



*Suwannee County Health
Needs Assessment*

November 2007



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Suwannee County Health Department

Nancy McCullers, PhD
*Suwannee County Health
Department Administrator*

Wanda Crowe, RN, BSN
*Community Health Nursing
Director*

Daisy Serrano
Clerk Specialist/Interpreter

WellFlorida Council

Shane Bailey, MBA/HCM, CHES
Associate Planner

Sandra Carroll
Data and Technology Coordinator

Lindsey Michaels, MPH, MA, CHES
Associate Planner

Jeff Feller, MSISE
Associate Director

Celia Paynter
Planner



Prepared in collaboration by the
Suwannee County Health Department
and WellFlorida Council.

WellFlorida Council
1785 NW 80th Blvd.
Gainesville, FL 32606
Tel: (352) 313-6500
Fax: (352) 313-6515
Web: www.wellflorida.org

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Executive Summary

Introduction

In an effort to improve the health of the residents of Suwannee County, a collaborative partnership was formed between the Suwannee County Health Department and the WellFlorida Council for the purpose of conducting a needs assessment for use by the Suwannee County Health Department and other community partners. This needs assessment consists of demographic, socioeconomic and health status information that will be used to identify areas where targeted interventions and policy changes may have the greatest impact. Once community needs are identified through quantitative data analysis of demographic, socioeconomic, and health status information and qualitative interviews, the strategic planning process can begin.

A summary of key findings is presented at the end of each section.

Demographic and Socioeconomic Profile

The demographic and socioeconomic profile examines the population characteristics of Suwannee County. When data are available, a comparison is provided with the state of Florida. Zipcode level data for Suwannee County are presented, where data are available.

Suwannee is one of the less populated counties in Florida. With a population of 39,714 and a land area of 688 square miles, the density is 57 people per square mile, less than a third of the state average. However, the population is growing. Between 2000 and 2007 the rate of increase was 14 percent as compared to Florida's 18.2 percent. While Suwannee County encompasses six zipcodes, the area currently experiencing the largest growth is (32008), which includes the city of Branford. Population growth in Suwannee County is predominantly due to in-migration.

In terms of the racial/ethnic distribution, 81.5 percent of Suwannee County's residents are white, 14.2 percent are black and 3.6 percent identify themselves as "other"; Hispanics comprise 7 percent of the population and those who identify themselves as Asian make up less than 1 percent.

The per capita and median household incomes in Suwannee are substantially lower than for the state. The percentage of people living in poverty in Suwannee County is notably higher than it is for the state of Florida. Over 22 percent of the children in Suwannee are living in poverty and 18.5 percent of all persons are living in poverty, which is higher than the state average of 12.5 percent.

In Suwannee County, the high school graduation rate is lower than the state and the drop out rate is higher than it is for the state. In Suwannee County, fewer people, 15.6 percent, achieve a bachelor's degree or higher than is typical for Florida, 29.4 percent.

Unemployment is decreasing in Suwannee County, as it is statewide and nationally. The unemployment rate has been consistently maintained as it has been for Florida. In 2006, the unemployment rate for Suwannee was 3.2 as compared to 3.3 for the state.

Health Status

Communities are interested in the health status of their population because healthy people are an essential resource. Numerous factors have a significant impact on good health: lifestyle and behavior, human biology, and environmental and socioeconomic conditions, as well as the individual's access to adequate and appropriate health care and medical services.

Currently, in Suwannee County, heart disease is the leading cause of death, followed by cancer. This is consistent with the state of Florida and the nation, in which heart disease is the leading cause of death, followed by cancer. Differences in crude rates between black, white, and non-white populations are reviewed in the health status section and summarized in the key findings. Reviews of age-adjusted and age-specific mortality rates are provided as well.

Morbidity, defined as the presence of disease, is another measure to determine a population's health status. Hospitalization and reported infectious disease data can be used as indicators of morbidity. A review of hospital discharge data indicate that the most frequent reason for discharge among all Suwannee County residents is normal newborn, followed by vaginal delivery without complicating diagnosis, heart failure and shock, chronic obstructive pulmonary disease and simple pneumonia and pleurisy. The rate of avoidable hospitalization discharges in Suwannee County is substantially higher than for Florida.

Behavior is another important component of health, as well as an indicator for health risk and potential improvement. Suwannee County residents have a lower percentage of physical activity and a higher percentage of individuals who are overweight. The county also has a lower percentage of individuals who received a flu shot in the previous year when compared to the state. Moreover, Suwannee County has a higher rate of tobacco use when compared to Florida.

Maternal health issues are also discussed in the health status section. Rates for teen pregnancy have been higher in Suwannee County than at the state level. Additionally, rates for prenatal care access during the first trimester are lower in Suwannee County than that of the state. The final maternal and child health birth indicator is repeat births to mothers 15-19. In Suwannee County the rate is currently higher than the rate for the state of Florida.

Mental health indicators such as suicide rates, domestic violence rates, hospitalizations rates for mental health issues, and Baker Act data can be used to assess the mental health of a community. Mental health is a vital and sometimes overlooked component to the overall health of an individual and community. Because Suwannee County has been federally designated as a medically underserved county, there is a county-wide mental health professional shortage.

Statistically, whites are more likely to commit suicide than any other racial/ethnic demographic. Suwannee County reflects this trend and with increased rates of suicide among white residents.

Although the crude occurrences of domestic violence in Suwannee County are lower than for the state, the total rate per 100,000 in Suwannee County has significantly reduced since 2002.

Health Resource Availability and Access

This section examines the health resources available to the citizens of Suwannee County and identifies gaps in service as well as barriers to health care.

As mentioned above, the Federal Government has designated Suwannee County as a Health Professional Shortage Area (HPSA) for primary, dental, and mental health care. It has also been deemed a Medically Underserved Area (MUA), as of April 25, 2007.

Twenty (20.5) percent of the non-elderly residents in Suwannee County have no health insurance, which is higher than Florida's 19.2 percent. As of December 31, 2005, Suwannee County had 7,597 residents who were eligible to receive Medicaid. The majority of Medicaid eligible in Suwannee County is children under the age of 18.

In Suwannee County during calendar year 2006, the rate of avoidable hospitalization was 19.0 per 1000, which is substantially higher than the rate for Florida, 13.9 percent, overall. Two of the main payor sources for avoidable hospitalizations in Suwannee are Medicare and Medicaid. The most frequent cause of avoidable hospitalization for the county is dehydration/volume depletion, followed by cellulitis, and congestive heart failure.

Community Input

As mentioned above, a community health needs assessment provides a cross-section of demographic and socioeconomic factors, health outcomes and health status data in order to better understand the needs of the community. In order to complete the process of conducting a needs assessment of a community, both qualitative and quantitative data must be collected to establish the community perspective, and are equally as important to the process. The Community Input section of this needs assessment represents qualitative data collection and highlights the community perspective.

This final stage in the data gathering process is to collect and evaluate various forms of qualitative community input and opinions on the issues uncovered in the quantitative data analysis of demographic and health status information. Qualitative data for this component of the process was collected through focus groups within the community and interviews with key informants and leaders in Suwannee County.

This Community Input section represents the effort to gauge community perspectives on health issues and priorities. This information is critical to the success of a county-wide needs assessment process and represents a key step in the process of ultimately achieving improved health care and health outcomes for residents of Suwannee County.

In this section fifteen community leaders who work in healthcare, government, and business share their views on healthcare in Suwannee County and the resources available to meet the

needs of citizens. They discuss issues relating to access and affordability of healthcare, poverty, and the complex interactions between individuals and the health delivery system. Their comments serve to augment and inform the quantitative data provided in the previous sections. The health issue of greatest concern to community leaders was indigent care and care for non-English speaking members of the community. While many leaders indicated that services are available in the county, access for low income, uninsured, and Spanish speaking residents remains highly problematic.

Demographic and Socioeconomic Characteristics

Introduction

The demographic and socio-economic characteristics of Suwannee County residents are reviewed in this section. Demographic and socio-economic characteristics are often strong predictors of healthcare access and health outcome. Indicators selected for review in this section are some of the most influential in determining the extent of a community's overall health.

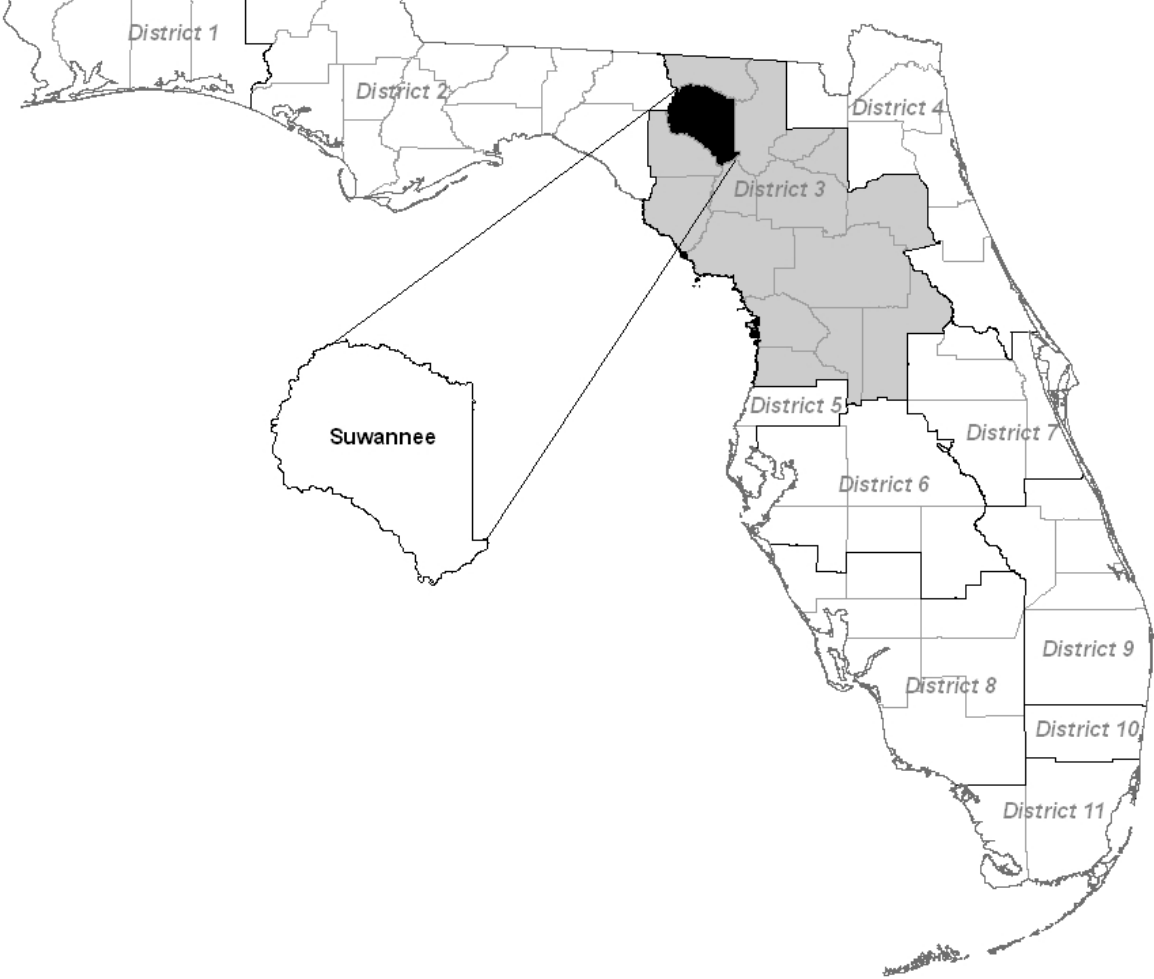
Data in this section is presented for Suwannee County and compared to Florida. In addition, zipcode data is also presented when available and appropriate. Data indicators include population breakdown by age, race and gender; population growth and projections; poverty status; per capita and median income; educational attainment; unemployment rates; and employment by size and industry. The information provided in this section helps to establish a profile for the people of Suwannee County and to determine the demographic and socio-economic barriers and opportunities to the improvement of community health.

Population

Clearly, the sheer number of people in a community is the leading determinant of the demand for healthcare services. Suwannee County, which has a population of more than 39,000 (Table 1), is located in north central Florida (Figure 1). The county also shares borders with the following counties: Hamilton to the north, Columbia to the east, Gilchrist to the southeast, Lafayette to the west, and Madison to the northwest. As seen in Figure 1, Suwannee is one of 16 counties in north central Florida that comprise the Local Health Planning District 3 as designated by the Florida Agency for Health Care Administration (AHCA). Live Oak, which is the county seat, is the largest incorporated municipality in the county. Live Oaks's population is more than 20,000.

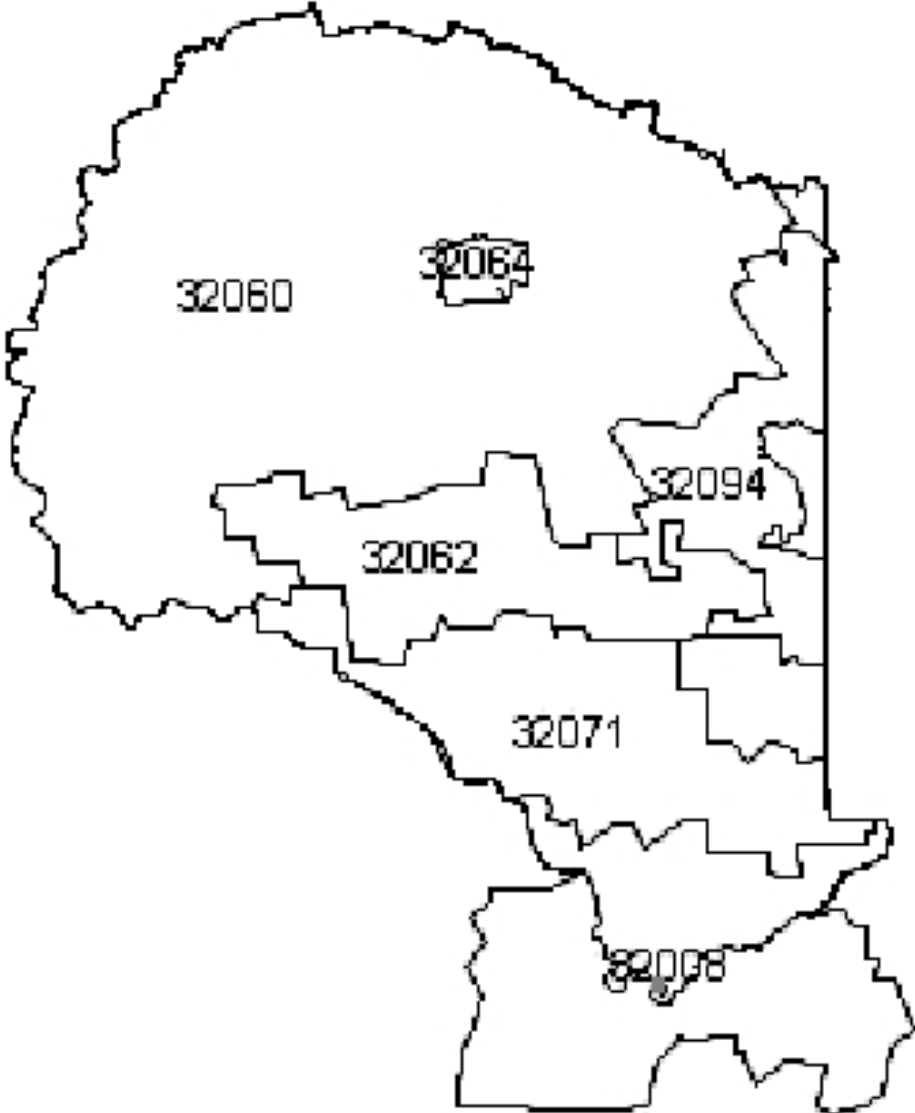
For various population data elements, data is presented by zipcode. Most zipcodes are self-contained within the boundaries Suwannee County. However, some zipcodes that are predominantly located in other counties may cross the Suwannee border. For instance, some residents of unincorporated areas located in Lafayette County may be technically located in Suwannee, though they are not included in the population.

Figure 1. Suwannee County and the Local Health Planning District 3.



Prepared by WellFlorida Council, 2007.

Figure 2. Zipcode map of Suwannee County, 2007.



Prepared by: WellFlorida Council, 2007.

Population Growth and Distribution

As seen in Table 1, the percent change in population between 2000 through 2007 in Suwannee County was 14.0 percent compared to 18.2 percent for the state. This trend where Suwannee County grows at a slower pace than the state is expected to continue through 2012 and beyond.

32060 and 32064, both Live Oak zipcodes are the largest zipcodes in Suwannee County by population size. However, the largest zipcodes are not expected to see the largest percentages of population growth in the future. It is the Branford zipcode (32008), which is anticipated to exceed the statewide growth rate, 36.9 percent as compared to 33.3 percent between 2000 and 2012. In McAlpin, only the 32062 zipcode is expected to grow at a similar pace to the state. At the same time, Wellborn zipcode, 32094 is experiencing the smallest increase in population, a meager 11.5 percent during the same time period.

Table 1. Population growth and percent change by zipcode, Suwannee County and Florida, 2000-2012.

Area	2000 Population	2007 Population	2012 Population	Percent Change 2000 - 2007	Percent Change 2007 - 2012	Percent Change 2000 - 2012
32008 Branford	4,041	4,889	5,531	21.0	13.1	36.9
32060 Live Oak	17,604	20,128	22,217	14.3	10.4	26.2
32062 MC Alpin	2,134	2,554	2,874	19.7	12.5	34.7
32064 Live Oak	6,149	6,994	7,700	13.7	10.1	25.2
32071 O Brien	2,770	3,210	3,567	15.9	11.1	28.8
32094 Wellborn	2,150	2,254	2,398	4.8	6.4	11.5
Suwannee Zipcodes	34,848	40,029	44,287	14.9	10.6	27.1
Suwannee County	34,844	39,714	43,791	14.0	10.3	25.7
Florida	15,982,378	18,893,813	21,311,920	18.2	12.8	33.3

Source: ESRI Business Solutions, 2007.
 Prepared by: WellFlorida Council, 2007.

Please note that the data in Tables 1 and 2 come from two different sources as zipcode data projections are available from one source through 2012 and whole county population projections are available from another source through 2030. For this reason, total population estimates for all of Suwannee County for the same year might differ in the two tables as the sources employ different estimating techniques.

As stated, data is not available projecting population growth in zipcode areas beyond 2012. Long-term (10, 15, 20 and 25-year) population growth projections for Suwannee County and Florida have been provided from the Bureau of Economic and Business Research at the University of Florida (Table 2). Table 2 shows that through 2030 Suwannee County will experience population growth at rates above the state rate.

Table 2. Population growth and percent change, Suwannee County and Florida, 2006-2030.

Year	Number		Percent Change		
	Suwannee County	Florida	Year	Suwannee County	Florida
2006	38,799	18,349,132			
2015	47,383	21,831,514	2006-2015	22.1	19.0
2020	50,627	23,552,136	2006-2020	30.5	28.4
2025	53,503	25,085,972	2006-2025	37.9	36.7
2030	56,160	26,513,332	2006-2030	44.7	44.5

Source: Bureau of Economic and Business Research, University of Florida, *Florida Population Studies, 2006*.
Prepared by: WellFlorida Council, 2007.

As shown in Table 3, Branford and Live Oak are the only incorporated areas of Suwannee County. The population in the Suwannee County unincorporated areas increased 13.7 percent from 2000 through 2006, while the growth of unincorporated areas for Florida as a whole was 11.6 percent.

Table 3. Population by incorporated and unincorporated areas, Suwannee County and Florida, 2000 and 2006.

Area	2000 Population	2006 Population	Total Change		Inmates	
			Number	Percent	Number	Percent
Branford	695	711	16	2.3	0	0.0
Live Oak	6,480	6,634	154	2.4	0	0.0
Suwannee County	34,844	38,799	3,955	11.4	0	0.0
Incorporated	7,175	7,345	170	2.4	0	0.0
Unincorporated	27,669	31,454	3,785	13.7	0	0.0
Florida	15,982,824	18,349,132	2,366,308	14.8	115,355	0.6
Incorporated	7,905,318	9,331,989	1,426,671	18.0	17,332	0.2
Unincorporated	8,077,506	9,017,143	939,637	11.6	98,023	1.1

Source: Bureau of Economic and Business Research, University of Florida, *Florida Estimates of Population, 2006*.
Prepared by: WellFlorida Council, 2007.

Population by Age, Race and Gender

Age, race and gender are all factors that contribute to, or at the very least, help describe aspects of healthcare access and health outcome in the United States. Typically, older persons will have more healthcare service needs and be suffering from high mortality compared to their younger counterparts. Healthcare research in the United States has long shown that there exist racial disparities in access to healthcare and in key health outcomes. In addition, the primary healthcare needs of males and females can differ greatly, especially at different critical stages of life. Reviewing population characteristics based on age, race and gender allows for factoring into health needs analysis the differences and disparities that exist in certain population groups.

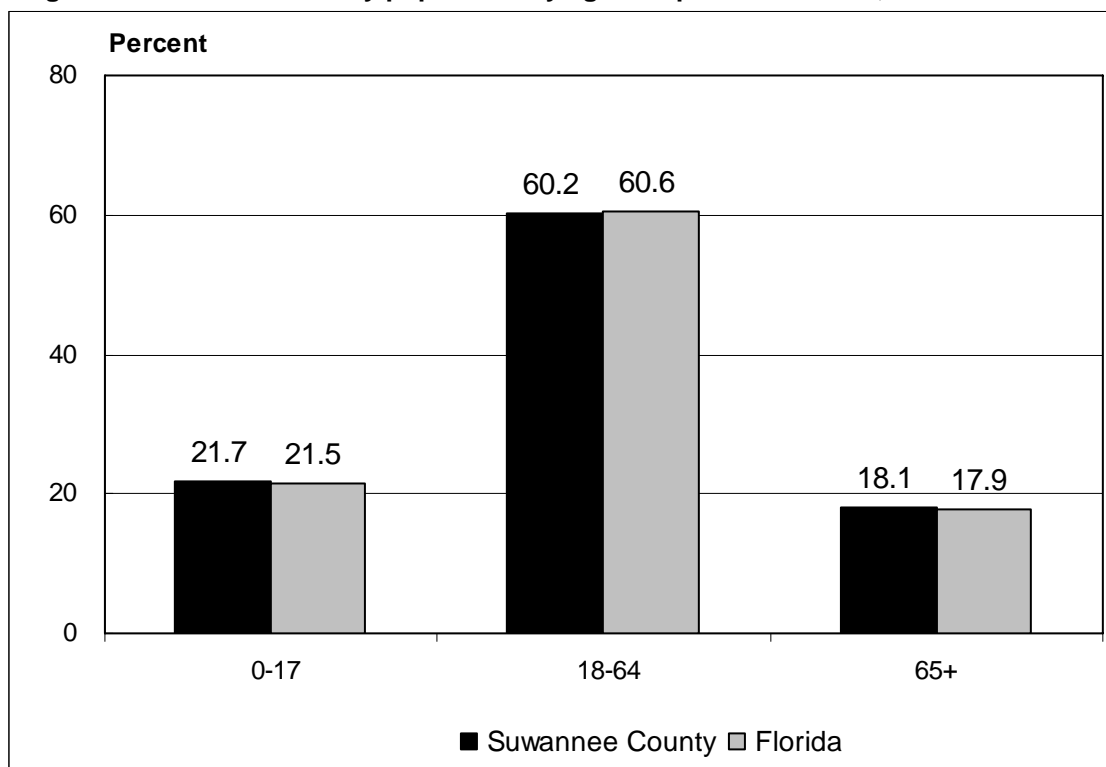
Age

As seen in Figure 3 and Table 4, Suwannee County is consistent with age population of Florida as a whole. 7,188 of Suwannee County's residents are age 65 and older. This equates to 18.1 percent of the population being 65+ while the state of Florida as a whole has 17.9 percent of its population age 65 and older. Because of the lower percentage of seniors in the Suwannee County population, the percentage of working-age adults (18-64) and children (age 17 and under) is slightly higher than the percentages for the state of Florida as a whole.

Table 4 shows that there is relatively minor variation between the different zipcodes in Suwannee County and also between the county and the state. The Live Oak zipcode (32060) and O'Brien zipcode (32071) has the largest percentages (19.5) of individuals ages 65 and over. This is slightly higher than the state, which is 17.9 percent. Zipcode (32094), which includes the municipality of Wellborn, has the smallest percentage (15.7) of residents ages 65 and over.

Wellborn (32094) also has the largest number of working age adults (18-64) at 61.5 percent. The zipcode with the fewest individuals ages 18-64 is (32060) in Live Oak, at 59.2 percent. This number corresponds to the slightly higher percent of seniors in this area. Likewise, the 0-17 population in O'Brien (32071) is also the lowest in the county at 19.9 percent, which is very close to the state's 21.5 percent.

Figure 3. Suwannee County population by age compared to Florida, 2007.



Source: ESRI Business Solutions, 2007.

Prepared by: WellFlorida Council, 2007.

Table 4. Population by age, by zipcode, Suwannee County and Florida, 2007.

Area	2007 Population	0-17		18-64		65+	
		Number	Percent	Number	Percent	Number	Percent
32008 Branford	4,889	1,022	20.9	3,031	62.0	836	17.1
32060 Live Oak	20,128	4,287	21.3	11,916	59.2	3,925	19.5
32062 MC Alpin	2,554	534	20.9	1,548	60.6	472	18.5
32064 Live Oak	6,994	1,679	24.0	4,196	60.0	1,119	16.0
32071 O Brien	3,210	639	19.9	1,945	60.6	626	19.5
32094 Wellborn	2,254	514	22.8	1,386	61.5	354	15.7
Suwannee Zipcodes	40,029	8,674	21.7	24,023	60.0	7,332	18.3
Suwannee County	39,714	8,618	21.7	23,908	60.2	7,188	18.1
Florida	18,893,813	4,062,170	21.5	11,449,651	60.6	3,381,993	17.9

Source: ESRI Business Solutions, 2007.

Prepared by: WellFlorida Council, 2007.

Table 5. Population by age, by zipcode, Suwannee County and Florida, 2007.

Area	2007 Population	0-4		5-9		10-14	
		Number	Percent	Number	Percent	Number	Percent
32008 Branford	4,889	284	5.8	264	5.4	293	6.0
32060 Live Oak	20,128	1,268	6.3	1,228	6.1	1,188	5.9
32062 MC Alpin	2,554	163	6.4	148	5.8	151	5.9
32064 Live Oak	6,994	490	7.0	462	6.6	483	6.9
32071 O Brien	3,210	193	6.0	189	5.9	164	5.1
32094 Wellborn	2,254	144	6.4	133	5.9	160	7.1
Suwannee Zipcodes	40,029	2,542	6.3	2,424	6.1	2,438	6.1
Suwannee County	39,714	2,542	6.4	2,423	6.1	2,423	6.1
Florida	18,893,813	1,133,629	6.0	1,058,054	5.6	1,133,629	6.0
Area	15-24		25-44		45-64		
	Number	Percent	Number	Percent	Number	Percent	
32008 Branford	611	12.5	1,164	23.8	1,437	29.4	
32060 Live Oak	513	10.5	1,193	24.4	1,330	27.2	
32062 MC Alpin	474	9.7	1,164	23.8	1,467	30.0	
32064 Live Oak	665	13.6	1,276	26.1	1,168	23.9	
32071 O Brien	353	11.0	783	24.4	908	28.3	
32094 Wellborn	243	10.8	557	24.7	660	29.3	
Suwannee Zipcodes	2,860	7.1	6,136	15.3	6,971	17.4	
Suwannee County	4,448	11.2	9,809	24.7	10,842	27.3	
Florida	5,083	12.8	10,127	25.5	10,405	26.2	
Area	65-84		85+		18+		
	Number	Percent	Number	Percent	Number	Percent	
32008 Branford	758	15.5	78	1.6	3,867	79.1	
32060 Live Oak	816	16.7	137	2.8	3,848	78.7	
32062 MC Alpin	826	16.9	78	1.6	3,867	79.1	
32064 Live Oak	972	13.9	147	2.1	5,315	76.0	
32071 O Brien	581	18.1	45	1.4	2,571	80.1	
32094 Wellborn	325	14.4	29	1.3	1,740	77.2	
Suwannee Zipcodes	4,278	10.7	514	1.3	21,209	53.0	
Suwannee County	6,315	15.9	874	2.2	31,096	78.3	
Florida	6,037	15.2	1,072	2.7	31,175	78.5	

Source: ESRI Business Solutions, 2007.
Prepared by: WellFlorida Council, 2007.

Race and Ethnicity

Table 6 and Figure 4 provide information on the race of the population in Suwannee County. The percentage of the Florida population that is white is 75.4 percent, as compared to Suwannee County's white residents who represent 81.5 percent of the county total. While the black population in Florida is 15.6 percent of the total population, the black population is 14.2 percent of Suwannee County's total. The greatest concentration of black population, as a percentage of total population, resides in the Live Oak zipcode (32064).

The higher percentage of individuals who identify as either white or black corresponds to a lower percentage of individuals who identify as Asian/Pacific Islander and Other.

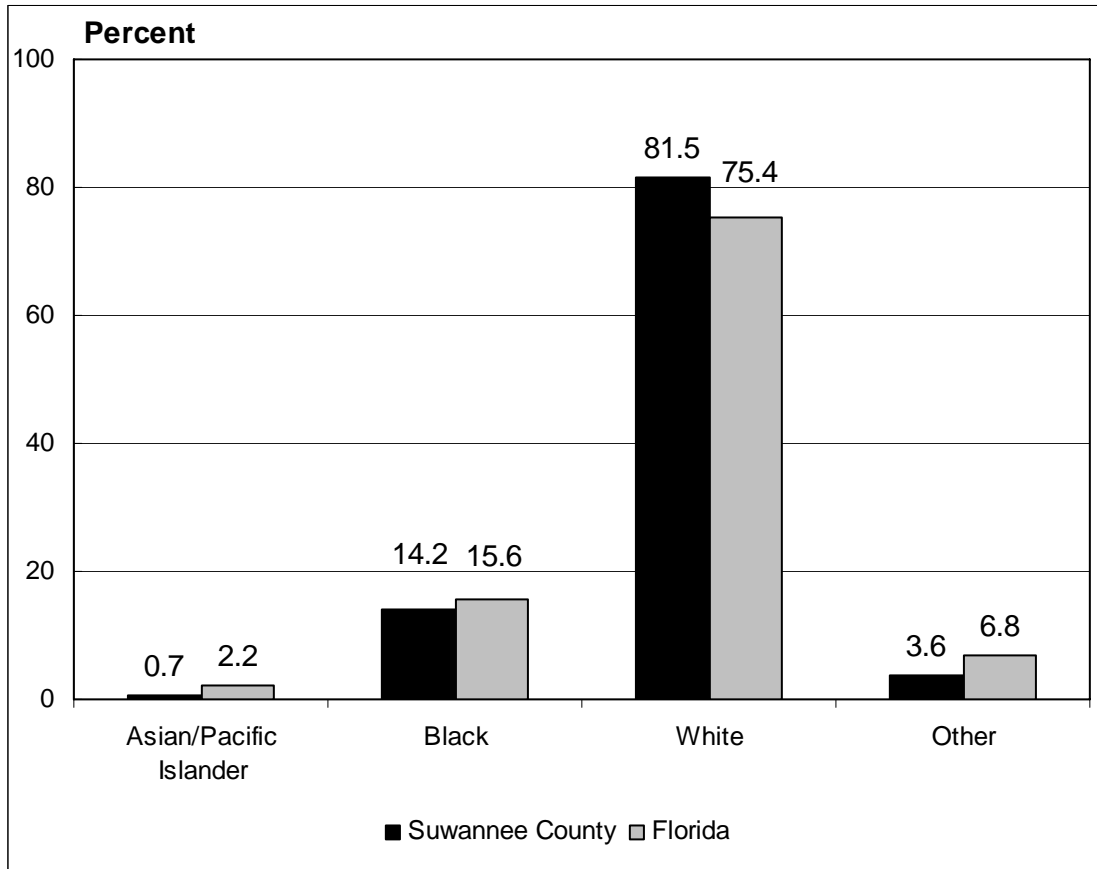
Table 6. Population by race, by zipcode, Suwannee County and Florida, 2007.

