



2000 PRC Community Needs Assessment

Southwest Area of Broward County, Florida

Community Report

*Prepared for Broward County Human Services
Department*

*... Never doubt that a small group of
thoughtful, committed citizens can change the
world; indeed, it's the only thing that ever has.*

— Margaret Mead

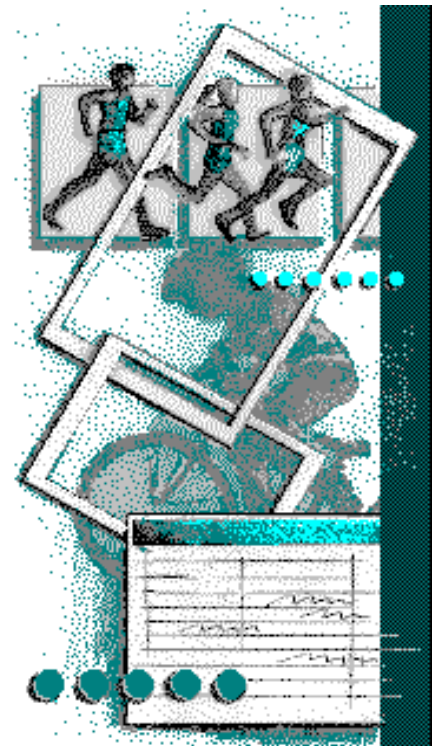


Table of Contents

INTRODUCTION

5

PROJECT OVERVIEW

6

Project Goals	6
Community Defined for This Assessment.....	6

METHODOLOGY

7

Community Needs Survey	7
<i>Sample Design</i>	7
<i>Sampling Error</i>	8
<i>Sample Characteristics</i>	9
Existing Data	11
<i>Statewide Risk Factor Data</i>	11
<i>Nationwide Risk Factor Data</i>	11
<i>Healthy People 2010 Goals</i>	11

HOUSING AND NEIGHBORHOOD CONDITIONS

12

HOUSING CONDITIONS

13

Personal Dwellings	13
<i>Type of Current Dwelling</i>	13
<i>Current Housing Conditions</i>	13
<i>Specific Housing Conditions</i>	15
<i>Housing Ownership</i>	16

CHILDCARE SERVICES

17

CHILDCARE SERVICES

18

Need for Current Childcare	18
<i>Personally Use or Need Childcare Services</i>	18
<i>Licensed Childcare</i>	19
<i>Quality of Current Childcare</i>	20
<i>After-School Programs</i>	21
<i>Primary Caregivers</i>	22

TRANSPORTATION	23
-----------------------	-----------

TRANSPORTATION	24
-----------------------	-----------

Current Transportation Used.....	24
<i>Vehicle Ownership</i>	24
<i>Method of Transportation</i>	25

COMMUNITY SERVICES	26
---------------------------	-----------

COMMUNITY SERVICES	27
---------------------------	-----------

Awareness of Community Services.....	27
<i>Knowledge of Specific Services</i>	27
<i>Waiting List for Services</i>	28
<i>Type of Service or Assistance Most Needed by Local Households</i>	30

HEALTH STATUS	31
----------------------	-----------

PHYSICAL HEALTH STATUS	32
-------------------------------	-----------

Self-Reported Physical Health	32
<i>Overall Health Status</i>	32
<i>Health Problems</i>	33
Health Limitations	34

PRIMARY CARE SERVICES	35
------------------------------	-----------

PRIMARY MEDICAL CARE	36
-----------------------------	-----------

Recent Physical Examinations	36
Emergency Room Utilization.....	37

SUBSTANCE ABUSE AND MENTAL HEALTH	38
--	-----------

MENTAL HEALTH AND SUBSTANCE ABUSE	39
--	-----------

Drug and Alcohol Treatment.....	39
Mental Health Problems.....	40
<i>Anxiety</i>	40
<i>Stress</i>	41
<i>Depression</i>	41

Treatment for Mental or Emotional Problems.....	42
---	----

ACCESS TO HEALTH CARE	43
------------------------------	-----------

HEALTH INSURANCE COVERAGE	44
----------------------------------	-----------

Government Assistance.....	44
Insurance Coverage by Type	45
Lack of Health Insurance Coverage	46

BARRIERS TO PRIMARY CARE	47
---------------------------------	-----------

Overview of Health Care Barriers	47
Appointment Availability	48
Cost of Health Services	49
Inconvenient Office Hours	50
Inconvenient Office Days	51

EMPLOYMENT AND INCOME	52
------------------------------	-----------

EMPLOYMENT AND INCOME	53
------------------------------	-----------

Aspects of Current Employment.....	53
<i>Length of Current Employment</i>	53
<i>Weekly Hours Worked</i>	54
<i>Seeking Full-Time Work</i>	54
<i>Current Occupation</i>	55
<i>Hourly Wage</i>	55
Income Distribution.....	56
Government Assistance.....	57
<i>Supplemental Security Income (SSI)</i>	57
<i>Social Security Benefits (SSA)</i>	58
<i>Social Security Disability Income (SSDI)</i>	58

SUMMARY	59
----------------	-----------

Summary of Findings in the Southwest Area	60
---	----

INTRODUCTION

Project Overview

Project Goals

A Community Needs Assessment is a systemic, data-driven approach to determining the health needs of residents in a defined geographical region. Subsequently, this information may be used to formulate strategies to improve community services specific to those needs.

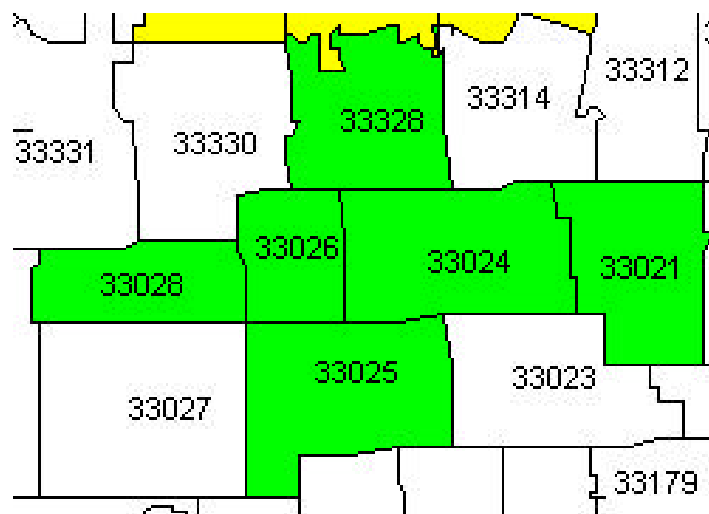
A Community Needs Assessment provides the information needed when developing effective interventions; with this information, communities may identify issues of greatest concern and decide to commit resources to those areas, thereby making the greatest possible impact on community health status.



Community Defined for This Assessment

The “community” defined for this assessment includes selected ZIP Codes within the Southwest Area of Broward County, Florida: 33021, 33024, 33025, 33026, 33028, and 33328.

The following map describes this geographical definition.



Methodology

The **PRC Community Needs Survey** developed for the Southwest Area gives us a remarkably complete and accurate view of the health needs of area residents through a randomized telephone survey of the health and behaviors of community members.

Community Needs Survey

A precise and carefully executed methodology is critical in asserting the validity of the results gathered in the **2000 PRC Community Needs Survey**. Thus, to ensure the best representation of the population surveyed, a telephone interview methodology was employed. The primary advantages of telephone interviewing are timeliness, efficiency and random selection capabilities. The survey was administered only to those with land-based telephones, and did not include mobile telephones, cellular phones, or households without telephones.

Sample Design

The random sample of telephone numbers for this study was apportioned according to the distribution of poverty households in the defined area at the ZIP code level so that an adequate representation of these households was assured.

After the data were collected and checked, statistical weights were applied to bring the sample back into conformity with the current geographic and demographic estimates of households in the defined area. Thus, the final survey results were weighted so that the findings would be generalizable to the population of households at large.



Population estimates were taken from data provided by Broward County Human Services Department.

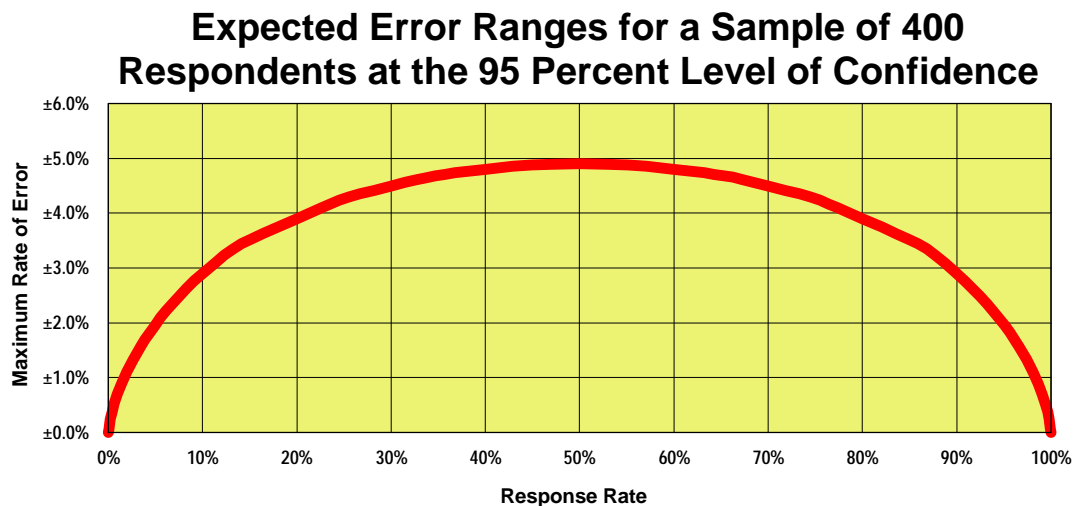
The following table illustrates the population distribution for the defined area, accompanied by the actual number of interviews completed in each ZIP Code, and the resultant weighted sample.

SAMPLE DESIGN							
Study Area	ZIP Code - City	Est. 1999 Poverty Households	Total Cm's Needed	Est. Total Hshlds.	% of Total Area	Weighted Interviews	% of County
Southwest Area	33021- Hollywood	4208	143	20115	23.9%	96	23.9%
	33024- Hollywood	2858	97	22397	26.6%	106	26.6%
	33025- Hollywood	1961	67	15345	18.2%	73	18.2%
	33026- Hollywood	1087	37	11553	13.7%	55	13.7%
	33028- Hollywood	610	21	5904	7.0%	28	7.0%
	33328- Fort Lauderdale	1019	35	8920	10.6%	42	10.6%
	Southwest Area Total:	11743	400	84231	100.0%	400	100.0%

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

Sampling Error

For statistical purposes, the maximum rate of error associated with a sample size of 400 respondents is $\pm 4.9\%$ at the 95 percent level of confidence.



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

Example 1: For example, if 10% of the sample of 400 respondents answered a certain question with a "yes," it can be asserted that between 7.1% and 12.9% (10% \pm 2.9%) of the total population would offer this response.

Example 2: If 50% of respondents said "yes," one could be certain with a 95 percent level of confidence that between 45.1% and 54.9% (50% \pm 4.9%) of the total population would respond "yes" if asked this question.

In addition, the following chart details the numbers of actual interviews completed by demographic characteristic, along with the corresponding maximum margin of error. This

is a valuable reference when determining how much importance to place on specific percentages throughout this report.

# of Actual Interviews Completed by Demographics		
Demographic	Community Needs Survey (n=)	Maximum Margin of Error
Gender		
Male	170	±6.9%
Female	229	±6.9%
Age		
18 to 39 Years	147	±9.8%
40 to 64 Years	158	±6.9%
65 Years or Older	84	±9.8%
Education		
High School or Less	138	±9.8%
Postsecondary Education	259	±5.7%
Poverty Status		
<200% Poverty	63	±9.8%
>200% Poverty	241	±6.9%
Ethnicity		
White	249	±6.9%
Hispanic	73	±9.8%
TOTAL SAMPLE	400	±4.9%

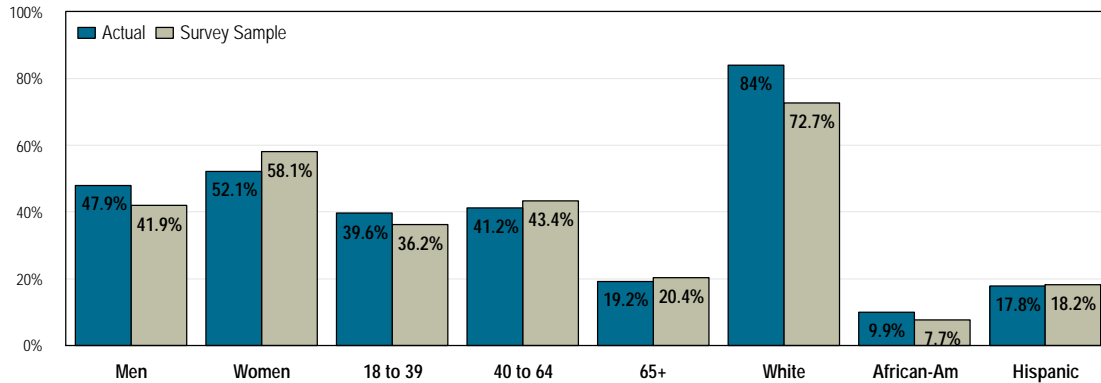
Sample Characteristics

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

The following chart outlines the characteristics of the sample for key demographic variables, compared to actual population characteristics revealed in census data. [Note that

the sample consisted solely of area residents aged 18 and older; data on children were given by proxy by the person most responsible for that child's needs, and these children are not represented demographically in this chart.]

Southwest Area Population/Sample Characteristics



Sources: 1. CACI 1998 Census Update.
2. 2000 PRC Community Needs Survey, Professional Research Consultants

Further note that the poverty descriptions and segmentation used in this report are based on 1999 administrative poverty thresholds determined by the U.S. Department of Health & Human Services. These guidelines define poverty status by household income level and number of persons in the household (e.g., the 1999 guidelines place the poverty threshold for a family of four at \$16,950 annual household income or lower). In sample segmentation: “<200% Poverty” refers to community members living in a household with defined poverty status along with those households living just above the poverty level, earning up to twice the poverty threshold; and “>200% Poverty” refers to households with incomes more than twice the poverty threshold defined for their household size.

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

Existing Data

Statewide Risk Factor Data

Statewide risk factor data are provided where available as an additional benchmark against which to compare local findings. These data are reported in the *1998 BRFSS (Behavioral Risk Factor Surveillance System) Summary Prevalence Report* published by the Centers for Disease Control and Prevention and the U.S. Department of Health & Human Services. It should be noted, however, that individual state health departments are responsible for the administration and oversight of the BRFSS project; PRC can vouch for neither their methodological correctness nor the validity of state findings.

Nationwide Risk Factor Data

Nationwide risk factor data, which are also provided in comparison charts, are taken from the *2000 PRC National Health Survey*. The methodological approach for the national study is identical to that employed in this assessment. Therefore, PRC assures that these data may be generalized to the U.S. population with a high degree of confidence.

