









# Holmes County, Florida Community Health Assessment 2016

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# Letter to the Community





February 26, 2016

Dear Residents of Holmes County:

Community health assessments (CHAs) provide information for problem and asset identification and policy formulation, implementation, and evaluation according to the National Association of County and City Health Officials (NACCHO). The CHA provides a snapshot in time of the community strengths, needs, and priorities. This CHA has been a collaborative process involving many community partners to identify strengths, capacity, and opportunity to better address the many determinants of health. Improving the health of the community is critical to enhancing Holmes County residents' quality of life and supporting its future prosperity and well-being.

We would like to thank all of the citizens and community organizations that assisted in the development of this CHA. We also look forward to sharing this data with the public. To begin moving forward with next steps of implementation through a community health improvement plan (CHIP) will further our goal of becoming the healthiest county in Florida.

Sincerely,

Karen Johnson, A.R.N.P. Health Officer Florida Department of Health Holmes

JoAnn Baker Administrator Doctors Memorial Hospital

# **Executive Summary**

The Florida Department of Health in Holmes County, Doctors Memorial Hospital, the Health Planning Council of Northeast Florida, and the Big Bend Health Council spearheaded an initiative to conduct a comprehensive, county-wide health needs assessment. The purpose of this assessment is to provide primary and secondary data to educate and mobilize the Holmes County community, develop priorities, garner resources, and plan actions to improve the public's health.

The Healthy Holmes Task Force (HHTF), comprised of community leaders from local medical and behavioral health providers, social service agencies, civic organizations, and minority and faith-based groups, convened to: (1) review the outcomes of the 2013 health needs assessment; and (2) launch the 2016 county-wide assessment of the overall health status and priority health issues facing Holmes County residents.

Information collected during the needs assessment process was presented to the Healthy Holmes Task Force during community meetings held at Doctors Memorial Hospital in Holmes County from November 2015 to January 2016. Data for Holmes County's community health assessment was collected for several broad categories: socioeconomic conditions, characteristics of the physical environment, health outcomes, health behaviors, and access to health resources for county residents. The data included chronic disease death rates; infectious disease rates; housing, commuting, and food environment characteristics; prevalence of risky health behaviors; maternal and child health indicators; hospital utilization; and availability of physicians and health resources.

Two focus groups were held to obtain input from Holmes County residents and stakeholders. Additionally, more than 300 Holmes County stakeholders completed a survey on the health status and needs of the Holmes community. The focus groups and community survey identified several priority health issues. The focus groups identified the following as key health issues: Substance Abuse, Diabetes, Obesity, Poor Diet/Nutrition, and Mental Health. The community survey identified the following as key health issues: Substance Abuse, Cancers, Obesity, Diabetes, and High Blood Pressure. Additionally, County Health Rankings from the Robert Wood Johnson Foundation were used to assess how Holmes County compares to other Florida counties on a number of health factors and outcomes.

To further narrow down these priorities to the top three focus areas, input was sought from the community through a Healthy Holmes Task Force meeting on January 28, 2016. Invitations were sent via e-mail to several community stakeholders. During this meeting, the HHTF discussed the current findings of the assessment. Then, feedback was requested from the community: "Of all the issues discussed today, which do you think is the most important?" The poll produced the following priority health issues:

- 1. Healthy Lifestyle/Prevention (e.g., Obesity, Poor Nutrition/Unhealthy Eating, Tobacco Use)
- 2. Substance Abuse/Mental Health
- 3. Chronic Disease Prevention (e.g., Diabetes, Heart Disease, High Blood Pressure)

Using the information and priorities included in this assessment, health partners can identify areas where targeted interventions and policy changes may have the greatest impact. Once key strategies have been chosen based on level of impact, as well as the community's ability to implement, the health improvement process can begin. From there, steps will be taken to move toward a healthier Holmes County.

# Introduction

In the fall of 2015, leaders from the Florida Department of Health in Holmes County (FDOH-Holmes) and Doctors Memorial Hospital (DMH) came together to launch a county-wide assessment of the overall health status and priority health issues facing Holmes County residents. The Health Planning Council of Northeast Florida and the Big Bend Health Council guided and facilitated the process.

The Healthy Holmes Task Force (HHTF) invited several key healthcare and community stakeholders to participate in the assessment by representing the needs of their clients, constituents, and communities. Collectively, more than 30 community leaders contributed to the process by attending at least one Task Force meeting, and more than 350 residents and stakeholders contributed to the assessment through participation in focus group discussions and a community survey.

The HHTF elected to utilize the **"MAPP"** community assessment model, as recommended by the Florida Department of Health as well as the National Association of County and City Health Officials (NACCHO). **MAPP** is an acronym for **"Mobilization for Action through Planning and Partnership,"** and is a community-based participatory model that relies on the existing expertise of community representatives to identify, prioritize, and collectively address the county's most prevalent health concerns. This type of county-wide health assessment was last completed in Holmes during 2013, and it is recommended to re-occur every three to five years.

The Healthy Holmes Task Force included representatives from local medical and behavioral health providers, social service agencies, civic organizations, minority and faith-based groups, and other key community stakeholders. Information collected during the needs assessment process was presented to the task force members at community meetings held at Doctors Memorial Hospital in Holmes County from November 2015 to January 2016.

Components of Holmes County's health assessment included an analysis of available demographic data, health statistics, and healthcare access indicators for county residents. Community input was obtained from two focus group discussions among community members and stakeholders. Additionally, a community survey was distributed throughout the community in an effort to collect opinions on healthcare services, quality of life issues, and the health status of Holmes County's population. Detailed information summarizing each of these components is included in this report.

During the final community meeting, members of the HHTF, along with other community members, made recommendations regarding the key health issues utilizing a summary of the data and information obtained through the four integrated assessments outlined in the MAPP model (Figure 1). The final section of this report includes a summary of the recommendations on Holmes County's priority health issues.

This assessment is the product of a collective and collaborative effort from a variety of dedicated health and social service providers along with other invaluable community stakeholders from across all regions of Holmes County. It is recommended that the findings from this community health assessment guide health and social service providers in the county in their program development efforts over the next three to five years.

# Methodology

The Florida Department of Health recommends the implementation of evidence-based and effective assessment models such as the National Association of County and City Health Officials' (NACCHO's) *Mobilizing for Action through Planning and Partnerships (MAPP)* model for community health planning. This

model was developed to provide a strategic approach to community health improvement by helping communities to identify and use existing resources wisely, consider unique local conditions and needs, and form effective partnerships for action.<sup>1</sup> The model includes six distinct phases (Figure 1):

- **1.** Partnership development and organizing for success
- **2.** Visioning
- **3.** The Four MAPP assessments
  - Community Health Status Assessment
  - Community Strength and Themes Assessment
  - Local Public Health System Assessment
  - Forces of Change Assessment
- **4.** Identifying strategic issues
- **5.** Formulating goals and strategies
- 6. Action (program planning, implementation, and evaluation)

#### FIGURE 1. THE MAPP MODEL



Holmes County is fortunate to have long-standing, proactive leadership within its healthcare network who strongly value solid and collaborative relationships with other health and support service providers throughout the community. The Florida Department of Health in Holmes County (FDOH-Holmes) maintains strong ongoing relationships with multiple health and social services providers locally. FDOH-Holmes invited the ongoing HHTF group to act as a platform and steering committee for this Community Health Assessment (CHA) process.

<sup>&</sup>lt;sup>1</sup> National Association of City and County Health Officials, 2012

The HHTF came together for the assessment introduction meeting in November 2015. In this meeting, the Health Planning Council of Northeast Florida (HPCNEF) staff provided an introduction to the project and highlighted the expected outcomes and benefits of the CHA process. Emphasis was placed on the *community-driven* nature of the health assessment process, meaning members of the HHTF would be charged with developing the county's health priorities and proposing strategies to address them. Members were also provided with a complete overview of the MAPP assessment process, a preliminary timeline of when each component should occur, and guidance on how they could most effectively contribute to the process.

This introductory meeting also involved presenting and discussing the proposed data obtained through the recommended *Health Status Assessment*, the first of the four MAPP assessments. The discussion incorporated an analysis of population demographics and socioeconomic indicators, disease and death rates, healthcare utilization statistics, and access to healthcare indicators. The data was provided in two primary formats: (1) trend diagrams showing changes over time using 3-year rolling averages; and (2) diagrams comparing different populations. The members also suggested the use of relevant findings from the county's most recent Behavioral Risk Factor Surveillance Survey (BRFSS) and County Health Rankings be used in the CHA document. Some members requested some specific data to help support and/or disprove speculations.

Wider community input was sought during December 2015 through the *Community Strengths and Themes Assessment* that included a community survey and targeted focus group discussions across the county. The community survey was distributed throughout the county via paper copies and online through a link to the survey website. A total of 345 surveys were collected. Two focus groups were held, one at the Holmes County Public Library and one at Doctors Memorial Hospital, both in Bonifay, FL. The results from the focus groups and community survey were compiled and analyzed by Health Planning Council staff, then presented to the HHTF for further discussion.

Utilizing guidance provided by the U.S. Centers for Disease Control and Prevention (CDC) under the National Public Health Performance Standards Program (NPHPSP), the HHTF members completed a *Local Public Health System Assessment* in December 2015 via an online survey. The members first reviewed the composition of the county's public health safety-net to include all entities that serve the county's most vulnerable residents. The HHTF members ranked each of the *10 Essential Public Health Services* as outlined by the CDC. Strengths and gaps in the county's healthcare safety net and public health system were identified in this way, and were subsequently considered throughout the remainder of the planning process.

Information was also considered regarding current and expected *Forces of Change* in the county, such as recent and predicted economic conditions, changing and emerging community cultural characteristics, and policy changes or shifts affecting community and organizational capacity and resources. The Task Force members participated in an online assessment to identify the *Forces of Change* at work in Holmes County that could potentially impact the health of residents, whether it be in a positive or negative way. The members categorized local, state, and national "forces" into three distinct categories:

- <u>Trends</u> are patterns over time, such as migration in and out of a community or a growing disillusionment with government.
- <u>Factors</u> are discrete elements, such as a community's large ethnic population, an urban setting, or a jurisdiction's proximity to a major waterway.
- Events are one-time occurrences, such as a hospital closure, a natural disaster, or the passage of new legislation.

Additionally, the members were asked to consider trends, factors, and events related to a wide variety of perspectives including:

- Social
- Economic
- Government/Political
- Community
- Environmental
- Educational
- Science/Technology
- Ethical/Legal

Significant key issues and themes were recorded and updated throughout the process based on empirical evidence and community discussion. Key issues were then consolidated and prioritized based on the scope and severity of need, as well as resource availability.

With the qualitative and quantitative data collected and analyzed from all four MAPP assessments, the next stage in the process is to identify priority health issues. During this phase of the process, an ordered list of the most important issues facing the community is created. This prioritization activity was completed with community input through a preliminary results release meeting on January 28, 2016, as well as through community surveys following the meeting. During this preliminary results meeting and survey, the current findings of the assessment were discussed. Then, feedback was requested from the community: "Of all the issues discussed today, which do you think is the most important?" This narrowed Holmes County health priorities to three, which will be used as cornerstones for the health improvement plan.

#### **County Health Rankings**

The University of Wisconsin and the Robert Wood Johnson Foundation release yearly *County Health Rankings*, a synthesis of health data and information used to rank the overall health of counties in every state across the country.<sup>2</sup>

The rankings use mostly publicly available data, including vital statistics, sexually transmitted infection rates, Behavioral Risk Factor Surveillance System (BRFSS) survey data, and measures of healthcare quality from the Dartmouth Institute. The rankings are based on a model that includes Health Outcomes and Health Factors. Health Factors are determinants of health, such as individual behavior and the environment in which people live. Health Factors and Health Outcomes are further broken down into components and subcomponents called Focus Areas. Weights and measures of each component were selected based on literature review, feedback from experts, quality of data, and modifiability of factors at the community level. Counties can improve health outcomes by addressing all health factors with effective, evidence-based programs and policies.<sup>3</sup>

Health Outcomes are based on two main components – Length of Life and Quality of Life – which each have subcomponents. Length of Life examines premature death within the community. Quality of Life includes indicators such as people in poor or fair health, poor physical and mental health days, and low birthweight.

<sup>&</sup>lt;sup>2</sup> Robert Wood Johnson Foundation. (2016). *Ranking Methods*. Retrieved from County Health Rankings and Roadmaps: http://www.countyhealthrankings.org/ranking-methods

<sup>&</sup>lt;sup>3</sup> Robert Wood Johnson Foundation. (2016). Ranking System. Retrieved from County Health Rankings and Roadmaps:

http://www.countyhealthrankings.org/ranking-methods/ranking-system

Health Factors rankings are based on four types of factors: Behavioral, Clinical, Social/Economic, and Environmental. Health Behaviors include: smoking, obesity, food environment, physical inactivity, access to exercise opportunities, excessive drinking, alcohol-impaired driving deaths, STIs, and teen births. Clinical Care includes indicators such as: uninsured population, primary care physicians, dentists, mental health providers, preventable hospital stays, diabetic monitoring, and mammography screening. Social and Economic factors include: education level, unemployment, children in poverty, income inequality, children in single-parent households, social associations, violent crime, and injury deaths. Lastly, Physical Environment includes: air pollution (particulate matter), drinking water violations, severe housing problems, and work commute.<sup>4</sup>

Florida counties are ranked from 1-67 according to their summary measures of Health Outcomes and Health Factors. Overall, in 2015, Holmes County ranked 55<sup>th</sup> among Florida's 67 counties for Health Outcomes and 47<sup>th</sup> for Health Factors. There were significant differences, however, when examining the individual rankings of the components considered for the Health Outcomes and Health Factors scores. Figure 2 shows the components of the County Health Ranking scores, along with the corresponding rank for Holmes County, from 2012-2015.

Component	2012 Rank	2013 Rank	2014 Rank	2015 Rank
Health Outcomes	54	52	51	55
Length of Life	65	62	62	64
Quality of Life	20	28	32	31
Health Factors	50	45	46	47
Health Behaviors	49	45	37	39
Clinical Care	62	62	62	64
Social and Economic	26	29	33	39
Physical Environment	53	54	38	47

#### FIGURE 2. COUNTY HEALTH RANKINGS FOR HOLMES COUNTY, FL, 2012-2015

<sup>&</sup>lt;sup>4</sup> Robert Wood Johnson Foundation. (2016). Ranking System.

# Social & Economic Environment

The socioeconomic characteristics of a community – including age, gender, racial and ethnic background, education, and economic characteristics – influence the community's healthcare needs and the design of service delivery to meet those needs. This section provides an overview of the demographics and socioeconomic characteristics of Holmes County in comparison to Florida.

# Geography & Background

Holmes County encompasses approximately 479 square miles of northwest Florida along the Florida-Alabama border. Holmes has a population density of 41.6 persons per square mile, compared to 350.6 persons per square mile in Florida and 87.4 in the United States.<sup>5</sup> The county seat is Bonifay, located in the southeastern quadrant of the county. Holmes County is bordered by Jackson County, FL to the east, Washington County, FL to the south, Walton County, FL to the west, and Geneva County, AL to the north. Figure 3 highlights Holmes County in green, showing the county's location within Florida.

FIGURE 3. HOLMES COUNTY LOCATION MAP



Source: Florida Center for Instructional Technology, Tampa, FL, 2008

<sup>&</sup>lt;sup>5</sup> U.S. Census Bureau QuickFacts; Holmes County, Florida, and the United States

# Asset Mapping

Figure 4 shows the distribution of municipal resources in Holmes County. Fire stations and schools are spread throughout the county, while health department, law enforcement, emergency management, and hospital facilities are concentrated in the city of Bonifay, located in the southeast corner of the county. Figure 5 shows the distribution of recreational resources, such as parks, public pools, and conservation lands, within Holmes County.

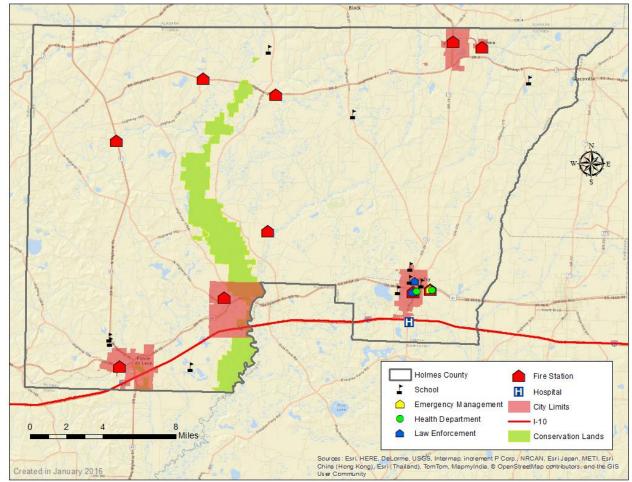


FIGURE 4. MUNICIPAL RESOURCES IN HOLMES COUNTY, FL

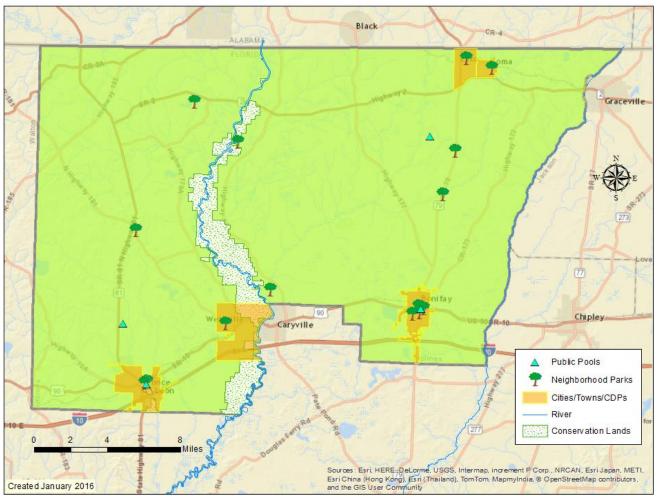
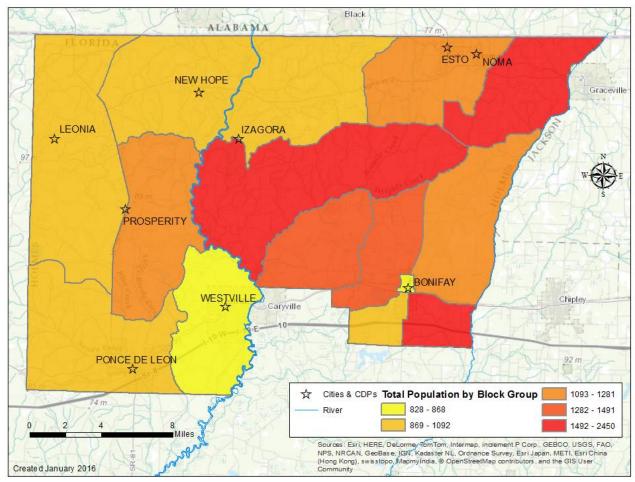


FIGURE 5. RECREATIONAL RESOURCES IN HOLMES COUNTY, FL

# Population Characteristics

# Total Population & Population Growth

Holmes County has a total population of 19,741 persons, while Florida has a population of 19,361,792.<sup>6</sup> From 2010-2014, the population growth rate in Holmes County was -1.4 percent, compared to a growth rate of 4.1 percent in the U.S. and 7.8 percent in Florida.<sup>7</sup> The map below shows population density by census block group in Holmes County, Florida. Areas in red are more densely populated, while areas in yellow are less densely populated (Figure 6).



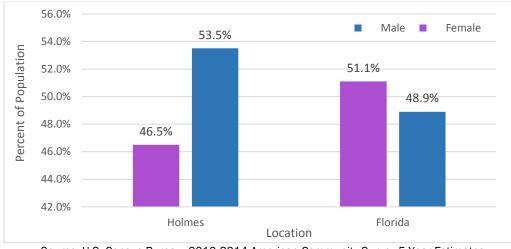


<sup>&</sup>lt;sup>6</sup> U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates, Table DP05

<sup>&</sup>lt;sup>7</sup> U.S. Census Bureau QuickFacts; Holmes County, Florida, and the United States

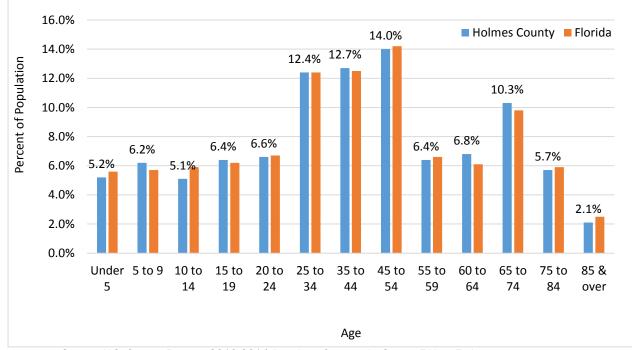
### Sex & Age

Holmes County's population is 53.5% male and 46.5% female, which differs from the state average of 49% male and 51% female (Figure 7). With a median age of 42.1 years, Holmes County has a similar age composition to the state of Florida (median age: 41.2 years).<sup>8</sup> Holmes County has a greater proportion of its population in the 60-74 age group and a smaller portion in the 10-14 age group in comparison to Florida (Figure 8).





Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates



#### FIGURE 8. POPULATION BY AGE GROUP, HOLMES COUNTY & FLORIDA, 2010-2014

Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates

<sup>8</sup> U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates, Table DP05

# Race & Ethnicity

The population of Holmes County is less diverse than the state of Florida's population. Approximately 89% of people in Holmes County are white in comparison to 76% of Floridians (Figure 9). Additionally, less than 3% of Holmes County residents are Hispanic or Latino (Figure 10).

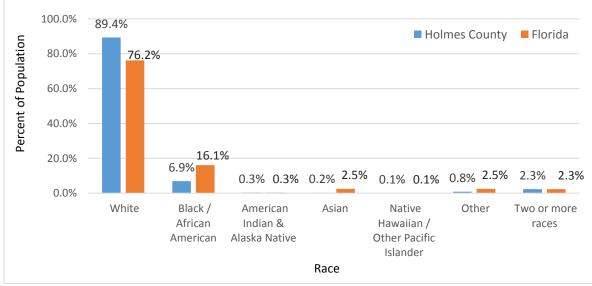
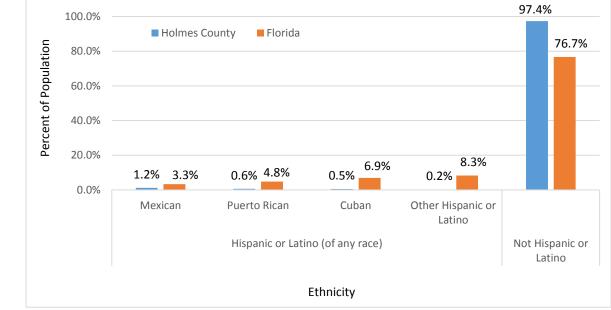


FIGURE 9. POPULATION BY RACE, HOLMES COUNTY & FLORIDA, 2010-2014





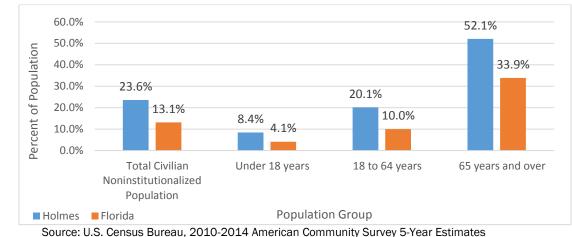


Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates

### **Disability Status**

A greater proportion of Holmes County residents have a disability in comparison to the state average. In Holmes County, 23.6% of the total population has a disability, compared with 13% of Floridians. Approximately 8% of Holmes County residents under age 18 have a disability compared with 4.1% of

persons in the same age group in Florida. Among people age 18-64, 20% have a disability in Holmes County compared with 10% in Florida. Additionally, 52% of Holmes residents age 65 and older have a disability, compared with 34% of people age 65 and older in Florida (Figure 11).





