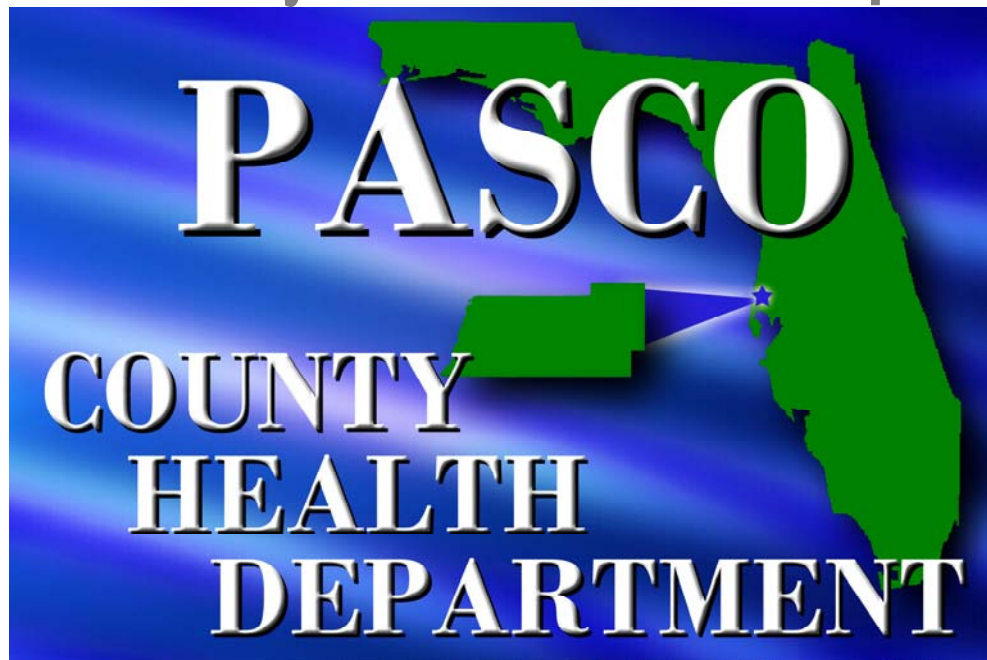


# Community Health Assessment Report



Promoting wellness  
with information  
and education



Protecting the  
health of our  
community  
through prevention



Improving health  
by providing  
essential services

*"To protect and promote the health of all residents and visitors in Pasco County."*



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## **INTRODUCTION**

Our local community health improvement planning and related activities have evolved over the years taking many forms and following many different models. In 2005 we adopted and completed the National Public Health Performance Standards which was developed through a collaborative effort between CDC and 5 national public health partners. This served as our guide as we focused on the “local public health system” and entities that contributed to the delivery of public health services. Our comprehensive community health assessment became the foundation for improving and promoting healthier Pasco communities. We began the process of systematically collecting, analyzing and using information to educate and mobilize communities, develop priorities, gather resources and plan action to impact the public’s health. To navigate our communities to healthier futures we initiated the Mobilization fro Action through Planning Partnerships strategy known as MAPP in 2007. This Community Health Assessment report summarizes our most recent steps in the MAPP process that has lead us to our current efforts with Community Health Improvement planning

## **PASCO COUNTY PROFILE**

Pasco is the 12th largest County in the state of Florida with an estimated population of 437,028 people in 2010 (U.S. Census Bureau and Florida Community Health Assessment Resource Tool Set-CHARTS). Spread across 744.85 square miles, Pasco County contains six municipalities: New Port Richey, Port Richey, San Antonio, St. Leo, Zephyrhills and Dade City. Beautifully situated on the Gulf of Mexico in the Tampa Bay area, Pasco County is one of eight counties, along with Citrus, Dixie, Hernando, Levy, Jefferson, Taylor, and Wakulla, which make up the “Nature Coast.” Pasco County is the 9<sup>th</sup> fastest growing county of Florida and the 38<sup>th</sup> of the nation (Department of Environment Protection).

## **POPULATION CHARACTERISTICS**

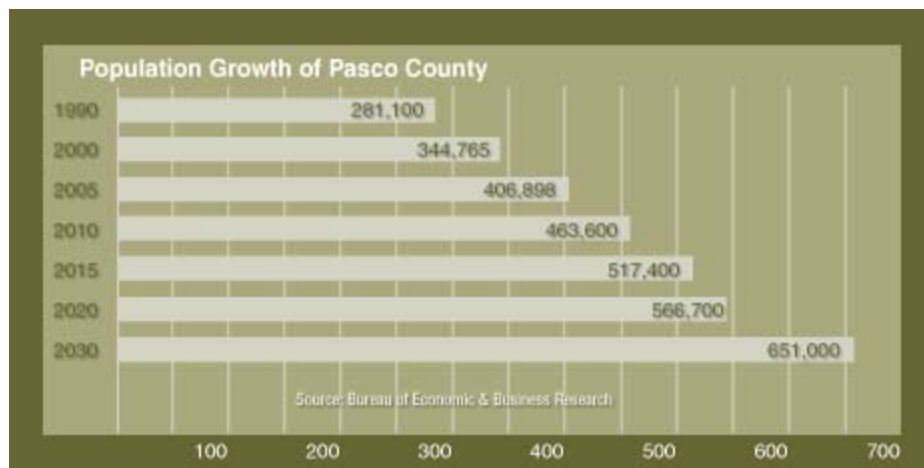
As of 2010, a total of 354,833 adults reside in the Pasco County area. That is a 1.02 % increase from 2009. A substantial number of retirees relocate to Pasco County. In Pasco, 23.7% of the residents are 65 years old and over compared to only 17.7% in Florida. The following figure shows the population breakdown of Pasco County by age from CHARTS and U.S. Census. (Figure 1)

<b>Age Distribution-2010</b>	
<b>Age</b>	<b>Total</b>
0-4	23,059
5-14	50,118
15-17	16,481
18-19	9,744
20-44	113,273

45-64	120,780
65+	104,116
<b>Total Population</b>	<b>437,601</b>

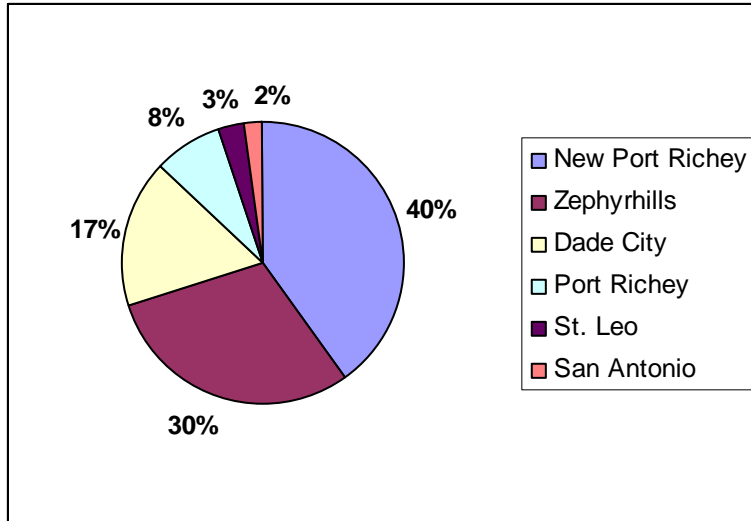
**Figure 1. Demographic Data by Age Groups.**

Pasco County’s population varies from its neighboring counties. Pasco’s population is less than half that of Hillsborough and Pinellas Counties’ population (1,206,416 and 928,121 respectively), similar to Polk County (586,591), and larger than Hernando and Sumter Counties (171,030 and 98,946 respectively). Pasco County’s population continues to grow steadily. According to the U.S Census the population change in Pasco from April 2000 to July 2008 was 36.6% Population growth in Pasco is expected to reach 651,000 by 2030. (Figure 2)



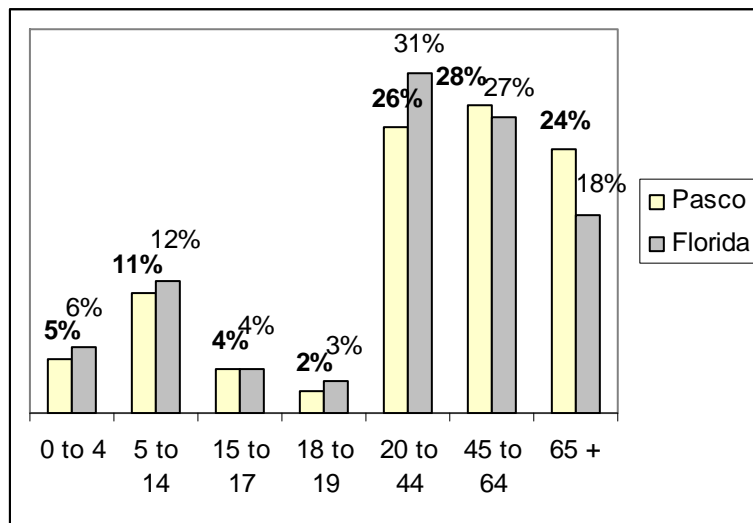
**Figure 2. Population Growth of Pasco County.**

The vast majority of the residents of Pasco County, 40%, live in New Port Richey. The second most populated city in the County is Zephyrhills with 30% followed by Dade City with 17% of the population. Other cities are Port Richey with 8%, St. Leo with 3%, and San Antonio with 2%. (Figure 3)



**Figure 3. Pasco County Community Populations.**

Pasco County differs from the state of Florida in the population by age group. Pasco County has 6% more people over the age of 65 compared to Florida. On the other hand, Florida has 5.4% more residents between the ages of 20 and 44 than Pasco County. Similarities were seen in the rest of the age groups. (Figure 4)



**Figure 4. Population by Age Group.**

Pasco County's pre-retiree group has seen drastic growth, according to Guillermo Angulo, Director of Environmental Health for Pasco County Health Department. Due to the lack of available, affordable housing in the metropolitan surrounding areas, a growing number of younger families are establishing their homes in Pasco County.

The population age group of people 65 and older steadily increased in the last decade (year 2000; 92,752 people, year 2006; 102,734, and year 2010; 104,116). Those numbers

are now starting to see a slight increase as the pre-retiree population approaches their sixties. This statistic shows the need for more chronic disease prevention and intervention focused on the elderly.

As of 2010, Pasco County has a population density of 587.5 people per square mile compared to Florida’s population density of 350.4 people per square mile. Such statistics suggest that Pasco County is transforming itself from a rural county into one that more closely resembles its neighbors to the south, Pinellas and Hillsborough.

The 2010 estimated female population is 51.3%. Family households in Pasco are the 64.4% and of those 52.4% are married-couple families. Approximately 14% of households are single parent, with male head of household being 4.3% and female head of household being 9.7%. (Figure5)

<b>Types of Households</b>	<b>Rates</b>
Married-couple families	52%
Other Families	14%
People Living Alone	27%
Other nonfamily Households	7%

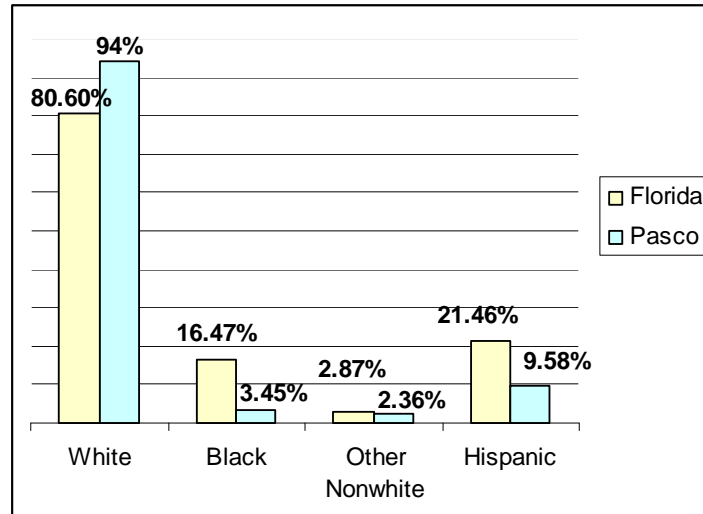
**Figure 5. Types of Households in Pasco County 2005-2007 US Census Bureau.**

Marital status is another social characteristic of relevant importance in the county. There are 176,120 males 15 years and over and 191,551 females 15 years and over for the 2005-2007 period. In Pasco, 25.5% of males and 19.5 % of females had never been married. Approximately, 57.1% of males were married, 1.5% separated, 4.6% widowed, and 11.3% divorced. On the other hand, for females residents 52.6% were married, 2.6% separated, 13.9% widowed, and 11.5% divorced.

**RACE**

The most recent data from the US Census (2008) shows that Pasco County’s residents are predominantly white (94%). African Americans constitute 3.4 % of the residents, and the remaining 2.36 % of the population consists of other non white. The county differs demographically from the rest of Florida with smaller minority populations. The 2010 estimated Hispanic population in 9.58 % (compared to 24.4% in Florida). However, the amount of people of Hispanic descent continues to grow. Although Pasco does have a smaller minority population, Spanish speaking resources are becoming an important necessity. Pasco County is quickly becoming more ethnically diverse, both in terms of non-whites and individuals of Hispanic origins. (Figure 6)





**Figure 6. County and State Races-2010.**

In Pasco County 38,753 residents are foreign-born and half of those are naturalized U.S. Citizens (U.S. Census Bureau). The majority of these residents were born in Latin America, Europe, Asia, and Northern America (44.5%, 23.3%, 16.9%, and 10.0% respectively).

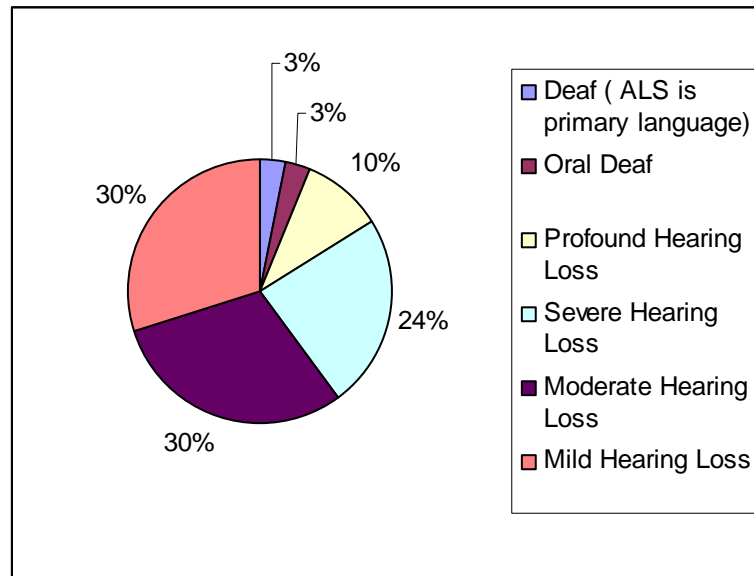
Approximately 88% of the residents of Pasco County indicated that English was the only language spoken at home. Of the 12.2% residents that speak languages other than English, only 4.5% speak English less than 'very well.' The majority of the non-English speaker residents have Spanish as their primary language with 7.5%. Other Indo-European language is spoken by 3.2% of the population and Asian and Pacific Islander Languages are spoken by 1.1% of the population. Only 2.9% of the residents that speak Spanish as a primary language, speak English less than 'very well.'

### **DISABILITIES**

According to the Behavioral Risk Factor Surveillance System (BRFSS- 2007) the percentage of adults who are limited due to physical, mental, or emotional problems is 25.6%. Pasco County must provide appropriate counseling, social support and resources for this special population, to encourage the quality of life Pasco strives to provide for all of its residents. According to the U.S. Census Bureau (2000), 18.9 % of the County's population who are 5 years old and over have a disability. Of the total population with disabilities, 6.8% are between 5 and 15 years old, and 39.5% are between 16 and 64 years old. Similarly, 39.5% of the Pasco County residents that are 65 years old and over have a disability as well.

The Hearing Loss Association of Florida explains that hearing loss or deafness can affect any age population, but as people grow older the incidence rises. It is estimated that 30% of 65 or older population have a hearing loss and that 3% of the babies are born deaf or have hearing loss. The Approximate number of deaf and hard of hearing population in the United States is shown in the following chart. An estimated 3% of the hard of

hearing population use American Sign Language (ASL) as the primary Language. (Figure 7)



**Figure 7. Approximate Deaf and Hard of Hearing Population in the United States.**

According to Jennifer Hess from the Deaf and Hard of Hearing Services of Florida, 6% of the total population of Pasco County has hearing loss and 78% of them are unemployed or underemployed. She explains that Deafness is as much about cultural identity as it is about hearing loss; “The culture is made up of people who have a common experience and language.”

### **SOCIOECONOMIC PROFILE**

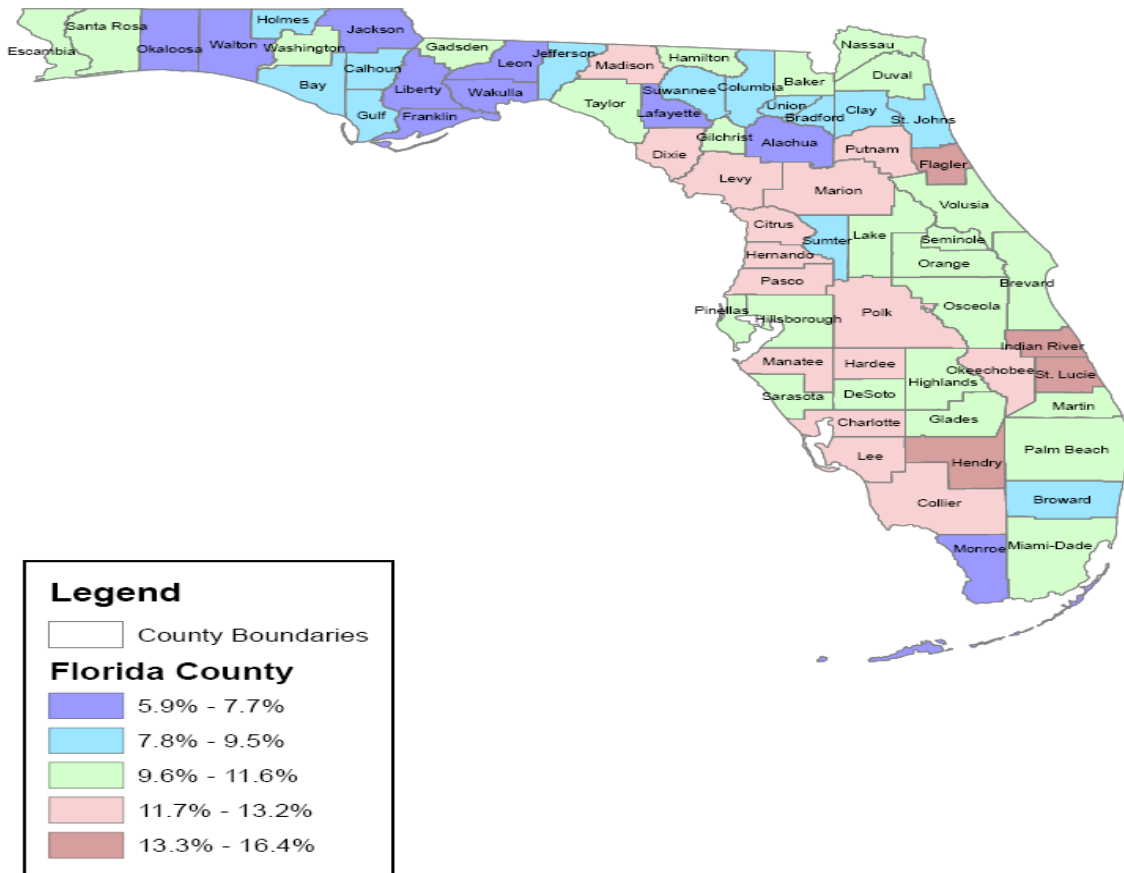
The average household size of Pasco County residents is 2.5 while the average family size is 2.95 (U.S. Census Bureau 2005-2007). The population of adults 25 years and older is 328,285. The percentage of high school graduates is 85.3 %, while the population with a Bachelors degree or higher is 18.4%. The estimated labor force consists of 201,408 of the Pasco County population. The median yearly household income in Pasco County in 2006 was \$41,939 (U.S. Census Bureau). The median household income in 2007 in inflation adjusted dollars was \$42,912 while the per capita income was \$27,628 (1999). The average income of Pasco County residents is slightly under Florida average. As of 2009, the median household income in Florida is more than Pasco but less than that of the United States. The median household income for Pasco County residents is \$42,912. For the state, the median household income is \$46, 602 and for the country is \$50,007.

Bishop Joseph M. Sullivan said, “The harsh reality of America’s present economic system is that, without substantial and effective government intervention, people will go hungry; families will be homeless; mothers and children will be without basic health care.



In theory, government would not be the direct provider of these services; in reality, given the best efforts of the private sector, government must bear a large share of the burden. Therefore, the powers of government must be used in a constructive way, directly as well as indirectly, to guarantee a minimum level of decency for all Americans”. Programs such as Medicaid, food stamps, and social services help to support the population living at or below the poverty level.

Unemployment rates have steadily increased as America endures the current economic crisis. The percent of residents living at or below poverty is 10.7 %, while 7.6% of them are families and an alarming 15.9% are children living in poverty. The unemployment rate in Pasco County is currently 12.2%. Although it is not one of the four counties with the highest percentages of unemployment, it falls in the second worse category of unemployment along with 14 counties. In 2007, the unemployment rate for Pasco was only 4.8%. This great difference in unemployment rate shows the economic hardship that residents are currently experiencing. (Figure 8)



**Figure 8. Florida unemployment rates by county- July 2009.**

New guidelines determined by the U.S. Department of Health and Human Services are in place to combat child poverty. These guidelines will determine eligibility for a child to be enrolled in assistance programs. These programs include Head Start, the Food Stamp Program, the National School Lunch Program, the Low-Income Home Energy Assistance

Program, and the Children’s Health Insurance Program (CHIP).

Pasco County has seen an increase in the number of households applying for food stamps. The percentage of applications in Pasco County was up 75% in the first quarter of 2009 with 43% of them approved. Michael Sasso, from the Tampa Tribune, believes that technology has diminished the stigma of food stamps and helped encourage more people to apply. In Land O’Lakes, 363 households applied for Food Stamps in comparison to 149 households in 2008. Families are not the only ones applying to the food stamp program; businesses are applying as well. Statewide, the number of retailers applying to accept food stamps was up by a third in the first five months of 2009.

The number of individuals with a high school diploma is slightly lower in Pasco County than the state average. Despite the number of individuals twenty-five years old and over who have high school diplomas has increased by nearly 10 percent in the last decade, Pasco County still lags slightly behind the overall state average. (Figure 9)

<b>Education attained</b>	<b>Pasco 1990</b>	<b>Pasco 2000</b>	<b>Florida 1990</b>	<b>Florida 2000</b>
A high school degree	66.9	77.6	74.4	79.9
A bachelor’s degree or higher	9.1	13.1	18.3	22.3

**Figure 9. Percentage of Population 25 years and over with a Bachelor’s Degree or higher.**

Pasco County consists of 147,566 households, constituting 2.33% of the total number of families in Florida. According to the U.S. Census Bureau, 82.4% of homes in Pasco County are owned by the families who occupy them. The median value of homes was \$79,600 in 2000. Mobile homes represent 25.16% of the homes in Pasco County. Individuals or families who rent, pay an average of \$552.72 per month (The University of Georgia Initiative on Poverty and the Economy).

According to the U.S. Census Bureau the median monthly housing cost in Pasco for mortgage owners was \$1,282 compared to nonmortgage owners of \$345. House Owners with mortgages represent the 41% of occupants in contrast to only 14% who represent owners without mortgages. Forty-seven percent of the occupants are renters and spent 30% or more of their household income on housing.

According to the 2005 State of Florida Housing Report, the majority of households in Pasco County were made up of 1-2 persons contributing to 69% of the population. Twenty six percent of the 1-2 person homes pay more than 30% of their income for rent or mortgage costs. Similarly, 22% of the 3-4 person homes and 5 or more person homes also spent more than 30% of their income for rent and or mortgage costs.

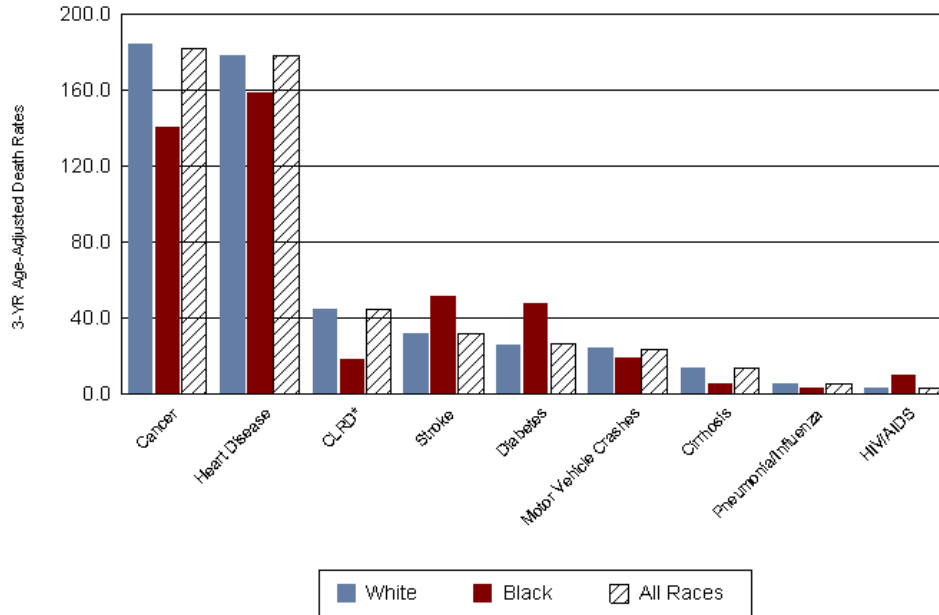
In Pasco County and the surrounding metro area, the HUD Fair Market Rent in 2009, representing rent for a typical modest apartment, was \$705 for a studio apartment, \$782 for a one-bedroom, \$946 for a two-bedroom, \$1,199 for a three-bedroom, and \$1,447 for a four-bedroom unit. The average price for a condo was \$129,900 while the average price for a house was \$233,750. House prices are slightly lower than the state average of

\$250,500.

## **MORBIDITY**

In order to assess the levels of morbidity in Pasco County, injury, suicide, and prevalence and incidence rates of disease were collected. Because of the large numbers of elderly people living in Pasco County, morbidity levels due to coronary heart disease, stroke, congestive heart failure, cancers, and diabetes are high. Fortunately, most Pasco County rates are already meeting the U.S. Healthy People 2010 goal.

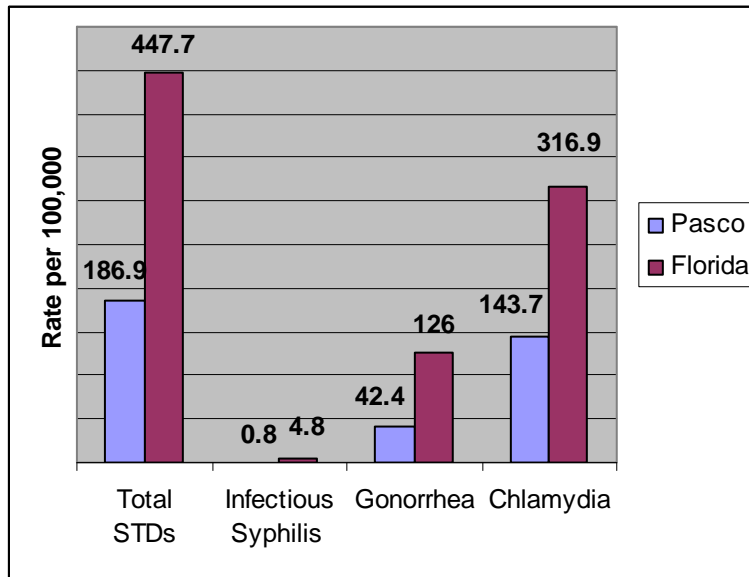
As will be mentioned in the *Mortality* section of this report, cancer is among the leading causes of death, with heart disease swiftly following as the subsequent cause in Pasco County residents. The incidence of cancer is 16% higher than the state average. A close examination of CHARTS data reveals that the incidences of breast and prostate cancer are higher for the county than the state, although rates at both levels are undergoing a declining trend since 2000. In addition, although the incidence of cervical cancer has gone through some variations in past years, the county's incidence rate is now the same as Florida's rate. The incidence of chronic lower respiratory disease is almost as high as the state norm but observes 20% less deaths than the state from the ailment. There is an alarming distinction between the occurrence of stroke and diabetes in black patients and the doubled incidence of Chronic Lower Respiratory Disease (CLRD) in the white population. This finding could be directly linked to the prevalence of predominantly white smokers. (Figure 10)



**Figure 10. Morbidity Levels in Pasco County for 2008.**

Communicable diseases also contribute to morbidity within a population. Pasco County consistently has lower rates of sexually transmitted diseases, such as Syphilis, Gonorrhea, and Chlamydia, than the state of Florida. In fact, for the period 2006-2008 Pasco county residents contract sexually transmitted diseases at a rate less than half of that as the

average Floridian. (Figure 11)



**Figure 11. STDs rates per 100,000 total population in Pasco County - 2006-2008.**

Vaccine preventable diseases include hepatitis B, measles, mumps, rubella, pertussis, and tetanus. Obtaining the appropriate immunizations after birth or as needed can prevent the incidence and decrease the prevalence of these diseases. Pasco County had 12 incidences for the years 2006 to 2008 for vaccine preventable diseases (measles, mumps, rubella, and tetanus), a rate of 2.8 per 100,000 population compared to a rate of 3.3 in Florida. Furthermore, as of 2008 92.8% of Pasco kindergarteners have been immunized, a very slight decline from previous years and comparable to the state rate.

Rates of other communicable diseases suggest that Pasco County residents are less likely to contract them than other Florida residents. During 2006 to 2008, Pasco County had a low rate of tuberculosis with a 3-year rate of 1.7 per 100,000 population in contrast to 5.3 per 100,000 population in Florida (a decrease of 0.4 from the 2005-2007 period in Florida). Acquired Immune Deficiency Syndrome (AIDS) 3-year rates for the 2006-2008 period were also significantly lower than in the state. In Pasco County 9.2 per 100,000 people had AIDS compared to 24 per 100,000 in Florida. Pasco County reported a complete turnaround of meningococcal meningitis with rates less than zero and comparable to the average statewide in 2006.

To get a sense of the residents' own perceptions about their health, researchers will often ask people directly about their concerns and beliefs. A new Behavioral Risk Factor Surveillance Survey was completed in 2007 and published in 2008. The Tampa metropolitan area comprised by Hernando, Hillsborough, Pasco and Pinellas Counties was a survey to analyze the indicators of health risk and residents' behaviors. More than 500 residents were telephone surveyed to identify emerging health problems in order to develop health objectives and programs.

For the Tampa metropolitan area, where Pasco County is included, 24% of residents considered their health to be in excellent condition, 32% very good, and 27% good.

Eleven percent considered their health to be fair and 6% poor. Eighty three percent of the participants said that they had good or better health, and only 17.2% considered their health to be fair or poor.

Also, alcohol consumption was surveyed. Fifty three percent of adults said that they had at least one drink of alcohol within the past 30 days. Five percent said they considered themselves to be heavy drinkers, adult men having more than 2 drinks per day and adult women having more than one drink per day. Similarly, 13.6 % of adults considered themselves as being binge drinkers, males having five or more drinks in one occasion and females consuming four or more drinks in one occasion.

Only 8% of the surveyed individuals had been told they currently have asthma. Thirteen percent of the adults in the survey, at some time in their life, have been told they had asthma. According to the survey's cardiovascular disease section, 6.6 % of adults were told to have had a heart attack, and 6% had angina or coronary heart disease. Only 3.1% were told that they have had a stroke in the past.

For colorectal cancer screening, 37.2 % of adults 50 years or older have had a blood stool test within the past two years. On the other hand, 61.6% of adults 50 years or older said to have had a sigmoidoscopy or colonoscopy. Approximately eight percent of participants said that they were told by a doctor they had diabetes and 2.2 % said that they had gestational diabetes (pregnancy related diabetes). Two percent were told they were borderline or had pre-diabetes and 87.9 % were never told that they had diabetes.

Disabilities were also measured in the study. Adults who are limited in any activities because of physical, mental, or emotional problems represented the 21.8 % of the population surveyed. Approximately 8.6 % of adults said that they had a health problem which required the use of special equipment. On the other hand, 73.6 % of adults said that during the past month, they participated in physical activities.

Health care access or coverage was also part of the questions asked. Eighty four percent of participants said that they had some kind of health care coverage. For adults aged 18 to 64, 79.7% are said to have health care coverage.

Due to the increased number of Pasco county residents that have remained up to date on shots, infectious diseases have continued to decrease. Although infectious diseases have decreased, chronic diseases have increased, bringing a greater focus on chronic diseases and the steps to take to both prevent and alleviate symptoms. For the immunization part, responses of residents were more favorable. Approximately 67% of adult participants aged 65 or older stated they have had a flu shot within the past year. Similarly, 66 % of adults 65 or older said they have not had a pneumonia vaccination.

Oral health is still a concern for Pasco County. Only 19.6 % of adults 65 years or older have had all their natural teeth extracted. Approximately, 46% of adults have had permanent teeth extracted. Sixty nine percent of adults have visited a dentist or dental clinic within the past year for various reasons.

Residents that are overweight and obese have increased, which seems to correlate to the percentage of Pasco county residents that lead sedentary lifestyles and fail to consume a diet high in fruits and vegetables. Body Mass Index (BMI) was also documented in the survey. Only 35.3 % of participants were said to have a BMI of 24.9, which is considered to be a healthy weight. Relatively 38% of the participants were said to have a BMI between 25 and 29.9 which is considered to be overweight. Approximately, 23.6% of the participants were said to have a BMI greater than 30 which is considered to be Obesity.

For tobacco use, four levels of smoking status were created to simplify the survey. Fourteen percent reported to smoke everyday and 4.7% to smoke some days. Twenty six percent of the participants identified themselves as a former smoker and a 54.5% said they have never smoked. In total, 19.1% of surveyed adults said to be currently smoking, while 80.9% said they are not.

Men's health was also an important part of the survey. For prostate cancer prevention, 63.4 % of male adults aged 40 or older have had a Prostate Specific Antigen (PSA) test within the past two years.

Women's health was also an important part of the survey. Approximately 76% of women aged 40 and older have had a mammogram within the past two years. Eighty two percent of women aged 50 years or older said to have had a mammogram in the past two years. Eighty four percent of women aged 18 years and older said to have had a Pap smear test within the past three years.

A greater focus has shifted to the quality of life affecting health status. It seems that persons that are experiencing the highest quality of life are boasting the greatest health status. Eighty seven percent of the Pasco county population has good mental health which most likely explains why Pasco county residents are healthier than neighboring counties. Seventy six percent of adults always or usually receive the social and emotional support they need. Ninety three percent of adults in Pasco are "very satisfied" or "satisfied" with their lives. Quality of life pertains to residents beliefs on how healthy they feel inside and out. Most Pasco County residents rate their overall quality of life as "excellent" or "good" and half say the services provided by Pasco County government are "excellent" or "good," according to the National Citizen Survey (NCS). Although the overall statistics show that Pasco county residents are for the most part happy, there is a striking difference when it comes to surveying the East and West side of the county. Fifty five percent of West Pasco ranks their overall quality of life as "excellent" or "good" compared to the 79% in East Pasco. These statistics seem to be a consequence of the changing face of the established neighborhoods.

