

4.1 Births to Teenagers

4.1.1 Percentage of babies born to teenage mothers

Measurement: The percentage of babies born to teenage mothers is the number of births to teenagers ages 15-19, divided by the total number of live births to mothers in Broward County. Separate percentages are given for whites, non-whites, and all newborns regardless of race. Over time, this percentage tells us whether a growing percentage of babies are being born to teenage mothers.

Explanation: Children born to teenage parents are more likely to have health problems, live in poverty, and receive poor parenting. Also, teen parents often lack the education and economic means needed to raise their children.

Data source: Florida Department of Health, Public Health Indicators Data System (PHIDS), www9.myflorida.com/planning_eval/phstats/

4.1.2 Teen birthrate

Measurement: Births to teenagers are counted as babies born to mothers ages 15-19. The mother's age is self-reported on the child's birth certificate. The teen birth rate is the number of births to teenagers ages 15-19 for every 1,000 teenage girls ages 15-19 in Broward County. Over time, this rate indicates whether the number of teenage girls having babies is increasing or decreasing, taking population growth into account.

Explanation: Children born to teenage parents are more likely to have health problems, live in poverty, and receive poor parenting. Also, teen parents often lack the education and economic means needed to raise their children.

Data source: Florida Department of Health, Public Health Indicators Data System (PHIDS), www9.myflorida.com/planning_eval/phstats/

4.1.3 Repeat births to teenagers

Measurement: Repeat births to teenagers are measured by counting the number of babies born to mothers ages 15-19 who have already had one or more children. Information on prior births and the mother's age is self-reported on the child's birth certificate. Prior births include any previous live births, stillbirths, miscarriages or abortions. The percentage of repeat teen births is the number of babies born to mothers ages 15-19 who already have one or more children divided by the number of live births to mothers ages 15-19.

Explanation: Children born to teenage parents are more likely to have health problems, live in poverty, and receive poor parenting. Also, teen-age mothers with repeat births are most at risk of not completing their high school education.

Data source: Florida Department of Health, Public Health Indicators Data System (PHIDS), www9.myflorida.com/planning_eval/phstats/

4.2 Low Birth Weight

4.2.1 Low birth weight babies

Measurement: Low birth weight babies weigh less than 2,500 grams or 5 lbs. 9 oz. at birth, regardless of whether they are born full-term or prematurely. The baby's weight is recorded by hospital staff on the birth certificate. Births include only live births; still births are excluded. Separate percentages are given for whites, non-whites, and all newborns regardless of race. For example, the percentage of non-white babies born with a low birth weight is calculated by dividing the number of low birth weight babies born to non-whites, by the total number of non-white births.

Explanation: Low birth weight babies are more likely than normal weight babies to have health problems, develop disabilities and die in the first month after birth.

Data source: Florida Department of Health, Public Health Indicators Data System (PHIDS), www9.myflorida.com/planning_eval/phstats/

4.3 Infant Mortality

4.3.1 Infants dying in the first year of life

Measurement: Infant mortality refers to the death of a baby before his or her first birthday. Stillbirths, miscarriages and abortions are excluded. Infant mortality rates are presented for whites, non-whites and all infants regardless of race. The infant mortality rate is calculated by dividing the total number of infant deaths by the total number of live births and multiplying by 1,000.

Explanation: The infant mortality rate is a worldwide health indicator. In Florida, non-white babies are twice as likely to die in the first year of life as white babies.

Data source: Florida Department of Health, Public Health Indicators Data System (PHIDS), www9.myflorida.com/planning_eval/phstats/

4.4 Babies with Congenital Syphilis

4.4.1 Babies with congenital syphilis

Measurement: Babies with congenital syphilis are counted as the number of reported cases.

Explanation: Congenital syphilis may result in premature birth or fetal death in pregnancies where the mother is infected. Infants infected "in utero" may have skeletal, neurological, hematological and ocular disorders, nephropathy, and cutaneous lesions.



Congenital syphilis, if untreated in the pregnant woman, causes fetal or perinatal death in 40 percent of affected pregnancies.

Data source: Florida Department of Health, Office of Planning, Evaluation and Data Analysis.