### Esri LifeMode Groups

The geographic information system (GIS) company Esri divided the American population into 14 LifeMode groups – shown in the legend of Figure 12 – based on shared experiences such as immigration and on demographic traits such as affluence. Holmes County residents and people in the surrounding counties fall into the following LifeMode groups:

#### "LifeMode 5 GenXurban

- Gen X in middle age; families with fewer kids and a mortgage
- Second largest Tapestry group, comprised of Gen X married couples, and a growing population of retirees
- About a fifth of residents are 65 or older; about a fourth of households have retirement income
- Own older single-family homes in urban areas, with 1 or 2 vehicles
- Live and work in the same county, creating shorter commute times
- Invest wisely, well-insured, comfortable banking online or in person
- News junkies (read a daily newspaper, watch news on TV, and go online for news)
- Enjoy reading, photo album/scrapbooking, playing board games and cards, doing crossword puzzles, going to museums and rock concerts, dining out, and walking for exercise

#### LifeMode 6 Cozy Country Living

- Empty nesters in bucolic settings
- Largest Tapestry group, almost half of households located in the Midwest
- Homeowners with pets, residing in single-family dwellings in rural areas; almost 30% have 3 or more vehicles and, therefore, auto loans
- Politically conservative and believe in the importance of buying American
- Own domestic trucks, motorcycles, and ATVs/UTVs
- Prefer to eat at home, shop at discount retail stores (especially Walmart), bank in person, and spend little time online
- Own every tool and piece of equipment imaginable to maintain their homes, vehicles, vegetable gardens, and lawns
- Listen to country music, watch auto racing on TV, and play the lottery; enjoy outdoor activities, such as fishing, hunting, camping, boating, and even bird watching

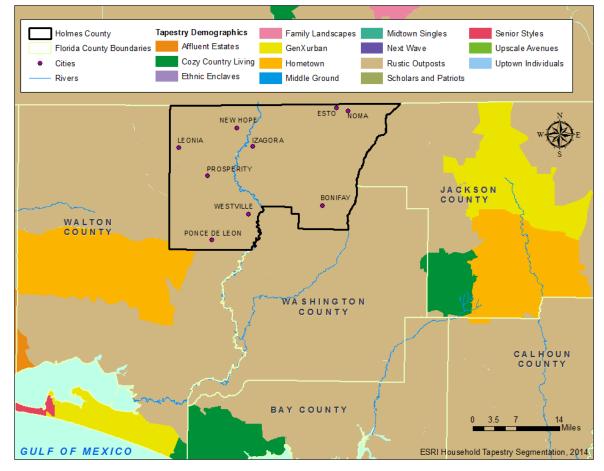
#### LifeMode 10 Rustic Outposts

- Country life with older families in older homes
- Rustic Outposts depend on manufacturing, retail, and healthcare, with pockets of mining and agricultural jobs
- Low labor force participation in skilled and service occupations
- Own affordable, older single-family or mobile homes; vehicle ownership, a must
- Residents live within their means, shop at discount stores and maintain their own vehicles (purchased used) and homes
- Outdoor enthusiasts, who grow their own vegetables, love their pets and enjoy hunting and fishing
- Technology is cost prohibitive and complicated. Pay bills in person, use the yellow pages, read the newspaper and mail-order books

#### LifeMode 12 Hometown

- Growing up and staying close to home; single householders
- Close knit urban communities of young singles (many with children)
- Owners of old, single-family houses, or renters in small multi-unit buildings
- Religion is the cornerstone of many of these communities
- Visit discount stores and clip coupons, frequently play the lottery at convenience stores
- Canned, packaged and frozen foods help to make ends meet
- Purchase used vehicles to get them to and from nearby jobs"<sup>9</sup>

#### FIGURE 12. ESRI HOUSEHOLD TAPESTRY SEGMENTATION OF HOLMES COUNTY REGION, 2014



<sup>&</sup>lt;sup>9</sup> Environmental Systems Research Institute, Inc. (2015). *Esri Demographics: Tapestry Segmentation*. Retrieved from ArcGIS.com: http://doc.arcgis.com/en/esri-demographics/data/tapestry-segmentation.htm

# **Social Factors**

### Education

Holmes County has a greater portion of people whose highest education level is high school or some college and a smaller portion with college degrees in comparison to the Florida average (Figure 13).

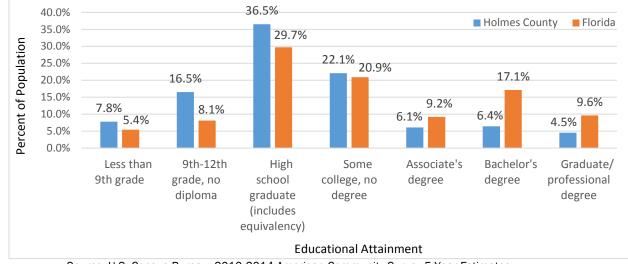
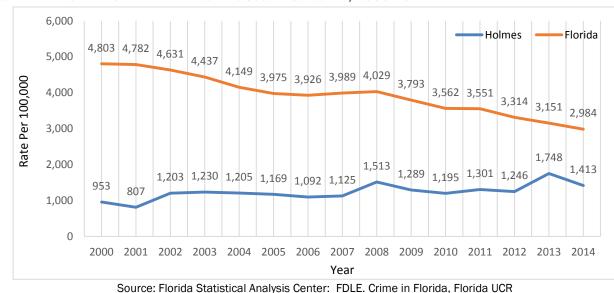


FIGURE 13. EDUCATIONAL ATTAINMENT OF POPULATION 25 YEARS & OLDER, 2010-2014

# **Crime & Domestic Violence**

In 2014, Holmes County had much lower rates per 100,000 population of property and violent crimes in comparison to the state of Florida (Figures 14 and 15). Property crimes include burglary, larceny, and motor vehicle theft. Violent crimes include robbery, aggravated assault, forcible sex offenses, and murder. In contrast, Holmes County had a higher rate of domestic violence offenses than Florida. Domestic violence offenses include simple or aggravated assault, stalking, threat/intimidation, forcible rape, forcible fondling, manslaughter, and murder. Domestic violence offenses have been increasing since 2010 in Holmes County, while the state rate has decreased (Figure 16).



#### FIGURE 14. PROPERTY CRIME RATE IN HOLMES COUNTY & FLORIDA, 2000-2014

Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates

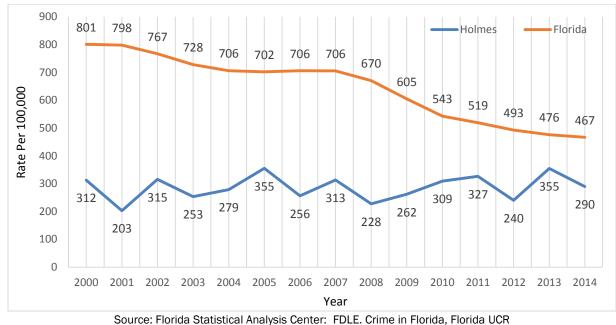
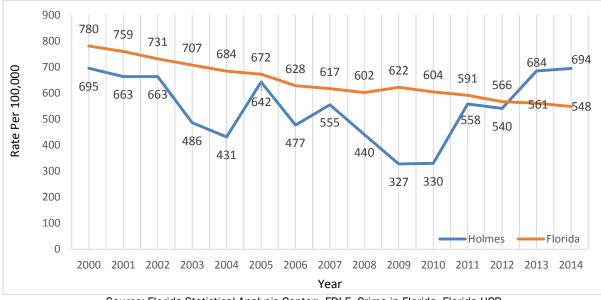


FIGURE 15. VIOLENT CRIME RATE IN HOLMES COUNTY & FLORIDA, 2000-2014





Source: Florida Statistical Analysis Center: FDLE. Crime in Florida, Florida UCR

### Sexual Assault

Sexual assault rates consist of attempted rape, rape by force, forcible sodomy, and forcible fondling. In 2007, the rate of forcible sex offenses in Holmes County was nearly twice that of Florida as a whole (113.0 per 100,000 versus 60.0 per 100,000). However, from 2009-2014, the forcible sex offense rate of Holmes County fluctuated closely to the state rate. The Holmes County forcible sex offense rate was also below that of Florida's during the years 2001, 2004, 2009, 2011, 2013, and 2014 (Figure 17).



FIGURE 17. RATE OF FORCIBLE SEX OFFENSES COMMITTED IN HOLMES COUNTY & FLORIDA, 2000-2014

Source: Florida Department of Law Enforcement, UCR Offense Data

### **Unintentional Injury**

Unintentional injuries are accidental or unplanned and typically occur in a short period of time. They include injuries resulting from drowning, motor vehicle crashes, fire, falls, and poisoning.<sup>10</sup> Unintentional injuries are the leading cause of death for people ages 1-44 in the U.S.<sup>11</sup> Holmes County has a higher unintentional injury death rate than the state of Florida with 46.1 injury deaths per 100,000 in Holmes compared to 39.9 deaths per 100,000 population in Florida, though the Holmes rate has decreased since 2011-2013 (Figure 18).

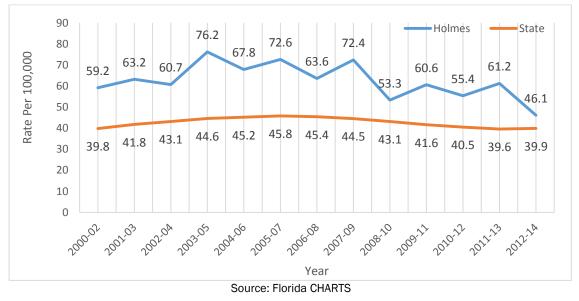


FIGURE 18. UNINTENTIONAL INJURY AGE-ADJUSTED DEATH RATE IN HOLMES COUNTY & FLORIDA, 2000-2014

<sup>&</sup>lt;sup>10</sup> Maine Center for Disease Control and Prevention. (2013). *Maine Injury Prevention Program*. Retrieved from Maine.gov: http://www.maine.gov/dhhs/mecdc/population-health/inj/unintentional.html

<sup>&</sup>lt;sup>11</sup> U.S. Centers for Disease Control and Prevention. (2015, March 31). *Ten Leading Causes of Death and Injury*. Retrieved from CDC.gov: www.cdc.gov/injury/wisqars/leadingcauses.html

# Alcohol-Suspected Traffic Crashes

Alcohol-impaired driving endangers the lives of the impaired driver, their passengers, and everyone else on the road. Almost 30 people per day – or one person every 51 minutes – die in the U.S. due to a motor vehicle crash involving an alcohol-impaired driver. Alcohol-impaired driving takes an especially high toll on young people. In 2013, one of every three alcohol-impaired drivers involved in a fatal crash was between the ages of 21-24.<sup>12</sup>

For more than a decade, Holmes County has had a lower rate of alcohol-suspected motor vehicle traffic crashes than the state average. Rates in both Holmes County and Florida have been steadily declining. In 2012-2014, there were 68.3 alcohol-suspected traffic crashes per 100,000 population in Holmes County compared to 87.6 crashes per 100,000 in Florida (Figure 19).



FIGURE 19. ALCOHOL-SUSPECTED MOTOR VEHICLE TRAFFIC CRASHES IN HOLMES COUNTY & FLORIDA, 2000-2014

Source: Florida CHARTS

<sup>&</sup>lt;sup>12</sup> U.S. Centers for Disease Control and Prevention. (2015, January). *Impaired Driving*. Retrieved from CDC.gov: http://www.cdc.gov/MotorVehicleSafety/Impaired\_Driving/

# **Economic Factors**

# Income

According to the 2010-2014 American Community Survey, the mean household income in Holmes County is \$46,000, compared to a mean household income of \$67,143 in Florida. The median household income in Holmes is \$36,236, while the median household income of Florida is \$47,212. Holmes County has a per capita income of \$16,946 compared to per capita income of \$26,499 in Florida.<sup>13</sup> Figure 20 shows median household income by census block group within Holmes County. Areas shown in dark blue have the highest median household income, while areas shown in yellow have the lowest median household income.

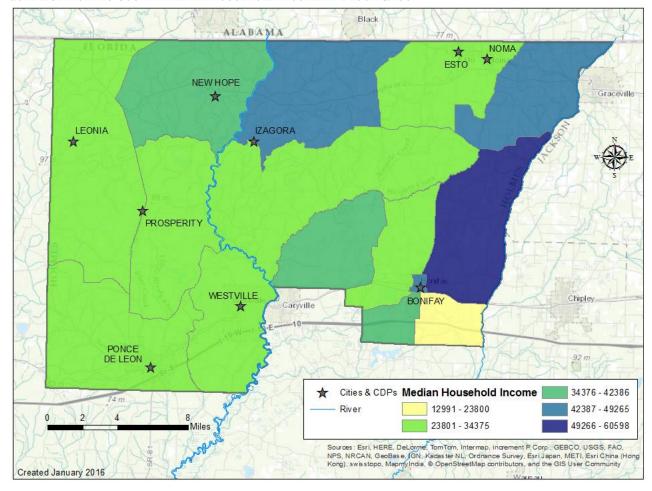


FIGURE 20. HOLMES COUNTY MEDIAN HOUSEHOLD INCOME BY BLOCK GROUP

<sup>&</sup>lt;sup>13</sup> U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates; Table DP03, Selected Economic Characteristics

### Poverty & Public Assistance

Holmes County has a larger portion of people and families living below poverty level in comparison to the state of Florida. Approximately 19% of families and 27% of all people had income below the poverty level in the past 12 months in Holmes County, compared to 12% of families and 17% of all people in Florida. Related children under 5 years of age (52% living below poverty) and families with a female householder and no husband present (47%) are especially vulnerable to having income below poverty level (Figure 21).

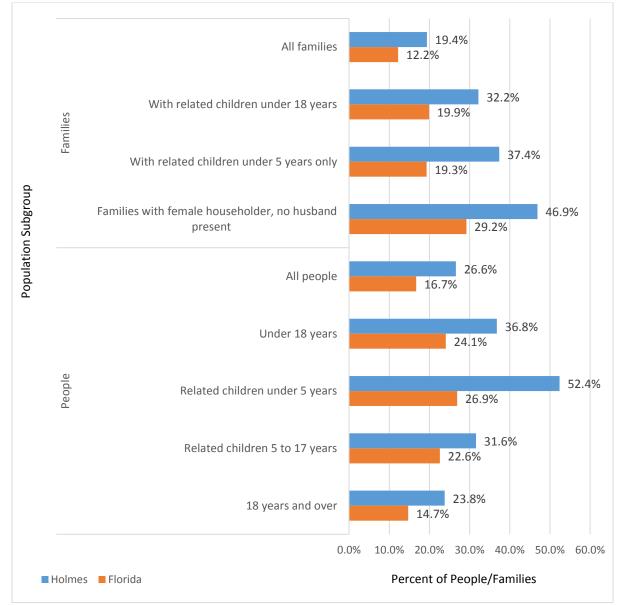


FIGURE 21. PERCENTAGE OF FAMILIES & PEOPLE WHOSE INCOME IS BELOW THE POVERTY LEVEL IN THE PAST 12 MONTHS, HOLMES COUNTY & FLORIDA, 2010-2014

Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates, Table DP03

Figure 22 shows the distribution of households below poverty by block group within Holmes County. Areas in red have a higher number of households below poverty, while areas in yellow have fewer households below poverty.

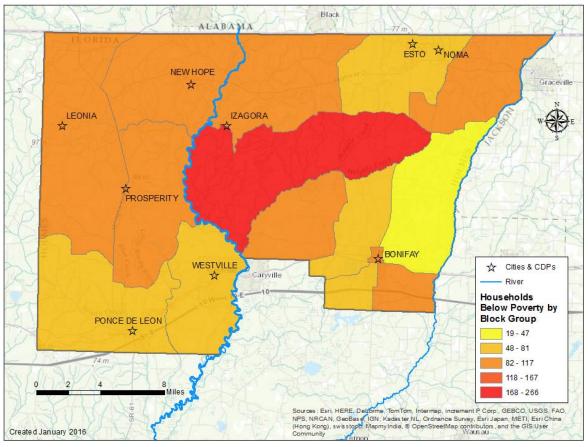
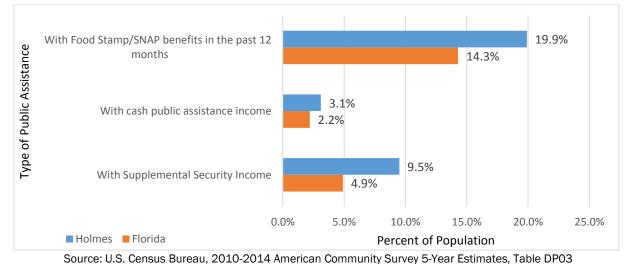


FIGURE 22. HOUSEHOLDS BELOW POVERTY IN HOLMES COUNTY (BY BLOCK GROUP)

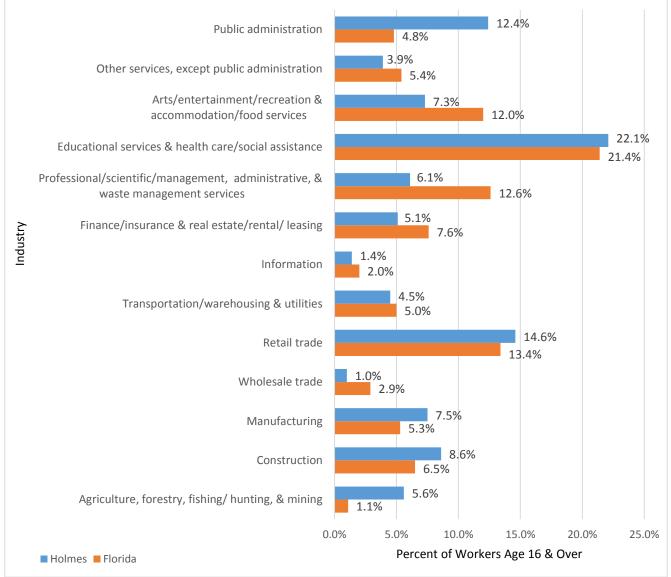
Coinciding with the higher percentage of people with incomes below poverty level, a greater portion of households in Holmes County use public assistance in comparison to the state of Florida. About 20% of households use food stamp/SNAP benefits, 3% use cash public assistance, and 10% use Supplemental Security Income (Figure 23).





## Labor Force, Employment, & Industry

The largest industries in Holmes County are Educational Services and Healthcare/Social Assistance (22%), Retail Trade (15%), and Public Administration (12%). Educational Services and Healthcare/Social Assistance (21%) and Retail Trade (13%) are also the top two industries in Florida, though Public Administration (5%) makes up a much smaller percentage of industry at the state level. The smallest industries in Holmes County are Wholesale Trade (1%) and Information (1.4%) (Figure 24).



#### FIGURE 24. EMPLOYED POPULATION 16 YEARS & OVER BY INDUSTRY, HOLMES COUNTY & FLORIDA, 2010-2014

Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates, Table DP03

In 2014, the average annual wage in Holmes County was \$29,068 compared to an average annual wage of \$44,810 in Florida. Annual wages have been steadily increasing in both Holmes County and Florida, though Holmes remains well below the Florida average (Figure 25).

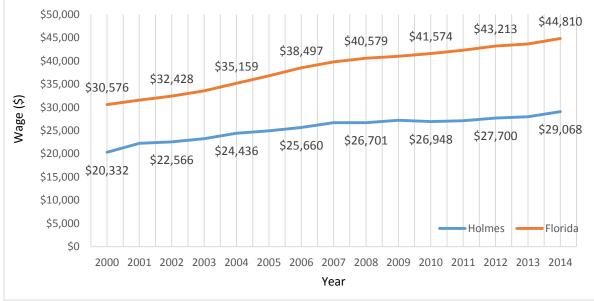


FIGURE 25. AVERAGE ANNUAL WAGES IN HOLMES COUNTY & FLORIDA, 2000-2014

Source: Florida Department of Economic Opportunity, Labor Market Statistics

The majority of workers in both Holmes County (85%) and Florida (80%) commute to work by driving alone in a car, truck, or van. No workers in Holmes County use public transportation to get to work. Similar portions of the population in Holmes and Florida carpool or walk to work (Figure 26). The average travel time to work in Holmes County is 31 minutes, compared to a state average of 26 minutes.<sup>14</sup>

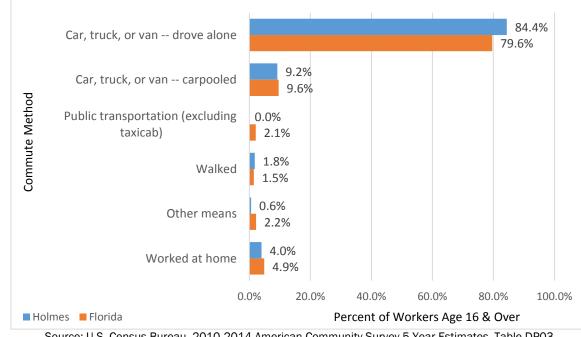


FIGURE 26. COMMUTING TO WORK FOR WORKERS AGE 16 & OVER, HOLMES COUNTY & FLORIDA, 2010-2014

Source: U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates, Table DP03

<sup>14</sup> U.S. Census Bureau, 2010-2014 American Community Survey 5-Year Estimates, Table DP03

Some of Holmes County's working population live in Holmes but work outside of Holmes County. Figure 27 shows the location of work for Holmes County residents from 2006-2010. The top two places of work outside of Holmes County are Walton County, FL and Alabama.

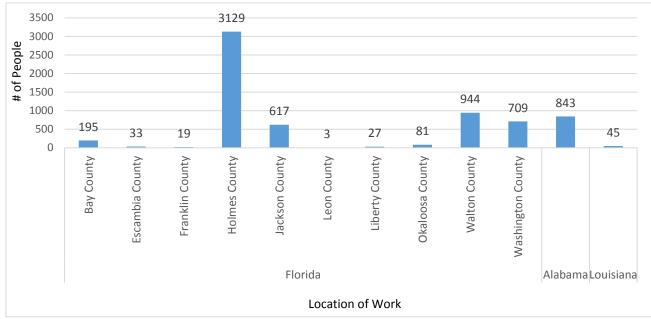


FIGURE 27. POPULATION LEAVING HOLMES COUNTY FOR WORK BY PLACE OF WORK, 2006-2010

Both Florida and Holmes County saw a significant spike in unemployment rates during the recession of 2009, but rates began to decline again in 2011. In 2014, the unemployment rate in Holmes County was 6.8 percent, slightly higher than the state average (Figure 28).

