2014 PRC
Community Health Needs Assessment Report

East Central Florida
Brevard, Orange, Osceola & Seminole Counties

Sponsored by
Orange County
Florida Hospital, Winter Park Health Foundation,
West Orange Healthcare District

Osceola County
Florida Hospital, Winter Park Health Foundation

Seminole County
Florida Hospital, Winter Park Health Foundation

Brevard County
Space Coast Health Foundation

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INTRODUCTION
Project Overview

Project Goals

This Community Health Needs Assessment, a follow-up to similar studies conducted in 1999, 2004, and 2009, is a systematic, data-driven approach to determining the health status, behaviors and needs of residents in East Central Florida (ECF), which includes Brevard, Orange, Osceola, and Seminole counties. Subsequently, this information may be used to inform decisions and guide efforts to improve community health and wellness.

This report is a consolidation of three survey administrations conducted in East Central Florida by Professional Research Consultants, Inc. (PRC) on behalf of four local agencies:

- A 2013 survey of 200 adults living in select ZIP Codes in West Orange County (32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787) on behalf of the West Orange Healthcare District.

- A 2013 survey of 600 Brevard County adults on behalf of Space Coast Health Foundation.

- A 2013-2014 survey of 1,201 adults living in eastern Orange County, as well as Osceola and Seminole counties, on behalf of Florida Hospital and Winter Park Health Foundation.

All data collection was conducted by Professional Research Consultants, Inc. (PRC). PRC is a nationally-recognized healthcare consulting firm with extensive experience conducting Community Health Needs Assessments such as this in hundreds of communities across the United States since 1994.
Methodology

PRC Community Health Survey

Survey Instrument

The survey instruments used for these studies were 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 gaps in indicator data relative to health promotion and disease prevention objectives and other recognized health issues. The final survey instruments were developed by the sponsoring organizations and PRC, and are similar to the previous surveys used in the region, allowing for data trending.

Note that, although the three surveys consolidated for this report were very similar to one another, there were minor differences. For this reason, some indicators described in this report reflect questions asked in the broader three-county study, but not in Brevard County and/or in parts of western Orange County; where this occurs, charts are clearly marked with this distinction.

Sample Approach & Design

A precise and carefully executed methodology is critical in asserting the validity of the results gathered in the PRC Community Health Survey. Thus, to ensure the best representation of the population surveyed, a telephone interview methodology — one that incorporates both landline and cell phone interviews — was employed for each of the survey administrations. The primary advantages of telephone interviewing are timeliness, efficiency and random-selection capabilities.

The combined sample of the three studies included 2,001 individuals age 18 and older in East Central Florida, including 600 in Brevard County, 601 in Orange County, 400 in Osceola County, and 400 in Seminole County. Once the interviews were combined, these were weighted in proportion to the actual population distribution so as to appropriately represent each county and East Central Florida as a whole. 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 2,001 respondents is ±2.2% at the 95 percent level of confidence.

![Expected Error Ranges for a Sample of 2,001 Respondents at the 95 Percent Level of Confidence](image)

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.

Examples:
- If 10% of the sample of 2,001 respondents answered a certain question with a “yes,” it can be asserted that between 8.7% and 11.3% (10% ± 1.3%) of the total population would offer this response.
- If 50% of respondents said “yes,” one could be certain with a 95 percent level of confidence that between 47.8% and 52.2% (50% ± 2.2%) 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 geographic distribution and 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 combined East Central Florida sample for key demographic variables, compared to actual population characteristics revealed in census data.
Population & Survey Sample Characteristics  
(East Central Florida, 2014)  

Sources:  Census 2010, Summary File 3 (SF 3).  U.S. Census Bureau.  
2014 PRC Community Health Survey, Professional Research Consultants, Inc.

Further note that the poverty descriptions and segmentation used in this report are based on administrative poverty thresholds determined by the US Department of Health & Human Services. These guidelines define poverty status by household income level and number of persons in the household (e.g., the 2014 guidelines place the poverty threshold for a family of four at $23,850 annual household income or lower). In sample segmentation: “very low income” refers to community members living in a household with defined poverty status; “low income” refers to households with incomes just above the poverty level, earning up to twice the poverty threshold; and “mid/high income” refers to those households living on incomes which are twice or more the federal poverty level.

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 the defined area with a high degree of confidence.

### Benchmark Data

#### Trending

PRC administered similar surveys in the region on behalf of local sponsors in 1999 (which excluded Brevard County), 2004, and 2009. Trending data, as revealed by comparison to prior survey results, are provided throughout this report whenever available.

#### Florida Risk Factor Data

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

#### Nationwide Risk Factor Data

Nationwide risk factor data, which are also provided in comparison charts, are taken from the 2013 PRC National Health Survey; the methodological approach for the national study is identical to that employed in this assessment, and these data may be generalized to the US population with a high degree of confidence.
Healthy People provides science-based, 10-year national objectives for improving the health of all Americans. The Healthy People initiative is grounded in the principle that setting national objectives and monitoring progress can motivate action. For three decades, Healthy People has established benchmarks and monitored progress over time in order to:

- Encourage collaborations across sectors.
- Guide individuals toward making informed health decisions.
- Measure the impact of prevention activities.

Healthy People 2020 is the product of an extensive stakeholder feedback process that is unparalleled in government and health. It integrates input from public health and prevention experts, a wide range of federal, state and local government officials, a consortium of more than 2,000 organizations, and perhaps most importantly, the public. More than 8,000 comments were considered in drafting a comprehensive set of Healthy People 2020 objectives.
The following “areas of opportunity/need” represent the significant health needs of the community, based on the information gathered through this Community Health Needs Assessment, national data, as well as continuing or emerging trends. From these data, opportunities for health improvement exist in the area with regard to the following health issues (see also the summary tables presented in subsequent pages): the following table also outlines specific indicators deemed significant at the regional (East Central Florida) and/or county levels.

<table>
<thead>
<tr>
<th>Identified Areas of Need</th>
<th>Indicators With Significant Findings (Regionally ☑ or at the County Level ✓)</th>
<th>East Central Florida</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Access to Healthcare Services</strong></td>
<td>[Age 18-64] Lack Health Insurance ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Difficulty Getting Appointment ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Difficulty Finding Physician ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Cost Prevented Physician Visit ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Inconvenient Hrs Prevented Dr Visit ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Transportation Hindered Dr Visit ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Cost Prevented Getting Prescription ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Have a Specific Source of Ongoing Care ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Two or More ER Visits in Past Year ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Attended Health Event in Past Year ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Cancer</strong></td>
<td>Skin Cancer Prevalence ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Cancer (Other Than Skin) Prevalence ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Mammography [Women 50-74] ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Pap Smear Testing [Women 21-65] ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Diabetes</strong></td>
<td>Diabetes/High Blood Sugar ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Borderline/Pre-Diabetes ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Disability</strong></td>
<td>Activity Limitations ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Heart Disease &amp; Stroke</strong></td>
<td>1+ Cardiovascular Risk Factor ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Stroke Prevalence ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Blood Pressure Screening ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>High Blood Pressure ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>High Cholesterol ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Mental Health</strong></td>
<td>“Fair/Poor” Mental Health ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Symptoms of Chronic Depression ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Depressed Persons Seeking Help ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Ever Sought Help for Mental Health ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Ever Taken Meds for Mental Health ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>7+ Days Without Enough Rest or Sleep ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Nutrition, Physical Activity &amp; Weight</strong></td>
<td>Difficulty Accessing Fresh Produce ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>No Leisure-Time Physical Activity ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Meeting Physical Activity Guidelines ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Overweight (BMI 25+) ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
<tr>
<td></td>
<td>Obese (BMI 30+) ✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
<td>✓</td>
</tr>
</tbody>
</table>

— continued next page —
Comparison With National Benchmarks

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

<table>
<thead>
<tr>
<th>FAVORABLE COMPARISONS</th>
<th>UNFAVORABLE COMPARISONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood Pressure Screenings</td>
<td>High Blood Cholesterol</td>
</tr>
<tr>
<td>Cholesterol Screenings</td>
<td>Skin Cancer</td>
</tr>
<tr>
<td>Blood Sugar Test (Non-Diabetics)</td>
<td>Female Cancer Screenings</td>
</tr>
<tr>
<td>Flu Vaccines (Seniors)</td>
<td>Borderline/Pre-Diabetes</td>
</tr>
<tr>
<td>Fruit/Vegetable Consumption</td>
<td>Meeting Physical Activity Guidelines</td>
</tr>
<tr>
<td>Binge Drinking</td>
<td>Sought Help for Substance Abuse</td>
</tr>
<tr>
<td>Drinking and Driving</td>
<td>Lack Healthcare Coverage (Age 18-64)</td>
</tr>
<tr>
<td>Smoking in the Home</td>
<td>Difficulty Finding a Physician in the Past Year</td>
</tr>
<tr>
<td>Cigar and Smokeless Tobacco Use</td>
<td>Specific Source for Care</td>
</tr>
<tr>
<td>Specific Source of Care (Seniors)</td>
<td>Routine Dental Visits</td>
</tr>
<tr>
<td></td>
<td>Attendance at Health Promotion Events</td>
</tr>
<tr>
<td></td>
<td>Ratings of Local Healthcare</td>
</tr>
</tbody>
</table>

Comparison With Healthy People 2020

Several survey indicators can be compared with the national health objectives set forth in *Healthy People 2020: Improving the Lives of Americans*. The table below details those for which East Central Florida currently meets or has yet to meet established objectives.

<table>
<thead>
<tr>
<th>OBJECTIVES MET</th>
<th>OBJECTIVES UNMET</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood Pressure Screenings</td>
<td>Hypertension</td>
</tr>
<tr>
<td>Cholesterol Screenings</td>
<td>High Blood Cholesterol</td>
</tr>
<tr>
<td>Colorectal Cancer Screenings</td>
<td>Female Cancer Screenings</td>
</tr>
<tr>
<td>Leisure-Time Physical Activity</td>
<td>Osteoporosis (Age 50+)</td>
</tr>
<tr>
<td>Binge Drinking</td>
<td>Flu Vaccines (Seniors and High-Risk)</td>
</tr>
<tr>
<td>Dental Visits</td>
<td>Pneumonia Vaccines (Seniors and High-Risk)</td>
</tr>
</tbody>
</table>
### East Central Florida Trends: 2004–2014

Compared to findings from a similar survey conducted in East Central Florida in 2004 (the first survey year covering all four East Central Florida counties), there have been statistically significant changes in several health indicators. These are outlined below.

<table>
<thead>
<tr>
<th>FAVORABLE TRENDS</th>
<th>UNFAVORABLE TRENDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Blood Pressure &amp; Cholesterol Screening</td>
<td>Ratings of Personal Health</td>
</tr>
<tr>
<td>Taking Action to Control Hypertension &amp; Cholesterol</td>
<td>Activity Limitations</td>
</tr>
<tr>
<td>Overall Cardiovascular Risk</td>
<td>Ratings of Mental Health</td>
</tr>
<tr>
<td>Sigmoidoscopy/Colonoscopy</td>
<td>Screenings for Cervical Cancer (21-65)</td>
</tr>
<tr>
<td>Flu Vaccines (High-Risk)</td>
<td>Blood Stool Testing (50+)</td>
</tr>
<tr>
<td>Pneumonia Vaccines (65+/High-Risk)</td>
<td>Ever Diagnosed with Asthma</td>
</tr>
<tr>
<td>Fruit/Vegetable Consumption</td>
<td>Diabetes</td>
</tr>
<tr>
<td>Leisure-Time Physical Activity</td>
<td>Healthy Weight/Overweight/Obesity</td>
</tr>
<tr>
<td>Overweight Persons Trying to Lose Weight</td>
<td>Access Barriers (Finding a Physician, Getting an Appointment, Cost of a Dr Visit, &amp; Inconvenient Hours)</td>
</tr>
<tr>
<td>Current Smokers</td>
<td>7+ Days Without Enough Rest/Sleep</td>
</tr>
<tr>
<td>Smoking in the Home (Including Non-Smokers &amp; Households with Children)</td>
<td>Medical Advice to Lose Weight</td>
</tr>
<tr>
<td>Smoking Cessation</td>
<td></td>
</tr>
<tr>
<td>Taking Meds for Mental Health &amp; Depressed Adults Seeking Professional Help</td>
<td></td>
</tr>
<tr>
<td>Perceptions of Safety in the Neighborhood</td>
<td></td>
</tr>
<tr>
<td>Language/Culture as a Barrier to Healthcare</td>
<td></td>
</tr>
</tbody>
</table>

*Use of the Internet for Healthcare Information (this has increased significantly, not characterized as either favorable or unfavorable; subsequently, reliance on physicians for healthcare information has declined)*
Summary Tables: Comparisons With Benchmark Data

The following tables provide an overview of indicators in East Central Florida, including comparisons among the individual counties, comparisons to available state and/or national data, as well as trend data. These data are grouped to correspond with the Focus Areas presented in Healthy People 2020.

Reading the Summary Tables

- In the following charts, East Central Florida results are shown in the larger, blue column.

- The green columns [to the left of the East Central Florida column] provide comparisons among the four counties, identifying differences for each as “better than” (☉), “worse than” (☉☉), or “similar to” (☉☉☉) the combined opposing areas.

- The columns to the right of the East Central Florida column provide trending, as well as comparisons between local data and any available state and national findings, and Healthy People 2020 targets. Again, symbols indicate whether the East Central Florida compares favorably (☉), unfavorably (☉☉), or comparably (☉☉☉) to these external data.

Note that blank table cells signify that data are not available or are not reliable for that area and/or for that indicator.
### General Health Status

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>% &quot;Fair/Poor&quot; Physical Health</td>
<td>☀️</td>
<td>🌧️</td>
<td>☁️</td>
<td>☀️</td>
<td>🌧️</td>
</tr>
<tr>
<td>% Activity Limitations</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
</tr>
</tbody>
</table>

Note: In the green section, each county is compared against all others combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.

### Access to Health Services

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>East Central Florida vs. FL</th>
<th>East Central Florida vs. US</th>
<th>East Central Florida vs. HP2020</th>
<th>Trend</th>
</tr>
</thead>
<tbody>
<tr>
<td>% [Age 18-64] Lack Health Insurance</td>
<td>☁️</td>
<td>☁️</td>
<td>☀️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
</tr>
<tr>
<td>% Difficulty Accessing Healthcare in Past Year (Composite)</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
</tr>
<tr>
<td>% Inconvenient Hrs Prevented Dr Visit in Past Year</td>
<td>☁️</td>
<td>🌧️</td>
<td>☁️</td>
<td>☀️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
</tr>
<tr>
<td>% Cost Prevented Getting Prescription in Past Year</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
</tr>
<tr>
<td>% Cost Prevented Physician Visit in Past Year</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
</tr>
<tr>
<td>% Difficulty Getting Appointment in Past Year</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
</tr>
<tr>
<td>% Difficulty Finding Physician in Past Year</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
</tr>
<tr>
<td>% Transportation Hindered Dr Visit in Past Year</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
<td>☁️</td>
</tr>
<tr>
<td>Access to Health Services (continued)</td>
<td>Each County vs. Others</td>
<td>East Central Florida vs. Benchmarks</td>
<td></td>
<td></td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>% Language/Cultural Barrier Prevented Care/Past Yr</td>
<td>Brevard County: 2.2</td>
<td>East Central Florida vs. FL: 2.2 *</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Stretched/Sacrificed/Skipped Rx Doses to Save Costs</td>
<td>Orange County: 3.5</td>
<td>East Central Florida vs. US: 29.1 **</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>% Healthcare Experiences “Worse” Than Other Races</td>
<td>Osceola County: 29.2</td>
<td>East Central Florida vs. HP2020: 4.8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Healthcare Experiences “Worse” Than Other Races</td>
<td>Seminole County: 25.2</td>
<td>TREND: 27.1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% [Age 18+] Have a Specific Source of Ongoing Care</td>
<td>Brevard County: 77.9</td>
<td>% [Age 18+] Have a Specific Source of Ongoing Care</td>
<td>East Central Florida vs. FL: 72.8</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>% [Age 18-64] Have a Specific Source of Ongoing Care</td>
<td>Orange County: 70.3</td>
<td>East Central Florida vs. US: 76.3</td>
<td></td>
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</tr>
<tr>
<td>% [Age 65+] Have a Specific Source of Ongoing Care</td>
<td>Osceola County: 65.5</td>
<td>East Central Florida vs. HP2020: 95.0</td>
<td></td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>% [Age 65+] Have a Specific Source of Ongoing Care</td>
<td>Seminole County: 78.2</td>
<td>TREND: 74.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Have Had Routine Checkup in Past Year</td>
<td>Brevard County: 69.5</td>
<td>% Have Had Routine Checkup in Past Year</td>
<td>East Central Florida vs. FL: 66.5</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Two or More ER Visits in Past Year</td>
<td>Orange County: 65.6</td>
<td>East Central Florida vs. US: 65.0</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Two or More ER Visits in Past Year</td>
<td>Osceola County: 68.3</td>
<td>East Central Florida vs. HP2020: 65.9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Two or More ER Visits in Past Year</td>
<td>Seminole County: 63.5</td>
<td>TREND: 9.6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Have a Formal/Informal Living Will</td>
<td>Brevard County: 34.6</td>
<td>% Have a Formal/Informal Living Will</td>
<td>East Central Florida vs. FL: 35.2 ***</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Don't Have Access to the Internet for Personal Use</td>
<td>Orange County: 35.1</td>
<td>East Central Florida vs. US: 8.9</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Don't Have Access to the Internet for Personal Use</td>
<td>Osceola County: 36.6</td>
<td>East Central Florida vs. HP2020: 9.6</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Rate Local Healthcare “Fair/Poor”</td>
<td>Seminole County: 5.8</td>
<td>TREND: 8.9 ***</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* Not asked of respondents in Brevard County.
** Not asked of respondents in portions of western Orange County.
*** Not asked of respondents in Brevard County or portions of western Orange County.

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### Arthritis, Osteoporosis & Chronic Back Conditions

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>TRENDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>% [50+] Arthritis/Rheumatism</td>
<td>34.8</td>
<td>40.1</td>
<td>35.5</td>
<td>31.2</td>
<td></td>
</tr>
<tr>
<td>% [50+] Osteoporosis</td>
<td>12.6</td>
<td>12.0</td>
<td>10.9</td>
<td>7.4</td>
<td></td>
</tr>
</tbody>
</table>

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### Cancer

<table>
<thead>
<tr>
<th>Indicators</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>TRENDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Skin Cancer</td>
<td>12.8</td>
<td>6.5</td>
<td>8.9</td>
<td>9.7</td>
<td></td>
</tr>
<tr>
<td>% Cancer (Other Than Skin)</td>
<td>9.8</td>
<td>6.9</td>
<td>6.0</td>
<td>6.0</td>
<td></td>
</tr>
<tr>
<td>% [Men 50+] Prostate Exam in Past 2 Years</td>
<td>80.4</td>
<td>80.8</td>
<td>76.8</td>
<td>82.9</td>
<td></td>
</tr>
<tr>
<td>% [Women 50-74] Mammogram in Past 2 Years</td>
<td>78.6</td>
<td>77.6</td>
<td>76.2</td>
<td>73.8</td>
<td></td>
</tr>
<tr>
<td>% [Women 21-65] Pap Smear in Past 3 Years</td>
<td>79.5</td>
<td>76.7</td>
<td>79.4</td>
<td>85.0</td>
<td></td>
</tr>
<tr>
<td>% [Age 50+] Sigmoid/Colonoscopy Ever</td>
<td>77.1</td>
<td>75.5</td>
<td>73.8</td>
<td>77.7</td>
<td></td>
</tr>
<tr>
<td>% [Age 50+] Blood Stool Test in Past 2 Years</td>
<td>36.2</td>
<td>37.7</td>
<td>36.4</td>
<td>31.0</td>
<td></td>
</tr>
<tr>
<td>% [Age 50-75] Colorectal Cancer Screening</td>
<td>77.5</td>
<td>74.1</td>
<td>74.0</td>
<td>74.4</td>
<td></td>
</tr>
</tbody>
</table>

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### Caregiving

<table>
<thead>
<tr>
<th></th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Provide Unpaid Care for HH Member Age 18-59</td>
<td>☀️ 13.1</td>
<td>🌺 20.8</td>
<td>☁️ 16.8</td>
<td></td>
</tr>
<tr>
<td>% Provide Unpaid Care for HH Member Age 60+</td>
<td>☁️ 9.6</td>
<td>🌺 13.5</td>
<td>☁️ 9.7</td>
<td></td>
</tr>
<tr>
<td>% Provide Unpaid Care for Person Outside HH Age 18-59</td>
<td>☁️ 8.8</td>
<td>☁️ 8.0</td>
<td>☁️ 8.4</td>
<td></td>
</tr>
<tr>
<td>% Provide Unpaid Care for Person Outside HH Age 60+</td>
<td>11.2</td>
<td>8.9</td>
<td>13.4</td>
<td></td>
</tr>
</tbody>
</table>

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### Diabetes

<table>
<thead>
<tr>
<th></th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Diabetes/High Blood Sugar</td>
<td>☁️ 12.3</td>
<td>🌺 13.7</td>
<td>☁️ 20.1</td>
<td>☀️ 10.2</td>
</tr>
<tr>
<td>% Borderline/Pre-Diabetes</td>
<td>☁️ 11.0</td>
<td>☁️ 7.8</td>
<td>☁️ 7.4</td>
<td></td>
</tr>
<tr>
<td>% [Non-Diabetics] Blood Sugar Tested in Past 3 Years</td>
<td>☁️ 59.9</td>
<td>☁️ 54.2</td>
<td>☁️ 57.3</td>
<td></td>
</tr>
</tbody>
</table>

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## Educational & Community-Based Programs

<table>
<thead>
<tr>
<th>% Attended Health Event in Past Year</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>12.5</td>
<td>22.4</td>
<td>20.1</td>
<td>24.7</td>
<td></td>
</tr>
</tbody>
</table>

**% [Employed] Employer Offers Wellness Programs**

<table>
<thead>
<tr>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>64.8</td>
<td>53.9</td>
<td>57.1</td>
<td></td>
</tr>
</tbody>
</table>

### Heart Disease & Stroke

<table>
<thead>
<tr>
<th>% Heart Disease (Heart Attack, Angina, Coronary Disease)</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>7.7</td>
<td>7.6</td>
<td>8.0</td>
<td>4.6</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% Stroke</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.3</td>
<td>2.9</td>
<td>7.3</td>
<td>3.6</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% Blood Pressure Checked in Past 2 Years</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>95.7</td>
<td>95.2</td>
<td>92.8</td>
<td>96.9</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% Told Have High Blood Pressure (Ever)</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>37.9</td>
<td>36.0</td>
<td>34.1</td>
<td>31.5</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% [HBP] Taking Action to Control High Blood Pressure</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>90.3</td>
<td>90.3</td>
<td>93.1</td>
<td>94.2</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% Cholesterol Checked in Past 5 Years</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>92.4</td>
<td>92.5</td>
<td>93.6</td>
<td>95.1</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% Told Have High Cholesterol (Ever)</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>33.5</td>
<td>32.4</td>
<td>35.0</td>
<td>36.5</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>% [HBC] Taking Action to Control High Blood Cholesterol</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>85.9</td>
<td>83.1</td>
<td>90.8</td>
<td>89.0</td>
<td></td>
</tr>
</tbody>
</table>
### Heart Disease & Stroke (continued)