4.5 Prenatal and Infant Screening

4.5.1 Prenatal screening

Measurement: The percentage of all mothers who receive a prenatal screening. A prenatal screening questionnaire is administered, by consent, to pregnant women so that they can be referred to appropriate services if their unborn infants are at risk of death or disability. The questionnaire is administered by family practitioners, obstetricians and other primary health care providers. It contains 12 items about the mother's health, safety, prenatal care, problems with previous pregnancies, nutrition, smoking, drug and alcohol use and conditions in her living situation. Points are scored for the presence of each risk factor. Mothers whose unborn infants are at risk are defined as those scoring a total of 4 or more points.

Explanation: Prenatal screening promotes the birth of healthy babies and helps to prevent death and disability.

Data source: Florida Department of Health, Office of Planning, Evaluation and Data Analysis - special tabulations made available by the Broward Healthy Start Coalition..

4.5.2 Infant screening after birth

Measurement: The percentage of all babies born that are screened after birth. With the mother's consent, infants are screened by hospital staff on risk factors in their social environment that are highly correlated with

death after the first 28 days of life. Information is reported on the child's birth certificate on the following 10 risk factors: the mother's age, race, marital status, and education; timing of prenatal care; the baby's birth weight; the mother's use of tobacco and alcohol during pregnancy; and health problems and congenital anomalies identified at birth. Points are scored for the presence of each risk factor. Infants at risk are those with a total score of 4 points or higher. Mothers of these babies are referred to medical and social services to improve their babies' health and chances of survival.

Explanation: Babies are less likely to die or develop lifelong disabilities if problems are identified and treated at birth.

Data source: Florida Department of Health, Office of Planning, Evaluation and Data Analysis - special tabulations made available by the Broward Healthy Start Coalition.

4.6 Adult Health

4.6.1 General health

Measurement: People's perception of their own health status is measured by telephone survey of a statistically valid sample of 2,400 Broward County residents age 18 and older. Specifically, the survey asks, the following question: "Would you say that in general your health is excellent, very good, good, fair or poor?" Results are presented separately for all respondents, and for respondents in three income levels and in two age groups, for surveys conducted in 1997, 1999/2000 and 2002. Florida data also are collected by telephone survey of a statistically valid sample of Floridians. The question: "How is your general health?"

Explanation: How people perceive their health is a strong predictor of hospitalization and death.

Broward data source: Quality of Life Assessments of Broward County, Florida, by Professional Research Consultants, Inc., Omaha, Nebraska (1997 - Q3, 1999/2000 - Q5, 2002 - Q5), www.sfrpc.com/ccb/prchome.htm.

Florida data source: US Department of Health and Human Services, National Center for Chronic Disease Prevention and Health Promotion, *Behavioral Risk Factor Surveillance System - Prevalence Data*, available online at <http://apps.nccd.cdc.gov/brfss/>.

4.7 Health Insurance

4.7.1 Uninsured

4.7.2 Race of uninsured

Measurement: In Broward County, the percentage of people without health insurance is measured by telephone survey of a statistically valid sample of 2,400 county residents age 18 and older. Specifically, the survey asks "Do you have any kind of health care coverage including health insurance, prepaid plans such as HMO's (Health Maintenance Organizations) or government plans such as Medicaid?" Florida data also are collected by telephone survey of a statistically valid sample of Floridians. The question: "Do you have any kind of health care coverage?"

Explanation: Health insurance allows people to get the treatment and care they need to maintain good health, seek early treatment for medical problems, and reduce the financial hardship of long-term or catastrophic illnesses.

Broward data source: Quality of Life Assessments of Broward County, Florida, by Professional Research Consultants, Inc.,



Omaha, Nebraska (1997 - Q7, 1999/2000 - Q9, 2002 - Q9), www.sfrpc.com/ccb/prchome.htm.
Florida data source: US Department of Health and Human Services, National Center for Chronic Disease Prevention and Health Promotion, *Behavioral Risk Factor Surveillance System - Prevalence Data*, available online at <http://apps.nccd.cdc.gov/brfss/>.

4.7.3 Affordability of health care

Measurement: Affordability of health care is measured by telephone survey of a statistically valid sample of 2,400 Broward County residents age 18 and older. Specifically the survey asks, "Was there a time during the past 12 months when you needed to see a doctor, but could not because of the cost?" Possible responses are "yes" or "no." Results are presented for surveys conducted in 1994, 1997, 1999/2000 and 2002.

