## Martin County Community Health Assessment

A Report of the Martin County Health Collaborative


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FOR PALM BEACH AND MARTIN COUNTIES


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## TABLE OF CONTENTS

EXECUTIVE SUMMARY ..... 7
INTRODUCTION ..... 10
Report Organization ..... 10
Methodology ..... 11
SOCIODEMOGRAPHIC PROFILE ..... 13
Population Demographics ..... 13
Population Characteristics ..... 14
Population Growth ..... 14
Age Distribution ..... 14
Population by Sex, Age, and Race or Ethnicity ..... 16
Grandparents in Martin County ..... 21
Household Composition ..... 22
Mobility ..... 22
Socioeconomic Profile ..... 23
Income ..... 23
Employment ..... 24
Poverty ..... 26
Education ..... 27
COUNTY HEALTH RANKINGS ..... 29
COUNTY HEALTH PROFILE ..... 31
Leading Causes of Death ..... 31
Cancer ..... 32
Heart Disease ..... 33
Chronic Lower Respiratory Disease ..... 34
Unintentional Injuries ..... 36
Motor Vehicle Crashes ..... 37
Alzheimer 's Disease ..... 38
Suicide ..... 39
Parkinson's Disease ..... 40
Diabetes ..... 41
Cirrhosis ..... 42
Septicemia ..... 42
Pneumonia and Influenza ..... 43
AIDS/HIV ..... 44
Risk Factors ..... 45
Diabetes ..... 45
Hypertension ..... 46
Physical Activity and Nutrition ..... 47
Obesity ..... 48
Poor Mental Health ..... 49
Smoking ..... 50
Adolescent Substance Use and Mental Health ..... 51
Adult Asthma ..... 53
Sexually-Transmitted Infections ..... 54
Maternal and Child Health ..... 55
Birth Rates ..... 55
Teen Births ..... 56
Low Birth Weight ..... 57
Infant Mortality ..... 58
HEALTHCARE ACCESS AND UTILIZATION ..... 59
Health Insurance Coverage ..... 59
Professional Shortage and MUAs ..... 59
Medicaid ..... 61
Florida KidCare ..... 62
Primary Healthcare Providers ..... 63
Dentists ..... 65
Hospital Resources/ Acute Care ..... 66
Healthcare Facilities ..... 66
Hospital Utilization ..... 67
Mental Health and Substance Abuse Services ..... 69
Long-term Care and Senior Health Services ..... 70
COMMUNITY HEALTH SURVEY ..... 72
Methodology ..... 72
Demographics ..... 73
Survey Findings ..... 74
COMMUNITY FOCUS GROUPS ..... 83
Methodology ..... 83
Focus Group Themes. ..... 83
RECOMMENDATIONS ..... 87
APPENDIX I - COPY OF SURVEY (ENGLISH) ..... 90
APPENDIX II - COPY OF SURVEY (SPANISH) ..... 95
APPENDIX III - FOCUS GROUP QUESTIONS ..... 101
APPENDIX IV - RESOURCE LIST ..... 103

## EXECUTIVE SUMMARY

In 2009, the Martin County Health Collaborative was formed to conduct a community health assessment. The purpose of the assessment was to update available information on the health status of Martin County residents and to obtain local residents' perspectives on existing health concerns through a survey and focus groups. Based on the assessment results, a set of recommendations and action steps were developed to address specific health issues.

Overall, Martin County's health continues to be good with lower incidence of disease and chronic health conditions in most categories compared to the rest of Florida. However, in some instances, the mortality rate and incidence for health conditions were higher in Martin County compared to the state. There were also some health disparities identified for Martin County.

This Community Health Assessment is organized into five sections: (1) Sociodemographic Profile, (2) County Health Profile, (3) Results from Community Health Survey, (4) Results from Community Focus Groups, and (5) Key Issues and Recommendations.

## Current Health Trends and Issues

* Unemployment Rate. The unemployment rate increased 127\% from 2004 (4.9\%) to 2009 (11.1\%).
* Government Assistance. Ten percent of households received food stamps in 2009 with $49 \%$ of these households comprising of one or more people with a disability.
* Growth in Hispanic/Latino Population. The Hispanic/Latino population in Martin County increased from $7.5 \%$ in 2000 to $10.2 \%$ in 2009 . This increase is less than that of Florida, but equal to the national average of growth for this population.
* Educational Attainment by Gender. Males (28\%) in the 18 to 24 year old population were significantly more likely to have less than a high school diploma than females ( $13 \%$ ) in the same age population.
* Health Disparities Impacting Non-Whites. There were a number of health issues where NonWhites were disproportionately impacted compared to Whites.
- Cancer: The age-adjusted mortality rate for Non-Whites (167.1) was greater than that for Whites (145.2).
- Stroke: The age-adjusted mortality rate for Non-Whites (40.7) was greater than that for Whites (28.0).
- Diabetes: The age-adjusted mortality rate for Non-Whites (41.4) was greater than that for Whites (8.7).
- Pneumonia and Influenza: The age-adjusted mortality rate for Non-Whites (8.0) was greater than that for Whites (4.6).
- HIV/AIDS: The age-adjusted mortality rate for Non-Whites (17.2) was greater than that for Whites (0.9).
- Sexually Transmitted Infections: Blacks who comprise 5\% of the population of Martin County accounted for $40 \%$ reported STI cases. Hispanics who comprise $10 \%$ of the population of Martin County accounted for $29 \%$ reported STI cases.
- Teen Birth Rates: The teen birth rates among Non-Whites (36.8) were greater than that for Whites (3.4).
* Health Disparities Impacting Whites. There were a couple of health issues where Whites were disproportionately impacted compared to Non-Whites.
- Unintentional Injuries: The age-adjusted mortality rate for Whites (55.9) was greater than that for Non-Whites (39.8).
- Suicide: The age-adjusted mortality rate for Whites (18.4) was greater than that for Non-Whites (9.5).


## Healthcare Access and Utilization

Martin County is currently ranked fifth healthiest county in Florida. It has high quality healthcare anchored by Martin Memorial Health Systems. Currently, Martin County has 433 medical doctors and 2,242 registered nurses and nurse practitioners. Adults can receive an array of medical services, including routine check-ups and dental care at the Martin County Health Department. The Volunteers in Medicine Clinic provides free primary medical care to low-income residents of Martin County. Because Indiantown has been designated as a Medically Underserved Area, there is a Florida Community Health Center located in Indiantown that offers a wide range of primary care services, including dental care.

More than a quarter of Martin County residents are currently uninsured. However, in 2009, Martin County had a median Medicaid enrollment of 7,528 per 100,000 people and nearly 1,800 children were enrolled in Florida's KidCare Program. Of the 17,906 hospitalizations by Martin County residents, Medicare covered $59 \%$ of the cost for total hospitalizations followed by commercial insurance ( $21 \%$ ), Medicaid ( $15 \%$ ), and self pay or charity ( $6 \%$ ).

## Community Health Survey Findings

* Only five percent of survey respondents reported not having anywhere to go if ill.
* The majority of respondents reported they did not obtain needed prescriptions.
* The five most difficult to obtain healthcare services were dental care, alternative therapy, vision care, specialty care, and emergency room care.
* The top most important health issues identified by respondents were substance abuse and addiction, cancer, obesity, diabetes, high blood pressure, and teen pregnancy.
* The majority of respondents reported:
- Low or medium stress
- Excellent, very good, or good health
- Not smoking, chewing tobacco or not being exposed to secondhand smoke
- Not overindulging in alcohol
- Not misusing or abusing drugs
- Never receiving flu shot
- Always feeling safe in their community
* Most mothers reporting receiving prenatal care within their $1^{\text {st }}$ trimester $(90 \%)$.
* Most parents reported that their children had visited the doctor within the last year ( $82.8 \%$ ).
* About 1 in 5 parents ( $19.3 \%$ ) reported that there was a time in the last year that their children did not see a doctor due to cost.


## Focus Group Findings

* Overall, participants felt that Martin County was a good place to raise a family.
* They were satisfied with quality of healthcare services.
* In general, participants felt there were no barriers to obtaining needed prescription medications.
* Participants expressed high regard for the quality of subsidized and free health and social services, including those offered by Volunteers in Medicine Clinic, Florida Community Health Centers, and Martin County Council on Aging.
* Some areas of concern raised by focus group participants included:
- Lack of transportation
- Little accessibility to health services for Indiantown residents
- Quantity of mental health and substance abuse services
- Lack of shelters and assistance for homeless
- Issues with obtaining healthcare services with Medicaid plan


## Key Issues and Recommendations

Following review of the community health assessment report, the Steering Committee of the Martin County Health Collaborative met to discuss key findings of the report. Three broad health issues were identified: (1) Education and Awareness of Existing Health Services, (2) Access to Primary Care, and (3) Access to Mental Health and Substance Abuse Services. The Steering Committee aims to address the three identified health issues using some targeted strategies.

In December 2004, the Community Health Planning Initiative issued a report to the Martin County community to establish a vision for the health status of the community, to evaluate the healthcare needs, and to make recommendations to the community for future action. In 2005, the Martin County Health Department completed an assessment of the local public health system based on the 10 essential public health services. However, these assessments were limited in resources. Moreover, consumers of health services were not queried regarding their health needs. Beginning in 2009, Martin County experienced an increased demand for health related services as a result of the economic downturn. Consequently, the need to assess the health concerns of Martin County residents became more imperative. Thus, in the Fall of 2009, the Martin County Health Collaborative was established. The first mission of the Martin County Health Collaborative was to conduct a comprehensive community health assessment.

The community health assessment was completed in December 2010 and the results have been compiled in this report. This report aims to afford healthcare providers, county governmental officials, county residents, and other community entities with a snapshot of the overall health status of Martin County's population. This report contains data amassed from myriad national, state, and local public databases; community health surveys; and community focus groups.

## Report Organization

This report is organized into five distinct sections.

* The Sociodemographic Profile provides information on a number of social and economic demographic indicators for Martin County using data gleaned from existing public databases.
* The County Health Profile provides information on the overall health of Martin County using data gleaned from existing public databases. Much of information presented in this section compares county-level data to state-level data. First, some of the leading causes of death are evaluated. Second, some key health indicators for Martin County residents are explored. Third, the current status of maternal and child health is evaluated. Finally, the status of Martin County residents' access to healthcare is examined.
* Aggregate data results from the community health survey that was conducted as part the community health assessment are presented.
* Summary data from the focus groups that were conducted as part of the community health assessment are presented.
* Based on results of overall community health survey, some key issues are highlighted. Additionally, recommendations by the Steering Committee for strategic action steps are delineated.

The Martin County Health Collaborative utilized the Mobilizing for Action through Planning and Partnerships (MAPP) to complete the Martin County Health Assessment. MAPP is a community driven approach used to assess the health status of communities and improve their current delivery of health services. This approach allows for the collaboration of partnerships in an effort to prioritize issues related to health and quality of life, identify resources available to the community, and facilitate strategic action.

Approved as a "best practice" model by the Centers for Disease Control and Prevention (CDC) and the National Association of County and City Health Officers (NACCHO), MAPP consists of six phases: organizing, visioning, assessments, strategic issues, goals/strategies, and action cycle.
(1) Organizing. This is the first phase of the MAPP process and involves organizing the planning process and developing the planning partnership. This phase is intended to build a planning process that will allow for commitment and engagement of active participants resulting in a final plan that can be realistically put into practice.
(2) Visioning. This is the second phase of the MAPP process. This phase of the process is essential for developing a vision and a set of values shared by the community at large. This phase also provides direction for subsequent phases.
(3) Assessments. The third phase of the MAPP process focuses on the assessments necessary to gain information for improving the health status of the community. There are four MAPP assessments in this phase:

* Community Themes and Strengths Assessment
* Local Public Health System Assessment
* Community Health Status Assessment
* Forces of Change Assessment
(4) Strategic issues. Using assessment data from phase three, this phase of the MAPP process is primarily for developing a list of pertinent issues facing the community. Once the strategic issues are identified, their effect on the community is addressed.
(5) Goals/Strategies. In this phase identified strategic issues from phase four are used to devise related goal statements. Broad strategies are utilized to address issues and achieve goals related to the vision of the community resulting in the development and adoption of an interrelated set of strategy statements.
(6) Action Cycle. This final phase of the MAPP process links planning, implementation, and evaluation activities with the purpose of generating results so that an action plan to address priority goals can be implemented.

Mobilizing for Action through Planning and Partnerships Process


Source: NACCHO MAPP Handbook

## Population Demographics

Martin County was established from St. Lucie and Palm Beach Counties in 1925. Martin County is located on Florida's east coast and is one of the coastal counties that make up the Treasure Coast which runs along the Atlantic Ocean. Approximately 556 square miles, Martin County lies halfway between Miami and Orlando and is conveniently located near Interstate 95 and Florida's Turnpike. The beautiful beaches and coastal towns are just some of the reasons why Martin County is a great place to live. Ranked one of the top five healthiest counties in Florida, ${ }^{1}$ Martin County's service providers have a history of actively forming partnerships in an effort to meet the health needs of its residents.


Source: Martin County Convention and Visitors Bureau. www.discovermartin.com

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## Population Characteristics

Martin County's population trends from 2000 to 2009 can be seen in Table 1.
Table 1. General Population Trends, 2000-2009

|  | 2000 | 2003 | 2006 | 2009 | \% Estimated <br> Population Change <br> from 2006-2009 |
| :--- | ---: | ---: | ---: | ---: | ---: |
| Martin <br> County | 126,731 | 134,556 | 137,740 | 139,794 | $10 \%$ |
| Florida | $15,982,378$ | $16,981,183$ | $18,088,505$ | $18,537,969$ | $16 \%$ |

Source: U.S. Census Bureau, 2009

## Martin County Population Growth

Between 2000 and 2009, the estimated population of Martin County increased by $10 \%$, compared to a $16 \%$ increase for Florida. This population gain was primarily due to domestic migration $(+13,947)$, followed by international migration $(+3,145)$ and natural increase $(+2,107)$.

## Age Distribution

In 2009, $55 \%$ of Martin County's population was 45 years old and older, as compared to $43 \%$ in Florida. Fourteen percent of Martin County's 2009 population was younger than 15 years of age. The median age in Martin County increased slightly from 47.3 in 2000 to 48.2 in 2009. ${ }^{2}$

Figure 1. Estimates of Population by Age Group, 2009


Source: U.S. Census Bureau, 2009
${ }^{2}$ US Census Bureau, 2009.
Martin County Health Assessment

From 2000 to 2009, there was a $5 \%$ decrease in the 25 to 44 year old population and a $5 \%$ increase in the 45 to 64 year old population. The birth to $14(-1 \%)$ and 15 to $24(+2 \%)$ year old populations only demonstrated a slight change from 2000 to 2009. The 65 and older population demonstrated no change from 2000 to 2009.

Table 2. Martin County Residents' Age Distribution, 2000 \& 2009

|  | 2000 | 2009 |
| :--- | :---: | :---: |
| $0-14$ years | $15 \%$ | $14 \%$ |
| $15-24$ years | $8 \%$ | $10 \%$ |
| $25-44$ years | $23 \%$ | $18 \%$ |
| $45-64$ years | $25 \%$ | $30 \%$ |
| $65+$ | $28 \%$ | $28 \%$ |

Source: U.S. Census Bureau, 2000/2009
Figure 2. Martin County Residents’ Age Distribution by Sex, 2009


Source: U.S. Census Bureau, 2009

## Martin County Population by Sex, Age, and Race or Ethnicity

A detailed description of Martin County's population by sex, age, and race or ethnicity can be seen in Table 3 and Table 4.

The 45 to 64 year old population accounts for the greatest proportion among Whites ( $30.3 \%$ ). With respect to sex, the female to male ratio was fairly equal ( $10: 11$ ). The female to male ratio was equal for the 15 and younger, 15 to 24 , and 25 to 44 year old age groups; 10 females for every 11 males. However, for the 45 to 64 (11:10) and the 65 and older (6:5) age groups there were more females than males.

Among Blacks, the 25 to 44 year old population accounts for the greatest proportion ( $27.1 \%$ ). With respect to sex, the greatest proportion of Blacks were male; 10 females for every 13 males. For Blacks, the elderly had the greatest proportion of females; 3 females for every 2 males. On the contrary, among the 15 year old and younger (5:6), 15 to 24 (5:7), 25 to 44 (10:17), and 45 to 64 (5:6) year old populations, there were more males than females.

Among Hispanics/Latinos, the 25 to 44 year old population accounts for the greatest proportion (31.9\%). With respect to sex, the greatest proportion were male; 10 females for every 13 males. Additionally, there were more males than females for 15 years and younger population (10:11), the 15 to 24 (2:3), 25 to 44 (5:8), and 45 to 64 (10:11) year old populations. However, for the elderly population there were 6 females for every 5 males.

Asians accounted for only $1.2 \%$ of Martin County's population in 2009 which included more females than males for the 15 years and younger population (4:1), 25 to 44 (3:2) and 65 and older population (3:1). However, for the 15 to $24(1: 2)$ and 45 to $64(10: 11)$ there were more males than females. The American Indian population accounted for less than one percent with an 11 to 1 female to male ratio.

