COMMUNITY HEALTH IMPROVEMENT PLAN 2018 TO 2020

Florida Department of Health in Monroe County
Community Health Improvement Plan

• DISEASE TRENDS: Informs the reader of the historical progress of various leading causes of death or illness in the micro-community. As you read through the publication, see if you can spot some interesting trends; there are some significant differences in health status from tract to tract.

• AGE-ADJUSTED MORTALITY RATES: Because Monroe is a small-population county, age-adjusted mortality (death) rates per 1,000 population are used to represent the health status of each micro-community. When looking at these age-adjusted death rates, one must use caution in interpreting them due to random fluctuation in deaths that occur normally in small populations from time to time rather than true changes in the risk of disease. Unless otherwise stated, these age-adjusted death rates represent only the rate that individuals from these communities are dying from during the 5-year period observed and cannot be generalized to all-time risk of specified diseases for each micro-community.

• DETAILED MAPS: features fire stations, hospitals, law enforcement, schools, and tobacco/alcohol retailers; all of which play a role in the health of a community. Monroe County has the highest per capita number of liquor licenses in the State of Florida. We have included this on the maps as it is our assumption that alcohol abuse plays a significant part in adverse health outcomes.

More about Micro-Communities: The Florida Keys are divided into 28 Census tracts from Key West to Ocean Reef. A census tract is a small, relatively permanent subdivision of a county that provides a stable set of geographic units for the presentation of statistical data, demographic data, and public health statistics. We have combined some of these census tracts so as to present 22 micro-communities, or individual community health profiles, to better represent areas that share common demographic data, public health statistics, and municipal incorporations. The following six census tracts were consolidated:
• Lake Surprise and Pennekamp Park (tracts 9703 & 9704) • Village of Islamorada (tracts 9708 & 9709)
• Big Pine Key (tracts 9714.01 & 9714.02) • Cudjoe, Summerland, Ramrod, and The Torches (tracts 9715.01 & 9715.02) • District 5, Key West (tracts 9722 & 9726) • District 1, Key West (tracts 9713 & 9715)

About This Report

This guide showcases the health and demographic information of each area — or micro-community — of the Florida Keys. For each micro-community, we used data from the U.S. Census Bureau for age, housing status, ethnicity and income data, all of which can impact a person’s health. Florida CHARTS database was used as the source of health data.
Dear Reader:

Our Community Health Improvement Team is delighted to provide you with this publication. It contains local insights into the facets of public health in the Florida Keys. Production has spanned about 14 months and includes articles by local health experts and an analysis of over 1000 in-person interviews with Keys residents. We have tried to blend the details of a technical document with the feel of a hometown newsletter. This effort has been directed toward three specific goals: One, determine what health issues are important to selected communities (Bahama Village, Marathon, Key Colony Beach, and Stock Island); and two, create easy to understand plans to systematically address those issues.

The third goal is to provide insights into health issues on a countywide level, including age-adjusted death rates, life expectancy, and common risk factors for the leading causes of death. When reviewing health data for Monroe County, it was clear to the entire team that alcohol was a major public health concern. We have included helpful information designed to identify the scope of alcohol use and abuse in the Florida Keys and the physiological and economic effects of alcohol abuse.

Our CHIP team is comprised of staff members from the Florida Department of Health in Monroe County, many local volunteers, and our public health intern from Florida International University’s Stemple College of Public Health and Social Work. Alison Kerr coordinated the efforts of these talented folks to present the information obtained in a practical and easy-to-read format. Subject matter experts, such as Dr. Mark Whiteside, wrote in-depth articles that shed light on major health issues in the Florida Keys. Other articles include information on health policy and the economic benefits of prevention.

Our team used infographics when possible to display complicated data. For example, Ruth Kallay created the infographic on page 4 that shows the leading causes of death for males and females here in Monroe, as well as the change in life expectancy from 1985 to 2015. In addition, the publication provides guidance on the perils of tobacco use and prevention strategies for stroke and cancer. How much do you know about heart disease? Why not take the Heart Disease Quiz to test your knowledge?

As previously noted, the primary goal of our CHIP team was to develop health improvement strategies for the communities of Bahama Village, Marathon, Key Colony Beach, and Stock Island. Each of these micro-communities was extensively surveyed by our public health research specialists to determine the residents’ perception of their health needs. The widely-used Protocol for Assessing Community Excellence in Environmental Health (PACE-EH) methodology was employed for gathering data and mobilizing the community. The results will be presented to community groups and local government. Take a few minutes and review the results, particularly if you live in one of these areas.

We sincerely hope you enjoy this publication.
Overall, the Florida Keys are a healthy place to live, to work and to visit. According to a study by the University of Wisconsin that ranks health measures and outcomes, Monroe County ranked number 7 of the 67 counties in Florida. Monroe residents generally do well as compared to State of Florida's averages in physical activity, healthy weight, and stroke hospitalizations. Other positive health indicators include a low rate of adults with asthma or diabetes and frequent visits to the dentist. Improvements can be made in a number of areas: colorectal cancer, melanoma and cervical cancer. It is noteworthy that many of the leading causes of death have alcohol abuse as a risk factor. In fact, Monroe County has the highest incidence of binge drinking in Florida.

**County's Overall Health**

TOP 10 CAUSES OF DEATH IN MONROE COUNTY
Residents, all ages, 2010-14

1. Cancer 26.8%
2. Heart disease 22.5%
3. Unintentional injury 7.8%
4. Suicide 4.3%
5. Chronic lower respiratory 4.1%
6. Cirrhosis & liver disease 3.8%
7. Cerebrovascular disease 3%
8. Diabetes 2.3%
9. Kidney disease 1.6%
10. Alzheimer's disease 1.5%

**TOP 5 RISK FACTORS FOR MONROE RESIDENTS, ALL AGES**

**Males:** poor diet, high BMI, low physical activity, cholesterol, lack of medical care due to cost

**Females:** Poor diet, low physical activity, high BMI, cholesterol, blood pressure
## Impacting the Health of all Residents of Monroe

The Florida Department of Health in Monroe County is currently making some great strides in the following areas:

<table>
<thead>
<tr>
<th>Area</th>
<th>Description</th>
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<tbody>
<tr>
<td>Culturally / Linguistically Competent Care</td>
<td>We have staff on hand who are trained in medical interpretation and are able to help communicate with clients who speak a variety of languages. The interpreter will assist the individual and healthcare provider by providing pertinent health-related information to each party. We also contract with Language Line to provide telephonic interpretation services.</td>
</tr>
<tr>
<td>Electronic Health Records</td>
<td>We currently have a policy that ensures we have an electronic records system in place. A majority of our records are electronic.</td>
</tr>
<tr>
<td>Environmental Health</td>
<td>We do regular inspections of the following: biomedical waste, body piercing and tattoo parlors, tanning salons, food hygiene for certain facilities, mobile home parks, onsite sewage disposal, swimming pools, and public beaches.</td>
</tr>
<tr>
<td>Healthy Weight / Overweight &amp; Obesity</td>
<td>We promote Healthiest Weight Florida, host Biggest Loser Challenges, and have available our “Motion on the Ocean Parks Directory,” which features all 65 of the Florida Keys parks.</td>
</tr>
<tr>
<td>HIV/AIDS</td>
<td>We find and link care to anyone who may not know that he/she is infected and to prevent new HIV infections. Activities include free walk-in and by-appointment HIV testing, community outreach, evidence-based interventions, public education, and awareness.</td>
</tr>
<tr>
<td>Immunization</td>
<td>We work closely with the Monroe County School District school nurses to ensure that all school children have required vaccines. We achieve this through promoting immunizations, educating parents and students, and offering vaccinations on site. We are proud to have a highly successful high school immunization program where the assigned RN excelled with the 2017 graduating senior class by having 91% (boys and girls) vaccinated with complete HPV series and 96% with Menactra.</td>
</tr>
<tr>
<td>Infectious Disease</td>
<td>We have a stringent reporting protocol to track infectious reportable disease to ensure the health of the public.</td>
</tr>
<tr>
<td>Maternal and Child Health/ Infant Mortality</td>
<td>Monroe County has among the lowest rates of infant mortality in the State. Much of it is attributed to community partners and programs such as WIC and Florida Keys Healthy Start Coalition.</td>
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<tr>
<td>Nutrition and Food Related Issues</td>
<td>Monroe County WIC provides nutrition education, breastfeeding classes and healthy foods to qualifying low-income women, infants and children living in Monroe County. Participants receive free consultation services from Registered Dietitian/Nutritionists, a Certified Lactation Counselor and/or an International Board Certified Lactation Consultant.</td>
</tr>
<tr>
<td>Public Health Preparedness</td>
<td>We have a strong collaborative partnership with Monroe County Emergency Management, Monroe County, and other first responder groups to ensure public health and safety during emergencies and events.</td>
</tr>
<tr>
<td>Smoking, Tobacco, Inhaled Nicotine</td>
<td>We provide technical support in regards to smoke-free multi-unit housing policies, tobacco free worksites and events that eliminate exposure to secondhand smoke and reduce tobacco initiation and use with the support of the SWAT youth advocates.</td>
</tr>
<tr>
<td>Sexually Transmitted Infections / Diseases</td>
<td>We have a stringent reporting protocol to track sexually transmitted infections to ensure the health of the public and provide education on such infections.</td>
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INTRODUCTION TO MONROE COUNTY PUBLIC HEALTH

75,191

Monroe County population
Establishing Health Policy in Our Communities

By Donna Stayton

Health policy is vital to improving the health equity of our community. Public health often meets the needs of the residents in communities through individual interactions, such as tobacco cessation classes, health care providers, health fairs and the like. While effective and ambitious, this form of public health is so specific and only really meets the needs of those residents that have this one-on-one contact with health care providers and outreach workers. Through the years however, health policy has been found to add significant value to population health in general. This has been seen with smallpox vaccinations, clean drinking water and sanitation policies. Working both individually and collectively with the population provides a solid foundation for successful health outcomes. This is accomplished with formal and informal policies that impact public health by reducing instances of illness and improving health outcomes.

WHAT IS HEALTH POLICY
The World Health Organization describes health policy as “decisions, plans, and actions that are undertaken to achieve specific health care goals within a society.” Formal health policies are written and structured, such as laws, school or work policies. Informal health policies are more of a standardization of how something is performed or an idea that is an accepted norm, such as not smoking inside a home to protect others from secondhand smoke.

WHY IT IS USED
Health policy assists in developing an environment that is conducive for healthy living and sets up social norms that are beneficial for our children to learn and play by showing a behavior that models wholesome choices. The Centers for Disease Control and Prevention (CDC) looks to the social determinants of Health. Those factors include where people work, live and play — all of which influence health equity. These personal, social, economic factors influence wellbeing and can be changed through strong policies, one of public health’s ten essential public health services.

WHO IS USING IT
The Florida Clean Indoor Air Act (FCIAA) is often seen as a good example of a sweeping health policy that impacted every resident in the State. In 2003, an amendment to the FCIAA protected almost every resident from the dangerous exposure to secondhand smoke, in some way, by eliminating smoking in enclosed indoor workspaces. Now communities across the State and Country are incorporating practices such as worksite wellness, complete streets and transportation policies to assist resident’s access to health care, healthier food options and increased activity that otherwise would not be available. One policy can have an impact on hundreds or even thousands of residents. For example, one Monroe County School District tobacco free schools policy impacted thousands of students, staff and family members in the community.
YOUTH ADVOCATE ROLE IN HEALTH POLICY
Youth advocates play an integral role in health policy. They are the voices of the future and provide peer-to-peer interactions that could not happen otherwise. Monroe County’s SWAT (Students Working Against Tobacco) youth advocates have been instrumental in passing Resolutions in all five cities urging retailers to refrain from selling flavored tobacco products. These youth are in the schools and community doing outreach to gain support for smoke free and tobacco free policies, such as tobacco free events and point of sale marketing.

Health policies are possible only through community partnerships, youth advocacy, and community members who are dedicated to a vision of a world with optimal health outcomes for all. They assist in acquiring funds that will improve the community, access to care and health equity. Health policy is vital.

HOW IT IS USED IN MONROE COUNTY
Here in Monroe County you can find a number of unique health policies in place. For example, the Florida Keys Mosquito Control District’s “Zap Zika” program provides guidelines that minimize community exposure to mosquito borne illness. This type of program creates a change in social norms as residents learn to drain standing water, cover and spray to protect themselves on a regular basis. Another example is the Village of Islamorada’s Founders Park. It was developed by visionaries as a place where residents access activity and build community. The Parks & Recreation Citizen Advisory Committee provides a collaborative system for park improvements. It is made up of residents who work with a village liaison to make recommendations to the Village Council for the park’s improvements, that have included exercise equipment, bike trail, and Olympic-sized pool to name a few.
As with many questions in the field of economics, the answer to this question is “it depends.” The prevention of illness generates many different economic benefits, such as lower healthcare costs, fewer days missed work due to illness, improved worker productivity, and reductions in the burden to family caregivers. Whether these potential sources of economic benefits are enough to out-weigh the cost of prevention efforts, thereby generating a positive societal return on investment, depends on a few factors. Chief among these factors is the impact of the prevention effort, which depends on the number of people in the population the prevention efforts reach and the intervention’s efficacy. Another factor is the efficiency with which prevention efforts can be implemented and sustained.

