2009 PRC Community Health Survey

EXECUTIVE REPORT

East Central Florida
Brevard, Orange, Osceola & Seminole Counties

Prepared For
The Health Council of East Central Florida

**Major Sponsors:**
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Winter Park Health Foundation

**Additional Sponsors:**
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Osceola County Health Department
Parrish Medical Center
Seminole County Health Department
& SCHD Tobacco Program
Seminole Prevention Coalition
Senior Resource Alliance

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INTRODUCTION

This Community Health Survey is a systematic, data-driven approach to determining the health status, behaviors and needs of residents in a defined geographical region. Subsequently, this information will be used in conjunction with other health data to formulate strategies to improve community health and wellness.
Methodology

2009 PRC Community Health Survey

Survey Instrument

The survey instrument used for this study is based largely on the Centers for Disease Control and Prevention (CDC) Behavioral Risk Factor Surveillance System (BRFSS), as well as various other public health surveys, and customized questions addressing specific areas of concern. The survey is also similar to surveys administered in the region in 1999 and 2004.

Community Defined for This Survey

The study area for this effort is defined as East Central Florida, Florida, including Brevard, Orange, Osceola and Seminole Counties.

Sample Approach & Design

A precise and carefully executed methodology is critical in asserting the validity of the results gathered in the 2009 PRC Community Health Survey. Thus, to ensure the best representation of the population surveyed, a telephone interview methodology was employed (identical to the approach used in both the 1999 and 2004 studies). The primary advantages of telephone interviewing are timeliness, efficiency and random selection capabilities.
The sample design used for this effort consisted of a random sample of 1,600 individuals aged 18 and older in the defined communities. A stratified sample was used, wherein 400 interviews were conducted in each of the four counties. Once these data were collected, the sample was weighted in proportion to the actual population distribution at the ZIP Code and county levels so that area estimates reflect the area as a whole. Population estimates were based on census projections of adults aged 18 and over provided in the latest ESRI BIS Demographic Portfolio.

All administration of the surveys, data collection and data analysis was conducted by Professional Research Consultants, Inc. (PRC).

Sampling Error

For statistical purposes, the maximum rate of error associated with a sample size of 1,600 respondents is ±2.5% at the 95 percent level of confidence.

Expected Error Ranges for a Sample of 1,600 Respondents at the 95 Percent Level of Confidence

Note: The "response rate" (the percentage of a population giving a particular response) determines the error rate associated with that response. A "95 percent level of confidence" indicates that responses would fall within the expected error range on 95 out of 100 trials.

Example 1: For example, if 10% of the sample of 1,600 respondents answered a certain question with a "yes," it can be asserted that between 8.5% and 11.5% (10% ± 1.5%) of the total population would offer this response.

Example 2: If 50% of respondents said "yes," one could be certain with a 95 percent level of confidence that between 47.5% and 52.5% (50% ± 2.5%) of the total population would respond "yes" if asked this question.

Sample Characteristics

To accurately represent the population studied, PRC strives to minimize bias through application of a proven telephone methodology and random-selection techniques. And, while this random sampling of the population produces a highly representative sample, it is a common and preferred practice to “weight” the raw data to improve this representativeness even further. This is accomplished by adjusting the results of a random sample to match the demographic characteristics of the population surveyed (poststratification), so as to eliminate any naturally occurring bias. Specifically, once the raw data are gathered, respondents are examined by key demographic characteristics (namely gender, age, race, ethnicity, and poverty status) and a statistical application package applies weighting variables that produce a sample
which more closely matches the population for these characteristics. Thus, while the integrity of each individual’s responses is maintained, one respondent’s responses may contribute to the whole the same weight as, for example, 1.1 respondents. Another respondent, whose demographic characteristics may have been slightly oversampled, may contribute the same weight as 0.9 respondents.

The following chart outlines the characteristics of the sample for key demographic variables, compared to actual population characteristics revealed in census data. [Note that the sample consisted solely of area residents aged 18 and older; data on children were given by proxy by the person most responsible for that child’s healthcare needs, and these children are not represented demographically in this chart.]

**Population and Sample Characteristics**
(East Central Florida, 2009)

<table>
<thead>
<tr>
<th></th>
<th>Actual Population</th>
<th>Weighted Survey Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>49.2%</td>
<td>49.2%</td>
</tr>
<tr>
<td>Women</td>
<td>50.8%</td>
<td>50.8%</td>
</tr>
<tr>
<td>18 to 39</td>
<td>39.9%</td>
<td>39.9%</td>
</tr>
<tr>
<td>40 to 64</td>
<td>42.8%</td>
<td>42.8%</td>
</tr>
<tr>
<td>65+</td>
<td>17.3%</td>
<td>17.3%</td>
</tr>
<tr>
<td>White</td>
<td>62.5%</td>
<td>63.2%</td>
</tr>
<tr>
<td>Black</td>
<td>13.4%</td>
<td>13.2%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>18.5%</td>
<td>18.3%</td>
</tr>
<tr>
<td>&lt;Poverty</td>
<td>10.5%</td>
<td>10.7%</td>
</tr>
</tbody>
</table>

**Sources:**
• ESRI BIS Demographic Portfolio.
• 2009 PRC Community Health Survey, Professional Research Consultants.

**Notes:**
• Hispanic can be of any race.
• White and African American sample percentages exclude Hispanic respondents who did not offer a race response.

Further note that the poverty descriptions and segmentation used in this report are based on administrative poverty thresholds determined by the U.S. Department of Health & Human Services. These guidelines define poverty status by household income level and number of persons in the household (e.g., the 2008 guidelines place the poverty threshold for a family of four at $21,200 annual household income or lower). In sample segmentation: “<FPL” (or “<Federal Poverty Level”) refers to community members living in a household with defined poverty status; “100-199% FPL” includes those households living just above the poverty level, earning up to twice the poverty threshold; and “200%+ FPL” refers to households with incomes more than twice the poverty threshold defined for their household size.

The sample design and the quality control procedures used in the data collection ensure that the sample is representative. Thus, the findings may be generalized to the total population of community members in East Central Florida with a high degree of confidence.
Benchmark Data

Greater Orlando/East Central Florida Trends

Note also that, for comparative purposes, survey findings from the 1999 and 2004 surveys (conducted in the region by PRC) are included where possible and applicable throughout the report. Since Brevard County was not surveyed in 1999, two overall areas are calculated: one titled Greater Orlando (comprised of Orange, Osceola, and Seminole Counties), and the full total sample, entitled East Central Florida (comprised of all four counties combined).

Florida Risk Factor Data

Statewide risk factor data are provided where available as an additional benchmark against which to compare local findings. These data are reported in the most recent BRFSS (Behavioral Risk Factor Surveillance System) Summary Prevalence Reports published by the Centers for Disease Control and Prevention and the U.S. Department of Health & Human Services.

Nationwide Risk Factor Data

Nationwide risk factor data, which are also provided in comparison charts, are taken from the 2008 PRC National Health Survey. The methodological approach for the national study is identical to that employed in this survey, and these data may be generalized to the U.S. population with a high degree of confidence.

Healthy People 2010

Healthy People 2010: Understanding and Improving Health is part of the Healthy People 2010 initiative that is sponsored by the U. S. Department of Health & Human Services. Healthy People 2010 outlines a comprehensive, nationwide health promotion and disease prevention agenda. It is designed to serve as a roadmap for improving the health of all people in the United States during the first decade of the 21st century.

Like the preceding Healthy People 2000 initiative—which was driven by an ambitious, yet achievable, 10-year strategy for improving the nation’s health by the end of the 20th century—Healthy People 2010 is committed to a single, overarching purpose: promoting health and preventing illness, disability and premature death.
Summary of Survey Findings

Comparison With National Benchmarks

The following lists survey indicators which vary from national findings to a statistically significant degree; these are categorized below as either favorable or unfavorable comparisons.

FAVORABLE COMPARISONS

- Ratings of Personal Health
- Stroke Prevalence
- Cholesterol Screening
- Colorectal Cancer Screening
- Asthma Prevalence
- Seat Belt Usage
- Arthritis/Rheumatism
- Activity Limitations
- HIV Testing
- Depressed Persons Seeking Help
- Nutrition Advice From Health Professionals
- Weight Loss Attempts
- Meeting Physical Activity Limitations (esp. Vigorous Physical Activity)
- Tobacco Smoke in the Home
- ER Utilization
- Dental Care (Adults)
- Perceptions of Healthcare

UNFAVORABLE COMPARISONS

- High Blood Cholesterol & Actions to Control HBC
- Skin Cancer Prevalence
- Senior Flu Shots
- Vegetable Consumption
- Overall Alcohol Use & Substance Abuse Treatment
- Smoking Cessation Attempts
- Children's Dental Care
Comparison With Healthy People 2010

Several survey indicators can be compared with the national health objectives set forth in *Healthy People 2010: Understanding and Improving Health*. The items below illustrate those indicators for which East Central Florida currently meets established objectives, and those for which it has yet to meet.

**OBJECTIVES MET**

- Cholesterol Screening
- Sigmoidoscopy/Colonoscopy Testing
- Mammograms
- Vigorous Physical Activity
- Dental Care (Adults & Children)

**OBJECTIVES UNMET**

- High Blood Pressure & Actions to Control HBP
- High Blood Cholesterol
- Blood Stool Testing
- Pap Smears
- Seat Belt Usage
- Flu Shots & Pneumonia Vaccination (Seniors & High-Risk Individuals)
- Fruit & Vegetable Consumption
- Overweight & Obesity
- Leisure-Time & Moderate Physical Activity
- Binge Drinking
- Cigarette Smoking & Cessation Attempts
- Health Insurance Coverage
- Difficulties Accessing Healthcare
- Specific Source of Ongoing Care
East Central Florida Trends: 2004-2009

Compared to findings from a similar survey conducted in East Central Florida in 2004, there have been statistically significant changes in several health indicators. These are outlined below.

FAVORABLE TRENDS
- Blood Pressure & Cholesterol Screening
- Overall Cardiovascular Risk
- Blood Stool Testing
- Flu Shots for High-Risk Individuals (Other Than 65+)
- Depressed Persons Seeking Help
- Seat Belt Usage
- Vegetable Consumption
- Weight Loss Attempts
- Moderate Physical Activity
- Chronic Alcohol Use
- Cigarette Smoking
- Health Insurance Coverage (Adults & Children)
- ER Utilization
- Children’s Routine Medical Care
- Dental Care (Adults)

UNFAVORABLE TRENDS
- High Blood Cholesterol
- Overweight & Obesity
- Vigorous Physical Activity
- Drinking & Driving/Riding
- Cost/Insurance Difficulties Accessing Child’s Healthcare
- Language/Cultural Barriers to Access
- Improper Prescription Use
Areas Of Opportunity
For Community Health Improvement

The following “health priorities” represent recommended areas of intervention, based on the information gathered through this Community Health Survey and the guidelines set forth in Healthy People 2010. From these data, opportunities for health improvement exist in the area with regard to the following health areas (see also the summary tables presented in the following section). These areas of concern are subject to the discretion of area providers, the steering committee, or other local organizations and community leaders as to actionability and priority.

Regional-Level Areas of Opportunity

Death & Disease
- High Blood Cholesterol & Actions to Control HBC
- Skin Cancer Prevalence
- Senior Flu Shots

Modifiable Health Risks
- Overall Alcohol Use & Substance Abuse Treatment
- Improper Prescription Use
- Drinking & Driving/Riding
- Vegetable Consumption
- Overweight & Obesity
- Vigorous Physical Activity
- Smoking Cessation Attempts

Access to Healthcare Services
- Cost/Insurance Difficulties
- Accessing Child’s Healthcare
- Language/Cultural Barriers to Access
- Children’s Dental Care
County-Specific Areas of Opportunity

In addition to the regional-level areas of opportunity outlined above, the following represent areas of opportunity specific to the counties within East Central Florida.

Brevard County
- Arthritis/Rheumatism Prevalence
- Cancer Prevalence (including Skin Cancer)
- Blood Stool Testing
- Activity Limitations
- Perceptions of the Dangers of Secondhand Smoke
- Overall Health Status
- Chronic Drinking

Orange County
- Medical Recommendations to Quit Smoking

Osceola County
- Health Insurance Coverage (Adults & Children)
- Difficulty Accessing Healthcare Service (Adults)
  - Physician Availability
  - Cost of Doctor Visits
  - Cost of Prescriptions (Adults & Children)
  - Lack of Transportation
  - Inconvenient Office Hours
  - Language/Cultural Barriers
- Improper Prescription Use
- Specific Source of Ongoing Medical Care
- Perceptions of Local Healthcare Services
- Utilization of Healthy Start Coalition Services
- Overall Mental Health Status & Access to Mental Health Services
- Dental Care (Adults)
- Children Exposed to Tobacco Smoke in the Home

Seminole County
- Awareness of Blood Sugar Levels
- Awareness of “211” Services
- Cholesterol Screening
- Fruit Consumption
Selecting Health Priorities

There are various mechanisms through which individual organizations may wish to identify priority areas, such as through community direction and feedback, through analyses of primary and secondary data, or through a combination of the two. Regardless of which mechanism is applied, a variety of criteria must be considered when identifying priority areas, and these are outlined below. Keep in mind that no single criterion determines a specific area of need. Rather, the interplay among the different criteria should be considered in identifying priority areas.

Furthermore, it is important to recognize two important facts: 1) that many local efforts are currently active in addressing aspects of several of the outlined issues; and 2) that no individual or organization acting alone can remedy all of the implications of a given issue or problem. In identifying priorities for community action and designing strategies for implementation, a variety of criteria should be applied to the consideration process, including:

- **Impact.** The degree to which the issue affects or exacerbates other quality of life and health-related issues.
- **Magnitude.** The number of persons affected, also taking into account variance from benchmark data and Year 2010 targets.
- **Seriousness.** The degree to which the problem leads to death, disability or impairs one’s quality of life.
- **Feasibility.** The ability of organizations to reasonably impact the issue, given available resources.
- **Consequences of Inaction.** The risk of exacerbating the problem by not addressing at the earliest opportunity.

The following section provides a series of summary tables detailing health indicators for East Central Florida.
Summary Tables

The following tables provide an overview of indicators in East Central Florida, including analyses of the individual counties. These data are grouped to correspond with the Focus Areas presented in Healthy People 2010.

Reading the Summary Tables

- In the following charts, East Central Florida (ECF) results are shown in the larger, blue column.
- The green columns [to the left of East Central Florida column] provide comparisons between the geographic subareas, identifying differences as “better than” (○), “worse than” (●), or “similar to” (□) the combined opposing areas.
- The columns to the right of the East Central Florida column provide comparisons between East Central Florida and any available state and national findings, as well as Healthy People 2010 targets. Again, symbols indicate whether East Central Florida compares favorably (○), unfavorably (●), or comparably (□) to these external data.

<table>
<thead>
<tr>
<th>Access to Healthcare Services</th>
<th>Each County vs. Others</th>
<th>ECF</th>
<th>ECF vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Lack Health Insurance (Aged 18-64)</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Brevard</td>
<td>15.8</td>
<td>17.3</td>
<td></td>
</tr>
<tr>
<td>Orange</td>
<td>17.5</td>
<td>21.4</td>
<td></td>
</tr>
<tr>
<td>Osceola</td>
<td>21.8</td>
<td>23.3</td>
<td></td>
</tr>
<tr>
<td>Seminole</td>
<td>16.5</td>
<td>17.7</td>
<td></td>
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<tr>
<td>% Child Does Not Have Health Insurance</td>
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<td></td>
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<tr>
<td>Brevard</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Orange</td>
<td>11.1</td>
<td>11.1</td>
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<tr>
<td>Osceola</td>
<td>11.1</td>
<td>18.2</td>
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<td>Seminole</td>
<td>19.2</td>
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</tr>
<tr>
<td>% Difficulty Accessing Healthcare in Past Year</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Brevard</td>
<td>21.4</td>
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<tr>
<td>Orange</td>
<td>40.3</td>
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<td>Osceola</td>
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<tr>
<td>Seminole</td>
<td>38.0</td>
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<tr>
<td>% Difficulty Finding Physician in Past Year</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Brevard</td>
<td>11.7</td>
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<td>Orange</td>
<td>15.5</td>
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<tr>
<td>Osceola</td>
<td>16.1</td>
<td>13.7</td>
<td></td>
</tr>
<tr>
<td>Seminole</td>
<td>16.1</td>
<td>13.7</td>
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<tr>
<td>% Difficulty Finding a Doctor for Child</td>
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<td>9.0</td>
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<tr>
<td>Seminole</td>
<td>7.4</td>
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<tr>
<td>% Difficulty Getting Appointment in Past Year</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Brevard</td>
<td>17.2</td>
<td>18.2</td>
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<td>Orange</td>
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<td>Seminole</td>
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<td>18.2</td>
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<tr>
<td>% Difficulty Getting Appointment for Child</td>
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<td>Brevard</td>
<td>12.3</td>
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<tr>
<td>Osceola</td>
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<td>11.7</td>
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</tr>
<tr>
<td>Seminole</td>
<td>8.2</td>
<td>11.7</td>
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</tr>
<tr>
<td>% Cost Prevented Physician Visit in Past Year</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brevard</td>
<td>11.9</td>
<td>12.1</td>
<td></td>
</tr>
<tr>
<td>Orange</td>
<td>12.9</td>
<td>12.1</td>
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</tr>
<tr>
<td>Osceola</td>
<td>17.2</td>
<td>12.1</td>
<td></td>
</tr>
<tr>
<td>Seminole</td>
<td>14.1</td>
<td>12.1</td>
<td></td>
</tr>
<tr>
<td>% Cost/Insurance Difficulties for Child Receiving Healthcare</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brevard</td>
<td>11.9</td>
<td>12.1</td>
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<td>12.8</td>
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<td>17.2</td>
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</tr>
<tr>
<td>Seminole</td>
<td>7.5</td>
<td>8.7</td>
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<tr>
<td>% Cost Prevented Getting Rx in Past Year</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brevard</td>
<td>10.3</td>
<td>21.3</td>
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<td>22.6</td>
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<td>17.7</td>
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</tr>
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<td>Seminole</td>
<td>16.6</td>
<td>15.7</td>
<td></td>
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<tr>
<td>% Cost of Prescription for Child</td>
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<td></td>
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<tr>
<td>Brevard</td>
<td>1.7</td>
<td>7.5</td>
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<td>7.9</td>
<td>8.4</td>
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<td>7.6</td>
<td>8.3</td>
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<tr>
<td>Seminole</td>
<td>3.5</td>
<td>8.3</td>
<td></td>
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<tr>
<td>% Skipped Rx Doses to Save Costs</td>
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<tr>
<td>Seminole</td>
<td>34.5</td>
<td>30.6</td>
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<tr>
<td>% Transportation Prevented Dr Visit in Past Year</td>
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<td>7.4</td>
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<td>Osceola</td>
<td>10.6</td>
<td>8.1</td>
<td></td>
</tr>
<tr>
<td>Seminole</td>
<td>9.9</td>
<td>8.1</td>
<td></td>
</tr>
<tr>
<td>% Transportation Difficulties for Child Receiving Healthcare</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brevard</td>
<td>2.9</td>
<td>3.8</td>
<td></td>
</tr>
<tr>
<td>Orange</td>
<td>4.7</td>
<td>3.8</td>
<td></td>
</tr>
<tr>
<td>Osceola</td>
<td>4.7</td>
<td>4.6</td>
<td></td>
</tr>
<tr>
<td>Seminole</td>
<td>2.1</td>
<td>4.6</td>
<td></td>
</tr>
<tr>
<td>% Inconvenient Hrs Prevented Dr Visit in Past Year</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brevard</td>
<td>14.6</td>
<td>16.7</td>
<td></td>
</tr>
<tr>
<td>Orange</td>
<td>11.8</td>
<td>16.7</td>
<td></td>
</tr>
<tr>
<td>Osceola</td>
<td>21.6</td>
<td>16.7</td>
<td></td>
</tr>
<tr>
<td>Seminole</td>
<td>17.0</td>
<td>16.7</td>
<td></td>
</tr>
<tr>
<td>% Inconvenient Office Hours for Child</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brevard</td>
<td>12.8</td>
<td>11.6</td>
<td></td>
</tr>
<tr>
<td>Orange</td>
<td>15.5</td>
<td>11.6</td>
<td></td>
</tr>
<tr>
<td>Osceola</td>
<td>12.5</td>
<td>11.6</td>
<td></td>
</tr>
<tr>
<td>Seminole</td>
<td>5.6</td>
<td>11.6</td>
<td></td>
</tr>
<tr>
<td>% Lang/Cultural Barriers Prevented Medical Care in Past Yr</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brevard</td>
<td>7.1</td>
<td>7.5</td>
<td></td>
</tr>
<tr>
<td>Orange</td>
<td>8.9</td>
<td>7.5</td>
<td></td>
</tr>
<tr>
<td>Osceola</td>
<td>7.1</td>
<td>7.5</td>
<td></td>
</tr>
<tr>
<td>Seminole</td>
<td>6.5</td>
<td>7.5</td>
<td></td>
</tr>
</tbody>
</table>

“Access to Healthcare Services” Data Continued on Next Page
### Access to Healthcare Services (continued)

<table>
<thead>
<tr>
<th>Category</th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Have a Specific Source of Ongoing Care</td>
<td>81.6</td>
<td>84.8</td>
<td>87.9</td>
<td>78.9</td>
</tr>
<tr>
<td>% Have Had Routine Checkup in Past Year</td>
<td>80.2</td>
<td>80.3</td>
<td>87.7</td>
<td>87.6</td>
</tr>
<tr>
<td>% Child Has Had Checkup in Past Year</td>
<td>80.7</td>
<td>81.8</td>
<td>81.7</td>
<td>81.8</td>
</tr>
<tr>
<td>% Gone to ER More Than Once in Past Year</td>
<td>5.7</td>
<td>7.8</td>
<td>8.5</td>
<td>8.5</td>
</tr>
<tr>
<td>% Rate Local Healthcare &quot;Excellent/Very Good&quot;</td>
<td>50.1</td>
<td>45.6</td>
<td>45.6</td>
<td>54.5</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Arthritis, Osteoporosis & Chronic Pain

<table>
<thead>
<tr>
<th>Category</th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Arthritis/Rheumatism</td>
<td>4.7</td>
<td>7.4</td>
<td>9.6</td>
<td>9.6</td>
</tr>
<tr>
<td>% Osteoporosis</td>
<td>8.5</td>
<td>6.5</td>
<td>8.1</td>
<td>5.9</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Cancer