Table 3. Population Totals for Martin County by Age, Race, and Sex, 2009

| Race/Sex | $<15$ | 15-24 | 25-44 | 45-64 | 65+ | Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| White Total | 15,885 | 11,412 | 22,370 | 36,927 | 35,272 | 121,866 |
| White Male | 8,171 | 5,929 | 11,512 | 17,764 | 16,114 | 59,490 |
| White Female | 7,714 | 5,483 | 10,858 | 19,163 | 19,158 | 62,376 |
| Black Total | 1,932 | 1,653 | 2,202 | 1,644 | 690 | 8,121 |
| Black Male | 1,053 | 958 | 1,396 | 894 | 277 | 4,578 |
| Black Female | 879 | 695 | 806 | 750 | 413 | 3,543 |
| Asian Total | 338 | 137 | 574 | 439 | 134 | 1,622 |
| Asian Male | 72 | 97 | 226 | 227 | 38 | 660 |
| Asian Female | 266 | 40 | 348 | 212 | 96 | 962 |
| American Indian Total | 67 | 83 | 122 | 93 | 10 | 375 |
| American Indian Male | 0 | 0 | 0 | 21 | 10 | 31 |
| American Indian Female | 67 | 83 | 122 | 72 | 0 | 344 |
| Native Hawaiian Total | 0 | 0 | 40 | 10 | 0 | 50 |
| Native Hawaiian Male | 0 | 0 | 40 | 0 | 0 | 40 |
| Native Hawaiian Female | 0 | 0 | 0 | 10 | 0 | 10 |
| Two or More races Total | 639 | 383 | 433 | 396 | 183 | 2,034 |
| Two or More races Male | 280 | 319 | 292 | 183 | 73 | 1,147 |
| Two or More races Female | 359 | 64 | 141 | 213 | 110 | 887 |
| Other Total | 1,418 | 1,094 | 1,629 | 432 | 150 | 4,723 |
| Other Male | 698 | 781 | 1,173 | 223 | 76 | 2,951 |
| Other Female | 720 | 313 | 456 | 209 | 74 | 1,772 |
| Hispanic/Latino (all races) Total | 4,159 | 2,475 | 4,450 | 2,116 | 769 | 13,969 |
| Hispanic /Latino (all races) Male | 2,138 | 1,501 | 2,767 | 1,126 | 342 | 7,874 |
| Hispanic/Latino (all races) Female | 2,021 | 974 | 1,683 | 990 | 427 | 6,095 |
| All Males | 10,274 | 8,084 | 14,639 | 19,312 | 16,588 | 68,897 |
| All Females | 10,005 | 6,678 | 12,731 | 20,629 | 19,851 | 69,894 |
| Martin County Total | 20,279 | 14,762 | 27,370 | 39,941 | 36,439 | 138,791 |

Source: U.S. Census Bureau, American Community Survey, 2009

Table 4. Percent of the Total Population in Martin County by Age, Race, and Sex, 2009

| Race/Sex | <15 | 15-24 | 25-44 | 45-64 | 65+ | Total |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| White Total | 11.5\% | 8.2\% | 16.1\% | 26.6\% | 25.4\% | 87.8\% |
| White Male | 5.9\% | 4.3\% | 8.3\% | 12.8\% | 11.6\% | 42.9\% |
| White Female | 5.6\% | 4.0\% | 7.8\% | 13.8\% | 13.8\% | 44.9\% |
| Black Total | 1.4\% | 1.2\% | 1.6\% | 1.2\% | 0.5\% | 5.9\% |
| Black Male | 0.8\% | 0.7\% | 1.0\% | 0.6\% | 0.2\% | 3.3\% |
| Black Female | 0.6\% | 0.5\% | 0.6\% | 0.5\% | 0.3\% | 2.6\% |
| Asian Total | 0.2\% | 0.1\% | 0.4\% | 0.3\% | 0.1\% | 1.2\% |
| Asian Male | 0.1\% | 0.1\% | 0.2\% | 0.2\% | 0.0\% | 0.5\% |
| Asian Female | 0.2\% | 0.0\% | 0.3\% | 0.2\% | 0.1\% | 0.7\% |
| American Indian Total | 0.1\% | 0.1\% | 0.1\% | 0.1\% | 0.0\% | 0.3\% |
| American Indian Male | 0.0\% | 0.0\% | 0.0\% | 0.0\% | 0.0\% | 0.0\% |
| American Indian Female | 0.1\% | 0.1\% | 0.1\% | 0.1\% | 0.0\% | 0.3\% |
| Native Hawaiian Total | 0.0\% | 0.0\% | 0.0\% | 0.0\% | 0.0\% | 0.0\% |
| Native Hawaiian Male | 0.0\% | 0.0\% | 0.0\% | 0.0\% | 0.0\% | 0.0\% |
| Native Hawaiian Female | 0.0\% | 0.0\% | 0.0\% | 0.0\% | 0.0\% | 0.0\% |
| Two or More races Total | 0.5\% | 0.3\% | 0.3\% | 0.3\% | 0.1\% | 1.5\% |
| Two or More races Male | 0.2\% | 0.2\% | 0.2\% | 0.1\% | 0.1\% | 0.8\% |
| Two or More races Female | 0.3\% | 0.1\% | 0.1\% | 0.2\% | 0.1\% | 0.6\% |
| Other Total | 1.0\% | 0.8\% | 1.2\% | 0.3\% | 0.1\% | 3.4\% |
| Other Male | 0.5\% | 0.6\% | 0.9\% | 0.2\% | 0.1\% | 2.1\% |
| Other Female | 0.5\% | 0.2\% | 0.3\% | 0.2\% | 0.1\% | 1.3\% |
| Hispanic/Latino (all races) Total | 3.0\% | 1.8\% | 3.2\% | 1.5\% | 0.6\% | 10.1\% |
| Hispanic /Latino (all races) Male | 1.5\% | 1.1\% | 2.0\% | 0.8\% | 0.3\% | 5.7\% |
| Hispanic/Latino (all races) Female | 1.5\% | 0.7\% | 1.2\% | 0.7\% | 0.3\% | 4.4\% |
| All Males | 7.4\% | 5.8\% | 10.6\% | 13.9\% | 12.0\% | 49.6\% |
| All Females | 7.2\% | 4.8\% | 9.2\% | 14.9\% | 14.3\% | 50.4\% |
| Martin County Total | 14.6\% | 10.6\% | 19.7\% | 28.8\% | 26.3\% | 100.0\% |

Source: U.S. Census Bureau, American Community Survey, 2009

Between 2000 and 2009, there was an increase in the proportion of people living in Golden Gate $(+15 \%)$, Jensen Beach ( $+15 \%$ ), Palm City ( $+13 \%$ ), and Stuart ( $+8 \%$ ). Decreases in population were found for Indiantown ( $-7 \%$ ), Jupiter Island ( $-23 \%$ ), and Rio ( $-49 \%$ ). Since 2000, the birth to 14 year old population has grown for Jupiter Island (11\%) and Port Salerno (8\%). Jupiter Island also demonstrated an increase in the 15 to 24 year old population, with a $5 \%$ increase since 2000. The 25 to 44 year old population decreased for Port Salerno ( $-6 \%$ ), Rio ( $-12 \%$ ), and Sewall's Point ( $-7 \%$ ) from 2000 to 2009. An increase in the 45 to 64 year old population was evident for Indiantown $(+6 \%)$, North River Shore ( $+6 \%$ ), Ocean Beach Park ( $+10 \%$ ), Port Salerno ( $+5 \%$ ), and Sewall's Point ( $+8 \%$ ) from 2000 to 2009. Rio ( $+14 \%$ ) saw an increase in the 65 and older population from 2000 to 2009. However, Jupiter Island ( $-27 \%$ ), Ocean Beach Park ( $-6 \%$ ), and Stuart ( $-6 \%$ ) saw a decrease during the same period. The median age significantly increased for Rio from 47.6 in 2000 to 59.9 in 2009.

Table 5. Martin County Residents' Age Distribution by Area, 2009

|  | Golden <br> Gate | Hobe <br> Sound | Indiantown | Jensen <br> Beach | Jupiter <br> Island | North <br> River <br> Shores |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: |
| Estimated Population | 24,195 | 11,441 | 5,178 | 12,777 | 478 | 3,183 |
| 0-14 years | $24.5 \%$ | $11.4 \%$ | $29.6 \%$ | $13.3 \%$ | $17.6 \%$ | $11.1 \%$ |
| $15-24$ years | $16.8 \%$ | $10.1 \%$ | $13.1 \%$ | $11.6 \%$ | $12.1 \%$ | $6.9 \%$ |
| 25-44 years | $33.5 \%$ | $16.3 \%$ | $21.6 \%$ | $20.8 \%$ | $25.9 \%$ | $19.5 \%$ |
| $45-64$ years | $18.6 \%$ | $30.6 \%$ | $21.6 \%$ | $28.6 \%$ | $26.5 \%$ | $31.1 \%$ |
| 65 and older | $6.6 \%$ | $31.7 \%$ | $14.1 \%$ | $25.6 \%$ | $18.0 \%$ | $31.4 \%$ |
| Median Age | 28.9 | 52.0 | 30.9 | 48.0 | 63.5 | 51.4 |

Source: U.S. Census Bureau, American Community Survey, 2009
Table 6. Martin County Residents' Age Distribution by Area, 2000

|  | Golden <br> Gate | Hobe <br> Sound | Indiantown | Jensen <br> Beach | Jupiter <br> Island | North <br> River <br> Shores |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: |
| Estimated Population | 20,951 | 11,376 | 5,588 | 11,100 | 620 | 3,101 |
| $0-14$ years | $25.0 \%$ | $14.0 \%$ | $26.8 \%$ | $16.4 \%$ | $6.6 \%$ | $14.8 \%$ |
| $15-24$ years | $16.4 \%$ | $7.6 \%$ | $15.8 \%$ | $9.0 \%$ | $6.3 \%$ | $7.6 \%$ |
| $25-44$ years | $36.0 \%$ | $20.5 \%$ | $25.6 \%$ | $25.4 \%$ | $12.6 \%$ | $21.8 \%$ |
| $45-64$ years | $16.1 \%$ | $24.9 \%$ | $15.7 \%$ | $25.3 \%$ | $29.8 \%$ | $25.3 \%$ |
| 65 and older | $6.2 \%$ | $33.0 \%$ | $16.2 \%$ | $23.8 \%$ | $44.7 \%$ | $30.5 \%$ |
| Median Age | 29.6 | 51.2 | 29.7 | 44.5 | 61.8 | 49.2 |

Source: U.S. Census Bureau, American Community Survey, 2009

Table 7. Martin County Residents' Age Distribution by Area, 2009

|  | Ocean <br> Breeze <br> Park | Palm <br> City | Port <br> Salerno | Rio | Sewell's <br> Point | Stuart |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: |
| Estimated Population | 443 | 22,623 | 9,862 | 521 | 1,868 | 15,832 |
| 0-14 years | $0.0 \%$ | $18.7 \%$ | $15.2 \%$ | $8.4 \%$ | $20.8 \%$ | $15.1 \%$ |
| $15-24$ years | $0.0 \%$ | $10.3 \%$ | $12.1 \%$ | $7.9 \%$ | $5.3 \%$ | $11.5 \%$ |
| $25-44$ years | $2.0 \%$ | $19.3 \%$ | $19.2 \%$ | $10.6 \%$ | $12.7 \%$ | $21.3 \%$ |
| $45-64$ years | $37.0 \%$ | $27.7 \%$ | $29.6 \%$ | $35.8 \%$ | $41.1 \%$ | $25.4 \%$ |
| 65 and older | $61.0 \%$ | $24.1 \%$ | $23.9 \%$ | $37.2 \%$ | $20.1 \%$ | $26.6 \%$ |
| Median Age | 69.3 | 45.8 | 47.2 | 59.9 | 50.6 | 46.5 |

Source: U.S. Census Bureau, American Community Survey, 2009
Table 8. Martin County Residents' Age Distribution by Area, 2000

|  | Ocean <br> Breeze <br> Park | Palm <br> City | Port <br> Salerno | Rio | Sewell's <br> Point | Stuart |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: |
| Estimated Population | 463 | 20,097 | 10,141 | 1,028 | 1,946 | 14,633 |
| 0-14 years | $0.2 \%$ | $17.3 \%$ | $6.8 \%$ | $13.2 \%$ | $20.5 \%$ | $11.7 \%$ |
| $15-24$ years | $0.4 \%$ | $7.1 \%$ | $9.2 \%$ | $8.9 \%$ | $7.0 \%$ | $9.7 \%$ |
| $25-44$ years | $5.4 \%$ | $22.5 \%$ | $24.7 \%$ | $22.6 \%$ | $19.9 \%$ | $24.5 \%$ |
| $45-64$ years | $27.4 \%$ | $25.8 \%$ | $24.6 \%$ | $32.3 \%$ | $33.0 \%$ | $21.2 \%$ |
| 65 and older | $66.5 \%$ | $27.4 \%$ | $24.7 \%$ | $23.0 \%$ | $19.7 \%$ | $32.9 \%$ |
| Median Age | 69.6 | 47.2 | 44.4 | 47.6 | 46.7 | 48.5 |

Source: U.S. Census Bureau, American Community Survey, 2009

## Race and Ethnicity

The 2009 U.S. Census Bureau's population estimates indicate that Whites accounted for $88 \%$ of Martin County's population followed by Blacks ( $6 \%$ ), Asians ( $1 \%$ ), American Indian ( $0.3 \%$ ), and Native Hawaiian ( $0.04 \%$ ). The Hispanic/Latino population accounted for $10 \%$ of Martin County's population (see Figure 3).

Figure 3. Estimated Population by Race, 2009


Source: U.S. Census Bureau, 2009
U.S. Census data indicate that Martin County's Hispanic/Latino population grew from $7.5 \%$ of the total population in 2000 to $10.1 \%$ in 2009. However, this increase in the Hispanic/Latino population in Martin County ( $+2.6 \%$ ) was less than that of Florida ( $+3.8 \%$ ) and equal to that of the U.S. There were also increases in the proportion of Whites in Martin County ( $+2 \%$ ) from 2000 to 2009. The proportion of Blacks, Asians, American Indians, and Native Hawaiians in Martin County remained relatively the same from 2000 to 2009 (less than $1 \%$ increase).

## Grandparents in Martin County

Based on U.S. Census Bureau's American Survey Data, in 2009, there were 1,605 grandparents in Martin County living with their own grandchildren younger than the age of 18 . Less than $1 \%$ of this population was responsible for the caretaking of their grandchildren. Forty-four percent were between the ages of 30 and 59 and $56 \%$ were 60 years old or older. Sixty-one percent of these grandparents were female and $84 \%$ were married. Seventy-six percent were White, $16 \%$ were Black, and $8 \%$ were some other race.

## Household Composition

U.S. Census Bureau's American Survey Data indicate that the average household size for Martin County residents was 2.9 persons in 2009. Martin County has a total of 58,054 households. Family households accounted for $64 \%$ of Martin County's households. Eighty-one percent of all Martin County family households were married couple families, $13 \%$ had a single female head of household, and $6 \%$ had a single male head of household. Households with one or more people 60 years old and older accounted for $51 \%$ of total households. Twenty-two percent of the total households in Martin County included at least one child under the age of eighteen.

## Residence Patterns

Between 2005 and 2009, 6.5\% of the population moved within Martin County, $4.2 \%$ moved into Martin County from a different county in Florida, 3.4\% moved into Martin County from a different state, and $0.6 \%$ moved into Martin County from abroad.

## Mobility by Race/Ethnicity

In terms of race/ethnicity, there appear to be higher levels of mobility within Martin County for Black residents. Between 2005 and 2009, 18\% of Blacks moved within Martin County, as compared to $6 \%$ of Whites, $10 \%$ of Hispanics, $7 \%$ of Asians, and $6 \%$ of American Indian and Alaska Natives. Moreover, during this time, $4 \%$ of Whites, $10 \%$ of African American, $4 \%$ of Hispanics and Asians, and $6 \%$ of American Indian and Alaska Natives residents moved into Martin County from a different county.

## Socioeconomic Profile

## Income

In 2008, Martin County's per capita income was $\$ 60,140,37 \%$ more than Florida's per capita income of $\$ 37,780$. Martin County's per capita income ranks $29^{\text {th }}$ in the country. The median household income of $\$ 52,734$ for Martin County in 2008 was ranked $10^{\text {th }}$ in the state; slightly higher than the state's median household income of $\$ 44,857$. The average weekly wage for Martin County was $\$ 741$, compared to $\$ 766$ for Florida.

Table 9. Per Capita Income, Weekly Wage, and Median Household Income, 2008/2009

|  | Per Capita <br> Income | Avg. <br> Weekly <br> Salary | Median <br> Household <br> Income |
| :--- | :---: | :---: | :---: |
| Martin County | $\$ 60,140$ | $\$ 741$ | $\$ 52,734$ |
| Florida | $\$ 39,064$ | $\$ 766$ | $\$ 47,802$ |

Source: FL Labor Market Statistics, Quarterly Census of Employment and Wages Program, 2010

The 2009 U.S. Census data indicate that the largest percentage of household incomes ( $17 \%$ ) for Martin County fell between $\$ 50,000$ and $\$ 74,999$. Sixty-six percent of Martin County households received earnings and wages, $44 \%$ received Social Security, and $27 \%$ received retirement income. The median income in 2009 differed by race/ethnicity in Martin County. The median income for Blacks $(\$ 28,514)$ was nearly half that of Whites $(\$ 54,514)$ and $25 \%$ less than Hispanics/Latinos $(\$ 38,203)$.

Figure 4. Household Income Levels, 2009


Source: U.S. Census Bureau, 2009

## Employment

Research demonstrates that socioeconomic status in general, and income, in particular, serve as predictors of health status. ${ }^{3}$ Research also demonstrates that while loss of income has an impact on health status, persistent poverty is the strongest predictor of health status in low-income individuals. ${ }^{4}$ In 2009, Martin County total labor force was estimated at 62,977 , of which $11 \%$ were unemployed. Martin County's annual average unemployment rate increased by $127 \%$ from 4.9 in 2004 to 11.1 in 2009. Similarly, Florida experienced an increase of $123 \%$ in its annual average unemployment rate (i.e., 4.7 in 2004 to 10.5 in 2009). Recent unemployment data indicate that Martin County's

[^1]unemployment rate (12,5) is similar to that of Florida (12.1). ${ }^{5}$ Current 2009 data indicate that Martin County's unemployment rate places them at $27^{\text {th }}$ in the state.

Figure 5. Martin County Unemployment Rates, 2005-2009


Source: Labor Market Statistics, Local Area Unemployment Statistics Program
According to the U.S. Census Bureau's American Community Survey, $8 \%$ of Martin County's residents over 16 years of age reported that they were currently unemployed. Amongst those that reported that they were unemployed, $8 \%$ were White, $16 \%$ were Blacks, and $5 \%$ were Hispanics/Latino.