Healthy People 2010 Goals



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

With [specific] health objectives in 28 focus areas, Healthy People 2010 will be a tremendously valuable asset to health planners, medical practitioners, educators, elected officials, and all of us who work to improve health. Healthy People 2010 reflects the very best in public health planning—it is comprehensive, it was created by a broad coalition of experts from many sectors, it has been designed to measure progress over time, and, most important, it clearly lays out a series of objectives to bring better health to all people in this country. — Donna E. Shalala, Secretary of Health & Human Services

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

HOUSING AND NEIGHBORHOOD CONDITIONS

Housing Conditions

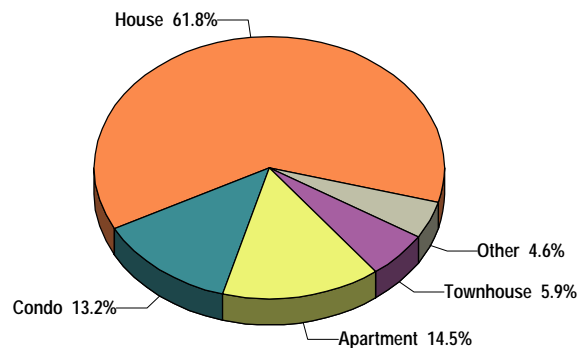
This section contains various assessments of the general conditions of housing and neighborhoods in the Southwest Area community.

Personal Dwellings

Type of Current Dwelling

In the Southwest Area, 61.8% of adults currently live in a house, while 14.5% report living in an apartment and 13.2% currently reside in a condo. Another 5.9% of Southwest Area community members live in a townhouse, as shown in the adjacent chart. Other types of dwellings mentioned include mobile homes, villas, and duplexes.

Type of Dwelling Inhabited by Community Residents

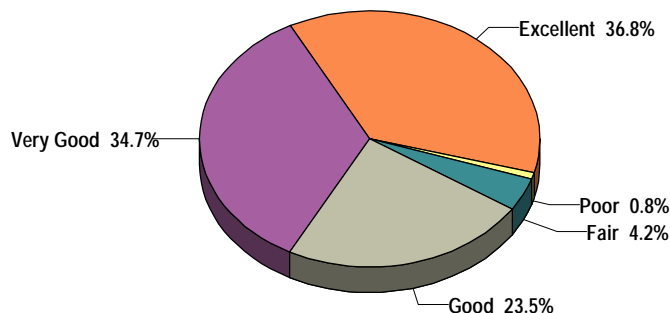


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

Current Housing Conditions

Community residents were next asked to evaluate the current condition of their housing, based on a five-point scale ranging from “excellent” to “poor.” As shown in the adjacent

Condition of Current Housing (Southwest Area)

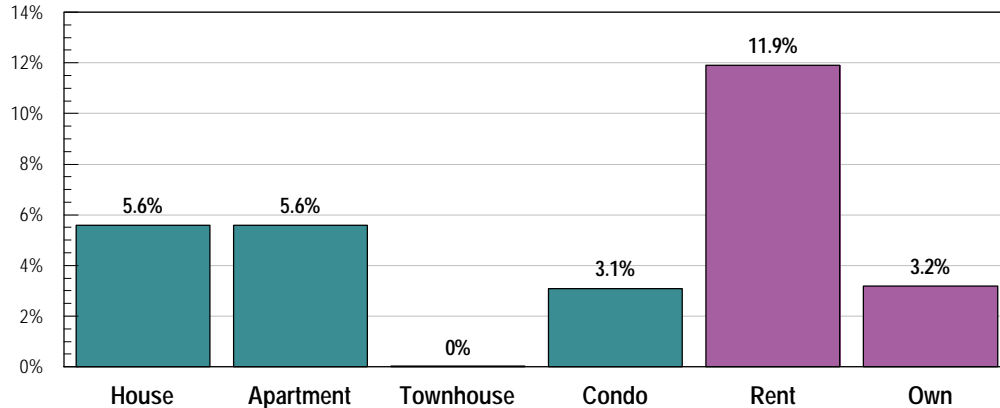


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

chart, more than one-third of local adults feel that their current housing conditions are “excellent,” while another one-third of residents gave “very good” ratings; another 23.5% gave “good” reviews. 5.0% of local adults gave “fair” or “poor” opinions of their current housing.

The following chart illustrates “fair” or “poor” ratings of current housing conditions, segmented by type of dwelling and ownership of property (i.e. those who rent versus those who own their property). As shown below, combined “fair” and “poor” responses are higher among local adults who rent their property are more likely to give “fair” or “poor” evaluations of their property when compared with those who own their homes.

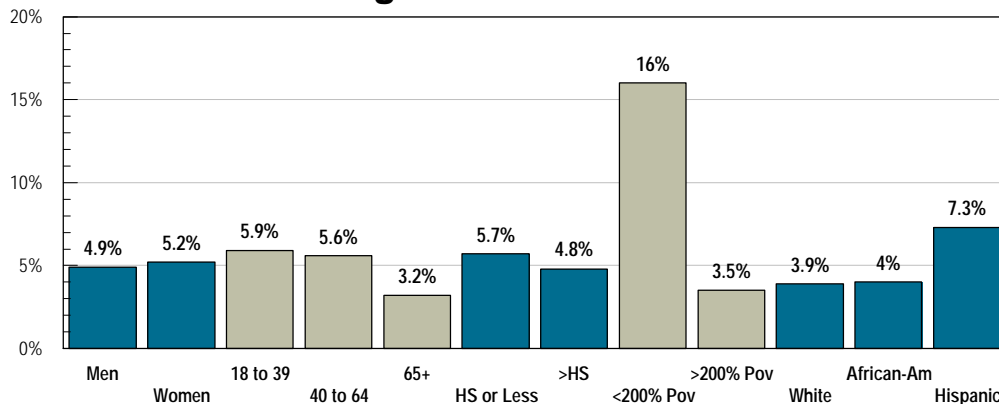
Current Housing Conditions are "Fair" or "Poor"
(by Type of Dwelling and Ownership of Property)



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Notes: 1. Asked of all respondents.
2. Percentages represent combined "fair" and "poor" responses.

The following chart further examines self-reported “fair” or “poor” housing conditions by various demographic characteristics. As might be expected, indications of “fair” or “poor” housing conditions are much higher among adults living at the lower income level than among those living at twice or more the national poverty level.

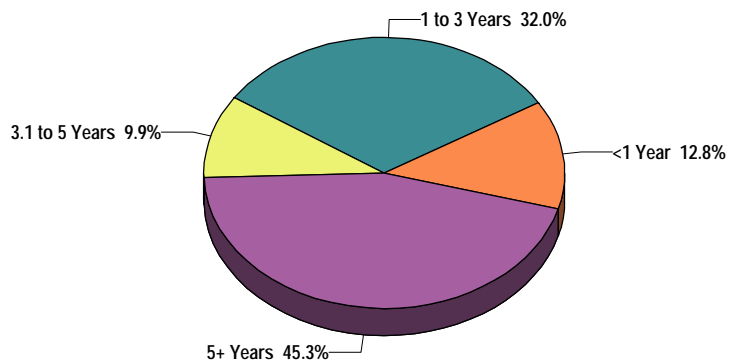
Current Housing Conditions are "Fair" or "Poor"



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Notes: 1. Demographic breakouts are among findings in the Southwest Area.
2. Asked of all respondents.
3. Percentages represent combined "fair" and "poor" responses.

Southwest Area residents were next asked to indicate how long they have lived in their current dwelling. More than 4 in 10 (45.3%) local adults have been in their homes for five or more years; another 9.9% have been in their current homes for three to five years and 32.0% have lived in their homes between one and three years. Just over 1 in 10 (12.8%) local adults have been in their current homes less than one year.

Length of Time Living in Current Dwelling

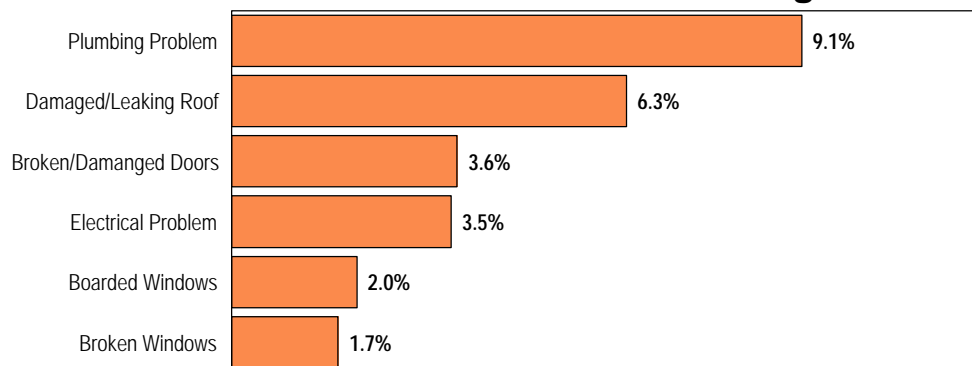


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

Specific Housing Conditions

When asked about specific housing problems, the largest share of responses was for having **plumbing problems** (mentioned by 9.1%), followed by having a **damaged or leaky roof** (6.3%), **broken or damaged doors** (3.6%), and **electrical problems** (3.5%). Just 2.0% have **boarded windows**, while 1.7% have **broken windows** in their homes.

Problems With Current Dwelling

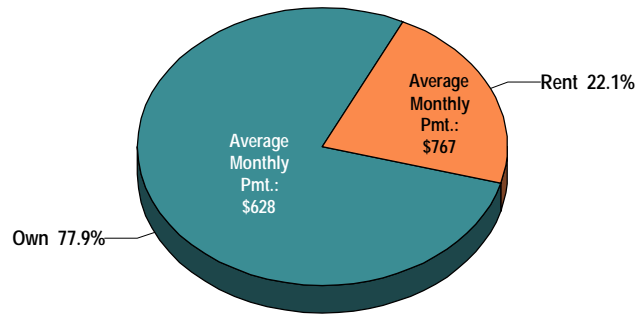


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

Housing Ownership

In a follow-up inquiry, local adults were asked to indicate whether they own or rent their current housing. As shown in the following chart, most (77.9%) Southwest Area adults currently own their property, making an average monthly mortgage payment of \$628. The remaining 22.1% of local adults who rent their property pay an average monthly rent of \$767.

Ownership of Current Dwelling



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

CHILDCARE SERVICES

Childcare Services

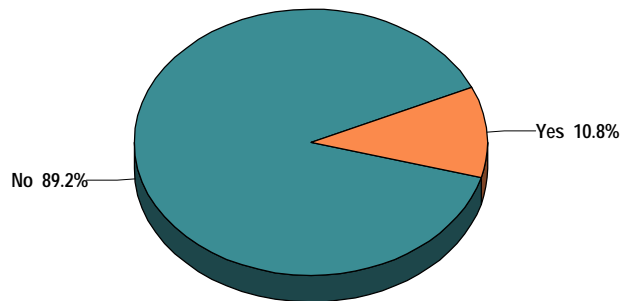
This section illustrates local adults' use of childcare services and their perceptions of the quality of service which their children are receiving. Also included in this section is information on after-school programs and primary caregiving.

Need for Current Childcare

Personally Use or Need Childcare Services

In the Southwest Area, 10.8% of community residents use or have a need for childcare services, as shown in the adjacent chart.

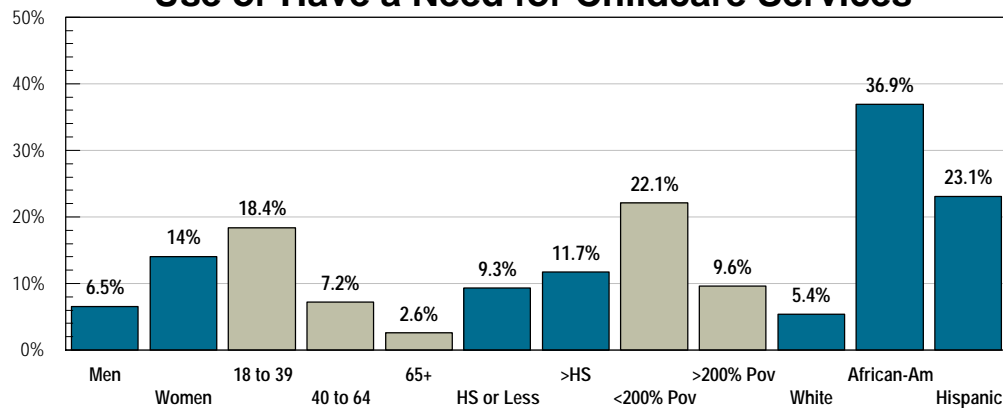
Use or Have a Need for Childcare Services



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

Local adults most likely to use or have a need for childcare services include adults under 40, women, adults with no post-secondary education, African-Americans, and Hispanics, as shown below.

Use or Have a Need for Childcare Services

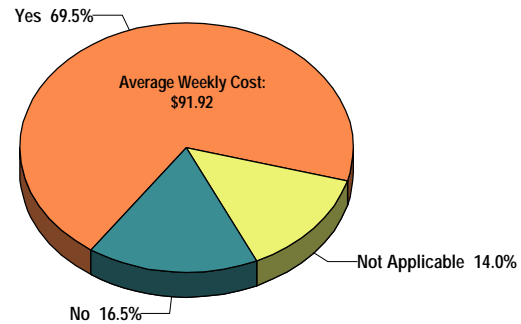


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Notes: 1. Demographic breakouts are among findings in the Southwest Area.
2. Asked of respondents who currently use childcare services.

Licensed Childcare

Among Southwest Area adults who have needed it, just 69.5% have been able to find licensed childcare, paying a weekly average of \$91.92. On the other hand, 16.5% of local adults have been unable to find licensed childcare.

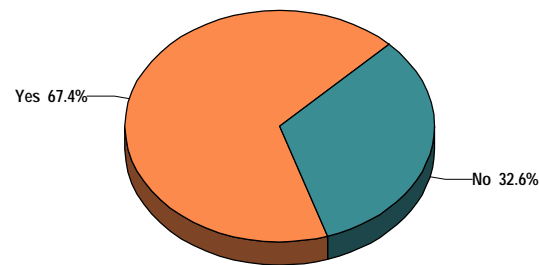
Have Been Able to Find Licensed Childcare (Among Those Who Have Needed It)



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of those respondents who have needed childcare.

Just two-thirds (67.4%) of local adults who use childcare services indicate that the facility is located close to their home or work.

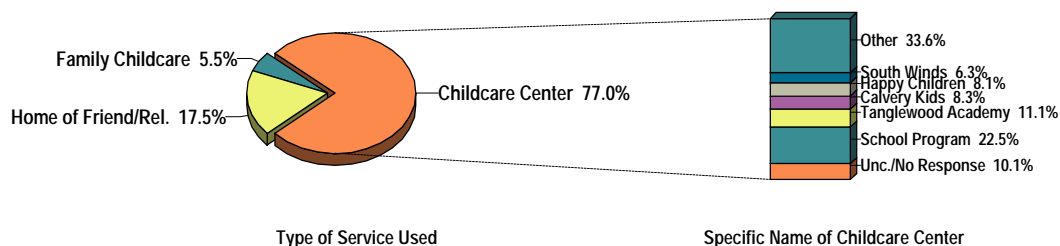
Childcare Facility is Close to Home or Work (Among Those Who Use Childcare)



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of those respondents who have needed childcare.