Characteristics of the county receiving the most favorable ratings were opportunities for the residents to participate in religious or spiritual events and activities; shopping and the availability of affordable, quality food. The characteristics receiving the least positive ratings were employment opportunities, ease of bicycle travel and traffic flow on major streets.



The overall quality of new development in Pasco County was rated by 58% as “excellent” or “good.” Similarly, 56% of residents rated the overall appearance of Pasco County as “excellent” or “good.” In the past five years development in the county has flourished. Although it has made many parts of the community more hospitable, it has left other areas behind. Not to be forgotten are the areas that were previously the quaint residential areas. As new areas are filled with high quality housing and commercial areas, the old areas become dilapidated and unkempt. Areas once known for their affluence have become areas where crime has risen as the poorer and more transient population becomes confined to that area. The results and feedback from this survey have now been incorporated into Pasco’s new strategic plan for 2009-2012.

Morbidity also encompasses a number of social and mental health indicators. For instance, alcohol-related motor vehicle crashes are one of the more preventable causes of morbidity and mortality. For the 2006 – 2008 period, Pasco County had an average of 564 alcohol-related motor vehicle crashes compared to 579 for the 2005 – 2007 period, a rate of 129.9 per 100,000 people. In Florida, lower numbers of alcohol related motor vehicle crashes were reported. It was seen that Florida had rate of 121.4 per 100,000 motor vehicle crashes, a difference of 8.5 per 100,000 less crashes compared to the County.

Suicide may also be considered a preventable cause of death if one considers the effects of mental health services in lowering a population’s propensity for suicide. In the 2006-2008 period, Pasco County had one of the state’s highest age-adjusted suicide death rates (19.2 cases per 100,000), placing Pasco in the worst quartile. The suicide rate has gradually increased from 2004. For the 2006-2008 period there were 13 cases per 100,000 population in Florida compared to 19.2 cases per 100,000 people in the County. It is important that support groups and resources be available for people dealing with mental health issues. Although there has been a decrease in the number of domestic violence cases, Pasco still has higher rates than the state. The states rate is 613.5 per 100,000 while Pasco’s rate is 755.9 per 100,000. It is important for Pasco County to make this statistic known and for more awareness programs to be enacted so that this type of violence does not go by unnoticed. The Family Violence Prevention Fund, the National Coalition Against Domestic Violence, the National Domestic Violence Hotline and the National Network to End Domestic Violence are organizations helping to fight to reverse these statistics.

For the 2006-2008 period, Injury was the cause of 446 deaths in Pasco County. This increase of injury cases from previous periods, represents a rate of 99.8 per 100,000 population. The major type of injury is unintentional with 72.6 cases per 100,000 people and is more prevalent in males ages 65 and older.

### **MORTALITY**

The Florida CHARTS data has identified the major causes of mortality among Pasco County residents as Heart Disease, Cancer, Chronic Lower Respiratory Disease, Unintentional injury, Strokes, Diabetes Mellitus, Alzheimer’s disease, Suicide, Chronic Liver Disease, and Pneumonia/Influenza (Figure 11). For the 2006-2008 period, there

was an average of 5,456 deaths. The death rate for Pasco was higher than the rate of the State with 748.6 and 679.8 per 100,000 people, respectively. As is to be expected in a county with an older population, Pasco exceeds the state average in total deaths and deaths related to age. Cirrhosis and motor vehicle crashes also claim more lives in Pasco County than would be expected by state averages. Impressively, especially considering the large elderly population, Pasco has lower than average rates of stroke and pneumonia/influenza deaths than the state of Florida as a whole.

The leading causes of death in Pasco County seemed to vary in 2008 according to race and ethnicity. For both whites and non whites, heart disease and cancer are the leading causes of death. However, the mortality rate among non white residents due to diabetes is almost double the rate of whites. Twice as many white residents die from a stroke than non-white residents in Pasco County, fortunately at a lower rate than the state. White residents die from cirrhosis at a rate of almost 3 times greater than non white residents of Pasco (Figure 12). Also, it is important to mention that HIV/AIDS takes the lives of non whites at a rate 3 times more than whites. The rate has also increased since previous years, but is still 1/3 less than the state average. All three of these gaps have been closing since 2001, but substantial room for improvement exists.

Pasco County Leading Causes of Death	Total		Race/Ethnicity			
	Death	Rate	White	Black	Other	Hispanic
ALL CAUSES	5,467	100.0	5,299	101	66	187
1. Heart Disease	1,332	24.4	1,294	21	17	42
2. Cancer	1,312	24.0	1,279	20	16	38
3. Chronic Lower Respiratory Disease	411	7.5	403	4	4	6
4. Unintentional Injury	349	6.4	336	5	8	18
5. Stroke	229	4.2	223	4	1	7
6. Diabetes Mellitus	171	3.1	162	8	1	9
7. Alzheimer's Disease	134	2.5	132	1	1	6
8. Chronic Liver Disease/ Cirrhosis	104	1.9	98	3	3	6
9. Suicide	91	1.7	87	3	1	4
10. Pneumonia/Influenza	48	0.9	45	3	0	2

**Figure 12. Leading Causes of Death in Pasco County 2008.**

It was also seen in the last report from CHARTS that more males died in 2008 than females. Higher death rates for Cancers, Diabetes Mellitus, Heart Diseases, Chronic Liver Disease & Cirrhosis, Unintentional Injury, and Suicide were reported in Males. In 2008 more Females died from Alzheimer's disease, Stroke, Influenza & Pneumonia, and Chronic Lower Respiratory Disease than males. (Figure 13)

<b>Pasco County</b>	<b>Death</b>	<b>Males</b>	<b>Females</b>
<b>All Causes</b>	<b>5,467</b>	<b>2,893</b>	<b>2,573</b>
1. Heart Disease	1,332	722	610
2. Cancer	1,312	744	568
3. Chronic Lower Respiratory Disease	411	185	226
4. Unintentional Injury	349	212	136
5. Stroke	229	94	135
6. Diabetes Mellitus	171	99	72
7. Alzheimer's Disease	134	49	85
8. Chronic Liver Disease/ Cirrhosis	104	67	37
9. Suicide	91	67	24
10. Pneumonia/Influenza	48	22	26

**Figure 13. Leading Causes of Death in Pasco County by Gender.**

### **HEALTH BEHAVIORS AND RISK FACTORS**

Pasco County and Florida were surveyed about alcohol and tobacco use, lack of physical activity, and nutrition—all of which are considered risk factors for the development of type II diabetes, high cholesterol, hypertension, and obesity. Regular screenings for colorectal cancer, cholesterol, HIV/AIDS, breast cancer, and cervical cancer are considered healthy behaviors and were also taken into consideration for the surveys. Health care access, including influenza immunizations and physician and dentist visits, was queried to determine preventive measures being taken by the populace.

In order to assess the levels of morbidity in Pasco County, prevalence and incidence rates of disease, injury, and suicide were collected. As a result of the large numbers of elderly people living in Pasco County, morbidity levels due to coronary heart disease, stroke, congestive heart failure, cancers, and diabetes are high. Despite the high mortality numbers in Pasco, most are already below the U.S. Healthy People 2010 Goal.

Florida CHARTS is used to display chronic disease indicators such as diabetes, age-adjusted death and hospitalization rates. All Age-Adjusted rates are 3-year rates per 100,000 and are calculated using the 2000 Standard US Population. (Figure 14)

### Pasco County Chronic Disease Profile

Indicator	Year(s)	Avg. Annual Number of Events	Age-Adjusted Rate <sup>1</sup>	Quartile <sup>2</sup>	State Age-Adjusted Rate	U.S. Healthy People 2010 Goal <sup>3</sup>
<b>Coronary Heart Disease</b>						
Deaths	2006-08	1,036	126.7	3	116.2	162.0
Hospitalizations	2006-08	3,762	565.7	3	487.6	
<b>Stroke</b>						
Deaths	2005-08	245	30.1	2	33.0	50.0
Hospitalizations	2006-08	1,973	279.3	2	272.8	
<b>Heart Failure</b>						
Deaths	2006-08	49	5.6	1	7.4	
Hospitalizations from congestive heart failure	2006-08	1,619	210.7	2	227.2	
<b>Lung Cancer</b>						
Deaths	2006-08	435	59.7	3	47.7	43.3
Incidence	2004-06	556	81.7	NA	70.2	
Percentage of adults who are current smokers	2007		30.4%	4	19.3%	12%
<b>Colorectal Cancer</b>						
Deaths	2006-08	126	16.5	3	15.0	13.7
Incidence	2004-06	318	46.3	NA	45.0	
Percentage of adults 50 years of age and older who received a sigmoidoscopy or colonoscopy in the past five years	2007		53.7%	2	53.7%	
Percentage of adults 50 years of age and older who received a blood stool test in the past year	2007		26.4%	4	21.2%	
<b>Breast Cancer</b>						
Deaths	2006-08	65	18.2	1	20.4	21.3
Incidence	2004-06	327	105.2	NA	108.0	
<b>Prostate Cancer</b>						

Deaths	2006-08	53	14.6	1	18.9	28.2
Incidence	2004-06	387	125.5	NA	124.2	
<b>Cervical Cancer</b>						
Deaths	2006-08	7	2.4	2	2.6	2.0
Incidence	2004-06	22	9.6	NA	9.1	
Percentage of women 18 years of age and older who received a Pap test in the past year	2007		66.2%	3	64.8%	90%
<b>Skin Cancer</b>						
Deaths	2006-08	25	3.8	3	2.8	2.3
Incidence	2004-06	113	20.3	NA	16.6	
<b>Chronic Lower Respiratory Diseases (CLRD)</b>						
Deaths	2006-08	372	46.5	3	36.2	62.3
CLRD Hospitalizations	2006-08	2,085	351.7	3	321.4	
Percentage of adults who currently have asthma	2007		7.2%	3	6.2%	
Asthma Hospitalizations	2006-08	4,091	840.9	4	708.3	
<b>Diabetes</b>						
Deaths	2006-08	177	25.4	3	20.6	46.0
Hospitalizations	2006-08	13,657	2,111.2	2	2,083.0	
Hospitalizations from amputation due to diabetes	2006-08	128	21.1	2	23.8	18.0
Percentage of adults with diagnosed diabetes	2007		8.4%	2	8.7%	
<b>Behavioral Risk Factors (BRFSS) Data</b>						
Percentage of adults with diagnosed hypertension	2007		29.2%	2	28.2%	
Percentage of adults who have diagnosed high blood cholesterol	2007		41.6%	4	37.1%	17%
Percentage of adults who had their cholesterol checked in the past five years	2007		80.7%	4	78.5%	
Percentage of adults who meet	2007		34.9%	3	34.6%	

moderate physical activity recommendations						
Percentage of adults who meet vigorous physical activity recommendations	2007		27.4%	1	26.0%	
Percentage of adults who engage in no leisure-time physical activity	2002		25.1%	2	26.4%	20%
Percentage of adults who eat at least 5 servings of fruits and vegetables a day	2007		23.7%	3	26.2%	
Percentage of adults who are overweight	2007		35.9%	2	38.0%	
Percentage of adults who are obese	2007		21.8%	1	24.1%	15%

**Figure 14. Chronic Diseases, Death & Hospitalization Rates.**

Secondary prevention employed by public health institutions to reduce the incidence and adverse outcomes of diseases such as diabetes, heart disease, dental caries (tooth decay), influenza, and sexually transmitted diseases may be found through screening. Since Pasco County is predominantly made up of pre-retired and retired residents, the number of chronic illness cases is consistently higher than the state's cases (CHARTS). In response to the high number of cases, Pasco County Health Department has employed various chronic disease prevention programs (2007).

Pasco County also has a broader population affected by *hypertension* than the rest of the state, which may be tied to its larger number of elderly patients or may also result from behaviors such as smoking, lack of physical activity, and obesity. In Pasco County, 29.2% of people were diagnosed with hypertension compared 28.2% in Florida.

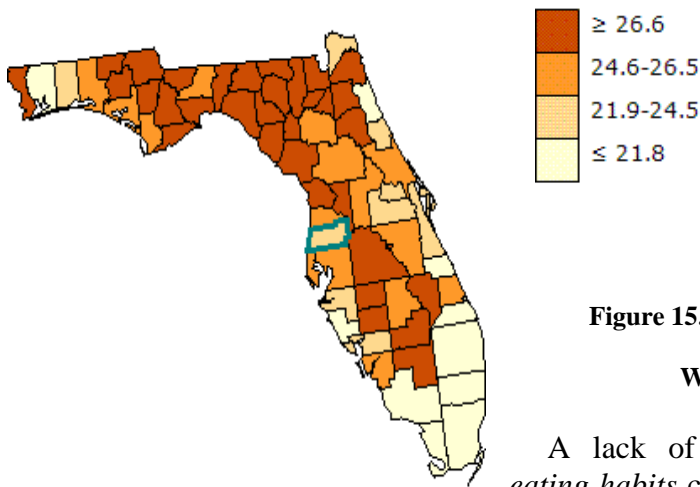
*Physical activity* rates which are correlated to hypertension are noticeable in Pasco County. Favorably, the percentage of adults who are sedentary in Pasco County is 22.3% compared to 25.4% in Florida. On the other hand, 61.9% of adults in the county were found to be inactive compared to 64.5% of the state. The percentage of adults who meet moderate physical activity recommendations in the State is 34.6% and in Pasco it's 34.9%. Similarly, the percentage of adults who meet vigorous physical activity recommendations in the State is 26 % and in Pasco it's 27.4%. Although there is not a big difference, the statistics show that Pasco County is more involved in Physical Activity than the state of Florida.

During the last two decades, there has been a great increase in the number of people who are *obese and overweight* in the United States (Centers for Disease Control and Prevention). In spite of the 2010 Healthy People objective of decreasing the prevalence of obesity, data has not shown an improvement. In Pasco County though, the percentage



of adults who have a healthy weight (Body Mass Index-BMI from 18.5 to 24.9) exceeds by 5 points the Florida average.

The percentage of adults that are overweight (BMI  $\geq 25$  to  $< 30$ ) and obese (BMI  $> 30$ ) is still high and, therefore, prevention education needs to be emphasized. There is a 35.9% rate of Pasco County adults that are overweight and a 26.1% rate that are obese. In Florida, the statistics are worse. Adults that represent the overweight population are 38% and the obese population are 24.1%. The percentage of adults whose body weight decreased by five pounds or more in the past year in the State of Florida were 23.0% and in Pasco County 22.9%. On the other hand, the percentage of adults whose body weight increased by five pounds or more in the past year in Florida was 22.4% and in Pasco County was 19.8%. (Figure 15)



**Figure 15. 2007 Age-Adjusted Estimates of the Percentage of Adults Who Are Obese in Florida.**

A lack of physical activity and unhealthy *eating habits* contribute to obesity, cardiovascular diseases, and type II diabetes. Examining the eating habits and physical activeness of Pasco County residents, may explain the high rates of those previously mentioned chronic illnesses in the county. The following graph (Figure 16) shows the difference between the state and the county’s average with respect to fruits, vegetables and serving sizes consumed daily. It demonstrates that Pasco County residents still need more nutrition prevention education and community awareness outreach events to promote better nutrition and health, and therefore a better quality of life.

<b>Adults who consumed:</b>	<b>Florida</b>	<b>Pasco County</b>
2 or more servings of fruits	36.2	32.7
3 or more servings of vegetable	29.1	27.3
At least 5 servings of fruits and vegetables	26.2	23.7

**Figure 16. Servings of Fruits and Vegetables Consumed.**

Better news for Pasco County may be found in the prevalence of *influenza and pneumonia immunizations*. These vaccinations have been utilized more by men in Pasco County, but by more women statewide. The percentage of adults age 65 and older who have ever received a pneumonia vaccination was higher in Pasco County than in the State

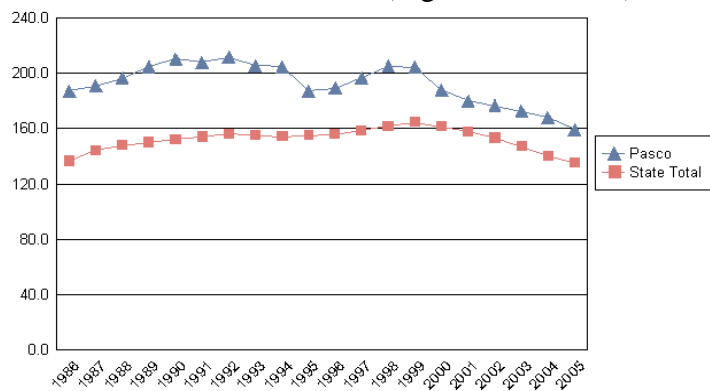
of Florida (69.5 and 63, respectively). Also the number of adults who received a flu shot last year was greater in Pasco County than in Florida (33.8 and 32.7, respectively).

In the last community profile (year 2007), more women were found to have received shots in Pasco County. This result may stem from public health institutions having more services for women and children than men. Consequently, women were more exposed to and were more accustomed to receiving public health services such as flu shots than men. Studies will have to be done to explain the difference in percentages and more residents, specifically men, will have to be targeted for immunodeficiency prevention education. In *cholesterol* screening, gender also plays a role in health seeking behavior. It is often assumed that women are generally more health-conscious than men. Interestingly, cholesterol screening in the last 5 years was more noticed in females through Florida but in more males in Pasco County. Similarly, more females reported checking their blood cholesterol in the last 2 years in the State of Florida than in Pasco County. Additionally, in Pasco County both females and males had the exact same rate (76.7%) for checking their blood cholesterol in the last 2 year. (Figure 17)

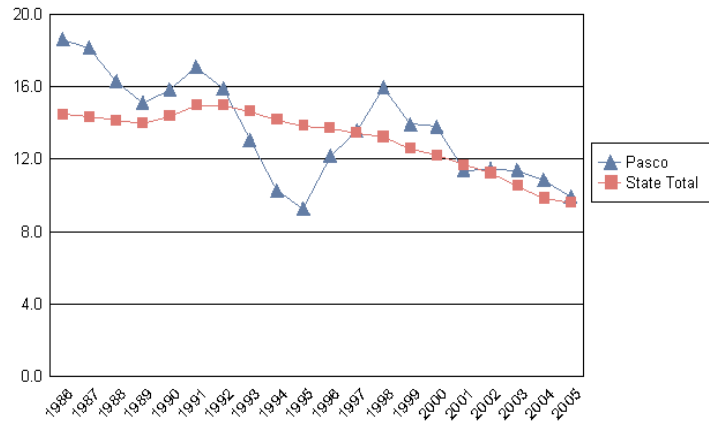
Adults who:	Florida	Pasco
Have high blood cholesterol	37.1 %	41.6%
Had cholesterol checked in the past 5 years	78.5%	80.7%
Had cholesterol checked in the past 2 years	73.3%	76.7%

**Figure 17. Cholesterol Rates in Pasco and Florida.**

The best way to detect the incidence of breast and cervical *cancer* is through mammograms and Pap smears. These screening tools can drastically alter the outcomes of these cancers. The percentage of women 18 years of age and older who received a Pap smear test in the past year was higher in Pasco County than in the State of Florida (66.2% and 64.8%, respectively). Similarly, the percentage of women 40 years of age and older who received a mammogram in the past year was higher in the State of Florida than in Pasco County (64.9% and 63.9%, respectively). Both breast and cervical cancer incidence rates are worse in Pasco than in Florida. (Figures 18 and 19)



**Figure 18. Breast Cancer Incidence. Rolling 3 year rate per 100,000 population.**



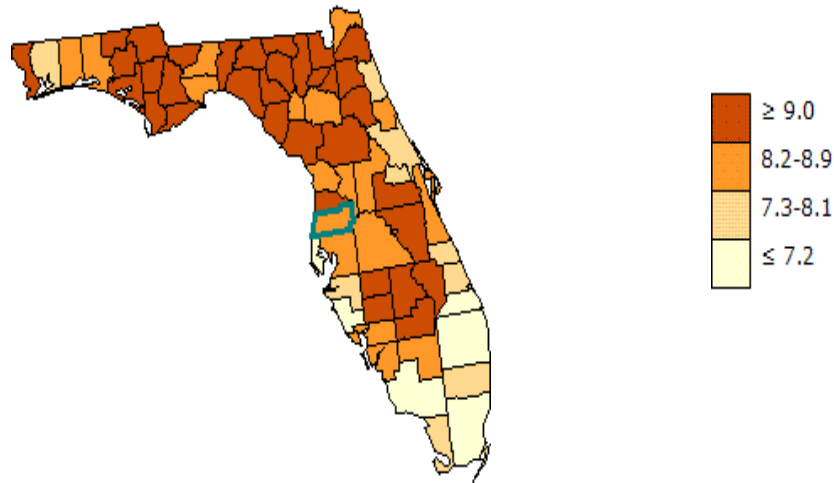
**Figure 19. Cervical Cancer Incidence. Rolling 3 year rate per 100,000 population.**

There are fewer people in Pasco County that have been tested for, *the Human Immunodeficiency Virus (HIV)*, than in the state of Florida. The percentage of people less than 65 years of age who have even been tested for HIV in 2007 was 49.1% in Florida and 45.6% in Pasco County. Being tested for HIV is one of the best ways to limit transmission to others to assure better outcomes via early intervention. Pasco County lags behind the state in those who have been tested, which may be a response to Pasco’s comparatively low percentage of adults who have HIV. Unfortunately, another route for reducing transmission, education, may be lacking because of the perception that HIV and STDs are not risks for Pasco County residents. The percentage of adults who reported that their doctor talked to them about preventing sexually transmitted diseases via condom use is significantly lower in Pasco County compared to the State of Florida. For the 2006-2008 periods the percentage of HIV cases per 100,000 people in the state is 32.2% and for Pasco is 13.6%. Similarly the percentage of AIDS cases per 100,000 people in the state is 23.7% and for Pasco is 9.2%.

Pasco County residents may not choose from as many *practitioners or health department employees* as much of the state may. For instance, the rate of licensed dentists in Pasco lags far behind the overall rate for Florida, which may explain why the number of people who have visited a dentist for a teeth cleaning is lower than the state average. For the 2006-2008 period, there were 62.6 licensed dentists in Florida per 100,000 compared to only 33 per 100,000 in Pasco County. The percentage of adults who could not see a dentist in the past year because of cost in the state was 19.2% and for Pasco it was 23.2%. Overall, the percentage of adults who could not see a doctor at least once in the past year due to cost in the state was 15.1% and in Pasco 17.9%.

Some of the risk factors for *diabetes mellitus* include old age, hypertension, and obesity, for which Pasco County has higher rates than the state. Pasco County is in the first quartile in the state for population diagnosed with diabetes due to the combination of age, high blood pressure, and excess weight seen in county residents. The percentage of adults with diagnosed diabetes for the State of Florida is 8.7% and for Pasco County its 8.4%. The average age at which diabetes was diagnosed for Florida residents was 50.9%

and for Pasco residents 52.8% (Figure 20). This statistic may show the need of Pasco County residents to do regular check ups, which in turn may not be easy to accomplish due to the lack of health service facilities and physicians available to the community. Even though Pasco County residents received more diabetes self management education than the state average, the percentage of adults with diabetes who self monitored their blood glucose at least once a day was higher in the state than in the county.



**Figure 20. 2007 Age-Adjusted Estimates of the Percentage of Adults with Diagnosed Diabetes in Florida.**

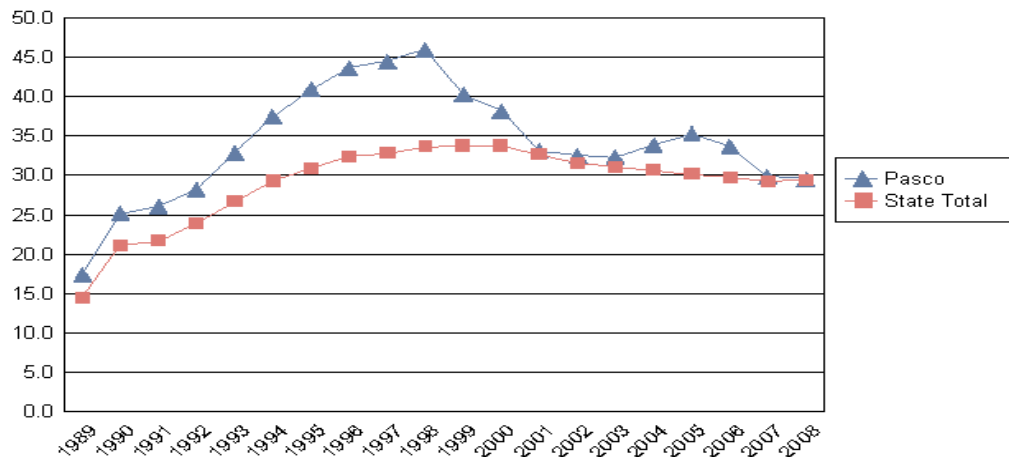
The American Diabetes Association reported that in 2009 there are 23.6 million children and adults in the United States that have diabetes. About 5.7 million people do not know that they have the disease.

Diabetes Mellitus is a disease characterized by the insufficient production of insulin or by the inappropriate responsiveness towards it. Insulin, which is a hormone produced in the pancreas, is responsible for allowing cells to absorb glucose to turn into energy. The improper use of insulin by the body causes glucose to accumulate in the blood or increase high blood sugar levels.

Some of the complications of Diabetes Mellitus are heart disease, stroke, high blood pressure, blindness, kidney disease, nervous system disease, amputations, dental disease, complications of pregnancy, sexual dysfunction, biochemical imbalances, and others.

According to the American Diabetes Association the total annual economic cost of diabetes in 2007 was estimated to be \$174 billion. The total medical expenditures for the year 2007 were \$116 billion. Of the total expenditures, \$ 27 billion were attributed to diabetes care, \$58 billion to chronic diabetes-related complications, and \$31 billion to excess general medical costs.

Diabetes can be treated by controlling high blood sugar levels with eating appropriate healthy meals, engaging in physical activities, losing excess weight, and taking medications. Hospitalizations from amputations of a lower extremity attributable to diabetes are shown in the following chart (Figure 21). From 2006 to 2008 in the state of Florida, 29.3 people per 100,000 were hospitalized compared to Pasco County with 29.6 hospitalizations per 100,000 people. This rate shows the great importance and need for self management prevention education.



**Figure 21. Hospitalization due to Diabetes.**

Pasco County Health Department has a variety of programs that help people with diabetes control the disease. Registered Dietitians are dedicated to educate people about diabetes and self-management in order to improve health outcomes and therefore quality of life.

According to CHARTS, Pasco had a rate of 5,128 deaths for the 2006-2008 period compared to 5,137 deaths for the 2005-2007 period. Of these deaths, there were 177 deaths attributed to Diabetes Mellitus in Pasco County for the 2006-2008 period and 186 deaths for the 2005-2007 period. Therefore for both periods, an average of 3% of deaths was found to be attributed to Diabetes Mellitus in Pasco County (3.45% for 2006-2008, and 3.62% for 2005-2007). The age adjusted 3 year death rate for Pasco is 25.4 and Florida's death rate is 20.6.

*Gestational Diabetes* is a condition where women with no previous diabetes history experience high blood sugar levels during pregnancy. This disease affects about 3% to 10% of all pregnant women. This condition may improve or even disappear after the delivery of the baby. It is treatable, but requires careful medical supervision in order to prevent complications to the mother and the fetus. Some of the risks that the fetus of a mother with gestational diabetes faces are high birth weight (macrosomia), congenital cardiac and central nervous system anomalies, and skeletal muscle malformation.

According to a recent study (2008), more American women are entering pregnancy with pre-existing diabetes. In the last 6 years, the rate of diabetes in pregnant women has doubled. Diabetes management classes need to be given to the community because it raises the risk of complications during pregnancy, and increases the potential that the children of diabetic mothers will also become diabetic in the future.

Between October 1, 2008 and September 30, 2009, there were 3,492 pregnant women in WIC, of which 42 (1.2%) had diabetes.

### **FOOD INSECURITY AND HUNGER IN PASCO COUNTY**

In 2007, 36.2 million Americans lived in food insecure households; 23.8 million adults and 12.4 million children. Food insecurity is the limited or uncertain availability of nutritionally adequate or safe foods, or the inability to acquire foods in socially acceptable ways. Food insecure households do not have access to enough food to meet basic needs at all times (America’s Second Harvest).

New ranges used by the United States Department of Agriculture (USDA) to describe food insecurity and hunger were reintroduced in 2006. (Figure 22)

<b>(old and new labels are the same)</b>	<b>Detailed categories</b>		
	<b>Old label</b>	<b>New label</b>	<b>Description of conditions in the household</b>
<b>Food security</b>	Food security	<b>High food security</b>	No reported indications of food-access problems or limitations
		<b>Marginal food security</b>	One or two reported indications—typically of anxiety over food sufficiency or shortage of food in the house. Little or no indication of changes in diets or food intake
<b>Food insecurity</b>	Food insecurity without hunger	<b>Low food security</b>	Reports of reduced quality, variety, or desirability of diet. Little or no indication of reduced food intake
	Food insecurity with hunger	<b>Very low food security</b>	Reports of multiple indications of disrupted eating patterns and reduced food intake

**Figure 22. Detailed Categories for Food Insecurity and Hunger (USDA).**

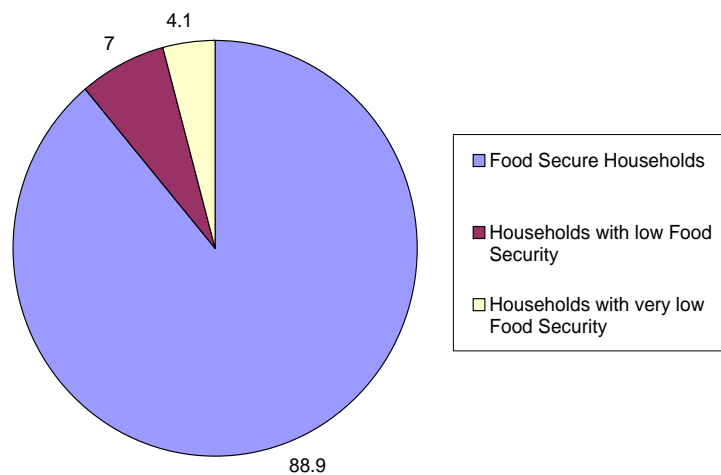
The USDA defines food security for a household as having access by all members at all times to enough food for an active, healthy life. Food security includes at a minimum (1) the ready availability of nutritionally adequate and safe foods, and (2) an assured ability to acquire acceptable foods in socially acceptable ways (that is, without resorting to emergency food supplies, scavenging, stealing, or other coping strategies).



Similarly, According to the United Nation’s Food and Agricultural Organization (FAO) food security exists when all people, at all times, have physical and economic access to sufficient, safe and nutritious food to meet their dietary needs and food preferences for an active and healthy life.

In Florida, more than 12.2 % of families are living in food insecure households. Food insecurity is seen in all races and ages, the homeless, and even in the elderly because a large number is forced to choose between paying either for medicine or food. Over 9% of households in Pasco County are food insecure according to the USDA.

The Food insecurity rate for Florida, according to Feeding America, is 9 %. There are 15.9% of children in the state that are food insecure and 16.4% of children under the age of 5 that are considered food insecure. Also it is important to mention that the poverty rate in the state is 12.5% and the child poverty rate is 5.4 points higher. The unemployment rate for the state of Florida was estimated to be 12.2%.



**Figure 23. Food Security in Households by USDA.**

There has been an increase of food insecure households in the last years. According to Feeding America in 2008, 49.1 million Americans lived in food insecure households, 32.4 million adults and 16.7 million children. As seen in graph above, there are 7% of families in the United States that are considered households with low food security and 4.1% are considered households with very low food security. (Figure 23)

Food insecurity in households is due to the lack of economic resources to obtain food. Since food can be bought from supermarkets, vending machines, fast food restaurants, and others, the amount of money that a household spends on food determines the quality of the meals that they are consuming on a daily basis. In other words, food spending mirrors food consumption of households.

According to the Thrifty Food Plan developed by the USDA the typical U.S households spent \$42.50 each week per person in 2007. The Thrifty Food Plan serves as a national standard for a nutritious, low cost diet. Interestingly enough, more money was spent in those households with no children compared to the households that had children. The food expenditure rate was lower for Black and Hispanic households than for non-Hispanic white households (Black 1.02%, Hispanic 1.01%, and 1.27% White).

Higher income families spent more money on food than lower income families. However, food income does not rise proportionally with income increases. It was seen in the Economic Analysis for Food Security of the Economic Research Service that high income households actually spend a smaller portion of their income on food than do low income households. The following table (Figure 24) is the weekly spending per person and relative to the cost of the Thrifty Food Plan (TFP) of 2007.

Category	Number of Households (1,000)	Median weekly food spending	
		Per person (Dollars)	Relative to the cost of TFP (Ratio)
All households	106,254	42.50	1.20
Households Composition			
<b>With children &lt; 18 years</b>	36,533	33.33	1.06
At least one child < 6 yrs	16,342	30.00	1.06
Married – couple families	24,916	33.33	1.09
Female head, no spouse	8,687	31.50	.98
Male head, no spouse	2,353	33.33	1.0
Other household with child	577	33.33	1.08
<b>With no children &lt;18 years</b>	69,721	50.00	1.28
More than one adult	40,966	45.00	1.23
Women living alone	16,131	50.00	1.27
Men living alone	12,624	63.00	1.47
<b>With elderly</b>	24,099	41.97	1.13
Elderly living alone	9,115	50.00	1.23
Race/ethnicity of households			
White non Hispanic	75,694	45.00	1.27
Black non Hispanic	12,432	36.25	1.02
Hispanic	12,305	33.33	1.01
Other	5,824	40.00	1.11
Household income to poverty ratio			
Under1.00	10,892	30.00	.90
Under 1.30	16,208	32.50	.92
Under 1.85	25,460	33.00	.95
1.85 and over	61,628	50.00	1.31
Income unknown	19,165	41.25	1.16
Area of residence			
Inside metropolitan area	88,584	44.00	1.23

In principal cities	29,586	45.00	1.23
Not in principal cities	43,783	45.00	1.26
Outside metropolitan area	17,670	37.50	1.02
Census geographic region			
Northeast	19,139	43.75	1.23
Midwest	24,130	40.00	1.12
South	38,967	42.50	1.20
West	24,018	45.00	1.25

**Figure 24. Weekly Food Spending per Person.**

The percentage of households reporting indicators of adult food insecurity, by food security status; food secure, low food security, and very low food security was reported in 2008 by the United States Department of Agriculture (Figure 25).

**Percentage of households reporting indicators of adult food insecurity, by food security status, 2007**



**Figure 25. Food Insecurity Indicators.**

As seen in the figure above (Figure 25), some of the conditions reported by “very low food security” are compared with “low food security” and “food secure” households. Households without children that were classified as having “very low food security” reported at least six of these conditions, and 71% reported seven or more. Food-insecure conditions in households with children followed a similar pattern. Nine eight percent of “very low security” households reported being worried that their food would run out before they got money to buy more.

Current economic hardships experienced by residents of Pasco County have led to an increase in applications for nutrition services never experienced before. In 2009, food insecurity in Pasco County is at an all time high: Supplemental Nutrition Assistance Program (SNAP) applications up 75%; WIC participation up 18%; and Free/Reduced Lunch participation now covers 48% of all children enrolled in district schools. In 2008, 4.1% of all households in America accessed emergency food from a food pantry at least once. It was also seen in 2008 that 55% of food insecure households participated at least in one of three major food assistance programs (WIC, SNAP, or School Lunch Program). It is anticipated that demand for these essential nutrition programs will continue to increase well into 2010.

