



2023

Baseline REPORT

Hw

Health & Wellness Coalition

December 2024

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About the Coalition

The Health and Wellness Coalition was established on May 1, 2023, in response to a call to understand the region's most pressing social challenges: housing, healthcare, wellness, and workforce development. A community survey highlighted that 45% of respondents identified health and wellness as a top priority.

In the aftermath of Hurricane Ian, Collaboratory and its regional partners convened a diverse group of partners to address these critical concerns. Key issues identified included healthcare access and affordability, mental health, and substance abuse. Inspired by the success of the FutureMakers Coalition (launched in 2015), the Health and Wellness Coalition was formed to tackle these urgent needs.

Recognizing that no single entity can dissolve the complex challenges facing our communities, the Health and Wellness Coalition leverages collective resources and relationships to enhance the region's capacity to achieve its shared goal: transforming Southwest Florida (SWFL) into one of the healthiest communities in the nation. By 2040, the coalition aims to surpass the 90th percentile for Health Indicators, (Length of Life and Quality of Life metrics).

To achieve this, the coalition maintains a regional focus across Lee, Collier, Charlotte, Hendry, and Glades counties, concentrating on four key focus areas:

- Active Living
- Behavioral Health
- Food Access & Nutrition
- Health Systems

Each focus area addresses critical components of the region's health challenges, with specific outcomes and metrics established to measure progress. By consistently tracking these indicators, the coalition can assess the impact of its efforts and make data-driven decisions to adjust and refine its strategies.

The coalition's approach emphasizes system-level change and cross-sector collaboration, positioning SWFL on a path toward improved health outcomes for all residents. By working together and aligning resources, the coalition is committed to fostering a healthier, more vibrant future for the region.

Executive Summary

The Health and Wellness Coalition is dedicated to transforming our region into one of the healthiest communities in the nation by 2040. Guided by the goal of exceeding the 90th percentile for key health indicators- length of life and quality of life we have established a comprehensive baseline to measure and track progress over time.

To drive meaningful change, the coalition has identified seven regional outcomes supported by 15 specific metrics and benchmarks. These metrics, which reflect critical health priorities, serve as a clear roadmap for achieving our shared vision. Our efforts are concentrated in four strategic focus areas: active living, behavioral health, food access and nutrition, and health systems.

Currently, our region ranks in the 71st percentile for length of life, specifically for premature death, requiring a 19-point percentile improvement to reach our target. For quality of life indicators the data reveals additional challenges:

Live births and low birthweight: Ranked at 51st percentile, needing a 39-point improvement.

Poor mental health days: Ranked at the 53rd percentile, requiring a 37-point increase.

Poor or fair health: At the 16th percentile, this indicator requires a significant 74-point increase.

Poor physical health days: Currently in the 11th percentile, this metric demands the most improvement, with a 79-point increase needed to reach our goal.

The coalition's work spans Lee, Collier, Charlotte, Hendry and Glades counties, fostering a unified regional approach to addressing these challenges. By aligning resources and initiatives within our focus areas, we aim to create sustainable, measurable, improvements that will propel Southwest Florida towards becoming a national leader in health and wellness.

This baseline data report marks a crucial milestone in our journey, providing the foundation of tracking progress and refining strategies to meet our 2040 goals.

Introduction

The baseline report establishes the Health and Wellness Coalition's shared outcomes, goals, and targets, laying the groundwork for transformative change in Southwest Florida. This serves two critical purposes: first, it allows coalition partners to align their efforts to effectively address key health priorities; second, it ensures that our collective work remains data-driven, measurable, and impactful.

The coalition has set an ambitious goal: by 2040 to transform Southwest Florida into one of the healthiest communities in the nation by exceeding the 90th percentile for key health indicators (length of life and quality of life).

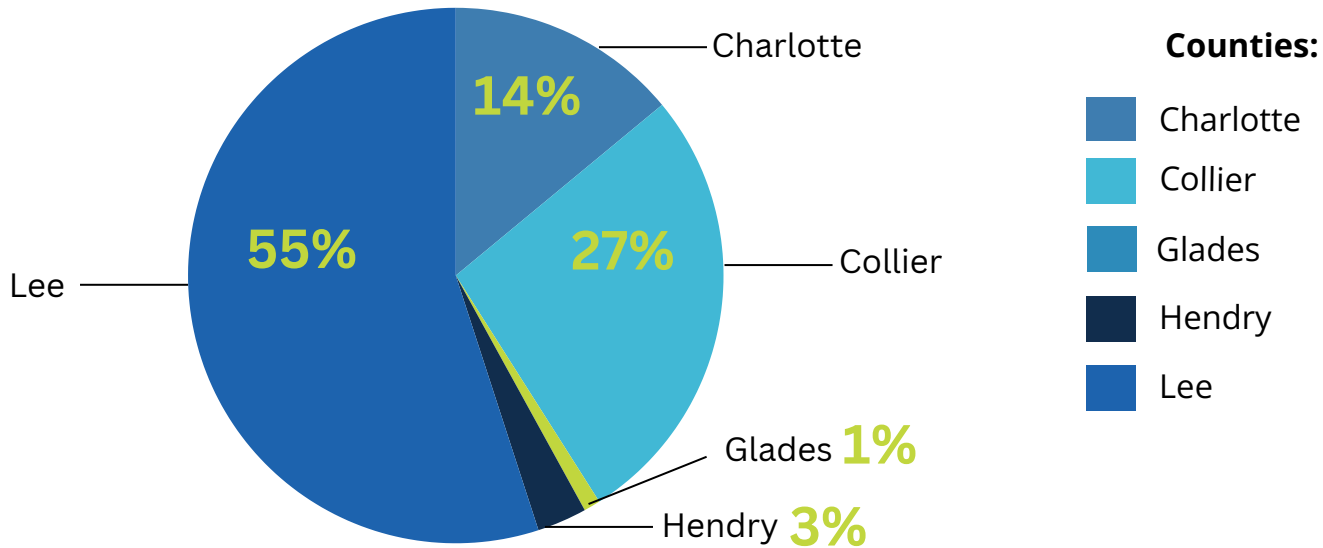
To achieve this overarching vision, the coalition identified seven regional outcomes supported by 15 specific metrics to provide clear guideposts for progress. These outcomes are aligned across four strategic focus areas: promoting active living, improving behavioral health, enhancing food access and nutrition, and strengthening health systems.

This report is built on data collected at the start of our coalition's efforts, and incorporates annual data from the most recent year available. Throughout this report, citations ensure transparency and traceability of the data sources.

By consistently monitoring progress and using data to guide decisions, the Health and Wellness Coalition is positioned to evaluate the impact of collective efforts and refine strategies as needed. Together, we are working towards a future where all Southwest Florida residents can enjoy longer, healthier, and more fulfilling lives.

Demographics

Figure 1 - SWFL Population 2022



Source: Florida Office of Economic and Demographic Research
Prepared by the Regional Economic Research Institute

Figure 1-1 shows the population of each county in SWFL as a percentage of the population of the region. Table 1-1 shows the population of each county in the SWFL Florida region. SWFL's population is growing quickly, outpacing state growth since 2010.

Table 1 - SWFL Population - County Level

County	2012	2022	% Change
Charlotte	163,119	196,742	20.6%
Collier	327,972	390,912	19.2%
Glades	12,479	12,273	-1.7%
Hendry	38,033	40,633	6.8%
Lee	639,653	802,178	25.4%
Southwest Florida	1,181,256	1,442,738	22.1%

Our Shared Goal

Transform Southwest Florida to be among the healthiest communities in the nation by exceeding the 90th percentile for Health Indicators (Length of Life and Quality of Life) by 2040

Our coalition's shared goal focuses on improving both length of life and quality of life for all residents in SWFL. By setting the target to exceed the 90th percentile for health indicators, the Health and Wellness Coalition establishes a high benchmark for progress across key health metrics, including physical health, mental and behavioral health, access to quality healthcare, and food accessibility and nutrition. Achieving this objective would place SWFL among the top 10% of communities nationwide in terms of health outcomes, leading to potential increases in life expectancy, better management of chronic diseases, enhanced mental health, and reduced health care costs.