Explanation: People may not be able to afford health care because they do not have health insurance or cannot pay the deductibles.

Broward data source: Quality of Life Assessments of Broward County, Florida, by Professional Research Consultants, Inc., Omaha, Nebraska (1997 - Q9, 1999/2000 - Q13, 2002 - Q12), www.sfrpc.com/ccb/prchome.htm.

4.7.4 Primary Care Center service

Measurement:

Explanation:

Broward data source: Memorial Healthcare System and North Broward Hospital District.

4.8 Health Care Satisfaction

4.8.1 Quality of health care

Measurement: Opinion of the quality of medical care is measured by telephone survey of a statistically valid sample of 2,400 Broward County residents age 18 and older. Specifically, the survey asks, "In general, how would you rate the health care you currently receive?" The choices are excellent, very good, good, fair or poor. Results are presented for surveys conducted in 1994, 1997, 1999/2000 and 2002.

Explanation: Consumer evaluation of the quality of care is an important but often neglected outcome.

Broward data source: Quality of Life Assessments of Broward County, Florida, by Professional Research Consultants, Inc., Omaha, Nebraska (1997 - Q102, 1999/2000 - Q92, 2002 - Q90), www.sfrpc.com/ccb/prchome.htm.

4.8.2 Public primary care system

Measurement:

Explanation:

Broward data source: Memorial Healthcare System and North Broward Hospital District.

4.9 Deaths

4.9.1 Death rate

4.9.2 Major causes of death

Measurement: Cause of death is determined by a private physician or medical examiner and recorded on the death certificate. Deaths include all county or state residents who die in any state or U.S. territory. The death rate is calculated by dividing the total number of deaths by the total population and multiplying

by 100,000. Results are presented for all deaths and the top four specific causes of death.

Explanation: Death rates indicate whether progress is being made in reducing the most serious effects of disease, accidents and crime.

Data source: Florida Department of Health, Public Health Indicators Data System (PHIDS), www9.myflorida.com/planning_eval/phstats/

4.9.3 Unintentional death rate

Measurement: The total number of deaths due to unintentional injury among youths under 20 years of age, divided by the total number of youths in the same age range.

Explanation: Unintentional injuries are the major cause of death in the age group from 1 to 19 years.

Data source: Broward County Health Department, special tabulations of the Public Health Indicators Data System (PHIDS).

4.10 Communicable Diseases

4.10.1 Primary communicable diseases

Measurement: Vaccine-preventable, sexually transmitted, intestinal and animal-transmitted disease categories encompass over 50 communicable diseases reported by laboratories, physicians, and other health providers to county public health units. Vaccine-preventable diseases include diphtheria, tetanus, whooping cough, polio, smallpox, Hepatitis B, measles, mumps, rubella and HIB (a major cause of meningitis). Sexually transmitted diseases include gonorrhea, syphilis and other diseases transmitted through sexual contact. Intestinal diseases include hepatitis A, salmonella, giardiasis, shigellosis, and other diseases of the digestive system. Animal-transmitted diseases include rabies,



encephalitis, brucellosis, and other diseases transmitted by rodents, insects and other animals. The increasing intestinal disease rate reflects improvements in surveillance and the diagnosis of new diseases that were not recognized in earlier years.

Explanation: The four major disease categories give the best overall picture of our success in preventing communicable diseases.

Data source: Florida Department of Health, Public Health Indicators Data System (PHIDS), www9.myflorida.com/planning_eval/phstats/

4.11 Suicide

4.11.1 Suicide

4.11.2 Suicide by age group

Measurement: A death is attributed to suicide if a private physician or medical examiner lists suicide as the underlying cause of death on the death certificate. Numbers include all suicide deaths regardless of whether they occurred in the area, another state or a US territory.

Explanation: Suicides indicate that people are having difficulty coping with personal crises, serious health problems, or other life stresses.

Data sources: Florida Department of Health, Public Health Indicators Data System (PHIDS), www9.myflorida.com/planning_eval/phstats/ for 4.11.1. Broward County Health Department, special tabulations from PHIDS for 4.11.2.