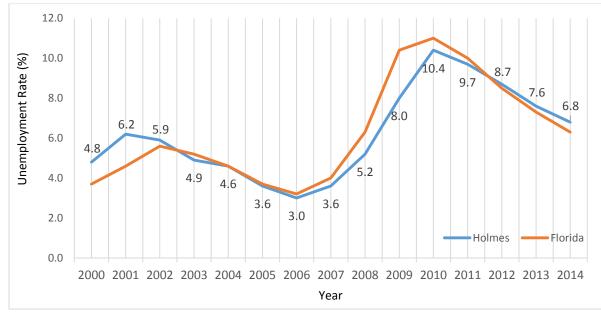


FIGURE 28. AVERAGE ANNUAL UNEMPLOYMENT RATE IN HOLMES COUNTY & FLORIDA, 2000-2014

Source: U.S. Bureau of Labor Statistics, Federal Reserve Economic Data, Federal Reserve Bank of St. Louis

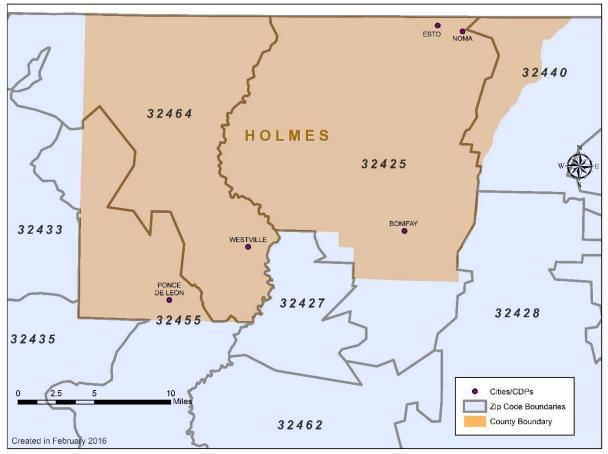
Source: U.S. Bureau of Labor Statistics, 2006-2010 American Community Survey

# **Physical Environment**

Social determinants of health are "the circumstances in which people are born, grow up, live, work and age"<sup>15</sup> which can positively or negatively affect health outcomes. The physical environment, one of the social determinants of health, includes both the natural and built environment. Evidence shows that the built environment can influence a person's level of exercise and healthy eating habits, which correlate with health outcomes such as obesity and diabetes.

To better understand the built environment, data was compiled utilizing the Florida Environment Public Health Tracking tool, which tracks and reports environmental data in Florida at the zip code and county level. The four zip codes within Holmes County are 32425, which encompasses Bonifay; 32440, which encompasses a small portion of the northeast part of Holmes County and the city of Graceville in neighboring Jackson County; 32455, which encompasses Ponce de Leon; and 32464, which encompasses Westville (Figure 29).

#### FIGURE 29. ZIP CODES IN HOLMES COUNTY, FLORIDA



# Housing Conditions

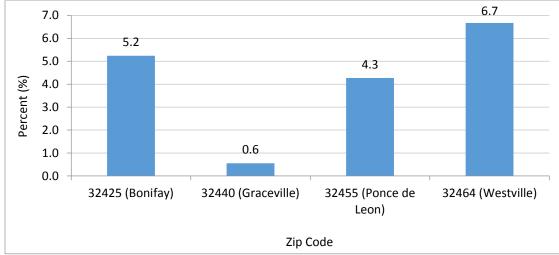
# Plumbing

Evidence shows that a lack of plumbing facilities can lead to health problems such as gastrointestinal illnesses. Figure 30 depicts the percent of occupied housing units that lack complete plumbing facilities by zip code within Holmes County from 2008-2012. Zip code 32464 (Westville) had the greatest percent of

<sup>&</sup>lt;sup>15</sup> World Health Organization: http://www.who.int/social\_determinants/thecommission/finalreport/key\_concepts/en/

occupied housing units that lack complete plumbing facilities at 6.7%. The 32440 zip code (Graceville) had less than one percent of units lacking plumbing facilities.



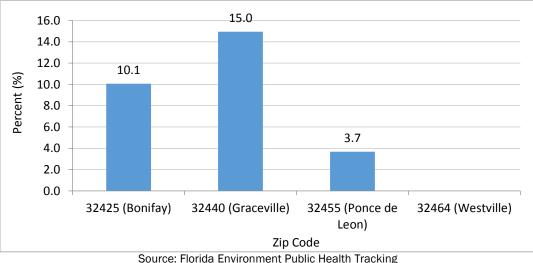


Source: Florida Environment Public Health Tracking

# Food Environment

Food deserts are areas that lack access to affordable fruits, vegetables, whole grains, low-fat milk, and other healthy foods.<sup>16</sup> For the purpose of this indicator, healthy food sources are defined as grocery stores, supermarkets, and registered produce stands where residents have access to a variety of foods including fresh fruits and vegetables. The population in Ponce De Leon has the lowest percent (3.7%) of the population living within a  $\frac{1}{2}$  mile of a healthy food source. There was no healthy food access data available for the Westville zip code (Figure 31).





<sup>&</sup>lt;sup>16</sup> U.S. Centers for Disease Control and Prevention. (2012, September 24). A Look Inside Food Deserts. Retrieved 2016, from CDC.gov: http://www.cdc.gov/features/FoodDeserts/

Food deserts also have an overabundance of fast food chains selling cheap, low-quality, and overprocessed meats and dairy-based foods that are high in fat, sugar and salt. The overconsumption of these foods is linked to higher likelihood of negative health outcomes, such as diabetes and heart disease. The zip code 32440 (Graceville) has the highest percentage of population that lives within a  $\frac{1}{2}$  mile of a fast food restaurant at 11.1%. There was no data available for the Ponce De Leon and Westville zip codes (Figure 32).

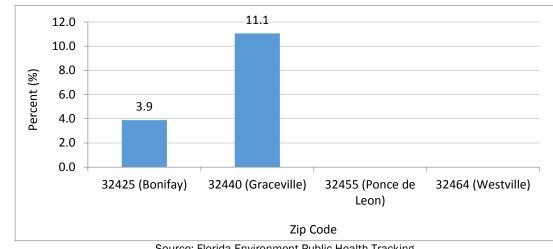
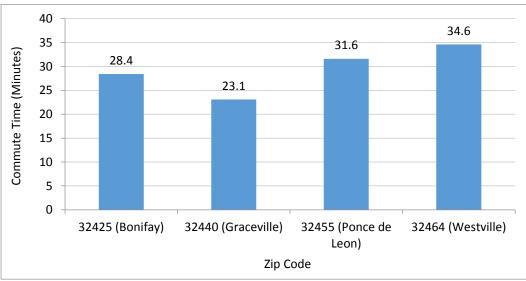


FIGURE 32. POPULATION LIVING WITHIN <sup>1</sup>/<sub>2</sub> MILE (OR A 10-MINUTE WALK) OF A FAST FOOD RESTAURANT BY ZIP CODE, 2013

# Commuting

Figure 33 shows the average travel time to work for each zip code within Holmes County. Those populations in the Westville (32464) and Ponce De Leon (32455) zip codes had the highest travel time to work in minutes at over 30 minutes. The 32440 zip code (Graceville) had the lowest commute time at under 25 minutes. With all areas of Holmes County having an average commute time of higher than 20 minutes, it is likely that many of the residents are working outside of the county.





Source: Florida Environment Public Health Tracking

Source: Florida Environment Public Health Tracking

# Health Outcomes

According to the Mobilizing for Action through Partnership and Planning Handbook, the *Community Health Status Assessment* (CHSA) answers the following questions by gathering data and information on health status, quality of life, and health behaviors:

- "How healthy are our residents?"
- "What does the health status of our community look like?"
- "What are the strengths and risks in our community that contribute to health?"<sup>17</sup>

The CHSA involves collecting and analyzing the most recent available data describing population health and behaviors within the community, as well as comparing data to other times and geographies in order to discern trends.

## **Mortality Indicators**

Mortality rates can be key indicators of the state of health of a community. This section will describe leading causes of death and mortality rates in Holmes County. The mortality rates provided in this section reflect 3year rolling averages of the rate of deaths per 100,000 persons in the named area's population. The rates are also age-adjusted to balance for variances in the age groups between different geographies. The data in this Health Outcomes section (unless otherwise noted) was obtained from the Florida Department of Health's online data system known as the *Florida Community Health Assessment Resource Tool Set*, or "CHARTS", found at: http://www.floridacharts.com.

It is important for effective community planning to acknowledge that disease death rates often vary among subpopulations, such as racial/ethnic groups, geographies, or age groups. Both biological and cultural norms may contribute to these differences. The mortality data on the following pages will therefore show two separate aspects of every disease or condition reported:

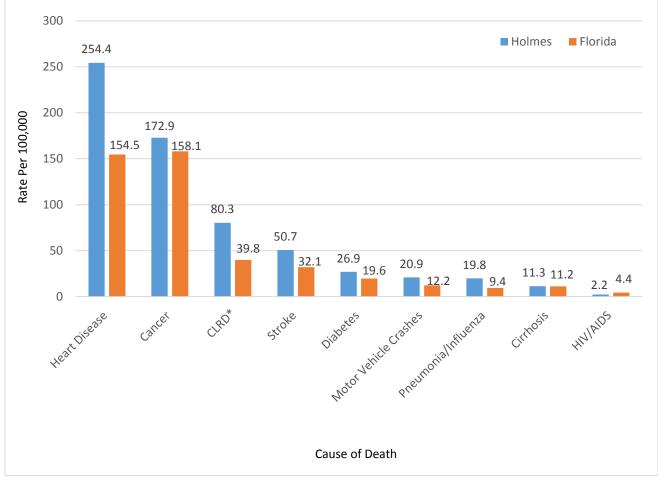
- 1) Trends over time, presented as 3-year rolling averages of mortality rates for both the county and the state (for comparison); and
- 2) A separate breakdown between white and non-white populations for the most current time period available (to identify racial disparities)

All data included in this section represents the most current information available at the time the report was compiled. In order to ensure the final report includes the most current information available at the time of completion and publication to the community, figures may have been updated if new information became available after the report was presented to Task Force members during planning meetings. Any significant changes were shared with Task Force members prior to the development of the county's health priorities and goals.

<sup>&</sup>lt;sup>17</sup> National Association of County and City Health Officials. (n.d.). Mobilizing for Action through Planning and Partnerships, Achieving Healthier Communities through MAPP: A User's Handbook. Washington, DC.

## Leading Causes of Death

Figure 34 shows the top nine leading causes of death in Holmes County and the state of Florida. Heart disease, cancer, and chronic lower respiratory disease (CLRD) are the leading killers in Holmes County. Holmes has significantly higher mortality rates for heart disease (254.4 versus 154.5 deaths per 100,000 population) and chronic lower respiratory disease (80.3 versus 39.8 deaths per 100,000 population) than the Florida average.





\*Chronic Lower Respiratory Disease

#### **Heart Disease**

Heart disease remains the nation's leading cause of death for both men and women, accounting for one in every four deaths in the United States. The most common type of heart disease is coronary heart disease, which can lead to heart attack. Individuals can greatly reduce their risk for heart disease by reducing high blood pressure, reducing high LDL cholesterol, and by quitting smoking. People who have had a heart attack can reduce the risk of future heart attacks or strokes by making lifestyle changes and taking medication.<sup>18</sup>

Since 2000-2002, heart disease mortality has decreased steadily in Holmes County and Florida, though Holmes County rates remain higher than the state (Figure 35). The rate among non-white Holmes residents significantly decreased after 2001-2003, but increased again after 2009-2011 (Figure 36).

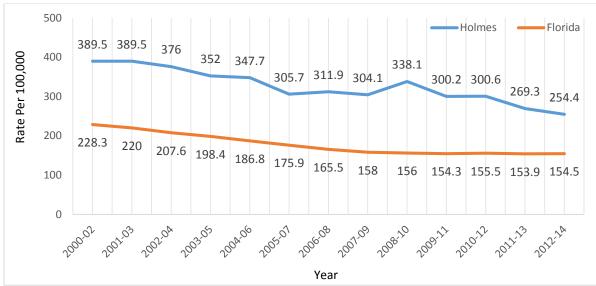
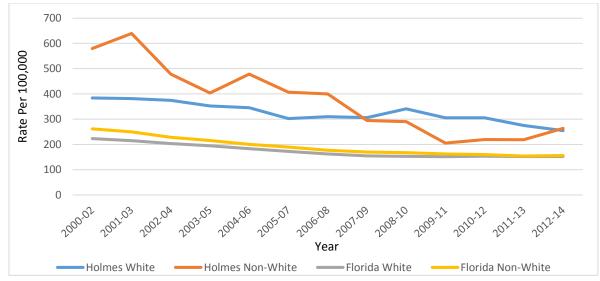


FIGURE 35. HEART DISEASE MORTALITY RATE, ALL RACES/ETHNICITIES, 2000-2014

FIGURE 36. HEART DISEASE MORTALITY RATE BY RACE, 2000-2014



<sup>&</sup>lt;sup>18</sup> U.S. Centers for Disease Control and Prevention. (2015, February 19). *Heart Disease*. Retrieved from CDC.gov: http://www.cdc.gov/heartdisease/facts.htm

#### Cancer

Cancer is a large group of diseases characterized by the invasive and uncontrolled growth of abnormal cells.<sup>19</sup> Cancer ranks second only to heart disease as the leading cause of death in the United States.<sup>20</sup> A person can reduce their risk of cancer by avoiding tobacco, limiting alcohol, eating a healthy diet, maintaining a healthy weight, and being physically active.<sup>21</sup> In Holmes County, cancers are the second leading cause of death. The cancer mortality rate in Holmes County has remained above the state of Florida's rate per 100,000 population for more than ten years (Figure 37). From 2009-2011 to 2011-2013, the non-white population had a higher cancer mortality rate than the white population in Holmes County (Figure 38).

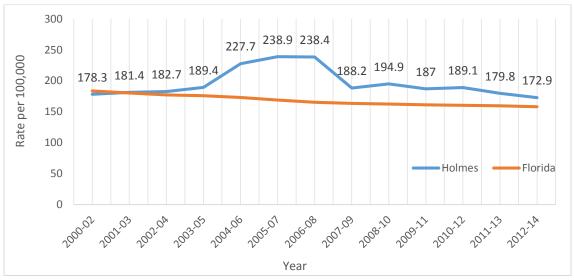
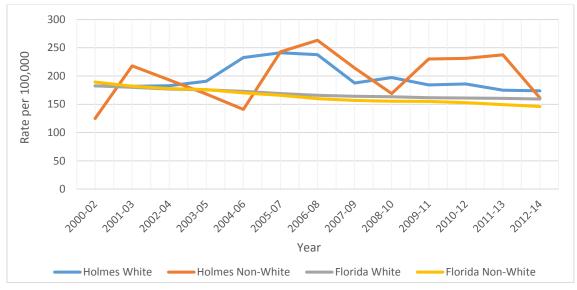




FIGURE 38. CANCER MORTALITY RATE BY RACE, 2000-2014



<sup>&</sup>lt;sup>19</sup> National Cancer Institute at the National Institutes of Health. (n.d.). *What Is Cancer*? Retrieved 2016, from National Cancer Institute: http://www.cancer.gov/about-cancer/what-is-cancer

<sup>&</sup>lt;sup>20</sup> U.S. Centers for Disease Control and Prevention. (2015, February 6). Leading Causes of Death. Retrieved from CDC.gov:http://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm

<sup>&</sup>lt;sup>21</sup> U.S. Centers for Disease Control and Prevention. (2015, July 21). *Cancer Prevention and Control*. Retrieved 2016, from CDC.gov: http://www.cdc.gov/cancer/dcpc/prevention/index.htm

## Lung Cancer

Lung cancer is the most common type of cancer among Holmes County residents, resulting in death rates more than double those of breast or prostate cancer. Holmes County has a higher lung cancer mortality rate than the state of Florida (Figure 39), though rates have declined slightly since 2010-2012. The non-white population in Holmes had a higher lung cancer mortality rate than the white population until 2011-2013 (Figure 40).

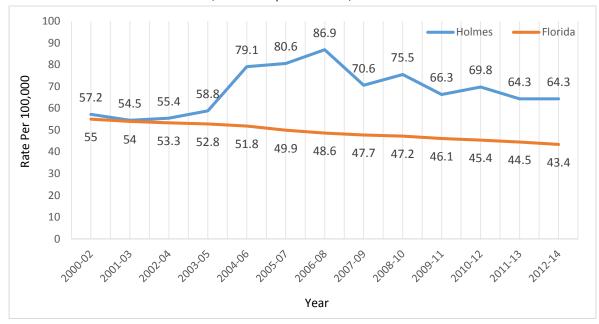
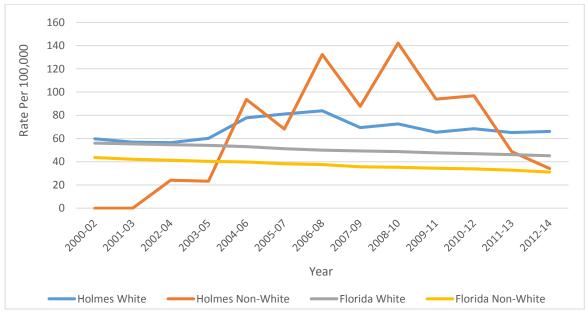




FIGURE 40. LUNG CANCER MORTALITY BY RACE, 2000-2014



#### **Breast Cancer**

Aside from skin cancer, breast cancer is the most common cancer among American women.<sup>22</sup> Regular clinical breast exams and screening mammograms to detect breast cancer early are recommended by doctors, as this is when treatment is most likely to be effective.<sup>23</sup> The U.S. Preventative Task Force recommends women age 50-74 have biennial (every other year) screening mammograms. Women younger than 50 should decide whether to start regular screening based on their individual patient context.<sup>24</sup> Holmes County's breast cancer mortality has been above the state average since 2009-2011 (Figure 41). The breast cancer mortality rate for the non-white population has been fairly sporadic, likely due to the small size of the non-white population within Holmes County (Figure 42).

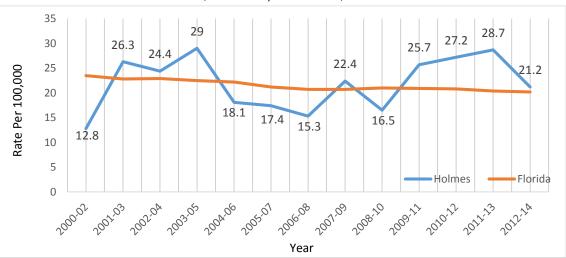
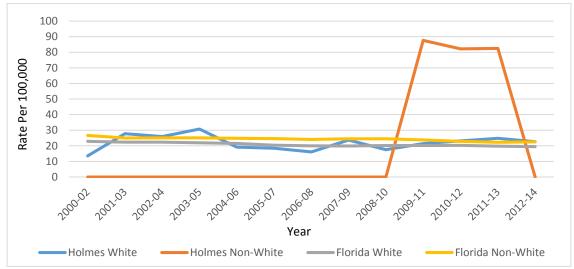


FIGURE 41. BREAST CANCER MORTALITY RATE, ALL RACES/ETHNICITIES, 2000-2014





<sup>&</sup>lt;sup>22</sup> U.S. Center for Disease Control and Prevention. (2015, March 31). Breast Cancer. Retrieved from Cancer.gov: http://www.cdc.gov/cancer/breast/

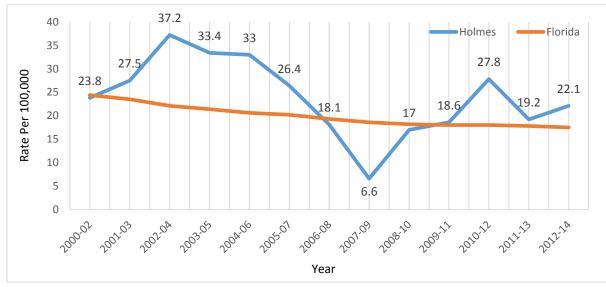
<sup>&</sup>lt;sup>23</sup> National Cancer Institute. (2014, March). *Mammograms*. Retrieved from Cancer.gov: http://www.cancer.gov/types/breast/mammograms-fact-sheet

<sup>&</sup>lt;sup>24</sup> U.S. Preventative Services Task Force. (2009). Breast Cancer: Screening. Retrieved from uspreventativeservicestaskforce.org/ http://www.uspreventativeservicestaskforce.org/Page/Topic/recommendation-summary/breast-cancer-screening

### **Prostate Cancer**

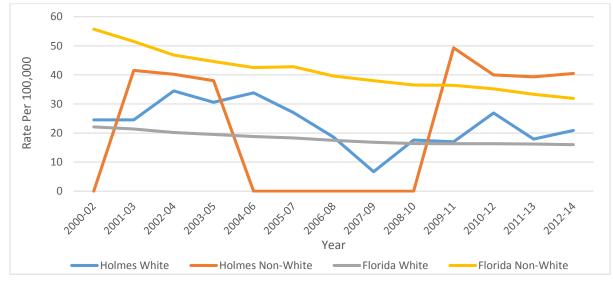
Prostate cancer is the most commonly diagnosed non-skin cancer in men, and second only to lung cancer in the number of cancer deaths in the United States. There is currently no scientific consensus on effective strategies to reduce the risk of prostate cancer. Furthermore, there is no agreement on the effectiveness of screening or whether potential benefits outweigh risk.<sup>25</sup> Therefore, public health agencies face significant challenges in determining what actions to take to address prostate cancer.

The prostate cancer mortality rate in Holmes County has been higher than Florida's rate since 2009-2011 (Figure 43). In Holmes County, the mortality rate of the non-white population nearly doubled that of the white population in 2012-2014. The mortality rate of Holmes' white population increased in 2012-2014 (Figure 44).







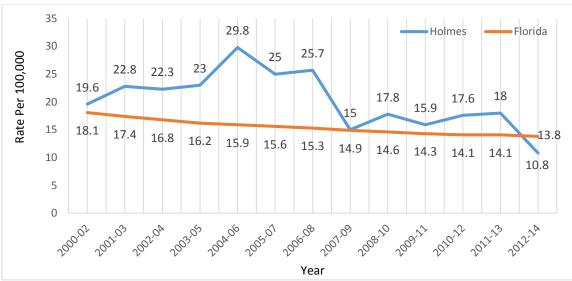


<sup>&</sup>lt;sup>25</sup> U.S. Center for Disease Control and Prevention. (2015, June 3) Prostate Cancer. Retrieved 2015, from CDC.gov: http://www.cdc.gov/cancer/prostate

#### **Colorectal Cancer**

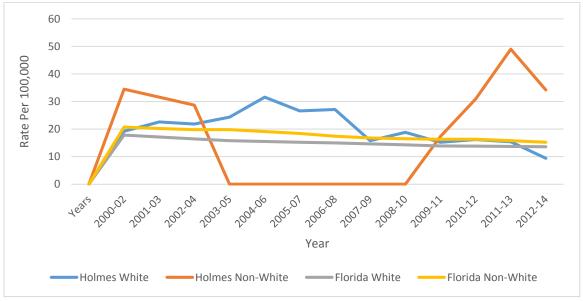
Colorectal cancer, also called colon cancer, is the third most common cancer among both men and women in the United States. Of the cancers that affect both men and women, colorectal cancer is the second leading cancer killer.<sup>26</sup>

In Holmes County, colorectal cancer mortality stayed above the state rate until 2012-2014 when county rates declined (Figure 45). The non-white population of Holmes County had a significant spike in colorectal cancer mortality rates from 2008-2010 to 2011-2013, more than doubling the rate of the white population in 2011-2013 (Figure 46).