This comprehensive approach acknowledges that longevity alone is insufficient - those additional years should be healthy, fulfilling, and productive. Ultimately, the coalition aims to create a SWFL where residents not only live longer, but also enjoy vibrant, meaningful lives throughout their lifespan.



Coalition Outcomes

The coalition has prioritized seven regional outcomes, comprised of 15 metrics. By focusing on these metrics, we aim to reach the 90th percentile for health indicators. Progress in these areas will be instrumental in driving us closer to our target.

Active Living



1.1 Demonstrate 20% or less of adults aged 18+ report no leisure time physical activity within the past month.

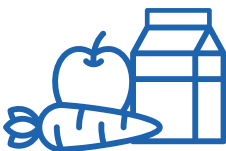
1.2 Increase the percentage of students (i.e., middle & high school) who were physically active for at least 60 minutes on all seven of the past seven days.

Behavioral Health



2.1 Demonstrate the timely provision of mental health and substance abuse treatment programs and services.

Food Access & Nutrition



3.1 Demonstrate a decrease over the past 3 years in the percentage of residents living in an urban or rural food desert.

3.2 Demonstrate an increase over the past 3 years in the percentage of people who are food secure.

Health Systems



4.1 Demonstrate that the counties are top U.S. performers in regards to quality of care.

4.2 Demonstrate that the counties are top U.S. performers in regards to access to health care.

Active Living

Active Living outcomes act as measurable indicators that help to assess the extent to which a community or individual embraces an active lifestyle. These outcomes reflect the effectiveness of a community's active living framework or system, which includes a network of resources such as parks, trails, recreational facilities, and community-based initiatives that work together to facilitate regular physical activity and encourage behavior change. This section examines key outcomes and metrics that assess the community's performance in promoting active living, with a primary focus on adults, and middle and high school students.

Outcome 1.1: Demonstrate 20% or less of adults aged 18+ report no leisure time physical activity within the past month

Outcome 1.1 focuses on assessing rates of physical inactivity among adults aged 18+ and aims to increase overall physical activity levels in the community and reduce sedentary behaviors. According to the Centers for Disease Control and Prevention (CDC), adults 18+ should engage in a minimum of 150 minutes (2.5 hours) per week of moderate intensity physical activity or 75 minutes (1.25 hours) per week of vigorous activity, or an equivalent combination. According to the CDC, combined data from 2017 through 2020 show physical inactivity prevalence of 25.3% nationally. Data collected county health rankings in 2022 indicate that SWFL 27% of adults reported being physically inactive, exceeding national data.



Outcome 1.1:

Demonstrate 20% or less of adults aged 18+ report no leisure time physical activity within the past month.

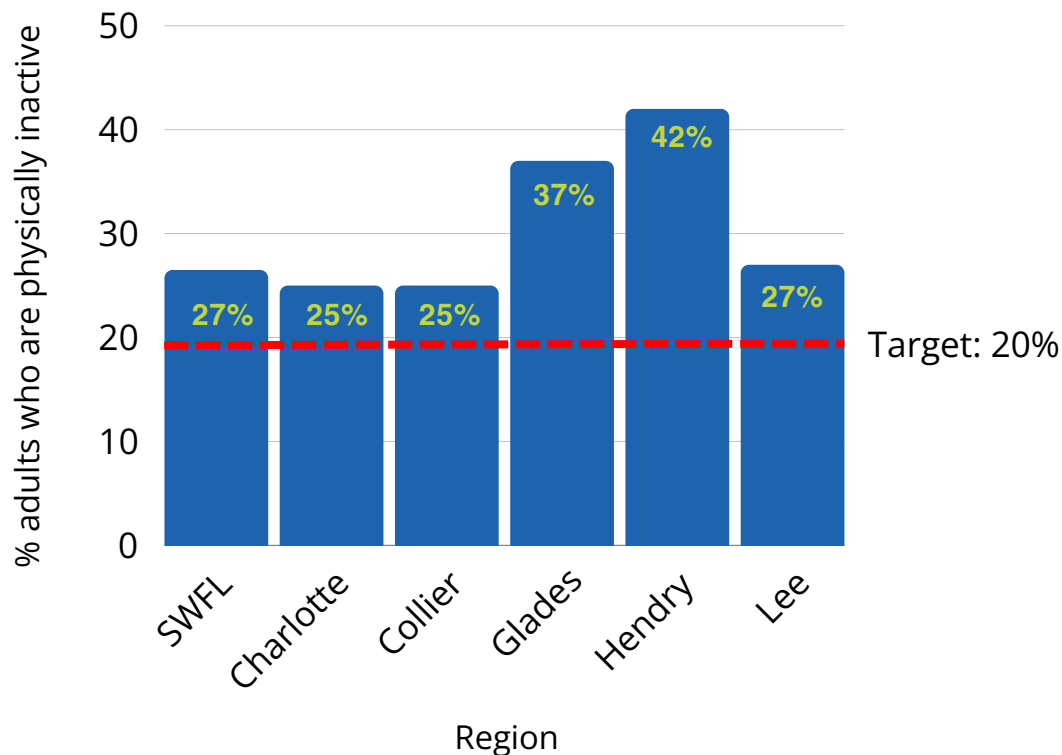
Outcome 1.2:

Increase the percentage of students (i.e., middle & high school) who were physically active for at least 60 minutes on all seven of the past seven days.

Active Living

Metric 1.1.1 Physical Inactivity: This metric measures the percentage of adults ages 18+ reporting no leisure time physical activity (i.e., physically inactive). In SWFL, **27%** of adults reported being physically inactive, exceeding the target of 20% or less. The 20% standard represents the 90th percentile nationally, according to Community Health Rankings. Tracking this metric helps identify trends, informs health promotion strategies, and ultimately assists in tracking progress towards reducing sedentary behavior and its associated health risks.

Figure 3 - Percentage of adults aged 18 and over reporting being physically inactive



Source: County Health Rankings (2022)

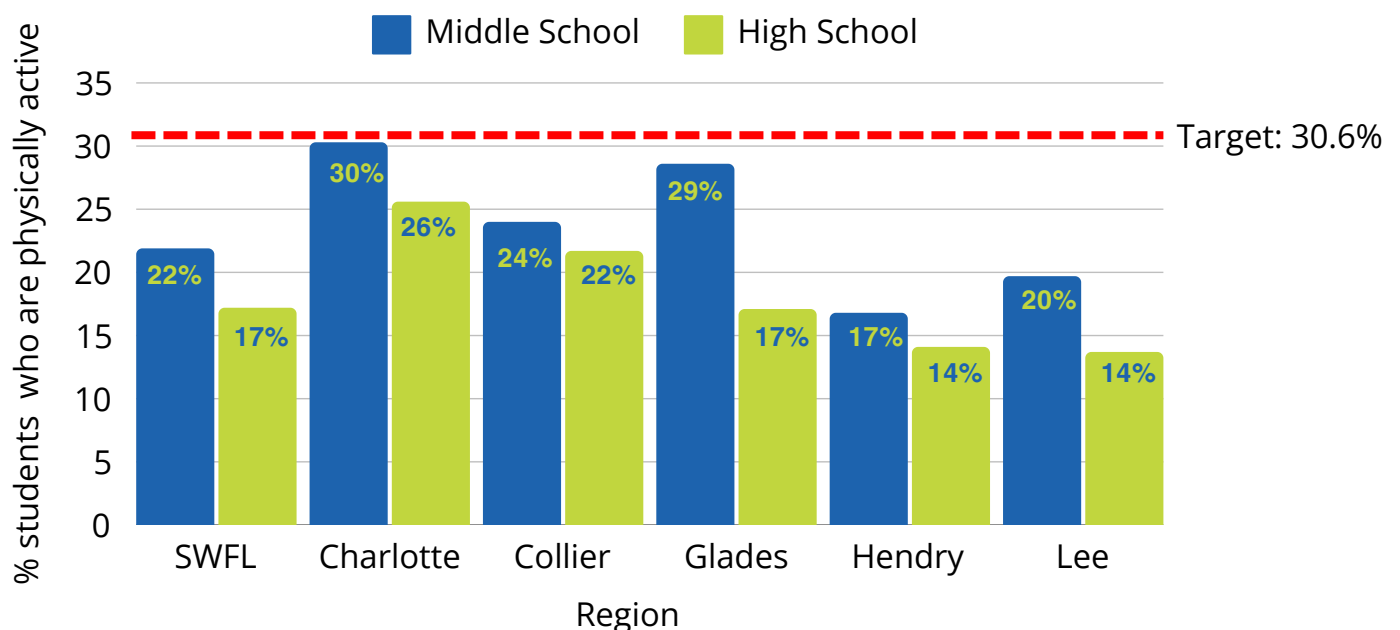
Active Living

Outcome 1.2 Increase the percentage of students (i.e., middle & high school) who were physically active for at least 60 minutes on all seven of the past seven days.