Most (77.0%) local adults who use local childcare services indicate that they take their children to a childcare center. Another 17.5% use the home of a friend or relative. Specific childcare centers mentioned include school programs and Tanglewood Academy.

Type of Childcare Used

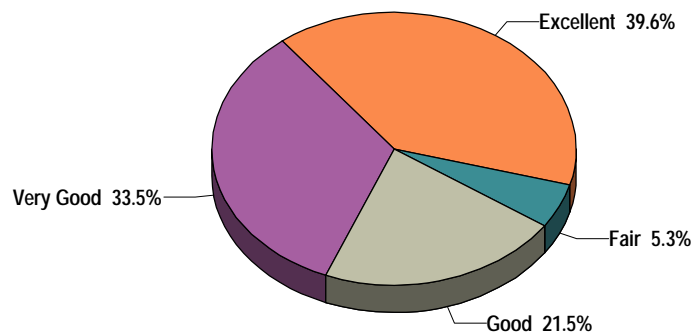


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of those respondents who have needed childcare.

Quality of Current Childcare

A total of 39.6% of local parents who utilize some type of childcare services perceive these services to be “excellent.” Another 33.5% gave “very good” ratings of their current childcare services. A total of 21.5% of community residents gave “good” opinions of their childcare. Note that among the adults indicating they use childcare services in the Southwest Area, only 2 individuals (5.3%) rated the childcare services they use as “fair,” while no local adults gave “poor” ratings of their childcare services.

Perceived Quality of Current Childcare
(Southwest Area)

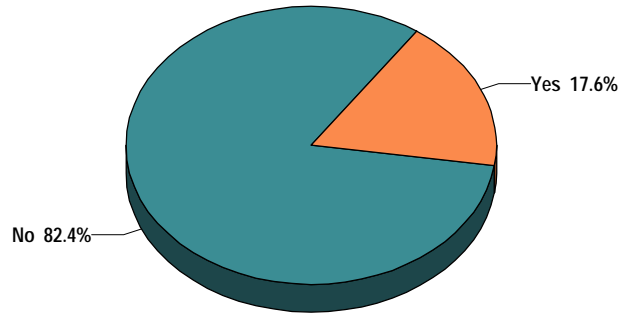


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of those respondents who use childcare services.

After-School Programs

In the Southwest Area, 17.6% of local adults indicate that their child uses or has a need for after-school programs. On the other hand, the majority (82.4%) of community members indicate that they do not have a need for after-school programs.

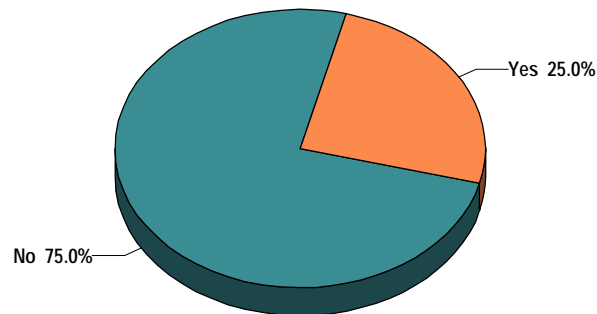
Child Uses/Has Need for After-School Programs



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

One quarter (25.0%) of adults who express a need for after-school programs report that they have had difficulty finding such a program, as shown.

Have Had Difficulty Finding After-School Programs

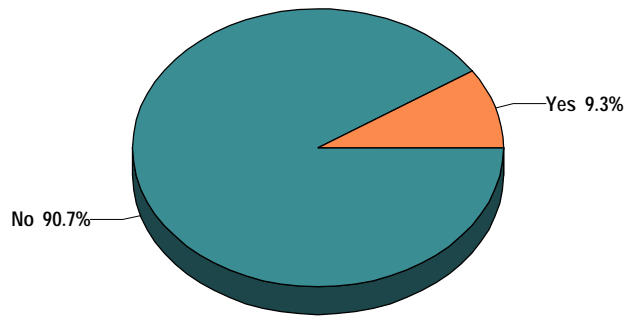


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of those respondents whose child has had a need for after-school care.

Primary Caregivers

A total of 9.3% of local adults indicate that they are primary caregivers in their home for someone other than their own children. (These people being cared for might include an elderly relative, a handicapped adult, or a child of a friend or relative.)

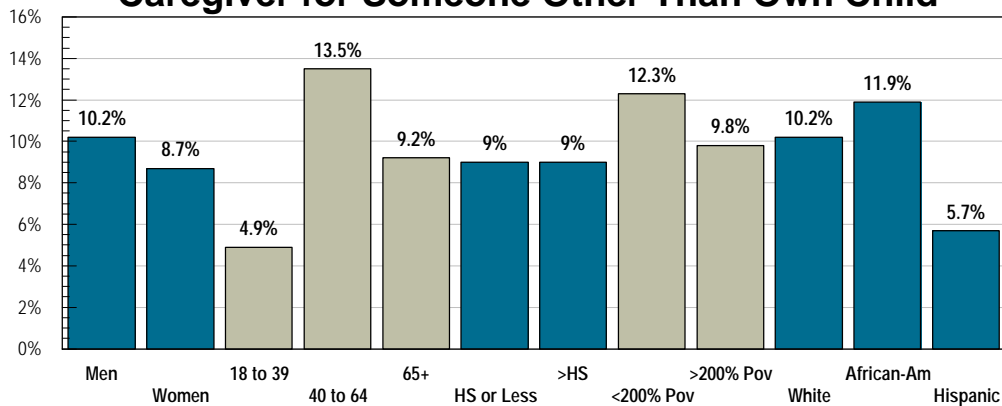
Member of Household is the Primary Caregiver for Someone Other Than Own Child



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

Local adults most likely to be primary caregivers for someone other than their own children include African-Americans, adults at lower income levels, and middle-aged adults.

Member of Household is the Primary Caregiver for Someone Other Than Own Child



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Notes: 1. Demographic breakouts are among findings in the Southwest Area.
2. Asked of all respondents.

TRANSPORTATION

Transportation

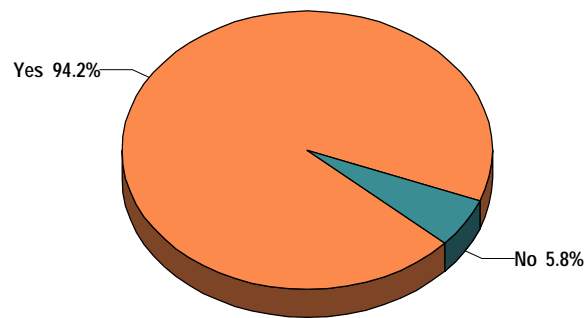
This section assesses local transportation ownership among community members in the Southwest Area.

Current Transportation Used

Vehicle Ownership

Most Southwest Area residents (94.2%) indicate that they or a member of their household currently own a car or truck, as shown in the adjacent chart.

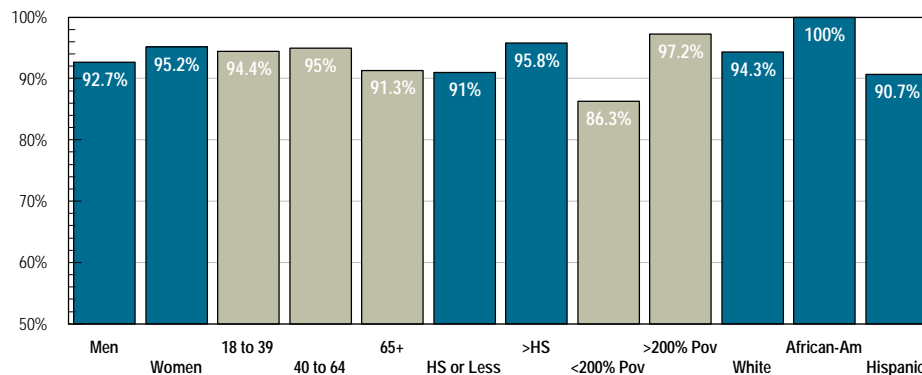
Member of Household Owns a Car or Truck



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
 Note: Asked of all respondents.

Adults *least* likely to indicate current ownership of a car or truck include those at the lowest income and education levels, Hispanics, and older adults.

Member of Household Owns a Car or Truck

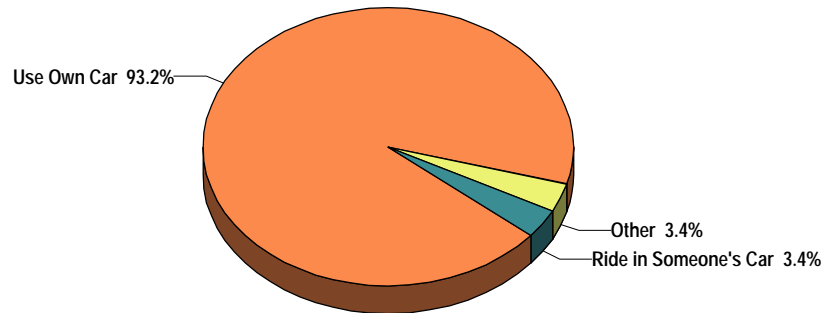


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
 Notes: 1. Demographic breakdowns are among findings in the Southwest Area.
 2. Asked of all respondents.

Method of Transportation

When asked to indicate what type of transportation they use most often, over 9 in 10 (93.2%) local adults mentioned driving their own car, while 3.4% of community residents rely on someone else's vehicle for transportation.

Type of Transportation Used Most Often



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

COMMUNITY SERVICES

Community Services

This section of the needs assessment describes community residents' knowledge and awareness of various local community services. It also examines waiting periods for services and details specific services needed by community members.

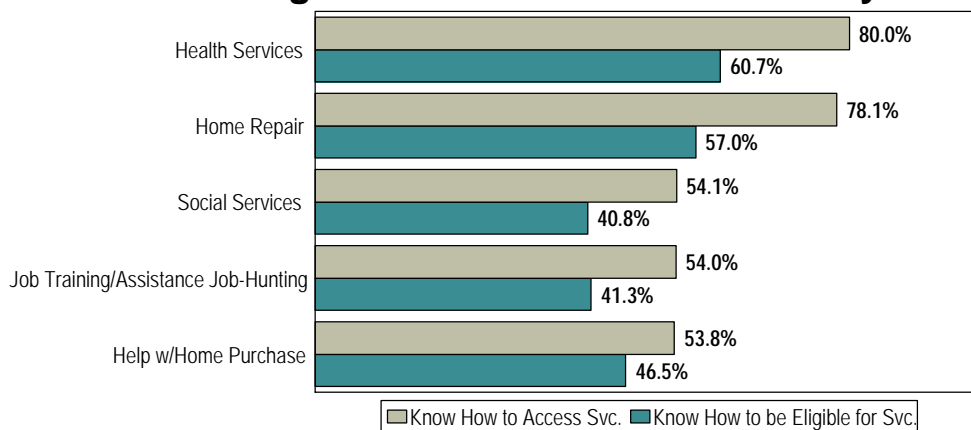
Awareness of Community Services

Knowledge of Specific Services

Survey respondents were asked to indicate whether they know how to access specific local services, including home repair, health, and social services, as well as accessing help with home purchasing and job training or assistance with job-hunting. As shown below, knowledge about accessing services is highest in the Southwest Area for **health services** (with 80.0% indicating that they know how to access health services), followed by **home repair** (78.1%). Fewer local adults indicated awareness about **social services**, accessing help for a **home purchase**, and **job training** or assistance with **job-hunting**.

Community members were also asked to indicate whether they know what is needed to be eligible to receive these specific services. Percentages were lower for eligibility awareness, with the highest being for health services (60.7% of local adults know how to be eligible to receive health services). The following chart provides a more complete breakdown of responses.

Knowledge and Awareness of Community Services

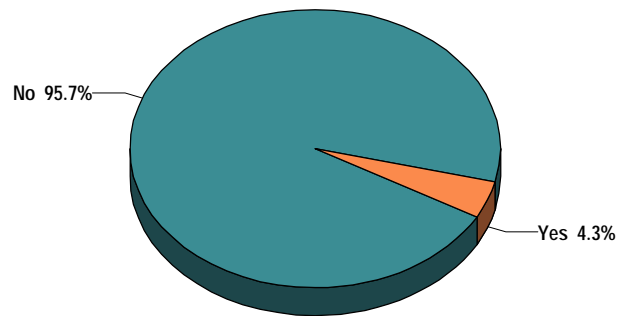


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

Waiting List for Services

Within the past six months, 4.3% of local adults have been put on a waiting list for assistance or service.

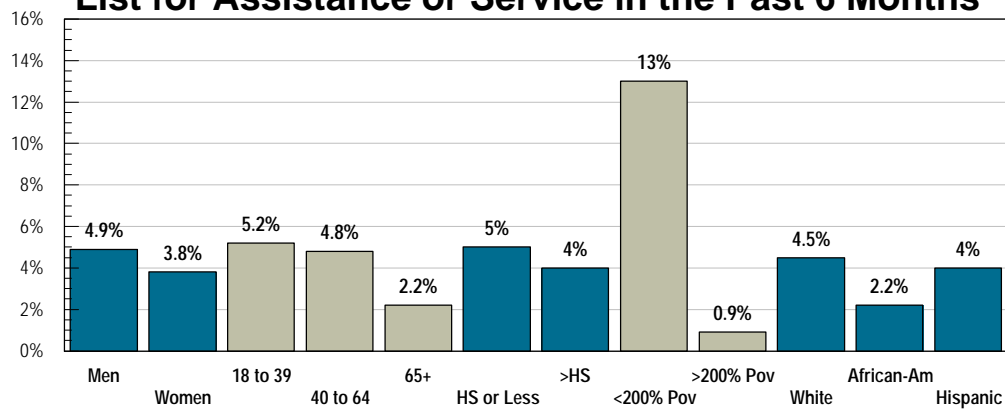
Have Applied for and Been Put on Waiting List for Assistance or Service in the Past 6 Months



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

Adults most likely to have applied for and have been placed on a waiting list for services include adults in the lower income bracket.

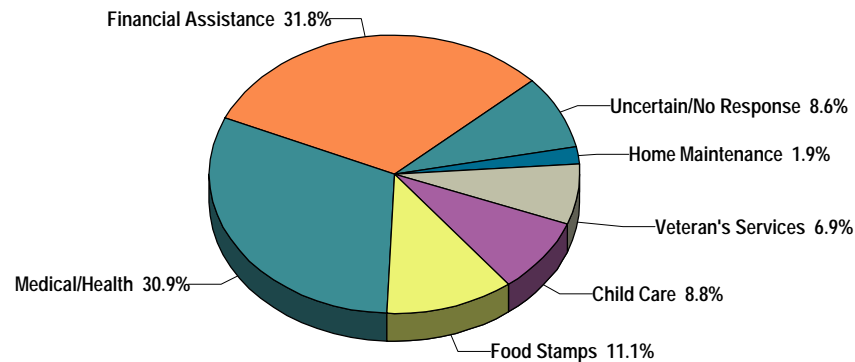
Have Applied for and Been Put on Waiting List for Assistance or Service in the Past 6 Months



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Notes: 1. Demographic breakouts are among findings in the Southwest Area.
2. Asked of all respondents.