<table>
<thead>
<tr>
<th>Category</th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Skin Cancer</td>
<td>18.2</td>
<td>3.3</td>
<td>0.1</td>
<td>1.5</td>
</tr>
<tr>
<td>% Cancer (Other Than Skin)</td>
<td>6.0</td>
<td>6.0</td>
<td>5.7</td>
<td>4.6</td>
</tr>
<tr>
<td>% Sigmoid/Colonoscopy Ever (Aged 50+)</td>
<td>70.7</td>
<td>70.3</td>
<td>68.2</td>
<td>69.9</td>
</tr>
<tr>
<td>% Blood Stool Test in Past 2 Yrs (Aged 50+)</td>
<td>84.9</td>
<td>84.6</td>
<td>84.1</td>
<td>84.0</td>
</tr>
<tr>
<td>% Mammogram in Past 2 Years (Women 40+)</td>
<td>81.3</td>
<td>78.8</td>
<td>84.0</td>
<td>74.2</td>
</tr>
<tr>
<td>% Pap Smear in Past 3 Years (Women)</td>
<td>7.4</td>
<td>8.2</td>
<td>8.2</td>
<td>8.4</td>
</tr>
<tr>
<td>% Prostate Exam in Past 2 Years (Men 50+)</td>
<td>81.4</td>
<td>70.1</td>
<td>80.4</td>
<td>80.9</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Diabetes

<table>
<thead>
<tr>
<th>Category</th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Diabetes/High Blood Sugar</td>
<td>12.9</td>
<td>14.1</td>
<td>14.5</td>
<td>14.4</td>
</tr>
<tr>
<td>% Aware of Blood Sugar Level</td>
<td>27.1</td>
<td>26.7</td>
<td>35.0</td>
<td>30.3</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Disability

<table>
<thead>
<tr>
<th>Category</th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Activity Limitations</td>
<td>22.8</td>
<td>15.4</td>
<td>17.4</td>
<td>16.4</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.
### Education & Community-Based Programs

<table>
<thead>
<tr>
<th>Education &amp; Community-Based Programs</th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Use Internet to Get Health-Related Information</td>
<td>85.3</td>
<td>85.2</td>
<td>83.5</td>
<td>71.0</td>
</tr>
<tr>
<td>% Aware of the “211” Line</td>
<td>39.6</td>
<td>23.8</td>
<td>24.5</td>
<td>11.1</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Environmental Health

<table>
<thead>
<tr>
<th>Environmental Health</th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Believe that Secondhand Smoke is Very Harmful</td>
<td>57.2</td>
<td>67.8</td>
<td>68.4</td>
<td>56.1</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Heart Disease & Stroke

<table>
<thead>
<tr>
<th>Heart Disease &amp; Stroke</th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Chronic Heart Disease</td>
<td>5.5</td>
<td>7.6</td>
<td>5.8</td>
<td>7.0</td>
</tr>
<tr>
<td>% Stroke</td>
<td>3.2</td>
<td>2.4</td>
<td>3.1</td>
<td>1.3</td>
</tr>
<tr>
<td>% Blood Pressure Checked in Past 2 Years</td>
<td>85.6</td>
<td>85.5</td>
<td>85.5</td>
<td>84.9</td>
</tr>
<tr>
<td>% Told Have High Blood Pressure</td>
<td>30.7</td>
<td>30.5</td>
<td>30.5</td>
<td>30.3</td>
</tr>
<tr>
<td>% Aware of Blood Pressure Reading</td>
<td>71.0</td>
<td>62.8</td>
<td>62.8</td>
<td>63.5</td>
</tr>
<tr>
<td>% Taking Action to Control High Blood Pressure</td>
<td>80.2</td>
<td>84.3</td>
<td>85.2</td>
<td>86.9</td>
</tr>
<tr>
<td>% Cholesterol Checked in Past 5 Years</td>
<td>97.0</td>
<td>93.1</td>
<td>96.6</td>
<td>96.4</td>
</tr>
<tr>
<td>% Told Have High Cholesterol</td>
<td>29.9</td>
<td>31.8</td>
<td>29.5</td>
<td>30.8</td>
</tr>
<tr>
<td>% Taking Action to Control High Blood Cholesterol</td>
<td>82.3</td>
<td>78.8</td>
<td>76.6</td>
<td>81.0</td>
</tr>
<tr>
<td>% Aware of Cholesterol Level</td>
<td>45.8</td>
<td>37.7</td>
<td>37.7</td>
<td>36.9</td>
</tr>
<tr>
<td>% 1+ Cardiovascular Risk Factor</td>
<td>85.9</td>
<td>67.4</td>
<td>86.5</td>
<td>82.4</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### HIV

<table>
<thead>
<tr>
<th>HIV</th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Ever Tested for HIV (Ages 18-64)</td>
<td>33.2</td>
<td>31.3</td>
<td>38.1</td>
<td>36.8</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Immunization & Infectious Disease

<table>
<thead>
<tr>
<th>Immunization &amp; Infectious Disease</th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Flu Shot in Past Yr (Aged 65+)</td>
<td>80.8</td>
<td>62.4</td>
<td>81.9</td>
<td>73.5</td>
</tr>
<tr>
<td>% Flu Shot in Past Yr (High-Risk Aged 18-64)</td>
<td>67.2</td>
<td>62.4</td>
<td>38.7</td>
<td>37.2</td>
</tr>
<tr>
<td>% Pneumonia Vaccine Ever (Aged 65+)</td>
<td>70.0</td>
<td>67.7</td>
<td>62.3</td>
<td>76.8</td>
</tr>
<tr>
<td>% Pneumonia Vaccine Ever (High-Risk Aged 18-64)</td>
<td>25.4</td>
<td>20.3</td>
<td>20.0</td>
<td>20.7</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Each County vs. Others

<table>
<thead>
<tr>
<th>Each County</th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Use Internet to Get Health-Related Information</td>
<td>85.3</td>
<td>85.2</td>
<td>83.5</td>
<td>71.0</td>
</tr>
<tr>
<td>% Aware of the “211” Line</td>
<td>39.6</td>
<td>23.8</td>
<td>24.5</td>
<td>11.1</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### ECF vs. Benchmarks

<table>
<thead>
<tr>
<th>ECF vs. Benchmarks</th>
<th>TREND (vs. 2004)</th>
<th>vs. FL</th>
<th>vs. US</th>
<th>vs. HP2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Flu Shot in Past Yr (Aged 65+)</td>
<td>80.8</td>
<td>62.4</td>
<td>81.9</td>
<td>73.5</td>
</tr>
<tr>
<td>% Flu Shot in Past Yr (High-Risk Aged 18-64)</td>
<td>67.2</td>
<td>62.4</td>
<td>38.7</td>
<td>37.2</td>
</tr>
<tr>
<td>% Pneumonia Vaccine Ever (Aged 65+)</td>
<td>70.0</td>
<td>67.7</td>
<td>62.3</td>
<td>76.8</td>
</tr>
<tr>
<td>% Pneumonia Vaccine Ever (High-Risk Aged 18-64)</td>
<td>25.4</td>
<td>20.3</td>
<td>20.0</td>
<td>20.7</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.
### Nutrition & Overweight

<table>
<thead>
<tr>
<th></th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Eat 5+ Servings of Fruits or Vegetables per Day</td>
<td>41.5</td>
<td>40.5</td>
<td>38.6</td>
<td>37.3</td>
</tr>
<tr>
<td>% Eat 2+ Servings of Fruits per Day</td>
<td>55.7</td>
<td>53.8</td>
<td>52.3</td>
<td>51.9</td>
</tr>
<tr>
<td>% Eat 3+ Servings of Vegetables per Day</td>
<td>30.2</td>
<td>29.0</td>
<td>27.1</td>
<td>26.8</td>
</tr>
<tr>
<td>% Received Advice on Nutrition in Past Year</td>
<td>49.6</td>
<td>47.2</td>
<td>45.2</td>
<td>41.2</td>
</tr>
<tr>
<td>% Unhealthy Weight (BMI &lt;18.5 or 25+)</td>
<td>59.6</td>
<td>57.6</td>
<td>54.9</td>
<td>54.2</td>
</tr>
<tr>
<td>% Overweight</td>
<td>60.2</td>
<td>60.0</td>
<td>61.6</td>
<td>63.1</td>
</tr>
<tr>
<td>% Obese</td>
<td>20.8</td>
<td>20.1</td>
<td>20.6</td>
<td>21.3</td>
</tr>
<tr>
<td>% Overweights Advised to Lose Weight</td>
<td>26.0</td>
<td>26.0</td>
<td>26.0</td>
<td>26.0</td>
</tr>
<tr>
<td>% Overweight Trying to Lose</td>
<td>46.1</td>
<td>46.1</td>
<td>46.4</td>
<td>46.0</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Maternal, Child & Infant Health

<table>
<thead>
<tr>
<th></th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% &quot;Always&quot; Wear Seat Belt</td>
<td>9.3</td>
<td>6.1</td>
<td>3.9</td>
<td>4.4</td>
</tr>
<tr>
<td>% Mother Had Problems Getting Prenatal Care</td>
<td>68.3</td>
<td>59.6</td>
<td>71.3</td>
<td>71.4</td>
</tr>
<tr>
<td>% Aware of Services Provided by Healthy Start Coalition</td>
<td>13.4</td>
<td>11.6</td>
<td>14.0</td>
<td>16.1</td>
</tr>
<tr>
<td>% Used Services of Healthy Start Coalition</td>
<td>65.0</td>
<td>59.5</td>
<td>53.0</td>
<td>50.8</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Mental Health & Mental Disorders

<table>
<thead>
<tr>
<th></th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% &quot;Fair/Poor&quot; Mental Health</td>
<td>12.8</td>
<td>9.1</td>
<td>13.3</td>
<td>9.1</td>
</tr>
<tr>
<td>% Major Depression</td>
<td>77.0</td>
<td>71.0</td>
<td>79.1</td>
<td>78.1</td>
</tr>
<tr>
<td>% Chronic Depression (2+ Years)</td>
<td>28.0</td>
<td>27.5</td>
<td>24.1</td>
<td>20.0</td>
</tr>
<tr>
<td>% 7+ Days Not Enough Rest/Sleep</td>
<td>41.5</td>
<td>40.6</td>
<td>41.0</td>
<td>48.7</td>
</tr>
<tr>
<td>% Depressed Persons Seeking Help</td>
<td>51.8</td>
<td>50.8</td>
<td>49.7</td>
<td>50.6</td>
</tr>
<tr>
<td>% Mental Health Services Not Available When Needed</td>
<td>5.0</td>
<td>4.3</td>
<td>7.2</td>
<td>2.9</td>
</tr>
<tr>
<td>% Taken Medication to Help With Emotional Problems</td>
<td>26.8</td>
<td>14.6</td>
<td>17.4</td>
<td>20.2</td>
</tr>
<tr>
<td>% Typical Day is &quot;Extremely/Very&quot; Stressful</td>
<td>12.7</td>
<td>10.8</td>
<td>11.9</td>
<td>18.5</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Injury

<table>
<thead>
<tr>
<th></th>
<th>Brevard</th>
<th>Orange</th>
<th>Osceola</th>
<th>Seminole</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Overweight</td>
<td>28.7</td>
<td>30.0</td>
<td>30.3</td>
<td>31.0</td>
</tr>
<tr>
<td>% Obese</td>
<td>20.2</td>
<td>20.0</td>
<td>20.2</td>
<td>20.5</td>
</tr>
<tr>
<td>% Unhealthy Weight</td>
<td>59.6</td>
<td>57.6</td>
<td>54.9</td>
<td>54.2</td>
</tr>
<tr>
<td>% Overweight</td>
<td>59.2</td>
<td>59.0</td>
<td>63.5</td>
<td>63.1</td>
</tr>
<tr>
<td>% Obese</td>
<td>28.0</td>
<td>28.0</td>
<td>28.0</td>
<td>28.0</td>
</tr>
<tr>
<td>% Overweights Advised to Lose Weight</td>
<td>26.0</td>
<td>26.0</td>
<td>26.0</td>
<td>26.0</td>
</tr>
<tr>
<td>% Overweight Trying to Lose</td>
<td>46.1</td>
<td>46.1</td>
<td>46.4</td>
<td>46.0</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.
### Oral Health

<table>
<thead>
<tr>
<th>Each County vs. Others</th>
<th>ECF</th>
<th>ECF vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Brevard</strong></td>
<td><strong>Orange</strong></td>
<td><strong>Ocena</strong></td>
</tr>
<tr>
<td>% Have Visited Dentist in Past Yr (18+)</td>
<td>68.6</td>
<td>60.1</td>
</tr>
<tr>
<td>% Child Has Asthma</td>
<td>11.1</td>
<td>17.9</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Physical Activity & Fitness

<table>
<thead>
<tr>
<th>Each County vs. Others</th>
<th>ECF</th>
<th>ECF vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Brevard</strong></td>
<td><strong>Orange</strong></td>
<td><strong>Ocena</strong></td>
</tr>
<tr>
<td>% No Leisure-Time Physical Activity</td>
<td>24.9</td>
<td>24.9</td>
</tr>
<tr>
<td>% Meeting Physical Activity Recommendations</td>
<td>46.0</td>
<td>40.9</td>
</tr>
<tr>
<td>% Vigorous Physical Activity</td>
<td>33.1</td>
<td>32.3</td>
</tr>
<tr>
<td>% Moderate Physical Activity</td>
<td>25.9</td>
<td>22.9</td>
</tr>
<tr>
<td>% Received Advice on Exercise in Past Year</td>
<td>44.3</td>
<td>46.3</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Physical Health

<table>
<thead>
<tr>
<th>Each County vs. Others</th>
<th>ECF</th>
<th>ECF vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Brevard</strong></td>
<td><strong>Orange</strong></td>
<td><strong>Ocena</strong></td>
</tr>
<tr>
<td>% &quot;Fair/Poor&quot; Physical Health</td>
<td>16.3</td>
<td>12.9</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Respiratory Disease

<table>
<thead>
<tr>
<th>Each County vs. Others</th>
<th>ECF</th>
<th>ECF vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Brevard</strong></td>
<td><strong>Orange</strong></td>
<td><strong>Ocena</strong></td>
</tr>
<tr>
<td>% Chronic Lung Disease</td>
<td>9.4</td>
<td>7.3</td>
</tr>
<tr>
<td>% Asthma</td>
<td>9.1</td>
<td>10.4</td>
</tr>
<tr>
<td>% Child Has Asthma</td>
<td>13.3</td>
<td>16.8</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.

### Substance Abuse

<table>
<thead>
<tr>
<th>Each County vs. Others</th>
<th>ECF</th>
<th>ECF vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Brevard</strong></td>
<td><strong>Orange</strong></td>
<td><strong>Ocena</strong></td>
</tr>
<tr>
<td>% Current Drinker</td>
<td>81.1</td>
<td>71.8</td>
</tr>
<tr>
<td>% Chronic Drinker</td>
<td>5.9</td>
<td>2.4</td>
</tr>
<tr>
<td>% Binge Drinker</td>
<td>7.1</td>
<td>10.9</td>
</tr>
<tr>
<td>% Drinking &amp; Driving in Past Month</td>
<td>5.4</td>
<td>3.7</td>
</tr>
<tr>
<td>% Driving Drunk or Riding with Drunk Driver</td>
<td>7.5</td>
<td>7.7</td>
</tr>
<tr>
<td>% Illicit Drug Use in Past Month</td>
<td>2.4</td>
<td>2.2</td>
</tr>
<tr>
<td>% Sought Help for Alcohol or Drug Problem</td>
<td>3.0</td>
<td>2.6</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.
<table>
<thead>
<tr>
<th>Tobacco Use</th>
<th>Each County vs. Others</th>
<th>ECF vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Brevard</td>
<td>Orange</td>
</tr>
<tr>
<td>% Current Smoker</td>
<td>16.8</td>
<td>17.4</td>
</tr>
<tr>
<td>% Received Advice to Quit Smoking (Smokers)</td>
<td>80.7</td>
<td>72.2</td>
</tr>
<tr>
<td>% Have Quit Smoking 1+ Days in Past Year (Smokers)</td>
<td>51.3</td>
<td>51.3</td>
</tr>
<tr>
<td>% Someone Smokes at Home</td>
<td>14.4</td>
<td>14.3</td>
</tr>
<tr>
<td>% Children &lt;7 Exposed to Smoke at Home</td>
<td>7.1</td>
<td>13.6</td>
</tr>
</tbody>
</table>

Note: Each county is compared against all others combined.
SELF-REPORTED HEALTH STATUS
Physical Health Status

Self-Reported Health Status

A majority of East Central Florida adults (57.6%) rate their overall health as “excellent” or “very good.”

- Another 28.0% of survey respondents gave “good” ratings of their overall health.

In contrast, 14.4% of adults believe that their overall health is “fair” or “poor.”

- More favorable than Florida findings (16.6% “fair/poor”).
- More favorable than the national percentage (17.4% “fair/poor”).

Viewed by county, residents of Seminole County exhibit the lowest response of “fair/poor” health (11.5%), while those in Brevard County exhibit the highest ratio (18.3%).

TREND: These results are statistically similar to those found in earlier surveys (in 1999 and 2004).
Experience "Fair" or "Poor" Overall Health

The following chart further examines self-reported health status by various demographic characteristics. East Central Florida adults more likely to report experiencing “fair” or “poor” overall health include:

- Women.
- Residents aged 40 and older.
- Those living below the federal poverty level (a “fair/poor” response more than four times that found among adults with incomes over 200% of poverty).
- Hispanics.
- Those without healthcare insurance coverage.

Throughout this report, charts such as that shown at right detail the specific responses recorded among specific demographic groups. For example, here, among respondents living below the federal poverty level, 36.6% report “fair” or “poor” health.
Activity Limitations

An estimated 54 million persons in the United States, or nearly 20 percent of the population, currently live with disabilities. The increase in disability among all age groups indicates a growing need for public health programs serving people with disabilities.

The direct medical and indirect annual costs associated with disability [in the U.S.] are more than $300 billion, or 4 percent of the gross domestic product. This total cost includes $160 billion in medical care expenditures (1994 dollars) and lost productivity costs approaching $155 billion.

The health promotion and disease prevention needs of people with disabilities are not nullified because they are born with an impairing condition or have experienced a disease or injury that has long-term consequences. People with disabilities have increased health concerns and susceptibility to secondary conditions. Having a long-term condition increases the need for health promotion that can be medical, physical, social, emotional, or societal.


Nearly one in five East Central Florida adults (17.6%) is limited in some way in some activities due to a physical, mental or emotional problem.

- More favorable than the 21.8% prevalence nationwide.
- Highest in Brevard County (22.9%).

Limited in Activities in Some Way Due to a Physical, Mental or Emotional Problem

In looking at responses by key demographic characteristics, note the following:

- Women more often report activity limitations than do men.
- Adults aged 40 or older are more often limited in activities.
- Activity limitations are much more prevalent among adults living below the 200% poverty threshold.
- Note also that activity limitations are relatively high among obese respondents.
Limited in Activities in Some Way Due to a Physical, Mental or Emotional Problem (East Central Florida)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 117]
Note: • Asked of all respondents.

Among persons reporting activity limitations, these are most often attributed to musculoskeletal issues, such as back/neck problems or arthritis/rheumatism.

Type of Problem That Limits Activities (Among Those Reporting Activity Limitations; East Central Florida)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 118]
Note: • Reflects those respondents who experience activity limitations.
Mental Health & Mental Disorders

Mental health is a state of successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with adversity. Mental health is indispensable to personal well-being, family and interpersonal relationships, and contribution to community or society. Mental disorders are health conditions that are characterized by alterations in thinking, mood, or behavior (or some combination thereof), which are associated with distress and/or impaired functioning and spawn a host of human problems that may include disability, pain, or death. Mental illness is the term that refers collectively to all diagnosable mental disorders...

Mental disorders generate an immense public health burden of disability. The World Health Organization, in collaboration with the World Bank and Harvard University, has determined that the impact of mental illness on overall health and productivity in the United States and throughout the world often is profoundly underrecognized [Global Burden of Disease study]. In established market economies such as the United States, mental illness is on a par with heart disease and cancer as a cause of disability. Suicide—a major public health problem in the U.S.—occurs most frequently as a consequence of a mental disorder.

Mental disorders occur across the lifespan, affecting persons of all racial and ethnic groups, both genders, and all educational and socioeconomic groups.

As the life expectancy of individuals continues to grow longer, the sheer number—although not necessarily the proportion—of persons experiencing mental disorders of late life will expand. This trend will present society with unprecedented challenges in organizing, financing, and delivering effective preventive and treatment services for mental health.


Self-Reported Mental Health Status

A full 7 in 10 East Central Florida adults (69.8%) rate their overall mental health as “excellent” or “very good.”

- Another 19.8% gave “good” ratings of their own mental health status.

Self-Reported Mental Health Status

(East Central Florida, 2009)

“Now thinking about your mental health, which includes stress, depression and problems with emotions, would you say that, in general, your mental health is: excellent, very good, good, fair or poor?”

Sources: 2009 PRC Community Health Survey, Professional Research Consultants. [Item 109]
Notes: Asked of all respondents.
However, 10.4% of adults believe that their overall mental health is “fair” or “poor.”

- Statistically similar to the 12.9% “fair/poor” reported across the nation.
- Highest in Osceola (a less favorable 13.3% “fair/poor” mental health is reported).

**Experience “Fair” or “Poor” Mental Health**

Note that this question was not asked in the 1999 or 2004 surveys.

Adults more likely to report experiencing “fair” or “poor” mental health include:

- Women.
- Adults under age 65.
- Residents living below the federal poverty level.
- Hispanics.
- Those without healthcare insurance coverage.

**Experience “Fair” or “Poor” Mental Health**

*(East Central Florida)*

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 109]

Note: • Asked of all respondents.

- FPL = Federal Poverty Level based on household income and number of household members [U.S. Dept. of Health & Human Services poverty guidelines].
Depression

Major Depression

Across East Central Florida, 11.3% of adults report that they have been diagnosed with major depression by a physician at some point in their lives.

- Statistically similar to national findings (9.7%).
- Statistically similar by county.
- TREND: Note the statistically significant increase in diagnoses of major depression since 2004 among survey respondents in Seminole County.

Self-Reported Prevalence of Major Depression

By key demographic characteristics, note the following findings:

- Women report a higher prevalence of major depression than do men.
- Adults aged 40 to 64 more often report a diagnosis of major depression than do younger and older adults.
- Note the negative correlation between income and depression.
- Blacks in East Central Florida are less likely than Whites or Hispanics to report major depression.
Self-Reported Prevalence of Major Depression
(East Central Florida)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 33]
Note: • Asked of all respondents.