Outcome 1.2 focuses on assessing rates of physical activity among middle and high school students. According to the CDC, increasing youths' physical activity levels can assist in enhancing cardiorespiratory fitness, strengthening bones and muscles, managing weight, alleviating symptoms of anxiety and depression, and lowering the risk of developing health issues.

Metric 1.2.1 Middle and high school students' physical activity: This metric assesses middle and high school students' physical activity levels, particularly the percentage of middle and high school students who are physically active for at least 60 minutes on all seven of the past seven days. According to the Florida Youth Tobacco Survey (FYTS), **19.6%** of SWFL middle and high school students combined meet these criteria. The SWFL breakdown by school level is as follows: **21.9%** of middle school students and **17.2%** of high school students. Monitoring progress towards this metric is crucial for developing targeted health promotion activities and monitoring changes in population health behaviors before the onset of morbidity or disease.

Figure 4 - middle and high school students' physical activity



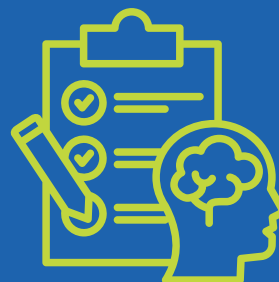
Source: FLHealthCHARTS (2022e)

Behavioral Health

Behavioral health outcomes measure the effectiveness of regional initiatives in promoting mental well-being and addressing behavioral health challenges within the community. These metrics are crucial for assessing the quality and accessibility of mental health services, substance abuse treatment, and preventative measures. Our coalition tracks three key metrics to evaluate the timely provision of mental health and substance abuse treatment services. By tracking these metrics, we can assess the region's performance in delivering quality behavioral health services, improving access to care, and identifying areas that require additional resources or interventions.

Outcome 2.1 Demonstrate the timely provision of mental health and substance abuse treatment and services. This outcome emphasizes the importance of delivering mental health and substance abuse treatment programs and services promptly.

Timely access to these services is crucial for effective intervention, recovery, and overall well-being. By ensuring that individuals receive the necessary support without undue delay, we can significantly enhance treatment outcomes and improve the quality of life for those affected by mental health and substance use disorders. This outcome focuses on reducing wait times, increasing service availability, and optimizing the delivery of care to meet the urgent needs of individuals and communities by increasing the rate of Behavioral/Mental Health Professionals.

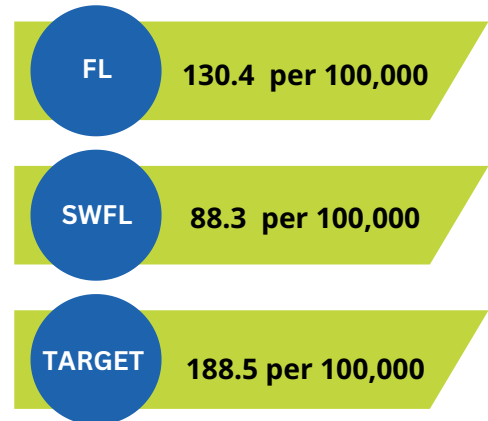


Outcome 2.1:
Demonstrate the timely provision of mental health and substance abuse treatment programs and services.

Behavioral Health

Metric 2.1.1 Behavioral/Mental Health Professional, Rate Per 100,000 Population:

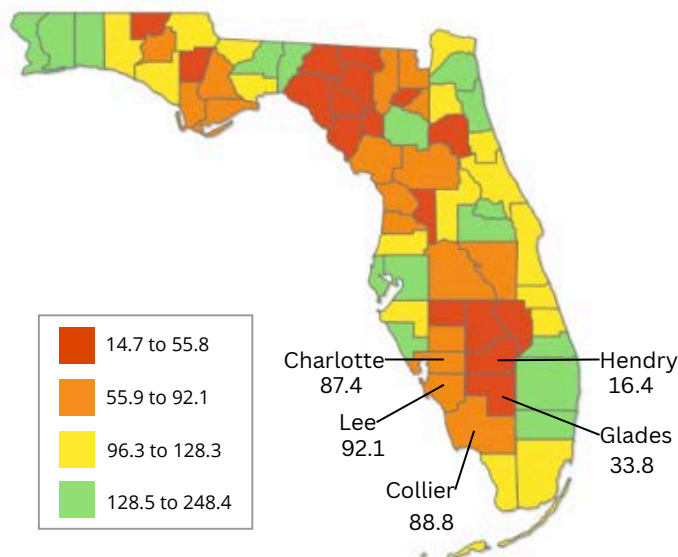
This metric focuses on the availability of behavioral and mental health professionals within a geographic area, specifically measuring the number of marriage and family therapists, clinical social workers, and mental health counselors with active licenses in Florida. This metric excludes other behavioral healthcare professionals, such as psychologists and school psychologists.



Source: FLHealthCHARTS (2022a)

By examining the number of these professionals per 100,000 population, we can gain valuable insights into the accessibility and quality of mental health care services in the region. Understanding these figures is crucial for identifying potential gaps in service provision and ensuring that communities have adequate access to essential mental health resources. Based on data provided by Florida Health Charts, the number of Providers per 100,000 is **88.3** in SWFL, or 1,277 for its current population of 1,442,738.

Figure 6 - Behavioral/Mental Health Providers per 100,000 population by county

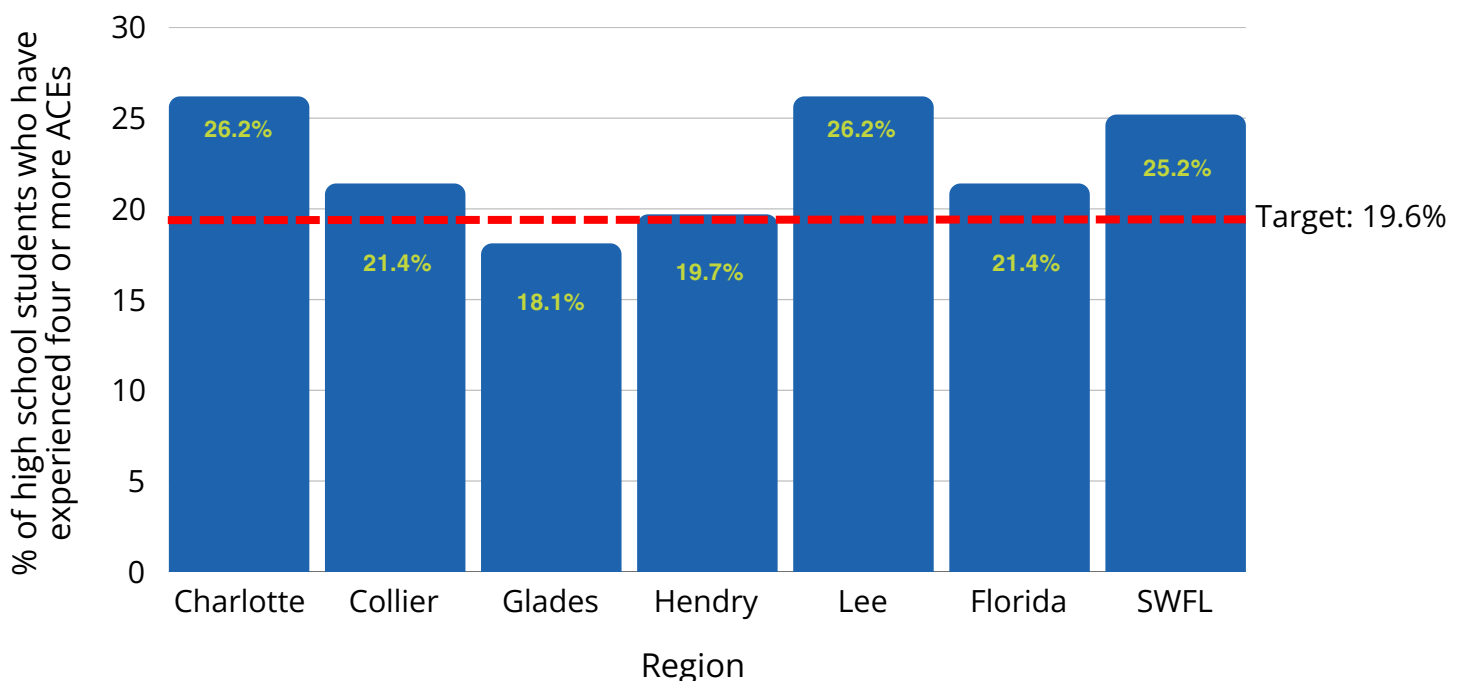


Source: FLHealthCHARTS (2022a)

