2012

Community Health Needs Assessment

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Executive Summary

The Community Health Needs Assessment (CHNA) was prepared by the Health Council of East Central Florida, Inc. for Parrish Medical Center (PMC) in response to changes to Internal Revenue Service (IRS) forms and systems. This reflects additional requirements for charitable hospitals enacted under Section 9007 of the Patient Protection and Affordable Care Act of 2010. The assessment serves as the foundation for developing a strategic implementation plan that includes engagement with community organizations to address health needs. Participation in the development and execution of a community-driven process has the potential to enhance program effectiveness, leverage limited financial resources, and strengthen the public health system. Collaboration among community partners can lead to improved health for all residents.

The data for the Community Health Needs Assessment was gathered using the *Healthy Measures for East Central Florida* online Healthy Community Network (HCN). This customizable web-based community dashboard, designed by Healthy Communities Institute (HCI), delivers access to high-quality data and decision support. The HCN provides health indicator tracking, best practice sharing and community development to help improve the health and environmental sustainability of communities in East Central Florida. The CHNA includes: a definition of the community served by Parrish Medical Center with an examination of demographic, economic, education, public safety, environmental, and transportation data; existing health care resources and services; the process for obtaining the data; identified health needs of the community including primary and chronic disease needs for uninsured, low-income, and minority populations; the process for identifying and prioritizing health needs; a summary of the information collected from key stakeholders representing the interests of the community; and the information gaps that limited the hospital facility's ability to assess all needs of the community.

The Florida Department of Health State Health Improvement Plan (2012-2015) and the National Prevention Council's 2012 National Prevention Strategy were used as a guide for health indicator selection. To accomplish the task of prioritizing health needs, the Assessment Protocol for Excellence in Public Health (APEXPH) modified Hanlon Method was used to categorize and rank health indicators to identify key needs in the community. This method considered three criteria: the magnitude of the problem, as measured in terms of the percent of the population with the health problem; the severity of the problem in terms of mortality, morbidity, hospitalizations, economic loss or community impact; and the predicted effectiveness of the intervention in preventing the health problem. When applicable, health indicator rates were compared to the national benchmark targets established by Healthy People 2020.

The CHNA provides a comprehensive analysis of widely-accepted health indicators that identify key community needs for each county served by PMC. The objectives of the CHNA are to increase the understanding of the community's health problems, build capacity through partnership development and collaboration, and strengthen the role of the hospital as they work within the county to

address community health needs. The overarching goal of the health care system is to provide all residents with the opportunity to attain optimal health outcomes.

Overview of Key Findings

Community Profile

In 2012, the population of Brevard was estimated at 552,037 residents. Of these, 82.4 percent were White, 10.4 percent Black, and 8.7 percent Hispanic. One in five residents is 65 years or older.

The unemployment rate in Brevard, at ten percent of the civilian population, is higher than that of the nation. This places a strain on the social support systems as more persons qualify for benefits. Housing affordability remains a challenge for more than fifty percent of residents. The poverty rates among the Black population were three times that of Whites; for Hispanics, the rates were twice those observed in the White population. The median household income and poverty rate for the county fell within the top 50th percentile when compared to other U.S. counties.

Over 95 percent of high school students graduated within four years of high school enrollment. Slightly more than 26 percent of Brevard residents have earned a Bachelor's degree. Rates for graduation and Bachelor's degree attainment among the Black and Hispanic populations were lower than that of the White population.

Although the violent crime rate in Brevard has been decreasing, it is still above the national average. Deaths due to motor vehicle collisions are above the Healthy People 2020 target.

Air quality improved over the past three years with the annual ozone level at 2 or Grade B. Like many counties in the nation, Brevard has too many fast food restaurants and too few grocery stores. The number of recreation and fitness facilities is in the top 50th percentile when compared to other counties in the U.S. Child abuse rates decreased slightly from 2009 to 2010. Over 30 percent of children live in single-parent households.

The long geographic length of the county presents transportation challenges for Brevard residents. Public transportation and carpooling are not widely used to reduce traffic congestion.

Mortality

Cancer and coronary heart disease are the leading causes of death for all population groups. Breast and lung cancer are responsible for the majority of all cancer deaths. Diabetes is the fifth leading cause of death among Blacks. Stroke is the fifth leading cause of death among Hispanics.

Years Potential Life Lost

The leading cause of premature death is major cardiovascular disease. This is followed by motor

vehicle collisions, suicide, diabetes, and breast cancer. Among Blacks and Hispanics, the Human immunodeficiency virus (HIV) is one of the top five causes for early death.

Morbidity

Diabetes is the most prevalent chronic disease in Brevard affecting over 48,000 residents. Other prevalent diseases include asthma, chlamydia, prostate, and breast cancer.

Health Screenings

The percentage of adults seeking preventive health screenings (mammography, colonoscopies and PAP tests) has decreased over the past three years. Early detection increases cure rate and survivorship.

Maternal and Child Health

The infant mortality rate for the general population has decreased and is close to the Healthy People 2020 target. However, the rate in the Black population is three times that of the target rate. The preterm birth rate among all populations continues to increase. Rates for low birth weight, prenatal care and teen births are improving for all groups but targets have not been met.

Health Risk Behaviors

Fruit and vegetable consumption among adults is increasing. Rates for smoking, sedentary lifestyle, and binge drinking have remained stable over the past three years. Marijuana use among teens is more than three times higher than the target rate. Binge drinking is also an issue for this population.

Health Risk Factors

The prevalence of high blood pressure and overweight/obese status continues to increase in the adult population. Among teens, asthma and obesity rates increased from 2008 to 2010.

Health Care Factors

Lack of health insurance coverage among adults and children is the major barrier to accessing health care services in the community.

Summary of Key Stakeholder Interviews

Lack of transportation, health insurance coverage due to high unemployment, and housing affordability are the major barriers for creating a health community in Brevard. As a result, residents have delayed seeking timely treatment. When patients do seek care they tend to be sicker, creating a negative impact on the cost to treat, as well as the ability to attain optimal health outcomes.

Options for mental health, substance abuse, and dental care services are limited throughout the County. The growing demand for these services has far outpaced availability. Coordinated medical case management and education are needed to improve health literacy, provide appropriate and timely treatment, and attain good health outcomes.

Organizations promoting good health in Brevard include: Parrish Medical Center, Brevard County Health Department, YMCA, parks and recreation departments, senior centers and programs, and the Greater Titusville Renaissance.

Organizations impeding the promotion of good health include: Fast food establishments, small retail grocers who do not offer fresh fruits and vegetables, and lack of wellness programs among large employers.

Conclusion

Reduced mortality and morbidity rates can be attained in all population groups by increasing participation in health screenings for early cancer detection and modifying risk behaviors that directly affect the health factors responsible for the growing prevalence of chronic diseases. Coordinated community planning is needed to ensure all residents have access to appropriate services when care is needed. Building strategic partnerships will leverage limited financial resources, improve program effectiveness, and strengthen the role of the hospital as they work within the county to address community health needs. A strengthened public health system can provide all residents with the opportunity to attain optimal health outcomes.

Introduction

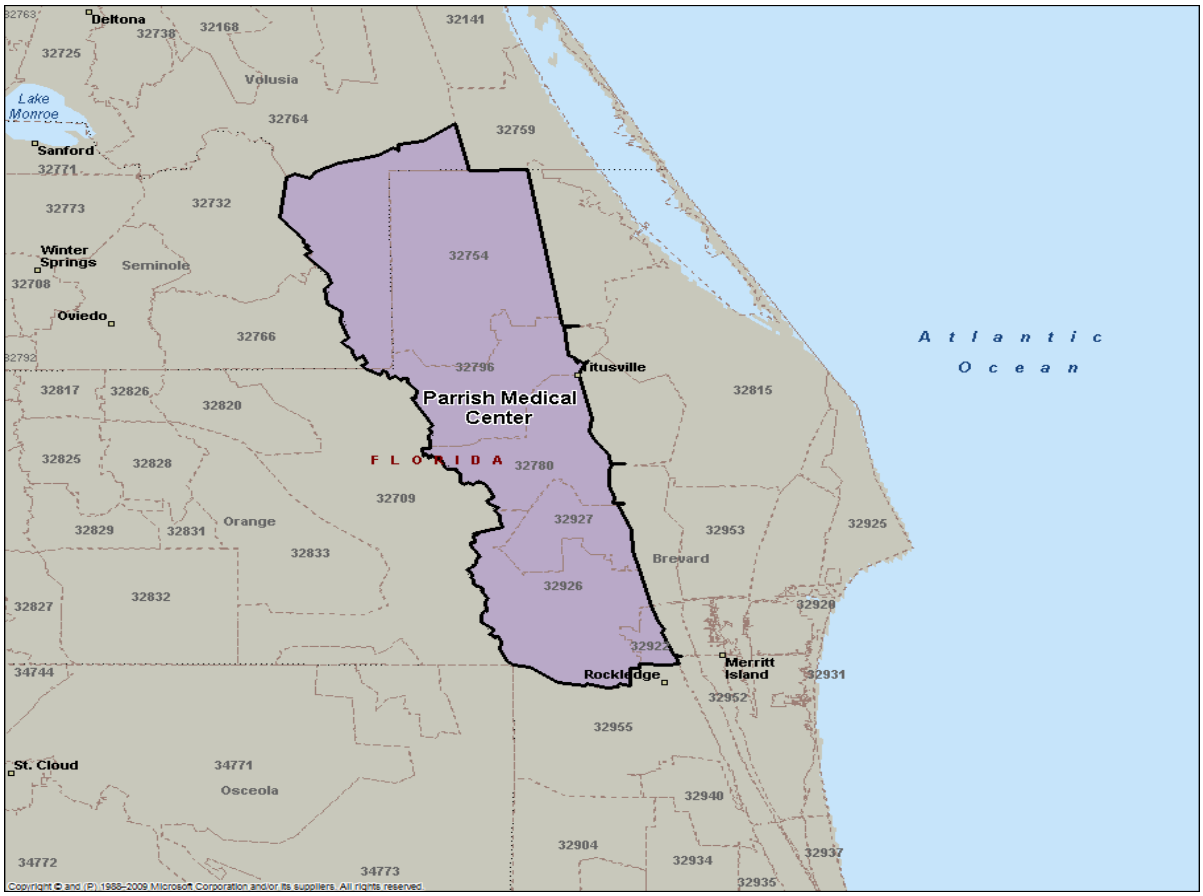
This Community Health Needs Assessment (CHNA) was prepared by the Health Council of East Central Florida, Inc. for Parish Medical Center (PMC), in response to the new Internal Revenue Service (IRS) requirement under The Patient Protect and Affordable Care Act, Public Law 111-148. Hospital organizations that are (or seek to be) recognized as described in section 501(c)(3) are required to conduct a CHNA at least once every three years and adopt an implementation strategy to meet the identified health needs. The CHNA must take into account input from persons who represent the broad interests of the community served by the hospital facility, including those with special knowledge of or expertise in public health. Additionally, the CHNA must be made widely available to the public.

The CHNA, as prepared in accordance with Schedule H (Form 990) Part V, Section B, provides a comprehensive analysis of widely-accepted health indicators that identify key community needs for each county served by PMC. The objectives of the CHNA are to increase the understanding of the community's health problems, build capacity through partnership development and collaboration, and strengthen the role of the hospital as they work within the county to address community health needs. The overarching goal of the health care system is to provide all residents with the opportunity to attain optimal health outcomes.

1a.
A Definition of the Community Served by the Hospital

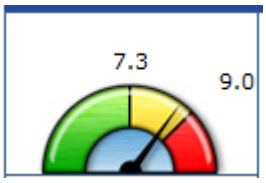
Parrish Medical Center (PMC) is located in Brevard County on the Space Coast of Florida. Brevard is an exceptionally long county, extending 72 miles from north to south, but averages 26.5 miles inland from the seacoast at any point. The county is unofficially divided into three sections; North County, comprising Titusville, Mims and Port St. John; Central Brevard, which includes Cocoa, Rockledge, Merritt Island, and Cocoa Beach; and South County, which incorporates Melbourne, Palm Bay, Grant, Valkaria, and the South Beaches (South Patrick Shores, Satellite Beach, Indian Harbour Beach, Indialantic, and Melbourne Beach).

PMC primarily serves the north and central regions of the county which includes Titusville, Cocoa, and Merritt Island. Titusville is on the Indian River, west of Merritt Island and the Kennedy Space Center, and south-southwest of the Canaveral National Seashore. It is a principal city of the Palm Bay–Melbourne–Titusville Metropolitan Statistical Area. The map below depicts the primary service area for PMC by zip code.

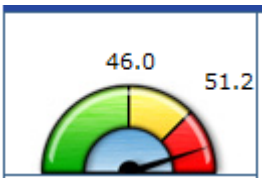


The Healthy Measures community dashboard provides a colored gauge for visual representation of how the community is doing in comparison to other communities. The three-colored dial represents the distribution of values from the reporting regions (e.g. counties in the state) ordered from those doing the best to those doing the worst. From that distribution, the green represents the top 50th percentile, the yellow represents the 25th-50th percentile, and the red represents the "worst" quartile. A gauge has been provided for each indicator used in defining the community served.

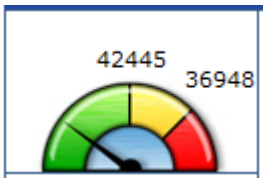
Economy



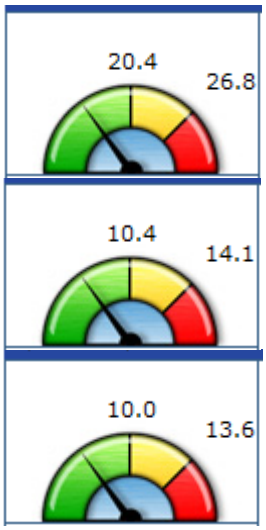
A key economic indicator is the unemployment rate. A high rate of unemployment affects health care access, creates mental stress, and places a strain on societal support systems as more unemployed persons qualify for benefits. According to the U.S. Bureau of Labor Statistics, ten percent of Brevard County civilians, ages16 years and older, were unemployed as of February 2012. Brevard County is in the 25th-50th percentile for this indicator when compared to other U.S. counties.



Housing affordability is defined as renters who are paying 30 percent or more of their household income to pay for rent. This can create a financial hardship, especially for lower income renters, as they may not have enough money for food, transportation, or medical expenses. In Brevard County, 56.3 percent of households are spending a high percentage of their income on rent. Brevard residents are in the bottom 25th percentile for this indicator when compared to other counties in the United States.

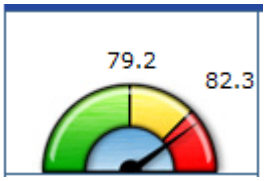


Areas with higher median household incomes are likely to have more educated residents and lower unemployment. According to the U.S. Census American Community Survey, the median household income (HHI) for Brevard residents rose from $49,114 in 2005-2007 to $49,523 in 2006-2010. Median HHI was higher for White non-Hispanics at $51,112. Among the Black population median HHI was $35,300, and $45,445 for Hispanics. Brevard County median household income is in the top 50th percentile when compared to other counties in the United States.

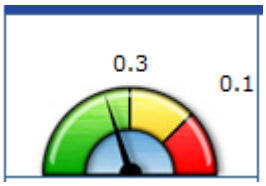


Measures for Brevard children living below poverty (14.4 percent), families living below poverty (7.2 percent) and people 65 and older living below poverty (6.9 percent) all fall within the top 50th percentile when compared to other U.S. counties. According to the U.S. Census American Community Survey, the percentage of Brevard children and families living below poverty increased in 2006-2010 from percentages reported in the previous three-year estimate. Poverty rates among Black children, families, and elderly are three times higher than rates for Whites. For Hispanics, the poverty rate is twice that of the White population for the same three groups.

Transportation

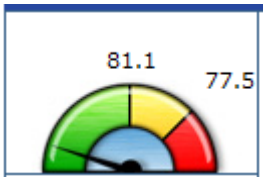


Public transportation reduces fuel consumption, minimizes air pollution, and relieves traffic congestion. Public transportation development is challenging in Brevard County due in part to its unusually long geographic length. Only 0.4 percent of workers aged 16 years and over commute to work using public transportation. This is well below the national health target to increase the proportion of workers who take public transportation to work to 5.5 percent.

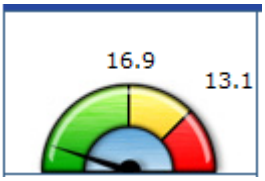


In addition to using public transportation, carpooling to work can also reduce the negative effects related to vehicular traffic. The American Community Survey reported 82.7 percent of Brevard workers 16 years and older drive alone to work. When compared to other counties in the nation, Brevard is in the bottom 25th percentile for this indicator.

Education

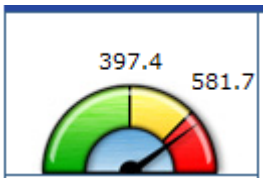


The Florida Department of Education reported 95.8 percent of Brevard high school students graduated (2009-2010) within four years of their first ninth grade enrollment. This is well above the Healthy People 2020 target at 82.4 percent. Graduation rates for all White, Black and Hispanic students were also above the target. Individuals who finish high school are more likely to attain the basic skills required to function in an increasingly complicated job market and society. Brevard ranked in the top 50th percentile when compared to other U.S. counties.

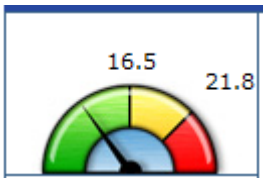


Having a bachelor's degree opens up career opportunities in a variety of fields and is often the prerequisite to a higher paying job. In Brevard, 26.2 percent of residents have earned a bachelor's degree or higher. The rate in the White population was slightly higher at 27.2 percent. The percentages among the Black population, at 15.1 percent, and among Hispanics, at 22.6 percent, were below the county rate. Brevard County is in the top 50th percentile nationally for people 25 years and older with a bachelor's degree.

Public Safety



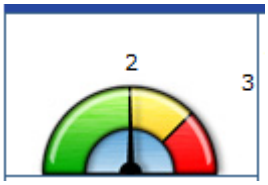
According to the Florida Department of Law Enforcement, violence negatively impacts communities by reducing productivity, decreasing property values, and disrupting social services. Although the violent crime rate in 2010, at 575.5/100,000 population has decreased from the rate in 2009, it still remains above the national rate, at 429.4/100,000 population. The rate for Brevard is just above the bottom 25th percentile when compared to other counties in the United States.



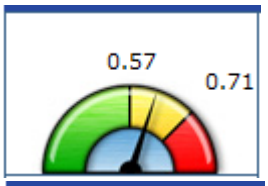
The age-adjusted death rate due to motor vehicle collisions increased in Brevard County from 8.9/100,000 population in 2009 to 12.8/100,000 population in 2010. This is above the Healthy People 2020 target of 12.4/100,000 population. Death rates due to motor vehicle collisions were highest among males (14.9/100,000) and Blacks (13.5/100,000). Increased use of safety belts and reduction of driving while impaired are two of the most effective means to reduce the risk of serious injury and death from motor vehicle crashes.

Environment

Air Quality

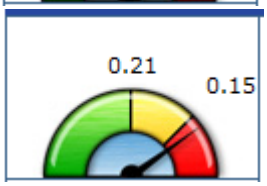


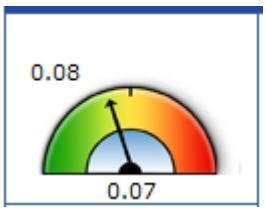
According to the U.S. Environmental Protection Agency, exposure to air pollution is associated with numerous effects on human health. High-risk groups such as the elderly, infants, pregnant women, and sufferers from chronic heart and lung diseases are more susceptible to air pollution. The American Lung Association assigns grades (A-F) to counties (A=1; B=2; C=3; D=4; F=5) based on the average annual number of days that the ozone level exceeded the U.S. standard during the three year measuring period. In Brevard County, the annual ozone air quality index for 2008-2010 was 2 (Grade B). This was an improvement from 2006-2008 when the ozone index was 3 (Grade C).



Built Environment

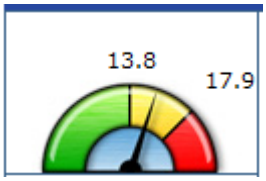
Too many fast food restaurants and too few grocery stores are often cited as barriers to maintaining a healthy lifestyle. Brevard County is in the 25th-50th percentile nationally for fast food restaurants (0.64/1,000) and the bottom 25th percentile for grocery stores (0.13/1,000). According to the U.S. Department of Agriculture, the rates for both indicators have remained stable since 2007.



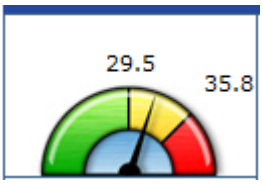


Engaging in an active lifestyle can reduce the risk of many serious conditions including obesity, heart disease, diabetes, and high blood pressure. There are 0.09 recreation and fitness facilities per 1,000 population in Brevard County. When compared to counties within the U.S., Brevard is in the top 50th percentile for this indicator.

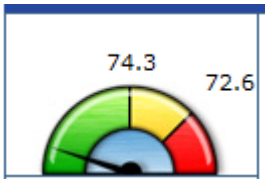
Social Environment



All types of abuse and neglect have long lasting effects throughout life, damaging a child's sense of self, ability to have healthy relationships, and ability to function at home, at work, and at school. Brevard County is in the 25th-50th percentile for child abuse for children aged 5-11 years. The Florida Department of Children and Families reported the child abuse rate decreased from 16.2 cases/1,000 children in 2009, to 15.3 cases/1,000 children in 2010.

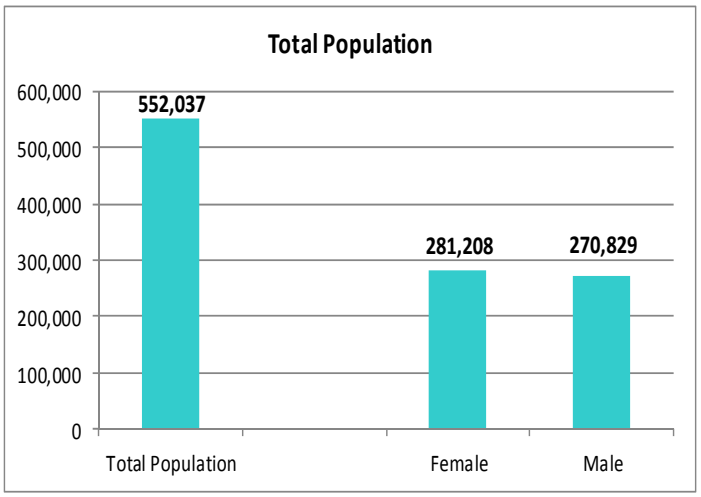


Adults and children in single-parent households are at a higher risk for adverse emotional and behavioral health effects, as well as poverty when compared to families with both parents present. According to the U.S. Census, 30.2 percent of Brevard children were living in single-parent households in 2006-2010. Brevard County is the 25th-50th percentile for this indicator when compared to other counties in the nation.

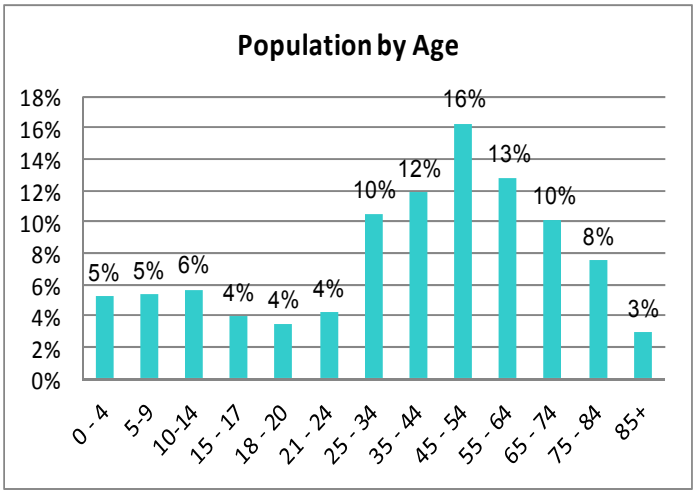


The percentage of voter turnout is an indicator used to measure citizens' involvement and interest in who represents them in the political system. In Brevard County, 82.5 percent of those registered voted in the 2008 presidential election. This was up from 78.7 percent in 2004. Brevard County is in the top 50th percentile for voter turnout when compared to other counties in the U.S.

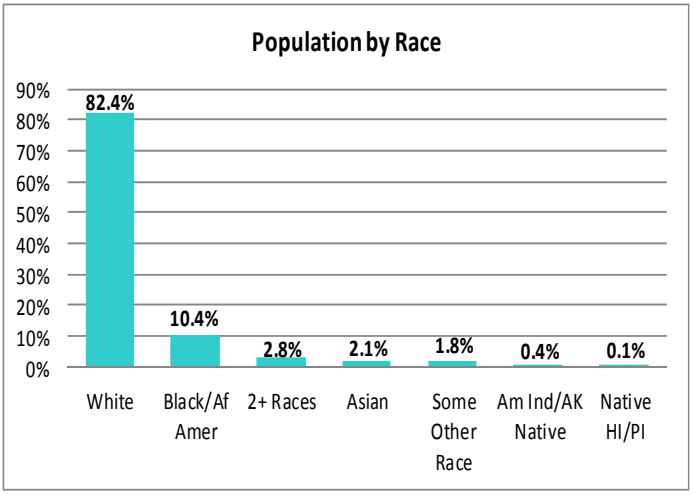
1b.
Demographics of Brevard County



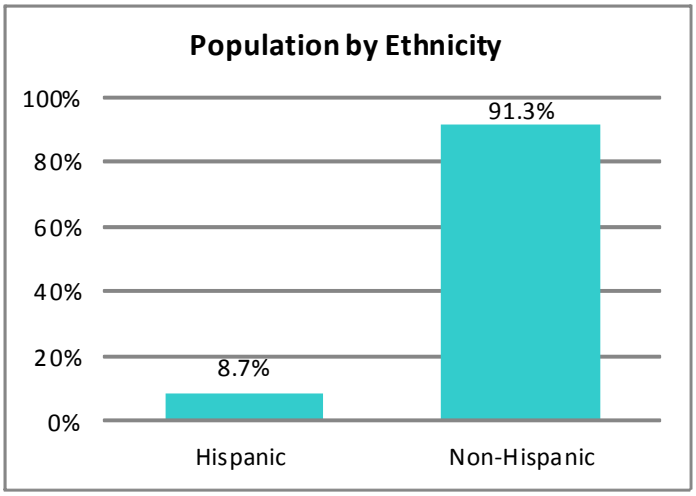
In 2012, data from Claritas estimated that there are 552,037 people living in Brevard. Of these, 50.9 percent are female and 49.1 percent are male.



One in five Brevard residents is 65 years or older. Adults 45-54 years account for 16.3 percent of the population; 26.5 percent are 21-44 years; 7.5 percent are youth ages 15-20 years; 11.1 percent are 5-14 years and 5.3 percent are 5 years and younger.



The White population accounts for 82.4 percent of the total population. Ten percent of residents are Black/African American and 7.2 percent of the population belong to other races. The percentage of Black residents has increased 18 percent over the past six years.



Although Hispanic residents represent only 8.7 percent of the total population in Brevard, the percentage of Hispanics has increased 32 percent from 2005-2010.

1c.
Existing Health Care Facilities and Resources in the Community

Hospitals	Description
Parrish Medical Center	A public, not-for-profit acute care hospital with 210 beds and emergency department. Programs include level 1 adult cardiovascular services and primary stroke center.
Cape Canaveral Hospital	A public, not-for-profit acute care hospital with 150 beds and 21-bed level II Emergency Department. Programs include level 1 adult cardiovascular services and primary stroke center.
Holmes Regional Medical Center	A public, not-for-profit tertiary referral hospital with 504 acute care beds, 10 level 2 neonatal intensive care beds and the only state-accredited level II Trauma Center. Programs include level 2 adult cardiovascular services and primary stroke center. Special services include adult open heart surgery.
Palm Bay Hospital	A public, not-for-profit acute care hospital with 152 beds and 22-bed emergency department. Programs include primary stroke center.
Viera Hospital	A public, not-for-profit acute care hospital with 84 beds, 12 all-private observational beds, and emergency department.
Wuesthoff Medical Center-Rockledge	For-profit hospital with 264 acute care beds, 24 adult psychiatric beds, 10 Level 2 neonatal intensive care beds, and emergency department. Programs include level 2 adult cardiovascular services and primary stroke center. Special services include adult open heart surgery. This hospital serves as a Baker Act receiving center.
Wuesthoff Medical Center-Melbourne	For-profit hospital with 119 acute care beds and emergency department. Programs include level 1 adult cardiovascular services and primary stroke center.

Primary Care	Description
Brevard Health Alliance	Brevard's only Federally Qualified Health Center offers extensive primary care services through six locations and one mobile unit
Brevard County Health Department	Offers family planning, WIC, primary care, dental care, sexually transmitted disease services, TB testing, immunizations, and comprehensive child health clinic at three locations throughout Brevard County
Space Coast Volunteers in Medicine	Free medical, chiropractic and dental services
Veteran's Clinic	Viera Outpatient Clinic offers primary and specialty care to Veterans in Brevard County

Specialty Care	Description
Circles of Care	Not-for-profit community-based corporation providing comprehensive behavioral health care services in Brevard County
Devereux Florida Treatment Network	Offers comprehensive programs in the areas of behavioral health, intellectual and developmental disabilities, and child welfare.

A detailed listing of services for non-profit hospitals and other facilities can be found in Appendix A.

1d.
How the Health Data was Obtained

The data for the Community Health Needs Assessment was gathered using the *Healthy Measures for East Central Florida* online Health Community Network (HCN). This customizable web-based community dashboard, designed by Healthy Communities Institute (HCI), delivers access to high-quality data and decision support. The HCN provides health indicator tracking, best practice sharing and community development to help improve the health and environmental sustainability of communities in East Central Florida.

Using *Healthy Measures* the Health Council collected secondary data by county to define the demographic composition of the community and determine the overall health status of residents living in East Central Florida. Data from the U.S. 2010 Census was used to create a demographic profile for each county. The health assessment included county-level indicators for mortality, morbidity, years potential life lost, access to care issues, behavioral risk factors, health screenings, immunizations, maternal and child health, and health conditions. Over 100 indicators were collected and analyzed for each hospital report. Data were provided by race/ethnicity and age when available. Zip code level data was provided for preterm and low birth weight infants.

The health indicators traditionally used to assess community health status present some limitations when applied to assessing the health of children and adolescents. Survey data can be added to provide a more comprehensive assessment. Additional data was collected from Florida Community Health Assessment Resource Tool Set (CHARTS) and the Florida Youth Substance Abuse Survey to supplement health status data on East Central Florida youth.

Indicators for the social determinants of health were also gathered from *Healthy Measures*. These define the community conditions in which people are born, live, work and play. A review of these indicators can help identify inequities that can affect health status.

The data sources used for the CHNA included: Florida Risk Factor Surveillance System (BRFSS); U.S. Census Bureau, U.S. Census American Community Survey; Florida Department of Health, Office of Planning, Evaluation & Data Analysis; County Health Rankings; Florida Department of Health, Bureau of Vital Statistics; University of Miami (FL) Medical School; Florida Cancer Data System, Bureau of Epidemiology; Florida Youth Tobacco Survey; Florida Youth Substance Abuse Survey; U.S. Bureau of Labor Statistics; U.S. Department of Agriculture – Food Environment Atlas; Florida Department of Education; National Center for Educational Statistics; American Lung Association; AIRNow; U.S. Environmental Protection Agency; Florida Department of Law

Enforcement; Florida Department of Children and Families; Florida Department Of Health, Bureau of STD Prevention and Control; Florida Department of Highway Safety and Motor Vehicles; Florida Department of Juvenile Justice; Claritas; and Healthy People 2020.

1e.
The Health Needs of the Community

As previously stated, the data for the Community Health Needs Assessment was gathered using the *Healthy Measures for East Central Florida* online Health Community Network (HCN). The health assessment included county-level indicators for mortality, morbidity, years potential life lost, access to care issues, behavioral risk factors, health screenings, immunizations, maternal and child health, and health conditions. Over 100 indicators were collected and analyzed for each hospital report. Data were provided by race/ethnicity and age when available. Zip code level data was provided for preterm births and low birth weight.

Health indicators were ranked according to the magnitude of the problem, as measured in terms of the percent of the population with the health problem; the severity of the problem in terms of mortality, morbidity, hospitalizations, economic loss or community impact; and the predicted effectiveness of the intervention in preventing the health problem. The top five indicators for each health category are presented in Section 1e. of the CHNA. Data for all health indicators can be found in Appendix B. The detailed explanation on the process use to prioritize health needs can be found in Section 1g.

Mortality– Age Adjusted Death Rate (AADR)

Indicator	Rank	Rate or Percent	Healthy People 2020 Target	Target Status	Target Minus the Current Rate	Trend
Cancer (AADR)	1	171.9/100,000	160.6/100,000	Not Met	-11.3/100,000	↑
Coronary Heart Disease (AADR)	2	101.5/100,000	100.8/100,000	Not Met	-0.7/100,000	↓
Lung Cancer (AADR)	3	52.5/100,000	45.5/100,000	Not Met	-7/100,000	↑
Cerebrovascular Disease (Stroke) (AADR)	4	30.2/100,000	33.8/100,000	Not Met	3.6/100,000	↑
Breast Cancer (AADR)	5	21.9/100,000	20.6/100,000	Not Met	-1.3/100,000	↑

Cancer and coronary heart disease are the leading causes of death for Brevard County residents. Cancers of the lung and breast account for the greatest number of cancer deaths annually. Heart disease and stroke are among the most costly to treat but also the most preventable.

Years Potential Life Lost (YPLL)

Indicator	Rank	Rate or Percent	Healthy People 2020 Target	Target Status	Target Minus the Current Rate	Trend
Major Cardiovascular Disease	1	1,347.9/100,000	N/A	N/A	N/A	↓
Motor Vehicle Crashes	2	452.9/100,000	N/A	N/A	N/A	↑
Suicide By Other & Unspecified Means	3	250.0/100,000	N/A	N/A	N/A	↓
Diabetes Mellitus	4	213.4/100,000	N/A	N/A	N/A	↓
Breast Cancer	5	208.6/100,000	N/A	N/A	N/A	↑

YPLL is an estimate of premature mortality that is defined as the number of years of life lost among persons who die before a predetermined age. Seventy-five years of age was used in the calculation for the indicators above. YPLL is very useful measure when prioritizing resources to address public health needs and services. Although most deaths occur at advanced ages, more years of potential life are lost for deaths among younger age groups, especially for certain diseases (HIV/AIDS), many external causes (accidents, suicides, homicides), and early life stage conditions, such as congenital anomalies. For this reason, suicide and motor vehicle crashes are among the top five causes for years of potential life lost in Brevard County.

Morbidity

Indicator	Rank	Rate or Percent	Healthy People 2020 Target	Target Status	Target Minus the Current Rate	Trend
Adults with Diabetes	1	11,900/100,000	N/A	N/A	N/A	↓
Adults with Asthma	2	9,400/100,000	N/A	N/A	N/A	↑
Chlamydia	3	291.3/100,000	N/A	N/A	N/A	↑
Prostate Cancer (Incidence)	4	132.2/100,000	N/A	N/A	N/A	↓
Breast Cancer (Incidence)	5	117.8/100,000	41/100,000	Not Met	-136.8/100,000	↑

Morbidity refers to the incidence of diseases, injuries, and disabilities in a population. The major methods for collecting these data are through surveillance studies and surveys. As these are more costly to conduct, there are limited health data available. In Brevard County, diabetes in the number one disease among adults. The Healthy People 2020 target is to reduce the annual number of new diabetes cases to 7.2/1,000 population. Serious complications from Chlamydia can cause irreversible damage, including infertility. Healthy People 2020 has set targets for specific population groups. The rate of asthma among adults increased from 4,200/100,000 in 2007 to 9,400/100,000 in 2009. Brevard residents living with cancer account for two of the top five causes of morbidity in the county.

Health Screenings

Indicator	Rate or Percent	Healthy People 2020 Target	Target Status	Target Minus the Current Rate	Trend	US Preventive Services Task Force Grades/ Recommendations
Health Screenings						
Mammogram History	61.9%	81.1%	Not Met	-19.2%	↓	**B/**Women 50-74 years
Colonoscopy over 50 within past 5	59.3%	70.5%	Not Met	-11.2%	=	**A**/Adults 50-75 years
PAP Test History	55.5%	93.0%	Not Met	-37.5%	↓	**A**/Sexually active women with a cervix
PSA men over 50 in past two years	79.4%	N/A	N/A	N/A	↑	**D**/Men in the general public
Colon Cancer Screening (Blood Stool)	14.9%	N/A	N/A	N/A	↓	**A**/Adults 50-75 years

Promoting evidenced-based cancer screenings decreases the incidence and mortality rates among community residents. For women, mammogram and PAP screening rates decreased from 2007 to 2010. The Healthy People 2020 targets for both indicators have not been met. Breast Cancer is fifth leading cause of death in Brevard.

The percentage of adults over 50 years who have been screened for colorectal cancer remained stable over the past 3 years. Only 14.9 percent of adults reported having a blood stool test within the past year. This is down from 29.3 percent in 2007.

Maternal and Child Health

Indicator	Rate or Percent	Healthy People 2020 Target	Target Status	Target Minus the Current Rate	Trend
Infant Mortality					
Infant deaths (0-365 days)	6.5/1,000	6.0/1,000	Not met	-0.5/1,000	↓
Sudden Infant Death Syndrome (SIDS)	0.19/1,000	0.55/1,000	Not met	0.36/1,000	↑
Birth Outcomes					
Preterm births	12.2%	11.4%	Not met	-0.8%	↑
Low birth weight (< 2500 grams)	7.5%	7.8%	Met	0.3%	↓
Pregnancy					
Mothers who received 1st trimester prenatal care	83.8%	77.9%	Met	5.9%	↑
Births to mothers Ages 15-19 years	2.8%	N/A	N/A	N/A	↓

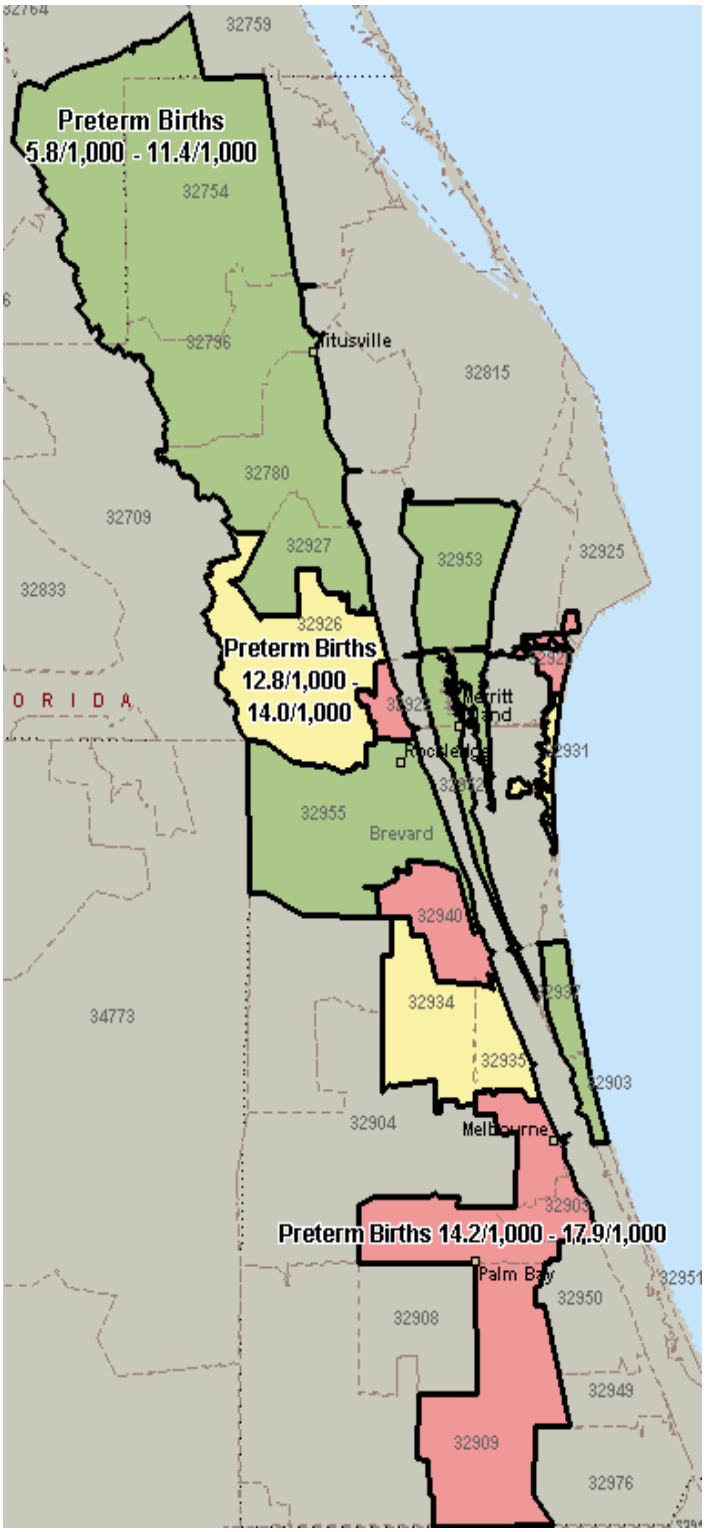
The well-being of mothers, infants, and children determines the health of the next generation and

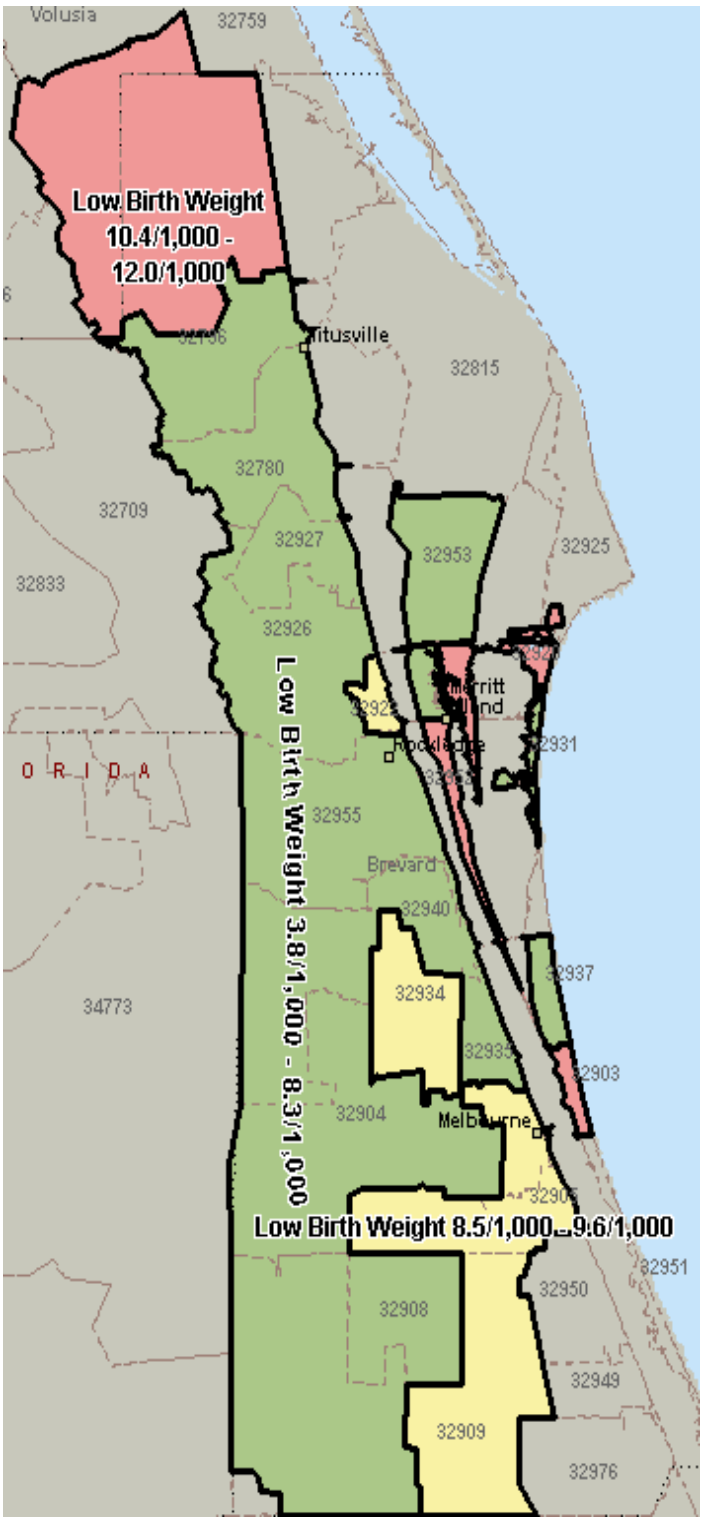
can help predict future public health issues for families, communities, and the health care system. The infant mortality rate in Brevard is close to the Healthy People 2020 target and moving in the right direction. Deaths due to SIDS should be interpreted with caution as the actual number of deaths is very small. In 2008-2010 there were 3 SIDS deaths in the county.

Preterm births and babies born with low birth weight are at increased risk for serious health problems as newborns, lasting disabilities and even death. Pre-conceptual and early prenatal care can provide optimal birth outcomes. Targeting populations at highest risk for poor birth outcomes will improve the health of the mother and baby. The table below depicts the rates for preterm and low birth weigh births by zip code for Brevard County.

Preterm Births by Zip Code Healthy People 2020 Target = 11.4/1,000				**Low Birth Weight by Zip Code** Healthy People 2020 Target = 7.8/1,000			
City	**Zip Code**	**Rate**	**Code**	**City**	**Zip Code**	**Rate**	**Code**
Indiatlantic	32903	5.8	Green	Merritt Island	32953	3.8	Green
Satellite Beach	32937	7.4	Green	Rockledge	32955	5.1	Green
Merritt Island	32953	7.7	Green	Satellite Beach	32937	5.8	Green
Merritt Island	32952	8.7	Green	Melbourne	32904	5.9	Green
Rockledge	32955	8.8	Green	Melbourne	32935	6.1	Green
Mims	32754	9.1	Green	Cocoa	32927	6.6	Green
Titusville	32796	9.5	Green	Melbourne	32940	6.6	Green
Titusville	32780	9.6	Green	Titusville	32796	6.7	Green
Cocoa	32927	10	Green	Palm Bay	32908	7.1	Green
Palm Bay	32908	10.3	Green	Cocoa	32926	7.4	Green
Melbourne	32904	11.4	Green	Titusville	32780	7.8	Green
Cocoa	32926	12.1	Yellow	Cocoa Beach	32931	8.3	Green
Melbourne	32934	12.8	Yellow	Melbourne	32901	8.5	Yellow
Cocoa Beach	32931	13.1	Yellow	Melbourne	32934	8.8	Yellow
Melbourne	32935	14	Yellow	Palm Bay	32905	8.9	Yellow
Palm Bay	32907	14.2	Red	Palm Bay	32909	9.2	Yellow
Palm Bay	32905	14.3	Red	Palm Bay	32907	9.4	Yellow
Palm Bay	32909	14.5	Red	Cocoa	32922	9.6	Yellow
Melbourne	32940	15	Red	Merritt Island	32952	10.4	Red
Cape Canaveral	32920	16	Red	Indiatlantic	32903	10.8	Red
Cocoa	32922	17.3	Red	Mims	32754	11.1	Red
Melbourne	32901	17.9	Red	Cape Canaveral	32920	12	Red

Preterm and low birth weight rates were mapped to provide additional information for targeting specific populations with interventions to improve birth outcomes. The zip codes in the red zone indicate higher rates for both indicators.





Health Risk Behaviors

Indicator	Rate or Percent	Healthy People 2020 Target	Target Status	Target Minus the Current Rate	Trend	US Preventive Services Task Force Grades/ Recommendations
Adult Health Risk Behaviors						
Adults who smoke	21.3%	12.0%	Not Met	-9.30%	=	**A**/All Adult Patients
Adults who are sedentary	23.3%	32.6%	Met	9.30%	=	**C**/General Population in Primary Care Setting with Cardiovascular risk factors
Adults who binge drink	14.4%	24.3%	Met	9.90%	=	**B/**Adults in Primary Care Setting
Adult fruit and vegetable consumption	30.7%	N/A	N/A	N/A	↑	**C**/General Population in Primary Care Setting with Cardiovascular risk factors
Teen Health Risk Behaviors						
Teens who use marijuana	19.6%	6.0%	Not Met	-13.60%	↑	Insufficient Evidence for Recommendation
Teens who binge drink	18.0%	8.5%	Not Met	-9.50%	↓	Insufficient Evidence for Recommendation
Teens who smoke	14.0%	16%	Met	2%	↓	Insufficient Evidence for Recommendation
Teens who use alcohol	36.9%	N/A	N/A	N/A	↓	Insufficient Evidence for Recommendation
Teens without sufficient physical activity	36.5%	N/A	N/A	N/A	↓	**C**/General Population in Primary Care Setting with Cardiovascular risk factors

Tobacco is the agent most responsible for avoidable illness and death. Nationally, one-third of tobacco users die prematurely. In Brevard, the percentage of adults who smoke is almost twice as high as the Healthy People 2020 target. Although teens have met the target for smoking, the percentage using marijuana is more than triple the target rate. The percent of adolescent binge drinkers is double that of the Healthy People 2020 target. The effects of substance abuse significantly impact social, physical, mental and public health problems.

Close to seventy percent of adults reported that they do not eat five or more fruits and vegetables daily. Conversely, more than seventy-five percent of adults participated in leisure-time physical activities other than their regular job. Sufficient physical activity is important at all ages. Nearly forty percent of teens lack adequate exercise. Eating a healthy balanced diet while participating in moderate physical activity can go a long way to preventing the incidence of chronic disease.

Health Risk Factors

Indicator	Rate or Percent	Healthy People 2020 Target	Target Status	Target Minus the Current Rate	Trend	US Preventive Services Task Force Grades/ Recommendations
Adult Health Risk Factors						
High blood cholesterol prevalence	38%	13.5%	Not Met	-24.5%	=	**A**/Men 35 years & older
High blood pressure prevalence	36.2%	26.9%	Not Met	-9.3%	↑	**A**/Adult 18 years & older
Adults who are obese	30.7%	30.6%	Not Met	-0.1%	=	**B**/All Adult Patients
Adults who are overweight or obese	67.7%	66.1%	Not Met	-1.6%	↑	**B**/All Adult Patients
Child and Adolescents Health Risk Factors						
Teens who are obese	11.1%	16.1%	Met	5.0%	↑	**B**/Children 6 years & older
Low income preschool obesity	8.7%	9.6%	Met	0.9%	N/A	N/A
Teens with Asthma	19.7%	N/A	N/A	N/A	↑	N/A

High cholesterol and blood pressure are major modifiable risk factors for heart disease and stroke. Overweight and obesity status increases the risk for heart disease and many others including Type 2 diabetes, cancer, hypertension, stroke, liver, and gallbladder disease. The Healthy People 2020 targets have not been met for Brevard residents and current rates indicate the trends for high blood pressure and overweight status are getting worse. Heart disease, stroke, and cancer are the leading causes of death in the community. Lifestyle changes such as eating a heart-healthy diet, controlling weight and staying physically active can help control these risk factors.

Data on child and adolescent weight status indicate that Brevard youth have met the targets established by Healthy People 2020. Obese children and teens are at risk for developing the same diseases as seen in the adult population. Additionally, obese youth are more likely than their normal weight peers to be obese in adulthood.

Nationally, asthma in children has increased significantly since 1980. In Brevard County the percentage of teens with asthma increased from 17.7 percent in 2007 to almost 20 percent in 2010.

Health Factors

Indicator	Rate or Percent	Healthy People 2020 Target	Target Status	Target Minus the Current Rate	Trend
Health Factors					
Adults with health insurance	75.8%	100.0%	Not Met	-24.2%	=
Children with health insurance	89.2%	100.0%	Not Met	-10.8%	=
Adults with a usual source of health care	79.3%	83.9%	Not Met	-4.6%	=

Access to timely and appropriate health services is needed for communities to achieve the best health outcomes. Lack of insurance poses financial challenges for the patient as well as the provider. Almost 25 percent of adults were without health insurance in 2010. The percentage of children covered by insurance was higher but still below the target of 100 percent.

Although 75.8 percent of adults did not have insurance, 79.3 percent reported having a usual source of health care. Establishing a relationship with a primary care provider increases the likelihood that the patient will receive appropriate care. Patients benefit by receiving preventive services that can detect a disease or condition in an early and more treatable stage.

1f.
Primary and Chronic Disease Needs and Other Health Issues of Uninsured, Low-income, and Minority Populations

Black/African Americans account for 10.4 percent of the total population in Brevard. In 2010, Hispanics made up 8.7 percent of the ethnic diversity in the county. It is estimated that 24.2 percent of adults aged 18-64 years are without health insurance. Just over 14 percent of Brevard children are living below poverty. This is higher than families living in poverty at 7.2 percent and elderly at 6.9 percent.

As Brevard is not as diverse as other counties in Florida, health data available by race and ethnicity is limited. For this reason, some values may be statistically unreliable and should be interpreted with caution. Additionally, county-level health data is not available by insurance status or income level. Primary and chronic disease issues have been grouped and ranked to identify the most critical health concerns for minority populations in the county. Data sources for all indicators are listed in section 1d and can be found by indicator in Appendix B.

Mortality

Black Population

Indicator	Rank	Rate or Percent	Healthy People 2020 Target	Target	Target Minus the Current Rate	Trend
Cancer (AADR)	1	157.5/100,000	160.6/100,000	Met	3.1/100,000	↑
Coronary Heart Disease (AADR)	2	126.6/100,000	100.8/100,000	Not Met	-25.8/100,000	↓
Cerebrovascular Disease (Stroke)	3	61/100,000	33.8/100,000	Not Met	-27.2/100,000	↑
Unintentional Injuries (AADR)	4	42.2/100,000	41.1/100,000	Not Met	-1.1/100,000	↑
Diabetes (AADR)	5	41.2/100,000	16.5/100,000	Not Met	-24.7/100,000	↑

Cancer and heart disease are the top two leading causes of death among Blacks living in Brevard. As previously stated, heart disease and stroke are the most costly but also the most preventable diseases. Unintentional injuries, the fourth leading cause of death for this population, includes motor vehicle collisions, poisonings, and falls. Diabetes can have harmful effects on most of the human organ systems. Persons with diabetes are also at risk for ischemic heart disease, neuropathy, and stroke.

Mortality

Hispanic Population

Indicator	Rank	Rate or Percent	Healthy Peo-ple 2020 Target	Target	Target Minus the Current	Trend
Cancer (AADR)	1	91.3/100,000	160.6/100,000	Met	68.7/100,000	↓
Coronary Heart Disease (AADR)	2	76.6/100,000	100.8/100,000	Met	24.2/100,000	↓
Unintentional Injuries (AADR)	3	41.1/100,000	41.1/100,000	Met	0	↓
Chronic Lower Respiratory Disease (CLRD)	4	35.2/100,000	98.5/100,000	Met	63.3/100,000	↑
Cerebrovascular Disease (Stroke) (AADR)	5	27.3/100,000	16.5/100,000	Not Met	-10.8/100,000	↑

Cancer and heart disease are the leading causes of death among Hispanic residents in the county. Unintentional injuries, which included motor vehicle collisions, poisonings, and falls, ranked third in the causes of death for this population. CLRD, the fourth leading cause of death, is a preventable and treatable disease typically a result of exposure to cigarette smoke. Both heart disease and stroke are the most costly yet most preventable conditions.

Years Potential Life Lost

Black Population

Indicator	Rank	Rate or Percent	Healthy People 2020 Target	Target	Target Minus the Current Rate	Trend from 2009
Cancer	1	1,625.3/100,000	N/A	N/A	N/A	↑
Cardiovascular Disease	2	1,555.3/100,000	N/A	N/A	N/A	↑
Motor Vehicle Collisions	3	438.8/100,000	N/A	N/A	N/A	↑
Human immunodeficiency virus (HIV)	4	330.1/100,000	N/A	N/A	N/A	↓
Cerebrovascular Disease (Stroke)	5	253.8/100,000	N/A	N/A	N/A	↑

YPLL is an estimate of premature mortality that is defined as the number of years of life lost among persons who die before a predetermined age. Seventy-five years of age was used in the calculation for the indicators above. YPLL is very useful measure when prioritizing resources to address public health needs and services. Although most deaths occur at advanced ages, more years of potential life are lost for deaths among younger age groups, especially for certain diseases (HIV/AIDS), many external causes (accidents, suicides, homicides), and early life stage conditions, such as congenital anomalies. For this reason, suicide and motor vehicle crashes are commonly among the top five causes for years of potential life lost. Although HIV is ranked as the ninth cause of deaths for the Black population in Brevard, it is the fourth leading cause for premature death.

Years Potential Life Lost
Hispanic Population

Indicator	Rank	Rate or Percent	Healthy People 2020 Target	Target	Target Minus the Current Rate	Trend from 2009
Cancer	1	693.1/100,000	N/A	N/A	N/A	↑
Cardiovascular Disease	2	669.3/100,000	N/A	N/A	N/A	↑
Motor Vehicle Collisions	3	369.2/100,000	N/A	N/A	N/A	↑
Human immunodeficiency virus (HIV)	4	192.9/100,000	N/A	N/A	N/A	↑
Suicide By Other & Unspecified Means	5	128.6/100,000	N/A	N/A	N/A	↓

HIV among the Hispanic population is ranked as the twelfth cause of death, yet is the fourth leading cause for premature death.

Maternal and Child Health
Black Population

Indicator	Rate or Percent	Healthy People 2020 Target	Target Status	Target Minus the Current Rate	Trend
Infant Mortality					
Infant mortality	15.1/1,000	6.0/1,000	Not Met	-9.1/1,000	↓
Birth Outcomes					
Preterm births	16.9%	11.4%	Not Met	-5.5%	↓
Babies with low birth weight	12.4%	7.8%	Not Met	-4.6%	↓
Pregnancy					
Mothers who received early prenatal care	75.3%	77.9%	Not Met	-2.6%	↑
Births to Mothers Ages 15-19 years	4.0%	N/A	N/A	N/A	↓

The well-being of mothers, infants, and children determines the health of the next generation and can help predict future public health issues for families, communities, and the health care system.

The infant mortality rate continues to be one of the most widely used indicators of overall health status in the community. The rate among the Black population is three times the rate for Whites.

Preterm births and babies born with low birth weight are at increased risk for serious health problems as newborns, lasting disabilities and even death. Pre-conceptual and early prenatal care can provide optimal birth outcomes. Targeting populations at highest risk for poor birth outcomes will improve the health of the mother and baby. Although the targets have not been met, an analysis of rates from previous years indicates that rates for all measures are moving in the right direction.

Maternal and Child Health

Hispanic Population

Indicator	Rate or Percent	Healthy People 2020 Target	Target Status	Target Minus the Current Rate	Trend
Infant Mortality					
Infant mortality	3.8/1,000	6.0/1,000	Met	2.2/1,000	↓
Birth Outcomes					
Preterm births	14.4%	11.4%	Not Met	-3.0%	↓
Babies with low birth weight	8.1%	7.8%	Not Met	0.3%	=
Pregnancy					
Mothers who received early prenatal care	83.8%	77.9%	Met	5.9%	↑
Births to Mothers Ages 15-19 years	3.4%	N/A	N/A	N/A	↓

Rates and percentages for maternal and child health indicators among the Hispanic population are very similar to those of the general population. The small values may be statistically unstable and should be interpreted with caution. Interventions focused on reducing babies born preterm or with low birth weight will improve overall outcomes.

Health Risk Behaviors

Black Population

Indicator	Rate or Percent	Healthy People 2020 Target	Target Status	Target Minus the Current Rate	Trend	US Preventive Services Task Force Grades/ Recommendations
Adults who are sedentary	35.4%	32.6%	Not Met	-2.8%	N/A	**C**/General Population in Primary Care Setting with Cardiovascular risk factors
Adult fruit and vegetable consumption	36.5%	N/A	N/A	N/A	N/A	**C**/General Population in Primary Care Setting with Cardiovascular risk factors
Adults who did not visit a dentist due to cost	38.7%	N/A	N/A	N/A	N/A	No new evidence regarding the role of the primary care clinician in counseling for dental services

The health indicators in the table above were gathered from the Behavioral Risk Factor Surveillance Study. Limited data is available for minority populations in Brevard due to the small sample size of survey respondents. Eating a healthy, balanced diet while participating in moderate physical activity can go a long way to preventing the incidence of chronic disease. People who have the least access to preventive services and dental treatment have greater rates of oral diseases.

1g.
The Process of Identifying and Prioritizing Community Health Needs

A comprehensive analysis of health indicators provides an increased understanding of the community's health problems. Prioritizing health issues ensures that resources allocated to address community health needs are used effectively and efficiently in an effort to achieve optimal outcomes. To accomplish the task of prioritizing health needs, the Assessment Protocol for Excellence in Public Health (APEXPH) modified Hanlon Method was used to categorize and rank health indicators to identify key needs in the community. This method considered three criteria: the magnitude of the problem, as measured in terms of the percent of the population with the health problem; the severity of the problem in terms of mortality, morbidity, hospitalizations, economic loss or community impact; and the predicted effectiveness of the intervention in preventing the health problem.

In addition to the above mentioned criteria, health indicator rates were compared to national benchmark targets (where available) to define the gap between the current and potential health of the community. Indicator rates were also trended to highlight improvement or decline from the previous time measurement. The five-step process used for prioritizing health indicators is described as follows:

Step 1: Rates/percentages for over 50 health indicators were collected from the *Healthy Measures* HCN to develop a comprehensive community health profile for each county served by the hospital facility.

Step 2: The health indicators were grouped into the following categories: mortality, years potential life lost, morbidity, maternal and child health, screening/immunizations, health behaviors, health conditions, and health factors. Health indicators for each group were ranked according to the size of the health problem, in terms of the rate/percent of the population with the health problem. The top five ranked health problems were identified for each category.

Step 3: The top ranked health indicator rates were compared to the Healthy People 2020 target goal (when available) to determine the status of goal attainment (met or not met). The difference between the current rate and the target rate was calculated to identify indicators furthest from meeting the nationally established goal.

Step 4: Trending of health indicators was included to identify emerging needs as well as highlight areas where the community is becoming healthier. A red arrow (↑) was used to indicate a trend going in the wrong direction, while a green arrow (↓) was used to indicate trends going the right direction. The direction of trending arrows should be interpreted in the context of the health indicator. For example, mammography history, if there was a decrease in the

percentage of women having a mammogram, a red arrow pointing down (↓) was used. Conversely, if the same indicator showed the percentage increasing, a green arrow pointing up (↑) was used.

Step 5: Grades and recommendations from the U.S. Preventive Services Task Force (USPSTF) to assess the merits of preventive measures, including screening tests, counseling, immunizations, and preventive medications were included where appropriate. Grades and recommendations are defined in Appendix C.

1h.
The Process for Consulting with Persons Representing the Community's Interests

Conducting interviews is a powerful method for collecting community data. Interviews facilitated by an unbiased entity can uncover information that people may be reluctant to share in a more public setting. These data reveal the thoughts and perceptions of key stakeholders and provide a clear understanding of the pressing issues facing the community.

The Montana State Library Community Stakeholder template was used as a guide to identify key informants by county. The Health Council worked with hospital staff to ensure the stakeholder list was inclusive and representative of the community. A minimum of twenty interviews were conducted in the county in which the hospital is located. Phone interviews were the primary method for obtaining the opinions of key stakeholders with a limited number of interviews conducted in a small group setting.

The basic elements of community health, as defined by the Prevention Institute, were used to develop the foundation for the interview questionnaire.

Equitable Opportunities: racial justice, jobs, and education
Place: parks and open space, transportation, housing, air, water, and safety
People: social networks, and willingness to act for the common good
Health Care Services: preventive, treatment, access, cultural competency, and emergency response

The members of the North Brevard Community Health Board were interviewed to share their views on community health as it pertains to various groups within the population, describe existing services in place to address health needs, and identify gaps and opportunities where services could be offered to improve the current system of care. The overall findings mirrored the health needs identified by the data. The report that follows is a summary of the comments received on the prevalent issues and trends as they relate to community health. The key stakeholder questionnaire can be found in Appendix E.

1. **Considering the overall look at what it takes to have a healthy community, what do you view as the major issues facing us?**

    - Transportation and access to the Space Coast Area Transit (SCAT)
    - Individuals without health insurance due to job loss
    - Foreclosures and short sales - affordable homes are available, but not at the local wage level

2. **Looking only at health care services (preventive, treatment, access, cultural competency, emergency response), what do you view as the major issues facing us?**

    - Aging population
    - Residents with multiple chronic conditions/obesity
    - Growing economically disadvantaged population
    - Delayed treatment
    - Lack of preventive services—medical, dental, mental and behavioral health
    - High level of drug and alcohol abuse
    - Lack medical management of mental issues
    - People lack awareness of where to access services
    - Health literacy is low
    - Availability and affordability of drugs

3. **Who in our community does a good job of promoting health?**

    - Parrish Medical Center
    - Brevard County Health Department immunizations and WIC
    - YMCA
    - Parks and recreation department
    - Community senior centers with meals and speakers
    - Church senior programs (Prime Timers)
    - Greater Titusville Renaissance

4. **Who in our community does not promote good health?**

    - Presence of a lot of fast food restaurants
    - Small retail groceries do not offer fresh produce
    - Few employers offering wellness programs
    - No early dental services in the schools
    - Not enough proactive school nutrition improvement efforts

5. Are there gaps where you would like to see services offered in your communities?

- Pediatric and adult oncology
- Limited mental health support
- Many residents lack personal responsibility for health
- Community ranks as a primary care medically underserved area
- Education doesn't promote physical fitness
- Lack of sidewalks and crossing guards

6. If you were in charge of improving health in our community, what would you do first?

- Encourage the opening of good healthy restaurants
- Offer after-school team sports with student transportation to home
- Better Internet access
- Downtown markets with fresh food and restaurants in towns that take this fresh produce and add it to their menu
- Central care coordination (PCMH)

Organization Affiliation of Key Stakeholders	
211 Brevard	Publix
Aging Matters in Brevard (Formerly the Community Services Council)	ROCK - Reduce Obesity in Central Florida Kids
American Heart Association	Second Harvest Food Bank
Boeing Corporation	Space Coast Economic Development Council
Brevard Health Alliance	Space Coast Health Foundation
Brevard Workforce	The City of Titusville
Brevard Parks and Recreation	The Happenings - Port St. John Newspaper
Brevard Department of Health	The Salvation Army
Florida Institute of Technology	Titusville Economic Development Council
Indian River City United Methodist Church	Titusville Chamber of Commerce
North Brevard Coalition - Representing 104 agencies	Titusville community representatives - Interested individuals
North Brevard Charities	United Way - Funding and representing 43 agencies
North Brevard Medical Support	Upper Mohawk Inc. - (A private company)
Port St. John Advisory Committee - 10 representatives of the Port St. John Community	VITAS Hospice

1h.
Information Gaps that Limited the Facility's Ability to Assess all of the Community's Health Needs

Limitations and inconsistencies in available data can make it challenging to provide a comprehensive community assessment. In local counties there are sometimes gaps in data that do not provide answers to every question. The health indicators traditionally used to assess community health status presented some limitations when assessing the health of the low income and uninsured population. Currently, county-level health data is not available by income level or insurance status. Additionally, available health data for children and adolescents was also limited.

The Community Health Needs Assessment prepared for Parrish Medical Center provides a comprehensive analysis of the health needs in Brevard County, Florida. The assessment includes county-level indicators for mortality, morbidity, years potential life lost, access to care issues, behavioral risk factors, health screenings, immunizations, maternal and child health, and health conditions. The social determinants of health presented in Section 1a describe the community in terms of economics, education, environment, public safety, and transportation. Key stakeholders were interviewed to share their perceptions and insights regarding the pressing health issues facing Brevard residents. Data were provided by race/ethnicity and age when available. Zip code level data was provided for preterm and low birth weight infants. The completed CHNA contains all the information necessary for Parrish Medical Center to begin development of their implementation strategy to address community health needs as defined in this document.

1j.
Other

Described in Part VI of Schedule H Form 990.

The Community Health Needs Assessment was prepared by the Health Council of East Central Florida, Inc. We are a private, non-profit healthcare planning agency providing research, evaluation and program support to improve healthcare delivery and outcomes. The East Central Florida District VII encompasses the four counties of Brevard, Orange, Osceola and Seminole.

2461 West SR 426, Suite 2041
Oviedo, Florida 32708

www.hcecf.org

Contact:

Therry Feroldi, MSHSA
407-977-1610

Appendix A

Detailed list of services for hospitals and other facilities

Brevard County Health Department

Viera Clinic
- Family Planning
  - Annual exams for women
  - Birth control methods and devices (upon request)
  - Education and counseling
  - HIV/AIDS testing, counseling and treatment
  - Pap screenings
  - Pre-conception counseling
  - Pregnancy testing
  - Sexually-transmitted disease diagnosis and treatment
- WIC Services
- Primary Access to Health **(PATH)** program
  - Basic laboratory services
  - Diagnosis, treatment and follow-up care
  - Disease management and education
  - Non-emergency Acute or Chronic health conditions
- Dental Services
- Immunizations
- Sexually Transmitted Disease Services
- TB Testing

Melbourne Clinic
- Family Planning
  - Annual exams for women
  - Birth control methods and devices (upon request)
  - Education and counseling
  - HIV/AIDS testing, counseling and treatment
  - Pap screenings
  - Pre-conception counseling
  - Pregnancy testing
  - Sexually-transmitted disease diagnosis and treatment
- WIC Services
- Dental Services
- Immunizations
- Sexually Transmitted Disease Services
- TB Testing

Titusville Clinic
- Comprehensive Child Health Clinic
  - Health examinations
  - Health and developmental history
  - Oral lead risk assessment
  - Immunizations
  - Height and weight charting
  - WIC Referrals
  - CHCUPs (Child Health Checkup)
- WIC Services
- Dental Services
- Immunizations
- Sexually Transmitted Disease Services
- TB Testing

Brevard Health Alliance

The Brevard Health Alliance, Inc. is Brevard County's only Federally Qualified Health Center. This organization provides extensive primary health care services to Brevard County residents regardless of their ability to pay for those services. By offering services on a sliding fee scale, BHA has provided primary care service, limited dental services, diagnostic services, case management services, medication assistance, and specialty referrals to Brevard County's economically disadvantaged resident since March 2005.

Melbourne Clinic
- Family Practice

Palm Bay Clinic
- Family Practice

Barton Commons Clinic
- Family Practice
- Pediatrics
- Dental

Malabar Pediatric Clinic
- Pediatrics

Mobile Unit
- Family Services

Palm Bay Pediatric Clinic
- Pediatric Services

Titusville Clinic
- Family Practice

Health First

Cape Canaveral HOSPITAL

799 W. Cocoa Beach Causeway
Cocoa Beach, FL
321.799.7111
www.Health-First.org

FACTS

Date opened: July 22, 1962
Status: Non-profit, 501 (c) (03)
Hospital beds: 150 beds
Physicians: more than 200
Medical Specialties: More than 50
Accredited by The Joint Commission

General Services

Health First Cape Canaveral Hospital was the first and only hospital to serve the beach and barrier island communities in Central Brevard County and is a multi-service hospital offering a wide-spectrum of outpatient and inpatient services including:

- Allergy and Immunology
- Anesthesiology
- Cardiology Services
- Cardiac Electrophysiology
- Cancer Care Unit
- Critical Care (ICU & eICU)
- CT
- Diagnostic & Invasive Cath Lab
- Dentistry
- Dermatology
- Digital Diagnostic Radiology
- Ear-Nose-Throat (ENT) Medicine
- Emergency Medicine
- Endocrinology
- Family Practice
- Gastroenterology
- General Surgery
- Infectious Disease
- Internal Medicine
- Labor/Birth Unit
- Laboratory
- Lithotripsy
- Mammography
- Medical Rehabilitation
- MRI
- Nephrology
- Nuclear Medicine
- Neurology
- OB/GYN
- Oral and Maxillo-Facial Surgery
- Oncology/Hematology
- Ophthalmology
- Orthopedics
- PACS (Picture Archive Computer System)
- Pain Management
- Pathology
- Physical & Speech Therapy
- Plastic Surgery
- Podiatry
- Psychiatry and Psychology
- Pulmonology
- Radiology
- Rheumatology
- Sleep Lab
- Ultrasound
- Urology
- Vascular Surgery
- Health First VitalWatch eICU
- Women's Care Unit

Awards & Recognition

- Accredited by The Joint Commission
- Accredited by the American College of Radiology in Nuclear Medicine, Mammography, Stereotactic Breast Biopsy, MRI, and CT
- Certified by the College of American Pathologists
- Recipient of the American Heart Association's "Get with the Guidelines — Stroke" Gold Plus Performance Achievement Award
- Jean Byers Memorial Award for Excellence in Cancer Registration
- Accredited by ICANEL (International Commission Accreditation of Echo Laboratories)

Special Services & Extras

- Six-story Medical Plaza Building adjacent to the hospital with physician offices, pre-operative testing, and education, patient registration, and a Health Resource Center for the community, Conference Center with meeting rooms for public lectures and events, Laboratory Services, an Outpatient Surgery Center, and valet parking services

- Extensive Digital Diagnostic Radiology Services, including Digital Mammography, X-ray, MRI & CT, Ultrasound, Nuclear Medicine, Teleradiology, and interventional Radiology
- Inpatient Dialysis Unit
- First hospital in the southeastern United States to receive the World Health Organization/UNICEF Baby-Friendly Hospital™ designation.
- Encourage 24-hour family visitation in our Intensive Care Units (ICUs)
- Dedicated Women's Diagnostic Center
- Women's Care Unit featuring seven beautifully-decorated private rooms, two triage rooms, and specially-trained women's health professionals available 24 hours a day to answer questions, teach new skills, or just lend a sympathetic ear.
- Convenient parking
- Community Conference Center with catering services available

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Circles of Care

North Area Outpatient
- Outpatient Counseling for adults and children
- Outpatient Psychiatric Evaluations for adults and children
- Outpatient Medication Management for adults and children

Central Area Outpatient
- Outpatient Counseling for adults and children
  - Individual
  - Group
  - Family
  - Short- and long-term problems
- Outpatient Psychiatric Evaluations for adults, children and adolescents
- Outpatient Medication Management for adults, children and adolescents
- Therapeutic Services

South Area Outpatient
- Outpatient Counseling
  - Individual
  - Group
  - Family counseling
- Pharmacy
- Psychiatric and psychological evaluation for adults and children
- Medication Management for adults and children

Community Support Programs
- Intensive daily specialized support program
- Residential Services

Cedar Village
- Intensive support programs for severe and persistent mental illness

Intake Services - Melbourne
- Crisis counseling, information, and referral services 24/7
- Screening and hospital admissions evaluation

D'Albora Children's Crisis Stabilization Unit (CCSU)
- Psychiatric emergencies for children and adolescents
- Detoxification and stabilization services for substance abuse crisis affecting children and adolescents

Harbor Pines
- Inpatient Crisis stabilization for indigent clients
- Cornerstone of the emergency mental health system

Sheridan Oaks
- Inpatient psychiatric facility

Twin Rivers Treatment Center
- Comprehensive detoxification for adults
- Intensive treatment for chemical dependency for adults
- Medical Services
- Individual, group and family therapy
- Education

Outreach Services
- Outreach services to meet behavioral needs of children and their families
- In-home and on-site counseling
- Case Management
- Individual, group and family counseling
- Comprehensive wrap-around behavioral services

Health First
Holmes Regional
MEDICAL CENTER

1350 S. Hickory Street
Melbourne, Florida 32901
321.434.7000
www.Health-First.org

FACTS

Date opened: June 8, 1937
Status: Non-profit, 501 (c) (03)
Hospital beds: 514 beds
Physicians: More than 570
Medical Specialties: More than 50
Accredited by The Joint Commission

General Services

As a regional referral center, Health First Holmes Regional Medical Center provides many specialties not available at other hospitals including a full-array of comprehensive patient care services.

- Aerospace Medicine
- Allergy and Immunology
- Anesthesiology
- Cardiology
- Cardiothoracic Surgery
- Cardiac Electrophysiology
- Dentistry
- Dermatology
- Emergency Medicine
- Endocrinology
- Family Practice
- Gastroenterology
- General Surgery
- Hyperbarics
- Infectious Disease
- Internal Medicine
- Interventional Radiology
- Medical Rehab
- Mother/Baby Unit
- Neonatology
- Nephrology
- Neurosurgery
- Neurology
- Nuclear Medicine
- OB/GYN
- Occupational Medicine
- Oral & Maxillo-Facial Surgery
- Oncology/Hematology
- Ophthalmology
- Orthopedics
- Otolaryngology
- Pain Management
- Pathology
- Pediatrics
- Pediatric Cardiology
- Pediatric Endocrinology
- Pediatric Pulmonology
- Perinatology
- Physical & Speech Therapy
- Plastic Surgery
- Podiatry
- Psychiatry & Psychology
- Pulmonology
- Radiology
- Rheumatology
- Trauma Center
- Urology
- Vascular Surgery
- Women's Surgical Unit
- Wound Care

The Heart Center at Holmes Regional Medical Center performs more cardiac procedures than all other hospitals in Brevard. As the area's leader in Heart & Vascular Care, the Center features all-private rooms, state-of-the-art Cardiac Catheterization Suites and adjoining pre- and post-procedure recovery areas. A roof-top landing site for the First Flight EC135 medical helicopter has dedicated elevator access to the Level II Trauma Center and Emergency Department at The Heart Center.

The Trauma Center at Holmes Regional Medical Center is the *only* state-accredited Level II Trauma Center serving Brevard and Indian River Counties. Offering 24/7 Trauma and Critical Care services 365 days a year, The Trauma Center serves as the designated treatment facility should NASA astronauts need emergency care after aborting a lift off.

Special Services and Extras

- First in Brevard to offer the da Vinci™ Robotics-assisted Surgery System for the treatment of urology, prostate, and gynecologic conditions

- Electrophysiology (EP) specialty procedures for cardiac patients
- Comprehensive Orthopedics Program, including specialized Complex Fracture care, sports injuries, and reconstructive plastic surgery.
- Only hospital in Brevard to offer anterior hip replacement and reverse shoulder surgeries.
- Stroke Unit and Stroke Program certified as a **Primary Stroke Center**. First and only hospital in Brevard to offer life-changing Interventional Neuroradiology procedures (with Interventional Radiologist Dr. Nana Amiridze)
- **The Birth Suites** Mother/Baby Unit and Brevard's first Level II Neonatal ICU
- Nationally-accredited as a **Comprehensive Community Hospital Cancer Program** — Accredited by the American College of Surgeons Commission on Cancer, we also partner with the American Cancer Society in sponsoring free community cancer screenings, events, smoking cessation classes, and informational programs and services.
- Opened Health First QuickCare Clinic and Marketplace convenience store.
- **Women's & Children's Services**, including dedicated Women's Surgical Unit and Pediatric Unit
- Extensive **Diagnostic and Laboratory Services**, including the latest, most rapid, and highest resolution CT scanning equipment, onsite MRI, and PET/CT scanning equipment, 3D Echocardiography, and Digital Mammography
- Specialized **Wound Care & Hyperbarics** services

Awards & Recognition

- 2012 TransLife Award of Excellence
- 2010 "Get with the Guidelines" **Gold Plus Recipient** from the American Stroke Association
- 2010-2011 Consumer Choice Award from the National Research Council
- **America's 50 Best Hospitals** in the nation for Clinical Outcomes by HealthGrades®, a not-for-profit healthcare rating organization (2008 & 2009)
- The hospital has also received the following designations from HealthGrades®:
  - **Distinguished Hospital for Clinical Excellence**
  - **Cardiac Care Excellence Award™**
  - **Coronary Intervention Excellence Award™**
  - **Pulmonary Care Excellence Award™**
  - **Stroke Care Excellence Award™**
  - **Vascular Care Excellence Award™**
- Holmes was named **Employer of the Year** by the Melbourne-Palm Bay Area Chamber of Commerce in 2009.
- 2009 **Medal of Honor for Organ Donation** from U.S. Department of Health and Human Services

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Health First

Palm Bay HOSPITAL

1425 Malabar Road NE
Palm Bay, Florida
321.434.8000
www.Health-First.org

FACTS

Date opened: July 8, 1992
Status: Non-profit, 501 (c) (03)
Hospital beds: 152 beds
Physicians: More than 200
Medical Specialties: More than 38
Accredited by The Joint Commission

General Services

Health First Palm Bay Hospital is a multi-service hospital offering convenient access to health care and a wide spectrum of outpatient and inpatient services including:

- Allergy and Immunology
- Anesthesiology
- Critical Care (ICU & eICU)
- Diagnostic Catheterization Lab
- Dentistry
- Dermatology
- Ear-Nose-Throat (ENT) Medicine
- Emergency Medicine
- Endocrinology
- Family Practice
- Gastroenterology
- General Surgery
- Gynecology
- Infectious Disease
- Internal Medicine
- Laboratory
- Laparoscopic Surgery
- Lithotripsy
- Mammography
- Medical Rehabilitation
- Nephrology
- Neurology
- Nuclear Medicine
- Oral and Maxillo-Facial Surgery
- Oncology/Hematology
- Ophthalomology
- Orthopedics
- Pain Management
- Pathology
- Physical & Speech Therapy
- Plastic Surgery
- Podiatry
- Psychiatry and Psychology
- Pulmonology
- Digital Diagnostic Radiology
- Rheumatology
- Urology
- Vascular Surgery
- Health First VitaWatch eICU
- Wound Care

Awards & Recognition

- Accreditation by The Joint Commission
- Accreditation by the American College of Radiology in Ultrasound, Nuclear Medicine, Mammography, Breast Ultrasound & CT
- Certified by the College of American Pathologists
- Jean Byers Memorial Award for Excellence in Cancer Registration

Special Services & Extras

- First hospital in Brevard to have a dedicated, comprehensive Orthopedic Joint Replacement Center
- The first in hospital Brevard County where a Thoracic Endograph procedure was performed
- Extensive Digital Diagnostic Radiology including: Mammography, X-ray, MRI & CT, Ultrasound, Nuclear Medicine, and Teleradiology
- Inpatient Dialysis
- Brevard's first Hospice House located in a secluded area on our hospital campus
- Private rooms with fold-out sleepers for family members or loved ones
- Spacious family waiting rooms with kitchenettes and free WiFi
- Beautiful Chapel overlooking a peaceful Tranquility Garden
- Full-service Cafeteria featuring a hot entrée bar, deli, soup & salad bar, coffee station, 'grab-n-go' bar, and by-the-slice pizza, plus an outdoor café.
- Convenient parking
- Community conference room with catering services available
- Medical Office Building adjacent to the hospital
- We encourage 24-hour family visitation in our Intensive Care Unit (ICU).

O061212

Parrish Medical Center

Cardiovascular Care
Orthopedic Care
- Bone and muscle care
- Fracture care
- Spine care
- Joint replacement
- Joint reconstruction
- Kyphoplasty
- Minimally invasive surgery
- Osteopathic manipulative therapy
- Outpatient rehabilitation
- Presurgery "what to expect" orientation
- Post-surgery healing-at-home care
- Sports and active lifestyle care
- Work-related injuries
- Full-service medical wellness (fitness) center.

Women's Care
- Breast Health Care—featuring an advanced certified Breast Health Navigator
- Cardiovascular Care
- Cancer Care
- Childhood Development Services
- Continence Restoration
- Gastrointestinal Care
- Gynecologic Care
- Midlife Care (Hormone Therapy)
- Mind/Body/Spirit Care
- Migraine Treatment
- Obstetric Care
    - Specialized team of labor and delivery physicians
    - 24/7
    - Certified lactation consultants
    - Certified car seat technicians
- Sleep Disorders

Cancer Care
- Patient Navigator

Diabetes Education
Wound Healing Center
- Hyperbaric medicine

Home Health Care
- Education on their disease process
- medication management
- nutrition and pain control
- IV therapy and wound/ostomy care management.

Health First

Viera HOSPITAL

8745 N. Wickham Road
Melbourne, Florida 32940
321.434.9000
www.Health-First.org

FACTS

Date opened: April 2, 2011
Status: Non-profit, 501 (c) (03)
Hospital beds: 84 beds
Physicians: More than 240
Medical Specialties: (26)
Accredited by The Joint Commission

General Services

Health First's newest hospital, Health First Viera Hospital was built to serve the medical needs of the Viera/Suntree areas. Health First Viera is the centerpiece of a unique 50-acre integrated healthcare campus that also includes a multi-specialty physician office building (Health First Viera Hospital Medical Plaza), and the Viera Pro-Health & Fitness Center. The 84-bed Health First Viera offers a wide-spectrum of outpatient and inpatient services including:

- Anesthesiology
- Bariatrics
- Cardiology Services
- Critical Care (ICU & eICU)
- Diagnostic Catheterization Lab
- Diagnostic Imaging (CT, Mammography, MRI, PET/CT, and Ultrasound)
- Dentistry
- Digital Diagnostic Radiology
- EEG
- Emergency Medicine
- Family Practice
- Gastroenterology
- General Surgery
- Infectious Diseases
- Internal Medicine
- Laboratory
- Lithotripsy
- Medical Rehabilitation
- Nephrology
- Nuclear Medicine
- Neurology
- Oral and Maxillo-Facial Surgery
- Oncology/Hematology
- Ophthalmology
- Orthopedics
- PACS (Picture Archive Computer System)
- Pain Management
- Pathology
- Physical & Speech Therapy
- Plastic Surgery
- Pulmonology
- Radiology
- Rheumatology
- Robotics-assisted surgery
- Urology
- Health First VitalWatch eICU

Awards & Recognition

- Accredited by The Joint Commission
- Accredited by the American College of Radiology (Mamography)

Special Services & Extras

- 84 private patient rooms with fold-out sleepers for family members
- 12 Observation beds
- 24-hour Emergency Department
  - — 18 exam rooms, 2 resuscitation rooms
  - — Decontamination station
- Intensive Care Unit (ICU)
- Helipad for First Flight Air Ambulance
- Inpatient/outpatient Diagnostic Services
- Color-coded scrubs to identify caregiver roles
- Viera Café, with hot entrée bar, deli, soup & salad bar, coffee station, pizza oven, and grab-and-go items
- Interdenominational Chapel (Chaplains are also available)
- Three-story Medical Plaza building — connected by outdoor covered walkway between the hospital and the Medical Plaza — includes:
  - — Health First Diagnostic Services (outpatient imaging services) including extensive diagnostic radiology services (Digital Mammography, X-ray, MRI, CT, Ultrasound, Nuclear Medicine, and Teleradiology).
  - — Health First Medical Group — Family Practice and Internal Medicine Specialists, as well as other specialists
  - — Outpatient Laboratory Services
  - — Space Coast Cancer Center
  - — The Brevard Cosmetic Surgery Group
  - — Valet parking services
  - — Viera Sports Medicine & Orthopedic Center

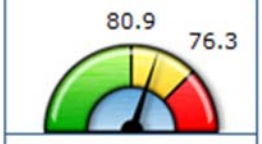
O061212

- Pro-Health & Fitness Center within close walking distance of the hospital with:
  - Free weights and state-of-the-art exercise equipment
  - Strength-training and cardiovascular equipment
  - Two pools
  - Women's and men's locker rooms with saunas and Jacuzzis
  - Exercise classes
  - Member childcare center
  - Pro Shop
  - 'Snack Shack' Café
- Convenient parking
- We encourage 24-hour family visitation in our Intensive Care Units (ICUs).

Appendix B

HCN Health Indicators

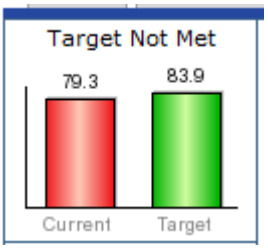
http://www.cflhealthymeasures.org.