<table>
<thead>
<tr>
<th>% 1+ Cardiovascular Risk Factor</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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<tr>
<td>Note: In the green section, each county is compared against all others combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

### Immunization & Infectious Diseases

<table>
<thead>
<tr>
<th>% [Age 65+] Flu Vaccine in Past Year</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>% [High-Risk 18-64] Flu Vaccine in Past Year</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% [Age 65+] Pneumonia Vaccine Ever</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% [High-Risk 18-64] Pneumonia Vaccine Ever</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Note: In the green section, each county is compared against all others combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### Injury

<table>
<thead>
<tr>
<th>% [Seniors] Fell at Least Once in the Past 3 Months</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
</tr>
</thead>
<tbody>
<tr>
<td>% [Seniors] Have Taken Steps to Reduce Chance of Falling</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Texted/Emailed While Driving in the Past Month</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Note: In the green section, each county is compared against all others combined. Throughout these tables, a blank or empty cell indicates that data are not available for this indicator or that sample sizes are too small to provide meaningful results.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### East Central Florida vs. Benchmarks

<table>
<thead>
<tr>
<th>East Central Florida</th>
<th>vs. FL</th>
<th>vs. US</th>
<th>vs. HP2020</th>
<th>TRENDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>% 1+ Cardiovascular Risk Factor</td>
<td>83.9</td>
<td>82.3</td>
<td>89.9</td>
<td></td>
</tr>
<tr>
<td>% [Age 65+] Flu Vaccine in Past Year</td>
<td>73.8</td>
<td>54.7</td>
<td>57.5</td>
<td>90.0</td>
</tr>
<tr>
<td>% [High-Risk 18-64] Flu Vaccine in Past Year</td>
<td>41.6</td>
<td>45.9</td>
<td>90.0</td>
<td></td>
</tr>
<tr>
<td>% [Age 65+] Pneumonia Vaccine Ever</td>
<td>75.3</td>
<td>65.8</td>
<td>68.4</td>
<td>90.0</td>
</tr>
<tr>
<td>% [High-Risk 18-64] Pneumonia Vaccine Ever</td>
<td>37.7</td>
<td>41.9</td>
<td>60.0</td>
<td></td>
</tr>
<tr>
<td>% [Seniors] Fell at Least Once in the Past 3 Months</td>
<td>13.0 ***</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% [Seniors] Have Taken Steps to Reduce Chance of Falling</td>
<td>32.9 ***</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Texted/Emailed While Driving in the Past Month</td>
<td>20.4 ***</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*** Not asked of respondents in Brevard County or portions of western Orange County.
<table>
<thead>
<tr>
<th>Mental Health &amp; Mental Disorders</th>
<th>Each County vs. Others</th>
<th>East Central Florida vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>% “Fair/Poor” Mental Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brevard County</td>
<td>9.9</td>
<td>vs. FL 12.5</td>
</tr>
<tr>
<td>Orange County</td>
<td>13.7</td>
<td>vs. US 11.9</td>
</tr>
<tr>
<td>Osceola County</td>
<td>13.0</td>
<td>vs. HP2020 10.4</td>
</tr>
<tr>
<td>Seminole County</td>
<td>12.6</td>
<td>TRENDS: similar 10.4</td>
</tr>
<tr>
<td><strong>% Have Taken Meds for Mental Health</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>23.2</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>% Major Depression</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10.5</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>% Symptoms of Chronic Depression (2+ Years)</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>24.3</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>% [Those With Recognized Depression] Seeking Help</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>51.9</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>% Typical Day Is “Extremely/Very” Stressful</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12.3</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>% 7+ Days Without Enough Rest or Sleep</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>44.8</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>% Unable to Obtain Mental Health Svcs/Past Yr</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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<table>
<thead>
<tr>
<th>Nutrition &amp; Weight Status</th>
<th>Each County vs. Others</th>
<th>East Central Florida vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>% Eat 5+ Servings of Fruit or Vegetables per Day</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brevard County</td>
<td>48.1</td>
<td>vs. FL 43.8</td>
</tr>
<tr>
<td>Orange County</td>
<td>42.2</td>
<td>vs. US 39.5</td>
</tr>
<tr>
<td>Osceola County</td>
<td>38.5</td>
<td>vs. HP2020 34.2</td>
</tr>
<tr>
<td>Seminole County</td>
<td>46.2</td>
<td>TRENDS: better 34.2</td>
</tr>
<tr>
<td><strong>% &quot;Very/Somewhat&quot; Difficult to Buy Fresh Produce</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>28.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>26.4</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4.6
### Nutrition & Weight Status (continued)

<table>
<thead>
<tr>
<th></th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>East Central Florida vs. FL</th>
<th>vs. US</th>
<th>vs. HP2020</th>
<th>TREND</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Medical Advice on Nutrition in Past Year</td>
<td>![Cloud] 38.9</td>
<td>![Sun] 44.9</td>
<td>![Purple] 43.3</td>
<td>![Rain] 38.3</td>
<td>![Cloud] 42.3</td>
<td>![Rain] 39.2</td>
<td>![Purple] 42.1</td>
<td>![Cloud]</td>
</tr>
<tr>
<td>% “Often/Sometimes” Worried About Food Running Out</td>
<td>![Sun] 21.2</td>
<td>![Rain] 30.1</td>
<td>![Purple] 35.5</td>
<td>![Sun] 20.6</td>
<td>![Sun] 26.6 **</td>
<td>![Rain]</td>
<td>![Rain]</td>
<td>![Rain]</td>
</tr>
<tr>
<td>% “Often/Sometimes” Ran Out of Food Last Month</td>
<td>![Sun] 13.7</td>
<td>![Purple] 24.2</td>
<td>![Rain] 29.4</td>
<td>![Sun] 14.2</td>
<td>![Sun] 20.3 **</td>
<td>![Rain]</td>
<td>![Rain]</td>
<td>![Rain]</td>
</tr>
<tr>
<td>% “Always/Frequently” Have to Choose Between Food/Bills</td>
<td>![Cloud] 6.3</td>
<td>![Purple] 10.9</td>
<td>![Rain] 8.1</td>
<td>![Rain] 3.2</td>
<td>![Sun] 8.0 **</td>
<td>![Rain]</td>
<td>![Rain]</td>
<td>![Rain]</td>
</tr>
<tr>
<td>% Healthy Weight (BMI 18.5-24.9)</td>
<td>![Cloud] 31.1</td>
<td>![Rain] 30.6</td>
<td>![Purple] 28.2</td>
<td>![Purple] 36.9</td>
<td>![Rain] 31.4</td>
<td>![Purple] 36.4</td>
<td>![Rain] 34.4</td>
<td>![Rain] 33.9</td>
</tr>
<tr>
<td>% Overweight (BMI 25+)</td>
<td>![Cloud] 66.9</td>
<td>![Purple] 67.0</td>
<td>![Rain] 70.3</td>
<td>![Rain] 61.3</td>
<td>![Rain] 66.3</td>
<td>![Rain] 62.1</td>
<td>![Rain] 63.1</td>
<td>![Rain] 60.0</td>
</tr>
<tr>
<td>% Obese (BMI 30+)</td>
<td>![Cloud] 29.5</td>
<td>![Purple] 35.0</td>
<td>![Rain] 30.9</td>
<td>![Rain] 26.8</td>
<td>![Rain] 31.9</td>
<td>![Rain] 25.2</td>
<td>![Rain] 29.0</td>
<td>![Rain] 30.5</td>
</tr>
<tr>
<td>% [Overweights] Trying to Lose Weight Both Diet/Exercise</td>
<td>![Cloud] 43.0</td>
<td>![Purple] 37.4</td>
<td>![Rain] 46.5</td>
<td>![Rain] 51.8</td>
<td>![Rain] 41.9</td>
<td>![Rain] 25.2</td>
<td>![Rain] 29.0</td>
<td>![Rain] 30.5</td>
</tr>
<tr>
<td>% Medical Advice to Lose Weight in Past Year</td>
<td>![Rain] 20.0</td>
<td>![Sun] 28.8</td>
<td>![Rain] 22.0</td>
<td>![Rain] 22.4</td>
<td>![Rain] 24.5 **</td>
<td>![Rain] 39.5</td>
<td>![Rain] 35.0</td>
<td>![Rain]</td>
</tr>
</tbody>
</table>

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### Oral Health

<table>
<thead>
<tr>
<th></th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>East Central Florida vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Dental Visit in Past Year</td>
<td>67.2</td>
<td>55.9</td>
<td>56.1</td>
<td>65.1</td>
<td>60.1</td>
</tr>
<tr>
<td>% Routine Dental Checkup in Past Yr</td>
<td>52.3</td>
<td>51.6</td>
<td></td>
<td>62.5</td>
<td>54.6 ***</td>
</tr>
<tr>
<td>% Have Dental Insurance</td>
<td>60.4</td>
<td>65.7</td>
<td>57.3</td>
<td>61.1</td>
<td>62.8</td>
</tr>
<tr>
<td>% Unable to Get Dental Care in Past 24 Months</td>
<td>14.7</td>
<td>17.3</td>
<td>20.9</td>
<td>13.8</td>
<td>16.4 **</td>
</tr>
</tbody>
</table>

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### Physical Activity

<table>
<thead>
<tr>
<th></th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>East Central Florida vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>% [Employed] Job Entails Mostly Sitting/Standing</td>
<td>63.9</td>
<td>66.4</td>
<td>56.0</td>
<td>68.8</td>
<td>65.3</td>
</tr>
<tr>
<td>% No Leisure-Time Physical Activity</td>
<td>19.9</td>
<td>26.0</td>
<td>26.9</td>
<td>15.6</td>
<td>23.0</td>
</tr>
<tr>
<td>% Meeting Physical Activity Guidelines</td>
<td>47.3</td>
<td>42.3</td>
<td>37.9</td>
<td>47.3</td>
<td>43.8</td>
</tr>
<tr>
<td>% Moderate Physical Activity</td>
<td>28.7</td>
<td>26.6</td>
<td>22.8</td>
<td>27.3</td>
<td>26.8</td>
</tr>
<tr>
<td>% Vigorous Physical Activity</td>
<td>36.4</td>
<td>32.5</td>
<td>29.1</td>
<td>35.5</td>
<td>33.6</td>
</tr>
<tr>
<td>% Use a Gym or Rec Ctr for Exercise at Least Weekly</td>
<td>26.8</td>
<td>20.9</td>
<td>27.5</td>
<td></td>
<td>26.1 ***</td>
</tr>
</tbody>
</table>

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*** Not asked of respondents in Brevard County or portions of western Orange County.
### Physical Activity (continued)

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>East Central Florida vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Use a Park or Trail for Exercise at Least Weekly</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>26.7</td>
<td>41.2</td>
<td>36.7</td>
<td></td>
<td>31.5 ***</td>
</tr>
<tr>
<td>% Less Active Than I Want</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>70.7</td>
<td>69.8</td>
<td>73.1</td>
<td></td>
<td>71.1 ***</td>
</tr>
<tr>
<td>% Medical Advice on Physical Activity in Past Year</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>44.3</td>
<td>48.9</td>
<td>45.5</td>
<td>46.4</td>
<td>47.0</td>
</tr>
<tr>
<td>% Neighborhood is “Slightly/Not At All Safe”</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>13.1</td>
<td>31.1</td>
<td>18.1</td>
<td>10.8</td>
<td>21.1 **</td>
</tr>
</tbody>
</table>

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### Respiratory Diseases

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>East Central Florida vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Chronic Lung Disease</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>10.8</td>
<td>9.4</td>
<td>12.3</td>
<td>7.6</td>
<td>9.8</td>
</tr>
<tr>
<td>% Asthma (Currently Have)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9.0</td>
<td>9.9</td>
<td>14.1</td>
<td>11.4</td>
<td>10.4</td>
</tr>
<tr>
<td>% Asthma (Ever Diagnosed)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>15.4</td>
<td>14.6</td>
<td>21.3</td>
<td>14.7</td>
<td>15.5</td>
</tr>
</tbody>
</table>

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### Substance Abuse

<table>
<thead>
<tr>
<th>Substance Abuse</th>
<th>Each County vs. Others</th>
<th>East Central Florida vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>% Current Drinker</strong></td>
<td>Brevard County</td>
<td>Orange County</td>
</tr>
<tr>
<td></td>
<td>61.7</td>
<td>51.3</td>
</tr>
<tr>
<td><strong>% Chronic Drinker (Average 2+ Drinks/Day)</strong></td>
<td>5.7</td>
<td>4.0</td>
</tr>
<tr>
<td><strong>% Binge Drinker (Single Occasion - 5+ Drinks Men, 4+ Women)</strong></td>
<td>15.2</td>
<td>14.4</td>
</tr>
<tr>
<td><strong>% Drinking &amp; Driving in Past Month</strong></td>
<td>1.8</td>
<td>4.6</td>
</tr>
<tr>
<td><strong>% Ever Sought Help for Alcohol or Drug Problem</strong></td>
<td>5.2</td>
<td>2.4</td>
</tr>
</tbody>
</table>

**Not asked of respondents in portions of western Orange County.**

### Tobacco Use

<table>
<thead>
<tr>
<th>Tobacco Use</th>
<th>Each County vs. Others</th>
<th>East Central Florida vs. Benchmarks</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>% Current Smoker</strong></td>
<td>Brevard County</td>
<td>Orange County</td>
</tr>
<tr>
<td></td>
<td>18.2</td>
<td>17.4</td>
</tr>
<tr>
<td><strong>% Someone Smokes at Home</strong></td>
<td>11.8</td>
<td>10.4</td>
</tr>
<tr>
<td><strong>% [Non-Smokers] Someone Smokes in the Home</strong></td>
<td>5.0</td>
<td>1.9</td>
</tr>
<tr>
<td><strong>% [Household With Children] Someone Smokes in the Home</strong></td>
<td>10.9</td>
<td>7.3</td>
</tr>
<tr>
<td><strong>% [Smokers] Received Advice to Quit Smoking</strong></td>
<td>65.8</td>
<td>67.8</td>
</tr>
<tr>
<td>Tobacco Use (continued)</td>
<td>Each County vs. Others</td>
<td>East Central Florida vs. Benchmarks</td>
</tr>
<tr>
<td>-------------------------</td>
<td>------------------------</td>
<td>------------------------------------</td>
</tr>
<tr>
<td></td>
<td>Brevard County</td>
<td>Orange County</td>
</tr>
<tr>
<td>% [Smokers] Have Quit Smoking 1+ Days in Past Year</td>
<td></td>
<td></td>
</tr>
<tr>
<td>% Believe That Secondhand Smoke is Very Harmful</td>
<td>58.6</td>
<td>66.2</td>
</tr>
<tr>
<td>% Smoke Cigars</td>
<td>2.0</td>
<td>1.9</td>
</tr>
<tr>
<td>% Use Smokeless Tobacco</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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GENERAL HEALTH STATUS
Overall Health Status

Self-Reported Health Status

A total of 53.5% of East Central Florida adults rate their overall health as “excellent” or “very good.”

- Another 29.0% gave “good” ratings of their overall health.

However, 17.6% of East Central Florida adults believe that their overall health is “fair” or “poor.”

- Better than statewide findings.
- Similar to the national percentage.
- Viewed by county, residents of Brevard and Seminole counties exhibit the lowest response of “fair/poor” health, while those in Orange and Osceola counties reported the highest.

Marks a statistically significant increase from 2004 “fair/poor” health reports.

Experience “Fair” or “Poor” Overall Health

NOTE:
- Differences noted in the text represent significant differences determined through statistical testing.
- Where sample sizes permit, county-level data are provided.
- Trend descriptions are measured against baseline data – i.e., the earliest year that full four-county data are available or that is presented in this report (typically 2004).

Sources:
- PRC Community Health Survey, Professional Research Consultants, Inc. [Item 5]
- Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC); Florida data.
- PRC National Health Surveys, Professional Research Consultants, Inc.

Notes:
- Asked of all respondents.
Adults more likely to report experiencing “fair” or “poor” overall health include:

- Residents living at lower incomes (note the negative correlation with income).
- Blacks and Hispanics.
- Those aged 40 and older.
- Other differences within demographic groups, as illustrated in the following chart, are not statistically significant.

Experience “Fair” or “Poor” Overall Health
(East Central Florida, 2014)

Charts throughout this report (such as that here) detail survey findings among key demographic groups—namely by gender, age groupings, income (based on poverty status), and race/ethnicity.
Activity Limitations

An individual can get a disabling impairment or chronic condition at any point in life. Compared with people without disabilities, people with disabilities are more likely to:

- Experience difficulties or delays in getting the health care they need.
- Not have had an annual dental visit.
- Not have had a mammogram in past 2 years.
- Not have had a Pap test within the past 3 years.
- Not engage in fitness activities.
- Use tobacco.
- Be overweight or obese.
- Have high blood pressure.
- Experience symptoms of psychological distress.
- Receive less social-emotional support.
- Have lower employment rates.

There are many social and physical factors that influence the health of people with disabilities. The following three areas for public health action have been identified, using the International Classification of Functioning, Disability, and Health (ICF) and the three World Health Organization (WHO) principles of action for addressing health determinants.

- **Improve the conditions of daily life** by: encouraging communities to be accessible so all can live in, move through, and interact with their environment; encouraging community living; and removing barriers in the environment using both physical universal design concepts and operational policy shifts.

- **Address the inequitable distribution of resources among people with disabilities and those without disabilities** by increasing: appropriate health care for people with disabilities; education and work opportunities; social participation; and access to needed technologies and assistive supports.

- **Expand the knowledge base and raise awareness about determinants of health for people with disabilities** by increasing: the inclusion of people with disabilities in public health data collection efforts across the lifespan; the inclusion of people with disabilities in health promotion activities; and the expansion of disability and health training opportunities for public health and health care professionals.

– Healthy People 2020 (www.healthypeople.gov)

A total of 23.6% of East Central Florida adults are limited in some way in some activities due to a physical, mental or emotional problem.

- Comparable to the prevalence statewide.
- Comparable to the national prevalence.
- Comparable findings when viewed by county.

Marks a statistically significant increase in activity limitations since 2004.
In looking at responses by key demographic characteristics, these population segments are more often limited in activities:

- Women.
- Adults 40 and over.
- Those living in households with lower incomes.
- White residents.
Among persons reporting activity limitations, these are most often attributed to musculoskeletal issues, such as back/neck problems, arthritis/rheumatism, difficulty walking, or fractures or bone/joint injuries.

### Type of Problem That Limits Activities
(Among Those Reporting Activity Limitations; East Central Florida, 2014)

<table>
<thead>
<tr>
<th>Type of Problem</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Back/Neck Problem</td>
<td>17.7%</td>
</tr>
<tr>
<td>Arthritis/Rheumatism</td>
<td>8.8%</td>
</tr>
<tr>
<td>Walking Problem</td>
<td>8.0%</td>
</tr>
<tr>
<td>Fracture/Bone/Joint Injury</td>
<td>6.9%</td>
</tr>
<tr>
<td>Lung/Breathing Problem</td>
<td>4.8%</td>
</tr>
<tr>
<td>Heart Condition</td>
<td>4.4%</td>
</tr>
<tr>
<td>Depression/Anxiety/Mental</td>
<td>4.0%</td>
</tr>
<tr>
<td>Various Other (&lt;3% Each)</td>
<td>45.4%</td>
</tr>
</tbody>
</table>

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 120]
Notes: Asked of those respondents reporting activity limitations.
Caregiving
Within the Household

A total of 15.2% of East Central Florida adults currently provide unpaid care for at least one member of their household aged 18 to 59. (Note that this item was not asked in Brevard County or in portions of Orange County.)

- Highest in Osceola County.

A total of 10.3% of East Central Florida adults currently provide unpaid care for at least one member of their household aged 60 and older. Again, this item was not asked in Brevard County or in portions of Orange County.

- Highest in Osceola County.

Provide Unpaid Care for a Household Member
(Excluding Brevard County and Portions of Orange County; 2014)

In looking at responses by key demographic characteristics, these population segments are more likely to provide unpaid care for a member of the household between the ages of 18 and 59:

- Adults under 65 (note the negative correlation with age).
- Those living in households with lower incomes.

The following population segments are more likely to provide unpaid care for a member of the household aged 60+:

- Seniors (aged 65+).
- Those living in households with lower incomes (negative correlation with income).
Provide Unpaid Care for a Household Member
(Excluding Brevard County and Portions of Orange County; 2014)

Outside the Household

A total of 8.6% of East Central Florida adults currently provide unpaid care for at least one person living outside their household aged 18 to 59. Note that this item was not asked in Brevard County or in portions of Orange County.

Similar findings when viewed by county.

A total of 11.6% of East Central Florida adults currently provide unpaid care for at least one person outside their household aged 60 and older. Again, this item was not asked in Brevard County or in portions of Orange County.

Similar findings when viewed by county.

Provide Unpaid Care for a Person Outside the Household
(Excluding Brevard County and Portions of Orange County; 2014)

Sources:
2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 121]

Notes:
- This item was asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households with incomes below 100% of the federal poverty level; "Low Income" includes households with incomes between 100% and 199% of the federal poverty level; "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.
- In this case, unpaid care included assistance with personal needs, help with household chores, managing finances, and/or arranging outside services to help another person.
In looking at responses by key demographic characteristics, these population segments are more likely to provide unpaid care for a member outside the household between the ages of 18 and 59:

- Women.
- Black residents.

The following population segments are more likely to provide unpaid care for a member outside the household aged 60+:

- Women.
- Residents aged 40 to 64.
- Upper-income residents.
- Whites and Blacks.

### Provide Unpaid Care for a Person Outside the Household
(Excluding Brevard County and Portions of Orange County; 2014)

<table>
<thead>
<tr>
<th>Group</th>
<th>For A Person Age 18-59</th>
<th>For A Person Age 60+</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>5.0%</td>
<td>9.2%</td>
</tr>
<tr>
<td>Women</td>
<td>9.9%</td>
<td>11.9%</td>
</tr>
<tr>
<td>18 to 39</td>
<td>13.1%</td>
<td>9.1%</td>
</tr>
<tr>
<td>40 to 64</td>
<td>8.5%</td>
<td>8.1%</td>
</tr>
<tr>
<td>65+</td>
<td>9.1%</td>
<td>6.2%</td>
</tr>
<tr>
<td>Very Low Income</td>
<td>15.9%</td>
<td>7.6%</td>
</tr>
<tr>
<td>Low Income</td>
<td>10.4%</td>
<td>9.2%</td>
</tr>
<tr>
<td>Mid/High Income</td>
<td>10.0%</td>
<td>4.1%</td>
</tr>
<tr>
<td>White</td>
<td>5.7%</td>
<td>9.2%</td>
</tr>
<tr>
<td>Black</td>
<td>8.4%</td>
<td>9.4%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>8.6%</td>
<td>8.6%</td>
</tr>
<tr>
<td>ECF</td>
<td>9.9%</td>
<td>10.0%</td>
</tr>
</tbody>
</table>

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Item 123)

Notes:
- Asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
- “ECF” includes households with incomes at 200% or more of the federal poverty level.
- In this case, unpaid care included assistance with personal needs, help with household chores, managing finances, and/or arranging outside services to help another person.
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 challenges. Mental health is essential to personal well-being, family and interpersonal relationships, and the ability to contribute to community or society. Mental disorders are health conditions that are characterized by alterations in thinking, mood, and/or behavior that are associated with distress and/or impaired functioning. Mental disorders contribute to a host of problems that may include disability, pain, or death. Mental illness is the term that refers collectively to all diagnosable mental disorders.