<sup>&</sup>lt;sup>26</sup> U.S. Centers for Disease Control and Prevention. (2015 February 5). *Colorectal Cancer*. Retrieved from CDC.gov: http://www.cdc.gov/cancer/colorectal/basic\_info/index.htm

#### Chronic Lower Respiratory Disease

In 2013, chronic lower respiratory disease (CLRD) was the third leading cause of death in the United States. Fifteen million Americans reported having chronic obstructive pulmonary disease (COPD), a group of diseases that cause breathing-related problems, including emphysema, chronic bronchitis, and some cases of asthma. Tobacco use is a key risk factor for development of COPD, but exposure to air pollutants in the home/workplace, secondhand smoke, genetic factors, and respiratory infections are also causes.<sup>27</sup>

Holmes County has significantly higher chronic lower respiratory disease mortality rates than the state of Florida, doubling the state rate in 2012-2014 (Figure 47). CLRD tends to impact white residents at twice the rate of non-white residents in Holmes County (Figure 48).

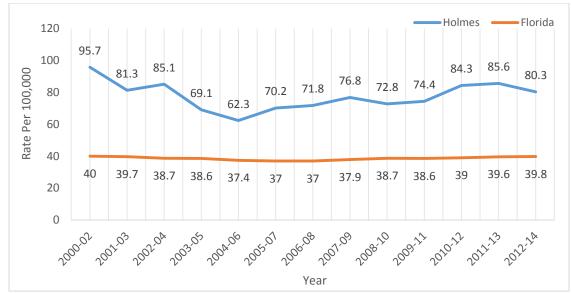
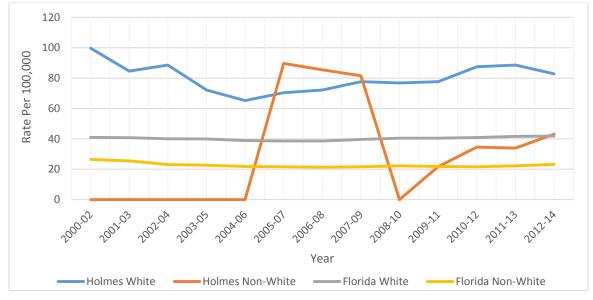


FIGURE 47. CHRONIC LOWER RESPIRATORY DISEASE MORTALITY RATE, ALL RACES/ETHNICITIES, 2000-2014





<sup>&</sup>lt;sup>27</sup> U.S. Center for Disease Control and Prevention. (2015, March 12). Chronic Obstructive Pulmonary Disease (COPD). Retrieved from CDC.gov: http://www.cdc.gov/copd/

50.7

#### Stroke

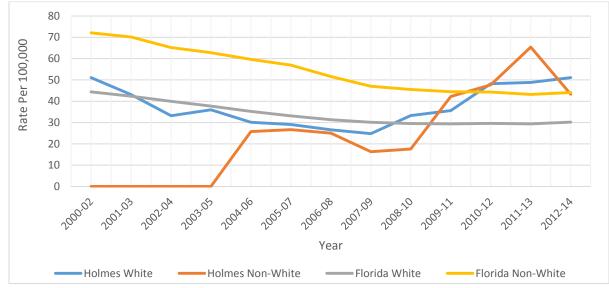
A stroke occurs when something blocks blood supply to the brain or when sudden bleeding in the brain occurs. Stroke is the fifth leading cause of death in the United States, and a significant cause of adult disability, such as paralysis, speech difficulty, and emotional problems. Individuals can reduce their risk for stroke by eating a healthy diet, getting enough exercise, monitoring blood pressure and cholesterol, taking medication as prescribed by a doctor, and managing other health conditions, such as diabetes and heart disease.28

Holmes County's stroke mortality rate was steadily declining until 2007-2009, but passed the state rate in 2008-2010 and reached 51 per 100,000 population in 2012-2014 (Figure 49). The white population's stroke mortality rate doubled from 2007-2009 to 2012-2014. The non-white population's stroke mortality rate more than tripled from 2007-2009 to 2011-2013, but rates decreased in 2012-2014 (Figure 50).

60 49.3 50 48.3 50 Sate Per 100,000 37.2 40 33.7 41.5 30 34.5 32 30 29 26.5 20 25.7 10 Holmes Florida 0 2003-05 2004.06 2006.08 2001.03 2002.04 2005.01 2007.09 2008-20 2000.02 2010-22 2009-11 2012-14 2011-13

FIGURE 49. STROKE MORTALITY RATE, ALL RACES/ETHNICITIES, 2000-2014





Year

<sup>28</sup> U.S. Center for Disease Control and Prevention. (2015, May). Stroke. Retrieved from CDC.gov: http://www.cdc.gov/stroke/

#### Diabetes

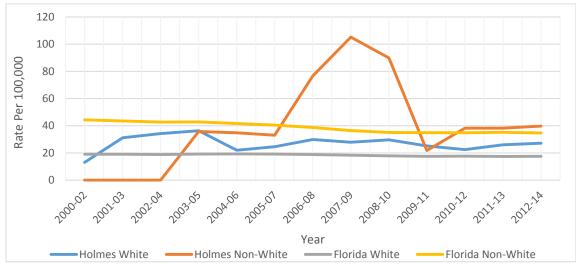
Diabetes is a disease that causes abnormally high blood glucose levels. The pancreas, an organ near the stomach, produces a hormone called insulin, which helps the body process glucose, a type of sugar. In people with diabetes, the pancreas either cannot create enough insulin or cannot use insulin properly, leading to high blood glucose. Diabetes is the seventh leading cause of death in the U.S. and can lead to major health problems, such as heart disease and kidney failure. **Type 1 diabetes** accounts for about 5% of all diagnosed cases. **Type 2 diabetes**, previously called adult-onset diabetes, accounts for 90% to 95% of all diagnosed cases, and 1% to 5% of diagnosed cases are a result of specific genetic syndromes, surgery, drugs, malnutrition, or illness. Research shows weight loss and exercise can prevent or delay type 2 diabetes.<sup>29</sup>

Holmes County's diabetes mortality rate has been higher than the state rate for many years and began to increase in 2011-2013 (Figure 51). The non-white population has experienced extreme fluctuation in diabetes mortality rates, but has remained steady since 2010-2012 (Figure 52).



FIGURE 51. DIABETES MORTALITY RATE, ALL RACES/ETHNICITIES, 2000-2014

FIGURE 52. DIABETES MORTALITY RATE BY RACE, 2000-2014



<sup>29</sup> U.S. Centers for Disease Control and Prevention. (2015, May). *Diabetes*. Retrieved from CDC.gov: www.cdc.gov/diabetes/

#### Preventable Hospitalizations from Diabetes

Diabetes can affect any part of the body and can cause serious health issues including heart disease, blurred vision or blindness, kidney failure, oral health problems, nerve damage, and lower-extremity amputations. To lower the risk of health complications, people with diabetes should keep blood glucose levels as close to normal as possible, get enough physical activity, avoid smoking, and eat a healthy diet.

About 65% of diabetics die from heart disease or stroke, making cardiovascular disease the leading cause of early death among people with diabetes. Adult diabetics are two to four times more likely than non-diabetics to have heart disease or experience a stroke.<sup>30</sup>

Diabetes is the leading cause of kidney failure, accounting for nearly 44% of new cases each year in the U.S. As kidney disease progresses, the kidney's ability to filter waste decreases and waste builds up in the body. Eventually, kidney failure can occur. People with diabetes should have regular screenings to check for signs of kidney disease.<sup>31</sup>

Nerve damage can result from having high levels of blood glucose over many years, resulting in numbness, pain, and weakness in the hands, arms, legs, or feet. Nerve problems can also occur in organs, such as the digestive tract, heart, and sex organs. Nerve damage and poor circulation can cause serious foot problems for people with diabetes, and can lead to amputation of a toe, foot, or leg.<sup>32</sup>

Many of the complications associated with diabetes can be prevented through good health habits. "Potentially preventable hospitalizations are admissions to a hospital for certain acute illnesses (e.g., dehydration) or worsening chronic conditions (e.g., diabetes) that might not have required hospitalization had these conditions been managed successfully by primary care providers in outpatient settings."<sup>33</sup> In Holmes County, the rate of preventable hospitalizations for people under age 65 from diabetes increased from 2006-2008 to 2009-2011, surpassing the state rate. Preventable hospitalizations significantly decreased after 2009-2011 falling below the state rate to 75.3 hospitalizations per 100,000 population in 2012-2014 (Figure 53).





<sup>31</sup> National Institute of Diabetes and Digestive and Kidney Diseases. (2014, April). *Kidney Disease of Diabetes*. Retrieved from Niddk.nih.gov: www.niddk.nih.gov/health-information/health-topics/kidney-disease/kidney-disease-of-diabetes/

<sup>&</sup>lt;sup>30</sup> U.S. Centers for Disease Control and Prevention. (2015, May). *Diabetes*. Retrieved from CDC.gov: www.cdc.gov/diabetes/

<sup>&</sup>lt;sup>32</sup> U.S. Centers for Disease Control and Prevention. (2015, May). Diabetes.

<sup>&</sup>lt;sup>33</sup> Moy, E., Chang, E., & Barrett, M. (2013, November 22). Potentially Preventable Hospitalizations – United States, 2001–2009. Retrieved 2016, from CDC.gov: http://www.cdc.gov/mmwr/preview/mmwrhtml/su6203a23.htm

#### Alzheimer's Disease

Alzheimer's disease is the most common form of dementia, a group of mental disorders with symptoms such as memory impairment, difficulty with language and object recognition, and loss of the ability to plan, organize, and use abstract thought. Alzheimer's typically occurs in people over the age of 60. The disease is the fifth leading cause of death among persons 65 and older and the 6<sup>th</sup> leading cause of death in the U.S. There is no known cure for Alzheimer's disease, though treatment can help improve quality of life. Mortality rates for Alzheimer's disease are on the rise, unlike heart disease and cancer death rates which are declining.<sup>34</sup>

Alzheimer's mortality rates in Holmes County have steadily increased since 2007-2009, doubling by 2012-2014. Alzheimer's mortality rates in Holmes County have been higher than Florida for over a decade (Figure 54). The Alzheimer's mortality rate of the non-white population has been lower than the white population since 2009-2011, though the non-white mortality rate has increased significantly in recent years (Figure 55).

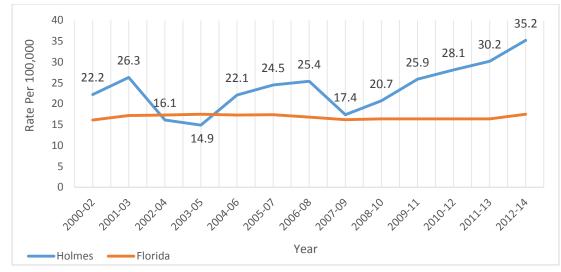
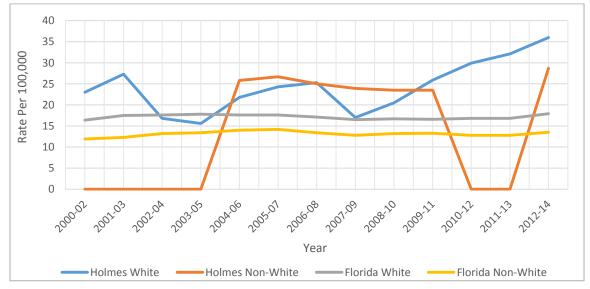


FIGURE 54. ALZHEIMER'S MORTALITY, ALL RACES/ETHNICITIES, 2000-2014

FIGURE 55. ALZHEIMER'S MORTALITY BY RACE, 2000-2014

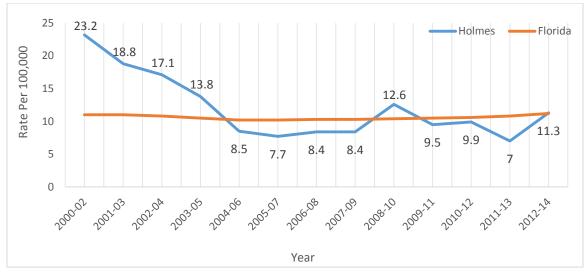


<sup>34</sup> U.S. Centers for Disease Control and Prevention. (2015, March). *Healthy Aging: Alzheimer's Disease.* Retrieved from CDC.gov: http://www.cdc.gov/aging/aginginfo/alzheimers.htm

#### Liver Disease & Cirrhosis

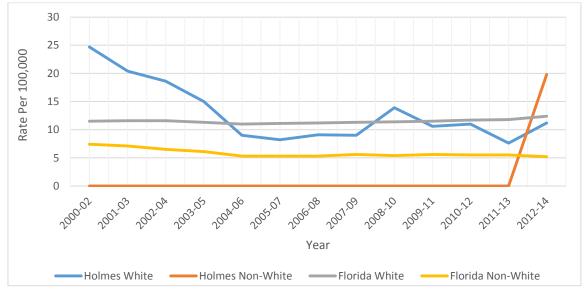
Aside from skin, the liver is the largest organ in the human body. The liver helps the body to process food and poisons and to store energy. Liver disease can have many causes including viruses, drugs, poisons, cancer, or drinking excessive alcohol.<sup>35</sup> In the United States, chronic alcoholism is the leading cause of cirrhosis, the scarring of liver tissue.<sup>36</sup>

Liver disease mortality in Holmes County remains drastically lower than in 2000-2002. Since 2004-2006, liver disease mortality rates tend to stay below the Florida average (Figure 56). In 2012-2014, liver disease mortality rates among the non-white population nearly double the rate of the white population in Holmes County (Figure 57).









<sup>&</sup>lt;sup>35</sup> National Institutes of Health. (2015). *Liver Diseases*. Retrieved from Medline Plus: http://www.nlm.nih.gov/medlineplus/liverdisease.html

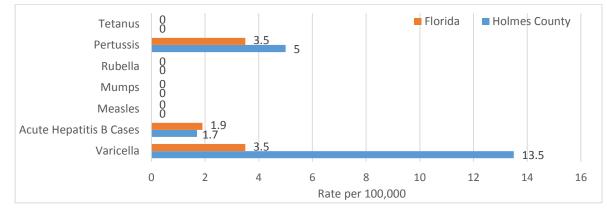
<sup>&</sup>lt;sup>36</sup> American Liver Foundation. (2015). Cirrhosis. Retrieved from American Liver Foundation: http://www.liverfoundation.org/abouttheliver/info/cirrhosis/

# Communicable Diseases

#### Vaccine Preventable Diseases

Vaccine-preventable diseases include: Diphtheria, Influenza, Hepatitis A and B, Measles, Mumps, Meningococcal, Pneumococcal, Polio, Pertussis (whooping cough), Rotavirus, Rubella, Tetanus, and Varicella (chickenpox). In the years 2012-2014, there were negligible rates per 100,000 of Tetanus, Rubella, Mumps, and Measles in Holmes County and Florida. However, the rate of Pertussis in Holmes County was higher than Florida (5 per 100,000 versus 3.5 per 100,000), and the rate of Varicella in Holmes County was nearly four times that of Florida (13.5 versus 3.5 per 100,000) (Figure 58).

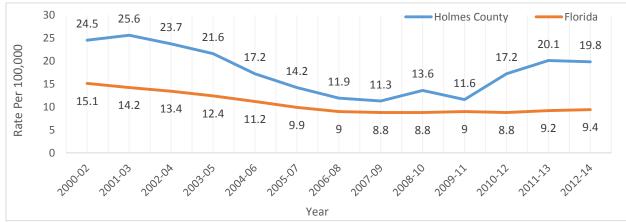
FIGURE 58. VACCINE PREVENTABLE DISEASES, ALL RACES/ETHNICITIES, 3-YEAR ROLLING RATES, 2012-2014



#### Influenza & Pneumonia

Influenza, or the flu, is a contagious respiratory illness, which causes mild to severe symptoms and can lead to death. The yearly flu vaccine is the best way to prevent flu. The young, elderly, pregnant women, and people with compromised immune systems have higher risk for serious flu complications, such as pneumonia.<sup>37</sup> Pneumonia is a lung infection caused by bacteria, viruses (e.g. the flu), or fungi. Several causes of pneumonia, such as whooping cough, chickenpox, and flu, can be prevented by vaccination.<sup>38</sup> Together, influenza and pneumonia are the 8<sup>th</sup> leading cause of death in the U.S.<sup>39</sup> From 2001-2003 to 2007-2009, the influenza and pneumonia mortality rate for Holmes County decreased by 14.3 per 100,000 population. The mortality rate increased from 11.6 per 100,000 in 2009-11 to 19.8 in 2012-14 (Figure 59).

FIGURE 59. INFLUENZA & PNEUMONIA AGE-ADJUSTED DEATH RATE, ALL RACES, 3-YEAR ROLLING RATES, 2000-2014



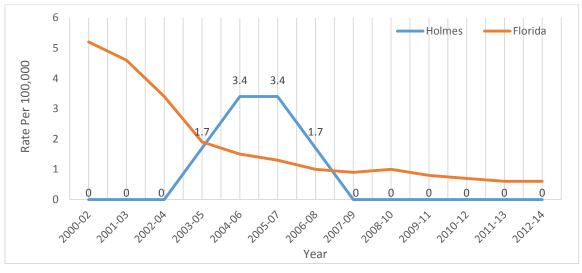
<sup>&</sup>lt;sup>2</sup> U.S. Centers for Disease Control and Prevention. (2015). Influenza (Flu). Retrieved from CDC.gov: http://www.cdc.gov/flu/

<sup>&</sup>lt;sup>3</sup> U.S. Centers for Disease Control and Prevention. (2015, February). *Pneumonia*. Retrieved from CDC.gov: http://www.cdc.gov/pneumonia/

<sup>&</sup>lt;sup>4</sup> U.S. Centers for Disease Control and Prevention. (2015, February 6). *Leading Causes of Death*. Retrieved from CDC.gov: http://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm

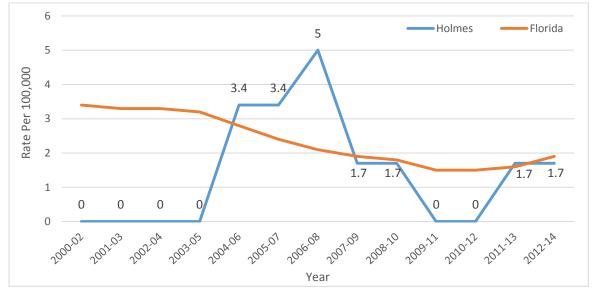
#### Hepatitis

The word "hepatitis" means inflammation of the liver and also refers to a group of viral infections that affect the liver. The most common types are Hepatitis A, Hepatitis B, and Hepatitis C. Viral hepatitis is the leading cause of liver cancer and the most common reason for liver transplantation.<sup>40</sup> Holmes County has lower rates of Hepatitis A compared to Florida (Figure 60). Rates of Hepatitis B in Holmes County have been at or below the state rate since 2007-2009 (Figure 61).









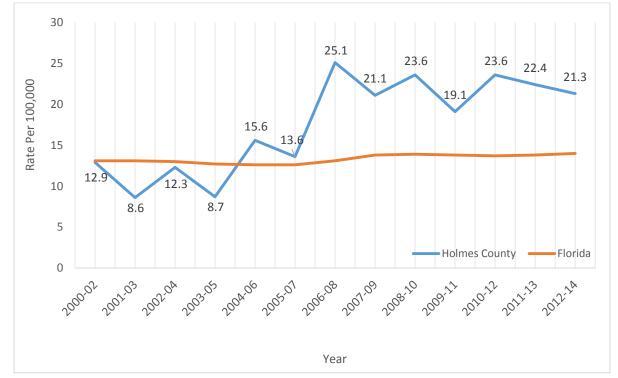
<sup>&</sup>lt;sup>40</sup> U.S. Centers for Disease Control and Prevention. (2015, June 16). *Viral Hepatitis*. Retrieved 2016, from CDC.gov: http://www.cdc.gov/hepatitis/abc/

# Mental Health

According to the World Health Organization, "mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community."<sup>41</sup> Mental health is essential to overall health and well-being and is more than the absence of diagnosed mental disorders. Social, economic, psychological, and biological factors all play a role in determining mental health.<sup>42</sup>

## Suicide

Suicide occurs when a person ends their own life and is the tenth leading cause of death among Americans.<sup>43</sup> Deaths are not the only consequence of suicide. More people survive suicide attempts than die, and suicide survivors may have serious injuries, such as broken bones, brain damage, or organ failure.<sup>44</sup> From 2005-2007 to 2006-2008, there was a sharp increase in the suicide death rate in Holmes County. From 2006-2008 to 2012-2014, the suicide mortality rate for Holmes County has fluctuated between 19-25 per 100,000 population, which is above the state average of 14 per 100,000 (Figure 62).





<sup>&</sup>lt;sup>41</sup> World Health Organization. (2014, August). Mental health: strengthening our response, Fact sheet N°220. Retrieved 2016, from WHO.int: http://www.who.int/mediacentre/factsheets/fs220/en/

<sup>&</sup>lt;sup>42</sup> World Health Organization. (2014, August).