4.12 Mental Health

4.12.1 Mental health of adults

Measurement: The mental health of adults is measured by telephone survey of a statistically valid sample of 2,400 Broward residents age 18

and older. Specifically, the survey asks, "Now, thinking about your mental health, which includes stress, depression and problems with emotions, for how many days during the past 30 days was your mental health not good?" Results are presented for surveys conducted in 1994, 1997, 1999/2000 and 2002, and are presented separately for adults 18-64 and for seniors, 65 years or older.

Explanation: People with mental health problems often have difficulty coping with life stresses and personal crises that may result in problems keeping a job or maintaining personal relationships.

Broward data source: Quality of Life Assessments of Broward County, Florida, by Professional Research Consultants, Inc., Omaha, Nebraska (1997 - Q5, 1999/2000 - Q7, 2002 - Q7), www.sfrpc.com/ccb/prchome.htm

4.12.2 Mental health days

Measurement: Average number of days individuals with mental illness spend in the community on an annual basis. Statewide this is measured through the Department of Children and Families for services paid with state funds (Alcohol, Drug Abuse and Mental Health and/or Medicaid). The contracted provider reports this information on admission, every three (3) months, and at discharge. The data is maintained in the state's data warehouse. The measure is an average. The numerator is the sum of average number of days out of thirty each client spends in the community determined at the time of post-admission assessments during the fiscal year. The denominator is an unduplicated count of the total number of clients for whom the average has been recorded. This is converted to an annual average by multiplying by 12.1667. Data are presented separately for seriously and persistently mentally ill adults, seriously

emotionally disturbed children and emotionally disturbed children.

Explanation: This is an indicator of the person's ability to function in the community or in a least restrictive setting. It is an objective count of the number of days spent in the community (not in crisis stabilization unit, short-term residential treatment unit, state treatment facility, inpatient unit, jail, homeless, Department of Juvenile Justice commitment program). The reliability of this measure is dependent on the provider's compliance with data reporting. Providers are required by contract to report performance data including client outcomes. The Department monitors the extent to which providers comply with these contractual requirements.

Data source: Florida Department of Children and Families, Alcohol, Drug Abuse and Mental Health Data Warehouse (ADMDW).

4.13 Immunizations

4.13.1 Immunizations

Measurement: A two-year-old is adequately immunized if he or she has received the required vaccines for the following diseases: diphtheria, tetanus, whooping cough, polio, Hepatitis B, measles, mumps, rubella and HIB (a major cause of meningitis). The percentage of children who have completed these immunizations is determined from a statistically valid sample of children's medical records.

Explanation: Children need to be immunized during the first two years of life when they are most susceptible to vaccine-preventable diseases that can result in death or disability.

Data source: Bureau of Immunizations, Division of Disease Control.



4.14 Physical Fitness

4.14.1 Physical exercise

Measurement: Information about type, frequency, and intensity of up to two physical exercises is obtained by telephone survey of a statistically valid sample of 2,400 Broward County residents age 18 and older. Specifically, the survey asks, “During the past month, did you participate in any physical activities or exercises such as running, calisthenics, golf, gardening or walking for exercise?” (b) “How many times per week or per month did you take part in these activities during the past month?” (c) “And when you took part in this activity, for how many minutes or hours did you usually keep at it?” Results are presented for surveys conducted in 1994, 1997, 1999/2000 and 2002.

Explanation: Physical exercise increases strength, endurance, and cardiovascular health.

Broward data source: Quality of Life Assessments of Broward County, Florida, by Professional Research Consultants, Inc., Omaha, Nebraska (1997 - Q38/Q40/Q41, 1999/2000 - Q38/Q39/Q40, 2002 - Q38/Q39/Q40), www.sfrpc.com/ccb/prchome.htm.

4.14.2 Obesity

Measurement: Height and weight are obtained by telephone survey of a statistically valid sample of 2,400 Broward County residents age 18 and older. The percentage overweight is determined using nationally standardized ideal body weights developed by the Metropolitan Life Insurance Company. Results are presented for surveys conducted in 1994, 1997, 1999/2000 and 2002.

Explanation: Obesity increases the risk of serious and chronic health problems such as heart disease, high blood pressure, knee and low back pain, diabetes, and certain cancers.

Broward data source: Quality of Life Assessments of Broward County, Florida, by Professional Research Consultants, Inc., Omaha, Nebraska (1997 - Q136, 1999/2000 - Q167, 2002 - Q167), www.sfrpc.com/ccb/prchome.htm.