Area	2007 Population	Asian/Pacific Islander		Black	
		Number	Percent	Number	Percent
32008 Branford	4,889	20	0.4	132	2.7
32060 Live Oak	20,128	141	0.7	2,456	12.2
32062 MC Alpin	2,554	31	1.2	207	8.1
32064 Live Oak	6,994	63	0.9	2,441	34.9
32071 O Brien	3,210	22	0.7	205	6.4
32094 Wellborn	2,254	14	0.6	171	7.6
Suwannee Zipcodes	40,029	290	0.7	5,612	14.0
Suwannee County	39,714	278	0.7	5,639	14.2
Florida	18,893,813	415,664	2.2	2,947,435	15.6
Area	White		Other		
	Number	Percent	Number	Percent	
32008 Branford	4,522	92.5	215	4.4	
32060 Live Oak	16,807	83.5	725	3.6	
32062 MC Alpin	2,245	87.9	72	2.8	
32064 Live Oak	4,252	60.8	238	3.4	
32071 O Brien	2,883	89.8	100	3.1	
32094 Wellborn	1,993	88.4	77	3.4	
Suwannee Zipcodes	32,702	81.7	1,425	3.6	
Suwannee County	32,367	81.5	1,430	3.6	
Florida	14,245,935	75.4	1,284,779	6.8	

Source: ESRI Business Solutions, 2007.

Prepared by: WellFlorida Council, 2007.

Figure 4. Suwannee County population by race compared to Florida, 2007.



Source: ESRI Business Solutions, 2007.
Prepared by: WellFlorida Council, 2007.

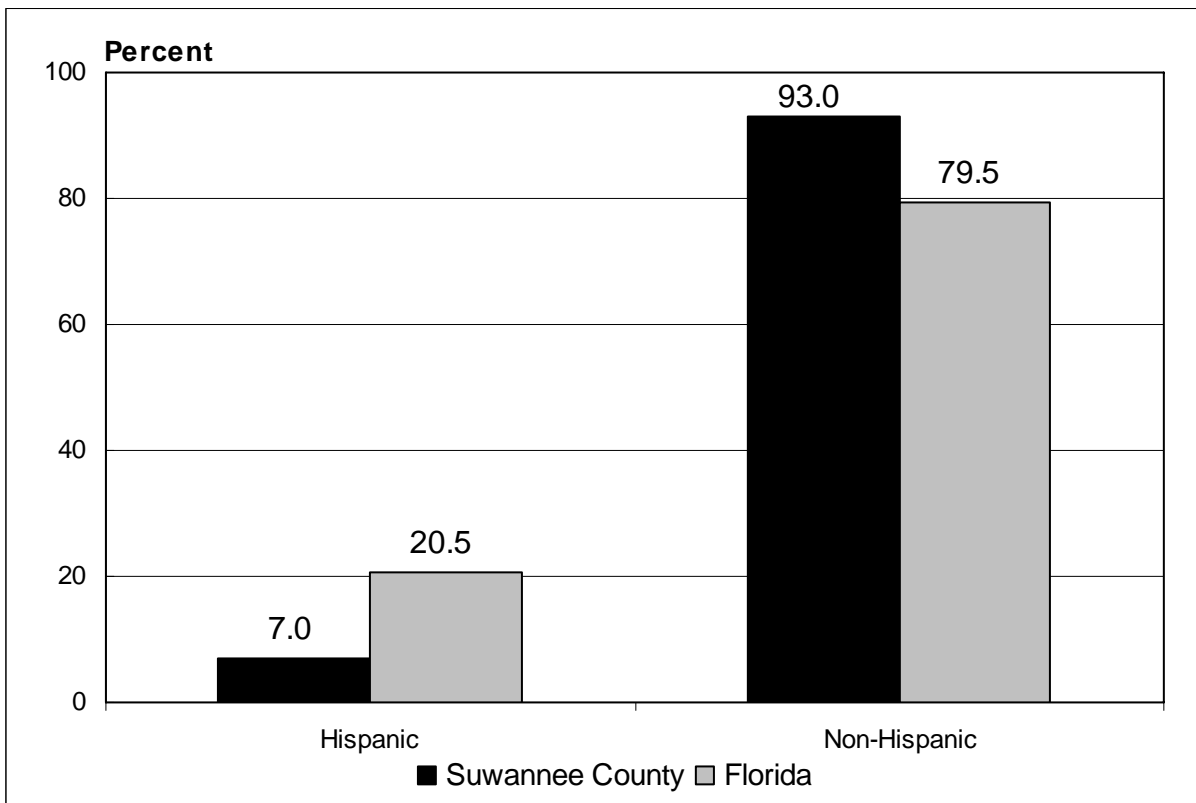
As seen in Table 7 and Figure 5, over 20 percent of Florida’s total population is of Hispanic ethnicity. The percentage is substantially lower in Suwannee County (7.0 percent) than for the state as a whole. The Suwannee County zipcode area with the lowest percentage (5.1) of Hispanic residents is 32094(Wellborn), while the zipcode area with the highest percentage (9.2) is 32064 (Live Oak).

Table 7. Population by Hispanic ethnicity, by zipcode, Suwannee County and Florida, 2007.

Area	2007 Population	Hispanic		Non-Hispanic	
		Number	Percent	Number	Percent
32008 Branford	4,889	367	7.5	4,522	92.5
32060 Live Oak	20,128	1,288	6.4	18,840	93.6
32062 MC Alpin	2,554	166	6.5	2,388	93.5
32064 Live Oak	6,994	643	9.2	6,351	90.8
32071 O Brien	3,210	193	6.0	3,017	94.0
32094 Wellborn	2,254	115	5.1	2,139	94.9
Suwannee Zipcodes	40,029	2,772	6.9	37,257	93.1
Suwannee County	39,714	2,780	7.0	36,934	93.0
Florida	18,893,813	3,873,232	20.5	15,020,581	79.5

Source: ESRI Business Solutions, 2007.
Prepared by: WellFlorida Council, 2007.

Figure 5. Suwannee County population by ethnicity compared to Florida, 2007.



Source: ESRI Business Solutions, 2007.
Prepared by: WellFlorida Council, 2007.

Gender

Females typically have longer life expectancies in the United States and in Florida. Because of this phenomenon, communities that are older tend to have a higher percentage of females in the population. Table 8 shows that this is not the case in Suwannee County. Given that Suwannee County's population is the same on average with Florida's, it is to be expected that the number of females will exceed the number of males. While both Suwannee and Florida have 51.2 percent residents that are female, only 48.8 percent of Suwannee County residents are male. Zipcode 32008, Branford, is the only in Suwannee County that have a higher percentage of males than females.

Table 8. Population by gender, by zipcode, Suwannee County and Florida, 2007.

Area	2007 Population	Males		Females	
		Number	Percent	Number	Percent
32008 Branford	4,889	2,464	50.4	2,425	49.6
32060 Live Oak	20,128	9,742	48.4	10,386	51.6
32062 MC Alpin	2,554	1,249	48.9	1,305	51.1
32064 Live Oak	6,994	3,469	49.6	3,525	50.4
32071 O Brien	3,210	1,599	49.8	1,611	50.2
32094 Wellborn	2,254	1,091	48.4	1,163	51.6
Suwannee Zipcodes	40,029	19,613	49.0	20,416	51.0
Suwannee County	39,714	19,380	48.8	20,334	51.2
Florida	18,893,813	9,220,181	48.8	9,673,632	51.2

Source: ESRI Business Solutions, 2007.
Prepared by: WellFlorida Council, 2007.

Economic Characteristics

The economic status, and often the health status, of a region and its residents can be assessed by examining a variety of economic characteristics. Some of the most critical include income, poverty status and employment. Higher incomes, lower poverty and better employment have all been shown to impact health access and health outcome favorably. Conversely, lower income, higher poverty and poorer employment are definite predictors of a lack of access to healthcare and adverse health outcomes. In this section, these standard measures of income, poverty status and employment are used to compare Suwannee County with the state of Florida.

Income

As shown in Table 9, the median household income for Suwannee County (\$35,430) is substantially lower than the state (\$48,591). The median household income in Suwannee County varies from a low of \$33,055 in 32064 (Live Oak) to a high of \$36,811 in 32094 (Wellborn). No zipcode area in Suwannee County has a median income higher than the state of Florida.

Table 9 also shows per capita income levels for Suwannee County and all of its zipcode areas as they compare to the state. As with median income, the per capita income in Suwannee County (\$17,823) is less than Florida (\$27,311). Per capita income in Suwannee County ranges from a low of \$16,085 in 32065 (Live Oak) to a high of \$19,369 in 32094 (Wellborn).

Table 9. Median household income and per capita income by zipcode, Suwannee County and Florida, 2007.

Area	Total Households	Average Household Size	Medium Household Income	Per Capita Income
32008 Branford	2,014	2.4	33,368	17,497
32060 Live Oak	7,939	2.5	35,433	18,515
32062 MC Alpin	982	2.6	36,618	17,359
32064 Live Oak	2,611	2.6	33,055	16,085
32071 O Brien	1,299	2.5	34,839	18,270
32094 Wellborn	894	2.5	36,811	19,369
Suwannee Zipcodes	15,739	NA	34,871	NA
Suwannee County	15,533	2.5	35,250	17,823
Florida	7,510,601	2.5	48,591	27,311

Source: ESRI Business Solutions, 2007.
 Prepared by: WellFlorida Council, 2007.

Table 10 depicts household income distribution in Suwannee County by zipcode. The percentage of households with less than \$25,000 total household income ranges from 31.9 percent in 32062 (Mc Alpin) to 38.2 percent in 32008 (Branford). All of the Suwannee County zipcode areas have a higher proportion of residents with incomes under \$25,000 than the state of Florida.

At the opposite end of the spectrum, while 7.0 percent of Florida households have incomes over \$150,000, only 1.9 percent of Suwannee County households have the same. None of Suwannee County’s zipcode areas have a higher proportion of households with incomes above \$150,000 than the state.

Table 10. Households by income levels, by zipcode, Suwannee County and Florida, 2007.

Area	Total Households	Less than \$25,000		\$25,000-\$49,999	
		Number	Percent	Number	Percent
32008 Branford	2,014	769	38.2	657	32.6
32060 Live Oak	7,939	2,842	35.8	2,390	30.1
32062 MC Alpin	982	313	31.9	321	32.7
32064 Live Oak	2,611	995	38.1	828	31.7
32071 O Brien	1,299	443	34.1	420	32.3
32094 Wellborn	894	305	34.1	260	29.1
Suwannee Zipcodes	15,739	5,667	36.0	4,875	31.0
Suwannee County	15,533	5,561	35.8	4,800	30.9
Florida	7,510,601	1,749,970	23.3	2,102,968	28.0

Area	\$ 50,000-\$99,999		\$100,000-\$149,999		\$150,000 and Over	
	Number	Percent	Number	Percent	Number	Percent
32008 Branford	483	24.0	66	3.3	38	1.9
32060 Live Oak	2,104	26.5	421	5.3	191	2.4
32062 MC Alpin	294	29.9	35	3.6	19	1.9
32064 Live Oak	624	23.9	138	5.3	29	1.1
32071 O Brien	340	26.2	77	5.9	21	1.6
32094 Wellborn	260	29.1	47	5.3	22	2.5
Suwannee Zipcodes	4,105	26.1	785	5.0	319	2.0
Suwannee County	4,101	26.4	777	5.0	295	1.9
Florida	2,350,818	31.3	781,103	10.4	525,742	7.0

Source: ESRI Business Solutions, 2007.
 Prepared by: WellFlorida Council, 2007.

Poverty

Each year, the United States Department of Health and Human Services (DHHS) establishes national poverty levels (Table 11). These levels are established by comparing annual income to “poverty thresholds.” The thresholds vary by family size. For example, a family of four living in the 48 contiguous states and D.C is considered to be living in poverty in 2007 if the household income is below \$20,650. A poverty rate for a county is the percentage of the county’s individuals that have an annual income or live in a household with an annual income below the poverty threshold.

Table 11. 2007 Federal Poverty Levels.

Persons in Family or Household	48 Contiguous States and D.C.	Alaska	Hawaii
1	\$10,210	\$12,770	\$11,750
2	13,690	17,120	15,750
3	17,170	21,470	19,750
4	20,650	25,820	23,750
5	24,130	30,170	27,750
6	27,610	34,520	31,750
7	31,090	38,870	35,750
8	34,570	43,220	39,750
For each additional person, add	3,480	4,350	4,000

Source: Federal Register, vol. 72, no. 15, January 24, 2007.

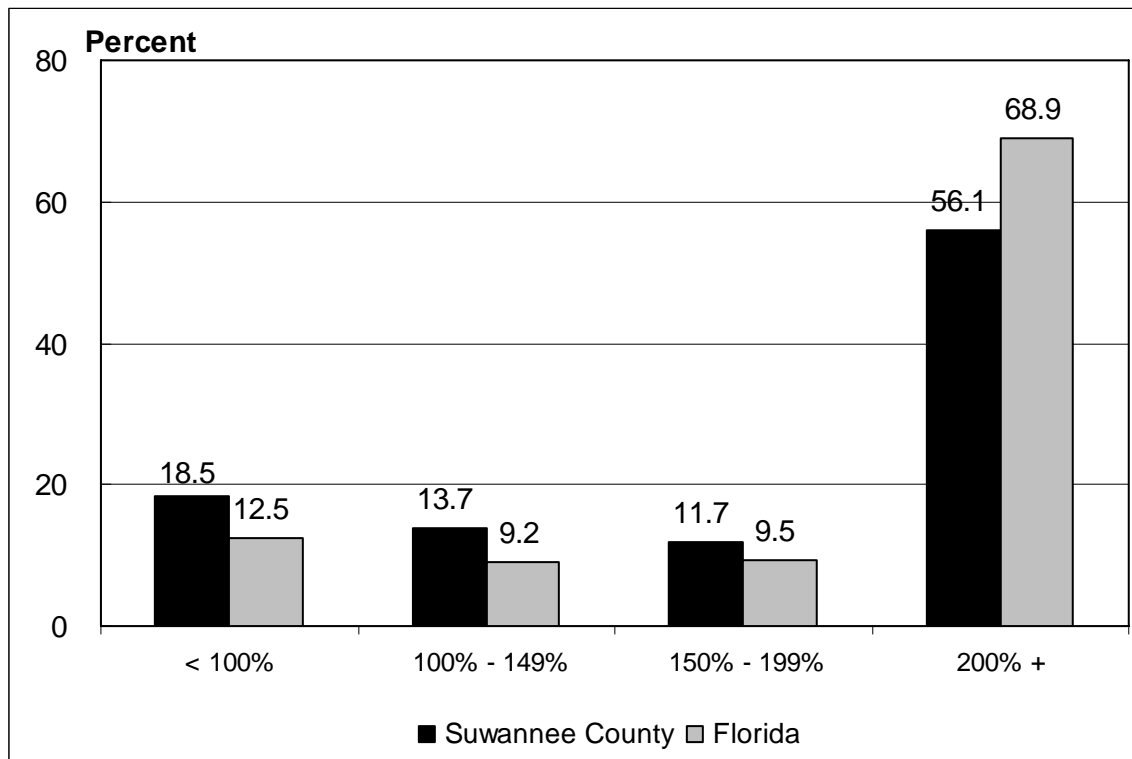
Prepared by: WellFlorida Council, 2006.

Poverty data is estimated during each decennial census. The latest poverty rates available are for the 2000 census (based on 1999 income). In the analysis that follows, it is assumed that the latest poverty rate from the 2000 census is the best available estimate of the state and local poverty rate. In order to calculate numbers of persons in poverty, children and households in poverty (Tables 12 through 14), the 2000 census poverty percentages are used with the 2007 population data.

Figure 6 shows that, in terms of poverty rate, Suwannee County compares unfavorably to the state as a whole. While 12.5 percent of Florida's population is estimated to be in poverty, 18.5 percent of Suwannee County's population lives below the poverty threshold (i.e. 100 percent of the federal poverty level). Moreover, Figure 6 and Table 12 show that 25.4 percent of Suwannee County residents are estimated to be between 100 and 200 percent of the federal poverty level compared to only 18.7 percent for all of Florida. While Suwannee County does have the high levels of very low-income persons it also has a high percentage of lower middle income persons. This is reflected in the earlier analysis of the median and per capita incomes.

An examination of poverty status by zipcode (Table 13) reveals that 32071 (O'Brien) is the only zipcode area in Suwannee County with a poverty rate (11.4) lower than that of Florida (12.5 percent). Suwannee County has a significantly higher number of children, 22.4 percent, who are living at or below the Federal Poverty Threshold whereas Florida has only 17.6 percent. A whole Suwannee County has a higher percentage of households in poverty than Florida.

Figure 6. Suwannee County estimated persons in poverty by level of poverty compared to Florida, 2007.



Source: U.S. Department of Commerce, Census Bureau, Summary File 3, 2000; ESRI Business Solutions, 2007.
Prepared by: WellFlorida Council, 2007.

Table 12. Estimated persons in poverty by level of poverty, Suwannee County and Florida, 2007.

Level of Poverty	Suwannee County		Florida	
	Number	Percent	Number	Percent
< 100%	7,331	18.5	2,364,097	12.5
100%-124%	2,855	7.2	820,425	4.3
125%-149%	2,589	6.5	913,575	4.8
150%-174%	2,268	5.7	884,524	4.7
175%-184%	1,025	2.6	384,040	2.0
185%-199%	1,370	3.5	517,960	2.7
200% +	22,264	56.1	13,009,192	68.9
Total Population (2007)	39,714		18,893,813	

*Note: Poverty percentages from the 2000 Census are used as poverty percentage estimates for 2007 in order to estimate the number in poverty, 2007.
Source: U.S. Department of Commerce, Census Bureau, Summary File 3, 2000; ESRI Business Solutions, 2007.
Prepared by: WellFlorida Council, 2007.

Table 13. Estimated persons, children and households in poverty, by zipcode, Suwannee County and Florida, 2007.

Area	Individuals (All Ages)			Children (0-17)		
	Total Number	Number in Poverty	Percent in Poverty	Total Number	Number in Poverty	Percent in Poverty
32008 Branford	4,889	885	18.1	1,022	203	19.9
32060 Live Oak	20,128	3,764	18.7	4,287	995	23.2
32062 MC Alpin	2,554	490	19.2	534	144	27.0
32064 Live Oak *	6,994	1,308	18.7	1,679	390	23.2
32071 O Brien	3,210	366	11.4	639	53	8.3
32094 Wellborn	2,254	376	16.7	514	78	15.3
Suwannee Zipcodes	40,029	7,145	17.9	8,674	1,854	21.4
Suwannee County	39,714	7,331	18.5	8,618	1,932	22.4
Florida	18,893,813	2,364,097	12.5	4,062,170	715,253	17.6
Area	Households					
	Total Number	Number in Poverty	Percent in Poverty			
32008 Branford	2,014	361	17.9			
32060 Live Oak	7,939	1,496	18.8			
32062 MC Alpin	982	159	16.2			
32064 Live Oak *	2,611	492	18.8			
32071 O Brien	1,299	163	12.6			
32094 Wellborn	894	167	18.7			
Suwannee Zipcodes	15,739	2,831	18.0			
Suwannee County	15,533	2,895	18.6			
Florida	7,510,601	880,652	11.7			

* In the 2000 Census 32064 Live Oak was combined with 32060 Live Oak, therefore the same percentage is used in both calculations.

Note: Poverty percentages from the 2000 Census are used as poverty percentage estimates for 2007 in order to estimate the number in poverty, 2007.

Source: U.S. Department of Commerce, Census Bureau, Summary File 3, 2000; ESRI Business Solutions, 2007.

Prepared by: WellFlorida Council, 2007.

Table 14. Estimated persons in poverty by level of poverty, by zipcode, Suwannee County and Florida, 2007.

Area	Total Number	< 100% of Poverty		100%-149% of Poverty	
		Number	Percent	Number	Percent
32008 Branford	4,889	885	18.1	799	16.4
32060 Live Oak	20,128	3,764	18.7	2,667	13.3
32062 MC Alpin	2,554	490	19.2	367	14.4
32064 Live Oak *	6,994	1,308	18.7	927	13.3
32071 O Brien	3,210	366	11.4	579	18.0
32094 Wellborn	2,254	376	16.7	212	9.4
Suwannee Zipcodes	40,029	7,145	17.9	5,555	13.9
Suwannee County	39,714	7,331	18.5	5,452	13.7
Florida	18,893,813	2,364,097	12.5	1,734,000	9.2
Area	150%-199% of Poverty		200% + of Poverty		
	Number	Percent	Number	Percent	
32008 Branford	690	14.1	2,514	51.4	
32060 Live Oak	2,304	11.4	11,391	56.6	
32062 MC Alpin	298	11.7	1,400	54.8	
32064 Live Oak *	801	11.4	3,958	56.6	
32071 O Brien	485	15.1	1,780	55.5	
32094 Wellborn	303	13.4	1,364	60.5	
Suwannee Zipcodes	4,912	12.3	22,417	56.0	
Suwannee County	4,665	11.7	22,266	56.1	
Florida	1,786,524	9.5	13,009,192	68.9	

* In the 2000 Census 32064 Live Oak was combined with 32060 Live Oak, therefore the same percentage is used in both calculations.

Note: Poverty percentages from the 2000 Census are used as poverty percentage estimates for 2007 in order to estimate the number in poverty in 2007.

Source: U.S. Department of Commerce, Census Bureau, Summary File 3, 2000; ESRI Business Solutions, 2007.

Prepared by: WellFlorida Council, 2007.

Employment

Being employed with health benefits or being the spouse or dependent of someone whose employer provides health insurance is still the most common ways to obtain private health insurance in the United States. Unemployed individuals are thus vastly less likely to have private health insurance coverage. In addition, smaller companies and retail and service sector employers have been shown to have more difficulty in providing health insurance for their employees. For these reasons, unemployment rates and type and size of employer data for Suwannee County is provided in this section.

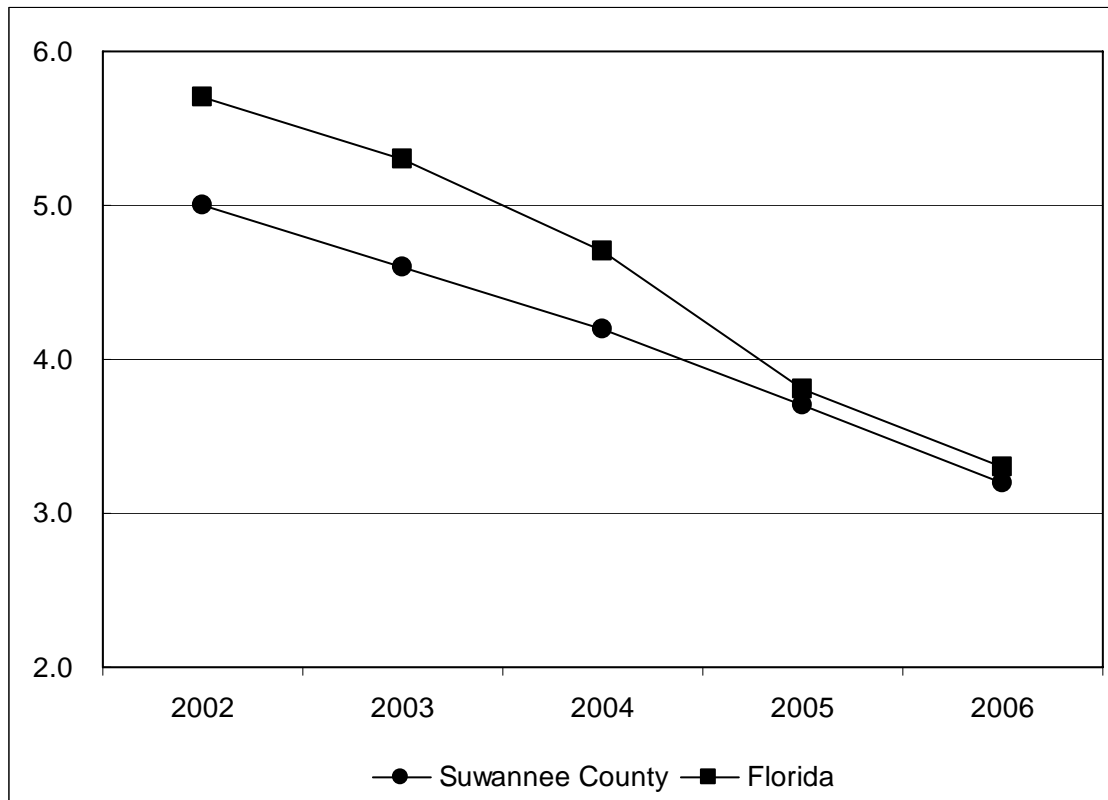
As seen in Table 15 and Figure 7, the unemployment rate in Suwannee County has been consistently lower than the state of Florida since 2002. Like Florida and the rest of the nation, the unemployment rate in Suwannee County has been decreasing since 2002.

Table 15. Unemployment rates, Suwannee County and Florida, 2000-2006.

Area	2000	2001	2002	2003	2004	2005	2006
Suwannee	3.6	5.0	5.0	4.6	4.2	3.7	3.2
Florida	3.8	4.7	5.7	5.3	4.7	3.8	3.3

Source: Labor Market Info, Florida Research & Economic Database, assessed August 14, 2007.
 Prepared by: WellFlorida Council, 2007.

Figure 7. Suwannee County unemployment rates compared to Florida, 2002-2006.



Source: Labor Market Info, Florida Research & Economic Database, assessed August 14, 2007.
 Prepared by: WellFlorida Council, 2007.

Table 16 depicts that 91.9 percent of Suwannee County businesses are small (defined as fewer than 20 employees) compared to 88.7 percent for Florida as a whole. In addition, Table 17 shows that out of the total labor force in Suwannee County, 27.1 percent are employed in small business as compared to 18.9 percent for the state of Florida.

Table 18 shows that 61.7 percent of businesses in Suwannee County are retail trade and service sector employers compared to 61.5 percent for Florida. Employees of smaller businesses in the retail trade and service sectors are workers who are the least likely to have access to or to be able to afford private healthcare insurance.

Retail trade and service sector includes the following:

- Retail sales;
- Administration and support;
- Waste management;
- Healthcare and social assistance;
- Educational services;
- Arts, entertainment and recreation
- Accommodations and food services;
- Other services (not including public administration or government).

Larger employers, especially those in the public administration and governmental sectors are more likely to offer health insurance to and in many instances provide a subsidy to their employees for healthcare insurance.

Table 16. Number of non-governmental businesses by size of business, Suwannee County and Florida, 2005.

Area	Total Business Establishments	Size of Business					
		Less than 20 employees		20 - 99 employees		100+ employees	
		Number	Percent	Number	Percent	Number	Percent
Suwannee	694	638	91.9	49	7.1	7	1.0
Florida	504,662	447,764	88.7	46,664	9.2	10,234	2.0

* The U.S. Census Bureau determines from a sample of businesses; thus, these are not all businesses in Suwannee County but a representative sample of businesses. Governmental and public administration businesses are not included in the sample.

Source: U.S. Department of Commerce, Census Bureau, County Business Patterns, 2005.

Prepared by: WellFlorida Council, 2007.

Table 17. Number of employees in non-governmental businesses by size of business, Suwannee County and Florida, 2002.

Area	Total Employees	Size of Business					
		Less than 20 employees		20 - 99 employees		100+ employees	
		Number	Percent	Number	Percent	Number	Percent
Suwannee	7,175	1,943	27.1	1,085	15.1	4,147	57.8
Florida	6,366,964	1,205,396	18.9	1,016,969	16.0	4,144,599	65.1

** The U.S. Census Bureau determines the number of employees from a sample of businesses; thus, total employees reflect the total employees in the sample. Governmental and public administration businesses are not included in the sample.

Source: U.S. Department of Commerce, Census Bureau, County Business Patterns Special Report, 2002.

Prepared by: WellFlorida Council, 2007.

Table 18. Retail trade and service (nongovernmental) businesses, Suwannee County and Florida, 2005.

Area	Total Businesses	Retail Trade *		Services *	
		Number	Percent	Number	Percent
Suwannee	694	150	21.6	278	40.1
Florida	504,662	72,469	14.4	237,635	47.1

* The U.S. Census Bureau determines this from a sample of businesses; thus, total businesses reflect the total businesses in the sample. Governmental and public administration businesses are not included in the sample.

** North American Industry Classification (NAIC) codes for retail trade: 44-45; services: 54-56, 61, 62, 71, 72, And 81.

Source: U.S. Department of Commerce, Census Bureau, *County Business Patterns, 2005*.

Prepared by: WellFlorida Council, 2007.

Educational Attainment

Today’s complex healthcare systems and treatment guidelines are often difficult to navigate and understand. Generally, persons with higher educational levels utilize healthcare systems somewhat more effectively and efficiently than their counterparts without higher levels of educational attainment. In addition, research has suggested that educational level also has a bearing on health outcome.

Over 26 percent of Suwannee County residents (age 25 and over) have no high school diploma compared to 20 percent for Florida as a whole (Table 19). For nearly 57 percent of Suwannee County’s residents, a high school diploma was their highest educational attainment compared to nearly 51 percent for Florida residents. Only 15.6 percent of Suwannee County residents achieved a college degree compared to 29.4 percent of all Florida residents.

As seen in Table 20, the high school graduation rate in Suwannee County since the 2003-2004 school years has been lower than the state of Florida. Figure 8 shows that graduation rates have indeed fallen below that of the state and continue to trend downward in comparison. However, while the drop-out rate for the state of Florida has been declining from 3.8 in 2000-01 to 3.5 in 2005-06, the drop-out rate in Suwannee County has only been slightly below the state in 2001-02 at 3.0 percent compared to 3.2 percent for the state that same year. Note that graduation and drop-out rates do not add up to 100 percent due to the fact of high mobility of students in the school system. There is neither graduation nor drop-out rates available for students that leave the Suwannee County school system.

Table 19. Estimated number of persons 25 and over by highest level of educational attainment, by zipcode, Suwannee County and Florida, 2007.

Area	Population 25+	No High School Diploma		High School Diploma		College Degree	
		Number	Percent	Number	Percent	Number	Percent
32008 Branford	3,437	858	25.0	2,147	62.5	431	12.6
32060 Live Oak	14,311	3,880	27.1	8,154	57.0	2,277	15.9
32062 MC Alpin	1,847	408	22.1	1,105	59.8	333	18.1
32064 Live Oak *	4,616	1,252	27.1	2,630	57.0	734	15.9
32071 O Brien	2,318	575	24.8	1,345	58.0	398	17.2
32094 Wellborn	1,571	389	24.8	986	62.7	196	12.5
Suwannee Zipcodes	28,099	7,359	26.2	16,394	58.3	4,346	15.5
Suwannee County	27,840	7,449	26.8	16,058	57.7	4,333	15.6
Florida	13,150,094	2,647,933	20.1	6,642,512	50.5	3,859,649	29.4

* In the 2000 Census 32064 Live Oak was combined with 32060 Live Oak, therefore the same percentage is used in both calculations.