Behavioral Health

Metric 2.1.2 High School Students Who Have Experienced four or more Adverse Childhood Experiences (ACEs): This metric examines the prevalence of adverse childhood experiences (ACEs) among high school students, utilizing data from the Florida Youth Substance Abuse Survey (FYSAS) which is reported on FLHealthCHARTS. This survey is part of the broader Florida Youth Survey (FYS), which is conducted annually to assess risk and protective factors related to substance abuse among public and charter school students. By focusing on ACEs, which include potentially traumatic events such as abuse, neglect, and household challenges, this metric provides critical insights into the challenges faced by youth. Understanding the extent of ACEs among high school students is essential for developing interventions aimed at mitigating their long-term impacts on mental health, social functioning, and overall well-being. Based on data provided by FLHealthCHARTS, the percentage of students who have experienced four or more ACEs is **25.2%** in SWFL. The target for this metric was determined based on the goal from the (2022-2026) Florida Health improvement plan.

Figure 7 –High School Students who have experienced four or more ACEs



Source: FLHealthCHARTS (2022d)

Behavioral Health

Metric 2.1.3 Age-adjusted Deaths from Suicide, Rate Per 100,000 Population:

This metric focuses on the age-adjusted rate of deaths from suicide, calculated per 100,000 population. According to FLHealthCHARTS, suicide, defined as death caused by self-inflicted injury with the intent to die, is a significant public health issue in the United States. It ranks among the top ten leading causes of death, occurring approximately every 11 minutes (FLHealthCHARTS). The impact of suicide spans across all age groups, being the second leading cause of death for individuals aged 10 to 34, the fourth for those aged 35 to 54, and the eighth for individuals aged 55 to 64 (FLHealthCHARTS). By analyzing age-adjusted suicide rates, this metric provides a comprehensive view of the prevalence and demographic variations in suicide mortality, facilitating targeted prevention and intervention efforts to address this critical issue. Based on data provided by FLHealthCHARTS, Southwest Florida saw **19.28** deaths per 100,000 population. This equates to 50 deaths in Charlotte County, 54 deaths in Collier County, 1 death in Glades County, 5 deaths in Hendry County, and 169 deaths in Lee County, for a total of **279** deaths in SWFL. Based on The Office of Disease Prevention and Health Promotion, the target is 12.8 deaths per 100,00 population, or **185** deaths for our current population.

Figure 8 – Age-adjusted deaths from suicide, by county per 100,000



Source: Office of Disease Prevention and Health Promotion (n.d -b) & FLHealthCHARTS (2022c)

Food Access & Nutrition

Food Access and Nutrition outcomes evaluate the effectiveness of initiatives aimed at addressing food insecurity challenges faced by low-income families in the United States. A comprehensive food access framework involves a network of resources, including federal assistance programs, food banks, and community resources, working together to improve access to affordable, nutritious food. This framework is designed to meet the diverse needs of individuals by offering services such as SNAP and WIC benefits, which can be utilized at farmers' markets. In addition to these services, food access and nutrition initiatives involve community-based programs and educational efforts that raise awareness about the importance of nutrition and healthy eating habits. The integration of these elements ensures that individuals have access to the resources necessary for achieving food security and improving nutrition. This section examines key outcomes and metrics that assess the community's performance in enhancing food access and nutrition, with a focus on increasing food security for residents and children.



Outcome 3.1

Demonstrate an increase over the past 3 years in the percentage of people who are food secure.

Outcome 3.2

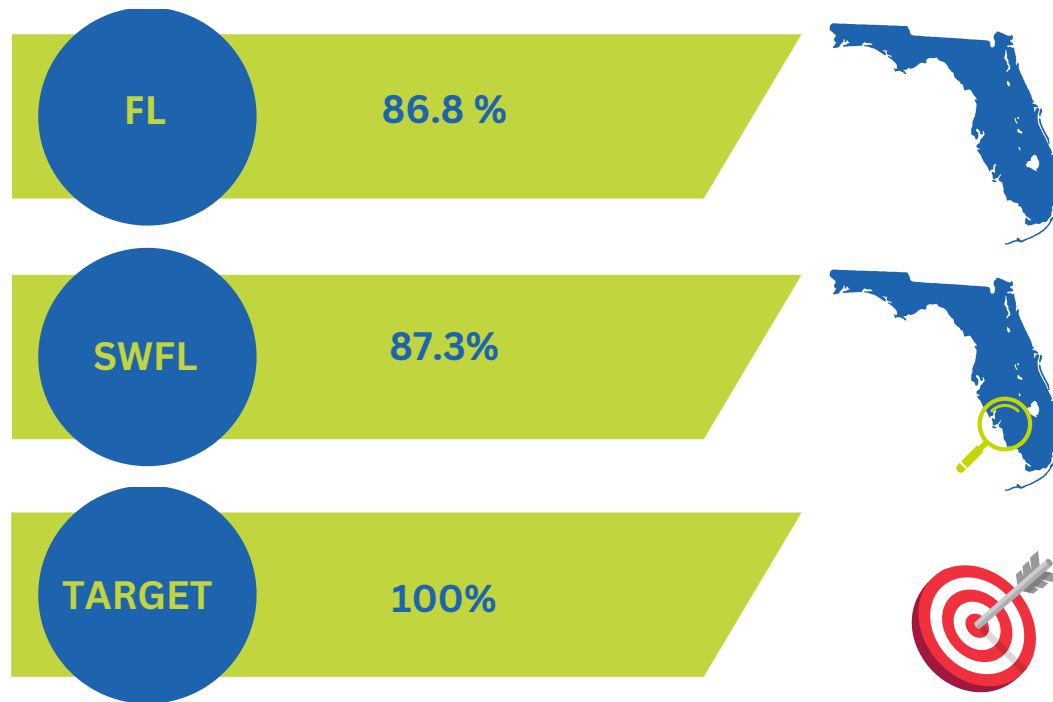
Demonstrate a decrease over the past 3 years in the percentage of residents living in an urban or rural food desert.

Outcome 3.1 Demonstrate an increase over the past 3 years in the percentage of people who are food secure.

This outcome acts as a critical indicator, underscoring the importance of ensuring access to sufficient, nutritious food, for an active, healthy lifestyle. Given its links to numerous social and health challenges, addressing food insecurity has become a vital public health priority.

Food Access & Nutrition

Figure 9 – Percentage of overall (i.e., all ages) residents who are food secure



Source: Feeding America (2022)

Metric 3.1.1 percentage of overall (i.e., all ages) residents who are food secure: This metric measures the proportion of overall (i.e., all ages) individuals in each area who have consistent access to adequate food. According to recent data from Feeding America, food security rates in SWFL Counties range from 83.1% in Hendry County to 88.3% in Collier County. Tracking this metric is crucial for identifying areas of need, informing resource allocation, and developing targeted strategies to improve food access and reduce hunger in local communities. In SWFL 87.3% of individuals reported being food secure in 2022. At the county level this represents 163,468 (86.2%) individuals in Charlotte County, 335,313 (88.3%) individuals in Collier County, 10,149 (83.4%) individuals in Glades County, 33,141 (83.1%) individuals in Hendry County, and 676,472 (87.3%) individuals in Lee County.