Red < 76.3
Green >= 80.9
In-between = Yellow
Unit: percent
View the Legend

Adults with a Usual Source of Health Care

Value:	79.3 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Access to Health Services



What is this Indicator?
This indicator shows the percentage of adults that report having one or more persons they think of as their personal doctor or health care provider.

Why this is important: People who lack a regular source of health care may not receive the proper medical services when they need them. This can lead to missed diagnoses, untreated conditions, and adverse health outcomes. People without a regular source of health care are less likely to get routine checkups and screenings. When they become ill, they generally delay seeking treatment until the condition is more advanced and therefore more difficult and costly to treat. Young children and elderly adults are most likely to have a usual source of care, whereas adults aged 18 to 64 years are the least likely. Maintaining regular contact with a health care provider is especially difficult for low-income people, who are less likely to have health insurance. This often results in emergency room visits, which raises overall costs and lessens the continuity of care.

The Healthy People 2020 national health target is to increase the proportion of people with a usual primary care provider to 83.9%.

Technical Note: The distribution is based on data from 67 Florida counties.

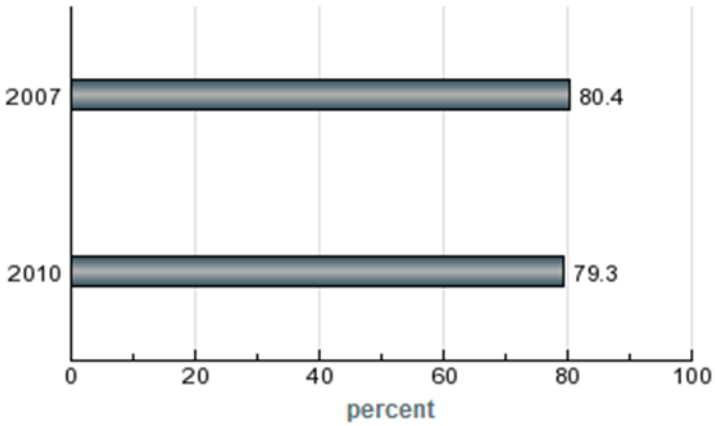
Source: Florida Behavioral Risk Factor Surveillance System

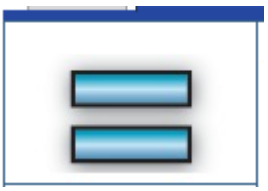
URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

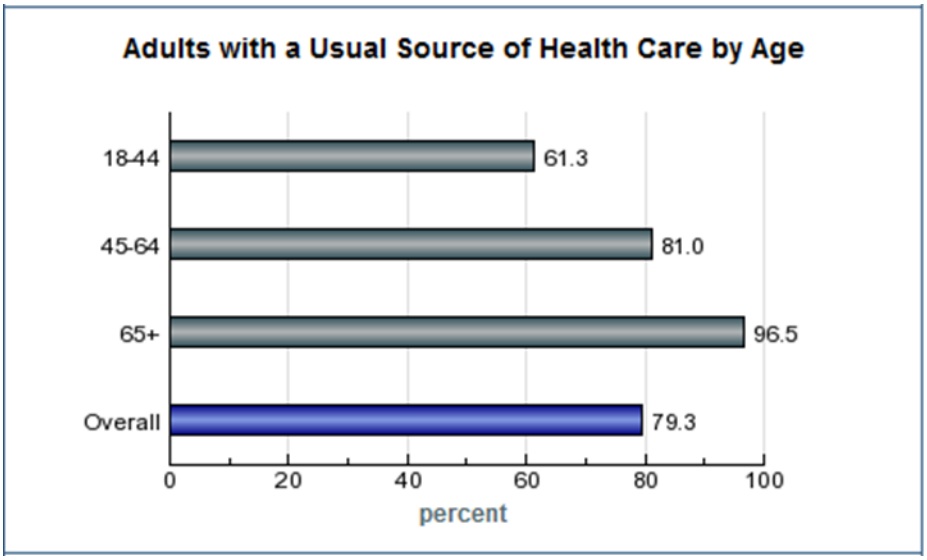
URL of Data: http://www.floridacharts.com/charts/brfss.aspx

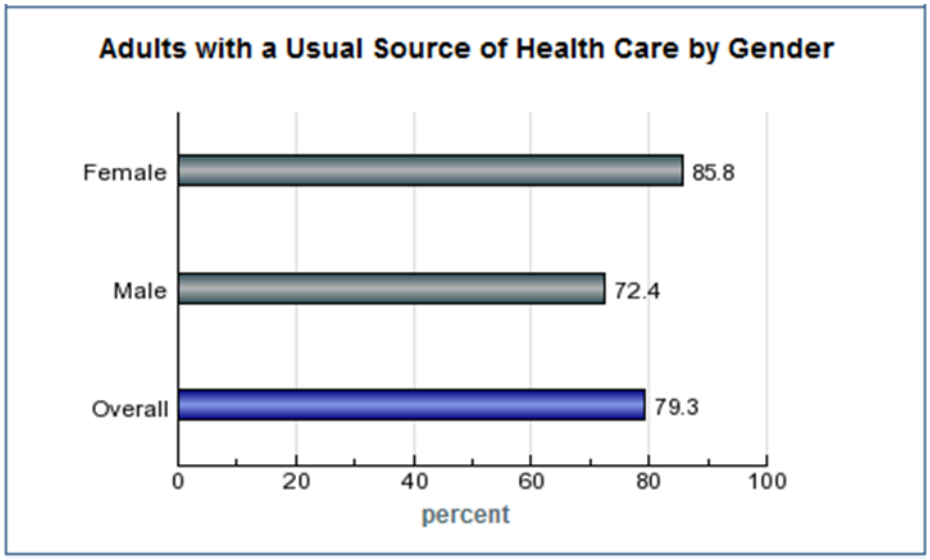
Maintained By: Healthy Communities Institute

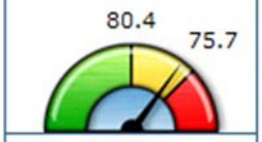
Time Series Data






Adults with a Usual Source of Health Care by Age
18-44
61.3
45-64
81.0
65+
96.5
Overall
79.3
0
20
40
60
80
100
percent

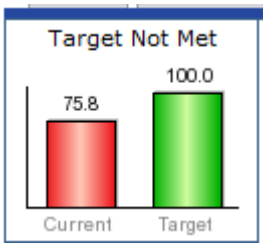

Adults with a Usual Source of Health Care by Gender
Female
85.8
Male
72.4
Overall
79.3
0
20
40
60
80
100
percent



Red < 75.7
Green >= 80.4
In-between = Yellow
Unit: percent
View the Legend

Adults with Health Insurance

Value:	75.8 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Health / Access to Health Services



What is this Indicator?
This indicator shows the percentage of adults aged 18-64 years that have any type of health insurance coverage.

Why this is important: Medical costs in the United States are extremely high, so people without health insurance may not be able to afford medical treatment or prescription drugs. They are also less likely to get routine checkups and screenings, so if they do become ill they will not seek treatment until the condition is more advanced and therefore more difficult and costly to treat. Many small businesses are unable to offer health insurance to employees due to rising health insurance premiums.

The Healthy People 2020 national health target is to increase the proportion of people with health insurance to 100%.

Technical Note: The distribution is based on data from 807 U.S. counties and county equivalents. American Community Survey single year estimates are available for geographic areas with populations of 65,000 or more.

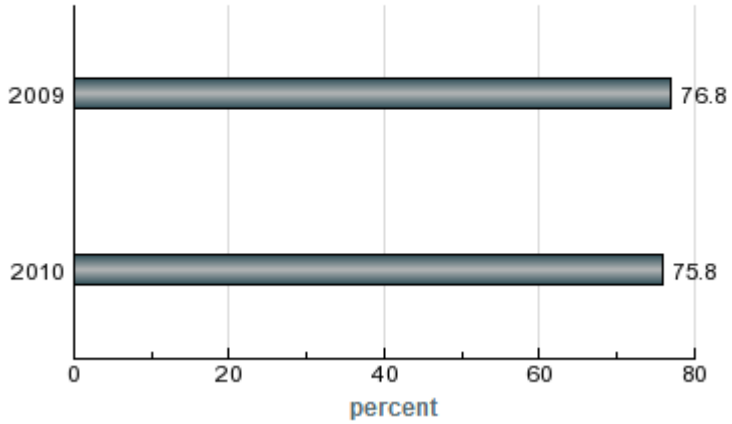
Source: American Community Survey

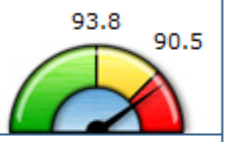
URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

Time Series Data

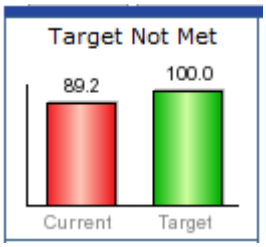




Red < 90.5
Green >= 93.8
In-between = Yellow
Unit: percent
View the Legend

Children with Health Insurance

Value:	89.2 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Health / Access to Health Services Health / Children's Health



What is this Indicator?
This indicator shows the percentage of children aged 0-17 years with any type of health insurance coverage.

What is this Indicator?
This indicator shows the percentage of children aged 0-17 years with any type of health insurance coverage.

Why this is important: Medical costs in the United States are extremely high, so people without health insurance may not be able to afford medical treatment or prescription drugs. They are also less likely to get routine checkups and screenings, so if they do become ill they will not seek treatment until the condition is more advanced and therefore more difficult and costly to treat.

The Healthy People 2020 national health target is to increase the proportion of people with health insurance to 100%.

Technical Note: The distribution is based on data from 807 U.S. counties and county equivalents. American Community Survey single year estimates are available for geographic areas with populations of 65,000 or more.

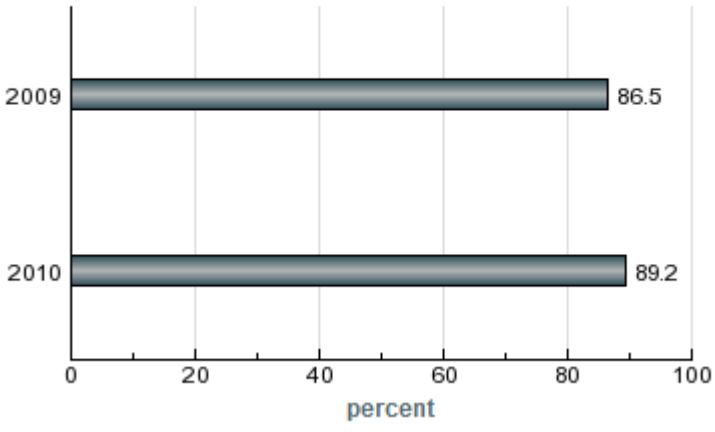
Source: American Community Survey

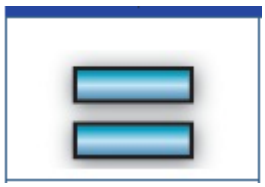
URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

Time Series Data





Median Monthly Medicaid Enrollment

Red > 19488.2
Green <= 16573.0
In-between = Yellow
Unit: enrollments/100,000 population
View the Legend

Value:	12146.5 enrollments/100,000 population
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Access to Health Services Government & Politics / Social Services

What is this Indicator?
This indicator shows the rate per 100,000 population of median monthly Medicaid enrollment.

Why this is important: Medicaid is a state and federal partnership that provides health coverage for eligible individuals and families with low incomes and resources. The purpose of the program is to improve the health of people who might otherwise go without medical care. Medicaid is a marker for poverty, and demand for Medicaid increases when the economy is weak, driving up enrollment and costs. Increased demand for public programs, caused by rising unemployment, can place additional stress on state revenues, and may lead to budget shortfalls.

Technical Note: The distribution is based on data from 67 Florida counties.

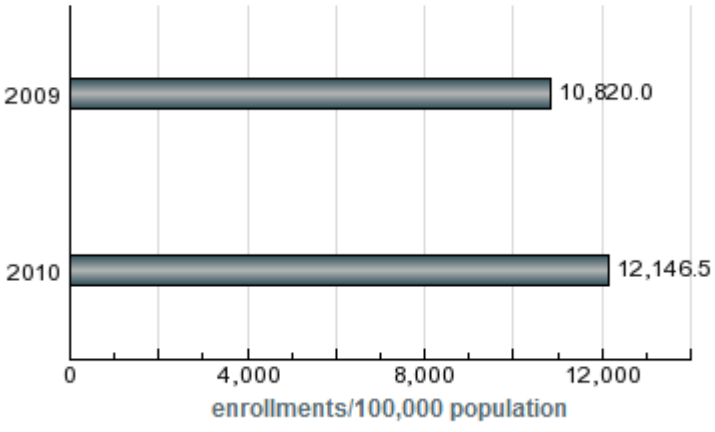
Source: Florida Department of Health, Office of Planning, Evaluation & Data Analysis

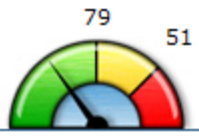
URL of Source: http://www.doh.state.fl.us/Planning_eval/pedadescription....

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=07...

Maintained By: Healthy Communities Institute

Time Series Data





Red < 51
Green >= 79
In-between = Yellow
Unit: providers/100,000 population
View the Legend

Primary Care Provider Rate

Value:	101 providers/100,000 population
Measurement Period:	2009
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Health / Access to Health Services

What is this Indicator?
This indicator shows the primary care provider rate per 100,000 population. Primary care providers include practicing physicians specializing in general practice medicine, family medicine, internal medicine, pediatrics, and obstetrics/gynecology.

Why this is important: Access to primary care providers increases the likelihood that community members will have routine checkups and screenings. Moreover, those with access to primary care are more likely to know where to go for treatment in acute situations. Communities that lack a sufficient number of primary care providers typically have members who delay necessary care when sick and conditions can become more severe and complicated.

Technical Note: The distribution is based on data from 2,964 U.S. counties and county equivalents.

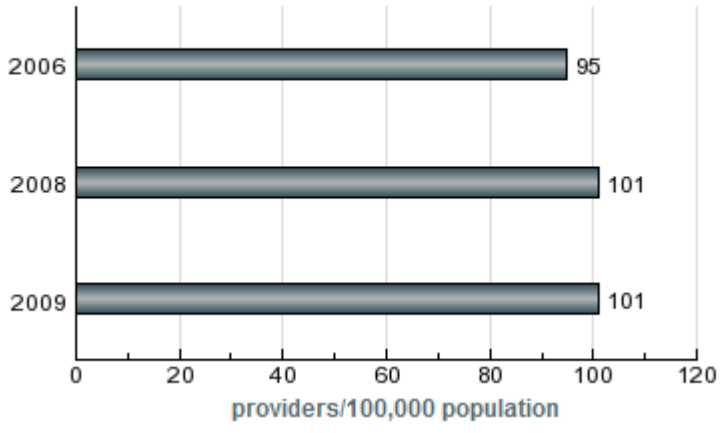
Source: County Health Rankings

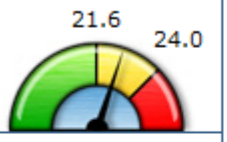
URL of Source: http://www.countyhealthrankings.org/

URL of Data: http://www.countyhealthrankings.org/rankings/ranking-meth...

Maintained By: Healthy Communities Institute

Time Series Data

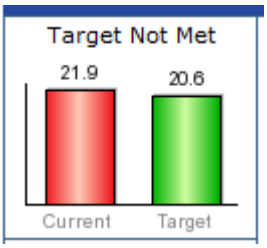




Red > 24.0
Green <= 21.6
In-between = Yellow
Unit: deaths/100,000 females
View the Legend

Age-Adjusted Death Rate due to Breast Cancer

Value:	21.9 deaths/100,000 females
Measurement Period:	2008-2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer Health / Mortality Data Health / Women's Health



What is this Indicator?
This indicator shows the age-adjusted death rate per 100,000 females due to breast cancer.

Why this is important: According to the American Cancer Society, breast cancer is the second leading cause of cancer death and the second most common type of cancer among women in the U.S. The greatest risk factor in developing breast cancer is age. Since 1990, breast cancer death rates have declined progressively due to advancements in treatment and detection.

The Healthy People 2020 national health target is to reduce the breast cancer death rate to 20.6 deaths per 100,000 females.

Technical Note: The distribution is based on data from 67 Florida counties.

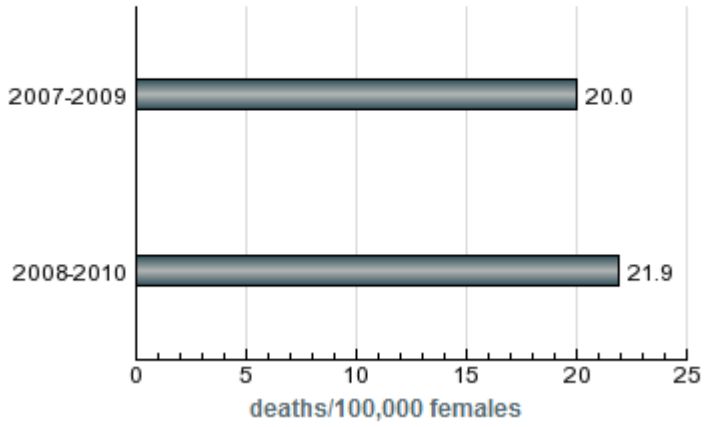
Source: Florida Department of Health, Bureau of Vital Statistics

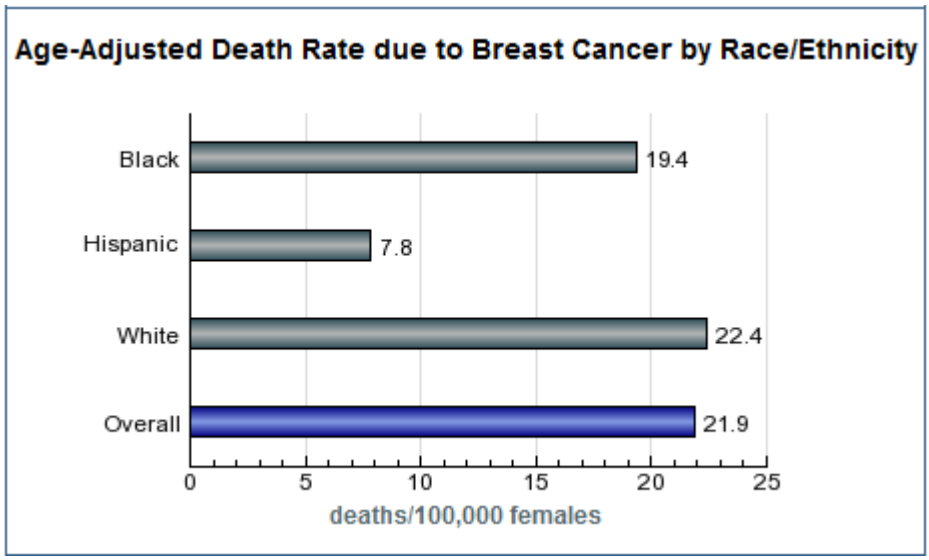
URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

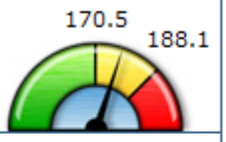
URL of Data: http://www.floridacharts.com/charts/DataViewer/DeathViewe...

Maintained By: Healthy Communities Institute

Time Series Data



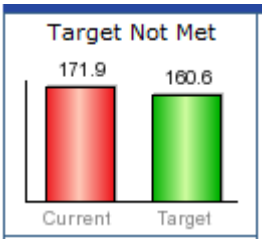

Age-Adjusted Death Rate due to Breast Cancer by Race/Ethnicity
Black
19.4
Hispanic
7.8
White
22.4
Overall
21.9
0
5
10
15
20
25
deaths/100,000 females



Red > 188.1
Green <= 170.5
In-between = Yellow
Unit: deaths/100,000 population
View the Legend

Age-Adjusted Death Rate due to Cancer

Value:	171.9 deaths/100,000 population
Measurement Period:	2008-2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer Health / Mortality Data



What is this Indicator?
This indicator shows the age-adjusted death rate per 100,000 population due to cancer.

Why this is important: Cancer is the second leading cause of death in the United States. The National Cancer Institute (NCI) defines cancer as a term used to describe diseases in which abnormal cells divide without control and are able to invade other tissues. There are over 100 different types of cancer. According to the NCI, lung, colon and rectal, breast, pancreatic, and prostate cancer lead to the greatest number of annual deaths.

The Healthy People 2020 target is to reduce the overall cancer death rate to 160.6 deaths per 100,000 population.

Technical Note: The distribution is based on data from 67 Florida counties.

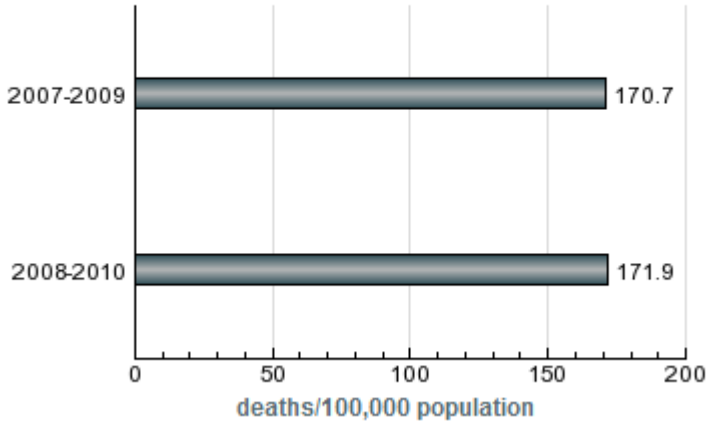
Source: Florida Department of Health, Bureau of Vital Statistics

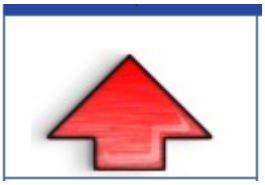
URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

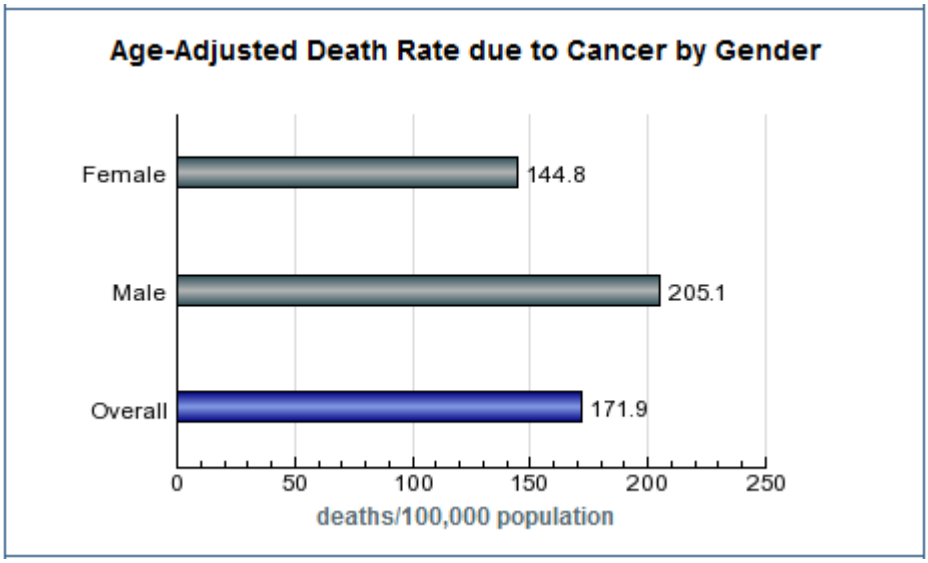
URL of Data: http://www.floridacharts.com/charts/DataViewer/DeathViewe...

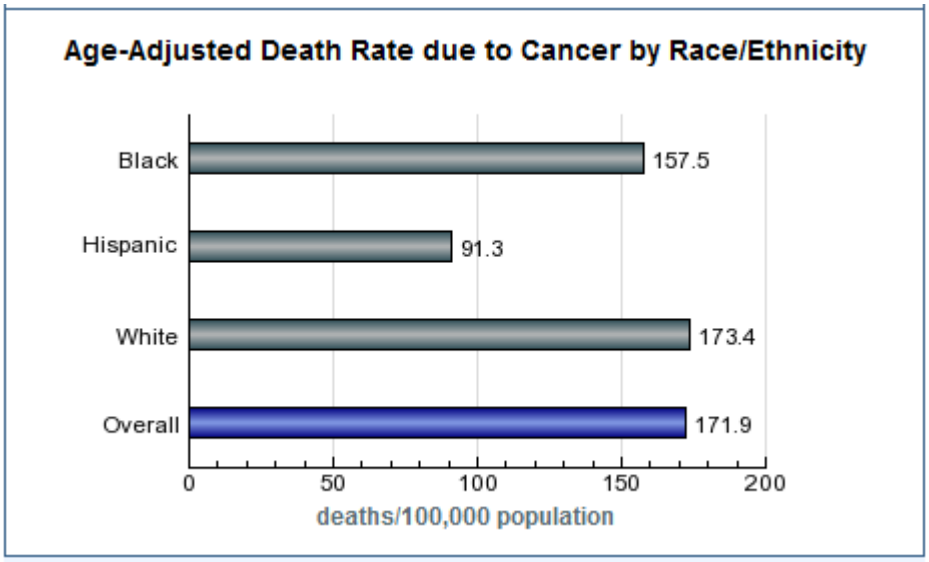
Maintained By: Healthy Communities Institute

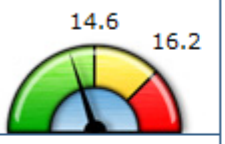
Time Series Data






Age-Adjusted Death Rate due to Cancer by Gender
Female
144.8
Male
205.1
Overall
171.9
0
50
100
150
200
250
deaths/100,000 population

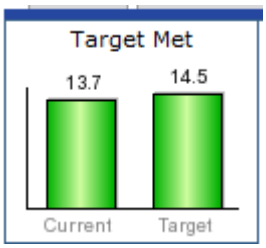

Age-Adjusted Death Rate due to Cancer by Race/Ethnicity
Black
157.5
Hispanic
91.3
White
173.4
Overall
171.9
0
50
100
150
200
deaths/100,000 population



Red > 16.2
Green <= 14.6
In-between = Yellow
Unit: deaths/100,000 population
View the Legend

Age-Adjusted Death Rate due to Colorectal Cancer

Value:	13.7 deaths/100,000 population
Measurement Period:	2008-2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer Health / Mortality Data



What is this Indicator?
This indicator shows the age-adjusted death rate per 100,000 population for colorectal cancer.

Why this is important: Colorectal cancer--cancer of the colon or rectum--is the second leading cause of cancer-related deaths in the United States. The Centers for Disease Control and Prevention estimates that if all adults aged 50 or older had regular screening tests for colon cancer, as many as 60% of the deaths from colorectal cancer could be prevented. While 90% of colorectal cancer cases occur in adults aged 50 or older, it is essential for individuals with risk factors (those with a family history of colorectal cancer, inflammatory bowel disease, or heavy alcohol use) to seek regular screening earlier.

The Healthy People 2020 national health target is to reduce the colorectal cancer death rate to 14.5 deaths per 100,000 population.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Department of Health, Bureau of Vital Statistics

URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

URL of Data: http://www.floridacharts.com/charts/DataViewer/DeathViewe...

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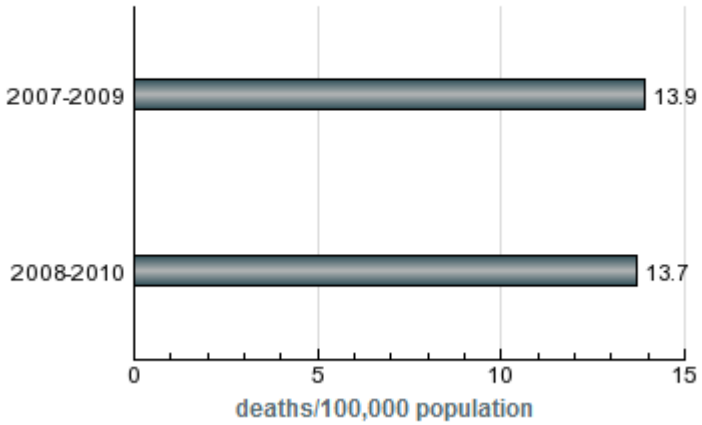
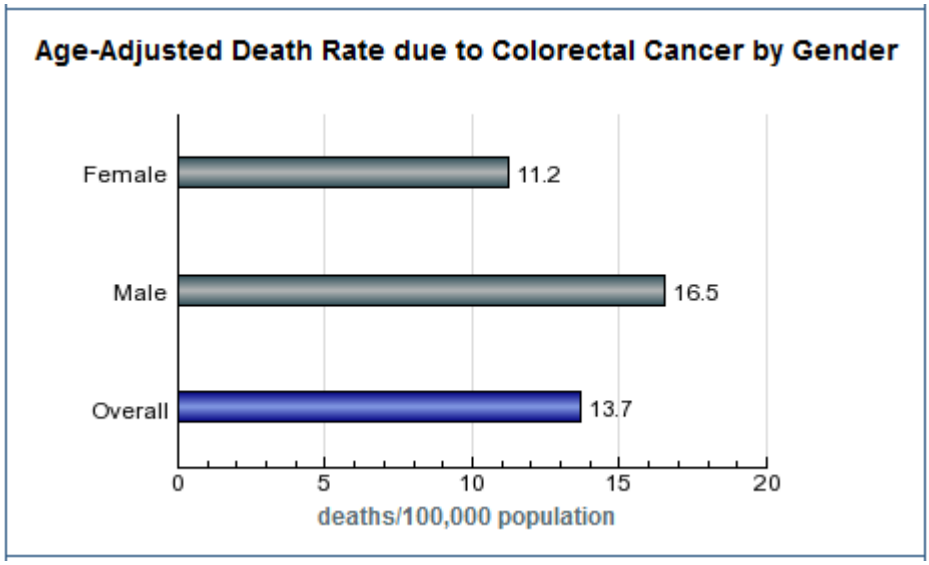
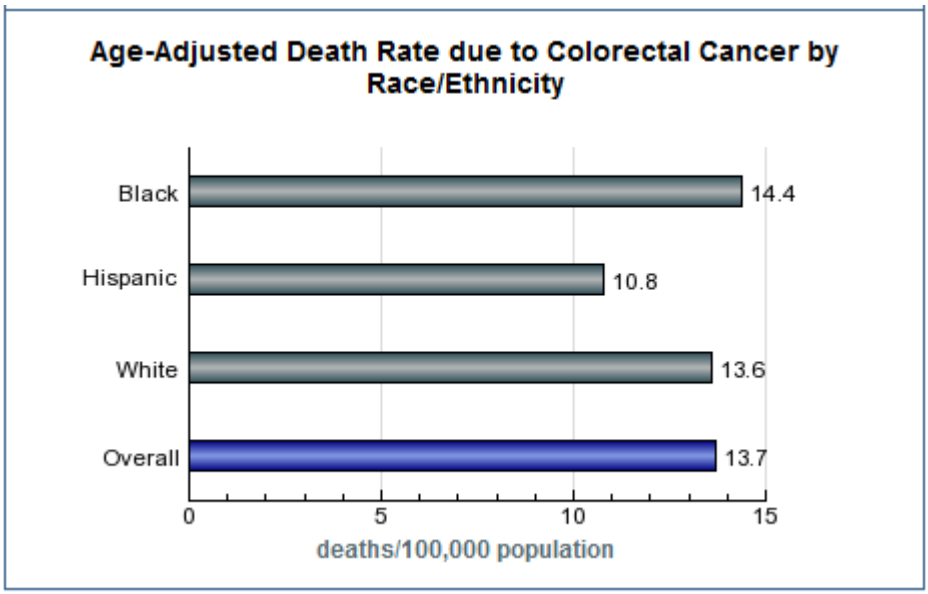
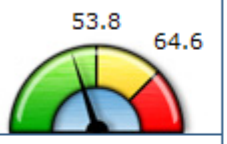
Time Series Data




Age-Adjusted Death Rate due to Colorectal Cancer by Gender
Female
11.2
Male
16.5
Overall
13.7
0
5
10
15
20
deaths/100,000 population

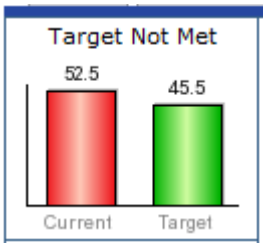

Age-Adjusted Death Rate due to Colorectal Cancer by Race/Ethnicity
Black
14.4
Hispanic
10.8
White
13.6
Overall
13.7
0
5
10
15
deaths/100,000 population



Red > 64.6
Green <= 53.8
In-between = Yellow
Unit: deaths/100,000 population
View the Legend

Age-Adjusted Death Rate due to Lung Cancer

Value:	52.5 deaths/100,000 population
Measurement Period:	2008-2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer Health / Mortality Data



What is this Indicator?
This indicator shows the age-adjusted death rate per 100,000 population due to lung cancer.

Why this is important: According to the American Lung Association, more people die from lung cancer annually than any other type of cancer, exceeding the total deaths caused by breast cancer, colorectal cancer, and prostate cancer combined. The greatest risk factor for lung cancer is duration and quantity of smoking. While the mortality rate due to lung cancer among men has reached a plateau, the mortality rate due to lung cancer among women continues to increase.

The Healthy People 2020 national health target is to reduce the lung cancer death rate to 45.5 deaths per 100,000 population.

Technical Note: The distribution is based on data from 67 Florida counties.

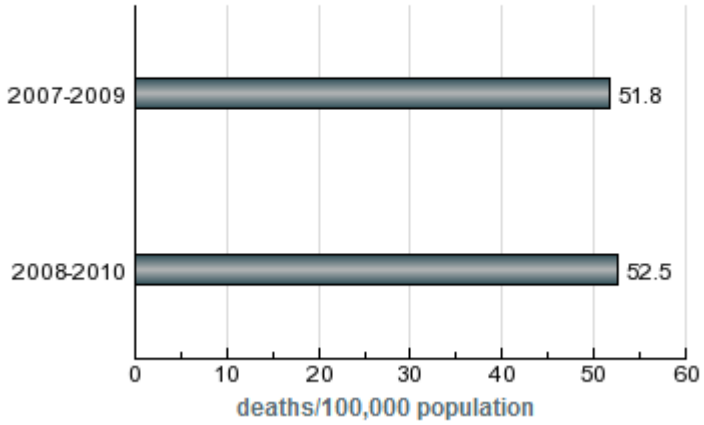
Source: Florida Department of Health, Bureau of Vital Statistics

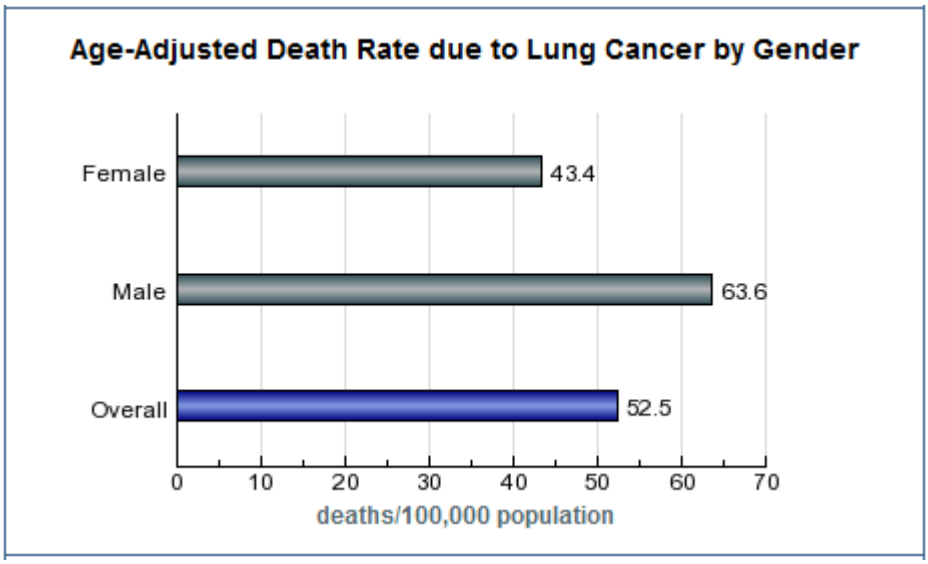
URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

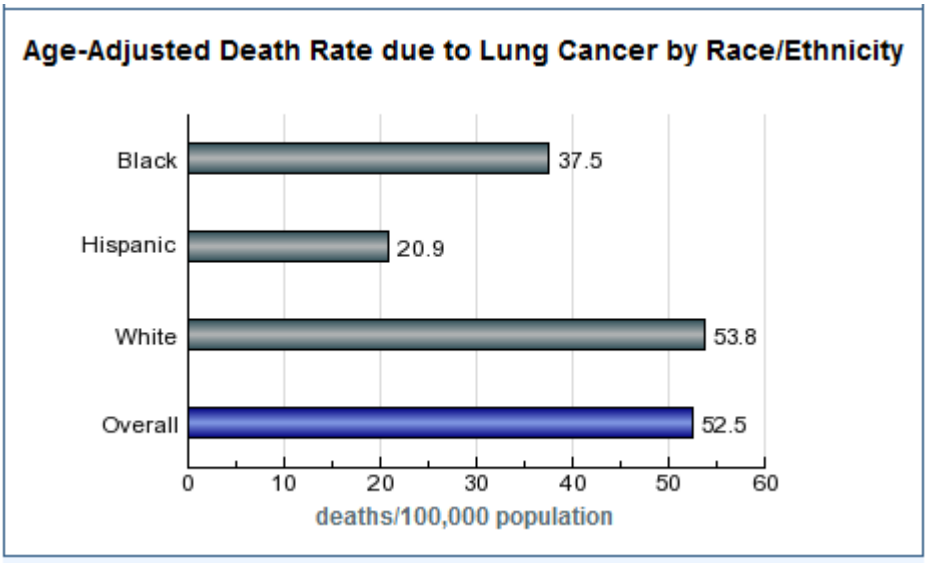
URL of Data: http://www.floridacharts.com/charts/DataViewer/DeathViewe...

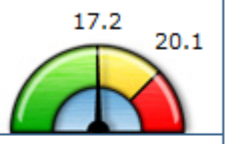
Maintained By: Healthy Communities Institute

Time Series Data




Age-Adjusted Death Rate due to Lung Cancer by Gender
Female
43.4
Male
63.6
Overall
52.5
0
10
20
30
40
50
60
70
deaths/100,000 population

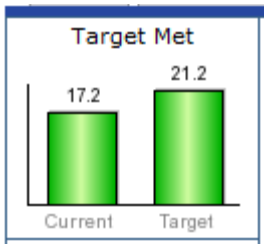

Age-Adjusted Death Rate due to Lung Cancer by Race/Ethnicity
Black
37.5
Hispanic
20.9
White
53.8
Overall
52.5
0
10
20
30
40
50
60
deaths/100,000 population



Red > 20.1
Green <= 17.2
In-between = Yellow
Unit: deaths/100,000 males
View the Legend

Age-Adjusted Death Rate due to Prostate Cancer

Value:	17.2 deaths/100,000 males
Measurement Period:	2008-2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer Health / Mortality Data Health / Men's Health



What is this Indicator?
This indicator shows the age-adjusted death rate per 100,000 males due to prostate cancer.

Why this is important: According to the American Cancer Society, prostate cancer is the most commonly diagnosed form of cancer among men in the United States and it is second only to lung cancer as a cause of cancer-related death among men. The two greatest risk factors for prostate cancer are age and race/ethnicity, with men over the age of 65 and men of African descent possessing the highest incidence rates of prostate cancer in the U.S.

The Healthy People 2020 national health target is to reduce the prostate cancer death rate to 21.2 deaths per 100,000 males.

Technical Note: The distribution is based on data from 67 Florida counties.

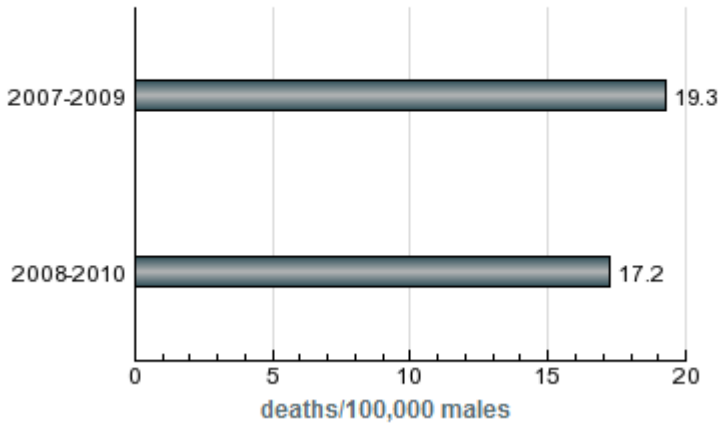
Source: Florida Department of Health, Bureau of Vital Statistics

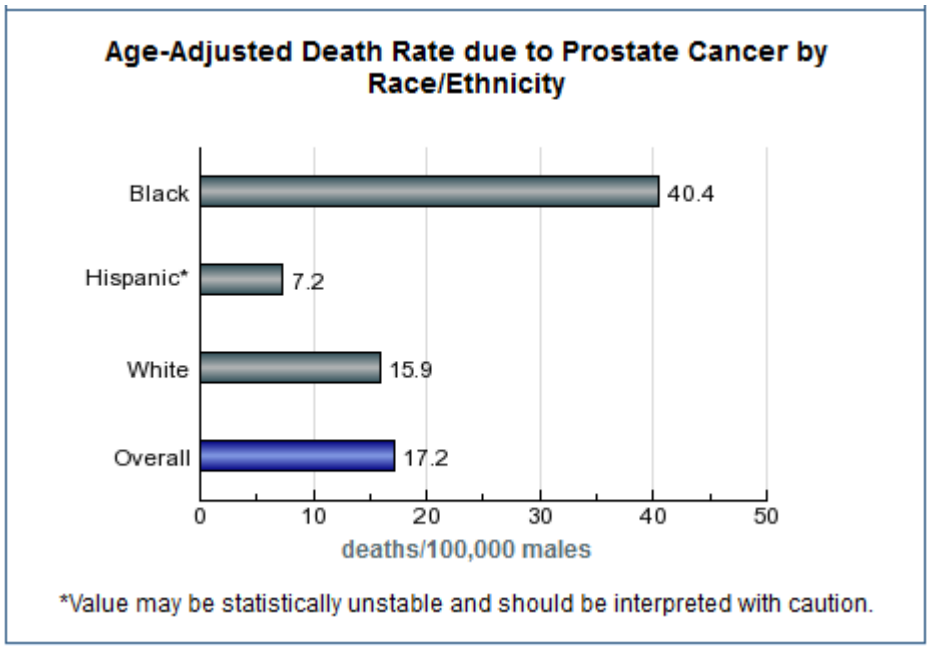
URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

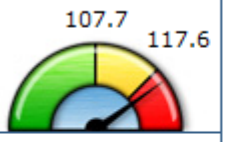
URL of Data: http://www.floridacharts.com/charts/DataViewer/DeathViewe...

Maintained By: Healthy Communities Institute

Time Series Data




Age-Adjusted Death Rate due to Prostate Cancer by Race/Ethnicity
Black
40.4
Hispanic*
7.2
White
15.9
Overall
17.2
0
10
20
30
40
50
deaths/100,000 males
*Value may be statistically unstable and should be interpreted with caution.



Red > 117.6
Green <= 107.7
In-between = Yellow
Unit: cases/100,000 females
View the Legend

Breast Cancer Incidence Rate

Value:	117.8 cases/100,000 females
Measurement Period:	2006-2008
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer Health / Women's Health

What is this Indicator?
This indicator shows the age-adjusted incidence rate for breast cancer in cases per 100,000 females.

Why this is important: Breast cancer is the most common type of cancer among women in the U.S. other than skin cancer. Breast cancer forms in tissues of the breast, usually the ducts (tubes that carry milk to the nipple) and lobules (glands that make milk). In the United States in 2009, it is estimated that there will be 192,370 new cases and 40,170 deaths from breast cancer.

Technical Note: The distribution is based on data from 60 Florida counties. Rates based on fewer than 10 cases were not included in the distribution. The value represents the average annualized rate.

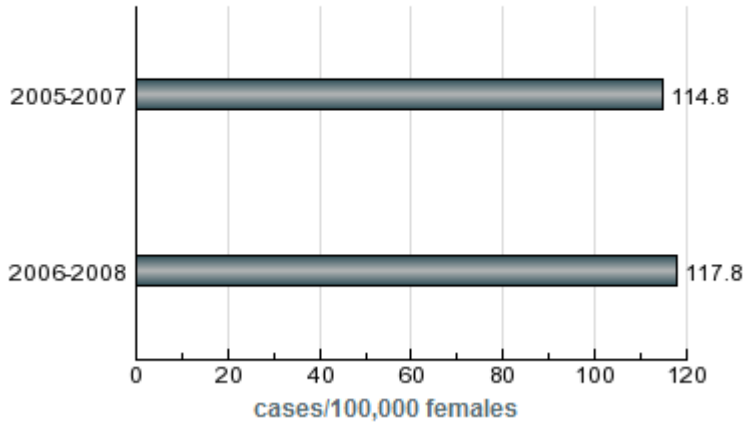
Source: University of Miami (FL) Medical School, Florida Cancer Data System

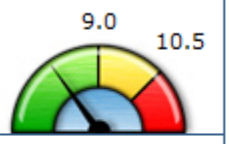
URL of Source: http://fcds.med.miami.edu/

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=02...

Maintained By: Healthy Communities Institute

Time Series Data





Red > 10.5
Green <= 9.0
In-between = Yellow
Unit: cases/100,000 females
View the Legend

Cervical Cancer Incidence Rate

Value:	8.0 cases/100,000 females
Measurement Period:	2006-2008
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer Health / Women's Health

What is this Indicator?
This indicator shows the age-adjusted incidence rate for cervical cancer in cases per 100,000 females.

Why this is important: Cervical cancer forms in tissues of the cervix uteri. One out of every 145 women in the United States will be diagnosed in their lifetime. Early cervical cancer can be cured by removing or destroying the pre-cancerous or cancerous tissue. Human papillomavirus (HPV), which is transmitted through sexual contact, has been identified as the main cause of cervical cancer. In 2006, the FDA approved a new vaccine against HPV which prevents cervical cancer. In the United States in 2009, it is estimated that there will be 11,270 new cases and 4,070 deaths from cervical cancer.

Technical Note: The distribution is based on data from 23 Florida counties. Rates based on fewer than 10 cases were not included in the distribution. The value represents the average annualized rate.

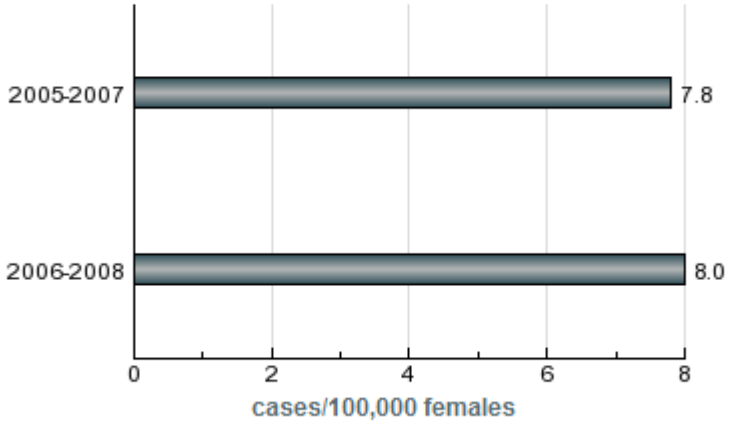
Source: University of Miami (FL) Medical School, Florida Cancer Data System

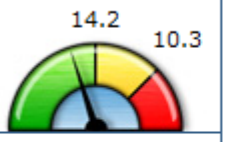
URL of Source: http://fcds.med.miami.edu/

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=02...

Maintained By: Healthy Communities Institute

Time Series Data





Red < 10.3
Green >= 14.2
In-between = Yellow
Unit: percent
View the Legend

Colon Cancer Screening

Value:	14.4 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer

What is this Indicator?
This indicator shows the percentage of respondents aged 50 and over who have had a blood stool test within the past year.

Why this is important: Colorectal cancer is one of the most commonly diagnosed cancers in the United States, and is the second leading cancer killer in the U.S. If adults aged 50 or older had regular screening tests, as many as 60% of the deaths from colorectal cancer could be prevented. Recommended screening procedures include one of the following: Fecal occult blood tests (FOBT) annually; flexible sigmoidoscopy every 5 years; double-contrast barium enema every 5 years, or colonoscopy every 10 years. It is recommended that screening begin at age 50; however, testing may need to begin earlier and/or more often if colorectal cancer runs in the family, or if you've been diagnosed with inflammatory bowel disease. Speak with your doctor about when you should begin screening and how often you should be tested.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Behavioral Risk Factor Surveillance System

URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

URL of Data: http://www.floridacharts.com/charts/brfss.aspx

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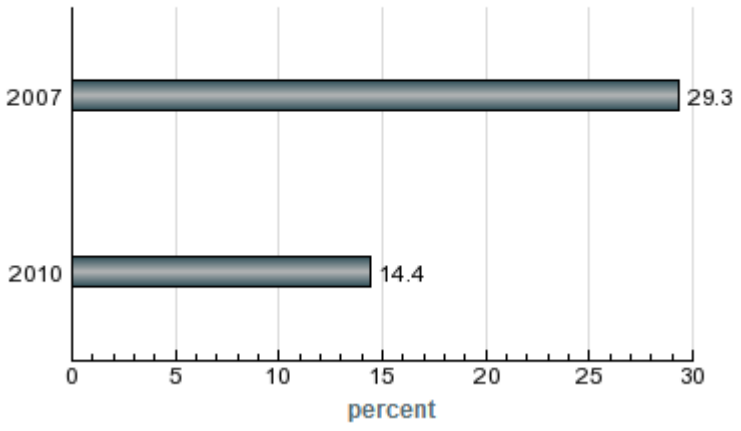
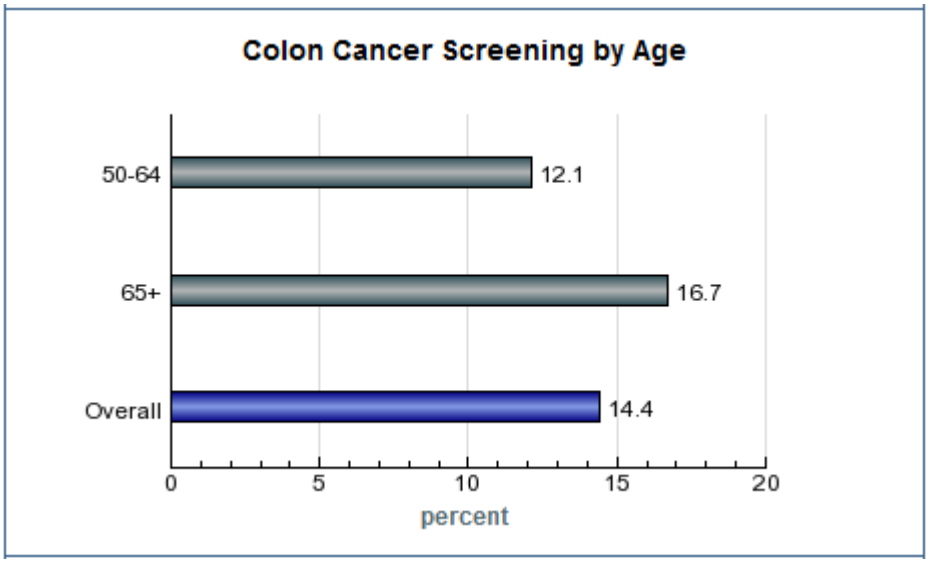
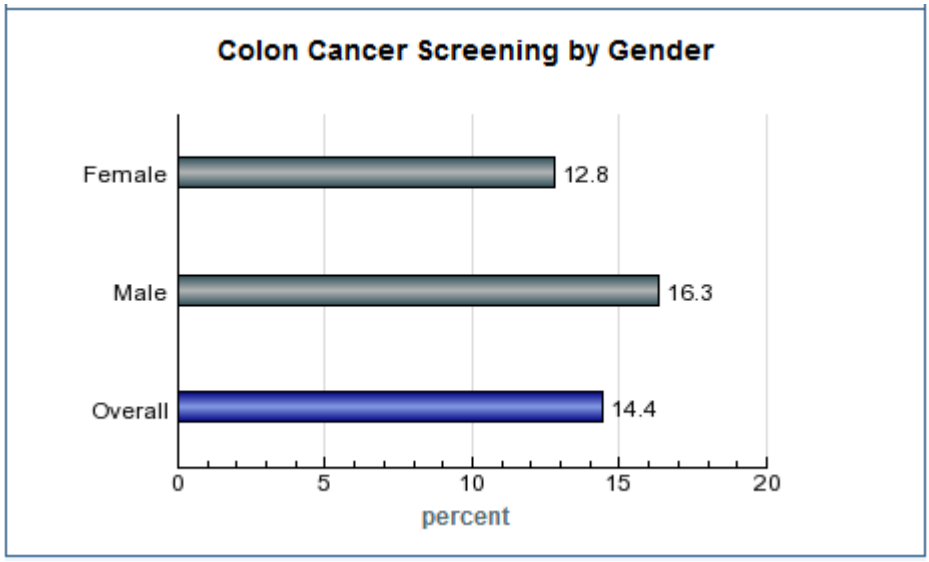
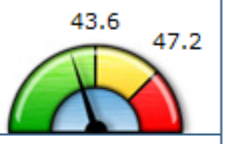



Colon Cancer Screening by Age
50-64
12.1
65+
16.7
Overall
14.4
0
5
10
15
20
percent

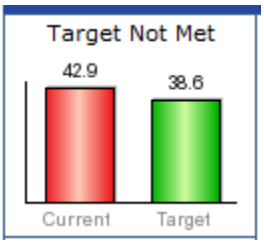

Colon Cancer Screening by Gender
Female
12.8
Male
16.3
Overall
14.4
0
5
10
15
20
percent



Red > 47.2
Green <= 43.6
In-between = Yellow
Unit: cases/100,000 population
View the Legend

Colorectal Cancer Incidence Rate

Value:	42.9 cases/100,000 population
Measurement Period:	2006-2008
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer



What is this Indicator?
This indicator shows the age-adjusted incidence rate for colorectal cancer in cases per 100,000 population. The value represents the average annualized rate.

Why this is important: Colorectal cancer--cancer of the colon or rectum--is the second leading cause of cancer-related deaths in the United States. If adults aged 50 or older had regular screening tests, as many as 60% of the deaths from colorectal cancer could be prevented. In the U.S. in 2009, it is estimated that there were 106,100 new cases and 49,920 deaths from colorectal cancer.

The Healthy People 2020 national health target is to reduce the colorectal cancer incidence rate to 38.6 cases per 100,000 population.

Technical Note: The distribution is based on data from 56 Florida counties. Rates based on fewer than 10 cases were not included in the distribution. The value represents the average annualized rate.

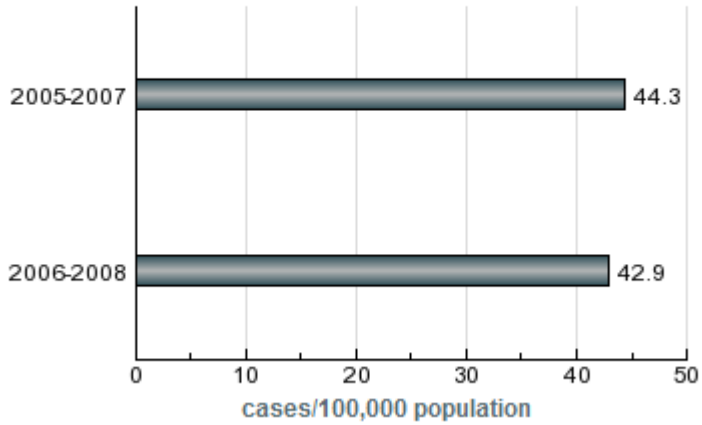
Source: University of Miami (FL) Medical School, Florida Cancer Data System

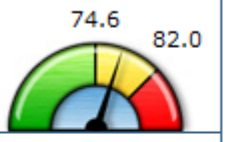
URL of Source: http://fcds.med.miami.edu/

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=02...

Maintained By: Healthy Communities Institute

Time Series Data





Red > 82.0
Green <= 74.6
In-between = Yellow
Unit: cases/100,000 population
View the Legend

Lung and Bronchus Cancer Incidence Rate

Value:	75.4 cases/100,000 population
Measurement Period:	2006-2008
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer

What is this Indicator?
This indicator shows the age-adjusted incidence rate for lung and bronchus cancer in cases per 100,000 population.

Why this is important: More people die from lung cancer than any other type of cancer. In 2002, lung cancer accounted for more deaths than breast cancer, prostate cancer, and colon cancer combined. Lung cancer is the second most common cancer for all males in the U.S. as well as white and American Indian/Alaska Native females, and the third most common cancer among black, Asian/Pacific Islander, and Hispanic females. In the United States in 2009, it is estimated that there will be 219,440 new cases and 159,390 deaths from lung cancer.

Technical Note: The distribution is based on data from 65 Florida counties. Rates based on fewer than 10 cases were not included in the distribution. The value represents the average annualized rate.

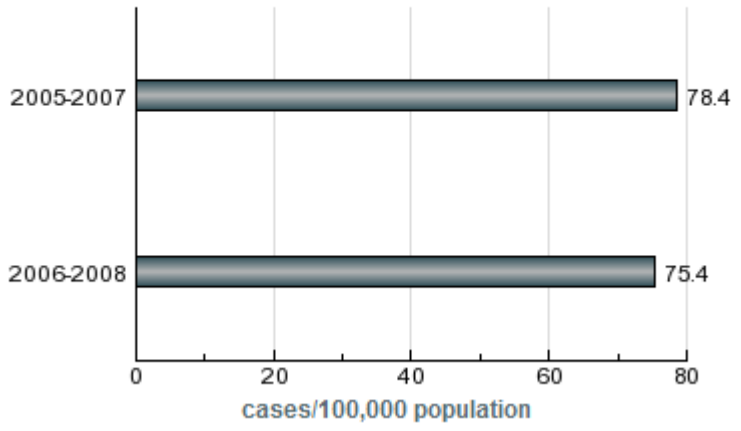
Source: University of Miami (FL) Medical School, Florida Cancer Data System

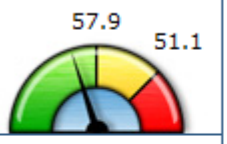
URL of Source: http://fcds.med.miami.edu/

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=02...

Maintained By: Healthy Communities Institute

Time Series Data





Red < 51.1
Green >= 57.9
In-between = Yellow
Unit: percent
View the Legend

Mammogram History

Value:	61.9 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer Health / Women's Health

What is this Indicator?
This indicator shows the percentage of women aged 40 and over who have had a mammogram in the past year.

Why this is important: A mammogram is an x-ray of the breast that can be used to detect changes in the breast such as tumors and calcifications. The test may be done for screening or for diagnostic purposes. The National Cancer Institute recommends that women age 40 and over have screening mammograms every 1-2 years. Women with an elevated risk of breast cancer may need to have mammograms earlier and/or more often. A positive screening mammogram leads to further testing to determine if cancer is present. Mammograms may also be used to evaluate known cases of breast cancer. Although mammograms do not detect all cases of breast cancer, they have been shown to increase early detection, thus reducing mortality. CDC provides low-income, uninsured, and underserved women access to free or low-cost mammograms through the National Breast and Cervical Cancer Early Detection Program (NBCCEDP).

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Behavioral Risk Factor Surveillance System

URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

URL of Data: http://www.floridacharts.com/charts/brfss.aspx

Maintained By: Healthy Communities Institute

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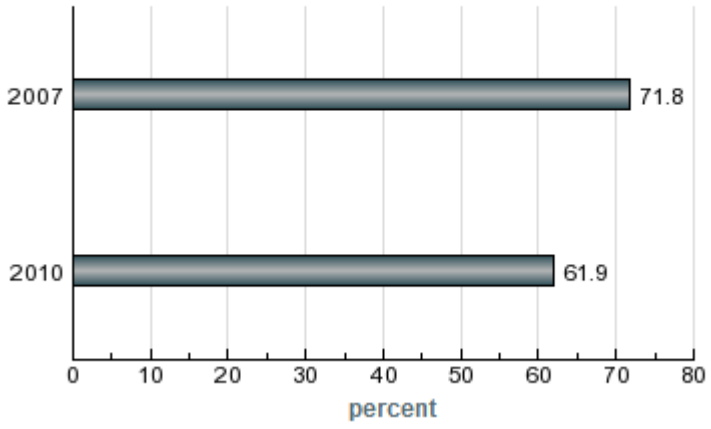
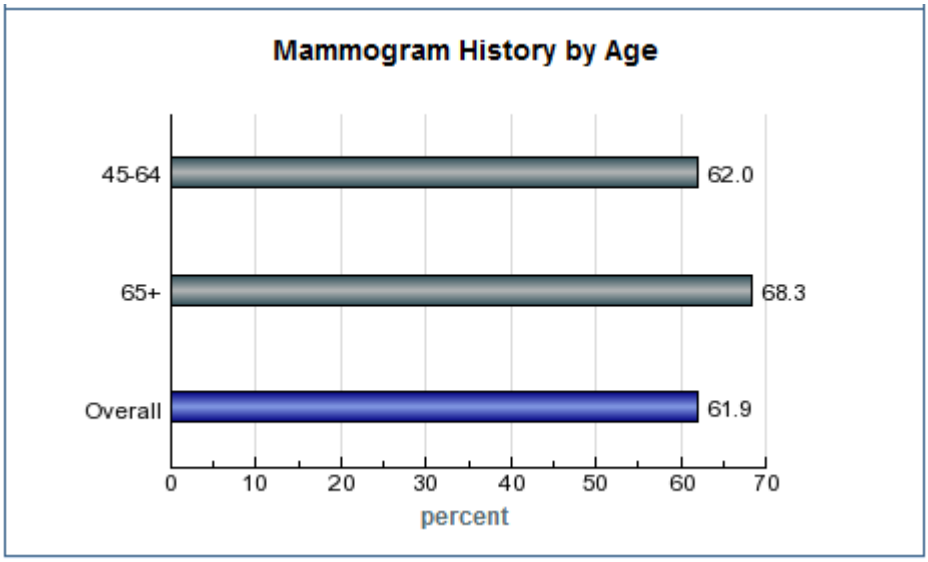
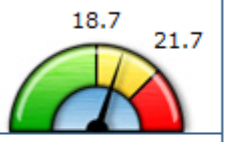



Mammogram History by Age
45-64
62.0
65+
68.3
Overall
61.9
0
10
20
30
40
50
60
70
percent



Red > 21.7
Green <= 18.7
In-between = Yellow
Unit: cases/100,000 population
View the Legend

Melanoma Incidence Rate

Value:	20.0 cases/100,000 population
Measurement Period:	2006-2008
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer

What is this Indicator?
This indicator shows the age-adjusted incidence rate for cutaneous melanoma in cases per 100,000 population.

Why this is important: Cutaneous melanoma is a form of cancer that begins in melanocytes (cells that make the pigment melanin). It may begin in a mole (skin melanoma), but can also begin in other pigmented tissues, such as in the eye or in the intestines. Melanoma is the most serious type of skin cancer. Each year in the United States more than 53,600 people are diagnosed with melanoma. In the U.S., the percentage of people who develop melanoma has more than doubled in the past 30 years. In the U.S. in 2009, it is estimated that there will be 68,720 new cases and 8,650 deaths from melanoma.

Technical Note: The distribution is based on data from 42 Florida counties. Rates based on fewer than 10 cases were not included in the distribution. The value represents the average annualized rate.

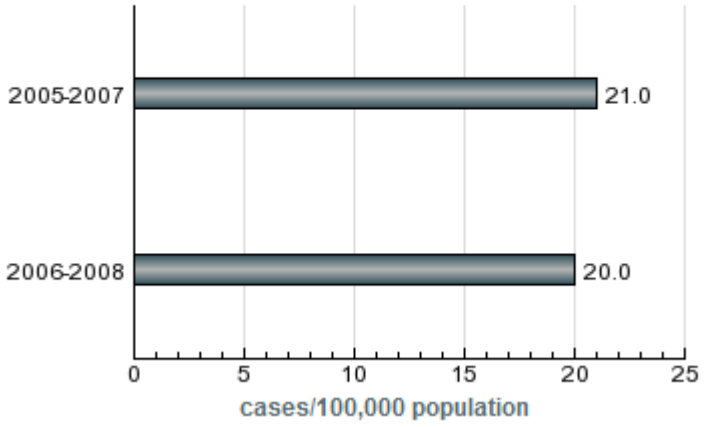
Source: University of Miami (FL) Medical School, Florida Cancer Data System

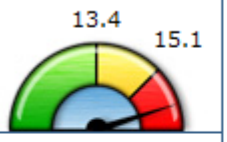
URL of Source: http://fcds.med.miami.edu/

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=02...

Maintained By: Healthy Communities Institute

Time Series Data





Red > 15.1
Green <= 13.4
In-between = Yellow
Unit: cases/100,000 population
View the Legend

Oral Cavity and Pharynx Cancer Incidence Rate

Value:	15.8 cases/100,000 population
Measurement Period:	2006-2008
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer Health / Oral Health

What is this Indicator?
This indicator shows the age-adjusted incidence rate for oral cavity and pharynx cancer in cases per 100,000 population.

Why this is important: Oral cancer forms in tissues of the oral cavity (the mouth) or the oropharynx (the part of the throat at the back of the mouth). One in 99 Americans will be diagnosed with oral cancer or cancer of the pharynx in their lifetime. People who use tobacco, drink alcohol, or have a personal history of head and neck cancer are more likely than others to develop oral cancers. Research has shown that three out of every four cases of oropharyngeal cancer occur in those who use tobacco or alcohol or both.

Technical Note: The distribution is based on data from 42 Florida counties. Rates based on fewer than 10 cases were not included in the distribution. The value represents the average annualized rate.

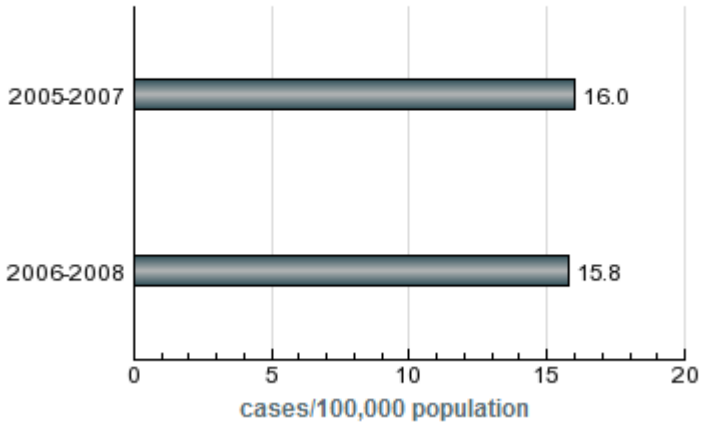
Source: University of Miami (FL) Medical School, Florida Cancer Data System

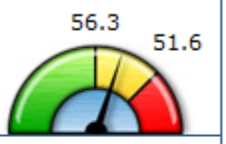
URL of Source: http://fcds.med.miami.edu/

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=02...

Maintained By: Healthy Communities Institute

Time Series Data





Red < 51.6
Green >= 56.3
In-between = Yellow
Unit: percent
View the Legend

Pap Test History

Value:	55.5 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer Health / Women's Health

What is this Indicator?
This indicator shows the percentage of women aged 18 and over who have had a Pap smear in the past year.

Why this is important: The Pap test, also known as a Pap smear, checks for changes in the cells of the cervix that can be early signs of cervical cancer. Cervical cancer is a common cancer that has a very high cure rate when caught early. If Pap results are abnormal, further testing or treatment may be necessary. Many abnormalities resolve without leading to cancer. The American College of Obstetricians and Gynecologists recommends that all women get regular Pap tests. Women under 30 should have a Pap test every 2 years. After age 30, the frequency of testing depends on the woman's age and health history.

Technical Note: The distribution is based on data from 67 Florida counties.

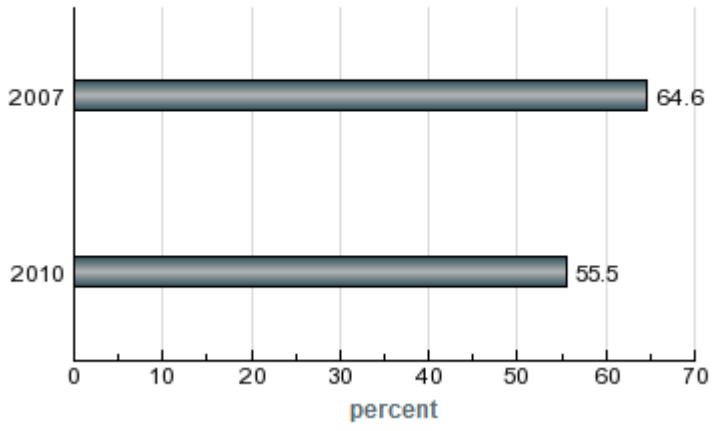
Source: Florida Behavioral Risk Factor Surveillance System

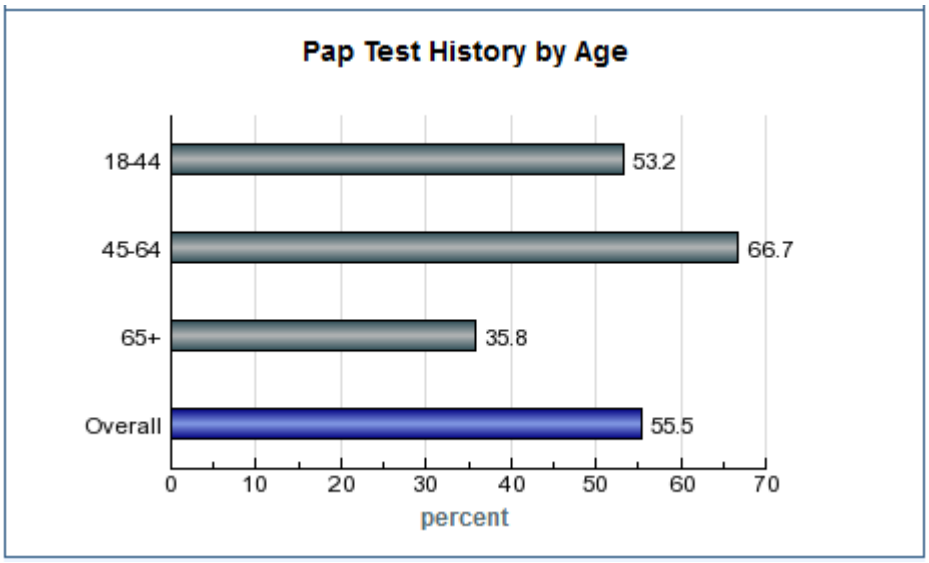
URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

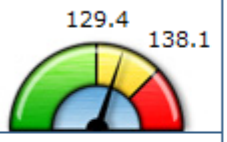
URL of Data: http://www.floridacharts.com/charts/brfss.aspx

Maintained By: Healthy Communities Institute

Time Series Data




Pap Test History by Age
18-44
53.2
45-64
66.7
65+
35.8
Overall
55.5
0
10
20
30
40
50
60
70
percent



Red > 138.1
Green <= 129.4
In-between = Yellow
Unit: cases/100,000 males
View the Legend

Prostate Cancer Incidence Rate

Value:	132.2 cases/100,000 males
Measurement Period:	2006-2008
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Cancer Health / Men's Health

What is this Indicator?
This indicator shows the age-adjusted incidence rate for prostate cancer in cases per 100,000 males.

Why this is important: Prostate cancer is the most common form of cancer among men in the United States. It is second only to lung cancer as a cause of cancer-related death among men. The prostate is a gland in the male reproductive system found below the bladder and in front of the rectum. Prostate cancer forms in tissues of the prostate and usually occurs in older men.

Technical Note: The distribution is based on data from 61 Florida counties. Rates based on fewer than 10 cases were not included in the distribution. The value represents the average annualized rate.

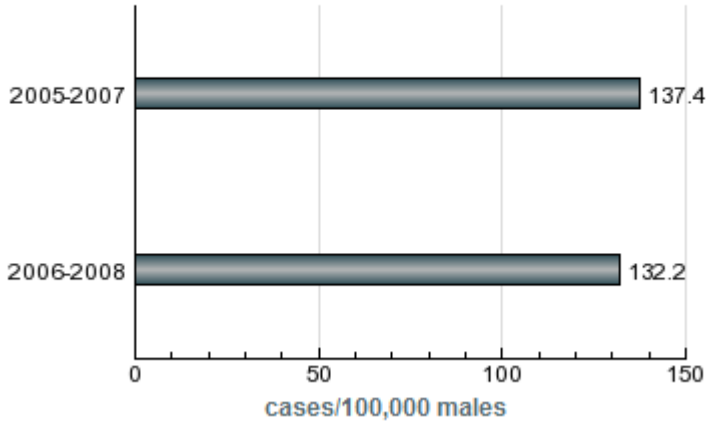
Source: University of Miami (FL) Medical School, Florida Cancer Data System

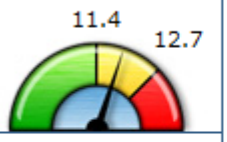
URL of Source: http://fcds.med.miami.edu/

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=02...

Maintained By: Healthy Communities Institute

Time Series Data





Red > 12.7
Green <= 11.4
In-between = Yellow
Unit: percent
View the Legend

Adults with Diabetes

Value:	11.9 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Diabetes

What is this Indicator?
This indicator shows the percentage of adults that have ever been diagnosed with diabetes. Women who were diagnosed with diabetes only during the course of their pregnancy were not included in this count.

Why this is important: In 2007, diabetes was the seventh leading cause of death in the United States. In 2010, an estimated 25.8 million people or 8.3% of the population had diabetes. Diabetes disproportionately affects minority populations and the elderly and its incidence is likely to increase as minority populations grow and the U.S. population becomes older.

Diabetes can have a harmful effect on most of the organ systems in the human body; it is a frequent cause of end-stage renal disease, non-traumatic lower-extremity amputation, and a leading cause of blindness among working age adults. Persons with diabetes are also at increased risk for ischemic heart disease, neuropathy, and stroke. In economic terms, the direct medical expenditure attributable to diabetes in 2007 was estimated to be $116 billion.

Technical Note: The distribution is based on data from 67 Florida counties.

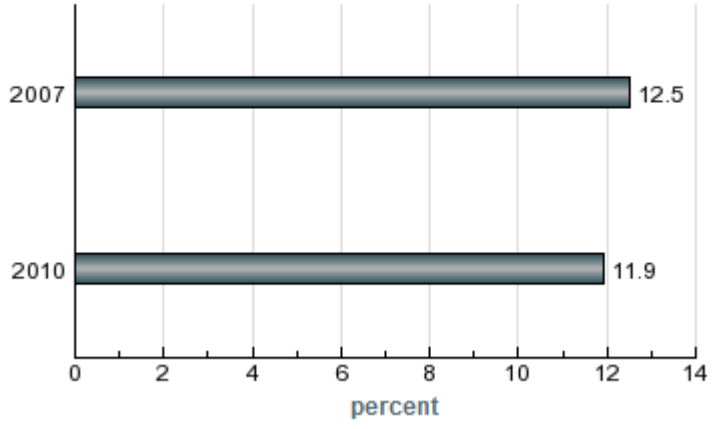
Source: Florida Behavioral Risk Factor Surveillance System

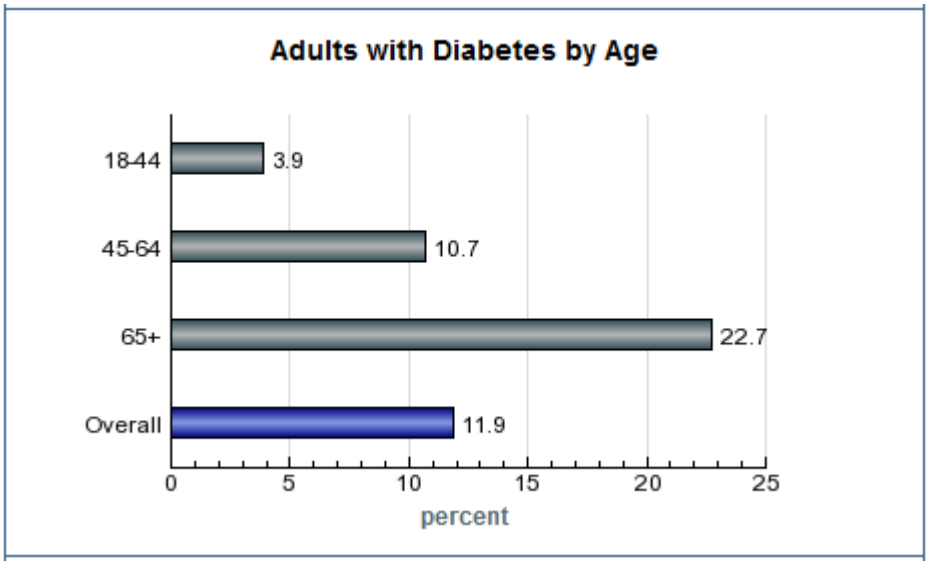
URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

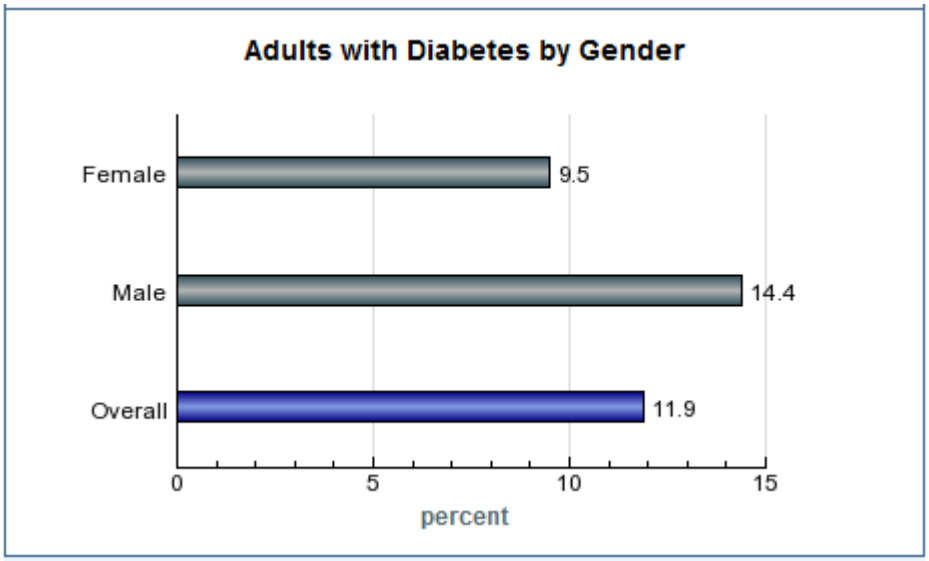
URL of Data: http://www.floridacharts.com/charts/brfss.aspx

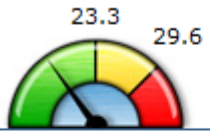
Maintained By: Healthy Communities Institute

Time Series Data




Adults with Diabetes by Age
18-44
3.9
45-64
10.7
65+
22.7
Overall
11.9
0
5
10
15
20
25
percent


Adults with Diabetes by Gender
Female
9.5
Male
14.4
Overall
11.9
0
5
10
15
percent



Red > 29.6
Green <= 23.3
In-between = Yellow
Unit: deaths/100,000 population
View the Legend

Age-Adjusted Death Rate due to Diabetes

Value:	17.9 deaths/100,000 population
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Diabetes Health / Mortality Data

What is this Indicator?
This indicator shows the age-adjusted death rate per 100,000 population due to diabetes.

Why this is important: Diabetes is a group of diseases marked by high levels of blood glucose, also called blood sugar, resulting from defects in insulin production, insulin action, or both. In 2007, diabetes was the seventh leading cause of death in the United States and an estimated 23.6 million people or 7.8% of the population had diabetes. The prevalence of diagnosed type 2 diabetes increased sixfold in the latter half of the last century. Diabetes risk factors such as obesity and physical inactivity have played a major role in this dramatic increase. Age, race, and ethnicity are also important risk factors.

Diabetes can have a harmful effect on most of the organ systems in the human body; it is a frequent cause of end-stage renal disease, non-traumatic lower-extremity amputation, and a leading cause of blindness among working age adults. Persons with diabetes are also at increased risk for ischemic heart disease, neuropathy, and stroke. In economic terms, the direct medical expenditure attributable to diabetes in 2007 was estimated to be $116 billion.

Technical Note: The distribution is based on data from 67 Florida counties.

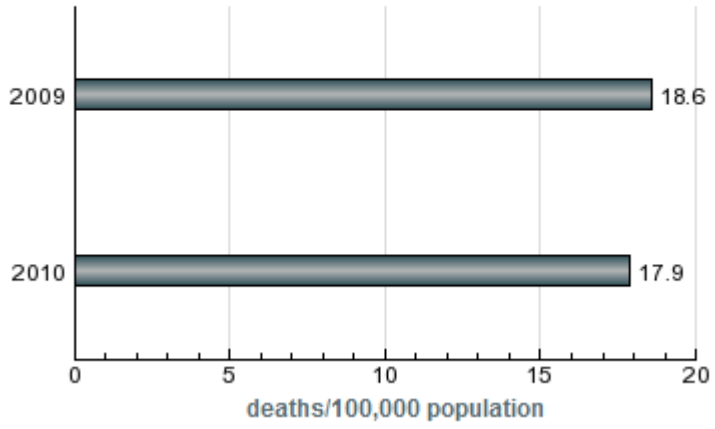
Source: Florida Department of Health, Bureau of Vital Statistics

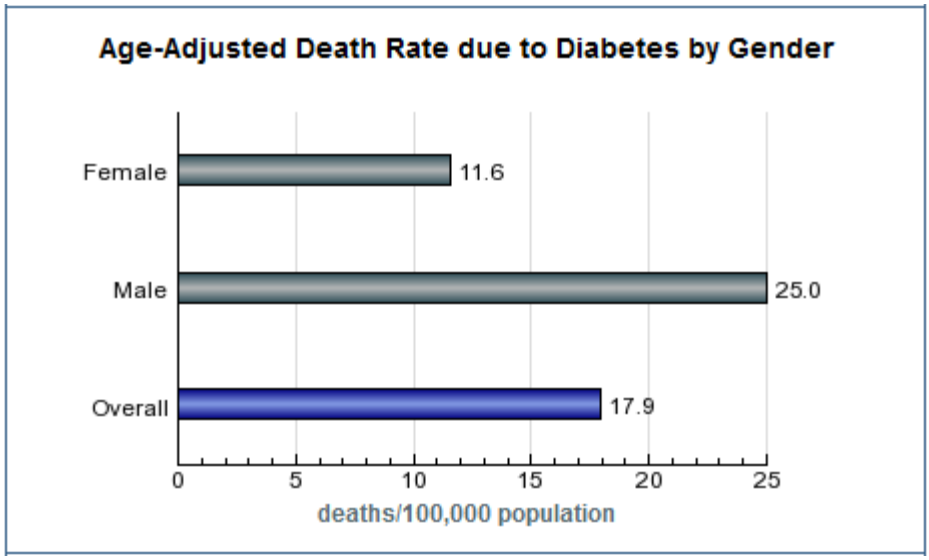
URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

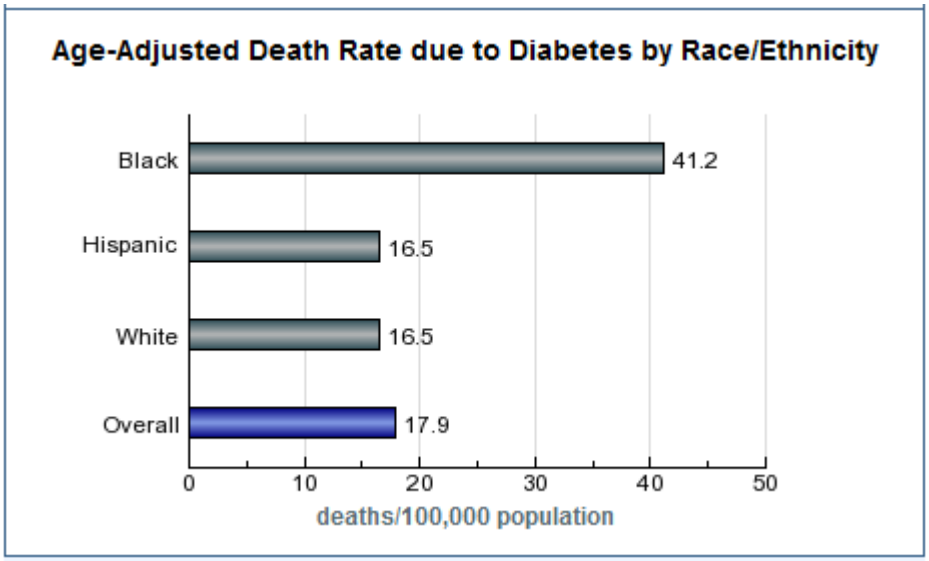
URL of Data: http://www.floridacharts.com/charts/DataViewer/DeathViewe...

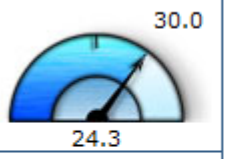
Maintained By: Healthy Communities Institute

Time Series Data




Age-Adjusted Death Rate due to Diabetes by Gender
Female
11.6
Male
25.0
Overall
17.9
0
5
10
15
20
25
deaths/100,000 population


Age-Adjusted Death Rate due to Diabetes by Race/Ethnicity
Black
41.2
Hispanic
16.5
White
16.5
Overall
17.9
0
10
20
30
40
50
deaths/100,000 population



Comparison: 24.3
Unit: percent
View the Legend

Adults with Disability

Value:	30.0 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL State Value
Categories:	Health / Disabilities Health / Mental Health & Mental Disorders

What is this Indicator?
This indicator shows the percentage of the adult population that are limited in any activities because of physical, mental, or emotional problems.

Why this is important: According to the National Disability Institute, enduring poverty and chronic underemployment are major problems facing the 20 million families who have at least one member with a disability. According to the 2000 Census data, 24.4 percent of people between the ages of 5 and 64 have a disability. Thirty-eight percent of working age adults with disabilities live in households with annual incomes of under $15,000 and 30 percent do not have either checking or savings accounts.

Technical Note: The regional value is compared to the Florida state value.