This question is especially relevant for Monroe County. The top two causes of death for males and females in Monroe County during the years 2010-2014 were cancer and heart disease. The incidence and prevalence of these conditions can be reduced through effective prevention. Examining the top risk factors for these conditions highlights this point further. In 2013, the top four risk factors for Monroe County residents were poor diet, high body mass index, low physical activity, and high cholesterol. Each of these factors contributes to the top causes of death among Monroe County residents and each is potentially modifiable with effective prevention.
The economic benefits of preventing cancer and heart disease in Monroe County could be substantial (see center graphic). And the economic burden of these diseases is borne by many sectors of society:

• Individuals with the disease who are responsible for out-of-pocket health spending;
• Private insurance companies who provide medical reimbursement;
• Businesses who experience employee absenteeism, reduced employee performance while at work, and escalating health insurance premiums;
• Caregivers who provide financial and non-financial support to their ill loved one;
• And taxpayers who fund the Medicare and Medicaid programs.

Despite the potential economic benefits of prevention, in order to be financially sustainable the cost of implementing prevention programs and interventions must be less than their generated savings. Our own work here in South Florida has yielded several strategies for maximizing the efficiency of delivering prevention programs and interventions.

1. Implementing group-based interventions
In partnership with the Health Foundation of South Florida’s Healthy Aging Regional Collaborative, we documented the costs of implementing a chronic disease self-management program, a fall prevention program, and an exercise program for seniors. Because the programs were delivered to groups of seniors, rather than in one-on-one settings, the average cost of each program was substantially less than the estimated healthcare cost reductions that results from program completion.

2. Using technology to deliver content and track outcomes
We measured the cost of delivering a medication adherence intervention via the internet and compared the cost to other existing in-person interventions. Our study found that the cost of delivering the intervention via the internet cost 95% less than delivering interventions in-person. In addition to delivering prevention interventions in a less costly way, technology also allows for the easy tracking of participant outcomes.

3. Using available data to target prevention interventions towards at-risk populations
Not all people are at equal risk for developing a chronic disease. The growth of the use of electronic health records now affords the ability for healthcare providers or insurance companies to easily identify patients at-risk for developing chronic diseases. Therefore, prevention programs and interventions could be targeted towards the specific populations at-risk for a particular chronic disease.

4. Evaluating prevention efforts to advocate for their future dissemination
Analyzing the economic cost and benefits of prevention efforts is important in advocating for the future dissemination, implementation, and translation of successful prevention efforts to broad populations. While many public health efforts are known to benefit the health of populations, the resource constraints many health departments face often preclude the implementation of many worthwhile efforts. Being able to demonstrate an economic, as well as a health, impact provides greater justification for spending public dollars on prevention programs and interventions and may also encourage private sector companies to engage in prevention for their workforces.

Beyond services offered by health departments, there are innovative ways to promote the integration of prevention into other aspects of health service delivery. For example, insurance companies could reward providers who take proactive population health management-based approaches to target prevention efforts towards at-risk populations.

Alternatively, employers could be empowered to engage in employee wellness efforts on their own as a way of reducing employee health benefit costs and the negative impact of chronic disease on worker productivity. The elevated rates of preventable conditions in Monroe County, such as cancer and heart disease, suggest that there is tremendous potential to implement prevention efforts that will ultimately improve the health of the population and make Monroe County businesses more competitive.

$87 BILLION
healthcare costs of cancer nationwide in 2014.

$316 BILLION
health care and lost productivity costs of heart disease and stroke in 2011.
ALCOHOL IN MONROE COUNTY
Health Consequences of Alcohol Abuse
Health Consequences of Alcohol Abuse

By Bill Brookman

ALCOHOL misuse is a multifaceted problem that includes hazardous use, harmful use, and dependence.

Hazardous use, as defined by the World Health Organization, is a “pattern of alcohol consumption carrying with it a risk of harmful consequences,” physical, mental and social. It includes drinking more than the limits recommended by health authorities or imposed by the law.

Harmful use, also called alcohol abuse, involves drinking that is already provoking either physical or mental damage but has not yet led to dependence.

Dependence has been described as “the loss of control to abstain from drinking.” An alcohol-dependent person craves alcohol, continues to drink despite various alcohol-induced problems, and suffers from withdrawal in its absence.

No matter what your age, gender, or nationality, you are not free from the risks of hazardous drinking. Just what does alcohol do to the body? What are the health dangers of overdrinking?

WHAT CONSTITUTES SAFE DRINKING?

Today, millions of people worldwide safely enjoy having an occasional drink. What is moderation? Most people would consider their personal consumption to be moderate, perhaps reasoning that as long as they do not get drunk or are not alcohol dependent, there is no problem. We all react differently to alcohol and in some cases, even these lower limits may be too high. Age, medical history, and physique are factors to be taken into consideration.

Most common measurement
Men = 2 drinks
Women = 1 drink

French & British ‘sensible limits’
Men = 3 drinks
Women = 2 drinks

U.S. National Institute on Alcohol Abuse and Alcoholism
65 year old person = 1 drink

Percent of adults who engage in heavy drinking

<table>
<thead>
<tr>
<th>Year</th>
<th>Monroe</th>
<th>Florida</th>
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<tbody>
<tr>
<td>2002</td>
<td>30%</td>
<td>25%</td>
</tr>
<tr>
<td>2007</td>
<td>25%</td>
<td>20%</td>
</tr>
<tr>
<td>2010</td>
<td>20%</td>
<td>15%</td>
</tr>
<tr>
<td>2013</td>
<td>15%</td>
<td>10%</td>
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</table>
Alcohol and …
Risk Factors, Lifestyle & Longevity

• Dangerous for the Mind
Ethanol, the chemical compound present in most alcoholic drinks, is a neurotoxin — that is, a substance that can damage or destroy the nervous system. In large quantities ethanol causes coma and death. For instance, among students in Japan, the practice of ikkinomi, or alcohol chugging, causes deaths every year. The body is able to convert ethanol into harmless substances, but this is not accomplished immediately. If alcohol is consumed at a faster rate than the body can handle it, ethanol builds up in the system and begins to interfere noticeably with brain function.

Speech, vision, coordination, thought, and behavior are all connected with an incredibly complex series of chemical reactions in the brain’s neurons. The presence of ethanol modifies those reactions, suppressing or enhancing the role of certain neurotransmitters. The stream of information in the brain is thus altered, and that is why when a person drinks too much, he or she develops slurred speech, blurred vision, sluggish movement, and weakened behavioral restraints and inhibitions.

Dependence occurs when the brain has adapted so much to the presence of alcohol that it cannot operate properly without it. When a person is deprived of alcohol, his brain chemistry is totally destabilized and withdrawal symptoms, such as anxiety, trembling, or even seizures, set in.

Besides causing modifications of brain chemistry, alcohol abuse can lead to cell atrophy and destruction, altering the brain's very structure. While partial recovery is possible with abstinence, some of this damage seems to be irreversible.

“SOMEONE WHO IS DRUNK IS, IN FACT, SUFFERING FROM A FORM OF POISONING.”

• Liver Disease & Cancer
The liver plays a vital role in metabolizing food, combating infection, regulating blood flow, and removing toxic substances, including alcohol, from the body. Prolonged exposure to alcohol damages the liver in three stages. During the first stage, the breaking down of ethanol slows the digestion of fats, causing them to build up in the liver. This is called steatohepatitis, or fatty liver. In time, chronic inflammation of the liver, or hepatitis, sets in. If unchecked, inflammation causes cells to burst and die. Compounding this damage, alcohol seems to trigger the natural system of programmed cell death called apoptosis. The final stage is cirrhosis. The vicious cycle of continuous inflammation and cell destruction causes irreversible scarring. Eventually, the liver becomes lumpy, instead of remaining spongy. Finally, scar tissue prevents blood from flowing normally, leading to liver failure and death.

Alcohol’s effect on the liver has another insidious side effect — the liver is less capable of playing its defensive role in counteracting the effect of cancer-forming agents.

• Poisoned Babies
When a pregnant woman drinks, her developing child also drinks, and the toxic effect of alcohol is especially devastating at this formative stage of the fetus. Alcohol causes irreversible damage to its central nervous system.

The result, fetal alcohol syndrome (FAS), is the foremost cause of mental retardation in newborns. Difficulties encountered by FAS children include Intellectual impairment, language problems, developmental delay, behavioral dysfunction or deficit, slow growth, hyperactivity, and hearing and sight disorders. Many FAS babies are also born with characteristic facial deformities.

In addition, children whose mothers drank even moderate amounts of alcohol during pregnancy can suffer from certain disabilities. The wisest course for women who are pregnant or planning a pregnancy may be not to drink any alcohol at all.
Alcohol Abuse: A Major Public Health Problem in Keys

By Dr. Mark Whiteside

Leading causes of death in Monroe County, Florida include cancer, heart disease, “all other natural causes,” unintentional injury, suicide, and cirrhosis. Among the top three “preventable,” or life-style causes of disease and death in the U.S., namely: smoking, obesity, and heavy alcohol, Monroe County residents do better with diet and exercise than other Florida counties, but they smoke a bit more and we have the highest per-capita alcohol intake of any county in the state. Alcohol is widely accepted and even promoted in the tourist-centered economy of the Florida Keys. It is more widely available than most other communities in Florida: Monroe County has four times the number active liquor licenses than counties with a similar population. Many bars, restaurants, and stores sell alcohol and there are year-round special events that feature alcohol.

Everyone who drinks alcohol should consider its impact on their lives, their family, and those around them. The first step in getting help with alcohol dependence is by recognizing the problem and talking about it – and you can begin this process by talking to your doctor. There are support groups, individual/group or family therapy, or traditional 12-Step programs like Alcoholics Anonymous (AA). For moderate drinkers, there are some simple steps to begin the process of drinking less alcohol:

1. Keep track of your alcohol intake and reduce this amount over time.
2. Develop interests that don’t involve alcohol.
3. Limit your time with others who drink excessively.
4. Pace yourself – never have more than one alcoholic drink per hour and alternate alcoholic drinks with water and other liquids to stay well-hydrated.
5. Remember the “bad times” when alcohol made you sick or got you into trouble.
6. Focus on the future and the idea you should either not drink or drink only responsibly if you want to stay healthy for the things that matter in life.

There are alcohol treatment centers in the Upper, Middle, and Lower Florida Keys. Community partners involved with education about alcohol include the Florida Department of Health in Monroe County, the Monroe County Consortium, Woman Kind, the Guidance Center Inc., the Key West Police Department, the Monroe County Sheriff’s Office, Boys and Girls Club, Department of Children and Families, and Monroe County Coalition. Alcohol Use Disorder (AUD) might be considered the “elephant in the room” as far as a social/public health problem in Monroe County. Despite its prevalence, excessive alcohol intake is the one problem most of our residents don’t want to talk about. Significant improvement in this area could put Monroe County even higher on the list of the healthiest counties in Florida!
The rate of alcohol-related car crashes in Monroe County is typically more than double the number per 100,000 persons than the statewide average.

The rate of hospitalization and Emergency Room visits due to excessive alcohol among Monroe County residents is twice as high as the rest of the state.

**HEAVY OR BINGE DRINKING**

“Binge drinking” is defined as four or more drinks for a woman or five or more drinks for a man in one sitting. Monroe County generally exceeds average state percentages for heavy or binge drinking for both men and women in every age category from teens to over 65.

**BEVERAGE LICENSES**

Monroe (pop. 73,090) 148
Columbia (pop. 67,485) 148
Nassau (pop. 74,195) 209
Putnam (pop. 74,041) 178

Monroe County residents rank in the top ten percent (i.e. worst) of U.S. counties for heavy/binge drinking.

57.7% high school students
19.9% middle school students

of Monroe County students, the above percentages report they have used alcohol in their lifetime.

Source: 2016 Florida Youth Substance Abuse Survey
The National Institute on Alcohol Abuse and Alcoholism (NIAAA) notes the difficulty in estimating the precise costs to society of excessive drinking due to the fact that alcohol’s involvement in injuries and accidents are not always reported by hospitals and emergency departments. The agency also reports that many costs resulting from alcohol problems cannot be measured directly, such as placing a dollar value on lost productivity, absenteeism, and extra sick days.

**CDC strategies to reduce excessive drinking and related costs:**

Implementing pricing strategies to increase the price of alcohol.

Regulating the number and location of where alcohol is sold (outlet density).

Reducing the days and hours of alcohol sales.

Holding alcohol retailers liable for injuries or damages caused by their intoxicated or underage customers.

Avoiding moving from state-controlled alcohol sales to commercial alcohol sales (privatization).

The economic impact of heavy drinking in the U.S. is estimated at $249 billion.

The cost of the above number born by the government is $100.7 billion.

Breaking the costs of excessive alcohol consumption down by state and the District of Columbia, the median cost per state was $3.5 billion. Binge drinking was responsible for more than 70% of state costs and more than 40% of state costs were paid for by the government.
A Message from the Monroe County Coalition

By Susan Moore, Executive Director

The Monroe County Coalition (MCC) is a group of community members, agencies and leaders in the Florida Keys who work together to reduce underage drinking and other drug use by targeting the risk factors and local conditions that contribute to the consumption and consequences. MCC targets the risk factors and local conditions that contribute to the substance abuse through a multi strategy evidence based approach. MCC’s alcohol strategies include:

• “No One’s House is a Safe Place for Teen Drinking” campaign.
• Party Patrols implemented by law enforcement.
• Know the Law Booklet information dissemination to increase knowledge gain of Florida laws.
• Responsible Vendor Training to reduce youth retail access to alcohol.
• Retail store policies and signage; no sales to those under 21 years old.
• Compliance Check Operations implemented by law enforcement.
• Retail Merchant Recognition business certificates and recognition for establishments with no sales to minors.
• Evidenced Based Programs Collaborations with Guidance Care Center, Inc., Department of Juvenile Justice, Keys to Be the Change, Florida Keys Community College, St. Paul AME Church, Glad Tidings Church and others.