Chronic Depression

Over one in four East Central Florida adults (28.3%) report that they have had two or more years in their lives when they felt depressed or sad on most days, although they may have felt okay sometimes.

- Statistically similar to national findings (30.3%).

- Among the counties, the prevalence is less favorable in Osceola County (33.1%).

**TREND:** Note the statistically significant increases in chronic depression over time in Brevard, Osceola, and Seminole Counties, as well as in the Greater Orlando area overall.

Have Experienced Periods of Depression Which Lasted Two or More Years

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 110]
• PRC National Health Surveys, Professional Research Consultants.
Notes: • Asked of all respondents.
• Florida data not available.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
The following chart illustrates differences found among key demographic groups. Note that symptoms of chronic depression are notably higher among:

- Women.
- Adults aged 40 through 64.
- Community members living at lower incomes (including a majority of those living below the federal poverty level).
- Hispanics.
- The uninsured.

**Have Experienced Periods of Depression Which Lasted Two or More Years**

(East Central Florida)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 110]

Note: • Asked of all respondents.
Inadequate Sleep

Among East Central Florida respondents, more than 4 in 10 (41.5%) say they had 7 or more days in the past month on which they felt they did not get enough sleep.

- No statistical differences by county.
- Note the median of 5 days of inadequate sleep in the past month across East Central Florida.

Have Experienced Seven or More Days in the Past Month Without Enough Rest or Sleep

[Diagram showing percentages for different counties and years]

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 1] 1
Notes: • Asked of all respondents.
• U.S. data is not available.
• The median is the middle response, so that roughly half of the responses are lower in value and roughly half are higher.
• A median is used here to represent the “typical” number of days per month of poor sleep/rest.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
Adults *more* likely to have experienced a week or more of inadequate sleep in the past month include:

- **Women.**
- **Adults under age 40.**
- **Residents living below the federal poverty level.**

### Have Experienced Seven or More Days in the Past Month Without Enough Rest or Sleep

*(East Central Florida)*

<table>
<thead>
<tr>
<th>Men</th>
<th>Women 18 to 39</th>
<th>Women 40 to 64</th>
<th>Women 65+</th>
<th>&lt; Poverty</th>
<th>100%-200% Pov</th>
<th>&gt;200% Pov</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Insured</th>
</tr>
</thead>
<tbody>
<tr>
<td>36.7%</td>
<td>46.3%</td>
<td>54.3%</td>
<td>38.5%</td>
<td>21.2%</td>
<td>54.6%</td>
<td>44.9%</td>
<td>42%</td>
<td>42.3%</td>
<td>36.8%</td>
<td>43.3%</td>
</tr>
</tbody>
</table>

**Source:** • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 111]

**Note:** • Asked of all respondents.

### Stress

There is increasing awareness and concern in the public health sector regarding the impact of stress, its prevention and treatment, and the need for enhanced coping skills.


**Four in 10 East Central Florida adults say their level of stress on a typical day is “not very stressful” (26.1%) or “not at all stressful” (14.1%).**

- Another 44.6% report “moderately stressful” typical days.

### Perceived Level of Stress on a Typical Day

*(East Central Florida, 2009)*

- **Very Stressful:** 11.0%
- **Extremely Stressful:** 4.2%
- **Not At All Stressful:** 14.1%
- **Not Very Stressful:** 26.1%
- **Moderately Stressful:** 44.6%

**Source:** • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 112]

**Note:** • Asked of all respondents.
In contrast, 15.2% say their typical day is “extremely” or “very” stressful.

- Statistically similar to national data (13.4%).
- Lower in Osceola County (11.9%).

Perceive Most Days as “Extremely” or “Very” Stressful

Source: 2009 PRC Community Health Survey, Professional Research Consultants.

Note: Asked of all respondents.

Adults more likely to perceive their days to be “extremely/very stressful” include:

- Women.
- Adults under age 65.
- Adults living below the federal poverty level.

Perceive Most Days as “Extremely” or “Very” Stressful (East Central Florida, 2009)

Source: 2009 PRC Community Health Survey, Professional Research Consultants.

Note: Asked of all respondents.

FPL = Federal Poverty Level based on household income and number of household members [U.S. Dept. of Health & Human Services poverty guidelines].

Percentages represent combined “extremely stressful” and “very stressful” responses.
Mental Health Treatment

Modern treatments for mental disorders are highly effective, with a variety of treatment options available for most disorders, [however], the majority of persons with mental disorders do not receive mental health services.

Evidence that mental disorders are legitimate and highly responsive to appropriate treatment promises to be a potent antidote to stigma. Stigma creates barriers to providing and receiving competent and effective mental health treatment and can lead to inappropriate treatment, unemployment, and homelessness.

The co-occurrence of addictive disorders among persons with mental disorders is gaining increasing attention from mental health professionals. Having both mental and addictive disorders is a particularly significant clinical treatment issue, complicating treatment for each disorder.


Mental Health Treatment

Among East Central Florida respondents with recognized depression, 53.1% acknowledge that they have sought professional help for a mental or emotional problem.

- More favorable than national findings (43.0%).
- More favorable (65.6%) in Seminole County.
- Similar to the Healthy People 2010 objective of 50% or higher among adults with recognized depression.

TREND: Note the statistically significant increases over time in Osceola and Seminole Counties, as well as across Greater Orlando and East Central Florida overall.

Have Sought Professional Help With a Mental or Emotional Problem
(Among Persons With Recognized Depression)

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 183]
• PRC National Health Surveys, Professional Research Consultants.

Notes: • Among respondents who have been diagnosed with major depression or who have experienced two or more years of depression at some point in their lives.
• Florida data not available.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
In all, 4.6% of survey respondents report that they or a member of their household was unable to obtain mental health services at some point in the past year.

- Viewed by county, results range from 2.9% in Seminole County (more favorable) to 7.2% in Osceola County (less favorable).
- Reasons for the inability most often related to cost/lack of insurance or scheduling difficulties.

Unable to Obtain Mental Health Services in the Past Year
(East Central Florida, 2009)

One in five survey respondents (20.0%) has taken prescribed medication to help with mental or emotional problems.

- No statistical difference by county.

Have Taken Prescribed Medications to Help With Mental or Emotional Problems
(East Central Florida, 2009)
DEATH & DISEASE
Cardiovascular Disease

Heart disease and stroke—the principal components of cardiovascular disease—are the first and third leading causes of death in the United States, accounting for more than 40% of all deaths.

- About 950,000 Americans die of heart disease or stroke each year, which amounts to one death every 33 seconds.
- Although heart disease and stroke are often thought to affect men and older people primarily, it is also a major killer of women and people in the prime of life. More than half of those who die of heart disease or stroke each year are women.
- Each year, about 63 of every 100,000 deaths are due to stroke.
- Looking at only deaths due to heart disease or stroke, however, understates the health effects of these two conditions:
  - About 61 million Americans (almost one-fourth of the population) live with the effects of stroke or heart disease.
  - Heart disease is a leading cause of disability among working adults.
  - Stroke alone accounts for the disability of more than 1 million Americans.
  - Almost 6 million hospitalizations each year are due to heart disease or stroke.
  - About 4.5 million stroke survivors are alive today.

The economic effects of heart disease and stroke on the U.S. healthcare system grow larger as the population ages. In 2001, for example, the [nationwide] cost for all cardiovascular diseases was $300 billion: for heart disease the cost was $105 billion; for stroke, $28 billion. Lost productivity due to stroke and heart disease cost more than $129 billion.

– National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention

Prevalence of Heart Disease & Stroke

Prevalence of Heart Disease

A total of 6.6% of surveyed East Central Florida adults report that they suffer from or have been diagnosed with heart disease, such as coronary heart disease, angina or heart attack.

- Statistically similar to the national percentage (6.3%).
- More favorable (4.5%) in Seminole County.
Prevalence of Stroke

A total of 2.5% of surveyed East Central Florida adults report that they suffer from or have been diagnosed with cerebrovascular disease (a stroke).

- More favorable than national findings (4.9%).
- Lower (1.3%) among adults in Seminole County.

**TREND:** Note the *statistically significant decrease* in Brevard County since 2004.

Among East Central Florida residents aged 65 and older, 9.2% have had a stroke.
Cardiovascular Risk Factors

Hypertension (High Blood Pressure)

High blood pressure is known as the “silent killer” and remains a major risk factor for coronary heart disease, stroke, and heart failure. About 50 million adults in the United States have high blood pressure.


High Blood Pressure Testing

95.1% of East Central Florida adults have had their blood pressure tested within the past two years.

- Similar to national findings (94.5%).
- Just above the Healthy People 2010 target (95% or higher).
- Similar among the counties.

**TREND:** Note the statistically significant decrease over time in Osceola County, but a statistically significant increase across East Central Florida overall.

Have Had Blood Pressure Checked Within the Past Two Years

![Graph showing blood pressure testing rates by year and county](image)

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 41]
• PRC National Health Surveys, Professional Research Consultants.

Notes: • Reflects the total sample of respondents.
• *Greater Orlando includes Orange, Osceola & Seminole counties. Brevard County was not surveyed in 1999.
Prevalence of Hypertension

Over one-third (35.5%) of surveyed East Central Florida adults have been told at some point that their blood pressure was high (an additional 2.8% have not been tested in the past five years).

- Less favorable than the Florida prevalence (28.0%).
- Similar to national findings (34.0%).
- More than twice the Healthy People 2010 target (16% or lower).
- Viewed by county: significantly lower (31.3%) in Seminole County.

**TREND:** Note the statistically significant increases in diagnoses of hypertension since 1999 throughout Greater Orlando (including all three counties individually).

### Have Been Told Blood Pressure Was High

<table>
<thead>
<tr>
<th>Source</th>
<th>Data</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>• PRC Community Health Surveys, Professional Research Consultants.</td>
<td>Items 39, 157</td>
<td>Reflects the total sample of respondents.</td>
</tr>
<tr>
<td>• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC).</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• PRC National Health Surveys, Professional Research Consultants.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Self-reported hypertension diagnoses are higher among the following populations:

- Adults aged 40 and older, and especially those aged 65 and older.
- Respondents living below 200% of the federal poverty level.
Hypertension Management

Among East Central Florida respondents who have been told that their blood pressure was high, 86.2% report that they are currently taking actions to control their condition, such as through medication, diet and/or exercise.

- Less favorable than the Healthy People 2010 target of 95% or higher.
- Does not vary significantly by county.

TREND: Note the statistically significant increase across the Greater Orlando area (including Seminole County).

Taking Action to Control High Blood Pressure

(Among Respondents With High Blood Pressure)

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 40]

Notes: • Asked of respondents who have been told more than once that their blood pressure was high.
• Florida and national data not available.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
Among all East Central Florida respondents, 64.8% report that they are aware of their personal blood pressure numbers.

- More favorable (71.0%) in Brevard County (not shown).
- **TREND:** Note the statistically significant increase in awareness across East Central Florida since the 2004 survey.

### Aware of Personal Blood Pressure Numbers (East Central Florida)

<table>
<thead>
<tr>
<th></th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>59.2%</td>
<td>64.8%</td>
</tr>
<tr>
<td>No/Never Tested</td>
<td>40.5%</td>
<td>34.9%</td>
</tr>
<tr>
<td>Dr. Didn’t Say</td>
<td>0.3%</td>
<td>0.2%</td>
</tr>
</tbody>
</table>

Source: • PRC Community Health Surveys, Professional Research Consultants. [Item 42]
Note: • Asked of all respondents.

### High Blood Cholesterol

High blood cholesterol is a major risk factor for coronary heart disease that can be modified. More than 50 million U.S. adults have blood cholesterol levels that require medical advice and treatment. More than 90 million adults have cholesterol levels that are higher than desirable. Experts recommend that all adults aged 20 years and older have their cholesterol levels checked at least once every 5 years to help them take action to prevent or lower their risk of coronary heart disease. Lifestyle changes that prevent or lower high blood cholesterol include eating a diet low in saturated fat and cholesterol, increasing physical activity, and reducing excess weight.


### Blood Cholesterol Testing

The majority (91.9%) of East Central Florida adults have had their blood cholesterol checked within the past five years.

- Much more favorable than Florida findings (78.5%).
- More favorable than national findings (87.0%).
- Satisfies the Healthy People 2010 target (80% or higher).
- Less favorable (88.8%) in Seminole County.
- **TREND:** Note the statistically significant increases in testing prevalence across East Central Florida overall (namely in Brevard and Orange Counties).
Have Had Blood Cholesterol Level Checked Within the Past 5 Years

Sources:
• PRC Community Health Surveys, Professional Research Consultants. [Item 45]
• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC).
• PRC National Health Surveys, Professional Research Consultants.

Notes:
• Reflects the total sample of respondents.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.

Note that testing levels are notably lower among:

- Men.
- Younger adults
- Adults living just above the federal poverty level (aka “the working poor”).
- The uninsured population.

Have Had Blood Cholesterol Level Checked Within the Past 5 Years
(East Central Florida)

Sources:
• 2009 PRC Community Health Survey, Professional Research Consultants. [Item 45]

Note:
• Reflects the total sample of respondents.
Self-Reported High Blood Cholesterol

In all, 36.8% of East Central Florida adults have been told by a health professional that their cholesterol level was high (note that an additional 12.9% have not had their cholesterol tested in the past five years).

- Less favorable than the statewide prevalence (30.2%, excluding “unknowns”).
- Less favorable than the national prevalence (30.5%).
- Fails to satisfy the Healthy People 2010 target (17% or lower).

No significant difference by county.

**TREND:** Marks a statistically significant increase in hypertension since 2004 in East Central Florida overall (as well as in each county in the Greater Orlando area since 1999).

Note the following demographic breakout of self-reported prevalence of high blood cholesterol. Adults more likely to experience high cholesterol levels include:

- Men.
- Adults aged 40 and older.
- Adults with healthcare insurance coverage.
High Cholesterol Management

Among East Central Florida adults who have been told that their blood cholesterol was high, 8 in 10 (79.6%) report that they are currently taking actions to control their cholesterol levels, such as through medication, diet and/or exercise.

- Less favorable than national findings (90.4%).
- Statistically similar among the four counties.
- **TREND**: Note that this prevalence has *improved significantly* in East Central Florida (since 2004) and in the Greater Orlando area (since 1999, including Seminole County specifically).

**Taking Action to Control High Blood Cholesterol**
(Among Respondents With High Blood Cholesterol)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 44]
• 2008 PRC National Health Survey, Professional Research Consultants.

Note: • Asked of respondents who have been told that their blood cholesterol was high.
• In this case, “taking action” includes medication, diet modification, and/or exercise.
Among all East Central Florida respondents, 38.3% report that they are aware of their personal cholesterol levels.

- No statistical difference by county (not shown).
- **TREND**: Awareness levels have not changed significantly since the previous survey.

### Aware of Personal Cholesterol Numbers (East Central Florida)

<table>
<thead>
<tr>
<th>Category</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>36.4%</td>
<td>38.3%</td>
</tr>
<tr>
<td>No/Never Tested</td>
<td>63.3%</td>
<td>61.1%</td>
</tr>
<tr>
<td>Dr. Didn’t Say</td>
<td>0.6%</td>
<td>0.3%</td>
</tr>
</tbody>
</table>

**Source:** • PRC Community Health Surveys, Professional Research Consultants. [Item 46]

**Note:** • Asked of all respondents.
### Total Cardiovascular Risk

Individual level risk factors which put people at increased risk for cardiovascular diseases include:

- High Blood Pressure
- High Blood Cholesterol
- Tobacco Use
- Physical Inactivity
- Poor Nutrition
- Overweight/Obesity
- Diabetes

National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention

Three health-related behaviors contribute markedly to cardiovascular disease:

**Poor nutrition.** People who are overweight have a higher risk for cardiovascular disease. Almost 60% of U.S. adults are overweight or obese. To maintain a proper body weight, experts recommend a well-balanced diet which is low in fat and high in fiber, accompanied by regular exercise.

**Lack of physical activity.** People who are not physically active have twice the risk for heart disease of those who are active. More than half of U.S. adults do not achieve recommended levels of physical activity.

**Tobacco use.** Smokers have twice the risk for heart attack of nonsmokers. Nearly one-fifth of all deaths from cardiovascular disease, or about 190,000 deaths a year nationally, are smoking-related. Every day, more than 3,000 young people become daily smokers in the U.S.

Modifying these behaviors is critical both for preventing and for controlling cardiovascular disease. Other steps that adults who have cardiovascular disease should take to reduce their risk of death and disability include adhering to treatment for high blood pressure and cholesterol, using aspirin as appropriate, and learning the symptoms of heart attack and stroke.

National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention

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*In all, 86.3% of East Central Florida adults report one or more cardiovascular risk factors, such as being overweight, smoking cigarettes, being physically inactive, or having high blood pressure or cholesterol.*

- Similar to national findings (85.1%).
- Similar among the four counties.

**TREND:** Note the statistically significant decreases in the prevalence of cardiovascular risk factors over time in Brevard and Orange Counties as well as across Greater Orlando overall.
Present One or More Cardiovascular Risk Factors or Behaviors

Sources:
• PRC Community Health Surveys, Professional Research Consultants. [Item 156]
• PRC National Health Surveys, Professional Research Consultants.

Notes:
• Includes respondents reporting any of the following: overweight, cigarette smoking, high blood pressure, high cholesterol, or physical inactivity.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.

East Central Florida adults more likely to exhibit cardiovascular risk factors include:

- Men.
- Adults aged 40 and older.
- Residents with household incomes below 200% of the federal poverty level.
- Blacks.
- Adults without healthcare insurance coverage.

Present One or More Cardiovascular Risk Factors or Behaviors
(East Central Florida)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 156]

Note: • Includes respondents reporting any of the following: overweight, cigarette smoking, high blood pressure, high cholesterol, or physical inactivity.
Cancer, the second leading cause of death among Americans, is responsible for one of every four deaths in the United States. In 2003, over half a million Americans—or more than 1,500 people a day—will die of cancer. Black Americans are more likely to die from cancer than people of any other racial or ethnic group.

The financial costs of cancer are staggering. According to the National Institutes of Health, cancers cost the United States more than $170 billion in 2002. This includes more than $110 billion in lost productivity and over $60 billion in direct medical costs.

The number of new cancer cases can be reduced substantially, and many cancer deaths can be prevented. Healthier lifestyles can significantly reduce a person’s risk for cancer—for example, avoiding tobacco use, increasing physical activity, improving nutrition, and avoiding sun exposure. Making cancer screening and information services available and accessible to all Americans is also essential for reducing the high rates of cancer and cancer deaths. Screening tests for breast, cervical, and colorectal cancers reduce the number of deaths from these diseases by finding them early, when they are most treatable. Screening tests for cervical and colorectal cancers can actually prevent these cancers from developing by detecting treatable precancerous conditions.

– National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention

Prevalence of Cancer

A total of 8.5% of East Central Florida adults report having been diagnosed with skin cancer.

- Much higher than the national average (4.6%).
- Ranges from a low 5.5% in Orange County to 14.7% in Brevard County.

Self-Reported Prevalence of Skin Cancer

<table>
<thead>
<tr>
<th></th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>14.6%</td>
<td>14.7%</td>
<td></td>
</tr>
<tr>
<td>Orange County</td>
<td>6.0%</td>
<td>5.5%</td>
<td>5.3%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>6.5%</td>
<td>6.3%</td>
<td>5.8%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>9.1%</td>
<td></td>
<td>7.5%</td>
</tr>
<tr>
<td>Greater Orlando*</td>
<td>6.0%</td>
<td>6.7%</td>
<td>6.4%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>8.7%</td>
<td>8.5%</td>
<td></td>
</tr>
<tr>
<td>United States</td>
<td>4.9%</td>
<td>5.5%</td>
<td>4.6%</td>
</tr>
</tbody>
</table>

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 31]
• PRC National Health Surveys, Professional Research Consultants.
Notes: • Asked of all respondents.
• Florida data not available.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
A total of 6.5% of East Central Florida adults report having been diagnosed with another type of cancer (non-skin).

- Comparable to the national average (5.8%).
- Particularly high (9.0%) in Brevard County; more favorable (4.6%) in Seminole County.

### Self-Reported Prevalence of Cancer (Not Including Skin Cancer)

**Sources:**
- PRC Community Health Surveys, Professional Research Consultants. [Item 30]
- PRC National Health Surveys, Professional Research Consultants.

**Notes:**
- Asked of all respondents.
- Florida data not available.
- *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.*

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**Cancer Risk**

Reducing the nation’s cancer burden requires reducing the prevalence of behavioral and environmental factors that increase cancer risk.

All cancers caused by cigarette smoking could be prevented. At least one-third of cancer deaths that occur in the United States are due to cigarette smoking.

According to the American Cancer Society, about one-third of cancer deaths that occur in the United States each year are due to nutrition and physical activity factors, including obesity.

> – National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention

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**Cancer Screenings**

The American Cancer Society recommends that both men and women get a cancer-related checkup during a regular doctor’s checkup. It should include examination for cancers of the thyroid, testicles, ovaries, lymph nodes, oral cavity, and skin, as well as health counseling about tobacco, sun exposure, diet and nutrition, risk factors, sexual practices, and environmental and occupational exposures.

Screening levels in East Central Florida were measured in the survey relative to four cancer sites: colorectal cancer (sigmoidoscopy and fecal occult blood testing); female breast cancer (mammography); cervical cancer (Pap smear testing); and prostate cancer (prostate-specific antigen testing and digital rectal examination).
Colorectal Cancer Screenings

COLORECTAL CANCER

Colorectal cancer is the third most common type of cancer and the second leading cause of cancer death in the United States. Current levels of screening in this country lag behind those of other effective cancer screening tests; it has been estimated that attainment of goals for population colorectal cancer screening could save 18,800 lives per year. Colorectal cancer incidence and mortality show health disparities, with a disproportionate burden occurring in certain minority populations, including African Americans and Alaska Natives.

The USPSTF recommends screening for colorectal cancer using fecal occult blood testing, sigmoidoscopy, or colonoscopy in adults, beginning at age 50 years and continuing until age 75 years.

The evidence is convincing that screening for colorectal cancer with fecal occult blood testing, sigmoidoscopy, or colonoscopy detects early-stage cancer and adenomatous polyps. There is convincing evidence that screening with any of the three recommended tests (FOBT, sigmoidoscopy, colonoscopy) reduces colorectal cancer mortality in adults age 50 to 75 years. Follow-up of positive screening test results requires colonoscopy regardless of the screening test used.