According to Elizabeth Fields, Executive Director of the Suncoast Harvest Food Bank which serves Pasco and Hernando Counties, the food distribution has seen an increase in participants. In July 2009, 171 people participated in the food distribution and in August 2009, 216 people participated. That is an increase of 26% in participation.

Feeding America, the nation’s leading hunger-relief organization formerly known as Second Harvest, conducted a research study in September 2009. Its network food banks showed a dramatic increase in requests of 30% for emergency food assistance. According to Vicki Escarra, President and CEO of Feeding America “National socio-economic indicators, including the escalating unemployment rate and the number of working-poor, lead us to believe that the number of people facing hunger will continue to rise significantly over the coming year.”

In a recent study conducted by Feeding America, new challenges faced by food banks, their member agencies, and clients served were seen. This statistics from December 2008 determined that every food bank respondent (160 out of 205) said that they had an increase in the demand of emergency food assistance. The rate of estimates increase in demand ranged from 28.6% to 37.7%. This is a complicated issue since more unemployed and first time users are seen. Additionally, the cost of food has been on the rise; 91% of the food banks attributed this issue to be one of the main contributors to the increase in demand.

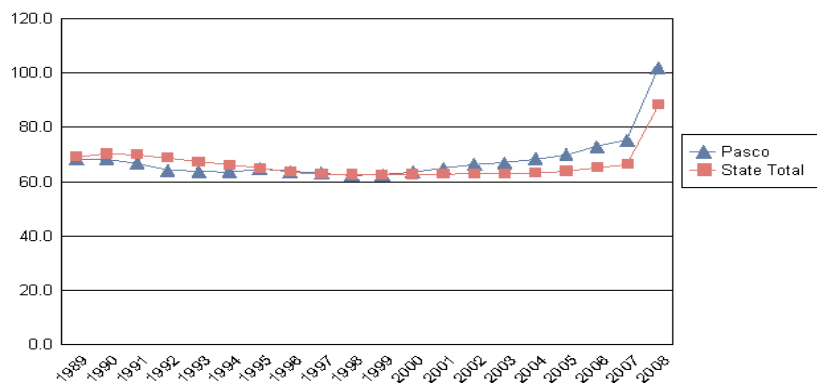
As mentioned before, the number of persons in Florida participating in the Food Stamps Program has dramatically increased since last year. In May of 2008, there were 1,475,659 people participating in Food Stamps. As of May of 2009, an additional 539,069 residents enrolled in the program.

The Household Food Insecurity study, conducted by The U.S Department of Agriculture’s Economic Research Service in 2008, shows the prevalence rates on food insecurity in the nation. It was seen that regionally, the prevalence of food insecurity was highest in the South (15.9 %), intermediate in the West (14.5 %) and Midwest (14.0 %), and lowest in the Northeast (12.8 %). Estimated prevalence rates of food insecurity during this 3-year period ranged from 6.9 % in North Dakota to 17.4 % in Mississippi. In Idaho, South Carolina, Utah, and Wyoming the prevalence rate of food insecurity declined from 2003-05 to 2006-08. On the other hand, prevalence rates increased in 13 States, with the largest increases observed in Nevada and West Virginia. The prevalence of household food insecurity in Florida for 2006-2008 was 12.2%.

The U.S Department of Agriculture Economic Research Service (USDA) confirmed in November 2009, that 49 million Americans, including 17 million children, are food insecure. According to Clara Lawhead, Director of the Community Health Promotion Division of the Pasco County Health Department and Founder of the Suncoast Food Bank “it is a great display of morale courage when a community comes together to resolve food insecurity for its vulnerable citizens.”

### **FERTILITY AND MATERNAL AND INFANT HEALTH**

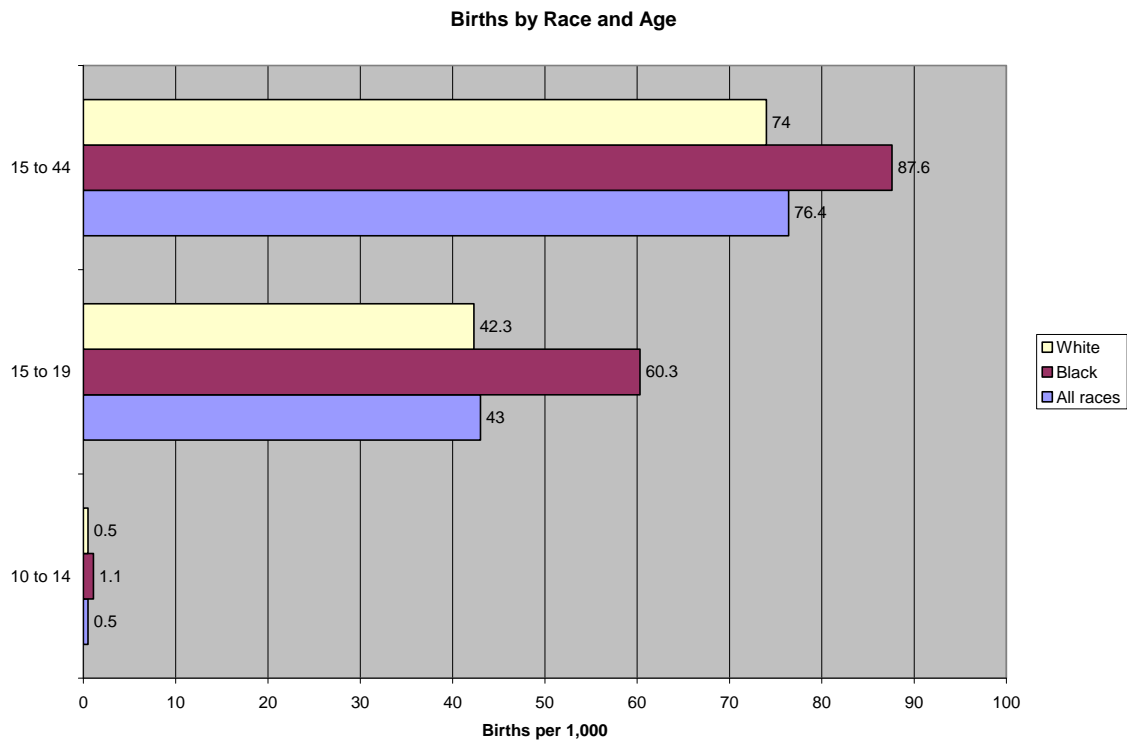
From 2006 to 2008, the average number of total live births for Pasco County women residents was 7,124 (Figure 26). Pasco County has one of the largest birth rates in the state of Florida. The birth rates for Pasco County increased from a 75.2 per 100,000 residents in the 2005-2007 period to 101.9 per 100,000 residents in the 2006-2008 period. Similarly the total number of multiple births in Pasco increased from 176 from the 2005-2007 period to 186 for the 2006-2008 period.



**Figure 26. Fertility Rate -Rolling 3 year rate per 100,000.**

Unwed women in Pasco County produced 38.4 % of all births in 2006-2008, a slight increase from previous periods (35.7% for 2004-2006 and 37.6% for 2005-2007). African American women were more likely to be unwed at the time of the child’s birth and to give birth between the ages of 15 and 19 than white women (Figures 27). Also, African Americans have the largest rate for births in all age periods. Ten to fourteen year old African Americans have more births by a 0.6 birth rate per 1,000 women than whites and

all other races. From 15 to 19 years old the birth rate per 1,000 women of African Americans is 60.3 followed by all other races with a 43, and with whites with 42.3. For the 15 to 44 year old group African Americans have a higher birth rate than whites and all races (87.6, 74, and 76.4 respectively) (Figure 27). The teen (15-19) repeat birth rate in Florida exceeds the Pasco average (17.1% and 18.4% respectively) and the teen birth rate percentage is slightly higher in the state of Florida than in Pasco (10.7% and 10.1% respectively).



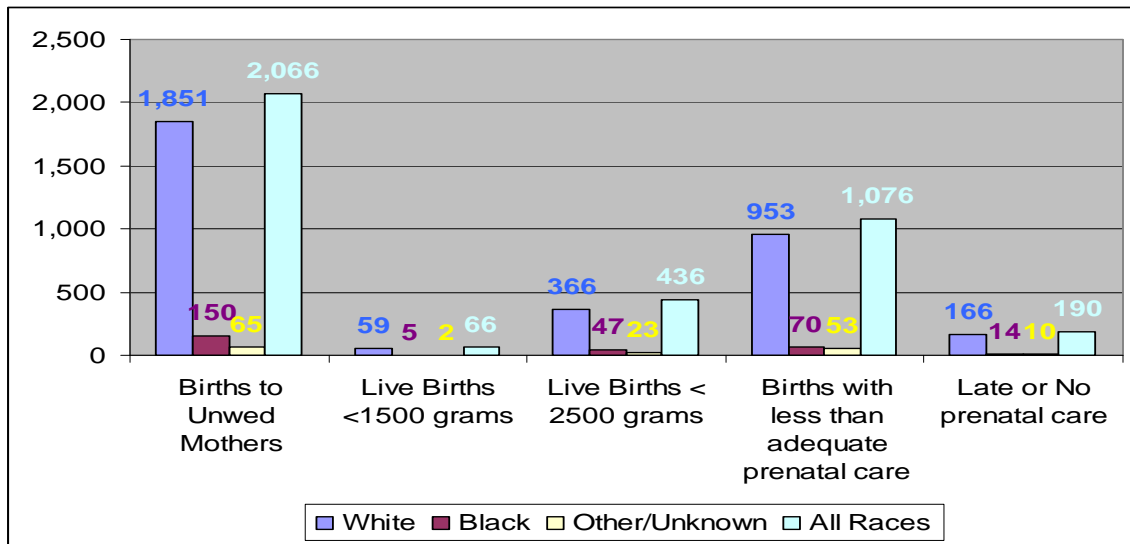
**Figure 27. Births by Race and Age.**

According to the Florida Tobacco Prevention and Control County Data Profile in 2008, an alarming 15.0% of mothers reported smoking during pregnancy. This is more than double that of Florida (7.1%). Smoking nearly doubles a woman's risk of having a [low-birth weight](#) baby. The more a pregnant woman smokes, the greater her risk of having a low-birth weight baby. Resident live births to mothers who smoked during pregnancy in 2006-2008 were 785 (15.5%) compared to 802 in the 2005-2007 period (14.7%). In Florida the average rate for resident live births to mothers who smoked during pregnancy was and 7.1 for the 2006-2008 period 7.5 for the 2005-2007 period. Although the numbers of resident live births to mothers who smoke have decreased both in the county and the state, Pasco's rate is double the state's rate.

Low birth weight can result from poor growth before birth, preterm delivery, or a combination of both. Smoking has long been known to slow fetal growth. Smoking also increases the risk of [preterm delivery](#) (before 37 weeks of gestation). In 2008 there were



66 live very low birth weight babies (less than 1500 grams) and 436 live low birth weight babies (less than 2500 grams).(Figure 28)



**Figure 28. Births by Races and Characteristics.**

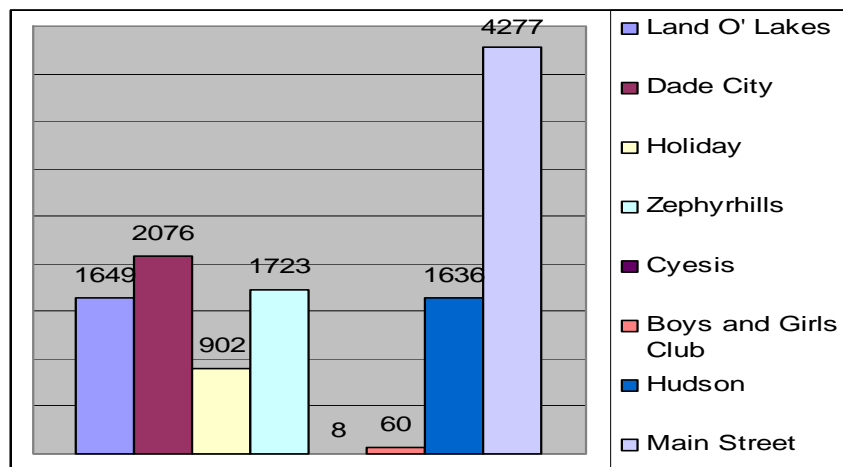
There were a total of 2,066 births to unwed mothers in 2008 (38.4 per 100,000 people compared to Florida with 45.8 per 100,000). As seen in the previous figure the majority of them were attributed to white mothers followed by African Americans and unknown races. There were a total of 1,076 births that had less than adequate prenatal care and 190 births with late or no prenatal care. (Figure 28)

Premature and low-birth weight babies face an increased risk of serious health problems during the newborn period, chronic lifelong disabilities (such as [cerebral palsy](#), mental retardation and learning problems), and even death. A recent study suggests that women who smoke anytime during the month before pregnancy to the end of the first trimester are more likely to have a baby with birth defects, particularly [congenital heart defects](#). March of Dimes explains that the risk of heart defects appears to increase with the number of cigarettes a woman smokes. However, if a woman stops smoking even by the end of her second trimester of pregnancy, she is not more likely to have a low-birth weight baby than a women who never smoked.

Pasco County has different programs that support for breastfeeding initiation and promote healthy pregnancies. The Pasco County Health Department (PCHD) houses a WIC program and breastfeeding classes while numerous hospitals provide tools and guidance to promote healthy pregnancies. Additionally, the PCHD is starting a peer breastfeeding support group to increase the number of women who initiate breastfeeding, increase the duration of breastfeeding, promoting healthy food choices and improve the health status of the people of Pasco County. Additionally, The All Children's Specialty Care of Pasco provides breastfeeding support with La Leche League. Childbirth classes are available at Pasco Regional Medical Center in Dade City. Childbirth super-prep and pediatric CPR classes are located at the Birthplace at Community Hospital in Dade City.

There are 22, 503 children between the ages of 0 and 4 in Pasco and 59% of them are participating in the WIC. The Women, Infants and Children (WIC) federally-funded program is for children under the age of five who are found to be at nutritional risk. WIC provides the following at no cost: checks for healthy foods, nutrition education and counseling, breastfeeding support, and referrals for health care for those with an income at or below WIC guidelines.

The Pasco County WIC program has over 14,000 participants in seven distinct locations. According to the enrollee zip code count by local agency, the WIC clinic with the largest number of enrollees for August 2009 is Main Street in New Port Richey with 4,277. The WIC clinic in Dade City has 2,076 enrollees and the clinic in Zephyrhills has 1,723 participants enrolled. Hudson and Land O’ Lakes clinics have similar WIC numbers with 1,636 and 1,649 participants respectively. (Figure 29)



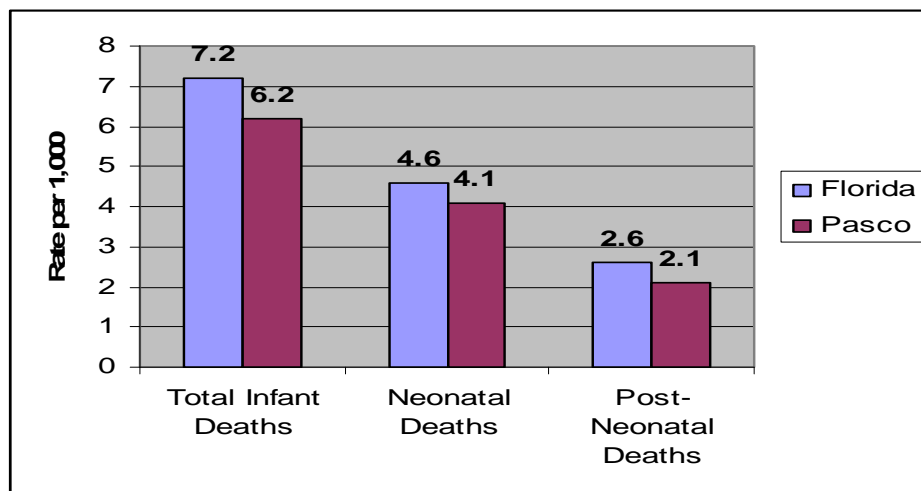
**Figure 29. Enrollee Zip Code Count by Local Agency.**

The WIC program consistently supports the needs of those families and provides them with resources to allow for appropriate growth and development of both the pregnant mother and her children. WIC is an advocate of breastfeeding and its benefits to the child. According to research studies, breastfed children have fewer allergies, as well as a reduced risk of obesity, diabetes, some childhood cancers, and Sudden Infant Death Syndrome (SIDS). Studies show that women who breastfeed have a decreased risk of breast and ovarian cancers, anemia, and osteoporosis. Currently, about 68 % of Florida WIC mothers breastfeed, an increase of 38 % since 1990. The program praises and encourages breastfeeding for at least a year by offering better food packages for those that make the choice to do so. In October 2009, WIC introduced a new food package to provide even healthier options to those receiving services. The packages have less saturated fat and provide whole grains, and more fruits and vegetables to help individuals obtain the vitamins and minerals that are less sufficient in the current packages.

Folic acid awareness has been of great importance to pregnant women. It is now understood that folic acid plays a critical role in preventing birth defects. However, only 50% of Pasco County women under age 45 take a multivitamin. Repeated studies have

shown that women who get 400 micrograms (0.4 milligrams) daily prior to conception and during early pregnancy reduce the risk that their baby will be born with a serious neural tube defect (a birth defect involving incomplete development of the brain and spinal cord) by up to 70%. The most common neural tube defects are spinal bifida, anencephaly, and encephalocele (when brain tissue protrudes out to the skin from an abnormal opening in the skull). All of these defects occur during the first 28 days of pregnancy, usually before a woman even knows she's pregnant.

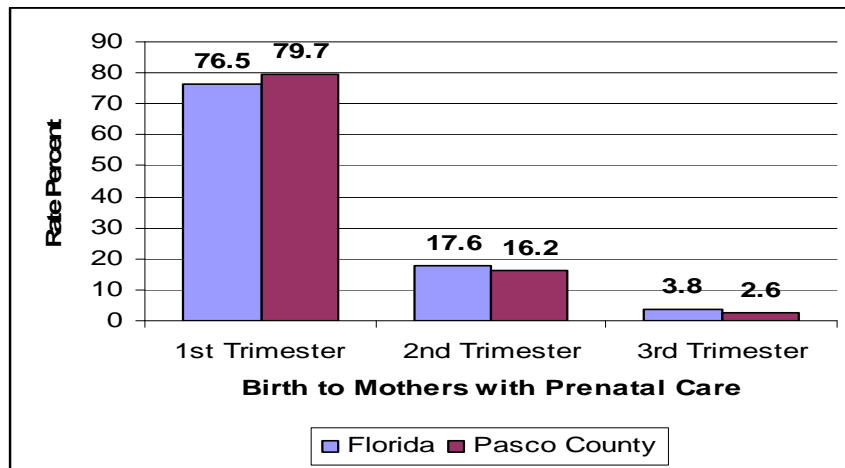
Neonatal and post neonatal deaths in Pasco are lower than the state death rates and vary according to race. Black infant death rates in 2008 were 12.3 per 1,000 births in Pasco, compared to 13.0 per 1,000 in Florida. Less babies of white descent die compared to any other race. In Pasco County, the infant death rate of white babies is higher than Florida's rate (5.8 and 5.4, respectively). For all other races, both the County and the state have the same rate of infant death (7.3). Such disparities are reasons for alarm; although the County rates have declined from previous years, suggesting that prenatal care is effective (Figure 30). The total infant mortality rate in 2008 for Pasco County was 6.2 and for Florida was 7.2 per 100,000.



**Figure 30. Infant, Neonatal, and Post -neonatal Deaths by Race for 2006-2008 period.**

Prenatal care offered to pregnant mothers would certainly be one step to help reduce infant mortality rates in Pasco County. The types of prenatal services in the Pasco consist of low-risk prenatal care services, midwifery programs, high-risk prenatal care services, Doula, centering pregnancy, and group care. The Pasco County Health Department has a full service prenatal care clinic located at Main Street in Downtown New Port Richey. The Improved Pregnancy Outcome (IPO) provides medical and genetic histories, physicals, non-stress tests, ultra-sounds, all labs, dental, WIC services, high risk specialists, genetic counseling and temporary Medicaid for pregnant women.

In spite of the high rates of prenatal mortality found in Pasco County, 79.7 % of mothers are receiving prenatal care within their first trimester. Furthermore, 16.2 % of mothers in Pasco are receiving 2<sup>nd</sup> trimester prenatal care and 2.6% of mothers are receiving 3<sup>rd</sup> trimester prenatal care. (Figure 31)



**Figure 31. Births to Mothers with 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> Prenatal Care.**

The effects of prenatal care show conflicting results when applied to birth weight. Fetuses that are not properly taken care of during pregnancy may be born prematurely and severely underweight. Infants born to Black mothers are more often born underweight than White babies. Hispanic mothers have underweight births at a rate similar to (and occasionally better than) White mothers. Cultural and other factors may be responsible for these disparities. For instance, chronological spacing between births may produce healthier babies. Twenty-two percent of repeat births occurred in the 18<sup>th</sup> month period after the previous birth. In Pasco, spacing is 1% under the state average births according to the Five-Year Plan for Prevention of Child Abuse, Neglect and Abandonment – Pasco and Pinellas Counties: 2005-2009 (2005). The slightly better rates of pregnancy spacing may correlate to Pasco’s slightly better than state average rates of infant deaths (Pasco: 6.9/1,000 vs. Florida: 7.2/1,000).

The CDC reports that one of every thirty-three babies is born with a birth defect. Birth defects can affect almost any part of the body. Many birth defects affect the heart, making up approximately one-third to one-fourth of all birth defects. Orofacial clefts including cleft lip, cleft palate and combined cleft lip and palate can affect about 1 in 700 to 1,000 babies in many places of the world.

Some women have a higher chance of having a child with a birth defect. Women who smoke, use drugs and/or drink alcohol during pregnancy are putting their babies at greater risk for birth defects. However, not all risk factors are through substance abuse. Women over the age of 35 have a higher chance of having a baby with Down syndrome than younger women. Certain prescription drugs can increase the chance of birth defects. Genetic birth defects are also present in some families. The following table shows the birth defects present in Pasco County from 1998-2005 (Figure 32). The following table specifies conditions, estimated cares and the frequency of the birth defects.

	<b>Estimated Cases</b>	<b>Frequency</b>
<b>Children with Structural Birth Defects</b>	785	1 in 40
<b>Specific Conditions</b>		
<b>Congenital Heart Defects</b>	242	1 in 131
<b>Chromosomal Abnormalities</b>	50	1 in 633
<b>Down Syndrome</b>	45	1 in 704
<b>Oral Clefts</b>	55	1 in 576
<b>Neural Tube Defects</b>	9	1 in 3,518
<b>Abdominal Wall Defects</b>	25	1 in 1,267
<b>Limb Malformations</b>	9	1 in 3,518

**Figure 32. Birth Defects in Pasco County.**

According to the Florida Birth Defects Registry (FBDR), Fetal Alcohol Syndrome (FAS) is the only known birth defect that is “totally preventable.” There is no safe level of alcohol intake during pregnancy. FAS can manifest itself through physical and mental problems. These problems may include face, heart and/or limb defects, slow growth, mental retardation, behavioral problems, and/or developmental delay. Different levels of alcohol consumption may result in either the classic pattern of defects, called FAS, or in a variety of symptoms referred to as alcohol related birth defects (ARBD). FAS and ARBD are the leading known causes of mental retardation and birth defects in humans. The effects of FAS can be seen within the classroom environment. These effects include distractibility, problems with concrete thinking, frustration, poor fine and gross motor skills, poor attention, lack of organizational skills and poor peer relations. The National Organization on Fetal Alcohol Syndrome estimates that in a lifetime, it costs \$1.4 million dollars to treat one person with FAS.

The infant mortality rate in the Country was 6.69 per 1,000 live births, higher in the State of Florida with a rate of 7.2, and 6.2 in Pasco County. According to the Center for Disease Control (CDC), Sudden Unexpected Infant Deaths (SUID) is defined as infant deaths that occur suddenly and unexpectedly. More than 4,500 infants die suddenly of no obvious cause each year in the United States. For the 2006-2008 periods, there were 6 reported cases of SUID in Pasco County (CHARTS). The leading cause of SUID and of all deaths among infants aged 1–12 months are due to Sudden Infant Death Syndrome (SIDS).

Sudden Infant Death Syndrome (SIDS) is one of the most frightening prospects involved in parenthood. SIDS is the number one cause of death among infants ages one month to one year old. According to CDC, approximately 2,500 infants die of SIDS in the United States every year. The Community Foundation of Pasco County has awarded the Healthy Start Coalition of Pasco a \$7,500 grant to fund the “Gentle Touch” program. Gentle Touch is an education program for parents and caregivers aimed at reducing the risk of parent/infant co-sleeping/bed sharing and Sudden Infant Death Syndrome (SIDS) by providing safety education and developing family empowerment strategies for its participants. Upon completion of the program, each participant will receive a free crib as an incentive.

## **CHILDREN'S HEALTH**

The current population of children ages 1-5 in Pasco County is 23,168. Of that population, 21,041 are white (Hispanics number 3,672), 1,261 are black and 866 are considered other nonwhite. The following data applies to this demographic group:

- Foster care shelters 8% of these children compared to the state rate of 5.9%.
- Mental health treatment services are provided to 19.5% of these children.
- Free and reduced lunch enrollment in Pasco County is 45% as compared to 57% statewide.

There are 3,844 children residing in Pasco County who suffer from pediatric asthma. There were 177 hospitalizations for asthma related illnesses for children ages 1-5 during the years of 2006-2008 (810.2 per 100,000). Second hand smoke could be playing a major role in this statistic as well as other environmental factors, such as air quality. In 2003, The American Lung Association State of the Air Report did find that Pasco had improved air quality grade from F to C. In an effort to improve the health of the eligible asthma patients, the Good Samaritan Health Clinic offers a pulmonary/asthma clinic once a month.

It is important that children be immunized to prevent the spread of disease. Children have weaker immune systems than adults which place them at greater risk for infectious diseases. This risk is offset by the Pasco County Health Department where children can receive free immunization. Unfortunately, 6% of Pasco County kindergarten children still are not fully immunized.

School readiness programs enhance the social, emotional, physical, and cognitive development of children. Education and preventative medical treatment for young children can health decrease problems in later years. Ninety four percent of children are enrolled in School Readiness programs. The rate of children participating in Head Start is 49.6%; while the rate of children younger than three years old receiving Early Steps services for developmental delays is only 3.6%. Children ages 3-5 with disabilities receiving pre-K services is only 35.8%. The rate of children participating in voluntary pre-K (VPK) programs is 72.4% which is admirable, especially when compared to the state rate of 57.3%.

In 2008, 29.3% of children enrolled in WIC older than one year of age were overweight. Fortunately, a new WIC menu was implemented in October 2009 to address this issue in order to provide children with better options which are lower in fat and sugar, and higher in important nutrients.

The overall cancer incidence rate per 100,000 children ages 1 to 5 was 27% for the 2004-2006 periods. This number seems to correlate with the large incidence of second hand smoke. The resident live births to mothers who smoked during pregnancy in Pasco County were 14.7 % during 2006-2008. Similarly, national laws have been enacted to



bring more awareness to the harmful effects of secondhand smoke. This would be an appropriate intervention for Pasco who has one of the highest smoking rates in Florida. In 2007, 30% of adults in Pasco County were smokers compared to 19.3% in Florida.

Childhood injuries and deaths are at an all time high. The most prevalent injuries include near drowning, traumatic brain injuries, unintentional falls, motor vehicle injuries, and poisonings. Appropriate car seats should be used for children under the age of two. Childhood drowning prevention should include limited access to pool areas through the use of locked doors, fences, and other barriers. Poison proofing strategies should consist of keeping cleaning supplies, medicines, and any other harmful substances out of the reach of children.

Child abuse and maltreatment also plays an obvious role in the health of children. The Five-Year Plan for Prevention of Child Abuse, Neglect and Abandonment – Pasco and Pinellas Counties: 2005-2009 studied childhood weight gain. According to their findings, 4.2 % of Pasco County children are in the lowest 5th percentile for their height-to-weight ratio. This height-to-weight indicator for child health is better for Pasco County than Pinellas County, which has 6.6 % of children in the lowest 5th percentile for. Additional data indicates that the child maltreatment rate is 10.4% for Pasco County children (Five-Year Plan for Prevention of Child Abuse, Neglect and Abandonment – Pasco and Pinellas Counties: 2005-2009). The rate for child maltreatment in Pasco County is significantly lower than the Pinellas' County rate of 25.4 %. Pinellas County has a higher child re-abuse rate of 9.2% compared to the 8.5% in Pasco County.

Children's Campaign, Inc. is a cutting-edge advocacy organization devoted to making children's issues a legislative priority while staying within the well-documented boundaries of permissible activities for a 501 (C)(3) organization. The organization builds awareness and support for public policy improvements through a mix of programs and services. It features five promises which focus on prevention, learning, juvenile justice, and after school programs, to ensure the health and well-being of children.

The Children's Health Insurance Program Reauthorization Act (CHIPRA) of 2009 was one of the first legislations passed by the 111th Congress and signed by President Obama on February 4, 2009 that extended and expanded the State Children's Health Insurance Program. CHIPRA adds \$33 billion in federal funds for children's coverage over the next four and half years, and is expected to provide coverage to 4.1 million children who received Medicaid or the Children's Health Insurance Program (CHIP). Otherwise these children would be uninsured by 2013. Pasco County Health Department is currently part of a coalition seeking state funding, through a grant, to implement outreach services for CHIPRA.

CHIP along with Medicaid, has helped to reduce the rate of low-income uninsured children by expanding eligibility levels and simplifying enrollment procedures. Coverage gains helped to increase access to health services for millions of children. Nine million children remain uninsured even though roughly two-thirds are eligible for Medicaid or CHIP. We need to make it a priority to find those children and get them



insured. The number of uninsured children in 2007 was 8.1 million (11.0 %) and in Florida was 800,000 children in 2009.

The current recession has left numerous children uninsured, therefore a wide variety of programs for low income and struggling families have been implemented. The Children's Health Express Van is a pediatrician's office on wheels, with no insurance forms and no fees. There are 37 mobile medical clinics like it in 15 states across the country. Originally intended to serve low-income, under-privileged children, the mobile medical units are also seeing parents who've lost their insurance. Therefore, support for the children of America is available. It is our job to make sure that those services reach the children. Similarly, the Ronald McDonald Care Mobile Program delivers pediatric and dental care services to underserved children in the Tampa Bay area, including Pasco County.

### **YOUTH HEALTH**

The American Community Survey (ACS) from the U.S. Census Bureau estimates that there are 52,382 adolescents between the ages of 10-19 residing in Pasco County. The Pasco County public school population for 2008-2009 for grades PreK-12 was 66,137 students with a graduation rate of 79.5%. Fourteen thousand twenty four of those students were enrolled in exceptional education programs (ESE) and 2,742 students enrolled in the English Speakers of Other Language (ESOL) Program. The chart below (Figure 33) shows the number of students in grades 6-10 and their corresponding FCAT achievement levels. It is apparent that as grade level increases reading level decreases. This may be due to outside factors and/or undiagnosed reading disabilities.

<b>2009 Florida Comprehensive Assessment Test (FCAT): Reading</b>							
<b>Grade</b>	<b>Number Tested</b>	<b>% in each Achievement Level</b>					<b>% in Achievement Levels 3 and Above</b>
		<b>Below Grade Level</b>		<b>On or Above Grade Level</b>			
		<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	
6	5,065	13	16	36	27	7	70
7	5,059	12	19	39	24	6	69
8	5,056	15	29	36	17	3	56
9	4,910	18	35	30	11	5	47
10	4,612	32	34	18	7	8	34

**Figure 33. Reading of the 2009 FCAT.**

There are 147,566 resident families in Pasco County. Of these families, 7,559 are living in poverty (The University of Georgia Initiative on Poverty and the Economy). The poverty rate for children is 15.87 %; double that of the elderly poverty rate. An estimated 18,623 families are single mothers raising children in Pasco County (Pasco County Juvenile Justice Council 2007-2010). This makes it difficult for these families to thrive, economically and health wise.

The Florida Youth Substance Abuse Survey-Pasco County Report 2008 (FYSAS) was administered to 1,616 Pasco County students in grades 6 through 12 in the spring of 2008. These results are crucial in helping to reduce and prevent substance use by school-aged youth. According to the results from the 2008 Florida Youth Substance Abuse Survey (FYSAS), Pasco County students tend to use alcohol, tobacco, and illicit drugs at a slightly higher rate than both state and national levels. Alcohol is the most commonly used drug among Florida students between 6th and 12th grades according to the 2008 Florida Youth Substance Abuse Survey (FYSAS). However, in Pasco County, alcohol is second to marijuana. This is predominately seen at the high school level where alcohol use has increased; whereas, middle school students' use of alcohol has declined in recent years. In addition, the percentage of students attending school drunk or high increased from 2002 to 2006. In Pasco, 12.4% of students reported being drunk or high at school in 2007, with rates of 6.7% and 17.1% for middle and high school students, respectively. Thirty percent of Pasco County students reported the use of Alcohol in the past 30 days compared to 29.8% of surveyed students statewide.

The findings on binge drinking are among the most important findings related to alcohol use (Johnston, O'Malley, Bachman & Schulenberg, 2006). In Pasco County, 20.3% of surveyed students reported binge drinking, with corresponding rates of 8.2% among middle school students and 29.4% among high school students. While the middle school rate is similar when compared to the state rate (8.4 %), Pasco County high school students reported a higher rate compared to results from across Florida (23 %). Although the percentage of lifetime use of illicit drugs and alcohol is high, it is lower in comparison to state and national levels. The risk of having alcohol-related health conditions, such as chronic liver disease, is twice as likely for Pasco County adolescents as those in surrounding counties. According to the Alliance for Substance Abuse Prevention (ASAP) in Pasco County, "there is a dire need to change the mindset in Pasco County's community that it is "OK" for youth to drink alcohol." More education is needed to identify signs and symptoms of alcohol use, particularly before it becomes abuse.