Note: Educational attainment percentages from the 2000 Census are used as educational attainment estimates for 2007 in order to estimate the number by level of highest level of educational attainment in 2007.

Source: U.S. Department of Commerce, Census Bureau, Summary File 3, 2000; ESRI Business Solutions, 2007.

Prepared by: WellFlorida Council, 2007.

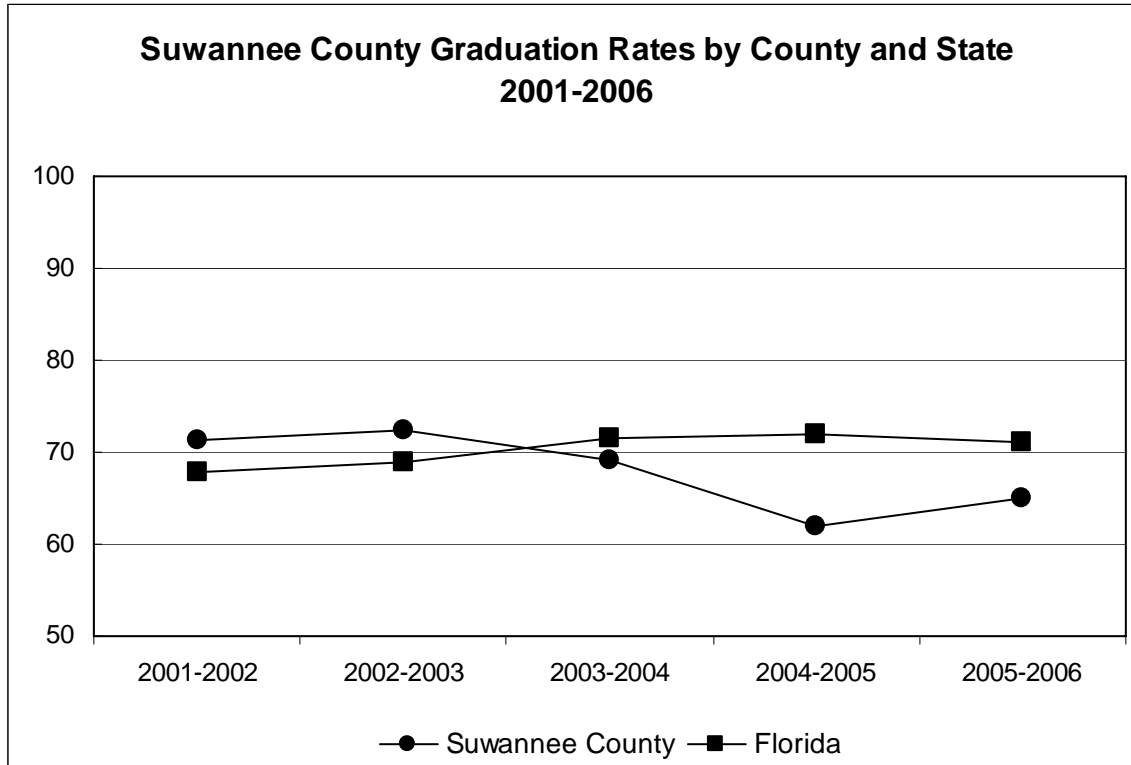
Table 20. Graduation and dropout rates, Suwannee County and Florida, 2000 - 2006.

Area	School Year					
	2000-2001		2001-2002		2002-2003	
	Graduation Rate	Dropout Rate	Graduation Rate	Dropout Rate	Graduation Rate	Dropout Rate
Suwannee	60.7	5.3	71.2	3.0	72.3	4.4
Florida	63.8	3.8	67.9	3.2	69.0	3.1
Area	School Year					
	2003-2004		2004-2005		2005-2006	
	Graduation Rate	Dropout Rate	Graduation Rate	Dropout Rate	Graduation Rate	Dropout Rate
Suwannee	69.1	8.5	62.0	5.2	65.1	4.8
Florida	71.6	2.9	71.9	3.0	71.0	3.5

Source: Florida Department of Education, Statistical Brief, assessed August 14, 2007.

Prepared by: WellFlorida Council, 2007.

Figure 8. Suwannee County graduation rates compared to Florida, 2001 - 2006.



Source: Florida Department of Education, Statistical Brief, assessed August 14, 2007.
 Prepared by: WellFlorida Council, 2007.

Summary of Key Findings

Population

- Suwannee County’s population now exceeds 39,000.
- During the next 25 years, Suwannee County’s population is expected to increase 44.7 percent compared to 44.5 percent for Florida.
- The 32008 (Branford) zipcode is expected to be the fastest growing zipcode from 2000 through 2012.
- With 18.1 percent of its population older than age 65 compared to 17.9 percent for Florida as a whole, Suwannee County is slightly “older” than some counties in Florida.
- In every zipcode in Suwannee County over 80 percent of the population is “non-elderly”.
- Suwannee County has a slightly higher percentage (81.5) of white residents than Florida as a whole (75.4). At the same time, Suwannee County has a slightly lower percentage (14.2) of black residents than the state (15.6). The county does have lower percentages of individuals who identify themselves as Asian/Pacific Islander and Other.
- 7.0 percent of Suwannee County residents identify themselves as Hispanic compared to 20.5 percent of all Florida residents.

Economic Characteristics

- Median and per capita incomes of Suwannee County residents are substantially lower than those of all Florida residents.
- No zipcode area has a median household income or a per capita income that is higher than Florida.
- 35.8 percent of Suwannee County households have income less than \$25,000 compared to 23.3 percent for the state.
- While 7.0 percent of Florida households have incomes over \$150,000, only 1.9 percent of Suwannee County households have the same.
- 18.5 percent of persons in Suwannee County fall below the federal poverty threshold compared to 12.5 percent for the state. At the same time, 18.6 percent of the households in Suwannee fall below the federal poverty threshold compared to only 11.7 percent for all of Florida.
- Suwannee County has a higher percentage of its children in poverty (22.4) than the state (17.6).
- Since 2002, the unemployment rate in Suwannee County has been lower than the state of Florida.
- Suwannee County has a slightly higher percentage of small businesses (fewer than 20 employees) than Florida as a whole.
- In Suwannee County, 61.7 percent of private business establishments are retail trade and service sector employers compared to 61.5 percent for Florida.

Educational Attainment

- Over 26 percent of Suwannee County residents (age 25 and older) have no high school diploma compared to slightly more than 20 percent for Florida as a whole.
- Only 15.6 percent of Suwannee County residents have achieved a college degree compared to 29.4 percent of all Florida residents.
- Since 2003-04, the high school graduation rate has been lower than the state of Florida.
- Suwannee County's drop-out rates have consistently been higher than the state since 2002-03.

Health Status

Introduction

This section of the assessment reviews the health status of Suwannee County residents. The primary focus of the health status assessment is a review of various mortality and hospitalization data. This in-depth assessment of the mortality and morbidity of Suwannee County residents will enable the community to identify specific health indicators resulting in early death or unnecessary hospitalization and implement programs that will improve the overall health of the community.

The Health Status section will detail various mortality data, hospitalization statistics (in lieu of any other readily available morbidity data sources) and birth indicator data. An analysis of Behavioral Risk Factor data and mental health status indicators will be presented as well.

Leading Causes of Death

Average Annual Crude Mortality Rates

Rates for All Residents

Average annual crude (i.e. Number of deaths) mortality rates are utilized to identify the major causes of death in the county. These rates assist providers and community leaders in healthcare delivery and policy in determining the medical service, prevention and education service needs of the community.

Since the 1950s, heart disease has been the leading cause of death in the nation and the state. Suwannee County, with an average of 113.6 heart disease deaths per year from 2001-2005, is no exception (Table 21). This equates to an age adjusted rate of 227 for heart disease deaths per 100,000 population during this time period. Within Suwannee County, 32062 (Mc Alpin) has the highest crude mortality rate for heart disease and 32008 (Branford) has the lowest. However, since crude rates cannot be used to compare geographic regions, due to discrepancies in age distribution, age-adjusted rates will be utilized later in this section.

Tables 21 and 22 compare Suwannee County with the state for annual crude mortality rates. All of Suwannee County's leading causes of death are presented. The rank of that cause of death for Suwannee is in parentheses. Suwannee County's top10 leading causes of death are the same as for the state of Florida, although in some cases they are ranked differently. For example, respiratory disease is the third leading cause of death in Suwannee County though it is the fourth for all of Florida. In addition, Diabetes is the seventh leading cause of death in Suwannee County while it is the sixth leading cause of death for Florida.

Rates by Race and Ethnicity

Table 23 shows crude mortality rates for 2000-2004 for white residents while Table 24 show these rates for black residents. Because of the relatively small number of black and Hispanic residents in Suwannee County (as detailed in the Demographic and Socioeconomic Profile section), analysis of their crude rates should be done carefully and with perspective. The low numbers in the population translate to low numbers overall and even fewer deaths. These few numbers of deaths and relatively low populations yield crude rates which are subject to wide fluctuation on an annual basis. This could but not necessarily result in dramatic shifts in the leading causes of death for Hispanic residents from year-to-year in Suwannee County; attempts have been made to dampen this effect by utilizing a five-year average rate.

Because white residents make up the largest majority of Suwannee County's population, they drive the overall leading causes of death in Suwannee County. As such, the top 3 leading causes of death for white residents mirrors the top 3 for all residents of Suwannee County. However, some causes of death, though they rank in the top 10, occur in a different order for white residents as compared to all residents. For whites, unintentional injuries ranks 4, stroke rank 5, and Alzheimer's ranks 10. For all residents of Suwannee County, stroke rank 4, unintentional injuries ranks 5, and Alzheimer's does not make the top ten.

For black residents, the picture is somewhat different. As seen in Table 24, diabetes is the fifth leading cause of death for black residents in Suwannee County compared to the seventh for white residents. In addition, nephritis, and HIV (albeit in small numbers with 2.4 deaths per year on average) are in the top 10 causes for black residents while Alzheimer's, suicide and Atherosclerosis are not.

Table 21. Average annual crude mortality rate and age adjusted mortality rate per 100,000 populations for all races for the top 10 leading causes of death in Suwannee County, 2001-2005.

Cause of Death	Suwannee County			Florida		
	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
All Causes	470.4	1,269.8	980.9	168,305.8	978.7	751.8
Heart (1)	113.6	306.7	227.0	48,056.6	279.5	205.5
Cancer (2)	110.2	297.5	225.0	39,353.6	228.9	175.8
Respiratory (3)	32.6	88.0	64.3	9,071.8	52.8	38.6
Stroke (4)	30.0	81.0	58.9	9,886.2	57.5	42.0
Unintentional Injuries (5)	29.2	78.8	78.3	7,794.4	45.3	42.8
MV Crashes	16.2	43.7	45.2	3,233.2	18.8	18.6
Atherosclerosis (6)	27.0	72.9	52.7	935.8	5.4	3.9
Diabetes (7)	18.0	48.6	36.0	4,775.2	27.8	21.2
Influenza & Pneumonia (8)	8.4	22.7	16.9	3,070.4	17.9	13.1
Suicide (9)	6.2	16.7	16.6	2,319.6	13.5	12.8
Nephritis (9)	6.2	16.7	12.8	2,282.8	13.3	9.8

Numbers in parentheses (*) are the rank of that cause of death for Suwannee County.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.

Prepared by: WellFlorida Council, 2007.

Table 22. Average annual crude mortality rate and age adjusted mortality rate per 100,000 population for all races for the top 10 leading causes of death in Suwannee County, 2001-2005.

Cause of Death	MV Crashes			Atherosclerosis (6)		
	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
32008 Branford	0.8	17.1	18.4	-	-	-
32060 Live Oak	7.4	31.0	31.0	12.8	53.6	36.3
32062 MC Alpin	1.2	60.2	64.6	0.6	30.1	32.0
32064 Live Oak	2.0	NA	NA	12.8	NA	NA
32071 O Brien	1.8	57.9	58.4	0.2	6.4	7.0
32094 Wellborn	0.6	23.1	21.9	0.6	23.1	19.6
Suwannee Zipcodes	13.8	38.0	38.6	27.0	74.4	59.0
Suwannee County	16.2	43.7	45.2	27.0	72.9	52.7
Florida	3,233.2	18.8	18.6	935.8	5.4	3.9

Numbers in parentheses (*) are the rank of that cause of death for Suwannee County.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.

Prepared by: WellFlorida Council, 2007.

Table 22 cont. Average annual crude mortality rate and age adjusted mortality rate per 100,000 population for all races for the top 10 leading causes of death in Suwannee County, 2001-2005.

Cause of Death	Diabetes (7)			Influenza & Pneumonia (8)		
	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
32008 Branford	1.2	25.6	27.0	-	-	-
32060 Live Oak	9.2	38.5	28.7	4.2	17.6	12.7
32062 MC Alpin	1.4	70.2	57.9	0.2	10.0	14.1
32064 Live Oak	2.8	NA	NA	3.0	NA	NA
32071 O Brien	1.2	38.6	27.6	-	-	-
32094 Wellborn	2.0	77.0	83.0	0.2	7.7	6.7
Suwannee Zipcodes	17.8	49.1	38.3	7.6	20.9	16.8
Suwannee County	18.0	48.6	36.0	8.4	22.7	16.9
Florida	4,775.2	27.8	21.2	3,070.4	17.9	13.1
Cause of Death	Suicide (9)			Nephritis (9)		
	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
32008 Branford	1.6	34.2	31.6	0.4	8.5	12.4
32060 Live Oak	2.2	9.2	9.2	3.0	12.6	9.7
32062 MC Alpin	0.6	30.1	28.8	0.4	20.1	24.3
32064 Live Oak	0.6	NA	NA	1.6	NA	NA
32071 O Brien	0.2	6.4	6.1	0.8	25.7	27.8
32094 Wellborn	0.6	23.1	22.9	-	-	-
Suwannee Zipcodes	5.8	16.0	15.8	6.2	17.1	13.8
Suwannee County	6.2	16.7	16.6	6.2	16.7	12.8
Florida	2,319.6	13.5	12.8	2,282.8	13.3	9.8

Numbers in parentheses (*) are the rank of that cause of death for Suwannee County.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.

Prepared by: WellFlorida Council, 2007.

Table 22 cont. Average annual crude mortality rate and age adjusted mortality rate per 100,000 population for all races for the top 10 leading causes of death in Suwannee County, 2001-2005.

Cause of Death	MV Crashes			Atherosclerosis (6)		
	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
32008 Branford	0.8	17.1	18.4	-	-	-
32060 Live Oak	7.4	31.0	31.0	12.8	53.6	36.3
32062 MC Alpin	1.2	60.2	64.6	0.6	30.1	32.0
32064 Live Oak	2.0	NA	NA	12.8	NA	NA
32071 O Brien	1.8	57.9	58.4	0.2	6.4	7.0
32094 Wellborn	0.6	23.1	21.9	0.6	23.1	19.6
Suwannee Zipcodes	13.8	38.0	38.6	27.0	74.4	59.0
Suwannee County	16.2	43.7	45.2	27.0	72.9	52.7
Florida	3,233.2	18.8	18.6	935.8	5.4	3.9
Cause of Death	Diabetes (7)			Influenza & Pneumonia (8)		
	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
32008 Branford	1.2	25.6	27.0	-	-	-
32060 Live Oak	9.2	38.5	28.7	4.2	17.6	12.7
32062 MC Alpin	1.4	70.2	57.9	0.2	10.0	14.1
32064 Live Oak	2.8	NA	NA	3.0	NA	NA
32071 O Brien	1.2	38.6	27.6	-	-	-
32094 Wellborn	2.0	77.0	83.0	0.2	7.7	6.7
Suwannee Zipcodes	17.8	49.1	38.3	7.6	20.9	16.8
Suwannee County	18.0	48.6	36.0	8.4	22.7	16.9
Florida	4,775.2	27.8	21.2	3,070.4	17.9	13.1

Numbers in parentheses (*) are the rank of that cause of death for Suwannee County.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.

Prepared by: WellFlorida Council, 2007.

Table 22 cont. Average annual crude mortality rate and age adjusted mortality rate per 100,000 populations for all races for the top 10 leading causes of death in Suwannee County, 2001-2005.

Cause of Death	Suicide (9)			Nephritis (9)		
	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
32008 Branford	1.6	34.2	31.6	0.4	8.5	12.4
32060 Live Oak	2.2	9.2	9.2	3.0	12.6	9.7
32062 MC Alpin	0.6	30.1	28.8	0.4	20.1	24.3
32064 Live Oak	0.6	NA	NA	1.6	NA	NA
32071 O Brien	0.2	6.4	6.1	0.8	25.7	27.8
32094 Wellborn	0.6	23.1	22.9	-	-	-
Suwannee Zipcodes	5.8	16.0	15.8	6.2	17.1	13.8
Suwannee County	6.2	16.7	16.6	6.2	16.7	12.8
Florida	2,319.6	13.5	12.8	2,282.8	13.3	9.8

Numbers in parentheses (*) are the rank of that cause of death for Suwannee County.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.

Prepared by: WellFlorida Council, 2007.

Table 23. Average annual crude mortality rate and age adjusted mortality rate per 100,000 population for white races for the top 10 leading causes of death in Suwannee County, 2001-2005.

Cause of Death	Suwannee County			Florida		
	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
All Causes	419.6	1,301.9	965.6	149,222.8	1,062.8	729.8
Heart (1)	101.4	314.6	222.2	43,346.0	308.7	200.2
Cancer (2)	99.0	307.2	222.9	35,414.6	252.2	174.3
Respiratory (3)	30.2	93.7	65.4	8,581.4	61.1	39.6
Unintentional Injuries (4)	26.6	82.5	82.3	6,815.8	48.5	44.9
MV Crashes	15.2	47.2	49.0	2,713.0	19.3	19.1
Stroke (5)	25.4	78.8	54.6	8,571.6	61.0	39.1
Atherosclerosis (6)	25.0	77.6	53.7	865.2	6.2	3.8
Diabetes (7)	15.4	47.8	33.9	3,866.6	27.5	18.7
Influenza & Pneumonia (8)	6.6	20.5	14.5	2,762.6	19.7	12.7
Suicide (9)	6.2	19.2	19.1	2,177.0	15.5	14.4
Alzheimer's (10)	5.6	17.4	12.0	3,961.6	28.2	17.2

Numbers in parentheses (*) are the rank of that cause of death for Suwannee County.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.

Prepared by: WellFlorida Council, 2007.

Table 24. Average annual crude mortality rate and age adjusted mortality rate per 100,000 population for black races for the top 10 leading causes of death in Suwannee County, 2001-2005.

Cause of Death	Suwannee County			Florida		
	Average Number	Crude Rate	Age Adjusted Rate	Average Number	Crude Rate	Age Adjusted Rate
All Causes	48.4	1,096.4	1,167.0	17,881.2	657.6	978.4
Heart (1)	11.6	262.8	279.4	4,445.2	163.5	267.0
Cancer (2)	10.4	235.6	247.3	3,644.4	134.0	202.5
Stroke (3)	4.4	99.7	109.8	1,224.8	45.0	75.1
Unintentional Injuries (4)	2.6	58.9	63.1	873.8	32.1	35.7
MV Crashes	1.0	22.7	25.8	464.8	17.1	18.0
Diabetes (5)	2.6	58.9	62.2	860.4	31.6	49.7
HIV (6)	2.4	54.4	59.1	1,046.2	38.5	42.0
Respiratory (7)	2.0	45.3	50.3	456.2	16.8	27.4
Atherosclerosis (7)	2.0	45.3	45.0	67.8	2.5	4.6
Influenza & Pneumonia (9)	1.8	40.8	43.4	290.4	10.7	17.3
Nephritis (10)	1.2	27.2	27.7	382.2	14.1	22.6

Numbers in parentheses (*) are the rank of that cause of death for Suwannee County.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.

Prepared by: WellFlorida Council, 2007.

Table 25. Average number of Hispanic deaths and crude mortality rates per 100,000 population, Suwannee County and Florida 2001-2005.

Cause of Death	Suwannee County		Florida	
	Average Number	Crude Rate	Average Number	Crude Rate
All Causes	8.4	411.4	15,646.2	510.7
Unintentional Injuries (1)	2.2	107.7	1,015.0	33.1
MV Crashes	1.4	68.6	592.6	19.3
Cancer (2)	1.6	78.4	3,367.0	109.9
Heart (3)	1.0	49.0	4,732.4	154.5
Septicemia (4)	0.4	19.6	191.0	6.2
Stroke (4)	0.4	19.6	821.2	26.8
Respiratory (4)	0.4	19.6	558.0	18.2
Nephritis (4)	0.4	19.6	245.4	8.0
Perinatal (4)	0.4	19.6	129.6	4.2
HIV (9)	0.2	9.8	195.6	6.4
Diabetes (9)	0.2	9.8	570.4	18.6
Hypertension (9)	0.2	9.8	120.2	3.9
Atherosclerosis (9)	0.2	9.8	54.0	1.8
Homicide (9)	0.2	9.8	158.8	5.2

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005
 Prepared by: WellFlorida Council, 2007.

Age-Adjusted Mortality Rates

To further explore the health status of Suwannee County residents, age-adjusted mortality rates are used to compare Suwannee County to Florida. In order to compare accurately mortality rates between differing geographic areas, adjustments must be made to account for the differences in age-group distributions between populations. This is called “age-adjusting” a mortality rate. The age-group distribution of a “standard” population is used for this purpose. The standard population for purposes of this study is the 2000 U.S. Population.

Age-adjusted rates are those rates that would have been observed if the age distribution of the areas being compared were the same as that of the standard 2000 U.S. Population. Basically, age-adjusted rates represent a summary or indicator rate by cause of death and permit an unbiased comparison regardless in difference in age distribution of populations being compared.

Rates for All Residents

Table 21 presents an examination of the age-adjusted mortality rate for the 10 leading causes of death in Suwannee County for 2001-2005 compared to Florida. This table also shows that Suwannee County exceeds the state’s age-adjusted mortality rate in 10 out of the top 10 causes of death. This remains true for the majority of zipcodes within the county.

In 32060 (Live Oak), the age-adjusted death rate has been lower than the rate for Florida in the cases of heart disease, Cancer, strokes, Atherosclerosis, Influenza/Pneumonia, Suicide and Nephritis. In 32008 (Branford) the rates for motor vehicle crash deaths and unintentional injury deaths have been lower than the state rates. In 32071 (O’Brien) the rate of suicide and stroke have been lower than the rate for Florida and in 32094 (Wellborn) the age-adjusted rate of deaths from Influenza/Pneumonia has been lower than the state. In 32008 (Branford) there were no deaths attributable to Influenza/Pneumonia and Atherosclerosis and in 32094 (Wellborn) there were no deaths attributed to Nephritis, therefore, in all other cases it falls below the state rate. In every other case within Suwannee County the age-adjusted mortality rate is higher than the rate for the state of Florida.

The greatest disparity in age-adjusted death rates between Suwannee County and Florida is for respiratory disease.

Rates by Race and Ethnicity

Because white residents make up the majority of Suwannee County’s population, they drive the age-adjusted mortality rates in Suwannee County much as they do the crude rates. As such, Figure 10 demonstrates a similar situation for white residents as for all residents in Figure 9. The unfavorable comparison with the state of white resident age-adjusted death rates for leading causes of death is reflected in the poor overall rates for all residents. Trends in the white population’s age-adjusted mortality rates therefore closely resemble those for the total population.

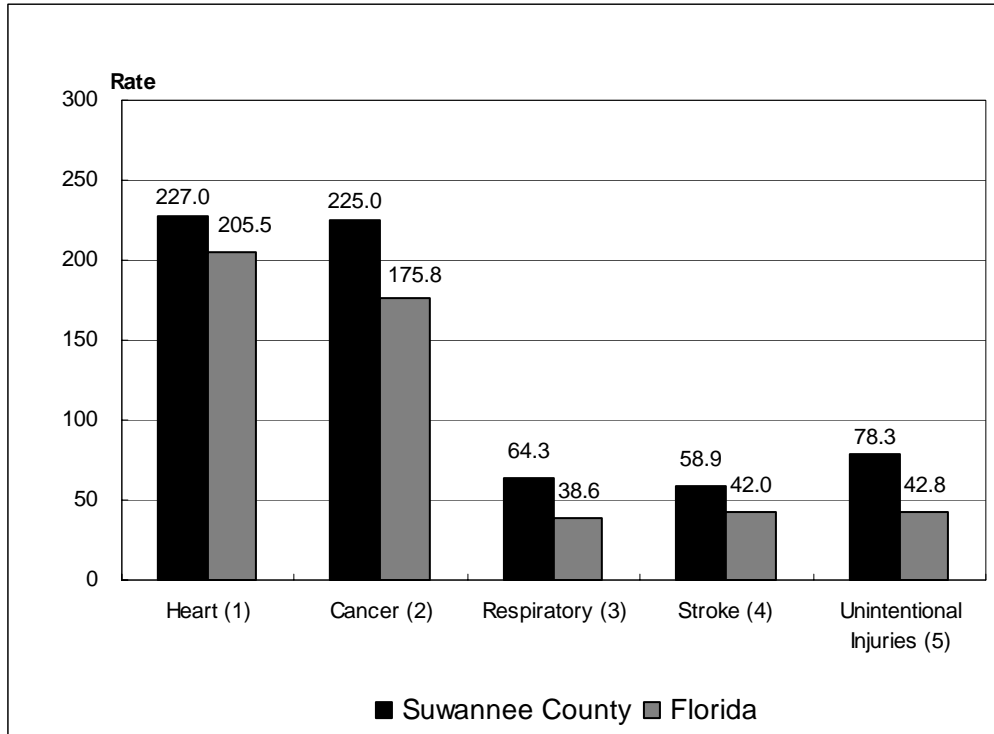
There are some differences with respect to the black population. Like the crude rate, smaller population numbers can affect age-adjusted mortality rates and since black residents represent a smaller percentage of the population, analysis of their age-adjusted death rates should be done carefully and with perspective. Given that the black population is smaller than the white population, there may be a wider fluctuation of death rates for specific causes on an annual basis. However, it should be noted that attempts have been made to dampen this effect by utilizing a five-year average rate.

It should be noted that age-adjusted death rates are not calculated for the Hispanic population because the age-specific population estimates needed to calculate an age-adjusted death rate are not available for the study period between 2001-2005.

In Suwannee County, the age-adjusted death rate for all causes is higher for black residents than it is for white residents. The rate of heart disease and cancer is also higher for black residents than for white residents. Other causes, which ranked in the top ten, and for which blacks have a higher age-adjusted rate compared to whites include: stroke, diabetes and influenza and pneumonia.

At the same time, black residents in Suwannee County have a lower age-adjusted mortality rate when compared to their white counterparts for respiratory disease, all unintentional injuries, and motor vehicle crashes. This remains true when the rate for blacks is compared to the rate for all races in Suwannee County. Unfortunately, for these three cases, the rates for blacks in Suwannee County are still much higher (more than double in the case of respiratory disease) than the rates for blacks throughout Florida.

Figure 9. Age adjusted mortality rates per 100,000 population for all races for top 5 leading causes of death, Suwannee County and Florida, 2001-2005.

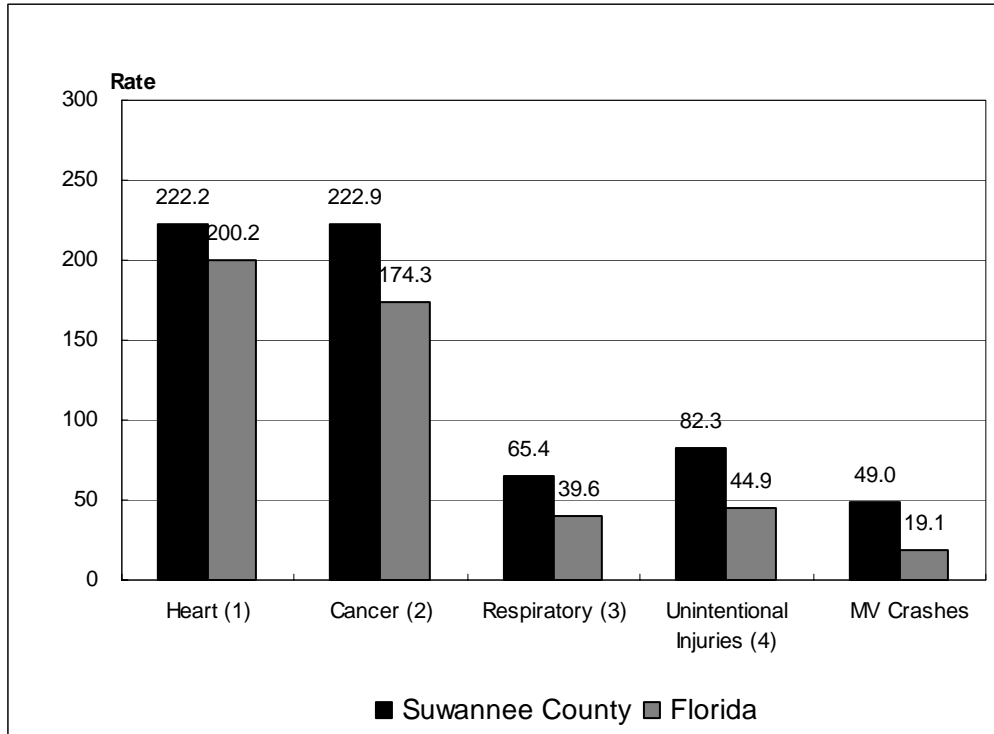


Numbers in parentheses (*) are the rank of that cause of death for Suwannee County.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.

Prepared by: WellFlorida Council, 2007.

Figure 10. Age adjusted mortality rates per 100,000 population for whites for top 5 leading causes of death, Suwannee County and Florida, 2001-2005.

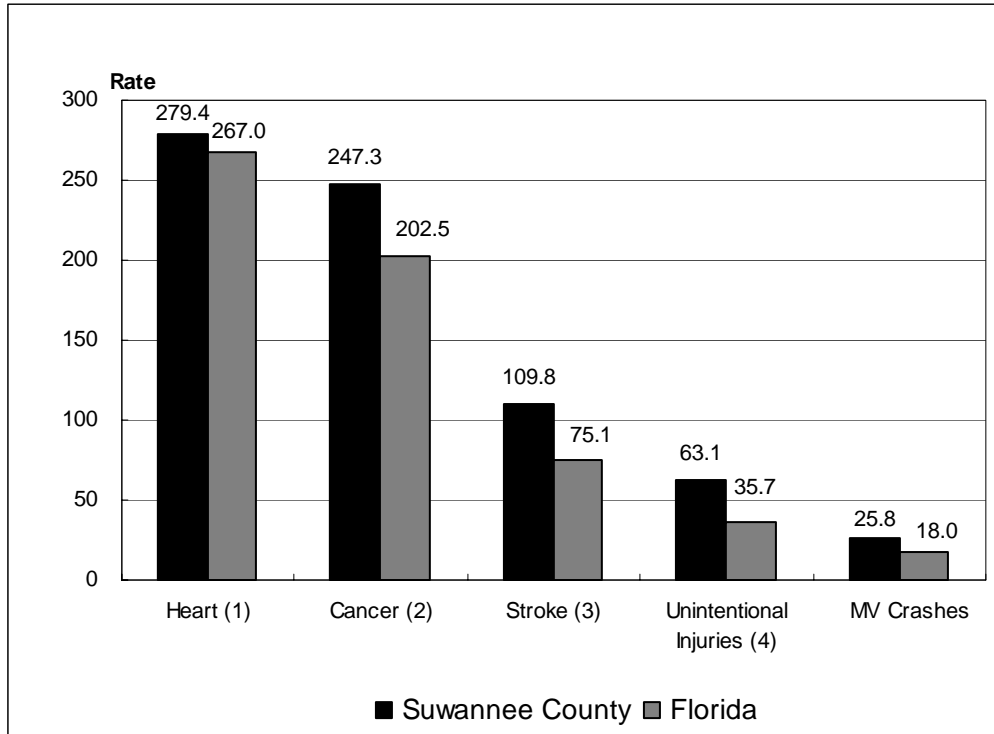


Numbers in parentheses (*) are the rank of that cause of death for Suwannee County.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.

