in homes | <input type="checkbox"/> Childhood obesity |
| <input type="checkbox"/> High blood pressure | <input type="checkbox"/> Dental problems | <input type="checkbox"/> Violence (rape, assault, crime, etc) |
| <input type="checkbox"/> Unemployment | <input type="checkbox"/> Smoking/tobacco use | <input type="checkbox"/> Access to healthy food/grocery stores |
| <input type="checkbox"/> Cholesterol | <input type="checkbox"/> Homelessness | <input type="checkbox"/> Other _____ |

6. Check up to 5 unhealthy behaviors **YOU** are most concerned about in your county:

- | | | |
|--|---|---|
| <input type="checkbox"/> Alcohol/drug abuse | <input type="checkbox"/> Lack of exercise | <input type="checkbox"/> Tobacco use |
| <input type="checkbox"/> Poor nutrition/poor eating habits | <input type="checkbox"/> Not getting "shots" to prevent disease | <input type="checkbox"/> Unlicensed and/or unsafe drivers |
| <input type="checkbox"/> Dropping out of school | <input type="checkbox"/> Not using birth control | <input type="checkbox"/> Unsafe sex (teen & adult) |
| <input type="checkbox"/> Mental health problems/stress | <input type="checkbox"/> Discrimination | <input type="checkbox"/> Being overweight/obese |
| <input type="checkbox"/> Poor dental/oral health | <input type="checkbox"/> Overuse of emergency rooms | <input type="checkbox"/> Other _____ |

7. What health care services are difficult to obtain in your community? (Check **ALL** that apply):

- | | | |
|--|--|---|
| <input type="checkbox"/> Alternative therapy | <input type="checkbox"/> Prescriptions/medications/medical supplies | <input type="checkbox"/> Prenatal care |
| <input type="checkbox"/> Dental/oral care | <input type="checkbox"/> Preventive care (i.e. annual check ups) | <input type="checkbox"/> Mental health/counseling |
| <input type="checkbox"/> Emergency room/inpatient care | <input type="checkbox"/> Primary care (i.e. family doctor or walk-in clinic) | <input type="checkbox"/> Physical therapy/rehab therapy |
| <input type="checkbox"/> Family planning/birth control | <input type="checkbox"/> Specialty doctor care (i.e. heart doctor) | <input type="checkbox"/> Vision/eye care |
| <input type="checkbox"/> X-rays/mammograms/lab work | <input type="checkbox"/> Substance abuse services - drug & alcohol | <input type="checkbox"/> Other _____ |

8. What do you feel are barriers for **YOU** getting or staying healthy in your county? (Check **ALL** that apply):

- | | | |
|---|--|---|
| <input type="checkbox"/> I work too much | <input type="checkbox"/> I don't have good health insurance | <input type="checkbox"/> I can't get to somewhere that sells healthy food |
| <input type="checkbox"/> It's hard to be healthy where I work | <input type="checkbox"/> I can't get to somewhere I can exercise | <input type="checkbox"/> I can't exercise outside |
| <input type="checkbox"/> I don't have support from family/friends | <input type="checkbox"/> I don't exercise | <input type="checkbox"/> It's hard or expensive to cook/eat healthy |
| <input type="checkbox"/> I don't like healthy food | <input type="checkbox"/> None, I don't have any barriers | <input type="checkbox"/> Other _____ |

9. What do you feel are barriers for **YOU** getting health care in your county? (Check **ALL** that apply):

- | | | |
|--|--|--|
| <input type="checkbox"/> Lack of transportation | <input type="checkbox"/> Have no regular source of care | <input type="checkbox"/> Racial discrimination/lack of respect |
| <input type="checkbox"/> Can't pay for doctor/hospital visits | <input type="checkbox"/> Lack of evening and/or weekend services | <input type="checkbox"/> Medical debt |
| <input type="checkbox"/> Can't find providers that accept my insurance | <input type="checkbox"/> Long waits for appointments | <input type="checkbox"/> Lack of phone access |
| <input type="checkbox"/> Don't know what types of services are available | <input type="checkbox"/> No one to turn to for help | <input type="checkbox"/> I don't have insurance |
| <input type="checkbox"/> Too much worry and stress | <input type="checkbox"/> Lack of daily needs for survival | <input type="checkbox"/> Coping with loss/grief |
| <input type="checkbox"/> Language barriers | <input type="checkbox"/> Coping with loneliness | <input type="checkbox"/> None, I don't have any barriers |
| <input type="checkbox"/> Need for senior services | <input type="checkbox"/> Coping with depression | <input type="checkbox"/> Other _____ |

Please continue to page 2.