Food Access & Nutrition

Metric 3.1.2 percentage of children (i.e., <18 years) who are food secure: This metric measures the proportion of children (i.e., <18 years) who have consistent access to sufficient, safe, and nutritious food. Tracking this metric is essential as it provides insights into community well-being, guides resource allocation for food assistance programs, and helps monitor the effectiveness of food security initiatives. In SWFL **82.2%** of children are food secure.

Figure 10 – Percentage of children (i.e., <18 years) who are food secure

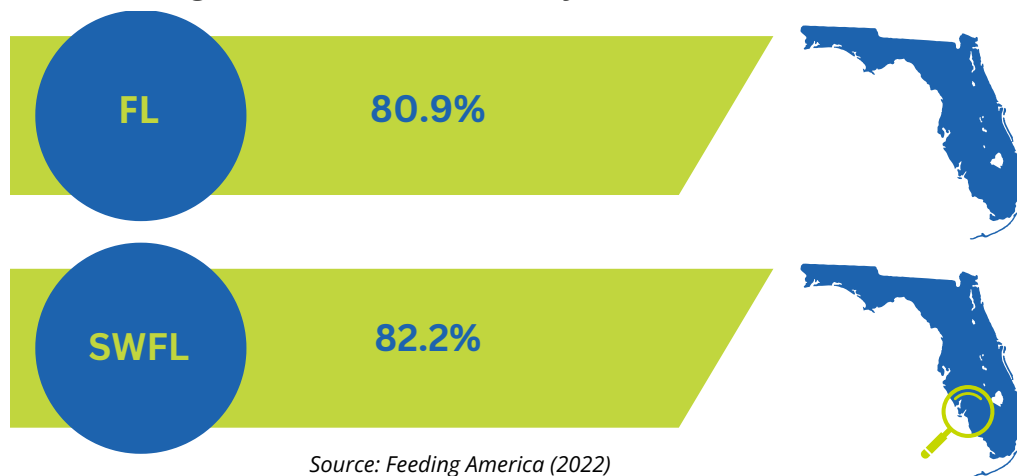
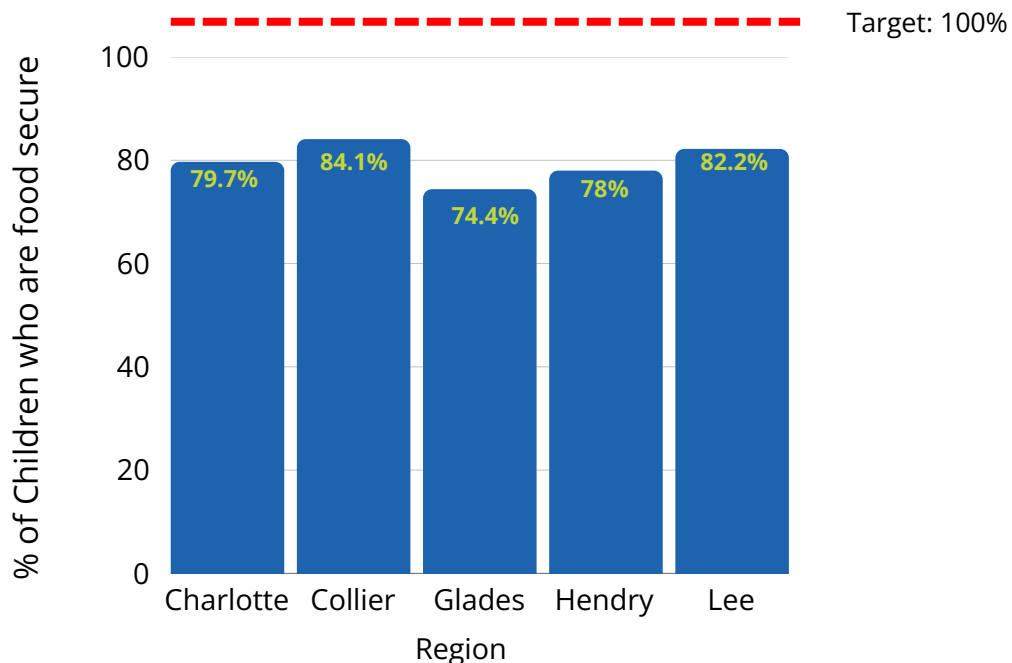


Figure 11 – Percentage of children (i.e., <18 years) who are food secure by county



Source: Feeding America (2022)

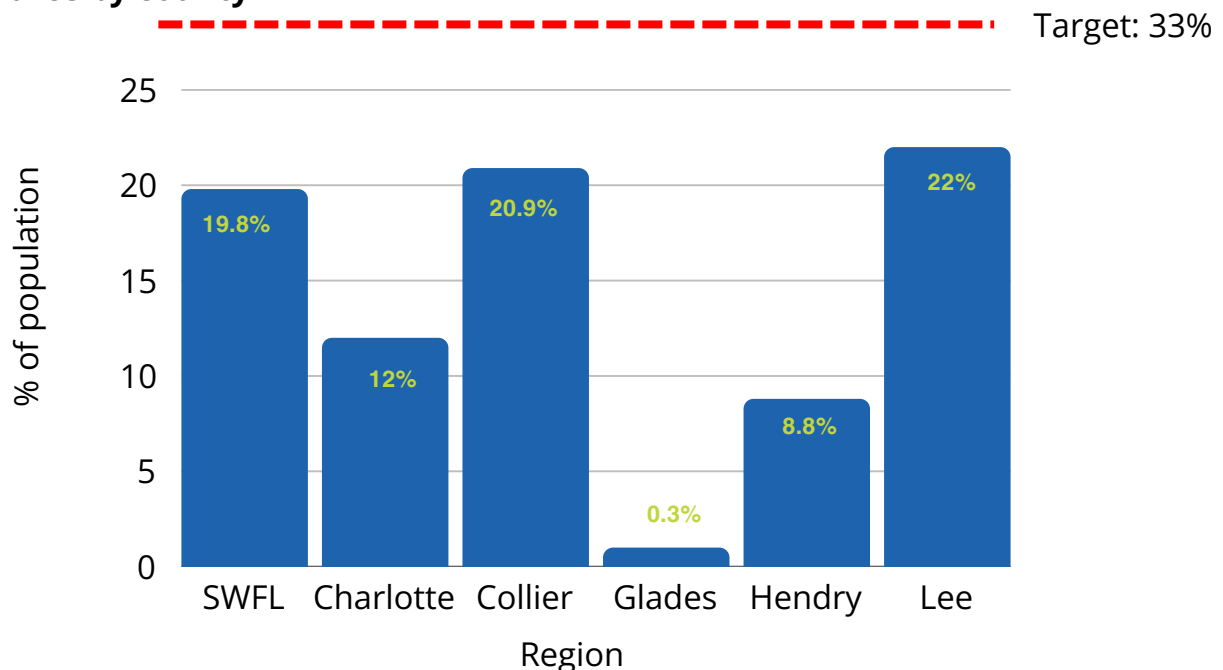
Food Access & Nutrition

Outcome 3.2 Demonstrate a decrease over the past 3 years in the percentage of residents living in an urban or rural food desert.

This outcome assesses the proportion of individuals lacking access to affordable and nutritious food, with a primary focus on decreasing the percentage of individuals who reside in an urban or rural food desert.

Metric 3.2.1 Population Living Within ½ Mile of a Healthy Food Source, Percent of Population: The Population Living Within 1/2 Mile of a Healthy Food Source metric measures the percentage of residents with convenient access to nutritious food options, which is essential for promoting healthy diets and reducing chronic disease risk. Tracking this metric helps to identify areas lacking food accessibility and informs targeted interventions to improve community health. Current data shows that Lee County has the highest percentage of people who live within 1/2 mile of a healthy food source, at 22.0%, while Glades County has the lowest at just 0.3%, highlighting significant disparities in food access across different communities. In SWFL **19.8%** of people reported living within 1/2 mile of a healthy food source.