Mental disorders are among the most common causes of disability. The resulting disease burden of mental illness is among the highest of all diseases. According to the national Institute of Mental Health (NIMH), in any given year, an estimated 13 million American adults (approximately 1 in 17) have a seriously debilitating mental illness. Mental health disorders are the leading cause of disability in the United States and Canada, accounting for 25% of all years of life lost to disability and premature mortality. Moreover, suicide is the 11th leading cause of death in the United States, accounting for the deaths of approximately 30,000 Americans each year.

Mental health and physical health are closely connected. Mental health plays a major role in people’s ability to maintain good physical health. Mental illnesses, such as depression and anxiety, affect people’s ability to participate in health-promoting behaviors. In turn, problems with physical health, such as chronic diseases, can have a serious impact on mental health and decrease a person’s ability to participate in treatment and recovery.

The existing model for understanding mental health and mental disorders emphasizes the interaction of social, environmental, and genetic factors throughout the lifespan. In behavioral health, researchers identify: risk factors, which predispose individuals to mental illness; and protective factors, which protect them from developing mental disorders. Researchers now know that the prevention of mental, emotional, and behavioral (MEB) disorders is inherently interdisciplinary and draws on a variety of different strategies. Over the past 20 years, research on the prevention of mental disorders has progressed. The understanding of how the brain functions under normal conditions and in response to stressors, combined with knowledge of how the brain develops over time, has been essential to that progress. The major areas of progress include evidence that:

- MEB disorders are common and begin early in life.
- The greatest opportunity for prevention is among young people.
- There are multiyear effects of multiple preventive interventions on reducing substance abuse, conduct disorder, antisocial behavior, aggression, and child maltreatment.
- The incidence of depression among pregnant women and adolescents can be reduced.
- School-based violence prevention can reduce the base rate of aggressive problems in an average school by 25 to 33%.
- There are potential indicated preventive interventions for schizophrenia.
- Improving family functioning and positive parenting can have positive outcomes on mental health and can reduce poverty-related risk.
- School-based preventive interventions aimed at improving social and emotional outcomes can also improve academic outcomes.
- Interventions targeting families dealing with adversities, such as parental depression or divorce, can be effective in reducing risk for depression among children and increasing effective parenting.
- Some preventive interventions have benefits that exceed costs, with the available evidence strongest for early childhood interventions.
- Implementation is complex, and it is important that interventions be relevant to the target audiences.

In addition to advancements in the prevention of mental disorders, there continues to be steady progress in treating mental disorders as new drugs and stronger evidence-based outcomes become available.

– Healthy People 2020 (www.healthypeople.gov)
Mental Health Status

Self-Reported Mental Health Status

A total of 67.8% of East Central Florida adults rate their overall mental health as “excellent” or “very good.”

- Another 19.7% gave “good” ratings of their own mental health status.

Self-Reported Mental Health Status
(East Central Florida, 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 112]
Notes: Asked of all respondents.

Excellent 33.4%
Very Good 34.4%
Good 19.7%
Fair 9.2%
Poor 3.3%

A total of 12.5% of East Central Florida adults, however, believe that their overall mental health is “fair” or “poor.”

- Similar to the “fair/poor” response reported nationally.
- Lowest (most favorable) in Brevard County.

Denotes a statistically significant increase from 2009 survey results.

Experience “Fair” or “Poor” Mental Health

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 112]
PRC National Health Surveys, Professional Research Consultants, Inc.
Notes: Asked of all respondents.
Note the strong negative correlation between poor mental health and income.

Women, adults age 40-64, and Hispanics are also more likely to report experiencing “fair/poor” mental health than their demographic counterparts.

**Experience “Fair” or “Poor” Mental Health**  
(East Central Florida, 2014)

**Depression**

**Diagnosed Depression**

A total of 11.4% of East Central Florida adults have been diagnosed with major depression by a physician.

- Statistically similar by county.
- Unchanged over time.

**Have Been Diagnosed With Major Depression**

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. (Item 35)  
Notes: Asked of all respondents.
The prevalence of major depression is notably higher among:

- Community members living at lower incomes (negative correlation with income).
- Women.
- Adults between the ages of 40 and 64.
- Whites and Hispanics.

### Have Been Diagnosed With Major Depression
(East Central Florida, 2014)

<table>
<thead>
<tr>
<th>Income Level</th>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>Very Low Income</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>ECF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Low Income</td>
<td>8.5</td>
<td>14.2</td>
<td>10.9</td>
<td>13.0</td>
<td>9.1</td>
<td>23.5</td>
<td>16.4</td>
<td>8.1</td>
<td>11.4</td>
<td>6.4</td>
<td>14.9</td>
<td>11.4</td>
</tr>
<tr>
<td>Low Income</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Mid/High Income</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>White</td>
<td></td>
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<tr>
<td>Black</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic</td>
<td></td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

### Symptoms of Chronic Depression

A total of 28.4% of East Central Florida adults 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 (symptoms of chronic depression).

- Comparable to national findings.
- Highest in Osceola County; lowest in Brevard County.
- Similar to that reported in East Central Florida in 2004.
Have Experienced Symptoms of Chronic Depression

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 113]
PRC National Health Surveys, Professional Research Consultants, Inc.

Notes:
- Asked of all respondents.
- *Brevard County was not surveyed in 1999.

Note that the prevalence of chronic depression is notably higher among:
- Adults with lower incomes.
- Hispanics.
- Women.

Have Experienced Symptoms of Chronic Depression
(East Central Florida, 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 113]

Notes:
- Asked of all respondents.
- Chronic depression includes periods of two or more years during which the respondent felt depressed or sad on most days, even if (s)he felt okay sometimes.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes at 100% and 199% of the federal poverty level.”Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
Inadequate Sleep

Among East Central Florida respondents, 45.3% say they had 7 or more days in the past month on which they felt they did not get enough sleep. This indicator was not addressed in portions of Orange County.

- Favorably low in Osceola County.
- Marks a statistically significant increase from that reported in East Central Florida in 2004.

**Have Experienced Seven or More Days in the Past Month Without Enough Rest or Sleep**
(East Central Florida Adults, Excluding Portions of Orange County; 2014)

<table>
<thead>
<tr>
<th>Year</th>
<th>Brevard County*</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>East Central Florida</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>37.6%</td>
<td>41.0%</td>
<td>40.8%</td>
<td>41.2%</td>
<td>41.5%</td>
</tr>
<tr>
<td>2004</td>
<td>41.3%</td>
<td>41.5%</td>
<td>41.0%</td>
<td>40.9%</td>
<td>41.1%</td>
</tr>
<tr>
<td>2009</td>
<td>44.8%</td>
<td>42.5%</td>
<td>41.0%</td>
<td>40.9%</td>
<td>40.9%</td>
</tr>
<tr>
<td>2014**</td>
<td>45.3%</td>
<td>45.7%</td>
<td>45.3%</td>
<td>45.7%</td>
<td>45.3%</td>
</tr>
</tbody>
</table>

Sources:
- PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 114]
- Asked of all respondents.
- *Brevard County was not surveyed in 1999.
- **This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

Lack of adequate rest or sleep is notably higher among:

- Young adults (note the negative correlation with age).
- Adults with lower incomes (negative correlation with income).
- Hispanics.
- Women.
Have Experienced Seven or More Days in the Past Month Without Enough Rest or Sleep
(Excluding Brevard County and Portions of Orange County; 2014)

Stress

Just less than 4 in 10 East Central Florida adults consider their typical day to be “not very stressful” (26.4%) or “not at all stressful” (12.3%).

- Another 48.3% of survey respondents characterize their typical day as “moderately stressful.”
In contrast, 13.1% of East Central Florida adults experience “very” or “extremely” stressful days on a regular basis.

- Similar to national findings.
- Similar findings by county.
- Statistically similar to the 2009 survey findings.

Note that high stress levels are more prevalent among women, adults under 65, and those living in households with lower incomes (negative correlation with income).
Mental Health Treatment

Among adults with recognized depression, 51.1% acknowledge that they have sought professional help for a mental or emotional problem.

- Particularly low in Osceola County.
- Marks a statistically significant increase over time among adults with recognized depression.

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

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 141]
Notes: Reflects those respondents who have been diagnosed with major depression or who have experienced two or more years of depression at some point in their lives.

Among East Central Florida survey respondents, 3.7% were unable to obtain needed mental health services in the past year.

- Lowest in Seminole County.
- Unchanged from 2009 survey results.

Unable to Obtain Mental Health Services in the Past Year

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 117]
Notes: Asked of all respondents.
A total of 23.2% of East Central Florida residents have ever taken medication for their mental health.

- Lowest in Osceola County.
- Marks a statistically significant increase since 2009.

Have Taken Prescribed Medications to Help With Mental or Emotional Problems

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. (Item 118)
Notes: Asked of all respondents.
DEATH, DISEASE & CHRONIC CONDITIONS
Cardiovascular Disease

Heart disease is the leading cause of death in the United States, with stroke following as the third leading cause. Together, heart disease and stroke are among the most widespread and costly health problems facing the nation today, accounting for more than $500 billion in healthcare expenditures and related expenses in 2010 alone. Fortunately, they are also among the most preventable.

The leading modifiable (controllable) risk factors for heart disease and stroke are:

- High blood pressure
- High cholesterol
- Cigarette smoking
- Diabetes
- Poor diet and physical inactivity
- Overweight and obesity

The risk of Americans developing and dying from cardiovascular disease would be substantially reduced if major improvements were made across the US population in diet and physical activity, control of high blood pressure and cholesterol, smoking cessation, and appropriate aspirin use.

The burden of cardiovascular disease is disproportionately distributed across the population. There are significant disparities in the following based on gender, age, race/ethnicity, geographic area, and socioeconomic status:

- Prevalence of risk factors
- Access to treatment
- Appropriate and timely treatment
- Treatment outcomes
- Mortality

Disease does not occur in isolation, and cardiovascular disease is no exception. Cardiovascular health is significantly influenced by the physical, social, and political environment, including: maternal and child health; access to educational opportunities; availability of healthy foods, physical education, and extracurricular activities in schools; opportunities for physical activity, including access to safe and walkable communities; access to healthy foods; quality of working conditions and worksite health; availability of community support and resources; and access to affordable, quality healthcare.

– Healthy People 2020 (www.healthypeople.gov)
Prevalence of Heart Disease & Stroke

Prevalence of Heart Disease

A total of 7.2% of surveyed adults report that they suffer from or have been diagnosed with heart disease, such as coronary heart disease, angina or heart attack.

- Similar to the national prevalence.
- Favorably low in Seminole County.
- Statistically unchanged since 2004.

Prevalence of Heart Disease

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 142]

Notes:
- Asked of all respondents.
- Includes diagnoses of heart attack, angina or coronary heart disease.
- *Brevard County was not surveyed in 1999.

Prevalence of Heart Disease
(East Central Florida, 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 142]

Notes:
- Asked of all respondents.
- Includes diagnoses of heart attack, angina or coronary heart disease.
- *Brevard County was not surveyed in 1999.

Adults more likely to have been diagnosed with chronic heart disease include:

- Adults aged 40 and older (positive correlation with age).
- Men.

Prevalence of Heart Disease
(East Central Florida, 2014)
A total of 3.6% of surveyed adults report that they suffer from or have been diagnosed with cerebrovascular disease (a stroke).

- Similar to statewide findings.
- Similar to national findings.
- Higher among respondents in Osceola County.
- No statistically significant change in regional stroke prevalence over time.

Prevalence of Stroke

Adulst more likely to have been diagnosed with stroke include:

- Seniors (age 65+).
- Those living in households with lower incomes.
Cardiovascular Risk Factors

Controlling risk factors for heart disease and stroke remains a challenge. High blood pressure and cholesterol are still major contributors to the national epidemic of cardiovascular disease. High blood pressure affects approximately 1 in 3 adults in the United States, and more than half of Americans with high blood pressure do not have it under control. High sodium intake is a known risk factor for high blood pressure and heart disease, yet about 90% of American adults exceed their recommendation for sodium intake.

— Healthy People 2020 (www.healthypeople.gov)

Hypertension (High Blood Pressure)

High Blood Pressure Testing

A total of 95.4% of East Central Florida adults have had their blood pressure tested within the past two years.

- Higher than national findings.
- Satisfies the Healthy People 2020 target (94.9% or higher).
- Lowest in Osceola County.

Marks a significant increase from 2004 survey results.

Have Had Blood Pressure Checked in the Past Two Years

Healthy People 2020 Target = 92.6% or higher

Prevalence of Hypertension

A total of 35.5% of adults have been told at some point that their blood pressure was high.

- Similar to the Florida prevalence.
- Similar to the national prevalence.
- Fails to satisfy the Healthy People 2020 target (26.9% or lower).
- Similar findings by county.

Statistically unchanged over time.

Among hypertensive adults, 78.1% have been diagnosed with high blood pressure more than once.
Prevalence of High Blood Pressure

Healthy People 2020 Target = 26.9% or lower

ECF More Than Once: 78.1%

Hypertension diagnoses are higher among:

- Adults aged 40 and older, and especially seniors.
- Respondents living in households with lower incomes.
- Non-Hispanics.

Prevalence of High Blood Pressure
(East Central Florida, 2014)

Healthy People 2020 Target = 26.9% or Lower
Hypertension Management

Among respondents who have been told that their blood pressure was high, 91.1% report that they are currently taking actions to control their condition.

- Similar to national findings.
- Similar by county.
- Denotes a statistically significant increase since 2004.

Taking Action to Control Hypertension
(Among Adults With High Blood Pressure)

![Graph showing increasing percentage of respondents taking action to control hypertension from 1999 to 2014.]

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 47]

Notes: Asked of all respondents who have been diagnosed with high blood pressure.
- In this case, the term “action” refers to medication, change in diet, and/or exercise.
- *Brevard County was not surveyed in 1999.

High Blood Cholesterol

Blood Cholesterol Testing

A total of 92.9% of East Central Florida adults have had their blood cholesterol checked within the past five years.

- More favorable than Florida findings.
- More favorable than the national findings.
- Satisfies the Healthy People 2020 target (82.1% or higher).
- Favorably high in Seminole County.
- Denotes a statistically significant increase since 2004.
The following demographic segments report lower screening levels:

- Adults under age 65, and especially those under 40 (note the positive correlation with age).
- Residents with lower incomes.
- Non-Whites.
- Men.

### Have Had Blood Cholesterol Levels Checked in the Past Five Years

(East Central Florida, 2014)

<table>
<thead>
<tr>
<th></th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County*</td>
<td>85.9%</td>
<td>91.4%</td>
<td>92.2%</td>
<td>92.5%</td>
</tr>
<tr>
<td>Orange County</td>
<td>87.3%</td>
<td>92.5%</td>
<td>92.2%</td>
<td>92.5%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>80.1%</td>
<td>90.8%</td>
<td>93.5%</td>
<td>93.5%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>85.6%</td>
<td>88.6%</td>
<td>88.8%</td>
<td>88.8%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>87.0%</td>
<td>91.5%</td>
<td>92.2%</td>
<td>92.5%</td>
</tr>
<tr>
<td>Florida</td>
<td>85.9%</td>
<td>87.3%</td>
<td>85.6%</td>
<td>85.6%</td>
</tr>
<tr>
<td>United States</td>
<td>91.6%</td>
<td>94.3%</td>
<td>89.2%</td>
<td>89.2%</td>
</tr>
</tbody>
</table>

Healthy People 2020 Target = 82.1% or Higher
Self-Reported High Blood Cholesterol

A total of 33.6% of adults have been told by a health professional that their cholesterol level was high.

- More favorable than the Florida findings.
- Less favorable than the national prevalence.
- More than twice the Healthy People 2020 target (13.5% or lower).
- Similar findings by county.
- Statistically unchanged since 2004.

Prevalence of High Blood Cholesterol

Healthy People 2020 Target = 13.5% or lower

Note that 18.0% of East Central Florida adults report not having high blood cholesterol, but: 1) have never had their blood cholesterol levels tested; 2) have not been screened in the past 5 years; or 3) do not recall when their last screening was. For these individuals, current prevalence is unknown.

- Note the positive correlation between age and high blood cholesterol.
- Whites and Hispanics report a higher prevalence than Blacks.
- Keep in mind that "unknowns" are relatively high in young adults, lower-income residents, and Non-Whites.
Prevalence of High Blood Cholesterol
(East Central Florida, 2014)

Healthy People 2020 Target = 13.5% or Lower

High Cholesterol Management

Among adults who have been told that their blood cholesterol was high, 85.7% report that they are currently taking actions to control their cholesterol levels.

- Statistically comparable to that found nationwide.
- Highest in Osceola County.
- Marks a statistically significant increase since 2004.

Taking Action to Control High Blood Cholesterol Levels
(Among Adults With High Cholesterol)

Respondents reporting high cholesterol were further asked:

"Are you currently taking any action to help control your high cholesterol, such as taking medication, changing your diet, or exercising?"
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 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 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 US.

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

**Total Cardiovascular Risk**

A total of 83.9% 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.
- Lowest in Seminole County.

Denotes a statistically significant decrease over time.

**Present One or More Cardiovascular Risk Factors**

![Graph showing present one or more cardiovascular risk factors](image-url)

Sources:  
- PRC Community Health Surveys, Professional Research Consultants, Inc. [Item L45]
- PRC National Health Surveys, Professional Research Consultants, Inc.

Notes:  
- Asked of all respondents.
- *Brevard County was not surveyed in 1999.*
Adults more likely to exhibit cardiovascular risk factors include:

- Residents in households with very low income levels.
- Adults age 40 and older, and especially seniors.
- Men.

**Present One or More Cardiovascular Risks or Behaviors**
(East Central Florida, 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 145]
Notes: Asked of all respondents.
- Cardiovascular risk is defined as exhibiting one or more of the following: 1) no leisure-time physical activity; 2) regular/occasional cigarette smoking; 3) hypertension; 4) high blood cholesterol; and/or 5) being overweight/obese.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
Continued advances in cancer research, detection, and treatment have resulted in a decline in both incidence and death rates for all cancers. Among people who develop cancer, more than half will be alive in five years. Yet, cancer remains a leading cause of death in the United States, second only to heart disease.

Many cancers are preventable by reducing risk factors such as: use of tobacco products; physical inactivity and poor nutrition; obesity; and ultraviolet light exposure. Other cancers can be prevented by getting vaccinated against human papillomavirus and hepatitis B virus. In the past decade, overweight and obesity have emerged as new risk factors for developing certain cancers, including colorectal, breast, uterine corpus (endometrial), and kidney cancers. The impact of the current weight trends on cancer incidence will not be fully known for several decades. Continued focus on preventing weight gain will lead to lower rates of cancer and many chronic diseases.

Screening is effective in identifying some types of cancers (see US Preventive Services Task Force [USPSTF] recommendations), including:

- Breast cancer (using mammography)
- Cervical cancer (using Pap tests)
- Colorectal cancer (using fecal occult blood testing, sigmoidoscopy, or colonoscopy)

Healthy People 2020 (www.healthypeople.gov)

Prevalence of Cancer

Skin Cancer

A total of 8.7% of surveyed East Central Florida adults report having been diagnosed with skin cancer.

- Similar to what is found statewide.
- Less favorable than the national average.
- Particularly high in Brevard County; lowest in Orange County.
- The prevalence of skin cancer has not changed over time.

Prevalence of Skin Cancer

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 33]
Behavioral Risk Factor Surveillance System Survey Data, Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC). Florida data.
PRC National Health Surveys, Professional Research Consultants, Inc.
Notes: Asked of all respondents.
*Brevard County was not surveyed in 1999.
A total of 7.3% of respondents have been diagnosed with some type of (non-skin) cancer.

- Similar to the statewide prevalence.
- Similar to the national prevalence.
- Particularly high in Brevard County.
- The prevalence of cancer has remained unchanged over time.

![Prevalence of Cancer (Other Than Skin Cancer)](chart)

**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

**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 the community were measured in the PRC Community Health Survey relative to four cancer sites: male prostate cancer; female breast cancer (mammography); cervical cancer (Pap smear testing); and colorectal cancer (sigmoidoscopy and fecal occult blood testing).
Prostate Cancer Screenings

The US 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.

Given the uncertainties and controversy surrounding prostate cancer screening in men younger than age 75 years, a clinician should not order the PSA test without first discussing with the patient the potential but uncertain benefits and the known harms of prostate cancer screening and treatment. Men should be informed of the gaps in the evidence and should be assisted in considering their personal preferences before deciding whether to be tested.


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 men age 50 and older, 8 in 10 (80.6%) have 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.
- Similar findings by county.
- Statistically unchanged since 2004.
Female Breast Cancer Screening

The US Preventive Services Task Force (USPSTF) recommends screening mammography, with or without clinical breast examination (CBE), every 1-2 years for women age 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 age 50-69, the age group generally included in screening trials. For women age 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 age 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 age 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.
Among women age 50-74, 77.1% had a mammogram within the past two years.

- Similar to statewide findings (which represent all women 50+).
- Lower than the national prevalence.
- Fails to satisfy the Healthy People 2020 target (81.1% or higher).
- Similar findings by county.

Statistically unchanged since 2004.

Among women 40+, 73.1% had a mammogram in the past two years (not shown).

Had a Mammogram in the Past Two Years
(Among Women Age 50-74)

Healthy People 2020 Target = 81.1% or higher

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Items 146-147]
PRC National Health Surveys, Professional Research Consultants, Inc.
Notes:
- Asked of all female respondents age 50 to 74.
- *Brevard County was not surveyed in 1999.
- **Note that Florida data represents all women age 50+ (vs. women 50-74 in local, US, and Healthy People data).
Cervical Cancer Screenings

The US 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 women age 21 to 65, 78.9% had a Pap smear within the past three years.

- Higher than Florida findings (which represents all women 18+).
- Lower than national findings.
- Fails to satisfy the Healthy People 2020 target (93% or higher).
- Favorably high in Seminole County.
- Denotes a significant decrease from previous survey results.
Colorectal Cancer Screenings

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.