[^2]
## Poverty

Table 10. Estimates of Persons and Youth in Poverty, 2000 \& 2009

| Population | Martin County |  | Florida |  |
| :--- | ---: | ---: | ---: | ---: |
|  | $\mathbf{2 0 0 0}$ | $\mathbf{2 0 0 9}$ | $\mathbf{2 0 0 0}$ | $\mathbf{2 0 0 9}$ |
| Individuals living in Poverty | $8.8 \%$ | $10.6 \%$ | $9.0 \%$ | $13.2 \%$ |
| Youth under 18 yrs living in Poverty | $13.8 \%$ | $19.1 \%$ | $17.2 \%$ | $18.3 \%$ |

Source: U.S. Census Bureau, 2000, 2009
In Martin County, the number of individuals living in poverty increased by $1.8 \%$ from 2000 to 2009, less than Florida's increase of $4.2 \%$ during the same period. However, Martin County ( $+5.3 \%$ ) experienced a greater increase than Florida ( $+1.1 \%$ ) in youth under 18 years old living in poverty from 2000 to 2009. Although Martin County has a high percentage of youth under 18 years old living in poverty, District School Board of Martin County data for the 2008/2009 school year indicate that $33 \%$ of Martin County students were eligible for free and reduced lunch, as compared to $49.6 \%$ for Florida. In the 2009/2010 school year, the District School Board of Martin County served an average of 4,930 meals daily, a $9 \%$ increase from the previous year.

The 2009 U.S. Census Bureau's American Community Survey data indicate that 11\% of Martin County's total population was living below the 2009 federal poverty guidelines, compared to $15 \%$ for Florida. Included in the Martin County population living below the poverty level is $19 \%$ of individuals under 18 years of age, $10 \%$ between 10 to 64 years, and $6 \% 65$ years old and older. In terms of race/ethnicity, $9 \%$ were White, $30 \%$ were Black, $19 \%$ were American Indian and Alaska Native, $6 \%$ were Asian, and $7 \%$ were Hispanic/Latino. Of the 56,780 households in Martin County, $10 \%$ were receiving food stamps in 2009. Forty-nine percent of these households had one or more people with a disability.

## Education

The 2009 U.S. Census data indicate that in Martin County, $12 \%$ of adults have less than a high school diploma, $29 \%$ earned a high school degree, $24 \%$ have some college education or an Associate's degree, and $28 \%$ earned a Bachelor's degree or higher. Taken together, a little over half of the adult population in Martin County has some college education. Males (28\%) in the 18 to 24 year old population were significantly more likely to have less than a high school diploma than females ( $13 \%$ ) in the same age population. When examining educational attainment among the 25 years and older population, Indiantown had much lower percentage of high school graduates (57\%) as compared to other areas in Martin County Jupiter Island (98\%), Jensen Beach (91\%), Hobe Sound ( $88 \%$ ), Stuart ( $85 \%$ )]. ${ }^{6}$

Figure 6. Martin County Educational Attainment


Note: Estimates are percentages.
Source: U.S. Census Bureau, 2009

[^3]During the 2009/2010 school year, approximately 17,600 students attended Martin County Public Schools. Florida Department of Education graduation data indicate that $90 \%$ of Martin County high school students graduated in the 2009/2010 school year, compared to $81 \%$ statewide. The drop-out rate for the 2009/2010 school year for Martin County high school students was $0.6 \%$. From school years 2007/2008 to 2009/2010 the Martin County drop-out rates have remained relatively low (below 1\%).

Table 11. High School Graduation and Drop-Out Rates, 2007/2008, 2008/2009, 2009/2010

|  | $2007 / 2008$ <br> Graduation <br> Rates | Drop-Out <br> Rates | 2008/2009 School Year <br> Graduation <br> Rates | Drop- <br> Out <br> Rates | 2009/2010 School Year <br> Graduation <br> Rates | Drop-Out <br> Rates |
| :--- | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Martin County | $89.6 \%$ | $0.5 \%$ | $93.9 \%$ | $0.7 \%$ | $90.4 \%$ | $0.6 \%$ |
| Florida | $72.8 \%$ | $2.6 \%$ | $78.6 \%$ | $2.3 \%$ | $80.7 \%$ | $2.0 \%$ |

Source: Florida Department of Education

## COUNTY HEALTH RANKINGS

In 2003, the Robert Wood Johnson Foundation and the University of Wisconsin Population Institute began a collaborative venture called the Mobilizing Action Toward Community Health (MATCH) project. One element of this project is the County Health Rankings. ${ }^{7}$ Using data from myriad governmental agencies (e.g., Center for Disease Control and Prevention, Federal Bureau of Investigation, National Center for Education Statistics), County Health Rankings provides standings for counties in each of the 50 states. Each year, every county is given a global health rank comprised of rankings for mortality, morbidity, and four health domains: health behaviors, clinical care, social and economic factors, and physical environment (see figure below).

Figure 7. County Health Rankings Model


The goal of the County Health Rankings is to provide data that compels and mobilizes local and state officials to address any barriers to quality healthcare access for all residents. Overall, Martin County was ranked fifth in Florida. Table 12 shows the 2010 rankings (out of Florida's 67 counties) for each of the health domains for Martin County.

[^4]Table 12. Martin County Health Rankings, 2010

| Health Outcomes Ranked $5^{\text {th }}$ |  | Health Factors Ranked $4^{\text {th }}$ |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Mortality | Morbidity | Health Behaviors | Clinical Care | Social and Economic Factors | Physical Environment |
| Premature Death | Poor or Fair Health | Adult Smoking | Uninsured Adults | High School Graduation | Air Pollutionparticulate matter days |
|  | Poor Physical Health Days | Adult Obesity | Primary Care Providers Rate | College Degrees | Air Pollutionozone days |
|  | Poor Mental Health Days | Binge Drinking | Preventable Hospital Stays | Unemployment | Access to Healthy Foods |
|  | Low Birth Weight | Motor Vehicle Crash Death Rate | Diabetic Screening | Children in Poverty | Liquor Store Density |
|  |  | Chlamydia Rate | Hospice Use | Income Inequality |  |
|  |  | Teen Birth Rate |  | Inadequate |  |
|  |  |  |  | Social Supports |  |
|  |  |  |  | Single Parent Households |  |
|  |  |  |  | Violent Crime Rate |  |
| Ranked 18 ${ }^{\text {th }}$ | Ranked 1 ${ }^{\text {st }}$ | Ranked $7^{\text {th }}$ | Ranked $4^{\text {th }}$ | Ranked 16 ${ }^{\text {lih }}$ | Ranked 4 ${ }^{\text {th }}$ |

## COUNTY HEALTH PROFILE

## Leading Causes of Death

This section details the leading causes of death for Martin County. The top five leading causes for Martin County are as follows: (1) Cancer, (2) Heart Disease, (3) Unintentional Injuries, (4) Chronic Lower Respiratory Disease, and (5) Stroke. This order is comparable to that for Florida with one exception: Chronic Lower Respiratory Disease is ranked third and Unintentional Injuries is ranked fourth.

Much of the data in this section compares Martin County's mortality rates to those for the state of Florida across different races. All data presented in this section-- unless otherwise noted-- were captured using the Community Health Assessment Resource Tool Set (CHARTS), an interactive database managed by the Office of Health Statistics and Assessment at the Florida Department of Health. ${ }^{8}$ CHARTS affords queries on various health indicators using many data filters (e.g., sex, race, and year).

Unless otherwise noted, all of the mortality rates in this section are 3-year age-adjusted deaths per 100,000 people. Age-adjusted mortality rates provide rates of death while controlling for changes in the age distribution over time. Age-adjustment also affords comparison of death rates among communities with different age distributions.

Table 13. Top Ten Leading Causes of Death Based on Total Number of Deaths, 2009

| Cause of Death | Total Number of <br> Deaths | Age-Adjusted <br> Mortality Rate |
| :--- | :---: | :---: |
| Cancer | 422 | 140.5 |
| Heart Disease | 385 | 113.7 |
| Chronic Lower Respiratory Disease | 114 | 33.4 |
| Stroke | 82 | 23.6 |
| Unintentional Injuries | 79 | 47.8 |
| Alzheimer's Disease | 40 | 9.6 |
| Suicide | 35 | 21.3 |
| Parkinson's Disease | 27 | 7.5 |
| Diabetes | 24 | 7.3 |
| Chronic Liver Disease and Cirrhosis | 19 | 8.1 |
| Septicemia | 19 | 6.4 |

[^5]
## Cancer

Cancer is the second leading cause of death in the United States accounting for approximately one out of four deaths each year. ${ }^{9}$ While the 5 -year relative survival rate for cancer has improved over the years, the mortality rate associated with the disease remains fairly high. Figure 8 shows that Martin County has a lower cancer mortality rate than Florida. With respect to race, the mortality rate is lower for Whites in Martin County than the rate for Whites in Florida overall. However, the mortality rate for Non-Whites in Martin County is virtually the same as the mortality rate for NonWhites in Florida.

Figure 8. Age-adjusted Rates for Cancer by Race, 2007-2009


Cancer cells can develop in various parts of the body leading to different types of cancer. The table below displays some of the most recent data for Martin County on some of the various forms of cancer.

Table 14. Different Forms of Cancer, 2007-2009

| Form of Cancer | Average Number <br> of Deaths | 3-year age- <br> adjusted rate <br> (Martin County) | 3-year age- <br> adjusted rate <br> (Florida) |
| :--- | :---: | :---: | :---: |
| Lung | 127 | 42.7 | 46.9 |
| Colorectal | 38 | 13.0 | 14.7 |
| Breast | 26 | 18.8 | 20.4 |
| Prostate | 26 | 17.3 | 18.3 |
| Cervical | 2 | 2.1 | 2.5 |
| Skin | 10 | 3.8 | 2.9 |

[^6]
## Heart Disease

Heart disease is the number one cause of death for Americans and has been for the last 80 years. ${ }^{10}$ Heart disease includes congenital heart defects, coronary artery disease, high blood pressure, heart failure, and stroke. ${ }^{11}$ In 2006, heart disease accounted for approximately one out of every 2.9 deaths nationwide. Data on the mortality rate for heart disease in 2005 showed that about 2,400 Americans died daily-an estimated one death for every 37 seconds. While these numbers support the reality of heart disease being the number one killer, national data suggest that the mortality rate for heart disease has been on a steady decline. ${ }^{12}$ Both Florida and Martin County have also seen a steady decline in the heart disease mortality rate in the last decade. ${ }^{13}$ Figure 9 shows that in Florida, NonWhites have a higher heart disease mortality rate than Whites. On the contrary, in the Martin County, Whites have a higher heart disease mortality rate than Non-Whites.

Figure 9. Age-adjusted Rates for Heart Disease by Race, 2007-2009


[^7]
## Chronic Lower Respiratory Disease

Chronic lower respiratory disease includes chronic bronchitis, asthma, emphysema, and other chronic lower respiratory diseases. ${ }^{14}$ Overall, Martin County has a slightly lower mortality rate for chronic lower respiratory disease than Florida (see Figure 10). However, for Non-Whites, Martin County fares much worse than Florida.

Figure 10. Age-adjusted Rates for Chronic Lower Respiratory Disease by Race, 2007-2009


[^8]
## Stroke

Stroke is a disease marked by blockage or bursts in arteries that are either located in or lead to the brain. Nationally, stroke is ranked third for leading cause of death and ranked first as cause of longterm disability. ${ }^{15}$ Overall, the mortality rate for stroke in the U.S. has declined due largely in part to the founding of the American Stroke Association in 1997 which has firmly advocated for and obtained increased funding for clinical research and hospitals specializing in treatment of stroke. ${ }^{16}$ In Martin County, the mortality rate for stroke is fairly comparable to Florida's rate with the exception of the mortality among Non-Whites (see Figure 11); Florida has a higher mortality rate than Martin County.

Figure 11. Age-adjusted Rates for Stroke by Race, 2007-2009


[^9]
## Unintentional Injuries

The mortality rate for unintentional injuries comprises all accidents that result in death, including but not limited to falls, poisoning, burns, firearm discharges, and drowning. Unintentional injuries accounted for 123,706 deaths nationwide in $2007 .{ }^{17}$ While Florida has had a relatively stable mortality rate for unintentional injuries in the last five years, Martin County's mortality rate increased by almost 10 points in 2006 and increased steadily until 2008, nearly reaching 60 per 100,000. As shown in Figure 12, Martin County's mortality rate for unintentional injuries is higher than Florida's for all races.

Figure 12. Age-adjusted Rates for Unintentional Injuries by Race, 2007-2009


[^10]
## Motor Vehicle Crashes

Motor vehicle crashes remain one of the leading causes of death. For teenagers, motor vehicle crashes are the number one cause of death. ${ }^{18}$ In 2007, a little over 43,000 people were killed in motor vehicle crashes. ${ }^{19}$ As shown in the figure below, Martin County has a slightly higher motor vehicle crashes mortality rate than Florida.

Figure 13. Age-adjusted Rates for Motor Vehicle Crashes by Race, 2007-2009


[^11]
## Alzheimer's Disease

Alzheimer's disease is a progressive incurable disease characterized by memory loss and impaired intellectual functioning. Slowly, the symptoms of Alzheimer's disease manifest, resulting in adults' inability to complete basic tasks and activities. ${ }^{20}$ In 2007, Alzheimer's disease was the sixth leading cause of death accounting for almost 75,000 deaths. ${ }^{21}$ Currently, the National Institute on Aging estimates that approximately 5.1 million Americans have Alzheimer's. Martin County has a slightly lower age-adjusted mortality rate than Florida (see Figure 14).

Figure 14. Age-adjusted Rates for Alzheimer's by Race, 2007-2009


[^12]
## Suicide

Suicide is death by self-inflicted injury and is the third leading cause of death for Americans between the ages of 15 and 24 . In 2007, an estimated 34,598 people died from suicide in the United States. ${ }^{22}$ It has been estimated that for every death from suicide there are 11 suicide attempts. While an increase in suicide was witnessed at the state level, Martin County experienced a more dramatic increase. The number of suicides increased in 2007 (mortality rate of 16.1) and remained virtually flat in 2008 . However, in 2009 , the mortality rate increased to 21.3 accounting for 35 deaths. As shown in Figure 15, Martin County has a higher mortality rate than Florida across all races. Moreover, the mortality rate for Whites is double that of Non-Whites.

Figure 15. Age-adjusted Rates for Suicide by Race, 2007-2009


[^13] Injury Statistics Query and Reporting System (WISQARS) [Online]. Retrieved from www.cdc.gov/injury/wisqars

## Parkinson's Disease

Parkinson's disease is an incurable, progressive motor system disorder caused by the decay of dopamine-producing brain cells. ${ }^{23}$ More than 1.5 million Americans have been reported to be affected by Parkinson's disease. ${ }^{24}$ Preliminary research conducted by CDC shows that in 2008, Parkinson's disease was the $14^{\text {th }}$ leading cause of death in the U.S. ${ }^{25}$ During that same year, Parkinson's disease was linked to a little over 20,500 deaths in the US for a single year age-adjusted mortality rate of 6.4 . The 3 -year age-adjusted mortality rate for Parkinson's is virtually the same across all races in Martin County.

Figure 16. Age-adjusted Rates for Parkinson's Disease by Race, 2007-2009


[^14]
## Diabetes

Diabetes is a chronic illness marked by resistance to insulin, insulin deficits, or both and causes high blood sugar levels. The number of people diagnosed with diabetes has increased steadily over the years. ${ }^{26}$ Nationally, the mortality rate for diabetes is 22.5 . Florida is ranked $15^{\text {th }}$ in the United States for number of deaths due to diabetes. As shown in Figure 17, Martin County has a lower mortality rate for diabetes than Florida overall. However, in Martin County, the mortality rate for Non-Whites is much higher than that for Whites.

Figure 17. Age-adjusted Rates for Diabetes by Race, 2007-2009


[^15]
## Cirrhosis

Cirrhosis is a liver disease marked by presence of scar tissue following injury or other diseases. Nationally, the mortality rate for cirrhosis and other chronic liver diseases has declined from 16.9 per 100,000 in 1979 to 11.9 per 100,000 in 2004. ${ }^{27}$ In 2005, Martin County experienced a sharp increase in the morality rate for cirrhosis and other chronic liver diseases; however, the mortality rate has since declined. ${ }^{28}$ Martin County's mortality rate for this disease is slightly lower than Florida's rate (see Figure 18).

Figure 18. Age-adjusted Rates for Cirrhosis by Race, 2007-2009


## Septicemia

Septicemia (sometimes referred to as "blood poisoning") is a disease marked by the presence of bacteria in the blood caused by infections in other parts of the body (e.g., urinary tract infection, intestinal infection) ${ }^{29}$ or by tick bites. ${ }^{30}$ According to researchers at the CDC, septicemia was the $10^{\text {th }}$ leading cause of death in the United States in 2008, ${ }^{31}$ accounting for nearly 36,000 deaths. The 3-year age-adjusted morality rate for septicemia for Martin County was higher in 2009 compared to the rate

[^16]in 2008 ( 6.4 vs. 4.3). However, Martin County has consistently had a lower 3-year age adjusted morality rate for septicemia than Florida for the past three years.

## Pneumonia and Influenza

Influenza (commonly referred to as the "flu") is a respiratory illness caused by a virus. In severe cases, influenza can lead to pneumonia, an inflammatory lung disease. The mortality rate for influenza and pneumonia has decreased from 22.8 in 1999 to 17.5 in 2007. ${ }^{32}$ Martin County has a lower mortality rate for influenza and pneumonia than Florida (see Figure 19). The mortality rate for Non-Whites is nearly double the rate for Whites.

Figure 19. Age-adjusted Rates for Pneumonia/Influenza by Race, 2007-2009


[^17]
## AIDS/HIV-Related Deaths

Human Immunodeficiency Virus (HIV) is an infection that leads to Acquired Immunodeficiency Syndrome (AIDS), a disease that leaves the immune system defenseless in fighting off other infections and diseases. The CDC estimates that about 1,000,000 Americans are currently infected with HIV and about $20 \%$ of them are not aware that they have the disease. ${ }^{33}$ African Americans are disproportionately impacted by HIV/AIDS, accounting for about half of all new HIV cases annually. ${ }^{34}$ The mortality rate for HIV has decreased over the years due to advancements in the treatment of the disease. In 2007, the mortality rate for HIV in the United States was 3.7; a little over 18,000 people died from AIDS in the United States that year. ${ }^{35}$ As shown in Figure 20, the mortality rate for Florida is higher than the national mortality rate, and substantially higher among Non-Whites.