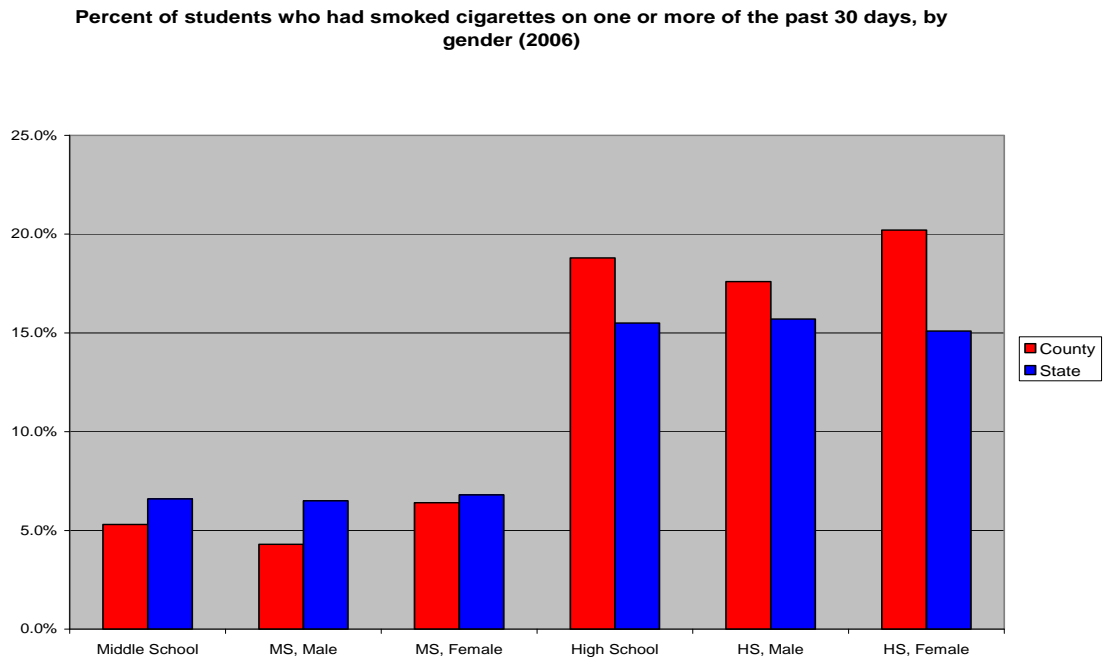
The FYSAS also surveyed students about drug use. Findings show that marijuana use has declined in Pasco County from the last time the survey was done in 2000. Lifetime marijuana use has decreased from 29.5% in 2000 to 23.5% in 2008. Yet, the overall use of marijuana is concentrated in high schools. The use of marijuana among both high school and middle school students in the past thirty-day rate remains higher in Pasco than in Florida. Approximately 19% of Pasco County students reported using marijuana or hashish in the last 30 days compared to 11.1% of students in the State of Florida.

Inhalants are typically used more by middle school students due to their availability and low-cost. Of the Pasco County students surveyed, 10.4% have used inhalants on at least one occasion in their lifetimes (11.3% middle school; 9.8% high school). However, overall past thirty-day inhalant use decreased 1.0% between 2000 and 2008. Ecstasy, GHB, ketamine, and Rohypnol are some of the club drugs that were referred to in the survey. Club drugs are classified together because of how they got their start in clubs and "raves." Lifetime club drug use among middle school students is at 2.3%; which is

similar to the state level. Rates for high school student use were below 2.0% for lifetime and past thirty-day use.

Adolescents who abuse Over The Counter (OTC) drugs often do so because of peer pressure, availability, cost, and /or the appearance of safety when compared to illicit drugs. In Pasco County, 3.8% of middle school students abused OTCs. A national study performed by the Partnership for a Drug-Free American and Met Life revealed that 45% of teens believe that abusing large amounts of cough medicine to get high is risky. Lifetime prevalence rates for the abuse of prescription drug are higher in Pasco County than in the state of Florida. Approximately 11% of Pasco County students reported using prescription pain relievers compared to 8% of Florida students. Similarly, 8.4% of Pasco County students reported using depressants versus 6% of Florida students. Other illicit drugs such as Lysergic Acid Diethylamide (LSD) or Phencyclidine (PCP), hallucinogenic mushrooms, cocaine, crack cocaine, methamphetamine, heroin and steroids are not as prevalent amongst the Pasco County adolescent community.

According to the School-aged Child and Adolescent Profile for Pasco County (CHARTS), 18.1% of high school students and 5.9% of middle school students in 2008 reported smoking cigarettes in the past 30 days. This is higher than the state percentage. The chart below (Figure 34) from the 2008 Florida Tobacco Prevention and Control County Data Profile: Pasco December 2008, shows the dramatic difference between the percentage of middle school smokers and high school smokers.



**Figure 34. Students and Cigarettes use.**

Pasco County middle and high school students have approximately the same exposure to a variety of tobacco use prevention programs as compared with the state. However, Pasco County youth are more likely to receive a tobacco-related violation. Figure 35

specifies the quantity of students in Pasco and Florida that have been exposed to some sort of Tobacco Prevention education, which may in turn, determine best practices in tobacco cessation and prevention among its residents.

Furthermore, high school students in Pasco County have a higher level of exposure to secondhand smoke (73.7%) than their middle school counterparts (59.6%). According to the Florida Tobacco Prevention and Control County Data Profile (2008), 36% of public schools in the Pasco are designated Tobacco free campuses. Smoke free policies have also been implemented in all Hospital grounds of Pasco; however, city and county parks are not legally designated tobacco-free.

Exposure in High and Middle School	Pasco County	State of Florida
<b>Exposure to any tobacco use prevention education (2006)</b>		
Middle School	72.5%	71.3%
High School	52.6%	53.3%
<b>Exposure to comprehensive tobacco use prevention education (2006)</b>		
Middle school	12.4%	16.7%
High School	7.0%	8.8%
<b>Existence of product placement ordinance (2007)</b>	Yes	N/A
<b>Tobacco-related violations per 1,000 students (2007)</b>	5.24	2.07

**Figure 35. Exposure to Tobacco Prevention in Florida and Pasco.**

Tobacco citations are given to students that are caught with possession of tobacco products. These students need to attend a \$10.00 2 hour-citation class provided by the Pasco County Health Department and pay a \$25.00 fine to the Clerk of Court. For the 2008-2009 fiscal year 147 tobacco citations were issued (78% males and 22% females).

Teen pregnancies have decreased over the past two decades, nationally. In Pasco County, only 8% of the adolescent public school population is served for family planning and sexually transmitted disease services in the Health Department clinics. Florida CHARTS reports that the rate of births to teenage mothers (ages 15-19) from 2006-2008 is 43.0 per 100,000 people compared to the state rate of 42.5. The rate for repeat births to teenage mothers for the 2006 to 2008 is 17.3%; lower than the state's rate of 18.3%.

There is a lack of responsible sexual health practice awareness among the teenage high-risk population. New Edge on Needs (NEON) is a Teen Pregnancy Prevention program that provides knowledge about the consequences of sex and confidential locations for health care and contraceptives. Students enrolled in the Pasco County Health Department's NEON program completed surveys between 2000-01 and 2003-04. Seventy one percent of the students encountered through NEON say they are sexually active. Students say they have sex for pleasure, to help them fit in better so people will like them, to feel older and to be happier. Unfortunately, once they start having sex they do not know how to stop. The majority of the students said they get their information

about sexuality from a variety of places such as parents, school, friends and media, including pornography. The balances of these sources focus heavily on romance and pleasure and there is not enough factual information about the consequences. According to Senior Health Educator and NEON Program Manager Susan Shai, “NEON also directs students to identify their dreams and plans for the future. If they have a desire to achieve or accomplish a goal in their life they are more likely to avoid risky behaviors.”

The spread of sexually transmitted diseases (STDs) in Pasco County can be seen through the lens of Florida statistics. In Florida, AIDS-related illnesses are the ninth leading cause of death among teens. Florida teenagers account for 31% of all newly acquired cases of sexually transmitted infections (STIs). According to Healthy Teens Florida, the state has the 2nd highest AIDS case rate in the country and the 6th highest syphilis rate of any state. There were an average of 251 bacterial STDs cases reported in Pasco in adolescents between 15-19 years old giving a rate of 987.5 per 100,000 adolescents. In Florida the rate of reported cases for bacterial STDs is significantly higher with 2,231.4 per 100,000 adolescents. In 2005, 12% of female high school students in Florida reported having had four or more lifetime sexual partners. In 2006, Florida had 121,791 reported cases of STIs, not including HIV/AIDS. For the 2006-2008 period there were a total of 85,543 cases of Gonorrhea, Chlamydia, and infectious syphilis in Florida and 811 of those cases were in Pasco County.

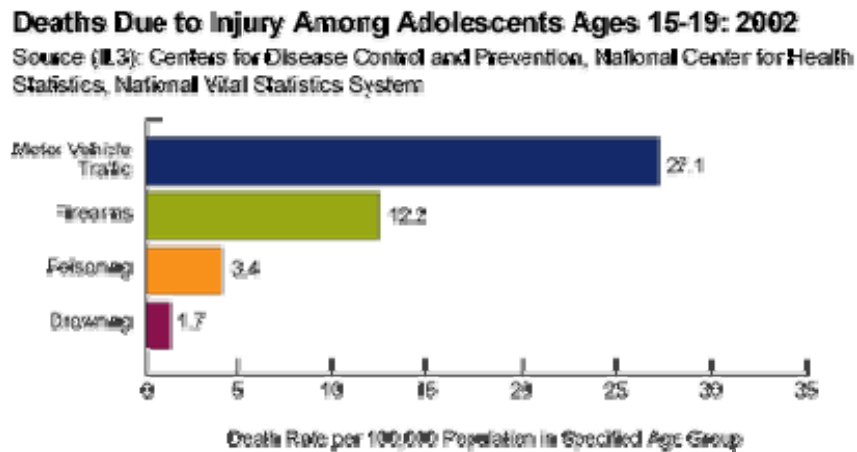
The number of identified STD cases in Pasco County is growing at an alarming rate. In 2008, the Pasco County Epidemiology Department reported there were 267 cases of Syphilis, Gonorrhea and Chlamydia among adolescents ages 15-19 years old in Pasco County; a 35 % increase from 2004. The most commonly reported STD was Chlamydia, which showed a 36 % increase. Gonorrhea increased by 31%. In the same five year span (2004-2008) the reported male cases increased by 129% and female cases increased by 27 %. Male cases of gonorrhea increased by 75% while female cases increased by 17%.

Pasco County Epidemiology Department reported in 2005 that 40% (180 cases) of their positive Chlamydia cases were in teens, 10% of those being males. Similarly in 2008 there were 208 reported cases in 15-19 year olds; 15% of those being males. Additionally in 2005 approximately 16% of the reported gonorrhea cases were in teens with 16% of those cases being males. In 2008, there were 37 reported cases of gonorrhea in teens with 32% of them male. Pasco County saw a slight decrease in Chlamydia cases in teens to 37% in 2006 and an increase in gonorrhea to 19%.

The number of STD cases among Pasco County adolescents may be preventable through the use of prevention education programs. There are no identified state standards for teaching sex education within the public school system and few schools incorporate STD prevention into their health education programs. However, Pasco County Health Department has provided STD prevention to county youth. For more than ten years, local clinics (i.e. Main Street Teen Clinic) have provided teenagers with free and confidential annuals, STD health screenings, and health education on teen issues such as abstinence, STD prevention and sexual coercion. PCHD's Epidemiology Center offers anonymous

HIV testing, communicable disease prevention and STD/HIV/AIDS prevention. They also offer AIDS/HIV information and education. West Pasco also has a center that offers AIDS patient care and case management.

Overwhelmingly, the leading cause of death among adolescents ages 15-19 (as of 2002) remains Unintentional Injury (CDC, National Center for Health Statistics, National Vital Statistics System). The death rate is 35.0 per 100,000 adolescents in the specified age group. The following graph (Figure 36) further explains the breakdown of national unintentional injuries however, in Pasco County the numbers are worse. In 2008, 12 out of 25 deaths were related to unintentional injury.



**Figure 36. Death Due to Unintentional Injuries.**

The second leading cause of death among adolescents (15-19) is homicide at a rate of 9.3 deaths per 100,000. Suicide, cancer, and heart disease round out the top five at rates of 7.4, 3.5 and 2.0, respectively.

According to the Pasco County Juvenile Justice Council 2007-2010, 19 % of Pasco children experience at least one of nine identified risk factors that “influence family fragility and children’s prospects for future success.” Youth from single parent families experience an increased risk for poor behavioral outcomes. The chart below (Figure 37) shows the overall increase in the percent of births to unwed mothers over a 5-year span.

<b>Births to Unwed Mothers among 15-19 years old</b>			
<b>Year Periods</b>	<b>04-06</b>	<b>05-07</b>	<b>06-08</b>
<b>Average number of births to unwed mothers 15-19</b>	409	451	458
<b>Average number of total births 15-19</b>	482	521	533
<b>Percent Rate</b>	84.8	86.6	86.0

**Figure 37. Pasco County percent of Births to Unwed Mothers 15-19 years old.**

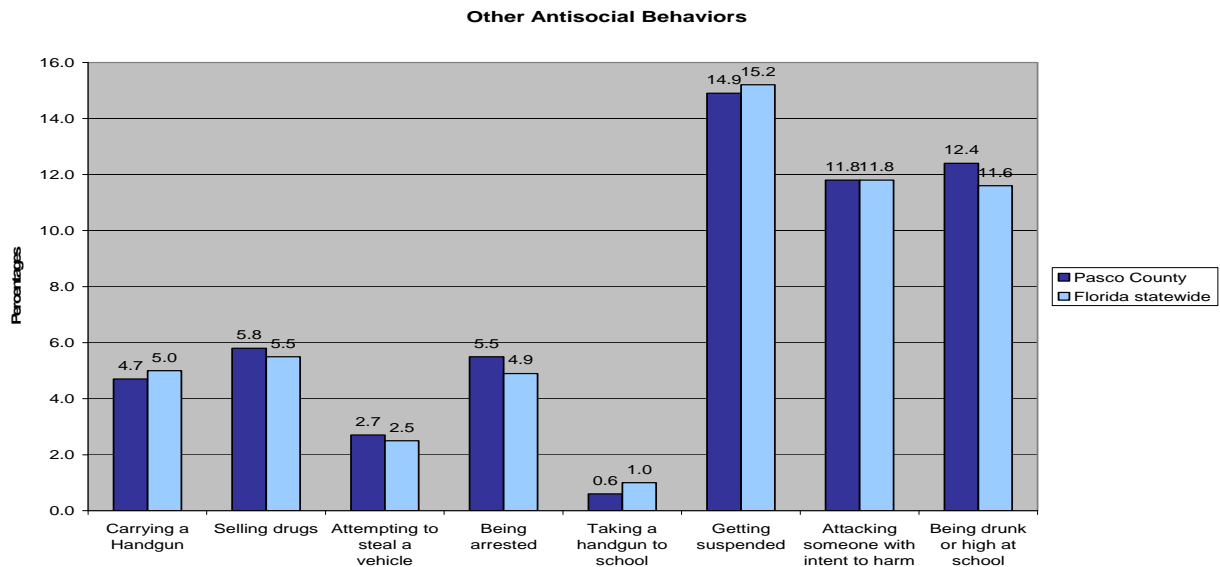
Adolescents with a parent or sibling involved in the correctional or juvenile justice system is another risk facing Pasco County youth. Dressel and Barnhill (1991) conducted a study that estimated that children with incarcerated parents are six times more likely to become incarcerated themselves. The Department of Corrections reports



there are 742 children living in Pasco County with a state or federal incarcerated parent.

Diagnosable mental disorders are an unfortunate reality for Pasco County adolescents. The American Association of Suicidology reports that suicide rates among youth (ages 15-24) have increased more than 200% in the last fifty years. Sadly, less than 25% of all individuals with depression receive adequate treatment. In 2005, Florida ranked 3<sup>rd</sup> in the United States for the number of suicide fatalities. The 2006 suicide rate was nearly double the homicide rate. Suicide rates have steadily increased in Pasco from 2004 to 2008. According to Florida CHARTS, the 2006-2008 Pasco County rate of suicide deaths ages 12-18 per 100,000 people was 3.6%. In response, the Multi-Agency Coordinating Council (MACC) has formed a collaborative called *Pasco Aware* to develop and implement suicide prevention initiatives and to raise awareness of suicide.

The Positive Achievement Change Tool (PACT) data as of June 2007 reveals that 17% of Pasco County youth in the juvenile justice system are afflicted with a mental health problem. This is 5% higher than the state percentage. While the county has developed programs to combat mental illness, there are approximately 18 to 25 youth awaiting placement for a special needs commitment bed, at any given time. These children must also wait 60-90 days for placement. The following chart shows the antisocial behaviors seen in Pasco County children compared to those seen in the state. (Figure 38)



**Figure 38. Antisocial Behaviors seen in Pasco County Youth Residents- 2008 Florida Youth Substance Abuse Survey.**

Florida law requires a person to be 21 years old to purchase a handgun. With 4.7% of Pasco County adolescents carrying handguns, more research needs to be done concerning how they are obtaining these weapons. This statistic is even more alarming when coupled with the high percentage of students attacking others with intent to harm.

The following risk factor prevalence rates are included to show the county's adolescent



population's opinions in reference to risk factors. Four domains are further categorized and individualized by level of education. (Figure 39)

<b>Domain</b>	<b>Risk Factor</b>	<b>Middle School</b>	<b>High School</b>
<b><u>Community Domain</u></b>	<b>Low neighborhood attachment</b>	<b>0</b>	<b>52</b>
	<b>Community disorganization</b>	<b>50</b>	<b>55</b>
	<b>Transitions and mobility</b>	<b>66</b>	<b>65</b>
	<b>Laws and norms favorable to drug use</b>	<b>46</b>	<b>43</b>
	<b>Laws and norms favorable to handguns</b>	<b>0</b>	<b>22</b>
	<b>Perceived availability of drugs</b>	<b>49</b>	<b>47</b>
	<b>Perceived availability of handguns</b>	<b>24</b>	<b>40</b>
<b><u>Family Domain</u></b>	<b>Poor family management</b>	<b>45</b>	<b>48</b>
	<b>Family conflict</b>	<b>44</b>	<b>39</b>
	<b>Family history of antisocial behavior</b>	<b>0</b>	<b>49</b>
	<b>Parental attitudes favorable toward ATOD use</b>	<b>22</b>	<b>41</b>
	<b>Parental attitudes favorable toward antisocial behavior</b>	<b>0</b>	<b>51</b>
<b><u>School Domain</u></b>	<b>Poor academic performance</b>	<b>44</b>	<b>44</b>
	<b>Lack of commitment to school</b>	<b>47</b>	<b>50</b>
<b><u>Peer and Individual Domain</u></b>	<b>Rebelliousness</b>	<b>0</b>	<b>41</b>
	<b>Friends' delinquent behavior</b>	<b>0</b>	<b>44</b>
	<b>Friends' use of drugs</b>	<b>0</b>	<b>44</b>
	<b>Peer rewards for antisocial behavior</b>	<b>38</b>	<b>46</b>
	<b>Favorable attitudes toward antisocial behavior</b>	<b>46</b>	<b>50</b>
	<b>Favorable attitudes toward ATOD use</b>	<b>37</b>	<b>42</b>
	<b>Low perceived risks of drug use</b>	<b>39</b>	<b>45</b>
	<b>Early initiation of drug use</b>	<b>36</b>	<b>37</b>
	<b>Sensation seeking</b>	<b>0</b>	<b>50</b>

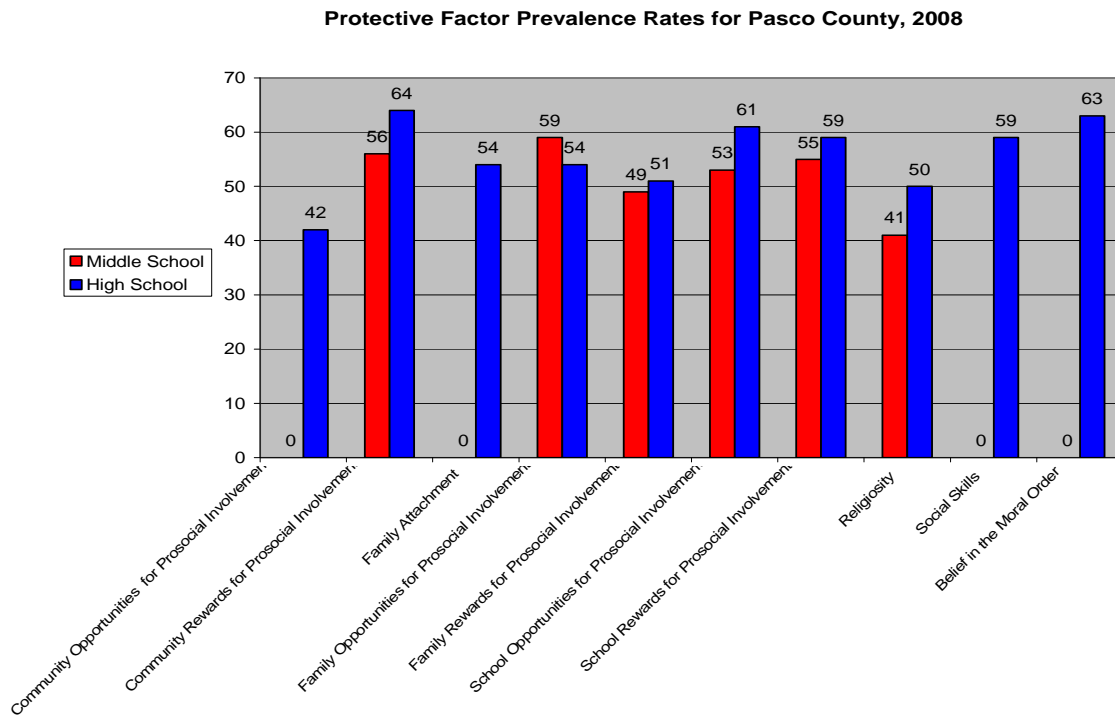
**Figure 39. Adolescent Population's Opinions in reference to Risk Factors. 2008 Florida Youth Substance Abuse Survey.**

Within the Community Domain, both middle and high school students in Pasco County reported the highest level of risk for the Transitions and Mobility scale. High scores on this scale indicate that students are changing homes and schools more frequently, making it difficult to form friendships and join prosocial organizations. Within the Family Domain, students with high scores in Poor Family Management live in families where child supervision is a lower priority. Likewise, high scores on the Parental Attitudes Favorable toward Antisocial Behavior scale indicate that parents are less likely to voice opposition to their children's involvement in crime and violence. This could lead to more problems with juvenile delinquency. Within the School Domain, scores near the 50<sup>th</sup> percentile denote a 50% risk of having negative feelings about school, and a feeling that schoolwork is less meaningful or important to the future. Within the Peer and Individual Domain, high scores on the Favorable Attitudes toward Antisocial Behavior scale

indicate that fewer students express disapproval for fighting, skipping school and other forms of antisocial behavior. High school students are more at risk for sensation seeking behaviors, which could lead to a higher level of drug use and unintentional injury. (Figure 39)

While it is important to know what risky behaviors are prevalent among Pasco County adolescents, it is just as important to know what type of protective factors are present to keep them from engaging in these behaviors. Protective factors help to buffer youth from exposure to risk by either reducing the impact of the risk or changing the way adolescents respond to risks.

In all but one area, Pasco County high school students rated their protective factors higher than middle school students. Higher scores signify a higher level of protection in designated areas. This may be due to the availability of more programs in high schools and the maturity of high school students as compared to middle school students. (Figure 40)



**Figure 40. 2008 Protective Factors in Pasco County.**

Bullying has become more prevalent in the United States in the wake of Columbine and other school shootings. The 2008 FYSAS surveyed bullying-related behaviors among Pasco County middle school students and found that 43.0% of the students were taunted or teased in the past 30 days. Approximately 33% of the students reported that bullying causes them to be “somewhat” or “a whole lot” worried or fearful. This is slightly higher than the state percentage (30.1%). Roughly 21% reported being physically bullied, 43.0% verbally bullied and 9.0% cyber bullied in the past 30 days. On the other hand, 14.3%, 24.7% and 6.5% bullied *others*, physically, verbally and through cyberspace,

respectively.

## **MEN'S HEALTH**

According to the CDC presently, men die nearly six years earlier than women. This was not always the case. In the 1920's the lifespan for men and women was virtually the same. Today, according to the CDC, men have higher death rates than women for each of the 10 leading causes of death; heart disease, cancer, injuries, stroke, Chronic Obstructive Pulmonary Disease (COPD), diabetes, pneumonia/flu, Human Immunodeficiency Virus (HIV) infection, suicide, and homicide.

Men are also less likely than women to visit a doctor when experiencing an unusual symptom, get regular check-ups, have medical insurance, or lead a healthy lifestyle. The following chart (Figure 41) shows the marked difference that exists in the cases and rates of death among Men and Women. The causes of death that Men outrank women in are heart disease, cancer, injuries, stroke, HIV/ Acquired Immune Deficiency syndrome (AIDS) and suicide. Potential reasons are explained beneath the chart.

<b><u>Causes and Rates of Death Among Men and Women 2008</u></b>				
<b>Cause</b>	<b>Men</b>		<b>Women</b>	
Heart Disease	722	13%	610	11%
Cancer	744	13%	568	10.3%
Injuries	304	5.5%	172	3.1%
Stroke	94	1.7%	135	2.4%
HIV/AIDS	11	0.2%	1	0.01%
Suicide	67	1.2%	24	0.4%
Diabetes	99	1.8%	72	1.3%

**Figure 41. Rates of Death among Men and Women.**

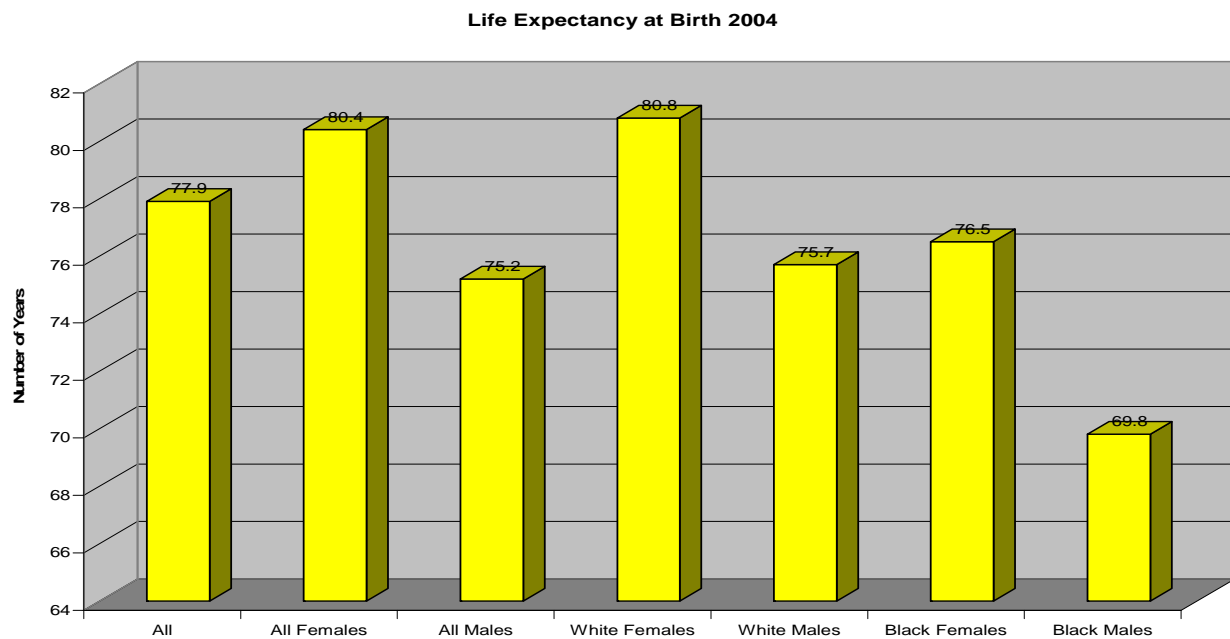
Due to a lack of awareness, poor health education, and culturally induced behavior patterns in their work and personal lives, men's health and well-being are deteriorating steadily. The difference is even more profound for African American men.

Prostate cancer is the most common cancer in American men and is the fourth leading cause of cancer deaths in men. In 2008, 52 men died from Prostate Cancer in Pasco, which was 2.5% of the total Prostate Cancer deaths in Florida. Approximately 186,000 prostate cancer cases will be diagnosed each year, according to the American Cancer Society. More than 50% of men over the age of 60 have symptoms of an enlarged prostate, also known as Benign Prostatic Hyperplasia (BPH). BPH is a non-cancerous condition that is associated with aging. Symptoms include frequent urination, weak urine flow, and interrupted sleep.

Depression is also a prevalent men's health issue. According to the National Institutes of

Health, an estimated six million men in the United States are diagnosed with a depressive disorder or bi-polar disorder every year. Lack of coping mechanisms further contributes to the severity of mental health issues. Men are often disinclined to admit that something is bothering them. They also do not realize that some physical symptoms experienced such as chronic pain and digestive problems, could actually be caused by mental health issues such as depression, anxiety, or stress.

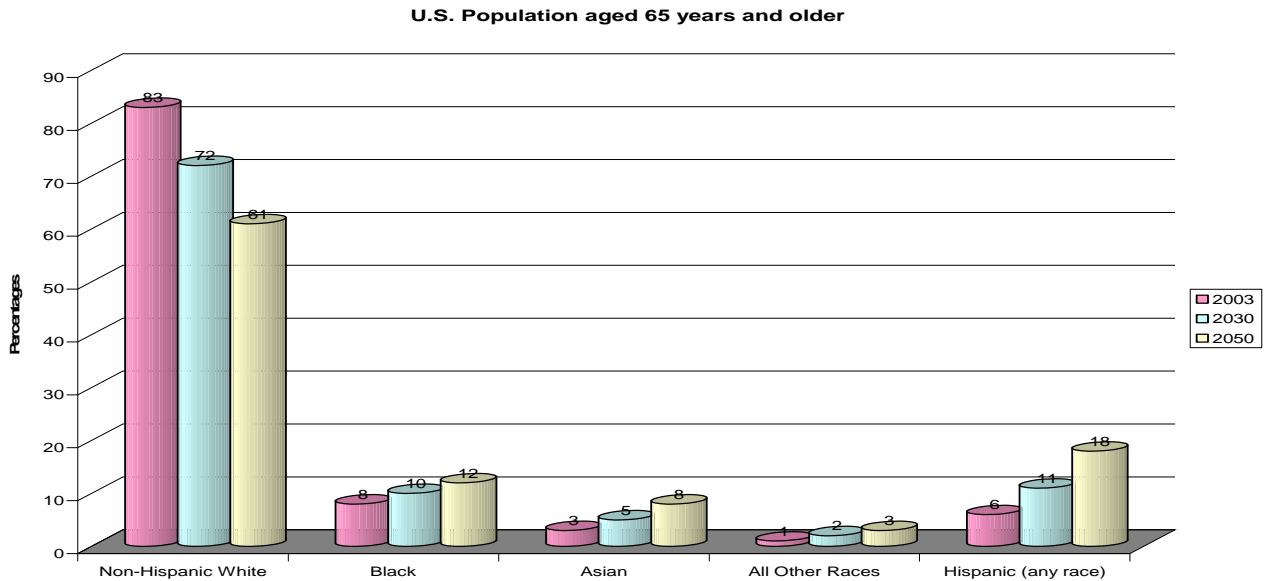
According to the Florida Department of Health, the Men's Health Initiative was created to increase awareness about men's health issues and to educate men and their families about the importance of screening and early detection to prevent and treat disease among men and boys. The Men's Health Initiative also provides an opportunity to educate men and boys about the importance of maintaining a healthy lifestyle in reducing premature deaths from disease and injury. The following graph (Figure 42) shows the life expectancy at birth (2004) from the Men's Health Network.



**Figure 42. Life Expectancy at Birth.**

## ELDERLY

As the United States minority population grows, so will the minority elderly population. The following chart (Figure 43) is a prediction by the U.S. Census Bureau (2004) as to how the elderly population will change over the next forty years.

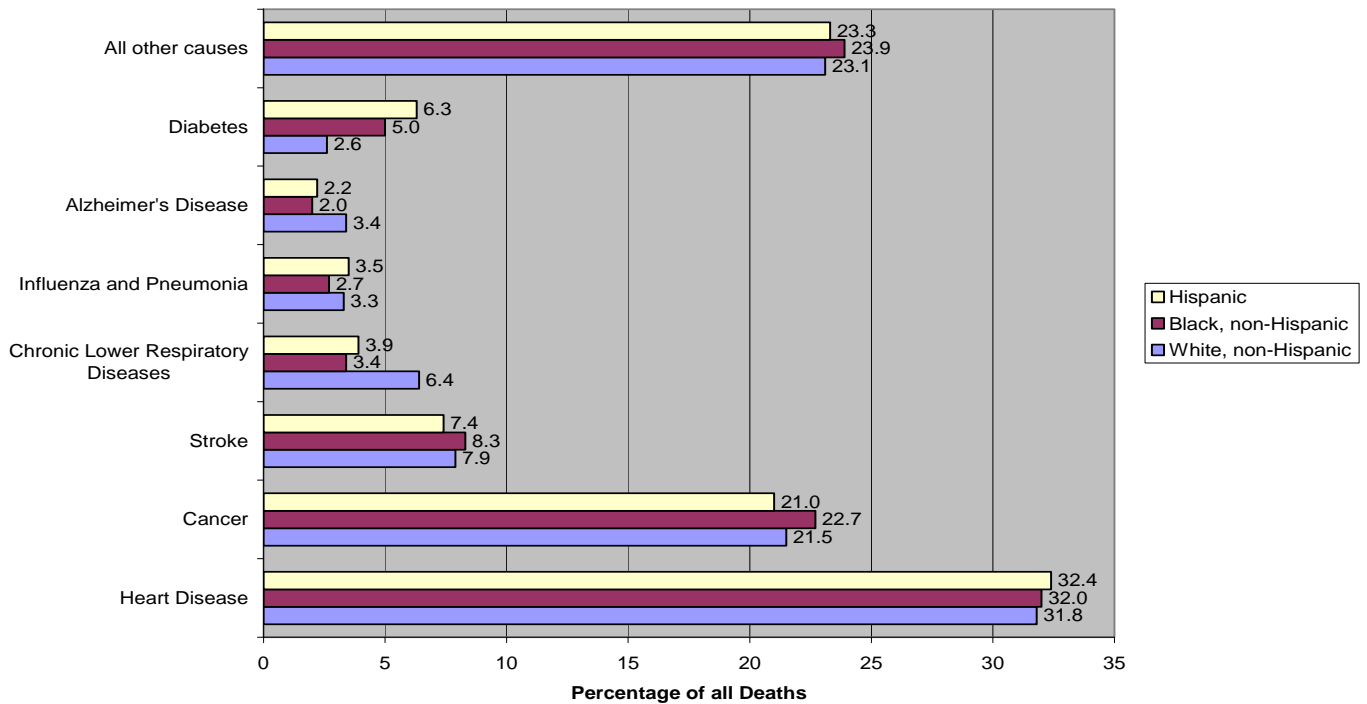


**Figure 43. Population Change Prediction.**

According to the U.S. Census Bureau, an increase in Elderly minority group populations will be seen by 2030. Elderly population of Black, Asian, and Hispanic decent are predicted to increase, with Hispanics having the greatest increase in population.

Similarly, elderly minorities are more at risk for specific health problems than their non-minority counterparts. In 2002, the CDC reported the top three causes of death for U.S. adults aged 65 or older were heart disease (32.4% in Hispanics), cancer (22.7% in Blacks) and stroke (8.3% in Blacks). Combined, these accounted for 63.4% of all deaths in this age group. (Figure 44)

**Chronic Disease Deaths Among Elderly (CDC)**  
**Extracted from the State of Aging and Health in America 2007 Report**



**Figure 44. Chronic Disease Deaths among Elderly.**

Twenty percent of people over 65 in the United States have diabetes. Heart disease remains the leading cause of death, followed by cancer. Anemia is common among the elderly and is most commonly caused by chronic disease and iron deficiency. According to the American Academy of Family Physicians, the prevalence of anemia in the elderly has been found to range from 8% to 44 %, with the highest prevalence in men 85 years and older. The increased incidence of anemia with aging has led to speculation that lower hemoglobin levels may be a normal consequence of aging. However, there are at least two reasons for considering anemia in the elderly as a sign of disease. First, most older people maintain a normal red cell count, hemoglobin and hematocrit. Second, in most elderly patients an underlying cause of anemia is found for hemoglobin levels of less than 12 g /dL.