For more information on MCC, please email prevspec@aol.com or call 305-849-5929

STATISTICS

51.6% of Monroe County high school students who drank alcohol, consumed it at another person’s home within the past 30 days.

19.4% of Monroe County high school students reported someone purchased the alcohol for them within the past 30 days.

27.8% of Monroe County high school drinkers reported drinking in their own home within the past 30 days.

Source: Florida Youth Substance Abuse Survey 2016
3.0

FAMILY & FRIENDS

Information about suicide and children’s health
Suicide Awareness
A community perspective

By George Okpani

On a daily basis, several families consisting of men, women and children, are left behind to cope with the harsh reality of suicide. For the past decade, several accounts of suicide incidents have steadily increased throughout the State of Florida. Recent literature authored by health professionals have insisted that part of the reason for this increase in suicides, heavily points to the level of difficulty that is associated with detecting and preventing suicides from occurring.

Out of the entire State of Florida, Monroe County ranks number 1 in suicide death rates over the last 15 years. Monroe County’s death rate from 2000 to 2015 was 26.1 deaths per 100,000 population, whereas the state’s average was 14.9 (CHARTS, 2017).

In order to effectively address suicide as a serious health issue within the community; first it is important everyone understand how to differentiate between an individual who may be feeling suicidal in contrast to someone who may actually be at risk of committing suicide. In other words some people live day to day, with a passive notion of suicidal thoughts, but are not necessarily actively trying to commit suicide. Associative factors linked to suicide include anxiety, depression and allostatic load (the entire process that individuals engage in on a continuous basis to cope with their daily stress factors.)

All in all, people seldom realize the level of influence they emit on each other’s lives, let alone each other’s personal experiences. And usually it isn’t until we find ourselves in the midst of our most darkest hour, that we find ourselves forced to learn just how serious depression potentially can be. As a community, we must feel more comfortable with confronting in order to nurture change. Improving social skills through community encouragement and cultural understanding are some effective methods to bridging the gap and raising social awareness about the detrimental outcomes of chronic stress. Believe it or not, the right words hold great potential, but the right action will save lives.

SUICIDE PREVENTION LIFELINE
1.800.273-TALK (8255)
pres 2 for help in Spanish
press 1 for Veterans
Perinatal Mood Anxiety Disorder Program
The Florida Keys Healthy Start Coalition’s (FKHSC) innovative program provides education, screening, peer support groups, and resources to pregnant and postpartum women throughout the Keys. Perinatal mood and anxiety disorders (PMADs) are the most under-diagnosed, under-reported, and under-treated complication of pregnancy and childbirth — but affect 80% of women following childbirth. Twenty percent of pregnant or postpartum women suffer undiagnosed clinical depression and/or an anxiety disorder. The greatest risks for these women are lack of familial/social support and lack of referral to professional resources resulting in a longer course of symptoms and an inability to care for their newborn. Early recognition of symptoms is critical to a faster recovery. Treating symptoms during pregnancy as well as after childbirth, means an opportunity to set up a postpartum plan — an effective way to decreasing the likelihood or severity of a postpartum mood or anxiety disorder.

Keys to Kids’ Safety Program
FKHSC’s infant and child bicycle helmet program is an initiative under the broader Keys to Kids’ Safety program, which provides culturally competent safety education and outreach to those living and working in Monroe County. Items provided by our program include infant/child bicycle helmets, infant/child car and booster seats, infant/child bicycle seats, cribs and beds, water and home safety equipment, and other goods necessary to ensure infant and child safety in home environments and when traveling. Florida law requires every bike rider under 16 to wear a properly fitted and secured helmet, including children in a bicycle trailer or a bike seat. All bicycle riders should wear a helmet, including adults; after all, a parent is a child’s first teacher.

Fetal Alcohol Spectrum Disorders Program
Fetal Alcohol Spectrum Disorders (FASD) is a term used to describe a range of effects that may occur in a child whose mother drank alcohol during pregnancy. These effects can include physical, mental, behavioral, and/or learning disabilities. The Coalition has partnered with various municipalities in the Keys to create ordinances requiring establishments to post signage warning of the dangers of drinking while pregnant. The coalition also serves as a resource for FASD education, outreach, and referrals.

Water Safety Program
The FKHSC and the Florida Department of Health in Monroe County launched a Water Safety Initiative to keep Monroe County children safe in and around the water and to make pool safety a priority. Outreach efforts include: providing bilingual drowning prevention materials at all 476 of Monroe County’s active public pools and bathing places; posting water safety and drowning prevention signage at public pools and beaches; and speaking with local parents and caregivers about their child’s safety. The Coalition partners to educate families about the importance of drowning prevention measures and swim lesson options as well as sun safety/hyperthermia prevention. In 2016, nearly 400 Water Watcher kits were distributed to public and resort pools in the Keys. “Keep Your Eyes On The Kids” signs were posted at 15 public beaches at state, county, and municipal parks in the Keys. Currently, efforts are underway to compile a list of programs that can provide free or affordable swim lessons and to offer Red Cross Instructor training as well as Infant Swim Rescue Instructor training in Key West, Marathon and the Upper Keys. Florida leads the country in drowning deaths for children ages 1-4.

FLORIDA KEYS HEALTHY START COALITION
For more information, contact the group at 305-293-8424 or visit the website at KeysHealthyStart.org.
I first met my patient “Mary” lying on a gurney in the emergency room at the hospital. Mary is a vital and very active 72-year-old woman who was visiting from Minnesota. Mary was in the Keys visiting her daughter and the two of them rented bikes together. As they rode out on the Old Seven Mile Bridge, a child stopped suddenly in front of Mary and she swerved to her left to avoid an accident. The front wheel of her bicycle struck one of the heavy curbstone lane dividers and she fell heavily, causing a bad fracture of her left hip.

Look Into Bike Safety

Mary was in a fair amount of pain and as we spoke the nurse was starting an intravenous line in order to give her a dose of medicine. I'm an orthopedic surgeon and I recently began working here in the Florida Keys. I fix broken hips and kinds of fractures and injuries of bones and joints. People come to me after they tumble off of a boat, or fall in the kitchen, or missed a step at work, or a fall off their bicycle. Especially after a fall off their bicycles — in fact — Mary's accident was the fourth serious bicycle injury I dealt with in a single month.

Mary's surgery took three hours, during which I realigned her broken bones and installed a prosthetic hip. Fortunately, Mary's surgery went well and soon she was comfortable and safe in her room at Fishermen's Hospital, although she would face months of rehab to recover as much as possible.

Dr. Henry DeGroot III is a Board Certified Orthopedic Surgeon at Fishermen’s Community Hospital.
Getting to the root cause of bicycle accidents is not an easy task. Older, inexperienced riders — people who wouldn’t dream of getting on a bicycle in their home state, make up a significant proportion of bike riders in the Keys. Good infrastructure such as dedicated bike lanes and controlling bike-car interactions can have a very positive impact on injury rates. Pedestrianized areas — where only bikes and pedestrians are allowed — would also be a huge attraction in Key West and encourage people to bike and walk instead of using cars.

I am glad to report that impact of bicycle injuries and accidents on the health of the Keys community has not gone unnoticed by our government. The Florida Department of Health in Monroe County and the City of Key West continue to fight for more bike lanes and bike safety infrastructure, improved safety laws, increased safety helmet use and safer bicycle commuting. The City of Key West brought in transportation guru Chris Hamilton to take on the challenge of improving bicycle and pedestrian safety in the Southernmost City. Bike Florida awarded Key West a $25,000 Share the Road challenge grant to fund future improvements in bike safety. More detailed data on bike accidents is needed so we can focus our efforts where they can do the most good. We need to identify bike safety “hotspots” on our roads where there are an unusual number of bicycle accidents.

The City and County should leverage the power of social media to increase bike safety awareness and connect all the stakeholders. What would happen if Instagram users started posting photos of dangerous places for biking in the Keys using hashtag #Bikehazardkeywest or #Bikehazardmonroecounty? How about a bike safety hotline? This approach already works for reporting and fixing potholes, why can’t it work for bike safety?

Mary’s experience helped me understand how a bike accident can snowball into a major crisis, not just for the patient, but for the entire family. The Lower Keys is a great place to get out and bike, but ironically the more bikers we have on the roads the more serious accidents and even fatalities we are going to see. Much has been done to improve bike safety in the Keys and in Key West, but more is needed.
LEADING CAUSES OF DEATH

Smoking, strokes, heart disease and cancer
Researchers: Avoiding Tobacco is the Best Way to Avoid Disease

Getting adults to quit smoking and preventing kids from ever starting are the best defenses against heart disease, stroke and other diseases, according to a new study.

Experts’ rankings of the top 28 evidence-based preventive services that healthcare providers could offer were released in a study conducted by the National Commission on Prevention Priorities and published in the “Annals of Family Medicine.” Understanding the impact of these services can help patients, healthcare practices and policymakers put their time and money in the right places, the study authors found.

Smoking, the leading cause of preventable death in the U.S., kills about half a million Americans a year. More than 100,000 deaths annually could be prevented with smoking cessation and prevention, the authors said.

“Evidence indicates that receiving advice and help from a doctor can more than double the chance of smokers being successful at quitting,” said Michael Maciosek, senior research investigator and health economist at HealthPartners Institute for Education and Research in Minneapolis. “Trying until successful so that a patient can quit before a serious smoking-related disease sets in can extend quantity and quality of life and reduce healthcare costs.”

Working with HealthPartners Institute researchers, the National Commission on Prevention Priorities ranked each service based on its cost-effectiveness and how well it has been proven to prevent disease.

The tobacco recommendation and childhood immunizations all scored 10 out of a possible 10 on the authors’ scoring system.

## Top Priorities for Prevention

A new study ranks preventive services based on cost-effectiveness and relative health impact, with 10 being the highest score. The 28 services are listed in order of most clinically effective.

<table>
<thead>
<tr>
<th>Preventive Service Score</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childhood immunization</td>
<td>10</td>
</tr>
<tr>
<td>Tobacco use prevention for youth</td>
<td>10</td>
</tr>
<tr>
<td>Tobacco use screening and counseling for adults</td>
<td>10</td>
</tr>
<tr>
<td>Alcohol misuse screening and counseling</td>
<td>8</td>
</tr>
<tr>
<td>Aspirin chemoprevention for higher risk of cardiovascular disease</td>
<td>8</td>
</tr>
<tr>
<td>Cervical cancer screening</td>
<td>8</td>
</tr>
<tr>
<td>Colorectal cancer screening</td>
<td>8</td>
</tr>
<tr>
<td>Chlamydia and gonorrhea screening</td>
<td>7</td>
</tr>
<tr>
<td>Cholesterol screening</td>
<td>7</td>
</tr>
<tr>
<td>High blood pressure screening</td>
<td>7</td>
</tr>
<tr>
<td>Abdominal aortic aneurysm screening</td>
<td>6</td>
</tr>
<tr>
<td>Healthy diet, exercise counseling for higher risk of cardiovascular disease</td>
<td>6</td>
</tr>
<tr>
<td>HIV screening</td>
<td>6</td>
</tr>
<tr>
<td>HPV immunization</td>
<td>6</td>
</tr>
<tr>
<td>Flu immunization for adults</td>
<td>6</td>
</tr>
<tr>
<td>Obesity screening for adults</td>
<td>6</td>
</tr>
<tr>
<td>Syphilis screening</td>
<td>6</td>
</tr>
<tr>
<td>Vision screening for children</td>
<td>6</td>
</tr>
<tr>
<td>Breast cancer screening</td>
<td>5</td>
</tr>
<tr>
<td>Depression screening for adolescents</td>
<td>5</td>
</tr>
<tr>
<td>Depression screening for adults</td>
<td>5</td>
</tr>
<tr>
<td>Obesity screening for children, adolescents</td>
<td>5</td>
</tr>
<tr>
<td>Pneumococcal immunization for adults</td>
<td>5</td>
</tr>
<tr>
<td>Herpes zoster immunization</td>
<td>4</td>
</tr>
<tr>
<td>Osteoporosis screening</td>
<td>4</td>
</tr>
<tr>
<td>Folic acid chemoprevention</td>
<td>3</td>
</tr>
<tr>
<td>Meningococcal immunization</td>
<td>2</td>
</tr>
<tr>
<td>Tdap (tetanus-diptheria-pertussis)/Td booster</td>
<td>2</td>
</tr>
</tbody>
</table>

Get Smart About Stroke

Every 40 seconds in America someone has a stroke.

Every four minutes, someone dies of one.

But those statistics are not as grim as they could be. The number of people who die from stroke each year has declined dramatically in the past 30 years, thanks to the widespread use of blood pressure and cholesterol medications.

Still, stroke remains the leading cause of disability in the U.S. It’s affecting greater numbers of younger people (about a quarter of all strokes occur in those under 65). And only about 30% of the victims recognize the symptoms and get to the hospital in time to receive the brain-saving, clot-busting medication tPA.

Many are familiar with the FAST acronym, a call to action when a stroke is suspected. Recently, the Cleveland Clinic added BE.

BEFAST

Balance difficulties | Loss of (eye) vision | Facial weakness | Arm weakness | Speaking difficulties | Time to call 911

90% of all strokes are preventable.
Heart Disease Quiz

Heart disease is a serious medical condition, but knowing how to prevent or manage heart disease can help save your life or the life of someone you love. Test your knowledge about heart disease with seven quick questions:

1. True or false? Heart disease is the second leading cause of death in the United States. True / False?

2. Having high blood pressure, having high cholesterol, and smoking tobacco all increase your risk for heart disease. Health care professionals call these "risk factors." True / False?