Figure 20. Age-adjusted Rates for AIDS/HIV-related Deaths by Race, 2007-2009


[^18]
## Risk Factors

This section outlines the status of various factors that have been found to be predictive of or present risk for myriad health problems, including chronic diseases. The presence of any of these factors or a combination of these factors may negatively impact an individual's health status. Substantial health research has suggested that decreasing or eliminating risk factors exponentially improves overall health and in many cases extends life expectancy. ${ }^{36}$ Many of the risk factors covered in this section are health indicators being tracked as part of the national Healthy People 2010 initiative (see http://www.healthypeople.gov for more information) to improve quality of life and eliminate health disparities for Americans.

Unlike previous sections, many of the figures here reflect only sex differences. Due to small sample size for African Americans $(\mathrm{N}<30)$, percentages were not estimated for Martin County; thus, racial/ethnic differences were omitted from this section. All of the data presented on risk factors were obtained from the 2007 Florida Behavioral Risk Factor Surveillance System (BRFSS) State and County Data Report compiled by the Florida Department of Health unless otherwise noted.

## Diabetes

While diabetes is one of the leading causes of death in Florida, it is also a risk factor for many other physical complications and illnesses. As shown in the figure below, the percentage of Martin County residents with diabetes is similar to the overall percentage for Floridians.

Figure 21. Percentage of Adults with Diabetes by Sex, 2007


[^19]
## Hypertension

Hypertension or high blood pressure is a well-documented risk factor for heart disease, stroke, and many chronic illnesses. Furthermore, there is a host of risk factors for hypertension (e.g., smoking, obesity, poor nutrition). Figure 22 shows comparable percentages of hypertensive males and hypertensive females in Martin County. These percentages are lower than those for Florida.

Figure 22. Percentage of Adults with Hypertension by Sex, 2007


## Physical Activity and Nutrition

Physical activity and proper nutrition are essential to maintaining healthy weight and preventing disease. Physical inactivity and poor nutrition present significant risk for many chronic diseases such as heart disease, obesity, diabetes and cancer. According to BRFSS data, in 2007, only a quarter of Martin County residents consumed five or more servings of fruits and vegetables daily. However, in that same year, Martin County residents fared better than the state on indicators of physical activity. Adults who reported that they did not engage in any leisurely physical activity were considered to have sedentary lifestyles. As seen in Figure 23, the number of females with a sedentary lifestyle in Florida was much higher than that of Martin County.

Figure 23. Percentage of Adults with Sedentary Lifestyle by Sex, 2007


## Obesity

Obesity is risk factor that has gained a great deal of public attention in the last decade, and is one of the key initiatives for 2010 set forth by the U.S. Surgeon General. ${ }^{37}$ It has been estimated that the percentage of obese adults in the United States has more than doubled in the last twenty years from $13.4 \%$ in 1980 to $34.3 \%$ in $2008 .^{38}$ The percentage of obese children has followed a similar trend; it rose from $5 \%$ in 1980 to $17 \%$ in 2008 . $^{39}$ Figure 24 shows the percentages of normal, overweight and obese adults in Martin County for 2007. Normal weight is defined as having a body mass index (BMI) ranging from 18.5 to 24.9 . Overweight is defined as having BMI ranging from 25.0 to 29.9 and obese is defined as having BMI greater than or equal to 30.0.

Figure 24. Percentage of Obese, Overweight, and Normal Weight Adults by Sex, 2007


[^20]
## Poor Mental Health

Unlike the other risk factors discussed in this section, mental health is a mental state, not a physical indicator. Nonetheless, poor mental health can have severe physical consequences. Adults who reported that their mental health was not good (i.e., issues with stress, depression, or problems with emotions) on 14 or more days in the previous 30 days were considered to be experiencing poor mental health.

As shown in Figure 25, females tend to report poorer mental health than males. Despite sex differences, a lower percentage of Martin County residents experienced poor mental health as compared to the state percentage.

Figure 25. Percentage of Adults Experiencing Poor Mental Health by Sex, 2007


## Smoking

The American Cancer Society estimated that almost 170,000 cancer-related deaths are attributable to tobacco use. ${ }^{40}$ Not only is smoking a risk factor for cancer, but it is also linked to many other chronic and potentially fatal illnesses. ${ }^{41}$ For the purposes of interpreting the data shown in Figure 26, adults who reported having smoke more than 100 cigarettes in their life and currently smoke either every day or some days were considered smokers.

Figure 26. Percentage of Adult Smokers by Sex, 2007


[^21]
## Adolescent Substance Use and Mental Health

There exists national surveillance of youth problem behaviors and risk factors. Some of these youth behaviors include mental health status and substance use. Nationally, nearly three out of four $(72.5 \%)$ high school students have had at least one drink of alcohol in their lifetime. ${ }^{42}$ More females ( $74.2 \%$ ) than males ( $70.8 \%$ ) reported ever drinking to intoxication in their lifetime. A little more than $36 \%$ of high school students reported using marijuana in their lifetime followed by inhalants $(11.7 \%)$ and cocaine $(6.4 \%)$. The figures below show the percentage of substance use among Martin County adolescents. Substance use among adolescents appears to be on the decline in Martin County (see Figure 28).

Figure 27. Percentage of Lifetime Substance Use by Adolescents, 2010


Source: Florida Youth Substance Use Survey, 2010

[^22]Figure 28. Trends in Substance Use among Adolescents in Martin County, 2000-2010


Source: Florida Youth Substance Use Survey, 2010

In 2010, $11.2 \%$ of Martin County middle and high school students reported "doing something to injure themselves on purpose without wanting to die, such as cutting or burning themselves on purpose, one or more times during the past 12 months" compared to $13.4 \%$ in Florida. ${ }^{43}$ Additionally, 20.2\% of Martin County middle and high school students reported "feeling so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some of their usual activities during the past 12 months" compared to $22.4 \%$ in Florida.

[^23]
## Adult Asthma

Asthma is a chronic inflammatory lung disease characterized by constriction of the airways resulting in coughing, wheezing, chest tightness, and shortness of breath. Approximately 34 million Americans have been diagnosed with asthma ${ }^{44}$ and it is estimated that $6.6 . \%$ of adult Floridians have been diagnosed with asthma. ${ }^{45}$ Figure 29 shows that Martin County has a slightly lower percentage of asthmatic adults than Florida.

Figure 29. Percentage of Adults with Asthma by Sex, 2007


[^24]
## Sexually-Transmitted Infections

In 2008, both Florida and Martin County had increases in the number of reported cases of sexually transmitted infections (STI). There were some notable differences in the prevalence of STIs by race. Whites who comprise $83 \%$ of the population of Martin County ${ }^{46}$ accounted for $31.5 \%$ of reported STI cases. Blacks who comprise 5\% of the population of Martin County accounted for $40 \%$ reported STI cases. Hispanics who comprise $10 \%$ of the population of Martin County accounted for $29 \%$ reported STI cases.

From 2004-2008, Martin County experienced increases in the number of reported cases across most STIs, including increases for chlamydia ( $+42.5 \%$ ), gonorrhea ( $+14 \%$ ), and syphilis ( $+266.7 \%$ ). ${ }^{47}$ Florida experienced similar trends: chlamydia ( $+63.7 \%$ ), gonorrhea ( $+23.6 \%$ ), and syphilis $(+46.4 \%)$. While the largest increase in reported cases was for syphilis, chlamydia was the most prevalent STI reported. Chlamydia accounted for $72 \%$ of reported STI cases in Florida and $83 \%$ of the cases in Martin County. The number of reported cases of chlamydia for males increased by $97 \%$ and $29.8 \%$ for females.

Figure 30. Age-adjusted Rates for Sexually Transmitted Infections, 2006-2008


Source: Florida Department of Health, Bureau of Sexually Transmitted Diseases

[^25]
## Maternal and Child Health

Maternal and child health includes prenatal, perinatal, and postnatal health characteristics and behaviors. With respect to prenatal healthcare, in 2009, about $7.4 \%$ of mothers residing in Martin County received late or no prenatal care; this percentage decreased from 2008 ( $9 \%$ ). ${ }^{48}$ About $72.9 \%$ of all mothers in Martin County, compared to $78.3 \%$ in Florida, received prenatal care within their trimester of pregnancy. Of the 1,280 resident births in Martin County in 2009, approximately $57.5 \%$ were covered by Medicaid and $3.6 \%$ were to uninsured mothers. The percentage of uninsured mothers decreased slightly in 2009 ( $4.1 \%$ ), and the percentage of births covered by Medicaid increased in 2009 ( $51.9 \%$ ).

## Birth Rates

There has been a slight decrease in the number of resident births from 2007 to 2009 in Martin County. This trend is consistent with that for Florida. Figure 31 shows trends in birth rates for Martin County and Florida by race. Despite the overall decline in the birth rate, Non-Whites have had a consistently higher birth rate than Whites since 2007.

Figures 31. Overall Birth Rates by Race, 2007, 2008, \& 2009


Note: Rates shown reflect rates per 1000 live births.
Source: Florida Department of Health, Office of Health Statistics and Assessment, 2010

[^26]
## Teen Births

Teen births constitute births to mothers younger than 18 years old. Overall, the teen birth rates for both Martin and Florida have decreased (see Figure 32). As shown in Figure 33, among Non-Whites, Martin County fares worse than Florida for teen birth rate. While the teen birth rate has slightly decreased, the number of repeat births to teen mothers has increased. State data shows that the percentage of repeat births to mothers 15-19 is a little over $18 \%{ }^{49}$

Figure 32. Teen Birth Rates for All Races, 2007, 2008, \& 2009


Source: Florida Department of Health, Bureau of Vital Statistics, 2010
Figure 33. Teen Birth Rates by Race, 2009


Source: Florida Department of Health, Bureau of Vital Statistics, 2010

[^27]Martin County Health Assessment

## Low Birth Weight

Babies born less than five and a half pounds, or 2500 grams, in weight are deemed "low birthweight" births. The 3-year rolling rate for low birth weight births in Martin County is virtually the same across races (see Figure 34). When examining the rate of low birth weight births across the years, Martin County experienced an increase in the rate from 2008 to 2009.

Figure 34. Low Birth Weight Rates by Race, 2007-2009


Note: Rates shown reflect rates per 1000 live births.
Source: Florida Department of Health, Office of Health Statistics and Assessment, 2010
Figure 35. Low Birth Weight Rates for All Races, 2007, 2008, \& 2009


Note: Rates shown reflect rates per 1000 live births.
Source: Florida Department of Health, Office of Health Statistics and Assessment, 2010

## Infant Mortality

Infant mortality is defined as the death of an infant from birth to 364 days. Figure 36 shows that the infant mortality rate for Non-Whites was higher than the rate for Whites. Though the infant mortality rate for Martin County increased from 2008 to 2009, it remains substantially lower than the rate in 2007.

Figure 36. Infant Mortality Rates by Race, 2007-2009


Note: Rates shown reflect rates per 1000 live births.
Source: Florida Department of Health, Office of Health Statistics and Assessment, 2010
Figure 37. Infant Mortality Rates for All Races, 2007, 2008, \& 2009


Note: Rates shown reflect rates per 1000 live births.
Source: Florida Department of Health, Office of Health Statistics and Assessment, 2010

# HEALTHCARE ACCESS AND UTILIZATION 

## Health Insurance Coverage

There exist myriad health insurance coverage options for Americans. These options include employer-provided plans, independently-purchased plans, health savings accounts, and governmentfunded plans for both civilians (e.g., Medicaid and Medicare) and military personnel (TRICARE and VA benefits). Having access to health insurance is a protective factor. While lacking health insurance presents significant risk. For example, according to a study conducted at Harvard Medical School, an estimated 45,000 American adults die annually from lack of health insurance coverage. ${ }^{50}$ This estimate translates to one death per every 12 minutes. FL BRFSS data for 2007 showed that about $18 \%$ of Martin County residents did not have health insurance and $11.2 \%$ of them did not visit a doctor within the past year due to cost.

According to the Centers for Disease Control and Prevention, the number of uninsured American adults (ages 0-64 years) increased from 2008 to 2009 by 2.9 million, bringing the total number of uninsured adults to approximately 46.3 million. According to data culled by the Florida Hospital Association, approximately 3.7 million Floridians were uninsured in 2009. The 2010 County Health Rankings report showed that in 2009, approximately 38,000 or $27 \%$ of Martin County's adult residents were uninsured. ${ }^{51}$

## Professional Shortage and Medically Underserved Areas

The U.S. Department of Health and Human Services (DHHS) has designated a particular branch of its organization to track health professional shortages and medically underserved areas. This branch is the Health Resources and Services Administration (HRSA). ${ }^{52}$ HRSA determines which geographic areas, populations, and/or institutions have shortages of primary care, dental or mental healthcare providers. Using strict criteria utilizing the ratios between population and number of clinicians, HRSA determines (a) if an entity has a shortage of health professionals (Health Professional Shortage Areas; HPSA) or (b) if specific areas (Medically Underserved Areas; MUA) or populations (Medically Underserved Populations; MUP) have too few primary care providers, high poverty, high infant mortality rates, or high elderly population.

The table below shows the HPSAs for the U.S., Florida, and Martin County. Martin County is short 6 full-time health professionals and has one designated MUA. The HPSAs are in Indiantown and the Martin County Correctional facility. The MUA is the Indiantown area.

[^28]
## HEALTHCARE ACCESS AND UTILIZATION

Table 15. Health Professional Shortage Areas, FY 09-10

|  | Primary Medical Care | Dental Care | Mental Health |
| :--- | :---: | :---: | :---: |
| United States | 6374 | 4593 | 3713 |
| Florida | 265 | 223 | 152 |
| Martin County | 2 | 2 | 2 |

Source: Health Resources and Services Administration
To address the critical health professional shortages, DHHS funds several programs to which states, counties or individual health professionals can apply. These include the (1) Health Center Program which provides grants for health center development to underserved areas, including FederallyQualified Health Centers; (2) Rural Health Clinic Program that provides cost reimbursement from Medicaid and Medicare; (3) Medicare HPSA Bonus Payment program which provides bonuses to physicians in HPSA who provide particular services; (4) National Health Service Corps Loan Repayment and Scholarship program for primary care health professionals and students; (5) Indian Health Service Scholarship Program for health professionals working with Native American populations; (6) Exchange Visitor Program for foreign physicians with J-1 visas working in HPSAs; and (7) Conrad State 30 Program provides 30 J-1 visa waivers each year in exchange for service in HPSA.

Currently, there are five Federally-Qualified Health Centers (FQHC) within a 25 mile radius of Martin County purposed to meet the needs of the medically underserved. Additionally, Martin County has one Physician Assistant who is in the National Health Service Corps program.

## HEALTHCARE ACCESS AND UTILIZATION

## Medicaid

Medicaid is a federal and state-funded program enacted by Congress in 1965 that provides healthcare resources to low income families. Florida has the fourth largest Medicaid population in the U.S. ${ }^{53}$ Medicaid enrollment increased greatly from December 2007 to December 2009, due in part to the national economic recession. It is estimated that Medicaid enrollment increased by $13.6 \%$ nationally and $28.5 \%$ in Florida. ${ }^{54}$ Figure 38 shows trends in median Medicaid enrollment for both Florida and Martin County over the past three years.

Table 16. Total Medicaid Enrollment

|  | Total Enrolled in <br> Medicaid | Percent Enrolled in <br> Medicaid |
| :--- | :---: | :---: |
| Martin County | 13,157 | $9.3 \%$ |
| Florida | $2,858,909$ | $15.1 \%$ |
| United States | $48,570,000$ | $15.5 \%$ |

Note: Martin County and Florida estimates based on December 2010 data. US estimates based on 2009 estimates. Source: Florida Agency for Health Care Administration, Kaiser Foundation, US Census Bureau.

Figure 38. Median Medicaid Enrollment, 2007-2009


Note: Estimates are rate per 100,000 people.
Source: Florida Agency for Health Care Administration

[^29]It is estimated that Florida will incur 20.2 billion dollars in Medicaid costs for Fiscal Year 2010-11 making it fifth in the nation for Medicaid expenditures. ${ }^{55}$ This spending translates to about $\$ 6,802$ per Medicaid eligible. Nearly half of Medicaid expenditures will be for hospitals, skilled nursing facilities, intermediate care facilities for the developmentally disabled (ICF/DD), low income pool (LIP), and disproportionate share payments.

## Florida KidCare Program

According to a study by Families USA, a non-partisan healthcare advocacy organization, Florida ranks second highest in the number of uninsured children. ${ }^{56}$ In 2008, almost 800,000 children were uninsured and it was estimated that almost $60 \%$ of those uninsured children were eligible for Florida's KidCare program.

The Florida KidCare program was developed in 1998 by Florida Legislature. KidCare provides healthcare coverage for children from families with income up to $200 \%$ of the federal poverty level (see Figure 39), and families are responsible for a monthly premium between $\$ 15$ and $\$ 20$ (except for the Medicaid for Children program). KidCare is comprised of four programs: (1) MediKids-provides healthcare coverage for children 1 to 4 years old; (2) Florida Healthy Kids—provides healthcare coverage for children 5 to 18 years old; (3) Children's Medical Services Networkprovides healthcare coverage for children from birth to 18 years old with special needs, including both physical and behavioral health needs; and (4) Medicaid for Children-provides healthcare coverage for children from birth to 18 years old who qualify for low-income requirement.