Prepared by: WellFlorida Council, 2007.

Figure 11. Age adjusted mortality rates per 100,000 population for blacks for top 5 leading causes of death, Suwannee County and Florida, 2001-2005.



Numbers in parentheses (*) are the rank of that cause of death for Suwannee County.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.

Prepared by: WellFlorida Council, 2007.

Health Disparities

Figure 12 through Figure 16 gives us a glimpse at the health disparities that exist in Suwannee County as they do throughout Florida and the United States. While racial disparities in Suwannee County are similar to those observed at the state level, the actual proportions of the disparities tend to differ slightly.

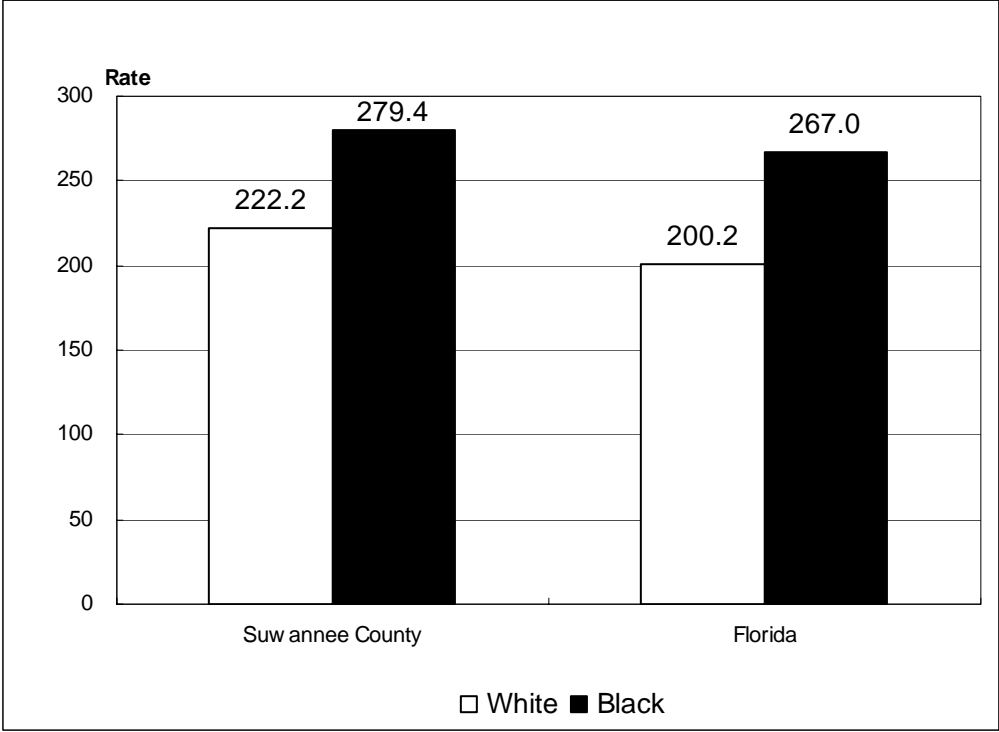
Figure 12 compares the age-adjusted heart disease mortality rates for white and black residents in Suwannee County and for Florida. While the rates for blacks and whites in Suwannee County are higher than the rates for their counterparts at the state level, the disparity between whites and blacks within Suwannee County is somewhat less.

Age-adjusted death rates for cancer follow a similar pattern (Figure 13). While both the white and black residents of Suwannee County fair poorly than their counterparts throughout the state in terms of age-adjusted cancer death rates, the disparity gap is slightly smaller in Suwannee County than for the state.

Respiratory disease exhibits a similar disparity pattern. As seen in Figure 14, respiratory disease age-adjusted mortality rates for white residents and black residents in Suwannee County are more than double the rates for whites and blacks in Florida. At the same time, within Suwannee County, the difference between whites and blacks (with whites more likely than blacks to die of respiratory disease) is more than twice the difference between whites and blacks at the state level.

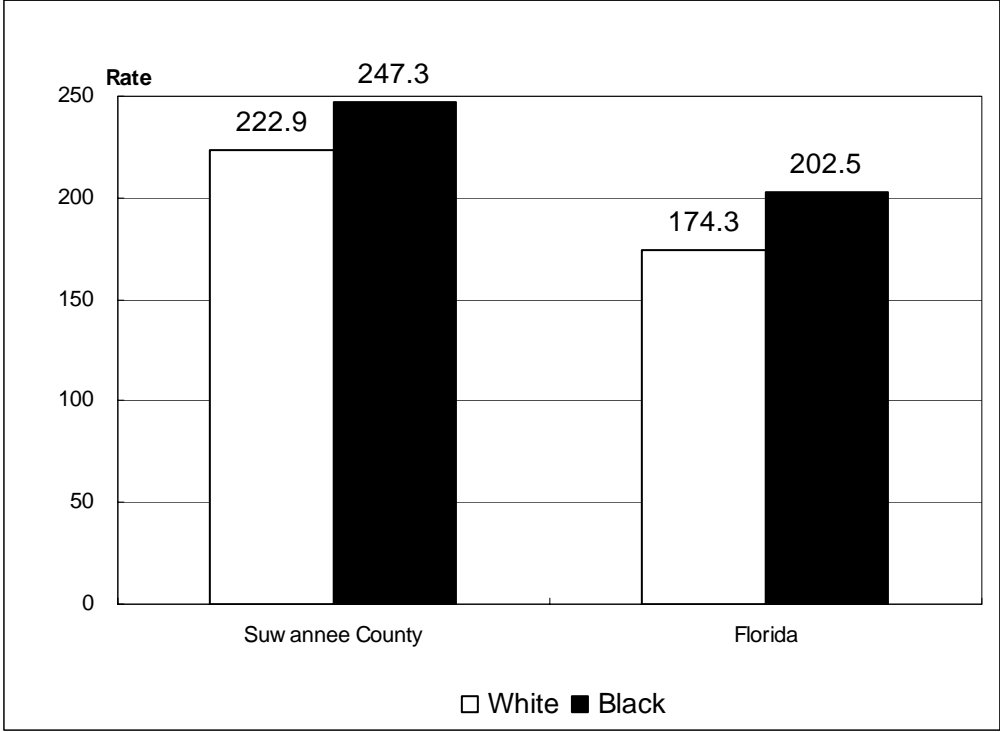
The disparity gaps in stroke and unintentional injury age-adjusted mortality rates (Figures 15 and 16) are similar to the gaps at the state level. Black residents die at a disproportionate rate from stroke than their white counterparts while white residents die at a disproportionate rate from unintentional injury compared to their black resident counterparts. With regard to stroke, while whites and blacks suffer from an increased rate in Suwannee County compared to the state, the disparity between whites and blacks within the county is much greater. At the same time, the disparity between whites and blacks in Suwannee County for unintentional injuries is much lower than what is observed at the state level.

Figure 12. Heart disease age adjusted mortality rate per 100,000 population by race, Suwannee County and Florida, 2001-2005.



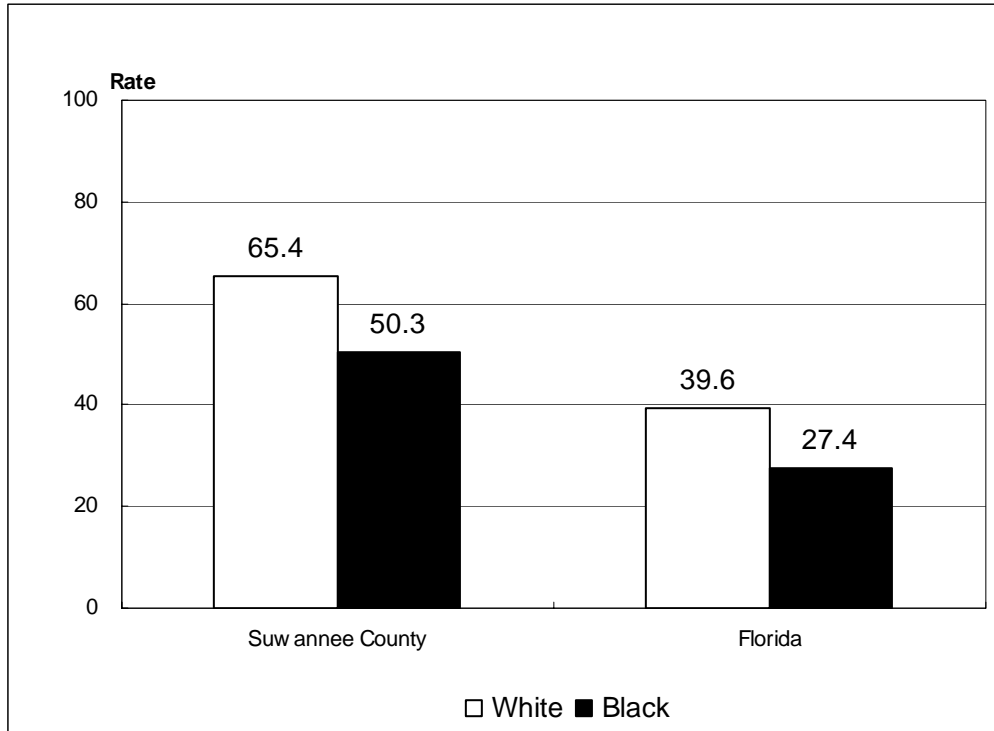
Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.
Prepared by: WellFlorida Council, 2007.

Figure 13. Cancer age adjusted mortality rate per 100,000 population by race Suwannee County and Florida, 2001-2005.



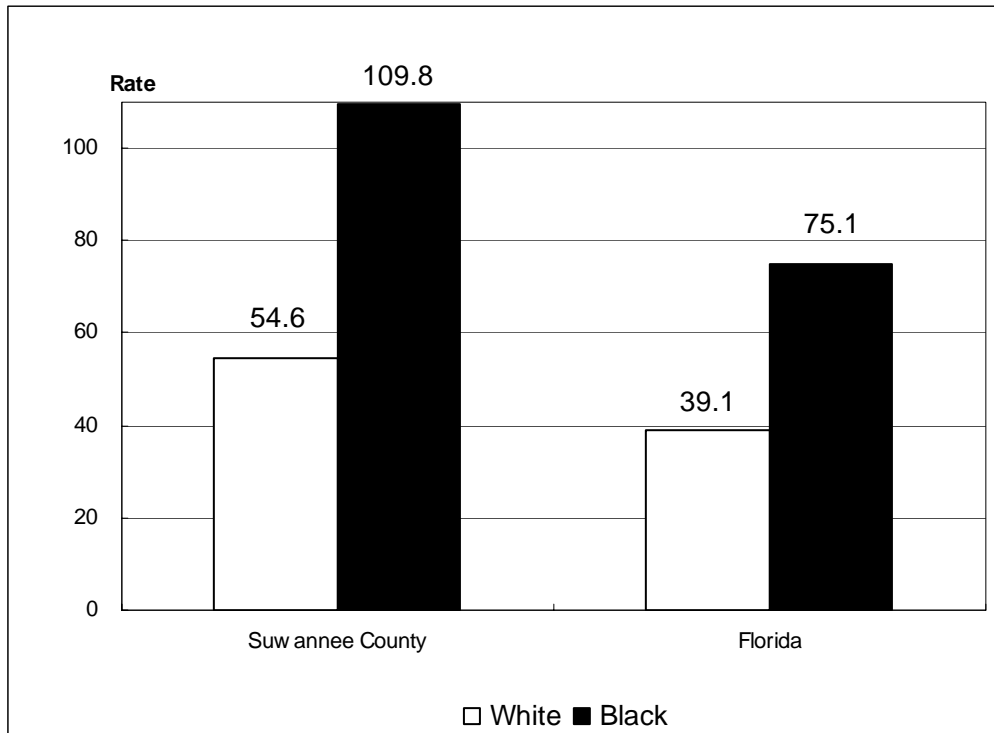
Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.
Prepared by: WellFlorida Council, 2007.

Figure 14. Respiratory disease age adjusted mortality rate per 100,000 population by race, Suwannee County and Florida, 2001-2005.



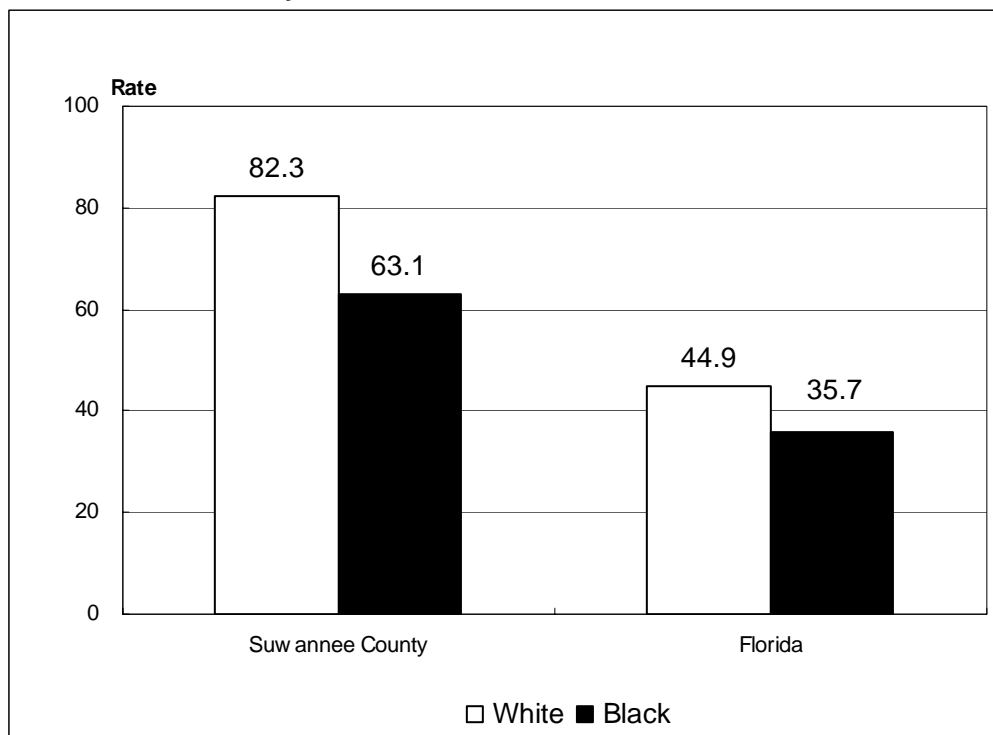
Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.
Prepared by: WellFlorida Council, 2007.

Figure 15. Stroke age adjusted mortality rate per 100,000 population by race, Suwannee County and Florida, 2001-2005.



Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.
Prepared by: WellFlorida Council, 2007.

Figure 16. Unintentional injuries age adjusted mortality rate per 100,000 population by race, Suwannee County and Florida, 2001-2005.



Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.
Prepared by: WellFlorida Council, 2007.

Trends

Table 27 and Figures 17 through 22 detail trends since 1997 in the top 5 causes of death in Suwannee County. Table 27 shows that since 1997 the overall age-adjusted mortality rate for both Suwannee County and Florida has been decreasing. This is in spite of the fact that the rates for some of the specific causes of death for Suwannee County have gone down over the past ten years, while others have increased.

As seen in Figure 17, Suwannee’s age-adjusted heart disease mortality rate is substantially higher than Florida. While the rate for Suwannee County has decreased over the past decade it has done so to a lesser extent than the state rate.

Figure 18 illustrates the age-adjusted cancer mortality rate for Suwannee County and the state. In this case, the rate for Suwannee County has increased by a larger measure in Suwannee County than in Florida.

Figure 19 shows a steady pattern for respiratory disease. While the age-adjusted respiratory disease death rate has slightly decreased in the state of Florida over the past decade, it has remained fairly consistent in Suwannee County since an initial decline in 1997-2001, from 73.1 per 100,000 during the period, to 64.3 per 100,000 during the 2001-2005 time period. In this case, the rate for Suwannee County is almost double the rate for Florida.

The age-adjusted unintentional injury mortality rate has been increasing in Suwannee County for the last 10 years (Figure 21). Although the rate in Florida is lower, it has been increasing at a much slower pace. Much of this increase in Suwannee County is attributable to an increasing motor vehicle crash death rate (Figure 22)

The age-adjusted motor vehicle crash mortality rate (Figure 22) is climbing much more precipitously in Suwannee County than at the state level. .

Table 26. Age adjusted morality rate per 100,000 population for all races for the top 5 leading causes of death in Suwannee County, 1997-2005.

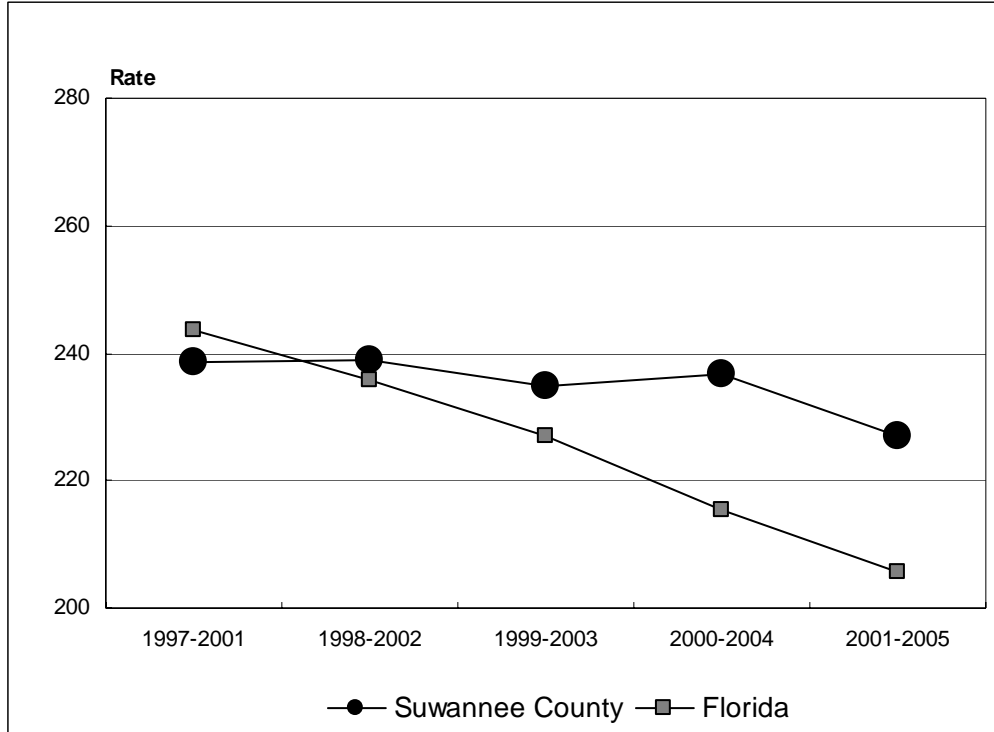
Cause of Death	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Suwannee County	Florida	Suwannee County	Florida	Suwannee County	Florida	Suwannee County	Florida	Suwannee County	Florida
All Causes	1,002.3	803.7	1,011.2	794.3	988.9	784.3	994.8	766.2	980.9	751.8
Heart (1)	238.6	243.6	238.8	235.8	234.7	226.9	236.7	215.3	227.0	205.5
Cancer (2)	209.8	190.3	216.4	186.1	211.1	182.6	220.0	178.9	225.0	175.8
Respiratory (3)	73.1	40.7	67.0	40.5	67.2	40.2	65.0	38.9	64.3	38.6
Stroke (4)	68.3	49.3	63.0	48.1	63.8	46.6	58.6	44.2	58.9	42.0
Unintentional Injuries (5)	51.8	36.9	61.0	38.2	66.0	39.8	73.6	41.3	78.3	42.8
MV Crashes	29.0	17.1	32.6	17.2	36.7	17.3	39.8	18.0	45.2	18.6

Rates in trend tables and graphs may differ slightly from those displayed earlier in the section as these populations estimates come from different sources and influence the calculation of the rates.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 17. Heart disease age adjusted mortality rate per 100,000 population for all races, 1997-2005.

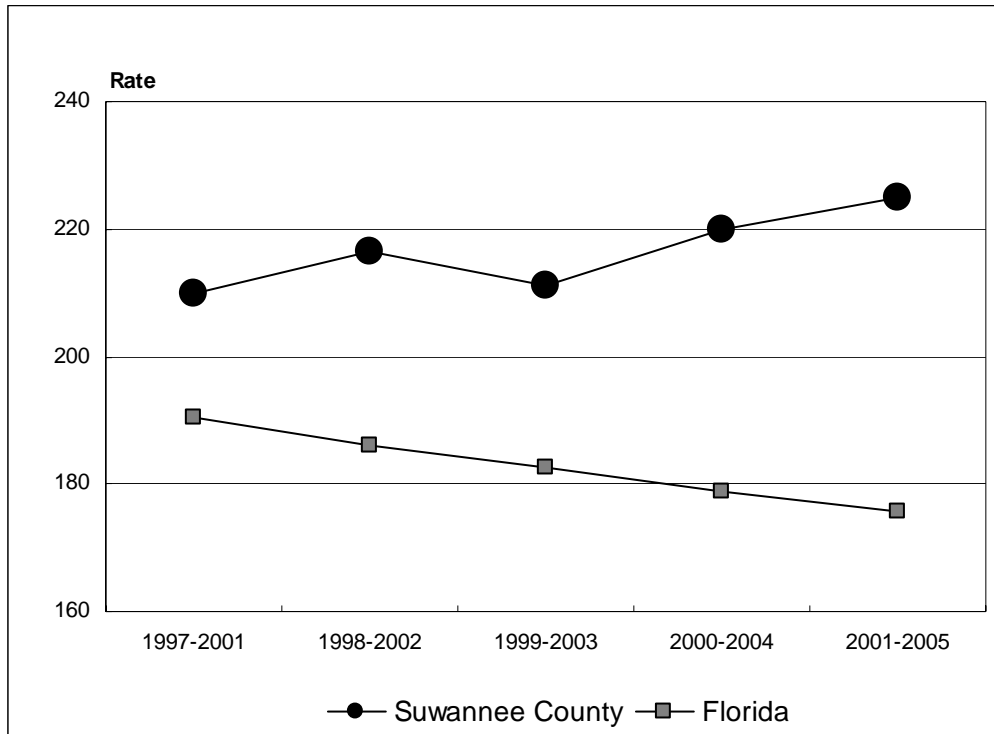


Rates in trend tables and graphs may differ slightly from those displayed earlier in the section as these populations estimates come from different sources and influence the calculation of the rates.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 18. Cancer age adjusted mortality rate per 100,000 population for all races, 1997-2005.

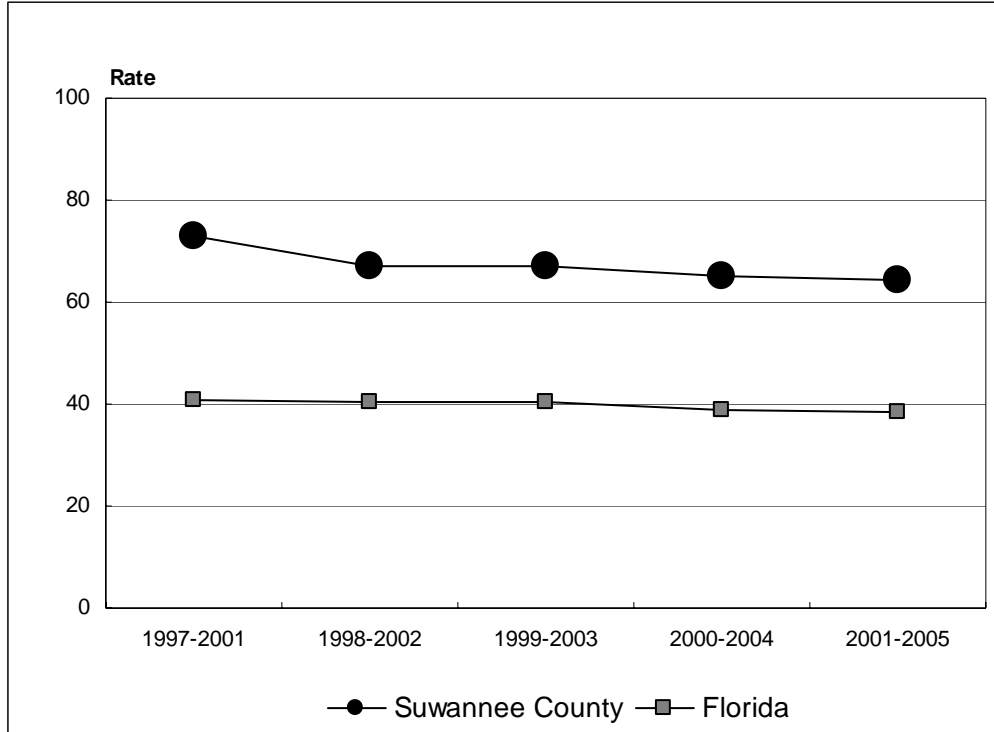


Rates in trend tables and graphs may differ slightly from those displayed earlier in the section as these populations estimates come from different sources and influence the calculation of the rates.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 19. Respiratory disease age adjusted mortality rate per 100,000 population for all races, 1997-2005.

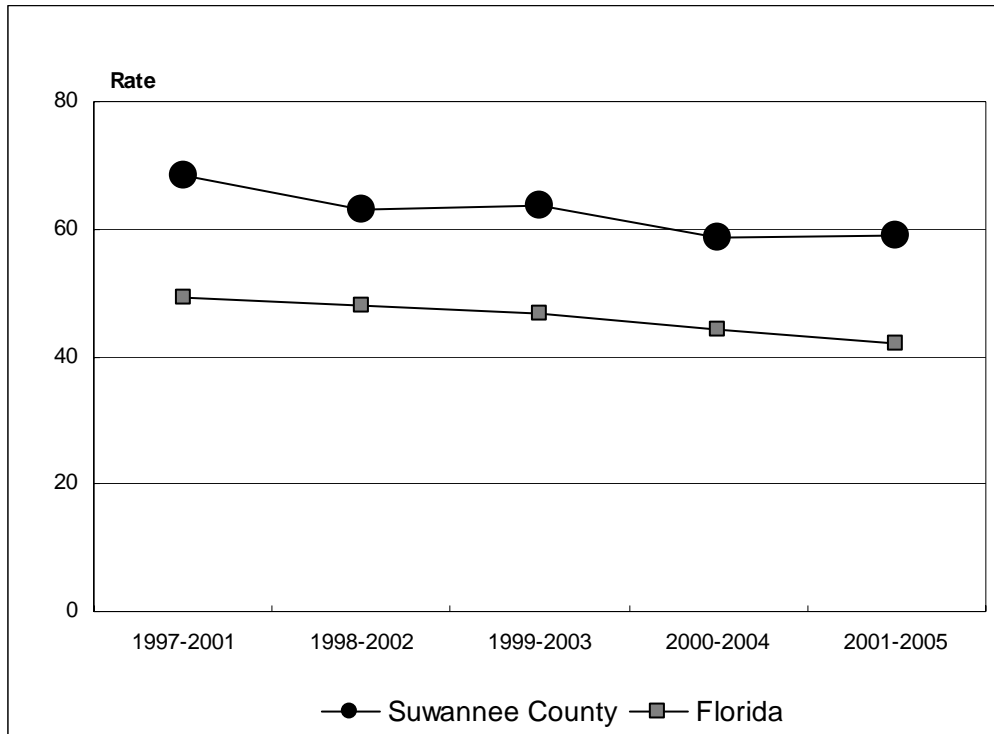


Rates in trend tables and graphs may differ slightly from those displayed earlier in the section as these populations estimates come from different sources and influence the calculation of the rates.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 20. Stroke age adjusted mortality rate per 100,000 population for all races, 1997-2005.

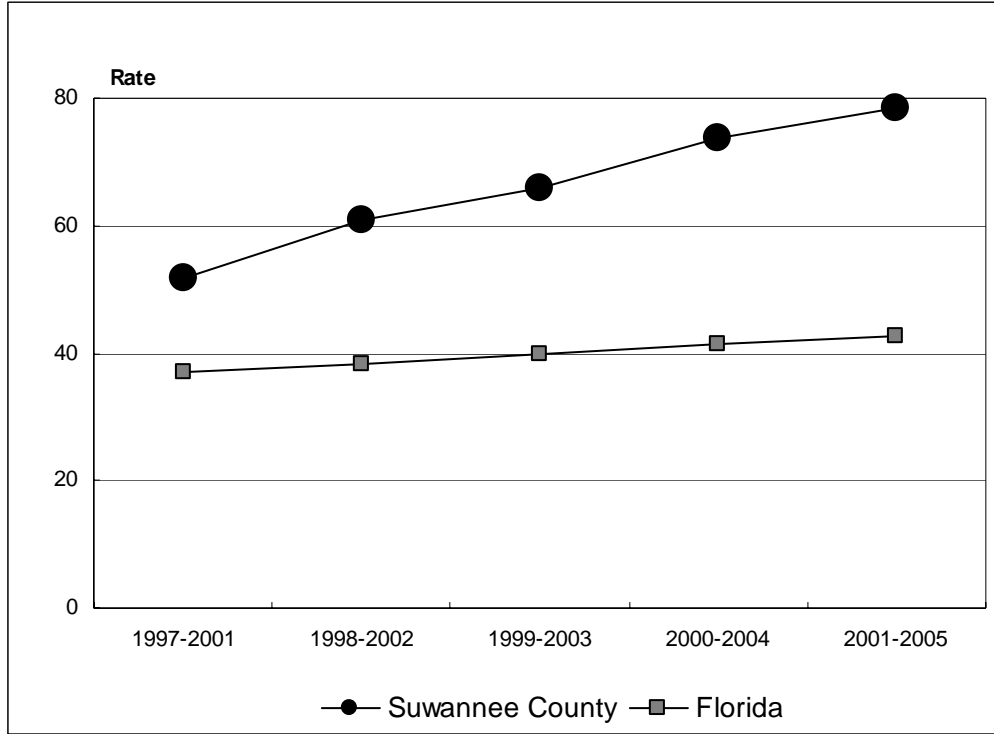


Rates in trend tables and graphs may differ slightly from those displayed earlier in the section as these populations estimates come from different sources and influence the calculation of the rates.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 21. Unintentional injuries age adjusted mortality rate per 100,000 population for all races, 1997-2005.