3. How many American adults have at least 1 of the above 3 risk factors for heart disease?
   A) 24%
   B) 37%
   C) 47%
   D) 76%

4. How many Americans will have a heart attack for the first time this year?
   A) Less than 50,000
   B) 100,000
   C) 500,000
   D) More than 600,000

5. You have a better chance of surviving a heart attack if you know the warning signs. Which of these is a warning sign of a heart attack?
   A) Pain or discomfort in the jaw, neck, or back.
   B) Shortness of breath.
   C) Feeling weak, light-headed, or faint.
   D) All of the above.

6. Heart disease can run in a family. True / False?

7. By making healthy choices, you can help lower your risk for heart disease. Which one of these is not part of a healthy lifestyle?
   A) Being physically active.
   B) Taking medicine prescribed by your doctor.
   C) Smoking.
   D) Eating a healthy diet.

Can a stroke be prevented?
You can take several steps to reduce your risk for heart disease:
• Don’t smoke.
  www.cdc.gov/tobacco
• Maintain a healthy weight.
  www.cdc.gov/healthyweight/index.html
• Eat a healthy diet.
  www.cdc.gov/healthyweight/healthy_eating/index.html
• Exercise regularly.
  www.cdc.gov/physicalactivity/index.html
In calculating age-adjusted death rates by census tract for the years 2010-14, several census tracks showed elevated rates of deaths due to cancer compared with previous years. Specifically, micro-communities in Marathon and Key West had unusually high rates of cancer deaths. There are several possible explanations as to why these unusually high rates may have occurred, so additional information was gathered in order to complete the picture of what is happening with cancer in these communities as well as the rest of the Keys. Monroe County’s previous 2015 Community Health Improvement Plan looked at the death rates from 2008-2012. During that period, Monroe County’s death rate due to cancer was on par with the State of Florida at a rate of 1.62 deaths out of 1,000 population for both. Since that time, Florida’s rate of death due to cancer has decreased slight to 1.59 deaths out of 1,000 population for the years 2010-2014, whereas Monroe County has seen an increase in cancer deaths, now having a death rate of 1.7 deaths due to cancer out of 1,000 people.

As of 2013, Monroe County ranks 8th in Florida for highest cancer rates with an incidence rate of 5.96 cancer diagnoses out of 1,000 population. In contrast, statewide Florida’s cancer incidence rate is 3.7 out of 1,000 population.

The incidence of cancer in Monroe has been sharply increasing since 2008, while Florida overall has been decreasing. Why? While the data available can help portray a better picture of what the possible reason may be, these are only educated guesses that would need controlled scientific studies to confirm the actual cause. One possible explanation could simply be better reporting from medical professionals and better surveillance of the disease, leading to more reported cases rather than an actual increase in disease incidence. However, if this were the case, it would suggest either that Monroe County cancer rates have always been significantly higher than Florida or Monroe County’s surveillance system is becoming much more sensitive to picking up diagnoses than those statewide.

Data about the population in Monroe and behavioral risk factors associated with cancer, however, point to the possibility that changes in these areas may be responsible for the increases in cancer diagnoses. For example, data shows individuals reporting having a balanced diet has been decreasing since 2002 and those engaging in heavy or binge drinking has been slight increasing since 2007. Both of these risk factors have been show to be linked to certain types of cancer, although this would likely not account for all the increases. The most significant change seen during this time period in the population in Monroe County is a sharp increase in individuals living below the poverty level. Research has shown that low socioeconomic status is strongly linked to higher incidence of many adverse health conditions including cancers.

Most lethal cancers in Monroe County

<table>
<thead>
<tr>
<th>Cancer Site</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trachea, Bronchus and Lung</td>
<td>25.4%</td>
</tr>
<tr>
<td>Breast</td>
<td>7.3%</td>
</tr>
<tr>
<td>Colon</td>
<td>6.5%</td>
</tr>
<tr>
<td>Pancreas</td>
<td>5.6%</td>
</tr>
<tr>
<td>Prostate</td>
<td>4.6%</td>
</tr>
<tr>
<td>Liver*</td>
<td>4.1%</td>
</tr>
<tr>
<td>Bladder</td>
<td>3.6%</td>
</tr>
<tr>
<td>Rectal</td>
<td>2.9%</td>
</tr>
<tr>
<td>Ovarian</td>
<td>2.6%</td>
</tr>
<tr>
<td>Esophageal</td>
<td>2.4%</td>
</tr>
</tbody>
</table>

* not including liver cirrhosis

Source: Florida Health Charts, Monroe County Residents 2010-2014
# Recommended Cancer Screenings by Age

<table>
<thead>
<tr>
<th>Age</th>
<th>Colon Cancer</th>
<th>Lung Cancer</th>
<th>Breast Cancer</th>
<th>Cervical Cancer</th>
<th>Prostate Cancer</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Men/Women</td>
<td>Men/Women</td>
<td>Women</td>
<td>Women</td>
<td>Men</td>
</tr>
<tr>
<td>20-29</td>
<td></td>
<td></td>
<td>Begin testing only if high risk (family history)</td>
<td>Pap test every 3 years; HPV tests should not be done unless a Pap test is abnormal</td>
<td></td>
</tr>
<tr>
<td>30-39</td>
<td></td>
<td></td>
<td>Perform monthly breast exams for any physical changes</td>
<td>Age 40-44, may choose to begin annual mammogram.</td>
<td>Starting at age 45, men at high risk should talk to their doctor about risk to determine if testing is needed (e.g. African-American men with close family members who had prostate cancer before age 65)</td>
</tr>
<tr>
<td>40-49</td>
<td></td>
<td></td>
<td>Age 45-54 women should get mammogram every year.</td>
<td>Age 45-54 women should get mammogram every year.</td>
<td>Beginning at age 30, Pap test and HPV test every 5 years, or continue tests every 3 years.</td>
</tr>
<tr>
<td>50-64</td>
<td></td>
<td></td>
<td>Age 55, switch to getting a mammogram every 2 years, or continue them every year.</td>
<td>No testing is needed</td>
<td>Starting at age 50, all men at average risk should talk to their doctor about risk to determine if testing is needed. Testing includes prostate-specific antigen (PSA) blood test, Transrectal ultrasound, biopsy, etc.</td>
</tr>
<tr>
<td>65 or older</td>
<td>Testing is recommended (e.g. sigmoidoscopy, colonoscopy, barium enema, fecal occult blood test, etc)</td>
<td>Talk with your doctor if you should continue getting mammograms</td>
<td>No testing is needed</td>
<td>If there is a history of cervical pre-cancer, continue testing for 20 years.</td>
<td></td>
</tr>
</tbody>
</table>

Heart disease is the leading cause of death in the United States. In Florida and the Florida Keys, however, cancer is at the top of the list. The good news is, if the cancer is found early, there is a better chance of successful treatment and a greater chance of controlling it or even curing it. That’s why cancer screening is so important.
COMMUNITY SUMMARIES

Public health survey results for Key Colony Beach, Eastern Marathon, Stock Island and Bahama Village

**Principal Investigators:**
- Alison Morales Kerr
- George Okpani

**Assistant Survey Analyst:**
- Suzette Frey
Key Colony Beach community summary

(176 respondents)

TOP 5 CONCERNS

1. None*
2. Limited access to health care
3. Pests (mosquitoes, iguanas, etc.)
4. Street infrastructure / crime safety (tie)
5. Affordable housing

CANCER CONCERNS

Do you support smoke-free apartment buildings/condos? Y 89.1% N 10.9%
Do you think it is important to check your skin on a routine basis? Y 97.1% N 2.9%
Do you schedule routine checks for colorectal, breast and/or cervical cancer? Y 82.9 N 17.1%

HEART & LIVER HEALTH

More than 90% of respondents believe they cook healthy meals at home. Reasons for not cooking healthy meals included not enough time, too expensive, lack of expertise. More than 95% of respondents understand the correlation between alcoholic beverages and cirrhosis of the liver.

COMMUNITY AWARENESS

About half of the respondents (57.1%) were aware they could call the Florida Keys Mosquito Control District to report mosquito issues and receive a free consultation. About the same number of respondents (58.3%) checked around the home for standing water or potential breeding sites on a regular basis. Only half the respondents (53.4%) knew they could call the Sheriff’s Office to have them investigate vehicles with expired and missing tags. About the same number (48.9%) know the agency will dispose of prescriptions and over-the-counter meds in a safe manner. Finally, the majority of respondents (61.1%) know about the Sheriff’s Trauma Star service — a free air ambulance for Keys residents.

“The Key Colony Beach police are very nice.” — a survey response

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* Most Key Colony Beach respondents said they had no issues or complaints to report.
Marathon community summary
(274 respondents from 70th Street to Grassy Key)

TOP 5 CONCERNS

1. Affordable Housing
2. Homeless
3. Traffic
4. Limited access to health care
5. Pests (rats, mosquitoes, etc.)

“THERE IS A NEED FOR SWIM LESSONS IN THE AREA.”
— a survey response

CANCER CONCERNS

Do you support smoke-free apartment buildings/condos? Y 82.4% N 17.6%
Do you think it is important to check your skin on a routine basis? Y 92.6% N 7.4%
Do you schedule routine checks for colorectal, breast and/or cervical cancer? Y 65.7 N 34.3%

DRUGS & ALCOHOL

More than 66% of respondents believe that drug activity is an issue in Marathon. About half (51.1%) are aware they can make anonymous tips to report suspicious activities.

87.8% of respondents believe a community swimming pool would benefit Marathon.

COMMUNITY AWARENESS

Most respondents (71.7%) were aware they could call the Florida Keys Mosquito Control District to report mosquito issues and receive a free consultation. About the same number of respondents (62.3%) checked around the home for standing water or potential breeding sites on a regular basis. About half the respondents (60.1%) knew they could call the Sheriff’s Office to have them investigate vehicles with expired and missing tags. About the same number (56.2%) know the agency will dispose of prescriptions and over-the-counter meds in a safe manner.
Stock Island community summary
(379 respondents)

TOP 5 CONCERNS

1. Street trash & littering
2. Drug sales & trafficking
3. Homeless
4. Street infrastructure / pests (tie)
5. Teen pregnancy

HEART HEALTH

Do you take blood pressure medication? Y 30.9% N 69.1%
Do you feel there are adequate exercise facilities on Stock Island? Y 35.8% N 64.2%
Do you exercise outside of work? Y 55.1% N 44.9%

CANCER CONCERNS

About 81% of Stock Island residents believe that buildings and condo should be smoke-free, and 78.1% say they support tobacco-free community events.
About 41% of residents have an occupation that requires them to be outside in the sun for extended period of time. About 78% check their skin regularly for marks or irregularities.
Residents are divided almost evenly when it comes to whether or not they schedule routine checks for colorectal, breast or cervical cancer.

“I WOULD LIKE STOCK ISLAND TO BE BEAUTIFUL AND CLEAN.”
— a survey response

71% of Stock Island residents believe drug activity is an issue.

COMMUNITY AWARENESS

More than 77% of respondents believe that trash, littering and debris is an issue on Stock Island.
Only 51% are aware they can call Waste Management to pick up bulk waste such as appliances, tires and mattresses for free. About 47% of residents know about the anonymous tip line to report suspicious activity, including drugs. About 60% know the law requires children 16 and under to wear a helmet when riding a bicycle or being transported in a bicycle trailer.
Bahama Village community summary
(345 respondents)

Top 5 Most Improved Issues between 2012 and 2017

1. Improved services/community centers for youth or seniors; improved street lighting at night; and improved drug trafficking (3-way tie)
2. Improved housing in disrepair/property upkeep
3. Improved crime
4. Improved recreational facilities or parks
5. Improved police service; trash / littering (tie)

SURVEY COMPARISON

The Florida Department of Health in Monroe County conducted a CHIP survey in the Bahama Village neighborhood in 2012. Following are how respondents judged whether issues improved, got worse, remained the same or cannot answer.

Activities for children
- IMPROVED 27.9%
- SAME 38.5%
- WORSE 22.1%
- CANNOT ANSWER 11.5%

Parking
- IMPROVED 16.7%
- SAME 35.5%
- WORSE 43.2%
- CANNOT ANSWER 4.6%

Drug trafficking & sales
- IMPROVED 38.6%
- SAME 36.5%
- WORSE 9.6%
- CANNOT ANSWER 15.4%

Trash & littering
- IMPROVED 33.9%
- SAME 45.5%
- WORSE 14.5%
- CANNOT ANSWER 6.1%

Police harassment
- IMPROVED 18.3%
- SAME 39.7%
- WORSE 18.8%
- CANNOT ANSWER 23.2%

Neighborhood upkeep/ housing
- IMPROVED 43.8%
- SAME 42.6%
- WORSE 7.2%
- CANNOT ANSWER 6.4%

Poor street lighting
- IMPROVED 28.5%
- SAME 51.8%
- WORSE 9.7%
- CANNOT ANSWER 10%

42% of Bahama Village residents agree government officials respond to the community’s issues.

52% of Bahama Village residents support smoke-free apartment buildings and condos.
COMMUNITY GOALS AND STRATEGIES
GOAL: INCREASE THE NUMBER OF CLIENTS WHO RECEIVE PRIMARY CARE SERVICE

- Limited access to care was the second leading concern in Key Colony Beach with 35 residents specifically identifying this out of 287 survey respondents. About 22% of Monroe County residents are also uninsured as compared to the statewide average of 20%.
- Aligns with SHIP Strategy AC2.2.
- **Strategy:** Engage in community outreach and mobilization to educate residents on existing and affordable healthcare services in their area.
- **Key Partners:** Health providers, such as Rural Health Network Monroe County, Community Health, Inc., Womankind, and The Good Health Clinic; and local media outlets.
- **Objective:** By December 2022, decrease the percentage of adults who could not see a doctor at least once in the past year due to cost from 28% to 20.8%. About 28% of Monroe County residents could not see a doctor at least once in the past year due to cost versus the State average of 21% (BRFS, 2013).
- **Tactic:** Educate Monroe County residents, with an emphasis in residents who either do not have health insurance or are underinsured about existing healthcare services that are affordable or free in their area.