<sup>&</sup>lt;sup>43</sup> U.S. Centers for Disease Control and Prevention. (2015, May). *Deaths. Final Data for 2013.*. Retrieved from CDC.gov: http://www.cdc.gov/leadingcausesofdeath

<sup>&</sup>lt;sup>44</sup> U.S. Centers for Disease Control and Prevention. (2014, September). *Preventing Suicide*. Retrieved from CDC.gov: http://www.cdc.gov/Features/PreventingSuicide/

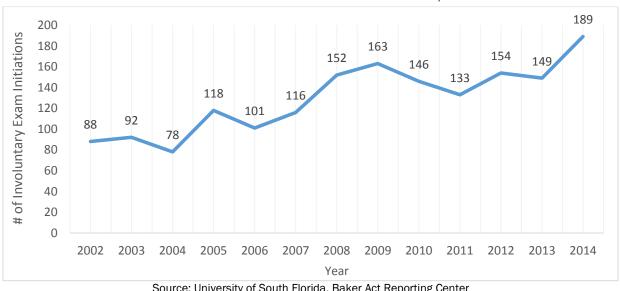
#### **Baker Act Exam Initiations**

In 1971, the Florida Legislature enacted the Florida Mental Health Act (also known as the "Baker Act"), a comprehensive revision of the state's mental health laws. The Baker Act allows for voluntary and involuntary admissions for psychiatric care under specific circumstances. Involuntary initiations can be made by courts, law enforcement officials, physicians, or mental health professionals only when there is evidence that a person has a mental illness and is a threat to their own well-being or the well-being of others. Examinations may not last longer than 72 hours and can occur in any Florida Department of Children and Familiesdesignated receiving facility.45

Mental illness, as defined by the Baker Act, is "an impairment of the mental or emotional processes that exercise conscious control of one's actions or of the ability to perceive or understand reality, which impairment substantially interferes with the person's ability to meet the ordinary demands of living. For the purposes of this part, the term does not include a developmental disability..., intoxication, or conditions manifested only by antisocial behavior or substance abuse impairment."46

The data in the chart below are from Baker Act initiation forms. Not all individuals with initiation forms were admitted to a receiving facility. An exam by a health professional sometimes reveals that an individual does not meet Baker Act criteria for admission. Additionally, the data do not reveal what happened after the initial exam, such as whether an individual consented to voluntary admission, was released, or was admitted involuntarily.47

Figure 63 below illustrates the total number of reported involuntary exam initiations (i.e. Baker Act) for Holmes County residents from 2002-2014. There is a general upward trend in involuntary exam initiations for Holmes County. In 2002, there were only 88 Baker Act instances; however, by 2014 there were 189 instances of Baker Act exam initiations. Figure 63 shows no comparison to the state of Florida as data comparing state and county Baker Act rates is not readily available.





Source: University of South Florida, Baker Act Reporting Center

<sup>&</sup>lt;sup>45</sup> Mental Health Program Office and Department of Mental Health Law and Policy. (2014). 2014 Baker Act User Reference Guide: The Florida Mental Health Act. Tallahassee: Department of Children and Families, Mental Health Program; University of South Florida, Louis de la Parte Florida Mental.

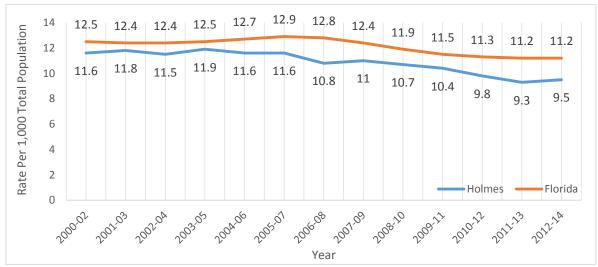
<sup>&</sup>lt;sup>46</sup> Mental Health Program Office and Department of Mental Health Law and Policy, (2014).

<sup>&</sup>lt;sup>47</sup> Christy, A., & Guenther, C. (2014). Annual Report of Baker Act Data: Summary of 2014 Data. Department of Mental Health Law and Policy, de la Parte Florida Mental Health Institute. University of South Florida.

# Maternal & Child Health

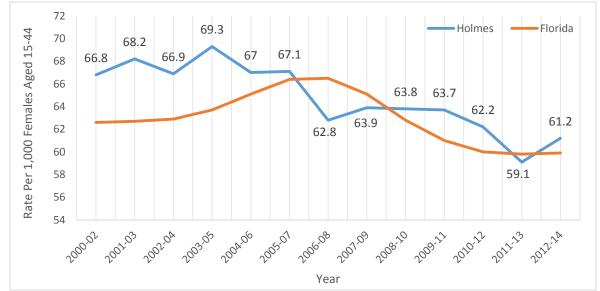
### Birth Rates

Holmes County consistently had a smaller total birth rate than the state average over the past decade, likely because Holmes has a greater male population than the state average. In 2012-2014, there were 9.5 births per 1,000 total population in Holmes County compared to 11.2 per 1,000 people in Florida (Figure 64). The birth rate by mothers ages 15-44 has fluctuated relatively close to the state rate since 2004-2006 (Figure 65).



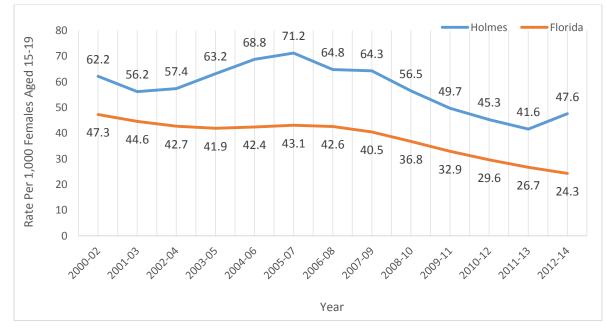






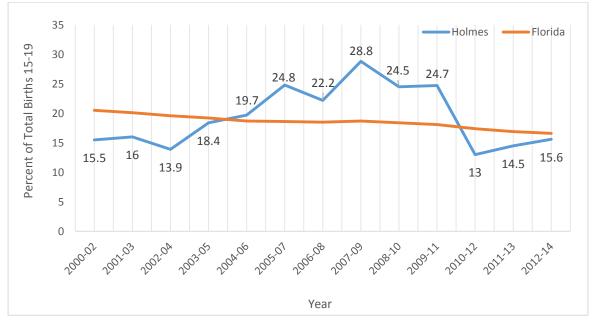
#### Teen Pregnancy

Holmes has a higher birth rate by teen mothers than the state average, with 47.6 births per 1,000 females ages 15-19 in comparison to 24.3 in Florida in 2012-2014 (Figure 66). Since 2010-2012, Holmes County has had fewer repeat births to teen mothers than the state average, though the rate of repeat teen births in Holmes County is increasing (Figure 67).









### **Prenatal Care**

According to the Florida Department of Health, babies born to women who receive no prenatal care during pregnancy are three times more likely to have a low birth weight and five times more likely to die compared to those born to women who receive prenatal care.<sup>48</sup> Holmes County remained below the state average for mothers receiving no prenatal care until 2011-2013 (Figure 68).

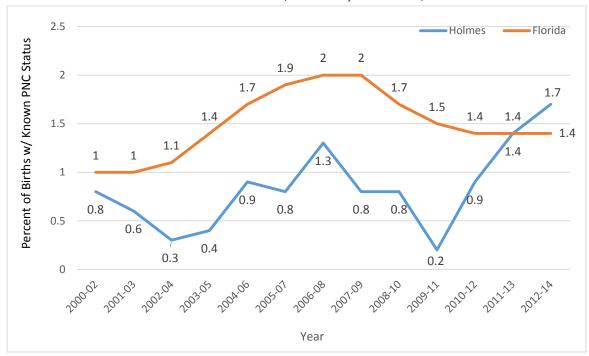


FIGURE 68. BIRTHS TO MOTHERS WITH NO PRENATAL CARE, ALL RACES/ETHNICITIES, 2000-2014

<sup>&</sup>lt;sup>48</sup> Florida, Department of Health. (2012). Prenatal Care. Retrieved from http://www.floridahealth.gov/programs-and-services/womens-health/pregnancy/prenatal-care.html

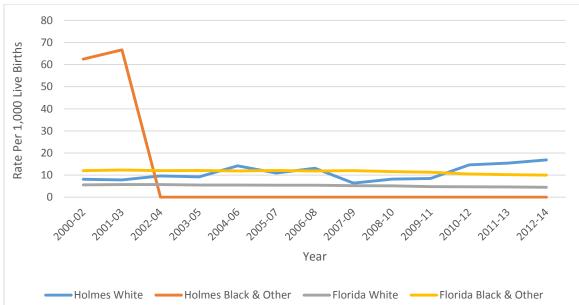
#### Infant Mortality

The infant mortality rate refers to babies who die before their first birthday (0-364 days from birth). Infant mortality is one of the most important indicators of the health of a nation, as it is associated with a variety of factors such as maternal health, quality of and access to medical care, socioeconomic conditions, and public health practices. Holmes County saw a drastic increase in the infant death rate between 2007-2009 and 2012-2014 (Figure 69). The non-white population has had an infant mortality rate of zero for about a decade while the infant mortality rate of the white population has steadily increased (Figure 70).





FIGURE 70. INFANT MORTALITY RATES BY RACE, 2000-2014



### Low Birth Weight

The most important predictor for infant survival is birthweight.<sup>49</sup> A baby's chance for survival increases significantly as birthweight increases to its optimal level. The incidence of low birth weight, defined as less than 2,500 g (or 5 lbs, 8 oz), remains a major public health concern in the United States. In Holmes County, the percent of total births with low birth weight declined from a decade high of 8.5% of total births in 2003-2005 to 5.9% of total births in 2012-2014, bringing Holmes County below the state average of 8.6% (Figure 71). The percent of total births with low birth weight among Holmes County's non-white population has been sporadic over the decade, likely due to the small size of the non-white population in the county (Figure 72).

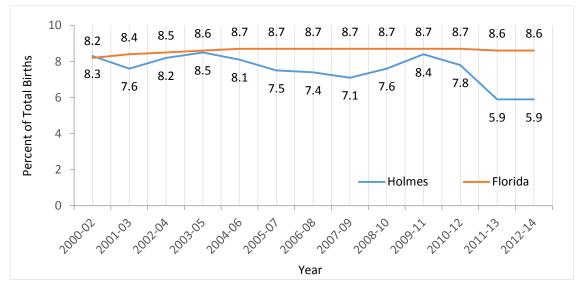
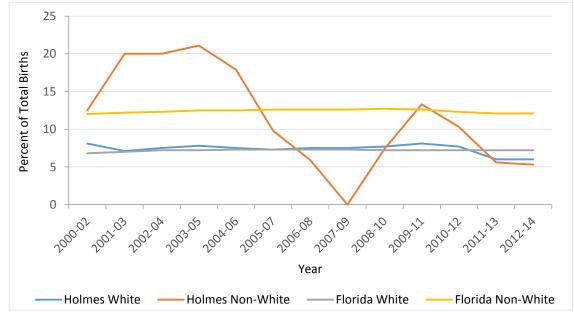


FIGURE 71. PERCENT OF TOTAL BIRTHS WITH LOW BIRTH WEIGHT, ALL RACES/ETHNICITIES, 3-YEAR ROLLING RATES, 2000-2014





<sup>&</sup>lt;sup>49</sup> U.S. Centers for Disease Control and Prevention. (2009, October 29). *PedNSS Health Indicators*. Retrieved from CDC.gov: http://www.cdc.gov/ pednss/what\_is/pednss\_health\_indicators.htm#birthweight

# **Health Behaviors**

## Behavioral Risk Factor Surveillance System (BRFSS)

The Centers for Disease Control and Prevention began the Behavioral Risk Factor Surveillance System Survey (BRFSS) in 1986. BRFSS uses a statewide telephone survey to make population-based estimates of the prevalence of various health conditions and related risky behaviors. The 2013 county-level BRFSS is the most recent county-level effort. Over 34,000 interviews were completed in the 2013 calendar year, with a target sample size of 500 completed surveys in each county.

The 2013 BRFSS provides counties and the state with a rich data source to estimate the prevalence of personal health behaviors that contribute to morbidity and mortality among adults in Florida. This report presents the survey data on a variety of issues related to health status, healthcare access, lifestyle, chronic illnesses, and disease prevention practice. Findings can also be used to: (1) prioritize health issues and identify populations at highest risk for illness, disability, and death; (2) plan and evaluate prevention programs; (3) educate the community and policy makers about disease prevention; and (4) support community policies that promote health and prevent disease.

A total of 439 surveys were completed in Holmes County during 2013. Due to a modification in methodology, in both weighting responses and cell phone utilization, data from 2013 may not be comparable to data collected prior to 2011. Some of the key BRFSS findings for Holmes County are presented in Figure 73.

Alcohol Consumption	Holmes County	Florida
Adults who engage in heavy or binge drinking	11.1%	17.6%
Cancer Screenings	Holmes County	Florida
Adults 50 years of age and older who received a sigmoidoscopy or colonoscopy in the past five years	45.9%	55.3%
Adults 50 years of age and older who have ever had a sigmoidoscopy or colonoscopy	59.7%	69.3%
Adults 50 years of age and older who have ever had a stool blood test	23.8%	37.6%
Adults 50 years of age and older who received a stool blood test in the past year	12.0%	13.9%
Adults aged 50 to 75 who had colorectal screening based on the most recent clinical guidelines	57.9%	64.7%
Women who have had a hysterectomy	33.7%	24.7%
Women 18 years of age and older who had a clinical breast exam in the past year	48.0%	56.0%
Women 18 years of age and older who received a Pap test in the past year	46.5%	51.4%
Women aged 21 to 65 who had a Pap test in the past 3 years	80.6%	80.1%
Women 40 years of age and older who had a clinical breast exam in the past year	44.6%	58.8%
Women aged 40 to 74 years who received a mammogram in the past year	47.3%	57.5%
Women aged 50 to 74 who had a mammogram in past 2 years	67.5%	77.4%

#### FIGURE 73. SELECTED BRFSS DATA FOR HOLMES COUNTY & FLORIDA, 2013

Diabetes Management	Holmes County	Florida
Average age at which diabetes was diagnosed	50.1	50.8
Adults with diabetes who self-monitor blood glucose at least once a day on average	76.5%	61.8%
Adults with diabetes who had two A1C tests in the past year	86.1%	69.3%
Adults with diabetes who had an annual foot exam	59.8%	67.6%
Adults with diabetes who had an annual eye exam	56.7%	69.7%
Adults with diabetes who ever had diabetes self-management education	44.4%	49.6%
Adults who have ever been told they had pre-diabetes	4.8%	7.1%
Adults who have ever been told they had diabetes	14.4%	11.2%
Healthcare Access and Coverage	Holmes County	Florida
Adults who could not see a doctor at least once in the past year due to cost	23.0%	20.8%
Adults who had a medical checkup in the past year	70.5%	70.3%
Adults who have a personal doctor	75.5%	73.2%
Adults with any type of healthcare insurance coverage	76.3%	77.1%
Quality of Life	Holmes County	Florida
Adults who had poor mental health on 14 or more of the past 30 days	13.2%	12.7%
Adults who had poor physical health on 14 or more of the past 30 days	18.9%	14.1%
Adults who said their overall health was "fair" or "poor"	25.9%	19.5%
Adults who said their overall health was "good" to "excellent"	74.1%	80.5%
Adults whose poor physical or mental health kept them from doing usual activities on 14 or more of the past 30 days (Among adults who have had at least one day of poor mental or physical health)	24.0%	16.4%
Adults with good mental health	86.8%	87.3%
Adults with good physical health	81.1%	85.9%
Average number of days where poor mental or physical health interfered with activities of daily living in the past 30 days (Among adults who have had at least one day of poor mental or physical health)	6.7	5.1
Average number of unhealthy mental days in the past 30 days	4.1	4.1
Average number of unhealthy physical days in the past 30 days	5.5	4.5
HIV/AIDS	Holmes County	Florida
Adults less than 65 years of age who had an HIV test in the past 12 months	15.4%	15.6%
Adults less than 65 years of age who have ever been tested for HIV	52.1%	50.6%
Adults who had ever been tested for HIV	41.5%	42.6%

Physical Activity and Nutrition	Holmes County	Florida
Adults who are obese	30.7%	26.4%
Adults who are overweight or obese	63.8%	62.8%
Adults who are overweight	33.2%	36.4%
Adults who have a healthy weight	33.1%	35.0%
Adults who consumed five or more servings of fruits or vegetables per day	8.0%	18.3%
Adults who consumed three or more servings of vegetables per day	10.0%	17.0%
Adults who consumed two or more servings of fruit per day	17.5%	32.0%
Adults who are sedentary	35.2%	27.7%
Adults who are inactive or insufficiently active	62.0%	52.9%
Adults who meet aerobic recommendations	38.1%	50.2%
Adults who meet muscle strengthening recommendations	26.7%	29.6%
Hypertension Awareness and Control	Holmes County	Florida
Adults who have ever been told they had hypertension	45.2%	34.6%
Adults with hypertension who currently take high blood pressure medicine	75.8%	79.4%
Tobacco Use	Holmes County	Florida
Adult current smokers who tried to quit smoking at least once in the past year	64.0%	61.1%
Adults who are current smokers	23.8%	16.8%
Adults who are former smokers (currently quit smoking)	27.0%	28.1%
Adults who have never smoked	49.2%	55.0%

Source: Behavioral Risk Factor Surveillance System, 2013 Survey

# Florida Youth Substance Abuse Survey

The Florida Youth Substance Abuse Survey (FYSAS) is an annual, statewide school-based survey effort that measures the prevalence of alcohol, tobacco, and other drug use; delinquent behaviors; and the risk and protective factors related to these behaviors. The 2014 FYSAS was answered by 575 Holmes County students in grades 6–12. Key findings revealed alcohol is the most commonly used substance among Holmes County students, with prevalence rates of 38.0% for lifetime use and 18.4% for past 30 day use. After alcohol, students reported cigarettes (29.5% for lifetime use and 9.4% for past 30 day) and marijuana (17.4% lifetime and 8.3% past 30 day) as the most commonly used substances. Further, 21.4% of high school students reported blacking out after drinking on one or more occasions. Additional findings are listed below:

- In Holmes County, past 30 day alcohol use was reported at 18.4%, compared to 20.5% statewide.
- Lifetime trend in alcohol use decreased from 42.1% in 2012 to 38.0% in 2014.
- After increasing to 19.7% in 2010, lifetime trend in marijuana use decreased to 17.4% in 2014.
- Past 30-day marijuana use was reported at 8.3% in Holmes County, compared to 12.4% across the state.
- In Holmes County, 9.4% of students reported the use of cigarettes in the past 30 days, compared to 4.9% state statewide.
- Past 30-day inhalant use was reported at 1.8% compared to 2.1% across the state.
- Among high school students, 3.9% reported the use of over-the-counter drugs in the past 30 days, a rate higher than any other illicit drug (except marijuana).

# **Sexually Transmitted Infections**

#### Syphilis, Gonorrhea, & Chlamydia

Sexually transmitted diseases (STDs) are among the most common infectious diseases in the United States today, affecting more than 13 million men and women each year.<sup>50</sup> Holmes County has a lower rate of STDs than Florida as a whole, with Chlamydia being the most prevalent (Figure 74).

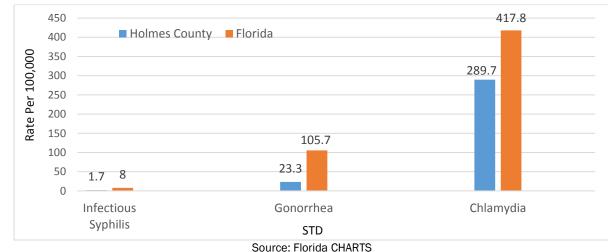
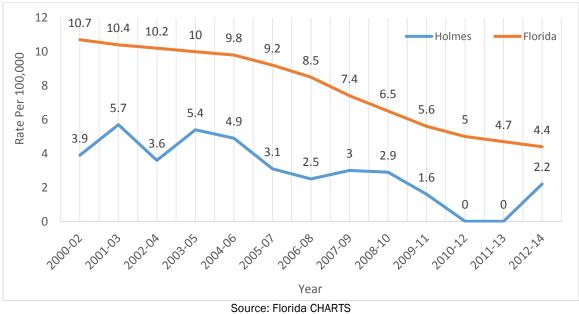


FIGURE 74. SYPHILIS, GONORRHEA, & CHLAMYDIA RATES, 3-YEAR ROLLING, 2012-2014

#### HIV/AIDS

The mortality rate for HIV/AIDS has been declining in both Holmes County and Florida over the past decade. Holmes County hit zero deaths per 100,000 population in 2010-2012, but saw a spike to 2.2 deaths per 100,000 in 2012-2014, though the county remains below the state average (Figure 75).





<sup>&</sup>lt;sup>50</sup> U.S. Centers for Disease Control and Prevention. (2015, February 6). *Leading Causes of Death*. Retrieved from CDC.gov: http://www.cdc.gov/nchs/fastats/leading-causes-of-death.htm

# Clinical Care

The general phrase "Access to Care" is ambiguous in that it does not clearly define what type of care is needed, nor does it specify how access is determined or measured. The U.S. Health Resources and Services Administration (HRSA) states "access to healthcare is generally related to the ability of individuals in a population group to obtain appropriate services to diagnose and treat health problems and symptoms." The Administration adds that a variety of factors can influence access to healthcare for an individual or family, including: availability of health insurance or means of paying for needed services, sufficient numbers of appropriate health professionals to serve all those needing services, and availability of appropriate healthcare organizations within reasonable travel times.<sup>51</sup> This section will review some of the commonly examined indicators for access to care in relation to Holmes County.

## Health Insurance Coverage

Health insurance coverage, whether privately or publicly funded, is a primary factor in determining access to care for many people. Health insurance is obtained privately through an employer (the individual's own or an immediate family member), purchased independently, or available to certain individuals through government subsidized or publicly funded health coverage programs, such as Medicare, Medicaid, or Military and VA benefits. Government programs have specific eligibility requirements and are not available to everyone.

Persons who are uninsured include both full- and part-time employees whose employers do not offer health insurance benefits, low-income persons who do not qualify for Medicaid, early retirees, and others who simply cannot afford costly premiums. Evidence shows uninsured persons experience less positive medical outcomes than their insured counterparts. The uninsured are also less likely to have a regular source of primary care or seek preventive health services.<sup>52</sup>

Figure 76 shows data on health insurance coverage for the populations of Holmes County, Florida, and the United States from 2010-2014. Numbers in the table will not add up to 100% as some persons use several types of insurance. Florida did not expand Medicaid coverage with the Patient Protection and Affordable Care Act, causing the rate of uninsured people in Florida to vary from the national average, thus data on insurance coverage in the U.S. is shown for comparison purposes.

Approximately 82% of citizens in Holmes County have health insurance, which is higher than the state rate but lower than the U.S. rate. Half of Holmes County residents have private health insurance, lower than the portion of the population in Florida (58%) and the United States (66%). A greater portion of Holmes County residents (44%) use public health insurance coverage than in Florida (34%) or the U.S. (31%).

#### FIGURE 76. HEALTH INSURANCE COVERAGE STATUS IN HOLMES COUNTY, FLORIDA, & THE U.S., 2010-2014

	Holmes	Florida	U.S.
Total civilian noninstitutionalized population w/ insurance	81.6%	80.4%	85.8%
HEALTH COVERAGE BY TYPE			
Private health insurance	50.0%	58.2%	65.8%
Private health insurance alone	36.1%	44.6%	52.7%
Employment-based health insurance	35.2%	45.0%	54.7%
Employment-based health insurance alone	28.0%	36.9%	46.1%
Direct-purchase health insurance	13.1%	13.6%	12.4%

<sup>&</sup>lt;sup>51</sup> U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), 2010

<sup>&</sup>lt;sup>52</sup> Cover the Uninsured, a National project of the Robert Wood Johnson Foundation, 2010

Direct-purchase health insurance alone	6.3%	6.4%	5.5%
TRICARE/military health coverage	5.3%	3.5%	2.7%
TRICARE/military health coverage alone	1.8%	1.3%	1.1%
Public coverage	44.2%	34.2%	31.1%
Public coverage alone	25.8%	19.1%	17.6%
Medicare coverage	24.0%	19.9%	15.5%
Medicare coverage alone	7.7%	6.5%	4.1%
Medicaid/means-tested public coverage	25.2%	16.9%	17.8%
Medicaid/means-tested public coverage alone	17.0%	12.1%	13.1%
VA Health Care	4.5%	2.9%	2.1%
VA Health Care alone	1.1%	0.4%	0.3%
Uninsured	18.4%	19.6%	14.2%

Source: 2010-2014 American Community Survey 5-Year Estimates, Table S2701

Figure 77 shows data on the uninsured population in Holmes County, Florida, and the United States from 2010-2014. Holmes County has a lower rate of uninsured persons (18.4% of Holmes residents lack insurance) compared to Florida (19.6% uninsured), but a higher rate than the national average (14.2%).