Colorectal Cancer Screening

Among adults age 50-75, 75.1% have had an appropriate colorectal cancer screening (fecal occult blood testing within the past year and/or sigmoidoscopy/colonoscopy [lower endoscopy] within the past 10 years).

- Identical to national findings.
- Satisfies the Healthy People 2020 target (70.5% or higher).
- Similar findings by county.
Have Had a Colorectal Cancer Screening
(Among Adults Age 50-75)

Healthy People 2020 Target = 70.5% or Higher

<table>
<thead>
<tr>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>East Central Florida</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>77.5%</td>
<td>74.1%</td>
<td>74.0%</td>
<td>74.4%</td>
<td>75.1%</td>
<td>75.1%</td>
</tr>
</tbody>
</table>

Sources:  
- 2014 PRC Community Health Survey, Professional Research Consultants, Inc.  
- 2013 PRC National Health Survey, Professional Research Consultants, Inc.  

Notes:  
- Asked of all respondents age 50 through 75.  
- In this case, the term “colorectal screening” refers to adults age 50–75 receiving a FOBT (fecal occult blood test) in the past year and/or a lower endoscopy (sigmoidoscopy/colonoscopy) in the past 10 years.

Lower Endoscopy

Among adults age 50 and older, just over three-fourths (76.1%) have had a lower endoscopy (sigmoidoscopy or colonoscopy) at some point in their lives.

- More favorable than Florida findings.
- Comparable to national findings.
- Comparable findings by county.
- Denotes a statistically significant increase over time.

Have Ever Had a Sigmoidoscopy/Colonoscopy Examination
(Among Persons Aged 50 and Older)

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

Notes:  
- Asked of all respondents aged 50 and older.
- *Brevard County was not surveyed in 1999.
Among adults age 50 and older, 36.0% have had a blood stool test (aka “fecal occult blood test”) within the past two years.

- Well above Florida findings.
- Comparable to national findings.
- Comparable findings by county.

Denotes a statistically significant decrease over time.

**Have Had a Blood Stool Examination in the Past 2 Years**
(Among Persons Aged 50 and Older)

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 151]

**Notes:**
- Asked of all respondents aged 50 and older.
- *Brevard County was not surveyed in 1999.*
Respiratory Disease

Asthma and chronic obstructive pulmonary disease (COPD) are significant public health burdens. Specific methods of detection, intervention, and treatment exist that may reduce this burden and promote health.

Asthma is a chronic inflammatory disorder of the airways characterized by episodes of reversible breathing problems due to airway narrowing and obstruction. These episodes can range in severity from mild to life threatening. Symptoms of asthma include wheezing, coughing, chest tightness, and shortness of breath. Daily preventive treatment can prevent symptoms and attacks and enable individuals who have asthma to lead active lives.

COPD is a preventable and treatable disease characterized by airflow limitation that is not fully reversible. The airflow limitation is usually progressive and associated with an abnormal inflammatory response of the lung to noxious particles or gases (typically from exposure to cigarette smoke). Treatment can lessen symptoms and improve quality of life for those with COPD.

Several additional respiratory conditions and respiratory hazards, including infectious agents and occupational and environmental exposures, are covered in other areas of Healthy People 2020. Examples include tuberculosis, lung cancer, acquired immunodeficiency syndrome (AIDS), pneumonia, occupational lung disease, and smoking. Sleep Health is now a separate topic area of Healthy People 2020.

Currently in the United States, more than 23 million people have asthma. Approximately 13.6 million adults have been diagnosed with COPD, and an approximately equal number have not yet been diagnosed. The burden of respiratory diseases affects individuals and their families, schools, workplaces, neighborhoods, cities, and states. Because of the cost to the healthcare system, the burden of respiratory diseases also falls on society; it is paid for with higher health insurance rates, lost productivity, and tax dollars. Annual healthcare expenditures for asthma alone are estimated at $20.7 billion.

Asthma. The prevalence of asthma has increased since 1980. However, deaths from asthma have decreased since the mid-1990s. The causes of asthma are an active area of research and involve both genetic and environmental factors.

Risk factors for asthma currently being investigated include:

- Having a parent with asthma
- Sensitization to irritants and allergens
- Respiratory infections in childhood
- Overweight

Asthma affects people of every race, sex, and age. However, significant disparities in asthma morbidity and mortality exist, in particular for low-income and minority populations. Populations with higher rates of asthma include: children; women (among adults) and boys (among children); African Americans; Puerto Ricans; people living in the Northeast United States; people living below the Federal poverty level; and employees with certain exposures in the workplace.

While there is not a cure for asthma yet, there are diagnoses and treatment guidelines that are aimed at ensuring that all people with asthma live full and active lives.

- Healthy People 2020 (www.healthypeople.gov)

[NOTE: COPD was changed to chronic lower respiratory disease (CLRD) with the introduction of ICD-10 codes. CLRD is used in vital statistics reporting, but COPD is still widely used and commonly found in surveillance reports.]
Chronic Lung Disease

A total of 9.8% of East Central Florida adults suffer from chronic lung disease (including bronchitis and emphysema).

- No statistically significant difference by county.
- In comparing to 2004 data, the prevalence has not changed.

Prevalence of Chronic Lung Disease

### Survey respondents were next asked to indicate whether they suffer from or have been diagnosed with various respiratory conditions, including asthma and chronic lung disease.

### Asthma

#### Ever Diagnosed

A total of 15.5% of East Central Florida adults have ever been diagnosed with asthma.

- Similar to the statewide prevalence.
- Similar to the national prevalence.
- Unfavorably high in Osceola County.
- The prevalence of adults who have ever been diagnosed with asthma has increased significantly since 2004.
Have Ever Had Asthma


Notes: Asked of all respondents. *Brevard County was not surveyed in 1999.

Current Asthma

A total of 10.4% of East Central Florida adults currently suffer from asthma.

- Less favorable than the statewide prevalence.
- Similar to the national prevalence.
- Unfavorably high in Osceola County.

Currently Have Asthma

The following East Central Florida adults are more likely to suffer from asthma:

- Women.
- Low-income residents.
- Hispanics.
- Residents with healthcare insurance coverage.
Currently Have Asthma
(East Central Florida, 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Item 153)

Notes:
- 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Item 153)
- Asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level; “Low Income” includes households with incomes between 100% and 199% of the federal poverty level; “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
- “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
Diabetes

Diabetes mellitus occurs when the body cannot produce or respond appropriately to insulin. Insulin is a hormone that the body needs to absorb and use glucose (sugar) as fuel for the body’s cells. Without a properly functioning insulin signaling system, blood glucose levels become elevated and other metabolic abnormalities occur, leading to the development of serious, disabling complications. Many forms of diabetes exist; the three common types are Type 1, Type 2, and gestational diabetes.

Effective therapy can prevent or delay diabetic complications. However, almost 25% of Americans with diabetes mellitus are undiagnosed, and another 57 million Americans have blood glucose levels that greatly increase their risk of developing diabetes mellitus in the next several years. Few people receive effective preventative care, which makes diabetes mellitus an immense and complex public health challenge.

Diabetes mellitus affects an estimated 23.6 million people in the United States and is the 7th leading cause of death. Diabetes mellitus:

- Lowers life expectancy by up to 15 years.
- Increases the risk of heart disease by 2 to 4 times.
- Is the leading cause of kidney failure, lower limb amputations, and adult-onset blindness.

In addition to these human costs, the estimated total financial cost of diabetes mellitus in the US in 2007 was $174 billion, which includes the costs of medical care, disability, and premature death.

The rate of diabetes mellitus continues to increase both in the United States and throughout the world. Due to the steady rise in the number of persons with diabetes mellitus, and possibly earlier onset of type 2 diabetes mellitus, there is growing concern about the possibility that the increase in the number of persons with diabetes mellitus and the complexity of their care might overwhelm existing healthcare systems.

People from minority populations are more frequently affected by type 2 diabetes. Minority groups constitute 25% of all adult patients with diabetes in the US and represent the majority of children and adolescents with type 2 diabetes.

Lifestyle change has been proven effective in preventing or delaying the onset of type 2 diabetes in high-risk individuals.

- Healthy People 2020 (www.healthypeople.gov)

A total of 13.5% of East Central Florida adults report having been diagnosed with diabetes.

- Worse than the statewide proportion.
- Similar to the national proportion.
- Highest in Osceola County; lowest in Seminole County.
- The prevalence marks a statistically significant increase over time.

In addition to the prevalence of diagnosed diabetes referenced above, another 9.6% of East Central Florida adults (excluding Brevard County) report that they have “pre-diabetes” or “borderline diabetes,” higher than the US prevalence.
A higher prevalence of diagnosed diabetes (excluding pre-diabetes or borderline diabetes) is reported among:

- Adults aged 40 and older (note the strong positive correlation between diabetes and age, with 23.8% of seniors with diabetes).
- Residents in households with lower incomes (negative correlation with income).
- The insured population.

**Prevalence of Diabetes (Excluding Brevard County and Portions of Orange County; 2014)**

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Item 208)

Notes:
- Asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
- Excludes gestation diabetes (occurring only during pregnancy).
- *This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Although 24.5% of diabetic respondents in East Central Florida (excluding those in portions of western Orange County) could not name the type of help they need most in controlling their diabetes, 35.6% mentioned medication, 27.9% need help with diet/nutrition, and 3.8% would like help with exercise.

**Type of Help Needed With Controlling Diabetes**  
(Among ECF Diabetics, Excluding Portions of Orange County; 2014)

- **Nothing/Uncertain** 24.5%
- **Diet/Nutrition** 27.9%
- **Medicine** 35.6%
- **Exercise** 3.8%
- **Other** 8.2%

**Diabetes Testing**

Of East Central Florida adults who have not been diagnosed with diabetes, 58.4% report having had their blood sugar level tested within the past three years. This item was not asked in Brevard County or in portions of Orange County.

- Higher than the national proportion.
- Statistically similar by county.

**Have Had Blood Sugar Tested in the Past Three Years**  
(ECF Non-Diabetics, Excluding Brevard County and Portions of Orange County; 2014)

<table>
<thead>
<tr>
<th>Region</th>
<th>% Tested</th>
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<tbody>
<tr>
<td>Brevard County</td>
<td>59.9%</td>
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<tr>
<td>Orange County</td>
<td>54.2%</td>
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<tr>
<td>Osceola County</td>
<td>57.3%</td>
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<tr>
<td>Seminole County</td>
<td>58.4%</td>
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<td>East Central Florida</td>
<td>49.2%</td>
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<td>United States</td>
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</table>

Sources:  
- 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 42]
- 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes:  
- Asked of all self-reported diabetics.
- This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Arthritis & Osteoporosis

There are more than 100 types of arthritis. Arthritis commonly occurs with other chronic conditions, such as diabetes, heart disease, and obesity. Interventions to treat the pain and reduce the functional limitations from arthritis are important, and may also enable people with these other chronic conditions to be more physically active. Arthritis affects 1 in 5 adults and continues to be the most common cause of disability. It costs more than $128 billion per year. All of the human and economic costs are projected to increase over time as the population ages. There are interventions that can reduce arthritis pain and functional limitations, but they remain underused. These include: increased physical activity; self-management education; and weight loss among overweight/obese adults.

Osteoporosis is a disease marked by reduced bone strength leading to an increased risk of fractures (broken bones). In the United States, an estimated 5.3 million people age 50 years and older have osteoporosis. Most of these people are women, but about 0.8 million are men. Just over 34 million more people, including 12 million men, have low bone mass, which puts them at increased risk for developing osteoporosis. Half of all women and as many as 1 in 4 men age 50 years and older will have an osteoporosis-related fracture in their lifetime.

– Healthy People 2020 (www.healthypeople.gov)

Prevalence of Arthritis/Rheumatism

More than one-third of East Central Florida adults age 50 and older (36.6%) reports suffering from arthritis or rheumatism.

- Comparable to that found nationwide.
- Highest in Orange County; lowest in Seminole County.
- The decrease since 2004 is not statistically significant.
Prevalence of Osteoporosis

A total of 11.3% of survey respondents age 50 and older have osteoporosis.

- Similar to that found nationwide.
- Fails to satisfy the Healthy People 2020 target of 5.3% or lower.
- Favorably low in Seminole County.
- Statistically unchanged over time.

Prevalence of Osteoporosis
(Among Adults 50+)

Healthy People 2020 Target = 5.3% or lower

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 160]
PRC National Health Surveys, Professional Research Consultants, Inc.

Notes: Reflects respondents age 50 and older.
Injury

Texting & Driving

In the past month, one in five East Central Florida respondents (20.4%) texted or emailed while operating a moving vehicle. This inquiry was not addressed in Brevard County or portions of Orange County.

- This prevalence includes 12.2% of respondents who read or sent texts or emails at least four times in the past month.

Frequency of Reading or Sending Texts or Emails While Driving in the Past Month
(East Central Florida, Excluding Brevard County and Portions of Orange County; 2014)

- The prevalence of respondents who texted or emailed while driving at least once in the past month does not vary by county.

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 53]
Notes: Asked of all respondents.
- In this case, “driving” refers to the vehicle being in motion.
- This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Texting while driving is more prevalent among men, adults under 65 (note the negative correlation with age), and upper-income residents (positive correlation with income).
Falls Among Older Adults

While the majority of seniors did not fall in the past 3 months (87.0%), 13.0% reported falling at least once during this time (including 5.2% who fell more than once in the past 3 months). This inquiry was not addressed in Brevard County or in portions of Orange County.

- Of those seniors who fell at least once in the past 3 months, 51.5% indicate that the fall resulted in an injury (causing the person to limit regular activities for at least one day or prompting a doctor visit).

Seniors in Orange County exhibit the lowest prevalence of falling in the past 3 months.

The difference by gender among seniors is not statistically significant.

Have Fallen in the Past 3 Months
(ECF Adults 65+, Excluding Brevard County and Portions of Orange County; 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 125-126]
Notes: Asked of all respondents age 65+.
- This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Among East Central Florida seniors, 32.9% have taken steps to reduce their changes of falling. This inquiry was not addressed in Brevard County or in portions of Orange County.

- The proportion is highest among seniors in Osceola County.
- Higher among women than among men (aged 65 and older).

**Have Taken Steps to Reduce the Chance of Falling**
(ECF Adults 65+, Excluding Brevard County and Portions of Orange County; 2014)

![Graph showing steps taken by seniors to reduce the chance of falling.]

Specific steps taken by these seniors include being more careful, using equipment such as a walker, exercise, taking a class, physical therapy, and wearing special shoes.

**Steps Taken in the Past Year to Reduce Chances of Falling**
(ECF Adults 65+ Who Took Steps to Reduce Their Chances of Falling, Excluding Brevard County and Portions of Orange County; 2014)

![Pie chart showing the distribution of steps taken in the past year to reduce the chance of falling.]

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 127]
Notes: Asked of all seniors (age 65+).
- This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 128]
Notes: Asked of all respondents age 65+ who took steps in the past year to reduce their chances of falling.
- This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Influenza & Pneumonia Vaccination

Acute respiratory infections, including pneumonia and influenza, are the 8th leading cause of death in the nation, accounting for 56,000 deaths annually. Pneumonia mortality in children fell by 97% in the last century, but respiratory infectious diseases continue to be leading causes of pediatric hospitalization and outpatient visits in the US. On average, influenza leads to more than 200,000 hospitalizations and 36,000 deaths each year. The 2009 H1N1 influenza pandemic caused an estimated 270,000 hospitalizations and 12,270 deaths (1,270 of which were of people younger than age 18) between April 2009 and March 2010.

– Healthy People 2020 (www.healthypeople.gov)

Flu Vaccinations

Among East Central Florida seniors, 73.8% received a flu shot (or FluMist®) within the past year.

- Higher than the Florida finding.
- Higher than the national finding.
- Fails to satisfy the Healthy People 2020 target (90% or higher).
- Lowest in Osceola County.

Statistically unchanged since 2004.

Older Adults: Have Had a Flu Vaccination in the Past Year
(Among Adults Age 65+)

Healthy People 2020 Target = 90.0% or higher

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 161]
Behavioral Risk Factor Surveillance System Survey Data, Atlanta, Georgia. United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC) Florida data.
PRC National Health Surveys, Professional Research Consultants, Inc.
Notes: Asked of respondents age 65 and older; includes FluMist as a form of vaccination.
* Brevard County was not surveyed in 1999.
** In 2014, this question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34740, 34761, 34763, and 34787.
High-Risk Adults

A total of 41.6% of high-risk adults age 18 to 64 received a flu vaccination (flu shot or FluMist®) within the past year.

- Similar to national findings.
- Fails to satisfy the Healthy People 2020 target (90% or higher).
- Statistically comparable by county.

Marks a statistically significant increase since 2004.

High-Risk Adults: Have Had a Flu Vaccination in the Past Year
(Among High-Risk Adults Age 18-64)

Healthy People 2020 Target = 90.0% or higher

<table>
<thead>
<tr>
<th></th>
<th>2004</th>
<th>2009</th>
<th>2014*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>49.2%</td>
<td>49.4%</td>
<td>49.2%</td>
</tr>
<tr>
<td>Orange County</td>
<td>28.6%</td>
<td>28.4%</td>
<td>28.6%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>38.9%</td>
<td>38.1%</td>
<td>38.9%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>23.8%</td>
<td>23.8%</td>
<td>23.8%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>29.4%</td>
<td>29.4%</td>
<td>29.4%</td>
</tr>
<tr>
<td>United States</td>
<td>36.0%</td>
<td>36.0%</td>
<td>36.0%</td>
</tr>
</tbody>
</table>

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 162]
PRC National Health Surveys, Professional Research Consultants, Inc.

Notes: Asked of high-risk respondents age 18 to 64; includes FluMist as a form of vaccination.
“High-Risk” includes adults age 18 to 64 who have been diagnosed with heart disease, diabetes or respiratory disease.
“In 2014, this question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

Pneumonia Vaccination

Among adults age 65 and older, 75.3% have received a pneumonia vaccination at some point in their lives.

- Higher than the Florida finding.
- Comparable to the national finding.
- Fails to satisfy the Healthy People 2020 target of 90% or higher.
- Statistically comparable by county.

Denotes a statistically significant increase over time.

"High-risk" includes adults who report having been diagnosed with heart disease, diabetes or respiratory disease.
Older Adults: Have Ever Had a Pneumonia Vaccination
(Among Adults Age 65+)

Healthy People 2020 Target = 90.0% or higher

<table>
<thead>
<tr>
<th>Source Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 163]</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) Florida data.</td>
</tr>
<tr>
<td>PRC National Health Surveys, Professional Research Consultants, Inc.</td>
</tr>
</tbody>
</table>

Notes:
- Asked of respondents age 65 and older.
- *In 2014, this question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

High-Risk Adults: Have Ever Had a Pneumonia Vaccination
(Among High-Risk Adults Age 18-64)

Healthy People 2020 Target = 60.0% or higher

<table>
<thead>
<tr>
<th>Source Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 164]</td>
</tr>
<tr>
<td>PRC National Health Surveys, Professional Research Consultants, Inc.</td>
</tr>
</tbody>
</table>

Notes:
- Asked of high-risk respondents age 18 to 64.
- “High-risk” includes adults age 18 to 64 who have been diagnosed with heart disease, diabetes or respiratory disease.
- *In 2014, this question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

High-Risk Adults

A total of 37.7% of high-risk adults age 18 to 64 have ever received a pneumonia vaccination.

- Similar to national findings.
- Fails to satisfy the Healthy People 2020 target (60% or higher).
- Statistically comparable by county.
- Denotes a statistically significant increase over time.
MODIFIABLE HEALTH RISKS
A 1999 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 US healthcare and public health systems has become more urgent.


**Leading Causes of Death**

<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 Obesity</td>
</tr>
<tr>
<td></td>
<td>Elevated serum cholesterol High blood pressure</td>
</tr>
<tr>
<td></td>
<td>Diabetes Sedentary lifestyle</td>
</tr>
<tr>
<td>Cancer</td>
<td>Tobacco use Alcohol</td>
</tr>
<tr>
<td></td>
<td>Improper diet Occupational/environmental exposures</td>
</tr>
<tr>
<td>Cerebrovascular disease</td>
<td>High blood pressure Elevated serum cholesterol</td>
</tr>
<tr>
<td></td>
<td>Tobacco use</td>
</tr>
<tr>
<td>Accidental injuries</td>
<td>Safety belt noncompliance Alcohol/substance abuse</td>
</tr>
<tr>
<td></td>
<td>Occupational hazards Stress/fatigue</td>
</tr>
<tr>
<td>Chronic lung disease</td>
<td>Tobacco use Occupational/environmental exposures</td>
</tr>
</tbody>
</table>


**Factors Contributing to Premature Deaths in the United States**

![Factors Contributing to Premature Deaths in the United States](chart.png)

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

Strong science exists supporting the health benefits of eating a healthful diet and maintaining a healthy body weight. Efforts to change diet and weight should address individual behaviors, as well as the policies and environments that support these behaviors in settings such as schools, worksites, healthcare organizations, and communities.

The goal of promoting healthful diets and healthy weight encompasses increasing household food security and eliminating hunger.

Americans with a healthful diet:
- Consume a variety of nutrient-dense foods within and across the food groups, especially whole grains, fruits, vegetables, low-fat or fat-free milk or milk products, and lean meats and other protein sources.
- Limit the intake of saturated and trans fats, cholesterol, added sugars, sodium (salt), and alcohol.
- Limit caloric intake to meet caloric needs.

Diet and body weight are related to health status. Good nutrition is important to the growth and development of children. A healthful diet also helps Americans reduce their risks for many health conditions, including: overweight and obesity; malnutrition; iron-deficiency anemia; heart disease; high blood pressure; dyslipidemia (poor lipid profiles); type 2 diabetes; osteoporosis; oral disease; constipation; diverticular disease; and some cancers.

Diet reflects the variety of foods and beverages consumed over time and in settings such as worksites, schools, restaurants, and the home. Interventions to support a healthier diet can help ensure that:
- Individuals have the knowledge and skills to make healthier choices.
- Healthier options are available and affordable.

Social Determinants of Diet. Demographic characteristics of those with a more healthful diet vary with the nutrient or food studied. However, most Americans need to improve some aspect of their diet.

Social factors thought to influence diet include:
- Knowledge and attitudes
- Skills
- Social support
- Societal and cultural norms
- Food and agricultural policies
- Food assistance programs
- Economic price systems

Physical Determinants of Diet. Access to and availability of healthier foods can help people follow healthful diets. For example, better access to retail venues that sell healthier options may have a positive impact on a person’s diet; these venues may be less available in low-income or rural neighborhoods.

The places where people eat appear to influence their diet. For example, foods eaten away from home often have more calories and are of lower nutritional quality than foods prepared at home.

Marketing also influences people’s—particularly children’s—food choices.

– Healthy People 2020 (www.healthypeople.gov)
Daily Recommendation of Fruits/Vegetables

A total of 43.8% of East Central Florida adults report eating five or more servings of fruits and/or vegetables per day.

- More favorable than national findings.
- Highest in Brevard County; lowest in Osceola County.
- Fruit/vegetable consumption has increased significantly since 2004.