GOAL: DECREASE DISEASE CARRYING ORGANISM POPULATION TO PREVENT INFECTIOUS ILLNESSES

- Pests, such as iguanas and mosquitoes, was the third leading concern among Key Colony Beach residents. About 43% of residents did not know that they could call Florida Keys Mosquito Control to report mosquitoes or potential mosquito breeding sites and they can visit the property to address the situation for free. Also, only 42% of residents do not regularly check their property, especially after it rains for standing water.
- Aligns with SHIP Strategy HP1.2.
- **Strategy:** Engage in community outreach and mobilization to educate residents on the importance of controlling the mosquito and iguana population.
- **Key Partners:** Florida Keys Mosquito Control District, Monroe County Board of County Commissioners, US Naval Branch Clinic, private pest control companies, local media outlets, local volunteers.
- **Objective:** By December 2022, increase the number of residents and visitors reached regarding the importance of draining and covering to prevent mosquito breeding. By December 2022, provide residents with educational information regarding the control of iguanas and how to prevent iguana infestations.
- **Tactic:** Educate Monroe County residents via local media outlets, social media, community events, and door-to-door on draining standing water and free inspections by Florida Keys Mosquito Control District. Educate Monroe County residents via media outlets, social media, and community events, regarding actions they can take to ensure iguanas do not breed in and around their property.
GOAL: REDUCE INJURY DEATHS AND INJURY INCIDENCES IN MONROE DUE TO BIKE ACCIDENTS
· Bike safety is an important public health issue in Marathon where 52% of survey respondents say that it is not safe to bike around Marathon and 32% were not aware of Florida’s bike helmet law whereby children under the age of 16 are required to wear a helmet when riding a bicycle. Bike safety was also the sixth leading public health concern according to residents of Marathon.
· Aligns with SHIP Goal HP2 Prevent and reduce illness, injury and death related to environmental factors.
· Strategy: Engage in community outreach and mobilization to reduce injuries related to bicycles.
· Key partners: Monroe County BOCC, Monroe County Sheriff’s Office, Key West Police Department, City of Key West, bike rental and retail stores.
· Objective: By December 2022, decrease the average Age Adjusted Five-Year Death Rate due to pedal bicycle accidents (FLCHARTS 2010-2014 shows Monroe County Death Rate was 1.5 versus FL Average of 0.5 per 100,000 population).
· Tactic: Educate community partners on bike fatality rate as compared to the State. Participate in City of Key West Bicycle Pedestrian Master Plan meetings and surveys.

GOAL: REDUCE DROWNING DEATH RATE
· About 34% of Marathon residents, according to the department’s recent survey findings, do not conduct routine checks for cancer. About 48% of those who do not conduct these checks say they have no way to pay for the visit. Limited access to care was also the fourth leading concern in Marathon; 45 out of 274 specifically mentioned this issue.
· Aligns with SHIP Strategy AC2.2
· Strategy: Engage in community outreach and mobilization to educate residents on existing and affordable healthcare services in their area.
· Key Partners: Health providers, such as Rural Health Network Monroe County, Community Health, Inc., Womankind, and The Good Health Clinic; and local media outlets.
· Objective: By December 2022, decrease the percentage of adults who could not see a doctor at least once in the past year due to cost from 28% to 20.8%. About 28% of Monroe County residents could not see a doctor at least once in the past year due to cost versus the State average of 21% (BRFSS, 2013).
· Tactic: Educate Monroe County residents, with an emphasis in residents who either do not have health insurance or are underinsured about existing healthcare services that are affordable or free in their area.

Marathon
Goals & Strategies

GOAL: INCREASE THE NUMBER OF CLIENTS WHO RECEIVE PRIMARY CARE SERVICES
· About 34% of Marathon residents, according to the department’s recent survey findings, do not conduct routine checks for cancer. About 48% of those who do not conduct these checks say they have no way to pay for the visit. Limited access to care was also the fourth leading concern in Marathon; 45 out of 274 specifically mentioned this issue.
· Aligns with SHIP Strategy AC2.2
· Strategy: Engage in community outreach and mobilization to educate residents on existing and affordable healthcare services in their area.
· Key Partners: Health providers, such as Rural Health Network Monroe County, Community Health, Inc., Womankind, and The Good Health Clinic; and local media outlets.
· Objective: By December 2022, decrease the percentage of adults who could not see a doctor at least once in the past year due to cost from 28% to 20.8%. About 28% of Monroe County residents could not see a doctor at least once in the past year due to cost versus the State average of 21% (BRFSS, 2013).
· Tactic: Educate Monroe County residents, with an emphasis in residents who either do not have health insurance or are underinsured about existing healthcare services that are affordable or free in their area.
IN MONROE COUNTY

- Monroe County leads the State in drowning death rates. About 27% of all drowning deaths in Monroe County took place in the Middle Keys. It is important for children and adults who do not know how to swim to learn now and educate our community on drowning prevention. Facilities to teach people how to swim are limited, therefore it is important for community partners to participate in drowning prevention initiatives.
- Aligns with SHIP Goal HP2.
- **Strategy:** Engage in community outreach and mobilization to reduce drowning.
- **Key partners:** Florida Keys Healthy Start Coalition, Monroe County Fire Rescue, Monroe County Sheriffs Office, and Florida Sunshine Title.
- **Objective:** By December 2022, decrease average Age Adjusted Five-Year Death Rate due to drowning (FLCHARTS 2010-2014 shows Monroe County had 6.3 per 100,000 population compared to FL Average, 2.4 per 100,000).
- **Tactic:** Collaborate with Florida Keys Healthy Start Coalition and Monroe County Fire Rescue to provide Drowning Prevention education to residents via regular meetings to regarding drowning awareness and marketing.

GOAL: REDUCE SKIN CANCER DEATH RATE IN MONROE COUNTY

- Monroe County sees twice as many deaths due to melanoma than the statewide average. The incidence rate for melanoma is also higher than the statewide average.
- Aligns with State Health Improvement Plan Goal CD 3.
- **Strategy:** Engage in community outreach, mobilization, and media advocacy to reduce skin cancer death rates among residents.
- **Key Partners:** City of Marathon Parks and Recreation, local media outlets, and local doctors offices.
- **Objectives:** By December 2022, reduce the average age-adjusted skin cancer death rate. (FLCHARTS 2010-2014 shows Monroe County had 3.4 per 100,000 population compared to FL Average, 3.2 per 100,000).
- **Tactic:** Present skin cancer issue to target audiences and solicit issue-focused media.

GOAL: REDUCE ALCOHOLIC LIVER DISEASE DEATH RATE IN MONROE COUNTY

- Monroe County has the highest percentage of binge drinkers, the highest alcoholic liver disease death rate, and the highest chronic liver disease and cirrhosis death rate, as compared to other counties in the State of Florida. When comparing census tracts, the Marathon Airport Area has among the highest chronic liver disease death rates.
- Aligns with State Health Improvement Plan Goal CD 3.
- **Strategy:** Increase knowledge surrounding risks and harm related to alcoholic liver disease and cirrhosis of the liver among adults and youth in Monroe County through community outreach, mobilization and media advocacy.
- **Key Partners:** Monroe County Coalition, Monroe County Sheriffs Office, Key Colony Beach Police Department, and Key West Police Department.
- **Objectives:** By December 2022, decrease the adult heavy alcohol use or binge drinking percentage in Monroe County from 26% to 23% (State of FL Average 17%, BRFSS, 2013).
- **Tactics:** Solicit issue-focused media regarding the causes and symptoms of cirrhosis of the liver and alcoholic liver disease and collaborate with Monroe County Coalition on alcohol abuse via strategic planning.

GOAL: REDUCE HEART DISEASE DEATH RATE IN MONROE COUNTY

- Regular physical activity and healthy eating are the most effective strategies to reduce heart disease. Marathon has multiple community parks that residents enjoy, however, some parks, according to the departments recent survey, are being underutilized.
- Aligns with State Health Improvement Plan Goal CD 3.
- **Strategy:** Advocate with decision-makers about the importance of physical activity and healthy eating habits by promoting Healthiest Weight Florida ideals and branding.
- **Key Partners:** City of Marathon, Monroe County BOCC, and local media outlets (The Citizen).
- **Objectives:** By December 2022, decrease the percentage of adults who report no leisure-time physical activity (Monroe County: 21%; Top US Performer 20%, County Health Rankings and Roadmaps).
- **Tactics:** Present physical activity health issue to target audiences by increasing awareness of parks and recreational activities through Motion on the Ocean, public parks directory. Meet with decision makers to educate on the importance of including in the master plan parks that are multigenerational.
GOAL: REDUCE INJURY DEATHS AND INJURY INCIDENCES IN MONROE COUNTY DUE TO BIKE ACCIDENTS

- Bike safety is an important public health issue, particularly in Stock Island where only 54% of the population feel safe to ride around Stock Island and 53% feel it is safe to bike to Key West. In addition, only 60% of that population were aware of the bike helmet law.
- Aligns with CHIP Goal HP2.
- **Strategy**: Engage in community outreach and mobilization to reduce injuries related to bicycles.
- **Key partners**: Monroe County BOCC, Monroe County Sheriff’s Office, Key West Police Department, City of Key West, bike rental and retail stores.
- **Objective**: By December 2022, decrease the average Age Adjusted Five-Year Death Rate due to pedal bicycle accidents (FLCHARTS 2010-2014 shows Monroe County Death Rate was 1.5 versus FL Average of 0.5 per 100,000 population).
- **Tactic**: Educate community partners on bike fatality rate as compared to the State. Participate in City of Key West Bicycle Pedestrian Master Plan meetings and surveys.

GOAL: REDUCE TEEN PREGNANCIES IN STOCK ISLAND

- Stock Island has the highest number of teen pregnancy cases every year since 2010 as compared to Monroe County’s other micro-communities. Teen pregnancy was also the fifth leading public health concern in their community; 63 residents out of 379 specifically mentioned this issue based on the department’s survey findings.
- Aligns with SHIP Strategy AC5.1 Raise awareness among providers and consumers on the importance and benefits of being healthy prior to pregnancy.
- **Strategy**: Engage in community outreach and mobilization to reduce teenage pregnancies.
- **Key partners**: Monroe County School District, Keys to Be the Change, not-for-profit youth support groups, and parents of young adults.
- **Objective**: By December 2022, decrease the annual average of fetal deaths plus live births from 4.7 to 1.3. Between 2010 and 2015, Stock Island had an average of 4.7 fetal deaths plus live births every year, while Monroe County’s average was 1.3 for the same years.
- **Tactic**: Educate community partners on teenage pregnancy rate in Monroe County as compared to the micro-community of Stock Island by conducting a presentation at SHAC and Children’s Group meeting.

GOAL: INCREASE THE NUMBER OF CLIENTS WHO RECEIVE PRIMARY CARE SERVICES

- Limited access to healthcare was the eighth leading public health concern in Stock Island. Among 305 residents in Stock Island, 50% do not schedule routine checks for cancer. About 39% of those who do not schedule routine checks for cancer say the reason they do not perform these checks is because they do not have a doctor and 31% say there is no way to pay.
- Aligns with SHIP Strategy AC2.2.
- **Strategy**: Engage in community outreach and mobilization to educate residents on existing and affordable healthcare services in their area.
- **Key Partners**: Health providers, such as Rural Health Network Monroe County, Community Health, Inc., Womankind, and The Good Health Clinic; and local media outlets.
- **Objective**: By December 2022, decrease the percentage of adults who could not see a doctor at least once in the past year due to cost from 28% to 20.8%. About 28% of Monroe County residents could not see a doctor at least once in the past year due to cost versus the State average of 21% (BRFS, 2013).
- **Tactic**: Educate Monroe County residents, with an emphasis in residents who either do not have health insurance or are underinsured about existing healthcare services that are affordable or free in their area.

GOAL: DECREASE DISEASE CARRYING ORGANISM POPULATION TO PREVENT INFECTIOUS ILLNESSES

- Pests, such as mosquitoes, was the 4th leading concern among Stock Island residents. The presence of pests can also be exacerbated by the presence of trash and littering. Street trash and littering was the biggest concern that people had in Stock Island. About 11% of respondents say that pests are an issue while 78% feel that street trash and littering are issues in Stock Island.
- Aligns with SHIP Strategy HP1.2.
- **Strategy**: Engage in community outreach and mobilization to educate residents on the importance of controlling the mosquito population.
- **Key Partners**: Florida Keys Mosquito Control District, Monroe County Board of County Commissioners, Waste Management, local media outlets, local volunteers.
- **Objective**: By December 2022, increase the number of residents and visitors reached regarding the importance of draining and covering to prevent mosquito breeding.
- **Tactic**: Educate Monroe County residents via local media outlets, social media, community events, and door-to-door on draining standing water and free inspections by Florida Keys Mosquito Control District.
In 2012, the Florida Department of Health conducted a comprehensive community health assessment to identify the community’s needs. Partners and residents of Bahama Village joined forces to help address some of these community-identified issues. The department would like to highlight the following partners who have made significant efforts at improving the infrastructure and well-being of Bahama Village.