Holmes County has a lower rate of uninsured children (6.8%) and older adults (0.7%) than Florida and the U.S., but a higher rate of uninsured adults and young adults. Approximately 41% of young adults aged 19-25 lack insurance in Holmes compared to 36% in Florida and 27% in the U.S. Minorities, other than Black/African American, have a much higher portion of uninsured than the white population within Holmes.

Being employed does not guarantee insurance coverage. Among the population ages 18 and older in Holmes County, 23% of employed individuals are uninsured, which mirrors the state average but is higher than the national average of 16%. More than two-thirds of the unemployed population in Holmes County is uninsured. Additionally, 17% of Holmes residents with full-time employment are uninsured. About 45% of Holmes residents with part-time employment are uninsured, which is well above the rate in both Florida and the U.S. (Figure 77).

	Holmes	Florida	U.S.			
	Pe	Percent Uninsured				
Total civilian noninstitutionalized population	18.4%	18.4% 19.6% 14				
AGE						
Under 18 years	6.8%	11.2%	7.1%			
18 to 64 years	28.7%	27.9%	19.8%			
65 years and older	0.7%	1.5%	1.0%			
19 to 25 years	40.5%	36.3%	26.5%			
RACE AND HISPANIC OR LATINO ORIGIN						
White alone	18.3%	18.1%	12.6%			
Black or African American alone	15.8%	23.7%	16.7%			
American Indian and Alaska Native alone	31.5%	31.5%	26.8%			
Asian alone	55.0%	21.7%	14.1%			
Native Hawaiian and Other Pacific Islander alone	27.3%	26.6%	17.0%			
Some other race alone	64.5%	37.2%	31.6%			
Two or more races	0.0%	18.1%	13.3%			
White alone, not Hispanic or Latino	18.4%	13.9%	9.9%			
Hispanic or Latino (of any race)	33.4%	30.8%	28.1%			

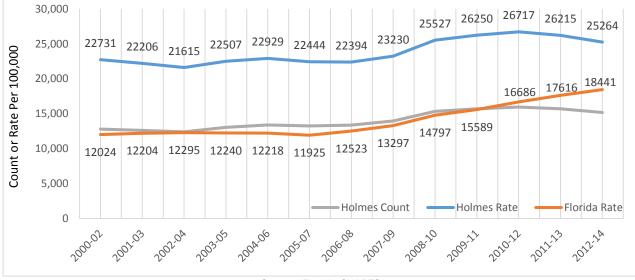
FIGURE 77. DEMOGRAPHICS OF THE UNINSURED IN HOLMES COUNTY, FLORIDA, & THE U.S., 2010-2014

EMPLOYMENT STATUS			
Civilian noninstitutionalized population 18 years & older	21.7%	21.8%	16.4%
In labor force	29.1%	26.6%	18.6%
Employed	23.4%	23.6%	16.2%
Unemployed	69.6%	52.3%	42.6%
Not in labor force	13.9%	14.1%	12.2%
WORK EXPERIENCE			
Worked full-time, year round in past 12 months	17.2%	19.7%	13.1%
Worked less than full-time, year round in past 12 months	44.8%	34.0%	24.8%
Did not work	14.1%	16.8%	14.2%

Source: 2010-2014 American Community Survey 5-Year Estimates, Table S2701

While the median monthly Medicaid enrollment rate has steadily increased since 2005-2007 in Florida, the enrollment rate in Holmes decreased by about 1,500 people per month from 2010-2012 to 2012-2014. The enrollment rate in Holmes County remains above the state average (Figure 78).

FIGURE 78. MEDIAN MONTHLY MEDICAID ENROLLMENT IN HOLMES COUNTY & FLORIDA, 3-YEAR ROLLING, 2010-2014



Source: Florida CHARTS

#### **Coverage for Children**

Federal government provisions for children's health coverage include Medicaid and Title XXI of the Social Security Act. In Florida, the KidCare Act of 1997 created the Healthy Kids and MediKids programs and established eligibility requirements for coverage. There are four general categories of children's coverage in Florida.<sup>53</sup>

- Medicaid covers children from birth though 18 years. Eligibility is based on the child's age and household income. Children under age 1 are covered if the household income is below 200% of the federal poverty level (FPL). Children ages 1-5 are covered if household income is less than 133% of FPL. Children ages 6 through 18 are covered if household income is below 100% of FPL.
- 2. MediKids covers children ages 1-5 whose income is between 134-200% of the federal poverty level.
- 3. The Healthy Kids program provides medical coverage for children ages 5–19 in households whose income is between 100–200% of the federal poverty level (FPL).

<sup>53</sup> Florida Agency for Health Care Administration (AHCA), Florida KidCare program, 2010

4. Children's Medical Services covers children from birth through 18 who have special behavioral or physical health needs or chronic medical conditions.

Enrollment figures for the above-described programs for January 2014-2016 are shown in Figure 79 for both Holmes County and Florida.

Holmes	Healthy Kids Total	MediKids Total	CMS	Active Children All Programs
January 2014	218	25	20	263
January 2015	156	13	18	187
January 2016	123	14	9	146
Florida	HK Total	MK Total	CMS	Active Children All Programs
January 2014	222,767	32,801	19,101	274,669
January 2015	180,791	29,476	14,765	225,032
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#### FIGURE 79. FLORIDA HEALTHY KIDS COVERAGE IN HOLMES COUNTY & FLORIDA, 2014-2016

Source: www.healthykids.org/resources/enrollment

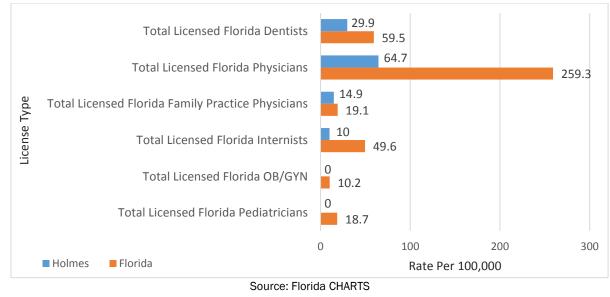
# Healthcare System

#### **Primary Care**

Primary Care Providers (PCPs) give routine medical care for the prevention, diagnosis, and treatment of common medical conditions. Primary care is intended to be the entry point into the healthcare system for non-emergent services. PCPs then refer patients requiring additional care to specialists for treatment. In this way, primary care providers often serve as "gatekeepers" for the healthcare system and play an important role in the coordination of care in today's managed care environment. The U.S. Health Resources and Services Administration (HRSA) considers general and family practitioners, internists, pediatricians, obstetricians and gynecologists, physician assistants, and nurse practitioners as primary care providers. Additionally, public health nurses and school nurses provide primary care services to designated populations.

Overall, Holmes County has a significantly lower number of licensed physicians than the state average (64.7 versus 259.3 per 100,000 people), as well as significantly fewer dentists and internists (Figure 80).

FIGURE 80. TOTAL LICENSED PROVIDERS, HOLMES COUNTY & FLORIDA, FY 2014-2015

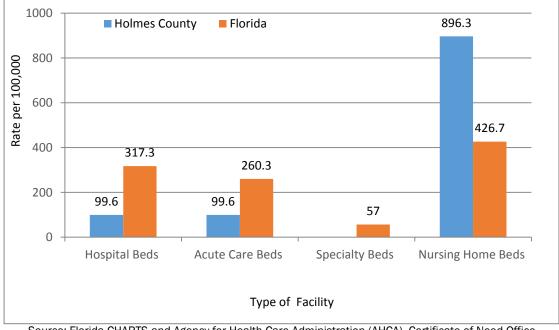


#### Health Department

In 2014, Holmes County had a rate of 239 full-time employees per 100,000 people working at the county health department compared to a rate of 51 per 100,000 in Florida. Holmes County also has a greater rate of expenditures per 100,000 people than the state average. In 2014, the county spent \$150.94 per person compared to a state average of \$37.21 per person.<sup>54</sup>

#### **Healthcare Facilities**

Acute care hospitals play a key role in delivery of healthcare services, especially in communities where primary and specialist outpatient care shortages may exist. In addition to traditional inpatient services, hospitals may provide extensive diagnostic and treatment services on an outpatient basis. Holmes County has a lower rate of total hospital beds, acute care beds, and specialty beds per 100,000 population than Florida; however, Holmes County has a significantly higher rate of nursing home beds than the state average (Figure 81).



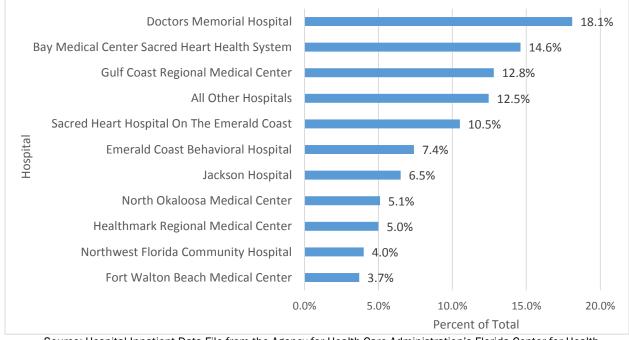
#### FIGURE 81. HEALTHCARE FACILITY BEDS IN HOLMES COUNTY & FLORIDA, 2014

Source: Florida CHARTS and Agency for Health Care Administration (AHCA), Certificate of Need Office

Figure 82 shows the top ten hospitals used by Holmes County residents by number of discharges from January 1, 2014 to December 31, 2014. Doctors Memorial Hospital is the most frequently used hospital among Holmes County residents, capturing 18.1% of discharges. Bay Medical Center Sacred Heart Health System is the second most used hospital (14.6% of discharges), followed by Gulf Coast Regional Medical Center (12.8%).

<sup>&</sup>lt;sup>54</sup> Florida Department of Health, Division of Medical Quality Assurance, Agency for Health Care Administration.

#### FIGURE 82. HOSPITALS MOST FREQUENTLY USED BY HOLMES RESIDENTS BY PERCENT OF TOTAL DISCHARGES, 2014



Source: Hospital Inpatient Data File from the Agency for Health Care Administration's Florida Center for Health Information and Policy Analysis via HealthScope Software Solutions Medi-Dat System

Local hospital Emergency Room (ER) utilization rates can be an indicator of the availability and accessibility of healthcare services in an area. Many ER visits are preventable or involve conditions that may be more appropriately cared for in a primary care setting. ER visits do not necessarily result in hospital admissions. Figure 83 shows emergency department outpatient visits at Doctors Memorial Hospital, which have decreased since 2009.

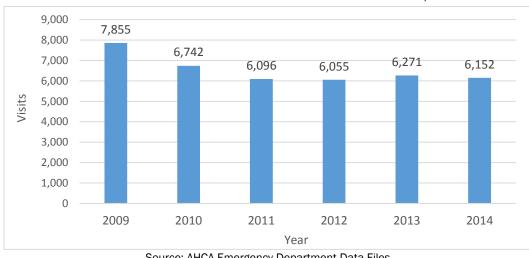


FIGURE 83. DOCTORS MEMORIAL HOSPITAL EMERGENCY DEPARTMENT OUTPATIENT VISITS, 2009-2014

Figure 84 shows the total number of hospital admissions in Holmes County, as well as the number of patients admitted via the emergency department. About 45% of admissions came through the emergency department in 2014.

Source: AHCA Emergency Department Data Files

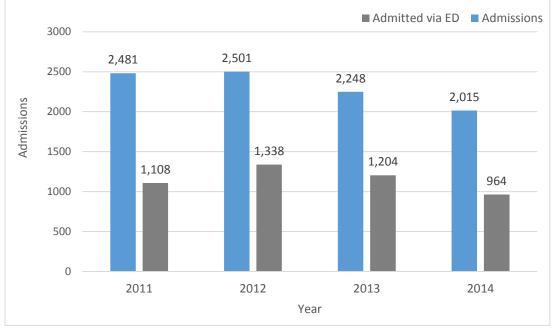


FIGURE 84. TOTAL ADMISSIONS & ADMISSIONS VIA EMERGENCY DEPARTMENT IN HOLMES COUNTY, 2011-2014

Source: Hospital Inpatient Data File from the Agency for Health Care Administration's Florida Center for Health Information and Policy Analysis via HealthScope Software Solutions Medi-Dat System

#### Top Diagnoses by DRGs

The purpose or reason for a hospital admission can often be determined by the primary diagnosis code documented at the time of the patient's discharge. Hospitals code within Diagnosis Related Groups (DRGs) as a standard for documentation and billing purposes.

In 2014, the top Medicare Severity DRG among Holmes County adults was psychoses (14.4% of total discharges), followed by vaginal delivery without complicating diagnoses (13.6%) and chronic obstructive pulmonary disease with major complication or comorbidity (MCC) (8%). The average charge of a psychoses case was \$13,921, a vaginal delivery without complications \$12,665, and a chronic obstructive pulmonary disease case \$25,933. The most expensive cases were septicemia without mechanical ventilation (MV) 96+ hours with MCC, which had an average charge of \$73,310, and major joint replacement or reattachment of lower extremity without MCC with an average charge of \$73,232 (Figure 85).

Among children ages 17 and under, the top Medicare Severity DRGs included normal newborn (55.8% of total discharges), psychoses (11.2% of discharges), and neonate with other significant problems (6.4% of total discharges). The average charge for a normal newborn case was \$2,646, a psychoses cases \$8,816, and a neonate with other significant problems \$4,489. The most expensive cases were neonates, died or transferred to another acute care facility, with an average charge of \$114,645 and prematurity with major problems with an average charge of \$92,736 (Figure 86).

Medicare Severity DRG (MS DRG) Description	Discharges	% of Tot.	Discharge Rank	Avg. LOS	Average Charge	18-64	65+	Gov. Ins.	Com. Ins
Psychoses	94	14.4%	1	6.8	\$13,921	84	10	54	40
Vaginal delivery w/o complicating diagnoses	89	13.6%	2	2.2	\$12,665	89	0	72	17
Chronic obstructive pulmonary disease w MCC Cellulitis w/o MCC	52 48	8.0% 7.3%	3	4.1 4.5	\$25,933 \$17,028	25 30	27 18	47 35	5 13
Kidney & urinary tract infections w/o MCC	47	7.2%	5	3.3	\$13,566	9	38	46	1
Simple pneumonia & pleurisy w CC	45	6.9%	6	3.9	\$21,327	14	31	38	7
Major joint replacement or reattachment of lower extremity w/o MCC	38	5.8%	7	2.9	\$73,232	14	24	24	14
Chronic obstructive pulmonary disease w/o CC/MCC	34	5.2%	8	3.3	\$13,493	17	17	31	3
Esophagitis, gastroent & misc digest disorders w/o MCC	33	5.0%	9	3.2	\$26.092	16	17	28	5
Rehabilitation w CC/MCC	32	4.9%	10	12.6	\$29,028	11	21	31	1
Septicemia w/o MV 96+ hours w MCC	31	4.7%	11	7.8	\$73,310	9	22	29	2
Cesarean section w/o CC/MCC	29	4.4%	12	2.3	\$22,007	29	0	23	6
Heart failure & shock w CC	29	4.4%	12	3.7	\$19,681	7	22	27	2
Simple pneumonia & pleurisy w/o CC/MCC	28	4.3%	14	3.8	\$12,005	4	24	26	2
Vaginal delivery w complicating diagnoses	25	3.8%	15	2.2	\$13,948	25	0	18	7
Source: Hospital Innationt Data File fi	654			4.4	\$23,543	383	271	529	125

#### FIGURE 85. TOP 15 MEDICARE SEVERITY DRGS AMONG HOLMES COUNTY ADULTS, 2014

Source: Hospital Inpatient Data File from the Agency for Health Care Administration's Florida Center for Health Information and Policy Analysis via HealthScope Software Solutions Medi-Dat System

Medicare Severity DRG (MS DRG) Description	Discharges	% of Tot.	Discharge Rank	Avg. LOS	Average Charge	0-17	Gov. Ins.	Com. Ins
Normal newborn	139	55.8%	1	2.0	\$2,646	139	116	23
Psychoses	28	11.2%	2	5.9	\$8,816	28	19	9
Neonate w other significant								
problems	16	6.4%	3	2.3	\$4,489	16	14	2
Prematurity w/o major problems	9	3.6%	4	4.6	\$13,239	9	8	1
Prematurity w major problems	8	3.2%	5	17.3	\$92,736	8	8	0
Cellulitis w/o MCC	8	3.2%	5	2.6	\$6,377	8	8	0
Neuroses except depressive	7	2.8%	7	3.6	\$4,908	7	5	2
Vaginal delivery w/o complicating								
diagnoses	6	2.4%	8	2.0	\$4,563	6	6	0
Depressive neuroses	5	2.0%	9	4.4	\$8,715	5	5	0
Full term neonate w major								
problems	5	2.0%	9	5.4	\$24,864	5	5	0
Nutritional and misc metabolic disorders w/o MCC	4	1.6%	11	2.8	\$6,966	4	3	1
Esophagitis, gastroent and misc digest disorders w/o MCC	4	1.6%	11	1.5	\$27,745	4	4	0
Bronchitis and asthma w/o CC/MCC	4	1.6%	11	1.5	\$6,394	4	4	0
Neonates, died or transferred to								
another acute care facility	3	1.2%	14	6.3	\$114,645	3	3	0
Cardiac congenital and valvular								
disorders w/o MCC	3	1.2%	14	1.3	\$23,730	3	3	0
	249			3.3	\$9,669	249	211	38

FIGURE 86. TOP 15 MEDICARE SEVERITY DRGS AMONG HOLMES COUNTY CHILDREN, 2014

Source: Hospital Inpatient Data File from the Agency for Health Care Administration's Florida Center for Health Information and Policy Analysis via HealthScope Software Solutions Medi-Dat System

# Local Public Health System Assessment

The National Public Health Performance Standards Program (NPHPSP) was developed by the U.S. Department of Health and Human Services (DHHS) to provide measurable performance standards public health systems can use to ensure delivery of public health services. The Local Public Health System Assessment (LPHSA) is a tool from the NPHPSP used to examine competency, capacity, and provision of health services at the local level. The DHHS defines the public health systems as "all public, private, and voluntary entities that contribute to the delivery of essential public health services within a jurisdiction."<sup>55</sup>

The 10 Essential Public Health Services outline the public health activities that should be undertaken in all communities, providing the fundamental framework for the LPHSA.<sup>56</sup> The LPHSA instrument is divided into ten sections, assessing the local public health system's ability to provide each Essential Service. The 10 Essential Public Health Services are:

- 1. **Monitor** health status to identify community health problems.
- 2. Diagnose and investigate health problems and health hazards in the community.
- 3. Inform, educate, and empower people about health issues.
- 4. Mobilize community partnerships to identify and solve health problems.
- 5. Develop policies and plans that support individual and community health efforts.
- 6. **Enforce** laws and regulations that protect health and ensure safety.
- 7. **Link** people to needed personal health services and assure the provision of healthcare when otherwise unavailable.
- 8. **Assure** a competent public and personal healthcare workforce.
- 9. **Evaluate** effectiveness, accessibility and quality of personal and population-based health services.
- 10. **Research** for new insights and innovative solutions to health problems.

Holmes County stakeholders were sent a survey to review and score each of the ten essential public health services. Participants were asked questions about each essential service and scored each service using recommended scoring levels provided in the assessment instrument. The scoring levels are as follows:

- Optimal Activity (76-100%): Greater than 75% of the activity described within the question is met.
- Significant Activity (51-75%): Greater than 50% but no more than 75% of the activity described within the question is met.
- Moderate Activity (26-50%): Greater than 25% but no more than 50% of the activity described within the question is met.
- Minimal Activity (1-25%): Greater than zero but no more than 25% of the activity described within the question is met.
- No Activity (0%): 0% or absolutely no activity.

Figure 87 provides the overall score for each of the ten essential services, as determined by the Holmes County stakeholders. It is important to remember that these scores consider the county's complete public health/safety-net services system and are not limited to activities performed directly by the county health department. Holmes County performs best in Essential Services 1, 2, and 4 and worst in Essential Services 6, 9, and 10.

<sup>&</sup>lt;sup>55</sup> U.S. Centers for Disease Control and Prevention. (2015). *National Public Health Performance Standards (NPHPS)*. Retrieved from CDC.gov: http://www.cdc.gov/nphpsp/

<sup>&</sup>lt;sup>56</sup> U.S. Centers for Disease Control and Prevention. (2015). National Public Health Performance Standards (NPHPS).

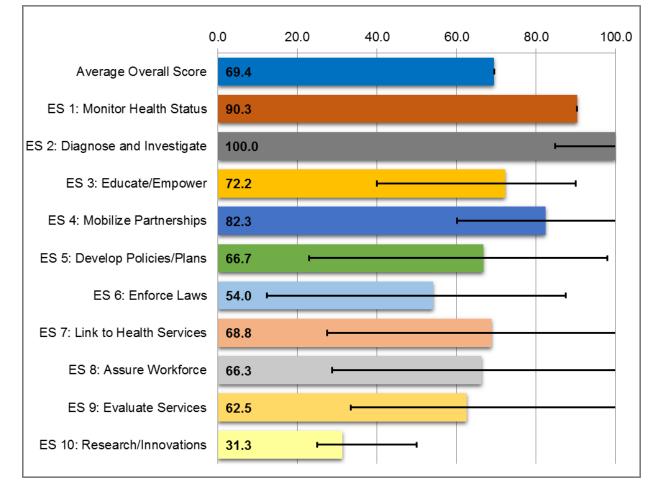


FIGURE 87. ESSENTIAL PUBLIC HEALTH SERVICE PERFORMANCE SCORE SUMMARY, 2015

Figure 88 shows further breakdown of the performance scores for essential services (6) Enforce Laws, (9) Evaluate Services, and (10) Research/Innovations. These were the essential services most in need of improvement, as identified by the Local Public Health System Assessment stakeholders.

FIGURE 88.	DETAILED	PERFORMANCE	SCORES FOR	ESSENTIAL	SERVICES	6, 9, AND 10
------------	----------	-------------	------------	-----------	----------	--------------

ES 6: Enforce Laws	54.0			
6.1 Review Laws	68.8			
6.2 Improve Laws	33.3			
6.3 Enforce Laws	60.0			
ES 9: Evaluate Services	62.5			
9.1 Evaluation of Population Health	56.3			
9.2 Evaluation of Personal Health	75.0			
9.3 Evaluation of LPHS	56.3			
ES 10: Research/Innovations	31.3			
10.1 Foster Innovation	43.8			
10.2 Academic Linkages	25.0			
10.3 Research Capacity	25.0			

# Forces of Change

One of the components of the Holmes County Community Health Assessment process is the Forces of Change (FOC) Assessment. The purpose of this assessment is to identify what impending changes will affect the community in which the public health system operates.