Figure 39. Florida KidCare Eligibility
Florida KidCare Eligibility


Source: Florida KidCare Website

[^30]Table 17. KidCare Program Enrollment, 2010

|  | HealthyKids | MediKids | CMS | Total |
| :--- | :---: | :---: | :---: | :---: |
| Martin | 1,383 | 218 | 174 | 1,775 |
| Florida | 220,560 | 35,497 | 22,874 | 278,931 |

Source: Florida KidCare Website

## Primary Healthcare Providers

Residents of Martin County can seek the services of primary care providers on an outpatient basis. Primary care providers offer services for routine preventative care and common medical problems, and they also provide referrals for additional care from specialists. Primary care providers are important members of the community's healthcare system in that they often coordinate and plan the health services of patients.

The total number of physicians for Martin County and Florida has steadily increased from 2007 to 2009. Martin County rates for primary care categories are relatively comparable to that of Florida, with the exception of rates of $\mathrm{OB} / \mathrm{GYNs}$ in Martin County which is $64 \%$ less than the state. The rate for OB/GYNs in Martin County decreased by $31 \%$ from 2007 to 2009, compared to a $20 \%$ decrease in the rate for the state.

Table 18. Physician Workforce Characteristics, Martin County.

|  | Martin County |  |  | Florida |  |  |  |
| :--- | ---: | ---: | ---: | ---: | ---: | ---: | :---: |
|  | FY 2007-08 | FY 2008-09 | FY 2009-10 | FY 2007-08 | FY 2008-09 | FY 2009-10 |  |
| Total Physicians | 217.5 | 221.1 | 243.1 | 283.1 | 298.6 | 300.6 |  |
| Family Practice Physicians | 11.8 | 13.9 | 20.9 | 18.1 | 20.1 | 19.7 |  |
| Internists | 43.1 | 43.8 | 42.5 | 49.0 | 51.8 | 41.8 |  |
| OB/GYN | 13.2 | 13.9 | 9.1 | 9.9 | 10.5 | 7.9 |  |
| Pediatricians | 5.6 | 6.3 | 9.1 | 19.9 | 20.0 | 14.9 |  |

Note: Rates are per 100,000 population.

In Martin County, there are 433 medical doctors and 2,242 registered nurses and nurse practitioners. Stuart has the largest combined percentage of medical doctors, nurses, and nurse practitioners ( $62 \%$ ), followed by Palm City ( $14 \%$ ), Hobe Sound ( $10 \%$ ), Jensen Beach ( $9 \%$ ), Jupiter Island ( $3 \%$ ), and Indiantown $(2 \%)$. Less than one percent of medical doctors and practitioners in Martin County are in Sewall's Point.

Figure 40. Percentage of Martin County Medical Doctors by Area, 2009


Source: Florida Department of Health

Figure 41. Percentage of Martin County Nurses and Nurse Practitioners by Area, 2009


Source: Florida Department of Health

## Dentists

Oral health has been increasingly recognized as important to overall good health. Research demonstrates that poor oral health is linked to significant health problems such as cardiovascular disease ${ }^{57}$ and obesity. ${ }^{58}$ Although the association between tooth and gum disease and cardiovascular disease remain unclear, preliminary findings indicate that heart disease is two times as high in people with periodontal disease. Given some of these findings improving access to oral healthcare has become a priority for many communities.

Figure 42. Percentage of Dentists in Martin County by Area, 2009


Source: Florida Department of Health.
Martin County has a total of 243 dentists with $57 \%$ in Stuart, 19\% in Palm City, 13\% in Jensen Beach, $8 \%$ in Hobe Sound, $2 \%$ in Jupiter Island, and $1 \%$ in Indiantown. In 2009, 34\% of lowincome persons received access to oral healthcare in Martin County. The percentage of low-income persons receiving access to oral healthcare in Martin County has increased by $44 \%$ since 2007.

Table 19. Access to Oral Healthcare by Low-income Persons

|  | $2007-08$ | $2008-09$ | $2009-10$ |
| :--- | :---: | :---: | :---: |
| Martin County | $23.7 \%$ | $30.7 \%$ | $34.3 \%$ |
| Florida | $25.6 \%$ | $28.7 \%$ | $29.3 \%$ |

Source: Florida Charts

[^31]
## Hospital Resources/ Acute Care

## Healthcare Facilities

## Martin Memorial Healthcare Systems

Martin Memorial Health Systems is a non-profit community-based heath care organization located in Stuart, Florida. The system includes two hospitals (i.e., Martin Memorial Hospital South and Martin Memorial Medical Center), two Medicenters, an emergency center, a cancer center, and five outpatient centers and clinics (see Appendix XX). Martin Memorial Medical Center contains 244 hospital beds and Martin Memorial Hospital South contains 100 hospital beds. Services provided by the system include preventative, primary and acute hospital care, cancer care, a heart center, and wellness and rehabilitation services. In 2009, the total hospital discharges for Martin County was 11,950 at an estimated cost of 4.8 million dollars. Martin Memorial hospitals admitted a total of 19,073 patients.

## Martin County Health Department

Low-income residents of Martin County can access primary care services through the Martin County Health Department. Children and adolescents can receive a range of medical services which includes routine medical and dental health checks. Adults can also receive an array of medical services which includes routine check-ups and dental care. The Martin County Health Department also has a clinic devoted to the treatment of sexually transmitted infections which provides education, testing, and treatment.

Table 20. Martin County Health Department Expenditures, FY 2007-2010

| Martin County Health Department Expenditures | FY 2007-08 | FY 2008-09 | FY 2009-10 |
| :--- | ---: | ---: | ---: |
| Martin County | $\$ 7,717,080$ | $\$ 8,129,061$ | $\$ 8,272,674$ |
| Florida | $\$ 805,378,693$ | $\$ 834,241,499$ | $\$ 839,899,201$ |

Source: Florida Charts

## Volunteers in Medicine Clinic

With support from Martin Memorial Health Systems, Martin County Medical Society, Martin County Health Department, and community members, Volunteers in Medicine Clinic provides free primary medical care to low-income residents of Martin County. They have 90 volunteer physicians, nurse practitioners, physician assistants, nurses, medical assistants and lay individuals.

## Florida Community Health Centers

Florida Community Health Centers (FCHC) are FQHCs that provide preventative and primary healthcare services to medically underserved populations utilizing sliding fee scales. The FCHCs have over 250 employees, including about 40 healthcare providers. In 2009, the FCHCs served
almost 40,000 patients. Because Indiantown has been designated as a MUA, there is a FCHC located in Indiantown that offers a wide range of primary care services, including dental care.

## Hospital Utilization

Hospital discharge data demonstrate that approximately $8 \%$ of Martin County's population received medical care at the County Hospitals in 2009. Of the total hospitalizations in 2009, 73\% occurred in Martin Memorial Medical Center, with total charges estimated at $\$ 356$ million.

Table 21. Hospital Discharges, 2009

| Hospital | Total <br> Hospitalizations | Average <br> Charges | Total Charges | Average <br> LOS <br> (in days) | Total <br> LOS <br> (in days) |
| :---: | :---: | :---: | :---: | :---: | :---: |
| Martin Memorial Hospital <br> South | 3,276 | $\$ 38,383$ | $\$ 125,741,925$ | 4.1 | 13,416 |
| Martin Memorial Medical <br> Center | 8,674 | $\$ 41,078$ | $\$ 356,311,174$ | 4.6 | 39,584 |
| Total | 11,950 |  | $\$ 482,053,099$ |  | 53,000 |

Source: AHCA Hospital Discharge Data Files, 2009
In 2009, Medicare covered $59 \%$ of the cost for total hospitalizations in Martin County, followed by commercial insurance ( $21.2 \%$ ), Medicaid ( $14.5 \%$ ), and self pay or charity ( $5.6 \%$ ).

Table 22. Total Hospitalizations for Martin County, 2009

| Payer | Total <br> Hospitalizations | Overall \% | Average <br> Charges | Total <br> Charges | Avg. LOS <br> (in days) | Total <br> LOS <br> (in days) |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Medicare | 6,990 | $58.8 \%$ | $\$ 92,721$ | $\$ 339,875,796$ | 10 | 35,683 |
| Medicaid | 1,719 | $14.5 \%$ | $\$ 39,753$ | $\$ 29,106,161$ | 7 | 5,405 |
| Commercial Insurance, <br> HMO,PPO | 2,504 | $21.1 \%$ | $\$ 67,484$ | $\$ 79,892,656$ | 7 | 8,472 |
| Self Pay/Charity | 669 | $5.6 \%$ | $\$ 85,247$ | $\$ 29,646,083$ | 9 | 3,123 |

Source: AHCA Hospital Discharge Data Files, 2009

There were 53,446 total emergency department visits made to Martin County hospitals in 2009. The 65 and older population accounted for the majority ( $32 \%$ ) of visits made to the emergency department. The 45 to 64 year old population accounted for $21 \%$ of all visits made to the emergency department, followed by the 25 to 44 year old population ( $23 \%$ ). Only $12 \%$ of all emergency department visits were made by patients under the age of 18.

Table 23. Martin County Emergency Room Visits, 2009

| Population | Total <br> Emergency <br> Department <br> Visits | Average <br> Charges | Total <br> Charges | Total <br> Percentage |
| :--- | ---: | ---: | ---: | ---: |
| Birth to 17 years | 12,299 | $\$ 3,843$ | $\$ 23,501,188$ | $11.8 \%$ |
| $18-24$ years | 5,468 | $\$ 5,937$ | $\$ 16,258,494$ | $8.2 \%$ |
| $25-44$ years | 12,848 | $\$ 6,996$ | $\$ 45,056,780$ | $22.6 \%$ |
| $45-64$ years | 11,176 | $\$ 9,099$ | $\$ 51,297,113$ | $25.7 \%$ |
| 65 and older | 11,655 | $\$ 10,736$ | $\$ 63,397,465$ | $31.8 \%$ |
| Total Population | 53,446 | $\$ 7,415$ | $\$ 199,511,040$ | $100.0 \%$ |

Source: AHCA Emergency Room Data Files, 2009

## Mental Health and Substance Abuse Services

Mental health is an important facet of overall health. Research data indicates that about one in every four adults suffers from a mental disorder each year. ${ }^{59}$ Mental health problems are a leading cause of disability in the United States and Canada. ${ }^{60}$ Martin County residents can receive outpatient mental health and substance abuse services within the county. There are 189 mental healthcare practitioners throughout Martin County. Sixty percent of all Martin County mental healthcare practitioners are in Stuart. Seventeen percent are in Palm City, followed by $10 \%$ in Jensen Beach, 5\% in Hobe Sound and Indiantown, and $2 \%$ are in Jupiter Island.

## New Horizons of the Treasure Coast, Inc

New Horizons of the Treasure Coast, Inc is a private nonprofit corporation that provides evaluation and treatment for mental health and substance abuse services to children, adolescents, and adults. They also provide adult criminal justice services to adults living with mental illness held in a correctional facility.

Figure 43. Mental Health Practitioners in Martin County by Area


Source: Florida Department of Health

[^32]
## Long-term Care and Senior Health Services

Long-term care services provide support for individuals with chronic physical or cognitive issues. Long-term care services are primarily utilized by seniors. However, some service agencies also provide physiotherapeutic and psychotherapeutic services to individuals with disabilities. Long-term care services include an array of settings, including skilled nursing facilities (i.e., nursing homes).

Since 2007, the rate of nursing home beds per 100,000 has remained flat for Martin County and only slightly decreased for Florida. ${ }^{61}$ Overall, Martin County has a higher rate of nursing home beds ( 580.1 per 100,000 ) than Florida ( 438.6 per 100,000). Currently, Martin County has eight skilled nursing facilities comprising 833 nursing home beds ( 795 - community beds and 38 - sheltered beds).

Table 24. Skilled Nursing Facilities Data for Martin County, 2010

| Indicator | Estimate |
| :--- | :---: |
| Community Beds | 795 |
| Sheltered Beds | 38 |
| Veteran Administration Beds | 0 |
| Nursing Home Facilities with Community Beds | 7 |
| Nursing Home Facilities with Sheltered Beds | 1 |
| Community Patient Days | 255,263 |
| Medicaid Patient Days | 159,171 |
| Occupancy Rate for Community Beds | $88 \%$ |
| Percent Covered by Medicaid | $62.4 \%$ |

Source: Department of Elder Affairs

[^33]Martin County Health Assessment

Martin County has 11 assisted living facilities comprising 483 beds ( 3 - Optional State Supplementation (OSS) beds and 480 - Non-OSS beds). Two of the assisted living facilities have Extended Congregate Care Licenses and four of them have Limited Mental Health Licenses. In addition to the skilled nursing and assisted living facilities, Martin County also has other long-term care services available for senior and disabled populations (see Table 25).

Table 25. Care Services for Disabled and Senior Populations for Martin County, 2010

| Indicator | Estimate |
| :--- | :---: |
| Adult Day Care Facilities Capacity | 113 |
| Adult Family Care Homes | 1 |
| Adult Family Care Homes Beds | 5 |
| Home Health Agencies | 10 |
| Medicare Home Health Agencies | 6 |
| Homemaker and Companion Service Companies | 16 |

Source: Department of Elder Affairs

Martin County residents were solicited for their perspectives on the health status of Martin County. One component of this process was the administration of community health surveys throughout the county. The Steering Committee and Q-Q Research Consultants held a series of meetings to develop a survey instrument that would best evaluate the opinions and healthcare needs of Martin County residents. The resulting product was a comprehensive health survey (available in both English and Spanish) that evaluated various aspects of Martin County's existing healthcare system, including quantity and quality of services, health issues impacting Martin County, and residents' general health behaviors (see Appendices I and II for a copies of survey). Survey data were collected from October 2010 to December 2010.

## Methodology

Data from community health surveys were collected using online and face-to-face methods for a combined total of 828 completed surveys (i.e., 131 online surveys and 697 paper/pencil surveys). Online surveys were collected using SurveyMonkey, an online survey service provider. Links to both English and Spanish versions of the online survey were provided to all Steering Committee members, as well as several other local community partners for distribution to the community. For the paper/pencil surveys, Q-Q Research Consultants setup data collection stations at several locations and Martin County residents who completed surveys at these locations were given monetary incentives for their time. Steering Committee members also collected data using paper/pencil versions of the survey at their agency locations.

The Steering Committee was committed to obtaining a representative sample of Martin County residents. Thus, it was critical to the Steering Committee that data were collected from ethnic minorities who were disproportionately economically disadvantaged. To ensure that adequate data were obtained to generate reliable estimates, oversampling was utilized.

Oversampling involves a priori plans to collect more data from particular subgroups of the population who may not be included in a study/project if a simple random sample were conducted. Thus, targeted outreach efforts are used to collect data from participants in particular subgroups. For the Martin County health survey, research teams strategically setup data collection stations in targeted communities. When oversampling research methods are utilized, weights must be used when conducting data analyses. Simply stated, weights are statistical corrections applied to the data to ensure that results from sample translate to population-level findings. Thus, weights were used for analysis of the Martin County community health survey data.

## Demographics

Survey respondents represented all areas of Martin County as evidenced by their self-reported zip codes. However, the Indiantown area (34956) was purposefully overrepresented in the sample as this area comprises mostly African Americans and Hispanics. The majority of the sample was female $(66.2 \%)$. Non-Hispanic Whites comprised the majority of the sample (43.9\%) followed by African Americans ( $25.9 \%$ ) and Hispanics ( $22.3 \%$ ). Survey respondents were nearly equally divided along age with a slightly lower percentage being 65 years or older ( $9.5 \%$ ). The majority of the sample was employed either full-time ( $42.9 \%$ ) or part-time $(11.4 \%)$ at time of survey. However, about one out of four respondents was unemployed ( $25.4 \%$ ).

| Zip Code |  |
| :--- | ---: |
| 33455 (Jupiter Island) | 5.0 |
| 33475 (Hobe Sound) | 0.6 |
| 34956 (Indiantown) | 41.6 |
| 34957 (Jensen Beach) | 16.7 |
| 34958 (Jensen Beach) | 0.5 |
| 34990 (Palm City) | 6.4 |


| Current Age Range |  |
| :--- | ---: |
| $18-24$ | 16.7 |
| $25-34$ | 19.4 |
| $35-44$ | 17.5 |
| $45-54$ | 20.8 |
| $55-64$ | 16.0 |
| 65 or older | 9.5 |


| Zip Code |  |
| :--- | ---: |
| 34991 (Palm City) | 0.3 |
| 34992 (Port Salerno) | 0.8 |
| 34994 (Stuart) | 9.4 |
| 34995 (Stuart) | 0.5 |
| 34996 (Sewalls Point) | 3.4 |
| 34997 (Stuart) | 14.6 |


| Race/Ethnic Background |  |
| :--- | ---: |
| African American/ Black | 25.9 |
| Native American | 2.3 |
| Latino/Spanish | 22.3 |
| Asian | 0.8 |
| Non-Hispanic White | 43.9 |
| Other | 4.9 |


| Current Employment |  |
| :--- | ---: |
| Status |  |
| Full-time | 42.9 |
| Part-time | 11.4 |
| Unemployed | 25.4 |
| Self-employed | 4.3 |
| Homemaker | 5.3 |
| Retired | 10.7 |

## Survey Findings

Weighted item frequencies were computed using SPSS statistical software. In the section that follows, survey responses by item are listed in percentages. For a number of questions, respondents were given response sets with sometimes as many as 24 items to select from. In these instances, only responses with the 10 with highest frequencies are shown in the table.

Nearly three-quarters ( $73.5 \%$ ) of the respondents had health insurance at the time of the survey. The majority of these respondents had employer-provided plans ( $30.8 \%$ ). With respect to government provided health insurance, $9.5 \%$ of respondents had Medicaid; $1.2 \%$ of respondents had veteran's or military health coverage; and $8 \%$ of respondents had Medicare or Medicare supplement.