Adults who have been placed on a waiting list for services or assistance were next asked to indicate the specific service or assistance which they requested. The largest share of responses (31.8%) was for financial assistance, followed by medical or health services (30.9%), food stamps (11.1%), child care (8.8%), and Veteran's Services (6.9%).

Type of Service or Assistance Sought

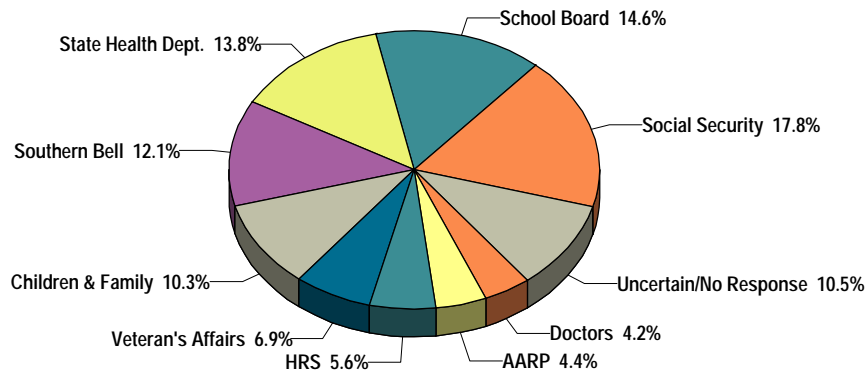


Source: 2000 PRC Community Needs Survey, Professional Research Consultants

Note: Asked of those residents who have applied for help in the past six months and been put on a waiting list.

Adults who were put on a waiting list for services or assistance were further asked to indicate the name of the agency where the assistance was requested. As detailed in the following chart, the largest share of responses (17.8%) was for Social Security, followed by the School Board (14.6%), the State Health Department (13.8%), Southern Bell (12.1%), and Children and Family Services (10.3%).

Name of Agency Where Assistance Was Requested



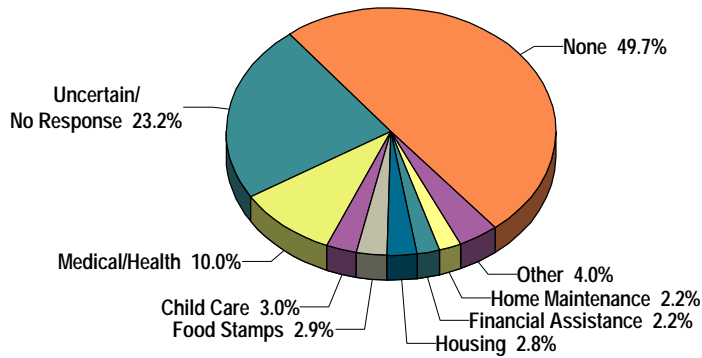
Source: 2000 PRC Community Needs Survey, Professional Research Consultants

Note: Asked of those respondents who sought help or assistance in the past 6 months and were put on a waiting list.

Type of Service or Assistance Most Needed by Local Households

Survey respondents in the Southwest Area were asked to indicate which type of service or assistance their household most needs. As can be seen in the following chart, nearly one-half of local adults (49.7%) indicated that their household does not need any type of service or assistance, while 23.2% were uncertain or offered no response. On the other hand, 10.0% of local adults reported a need for medical or health services. Another 3.0% of local adults indicated a need for child care, while additionally mentioned needs included food stamps (2.9%), housing (2.8%), financial assistance (2.2%), and home maintenance (2.2%).

**Type of Service or
Assistance Household Most Needs**



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

HEALTH STATUS

Physical Health Status

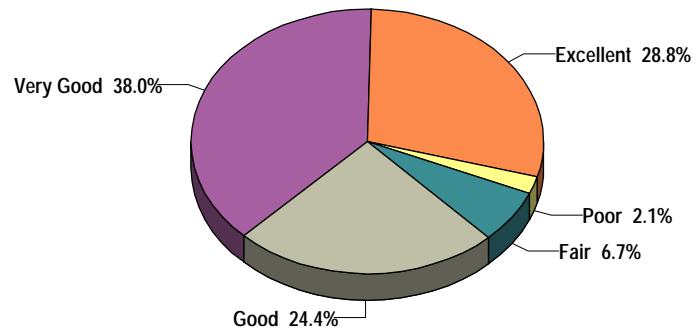
This section describes various assessments of the general physical health of community residents, including such elements as perceived health status, significant health problems, and work limitations.

Self-Reported Physical Health

Overall Health Status

In the Southwest Area, 66.8% of adults view their individual physical health as “excellent” or “very good.” On the other hand, 8.8% say that their general physical health is overall “fair” or “poor.” This is further outlined in the adjacent chart.

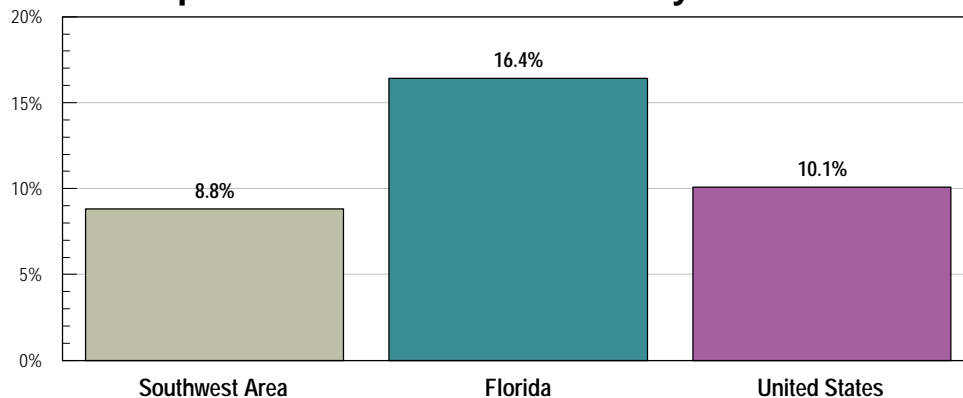
Self-Reported Health Status (Southwest Area)



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

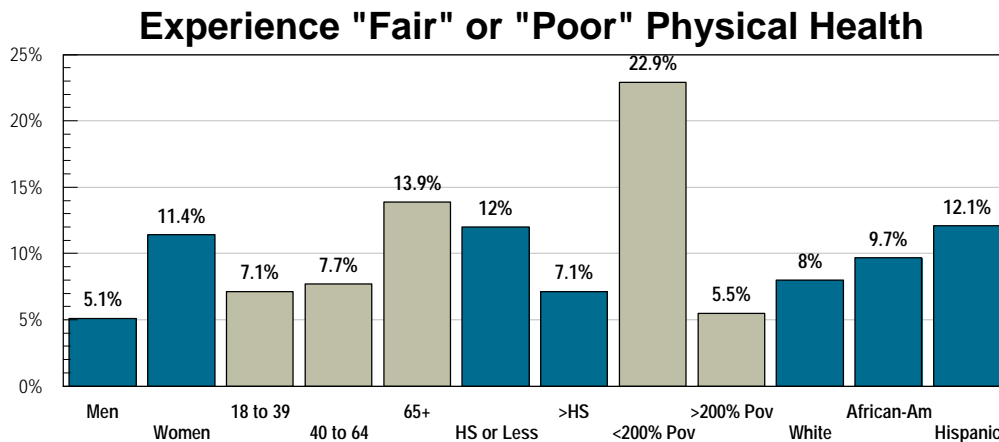
The percentage of area residents reporting “fair” or “poor” physical health is similar to the percentage giving this indication nationwide. Across Florida, 16.4% of adults indicate currently experiencing “fair” or “poor” physical health, as shown below.

Experience "Fair" or "Poor" Physical Health



Sources: 1. 2000 PRC Community Needs Survey, Professional Research Consultants
2. Behavioral Risk Factor Surveillance System, Centers for Disease Control, 1997 Florida Data
3. 2000 PRC National Health Survey, Professional Research Consultants
Notes: 1. Asked of all respondents.
2. Percentages represent combined “fair” and “poor” responses.

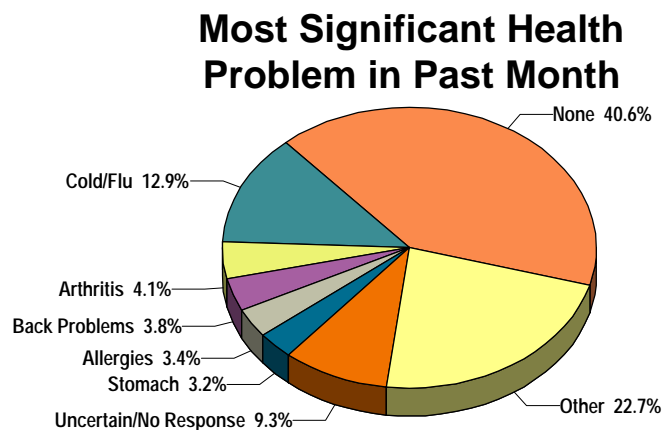
The following chart further examines self-reported health status by various demographic characteristics. As might be expected, indications of “fair” or “poor” health increase with age; that is, older residents much more often report their health as “fair” or “poor.” In addition, there is also a strong correlation with income level, with 22.9% of community residents with lower incomes reporting their physical health as “fair” or “poor,” compared to 5.5% of those with higher incomes. Furthermore, “fair” or “poor” health is reported more among Hispanics (12.1%), individuals with no post-secondary education (12.0%), and women (11.4%).



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
 Notes: 1. Demographic breakouts are among findings in the Southwest Area.
 2. Asked of all respondents.
 3. Percentages represent combined “fair” and “poor” responses.

Health Problems

Local adults were next asked to indicate what, if any, their most significant health problem was last month. As shown in the following chart, 40.6% of local adults had no significant health problem in the past month. On the other hand, 12.9% of local adults mentioned suffering from a **cold or flu** last month, while 4.1% mentioned **arthritis**, 3.8% had **back problems**, 3.4% mentioned **allergies**, and 3.2% had **stomach problems**.

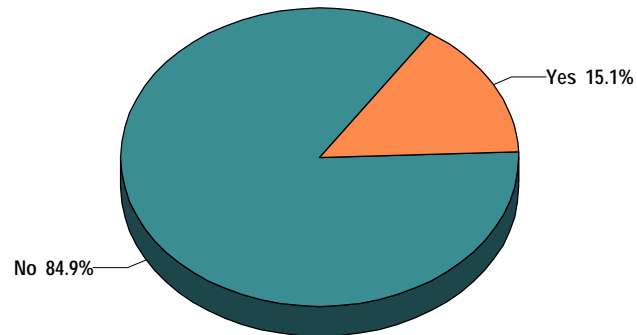


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
 Note: Asked of all respondents.

Health Limitations

In the Southwest Area, 15.1% of adults indicate that their current health status limits their ability to work. The majority of adults, however, are not hampered by their current health status.

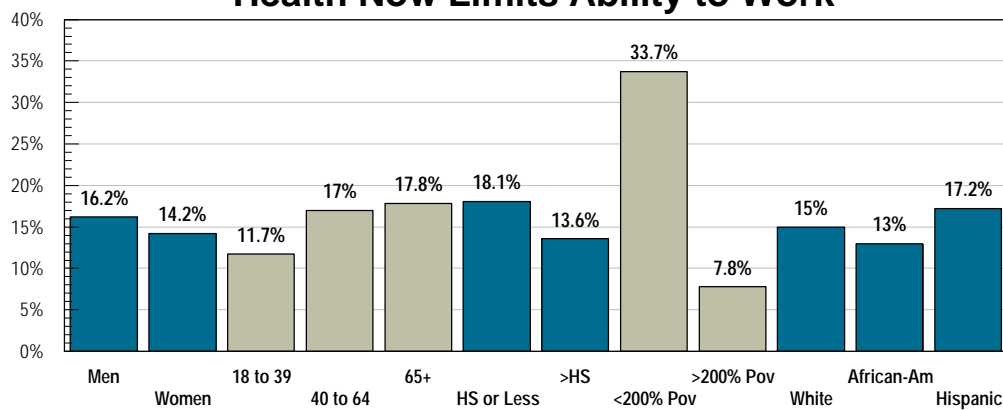
Health Now Limits Ability to Work



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
 Note: Asked of all respondents.

Southwest Area adults most likely to indicate that their current health status limits their ability to work include those in lower income and educational brackets, and older adults.

Health Now Limits Ability to Work



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
 Notes: 1. Demographic breakouts are among findings in the Southwest Area.
 2. Asked of all respondents.

PRIMARY CARE SERVICES

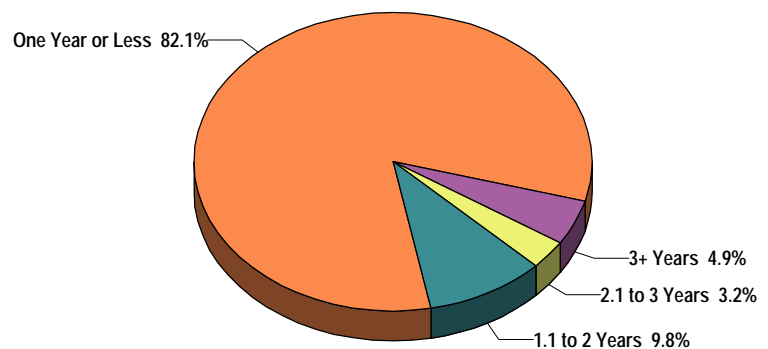
Primary Medical Care

Regular medical care is a key component of preventive medicine. The following section examines community members' use of medical and emergency care services.

Recent Physical Examinations

A total of 82.1% of adults in the Southwest Area have had a complete physical examination in the past year. Another 9.8% had a full physical exam between one and two years ago, while 3.2% report having a physical exam between two and three years ago, and the remaining 4.9% of local adults indicate that it has been three or more years since their most recent complete physical exam.

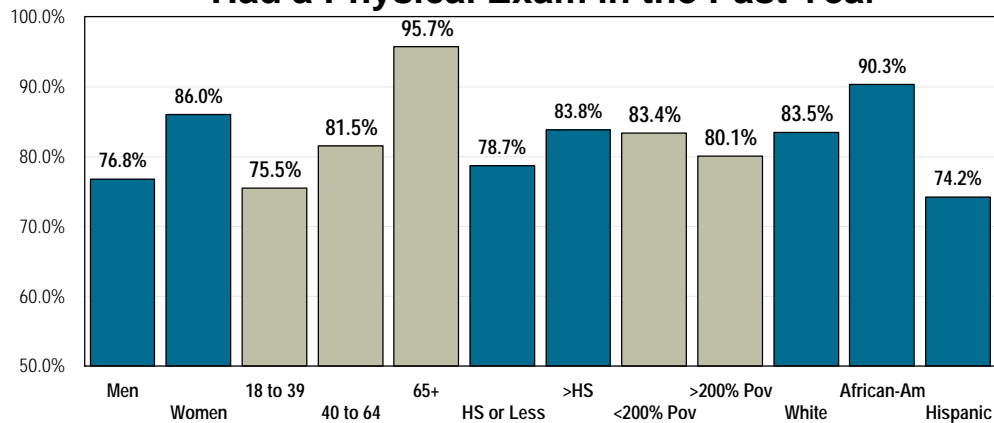
Most Recent Physical Examination



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

Viewed by demographic characteristics, local adults most likely to have had a complete physical exam in the past year include women, adults aged 65 and older, and African-Americans.