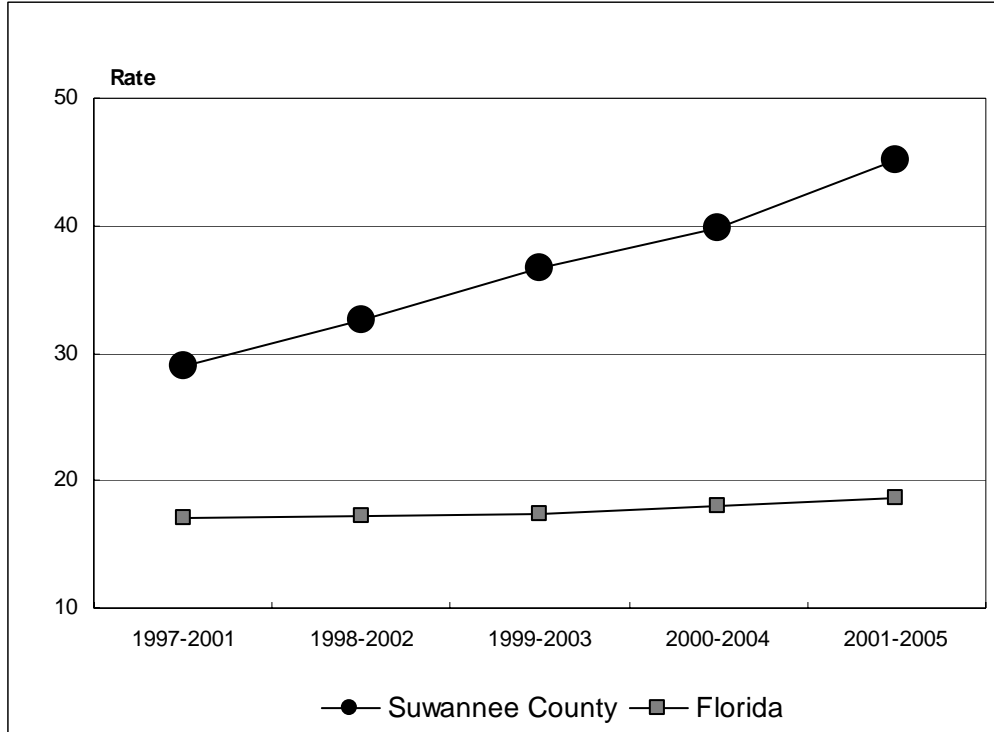


Rates in trend tables and graphs may differ slightly from those displayed earlier in the section as these populations estimates come from different sources and influence the calculation of the rates.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 22. Motor vehicle crashes age adjusted mortality rate per 100,000 population for all races, 1997-2005.



Rates in trend tables and graphs may differ slightly from those displayed earlier in the section as these populations estimates come from different sources and influence the calculation of the rates.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Hospitalization

Tables 27 through 39 provide a glimpse at the major causes of hospitalization for various populations within Suwannee County. Table 27 summarizes the top 5 causes of hospitalization for the following populations in Suwannee County:

- All residents
- Females
- Males
- Black residents
- White residents
- Age 0-17
- Age 18-64, and
- Age 65 and older.

As seen in Table 27, the leading cause of hospitalization in Suwannee County between 2004 and 2006 was for being a normal newborn. In this time period, there were close to 1,130 normal newborn hospitalizations of Suwannee County residents (Table 28). Vaginal delivery without complicating diagnosis followed by heart failure and shock make up the second and third leading causes of hospitalization for all residents. Chronic obstructive pulmonary and simple pneumonia and pleurisy, age > 17 with CC round out the top five.

Table 27 demonstrates a pattern that is seen in much of the other health status data. Because white residents make up such a large percentage of the total population, all 5 leading reasons for hospitalization among white residents mirrors the top 5 for all residents exactly.

The analysis of leading causes of hospitalization yields some interesting insights. Of course, for children age 0-17 their overwhelmingly leading cause of hospitalization is being born (i.e. normal newborn). However, neonate with other problems and bronchitis and asthma is their second and third leading causes, followed by Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders. Simple Pneumonia and Pleurisy, Age 0-17; Vaginal Delivery without complicating diagnosis; Full Term Neonate with Major Problems tied for the fifth leading causes of hospitalization in this age category.

Interestingly, chest pain and psychoses are in the top five for black residents, but not in either white or Hispanic populations. Persons age 65 and older were hospitalized for heart failure and shock most often. They were also the only group that had Cardiac Arrhythmia and Conduction Disorders with complications/co-morbid conditions.

Tables 29-38 also show some of the impact of these leading causes of hospitalization by showing comparisons among gender, race and ethnicity. Table 39 shows the hospitalizations by zipcode of resident. Interestingly Mc Alpin (32602) was the only zipcode in which psychoses ranked in the top 5 hospitalizations compared to the surrounding areas.

Table 27. Top 5 leading causes of hospitalizations for various Suwannee County resident populations, calendar year 2004-2006.

Population	1st	2nd	3rd	4th	5th
All Residents	Normal Newborn	Vaginal Delivery without complicating diagnosis	Heart Failure and Shock	Chronic Obstructive Pulmonary Disease	Simple Pneumonia and Pleurisy, Age > 17 with CC
Females	Vaginal Delivery without complicating diagnosis	Normal Newborn	Heart Failure and Shock	Cesarean Section without CC	Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC
Males	Normal Newborn	Heart Failure and Shock	Simple Pneumonia and Pleurisy, Age > 17 with CC	Chronic Obstructive Pulmonary Disease	Chest Pain
Black	Normal Newborn	Vaginal Delivery without complicating diagnosis	Heart Failure and Shock	Chest Pain	Psychoses
White	Normal Newborn	Vaginal Delivery without complicating diagnosis	Heart Failure and Shock	Chronic Obstructive Pulmonary Disease	Simple Pneumonia and Pleurisy, Age > 17 with CC
0-17	Normal Newborn	Neonate with other significant problems	Bronchitis and Asthma	Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age 0-17	Simple Pneumonia and Pleurisy, Age 0-17; Vaginal Delivery without complicating diagnosis; Full Term Neonate with Major Problems
18 - 64	Vaginal Delivery without complicating diagnosis	Cesarean Section without CC	Chest Pain	Psychoses	Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC
65+	Heart Failure and Shock	Chronic Obstructive Pulmonary Disease	Simple Pneumonia and Pleurisy, Age > 17 with CC	Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC	Cardiac Arrhythmia and Conduction Disorders with CC
Hispanics	Normal Newborn	Vaginal Delivery without complicating diagnosis	Cesarean Section without CC	Neonate with other significant problems	Vaginal Delivery with complicating diagnoses
Non-Hispanics	Normal Newborn	Vaginal Delivery without complicating diagnosis	Heart Failure and Shock	Chronic Obstructive Pulmonary Disease	Simple Pneumonia and Pleurisy, Age > 17 with CC

Source: AHCA Detailed Discharge Data Tapes, 2004-2006.
Prepared by: WellFlorida Council, 2007.

Table 28. Hospital discharges for all Suwannee County residents by top 15 leading reasons of hospitalizations, calendar year 2004-2006.

DRG	2004		2005		2006		2004-2006	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal Newborn (391)	394	6.4	362	5.8	374	5.9	1,130	6.1
Vaginal Delivery without complicating diagnosis (373)	311	5.1	270	4.3	297	4.7	878	4.7
Heart Failure and Shock (127)	207	3.4	229	3.7	219	3.5	655	3.5
Chronic Obstructive Pulmonary Disease (088)	162	2.6	231	3.7	169	2.7	562	3.0
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	196	3.2	160	2.6	161	2.6	517	2.8
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	148	2.4	157	2.5	165	2.6	470	2.5
Chest Pain (143)	168	2.7	139	2.2	143	2.3	450	2.4
Cesarean Section without CC (371)	110	1.8	105	1.7	133	2.1	348	1.9
Psychoses (430)	82	1.3	136	2.2	107	1.7	325	1.7
Cardiac Arrhythmia and Conduction Disorders with CC (138)	54	0.9	85	1.4	79	1.3	218	1.2
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 without CC (183)	74	1.2	74	1.2	66	1.0	214	1.1
Neonate with other significant problems (390)	74	1.2	54	0.9	86	1.4	214	1.1
Red Blood Cell Disorders, Age > 17 (395)	70	1.1	62	1.0	79	1.3	211	1.1
GI Hemorrhage with CC (174)	71	1.2	79	1.3	59	0.9	209	1.1
Nutritional and Miscellaneous Metabolic Disorders, Age > 17 with CC (296)	65	1.1	63	1.0	80	1.3	208	1.1
All Others	3963	64.4	4003	64.5	4084	64.8	12050	64.6
Total	6149	100.0	6209	100.0	6301	100.0	18,659	100.0

Source: ACHA Detailed Discharge Data, CY 2004-2006.

Prepared by: WellFlorida Council, 2007.

Table 29. Hospital discharges for female Suwannee County residents by top 15 leading reasons of hospitalizations, calendar year 2004-2006.

DRG	2004		2005		2006		2004-2006	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Vaginal Delivery without complicating diagnosis (373)	311	8.4	270	7.3	297	8.0	878	7.9
Normal Newborn (391)	203	5.5	173	4.7	184	5.0	560	5.0
Heart Failure and Shock (127)	118	3.2	131	3.5	118	3.2	367	3.3
Cesarean Section without CC (371)	110	3.0	105	2.8	133	3.6	348	3.1
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	110	3.0	113	3.1	117	3.2	340	3.1
Chronic Obstructive Pulmonary Disease (088)	92	2.5	130	3.5	101	2.7	323	2.9
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	101	2.7	81	2.2	91	2.5	273	2.5
Chest Pain (143)	106	2.9	77	2.1	86	2.3	269	2.4
Psychoses (430)	53	1.4	75	2.0	63	1.7	191	1.7
Uterine and Adnexa Procedures for Nonmalignancy without CC (359)	46	1.2	64	1.7	60	1.6	170	1.5
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 without CC (183)	56	1.5	51	1.4	54	1.5	161	1.4
Red Blood Cell Disorders, Age > 17 (395)	48	1.3	49	1.3	50	1.4	147	1.3
Kidney and Urinary Tract Infections, Age > 17 with CC (320)	46	1.2	43	1.2	51	1.4	140	1.3
Nutritional and Miscellaneous Metabolic Disorders, Age > 17 with CC (296)	38	1.0	45	1.2	48	1.3	131	1.2
Septicemia, Age > 17 (416)	39	1.1	49	1.3	38	1.0	126	1.1
All Others	2236	60.2	2247	60.7	2208	59.7	6691	60.2
Total	3713	100.0	3703	100.0	3699	100.0	11115	100.0

Source: ACHA Detailed Discharge Data, CY 2004-2006.

Prepared by: WellFlorida Council, 2007.

Table 30. Hospital discharges for male Suwannee County residents by top 15 leading reasons of hospitalizations, calendar year 2004-2006.

DRG	2004		2005		2006		2004-2006	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal Newborn (391)	191	7.8	189	7.5	190	7.3	570	7.6
Heart Failure and Shock (127)	89	3.7	98	3.9	101	3.9	288	3.8
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	95	3.9	79	3.2	70	2.7	244	3.2
Chronic Obstructive Pulmonary Disease (088)	70	2.9	101	4.0	68	2.6	239	3.2
Chest Pain (143)	62	2.5	62	2.5	57	2.2	181	2.4
Psychoses (430)	29	1.2	61	2.4	44	1.7	134	1.8
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	38	1.6	44	1.8	48	1.8	130	1.7
Neonate with other significant problems (390)	42	1.7	28	1.1	54	2.1	124	1.6
Percutaneous Cardiovascular Procedure with Drug-Eluting Stent without AMI (527)	68	2.8	53	2.1	0	-	121	1.6
Atherosclerosis with CC (132)	35	1.4	36	1.4	41	1.6	112	1.5
GI Hemorrhage with CC (174)	41	1.7	36	1.4	26	1.0	103	1.4
Cardiac Arrhythmia and Conduction Disorders with CC (138)	25	1.0	34	1.4	37	1.4	96	1.3
Intracranial Hemorrhage or Cerebral Infarction (014)	18	0.7	39	1.6	35	1.3	92	1.2
Renal Failure (316)	19	0.8	35	1.4	28	1.1	82	1.1
Circulatory Disorders Except Acute Myocardial Infarction with Cardiac Catheterization without complex Diagnosis (125)	21	0.9	26	1.0	30	1.2	77	1.0
Nutritional and Miscellaneous Metabolic Disorders, Age > 17 with CC (296)	27	1.1	18	0.7	32	1.2	77	1.0
All Others	1566	64.3	1567	62.5	1741	66.9	4874	64.6
Total	2436	100.0	2506	100.0	2602	100.0	7544	100.0

Source: ACHA Detailed Discharge Data, CY 2004-2006.

Prepared by: WellFlorida Council, 2007.

Table 31. Hospital discharges for white race Suwannee County residents by top 15 leading reasons of hospitalizations, calendar year 2004-2006.

DRG	2004		2005		2006		2004-2006	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal Newborn (391)	340	6.3	300	5.5	323	5.8	963	5.9
Vaginal Delivery without complicating diagnosis (373)	283	5.2	228	4.2	253	4.5	764	4.7
Heart Failure and Shock (127)	173	3.2	201	3.7	193	3.5	567	3.5
Chronic Obstructive Pulmonary Disease (088)	145	2.7	206	3.8	160	2.9	511	3.1
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	180	3.3	139	2.6	153	2.8	472	2.9
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	138	2.6	143	2.6	146	2.6	427	2.6
Chest Pain (143)	145	2.7	117	2.2	122	2.2	384	2.3
Cesarean Section without CC (371)	95	1.8	87	1.6	113	2.0	295	1.8
Psychoses (430)	66	1.2	104	1.9	91	1.6	261	1.6
Percutaneous Cardiovascular Procedure with Drug-Eluting Stent without AMI (527)	107	2.0	88	1.6	0	-	195	1.2
Atherosclerosis with CC (132)	80	1.5	57	1.1	55	1.0	192	1.2
Cardiac Arrhythmia and Conduction Disorders with CC (138)	49	0.9	76	1.4	66	1.2	191	1.2
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 without CC (183)	63	1.2	66	1.2	61	1.1	190	1.2
GI Hemorrhage with CC (174)	60	1.1	74	1.4	51	0.9	185	1.1
Neonate with other significant problems (390)	63	1.2	47	0.9	72	1.3	182	1.1
All Others	3411	63.2	3492	64.4	3702	66.6	10605	64.7
Total	5398	100.0	5425	100.0	5561	100.0	16384	100.0

Source: ACHA Detailed Discharge Data, CY 2004-2006.

Prepared by: WellFlorida Council, 2007.

Table 32. Hospital discharges for black race Suwannee County residents by top 15 leading reasons of hospitalizations, calendar year 2004-2006.

DRG	2004		2005		2006		2004-2006	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal Newborn (391)	50	7.2	54	7.6	45	6.5	149	7.1
Vaginal Delivery without complicating diagnosis (373)	27	3.9	38	5.4	41	5.9	106	5.1
Heart Failure and Shock (127)	30	4.3	25	3.5	23	3.3	78	3.7
Chest Pain (143)	21	3.0	20	2.8	21	3.0	62	3.0
Psychoses (430)	16	2.3	30	4.2	16	2.3	62	3.0
Cesarean Section without CC (371)	12	1.7	16	2.3	18	2.6	46	2.2
Chronic Obstructive Pulmonary Disease (088)	14	2.0	24	3.4	7	1.0	45	2.2
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	10	1.4	13	1.8	19	2.8	42	2.0
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	15	2.2	21	3.0	5	0.7	41	2.0
Nutritional and Miscellaneous Metabolic Disorders, Age > 17 with CC (296)	14	2.0	10	1.4	12	1.7	36	1.7
Red Blood Cell Disorders, Age > 17 (395)	23	3.3	6	0.8	7	1.0	36	1.7
Renal Failure (316)	7	1.0	13	1.8	14	2.0	34	1.6
Neonate with other significant problems (390)	10	1.4	7	1.0	14	2.0	31	1.5
Cardiac Arrhythmia and Conduction Disorders with CC (138)	5	0.7	8	1.1	12	1.7	25	1.2
Uterine and Adnexa Procedures for Nonmalignancy without CC (359)	5	0.7	6	0.8	14	2.0	25	1.2
All Others	433	62.6	419	59.0	422	61.2	1274	60.9
Total	692	100.0	710	100.0	690	100.0	2092	100.0

Source: ACHA Detailed Discharge Data, CY 2004-2006.

Prepared by: WellFlorida Council, 2007.

Table 33. Hospital discharges for other races Suwannee County residents by top 15 leading reasons of hospitalizations, calendar year 2004-2006.

DRG	2004		2005		2006		2004-2006	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal Newborn (391)	4	6.8	8	10.8	6	12.0	18	9.8
Heart Failure and Shock (127)	4	6.8	3	4.1	3	6.0	10	5.5
Vaginal Delivery without complicating diagnosis (373)	1	1.7	4	5.4	3	6.0	8	4.4
Cesarean Section without CC (371)	3	5.1	2	2.7	2	4.0	7	3.8
Chronic Obstructive Pulmonary Disease (088)	3	5.1	1	1.4	2	4.0	6	3.3
Percutaneous Cardiovascular Procedure with Drug-Eluting Stent without AMI (527)	3	5.1	3	4.1	0	-	6	3.3
Circulatory Disorders Except Acute Myocardial Infarction with Cardiac Catheterization without complex Diagnosis (125)	3	5.1	1	1.4	1	2.0	5	2.7
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	1	1.7	0	-	3	6.0	4	2.2
Chest Pain (143)	2	3.4	2	2.7	0	-	4	2.2
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 without CC (183)	2	3.4	1	1.4	0	-	3	1.6
Cellulitis, Age 0-17 (279)	1	1.7	0	-	2	4.0	3	1.6
Nutritional and Miscellaneous Metabolic Disorders, Age 0-17 (298)	0	-	2	2.7	1	2.0	3	1.6
Viral Illness and Fever of Unknown Origin, Age 0-17 (422)	0	-	3	4.1	0	-	3	1.6
All Others	32	54.2	44	59.5	27	54.0	103	56.3
Total	59	100.0	74	100.0	50	100.0	183	100.0

Source: ACHA Detailed Discharge Data, CY 2004-2006.

Prepared by: WellFlorida Council, 2007.

Table 34. Hospital discharges for Suwannee County residents (0-17 years of age) by top 15 leading reasons of hospitalizations, calendar year 2004-2006.

DRG	2004		2005		2006		2004-2006	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal Newborn (391)	394	40.4	362	41.0	374	42.1	1130	41.2
Neonate with other significant problems (390)	74	7.6	54	6.1	86	9.7	214	7.8
Bronchitis and Asthma (098)	40	4.1	41	4.6	46	5.2	127	4.6
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age 0-17 (184)	49	5.0	22	2.5	15	1.7	86	3.1
Simple Pneumonia and Pleurisy, Age 0-17 (091)	33	3.4	19	2.2	15	1.7	67	2.4
Vaginal Delivery without complicating diagnosis (373)	26	2.7	21	2.4	20	2.2	67	2.4
Full Term Neonate with Major Problems (389)	25	2.6	26	2.9	16	1.8	67	2.4
Neonates, Died or Transferred to Another Acute Care Facility (385)	32	3.3	19	2.2	14	1.6	65	2.4
Prematurity without Major Problems (388)	21	2.2	17	1.9	26	2.9	64	2.3
Nutritional and Miscellaneous Metabolic Disorders, Age 0-17 (298)	20	2.1	16	1.8	13	1.5	49	1.8
Viral Illness and Fever of Unknown Origin, Age 0-17 (422)	15	1.5	22	2.5	11	1.2	48	1.7
Depressive Neuroses (426)	13	1.3	23	2.6	11	1.2	47	1.7
Kidney and Urinary Tract Infections, Age 0-17 (322)	13	1.3	15	1.7	13	1.5	41	1.5
Extreme Immaturity or Respiratory Distress Syndrome of Neonate (386)	19	1.9	10	1.1	10	1.1	39	1.4
Psychoses (430)	14	1.4	10	1.1	9	1.0	33	1.2
All Others	187	19.2	205	23.2	210	23.6	602	21.9
Total	975	100.0	882	100.0	889	100.0	2746	100.0

Source: ACHA Detailed Discharge Data, CY 2004-2006.

Prepared by: WellFlorida Council, 2007.

Table 35. Hospital discharges for Suwannee County residents (18-64 years of age) by top 15 leading reasons of hospitalizations, calendar year 2004-2006.

DRG	2004		2005		2006		2004-2006	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Vaginal Delivery without complicating diagnosis (373)	285	10.1	249	8.8	277	9.6	811	9.5
Cesarean Section without CC (371)	105	3.7	102	3.6	127	4.4	334	3.9
Chest Pain (143)	115	4.1	93	3.3	95	3.3	303	3.5
Psychoses (430)	62	2.2	114	4.0	76	2.6	252	3.0
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	67	2.4	74	2.6	85	2.9	226	2.6
Chronic Obstructive Pulmonary Disease (088)	62	2.2	101	3.6	62	2.1	225	2.6
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	58	2.1	62	2.2	64	2.2	184	2.2
Heart Failure and Shock (127)	57	2.0	53	1.9	55	1.9	165	1.9
Uterine and Adnexa Procedures for Nonmalignancy without CC (359)	42	1.5	61	2.2	58	2.0	161	1.9
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 without CC (183)	54	1.9	53	1.9	37	1.3	144	1.7
Circulatory Disorders Except Acute Myocardial Infarction with Cardiac Catheterization without Complex Diagnosis (125)	31	1.1	29	1.0	44	1.5	104	1.2
Disorders of Pancreas Except Malignancy (204)	33	1.2	27	1.0	36	1.2	96	1.1
Vaginal Delivery with Sterilization and/or D&C (374)	39	1.4	31	1.1	25	0.9	95	1.1
Red Blood Cell Disorders, Age > 17 (395)	34	1.2	24	0.8	25	0.9	83	1.0
Vaginal Delivery with complicating diagnoses (372)	28	1.0	30	1.1	24	0.8	82	1.0
Cervical Spinal Fusion without CC (520)	27	1.0	25	0.9	30	1.0	82	1.0
All Others	1727	61.1	1700	60.1	1766	61.2	5193	60.8
Total	2826	100.0	2828	100.0	2886	100.0	8540	100.0

Source: ACHA Detailed Discharge Data, CY 2004-2006.

Prepared by: WellFlorida Council, 2007.

Table 36. Hospital discharges for Suwannee County residents (65 years of age and older) by top 15 leading reasons of hospitalizations, calendar year 2004-2006.

DRG	2004		2005		2006		2004-2006	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Heart Failure and Shock (127)	150	6.4	176	7.0	164	6.5	490	6.6
Chronic Obstructive Pulmonary Disease (088)	99	4.2	130	5.2	106	4.2	335	4.5
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	138	5.9	98	3.9	97	3.8	333	4.5
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	81	3.4	83	3.3	80	3.2	244	3.3
Cardiac Arrhythmia and Conduction Disorders with CC (138)	39	1.7	65	2.6	61	2.4	165	2.2
GI Hemorrhage with CC (174)	55	2.3	55	2.2	47	1.9	157	2.1
Intracranial Hemorrhage or Cerebral Infarction (014)	29	1.2	61	2.4	63	2.5	153	2.1
Chest Pain (143)	53	2.3	45	1.8	48	1.9	146	2.0
Nutritional and Miscellaneous Metabolic Disorders, Age > 17 with CC (296)	45	1.9	45	1.8	55	2.2	145	2.0
Kidney and Urinary Tract Infections, Age > 17 with CC (320)	44	1.9	43	1.7	57	2.3	144	2.0
Septicemia, Age > 17 (416)	39	1.7	60	2.4	30	1.2	129	1.7
Red Blood Cell Disorders, Age > 17 (395)	36	1.5	38	1.5	54	2.1	128	1.7
Percutaneous Cardiovascular Procedure with Drug-Eluting Stent without AMI (527)	73	3.1	51	2.0	0	-	124	1.7
Atherosclerosis with CC (132)	53	2.3	41	1.6	26	1.0	120	1.6
Major Joint and Limb Reattachment Procedures of Lower Extremity (209)	58	2.5	56	2.2	0	-	114	1.5
Circulatory Disorders with Acute Myocardial Infarction and Major Complications, Discharged Alive (121)	29	1.2	49	2.0	36	1.4	114	1.5
All Others	1327	56.5	1403	56.1	1602	63.4	4332	58.8
Total	2348	100.0	2499	100.0	2526	100.0	7373	100.0

Source: ACHA Detailed Discharge Data, CY 2004-2006.

Prepared by: WellFlorida Council, 2007.

Table 37. Hospital discharges for Hispanic Suwannee County residents by top 15 leading reasons of hospitalizations, calendar year 2004-2006.

DRG	2004		2005		2006		2004-2006	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal Newborn (391)	48	21.7	29	15.6	46	20.5	123	19.5
Vaginal Delivery without complicating diagnosis (373)	43	19.5	26	14.0	46	20.5	115	18.2
Cesarean Section without CC (371)	10	4.5	10	5.4	11	4.9	31	4.9
Neonate with other significant problems (390)	11	5.0	7	3.8	8	3.6	26	4.1
Vaginal Delivery with complicating diagnoses (372)	7	3.2	3	1.6	6	2.7	16	2.5
Bronchitis and Asthma, Age 0-17 (098)	5	2.3	5	2.7	4	1.8	14	2.2
Prematurity without Major Problems (388)	3	1.4	4	2.2	2	0.9	9	1.4
Chemotherapy without Acute Leukemia as Secondary Diagnosis (410)	1	0.5	6	3.2	2	0.9	9	1.4
Cesarean Section with CC (370)	4	1.8	3	1.6	1	0.4	8	1.3
Full Term Neonate with Major Problems (389)	3	1.4	1	0.5	4	1.8	8	1.3
Chest Pain (143)	2	0.9	2	1.1	3	1.3	7	1.1
Vaginal Delivery with Sterilization and/or D&C (374)	5	2.3	1	0.5	1	0.4	7	1.1
Neonates, Died or Transferred to another Acute Care Facility (385)	3	1.4	1	0.5	3	1.3	7	1.1
HIV with Major Related Condition (489)	3	1.4	4	2.2	0	-	7	1.1
Simple Pneumonia and Pleurisy, Age 0-17 (091)	3	1.4	1	0.5	2	0.9	6	1.0
All Others	70	31.7	83	44.6	85	37.9	238	37.7
Total	221	100.0	186	100.0	224	100.0	631	100.0

Source: ACHA Detailed Discharge Data, CY 2004-2006.

Prepared by: WellFlorida Council, 2007.

Table 38. Hospital discharges for Non-Hispanic Suwannee County residents by top 15 leading reasons of hospitalizations, calendar year 2004-2006.

DRG	2004		2005		2006		2004-2006	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Normal Newborn (391)	346	5.8	333	5.5	328	5.4	1007	5.6
Vaginal Delivery without complicating diagnosis (373)	268	4.5	244	4.1	251	4.1	763	4.2
Heart Failure and Shock (127)	207	3.5	227	3.8	217	3.6	651	3.6
Chronic Obstructive Pulmonary Disease (088)	162	2.7	231	3.8	167	2.7	560	3.1
Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	193	3.3	160	2.7	159	2.6	512	2.8
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 with CC (182)	146	2.5	157	2.6	164	2.7	467	2.6
Chest Pain (143)	166	2.8	137	2.3	140	2.3	443	2.5
Psychoses (430)	78	1.3	136	2.3	107	1.8	321	1.8
Cesarean Section without CC (371)	100	1.7	95	1.6	122	2.0	317	1.8
Cardiac Arrhythmia and Conduction Disorders with CC (138)	53	0.9	85	1.4	78	1.3	216	1.2
Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders, Age > 17 without CC (183)	72	1.2	74	1.2	65	1.1	211	1.2
Red Blood Cell Disorders, Age > 17 (395)	70	1.2	62	1.0	79	1.3	211	1.2
GI Hemorrhage with CC (174)	71	1.2	79	1.3	59	1.0	209	1.2
Nutritional and Miscellaneous Metabolic Disorders, Age > 17 with CC (296)	65	1.1	63	1.0	79	1.3	207	1.1
Percutaneous Cardiovascular Procedure with Drug-Eluting Stent without AMI (527)	112	1.9	92	1.5	0	-	204	1.1
All Others	3819	64.4	3848	63.9	4062	66.8	11729	65.1
Total	5928	100.0	6023	100.0	6077	100.0	18028	100.0

Source: ACHA Detailed Discharge Data, CY 2004-2006.

Prepared by: WellFlorida Council, 2007.

Table 39. Hospital discharges for all Suwannee County residents by zipcode for top 5 leading reasons of hospitalizations, calendar year 2004-2006.

32008 Branford	Normal Newborn (391)	Vaginal Delivery without complicating diagnosis (373)	Heart Failure and Shock (127)	Chronic Obstructive Pulmonary Disease (088)	Chest Pain (143)
32060 Live Oak	Normal Newborn (391)	Vaginal Delivery without complicating diagnosis (373)	Heart Failure and Shock (127)	Chronic Obstructive Pulmonary Disease (088)	Simple Pneumonia and Pleurisy, Age > 17 with CC (089)
32062 MC Alpin	Normal Newborn (391)	Vaginal Delivery without complicating diagnosis (373)	Heart Failure and Shock (127)	Psychoses (430)	Chronic Obstructive Pulmonary Disease (088)
32064 Live Oak	Normal Newborn (391)	Vaginal Delivery without complicating diagnosis (373)	Heart Failure and Shock (127)	Chronic Obstructive Pulmonary Disease (088)	Simple Pneumonia and Pleurisy, Age > 17 with CC (089)
32071 O Brien	Normal Newborn (391)	Vaginal Delivery without complicating diagnosis (373)	Chest Pain (143)	Simple Pneumonia and Pleurisy, Age > 17 with CC (089)	Heart Failure and Shock (127)
32094 Wellborn	Normal Newborn (391)	Heart Failure and Shock (127)	Chest Pain (143)	Vaginal Delivery without complicating diagnosis (373)	Chronic Obstructive Pulmonary Disease (088)
Suwannee County	Normal Newborn (391)	Vaginal Delivery without complicating diagnosis (373)	Heart Failure and Shock (127)	Chronic Obstructive Pulmonary Disease (088)	Simple Pneumonia and Pleurisy, Age > 17 with CC (089)

Source: ACHA Detailed Discharge Data, CY 2004-2006.
Prepared by: WellFlorida Council, 2007.

Birth Indicators

Birth outcome indicators are a critical measure of a society and a community's health status. Unfortunately, Florida's birth outcome indicators in the last decade have consistently ranked in the bottom half of the nation according to the *National Kids Count Data Book* prepared by the Annie E. Casey Foundation.

Overall, these rankings remain poor for Florida but progress has been made. Substantial progress has been seen in these indicators in Suwannee County as well though work remains to be done, especially in the disparity of outcome between races and ethnicities.