Clayton Lopez, District VI Commissioner and Vice Mayor, provided the department and the City of Key West invaluable guidance, leadership, and commitment to the community. Several improvements in Bahama Village were made with his help, the help of the Bahama Village Redevelopment Advisory Committee, and City of Key West Commissioners and staff members. One of the most significant accomplishments includes the renovation of Nelson English and Willie Ward Parks, completed August 2015, which provides safe and fun-filled venues for physical activity for those of all ages.

The Community Redevelopment Area for Bahama Village provides Tax Increment Funds to eliminate blight among other objectives. For three consecutive years, 2012-2014, Habitat for Humanity was awarded a total of $221,000 to perform repair work on senior housing based on income levels requirements. The scope of work done ranged from major structural work involving critical home repairs to exterior paint jobs. The community indicated in the department’s 2012 survey that “Housing in Disrepair,” was a major concern. Data from our post-evaluation shows that Housing in Disrepair was the most improved among all community-identified issues. About 44% of residents feel that it has improved due to the work of Habitat for Humanity.

“The impact of the Brush With Kindness repairs are many fold; the owner, their family, the immediate neighbors and the larger community see and feel the difference where the old and dilapidated are no longer and the new coat of paint shouts, ‘Look at me, someone cares!’ said Mark Moss, executive director of Habitat for Humanity of Key West and Lower Florida Keys. “The volunteer model in a repair program works due to the connection and sense of giving back that occurs between owners and their families and the volunteers. The results are tangible. And the beneficiary reminds us all that we must learn to receive in order to truly give.”

Frederick Douglass School Black Educators’ Memorial Project was facilitated by Dr. Virginia Irving and co-facilitated by Mechelle Burgohy, John Wilson Smith and Detra Fisher. The Frederick Douglass School Black Educators’ Memorial Project, Inc. provides the youth of Bahama Village and surrounding areas enriching and educational spring and summer camps as well as the annual Venora P. Mingo Family Festival of Reading. Florida Department of Health employees also volunteered with the camps by providing public health educational sessions, physical activity sessions, and healthy art sessions. With the help of the Douglass educators, 30% of the community feels that activities for children have improved.

The Key West Police Department has made many important strides to ensure the safety of the residents and visitors. With their efforts, the community feels that drug trafficking and drug sales, a former major concern in Bahama Village from 2012 and before, has improved. In fact, 39% of residents feel that the situation has improved.
Community health assessments are important tools in identifying hindrances to living a healthy life. Through professional training and experience and with the aid of assessment tools, we are now able to develop a systematic approach in assessing the health needs of a community. This approach uses evidence-based methods to commissioning and planning health services and improving the built environment to promote health. One such project that is currently in progress at the Florida Department of Health in Monroe County (FDOH-Monroe) is the Protocol for Assessing Community Excellence in Environmental Health (PACE-EH).

In early September 2012, the FDOH-Monroe began integrating PACE-EH as part of the department’s Community Health Improvement Plan. PACE-EH is a nationally recognized evidence-based tool that has been used for over 10 years across the country to combat social inequities, dissolve health disparities, and improve the overall health and well-being of a community. The PACE-EH methodology was developed by the National Association of County and City Health Officials and the Centers for Disease Control. Thus far, significant results were found to improve the overall health of a community in need with the utilization of the PACE-EH protocol (NACCHO, 2008). The protocol has thirteen steps (See PACE-EH Methodology chart). In summary, the steps involve researching the community of interest, an assessment of community-identified health problems, the creation of a steering committee, prioritization of health issues, execution of action plans, and an evaluation. The project is also designed to create and establish stronger partnerships among local agencies and organizations while engaging and empowering the residents to participate and take initiative.

**PACE-EH 13-step methodology**

<table>
<thead>
<tr>
<th>Step</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Determine community capacity</td>
</tr>
<tr>
<td>2</td>
<td>Define/characterize the community</td>
</tr>
<tr>
<td>3</td>
<td>Assemble a team</td>
</tr>
<tr>
<td>4</td>
<td>Define the goals, objectives and scope</td>
</tr>
<tr>
<td>5</td>
<td>Generate list of EH issues</td>
</tr>
<tr>
<td>6</td>
<td>Analyze issues with systems framework</td>
</tr>
<tr>
<td>7</td>
<td>Develop indicators</td>
</tr>
<tr>
<td>8</td>
<td>Select standards</td>
</tr>
<tr>
<td>9</td>
<td>Create issue profiles</td>
</tr>
<tr>
<td>10</td>
<td>Rank issues</td>
</tr>
<tr>
<td>11</td>
<td>Set priorities for action</td>
</tr>
<tr>
<td>12</td>
<td>Develop action plan(s)</td>
</tr>
<tr>
<td>13</td>
<td>Evaluate progress and plan for the future</td>
</tr>
</tbody>
</table>
Monroe County is comprised of 22 unique micro-communities defined by FDOH-Monroe to allow an ideal setting to implement this protocol to its most effective capacity. The pilot project was conducted in Bahama Village and completed the PACE-EH process on February 2017. The results of the post-assessment and evaluation are promising; highlights are mentioned on page 35 of this report. The department is implementing PACE-EH and currently working with community partners in three other micro-communities, Stock Island, Marathon, and Key Colony Beach. Progress is depicted in the graphic below. The department hopes to integrate PACE-EH into all 22 Florida Keys micro-communities to help improve the health and well-being of Monroe County, one micro-community at a time.

<table>
<thead>
<tr>
<th>MICRO-COMMUNITY</th>
<th>PACE-EH STEPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bahama Village</td>
<td>13</td>
</tr>
<tr>
<td>Stock Island</td>
<td>5</td>
</tr>
<tr>
<td>Marathon</td>
<td>7</td>
</tr>
<tr>
<td>Key Colony Beach</td>
<td>5</td>
</tr>
</tbody>
</table>

Why PACE–EH was selected for Monroe County instead of MAPP

Consisting of a chain of islands that span approximately 120 miles and five municipalities, Monroe County has among the most unique geographies in Florida. Each micro-community in Monroe County not only has unique geographies, but they also have unique demographic backgrounds, socioeconomic statuses, and health statuses. DOH-Monroe has considered implementing the tool, MAPP (Mobilizing for Action through Planning and Partnerships), however due to its limited community reach and limited focus on tactical public health issues, the department decided on opting for the PACE-EH methodology. PACE-EH allows Florida Keys residents in each micro-community of focus to develop their own locally relevant indicators that are appropriate for their unique community, thereby driving the health improvement process. (See figure for a visual understanding of the difference between MAPP and PACE-EH.)

MAPP and PACE-EH Parallel

MAPP and PACE-EH can be thought of as a parallel process. The figure shows how MAPP phases are reflected in the PACE-EH process. The only exception is the NPHPS (National Public Health Performance Standards), which measures the extent to which the local public health system is providing essential public health services.
Founders Park in Islamorada is considered one of the jewels in the Upper Keys. It regularly hosts community events such as fairs and festivals. Besides a spectacular swimming beach, the park also has a pool, tennis courts and a small marina.
UPPER KEYS

Micro-community health profiles from Ocean Reef to Islamorada MM 126 to MM 74

20,619 residents or about 27.4% of the entire Monroe County population of 75,191
North Key Largo & Ocean Reef

1,270
POPULATION

White Non-Hispanic / 85.6%  Black Non-Hispanic / 4.0%  Hispanic / 9.2%

POPULATION BY RACE & ETHNICITY

35-49: 9.3%
50-64: 28.1%
65+: 47.0%

POPULATION BY AGE & SEX

most populous three age groups

$243,386
HOUSING STATUS

Total Housing Units

Occupied Homes: 490
Owner Occupied Homes: 411
Renter Occupied Homes: 79
Vacant Homes: 1,270

1,760

5-YEAR ADJUSTED MORTALITY RATES*

<table>
<thead>
<tr>
<th>Disease</th>
<th>Florida</th>
<th>Monroe</th>
<th>Here</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Disease</td>
<td>1.55</td>
<td>1.42</td>
<td>1.38</td>
</tr>
<tr>
<td>All Cancers</td>
<td>1.59</td>
<td>1.70</td>
<td>1.22</td>
</tr>
<tr>
<td>Lung Cancer</td>
<td>0.44</td>
<td>0.44</td>
<td>0.35</td>
</tr>
<tr>
<td>Unintentional Injuries</td>
<td>0.40</td>
<td>0.54</td>
<td>0.15</td>
</tr>
<tr>
<td>Chronic Liver Disease</td>
<td>0.11</td>
<td>0.20</td>
<td>0.07</td>
</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

% with health insurance
83.8

% children (under 18) without health insurance
0

% unemployment
1.4

On the rise heart disease, lung cancer
About the same All cancer
Falling rates unintentional injuries, chronic liver disease

Community Health Improvement Plan
Lake Surprise & Pennecamp Park

6,414
POPULATION

$67,708
HOUSEHOLD INCOME

4,490
Total Housing Units

POPULATION BY AGE & SEX

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Population %</th>
</tr>
</thead>
<tbody>
<tr>
<td>35-49</td>
<td>20.8%</td>
</tr>
<tr>
<td>50-64</td>
<td>30.4%</td>
</tr>
<tr>
<td>65+</td>
<td>17.4%</td>
</tr>
</tbody>
</table>

POPULATION BY RACE & ETHNICITY

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Population %</th>
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</thead>
<tbody>
<tr>
<td>White Non-Hispanic</td>
<td>58.4%</td>
</tr>
<tr>
<td>Black Non-Hispanic</td>
<td>4.4%</td>
</tr>
<tr>
<td>Hispanic</td>
<td>32.5%</td>
</tr>
</tbody>
</table>

5-YEAR ADJUSTED MORTALITY RATES*

<table>
<thead>
<tr>
<th>Condition</th>
<th>Here</th>
<th>Monroe</th>
<th>Florida</th>
<th>Future Goal**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Disease</td>
<td>1.81</td>
<td>1.42</td>
<td>1.55</td>
<td>1.03</td>
</tr>
<tr>
<td>All Cancers</td>
<td>2.24</td>
<td>1.70</td>
<td>1.59</td>
<td>1.61</td>
</tr>
<tr>
<td>Lung Cancer</td>
<td>0.73</td>
<td>0.44</td>
<td>0.44</td>
<td>0.46</td>
</tr>
<tr>
<td>Unintentional Injuries</td>
<td>0.34</td>
<td>0.54</td>
<td>0.40</td>
<td>0.36</td>
</tr>
<tr>
<td>Chronic Liver Disease</td>
<td>0.27</td>
<td>0.20</td>
<td>0.11</td>
<td>0.08</td>
</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012

- On the rise: heart disease, all cancer, lung cancer, chronic liver disease
- About the same: N/A
- Falling rates: unintentional injuries

75.9 % with health insurance
14.8 % children (under 18) without health insurance
4.3 % unemployment

Community Health Improvement Plan
Rock Harbor

POPULATION

2,608

35-49: 18.7%
50-64: 30.5%
65+: 20.1%

POPULATION BY AGE & SEX

most populous three age groups

White Non-Hispanic / 77%
Black Non-Hispanic / 0%
Hispanic / 20.4%

POPULATION BY RACE & ETHNICITY

$114,379

HOUSEHOLD INCOME

2,255

Total Housing Units

Occupied Homes: 993
Owner Occupied Homes: 744
Renter Occupied Homes: 249
Vacant Homes: 1,262

HOUSING STATUS

5-YEAR ADJUSTED MORTALITY RATES*

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
<th>Unintentional Injuries</th>
<th>Chronic Liver Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>0.91</td>
<td>1.35</td>
<td>0.15</td>
<td>1.08</td>
<td>0</td>
</tr>
<tr>
<td>Monroe</td>
<td>1.42</td>
<td>1.70</td>
<td>0.44</td>
<td>0.54</td>
<td>0.20</td>
</tr>
<tr>
<td>Florida</td>
<td>1.55</td>
<td>1.59</td>
<td>0.44</td>
<td>0.40</td>
<td>0.11</td>
</tr>
<tr>
<td>Future Goal**</td>
<td>1.03</td>
<td>1.61</td>
<td>0.46</td>
<td>0.36</td>
<td>0.08</td>
</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012

On the rise: heart disease, all cancer, unintentional injuries
About the same lung cancer, chronic liver disease
Falling rates N/A

% with health insurance 84.4
% children (under 18) without health insurance 3.5
% unemployment 8.9

Community Health Improvement Plan
South Key Largo

**1,759**

**POPULATION**

10-19: 9.4%
50-64: 33.9%
65+: 37.2%

**POPULATION BY AGE & SEX**

most populous three age groups

**$57,044**

**HOUSEHOLD INCOME**

**1,974**

Total Housing Units

<table>
<thead>
<tr>
<th>Occupied Homes:</th>
<th>807</th>
</tr>
</thead>
<tbody>
<tr>
<td>Owner Occupied Homes:</td>
<td>556</td>
</tr>
<tr>
<td>Renter Occupied Homes:</td>
<td>251</td>
</tr>
<tr>
<td>Vacant Homes:</td>
<td>1,140</td>
</tr>
</tbody>
</table>

**HOUSING STATUS**

White Non-Hispanic / 80.6%  Black Non-Hispanic / 1.6%  Hispanic / 14.2%

**POPULATION BY RACE & ETHNICITY**

**5-YEAR ADJUSTED MORTALITY RATES**

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
<th>Unintentional Injuries</th>
<th>Chronic Liver Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>1.30</td>
<td>1.47</td>
<td>0.21</td>
<td>1.25</td>
<td>0.23</td>
</tr>
<tr>
<td>Monroe</td>
<td>1.42</td>
<td>1.70</td>
<td>0.44</td>
<td>0.54</td>
<td>0.20</td>
</tr>
<tr>
<td>Florida</td>
<td>1.55</td>
<td>1.59</td>
<td>0.44</td>
<td>0.40</td>
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</tr>
</tbody>
</table>