Note that other organizations (e.g., American Cancer Society, American Academy of Family Physicians, American College of Physicians, National Cancer Institute) may have slightly different screening guidelines.

Risk factors for colorectal cancer may include age, personal and family history of polyps or colorectal cancer, inflammatory bowel disease, inherited syndromes, physical inactivity (colon only), obesity, alcohol use, and a diet high in fat and low in fruits and vegetables. Detecting and removing precancerous colorectal polyps and detecting and treating the disease in its earliest stages will reduce deaths from colorectal cancer.


Sigmoidoscopy/Colonoscopy

Among East Central Florida adults aged 50 and older, 72.5% had a sigmoidoscopy or colonoscopy at some point in their lives.

• More favorable than the Florida prevalence (58.9%).
• More favorable than national findings (64.8%).
• Satisfies the Healthy People 2010 target (50% or higher).

Does not vary significantly among the four counties.

TREND: Note the statistically significant increase in testing in the Greater Orlando area overall since 1999 (including in all three counties individually).
Fecal Occult Blood Testing

Among East Central Florida adults aged 50 and older, 45.6% had a blood stool test (a.k.a., fecal occult blood test) within the past two years.

- More favorable than national findings (36.5%).
- Fails to satisfy the Healthy People 2010 target (50% or higher).
- Notably lower (less favorable) in Brevard County (39.8%).

**TREND:** Note the *statistically significant decrease* in testing since 1999 in Greater Orlando overall, including in Orange County.
Have Had a Blood Stool Test in the Past Two Years
(Among Persons Aged 50 and Older)

Sources:
• PRC Community Health Surveys, Professional Research Consultants. [Item 189]
• PRC National Health Surveys, Professional Research Consultants.

Notes:
• Asked of respondents aged 50 and older
• Florida data not available.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
Female Breast Cancer Screening

FEMALE BREAST CANCER

Breast cancer is the most common cancer [diagnosis] among women in the United States. Death from breast cancer can be reduced substantially if the tumor is discovered at an early stage. Mammography is the most effective method for detecting these early malignancies. Clinical trials have demonstrated that mammography screening can reduce breast cancer deaths by 20 to 39 percent in women aged 50 to 74 years and about 17 percent in women aged 40 to 49 years. Breast cancer deaths can be reduced through increased adherence with recommendations for regular mammography screening.

Many breast cancer risk factors, such as age, family history of breast cancer, reproductive history, mammographic densities, previous breast disease, and race and ethnicity, are not subject to intervention. However, being overweight is a well-established breast cancer risk for postmenopausal women that can be addressed. Avoiding weight gain is one method by which older women may reduce their risk of developing breast cancer.


The U.S. Preventive Services Task Force (USPSTF) recommends screening mammography, with or without clinical breast examination (CBE), every 1-2 years for women aged 40 and older.

Rationale: The USPSTF found fair evidence that mammography screening every 12-33 months significantly reduces mortality from breast cancer. Evidence is strongest for women aged 50-69, the age group generally included in screening trials. For women aged 40-49, the evidence that screening mammography reduces mortality from breast cancer is weaker, and the absolute benefit of mammography is smaller, than it is for older women. Most, but not all, studies indicate a mortality benefit for women undergoing mammography at ages 40-49, but the delay in observed benefit in women younger than 50 makes it difficult to determine the incremental benefit of beginning screening at age 40 rather than at age 50.

The absolute benefit is smaller because the incidence of breast cancer is lower among women in their 40s than it is among older women. The USPSTF concluded that the evidence is also generalizable to women aged 70 and older (who face a higher absolute risk for breast cancer) if their life expectancy is not compromised by comorbid disease. The absolute probability of benefits of regular mammography increase along a continuum with age, whereas the likelihood of harms from screening (false-positive results and unnecessary anxiety, biopsies, and cost) diminish from ages 40-70. The balance of benefits and potential harms, therefore, grows more favorable as women age. The precise age at which the potential benefits of mammography justify the possible harms is a subjective choice. The USPSTF did not find sufficient evidence to specify the optimal screening interval for women aged 40-49.

Note that other organizations (e.g., American Cancer Society, American Academy of Family Physicians, American College of Physicians, National Cancer Institute) may have slightly different screening guidelines.

Mammography

Among East Central Florida women aged 40 and older, 8 in 10 (79.6%) have had a mammogram within the past two years.

- Comparable to national findings (74.6%).
- Satisfies the Healthy People 2010 target (70% or higher).
- Does not vary significantly among the four counties.

Note that 86.6% of East Central Florida women aged 65 and older had a mammogram in the preceding two years.
Have Had a Mammogram in the Past Two Years
(Among Women Aged 40 and Older)

Sources:
- PRC Community Health Surveys, Professional Research Consultants. [Item 186]
- PRC National Health Surveys, Professional Research Consultants.

Notes:
- Reflects women aged 40 and over.
- Florida data not available.
- *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
Cervical Cancer Screenings

CERVICAL CANCER

The U.S. Preventive Services Task Force (USPSTF) strongly recommends screening for cervical cancer in women who have been sexually active and have a cervix.

Rationale: The USPSTF found good evidence from multiple observational studies that screening with cervical cytology (Pap smears) reduces incidence of and mortality from cervical cancer. Direct evidence to determine the optimal starting and stopping age and interval for screening is limited. Indirect evidence suggests most of the benefit can be obtained by beginning screening within 3 years of onset of sexual activity or age 21 (whichever comes first) and screening at least every 3 years. The USPSTF concludes that the benefits of screening substantially outweigh potential harms.

The USPSTF recommends against routinely screening women older than age 65 for cervical cancer if they have had adequate recent screening with normal Pap smears and are not otherwise at high risk for cervical cancer.

Rationale: The USPSTF found limited evidence to determine the benefits of continued screening in women older than 65. The yield of screening is low in previously screened women older than 65 due to the declining incidence of high-grade cervical lesions after middle age. There is fair evidence that screening women older than 65 is associated with an increased risk for potential harms, including false-positive results and invasive procedures. The USPSTF concludes that the potential harms of screening are likely to exceed benefits among older women who have had normal results previously and who are not otherwise at high risk for cervical cancer.

The USPSTF recommends against routine Pap smear screening in women who have had a total hysterectomy for benign disease.

Rationale: The USPSTF found fair evidence that the yield of cytologic screening is very low in women after hysterectomy and poor evidence that screening to detect vaginal cancer improves health outcomes. The USPSTF concludes that potential harms of continued screening after hysterectomy are likely to exceed benefits.


Note that other organizations (e.g., American Cancer Society, American Academy of Family Physicians, American College of Physicians, National Cancer Institute) may have slightly different screening guidelines.

Pap Smear Testing

Among East Central Florida women aged 18 and older, 82.6% had a Pap smear within the past three years.

- Nearly identical to the Florida percentage (82.8%).
- Similar to national findings (81.3%).
- Fails to satisfy the Healthy People 2010 target (90% or higher).
- Highest (more favorable) in Seminole County (89.2%).

Note: Women under age 40 (87.6%) are close to satisfying the Healthy People 2010 target.
Have Had a Pap Smear Within the Past Three Years
(Among Women Aged 18 and Older)

Sources:
• PRC Community Health Surveys, Professional Research Consultants. [Item 79]
• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC).
• PRC National Health Surveys, Professional Research Consultants.

Notes:
• Asked of all female respondents.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
Prostate Cancer Screenings

PROSTATE CANCER

Prostate cancer is the most commonly diagnosed form of cancer (other than skin cancer) in males and the second leading cause of cancer death among males in the United States. Prostate cancer is most common in men aged 65 years and older, who account for approximately 80 percent of all cases of prostate cancer.

Digital rectal examination (DRE) and the prostate-specific antigen (PSA) test are two commonly used methods for detecting prostate cancer. Although several treatment alternatives are available for prostate cancer, their impact on reducing death from prostate cancer when compared with no treatment in patients with operable cancer is uncertain. Efforts aimed at reducing deaths through screening and early detection remain controversial because of the uncertain benefits and potential risks of screening, diagnosis, and treatment.


The U.S. Preventive Services Task Force (USPSTF) concludes that the current evidence is insufficient to assess the balance of benefits and harms of prostate cancer screening in men younger than age 75 years.

Rationale: Prostate cancer is the most common nonskin cancer and the second leading cause of cancer death in men in the United States. The USPSTF found convincing evidence that prostate-specific antigen (PSA) screening can detect some cases of prostate cancer.

In men younger than age 75 years, the USPSTF found inadequate evidence to determine whether treatment for prostate cancer detected by screening improves health outcomes compared with treatment after clinical detection.

The USPSTF found convincing evidence that treatment for prostate cancer detected by screening causes moderate-to-substantial harms, such as erectile dysfunction, urinary incontinence, bowel dysfunction, and death. These harms are especially important because some men with prostate cancer who are treated would never have developed symptoms related to cancer during their lifetime.

There is also adequate evidence that the screening process produces at least small harms, including pain and discomfort associated with prostate biopsy and psychological effects of false-positive test results.

The USPSTF recommends against screening for prostate cancer in men age 75 years or older.

Rationale: In men age 75 years or older, the USPSTF found adequate evidence that the incremental benefits of treatment for prostate cancer detected by screening are small to none.


Note that other organizations (e.g., American Cancer Society, American Academy of Family Physicians, American College of Physicians, National Cancer Institute) may have slightly different screening guidelines.

PSA Testing and/or Digital Rectal Examination

Among East Central Florida men aged 50 and older, 77.0% had a PSA (prostate-specific antigen) test and/or a digital rectal examination for prostate problems within the past two years.

- Similar to national findings (73.7%).
- No statistical difference when viewed by county.
- **TREND:** Note the statistically significant decrease in testing since 1999 in Orange County and across Greater Orlando overall. This is likely due to changes in clinical recommendations which no longer support prostate screening for all men aged 50 and older.
Have Had a Prostate-Specific Antigen (PSA) Test OR a Digital Rectal Exam in Past Two Years
(Among Men Aged 50 and Older)

Sources:
- PRC Community Health Surveys, Professional Research Consultants. [Item 187]
- PRC National Health Surveys, Professional Research Consultants.

Notes:
- Reflects male respondents aged 50 and older.
- Florida data not available.
- *Greater Orlando includes Orange, Osceola & Seminole counties. Brevard County was not surveyed in 1999.
Respiratory Disease

Asthma is among the 10 leading chronic conditions causing restricted activity [in Americans]. After chronic sinusitis, asthma is the most common cause of chronic illness in children. Methods are available to treat these respiratory diseases and promote respiratory health.

Asthma is a serious and growing health problem. An estimated 14.9 million persons in the United States have asthma. Asthma is responsible for about 500,000 hospitalizations, 5,000 deaths, and 134 million days of restricted activity a year. Yet most of the problems caused by asthma could be averted if persons with asthma and their healthcare providers managed the disease according to established guidelines.


[Note: Chronic lower respiratory disease (CLRD) was called chronic obstructive pulmonary disease (COPD) prior to 1999 with the issuance of the International Classification of Diseases, Tenth Revision (ICD-10). Healthy People 2010 refers to COPD rather than CLRD.]

Survey respondents were asked to indicate whether they suffer from respiratory conditions such as asthma and/or chronic lung disease.

A total of 10.1% of East Central Florida adults have been diagnosed with asthma.

- More favorable than found nationally (13.6%).
- No statistical difference by county.

Self-Reported Asthma

<table>
<thead>
<tr>
<th>Year</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>Greater Orlando*</th>
<th>East Central Florida</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>10.2%</td>
<td>8.0%</td>
<td>9.1%</td>
<td>9.1%</td>
<td>11.9%</td>
<td>12.6%</td>
<td>10.3%</td>
</tr>
<tr>
<td>2004</td>
<td>9.4%</td>
<td>8.5%</td>
<td>8.2%</td>
<td>8.5%</td>
<td>10.3%</td>
<td>10.0%</td>
<td>9.9%</td>
</tr>
<tr>
<td>2009</td>
<td>10.8%</td>
<td>10.1%</td>
<td>10.0%</td>
<td>9.1%</td>
<td>10.8%</td>
<td>10.8%</td>
<td>13.6%</td>
</tr>
</tbody>
</table>

Significant vs. US

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Items 26]
• PRC National Health Surveys, Professional Research Consultants.

Notes: • Asked of all respondents.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
East Central Florida women are significantly more likely than men to report suffering from asthma.

**Self-Reported Asthma**

(East Central Florida)

<table>
<thead>
<tr>
<th>Category</th>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>&lt; Poverty</th>
<th>100%-200% Pov</th>
<th>&gt;200% Pov</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Insured</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.3%</td>
<td>11.9%</td>
<td>10.2%</td>
<td>10.6%</td>
<td>8.9%</td>
<td>16.2%</td>
<td>10%</td>
<td>10.1%</td>
<td>9.3%</td>
<td>10.3%</td>
<td>10.6%</td>
<td>10.7%</td>
<td>9.2%</td>
</tr>
</tbody>
</table>

*Source:* 2009 PRC Community Health Survey, Professional Research Consultants. [Item 26]

*Note:* Asked of all respondents.

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### Children

While the number of adults with asthma is greater than the number of children with asthma, the asthma rate is rising more rapidly in preschool-aged children than in any other group.


**Among East Central Florida children under 18, 14.8% are reported to have been diagnosed with asthma.**

- Statistically similar to national findings (19.2%).
- Statistically similar among the four counties.
- Viewed by child’s gender, asthma prevalence is higher in boys.
Child Has Asthma
(Among Respondents With Children Aged 0-17)

Sources:
• PRC Community Health Surveys, Professional Research Consultants. [Items 143]
• PRC National Health Surveys, Professional Research Consultants.

Notes:
• Asked of respondents with children aged 0-17.
• Florida data not available.  
• Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.

Chronic Lung Disease

A total of 8.1% of East Central Florida adults have been diagnosed with chronic lung disease.

- Similar to the national prevalence (9.9%).
- No statistical difference when viewed by county.

**TREND:** Note the *statistically significant increase* in chronic lung disease in Seminole County since 1999.

Self-Reported Chronic Lung Disease

Sources:
• PRC Community Health Surveys, Professional Research Consultants. [Item 25]
• PRC National Health Surveys, Professional Research Consultants.

Notes:
• Asked of all respondents. 
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.*
Diabetes

Diabetes affects nearly 16 million Americans and contributes to about 200,000 deaths a year. Diabetes can cause heart disease, stroke, blindness, kidney failure, leg and foot amputations, pregnancy complications, and deaths related to influenza and pneumonia. About 5.4 million Americans are unaware they have the disease.

Among U.S. adults, diagnosed diabetes (including gestational diabetes) increased 49% from 1990 to 2000. The largest increase was among people aged 30–39. Type 2 affects 90%–95% of people with diabetes and is linked to obesity and physical inactivity.

More than 18% of U.S. adults older than age 65 have diabetes.

Diabetes affects more women than men.

The direct and indirect costs of diabetes in America are nearly $100 billion a year.

– National Center for Chronic Disease Prevention and Health Promotion, Centers for Disease Control and Prevention

Prevalence of Diabetes

Among surveyed East Central Florida adults, 12.0% report having been diagnosed with diabetes.

• Statistically similar to national findings (11.1%).

• Lowest (most favorable) in Seminole County (9.2%).

TREND: Note the statistically significant increase in the reported prevalence of diabetes across Greater Orlando since 1999.

Self-Reported Prevalence of Diabetes

Sources: • PRC Community Health Surveys, Professional Research Consultants. Item 34

• PRC National Health Surveys, Professional Research Consultants.

Notes: • Asked of all respondents. Excludes gestational diabetes.

• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
A higher prevalence of diabetes is reported among:

- Older adults (note a positive correlation with age, with 21.9% of seniors with diabetes).
- Obese individuals.

**Self-Reported Prevalence of Diabetes**
(East Central Florida, 2004)

![Bar chart showing self-reported prevalence of diabetes among different demographics.]

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 34]
Note: • Asked of all respondents.

**Diabetes Management**

Among East Central Florida adults with diabetes, most (93.1%) are currently taking some type of action (such as taking medication, diet modification or exercising) to manage their condition.

**Taking Action to Control Diabetes**
(Among East Central Florida Diabetics, 2009)

![Pie chart showing the percentage of self-reported diabetics taking action.]

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 35]
Note: • Asked of all self-reported diabetics.
When East Central Florida diabetic respondents were asked what they need the most help with to take care of or manage their diabetes, the most common responses related to medications (25.0%) or diet/nutrition (24.0%).

**Type of Help Needed With Controlling Diabetes**  
(Among East Central Florida Diabetics, 2009)

- **Medicine**: 25.0%
- **Diet/Nutrition**: 24.0%
- **Nothing**: 21.3%
- **Exercise**: 10.9%
- **Multiple Things**: 5.5%
- **Education**: 5.0%
- **Equipment**: 3.9%
- **Support**: 3.2%
- **Other**: 1.2%
- **Other**: 1.2%

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 36]  
Note: • Asked of all self-reported diabetics.

**Awareness of Blood Sugar Numbers**

Among all East Central Florida survey respondents, more than one-third (35.4%) are aware of their blood sugar/glucose levels.

- Notably lower among diabetics in Seminole County (29.3%; not shown).

**TREND**: Awareness of blood sugar/glucose levels has improved significantly in East Central Florida since 2004.

**Aware of Personal Blood Sugar/Glucose Levels**  
(East Central Florida, 2009)

- **Yes**: 25.6%
- **No/Never Tested**: 74.1%
- **Dr. Didn’t Tell Me**: 0.3%

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 37]  
Note: • Asked of all respondents.
Arthritis & Osteoporosis

The current and projected growth in the number of people aged 65 years and older in the United States has focused attention on preserving quality of life, as well as length of life. Chief among the factors involving preserving quality of life are the prevention and treatment of musculoskeletal conditions—the major causes of disability in the United States. Among musculoskeletal conditions, arthritis and other rheumatic conditions, osteoporosis, and chronic back conditions have the greatest impact on public health and quality of life.


Prevalence of Arthritis & Rheumatism

In all, one-fifth (20.3%) of East Central Florida adults report suffering from arthritis or rheumatism.

- More favorable than that found nationwide (24.2%).
- Highest (worst) in Brevard County; lowest (best) in Seminole County.
- Among East Central Florida adults aged 65 and older, the prevalence of arthritis or rheumatism is 44.0%.

Self-Reported Prevalence of Arthritis/Rheumatism

The East Central Florida 2009 prevalence is 4% among adults aged 65+.

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Prevalence of Osteoporosis

A total of 6.8% of East Central Florida adults report suffering from osteoporosis.

- Comparable to that found nationwide (6.7%).
- Similar among the four counties.

Further note that osteoporosis is much more prevalent among women aged 65 and older (affecting 33.0% of this segment).

Self-Reported Prevalence of Osteoporosis

The East Central Florida prevalence increases to 33.0% among women aged 65+.

<table>
<thead>
<tr>
<th>County</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>9.5%</td>
<td>8.5%</td>
</tr>
<tr>
<td>Orange County</td>
<td>5.8%</td>
<td>6.5%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>6.4%</td>
<td>6.1%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>5.9%</td>
<td>5.9%</td>
</tr>
<tr>
<td>Greater Orlando*</td>
<td>3.6%</td>
<td>6.8%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>6.3%</td>
<td>6.8%</td>
</tr>
<tr>
<td>United States</td>
<td>5.7%</td>
<td>6.7%</td>
</tr>
</tbody>
</table>

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 32]
• PRC National Health Surveys, Professional Research Consultants.

Notes: • Asked of all respondents.
• Florida data not available.
Influenza & Pneumonia Vaccination

Flu Shots

Seniors

Among East Central Florida adults aged 65 and older, two-thirds (66.1%) received a flu shot within the past year.

- Comparable to the Florida finding (61.5%).
- Less favorable than the national finding (73.2%).
- Fails to satisfy the Healthy People 2010 target (90% or higher).
- Does not vary significantly by county.

Includes 63.3% of men 65+ and 68.6% of women 65+ in East Central Florida.

Have Had a Flu Shot in the Past Year
(Among Adults Aged 65 and Older)

Sources:
- PRC Community Health Surveys, Professional Research Consultants. [Item 190]
- PRC National Health Surveys, Professional Research Consultants.

Notes:
- Represents respondents aged 65 and older.
- *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
High-Risk Adults*

More than 4 in 10 East Central Florida high-risk adults aged 18 to 64 (42.6%) received a flu shot within the past year.

- Statistically comparable to national findings (43.7%).
- Fails to satisfy the Healthy People 2010 target (60% or higher).
- Does not vary significantly by county.
- **TREND:** Note the statistically significant increase in flu shots among high-risk adults in Greater Orlando and East Central Florida overall.

**Have Had a Flu Shot in the Past Year**
(Among High-Risk Adults Aged 18 to 64)

Sources:
- PRC Community Health Surveys, Professional Research Consultants. [Item 191]
- PRC National Health Surveys, Professional Research Consultants.

Note:
- "High-Risk" includes adults aged 18 to 64 who have been diagnosed with heart disease, diabetes or respiratory disease.

* "High-risk" includes adults who report having been diagnosed with heart disease, diabetes or respiratory disease.
Pneumonia Vaccination

Seniors

A total of 69.3% of East Central Florida adults aged 65 and older have received a pneumonia vaccination at some point in their lives.

- More favorable than the 62.9% reported across Florida.
- Nearly identical to the national finding (69.7%).
- Fails to satisfy the Healthy People 2010 objective of 90% or higher.
- Does not vary significantly by county.

### Have Ever Had a Pneumonia Vaccination
(Among Adults Aged 65 and Older)

![Graph showing pneumonia vaccination rates by county and gender]

**Sources:**
- PRC Community Health Surveys, Professional Research Consultants. [Item 192]
- PRC National Health Surveys, Professional Research Consultants.

**Note:**
- Reflects respondents aged 65 and older.
High-Risk Adults*

A total of 32.4% of East Central Florida high-risk adults aged 18 to 64 have received a pneumonia vaccination at some point in their lives.

- Statistically similar to national findings (36.1%).
- Fails to satisfy the Healthy People 2010 target (60% or higher).
- Notably higher (45.0%) in Osceola County.

**TREND:** Note the statistically significant increase in pneumonia vaccines among high-risk adults in Osceola County since 2004.