Source: Florida Behavioral Risk Factor Surveillance System

URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

URL of Data: http://www.floridacharts.com/charts/brfss.aspx

Maintained By: Healthy Communities Institute

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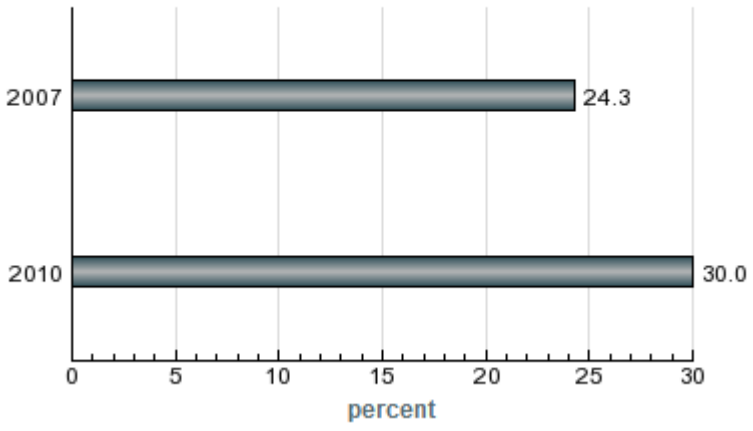
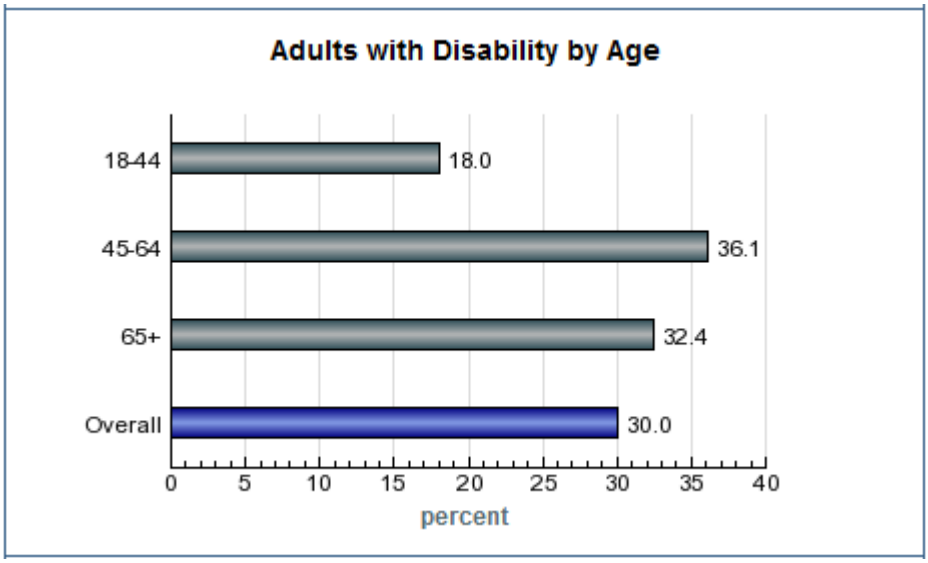
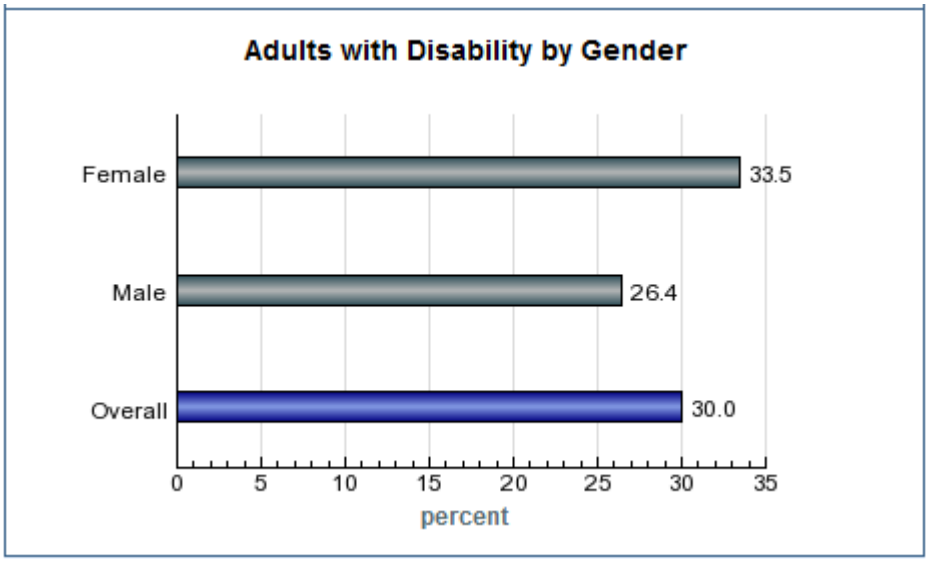
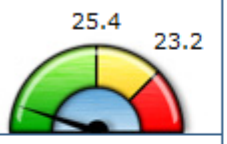



Adults with Disability by Age
18-44
45-64
65+
Overall
18.0
36.1
32.4
30.0
0
5
10
15
20
25
30
35
40
percent


Adults with Disability by Gender
Female
Male
Overall
33.5
26.4
30.0
0
5
10
15
20
25
30
35
percent



Red < 23.2
Green >= 25.4
In-between = Yellow
Unit: percent
View the Legend

Adult Fruit and Vegetable Consumption

Value:	30.7 percent
Measurement Period:	2007
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Exercise, Nutrition, & Weight Health / Diabetes Health / Heart Disease & Stroke

What is this Indicator?
This indicator shows the percentage of adults who eat five or more servings of fruits and vegetables per day.

Why this is important: It is essential to eat a fresh, healthy and balanced diet in order to maintain a healthy weight and prevent chronic disease. Numerous studies have shown a clear link between the amount and variety of fruits and vegetables consumed and rates of chronic diseases, especially cancer. According to the World Cancer Research Fund International, about 35 percent of all cancers can be prevented through increased fruit and vegetable consumption. The USDA currently recommends four and one-half cups (nine servings) of fruits and vegetables daily for a 2,000-calorie diet, with higher or lower amounts depending on the caloric level. Despite the benefits, many people still do not eat recommended levels of fruits and vegetables. This is particularly true of consumers with lower incomes and education levels.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Behavioral Risk Factor Surveillance System

URL of Source: http://www.cdc.gov/brfss/index.htm

URL of Data: http://www.floridacharts.com/charts/brfss.aspx

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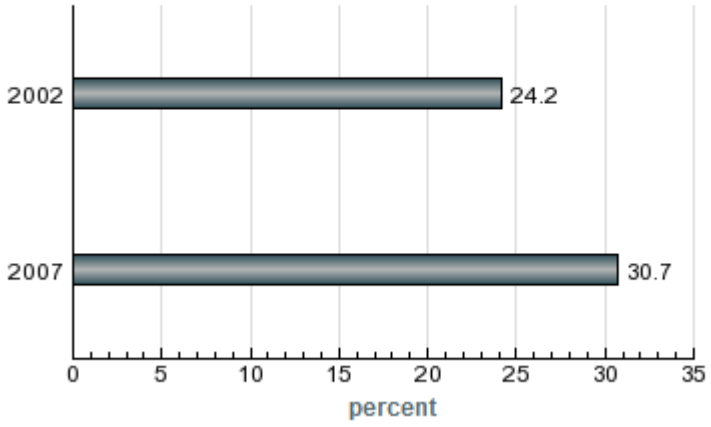
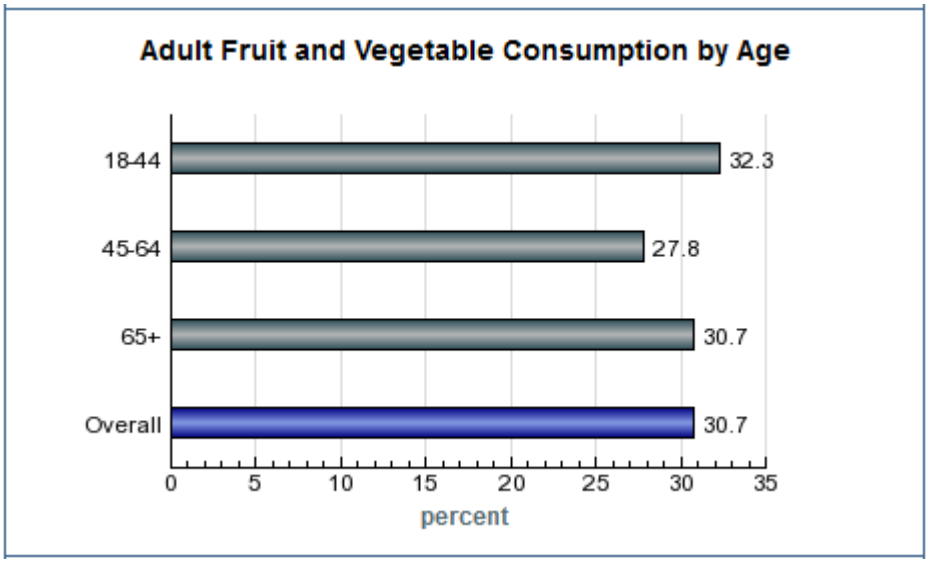
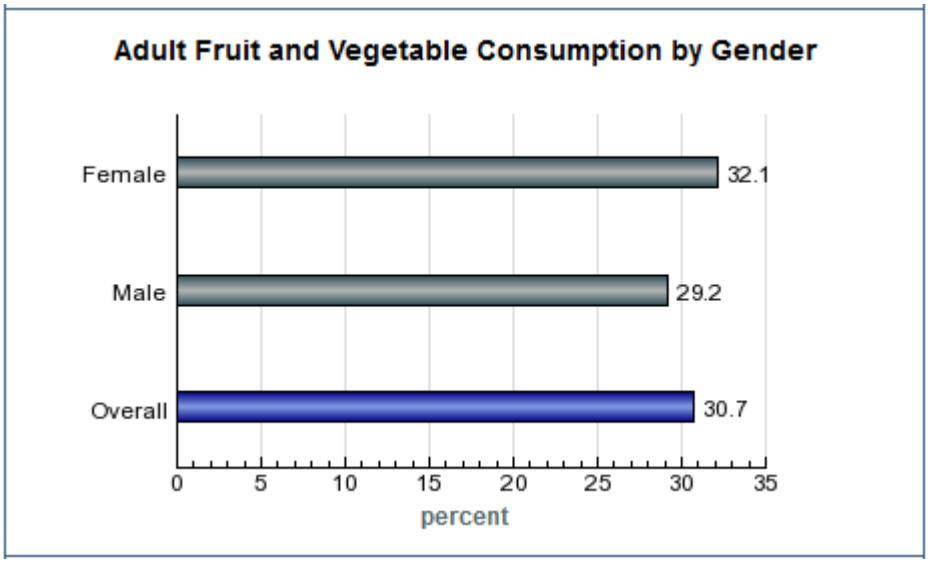
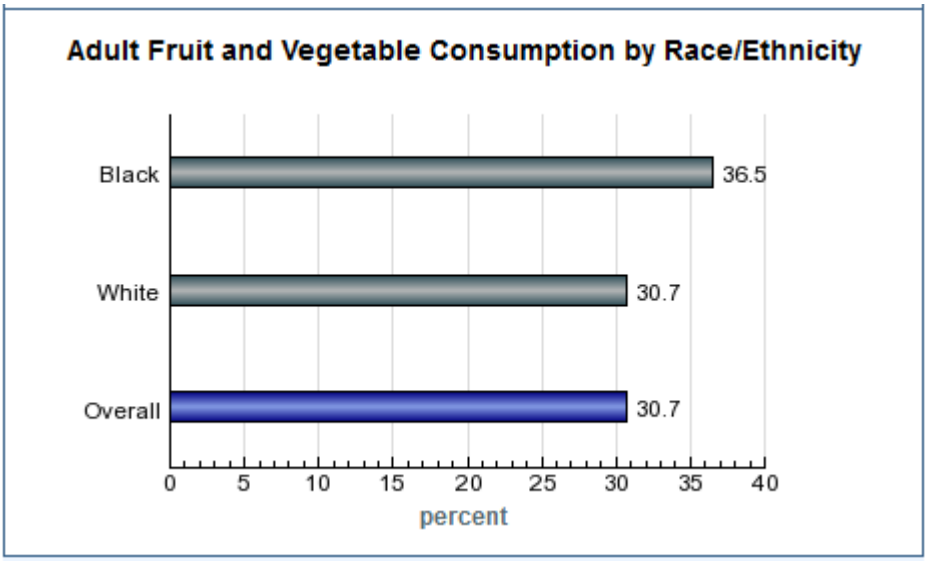
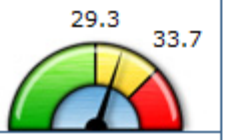
Time Series Data




Adult Fruit and Vegetable Consumption by Age
18-44
45-64
65+
Overall
32.3
27.8
30.7
30.7
0
5
10
15
20
25
30
35
percent


Adult Fruit and Vegetable Consumption by Gender
Female
Male
Overall
32.1
29.2
30.7
0
5
10
15
20
25
30
35
percent

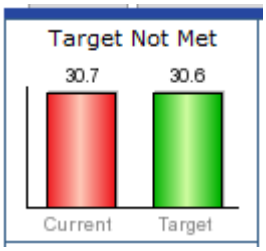

Adult Fruit and Vegetable Consumption by Race/Ethnicity
Black
White
Overall
36.5
30.7
30.7
0
5
10
15
20
25
30
35
40
percent



Red > 33.7
Green <= 29.3
In-between = Yellow
Unit: percent
View the Legend

Adults who are Obese

Value:	30.7 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Exercise, Nutrition, & Weight Health / Diabetes Health / Heart Disease & Stroke



What is this Indicator?
This indicator shows the percentage of adults (aged 18 and up) who are obese according to the Body Mass Index (BMI). The BMI is calculated by taking a person's weight and dividing it by their height squared in metric units. (BMI = Weight (Kg)/[Height (cm) ^ 2]) A BMI >=30 is considered obese.

Why this is important: The percentage of obese adults is an indicator of the overall health and lifestyle of a community. Obesity increases the risk of many diseases and health conditions including heart disease, Type 2 diabetes, cancer, hypertension, stroke, liver and gallbladder disease, respiratory problems, and osteoarthritis. Losing weight and maintaining a healthy weight help to prevent and control these diseases. Being obese also carries significant economic costs due to increased healthcare spending and lost earnings.

The Healthy People 2020 national health target is to reduce the proportion of adults (ages 20 and up) who are obese to 30.6%.

Technical Note: The distribution is based on data from 67 Florida counties.

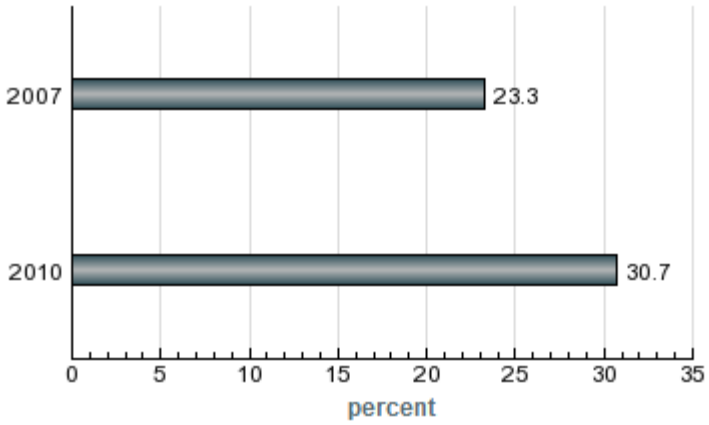
Source: Florida Behavioral Risk Factor Surveillance System

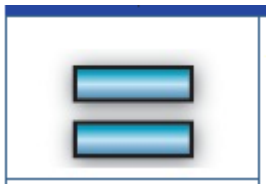
URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

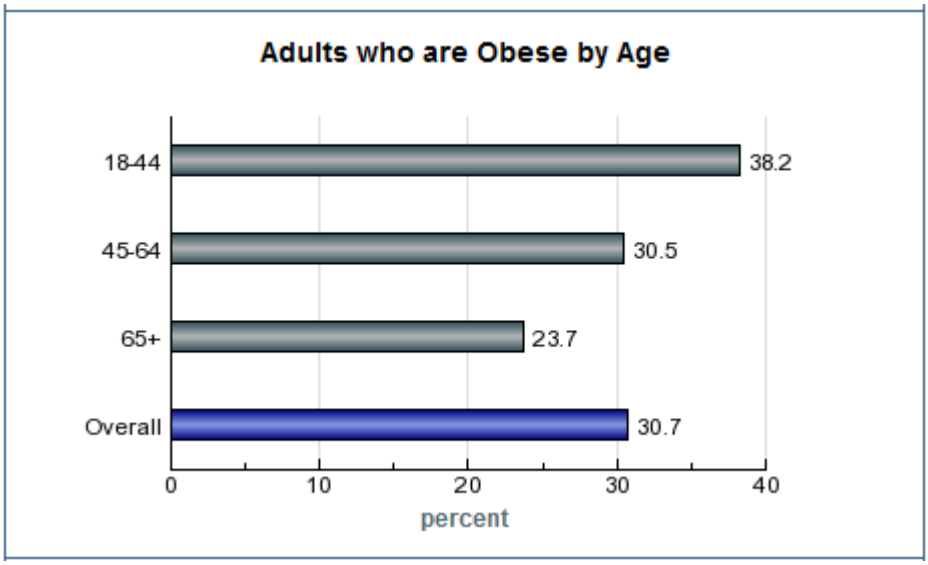
URL of Data: http://www.floridacharts.com/charts/brfss.aspx

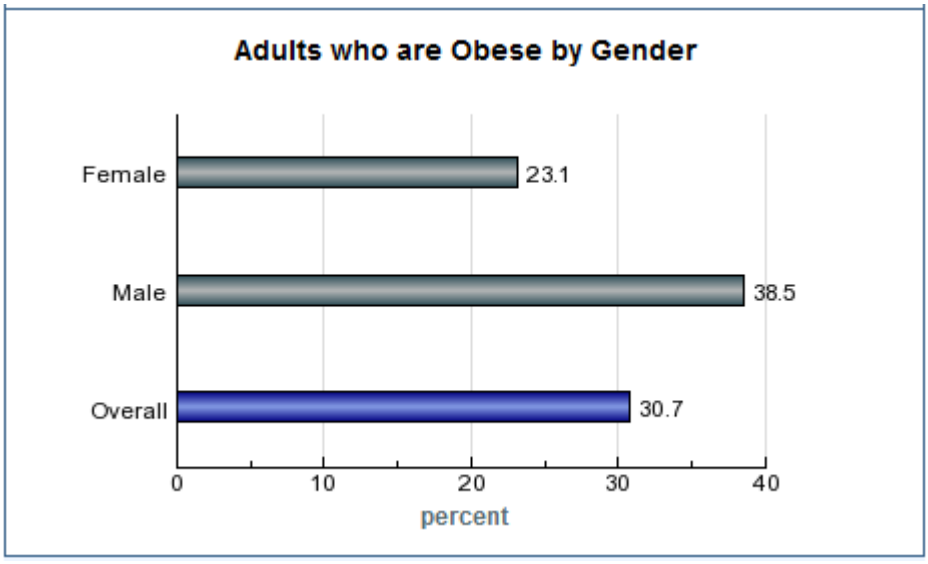
Maintained By: Healthy Communities Institute

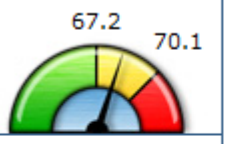
Time Series Data






Adults who are Obese by Age
18-44
45-64
65+
Overall
38.2
30.5
23.7
30.7
0
10
20
30
40
percent


Adults who are Obese by Gender
Female
Male
Overall
23.1
38.5
30.7
0
10
20
30
40
percent



Red > 70.1
Green <= 67.2
In-between = Yellow
Unit: percent
View the Legend

Adults who are Overweight or Obese

Value:	67.7 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Exercise, Nutrition, & Weight Health / Diabetes Health / Heart Disease & Stroke

What is this Indicator?
This indicator shows the percentage of adults who are overweight or obese according to the Body Mass Index (BMI). The BMI is calculated by taking a person's weight and dividing it by their height squared in metric units. (BMI = Weight (Kg)/[Height (cm) ^ 2]) A BMI between 25 and 29.9 is considered overweight and a BMI >=30 is considered obese.

Why this is important: The percentage of overweight and obese adults is an indicator of the overall health and lifestyle of a community. Obesity increases the risk of many diseases and health conditions including heart disease, Type 2 diabetes, cancer, hypertension, stroke, liver and gallbladder disease, respiratory problems, and osteoarthritis. Losing weight and maintaining a healthy weight help to prevent and control these diseases. Being overweight or obese also carries significant economic costs due to increased healthcare spending and lost earnings.

Technical Note: The distribution is based on data from 67 Florida counties.

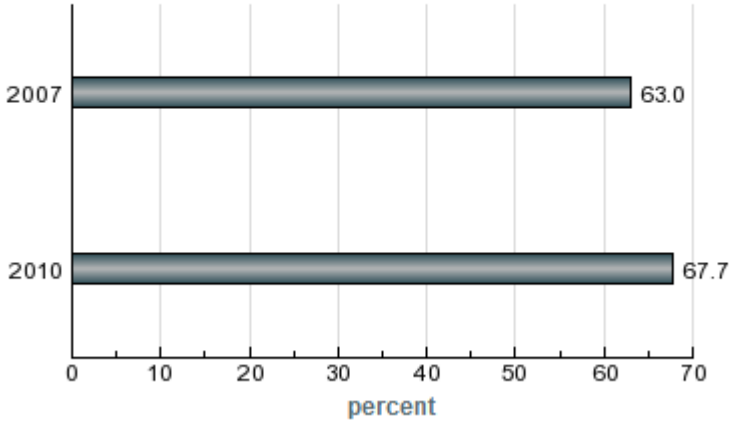
Source: Florida Behavioral Risk Factor Surveillance System

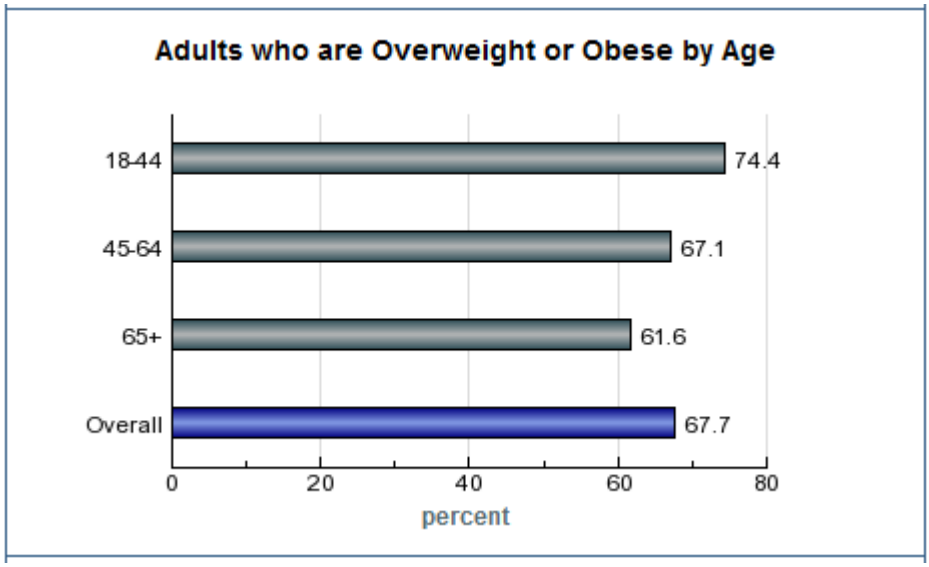
URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

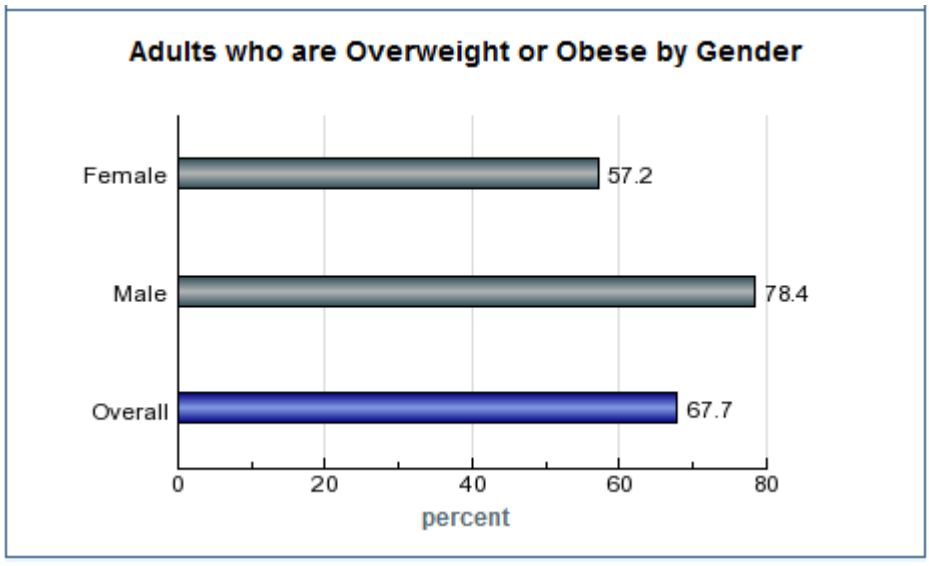
URL of Data: http://www.floridacharts.com/charts/brfss.aspx

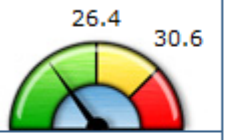
Maintained By: Healthy Communities Institute

Time Series Data




Adults who are Overweight or Obese by Age
18-44
74.4
45-64
67.1
65+
61.6
Overall
67.7
0
20
40
60
80
percent

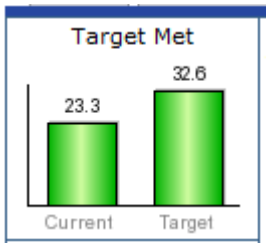

Adults who are Overweight or Obese by Gender
Female
57.2
Male
78.4
Overall
67.7
0
20
40
60
80
percent



Red > 30.6
Green <= 26.4
In-between = Yellow
Unit: percent
View the Legend

Adults who are Sedentary

Value:	23.3 percent
Measurement Period:	2007
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Exercise, Nutrition, & Weight Health / Diabetes Health / Heart Disease & Stroke



What is this Indicator?
This indicator shows the percentage of adults who do not participate in any leisure-time physical activities (physical activities or exercises other than their regular job).

Why this is important: Adults who are sedentary are at an increased their risk of many serious health conditions. These conditions include obesity, heart disease, diabetes, colon cancer, and high blood pressure. In addition, physical activity improves mood and promotes healthy sleep patterns. The American College of Sports Medicine (ACSM) recommends that adults perform physical activity three to five times each week for 20 to 60 minutes at a time to improve cardiovascular fitness and body composition. The ACSM also recommends that you include strength and flexibility training in your exercise program. If you are not currently exercising, please consult your physician before beginning any exercise program.

The Healthy People 2020 national health target is to reduce the percentage of adults who do not engage in any leisure-time physical activity to 32.6%.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Behavioral Risk Factor Surveillance System

URL of Source: http://www.cdc.gov/brfss/index.htm

URL of Data: http://www.floridacharts.com/charts/brfss.aspx

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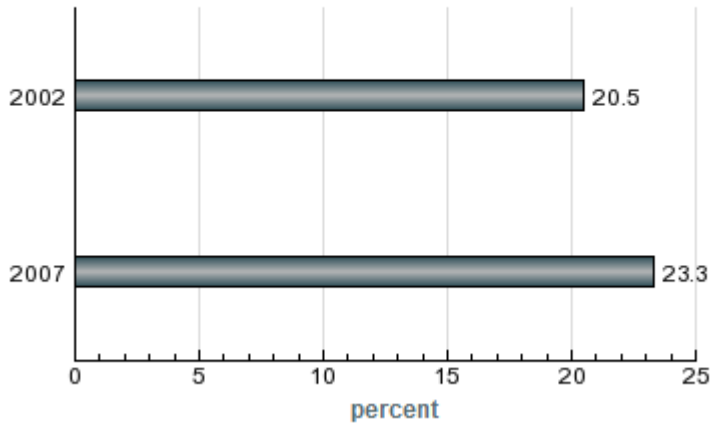
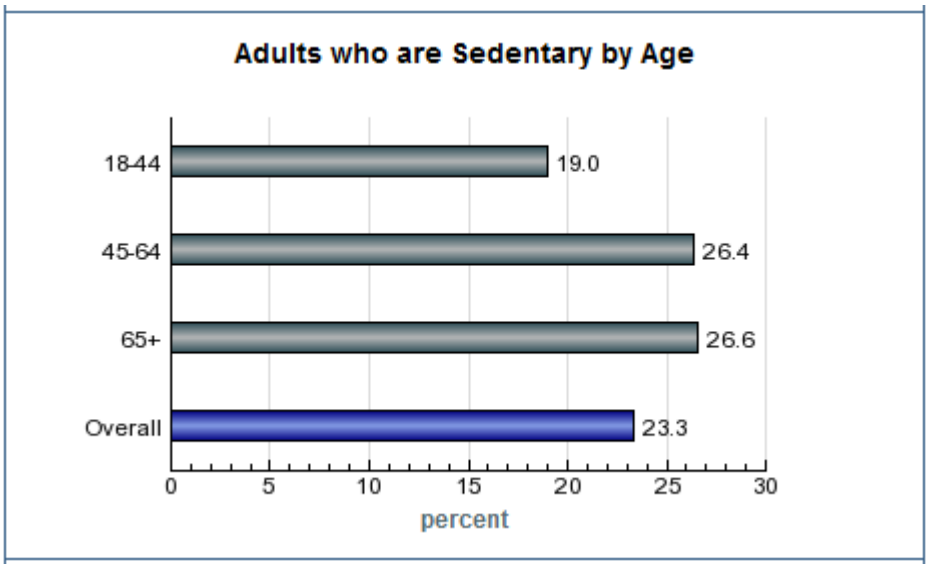
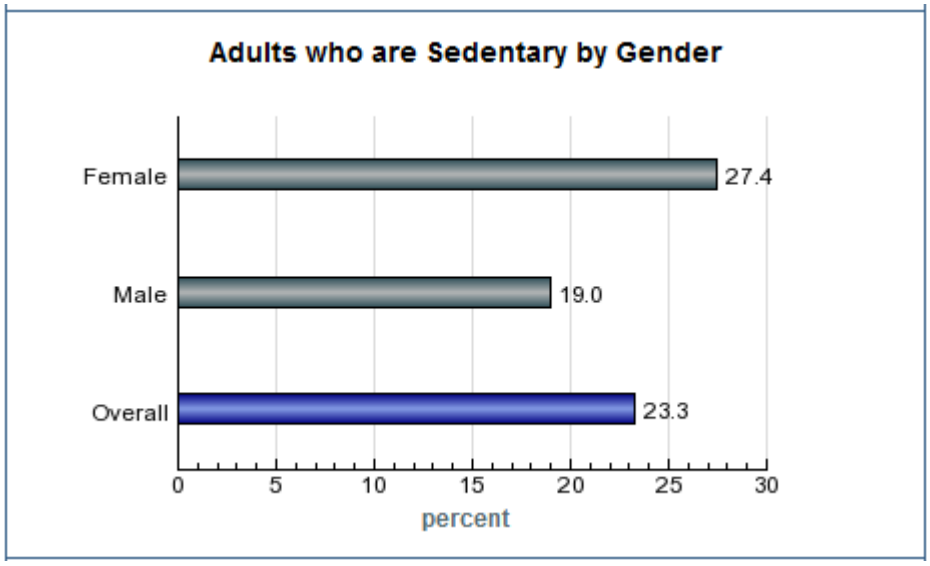
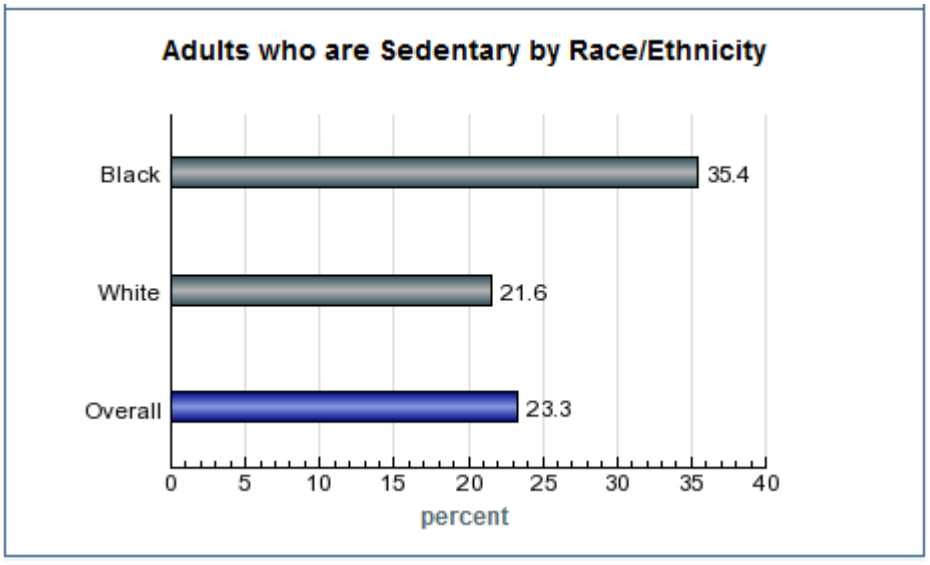
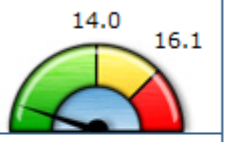
Time Series Data




Adults who are Sedentary by Age
18-44
19.0
45-64
26.4
65+
26.6
Overall
23.3
0
5
10
15
20
25
30
percent


Adults who are Sedentary by Gender
Female
27.4
Male
19.0
Overall
23.3
0
5
10
15
20
25
30
percent


Adults who are Sedentary by Race/Ethnicity
Black
35.4
White
21.6
Overall
23.3
0
5
10
15
20
25
30
35
40
percent



Red > 16.1
Green <= 14.0
In-between = Yellow
Unit: percent
View the Legend

Low-Income Preschool Obesity

Value:	8.7 percent
Measurement Period:	2009
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Health / Exercise, Nutrition, & Weight Health / Children's Health

What is this Indicator?
This indicator shows the percentage of children aged 2-4 living in households with an income less than 200% of the federal poverty level who are obese. For children aged 2-4 years, obesity is defined as BMI-for-age above 95th percentile.

Why this is important: Childhood obesity has both immediate and long-term health impacts. Children and adolescents who are obese are at greater risk for bone and joint problems, sleep apnea, and are more likely than normal weight peers to be teased and stigmatized which can lead to poor self-esteem. Moreover, obese youth are more likely to have risk factors for cardiovascular disease, such as high cholesterol or high blood pressure. Finally, overweight and obese youth are more likely than normal weight peers to be overweight or obese adults and are therefore at risk for the associated adult health problems, including heart disease, type 2 diabetes, stroke, several types of cancer, and osteoarthritis.

Childhood obesity has more than tripled in the past thirty years. Healthy eating and regular physical activity can lower the risk of becoming obese.

Technical Note: The distribution is based on data from 2,745 U.S. counties and county equivalents.

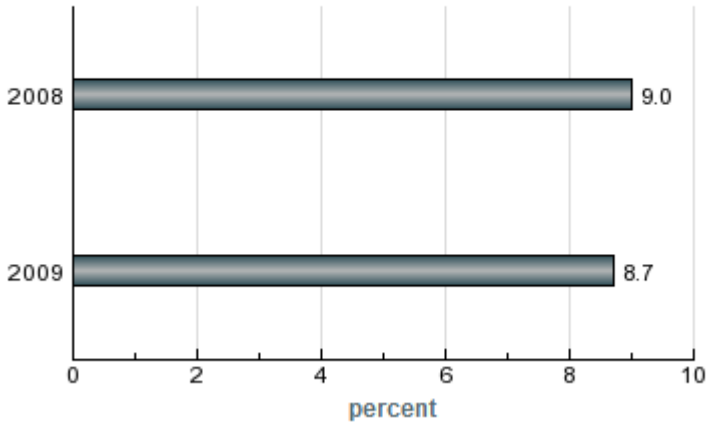
Source: U.S. Department of Agriculture - Food Environment Atlas

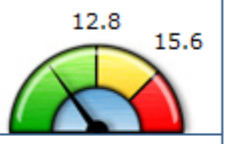
URL of Source: http://www.ers.usda.gov/FoodAtlas/

URL of Data: http://www.ers.usda.gov/FoodAtlas/downloadData.htm

Maintained By: Healthy Communities Institute

Time Series Data





Red > 15.6
Green <= 12.8
In-between = Yellow
Unit: percent
View the Legend

Teens who are Obese

Value:	11.1 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Exercise, Nutrition, & Weight Health / Teen & Adolescent Health Health / Diabetes

What is this Indicator?
This indicator shows the percentage of high school students who are obese (i.e., >= 95th percentile for body mass index, by age and sex, based on reference data). The BMI is calculated by taking a person's weight and dividing it by their height squared in metric units. (BMI = Weight (Kg)/[Height (cm) ^ 2])

Why this is important: Obesity is a serious health concern for children and adolescents. Obese and overweight children and adolescents are at risk for multiple health problems during their youth and as adults. Obese children and adolescents are more likely to become obese as adults. In a recent study, it was found that nearly 80% of children who were overweight as teenagers were obese adults at age 25. Obese and overweight youth are more likely to have risk factors associated with cardiovascular diseases, such as high blood pressure, high cholesterol, and Type 2 diabetes. Losing weight helps to prevent and control multiple chronic diseases and improves quality of life.

Technical Note: The distribution is based on data from 66 Florida counties.

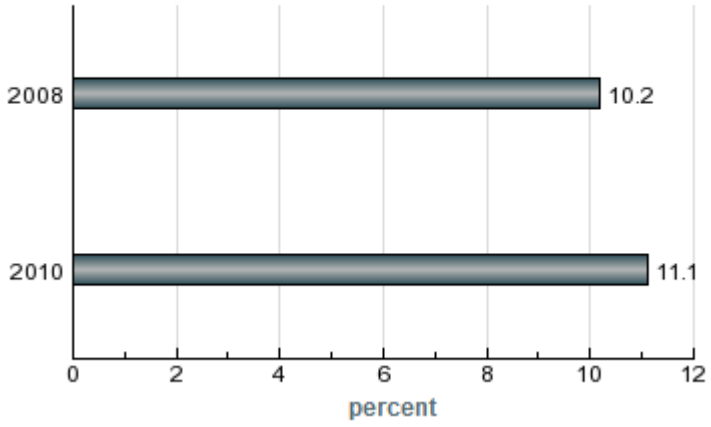
Source: Florida Department of Health, Bureau of Epidemiology

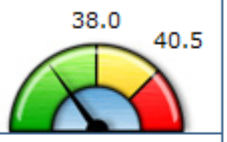
URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/index.html

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=03...

Maintained By: Healthy Communities Institute

Time Series Data





Red > 40.5
Green <= 38.0
In-between = Yellow
Unit: percent
View the Legend

Teens without Sufficient Physical Activity

Value:	36.5 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Exercise, Nutrition, & Weight Health / Teen & Adolescent Health Health / Diabetes

What is this Indicator?
This indicator shows the percentage of high school students without sufficient vigorous physical activity. Sufficient vigorous physical activity is defined as participating in physical activity that does make you sweat or breathe hard for 20 minutes or more, on three or more of the 7 days preceding the survey.

Why this is important: Inactivity during childhood and adolescence increases the likelihood of being inactive as an adult. Adults who are less active are at greater risk of dying of heart disease and developing diabetes, colon cancer, and high blood pressure. Half of American youths aged 12-21 are not vigorously active on a regular basis, and about 14 percent of young people report no recent physical activity. Participation in all types of physical activity declines drastically with both age and grade in school. Being physically active helps build and maintain healthy bones, muscles, and joints. It helps control and maintain weight, build lean muscle, and reduce fat. In addition, exercise helps to prevent or delay the development of high blood pressure. Moderate amounts of physical activity are recommended for people of all ages.

Technical Note: The distribution is based on data from 66 Florida counties.

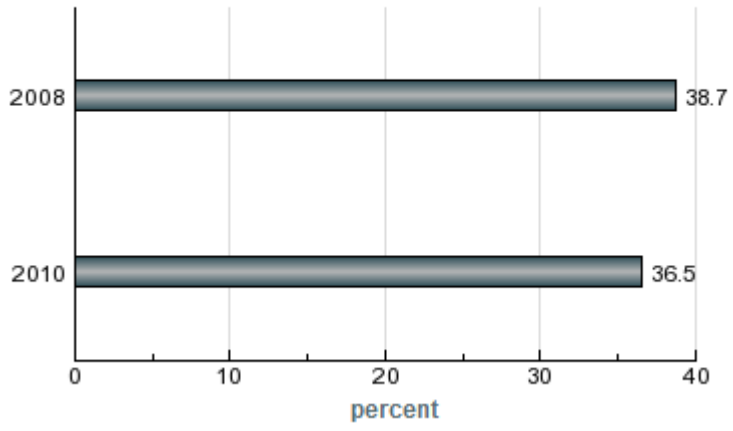
Source: Florida Department of Health, Bureau of Epidemiology

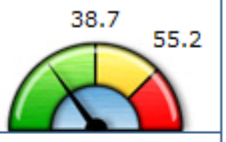
URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/index.html

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=03...

Maintained By: Healthy Communities Institute

Time Series Data





Red > 55.2
Green <= 38.7
In-between = Yellow
Unit: live births/1,000 females aged 15-19
View the Legend

Teen Birth Rate

Value:	25.6 live births/1,000 females aged 15-19
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Family Planning Health / Maternal, Fetal & Infant Health Health / Teen & Adolescent Health

What is this Indicator?
This indicator shows the birth rate in live births per 1,000 females aged 15-19 years.

Why this is important: Teen birth is of concern for the health outcomes of both the mother and the child. Pregnancy and delivery can be harmful to teenagers' health, as well as social and educational development. Babies born to teen mothers are more likely to be born preterm and/or low birth weight. Responsible sexual behavior is one of the ten leading health indicators of Healthy People 2020. Responsible sexual behavior reduces unintended pregnancies, and thus reduces the number of births to adolescent females.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Department of Health, Bureau of Vital Statistics

URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

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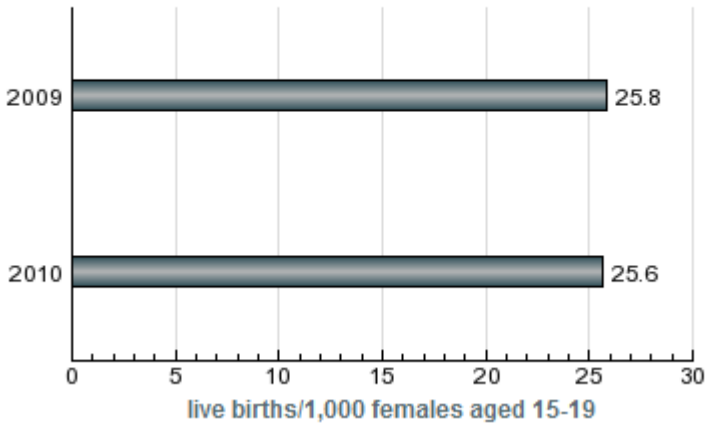
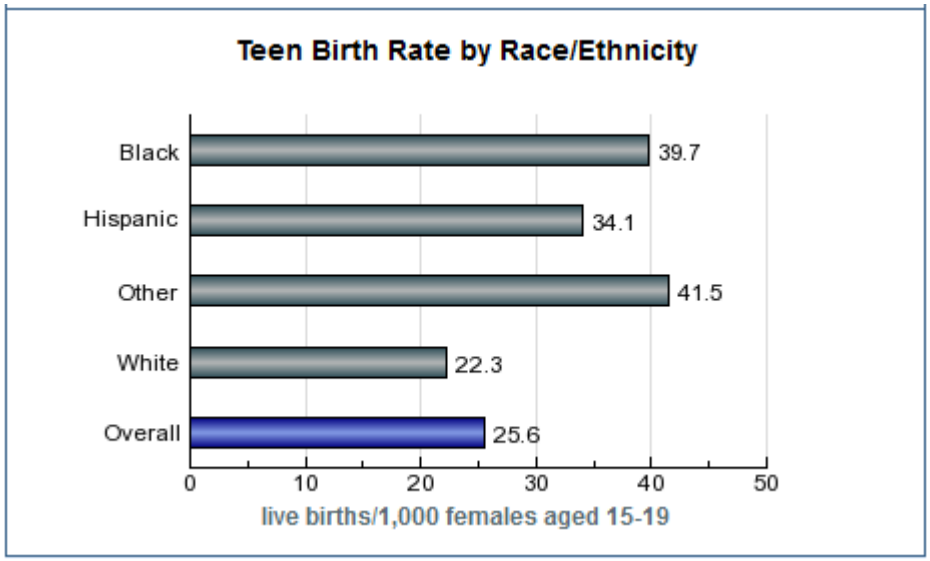
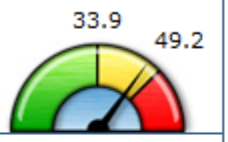
Maintained By: Healthy Communities Institute

Time Series Data



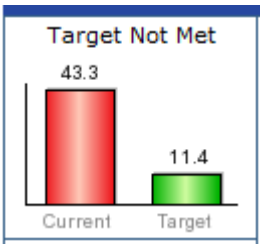

Teen Birth Rate by Race/Ethnicity
Black
Hispanic
Other
White
Overall
39.7
34.1
41.5
22.3
25.6
0
10
20
30
40
50
live births/1,000 females aged 15-19



Red > 49.2
Green <= 33.9
In-between = Yellow
Unit: cases/100,000 population
View the Legend

Salmonella Incidence Rate

Value:	43.3 cases/100,000 population
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Food Safety Health / Immunizations & Infectious Diseases



What is this Indicator?
This indicator shows the salmonellosis incidence rate in cases per 100,000 population.

Why this is important: Salmonellosis is an infection with *Salmonella* bacterium. *Salmonella* are usually transmitted to humans by eating foods contaminated with animal feces. Contaminated foods are often of animal origin, such as beef, poultry, milk, or eggs, but any food, including vegetables, may become contaminated. Most persons infected with *Salmonella* develop diarrhea, fever, and abdominal cramps 12 to 72 hours after infection. The illness usually lasts 4 to 7 days, and most persons recover without treatment. To prevent salmonellosis, people should not eat raw or undercooked eggs, poultry, or meat. Thoroughly cooking food kills *Salmonella* . Individuals should wash hands and surfaces often, separate raw meat, poultry, and seafood from other foods to prevent contamination, and refrigerate perishables promptly.

Every year, approximately 40,000 cases of salmonellosis are reported in the United States. Because many milder cases are not diagnosed or reported, the actual number of infections may be thirty or more times greater.

The Healthy People 2020 national health target is to reduce the salmonella incidence rate to 11.4 cases per 100,000 population.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Department of Health, Bureau of Epidemiology

URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/index.html

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=01...

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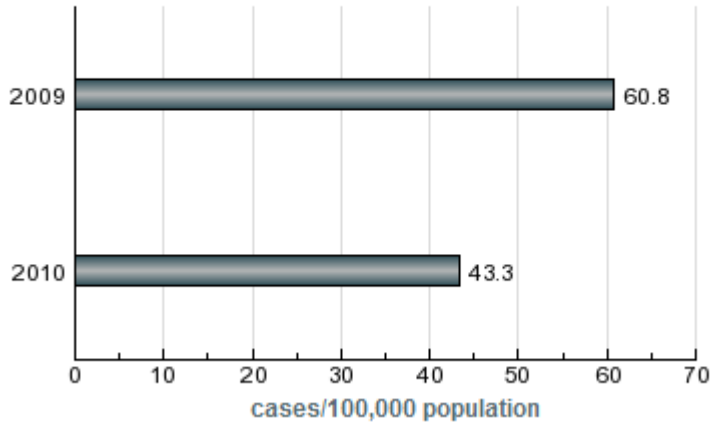
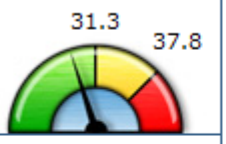
Time Series Data





Red > 37.8
Green <= 31.3
In-between = Yellow
Unit: deaths/100,000 population
View the Legend

Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke)

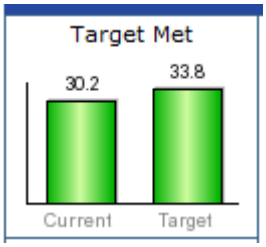
Value: 30.2 deaths/100,000 population

Measurement Period: 2010

Location: County : Brevard

Comparison: FL Counties

Categories: Health / Heart Disease & Stroke
Health / Mortality Data



What is this Indicator?
This indicator shows the age-adjusted death rate per 100,000 population due to cerebrovascular disease and stroke.

Why this is important: Cerebrovascular diseases rank third among the leading causes of death in the U.S. Cerebrovascular disease can cause a stroke. A stroke occurs when blood vessels carrying oxygen to the brain become blocked or burst, thereby cutting off the brain's supply of oxygen. Lack of oxygen causes brain cells to die which can lead to death or disability. Each year, approximately 795,000 people in the U.S. will suffer a new or recurrent stroke. Although people of all ages may have strokes, the risk more than doubles with each decade of life after age 55. The most important modifiable risk factors for stroke are high blood pressure, high cholesterol and diabetes mellitus.

The Healthy People 2020 national health target is to reduce the stroke deaths to 33.8 deaths per 100,000 population.

Technical Note: The distribution is based on data from 67 Florida counties.

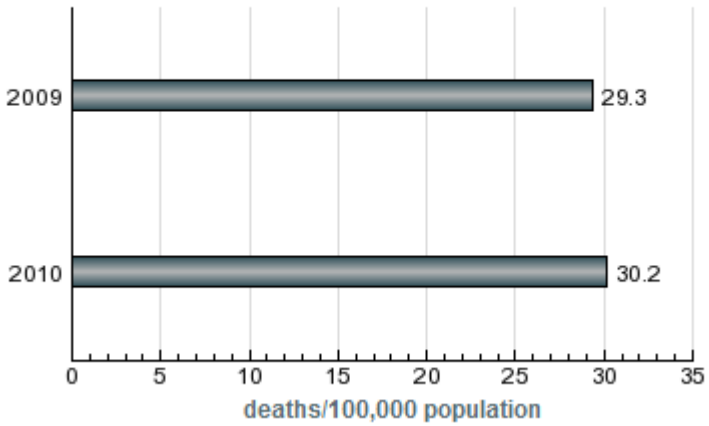
Source: Florida Department of Health, Bureau of Vital Statistics

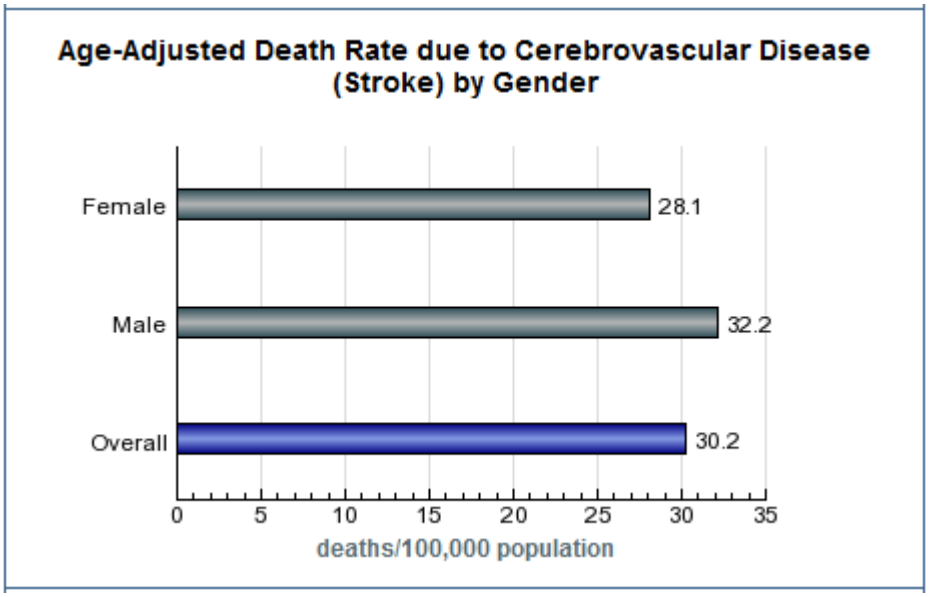
URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

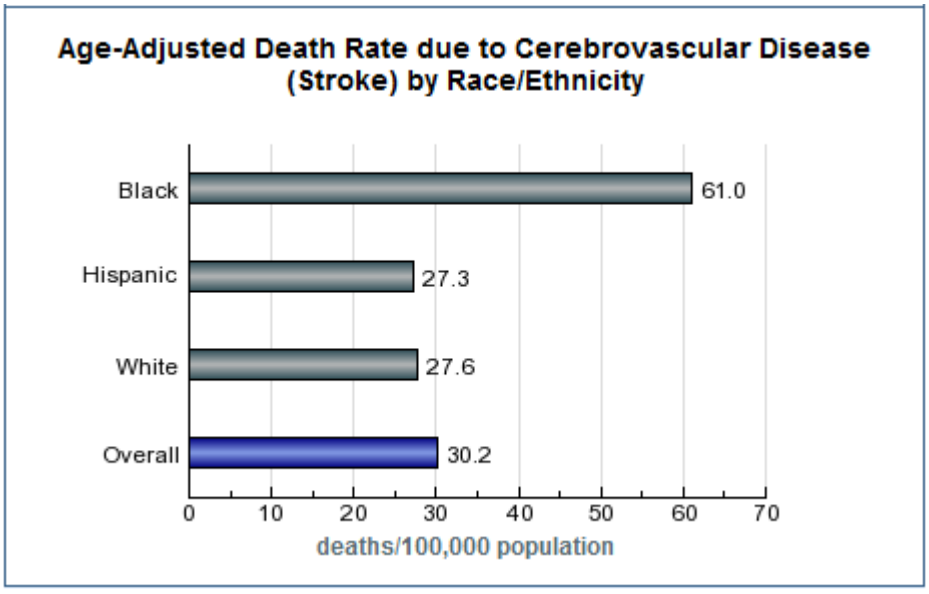
URL of Data: http://www.floridacharts.com/charts/DataViewer/DeathViewe...

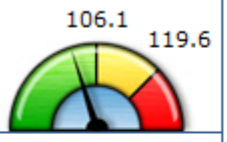
Maintained By: Healthy Communities Institute

Time Series Data




Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke) by Gender
Female
28.1
Male
32.2
Overall
30.2
0
5
10
15
20
25
30
35
deaths/100,000 population


Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke) by Race/Ethnicity
Black
61.0
Hispanic
27.3
White
27.6
Overall
30.2
0
10
20
30
40
50
60
70
deaths/100,000 population



Red > 119.6
Green <= 106.1
In-between = Yellow
Unit: deaths/100,000 population
View the Legend

Age-Adjusted Death Rate due to Coronary Heart Disease

Value:	101.5 deaths/100,000 population
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Heart Disease & Stroke Health / Mortality Data

What is this Indicator?
This indicator shows the age-adjusted death rate per 100,000 population due to coronary heart disease.

Why this is important: Coronary heart disease occurs when the coronary arteries become narrowed or clogged by fat and cholesterol deposits (plaques) and cannot supply enough blood to the heart. As the arteries narrow, or as the plaques rupture, the flow of blood to the heart can slow or stop, causing chest pain (angina), shortness of breath, a heart attack or other symptoms. Nationally, Coronary Heart Disease makes up the majority of heart disease deaths. In 2006, 425,425 Americans died of coronary heart disease. Heart disease is also very costly economically with projected costs in 2010 of $316 billion on health care services, medications, and lost productivity.

The Healthy People 2020 national health target is to reduce the coronary heart disease death rate to 100.8 deaths per 100,000 population.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Department of Health, Bureau of Vital Statistics

URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

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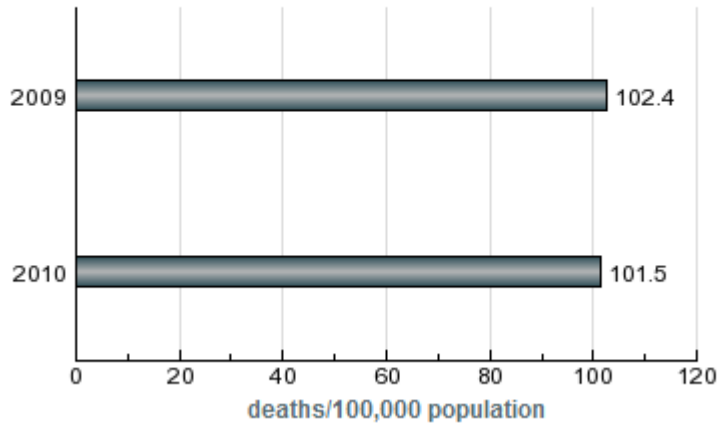
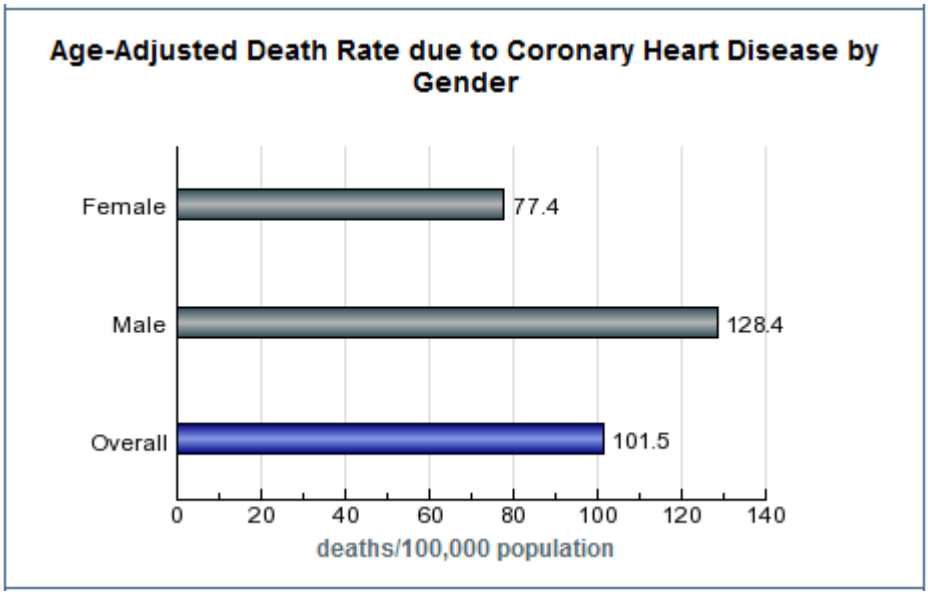
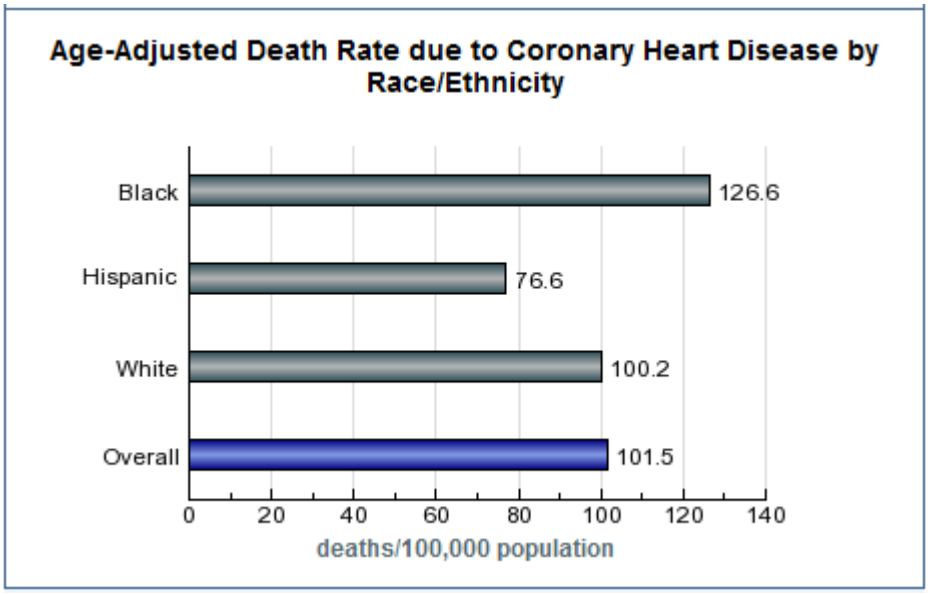
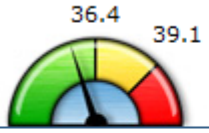
Time Series Data




Age-Adjusted Death Rate due to Coronary Heart Disease by Gender
Female
77.4
Male
128.4
Overall
101.5
0
20
40
60
80
100
120
140
deaths/100,000 population

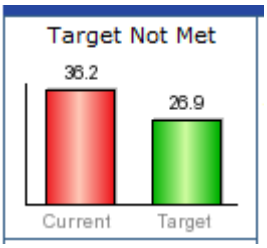

Age-Adjusted Death Rate due to Coronary Heart Disease by Race/Ethnicity
Black
126.6
Hispanic
76.6
White
100.2
Overall
101.5
0
20
40
60
80
100
120
140
deaths/100,000 population



Red > 39.1
Green <= 36.4
In-between = Yellow
Unit: percent
View the Legend

High Blood Pressure Prevalence

Value:	36.2 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Heart Disease & Stroke Health / Exercise, Nutrition, & Weight



What is this Indicator?
This indicator shows the percentage of adults who have been told they have high blood pressure. Normal blood pressure should be less than 120/80 mm Hg for an adult. Blood pressure above this level (140/90 mm Hg or higher) is considered high (hypertension).

Why this is important: High blood pressure is the number one modifiable risk factor for stroke. In addition to stroke, high blood pressure also contributes to heart attacks, heart failure, kidney failure, and atherosclerosis. The higher your blood pressure, the greater your risk of heart attack, heart failure, stroke, and kidney disease. In the United States, one in three adults has high blood pressure, and nearly one-third of these people are not aware that they have it. Because there are no symptoms associated with high blood pressure, it is often called the "silent killer." The only way to tell if you have high blood pressure is to have your blood pressure checked. High blood pressure can occur in people of any age or sex; however, it is more common among those over age 35. It is particularly prevalent in African Americans, older adults, obese people, heavy drinkers, and women taking birth control pills. Blood pressure can be controlled through lifestyle changes including eating a heart-healthy diet, limiting alcohol, avoiding tobacco, controlling your weight, and staying physically active.

The Healthy People 2020 national health target is to reduce the proportion of adults aged 18 years and older with high blood pressure to 26.9%.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Behavioral Risk Factor Surveillance System

URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

URL of Data: http://www.floridacharts.com/charts/brfss.aspx

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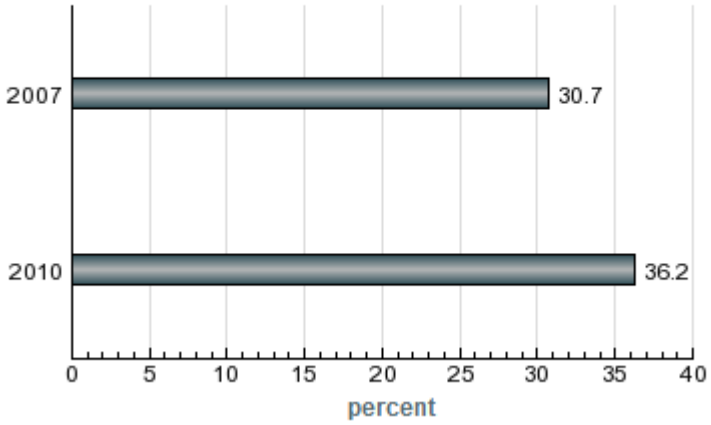
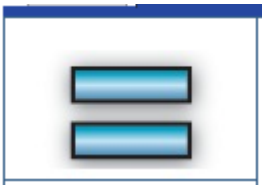
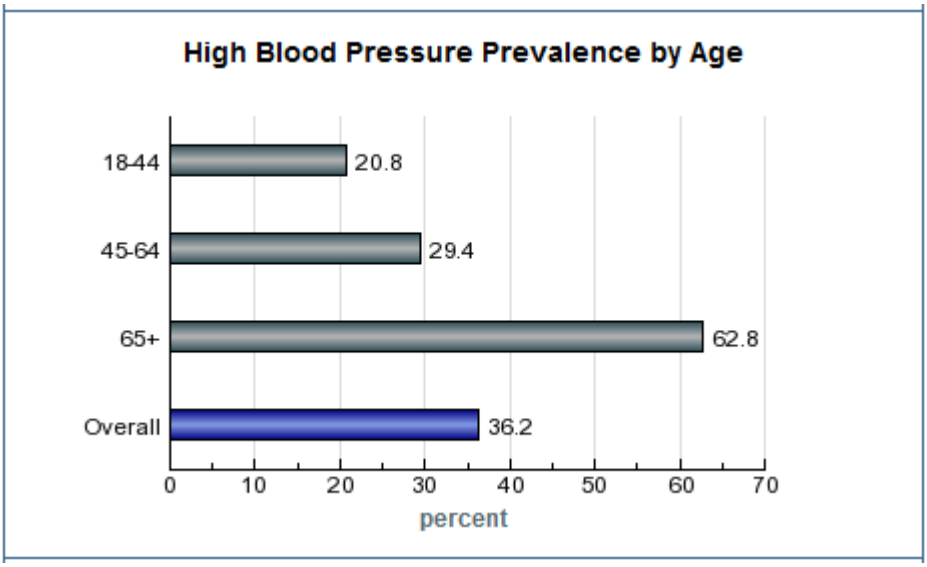
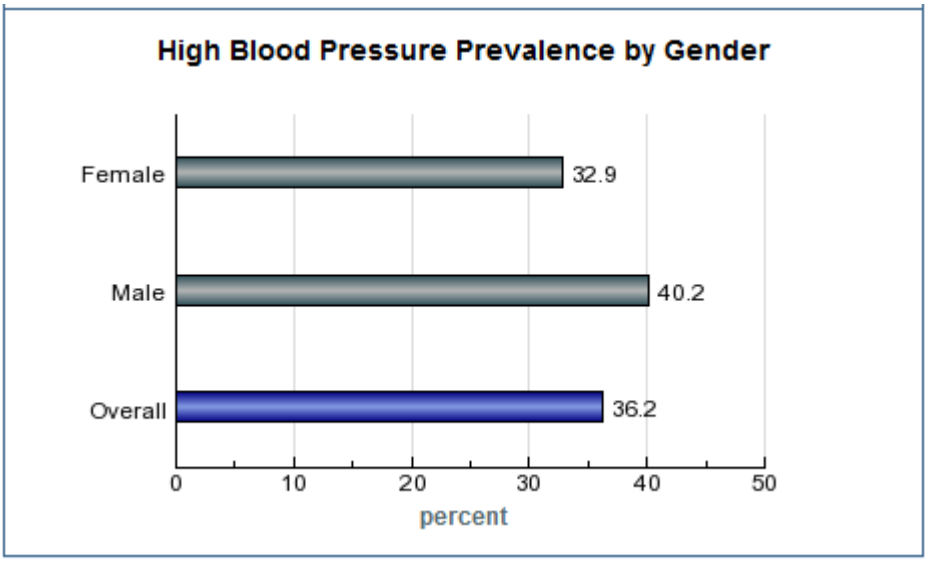
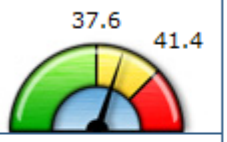





High Blood Pressure Prevalence by Age
18-44
20.8
45-64
29.4
65+
62.8
Overall
36.2
0
10
20
30
40
50
60
70
percent

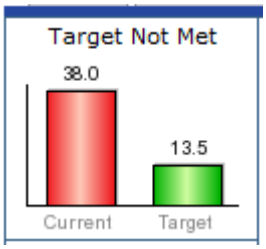

High Blood Pressure Prevalence by Gender
Female
32.9
Male
40.2
Overall
36.2
0
10
20
30
40
50
percent



Red > 41.4
Green <= 37.6
In-between = Yellow
Unit: percent
View the Legend

High Cholesterol Prevalence

Value:	38.0 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Heart Disease & Stroke Health / Exercise, Nutrition, & Weight



What is this Indicator?
This indicator shows the percentage of adults who have had their blood cholesterol checked and have been told that it was high.

Why this is important: High blood cholesterol is one of the major risk factors for heart disease. Studies show that the higher your blood cholesterol level, the greater your risk for developing heart disease or having a heart attack. Heart disease is the number one killer of men and women in the United States. Every year about 785,000 Americans have a first heart attack. Another 470,000 who have already had one or more heart attacks have another attack. In 2006, over 630,000 Americans died from heart disease. High blood cholesterol does not cause symptoms, so it is important to find out what your cholesterol numbers are. Lowering cholesterol levels lessens the risk for developing heart disease and reduces the chance of having a heart attack. Lowering high cholesterol levels is important for people of all ages, both men and women.

The Healthy People 2020 national health target is to reduce the proportion of adults aged 20 years and older with high total blood cholesterol levels to 13.5%.

Technical Note: The distribution is based on data from 66 Florida counties.

Source: Florida Behavioral Risk Factor Surveillance System

URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

URL of Data: http://www.floridacharts.com/charts/brfss.aspx

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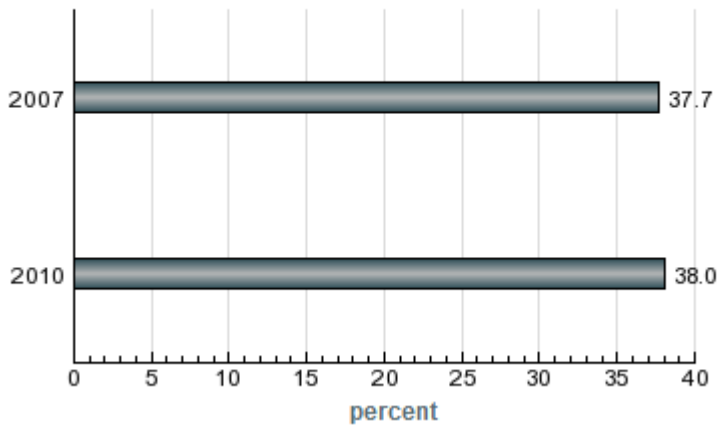
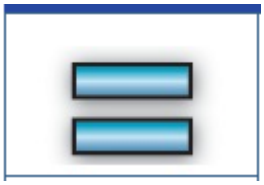
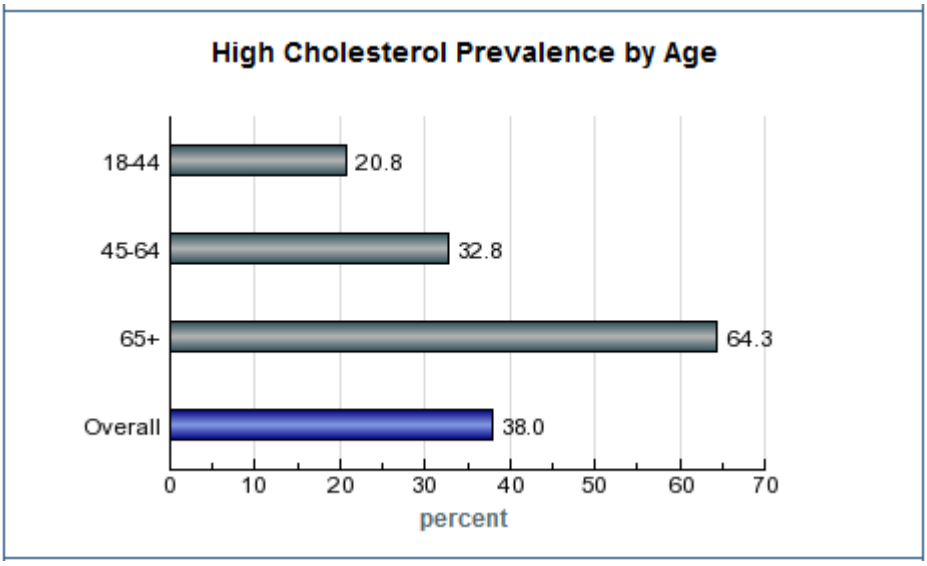
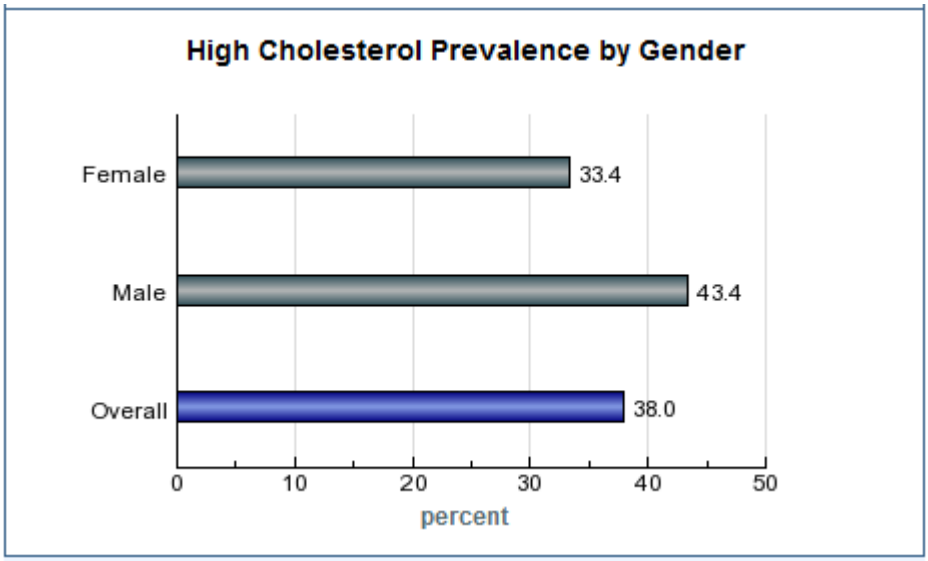
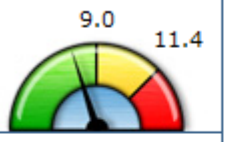
Time Series Data






High Cholesterol Prevalence by Age
18-44
20.8
45-64
32.8
65+
64.3
Overall
38.0
0
10
20
30
40
50
60
70
percent


High Cholesterol Prevalence by Gender
Female
33.4
Male
43.4
Overall
38.0
0
10
20
30
40
50
percent



Red > 11.4
Green <= 9.0
In-between = Yellow
Unit: deaths/100,000 population
View the Legend

Age-Adjusted Death Rate due to Influenza and Pneumonia

Value:	8.2 deaths/100,000 population
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Immunizations & Infectious Diseases Health / Respiratory Diseases Health / Mortality Data

What is this Indicator?
This indicator shows the age-adjusted death rate per 100,000 population due to influenza and pneumonia.

Why this is important: In 2007, influenza and pneumonia ranked eighth among the leading causes of death in the United States. The two diseases are traditionally reported together, as pneumonia is frequently a complication of influenza. Influenza is a contagious disease caused by a virus. The number of influenza deaths can fluctuate considerably from one year to the next as influenza can be caused by more virulent virus strains in some years than others as the viruses constantly mutate. Pneumonia is a serious infection of the lungs that develops when the immune system is weakened. It is mainly caused by bacteria, viruses, and mycoplasmas. Typically there are more deaths from pneumonia than influenza. Persons most at risk include the elderly, the very young, and the immune-compromised.

Technical Note: The distribution is based on data from 67 Florida counties.

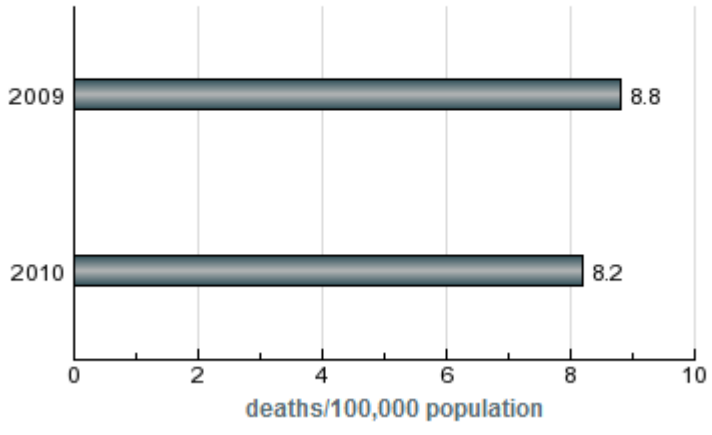
Source: Florida Department of Health, Bureau of Vital Statistics

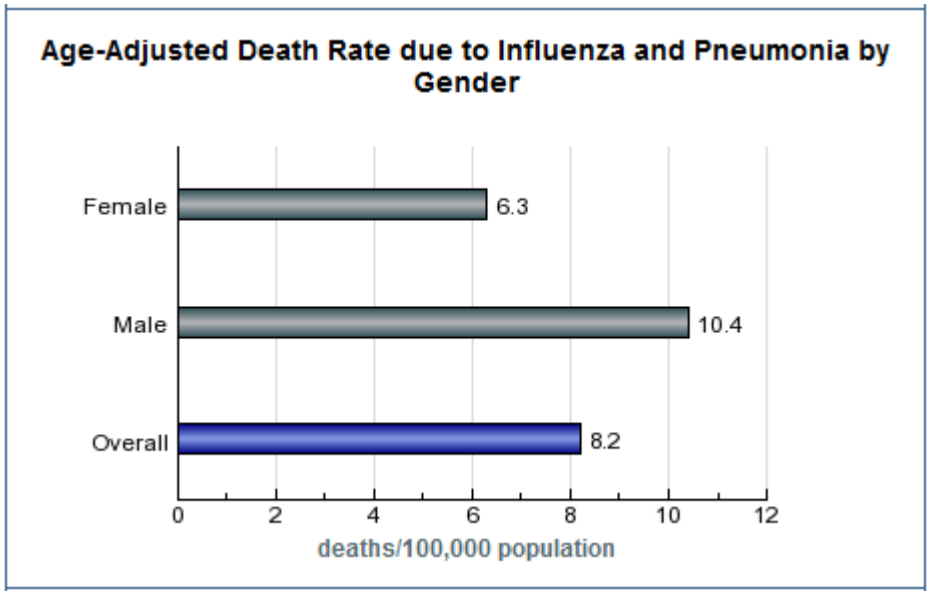
URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

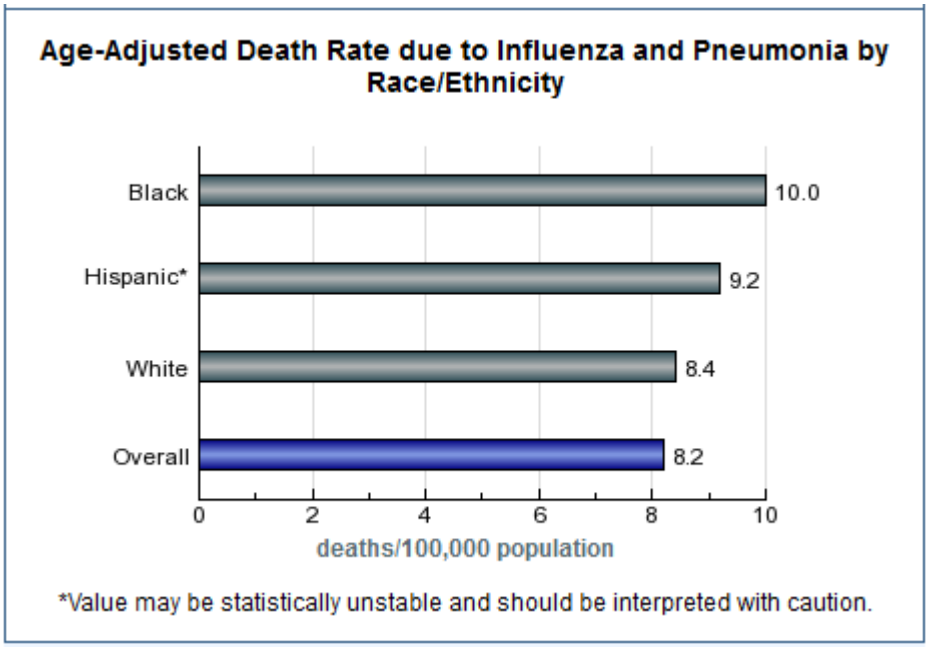
URL of Data: http://www.floridacharts.com/charts/DataViewer/DeathViewe...

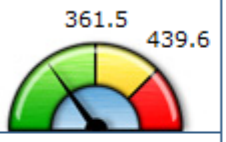
Maintained By: Healthy Communities Institute

Time Series Data




Age-Adjusted Death Rate due to Influenza and Pneumonia by Gender
Female
6.3
Male
10.4
Overall
8.2
0
2
4
6
8
10
12
deaths/100,000 population


Age-Adjusted Death Rate due to Influenza and Pneumonia by Race/Ethnicity
Black
10.0
Hispanic*
9.2
White
8.4
Overall
8.2
0
2
4
6
8
10
deaths/100,000 population
*Value may be statistically unstable and should be interpreted with caution.



Red > 439.6
Green <= 361.5
In-between = Yellow
Unit: cases/100,000 population
View the Legend

Chlamydia Incidence Rate

Value:	285.5 cases/100,000 population
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Immunizations & Infectious Diseases

What is this Indicator?
This indicator shows the chlamydia incidence rate in cases per 100,000 population.

Why this is important: Chlamydia, the most frequently reported bacterial sexually transmitted disease in the United States, is caused by the bacterium, Chlamydia trachomatis. Although symptoms of chlamydia are usually mild or absent, serious complications that cause irreversible damage, including infertility, can occur "silently" before a woman ever recognizes a problem. Chlamydia also can cause discharge from the penis of an infected man. Under-reporting of chlamydia is substantial because most people with chlamydia are not aware of their infections and do not seek testing.

Technical Note: The distribution is based on data from 67 Florida counties.

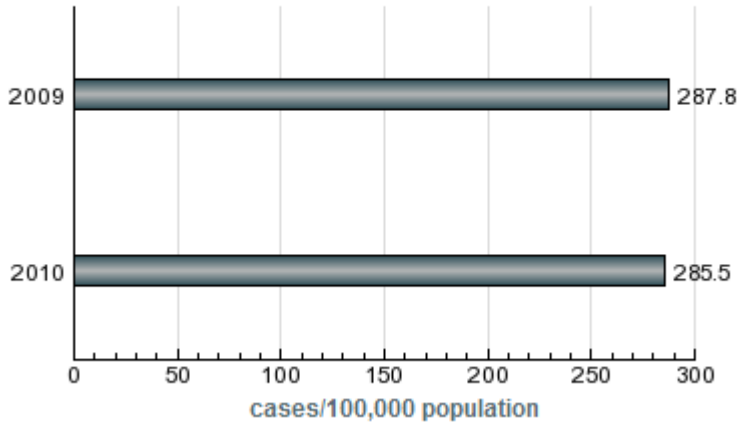
Source: Florida Department of Health, Bureau of STD Prevention & Control

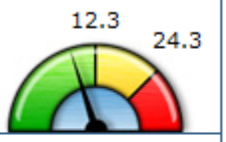
URL of Source: http://www.doh.state.fl.us/Disease_ctrl/std/index.html

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=01...

Maintained By: Healthy Communities Institute

Time Series Data





Red > 24.3
Green <= 12.3
In-between = Yellow
Unit: cases/100,000 population
View the Legend

HIV Incidence Rate

Value:	11.5 cases/100,000 population
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Immunizations & Infectious Diseases Health / Other Chronic Diseases

What is this Indicator?
This indicator shows the HIV incidence rate in cases per 100,000 population.

Why this is important: The Centers for Disease Control and Prevention estimates that approximately one million Americans were living with HIV as of 2006 and estimates that one in five people infected with HIV do not know they are infected. Men who have sex with men of all races, African Americans, and Hispanics/Latinos are disproportionately affected by HIV. More HIV infections occur among young people under age 30 than any other age group.

The total number of people living with HIV in the U.S. is increasing because fewer people die of complications from HIV each year. Improvements in treatment and improved access to treatment allow people with HIV to live longer and healthier lives. The annual number of new HIV infections has remained relatively stable in the U.S. in recent years; however, more than 55,000 new cases are reported annually and HIV/AIDS remains a significant cause of illness, disability, and death in the U.S.

Technical Note: The distribution is based on data from 67 Florida counties.

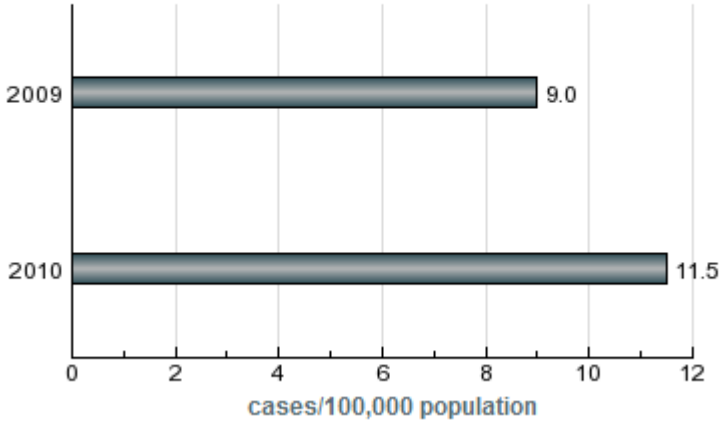
Source: Florida Department of Health, Bureau of HIV/AIDS

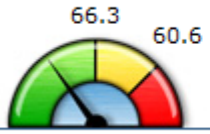
URL of Source: http://www.doh.state.fl.us/disease_ctrl/aids/index.html

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=01...

Maintained By: Healthy Communities Institute

Time Series Data





Red < 60.6
Green >= 66.3
In-between = Yellow
Unit: percent
View the Legend

Influenza Vaccination Rate 65+

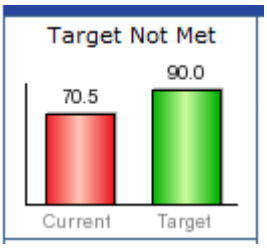
Value: 70.5 percent

Measurement Period: 2010

Location: County : Brevard

Comparison: FL Counties

Categories: Health / Immunizations & Infectious Diseases
Health / Older Adults & Aging
Health / Respiratory Diseases



What is this Indicator?
This indicator shows the percentage of adults aged 65 and older who received the influenza vaccination in the past year.

Why this is important: Influenza is a contagious disease caused by the influenza virus. It can lead to pneumonia and can be dangerous for people with heart or breathing conditions. Infection with influenza can cause high fever, diarrhea and seizures in children. It is estimated that 226,000 people are hospitalized each year due to influenza and 36,000 die - mostly the elderly. The seasonal influenza vaccine can prevent serious illness and death. The Centers for Disease Control and Prevention (CDC) recommends annual vaccinations to prevent the spread of influenza.

The Healthy People 2020 national health target is to increase the proportion of adults aged 65 years and older who receive an influenza vaccination to 90%.

Technical Note: The distribution is based on data from 67 Florida counties.

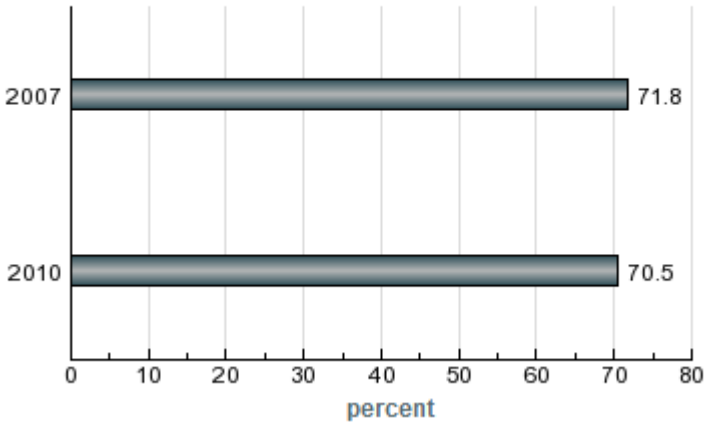
Source: Florida Behavioral Risk Factor Surveillance System

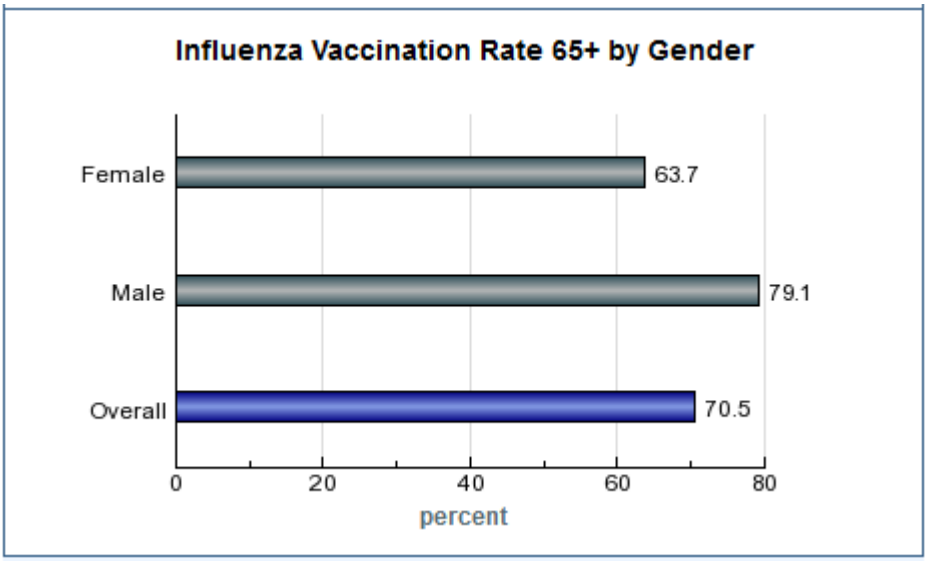
URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

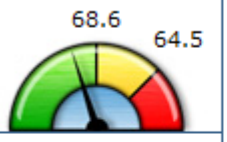
URL of Data: http://www.floridacharts.com/charts/brfss.aspx

Maintained By: Healthy Communities Institute

Time Series Data



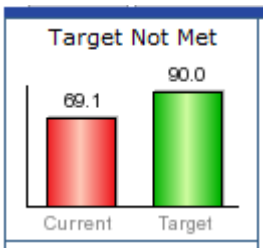

Influenza Vaccination Rate 65+ by Gender
Female
63.7
Male
79.1
Overall
70.5
0
20
40
60
80
percent



Red < 64.5
Green >= 68.6
In-between = Yellow
Unit: percent
View the Legend

Pneumonia Vaccination Rate 65+

Value:	69.1 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Immunizations & Infectious Diseases Health / Older Adults & Aging Health / Respiratory Diseases



What is this Indicator?
This indicator shows the percentage of adults aged 65 years and older who have ever received a pneumococcal (pneumonia) vaccine.