This assessment will answer the question, "What is occurring or might occur that affects the health of our community or the local public health system?" This FOC assessment will result in a comprehensive, but focused, list that identifies key forces and describes their impact.

The Healthy Holmes Task Force (HHTF) members considered forces from three major categories:

- ✓ Forces are a broad, all-encompassing category that includes trends, events and factors.
- ✓ Trends are patterns over time, such as migration in and out of a community or a growing disillusionment with government.
- ✓ Factors are discrete elements, such as a community's large ethnic population, or rural setting, or the jurisdiction's proximity to a major waterway.
- ✓ Events are one-time occurrences, such as a hospital closure, a natural disaster, or the passage of new legislation.

The HHTF consider a variety of perspectives when identifying potential forces of change, including:

- Political forces such as policy/legislation, budgeting, and advocacy
- Economic forces such as changes in employment/income, program funding levels, and the stability of industry and trade within the county
- Social forces such as population demographics, cultural norms, and violence/crime/safety
- Technological forces such as healthcare advances, information technology, and communications
- Ethical/Legal forces such as privacy and end of life issues

In choosing the forces, the HHTF reflected on the following questions:

- What has occurred recently that may affect our local public health system or community?
- What may occur in the future?
- Are there any trends occurring that will have an impact locally?
- What forces are occurring locally? Regionally? Nationally? Globally?
- What characteristics of our jurisdiction or state may pose an opportunity or threat?
- What may occur or has occurred that may pose a barrier to achieving the shared vision?

The anticipated forces of change identified by the HHTF, along with the potential impacts (both positive and negative), are included in the lists below.

The top ranked political forces include:

- 1. The upcoming presidential election
- 2. Move toward smaller government with the goal of cost savings/increased efficiency
- 3. Little trust in elected officials

The top ranked economic forces include:

- 1. Lack of jobs and increasing unemployment
- 2. Lack of diversity of industries
- 2. Stagnant or decreasing funding for public programs
- 2. High rates of poverty

The top ranked social forces include:

- 1. Increase in violence/crime
- 1. Increase in mental health issues

The top ranked technological forces include:

- 1. Increasing technology requirements (electronic health records)
- 2. New technologies driving the need for technology
- 3. Increased pervasiveness and reliance on evolving technology

The top ranked ethical/legal forces include:

- 1. Implementation of the Patient Protection and Affordable Care Act
- 2. Lack of Medicaid expansion in the state of Florida
- 3. Less public trust due to county corruption issues

Some survey respondents listed additional forces, trends, factors events that did not necessarily fit into the political, technological, or ethical/legal categories. These included:

- Lack of public transportation (2)
- Departure of young adults to more urban areas to find work/live closer to job site
- Lack of quick contact with medical specialists
- Lack of long term mental healthcare for serious problems
- High cost of medications even with insurance
- Individuals' apathy about diet programs and health issues

# **Community Participation**

A core element of the MAPP model is the *Community Strengths and Themes Assessment*. As noted in the Florida MAPP Field Guide, this portion of the planning process is intended to generate direct feedback from community residents regarding perceptions of their own health, community health, and access to healthcare services. This assessment attempts to generate a better understanding of community health issues and concerns as well as residents' quality of life. The themes and issues identified during this phase often offer insight into the information discovered through the other assessments.

The Health Planning Council of Northeast Florida (HPCNEF) conducted two focus groups in December 2015 with the cooperation of the Florida Department of Health–Holmes County. The purpose of conducting the focus groups was to better understand the perspectives of community stakeholders on the health and healthcare needs of Holmes County residents. These focus groups were intended to ascertain opinions of stakeholders with knowledge of the community. The findings provide qualitative information, revealing community sentiments regarding healthcare services in Holmes County. A summary of community opinions is reported without assessing the veracity of participant comments.

# Community Focus Groups

Community input was solicited via two focus groups held in Holmes County during December 2015. Focus group participants were given a survey with questions about their demographics, insurance status, quality of life, health status, and more. Additionally, discussion questions were presented at the meeting for participants to answer aloud. Appendix A includes the full survey and discussion questions.

The focus groups were advertised via local newspapers, websites, flyers at strategic locations throughout the county (e.g., banks, public offices, doctors' offices, and community centers), and word of mouth. Meetings were held at two locations in Holmes County in an attempt to capture opinions from a diverse citizen base. Meeting locations included:

- Doctors Memorial Hospital in Bonifay, FL
- Holmes County Public Library in Bonifay, FL

Following the focus groups, an analysis of the focus group data was conducted to determine top themes and issues discussed by community participants. Using field notes and recordings of the focus groups, participant responses were grouped into categories and weighted based on the frequency, extensiveness, and intensity with which a category or topic was discussed. Frequency relates to how often a comment or topic was mentioned. Extensiveness relates to how in depth a comment or topic was discussed. Intensity relates to whether a comment was discussed with greater strength/depth of feeling.<sup>57</sup>

# Focus Group Demographics

A total of 29 participants in attendance at the focus groups filled out the demographic survey. The majority of participants were over age 40, female, white, and college graduates. Of the 29 participants, 23 (about 80%) were female and approximately 90% of participants were white. More than half (about 70%) of participants were 40 or older (Figure 89). Most participants (62%) had an educational level of a bachelor's degree or higher (Figure 90).

<sup>&</sup>lt;sup>57</sup> Krueger, R. A. (2002). Designing and Conducting Focus Group Interviews. St. Paul: University of Minnesota. Retrieved from http://www.eiu.edu/~ihec/Krueger-FocusGroupInterviews.pdf

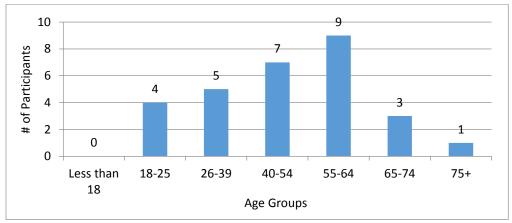
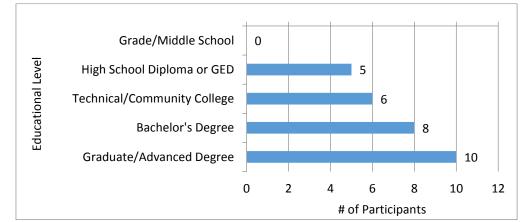


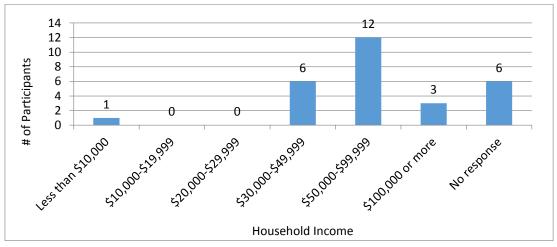
FIGURE 89. AGE DISTRIBUTION OF FOCUS GROUP PARTICIPANTS



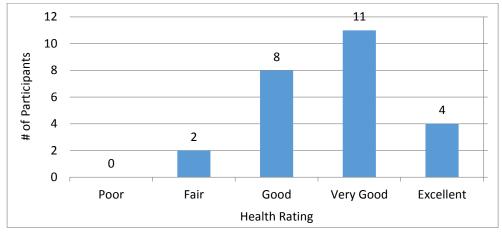


Of participants who responded to the income question, the two largest income brackets were between \$30,000-\$49,999 and \$50,000-\$99,999. Six participants gave no response (Figure 91).

FIGURE 91. TOTAL ANNUAL HOUSEHOLD INCOME (BEFORE TAXES) OF FOCUS GROUP PARTICIPANTS



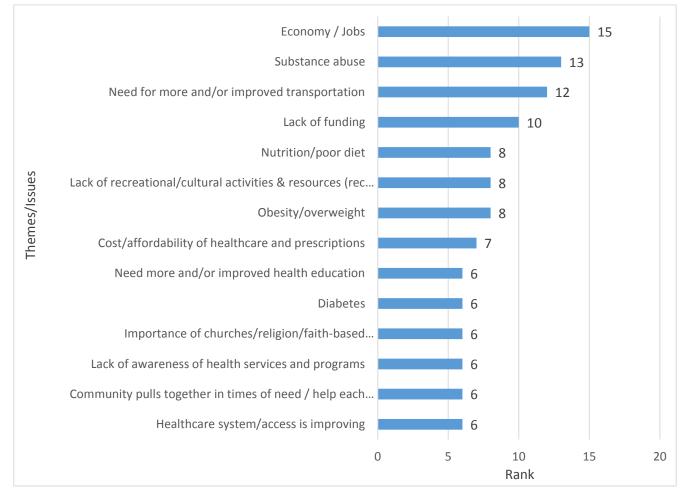
In addition to providing demographic information in the survey, participants were asked to provide information on their health. Over 90% of participants rated their own health as "Good" or better (Figure 92).



#### FIGURE 92. OVERALL SELF-RATED HEALTH OF FOCUS GROUP PARTICIPANTS

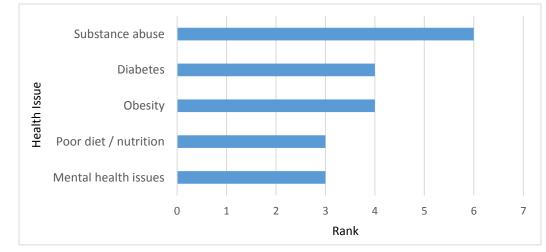
## Focus Groups Themes & Issues

Several themes and issues were discussed more frequently, extensively, and with more intensity than others throughout the duration of the focus groups. These themes came up in response to more than one question and are shown in Figure 93. Economy/Jobs was the top theme from the focus groups, followed closely by substance abuse and the need for more and/or improved transportation.



#### FIGURE 93. TOP THEMES & ISSUES DISCUSSED AMONG FOCUS GROUP PARTICIPANTS

Focus group participants were asked to name the top health status concerns in Holmes County. According to focus group participants, some of the most significant health status concerns in Holmes are substance abuse, diabetes, and obesity (Figure 94).



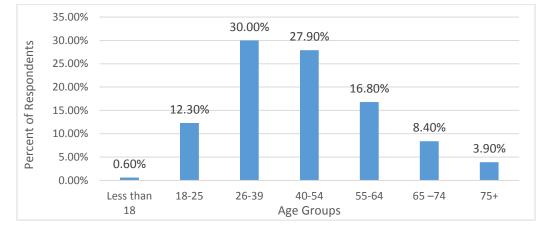


# Community Survey

In order to better understand the health status of the Holmes County community, the Healthy Holmes Task Force asked community members and stakeholders to participate in a survey on community health, healthcare services, and quality of life in Holmes County. A total of 345 community members and stakeholders in Holmes County took the community survey. Not all respondents answered every question on the survey. Percentages in the charts and narrative that follow are calculated based on the number of respondents per question, rather than the total number of respondents for the survey as a whole. Appendix B contains a copy of the community survey.

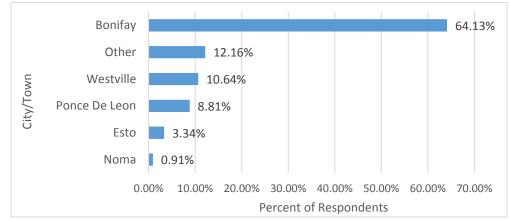
# Demographics of Survey Respondents

Three-quarters of the 326 participants who responded to the question on gender were female, and 91% (of 334 respondents) were white. Of the 333 people who responded to the question on age, more than half were in the age groups 26-39 (30%) and 40-54 (27.90%) (Figure 95).



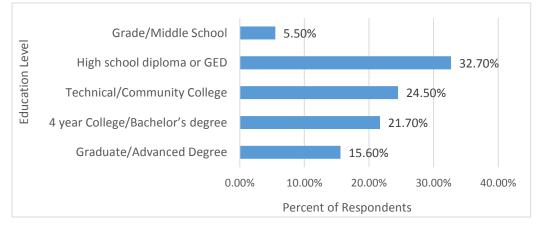
#### FIGURE 95. AGE DISTRIBUTION OF SURVEY RESPONDENTS

Most respondents were located in Bonifay (64.1%) and resided in the zip code 32425 (67.8%) (Figure 96). Of the 327 participants who responded to the question on education, 62% had an education higher than high school/GED (Figure 97). Approximately 59% of respondents reported working full-time. The largest three income groups were \$50,000 to \$99,999 (29.8%), \$30,000 to \$49,999 (17.6%), and less than \$10,000 (17.3%) (Figure 98). More than half of respondents were covered by health insurance from their job or a family member's job (54.3%), and 20.4% relied on Medicaid (Figure 99).

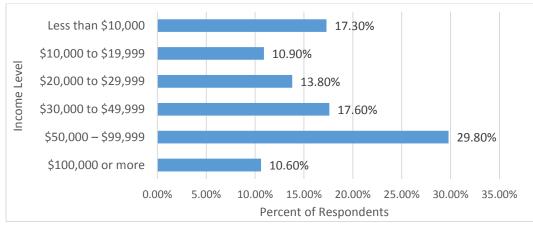


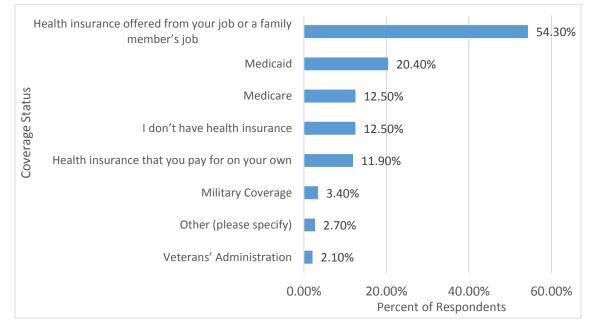
#### FIGURE 96. RESIDENCE OF COMMUNITY SURVEY RESPONDENTS











#### FIGURE 99. HEALTHCARE COVERAGE STATUS OF COMMUNITY SURVEY RESPONDENTS

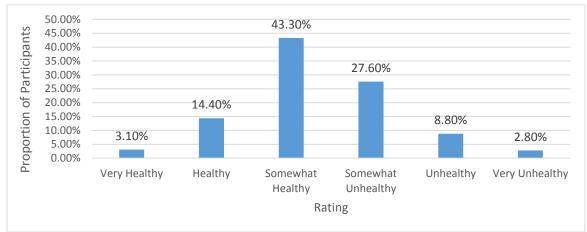
# **Health Ratings**

Respondents were asked to rate not only their personal health, but also Holmes County's health as a whole. Most respondents rated their own health as "Good" (58.7%), and rated Holmes County as "Somewhat Healthy" (43.3%) and "Somewhat Unhealthy" (27.6%) (Figures 100 and 101).

FIGURE 100. OVERALL SELF-RATED HEALTH OF RESPONDENTS

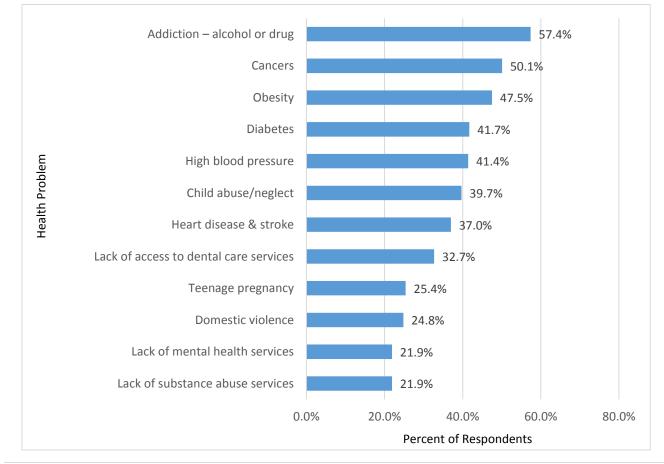


FIGURE 101. RESPONDENTS' ANSWERS TO THE QUESTION: "HOW WOULD YOU RATE HOLMES COUNTY'S HEALTH AS A WHOLE?"



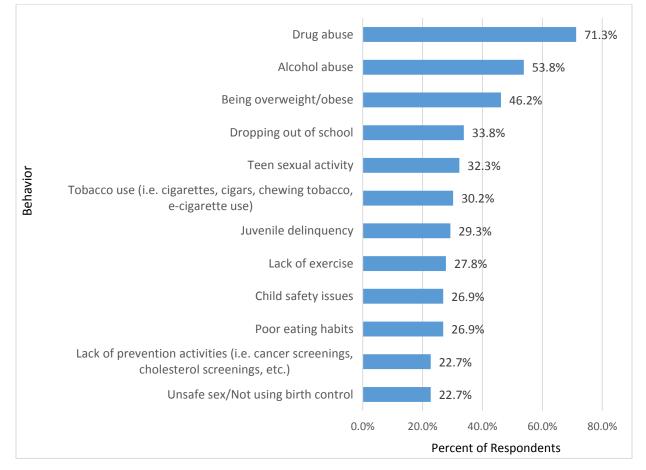
# Health Concerns

Respondents were asked to identify the five most important health problems and the five most concerning behaviors in Holmes County. Note that many respondents chose more than five answers for each category. Among the top health problems were alcohol/drug addiction, cancer, obesity, diabetes, high blood pressure, and child abuse/neglect (Figure 102). Among the top concerning behaviors were drug abuse, alcohol abuse, being overweight/obese, dropping out of school, and teen sexual activity (Figure 103).



#### FIGURE 102. MOST IMPORTANT HEALTH PROBLEMS IN HOLMES COUNTY ACCORDING TO SURVEY RESPONDENTS





# Accessing Care

Most respondents stated they would visit a doctor's office when in need of healthcare or advice (Figure 104). More than three-quarters of respondents said they were responsible for keeping themselves healthy (Figure 105). When in need of prescription medications, most respondents have their prescriptions filled in a drugstore or supermarket (Figure 106).



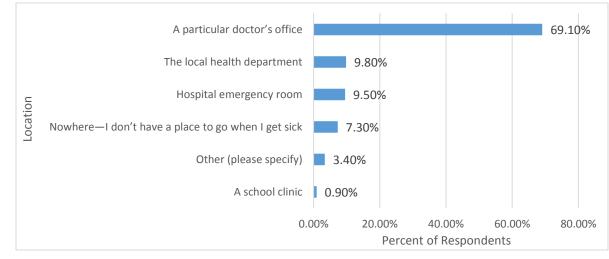
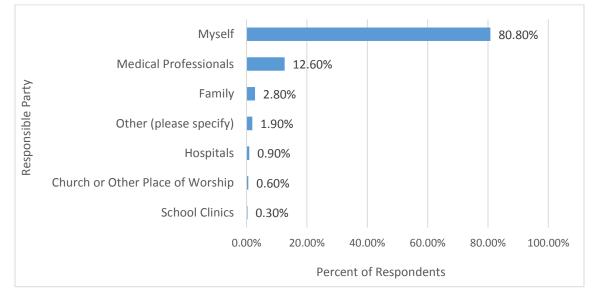
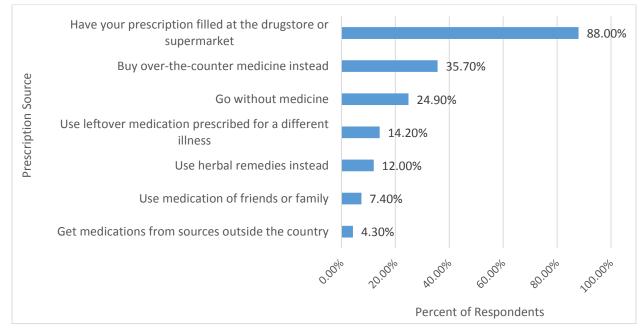


FIGURE 105. RESPONDENT ANSWERS TO THE QUESTION: "WHO DO YOU FEEL IS MOST RESPONSIBLE FOR KEEPING YOU HEALTHY?"



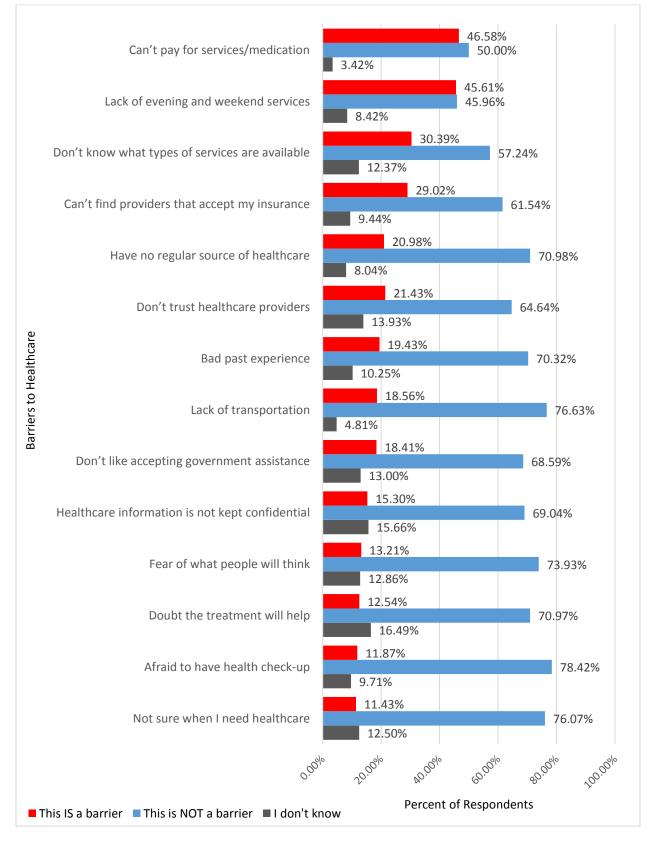
# FIGURE 106. RESPONDENT ANSWERS TO THE QUESTION: "WHEN YOU NEED TO USE PRESCRIPTION MEDICATIONS FOR AN ILLNESS, DO YOU...?"



# Barriers to Care

When asked "What do you feel are barriers for you in getting healthcare?" nearly half of survey respondents stated that being unable to pay for services/medication and lack of evening and weekend services were barriers in receiving healthcare (Figure 107).

# FIGURE 107. RESPONDENTS ANSWER TO THE QUESTION "WHAT DO YOU FEEL ARE BARRIERS FOR YOU IN GETTING HEALTHCARE?"



# Features of Healthy Communities

When asked what the five most important features of a healthy community were, the top choices were access to healthcare, good jobs/healthy economy, good education, access to places of worship, and a good place to raise kids (Figure 108). Note that many respondents chose more than five options.