**Have Ever Had a Pneumonia Vaccination**

(Among High-Risk Adults Aged 18 to 64)

<table>
<thead>
<tr>
<th>County</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>26.6%</td>
<td>35.2%</td>
</tr>
<tr>
<td>Orange County</td>
<td>27.0%</td>
<td>28.5%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>29.2%</td>
<td>45.0%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>21.0%</td>
<td>32.0%</td>
</tr>
<tr>
<td>Greater Orlando*</td>
<td>26.0%</td>
<td>31.6%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>26.2%</td>
<td>32.4%</td>
</tr>
<tr>
<td>United States</td>
<td>24.3%</td>
<td>36.1%</td>
</tr>
</tbody>
</table>

**Healthy People 2010 Objective is 60% or higher**

**Significant vs. 2004**

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 193]
• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC).
• PRC National Health Surveys, Professional Research Consultants.

Note: • "High-Risk" includes adults aged 18 to 64 who have been diagnosed with heart disease, diabetes or respiratory disease.

* "High-risk" includes adults who report having been diagnosed with heart disease, diabetes or respiratory disease.
**HIV Testing**

In the United States, HIV/AIDS remains a significant cause of illness, disability, and death, despite declines in 1996 and 1997.

Behaviors (sexual practices, substance abuse, and accessing prenatal care) and biomedical status (having other STDs) are major determinants of HIV transmission. Unprotected sexual contact, whether homosexual or heterosexual, with a person infected with HIV and sharing drug-injection equipment with an HIV-infected individual account for most HIV transmission in the United States. Increasing the number of people who know their HIV serostatus is an important component of a national program to slow or halt the transmission of HIV in the United States.

For persons infected with HIV, behavioral determinants also play an important role in health maintenance. Although drugs are available specifically to prevent and treat a number of opportunistic infections, HIV-infected individuals also need to make lifestyle-related behavioral changes to avoid many of these infections. The new HIV antiretroviral drug therapies for HIV infection bring with them difficulties in adhering to complex, expensive, and demanding medication schedules, posing a significant challenge for many persons infected with HIV.

Because HIV infection weakens the immune system, people with tuberculosis (TB) infection and HIV infection are at very high risk of developing active TB disease.

Comparing the 1980s to the 1990s, the proportion of AIDS cases in White men who have sex with men declined, whereas the proportion in females and males in other racial and ethnic populations increased, particularly among African Americans and Hispanics. AIDS cases also appeared to be increasing among injection drug users and their sexual partners. The true extent of the epidemic remains difficult to assess for several reasons, including the following:

Because of the long period of time from initial HIV infection to AIDS and because highly active antiretroviral therapy (HAART) has slowed the progression to AIDS, new cases of AIDS no longer provide accurate information about the current HIV epidemic in the United States.

Because of a lack of awareness of HIV serostatus as well as delays in accessing counseling, testing, and care services by individuals who may be infected or are at risk of infection, some populations do not perceive themselves to be at risk. As a result, some HIV-infected persons are not identified and provided care until late in the course of their infection.


**Among East Central Florida adults aged 18 to 64 years, 59.1% report that they have ever been tested for human immunodeficiency virus (HIV).**

- Better than the proportion found nationwide (53.0%).
- Statistically similar among counties.
Have Ever Been Tested for Human Immunodeficiency Virus (HIV)
(Among Adults Aged 18 to 64)

Sources:
• PRC Community Health Surveys, Professional Research Consultants. [Items 182]
• PRC National Health Surveys, Professional Research Consultants.

Notes:
• Reflects respondents aged 18 through 64.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.

Note that 23.9% of adults aged 18 to 64 report that they had an HIV test within the past year (vs. 20.2% nationally).
INFANT & CHILD HEALTH

The health of mothers, infants, and children is of critical importance, both as a reflection of the current health status of a large segment of the U.S. population and as a predictor of the health of the next generation.

Access to Prenatal Care

Early and continuous prenatal care is the best assurance of infant health.

African American and Hispanic women are less likely than Whites to enter prenatal care early. For both African American and White women, the proportion entering prenatal care in the first trimester rises with maternal age until the late 30s, then begins to decline. Women in certain racial and ethnic groups also are less likely than White women to breastfeed their infants.


Among respondents with a child under 18 living at home, 5.6% indicate that they (or the child’s mother) had difficulty obtaining prenatal care when pregnant with the child.

- Statistically similar when viewed by county (not shown).

While many of these respondents specifically mentioned dealing with a premature birth, other barriers to prenatal care included cost/lack of insurance and poor availability of doctors.

Difficulties Obtaining Prenatal Care
(East Central Florida, 2009)

<table>
<thead>
<tr>
<th>Respondent or Child’s Mother Had Difficulty Obtaining Prenatal Care When Pregnant</th>
<th>Type of Problem Encountered When Seeking Prenatal Care</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes 5.6%</td>
<td>Other 2.6%</td>
</tr>
<tr>
<td>No 94.4%</td>
<td>Uncertain 16.4%</td>
</tr>
</tbody>
</table>

Source: • 2009 PRC Community Health Survey, Professional Research Consultants [Items 127-128]
Notes: • Asked of all respondents with children under 18.
• State and U.S. data not available.

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</tr>
</tbody>
</table>

Source: • 2009 PRC Community Health Survey, Professional Research Consultants [Items 127-128]
Notes: • Asked of all respondents with children under 18.
• State and U.S. data not available.
Awareness & Use of Healthy Start Coalition Services

Overall, nearly one-half (49.1%) of surveyed parents are aware of services offered in the county for pregnant women and infants by the Healthy Start Coalition.

- Statistically similar when viewed by county.

Women and adults living at lower incomes are more likely to be aware of Healthy Start Coalition services.

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Item 129]
Notes: Asked of all respondents with children under 18 at home.
Florida and national data not available.
Overall, 15.2% of surveyed parents have used the services of the Healthy Start Coalition.

- Lowest in Osceola County (not shown).

**Have Used the Healthy Start Coalition Services**
(East Central Florida Parents, 2009)

<table>
<thead>
<tr>
<th>Yes</th>
<th>15.2%</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>84.8%</td>
</tr>
</tbody>
</table>

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 130]
Note: • Asked of parents with children under 18.
MODIFIABLE HEALTH RISK BEHAVIORS

It is estimated that as many as 40% of premature deaths in the United States are attributed to behavioral factors, such as the daily choices we make with respect to diet, physical activity, and sex; the substance abuse and addictions to which we fall prey; our approach to safety; and our coping strategies in confronting stress. Behavior patterns represent the single-most prominent domain of influence over health prospects in the U.S.

Actual Causes Of Death

A 2002 study (an update to a landmark 1993 study), estimated that as many as 40% of premature deaths in the United States are attributed to behavioral factors. This study found that behavior patterns represent the single-most prominent domain of influence over health prospects in the United States. The daily choices we make with respect to diet, physical activity, and sex; the substance abuse and addictions to which we fall prey; our approach to safety; and our coping strategies in confronting stress are all important determinants of health.

The most prominent contributors to mortality in the United States in 2000 were tobacco (an estimated 435,000 deaths), diet and activity patterns (400,000), alcohol (85,000), microbial agents (75,000), toxic agents (55,000), motor vehicles (43,000), firearms (29,000), sexual behavior (20,000), and illicit use of drugs (17,000). Socioeconomic status and access to medical care are also important contributors, but difficult to quantify independent of the other factors cited. Because the studies reviewed used different approaches to derive estimates, the stated numbers should be viewed as first approximations.

These analyses show that smoking remains the leading cause of mortality. However, poor diet and physical inactivity may soon overtake tobacco as the leading cause of death. These findings, along with escalating healthcare costs and aging population, argue persuasively that the need to establish a more preventive orientation in the U.S. healthcare and public health systems has become more urgent.

Ali H. Mokdad, PhD; James S. Marks, MD, MPH; Donna F. Stroup, PhD, MSc; Julie L. Gerberding, MD, MPH. “Actual Causes of Death in the United States.” JAMA, 291(2004):1238-1245.

Factors Contributing to Premature Deaths in the United States


While causes of death are typically described as the diseases or injuries immediately precipitating the end of life, a few important studies have shown that the actual causes of premature death (reflecting underlying risk factors) are often preventable.

<table>
<thead>
<tr>
<th>Leading Causes of Death</th>
<th>Underlying Risk Factors (Actual Causes of Death)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cardiovascular disease</td>
<td>Tobacco use</td>
</tr>
<tr>
<td></td>
<td>Elevated serum cholesterol</td>
</tr>
<tr>
<td></td>
<td>High blood pressure</td>
</tr>
<tr>
<td>Cancer</td>
<td>Tobacco use</td>
</tr>
<tr>
<td></td>
<td>Improper diet</td>
</tr>
<tr>
<td>Cerebrovascular disease</td>
<td>High blood pressure</td>
</tr>
<tr>
<td></td>
<td>Tobacco use</td>
</tr>
<tr>
<td>Accidental injuries</td>
<td>Safety belt noncompliance</td>
</tr>
<tr>
<td></td>
<td>Alcohol/substance abuse</td>
</tr>
<tr>
<td></td>
<td>Reckless driving</td>
</tr>
<tr>
<td>Chronic lung disease</td>
<td>Tobacco use</td>
</tr>
</tbody>
</table>

Nutrition & Overweight

Nutrition

Consumption of Fruits & Vegetables

Daily Recommendation

A total of 40.1% of surveyed East Central Florida adults report eating five or more servings of fruits and/or vegetables per day.

- Much higher than the Florida (26.2%) percentage [note, however, that the question structure is slightly different in the statewide survey].
- Comparable to national findings (43.5%).
- Similar among the counties.

**TREND:** Note the *statistically significant increase* in fruit and vegetable consumption over time in East Central Florida (namely due to the increase in the three counties comprising the Greater Orlando area).

**Consume Five or More Servings of Fruits/Vegetables per Day**

As shown in the following chart, respondents less likely to eat the daily recommended number of servings of fruits and vegetables include:

- Men.
- Residents living below 200% of the federal poverty level.
- Blacks and Hispanics (when compared with Whites).
Consume Five or More Servings of Fruits/Vegetables per Day
(East Central Florida)

Fruits

More specifically, 57.6% of East Central Florida adults report eating at least two servings of fruit per day.

- Comparable to national findings (58.4%).
- Fails to satisfy the Healthy People 2010 target (75% or higher).
- Notably lower in Seminole County (51.9%).

Consume Two or More Servings of Fruits per Day

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 174]
Notes: • Asked of all respondents.
   • For this issue, respondents were asked to recall the foods they had eaten on the day prior to the interview.
Vegetables

A total of 32.3% of survey respondents report eating three or more servings of vegetables per day, at least one-third of which are dark green or orange vegetables.

- Less favorable than national findings (38.8%).
- Fails to satisfy the Healthy People 2010 target (50% or higher).
- No significant differences by county.

**TREND:** Note the statistically significant increase in vegetable consumption since 2004 in Osceola County, as well as in Greater Orlando and East Central Florida overall.

**Consume Three or More Servings of Vegetables per Day, One-Third of Which Are Dark Green or Orange**

![Vegetables Consumption Chart]

Source:  
- PRC Community Health Surveys, Professional Research Consultants. [Item 173]  
- PRC National Health Surveys, Professional Research Consultants.  

Notes:  
- Asked of all respondents.
- For this issue, respondents were asked to recall the foods they had eaten on the day prior to the interview.
Perceptions About Nutrition

When asked what they think is the recommended servings of fruits and vegetables that should be eaten daily, the median response was 4 servings per day.

- 27.5% consider 5 servings to be the recommended daily allotment of fruits and vegetables (and 19.7% mentioned a higher number).
- Most (52.8%), however, mentioned fewer than 5 servings per day.

In a related inquiry, East Central Florida respondents gave a median response of 3 as the maximum number of sugar-sweetened drinks a child should have per week.

- 20.3% do not feel children should consume any sugar-sweetened drinks.
- 8.2% said one, 12.5% said two, and 11.2% said three drinks per week maximum.

Among households with children, the median response was also 3 servings /week.
**Health Advice About Diet & Nutrition**

A total of 42.1% of East Central Florida respondents acknowledge that a physician counseled them about diet and nutrition in the past year.

- More favorable than national findings (38.2%).
- Similar by county (not shown).

Note: Among East Central Florida obese respondents, 60.2% report receiving diet/nutrition advice.

**Physician Has Asked About or Given Advice Regarding Diet & Nutrition in the Past Year**

(By Weight Status)

<table>
<thead>
<tr>
<th>Weight Status</th>
<th>East Central Florida 2009</th>
<th>United States 2008</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy Weight</td>
<td>33.7%</td>
<td>36.3%</td>
</tr>
<tr>
<td>Overweight/Not Obese</td>
<td>60.2%</td>
<td></td>
</tr>
<tr>
<td>Obese</td>
<td>42.1%</td>
<td>38.2%</td>
</tr>
</tbody>
</table>

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 19]
• 2008 PRC National Health Survey, Professional Research Consultants.

Note: • Asked of all respondents.
**Body Weight**

Body Mass Index (BMI), which describes relative weight for height, is significantly correlated with total body fat content. The BMI should be used to assess overweight and obesity and to monitor changes in body weight. In addition, measurements of body weight alone can be used to determine efficacy of weight loss therapy. BMI is calculated as weight (kg)/height squared (m2). To estimate BMI using pounds and inches, use: \[
\text{BMI (kg/m2)} = \left(\frac{\text{weight (pounds)}}{\text{height squared (inches2)}}\right) \times 703.
\]

In this report, overweight is defined as a BMI of 25.0 to 29.9 kg/m2 and obesity as a BMI of 30 kg/m2. The rationale behind these definitions is based on epidemiological data that show increases in mortality with BMIs above 25 kg/m2. The increase in mortality, however, tends to be modest until a BMI of 30 kg/m2 is reached. For persons with a BMI of 30 kg/m2, mortality rates from all causes, and especially from cardiovascular disease, are generally increased by 50 to 100 percent above that of persons with BMIs in the range of 20 to 25 kg/m2.

Overweight and obesity result from a complex interaction between genes and the environment characterized by long-term energy imbalance due to a sedentary lifestyle, excessive caloric consumption, or both. They develop in a socio-cultural environment characterized by mechanization, sedentary lifestyle, and ready access to abundant food. Attempts to prevent overweight and obesity are difficult to both study and achieve.

---

**Classification of Overweight and Obesity by BMI**

<table>
<thead>
<tr>
<th>Classification</th>
<th>BMI (kg/m2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Underweight</td>
<td>&lt;18.5</td>
</tr>
<tr>
<td>Normal</td>
<td>18.5 – 24.9</td>
</tr>
<tr>
<td>Overweight</td>
<td>25.0 – 29.9</td>
</tr>
<tr>
<td>Obese</td>
<td>≥30.0</td>
</tr>
</tbody>
</table>


---

**Healthy Weight**

Based on self-reported heights and weights, 33.4% of East Central Florida adults are at a healthy weight (neither underweight nor overweight, BMI = 18.5-24.9).

- Less favorable than the Florida finding (37.9%).
- Comparable to the national finding (32.0%).
- Far from reaching the Healthy People 2010 target (40% or higher).
- No statistical difference by county.

**TREND:** Note the statistically significant decrease in healthy weight across Orange County, Greater Orlando, and East Central Florida over time.
Healthy Weight
(Body Mass Index Between 18.5 and 24.9)

Sources:
• PRC Community Health Surveys, Professional Research Consultants.
• PRC National Health Surveys, Professional Research Consultants.
• Behavioral Risk Factor Surveillance System Survey Data, Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC).

Notes:
• Based on self-reported height and weight, asked of all respondents.
• The definition of healthy weight is having a body mass index (BMI), a ratio of weight to height (kilograms divided by meters squared), between 18.5 and 24.9.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
Overweight Status

Adults

In all, 64.9% of East Central Florida adults are overweight (BMI ≥25).

• Less favorable than the Florida percentage (62.1%).
• Similar to the U.S. overweight proportion (67.4%).
• Statistically similar by county.

**TREND:** Note the *statistically significant increases* in overweight prevalence in Brevard and Orange Counties, as well as throughout Greater Orlando and East Central Florida overall.

Prevalence of Overweight

<table>
<thead>
<tr>
<th></th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>Greater Orlando*</th>
<th>East Central Florida</th>
<th>Florida</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>58.7%</td>
<td>51.1%</td>
<td>58.5%</td>
<td>57.0%</td>
<td>63.1%</td>
<td>63.9%</td>
<td>64.9%</td>
<td>67.4%</td>
</tr>
<tr>
<td>2004</td>
<td>60.8%</td>
<td>62.6%</td>
<td>59.0%</td>
<td>57.0%</td>
<td>66.4%</td>
<td>64.9%</td>
<td>62.1%</td>
<td>67.4%</td>
</tr>
<tr>
<td>2009</td>
<td>66.2%</td>
<td>65.2%</td>
<td>63.5%</td>
<td>63.1%</td>
<td>64.5%</td>
<td>65.4%</td>
<td>62.1%</td>
<td>67.4%</td>
</tr>
</tbody>
</table>

Sources:
• PRC Community Health Surveys, Professional Research Consultants, [Item 164]
• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC).
• PRC National Health Surveys, Professional Research Consultants.

Notes:
• Based on self-reported height and weight, asked of all respondents.
• The definition of overweight is having a body mass index (BMI), a ratio of weight to height (kilograms divided by meters squared), greater than or equal to 25.0, regardless of gender.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.

Specifically, 27.9% of East Central Florida adults are obese (BMI ≥30).

• Less favorable than the Florida percentage (24.1%).
• Similar to U.S. findings (29.0%).
• Fails to satisfy the Healthy People 2010 target (15% or lower).
• Lower (21.3%) in Seminole County.

**TREND:** Note the *statistically significant increases* in obesity for Brevard, Orange, and Osceola Counties, as well as throughout Greater Orlando and East Central Florida overall.
The following chart further examines East Central Florida obesity by demographic characteristics. Obesity is more prevalent among:

- **Men.**
- **Adults aged 40 to 64.**
- **Residents living at lower incomes.**
- **Blacks.**

**Prevalence of Obesity**

(East Central Florida, 2009)

Sources: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 164]

Notes: • Based on self-reported height and weight, asked of all respondents.
• The definition of obesity is having a body mass index (BMI), a ratio of weight to height (kilograms divided by meters squared), greater than or equal to 30.0.
Health Advice About Weight Management

About one out of five East Central Florida adults (21.6%) has been advised to lose weight by a doctor, nurse or other health professional in the past year.

Note that nearly one-half (48.5%) of obese East Central Florida adults have been given advice about their weight by a health professional in the past year.

Physician, Nurse or Other Health Professional Told Respondent to Lose Weight in the Past Year

Among those respondents whose physician told them to lose weight in the past year, specific recommendations included diet and exercise (mentioned by 37.4%), exercise alone (28.9%), and diet alone (18.3%).

- Most (72.7%) of these respondents acknowledged that they did follow their physician’s recommendation.

Specific Recommendation by Health Professional
(Among ECF Respondents Whose Physician Recommended Losing Weight)

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Items 107, 108]
Note: Asked of all respondents whose physician has recommended losing weight.
Weight Management

Nearly one-half of East Central Florida adults who are overweight (47.5%) say that they are both modifying their diet and increasing their physical activity to try to lose weight.

- More favorable than the national findings (28.7%).

Note: 55.0% of obese East Central Florida adults are trying to lose weight through a combination of diet and exercise.

**Trying to Lose Weight by Both Modifying Diet and Increasing Physical Activity**

(Among Respondents Who Are Overweight)

<table>
<thead>
<tr>
<th>Overweight or Obese Adults</th>
<th>Obese Adults</th>
</tr>
</thead>
<tbody>
<tr>
<td>East Central Florida 2009</td>
<td>47.5%</td>
</tr>
<tr>
<td>United States 2008</td>
<td>28.7%</td>
</tr>
<tr>
<td></td>
<td>55.0%</td>
</tr>
<tr>
<td></td>
<td>43.0%</td>
</tr>
</tbody>
</table>

Sources: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 166]  
• 2008 PRC National Health Survey, Professional Research Consultants.

Notes: • Reflects responses among overweight respondents (categories are not mutually exclusive).  
• Florida data not available.

**TREND:** Note the statistically significant increase in overweight East Central Florida adults who are both modifying their diet and increasing their physical activity to try to lose weight (also significant in Brevard, Osceola and Seminole Counties, as well as the Greater Orlando area overall).

**Trying to Lose Weight by Both Modifying Diet and Increasing Physical Activity**

(Among Respondents Who Are Overweight)

<table>
<thead>
<tr>
<th>1999</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>Orange County</td>
<td>Osceola County</td>
</tr>
<tr>
<td>30.9%</td>
<td>36.3%</td>
<td>36.3%</td>
</tr>
<tr>
<td>35.0%</td>
<td>35.7%</td>
<td>35.4%</td>
</tr>
<tr>
<td>35.4%</td>
<td>37.0%</td>
<td>37.0%</td>
</tr>
<tr>
<td>36.4%</td>
<td>35.0%</td>
<td>35.0%</td>
</tr>
</tbody>
</table>

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 166]  
• PRC National Health Surveys, Professional Research Consultants.

Notes: • Reflects overweight respondents.  
• *Greater Orlando includes Orange, Osceola & Seminole Counties.  Brevard County was not surveyed in 1999.
Perceptions of Factors Influencing Child Obesity

Of the tested factors, East Central Florida adults believe that lack of exercise, junk food/fast food, and too much leisure screen time (television, computer and video games) contribute the most to the problem of obesity in children and teens.

- Most also feel that eating for the “wrong reasons” (i.e., boredom, comfort) and lack of self-control contribute “a lot” to the problem.

Factors Perceived as Contributing to Youth Obesity

(East Central Florida, 2009)

<table>
<thead>
<tr>
<th>Factor</th>
<th>A Lot</th>
<th>Some</th>
<th>A Little</th>
<th>Not At All</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not Enough Exercise</td>
<td>11.4%</td>
<td></td>
<td></td>
<td>84.8%</td>
</tr>
<tr>
<td>Too Much Junk Food/Fast Food</td>
<td>11.6%</td>
<td></td>
<td></td>
<td>84.1%</td>
</tr>
<tr>
<td>Too Much Leisure Screen Time</td>
<td>16.5%</td>
<td></td>
<td></td>
<td>79.7%</td>
</tr>
<tr>
<td>Eating for the Wrong Reasons (Boredom, Comfort)</td>
<td>24.2%</td>
<td></td>
<td></td>
<td>66.4%</td>
</tr>
<tr>
<td>Lack of Self-Control</td>
<td>30.6%</td>
<td></td>
<td></td>
<td>66.1%</td>
</tr>
</tbody>
</table>

Sources: • 2009 PRC Community Health Survey, Professional Research Consultants. [Items 148-152]
Note: • Asked of all respondents.
Physical Activity & Fitness

The 1990s brought a historic new perspective to exercise, fitness, and physical activity by shifting the focus from intensive vigorous exercise to a broader range of health-enhancing physical activities. Research has demonstrated that virtually all individuals will benefit from regular physical activity. A Surgeon General’s report on physical activity and health concluded that moderate physical activity can reduce substantially the risk of developing or dying from heart disease, diabetes, colon cancer, and high blood pressure. Physical activity also may protect against lower back pain and some forms of cancer (for example, breast cancer), but the evidence is not yet conclusive.