Had a Physical Exam in the Past Year

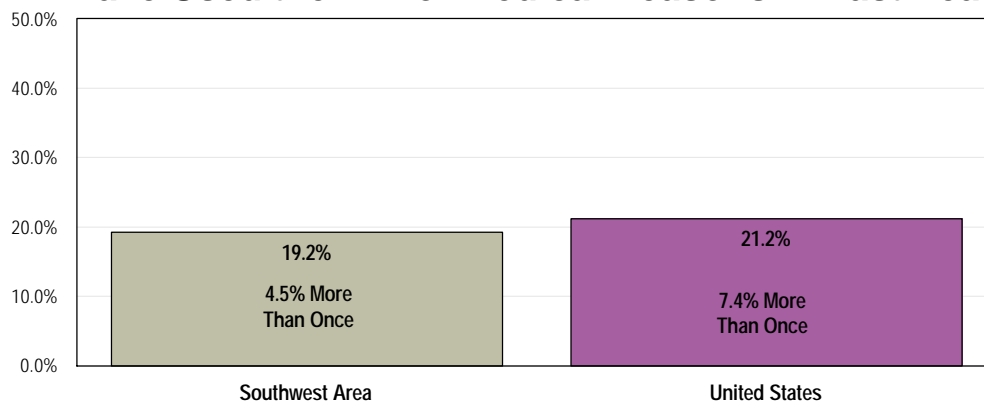


Source: 2000 PRC Community Survey, Professional Research Consultants
Notes: 1. Demographic breakouts are among findings in the Southwest Area.
2. Asked of all respondents.

Emergency Room Utilization

A total of 19.2% of adults in the Southwest Area have used a local emergency room in the past year (including 4.5% who sought care in an ER more than once). Nationwide, a similar 21.2% of adults report emergency room usage in the past year, including 7.4% who received emergency care more than once.

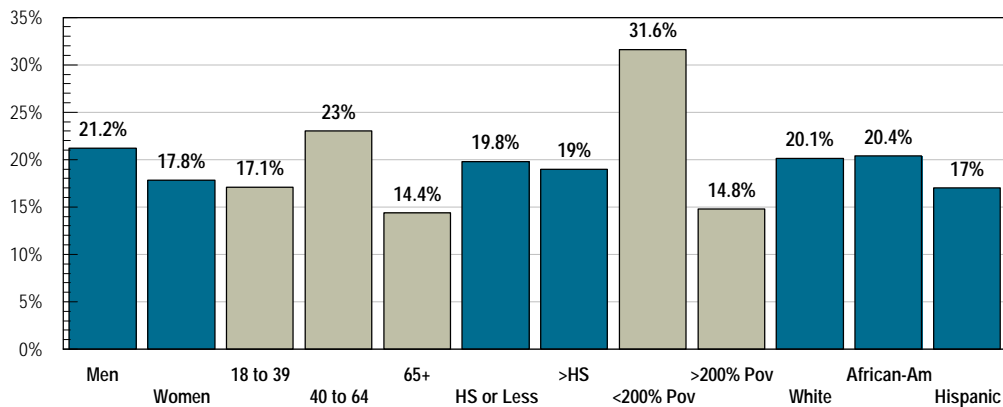
Have Used the ER for Medical Reasons in Past Year



Sources: 1. 2000 PRC Community Needs Survey, Professional Research Consultants
 2. 2000 PRC National Health Survey, Professional Research Consultants
 Notes: 1. Asked of all respondents.
 2. State data not available.

In the Southwest Area, emergency room utilization increases to 31.6% among those living at or near the poverty threshold. [It may be important to note that the percentage of adults using the ER in the past year does not vary significantly between insured respondents and those without coverage.]

Have Used the ER for Medical Reasons in Past Year



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
 Notes: 1. Demographic breakouts are among findings in the Southwest Area.
 2. Asked of all respondents.

SUBSTANCE ABUSE AND MENTAL HEALTH

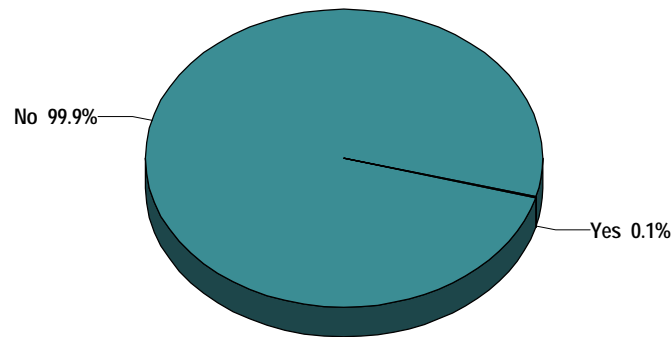
Mental Health and Substance Abuse

Treatment for drugs and alcohol problems are addressed in this section, along with prevalence of mental health problems such as anxiety, stress, and depression.

Drug and Alcohol Treatment

In response to the *PRC Community Needs Survey*, only one adult in the Southwest Area reported seeking treatment for alcohol or drug abuse in the past 12 months.

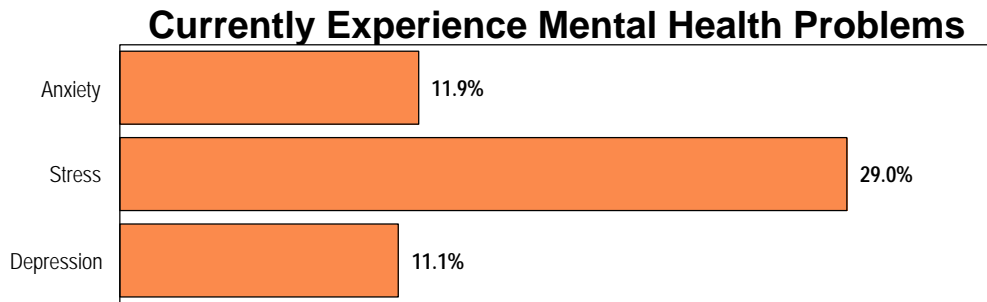
Have Sought Treatment for Alcohol or Drug Abuse in the Past 12 Months



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

Mental Health Problems

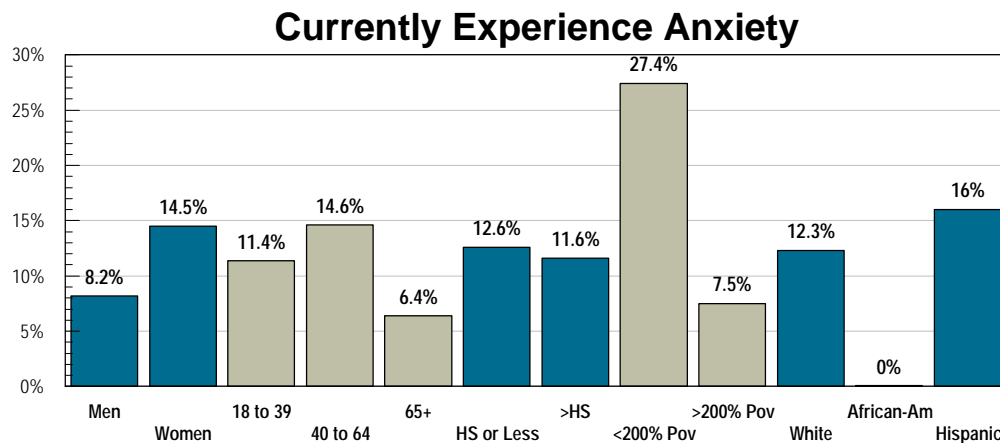
Community members were next asked to indicate whether they currently experience mental health problems, including anxiety, stress, and depression. As shown in the following chart, the largest share of responses (29.0%) was for stress-related problems, followed by problems with anxiety (mentioned by 11.9%) and depression (11.1%).



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
 Note: Asked of all respondents.

Anxiety

Adults most likely to report experiencing problems with anxiety include those living at or near the national poverty level, Hispanics, middle-aged adults, and women.

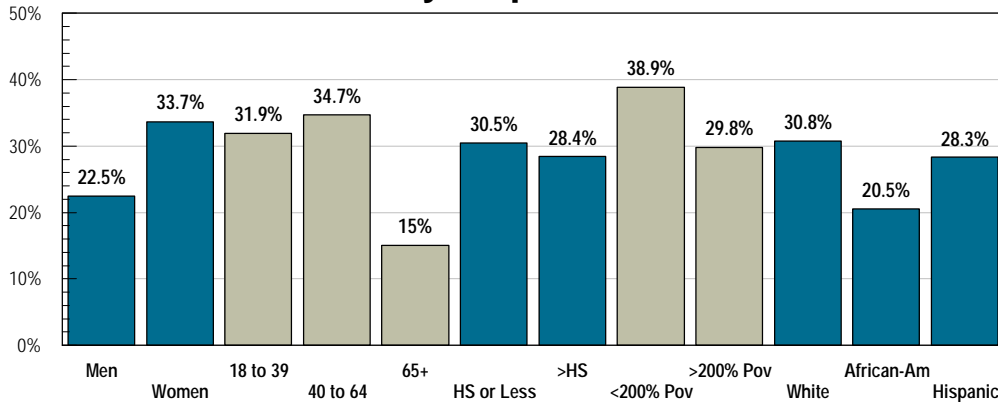


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
 Notes: 1. Demographic breakouts are among findings in the Southwest Area.
 2. Asked of all respondents.

Stress

Local adults most likely to currently experience stress-related problems include women, adults under 65, Whites, and those living at or near poverty.

Currently Experience Stress



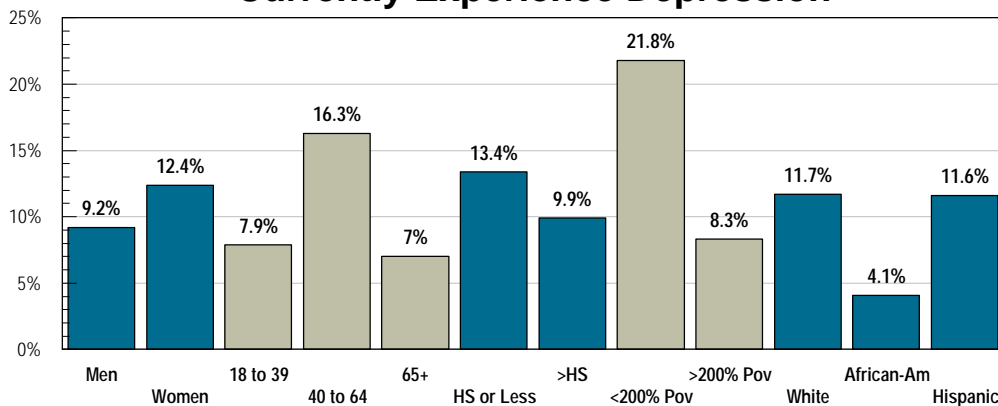
Source: 2000 PRC Community Needs Survey, Professional Research Consultants

Notes: 1. Demographic breakouts are among findings in the Southwest Area.
2. Asked of all respondents.

Depression

Regarding current problems with depression, adults most likely to be affected include those living at or near poverty, those aged 40 to 64, Whites, Hispanics, and those with no post-secondary education.

Currently Experience Depression



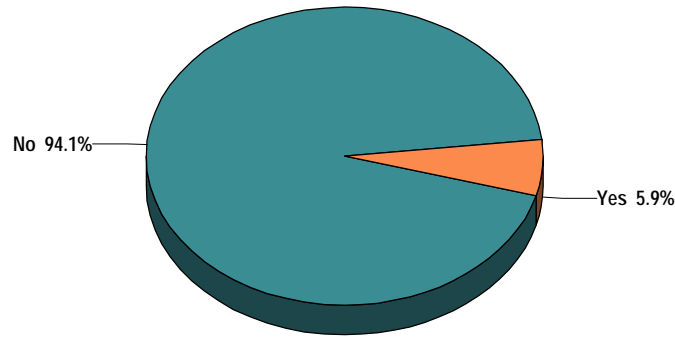
Source: 2000 PRC Community Needs Survey, Professional Research Consultants

Notes: 1. Demographic breakouts are among findings in the Southwest Area.
2. Asked of all respondents.

Treatment for Mental or Emotional Problems

Survey respondents in the Southwest Area were asked to indicate whether they have sought treatment for a mental or emotional problem in the past 12 months. As shown in the adjacent chart, a total of 5.9% responded affirmatively, while the majority (94.1%) of local adults had no mental health treatment in the past year.

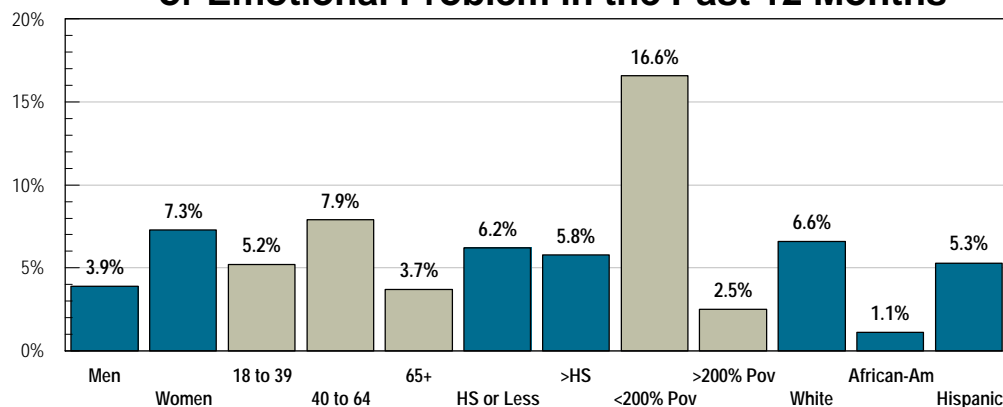
Have Sought Treatment for Mental or Emotional Problem in the Past 12 Months



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

Adults most likely to have sought treatment for a mental or emotional problem in the past 12 months include those living at or near the poverty level, women, and middle-aged adults.

Have Sought Treatment for Mental or Emotional Problem in the Past 12 Months



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Notes: 1. Demographic breakouts are among findings in the Southwest Area.
2. Asked of all respondents.