Creating a Healthier Flagler & Volusia: 2019 Community Survey

10. How is your health care covered? (Check ALL that apply):

- ☐ Insurance: your or a family member's job ☐ Medicare ☐ Medicaid – your own ☐ Don't have health insurance
☐ Insurance you pay for personally ☐ Military coverage/VA ☐ Pay cash ☐ Other _____

11. Where would you go if you were worried about your child's mental, physical or social health? (Check ALL that apply):

- ☐ I don't have children/dependents ☐ The local health department ☐ School nurse/teacher/counselor
☐ Their doctor's office ☐ Hospital emergency room ☐ I don't know
☐ Other family members or friends ☐ Local place of worship or neighborhood group ☐ Other _____

12. Do problems getting child care make it difficult for you to work or study? ☐ Yes ☐ No ☐ Not applicable
 13. Are you afraid you might be hurt in your apartment building or house? ☐ Yes ☐ No ☐ Don't know/not sure
 14. Are you worried or concerned that in the next 2 months you may not have stable housing that you own, rent, or stay in as part of a household? ☐ Yes ☐ No ☐ Don't know/not sure
 15. Do you have a safe place or is there someplace where you feel safe? ☐ Yes ☐ No ☐ Don't know/not sure

Within the last 12 months:

16. Has the utility company shut off your services for not paying your bills? ☐ Yes ☐ No ☐ Don't know/not sure
 17. Did you ever eat less because there wasn't enough money for food? ☐ Yes ☐ No ☐ Don't know/not sure
 18. Did you worry if your food would run out before you got money to buy more? ☐ Yes ☐ No ☐ Don't know/not sure
 19. Was there a time you needed to see a doctor but could not because of cost? ☐ Yes ☐ No ☐ Don't know/not sure
 20. Ever had to go without health care because you didn't have a way to get there? ☐ Yes ☐ No ☐ Don't know/not sure

21. How often do you feel that you lack companionship? ☐ Never ☐ Hardly ever ☐ Sometimes ☐ Often
 22. How often do you feel left out? ☐ Never ☐ Hardly ever ☐ Sometimes ☐ Often
 23. How often do you feel isolated from others? ☐ Never ☐ Hardly ever ☐ Sometimes ☐ Often

Demographics:

24. Age: ☐ less than 18 ☐ 18-24 ☐ 25-34 ☐ 35-44 ☐ 45-54 ☐ 55-64 ☐ 65+

25. Marital Status: ☐ Single ☐ Married ☐ Divorced ☐ Widowed

26. Gender: ☐ Female ☐ Male

27. Race: With which group do you most identify? (Check ONE selection)

- ☐ Black/African American ☐ Mixed Race ☐ Asian ☐ Hawaiian Native/Pacific Islander
☐ White/Caucasian ☐ Native American/Alaskan Native ☐ Other _____

28. With which ethnic group do you most identify? (Check ONE selection) ☐ Not Hispanic/Latino ☐ Hispanic/Latino

29. Education: Please check the highest level completed: (Check ONE selection)

- ☐ Elementary/Middle School ☐ Some College ☐ 4-year College/Bachelor's Degree
☐ High School Diploma or GED ☐ Technical/Community College ☐ Graduate/Advanced Degree

30. Employment Status: (Check ONE selection):

- ☐ Employed full-time ☐ Self-employed ☐ Not seeking work ☐ Home maker ☐ Student
☐ Employed part-time ☐ Unemployed ☐ Retired ☐ Other _____

31. Annual Household Income: (Check ONE selection)

- ☐ Less than \$10,000 ☐ \$20,000 to \$29,999 ☐ \$50,000 to \$74,999 ☐ \$100,000 or more
☐ \$10,000 to \$19,999 ☐ \$30,000 to \$49,999 ☐ \$75,000 to \$99,999

Thank you for taking the time to complete this survey! If you have any questions or would like to participate in the community health needs assessment process, email Lauren Husband at Lauren.Husband@flhealth.gov. Mail completed surveys to Community Health Survey, Department of Health-Volusia, 1845 Holsonback Drive, Bin #126, Daytona Beach, FL 32117.