Why this is important: Pneumococcal pneumonia is a serious condition characterized by high fever, cough, shortness of breath, and meningitis. It is the leading cause of vaccine-preventable death and illness in the United States. Pneumococcal pneumonia kills about 1 out of every 20 people who come down with the disease. It is a contagious disease and can be spread by respiratory secretions from coughing or sneezing. The pneumococcal vaccine is very effective at preventing severe disease, hospitalization, and death. The Centers for Disease Control and Prevention (CDC) recommends the current vaccine for adults ages 65 years and older and for children ages 2 and older who are at high risk for disease.

The Healthy People 2020 national health target is to increase the proportion of adults aged 65 years and older who receive a pneumonia vaccination to 90%.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Behavioral Risk Factor Surveillance System

URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

URL of Data: http://www.floridacharts.com/charts/brfss.aspx

Maintained By: Healthy Communities Institute

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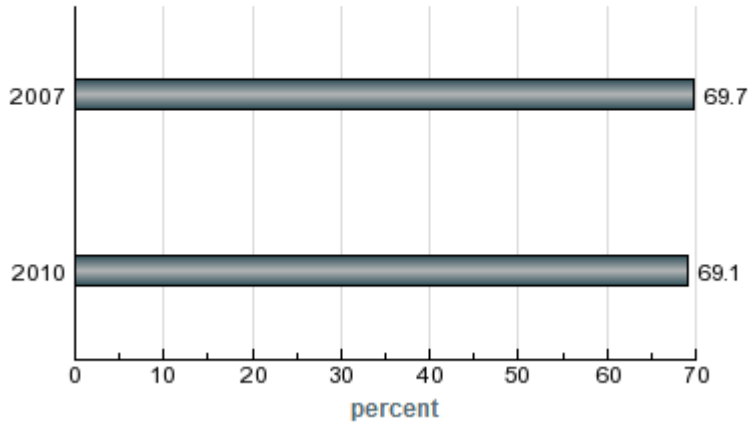
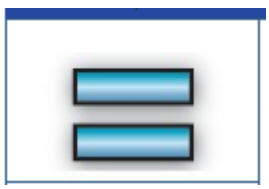
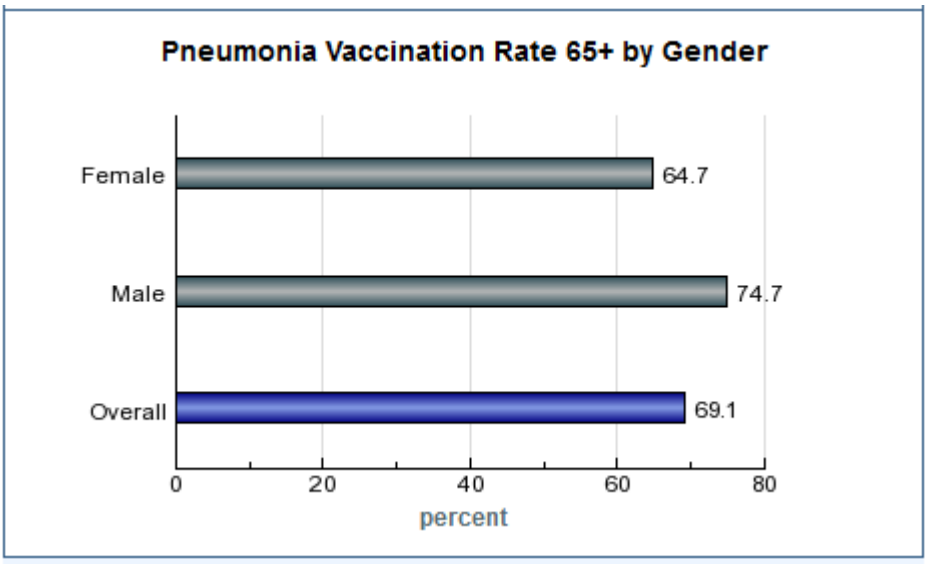
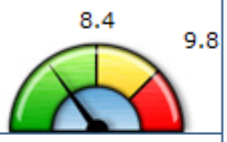




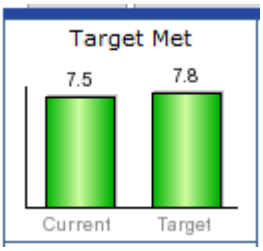

Pneumonia Vaccination Rate 65+ by Gender
Female
64.7
Male
74.7
Overall
69.1
0
20
40
60
80
percent



Red > 9.8
Green <= 8.4
In-between = Yellow
Unit: percent
View the Legend

Babies with Low Birth Weight

Value:	7.5 percent
Measurement Period:	2010
Location:	County : Brevard [View All Location Types]
Comparison:	FL Counties
Categories:	Health / Maternal, Fetal & Infant Health



What is this Indicator?
This indicator shows the percentage of births in which the newborn weighed less than 2,500 grams (5 pounds, 8 ounces).

Why this is important: Babies born with a low birth weight are more likely than babies of normal weight to require specialized medical care, and often must stay in the intensive care unit. Low birth weight is often associated with premature birth. While there have been many medical advances enabling premature infants to survive, there is still risk of infant death or long-term disability. The most important things an expectant mother can do to prevent prematurity and low birth weight are to take prenatal vitamins, stop smoking, stop drinking alcohol and using drugs, and most importantly, get prenatal care.

The Healthy People 2020 national health target is to reduce the proportion of infants born with low birth weight to 7.8%.

Technical Note: The distribution is based on data from 67 Florida counties.

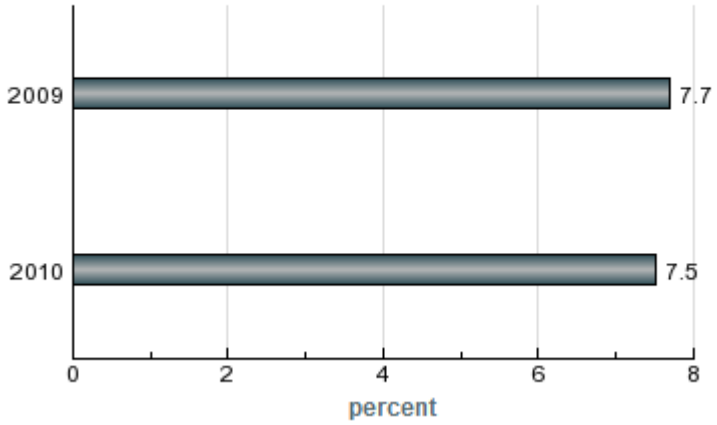
Source: Florida Department of Health, Bureau of Vital Statistics

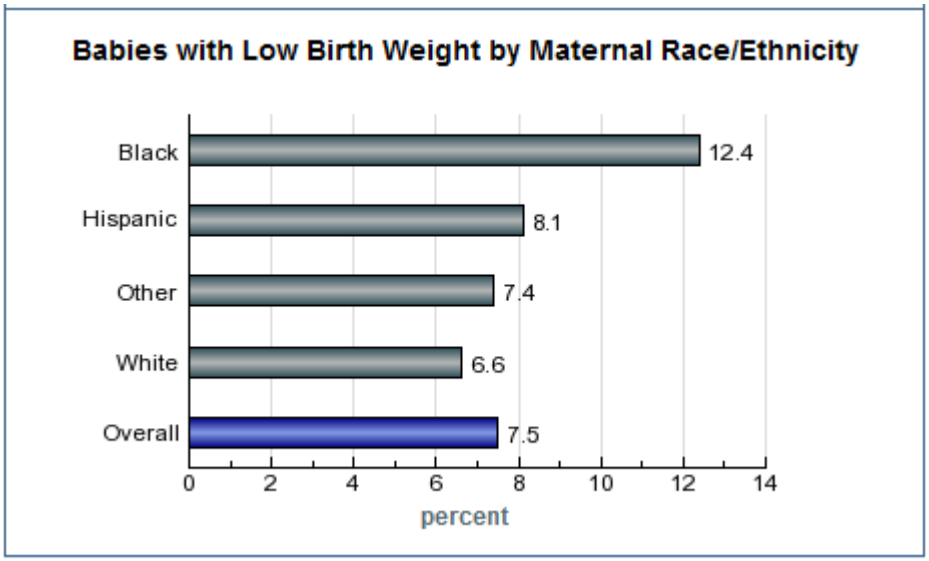
URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

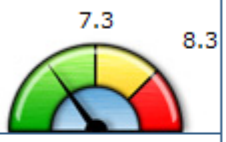
URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=03...

Maintained By: Healthy Communities Institute

Time Series Data



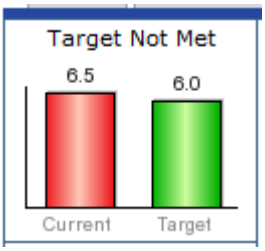

Babies with Low Birth Weight by Maternal Race/Ethnicity
Black
Hispanic
Other
White
Overall
12.4
8.1
7.4
6.6
7.5
0
2
4
6
8
10
12
14
percent



Red > 8.3
Green <= 7.3
In-between = Yellow
Unit: deaths/1,000 live births
View the Legend

Infant Mortality Rate

Value:	6.5 deaths/1,000 live births
Measurement Period:	2008-2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Maternal, Fetal & Infant Health Health / Mortality Data



What is this Indicator?
This indicator shows the mortality rate in deaths per 1,000 live births for infants within their first year of life.

Why this is important: Infant mortality rate continues to be one of the most widely used indicators of the overall health status of a community. The leading causes of death among infants are birth defects, pre-term delivery, low birth weight, Sudden Infant Death Syndrome (SIDS), and maternal complications during pregnancy.

The Healthy People 2020 national health target is to reduce the infant mortality rate to 6 deaths per 1,000 live births.

Technical Note: The distribution is based on data from 67 Florida counties. The value represents the average annualized rate.

Source: Florida Department of Health, Bureau of Vital Statistics

URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=03...

Maintained By: Healthy Communities Institute

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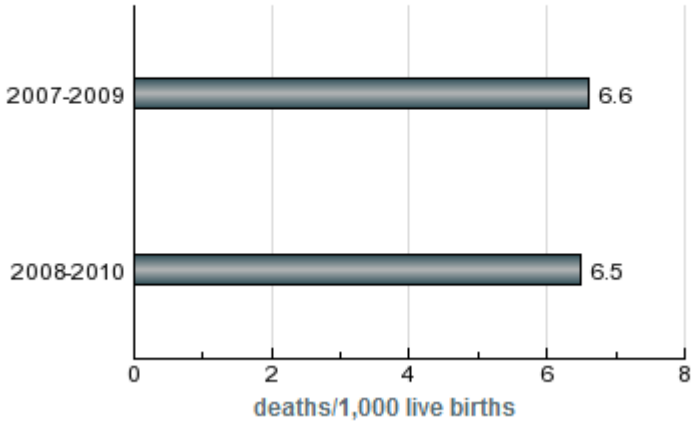
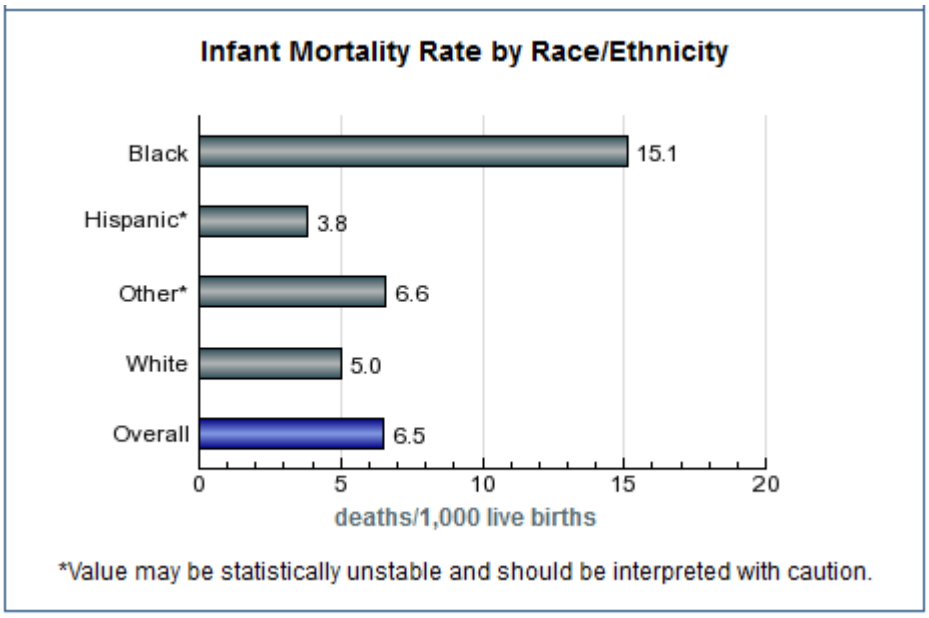
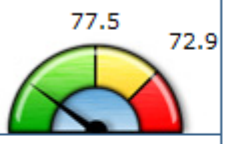


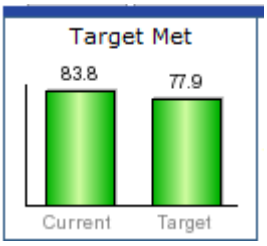

Infant Mortality Rate by Race/Ethnicity
Black
15.1
Hispanic*
3.8
Other*
6.6
White
5.0
Overall
6.5
0
5
10
15
20
deaths/1,000 live births
*Value may be statistically unstable and should be interpreted with caution.



Red < 72.9
Green >= 77.5
In-between = Yellow
Unit: percent
View the Legend

Mothers who Received Early Prenatal Care

Value:	83.8 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Maternal, Fetal & Infant Health Health / Family Planning



What is this Indicator?
This indicator shows the percentage of births to mothers who began prenatal care in the first trimester of their pregnancy.

Why this is important: Babies born to mothers who do not receive prenatal care are three times more likely to have a low birth weight and five times more likely to die than those born to mothers who do get care. Early prenatal care (i.e. care in the first trimester of a pregnancy) allows women and their health care providers to identify and, when possible, treat or correct health problems and health-compromising behaviors that can be particularly damaging during the initial stages of fetal development. Increasing the number of women who receive prenatal care, and who do so early in their pregnancies, can improve birth outcomes and lower health care costs by reducing the likelihood of complications during pregnancy and childbirth.

The Healthy People 2020 national health target is to increase the proportion of pregnant women who receive prenatal care in the first trimester to 77.9%.

Technical Note: The distribution is based on data from 67 Florida counties.

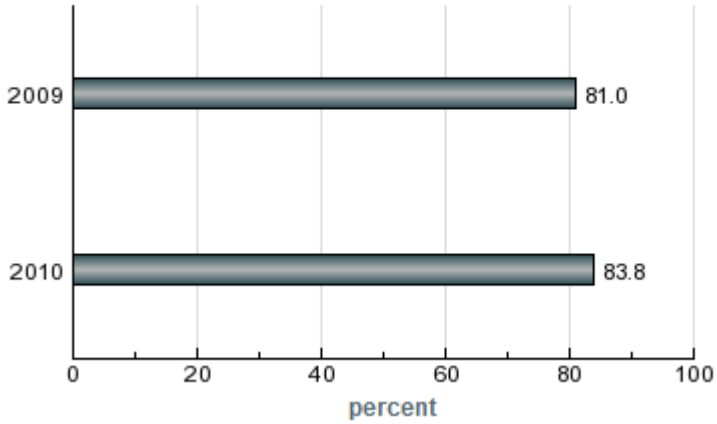
Source: Florida Department of Health, Bureau of Vital Statistics

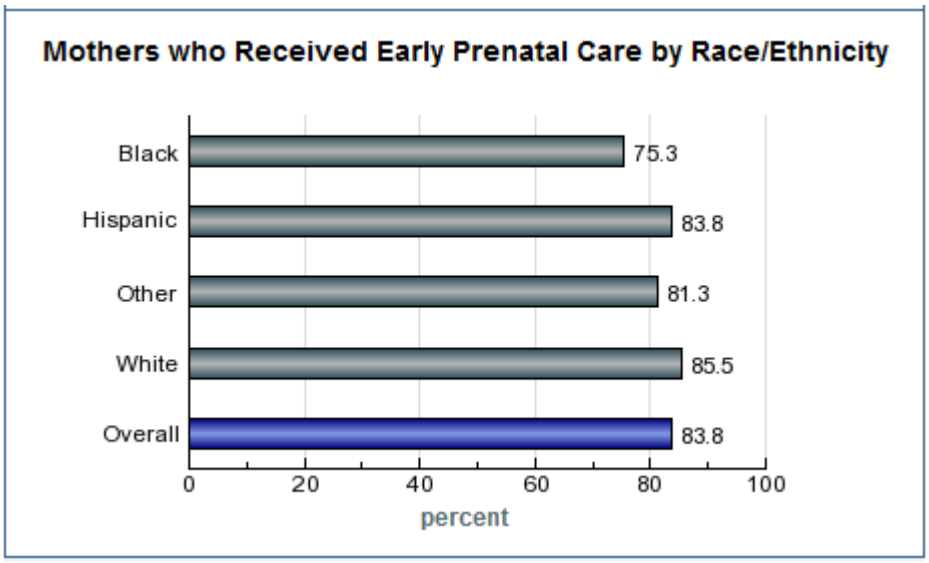
URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

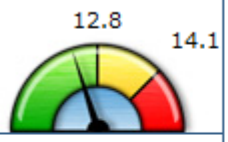
URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=03...

Maintained By: Healthy Communities Institute

Time Series Data



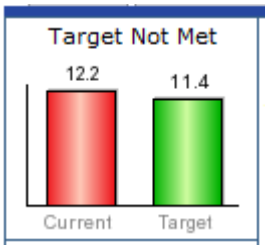

Mothers who Received Early Prenatal Care by Race/Ethnicity
Black
Hispanic
Other
White
Overall
75.3
83.8
81.3
85.5
83.8
0
20
40
60
80
100
percent



Red > 14.1
Green <= 12.8
In-between = Yellow
Unit: percent
View the Legend

Preterm Births

Value:	12.2 percent
Measurement Period:	2010
Location:	County : Brevard [View All Location Types]
Comparison:	FL Counties
Categories:	Health / Maternal, Fetal & Infant Health



What is this Indicator?
This indicator shows the percentage of births with less than 37 weeks of completed gestation.

Why this is important: Babies born premature are likely to require specialized medical care, and oftentimes must stay in intensive care nurseries. While there have been many medical advances enabling premature infants to survive, there is still risk of infant death or long-term disability. The most important things an expectant mother can do to prevent prematurity and low birth weight are to take prenatal vitamins, stop smoking, stop drinking alcohol and using drugs, and get prenatal care.

The Healthy People 2020 national health target is to reduce the proportion of infants who are born preterm to 11.4%.

Technical Note: The distribution is based on data from 67 Florida counties.

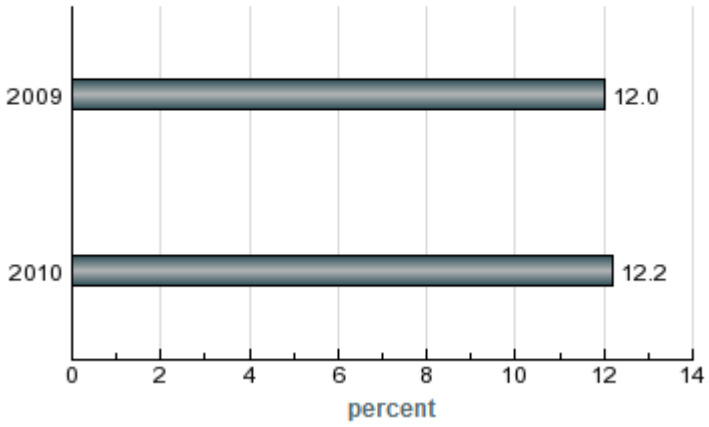
Source: Florida Department of Health, Bureau of Vital Statistics

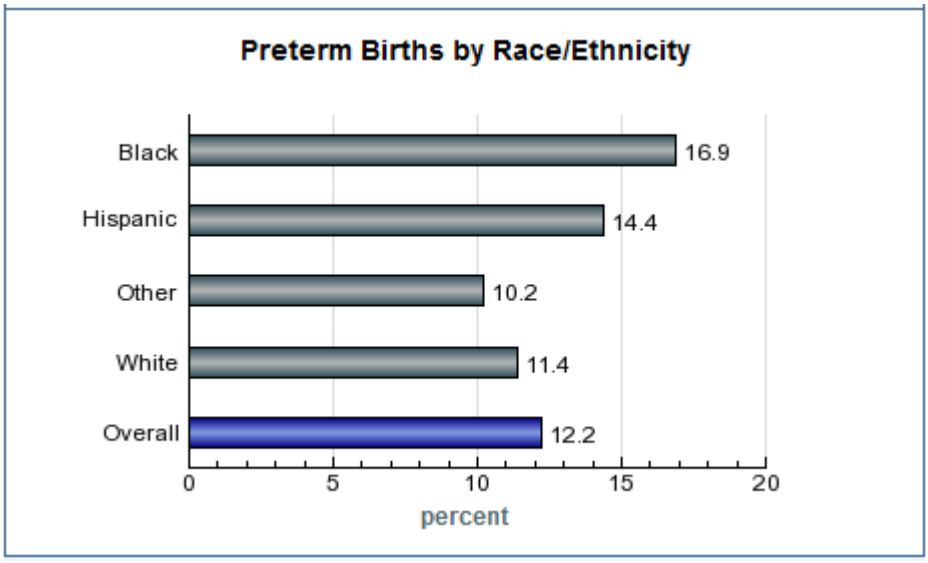
URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

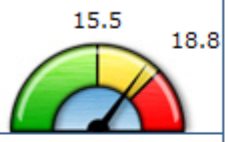
URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=03...

Maintained By: Healthy Communities Institute

Time Series Data



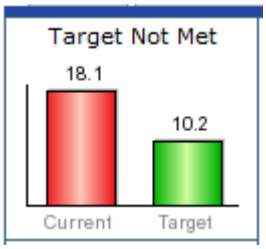

Preterm Births by Race/Ethnicity
Black
16.9
Hispanic
14.4
Other
10.2
White
11.4
Overall
12.2
0
5
10
15
20
percent



Red > 18.8
Green <= 15.5
In-between = Yellow
Unit: deaths/100,000 population
View the Legend

Age-Adjusted Death Rate due to Suicide

Value:	18.1 deaths/100,000 population
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Mental Health & Mental Disorders Health / Mortality Data



What is this Indicator?
This indicator shows the age-adjusted death rate per 100,000 population due to suicide.

Why this is important: Suicide is a major, preventable public health problem. In 2007, suicide was the 11th leading cause of death in the United States. Based on 2007 age-adjusted death rates, men were nearly four times more likely to die of suicide than females, and white individuals were over two times more likely to die of suicide than black or Hispanic individuals. Older Americans are disproportionately likely to die by suicide. An estimated eight to 25 attempted suicides occur per every suicide death.

The Healthy People 2020 national health target is to reduce the suicide rate to 10.2 deaths per 100,000 population.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Department of Health, Bureau of Vital Statistics

URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=04...

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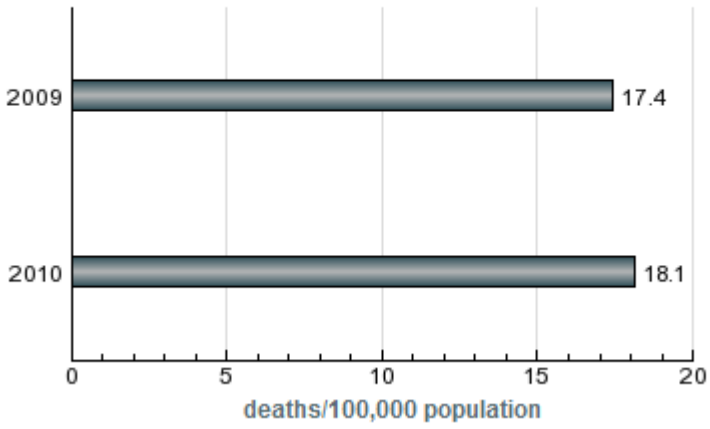
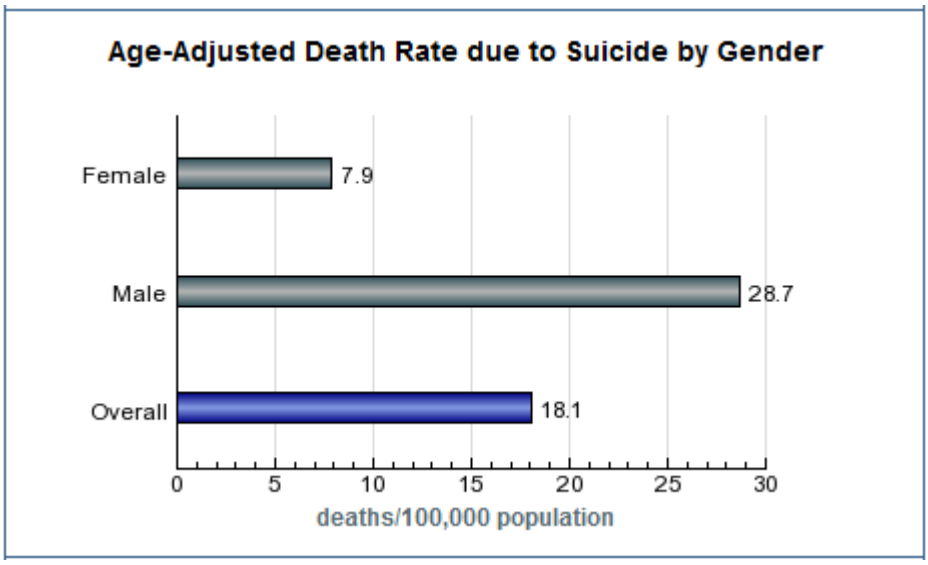
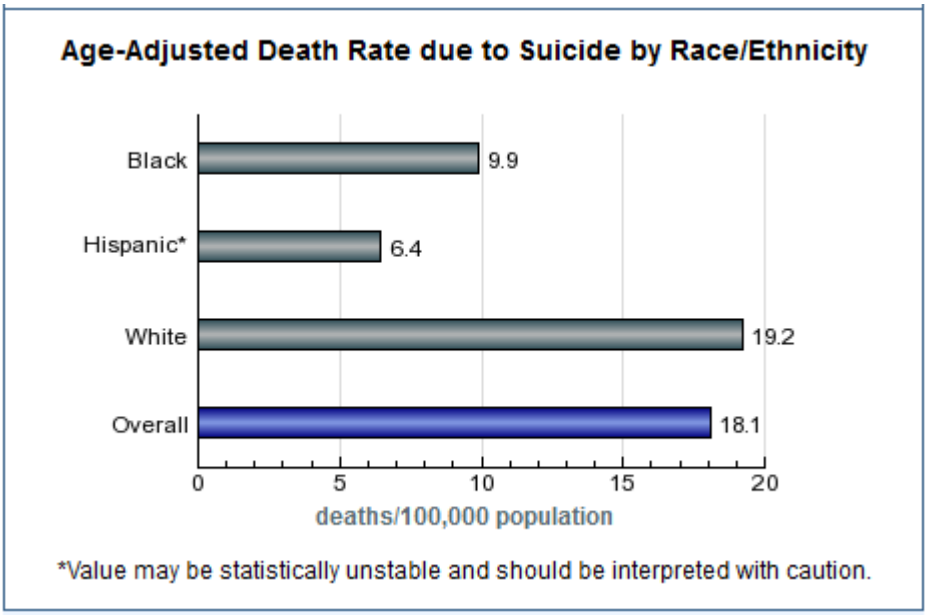
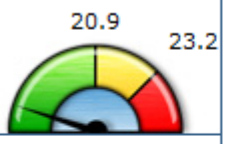
Time Series Data




Age-Adjusted Death Rate due to Suicide by Gender
Female
7.9
Male
28.7
Overall
18.1
0
5
10
15
20
25
30
deaths/100,000 population


Age-Adjusted Death Rate due to Suicide by Race/Ethnicity
Black
9.9
Hispanic*
6.4
White
19.2
Overall
18.1
0
5
10
15
20
deaths/100,000 population
*Value may be statistically unstable and should be interpreted with caution.



Red > 23.2
Green <= 20.9
In-between = Yellow
Unit: percent
View the Legend

Adults who did not Visit a Dentist due to Cost

Value:	16.3 percent
Measurement Period:	2007
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Oral Health Health / Access to Health Services

What is this Indicator?
This indicator shows the percentage of adults who could not see a dentist in the past year due to cost.

Why this is important: Oral health has been shown to impact overall health and well-being. Nearly one-third of all adults in the United States have untreated tooth decay, or tooth caries, and one in seven adults aged 35 to 44 years old has periodontal (gum) disease. Given these serious health consequences, it is important to maintain good oral health. It is recommended that adults and children see a dentist on a regular basis. Professional dental care helps to maintain the overall health of the teeth and mouth, and provides for early detection of pre-cancerous or cancerous lesions.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Behavioral Risk Factor Surveillance System

URL of Source: http://www.cdc.gov/brfss/index.htm

URL of Data: http://www.floridacharts.com/charts/brfss.aspx

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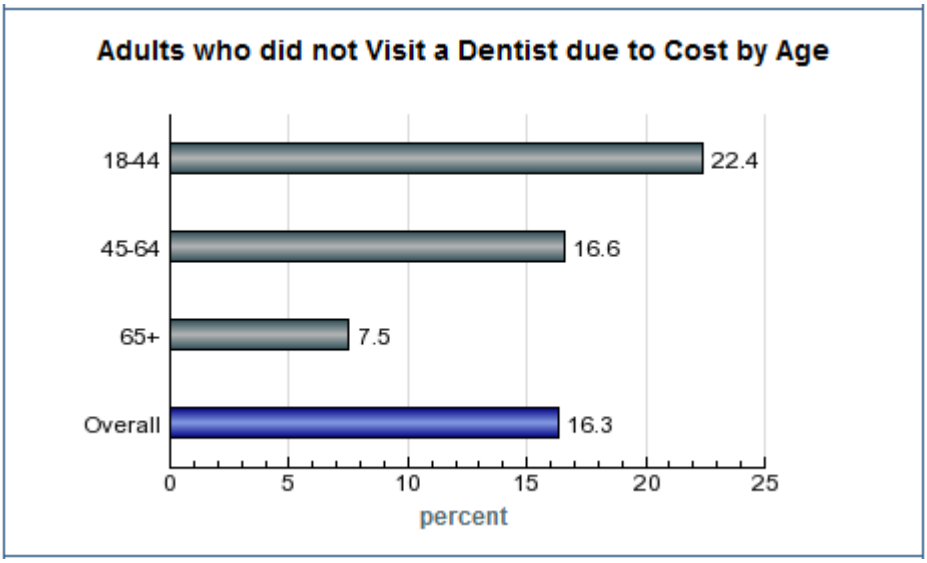
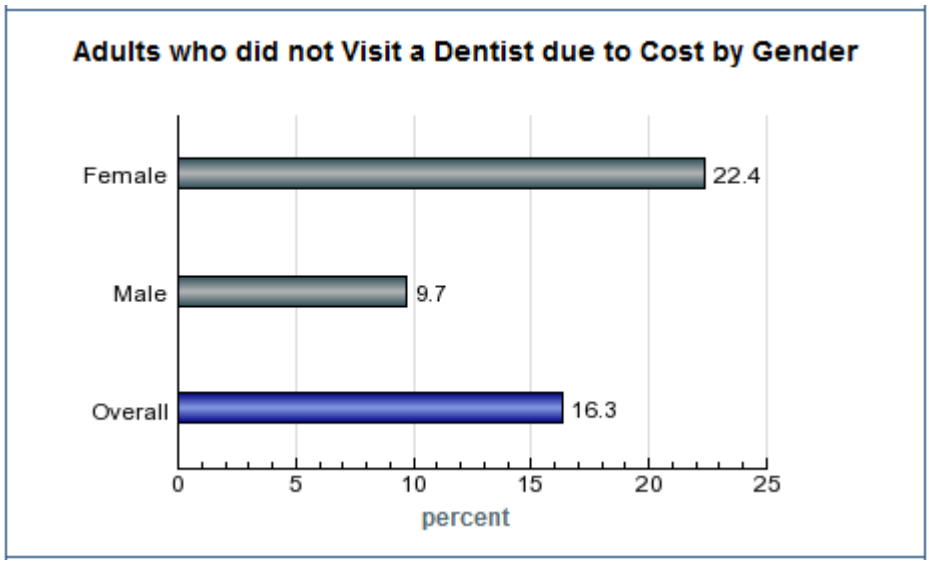
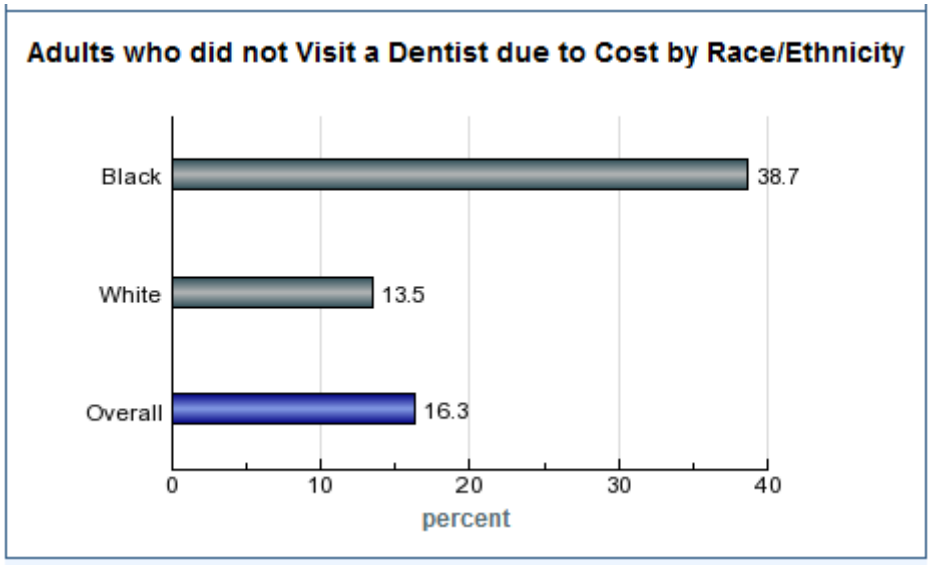
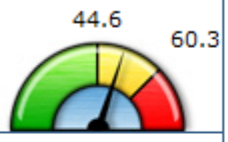



Adults who did not Visit a Dentist due to Cost by Gender
Female
22.4
Male
9.7
Overall
16.3
0
5
10
15
20
25
percent

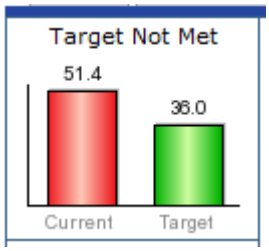

Adults who did not Visit a Dentist due to Cost by Race/Ethnicity
Black
38.7
White
13.5
Overall
16.3
0
10
20
30
40
percent



Red > 60.3
Green <= 44.6
In-between = Yellow
Unit: deaths/100,000 population
View the Legend

Age-Adjusted Death Rate due to Unintentional Injuries

Value:	51.4 deaths/100,000 population
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Prevention & Safety Health / Mortality Data



What is this Indicator?
This indicator shows the age-adjusted death rate per 100,000 population due to unintentional injuries.

Why this is important: Unintentional injuries are a leading cause of death for Americans of all ages, regardless of gender, race, or economic status. In 2007, unintentional injuries were the fifth leading cause of death overall in the U.S. In 2007, 123,706 people in the United States died from unintentional injuries. Major categories of unintentional injuries include motor-vehicle collisions, poisonings, and falls.

The Healthy People 2020 national health target is to reduce the deaths caused by unintentional injuries to 36 deaths per 100,000 population.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Department of Health, Bureau of Vital Statistics

URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

URL of Data: http://www.floridacharts.com/charts/DataViewer/DeathViewe...

Maintained By: Healthy Communities Institute

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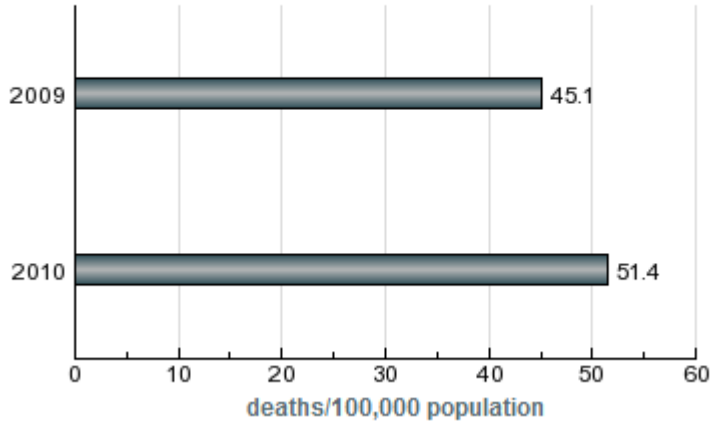
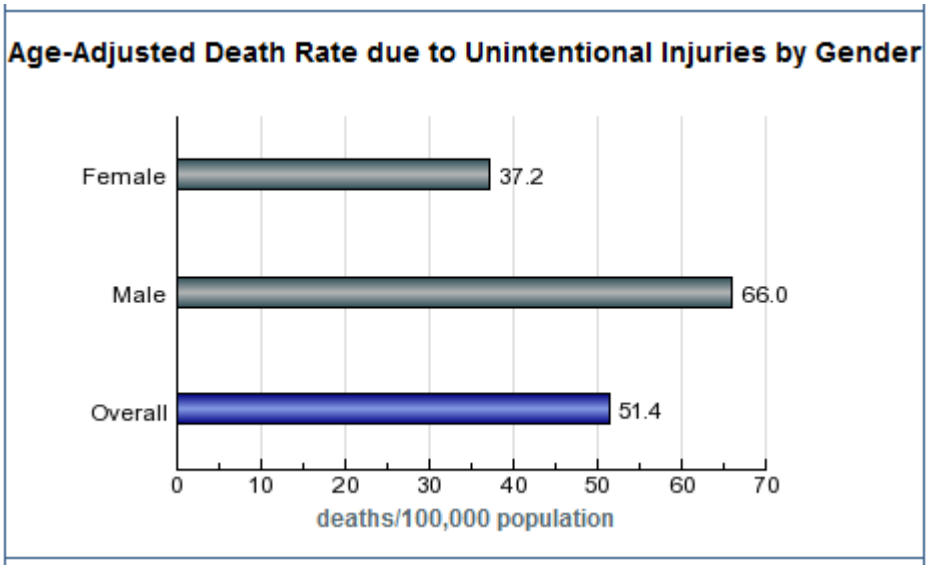
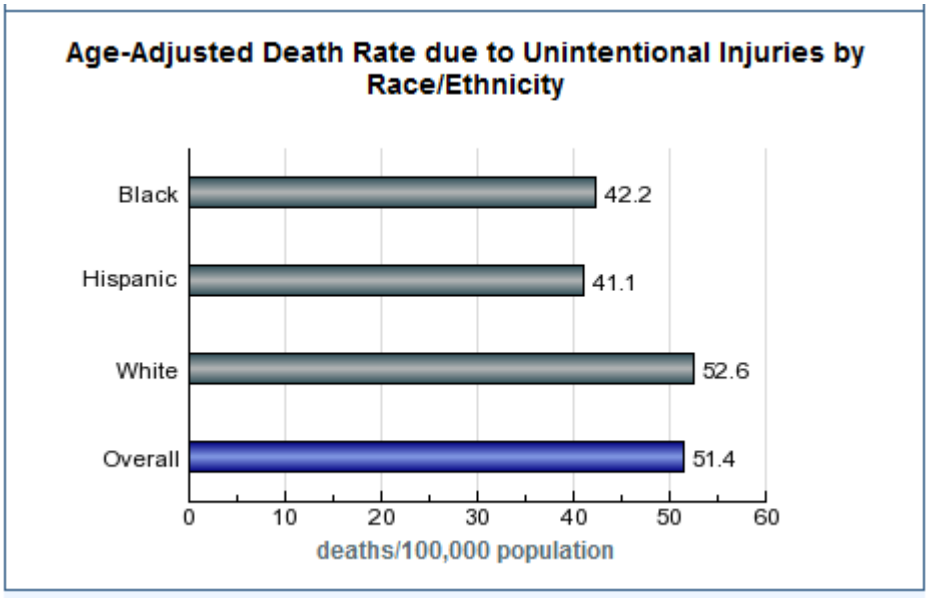
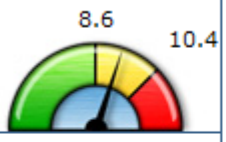



Age-Adjusted Death Rate due to Unintentional Injuries by Gender
Female
37.2
Male
66.0
Overall
51.4
0
10
20
30
40
50
60
70
deaths/100,000 population


Age-Adjusted Death Rate due to Unintentional Injuries by Race/Ethnicity
Black
42.2
Hispanic
41.1
White
52.6
Overall
51.4
0
10
20
30
40
50
60
deaths/100,000 population



Red > 10.4
Green <= 8.6
In-between = Yellow
Unit: percent
View the Legend

Adults with Asthma

Value:	9.4 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Respiratory Diseases Health / Environmental & Occupational Health

What is this Indicator?
This indicator shows the percentage of adults who have been told by a health care provider that they currently have asthma.

Why this is important: Asthma is a condition where a person's air passages become inflamed, and the narrowing of the respiratory passages makes it difficult to breathe. Symptoms can include tightness in the chest, coughing, and wheezing. These symptoms are often brought on by exposure to inhaled allergens (like dust, pollen, cigarette smoke, pollution, and animal dander) or by exertion and stress. There is no cure for asthma, but for most people, the symptoms can be managed through a combination of long-term medication prevention strategies and short-term quick relievers. In some cases, however, asthma symptoms are severe enough to warrant hospitalization, and can result in death. In 2009, the CDC estimated that 17.5 million noninstitutionalized adults had been diagnosed with asthma nationwide.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Behavioral Risk Factor Surveillance System

URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

URL of Data: http://www.floridacharts.com/charts/brfss.aspx

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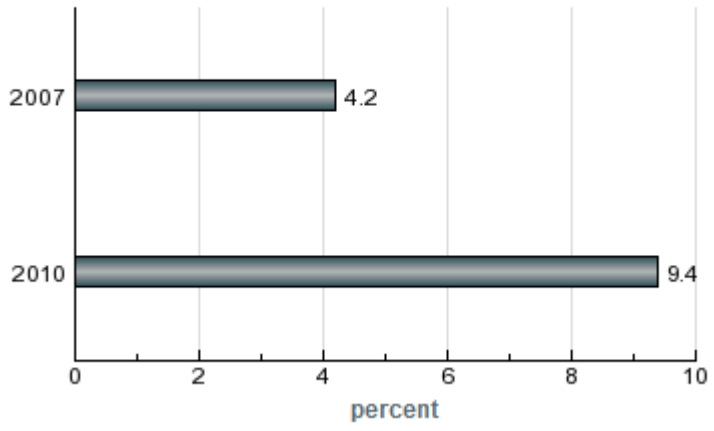
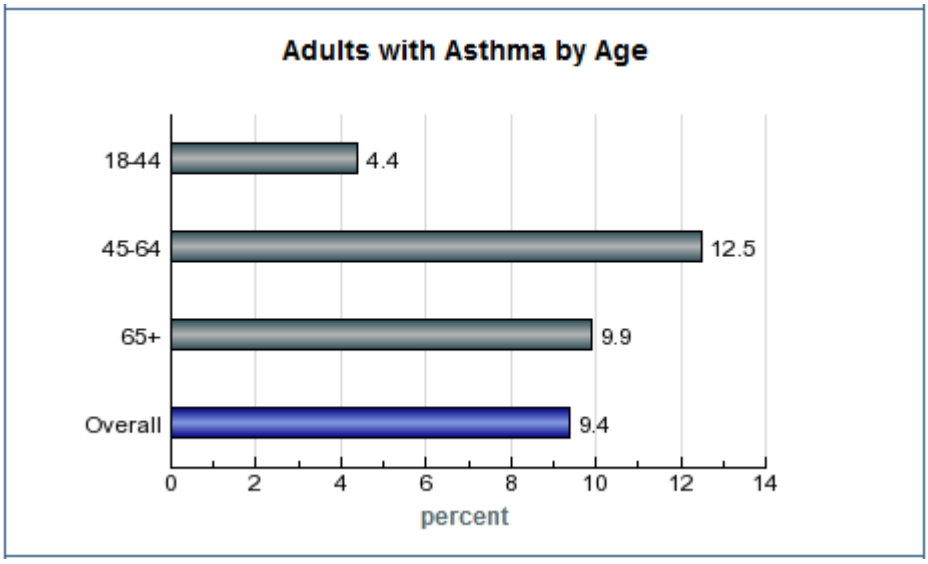
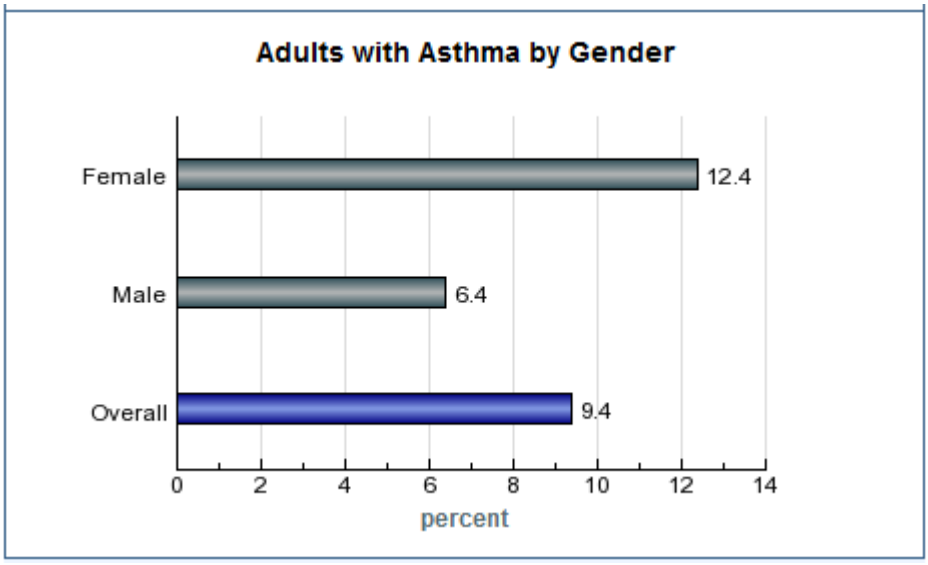
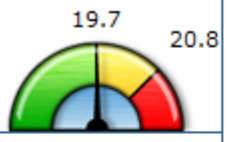



Adults with Asthma by Age
18-44
4.4
45-64
12.5
65+
9.9
Overall
9.4
0
2
4
6
8
10
12
14
percent


Adults with Asthma by Gender
Female
12.4
Male
6.4
Overall
9.4
0
2
4
6
8
10
12
14
percent



Red > 20.8
Green <= 19.7
In-between = Yellow
Unit: percent
View the Legend

Teens with Asthma

Value:	19.7 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Respiratory Diseases Health / Teen & Adolescent Health Health / Environmental & Occupational Health

What is this Indicator?
This indicator shows the percentage of high school students with known asthma.

Why this is important: Asthma in youth and young adults is a serious public health problem in the United States. The National Health Interview Survey has found that persons under 18 years have higher rates of asthma than any other age group. Of particular concern is the significant increase in asthma rates in children since 1980. Asthma in children and teens results in missed days of school, limitations on daily activities, emergency department visits for treatment of asthma symptoms, and hospitalizations. Nationwide, 6.7 million children had been diagnosed with asthma in 2007.

Technical Note: The distribution is based on data from 66 Florida counties.

Source: Florida Youth Tobacco Survey

URL of Source: http://www.doh.state.fl.us/disease_ctrl/epi/Chronic_Disea...

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=03...

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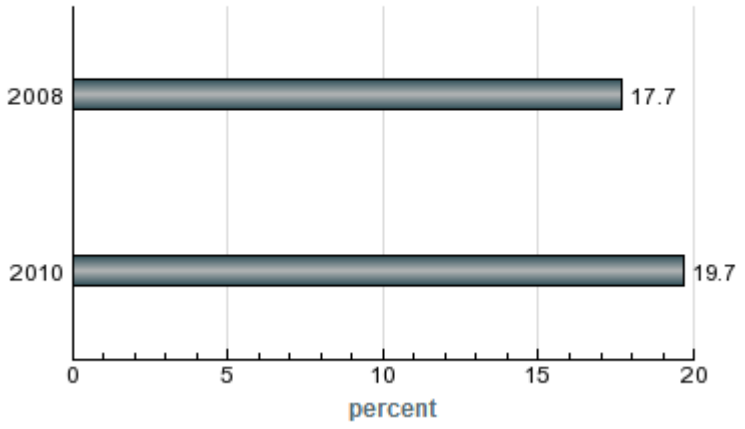
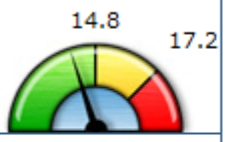
Time Series Data

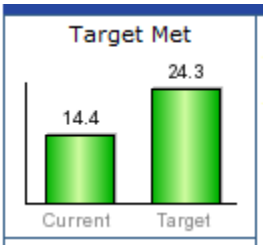




Red > 17.2
Green <= 14.8
In-between = Yellow
Unit: percent
View the Legend

Adults who Binge Drink

Value:	14.4 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Substance Abuse



What is this Indicator?
This indicator shows the percentage of adults who reported binge drinking at least once during the 30 days prior to the survey. Male binge drinking is defined as five or more drinks on one occasion, and female binge drinking is four or more drinks on one occasion.

Why this is important: Binge drinking is a common pattern of excessive alcohol use in the United States. Binge drinking can be dangerous and may result in vomiting, loss of sensory perception, and blackouts. The prevalence of binge drinking among men is twice that of women. In addition, it was found that binge drinkers are 14 times more likely to report alcohol-impaired driving than non-binge drinkers. Alcohol abuse is associated with a variety of negative health and safety outcomes including alcohol-related traffic accidents and other injuries, employment problems, legal difficulties, financial loss, family disputes and other interpersonal problems.

The Healthy People 2020 national health target is to reduce the proportion of adults aged 18 years and older engaging in binge drinking during the past 30 days to 24.3%.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Behavioral Risk Factor Surveillance System

URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

URL of Data: http://www.floridacharts.com/charts/brfss.aspx

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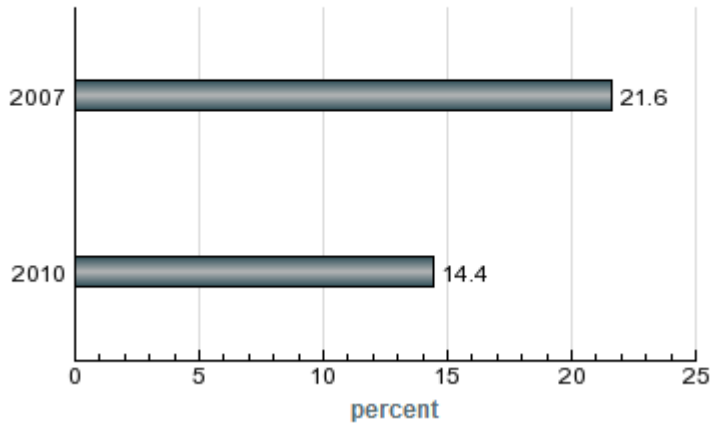
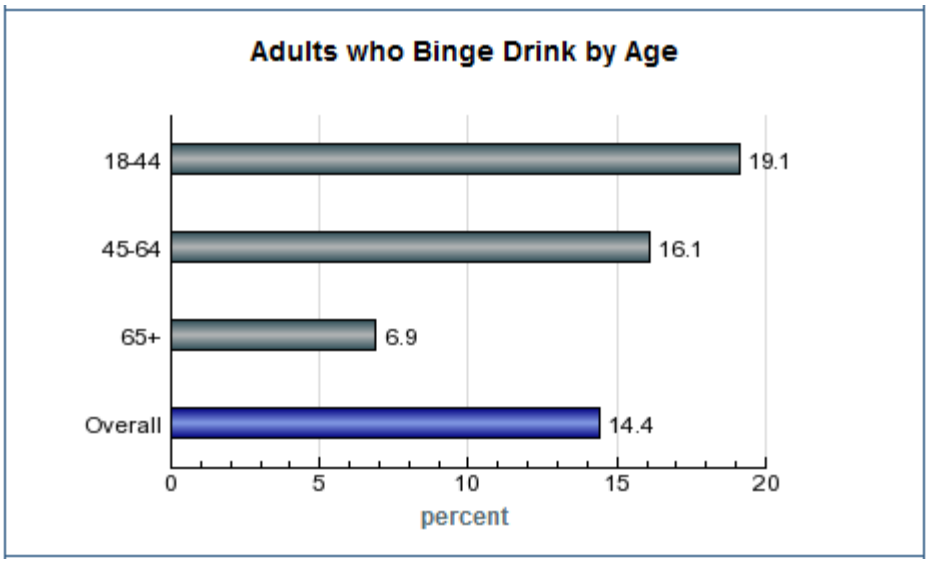
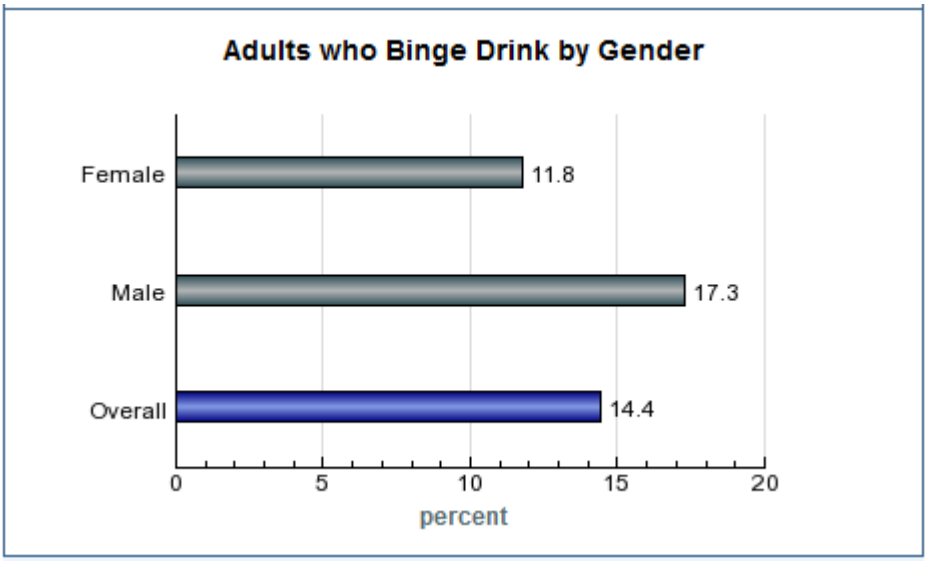
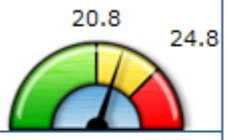



Adults who Binge Drink by Age
18-44
19.1
45-64
16.1
65+
6.9
Overall
14.4
0
5
10
15
20
percent

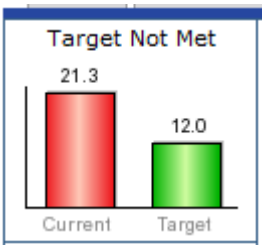

Adults who Binge Drink by Gender
Female
11.8
Male
17.3
Overall
14.4
0
5
10
15
20
percent



Red > 24.8
Green <= 20.8
In-between = Yellow
Unit: percent
View the Legend

Adults who Smoke

Value:	21.3 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Substance Abuse



What is this Indicator?
This indicator shows the percentage of adults who currently smoke cigarettes.

Why this is important: Tobacco is the agent most responsible for avoidable illness and death in America today. Tobacco use brings premature death to almost half a million Americans each year, and it contributes to profound disability and pain in many others. Approximately one-third of all tobacco users in this country will die prematurely because of their dependence on tobacco. Areas with a high smoking prevalence will also have greater exposure to secondhand smoke for non-smokers, which can cause or exacerbate a wide range of adverse health effects, including cancer, respiratory infections, and asthma.

The Healthy People 2020 national health target is to reduce the proportion of adults aged 18 years and older who smoke cigarettes to 12%.

Technical Note: The distribution is based on data from 67 Florida counties.

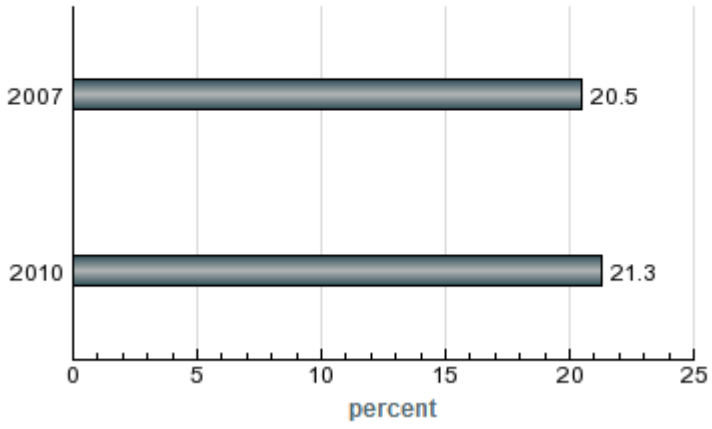
Source: Florida Behavioral Risk Factor Surveillance System

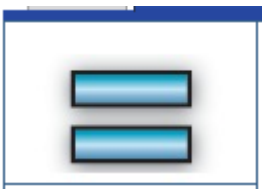
URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

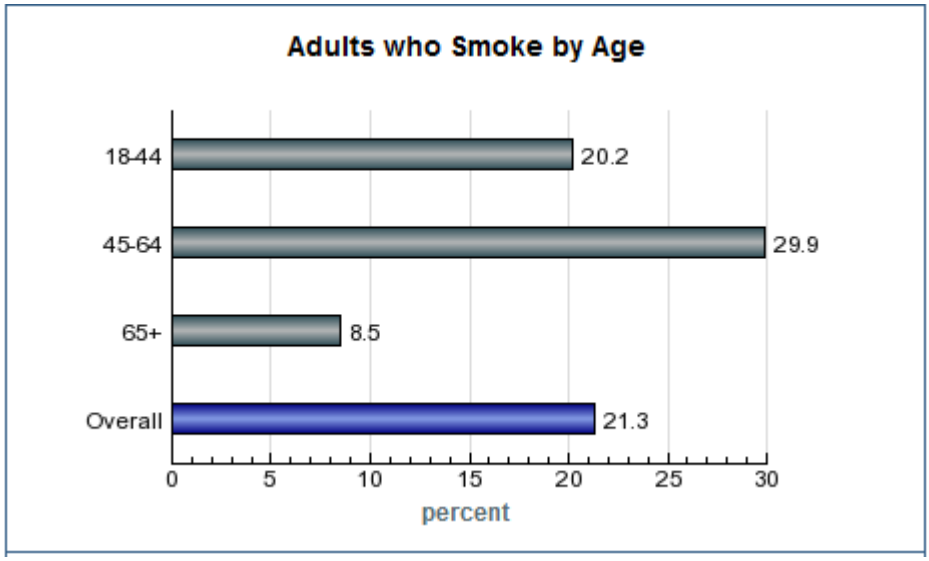
URL of Data: http://www.floridacharts.com/charts/brfss.aspx

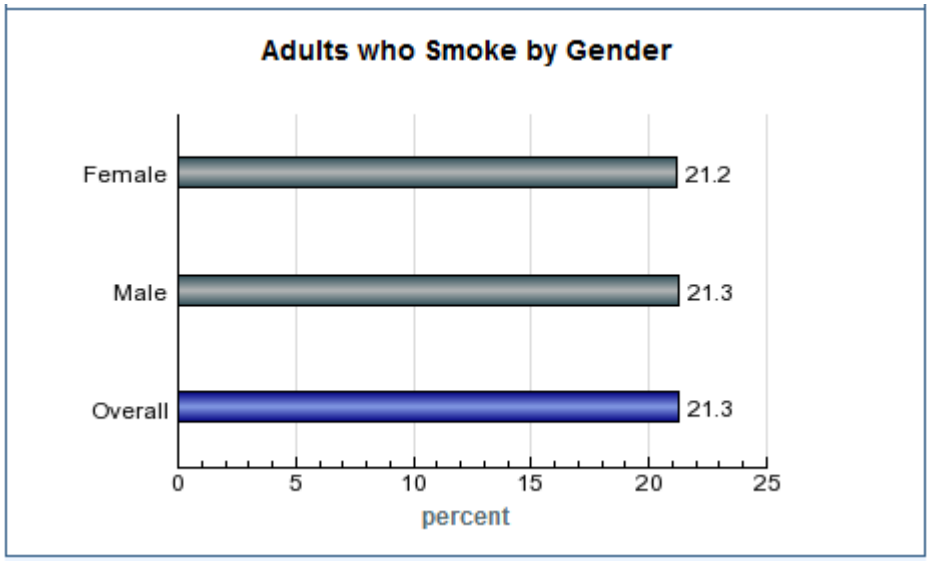
Maintained By: Healthy Communities Institute

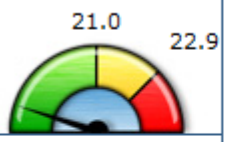
Time Series Data






Adults who Smoke by Age
18-44
20.2
45-64
29.9
65+
8.5
Overall
21.3
0
5
10
15
20
25
30
percent


Adults who Smoke by Gender
Female
21.2
Male
21.3
Overall
21.3
0
5
10
15
20
25
percent



Red > 22.9
Green <= 21.0
In-between = Yellow
Unit: percent
View the Legend

Teens who Binge Drink

Value:	18.0 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Substance Abuse Health / Teen & Adolescent Health

What is this Indicator?
This indicator shows the percentage of high school students who had five or more drinks of alcohol in a row at least one time during the 30 days prior to the survey.

Why this is important: According to research by the National Institute on Alcohol Abuse and Alcoholism, adolescents who begin drinking at a young age are more likely to develop alcohol dependence than those who begin drinking at age 21. Patterns formed during adolescence play a critical role in health throughout adulthood. Alcohol use also impairs judgment and can lead to other high-risk behaviors such as drunk driving and sexual activity. Excessive alcohol use in the form of binge drinking can lead to increased risk of health problems such as liver disease or unintentional injuries.

Technical Note: The distribution is based on data from 66 Florida counties.

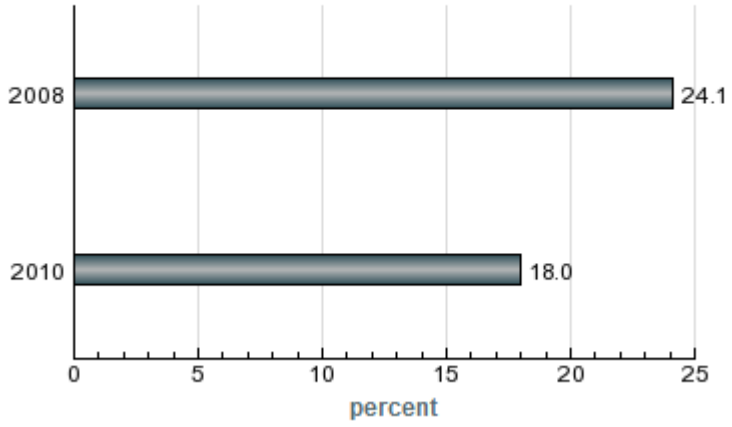
Source: Florida Youth Substance Abuse Survey

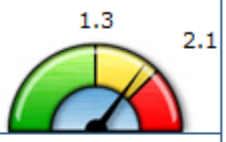
URL of Source: http://www.dcf.state.fl.us/programs/samh/publications/fysas/

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=03...

Maintained By: Healthy Communities Institute

Time Series Data





Red > 2.1
Green <= 1.3
In-between = Yellow
Unit: percent
View the Legend

Teens who have Used Methamphetamines

Value:	1.9 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Substance Abuse Health / Teen & Adolescent Health

What is this Indicator?
This indicator shows the percentage of high school students who have used methamphetamines (also called speed, crystal, crank, or ice) one or more times during their life.

Why this is important: Drug abuse and addiction comprise a public health problem that affects many people and has wide-ranging social consequences. These consequences can include poor health outcomes, increased crime and accidents, and increased unemployment and homelessness. Methamphetamine is a very addictive stimulant drug that affects the central nervous system and has a high potential for abuse. Chronic methamphetamine abuse significantly changes how the brain functions. Methamphetamine use results in many damaging effects, including violent behavior, anxiety, confusion, insomnia, extreme weight loss, and severe dental problems. Users of methamphetamines may also display psychotic features including paranoia, auditory hallucinations, mood disturbances, and delusions. The paranoia can result in homicidal as well as suicidal thoughts.

Technical Note: The distribution is based on data from 66 Florida counties.

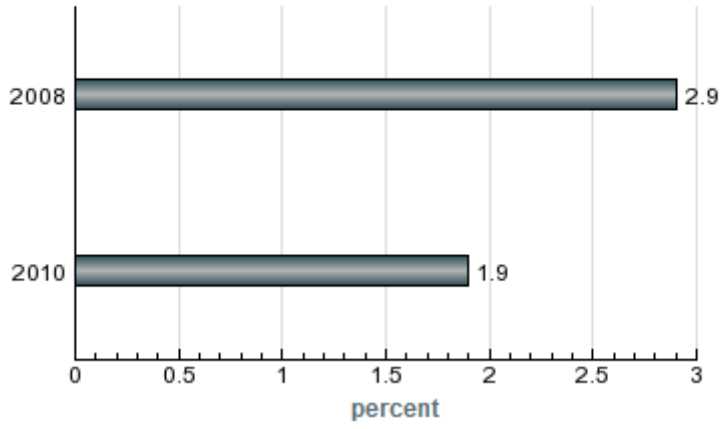
Source: Florida Youth Substance Abuse Survey

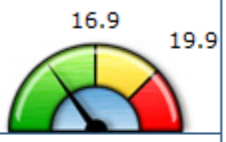
URL of Source: http://www.dcf.state.fl.us/programs/samh/publications/fysas/

URL of Data: http://www.dcf.state.fl.us/programs/samh/publications/fys...

Maintained By: Healthy Communities Institute

Time Series Data

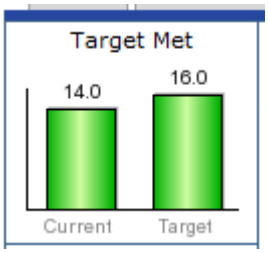




Red > 19.9
Green <= 16.9
In-between = Yellow
Unit: percent
View the Legend

Teens who Smoke

Value:	14.0 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Substance Abuse Health / Teen & Adolescent Health



What is this Indicator?
This indicator shows the percentage of high school students who smoked cigarettes on at least 1 day during the 30 days preceding the survey.

Why this is important: Health behavior patterns formed in adolescence play a crucial role in health throughout life. Those who start smoking young are more likely to have a long-term addiction to nicotine than people who start smoking later in life, putting them at greater risk for smoking-related illness and death. Tobacco use is responsible for more than 430,000 deaths per year among adults in the United States. If smoking prevalence among adolescents persists, it is estimated that 5 million persons under the age of 18 will die prematurely from smoking-related diseases.

The Healthy People 2020 national health target is to reduce the proportion of adolescents in grades 9 through 12 who smoke cigarettes to 16%.

Technical Note: The distribution is based on data from 66 Florida counties.

Source: Florida Youth Tobacco Survey

URL of Source: http://www.doh.state.fl.us/disease_ctrl/epi/Chronic_Disea...

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=03...

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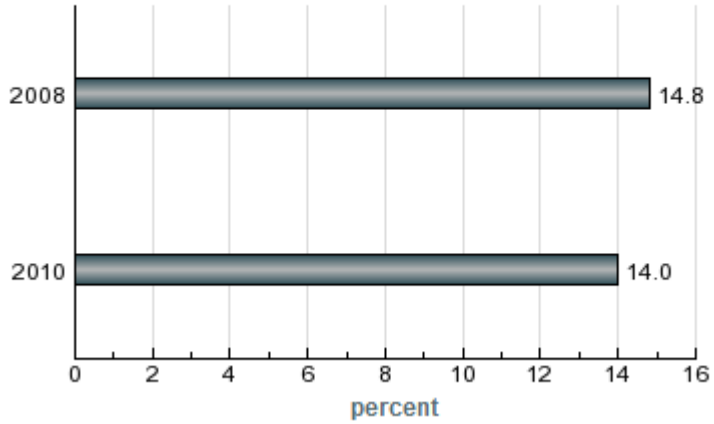
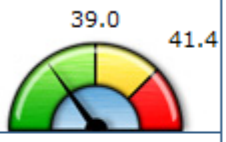




Red > 41.4
Green <= 39.0
In-between = Yellow
Unit: percent
View the Legend

Teens who Use Alcohol

Value:	36.9 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Substance Abuse Health / Teen & Adolescent Health

What is this Indicator?
This indicator shows the percentage of high school students who had at least one drink of alcohol on at least 1 day during the 30 days before the survey was administered.

Why this is important: According to research by the National Institute on Alcohol Abuse and Alcoholism, adolescents who begin drinking at a young age are more likely to develop alcohol dependence than those who begin drinking at age 21. Patterns formed during adolescence play a critical role in health throughout adulthood. Alcohol use also impairs judgment and can lead to other high-risk behaviors such as drunk driving and sexual activity.

Technical Note: The distribution is based on data from 66 Florida counties.

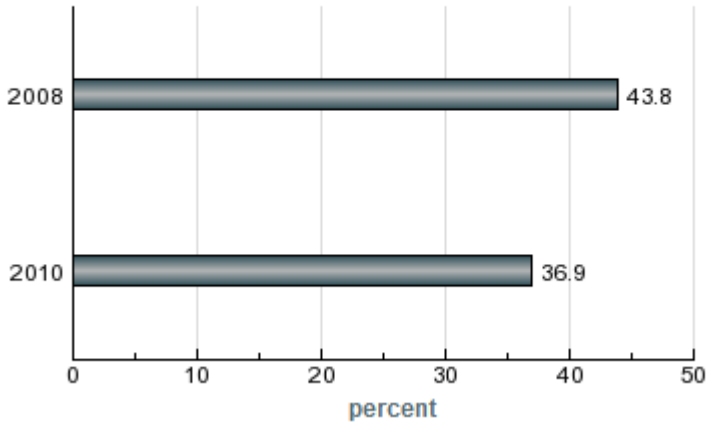
Source: Florida Youth Substance Abuse Survey

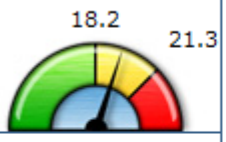
URL of Source: http://www.dcf.state.fl.us/programs/samh/publications/fysas/

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=03...

Maintained By: Healthy Communities Institute

Time Series Data





Red > 21.3
Green <= 18.2
In-between = Yellow
Unit: percent
View the Legend

Teens who Use Marijuana

Value:	19.6 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Substance Abuse Health / Teen & Adolescent Health

What is this Indicator?
This indicator shows the percentage of high school students who used marijuana one or more times during the 30 days before the survey was administered.

Why this is important: Among youth, illicit drug use is associated with heavy alcohol use, tobacco use, delinquency, violence, and suicide. Marijuana is the most commonly abused illicit drug in the United States. Marijuana intoxication can cause distorted perceptions, impaired coordination, difficulty thinking and problem solving, and problems with learning and memory. Many research studies have shown that marijuana's adverse effects on learning and memory can last for days or weeks after the acute effects of the drug have worn off. Chronic marijuana use can lead to addiction. Addictive behaviors may result in harmful effects on social functioning in the context of family, school, work, and recreational activities.

Technical Note: The distribution is based on data from 66 Florida counties.

Source: Florida Youth Substance Abuse Survey

URL of Source: http://www.dcf.state.fl.us/programs/samh/publications/fysas/

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=03...

Maintained By: Healthy Communities Institute

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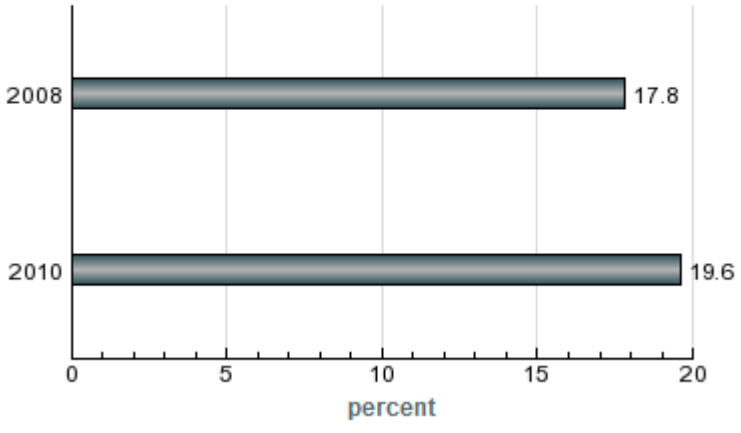

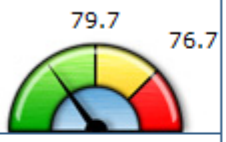

Red < 76.7
Green >= 79.7
In-between = Yellow
Unit: percent
View the Legend

Self-Reported General Health Assessment

Value:	81.8 percent
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Health / Wellness & Lifestyle

What is this Indicator?
This indicator shows the percentage of people answering excellent, very good, or good to: "how is your general health?"

Why this is important: People's subjective assessment of their health status is important because when people feel healthy they are more likely to feel happy and to participate in their community socially and economically. Areas with unhealthy populations lose productivity due to lost work time. Healthy residents are essential for creating a vibrant and successful community.

Technical Note: The distribution is based on data from 67 Florida counties.

Source: Florida Behavioral Risk Factor Surveillance System

URL of Source: http://www.doh.state.fl.us/Disease_ctrl/epi/brfss/reports...

URL of Data: http://www.floridacharts.com/charts/brfss.aspx

Maintained By: Healthy Communities Institute

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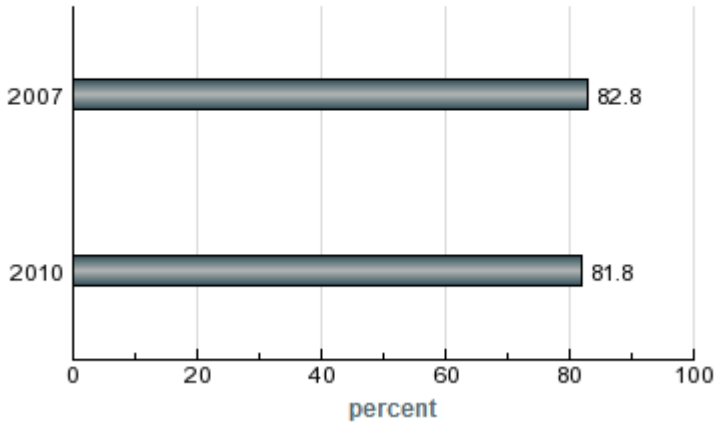
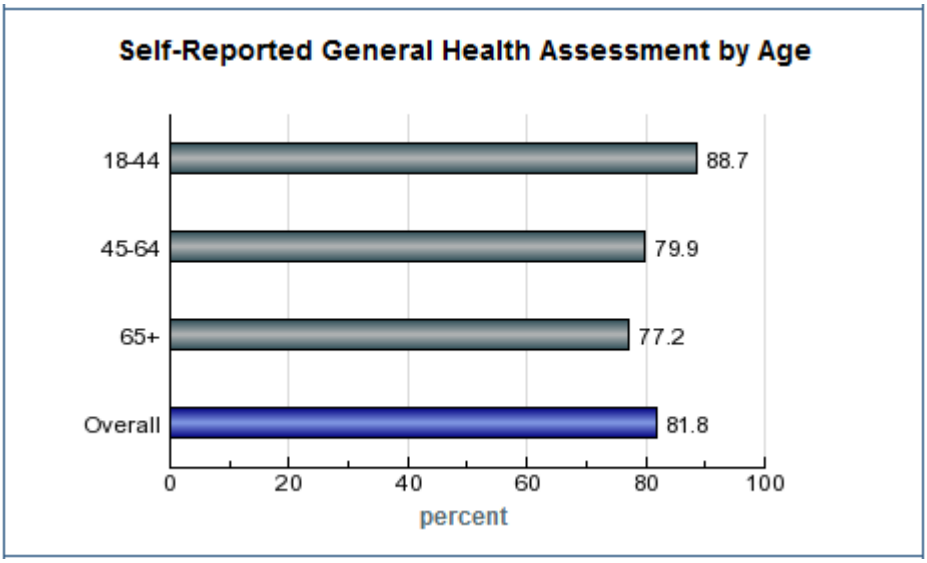
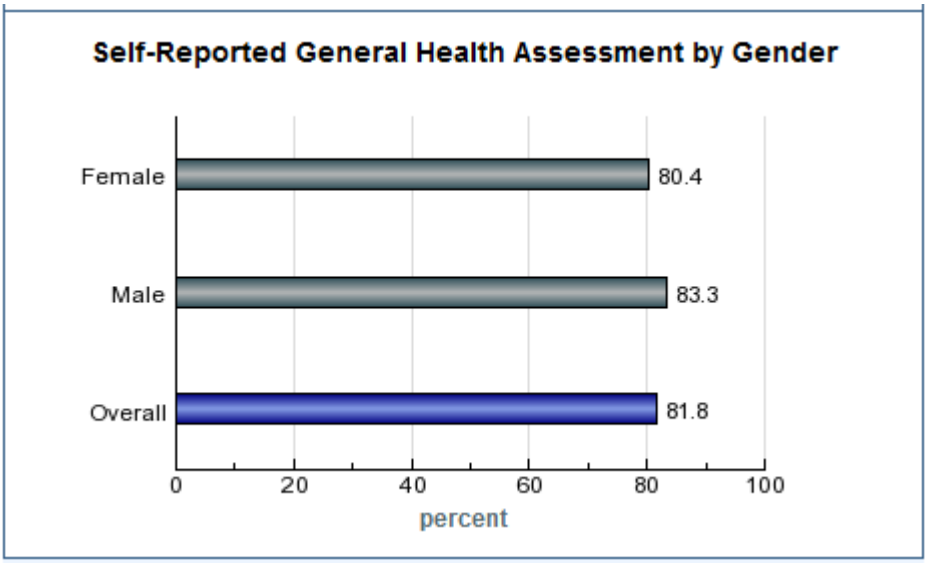
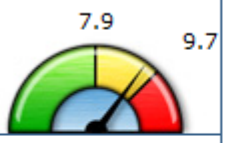



Self-Reported General Health Assessment by Age
18-44
45-64
65+
Overall
88.7
79.9
77.2
81.8
0
20
40
60
80
100
percent


Self-Reported General Health Assessment by Gender
Female
Male
Overall
80.4
83.3
81.8
0
20
40
60
80
100
percent



Red > 9.7
Green <= 7.9
In-between = Yellow
Unit: percent
View the Legend

Unemployed Workers in Civilian Labor Force

Value:	9.5 percent
Measurement Period:	2012, March
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Economy / Employment

What is this Indicator?
This indicator shows the percentage of the civilian labor force (ages 16 and over) who are unemployed.

Why this is important: The unemployment rate is a key indicator of the local economy. Unemployment occurs when local businesses are not able to supply enough and/or appropriate jobs for local employees and/or when the labor force is not able to supply appropriate skills to employers. A high rate of unemployment has personal and societal effects. During periods of unemployment, individuals are likely to feel severe economic strain and mental stress. Unemployment is also related to access to health care, as many individuals receive health insurance through their employer. A high unemployment rate places strain on financial support systems, as unemployed persons qualify for unemployment benefits and food stamp programs.

Technical Note: The distribution is based on non-seasonally-adjusted data from 3,141 U.S. counties and county equivalents. Unemployment data prior to January 2012 were based on the Bureau of Labor Statistics' (BLS) preliminary monthly estimates. Beginning in 2012, values are based on BLS's final monthly estimates. Data do not incorporate BLS's annual benchmarking revisions.

Source: U.S. Bureau of Labor Statistics

URL of Source: http://www.bls.gov/

URL of Data: http://data.bls.gov/PDQ/outside.jsp?survey=la

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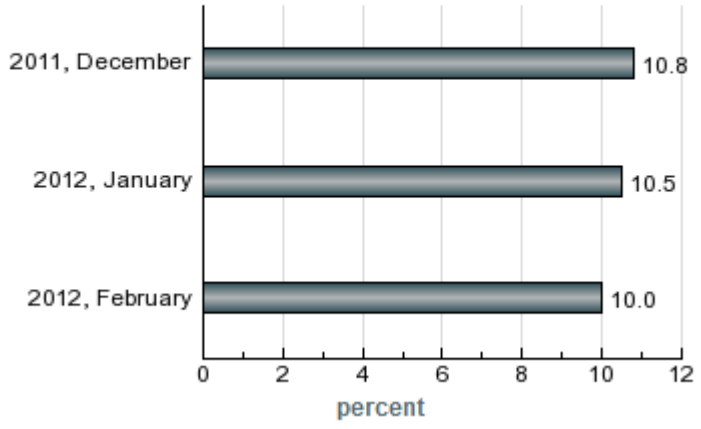
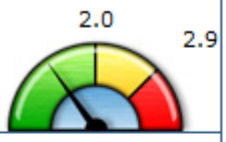




Red > 2.9
Green <= 2.0
In-between = Yellow
Unit: percent
View the Legend

Households with Public Assistance

Value:	1.4 percent
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Economy / Government Assistance Programs Economy / Poverty

What is this Indicator?
This indicator shows the percentage of households receiving cash public assistance income.

Why this is important: Public assistance income includes general assistance and Temporary Assistance to Needy Families (TANF). It does not include Supplemental Security Income (SSI) or noncash benefits such as Food Stamps. Areas with more households on public assistance programs have higher poverty rates.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

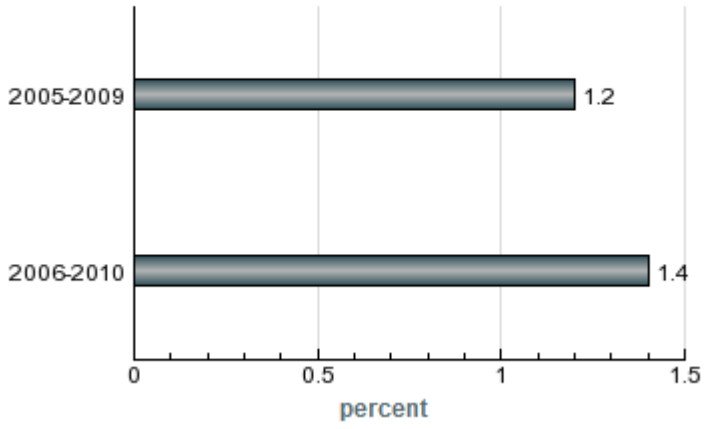
Source: American Community Survey

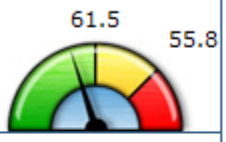
URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

Time Series Data





Red < 55.8
Green >= 61.5
In-between = Yellow
Unit: percent
View the Legend

Homeownership

Value:	63.2 percent
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Economy / Homeownership

What is this Indicator?
This indicator shows the percentage of housing units that are occupied by homeowners.

Why this is important: Homeownership has many benefits for both individuals and communities. Homeowners are more likely to improve their homes and to be involved in civic affairs, both of which benefit the individual and the community as a whole. In addition, homeownership provides tax benefits.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

Source: American Community Survey

URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

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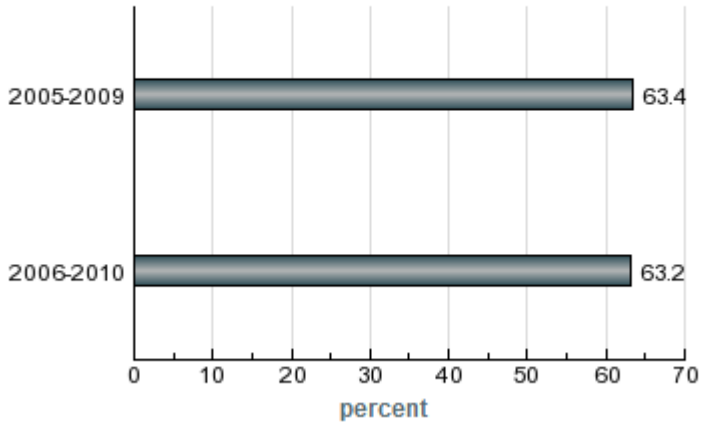

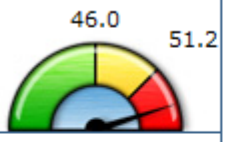

Red > 51.2
Green <= 46.0
In-between = Yellow
Unit: percent
View the Legend

Renters Spending 30% or More of Household Income on Rent

Value:	56.3 percent
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Economy / Housing Affordability & Supply

What is this Indicator?
This indicator shows the percentage of renters who are paying 30% or more of their household income in rent.

Why this is important: Spending a high percentage of household income on rent can create financial hardship, especially for lower-income renters. With a limited income, paying a high rent may not leave enough money for other expenses, such as food, transportation and medical. Moreover, high rent reduces the proportion of income a household can allocate to savings each month.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

Source: American Community Survey

URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

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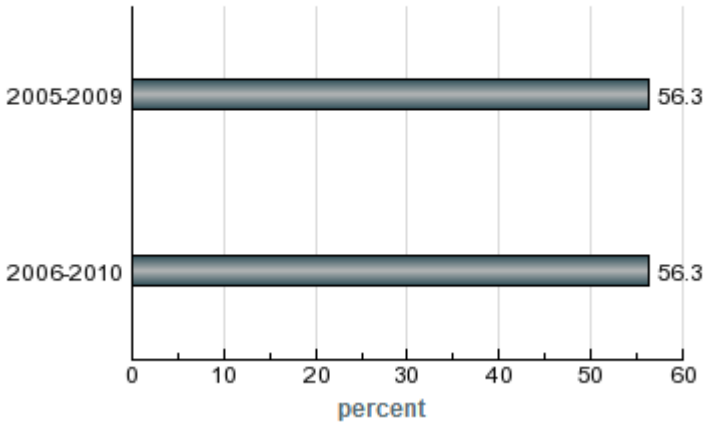

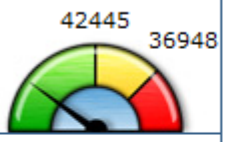

Red < 36948
Green >= 42445
In-between = Yellow
Unit: dollars
View the Legend

Median Household Income

Value:	49523 dollars
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Economy / Income

What is this Indicator?
This indicator shows the median household income. Household income is defined as the sum of money received over a calendar year by all household members 15 years and older.