On average, physically active people outlive those who are inactive. Regular physical activity also helps to maintain the functional independence of older adults and enhances the quality of life for people of all ages.

The role of physical activity in preventing coronary heart disease (CHD) is of particular importance, given that CHD is the leading cause of death and disability in the United States. Physically inactive people are almost twice as likely to develop CHD as persons who engage in regular physical activity. The risk posed by physical inactivity is almost as high as several well-known CHD risk factors, such as cigarette smoking, high blood pressure, and high blood cholesterol. Physical inactivity, though, is more prevalent than any one of these other risk factors. People with other risk factors for CHD, such as obesity and high blood pressure, may particularly benefit from physical activity.


Work-Related Activity

A majority of employed East Central Florida respondents report low levels of physical activity at work.

- Two-thirds (64.7%) of employed East Central Florida respondents report that their job entails mostly sitting or standing, less favorable than the U.S. figure (59.3%).
- 22.7% report that their job entails mostly walking (lower than the 26.3% reported nationally).
- 12.6% report that their work is physically demanding (comparable to the 14.4% reported across the nation).

Primary Level of Physical Activity at Work
(Among Employed Respondents)

<table>
<thead>
<tr>
<th>100.0%</th>
<th>80.0%</th>
<th>60.0%</th>
<th>40.0%</th>
<th>20.0%</th>
<th>0.0%</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Sitting/Standing</td>
<td>Walking</td>
<td>Physically Demanding</td>
<td></td>
<td></td>
</tr>
<tr>
<td>East Central Florida 2009</td>
<td>64.7%</td>
<td>22.7%</td>
<td>12.6%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>United States 2008</td>
<td>59.3%</td>
<td>26.3%</td>
<td>14.4%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 89]
• 2008 PRC National Health Survey, Professional Research Consultants.
Note: • Asked of all employed respondents.
Leisure-Time Physical Activity

One-fourth (25.8%) of East Central Florida adults report no leisure-time physical activity in the past month.

- Nearly identical to the 25.4% reported across Florida.
- Similar to national findings (28.8%).
- Fails to satisfy the Healthy People 2010 objective (20% or lower).
- No significant difference by county.

**TREND:** Note the overall increase in lack of leisure-time physical activity in the Greater Orlando area compared with 1999 results (an unfavorable finding).

**No Leisure-Time Physical Activity in the Past Month**

<table>
<thead>
<tr>
<th>County</th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>24.2%</td>
<td>25.5%</td>
<td>26.6%</td>
</tr>
<tr>
<td>Orange County</td>
<td>28.3%</td>
<td>29.5%</td>
<td>30.6%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>31.8%</td>
<td>33.1%</td>
<td>34.2%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>21.4%</td>
<td>22.9%</td>
<td>23.8%</td>
</tr>
<tr>
<td>Greater Orlando*</td>
<td>22.5%</td>
<td>24.2%</td>
<td>26.3%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>27.3%</td>
<td>28.8%</td>
<td>30.8%</td>
</tr>
<tr>
<td>Florida</td>
<td>27.5%</td>
<td>29.2%</td>
<td>31.5%</td>
</tr>
<tr>
<td>United States</td>
<td>27.7%</td>
<td>29.5%</td>
<td>31.8%</td>
</tr>
</tbody>
</table>

Significant vs. 1999

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 90]
• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC).
• PRC National Health Surveys, Professional Research Consultants.

Notes: • Asked of all respondents.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.

Lack of leisure-time physical activity is much higher among the following East Central Florida demographic groups:

- Residents living at lower incomes.
- Blacks and Hispanics.
- Note also the higher prevalence in lack of leisure-time physical activity among the obese population in East Central Florida.
Residents who did not participate in leisure-time physical activity last month were asked to give their main reason for not doing so. Nearly one-third mentioned not having any time (32.4%), while 29.3% cited physical limitations and 27.7% reported not being interested.
### Activity Levels

All adults should strive to meet either of the following physical activity recommendations:

**Moderate-intensity physical activities** (inducing only light sweating or a slight to moderate increase in breathing or heart rate) for at least 30 minutes on 5 or more days of the week.

- Centers for Disease Control and Prevention/American College of Sports Medicine

**OR**

**Vigorous-intensity physical activity** (inducing heavy sweating or a large increase in breathing or heart rate) 3 or more days per week for 20 or more minutes per occasion.

- Healthy People 2010

---

**A total of 43.9% of East Central Florida adults meet physical activity recommendations, meaning that they participate in regular, sustained moderate or vigorous physical activity.**

- Comparable to the Florida percentage (45.3%).
- More favorable than national findings (38.5%).
- Does not vary significantly by county.
Meets Physical Activity Recommendations

<table>
<thead>
<tr>
<th>County</th>
<th>Meets Physical Activity Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard</td>
<td>46.0%</td>
</tr>
<tr>
<td>Orange</td>
<td>42.3%</td>
</tr>
<tr>
<td>Osceola</td>
<td>44.3%</td>
</tr>
<tr>
<td>Seminole</td>
<td>45.3%</td>
</tr>
<tr>
<td>Greater Orlando</td>
<td>43.2%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>43.9%</td>
</tr>
<tr>
<td>Florida</td>
<td>45.3%</td>
</tr>
<tr>
<td>United States</td>
<td>38.5%</td>
</tr>
</tbody>
</table>

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 171]
• 2008 PRC National Health Survey, Professional Research Consultants.

Note:
• Asked of all respondents.
• In this case the term “meets physical activity recommendations” refers to participation in moderate physical activity (exercise that produces only light sweating or a slight to moderate increase in breathing or heart rate) at least 5 times a week for 30 minutes at a time, and/or vigorous physical activity (activities that cause heavy sweating or large increases in breathing or heart rate) at least 3 times a week for 20 minutes at a time.

East Central Florida demographic groups less likely to meet physical activity recommendations include:

- Residents living below the federal poverty level.
- Hispanics.
- Obese individuals.

Meets Physical Activity Recommendations

(East Central Florida)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 171]

Note:
• Asked of all respondents.
• In this case the term “meets physical activity recommendations” refers to participation in moderate physical activity (exercise that produces only light sweating or a slight to moderate increase in breathing or heart rate) at least 5 times a week for 30 minutes at a time, and/or vigorous physical activity (activities that cause heavy sweating or large increases in breathing or heart rate) at least 3 times a week for 20 minutes at a time.
Moderate & Vigorous Physical Activity

In the past month, 25.1% of East Central Florida adults participated in moderate physical activity (5 times a week, 30 minutes at a time).

- Statistically similar to national findings (22.6% nationally).
- Fails to satisfy the Healthy People 2010 objective for moderate activity (30% or higher).
- No statistical difference by county.
- **TREND:** Note the statistically significant increase in moderate physical activity since 2004 across each of the surveyed areas illustrated below.
- Note that the moderate and vigorous physical activity questions were asked slightly differently in 2009; this could, in part, account for variation from previous results.

### Participate in Light/Moderate Physical Activity
**Five or More Times per Week for 30 Minutes or More**

<table>
<thead>
<tr>
<th>County</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>19.8%</td>
<td>25.1%</td>
</tr>
<tr>
<td>Orange County</td>
<td>13.8%</td>
<td>22.4%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>13.2%</td>
<td>22.4%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>13.5%</td>
<td>26.8%</td>
</tr>
<tr>
<td>Greater Orlando*</td>
<td>13.7%</td>
<td>24.1%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>15.2%</td>
<td>25.1%</td>
</tr>
<tr>
<td>United States</td>
<td>18.4%</td>
<td>22.6%</td>
</tr>
</tbody>
</table>

Sources:
- PRC Community Health Surveys, Professional Research Consultants.
- PRC National Health Surveys, Professional Research Consultants.

Notes:
- Asked of all respondents.
- Takes part in "light/moderate physical activity" (exercise that produces only light sweating or a slight to moderate increase in breathing or heart rate) at least 5 times a week for 30 minutes at a time.
- *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
- This inquiry was not addressed in 1999.
Those less likely to participate in regular light/moderate activity include:

- Residents living below the federal poverty level.
- Hispanics.
- Obese adults.

**Participate in Light/Moderate Physical Activity Five or More Times per Week for 30 Minutes or More (East Central Florida)**

<table>
<thead>
<tr>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>100%-200% Pov</th>
<th>&gt;200% Pov</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Overwt/Not Obese</th>
<th>Obese</th>
</tr>
</thead>
<tbody>
<tr>
<td>25.7%</td>
<td>24.6%</td>
<td>26.4%</td>
<td>24.1%</td>
<td>25.5%</td>
<td>18.7%</td>
<td>29.1%</td>
<td>25.7%</td>
<td>26.5%</td>
<td>24.6%</td>
<td>19.5%</td>
<td>29.5%</td>
</tr>
</tbody>
</table>

Sources:
- 2009 PRC Community Health Survey, Professional Research Consultants. [Item 170]

Notes:
- Asked of all respondents.
- Takes part in “light/moderate physical activity” (exercise that produces only light sweating or a slight to moderate increase in breathing or heart rate) at least 5 times a week for 30 minutes at a time.

Another 32.8% participated in vigorous physical activity (3 times a week, 20 minutes at a time).

- More favorable than the nationwide figure (28.0%).
- Satisfies the Healthy People 2010 objective for vigorous activity (30% or higher).
- Does not range significantly by county.

**TREND:** Note the *statistically significant decrease* in vigorous physical activity over time in Seminole County, as well as in East Central Florida overall.

Note that the moderate and vigorous physical activity questions were asked slightly differently in 2009; this could, in part, account for variation from previous results.
Participate in Vigorous Physical Activity Three or More Times per Week for 20 Minutes or More

Sources:
- PRC Community Health Surveys, Professional Research Consultants. [Item 169]
- PRC National Health Surveys, Professional Research Consultants.

Notes:
- Asked of all respondents.
- Takes part in "vigorous physical activity" (activities that cause heavy sweating or large increases in breathing or heart rate) at least 3 times a week for 20 minutes at a time.

Those less likely to participate in regular vigorous activity include:

- Women.
- Older adults.
- Adults living at lower income levels.
- Hispanics.
- Obese individuals.

Participate in Vigorous Physical Activity Three or More Times per Week for 20 Minutes or More
(East Central Florida)

Sources:
- 2009 PRC Community Health Survey, Professional Research Consultants. [Item 169]

Notes:
- Asked of all respondents.
- Takes part in "vigorous physical activity" (activities that cause heavy sweating or large increases in breathing or heart rate) at least 3 times a week for 20 minutes at a time.
Health Advice About Physical Activity & Exercise

A total of 44.6% of East Central Florida adults report that their physician has asked about or given advice to them about physical activity in the past year.

- Similar to the national average (42.7%).
- No statistical differences by county (not shown).

Note: 57.4% of obese East Central Florida respondents say that they have talked with their doctor about physical activity/exercise in the past year.

Physician Has Asked About or Given Advice Regarding Physical Activity/Exercise in Past Year
(By Weight Status)

Source:
• 2009 PRC Community Health Survey, Professional Research Consultants. [Item 20]
• 2008 PRC National Health Survey, Professional Research Consultants.

Note:
• Asked of all respondents.
Perceptions of Physical Activity Recommendations

Most East Central Florida adults feel that 30 minutes of physical activity per day is what is recommended to prevent weight gain (30 minutes was the median response as well).

- Note that one-fifth of area adults (20.1%) believe that less than 30 minutes is adequate.

Perceived Recommendation for Daily Minutes of Physical Activity to Prevent Weight Gain
(East Central Florida)

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Item 94]
Note: Asked of all respondents.
Use of Local Parks, Trails & Recreation Facilities

A total of 36.2% of East Central Florida adults visit a local park or recreation center for exercise at least once a week.

- 25.2% report visiting local parks or recreation centers for exercise two or more times per week.

![Average Weekly Visits to Local Park or Recreation Center for Exercise (East Central Florida)](chart1)

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Item 95]
Note: Asked of all respondents.

A total of 43.4% of East Central Florida adults report using a local paved or dirt trail for walking, hiking, or biking at least once per month.

- 10.7% use the trails daily, weather permitting.

![Frequency of Using Local Trails for Exercise in Good Weather (East Central Florida)](chart2)

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Item 96]
Note: Asked of all respondents.
Neighborhood Influence on Physical Activity

Neighborhood Attributes

The vast majority of area residents live in neighborhoods with street lights (89.8%) and sidewalks (78.9%). Fewer (45.8%) report walking/jogging/biking trails in their own neighborhoods.

In terms of negative attributes, one-third (23.6%) of residents report heavy traffic in their neighborhoods.

Neighborhood Amenities

(East Central Florida)

<table>
<thead>
<tr>
<th>Attribute</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Lights</td>
<td>89.8%</td>
</tr>
<tr>
<td>Sidewalks</td>
<td>78.9%</td>
</tr>
<tr>
<td>Walking/Jogging/Bike Trails</td>
<td>45.8%</td>
</tr>
<tr>
<td>Heavy Traffic</td>
<td>23.6%</td>
</tr>
</tbody>
</table>

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Items 97-100]
Note: Reflects the total sample of respondents.

Neighborhood Safety

Most East Central Florida adults (74.1%) report that their neighborhood is “extremely safe” or “quite safe” from crime.

- Note that 26.6% say their neighborhood is only “slightly safe,” and 5.3% say it is “not at all safe.”

- Note the higher “slightly/not at all safe” responses in Orange and Osceola Counties (following chart).

Perceptions of Neighborhood Safety

(East Central Florida)

- Extremely Safe: 21.7%
- Slightly Safe: 25.0%
- Quite Safe: 52.4%
- Not at all Safe: 5.3%

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Item 101]
Note: Asked of all respondents.
Neighborhood Factors That Inhibit Physical Activity

While the most common reasons for not being more physically active related to lack of time or interest, some of the community/neighborhood factors mentioned included lack of recreational options, crime/safety, and lack of sidewalks.

Neighborhood Factors Preventing Respondent From Being More Active
(East Central Florida)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 102]
Note: • Asked of all respondents.
Perceptions of Screen Time for Children

East Central Florida adults typically feel that 2 hours is the maximum amount of leisure screen time a child should be allowed per day (median response).

- 37.5% feel that 1 hour should be the maximum (3.8% said “none”).
- 19.6% mentioned allowances greater than 2 hours.

**Perceived Maximum Amount of Leisure Screen Time a Child Should Be Allowed Daily**

(East Central Florida, 2009)

<table>
<thead>
<tr>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Hour</td>
<td>37.5%</td>
</tr>
<tr>
<td>2 Hours</td>
<td>39.1%</td>
</tr>
<tr>
<td>3 Hours</td>
<td>11.6%</td>
</tr>
<tr>
<td>4+ Hours</td>
<td>8.0%</td>
</tr>
<tr>
<td>None</td>
<td>3.8%</td>
</tr>
</tbody>
</table>

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Item 146]
Note: Asked of all respondents.
Substance Abuse

Substance abuse and its related problems are among society’s most pervasive health and social concerns. Each year, about 100,000 deaths in the United States are related to alcohol consumption. Illicit drug abuse and related acquired immunodeficiency syndrome (AIDS) deaths account for at least another 12,000 deaths. In 1995, the economic cost of alcohol and drug abuse was $276 billion. This represents more than $1,000 for every man, woman, and child in the United States to cover the costs of healthcare, motor vehicle crashes, crime, lost productivity, and other adverse outcomes of alcohol and drug abuse.

A substantial proportion of the population drinks alcohol. Alcohol use and alcohol-related problems also are common among adolescents. Excessive drinking has consequences for virtually every part of the body. The wide range of alcohol-induced disorders is due (among other factors) to differences in the amount, duration, and patterns of alcohol consumption, as well as differences in genetic vulnerability to particular alcohol-related consequences. Alcohol use has been linked with a substantial proportion of injuries and deaths from motor vehicle crashes, falls, fires, and drownings. It also is a factor in homicide, suicide, marital violence, and child abuse and has been associated with high-risk sexual behavior.


Self-Reported Alcohol Use

High-Risk Alcohol Use

Chronic Drinking

A total of 3.9% of East Central Florida adults report an average of 2 or more drinks of alcohol per day in the past month.

- Comparable to national findings (4.5%).
- Higher (5.9%) in Brevard County.

TREND: Note the statistically significant decrease in chronic drinking levels since 2004 in East Central Florida overall.

Chronic Drinkers

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 179]
• PRC National Health Surveys, Professional Research Consultants.

Notes: • Reflects the total sample of respondents.
• Chronic drinkers are defined as those who have had at least 60 drinks of alcoholic beverages during the past month.
• Florida data not available.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
In East Central Florida, chronic drinking is more prevalent among the following population segments:

- Men.
- Adults aged 65 and older.
- Residents living above the federal poverty level.
- Whites.

**Chronic Drinkers**  
(East Central Florida)

<table>
<thead>
<tr>
<th>Category</th>
<th>Men 5.6%</th>
<th>Women 2.2%</th>
<th>18 to 39 2.9%</th>
<th>40 to 64 4%</th>
<th>65+ 5.8%</th>
<th>100%-200% Pov 0.6%</th>
<th>&gt;200% Pov 4.6%</th>
<th>White 4.1%</th>
<th>Black 4.6%</th>
<th>Hispanic 2.3%</th>
<th>Other 1.2%</th>
</tr>
</thead>
</table>

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Item 179]

Notes:
- Reflects the total sample of respondents.
- Chronic drinkers are defined as those who have had at least 60 drinks of alcoholic beverages during the past month.
Binge Drinking

A total of 17.8% of East Central Florida adults are binge drinkers.

- Less favorable than the 14.1% reported across Florida.
- Identical to the 17.8% reported nationwide.
- Fails to satisfy the Healthy People 2010 target (6% or lower).
- Statistically comparable among the counties.

Most demographic groups fall outside the targeted Healthy People 2010 range. Binge drinking in East Central Florida is more prevalent among:

- Men (especially those aged 18 to 24; nearly one-half report binge drinking).
- Young adults.
- White and Hispanic respondents.

Sources:
- PRC Community Health Surveys, Professional Research Consultants. [Item 180]
- Behavioral Risk Factor Surveillance System Survey Data, Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC).
- PRC National Health Surveys, Professional Research Consultants.

Notes:
- Reflects the total sample of respondents.
- Binge drinkers are those who have had 5 or more alcoholic drinks on any one occasion at least once in the past month.
- *Greater Orlando includes Orange, Osceola & Seminole counties. Brevard County was not surveyed in 1999.

Binge Drinkers

Healthy People 2010 Objective is 6% or lower

<table>
<thead>
<tr>
<th>Year</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>Greater Orlando*</th>
<th>East Central Florida</th>
<th>Florida</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>16.6%</td>
<td>17.1%</td>
<td>16.6%</td>
<td>18.1%</td>
<td>15.0%</td>
<td>15.7%</td>
<td>15.0%</td>
<td>16.4%</td>
</tr>
<tr>
<td>2004</td>
<td>13.4%</td>
<td>16.6%</td>
<td>13.4%</td>
<td>17.1%</td>
<td>15.0%</td>
<td>16.2%</td>
<td>16.6%</td>
<td>13.6%</td>
</tr>
<tr>
<td>2009</td>
<td>15.0%</td>
<td>18.9%</td>
<td>15.1%</td>
<td>17.3%</td>
<td>18.0%</td>
<td>17.3%</td>
<td>17.8%</td>
<td>16.2%</td>
</tr>
</tbody>
</table>

0.0%  20.0%  40.0%  60.0%  80.0%  100.0%
Binge Drinkers
(East Central Florida)

Sources: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 180]

Notes: • Reflects the total sample of respondents.
• Binge drinkers are those who have had 5 or more alcoholic drinks on any one occasion at least once during the past month.

Drinking & Driving

A total of 3.8% of East Central Florida adults acknowledge having driven a vehicle in the past month after they had perhaps too much to drink.

- Identical to national findings (3.8%).
- Lowest in Seminole County (2.3%).

**TREND:** Note the statistically significant increase in reports of drinking and driving in Brevard County since 2004.

**Have Driven in the Past Month After Perhaps Having Too Much to Drink**

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 59]
• PRC National Health Surveys, Professional Research Consultants.

Notes: • Asked of all respondents.
*Greater Orlando includes Orange, Osceola & Seminole counties. Brevard County was not surveyed in 1999.
Drinking and driving in East Central Florida is more prevalent among:

- Men (especially aged 18 to 24).
- Young adults.
- Adults living above the poverty level.
- White and Black respondents.

**Have Driven During the Past Month**
**After Having Had Too Much to Drink**

(East Central Florida)

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Item 59]
Note: Asked of all respondents.

Further, 7.3% of East Central Florida adults acknowledge either drinking and driving or riding with a drunk driver in the past month.

- Statistically similar to national findings (8.6%).
- No significant difference by county.

**TREND:** Note the statistically significant increase in East Central Florida overall since 2004.
Have Driven Drunk in the Past Month OR Ridden With a Driver Who Had Too Much to Drink

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 181]
• PRC National Health Surveys, Professional Research Consultants.
Notes: • Asked of all respondents.
• Florida data not available.

Perceptions of Children/Adolescents & Alcohol Use

Most East Central Florida adults (57.9%) agree with the established age limit of 21 or older when a person should be allowed to drink alcohol (21 is also the median response).

- A significant share (25.9%) feel that 18 is a more appropriate age.
- Responses do not vary significantly by county (not shown).

Minimum Age At Which Respondent Feels Children Should Be Allowed to Drink Alcohol
(East Central Florida, 2009)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 153]
Note: • Asked of all respondents.
When asked at what age they believe children typically begin using alcohol, the median response among East Central Florida adults was 15 years old.

- Age 16 (23.3%) and age 15 (21.2%) were the most common responses.
- Note also that nearly one-third (32.4%) of adults feel that the typical child begins using alcohol at age 14 or younger.

**Perceived Typical Age At Which Children Begin Drinking Alcohol**

(East Central Florida, 2009)

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Item 154]
Note: Asked of all respondents.
Illicit Drug Use

Just 2.6% of East Central Florida residents acknowledge using an illicit drug in the past month.

- Statistically similar to the 2.9% reported across the nation.
- Comparable to the Healthy People 2010 objective of 2% or lower.
- No significant difference by county.