4.14.3 Youth obesity

Measurement: Students who were at or above the 95th percentile for body mass index by age and sex based on reference data from CDC growth charts, National Center for Health Statistics, 2000.

Explanation: Obesity increases the risk of serious and chronic health problems such as heart disease, high blood pressure, knee and low back pain, diabetes, and certain cancers.

Data source: U.S. Department of Health and Human Services, National Center for Chronic Disease Prevention and Health Promotion, *Youth Risk Behavior Surveillance System* (2001), available online at www.cdc.gov/nccdphp/dash/yrbs/.

4.14.4 Youth physical exercise

Measurement: Information about youth smoking is obtained from the Youth Risk Behavior Surveillance System. The survey employs a sample of students in grades 9 through 12, in public and private schools in the 50 states and the District of Columbia. This indicator reports the percentage of students who exercised or participated in physical activities for at least 20 minutes that made them sweat and breathe hard on three or more of the past seven days.

Explanation: Physical exercise increases strength, endurance, and cardiovascular health.

Data source: U.S. Department of Health and Human Services, National Center for Chronic Disease Prevention and Health Promotion, *Youth Risk Behavior Surveillance System* (1997, 1999, 2001), available online at www.cdc.gov/nccdphp/dash/yrbs/.

4.15 Alcohol and Drug Use

4.15.1 Youth alcohol use

4.15.2 Youth marijuana use

4.15.3 Youth cocaine use

Measurement: Youth drug use is obtained from biennial Youth Risk Behavior Surveillance System surveys conducted among a sample of Broward County high school students in grades 9 through 12 every odd year since 1991.

Current drug use is defined as having used alcohol, marijuana or any form of cocaine on one or more occasions in the 30 days preceding the study.

Explanation: Alcohol and drug use can lead to health, family, crime, and employment problems. The younger a person starts using drugs, the greater the chance of serious drug problems and addiction in later life. In most instances, drug use among youth begins with either alcohol or marijuana. The prevention or delaying of first use of drugs by youth prevents serious drug problems from occurring in adulthood.

Data source: U.S. Department of Health and Human Services, National Center for Chronic Disease Prevention and Health Promotion, *Youth Risk Behavior Surveillance System* (1997, 1999, 2001), available online at www.cdc.gov/nccdphp/dash/yrbs/.



4.16 Cigarette Smoking

4.16.1 Youth smoking

Measurement: Information about youth smoking is obtained from the Youth Risk Behavior Surveillance System. The survey employs a sample of students in grades 9 through 12, in public and private schools in the 50 states and the District of Columbia. One of the cities in the sample is Fort Lauderdale; the CDC reports that the weighted data from most of the cities can be generalized to all public-school students in the jurisdiction. Specifically, the item reported relates to the percentage of students who reported that they were current cigarette smokers, defined as having used cigarettes on one or more of the 30 days preceding the survey.

Explanation: Cigarette smoking has been linked to heart disease, cancer and other health problems.

Data source: U.S. Department of Health and Human Services, National Center for Chronic Disease Prevention and Health Promotion, *Youth Risk Behavior Surveillance System* (1997, 1999, 2001), available online at www.cdc.gov/nccdphp/dash/yrbs/

4.16.2 Adult smoking

Measurement: Information about adult smoking is obtained by telephone survey of a statistically valid sample of 2,400 Broward County residents age 18 and older. Specifically, the survey asks, “Do you smoke cigarettes now?” Possible responses are “yes” or “no.” Results are presented for surveys conducted in 1994, 1997, 1999/2000 and 2002.

Explanation: Cigarette smoking has been linked to heart disease, cancer and other health problems.

Broward data source: Quality of Life Assessments of Broward County, Florida, by Professional Research Consultants, Inc., Omaha, Nebraska (1997 - Q46, 1999/2000 - Q41, 2002 - Q41), www.sfrpc.com/ccb/prchome.htm.

4.17 Check-ups / Preventive Health

4.17.1 Medical check-ups

Measurement: Information on medical check-ups is obtained by telephone survey of a statistically valid sample of 2,400 Broward County residents age 18 and older. Specifically, the survey asks, “About how long has it been since you last visited a doctor for a routine check-up?” Possible responses are within the past year, within the past 2 years, within the past 5 years, 5 or more years ago, or never. Results are presented for surveys conducted in 1997, 1999/2000 and 2002.