* Source: CHARTS data ** Source: Healthy People 2020

**Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012**

- **87.7%** with health insurance
- **7.1%** children (under 18) without health insurance
- **2.6%** unemployment

On the rise: heart disease, all cancer, lung cancer, unintentional injuries, chronic liver disease
About the same: N/A
Falling rates: N/A

Community Health Improvement Plan
Tavernier

**Population**

2,692

**Population by Age & Sex**

- 35-49: 17.0%
- 50-64: 25.5%
- 65+: 16.5%

**Population by Race & Ethnicity**

- White Non-Hispanic / 86.1%
- Black Non-Hispanic / 11.6%
- Hispanic / 0.4%

**Housing Status**

- Occupied Homes: 957
- Owner Occupied Homes: 637
- Renter Occupied Homes: 320
- Vacant Homes: 1,205

**Household Income**

$90,160

**Total Housing Units**

2,162

**5-Year Adjusted Mortality Rates**

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
<th>Unintentional Injuries</th>
<th>Chronic Liver Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>1.81</td>
<td>2.11</td>
<td>0.50</td>
<td>0.78</td>
<td>0.28</td>
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<tr>
<td>Monroe</td>
<td>1.42</td>
<td>1.70</td>
<td>0.44</td>
<td>0.54</td>
<td>0.20</td>
</tr>
<tr>
<td>Florida</td>
<td>1.55</td>
<td>1.59</td>
<td>0.44</td>
<td>0.40</td>
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</tr>
<tr>
<td>Future Goal**</td>
<td>1.03</td>
<td>1.61</td>
<td>0.46</td>
<td>0.36</td>
<td>0.08</td>
</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

Community Health Improvement Plan

Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012

- On the rise: lung cancer, chronic liver disease
- About the same unintentional injuries
- Falling rates heart disease, all cancer

73.4 % with health insurance
31.8 % children (under 18) without health insurance
4.3 % unemployment
Islamorada

5,878
POPULATION

53.2% 35-49: 18.6%
46.8% 50-64: 28.6%
30.9% 65+

POPULATION BY AGE & SEX
most populous three age groups

$95,720
HOUSEHOLD INCOME

5,623
Total Housing Units

Occupied Homes: 2,487
Owner Occupied Homes: 1,807
Renter Occupied Homes: 2,007
Vacant Homes: 3,136

HOUSING STATUS*

5-YEAR ADJUSTED MORTALITY RATES*

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
<th>Unintentional Injuries</th>
<th>Chronic Liver Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>1.17</td>
<td>1.71</td>
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<td>1.42</td>
<td>1.70</td>
<td>0.44</td>
<td>0.54</td>
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</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012

On the rise chronic liver disease
About the same lung cancer
Falling rates heart disease, all cancer, unintentional injuries

80.0 % with health insurance
25.4 % children (under 18) without health insurance
6.0 % unemployment

*In collecting the data, some populations in owned and rented homes did not add up to total population provided by the census.

Community Health Improvement Plan
One of the Middle Keys’ biggest draws is the easy access to the ocean. Kayaking and paddleboarding are very popular.
MIDDLE KEYS

Micro-community health profiles from Layton to Marathon
MM 74 to MM 48

9,958 residents or about 13.2% of the entire Monroe County population of 75,191
**Layton, Duck Key & Grassy Key**

**POPULATION**

1,703

**POPULATION BY AGE & SEX**

- 35-49: 16.1%
- 50-64: 22.8%
- 65+: 18.8%

**POPULATION BY RACE & ETHNICITY**

- White Non-Hispanic / 72.3%
- Black Non-Hispanic / 4.3%
- Hispanic / 22.0%

**5-YEAR ADJUSTED MORTALITY RATES***

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
<th>Unintentional Injuries</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>2.04</td>
<td>1.49</td>
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<tr>
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<td>1.70</td>
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</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

**HOUSEHOLD INCOME**

$72,301

**HOUSING STATUS**

- Total Housing Units: 1,950
- Occupied Homes: 575
- Owner Occupied Homes: 429
- Renter Occupied Homes: 146
- Vacant Homes: 1,375

**Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012**

- On the rise: heart disease, all cancer
- About the same: chronic liver disease
- Falling rates: lung cancer, unintentional injuries

**Community Health Improvement Plan**
During the period from 2010-14, this micro community saw an unusually high death rate due to unintentional injuries — the highest in the county. In order to gain some insight, more data was gathered and the results suggest varied causes, rather than one type of injury. This suggests it may be due to natural fluctuation. In addition, the relatively small population of this micro-community makes even a couple of additional deaths make the death rate appear much higher. When the death rate was calculated for the same population over the period of 10 years from 2004-2014, the age adjusted death rate became 3.47 out of 1,000 people, also high.
Key Colony Beach

615
POPULATION

35-49: 9.4%
50-64: 33.3%
65+: 56.1%
POPULATION BY AGE & SEX
most populous three age groups

$134,739
HOUSEHOLD INCOME

1,448
Total Housing Units

Occupied Homes: 335
Owner Occupied Homes: 254
Renter Occupied Homes: 81
Vacant Homes: 1,113
HOUSING STATUS

5-YEAR ADJUSTED MORTALITY RATES*

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
<th>Unintentional Injuries</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>0.91</td>
<td>1.35</td>
<td>0.15</td>
<td>1.08</td>
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<tr>
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<td>0.36</td>
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</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

The biggest complaint among respondents is the limited access to health care.

26.5% of Key Colony Beach have “no issues, no complaints.”

Key Colony Beach Police Department will pick up residents at local restaurants and bars and take them home. They will also take you to pick up the car the next morning.

68% of Key Colony Beach residents own a bicycle

The iguana generates the most pest complaints. Mosquitoes rank second.

Community Health Improvement Plan
Marathon Airport Community

3,179
POPULATION

Population by Age & Sex

- 35-49: 18.5%
- 50-64: 46.8%
- 65+: 13.5%

Most populous three age groups

Population by Race & Ethnicity

- White Non-Hispanic / 57.2%
- Black Non-Hispanic / 10.5%
- Hispanic / 25.2%

5-Year Adjusted Mortality Rates*

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
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<th>Lung Cancer</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>2.18</td>
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<td>0.36</td>
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<td>1.70</td>
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<td>0.08</td>
</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

$60,932
HOUSEHOLD INCOME

2,062
Total Housing Units

- Occupied Homes: 1,198
- Owner Occupied Homes: 673
- Renter Occupied Homes: 525
- Vacant Homes: 864

HOUSING STATUS

- 71.4% with health insurance
- 25.5% children (under 18) without health insurance
- 2.9% unemployment

Community Health Improvement Plan
OPEN TO SEE MAP
Central Marathon

2,053
POPULATION

POPULATION BY AGE & SEX
most populous three age groups

35-49:
13.7%

50-64:
30.9%

65+:
25.6%

POPULATION BY RACE & ETHNICITY
White Non-Hispanic / 77.5%
Black Non-Hispanic / 0.2%
Hispanic / 22.3%

2,053
POPULATION

35-49:
13.7%

50-64:
30.9%

65+:
25.6%

POPULATION BY AGE & SEX
most populous three age groups

White Non-Hispanic / 77.5%
Black Non-Hispanic / 0.2%
Hispanic / 22.3%

5-YEAR ADJUSTED MORTALITY RATES*

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
<th>Unintentional Injuries</th>
<th>Chronic Liver Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>3.08</td>
<td>2.10</td>
<td>0.34</td>
<td>0.87</td>
<td>0.31</td>
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<td>0.54</td>
<td>0.20</td>
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</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

$104,969
HOUSEHOLD INCOME

1,674
Total Housing Units

Occupied Homes: 855
Owner Occupied Homes: 604
Renter Occupied Homes: 251
Vacant Homes: 819

HOUSING STATUS

On the rise
Chronic liver disease

About the same
N/A

Falling rates
Heart disease, all cancer, lung cancer, unintentional injuries

Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012

76
% with health insurance

18.8
% children (under 18) without health insurance

3.8
% unemployment

Community Health Improvement Plan
West Marathon

1,979
POPULATION

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>35-49</td>
<td>19.9%</td>
</tr>
<tr>
<td>50-64</td>
<td>20.4%</td>
</tr>
<tr>
<td>65+</td>
<td>14%</td>
</tr>
</tbody>
</table>

Most populous three age groups:

- White Non-Hispanic / 33.8%
- Black Non-Hispanic / 10.3%
- Hispanic / 55.6%

$41,396
HOUSEHOLD INCOME

1,141
Total Housing Units

- Occupied Homes: 603
- Owner Occupied Homes: 295
- Renter Occupied Homes: 308
- Vacant Homes: 538

HOUSING STATUS

5-Year Adjusted Mortality Rates*

<table>
<thead>
<tr>
<th>Cause</th>
<th>Here</th>
<th>Monroe</th>
<th>Florida</th>
<th>Future Goal**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Disease</td>
<td>1.5</td>
<td>1.42</td>
<td>1.55</td>
<td>1.03</td>
</tr>
<tr>
<td>All Cancers</td>
<td>2.73</td>
<td>1.70</td>
<td>1.59</td>
<td>1.61</td>
</tr>
<tr>
<td>Lung Cancer</td>
<td>0.67</td>
<td>0.44</td>
<td>0.44</td>
<td>0.46</td>
</tr>
<tr>
<td>Unintentional Injuries</td>
<td>0.65</td>
<td>0.54</td>
<td>0.40</td>
<td>0.36</td>
</tr>
<tr>
<td>Chronic Liver Disease</td>
<td>0.30</td>
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<td>0.11</td>
<td>0.08</td>
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</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012

- On the rise: Lung cancer
- About the same: Chronic liver disease
- Falling rates: Heart disease, all cancer, unintentional injuries

68.5
% with health insurance

17.7
% children (under 18) without health insurance

6.1
% unemployment

Community Health Improvement Plan
The Grimal Grove on Big Pine Key is open to the public to tour the special orchards and garden. It often hosts special events from chocolate workshops to dinners that feature items grown on site.
LOWER KEYS

Micro-community health profiles
From Big Pine Key to Stock Island
MM 47 to MM 8

19,522

residents or about 26% of the entire
Monroe County population of 75,191
Big Pine Key

4,623
POPULATION

35-49: 15.5%
50-64: 33.5%
65+: 23.5%
POPULATION BY AGE & SEX
most populous three age groups

POPULATION BY RACE & ETHNICITY
White Non-Hispanic / 79.4%
Black Non-Hispanic / 1.3%
Hispanic / 15.5%

5-YEAR ADJUSTED MORTALITY RATES*

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
<th>Unintentional Injuries</th>
<th>Chronic Liver Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>0.69</td>
<td>1.69</td>
<td>0.50</td>
<td>0.54</td>
<td>0.36</td>
</tr>
<tr>
<td>Monroe</td>
<td>1.42</td>
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<td>0.46</td>
<td>0.36</td>
<td>0.08</td>
</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

$78,684
HOUSEHOLD INCOME

3,066
Total Housing Units
Occupied Homes: 1,838
Owner Occupied Homes: 1,385
Renter Occupied Homes: 453
Vacant Homes: 1,228
HOUSING STATUS

79.6
% with health insurance

10.8
% children (under 18) without health insurance

3.8
% unemployment

Community Health Improvement Plan
The Torches, Ramrod, Summerland & Cudjoe

**Population**

4,820

**Household Income**

$91,496

**Total Housing Units**

3,766

**Occupied Homes:** 2,024
**Owner Occupied Homes:** 1,437
**Renter Occupied Homes:** 587
**Vacant Homes:** 1,742

**Housing Status**

<table>
<thead>
<tr>
<th>% with health insurance</th>
<th>% children (under 18) without health insurance</th>
<th>% unemployment</th>
</tr>
</thead>
<tbody>
<tr>
<td>78.3</td>
<td>4.7</td>
<td>3.6</td>
</tr>
</tbody>
</table>

**Population by Age & Sex**

- 35-49: 20.5%
- 50-64: 29.7%
- 65+: 25.6%

**Population by Race & Ethnicity**

- White Non-Hispanic / 86.7%
- Black Non-Hispanic / 0.6%
- Hispanic / 12.3%

**5-Year Adjusted Mortality Rates**

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
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<th>Chronic Liver Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>1.00</td>
<td>1.20</td>
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<td>0.79</td>
<td>0.09</td>
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<tr>
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<td>1.70</td>
<td>0.44</td>
<td>0.54</td>
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</tbody>
</table>

*Source: CHARTS data | **Source: Healthy People 2020*
Sugarloaf

**Population**

2,060

**Population by Age & Sex**

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>35-49</td>
<td>22.2%</td>
</tr>
<tr>
<td>50-64</td>
<td>27.9%</td>
</tr>
<tr>
<td>65+</td>
<td>21.6%</td>
</tr>
</tbody>
</table>

**Population by Race & Ethnicity**

- White Non-Hispanic: 87.2%
- 2 or more races: 3.2%
- Hispanic: 6.4%

**Housing Status**

- Total Housing Units: 1,165
  - Occupied Homes: 728
    - Owner Occupied Homes: 616
    - Renter Occupied Homes: 112
  - Vacant Homes: 437