Self-Reported Illicit Drug Use in the Past Month

<table>
<thead>
<tr>
<th>County</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>3.5%</td>
<td>3.9%</td>
</tr>
<tr>
<td>Orange County</td>
<td>2.9%</td>
<td>2.9%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>2.9%</td>
<td>1.9%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>3.3%</td>
<td>2.3%</td>
</tr>
<tr>
<td>Greater Orlando*</td>
<td>3.6%</td>
<td>2.2%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>3.1%</td>
<td>2.6%</td>
</tr>
<tr>
<td>United States</td>
<td>3.3%</td>
<td>2.9%</td>
</tr>
</tbody>
</table>

Healthy People 2010 Objective is 2% or lower

Substance Abuse Treatment

3.0% of East Central Florida adults say that they have sought professional help for an alcohol or drug problem at some point in their lives.

- Below the 5.5% reported across the United States.
- Statistically comparable by county.

Substance Abuse Treatment

The stigma attached to substance abuse increases the severity of the problem. The hiding of substance abuse, for example, can prevent persons from seeking and continuing treatment and from having a productive attitude toward treatment. Compounding the problem is the gap between the number of available treatment slots and the number of persons seeking treatment for illicit drug use or problem alcohol use.

Among high-risk groups, illicit drug users were most likely to have ever sought professional help for a drug or an alcohol problem (11.1% report seeking help).

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 62]
• PRC National Health Surveys, Professional Research Consultants.
Notes: • Asked of all respondents.
• Florida data not available.
Cigarette smoking causes heart disease, several kinds of cancer (lung, larynx, esophagus, pharynx, mouth, and bladder), and chronic lung disease. Cigarette smoking also contributes to cancer of the pancreas, kidney, and cervix. Smoking during pregnancy causes spontaneous abortions, low birth weight, and sudden infant death syndrome. Other forms of tobacco are not safe alternatives to smoking cigarettes.

Tobacco use is responsible for more than 430,000 deaths per year among adults in the United States (about 20% of all deaths). If current tobacco use patterns persist in the United States, an estimated 5 million persons under age 18 years will die prematurely from a smoking-related disease. Direct medical costs related to smoking total at least $50 billion per year (other sources estimate more than $75 billion in 1998 (about 8% of the personal healthcare expenditures in the U.S.)); direct medical costs related to smoking during pregnancy are approximately $1.4 billion per year.

Evidence is accumulating that shows maternal tobacco use is associated with mental retardation and birth defects such as oral clefts. Exposure to secondhand smoke also has serious health effects. Researchers have identified more than 4,000 chemicals in tobacco smoke; of these, at least 43 cause cancer in humans and animals. Each year, because of exposure to secondhand smoke, an estimated 3,000 nonsmokers die of lung cancer, and 150,000 to 300,000 infants and children under age 18 months experience lower respiratory tract infections.

Cigarette Smoking

Cigarette Smoking Prevalence

A total of 18.1% of East Central Florida adults currently smoke cigarettes, either regularly (12.6% every day) or occasionally (5.5% on some days).

- Statistically similar to the 19.3% reported across Florida.
- Also similar to national findings (19.2%).
- Fails to satisfy the Healthy People 2010 target (12% or lower).
- No significant differences when viewed by county.

Smoking Prevalence
(East Central Florida, 2009)

- Never Smoked 54.3%
- Regular Smoker 12.6%
- Occasional Smoker 5.5%
- Former Smoker 27.6%

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Item 175]
Note: Asked of all respondents.
**Current Smokers**

- **Healthy People 2010 Objective is 12% or lower**

<table>
<thead>
<tr>
<th>County</th>
<th>Everyday</th>
<th>Some Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>15.2%</td>
<td>4.7%</td>
</tr>
<tr>
<td>Orange County</td>
<td>11.2%</td>
<td>6.2%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>12.1%</td>
<td>5.4%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>13.0%</td>
<td>4.8%</td>
</tr>
<tr>
<td>Greater Orlando*</td>
<td>11.7%</td>
<td>5.8%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>12.6%</td>
<td>5.5%</td>
</tr>
<tr>
<td>Florida</td>
<td>14.3%</td>
<td>5.0%</td>
</tr>
<tr>
<td>United States</td>
<td>14.1%</td>
<td>5.1%</td>
</tr>
</tbody>
</table>

**Sources:**
- 2009 PRC Community Health Surveys, Professional Research Consultants. [Item 175]
- 2008 PRC National Health Surveys, Professional Research Consultants.

**Notes:**
- Asked of all respondents.
- Includes regular and occasional smokers (everyday and some days).
- *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.

**TREND:** Notes a significant decrease since 2004 in East Central Florida (significant decreases since 1999 are also seen in the three counties comprising the Greater Orlando area – Orange, Osceola and Seminole Counties).

---

**Current Smokers**

- **Healthy People 2010 Objective is 12% or lower**

<table>
<thead>
<tr>
<th>County</th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>23.9%</td>
<td>26.2%</td>
<td>23.2%</td>
</tr>
<tr>
<td>Orange County</td>
<td>20.4%</td>
<td>24%</td>
<td>23.6%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>23.2%</td>
<td>22.3%</td>
<td>22.8%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>22.6%</td>
<td>21.7%</td>
<td>21.4%</td>
</tr>
<tr>
<td>Greater Orlando*</td>
<td>23.6%</td>
<td>23.4%</td>
<td>23.9%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>22.4%</td>
<td>21.1%</td>
<td>21.5%</td>
</tr>
<tr>
<td>Florida</td>
<td>20.4%</td>
<td>20.4%</td>
<td>20.9%</td>
</tr>
<tr>
<td>United States</td>
<td>19.9%</td>
<td>20.4%</td>
<td>20.9%</td>
</tr>
</tbody>
</table>

**Sources:**
- PRC Community Health Surveys, Professional Research Consultants. [Item 175]
- PRC National Health Surveys, Professional Research Consultants.

**Notes:**
- Asked of all respondents.
- Includes regular and occasional smokers (everyday and some days).
- *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
The following chart looks at current smoking prevalence by various demographic characteristics. As shown, cigarette smoking is more prevalent among:

- The under-65 population.
- Those living at lower incomes, especially those in poverty.
- The uninsured.
- Note also that 21.4% of women of child-bearing age (ages 18 to 44) currently smoke. This is notable given that tobacco use increases the risk of infertility, as well as the risks for miscarriage, stillbirth and low birthweight for women who smoke during pregnancy.

### Current Smokers
(East Central Florida)

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women 18-44</th>
<th>Women 18 to 39</th>
<th>Women 40 to 64</th>
<th>Men 65+</th>
<th>&lt; Poverty</th>
<th>100%-200% Pov</th>
<th>&gt;200% Pov</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Insured</th>
<th>Uninsured</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy</td>
<td>19.8%</td>
<td>16.4%</td>
<td>21.4%</td>
<td>22.3%</td>
<td>17.6%</td>
<td>10.3%</td>
<td>34.4%</td>
<td>23.6%</td>
<td>14.7%</td>
<td>17.7%</td>
<td>13.9%</td>
<td>17.1%</td>
<td>17.5%</td>
</tr>
<tr>
<td>People 2010 Objective is 12% or lower</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Health Advice About Smoking Cessation**

Among East Central Florida smokers, 64.3% say that a doctor, nurse or other health professional has recommended in the past year that they quit smoking.

- Statistically comparable to the national percentage (60.8%).
- Highest in Brevard County; lowest in Orange County (not shown due to low sample sizes by county).
Health Professional Has Recommended Quitting Smoking in the Past 12 Months
(Among Everyday Smokers; East Central Florida)

Nationwide, 60.8% of smokers have had a doctor, nurse or health professional recommend that they quit smoking in the past year.

Sources: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 51]
      • 2008 PRC National Health Survey, Professional Research Consultants.

Note: • Asked of current smokers who smoke every day.

Among area smokers whose physician or health professional recommended quitting smoking, 56.7% said they received no specific advice about how to quit.

- 27.5% said medication was recommended or prescribed.
- 7.3% said a smoking cessation program was recommended.

One-fifth of smokers who were told to quit smoking (24.7%) followed their physician’s advice.

Specific Recommendation by Health Professional
(Among ECF Smokers Whose Physician Recommended Quitting)

No Specific Advice 56.7%
Medication 27.5%
Cessation Program 7.3%
Other 4.9%
Uncertain 3.6%
Physician Recommendation Respondent Followed Recommendation
Yes 24.7%
No 75.3%

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Items 52-53]
Note: • Asked of all smokers whose physician has recommended quitting.
Smoking Cessation Attempts

Among East Central Florida regular smokers, 43.6% went without smoking for one day or longer in the past year because they were trying to quit smoking.

- Less favorable than the national percentage (57.0%).
- Fails to satisfy the Healthy People 2010 target (75% or higher).
- Statistically similar among the four counties.
- **TREND**: Note the statistically significant decrease in cessation attempts in the Greater Orlando area overall.

### Have Stopped Smoking for One Day or Longer in the Past Year in an Attempt to Quit Smoking

(Among Adults Who Smoke Cigarettes Every Day)

<table>
<thead>
<tr>
<th></th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greater Orlando*</td>
<td>57.2%</td>
<td>50.4%</td>
<td>40.2%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>48.4%</td>
<td>43.6%</td>
<td>52.2%</td>
</tr>
<tr>
<td>United States</td>
<td>50.4%</td>
<td>48.7%</td>
<td>57%</td>
</tr>
</tbody>
</table>

**Healthy People 2010 Objective is 75% or higher**

**Significant vs. 1999/US**

**Significant vs. US**

**Sources:**
- PRC Community Health Surveys, Professional Research Consultants. [Item 50]
- PRC National Health Surveys, Professional Research Consultants.

**Notes:**
- Asked of regular (everyday) smokers.
- Florida data not available.
- *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.

Environmental Tobacco Smoke

Secondary Smoke in the Home

A total of 13.1% of East Central Florida adults indicate that they or a member of their household smokes in the home.

- More favorable than found nationwide (16.3%).
- Lower (9.5%) in Seminole County.

**TREND:** Note the statistically significant decrease in environmental tobacco smoke in Seminole County households since 2004.
Adults living at lower incomes more often report that someone smokes at home, as do those without healthcare insurance coverage.
Among survey respondents with children under age 7 at home, 12.0% indicate that they or a member of their household smokes in the home.

- Statistically similar to that found nationwide (13.3%).

**Percentage of Households With Young Children in Which Someone Smokes in the Home**

(Among Households With Children Aged 0 to 6)

Sources:
- PRC Community Health Surveys, Professional Research Consultants. [Item 177]
- PRC National Health Surveys, Professional Research Consultants.

Notes:
- Reflects respondents with children aged 0 to 6 years old.
- "Smokes in the home" refers to someone smoking cigarettes, cigars or a pipe in the home an average of four or more times per week in the past month.
Perceptions of Secondhand Smoke

Nearly two-thirds of surveyed adults (64.0%) believe that breathing smoke from other people’s cigarettes is “very harmful.”

- Another 29.0% see it as “somewhat harmful.”

Note that East Central Florida smokers are much less likely to acknowledge harmful effects from secondhand smoke.

Believe That Secondhand Smoke Is Harmful
(By Smoking Status; East Central Florida, 2009)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 55]
Note: • Asked of all respondents.
Motor Vehicle Safety

The risk of injury is so great that most persons sustain a significant injury at some time during their lives. Nevertheless, this widespread human damage too often is taken for granted, in the erroneous belief that injuries happen by chance and are the result of unpreventable “accidents.” In fact, many injuries are not “accidents,” or random, uncontrollable acts of fate; rather, most injuries are predictable and preventable.

For ages 1 through 44 years, [U.S.] deaths from injuries far surpass those from cancer—the overall leading natural cause of death at these ages—by about three to one. Injuries cause more than two out of five deaths (43 percent) of children aged 1 through 4 years and result in four times the number of deaths due to birth defects, the second leading cause of death for this age group. For ages 15 to 24 years, injury deaths exceed deaths from all other causes combined from ages 5 through 44 years. For ages 15 to 24 years, injuries are the cause of nearly four out of five deaths. After age 44 years, injuries account for fewer deaths than other health problems, such as heart disease, cancer, and stroke. However, despite the decrease in the proportion of deaths due to injury, the death rate from injuries is actually higher among older persons than among younger persons.


Seat Belt Usage

Most East Central Florida adults (87.2%) report “always” wearing a seat belt when driving or riding in a vehicle.

- Better than found nationally (83.5%).
- Fails to satisfy the Healthy People 2010 objective of 92% or higher.
- Does not vary significantly by county.

**TREND:** Note the statistically significant increase in seat belt usage since 2004 in East Central Florida overall (as well as in the Greater Orlando area since 1999).

Always Wear a Seat Belt
When Driving or Riding in an Automobile

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 47]
- PRC National Health Surveys, Professional Research Consultants.

Notes: • Asked of all respondents.
- *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
The following demographic segments are less likely to report consistent seat belt usage:

- Men.
- Adults under age 65.

### Always Wear a Seat Belt
When Driving or Riding in an Automobile
(East Central Florida)

![Graph showing seat belt usage by demographic segments](image)

**Sources:**
- 2009 PRC Community Health Survey, Professional Research Consultants. [Item 47]

**Note:**
- Asked of all respondents.
ACCESS TO HEALTHCARE SERVICES

Access to quality care is important to eliminate health disparities and increase the quality and years of healthy life for all persons in the United States.

Limitations in access to care extend beyond basic causes, such as a shortage of healthcare providers or a lack of facilities. Individuals also may lack a usual source of care or may face other barriers to receiving services, such as financial barriers (having no health insurance or being underinsured), structural barriers (no facilities or healthcare professionals nearby), and personal barriers (sexual orientation, cultural differences, language differences, not knowing what to do, or environmental challenges for people with disabilities).

Health Insurance Coverage

Type of Healthcare Coverage (Adults Aged 18-64)

The majority (65.5%) of East Central Florida adults aged 18 to 64 report having healthcare coverage through private insurance.

Another 17.1% report coverage through a government-sponsored program (e.g., Medicaid, Medicare, military benefits).

Health Care Insurance Coverage
(East Central Florida; Among Adults Aged 18 to 64)

Lack of Health Insurance Coverage (Adults Aged 18-64)

Among East Central Florida adults aged 18 to 64, 17.3% report having no insurance coverage for healthcare expenses.

- More favorable than Florida findings (23.3%).
- Comparable to national findings (17.7%).
- The Healthy People 2010 target is universal coverage (0% uninsured).
  - Highest in Osceola County (21.8%).
  - TREND: Note the statistically significant decrease in lack of coverage since 2004 among adults under age 65 in Brevard County and across East Central Florida overall.
Lack Health Care Insurance Coverage
(Among Adults Aged 18 to 64)

Sources:
• PRC Community Health Surveys, Professional Research Consultants. [Item 194]
• Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC).
• PRC National Health Surveys, Professional Research Consultants.

Notes:
• Reflects respondents aged 18 through 64.
• *Greater Orlando includes Orange, Osceola & Seminole counties. Brevard County was not surveyed in 1999.

The following population segments (under age 65) are more likely to be without healthcare insurance coverage:

- Adults aged 18 to 39.
- Those living at lower incomes.
- Blacks and Hispanics.

Lack Health Care Insurance Coverage
(East Central Florida; Among Adults Aged 18 to 64)

Sources:
• 2009 PRC Community Health Survey, Professional Research Consultants. [Item 194]

Note:
• Reflects respondents aged 18 through 64.
Children & Health Insurance Coverage

Health Insurance Coverage

Most East Central Florida parents (88.1%) report that their child currently has some type of health insurance coverage, either through a government program or through private health insurance.

Among those with insured children:

- 70.0% are covered through private insurance.
- 17.0% are covered by Medicaid.
- 6.9% are covered through Florida KidCare/Healthy Kids.

Children and Healthcare Insurance Coverage
(East Central Florida Parents, 2009)

Lack of Health Insurance

A total of 11.9% of East Central Florida parents indicate that their child is not currently covered by healthcare insurance.

- Highest in Osceola County (19.3%).
- **TREND:** Note the statistically significant decrease in uninsured children in the Greater Orlando area, as well as across East Central Florida overall.
Child Does Not Have Health Care Insurance Coverage

Source: • PRC Community Health Surveys, Professional Research Consultants. [Item 144]

Notes: • Asked of all respondents with children under 18 at home.
• Coverage includes private health insurance as well as government programs.
Impact of Poor Access

Persons without health insurance coverage are much less likely to have a regular medical care provider, receive routine care, or receive preventive healthcare screenings.

Preventive Health Care
(By Insured Status; East Central Florida)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Items 20, 23, 51, 55, 174, 175, 183]

Notes: • Reflects all respondents.
• Insured respondents include those with either private or government-sponsored insurance plans, aged 18-64.
Difficulties Accessing Healthcare

Prevalence of Access Difficulties

In all, 43.1% of East Central Florida adults report some type of difficulty or delay in obtaining healthcare services in the past year.

- Similar to national findings (42.4%).
- Fails to satisfy the Healthy People 2010 target (7% or lower).
- Highest in Osceola County, lower in Brevard and Seminole Counties.

**TREND:** Note the statistically significant decrease in Seminole County since 2004.

Experienced Difficulties or Delays of Some Kind in Receiving Needed Health Care in the Past Year

<table>
<thead>
<tr>
<th>Source</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRC Community Health Surveys, Professional Research Consultants. [Item 196]</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PRC National Health Surveys, Professional Research Consultants.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sources:  • PRC Community Health Surveys, Professional Research Consultants. [Item 196]
• PRC National Health Surveys, Professional Research Consultants.

Notes:  • Asked of all respondents.
• Includes difficulties related to availability, cost, office hours, transportation or other unspecified troubles/delays.
• Florida data not available.

The following chart examines access difficulties by respondent demographics. Note:

- Women more often report access difficulties than do men.
- Adults under age 65 report difficulties accessing healthcare more often than older adults.
- As might be expected, adults living at lower incomes are much more likely to experience difficulties or delays of some kind in receiving healthcare in the past year.
- Hispanics more often report difficulties when compared with Whites.
- Uninsured persons are also much more likely to experience access difficulties.

The chart shows the percentage of adults experiencing difficulties or delays of some kind in receiving needed health care in the past year, compared to the Healthy People 2010 objective of 7% or lower. The chart includes data for Brevard, Orange, Osceola, Seminole Counties, Greater Orlando, East Central Florida, and the United States. The chart highlights significant decreases in some counties, particularly in Seminole County since 2004.
Experienced Difficulties or Delays of Some Kind in Receiving Needed Health Care in the Past Year
(East Central Florida)

Sources:
- 2009 PRC Community Health Survey, Professional Research Consultants. [Item196]

Note:
- Asked of all respondents.

Barriers to Healthcare Access

Of the tested barriers, cost of prescription impacted the greatest share of adults in East Central Florida (21.3% say they were unable to afford a needed prescription), followed closely by the cost of physician visits (20.5% did not go to a doctor when needed in the past year because of the cost).

- The proportions of East Central Florida adults impacted were statistically comparable to those found nationwide for each of the tested barriers.

Adults: Barriers to Access Have Prevented Medical Care in the Past Year
(East Central Florida 2009 vs. US)

Sources:
- 2009 PRC Community Health Survey, Professional Research Consultants. [Items 7-10, 12-13]
- 2008 PRC National Health Survey, Professional Research Consultants.

Note:
- Asked of all respondents.
For children, access barriers are less prevalent than they are for adults. However, the most often encountered barriers include cost of physician visits, trouble getting an appointment, inconvenient office hours, or trouble finding a physician.

![Bar chart showing adults vs. children: Barriers to Access Have Prevented Medical Care in the Past Year (East Central Florida, 2009).](chart)

**Cost of Prescription Medications**

**Adults**

21.3% of surveyed adults in East Central Florida report that there was a time in the past year when they needed a prescription medicine, but did not get it because of the cost.

- Statistically similar to the 19.7% reported nationwide.
- More favorable in Seminole County (16.6%); least favorable in Osceola County (29.5%).
- **TREND:** Marks a **significant increase** in the Greater Orlando area since 1999 (including all three counties comprising the Greater Orlando area).

See also *Impact of Prescription Costs* in the following section.
Viewed demographically, the following population segments more often report that cost prevented them from getting a needed prescription in the past year:

- Women.
- Young adults.
- Low-income respondents (including a majority of those living below poverty).
- Hispanics.
- The uninsured.
Children

7.5% of East Central Florida parents indicate that cost prevented them from obtaining a prescription medication for their child at some point in the past year.

- Most favorable in Seminole County (3.6%); least favorable in Osceola County (13.6%).

- Prescription difficulties appear to increase with the age of the child.

- **TREND:** Marks a *significant increase* in Brevard County since 2004 and in Osceola County since 1999.

---

**Cost Prevented Child's Prescription Medicine in Past Year**

<table>
<thead>
<tr>
<th></th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-5</td>
<td>0.8%</td>
<td>6.8%</td>
<td>4.9%</td>
</tr>
<tr>
<td>6-12</td>
<td>7.1%</td>
<td>8.8%</td>
<td>4.9%</td>
</tr>
<tr>
<td>13+</td>
<td>7.6%</td>
<td>8.3%</td>
<td>7.0%</td>
</tr>
</tbody>
</table>

Sources: • PRC Community Health Survey, Professional Research Consultants [Item 135]
Notes: • Asked of all respondents with children under 18.
• State and U.S. data not available.

---

Cost of Physician Care

Adults

20.5% of East Central Florida adults report that the cost of services prevented them from seeing a physician at some point in the past year.

- Statistically similar to the 18.2% reported nationwide.

- Most favorable in Seminole County (14.7%); least favorable in Osceola County (31.2%).

- **TREND:** *Statistically significant increases* (unfavorable trends) are seen in the Greater Orlando area since 1999, including all three counties individually.
Cost Prevented a Physician Visit Within the Past Year

Viewed demographically, cost of physician visits is more often reported as a barrier among the following segments:

- Women.
- Adults under age 65.
- Respondents living at lower incomes.
- Hispanics.
- The uninsured.

Cost Prevented a Physician Visit Within the Past Year
(East Central Florida)

Source: 2009 PRC Community Health Survey, Professional Research Consultants [Item 9]
Notes: Asked of all respondents.
12.1% of East Central Florida parents report that cost or a lack of insurance prevented them from taking their child to see a physician some point in the past year.

- Lowest in Seminole County (7.5%).
- Cost/insurance difficulties appear to impact teenagers more.
- **TREND:** Marks a significant increase in the East Central Florida area since 2004 (as well as a significant increase in Osceola County since 1999).