**Consume 5+ Servings of Fruits/Vegetables Per Day**

<table>
<thead>
<tr>
<th></th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County*</td>
<td>39.3%</td>
<td>43.5%</td>
<td>48.1%</td>
<td>48.5%</td>
</tr>
<tr>
<td>Orange County</td>
<td>30.1%</td>
<td>44.5%</td>
<td>42.2%</td>
<td>48.5%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>35.6%</td>
<td>42.6%</td>
<td>38.5%</td>
<td>46.2%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>40.5%</td>
<td>40.5%</td>
<td>43.8%</td>
<td>48.5%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>39.9%</td>
<td>47.6%</td>
<td>43.5%</td>
<td>48.8%</td>
</tr>
<tr>
<td>United States</td>
<td>40.1%</td>
<td>46.8%</td>
<td>46.8%</td>
<td>48.8%</td>
</tr>
</tbody>
</table>

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. (Item 169)

Notes:
- Asked of all respondents.
- For this issue, respondents were asked to recall their food intake on the previous day.
- *Brevard County was not surveyed in 1999.

Area men are less likely to get the recommended servings of daily fruits/vegetables, as are adults living just above poverty, Black residents, and Hispanic residents.

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

(East Central Florida, 2014)

<table>
<thead>
<tr>
<th></th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>Very Low Income</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>ECF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>39.9%</td>
<td>42.4%</td>
<td>34.5%</td>
<td>48.5%</td>
<td>37.1%</td>
<td>46.8%</td>
<td>40.1%</td>
<td>37.3%</td>
<td>43.8%</td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td>34.5%</td>
<td>43.5%</td>
<td>47.7%</td>
<td>46.8%</td>
<td>46.8%</td>
<td>40.1%</td>
<td>37.3%</td>
<td>43.8%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Item 169)

Notes:
- Asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households with incomes below 100% of the federal poverty level. "Low Income" includes households with incomes between 100% and 199% of the federal poverty level. "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.
- For this issue, respondents were asked to recall their food intake on the previous day.
Perceived Daily Recommendation for Produce

While over 4 in 10 East Central Florida survey respondents (44.1%) believe that 5+ servings of fruits and/or vegetables should be eaten daily, over one-half of respondents (55.9%) believe the recommendation to be lower. This inquiry was not addressed in Brevard County or portions of Orange County.

Perceived Daily Recommendation of Fruits and Vegetables (East Central Florida, Excluding Portions of Orange County; 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 92]
Notes: Asked of all respondents.
* This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

Adults more likely to believe that the recommendation for daily fruits and vegetables is less than 5 servings include:

- Men.
- Seniors.
- Lower-income residents (negative correlation with income).
- Black or Hispanic respondents.

Believe Daily Recommendation of Fruits and Vegetables to be Less Than 5 Servings (East Central Florida, Excluding Portions of Orange County; 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 92]
Notes: Asked of all respondents.
* Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
* Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
* This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Access to Fresh Produce

While most report little or no difficulty, 27.2% of East Central Florida adults report that it is "very" or "somewhat" difficult for them to access affordable, fresh fruits and vegetables. This inquiry was not addressed in Brevard County or portions of Orange County.

Level of Difficulty Finding Fresh Produce at an Affordable Price
(East Central Florida, Excluding Portions of Orange County; 2014)

Not At All Difficult 43.9%
Somewhat Difficult 20.2%
Not Too Difficult 28.9%
Very Difficult 7.0%

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 93]
Notes: Asked of all respondents.
This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

- Similar to national findings.
- Similar findings by county.

Find It “Very” or “Somewhat” Difficult to Buy Affordable Fresh Produce
(East Central Florida, Excluding Portions of Orange County; 2014)

Brevard County: 28.1%
Orange County: 26.4%
Osceola County: 31.4%
Seminole County: 25.1%
East Central Florida: 27.2%
United States: 24.4%

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 93]
2013 PRC National Health Survey, Professional Research Consultants, Inc.
Notes: Reflects respondents age 50 and older.
This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Those population segments more likely to report difficulty getting fresh fruits and vegetables include:

- Lower-income residents.
- Women.
- Adults under 65.

**Find It “Very” or “Somewhat” Difficult to Buy Affordable Fresh Produce**  
(East Central Florida, Excluding Portions of Orange County; 2014)

Find It “Very” or “Somewhat” Difficult to Buy Affordable Fresh Produce

Food Insecurity

While most East Central Florida survey respondents were not concerned over the past year about their food running out before there were funds for more, more than one in four were “often” (8.5%) or “sometimes” (18.1%) concerned about this.

**Frequency of Concern in the Past Year About Food Running Out Before Funds Were Available for More**  
(East Central Florida, Excluding Portions of Orange County; 2014)
Unfavorably high in Orange and Osceola counties; lowest in Brevard and Seminole counties.

“Often/Sometimes” Worry About Food Running Out
(East Central Florida, Excluding Portions of Orange County; 2014)

Population segments more likely to have been concerned about food running out in the past year include:

- Lower-income residents.
- Non-Whites.
- Young adults (negative correlation with age)
- Women.

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 94]
Notes: Reflects the total sample of respondents.
This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
In a related inquiry, respondents were asked about their experience with food running out during the past year.

Nearly 8 in 10 East Central Florida residents “never” experienced this issue, while 20.3% report that in the past year, they “often” or “sometimes” ran out of food with no money to buy more.

*Highest in Orange and Osceola counties; lowest in Brevard and Seminole counties.*

**“Often/Sometimes” Ran Out of Food Last Month**

(East Central Florida, Excluding Portions of Orange County; 2014)

<table>
<thead>
<tr>
<th>County</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>13.7%</td>
</tr>
<tr>
<td>Orange County</td>
<td>24.2%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>29.4%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>14.2%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>20.3%</td>
</tr>
</tbody>
</table>

**Sources:** 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 95]

**Notes:**
- Asked of all respondents.
- This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

Respondents were asked how often they agree with this statement:

“The food that we bought just did not last, and we did not have money to get more.”
East Central Florida residents more likely to have run out of food in the past year without money for more include:

- Lower-income residents (negative correlation with income).
- Non-Whites.
- Young adults (negative correlation with age).
- Women.

“Often/Sometimes” Ran Out of Food Last Month
(East Central Florida, Excluding Portions of Orange County; 2014)

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>17.7%</td>
</tr>
<tr>
<td>Women</td>
<td>22.7%</td>
</tr>
<tr>
<td>18 to 39</td>
<td>26.7%</td>
</tr>
<tr>
<td>40 to 64</td>
<td>19.7%</td>
</tr>
<tr>
<td>65+</td>
<td>9.0%</td>
</tr>
<tr>
<td>Very Low Income</td>
<td>49.7%</td>
</tr>
<tr>
<td>Low Income</td>
<td>37.6%</td>
</tr>
<tr>
<td>Mid/High Income</td>
<td>9.2%</td>
</tr>
<tr>
<td>White</td>
<td>13.5%</td>
</tr>
<tr>
<td>Black</td>
<td>35.7%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>31.1%</td>
</tr>
<tr>
<td>ECF</td>
<td>20.3%</td>
</tr>
</tbody>
</table>

Respondents were asked:

“Would you say your household has to decide between buying food and paying other bills such as rent, mortgage, utilities, or medications?”

Although most East Central Florida survey respondents “never” have to choose between buying food and paying for household bills, 26.8% do have to make this choice (including 4.1% who “always” have to make this choice and 3.9% who said “frequently”).

Frequency of Having to Choose Between Buying Food and Paying Household Bills
(East Central Florida, Excluding Portions of Orange County; 2014)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>73.2%</td>
</tr>
<tr>
<td>Frequently</td>
<td>3.9%</td>
</tr>
<tr>
<td>Sometimes</td>
<td>18.8%</td>
</tr>
</tbody>
</table>
Highest in Orange County; lowest in Seminole County.

“Always/Frequently” Have to Choose Between Buying Food and Paying Household Bills
(East Central Florida, Excluding Portions of Orange County; 2014)

6.3% 10.9% 8.1% 3.2% 8.0%

Brevard County Orange County Osceola County Seminole County East Central Florida

Those more likely to have to choose between paying for food and paying household bills include:

- Lower-income residents (negative correlation with income).
- Non-Whites.
- Adults under 65.

“Always/Frequently” Have to Choose Between Buying Food and Paying Household Bills
(East Central Florida, Excluding Portions of Orange County; 2014)

7.1% 8.8% 9.5% 21.0% 16.2% 16.0% 14.0% 8.0%

Men Women 18 to 39 40 to 64 65+ Very Low Income Low Income Mid/High Income White Black Hispanic ECF

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 96]
Notes: Reflects the total sample of respondents.
This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 96]
Notes: Asked of all respondents.
Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Health Advice About Diet & Nutrition

A total of 42.3% of survey respondents acknowledge that a physician counseled them about diet and nutrition in the past year.

- Comparable to national findings.
- Highest in Orange County (not shown).
- Unchanged over time.

Note: Among overweight/obese respondents, 50.5% report receiving diet/nutrition advice (meaning that nearly one-half did not).

Have Received Advice About Diet and Nutrition in the Past Year From a Physician, Nurse, or Other Health Professional
(By Weight Classification)

<table>
<thead>
<tr>
<th>Weight Classification</th>
<th>2009</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>East Central Florida Healthy Weight</td>
<td>33.7%</td>
<td>26.2%</td>
</tr>
<tr>
<td>East Central Florida Overweight/Obese</td>
<td>46.6%</td>
<td>50.5%</td>
</tr>
<tr>
<td>East Central Florida All Adults</td>
<td>42.1%</td>
<td>42.3%</td>
</tr>
<tr>
<td>United States All Adults</td>
<td>38.2%</td>
<td>39.2%</td>
</tr>
</tbody>
</table>

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 19]
PRC National Health Surveys, Professional Research Consultants, Inc.

Notes: Asked of all respondents.
Physical Activity

Regular physical activity can improve the health and quality of life of Americans of all ages, regardless of the presence of a chronic disease or disability. Among adults and older adults, physical activity can lower the risk of: early death; coronary heart disease; stroke; high blood pressure; type 2 diabetes; breast and colon cancer; falls; and depression. Among children and adolescents, physical activity can: improve bone health; improve cardiorespiratory and muscular fitness; decrease levels of body fat; and reduce symptoms of depression. For people who are inactive, even small increases in physical activity are associated with health benefits.

Personal, social, economic, and environmental factors all play a role in physical activity levels among youth, adults, and older adults. Understanding the barriers to and facilitators of physical activity is important to ensure the effectiveness of interventions and other actions to improve levels of physical activity.

Factors positively associated with adult physical activity include: postsecondary education; higher income; enjoyment of exercise; expectation of benefits; belief in ability to exercise (self-efficacy); history of activity in adulthood; social support from peers, family, or spouse; access to and satisfaction with facilities; enjoyable scenery; and safe neighborhoods.

Factors negatively associated with adult physical activity include: advancing age; low income; lack of time; low motivation; rural residency; perception of great effort needed for exercise; overweight or obesity; perception of poor health; and being disabled. Older adults may have additional factors that keep them from being physically active, including lack of social support, lack of transportation to facilities, fear of injury, and cost of programs.

Among children ages 4 to 12, the following factors have a positive association with physical activity:
- Gender (boys)
- Belief in ability to be active (self-efficacy)
- Parental support

Among adolescents ages 13 to 18, the following factors have a positive association with physical activity:
- Parental education
- Gender (boys)
- Personal goals
- Physical education/school sports
- Belief in ability to be active (self-efficacy)
- Support of friends and family

Environmental influences positively associated with physical activity among children and adolescents include:
- Presence of sidewalks
- Having a destination/walking to a particular place
- Access to public transportation
- Low traffic density
- Access to neighborhood or school play area and/or recreational equipment

People with disabilities may be less likely to participate in physical activity due to physical, emotional, and psychological barriers. Barriers may include the inaccessibility of facilities and the lack of staff trained in working with people with disabilities.

– Healthy People 2020 (www.healthypeople.gov)
Level of Activity at Work

A majority of employed respondents reports low levels of physical activity at work.

- Nearly 2 in 3 employed respondents (65.3%) report that their job entails mostly sitting or standing, similar to the US figure.
- Lowest in Osceola County (not shown).
- No statistically significant change from 2009 survey results among employed respondents.

Sedentary Employment
(Among Employed Respondents; Those Who Sit or Stand at Work)

![Graph showing sedentary employment rates for East Central Florida and United States for 2009 and 2014.]

Leisure-Time Physical Activity

A total of 23.0% of East Central Florida adults report no leisure-time physical activity in the past month.

- Similar to statewide findings.
- Similar to national findings.
- Satisfies the Healthy People 2020 target (32.6% or lower).
- Less favorable in Orange County; more favorable in Brevard and Seminole counties.
- Denotes a significant decrease over time.
No Leisure-Time Physical Activity in the Past Month
(East Central Florida, 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 98]
Notes: *Asked of all respondents.
*ECF: East Central Florida

Lack of leisure-time physical activity in the area is higher among:

- Lower-income residents.
- Hispanics.
Among respondents who did not participate in any leisure-time physical activity last month, 38.6% cited lack of time as their reasoning, while another 30.8% mentioned health reasons which restrict their activity.

Another one in five of these adults is not interested in pursuing leisure-time physical activity.

**Main Reason for Lack of Leisure-Time Physical Activity**
(ECF Adults Who Did Not Exercise Last Month, Excluding Portions of Orange County; 2014)

- No Time: 38.6%
- Health Reasons: 30.8%
- Not Interested: 20.3%
- Other: 10.4%

### Activity Levels

Adults (age 18–64) should do 2 hours and 30 minutes a week of moderate-intensity, or 1 hour and 15 minutes (75 minutes) a week of vigorous-intensity aerobic physical activity, or an equivalent combination of moderate- and vigorous-intensity aerobic physical activity. Aerobic activity should be performed in episodes of at least 10 minutes, preferably spread throughout the week.

Additional health benefits are provided by increasing to 5 hours (300 minutes) a week of moderate-intensity aerobic physical activity, or 2 hours and 30 minutes a week of vigorous-intensity physical activity, or an equivalent combination of both.

Older adults (age 65 and older) should follow the adult guidelines. If this is not possible due to limiting chronic conditions, older adults should be as physically active as their abilities allow. They should avoid inactivity. Older adults should do exercises that maintain or improve balance if they are at risk of falling.

For all individuals, some activity is better than none. Physical activity is safe for almost everyone, and the health benefits of physical activity far outweigh the risks.


### Recommended Levels of Physical Activity

A total of 43.8% of East Central Florida adults participate in regular, sustained moderate or vigorous physical activity (meeting physical activity recommendations).

- Less favorable than national findings.
- Lower in Osceola County.
- Statistically unchanged since 2009.
### Meets Physical Activity Recommendations

#### (East Central Florida, 2014)

<table>
<thead>
<tr>
<th>Category</th>
<th>2009</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>44.9%</td>
<td>47.8%</td>
</tr>
<tr>
<td>Orange County</td>
<td>42.3%</td>
<td>42.3%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>44.4%</td>
<td>37.9%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>45.3%</td>
<td>47.8%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>43.9%</td>
<td>43.8%</td>
</tr>
<tr>
<td>United States</td>
<td>43.9%</td>
<td>50.3%</td>
</tr>
</tbody>
</table>

**Sources:**
- 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Item 172)
- Asked of all respondents.

**Notes:**
- In 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.

---

### Those less likely to meet physical activity requirements include:

- **Hispanics.**
- **Residents living in households with low incomes.**
- **Residents aged 40 and older.**
- **Women.**
Moderate & Vigorous Physical Activity

In the past month:

A total of 26.8% of adults participated in moderate physical activity (5 times a week, 30 minutes at a time).
- Less favorable than the national level.
- No difference by county (not shown).
- Statistically unchanged over time (not shown).

A total of 33.6% participated in vigorous physical activity (3 times a week, 20 minutes at a time).
- Less favorable than the nationwide figure.
- Statistically similar by county (not shown).
- Statistically unchanged over time (not shown).

Moderate & Vigorous Physical Activity
(East Central Florida, 2014)

Moderate Physical Activity

Yes 26.8%

No 73.2%

US=30.6%

Vigorous Physical Activity

Yes 33.6%

No 66.4%

US=38.0%

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Items 174-175)
2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes:
- Asked of all respondents.
- Moderate Physical Activity: Takes part in exercise that produces only light sweating or a slight to moderate increase in breathing or heart rate at least 5 times per week for at least 30 minutes per time.
- Vigorous Physical Activity: Takes part in activities that cause heavy sweating or large increases in breathing or heart rate at least 3 times per week for at least 20 minutes per time.
Among East Central Florida adults, approximately 7 in 10 do not use a local gym or recreational center for exercise. This inquiry was not addressed in Brevard County or portions of Orange County.

- On the other hand, 30.2% of respondents do use a local gym or recreational center, including 26.1% who do so at least weekly.

Use of a local gym or recreational center at least weekly is lower in Osceola County.

Use a Local Gym or Recreational Center for Exercise at Least Weekly
(Excluding Brevard County and Portions of Orange County; 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 102]
Notes: Asked of all respondents.
This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Survey respondents more likely to use a local gym or recreational center for exercise at least weekly include:

- Young adults.
- Men.
- Residents living in households with higher incomes.
- Blacks and Hispanics.

**Use a Local Gym or Recreational Center for Exercise at Least Weekly**
(Excluding Brevard County and Portions of Orange County; 2014)

Adults who do not use a local gym or recreational center for exercise primarily mentioned **cost** (mentioned by 23.5%), **lack of time** (17.0%), and **lack of interest** (16.4%) as their reasoning. Other comments included references to **working out at home** (11.9%), **health reasons** (11.4%), **no need** (6.2%), **inconvenient location** (3.8%), and a **preference for being outdoors** (2.7%).

Use of Local Parks and Trails

Among East Central Florida adults, just less than one-half (46.9%) do not use local parks or trails for walking, running, or biking. **This inquiry was not addressed in Brevard County or portions of Orange County.**

- On the other hand, 53.1% of respondents do use local parks or trails, including 31.5% who do so **at least weekly.**
Frequency of Using a Local Park or Trail for Walking, Running, or Biking
(ECF, Excluding Brevard County and Portions of Orange County; 2014)

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>46.9%</td>
</tr>
<tr>
<td>Less Than Weekly</td>
<td>21.5%</td>
</tr>
<tr>
<td>Weekly</td>
<td>13.2%</td>
</tr>
<tr>
<td>Few Times/Week</td>
<td>15.2%</td>
</tr>
<tr>
<td>Daily</td>
<td>3.1%</td>
</tr>
</tbody>
</table>

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 104]
Notes: Asked of all respondents.
This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

Use of local parks or trails is much lower in Orange County.

Use a Local Park or Trail for Walking, Running, or Biking at Least Weekly
(Excluding Brevard County and Portions of Orange County, 2014)

<table>
<thead>
<tr>
<th>County</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard</td>
<td>N/A</td>
</tr>
<tr>
<td>Orange</td>
<td>26.7%</td>
</tr>
<tr>
<td>Osceola</td>
<td>41.2%</td>
</tr>
<tr>
<td>Seminole</td>
<td>36.7%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>31.5%</td>
</tr>
</tbody>
</table>

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 104]
Notes: Reflects the total sample of respondents.
This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

Survey respondents more likely to use local parks or trails at least weekly include:

- Young adults.
- Residents living in households with higher incomes.
Use a Local Park or Trail for Walking, Running, or Biking at Least Weekly (Excluding Brevard County and Portions of Orange County; 2014)

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>Very Low Income</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>ECF</th>
</tr>
</thead>
<tbody>
<tr>
<td>32.9%</td>
<td>30.3%</td>
<td>38.9%</td>
<td>28.6%</td>
<td>22.2%</td>
<td>28.2%</td>
<td>36.8%</td>
<td>33.7%</td>
<td>31.1%</td>
<td>35.7%</td>
<td>28.7%</td>
<td>31.5%</td>
<td></td>
</tr>
</tbody>
</table>

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Item 104)

Notes: Asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
- This question was not asked in Brevard County or Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

Self-Perception of Activity Level

A total of 71.1% of East Central Florida adults are less active than they would like to be. This indicator was not addressed in Brevard County or portions of Orange County.

- On the other hand, 5.5% of respondents are more active than they would like to be, and 23.4% are as active as they would like to be.

Self-Perception of Physical Activity Level (East Central Florida, Excluding Brevard County and Portions of Orange County; 2014)

Less Active Than I Want 71.1%

More Active Than I Want 5.5%

As Active As I Want 23.4%

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Item 105)
Notes: Asked of all respondents.
- This question was not asked in Brevard County or Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
The prevalence of respondents who are less active than they would like to be does not vary by county of residence.

**I Am Less Physically Active Than I Would Like To Be**  
(Excluding Brevard County and Portions of Orange County; 2014)

Survey respondents more likely to report being less active than they would like include:

- **Women.**
- **Adults under 65.**

**I Am Less Physically Active Than I Would Like To Be**  
(Excluding Brevard County and Portions of Orange County; 2014)
Among adults who exercise less than they would like, 28.9% cited a lack of time as their reasoning, and 24.0% are not interested or are unmotivated to exercise more. This indicator was not addressed in Brevard County or portions of Orange County.

- Other factors preventing respondents from being more active include crime, lack of sidewalks, lack of parks/trails, dogs/wild animals, and location.

Factors Preventing Respondent From Being More Active

(East Central Florida, Excluding Portions of Orange County; Among Respondents Who Exercise Less Than They Would Like; 2014)

Perceptions of Neighborhood Safety

Most East Central Florida adults (78.8%) report that their neighborhood is “extremely safe” or “quite safe” from crime. This indicator was not addressed in Brevard County or portions of Orange County.

- On the other hand, 18.3% of respondents gave “slightly safe” responses and 2.8% consider their neighborhood to be “not at all safe.”

Perceptions of Neighborhood Safety

(East Central Florida, Excluding Portions of Orange County; 2014)
Orange County residents are more likely to view their neighborhood as unsafe; Brevard and Seminole county residents are least likely. Concern about neighborhood safety has decreased since 2009.

**Believe That Neighborhood is “Slightly/Not At All Safe” From Crime**
(Trend by County)

Survey respondents more likely to report that their neighborhood is not safe from crime include:

- Lower-income residents (note the negative correlation with income).
- Blacks and Hispanics.
- Young adults.

**Believe That Neighborhood is “Slightly/Not At All Safe” From Crime**
(East Central Florida, Excluding Portions of Orange County; 2014)
Health Advice About Physical Activity & Exercise

A total of 47.0% of East Central Florida adults report that their physician has asked about or given advice to them about physical activity in the past year.

- Comparable to the national average.
- Statistically unchanged from the 2009 survey findings.
- Note: 53.0% of overweight/obese East Central Florida respondents say that they have talked with their doctor about physical activity/exercise in the past year.

Have Received Advice About Exercise in the Past Year From a Physician, Nurse, or Other Health Professional
(By Weight Classification)

![Graph showing the percentage of people who have received advice about exercise in the past year from a physician, nurse, or other health professional, by weight classification in East Central Florida and the United States, for 2009 and 2014.]