For thirty years, the Elderly Nutrition program (ENP) has been providing incentives to states for the effective delivery of nutritious meals to older adults. The program has been the main source of nutrition for over 2,200 seniors and other qualified participants throughout Pasco County. ENP supports individuals who are sixty and older with prepared meals to meet a nutritional analysis of 1/3 of the Recommended Daily Allowance (RDA). There are nine congregate dining centers throughout the County. Meals On Wheels is a supplemental program that delivers meals to participants' homes that do not have access to a dining center or are limited physically. Nutrition education and counseling is also provided to individuals upon request. Salvation Army elderly programs are increasingly important as the 55-plus age group continues to be the fastest

growing group in the country. These programs help older adults share interests and enjoy companionship. They provide educational classes, day care, and hot lunches.

A driver evaluation for seniors is available through Bayfront Medical Center. An occupational therapist determines if individuals are safe on the road and if adaptive equipment can be used to allow them to return to driving. It is a two part evaluation: Part one is a clinical assessment of eye-hand-foot coordination, reaction time, visual scanning ability, and other cognitive and motor functions. The second part is a road test that evaluates driver safety and is only used if the individual passes part one.

Hurricane season can produce anxiety in seniors, especially those who are immobile. The Pasco County Office of Emergency Management provides a special needs shelter as a temporary emergency facility capable of providing care to residents whose medical condition is such that it exceeds the capabilities of the Red Cross Shelter but is not severe enough to require hospitalization. Health Department nurses support these shelters.

The Area Agency on Aging of Pasco-Pinellas, Inc. (AAAPP) is a 501(c) (3) private, non-profit agency serving seniors and their caregivers in Pasco and Pinellas counties. Since 1974, the agency focuses on funding, advocacy, services and programs for seniors in the two counties.

According to AAAPP the number of minority residents of Pasco has doubled in the past 5 years. Approximately 8% of the 60 years of age and older population in Pasco are low income and 1,644 of these individuals represent a minority group. Around 7% of the total elderly population are non-white and are primarily located in East Pasco, especially Dade City, Trilby and Lacooshee. An estimated 133,840 people age 60 and older (2010 area plan update) are currently residing in Pasco County. Pasco's residents aged 60 years or older represent 30% of the county. This number greatly exceeds the statewide average of 23.1%. The residents of Pasco that are 85 years of age and older represent 3.7% of the total population and 12.3% of the 60 years of age and older population. (Figure 45)

<b>Characteristics of 60+ Population -2009</b>								
<b>Service Area</b>	<b>Total Population</b>	<b>Total 60+</b>	<b>60+ % of Total</b>	<b>Total 75+</b>	<b>Total 85+</b>	<b>Low Income 60+</b>	<b>Rural 60+</b>	<b>60+ Living Alone</b>
<b>Pasco</b>	446,273	133,840	30%	55,177	16,480	10,925	11,351	31,424

**Figure 45. Characteristics of the Pasco County Population 60 years and older.**

Considering 30% of the County's population is 60 years of age and older, coupled with the fact that 13% of these individuals fall within the near low income or low income scale (Figure 46) services targeting this age group are of great importance.

<b>Characteristics of 60+ Low Income Population in Pasco County</b>		
	<b>Total number</b>	<b>Percentage</b>
Total Population 60+	133,840	30%



Low Income Level Aged 60+	10,925	8.2%
Near Low Income Level Aged 60+	16,909	12.6%
Low Income Minority Aged 60+	1,644	1.2%
Near Low Income Minority Aged 60+	2,320	1.7%

**Figure 46. Low Income population of Pasco County 60 years and older.**

The largest minority group among residents that are 60 years and older is Hispanics. Hispanics account for 4.2% of the total elderly population followed by blacks which makes up a 1.8%. A small percentage (0.2%) does not speak English. (Figure 47)

<b>Characteristics of Minority Elderly Population</b>		
	<b>Total Number</b>	<b>Percentage</b>
Total Population 60+	133,840	30%
Hispanic Aged 60+	5,559	4.2%
Black Aged 60+	2,346	1.8%
Other Minorities 60+	1,611	1.2%
Total Minorities 60+	9,246	6.9%
Non English Speaking Persons 60+	220	0.2%

**Figure 47. Characteristics of Minority Elderly Population in Pasco County.**

The AAAPP has been designated to serve as one of three Aging and Disability Resource Centers in Florida as of August 1, 2005. This initiative, funded by the U.S. Department of Health and Human Services, is designed to improve entry into the long term care system and make long term care responsibilities more efficient.

SHINE (Serving the Health Insurance Needs of Elders) is a free, volunteer-based health insurance counseling program administered by the Florida Department of Elder Affairs, Office of Volunteer and Community Services. SHINE is also an award winning program geared toward helping elders navigate through the complicated health insurance system. Volunteer counselors offer expertise on Medicare, Medicaid, Prescription Assistance, and Long-Term Care Planning & Insurance. The volunteers focus on beneficiary rights and consumer protection, and also educate and empower elders so they can make informed decisions. Currently there are over 1,000 volunteers in 55 Florida counties.

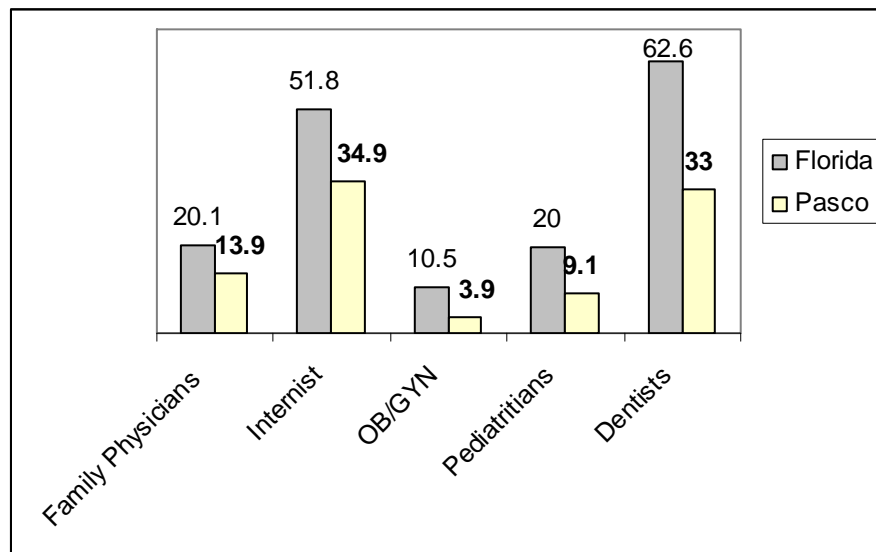
The Office of the Attorney General has awarded the Area Agency on Aging a grant to serve elderly victims of crime residing in Pinellas and Pasco Counties. This program provides specialized services to victimized seniors when they are not receiving services from any other victim assistance program. Those helped by this program may be victims of domestic violence, elder abuse, burglary, assault and battery, financial exploitation, fraud or economic crime. Access to the services of this program is provided through the Senior Helpline. Crisis and supportive counseling, court room orientation, court escort services, and transportation related to the case are also available. Additionally, assistance is offered by the Senior Victim Advocate Program with completion of impact statements, restitution requests, victim compensation application, emergency legal advocacy, and other services to provide for a safe environment.

There are approximately forty Assisted Living Facilities (ALFs) located in Pasco County. Assisted Living of Pasco Inc. provides assistance with Activities of Daily Living (ADLs) to those who qualify. The goal is to promote as much independence as possible. Assisted Living of Pasco provides services including adult day care, Alzheimer’s care, housekeeping, laundry, meals, bathing and dressing assistance, transportation and many recreational amenities.

**HEALTH CARE RESOURCES AND HEALTH CARE UTILIZATION**

**MEDICAL PROVIDERS**

Compared to the State, Pasco County has fewer health care providers per 100,000 residents, with rates of 298.6 and 153.3, respectively. The largest disparity in providers exists among licensed dentists, which may explain why the number of residents who visited a dentist in the past year was 4% lower than the state average. Internists comprise the greatest percentage of physicians in the county, while obstetricians/gynecologists (OB/GYNs) are the most underrepresented medical group. In fact, there are only 3.2 obstetricians/gynecologists per 100,000 people in Pasco County compared to 9.9 in the state. The need for greater OB/GYN support in Pasco may explain the large number of residents born in neighboring counties. According to the Office of Vital Statistics of the Florida Department of Health there were a total of 5,266 live births to Pasco County residents in for the year 2008. Of the total births of Pasco County residents, 3,703 (70.3%) were delivered in bordering counties. In addition, nearly 80% of prenatal services and health care providers for Pasco County women are located outside county lines (Figure 48).

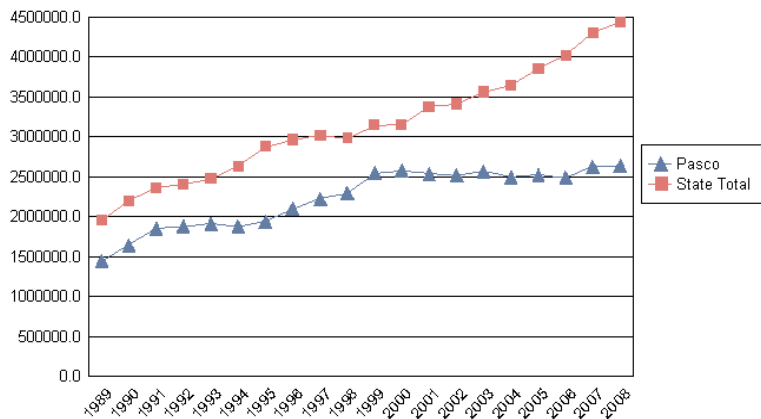


**Figure 48. Health Providers per 100,000 (2008).**

Although 79% of adults in Pasco County have a personal doctor, only 72% had a medical checkup in 2008 (roughly 60% of males and 80% of females). Access to healthcare is

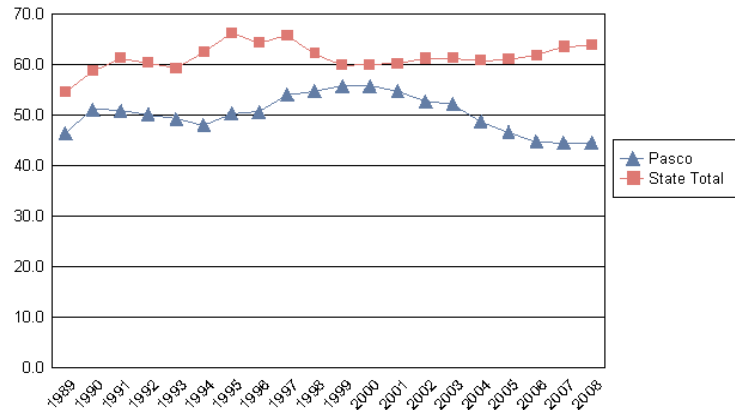
limited in Pasco County due to the cost of health related services. Almost 18% of the adult population could not afford to go to their doctor in the past year due to associated fees. According to the Pasco Primary Care Access Network, there are an estimated 72,000 uninsured and another 20,000 underinsured residents. Despite the fact that 81% of Pasco County residents have some sort of medical insurance approximately 20% of adults who could not see a doctor reported it was due to cost. This is an issue that continues to cause problems throughout the county. Currently in Pasco County 97% of patients with hypertension are taking steps to control their high blood pressure.

The PCHD Expenditure for a single year rate (2008) per 100,000 people was \$2,631,507.2 compared to the state expenditure of \$4,434,587.6 (Figure 49). Neighboring counties had higher expenditures per 100,000 population compared to Pasco County. Hernando County's expenditure in 2008 was \$4,860,309.8 and Hillsborough County's expenditure in 2008 was \$3,783,061.0.



**Figure 49. Pasco County Public Health Department Expenditure per 100,000 population (2008).**

The Pasco County Health Department is in the lowest quartile with only 44.5 full-time employees per 100,000 compared to the state's 63.8 full time employees per 100,000 in 2008 (Figure 50). Full-time employee numbers can vary county by county. For instance, in 2008, Hernando County had 82.4 full time employees per 100,000, while Hillsborough County had 41 full time employees per 100,000 population.



**Figure 50. County Public Health Department Employees per 100,000 population (2008).**

To determine if the limited number of health care providers in Pasco County resulted in residents being underserved, the BFRSS asked residents about their medical care. It was reported that more individuals did not have a personal health care provider in the state (22.9%) than in Pasco County (20.5). According to “A Profile of Uninsured Floridians Findings,” from the 2004 Florida Health Insurance Study, 5.6 % of the total state residents under the age of 65 that lack health insurance reside in District 8. This district is comprised of Pasco, Hernando, and Polk County. According to the Suncoast Health Council the average medical expenditures per household in Pasco reached \$3,082.2 per year, in contrast to other Floridians’ average annual expense of \$3,526.0, for 2006.

## DIETITIANS AND NUTRITIONISTS

Dietitians and nutritionists are experts in the field of nutrition, and use evidence-based practices to improve health outcomes, thereby reducing the burden of health care costs. The Bureau of Labor Statistics in 2008 estimated 150,000 dietitians and nutritionists were employed nationwide, excluding those deemed self employed. Of these, 36% were employed in general medical and surgical hospitals, 30% in nursing care facilities, 24% in federal, state and local government, 6% in outpatient mental health/substance abuse programs, and 4% in the food service industry. With anticipated shifts in the national healthcare focus from acute to preventative care, demands on dietitians and nutritionists are anticipated to increase over the next six years, ultimately increasing the need for trained professionals. The Bureau of Labor Statistics, Industry-Occupation Matrix has projected the following increases by 2016 in these top 4 categories: services for the elderly and persons with disabilities (58%); home health care services (55%); community care facilities for the elderly (52.8%); and all other ambulatory health care services (40.5%).

In contrast, the Florida Labor Statistics in 2008, excluding those deemed self-employed, reported 2,200 (1.5%) dietitians and nutritionists statewide. Employment statistics for Pasco and Hernando counties reveal that there are currently 64 dietitians and nutritionists employed, which represents approximately 3% of Florida dietitians and nutritionists. Employment projections for this category in 2016 for Pasco and Hernando counties

reveal only a slight increase (.02%) in this number, primarily because most industries experienced job declines in the economic downturn that began in 2007. In addition, some of the occupational job growth projected in this forecast includes the recapturing of jobs lost since that time.

In the community and public health setting dietitians and nutritionists coordinate nutrition programs in federal and public health agencies, with 80% funded through the USDA's WIC Program. In addition, the Department of Health and Human Services funds another 6% of nutrition professionals working with state and local health agencies. The remaining 14% of dietitians and nutritionists working in community nutrition and public health are available to serve high risk populations such as the elderly, adults, and low-income families that do not participate in WIC, but this number falls short of need. A general rule of thumb is that there should be one community and public health nutritionist for every 500 to 800 clients deemed at-risk, who need nutrition counseling [Kaufmann, M. Nutrition in Promoting the Public's Health]. Given this ratio, Pasco County is currently underserved by dietitians and nutritionists. In order to meet the demands of those 65 and older in Pasco County, we would need a 56% increase in the number of dietitians and nutritionists.

## **ORAL HEALTH**

Seventeen of the *Healthy People 2010* objectives relate directly to oral health and a number of others reflect the connection between oral disease and other chronic illnesses such as diabetes and cancer. The U.S. Centers for Disease Control and Prevention (CDC), National Institute of Dental and Craniofacial Research (NIDCR), Indian Health Service (IHS), and the Health Resources and Services Administration (HRSA) are the leads for tracking the progress of these objectives (CDC).

The overall goal of the *Healthy People 2010* oral health objectives is to prevent and control oral and craniofacial diseases, conditions, and injuries and improve access to related services. Therefore, more emphasis should be placed on preventive care by promoting regular oral check-ups and encouraging dentists to provide educational outreach to residents.

Pasco County residents have limited access to dental providers due to the shortage of dentists in the area and associated costs for services. According to Community Health Assessment Resource Tool Set (CHARTS) for the 2007-2008 fiscal year there were 139 licensed dentists in Pasco, giving a rate of 31.9 per 100,000 residents.

According to Dr. Raymond Anel, dentist and coordinator of the Pasco County Health Department's Dental Clinic, most of his patients have not seen a dentist in 5 to 6 years. Dr. Anel believes that the lack of dental visits by residents is primarily contributed to fear rather than expenses. He acknowledges that even with insurance and regular promotions, most patients only seek services during an emergency. Dr. Anel emphasizes the importance of getting regular check-ups twice a year for good oral and overall health. He

said, “Regular preventive dentistry will pay dividends because oral health prevents chronic diseases such as heart disease and diabetes.”

Dr. Anel provides services to 16 to 20 patients every day. He treats both children and pregnant women enrolled in the Medicaid program. Currently, he is the only dentist in Pasco County that offers this service.

### **HOSPICE SITES**

For residents that are dealing with terminal illnesses, Pasco County provides Hospice care. Hernando-Pasco Hospice is a fully staffed community-based healthcare organization with well-trained professionals that provide innovative and skilled medical care for patients with life-limiting illnesses and compassionate support for their family members. It is among the country’s largest hospices serving over 1,000 patients each and every day.

### **HOSPITALS IN PASCO COUNTY**

There are five hospitals in Pasco County; Community Hospital and Morton Plant North Bay Hospital in New Port Richey, Florida Hospital Zephyrhills, Pasco Regional Medical Center in Dade City, and Regional Medical Center Bayonet Point in Hudson, which provide a total of 1,075 beds.

Pasco County remains below the state rates for number of hospital beds, acute care beds, and specialty beds per 100,000 individuals. The five hospitals in Pasco County contain 244.9 beds compared to 316.9 for the state. However, Pasco County does have more available nursing home beds (468.9 per 100,000 individuals), than the state average (Figure 51). This is likely due to the substantial elderly population within the county.

<b>Pasco County and State Health Facilities’ Capacity for Service, Rate Per 100,000</b>		
<b>Total #</b>	<b>State</b>	<b>Pasco County</b>
<b>Acute Care Beds</b>	263.3	226.5
<b>Specialty Beds</b>	53.6	18.5
<b>Nursing Home Beds</b>	437.6	468.9
<b>Hospital Beds</b>	316.9	244.9

**Figure 51. Capacity for Service- Pasco County and Florida.**

Out of the five county hospitals, Community Hospital in New Port Richey had the greatest number of hospitalizations and the longest length of stay (4.9 days) in 2007. Morton Plant North Bay Hospital had the lowest number of hospitalizations and Pasco Regional Medical Center had the shortest length of stay (3.7 days). (Figure 52)

<u>Facility / City</u>	<u>Total Hospitalizations</u>	<u>Charges Low</u>	<u>Charges High</u>	<u>Average Length of Stay</u>
<b>Statewide</b>	<b>2,502,608</b>	<b>N/A</b>	<b>N/A</b>	<b>4.7 days</b>
<b>Community Hospital</b>	14,437	\$18,050	\$55,258	4.9 days
<b>Florida Hospital Zephyrhills</b>	8,810	\$14,631	\$46,089	4.2 days
<b>Morton Plant North Bay Hospital</b>	4,761	\$13,846	\$37,553	4.3 days
<b>Pasco Regional Medical Center</b>	5,340	\$12,463	\$35,778	3.7 days
<b>Regional Medical Center –Bayonet</b>	12,620	\$23,975	\$69,445	4.7 days

**Figure 52. Hospitalizations Stays in Pasco County.**

The total number of emergency department visits in Pasco County’s hospitals was 113,045. From January 2007 to December 2007, Community Hospital had the most emergency department visits with a total of 28,056 cases and \$88,030,593 in total charges. As seen in table below, the average charge for an emergency department visit at Community Hospital was \$ 3,138. (Figure 53)

<u>Facility / City</u>	<u>Total Emergency Department Visits</u>	<u>Average Charges</u>	<u>Total Charges</u>
<b>Community Hospital</b>	28,056	\$3,138	\$88,030,593
<b>Florida Hospital Zephyrhills</b>	23,233	\$2,066	\$48,001,860
<b>Morton Plant North Bay Hospital</b>	23,559	\$1,554	\$36,611,162
<b>Pasco Regional Medical Center</b>	14,294	\$2,459	\$35,149,562
<b>Regional Medical Center</b>	23,903	\$2,443	\$58,389,011

**Figure 53. Emergency Visits and Charges in Pasco County.**

Among the facilities that provide outpatient care to residents of Pasco County, Regional Medical Center Bayonet Point handled the largest volume of patients overall in 2005. For the year 2007, Community Hospital had the largest number of hospitalizations. County residents utilize different hospitals for inpatient and outpatient services due to the major causes of mortality discussed previously.

In 2008, there were 5,303 births in Pasco County. The frequency of deliveries differed according to age and race. There were 3 deliveries to girls 14 years old or younger. The greatest number of deliveries to mothers between the ages of 25 and 29 occurred among Whites (89.5%), followed by Blacks (5.5%) and other Nonwhites (4.8%). (Figure 54)



<b>Resident Births Pasco County</b>					
<b>Mother's Age</b>	<b>White</b>	<b>Black</b>	<b>Other Non White</b>	<b>Unknown</b>	<b>All Mother's Race</b>
0-14	3	0	0	0	3
15-17	138	11	2	0	151
18-19	323	24	11	0	358
20-24	1,207	65	40	2	1,314
25-29	1,344	82	73	1	1,500
30-34	1,088	65	76	3	1,232
35-39	538	36	48	1	623
40-44	100	8	7	0	115
45 +	6	1	0	0	7
Unknown	0	0	0	0	0
All Mother's Age	4,747	292	257	7	5,303
<b>Rates</b>	89.5%	5.5%	4.8%	0.1%	

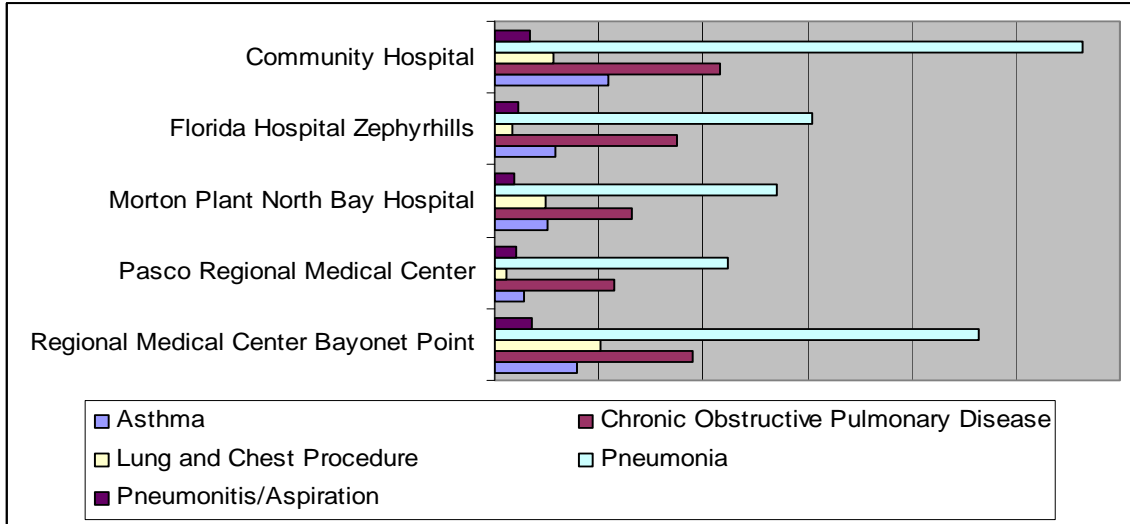
**Figure 54. 2008 Deliveries in Pasco- Race and Age.**

The hospitals in Pasco County provided different services to the residents according to their condition (Figure 55). For example, Community Hospital provided the highest number of services to patients with chest pain and heart attacks. Regional Medical Center Bayonet Point, on the other hand, had the largest number of hospitalization in the county for cardiac pacemaker implant, coronary bypass surgery and heart failure. Florida Hospital Zephyrhills had the most number of hospitalizations for patients with high blood pressure.

<b>Hospitals</b>	<b>Chest Pain</b>	<b>Cardiac Pacemaker Implant</b>	<b>Coronary Bypass Surgery</b>	<b>Heart Attack</b>	<b>Heart Failure</b>	<b>High Blood Pressure</b>
Community Hospital	312	60	0	230	405	45
Florida Hospital Zephyrhills	166	126	108	105	296	53
Morton Plant North Bay	59	26	0	204	161	18
Pasco Regional	81	27	0	44	173	35
Regional Medical Center Bayonet Point	265	160	203	212	539	34

**Figure 55. Heart Disease and Surgery Hospitalizations (2008).**

More Pasco County residents utilized Community Hospital for lung related conditions such as chronic obstructive pulmonary disease (COPH), and pneumonia than any other of the four hospitals. Regional Medical Center Bayonet Point reported more lung and chest procedures and Pneumonitis/Aspiration than any other hospital in the county. (Figure 56)



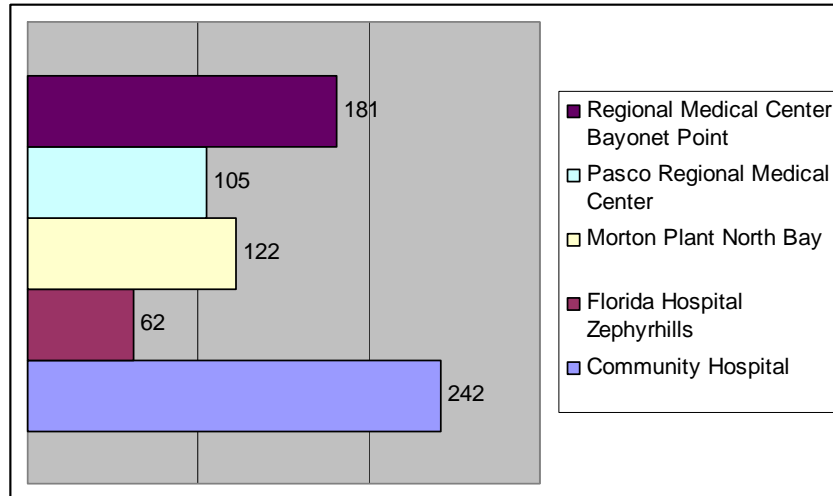
**Figure 56. Lung Related Hospitalizations.**

Community Hospital had 104 hospitalizations due to diabetes in 2008. They also had the highest number of seniors with diabetes (49) compared to the other hospitals. Sixty five patients, between 18 and 64 years old, were hospitalized in Florida Hospital for diabetes related problems which doubled the amount seen at Pasco Regional Medical Center (31). (Figure 57)

HOSPITALS	All adults	Adults 18-64	Seniors 65+
Community Hospital	104	55	49
Florida Hospital Zephyrhills	82	65	17
Morton Plant North Bay Hospital	65	49	16
Pasco Regional Medical Center	51	31	20
Regional Medical Center Bayonet Point	76	44	32

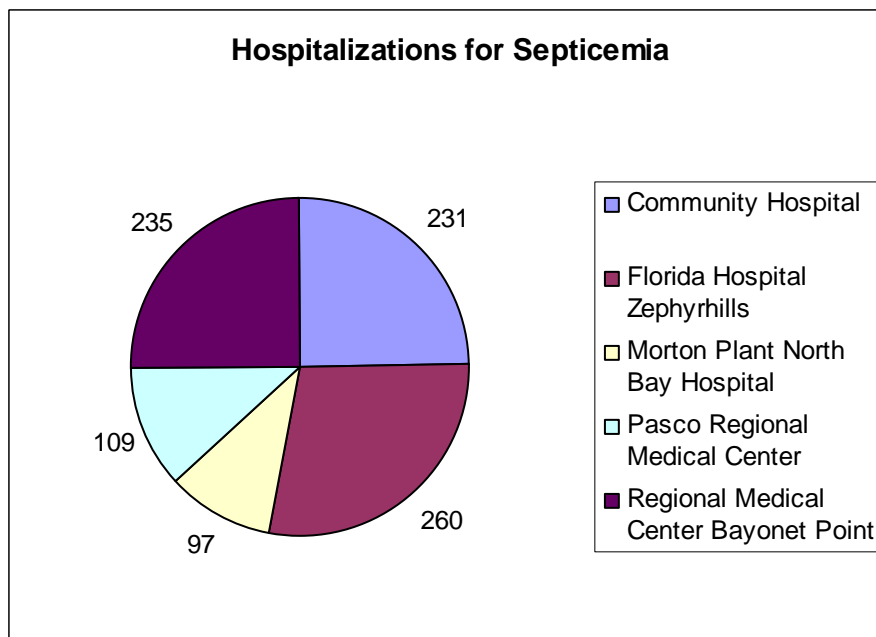
**Figure 57. Hospitalizations due to Diabetes.**

For Pasco residents there were more hospitalizations due to stroke seen at Community Hospital. This was almost four times the amount seen at Florida Hospital Zephyrhills (62). The hospital with the second largest number of hospitalizations due to stroke was Regional Medical Center Bayonet Point followed by Morton Plant North Bay, Paso Regional Medical Center and Florida Hospital Zephyrhills. (Figure 58)



**Figure 58. Hospitalizations due to Stroke.**

Septicemia was also notable for the large number of hospitalization cases in the county and statewide. From April 2007 to June 2008, Florida had 40,881 hospitalizations for septicemia (blood poisoning). In Pasco County, the largest amount of individuals hospitalized for septicemia were seen at the Florida Hospital Zephyrhills while Morton Plant North Bay witnessed the least number of hospitalizations due to septicemia with 97 cases. (Figure 59)



**Figure 59. Hospitalizations due to Septicemia.**

### EMERGENCY SHELTERS

The office of Emergency Management is responsible for registering and ensuring the needs of residents in case of an emergency. In the event of an emergency there are 25

available shelters in Pasco County. These shelters are schools located throughout the county which are available during an emergency event to residents who do not require professional assistance to perform daily activities. Special Needs Units are available to residents who do require the assistance of professionals to perform activities of daily living. The Pasco County Special Needs Assistance Population Program (SNAPP) provides two emergency shelters for residents with special needs in Pasco County. They are located on the east and west side of the county. The east side special needs shelter will be located at Wiregrass High School and the west side special needs shelter at the Mike Fasano Regional Hurricane Shelter in Hudson. Residents who have special needs must qualify for placement in a special needs shelter and apply prior to the disaster. There is only one pet friendly shelter in the county which is located at Pine View Middle School in Land O' Lakes.

The Mike Fasano Regional Hurricane Shelter in Hudson provides emergency shelter for up to 1,000 people and houses services to low income and uninsured clients. It is a 37,000 square foot facility designed to withstand wind speeds of 190 mph and debris moving at 90 mph. The Mike Fasano Regional Hurricane Shelter is the first in the Country designed with the latest standards set by the International Code Council and National Storm Shelter. Additionally, it is the nations only Federal Emergency Management Agency (FEMA) approved shelter.

## **NURSING HOMES**

Pasco County is home to a large number of retirees, and nursing home beds are available in larger numbers than the state average. In 2008, there are 437.6 nursing home beds per 100,000 individuals in the state and 468.9 per 100,000 individuals in the County. Pasco County has maintained its numbers in available nursing home beds which is currently at 2,058, while the state as a whole has steadily reduced the number of available beds over the last four years.

## **HEALTH INSURANCE**

The number of Florida residents without health insurance is on the rise due to the current economic climate. Today there are more people without health insurance due to a rise in unemployment, or reduction in income, which leaves some individuals unable to meet the out of pocket expense of health coverage. In addition workers are losing their coverage, because employers are cutting costs to survive the recession.

In Florida, 24.8 % of people under age 65 are uninsured, the second highest rate in the U.S. where the total is 17%. According to a U.S. Census Survey Florida is second only to Texas for having the lowest numbers of medically insured individuals under the age of 65 in the country. In fact, excluding seniors, one in four residents lives without any kind of health insurance. Every city and county surveyed in the Tampa Bay area had a lower rate of insured residents than the national average, with the worst rates occurring in Clearwater, Largo and Pasco County. Conversely, Brandon with the highest median income had the most extensive coverage. According to the American Community Survey

Pasco’s total percentage of uninsured for 2008 was 25.2%. The following chart shows specific uninsured rates of Florida counties and cities. (Figure 60)

County/City	Uninsured Residents
Pasco	25.2%
Hillsborough	
Tampa	21.8%
Brandon	17.9%
Pinellas	
Clearwater	28.5%
Largo	26.4%
St. Petersburg	21.6%
More cities	
Orlando	30.7%
Miami	41.5%
Jacksonville	17%
Tallahassee	14.5%

**Figure 60. Uninsured Resident Rated by Counties and Cities of Florida.**

About 16% of Floridians had no health care coverage a decade ago. Today the fact that approximately 25 % of Floridians do not have insurance is an understatement according to Freedman, the executive director of Hillsborough Kid Care Foundation. He explains that the census doesn’t consider people uninsured unless they have been without coverage for a full year. According to the Tampa Tribune, 80,350 people in Pasco County are uninsured. This number of people represents the 21.9 % of the county’s population.

According to Steven Illmann, director of programs in Health Sector Management and Policy at the University of Miami, Florida’s medical problems have compounded for years, elevating the state’s private insurance cost to some of the highest in the country. Florida is a state with an aging population, increasing medical demand and a declining supply of specialists making for a highly competitive medial marketplace. Another consequence of the lack of insurance in Florida is that the state has one of the highest Medicare reimbursement rate, according to Dartmouth Atlas of Health Care. That is a clear sign that spending on health care is higher for all ages (St. Petersburg Times).

The percentage of private sector businesses that offered health insurance to their employees in 2006 was higher by 4.4 points in the nation compared to the state of Florida (55.8% and 54.4%, respectively). In small business firms with fewer than 50 employees, the percentage of those that offer health insurance benefits was 38.9% in the state of Florida and 42.6% for the rest of the nation. Pasco County had a higher number of firms with 50 employees or more that offered health insurance to its workers 94.7 % for Florida compared to 95.6% countrywide.

A comparison of health insurance coverage for the total population of Florida and the United States is illustrated in the following chart (Figure 61). Florida employees had higher rates of insurance coverage compared to employees in the nation but the rate of

Medicaid participants was higher in the state of Florida than the national average. In fact for individual coverage, Medicare, and other public insurances in the nation had higher rates of insurance coverage than the state of Florida in 2006.

Health Insurance Provider	Florida	United States
Employer	53.4%	47.1%
Individual	4.9%	5.3%
Medicaid	13.2%	9.6%
Medicare	12.1%	16.0%
Other Public	1.1%	1.2%
Uninsured	15.3%	20.7%

**Figure 61. Health Insurance coverage for the total population 2006-07 fiscal year.**

The uninsured rates for the nonelderly by Federal Poverty Level (FPL) for the 2006-2007 fiscal year show the need for Florida to take action. In Florida there are higher rates on uninsured residents in all categories of the FPL than the nation. The specific rates can be seen in the following chart. (Figure 62)

FPL	United States	Florida
Under 100%	35.4%	46.3%
100%-199%	29%	40.3%
Low Income Rate	32.8%	43.2%
200% or more	9.1%	14.2%
Total	17.2%	24.4%

**Figure 62. The uninsured rates for the nonelderly by (FPL) for the 2006-2007 fiscal year.**

The uninsured rates for the nonelderly by gender are specified in the following chart (Figure 63). Florida residents are currently participating less in a health insurance program than the national average. In Florida more females are insured than males.