### Cost or Lack of Insurance Prevented Child's Health Care in the Past Year

<table>
<thead>
<tr>
<th>Source</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>4.8%</td>
</tr>
<tr>
<td>Orange County</td>
<td>10.3%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>14.3%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>6.1%</td>
</tr>
<tr>
<td>Greater Orlando</td>
<td>9.0%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>8.7%</td>
</tr>
</tbody>
</table>

**Trend:**

- **1999:** 8.4%
- **2004:** 11.5%
- **2009:** 18.9%

**Significant vs. 1999:**

- 5/Under
- 6 to 12
- 13 to 17

Sources: • PRC Community Health Surveys, Professional Research Consultants [Item 134]

Notes: • Asked of respondents with children under the age of 18.
• Florida and national data not available.
**Appointment Availability**

**Adults**

A total of 18.2% of East Central Florida adults had trouble getting a doctor’s appointment at some point in the past year.

- Nearly identical to the 18.9% reported nationwide.
- Statistically comparable among the four counties.

**TREND:** Note the *statistically significant increase* in difficulties since 1999 across Greater Orlando, including Orange, Osceola, and Seminole Counties.

### Have Had Trouble Getting Appointment to See a Doctor in the Past Year

<table>
<thead>
<tr>
<th></th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>11.1%</td>
<td>16.3%</td>
<td>17.2%</td>
</tr>
<tr>
<td>Orange County</td>
<td>16.3%</td>
<td>18.6%</td>
<td>18.6%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>12.3%</td>
<td>12.3%</td>
<td>20.3%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>12.3%</td>
<td>14.5%</td>
<td>17.3%</td>
</tr>
<tr>
<td>Greater Orlando</td>
<td>15.8%</td>
<td>16.8%</td>
<td>15.5%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>18.6%</td>
<td>18.2%</td>
<td>18.2%</td>
</tr>
<tr>
<td>United States</td>
<td>10.3%</td>
<td>12.3%</td>
<td>18.9%</td>
</tr>
</tbody>
</table>

Sources: • PRC Community Health Surveys, Professional Research Consultants [Item 8]  
• PRC National Health Surveys, Professional Research Consultants  

Notes: • Asked of all respondents.  
• State data not available.

Adults more likely to have experienced recent appointment difficulties include:

- Adults under age 65.  
- Adults living below the federal poverty level.  
- Hispanics.  
- The uninsured.
Have Had Trouble Getting Appointment to See a Doctor in the Past Year
(East Central Florida)

Children

12.0% of parents say there was a time in the past year when they needed medical care for their child, but were unable to get an appointment to see a doctor.

- No difference when viewed by county.
- Appointment availability appears to be most difficult for teenagers.

Had Trouble Getting Child Appointment to See a Doctor in the Past Year

Sources: • PRC Community Health Surveys, Professional Research Consultants [Item 132]
Notes: • Asked of respondents with children under the age of 18.
• State and national data not available.
Inconvenient Office Hours

Adults

Inconvenient office hours prevented a physician visit for 16.7% of East Central Florida adults last year.

- Statistically similar to national findings (18.8%).
- Highest in Osceola County (21.8%).

**TREND:** Marks a significant increase in the Greater Orlando area since 1999 (especially in Osceola County).

Inconvenient Office Hours Prevented Physician Visit Last Year

The following chart outlines adults the prevalence of inconvenient office hours as a barrier to access, segmented by demographic characteristics. The following adults are more likely to be affected:

- Women.
- Adults under age 65.
- Respondents living in poverty.
- Hispanics.
- The uninsured.
Inconvenient Office Hours Prevented Physician Visit Last Year

(East Central Florida)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants [Item 13]
Notes: • Asked of all respondents.

Children

11.6% of East Central Florida parents report that inconvenient office hours prevented their child’s medical care in the past year.

- No difference when viewed by county.
- No difference when viewed by age of the child.
- TREND: Marks a significant increase in Brevard County since 2004.
Physician Availability

Adults

Among all East Central Florida adults, 13.7% report had trouble finding a physician at some time in the past year.

- Statistically similar to the 12.9% reported nationwide.
- Highest (17.5%) in Osceola County; lowest (10.1%) in Seminole County.
- TREND: Note the statistically significant increase in difficulties seen in the Greater Orlando area, including Orange and Osceola Counties.

Had Trouble Finding a Doctor in the Past Year

![Graph showing data]

Sources: • PRC Community Health Surveys, Professional Research Consultants [Item 7]
• PRC National Health Surveys, Professional Research Consultants

Notes: • Asked of all respondents.
• State data not available.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.

Adults more likely to have difficulties finding a physician include:

- Women.
- Young adults.
- Respondents living in poverty.
- Hispanics.
- Those without health insurance.
Children

10.4% of parents say there was a time in the past year when they needed medical care for their child, but were unable to find a physician.

- Statistically similar among the four counties.
Lack of Transportation

Adults

8.1% of East Central Florida adults report that a lack of transportation made it difficult or prevented them from visiting a doctor in the past year.

- Similar to the 8.5% reported nationwide.
- Highest in Osceola County (12.6%).
- **TREND:** Marks a significant increase in the Greater Orlando area since 1999 (including Osceola and Seminole Counties).

Viewed demographically, the following populations more often report that a lack of transportation was a barrier to medical care in the past year:

- Women.
- Low-income residents.
- Hispanics and Blacks.
- The uninsured.
Lack of Transportation Made Difficult or Prevented a Physician Visit in the Past Year
(East Central Florida)

Children
3.8% of local parents report that a lack of transportation made it difficult or prevented them from taking their child to the doctor at some point in the past year.
- No difference among the four counties.
- TREND: Marks a significant increase in Osceola County since 1999 (despite a drop since 2004).

Lack of Transportation Made Difficult or Prevented Child’s Health Care in the Past Year

Sources: • PRC Community Health Surveys, Professional Research Consultants [item 133]
Notes: • Asked of respondents with children under the age of 18.
• Florida and U.S. data not available.
Language/Culture Barriers

7.5% of surveyed East Central Florida adults indicate that language barriers or cultural differences made it difficult for them to get medical care in the past year.

- Highest in Osceola County (11.4%); lowest in Brevard County (3.4%).

**TREND:** Marks a significant increase in East Central Florida, as well as the Greater Orlando area (namely Seminole County) since 2004.

**Language Barriers or Cultural Differences Made Obtaining Medical Care Difficult in the Past Year**

Adults more likely to experience language barriers or cultural differences when seeking medical care include:

- Women.
- Respondents living in poverty.
- Hispanics (including Hispanic women).
Language Barriers or Cultural Differences Made Obtaining Medical Care Difficult in the Past Year
(East Central Florida)

<table>
<thead>
<tr>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>&lt; Poverty</th>
<th>100%-200% Pov</th>
<th>&gt;200% Pov</th>
<th>White</th>
<th>Black</th>
<th>Hisp</th>
<th>Hispanic Women</th>
<th>Insured</th>
<th>Uninsured</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.5%</td>
<td>10.3%</td>
<td>7%</td>
<td>8.4%</td>
<td>6.7%</td>
<td>25%</td>
<td>8.6%</td>
<td>5.2%</td>
<td>5.5%</td>
<td>4%</td>
<td>13.7%</td>
<td>17.1%</td>
<td>10%</td>
<td>10%</td>
</tr>
</tbody>
</table>

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Item 14]
Note: Asked of all respondents.

Other Barriers to Children’s Healthcare

9.2% of surveyed parents mentioned other difficulties or delays in accessing healthcare for their child, in addition to those specifically addressed in the survey.

- Reasons included insurance issues (including Medicaid and Medicare), scheduling, problems with referrals, and physician availability, among others.

Difficulties/Delays in Obtaining Child’s Care for Any Other Reason in the Past Year
(East Central Florida, 2009)

- 90.8% No
- 9.2% Yes

Source: 2009 PRC Community Health Survey, Professional Research Consultants [Items 137-138]
Notes: Asked of all respondents with children under 18.
State and U.S. data not available.
Impact of Prescription Costs

Among all East Central Florida adults, 30.6% say that, in the past year, they stretched medication doses, sacrificed for a prescription, or did not take a prescription as directed.

- Lowest in Seminole (25.6%) and Brevard (26.5%) Counties; highest in Osceola County (39.3%).

**TREND:** The Greater Orlando area, as well as the East Central Florida region as a whole saw significant increases since 2004.

### Stretched Prescription/Sacrificed for a Prescription/Did Not Take Prescription as Ordered in the Past Year

The following chart outlines adults improperly using prescription medicine to save money, segmented by demographic characteristics. Adults more likely to have skipped or reduced their prescription doses include:

- Women.
- Adults under age 65.
- Respondents living below 200% of the federal poverty level.
- Hispanics and Blacks.
- The uninsured.

Source: PRC Community Health Surveys, Professional Research Consultants. [Item 11]
Note: Asked of all respondents.
Stretched Prescription/Sacrificed for a Prescription/ Did Not Take Prescription as Ordered in the Past Year (East Central Florida)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 11]
Note: • Asked of all respondents.
Primary Care Services

Source of Medical Care

Adults
A majority of East Central Florida adults have a particular place where they usually go for health care; this is predominantly a doctor’s office.

Source of Medical Care
(East Central Florida, 2009)

Have a Particular Place Where You Usually Go If You Are Sick or Need Health Advice

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Items 16-17]
Note: Asked of all respondents.

Children
A majority of East Central Florida children also have a particular place where they usually go for health care, also predominantly a doctor’s office.

Source of Child’s Medical Care
(East Central Florida Parents of Children <18, 2009)

Have a Particular Place For Child to Go When Sick or in Need of Health Advice

Source: 2009 PRC Community Health Survey, Professional Research Consultants. [Items 139-140]
Note: Asked of all respondents with children under 18 at home.
Specific Source of Ongoing Care

More specifically, 76.8% of East Central Florida adults were determined to have a specific source of ongoing medical care.

- Identical to national findings (also 76.8%).
- Fails to satisfy the Healthy People 2010 target (96% or higher).
- Lowest in Osceola County (72.6%); highest in Brevard County (81.0%).
- TREND: Marks a significant improvement in Osceola County since 2004.

Have a Specific Source of Ongoing Medical Care

When viewed by demographic characteristics, the following population segments are less likely to have a specific source of care:

- Men.
- Young adults.
- Those living in poverty.
- Hispanics and Blacks.
- Those without healthcare coverage.

Sources:
- PRC Community Health Surveys, Professional Research Consultants. [Item 195]
- PRC National Health Surveys, Professional Research Consultants.

Notes:
- Asked of all respondents.
- A specific source of ongoing care includes having a doctor’s office, clinic, urgent care center, walk-in clinic, health center facility, hospital outpatient clinic, HMO or prepaid group, military/VA clinic, or some other kind of place to go if one is sick or needs advice about his/her health. A hospital emergency room is not considered a source of ongoing care in this instance.
- *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
**Have a Specific Source of Ongoing Medical Care**

(East Central Florida)

<table>
<thead>
<tr>
<th>Healthy People 2010 Objective is 96% or higher</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men 73.8%</td>
</tr>
</tbody>
</table>

**Sources:**
- 2009 PRC Community Health Survey, Professional Research Consultants. [Item 195]

**Notes:**
- Asked of all respondents.
- A specific source of ongoing care includes having a doctor’s office, clinic, urgent care/walk-in clinic, health center facility, hospital outpatient clinic, HMO (health maintenance organization)/pre-paid group, military or other VA healthcare, or some other kind of place to go if one is sick or needs advice about his/her health. A hospital emergency room is NOT considered a source of ongoing care in this instance.
Utilization of Primary Care Services

Adults

A total of 68.6% of East Central Florida adults have visited a physician for a routine checkup in the past year.

- Statistically similar to national findings (65.2%).
- No statistical difference when viewed by county.

Have Visited a Physician for a Routine Checkup Within the Past Year

Routine checkups increase with age in East Central Florida, and are higher among:

- Blacks
- The insured.
- Those with higher incomes.

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 18]
• PRC National Health Surveys, Professional Research Consultants.

Notes: • Asked of all respondents.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
Have Visited a Physician for a Routine Checkup Within the Past Year
(East Central Florida)

Children

Among surveyed parents, 92.6% report that their child had a routine checkup in the past year.

- Statistically similar to national findings (91.3%).
- Similar by county.
- Routine checkups are highest among East Central Florida children under age 6.
- TREND: Marks a significant improvement in routine checkups among East Central Florida children since 2004.

Child Has Visited a Physician for a Routine Checkup Within the Past Year

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 141]
- PRC National Health Surveys, Professional Research Consultants.

Notes:
- Asked of respondents with children under the age of 18.
- Florida data not available.
- *Greater Orlando includes Orange, Osceola & Seminole counties. Brevard County was not surveyed in 1999.
Emergency Room Services

A total of 7.7% of East Central Florida adults have gone to a hospital emergency room more than once in the past year about their own health.

- More favorable than national findings (10.6%).
- No statistical difference when viewed by county.

**TREND:** Marks a significant decrease since 2004 in East Central Florida (including Broward County), and since 1999 in the Greater Orlando area (including Seminole County).

### Have Used a Hospital Emergency Room More Than Once in the Past Year

Among East Central Florida respondents who used a hospital emergency room in the past year, 27.6% say this was to treat an injury that might have been treated in a doctor’s office. When asked why they didn’t visit a physician’s office instead, one-half indicated that it was weekend or after-hours, 21.6% said it was an emergency situation, and 13.7% had no insurance.

**Multiple ER visits were most often noted among:**

- Women.
- Young adults.
- Those living in poverty.
- Blacks and Hispanics.
- The uninsured.
Of those using a hospital emergency room, 27.6% say this was to treat an injury that might have been handled in a doctor’s office.

When asked when they didn’t visit a doctor’s office instead:

- One-half indicated it was after hours,
- 21.6% indicate it was indeed an emergency, and
- 13.7% did not have insurance.
Oral Health

Adults

Two-thirds (67.5%) of East Central Florida adults have visited a dentist or dental clinic [for any reason] in the past year.

- More favorable than national findings (63.5%).
- Satisfies the Healthy People 2010 target (56% or higher).
- Highest in Seminole County (71.6%); lowest in Osceola County (58.0%).

**TREND:** Marks a significant increase in East Central Florida (including Broward County) since 2004, and in the Greater Orlando area (including Orange County) since 1999.

### Have Visited a Dentist or Dental Clinic Within the Past Year

<table>
<thead>
<tr>
<th></th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Brevard County</strong></td>
<td>58.9%</td>
<td>67.6%</td>
<td>68.7%</td>
</tr>
<tr>
<td><strong>Orange County</strong></td>
<td>66.7%</td>
<td>68.1%</td>
<td>68.1%</td>
</tr>
<tr>
<td><strong>Osceola County</strong></td>
<td>62.8%</td>
<td>72.6%</td>
<td>80.5%</td>
</tr>
<tr>
<td><strong>Seminole County</strong></td>
<td>78%</td>
<td>78%</td>
<td>88.9%</td>
</tr>
<tr>
<td><strong>Greater Orlando</strong></td>
<td>68.9%</td>
<td>69.6%</td>
<td>78.7%</td>
</tr>
<tr>
<td><strong>East Central Florida</strong></td>
<td>64.3%</td>
<td>61.3%</td>
<td>61.7%</td>
</tr>
<tr>
<td><strong>United States</strong></td>
<td>61.3%</td>
<td>67.3%</td>
<td>66.7%</td>
</tr>
</tbody>
</table>

**Healthy People 2010 Objective is 56% or higher**

Note the following:

- Persons living in the highest income category report much higher utilization of oral health services (persons living below poverty fail to satisfy the Healthy People 2010 objective).
- Hispanics and Blacks show a particularly low proportion of recent dental visits.
- Persons without health insurance report much lower utilization of dental services than those with coverage.
Have Visited a Dentist or Dental Clinic Within the Past Year
(East Central Florida)

Sources: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 21]

Note: • Asked of all respondents.

Children

A total of 69.7% of parents report that their child (aged 2 to 17) has been to a dentist or dental clinic within the past year.

- Much lower than national findings (85.1%).
- Satisfies the Healthy People 2010 target (56% or higher).
- As might be expected, regular dental care is lowest among children under age 6.

Child Has Visited a Dentist or Dental Clinic Within the Past Year
(Among Respondents With Children Aged 2-17)

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 142]
• PRC National Health Surveys, Professional Research Consultants.

Notes: • Asked of respondents with children aged 2 to 17.
• Florida data not available.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.
Perceptions Of Local Healthcare Services

More than one-half of East Central Florida adults (51.9%) rate the overall healthcare services available in their community as “excellent” or “very good.”

- Higher than the 47.7% reported nationally.
- Ranges from 43.4% in Osceola to 58.1% in Brevard (not shown).

Another 30.4% of survey respondents gave “good” ratings of the overall healthcare services available in their community.

Rating of Overall Health Care Services Available in the Community
(East Central Florida, 2009)

- Excellent 21.0%
- Very Good 30.9%
- Good 30.4%
- Fair 10.0%
- Poor 7.7%

However, 17.7% of East Central Florida residents characterize local healthcare services as “fair” or “poor.”

- Less favorable than national findings (22.2%).
- Highest in Osceola County (27.0%).

**TREND:** Marks a significant increase in unfavorable ratings in the Greater Orlando area since 1999 (including Orange and Osceola Counties).
Perceive Local Healthcare Services as "Fair/Poor"

Sources: • PRC Community Health Surveys, Professional Research Consultants. [Item 6]
• PRC National Health Surveys, Professional Research Consultants.

Notes: • Asked of all respondents.
• Florida data not available.
• *Greater Orlando includes Orange, Osceola & Seminole Counties. Brevard County was not surveyed in 1999.

Note that adults more critical of local healthcare services include:

- Adults under age 65.
- Those living in poverty.
- Blacks and Hispanics.
- The uninsured.

Perceive Local Healthcare Services as "Fair/Poor"
(East Central Florida)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 6]
Notes: • Asked of all respondents.
• Percentages represent combined "fair" and "poor" responses.
HEALTH EDUCATION & OUTREACH
Primary Sources of Healthcare Information

Family physicians remain residents’ primary source of healthcare information.

- 42.1% of East Central Florida adults cited their family physician as their primary source of healthcare information, higher than the 36.6% reported in 1999.
- The Internet received the second-highest response (24.3%), higher than the 5.9% reported in 1999.
- Other sources mentioned include friends and relatives and personal experience (both 5.9%), books and magazines (5.3%), work (4.5%), and hospital publications (3.2%).
- Note that 2.8% of survey respondents reportedly do not receive any healthcare information.

Primary Source of Health Care Information
(East Central Florida)

Family Dr 42.1%
(Up from 36.6% in 1999)

Internet 24.3%
(Up from 5.9% in 1999)

Don't Receive Any 2.8%
Hosp Publications 3.2%
Work 4.5%
Books/Magazines 5.3%
Personal Experience 5.9%
Other 6.0%
Friends/Relatives 5.9%

Source: • 2009 PRC Community Health Survey, Professional Research Consultants, [item 119]
Note: • Asked of all respondents.
Use of the Internet for Healthcare Information

Two-thirds of East Central Florida adults (66.0%) use the Internet to get information or advice about their health.

- Highest in Seminole County (71.6%).
- **TREND:** Marks a significant increase since 2004 in East Central Florida, as well as in the Greater Orlando area and all four counties individually.

**Use the Internet to Get Information or Advice About Health**

<table>
<thead>
<tr>
<th>County</th>
<th>2004</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>52.3%</td>
<td>52.5%</td>
</tr>
<tr>
<td>Orange County</td>
<td>65.5%</td>
<td>65.1%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>46.9%</td>
<td>62.5%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>61.2%</td>
<td>71.6%</td>
</tr>
<tr>
<td>Greater Orlando*</td>
<td>53.7%</td>
<td>53.4%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>66.1%</td>
<td>66.0%</td>
</tr>
</tbody>
</table>

**Source:** • PRC Community Health Surveys, Professional Research Consultants. [Item 120]

**Notes:** • Asked of all respondents.
• Florida and national data not available.

Adults more likely to use the Internet for information or advice about health include:

- Adults under age 65.
- Those living in the highest income bracket.
- Whites and Hispanics.
- Those with health insurance coverage.

**Use the Internet to Get Information or Advice About Health**

(East Central Florida)

**Source:** • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 120]

**Note:** • Asked of all respondents.
Awareness of “211” Service

One-fourth (26.3%) of area residents are aware of the 211 telephone line.

- Highest in Brevard County (38.8%); lowest in Seminole County (19.1%).

**Have Heard of the 211 Telephone Line**

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 121]
Notes: • Asked of all respondents.
• Florida and national data not available.

Adults less likely to have awareness of the 211 telephone line include:

- Men.
- Young adults.
- Those living at higher incomes.
- Hispanics.

**Have Heard of the 211 Telephone Line**

(East Central Florida)

Source: • 2009 PRC Community Health Survey, Professional Research Consultants. [Item 121]
Note: • Asked of all respondents.
FOR MORE INFORMATION

To Retrieve Data Online …

Data from the 2009 PRC East Central Florida Community Health Survey (as well as past data from the 1999 and 2004 studies) are available on the Internet. This study was conducted by Professional Research Consultants, Inc. (PRC), a nationally recognized healthcare marketing research firm that has conducted similar assessments for over 250 communities across the country. PRC will host the data and reporting for the East Central Florida study for community-wide access through its data portal, www.PRCEasyView.com. Through this site, you will be able to:

- View the results of the 2004 PRC Community Health Survey conducted as part of this project;
- Segment survey findings by: county; respondent demographics (e.g., age, gender, poverty status, etc.); response characteristics (e.g., overweight adults, smokers, adults with asthma, etc.); or combinations thereof.
- View, download and/or print the full report generated for this study.
- View, download and/or print PowerPoint presentation files detailing the data.

Instructions for Accessing the Site & the Data:

- Log on to www.PRCEasyView.com using the following:
  User = ECF
  Password = health
- Under “Study” select “2009 East Central Florida Health Survey.”
- Select “Results” to access dynamic survey findings. Findings can be segmented by clicking on the survey response you wish to isolate (see online tutorials).
- Select “Reports & Presentations” to access the report and presentation documents. For these, right-click and choose “Save Target As” to save these to your computer.

To Learn More …

If you would like to learn more about this study or learn more about next steps in identifying priorities and developing strategies in the four counties and in the region as a whole, please contact Karen van Caulil, Ph.D., Executive Director of The Health Council of East Central Florida, at (407) 977-1610 or visit www.hcecf.org.