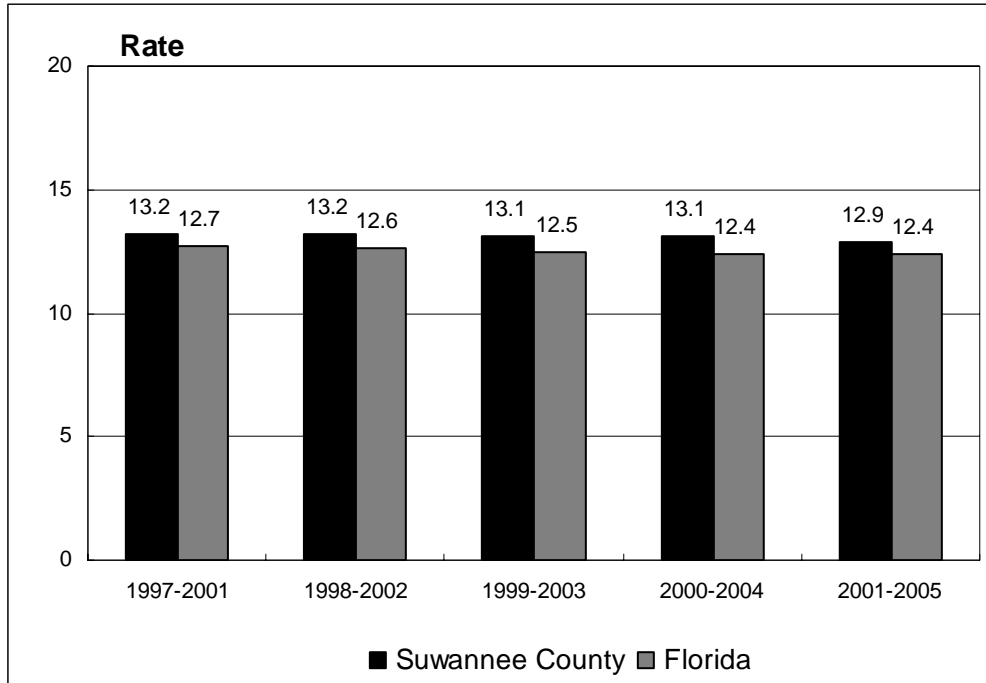
Birth Rates

Figure 23 shows that between 1997 and 2005, Suwannee County's birth rate was higher than the state as a whole. This is to be expected in a county with a smaller population of non-elderly citizens who are beyond the traditional age of childbearing.

In Table 40 it can be seen that while the birth rate for whites in Suwannee County has been higher than the birth rates for whites at the state level, the rates for blacks have been consistently lower than for blacks at the state level.

Figure 23 and Table 40 shows that birth rates in Suwannee County have remained fairly steady and consistently above Florida's rates. Due to the limitations of collecting data on the Hispanic population, birth rates cannot be calculated. However, Table 41 shows that like its Hispanic population in general, the number of Hispanic births in Suwannee County has increased.

Figure 23. Birth rates per 1,000 total population for all races, Suwannee County and Florida, 1997-2005.



Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Table 40. Birth rates per 1,000 total population by race, Suwannee County and Florida, 1997-2005.

Area	All Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee County	2,262	13.2	2,303	13.2	2,333	13.1	2,377	13.1	2,382	12.9
Florida	994,661	12.7	1,007,937	12.6	1,024,616	12.5	1,045,603	12.4	1,067,751	12.4
Area	White Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee County	1,879	12.7	1,923	12.7	1,940	12.5	1,980	12.5	1,984	12.3
Florida	737,702	11.4	746,062	11.3	757,596	11.3	771,345	11.2	622,135	8.9
Area	Black Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee County	363	17.0	357	16.6	367	16.8	361	16.4	353	16.0
Florida	227,164	18.8	229,807	18.5	232,607	18.2	234,562	17.9	235,262	17.3

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Table 41. Hispanic birth rates per 1,000 population, Suwannee County and Florida, 1997-2005.

Area	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee County	182	1.1	219	1.3	247	1.4	278	1.5	295	1.6
Florida	213799	2.7	228069	2.8	243402	3	260448	3.1	278365	3.2

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Early Access to Prenatal Care

During the 1990s, Florida experience several improvements on measures that reflect the status of maternal and child health, including reductions to the births to mothers who regularly smoked, repeat births to teenagers and births to women who received no or late prenatal care. The proportion of births to mothers who received late or not prenatal care was cut in half from 7.0 percent in 1990 to 3.5 percent in 1998. During this time, substantial gains were also made in the percentage of mothers who received early access to prenatal care (defined as care in their first trimester).

Table 42 shows that a smaller percentage of births in Suwannee County had access to prenatal care between 1997-2005. Moreover, the percentage decreased from 79.3 percent in the 1997-2001 periods to 73.4 percent during the 2001-2005 period. When examined by race, it can be seen that for whites in Suwannee County, the percentage of births with access to prenatal care has declined from 80.4 percent to 74.6 percent over the past decade while the percentage of black births with access to prenatal care has decreased from 73.3 percent to 67.7 percent.

Figure 24 shows that while early access to prenatal care has been fairly stable in Suwannee County as well as Florida over the last decade, both the county and the state have substantial improvements to make in the forthcoming years.

Just as concerning is the disparity depicted in Table 43 and Figure 25 between Hispanic moms who had access to prenatal care in Suwannee County and Florida. While the percent of Hispanic moms in Florida who are able to gain access to prenatal care is close to the percentage for all races from year to year, the percent for Hispanics in Suwannee County is substantially less. During the period of 2001-2005 only 53.6 percent of Hispanic moms were able to get early access to prenatal care. This is however a small increase from the previous year.

Table 42. Percent of births with early access to care by race, Suwannee County and Florida, 1997-2005.

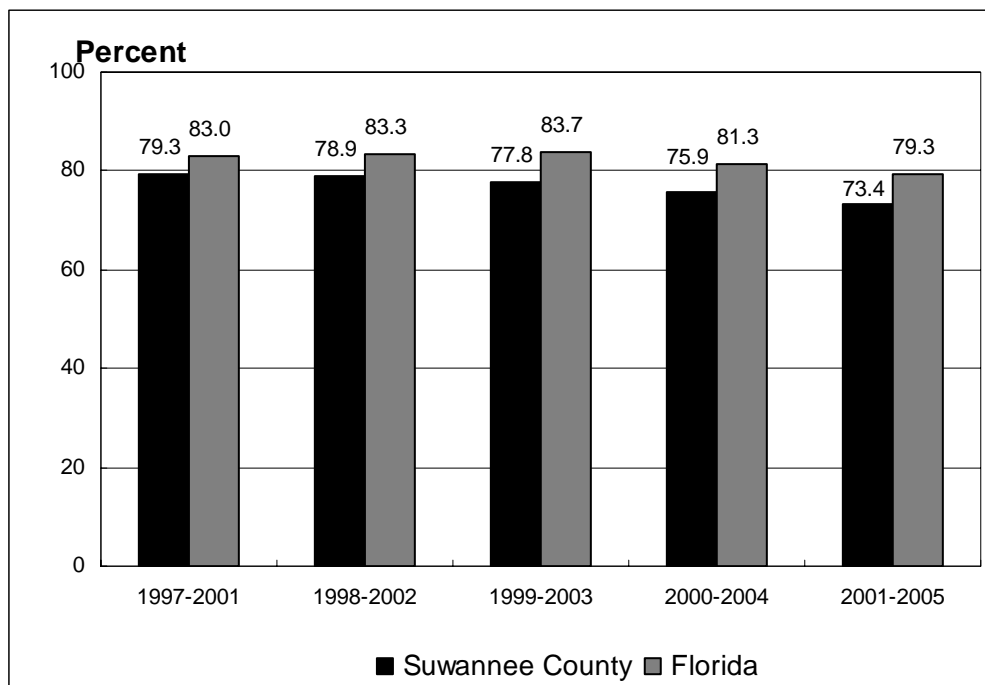
Area	All Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Suwannee	1,793	79.3	1,818	78.9	1,816	77.8	1,805	75.9	1,749	73.4
Florida	825,719	83.0	839,620	83.3	857,515	83.7	850,600	81.3	840,057	79.3
Area	White Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Suwannee	1,510	80.4	1,537	79.9	1,535	79.1	1,526	77.1	1,480	74.6
Florida	637,361	86.4	645,536	86.5	657,001	86.7	649,954	84.3	521,164	83.8
Area	Black Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Suwannee	266	73.3	262	73.4	262	71.4	252	69.8	239	67.7
Florida	164,140	72.3	168,045	73.1	172,377	74.1	169,648	72.3	135,536	72.3

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 24. Percent of births with early access to care for all races, Suwannee County and Florida, 1997-2005.



Percent of total births.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.
Prepared by: WellFlorida Council, 2007.

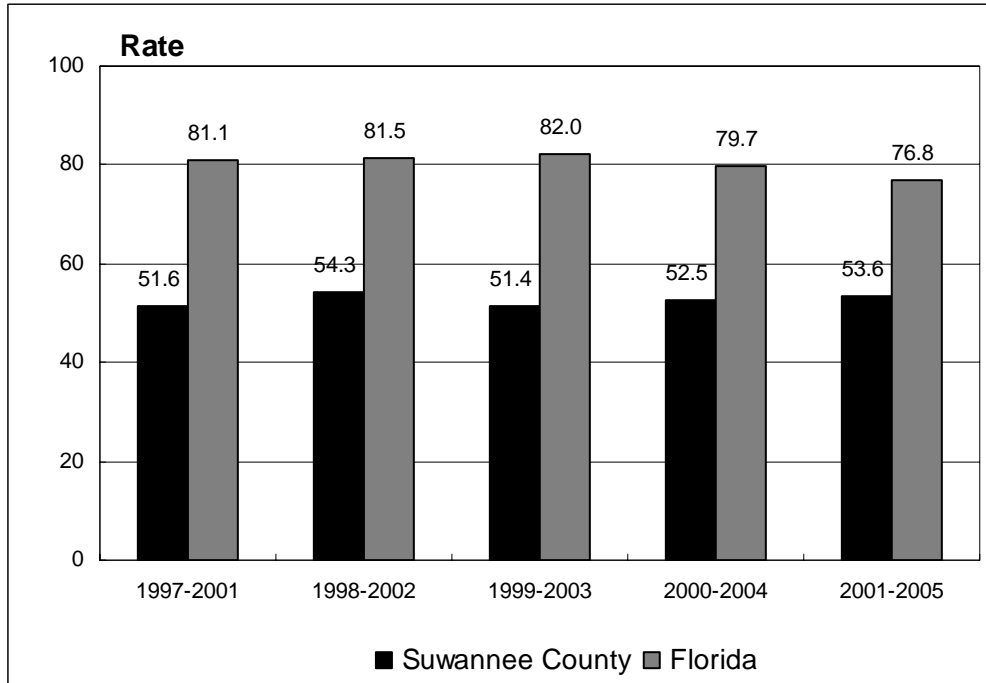
Table 43. Percent of Hispanic births with early access to care by race, Suwannee County and Florida, 1997-2005.

Area	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee	94	51.6	119	54.3	127	51.4	146	52.5	158	53.6
Florida	173,312	81.1	185,878	81.5	199,567	82.0	207,503	79.7	213,667	76.8

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.
Prepared by: WellFlorida Council, 2007.

Figure 25. Percent of Hispanic moms who had early access to prenatal care, Suwannee County and Florida, 1997-2005.



Percent of all Hispanic births.

Early access to prenatal care means care started in first trimester.

Source: CHARTS, Florida Department of Health, Office of Vital Statistics, November, 2007.

Prepared by: WellFlorida Council, 2007.

Low Birthweight

An infant may be born small for gestational age, early or a combination of the two. A low birthweight infant is defined as weighing less than 2,500 grams (5 pounds 8 ounces) at birth. Low birthweight babies may face serious health problems as newborns and are at increased risk for long-term disabilities and may require adaptive care throughout their lifespan.

Table 44 shows that nearly 78 babies per 1,000 live births annually in Suwannee County between 2001-2005 were low birthweight. This is lower than the 84.9 low birthweight births per 1,000 Florida live births. Unfortunately, the low birthweight rate for black residents is much higher than that of white residents.

Table 44 and Figure 26 show that low birthweight rates have fluctuated in Suwannee County over the last decade. However, the low birthweight rate in Suwannee County has been notably lower than the Florida rate since 1997.

Table 45 and Figure 27 show that Hispanic low birthweight rates have increased substantially between 1999 and 2005. Moreover, the rate of low birthweight infants in Suwannee County has increased substantially since the past decade low of 59.4 during the 1998-2002 period to 78.0 during the 2001-2005 period, which represents close to a 19 percent increase.

Table 44. Low Birthweight rates per 1,000 live births by race, Suwannee County and Florida, 1997-2005.

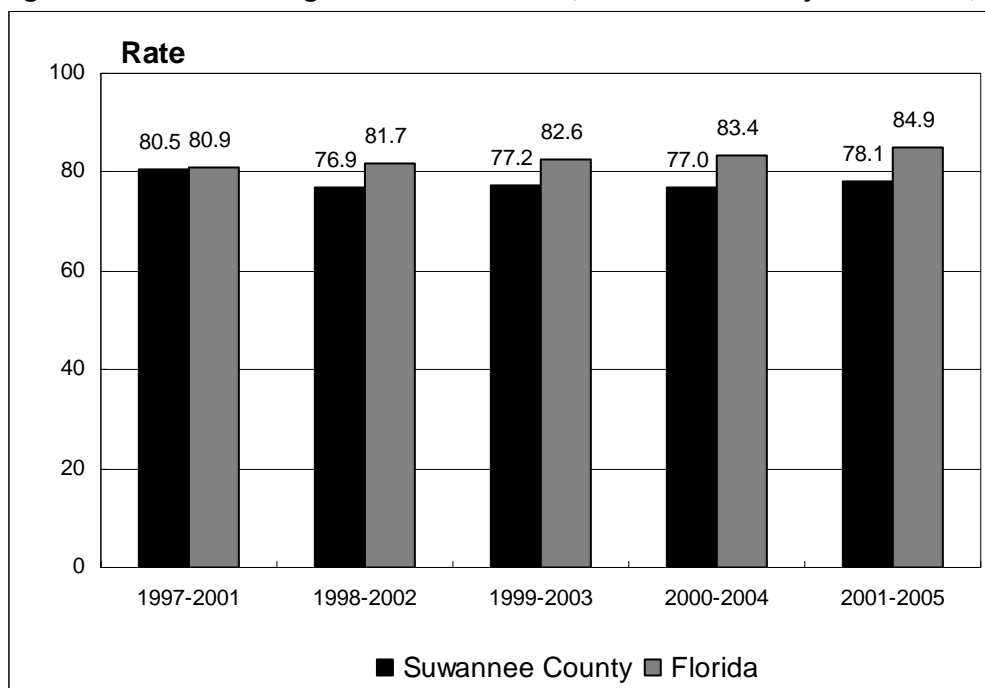
Area	All Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee County	182	80.5	177	76.9	180	77.2	183	77.0	186	78.1
Florida	80,480	80.9	82,369	81.7	84,619	82.6	87,163	83.4	90,681	84.9
Area	White Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee County	134	71.3	133	69.2	137	70.6	139	70.2	145	73.1
Florida	50,014	67.8	51,135	68.5	52,385	69.1	53,839	69.8	56,163	90.3
Area	Black Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee County	47	129.5	42	117.6	41	111.7	41	113.6	37	104.8
Florida	28,015	123.3	28,571	124.3	29,342	126.1	29,955	127.7	30,636	130.2

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 26. Low birthweight rates for all races, Suwannee County and Florida, 1997-2005.



Rates are per 1,000 live births.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Table 45. Hispanic low birthweight and rates per 1,000 live births Suwannee County and Florida, 1997-2005.

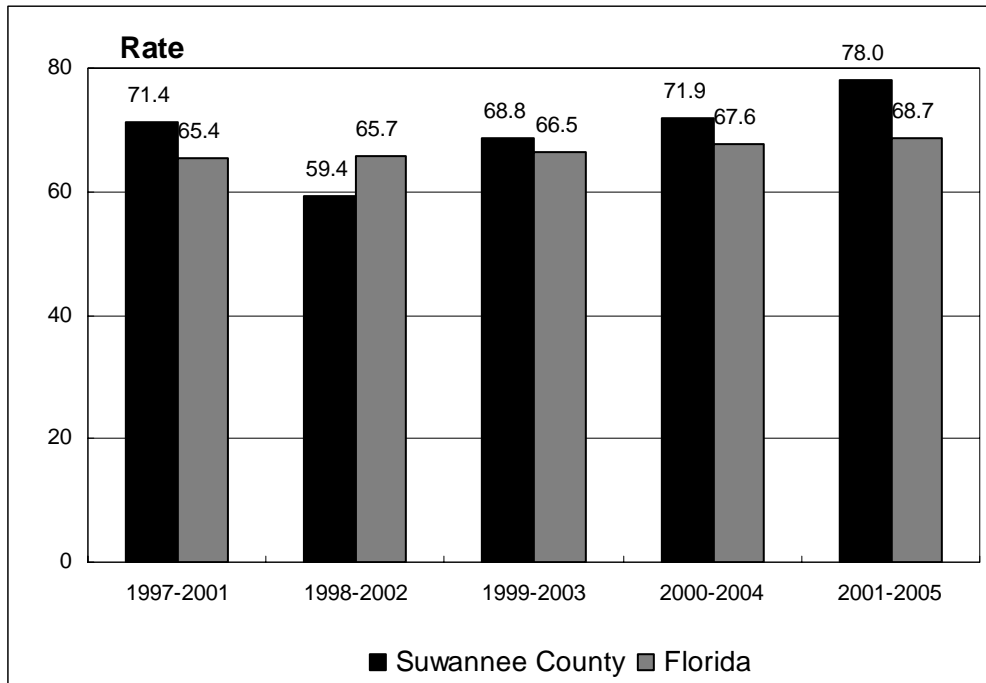
Area	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee County	13	71.4	13	59.4	17	68.8	20	71.9	23	78.0
Florida	13,980	65.4	14,975	65.7	16,188	66.5	17,616	67.6	19,118	68.7

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 27. Hispanic low birthweight rates per 1,000 live births Suwannee County and Florida, 1997-2005.



Rate is per 1,000 live births.

Source: CHARTS, Florida Department of Health, Office of Vital Statistics, November, 2007.

Prepared by: WellFlorida Council, 2007.

Infant Mortality

Infant mortality is an excellent indicator of health status and is used to compare the health and well being of populations across and within countries. Infant mortality is defined as the number of deaths to infants less than one year per 1,000 live births.

Table 46 shows that there were 8.4 deaths per 1,000 live births in Suwannee County between 2001 and 2005. This is notably higher than the Florida infant mortality rate for the same time period. The infant mortality rate for white residents of Suwannee County is also higher than for white residents of Florida as a whole. In addition, the infant mortality rate for black residents of Suwannee County is lower than their counterparts throughout the state.

Table 46 and Figure 28 show that infant mortality has declined rapidly in Suwannee County over the last decade, as Florida's rate remained constant during the same period of time.

Table 47 and Figure 29 show the difference between Hispanic infant mortality at the county level as well as the state. As can be seen, the rate of infant mortality per 1,000 live births among Hispanics was 10.2 for the period of 2001-2005, which is fairly consistent with the rate for all races in Suwannee County. However, the rate for the period of 1997-2001 was 27.5 this decreased dramatically to 10.2 per 1,000 for the 2001-2005 time period.

Table 46. Infant mortality rates per 1,000 live births by race, Suwannee County and Florida, 1997-2005.

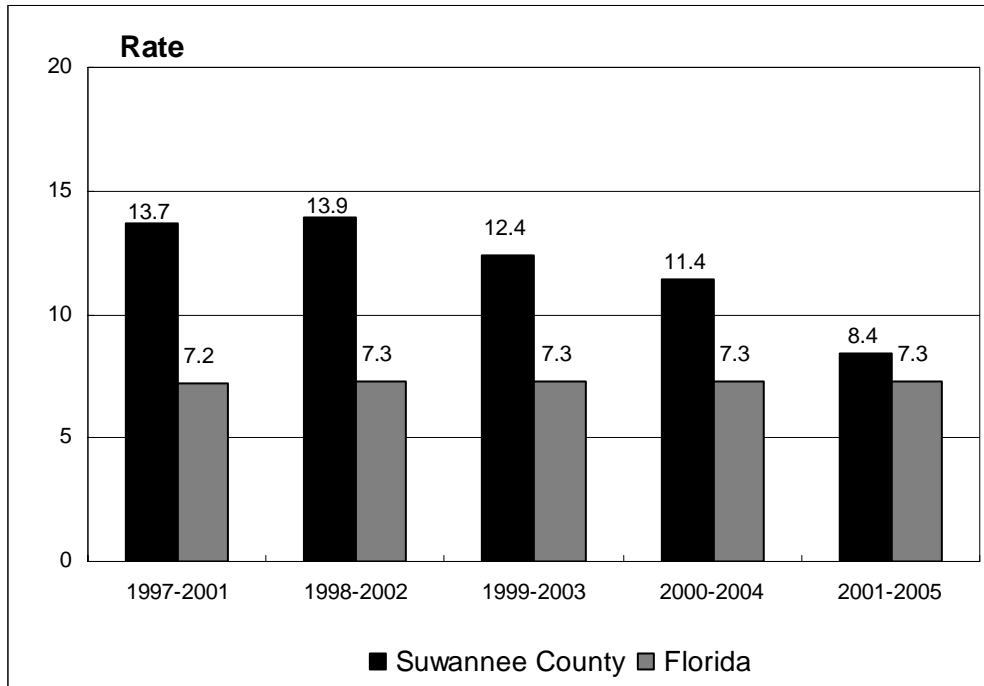
Area	All Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee	31	13.7	32	13.9	29	12.4	27	11.4	20	8.4
Florida	7,133	7.2	7,323	7.3	7,492	7.3	7,586	7.3	7,789	7.3
Area	White Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee	23	12.2	27	14.0	23	11.9	22	11.1	16	8.1
Florida	4,119	5.6	4,206	5.6	4,263	5.6	4,324	5.6	4,396	7.1
Area	Black Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee	8	22.0	5	14.0	6	16.3	5	13.9	4	11.3
Florida	2,916	12.8	3,011	13.1	3,110	13.4	3,126	13.3	3,184	13.5

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 28. Infant mortality rates for all races, Suwannee County and Florida, 1997-2005.



Rates are per 1,000 live births.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Table 47. Hispanic infant mortality and rates per 1,000 live births Suwannee County and Florida, 1997-2005.

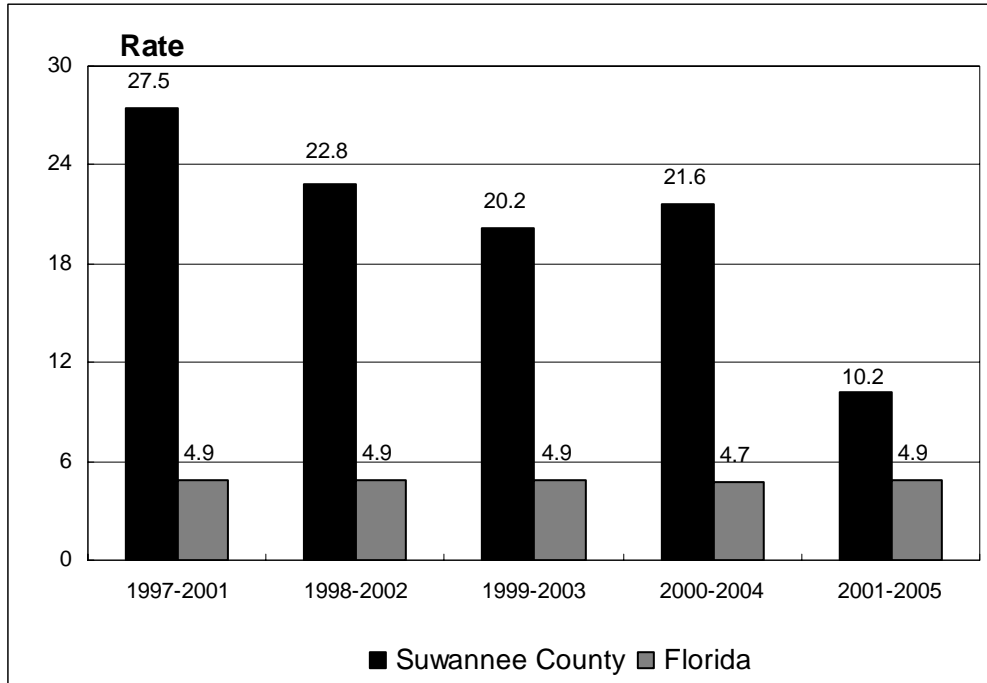
Area	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee	5	27.5	5	22.8	5	20.2	6	21.6	3	10.2
Florida	1,038	4.9	1,108	4.9	1,189	4.9	1,225	4.7	1,376	4.9

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 29. Hispanic infant mortality and rates per 1,000 live births Suwannee County and Florida, 1997-2005.



Rate is per 1,000 live births.

Source: CHARTS, Florida Department of Health, Office of Vital Statistics, November 2007.

Prepared by: WellFlorida Council, 2007

Teen Births and Repeat Births

Teens are often unprepared for the realities of childbirth. This lack of preparation is often translated into poor health for the child if the teen does not have an adequate support structure to assist her with raising and caring for the child. As such, teen birth rates are also an important indicator or marker for a healthy community. In general, the lower the teen birth rate, the “healthier” a community.

Table 48 shows that teen birth rates (defined as births to females age 15-17 per 1,000 females age 15-17 in the population) were higher in Suwannee County between 1997-2005 than Florida. With regard to race, while whites in Suwannee County have higher rates than their counterparts at the state level, the rates for blacks are lower for the county than they are for the state.

Table 48 and Figure 30 show that teen birth rates have decreased for Suwannee County teens as well as their counterparts at the state level for the past decade. However, Hispanic teen birth rates have been growing in Suwannee County and have exceeded the state rate by a substantial margin (Table 49 and Figure 31).

Repeat birth rates to mothers age 15-19 have remained somewhat stable since 1997 (Table 50 and Figure 32). Although Suwannee County has had a higher rate of repeat births since 1997 when compared to the state, in the 2001-2005 time period the county began to see a slight decrease. The county is at 15.9 for 2001-2005, while the state level is 15.3.

Table 48. Teen Birth rates per 1,000 females 15-17 years of age by race, Suwannee County and Florida, 1997-2005.

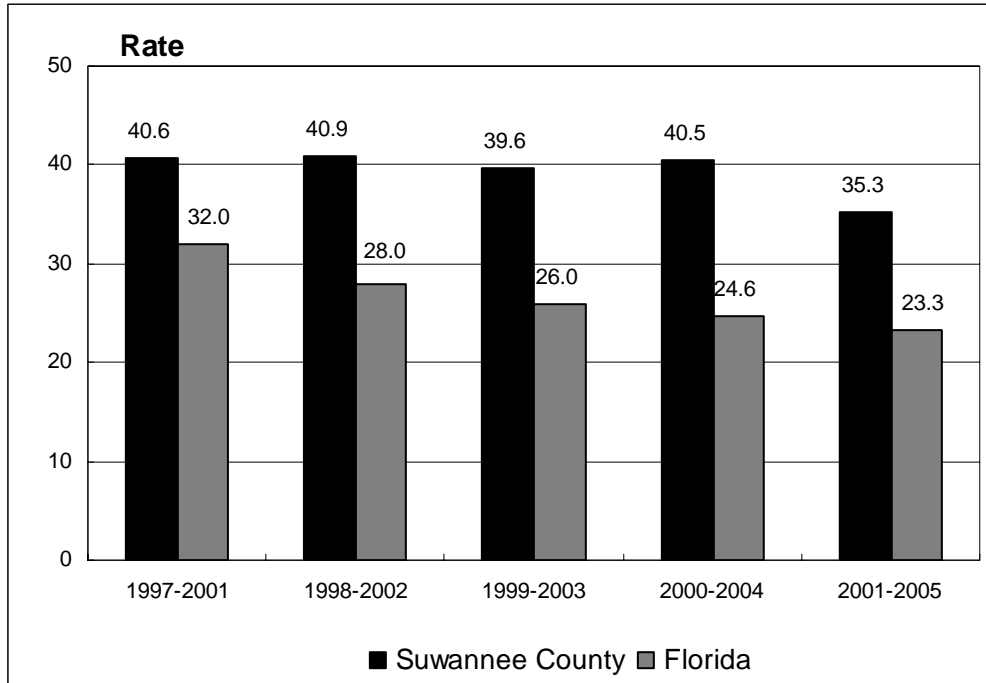
Area	All Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee	156	40.6	160	40.9	155	39.6	154	40.5	141	35.3
Florida	44,141	32.0	42,123	28.0	40,077	26.0	38,749	24.6	37,694	23.3
Area	White Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee	114	36.0	121	38.0	119	37.3	118	38.1	108	33.1
Florida	25,674	25.2	24,738	22.0	23,753	20.6	23,098	19.6	22,776	18.9
Area	Black Races									
	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee	41	66.7	38	58.0	35	53.8	32	50.8	28	42.4
Florida	17,831	55.9	16,746	50.6	17,658	51.7	17,929	51.5	17,071	47.8

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 30. Teen birth rates per 1,000 females 15-17, all races, Suwannee County and Florida, 1997-2005.



Rates are per 1,000 females 15-17 years of age.
Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.
Prepared by: WellFlorida Council, 2007.

Table 49. Hispanic teen births 15-17 and rates per 1,000 females 15-17, Suwannee County and Florida, 1997-2005.

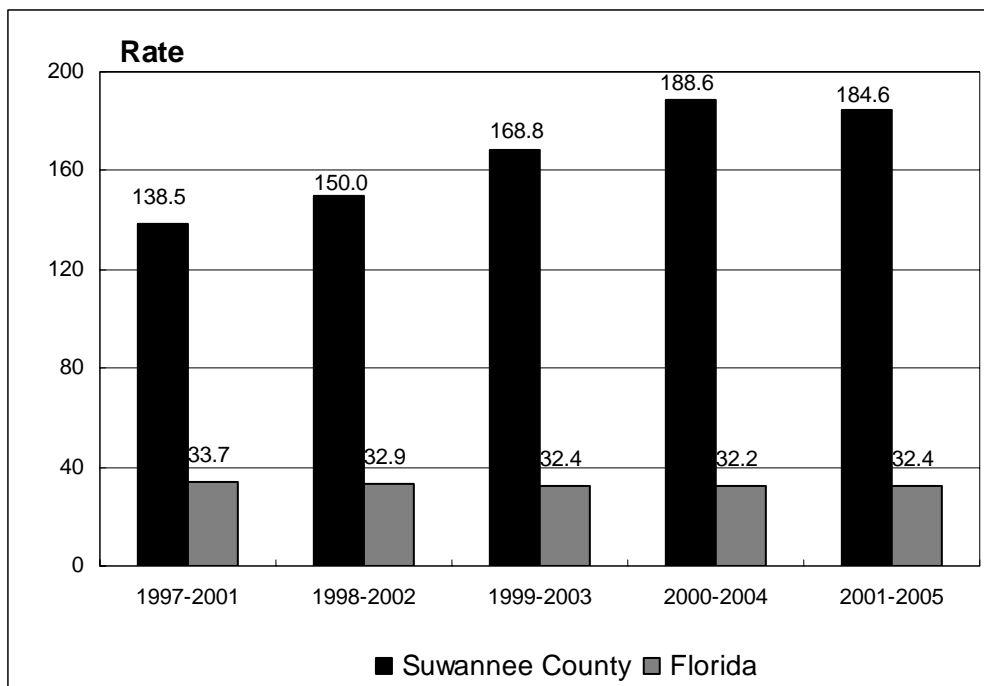
Area	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee	18	138.5	21	150.0	27	168.8	33	188.6	36	184.6
Florida	9,621	33.7	9,826	32.9	10,012	32.4	10,287	32.2	10,662	32.4

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 31. Hispanic teen birth rates per 1,000 females 15-17, Suwannee County and Florida, 1997-2005.