About one out of four survey respondents (26.5\%) did not have health insurance. The majority of them $(85.7 \%)$ cited the reason for lack of insurance as cost.

| Current type of health insurance |  |
| :--- | :---: |
| Private Insurance | 16.6 |
| Medicaid | 9.5 |
| Medicare | 7.2 |
| Self Pay | 5.3 |
| No Health Insurance | 26.5 |
| Employer provided | 30.8 |
| VA/TRICARE | 1.2 |
| Medicare Supplement | 0.8 |
| Health Savings Account | 2.0 |


| Reason for no health insurance |  |
| :--- | ---: |
| Cannot afford it | 85.7 |
| Was denied coverage | 4.8 |
| Other | 9.5 |

The vast majority of survey respondents felt that there was either a doctor's office or clinic (83.4\%) or dental office or clinic $(71.8 \%)$ near their home. Fewer than $15 \%$ of respondents reported that they felt that there was not a dental office or clinic near their home.

| Doctor's office or clinic is close to <br> home |  |
| :--- | :---: |
| Strongly Agree | 51.2 |
| Somewhat Agree | 32.2 |
| Neither Agree or Disagree | 6.6 |
| Disagree Somewhat | 5.7 |
| Strongly Disagree | 4.3 |


| Dentist's office or clinic is close to home |  |
| :---: | :---: |
| Strongly Agree | 44.4 |
| Somewhat Agree | 27.4 |
| Neither Agree or Disagree | 13.5 |
| Disagree Somewhat | 6.5 |
| Strongly Disagree | 8.2 |

A little over half of the sample knew where to go for either mental health services (55.5\%) or substance abuse services ( $50 \%$ ) in their community. Twenty-eight percent of the sample did not know where to go for mental health services, and $30.7 \%$ of the sample did not know where to go for substance abuse services.

| Know where to go for mental |  |
| :--- | :--- |
| health services in my community |  |
| Strongly Agree | 36.2 |
| Somewhat Agree | 19.3 |
| Neither Agree or Disagree | 16.2 |
| Disagree Somewhat | 13.0 |
| Strongly Disagree | 15.3 |


| Know where to go for substance |  |
| :--- | ---: |
| abuse services in my community |  |
| Strongly Agree | 31.4 |
| Somewhat Agree | 19.6 |
| Neither Agree or Disagree | 18.4 |
| Disagree Somewhat | 12.7 |
| Strongly Disagree | 18.0 |

When asked if they agreed that they knew how to access end of life care in their community, the majority of the sample $(64.1 \%)$ responded affirmatively. Almost one out of four respondents disagreed with the statement.

A little less than half of respondents (49.6\%) reported that they did not agree with the statement that they "know how to get help for medical care, including medicines that [they] cannot afford in the [their] community."

| Know how to get end-of-life care or <br> hospice care in my community |  |
| :--- | :---: |
| Strongly Agree | 41.3 |
| Somewhat Agree | 22.8 |
| Neither Agree or Disagree | 12.5 |
| Disagree Somewhat | 9.0 |
| Strongly Disagree | 14.4 |


| Know how to get help for medical <br> care, including medicines that I <br> cannot afford in my community |  |
| :--- | ---: |
| Strongly Agree | 28.6 |
| Somewhat Agree | 21.0 |
| Neither Agree or Disagree | 13.8 |
| Disagree Somewhat | 12.4 |
| Strongly Disagree | 24.1 |

When asked where they would most likely go if they were sick, nearly half (49.1\%) of respondents stated that they would go to their doctor's office. More than $27 \%$ responded that they would go to the emergency room, and a little fewer than $14 \%$ reported "other." Some respondents (4.7\%) reported that they did not have a place to go when they are sick.

| Where would you go if you were sick? |  |
| :--- | ---: |
| Emergency room in Martin County | 27.6 |
| Your doctor's office | 49.1 |
| Emergency Room outside Martin County | 1.1 |
| Local Health Department | 3.6 |
| Nowhere; I don't have a place to go | 4.7 |
| Other | 13.9 |

To directly evaluate access to prescription medicines in Martin County, respondents were asked what means they use "when [they] need to use prescription medicines." Several respondents (42.9\%) reported that they have their prescription filled at a drugstore or supermarket. Only a few respondents reported obtaining their prescriptions from out of the county $(0.7 \%)$. However, the majority of the respondents reported they did not obtain their needed prescription medicines. Rather, they reported using friends' or family's medicines ( $9.9 \%$ ), leftover medicines ( $10.8 \%$ ), over-the-counter medicines $(9.5 \%)$, herbal remedies ( $14.6 \%$ ), pet medicines $(0.5 \%)$, or simply going without need prescription medicine ( $7.0 \%$ ).

| When you need to use prescription medications, you... |  |
| :--- | ---: |
| Have Rx filled at drugstore or supermarket | 42.9 |
| Go without medicine | 7.0 |
| Buy OTC Medicine | 9.5 |
| Use friends' or family's medication | 9.9 |
| Use leftover medication | 10.8 |
| Use herbal remedies instead | 14.6 |
| Get medicines from outside the country | 0.7 |
| Use pet medicines | 0.5 |
| Go to the hospital | 4.1 |

Respondents were provided with a list of health services and asked to choose those that were difficult to access in their community. Respondents were also provided with a list of barriers to accessing healthcare and asked to select the items most applicable to them. The top ten most frequently endorsed items from both questions are listed below in order of their frequency (i.e., most often endorsed to least often endorsed).

As shown, respondents reported that the most difficult health service to obtain in Martin County is dental care. This was followed by alternative therapeutic health services, including acupuncture. The third most frequently endorsed item was vision care.

With respect to barriers to accessing healthcare, the most frequently endorsed item was lack of transportation. This was followed by respondents' lack of a regular source of healthcare. The third most frequently endorsed barrier to accessing healthcare was cost; respondents reported that they cannot pay for doctor and hospital visits.

| Difificult to obtain health services in your <br> community <br> Dental/Oral care |
| :---: |
| Alternative therapy |
| Vision care |
| Specialty MD care |
| Emergency room care |
| Physical therapy |
| X-rays-Mammograms |
| Lab work |
| Substance abuse services |
| Mental Health Counseling |


| Healthcare barriers |
| :---: |
| Lack of transportation |
| Have no regular source of healthcare |
| Can't pay for doctor or hospital visits |
| Lack of evening and weekend services |
| Can't find providers that accept insurance |
| Afraid to have health check-up |
| Don't know what type of services are |
| available |
| Long waits for appointments |
| Don't like accepting government assistance |
| Healthcare information is not kept |
| confidential |
| No barriers to getting healthcare |

To evaluate how often respondents were receiving routine healthcare, a series of questions were asked regarding last visits for a medical checkup, dental exam, and eye exam. The majority of respondents $(68.6 \%)$ reported that they had visited the doctor for a routine checkup within the last year. About $19 \%$ reported that it had been 2 years or more since they had last visited a doctor for a checkup. Nearly half of respondents had received a dental exam within the last year and $44.2 \%$ of respondents had received an eye exam within the last year.

| Last visited a doctor for a routine <br> checkup |  |
| :--- | :---: |
| Within the Past Year | 68.5 |
| Within the Past 1-2 Years ago | 12.7 |
| Within the 2-5 Years | 8.9 |
| 5 or more years ago | 10.1 |

Had a dental exam or cleaning within the past $\mathbf{1 2}$ months

| Yes | 49.4 |
| :--- | :--- |
| No | 50.6 |

Had a eye exam or cleaning within the past 12 months

| Yes | 44.2 |
| :--- | :--- |
| No | 55.8 |

Respondents were asked whether they were informed by a physician that they had a chronic illness. Additionally, they were asked whether they were required to take prescription medicines for the illness and if so, were they compliant with their prescribed medication regimen.

More than $27 \%$ of respondents reported being told that they have a long-term or chronic illness. Of that $27.5 \%$, a little fewer than $30 \%$ of them ( $29.8 \%$ ) were prescribed medicine for their illness. A little more than one out of three respondents ( $34.6 \%$ ) requiring medicines reported taking the prescribed medicines.

| I have a long-term or chronic illness |  |
| :--- | ---: |
| Yes | 27.5 |
| No | 72.5 |


| I need medicine to control my chronic  <br> illness.  |
| :--- |
| Yes |
| No |


| I take medicine to control my chronic <br> illness |  |
| :--- | ---: |
| Yes | 34.6 |
| No | 65.4 |

Respondents were asked to rate their overall level of stress on a typically day. Experiencing medium stress was reported by $48.7 \%$ of respondents followed by bigh stress ( $27.7 \%$ ) and low stress ( $24.2 \%$ ).

Respondents were also asked to rate their general health status. More than $10 \%$ rated their health as excellent. Moreover, the majority of respondents rated their health as very good ( $31.7 \%$ ) or good (37.9\%). A small percentage of the sample rated their health as poor (3.5\%).

| Overall level of stress |  |
| :--- | ---: |
| Low | 24.2 |
| Medium | 48.7 |
| High | 27.7 |


| In general, your health is... |  |
| :--- | ---: |
| Excellent | 11.2 |
| Very Good | 31.7 |
| Good | 37.9 |
| Fair | 15.7 |
| Poor | 3.5 |

To evaluate the health behaviors of respondents, a series of questions were asked regarding specific health behaviors across a variety of domains. Respondents were asked if they always, sometimes or never engaged in particular behaviors.

The majority of respondents reported that they always wore a seatbelt ( $86.7 \%$ ), while a little fewer than half of the sample reported that they always wore a helmet when riding bicycles, motorcycles or ATVs. The majority of the sample reported that they sometimes ate at least five servings of fruits and vegetables daily ( $63.1 \%$ ) and sometimes exercised at a moderate pace for 30 minutes at least four days a week (50.4\%).

Regarding substance use, nearly seventy-one percent of the sample reported that they never drank more alcohol than the recommended daily amounts, smoked cigarettes (74.9\%), chewed tobacco ( $95.5 \%$ ), were exposed to secondhand smoke at home or work ( $70.9 \%$ ), used illegal drugs ( $91.8 \%$ ), and misused or abused prescription drugs ( $92.4 \%$ ).

Respondents were asked how often they perform self-exams for cancer (either testicular or breast). Twenty-two percent reported always, and the remainder of the sample reported sometimes ( $42 \%$ ) and never $(35.8 \%)$. Respondents were also asked if they receive an annual flu shot. The majority of the sample reported that they never do ( $51.6 \%$ ).

| Wear a seatbelt |  |
| :--- | ---: |
|  |  |
| Always | 86.7 |
| Sometimes | 11.5 |
| Never | 1.9 |


| Wear a helmet when riding bicycle, <br> motorcycle, or ATV |  |
| :--- | ---: |
| Always | 42.2 |
| Sometimes | 23.2 |
| Never | 34.6 |


| Eat at least 5 servings of fruits and <br> vegetables each day |  |
| :--- | ---: |
| Always | 22.4 |
| Sometimes | 63.1 |
| Never | 14.5 |


| Exercise at a moderate pace for 30 <br> minutes at least 4 days a week |  |
| :--- | ---: |
| Always | 30.3 |
| Sometimes | 50.4 |
| Never | 19.3 |


| Consume more than $\mathbf{3}$ alcoholic drinks <br> (females) or more than 5 alcoholic <br> drinks (males) per day <br> Always <br> Sometimes <br> Never | 5.8 |
| :--- | ---: |


| Chew tobacco |  |
| :--- | ---: |
|  |  |
| Always | 1.9 |
| Sometimes | 2.5 |
| Never | 95.5 |


| Smoke cigarettes |  |
| :--- | ---: |
| Always | 15.9 |
| Sometimes | 9.2 |
| Never | 74.9 |


| Exposed to secondhand smoke at home <br> or work <br> Always |  |
| :--- | ---: |
| Sometimes | 8.4 |
| Never | 20.7 |


| Use illegal drugs |  |
| :--- | ---: |
| Always | 2.7 |
| Sometimes | 5.5 |
| Never | 91.8 |


| Misuse or abuse prescription drugs |  |
| :--- | ---: |
| Always | 2.7 |
| Sometimes | 4.8 |
| Never | 92.4 |


| Perform self-exams for <br> cancer |  |
| :--- | :--- |
| Always | 22.1 |
| Sometimes | 42.0 |
| Never | 35.8 |


| Get a flu shot each year |  |
| :--- | :--- |
| Always | 28.3 |
| Sometimes | 20.2 |
| Never | 51.6 |

When asked if they "feel safe in [their] community," most of the respondents reported always ( $60.6 \%$ ) and few reported never ( $6.01 \%$ ).

| Feel safe in your community |  |
| :--- | ---: |
| Always | 60.6 |
| Sometimes | 33.4 |
| Never | 6.01 |

Respondents were provided with a list health issues and were asked to choose those that were the most important issues in Martin County. The top ten most frequently endorsed items are listed below in order of their frequency (i.e., most often endorsed to least often endorsed). As shown in the table below, the most frequently endorsed item was substance use addiction. This was followed by cancer, obesity, diabetes, and high blood pressure.

| Most important health issues |
| :---: |
| Addiction-alcohol or drugs |
| Cancer |
| Obesity |
| Diabetes |
| High blood pressure |
| Teenage pregnancy |
| Heart disease \& stroke |
| Smoking/tobacco use |
| Mental health problems |

Finally, women with children were asked to respond to a series of items regarding their prenatal care, and parents were asked to respond to items regarding their children's access to healthcare. The majority of the women in the sample reported visiting a physician within their first trimester ( $89.1 \%$ ); however, about one out of ten women reported that they did not. When asked "if there was a time during the last 12 months that [their] child needed to see a doctor" but did not due to cost, $19.3 \%$ of parents reported affirmatively; however, the majority of the sample responded negatively to that item $(80.7 \%)$. Most parents in the sample reported that their children had visited the doctor for a routine checkup within the past year ( $82.8 \%$ ). Although, one out of ten parents reported that their children had not visited the doctor for checkup within the past two years or more. The majority of the parents reported that they would take their children to their doctor's office if their children were sick $(57.1 \%)$. Almost thirty-three percent reported that they would take their children to the hospital emergency room in Martin County if their children were sick. A small percentage of the parents reported that they did not have any place to take their children if they were sick $(0.7 \%)$.

| Each time you were pregnant, did <br> you visit physician within your <br> first trimester? |  |
| :--- | ---: |
| Yes | 89.1 |
| No | 10.9 |


| Child last visited a doctor for a |  |
| :--- | ---: |
| routine checkup |  |
| Within the past year | 82.8 |
| Within the past 2 years | 7.6 |
| Within the past 2-5 years | 5.3 |
| 5 or more years | 4.4 |


| youme during the past $\mathbf{1 2}$ months <br> your checded to see a doctor <br> _.because of the cost? |  |
| :--- | ---: |
| Yes | 19.3 |
| No | 80.7 |


| $\|$Where would you go if your <br> children/dependents were sick? <br> Hospital ER in Martin County | 32.7 |
| :--- | ---: |
| Their doctor's office | 57.1 |
| Hospital ER outside Martin | 1.4 |
| The local health department | 5.6 |
| No place to go | 0.7 |
| A school clinic | 1.1 |
| Other | 1.4 |

## COMMUNITY FOCUS GROUPS

## Methodology

A series of focus groups designed to bring forth perceptions regarding the strengths and weaknesses of the healthcare system, barriers to care, and overall quality of life were conducted with residents in Martin County. Focus group questions were developed by the Martin County Steering Committee and were similar to focus group questions utilized by other locally and nationally conducted community health assessments. Flyers and sign-up sheets were placed at various community sites to solicit participation from Martin County residents. Participants received a small monetary incentive for their participation.

Focus group sessions were facilitated by a staff of Q-Q Research Consultants. One staff member facilitated the group session, while other members recorded notes. Completed notes were reviewed and analyzed to generate common themes.

A total of 5 focus groups ( 57 participants) were conducted. Participants represented diverse racial and ethnic backgrounds, including Black or African American (50\%), White (30.6\%), Native American ( $8.3 \%$ ), Hispanic/Latino ( $2.8 \%$ ), and some other race ( $8.3 \%$ ). There were more female $(78 \%)$ than male $(22 \%)$ participants. The majority of the focus group participants were retired ( $50.0 \%$ ), followed by $19.4 \%$ full-time workers, $11.1 \%$ part-time workers, $2.8 \%$ self-employed, and $2.8 \%$ homemakers. Some participants reported that they were currently unemployed ( $13.9 \%$ ).

Representatives from the following groups participated in the focus groups in various locations throughout Martin County:

1. Seniors Population: Martin County Council on Aging
2. General Population: Whole Child Connection
3. General Population: Volunteers in Medicine Clinic
4. Hispanic Population: Healthy Start Coalition of Martin County
5. Healthcare Practitioners: Volunteers in Medicine Clinic

## General Focus Group Themes

## Place to Raise Cbildren and Grow Old

Overall, most attendees felt that Martin County was a good place to live and raise children. Specifically, participants expressed not being concerned with their families' physical safety. Participants felt that their communities, particularly their neighborhoods, were safe environments, with minimal problems with neighbors.

Most of the participants agreed that Martin County schools were good. Participants described the Martin County School System as "excellent." Within the broader community, they stated that there are many recreational activities, but felt that schools should increase the number of team sports. Some participants stated that recreation outlets were few. YMCA was viewed as the only place to go for family activities. Some participants stated that obesity, substance abuse, smoking and teen pregnancy were all big problems in their community.

In regards to whether Martin County was a place to grow old, participants noted that there were parks in the community where the seniors can congregate. Participants in Indiantown expressed an interest in having a seniors community center with programs and activities, such as exercise pools, hair stylists, art classes, spa facilities, etc. They explained that because of transportation, the senior centers in Stuart were too far. Additionally, some participants felt that there was a dearth of affordable housing options for seniors. Participants articulated their high regard for the services provided by Martin County for seniors such as Council on Aging, a center filling many of the service gaps for the senior population.

## Economic Opportunities in the Community

Some participants felt that the current economic climate has significantly reduced employment opportunities in their communities. They remarked that prior to the economic slump there were more opportunities. Participants mentioned that many consultants have lost work; many small businesses and local community staples have closed (e.g., Stuart Fine Foods); and many strip malls have several vacancies evidencing the tremendous economic loss. Some expressed concern for lowincome individuals, stating that given their community's close proximity to the beach, housing prices were expensive. Some also felt that opportunities for higher education were limited.

## Access and Barriers to Health Services

Overall, participants noted that access to health services for their children was adequate. They stated that programs such as Volunteers in Medicine Clinic, the Florida Community Health Centers, and CareNet fill an important gap in the healthcare industry. In many instances, residents in Stuart felt that there were adequate health services for adults in their area. However, neighboring cities, such as Indiantown, felt that healthcare services were lacking in their community. A recurrent theme among all participants was the lack of transportation which made accessing health services difficult.