Why this is important: Median household income reflects the relative affluence and prosperity of an area. Areas with higher median household incomes are likely to have more educated residents and lower unemployment rates. Higher employment rates lead to better access to healthcare and better health outcomes, since many families get their health insurance through their employer. Areas with higher median household incomes also have higher home values and their residents enjoy more disposable income.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

Source: American Community Survey

URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

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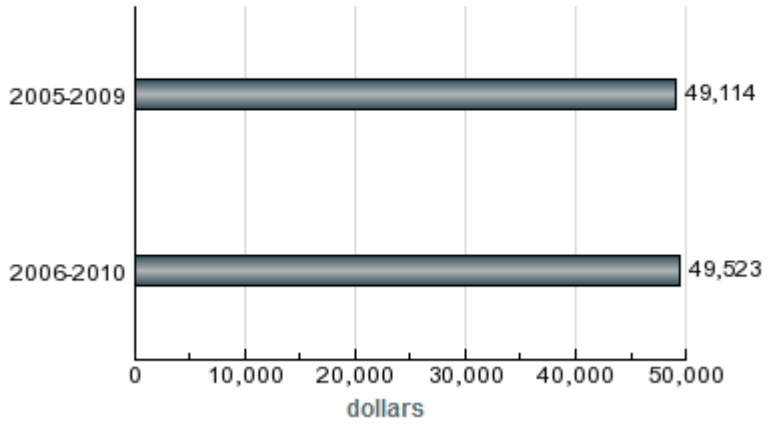

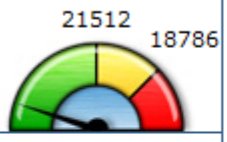

Red < 18786
Green >= 21512
In-between = Yellow
Unit: dollars
View the Legend

Per Capita Income

Value:	27606 dollars
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Economy / Income

What is this Indicator?
This indicator shows the per capita income.

Why this is important: Per capita income, or income per person, is the total income of the region divided by the population. It is an aggregate measure of all sources of income and therefore is not a measure of income distribution or wealth. Areas with higher per capita incomes are considered to be more prosperous; however, median income is a more accepted measure of the economic well-being of a region because median income is not skewed by extremely high or low outliers.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

Source: American Community Survey

URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

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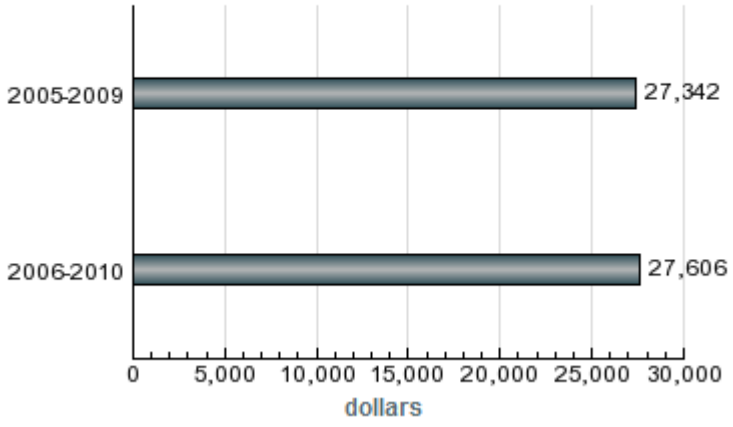
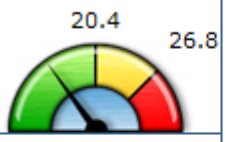




Red > 26.8
Green <= 20.4
In-between = Yellow
Unit: percent
View the Legend

Children Living Below Poverty Level

Value:	14.4 percent
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Economy / Poverty

What is this Indicator?
This indicator shows the percentage of people under the age of 18 who are living below the federal poverty level.

Why this is important: Family income has been shown to affect a child's well-being in numerous studies. Compared to their peers, children in poverty are more likely to have physical health problems like low birth weight or lead poisoning, and are also more likely to have behavioral and emotional problems. Children in poverty also tend to exhibit cognitive difficulties, as shown in achievement test scores, and are less likely to complete basic education.

Technical Note: The distribution is based on data from 3,142 U.S. counties and county equivalents.

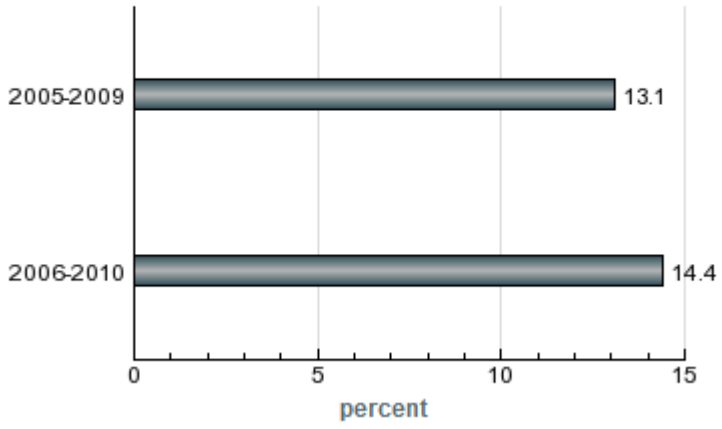
Source: American Community Survey

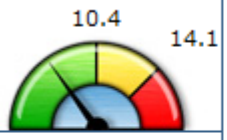
URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

Time Series Data





Red > 14.1
Green <= 10.4
In-between = Yellow
Unit: percent
View the Legend

Families Living Below Poverty Level

Value:	7.2 percent
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Economy / Poverty

What is this Indicator?
This indicator shows the percentage of families living below the federal poverty level.

Why this is important: Federal poverty thresholds are set every year by the Census Bureau and vary by size of family and ages of family members. A high poverty rate is both a cause and a consequence of poor economic conditions. A high poverty rate indicates that local employment opportunities are not sufficient to provide for the local community. Through decreased buying power and decreased taxes, poverty is associated with lower quality schools and decreased business survival.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

Source: American Community Survey

URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

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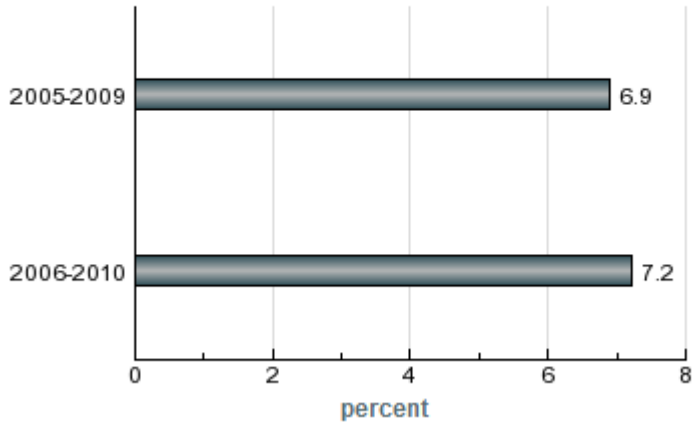
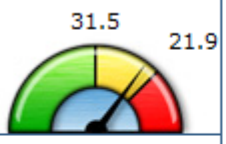




Red < 21.9
Green >= 31.5
In-between = Yellow
Unit: percent
View the Legend

Low-Income Persons who are SNAP Participants

Value:	24.2 percent
Measurement Period:	2007
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Economy / Poverty Health / Exercise, Nutrition, & Weight

What is this Indicator?
This indicator shows the percentage of low-income persons who participate in the Supplemental Nutrition Assistance Program (SNAP). Low-income persons are defined as people living in a household with an income at or below 200 percent of the federal poverty level.

Why this is important: SNAP, previously called the Food Stamp Program, is a federal-assistance program that provides low-income families with electronic benefit transfers (EBTs) that can be used to purchase food. The purpose of the program is to assist low-income households in obtaining adequate and nutritious diets.

The number of Americans receiving SNAP benefits reached 39.68 million in February 2010, the highest number since the Food Stamp Program began in 1939. As of June 2009, the average monthly benefit was $133.12 per person and as of November 2009, one in eight Americans and one in four children were using SNAP benefits.

Technical Note: The distribution is based on data from 3,141 U.S. counties and county equivalents.

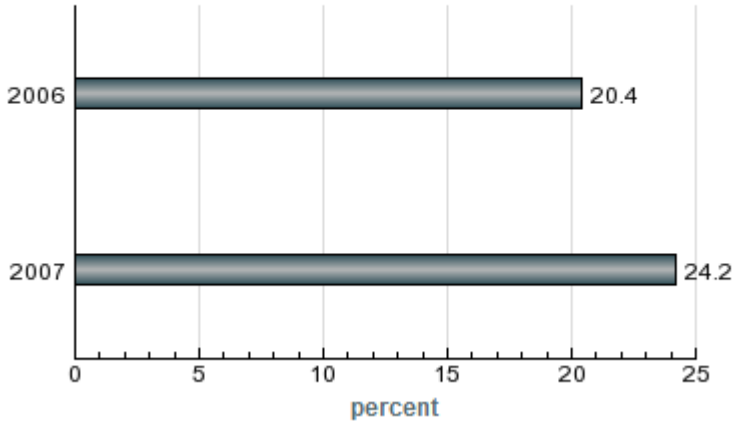
Source: U.S. Department of Agriculture - Food Environment Atlas

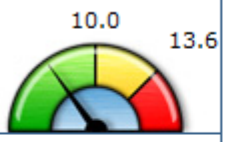
URL of Source: http://www.ers.usda.gov/FoodAtlas/

URL of Data: http://www.ers.usda.gov/FoodAtlas/downloadData.htm

Maintained By: Healthy Communities Institute

Time Series Data





Red > 13.6
Green <= 10.0
In-between = Yellow
Unit: percent
View the Legend

People 65+ Living Below Poverty Level

Value:	6.9 percent
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Economy / Poverty

What is this Indicator?
This indicator shows the percentage of people aged 65 and over living below the federal poverty level.

Why this is important: Federal poverty thresholds are set every year by the Census Bureau and vary by size of family and ages of family members. Seniors who live in poverty are an especially vulnerable group due to increased physical limitations, medical needs, and social isolation. Seniors often live on a fixed income from pensions or other retirement plans and social security. If this income is insufficient in the face of increasing prescription costs and other costs of living, most seniors have no way to supplement their income. Retirement plans may be vulnerable to fluctuations in the stock market as well; the increasing reliance of retirees on stock market based retirement plans may explain why more seniors nationwide are now slipping into poverty.

Technical Note: The distribution is based on data from 3,142 U.S. counties and county equivalents.

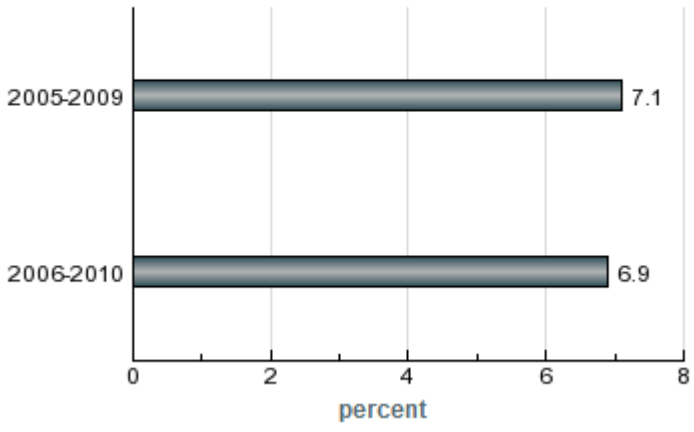
Source: American Community Survey

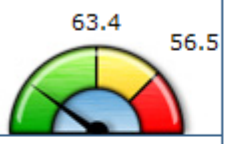
URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

Time Series Data





Red < 56.5
Green >= 63.4
In-between = Yellow
Unit: percent
View the Legend

People Living 200% Above Poverty Level

Value:	71.2 percent
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Economy / Poverty Economy / Income

What is this Indicator?
This indicator shows the percentage of residents living 200% above the federal poverty level in the community.

Why this is important: Federal poverty thresholds are set every year by the Census Bureau and vary by size of family and ages of family members. A high poverty rate is both a cause and a consequence of poor economic conditions. A high poverty rate indicates that local employment opportunities are not sufficient to provide for the local community. Through decreased buying power and decreased taxes, poverty is associated with lower quality schools and decreased business survival.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

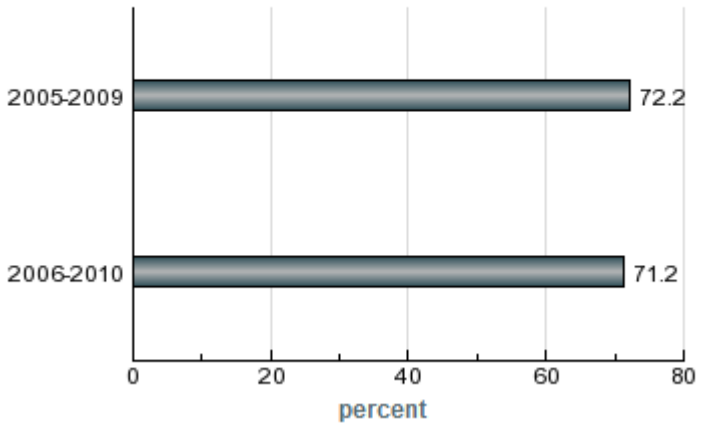
Source: American Community Survey

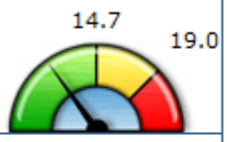
URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

Time Series Data





Red > 19.0
Green <= 14.7
In-between = Yellow
Unit: percent
View the Legend

People Living Below Poverty Level

Value:	10.5 percent
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Economy / Poverty

What is this Indicator?
This indicator shows the percentage of people living below the federal poverty level.

Why this is important: Federal poverty thresholds are set every year by the Census Bureau and vary by size of family and ages of family members. A high poverty rate is both a cause and a consequence of poor economic conditions. A high poverty rate indicates that local employment opportunities are not sufficient to provide for the local community. Through decreased buying power and decreased taxes, poverty is associated with lower quality schools and decreased business survival.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

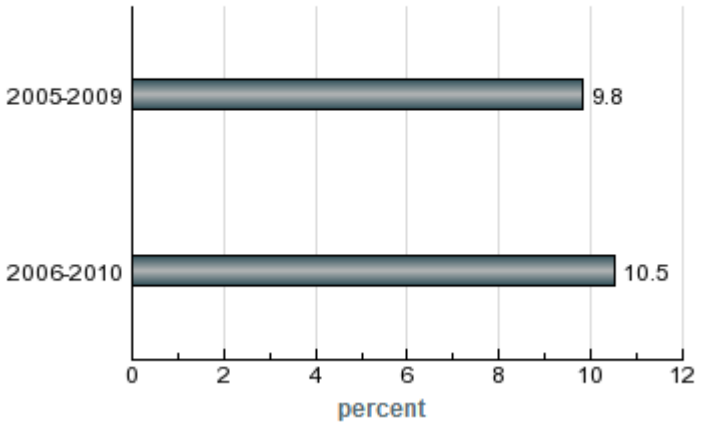
Source: American Community Survey

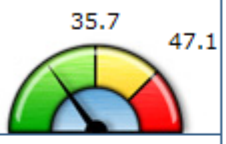
URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

Time Series Data





Red > 47.1
Green <= 35.7
In-between = Yellow
Unit: percent
View the Legend

Students Eligible for the Free Lunch Program

Value:	27.7 percent
Measurement Period:	2008
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Economy / Poverty Economy / Government Assistance Programs

What is this Indicator?
This indicator shows the percentage of students eligible to participate in the Free Lunch Program under the National School Lunch Program.

Why this is important: The National School Lunch Program (NSLP) is a federally assisted meal program operating in public and nonprofit private schools and residential child care institutions. The Free Lunch Program (FLP) under the NSLP has been providing nutritionally balanced lunches to children at no cost since 1946. Families who meet the income eligibility requirements or who receive Supplemental Nutritional Assistance Program (SNAP) benefits can apply through their children's school to receive free meals. The FLP ensures that students who may otherwise not have access to a nutritious meal are fed during the school day. This helps students remain focused and productive in school. Moreover, the lunches help students meet their basic nutritional requirements when their families may not be able to consistently provide a balanced and varied diet.

Technical Note: The distribution is based on data from 3,122 U.S. counties and county equivalents.

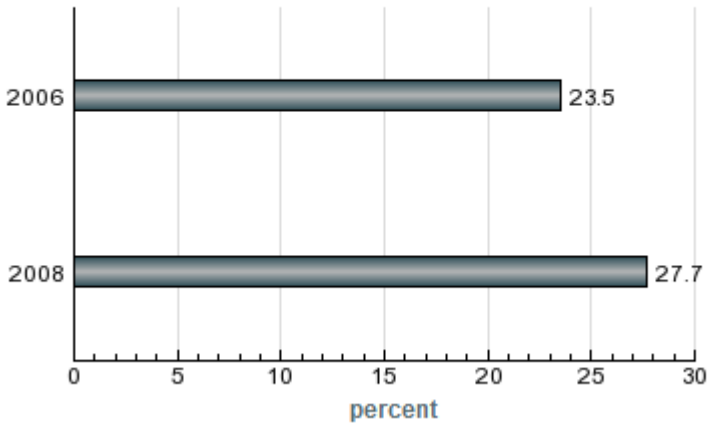
Source: U.S. Department of Agriculture - Food Environment Atlas

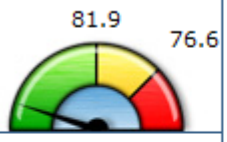
URL of Source: http://www.ers.usda.gov/FoodAtlas/

URL of Data: http://www.ers.usda.gov/FoodAtlas/downloadData.htm

Maintained By: Healthy Communities Institute

Time Series Data

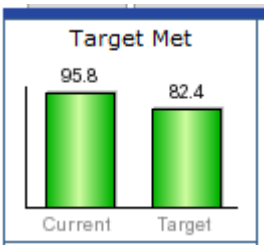




Red < 76.6
Green >= 81.9
In-between = Yellow
Unit: percent
View the Legend

High School Graduation

Value:	95.8 percent
Measurement Period:	2009-2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Education / Educational Attainment in Adult Population Education / Student Performance K-12



What is this Indicator?
This indicator shows the percentage of students who graduate high school within four years of their first enrollment in 9th grade.

Why this is important: Individuals who do not finish high school are more likely than people who finish high school to lack the basic skills required to function in an increasingly complicated job market and society. Adults with limited education levels are more likely to be unemployed, on government assistance, or involved in crime.

The Healthy People 2020 national health target is to increase the proportion of students who graduate high school within four years of their first enrollment in 9th grade to 82.4%.

Technical Note: The distribution is based on data from 67 Florida counties.

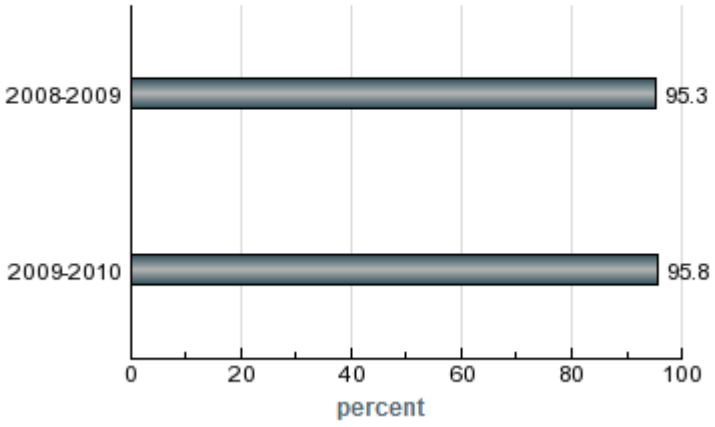
Source: Florida Department of Education

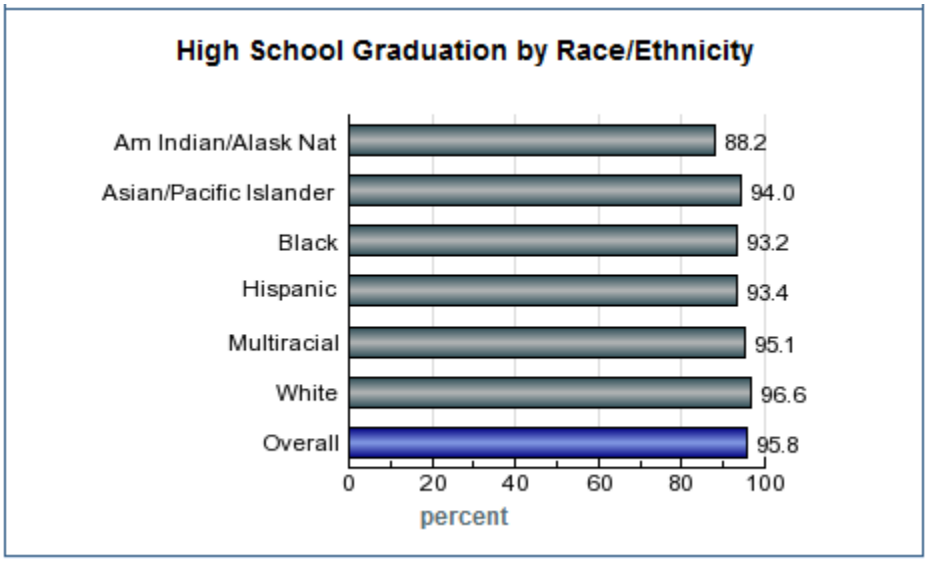
URL of Source: http://www.fldoe.org/

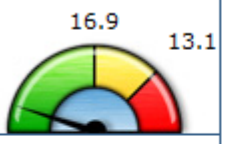
URL of Data: http://www.fldoe.org/eias/eiaspubs/archives.asp

Maintained By: Healthy Communities Institute

Time Series Data




High School Graduation by Race/Ethnicity
Am Indian/Alask Nat
Asian/Pacific Islander
Black
Hispanic
Multiracial
White
Overall
88.2
94.0
93.2
93.4
95.1
96.6
95.8
0
20
40
60
80
100
percent



Red < 13.1
Green >= 16.9
In-between = Yellow
Unit: percent
View the Legend

People 25+ with a Bachelor's Degree or Higher

Value:	26.2 percent
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Education / Higher Education

What is this Indicator?
This indicator shows the percentage of people 25 years and older who have earned a bachelor's degree or higher.

Why this is important: For many, having a bachelor's degree is the key to a better life. The college experience develops cognitive skills, and allows learning about a wide range of subjects, people, cultures, and communities. Having a degree also opens up career opportunities in a variety of fields, and is often the prerequisite to a higher-paying job. It is estimated that college graduates earn about $1 million more per lifetime than their non-graduate peers.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

Source: American Community Survey

URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

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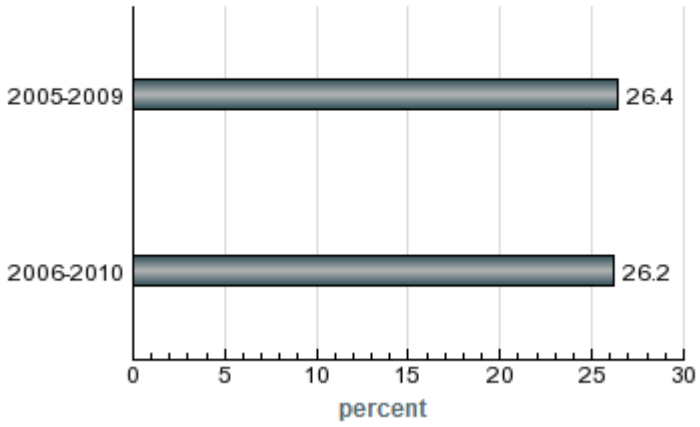

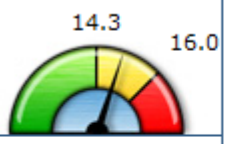

Red > 16.0
Green <= 14.3
In-between = Yellow
Unit:
students/teacher
View the Legend

Student-to-Teacher Ratio

Value:	14.9 students/teacher
Measurement Period:	2009-2010
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Education / School Environment Education / School Resources

What is this Indicator?
This indicator shows the average number of public school students per teacher in the county. It does not measure class size.

Why this is important: The student-teacher ratio gives a rough idea of the amount of individualized attention from teachers that is available to each student. Although it is not the same as class size, the student-teacher ratio is often a reasonable alternative on which to base estimates of class size. According to the National Center for Education Statistics, larger schools tend to have higher student-teacher ratios.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

Source: National Center for Education Statistics

URL of Source: http://nces.ed.gov/

URL of Data: http://nces.ed.gov/ccd/bat/

Maintained By: Healthy Communities Institute

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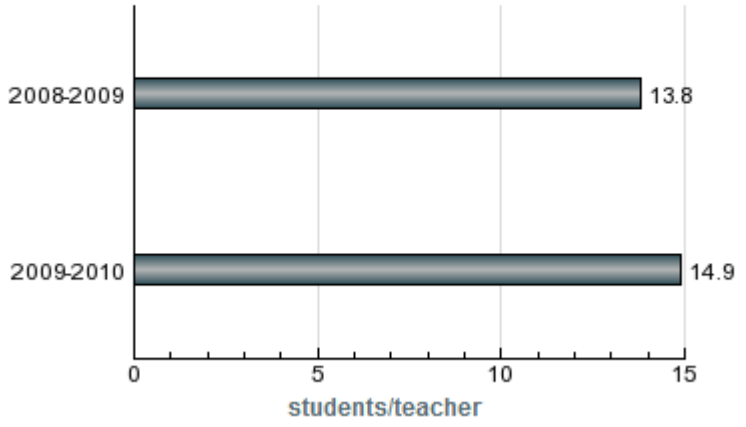
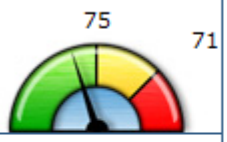




Red < 71
Green >= 75
In-between = Yellow
Unit: percent
View the Legend

4th Grade Students Proficient in Math

Value:	76 percent
Measurement Period:	2011
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Education / Student Performance K-12

What is this Indicator?
This indicator shows the percentage of fourth grade students scoring at or above their grade level in mathematics as measured by Florida's Comprehensive Assessment Test 2.0 (FCAT 2.0).

Why this is important: Competence in mathematics is essential for functioning in everyday life, as well as for success in our increasingly technological workplace. Students who take higher level mathematics and science courses which require strong fundamental skills in mathematics are more likely to attend and to complete college.

Technical Note: The distribution is based on data from 67 Florida counties.

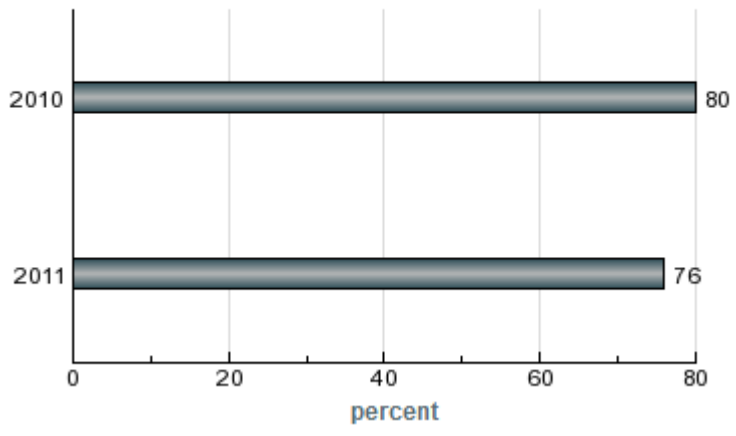
Source: Florida Department of Education

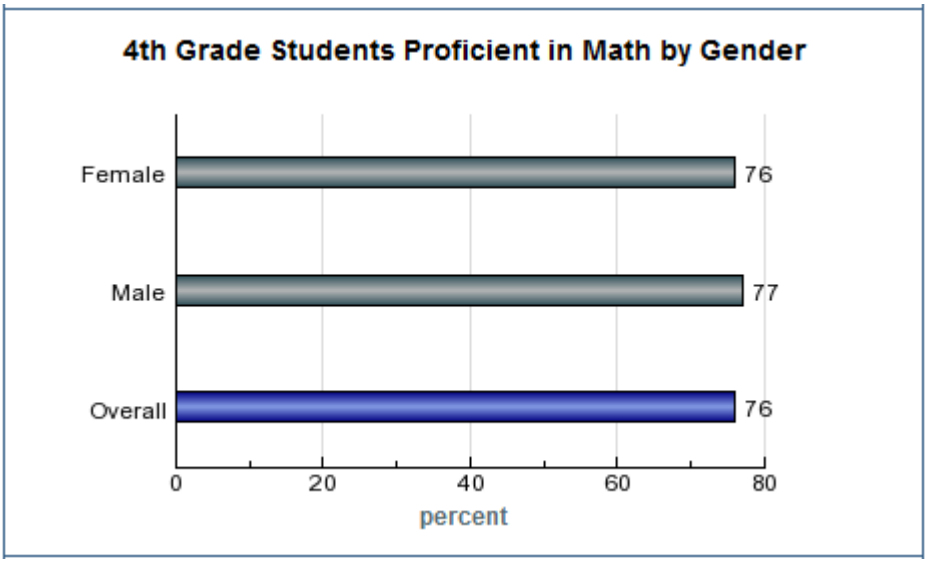
URL of Source: http://www.fldoe.org

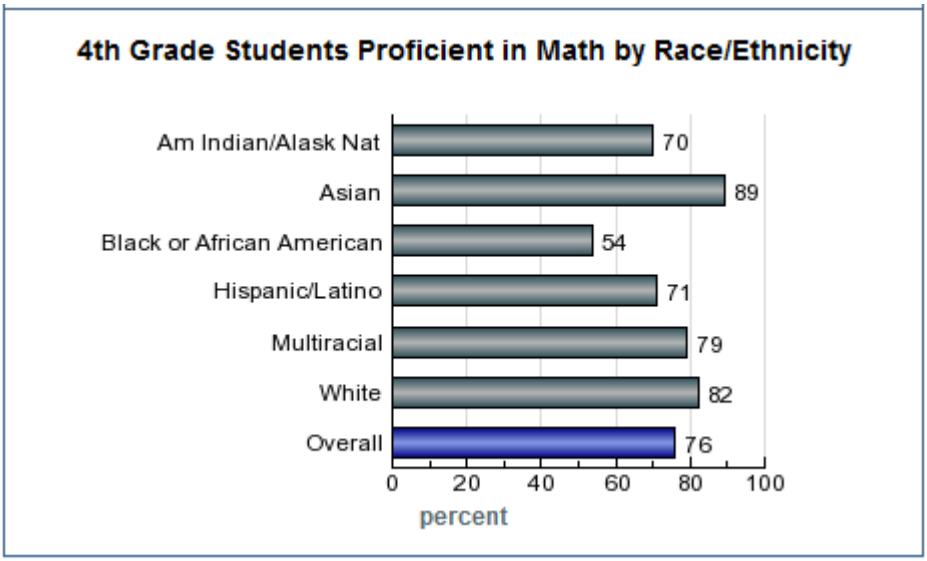
URL of Data: http://fcat.fldoe.org/mediapacket/2011/default.asp

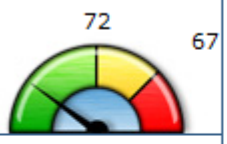
Maintained By: Healthy Communities Institute

Time Series Data




4th Grade Students Proficient in Math by Gender
Female
76
Male
77
Overall
76
0
20
40
60
80
percent


4th Grade Students Proficient in Math by Race/Ethnicity
Am Indian/Alask Nat
70
Asian
89
Black or African American
54
Hispanic/Latino
71
Multiracial
79
White
82
Overall
76
0
20
40
60
80
100
percent



Red < 67
Green >= 72
In-between = Yellow
Unit: percent
View the Legend

4th Grade Students Proficient in Reading

Value:	77 percent
Measurement Period:	2011
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Education / Student Performance K-12

What is this Indicator?
This indicator shows the percentage of fourth grade students scoring at or above their grade level in reading as measured by Florida's Comprehensive Assessment Test 2.0 (FCAT 2.0).

Why this is important: The ability to read proficiently is a fundamental skill that affects the learning experiences and school performance of children and adolescents. Students who are competent readers, as measured by their performance on reading tests, are more likely to perform well in other subjects, such as math and science. Reading achievement also predicts one's likelihood of graduating from high school and attending college.

Technical Note: The distribution is based on data from 67 Florida counties.

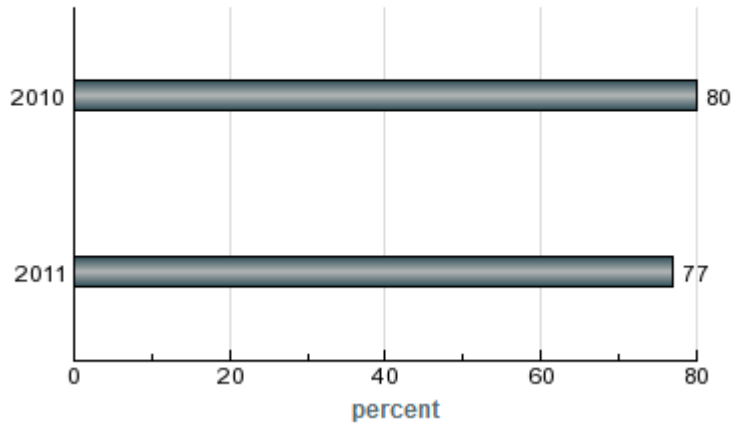
Source: Florida Department of Education

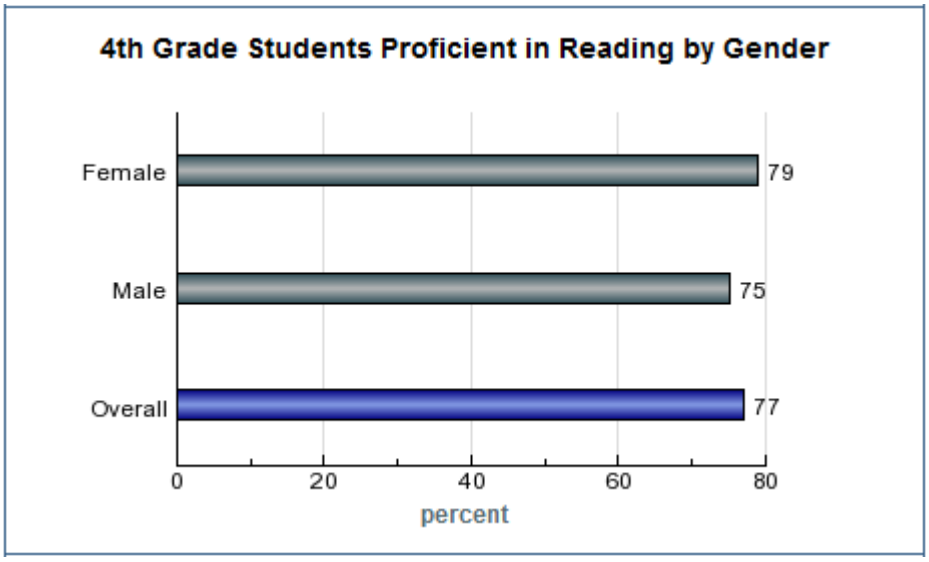
URL of Source: http://www.fldoe.org

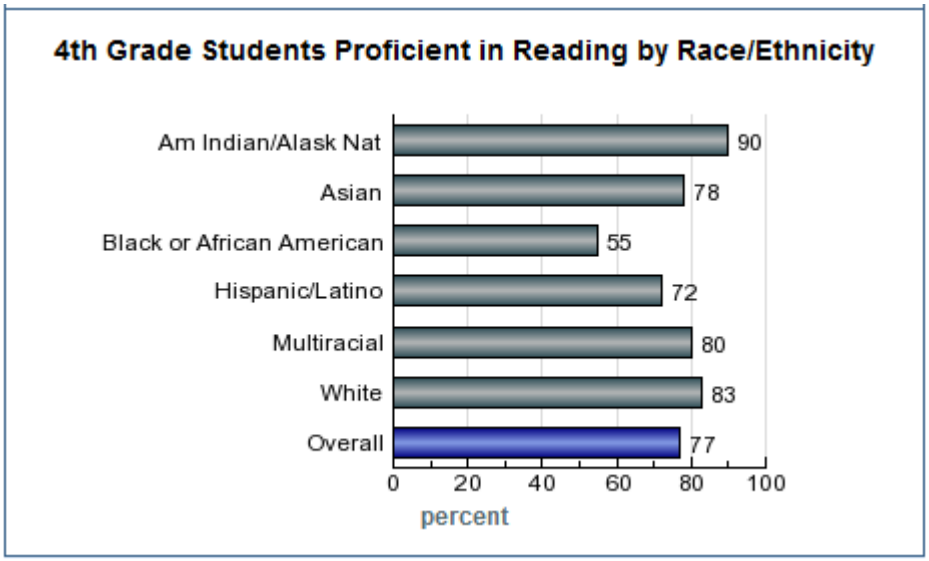
URL of Data: http://fcat.fldoe.org/mediapacket/2011/default.asp

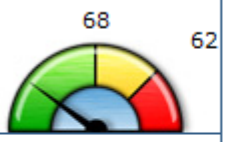
Maintained By: Healthy Communities Institute

Time Series Data




4th Grade Students Proficient in Reading by Gender
Female
Male
Overall
79
75
77
0
20
40
60
80
percent


4th Grade Students Proficient in Reading by Race/Ethnicity
Am Indian/Alask Nat
Asian
Black or African American
Hispanic/Latino
Multiracial
White
Overall
90
78
55
72
80
83
77
0
20
40
60
80
100
percent



Red < 62
Green >= 68
In-between = Yellow
Unit: percent
View the Legend

8th Grade Students Proficient in Math

Value:	76 percent
Measurement Period:	2011
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Education / Student Performance K-12

What is this Indicator?
This indicator shows the percentage of eighth grade students scoring at or above their grade level in mathematics as measured by Florida's Comprehensive Assessment Test 2.0 (FCAT 2.0).

Why this is important: Competence in mathematics is essential for functioning in everyday life, as well as for success in our increasingly technological workplace. Students who take higher level mathematics and science courses which require strong fundamental skills in mathematics are more likely to attend and to complete college.

Technical Note: The distribution is based on data from 67 Florida counties.

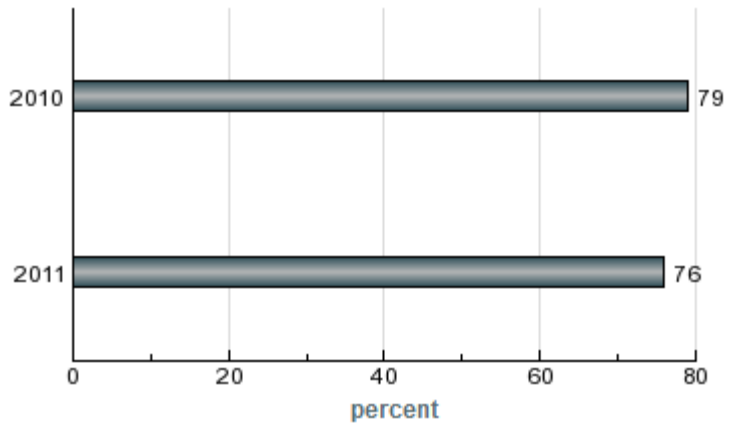
Source: Florida Department of Education

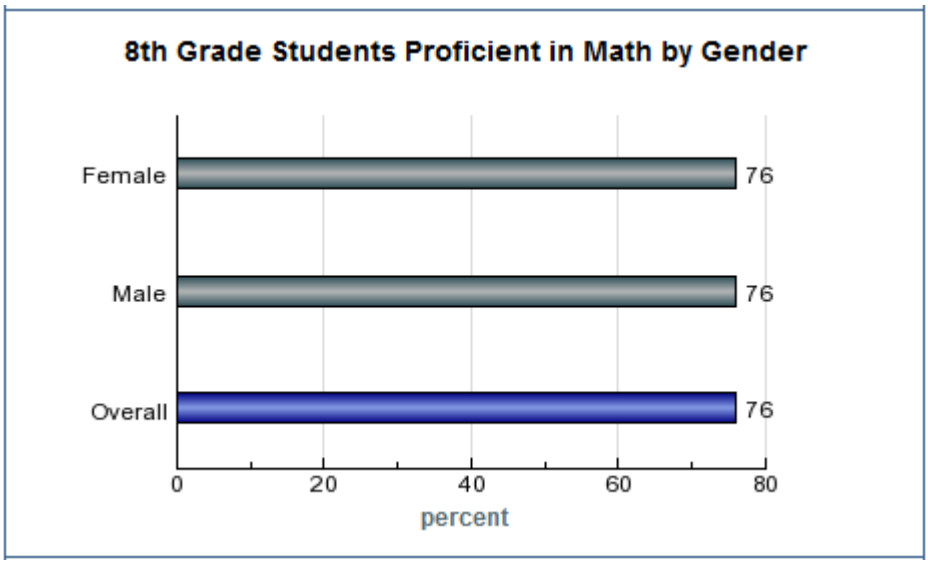
URL of Source: http://www.fldoe.org

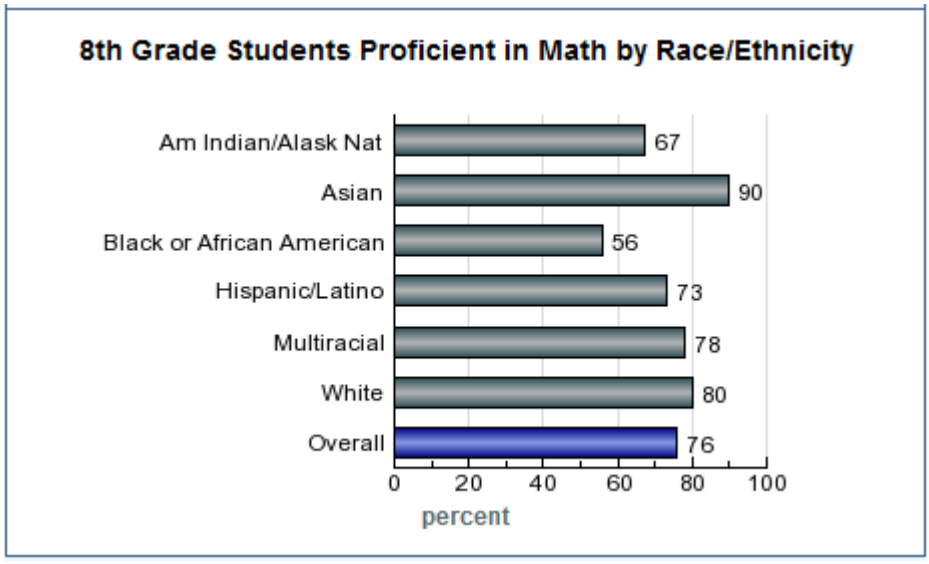
URL of Data: http://fcat.fldoe.org/mediapacket/2011/default.asp

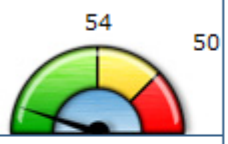
Maintained By: Healthy Communities Institute

Time Series Data




8th Grade Students Proficient in Math by Gender
Female
Male
Overall
76
76
76
0
20
40
60
80
percent


8th Grade Students Proficient in Math by Race/Ethnicity
Am Indian/Alask Nat
Asian
Black or African American
Hispanic/Latino
Multiracial
White
Overall
67
90
56
73
78
80
76
0
20
40
60
80
100
percent



Red < 50
Green >= 54
In-between = Yellow
Unit: percent
View the Legend

8th Grade Students Proficient in Reading

Value:	65 percent
Measurement Period:	2011
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Education / Student Performance K-12

What is this Indicator?
This indicator shows the percentage of eighth grade students scoring at or above their grade level in reading as measured by Florida's Comprehensive Assessment Test 2.0 (FCAT 2.0).

Why this is important: The ability to read proficiently is a fundamental skill that affects the learning experiences and school performance of children and adolescents. Students who are competent readers, as measured by their performance on reading tests, are more likely to perform well in other subjects, such as math and science. Reading achievement also predicts one's likelihood of graduating from high school and attending college.

Technical Note: The distribution is based on data from 67 Florida counties.

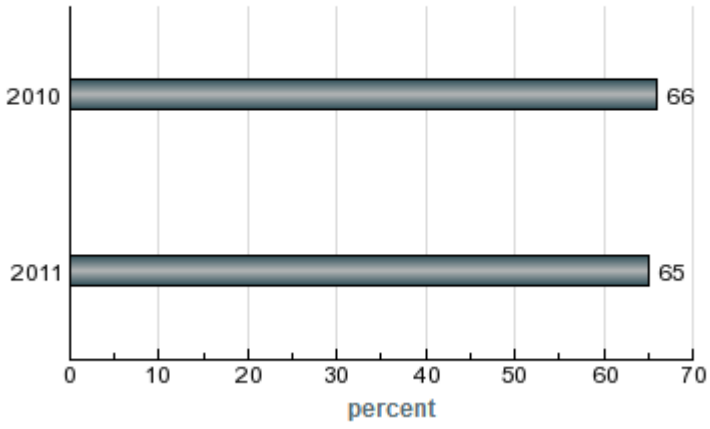
Source: Florida Department of Education

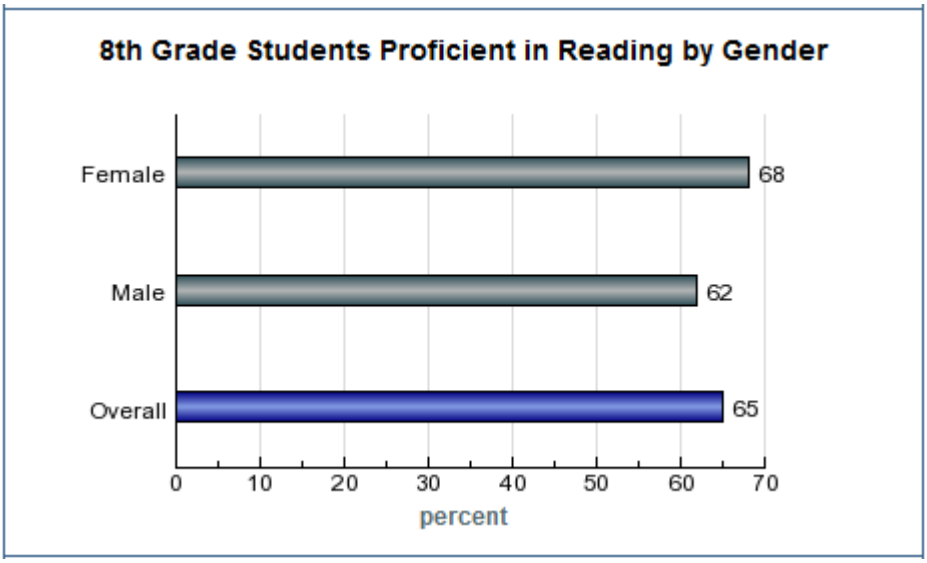
URL of Source: http://www.fldoe.org

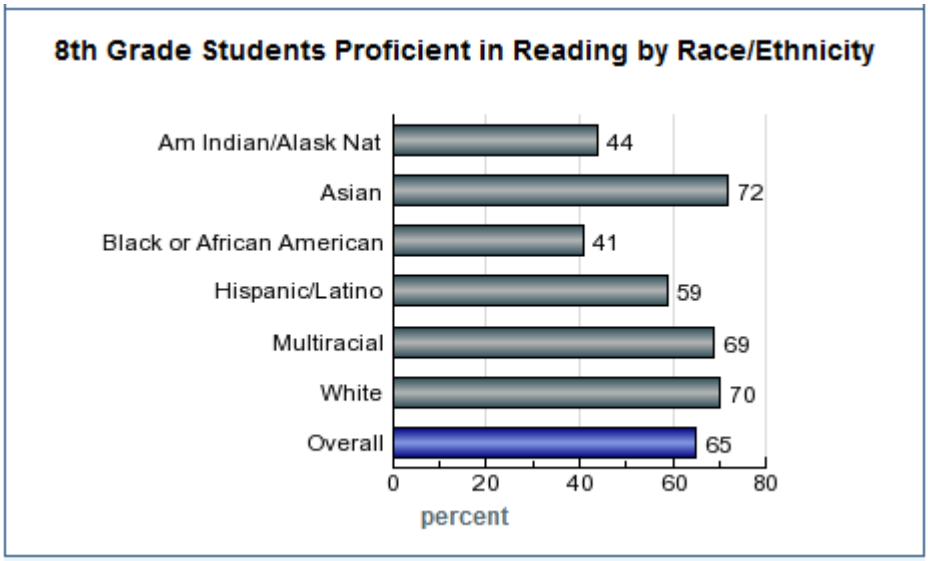
URL of Data: http://fcat.fldoe.org/mediapacket/2011/default.asp

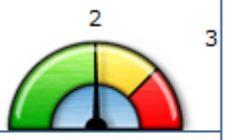
Maintained By: Healthy Communities Institute

Time Series Data




8th Grade Students Proficient in Reading by Gender
Female
68
Male
62
Overall
65
0
10
20
30
40
50
60
70
percent


8th Grade Students Proficient in Reading by Race/Ethnicity
Am Indian/Alask Nat
44
Asian
72
Black or African American
41
Hispanic/Latino
59
Multiracial
69
White
70
Overall
65
0
20
40
60
80
percent



Red > 3
Green <= 2
In-between = Yellow
View the Legend

Annual Ozone Air Quality

Value:	2
Measurement Period:	2008-2010
Location:	County : Brevard
Comparison:	Air Quality Index
Categories:	Environment / Air Health / Environmental & Occupational Health

What is this Indicator?
This indicator gives a grade to each county in the U.S. based on the annual number of high ozone days.

Why this is important: Ozone is an extremely reactive gas composed of three oxygen atoms. It is the primary ingredient of smog air pollution and very harmful to breathe. Ozone essentially attacks lung tissue by reacting chemically with it. It also damages crops, trees and other matter -- even breaking down rubber compounds.

Technical Note: The American Lung Association (ALA) assigns grades A-F to counties (A=1; B=2; C=3; D=4; F=5), based on average annual number of days that ozone levels exceeded U.S. standards during the three year measurement period. The five-point grading scale was used for the distribution (Green = <2; Yellow = 2 - 3; Red = >3). The air quality data is collected by the EPA and summarized by the ALA.

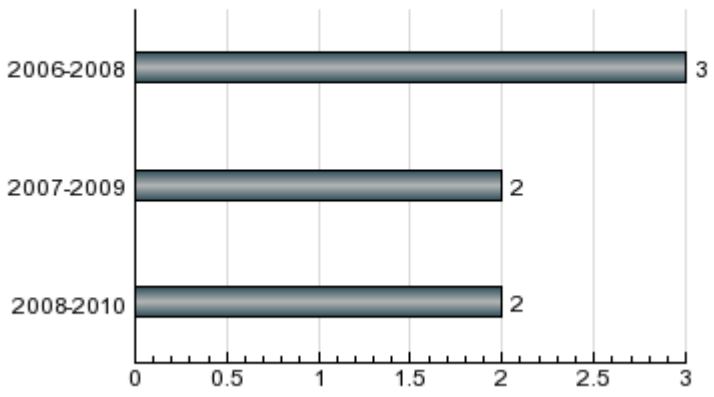
Source: American Lung Association

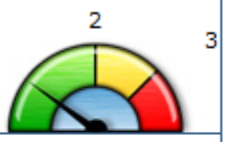
URL of Source: http://www.lungusa.org/

URL of Data: http://www.stateoftheair.org/2012/states/florida/

Maintained By: Healthy Communities Institute

Time Series Data





Red > 3
Green <= 2
In-between = Yellow
View the Legend

Annual Particle Pollution

Value:	1
Measurement Period:	2008-2010
Location:	County : Brevard
Comparison:	Air Quality Index
Categories:	Environment / Air Health / Environmental & Occupational Health

What is this Indicator?
This indicator gives a grade to each county in the U.S. based on the average annual number of days that exceed U.S. particle pollution standards (PM2.5).

Why this is important: Particle pollution refers to the amount of particulate matter in the atmosphere. Inhaling particulate matter can adversely affect health through illnesses such as asthma or cardiovascular problems, or premature death. The smaller the particulate matter, the more hazardous it is to health.

Technical Note: The American Lung Association (ALA) assigns grades A-F to counties (A=1; B=2; C=3; D=4; F=5), based on number of days that particle pollution exceeded US standards during the three year measurement period. The five-point grading scale was used for the distribution (Green = <2; Yellow = 2 - 3; Red = >3). The air quality data is collected by the EPA and summarized by the ALA.

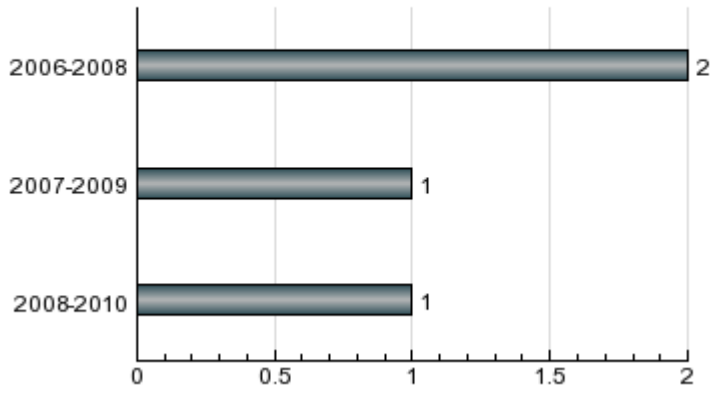
Source: American Lung Association

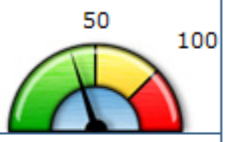
URL of Source: http://www.lungusa.org/

URL of Data: http://www.stateoftheair.org/2012/states/florida/

Maintained By: Healthy Communities Institute

Time Series Data





Red > 100
Green <= 50
In-between = Yellow
View the Legend

Daily Ozone Air Quality

Value:	39
Measurement Period:	June 15, 2012 9:00 EDT
Location:	County : Brevard
Comparison:	Air Quality Index
Categories:	Environment / Air Health / Environmental & Occupational Health

What is this Indicator?
This indicator shows today's level of ozone pollution.

Why this is important: Ozone is an extremely reactive gas composed of three oxygen atoms. It is the primary ingredient of smog air pollution and very harmful to breathe. Ozone essentially attacks lung tissue by reacting chemically with it. It also damages crops, trees and other matter -- even breaking down rubber compounds.

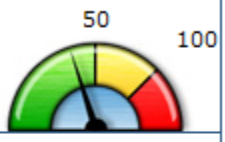
Technical Note: The distribution is based on AIRNow's rating system. Green values (0-50) represent good air quality days. Yellow values (51-100) represent moderate air quality. Red values represent conditions that are unhealthy to sensitive groups (101-150), unhealthy (151-200), very unhealthy (201-300) and hazardous (>300).

Source: AIRNow

URL of Source: http://www.airnow.gov

URL of Data: http://airnow.gov/index.cfm?action=airnow.local_city&city...

Maintained By: Healthy Communities Institute



Red > 100
Green <= 50
In-between = Yellow
View the Legend

Daily Particle Pollution

Value:	23
Measurement Period:	June 15, 2012 9:00 EDT
Location:	County : Brevard
Comparison:	Air Quality Index
Categories:	Environment / Air Health / Environmental & Occupational Health

What is this Indicator?
This indicator shows today's level of particle pollution, also known as particulate matter.

Why this is important: Particle pollution refers to the amount of particulate matter in the atmosphere. Particle pollution in the air includes a mixture of solid and liquid droplets. Some particles are emitted directly; others are formed in the atmosphere when other pollutants react. Particles come in a wide range of sizes. Particles of concern include both very small, "fine" particles (less than 2.5 micrometers) and somewhat larger "coarse" dust particles (2.5 to 10 micrometers). Those less than 10 micrometers in diameter are so small that they can get into the lungs. Inhaling particulate matter can adversely affect health through illnesses such as asthma or cardiovascular problems. The smaller the particulate matter, the more hazardous it is to health. Fine particles have been more clearly linked to the most serious health problems.

Technical Note: The distribution is based on AIRNow's rating system. Green values (0-50) represent good air quality days. Yellow values (51-100) represent moderate air quality. Red values represent conditions that are unhealthy to sensitive groups (101-150), unhealthy (151-200), very unhealthy (201-300) and hazardous (>300).

Source: AIRNow

URL of Source: http://www.airnow.gov

URL of Data: http://airnow.gov/index.cfm?action=airnow.local_city&city...

Maintained By: Healthy Communities Institute

Recognized Carcinogens Released into Air

Value:	63389 pounds
Measurement Period:	2010
Location:	County : Brevard
Comparison:	Prior Value
Categories:	Environment / Air Health / Environmental & Occupational Health

What is this Indicator?
This indicator compares the quantity (in pounds) of reported and recognized carcinogens released into the air.

Why this is important: Recognized carcinogens are compounds with strong scientific evidence that they can induce cancer. In industry, there are many potential exposures to carcinogens. Generally, workplace exposures are considered to be at higher levels than for public exposures. These data only reflect releases of chemicals, not whether (or to what degree) workers or the public has been exposed to those chemicals.

Technical Note: This data considers fugitive and point source emissions of 179 recognized OSHA carcinogens. Data from all industry sectors subject to reporting under the Toxic Release Inventory (TRI) program are included.

The trend is a comparison between the most recent and previous measurement periods. Confidence intervals were not taken into account in determining the direction of the trend.

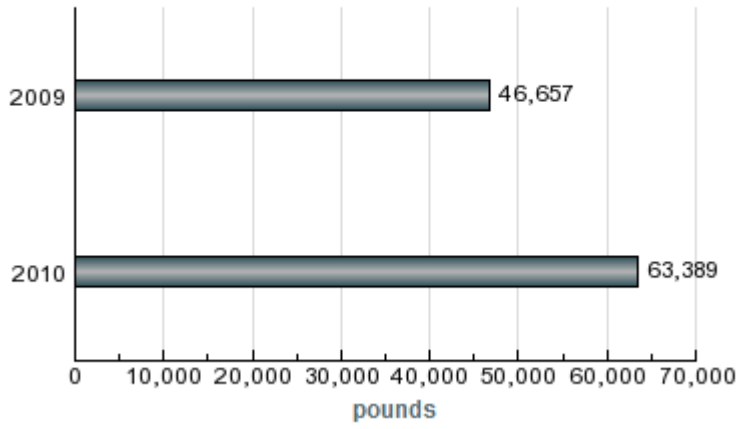
Source: U.S. Environmental Protection Agency

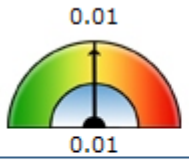
URL of Source: http://www.epa.gov/

URL of Data: http://iaspub.epa.gov/triexplorer/tri_release.geography

Maintained By: Healthy Communities Institute

Time Series Data





Comparison: 0.01
Unit: markets/1,000 population
View the Legend

Farmers Market Density

Value:	0.01 markets/1,000 population
Measurement Period:	2009
Location:	County : Brevard
Comparison:	U.S. Value
Categories:	Environment / Built Environment Health / Exercise, Nutrition, & Weight

What is this Indicator?
This indicator shows the number of farmers markets per 1,000 population. A farmers market is a retail outlet in which vendors sell agricultural products directly to customers.

Why this is important: Farmers markets provide a way for community members to buy fresh and affordable agricultural products while supporting local farmers. Farmers markets often emphasize good nutrition and support consumers to cook healthier meals and maintain good eating habits. A diet comprised of nutritious foods, in combination with an active lifestyle, can reduce the incidence of heart disease, cancer and diabetes and is essential to maintain a healthy body weight and prevent obesity.

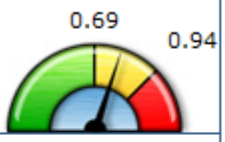
Technical Note: The regional value is compared to the median value of 3,141 U.S. counties and county equivalents. Market data is from 2009 and the population estimates are from 2008.

Source: U.S. Department of Agriculture - Food Environment Atlas

URL of Source: http://www.ers.usda.gov/FoodAtlas/

URL of Data: http://www.ers.usda.gov/FoodAtlas/downloadData.htm

Maintained By: Healthy Communities Institute



Red > 0.94
Green <= 0.69
In-between = Yellow
Unit:
restaurants/1,000 population
View the Legend

Fast Food Restaurant Density

Value:	0.78 restaurants/1,000 population
Measurement Period:	2008
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Environment / Built Environment Health / Exercise, Nutrition, & Weight

What is this Indicator?
This indicator shows the number of fast food restaurants per 1,000 population. These include limited-service establishments where people pay before eating.

Why this is important: Fast food is often high in fat and calories and lacking in recommended nutrients. Frequent consumption of these foods and an insufficient consumption of fresh fruits and vegetables increase the risk of overweight and obesity. Individuals who are overweight or obese are at increased risk for serious health conditions, including coronary heart disease, type-2 diabetes, multiple cancers, hypertension, stroke, premature death and other chronic conditions. Fast food outlets are more common in low-income neighborhoods and studies suggest that they strongly contribute to the high incidence of obesity and obesity-related health problems in these communities.

Technical Note: The distribution is based on data from 3,141 U.S. counties and county equivalents.

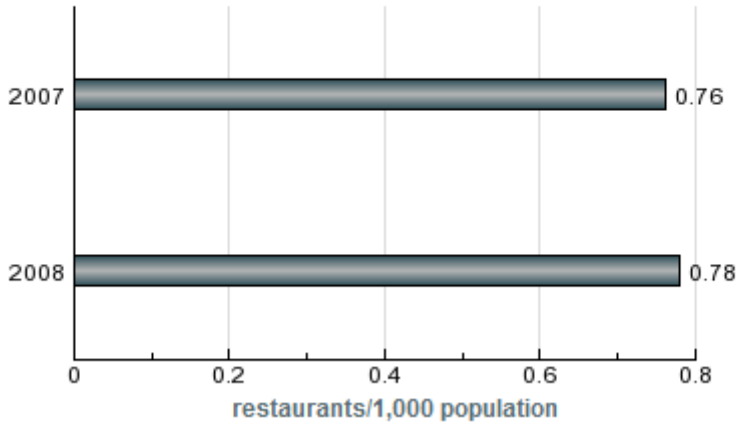
Source: U.S. Department of Agriculture - Food Environment Atlas

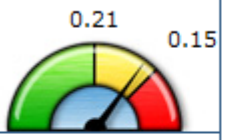
URL of Source: http://www.ers.usda.gov/FoodAtlas/

URL of Data: http://www.ers.usda.gov/FoodAtlas/downloadData.htm

Maintained By: Healthy Communities Institute

Time Series Data





Red < 0.15
Green >= 0.21
In-between = Yellow
Unit: stores/1,000 population
View the Legend

Grocery Store Density

Value:	0.15 stores/1,000 population
Measurement Period:	2008
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Environment / Built Environment Health / Exercise, Nutrition, & Weight

What is this Indicator?
This indicator shows the number of supermarkets and grocery stores per 1,000 population. Convenience stores and large general merchandise stores such as supercenters and warehouse club stores are not included in this count.

Why this is important: There are strong correlations between the density of grocery stores in a neighborhood and the nutrition and diet of its residents. The availability and affordability of healthy and varied food options in the community increase the likelihood that residents will have a balanced and nutritious diet. A diet comprised of nutritious foods, in combination with an active lifestyle, can reduce the incidence of heart disease, cancer and diabetes and is essential to maintain a healthy body weight and prevent obesity. Low-income and under-served communities often have limited access to stores that sell healthy food, especially high-quality fruits and vegetables. Moreover, rural communities often have a high number of convenience stores, where healthy and fresh foods are less available than in larger, retail food markets.

Technical Note: The distribution is based on data from 3,141 U.S. counties and county equivalents.

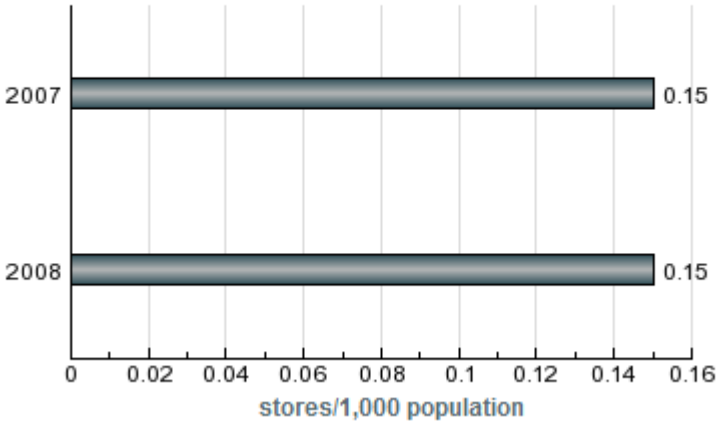
Source: U.S. Department of Agriculture - Food Environment Atlas

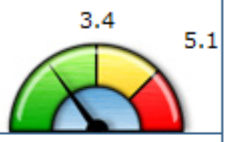
URL of Source: http://www.ers.usda.gov/FoodAtlas/

URL of Data: http://www.ers.usda.gov/FoodAtlas/downloadData.htm

Maintained By: Healthy Communities Institute

Time Series Data





Red > 5.1
Green <= 3.4
In-between = Yellow
Unit: percent
View the Legend

Households without a Car and > 1 Mile from a Grocery Store

Value:	2.2 percent
Measurement Period:	2006
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Environment / Built Environment Transportation / Personal Vehicle Travel

What is this Indicator?
This indicator shows the percentage of housing units that are more than one mile from a supermarket or large grocery store and do not have a car.

Why this is important: The accessibility, availability and affordability of healthy and varied food options in the community increase the likelihood that residents will have a balanced and nutritious diet. A diet comprised of nutritious foods, in combination with an active lifestyle, can reduce the incidence of heart disease, cancer and diabetes and is essential to maintain a healthy body weight and prevent obesity. Low-income and under-served areas often have limited numbers of stores that sell healthy foods. People living farther away from grocery stores and who do not have personal transportation to access the grocery stores are less likely to access healthy food options on a regular basis and thus more likely to consume foods which are readily available at convenience stores and fast food outlets.

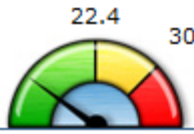
Technical Note: The distribution is based on data from 3,109 U.S. counties and county equivalents. Store data are from 2006 and household data are from 2000.

Source: U.S. Department of Agriculture - Food Environment Atlas

URL of Source: http://www.ers.usda.gov/FoodAtlas/

URL of Data: http://www.ers.usda.gov/FoodAtlas/downloadData.htm

Maintained By: Healthy Communities Institute



Red > 30.7
Green <= 22.4
In-between = Yellow
Unit: percent
View the Legend

Low-Income and >1 Mile from a Grocery Store

Value:	13.2 percent
Measurement Period:	2006
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Environment / Built Environment Health / Exercise, Nutrition, & Weight

What is this Indicator?
This indicator shows the percentage of the total population in a county that is low income and living more than one mile from a supermarket or large grocery store.

Why this is important: The accessibility, availability and affordability of healthy and varied food options in the community increase the likelihood that residents will have a balanced and nutritious diet. A diet comprised of nutritious foods, in combination with an active lifestyle, can reduce the incidence of heart disease, cancer and diabetes and is essential to maintain a healthy body weight and prevent obesity. Low-income and under-served areas often have limited numbers of stores that sell healthy foods. People living farther away from grocery stores are less likely to access healthy food options on a regular basis and thus more likely to consume foods which are readily available at convenience stores and fast food outlets.

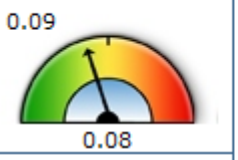
Technical Note: The distribution is based on data from 3,109 U.S. counties and county equivalents. Store data are from 2006 and household data are from 2000.

Source: U.S. Department of Agriculture - Food Environment Atlas

URL of Source: http://www.ers.usda.gov/FoodAtlas/

URL of Data: http://www.ers.usda.gov/FoodAtlas/downloadData.htm

Maintained By: Healthy Communities Institute



Comparison: 0.08
Unit: facilities/1,000 population
View the Legend

Recreation and Fitness Facilities

Value:	0.09 facilities/1,000 population
Measurement Period:	2008
Location:	County : Brevard
Comparison:	U.S. Value
Categories:	Environment / Built Environment Health / Exercise, Nutrition, & Weight

What is this Indicator?
This indicator shows the number of fitness and recreation centers per 1,000 population.

Why this is important: People engaging in an active lifestyle have a reduced risk of many serious health conditions including obesity, heart disease, diabetes, and high blood pressure. In addition, physical activity improves mood and promotes healthy sleep patterns. The American College of Sports Medicine (ACSM) recommends that active adults perform physical activity three to five times each week for 20 to 60 minutes at a time to improve cardiovascular fitness and body composition. People are more likely to engage in physical activity if their community has facilities which support recreational activities, sports and fitness.

Technical Note: The regional value is compared to the median value of 3,141 U.S. counties and county equivalents.

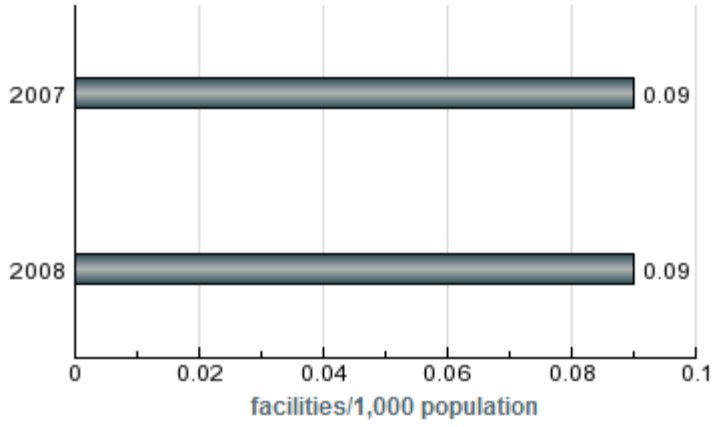
Source: U.S. Department of Agriculture - Food Environment Atlas

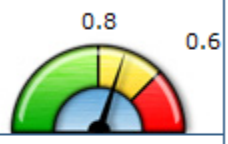
URL of Source: http://www.ers.usda.gov/FoodAtlas/

URL of Data: http://www.ers.usda.gov/FoodAtlas/downloadData.htm

Maintained By: Healthy Communities Institute

Time Series Data





Red < 0.6
Green >= 0.8
In-between = Yellow
Unit: stores/1,000 population
View the Legend

SNAP Certified Stores

Value:	0.7 stores/1,000 population
Measurement Period:	2009
Location:	County : Brevard
Comparison:	U.S. Counties
Categories:	Environment / Built Environment Economy / Poverty Health / Exercise, Nutrition, & Weight

What is this Indicator?
This indicator shows the number of stores certified to accept Supplemental Nutrition Assistance Program benefits per 1,000 population. SNAP stores include: supermarkets; grocery stores and convenience stores; super stores and supercenters; warehouse club stores; specialized food stores (retail bakeries, meat and seafood markets, and produce markets); and meal service providers that serve eligible persons.

Why this is important: SNAP, previously called the Food Stamp Program, is a federal-assistance program that provides low-income families with electronic benefit transfers (EBTs) that can be used to purchase food. The purpose of the program is to assist low-income households in obtaining adequate and nutritious diets.

The number of Americans receiving SNAP benefits reached 39.68 million in February 2010, the highest number since the Food Stamp Program began in 1939. As of June 2009, the average monthly benefit was $133.12 per person and as of November 2009, one in eight Americans and one in four children were using SNAP benefits.

Technical Note: The distribution is based on data from 3,137 U.S. counties and county equivalents.

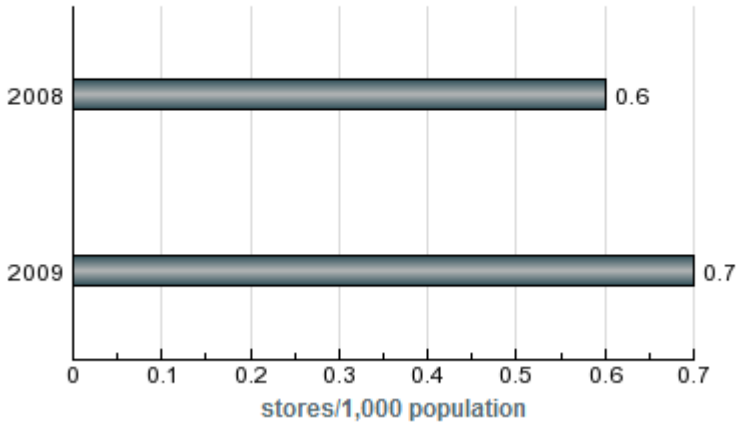
Source: U.S. Department of Agriculture - Food Environment Atlas

URL of Source: http://www.ers.usda.gov/FoodAtlas/

URL of Data: http://www.ers.usda.gov/FoodAtlas/downloadData.htm

Maintained By: Healthy Communities Institute

Time Series Data



PBT Released

Value:	5441 pounds
Measurement Period:	2010
Location:	County : Brevard
Comparison:	Prior Value
Categories:	Environment / Toxic Chemicals Health / Environmental & Occupational Health

What is this Indicator?
This indicator shows the total net pounds of reported PBT (Persistent, Bioaccumulative, and Toxic Chemicals) released.

Why this is important: Persistent, Bioaccumulative, and Toxic Chemicals, such as lead and mercury, can cause harmful effects to the environment and humans alike. However, these data only reflect releases and other waste management activities of chemicals, not whether (or to what degree) the public has been exposed to those chemicals.

Technical Note: The trend is a comparison between the most recent and previous measurement periods. Confidence intervals were not taken into account in determining the direction of the trend.

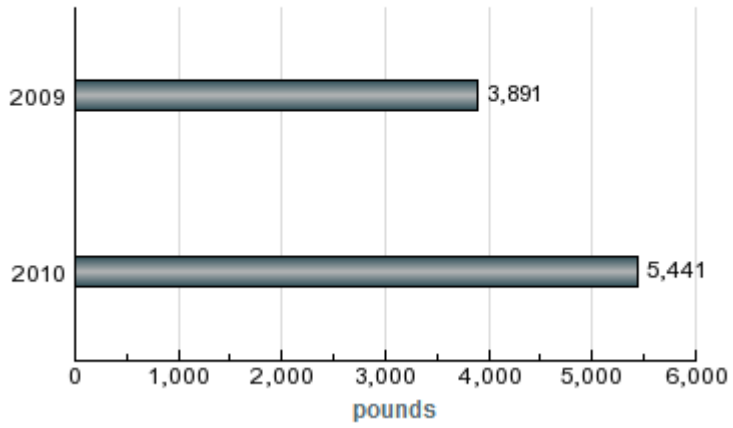
Source: U.S. Environmental Protection Agency

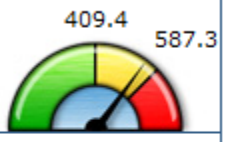
URL of Source: http://www.epa.gov/

URL of Data: http://iaspub.epa.gov/triexplorer/tri_release.geography

Maintained By: Healthy Communities Institute

Time Series Data





Red > 587.3
Green <= 409.4
In-between = Yellow
Unit: crimes/100,000 population
View the Legend

Violent Crime Rate

Value:	575.4 crimes/100,000 population
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Public Safety / Crime & Crime Prevention

What is this Indicator?
This indicator shows the total violent crime rate per 100,000 population.

Why this is important: A violent crime is a crime in which the offender uses or threatens to use violent force upon the victim. Violent crimes include homicide, assault, rape, and robbery. Violence negatively impacts communities by reducing productivity, decreasing property values, and disrupting social services. In the United States in 2009, an estimated 1,318,398 violent crimes occurred. This equates to an estimated 429.4 violent crimes per 100,000 population nationwide.

Technical Note: The distribution is based on data from 67 Florida counties.

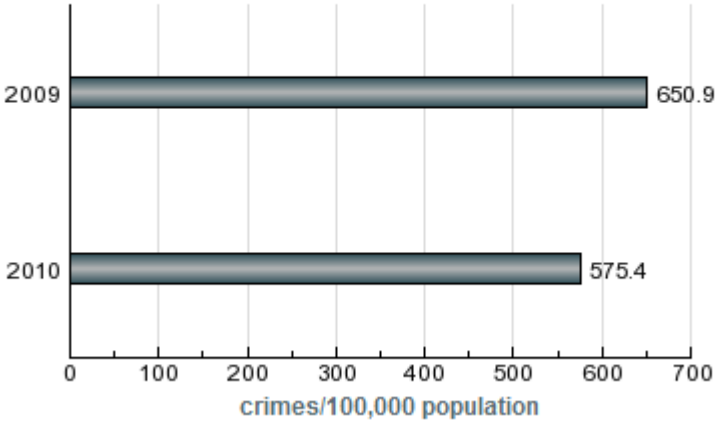
Source: Florida Department of Law Enforcement

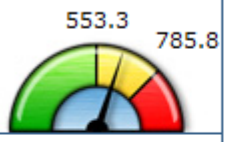
URL of Source: http://www.fdle.state.fl.us/

URL of Data: http://www.fdle.state.fl.us/Content/FSAC/Data---Statistic...

Maintained By: Healthy Communities Institute

Time Series Data





Red > 785.8
Green <= 553.3
In-between = Yellow
Unit:
offenses/100,000 population
View the Legend

Domestic Violence Offense Rate

Value:	689.8 offenses/100,000 population
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Public Safety / Domestic Violence Public Safety / Crime & Crime Prevention

What is this Indicator?
This indicator shows the rate per 100,000 population of total reported domestic violence offenses.

Why this is important: Domestic violence is any criminal offense resulting in physical injury or death of one family or household member by another family or household member, including assault, battery, sexual assault, sexual battery, stalking, kidnapping, or false imprisonment. According to the Commission on Domestic Violence, domestic violence offenses typically account for about 14% of all criminal offenses annually.

Technical Note: The distribution is based on data from 67 Florida counties.

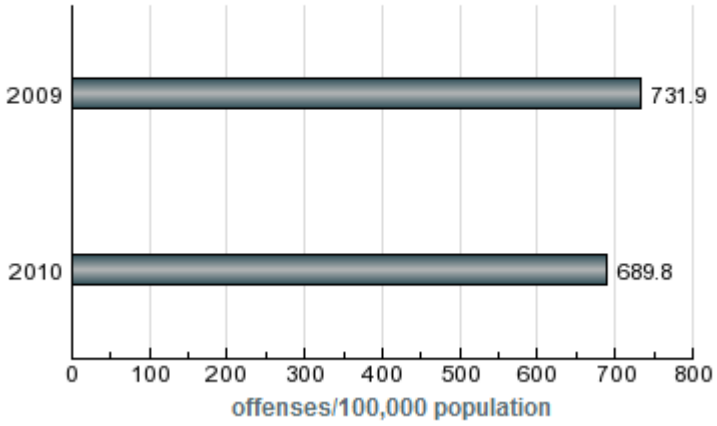
Source: Florida Department of Law Enforcement

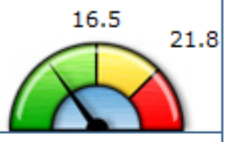
URL of Source: http://www.fdle.state.fl.us/Content/home.aspx

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=08...

Maintained By: Healthy Communities Institute

Time Series Data

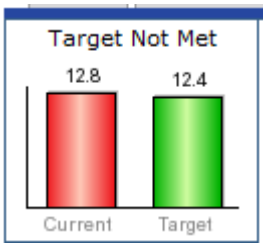




Red > 21.8
Green <= 16.5
In-between = Yellow
Unit: deaths/100,000 population
View the Legend

Age-Adjusted Death Rate due to Motor Vehicle Collisions

Value:	12.8 deaths/100,000 population
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Public Safety / Transportation Safety Transportation / Personal Vehicle Travel Health / Mortality Data



What is this Indicator?
This indicator shows the age-adjusted death rate per 100,000 population due to motor vehicle crashes.

Why this is important: Motor vehicle-related injuries kill more children and young adults than any other single cause in the United States. More than 41,000 people in the United States die in motor vehicle crashes each year, and crash injuries result in about 500,000 hospitalizations and four million emergency department visits annually. Increased use of safety belts and reductions in driving while impaired are two of the most effective means to reduce the risk of death and serious injury of occupants in motor vehicle crashes.

The Healthy People 2020 national health target is to reduce the motor vehicle collision death rate to 12.4 deaths per 100,000 population.

Technical Note: The distribution is based on data from 67 Florida counties.

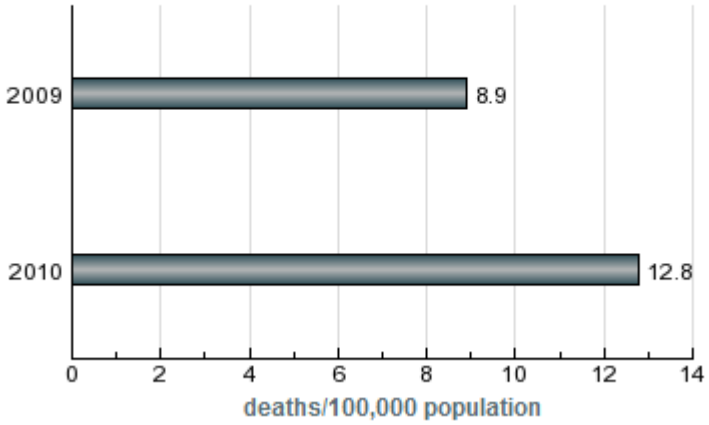
Source: Florida Department of Health, Bureau of Vital Statistics

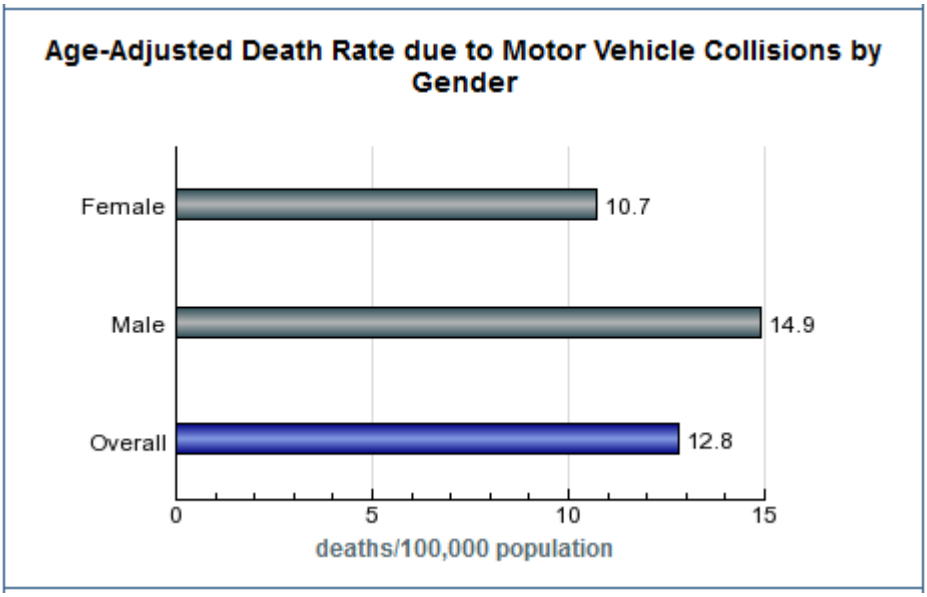
URL of Source: http://www.doh.state.fl.us/planning_eval/vital_statistics...

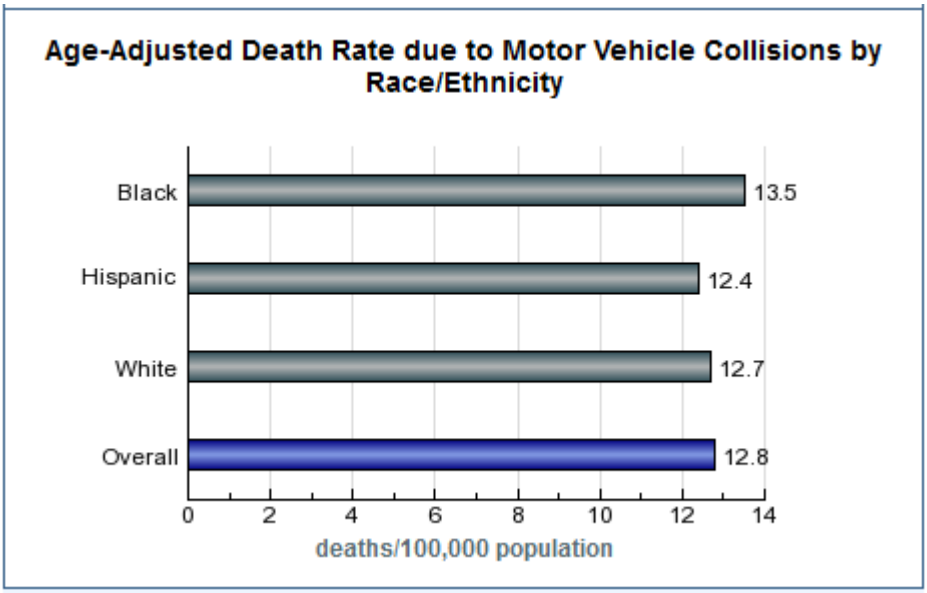
URL of Data: http://www.floridacharts.com/charts/DataViewer/DeathViewe...

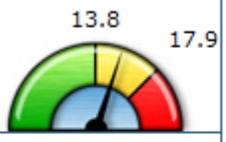
Maintained By: Healthy Communities Institute

Time Series Data




Age-Adjusted Death Rate due to Motor Vehicle Collisions by Gender
Female
10.7
Male
14.9
Overall
12.8
0
5
10
15
deaths/100,000 population


Age-Adjusted Death Rate due to Motor Vehicle Collisions by Race/Ethnicity
Black
13.5
Hispanic
12.4
White
12.7
Overall
12.8
0
2
4
6
8
10
12
14
deaths/100,000 population



Red > 17.9
Green <= 13.8
In-between = Yellow
Unit: cases/1,000 children
View the Legend

Child Abuse Rate

Value:	15.3 cases/1,000 children
Measurement Period:	2010
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Social Environment / Children's Social Environment Health / Children's Health

What is this Indicator?
This indicator shows the number of children aged 5-11 who have experienced abuse (sexual, physical or emotional) in cases per 1,000 children.

Why this is important: There are several types of child abuse including physical, sexual, and emotional abuse. Child abuse and neglect can have enduring physical, intellectual, and psychological repercussions into adolescence and adulthood. All types of child abuse and neglect have long lasting effects throughout life, damaging a child's sense of self, ability to have healthy relationships, and ability to function at home, at work, and at school.

Technical Note: The distribution is based on data from 67 Florida counties. Rates include unduplicated counts of children who were victims of at least one verified maltreatment by county of intake.

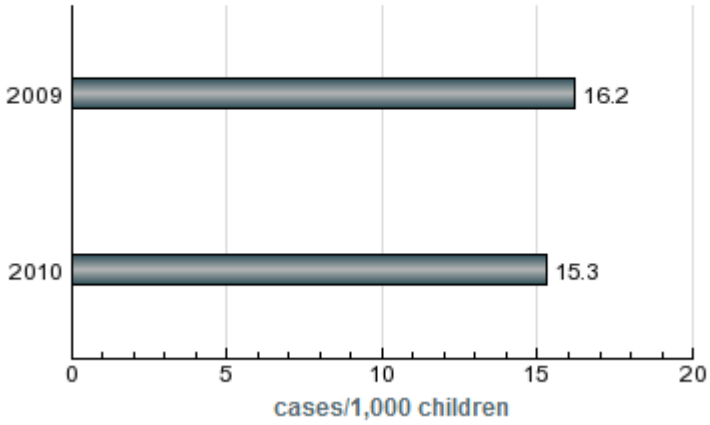
Source: Florida Department of Children and Families

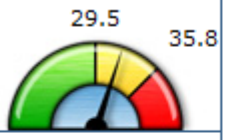
URL of Source: http://www.dcf.state.fl.us/

URL of Data: http://www.floridacharts.com/charts/report.aspx?domain=03...

Maintained By: Healthy Communities Institute

Time Series Data





Red > 35.8
Green <= 29.5
In-between = Yellow
Unit: percent
View the Legend

Single-Parent Households

Value:	30.2 percent
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Social Environment / Family Structure Social Environment / Children's Social Environment Social Environment / Demographics

What is this Indicator?
This indicator shows the percentage of children living in single-parent family households (with a male or female householder and no spouse present) out of all children living in family households.