ACCESS TO HEALTH CARE

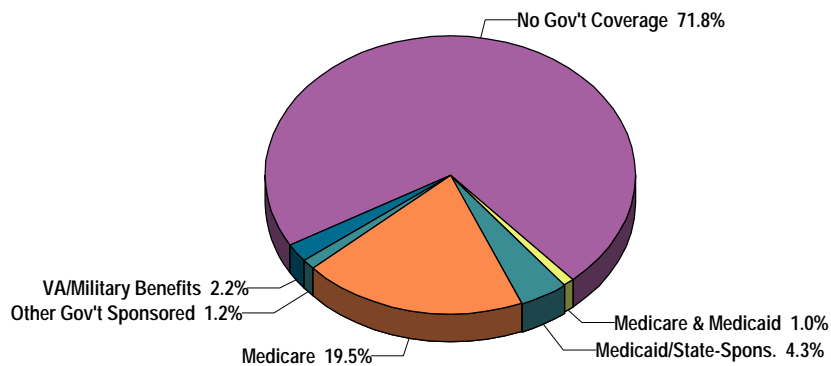
Health Insurance Coverage

Along with enhancing quality and moderating costs, improving the accessibility of health care services is one of the principal hopes for the American health care system and a key element in any preventive approach to community health. Certainly one of the various barriers to access is a lack of insurance coverage for many Americans.

Government Assistance

Southwest Area community residents were asked to indicate whether they are currently covered by some type of government health care assistance. As can be seen in the following chart, over 7 in 10 (71.8%) local adults are not covered by government assistance. In contrast, 19.5% of local adults currently rely on Medicare for their health care coverage, while 4.3% use Medicaid or another state-sponsored program and 1.0% rely on both Medicaid and Medicare. 2.2% of local adults are covered by military benefits.

**Currently Covered by Some
Type of Government Assistance**

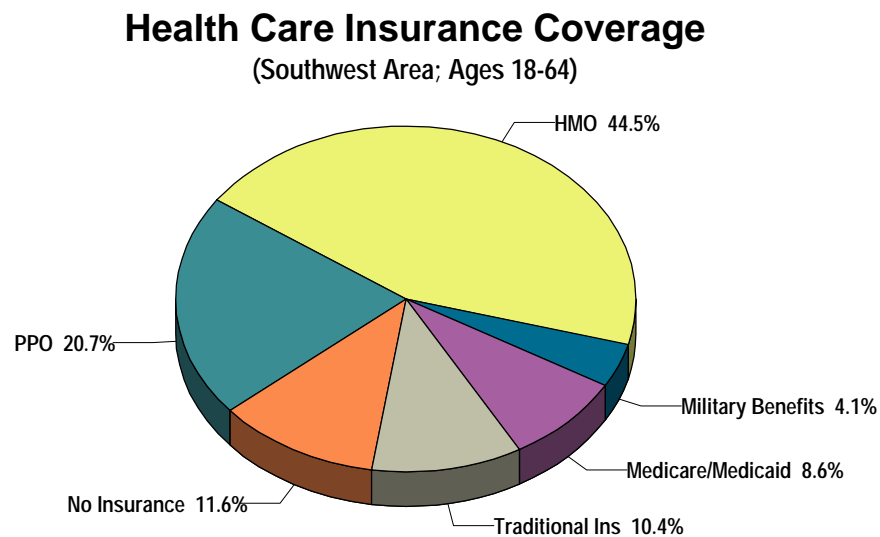


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Reflects all respondents.

Insurance Coverage by Type

A total of 88.4% of adults in the Southwest Area aged 18 to 64 currently have some type of health care insurance coverage. More specifically, 10.4% maintain **traditional commercial health care insurance**, while 44.5% have an **HMO** (health maintenance organization) and 20.7% have a **PPO** (preferred provider organization). Another 8.6% rely on **Medicaid** or **Medicare**, and 4.1% of local adults are covered by **military benefits**.

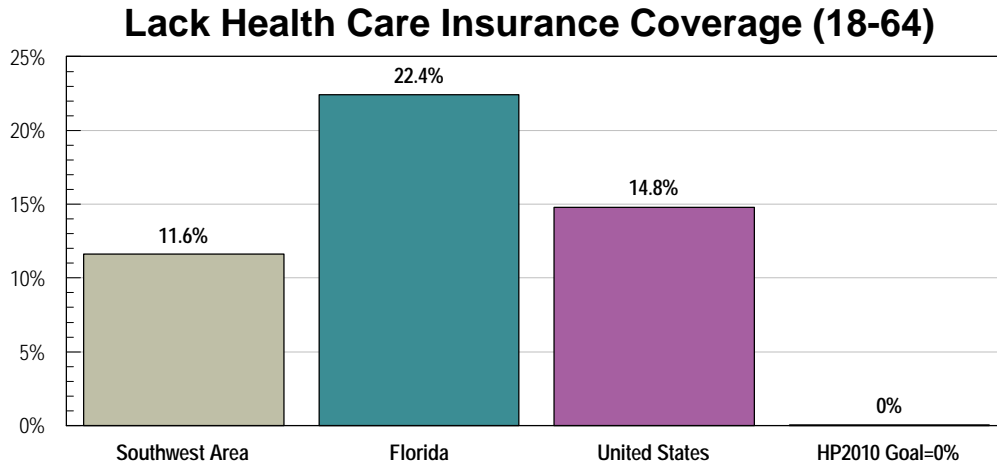
On the other hand, 11.6% of residents aged 18 through 64 have no health insurance coverage, as shown below.



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Reflects respondents aged 18 to 64.

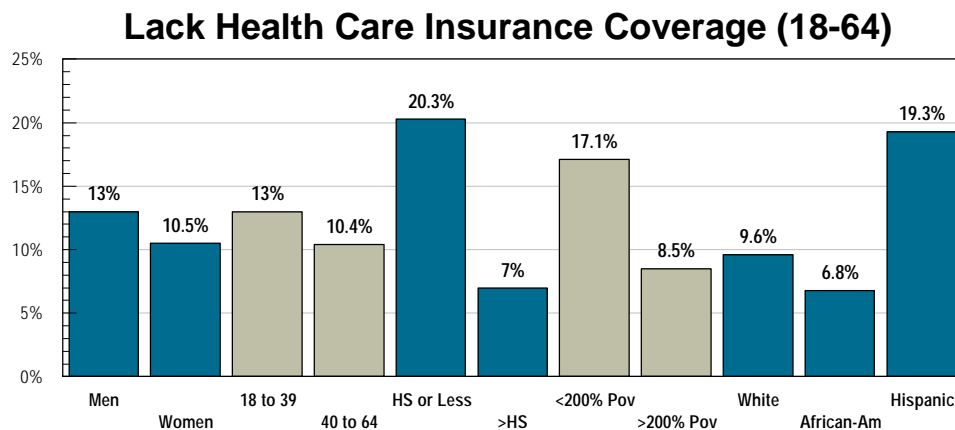
Lack of Health Insurance Coverage

As noted previously, 11.6% of adults between the ages of 18 and 64 in the Southwest Area have no insurance coverage to pay for health care expenses, statistically similar to the national level of 14.8% but failing to meet the *Healthy People 2010* goal of 0% by the year 2010. Across Florida, 22.4% of adults under 65 are without health care insurance coverage.



Sources: 1. 2000 PRC Community Needs Survey, Professional Research Consultants
 2. Behavioral Risk Factor Surveillance System, Centers for Disease Control, 1997 Florida Data
 3. 2000 PRC National Health Survey, Professional Research Consultants
 4. Healthy People 2010, National Center for Health Statistics/CDC/Public Health Service
 Note: Reflects respondents aged 18 through 64.

Not surprisingly, coverage is directly related to income, and lack of insurance decreases among individuals living on over 200% of the national poverty level. Note also that lack of insurance coverage is relatively high among Hispanics, African-Americans, and adults with no education beyond high school.



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
 Notes: 1. Demographic breakouts are among findings in the Southwest Area.
 2. Reflects respondents aged 18 through 64.

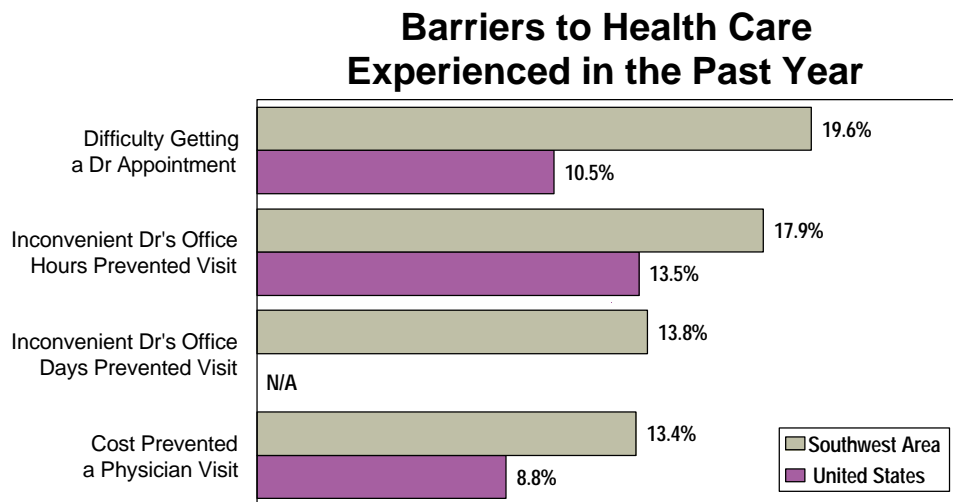
Barriers to Primary Care

This section examines access to preventive care services, including community members' experience with the availability of physician services, and cost or inconvenient office hours as inhibitors to receiving care.

Overview of Health Care Barriers

The following chart summarizes local findings regarding tested barriers to health care services experienced in the past year. As noted, **difficulty obtaining an appointment** and **inconvenient office hours** were the top two barriers reported by survey respondents.

In comparison to U.S. findings (gathered in the *2000 PRC National Health Survey*), adults in the Southwest Area were *significantly more likely* to have difficulty getting a doctor appointment, while they were *significantly less likely* to say inconvenient office hours prevented a visit.



Sources: 1. 2000 PRC Community Needs Survey, Professional Research Consultants

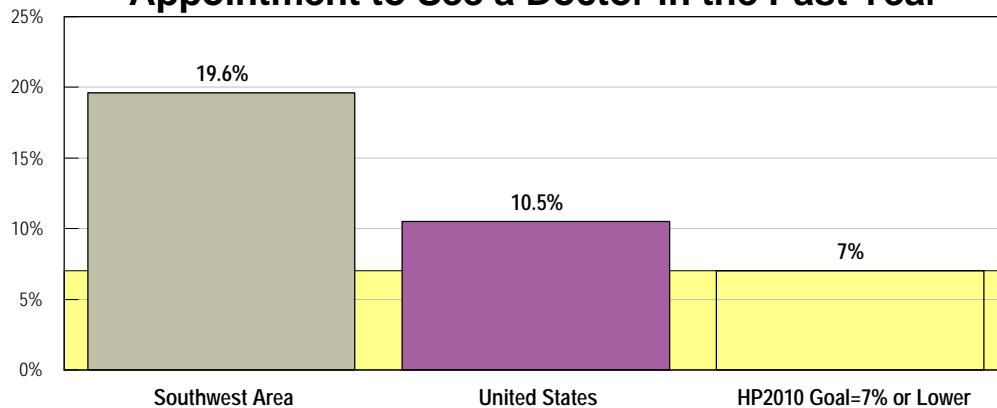
2. 2000 PRC National Health Survey, Professional Research Consultants

Note: Asked of all respondents.

Appointment Availability

A full 19.6% of adults in the Southwest Area had difficulty getting in to see a physician during the past year. Nationwide, a lower 10.5% of adults have had difficulty accessing a physician. Neither number satisfies the *Healthy People 2010* goal of 7% or lower.

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

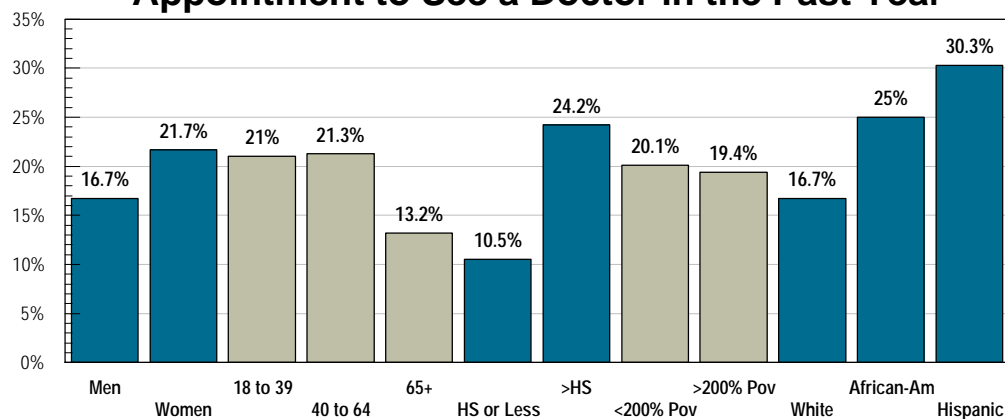


Sources: 1. 2000 PRC Community Needs Survey, Professional Research Consultants
 2. 2000 PRC National Health Survey, Professional Research Consultants
 3. Healthy People 2010, National Center for Health Statistics/CDC/Public Health Service

Notes: 1. Asked of all respondents.
 2. Florida data not available.

As shown in the next graph, Hispanics, women, and younger adults more often report difficulty getting an appointment to see a physician. It may be surprising to note that adults with education beyond high school noted difficulty getting an appointment to see a physician last year, as detailed below.

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

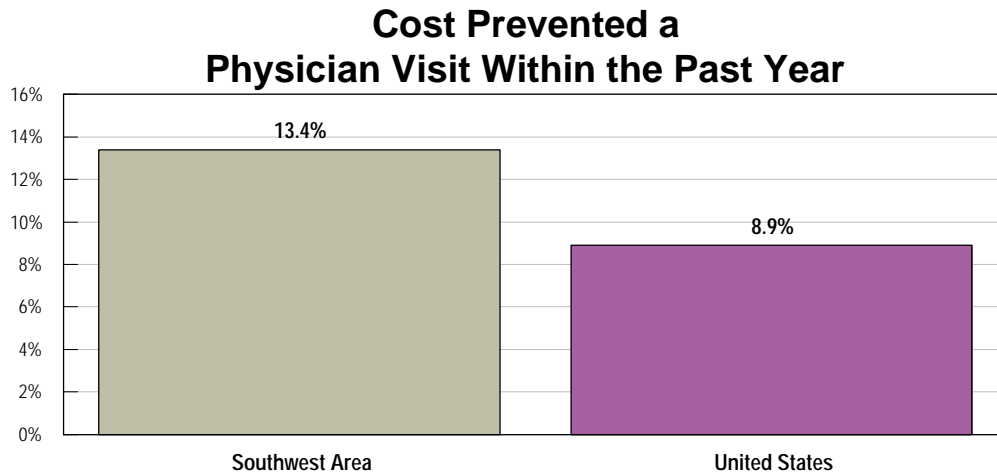


Source: 2000 PRC Community Needs Survey, Professional Research Consultants

Notes: 1. Demographic breakouts are among findings in the Southwest Area.
 2. Asked of all respondents.

Cost of Health Services

Cost is an important factor in the access equation. In the past year, cost has prevented 13.4% of community members from visiting a physician. This figure is statistically similar to the figure found nationwide (8.9%).