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 20]

Notes: Asked of all respondents.
Weight Status

Because weight is influenced by energy (calories) consumed and expended, interventions to improve weight can support changes in diet or physical activity. They can help change individuals' knowledge and skills, reduce exposure to foods low in nutritional value and high in calories, or increase opportunities for physical activity. Interventions can help prevent unhealthy weight gain or facilitate weight loss among obese people. They can be delivered in multiple settings, including healthcare settings, worksites, or schools.

The social and physical factors affecting diet and physical activity (see Physical Activity topic area) may also have an impact on weight. Obesity is a problem throughout the population. However, among adults, the prevalence is highest for middle-aged people and for non-Hispanic black and Mexican American women. Among children and adolescents, the prevalence of obesity is highest among older and Mexican American children and non-Hispanic black girls. The association of income with obesity varies by age, gender, and race/ethnicity.

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: [(weight (pounds)/height squared (inches²)) x 703].

In this report, overweight is defined as a BMI of 25.0 to 29.9 kg/m² and obesity as a BMI ≥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 ≥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.

Classification of Overweight and Obesity by BMI

<table>
<thead>
<tr>
<th></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>


Adult Weight Status

Healthy Weight

Based on self-reported heights and weights, 31.4% of East Central Florida adults are at a healthy weight.

- Unfavorable compared to the statewide proportion.
- Comparable to the US percentage.
- Fails to satisfy the Healthy People 2020 target (33.9% or higher).
- Favorably high in Seminole County.

Denotes a statistically significant decrease in healthy weight since 2004.

"Healthy weight “means neither underweight, nor overweight (BMI = 18.5-24.9).
Healthy Weight

Healthy People 2020 Target = 33.9% or higher

![Graph showing Healthy Weight by year and location]

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 180]
PRC National Health Surveys, Professional Research Consultants, Inc.

Notes: Based on reported heights and weights, 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.
- Brevard County was not surveyed in 1999.

Overweight Status

Two-thirds (66.3%) of East Central Florida adults are overweight.

- Higher than the Florida prevalence.
- Comparable to the US overweight prevalence.
- Favorably low in Seminole County.

Denotes a statistically significant increase over time.

Prevalence of Total Overweight

![Graph showing Prevalence of Total Overweight by year and location]

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 180]
PRC National Health Surveys, Professional Research Consultants, Inc.

Notes: Based on reported heights and weights, 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. The definition for obesity is a BMI greater than or equal to 30.0.
- *Brevard County was not surveyed in 1999.

Here, "overweight" includes those respondents with a BMI value ≥25.
Specifically, 31.9% of East Central Florida adults are obese.

- Less favorable than Florida findings.
- Similar to US findings.
- Similar to the Healthy People 2020 target (30.6% or lower).
- Highest in Orange County; lowest in Seminole County.
- Denotes a statistically significant increase in obesity since 2004.

### Prevalence of Obesity

<table>
<thead>
<tr>
<th></th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County*</td>
<td>18.9%</td>
<td>28.0%</td>
<td>25.5%</td>
<td>23.6%</td>
</tr>
<tr>
<td>Orange County</td>
<td>18.4%</td>
<td>24.0%</td>
<td>28.6%</td>
<td>29.6%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>22.6%</td>
<td>29.9%</td>
<td>30.9%</td>
<td>26.8%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>21.8%</td>
<td>23.3%</td>
<td>23.2%</td>
<td>26.3%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>22.2%</td>
<td>27.9%</td>
<td>27.7%</td>
<td>31.9%</td>
</tr>
<tr>
<td>Florida</td>
<td>21.4%</td>
<td>27.7%</td>
<td>25.5%</td>
<td>25.5%</td>
</tr>
<tr>
<td>United States</td>
<td>19.1%</td>
<td>21.7%</td>
<td>26.0%</td>
<td>29.0%</td>
</tr>
</tbody>
</table>

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 180]

Notes:
- Based on reported heights and weights, 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, regardless of gender.

Obesity is notably more prevalent among:

- Respondents with lower incomes.
- Blacks and Hispanics.

### Prevalence of Obesity

(Percent of Adults With a BMI of 30.0 or Higher; East Central Florida, 2014)

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>Very Low Income</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>ECF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Healthy People 2020 Target = 30.5% or Lower</td>
<td>30.3%</td>
<td>33.4%</td>
<td>30.8%</td>
<td>33.0%</td>
<td>31.0%</td>
<td>40.5%</td>
<td>35.9%</td>
<td>29.6%</td>
<td>29.5%</td>
<td>42.5%</td>
<td>36.3%</td>
<td>31.9%</td>
</tr>
</tbody>
</table>

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 180]

Notes:
- Based on reported heights and weights, asked of all respondents.
- Hispanic can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
- 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, regardless of gender.
Relationship of Overweight With Other Health Issues

Overweight and obese adults are more likely to report a number of adverse health conditions. Among these are:

- Hypertension (high blood pressure).
- High cholesterol.
- Chronic depression.
- Activity limitations.
- "Fair" or "poor" physical health.
- Arthritis/rheumatism.
- Diabetes.

### Relationship of Overweight With Other Health Issues
(By Weight Classification; East Central Florida, 2014)

<table>
<thead>
<tr>
<th>Condition</th>
<th>Healthy Weight</th>
<th>Overweight/Not Obese</th>
<th>Obese</th>
</tr>
</thead>
<tbody>
<tr>
<td>High Blood Pressure</td>
<td>11.5%</td>
<td>22.4%</td>
<td>24.5%</td>
</tr>
<tr>
<td>High Cholesterol</td>
<td>18.1%</td>
<td>21.8%</td>
<td>22.8%</td>
</tr>
<tr>
<td>Chronic Depression</td>
<td>21.1%</td>
<td>29.8%</td>
<td>27.6%</td>
</tr>
<tr>
<td>Activity Limitations</td>
<td>30.6%</td>
<td>20.8%</td>
<td>16.1%</td>
</tr>
<tr>
<td>&quot;Fair&quot; or &quot;Poor&quot; Health</td>
<td>11.5%</td>
<td>22.4%</td>
<td>24.2%</td>
</tr>
<tr>
<td>Arthritis/Rheumatism</td>
<td>21.8%</td>
<td>25.2%</td>
<td>22.2%</td>
</tr>
<tr>
<td>Diabetes</td>
<td>6.3%</td>
<td>11.1%</td>
<td>11.1%</td>
</tr>
</tbody>
</table>

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Items 5, 31, 113, 119, 143, 144, 208)
Notes: Based on reported heights and weights, asked of all respondents.

Weight Management

Health Advice

A total of 24.5% of adults have been told to lose weight by a doctor, nurse or other health professional in the past year.

Marks a significant increase since 2009.

Note that 34.7% of overweight/obese adults have been told to lose weight by a health professional in the past year (nearly 2 in 3 have not).
Weight Control

Individuals who are at a healthy weight are less likely to:

- Develop chronic disease risk factors, such as high blood pressure and dyslipidemia.
- Develop chronic diseases, such as type 2 diabetes, heart disease, osteoarthritis, and some cancers.
- Experience complications during pregnancy.
- Die at an earlier age.

All Americans should avoid unhealthy weight gain, and those whose weight is too high may also need to lose weight.

- Healthy People 2020 (www.healthypeople.gov)

A total of 41.9% of East Central Florida adults who are overweight say that they are both modifying their diet and increasing their physical activity to try to lose weight.

- Similar to national findings.
- Higher in Seminole County, lower in Orange County.
- Denotes a significant increase from 2004 survey findings (but decreasing since 2009).
Trying to Lose Weight by Both Modifying Diet and Increasing Physical Activity (Among Overweight or Obese Respondents)

Sources:
- PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 181]
- PRC National Health Surveys, Professional Research Consultants, Inc.

Notes:
- Reflects respondents who are overweight or obese based on reported heights and weights.
- *Brevard County was not surveyed in 1999.
Substance Abuse

In 2005, an estimated 22 million Americans struggled with a drug or alcohol problem. Almost 95% of people with substance use problems are considered unaware of their problem. Of those who recognize their problem, 273,000 have made an unsuccessful effort to obtain treatment. These estimates highlight the importance of increasing prevention efforts and improving access to treatment for substance abuse and co-occurring disorders.

Substance abuse has a major impact on individuals, families, and communities. The effects of substance abuse are cumulative, significantly contributing to costly social, physical, mental, and public health problems. These problems include:

- Teenage pregnancy
- Human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS)
- Other sexually transmitted diseases (STDs)
- Domestic violence
- Child abuse
- Motor vehicle crashes
- Physical fights
- Crime
- Homicide
- Suicide

The field has made progress in addressing substance abuse, particularly among youth. According to data from the national Institute of Drug Abuse (NIDA) Monitoring the Future (MTF) survey, which is an ongoing study of the behaviors and values of America’s youth between 2004 and 2009, a drop in drug use (including amphetamines, methamphetamine, cocaine, hallucinogens, and LSD) was reported among students in 8th, 10th, and 12th grades. Note that, despite a decreasing trend in marijuana use which began in the mid-1990s, the trend has stalled in recent years among these youth. Use of alcohol among students in these three grades also decreased during this time.

Substance abuse refers to a set of related conditions associated with the consumption of mind- and behavior-altering substances that have negative behavioral and health outcomes. Social attitudes and political and legal responses to the consumption of alcohol and illicit drugs make substance abuse one of the most complex public health issues. In addition to the considerable health implications, substance abuse has been a flashpoint in the criminal justice system and a major focal point in discussions about social values: people argue over whether substance abuse is a disease with genetic and biological foundations or a matter of personal choice.

Advances in research have led to the development of evidence-based strategies to effectively address substance abuse. Improvements in brain-imaging technologies and the development of medications that assist in treatment have gradually shifted the research community’s perspective on substance abuse. There is now a deeper understanding of substance abuse as a disorder that develops in adolescence and, for some individuals, will develop into a chronic illness that will require lifelong monitoring and care.

Improved evaluation of community-level prevention has enhanced researchers’ understanding of environmental and social factors that contribute to the initiation and abuse of alcohol and illicit drugs, leading to a more sophisticated understanding of how to implement evidence-based strategies in specific social and cultural settings.

A stronger emphasis on evaluation has expanded evidence-based practices for drug and alcohol treatment. Improvements have focused on the development of better clinical interventions through research and increasing the skills and qualifications of treatment providers.

- Healthy People 2020 (www.healthypeople.gov)
High-Risk Alcohol Use

Current Drinking

A total of 55.2% of area adults had at least one drink of alcohol in the past month (current drinkers).

- Almost identical to the statewide proportion.
- Similar to that US prevalence.
- Highest in Brevard and Seminole counties; lowest in Orange and Osceola.

Statistically unchanged since 2004.

Current Drinkers

(East Central Florida, 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Item 189)

Notes: Asked of all respondents.

Current drinkers had at least one alcoholic drink in the past month.

“Current drinkers” include survey respondents who had at least one drink of alcohol in the month preceding the interview. For the purposes of this study, a “drink” is considered one can or bottle of beer, one glass of wine, one can or bottle of wine cooler, one cocktail, or one shot of liquor.
A total of 4.8% of area adults averaged two or more drinks of alcohol per day in the past month (chronic drinkers).

- More favorable than the statewide proportion.
- Similar to the national proportion.
- Similar findings by county.
- Statistically unchanged since 2004.

**Chronic Drinkers**

(East Central Florida, 2014)

<table>
<thead>
<tr>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>Very Low Income</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>ECF</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.8%</td>
<td>3.0%</td>
<td>3.5%</td>
<td>5.5%</td>
<td>6.7%</td>
<td>3.7%</td>
<td>3.7%</td>
<td>5.8%</td>
<td>5.7%</td>
<td>1.6%</td>
<td>3.2%</td>
<td>4.8%</td>
</tr>
</tbody>
</table>

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 190]
Notes:
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
- Chronic drinkers are defined as those having 60+ alcoholic drinks in the past month.
A total of **15.1%** of East Central Florida adults are binge drinkers.

- Similar to Florida findings.
- More favorable than national findings.
- Satisfies the Healthy People 2020 target (24.3% or lower).
- Statistically similar by county.

Comparable to the 2004 percentage (note, however, that the previous definition for binge drinking was five or more drinks, regardless of gender).

### Binge Drinkers

**Healthy People 2020 Target = 24.4% or lower**

<table>
<thead>
<tr>
<th></th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County*</td>
<td>13.4%</td>
<td>17.7%</td>
<td>16.6%</td>
<td>12.3%</td>
</tr>
<tr>
<td>Orange County</td>
<td>14.5%</td>
<td>18.9%</td>
<td>12.2%</td>
<td>15.1%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>11.6%</td>
<td>11.1%</td>
<td>11.1%</td>
<td>11.1%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>13.0%</td>
<td>14.7%</td>
<td>16.8%</td>
<td>16.8%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>15.5%</td>
<td>17.8%</td>
<td>13.1%</td>
<td>11.3%</td>
</tr>
<tr>
<td>Florida</td>
<td>14.0%</td>
<td>16.6%</td>
<td>13.4%</td>
<td>16.6%</td>
</tr>
<tr>
<td>United States</td>
<td>16.6%</td>
<td>17.8%</td>
<td>17.8%</td>
<td>19.5%</td>
</tr>
</tbody>
</table>

**Significant vs. US**

- Brevard County: significant vs. US
- Orange County: significant vs. US
- Osceola County: significant vs. US
- Seminole County: significant vs. US
- Florida: significant vs. US
- United States: significant vs. US

**Binge drinking is more prevalent among:**

- **Men.**
- **Adults under age 40** (note the negative correlation with age).
- **Residents in households with higher incomes** (positive correlation with age).
- **Whites.**
**Binge Drinkers**
(East Central Florida, 2014)

Healthy People 2020 Target = 24.4% or Lower

<table>
<thead>
<tr>
<th>Income</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>ECF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Low</td>
<td>20.6%</td>
<td>10.0%</td>
<td>18.3%</td>
<td>15.7%</td>
</tr>
<tr>
<td>Low</td>
<td>6.8%</td>
<td>9.2%</td>
<td>13.1%</td>
<td>16.7%</td>
</tr>
<tr>
<td>Mid/High</td>
<td>10.6%</td>
<td>13.8%</td>
<td>15.1%</td>
<td>15.1%</td>
</tr>
</tbody>
</table>

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 191]

Notes:
- Asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households with incomes below 100% of the federal poverty level. "Low Income" includes households with incomes between 100% and 199% of the federal poverty level. "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.
- Binge drinkers are defined as men having 5+ alcoholic drinks on any one occasion or women consuming 4+ drinks on any one occasion.

### Drinking & Driving

A total of 2.8% of East Central Florida adults acknowledge having driven a vehicle in the past month after they had perhaps too much to drink.

- Better than the national findings.
- Least favorable in Orange County; most favorable in Seminole County.

The drinking and driving prevalence has not changed from 2004 survey results.

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

<table>
<thead>
<tr>
<th></th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
<th>2014**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County*</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Orange County</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Osceola County</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Seminole County</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>East Central Florida</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>United States</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 67]

Notes:
- Asked of all respondents.
- *Brevard County was not surveyed in 1999.
- **This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Alcohol & Drug Treatment

A total of 3.3% of East Central Florida adults report that they have sought professional help for an alcohol or drug problem at some point in their lives.

- Lower than national findings.
- Lowest in Orange County; highest in Brevard County.
- Statistically unchanged over time.

### Have Ever Sought Professional Help for an Alcohol/Drug-Related Problem

<table>
<thead>
<tr>
<th>Year</th>
<th>Brevard County*</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>East Central Florida</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>3.2%</td>
<td>3.6%</td>
<td>2.8%</td>
<td>3.9%</td>
<td>2.3%</td>
<td>3.2%</td>
</tr>
<tr>
<td>2004</td>
<td>2.5%</td>
<td>2.6%</td>
<td>2.8%</td>
<td>2.5%</td>
<td>2.4%</td>
<td>2.7%</td>
</tr>
<tr>
<td>2009</td>
<td>2.5%</td>
<td>2.5%</td>
<td>2.8%</td>
<td>3.9%</td>
<td>2.5%</td>
<td>3.2%</td>
</tr>
<tr>
<td>2014</td>
<td>2.5%</td>
<td>2.5%</td>
<td>2.8%</td>
<td>3.9%</td>
<td>2.5%</td>
<td>3.2%</td>
</tr>
</tbody>
</table>

**Sources:**
- PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 68]
- PRC National Health Surveys, Professional Research Consultants, Inc.

**Notes:**
- Asked of all respondents.
- *Brevard County was not surveyed in 1999.
Tobacco Use

Tobacco use is the single most preventable cause of death and disease in the United States. Each year, approximately 443,000 Americans die from tobacco-related illnesses. For every person who dies from tobacco use, 20 more people suffer with at least one serious tobacco-related illness. In addition, tobacco use costs the US $193 billion annually in direct medical expenses and lost productivity.

Scientific knowledge about the health effects of tobacco use has increased greatly since the first Surgeon General’s report on tobacco was released in 1964.

Tobacco use causes:

- Cancer
- Heart disease
- Lung diseases (including emphysema, bronchitis, and chronic airway obstruction)
- Premature birth, low birth weight, stillbirth, and infant death

There is no risk-free level of exposure to secondhand smoke. Secondhand smoke causes heart disease and lung cancer in adults and a number of health problems in infants and children, including: severe asthma attacks; respiratory infections; ear infections; and sudden infant death syndrome (SIDS).

Smokeless tobacco causes a number of serious oral health problems, including cancer of the mouth and gums, periodontitis, and tooth loss. Cigar use causes cancer of the larynx, mouth, esophagus, and lung.

– Healthy People 2020 (www.healthypeople.gov)

Cigarette Smoking

Cigarette Smoking Prevalence

A total of 16.7% of East Central Florida adults currently smoke cigarettes, either regularly (11.8% every day) or occasionally (4.9% on some days).

Cigarette Smoking Prevalence (East Central Florida, 2014)

- Regular Smoker 11.8%
- Occasional Smoker 4.9%
- Former Smoker 24.7%
- Never Smoked 58.6%

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Item 185)
Notes: Asked of all respondents.

- Similar to state and national levels.
- Fails to satisfy the Healthy People 2020 target (12% or lower).
- Favorably low in Seminole County.
The current smoking percentage has decreased significantly since 2004.

### Current Smokers

#### (East Central Florida, 2014)

- Lower-income residents.
- Whites.
- Adults under 65.

Note also that 17.0% 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.

### Sources:
- 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Items 185-186]

### Notes:
- Asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
- Includes regular and occasional smokers (everyday and some days).
A total of 10.3% of East Central Florida adults (including smokers and non-smokers) report that a member of their household has smoked cigarettes in the home an average of 4+ times per week over the past month.

- More favorable than national findings.
- Similar findings by county.
- Marks a statistically significant decrease over time.
- Note that 3.8% of East Central Florida non-smokers are exposed to cigarette smoke at home, better than what is found nationally.

Member of Household Smokes at Home

Notably higher among adults aged 18-64 and (especially) residents with lower incomes.

### 2004 vs. 2009 vs. 2014

East Central Florida non-smokers exposed to smoke in the home: 3.8% lower than the US (6.3%)

### Member of Household Smokes At Home

(East Central Florida, 2014)

**Sources:** 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 60]

**Notes:**
- Asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
- “Smokes at 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.
Among households with children, 7.7% have someone who smokes cigarettes in the home.

- Comparable to national findings.
- Similar findings by county (not shown).
- Denotes a significant decrease over time.

Percentage of Households With Children In Which Someone Smokes in the Home

Perceptions of Secondhand Smoke

As asked about their perceptions of the level of harm caused by secondhand smoke, most East Central Florida respondents (64.3%) gave “very harmful” responses. This inquiry was not addressed in portions of Orange County.

- Another 26.3% gave “somewhat harmful” responses, and 9.4% of respondents do not feel that secondhand smoke is harmful.

- As seen, smokers are more likely to consider secondhand smoke to be “not very harmful” or “not harmful at all.”
The percentage of respondents who consider secondhand smoke to be “very harmful” has not changed since 2009.

**Believe That Secondhand Smoke is “Very Harmful”**
(By Smoking Status)

<table>
<thead>
<tr>
<th>Smoking Status</th>
<th>2009</th>
<th>2014*</th>
</tr>
</thead>
<tbody>
<tr>
<td>ECF Smokers</td>
<td>45.0%</td>
<td>45.4%</td>
</tr>
<tr>
<td>ECF Non-Smokers</td>
<td>68.1%</td>
<td>68.2%</td>
</tr>
<tr>
<td>ECF All Respondents</td>
<td>64.0%</td>
<td>64.3%</td>
</tr>
</tbody>
</table>

**Sources:** PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 63]

**Notes:**
- Asked of all respondents.
- *In 2014, this question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

**Smoking Cessation**

Preventing tobacco use and helping tobacco users quit can improve the health and quality of life for Americans of all ages. People who stop smoking greatly reduce their risk of disease and premature death. Benefits are greater for people who stop at earlier ages, but quitting tobacco use is beneficial at any age.

Many factors influence tobacco use, disease, and mortality. Risk factors include race/ethnicity, age, education, and socioeconomic status. Significant disparities in tobacco use exist geographically; such disparities typically result from differences among states in smoke-free protections, tobacco prices, and program funding for tobacco prevention.

— *Healthy People 2020* (www.healthypeople.gov)

**Health Advice About Smoking Cessation**

**A total of 65.8% of smokers say that a doctor, nurse or other health professional has recommended in the past year that they quit smoking.**

- Similar to the national percentage.
- Unchanged over time.

**Advised by a Healthcare Professional in the Past Year to Quit Smoking**
(Among Current Smokers)

<table>
<thead>
<tr>
<th></th>
<th>2009</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>East Central Florida</td>
<td>64.3%</td>
<td>65.8%</td>
</tr>
<tr>
<td>United States</td>
<td>60.8%</td>
<td>67.8%</td>
</tr>
</tbody>
</table>

**Sources:** PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 57]

**Notes:**
- Asked of all current smokers.
While over one-half of East Central Florida smokers whose physician recommended quitting could not name any specific recommendations made, 30.6% mentioned medication and 3.5% mentioned a help line (this inquiry was not addressed in Brevard County or portions of Orange County).

Of the smokers whose physician recommended quitting, 52.4% followed their advice. This item was not asked of smokers in portions of Orange County.

**Specific Recommendation by Health Professional**
(Among East Central Florida Smokers Whose Physician Recommended Quitting, Excluding Brevard County and Portions of Orange County)

- No Specific Advice: 57.3%
- Medication: 30.6%
- Help Line: 3.5%
- Other: 8.6%
- 52.4% followed their physician’s recommendation (Excluding Portions of Orange County)

Smoking Cessation Attempts

One-half (57.6%) of regular smokers went without smoking for one day or longer in the past year because they were trying to quit smoking.

- Similar to the national percentage.
- Fails to satisfy the Healthy People 2020 target (80% or higher).
- Denotes a significant increase over previous findings.