**Household Income**

$100,101

**5-Year Adjusted Mortality Rates**

<table>
<thead>
<tr>
<th>Cause</th>
<th>Here</th>
<th>Monroe</th>
<th>Florida</th>
<th>Future Goal**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Disease</td>
<td>2.06</td>
<td>1.42</td>
<td>1.55</td>
<td>1.03</td>
</tr>
<tr>
<td>All Cancers</td>
<td>1.74</td>
<td>1.70</td>
<td>1.59</td>
<td>1.61</td>
</tr>
<tr>
<td>Lung Cancer</td>
<td>0.65</td>
<td>0.44</td>
<td>0.44</td>
<td>0.46</td>
</tr>
<tr>
<td>Unintentional Injuries</td>
<td>0.49</td>
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<td>Chronic Liver Disease</td>
<td>0.22</td>
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</table>

*Source: CHARTS data | **Source: Healthy People 2020

**Community Health Improvement Plan**

- On the rise: Heart disease, all cancer, lung cancer
- About the same: Chronic liver disease
- Falling rates: Unintentional injuries

- % with health insurance: 87.2%
- % children (under 18) without health insurance: 4.6%
- % unemployment: 3.3%
Big Coppitt

2,963
POPULATION

POPULATION BY AGE & SEX

25-34: 13.7%
35-49: 22.2%
50-64: 27.6%

POPULATION BY RACE & ETHNICITY

White Non-Hispanic / 67.5%
Black Non-Hispanic / 3.6%
Hispanic / 27.7%

HOUSING STATUS

Occupied Homes: 1,023
Owner Occupied Homes: 713
Renter Occupied Homes: 310
Vacant Homes: 520

Total Housing Units: 1,543

$72,535
HOUSEHOLD INCOME

5-YEAR ADJUSTED MORTALITY RATES*

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<td>Here</td>
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<td>0.44</td>
<td>0.40</td>
<td>0.11</td>
</tr>
<tr>
<td>Future Goal**</td>
<td>1.03</td>
<td>1.61</td>
<td>0.46</td>
<td>0.36</td>
<td>0.08</td>
</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012

On the rise
All cancer, chronic liver disease

About the same
N/A

Falling rates
Heart disease, lung cancer, unintentional injuries

68.8 % with health insurance
6.0 % children (under 18) without health insurance
3.5 % unemployment

Community Health Improvement Plan
Stock Island & Key Haven

5,084
POPULATION

10-19: 16.2%
35-49: 24.9%
50-64: 26.1%

10-19: 54.2%
35-49: 45.8%
50-64: 26.1%

10-19: Hispanic / 47.0%
Stock Island & Key Haven
POPULATION
5,084

10-19: 16.2%
35-49: 24.9%
50-64: 26.1%

POPULATION BY AGE & SEX
most populous three age groups

$62,270
HOUSEHOLD INCOME

2,163
Total Housing Units

Occupied Homes: 1,497
Owner Occupied Homes: 752
Renter Occupied Homes: 745
Vacant Homes: 639

HOUSING STATUS

5,084
POPULATION

57.7
% with health insurance

40.2
% children (under 18) without health insurance

4.8
% unemployment

5-YEAR ADJUSTED MORTALITY RATES*

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
<th>Unintentional Injuries</th>
<th>Chronic Liver Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>1.04</td>
<td>1.52</td>
<td>0.31</td>
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<td>1.42</td>
<td>1.70</td>
<td>0.44</td>
<td>0.54</td>
<td>0.20</td>
</tr>
<tr>
<td>Florida</td>
<td>1.55</td>
<td>1.59</td>
<td>0.44</td>
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</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012

On the rise
N/A
About the same
All cancer, unintentional injuries, chronic liver disease
Falling rates
Heart disease, lung cancer

Community Health Improvement Plan
Key West has an incredible arts and entertainment calendar, and the characters to go along with it. The annual Cow Key Bridge Race is less than a mile long; it’s a fundraiser for local causes; and it encourages competition among costumers rather than athletes.
KEY WEST

micro-community health profiles
From New Town East to The Meadows
MM 6 to MM 0

25,092 residents or about 33.4% of the entire
Monroe County population of 75,191
New Town East

6,567
POPULATION

$72,446
HOUSEHOLD INCOME

2,409
Total Housing Units

% with health insurance
62.1

% children (under 18) without health insurance
28.0

% unemployment
2.9

5-YEAR ADJUSTED MORTALITY RATES*

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
<th>Unintentional Injuries</th>
<th>Chronic Liver Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>1.50</td>
<td>2.72</td>
<td>0.91</td>
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<td>0.44</td>
<td>0.54</td>
<td>0.20</td>
</tr>
<tr>
<td>Florida</td>
<td>1.55</td>
<td>1.59</td>
<td>0.44</td>
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<td>0.36</td>
<td>0.08</td>
</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

On the rise
All cancer, lung cancer, chronic liver disease

About the same
N/A

Falling rates
Heart disease, unintentional injuries

Community Health Improvement Plan
Key West Airport

**POPULATION**

3,553

**HOUSEHOLD INCOME**

$74,075

**TOTAL HOUSING UNITS**

2,555

- Occupied Homes: 1,510
- Owner Occupied Homes: 827
- Renter Occupied Homes: 683
- Vacant Homes: 1,045

**HOUSING STATUS**

**POPULATION BY AGE & SEX**

- 35-49: 24.8%
- 50-64: 23.2%
- 65+: 20.4%

**POPULATION BY RACE & ETHNICITY**

- White Non-Hispanic / 71.8%
- Black Non-Hispanic / 7.2%
- Hispanic / 19.8%

**5-YEAR ADJUSTED MORTALITY RATES**

<table>
<thead>
<tr>
<th>Disease</th>
<th>Here</th>
<th>Monroe</th>
<th>Florida</th>
<th>Future Goal**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Disease</td>
<td>1.81</td>
<td>1.42</td>
<td>1.55</td>
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<tr>
<td>All Cancers</td>
<td>2.40</td>
<td>1.70</td>
<td>1.59</td>
<td>1.61</td>
</tr>
<tr>
<td>Lung Cancer</td>
<td>0.42</td>
<td>0.44</td>
<td>0.44</td>
<td>0.46</td>
</tr>
<tr>
<td>Unintentional Injuries</td>
<td>0.81</td>
<td>0.54</td>
<td>0.40</td>
<td>0.36</td>
</tr>
<tr>
<td>Chronic Liver Disease</td>
<td>0.27</td>
<td>0.20</td>
<td>0.11</td>
<td>0.08</td>
</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

**Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012**

- On the rise: All cancer, chronic liver disease
- About the same: Heart disease, lung cancer
- Falling rates: Unintentional injuries

- % with health insurance: 70.9
- % children (under 18) without health insurance: 16.3
- % unemployment: 4.9

Community Health Improvement Plan
New Town West

4,527
POPULATION

25-34: 18.3%
35-49: 20.4%
50-64: 12.2%

POPULATION BY AGE & SEX
most populous three age groups

51.8%

White Non-Hispanic / 68.6%  Black Non-Hispanic / 12.9%  Hispanic / 13.9%

POPOPULATION BY RACE & ETHNICITY

2,043
Total Housing Units

Occupied Homes: 1,623
Owner Occupied Homes: 395
Renter Occupied Homes: 1,228
Vacant Homes: 420

HOUSING STATUS

$61,701
HOUSEHOLD INCOME

$61,701

% with health insurance
87.0

% children (under 18) without health insurance
9.4

% unemployment
4.8

On the rise
All cancer, lung cancer

About the same
Chronic liver disease

Falling rates
Heart disease, unintentional injuries

5-YEAR ADJUSTED MORTALITY RATES*

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
<th>Unintentional Injuries</th>
<th>Chronic Liver Disease</th>
</tr>
</thead>
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<tr>
<td>Here</td>
<td>3.35</td>
<td>2.49</td>
<td>0.95</td>
<td>0.38</td>
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<tr>
<td>Monroe</td>
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<td>1.70</td>
<td>0.44</td>
<td>0.54</td>
<td>0.20</td>
</tr>
<tr>
<td>Florida</td>
<td>1.55</td>
<td>1.59</td>
<td>0.44</td>
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<td>0.36</td>
<td>0.08</td>
</tr>
</tbody>
</table>

On the rise
All cancer, lung cancer

About the same
Chronic liver disease

Falling rates
Heart disease, unintentional injuries

* Source: CHARTS data | ** Source: Healthy People 2020

Community Health Improvement Plan
Fire Station
Hospital
Law Enforcement
School
Mile Marker
Tobacco - Alcohol Retailer

Florida Department of Health in Monroe County
2018 to 2020
Casa Marina District & Midtown Communities

3,895
POPULATION

35-49: 27.1%
50-64: 25.2%
65+: 13.6%
POPULATION BY AGE & SEX
most populous three age groups

$78,276
HOUSEHOLD INCOME

2,001
Total Housing Units
Occupied Homes: 1,493
Owner Occupied Homes: 710
Renter Occupied Homes: 783
Vacant Homes: 508
HOUSING STATUS

White Non-Hispanic / 78.5%
2 or More Races: 2.4%
Hispanic / 15.1%
POPULATION BY RACE & ETHNICITY

5-YEAR ADJUSTED MORTALITY RATES*

<table>
<thead>
<tr>
<th>Condition</th>
<th>Here</th>
<th>Monroe</th>
<th>Florida</th>
<th>Future Goal**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Disease</td>
<td>2.10</td>
<td>1.42</td>
<td>1.55</td>
<td>1.03</td>
</tr>
<tr>
<td>All Cancers</td>
<td>1.88</td>
<td>1.70</td>
<td>1.59</td>
<td>1.61</td>
</tr>
<tr>
<td>Lung Cancer</td>
<td>0.37</td>
<td>0.44</td>
<td>0.44</td>
<td>0.46</td>
</tr>
<tr>
<td>Unintentional Injuries</td>
<td>0.29</td>
<td>0.54</td>
<td>0.40</td>
<td>0.36</td>
</tr>
<tr>
<td>Chronic Liver Disease</td>
<td>0.21</td>
<td>0.20</td>
<td>0.11</td>
<td>0.08</td>
</tr>
</tbody>
</table>

* Source: CHARTS data | ** Source: Healthy People 2020

Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012

On the rise
- N/A
About the same
- N/A
Falling rates
- Heart disease, all cancer, lung cancer, unintentional injuries, chronic liver disease

71.3 % with health insurance
25.6 % children (under 18) without health insurance
7.1 % unemployment

Community Health Improvement Plan
Bahama Village & Duval Street

**Population**

2,837

**Population by Age & Sex**

35-49: 26.9%
50-64: 48.1%
65+: 15.4%

**Population by Race & Ethnicity**

White Non-Hispanic / 58.1%
Black Non-Hispanic / 27.1%
Hispanic / 14.1%

**Population by Housing Status**

Total Housing Units: 2,168

- Occupied Homes: 1,241
- Owner Occupied Homes: 449
- Renter Occupied Homes: 792
- Vacant Homes: 927

**Household Income**

$75,505

**5-Year Adjusted Mortality Rates**

<table>
<thead>
<tr>
<th>Health Category</th>
<th>Here</th>
<th>Monroe</th>
<th>Florida</th>
<th>Future Goal**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Heart Disease</td>
<td>2.18</td>
<td>1.42</td>
<td>1.55</td>
<td>1.03</td>
</tr>
<tr>
<td>All Cancers</td>
<td>2.51</td>
<td>1.70</td>
<td>1.59</td>
<td>1.61</td>
</tr>
<tr>
<td>Lung Cancer</td>
<td>0.61</td>
<td>0.44</td>
<td>0.44</td>
<td>0.46</td>
</tr>
<tr>
<td>Unintentional Injuries</td>
<td>0.57</td>
<td>0.54</td>
<td>0.40</td>
<td>0.36</td>
</tr>
<tr>
<td>Chronic Liver Disease</td>
<td>0.55</td>
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**Source:** CHARTS data | **Source:** Healthy People 2020

**Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012**

- On the rise: All cancer, lung cancer, chronic liver disease
- About the same: N/A
- Falling rates: Heart disease, unintentional disease

**% Unemployment**

5.0

% Children (under 18) without health insurance

15.9

% with health insurance

72.4

Community Health Improvement Plan
**Historic Seaport & The Meadows**

**3,713**

**POPULATION**

**25-34:** 15.2%
**35-49:** 26.8%
**50-64:** 32.7%

**POPULATION BY AGE & SEX**

White Non-Hispanic / 75.1%  American/Alaska Native: 3.3%  Hispanic / 17.7%

**POPULATION BY RACE & ETHNICITY**

**$86,922**

**HOUSEHOLD INCOME**

3,001

**Total Housing Units**

- Occupied Homes: 1,458
- Owner Occupied Homes: 695
- Renter Occupied Homes: 763
- Vacant Homes: 1,543

**HOUSING STATUS**

**5-YEAR ADJUSTED MORTALITY RATES***

<table>
<thead>
<tr>
<th></th>
<th>Heart Disease</th>
<th>All Cancers</th>
<th>Lung Cancer</th>
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<th>Chronic Liver Disease</th>
</tr>
</thead>
<tbody>
<tr>
<td>Here</td>
<td>1.74</td>
<td>1.53</td>
<td>0.44</td>
<td>0.66</td>
<td>0.13</td>
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<td>1.42</td>
<td>1.70</td>
<td>0.44</td>
<td>0.54</td>
<td>0.20</td>
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**Age Adjusted Mortality Rates for Micro-community Compared to 2008-2012**

On the rise
- All cancer, lung cancer

About the same
- Chronic liver disease

Falling rates
- Heart disease, unintentional injuries

66.4 % with health insurance

20.1 % children (under 18) without health insurance

1.7 % unemployment

Community Health Improvement Plan