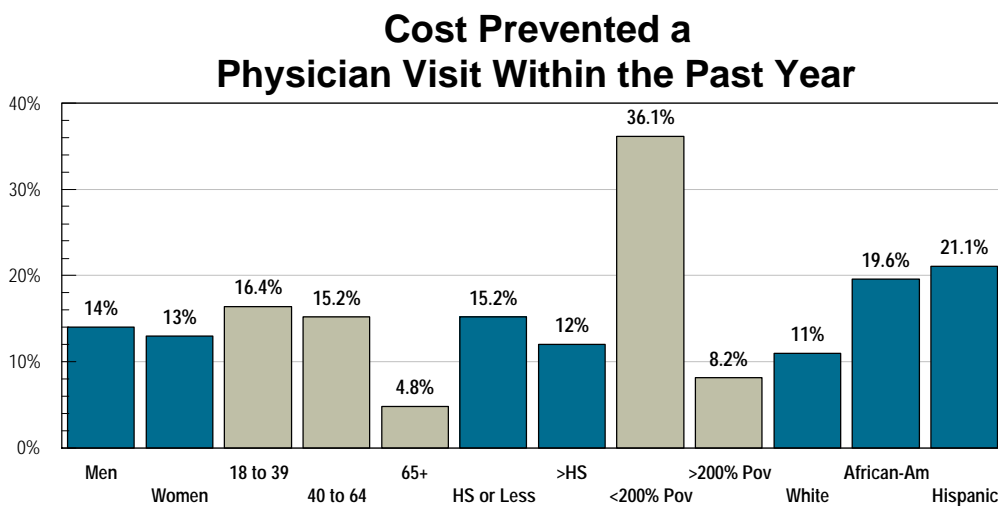
Sources: 1. 2000 PRC Community Needs Survey, Professional Research Consultants

2. 2000 PRC National Health Survey, Professional Research Consultants

Notes: 1. Asked of all respondents.

2. Florida data not available.

Note in the following table that a full 36.1% of persons living at or near the poverty level, 21.1% of Hispanics, and 19.6% of African-Americans have found cost a prohibitive factor when seeking primary medical care in the past year. Also, younger adults are more likely to face prohibitive costs.



Source: 2000 PRC Community Needs Survey, Professional Research Consultants

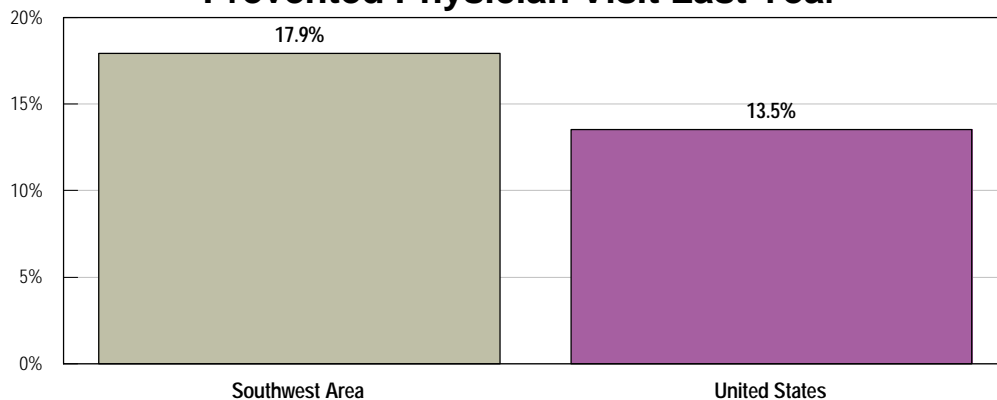
Notes: 1. Demographic breakouts are among findings in the Southwest Area.

2. Asked of all respondents.

Inconvenient Office Hours

Survey respondents were also asked if inconvenient office hours prevented them from seeing a physician in the past year. As shown below, 17.9% responded affirmatively. Across the United States, fewer adults report that inconvenient office hours prevented them from seeing a doctor at some point in the past year (13.5%).

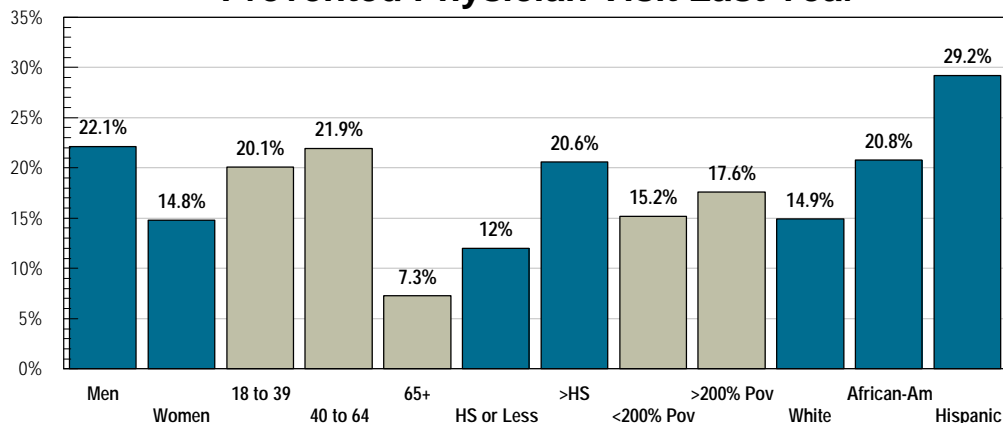
Inconvenient Office Hours Prevented Physician Visit Last Year



Sources: 1. 2000 PRC Community Needs Survey, Professional Research Consultants
 2. 2000 PRC National Health Survey, Professional Research Consultants
 Notes: 1. Asked of all respondents.
 2. Florida data not available.

Note in the following table that inconvenient office hours were more likely to be a prohibitive factor in seeing a doctor in the past year for Hispanics, adults with post-secondary education, younger adults, and men.

Inconvenient Office Hours Prevented Physician Visit Last Year

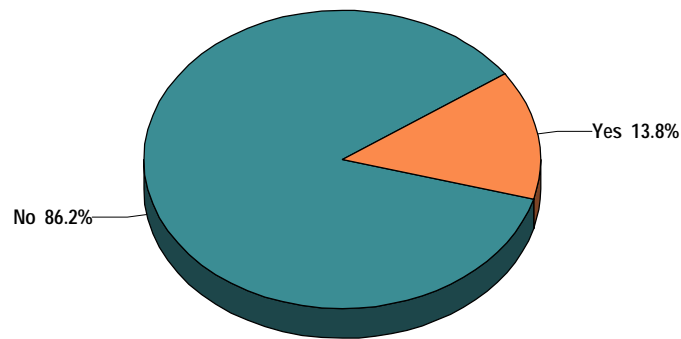


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
 Notes: 1. Demographic breakouts are among findings in the Southwest Area.
 2. Asked of all respondents.

Inconvenient Office Days

Survey respondents were also asked if the **days** on which their physician's office is open prevented them from seeing a physician in the past year. As shown in the adjacent chart, 13.8% responded affirmatively (this question was not covered in the national survey).

**Inconvenient Office Days
Prevented Physician Visit Last Year**

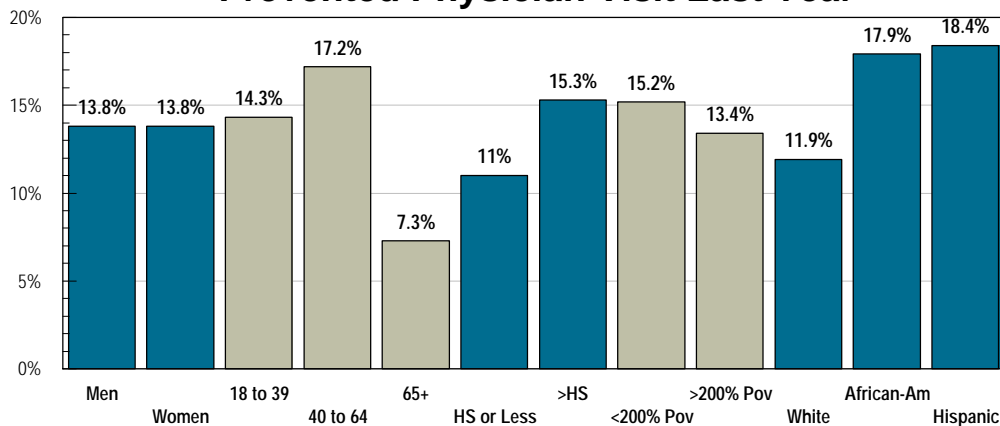


Source: 2000 PRC Community Needs Survey, Professional Research Consultants

- Notes:
1. Asked of all respondents.
 2. Florida and U.S. data not available.

Note in the following table that inconvenient office **days** were more likely to be a prohibitive factor in seeing a doctor in the past year for younger adults, adults with post-secondary education, African-Americans, and Hispanics.

**Inconvenient Office Days
Prevented Physician Visit Last Year**



Source: 2000 PRC Community Needs Survey, Professional Research Consultants

- Notes:
1. Demographic breakouts are among findings in the Southwest Area.
 2. Asked of all respondents.

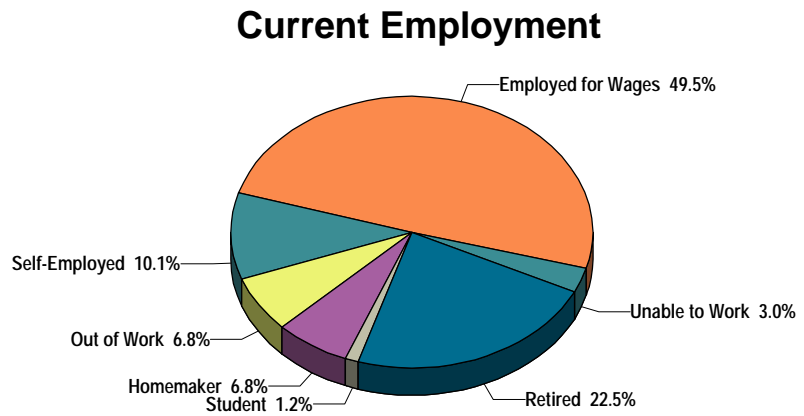
EMPLOYMENT AND INCOME

Employment and Income

The following section illustrates community members' employment status, aspects of employment such as hourly wage and hours worked, and local utilization of government assistance.

Aspects of Current Employment

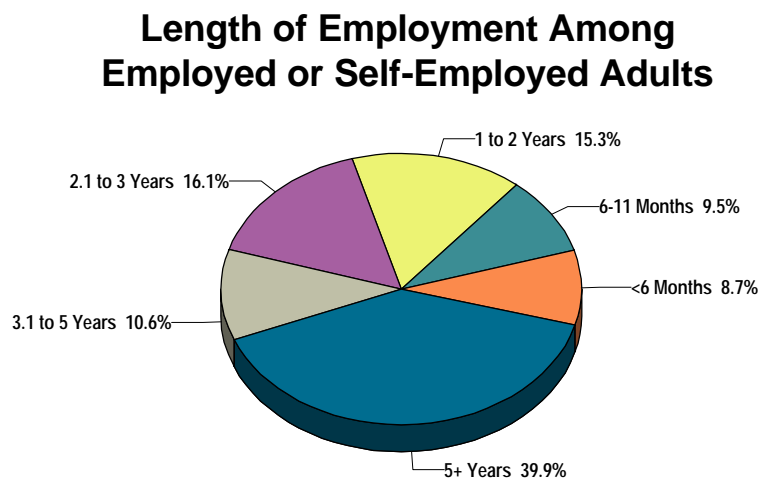
Overall, 49.5% of adults in the Southwest Area are employed for wages, while 10.1% are self-employed and 22.5% are retired. Another 6.8% of local adults are homemakers, while 6.8% are currently out of work and 3.0% are unable to work.



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Reflects all respondents.

Length of Current Employment

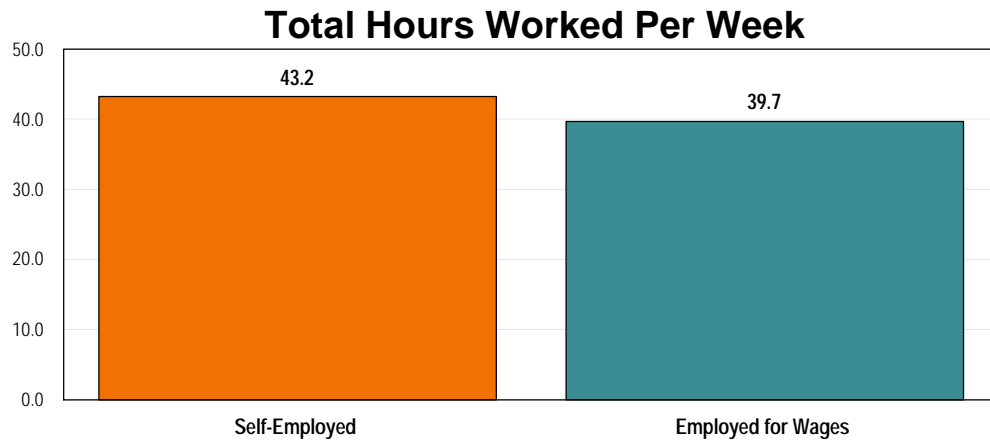
Adults who are currently employed for wages or self-employed were asked to report how long they have been at their present job. As shown, 39.9% have had their jobs for five or more years. Another 10.6% reported having the job between three and five years, and 16.1% said "two to three years." The remaining 33.4% of employed adults have had their current job for two years or less.



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Reflects those respondents who are self-employed or employed for wages.

Weekly Hours Worked

Employed adults were next asked to report on the total hours they work per week. As shown below, adults employed for wages work an average of approximately 40 hours per week, while self-employed adults work more hours per week.



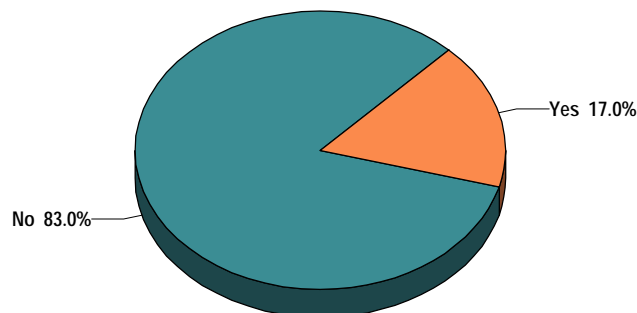
Source: 2000 PRC Community Needs Survey, Professional Research Consultants

Note: Reflects those respondents who are either self-employed or otherwise employed for wages.

Seeking Full-Time Work

Southwest Area adults who are currently employed for wages or self-employed but are working fewer than 40 hours per week were next asked to indicate whether they are seeking full-time work. As shown, just 17.0% of these adults are looking for full-time employment while the majority (83.0%) are not.