**Have Stopped Smoking for One Day or Longer in the Past Year in an Attempt to Quit Smoking**
(Among Everyday Smokers)

<table>
<thead>
<tr>
<th>Year</th>
<th>East Central Florida</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>2004</td>
<td>48.4%</td>
<td>43.6%</td>
</tr>
<tr>
<td>2009</td>
<td>57.6%</td>
<td>57.0%</td>
</tr>
<tr>
<td>2014</td>
<td>57.0%</td>
<td>55.9%</td>
</tr>
</tbody>
</table>

Healthy People 2020 Target = 80.0% or Higher

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 58-59]
Notes: Asked of all smokers whose physician has recommended quitting. This question was not asked in Brevard County and Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Other Tobacco Use

Cigars

A total of 2.3% of East Central Florida adults use cigars every day or on some days. This indicator was not asked in Brevard County.

- Lower than the national percentage.
- Fails to satisfy the Healthy People 2020 target (0.2% or lower).
- Similar findings by county.

Use of Cigars
(East Central Florida, Excluding Brevard County; 2014)

Sources:
- 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 62]
- 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes:
- Asked of all respondents.
- This question was not asked in Brevard County.

Smokeless Tobacco

A total of 1.7% of East Central Florida adults use some type of smokeless tobacco every day or on some days. This indicator was not asked in Brevard County.

- Well below the national percentage.
- Fails to satisfy the Healthy People 2020 target (0.3% or lower).
- Similar findings by county.

Examples of smokeless tobacco include chewing tobacco, snuff, or "snus."
Use of Smokeless Tobacco
(East Central Florida; Excluding Brevard County; 2014)

Healthy People 2020 Target = 0.3% or Lower

<table>
<thead>
<tr>
<th>County</th>
<th>Percentage</th>
<th>Significant vs. US</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td>Orange County</td>
<td>1.3%</td>
<td></td>
</tr>
<tr>
<td>Osceola County</td>
<td>2.7%</td>
<td></td>
</tr>
<tr>
<td>Seminole County</td>
<td>2.2%</td>
<td></td>
</tr>
<tr>
<td>East Central Florida</td>
<td>1.7%</td>
<td></td>
</tr>
<tr>
<td>United States</td>
<td>4.0%</td>
<td></td>
</tr>
</tbody>
</table>

Sources:
- 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 61]
- 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes:
- Asked of all respondents.
- Smokeless tobacco includes chewing tobacco or snuff.
- This question was not asked in Brevard County.

N/A
ACCESS TO HEALTH SERVICES
Health Insurance Coverage

Type of Healthcare Coverage

A total of 57.8% of East Central Florida adults age 18 to 64 report having healthcare coverage through private insurance. Another 20.9% report coverage through a government-sponsored program (e.g., Medicaid, Medicare, military benefits).

Healthcare Insurance Coverage
(Among Adults Age 18-64; East Central Florida, 2014)

- Insured, Employer-Based: 50.5%
- Insured, Self-Purchase: 7.3%
- Medicaid: 8.4%
- Medicare: 6.2%
- VA/Military: 4.5%
- Medicaid & Medicare: 1.1%
- Other Gov’t Coverage: 0.7%
- No Insurance/ Self-Pay: 21.2%

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 193]
Notes: Reflects respondents age 18 to 64.

Lack of Health Insurance Coverage

Among adults age 18 to 64, 21.2% report having no insurance coverage for healthcare expenses.

- Better than the state finding.
- Worse than the national finding.
- The Healthy People 2020 target is universal coverage (0% uninsured).
- Worst in Osceola County; best in Seminole County.
- Unchanged from 2004 survey findings.

Survey respondents were asked a series of questions to determine their healthcare insurance coverage, if any, from either private or government-sponsored sources.

Here, lack of health insurance coverage reflects respondents age 18 to 64 (thus, excluding the Medicare population) who have no type of insurance coverage for healthcare services – neither private insurance nor government-sponsored plans (e.g., Medicaid).
Lack of Healthcare Insurance Coverage
(Among Adults 18-64)

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 193]
PRC National Health Surveys, Professional Research Consultants, Inc.

Notes:
* Asked of all respondents age 18 to 64.
* Brevard County was not surveyed in 1999.

The following population segments are more likely to be without healthcare insurance coverage:

- Residents living at lower incomes (more than 34% uninsured prevalence among low-income adults).
- Blacks and Hispanics.
- Young adults.
- Men.

Lack of Healthcare Insurance Coverage
(Among Adults Age 18-64; East Central Florida, 2014)

Healthy People 2020 Target = 0.0% (Universal Coverage)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 193]

Notes:
* Asked of all respondents under the age of 65.
* Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).
* Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level; “Low Income” includes households with incomes between 100% and 199% of the federal poverty level; “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.

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The following population segments are more likely to be without healthcare insurance coverage:

- Residents living at lower incomes (more than 34% uninsured prevalence among low-income adults).
- Blacks and Hispanics.
- Young adults.
- Men.
Difficulties Accessing Healthcare

Access to comprehensive, quality health care services is important for the achievement of health equity and for increasing the quality of a healthy life for everyone. It impacts: overall physical, social, and mental health status; prevention of disease and disability; detection and treatment of health conditions; quality of life; preventable death; and life expectancy.

Access to health services means the timely use of personal health services to achieve the best health outcomes. It requires three distinct steps: 1) Gaining entry into the health care system; 2) Accessing a health care location where needed services are provided; and 3) Finding a health care provider with whom the patient can communicate and trust.

– Healthy People 2020 (www.healthypeople.gov)

Difficulties Accessing Services

A total of 42.3% of East Central Florida adults report some type of difficulty or delay in obtaining healthcare services in the past year.

- Comparable to national findings.
- Statistically similar by county.
- Similar to the percentage reported in 2004.

Experienced Difficulties or Delays or Some Kind in Receiving Needed Healthcare in the Past Year

Note that the following demographic groups more often report difficulties accessing healthcare services:

- The uninsured population.
- Lower-income residents.
- Blacks and Hispanics.
- Women.
- Adults under the age of 65 (negative correlation with age).
Experienced Difficulties or Delays of Some Kind in Receiving Needed Healthcare in the Past Year
(East Central Florida, 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 197]

Notes: Asked of all respondents.

Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).

Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.

Barriers to Healthcare Access

Of the tested barriers, cost of a physician visit impacted the greatest share of East Central Florida adults (18.9% say that cost prevented them from obtaining a visit to a physician in the past year). Other tested barriers are outlined below.

- The proportion of East Central Florida adults impacted was statistically comparable to that found nationwide for each of the tested barriers, with the exception of difficulty finding a physician (the East Central Florida prevalence was worse than the US).

Barriers to Access Have Prevented Medical Care in the Past Year

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Items 7-12, 14] 2013 PRC National Health Survey, Professional Research Consultants, Inc.

Notes: Asked of all respondents.
As might be expected, East Central Florida adults without health insurance are much more likely to report access barriers when compared to the insured population, particularly those related to cost.

### Barriers to Healthcare Access
(By Insured Status; East Central Florida, 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Items 7-12, 14]

Notes: Asked of all respondents.
Among all East Central Florida adults, 18.3% report that cost prevented a prescription medication at some point in the past year.

- Statistically similar to national findings.
- Similar findings by county.
- Statistically unchanged from 2004 survey results.

Adults more likely to say that cost prevented a prescription in the past year include:

- Respondents with lower incomes.
- Blacks and Hispanics.
- Women.
- Adults under 65.
Among all East Central Florida adults, 18.9% report that cost prevented a doctor visit in the past year.

- Comparable to the US prevalence.
- Similar findings by county.
- Denotes a significant increase since 2004.

Cost Prevented a Physician Visit Within the Past Year

Reports of cost preventing a physician visit are more often among:

- Respondents with lower incomes.
- Blacks and Hispanics.
- Women.
- Adults under age 65.

Cost Prevented a Physician Visit Within the Past Year
(East Central Florida, 2014)
A total of 17.1% of adults report difficulty getting a medical appointment in the past year.

- Almost identical to the national report.
- Favorably low in Seminole County.
- Marks a significant increase since 2004.

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

**Sources:** PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 8]  
PRC National Health Surveys, Professional Research Consultants, Inc.

**Notes:**  
- Asked of all respondents.  
- *Brevard County was not surveyed in 1999.*

### Adults more likely to have had trouble getting an appointment include:

- Respondents with lower incomes (negative correlation with income).
- Blacks and Hispanics.
- Women.
- Adults under 65 (negative correlation with age).

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

**(East Central Florida, 2014)**

**Sources:** 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 8]

**Notes:**  
- Asked of all respondents.  
- Represents the percentage of respondents experiencing one or more barriers to accessing healthcare in the past 12 months.  
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).  
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level, “Low Income” includes households with incomes between 100% and 199% of the federal poverty level; “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
Inconvenient office hours prevented a physician visit for 15.6% of East Central Florida adults in the past year.

- Almost identical to national findings.
- Higher in Orange County; lower in Seminole County.
- Marks a statistically significant increase from 2004 survey findings.

### Inconvenient Office Hours Prevented Physician Visit Last Year

**Sources:** PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 11]

**Notes:** Asked of all respondents.

### Inconvenient Office Hours Prevented Physician Visit Last Year

(East Central Florida, 2014)

**Sources:** 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 11]

**Notes:**
- Asked of all respondents.
- *“Brevard County was not surveyed in 1999.”*

Adults more likely to report that inconvenient office hours prevented a visit to a doctor include women, young adults (negative correlation with age), and Hispanic respondents.

### Inconvenient Office Hours Prevented Physician Visit Last Year

(East Central Florida, 2014)

**Sources:** 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 11]

**Notes:**
- Asked of all respondents.
- Represents the percentage of respondents experiencing one or more barriers to accessing healthcare in the past 12 months.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
Among East Central Florida adults, 13.4% had trouble finding a doctor at some point in the past year.

- Less favorable than national findings.
- Favorably low in Seminole County.
- Marks a statistically significant increase from 2004 survey results.

**Had Trouble Finding a Doctor in the Past Year**

<table>
<thead>
<tr>
<th></th>
<th>1999</th>
<th>2004</th>
<th>2009</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County*</td>
<td>5.2%</td>
<td>11.7%</td>
<td>13.3%</td>
<td>13.3%</td>
</tr>
<tr>
<td>Orange County</td>
<td>8.6%</td>
<td>8.6%</td>
<td>15.2%</td>
<td>14.9%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>6.6%</td>
<td>14.9%</td>
<td>15.5%</td>
<td>14.1%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>7.7%</td>
<td>9.0%</td>
<td>9.0%</td>
<td>8.7%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>8.7%</td>
<td>11.7%</td>
<td>11.9%</td>
<td>12.9%</td>
</tr>
<tr>
<td>United States</td>
<td>11.7%</td>
<td>15.0%</td>
<td>17.5%</td>
<td>17.5%</td>
</tr>
</tbody>
</table>

Sources:  PRC Community Health Surveys, Professional Research Consultants, Inc.  [Item 7]
Notes:  Asked of all respondents.
*Annual county population was not surveyed in 1999.

Adults more likely to have had trouble finding a doctor include:

- Respondents with lower incomes (negative correlation with income).
- Blacks and Hispanics.
- Young adults (negative correlation with age).
- Women.

**Had Trouble Finding a Doctor in the Past Year**

(East Central Florida, 2014)

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>Very Low Income</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>ECF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>9.5%</td>
<td>17.0%</td>
<td>17.8%</td>
<td>12.6%</td>
<td>5.6%</td>
<td>30.1%</td>
<td>24.9%</td>
<td>7.4%</td>
<td>11.3%</td>
<td>16.6%</td>
<td>17.8%</td>
<td>13.4%</td>
</tr>
</tbody>
</table>

Sources:  2014 PRC Community Health Survey, Professional Research Consultants, Inc.  [Item 7]
Notes:  Asked of all respondents.
*Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
**Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes at 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.

**Notes:**
- Marks a statistically significant increase vs. 2004/US.
- Marks a statistically significant increase vs. 1999.
- Marks a statistically significant increase vs. 2004.
- Marks a statistically significant increase vs. 1999.
- Marks a statistically significant increase vs. 2004.
- Marks a statistically significant increase vs. 1999.
Overall, 7.7% of East Central Florida survey respondents indicate that a lack of transportation prevented a physician visit in the past year.

- Comparable to national findings.
- Higher in Orange County, lower in Brevard County.
- Statistically similar to 2004 findings.

Lack of Transportation Made Difficult or Prevented a Physician Visit in the Past Year

![Graph showing data](image)

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 10]
PRC National Health Surveys, Professional Research Consultants, Inc.

Notes: Asked of all respondents.
*Brevard County was not surveyed in 1999.

Adults more likely to report that lack of transportation was a barrier include adults who don’t own a car, lower-income residents, Blacks, Hispanics, young adults, and women.

Lack of Transportation Made Difficult or Prevented a Physician Visit in the Past Year
(East Central Florida, 2014)

![Graph showing data](image)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 10]

Notes: Asked of all respondents.
*Represents the percentage of respondents experiencing one or more barriers to accessing healthcare in the past 12 months.
*Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
*Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
When asked about their primary mode of transportation, the majority of survey respondents (83.5%) currently own a car, while 8.1% get rides from someone else.

- Another 6.0% utilize some form of public transportation.
- This item was not addressed in Brevard County or portions of Orange County.

### Primary Mode of Transportation
(East Central Florida, Excluding Brevard County and Portions of Orange County; 2014)

<table>
<thead>
<tr>
<th>Mode of Transportation</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Own Car</td>
<td>83.5%</td>
</tr>
<tr>
<td>Someone Else Drives</td>
<td>8.1%</td>
</tr>
<tr>
<td>Bus/Public Transp.</td>
<td>6.0%</td>
</tr>
<tr>
<td>Other</td>
<td>2.4%</td>
</tr>
</tbody>
</table>

Language/Cultural/Racial Barriers

Among all East Central Florida adults, 2.2% report that language barriers or cultural issues made obtaining medical care difficult in the past year. This inquiry was not addressed in Brevard County.

- Similar findings by county.
- Denotes a statistically significant decrease over time.

### Language Barriers or Cultural Differences Made Obtaining Medical Care Difficult in the Past Year
(East Central Florida, Excluding Brevard County; 2014)

<table>
<thead>
<tr>
<th>County</th>
<th>2004</th>
<th>2009</th>
<th>2014*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>2.1%</td>
<td>1.6%</td>
<td>N/A</td>
</tr>
<tr>
<td>Orange County</td>
<td>3.5%</td>
<td>2.2%</td>
<td>2.2%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>8.9%</td>
<td>6.6%</td>
<td>2.2%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>10.8%</td>
<td>8.6%</td>
<td>1.5%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>11.4%</td>
<td>9.5%</td>
<td>7.5%</td>
</tr>
</tbody>
</table>

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 78]
Notes: Asked of all respondents.
- This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Those population segments more likely to report that language barriers or cultural differences made obtaining medical care difficult in the past year include:

- Respondents with lower incomes.
- Hispanics.
- Women.
- Adults age 40 to 64.

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

(East Central Florida, Excluding Brevard County; 2014)

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Men</td>
<td>1.3%</td>
</tr>
<tr>
<td>Women</td>
<td>3.1%</td>
</tr>
<tr>
<td>18 to 39</td>
<td>1.8%</td>
</tr>
<tr>
<td>40 to 64</td>
<td>3.1%</td>
</tr>
<tr>
<td>65+</td>
<td>1.0%</td>
</tr>
<tr>
<td>Very Low Income</td>
<td>3.9%</td>
</tr>
<tr>
<td>Low Income</td>
<td>3.3%</td>
</tr>
<tr>
<td>Mid/High Income</td>
<td>1.6%</td>
</tr>
<tr>
<td>White</td>
<td>1.7%</td>
</tr>
<tr>
<td>Black</td>
<td>0.7%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>3.6%</td>
</tr>
<tr>
<td>ECF</td>
<td>2.2%</td>
</tr>
</tbody>
</table>

When asked about their healthcare experience in the past year compared with people of other races, 73.8% of survey respondents felt they were treated “the same.” This indicator was not asked in Brevard County or portions of Orange County.

- Another 22.2% of adults gave “better” responses, while 4.0% said “worse.”

**Healthcare Experience in the Past Year Compared With People of Other Races**

(East Central Florida, Excluding Brevard County and Portions of Orange County; 2014)

- Better 22.2%
- The Same 73.8%
- Worse 4.0%
Hispanics in East Central Florida are more likely than Whites or Blacks to consider their recent healthcare experiences to be "worse" than those of other races.

Healthcare Experiences in the Past Year Have Been “Worse” Than Those of Other Races
(ECF, Excluding Brevard County and Portions of Orange County, By Race/Ethnicity; 2014)

Prescriptions

In the past year, 29.1% of East Central Florida adults stretched a prescription medication, sacrificed in order to buy a prescription medication, or did not take their prescription medication as ordered.

- Highest in Orange County; lowest in Brevard County.
- Statistically similar to 2004 findings.

Stretched Prescription/Sacrificed for a Prescription/Did Not Take Prescription as Ordered in the Past Year

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 52]
Notes: Asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- This question was not asked in Brevard County or Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 13]
Notes: Asked of all respondents.
- *This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 34734, 34760, 34761, 34786, and 34787.
Adults more likely to have stretched a prescription, sacrificed in order to buy a prescription, or not taken their prescription as ordered include:

- The uninsured population.
- Blacks and Hispanics.
- Respondents with lower incomes.
- Adults under 65 (note the negative correlation with age).
- Women.

**Stretched Prescription/Sacrificed for a Prescription/Did Not Take Prescription as Ordered in the Past Year**

(East Central Florida, Excluding Portions of Orange County, 2014)

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>Very Low Income</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Insured</th>
<th>Uninsured</th>
<th>ECF</th>
</tr>
</thead>
<tbody>
<tr>
<td>0%</td>
<td>26.5%</td>
<td>31.5%</td>
<td>34.0%</td>
<td>29.5%</td>
<td>15.4%</td>
<td>40.3%</td>
<td>42.1%</td>
<td>22.3%</td>
<td>24.7%</td>
<td>37.0%</td>
<td>38.3%</td>
<td>45.1%</td>
<td>42.1%</td>
<td>29.1%</td>
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<tr>
<td>20%</td>
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<td>40%</td>
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<td>60%</td>
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<td>80%</td>
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<tr>
<td>100%</td>
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</tr>
</tbody>
</table>

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 13]

Notes: * Asked of all respondents.
* Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
* Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
* This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Primary Care Services

Improving health care services depends in part on ensuring that people have a usual and ongoing source of care. People with a usual source of care have better health outcomes and fewer disparities and costs. Having a primary care provider (PCP) as the usual source of care is especially important. PCPs can develop meaningful and sustained relationships with patients and provide integrated services while practicing in the context of family and community. Having a usual PCP is associated with:

- Greater patient trust in the provider
- Good patient-provider communication
- Increased likelihood that patients will receive appropriate care

Improving health care services includes increasing access to and use of evidence-based preventive services. Clinical preventive services are services that: prevent illness by detecting early warning signs or symptoms before they develop into a disease (primary prevention); or detect a disease at an earlier, and often more treatable, stage (secondary prevention).

- Healthy People 2020 (www.healthypeople.gov)

Specific Source of Ongoing Care

A total of 72.8% of East Central Florida adults were determined to have a specific source of ongoing medical care (a “medical home”).

- Less favorable than national findings.
- Fails to satisfy the Healthy People 2010 objective (95% or higher).
- Lowest in Orange and Osceola counties; highest in Brevard and Seminole counties.

Statistically unchanged from 2004 survey findings.

Have a Specific Source of Ongoing Medical Care

Healthy People 2020 Target = 95.0% or higher

Sources:
- PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 194]
- PRC National Health Surveys, Professional Research Consultants, Inc.

Notes:
- Asked of all respondents.
When viewed by demographic characteristics, the following population segments are less likely to have a specific source of care:

- The uninsured population.
- Lower-income adults.
- Adults under age 40 (positive correlation with age).
- Blacks and Hispanics.
- Men.

Among adults age 18-64, 70.1% have a specific source for ongoing medical care, less favorable than national findings.
- Fails to satisfy the Healthy People 2020 target for this age group (89.4% or higher).

Among adults 65+, 86.8% have a specific source for care, more favorable than the percentage reported among seniors nationally.
- Fails to satisfy the Healthy People 2020 target of 100% for seniors.

### Have a Specific Source of Ongoing Medical Care
(East Central Florida, 2014)

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>Very Low Income</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Insured</th>
<th>Uninsured</th>
<th>ECF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Low Income</td>
<td>68.9%</td>
<td>76.5%</td>
<td>59.5%</td>
<td>79.9%</td>
<td>86.8%</td>
<td>63.8%</td>
<td>61.5%</td>
<td>79.5%</td>
<td>78.6%</td>
<td>65.1%</td>
<td>58.2%</td>
<td>43.1%</td>
<td>72.8%</td>
<td></td>
</tr>
<tr>
<td>Low Income</td>
<td>68.9%</td>
<td>76.5%</td>
<td>59.5%</td>
<td>79.9%</td>
<td>86.8%</td>
<td>63.8%</td>
<td>61.5%</td>
<td>79.5%</td>
<td>78.6%</td>
<td>65.1%</td>
<td>58.2%</td>
<td>43.1%</td>
<td>72.8%</td>
<td></td>
</tr>
<tr>
<td>Mid/High Income</td>
<td>68.9%</td>
<td>76.5%</td>
<td>59.5%</td>
<td>79.9%</td>
<td>86.8%</td>
<td>63.8%</td>
<td>61.5%</td>
<td>79.5%</td>
<td>78.6%</td>
<td>65.1%</td>
<td>58.2%</td>
<td>43.1%</td>
<td>72.8%</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>68.9%</td>
<td>76.5%</td>
<td>59.5%</td>
<td>79.9%</td>
<td>86.8%</td>
<td>63.8%</td>
<td>61.5%</td>
<td>79.5%</td>
<td>78.6%</td>
<td>65.1%</td>
<td>58.2%</td>
<td>43.1%</td>
<td>72.8%</td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>68.9%</td>
<td>76.5%</td>
<td>59.5%</td>
<td>79.9%</td>
<td>86.8%</td>
<td>63.8%</td>
<td>61.5%</td>
<td>79.5%</td>
<td>78.6%</td>
<td>65.1%</td>
<td>58.2%</td>
<td>43.1%</td>
<td>72.8%</td>
<td></td>
</tr>
<tr>
<td>Hispanic</td>
<td>68.9%</td>
<td>76.5%</td>
<td>59.5%</td>
<td>79.9%</td>
<td>86.8%</td>
<td>63.8%</td>
<td>61.5%</td>
<td>79.5%</td>
<td>78.6%</td>
<td>65.1%</td>
<td>58.2%</td>
<td>43.1%</td>
<td>72.8%</td>
<td></td>
</tr>
<tr>
<td>Insured</td>
<td>68.9%</td>
<td>76.5%</td>
<td>59.5%</td>
<td>79.9%</td>
<td>86.8%</td>
<td>63.8%</td>
<td>61.5%</td>
<td>79.5%</td>
<td>78.6%</td>
<td>65.1%</td>
<td>58.2%</td>
<td>43.1%</td>
<td>72.8%</td>
<td></td>
</tr>
<tr>
<td>Uninsured</td>
<td>68.9%</td>
<td>76.5%</td>
<td>59.5%</td>
<td>79.9%</td>
<td>86.8%</td>
<td>63.8%</td>
<td>61.5%</td>
<td>79.5%</td>
<td>78.6%</td>
<td>65.1%</td>
<td>58.2%</td>
<td>43.1%</td>
<td>72.8%</td>
<td></td>
</tr>
</tbody>
</table>

**Sources:**
- 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Items 194-196]

**Notes:**
- Asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households with incomes below 100% of the federal poverty level. "Low Income" includes households with incomes between 100% and 199% of the federal poverty level. "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.