Rate is per 1,000 Hispanic females 15-17 years of age.

Source: Florida Department of Health, Office of Vital Statistics, September 2007

Prepared by: WellFlorida Council, 2007.

Table 50. Repeat birth rates to moms 15-19 who had a previous birth for all races, Suwannee County and Florida, 1997-2005.

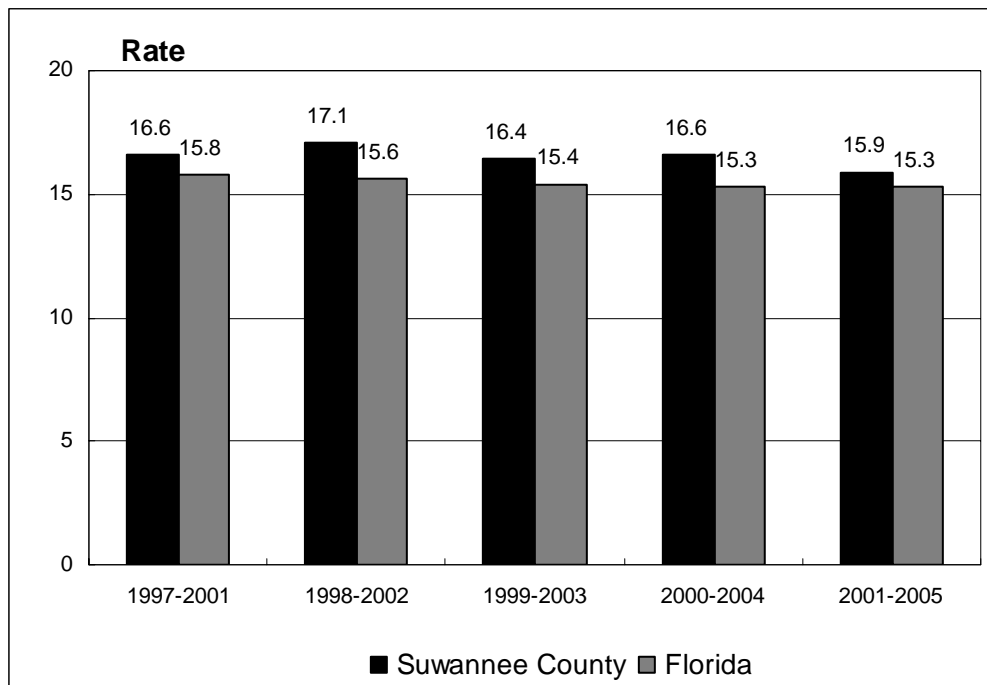
Area	1997-2001		1998-2002		1999-2003		2000-2004		2001-2005	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
Suwannee	92	16.6	99	17.1	95	16.4	94	16.6	91	15.9
Florida	27,534	15.8	26,419	15.6	25,157	15.4	23,956	15.3	22,968	15.3

Rates are per 1,000 total population.

Source: State of Florida, Department of Health, Office of Vital Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Figure 32. Repeat birth rates to moms 15-19 who had a previous birth, 1997-2005.



Rates are per 1,000 moms 15-19 who had a previous birth.

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 1997-2005.

Prepared by: WellFlorida Council, 2007.

Key Mental Health Indicators

In general, morbidity data for mental health diseases and conditions is often difficult to obtain. This is often due to the long-standing view that mental health is not a “health issue” because it does not manifest in a physical ailment, therefore, oftentimes little baseline data pertaining to particular mental health indicators has been collected or compiled.

According to the Health Resources and Services Administration within the U.S. Department of Health and Human Services, Suwannee County is classified as a county in Florida that suffers a shortage of mental health professionals and is medically underserved. Suwannee County was designated as a medically underserved area by the U.S. Department of Health and Human Services, Bureau of Health Professions on April 25, 2007.

In order to present some insight into the mental health status of Suwannee County residents, this assessment will review suicide rates, domestic violence rates, hospitalization for mental illness rates, and Baker Act rates.

Suicide Rates

Statistically, whites are more likely to commit suicide than any other racial/ethnic demographic. The rates in Suwannee County reflect this trend. The following table examines the average number of crude and age-adjusted rates from both Suwannee County and Florida residents from 2001-2005. As seen below in Table 51, the average number of death for all races equals 6.2 deaths over the five-year span. When adjusted for age distribution, it can be seen that Suwannee County has a higher death rate due to suicide compared to the state of Florida.

It should be noted that completed or successful suicides are only part of the problem. A greater number of people are hospitalized or treated and released as a result of suicide attempts than are fatally injured. While suicide is often viewed as a response to a single stressful event, it is a far more complicated issue. Suicide results from complex interactions between biological, psychological, social, and environmental factors. Moreover, because there is a tendency to blame the victim and to stigmatize family members, there is a reticence among individuals who have been affected by suicide to discuss it openly.

Table 51. Suicide age adjusted mortality rates per 100,000 population, by race, Suwannee County and Florida, 2001-2005.

Area	All Races		
	Average Number of Deaths	Crude Rate	Age Adjusted Death Rate
Suwannee	6.2	16.7	16.6
Florida	2,319.6	13.5	12.8
Area	White Races		
	Average Number of Deaths	Crude Rate	Age Adjusted Death Rate
Suwannee	6.2	19.2	19.1
Florida	2,177.0	15.5	14.4
Area	Black Races		
	Average Number of Deaths	Crude Rate	Age Adjusted Death Rate
Suwannee	-	-	-
Florida	117.2	4.3	4.4

Source: State of Florida, Department of Health, Office of Vital Statistics, Public Health Statistics, 2001-2005.
Prepared by: WellFlorida Council, 2007.

Domestic Violence

A statewide survey was conducted by the Florida Department of Corrections in June 1999 to assess the attitudes and opinions concerning domestic violence. More than 91 percent (91.5) of those surveyed believe domestic violence is a widespread problem in our society and is present in over 40 percent of households. More than 55.0 percent of the population reported knowing someone who is a victim of domestic violence and almost 44.0 percent have actually witnessed the abuse. The vast majority of Floridians (92.0 percent) indicate that treatment should be required for people who have physically abused someone.

Domestic Violence is associated with eight out of the ten leading health concerns for Healthy People 2010. Medical studies link long-term effects of domestic violence and abuse with a myriad of major health problems including smoking, diabetes, obesity, eating disorders and substance abuse, according to the Florida Department of Health.

In 2003, Florida domestic violence offenses accounted for approximately 20.0 percent of violent crimes. In addition, domestic violence plays a key role in juvenile crime, the need for foster care placements, and the existence of poverty in female-headed households (Department of Children and Families). Domestic violence, specifically sexual violence more often goes unreported to authorities, therefore statistics may be lower than the reality of the crimes.

Table 52 illustrates the differences in types of offenses of domestic violence between Suwannee County and the state. Simple assault was the most reported offense in 2006 with 171 cases reported. While the rate of domestic violence in Suwannee County was substantially lower than the state average, 556.7 as compared to 627.7, in 2006, this represents a marked increase for Suwannee County from the previous year.

These rates should be interpreted with some perspective. The actual number of incidents at the state and possibly at the county level is higher than these tables suggest because the Florida Department of Law Enforcement only reports on the incidents their agency is involved in. Many more cases may be disposed at the city or county level and reporting criteria may vary from place to place and time to time. It is also possible that many domestic violence offenses are never reported to the authorities.

As illustrated in greater detail in Table 53 below, the Suwannee County rate for domestic violence has decreased since the 2002 through 2004 time period.

Table 52. Domestic violence offenses by type, Suwannee County and Florida, 2006.

Type	Suwannee County	Florida
Murder	0	164
Manslaughter	0	19
Forcible Rape	2	1,089
Forcible Sodomy	0	369
Forcible Fondling	3	947
Aggravated Assault	40	20,193
Aggravated Stalking	0	259
Simple Assault	171	88,110
Threat/Intimidation	0	3,690
Stalking	0	330
Total	216	115,170
Population	38,799	18,349,132
Rate Per 100,000 Population	556.7	627.7

Source: Florida Department of Law Enforcement, Domestic Violence Annual Report, 2006.
Prepared by: WellFlorida Council, 2007.

Table 53. Domestic violence offenses by year, Suwannee County and Florida, 2002-2006.

Type	Suwannee County		Florida	
	Number of Offenses	Rate Per 100,000	Number of Offenses	Rate Per 100,000
2002	420	1,175.6	121,834	730.7
2003	314	844.1	120,697	707.0
2004	268	710.6	119,772	683.8
2005	178	466.3	120,386	671.9
2006	216	556.7	115,170	627.7

Source: Florida Department of Law Enforcement, Domestic Violence Annual Report, 2000-2006.
Prepared by: WellFlorida Council, 2007.

Hospitalization Rates for Mental Health Issues

As noted in Table 54 below, the DRGs used to define the hospitalizations rates for mental health issues are 424-428, 430-433, and 521-523. These include:

Table 54. DRGs used to define the hospitalizations rates for mental health issues.

424	OR Procedure with principal diagnosis of mental illness
425	Acute adjustment reactions and psychosocial dysfunction
426	Depressive neuroses
427	Neuroses except depressive
428	Disorders of personality and impulse control
430	Psychosis
431	Childhood mental disorders
432	Other mental disorders diagnoses
433	Alcohol/drug abuse or dependence, left against medical advice
521	Alcohol/drug abuse or dependence
522	Alcohol/drug abuse or dependence with rehab
523	Alcohol/drug abuse or dependence without rehab

Source: AHCA Detailed Discharge Data, 2002-2006, CHARTS assessed 11-5-07.
Prepared by WellFlorida Council, 2007.

Table 55 below illustrates the number of hospitalizations in Suwannee County and Florida for mental health issues. The rate of hospitalization from 2002 to 2006 is consistently lower than the rates for the state. As mentioned previously, it is commonly accepted that those with mental illness are often stigmatized, specifically in small, rural communities. Therefore, these rates might represent only a fraction of those needing mental healthcare and stabilization.

Table 55. Number and rate of hospitalizations due to mental health issues, 2002-2006.

Type	Suwannee County		Florida	
	Number	Rate Per 1,000	Number	Rate Per 1,000
2002	204	5.7	123,579	7.4
2003	145	3.9	123,742	7.2
2004	172	4.5	127,257	7.2
2005	232	6.1	127,295	7.1
2006	180	4.6	126,772	6.9

Rates are per 1,000 population.

* Mental health issues are defined as DRGs 424-428, 430-433 and 521-523.

Source: AHCA Detailed Discharge Data, 2002-2006, CHARTS assessed 11-5-07.

Prepared by: WellFlorida Council, 2007.

Baker Act Rates

There are two different acts that can be initiated to involuntarily treat either the mentally ill or substance abusers. There is sufficient data concerning the Baker Act initiations for Suwannee County and the state, but data for Marchment Act rates are not compiled centrally. Therefore, this needs assessment cannot present Marchment Act rates from Suwannee County and Florida.

Baker Act

The Baker Act is the involuntary treatment of anyone who is mentally ill and is unable to understand his or her need for stabilization and/or treatment. Any person, who has witnessed the actions of the said individual and feels that he/she is a threat to himself or someone else may address local authorities and complete a sworn affidavit stating the said person's actions. This petition is then presented to a judge for review. If the person meets the criteria, an order is signed and the person is taken to the hospital for an evaluation and/or treatment. If further examination is needed, that person will be transported to the nearest Baker Act Receiving Facility.

Table 56 below charts the number, and rate of Baker Act initiations for the state and Suwannee County in single year counts from 2001-2005. There has been increase of Baker Act initiations since 2001 in Suwannee County. The state follows a similar trend with the number of initiations increasing over the past several years. Overall, the rate for the state is much higher than the rate for Suwannee County.

The source of this data, the 2005 Florida Mental Health Act report, uses county of residence as an indicator for county level initiations. Using the county of residence is especially important for counties that have no Baker Act receiving facility. Using the county of residence also gives a better picture of the number of residents of each county that have a Baker Act exam rather than using the county of initiation or the county of the facility.

The type of initiator is generally related to age, such that increased age is related to higher likelihood of mental health professional initiation and a lower likelihood of law enforcement initiation (and vice versa).

Table 56. Single year rates for Baker Act initiations in Suwannee County and Florida, 2001-2005.

Type	Suwannee County		Florida	
	Number of Initiations	Rate Per 100,000	Number of Initiations	Rate Per 100,000
2001	157	439.2	90,368	550.6
2002	178	497.0	99,772	594.9
2003	154	410.9	104,600	609.4
2004	187	493.9	110,697	628.5
2005	237	618.5	122,206	678.2

Source: AHCA, The Florida Mental Health Act (The Baker Act) 2005 Annual Report, CHARTS assessed 11-5-07.

Prepared by: WellFlorida Council, 2007.

Marchment Act

The Marchment Act involves the involuntary treatment of anyone who is chemically or alcohol addicted. Any one family member or three non-family members may file a petition for treatment of an individual. The family or friends must make arrangements with a treatment facility prior to completing a sworn petition stating the actions of this person and requesting a hearing.

Marchment Act data are not submitted like Baker Act data are. Efforts have been made over the past several years to educate people about the utility of such data, but at this point, no data are centrally collected.

Summary of Key Findings

Leading Causes of Death

- Suwannee County's top 10 leading causes of death are the same as for the state of Florida, although in some cases they are ranked differently. For example, respiratory disease is the third leading cause of death in Suwannee County though it is the fourth for all of Florida. In addition, Diabetes is the seventh leading cause of death in Suwannee County while it is the sixth leading cause of death for Florida.
- Because white residents make up the largest majority of Suwannee County's population, they drive the overall leading causes of death in Suwannee County. As such, the top 3 leading causes of death for white residents mirrors the top 3 for all residents of Suwannee County.
- Diabetes is the fifth leading cause of death for black residents in Suwannee County compared to the seventh for white residents.
- Nephritis and HIV (albeit in small numbers with 2.4 deaths per year on average) are in the top 10 causes for black residents while Alzheimer's, suicide and Atherosclerosis are not.
- In Suwannee County, the age-adjusted death rates for the top 10 leading causes of death are higher than the rates for the state of Florida.
- For the top 10 leading causes of death, the age-adjusted rate for both whites and blacks are higher than they are for the state.
- Respiratory disease exhibits perhaps the most troubling disparity pattern among residents in Suwannee County.

Hospitalization

- The leading cause of hospitalization in Suwannee County in 2004 to 2006 was for being a normal newborn. Vaginal delivery without complicating diagnosis followed by heart failure and shock make up the second and third leading causes of hospitalization for all residents. Chronic obstructive pulmonary and simple pneumonia and pleurisy, age > 17 with CC round out the top five.
- For children age 0-17 the leading cause of hospitalization is being born (i.e. normal newborn). Followed by neonate with other problems, bronchitis and asthma, Esophagitis, Gastroenteritis and Miscellaneous Digestive Disorders. Simple Pneumonia and Pleurisy, Age 0-17; Vaginal Delivery without complicating diagnosis; Full Term Neonate with Major Problems tied for the fifth leading causes of hospitalization in this age category.

Birth Indicators

- Birth rates in Suwannee County have been higher than birth rates in the state of Florida for the past ten years.
- The percentage of mothers in Suwannee County who have been able to obtain early access to prenatal care has been less than the percentage in the state of Florida for between 1997-2005.

- Low birthweight the low birthweight rate for black residents is much higher than that of white residents.
- There were 8.4 deaths per 1,000 live births in Suwannee County between 2001 and 2005.
- The infant mortality rate for black residents is substantially higher than of white residents.
- The teen birth rate in Suwannee County has decreased over the past ten years. However, it remains higher than the rate for the state, which has also seen a decrease. At the same time, the birth rate among Hispanic teens has increased substantially in Suwannee County.

Mental Health Indicators

- In Suwannee County, the rate of suicide is higher than the rate for Florida.
- In 2005 and 2006 the rate of domestic violence offenses was lower than the state rate.
- The rate of hospitalization for mental health issues in Suwannee County is lower than it is at the state level.
- The rate of Baker Act initiations in Suwannee County is lower than it is for the state.

Health Resource Availability and Access

Introduction

The availability of health resources is a critical component to the health of a county's residents and a measure of the soundness of the area's healthcare delivery system. Without an adequate supply of healthcare facilities, providers and services, maintaining good health status is a daunting challenge. Fewer facilities, providers and services means diminished opportunity to obtain healthcare in a timely fashion. Limited supply of health resources, especially providers, results in the limited capacity of the healthcare delivery system to absorb indigent and charity care as there are fewer providers upon which to distribute the burden. This section will address the availability of health care resources to the residents of Suwannee County.

Provider and Facility Supply

Medically Underserved and Health Professional Shortage Areas

As defined by the federal government's Health Resources and Services Administration (HRSA), the medically underserved area or population (MUA/P) designation involves the application of the Index of Medical Underservice (IMU) to data on a service area to obtain a measurement of underservice for a defined area or population. The IMU scale runs from 0 to 100, where 0 represents completely underserved and 100 represents best served or least underserved. Under the established criteria, each service area found to have an IMU of 62.0 or less qualifies for designation as an MUA.

The IMU involves four variables – ratio of primary medical care physicians per 1,000 population; infant mortality rate; percentage of population with incomes below the federal poverty level; and percentage of the population age 65 or older. The value of each of these variables for the service area is created to a weighted value, according to established criteria. The four values are then summed to obtain an area's IMU score.

In April 2007, the whole Suwannee County area was designated as an MUA. The low income population of Suwannee County received a score of 52.3 which placed it below the 62.0 threshold.

HRSA also evaluates primary care, dental and mental health care shortage areas and populations on a regular basis. The Shortage Designation Branch in the HRSA Bureau of Health Professions has developed shortage designation criteria and utilizes them to determine whether or not a geographic area or population group is a Health Professional Shortage Area (HPSA) in one of the three critical service areas. More than 34 federal programs depend on the shortage designation to determine eligibility or as a funding preference. About 20 percent of the U.S.

Population resides in primary medical care HPSAs. The following criteria are utilized for primary medical care shortage designations:

A geographic area will be designated as having a shortage of primary medical care professionals if the following three criteria are met:

1. The area is a rational area for the delivery of primary medical care services.
2. One of the following conditions prevails within the area:
 - a. The area has a population to full-time-equivalent primary care physician ratio of at least 3,500:1.
 - b. The area has a population to full-time-equivalent primary care physician ratio of less than 3,500:1 but greater than 3,000:1 and has unusually high needs for primary care services or insufficient capacity of existing primary care providers.
3. Primary medical care professionals in contiguous areas are over-utilized, excessively distant, or inaccessible to the population of the area under consideration

Suwannee County has HPSA designations for all three of the core service areas: primary medical care, dental care and mental health care. These designations are for different populations and are summarized in Table 57.

The entire Suwannee County area has been designated as primary medical care HPSA. The low income/migrant farmworker population has been designated a dental health HPSA. The whole County was designated a mental health HPSA as well.

HPSAs are customarily reviewed every four years. The next review should occur in 2011.

Table 57. Summary of Health Professional Shortage Areas (HPSAs) and Medically Underserved Area Populations (MUA/Ps), Suwannee County, April 2007.

Professional Shortage Area/ Underserved Area	Designation Status	Designation Type
Primary Health	Yes	Entire County
Dental Health	Yes	Low Income/Migrant Farmworker Population
Mental Health	Yes	Entire County
Medically Underserved	Yes	Entire County

Source: US Department of Health and Human Services, Bureau of Health Professions, November 6, 2007.
Prepared by: WellFlorida Council, Inc., 2007.

Licensed Physicians

The availability of licensed physicians is critical to meeting the healthcare needs of a community. However, it is often difficult to get an accurate number of physicians that are practicing and providing services in a community. The Florida Department of Health’s Division of Medical Quality Assurance licenses these professionals. However, the only information the

county stored for licensees in the database is their mailing address, which may or may not be identical to the county in which they are providing services.

According to Table 58, there are 239.4 licensed medical doctors and doctors of osteopathy per 100,000 for all of Florida while there are only 35.3 per 100,000 population for Suwannee County. Of course, this number does not capture those doctors that provide services in Suwannee County but who are licensed elsewhere and doctors that are licensed in Suwannee County but provide services in another county.

Table 58. Number and rate of active licensed medical doctors and doctors of osteopathy, Suwannee County and Florida, 2007.

Area	Number by Type			Rate Per 100,000 Population
	MD	DO	MD/DO Total	
Suwannee	13	1	14	35.3
Florida	41,480	3,748	45,228	239.4

Source: Florida Department of Health Division of Medical Quality Assurance as of November 10, 2007; ESRI Business Solutions, 2007.
 Prepared by: WellFlorida Council, 2007.

Licensed Facilities

Table 59 is presented solely as an overview of the inventory of licensed facilities in Suwannee County. The total number of facilities and total capacity change regularly for the most up-to-date numbers on licensed facilities consult www.Floridahealthstat.com.

Table 59. Licensed facilities by type in Suwannee County, 2007.

Type of Facility	Total Number	Total Capacity
Adult Family Care Home	3	13
Clinical Laboratory	19	NA
Skilled Nursing Facility	3	401
End Stage Renal Disease	1	NA
HCC - Exemptions	4	NA
Health Care Clinics	1	NA
Assisted Living Facility	1	60
Home Health Agency	4	NA
Home Medical Equipment	1	NA
Homemaker & Companion Services	7	NA
Nurse Registry	1	NA
Hospital	1	15
Rural Health Clinic	7	NA

Source: Agency for Health Care Administration, Licensure, 2007.
Prepared by: WellFlorida Council, 2007.

Access to Healthcare

The Uninsured

Utilizing estimates from the *2004 Florida Health Insurance Study*, conducted by the Florida Agency for Health Care Administration, in 2005, 19.2 percent of Floridians, more than 2.8 million residents, under the age of 65 were uninsured. In Suwannee County, almost 6,700 residents age 0-64, more than 20 percent, had no form of public or private health insurance coverage.

The rate of the uninsured in Florida climbed to 19.2 percent compared to 16.8 percent in 2000. In Suwannee County, the current number of non-elderly individuals living without health insurance equals 20.5 percent (Table 60). The highest percentage of uninsured citizens (20.6) resides in the 32060 zipcode of Branford. The zipcodes with the lowest percentage of uninsured (19.6) reside in the 32062 (Mc Alpin) and 32094 (Wellborn) area. These zipcodes also has the fewest number residents over all.

Table 60. Estimated number of non-elderly uninsured by zipcode, Suwannee County and Florida, 2007.

Area	2007 Population (0-64)	Uninsured	
		Estimated Number	Percent
32008 Branford	4,053	819	20.2
32060 Live Oak	16,203	3,338	20.6
32062 MC Alpin	2,082	408	19.6
32064 Live Oak	5,875	1,210	20.6
32071 O Brien	2,584	512	19.8
32094 Wellborn	1,900	372	19.6
Suwannee Zipcodes	32,697	6,659	20.4
Suwannee County	32,526	6,668	20.5
Florida	15,511,820	2,978,270	19.2

Source: ESRI Business Solutions, 2007; Agency for Health Care Administration, Florida Health Insurance Study 2004, Zipcode Estimates of People Without Health Insurance.
Prepared by: WellFlorida Council, 2007.

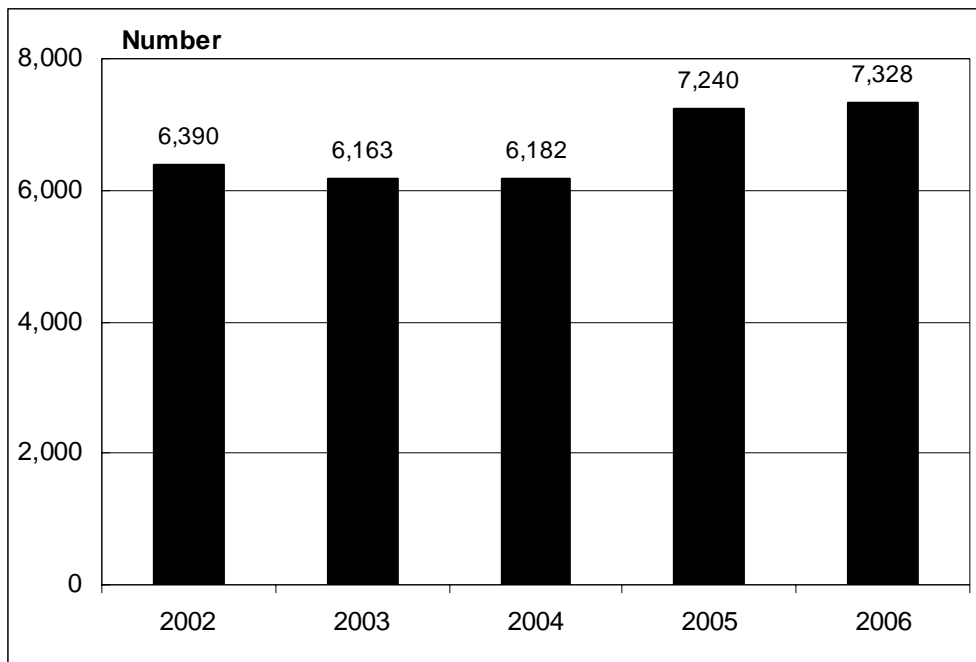
Medicaid

The Florida Medicaid program provides healthcare to various low-income and other special needs groups. The program is administered by the Agency for Health Care Administration and is funded through federal and state cost-sharing, with local counties contributing to inpatient hospital and nursing home service.

In Florida, eligibility for most Medicaid primary medical care is reserved for pregnant women (up to 185 percent of the federal poverty level) and children. All Medicaid recipients are required to enroll in one of the managed care systems (either a Medicaid HMO or Medipass) implemented by Florida's Medicaid program.

The number of individuals eligible to receive Medicaid varies month by month. Figure 33 and Table 61 displays data for the year end number of eligible on December 31 of each year. At year's end in 2006, there were 7,328 Medicaid eligible in Suwannee County compared to only 6,390 as of December 31, 2002.

Figure 33. Number of Medicaid eligible in Suwannee County as of December 31, 2002-2006.



Source: Agency for Health Care Administration, Medicaid Program Analysis, 2007.
Prepared by: WellFlorida Council, 2007.

Table 61 shows the number of Medicaid Eligibles by zipcode for Suwannee County from 2002 through 2006. The largest increase in Medicaid Eligibles occurred in Live Oak (32060), followed by Live Oak (32064), and Branford (32008).

Table 61. Number of Medicaid Eligibles by zipcode, by county and Florida as of December 31, 2002-2006.

Area	December 2002	December 2003	December 2004	December 2005	December 2006
32008 Branford	928	865	901	1,008	982
32060 Live Oak	3,258	3,072	3,083	3,177	3,124
32062 McAlpin	377	364	380	410	370
32064 Live Oak	1,621	1,719	1,871	2,001	1,993
32071 O'Brien	482	453	500	564	577
32094 Wellborn	458	467	442	437	462
Suwannee Zipcodes	7,124	6,940	7,177	7,597	7,508
Suwannee County	6,390	6,163	6,182	7,240	7,328
Florida	2,102,411	2,087,652	2,168,332	2,233,946	2,129,623

Source: Agency for Health Care Administration, Medicaid Program Analysis, 2006.
Prepared by: WellFlorida Council, 2007.

Table 62 shows the average monthly number of Medicaid eligible in various age groups. In Suwannee County from November 2006 to October 2007, on average, 53 percent of the Medicaid eligible was age 0-18, which is lower than the percent for the state of Florida. It is noteworthy that in Suwannee County, 28.4 percent of Medicaid Eligibles were age 19-59 while only slightly more than 26 percent of Florida's Medicaid Eligibles were age 21-59.

Table 62. Average number of Medicaid eligible by age in Suwannee County and Florida, November 1, 2006 - October 31, 2007.

Age	Suwannee County		Florida	
	Number	Percent	Number	Percent
0-5	1,713	22.9	534,688	25.2
6-10	934	12.5	275,394	13.0
11-18	1,321	17.6	360,151	17.0
19-20	145	1.9	42,851	2.0
21-35	922	12.3	243,541	11.5
36-59	1,063	14.2	272,716	12.9
60-64	221	3.0	49,759	2.3
65-74	513	6.9	153,582	7.3
75-84	436	5.8	123,202	5.8
85+	222	3.0	62,303	2.9
TOTAL	7,490	100.0	2,118,186	100.0

Source: Agency for Health Care Administration, Medicaid Program Analysis, 2006-2007.
 Prepared by: WellFlorida Council, 2007.

Table 63 shows Medicaid expenditures by type for Suwannee County and Florida for a recent 8-month period. Expenditures for this period amounted to more than \$28.8 million. In Suwannee County, Inpatient Hospital services accounted for 24.9 percent of the expenditures compared to only 18.2 percent in Florida as a whole. In addition, prescribed drugs accounted for nearly 19.7 percent of all Medicaid expenditures in Suwannee County compared to only 8.7 percent for all of Florida.

Table 63. Medical expenditures by type by county and Florida, July 1, 2006 - May 31, 2007.

Type of Medical Assistance	Suwannee County				Florida			
	Clients		Dollars		Clients		Dollars	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Adult Day Care	0	-	\$ 0.00	-	0	-	\$ 0.00	-
Ambulatory Surgical	238	1.9	\$ 111,055.81	0.4	37,119	1.2	\$ 14,115,099.76	0.1
Birthing Center	4	0.0	\$ 1,771.52	0.0	2,182	0.1	\$ 1,205,557.40	0.0
Case Management	154	1.2	\$ 66,456.00	0.2	70,729	2.2	\$ 31,377,974.23	0.3
Chiropractor Services	79	0.6	\$ 7,105.76	0.0	8,576	0.3	\$ 1,071,393.14	0.0
Comm Mental Services	513	4.0	\$ 281,836.70	1.0	95,656	3.0	\$ 143,411,070.82	1.3
Dental Care	1,277	10.0	\$ 349,571.10	1.2	311,924	9.8	\$ 84,438,072.51	0.8
DME Dial Crossover	340	2.7	\$ 111,058.74	0.4	51,237	1.6	\$ 34,324,474.83	0.3
End-Stage Renal	4	0.0	\$ 17,090.29	0.1	1,550	0.0	\$ 12,977,701.59	0.1
EPSDT	2,410	18.9	\$ 299,522.81	1.0	362,780	11.4	\$ 50,535,270.45	0.5
Family Planning	0	-	\$ 0.00	-	0	-	\$ 0.00	-
Hearing Services	118	0.9	\$ 54,724.05	0.2	18,427	0.6	\$ 3,615,827.51	0.0
HMO - PHP	7,900	62.0	\$ 1,199,027.55	4.2	2,041,590	64.2	\$ 2,147,235,531.87	20.0
Home And Comm Based Svcs	917	7.2	\$ 1,562,458.15	5.4	266,300	8.4	\$ 1,014,850,050.94	9.4
Home Health	692	5.4	\$ 361,055.58	1.2	114,613	3.6	\$ 254,290,298.48	2.4
Hospice	12	0.1	\$ 112,672.23	0.4	16,987	0.5	\$ 229,276,796.67	2.1
ICF - MR	0	-	\$ 0.00	-	3,276	0.1	\$ 291,109,415.50	2.7
Inpatient Hospital	1,893	14.8	\$ 7,183,675.86	24.9	421,667	13.3	\$ 1,950,883,170.38	18.2
Lab And X-ray	2,191	17.2	\$ 217,110.79	0.8	447,449	14.1	\$ 48,214,767.13	0.4
Medipass	8,374	65.7	\$ 192,018.79	0.7	1,033,225	32.5	\$ 22,205,743.04	0.2
Nurse Practitioner	1,881	14.8	\$ 226,397.43	0.8	213,675	6.7	\$ 41,206,647.79	0.4
Outpatient Hospital	6,571	51.5	\$ 3,006,651.45	10.4	1,041,135	32.7	\$ 486,499,280.66	4.5
Physician Care	7,154	56.1	\$ 2,831,150.64	9.8	1,312,394	41.3	\$ 596,712,222.06	5.6
Podiatry	86	0.7	\$ 5,988.22	0.0	37,425	1.2	\$ 3,234,079.58	0.0
Portable X-ray	13	0.1	\$ 466.33	0.0	28,316	0.9	\$ 1,536,206.94	0.0
Practitioner Crossover	4	0.0	\$ 153.84	0.0	454	0.0	\$ 13,753.51	0.0
Prescribed Drugs	6,830	53.6	\$ 5,693,159.69	19.7	1,013,706	31.9	\$ 935,760,618.58	8.7
Primary Care Management	0	-	\$ 0.00	-	0	-	\$ 0.00	-

Source: Agency for Health Care Administration Medicaid Management Information System Recap of Welfare Medical Assistance Report, July 1, 2006 - May 31, 2007.