Currently Seeking Full-Time Employment (Among Employed Adults Working <40 Hours Weekly)



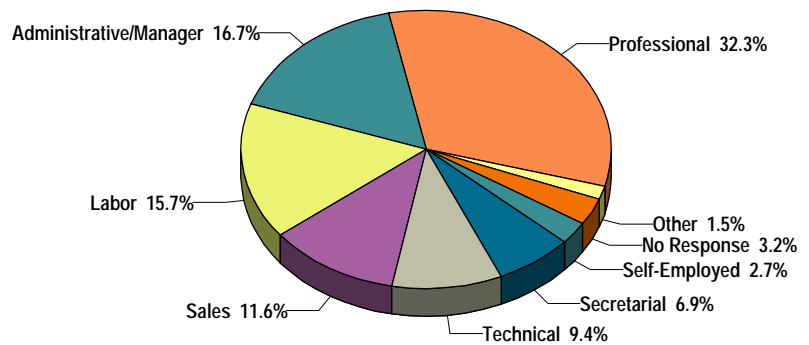
Source: 2000 PRC Community Needs Survey, Professional Research Consultants

Note: Reflects those respondents who are either self-employed or otherwise employed for wages.

Current Occupation

When asked to categorize their current position into a specific occupation, 32.3% of local adults who are employed or self-employed reported that their position is a **professional** one, while 16.7% mentioned an **administrative or managerial** position and 15.7% reported being in a **labor** occupation. Another 11.6% are employed in a **sales** position, while 9.4% of local employed adults are in a **technical** position and 6.9% are in a **secretarial position**.

Current Occupation
(Among Employed or Self-Employed Adults)

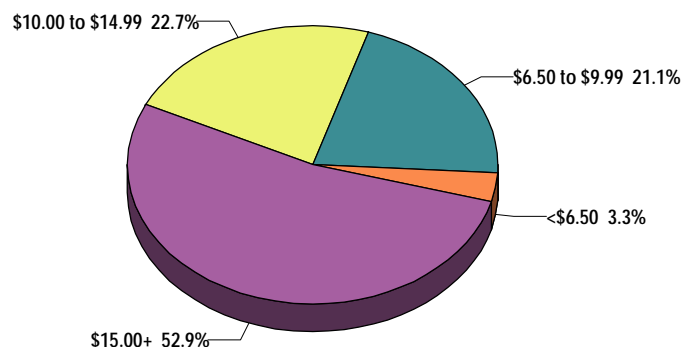


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Reflects those respondents who are either self-employed or otherwise employed for wages.

Hourly Wage

On average, more than one-half (52.9%) of local adults make at least \$15 per hour at their current job. Another 22.7% make between \$10 and \$14.99 per hour, while 21.1% of local adults who are currently employed for wages or self-employed earn between \$6.50 and \$9.99 per hour and the remaining 3.3% of these adults earn less than \$6.50 per hour.

Current Hourly Salary
(Among Employed or Self-Employed Adults)

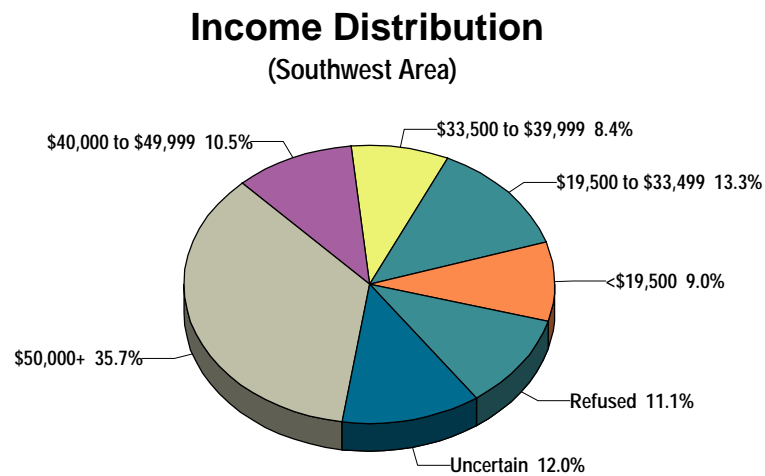


Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Reflects those respondents who are either self-employed or otherwise employed for wages.

Income Distribution

The following chart illustrates the distribution of survey respondents' yearly household incomes. As shown, 9.0% of local adults are living on less than \$19,500 annual income. Another 13.3% of community members earn between \$19,500 and \$33,499 per year, while 8.4% reported a \$33,500 to \$39,999 household income and 10.5% rely on a total income of between \$40,000 and \$49,999. More than one-third (35.7%) of local adults earn \$50,000 or more each year.

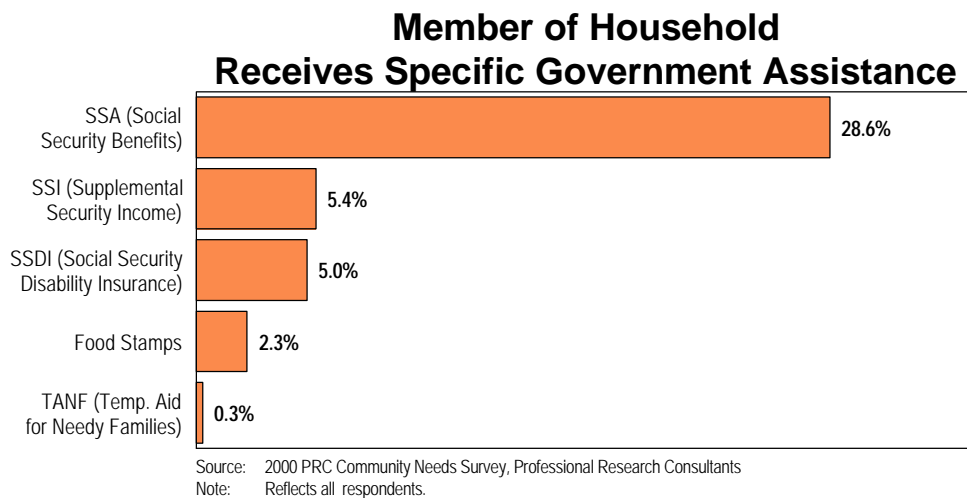
Note below that 12.0% of survey respondents were uncertain as to their total yearly household income and 11.1% refused to answer the question.



Source: 2000 PRC Community Needs Survey, Professional Research Consultants
Note: Asked of all respondents.

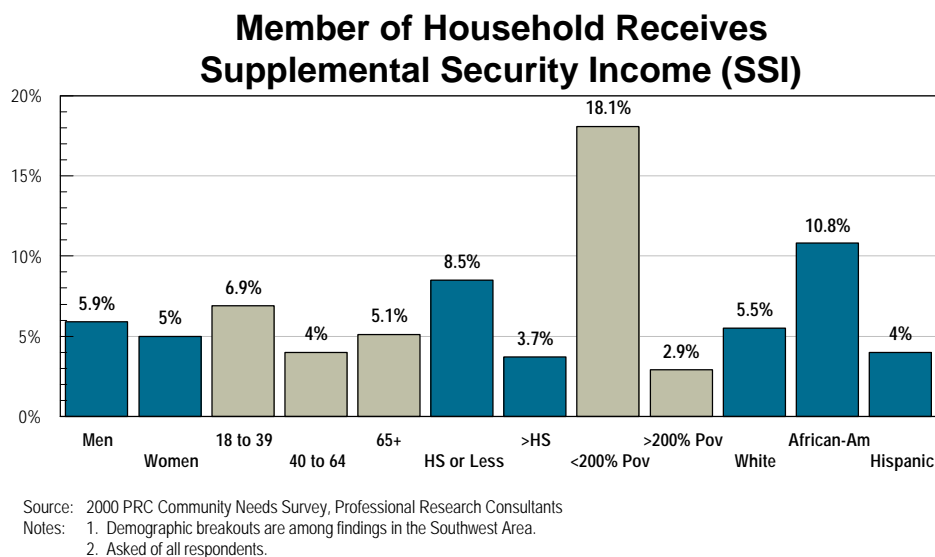
Government Assistance

Survey respondents were asked to indicate whether they or a member of their household currently receives any government assistance, including Social Security benefits (SSA), Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), food stamps, or Temporary Aid for Needy Families (TANF). As detailed below, the largest share of responses (28.6%) was for local adults receiving **Social Security benefits**, followed by **SSI** (mentioned by 5.4%), **SSDI** (5.0%), **food stamps** (2.3%), and **TANF** (just 0.3%).



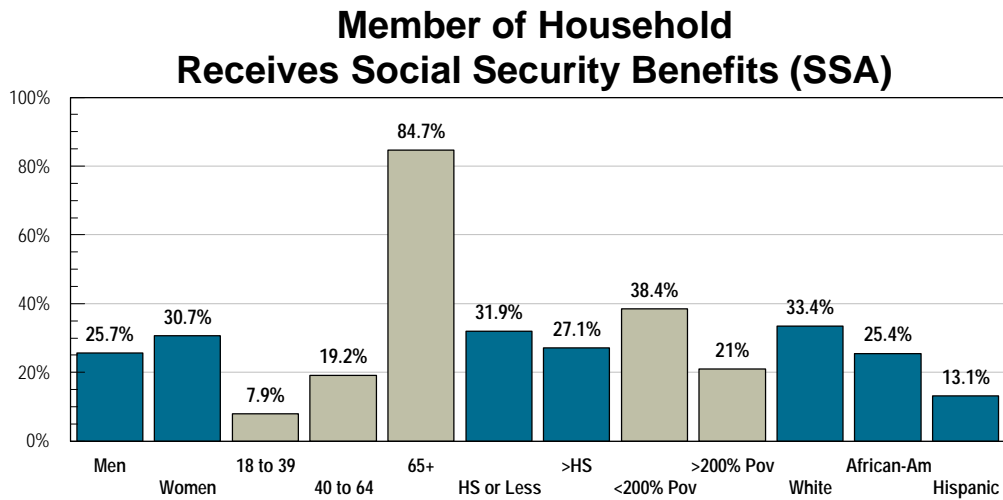
Supplemental Security Income (SSI)

Specific government assistance programs receiving at least 5% of local percentage responses were next viewed by demographic characteristics. As shown below, local adults most likely to be receiving Supplemental Security Income (SSI) include those in the lower income and educational brackets, and African-Americans.



Social Security Benefits (SSA)

Southwest Area community members most likely to be receiving Social Security benefits (SSA) include those aged 65 and older, those living at or near the national poverty level, Whites, and women, as detailed below.

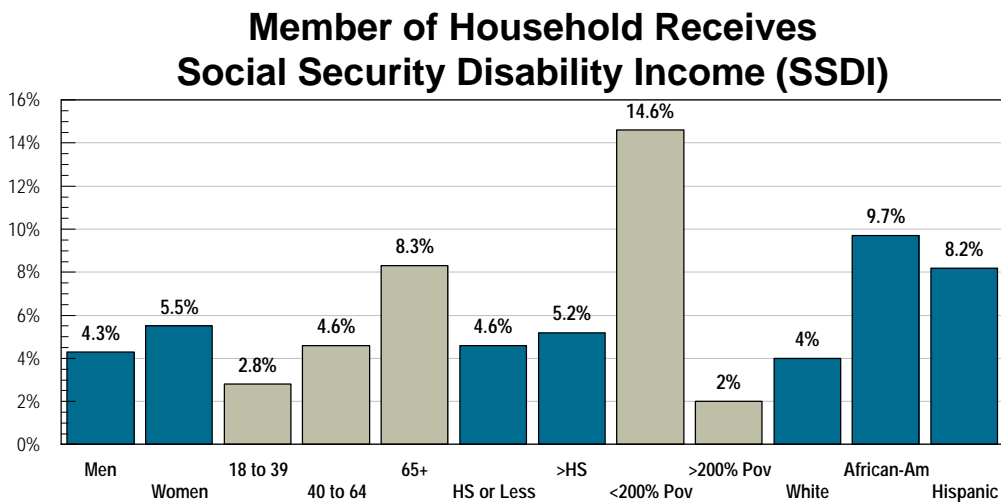


Source: 2000 PRC Community Needs Survey, Professional Research Consultants

Notes: 1. Demographic breakouts are among findings in the Southwest Area.
2. Asked of all respondents.

Social Security Disability Income (SSDI)

Adults living at or near poverty and those aged 65 and older are most likely to receive Social Security Disability Income (SSDI) when viewed by demographic characteristics, as shown below.



Source: 2000 PRC Community Needs Survey, Professional Research Consultants

Notes: 1. Demographic breakouts are among findings in the Southwest Area.
2. Asked of all respondents.

SUMMARY

Summary of Findings in the Southwest Area

The following chart provides a summary of general findings among community members in the Southwest Area. When available, national comparisons from the *PRC National Health Assessment* are also detailed.

SUMMARY TABLE	Southwest Area	SUMMARY TABLE	Southwest Area	United States
HOUSING		HEALTH STATUS		
% of Residents Who Live in a House	61.8%	Currently Experience "Fair" or "Poor" Health	8.8%	10.1%
% of Residents Who Own Their Own Home	77.9%	Health Now Limits Ability to Work	15.1%	
Current Housing is "Fair" or "Poor"	5.0%			
Housing Has a Damaged/Leaking Roof	6.3%	PRIMARY CARE SERVICES		
Housing Has a Plumbing Problem	9.1%	Had a Full Physical Exam Last Year	82.1%	21.2%
Housing Has Broken/Damaged Doors	3.6%	Used the ER for Care in Past Year	19.2%	
Housing Has an Electrical Problem	3.5%			
Housing Has Broken Windows	1.7%	SUBSTANCE ABUSE/MENTAL HEALTH		
Housing Has Boarded Windows	2.0%	Sought Treatment for Drug/Alc Abuse Last Yr	0.1%	
		Currently Experience Anxiety	11.9%	
CHILDCARE SERVICES		Currently Experience Stress	29.0%	
Use or Need Childcare Services	10.8%	Currently Experience Depression	11.1%	
Able to Find Licensed Care	69.5%	Sought Treatment for Mental Health Problem	5.9%	
Childcare is Close to Home/Work	67.4%			
Childcare is "Fair" or "Poor"	5.3%	INSURANCE		
Need After-School Program for Child	17.6%	Currently Covered by Government Health Care	28.2%	
Difficulty Finding After-School Program	25.0%	No Health Care Insurance Coverage (18-64)	11.6%	14.8%
Primary Caregiver for Someone (Not Own Child)	9.3%	Difficulty Getting Dr's Appointment Last Year	19.6%	10.5%
		Cost Prevented Dr Visit Last Year	13.4%	8.8%
TRANSPORTATION		Inconvenient Office Hours Prevented Dr Visit	17.9%	13.5%
Member of HH Has a Car or Truck	94.2%	Inconvenient Office Days Prevented Dr Visit	13.8%	
		EMPLOYMENT		
COMMUNITY SERVICES		Currently Employed or Self-Employed	59.6%	
Know How to Access Home Repair Services	78.1%	Employed 5+ Years in Current Job	39.9%	
Know How to Access Health Services	80.0%	Currently Earn \$15+ Hourly	52.9%	
Know How to Access Social Services	54.1%	Currently Earn <\$6.50 Hourly	3.3%	
Know How to Access Help w/Home Purchase	53.8%	Member of HH Receives SSA	28.6%	
Know How to Access Help in Job-Training	54.0%	Member of HH Receives SSDI	5.0%	
Put on Waiting List for Assistance/Svcs.	4.3%	Member of HH Receives SSI	5.4%	
		Member of HH Receives Food Stamps	2.3%	
		Member of HH Receives TANF	0.3%	