Explanation: Regular medical check-ups offer prevention and early detection of health problems.

Broward data source: Quality of Life Assessments of Broward County, Florida, by Professional Research Consultants, Inc., Omaha, Nebraska (1997 - Q10, 1999/2000 - Q14, 2002 - Q13), www.sfrpc.com/ccb/prchome.htm.

4.17.2 Mammograms

Measurement: Women over age 50 are questioned by telephone survey about how long it has been since their last mammogram and clinical breast exam. Specifically, the survey asks, “A mammogram is an x-ray of the breast to look for cancer. How long has it been since you had your last mammogram?” The survey also asks, “A clinical breast exam is

when a doctor, nurse, or other health professional feels the breast for lumps. How long has it been since you had your last breast exam?” Possible responses are within the past year, within the past 2 years, within the past 3 years, within the past 5 years, 5 or more years ago, or never. Results are presented for surveys conducted in 1997, 1999/2000 and 2002.

Explanation: An annual mammogram is recommended for all women age 50 and over by the majority of health organizations. Mammograms offer early detection of breast cancer, which can prevent the need for radical surgery and can strengthen chances of survival.

Broward data source: Quality of Life Assessments of Broward County, Florida, by Professional Research Consultants, Inc., Omaha, Nebraska (1997 - Q71, 1999/2000 - Q58, 2002 - Q58), www.sfrpc.com/ccb/prchome.htm.

Florida data source: US Department of Health and Human Services, National Center for Chronic Disease Prevention and Health Promotion, *Behavioral Risk Factor Surveillance System - Prevalence Data*, available online at <http://apps.nccd.cdc.gov/brfss/>.

4.17.3 Digital rectal exam

Measurement: Whether people have received a digital rectal exam is measured by telephone survey of a statistically valid sample of 2,400 Broward County residents age 18 and older. Specifically, survey respondents who are at least 40 years of age are asked, “A digital rectal exam is when a doctor, nurse, or other health professional inserts a finger in the rectum to check for cancer and other health problems. When did you have your last digital rectal exam?” Possible responses are within the past year, within the past 2 years, within the past 3 years, within the past 5 years, 5 or more years



ago, or never. Results are presented for surveys conducted in 1997, 1999/2000 and 2002.

Explanation: A malignant tumor around the prostate can result in back pain, painful urination or painful ejaculation. Also, urinating may be difficult and the urine may contain blood or pus. These symptoms, however, need not be present with prostate cancer. Prostate cancer is detected by palpation through digital examination. It occurs in men most often after the age of 40, thus it is essential that after this age digital rectal examinations be performed regularly.

Broward data source: Quality of Life Assessments of Broward County, Florida, by Professional Research Consultants, Inc., Omaha, Nebraska (1997 - Q81, 1999/2000 - Q63, 2002 - Q63), www.sfrpc.com/ccb/prchome.htm.

4.17.4 Dental check-ups

Measurement: Whether people have received dental checkups is measured by telephone survey of a statistically valid sample of 2,400 Broward County residents age 18 and older. Specifically, survey respondents are asked, "About how long has it been since you last visited a dentist for a routine check up?" If the household has any children under 18, the respondent is asked, "Thinking about the child who had the most recent birthday, about how long has it been since this child visited a dentist for a routine check up?" Possible responses are within the past 6 months, within the past year, within the past 2 years, within the past 5 years, 5 or more years ago, or never. Results are presented for both children and adults, for surveys conducted in 1997, 1999/2000 and 2002.

Explanation: Access to dental care is the most reliable indicator of the population's dental

health when information on actual dental health is not available.

Broward data source: Quality of Life Assessments of Broward County, Florida, by Professional Research Consultants, Inc., Omaha, Nebraska (1997 - Q11/Q13, 1999/2000 - Q15/137, 2002 - Q14/137), www.sfrpc.com/ccb/prchome.htm.

Florida data source: US Department of Health and Human Services, National Center for Chronic Disease Prevention and Health Promotion, *Behavioral Risk Factor Surveillance System - Prevalence Data*, available online at <http://apps.nccd.cdc.gov/brfss/>.