Prepared by: WellFlorida Council, 2007.

Table 63 Cont. Medical expenditures by type by county and Florida, July 1, 2006 - May 31, 2007.

Rural Health	5,190	40.7	\$ 1,914,821.10	6.6	199,984	6.3	\$ 61,094,205.65	0.6
Rural Hospital Swing Bed	0	-	\$ 0.00	-	48	0.0	\$ 1,080,617.62	0.0
SNF	802	6.3	\$ 2,574,813.19	8.9	132,957	4.2	\$ 2,105,951,396.03	19.6
State Mental Hospital	0	-	\$ 0.00	-	157	0.0	\$ 6,474,235.19	0.1
Therapy Services	244	1.9	\$ 121,594.57	0.4	60,183	1.9	\$ 109,376,483.49	1.0
Transportation	679	5.3	\$ 214,190.76	0.7	167,894	5.3	\$ 41,796,846.56	0.4
Unassigned	0	-	\$ 0.00	-	57	0.0	\$ 267,281.33	0.0
Visual	1,464	11.5	\$ 170,137.06	0.6	168,049	5.3	\$ 17,289,665.45	0.2
Total	12,748		\$ 28,887,736.01	100.0	3,181,538		\$ 10,743,431,756.69	100.0

Source: Agency for Health Care Administration Medicaid Management Information System Recap of Welfare Medical Assistance Report, July 1, 2006 - May 31, 2007.

Prepared by: WellFlorida Council, 2007.

HMO Enrollment

Health maintenance organization (HMO) health insurance plans are often more affordable than standard private insurance and preferred provider organization (PPO) plans. In theory, the insured person is subjected to care management by a primary care provider that often leads to more efficient utilization of healthcare resources and subsequent lower costs.

According to the Florida Department of Insurance (DOI), as seen in Table 64, six of Florida's 36 HMOs are enrolling clients in Suwannee County. As of June 30, 2006, there were 2,665 Suwannee County residents were enrolled in HMOs. However, Suwannee County's HMO enrollment rate of 66.6 persons per 1,000 population is substantially lower than the state of Florida rate of 203.4 per 1,000.

Table 65 shows that more than 99.5 percent of Suwannee County's HMO enrollment is in "All other" plans compared to only 61.9 percent statewide. Only 13 individuals or less than 1 percent are enrolled in Medicare HMOs, and there is one Medicaid HMO enrollees.

Table 64. Total and percent HMO's and enrollees, by county and Florida as of June 30, 2006.

Area	Total HMO's		Total HMO Enrollees		
	Number	Percent of State	Number	Percent of State	Rate Per 1,000 Population
Suwannee	6	16.7	2,665	0.07	66.6
Florida	36	100	3,758,544	100	203.4

Source: State of Florida, Department of Financial Services, Managed Care Summary Report as of June 30, 2006; ESRI Business Solutions, 2006.
Prepared by: WellFlorida Council, 2007.

Table 65. Total and percent HMO's enrollment by type, by county and Florida as of June 30, 2006.

Area	Total HMO Enrollees	HMO Enrollment Type					
		Medicare		Medicaid		All Others	
		Number	Percent	Number	Percent	Number	Percent
Suwannee	2,665	13	0.5	1	0.0	2,651	99.5
Florida	3,758,544	651,903	17.3	779,909	20.8	2,326,732	61.9

All Others include: individuals, small groups, Healthy Kids and federal employees.
Source: State of Florida, Department of Financial Services, Managed Care Summary Report as of June 30, 2006; ESRI Business Solutions, 2006.
Prepared by: WellFlorida Council, 2007.

Avoidable Hospitalizations

The Institute of Medicine (IOM) defines access as the “timely use of personal health services to achieve the best possible outcome.” This definition suggests that an evaluation of effective utilization and access must include consideration of indicators of health status or health outcomes. In order to determine appropriate and effective utilization of hospital services and availability of primary care, a methodology has been developed to analyze hospital discharge data for (non-elderly) residents to determine the level of hospitalization for certain illnesses susceptible to primary care intervention.

The methodology is based on a study of the impact of the socioeconomic status on hospital use in New York; the results of which were released in 1993. In that study, specific diseases from the International Classification of Disease (ICD) codes were selected and proven in research to be reflective of the efficiency and effectiveness of access to the healthcare delivery system in the region. These diseases were called ambulatory care sensitive (ACS) because they had been

shown to be avoidable in many cases if timely and appropriate ambulatory and primary care is available and utilized.

In 2006, there were 19 avoidable hospitalizations per 1,000 population in Suwannee County which was substantially higher than the nearly 13.5 avoidable hospitalizations per 1,000 population for the state as a whole (Table 66). Table 67 and Figure 34 break out these avoidable hospitalizations by payor or insurance status. Oftentimes, the self-pay/charity and Medicaid populations demonstrate a disproportionately high number of avoidable hospitalizations since timely access can be a questionable proposition for these groups.

The percentage of self pay avoidable hospitalizations in Suwannee is higher, 12.7 percent, as compared to 12.0 percent for Florida. The percentage of Medicaid avoidable hospitalizations are higher in Suwannee County also, 26.6 percent as compared to 25.5 percent for Florida. In the “all other” category Suwannee County’s avoidable hospitalizations are less than Florida’s (as a percentage of overall avoidable hospitalizations).

In total, there were 2,858 avoidable hospitalizations patient days in Suwannee County during calendar year 2006 resulting in more than \$12 million in charges. As seen in Table 68, the overwhelmingly leading cause for avoidable hospitalization is dehydration/volume depletion accounting for almost a third of all avoidable hospitalizations. The second leading cause of avoidable hospitalization in Suwannee County is cellulitis, followed by congestive heart failure, asthma and chronic obstructive pulmonary disease rounding out the top five.

Table 66. Suwannee County residents 0-64 years of age avoidable rate and total hospitalization rate per 1,000 population compared to Florida, calendar year 2004-2006.

Region	2004		2005		2006	
	Avoidable	Total	Avoidable	Total	Avoidable	Total
Suwannee County	22.4	162.4	24.5	162.0	19.0	161.5
Florida	15.7	136.5	16.1	135.8	13.5	133.5

Avoidable rates are based on 0-64 years of age; total rates are based on total population.

Source: AHCA Detailed Discharge Data, 2004-2006; CHARTS assessed 10-15-07.

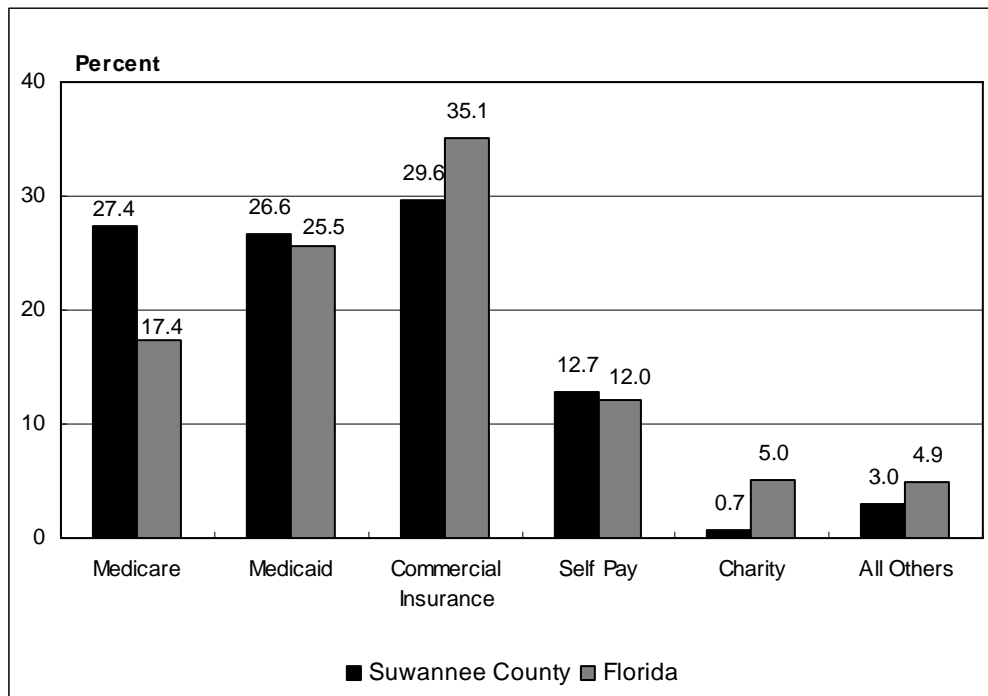
Prepared by: WellFlorida Council, 2007.

Table 67. Suwannee County residents, 0-64 years of age who had an avoidable hospitalization by payor source compared to Florida, calendar year 2006.

Payor	Suwannee County			
	Discharges	Percent of Discharges	Patient Days	Total Charges
Medicare	166	27.4	1,093	\$6,183,739
Medicaid	161	26.6	782	\$2,156,452
Commercial Insurance	179	29.6	666	\$3,136,631
Self Pay	77	12.7	243	\$939,104
Charity	4	0.7	12	\$60,204
All Others	18	3.0	62	\$303,737
Total	605	605.0	2,858	12,779,867
Payor	Florida			
	Discharges	Percent of Discharges	Patient Days	Total Charges
Medicare	35,808	17.4	207,868	\$1,135,520,571
Medicaid	52,603	25.5	245,773	\$1,232,502,175
Commercial Insurance	72,226	35.1	304,693	\$1,788,578,002
Self Pay	24,818	12.0	99,715	\$543,840,073
Charity	10,374	5.0	45,495	\$239,243,672
All Others	10,145	4.9	47,496	\$259,632,687
Total	205,974	100.0	951,040	\$5,199,317,180

All Others include: Workers Comp, Champus, VA, Other State/Local Government, Other and KidCare.
 Source: AHCA Detailed Discharge Data Tapes, 2006.
 Prepared by: WellFlorida Council, 2007.

Figure 34. Percent of avoidable hospitalizations by payor source for residents (age 0-64), Suwannee County and Florida, calendar year 2006.



Source: AHCA Detailed Discharge Data, 2006.
Prepared by: WellFlorida Council, 2007.

Table 68. Top 10 avoidable hospitalizations for 0-64 years of age in Suwannee County, 2006.

Avoidable Hospitalization	Number	Percent of Total
Dehydration - Volume Depletion (1)	192	29.8
Cellulitis (2)	84	13.0
Congestive Heart Failure (3)	66	10.2
Asthma (4)	62	9.6
Chronic Obstructive Pulmonary Disease (5)	52	8.1
Gastroenteritis (6)	36	5.6
Kidney/Urinary Infection (7)	34	5.3
Angina (8)	16	2.5
Grand mal status and other epileptic convulsions (9)	15	2.3
Diabetes "C" (10)	14	2.2
All Others	74	11.5
Total	645	100.0

Source: AHCA Detailed Discharge Data, 2006.
Prepared by: WellFlorida Council, 2007.

Summary of Key Findings

Provider and Facility Supply

- Suwannee County has been designated as a medically underserved area by the federal government.
- The low income and migrant farmworker population has been designated a health professional shortage area by the federal government for dental health care.
- The rate of licensed physicians and doctors of osteopathy per 100,000 population, with license addresses in Suwannee County, is substantially less than for Florida.

Access to Healthcare

- In 2007, there were nearly 6,668 non-elderly uninsured in Suwannee County.
- As of December 31, 2006, there were 7,328 Medicaid Eligibles in Suwannee County.
- Prescribed drugs comprise nearly 20 percent of Medicaid expenditures in Suwannee County compared to only 8.7 percent for the state.
- The avoidable hospitalization rate in Suwannee County is 19 per 1,000 population compared to 13.5 per 1,000 for Florida.
- In 2006, there were 605 avoidable hospitalizations which incurred more than \$12.7 million in charges.

Community Input

Interviews with Community Leaders

Introduction

The WellFlorida Council conducted key informant interviews during the month of October and November 2007 with the cooperation of the Suwannee County Health Department. The purpose of conducting the interviews is to better understand the perspectives of key community leaders on the health and healthcare needs of Suwannee County residents. These interviews are intended to ascertain opinions among individuals likely to be knowledgeable about the community and who are influential over the opinions of others about health concerns in the county. The findings provide qualitative information and reveal factors affecting the views and sentiments regarding healthcare services in Suwannee County. A summary of community leaders' opinions is reported without judging the veracity of their comments.

Methodology

The Suwannee County Health Department compiled a list of possible interview subjects and the WellFlorida Council staff made the initial contacts. The list included governmental representatives, including elected officials and public employees; healthcare providers, mental health professionals, and representatives of local businesses and community organizations.

Council staff conducted interviews by telephone to. Fifteen key community leaders agreed to be interviewed, and the interviews were conducted during October and November 2007. To assure the confidentiality of their comments, the names and any other identifying information of the interviewees has not been included in this report.

All interviews were conducted using a standard questionnaire. The instrument used to conduct the interviews is included in Appendix A. Community leaders provided comments on the following issues:

- Overall perspective on healthcare in Suwannee County;
- Perception of essential services of the county's healthcare system;
- Opinions of important health issues that affect county residents and types of services needed to address these issues;
- Impressions on specific health services available in the county; and
- Opinions on the parties responsible for initiating and addressing health issues for the county.

Interview Analysis

The leaders interviewed were asked whether they serve on any boards or have any affiliations with healthcare providers in the community that deliver healthcare services that may have helped form their opinions.

The business and community leaders interviewed served or worked with on various professional, political, and trade organizations.

The interview questions for each community leader are identical. The questions have been grouped into five major categories. A summary of the leaders' responses by each of these categories follows. Paraphrases are included to reflect some commonly held opinions and direct quotes are employed to emphasize strong feelings associated with statements. This section of the report summarizes what the community leaders said without assessing credibility of their comments.

General Perceptions

When asked to share their impressions about health and healthcare in Suwannee County, community leaders spoke at length about the assets and deficiencies of the system. First and foremost, interviewees consider the county's greatest deficiency to be the economical barriers that exist throughout the community. Although they were quick to acknowledge that some people may harbor negative perceptions of smaller rural community's healthcare systems, they maintained the quality of care in Suwannee County is quite high.

While hospitals play an important role in a community's ability to administer healthcare to its citizens, community leaders also discussed other services such as the Health Department, which they regarded as important components of healthcare in Suwannee County. Community leaders consistently indicated that there must be different levels of care available, from primary to tertiary, and that there must be options for citizens within each of these levels of care. Although they often remarked that their network of facilities and providers are below average, community leaders also noted that access to larger cities such as Gainesville, Jacksonville and Tallahassee offered options to residents that may not be available to other rural areas of the state.

Community leaders are well aware that an individual's ability to access healthcare is most often predicated on that person's ability to pay for it. They noted that there is a significant population of uninsured in Suwannee County and that those individuals have limited options when it comes to healthcare. In some cases, community leaders discussed the fact that people simply do without basic healthcare, especially preventative services. In other instances, the uninsured may be forced to use the emergency room for services other than those for which it is intended.

Lack of insurance, transportation and availability of services were noted most often when asked what the most pressing healthcare concern for Suwannee County currently is. What emerged throughout the comments of community leaders is that while the healthcare system in Suwannee County is generally good, some of the most vulnerable individuals in the population, namely the

uninsured and the indigent, are running into barriers that prevent them from getting the services they need. These barriers occur at the personal level as well as the systemic level and they have a synergistic effect on one another. Community leaders went on to point out that when access to primary care is constrained, it could contribute to the degradation of the system as a whole.

Essential Services

The community leaders were asked to list some of the essential services of the healthcare system in Suwannee County. The top five essentials they discussed were indigent care, primary care, mental healthcare, health education, and dental healthcare.

Indigent Care

Many interviewees placed a premium on the importance of providing health services for those who are unable to afford them. While noting that the Health Department works hard to reach this population, many needs are still going unmet. In particular, community leaders expressed concern for the growing number of Suwannee County residents who are not able to obtain health insurance, but at the same time are not eligible to receive Medicaid. Several observed that any growth in the healthcare infrastructure should contemplate the need for free clinics and other “safety net services”.

Primary Care

In discussing the availability of appropriate treatment, community leaders often cited primary care as a concern. Primary care was most often described as the basic and routine services that people use most often. Many leaders felt that there are not a sufficient number of primary care doctors available in the county for residents to easily access.

Mental Healthcare

Mental healthcare was state as “suffering financial loss from the state level, and the local government are not able to offset the financial struggles” of the system. It was also noted that most often mental health services would either be addressed by professional association such as Meridian Behavioral Health or by the local jails. One leader stated, “Either state government has to step up or the local jails because that is where the individuals with mental health problems will end up eventually.”

Health Education

Observations about education centered on the point that it should be a life long process and that it should begin as early as possible. Some community leaders felt that health education should be aggressively incorporated into elementary, middle and high school curricula. Several leaders noted that childhood obesity has become a growing concern within the community. One leader stated, “The education and preparedness a child needs is not happening in the homes, we must give the child the access and knowledge needed in schools to make healthy choices.”

Dental Healthcare

All community leaders were in agreement that dental care in Suwannee County is very poor. Several commented that it is common for a relatively small community to have problems delivering dental health services. In spite of this, a number of community leaders expressed concern that the number of accessible dental health providers in the county is insufficient. Many also stated that affordable dental healthcare was hard to find even in larger adjacent cities such as Gainesville and Jacksonville.

Community Focus Groups

Introduction

The purpose of a focus group is to listen and gather information. It is a way to better understand how people feel or think about an issue, product or service. Participants are selected because they have certain characteristics in common that relate to the topic of the focus group. As part of the 2007 Community Needs Assessment, the Suwannee County Health Department recruited individuals to participate in four local focus groups. While recruitment efforts went above and beyond the call of duty, the overall participation was minimal. Originally there were four target interest groups who included, elderly residents, uninsured residents, African-American/black resident and Hispanic residents. The elderly focus group and the Hispanic focus group were the only groups conducted.

Methodology

Two trained focus group facilitators conducted two focus groups during the month of October 2007. The two groups were comprised of elderly residents and Hispanic resident. Focus group protocols and questions were developed by the WellFlorida Council, Inc. and Suwannee County Health Department.

Participants for these groups were recruited by newspaper advertisement; recruitment advertisements posted at local shopping centers, churches and neighborhood bulletin boards; and through word of mouth recruiting. A \$10.00 gift card from a local business was offered as a participation incentive and was issued to participants at the conclusion of each meeting. Participant recruitment began approximately three weeks prior to the first group meeting.

Participant registration was made through a designated telephone line at which time a brief “screening” was performed to insure the appropriateness of the caller for participation in the group, i.e., the caller fit into one of the identified race, age or economic target groups. All qualified individuals scheduled for a focus group received a reminder call before their scheduled meeting time.

The Hispanic focus group was held at St. Francis Xavier Catholic Church in Live Oak. Nuns at the church recruited member from their congregation to participate. Suwannee County Health Department provided an interpreter for this group. The elderly focus group was held at the

Suwannee County Regional Library in Live Oak. While other focus groups were scheduled the same day no participants arrived for the remaining groups.

One facilitator acted as discussion moderator and the other as recorder. The meetings were audio tape recorded with the permission of all participants. After introduction and explanation of meeting format, nine questions were sequentially presented to participants for discussion. At the end of each focus group meeting, the recorder gave a summary of the discussion to participants to insure that the notes taken accurately reflected the discussion.

Focus Group Question and Answer Summaries

Q1. Where would you recommend I get health information?

Brief Summary

The most frequent responses to this question from most of the groups were the Suwannee County Health Department and Shands Hospital. Word of mouth was also mentioned several times as resources. There were mixed feelings concerning the use of the internet to find health information.

Q2. Where would you not recommend I get health information?

Brief Summary

There was consensus from all of the groups in that they would not recommend getting information from a newcomer or someone who isn't knowledgeable about health care. Only 1 member felt that the health department did not meet their health information needs in a timely manner.

Notable Quotes

- “The health department just doesn't offer very much”
- “There's not much information available in Spanish”

Q3. What do you think about health care in Suwannee County?

Brief Summary

A majority of respondents stated that they have to go out of county, usually to Gainesville to get services. The Hispanic residents noted that they were satisfied with the health department and thought that residents were no more healthy or unhealthy than other areas.

Q4. What has helped you or your family to improve or maintain your health?

Brief Summary

Most participants felt that applying healthy lifestyle behaviors i.e., eating the proper diet, drinking water, regular exercise, getting adequate rest, having a positive attitude, being social and being involved in other activities has helped them improve or maintain their health.

Notable Quotes

- “I try to eat more fruits and vegetables.”
- “I only drink water, I quit drinking sodas.”
- “I try to do what the doctor tells me.”

Q5. What are problems or barriers that keep you from being healthy?

Brief Summary

Overwhelmingly, residents stated that the lack of health insurance was the greatest barrier to health care. Many stated that if they had insurance they would seek preventative services and not utilize the emergency room for basic primary care.

Notable Quotes

- “My biggest problem is I’m too young for Medicare and I don’t qualify for Medicaid, and my job doesn’t offer insurance.”
- “It seems like every time you go to the health department they tell you you have to go to Gainesville cause they don’t offer what you need.”
- “The worst thing for me is transportation.”

Q6. What do you go to other counties for and what health care services do you and your families go out of Suwannee County to receive?

Brief Summary

All participants stated that they go out of county for all specialty services. Many said they have to go out to Gainesville or Jacksonville because they could not find the specialty doctor that they needed. Many members of the Hispanic group stated that they have to call on pharmacies outside of the county to explain their medication prescription bottle. Dental services were also noted as a service sought in other areas.

Notable Quotes

- “We need dentists”
- We need to have more specialists”

Q7. What do you need to keep you and your family healthy?

Basic Summary

Health education was discussed most often when asked what residents need to remain healthy. The Hispanic participants stated that they will receive medication, but there is no explanation of how to properly use the medicine.

Notable Quotes

- “It would be nice to learn about infections and how to prevent them.”
- “We need prevention on viruses, staph, etc. We don’t have enough information about it.”
- “This one lady was given pills and she was not told how to take them so she busts the capsule open and rubbed the powder on her arms. No one explained to her that she was supposed to swallow the medicine.”

Q8. What do you think are the most pressing or most serious health care needs in Suwannee County? Overall, what would you say is the most important health need we have just come up with?

Basic Summary

The focus again was on health education, especially for youth and school age children.

Notable Quotes

- “We need someone to come here and talk to youth about STDs and HIV.”
- “We need flyers and brochures to give out in the (Hispanic) community about illness and disease prevention.”

Q9. What do you think can be done to address these health care needs?

Basic Summary

The majority of participants felt that having a local health fair and offering free health screening would be a good start. They also suggested making this an annual or semi-annual event. It was also suggested that a mobile van be obtained to go to areas where migrant farm workers are to address their health concerns.

Q10. What is your perspective on how the community members feel about the Suwannee County Health Department?

Basic Summary

The majority of participants felt that the Suwannee County Health Department was doing a good job. Many felt that the staff has a good reputation within the community.

Notable Quotes

- "It's very good."
- "It's perfect."
- "The staff and doctors are very good, I feel safe within their care."

APPENDIX A

Suwannee County Needs Assessment 2007 Key Informant Interview Instrument

The **Suwannee County Health Department** is conducting a county-wide health needs assessment. The goal of this assessment is to identify the most pressing health needs of residents of Suwannee County including issues like access to health care, barriers to receiving health care, and the most pressing health issues of residents. As a part of this study, we are conducting a series of interviews with key individuals throughout the county who have knowledge of the health needs of individuals in Suwannee County. You have been identified by the project team as a key informant based on your knowledge of the health-related issues for your County residents. This interview will take approximately 30 minutes. Do you have 30 minutes now or can we schedule a time to talk in the near future?

1. Could you briefly describe your position and how long have lived and/or worked in Suwannee County?

2. It is important that we understand any affiliations you have with health care providers in the community that may have helped form your opinions about these issues. Do you serve on any boards or participate in any organization that delivers health care services?

3. Please comment on your overall perspective on health care in Suwannee County, the services available to meet health care needs and the health of Suwannee County residents?

4. Where do you think the residents of Suwannee County go to get needed health information?

5. What do you think are the most pressing health care needs in Suwannee County?

6. What do you think are the most important health issues that affect Suwannee County residents? (Prompt: you may want to consider separate issues for children, adolescents, and adults and other groups.)

7. What residents of Suwannee County have more difficulties with health care than others? What are these difficulties? Why do you believe these folks have more difficulties with health care?

8. What do you think are the essential components of a quality health care system for a community like Suwannee County? (Prompt: What kinds of services/programs/facilities do you think are necessary for a good system of health care for county residents?) Are we meeting these essential components in Suwannee County?

9. Please share anything you know about how the following services are available to all persons in Suwannee County and whether there are any obstacles to receiving these types of services:
 - a. Primary care (the basic and routine services that most people use most often)
 - b. Mental health
10. Are there other types of services that individuals in Suwannee County have difficulty accessing? (Prompt: dental care, specialty care, pharmaceuticals/prescription)
11. Of all the issues and services we have discussed, which do you think is the most important health care issue in Suwannee County?
12. What actions are necessary to address this issue?
13. Who should take responsibility for addressing this issue (or what are the responsibilities of different parties [individuals, providers, and government, business] in addressing this issue)?
14. What is your perspective on how the community members feel about the Suwannee County Health Department? (Prompt: Do they utilize the services available? Do they know what types of services exist?)
15. What is your perspective on the role of community members play in improving the overall health of Suwannee County?
16. Do you have any additional comments you would like to share about health care in Suwannee County?

That completes the interview. I would like to thank you very much for your time. Your input is valued by the project team. The Suwannee County Needs Assessment is scheduled to be completed in mid-November.

If you have any additional information you would like to share please call me

APPENDIX B

Suwannee County Health Needs Assessment Focus Group Moderators Guide

Hello and welcome to our focus group. A focus group is a discussion among people who have something in common. Each of you is here today as a resident of Suwannee County and have unique perspectives on the health of your community. I'd like to thank you for agreeing to join our discussion group today where we will be talking about the health needs of individuals in our community.

My name is Shane Bailey and assisting me with this discussion is _____. We are both representing The Suwannee County Health Department Needs Assessment Committee. This committee is working on a Health Needs Assessment Report to help our local policy makers and health care providers focus on health needs that you feel are important.

We are conducting 4 focus groups in Suwannee County. The purpose is to understand what you think are the most pressing health care needs of your community and the factors that influence an individual's health and health care. Health and health care needs are anything that would help you achieve an acceptable quality of life. Your input into this process is extremely important.

To help manage our discussion, I am going to review some guidelines:

- I will be asking you all some questions over the next hour and a half. I encourage each of you to share as much as you feel comfortable. All of your opinions are important to us and this project. Feel free to say what ever you like; there is no right or wrong answers to our questions.
- We ask you to respect what other people in the group say and for you avoid negative comments about other peoples' thoughts or opinions.
- We ask that only one person talk at a time, we do not want to miss anything that anyone says, so it is important we do not talk over one another or break into separate conversations. If you think you might forget your ideas, please write them down. Then you can share them at the next opportunity in our conversation.

- Most importantly, what you say in here today will remain between us. We will not be using your name when we report the results of this study. We also ask that you not share what we talk about today in the group with others outside the group. It is important that we trust each other and that you are comfortable sharing your thoughts.
- We are taping today's meeting. The tape will only be used by our staff to make sure that our written reports are accurate. We do not want to miss any of your comments. Once those reports are complete, we will destroy the tapes.
- As you walked in we handed you a brief questionnaire. This will be used to help describe the discussion group. Please take a minute and complete these questions before we start. We will not be using this information to identify you in anyway.
- If you have a cell phone, please turn them off or put them on vibrate. If you must answer the phone, please do so outside and return as quickly as you can.
- You will be receiving your incentive for participating at the end of the session.

Our session will last about 90 minutes, and we will not be taking a formal break. If you must use the restroom, they are located _____.

Are there any questions about what we're doing today? If there are no additional questions, we'll begin.

QUESTIONS

As a way of getting started and getting to know each other, I would like around the room one at a time.

Please tell us your name and how long you have lived in Suwannee County?

Now that we have heard from each of you, I would like to ask some questions for anyone to answer.

Please, I ask you to remember to talk one at a time because each one of you have important things to say and we want to make sure that we hear what you have to say. There are not right or wrong answers; we only want to get your input.

1. Let's suppose I am new to the community, and I need some health information, where would you suggest I go?
2. Where would you suggest I not go?
3. Considering your own experiences, what do you think about health care in _Suwannee_ County?
(Prompt: Perspective on the services available in the county and the health of the residents of the county.)
4. Considering your own experiences, what are some things that have helped improve or maintain the health of you or your family? What are some things that have been helpful *(Prompt: types of programs)*
5. What are problems or barriers that keep you from being healthy? *(Prompt: barriers to care including insurance, cost, access to care primary care/mental health/dental)*
6. *What do you go to other counties for and what health care services do you and your families go out of Suwannee County to receive?*
7. What do you need to keep you and your family healthy? *(Prompt: Identification of services and resources that could help to improve health.)* Looking at our community as a whole, is there anything else you would like to add to the list?
8. What do you think are the most pressing or most serious health care needs in Suwannee County? Overall, what would you say is the most important health need we have just come up with?
9. What do you think can be done to address these health care needs? *(Prompt: What community groups can work together?)*

10. What is your perspective on how the community members feel about the Suwannee County Health Department? (**Prompt:** *What do people use their services for? Do community members use the HD services available? Do they know what types of services exist? Why?*)

11. What is your perspective on the role of community members, like yourselves; play in improving the overall health of Suwannee County? What do you think you can do to improve your overall health?

12. Do you have any additional comments you would like to share about health care in Suwannee County?

I would like to take a few minutes and briefly summarize what we talked about today. [**Provide summary of notes for each question**] Our discussion today was to help us understand how the community feels on the health needs in Suwannee County. Have we missed anything?

Now, if there are no further comments, we would like to thank you all for your participation in this very important project, and please remember to keep everything you have heard today inside this room and among us.

We are now going to come around the room and distribute your incentive for participation.

Again, thank you for participating in this discussion with us. We really appreciate your thoughts and comments.