Some participants expressed their satisfaction with the wide variety of quality services (e.g., diabetes prevention program, pre-K, gymnastics courses) provided by Martin County YMCAs.

Some participants expressed their satisfaction with the quality of prescription drugs programs in their communities. Participants stated that expensive drugs are now being offered to the general public for very low or no cost. There is wide access to the programs since many local pharmacies are offering the discounts (e.g., Publix, Walmart, CVS).

## Types of Services Available and Needed

Participants were dissatisfied with the quantity of mental health and substance abuse services available to Martin County residents. They felt that there were hardly any services available due to funding cuts. New Horizons was mentioned as the primary agency for mental health services. Participants mentioned that Volunteers in Medicine Clinic has been working to fill this gap by hiring volunteer Mental Health Professionals as part of their agency's treatment team.

Some participants stated that affordable housing was available for the general population. However, there was a sizeable population of homeless people that lived in the woods because there were no homeless shelters in the area.

Some participants felt that outside of the services and resources offered by Martin County schools, families of children with autism and other special needs did not have access to services. Concern was also raised regarding existing dental care services. Participants felt that existing dental services are limited.

Much concern was raised regarding the lack of transportation. They mentioned that the community coach transports seniors, but there are many restrictions with utilizing that service (i.e., seniors must call days in advance to arrange pickup; the service area is limited; and service only transports groups, not single passengers). Participants explained that this was a significant issue given the vast distance between various commercial businesses in Martin County. Participants hoped for better transportation system with free shuttles for seniors.

## Knowledge of Services Available

Knowledge of available services in Martin County was mixed. Some residents lacked knowledge of the different services available to them, while other residents were aware of the services available in Martin County. Moreover, some participants had no awareness of services for homelessness, financial and medical crises, or mental health problems. There was some knowledge of availability of substance abuse services, and for those who had accessed these services, satisfaction was expressed with the type of service provided. For example, one participant noted having received much needed help and support from the substance abuse treatment program she had accessed.

Participants felt that awareness of public health services was poor. They stated that there is not a network that provides the general public with enough information regarding health and social services. The 211 service is one medium used to channel the information, but participants expressed some concern with the agency's strategies to disseminate information to broader community.

## Prevention of Health Concerns

Participants felt that there was a need for more community facilities dedicated to substance abuse and special needs. Participants also expressed their concern with K-2, a street drug with hallucinogenic effects. They felt this drug should be deemed illegal. Participants also shared that they
would like to see school nurses reinstated in the schools. They felt that the school nurses served as a gateway to healthcare services for students who would have otherwise not received care.

## Level of Satisfaction with Healthcare Systems

Overall, participants were satisfied with Martin County's healthcare system. They stated that there was no problem with receiving good services and generally no long waits at the doctor's offices or hospitals. Some participants felt that it was perceived that those with private insurance would receive the very best healthcare. Many participants stated that when prescriptions were denied by pharmacies, the doctors would assist them with getting the medicines, especially if the medications were new.

Participants also stated that they were very satisfied with the services provided with CareNet, a program for teen mothers. This program was important because Spectrum is the only school that currently supports teen moms.

Participants stated that residents that did not have Medicare or Medicaid insurance would find it difficult to find good doctors, specialists, and would be unable to fill prescriptions. Participants also mentioned issues some residents have with obtaining services even when they have Medicaid. Participants mentioned that many doctors are not willing to accept Medicaid due to the myriad issues with billing and reimbursement. It was stated that this group of people would not get the necessary health care. Participants were not aware of any specialists in Martin County that accepted Medicaid. However, some physicians are willing to accept Medicaid Share cost. Participants stated that patients with Medicaid Share cost more often than not still go with unmet health issues due to the large upfront deductibles required. These patients are doubly impacted because while they cannot afford the deductibles, they are insured and cannot receive treatment from other agencies like Volunteers in Medicine Clinic.

Additionally, participants were not satisfied with existing optical and dental care for the noninsurance. They were also not satisfied with the current services available for specialist visits for noninsured. If they were given referrals for specialists, most of the time, they would not be able to follow up.

The Steering Committee of the Martin County Health Collaborative met between the Fall of 2009 and December 2010 in an effort to evaluate the health status and healthcare needs of Martin County residents and to make recommendations to the community for future action. The Martin County Community Health Assessment report was presented to members of the Martin County Community Health Assessment Steering Committee. The five sections of this report provide an overview of health indicators, as well as information on the overall health status of Martin County, including (1) social and economic demographic indicators, (2) leading causes of death, (3) key health indicators and risk factors, (4)status of maternal and child health, and (5)access to healthcare for Martin County. Additionally, the residents of Martin County provided their feedback regarding their healthcare needs and behaviors via a community health survey and through participation in focus groups.

Following review of the community health assessment report, the Steering Committee of the Martin County Health Collaborative met to discuss key findings of the report. Three broad health issues were identified: (1) Education and Awareness of Existing Health Services, (2) Access to Primary Care, and (3) Access to Mental Health and Substance Abuse Services.

## Recommendations

The Steering Committee aims to address the three identified health issues using some targeted strategies. The Steering Committee strives to ensure sustained effort and progress towards addressing each identified issue. One method of accomplishing this task includes establishing a task force for each area. Listed below are some of the committee's recommended strategies for each of the issues.

## Education and Awareness of Existing Health Services

1. Partner with 211 and Whole Child Connection to develop strategies for increased visibility in the community regarding existing services
2. Develop marketing and education initiatives on preventable deaths (e.g., accidental overdoses, drowning)
3. Develop action plan for dissemination of available resources for pregnancy prevention for adolescents/teens, particularly among ethnic minorities
4. Partner with faith-based entities as a means for disseminating information of available resources in the community
5. Meet with state and local officials to discuss issues of health disparities

## Access to Primary Care

1. Increase the number of health screenings and wellness fairs in the community. These health fairs would target diseases that disproportionately impact ethnic minorities

## KEY ISSUES AND RECOMMENDATIONS

2. Seek grant opportunities for funding to address issues of health disparities
3. Develop strategies and proposals for acquiring interns/residents/fellows to work in Medically Underserved Areas through partnerships with Florida Community Health Centers and the Martin County Health Department
4. Obtain funding for dental services to be offered in conjunction with Florida Community Health Centers and the Martin County Health Department

## Access to Mental Health and Substance Abuse Services

1. Partner with Volunteers in Medicine Clinic to obtain funding for mental health services
2. Develop marketing and education initiatives regarding mental health concerns
3. Partner with existing mental health and substance abuse professionals, including counseling professionals in academic settings to discuss increased service provision in Martin County

## APPENDICES

## APPENDIX I

## Martin County Community Health Survey

## HEALTH INSURANCE and ACCESS TO CARE

Which of the following describes your current type of health insurance? Please check $\checkmark$ all that apply to you.


Where would you most likely go if you were sick? Please check $\checkmark$ one response


Hospital emergency room in Martin CountyYour doctor's office
Hospital emergency room outside the countyThe local health department
Nowhere-I don't have a place to go when I get sick
$\square$
Other $\qquad$

When you need to use prescription medications for an illness, do you... Please check $\checkmark$ all that apply to you.


Have your prescription filled at the drugstore or supermarket

Go without medicine

Buy over-the-counter medicine insteadUse medication of friends or family
Use leftover medication prescribed for a different illness

Use herbal remedies insteadGet medications from sources outside the countryUse pet medicines insteadGo to the hospital emergency room

## BARRIERS TO GETTING HEALTHCARE SERVICES IN YOUR COMMUNITY

Which health care services are difficult to obtain in your community? Please check $\checkmark$ all that applyAlternative therapy (herbals, acupuncture)
$\square \quad$ Family planning/birth control

Ambulance servicesSubstance abuse services-drug and alcohol
Inpatient hospital
Physical therapy, rehab therapy
Prescriptions/medications/medical suppliesVision careChiropractic careLab work
Preventive care (ex. annual check-ups)X-rays/Mammograms
Dental/oral careMental Health/Counseling
Primary care (family doctor or walk-in clinic)GYN

Emergency room careOther $\qquad$Specialty M. D. care (ex. heart doctor)

What do you feel are barriers to getting the healthcare you need? Please check $\checkmark$ all that apply

Lack of transportation
Have no regular source of healthcare
Can't pay for doctor/hospital visits
Lack of evening and week-end services
Can't find providers that accept my insurance
Afraid to have health check-up

## GENERAL HEALTH QUESTIONS

About how long has it been since you last visited a doctor for a routine checkup? Please check $\checkmark$ one.
$\square$ Within the Past Year (1 to 12 Months Ago)
Within the Past 5 Years (2 to 5 Years Ago)
Please check $\checkmark$ one.
I have had a dental exam or cleaning within the past 12 months.
I have had an eye exam within the past 12 months.
My doctor has told me that I have a long-term or chronic illness.
My doctor has told me that I need medicine to control my chronic illness.
I take the medicine my doctor tells me to take to control my chronic illness.

On a typical day, how would you rate your overall level of stress:

In general, your health is:
Please check $\checkmark$ one.
You wear a seatbelt
You wear a helmet when riding bicycle, motorcycle, or ATV
You eat at least 5 servings of fruits and vegetables each day
You exercise at a moderate pace for 30 minutes at least 4 days a week
You consume more than 3 alcoholic drinks (females) or more than 5 alcoholic drinks (males) per day

You smoke cigarettes
You chew tobacco
You are exposed to secondhand smoke at home or work
You use illegal drugs (marijuana, cocaine, etc).
You use prescription drugs in ways other than prescribed or for reasons other than prescribed by physician.

You perform self-exams for cancer (breast or testicular)
You get a flu shot each year
You feel safe in your community

Within the Past 2 Years (1 to 2 Years Ago)
5 or More Years Ago
Yes No
LOW MEDIUM HIGH


| ALWAYS | SOMETIMES | NEVER |
| :---: | :---: | :---: |
| $\square$ | $\square$ | $\square$ |
| $\square$ | $\square$ | $\square$ |
| $\square$ | $\square$ | $\square$ |
| $\square$ | $\square$ | $\square$ |
| $\square$ | $\square$ | $\square$ |
| $\square$ | $\square$ | $\square$ |
| $\square$ | $\square$ | $\square$ |
| $\square$ | $\square$ | $\square$ |
| $\square$ | $\square$ | $\square$ |
| $\square$ | $\square$ | $\square$ |
| $\square$ | $\square$ | $\square$ |
| $\square$ | $\square$ | $\square$ |
| $\square$ | $\square$ | $\square$ |

Check up to 5 of the health problems you feel are the most important in Martin County Please check $\checkmark$ up to 5


| Asthma | $\square$ |
| :--- | :--- |
| Addiction - alcohol or drug | $\square$ |
| Respiratory/ lung disease <br> (COPD, emphysema) | $\square$ |
| Mental health problems | $\square$ |
| Cancers | $\square$ |
| Child abuse/neglect | $\square$ |
| Contagious diseases (i.e. | $\square$ |
| flu, pneumonia) | $\square$ |
| Teenage pregnancy | $\square$ |

Firearm-related injuries
Heart disease \& stroke $\quad \square$
Domestic violence $\quad \square$
HIV/ AIDS/Sexually $\quad \square$
Transmitted Diseases
Infant death/ premature birth
Obesity
End of life care (nursing homes, hospice)

High blood pressure
$\square$

Environmental health, sewers, septic tanks
Smoking/tobacco use
Motor vehicle crash injuries

Dental problems
Suicide
Rape/sexual assault
Back/spinal condition
Other $\qquad$

Diabetes

## PRENATAL, POSTNATAL and CHILD HEALTH CARE

Answer questions in this section ONLY if you have children.
Yes No

For women, each time you were pregnant, did you visit physician within your first trimester?
Was there a time during the past 12 months your child needed to see a doctor but you didn't take him/her because of the cost?

## About how long has it been since your child last visited a doctor for a routine checkup?

Within the Past Year (1 to 12 Months Ago)Within the Past 2 Years (1 to 2 Years Ago)Within the Past 5 Years (2 to 5 Years Ago)
$\square \quad 5$ or More Years Ago

Where would you go if your children/dependents were sick? Please check $\checkmark$ one.Hospital emergency room in Martin CountyWe don't have a place to go when we get sickTheir doctor's office
Hospital emergency room outside the countyA school clinicOther $\qquad$
The local health department

## DEMOGRAPHICS

Please select your zip code:

| $\square$ | 33455 | $\square$ | 34958 | $\square$ |
| :--- | :--- | :--- | :--- | :--- |
| $\square$ | 33475 | $\square$ | 34990 |  |
| $\square$ | 34956 | $\square$ | 34991 | $\square$ |
| $\square$ | 34957 |  |  |  |
| $\square$ | $\square$ | 34992 |  |  |
| Your age range: |  |  |  |  |
| $\square$ | $18-24$ | $\square$ | 34996 |  |
| $\square$ | $25-34$ | $\square$ | $45-54$ | $\square$ |
| $\square$ | $\square$ | $55-64$ |  |  |
| $\square$ | $35-44$ | $\square$ | 65 or older |  |
| Sex: |  | $\square$ | Male |  |
| $\square$ | Female | $\square$ |  |  |

## Race/Ethnic Background:

$\square$ African American/Black
$\square$ Native American
Current Employment:

Full-time
Part-timeUnemployed
Self-employed
$\square$ Non-Hispanic White
$\square$ OtherHomemaker
$\square$ Retired

## APPENDIX II

## Condado Martin, Florida Encuesta de Salud Comunitaria

## Seguro de Salud y acceso a los Servicios

¿Cuál de los siguientes describe el tipo de seguro que usted tiene actualmente? Por favor use la marca $(\checkmark)$ para seleccionar todos lo que le corresponde.

| $\square$ | Seguro Privado | $\square$ | Seguro que recibe de su empleo ( por ejemplo, HMO,PPO) |
| :--- | :--- | :--- | :--- |
| $\square$ | Medicaid | $\square$ | Seguro del Gobierno ( por ejemplo VA, Champus) |
| $\square$ | Medicare | $\square$ | Suplemento de Medicare |
| $\square$ | Paga con su dinero propio | $\square$ | Cuenta especial de ahorros para gastos de salud |

No Tengo Seguro de Salud
Si no tiene seguro de salud, cual de las siguientes describe mejor la razón por la qué usted no tiene seguro:No puedo pagar seguro

## $\square \quad$ Fue negado el seguro

$\square$ Otra Razón $\qquad$

Por favor use la marca ( $\checkmark$ ) para seleccionar la respuesta que le corresponde para cada pregunta

El consultorio del médico o Clinica esta cerca de mi casa.
El consultorio del dentista o Clinica dental esta cerca de mi casa.
Sé a dónde ir para los servicios de salud mental en mi comunidad.
Sé a dónde ir para los servicios de abuso de alcohol o drogas en mi comunidad.

Sé cómo obtener servicios acerca del fin de vida o servicios de hospicio en mi comunidad.

Sé cómo conseguir ayuda para atención médica, incluyendo medicinas que no puedo pagar en mi comunidad.

| Muy de | De | Nide <br> acuerdo, ni <br> acuerdo | En <br> acuerdo | Muy en <br> en <br> desacuerdo |
| :---: | :---: | :---: | :---: | :---: |

¿Dónde iria usted si se enferma? Por favor $(\checkmark)$ seleccione la respuesta que le corresponde

Sala de Urgencias de un hospital en el Condado de
Martin

Consultorio de mi médico

Sala de Emergencias de un hospital a fuera del Condado de MartinEl departamento de salud en mi comunidad
En ninguna parte, no tengo un lugar para ir cuando me enfermoOtro $\qquad$
¿Qué hace usted cuando tiene que utilizar medicamentos recetados para una enfermedad? Por favor $(\checkmark)$ seleccione lo que le corresponde.

Compro medicamentos recetados
en la farmacia o el supermercado
Me quedo sin medicamentos

Compro medicamentos sin recetaUso los medicamentos de los amigos o la
familia
Uso medicamentos sobrantes prescrito para una enfermedad diferente

Uso medicinas naturales

Obtengo medicamentos afuera del país
$\square$ Uso medicamentos para animales
Voy a la sala de urgencias de un hospital

## DIFFICULTADES QUE LE IMPIDEN RECIBIR SERVICIOS DE SALUD EN SU COMMUNIDAD

¿Qué servicios de salud son difíciles de obtener en su comunidad? Por favor $(\checkmark)$ seleccione lo que le corresponde.

Terapia alternativa (hierbas, acupuntura)

Servicios de ambulancia
Terapia física, terapia de rehabilitación
Recetas/medicamentos/suministros médicos

Servicios de quiropráctica
Atención medical preventiva (por ejemplo, chequeos anuales)
Servicios de dentista
Atención medica primaria (médico de familia o clínica ambulatoria)
Atención en la sala emergencia

Atención de un especialista (por ejemplo, Cardiólogo)
$\square$ Planificación familiar
$\square \quad$ Servicios por abuso de drogas o alcohol
Hospitalización
Cuidado de visión
Servicios de laboratorio

Los rayos X /Las mamografías
Salud Mental / Consejería
Servicios de ginecología
Otro $\qquad$
¿Qué cree usted que son obstáculos para conseguir la atención médica que necesita? Por favor $(\checkmark)$ seleccione la que le corresponde.

La falta de servicios de transporte
No tengo dinero o recursos para obtener atención médica No puedo pagar por las visitas al médico y los servicios del hospital
No hay servicios medicos durante la noche o los fines de semana
No se puede encontrar atención médica que acepte mi seguro
Tengo miedo de hacer chequeos de saludNo sé qué tipo de servicios están disponiblesLas esperas son largas para las citas medicas
No nos gusta aceptar la ayuda del gobierno
La información de salud no esta mantenida confidencialmente
No tengo ninguna barrera para obtener atención médica

## PREGUNTAS GENERALES DE SALUD

¿Cuánto tiempo ha pasado desde su última visita al médico para un chequeo medico ordinario? Por favor ( $\checkmark$ ) seleccione todo lo que le corresponde.En el último año (1 a 12 meses)En los últimos 2 años (1 a 2 años)
En los últimos 5 años (2 o 5 años)
50 más años
Por favor $(\checkmark)$ seleccione la respuesta que le corresponde.