Figure 12 – Percentage of population living within 1/2 mile of Healthy Food Source by county

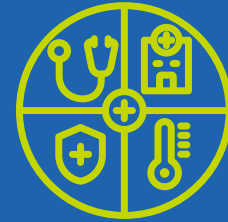


Source: FLHealthCHARTS (2022f) & USDA (2022)

2023 Baseline Report

Health Systems

Health Systems outcomes serve as indicators of regional efforts to establish and maintain high-quality, accessible, and responsive local healthcare networks. These outcomes reflect the effectiveness of a community's health infrastructure in meeting the diverse needs of its population. In a community, the health system is a complex network of primary doctors, mental health providers, dentists, pediatricians, and other health professionals, and includes different types of health insurance coverage. The coalition monitors seven key metrics within the health system to assess access to care and quality of care. By analyzing these metrics across the region, we can identify opportunities for improvement in specific communities and inform effective health promotion strategies.



Outcome 4.1:

Demonstrate that the counties are top U.S. performers in regards to quality of care.

Outcome 4.2:

Demonstrate that the counties are top U.S. performers in regards to access to health care.

Outcome 4.1 Demonstrate that the counties are top U.S. performers in regards to quality of care.

Outcome 4.1 focuses on quality of care. This outcome assesses the degree to which health services increase the likelihood of positive health outcomes, with a primary focus on preventable hospital stays and mammography screenings. Measuring quality of care allows us to understand how the health care system is performing and identify weaknesses and opportunities for improvement.

Health Systems

Metric 4.1.1 Preventable hospital stays: Preventable hospital stays evaluate the rate of hospital stays for ambulatory-care sensitive conditions per 100,000 Medicare enrollees. Tracking the rate of preventable hospital stays for ambulatory-care sensitive conditions is critical as this measure can act as an indicator of the quality of outpatient care and the efficiency of a health system. Based on data from County Health Rankings, the regional rate of preventable hospital stays is **3,418 per 100,000** Medicare enrollees.

Figure 13 – Preventable hospital stays per 100,000 Medicare enrollees

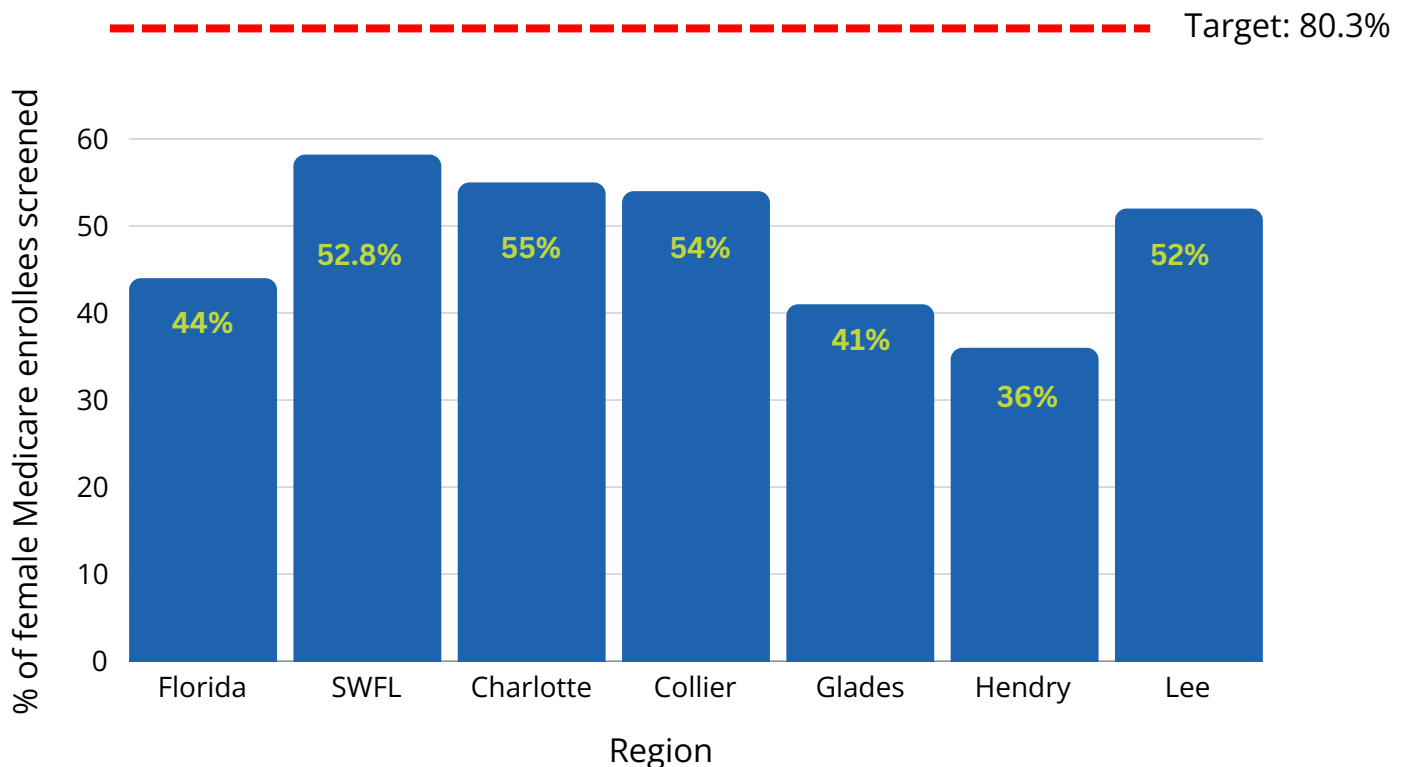


Source: County Health Rankings (2022) & United Health Foundation (2021)

Health Systems

Metric 4.1.2 Mammography screenings: This metric evaluates the percentage of female Medicare enrollees ages 65-74 who received an annual mammography screening. Tracking this metric is of particular importance given that breast cancer is the most common type of cancer among women in Florida. Further, evidence shows that obtaining an annual mammography screening can reduce breast cancer mortality. This metric falls under quality of care because physician referrals and satisfaction with physicians are key drivers of breast cancer screening. Based on data from County Health Rankings, **52.8%** of female Medicare enrollees received a mammography screening in SWFL.

Figure 14 – Mammography screening



Source: County Health Rankings (2022) & Office of Disease Prevention and Health Promotion (n.d. -a)

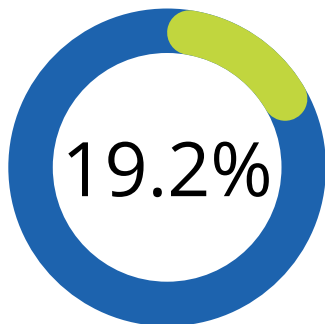
Health Systems

Outcome 4.2 Demonstrate that the counties are top U.S. performers in regards to access to health care.

Outcome 4.2 focuses on access to health care. This outcome evaluates metrics associated with individuals' ability to obtain essential health care services. These essential services include access to primary care physicians, dentists, mental health providers, and prenatal care. Additionally, health insurance coverage is a central issue, as affordability plays a crucial role in ensuring accessibility to health care services.

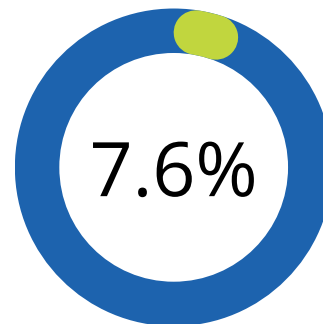
Metric 4.2.1 Percentage of the population under 65 without insurance (Uninsured): Based on data provided by County Health Rankings, the percentage of the population that is uninsured in SWFL is **19.2%**. Lack of health insurance coverage is a significant barrier to accessing health care services and leads to more serious health consequences. Thus, this metric is a focal point of our regional efforts to improve access to health care.

Figure 15 - SWFL Percentage Uninsured



Source: County Health Rankings (2022)

Figure 16 - Target, Percentage Uninsured



Source: Office of Disease Prevention and Health Promotion (n.d. -c)

Health Systems

Metric 4.2.2 Ratio of the population to primary care physicians: The ratio of primary care physicians is a key indicator of access to care. The ratio of primary care physicians is of particular interest, given that ratios of primary care physicians have been associated with overall better health outcomes and a lower total cost of health services. Per County Health Rankings, in SWFL, the ratio of the population to primary care physicians is **1,493:1**.