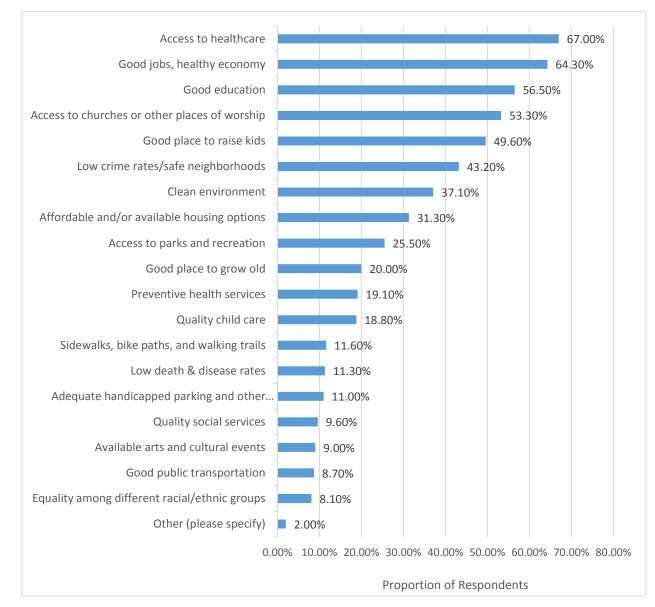
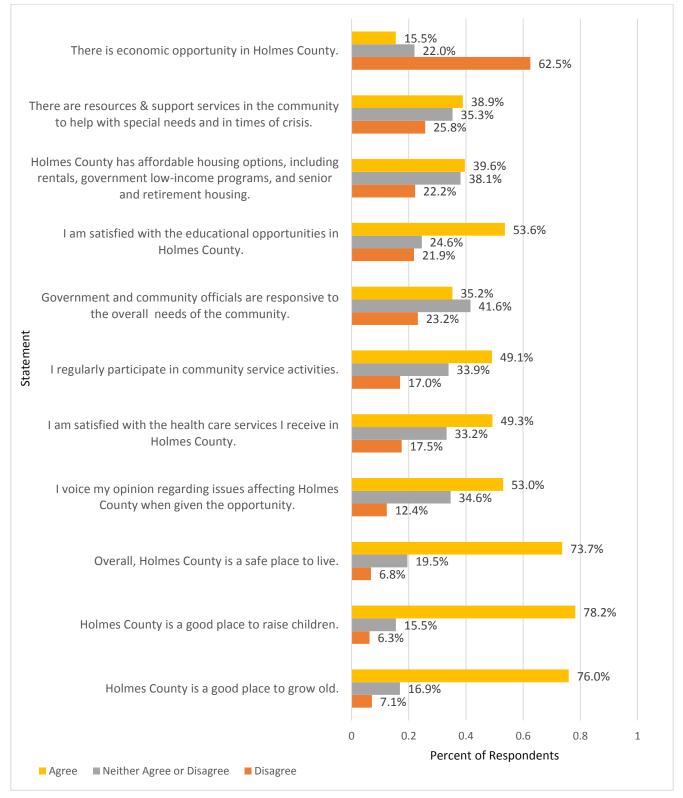


FIGURE 108. RESPONDENTS ANSWERS TO THE QUESTION: "WHAT DO YOU FEEL ARE THE MOST IMPORTANT FEATURES OF A HEALTHY COMMUNITY?"

Respondents were also given a series of eleven statements to rate on the scale of "Strongly Disagree" to "Strongly Agree". During analysis, the responses "Strongly Agree" and "Agree" were grouped under the category "Agree," and the responses "Strongly Disagree" and "Disagree" were grouped as "Disagree."

Survey respondents disagreed the most with the statement "There is economic opportunity in Holmes County" (62.5%). The most agreed-with statements were "Holmes County is a good place to raise children" (78.2%), "Holmes County is a good place to grow old" (76.0%), and "Overall, Holmes County is a safe place to live" (73.7%) (Figure 109).

#### FIGURE 109. RESPONDENTS ANSWERS TO "PLEASE RATE HOW YOU AGREE WITH THE FOLLOWING STATEMENTS."



# Key Health Issues

# Top Health Issues Identified by Community Surveys

The Healthy Holmes Task Force distributed a survey throughout Holmes County giving community members and stakeholders a chance to voice their opinions on the health status and health needs of Holmes County residents. Almost 350 community surveys were collected. The community survey respondents identified the following as the top health issues in Holmes County:

- 1. Substance Abuse
- 2. Cancers
- 3. Obesity
- 4. Diabetes
- 4. High blood pressure

# Top Health Issues Identified by Focus Groups

Approximately 30 community members and stakeholders attended community focus groups held in Holmes County in December 2015. Through a discussion of community health and health needs, focus group participants identified the following as the top health issues in Holmes County:

- 1. Substance Abuse
- 2. Diabetes
- 2. Obesity
- 3. Poor Diet/Nutrition
- 3. Mental Health Issues

# Health Priorities Identified by Healthy Holmes Task Force

After reviewing the quantitative data, as well as the top health issues identified through focus groups and community surveys, the Healthy Holmes Task Force voted on which issues would become the priority issues to be addressed through the Community Health Improvement Planning process. The HHTF identified the following as priority issues for the Community Health Improvement Plan (CHIP):

- 1. Healthy Lifestyle/Prevention (including Obesity, Poor Nutrition/Unhealthy Eating, and Tobacco Use)
- 2. Substance Abuse/Mental Health/Domestic Violence
- 3. Chronic Disease Prevention (including Diabetes, High Blood Pressure, and Heart Disease)

# Quantitative Data Related to CHIP Health Priorities

At the January 28, 2016 meeting of the HHTF, the group reviewed both quantitative and qualitative data collected through the community health assessment process. Quantitative data included disease mortality rates, disease incidence rates, demographic and economic characteristics of the community, and data on healthcare access and health behaviors. Qualitative data included information gathered through community surveys and focus groups, as well as the top health issues identified by community surveys and focus groups.

After reviewing the data, the HHTF identified three priority health areas to focus on in the Holmes County Community Health Improvement Plan:

- 1. Healthy Lifestyle/Prevention (including Obesity, Poor Nutrition/Unhealthy Eating, and Tobacco Use)
- 2. Substance Abuse/Mental Health
- 3. Chronic Disease Prevention (including Diabetes, High Blood Pressure, and Heart Disease)

In addition to the January 28 meeting, the Holmes County community was given the opportunity to provide feedback on a draft of the Holmes County Community Health Assessment (CHA) via an online survey. Five people participated in the survey. Participants provided feedback on the usefulness of the CHA, whether the CHA was an accurate depiction of health in Holmes County, and how the CHA could be improved. Additionally, survey participants had the opportunity to identify the top health issues in Holmes County. Information obtained via the online survey aligned with feedback gathered at the January 28 HHTF meeting.

Key data related to the priority health areas identified by the HHTF and the Holmes community is presented below.

# Healthy Lifestyle/Prevention (Obesity, Poor Nutrition/Unhealthy Eating, Tobacco Use)

Unhealthy lifestyles – including poor diet, lack of exercise, tobacco use, and excessive alcohol use – are a key contributor to the development of heart disease, cancer, stroke, and diabetes,<sup>58</sup> all of which are leading causes of death in Holmes County. Key data related to lifestyles in Holmes County is presented below.

## Obesity & Poor Nutrition/Unhealthy Eating

- According to 2013 Behavioral Risk Factor Surveillance System (BRFSS) data:
  - 63.8% of adults in Holmes County are overweight or obese compared to 62.8% of adults in Florida.
  - o 30.7% of adults in Holmes County are obese compared to 26.4% in Florida.
  - 8% of adults in Holmes County consumed five or more servings of fruits/vegetables per day compared to 18.3% in Florida.
  - 17.5% of adults in Holmes County consumed two or more servings of fruits/vegetables per day compared to 32% in Florida.

<sup>&</sup>lt;sup>58</sup> U.S. Centers for Disease Control and Prevention. (2015, August 26). *Chronic Disease Overview*. Retrieved 2016, from CDC.gov: http://www.cdc.gov/chronicdisease/overview/

 62% of adults in Holmes County are inactive or insufficiently active compared to 52.9% in Florida.

#### Tobacco Use

- Chronic obstructive pulmonary disease (COPD) is the third leading cause of death in Holmes County.
  - Tobacco smoke is a key risk factor for COPD.
  - COPD mortality rates in Holmes County were double those in Florida in 2012-2014 (80.3 deaths per 100,000 population in Holmes vs. 39.8 deaths per 100,000 in Florida).
- Lung cancer is the most common type of cancer among Holmes County residents, resulting in death rates more than double those of breast or prostate cancer.
  - Holmes County has a higher lung cancer mortality rate than the state of Florida, with 64.3 lung cancer deaths per 100,000 population in Holmes compared to 43.4 per 100,000 in Florida in 2012-2014.
- According to 2013 BRFSS data:
  - Holmes County has a higher percent of adults who are current smokers (23.8% of adults in Holmes are current smokers vs. 16.8% in Florida).
- According to 2014 Florida Youth Substance Abuse Survey (FYSAS) data:
  - 9.4% of students in Holmes County reported the use of cigarettes in the past 30 days, compared to 4.9% state statewide.
  - $\circ$  29.5% of students in Holmes reported using cigarettes in their lifetime.

# Substance Abuse, Mental Health, & Domestic Violence

According to the World Health Organization, "mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community."<sup>59</sup> Social, economic, psychological, and biological factors all play a role in determining mental health.<sup>60</sup> Key data related to substance use, mental health, and domestic violence in Holmes County is presented below.

- Holmes County has a higher suicide mortality rate than the Florida average.
  - The suicide death rate in Holmes County sharply increased from 8.7 deaths per 100,000 population in 2003-2005 to 25.1 deaths per 100,000 population in 2006-2008. From 2006-2008 to 2012-2014, the suicide mortality rate for Holmes County has fluctuated between 19-25 per 100,000 population, which is above the state average of 14 per 100,000.
- 189 Baker Act involuntary exam initiations occurred among Holmes County residents in 2014.
- According to 2013 BRFSS data:
  - 13.2% of adults in Holmes County had poor mental health on 14 or more of the past 30 days in comparison to 12.7% of adults in Florida.
  - Among Holmes County adults who have had at least one day of poor mental or physical health, 24% said poor physical or mental health kept them from doing usual activities on 14 or more of the past 30 days compared to 16.4% in Florida.

<sup>&</sup>lt;sup>59</sup> World Health Organization. (2014, August). *Mental health: strengthening our response, Fact sheet N°220*. Retrieved 2016, from WHO.int: http://www.who.int/mediacentre/factsheets/fs220/en/

<sup>&</sup>lt;sup>60</sup> World Health Organization. (2014, August).

- The average number of unhealthy mental days in the past 30 days was 4.1 days for both Holmes County and Florida.
- The average number of days where poor mental or physical health interfered with activities of daily living in the past 30 days (among adults who have had at least one day of poor mental or physical health) was 6.7 days in Holmes County and 5.1 days in Florida.
- Domestic violence offenses have been increasing since 2010 in Holmes County, while the state rate has decreased. Holmes County had a domestic violence offense rate of 694 per 100,000 population in 2014 compared to a rate of 548 per 100,000 in Florida.

# Chronic Disease Prevention (Diabetes, High Blood Pressure, Heart Disease)

According to the Centers for Disease Control and Prevention, "Chronic diseases and conditions—such as heart disease, stroke, cancer, diabetes, obesity, and arthritis—are among the most common, costly, and preventable of all health problems."<sup>61</sup> Key data related to chronic disease in Holmes County is presented below.

#### Heart Disease

- Heart disease is the leading cause of death in Holmes County.
- Heart disease mortality rates in Holmes have decreased significantly over the past decade but still remain well above the Florida average.
  - In 2012-2014, the heart disease mortality rate in Holmes County was 254.4 deaths per 100,000 population compared to 154.5 per 100,000 population in Florida.

#### Diabetes

- Diabetes is the 5<sup>th</sup> leading cause of death in Holmes County.
- In 2012-2014, Holmes County had a diabetes mortality rate of 26.9 deaths per 100,000 population compared to 19.6 deaths per 100,000 population in Florida.
- In Holmes County, the rate of preventable hospitalizations from diabetes increased from 112.1 per 100,000 population in 2006-2008 to 161.7 per 100,000 population in 2009-2011, surpassing the state rate of 123.9 per 100,000 population. In 2012-2014, preventable hospitalizations significantly decreased to 75.3 hospitalizations per 100,000 population, below the state rate of 135 hospitalizations per 100,000.

## High Blood Pressure

- According to 2013 BRFSS data:
  - 45.2% of adults in Holmes County have ever been told they had hypertension compared to 34.6% in Florida.
  - 75.8% of adults with hypertension in Holmes County currently take high blood pressure medicine compared to 79.4% in Florida.

<sup>&</sup>lt;sup>61</sup> U.S. Centers for Disease Control and Prevention. (2015, August 26).

Appendices

# **APPENDICES**

# Appendix A. Holmes County Focus Group Materials

# Focus Group Discussion Questions

- 1. What makes you most proud of this community?
- 2. What is important to this community?
- 3. Do you feel this is a safe place to live?
- 4. How would you define quality of life?
- 5. How is quality of life perceived in the community?
- 6. Are there health services that you or someone you know needs but are not available?
  - a. Do people in Holmes County have access to mental health services if needed?
- 7. Are you satisfied with the healthcare systems in your community?
- 8. What barriers to healthcare do you or other community members experience?
  - a. What gets in the way: emotions, social stigmas, money, transportation?
- 9. In your opinion, what are the most significant health status concerns of this community?
  - a. Is there a problem with obesity/overweight in Holmes County? Lack of exercise? Nutrition?
  - b. Are chronic diseases (such as heart disease, diabetes, cancer) a significant concern?
  - c. Is substance abuse a significant problem in Holmes County?
  - d. Are mental health issues a significant concern in this community?
- 10. Do these significant health issues affect a specific subgroup of the population?
  - a. Are they occurring in a particular location?
  - b. Have they become worse or better over the last two or three years?
- 11. Which significant problems or unhealthy behaviors are occurring in this county that concern you the most?
- 12. What assets does the community have that can be used to improve the community's health?
  - a. Leaders, organizations, natural resources
- 13. Do you believe that there is a network of support for individuals and families during times of stress and need?
- 14. What do you see as the schools' role in health?
  - a. Is teen pregnancy a significant concern in Holmes County?
- 15. Are you familiar with the services that the health department provides to clients?
  - a. Do you think the services are meeting the needs of the community?
    - i. If not, what services do you feel should be added?
    - ii. Are there any services that should be eliminated?
- 16. What barriers are keeping the community from reaching its highest potential in regards to healthcare and quality of life?
- 17. What would excite you enough to become more involved in improving Holmes County?
- 18. If you could create any type of "health program(s)" for Holmes County residents, what would it/they be?
- 19. In the last few minutes we have left, is there anything else you would like to discuss?

# Focus Group Demographic Survey

# What is your age?

Less than 18
18-25
26-39
40-54
55-64
65-74
75+

## What is your gender?

Male
Female

# Race/Ethnicity: Which group do you most identify with?

White/Caucasian
Black/African American
Native American
Asian/Pacific
Hispanic
Other Race

# Please select the highest level of education you completed.

Grade/Middle School
High School Diploma or GED
Technical/Community College
4 year College/Bachelor's Degree
Graduate/Advanced Degree

## How is your healthcare covered?

Health insurance offered from your job or a family member's job
Health insurance that you pay for on your own
Veterans' Administration or Military Coverage
Medicare
Medicaid
I don't have health insurance
Other- Please List:

#### What Zip Code do you live in?

32425	
32464	
32440	
32455	
Other- Please List:	

What is your employment status?

Employed Full-Time
Employed Part-Time
Unemployed
Retired
Stay-at-home Parent/Family Manager
Student
Other- Please List:

What is your total annual household income from all sources, before taxes?

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

How do you rate your overall health?

Excellent
Very Good
Good
Fair
Poor

During the past five years, do you think your health in general has gotten better, gotten worse or stayed about the same?

Better
Worse
Stayed about the same

Where would you direct someone in order to find a list of community resources?

Internet
Friend or Family Member
Personal Physician
Health Department
Non-Profit Group

What do you believe are the two to three most important characteristics of a healthy community?

# Appendix B. Holmes County Community Survey

# How Healthy Is Holmes County?

The Healthy Holmes Task Force needs your help in better understanding the community's health. Please fill out this survey to share your opinions about healthcare services and the quality of life in Holmes County. The survey results will be presented to the community and made available to the public in a written report. The information gathered from responses to this survey will help make Holmes County a better place to live.

#### Thank you, in advance, for your participation!

#### 1. Check up to 5 selections you feel are the most important features of a healthy community:

- □Access to churches or other places of worship
- Access to healthcare
- □Access to parks and recreation

Adequate handicapped parking and other accommodations for persons with disabilities

- □Affordable and/or available housing options
- Available arts and cultural events
- Clean environment
- Equality among different racial/ethnic groups
- Good jobs, healthy economy
- □Good place to grow old

Good place to raise kids
Good public transportation
Good education
Low crime rates/safe neighborhoods
Low death and disease rates
Preventive health services
Quality child care
Quality social services
Sidewalks, bike paths, and walking trails
Other

#### 2. <u>Check up to 5</u> (total) of the health problems <u>you</u> feel are the most important in Holmes County: Diseases/Health conditions: Other Problems:

High blood pressure
Cancers
Contagious diseases (i.e. flu, pneumonia)
Diabetes
Heart disease and stroke
HIV/AIDS/Sexually Transmitted Diseases
Obesity
Respiratory/ lung disease (Asthma, COPD, emphysema)

#### Access and availability problems for:

- Dental care services
  End of life care (nursing homes, hospice)
  Halfway houses and group homes
  Hospital Services
  Mental health services
  Pediatric Services
  Prenatal care and childbirth education
  Primary care services
  Specialty care services (i.e. surgery, X-rays)
  Substance abuse services
- **Other Problems:** □Addiction – alcohol or drug □Homelessness □Child abuse/neglect Drowning □Firearm-related injuries Domestic violence □Infant death/ premature birth □Homicide Environmental health, sewers, septic tanks □ Medical errors □Motor vehicle crash injuries □Suicide □Teenage pregnancy □Prescription drug costs □Rape/sexual assault □Other\_\_\_\_

# 3. Check up to 5 behaviors you are most concerned about in Holmes County:

Alcohol abuse	Lack of exercise	Unlicensed and/or unsafe
🗆 Being	Not getting vaccines to prevent	drivers
overweight/obese	disease	□ Unsafe sex/Not using birth
Lack of prevention	□ Tobacco use (i.e. cigarettes, cigars,	control
activities (i.e. cancer	chewing tobacco, e-cigarette use)	Teen sexual activity
screenings, cholesterol	Juvenile delinquency	Dropping out of school
screenings, etc.)	Poor eating habits	□ Other
Child safety issues	Racism	
🗖 Drug abuse		

# 4. What do you feel are barriers for <u>you</u> in getting healthcare? Please answer each of the statements below using a scale of 1 to 3:

1= This is a Barrier         Lack of transportation         Can't pay for services/medication         Can't find providers that accept my         Don't know what types of services a         Don't trust healthcare providers         Don't like accepting government as         Not sure when I need healthcare	insurance Lack of are available Fear of Afraid ssistance Bad p	<b>3 = I Don't Know</b> no regular source of healthcare of evening and weekend services the treatment will help of what people will think to have health check-up ast experience ncare information is not kept confidential
<ul> <li>5. When you need to use prescription m</li> <li>Have your prescription filled at the dru</li> <li>Buy over-the-counter medicine instead</li> <li>Use leftover medication prescribed fo</li> <li>Get medications from sources outside</li> </ul>	ugstore or supermarket d D r a different illness	<b>to you<u>(check all that apply)</u> □ Go without medicine Ise medication of friends or family □ Use herbal remedies instead</b>
6. How do you rate your overall health? ( □ Excellent □ Good □ Fair	check <u>one</u> selection)	now
7. How would you rate Holmes County as □ Very Healthy □ Healthy □ Somewha		(check <u>one</u> selection) nhealthy □ Unhealthy □ Very Unhealthy
<ul> <li>8. How is your healthcare covered? (a</li> <li>Health insurance offered from your joi</li> <li>Health insurance that you pay for on y</li> <li>Veterans' Administration</li> <li>I don't have health insurance</li> </ul>	<ul> <li>Medicare</li> <li>Medicaid</li> <li>Military Coverage</li> <li>Other:</li> </ul>	
9. Who do you feel is most responsible fe ☐ Medical Professionals ☐ Hospit ☐ Family ☐ Myself	als School Clinics	Church or Other Place of Worship

# 10. Where would you go if you are sick or need advice about your health? (check one selection)

Hospital emergency room	A particular doctor's office
The local health department	Nowhere—I don't have a place to go when I get sick
🗆 A school clinic	Other (Please describe)

## Please rate how you agree with the following statements: Circle only one response for each question.

	Strongly Disagree	Disagree	Neither Agree or Disagree	Agree	Strongly Agree
11. Overall, Holmes County is a safe place to live.	1	2	3	4	5
12. Holmes County is a good place to raise children.	1	2	3	4	5
13. Holmes County is a good place to grow old.	1	2	3	4	5
14. There is economic opportunity in Holmes County.	1	2	3	4	5
15. There are resources and support services in the community to help with special needs and in times of crisis.	1	2	3	4	5
16. I voice my opinion regarding issues affecting Holmes County when given the	1	2	3	4	5
opportunity. 17. Government and community officials are responsive to the overall needs of the	1	2	3	4	5
community. 18. Holmes County has affordable housing options, including rentals, government low- income programs, and senior and retirement housing.	1	2	3	4	5
19. I regularly participate in community service activities.	1	2	3	4	5
20. I am satisfied with the healthcare services I receive in Holmes County.	1	2	3	4	5
21. I am satisfied with the educational opportunities in Holmes County.	1	2	3	4	5

## **OTHER INFORMATION**

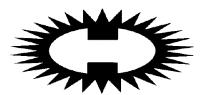
Please check or fill in the blanks for the following questions. There will be no way to identify you or your answers.

22. Name of City/Town where you live:			Zip Code:			
<b>23. Age:</b> 🛛 less than 18	□18-25	□26-39	□ 40-54	□ 55-64	□ 65 -74	□ 75+
24. Gender:   Female	□ Male					
<b>25. Race/Ethnicity: Which gr</b> □Black/African American □Hispanic □Native American	oup do you	□ White/Ca □ Asian/Pa	aucasian acific	be)		
26. Education: Please check the highest level completed:□ Grade/Middle School□ Technical/Community College□ Graduate/Advanced Degree□ High school diploma or GED□ 4 year College/Bachelor's degree						
<b>27. Employment Status:</b> □Employed Full-Time □ □ Stay-at-home Parent/Family					Retired	
28. Household income: □Less than \$10,000 □\$10,000 to \$19,999		000 to \$29, 000 to \$49,		□\$50,000 - □\$100,000		
Please list any other comments you have about the health issues in Holmes County:						

THANK YOU FOR COMPLETING THIS SURVEY!



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**BIG BEND HEALTH COUNCIL** 

www.healthcouncils.net

Each quarter, the Healthy Holmes Task Force meets to work on CHIP objectives through development and implementation of action plans and review of data. An annual review of data takes place each August. For the August 2018 review, task force members met and reviewed past and current action plans along with the CHIP objectives.