He tenido un examen dental o la limpieza de dientes en los últimos 12 meses.
He tenido un examen de la vista en los últimos 12 meses.
Mi médico me ha dicho que tengo una enfermedad crónica de larga duración.
Mi médico me ha dicho que necesito un medicamento para controlar mi enfermedad crónica.

Me tome el medicamento prescrito por mi médico para controlar mi enfermedad crónica.

En un día típico, ¿cómo calificaría su nivel global de estrés?

En general, su salud es:
Por favor $(\checkmark)$ seleccione la respuesta que le corresponde.
Usted usa el cinturón de seguridad
Usted lleva puesto un casco al montar en bicicleta, motocicleta o ATV
Usted come por lo menos 5 porciones de frutas y verduras cada día
Usted hace ejercicio a un ritmo moderado durante 30 minutos por lo menos 4 días a la semana
Usted consume más de 3 bebidas alcohólicas (mujeres) o más de 5 bebidas alcohólicas (hombres) por día

Usted fuma cigarrillos
Usted masca tabaco
Usted está expuesto al humo de tabaco en el hogar o el trabajo
Usted utiliza drogas ilegales (marihuana, cocaína, etc.)

Usted utiliza los medicamentos recetados de manera que no sea prescrito o por otras razones que lo recetó el médico.

Usted hace auto-exámen contra el cáncer ( de pecho o testicular)
Usted recibe una vacuna contra la gripe cada año
Usted se siente seguro en su comunidad
Seleccione hasta 5 de los problemas de salud que usted piensa son los más importantes en el Condado Martin. Por favor $(\checkmark)$ seleccione hasta 5 problemas.

| $\square$ | Asma | $\square$ | Heridas por armas de fuego | $\square$ |
| :--- | :--- | :--- | :--- | :--- | Salud ambiental, alcantarillas, fosas sépticas

Diabetes

## SALUD PRENATAL, POSNATAL Y DEL NIÑO

Responda a las preguntas de esta sección SÓLO si usted tiene niños.
Para las mujeres, cada vez que estaba embarazada, ¿fue usted al médico durante su primer trimestre de embarazo?
¿Hubo un momento durante los últimos 12 meses que su hijo o hija necesitó ver a un médico pero usted no lo llevó por razónes de costo?
¿Acerca de cuánto tiempo ha pasado desde que su hijo visitaron por última vez un médico para un chequeo de rutinario?En el último año (1 a 12 meses)En los últimos 2 años (1 a 2 años)En los últimos 5 años (2 05 años) $\square$ 50 más años
¿Dónde iria usted si sus hijos o dependientes estaban enfermos? Por favor $(\checkmark)$ seleccione SÓLO una respuesta.
Sala de Urgencias en el Contado Martin $\quad \square \quad$ No tenemos un lugar para ir cuando nos enfermamosEl Consultorio de su médico
Sala de Urgencias a fuera del ContadoUna clínica de la escuelaOtro $\qquad$
El departamento de salud en mi comunidad

## DEMOGRAFÍA

| Por favor seleccione su código postal: |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\square$ | 33455 | $\square$ | 34958 | $\square$ |  |  |  |
| 34994 |  |  |  |  |  |  |  |
| $\square$ | 33475 | $\square$ | 34990 | $\square$ |  |  |  | 344995

## Por favor seleccione su edad:

| $\square$ | $18-24$ | $\square$ | $45-54$ |
| :--- | :--- | :--- | :--- |
| $\square$ | $25-34$ | $\square$ | $55-64$ |
| $\square$ | $35-44$ | $\square$ | 65 años o más |

## Sexo:

MujerHombre

Raza o Origen étnico:
$\square$ Africano Americano/Negro
$\square$ Indio Americano

## Empleo actual:

Empleo a tiempo completoEmpleo a tiempo parcial

Desempleado
Trabajo por su cuenta

Blanco (que no es Latino o Hispano) Otro

## APPENDIX III

## Martin County Focus Group Questions

To begin, we're going to discuss your opinions regarding the quality of life in your community.

1. What are your opinions regarding whether or not this is a good place to raise children.
a. School quality
b. Day care
c. After school care
d. Recreation
e. Environment
2. Please share your opinions regarding this community as a good place to grow old.
a. Elder friendly housing
c. Churches
d. Shopping
e. Elder day care
f. Social support organizations and agencies
g. Services and activities
3. What are your views regarding economic opportunity in the community?
a. Locally owned and operated businesses
b. Jobs with career growth and job training
c. Higher education opportunities
d. Affordable housing options
e. Reasonable commute
4. What are your opinions about your community as a safe place to live?
a. Safety in the home
b. Workplace
c. Schools and playgrounds
d. Parks
e. Do the neighbors know each other and look out for one another?

Now that we've discussed your views about the quality of life in Martin County, we'd like to hear your opinions about access to health and social services.
5. To begin, please discuss whether or not there is a network of available health and social services to support individuals and families during times of stress and need.
a. Medical crisis
b. Mental health and substance abuse
c. Pregnancy
d. Financial
e. Death
f. Services for individuals with disabilities
g. Housing, Services for the homeless
6. Please discuss your level of satisfaction with the health care system in your community.
a. Cost
b. Quality
c. Options
d. Prescription drugs
e. Health insurance for adults under age 65
7. What health services (physical, mental, substance abuse) do you need that are not currently available to you?
8. What is your awareness of the public health services that are available in Martin County? (e.g. Martin County Health Department, Volunteers in Medicine Clinic, school health services, others)
9. What kinds of health programs would you like to see developed in Martin County?
10. What kinds of transportation services do Martin County residents need to be able to access health care, education, and employment?
11. Please share your views regarding how change behaviors in your community to prevent problems related to:

- Substance Abuse
- Obesity
- Tobacco

12. Finally, is there anything else you would like to add about the quality of life or the quality or availability health and social services in your community?

## APPENDIX IV

## Martin County Resource List

While the list below is extensive, it may not be comprehensive; there may be other organizations that provide these services in Martin County.

## General Practice

Martin County Health Department
Volunteers in Medicine Clinic
Florida Community Health Center
Christian Community Care Dental/Medical Clinic
New Horizons of the Treasure Coast, Inc.

Other Primary Care Resources
Health Care Services

Medical Resourses, LLC
Medmark Services Inc.
Palm Beach Pain Consultants
Radiology Imaging Associates
Stuart Diagnostics Center LLC The Clinic at Sandhill Cove
Treasure Coast Sleep Disorders LLC Treasure Coast Ultrasound, Inc.
Wellmed at South Stuart Port St Lucie Children's HC St Lucie Womens \& Children's Ctr

3441 SE Willoughby Blvd., Stuart, FL 34997 772-221-4030
417 Balboa Ave., Stuart FL 34994 772-463-4128
16008 SW 153rd Ave., Indiantown, FL 34956 772-597-3597

3337 SE Salerno Rd., Stuart FL 34997 772-283-4400

1111 SW Federal Hwy., Stuart, FL 34994 772-221-4088

931 SE Ocean Blvd, Stuart, FL 34994
1109 NE Jensen Beach Blvd, Jensen Beach FL 34957

772-232-1156
35001 SE Willoughby Blvd, Stuart, FL 34997 772-288-0304
111 South Federal Hwy, Stuart, FL 34994 561-833-0882
835 SE Osceola St., Stuart, FL 34994 772-283-3331
2219 SE Ocean Blvd, Stuart, FL 34996 772-600-1720
1600 SW Capri St., Palm City , FL 34990 772-419-2789
1380 NW Federal Hwy, Stuart, FL 34994 772-232-9990
1998 SW Autumnwood Way, Palm City, FL 34990 772-979-5652
6100 S Federal Hwy, Stuart, FL 34997 772-807-8662
1701 SE Hillmoor, Ste 19, Port St Lucie, FL 34952 772-335-8455
1871 SE Tiffany Ave., Ste 200, Port St Lucie, FL 34952

## Oral Health

Florida Community Health Center
Martin County Health Department
Christian Community Center
Dental/Medical Clinic

Three Palms Center
Dental Arts of Jupiter
Francis DuCoin, DMD
Florida Dental
Sugar Hill Dental Care

16008 SW 153rd St., Indiantown, FL 34956
3441 SW Willoughby Blvd., Stuart, FL 34997

3337 SE Salerno Rd., Stuart, FL 34997

2151 Alternate A1A S., Ste 1300, Jupiter, FL 33477
561-575-5599
1001 Indiantown, Ste 106, Jupiter, FL 33458
561-747-7111
800 E Ocean Blvd., Stuart, FL 34994
772-287-6159

3380 NE Sugarhill Ave., Jensen Beach. FL 34957

772-597-3597
772-221-4030

772-283-4440

772-334-3653

| Mental Health Treatment |  |  |
| :---: | :---: | :---: |
| New Horizons of the Treasure Coast, |  |  |
| Inc. | 111 SW Federal Hwy., Stuart, FL 34994 | 772-221-4088 |
| Bayview Healthcare Inc | 707 E Osceola St., Stuart, FL 34994 | 561-219-9296 |
| Tykes and Teens | 3577 SW Corporate Parkway, Palm City, FL 34990 | 772-220-3439 |
| Martin County Health \& Human |  |  |
| Services | 435 SE Flager Avenue, Stuart, FL 34994 | 772-288-5785 |
| Substance Abuse Treatment |  |  |
| New Horizons of the Treasure Coast, |  |  |
| Inc | 1111 SE Federal hwy., Stuart, FL 34994 | 772-221-4088 |
| Adap Counseling Services | 959 SE Central Pkwy., Stuart, FL 34994 | 772-286-8933 |
| Carp Case Management | 900 E Ocean Blvd., Ste C, Stuart, FL 34994 | 772-223-8540 |
| Counseling \& Evaluation Services Kathairein Center for Human | 117 SE Martin Luther King Blvd., Stuart, FL 34994 | 772-220-0611 |
| Development | 950 SE Central Pkwy., Stuart, FL 34994 | 772-879-7777 |
| Serenity Counseling Services | 500 NW Dixie Hwy., Ste 102, Stuart, FL 34994 | 772-692-8585 |
| Tykes and Teens | 3577 SW Corporate Parkway, Palm City, FL 34990 | 772-220-3439 |
| Martin County Health \& Human |  |  |
| Services | 435 SE Flager Avenue, Stuart, FL 34994 | 772-288-5785 |
| Hospitals |  |  |
| Veterans Services of Martin County | 435 SE Flagler Ave., Stuart, FL 34994 | 772-288-5448 |
| Martin Memorial Hospital South | 2100 SW Salerno Rd., Stuart, FL 34997 | 772-223-2300 |
| Martin Memorial Medical Center | 200 SE Hospital Ave., Stuart, FL 34994 | 772-287-5200 |
| Home Health Services |  |  |
| Allied Home Care, Inc. | 3341 NW Main Ave, Jensen Beach, FL 34957 | 772-692-7282 |
| Aloha Home Care, LLC | 2690 SE Willoughby Blvd., Stuart, FL 34994 | 772-283-2247 |
| Always Best Care Senior Services | 9002 SE Bridge Rd., Ste 5, Hobe Sound, FL 33455 | 772-205-3825 |
| Ambassador Health Services, Inc. | 8900 SE Robwyn St., Hobe Sound, FL 33455 | 561-498-2743 |
| Anchor Home Health Services, LLC | 3725 SW Ocean Blvd., Ste 206, Stuart, FL 34996 | 772-463-6016 |
|  | 901 SW Martin Downs Blvd., Ste 313, Palm City, |  |
| Coastal Home Health Services, Inc. | FL 34990 | 772-600-2648 |
|  | 630 NE Jensen Beach, Unit 630, Jensen Beach, FL |  |
| Conficare Home Health Solutions | 34957 | 772-225-5474 |
| K \& D Home Health Care Corp | 2440 SE Federal Hwy., Ste U, Stuart, FL 34994 | 772-283-7464 |
| Life Care Home Health Services Corp | 10 SE Central Pkwy., Ste. 307, Stuart, FL 34994 | 772-288-7386 |
| Mega Nursing Services, Inc. | 5534 S Kanner Hwy., Stuart, FL 34994 | 561-840-6566 |
| Nightingale Private Care, Inc. | 8882 SE Bridge Rd., Hobe Sound, FL 33455 | 772-245-8390 |
| Visiting Nurse Association of Florida, Inc. | 2400 SE Monterey Rd., Ste 300, Stuart FL 34996 | 772-286-1844 |


|  | Adult Day Care |  |
| :--- | :--- | :--- |
| Jumrattan Rahaman | 1427 Cedar St., Jensen Beach, FL 34957 | $772-334-3921$ |
| The Hospice of Martin \& St. Lucie Inc | 1201 Southeast Indian St., Stuart, FL 34997 | $772-403-4500$ |
| Council on Aging of Martin County | 1071 SE 10 ${ }^{\text {th }}$ Street, Stuart, FL 34996 | $772-223-7800$ |
| Alzheimer's Community Care (North $2200 ~ N ~ F e d e r a l ~ H w y ., ~ S t u a r t, ~ F L ~ 34994 ~$ | $772-692-6981$ |  |
| Stuart) | 3110 SE Aster Lane, Stuart, FL 34994 | $772-220-2773$ |


|  | Assisted Living Facilities |  |
| :--- | :--- | :--- |
| Amore' Demtia Care | 1634 S Kanner Hwy, Stuart, FL 34994 | $772-219-8989$ |
| Emeritus at Jensen Beach | 1700 NE Indian River Dr., Jensen Beach 34957 | $772-225-1355$ |
| Family Manors, LLC | 3385 SE Evergreen St., Stuart, FL 34997 | $772-288-4781$ |
| Gardens Retreat Inc | 4405 SW 72nd Ave., Palm City, FL 34990 | $772-287-9713$ |
| Maple Leaf Assisted Living | 24 Mead PL., Stuart, FL 34997 | $772-781-6249$ |
| Pine Grove Manor | 9555 SE Federal Highway, Hobe Sound, FL |  |
| Place at Stuart | 33455 | $561-546-9142$ |
| Seagull Ranch | 860 SE Central Highway, Stuart, FL 34994 | $772-287-9909$ |
| Sterling House of Stuart | 9601 Fox Brown Rd., Indiantown, FL 34956 | $772-597-4004$ |
| Water's Edge Extended Care | 3401 Aster Ln., Stuart, FL 34997 | $772-287-6601$ |
|  | 1500 SW Capri St., Palm City, FL 34990 | $772-223-5863$ |
|  |  |  |
| Surgery Center of Stuart | Ambulatory Surgical Centers |  |
| The Surgery Center at Jensen Beach | 3096 SE Ocean Blvd., Sutart FL 34996 | $772-223-0174$ |
| Treasure Coast Center for Surgery | 1411 SE Ocean Blvd., Stuart, FL 34996 | $772-497-0020$ |
| Water's Edge Surgery Center | 201 SE Osceola St., Stuart, FL 34994 | $772-286-9000$ |

## Homemakers and Companion Service Companies

Above \& Beyond Quality Care Inc Accessible Home Care of Treasure Coast
Acorn Elder Care
Angels on Call
Council on Aging of Martin County
Helping Hands, Inc
K \& D Home Services
Linda Keddy Services, Inc.
Senior Home Campanions, Inc.
Senior Solutions of the Treasure
Coast, Inc.
Martin County Health Assessment
8606 SE Aurora Way, Hobe Sound, FL 33455
772-324-1790

2440 SW Federal HWY, Stuart, FL 34994
772-220-3880
615 SW St. Lucie Crescent, Stuart, FL 34994 772-221-1698
9164 SE Hawks Nest CT., Hobe Sound, FL 33455 772-634-1438
1071 E 10th St., Stuart, FL 34996 772-223-7800
513 SW Camden Ave., Stuart, FL 34994 772-219-7575
2440 SE Federal Hwy., Ste 100, Stuart, FL 34994 772-283-7464
5275 Channel Dr., Stuart, FL 34997 772-287-8583
6466 SE Windsong Ln., Stuart, FL 34997 772-781-0083

3388 NE Sugarhill Ave., Jensen Beach, FL 34957 772-334-0424

## APPENDIX IV

Serenity Living
Sunshine State Senior Services, Inc.
Tendercare Services
The Arc of Martin County, Inc.
Totally Inclusive, Inc.
Treasure Coast Companion Service

| 941 SE Forrest Park Dr., Stuart, FL 34994 | $772-201-2238$ |
| :--- | :--- |
| 941 SE Clairmont PI., Hobe Sound, FL 33455 | $772-219-0192$ |
| 641 SE Central Pkwy., Stuart, FL 34994 | $772-220-3090$ |
| 2001 S Kanner Hwy., Stuart, FL 34994 | $772-283-2525$ |
| 9663 SE Gleason St., Hobe Sound, FL 33455 | $772-546-8614$ |
| 921 SE Hall St., Stuart, FL 34994 | $561-741-4877$ |

All information contained in this report is believed to be accurate and was current at the time of the report.

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"••"
www.qqresearchconsultants.com


[^0]:    ${ }^{1}{ }^{1}$ University of Wisconsin Population Health Institute. (2010). County Health Rankings 2010. Retrieved from www.countyhealthrankings.com

[^1]:    ${ }^{3}$ Lantz, P. M., House, J. S., Lepowski, J. M., Williams, D. R., Mero, R.P., \& Chen J. (1998). Socioeconomic factors, health behaviors, and mortality. Journal of the American Medical Association, 279, 1703-1708.
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[^2]:    ${ }^{5}$ Labor Market Statistics, Local Area Unemployment Statistics Program
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[^3]:    ${ }^{6}$ United States Census Bureau. (2009). American Community Survey. U.S. Government Printing Office: Washington, DC.

[^4]:    ${ }^{7}$ University of Wisconsin Population Health Institute. (2010). County Health Rankings 2010. Retrieved from www.countyhealthrankings.com

[^5]:    ${ }^{8}$ Florida Charts: www.floridacharts.com

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