Note: This metric currently lacks a reliable target, which places it in the developmental phase.

Figure 17 – Ratio of the population to primary care physicians

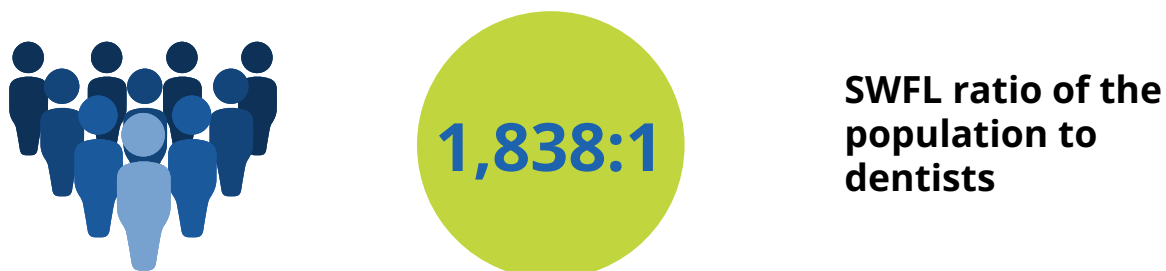


Source: County Health Rankings (2023)

Metric 4.2.3 Ratio of the population to dentists: The ratio of the population to dentists acts as a key metric for assessing the availability and potential access to oral healthcare services in a specific geographic area. Working to improve this metric is critical for reducing the incidence of dental diseases, which in turn promotes better overall health and reduces the risk of complication from untreated oral health issues. Based on data provided by County Health Rankings, in our region, the ratio of the population to dentists is **1,838:1**.

Note: This metric currently lacks a reliable target, which places it in the developmental phase.

Figure 18 – Ratio of the population to dentists



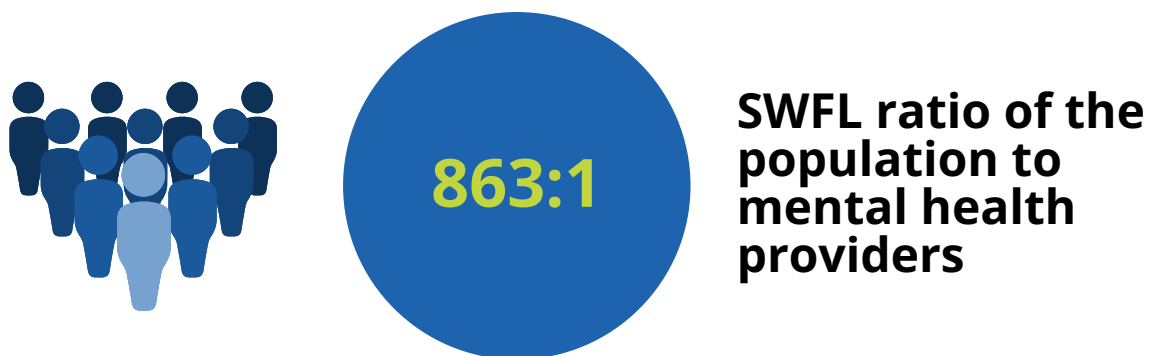
Source: County Health Rankings (2022)

Health Systems

Metric 4.2.4 Ratio of the population to mental health providers: This metric assesses the ratio of the population to mental health providers within SWFL. Based on data provided by County Health Rankings, the ratio of the population to mental health providers is **863:1**. Evaluating this indicator is crucial as it provides direct insight into the accessibility of mental health services within our community.

Note: This metric currently lacks a reliable target, which places it in the developmental phase.

Figure 19 – Ratio of the population to mental health providers

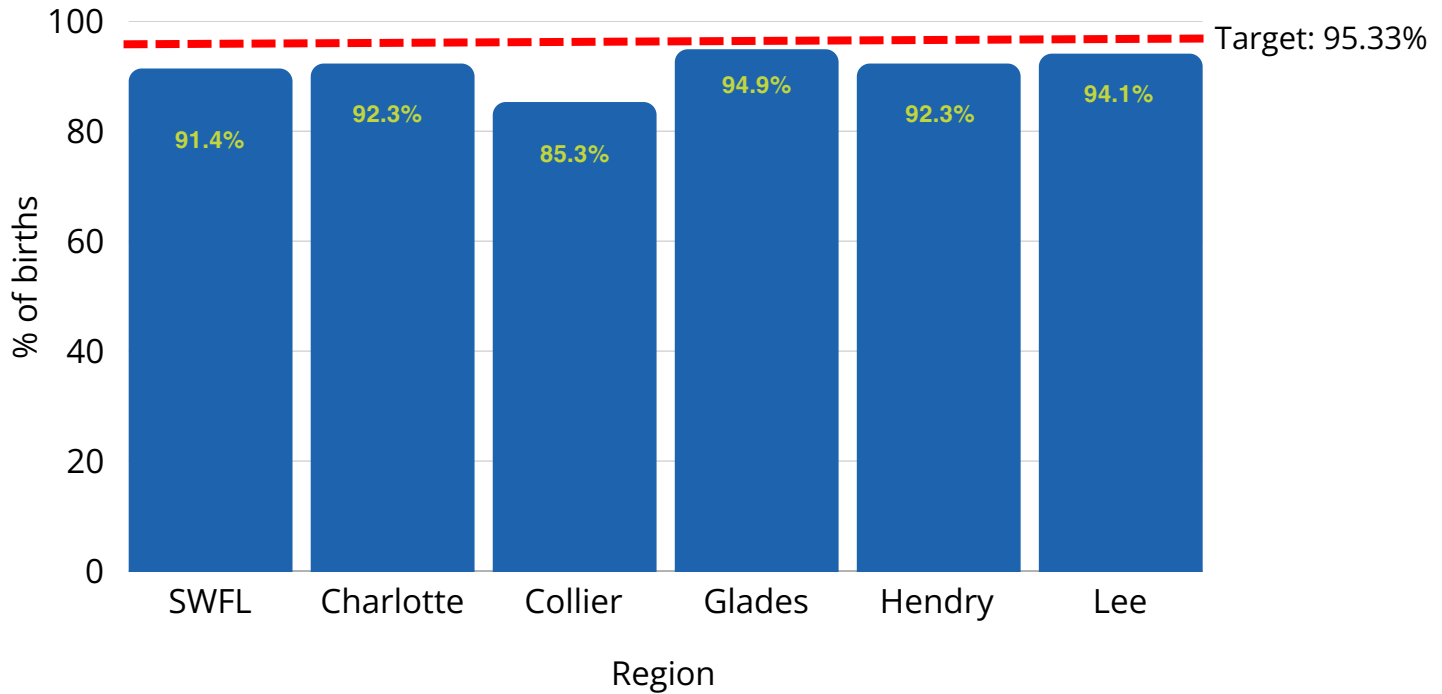


Source: County Health Rankings (2022)

Metric 4.2.5 Births to Mothers Initiating Prenatal Care in a Known Trimester: Initiating prenatal care can help to keep a mother and her baby healthy. Babies born to mothers who do not receive prenatal care are three times more likely to have a low birth weight and five times more likely to die compared to those whose mothers do receive such care. Thus, understanding progress towards this metric is imperative. Based on FLHealthCHARTS, in our region, **91.4%** of births are to mothers who began prenatal care at a known point during their pregnancy, whether in the first, second, or third trimester. This means that our region falls within the 4th quartile (i.e., least favorable), showcasing room for growth to reach our target of being within the 1st quartile (i.e., 95.33% - 98.65%).