Gender	United States	Florida
Female	15.8%	22.4%
Male	18.6%	26.4%
Total	17.2%	24.4%

**Figure 63. Uninsured rates for the fiscal year 2006-2007 according to gender.**

The uninsured rates for the nonelderly by race/ethnicity demonstrate a higher tendency for Hispanics. In Florida 39% of Hispanic residents were uninsured for the 2006-2007 fiscal year. Also for the nation, Hispanics' uninsured rates were higher than any other race. (Figure 64)

Race/Ethnicity	United States	Florida
White	12.2	17.6
Black	20.9	27.3

<b>Hispanic</b>	33.5	39.0
<b>Other</b>	17.7	24.6
<b>Total</b>	17.2	24.4

**Figure 64. Uninsured rates for the fiscal year 2006-2007 according to race/ethnicity.**

**MEDICARE**

Medicare is a Federal Health Insurance Program for people who are age 65 or older, disabled persons, or with end-stage kidney disease. To be eligible for Medicare, there are certain income requirements. There has been an increase of 6.2% on the average annual percent growth in Medicare spending compared to a 6% increase in the state of Florida from 1994 to 2005. Currently there are more females enrolled in the Medicaid program than males (56.6% and 43.4%, respectively). Similarly, the percentage of enrollment varies according to race or ethnicity. More than the 70% of the participants of the program are White followed by African Americans and Hispanics. (Figure 65)

	<b>Florida</b>	<b>United States</b>
<b>RACE/ETHNICITY</b>		
White	78.4%	78.4%
Black	8.2%	10.2%
Hispanic	11.7%	7.0%
Other	1.8%	4.4%
<b>GENDER</b>		
Female	55.2%	56.6%
Male	44.8%	43.4%

**Figure 65. Medicaid enrollment rates according to Race/Ethnicity and Gender.**

According to the Federal Poverty Level (FPL) more participants in Florida are at the 200% or more FPL than the nation. The rate of enrolled participants for the county is higher for participants under 100% FPL, 100%-199%, and low income subtotal than the state of Florida. The Following Chart shows the distribution of Medicare enrollees by Federal Poverty Level for the 2006-2007 fiscal year. (Figure 66)

<b>FPL</b>	<b>FLORIDA</b>	<b>UNITED STATES</b>
<b>Under 100%</b>	16%	16.4%
<b>100%-199%</b>	27.6%	30.2%
<b>Low Income Subtotal</b>	43.6%	46.6%
<b>200% +</b>	56.4%	53.4%

**Figure 66. Distribution of Medicare enrollees according to FPL 2006-2007.**

**MEDICAID**



The Florida Medicaid Program provides medical coverage to those residents that are eligible to participate in the program. It includes women, children, disabled adults and seniors the most.

The Florida Medicaid Expenditure for 2006-2007 (Figure 67) is used to show the average cost per beneficiary for the services provided to the participants of the program. Their beneficiaries use services from more than one provider category in a given state fiscal year.

Provider Category	Beneficiaries Served	Total Amount Paid	Average Per Beneficiary
Nursing Home Care	68,051	\$2,340,673,457	\$34,395.87
Hospital Inpatient Services	226,559	\$2,029,727,548	\$8,958.94
Prepaid Health Plans	1,162,626	\$1,948,076,072	\$1,675.58
Prescribed Medicine/Drugs & Part D	1,556,586	\$1,427,032,684	\$916.77
Home & Community Based Services	109,738	\$1,105,290,145	\$10,072.08
Supplemental Medical Insurance (Medicare Part A & B)	574,666	\$881,892,548	\$1,534.62
Physician Services	1,087,066	\$629,632,223	\$579.20
Hospital Outpatient Services	640,278	\$499,042,394	\$779.42
Hospice Services	18,078	\$278,307,135	\$15,394.80
Intermediate Care Facilities - Community	2,201	\$235,935,662	\$107,194.76
Nursing Home Diversion	13,007	\$237,625,279	\$18,269.03
Home Health Services	118,667	\$158,960,962	\$1,339.55
Intermediate Care Facilities - Sunland Centers	829	\$94,414,600	\$113,889.75
Clinic Services	203,215	\$102,022,549	\$502.04
Rural Health Clinics/Federally Qualified Health Centers	176,497	\$75,016,508	\$425.03
Other	1,786,909	\$1,486,572,590	\$831.92
<b>Total</b>	<b>N/A</b>	<b>\$14,370,138,528</b>	<b>N/A</b>
<b>Unduplicated Total</b>	<b>2,626,870</b>	<b>\$14,370,138,528</b>	<b>\$5,635.16</b>

Figure 67. Florida Medicaid expenditure by provider category- fiscal year 2007-08.

For the 2006-08 period the median monthly Medicaid enrollment in Florida was 2,311,478, which is an approximate rate of 12,384.4 per 100,000 people. In Pasco County the average rate of median monthly Medicaid enrollment was 50,020, approximately 11,982.4 per 100,000 people. (Figure 68)

	Average Number of Enrollment			Rate Per 100,000
	2004-06	2005-07	2006-08	2006-2008

<b>STATE</b>	2,182,509	2,171,033	2,311,478	12,386.4
<b>PASCO</b>	47,225	47,225	52,020	11,982.4

**Figure 68. Median Monthly Medicaid Enrollment.**

For the 2004-2007 period, in Florida there was a 1.8% increase in Medicaid spending and compared to a 3.6% increase nationwide. For 2006, the total enrollment on Medicaid for the state of Florida was 3,030,100. In other words, 17% of the people enrolled in Medicaid are Florida residents.

The distribution of Medicaid enrollment by group, children, adults, elderly, and the disabled, is specified in the following chart (Figure 69). For both the nation and the state the highest percentage of enrollment is for children followed by adults, disabled and the elderly.

<b>Group</b>	<b>Florida</b>	<b>United States</b>
<b>Children</b>	51.9%	49.7%
<b>Adults</b>	18.6%	25.3%
<b>Elderly</b>	13.3%	10.4%
<b>Disable</b>	16.1%	14.5%

**Figure 69. Distribution of Medicaid Enrollment by Group (2006).**

The state of Florida is the fourth state of the nation with the highest monthly Medicaid enrollment. Although the state had a reduction in enrollment from December 2005 to December of 2006 of 107,055 cases, Florida is still ranked on top of the list for highest enrollments rates. As of May 2009, Pasco County has a total of 58,643 Medicaid eligible residents.

The Children's Health Insurance Program (CHIP) for the state is Florida Kid Care. The monthly enrollment for the program in Florida increased from June 2006 to June 2007 to a total of 30,936 children. As of June 2007, 224,575 children were enrolled in Florida Kid Care. For 2009, there are 517 children in Pasco County that are eligible to be in the Florida Kid Care program. The following chart specifies the number according to the Florida Poverty Line (FPL) and full pay. (Figure 70)

<b>CATEGORIES</b>	<b>Pasco County Eligible Children</b>
With income up to 150% FPL	239
With income greater than 150% FPL	271
Full pay	61
<b>TOTAL</b>	<b>571</b>

**Figure 70. Eligible Children for the Florida Kid Care Program (June 2009).**

## **ENVIRONMENTAL ISSUES**

According to Guillermo Angulo, Director of the Environmental Health Division within the County's Health Department, Pasco County is fortunate that in general it does not have specific salient Environmental Health issues. He states that most of the areas that are routinely worked in the county are common, every day type subjects in Environmental Health that could be seen just about anywhere else in the country to some degree. He emphasizes that perhaps one of the most important areas is public education to owners of private wells and septic systems. It is common for homeowners on private wells and septic systems to forget these systems after they are installed. Most homeowners, as long as these systems work, do not provide any routine testing and or maintenance to them. Angulo indicates that private wells should have their water tested periodically for parameters such as bacteria and nitrates, and perhaps lead, to verify that the water continues to be safe for drinking purposes. Also he said that Septic Systems should be maintained and cleaned by pumping solids out on a routine basis. The time frame for pumping would depend on the capacity of the tank and the specific use of the system. He believed that for most homeowners, pumping the tank out every 3 to 5 years should be sufficient.

In the National Citizens Survey (NCS) participants rated the aesthetic qualities of the county. Fifty four percent of the participants rated the county as good or excellent according to cleanliness. For the quality of overall natural environment in Pasco, 60% believes that the county is in good or excellent condition. Preservation of natural areas was reported as good or excellent by 45% of the participants. Also, 58% of the participants thought that the air quality was good or excellent.

The frequency of recycling in the last 12 months was also evaluated in the NCS. Approximately 31% of the respondents said that they never recycle, compared to 28% who have done it more than 26 times in the last 12 months. Thirteen percent are said to have recycled one or twice, 17% recycled 3 to 12 times, and 12% 13 to 26 times.

Ratings for utility services were also reported in the NCS. The highest numbers for the service considered good or excellent was garbage collection with 79%. The power utility was the second service with the highest rates, with 65% of the participants rating the service as good or excellent. Yard waste pickup and sewer services rates were close, with 56% and 54% respectively of the respondents rating them as good or excellent services. Forty nine percent of the participants reported that the recycling service was a good or excellent service, 48% reported the same for storm drainage and 42% for drinking water services.

## **PUBLIC SAFETY**

The National Citizens Survey (NCS) was developed to identify the efficiency of services, community problems, and local interests of Pasco residents. The Citizens survey

discovered that 55% of its respondents said they felt “very” or “somewhat” safe from violent crime and 63% felt “very” or “somewhat” safe from environmental hazards. West Pasco and East Pasco residents tend to be strikingly different though and data may be slightly skewed. When West Pasco was surveyed separately on how safe from violent crimes they felt, only 36% felt they were “very” or “somewhat” safe. When West Pasco’s counterparts were surveyed, 65% felt “very” or “somewhat” safe from violent crime. These statistics show a need for greater support in the West side of the county. As Pasco is doing a great job remodeling the face of its newer area, it needs to be careful not to leave the older areas in the dust.

The crime victimization and reporting ratings show that 15% of respondents had someone in their households that were victims of one of more crimes, and of those 80% reported it to the police.

Public safety services were rated by the participants. The best service according to the respondents is fire service. Ninety-two percent of the participants rated the fire service as good or excellent. Similarly, 91% of the participants rated the ambulance or emergency medical services as good or excellent. Sheriff services and municipal courts were rated as good or excellent by 75% and 58% respectively. Emergency preparedness and fire prevention was rated by 64% as good or excellent and Traffic enforcement on County roads and highways were rated by 55% as good or excellent.

## **HURRICANES**

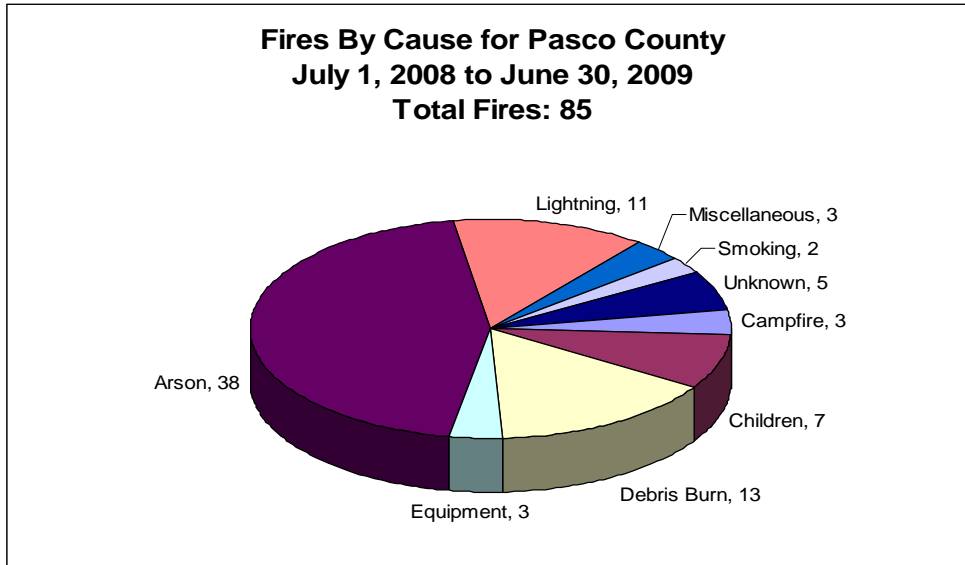
In Pasco County, hurricanes and disaster plans are set in place to prepare residents in the event of a hurricane. Evacuation zones and shelters have been assigned throughout the county to provide a safe place for those that live in an area that may be affected by one of these tropical storms. Special needs and pet friendly shelters are also available in the county to those residents that are in need and qualify. The office of Emergency Management of Pasco County provides all the information necessary in their website in the event of an emergency. Family Disaster Plans, evacuation routes and levels can be identified and planned in their website as well.

On average each year 10 tropical storms develop over the Atlantic Ocean, Gulf of Mexico, and the Caribbean Sea. It is estimated that 3 of those tropical storms will develop into a hurricane. Hurricanes are a combination of storm surges, powerful winds, tornadoes, and torrential rains.

## **WILDFIRES**

According to David Fogler, Pasco County Supervisor of the Florida Division of Forestry, the County has always had a fairly high occurrence of wildfires due to the amount of lighting, carelessness, as well as arson. Over the years, the number of fires has declined somewhat due to wildlands being developed, but this creates a new problem. In the fire community it’s referred to it as the Wild land/Urban interface. This is the area where the wildlands are in close proximity to homes and businesses. The Wildland -Urban

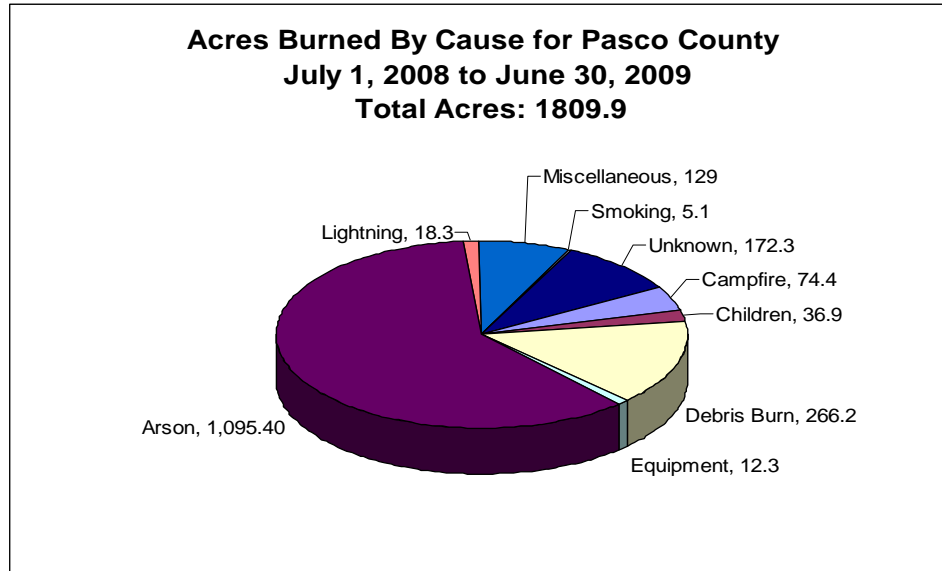
interface adds a level of complexity to the fire situation that can threaten the safety of the firefighters and the general public. Embers and direct flame contact from nearby wildfires can ignite roofs and vehicles.



**Figure 71. Fires by Cause in Pasco County- Florida Division of Forestry.**

In Pasco County, there were 85 fires from June 2008 to June 2009. More fires were attributed to arson with 38% of the total fires in the county. The second cause of fires in the county was caused by debris burning with 13% of the total number of fires. Very close was the third cause of fires with 11% due to lighting. Seven percent of the fires were caused by children and 5% are unknown. (Figure 71)

A total of 1809.9 acres were burned in Pasco County from July 2009 to June 2009. Similarly to the causes of fires in the County, Arson was the number one reason of acres burned in the county followed by debris burning. A large number of acres (172.3) were burned with an unknown cause. (Figure 72)



**Figure 72. Acres Burned by Cause for Pasco County- Florida Division of Forestry.**

## **WATER CONSERVATION AND QUALITY**

Pasco County currently has two programs for water conservation, Water CHAMP and Water PRO. Water Conservation Hotel and Motel Program (CHAMP) is a towel and linen reuse program available in the county. Water conservation materials are available to hotel and motel guests to educate them and encourage water conservation. The Water Program for Restaurant Outreach (PRO) is available to educate restaurant staff and patrons on the need for water conservation. Both programs have educational materials available to show how environmental friendly the facility is.

The NCS rated the drinking water as a service utility. It was reported by 58% of the participants that the service was “fair” or “poor”. These ratings for water service fall below the national and state benchmarks.

## **FLOODS**

Elevation requirements and storm water runoff systems are part of the Flood Mitigation Program currently in effect in the County. Flooding in Pasco County is a normal water cycle event that occurs when a large amount of rain falls over a short period of time. Rivers, lakes, and ditches become filled due to the high frequency of excessive rainfall events.

## **WATER QUALITY**

Pasco County routinely monitors its water supply according to Federal, and state laws rules and regulations. In 2008, the Department of Environmental Protection performed a Source Water Assessment on the system and the data sources indicated no potential

sources of contamination near Pasco's wells or those of Tampa Bay Water that were assessed.

## **HAZARDOUS AND ENVIRONMENTAL WASTE**

A variety of environmental and hazardous waste programs for homeowners and businesses are offered in Pasco County. These programs target the protection of human health and their environment.

Pasco County invests a lot of time and energy educating residents through the school system, workshops, associations, and civic clubs. Also the County provides speakers to lecture on a variety of subjects and can accommodate residents interested in touring facilities.

Hazardous Waste provides an integrated and comprehensive solid waste management system for the citizens of Pasco County. Their goals are; 1) to address hazardous waste levels generated in order that citizens and small businesses of Pasco County may dispose of hazardous waste in an environmentally-safe manner and remove such materials from the municipal solid waste stream, and 2) to apply industry-acceptable methods of preventing marketable raw materials from entering the waste stream.

In addition, County staff participates in numerous public events including Earth Day, the County Fair, Coastal Cleanup, Health and Safety Expos, planned Amnesty days, Risk Management meetings, and other public activities.

## **RATE ON HEALTHY HOMES**

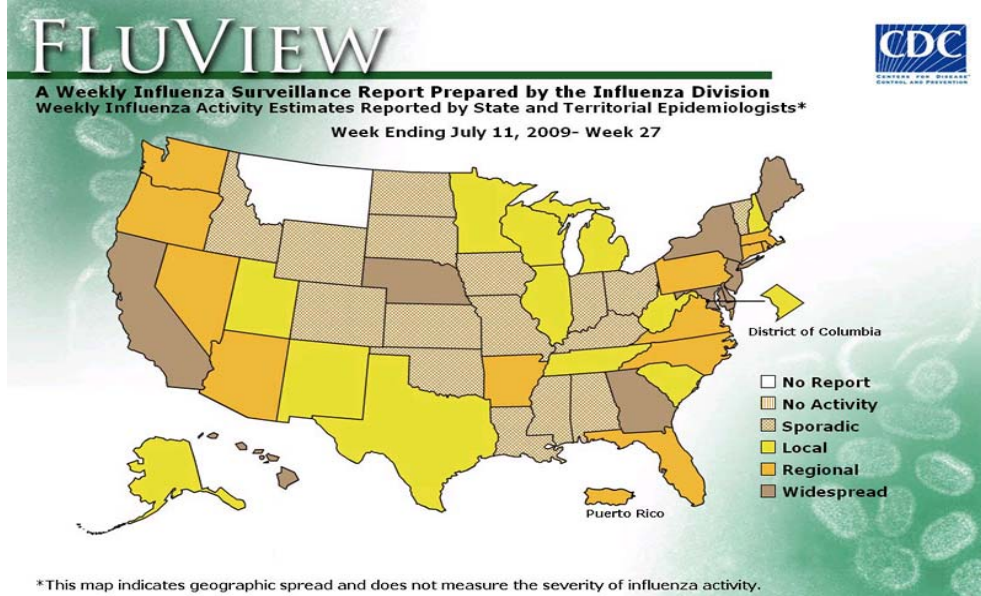
Healthy homes promote healthy families. There are some steps that individuals can take to ensure the health of their families and pets. Homes, especially kitchens and bathrooms can be major sources of bacteria and germs. It is important to keep these areas clean to prevent the spread of illness. Salmonella has made its presence on a couple of occasions in the past years. It is important to educate the public on the dangers of this illness and how to prevent it. According to the Center for Disease Control (CDC), in the United States, [food poisoning](#) causes nearly 76 million illness cases with about 325,000 hospitalizations, and approximately 5,000 deaths yearly. The salmonella organisms are reportedly responsible for as much as \$1 billion in medical costs and lost time from work. Salmonella can be transmitted or consumed principally in raw or under-cooked meats, poultry, eggs or unpasteurized dairy products. This includes foods and condiments made with these products such as mayonnaise, cookie or pastry dough, and ice cream. Salmonella can potentially be fatal in young children or the elderly.

On June 11, 2009, the [World Health Organization](#) (WHO) raised the worldwide pandemic alert level to [Phase 6](#) in response to the ongoing global spread of the novel influenza A (H1N1) virus. Phase 6 designation indicates that a global pandemic is underway. More than 70 countries reported cases of human infection with novel H1N1



flu. Some H1N1 flu cases had been confirmed in the County but no deaths had been reported.

As of July of 2009 there had been 8,842 reported cases of H1N1 in 51 states. Of those cases, 555 resulted in death. The figure below shows that the state of Florida had regional spread activity in week 27, 2009 (Figure 73). For week 44 (week ending in November 07,2009), all states had widespread cases except for Texas, Puerto Rico , Hawaii, Nebraska, and Mississippi which had regional cases, District of Columbia with local cases and Guam with sporadic cases. As of November 2009, Florida had a regional influenza activity.



**Figure 73. Flu View of the Country.**

The Influenza activity in Pasco County is listed as localized. H1N1 Influenza Mass Vaccination planning is a precaution that Pasco County is taking in order to prevent the spread of the harmful H1N1 virus. Currently, some initiatives have being planned to stop the spread of the H1N1 virus. As of November, 2009 more than 10,000 elementary students had been successfully immunized. (Figure 74)



**Figure 74. Florida's Counties report in Influenza activity for week 45  
(Ending November 14, 2009).**

### **ANIMAL CONTROL**

Pasco County Animal Services has as primary goal to ensure public health and safety in the community. Responsibility in pet ownership is one of the goals as well. Education, legislation, and providing incentives to sterilize pets are some of the activities encouraged by Animal Services. Other services offered include shelter for the unwanted, abandoned, and stray companion animals. They also enforce of County ordinances and State statutes regarding companion animals. They have rescue services for sick or injured stray companion animals, have humane traps for stray dogs and cats, and also investigate reported nuisances, public health and safety, and cruelty situations. Pasco County Animal services have a 24 hour emergency service.

### **TRANSPORTATION AND JOURNEY TO WORK**

It is important to provide Pasco County with the best transportation possible to ensure that the residents can get to the places they need to go. Available transportation is also an essential need for disabled and sick patients trying to get to their appropriate health care sites for appointments and checkups. The Transit Development Plan (TDP) is a strategic guide for public transportation in Florida, including Pasco County, over the next ten years.

Transportation and quality of travel can affect the life of residents. The National Citizen Survey rated the overall transportation quality in the community. It is considered a statistically valid survey of resident's opinions about community and services provided by local governments. The ratings of transportation in the community were lower than the benchmarks. Only 37% of the participants rated the ease of car travel and 22% rated the traffic flow of major streets as excellent or good. Of the participants, 23% believed that the ease of bus travel in the county was excellent or good. "Fair" or "Poor" was rated by 73% of the participants according to the ease of walking and by 70% according to availability of paths and walking trails.

The three transportation services in the county were also rated by the participants and resulted in lower numbers than the national averages. Off the participants, 29% believed that the bus or transit services were excellent or good. In addition, 34% of respondents considered road repairs as excellent or good and 31% thought that amount of public parking was excellent or good.

The National Citizen Survey rated the frequency of public bus use of the community. Of the participants, 92% said to have never used the bus as a mode of travel in the last 12 months. Four percent reported to have used the bus once or twice and 1% reported using it 3 to 12 times that year. Only 2% of the participants said to have used the service more than 26 times and 1% admitted to have used it between 13 and 26 times.

### **JOURNEY TO WORK**

According to the U.S. Census Bureau, 81% of Pasco County workers drove to work alone from 2005-2007. Only 11 % of workers carpoled, less than 0.5 % took public transportation, 3 % used other means, and the remaining 4% worked from home. Also, it was calculated that the average commute time to get to work was 30 minutes compared to the Florida average of 26.2 minutes.

Demographic and journey-to-work characteristics were compiled from the 1990 and 2000 Census of Population and Housing. The resulting data illustrates the change in the commuting patterns of workers traveling within and outside of Pasco County to their places of employment.

A total of 450 surveys were distributed, 330 surveys on the PCPT west-side routes and 120 on the east-side routes. The response rate was 62.9% which gave an insight of the transportation system in Pasco. The most common reason identified for using public transit was for work trips at 49 % in 2005, up from 34% in 2002.

According to the surveys, 34 % of respondents indicated that they typically walk less than one block to the bus. In addition, 22 % of respondents walk 1 to 2 blocks, 18 % walk 2 to 5 blocks, and 14 % walk more than five blocks. Also it was seen that 39 % of respondents identified not driving as the primary reason for utilizing public transit, while 24 % cited the lack of availability of a vehicle.

Although the satisfaction level was lower compared to the 2002 survey, 87 % of respondents gave an overall rating of “very good” or “good” for PCPT service. According to the responses, the primary source for information regarding PCPT service is through a bus schedule, followed by a bus driver as a source of information.

Half of the respondents identified weekend service as the most important service improvement, up from 39 % in 2002. In addition, 21% of respondents indicated that night service was also a priority, down slightly from 26% in 2002.

Needed service improvements were discussed through interviews with individuals using the transportation service. Their recommendation was that service needs to be extended along US 19 to Hernando County, at least to County Line Road. In addition it was recommended to extend it farther into Hernando County in order to connect Pasco and Hernando bus systems.

Saturday service is an extremely important need, especially to the mall and shopping centers along US 19. Respondents said that Sunday service is not an important need at this time, but that later night service (until at least 10:00 p.m.) would be ideal.

## **SECOND HAND SMOKE**

Secondhand smoke is also known as environmental tobacco smoke (ETS) or passive smoke. It is a mixture of 2 forms of smoke that comes from burning tobacco.

Sidestream smoke: smoke that comes from the end of a lighted cigarette, pipe, or cigar, and mainstream smoke: smoke that is exhaled by a smoker. When non-smokers are exposed to secondhand smoke it is called *involuntary smoking* or *passive smoking*. Non-smokers who breathe in secondhand smoke take in nicotine and other toxic chemicals just like smokers do. The more secondhand smoke you are exposed to, the higher the level of these harmful chemicals in your body. Secondhand smoke is classified as a "known human carcinogen" (cancer-causing agent) by the US Environmental Protection Agency (EPA), the US National Toxicology Program, and the International Agency for Research on Cancer (IARC), a branch of the World Health Organization. Tobacco smoke contains over 4,000 chemical compounds. More than 60 of these are known or suspected to cause cancer. Secondhand smoke is the cause of numerous other deaths and illnesses. In the United States alone, each year there are an estimated 46,000 deaths from heart disease in non-smokers who live with smokers. There are about 3,400 lung cancer deaths and other breathing problems in adult non-smokers, including coughing, mucus, chest discomfort, and reduced lung function. Each year there are 150,000 to 300,000 lung infections (such as pneumonia and bronchitis) in children younger than 18 months of age, which result in 7,500 to 15,000 hospitalizations. There are increases in the number and severity of asthma attacks in about 200,000 to 1 million children who have asthma. Pregnant women exposed to secondhand smoke are also at increased risk of having low birth weight babies.

An issue that is still being studied is whether secondhand smoke may increase the risk of breast cancer. Both mainstream and secondhand smoke contain about 20 chemicals that, in high concentrations, cause breast cancer in rodents. And we know that in humans, chemicals from tobacco smoke reach breast tissue and are found in breast milk.

Any link between secondhand smoke and breast cancer risk in human studies is still being debated. This is partly because breast cancer risk has not been shown to be increased in active smokers. One possible explanation for this is that tobacco smoke may have different effects on breast cancer risk in smokers and in those who are exposed to secondhand smoke.

A report from the California Environmental Protection Agency in 2005 concluded that the evidence regarding secondhand smoke and breast cancer is "consistent with a causal association" in younger women. This means that the secondhand smoke acts like it could be a cause of breast cancer in these women. The 2006 US Surgeon General's report, *The Health Consequences of Involuntary Exposure to Tobacco Smoke*, found that there is "suggestive but not sufficient" evidence of a link at this point. In any case, women should be told that this possible link to breast cancer is yet another reason to avoid being around secondhand smoke.

The 2006 US Surgeon General's report reached some important conclusions: Secondhand smoke causes premature death and disease in children and in adults who do not smoke.

Children exposed to secondhand smoke are at an increased risk of sudden infant death syndrome (SIDS), acute respiratory infections, ear problems, and more severe asthma. Smoking by parents causes breathing (respiratory) symptoms and slows lung growth in their children.

Secondhand smoke immediately affects the heart and blood circulation in a harmful way. Over a longer time it also causes heart disease and lung cancer. The scientific evidence shows that there is no safe level of exposure to secondhand smoke. Many millions of Americans, both children and adults, are still exposed to secondhand smoke in their homes and workplaces despite a great deal of progress in tobacco control.

The only way to fully protect non-smokers from exposure to secondhand smoke indoors is to prevent all smoking in that indoor space or building. Separating smokers from non-smokers, cleaning the air, and ventilating buildings cannot keep non-smokers from being exposed to secondhand smoke.

Four places that cause a concern for exposure to secondhand smoke are the workplace, public places, homes, and cars.

Local, state, and federal authorities can enact public policies to protect people from secondhand smoke and protect children from tobacco-caused diseases and addiction. Because there are no safe levels of secondhand smoke, it is important that any such policies be as strong as possible, and that they do not prevent action at other levels of government.

The State of Florida unveiled, in 2008, under the direction of the Florida Department of Health, the Tobacco Free Florida campaign. This campaign seeks to decrease the number of tobacco users in the state of Florida through efforts aimed at both preventing nonusers from starting to use tobacco and encouraging current users to quit. These efforts are funded by money derived from court settlements against major tobacco companies, and include executions in the realm of advertising, public relations, interactive, guerilla media, event media, sponsored promotions and more. It is our hope that one day every Floridian might be free of the hazards of tobacco, and that we all may eventually live in the paradise that our name implies, a truly Tobacco Free Florida. The Pasco County Health Department, Gulfcoast North Area Health Education (GNAHEC), Healthy Start, Medicare, Medicaid, Florida quitline, and private insurances offer smoking clinics and/or support groups to facilitate smoking secession.

### **PASCO'S AIR QUALITY**

The Department of Environmental protection coordinates the statewide air compliance and enforcement activities. The Air Compliance Assurance (ACA) Section promotes air compliance through the department's district offices and the approved local program offices. The Department of Environmental Protection is responsible for air permits regulating major and minor facilities based on emissions. Operating Permits are issued by the department's office in Tallahassee as well as the six district offices.



Pasco along with the state of Florida rates their air quality by the number of pollutants in the air. There are five categories to display whether or not the air quality is acceptable. The five categories are Good, Healthy, Unhealthy for Sensitive Groups, Unhealthy and Very Unhealthy. Pasco's air quality index shows that the number of days with an acceptable air quality was 316 out of the 365 days. On 13% of the days in 2007 the air quality was considered moderate or unhealthy for sensitive individuals. There were zero days where the air quality was either Very Unhealthy or Unhealthy.

### **RESOURCES TO PASCO COUNTY RESIDENTS**

Fortunately, there are many options and resources for individuals with disabilities in the Pasco County area. Programs range from medical help to support groups. The Deaf Service Bureau of West Central Florida provides a wide range of services including interpreting, employment services, advocacy, assistance with hearing aids, American Sign Language classes, clothing, food and assistance with buying a house. Family Care Council Sun Coast Area advises the Agency for Persons with Disabilities (APD) on the needs of self-advocates and their families. There are 14 local Family Care Councils working with APD to educate, advocate, and empower families of persons with developmental disabilities (DD). They also assist APD with the delivery of services to people receiving Med-Waiver funds.

Families of Kids with Mood and Anxiety Disorders, Inc. supports child and adolescent mental health by increasing community awareness. They work to involve the whole community in education, care and support programs that reduce stigma and increase self-confidence so that youth may be openly accepted and understood for who they are. Diagnostic and instructional support services are provided to district exceptional student education programs and their families statewide by the Florida Diagnostic and Learning Resources System (FDLRS). FDLRS supports Florida education goals of high student achievement, safe schools, and high performing workforce.

The Children's Medical Services (CMS) program provides children with special health care needs a family centered managed system of care. Early Steps is administered by Children's Medical Services (CMS) in accordance with the Individuals with Disabilities Education Act (IDEA). They offer early intervention services for families with infants and toddlers (birth to thirty-six months) who have developmental delays or an established condition likely to result in a developmental delay.

Meals on Wheels helps to enhance the quality of life for Pasco County's elderly citizens, through provision of hot, nutritious meals, while reducing isolation and prolonging mental and physical acuity through socialization and active participation at congregate dining sites.

The Pasco County Health Department (PCHD) provides a wide range of clinical, environmental, and other public health services to the residents of Pasco County. One of the programs provided, Women, Infants and Children (WIC) is a nutrition education, health promotion and supplemental food program to assist pregnant, postpartum and

breastfeeding women, infants up to 12 months, and children up to age five, who have nutritional needs. WIC services are provided at no cost to eligible participants and include nutrition education and guidance, breastfeeding education and support, nutritious food to supplement the participant's diet, such as milk, cheese, infant formula, iron-fortified cereal, eggs, juice, peanut butter, whole grains, and dried beans as well as referrals for health care.

Health and Human Services is another branch of PCHD. Their mission is to ensure the health and welfare of Pasco County's indigent and at-risk populations. They provide a variety of medical and general assistance through networking and coordinating services with other governmental entities, non-profit service agencies and other related community human service providers. They are designed primarily to provide short-term, limited, temporary assistance to families, in accordance with Division rules, regulations and budgetary constraints. Residents must meet established income and asset eligibility criteria. All services are contingent upon the availability of services, cooperation of landlords, local physicians, dentists, laboratories and other businesses. Services of the Health and Human Services division include limited payments toward past due rent, limited payments for past due utility bills (electricity, water, propane), burial services for residents with no insurance benefits or other means to pay for services, information and referrals for available community resources and Emergency Home Energy Assistance for the Elderly Program (residents 60 years of age and older). Assistance with prescription drugs, out-patient services, physicians office visits and laboratory/x-ray services are also provided. Prescription Discount Card is a free service to county residents without prescription coverage.

The Head Start program provides grants to local public and private non-profit and for-profit agencies to provide comprehensive child development services to economically disadvantaged children and families. The programs focus on preparing preschoolers with reading and math tools and skills they will need to be successful in school. In 1995, the Early Head Start program was established to serve children from birth to three years of age in recognition of the mounting evidence that the earliest years greatly impact children's growth and development. Approximately 23,000 children were enrolled in the program in 2008 and \$264, 221,005 was used for the funding. Unfortunately, only 49.6% of children aged 3-5 are enrolled in the program in Pasco County.