### Type of Place Used for Medical Care

When asked where they usually go if they are sick or need advice about their health, the greatest share of respondents (53.2%) identified a particular doctor’s office.

A total of 16.9% say they usually go to some type of clinic, while 4.5% rely on a hospital emergency room and 2.8% receive care at a military/VA facility.
Particular Place Utilized for Medical Care  
(East Central Florida, 2014)

- Dr’s Office 53.2%
- Clinic 16.9%
- None 17.9%
- Other 4.8%
- Military/VA 2.8%
- Hospital ER 4.5%

Sources:  2014 PRC Community Health Survey, Professional Research Consultants, Inc.  
Notes:  Asked of all respondents.

Utilization of Primary Care Services

Adults

Two-thirds of adults (66.5%) visited a physician for a routine checkup in the past year.
- Comparable to national findings.
- Comparable by county.
- Statistically similar to 2004 survey findings.

Have Visited a Physician for a Checkup in the Past Year

Sources:  PRC Community Health Surveys, Professional Research Consultants, Inc.  
Notes:  Asked of all respondents.

*Brevard County was not surveyed in 1999.
East Central Florida men are less likely to have received routine care in the past year, as are young adults (note the positive correlation with age), residents in households with lower incomes, and (especially) the uninsured.
Emergency Room Utilization

A total of 10.7% of East Central Florida adults have gone to a hospital emergency room more than once in the past year about their own health.

- Comparable to national findings.
- Higher in Orange County, lower in Seminole County.
- Statistically unchanged over time.

**Have Used a Hospital Emergency Room More Than Once in the Past Year**

<table>
<thead>
<tr>
<th>Year</th>
<th>Brevard County*</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>East Central Florida</th>
<th>United States</th>
</tr>
</thead>
<tbody>
<tr>
<td>1999</td>
<td>9.6%</td>
<td>7.9%</td>
<td>9.5%</td>
<td>12.3%</td>
<td>9.8%</td>
<td>9.2%</td>
</tr>
<tr>
<td>2004</td>
<td>5.7%</td>
<td>7.1%</td>
<td>6.6%</td>
<td>9.1%</td>
<td>7.9%</td>
<td>7.7%</td>
</tr>
<tr>
<td>2009</td>
<td>6.6%</td>
<td>7.5%</td>
<td>7.0%</td>
<td>9.8%</td>
<td>6.9%</td>
<td>6.6%</td>
</tr>
<tr>
<td>2014</td>
<td>11.3%</td>
<td>12.8%</td>
<td>11.6%</td>
<td>16.3%</td>
<td>10.6%</td>
<td>8.9%</td>
</tr>
</tbody>
</table>

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Items 28-29]
PRC National Health Surveys, Professional Research Consultants, Inc.

Notes:
- *Brevard County was not surveyed in 1999.

Used the ER because:
- Emergency Situation = 65.1%
- Weekend/After Hours = 17.7%
- Access Problems = 10.6%

Of those using a hospital ER, 65.1% say this was due to an emergency or life-threatening situation, while 17.7% indicated that the visit was during after-hours or on the weekend. A total of 10.6% cited difficulties accessing primary care for various reasons.

These population segments are more likely to report using a hospital emergency room more than once in the past year:

- Residents living at lower incomes (negative correlation with age).
- Blacks and Hispanics.
- Young adults.
- Women.
Have Used a Hospital Emergency Room More Than Once in the Past Year
(East Central Florida, 2014)

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 28]

Notes:
- 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 28]
- Asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households with incomes below 100% of the federal poverty level. "Low Income" includes households with incomes between 100% and 199% of the federal poverty level. "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.
Oral Health

The health of the mouth and surrounding craniofacial (skull and face) structures is central to a person’s overall health and well-being. Oral and craniofacial diseases and conditions include: dental caries (tooth decay); periodontal (gum) diseases; cleft lip and palate; oral and facial pain; and oral and pharyngeal (mouth and throat) cancers.

The significant improvement in the oral health of Americans over the past 50 years is a public health success story. Most of the gains are a result of effective prevention and treatment efforts. One major success is community water fluoridation, which now benefits about 7 out of 10 Americans who get water through public water systems. However, some Americans do not have access to preventive programs. People who have the least access to preventive services and dental treatment have greater rates of oral diseases. A person’s ability to access oral healthcare is associated with factors such as education level, income, race, and ethnicity.

Oral health is essential to overall health. Good oral health improves a person’s ability to speak, smile, smell, taste, touch, chew, swallow, and make facial expressions to show feelings and emotions. However, oral diseases, from cavities to oral cancer, cause pain and disability for many Americans. Good self-care, such as brushing with fluoride toothpaste, daily flossing, and professional treatment, is key to good oral health. Health behaviors that can lead to poor oral health include:

- Tobacco use
- Excessive alcohol use
- Poor dietary choices

Barriers that can limit a person’s use of preventive interventions and treatments include:

- Limited access to and availability of dental services
- Lack of awareness of the need for care
- Cost
- Fear of dental procedures

There are also social determinants that affect oral health. In general, people with lower levels of education and income, and people from specific racial/ethnic groups, have higher rates of disease. People with disabilities and other health conditions, like diabetes, are more likely to have poor oral health.

Community water fluoridation and school-based dental sealant programs are 2 leading evidence-based interventions to prevent tooth decay.

Major improvements have occurred in the nation’s oral health, but some challenges remain and new concerns have emerged. One important emerging oral health issue is the increase of tooth decay in preschool children. A recent CDC publication reported that, over the past decade, dental caries (tooth decay) in children ages 2 to 5 have increased.

Lack of access to dental care for all ages remains a public health challenge. This issue was highlighted in a 2008 Government Accountability Office (GAO) report that described difficulties in accessing dental care for low-income children. In addition, the Institute of Medicine (IOM) has convened an expert panel to evaluate factors that influence access to dental care.

Potential strategies to address these issues include:

- Implementing and evaluating activities that have an impact on health behavior.
- Promoting interventions to reduce tooth decay, such as dental sealants and fluoride use.
- Evaluating and improving methods of monitoring oral diseases and conditions.
- Increasing the capacity of State dental health programs to provide preventive oral health services.
- Increasing the number of community health centers with an oral health component.

Healthy People 2020 (www.healthypeople.gov)
A total of 6 in 10 East Central Florida adults (60.1%) have visited a dentist or dental clinic (for any reason) in the past year.

- Similar to statewide findings.
- Less favorable than national findings.
- Satisfies the Healthy People 2020 target (49% or higher).
- Higher in Brevard and Seminole counties; lowest in Orange County.
- Statistically unchanged since 2004 (decreasing since 2009).

Note the following:

- Persons living in the higher income categories report much higher utilization of oral health services (low-income adults fail to satisfy the Healthy People 2020 target).
- There is a positive correlation between age and recent dental visits.
- Whites are much more likely than Blacks or Hispanics to report recent dental care.
- As might be expected, persons without dental insurance report much lower utilization of oral health services than those with dental coverage.
Have Visited a Dentist or Dental Clinic Within the Past Year (East Central Florida, 2014)

Sources:
- 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 21]

Notes:
- Asked of all respondents.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.

Healthy People 2020 Target = 49.0% or Higher

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>Very Low Income</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Dental Insurance</th>
<th>No Dental Insurance</th>
<th>ECF</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>60.7%</td>
<td>59.5%</td>
<td>53.7%</td>
<td>63.3%</td>
<td>66.5%</td>
<td>72.0%</td>
<td>65.9%</td>
<td>53.9%</td>
<td>69.2%</td>
<td>45.1%</td>
<td>60.1%</td>
<td>53.7%</td>
<td>66.5%</td>
<td>60.1%</td>
</tr>
</tbody>
</table>

Routine Checkups

Further, more than one-half of East Central Florida survey respondents (54.6%) had a routine dental checkup in the past year (including cleaning visits for teeth or dentures). This indicator was not asked in Brevard County or portions of Orange County.

- Highest in Seminole County.

Had a Routine Dental Checkup in the Past Year (Excluding Brevard County and Portions of Orange County; 2014)

<table>
<thead>
<tr>
<th></th>
<th>N/A</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>East Central Florida</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>52.3%</td>
<td>51.6%</td>
<td></td>
<td>62.5%</td>
<td>54.6%</td>
</tr>
</tbody>
</table>
Adults more likely to report having a routine dental checkup in the past year include:

- Those aged 40 and older.
- Upper-income residents (positive correlation with income).
- Whites.
- Residents with some type of dental insurance.

### Had a Routine Dental Checkup in the Past Year

(East Central Florida, Excluding Brevard County and Portions of Orange County; 2014)

<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>Very Low Income</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Dental Insurance</th>
<th>No Dental Insurance</th>
<th>ECF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage</td>
<td>55.6%</td>
<td>53.7%</td>
<td>48.4%</td>
<td>58.9%</td>
<td>60.4%</td>
<td>22.0%</td>
<td>42.2%</td>
<td>67.2%</td>
<td>61.1%</td>
<td>38.0%</td>
<td>51.8%</td>
<td>63.9%</td>
<td>38.8%</td>
<td>54.6%</td>
</tr>
</tbody>
</table>

**Sources:** 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 23]

**Notes:**
- Asked of all respondents.
- Hispans can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
- This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

### Site for Dental Care

When asked about a particular place used for dental care, 3 in 4 survey respondents mentioned a dentist’s office, and 10.4% visit a dental clinic. This indicator was not asked in Brevard County or in portions of Orange County.

- Note that 7.9% of respondents report not having a particular place for their dental care.

### Particular Place Utilized for Dental Care

(East Central Florida, Excluding Brevard County and Portions of Orange County; 2014)

- Dentist’s Office: 75.6%
- Dental Clinic: 10.4%
- None: 7.9%
- Uncertain: 3.3%
- Other: 2.8%

**Sources:** 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 24]

**Notes:**
- Asked of all respondents.
- This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
In the past 24 months, 16.4% of East Central Florida respondents were unable to get the dental care that they needed. This indicator was not asked in portions of Orange County.

- Unfavorably high in Osceola County.

### Unable to Get Dental Care in the Past 24 Months if Needed
(Excluding Portions of Orange County; 2014)

<table>
<thead>
<tr>
<th>County</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>14.7%</td>
</tr>
<tr>
<td>Orange County</td>
<td>17.3%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>20.9%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>13.8%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>16.4%</td>
</tr>
</tbody>
</table>

**Sources:** 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 25]

**Notes:**
- Asked of all respondents.
- This question was not asked in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

When asked to specify why they were unable to get the dental care they needed, the vast majority of respondents mentioned cost or issues of insurance coverage.

### Dental Insurance

Over 6 in 10 East Central Florida adults (62.8%) have dental insurance that covers all or part of their dental care costs.

- Similar to the national finding.
- Higher in Orange County; lower in Osceola County.

### Have Insurance Coverage That Pays All or Part of Dental Care Costs

<table>
<thead>
<tr>
<th>County</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brevard County</td>
<td>60.4%</td>
</tr>
<tr>
<td>Orange County</td>
<td>65.7%</td>
</tr>
<tr>
<td>Osceola County</td>
<td>57.3%</td>
</tr>
<tr>
<td>Seminole County</td>
<td>61.1%</td>
</tr>
<tr>
<td>East Central Florida</td>
<td>62.8%</td>
</tr>
<tr>
<td>United States</td>
<td>65.6%</td>
</tr>
</tbody>
</table>

**Sources:** 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 27]

**Notes:**
- Asked of all respondents.
HEALTH EDUCATION & OUTREACH
Primary Source of Healthcare Information

Family physicians and the Internet are residents’ primary sources of healthcare information.

- 39.3% of East Central Florida adults cited their family physician as their primary source of healthcare information.
- The Internet received the second-highest response, with 26.6%.
  - Other sources mentioned include friends and relatives (6.2%), employers (5.8%) and insurance (5.0%).
- Just 1.2% of survey respondents say that they do not receive any healthcare information.

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc.  
Notes: Asked of all respondents.
Reliance on Family Physicians

- The prevalence of adults who rely on a family physician for their healthcare information is similar to the US prevalence.

Note the statistically significant decrease from 2004 survey results.

Trend in Use of a Family Doctor for Healthcare Information

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 132]
PRC National Health Surveys, Professional Research Consultants, Inc.

Notes: Asked of all respondents.

Reliance on the Internet

- The prevalence of adults who rely on the Internet for their healthcare information is almost identical to the US prevalence.

Note the statistically significant increase from 2004 survey results.

Trend in Use of the Internet for Healthcare Information

Sources: PRC Community Health Surveys, Professional Research Consultants, Inc. [Item 132]
PRC National Health Surveys, Professional Research Consultants, Inc.

Notes: Asked of all respondents.
Internet Access

A total of 8.9% of East Central Florida adults do not have access to the Internet for personal use. This item was not addressed in Brevard County or portions of Orange County.

- The prevalence is favorably low in Seminole County.

Do Not Have Access to the Internet for Personal Use
(Excluding Brevard County and Portions of Orange County; 2014)

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Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 113]
Notes: Asked of all respondents.
This question was not asked in Brevard County and Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.

Adults more likely to be without Internet access for personal use include:

- ---
- Seniors.
- Blacks and Hispanics.
- Residents in households with low incomes.

Do Not Have Access to the Internet for Personal Use
(East Central Florida, Excluding Brevard County and Portions of Orange County; 2014)

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Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 113]
Notes: Asked of all respondents.
Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., "White" reflects non-Hispanic White respondents).
Income categories reflect respondent's household income as a ratio to the federal poverty level (FPL) for their household size. "Very Low Income" includes households with incomes below 100% of the federal poverty level. "Low Income" includes households with incomes between 100% and 199% of the federal poverty level. "Mid/High Income" includes households with incomes at 200% or more of the federal poverty level.
This question was not asked in Brevard County and Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Over two-thirds (68.6%) of East Central Florida adults have a smartphone that can download apps, access email, and/or use the Internet. This item was not addressed in Brevard County or portions of Orange County.

- Highest in Seminole County; lowest in Osceola County.

Have a Smartphone That Can Download Apps, Access Email, and/or Use the Internet
(Excluding Brevard County and Portions of Orange County; 2014)

Population segments less likely to have a smartphone in East Central Florida include:

- Seniors (negative correlation with age).
- Lower-income residents (positive correlation with income).
- Whites.

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Item 134)
Notes:
- Asked of all respondents.
- This question was not asked in Brevard County or Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Healthcare Directives

A total of 35.2% of East Central Florida respondents have a written statement (formal or informal) directing their medical care in the event of incapacitation. This inquiry was not addressed in Brevard County or in portions of Orange County.

- No difference in survey findings when viewed by county.

Have a Written Statement
Directing Medical Care in the Event of Incapacitation
(Excluding Brevard County and Portions of Orange County; 2014)

- Adults less likely to have a written statement directing their medical care include men, adults under 40 (note the positive correlation with age), those in households with lower incomes (positive correlation with income), Blacks, and Hispanics.

Have a Written Statement
Directing Medical Care in the Event of Incapacitation
(Excluding Brevard County and Portions of Orange County; 2014)

A formal statement, also known as an Advance Directive, could include Living Wills and Health Care Powers of Attorney. An informal statement could be having one’s wishes written down on a regular sheet of paper, not necessarily a form.

Adults less likely to have a written statement directing their medical care include men, adults under 40 (note the positive correlation with age), those in households with lower incomes (positive correlation with income), Blacks, and Hispanics.

In this case, a formal statement (aka Advance Directive) could include Living Wills and Healthcare Powers of Attorney. An informal statement might include having wishes written down on a regular sheet of paper, not necessarily a form.

Sources:
- 2014 PRC Community Health Survey. Professional Research Consultants, Inc. [Item 129]

Notes:
- Asked of all respondents.
- This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
- In this case, a formal statement (aka Advance Directive) could include Living Wills and Healthcare Powers of Attorney. An informal statement might include having wishes written down on a regular sheet of paper, not necessarily a form.
Among East Central Florida adults with some type of written statement (whether formal or informal), 96.5% have communicated their wishes to a family member; fewer (57.7%) have communicated their wishes to a physician.

Note the positive correlation between age and the communication of future healthcare decisions with a physician.

### Have Communicated Healthcare Decisions (Living Will) in the Event of Incapacitation

(Adults w/a Living Will, Excluding Brevard County and Portions of Orange County; 2014)

- **Communicated to Family**
  - Yes: 96.5%
  - No: 3.5%

- **Communicated to Physician**
  - Yes: 96.5%
  - No: 57.7%

#### Sources:
- 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Items 110-131]

#### Notes:
- Asked of all respondents with a living will.
- This question was not asked in Brevard County or in Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
- In this case, a formal statement (aka Advance Directive) could include Living Wills and Healthcare Powers of Attorney. An informal statement might include having wishes written down on a regular sheet of paper, not necessarily a form.
Among employed or self-employed adults under age 65 in East Central Florida, 61.2% report that their employer or company offers health programs or activities (other than offering health insurance) to encourage wellness. This indicator was not asked in Brevard County or portions of Orange County.

The prevalence is highest in Orange County.

Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 135]
Notes: * Asked of all respondents who are employed or self-employed.
* This question was not asked in Brevard County and Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Employed adults less likely to report that an employer/company offers health programs or activities to encourage wellness include:

- Lower-income residents.
- Women.
- Whites and Hispanics.

### Employer/Company Offers
#### Health Programs or Activities to Encourage Wellness

(ECF Employed/Self-Employed Adults <65, Excluding Brevard County and Portions of Orange County; 2014)

**Sources:** 2014 PRC Community Health Survey, Professional Research Consultants, Inc. [Item 135]

**Notes:**
- Asked of all respondents under 65.
- Hispanics can be of any race. Other race categories are non-Hispanic categorizations (e.g., “White” reflects non-Hispanic White respondents).
- Income categories reflect respondent’s household income as a ratio to the federal poverty level (FPL) for their household size. “Very Low Income” includes households with incomes below 100% of the federal poverty level. “Low Income” includes households with incomes between 100% and 199% of the federal poverty level. “Mid/High Income” includes households with incomes at 200% or more of the federal poverty level.
- This question was not asked in Brevard County and Orange County ZIP codes 32818, 32819, 32821, 32830, 32835, 32836, 34734, 34760, 34761, 34786, and 34787.
Participation in Health Promotion Events

Educational and community-based programs play a key role in preventing disease and injury, improving health, and enhancing quality of life.

Health status and related-health behaviors are determined by influences at multiple levels: personal, organizational/institutional, environmental, and policy. Because significant and dynamic interrelationships exist among these different levels of health determinants, educational and community-based programs are most likely to succeed in improving health and wellness when they address influences at all levels and in a variety of environments/settings.

Education and community-based programs and strategies are designed to reach people outside of traditional healthcare settings. These settings may include schools, worksites, healthcare facilities, and/or communities.

Using nontraditional settings can help encourage informal information sharing within communities through peer social interaction. Reaching out to people in different settings also allows for greater tailoring of health information and education.

Educational and community-based programs encourage and enhance health and wellness by educating communities on topics such as: chronic diseases; injury and violence prevention; mental illness/behavioral health; unintended pregnancy; oral health; tobacco use; substance abuse; nutrition; and obesity prevention.

Healthy People 2020 (www.healthypeople.gov)

A total of 20.2% of East Central Florida adults participated in some type of organized health promotion activity in the past year, such as health fairs, health screenings, or seminars.

- Lower than the national prevalence.
- Highest in Orange and Seminole counties; lowest in Brevard County.
- Note that 83.2% of adults who participated in a health promotion activity in the past year indicate that it was sponsored by their employer.

Participated in a Health Promotional Activity in the Past Year

<table>
<thead>
<tr>
<th></th>
<th>Brevard County</th>
<th>Orange County</th>
<th>Osceola County</th>
<th>Seminole County</th>
<th>East Central Florida</th>
<th>United States</th>
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<tr>
<td>%</td>
<td>12.5%</td>
<td>22.4%</td>
<td>20.1%</td>
<td>24.7%</td>
<td>20.2%</td>
<td>23.8%</td>
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Sources: 2014 PRC Community Health Survey, Professional Research Consultants, Inc. (Items 136-137)

Notes: Asked of all respondents.
The following chart outlines participation by various demographic characteristics.

Note that seniors, lower-income adults, and the uninsured less often report participation in health promotion activities.

### Participated in a Health Promotional Activity in the Past Year
(East Central Florida, 2014)

<table>
<thead>
<tr>
<th></th>
<th>Men</th>
<th>Women</th>
<th>18 to 39</th>
<th>40 to 64</th>
<th>65+</th>
<th>Very Low Income</th>
<th>Low Income</th>
<th>Mid/High Income</th>
<th>White</th>
<th>Black</th>
<th>Hispanic</th>
<th>Insured</th>
<th>Uninsured</th>
<th>ECF</th>
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<td><strong>2014 PRC Community Health Survey, Professional Research Consultants, Inc.</strong> [Item 116]</td>
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<td><em>Asked of all respondents.</em></td>
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LOCAL RESOURCES
Perceptions of Local Healthcare Services

Just over one-half of East Central Florida adults (53.1%) rate the overall healthcare services available in their community as “excellent” or “very good.”

- Another 27.3% gave “good” ratings.

![Pie chart showing ratings of overall healthcare services available in the community.]

**Rating of Overall Healthcare Services Available in the Community**  
(East Central Florida, 2014)

- Excellent: 21.5%
- Very Good: 31.6%
- Good: 27.3%
- Fair: 10.8%
- Poor: 8.8%

**Notes:**  2014 PRC Community Health Survey, Professional Research Consultants, Inc.  [Item 6]

**Sources:**  Asked of all respondents.

However, 19.6% of residents characterize local healthcare services as “fair” or “poor.”

- Less favorable than reported nationally.
- Unfavorably high in Osceola County; favorably low in Seminole County.
- Statistically unchanged from 2004 survey results.

*Note that the 1999 survey asked about respondents’ “satisfaction” with their overall healthcare, rather than asking them to rate the overall healthcare services available to them (as it was worded in 2004, 2009 and 2014).*
The following residents are more critical of local healthcare services:

- Residents with lower incomes (negative correlation with age).
- Uninsured adults.
- Adults under age 65 (negative correlation with age).
- Blacks and Hispanics.
- Women.