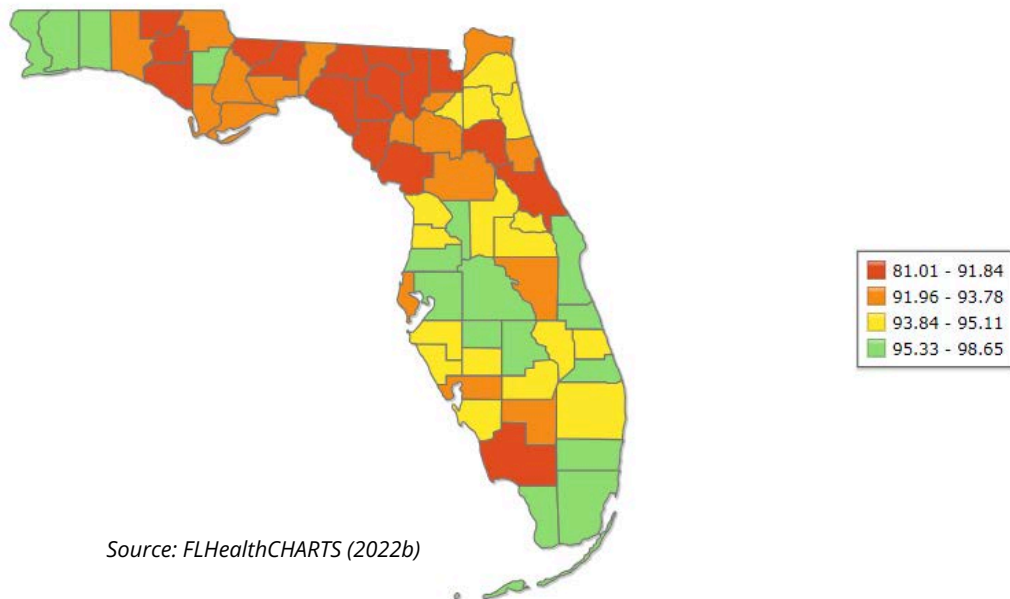
Health Systems

Figure 20– Births to Mothers Initiating Prenatal Care in a Known Trimester, Percent of Total Births, County and Region Comparison



Source: FLHealthCHARTS (2022b)

Figure 21 – Births to Mothers Initiating Prenatal Care in a Known Trimester, Percent of Total Births, Statewide Comparison



Source: FLHealthCHARTS (2022b)

Glossary

Developmental Target: addresses an important health issue that lacks a reliable target, with the target still in the developmental phase.

Health and Wellness Coalition (H&WC) – a cross-sector health and wellness initiative in SWFL with the goal of transforming the region to be among the healthiest communities in the nation by exceeding the 90th percentile for Health Indicators (Length of Life and Quality of Life) by 2040.

Health Outcome: health outcomes represent how long people live on average within a community, and how much physical and mental health people experience in a community while they are alive. Health outcomes include length of life, and quality of life.

Health Factors: health factors represent those things we can modify to improve the length and quality of life for residents. They are predictors of how healthy our community can be in the future.

Metric – collected data that help measure against a stated goal.

Region – Charlotte, Collier, Glades, Hendry, and Lee Counties.

Southwest Florida (SWFL) – a diverse region of beaches, urban centers, and sparsely populated rural areas with a population of 1,442,738 (2022) encompassing the five counties of Charlotte, Collier, Glades, Hendry, and Lee on the southwestern coast of Florida.

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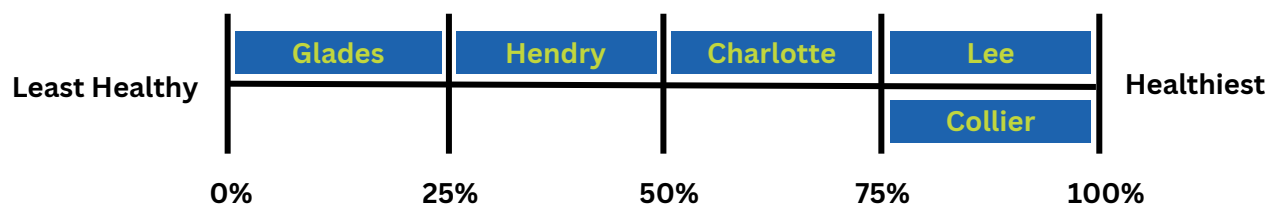
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County Health Rankings

Figure 2 illustrates the health outcome rankings for Southwest Florida counties, highlighting significant disparities within our region. Collier and Lee Counties rank in the highest quartile (75%-100%). Charlotte County is in the upper-middle quartile (50%-75%), Hendry County falls in the lower-middle quartile (25%-50%), Glades County faces the most significant health challenges in our region, ranking in the lowest quartile (0%-25%).

This county-level comparison underscores the notable health disparities present within our region, with some counties achieving more favorable health outcomes while others struggle to meet basic health benchmarks.

Figure 2 - Health Outcomes, County Rankings



Source: County Health Rankings (2022)

Length of Life & Quality of Life

Premature Death

Tracking years of life lost due to premature death rather than overall mortality, focuses attention on deaths that might have been prevented. This measure emphasizes deaths of younger persons, whereas statistics that include all mortality are dominated by deaths of elderly.

Live Births with Low Birthweight

Tracking live births with low birthweight is a way to monitor a population's health and identify trends in reproductive outcomes. Low birth weight is a key indicator for long-term maternal malnutrition, poor health care during pregnancy, and exposure to health risks for the mother.

Poor Mental Health Days

Poor mental health days can be caused by depression, anxiety, stress, and much more. These conditions can in turn result from a broad range of things from people with disabilities and people living with chronic conditions, to childhood abuse, social disadvantages, and discrimination. Tracking this indicator allows for understanding of mental health burdens within a community, enabling targeted interventions and policy changes to address specific needs.

Poor or Fair Health

Tracking poor or fair health is crucial because it acts as a key indicator of the overall health and well-being of a population. This highlights potential areas of concern like chronic disease prevalence, access to healthcare, and social determinants of health.

Poor Physical Health Days

Tracking poor physical health days provides valuable insights into overall health of a population. People with chronic physical illness often have difficulties maintaining a job, and as a result, have a hard time affording care. Poor physical health days can lead to financial burden, and for example lead to a decrease in how much someone can afford to purchase healthy food, housing and transportation.

Outcomes

Active Living

1.1 Demonstrate 20% or less of adults aged 18+ report no leisure time physical activity within the past month.

1.2 Increase the percentage of students (i.e., middle & high school) who were physically active for at least 60 minutes on all seven of the past seven days.

Behavioral Health

2.1 Demonstrate the timely provision of mental health and substance abuse treatment programs and services.

Food Access and Nutrition

3.1 Demonstrate a decrease over the past 3 years in the percentage of residents living in an urban or rural food desert.

3.2 Demonstrate an increase over the past 3 years in the percentage of people who are food secure.

Health Systems

4.1 Demonstrate that the counties are top U.S. performers in regards to quality of care.

4.2 Demonstrate that the counties are top U.S. performers in regards to access to health care.

Metrics

	METRIC	YEAR	SWFL	TARRGET
Active Living				
1.1.1	Percentage of Adults who are Sedentary	2022	27%	20%
1.2.1	Middle School & High School Students Physical Activity	2022	19.6%	30.6%
Behavioral Health				
2.1.1	Behavioral/ Mental Health Professionals, Rate per 100,000	FY 21-22	88.3	188.5
2.1.2	High School Students who have Experienced Four or More Adverse Childhood Experiences	2022	25.2%	19.6%
2.1.3	Age-adjusted Deaths from Suicide, Rate per 100,000 Population	2022	19.28	12.8
Food Access & Nutrition				
3.1.1	Percentage of overall (i.e., all ages) Residents who are Food Secure	2022	87.3%	100%
3.1.2	Percentage of Children (i.e., <18 years) who are Food Secure	2022	82.2%	100%
3.2.1	Population Living Within 1/2 Mile of Healthy Food Source, Percentage of Population	2022	19.8%	33%
Health Systems				
4.1.1	Preventable Hospital Stays	2022	3,418	1864
4.1.2	Mammography Screening	2022	52.8%	80.3%
4.2.1	Percentage of Population Under 65 without insurance	2022	19.2%	7.6%
4.2.2	Ratio of the Population to Primary Care Physicians (No Glades County Data Available)	2023	1493:1	Dev
4.2.3	Ratio of the Population to Dentists	2022	1838:1	Dev
4.2.4	Ratio of Population to Mental Health Providers	2022	863:1	Dev
4.2.5	Births to Mothers Initiating Prenatal Care in Known Trimester	2022	91.4%	95.33%