Why this is important: Adults and children in single-parent households are at a higher risk for adverse health effects, such as emotional and behavioral problems, compared to their peers. Children in such households are more likely to develop depression, smoke, and abuse alcohol and other substances. Consequently, these children experience increased risk of morbidity and mortality of all causes. Similarly, single parents suffer from lower perceived health and higher risk of mortality.

Technical Note: The distribution is based on data from 3,142 U.S. counties and county equivalents.

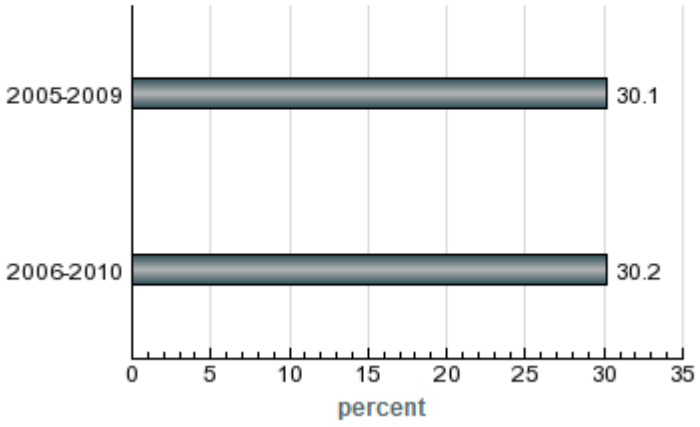
Source: American Community Survey

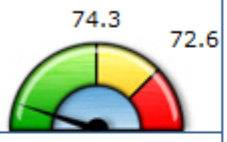
URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

Time Series Data





Red < 72.6
Green >= 74.3
In-between = Yellow
Unit: percent
View the Legend

Voter Turnout

Value:	82.5 percent
Measurement Period:	2008
Location:	County : Brevard
Comparison:	FL Counties
Categories:	Social Environment / Social & Civic Involvement Government & Politics / Elections & Voting

What is this Indicator?
This indicator shows the percentage of registered voters who voted in the previous presidential election.

Why this is important: Voting is one of the most fundamental rights of a democratic society. Exercising this right allows a nation to choose elected officials and hold them accountable. Voting ensures that all citizens have the opportunity to voice their opinions on issues such as the use of tax dollars, civil rights and foreign policy. By voting, individuals shape their communities and influence the next generation of society. A high level of turnout indicates that citizens are involved in and interested in who represents them in the political system.

Technical Note: The distribution is based on data from 67 Florida counties.

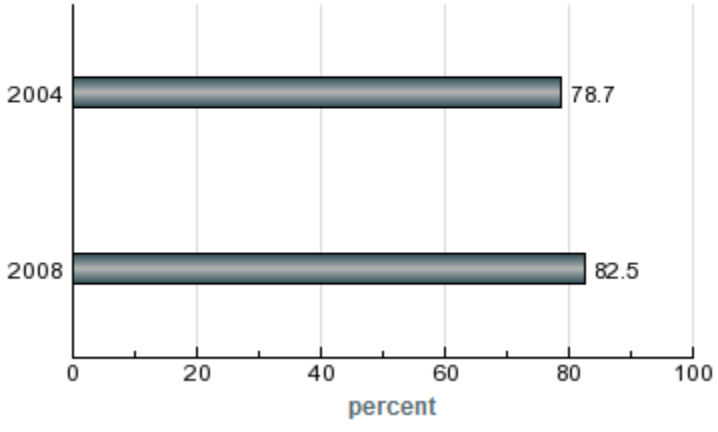
Source: Florida Department of State

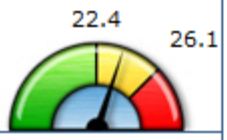
URL of Source: http://www.dos.state.fl.us/

URL of Data: http://election.dos.state.fl.us/elections/resultsarchive/...

Maintained By: Healthy Communities Institute

Time Series Data





Red > 26.1
Green <= 22.4
In-between = Yellow
Unit: minutes
View the Legend

Mean Travel Time to Work

Value:	23.6 minutes
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Transportation / Commute To Work

What is this Indicator?
This indicator shows the average daily travel time to work in minutes for workers 16 years of age and older.

Why this is important: Lengthy commutes cut into workers' free time and can contribute to health problems such as headaches, anxiety, and increased blood pressure. Longer commutes require workers to consume more fuel which is both expensive for workers and damaging to the environment.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

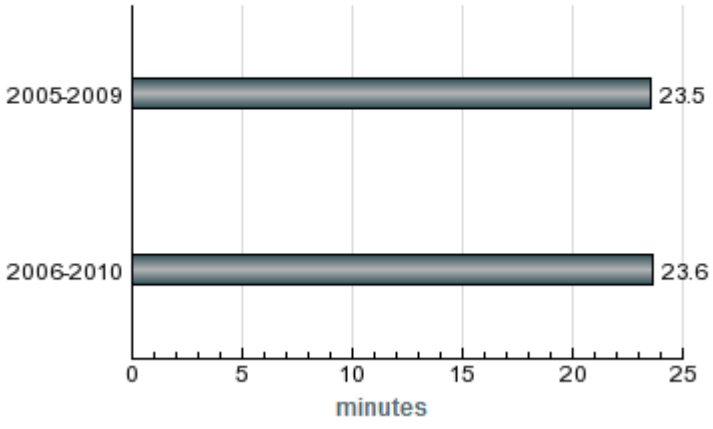
Source: American Community Survey

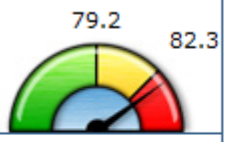
URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

Time Series Data





Red > 82.3
Green <= 79.2
In-between = Yellow
Unit: percent
View the Legend

Workers who Drive Alone to Work

Value:	82.7 percent
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Transportation / Commute To Work Transportation / Personal Vehicle Travel

What is this Indicator?
This indicator shows the percentage of workers 16 years of age and older who get to work by driving alone in a car, truck, or van.

Why this is important: Driving alone to work consumes more fuel and resources than other modes of transportation, such as carpooling, public transportation, biking and walking. Driving alone also increases traffic congestion, especially in areas of greater population density.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

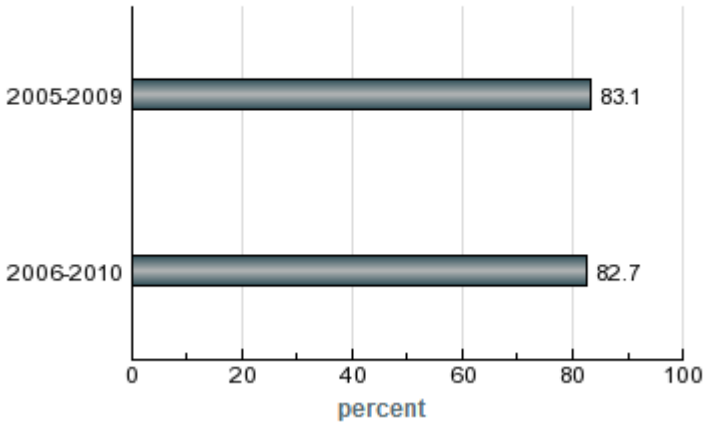
Source: American Community Survey

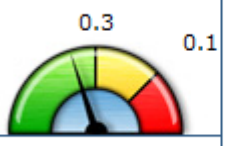
URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

Maintained By: Healthy Communities Institute

Time Series Data

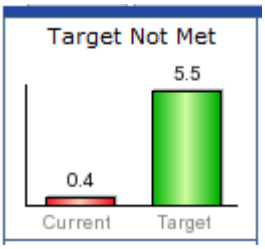




Red < 0.1
Green >= 0.3
In-between = Yellow
Unit: percent
View the Legend

Workers Commuting by Public Transportation

Value:	0.4 percent
Measurement Period:	2006-2010
Location:	County : Brevard [View All Location Types]
Comparison:	U.S. Counties
Categories:	Transportation / Public Transportation Transportation / Commute To Work Transportation



What is this Indicator?
This indicator shows the percentage of workers aged 16 years and over who commute to work by public transportation.

Why this is important: Public transportation offers mobility to U.S. residents, particularly people without cars. Transit can help bridge the spatial divide between people and jobs, services, and training opportunities. Public transportation is also beneficial because it reduces fuel consumption, minimizes air pollution, and relieves traffic congestion.

The Healthy People 2020 national health target is to increase the proportion of workers who take public transportation to work to 5.5%.

Technical Note: The distribution is based on data from 3,143 U.S. counties and county equivalents.

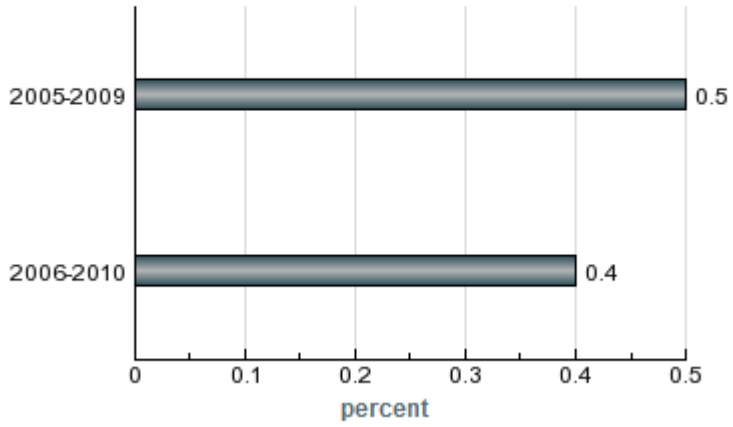
Source: American Community Survey

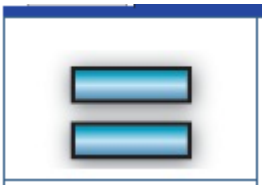
URL of Source: http://www.census.gov/acs/www/

URL of Data: http://factfinder2.census.gov/

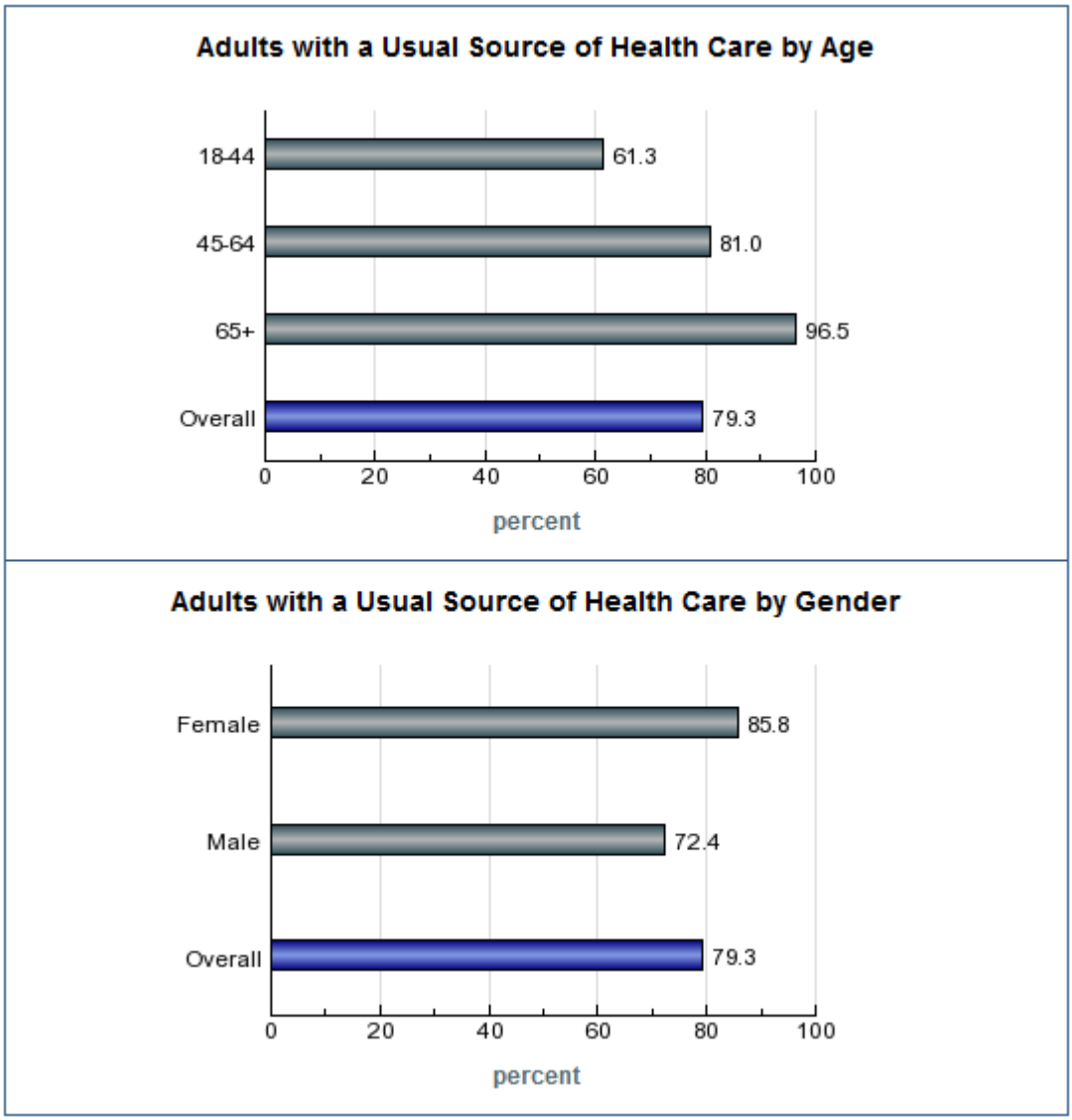
Maintained By: Healthy Communities Institute

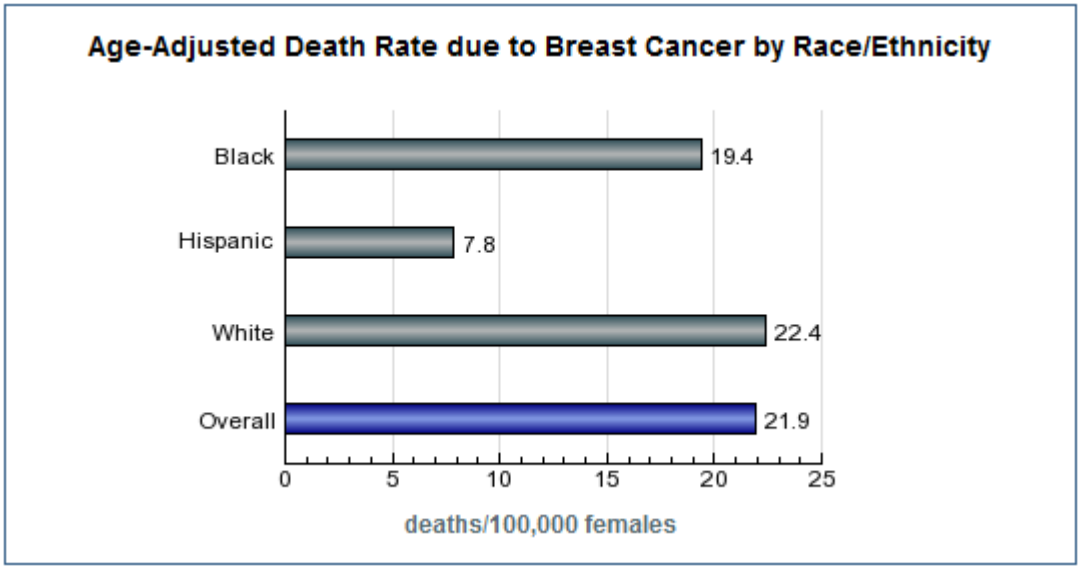
Time Series Data

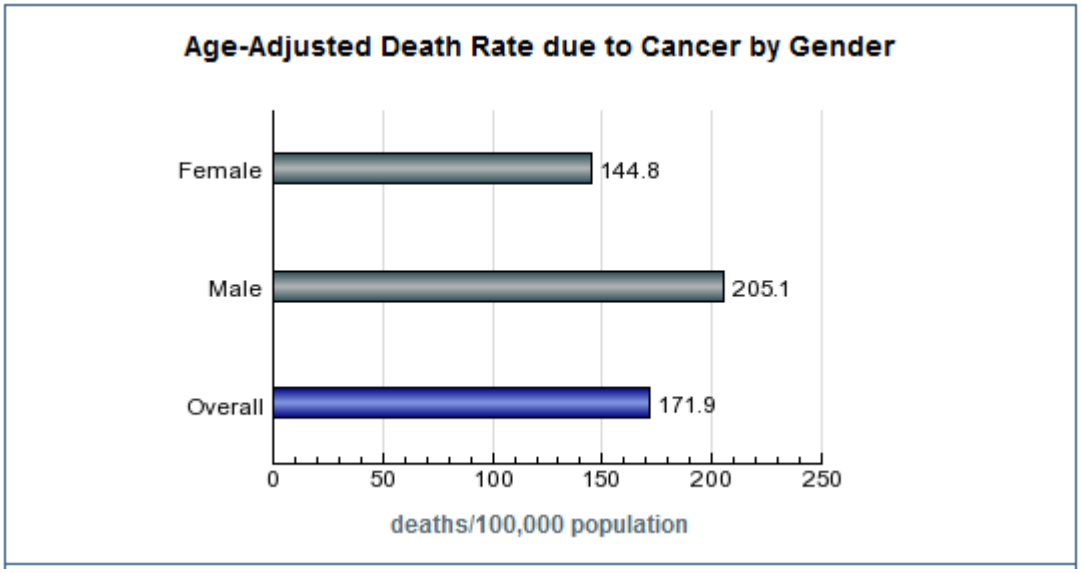


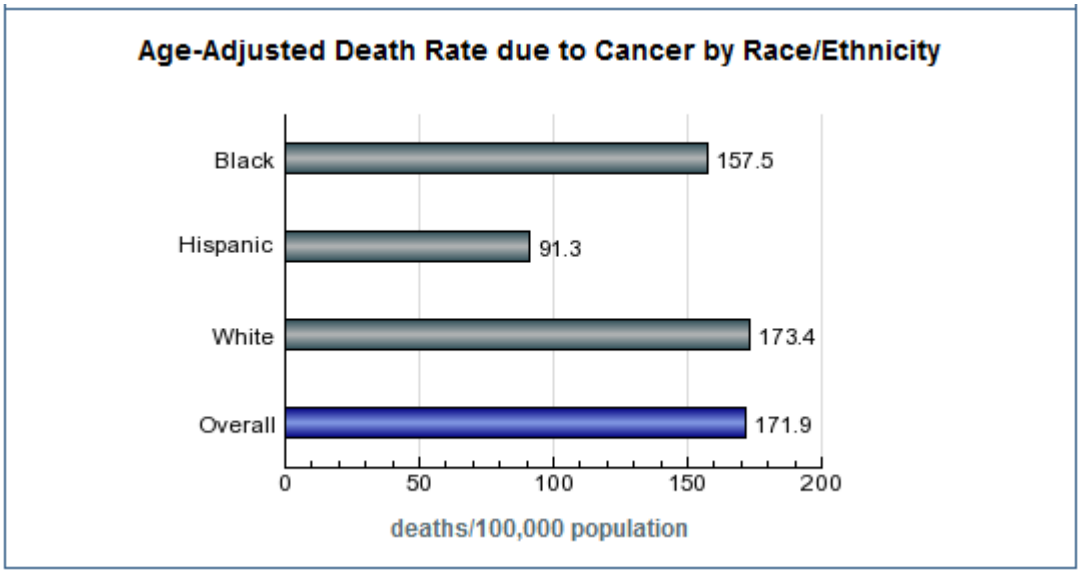


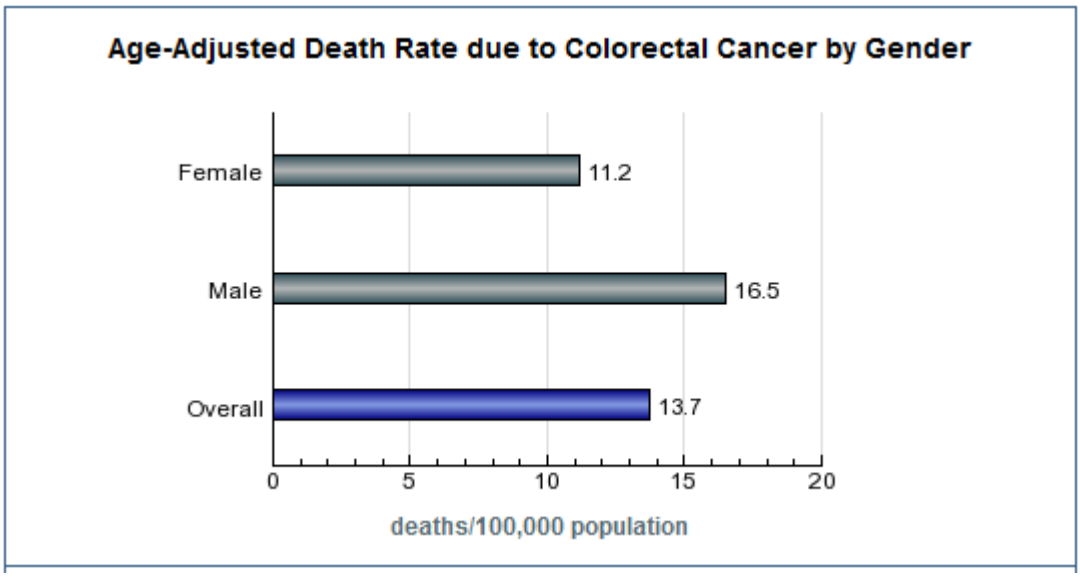
Disparity Indicators

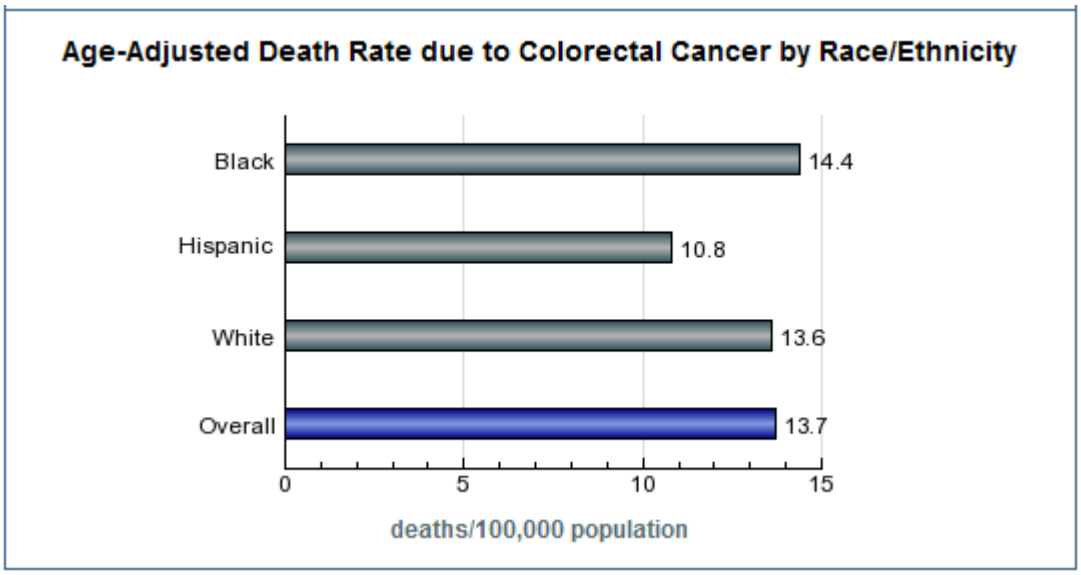

Adults with a Usual Source of Health Care by Age
18-44
61.3
45-64
81.0
65+
96.5
Overall
79.3
0
20
40
60
80
100
percent
Adults with a Usual Source of Health Care by Gender
Female
85.8
Male
72.4
Overall
79.3
0
20
40
60
80
100
percent

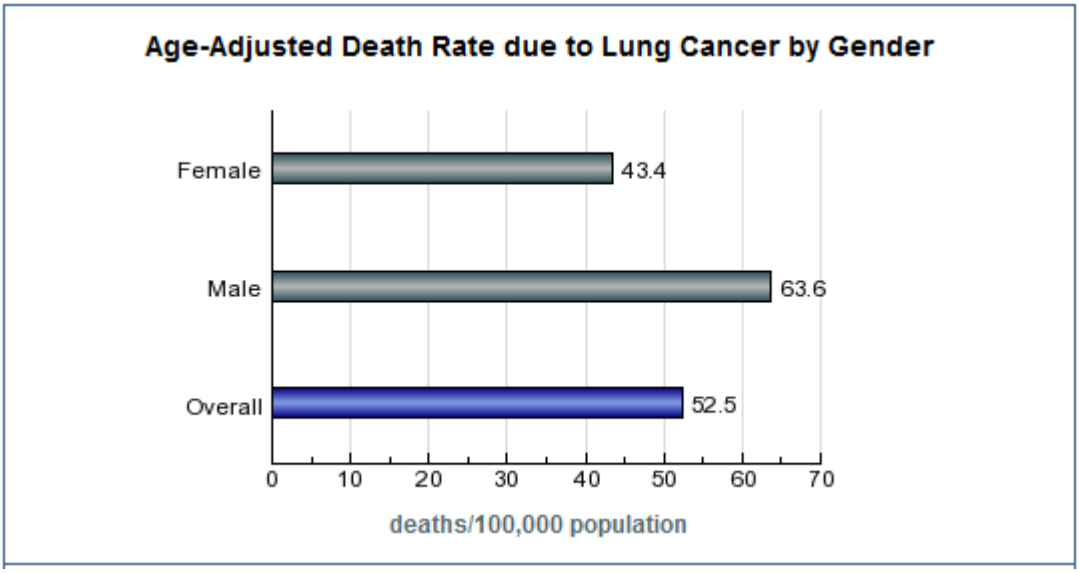

Age-Adjusted Death Rate due to Breast Cancer by Race/Ethnicity
Black
19.4
Hispanic
7.8
White
22.4
Overall
21.9
0
5
10
15
20
25
deaths/100,000 females

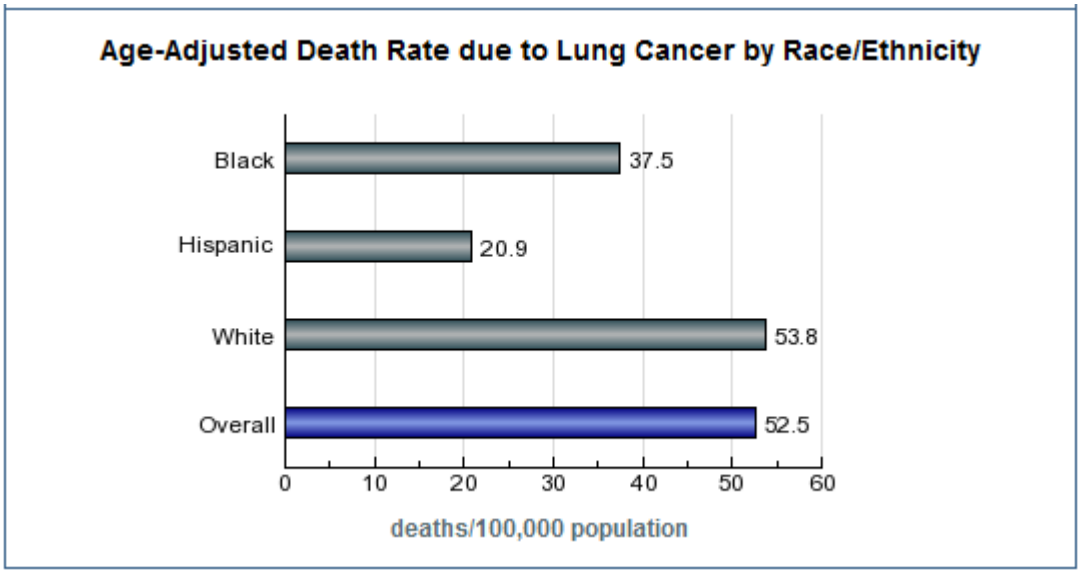

Age-Adjusted Death Rate due to Cancer by Gender
Female
144.8
Male
205.1
Overall
171.9
0
50
100
150
200
250
deaths/100,000 population


Age-Adjusted Death Rate due to Cancer by Race/Ethnicity
Black
157.5
Hispanic
91.3
White
173.4
Overall
171.9
0
50
100
150
200
deaths/100,000 population

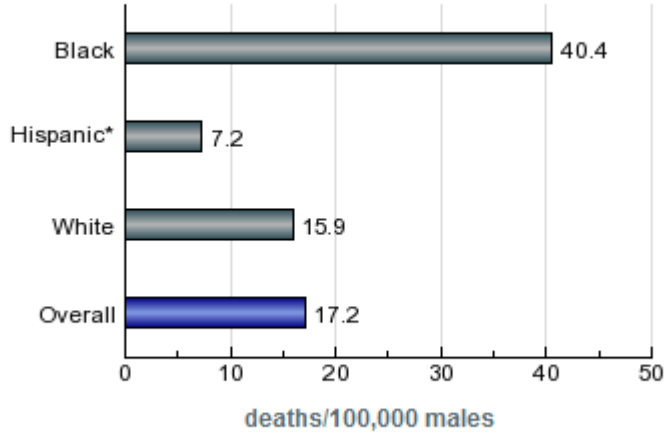

Age-Adjusted Death Rate due to Colorectal Cancer by Gender
Female
11.2
Male
16.5
Overall
13.7
0
5
10
15
20
deaths/100,000 population


Age-Adjusted Death Rate due to Colorectal Cancer by Race/Ethnicity
Black
14.4
Hispanic
10.8
White
13.6
Overall
13.7
0
5
10
15
deaths/100,000 population

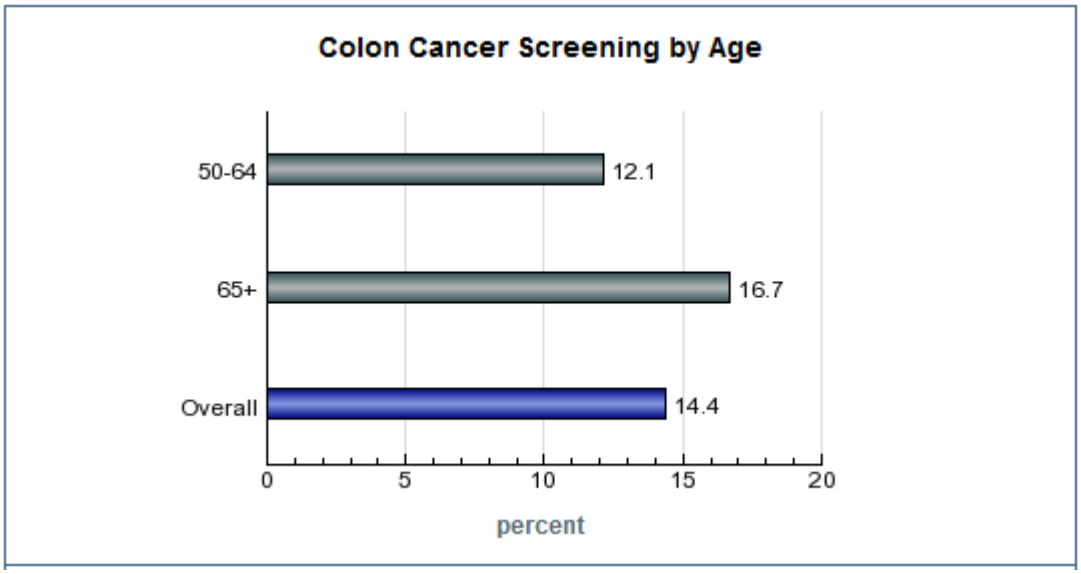

Age-Adjusted Death Rate due to Lung Cancer by Gender
Female
43.4
Male
63.6
Overall
52.5
0
10
20
30
40
50
60
70
deaths/100,000 population

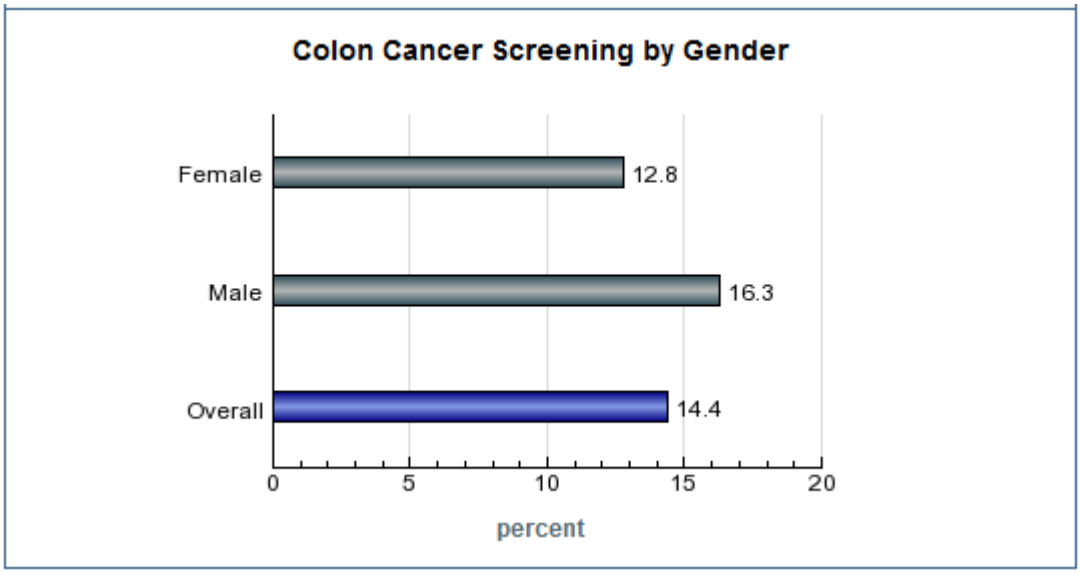

Age-Adjusted Death Rate due to Lung Cancer by Race/Ethnicity
Black
37.5
Hispanic
20.9
White
53.8
Overall
52.5
0
10
20
30
40
50
60
deaths/100,000 population

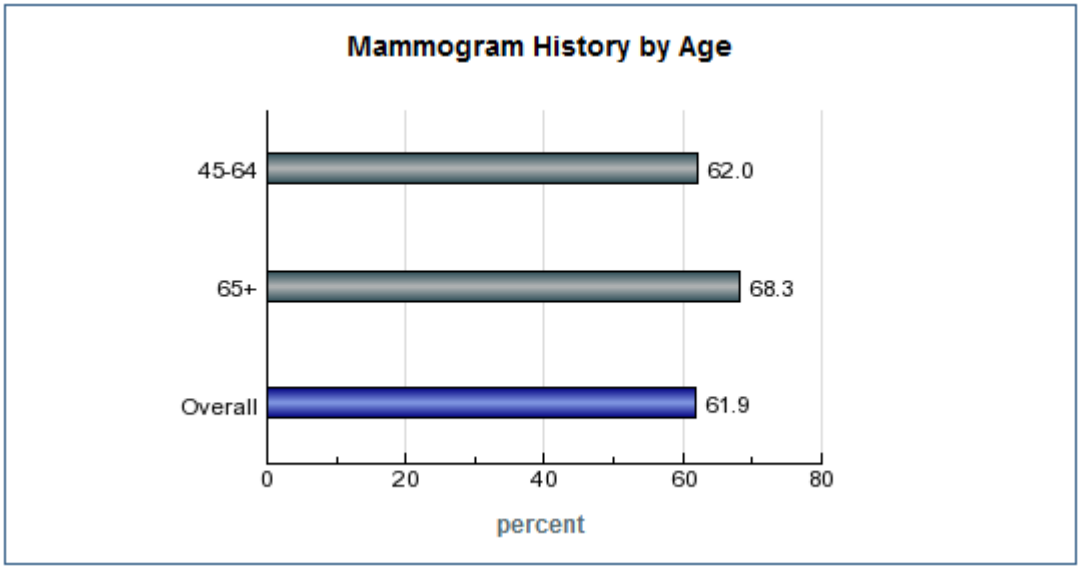
Age-Adjusted Death Rate due to Prostate Cancer by Race/Ethnicity

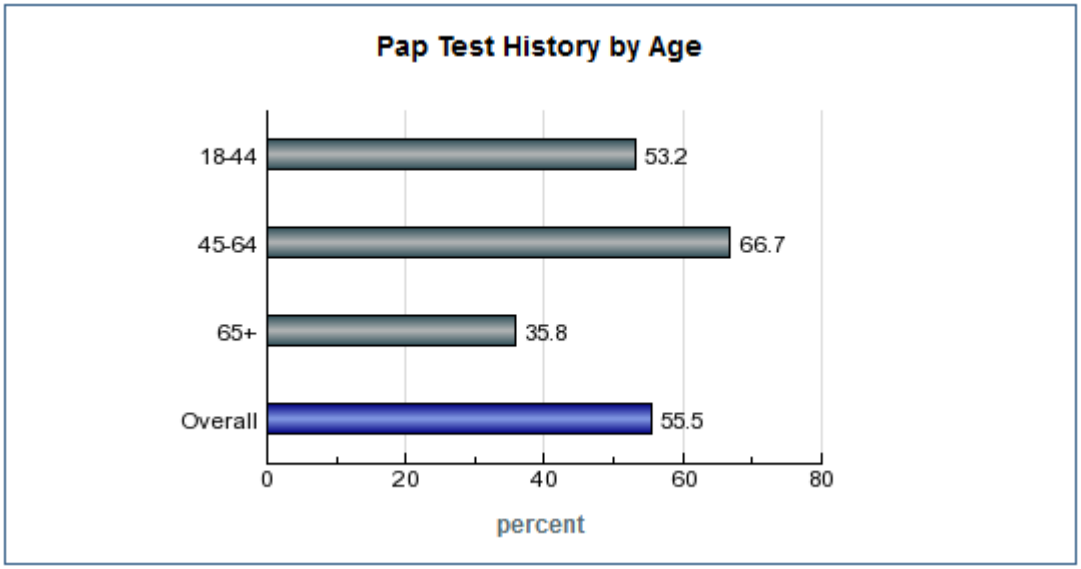


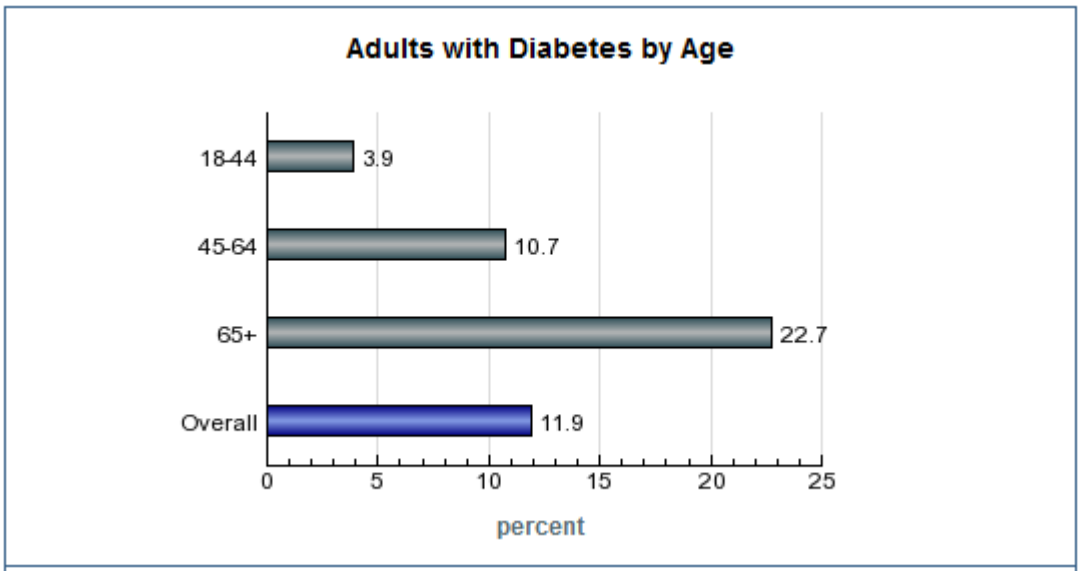
*Value may be statistically unstable and should be interpreted with caution.

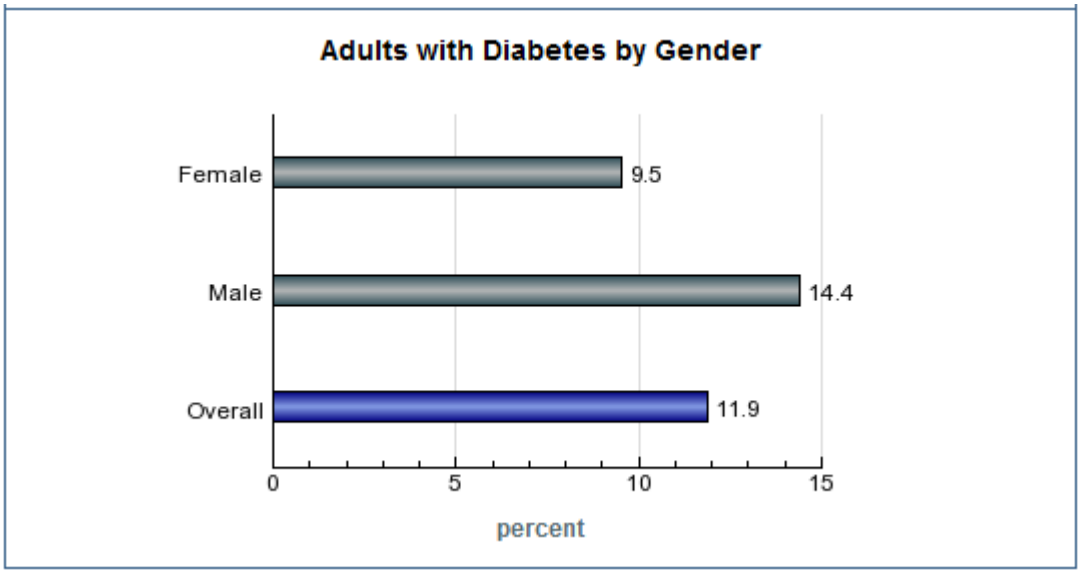

Colon Cancer Screening by Age
50-64
12.1
65+
16.7
Overall
14.4
0
5
10
15
20
percent

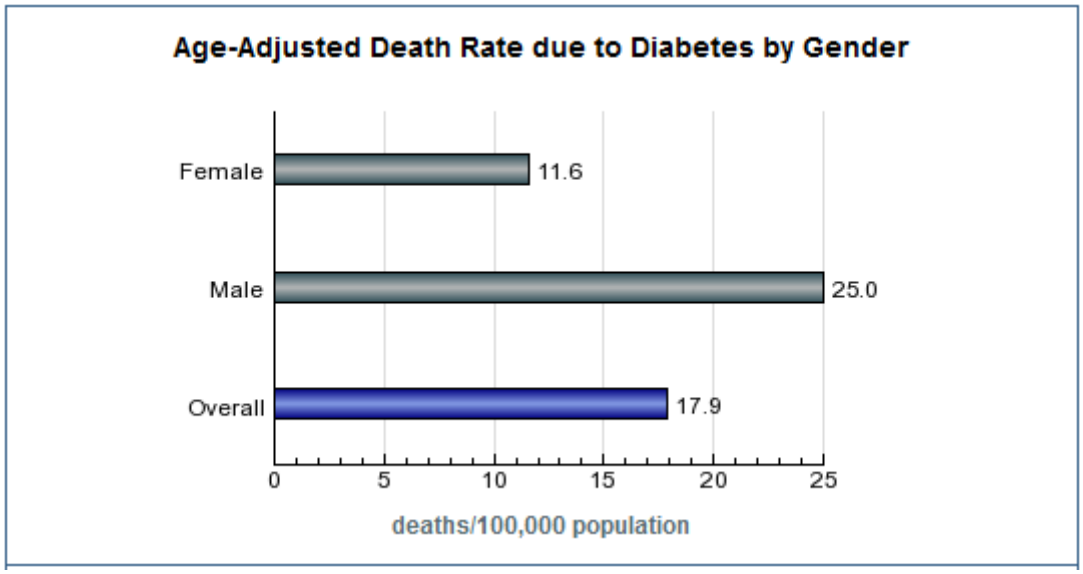

Colon Cancer Screening by Gender
Female
12.8
Male
16.3
Overall
14.4
0
5
10
15
20
percent

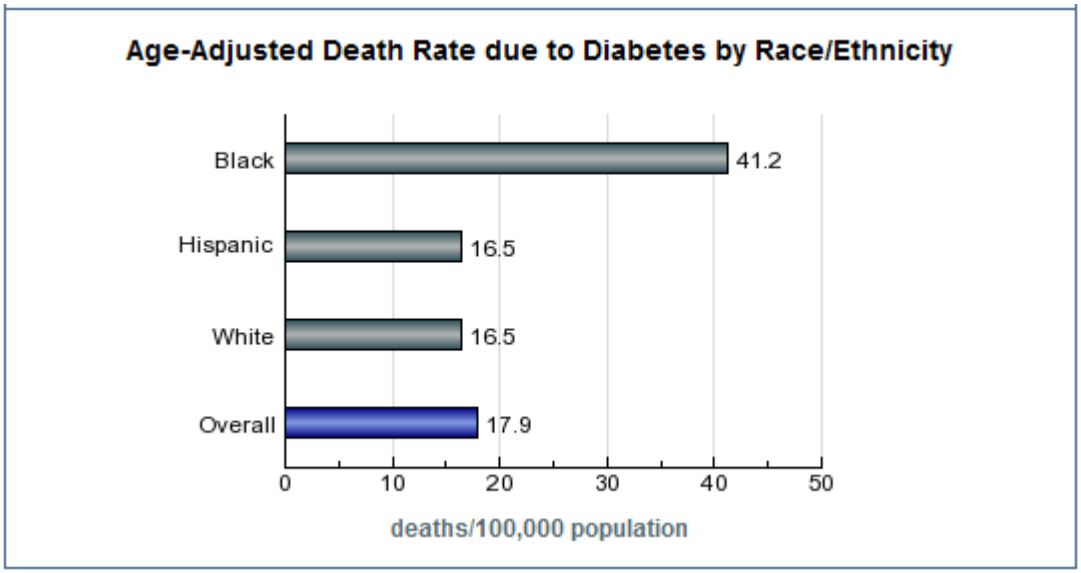

Mammogram History by Age
45-64
62.0
65+
68.3
Overall
61.9
0
20
40
60
80
percent

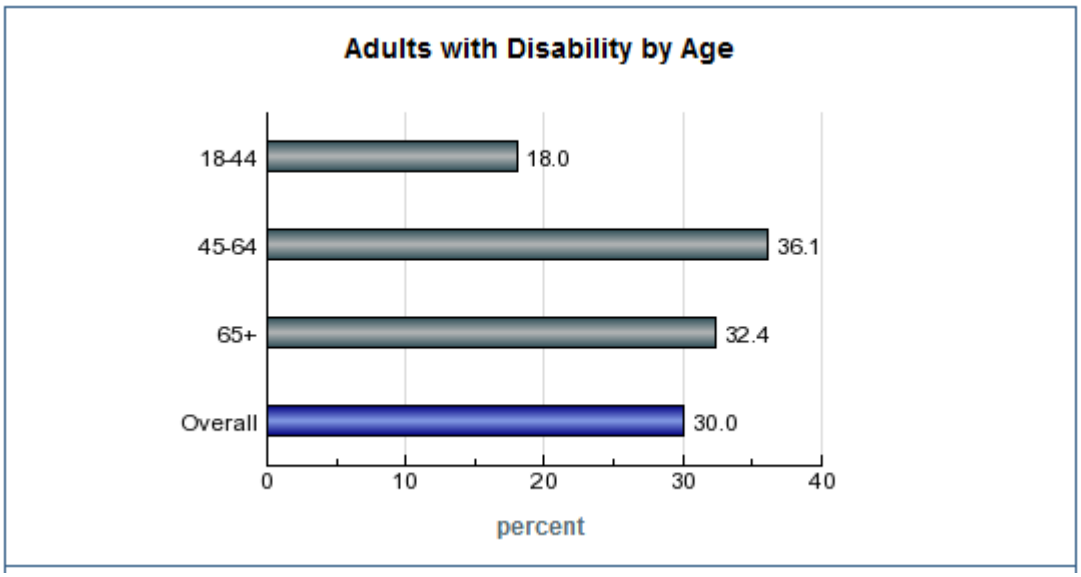

Pap Test History by Age
18-44
53.2
45-64
66.7
65+
35.8
Overall
55.5
0
20
40
60
80
percent

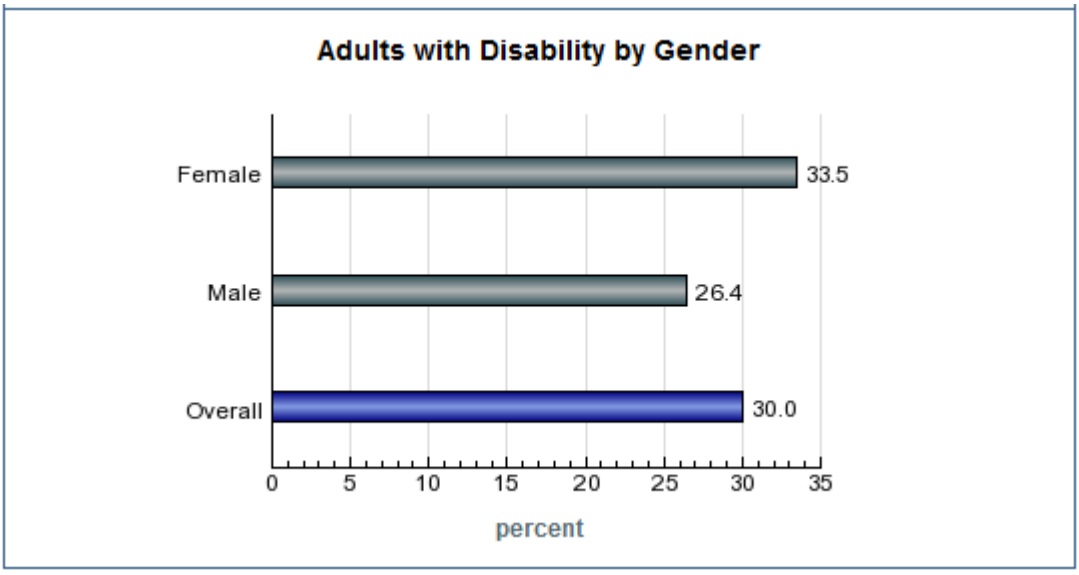

Adults with Diabetes by Age
18-44
3.9
45-64
10.7
65+
22.7
Overall
11.9
0
5
10
15
20
25
percent

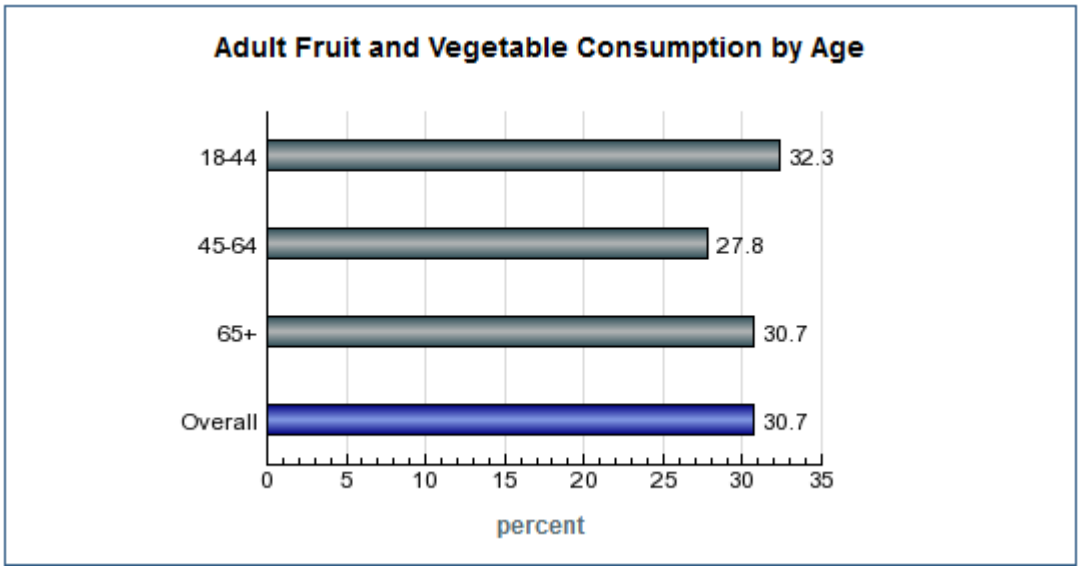

Adults with Diabetes by Gender
Female
9.5
Male
14.4
Overall
11.9
0
5
10
15
percent

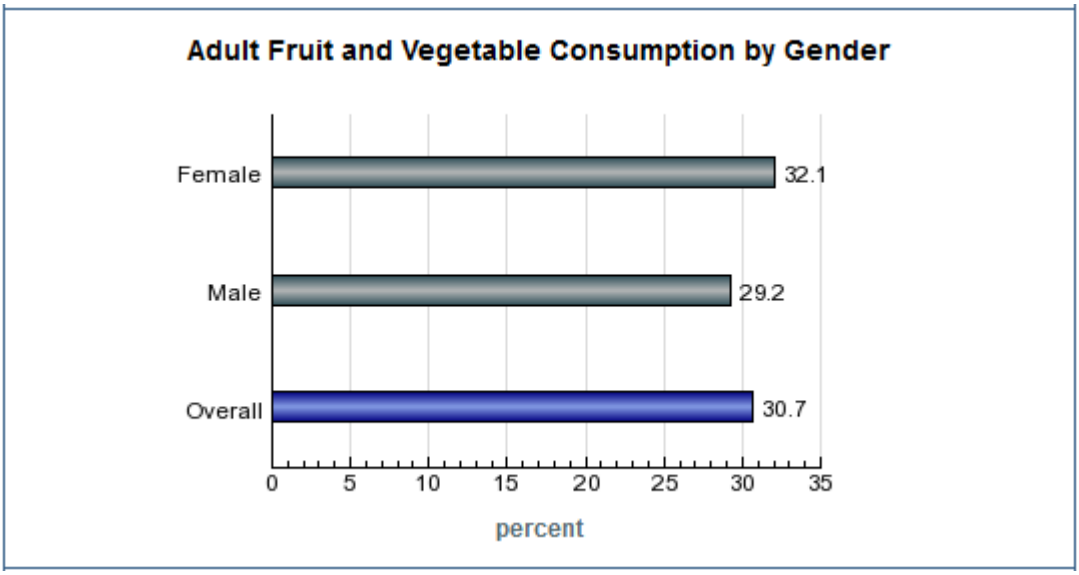

Age-Adjusted Death Rate due to Diabetes by Gender
Female
11.6
Male
25.0
Overall
17.9
0
5
10
15
20
25
deaths/100,000 population

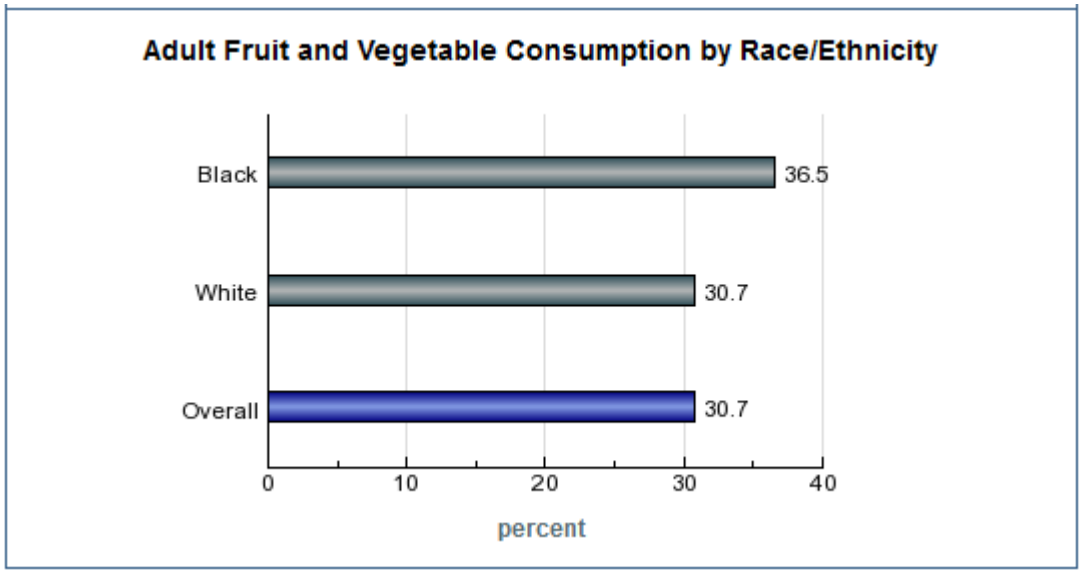

Age-Adjusted Death Rate due to Diabetes by Race/Ethnicity
Black
41.2
Hispanic
16.5
White
16.5
Overall
17.9
0
10
20
30
40
50
deaths/100,000 population

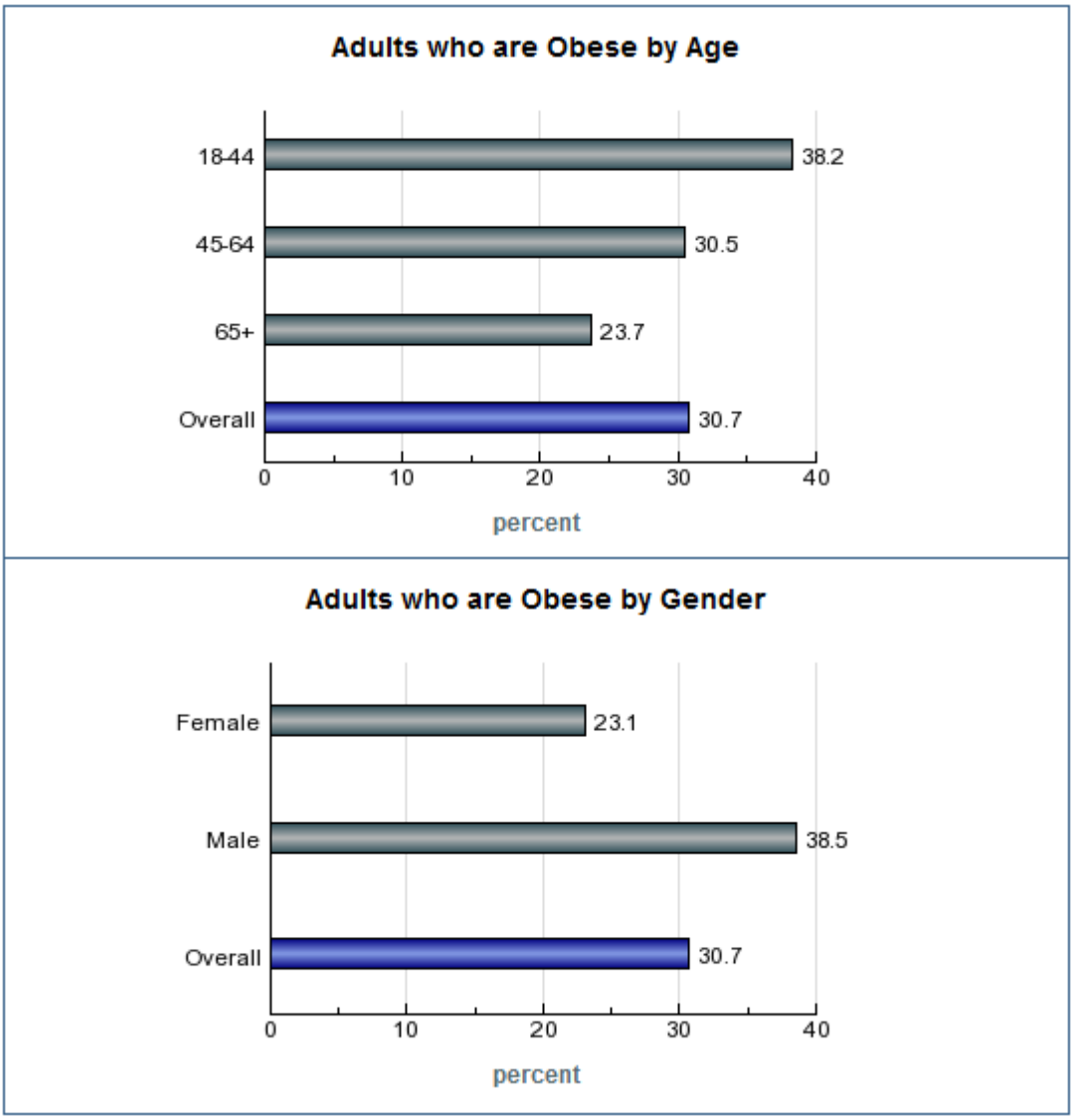

Adults with Disability by Age
18-44
18.0
45-64
36.1
65+
32.4
Overall
30.0
0
10
20
30
40
percent

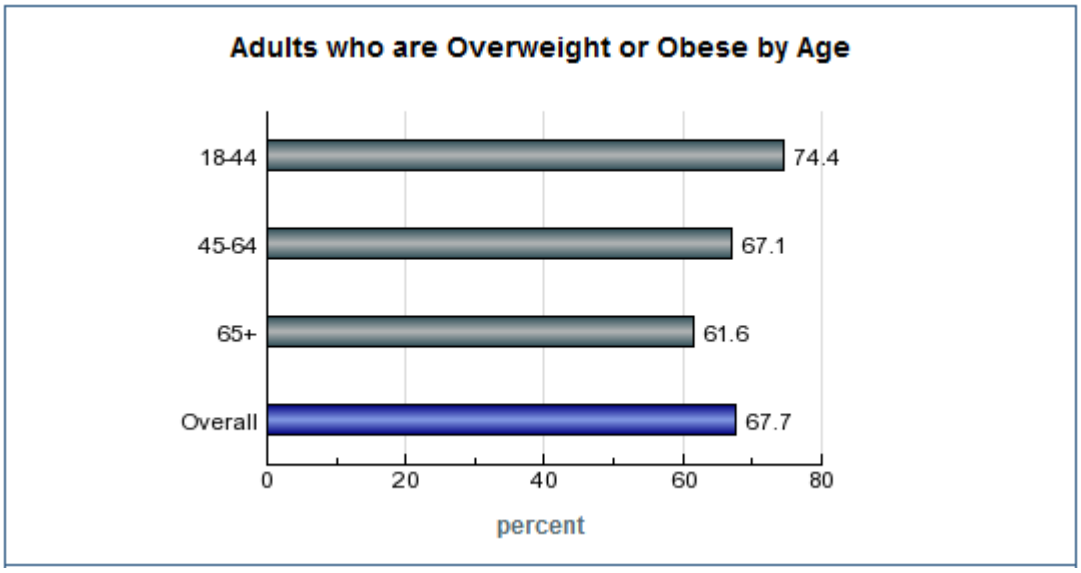

Adults with Disability by Gender
Female
33.5
Male
26.4
Overall
30.0
0
5
10
15
20
25
30
35
percent

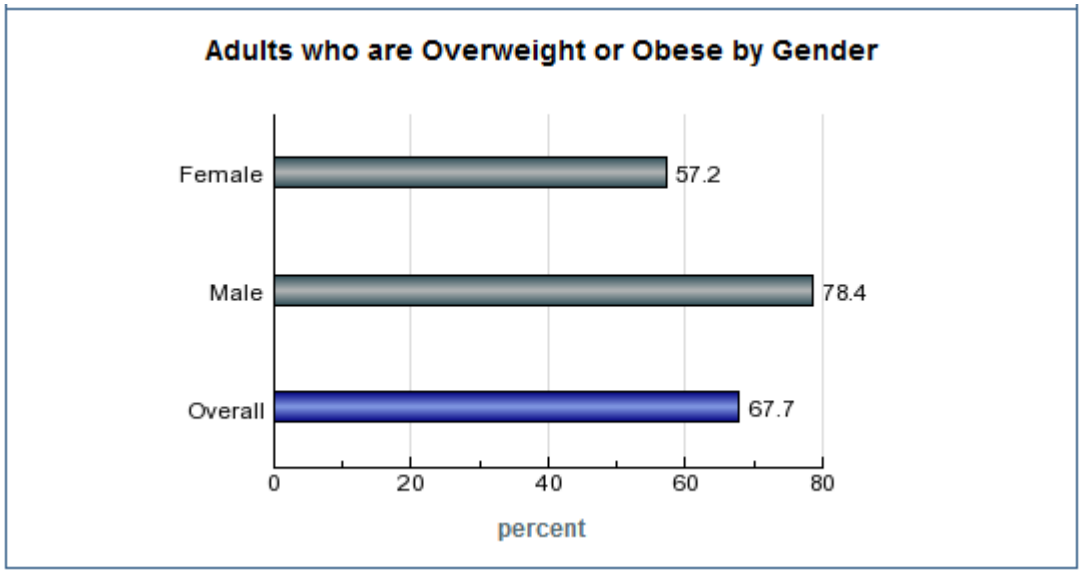

Adult Fruit and Vegetable Consumption by Age
18-44
32.3
45-64
27.8
65+
30.7
Overall
30.7
0
5
10
15
20
25
30
35
percent

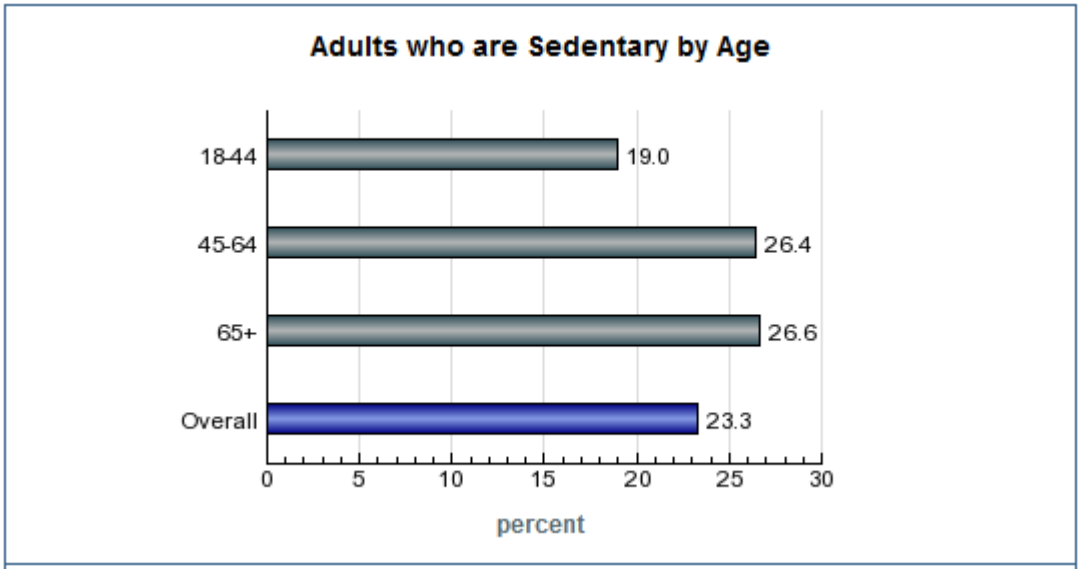

Adult Fruit and Vegetable Consumption by Gender
Female
32.1
Male
29.2
Overall
30.7
0
5
10
15
20
25
30
35
percent

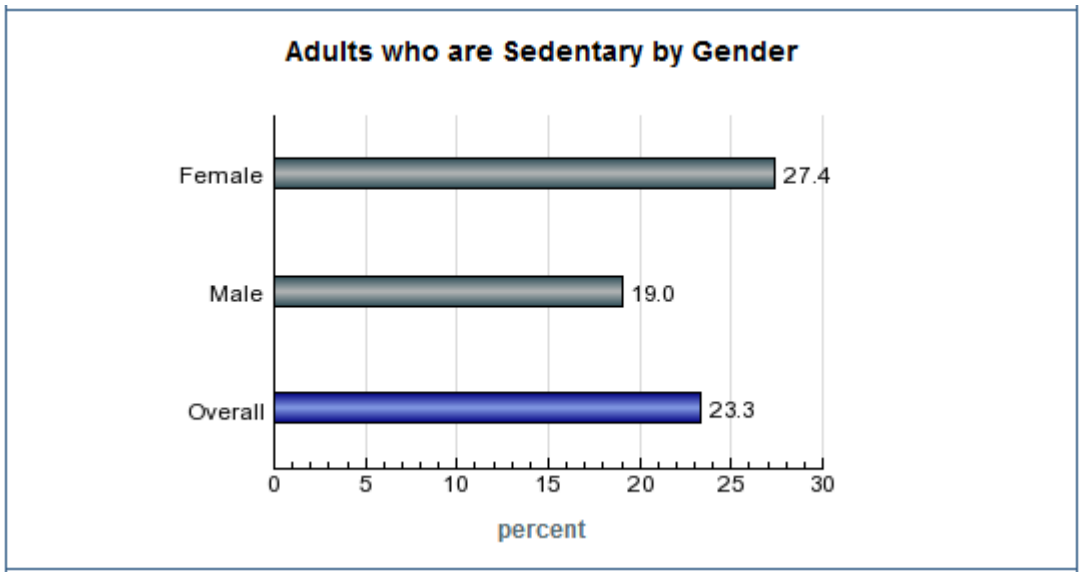

Adult Fruit and Vegetable Consumption by Race/Ethnicity
Black
36.5
White
30.7
Overall
30.7
0
10
20
30
40
percent

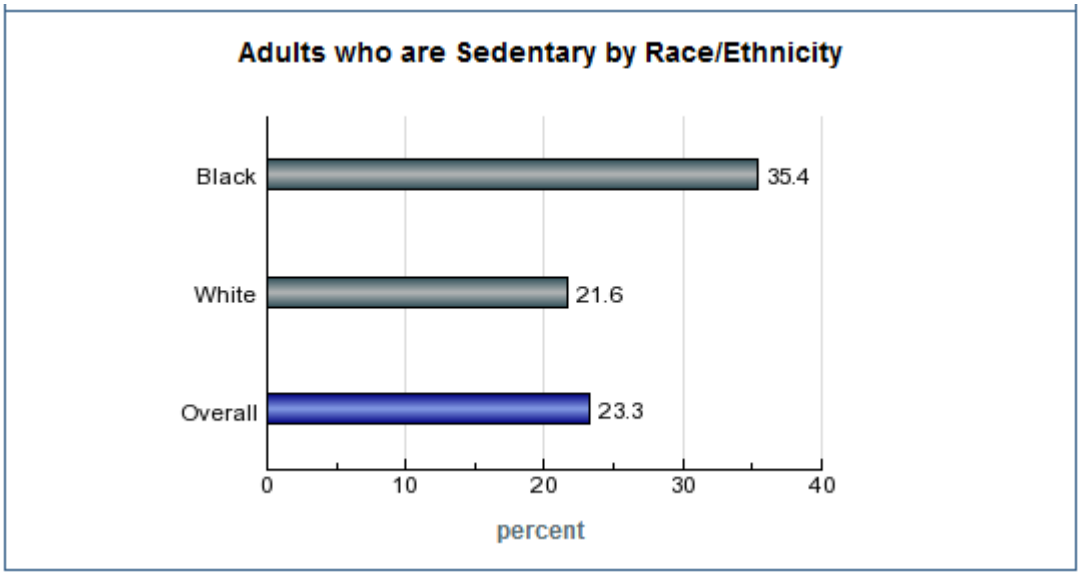

Adults who are Obese by Age
18-44
45-64
65+
Overall
38.2
30.5
23.7
30.7
0
10
20
30
40
percent
Adults who are Obese by Gender
Female
Male
Overall
23.1
38.5
30.7
0
10
20
30
40
percent

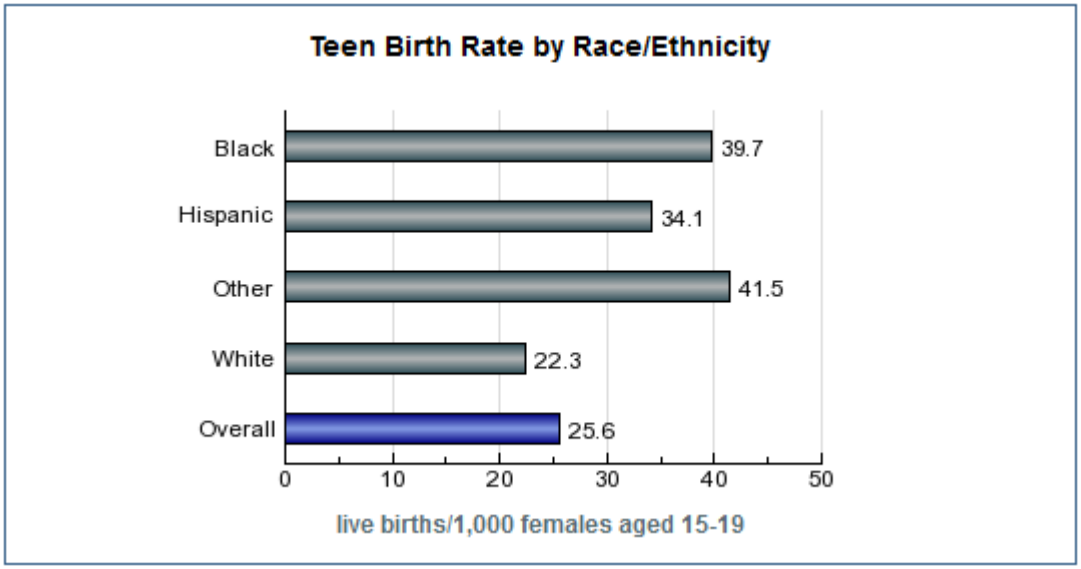

Adults who are Overweight or Obese by Age
18-44
74.4
45-64
67.1
65+
61.6
Overall
67.7
0
20
40
60
80
percent

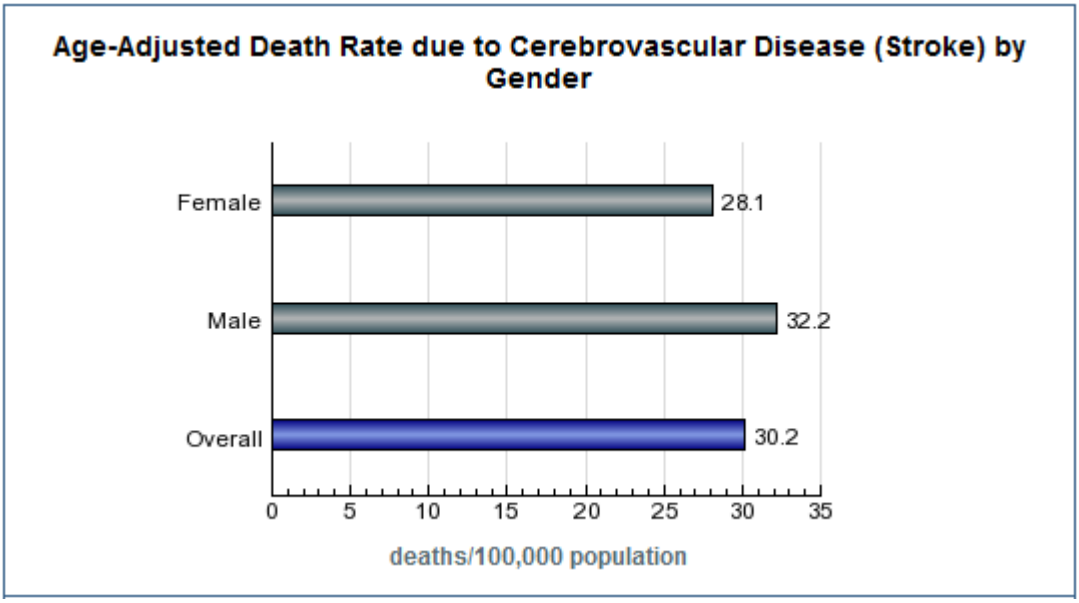

Adults who are Overweight or Obese by Gender
Female
57.2
Male
78.4
Overall
67.7
0
20
40
60
80
percent

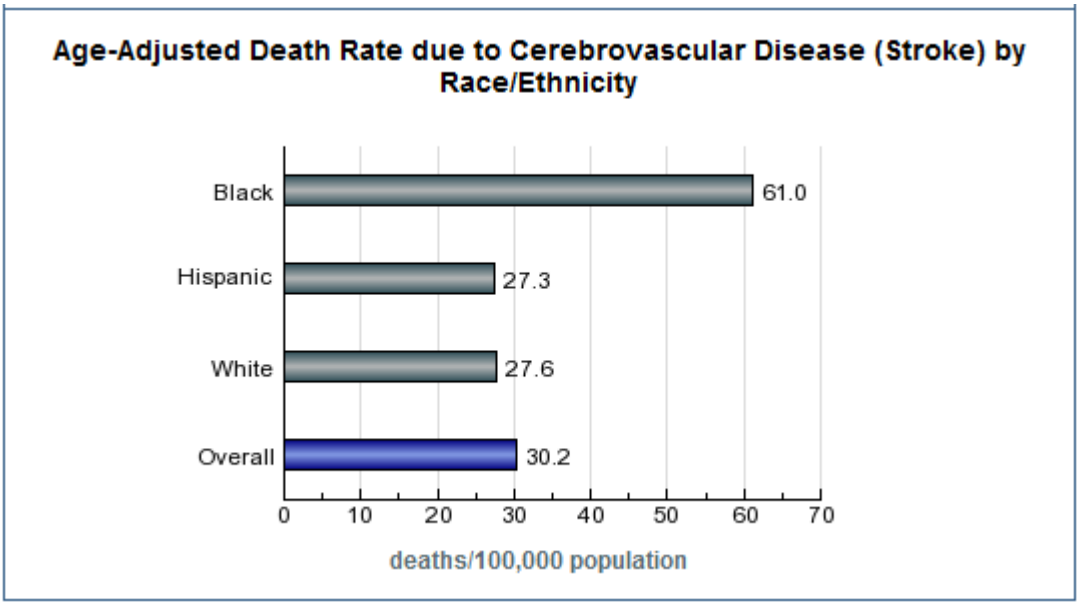

Adults who are Sedentary by Age
18-44
19.0
45-64
26.4
65+
26.6
Overall
23.3
0
5
10
15
20
25
30
percent

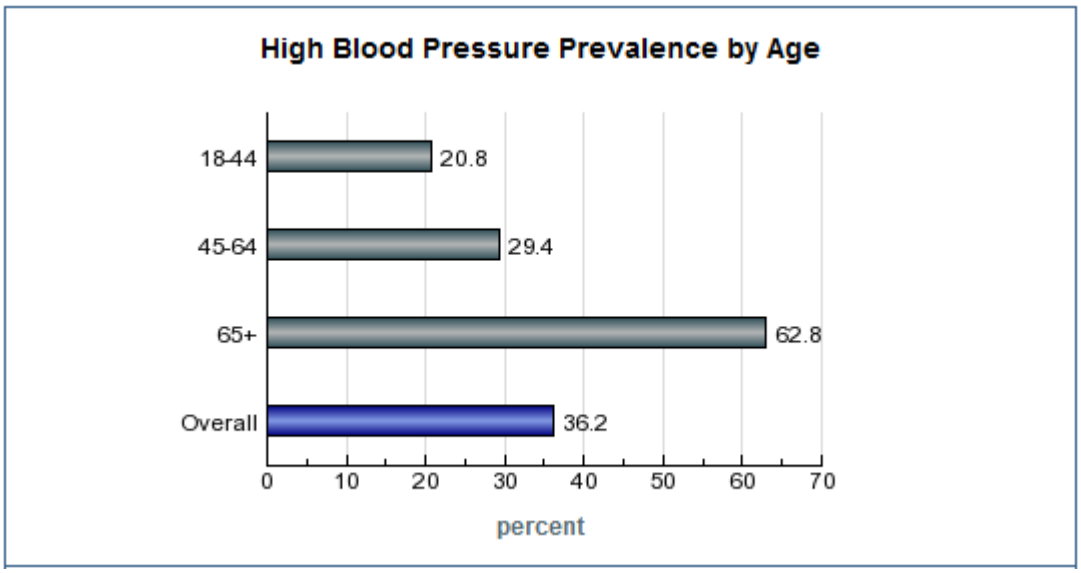

Adults who are Sedentary by Gender
Female
27.4
Male
19.0
Overall
23.3
0
5
10
15
20
25
30
percent

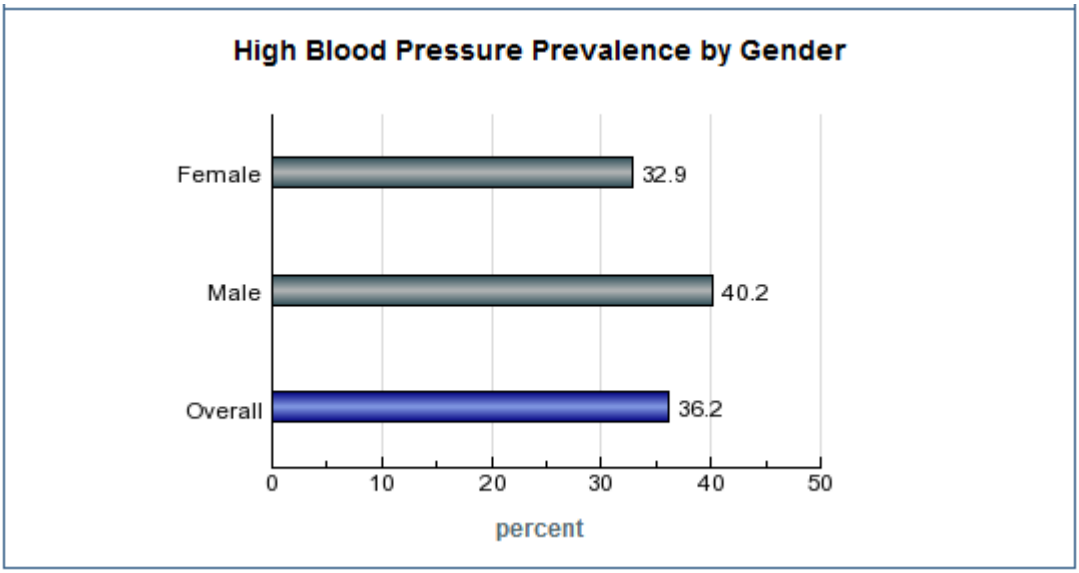

Adults who are Sedentary by Race/Ethnicity
Black
35.4
White
21.6
Overall
23.3
0
10
20
30
40
percent

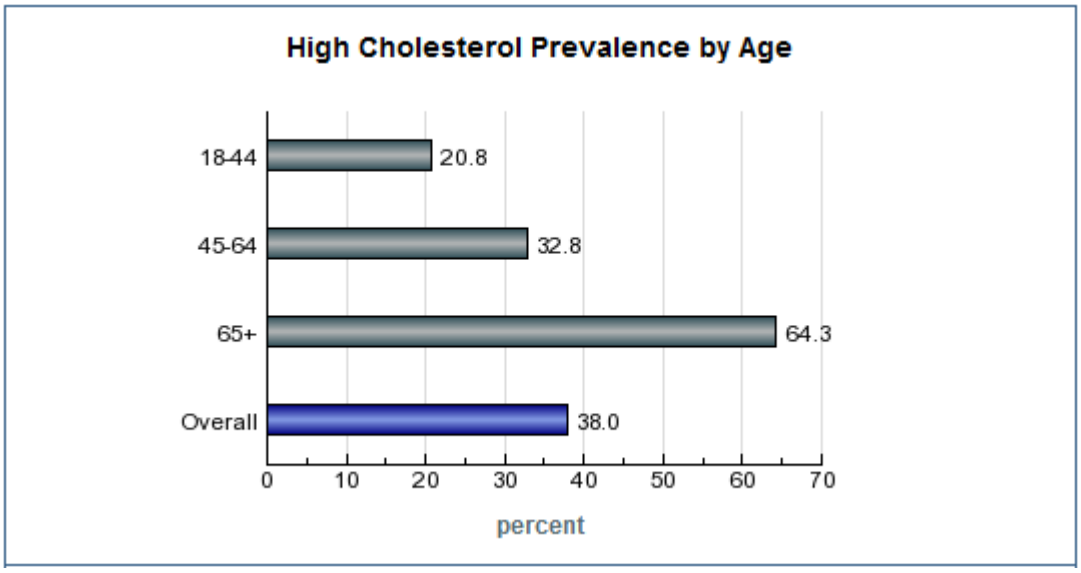

Teen Birth Rate by Race/Ethnicity
Black
39.7
Hispanic
34.1
Other
41.5
White
22.3
Overall
25.6
0
10
20
30
40
50
live births/1,000 females aged 15-19

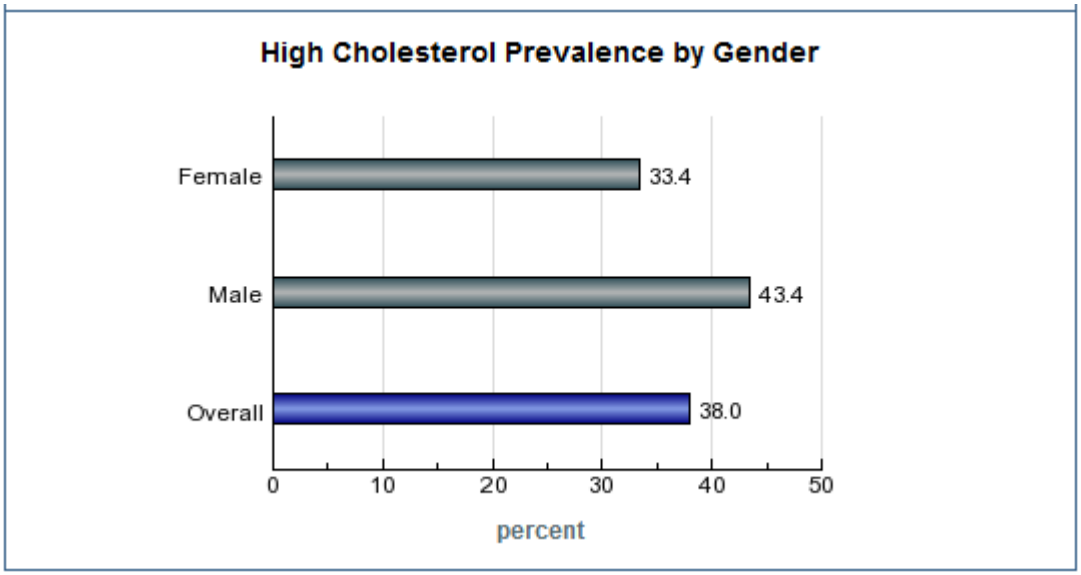

Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke) by Gender
Female
28.1
Male
32.2
Overall
30.2
0
5
10
15
20
25
30
35
deaths/100,000 population

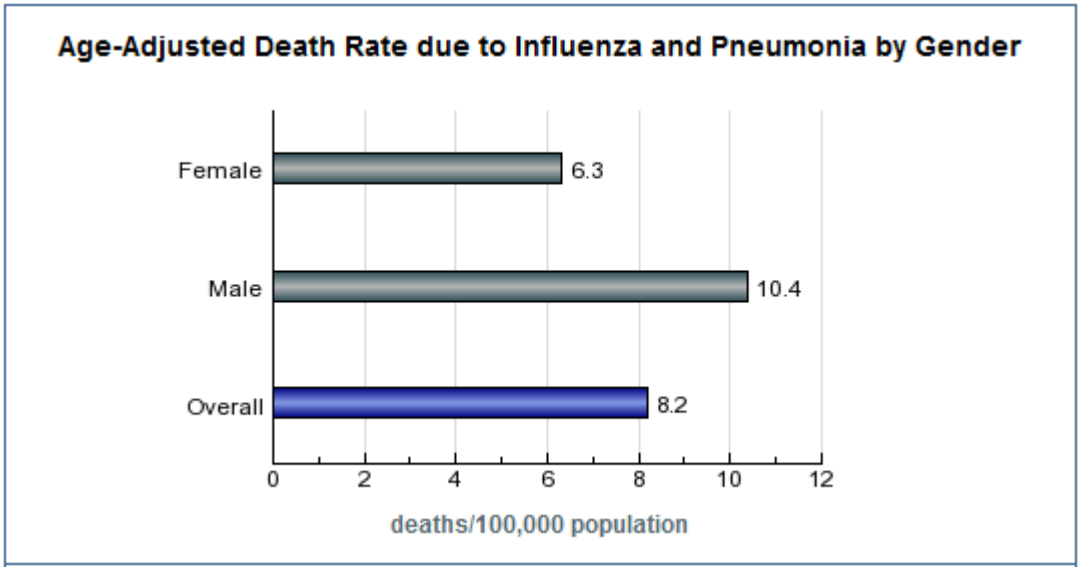

Age-Adjusted Death Rate due to Cerebrovascular Disease (Stroke) by Race/Ethnicity
Black
61.0
Hispanic
27.3
White
27.6
Overall
30.2
0
10
20
30
40
50
60
70
deaths/100,000 population