The National School Lunch Program (NSLP) is a federally-assisted meal program operating in public, non-profit private schools and residential child care institutions. It provides nutritionally balanced, low-cost or free lunches to children each school day. The program was established under the National School Lunch Act, signed by President Harry Truman in 1946. The recent statistics (May 2009) show free and reduced lunches in Pasco County schools are at an all-time high. The district total of free lunches is 25,093 while the number of reduced lunches provided was 5,968. This is 48.27 % of the children in the county. Elementary schools provide the greatest number of free and reduced lunches (52.88% of children in that age group). Middle and high school aged students are each provided with over 7,000 free and reduced lunches.



Although unemployment rates are rising due to the economic downturn, Pasco County is fortunate to feature a rich business environment with a diverse network of private and public businesses to keep its residents employed. It is located in close proximity to the heart of Tampa where it is available to accommodate large scale retail development. According to the Pasco County Economic Development Council, Pasco is doing its best to support its residents despite the recent economic situation. There are 24 employers in Pasco County that employ the greatest amount of local residents. The top five largest employers are the District School Board of Pasco County, Pasco County Government, State of Florida Government, the Pasco County Sheriff's Department and the Community Hospital of New Port Richey. The retail, construction, manufacturing and agriculture sectors provide the majority of the rest of the county's employment (Pasco County Government, 1/09).

There are also numerous opportunities for higher education in the Tampa Bay area. There are two community colleges, seven career/technical schools and ten major universities in close proximity. Statistics show that greater than 50% of those who attend college in the Tampa Bay area continue to work and live in the area after graduation. Each year 10,000 highly educated workers are added to the Tampa Bay work.

Public transportation services are provided by the Pasco County Board of County Commissioners through Pasco County Public Transportation (PCPT). Fixed-route, transit buses operate throughout West Pasco, Dade City, and Zephyrhills. PCPT also operates the County's paratransit service for those persons unable to access transit service because of a verifiable disability, environmental barrier, or distance from a route. Persons residing within three-quarters mile of a bus route are required to use transit service. Seniors age 65 and older can qualify for reduced fares with appropriate identification. Pasco County provides door-to-door transportation service for group dining sites, medical facilities, grocery shopping centers, and other life sustaining destinations. The transportation is provided for older adults and people with disabilities. It is normally a group service. Individual trips are available for medical appointments. Connections with Pinellas and Hillsborough transit buses are available.

Bus schedules and passes are available at the PCPT Administration Office, located at Port Richey; Pasco-Hernando Community College West Campus bookstore, and seven County libraries. Connections are provided to the Pinellas Suncoast Transit Authority (PSTA) through Routes 18 and 19. Under Pasco County Public Transportation, Transportation Disadvantaged is a Metropolitan Planning Organization program, funded by the state, to provide low-cost transportation for those who qualify as "transportation disadvantaged". Services for medical, employment, grocery, banking, and education related to employment are offered. However, income criteria must be met and participants must have no other means of transportation available, including family and friends.

The American Cancer Society provides transportation for registered clients to all types of cancer treatments, including chemotherapy and radiation appointments. Clients must be ambulatory. However, they will not go from one county into another. Morton Plant

North Bay Hospital provides transportation to and from hospitals or Trinity Outpatient Center. Supplemental Transportation by MedFleet Systems provides emergency and non-emergency ambulance, stretcher and wheelchair transport. Stretcher Limo, Inc. provides stretcher and wheelchair transport. Taxi transportation is provided by Silver Streak or Yellow Cab. Both companies offer deposit accounts to residents. Transportation with an escort provided by for-profit businesses includes Affinity Health Services, Bayshore Health and Homemaker Services, Inc., Caregivers for Seniors, Inc. and Home Instead Senior Care. Affinity offers assistance with daily chores, meal preparation, shopping and transportation services. Bayshore provides transportation, errands, companionship and home health services in West Pasco. Caregivers for seniors provide escorted transportation to appointments, grocery shopping, errands, entertainment, beauty salons, etc. The driver will remain with the client throughout appointments. Initial assessment is required prior to caregiver assignment. They also provide short- and long-term home companions for assistance with meal preparation, housekeeping, laundry, medication management, and pet care. All caregivers are older adults. Home Instead can help run errands, provide companionship and related transportation. They are Alzheimer's certified for all services.

Support groups in Pasco County seek to provide various resources for residents in need. A resource for domestic violence and sexual assault victims is Sunrise of Pasco County, Inc. They are a private, non-profit organization for domestic violence and sexual assault. They provide a safe place for victims to survive the aftermath of abuse and assist them in planning for their future.

Pasco County has the AWARE Social Skills group for children with Asperger's Syndrome, high functioning Autism, Pervasive Developmental Disorder - Not Otherwise Specified (PDD-NOS), Non-Verbal Learning Disability and Attention Deficit Hyperactivity Disorder (ADHD). Behavioral Consulting of Tampa Bay provides support for children with Autism and similar disorders. The program develops and implements skill acquisition and/or behavior reduction for clients.

The Center for Independence, a private, not-for-profit, 501(c) (3) charitable organization, is available for adults with developmental disabilities. The Center promotes opportunities for individuals and families to achieve independence in their lives. Currently, there are three group homes in the Pasco area: Little Ranch of Hope Assisted Living Facility in Shady Hills (Northwestern Pasco), Dade City Group Home (Dade City) and Montano Group Home (Zephyrhills).

Voluntary short-term disability insurance is available to all permanent, full-time employees working a minimum of 30 hours per week. Short-term disability coverage insures an individual's income for a defined period of time in the event of a temporary disability which renders someone unable to work. The program is designed to pay, after a 14 day elimination period, an amount selected up to 66% of weekly covered earnings (up to a maximum of \$500.00 per week). Benefits will cease at the end of the disability or after 13 weeks, whichever is greater. The policy does contain a pre-existing conditions limitation. Rates vary depending on age and amount of benefit.

According to CIGNA Group Insurance/Life Insurance Company of North America voluntary, long-term disability insurance is also available to all permanent, full time employees working a minimum of 30 hours per week. Long Term Disability coverage insures an individual's income in the event of a disability. An individual may receive monetary benefits designed to help maintain income and lifestyle. The program is designed to pay, after a 90 day elimination period, 60% (maximum of \$5,000 per month) of a person's gross annual salary for the duration of the disability. The plan does contain a pre-existing conditions limitation as well as a reduction in benefits when the disabled employee begins collecting Social Security or Disability Retirement benefits. Rates vary depending on age and salary.

Mobilizing for Action through Planning and Partnership (MAPP) is a strategic approach to community health improvement. This is a tool to help communities achieve optimal health by using local organizations and residents. The Pasco County Health Department in conjunction with Area Health Education Center (AHEC) is currently working towards achieving the development of a strategic plan. Three of the four assessments have been completed for the identification of the strategic issues. Goals and strategies are then going to be formulated and a plan of action will be implemented.

### **PERCEIVED HEALTH NEEDS OF PASCO COUNTY RESIDENTS**

Pasco County needs to be a healthy community as described by the U.S. Department of Health and Human Services Health People 2010 report. Pasco County needs to work towards being a community that creates and improves physical and social environments. Healthy places to improve the quality of life of the residents of Pasco should be available.

Only 34.9 % of Pasco County residents meet the moderate physical activity recommendations. Similarly only 23.7 % of residents consume at least five servings of fruits and vegetables a day. Increasing both physical activity and nutrient intake will help alleviate overweight and prevalent disease states. Inactivity at the workplace has become a greater problem in the last two years. It would be beneficial to add some sort of plan for incorporating activity into the daily activities of the working population. Pasco County suffers the most from cardiovascular disease but has seen a decrease in number since previous years. This decrease in cardiovascular diseases can be correlated to the increase in physical activity and appropriate diet.

What the Health Department wants to focus on is primary prevention. Primary prevention addresses proactive or prophylactic treatment to prevent health problems before they arise. Primary prevention modifies behaviors and/or risk factors that are associated with the health outcome. With environmental health, Primary prevention clearly encompasses actions on an even broader scale as the problems of environmental pollution are all-encompassing. Environmental health prevention must be founded on the guiding principle that human health and ecosystem health are one and the same. Pollution, waste accumulation, loss of habitat, species extinctions and loss of biodiversity, and climate change are considered human and ecosystem issues.

Our goal is to prevent adverse health effects through education and limitation of exposure to unhealthy things when the option is available. We are witnessing a transition, wherein more physicians are stepping into the health protection realm. Health protection places emphasis on prevention and on preservation of individual and collective health. Also children's environmental health of Pasco County needs improvement in the local collective actions to increase the influence of better policies and regulatory reforms.

Pasco County must cater towards its pre-retiree population, focusing on the prevalent problems that affect that aging group. Additionally, education is important for the younger and middle – aged adults so they maintain a healthy lifestyle and prevent diseases that become more prevalent with aging.

### **HIV / AIDS CLINICS, FAMILY PLANNING AND TEEN CLINICS**

The Pasco County Health Department offers clinical services at five different locations. Hudson, Land O' Lakes, Zephyrhills, Dade City and New Port Richey. The New Port Richey clinic offers primary care, HIV/AIDS programs and a pediatric dental clinic. The Main Street clinic in New Port Richey houses the prenatal program and teen clinic, with services for pregnant women, families and children. The Healthy Women Today program, with administrative offices at the Main Street Clinic, offers breast and cervical health services for women 40 years of age or more at each clinic location.

### **THE NATIONAL CITIZEN SURVEY**

The residents of Pasco County provided their opinions about the quality of life in their communities in the National Citizen Survey (NCS). Surveys were mailed to 1,200 households; nearly 370 completed the survey giving a 35% response rate. The eight categories assessed in the survey were Community quality, community design, public safety, environmental sustainability, recreation and wellness, community inclusiveness, civic engagement, and public trust.

Most residents believe that Pasco County is a good place to live and said that they have experienced a good *quality of life*. The overall quality of life in the county was rated by 71% of the participants as "excellent" or "good". The vast majority of the participants said that they planned on staying in the county for the following five years. Fifty five percent of the participants said they were "very likely" to stay in Pasco County for the next five years and 28% said they were "somewhat likely" to stay. Also 80% of the participants were "very likely" or "somewhat likely" to recommend living in Pasco County.

The ratings of *housing in the community* show that the availability of houses was better in Pasco than the national and Florida jurisdictions. The availability of affordable quality housing was rated by 45% of the participants as excellent or good. Similarly, 60% of the

respondents believed that there is an excellent or good variety of housing options. In addition, the proportion of respondents whose housing costs were affordable was reported by 42% of participants who admitted that their housing cost was 30% or more than their income and by 58% of the participants who said to be less than 30% of their income.

Rating for the *community built environment* shows that 50% of the participants believe that the overall quality of new development in Pasco is good. Eight percent of the respondents believed that the overall quality was excellent. Also 56% of the participants thought that the overall appearance of Pasco County was excellent or good. For population growth in the county, 46% believed that it was “somewhat too fast” compared to a 1% of the participants that believed that the growth was “much too slow”. Only 30% of the participants said that the population growth of the county was the “right amount”. Forty five percent of the participants believed that run down buildings, weed lots or junk vehicles are a “moderate problem” in Pasco County.

Ratings for *economic sustainability* and opportunities were assessed in the survey as well. Eleven percent of the survey respondents believe that the employment opportunities are good in the county and 34% believes that Pasco is a good or excellent place to work. Better ratings are for quality of businesses and shopping opportunities. Fifty nine percent of respondents think that the overall quality of business and service establishments in Pasco are good or excellent and 63% agree that is an excellent or good place for shopping opportunities.

When participants were asked to rate the retail growth, 89% believed that it was “too slow.” Similarly, 34% of the participants believed that the rate of job growth was “too slow.” Although more participants believed that the job growth was too slow compared to the national and state average, according to the retail growth, Pasco seems to be in similar numbers with the national and state average. Only 27% of the participants believed that the economic development of the county was good. Interestingly enough, 56% of the participants felt that the economic future would be “somewhat” or “very” negative which indicates that Pasco residents are less optimistic than the nation and state.

*Recreation and wellness* were rated by participants of the NCS as well. Recreational opportunities and availability of historic sites fall below the national and state benchmark. Pasco County’s open space was also below compared to the national numbers but similar to the state numbers. Fifty percent of the participants rated open space as “good” or “excellent” in the county. On the other hand, recreational opportunities and availability of historic sites were considered as “fair” or “poor” services by 45% and 35% of the respondents.

Recreation centers in Pasco County were more used than centers statewide. Fifty seven percent of the respondents said to have visited a Pasco County recreation center in the last 12 months. Also, 76% of the respondents said to have visited a Pasco County Park and 43% participated in a recreation program or activity. Pasco residents’ participation was less seen in a recreation program or activity compared to the nation but more when



compared to the state of Florida. Fewer participants said to have visited a neighborhood park or county park compared to the national and state numbers.

The ratings of parks and recreation services of the county were also taken from the NCS. Seventy six percent of the survey participants rated the County's parks as "good" or "excellent". Sixty two percent of the participants believed that recreation centers or facilities of the county were "good" or "excellent". In addition "good" or "excellent" ratings were given by 59% of participants to recreation programs and classes and by 38% of the participants to nature programs and classes.

*Culture, arts and education* were also evaluated and rated by the residents of Pasco in the NCS. It was found that only 33% of the participants rated the opportunities to attend cultural activities as "good" or "excellent". Only 34% of the participants of the survey rated educational opportunities as "good" or "excellent". Both ratings were below the national and state numbers. Better numbers were seen in the use of libraries. Sixty nine percent of the participants reported to have used the County's public libraries or their services in the last 12 months. Almost half of the participants (49%) said to have participated in religious or spiritual activities in the last 12 months. The perception of cultural and educational services in the public library system was rated as "good" or "excellent" by 76% of the participants and in the public schools by 54% of the participants.

*Health and wellness* of Pasco was also rated in the NCS. Community health and wellness access and opportunities were similar to the national and state benchmarks. Sixty one percent of the participants rated "good" or "excellent" the availability of affordable quality of food. Availability of preventive health services and availability of affordable quality health care services were rated as "good" or "excellent" by 49% and 45% of the participants respectively. Almost half (49%) of the participants rated the health services of the county as "good" or "excellent" and 30% of the participants gave the same rating to the adult protective services of the county. On the other hand, 74% of participants rated the mental health services as "fair" or "poor" and 76% of the participants also believed that the drug and alcohol services of the county were "fair" or "poor".

*Community quality and inclusiveness* was also rated by participants of the NCS. It was seen that 47% of the participants rated Pasco as a "good" place to retire and 19% believed that it was an "excellent" place to retire. Sixty five percent of the participants believed that the county was a "good" or "excellent" place to raise a family and 54% believed that there was a "good" or "excellent" sense of community in the county. On the other hand 47% believed that the residents of the county had a "fair" or "poor" openness and acceptance of the community towards people of diverse backgrounds. Also 40% of the participants rated "fair" or "poor" the availability of affordable quality child care.

Ratings for the quality of services provided for vulnerable populations were also part of the NCS. Services to seniors were seen by 46% of the participants as "good" or "excellent". Participants rated services to youth and services to low income people as "good" or "excellent" (32% and 29%, respectively). These ratings were all below the

national and state benchmarks except for the ratings for services to low income people. The ratings for the services to low income people were similar to those in the state.

*Civic engagement* was also rated by participants of the NCS. It is believed that communities that have a strong civic engagement may be more likely to see the benefits of programs that ultimately improve the quality of life of all residents. Sixty one percent of the participants believed that the opportunities to volunteer in Pasco are “good” or “excellent”. Also 45% of the respondents rated “good” or “excellent” the opportunities to participate in community matters. Both opportunities were rated below the national and state benchmarks. It was seen from the survey that most of the respondents did not participate in a club or civic group, did not volunteer time to some group or activity and did not watch or attend a meeting of local elected officials. On the other hand, most of the respondents, 94%, said to have provided help to a friend or neighbor in the last 12 months.

In the area of electoral participation Pasco County residents showed the largest amount of civic engagement than the state and national benchmarks. Eighty six percent of the participants of the survey said that they were registered to vote and 83% said to have actually voted in the last general election.

*Information and awareness* sources and local government media services was rated in the NSC. Participants that visited the Pasco County website in the last 12 months only represented 55%. The information dissemination of the local government was rated as “good” or “excellent” by 65% in cable television and by 52% in public information services. The cable television ratings were above the national and state benchmarks but the public information services ratings were below.

Opportunities to participate in *social engagement* were also rated in the NCS. More rated opportunities to participate in religious or spiritual events were rated as “good” or “excellent” than any other activities. Fifty nine percent of the participants believed that the opportunities to participate in religious or spiritual events were “good” and 14% believed that they were “excellent”. Thirty nine percent of the participants rated “good” or “excellent” the opportunities to participate in social events and activities.

Contact with immediate neighbor ratings was higher in Pasco than the state and the nation. Eighty seven percent of the participants said to have talked or visited their neighbors at least once a month and only 13% said to have done it less than once a month.

*Public trust* was also rated in the NCS. It was found that the rates for public trust in Pasco were lower than the state and national average rates. Seventy eight percent of the participants believed that the job that Pasco County government does is “fair” or “poor”. Similarly, 76% of the participants rated that the job of Pasco County government at welcoming citizen’s involvement was “fair” or “poor”. On the other hand, 41% of the participants believed that the value of services for the taxes paid to Pasco County was “excellent” or “good”. Forty five percent of the participants rated the overall direction



that the county is taking and the overall image or reputation of the county as “excellent” or “good”.

Pasco County residents gave a higher rating of excellence to services provided by their local government compared to services provided in the state and federal governments. Fifty percent of the participants rated the services provided by Pasco County government as “excellent” or “good”. These ratings were below average for the services provided by local, state, and federal government benchmarks.

*Pasco County employees* and the interaction with residents was also evaluated and rated in the NCS. Only 52% of the participants reported that they have contacted a Pasco County employee in the last 12 months. The contact with employee rating for Pasco County was lower than the national and state rating; benefiting from these services. Of those residents that contacted a county employee 79% rated the employee knowledge as “good” or “excellent”. Additionally, the overall impression of county employees was rated by 75% of the participants as “good” or “excellent”. Lastly, “good” or “excellent” was given by 72% of participants for responsiveness and by 84% of participants for courtesy.

Results from the National Citizens Survey were also broken down *geographically*. For the purpose of this survey, Pasco was divided into West, Central, and East Pasco. It was seen that Central Pasco was thought to be an “excellent” or “good” place to live by 83% compared to 82% in the East and 59% in the West side. On the other hand, a higher percentage of the East side of Pasco believed that their neighborhood was an “excellent” or “good” place to live (89% East, 80% Central, and 65% West). Similarly more people on the East side of the county (90%) said to feel “very” or “somewhat” safe in their neighborhood after dark (West 54% and Central 84%).

More people on Central Pasco said that the county was an “excellent” or “good” place to raise children (Central 79%, East 71%, and West 44%). The overall quality of new development in Pasco was believed to be “excellent” and “good” by 69% of Central Pasco, 60% of residents of the East, and 45% of West side. Central and East Pasco were more likely to recommend the County as a place to live. Eighty five percent of East, 84% of Central, and 71% of West Pasco County residents said to “somewhat” or “very likely” recommend living in Pasco.

### Archive

For more information refer to the following websites:

Poverty

<http://www.poverty.uga.edu/maps/various.pdf>

Smoking

[http://www.doh.state.fl.us/tobacco/PDF\\_CountyDataProfiles/Pasco.pdf](http://www.doh.state.fl.us/tobacco/PDF_CountyDataProfiles/Pasco.pdf)

[http://www.pascoasap.com/PDF/pc\\_fact\\_sheet.pdf](http://www.pascoasap.com/PDF/pc_fact_sheet.pdf)

Foodborne Disease Trends and Reports

<http://www.liebertonline.com/doi/pdfplus/10.1089/fpd.2009.9999>

YRBS

[http://www.doh.state.fl.us/disease\\_ctrl/epi/Chronic\\_Disease/YRBS/2007/2007\\_YRBS.html](http://www.doh.state.fl.us/disease_ctrl/epi/Chronic_Disease/YRBS/2007/2007_YRBS.html)

Transportation

<http://www.pascocountyfl.net/devser/dept/mpo/lrtp/TDPES.pdf>

Children with Disabilities

[http://199.164.64.180/library/is/forms/mis\\_772.pdf](http://199.164.64.180/library/is/forms/mis_772.pdf)

Behavior Risk

[http://www.doh.state.fl.us/Disease\\_ctrl/epi/BRFSS\\_Reports/2007BRFSS/Pasco.pdf](http://www.doh.state.fl.us/Disease_ctrl/epi/BRFSS_Reports/2007BRFSS/Pasco.pdf)

Mortality Atlas

[http://www.floridacharts.com/charts/atlas/Mortality/Full\\_Mortality\\_Atlas.pdf](http://www.floridacharts.com/charts/atlas/Mortality/Full_Mortality_Atlas.pdf)

Mid Course Review

<http://www.healthypeople.gov/Document/tableofcontents.htm#under>

Obesity news in Pasco

[http://www.sptimes.com/2005/08/17/Pasco/Pair\\_aims\\_at\\_obesity.shtml](http://www.sptimes.com/2005/08/17/Pasco/Pair_aims_at_obesity.shtml)

[http://www.sptimes.com/2003/11/05/Pasco/School\\_cafeterias\\_tac.shtml](http://www.sptimes.com/2003/11/05/Pasco/School_cafeterias_tac.shtml)

Pregnant Teen Help

<http://www.pregnantteenhelp.org/articles1.html>.

Food Security- United States Department of Agriculture- Economic Research Support

<http://www.ers.usda.gov/publications/err66/err66.pdf>

Information gathered from:

Florida CHARTS

Florida Agency for Health Care Administration (AHCA)

Suncoast Health Council

Florida Department of Health

Pasco County Health Department

Feeding America - America's Second Harvest

Florida Tobacco Prevention and Control County Data Profile. PCHD, 2008

American Diabetes Association

Center for Disease Control (CDC)

Florida Health Finder









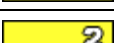

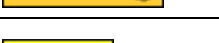

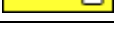
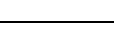


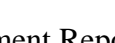
The Office of Emergency Management of Pasco County  
Pasco County Animal Services  
Pasco County Public Transportation  
Florida Division of Forestry  
National Citizens Survey  
Pasco County Mosquito Control District  
Pasco Economic Development Council  
Pregnant Teen Help  
March of Dimes  
Bishop Joseph M. Sullivan, testifying to Congressional Committee spoke on behalf of the United States Catholic Conference, February 22, 1982)  
The University of Georgia Initiative on Poverty and the Economy, 2003  
United States Department of Agriculture, Economic Research Report, 200

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## County Health Status Summary

 <b>Pasco County, Florida County Health Status Summary</b>							
Indicator	Year(s)	Rate Type	County Quartile <sup>A</sup> 1=most favorable 4=least favorable	County Rate	State Rate	County Trend <sup>B</sup> (click to view)	Healthy People 2020 Goals <sup>C</sup>
<b>Actual Causes of Death*</b>							
<b>Physical Activity</b>							
Adults who meet moderate physical activity recommendations <sup>1</sup>	2007	Percent	 3	34.9%	34.6%		
Adults who meet vigorous physical activity recommendations <sup>1</sup>	2007	Percent	 2	27.4%	26.0%		
Adults who engage in no leisure-time physical activity <sup>1</sup>	2002	Percent	 2	25.1%	26.4%		32.6%
<b>Overweight and Obesity</b>							
Adults who consume at least five servings of fruits and vegetables a day <sup>1</sup>	2007	Percent	 3	23.7%	26.2%		
Adults who are overweight <sup>1</sup>	2010	Percent	 3	38.5%	37.8%		
Adults who are obese <sup>1</sup>	2010	Percent	 3	30.6%	27.2%		30.6%
<b>Tobacco Use</b>							
Adults who are current smokers <sup>1</sup>	2010	Percent	 3	21.0%	17.1%		12%
<b>Socio-Demographics</b>							
Median income (in dollars) <sup>2</sup>	2006-10	Dollars	 2	\$44,228	\$47,661		
Residents below 100% poverty <sup>2</sup>	2006-10	Percent	 2	12.3%	13.8%		
Unemployment rate <sup>3</sup>	2010	Percent	 4	13.1%	11.5%	<a href="#">Worse</a> ↑	
Population that is linguistically isolated <sup>2</sup>	2006-10	Percent	 3	2.2%	7.2%		
Population over 25 without high school diploma or equivalency <sup>2</sup>	2006-10	Percent	 2	13.9%	14.7%		
<b>Health Status and Access to Care</b>							
Adults who rate their health status as "fair" or "poor" <sup>1</sup>	2010	Percent	 2	19.2%	17.1%		
Adults with any type of health care insurance coverage <sup>1</sup>	2010	Percent	 1	86.9%	83.0%		
Adults who could not see a dentist in the past year because of cost <sup>1</sup>	2007	Percent	 4	23.2%	19.2%		
Adults who received a flu shot in the past year <sup>1</sup>	2010	Percent	 2	35.4%	36.5%		

Total licensed family physicians <sup>4</sup>	2008-10	Per 100,000	2	16.5	22.9		
Total licensed dentists <sup>4</sup>	2008-10	Per 100,000	3	33.2	62.7		
Total hospital beds <sup>5</sup>	2008-10	Per 100,000	2	260.3	318.9		



## Pasco County, Florida County Health Status Summary

Indicator	Year(s)	Rate Type	County Quartile <sup>A</sup> 1=most favorable 4=least favorable	County Rate	State Rate	County Trend <sup>B</sup> (click to view)	Healthy People 2020 Goals <sup>C</sup>
<b>Chronic Diseases</b>							
<b>Coronary Heart Disease</b>							
Coronary heart disease age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000	3	113.3	104.5	<a href="#">Better</a> ↓	100.8
Coronary heart disease age-adjusted hospitalization rate <sup>8</sup>	2008-10	Per 100,000	3	499.8	406.7	<a href="#">Better</a> ↓	
<b>Stroke</b>							
Stroke age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000	2	27.8	30.5	<a href="#">Better</a> ↓	33.8
Stroke age-adjusted hospitalization rate <sup>8</sup>	2008-10	Per 100,000	3	275.0	265.5	<a href="#">Better</a> ↓	
<b>Heart Failure</b>							
Heart failure age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000	1	5.9	7.6	<a href="#">No Trend</a> ↔	
Congestive heart failure age-adjusted hospitalization rate <sup>8</sup>	2008-10	Per 100,000	2	136.4	149.1	<a href="#">Better</a> ↓	
Adults with diagnosed hypertension <sup>1</sup>	2010	Percent	2	36.4%	34.3%		
Adults who have diagnosed high blood cholesterol <sup>1</sup>	2010	Percent	3	38.5%	38.6%		13.5%
Adults who had their cholesterol checked in the past five years <sup>1</sup>	2007	Percent	1	76.7%	73.3%		
<b>Lung Cancer</b>							
Lung cancer age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000	3	57.0	46.6	<a href="#">Better</a> ↓	45.5
Lung cancer age-adjusted incidence rate <sup>9</sup>	2006-08	Per 100,000	2	74.5	65.9	<a href="#">Better</a> ↓	
<b>Colorectal Cancer</b>							
Colorectal cancer age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000	3	14.9	14.3	<a href="#">Better</a> ↓	14.5
Colorectal cancer age-adjusted incidence rate <sup>9</sup>	2006-08	Per 100,000	2	42.6	42.0	<a href="#">Better</a> ↓	
Adults 50 years of age and older who received a sigmoidoscopy or colonoscopy in the past five years <sup>1</sup>	2010	Percent	3	50.7%	56.4%		
Adults 50 years of age and older who received a blood stool test in the past year <sup>1</sup>	2010	Percent	1	26.2%	14.7%		
<b>Breast Cancer</b>							
Breast cancer age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000	2	18.1	20.8	<a href="#">Better</a> ↓	20.6
Breast cancer age-adj.	2006-08	Per	3	107.7	110.9	<a href="#">Better</a>	

incidence rate <sup>9</sup>		100,000				↓	
Women 40 years of age and older who received a mammogram in the past year <sup>1</sup>	2010	Percent	<b>1</b>	63.3%	61.9%		



## Pasco County, Florida County Health Status Summary

Indicator	Year(s)	Rate Type	County Quartile <sup>A</sup> 1=most favorable 4=least favorable	County Rate	State Rate	County Trend <sup>B</sup> (click to view)	Healthy People 2020 Goals <sup>C</sup>
<b>Chronic Diseases (continued)</b>							
<b>Prostate Cancer</b>							
Prostate cancer age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000	<b>1</b>	13.5	17.5	Better ↓	21.2
Prostate cancer age-adjusted incidence rate <sup>9</sup>	2006-08	Per 100,000	<b>3</b>	129.1	130.8	Better ↓	
<b>Cervical Cancer</b>							
Cervical cancer age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000	<b>3</b>	2.8	2.7	No Trend ↔	2.2
Cervical cancer age-adjusted incidence rate <sup>9</sup>	2006-08	Per 100,000	<b>3</b>	9.0	8.9	Better ↓	
Women 18 years of age and older who received a Pap test in the past year <sup>1</sup>	2010	Percent	<b>3</b>	55.3%	57.1%		93%
<b>Melanoma</b>							
Melanoma age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000	<b>2</b>	2.8	2.8	Better ↓	2.4
Melanoma age-adjusted incidence rate <sup>9</sup>	2006-08	Per 100,000	<b>4</b>	21.8	17.6	Worse ↑	
<b>Chronic Lower Respiratory Diseases</b>							
Chronic lower respiratory diseases (CLRD) age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000	<b>3</b>	48.2	37.7	No Trend ↔	
CLRD age-adjusted hospitalization rate <sup>8</sup>	2008-10	Per 100,000	<b>3</b>	402.0	361.4	No Trend ↔	50.1
Adults who currently have asthma <sup>1</sup>	2010	Percent	<b>3</b>	10.2%	8.3%		
Asthma age-adjusted hospitalization rate <sup>8</sup>	2008-10	Per 100,000	<b>4</b>	896.9	755.1	Worse ↑	
<b>Diabetes</b>							
Diabetes age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000	<b>3</b>	25.4	19.6	No Trend ↔	65.8
Diabetes age-adjusted hospitalization rate <sup>8</sup>	2008-10	Per 100,000	<b>2</b>	2230.9	2198.0	Worse ↑	
Amputation due to diabetes age-adjusted hospitalization rate <sup>8</sup>	2008-10	Per 100,000	<b>2</b>	24.8	24.7	No Trend ↔	
Adults with diagnosed diabetes <sup>1</sup>	2010	Percent	<b>1</b>	8.5%	10.4%		





## Pasco County, Florida County Health Status Summary





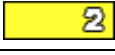






Indicator	Year(s)	Rate Type	County Quartile <sup>A</sup> 1=most favorable 4=least favorable	County Rate	State Rate	County Trend <sup>B</sup> (click to view)	Healthy People 2020 Goals <sup>C</sup>
<b>Communicable &amp; Infectious Diseases</b>							
Vaccine preventable diseases <sup>10</sup>	2008-10	Per 100,000	4	5.6	3.9	Worse ↑	
HIV cases reported <sup>10</sup>	2008-10	Per 100,000	2	11.8	31.8		
AIDS cases reported <sup>10</sup>	2008-10	Per 100,000	1	7.2	22.3	No Trend ↔	
HIV/AIDS age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000	2	2.8	6.5	No Trend ↔	3.7
TB cases reported <sup>10</sup>	2008-10	Per 100,000	2	1.8	4.6	Better ↓	1.0
Chlamydia cases reported <sup>10</sup>	2008-10	Per 100,000	1	198.5	387.0	Worse ↑	
Gonorrhea cases reported <sup>10</sup>	2008-10	Per 100,000	1	47.0	113.9	No Trend ↔	
Infectious syphilis cases reported <sup>10</sup>	2008-10	Per 100,000	3	1.4	5.8	Worse ↑	

<b>Maternal, Infant &amp; Young Child Health</b>							
Early prenatal care (care began 1st trimester) <sup>7, 13</sup>	2008-10	Percent	2	79.3%	78.1%		77.9%
Low birth weight births (births < 2500 grams) <sup>7</sup>	2008-10	Percent	3	8.3%	8.7%	Worse ↑	
Premature births (births < 37 weeks gestation) <sup>7</sup>	2008-10	Percent	1	12.3%	13.9%	No Trend ↔	11.4%
Multiple births <sup>7</sup>	2008-10	Percent	3	3.4%	3.2%	No Trend ↔	
Births to teens 15-19 <sup>7</sup>	2008-10	Rate per 1,000	1	35.1	37.0	Better ↓	
Repeat births to mothers 15-19 <sup>7</sup>	2008-10	Percent	1	15.9%	18.4%	Better ↓	
Infant death rate <sup>7</sup>	2008-10	Per 1,000 live births	2	5.8	6.9	No Trend ↔	6.0
Neonatal death rate <sup>7</sup>	2008-10	Per 1,000 live births	2	3.7	4.5	No Trend ↔	4.1
Postneonatal death rate <sup>7</sup>	2008-10	Per 1,000 live births	2	2.1	2.4	No Trend ↔	2.0
Fetal death ratio <sup>7</sup>	2008-10	Per 1,000 deliveries	1	5.5	7.2	No Trend ↔	5.6
Kindergarten children fully immunized <sup>11</sup>	2008-10	Percent	4	91.7%	90.8%	No Trend ↔	



## Pasco County, Florida County Health Status Summary

Indicator	Year(s)	Rate Type	County Quartile <sup>A</sup> 1=most favorable 4=least favorable	County Rate	State Rate	County Trend <sup>B</sup> (click to view)	Healthy People 2020 Goals <sup>C</sup>
<b>Unintentional Injuries</b>							

Unintentional injuries age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000		73.9	42.7	Worse 	36.0
Motor vehicle crash age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000		18.9	14.0	No Trend 	12.4
<b>Social and Physical Environment</b>							
Criminal homicide <sup>12</sup>	2008-10	Per 100,000		3.5	5.6	No Trend 	
Domestic violence offenses <sup>12</sup>	2008-10	Per 100,000		776.8	608.0	Better 	
Adults who currently have asthma <sup>1</sup>	2010	Percent		10.2%	8.3%		
Suicide age-adjusted death rate <sup>7</sup>	2008-10	Per 100,000		20.5	13.9	No Trend 	10.2

\* *Actual causes of death* are the major external (nongenetic) factors that contribute to death in the US, first identified by McGinnis and Foege in 1993. These three sets of behaviors each contribute to over 100,000 deaths annually in addition to their impact on morbidity, quality of life, and public health burden.

#### Data Sources

<sup>1</sup>Florida Department of Health, Bureau of Epidemiology, Florida BRFSS survey

<sup>2</sup>US Census Bureau

<sup>3</sup>US Department of Labor, Bureau of Labor Statistics

<sup>4</sup>Florida Department of Health, Division of Medical Quality Assurance

<sup>5</sup>Florida Agency for Health Care Administration, Certificate of Need Office

<sup>6</sup>Florida Department of Health, Office of Health Statistics and Assessment

<sup>7</sup>Florida Department of Health, Office of Vital Statistics

<sup>8</sup>Florida Agency for Health Care Administration (AHCA)

<sup>9</sup>University of Miami (FL) Medical School, Florida Cancer Data System

<sup>10</sup>Florida Department of Health, Division of Disease Control

<sup>11</sup>Florida Department of Health, Bureau of Immunization

<sup>12</sup>Florida Department of Law Enforcement

All Age-Adjusted rates are 3-year rates per 100,000 and are calculated using the 2000 Standard US Population. These rates also use July 1 Florida population estimates from the Florida Legislature, Office of Economic and Demographic Research.