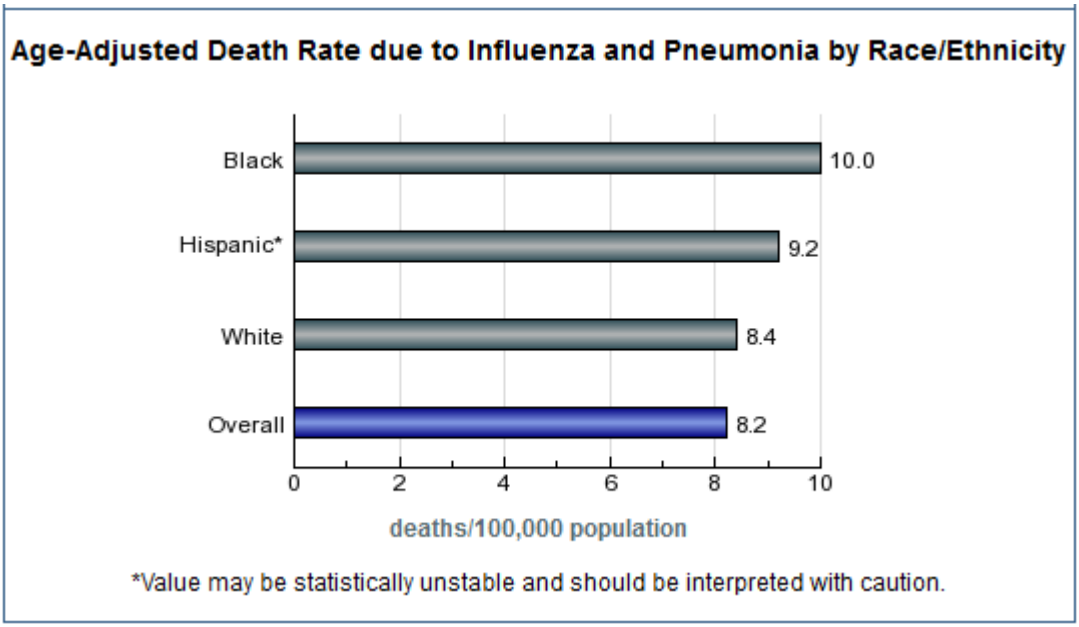

High Blood Pressure Prevalence by Age
18-44
20.8
45-64
29.4
65+
62.8
Overall
36.2
0
10
20
30
40
50
60
70
percent

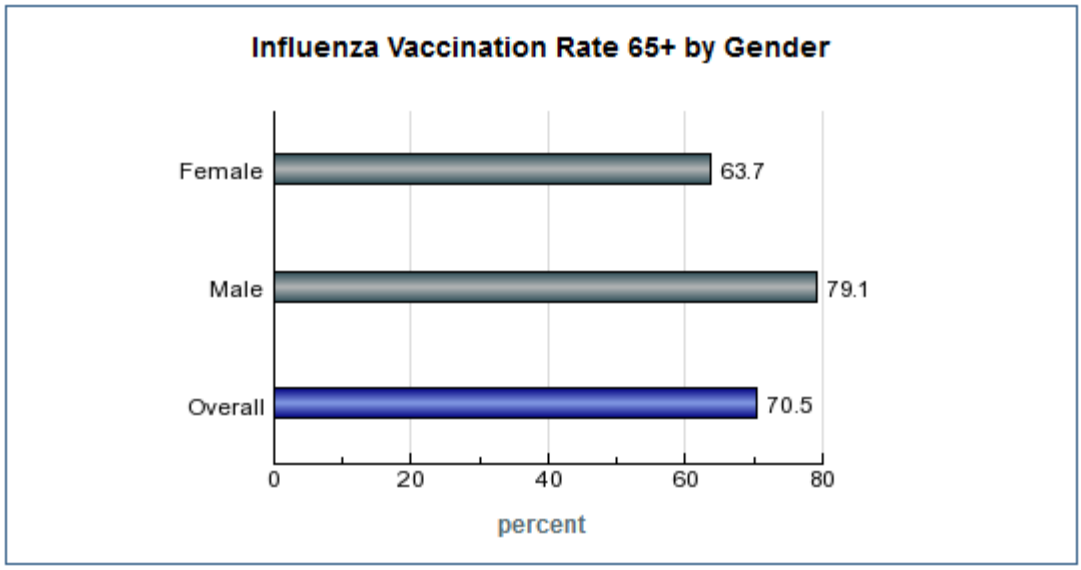

High Blood Pressure Prevalence by Gender
Female
32.9
Male
40.2
Overall
36.2
0
10
20
30
40
50
percent

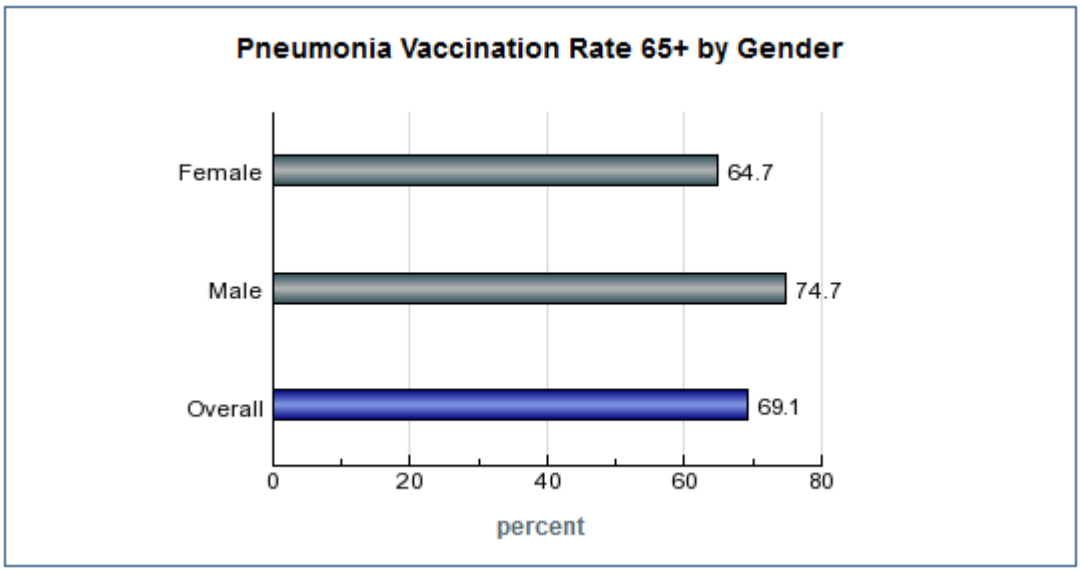

High Cholesterol Prevalence by Age
18-44
20.8
45-64
32.8
65+
64.3
Overall
38.0
0
10
20
30
40
50
60
70
percent

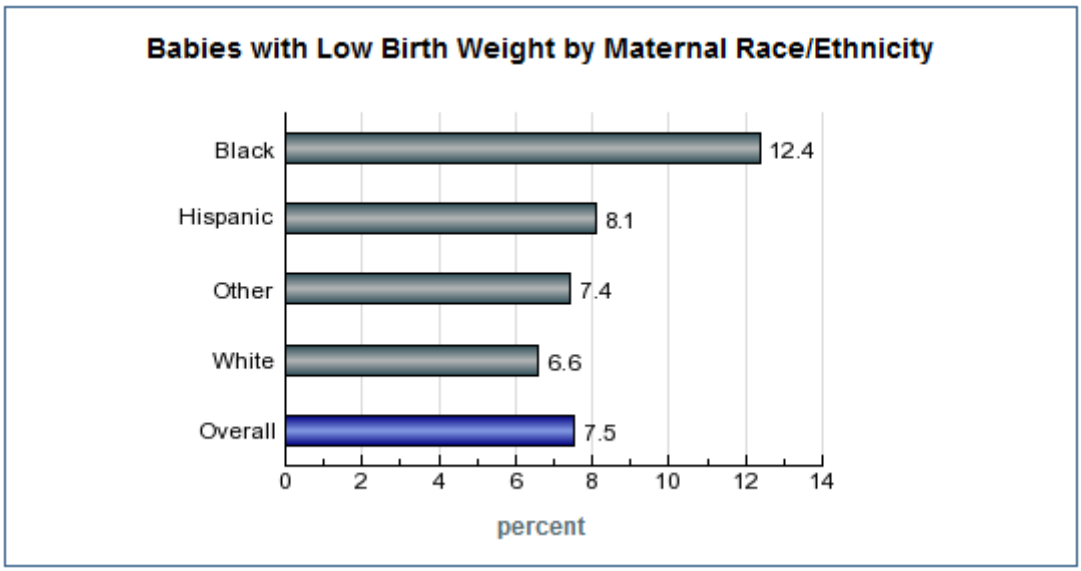

High Cholesterol Prevalence by Gender
Female
33.4
Male
43.4
Overall
38.0
0
10
20
30
40
50
percent

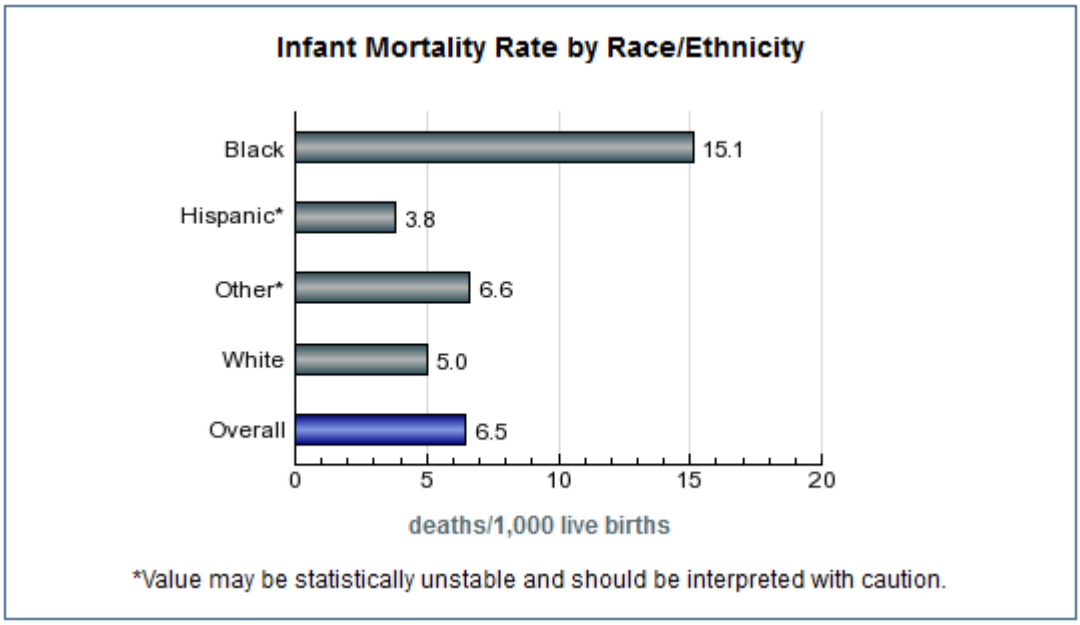

Age-Adjusted Death Rate due to Influenza and Pneumonia by Gender
Female
6.3
Male
10.4
Overall
8.2
0
2
4
6
8
10
12
deaths/100,000 population

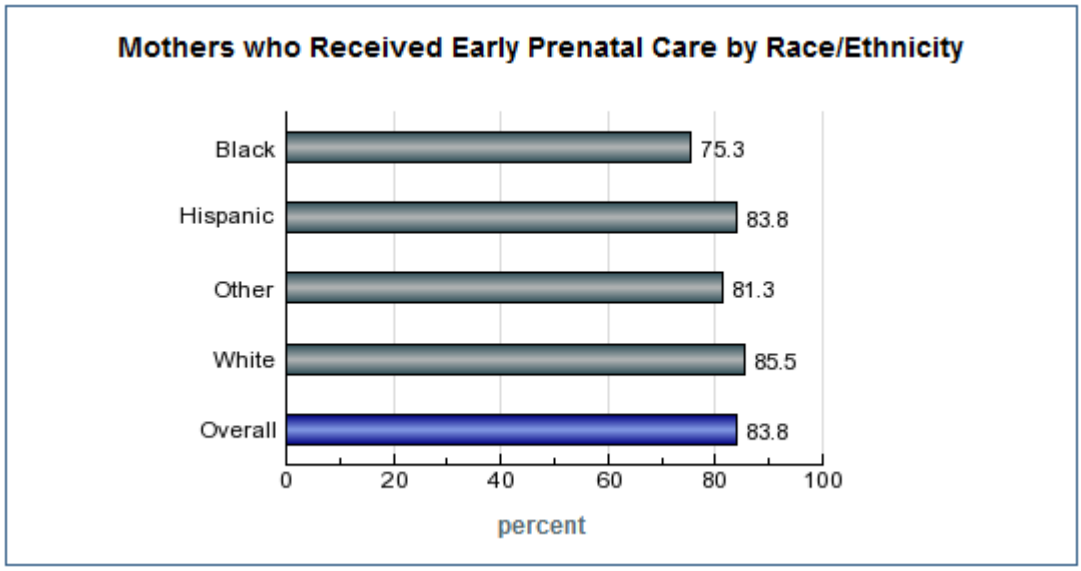

Age-Adjusted Death Rate due to Influenza and Pneumonia by Race/Ethnicity
Black
10.0
Hispanic*
9.2
White
8.4
Overall
8.2
0
2
4
6
8
10
deaths/100,000 population
*Value may be statistically unstable and should be interpreted with caution.

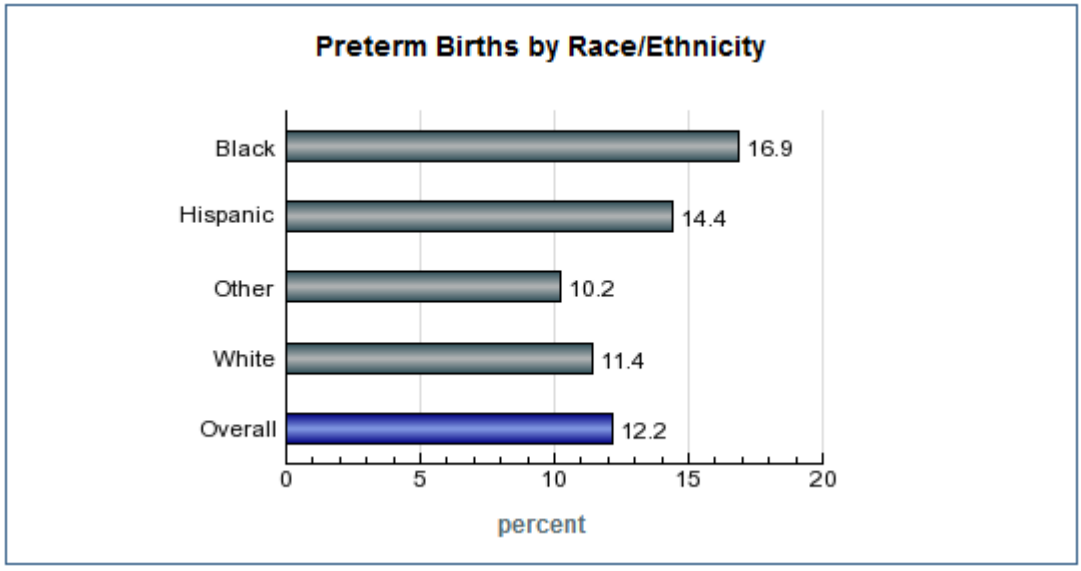

Influenza Vaccination Rate 65+ by Gender
Female
63.7
Male
79.1
Overall
70.5
0
20
40
60
80
percent

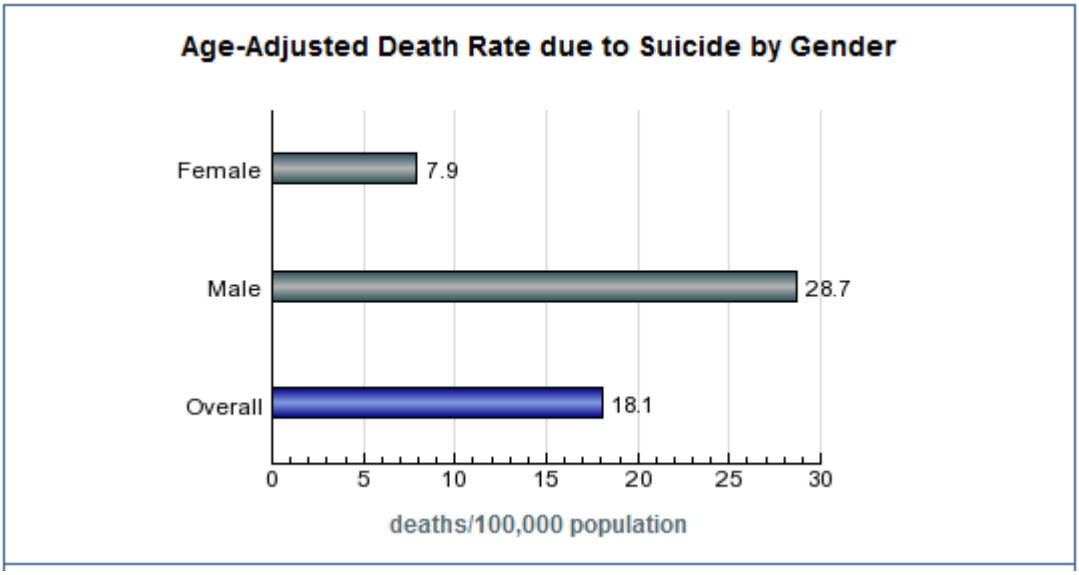

Pneumonia Vaccination Rate 65+ by Gender
Female
64.7
Male
74.7
Overall
69.1
0
20
40
60
80
percent

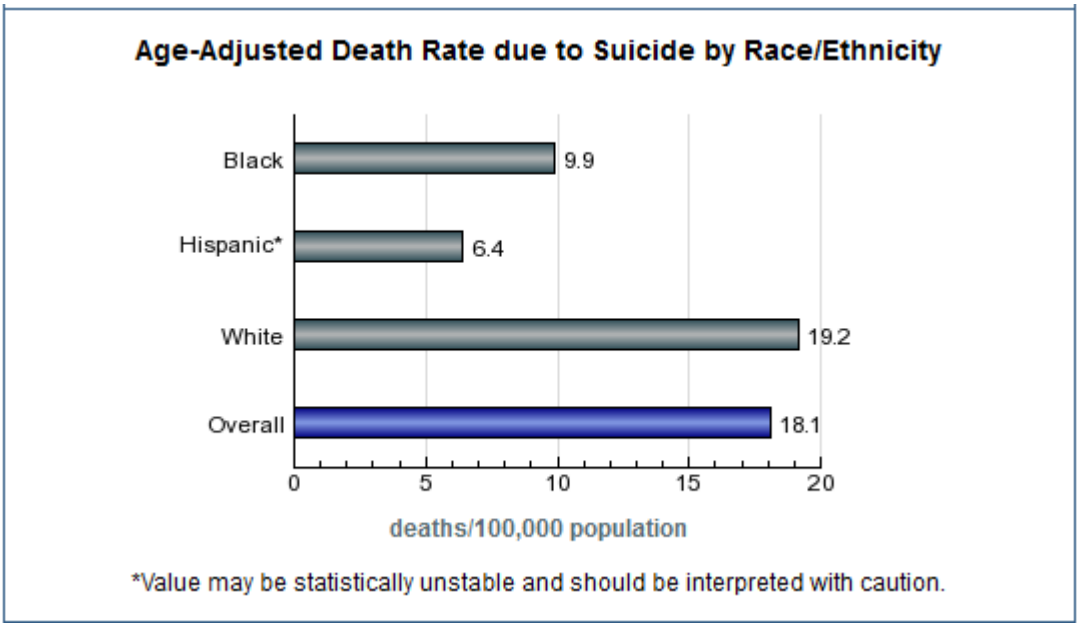

Babies with Low Birth Weight by Maternal Race/Ethnicity
Black
Hispanic
Other
White
Overall
12.4
8.1
7.4
6.6
7.5
0
2
4
6
8
10
12
14
percent

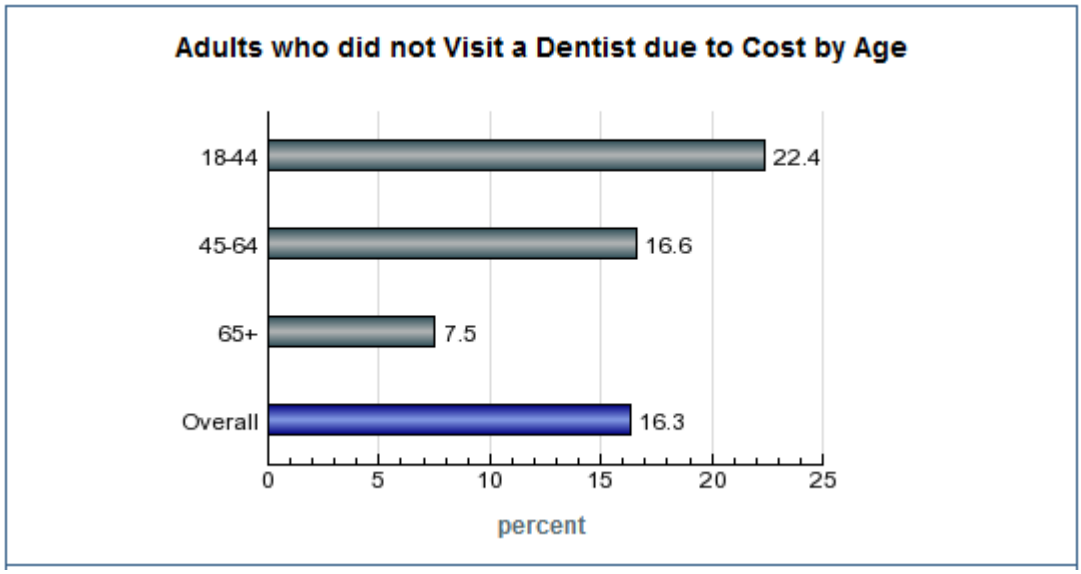

Infant Mortality Rate by Race/Ethnicity
Black
Hispanic*
Other*
White
Overall
15.1
3.8
6.6
5.0
6.5
0
5
10
15
20
deaths/1,000 live births
*Value may be statistically unstable and should be interpreted with caution.

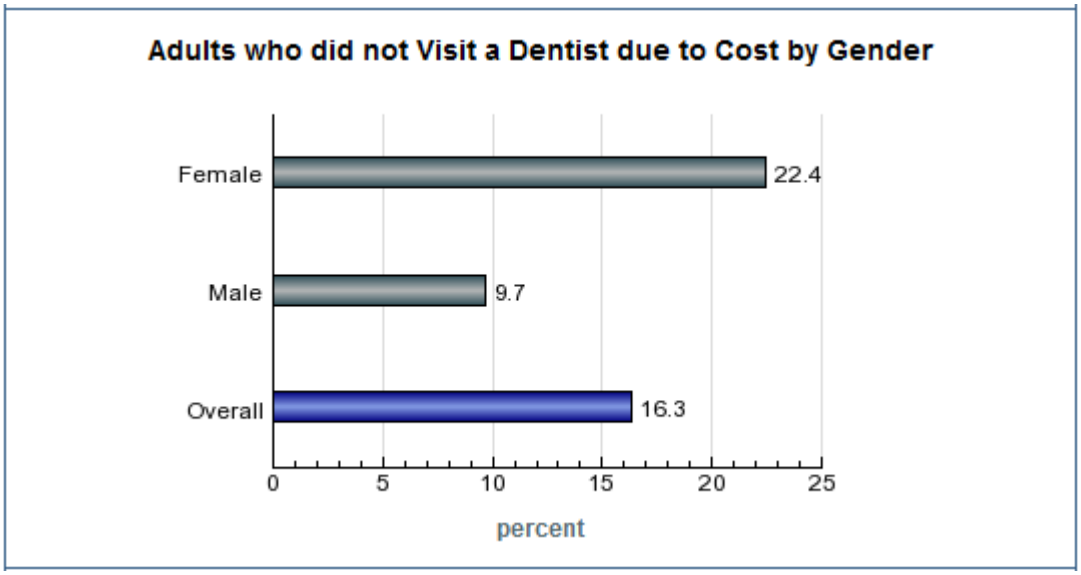

Mothers who Received Early Prenatal Care by Race/Ethnicity
Black
Hispanic
Other
White
Overall
75.3
83.8
81.3
85.5
83.8
0
20
40
60
80
100
percent

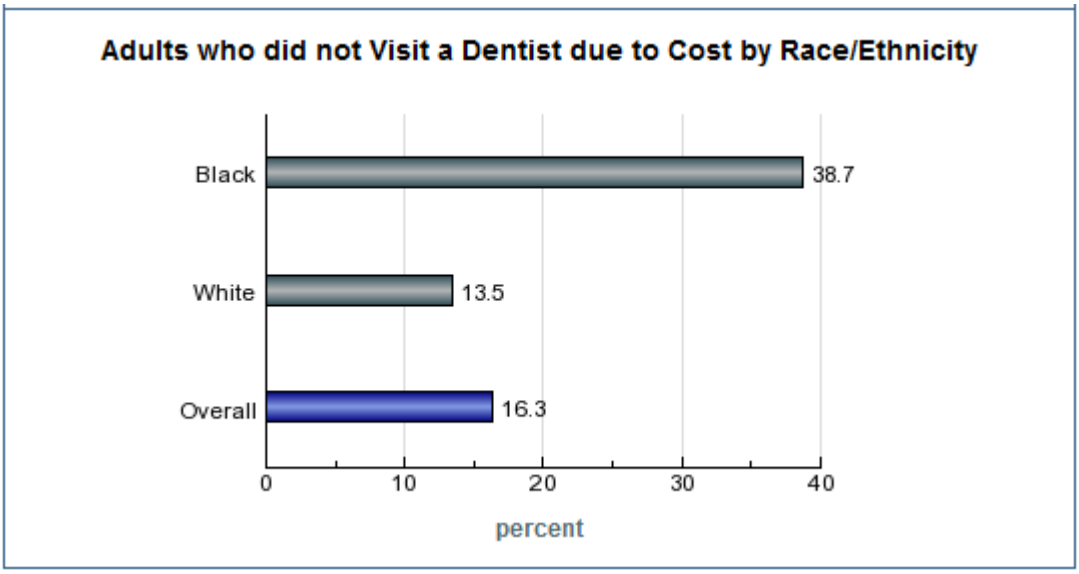

Preterm Births by Race/Ethnicity
Black
Hispanic
Other
White
Overall
16.9
14.4
10.2
11.4
12.2
0
5
10
15
20
percent

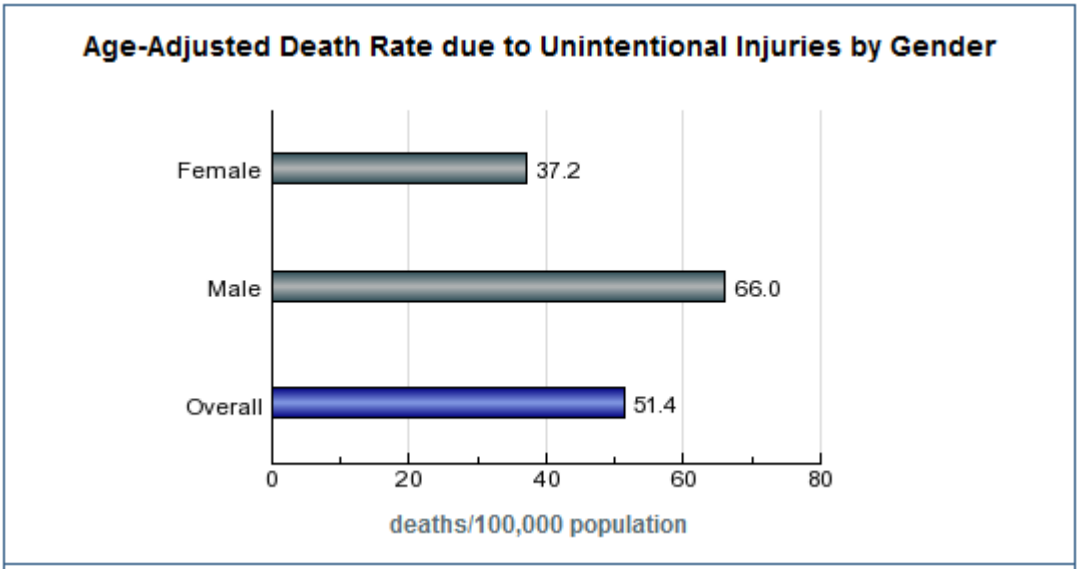

Age-Adjusted Death Rate due to Suicide by Gender
Female
7.9
Male
28.7
Overall
18.1
0
5
10
15
20
25
30
deaths/100,000 population

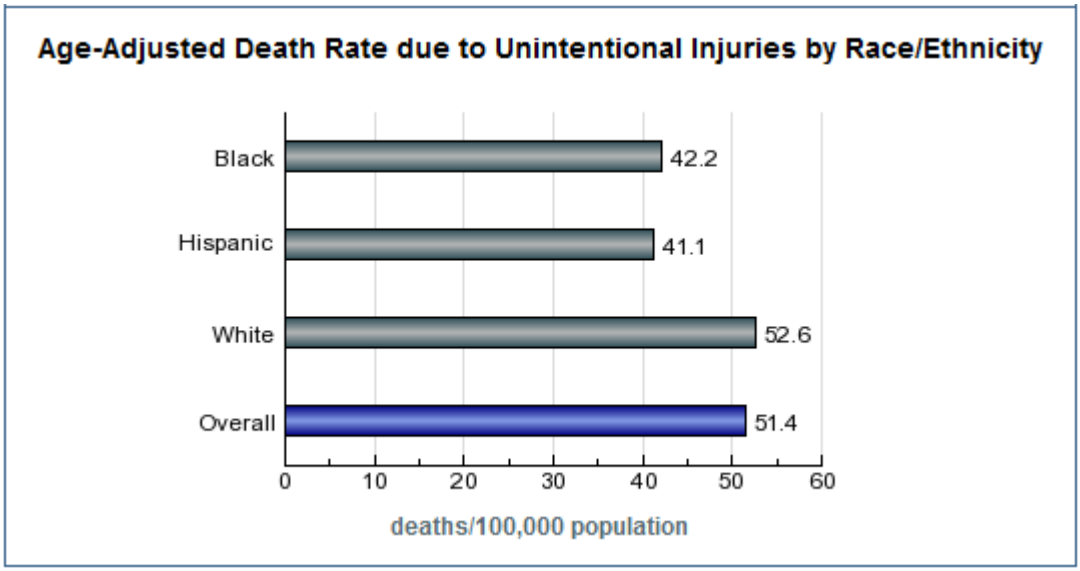

Age-Adjusted Death Rate due to Suicide by Race/Ethnicity
Black
9.9
Hispanic*
6.4
White
19.2
Overall
18.1
0
5
10
15
20
deaths/100,000 population
*Value may be statistically unstable and should be interpreted with caution.

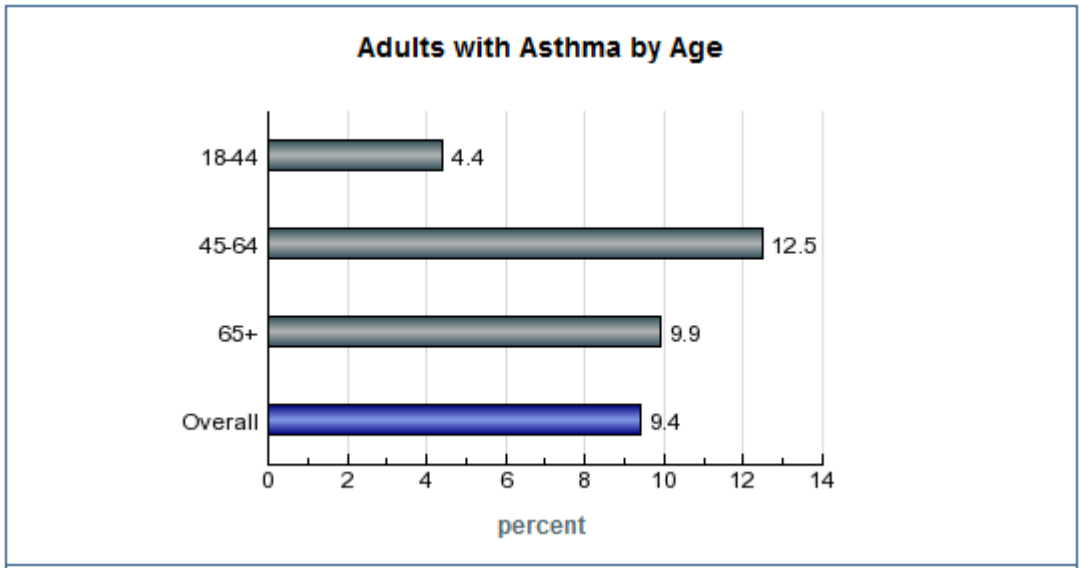

Adults who did not Visit a Dentist due to Cost by Age
18-44
22.4
45-64
16.6
65+
7.5
Overall
16.3
0
5
10
15
20
25
percent

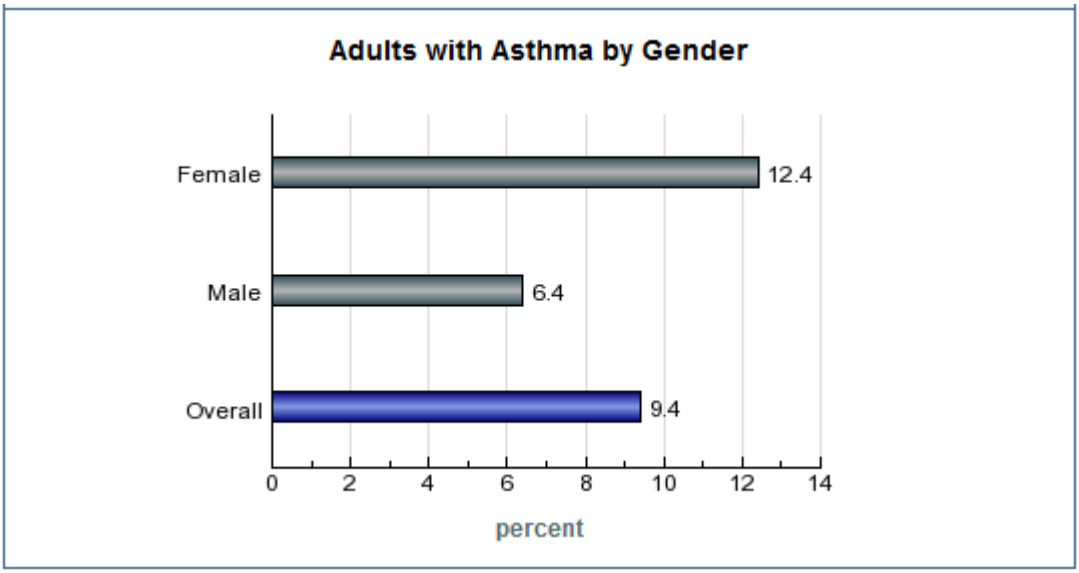

Adults who did not Visit a Dentist due to Cost by Gender
Female
22.4
Male
9.7
Overall
16.3
0
5
10
15
20
25
percent

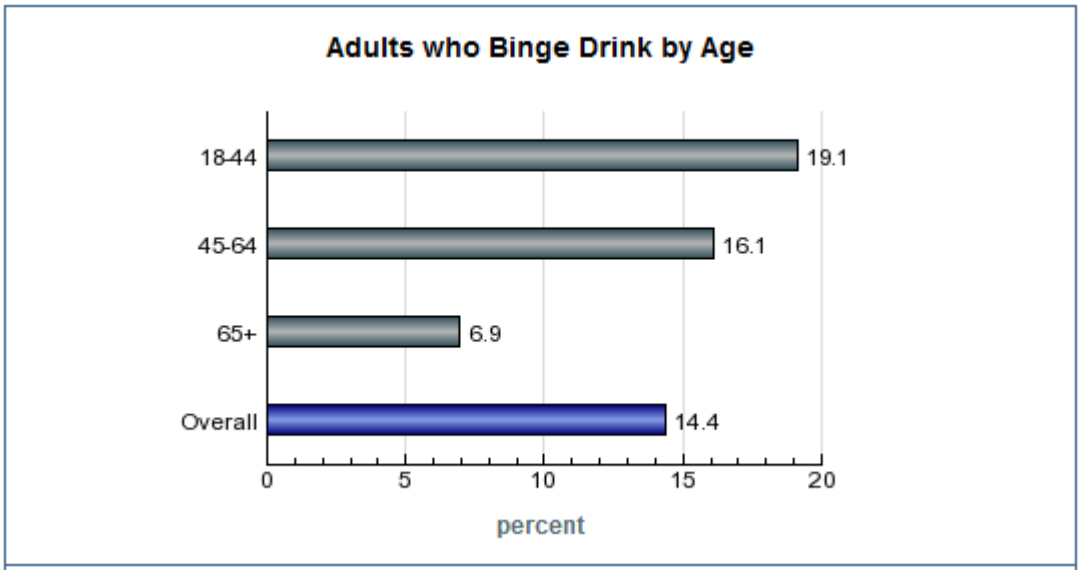

Adults who did not Visit a Dentist due to Cost by Race/Ethnicity
Black
38.7
White
13.5
Overall
16.3
0
10
20
30
40
percent

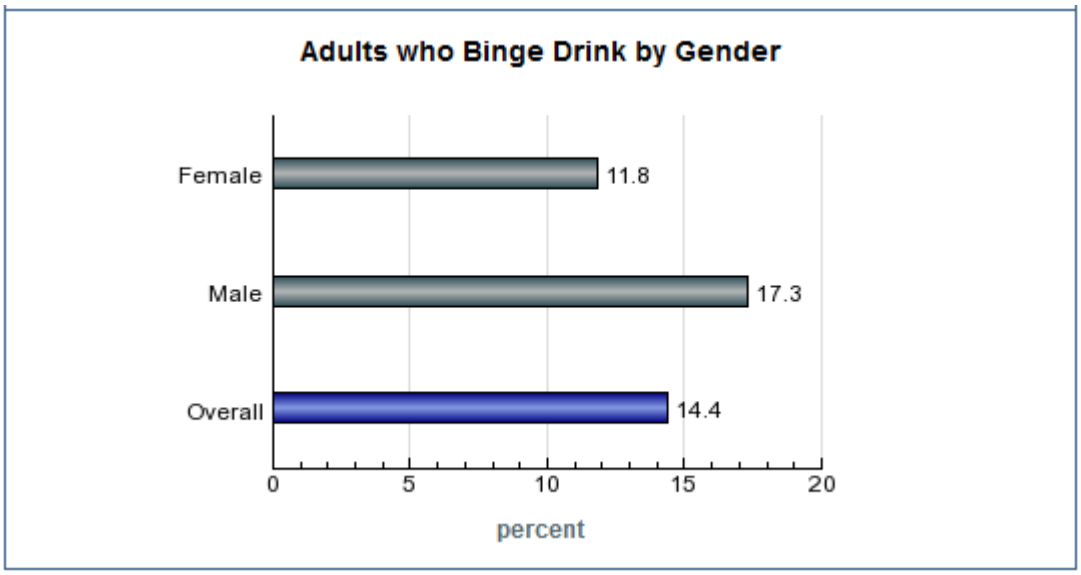

Age-Adjusted Death Rate due to Unintentional Injuries by Gender
Female
37.2
Male
66.0
Overall
51.4
0
20
40
60
80
deaths/100,000 population

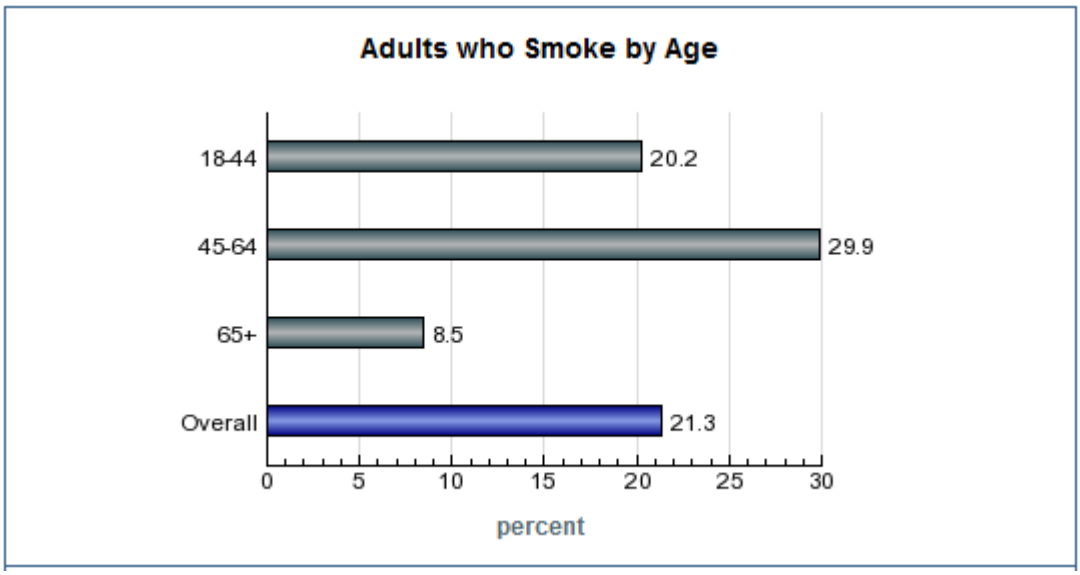

Age-Adjusted Death Rate due to Unintentional Injuries by Race/Ethnicity
Black
42.2
Hispanic
41.1
White
52.6
Overall
51.4
0
10
20
30
40
50
60
deaths/100,000 population

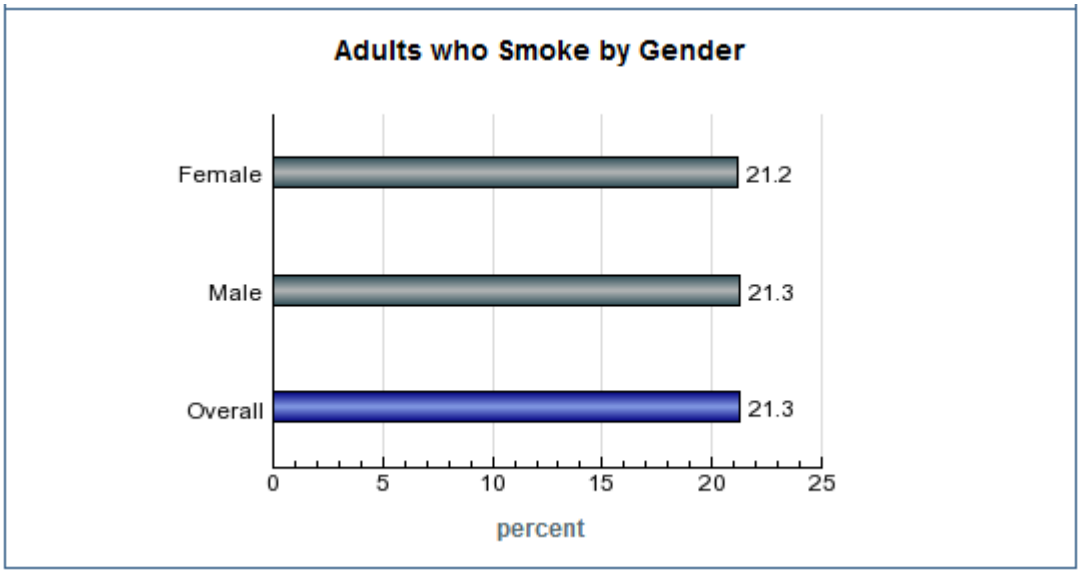

Adults with Asthma by Age
18-44
4.4
45-64
12.5
65+
9.9
Overall
9.4
0
2
4
6
8
10
12
14
percent

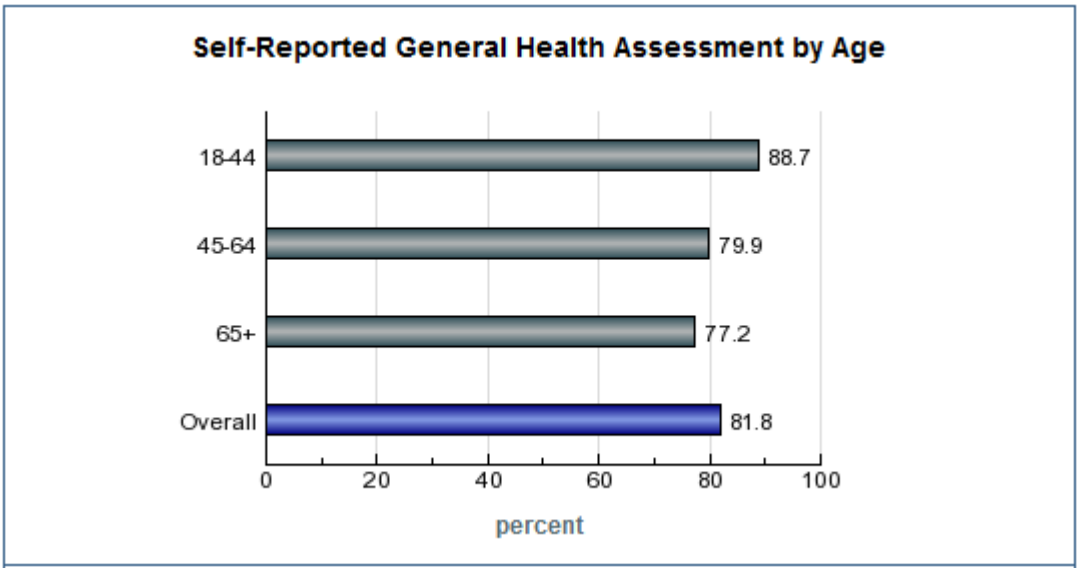

Adults with Asthma by Gender
Female
12.4
Male
6.4
Overall
9.4
0
2
4
6
8
10
12
14
percent

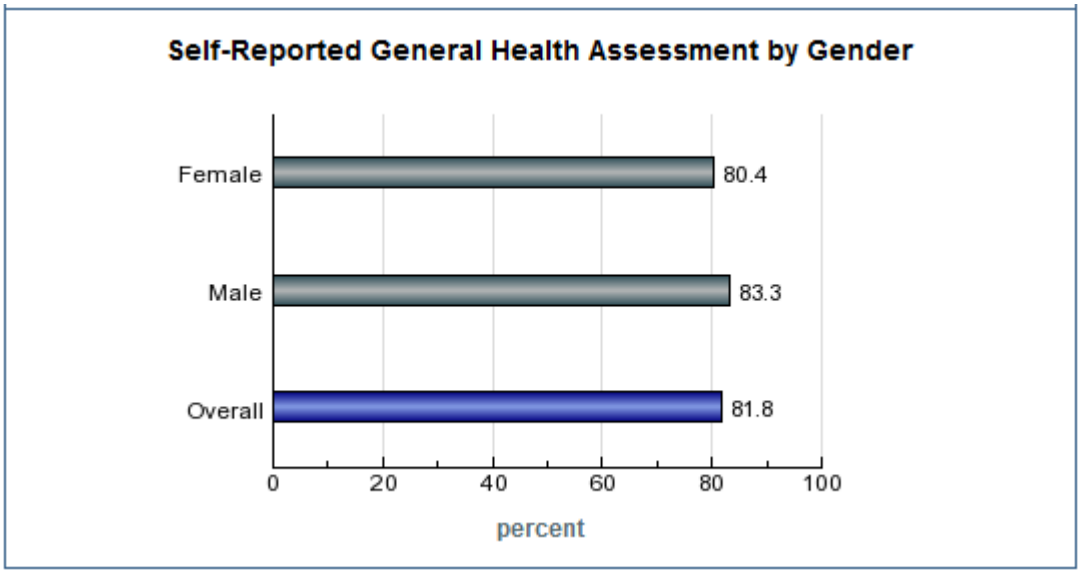

Adults who Binge Drink by Age
18-44
19.1
45-64
16.1
65+
6.9
Overall
14.4
0
5
10
15
20
percent

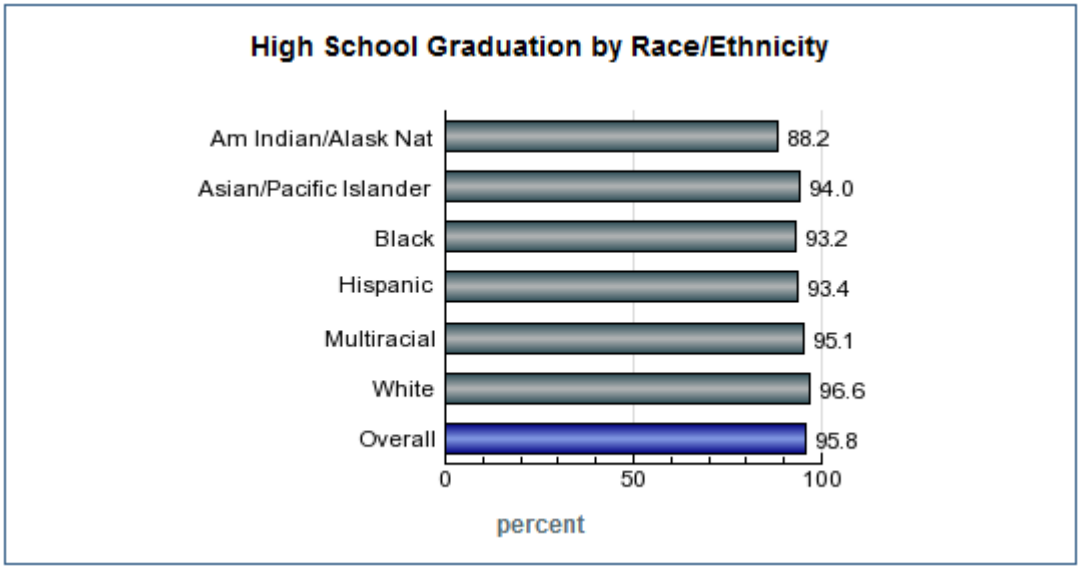

Adults who Binge Drink by Gender
Female
11.8
Male
17.3
Overall
14.4
0
5
10
15
20
percent

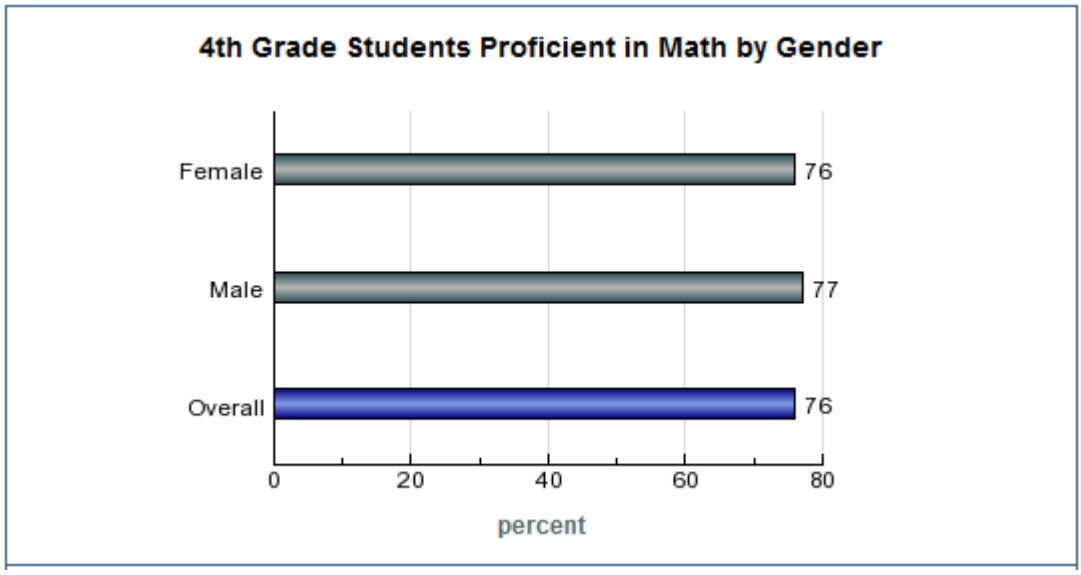

Adults who Smoke by Age
18-44
20.2
45-64
29.9
65+
8.5
Overall
21.3
0
5
10
15
20
25
30
percent

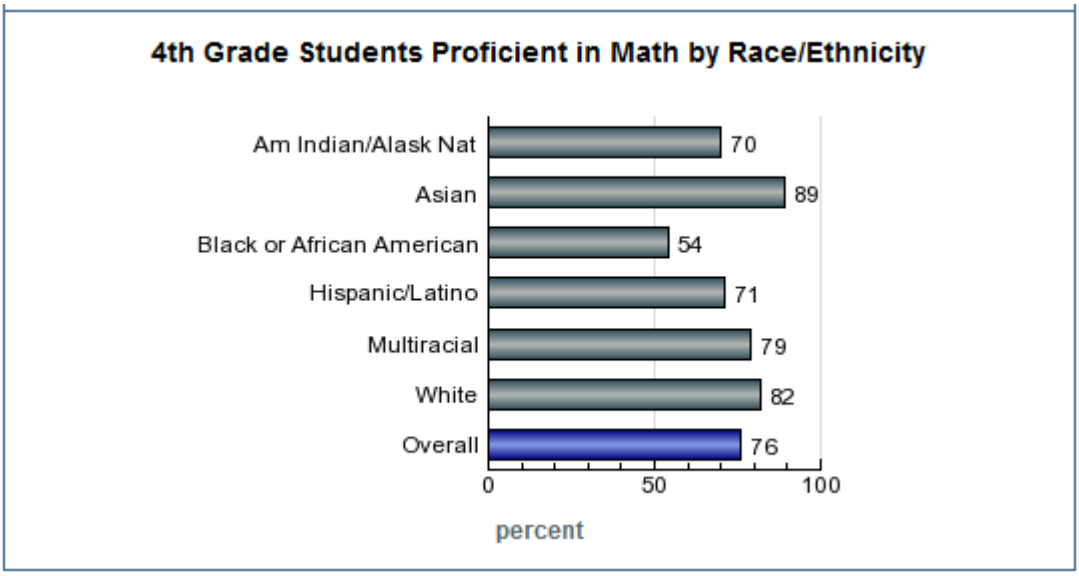

Adults who Smoke by Gender
Female
21.2
Male
21.3
Overall
21.3
0
5
10
15
20
25
percent

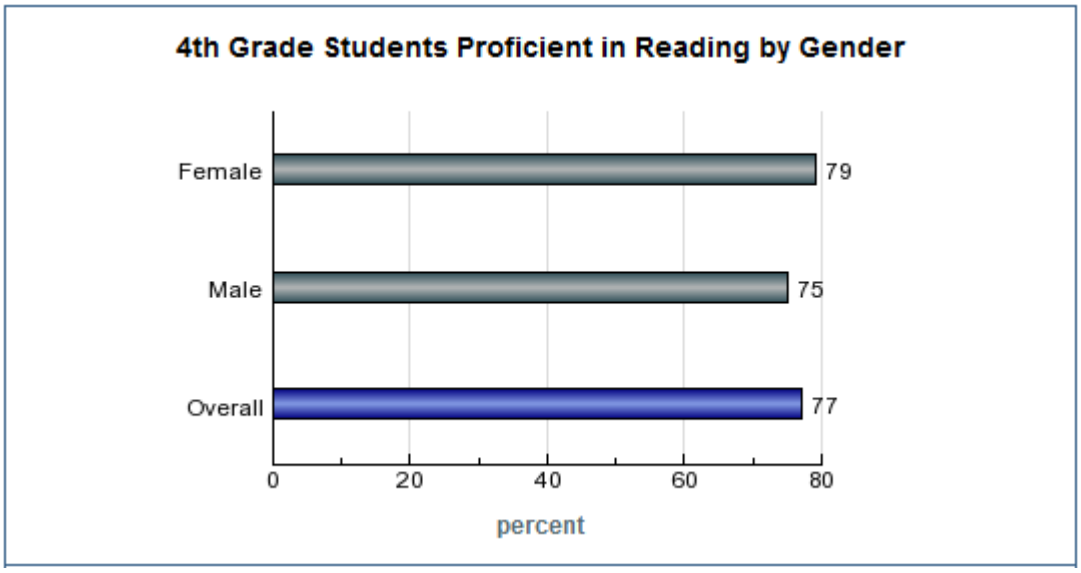

Self-Reported General Health Assessment by Age
18-44
45-64
65+
Overall
88.7
79.9
77.2
81.8
0
20
40
60
80
100
percent

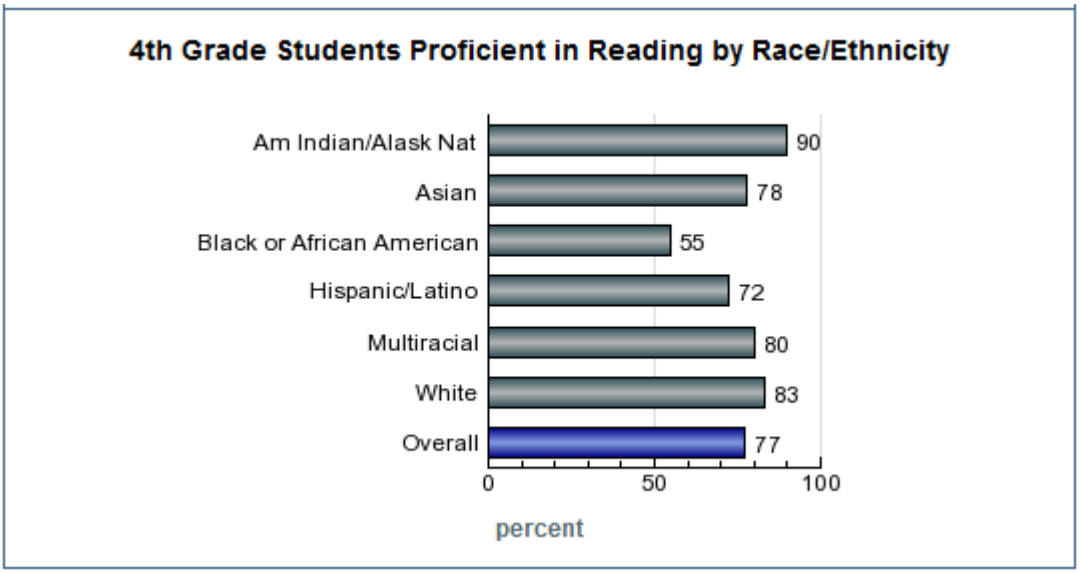

Self-Reported General Health Assessment by Gender
Female
Male
Overall
80.4
83.3
81.8
0
20
40
60
80
100
percent

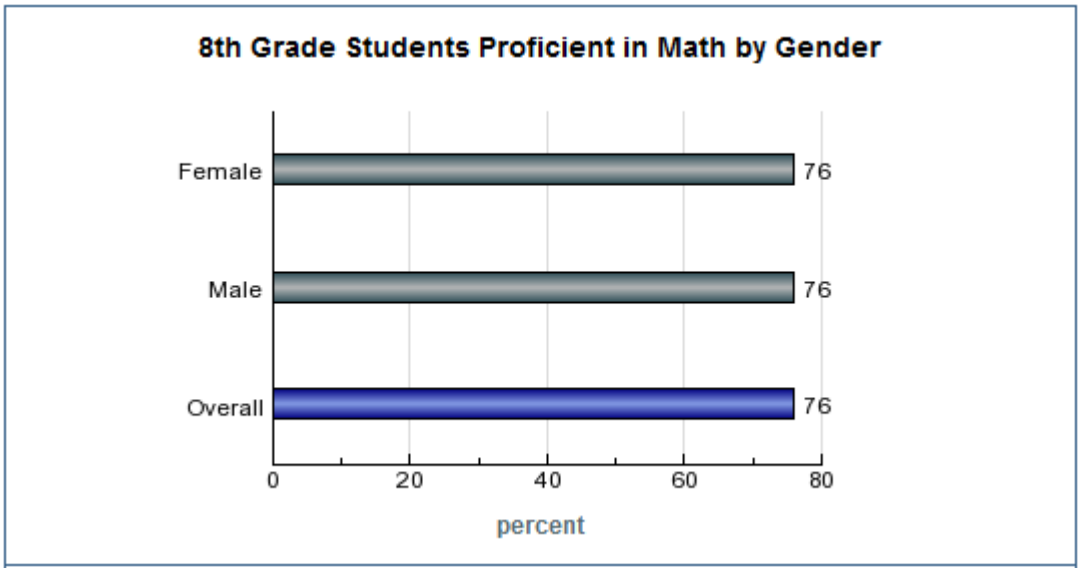

High School Graduation by Race/Ethnicity
Am Indian/Alask Nat
Asian/Pacific Islander
Black
Hispanic
Multiracial
White
Overall
88.2
94.0
93.2
93.4
95.1
96.6
95.8
0
50
100
percent

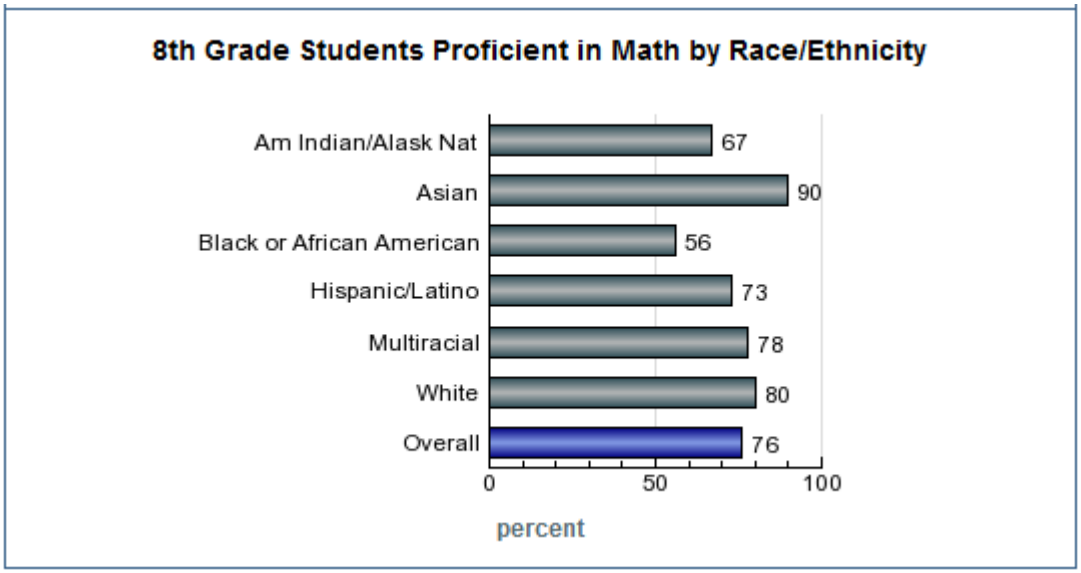

4th Grade Students Proficient in Math by Gender
Female
76
Male
77
Overall
76
0
20
40
60
80
percent

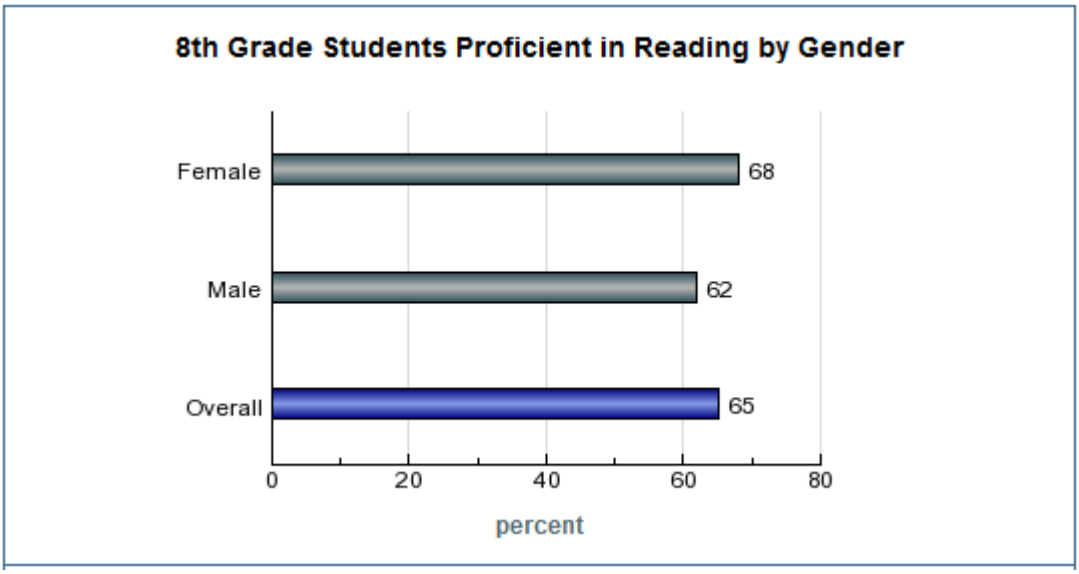

4th Grade Students Proficient in Math by Race/Ethnicity
Am Indian/Alask Nat
70
Asian
89
Black or African American
54
Hispanic/Latino
71
Multiracial
79
White
82
Overall
76
0
50
100
percent

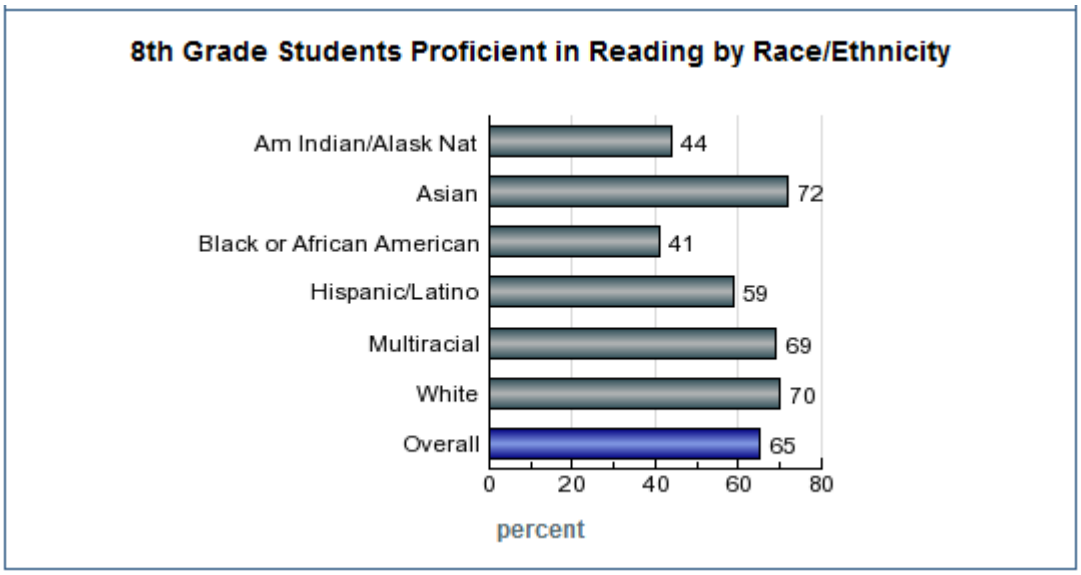

4th Grade Students Proficient in Reading by Gender
Female
79
Male
75
Overall
77
0
20
40
60
80
percent

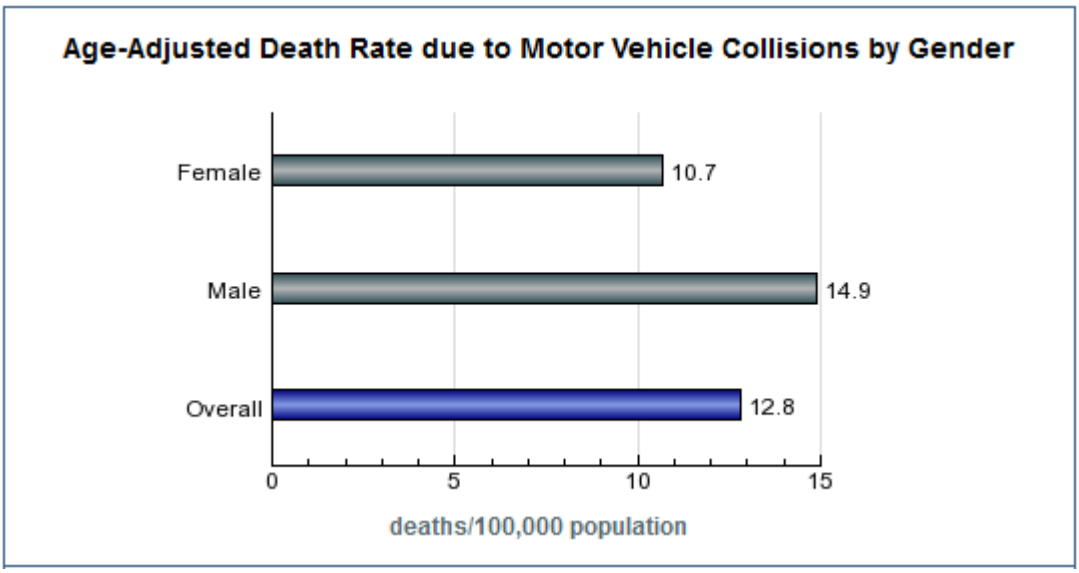

4th Grade Students Proficient in Reading by Race/Ethnicity
Am Indian/Alask Nat
90
Asian
78
Black or African American
55
Hispanic/Latino
72
Multiracial
80
White
83
Overall
77
0
50
100
percent

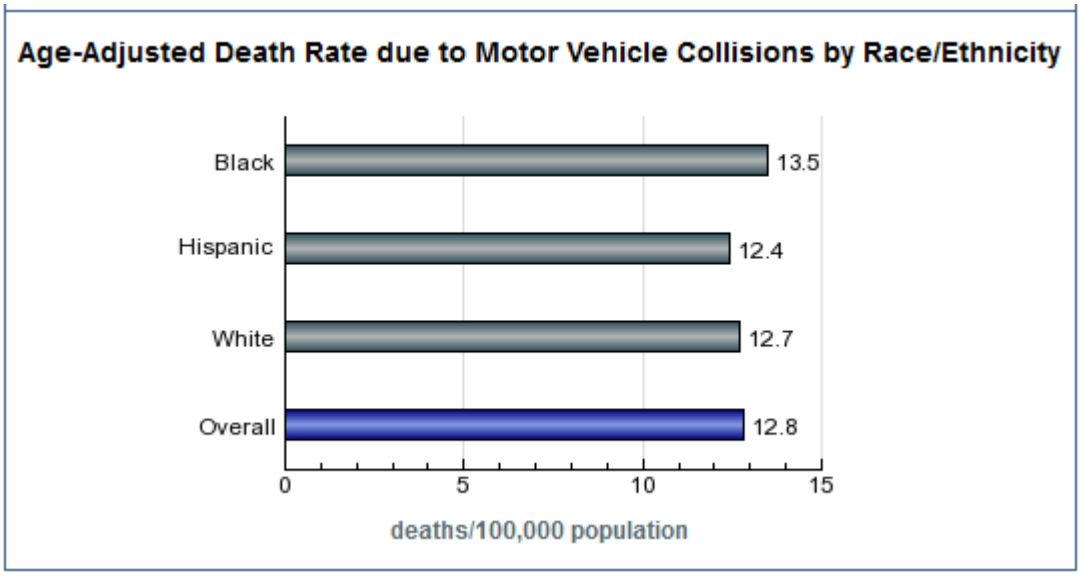

8th Grade Students Proficient in Math by Gender
Female
Male
Overall
76
76
76
0
20
40
60
80
percent

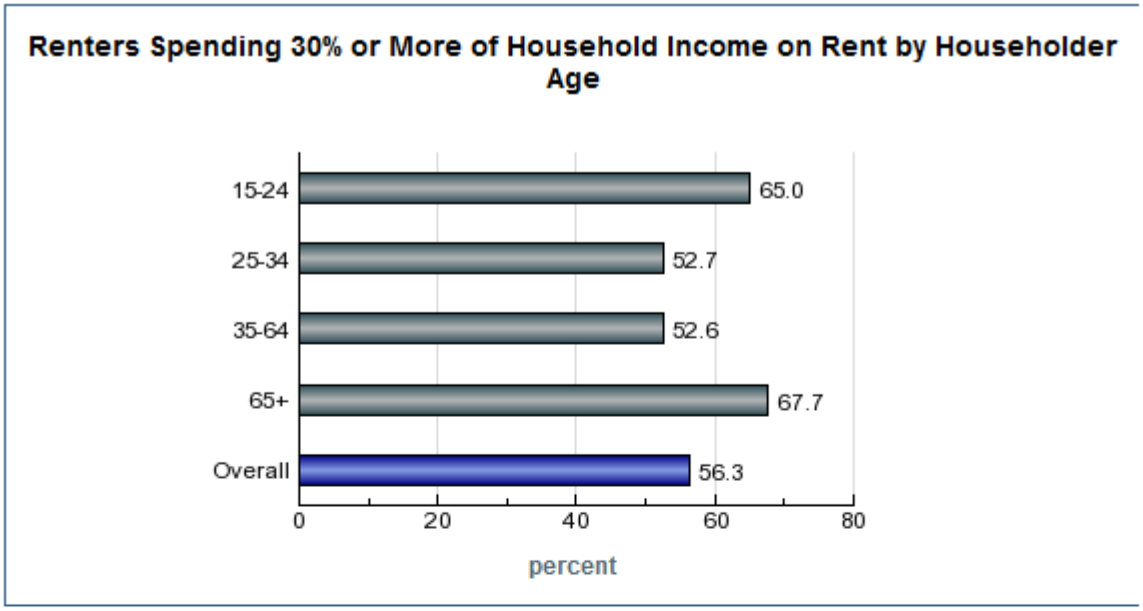

8th Grade Students Proficient in Math by Race/Ethnicity
Am Indian/Alask Nat
Asian
Black or African American
Hispanic/Latino
Multiracial
White
Overall
67
90
56
73
78
80
76
0
50
100
percent


8th Grade Students Proficient in Reading by Gender
Female
68
Male
62
Overall
65
0
20
40
60
80
percent


8th Grade Students Proficient in Reading by Race/Ethnicity
Am Indian/Alask Nat
44
Asian
72
Black or African American
41
Hispanic/Latino
59
Multiracial
69
White
70
Overall
65
0
20
40
60
80
percent

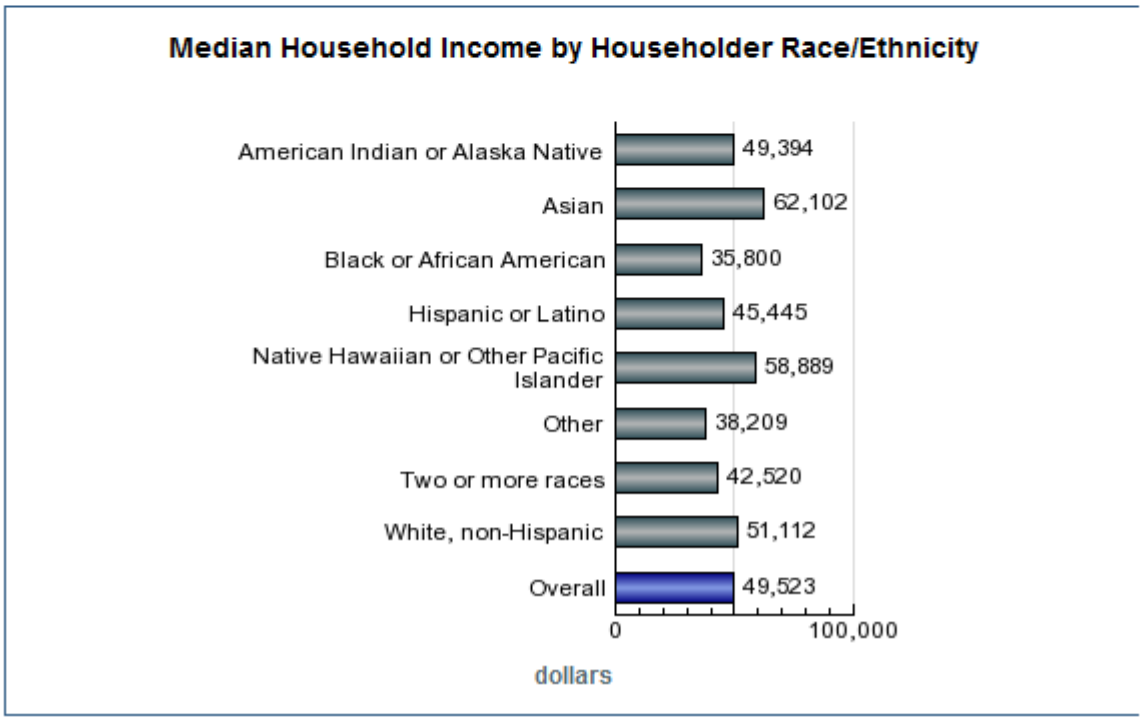

Age-Adjusted Death Rate due to Motor Vehicle Collisions by Gender
Female
10.7
Male
14.9
Overall
12.8
0
5
10
15
deaths/100,000 population


Age-Adjusted Death Rate due to Motor Vehicle Collisions by Race/Ethnicity
Black
13.5
Hispanic
12.4
White
12.7
Overall
12.8
0
5
10
15
deaths/100,000 population

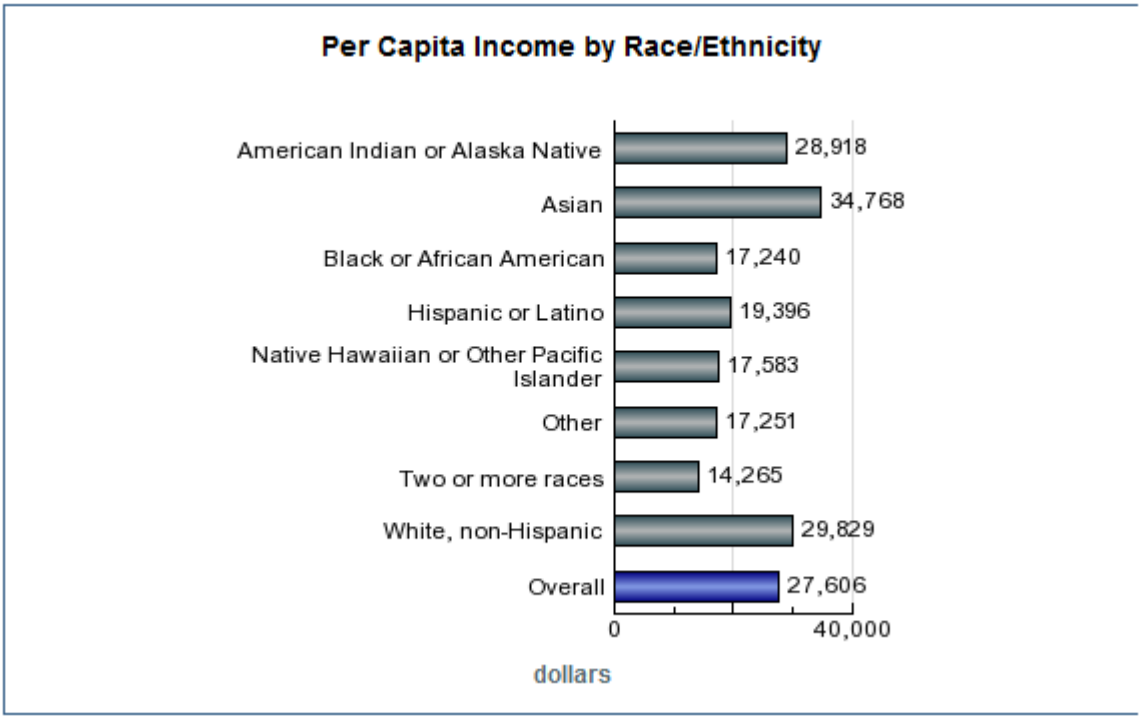


Income

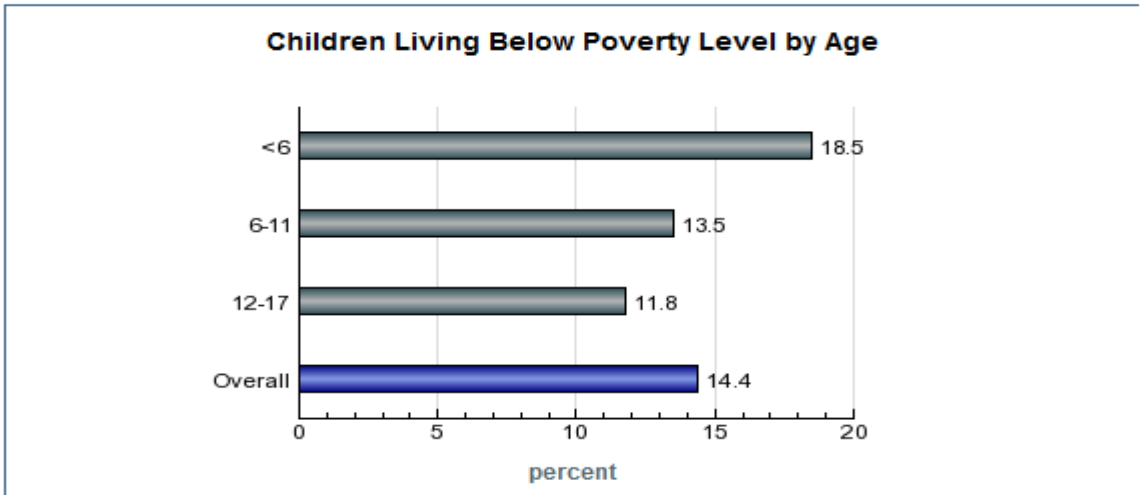
- Median Household Income

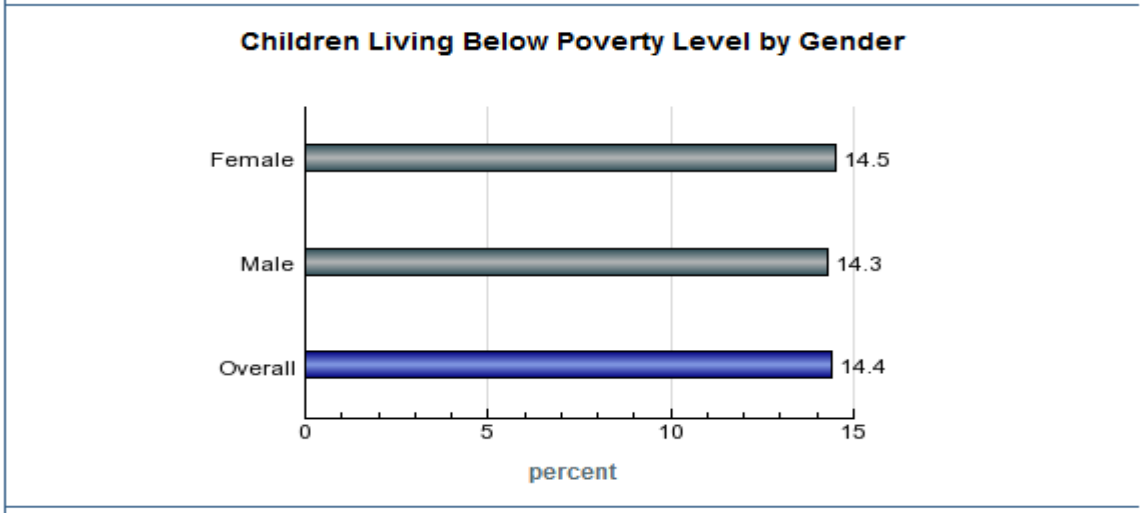


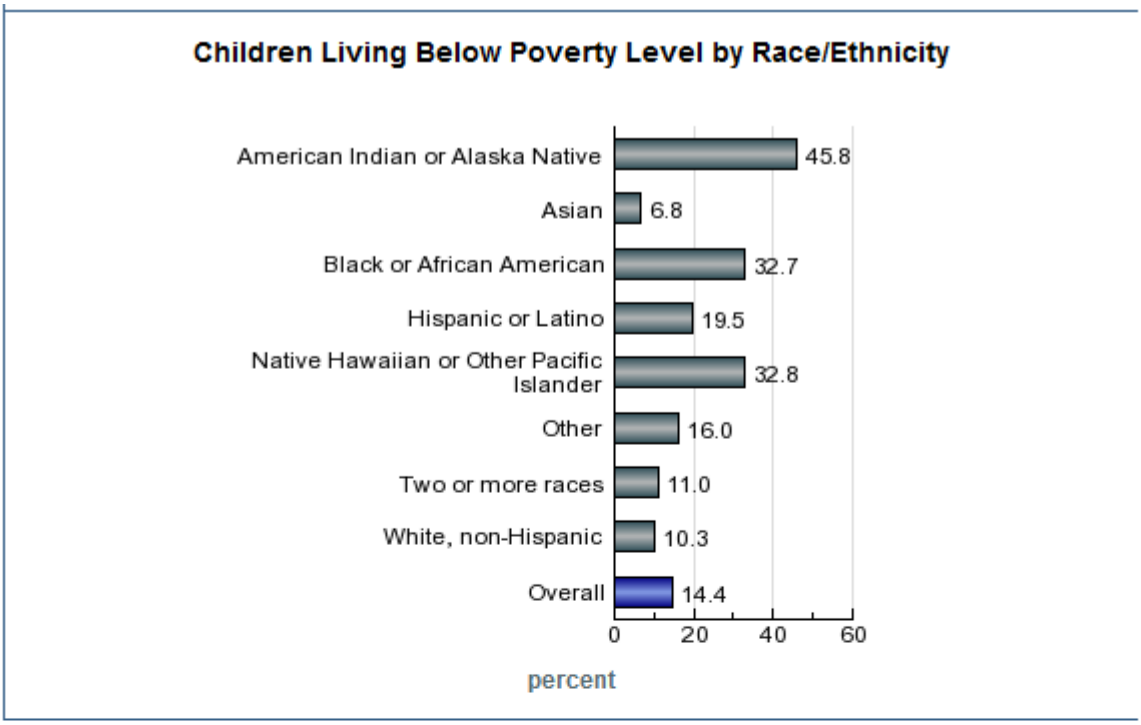
- Per Capita Income



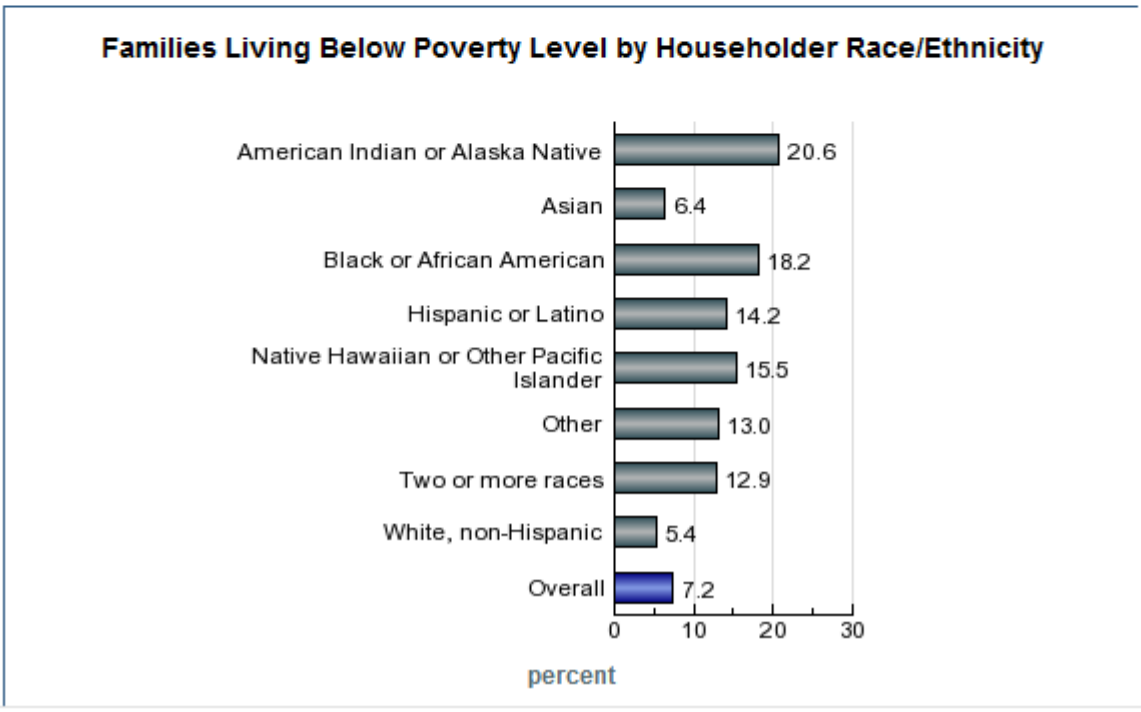
- Children Living Below Poverty Level



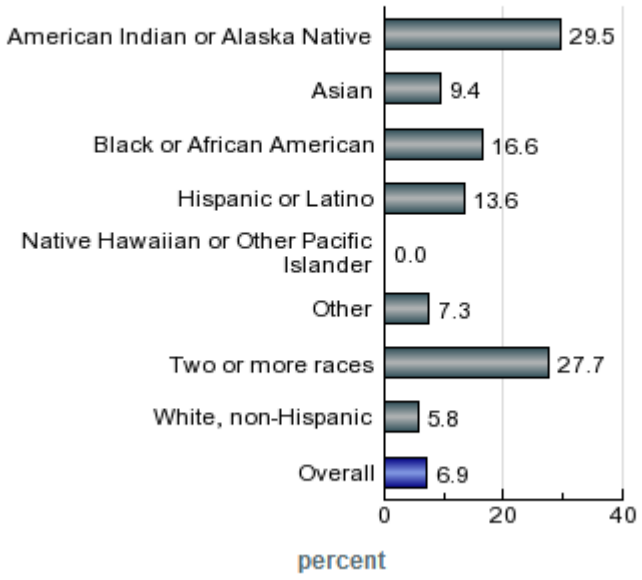




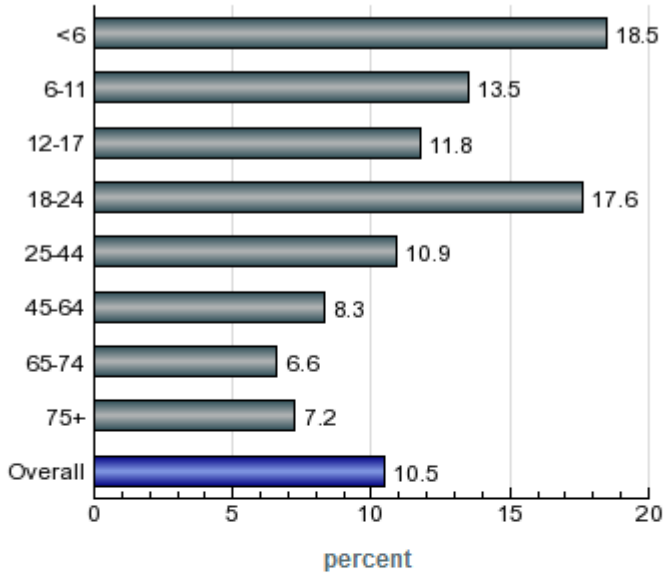
Families Living Below Poverty Level



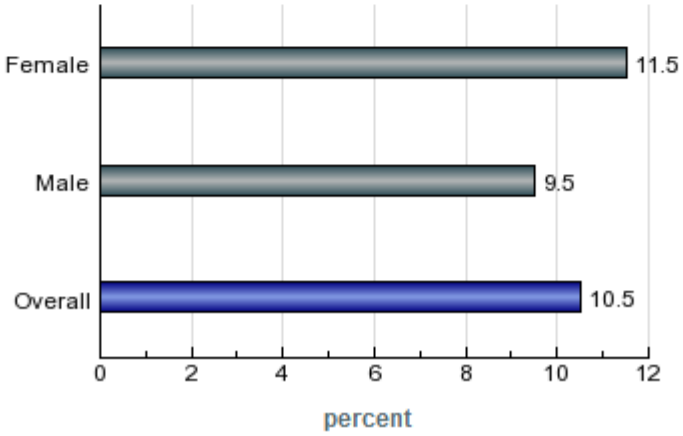
People 65+ Living Below Poverty Level by Race/Ethnicity