<sup>A</sup>**County Quartiles** Quartiles in this report allow you to compare health data from one county to another in the state. Quartiles are calculated by ordering an indicator from most favorable to least favorable by county and dividing the list into 4 equal-size groups. In this report, a low quartile number (1) always represents more favorable health situations while fours (4) represent less favorable situations.

<sup>B</sup>**County Trends** As with rates, there is also random variation in the trend lines of these rates, so that a line that slopes upward may not represent a statistically significant increase, particularly if it is based on small numbers. For that reason, we test statistically to determine whether or not we can be at least 95 percent confident that what appears to be an increase or decrease is real, not just the result of random fluctuation. Trends only calculated for indicators with 12 or more years of data available.

#### Trend Values



Trend is getting better and is statistically significant



Trend is getting worse and is statistically significant



Trend is not statistically significant

Blank cell - Not enough data to compute a trend

<sup>13</sup>No trend available for entry into prenatal care due to a change in the measurement of this indicator in 2004. This renders data prior to 2004 incomparable to data from 2004 and forward.

#### <sup>C</sup>Healthy People 2020 Goals

Healthy People 2020 is a national health promotion and disease prevention initiative. Its goals are to increase the quality and years of healthy life and eliminate health disparities. More information available at: <http://www.healthypeople.gov>. Goals are not available for every indicator.

## **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 that public health systems can use to ensure the delivery of public health services. The DHHS defines the Local Public Health System to include all public, private, and voluntary entities, as well as individuals and informal associations that contribute to the delivery of public health services within a jurisdiction. The Local Public Health System Performance Assessment Instrument was principally developed by the National Association of County and City Health Officials (NACCHO) and the Centers for Disease Control and Prevention (CDC). The 10 Essential Public Health Services provide the fundamental framework for the NPHPSP instruments, by describing the public health activities that should be undertaken in all communities. The Core Public Health Functions Steering Committee developed the framework for the Essential Services in 1994. The Local Assessment Instrument is divided into ten sections – one for 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 health care when otherwise unavailable.
8. **Assure** a competent public and personal health care 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.

Local public health agencies (i.e. county health departments) are the natural leaders in the development of a cohesive local public health system. Local public health agencies have unique responsibilities to enable, assure, and enforce the provision of these essential services by entities within the local public health system. They assure an adequate statutory base for local public health activities, advocate with system partners for local policy changes to improve health, and assure that funding for public services meet the critical health needs of their populations. In addition, local public health agencies provide

important leadership in maintaining and improving the performance and capacity of local public health systems to provide appropriate public health services. The Pasco County Health Assessment members reviewed and discussed each of the ten essential services and activities related to each occurring in Pasco County. The members scored each service category by consensus, utilizing the recommended scoring levels provided by DHHS in the assessment instrument. The scoring methodology reflects a quartile scoring system in that activities that occur 0-25% of the time are considered with a “no” response; those that occur 26-50% of the time receive a “low partial” response; those that occur 51-75% of the time are considered as “high partial”; and those that occur 76-100% of the time are given a “yes” response.

The table below provides the overall score for each of the ten essential services, as determined by the group members during a face-to-face meeting in September 2011. It is important to remember that these scores consider the county’s complete public health/safety-net services system and are not limited to only those activities performed directly by the county health department.

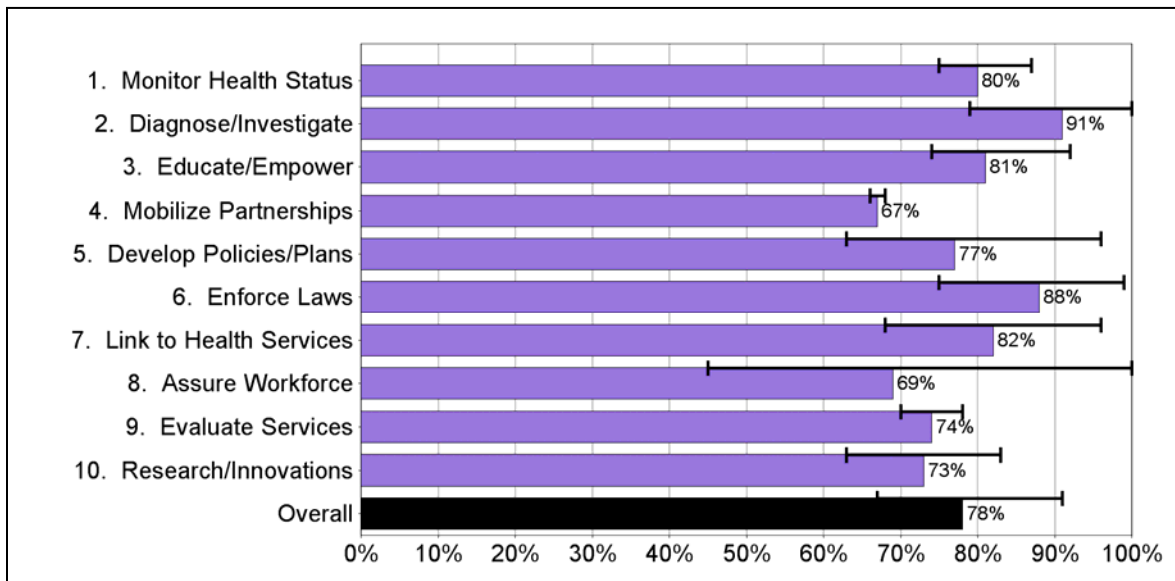
## **PERFORMANCE ASSESSMENT INSTRUMENT RESULTS**

### **How well did the system perform the ten Essential Public Health Services?**

**Table 1:** Summary of performance scores by Essential Public Health Service (EPHS)

<b>EPHS</b>		<b>Score</b>
1	Monitor Health Status To Identify Community Health Problems	80
2	Diagnose And Investigate Health Problems and Health Hazards	91
3	Inform, Educate, And Empower People about Health Issues	81
4	Mobilize Community Partnerships to Identify and Solve Health Problems	67
5	Develop Policies and Plans that Support Individual and Community Health Efforts	77
6	Enforce Laws and Regulations that Protect Health and Ensure Safety	88
7	Link People to Needed Personal Health Services and Assure the Provision of Health Care when Otherwise Unavailable	82
8	Assure a Competent Public and Personal Health Care Workforce	69
9	Evaluate Effectiveness, Accessibility, and Quality of Personal and Population-Based Health Services	74
10	Research for New Insights and Innovative Solutions to Health Problems	73
Overall Performance Score		78

**Figure 1:** Summary of EPHS performance scores and overall score (with range)



**Table 1** (above) provides a quick overview of the system's performance in each of the 10 Essential Public Health Services (EPHS). Each EPHS score is a composite value determined by the scores given to those activities that contribute to each Essential Service. These scores range from a minimum value of 0% (no activity is performed pursuant to the standards) to a maximum of 100% (all activities associated with the standards are performed at optimal levels).

**Figure 1** (above) displays performance scores for each Essential Service along with an overall score that indicates the average performance level across all 10 Essential Services. The range bars show the minimum and maximum values of responses within the Essential Service and an overall score.

## **FORCES OF CHANGE ASSESSMENT**

The Forces of Change assessment is intended to gain information and feedback from community representatives regarding current and anticipated trends, factors, and events that may impact the health of the community. The assessment generates responses to two primary questions:

1. What is occurring or might occur that affects the health of our community or the local public health system?
2. What specific threats or opportunities are generated by these occurrences?

The Pasco County Health Assessment group members considered and discussed forces by three major types:

- Trends are patterns over time such as disease/mortality rates, patient migration patterns, or cultural changes that influence consumers attitudes, behaviors, and beliefs related to health;
- Factors are discrete elements of information such as population demographic data, geographic features within the community, existing policies, or capacity of available resources; and
- Events are single occurrences such as the opening or closure of a clinic site or hospital, a natural disaster, pandemic, or the passage of new legislation.

The members were encouraged to consider a variety of perspectives when identifying potential forces. Specific types of forces discussed by the group included:

- **Social** forces such as population demographics, cultural norms, and violence/crime/safety
- **Economic** forces such as changes in employment/income, program funding levels, and the stability of industry and trade within the region
- **Government/Political** forces such as policy/legislation, budgeting, and advocacy
- **Community** generated forces such as community initiatives and mobilization efforts
- **Environmental** forces such as development, zoning and land use, transportation, and disaster planning
- **Educational** forces occurring within public schools, colleges/universities, and adult education programs
- **Science/Technology** forces such as healthcare advances, information technology, and communications
- **Ethical/Legal** forces such as privacy and end of life issues

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

### Summary of Results

FORCES		IMPACT
THEMES	THREATS	OPPORTUNITIES
Shifts in the economy and workforce environment	Funding/budget cuts (financial barriers, state fees, property tax); Staff shortages; Poverty rates	Communications
Environmental changes related to facilities and infrastructure	Limited space for growth; 3 area codes; Limited public transportation; Lack of services for uninsured & underinsured	Marketing
Environmental change, natural and pathogenic	Aging population (change in demographics? Growth in number of senior citizens?); Language barriers	Measuring impact
Political environment and pending elections	Competition between agencies for funds; Agencies taking programs	Competition from private sector
Populations dynamics	Client attitudes; Acceptance/ownership of uninsured needs	Competition among agencies
Social Climate	Resistance to change; No follow through with previous sessions	Growth of county
Technological Innovation	Technology advancing too fast	Federal push for school health clinics requires partnerships
		Technology
		Community participation in grant applications, strategic planning



## **COMMUNITY STRENGTHS AND THEMES**

Another 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 their perceptions of their own health, access to healthcare services, and the healthiness of their community overall. 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.

Community feedback was solicited through a paper survey of residents through a wide variety of venues across the county during 2008 and 2009 and community partner feedback was solicited in 2008.

Results of the resident and community partner feedback are included in the following pages.

## **COMMUNITY RESIDENT ASSESSMENT**

The community resident survey was made available at different Pasco County health access points as identified by Pasco County Health Department officials. In all, 416 surveys were submitted for this project. Survey data were retained on only those surveys that were fully completed. Therefore, 235 incomplete surveys were discarded from the analysis, leaving a complete data set of 181 for analysis. Survey question responses indicate moderate access to health care with difficulty in affordability and subsequent utilization by the residents responding to the survey.

Consumers were asked to report seven demographic variables. Of those responding, the prevailing age range was 18 to 44 years of age. The majority of respondents reported being Female (85.6%), White Non-Hispanic (81.8%). Consumers in the SES range of Less than \$15,000 represented 39.8% of respondents. Survey distribution in this county was flawed in that a representative sample of county residents was not attained. Therefore the results of this survey cannot be generalized to the population of Pasco County, Florida. Table 1 provides basic demographic information for the survey sample.

<i>Table 1 Demographic Information for Health Consumer Survey Respondents</i>	
<i>Gender</i>	
Male	14.4%
Female	85.6%
<i>Race</i>	
White/Non-Hispanic	81.8%
Black/African American Non-Hispanic	5.5%
Hispanic/Latino	11.3%
Other	1.7%
<i>Age</i>	
18-44	75.7%
45-65	19.9%
65+	4.4%
<i>Income</i>	
Less than \$15,000	39.8%
\$15,000-\$24,999	14.9%
\$25,000,-\$34,999	12.7%
\$35,000-\$49,999	9.9%
\$50,000 and above	22.6%
<i>Number in Household</i>	
Less than 4	59.7%
4 or More	40.3%
<i>Status</i>	
Employed	46.4%
Self-employed	7.2%
Out of Work 1+ year	9.4%
A Homemaker	12.2%
A Student	19.9%
Retired	3.9%
Unable to Work	6.1%

## Summary of Results

The majority of consumers responding to the survey indicated that they have one primary doctor or clinic, that they have received their annual exams, and that they have transportation to get to the doctor's office or clinic easily. Slightly more than one-half of the respondents indicated they have one primary dentist and have received a dental exam during the past year. Slightly more than one-third of the respondents indicated that they have health insurance, and that coverage was made available to them through their employer. Despite coverage, respondents indicated that it was still difficult for them to afford the medical care they or their family needed. Between one-third and one-half of the respondents indicated that they had knowledge of how to become healthier, about programs to improve health, where to go for substance abuse treatment, mental health services or Hospice care. Slightly more than one-third indicated they were satisfied with the quality of health care in their community.

Table 2 provides overall survey results for each survey question.

Table 2 <i>Percent response to questions regarding Access, Barriers to Health Care, and Patient Adherence</i>					
Survey Question	Strongly Agree	Somewhat Agree	Neither	Somewhat Disagree	Strongly Disagree
1. I have one doctor or clinic that I go to for my routine health care.	<b>59.7%</b>	14.4%	9.4%	7.2%	9.4%
2. I have had a regular physical exam during the past year.	<b>58.0%</b>	11.6%	8.8%	5.0%	16.6%
3. My doctor's office or clinic is close to my home.	<b>42.0%</b>	28.2%	9.4%	7.7%	12.7%
4. I have a car or other transportation to easily get to the doctor's office or clinic.	<b>74.6%</b>	16.0%	2.8%	1.7%	5.0%
5. A family member or I are unable to get health care.	21.0%	8.8%	10.5%	6.6%	<b>53.0%</b>
6. I have one dentist that I go to for my dental care.	<b>41.4%</b>	7.2%	17.1%	7.2%	27.1%
7. I have had a dental exam or cleaning in the past year.	<b>39.2%</b>	5.0%	8.8%	7.7%	<b>39.2%</b>
8. My dentist's office is close to my home.	<b>33.1%</b>	12.7%	16.0%	6.6%	31.5%
9. A family member or I received dental care during the past year.	<b>47.0%</b>	11.6%	6.1%	3.9%	31.5%

Table 2

*Percent response to questions regarding Access, Barriers to Health Care, and Patient Adherence*

Survey Question	Strongly Agree	Somewhat Agree	Neither	Somewhat Disagree	Strongly Disagree
10. A family member or I are unable to get dental care we need.	29.3%	6.1%	11.6%	9.4%	<b>43.6%</b>
*CS. 1. My family ate less or skipped meals because of not enough money for food.	9.4%	13.3%	11.6%	9.9%	<b>56.4%</b>
*CS. 2. I know where to go for food assistance in my community.	<b>37.6%</b>	15.5%	17.1%	8.3%	21.5%
*CS. 3. I am satisfied with the quality of life in our community (safety and well-being).	<b>38.1%</b>	28.2%	16.0%	11.0%	6.6%
11. I have health insurance that covers my health care needs.	<b>44.8%</b>	18.8%	9.9%	4.4%	22.1%
12. All of my family's health care needs are covered by health insurance.	<b>37.6%</b>	19.3%	6.6%	8.3%	28.2%
13. Health insurance is available through my job.	32.0%	7.7%	17.1%	3.9%	<b>39.2%</b>
14. I can afford to buy health insurance through my job.	22.1%	8.8%	16.0%	7.2%	<b>45.9%</b>
15. I do not have health insurance.	25.4%	1.1%	5.5%	8.3%	<b>59.7%</b>
16. I do not want health insurance.	7.2%	1.1%	6.6%	5.5%	<b>79.6%</b>
17. I have tried to get health insurance for my family or myself and could not get it.	17.7%	10.5%	14.4%	5.5%	<b>51.9%</b>
18. A family member or I had an illness that was not treated because we had no insurance.	14.9%	10.5%	14.9%	5.5%	<b>54.1%</b>
19. I know where I can go for health care even if I don't have insurance.	<b>28.2%</b>	19.9%	13.3%	8.8%	29.8%
20. I can afford to buy the medicine my doctor tells me a family member or I need to take.	<b>29.3%</b>	21.5%	14.9%	11.0%	23.2%

Table 2

Percent response to questions regarding Access, Barriers to Health Care, and Patient Adherence

Survey Question	Strongly Agree	Somewhat Agree	Neither	Somewhat Disagree	Strongly Disagree
21. I can afford the health care I believe my family or I need.	25.4%	14.9%	14.9%	12.7%	<b>32.0%</b>
22. My doctor or clinic helps me get medicine my family or I need that we cannot afford.	19.9%	13.3%	25.4%	11.0%	<b>30.4%</b>
23. I have used someone else's medicine because I could not buy my own.	8.8%	10.5%	12.2%	6.1%	<b>62.4%</b>
24. In general I am in good health.	<b>47.5%</b>	28.2%	12.2%	4.4%	7.7%
25. My doctor has told me that I have a long-term or chronic illness.	12.7%	6.6%	14.9%	5.5%	<b>60.2%</b>
26. My doctor has told me that I need medicine to control my chronic illness.	16.6%	7.7%	14.9%	5.0%	<b>55.8%</b>
27. I take the medicine my doctor tells me to take to control my chronic illness.	14.9%	7.7%	26.0%	6.6%	<b>44.8%</b>
28. I know where to go to get information on health care and staying healthy.	<b>42.5%</b>	23.8%	19.3%	7.7%	6.6%
29. I know about programs in my community that can help me become healthier.	<b>35.9%</b>	16.0%	21.5%	12.7%	13.8%
30. I know where to go for mental health services in my community.	<b>30.9%</b>	13.8%	17.7%	16.0%	21.5%
31. I know where to go for substance abuse services in my community.	<b>32.0%</b>	11.6%	20.4%	13.3%	22.7%
32. I know how to get end-of-life care or hospice care in my community.	<b>34.8%</b>	18.8%	19.9%	7.7%	18.8%
33. I am satisfied with the level of health care available in community.	<b>33.7%</b>	16.6%	23.8%	13.8%	12.2%

\*Note: C.S. (#) indicates county specific questions generated by the host county (Pasco)

## COMMUNITY PARTNER ASSESSMENT

The community partner assessment was created by a subcommittee with the purpose of gathering information and perceptions on the concerns, opinions, thoughts, and suggestions regarding the community's health status. The first half of the survey was comprised of 10 questions that were based on the Likert scale, where one was low and five was high. The second half of the survey asked open-ended, unstructured questions that would provide feedback and insight into the issues of importance. Interviewees were selected from diverse segments of the community in an attempt to include the broadest participation from these community leaders in the assessment.

### Summary of Results

42.86% of the interviewed community leaders think economic opportunity in Pasco County is below average or low. Question 10 was asked to see how community leaders feel about fairly dispersed resources in the County. Although 40.63 % of respondents indicated that it is average, another 40.63% said it is below average or low (See Figure 2). On the other hand, community leaders expressed that their perceived level of influence is above average.

Question #	High 5	Above Ave 4	Average 3	Below Ave 2	Low 1	Response Average
1	5.71% (2)	<b>42.86% (15)</b>	<b>42.86% (15)</b>	8.57% (3)	0% (0)	3.46
2	11.43% (4)	31.43% (11)	<b>37.14% (13)</b>	20% (7)	0% (0)	3.34
3	2.94% (1)	38.24% (13)	<b>41.18% (14)</b>	17.65% (6)	0% (0)	3.26*
4	8.82% (3)	<b>41.18% (14)</b>	35.29% (12)	11.76% (4)	2.94% (1)	3.41*
5	5.71% (2)	14.29% (5)	<b>37.14% (13)</b>	31.43% (11)	11.43% (4)	2.71
6	8.57% (3)	37.14% (13)	<b>40% (14)</b>	11.43% (4)	2.86% (1)	3.37
7	0% (0)	<b>45.71% (16)</b>	37.14% (13)	14.29% (5)	2.86% (1)	3.25
8	14.29% (5)	<b>45.71% (16)</b>	34.29% (12)	2.86% (1)	2.86% (1)	3.66
9	5.71% (2)	22.86% (8)	<b>54.29% (19)</b>	14.29% (5)	2.86% (1)	3.14
10	3.13% (1)	15.63% (5)	<b>40.63% (13)</b>	34.38% (11)	6.25% (2)	2.75*

Total Respondents: 35 \*Indicates not all 35 responded (#): number of people answered

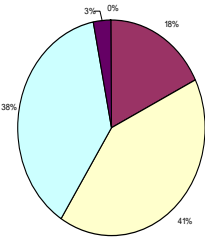
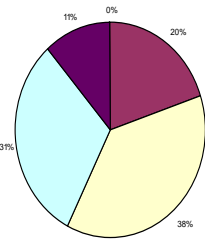
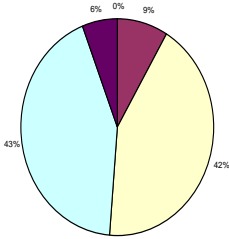
**Table 2: Descriptive Analysis with questions identified**

Question #	Description	N	Mean	Standard Dev.
1	Quality of life	35	3.46	0.74
2	Meet needs	35	3.34	0.94
3	Meet needs of children	34	3.26	0.79
4	Meet needs of elderly	34	3.41	0.92
5	Level of economic opportunity	35	2.71	1.05
6	Safe	35	3.37	0.91
7	Networks of support	35	3.26	0.82
8	Perceived level of influence	35	3.66	0.87
9	Efficiently resources used	35	3.14	0.85
10	Fairly resources dispersed	32	2.75	0.92

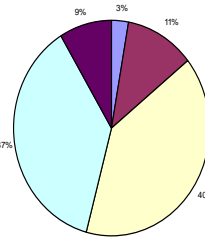
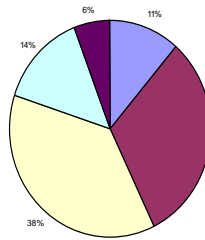
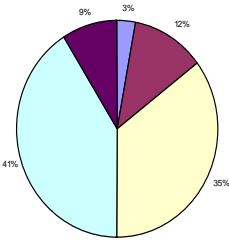
N: Total number of people who answered

**Figure 2. Pie Diagrams for Quantitative Survey Questions**

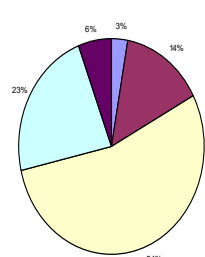
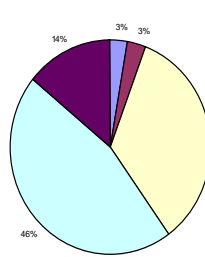
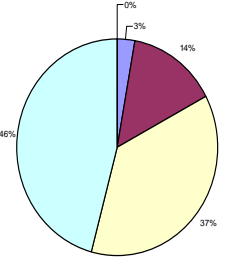
1) Quality of life in the Pasco County      2) Pasco County Health Care System meet the needs      3) Pasco County Health Care System meet the needs of Children



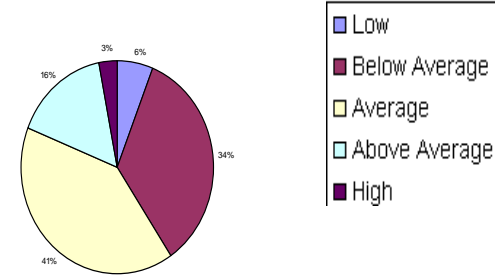
4) Pasco County Health Care System meet the needs of the elderly      5) Level of Economic Opportunities      6) Safety



7) Availability of networks of support during times of need      8) Perceived level of influence in making Pasco county a better place to live      9) Pasco county resources are efficiently used to improve the quality of life



10) How fairly Pasco county resources are dispersed among the residents



■ Low  
■ Below Average  
■ Average  
■ Above Average  
■ High

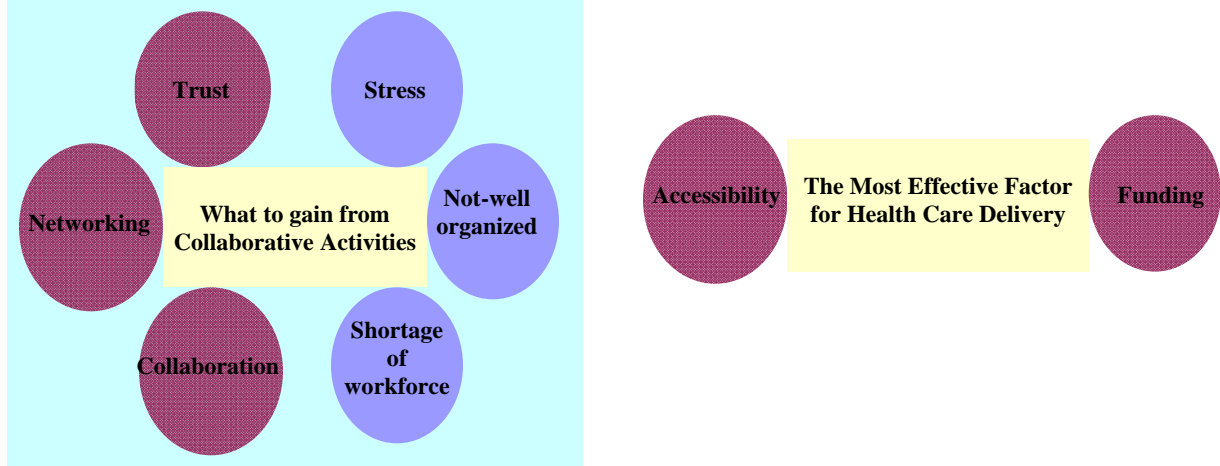


The most commonly mentioned responses for Question 11 to 17 are listed in Table 4.

**Table 4. Responses for qualitative questions (Q11-17)**

Q	Description	Common Responses
11	What to gain from collaborative activities	Trust, Networking, Collaboration (only 3 cons- not well coordinated, stress, shortage of workforce)
12	Major health concerns	Lack of access, uninsured, obesity, smoking, diabetes
13	The biggest obstacle to accessing health care	Uninsured, transportation, cost, communication (what is available)
14	One thing needed to be improved	Public transportation, better partnerships, family centered activities
15	Most important factor for health care delivery	Accessibility, funding
16	Most effective service	Education, prevention
17	Motives to get more involved	Collaboration, money

**Figure 3. The most commonly mentioned responses for qualitative questions**



\* Purple circles represent negative aspects

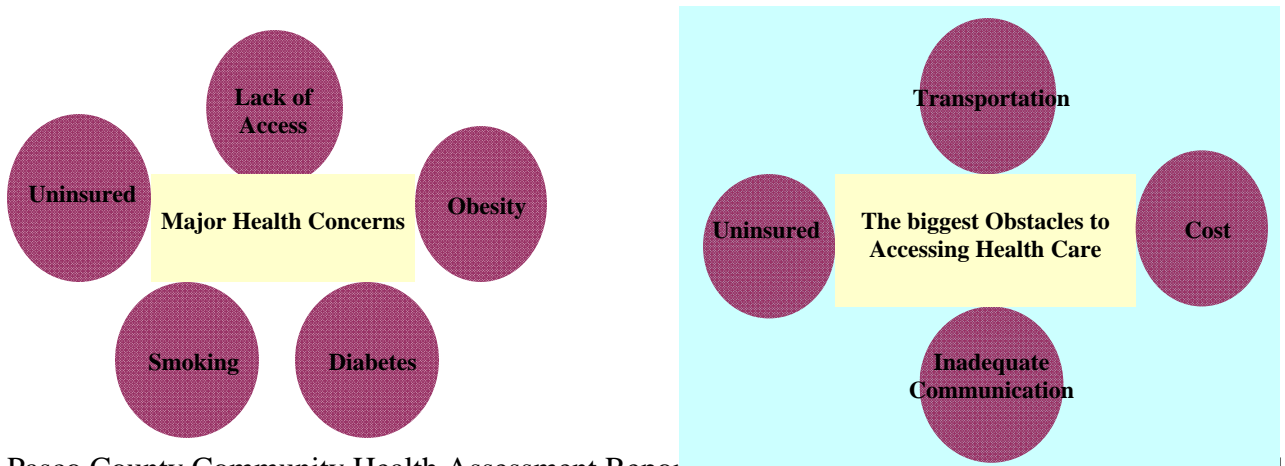
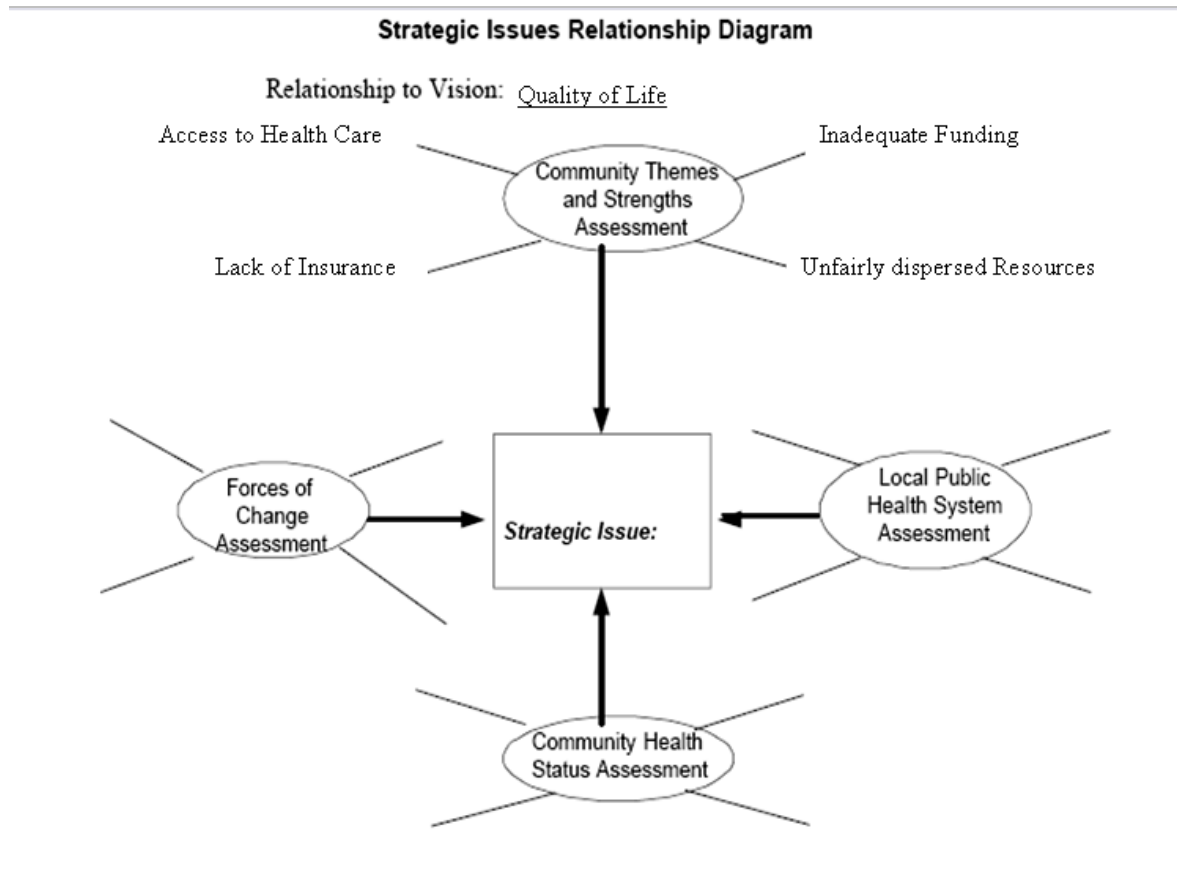


Figure 4 summarizes strategic issues found through three assessments. Although the number of interviewed community leaders was only 35, the overall findings through the CTSA are very valuable for Pasco County's CTSA. We believe that the next step of MAPP can be conducted to complete the process.

**Figure 4. Strategic Issues Relationship Diagram: it summarizes issues in the Pasco County we have found through our assessments**



## SUMMARY

The Pasco County Health Assessment meetings were held from January 2011-September 2011 as part of the Pasco County Health Needs Assessment. Information provided in the previous chapters of this report was presented to members of the Pasco County Health Assessment group. In addition the group discussed the following summary of issues.

Community Health Issues Matrix - Pasco County				
Synthesis of Assessment Results				
	Chronic Diseases and Conditions	Injuries	Maternal/Child Health	Access to Care and Services
Morbidity, Mortality Data	Morbidity and mortality: Heart disease, cancers (lung, colorectal, skin), diabetes, CLRD	Suicide	White, non-Hispanic infant mortality	Ambulatory care sensitive conditions: asthma hospitalizations, CLRD hospitalizations
	Enteric diseases	Poisoning deaths	Multiple births	Few primary care providers
		Motor vehicle crash deaths	Teen pregnancy	Few dentists
		Motor vehicle crash injuries	Increase in C-section deliveries	High uninsured rate
		Domestic violence injuries	Enteric diseases	
Contributing Behaviors	Adult smoking	Substance abuse	Late entry into prenatal care	Low health literacy
	High cholesterol	Mental health issues	Breastfeeding	Mental health issues
	Obesity		Substance abuse	Low flu immunization rate
	Poor nutrition (<5 servings of fruit/vegetables)		Low health literacy	
	Low health literacy		Mental health issues	
Socio-economic factors, social determinants	Air pollution	Safety	Number of children in poverty	High unemployment rate
	Food insecurity		Low number of college grads	Lack of transportation
	High unemployment rate		High unemployment rate	Unequal distribution of resources
	Low number of college grads			High care costs (medical, dental) for clients
				High costs, staffing issues for providers
Community Perceptions about health	Reported poor/fair general health	Reported poor/fair general health	Reported poor/fair general health	Lack of affordable health insurance
	Reported poor physical health days	Reported poor physical health days	Reported poor physical health days	Don't know where to go for services
	Reported mentally unhealthy days	Reported mentally unhealthy days	Reported mentally unhealthy days	
Cross-cutting Challenges and Opportunities	Challenges			Opportunities
	Limited space for growth	Staff shortages	Agencies taking programs	Communications
	Funding/budget cuts (financial barriers, state fees, property tax)	Aging population (change in demographics? Growth in number of senior citizens?)	Acceptance/ownership of uninsured needs	Marketing
	Resistance to change (who?)	Poverty rates	Technology advancing too fast	Measuring impact
	3 area codes	Limited public transportation	Lack of services for uninsured & underinsured	Competition from private sector
	Client attitudes	Language barriers	Competition between agencies for funds	Competition among agencies
			No follow through with previous sessions	Growth of county
				Federal push for school health clinics requires partnerships
				Technology
			Community participation in grant applications, strategic planning	

## **KEY HEALTH ISSUES**

The Pasco County Health Assessment group discussed key health issues which included maternal and child health issues, unintentional injuries, access to care and chronic diseases and condition. Group members then collapsed and prioritized these key health issues while keeping focus on substance abuse issues that impact both areas. The group plans to move forward with developing recommendations and action steps for Access to Care and Chronic Diseases and Conditions. The group will continue to meet and work on a Community Health Improvement plan for these areas.

### **We would like to thank the following agencies that participated in this process:**

All Children's Hospital	BayCare Behavioral Health
Pasco County Health Department	Rasmussen College
Pasco County Extension	Premier Community Health Care Group
ASAP - Alliance for Substance Abuse Prevention	Pasco County Parks and Recreation
Gulfcoast North AHEC, Inc.	Good Samaritan Health Clinic, Inc.
Private Practitioner	Pasco County Libraries
Bureau of Community Health Assessment	All Children's Specialty Care Center of Pasco
Sertoma Speech & Hearing Foundation	Department of Juvenile Justice
Pasco Sheriff's Office	Pasco Sheriff's Office
Regional Medical Center Bayonet Point	Pasco Kids First
Suncoast Health Council, Inc.	Morton Plant North Bay Hospital
Healthy Start Coalition of Pasco, Inc.	Community Hospital
American Red Cross	Elderly Nutrition
Pasco County Schools	Department of Children and Families