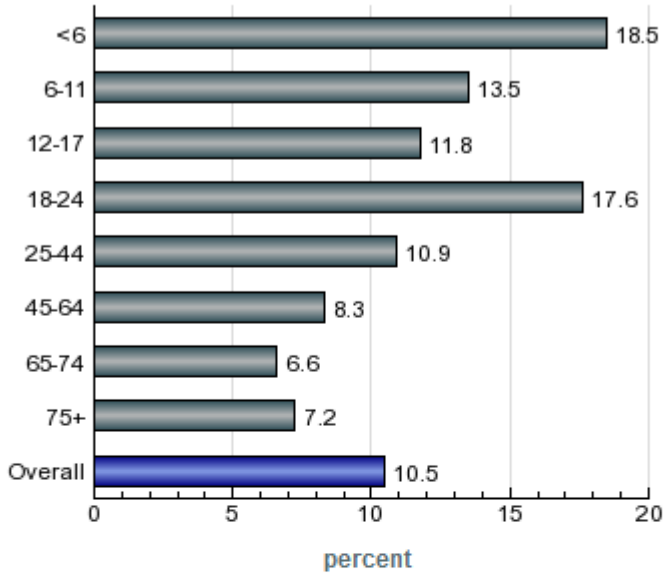
People Living Below Poverty Level by Age



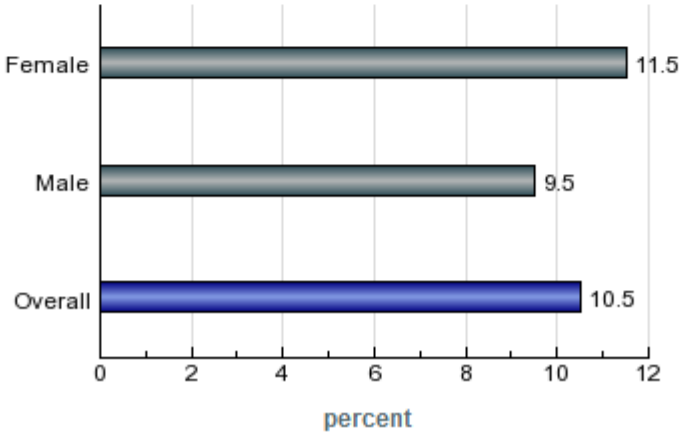
People Living Below Poverty Level by Gender



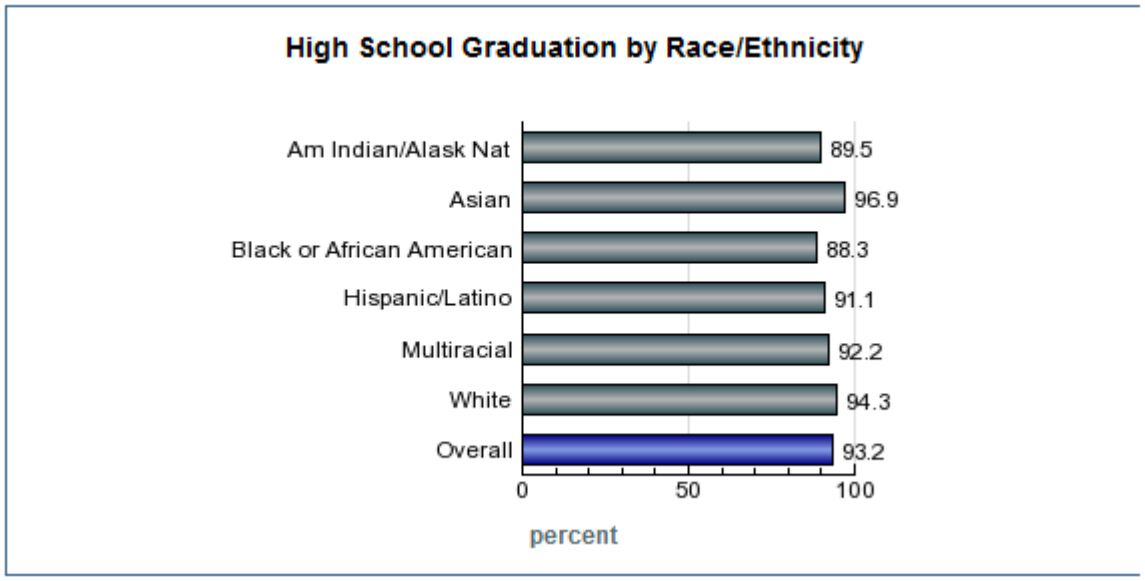
People Living Below Poverty Level by Age

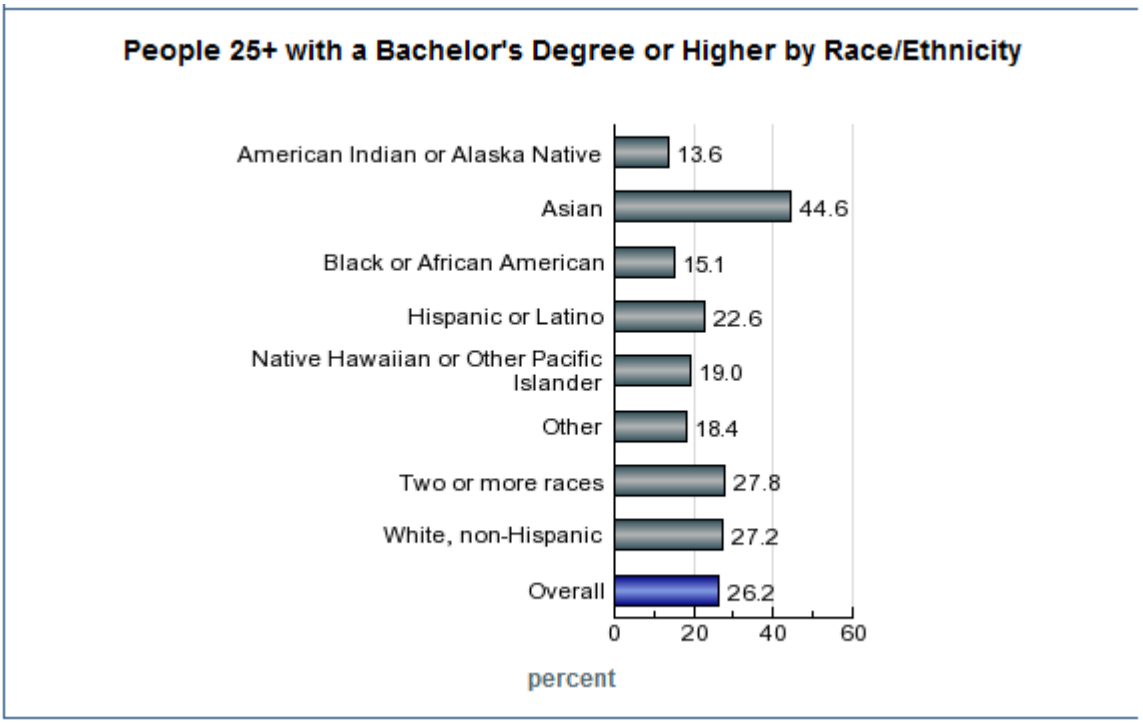


People Living Below Poverty Level by Gender



- High School Graduation





Pregnancy and Child Profile

http://www.floridacharts.com/charts/MICProfile.aspx?county=5&profileyear=2010

Pregnancy and Young Child Profile, Brevard County						
Measure	Rate Type	Year(s)	County Quartile 1=most favorable 4=least favorable	County Number	County Rate	State Comparison
Community Characteristics						
Median household income (in dollars)	Dollars	2006-10	1	$49,523		$47,661
Residents below 100% poverty	Percent total population	2010	1	52,566	9.5%	12.5%
Unemployment rate	Percent	2010	3		11.5%	11.5%
Individuals living in owner-occupied housing	Percent	2006-10	2		76.4%	69.7%
Domestic violence offenses	Per 100,000 population	2008-10	3	3,939	726.0	610.7
Little English spoken in family (linguistically isolated)[1]	Percent	2006-10	2		1.6%	7.2%
Births covered by emergency Medicaid [2]	Percent of births	2007-09	2	102	1.9%	8.3%
Women of Childbearing Age						
Socio-Demographic Characteristics						
Total female population ages 15-44	Count	2010		88,697		3,539,145
White female population ages 15-44	Count	2010		71,566		2,610,483
Black female population ages 15-44	Count	2010		11,363		713,602
Other female population ages 15-44	Count	2010		5,768		215,060
Hispanic female population ages 15-44	Count	2010		8,791		929,400
Non-Hispanic female population ages 15-44	Count	2010		79,906		2,609,745
Birth Family Characteristics						
Births to mothers ages 15-19	Per 1,000 females 15-19	2008-10	1	464	28.1	36.8
Repeat births to mothers ages 15-19	Percent of births 15-19	2008-10	2	76	16.5%	18.4%
Births to mothers > 35	Per 1,000 females > 35	2008-10	2	550	3.2	4.7
Total births to unwed mothers	Percent of births	2008-10	1	2,285	43.9%	47.3%
Births among unwed mothers ages 15-19	Percent of births 15-19	2008-10	3	420	90.5%	90.0%
Births among unwed mothers ages 20-54	Percent of births 20-54	2008-10	2	1,860	39.3%	42.6%
Births with father acknowledged on birth certificate	Percent of births	2008-10	2	4,549	87.4%	86.5%
Births to mothers > 18 without high school education	Percent of births > 18	2008-10	1	618	12.6%	15.4%
Births to mothers born in other countries	Percent of births	2008-10	2	767	14.7%	31.2%

Pregnancy and Young Child Profile, Brevard County						
Measure	Rate Type	Year(s)	County Quartile 1=most favorable 4=least favorable	County Number	County Rate	State Comparison
Pre-conception Health and Behaviors						
Females > 17 who engage in heavy or binge drinking	Percent of females > 17	2010	3		11.8%	10.5%
Women 15-34 with sexually transmitted diseases[3]	Per 100,000 females 15-34	2008-10	2	1,442	2495.3	2619.7
Females > 17 who are current smokers	Percent of females > 17	2010	3		21.2%	16.0%
Births to underweight mothers at time pregnancy occurred[4]	Percent of births	2008-10	4	775	14.9%	11.9%
Births to overweight mothers at time pregnancy occurred[5]	Percent of births	2008-10	2	1,172	22.5%	23.3%
Births to obese mothers at time pregnancy occurred[6]	Percent of births	2008-10	1	1,016	19.5%	19.4%
Births with inter-pregnancy interval < 18 months	Percent of births	2008-10	3	1,257	41.5%	38.0%
Pregnancy and Health Behaviors						
Births to mothers who report smoking during pregnancy	Percent of births	2008-10	2	665	12.8%	6.9%
Access to Services						
Well-Woman/Pre-conception care						
Females > 17 with pap smear in preceding year	Percent of females > 17	2010	3		55.5%	57.1%
Females > 17 who have a personal doctor	Percent of females > 17	2010	2		85.8%	84.5%
Females > 17 who have any type of health care insurance coverage	Percent of females > 17	2010	1		90.2%	84.2%
Pregnancy						
Births with 1st trimester prenatal care	Percent of births w/ known PNC status	2008-10	2	3,970	80.8%	78.1%
Births with late or no prenatal care	Percent of births w/ known PNC status	2008-10	2	179	3.6%	5.1%
Births with adequate prenatal care (Kotelchuck index)	Percent of births w/ known PNC status	2008-10	1	3,713	75.6%	69.5%
Births to uninsured women ("self-pay" checked on birth certificate)	Percent of births	2008-10	3	251	4.8%	9.5%
Births covered by Medicaid[7]	Percent of births	2008-10	1	2,398	46.1%	46.8%
C-section births	Percent of births	2008-10	2	1,696	32.6%	37.8%
Very low birthweight infants born in subspecialty perinatal centers	Percent of VLBW births	2008-10	4	31	44.1%	74.4%

Pregnancy and Young Child Profile, Brevard County						
Measure	Rate Type	Year(s)	County Quartile 1=most favorable 4=least favorable	County Number	County Rate	State Comparison
Infants (Under 1)						
Socio-Demographic Characteristics						
Total births	Per 1,000 population	2008-10		5,202	9.6	11.9
White births	Per 1,000 white population	2008-10		4,142	9.0	10.8
Black births	Per 1,000 black population	2008-10		751	13.5	16.5
Other nonwhite births	Per 1,000 other nonwhite population	2008-10		302	11.4	12.5
Hispanic births	Per 1,000 hispanic population	2008-10		608	14.2	15.1
Non-Hispanic births	Per 1,000 non-hispanic population	2008-10		4,585	9.2	10.9
Social-emotional Development						
Infants in foster care	Per 1,000 population < 1	2008-10	2	39	7.6	10.8
Poor Birth Outcomes						
Births < 1500 grams (very low birth weight)	Percent of births	2008-10	2	71	1.4%	1.6%
Births < 2500 grams (low birth weight)	Percent of births	2008-10	2	406	7.8%	8.7%
Births < 37 weeks gestation (preterm)	Percent of births	2008-10	2	668	12.8%	13.9%
Birth defects (structural and genetic) ratio to total births	Per 10,000 births	2006-08	3	133	236.8	228.6
Congential heart defects	Per 10,000 births	2006-08	4	46	81.5	73.0
Chromosomal abnormalities (Trisomy 13, 18, & 21)	Per 10,000 births	2006-08	2	8	14.3	15.2
Multiple births (twins, triplets, or more)	Percent of births	2008-10	3	168	3.2%	3.2%

Pregnancy and Young Child Profile, Brevard County						
Measure	Rate Type	Year(s)	County Quartile 1=most favorable 4=least favorable	County Number	County Rate	State Comparison
Health and Safety						
Mothers who initiate breastfeeding	Percent	2008-10	2	3,898	74.9%	79.0%
Injuries and Injury-related Deaths						
Hospitalizations for all non-fatal unintentional injuries < 1	Per 100,000 population < 1	2008-10	2	11	204.9	289.3
Hospital/ER treated non-fatal unintentional falls < 1[8]	Per 100,000 population < 1	2008-10	3	208	4001.0	3627.2
Hospitalizations for non-fatal traumatic brain injuries < 1	Per 100,000 population < 1	2008-10	2	9	166.4	195.1
Child passengers < 1 injured or killed in motor vehicle crashes	Per 100,000 population < 1	2008-10	2	18	345.7	351.9
Other Deaths						
Fetal deaths	Per 1,000 deliveries	2008-10	2	35	6.7	7.2
Neonatal deaths (<28 days)	Per 1,000 live births	2008-10	2	23	4.4	4.5
Post-Neonatal deaths (28-364 days)	Per 1,000 live births	2008-10	2	11	2.2	2.4
Infant deaths (0-364 days)	Per 1,000 live births	2008-10	2	34	6.5	6.9
Deaths from SUID (sudden unexpected infant death)	Per 100,000 live births	2008-10	2	4	70.5	98.8
Children Ages 1-5						
Socio-Demographic Characteristics						
Population by Race/Ethnicity						
Total population ages 1-5	Count	2010		27,113		1,050,492
White population ages 1-5	Count	2010		19,863		718,975
Black population ages 1-5	Count	2010		4,427		240,720
Other population ages 1-5	Count	2010		2,823		90,797
Hispanic population ages 1-5	Count	2010		3,637		289,926
Non-Hispanic population ages 1-5	Count	2010		23,476		760,566
Poverty						
Kindergarten children eligible for free/reduced lunch	Percent of KG students	2009	1	15,307	47.7%	59.0%
Social-emotional Development						
Children in school-readiness programs eligible for free/reduced lunch	Percent of kids in progams	2007-09	2	4,083	63.4%	57.8%
Children ages 1-5 in foster care	Per 1,000 population 1-5	2008-10	2	124	4.6	5.8
Children ages 1-5 receiving mental health treatment services	Per 1,000 population 1-5	2008-10	2	205	7.6	10.1

Pregnancy and Young Child Profile, Brevard County						
Measure	Rate Type	Year(s)	County Quartile 1=most favorable 4=least favorable	County Number	County Rate	State Comparison
Access to Services						
Health Care						
Children < 5 covered by KidCare (Medikids)	Percent of population < 5	2008-10	3	565	2.1%	2.6%
Potentially Avoidable Hospitalizations						
Asthma hospitalizations ages 1-5	Per 100,000 population 1-5	2008-10	3	227	835.1	877.8
Immunizations						
Two-year olds fully immunized[10]	Percent of 2-yr olds	2010			81.6%	81.1%
Kindergarten children fully immunized	Percent of KG students	2010	3	5,663	94.8%	91.3%
Early Learning						
Children in School Readiness programs (subsidized child care)	Per 1,000 population < 13	2007-09	3	6,444	86.7	82.6
Children participating in voluntary pre-K programs	Percent of 4-yr olds	2009	1	4,582	84.4%	68.1%
Licensed child care centers and homes	Per 1,000 population < 13	2010	4	139	1.9	3.0
Children ages 3-5 with disabilities receiving pre-K services	Per 1,000 population 3-5	2006-08	1	833	51.6	30.3
Health and Safety						
WIC children 2 and older who are overweight or at risk of overweight	Percent of WIC children > 1	2010	1		25.9%	29.5%
Overall cancer incidence rate ages 1-5	Per 100,000 population 1-5	2006-08	3	7	26.4	22.3
Injuries and Injury-related Deaths						
Unintentional injury deaths ages 1-5	Per 100,000 population 1-5	2008-10	3	4	14.7	10.9
Hospitalizations ages 1-5 for all non fatal unintentional injuries	Per 100,000 population 1-5	2008-10	1	44	160.9	230.2
...Near drownings	Per 100,000 population 1-5	2008-10	3	4	14.7	16.5
...Traumatic brain injuries	Per 100,000 population 1-5	2008-10	1	6	20.9	43.3
Hospital/ER treated non fatal unintentional poisonings ages 1-5[8]	Per 100,000 population 1-5	2008-10	1	107	393.0	402.8
...Unintentional falls	Per 100,000 population 1-5	2008-10	3	1,306	4810.5	4329.4
...Motor vehicle related injuries	Per 100,000 population 1-5	2008-10	2	123	453.2	407.3
Child passengers ages 1-5 injured or killed in motor vehicle crashes[9]	Per 100,000 population 1-5	2008-10	2	78	287.4	323.4

Notes Population - Rates calculated using July 1 population estimates from the Florida Legislature, Office of Economic and Demographic Research. The population data for 2001-2010, along with rates affected by the population data, has been updated on Florida CHARTS. Following a census, it is customary to revise population projections for the intercensal years based on information from the latest census. Revising the population data from what was predicted to actual estimates ensures accurate accounting of the racial, ethnic, and gender distribution of the population. These changes affect the population data and rates calculated for your community.

Year - Time periods include single calendar years (ex. 2006) and three-year averages (ex. 2004-06).

Quartiles - Quartiles in this report allow you to compare health data from one county to another in the state. Quartiles are calculated by ordering a rate from most favorable to least favorable by county and dividing the list into 4 equal-size groups. In this report, a low quartile number (1) always represents more favorable health situations while fours (4) represent less favorable situations. Blanks in this column indicate that not enough data was available to calcuate a quartile or that a quartile calculation was not appropriate (i.e. population counts).

Counts - Counts for indicators displaying a 3-year rate are an average count of events over 3 years, NOT a sum. Blank spaces in this column indicate that no count is available for the indicator. A count of "<2" indicates an average of less than 2 events per year over a 3 year period.

Rates - Rates are frequently used when numbers are too small to use percent (per 100). For example, Florida's birth rate of 4.8 per 1000 females over age 35 would be the same as saying that 0.48% of females over age 35 had babies. Rates are typically expressed per 1000, per 10,000 or per 100,000, depending on how rare an event is. Rates based on fewer than 5 events over a 3 year period are marked as unstable (U). When the rates are based on only a few cases or deaths, it is almost impossible to distinguish random fluctuation from true changes in the underlying risk of disease or injury. Therefore comparisons over time or between communities that are based on unstable rates can lead to erroneous conclusions about differences in risk which may or may not be valid.

 Indicates that there is no data for the specified cell.

[1]The Census Bureau defines a linguistically isolated household as one in which no one 14 years old and over speaks only English or speaks a non-English language and speaks English "very well". In other words, all members of the household 14 years old and over have at least some difficulty with English.

[2]Emergency Medicaid covers deliveries of pregnant aliens (non-US citizens).

[3]Includes women with reported cases of chlamyida, gonorrhea, and infectious syphilis.

[4]Underweight = BMI of 18.5 or less.

[5]Overweight = BMI between 25.0 and 29.9.

[6]Obese = BMI of 30 or more.

[7]May underestimate actual percent of births paid for by Medicaid.

[8]Hospital/ER treated includes both hospital inpatient and Emergency Department treatment.

[9]Event count includes crashes in Florida, regardless of residence of the driver. Denominator is Florida resident population.

[10]Rate not available for all counties.

School-aged Child and Adolescent Health Profile

http://www.floridacharts.com/charts/AdolProfile.aspx?county=5&profileyear=2010

School-aged Child and Adolescent Profile, Brevard County						
Measure	Rate Type	Year(s)	County Quartile 1=most favorable 4=least favorable	County Number	County Rate	State Comparison
Socio-Demographic Characteristics						
Population Data[1]						
Total population 5-11	Count	2010		40,245		1,585,948
White	Count	2010		33,212		1,179,523
Black	Count	2010		5,535		345,569
Hispanic	Count	2010		4,446		428,745
Non-Hispanic	Count	2010		35,799		1,157,203
Total Population 12-18	Count	2010		46,234		1,637,260
White	Count	2010		38,118		1,221,059
Black	Count	2010		6,390		354,014
Hispanic	Count	2010		4,795		410,727
Non-Hispanic	Count	2010		41,439		1,226,533
Socio-Economic Data						
Median income (in dollars)	Dollars	2006-10	1	$49,523		$47,661
Residents below 100% poverty level	Percent	2010	1		9.5%	12.5%
Unemployment rate	Percent	2010	3		11.5%	11.5%
Population over 25 without high school diploma or equivalency	Percent	2006-10	1		9.4%	14.7%
Percent of households where little English is spoken (linguistically isolated)[2]	Percent	2006-10	2		1.6%	7.2%
Percent of students eligible for free/reduced lunch						
Elementary school	Percent	2009-10(SY)	1		47.7%	59.0%
Middle school	Percent	2009-10(SY)	1		39.6%	54.4%
Modifiable Behaviors Leading to Premature Death[5]						
Insufficient Phsyical Activity						
Percent of students without sufficient vigorous physical activity						
Middle school	Percent	2010	2		25.6%	30.7%
High school	Percent	2010	2		36.5%	39.1%
Overweight						
Percent of students reporting BMI at or above 95th percentile						
Middle school	Percent	2010	1		10.1%	11.7%
High school	Percent	2010	2		11.1%	11.5%

School-aged Child and Adolescent Profile, Brevard County						
Measure	Rate Type	Year(s)	County Quartile 1=most favorable 4=least favorable	County Number	County Rate	State Comparison
Modifiable Behaviors Leading to Premature Death (continued)						
Tobacco Use						
Percent of students smoking cigarettes in the past 30 days						
Middle school	Percent	2010	2		5.4%	4.9%
High school	Percent	2010	2		14.0%	13.1%
High Risk Behaviors						
Sexual Activity						
Births to teenage mothers per 1,000 females (3-year rate)						
15-19	Per 1,000	2008-10	1	464	27.5	37.0
15-17	Per 1,000	2008-10	1	128	12.1	17.8
18-19	Per 1,000	2008-10	1	335	54.1	66.1
Percent of repeat births to teenage mothers (3-year rate)						
15-19	Percent	2008-10	2	76	16.5%	18.4%
15-17	Percent	2008-10	2	8	6.7%	9.5%
18-19	Percent	2008-10	2	52	15.7%	16.8%
Reported new HIV cases ages 13-19 (3-Year Rate)[4]	Per 100,000	2008-10		<10		14.7
Reported STD cases ages 15-19 (3-Year Rate)	Per 100,000	2008-10	2	722	2096.1	2539.3
Substance Abuse						
Percent of students who used alcohol in past 30 days						
Middle school	Percent	2010	2		15.4%	16.8%
High school	Percent	2010	2		36.9%	38.0%
Percent of students reporting binge drinking						
Middle school	Percent	2010	1		6.2%	6.9%
High school	Percent	2010	1		18.0%	19.6%
Percent of students using marijuana/hashish in past 30 days						
Middle school	Percent	2010	2		5.1%	5.7%
High school	Percent	2010	3		19.6%	18.6%

School-aged Child and Adolescent Profile, Brevard County						
Measure	Rate Type	Year(s)	County Quartile 1=most favorable 4=least favorable	County Number	County Rate	State Comparison
Injuries and Violence (3-Year rates)						
Licensed drivers in motor vehicle crashes per 1,000 licensed drivers						
15-18	Per 1,000	2010	2		24.7	13.9
19-21	Per 1,000	2010	2		25.9	15.6
Child Passengers injured/killed in motor vehicle crashes per 100,000 pop.						
5-11	Per 100,000	2008-10	2	120	292.7	364.8
12-18	Per 100,000	2008-10	1	230	488.1	571.9
Motor vehicle deaths per 100,000 population						
5-11	Per 100,000	2008-10	3	<2	0.8(u)	1.9
12-18	Per 100,000	2008-10	2	3	7.8	9.6
19-21	Per 100,000	2008-10	1	2	12.4	28.1
Non-fatal motor vehicle related hospitalizations per 100,000 pop. (MV occupants only)						
5-11	Per 100,000	2008-10	1	2	6.5	12.3
12-18	Per 100,000	2008-10	2	15	31.8	31.4
19-21	Per 100,000	2008-10	3	22	116.9	102.8
Head injury deaths per 100,000 population						
5-11	Per 100,000	2008-10	1	<2	0.0(u)	1.4
12-18	Per 100,000	2008-10	3	4	8.5	7.5
19-21	Per 100,000	2008-10	2	3	17.7	21.2
Non-fatal head injury hospitalizations per 100,000 population						
5-11	Per 100,000	2008-10	1	4	11.3	18.4
12-18	Per 100,000	2008-10	2	19	41.7	43.4
19-21	Per 100,000	2008-10	3	16	86.8	69.8
Other unintentional injury deaths per 100,000 population						
5-11	Per 100,000	2008-10	3	<2	0.8(u)	1.4
12-18	Per 100,000	2008-10	3	4	8.5	4.9
19-21	Per 100,000	2008-10	3	3	19.5	18.2

School-aged Child and Adolescent Profile, Brevard County						
Measure	Rate Type	Year(s)	County Quartile 1=most favorable 4=least favorable	County Number	County Rate	State Comparison
Injuries and Violence (continued)						
Other non-fatal unintentional injury hospitalizations per 100,000 pop.						
5-11	Per 100,000	2008-10	1	25	62.4	83.5
12-18	Per 100,000	2008-10	2	50	105.9	119.2
19-21	Per 100,000	2008-10	3	31	166.6	151.5
Violent acts in school per 1,000 students grades K-12[5]	Per 1,000	2009-10(SY)	2	101	1.4	2.8
Homicide deaths per 100,000 population						
5-11	Per 100,000	2008-10	1	<2	0.0(u)	0.6
12-18	Per 100,000	2008-10	4	2	4.9	5.3
19-21	Per 100,000	2008-10	3	2	14.2	18.5
Social-emotional Development						
Mental Health						
Non-fatal hospitalizations for self-inflicted injuries per 100,000 pop. (3-yr rate)						
12-18	Per 100,000	2008-10	3	22	46.6	46.2
19-21	Per 100,000	2008-10	3	13	69.1	54.8
Non-fatal hospitalizations for eating disorders per 100,000 pop. (3-yr rate)						
12-18	Per 100,000	2008-10	3	4	8.5	9.1
19-21	Per 100,000	2008-10	2	<2	5.3(u)	7.0
Suicide deaths per 100,000 population (3-year rate)						
12-18	Per 100,000	2008-10	4	2	5.7	3.4
19-21	Per 100,000	2008-10	3	3	15.9	10.4
Percent of emotionally handicapped children in schools grades K-12	Percent	2009-10(SY)	2	682	0.9%	1.0%
Referrals to Department of Juvenile Justice per 10,000 pop. 10-17	Per 10,000	2008-10	3	3,387	632.5	659.2
Learning Environment						
Percentage of students absent 21+ days						
K-12 Students	Percent	2009-10(SY)	1		5.5%	9.9%
Percent of children not promoted						
Elementary school	Percent	2009-10(SY)	4	1,745	5.4%	3.3%
Middle school	Percent	2009-10(SY)	4	734	4.5%	2.6%

School-aged Child and Adolescent Profile, Brevard County						
Measure	Rate Type	Year(s)	County Quartile 1=most favorable 4=least favorable	County Number	County Rate	State Comparison
Social-emotional Development						
Learning Environment						
High school graduation rate[6]	Percent	2009-10(SY)	1		95.8%	80.7%
Out of school suspensions per 1,000 students						
Middle school	Per 1,000	2009-10(SY)	2	2,553	156.8	149.1
High school	Per 1,000	2009-10(SY)	4	4,187	188.9	123.2
Percent of students feeling safe at school						
Middle school	Percent	2010	4		85.1%	76.3%
High school	Percent	2010	3		82.4%	76.7%
Percent of students ready for school at kindergarten entry	Percent	2009	3		89.3%	88.5%
Social Environment						
Children in foster care per 1,000 population						
5-11	Per 1,000	2010	1	81	2.0	3.3
12-17	Per 1,000	2010	3	178	4.5	4.6
Children 5-11 experiencing child abuse per 1,000 pop. 5-11	Per 1,000	2008-10	3	637	15.5	10.5
Children 5-11 experiencing sexual violence per 1,000 pop. 5-11	Per 1,000	2008-10	1	26	0.6	0.6
Access to Care						
Potentially Avoidable Hospitalizations[7]						
Asthma hospitalizations per 100,000 population (3-year rate)						
5-11	Per 100,000	2008-10	2	135	330.0	411.9
12-18	Per 100,000	2008-10	2	115	243.7	330.9
Percent of students who report having asthma						
Middle school	Percent	2010	3		21.5%	18.0%
High school	Percent	2010	3		19.7%	18.7%
Diabetes hospitalizations per 100,000 population (3-year rate)						
5-11	Per 100,000	2008-10	3	20	49.5	44.2
12-18	Per 100,000	2008-10	3	62	132.8	125.0
Availability of Services						
Nurse-student ratio in schools grades K-12[8]	Ratio	2009-10(SY)			1:5,950	1:2,536

School-aged Child and Adolescent Profile Data Sources

Socio-Demographic Charactersitics	Data Source	Link
Population	The Florida Legislature, Office of Economic and Demographic Research	http://www.edr.state.fl.us/
Median income (in dollars)	US Census Bureau	http://factfinder.census.gov/
Residents below 100% poverty	FL DOH, Public Health Dental Program	
Unemployment rate	US Bureau of Labor Statistics	http://www.bls.gov/lau/home.htm
Population over 25 without high school diploma or equivalency	US Census Bureau	http://factfinder.census.gov/
Households that are linguistically isolated	US Census Bureau	http://factfinder.census.gov/
Students eligible for free/reduced lunch	FL DOE, Education Information and Accountability Services (EIAS)	http://www.fldoe.org/eias/eiaspubs/pdf/frplunch.pdf
Modifiable Behaviors Leading to Premature Death	**Data Source**	**Link**
Physical Activity, BMI, and smoking	FL DOH, Florida Youth Tobacco Survey (FYTS)	http://www.doh.state.fl.us/Disease_ctrl/epi/Chronic_Disease/FYTS/Intro.htm
High Risk Behaviors	**Data Source**	**Link**
Births and repeat births to teen mothers	FL DOH, Office of Vital Statistics	
HIV data	Florida DOH, Bureau of HIV/AIDS	
STD data	Florida DOH, Bureau of STD Prevention and Control	
Alcohol, binge drinking, and marijuana/hashish use	FL DOH, Florida Youth Substance Abuse Survey (FYSAS)	http://www.dcf.state.fl.us/mentalhealth/publications/fysas/
Injuries and Violence	**Data Source**	**Link**
Child passengers injured or killed in motor vehicle accidents	Florida Department of Highway Safety and Motor Vehicles	http://www.hsmv.state.fl.us/reports/crash_facts.html
Licensed drivers in crashes	Florida Department of Highway Safety and Motor Vehicles	http://www.hsmv.state.fl.us/reports/crash_facts.html
Deaths	FL DOH, Office of Vital Statistics	
Hospitalizations	Florida Agency for Health Care Administration	
Violent acts in schools	FL DOE, Office of Safe Schools	http://www.fldoe.org/safeschools/discipline.asp
Social-Emotional Development	**Data Source**	**Link**
Percent of emotionally handicapped children in schools grades K-12	FL DOE	http://www.fldoe.org/eias/eiaspubs/pdf/esemem.pdf
Referrals to Department of Juvenile Justice	Florida Department of Juvenile Justice	http://www.djj.state.fl.us/research/pam/index.html
Absenteeism (21+ days absent)	FL DOE, Florida School Indicators Report	http://data.fldoe.org/fsir/
Children not promoted	FL DOE, Education Information and Accountability Services (EIAS)	http://www.fldoe.org/eias/eiaspubs/pdf/nonpromotions.pdf
High school graduation rate	FL DOE, Education Information and Accountability Services (EIAS)	http://www.fldoe.org/eias/eiaspubs/pdf/gradrate.pdf
Out of school suspensions	FL DOE, Education Information and Accountability Services (EIAS)	http://www.fldoe.org/eias/eiaspubs/pdf/discipline.pdf
Percent of students feeling safe at school	FL DOH, Florida Youth Substance Abuse Survey (FYSAS)	http://www.dcf.state.fl.us/mentalhealth/publications/fysas/
School readiness at kindergarten entry	FL DOE, Office of Early Learning	http://www.fldoe.org/asp/srus/
Children in foster care	FL DCF	http://www.dcf.state.fl.us/publications/docs/quickfacts.pdf
Children experiencing child abuse/sexual violence	FL DCF	http://www.dcf.state.fl.us/abuse/pubs.shtml
Access to Care	**Data Source**	**Link**
Hospitalizations	Florida Agency for Health Care Administration	
Students with known asthma	FL DOH, Florida Youth Tobacco Survey (FYTS)	http://www.doh.state.fl.us/Disease_ctrl/epi/Chronic_Disease/FYTS/Intro.htm
Nurse-student ratio in schools grades K-12	FL DOH, School Health Services Program	http://www.doh.state.fl.us/Family/School/reports/05-06_county_data_sheets.pdf

Abbreviations
FL DOH = Florida Department of Health
FL DCF = Florida Department of Children and Families
FL DOE = Florida Department of Education

2010 Florida Youth Substance Abuse Survey

http://www.dcf.state.fl.us/programs/samh/publications/fysas/

2010 Florida Youth Substance Abuse Survey

Brevard County Report

Florida Youth Substance Abuse Survey (FYSAS)

The Florida Youth Substance Abuse Survey is a collaborative effort between the Florida departments of Health, Education, Children and Families, Juvenile Justice, and the Governor's Office of Drug Control. It is based on the "Communities That Care" survey, assessing risk and protective factors for substance abuse, in addition to substance abuse prevalence. The survey was first administered to Florida's middle and high school students during the 1999-2000 school year, and is repeated in the spring, annually. In the spring of even years, the survey is administered simultaneously with the **Florida Youth Tobacco Survey**, sampling enough students to generate data applicable at the county and DCF district level. In odd years the Youth Risk Behavior Survey and the Youth Physical Activity and Nutrition Survey are also added. All surveys are administered to a statewide sample of students.

Table 1. Major demographic characteristics of surveyed Brevard County youth and Florida Statewide 2010 youth

	Brevard County		Florida Statewide 2010	
	N	%	N	%
Sex				
Female	984	55.5	35,119	48.2
Male	767	43.3	36,540	50.2
Race/Ethnic group				
African American	268	15.1	12,829	17.7
American Indian	20	1.1	812	1.1
Asian	25	1.4	1,667	2.3
Hispanic/Latino	168	9.5	16,990	23.5
Native Hawaiian/Pacific Islander	6	0.3	314	0.4
Other/Multiple	277	15.6	10,689	14.8
White, non-Hispanic	999	56.3	29,034	40.1
Age				
10	2	0.1	102	0.1
11	73	4.1	2,655	3.6
12	296	16.7	8,828	12.1
13	289	16.3	10,495	14.4
14	253	14.3	10,640	14.6
15	244	13.8	11,346	15.6
16	254	14.3	11,220	15.4
17	204	11.5	10,069	13.8
18	129	7.3	6,339	8.7
19 or older	24	1.4	844	1.2
Grade				
6th	408	23.0	10,458	14.4
7th	244	13.8	10,655	14.6
8th	259	14.6	10,428	14.3
9th	255	14.4	11,566	15.9
10th	231	13.0	10,486	14.4
11th	204	11.5	10,131	13.9
12th	172	9.7	9,072	12.5
Overall Middle School	911	51.4	31,541	43,3
Overall High School	862	48.6	41,256	56.7
Total	**1,773**	**100.0**	**72,797**	**100.0**

Note: Some categories do not sum to 100% of the total due to missing values (e.g., not all survey questions were answered). In addition, rounding can produce totals that do not equal 100%. "N" represents the number of valid cases. In this table, county data are unweighted while statewide data are weighted.

Table 2. Percentages of Brevard County youth and Florida Statewide youth who reported having used various drugs in their lifetimes

	Brevard County							Florida Statewide 2010						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
Alcohol	35.4	65.8	56.3	49.5	34.5	64.8	52.8	35.3	63.9	53.0	50.2	35.9	63.4	51.5
Cigarettes	17.7	35.2	30.9	24.9	15.4	36.1	27.8	16.6	33.0	25.4	26.5	16.0	32.6	25.9
Marijuana or Hashish	11.1	38.4	26.9	26.9	8.7	37.9	26.9	10.5	33.8	22.0	25.5	10.5	33.5	23.8
Inhalants	11.3	9.3	11.0	9.4	11.5	8.9	10.2	12.5	8.0	11.0	8.9	12.4	8.3	10.0
Club Drugs	1.3	5.5	3.2	4.3	1.3	5.0	3.7	1.7	5.2	3.5	3.9	1.7	5.0	3.7
LSD, PCP or Mushrooms	1.8	7.0	4.3	5.3	1.2	6.4	4.8	1.9	5.4	3.2	4.7	1.9	5.2	3.9
Methamphetamine	0.7	1.9	1.3	1.4	0.7	1.6	1.4	1.3	1.3	1.2	1.3	1.2	1.3	1.3
Cocaine or Crack Cocaine	1.7	2.6	2.1	2.4	0.9	2.6	2.2	1.8	3.8	2.7	3.1	1.7	3.6	2.9
Heroin	0.9	1.5	1.1	1.4	0.7	1.2	1.2	0.9	1.1	1.0	1.1	0.9	1.1	1.0
Depressants	3.4	11.0	8.0	7.4	2.3	10.9	7.8	2.8	8.2	6.5	5.2	2.8	7.9	5.8
Prescription Pain Relievers	4.4	14.2	11.3	8.7	3.9	13.4	10.0	4.4	9.7	8.0	6.9	4.3	9.7	7.4
Prescription Amphetamines	1.5	7.5	6.1	3.9	2.2	5.0	5.0	1.6	5.2	3.9	3.3	1.6	4.9	3.6
Steroids (without a doctor's order)	0.8	0.7	0.4	1.1	0.8	0.7	0.8	0.7	0.8	0.4	1.2	0.7	0.8	0.8
Over-the-Counter Drugs	5.3	9.4	8.2	7.2	4.2	10.0	7.6	4.8	8.0	6.9	6.2	4.7	8.0	6.6
Any illicit drug	22.9	46.3	38.5	34.4	21.2	46.0	36.4	22.8	40.7	32.7	33.2	22.7	40.6	33.0
Any illicit drug other than marijuana	18.2	26.9	25.8	20.7	17.5	26.7	23.2	18.3	23.1	22.0	20.0	18.1	23.2	21.0
Alcohol only	17.5	23.8	22.0	20.3	18.0	24.2	21.1	18.7	27.0	24.8	22.2	19.3	27.0	23.4
Alcohol or any illicit drug	40.3	69.9	60.3	54.5	39.1	69.9	57.3	41.5	67.5	57.4	55.3	41.9	67.4	56.3
Any illicit drug, but no alcohol	4.9	4.0	3.9	5.0	4.4	4.9	4.4	6.3	3.8	4.5	5.3	6.1	4.1	4.9

Note: The first 14 data rows show results for alcohol, cigarettes, and other drugs. The last five data rows show results for various combinations of drugs. Ecstasy, Rohypnol, GHB and ketamine are provided as examples in the question about club drugs.

Table 3. Percentages of Brevard County youth and Florida Statewide youth who reported having used various drugs in the past 30 days

	Brevard County							Florida Statewide 2010						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
Alcohol	15.4	36.9	29.4	26.4	15.6	34.3	27.8	16.8	38.0	29.4	28.3	16.9	37.0	28.8
Binge Drinking	6.2	18.0	11.5	14.7	5.4	16.8	13.0	6.9	19.6	13.0	15.2	6.8	18.3	14.1
Cigarettes	5.9	14.2	11.8	9.7	5.2	13.5	10.7	4.5	12.1	8.1	9.5	4.3	11.5	8.8
Marijuana or Hashish	5.1	19.6	11.8	15.1	4.5	18.2	13.5	5.7	18.6	11.4	14.6	5.6	18.3	13.0
Inhalants	3.9	2.3	3.5	2.3	3.7	2.5	2.9	4.8	2.0	3.6	2.8	4.7	2.2	3.2
Club Drugs	0.6	0.9	0.2	1.3	0.2	1.3	0.7	0.6	1.7	1.1	1.4	0.6	1.7	1.3
LSD, PCP or Mushrooms	0.2	1.6	0.3	1.8	0.2	1.6	1.0	0.7	1.4	0.9	1.3	0.7	1.3	1.1
Methamphetamine	0.4	0.7	0.5	0.7	0.5	0.8	0.6	0.6	0.5	0.4	0.6	0.5	0.5	0.5
Cocaine or Crack Cocaine	0.2	0.4	0.3	0.3	0.2	0.5	0.3	0.7	0.9	0.8	0.9	0.6	0.9	0.8
Heroin	0.3	0.2	0.3	0.3	0.3	0.3	0.3	0.3	0.4	0.3	0.4	0.3	0.4	0.4
Depressants	1.5	3.7	2.9	2.7	1.4	3.4	2.8	1.1	2.7	2.3	1.7	1.1	2.7	2.0
Prescription Pain Relievers	2.5	4.3	4.5	2.5	1.9	5.1	3.5	2.2	3.4	3.1	2.7	2.1	3.6	2.9
Prescription Amphetamines	0.7	1.6	1.2	1.2	0.5	1.6	1.2	0.6	1.4	1.1	1.1	0.6	1.4	1.1
Steroids (without a doctor's order)	0.3	0.0	0.2	0.0	0.3	0.0	0.1	0.3	0.4	0.1	0.6	0.2	0.4	0.3
Over-the-Counter Drugs	1.5	3.1	3.3	1.5	1.4	3.4	2.4	2.2	2.9	2.8	2.3	2.2	2.9	2.6
Any illicit drug	10.4	24.9	19.0	18.4	9.6	24.0	18.8	11.7	22.7	17.3	18.6	11.6	22.6	18.0
Any illicit drug other than marijuana	7.3	11.1	11.3	7.7	6.8	11.5	9.5	8.5	10.0	9.8	8.8	8.5	10.0	9.3
Alcohol only	9.9	18.9	16.6	13.7	10.4	18.0	15.1	10.3	21.3	17.5	15.6	10.6	20.6	16.5
Alcohol or any illicit drug	20.0	43.3	35.4	31.5	19.7	41.3	33.4	21.8	43.6	34.4	33.7	21.9	42.8	34.1
Any illicit drug, but no alcohol	4.8	6.6	6.0	5.5	4.3	7.2	5.8	5.3	5.9	5.4	5.8	5.3	6.1	5.6

Note: The first 15 data rows show results for alcohol, cigarettes, and other drugs. The last five data rows show results for various combinations of drugs. Binge drinking is defined as having had five or more alcoholic drinks in a row in the past two weeks. Ecstasy, Rohypnol, GHB and ketamine are provided as examples in the question about club drugs.

Table 4. Lifetime trend in alcohol, tobacco and other drug use for Brevard County youth, 2000, 2002, 2004, 2006, 2008 and 2010

	2000			2002			2004			2006			2008			2010		
	Middle School	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*
Alcohol	41.1	74.6	59.1	41.0	76.3	60.0	38.0	74.4	58.1	38.8	73.7	58.9	34.5	74.3	57.2	35.4	65.8	52.8
Cigarettes	39.6	61.8	51.4	29.7	50.6	41.1	22.9	42.7	33.9	14.4	36.1	26.9	15.8	39.2	29.2	17.7	35.2	27.8
Marijuana or Hashish	17.7	48.0	33.8	14.0	41.7	28.7	13.0	35.4	25.5	9.1	33.2	23.0	8.0	33.8	22.8	11.1	38.4	26.9
Inhalants	11.4	16.4	13.9	10.0	7.7	8.8	12.2	11.6	11.8	13.3	7.8	10.2	13.7	11.5	12.5	11.3	9.3	10.2
Club Drugs	--	--	--	--	--	--	--	--	--	--	--	--	0.7	--	--	1.3	5.5	3.7
LSD, PCP or Mushrooms	--	--	--	--	--	--	--	--	--	--	--	--	1.1	--	--	1.8	7.0	4.8
Methamphetamine	2.3	13.9	8.4	3.0	3.3	3.1	4.2	2.6	3.3	2.3	0.8	1.4	0.6	2.9		0.7	1.9	1.4
Cocaine or Crack Cocaine	--	--	--	--	--	--	--	--	--	--	--	--	0.5	--	--	1.7	2.6	2.2
Heroin	1.6	7.5	4.7	1.6	1.2	1.4	1.8	0.3	0.9	0.9	1.4	1.2	0.4	1.0	0.8	0.9	1.5	1.2
Depressants	--	--	--	1.9	15.1	8.9	2.9	10.8	7.2	3.2	8.4	6.2	2.0	13.1	8.4	3.4	11.0	7.8
Prescription Pain Relievers	--	--	--	5.4	14.7	10.3	7.1	10.9	9.2	3.9	10.1	7.4	4.7	13.9	10.0	4.4	14.2	10.0
Prescription Amphetamines	--	--	--	3.5	12.9	8.5	4.3	8.9	6.8	2.3	5.6	4.2	1.1	8.9	5.6	1.5	7.5	5.0
Steroids (without a doctor's order)	2.6	5.2	4.1	2.1	1.3	1.6	1.3	0.3	0.7	0.3	0.5	0.4	0.4	1.2	0.9	0.8	0.7	0.8
Over-the-Counter Drugs	--	--	--	--	--	--	--	--	--	--	--	--	3.9	--	--	5.3	9.4	7.6
Any illicit drug	--	--	--	22.5	45.2	34.5	22.3	41.8	33.1	20.7	38.5	31.1	21.8	42.0	33.3	22.9	46.3	36.4
Any illicit drug other than marijuana	--	--	--	16.3	27.2	22.0	16.3	24.8	20.9	17.2	21.9	19.9	18.0	28.0	23.7	18.2	26.9	23.2
Alcohol only	--	--	--	23.1	32.7	28.5	19.1	35.7	28.2	21.7	36.5	30.2	20.0	34.2	28.1	17.5	23.8	21.1
Alcohol or any illicit drug	--	--	--	45.4	77.6	62.7	41.4	77.3	61.2	42.6	74.9	61.2	41.7	76.1	61.3	40.3	69.9	57.3
Any illicit drug, but no alcohol	--	--	--	4.5	1.4	2.9	3.1	3.1	3.1	3.9	1.1	2.4	7.3	2.0	4.3	4.9	4.0	4.4

Note: The first 14 data rows show results for alcohol, cigarettes, and other drugs. The last five data rows show results for various combinations of drugs. Ecstasy, Rohypnol, GHB and ketamine are provided as examples in the question about club drugs. Results for combinations of drugs are not presented for 2000 because new ATOD items were added between 2000 and 2002. The symbol "--" indicates that data are not available.

Table 5. Past-30-day trend in alcohol, tobacco and other drug use for Brevard County youth, 2000, 2002, 2004, 2006, 2008 and 2010

	2000			2002			2004			2006			2008			2010		
	Middle School	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*
Alcohol	26.7	52.3	40.2	19.9	51.4	36.8	17.2	46.7	33.5	16.6	46.4	33.9	14.7	43.8	31.4	15.4	36.9	27.8
Binge Drinking	13.4	32.9	23.6	7.3	30.2	19.6	9.0	21.0	15.7	6.4	23.4	16.1	4.0	24.1	15.5	6.2	18.0	13.0
Cigarettes	17.2	30.0	23.8	8.8	14.8	11.9	8.2	15.5	12.2	4.6	10.0	7.7	3.9	15.9	10.8	5.9	14.2	10.7
Marijuana or Hashish	11.1	28.1	19.9	7.9	20.8	14.8	7.1	19.1	13.7	5.5	13.8	10.2	3.7	17.8	11.8	5.1	19.6	13.5
Inhalants	6.6	5.8	6.1	3.1	0.8	1.9	6.0	1.9	3.6	5.7	1.5	3.3	5.6	2.1	3.6	3.9	2.3	2.9
Club Drugs	--	--	--	--	--	--	--	--	--	--	--	--	0.0	--	--	0.6	0.9	0.7
LSD, PCP or Mushrooms	--	--	--	--	--	--	--	--	--	--	--	--	0.4	--	--	0.2	1.6	1.0
Methamphetamine	1.3	6.8	4.2	1.1	0.5	0.8	0.7	1.2	1.0	1.1	0.5	0.8	0.2	1.0	0.6	0.4	0.7	0.6
Cocaine or Crack Cocaine	--	--	--	--	--	--	--	--	--	--	--	--	0.2	--	--	0.2	0.4	0.3
Heroin	0.8	2.8	1.8	0.0	0.6	0.3	0.8	0.0	0.3	0.2	0.0	0.1	0.2	0.3	0.2	0.3	0.2	0.3
Depressants	--	--	--	0.9	5.6	3.4	1.9	5.5	3.9	1.0	2.9	2.1	0.9	5.6	3.6	1.5	3.7	2.8
Prescription Pain Relievers	--	--	--	2.4	4.7	3.6	3.0	5.1	4.2	2.2	3.7	3.0	1.4	5.6	3.8	2.5	4.3	3.5
Prescription Amphetamines	--	--	--	0.7	3.7	2.3	2.6	2.8	2.7	0.8	1.5	1.2	0.5	2.3	1.5	0.7	1.6	1.2
Steroids (without a doctor's order)	1.2	0.7	0.9	0.9	0.2	0.5	0.7	0.0	0.3	0.3	0.2	0.3	0.2	0.5	0.4	0.3	0.0	0.1
Over-the-Counter Drugs	--	--	--	--	--	--	--	--	--	--	--	--	1.2	--	--	1.5	3.1	2.4
Any illicit drug	--	--	--	11.1	24.9	18.5	13.3	23.9	19.1	9.8	16.6	13.7	10.2	21.7	16.8	10.4	24.9	18.8
Any illicit drug other than marijuana	--	--	--	6.9	10.8	8.9	9.3	10.5	9.9	7.9	6.7	7.2	7.8	11.7	10.1	7.3	11.1	9.5
Alcohol only	--	--	--	13.4	27.3	21.1	9.3	26.8	19.1	10.4	33.7	24.0	9.8	25.4	18.8	9.9	18.9	15.1
Alcohol or any illicit drug	--	--	--	23.8	51.8	38.9	22.1	50.8	37.8	20.1	49.8	37.2	19.7	46.9	35.3	20.0	43.3	33.4
Any illicit drug, but no alcohol	--	--	--	4.3	0.5	2.4	5.0	4.2	4.5	3.7	3.1	3.4	5.2	3.3	4.1	4.8	6.6	5.8

Note: The first 14 data rows show results for alcohol, cigarettes, and other drugs. The last five data rows show results for various combinations of drugs. Binge drinking is defined as having had five or more alcoholic drinks in a row in the past two weeks. Ecstasy, Rohypnol, GHB and ketamine are provided as examples in the question about club drugs. Results for combinations of drugs are not presented for 2000 because new ATOD items were added between 2000 and 2002. The symbol "--" indicates that data are not available.

Table 6. Percentages of Brevard County youth and Florida Statewide youth who reported early ATOD use, perceived risk of harm, personal disapproval and peer approval

	Brevard County							Florida Statewide 2010						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
Early ATOD use														
More than a sip of alcohol	--	26.9	23.9	30.2	--	26.8	--	--	27.1	25.3	29.0	--	27.6	--
Drinking at least once a month	--	5.6	5.1	6.2	--	5.0	--	--	5.8	5.3	6.4	--	5.9	--
Cigarettes	--	17.1	15.8	18.5	--	18.0	--	--	17.1	15.9	18.3	--	17.5	--
Marijuana	--	14.0	9.9	18.1	--	14.8	--	--	11.3	8.5	13.9	--	11.4	--
Perceive great risk of harm if…														
One or more drinks every day	43.1	41.0	46.4	36.9	43.5	41.8	41.9	43.2	42.1	46.9	38.4	44.0	41.6	42.6
Smoke a pack or more every day	70.1	65.9	71.2	64.0	69.7	66.6	67.7	66.6	66.5	69.2	64.0	67.5	66.4	66.5
Smoke marijuana regularly	69.1	42.2	60.0	46.8	69.8	42.9	53.6	66.7	44.5	59.0	49.4	66.7	44.8	54.1
Try marijuana once or twice	39.1	18.6	30.3	24.2	39.1	19.6	27.3	39.1	21.2	30.8	27.2	38.3	21.5	28.9
Think it would be wrong for someone their age to…														
Smoke cigarettes	90.5	71.3	79.4	79.6	91.0	73.6	79.5	90.1	75.0	82.1	80.9	90.1	77.1	81.5
Drink alcohol regularly	82.2	51.0	65.4	63.2	82.3	52.4	64.3	81.4	55.5	67.1	66.4	80.8	56.3	66.7
Smoke marijuana	88.3	64.8	77.5	71.9	89.3	65.3	74.7	88.5	67.8	79.4	74.2	88.4	68.2	76.8
Use other illicit drugs	96.7	93.3	95.8	93.6	97.5	92.8	94.7	96.2	93.0	95.4	93.4	96.3	93.0	94.4
Good chance of being seen as cool if…														
Drink alcohol regularly	8.8	17.9	13.9	14.5	9.7	17.3	14.1	9.1	16.0	14.3	11.8	9.3	15.8	13.0
Smoke cigarettes	6.9	5.0	6.5	5.2	7.3	4.7	5.8	7.0	6.2	6.8	6.2	7.0	6.1	6.5
Smoke marijuana	9.5	19.7	15.9	15.1	9.7	19.9	15.4	11.9	18.0	15.6	15.0	12.1	18.3	15.4

Note: Early ATOD use is defined as the percentage of high school students who started using at age 13 or younger. The symbol "--" indicates that data are not available.

Table 7. Trends in early ATOD use and attitudes toward substance use for Brevard County youth, 2000, 2002, 2004, 2006, 2008 and 2010

	2000			2002			2004			2006			2008			2010		
	Middle School	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*
Early ATOD use																		
Try alcohol	--	50.1	--	--	37.0	--	--	35.7	--	--	32.6	--	--	32.0	--	--	26.9	--
Regular alcohol use	--	13.5	--	--	6.1	--	--	6.3	--	--	4.0	--	--	5.5	--	--	5.6	--
Cigarettes	--	47.4	--	--	32.8	--	--	34.5	--	--	22.4	--	--	22.9	--	--	17.1	--
Marijuana	--	26.2	--	--	15.7	--	--	16.0	--	--	14.1	--	--	12.3	--	--	14.0	--
Great risk of harm																		
Daily alcohol use	33.6	41.4	37.6	37.3	28.5	32.4	39.2	33.0	36.0	43.3	36.2	39.2	44.5	37.8	40.7	43.1	41.0	41.9
Daily cigarette use	58.9	66.6	62.9	60.9	64.5	62.9	69.3	66.0	67.6	74.4	68.1	70.9	73.3	70.8	71.9	70.1	65.9	67.7
Regular marijuana use	64.1	48.9	56.0	66.7	49.2	57.3	71.9	49.2	59.4	77.5	52.1	62.9	77.2	50.0	61.7	69.1	42.2	53.6
Try marijuana	32.4	19.7	25.7	33.3	14.0	23.1	40.6	20.6	29.6	39.7	18.8	27.7	42.5	20.4	29.9	39.1	18.6	27.3
Think it wrong																		
Smoke cigarettes	79.3	54.2	66.2	85.4	67.0	75.6	89.0	65.1	75.8	88.5	68.6	77.2	92.8	67.6	78.4	90.5	71.3	79.5
Drink regularly	73.7	47.8	59.9	79.9	49.2	63.5	79.7	46.3	61.1	77.6	45.9	59.5	84.6	50.0	64.8	82.2	51.0	64.3
Smoke marijuana	84.0	61.2	72.1	88.5	69.2	78.3	89.0	68.6	77.6	89.6	75.8	81.7	93.1	70.8	80.3	88.3	64.8	74.7
Use other illicit drugs	93.4	87.2	90.2	95.1	90.3	92.6	97.5	92.3	94.6	97.7	94.5	95.9	97.8	93.3	95.3	96.7	93.3	94.7
Seen as cool																		
Drink regularly	7.8	15.8	12.0	8.8	16.2	12.7	5.3	16.3	11.3	8.4	12.5	10.7	9.6	19.3	15.2	8.8	17.9	14.1
Smoke cigarettes	9.5	7.5	8.4	8.4	4.6	6.3	4.3	6.5	5.5	7.1	2.6	4.5	7.7	4.4	5.8	6.9	5.0	5.8
Smoke marijuana	9.9	16.1	13.0	9.9	13.8	11.9	7.2	15.6	11.9	8.2	6.5	7.2	9.6	13.3	11.7	9.5	19.7	15.4

Note: Early ATOD use is defined as the percentage of high school students who started using at age 13 or younger. The symbol "--" indicates that data are not available.

Table 8. Among high school drinkers, usual source of alcohol within the past 30 days, Brevard County youth and Florida Statewide, 2010

	Brevard County							Florida Statewide						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
Bought in a store	--	8.7	2.6	16.3	--	4.7	--	--	9.2	6.3	12.5	--	8.3	--
Bought in a restaurant, bar, or club	--	1.3	1.3	1.4	--	1.9	--	--	2.4	2.3	2.4	--	2.2	--
Bought at a public event	--	0.0	0.0	0.0	--	0.0	--	--	0.4	0.3	0.6	--	0.3	--
Someone bought it for me	--	24.6	25.6	23.1	--	20.0	--	--	19.3	16.5	22.1	--	18.3	--
Someone gave it to me	--	42.4	47.9	36.1	--	46.0	--	--	41.5	47.8	35.1	--	42.8	--
Took it from a store	--	0.3	0.0	0.6	--	0.4	--	--	0.6	0.4	0.9	--	0.6	--
Took it from a family member	--	5.3	5.2	5.5	--	7.7	--	--	7.5	7.8	7.2	--	8.5	--
Some other way	--	17.5	17.5	17.1	--	19.2	--	--	19.1	18.7	19.2	--	19.0	--

Note: The symbol "--" indicates that data are not available.

Table 9. Among high school drinkers, usual drinking location within the past 30 days, Brevard County youth and Florida Statewide, 2010

	Brevard County							Florida Statewide						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
My home	--	22.5	17.5	28.8	--	26.1	--	--	24.6	25.1	24.3	--	25.1	--
Another person's home	--	56.9	61.7	50.9	--	50.9	--	--	48.9	50.8	47.3	--	48.9	--
Car or other vehicle	--	1.3	1.7	0.9	--	1.6	--	--	1.9	1.8	2.1	--	1.9	--
Restaurant, bar, or club	--	2.6	3.8	1.3	--	1.9	--	--	4.0	4.1	3.8	--	3.6	--
Public place	--	3.6	3.0	4.4	--	4.5	--	--	5.1	4.4	5.7	--	5.3	--
Public event	--	0.5	1.0	0.0	--	0.3	--	--	1.2	1.2	1.0	--	1.3	--
School property	--	1.5	1.5	1.4	--	2.1	--	--	1.1	0.6	1.7	--	1.2	--
Some other place	--	10.9	9.8	12.3	--	12.6	--	--	13.2	12.1	14.1	--	12.8	--

Note: The symbol "--" indicates that data are not available.

Table 10. Among high school drinkers, number of drinks usually consumed per day, on the days students drank in the past 30 days, Brevard County youth and Florida Statewide, 2010

	Brevard County							Florida Statewide						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
1	--	22.4	25.0	19.4	--	22.9	--	--	23.5	26.8	20.0	--	24.0	--
2	--	22.6	29.1	14.6	--	21.8	--	--	21.2	23.5	18.9	--	21.8	--
3	--	15.1	16.2	13.8	--	15.2	--	--	16.8	18.0	15.5	--	17.0	--
4	--	7.6	7.3	7.6	--	9.8	--	--	9.9	10.8	8.9	--	9.7	--
5 or more	--	32.4	22.4	44.6	--	30.3	--	--	28.6	20.9	36.8	--	27.5	--

Note: The symbol "--" indicates that data are not available.

Table 11. Percentages of Brevard County youth and Florida Statewide youth who reported engaging in delinquent behavior within the past 12 months

	Brevard County							Florida Statewide 2010						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
Carrying a handgun	2.5	5.7	1.5	7.2	2.0	6.6	4.3	4.6	5.1	1.9	7.8	4.2	5.2	4.9
Selling drugs	2.1	9.5	4.2	8.7	1.7	9.5	6.4	3.3	8.5	3.8	8.7	3.1	8.8	6.3
Attempting to steal a vehicle	0.9	2.1	0.8	2.5	0.5	3.0	1.6	2.1	2.4	1.4	3.1	1.9	2.5	2.2
Being arrested	4.1	4.8	4.2	4.9	3.1	5.4	4.5	4.1	5.3	3.4	6.2	3.5	5.8	4.8
Taking a handgun to school	0.1	0.8	0.1	0.9	0.3	0.8	0.5	0.8	1.1	0.4	1.6	0.7	1.2	1.0
Getting suspended	12.8	18.9	13.2	19.4	10.9	20.1	16.3	16.2	13.6	10.7	18.7	14.7	15.0	14.7
Attacking someone with intent to harm	7.1	10.4	7.9	10.0	6.7	11.2	9.0	10.8	10.5	8.9	12.3	10.2	11.1	10.6
Being drunk or high at school	6.9	19.3	14.0	13.9	5.1	19.4	14.1	7.4	17.0	11.8	14.0	7.3	17.0	12.9

Table 12. Trends in delinquent behaviors for Brevard County youth, 2000, 2002, 2004, 2006, 2008 and 2010

	2000			2002			2004			2006			2008			2010		
	Middle School	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*	*Middle School*	*High School*	*Total*
Carrying a handgun	2.9	7.9	5.4	3.3	5.5	4.6	2.1	3.8	3.0	2.9	3.5	3.2	2.6	5.2	4.1	2.5	5.7	4.3
Selling drugs	4.4	17.4	11.1	3.3	12.8	8.4	3.6	9.6	6.9	2.9	5.8	4.6	1.2	8.7	5.5	2.1	9.5	6.4
Attempting to steal a vehicle	4.0	8.3	6.3	1.5	2.2	1.9	2.5	2.2	2.3	2.5	2.2	2.3	2.4	1.2	1.7	0.9	2.1	1.6
Being arrested	6.3	14.7	10.6	5.0	7.4	6.3	5.0	5.0	5.0	1.8	4.8	3.5	3.0	6.1	4.8	4.1	4.8	4.5
Taking a handgun to school	0.8	2.8	1.8	1.5	0.5	1.0	0.7	0.9	0.8	0.3	0.5	0.4	0.2	0.5	0.4	0.1	0.8	0.5
Getting suspended	16.7	19.6	18.3	14.0	11.8	13.1	14.5	16.7	15.7	8.8	11.2	10.2	13.0	16.7	15.2	12.8	18.9	16.3
Attacking someone with intent to harm	18.0	23.1	20.6	8.6	12.1	10.7	11.1	13.2	12.2	10.5	10.7	10.5	10.1	10.4	10.3	7.1	10.4	9.0
Being drunk or high at school	11.9	26.0	19.2	9.0	20.5	15.2	7.5	19.1	13.8	5.8	12.7	10.0	4.0	16.8	11.3	6.9	19.3	14.1

Table 13. Percentages of Brevard County youth and Florida Statewide youth who reported gambling and arguing about gambling in the past 12 months

	Brevard County							Florida Statewide 2010						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
Gambling	52.9	54.3	43.8	64.0	51.9	55.3	53.7	54.8	50.5	42.1	62.2	54.5	51.4	52.4
Arguing about gambling	16.8	12.4	10.0	18.7	16.4	13.4	14.3	15.9	12.1	9.8	17.5	15.5	12.6	13.7

Table 14. Percentages of Brevard County youth and Florida Statewide youth who reported involvement in bullying behavior

	Brevard County							Florida Statewide 2010						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
Bullying caused worry	31.0	18.6	30.0	17.8	31.9	18.4	23.9	29.8	17.8	28.0	18.2	29.6	18.1	23.0
Skipped school because of bullying	4.9	4.0	6.4	2.4	5.0	4.0	4.4	3.7	3.9	4.9	2.8	3.7	3.7	3.8
Was kicked or shoved in past 30 days	20.3	8.3	11.6	15.2	19.9	8.6	13.4	18.4	8.2	10.8	14.3	18.1	8.6	12.6
Was taunted or teased in past 30 days	38.0	23.9	31.5	28.4	38.2	26.2	29.9	36.6	21.4	28.5	27.4	36.1	22.4	28.0
Was victim of cyber bullying in past 30 days	10.2	8.2	12.8	5.2	10.5	8.3	9.0	8.6	9.3	12.3	5.8	8.5	9.5	9.0
Physically bullied others in past 30 days	10.8	7.2	7.3	10.1	10.1	8.5	8.7	13.6	8.5	8.7	12.6	12.9	9.2	10.7
Verbally bullied others in past 30 days	23.0	16.6	17.1	21.6	21.8	19.7	19.3	23.2	16.6	18.1	20.7	22.4	17.8	19.5
Cyber bullied others in past 30 days	5.3	5.2	6.4	4.0	5.0	5.8	5.2	5.7	6.3	7.2	4.9	5.5	6.5	6.0

Table 15. Percentages of Brevard County youth and Florida Statewide high school students who reported being physically or verbally bullied in the past year, by location

	Brevard County							Florida Statewide						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
Classroom (while teacher was out)	--	4.0	3.3	4.7	--	3.6	--	--	3.6	3.6	3.6	--	3.7	--
Classroom (while teacher was in)	--	9.6	10.6	8.3	--	10.3	--	--	6.6	7.2	6.0	--	6.8	--
Cafeteria	--	5.1	7.5	2.6	--	5.1	--	--	4.2	4.8	3.7	--	4.3	--
Restroom	--	0.9	1.1	0.6	--	0.9	--	--	1.4	1.3	1.5	--	1.3	--
Hallways or stairwells	--	6.8	8.1	5.0	--	5.8	--	--	5.4	6.7	4.2	--	5.6	--
Gym or locker room	--	2.7	2.3	3.1	--	2.1	--	--	2.5	1.8	3.2	--	2.4	--
Somewhere else in school	--	2.4	3.1	1.8	--	2.7	--	--	2.5	2.7	2.2	--	2.6	--
Playground or athletic field	--	1.3	1.4	1.2	--	1.2	--	--	1.5	1.2	1.7	--	1.4	--
Parking lot or car pick-up area	--	0.6	0.8	0.3	--	0.3	--	--	1.2	1.3	1.1	--	1.2	--
Bus stop	--	1.3	1.3	1.2	--	1.2	--	--	1.4	1.5	1.3	--	1.4	--
On school property outside of building	--	1.2	1.5	0.9	--	1.3	--	--	1.2	1.2	1.2	--	1.1	--
School bus	--	2.3	2.8	1.8	--	2.5	--	--	2.2	2.4	2.0	--	2.3	--
After-school activities	--	2.1	1.9	2.2	--	1.6	--	--	1.6	1.6	1.6	--	1.7	--
Field trips or off-campus events	--	0.4	0.9	0.0	--	0.3	--	--	0.6	0.6	0.7	--	0.6	--
On the way to or from school	--	1.1	0.9	1.1	--	1.1	--	--	1.3	1.4	1.1	--	1.3	--
Online, phone, or text message	--	6.8	11.3	2.2	--	6.4	--	--	5.8	9.3	2.2	--	6.1	--
Other non-school locations	--	7.6	9.5	5.4	--	7.4	--	--	5.9	7.6	4.2	--	6.2	--

Note: The symbol "--" indicates that data are not available.

Table 16. Percentages of Brevard County youth and Florida Statewide high school students who reported having seen delinquent behavior among gang members at school this school year

	Brevard County							Florida Statewide						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
Fighting	--	35.1	39.6	30.5	--	35.6	--	--	44.6	46.6	42.6	--	45.8	--
Stealing or robbing	--	27.0	25.6	28.6	--	28.0	--	--	28.0	26.2	29.7	--	28.5	--
Vandalism (including graffiti)	--	21.0	21.2	20.9	--	22.0	--	--	30.0	28.6	31.2	--	30.4	--
Selling drugs	--	28.3	26.4	30.4	--	29.8	--	--	33.6	31.5	35.6	--	34.1	--
Carrying weapons	--	16.4	16.7	16.1	--	16.7	--	--	19.5	18.1	20.7	--	19.5	--

Note: The symbol "--" indicates that data are not available.

Table 17. Reasons for joining a gang, among Brevard County youth and Florida Statewide high school students

	Brevard County							Florida Statewide						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
Never belonged to a gang	--	87.9	92.3	83.4	--	87.5	--	--	84.7	89.4	80.0	--	85.0	--
Fun and excitement	--	3.3	1.8	4.9	--	3.4	--	--	2.0	1.3	2.7	--	2.1	--
Protection	--	2.1	2.0	2.3	--	2.1	--	--	1.4	0.9	1.9	--	1.4	--
Friend or relative in a gang	--	2.3	2.3	2.4	--	2.2	--	--	1.8	1.3	2.3	--	1.8	--
Forced to join	--	0.2	0.1	0.3	--	0.1	--	--	0.4	0.3	0.6	--	0.4	--
To get respect	--	1.5	0.5	2.4	--	1.4	--	--	1.4	0.7	2.1	--	1.4	--
Money	--	1.2	0.3	2.1	--	1.2	--	--	1.3	0.6	2.1	--	1.4	--
To fit in better	--	0.6	0.0	1.3	--	0.7	--	--	0.4	0.2	0.6	--	0.4	--
Other reasons	--	3.7	2.9	4.5	--	4.1	--	--	2.2	1.3	3.2	--	2.3	--

Note: The symbol "--" indicates that data are not available.

Table 18. Percentages of Brevard County youth and Florida Statewide youth who reported participation in extracurricular activities

	Brevard County							Florida Statewide						
	Middle School	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*	*Middle School*	*High School*	*Female*	*Male*	*Ages 10-14*	*Ages 15-17*	*Total*
School Sports	29.8	45.6	38.0	39.8	29.9	46.2	38.9	35.8	39.8	34.2	41.8	35.7	40.8	38.1
Organized Sports Outside of School	49.0	26.5	32.1	39.9	49.0	27.9	36.0	44.6	25.9	29.8	38.0	43.7	26.8	34.0
School Band	19.9	9.6	12.3	15.7	19.3	10.6	14.0	15.5	6.9	10.6	10.8	15.5	7.0	10.7
School Club(s)	27.6	25.4	34.0	18.2	28.0	24.4	26.3	18.1	31.0	33.6	17.7	19.3	30.1	25.4
Community Club(s)	11.5	13.5	15.6	9.8	12.2	11.7	12.7	10.9	14.0	16.4	9.1	11.2	13.8	12.7

Table 19. Protective factor prevalence rates for Brevard County, Florida Statewide and the national normative database, 2010

Domain	Scale	Brevard County		Florida Statewide		National Norms	
		Middle School	*High School*	*Middle School*	*High School*	*Middle School*	*High School*
Community	Community Rewards for Prosocial Involvement	50	61	50	61	56	63
Family	Family Opportunities for Prosocial Involvement	57	55	55	55	59	54
	Family Rewards for Prosocial Involvement	51	53	50	53	54	55
School	School Opportunities for Prosocial Involvement	50	64	46	60	57	60
	School Rewards for Prosocial Involvement	51	66	47	59	53	58
Peer and Individual	Religiosity	45	62	50	60	56	62
Average Prevalence Rate		**51**	**60**	**50**	**58**	**56**	**59**

Note: Because risk is associated with negative behavioral outcomes, it is better to have lower risk factor scale scores, not higher. Conversely, because protective factors are associated with better student behavioral outcomes, it is better to have protective factor scale scores with high values.

Table 20. Risk factor prevalence rates for Brevard County, Florida Statewide and the national normative database, 2010

Domain	Scale	Brevard County		Florida Statewide		National Norms	
		Middle School	*High School*	*Middle School*	*High School*	*Middle School*	*High School*
Community	Community Disorganization	46	53	51	50	47	47
	Transitions and Mobility	58	64	61	63	47	46
	Laws and Norms Favorable to Drug Use	42	39	44	38	42	42
	Perceived Availability of Drugs	49	44	48	37	45	45
	Perceived Availability of Handguns	25	43	25	38	25	42
Family	Poor Family Management	41	45	48	46	44	45
	Family Conflict	41	38	42	37	42	37
	Parental Attitudes Favorable toward ATOD Use	22	42	22	38	23	41
School	Poor Academic Performance	46	44	43	46	45	48
	Lack of Commitment to School	50	51	54	51	47	46
Peer and Individual	Peer Rewards for Antisocial Behavior	45	50	46	47	40	46
	Favorable Attitudes toward Antisocial Behavior	46	47	47	41	40	46
	Favorable Attitudes toward ATOD Use	39	45	41	40	39	45
	Low Perceived Risks of Drug Use	41	53	44	49	40	46
	Early Initiation of Drug Use	36	33	35	33	41	46
Average Prevalence Rate		**42**	**46**	**43**	**44**	**40**	**45**

Note: Because risk is associated with negative behavioral outcomes, it is better to have lower risk factor scale scores, not higher. Conversely, because protective factors are associated with better student behavioral outcomes, it is better to have protective factor scale scores with high values.

Table 21. Protective factor prevalence rate trends among middle school students for Brevard County, 2000, 2002, 2004, 2006, 2008 and 2010

Domain	Scale	Brevard County					
		2000	*2002*	*2004*	*2006*	*2008*	*2010*
Community	Community Rewards for Prosocial Involvement	51	50	46	58	55	50
Family	Family Opportunities for Prosocial Involvement	52	55	66	57	53	57
	Family Rewards for Prosocial Involvement	55	50	55	57	48	51
School	School Opportunities for Prosocial Involvement	45	46	42	43	44	50
	School Rewards for Prosocial Involvement	48	47	49	48	50	51
Peer and Individual	Religiosity	39	46	47	52	53	45
Average Prevalence Rate		**48**	**49**	**51**	**53**	**51**	**51**

Note: Because risk is associated with negative behavioral outcomes, it is better to have lower risk factor scale scores, not higher. Conversely, because protective factors are associated with better student behavioral outcomes, it is better to have protective factor scale scores with high values.

Table 22. Risk factor prevalence rate trends among middle school students for Brevard County, 2000, 2002, 2004, 2006, 2008 and 2010

Domain	Scale	Brevard County					
		2000	*2002*	*2004*	*2006*	*2008*	*2010*
Community	Community Disorganization	49	42	45	39	43	46
	Transitions and Mobility	59	61	62	60	59	58
	Laws and Norms Favorable to Drug Use	48	51	43	40	42	42
	Perceived Availability of Drugs	55	53	49	44	51	49
	Perceived Availability of Handguns	29	28	26	24	29	25
Family	Poor Family Management	52	52	43	44	46	41
	Family Conflict	42	42	33	37	46	41
	Parental Attitudes Favorable toward ATOD Use	26	21	22	24	22	22
School	Poor Academic Performance	56	42	37	41	42	46
	Lack of Commitment to School	58	54	58	56	54	50
Peer and Individual	Peer Rewards for Antisocial Behavior	43	46	44	42	46	45
	Favorable Attitudes toward Antisocial Behavior	52	52	46	50	48	46
	Favorable Attitudes toward ATOD Use	47	47	43	43	39	39
	Low Perceived Risks of Drug Use	52	50	41	37	35	41
	Early Initiation of Drug Use	53	47	44	37	34	36
Average Prevalence Rate		**51**	**49**	**46**	**44**	**43**	**43**

Note: Because risk is associated with negative behavioral outcomes, it is better to have lower risk factor scale scores, not higher. Conversely, because protective factors are associated with better student behavioral outcomes, it is better to have protective factor scale scores with high values.

Table 23. Protective factor prevalence rate trends among high school students for Brevard County, 2000, 2002, 2004, 2006, 2008 and 2010

Domain	Scale	Brevard County					
		2000	*2002*	*2004*	*2006*	*2008*	*2010*
Community	Community Rewards for Prosocial Involvement	62	64	65	70	66	61
Family	Family Opportunities for Prosocial Involvement	56	56	51	56	51	55
	Family Rewards for Prosocial Involvement	53	56	55	56	56	53
School	School Opportunities for Prosocial Involvement	51	51	57	63	59	64
	School Rewards for Prosocial Involvement	44	49	59	60	63	66
Peer and Individual	Religiosity	59	60	56	59	58	62
Average Prevalence Rate		**54**	**56**	**57**	**61**	**59**	**60**

Note: Because risk is associated with negative behavioral outcomes, it is better to have lower risk factor scale scores, not higher. Conversely, because protective factors are associated with better student behavioral outcomes, it is better to have protective factor scale scores with high values.

Table 24. Risk factor prevalence rate trends among high school students for Brevard County, 2000, 2002, 2004, 2006, 2008 and 2010

Domain	Scale	Brevard County					
		2000	*2002*	*2004*	*2006*	*2008*	*2010*
Community	Community Disorganization	43	40	42	38	47	53
	Transitions and Mobility	65	59	67	60	63	64
	Laws and Norms Favorable to Drug Use	44	44	41	34	39	39
	Perceived Availability of Drugs	59	47	48	41	46	44
	Perceived Availability of Handguns	54	42	41	43	44	43
Family	Poor Family Management	53	49	49	52	46	45
	Family Conflict	42	38	41	36	39	38
	Parental Attitudes Favorable toward ATOD Use	44	46	47	45	43	42
School	Poor Academic Performance	45	31	39	35	44	44
	Lack of Commitment to School	52	52	57	47	49	51
Peer and Individual	Peer Rewards for Antisocial Behavior	43	49	48	40	50	50
	Favorable Attitudes toward Antisocial Behavior	49	48	53	48	50	47
	Favorable Attitudes toward ATOD Use	53	48	47	41	44	45
	Low Perceived Risks of Drug Use	46	49	50	43	43	53
	Early Initiation of Drug Use	57	47	43	37	38	33
Average Prevalence Rate		**50**	**49**	**50**	**43**	**46**	**47**

Note: Because risk is associated with negative behavioral outcomes, it is better to have lower risk factor scale scores, not higher. Conversely, because protective factors are associated with better student behavioral outcomes, it is better to have protective factor scale scores with high values.

Appendix C

The U.S. Preventive Services Task Force (USPSTF) Grades/Recommendations

http://www.uspreventiveservicestaskforce.org/uspstf/grades.htm

Grade Definitions After May 2007

What the Grades Mean and Suggestions for Practice

The USPSTF updated its definitions of the grades it assigns to recommendations and now includes "suggestions for practice" associated with each grade. The USPSTF has also defined levels of certainty regarding net benefit. These definitions apply to USPSTF recommendations voted on after May 2007.

Grade	Definition	Suggestions for Practice
A	The USPSTF recommends the service. There is high certainty that the net benefit is substantial.	Offer or provide this service.
B	The USPSTF recommends the service. There is high certainty that the net benefit is moderate or there is moderate certainty that the net benefit is moderate to substantial.	Offer or provide this service.
C	*Note: The following statement is undergoing revision.* Clinicians may provide this service to selected patients depending on individual circumstances. However, for most individuals without signs or symptoms there is likely to be only a small benefit from this service.	Offer or provide this service only if other considerations support the offering or providing the service in an individual patient.
D	The USPSTF recommends against the service. There is moderate or high certainty that the service has no net benefit or that the harms outweigh the benefits.	Discourage the use of this service.
I Statement	The USPSTF concludes that the current evidence is insufficient to assess the balance of benefits and harms of the service. Evidence is lacking, of poor quality, or conflicting, and the balance of benefits and harms cannot be determined.	Read the clinical considerations section of USPSTF Recommendation Statement. If the service is offered, patients should understand the uncertainty about the balance of benefits and harms.

Levels of Certainty Regarding Net Benefit

Level of Certainty*	Description
High	The available evidence usually includes consistent results from well-designed, well-conducted studies in representative primary care populations. These studies assess the effects of the preventive service on health outcomes. This conclusion is therefore unlikely to be strongly affected by the results of future studies.
Moderate	The available evidence is sufficient to determine the effects of the preventive service on health outcomes, but confidence in the estimate is constrained by such factors as: • The number, size, or quality of individual studies. • Inconsistency of findings across individual studies. • Limited generalizability of findings to routine primary care practice. • Lack of coherence in the chain of evidence. As more information becomes available, the magnitude or direction of the observed effect could change, and this change may be large enough to alter the conclusion.
Low	The available evidence is insufficient to assess effects on health outcomes. Evidence is insufficient because of: • The limited number or size of studies. • Important flaws in study design or methods. • Inconsistency of findings across individual studies. • Gaps in the chain of evidence. • Findings not generalizable to routine primary care practice. • Lack of information on important health outcomes. More information may allow estimation of effects on health outcomes.

* The USPSTF defines certainty as "likelihood that the USPSTF assessment of the net benefit of a preventive service is correct." The net benefit is defined as benefit minus harm of the preventive service as implemented in a general, primary care population. The USPSTF assigns a certainty level based on the nature of the overall evidence available to assess the net benefit of a preventive service.

Appendix D

Key Stakeholder Questionnaire

Name: _____ Date:_____ Time: _____

Agency: _____

Title: _____

Mailing Address:

_____

_____

Phone: _____ Email: _____

Prevention Institute defines four basic elements of community health:

Equitable opportunity: including racial justice, jobs and education,
Place: including parks and open space, transportation, housing, air, water and safety,
People : including social networks and willingness to act for the common good, and
Health Care Services: including preventive services, treatment services, access, cultural competency, and emergency response.

1. **Considering this overall look at what it takes to have a healthy community, what do you view as the major issues facing us:**
2. **Now looking only at health care services (preventive, treatment, access, cultural competency, emergency response), what do you view as the major issues when it comes to us:**
3. **Who in our community is doing a good job of promoting health?**
4. **Who in our community does not promote good health?**
5. **Are there gaps where you would like to see services offered in your community?**
6. **If you were in charge of improving health in our community, what would you do first?**